

PHYSICAL HEALTH & WELL-BEING

INDICATOR #18 Chlamydia Incidence

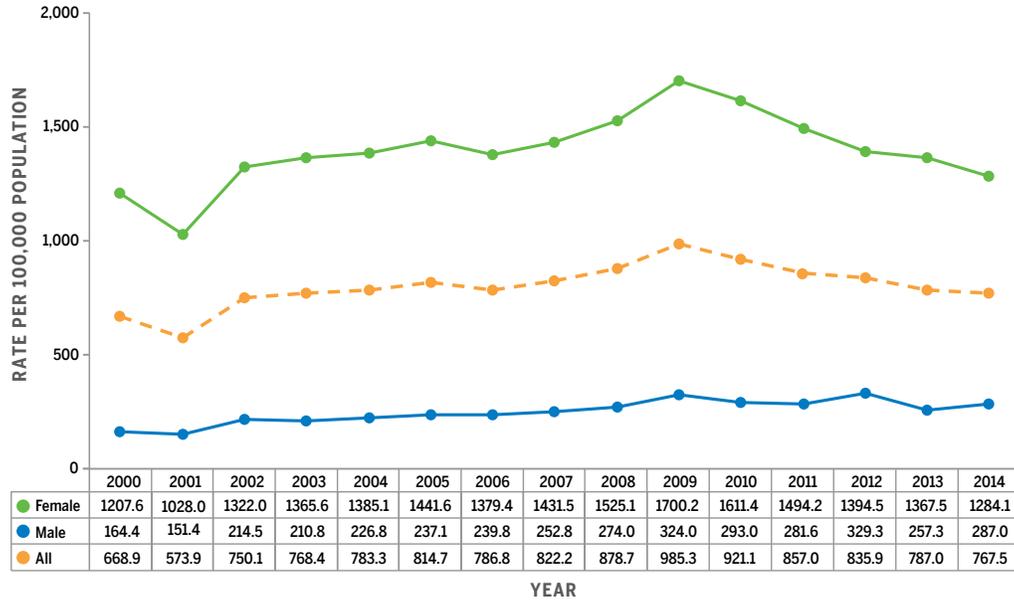
DEFINITION

INDICATOR #18 — Incidence of genital chlamydia among youth age 15–19, expressed as a rate per 100,000, by sex.

KEY MESSAGES

- ▶ **Chlamydia** is the most commonly reported sexually transmitted infection (STI) in BC.^{1,2}
- ▶ Although the health consequences of chlamydia are typically limited, a history of chlamydia infection is an important risk factor for pelvic inflammatory disease, infertility, ectopic pregnancy, and chronic pelvic pain. This is particularly concerning as the incidence of chlamydia is greatest among individuals 15–24 years old.^{1,3}
- ▶ Chlamydia is often asymptomatic. The male rate may reflect symptomatic infection that results in testing and diagnosis. In females, an infection may be undiagnosed until routine testing is done or until complications appear such as pelvic inflammatory disease.^{2–4} It is believed that females get tested more frequently—as part of a routine pelvic examination and Pap test¹— than males, because screening programs tend to target females and because males are often treated without diagnostic testing.³ Females also access health services more frequently than males in general.⁴
- ▶ There is evidence that chlamydia infections are associated with poorer socio-economic status, reflecting social vulnerabilities and disparities that require consideration of the social determinants of health and increasing equitable reach of prevention strategies, testing, and treatment.^{5,6}
- ▶ Many studies have shown that other STIs often coexist in young people with chlamydia and are often amplified in certain risk groups. Since chlamydia is the most prevalent STI in jurisdictions such as the US (1997),³ Canada, and BC (2014),¹ chlamydia diagnoses may allow health care practitioners to identify youth at-risk for a number of other things and identify a more vulnerable population for targeted health interventions.⁷
- ▶ The incidence of chlamydia may reflect risky sexual activity, such as not using condoms (condom use is an effective intervention to prevent acquisition of chlamydia). Thus, monitoring trends in chlamydia incidence among youth could be a proxy for sexual knowledge, skills, practices, and attitudes, particularly around negotiating condom use.^{2,8}
- ▶ The chlamydia incidence rate when calculated as a percentage of the total youth population is a significant underrepresentation of the rate among those who are sexually active.⁹
- ▶ As shown in Figure 18.1, there are substantial differences between sexes in chlamydia rates, with the female rate being much higher than the male rate.
- ▶ Figures 18.2 and 18.3 show that there are also key geographic differences in incidence of chlamydia across BC.

