



January 31, 2007

Dear Colleague,

This is our second annual Dear Colleague Letter to highlight key activities from 2006 involving the Division of STD Prevention (DSTDP) and our colleagues in the field of STD prevention. We hope these summaries are useful reminders of important work we accomplished together and helpful as we focus on emerging issues for 2007.

CDC Context

The reorganization of CDC is nearly complete, and DSTDP continues to function within the National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (proposed NCHHSTP) <http://www.cdc.gov/nchstp/od/nchstp.html> and the Coordinating Center for Infectious Diseases. CDC's goals management efforts are proceeding, based on a desire to become a more performance-based agency and focusing on four overarching Health Protection Goals: Healthy People, Healthy Places, Preparedness, and Global Health. Creation of these agency-wide goals benefited from internal and external input, and CDC is creating action plans, with measurable objectives and activities to achieve them. <http://www.cdc.gov/about/goals/default.htm> Within NCHHSTP, Director Kevin Fenton's vision for 2007 is to strengthen and improve our collaborations, partnerships and communications to help us meet NCHHSTP's leadership priorities, with special emphasis on two key priorities: workforce development and health impact focus. Under Dr. Fenton's leadership, we are working with colleagues in other NCHHSTP divisions on program collaborations and service integration.

DSTDP Priority Domains and Activities

DSTDP branch chiefs and senior staff held a series of retreats to prioritize specific domains of activity in support of our four disease prevention goals (Prevention of STI-related infertility, STI-related adverse pregnancy outcomes, STI-related cancers and STI-related HIV transmission). From a long list of proposed domains of divisional activity, we selected four high priority domains and recommended activities. The highest priority domains were determined to be:

- Initiating efforts to monitor the impact of HPV vaccine
- Increasing Chlamydia screening coverage among women <26 years of age
- Improving capacity to collect, analyze, and use data for STD programs
- Initiating efforts to enhance human capital in the CDC's STD prevention workforce

As resources permit, activities in these four areas will be developed and implemented.

DSTDP Leadership

DSTDP leadership changes and awards during 2006 and January 2007 include:

- Kevin O'Connor was named Chief of the Program and Training Branch (PTB – proposed).
- Jo Valentine was named the Syphilis Elimination Effort (SEE) Coordinator.
- Matthew Hogben was named Chief of the Behavioral Interventions Research Branch (BIRB).
- Recruitment is underway for the Branch Chief of the Health Services Research and Evaluation Branch (HSREB).
- Sevgi Aral, PhD, Associate Director for Science, received the Thomas Parran Award for distinguished contributions in the field of STD research and prevention.
- Susan Blank, MD, received the Physician Executive of the Year Award from the Commissioned Officers' Association.
- Susan DeLisle, RN, MPH, APRN, received the Jack N. Spencer Award, honoring her for a career of exceptional contributions to excellence in STD prevention.

Consultations

We addressed important STD prevention issues by consulting with internal and external colleagues.

- **Performance Measures Consultation** (January) evaluated current performance measures and developed new ones for pilot or implementation in 2007 and beyond. This will be an annual meeting.
- **Chlamydia Screening in Men** (March) considered published evidence to develop recommendations to guide programs engaged in screening men for chlamydia. A report from the meeting will be available on the CDC STD website by mid-year 2007.
- **HPV Vaccine Health Care Provider Partners' Meeting: Collaboration with NCIRD and NCCDPHP** (August) brought together partner organizations (primarily serving healthcare providers), interested in promoting awareness and prevention of HPV and associated diseases, to discuss mechanisms for HPV vaccine education and implementation.
- **HPV Vaccine: Monitoring Vaccine Impact** (August) discussed plans to monitor the impact of the HPV vaccine in the U.S., reviewed current activities, and identified additional surveillance needs.

New Tools

New tools to enhance STD prevention program delivery were developed or released in 2006.

