

Part I

How well are family planning clinics following chlamydia screening criteria for older women?

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Topics to be covered

- National guidelines
- IPP screening criteria
- Case study—Region X
 - FP—Title X CT testing and other services
 - IPP
- Efforts to improve compliance
- Future issues

Background: National Guidelines

- National recommendations support “targeted” screening for women over age 24 or 25:
- CDC (2006): screen women **over age 25** with risk factors
 - new sex partner
 - multiple sex partners, or
 - recent CT infection (within previous 12 mos)
- U.S. Preventive Services Task Force (2006): screen women **over age 24** if at risk
 - history of chlamydial or other sexually transmitted infection
 - new or multiple sexual partners
 - inconsistent condom use
 - exchanging sex for money or drugs
 - African-American or Hispanic ethnicity
 - incarcerated populations,
 - military recruits
 - patients at public sexually transmitted disease clinics

IPP criteria for screening older women

- Regional IPP data codebooks
 - Chlamydia screening criteria
 - Data elements—CDC core and enhanced items
- Most regions allow ‘sub-regional’ screening criteria
 - Needs of each state, locality, population density
- Screening criteria—conceptual common ground
 - Age
 - STI history
 - Visit type
 - Risk behaviors
 - Signs or symptoms

Screening older women--Regional variation

- Screening criteria—less common ground on the details
- Age criteria—testing all women annually at age less than ...30, 26, 25, 23, 21, 19
- Screening ‘older’ women...
 - Not recommended
 - Specific clinical and/or behavioral measures
 - General guidance (test if she is “at risk”...)
 - Reliance on clinician
- Past STD history
 - Chlamydia, other STDs
 - Within: 3-4 months, 1 year, 3 years

Measurement—Regional and state variation

- Risk behavior measures and methods
 - Timeframe: 30, 60, 90 days, a year...or no time period
 - Can only choose 1 from a list of behaviors
 - Choose from a list of single and compound items
 - Can choose specific behaviors (multiple items available)
 - With explicit no/yes responses
 - With only a 'yes' response available
 - Risk behaviors not specified, left up to clinician
- Risk behaviors specified
 - But not included in regional data set
 - Included in regional data set but not collected
 - Included in regional data set but optional

Issues in monitoring screening criteria

- Holly Howard study—national recommendations support screening older women, but those criteria are:
 - Not well defined
 - Inconsistent
 - Inefficient
- We might add, criteria are:
 - Not well operationalized
 - Not collected
 - Not assessed (empirical basis for criteria)
- Other issues
 - Age--truncated/rounded? (only an issue at group boundaries)
 - Identifiers
 - Event
 - Client—within clinic, agency, state, region

IPP screening criteria summary

- Regional IPPs and project areas have wisely/foolishly and systematically/anecdotally determined regional/state/local screening guidelines for older women via empirical/theoretical approaches
- We then measure none, some or all of the criteria and use them rarely/sometimes/most of the time to assess how these criteria are working with or without taking into consideration other possibly relevant issues such as changes in community or client populations over time, changes in test type, and changes in program funding or focus.
- No problemo
- A modest case study follows

How well are FP clinics following criteria? A Region X case study

- Region X—AK, ID, OR, and WA
 - Title X FP Clinic Visit Records (CVRs)—all service events, 2006
 - IPP data—CDC core and enhanced items, 2000 - 2006

Title X FP data

- FPAR 2006 CT coverage
 - Can not estimate specific 25-29 age group—CT testing data not broken out above age 24 y
 - CT coverage across regions for FP clients 25+ ranged from 23% - 41%

Region X analysis of CVRs

	CT Coverage
Age 25-29 years	24%
Age 30+ years	20%

- Now, what proportion of this CT coverage among older women met Region X IPP screening criteria?

