STI Updates 2026

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How do we make this interesting???

Important topic, changing guidelines and prevalence… but the best way to keep your attention……

No disclosures



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About me…..

Proud Gator PA….

Graduated 2009 from UF College of Medicine PA program.

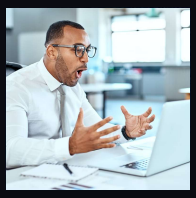


Daughter of two pioneer PAs.

Why am I here?

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Who needs to know about STIs?



- Most obvious:
  - OB-GYN
  - Emergency Department
  - Health department
  - Family practice
- Less obvious:
  - Pediatrics
  - ENT (70% oropharynx cancers thought to be attributed to HPV)
  - GI (~90 % of anal cancer related to HPV)
  - Geriatric population

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The numbers from World Health Organization…..

- Ages 15-49, more than one million curable STIs are acquired every day worldwide.
- An estimated 8 million adults between 15-49 were infected with syphilis in 2022.

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WHO numbers….

- HPV infection is associated with over 311,000 cervical cancer deaths per year.
- Eight pathogens are linked to the greatest incidences of STIs: 4 are curable: syphilis, gonorrhea, chlamydia, and trichomoniasis. The 4 other are viral infections: hepatitis B, HSV, HIV, and HPV.

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Condoms and vaccines…..

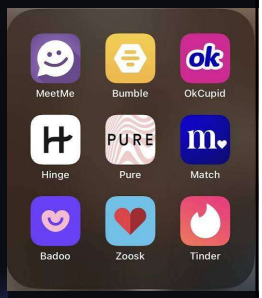


Condoms offer the most-effective method to protect against STIs. Vaccines for Hep B and HPV are highly effective and represent major advances in STI prevention.

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Risk Factors….

- New sex partner in past 60 days.
- Condomless vaginal, anal, or oral sex with multiple sex partners or with a sex partner with multiple concurrent sex partners.
- Sex with partners recently treated for an STI.
- Trading sex for money, drugs, food, or housing.



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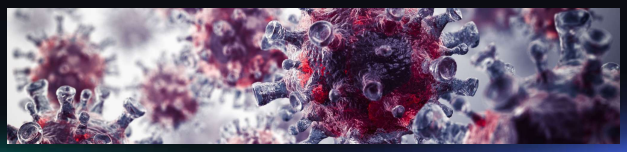
Risk factors cont.

- Sexual contact (oral, anal, penile, or vaginal) with people engaging in sex work.
- Substance use.
- History of incarceration



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Most common infections or concerns in the ED…



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Gonorrhea and Chlamydia

- These are the two most reported bacterial communicable diseases in the US.
- Often asymptomatic, can cause urethritis. Widespread extreme cases can cause all the different "itis" you can think of conjunctivitis, arthritis, meningitis, endocarditis.

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Gonorrhea and Chlamydia

- Simple chlamydia is doxy 100mg BID for 7 days. Previously, azithromycin 1 gram. Ongoing resistance and mutations, so recommendations continue to change.
- Simple gonorrhea, recommendation is 500mg IM (previously 250mg IM).
- If patient does not have symptom resolution….

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PID

Constitutes a series of infections involving pelvic organs, any variation of endometritis, salpingitis, tubo-ovarian abscess, and pelvic peritonitis.

- ***What does this mean for my care of patients in the ED?***

Previously thought to be predominantly GC/CT, but now maybe only 50% attributed to gonorrhea/chlamydia.



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PID continued….

- ❑Because of concern for multiple different pathogens: treatment for PID is ceftriaxone PLUS doxy PLUS metronidazole (oral abx for 14 days).
- ❑Outpatient or admission?
- ❑ADDITIONALLY: CDC recommends presumptive treatment of PID for women at risk of STIs if they are experiencing lower abdominal pain and no other cause of pain identified.

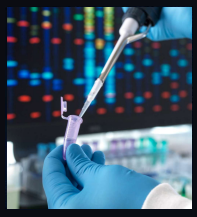
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PID cont.