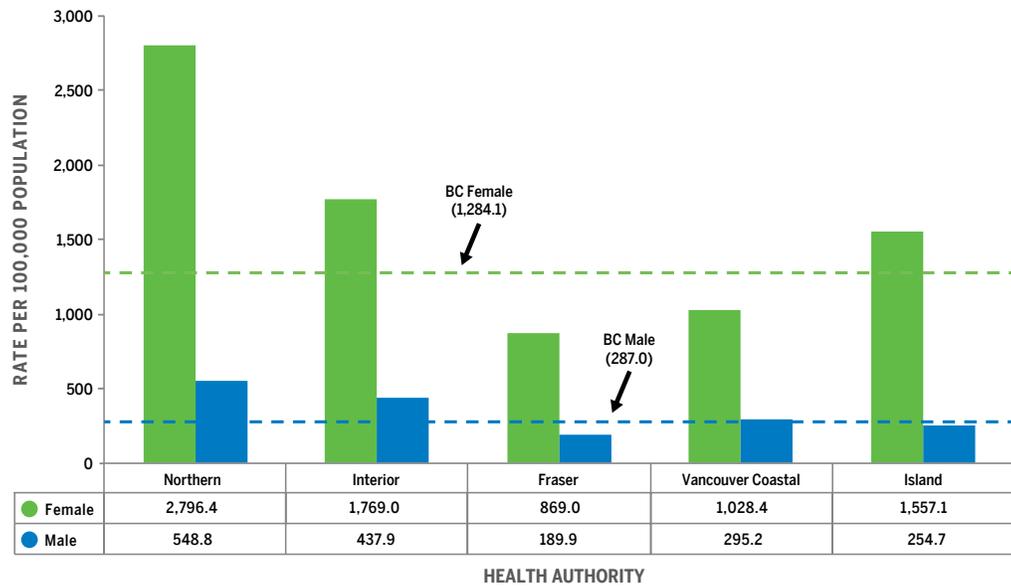
FIG 18.1 Chlamydia among Youth Age 15-19, Rate per 100,000 Population, by Sex, BC, 2000 to 2014



Note: See Appendix B for more information about this data source.

Source: BC Centre for Disease Control, Clinical Prevention Services. Extracted from Sexually Transmitted Infection Information System, data as of April 30, 2016. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

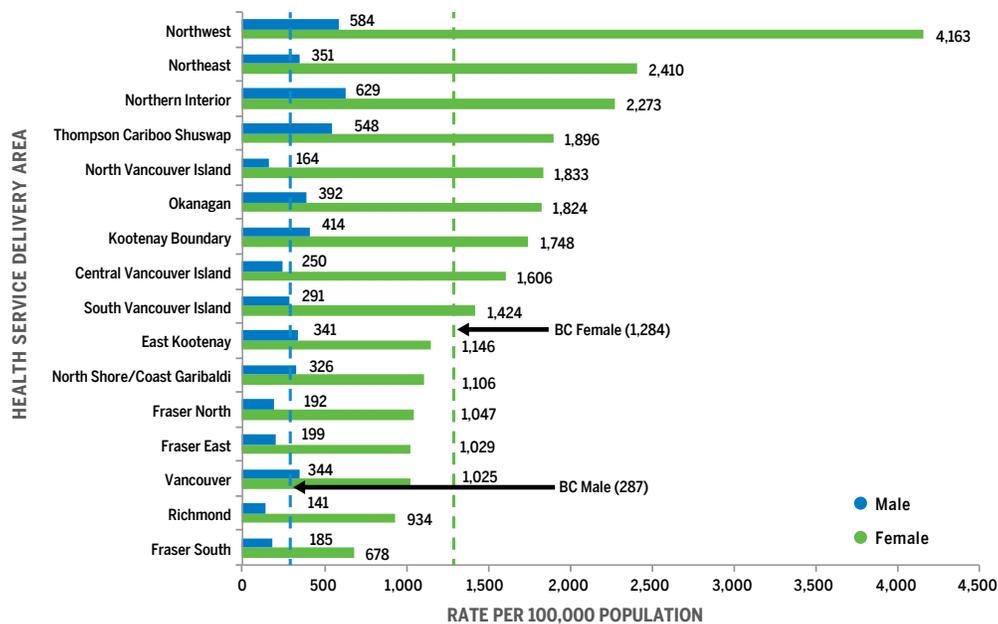
FIG 18.2 Chlamydia among Youth Age 15-19, Rate per 100,000 Population, by Sex and Health Authority, BC, 2014



Notes: Health authority is based on the residence of the child. See Appendix B for more information about this data source.

Source: BC Centre for Disease Control, Clinical Prevention Services. Extracted from Sexually Transmitted Infection Information System, data as of April 30, 2016. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

FIG 18.3 Chlamydia among Youth Age 15-19, Rate per 100,000 Population, by Sex and Health Service Delivery Area, BC, 2014



Notes: Health service delivery area is based on the residence of the child. See Appendix B for more information about this data source.
Source: BC Centre for Disease Control, Clinical Prevention Services. Extracted from Sexually Transmitted Infection Information System, data as of April 30, 2016. Prepared by the Surveillance and Epidemiology Team, BC Office of the Provincial Health Officer, 2016.

REFERENCES

- ¹ BC Centre for Disease Control. STI in British Columbia: annual surveillance report 2014. Vancouver, BC: BC Centre for Disease Control; 2015 [cited 2016 Apr 7]. Available from: http://www.bccdc.ca/resource-gallery/Documents/Statistics%20and%20Research/Statistics%20and%20Reports/STI/STI_Annual_Report_2014-FINAL.pdf.
- ² Public Health Agency of Canada. Canadian guidelines on sexually transmitted infections. Ottawa, ON: Public Health Agency of Canada; 2016 [cited 2016 Apr 7]. Available from: <http://www.phac-aspc.gc.ca/std-mts/sti-its/guide-lignesdir-eng.php>.
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- ⁸ Rotermann M. Sex, condoms and STDs among young people. *Health Rep.* 2005 May;16(3):39-45.
- ⁹ Mitchell K, Roberts A, Gilbert M, Homma Y, Warf C, Daly K, et al. Improving the accuracy of Chlamydia trachomatis incidence rate estimates among adolescents in Canada. *Can J Hum Sex.* 2015;24(1):12-18.