

STDs in Persons Entering Corrections Facilities

Public Health Impact

Multiple studies and surveillance projects have demonstrated a high prevalence of STDs in persons entering jails and juvenile corrections facilities.¹⁻⁴ Screening for chlamydia, gonorrhea, and syphilis at intake offers an opportunity to identify infections, prevent complications, and reduce transmission in the community. A substantial proportion of all early syphilis cases are reported from corrections facilities.⁴ Collecting positivity data and analyzing trends in STD prevalence in this population can provide one method for monitoring trends in STD prevalence in the community.⁴

Observations

- In 2003, STD screening data from corrections facilities were reported from 34, 23, and 10 states on chlamydia, gonorrhea, and syphilis, respectively. These data were reported as part of the Jail STD Prevalence Monitoring Project, the Adolescent Women Reproductive Health Monitoring Project, the Syphilis Elimination Initiative, the Regional Infertility Prevention Program, or in response to CDC's request for data.
- The maps shown in this section represent approximately 114,000 chlamydia tests in men and 53,000 in women; 82,000 gonorrhea tests in men and 39,000 in women; and 186,000 syphilis tests in men and 38,000 in women entering corrections facilities during 2003.
- Chlamydia positivity was higher in women screened in juvenile corrections facilities than in adult corrections facilities. In adolescent women entering 48 juvenile corrections facilities, the median facility positivity for chlamydia was 15.9% (range 2.7% to 33.5%); positivity was greater than 10% in 37 of 48 facilities reporting data (Figure JJ). In adult women entering 36 corrections facilities, the median positivity for chlamydia was 6.3% (range 1.3% to 19.2%).
- The median chlamydia positivity in adolescent men entering 64 juvenile corrections facilities was 5.4% (range 1.3% to 12.9%) (Figure KK). In adult men entering 37 corrections facilities, the median positivity was 6.4% (range 1.0% to 27.1%).
- The median positivity for gonorrhea in women entering 28 juvenile corrections facilities was 5.7% (range 0.5% to 15.9%); positivity was greater than 4% in 17 of 28 juvenile corrections facilities (Figure LL). In adult women entering 22 corrections facilities, the median positivity for gonorrhea was 1.8% (range 0.4% to 10.1%).
- The median positivity for gonorrhea in adolescent men entering 35 juvenile corrections facilities was 1.3% (range 0.3% to 4.5%) (Figure MM). In adult men entering 20 facilities, the median positivity was 1.8% (range 0.3% to 10.2%).

- The median percentage of reactive syphilis tests by facility was 7.5% (range 2.4% to 10.7%) for women entering 11 adult corrections facilities and 0.5% (range 0.1% to 1.0%) for adolescent women entering 4 juvenile corrections facilities (Figure NN); the median percentage was 2.3% (range 0.2% to 8.3%) in men at 13 adult corrections facilities and 0.3% in men at 6 juvenile facilities (Figure OO). The percentage of reactive syphilis tests representing cases of syphilis varied from facility to facility.

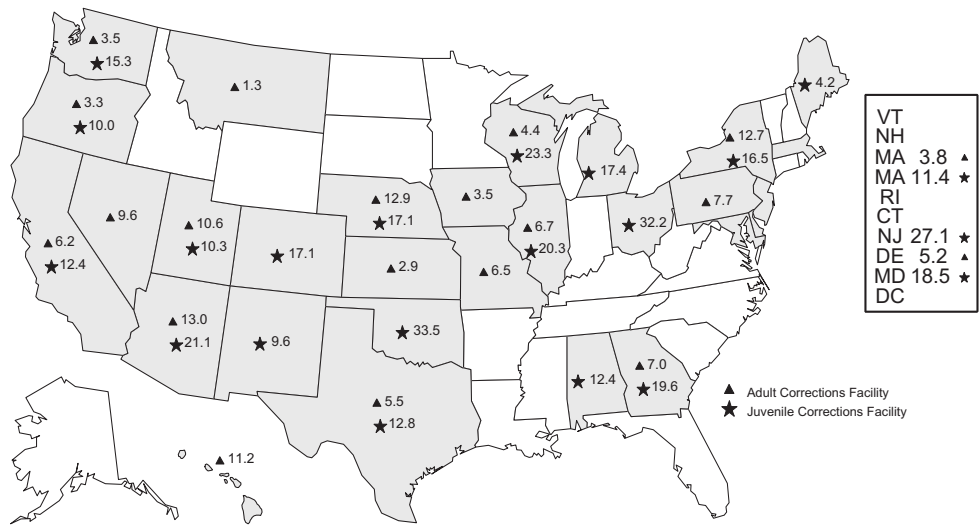
¹ Heimberger TS, Chang HG, Birkhead GS, DiFerdinando GD, Greenberg AJ, Gunn R, Morse DL. High prevalence of syphilis detected through a jail screening program. A potential public health measure to address the syphilis epidemic. *Arch Intern Med* 1993;153:1799-1804.

² Centers for Disease Control and Prevention. Syphilis screening among women arrestees at the Cook County Jail – Chicago, 1996. *MMWR* 1998;47:432-3.

