
How can Chlamydia be prevented?

There are several steps to take to help prevent Chlamydia infection, as well as other STD's

- Use condoms always even if you are on contraceptive hormones (must be put on prior to penile penetration).
- Using a diaphragm for contraception provides some extra barrier to infection.
- Limit your number of sexual partners! Know your partner & your partner's possible partners. Multiple partners increase your chance of infection.

Points to Remember:

1. Sexual contacts should be advised to seek evaluation and treatment. (Remember, partners may have *no* symptoms.)
2. Abstain from intercourse until treatment is completed (by yourself and/or partner).
3. Consider annual screening for Chlamydia in women, regardless of whether you have symptoms or have been exposed.

**USE
condoms**



**SAFE
SEX**

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Chlamydia



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Chlamydia

What is Chlamydia?

Chlamydia trachomatis is a *widespread*, sexually transmitted bacterial infection. Statistics indicate that chlamydia is two to three times more common than gonorrhea, six times more common than genital herpes and 30 times more common than syphilis! Chlamydia is considered a *serious* infection, primarily because it frequently presents no symptoms and there may be severe complications if untreated.

What are the symptoms of Chlamydia?

As mentioned, chlamydia can be a rather insidious infection in that it may be difficult to detect by an individual. Symptoms may include:

Females:

- Up to 80% of women have *no* symptoms.
- Increased vaginal discharge.
- Pain or burning with urination.
- Acute or chronic abdominal pain.
- Bleeding between menstrual periods, including women on contraceptive hormones.

Males:

- 10% have no noticeable symptoms.
- Pain or burning with urination.
- Penile discharge, which is watery or milky at first and may thicken later.
- Burning and itching around the opening of the penis.

The only way many people suspect chlamydia is if a partner warns them of exposure to the infection. It then must be diagnosed by a health care practitioner.

How is Chlamydia diagnosed?

In the not too distant past, testing for chlamydia was complex and expensive. Due to improved technology, chlamydia tests are now available which offer accurate, quick results. A simple cervical and/or urethral smear is used. A urine test is available for males. Screening for chlamydia is frequently done even if there are no symptoms at all. (Chlamydia testing is a routine component of an annual exam in Women's Clinic.) If symptoms are present, the evaluation may include tests for other infections such as yeast, trichomonas, bacterial vaginosis, gonorrhea, syphilis and urinary tract infections in order to be sure of the diagnosis.

Why treat Chlamydia?

If untreated, the potential complications from chlamydia are serious, and may include the following:

Females:

- Inflammation of the lining of the uterus (called "endometritis") - causes abnormal vaginal bleeding or discharge, fever, and lower abdominal pain.
- Inflammation of the fallopian tubes (called "salpingitis") - can cause abscesses and scarring which can lead to infertility and increase the future risk of a tubal pregnancy (a life-threatening situation where a fertilized egg grows in the tube rather than the uterus and can cause the fallopian tube to rupture).
- Pelvic Inflammatory Disease (PID) - an advanced infection of the entire female reproductive system. Symptoms include longer or heavier menstrual periods, bleeding between periods, increased cramping with periods, abnormal vaginal discharge, lower abdominal pain, fatigue, fever, nausea and/or vomiting, and pain during intercourse. This infection could spread beyond the pelvic area causing inflammation of tissues on the surface of the liver (called "perihepatitis"). More than one million women are treated yearly for PID.



Males:

- Acute inflammation of the spermatic ducts (called "epididymitis") - can cause scarring and infertility. Symptoms may include fever, abnormal penile discharge, painful urination, swelling and pain in the scrotum. Chlamydial infections have been linked to half the reported cases of epididymitis.



Both Males & Females:

- Reiter's Syndrome: joint pain, inflammation of the eyes, and sores on the skin.
- Conjunctivitis ("pink eye") - an infection of the eye(s) causing redness, discharge and itching. This may be acquired by "auto-inoculation" (spread of chlamydial discharge from the genital area to eyes by hands of infect person).

Newborns:

Still more complications? Yes, mothers can pass Chlamydia to their babies during birth.

Complications to a newborn may include:

- Conjunctivitis ("pink eye") - develops in 30-50% two to three weeks following birth.
- Pneumonia: develops in 10-20%

Is there any good news about Chlamydia?

Yes. Testing for Chlamydia is simple and curative treatment is easy and effective. Additionally, chlamydial infection *can* be prevented.

How is Chlamydia treated?

Oral antibiotics are prescribed, often doxycycline or azithromycin. Penicillin is not effective in treating chlamydia. It is of the utmost importance to take all the prescribed medication even if symptoms subside. Re-infection may occur if the full prescription of antibiotics is not taken. Chlamydia can lie dormant and begin the disease process again later if all the prescribed antibiotics are not taken.