IPP Region X screening criteria

- IPP FP clinic screening criteria, 2000
 - All women aged < 25 y, annually
 - Women > 24 y if one or more of the following:
 - Sexual risk behaviors—multiple, new, symptomatic SP, past 60 d
 - Clinical signs (MPC, ectopy, friable cervix, PID)
 - IUD insert
 - Pregnant
 - Exposed to CT, as visit reason
 - Prior CT+, past year
- IPP FP clinic screening criteria changed in 2003

Why and how to change criteria

- Why? I don't know. Maybe to make things easier for clinics. Maybe to improve program efficiency.
- Criteria developed 2001/2002
 - Universal screening data set, STD and other clinics, 1998-2000
 - Predictors of CT, univariate/multivariate stratified by test and site type
 - Assessed performance of ~12 different sets of screening criteria
 - Calculated trade-offs (ROC curves); tabulated # and % women screened versus # and % positives found
 - Assessed feasibility of different sets of criteria

Selective screening criteria characteristics

- IPP FP clinic screening criteria, 2003
 - Same as 2000, except excluded new/multiple SPs and exposure to STDs other than CT

	Tests Met Criteria	CT+ detected
Old 2000 criteria	87%	95%
New 2003 criteria	75%	90%

- Given the Region X IPP screening criteria, what was project performance for older women?

Region X IPP FP data 2000 - 2006

- Region X IPP FP clinics, 2000 - 2006
 - 132 clinics, in project 6 of 7 years, 50+ tests/yr.
 - 698,045 CT tests among female clients
 - Age
 - 10 – 24 years 78%
 - 25 – 29 years 11%
 - 30+ years 11%
 - Met screening criteria 90%
- From 2000 – 2006, % women aged 25+ fell from 27% to 19% of all tests
- Appears to vary from other regions where testing levels among 'older' women may approach 50%

IPP data 2000 - 2006, women age > 24

Characteristic	% Met Criteria
Visit year	
2000	51%
2001	48%
2002	52%
2003	45%
2004	46%
2005	50%
2006	54%
Age, 25 – 29 years	50%
State	
Alaska	26%
Idaho	42%
Oregon	49%
Washington	54%

CT and screening criteria, women > 24

Characteristic	Overall	% Chlamydia Positive	
		Criteria Not Met	Criteria Met
Total	2.8%	2.2%	3.5%
Age			
25-29 years	3.8%	2.6%	4.7%
> 29 years	1.8%	1.3%	2.2%
Test type			
Non-NAAT	2.2%	1.5%	2.7%
NAAT	3.5%	2.4%	4.2%

Tests that met screening criteria were 60% more likely to be CT+ compared to those outside criteria (after adjusting for age and test type)

Clinic variability and screening compliance

FP client CT test visits aggregated to the clinic level, n = 132 FP clinics, 2000-06, summary data

Characteristic	Mean	Range	
Tests met criteria, total sample	89%	62%	100%
Tests among women aged 25+	23%	<1%	63%
Tests meeting SSC, women 25+	54%	19%	86%

Clinic variability and screening compliance

- For women aged > 24, association between % tests meeting criteria and
 - % tests in women age >24 yrs $r = - 0.26$ ($p < 0.01$)
 - N of tests, women age > 24 yrs $r = - 0.12$ (NS)
- Meeting criteria among older women was inversely related to proportion of older women tested, but unrelated to total testing done or volume of tests among older women

Speculations on Region X compliance

- State monitoring and interventions (WA)
 - Active assessment and communication
 - Financial consequences
 - Increased screening criteria compliance
- Provider education (OR)
 - Feasible, particularly when coordinated with site visit activities
 - Requires significant time and resources
- Local conditions and information systems (AK)
- Data collection
 - Do risk measures vary over time or across populations?
 - How to balance more complex data collection vs. practicality
- To what extent is compliance an individual, clinic, agency or system issue?

Summary—Screening criteria and older women

- Significant variation across regions in:
 - Screening criteria
 - Data collection
 - Operationalization of measures
- In Region X:
 - % of 'older' women tested is relatively small
 - N of older women tested per year is declining and comprise about 20% of total IPP FP test records
 - About half of tests in older women do not meet criteria
 - Criteria matter, along with test type, in terms of yield
 - There are many paths toward improving compliance

Future issues

- History of screening criteria decision making within regions
- Variation in who is included in IPP
- Data collection
- How big is the problem? % of tests that do not meet criteria
- Trade-offs between regional and local screening criteria
- Addressing variation within project areas in screening compliance

Thank you.

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