³ Mertz KJ, Schwebke JR, Gaydos CA, Beideinger HA, Tulloch SD, Levine WC. Screening women in jails for chlamydial and gonococcal infection using urine tests: Feasibility, acceptability, prevalence and treatment rates. *Sex Transm Dis* 2002;29:271-276.

⁴ Kahn R, Voigt R, Swint E, Weinstock H. Early syphilis in the United States identified in corrections facilities, 1999-2002. *Sex Transm Diseases* 2004;31:360-364.

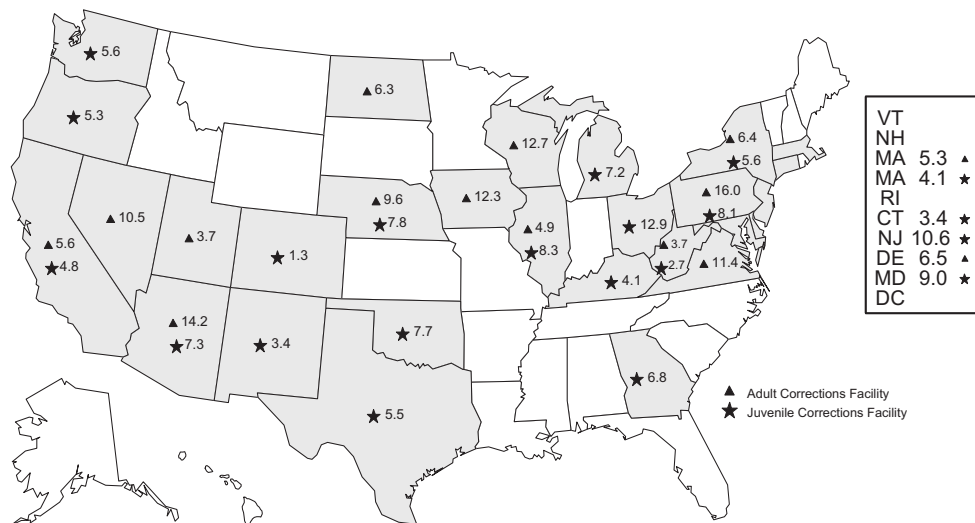
Figure JJ. Chlamydia — Positivity in women entering juvenile and adult corrections facilities, 2003



Note: The median positivity is presented from facilities reporting >100 test results. Arizona, California, Hawaii, Illinois, Massachusetts, Nevada, New York, Pennsylvania, Texas, Utah, and Wisconsin submitted data from more than one adult corrections facility. Alabama, Arizona, California, Illinois, Michigan, New York, Texas and Washington submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Adolescent Women Reproductive Health Monitoring Project; Regional Infertility Prevention Projects; Local and State STD Control Programs; Centers for Disease Control and Prevention

Figure KK. Chlamydia — Positivity in men entering juvenile and adult corrections facilities, 2003



Note: The median positivity is presented from facilities reporting >100 test results. Arizona, California, Massachusetts, Nebraska, Nevada, New York, Wisconsin, Pennsylvania, Utah, and West Virginia submitted data from more than one adult corrections facility. Arizona, California, Illinois, Kentucky, Maryland, Massachusetts, Michigan, New Jersey, New York, Oklahoma, Oregon, Texas, and Washington submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Regional Infertility Prevention Projects; Local and State STD Control Programs; Centers for Disease Control and Prevention

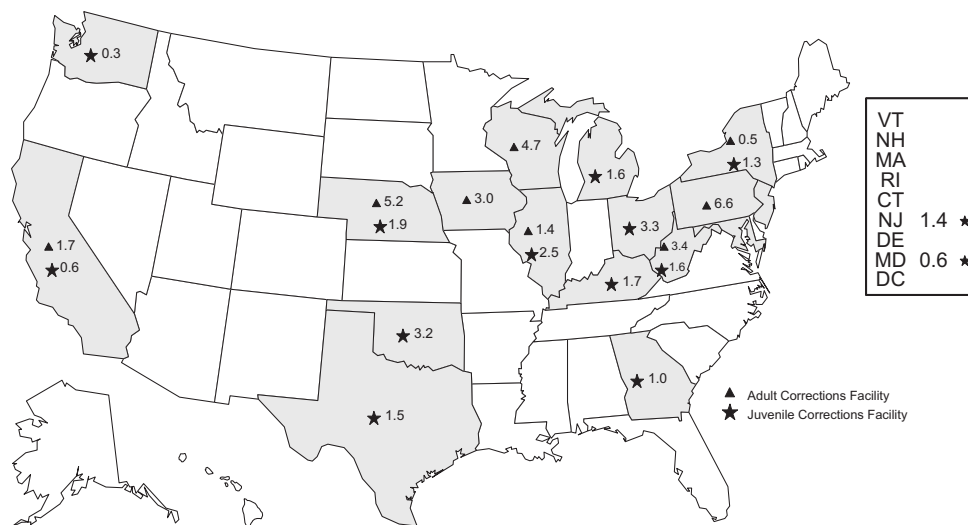
Figure LL. Gonorrhea — Positivity in women entering juvenile and adult corrections facilities, 2003