- ❑What findings might we see on our imaging studies?
  - ❑USN/CT
    - ❑Fallopian tube thickening
    - ❑Increased thickness or vascularity of the endometrium
    - ❑Hydrosalpinx
    - ❑Pelvic fat stranding
    - ❑Reactive lymphadenopathy

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HSV-1 & HSV-2



- Estimated that 11.9% of people between ages 14-49 are infected. Many not diagnosed because of mild sxs that did not warrant treatment.
- Despite mild sxs, these people still shed the virus.

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HSV…..



- Usually, we swab active lesion. If suspicious, we proceed with treatment immediately and prior to any diagnostic tests being resulted. Type-specific serologic tests helpful if no lesions are present.
- HSV-2 is almost entirely sexually acquired. HSV-1 can be oral or genital. Treatment most often acyclovir, famciclovir or valacyclovir (cost is often determining factor).

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Making a comeback…Syphilis



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- Caused by bacterium Treponema pallidum.
- Historically: One of the most controversial studies in the last 100 years, Tuskegee study conducted from 1931-1972, collected data on over 400 black men whose syphilis was left untreated. Led to major reforms in clinical research.
- Recent years in US: in 2020 133,965 cases, in 2023 209,249 cases, in 2024 190,242 cases. Congenital syphilis has increased for many years in a row, with nearly 4,000 reported congenital syphilis cases in 2024.

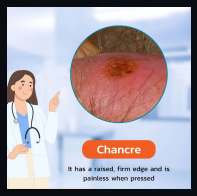
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Most common sites of chancre: genital, oral or anal region.



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Syphilis continued…



- Primary syphilis: what skin lesion??
  - Chancre. Median incubation before chancre appears in 21 days (3-90 days). Lesion begins as papule, which is usually but not always painless. Appears at site of inoculation. Then ulcerates and appears like classic chancre. Usually 1-2 cm ulcer with raised, indurated margin. Not exudative.
  - Syphilis becomes systemic with widespread dissemination of the spirochete. Leads to secondary and late syphilis (including neurosyphilis).

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Syphillis cont.

- Secondary syphilis can present in ways that impact virtually every organ system. With rise in cases, we now need to at least consider this in our differential of symptoms that are nonspecific and ongoing. Can cause derm, GI, cardiovascular, musculoskeletal, ocular, neuro, renal, etc.
- How has the Bicillin shortage impacted us at LRH?
  - Pregnant women
  - Doxy and Rocephin alternative agents for at least 14 days.

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HIV/AIDS



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- 1981 unusual cluster of PCP (now called pneumocystis jirovecii) and kaposi sarcoma in previously healthy men who have sex with men.
- Evidence that retrovirus was associated with AIDS in 1984 and a serologic test for HIV in 1985 served as the basis for developing diagnosis.
- Antiretroviral drugs were introduced in 1987, revolutionized by combo antiretroviral therapy in 1996.

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HIV/AIDS



- My patients 20+ years ago vs today….
- Testing early in my career and now…..
- Program offered at LRH through grants for free screening with blood draws.
- How did we screen in Haiti?

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HIV/AIDS



AIDS is the outcome of chronic HIV and consequent depletion of CD4 cells. AIDS is defined as CD4 count at or less than 200 cells per cubic millimeter OR the presence of any AIDS defining illness.

- ❖ Do I see many AIDS patients?
- ❖ How does it impact my workup and disposition?

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If we have time…



How do I approach having the patient consent to STI testing? What does that conversation look like?

-Married patient and diagnosing STI.

-Do people seem more open to testing recently as opposed to 15-20 years ago?

-PrEP: pre-exposure prophylaxis. First approved by FDA in 2012. Pills and long-acting injections.

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Sex Workers and Human Trafficking

We will encounter this population in the ED.

AWARENESS!

Do not miss an opportunity to screen or help.

Why am I mentioning this?

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Thanks for having me!

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Regional Director of APCs for ERG
Lakeland Regional Health ED

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