



Brent D. Sherard, M.D., M.P.H., Director and State Health Officer

Governor Dave Freudenthal

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Dear County Health Officer:

For the past several years, curable Sexually Transmitted Diseases within Wyoming have shown steady increases in morbidity. The increase in the number of Chlamydia Trachomatis (CT) infections within the state during CY 2005 closely mirrors the gradual increases in cases noted over the previous five-year time frame. Overall there was an 8% increase in the number of CT cases statewide compared with 2004 data. Counties experiencing significant increases in morbidity were Campbell (38%), Laramie (36%), Natrona (17%), and Sweetwater (25%). There are several factors which have influenced this increasing trend. The population of the state has increased by 13,000 people from the year 2000 to 2004. Counties gaining the most in population during that time frame were Campbell, Laramie, Lincoln, and Natrona. Approximately 25% of the total statewide population increase resulted from internal and international migration. Laramie, Lincoln, Natrona, Sublette, and Sweetwater counties gained the most in population due to migration, primarily influenced by the energy boom in the state. Of these counties, Laramie, Natrona and Sweetwater have experienced increases in CT. Wyoming anticipates another influx of approximately 8,000 new workers in the energy industry within the next year

Wyoming has also experienced a significant increase (62%) in the number of Gonorrhea cases (GC) reported in 2005 versus 2004. This trend was influenced by the same factors previously mentioned. Laramie and Natrona counties experienced the most dramatic increases in cases reported. Natrona County had a 363% increase in morbidity, Campbell County 100% and Laramie County experienced a 65% increase. During the last four months of 2005, it became increasingly evident the impact that methamphetamine has in the transmission of STDs. Several chains of gonorrhea infection were identified in Laramie and Natrona counties with known links to methamphetamine use. Field investigations conducted by Disease Intervention staff were frequently stymied by reluctance on the part of identified cases to release locating information on some partners, possibly for fear of repercussions. Some identified cases and contacts moved frequently, precluding prompt interviewing, partner identification and referral. Several of the cases were involved in high risk behaviors involving group sex activities, multiple sex partners and needle sharing activities.

A behavior related factor which is greatly impacting STD morbidity in the state is the increasing use of methamphetamine within sexually active populations. This is most frequently documented within the more densely populated areas: Laramie, Natrona Sweetwater and Campbell counties. These counties also experienced increases in the numbers of CT cases reported in 2005 versus 2004. Another contributing factor is the lack of DIS personnel (only 2.5 full-time employees) to cover the entire state, which increases the response time and fosters the possibility of re-infection of the patients diagnosed

In an effort to mount an effective Public Health response to the growing STD problem, the Department of Health is studying the option of utilizing the approach of Expedited Partner Therapy (EPT) and Partner Delivered Preventive Therapy (PDPT) which have been endorsed by the Centers for Disease Control and Prevention (CDC).

Both are designed to promptly treat steady or frequent partners of patients who have been diagnosed with GC and or CT. In EPT, the medications would be delivered by public health staff or Disease Intervention Specialists. The patient would be counseled regarding allergies, contraindications and sign an acknowledgment and waiver statement prior to receiving STAT oral antibiotics, (Azithromycin and/or Ciprofloxacin). The person would also be offered Rapid HIV testing. In PDPT, the patient delivers the medication directly to their partners, thus saving valuable time and reducing the possibility of re-infections.

I encourage your consideration, input and suggestions regarding implementing this response to the growing STD problem in Wyoming.

Sincerely,



Brent D. Sherard, M.D., M.P.H., Director
and State Health Officer
Wyoming Department of Health

BDS/GW/jg

Attachment: CDC Letter