Note: The median positivity is presented from facilities reporting >100 test results. California, Hawaii, Illinois, Pennsylvania, Utah, and Wisconsin submitted data from more than one adult corrections facility. Alabama, California, Illinois, Michigan, Texas, and Washington submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Adolescent Women Reproductive Health Monitoring Project; Regional Infertility Prevention Projects; Local and State STD Control Programs; Centers for Disease Control and Prevention

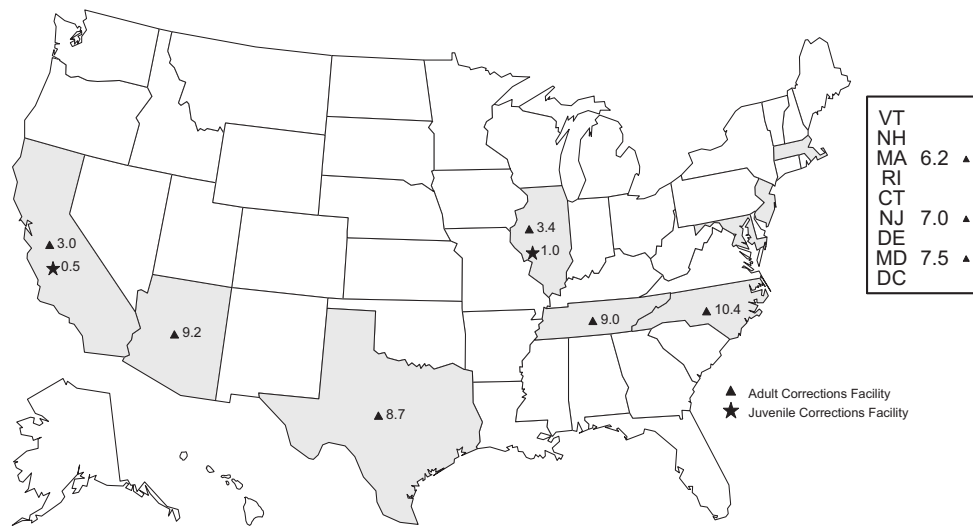
Figure MM. Gonorrhea — Positivity in men entering juvenile and adult corrections facilities, 2003



Note: The median positivity is presented from facilities reporting >100 test results. California, Nebraska, West Virginia, and Wisconsin submitted data from more than one adult corrections facility. California, Illinois, Kentucky, Maryland, Michigan, New Jersey, New York, and Washington submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Regional Infertility Prevention Projects; Local and State STD Control Programs; Centers for Disease Control and Prevention

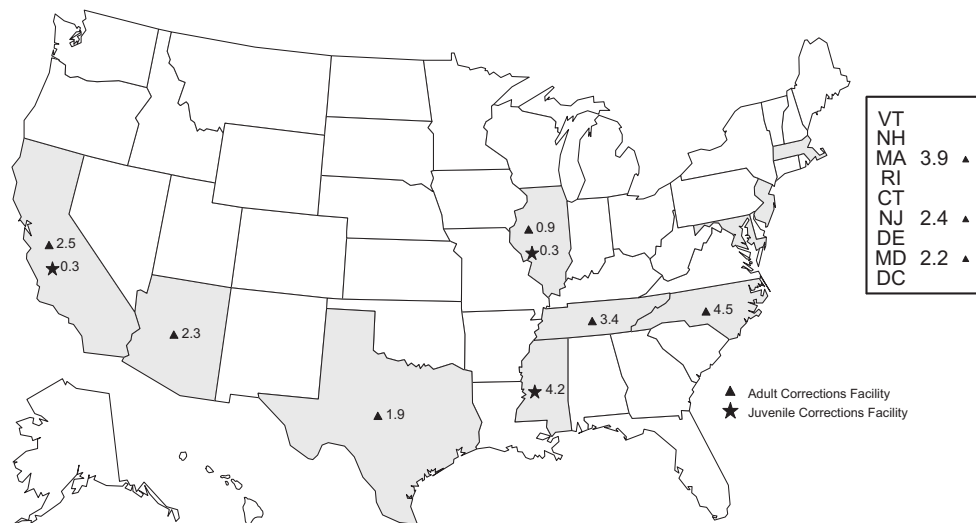
Figure NN. Syphilis serologic tests — Percent seroreactivity in women entering juvenile and adult corrections facilities, 2003



Note: The median positivity is presented from facilities reporting >100 test results. California, and New Jersey submitted data from more than one adult corrections facility. California submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Local and State STD Control Programs; Centers for Disease Control and Prevention

Figure OO. Syphilis serologic tests — Percent seroreactivity in men entering juvenile and adult corrections facilities, 2003



Note: The median positivity is presented from facilities reporting >100 test results. California and New Jersey submitted data from more than one adult corrections facility. California and Mississippi submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Local and State STD Control Programs; Centers for Disease Control and Prevention

