

USPSTF Recommends Behavioral Counseling for STI Prevention

By Lisa Rapaport

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(Reuters Health) - Sexually active adolescents and at-risk adults should receive behavioral counseling to help prevent sexually transmitted infections, according to updated recommendations from the U.S. Preventive Services Task Force (USPSTF).

These recommendations are largely in line with previous USPSTF recommendations for intensive behavioral counseling, with sessions of at least 30 minutes, to prevent STIs among teens and adults at high risk for STIs. The new recommendations build on the guidance previously issued in 2014 by endorsing a wider range of counseling options, including some online and video options as well as shorter sessions.

Sexually transmitted infections, or STIs, are on the rise nationwide, with approximately 20 million new cases reported in the United States each year, Task Force member Dr. Melissa Simon of the Northwestern University Feinberg School of Medicine in Chicago told Reuters Health. Left untreated, STIs can lead to serious health complications including infertility, AIDS, and cancer, Dr. Simon said by email.

"The Task Force found that clinicians can help by providing behavioral counseling interventions to sexually active teens and adults at increased risk," Dr. Simon said. "If provided widely, these interventions have the potential to reduce STI rates by approximately a third."

Because STI rates are higher among adolescents than other populations, all teens are considered at-risk and good candidates for behavioral counseling, the USPSTF writes in recommendations published in JAMA.

Adults who are considered at risk for STIs include people who currently have an STI or have been treated for one in the previous year; people who don't consistently use condoms; people with multiple sex partners. Adults are also considered at risk if their sex partners are in populations with higher STI rates, including people who seek testing or care at STI clinics, sexual and gender minorities, people with HIV, people who inject drugs, people who have been in prison or jail, and people who exchange sex for drugs or money.

Behavioral counseling approaches that may work for people at risk for STIs include in-person sessions as well as support delivered via videos, websites, written material, phone calls, and text messages, according to the USPSTF recommendations.

Ideally, primary care clinicians could offer in-person behavioral counseling, refer patients to other providers to do this, or tell patients about options for assessing risk and getting support without seeing a clinician - such as online resources, text platforms, telephone help, or videos.

"There are a variety of effective behavioral counseling interventions clinicians can choose from," Dr. Simon said. "What's most important is that clinicians are attuned to the needs of the populations they serve and ensure that they are providing behavioral counseling about STIs to everyone who can benefit from it."

What's new in the latest USPSTF recommendations is the recognition that even brief interactions that involve a discussion of sexual health and STI prevention can positively impact patient behavior, said Dr. Jeanne Marrazzo, co-author of an editorial accompanying the study and director of the division of infectious diseases at the University of Alabama at Birmingham.

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"Clinicians often just need to open the door to a safe, comfortable place for these conversations to occur, and they can make a big difference, even if brief," Dr. Marrazzo said by email. "It can be very easy if the clinician is comfortable raising the issue and talking about it."

For guidance on best practices for initiating these conversations, Dr. Marrazzo recommended that clinicians seek out **resources available from the CDC-funded National Network of STD Clinical Prevention Training Centers (<https://bit.ly/3kTkCsg>) and Fenway Health Institute (<https://bit.ly/3kXnN2s>).**

"Clinicians can also help by creating a welcoming environment that acknowledges the diversity of our patients in terms of their sexual and gender identities," Dr. Marrazzo said.

SOURCE: <https://bit.ly/3h954OR> , <https://bit.ly/34dee9l> , <https://bit.ly/3h9Pe6N> and <https://bit.ly/348nsUB>
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