



TO: Chair and Members of the Board of Health

FROM: Emily Williams, Chief Executive Officer
Dr. Alexander Summers, Medical Officer of Health

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SEXUALLY TRANSMITTED INFECTION STRATEGY

Recommendation

It is recommended that the Board of Health receive Report No. 51-23 re: “Sexually Transmitted Infection Strategy” for information.

Key Points

- Sexually transmitted infections (STIs) continue to be a growing public health concern in Canada, with the rates of chlamydia, gonorrhea, and syphilis increasing across the population.
- The target and priority populations identified in local case incidence and risk factor data were predominately sexually active males and females of varying ages, depending on the infection: 15-29 year olds (chlamydia), 15-44 year olds (gonorrhea), and 20-59 year olds (syphilis). Other important reported risk factors included those who have unprotected sex, new sexual partners, men who have sex with men, those who engage in anonymous sex, women who have sex with women, and marginalized sexually active females.
- The Middlesex-London Health Unit needs to work in partnership with the broader Middlesex-London community to address increasing STI rates.

Background

With increasing sexually transmitted infection (STI) rates in Middlesex London, a project team was pulled together to complete a review of the community context as well as the identification of potential effective strategies. The following sources were used to gather evidence and informed the next steps:

- a review of moderate to high quality systematic reviews and meta-analyses of public health interventions addressing STIs;
- community partner interviews and an environmental scan of other public health units; and
- a review of the Ontario Public Health Standards to identify any gaps in sexual health services and alignment of potential interventions with the current mandate.

An assessment of the rates of sexually transmitted infections (STIs) reported in Middlesex-London indicated that between 2013 and 2022, there were 17,404 chlamydia infections reported among Middlesex-London residents. The reported number likely underestimates the actual number of chlamydia infections in the population, since the number of confirmed cases is based only on those who were tested and does not include those with asymptomatic infections or those who did not access testing. **Across the 10-year time-period, the local number and rate of reported chlamydia infections consistently increased in all but two years, peaking in 2019 at 437 reported cases per 100,000 population.**

Between 2013 and 2022, there were 2,256 gonorrhea infections and 779 syphilis (all types) infections reported among Middlesex-London residents. The majority of the syphilis cases were considered infectious syphilis (76%, n=592). During that same time frame, the number and rate of reported syphilis infections (all types) among Middlesex-London residents, including infectious syphilis, increased in every year, except in

2021. **In the 10-year period, the local rate of reported gonorrhoea cases more than tripled**, from 18 to 64 reported cases per 100,000 population, and **the rate of syphilis (all types) and infectious syphilis both increased six-fold**, from 6 to 33 reported cases per 100,000 population for syphilis (all types) and from 4 to 23 per 100,000 for infectious syphilis.

Identification of Effective Strategies

The strategies/interventions identified through the evidence review were synthesized using a SWOT analysis, (strengths, weaknesses, opportunities, and threats). Those interventions considered for the Middlesex-London community are:

- deliver interventions within partnerships and involve the target population in the design and implementation;
- increase STI testing, keeping in mind that the long-term impact on testing frequency and overall STI rate reduction is unclear;
- expand outreach services to include case management support for vulnerable syphilis clients; and
- ensure that sexual health education for children, adolescents, and young adults is comprehensive, and involves a multi-component approach including skill development.

Based on the comprehensive review and internal consultation the following interventions are being implemented:

- expanded distribution of up-to-date epidemiological data of increasing STI rates in Middlesex-London to health care providers, community partners, and the broader community;
- expanded efforts to mobilize community partnerships to take collective action to address STI rates within the identified target and priority populations;
- provision of screening and treatment information that health care providers and community partners need to support this work;
- development of additional testing options within the community to increase STI testing accessibility;
- assessment of potential expansion of MLHU outreach services to include case management support for vulnerable syphilis clients;
- continued support of sexual health programming in schools and review of the program; and
- ongoing commitment to community-wide initiatives to address the social determinants of health.

Next Steps

Increasing STI rates is a population public health concern in the Middlesex London Community. To address this issue, MLHU must work in partnership with the Middlesex-London community and key partners to address increasing STI rates. The 2023 review has provided a list of evidence-supported interventions to diagnose and prevent the ongoing transmission of sexually transmitted diseases more effectively. Work in this area will continue through 2023 and into 2024.

This report was prepared by Sexual Health Team, Environmental Health and Infectious Disease Division, and Population Health Assessment Surveillance Team, Public Health Foundations Division.



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