- A number of new **HPV materials** were developed for use by a variety of audiences.
 - **HPV Brochure for Clinicians** provides information about the transmission, prevention, detection and clinical management of HPV and associated conditions. <http://www.cdc.gov/std/HPV/hpv-clinicians-brochure.htm>
 - **HPV Vaccine Questions & Answers** for parents and prospective vaccine recipients answers common questions about the HPV vaccine, HPV, and cervical cancer <http://www.cdc.gov/std/hpv/STDFact-HPV-vaccine.htm>
 - **HPV and HPV Vaccine fact sheet** for healthcare providers offers the most current vaccine information and recommendations. <http://www.cdc.gov/std/hpv/STDFact-HPV-vaccine-hcp.htm>
 - **HPV Poster and Brochure** were updated to reflect recent advances in science, including the new HPV vaccine. <http://www.cdc.gov/std/hpv/common-downloads.htm>
- New and expanded pages and features on the DSTDP website provide new tools and information.
 - **Expedited Partner Therapy** web pages provide EPT implementation information and summarize research into state-level legal provisions that impact on implementation of EPT. <http://www.cdc.gov/std/ept/default.htm> and <http://www.cdc.gov/std/ept/legal/default.htm>
 - Web pages for **Infertility and STDs** and **Infertility Prevention Program** focus on one of our primary goals. <http://www.cdc.gov/std/infertility/default.htm> and <http://www.cdc.gov/std/infertility/ipp.htm>
 - **DSTDP website** has a new feature which allows visitors to register for email updates when selected web pages change. <http://www.cdc.gov/std/>
- **2005 STD Surveillance Report** was released in December. Electronic copies are available at <http://www.cdc.gov/std/stats/default.htm>, and slide sets at <http://www.cdc.gov/std/stats/slides.htm>
- **STD Trends** summarizes 2005 national data and provides an overview of 2005 trends in each of the reportable STDs. <http://www.cdc.gov/std/stats/trends2005.htm>
- **2006 STD Treatment Guidelines** and associated materials were released in August and are used by health care workers worldwide. <http://www.cdc.gov/std/treatment/default.htm>
 - **2006 STD Treatment Guidelines Video Podcast**, first in CDC history, provides highlights of the updated Guidelines. <http://www2a.cdc.gov/podcasts/player.asp?f=3130>
 - **2006 STD Treatment Guidelines Pocket Guides and Wall Charts** provide on-hand, quick summaries of the treatment regimens. https://www2.cdc.gov/nchstp_od/piweb/stdorderform.asp
- **EPT in the Management of STDs: Review and Guidance** summarizes the available literature on EPT for partner management, evaluates evidence and provides guidance for the selective use of EPT <http://www.cdc.gov/std/treatment/EPTFinalReport2006.pdf>
- The updated 2006 national syphilis elimination plan, **Together We Can: The National Plan to Eliminate Syphilis from the United States** provides a dynamic framework for developing and implementing evidence-based and culturally competent prevention and control interventions to eliminate syphilis from the United States <http://www.cdc.gov/stopsyphilis/plan.htm>

- A package of 16 **Program Evaluation Tools** was developed in collaboration with STD prevention project areas to help build program evaluation capacity. It will be available in hard copy and on the DSTDP website.

Scientific and Program Development

Important scientific and program developments during the past year include:

- Full implementation of **Performance Measures** was achieved in 2006.
 - All project areas have identified data collection systems and are working on implementation.
 - Nationally, performance levels vary depending on the measure, but 100% of project areas are reporting on at least one measure, and 74% have reported on all required measures.
 - Data validation is a high priority as implementation continues.
- The 2006-2011 funding cycle was initiated for the National Network of Prevention Training **Centers**, and awards were made to 10 clinical, 4 behavioral and 4 partner services training sites <http://depts.washington.edu/nnptc/index.html> and <http://www.cdc.gov/std/PTCGranteeDearColleague.pdf>
- Program integration efforts continued in collaboration with NCHHSTP colleagues:
 - With Division of HIV/AIDS Prevention (DHAP), we completed the **integrated interview record** which will be available in early 2007, with full implementation planned for 2008.
 - Also with DHAP, we are revising the **Partner Counseling and Referral Services (PCRS) Guidelines** to integrate 1998 HIV PCRS Guidelines with 2000 STD Program Operation Guidelines (POG) Partner Services Chapter.
 - We continued to support integration of **Hepatitis B vaccination** in STD clinics, including strengthening language in **STD Treatment Guidelines** to recommend that all unvaccinated adults seeking services in STD clinics receive Hepatitis B vaccination. Further guidance is available in a December **MMWR**. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5516a1.htm>
 - We support routinizing **HIV screening** in STD clinics, including guidance in the **STD Treatment Guidelines** for opt-out screening, with further guidance in a September **MMWR**. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>
- The Advisory Committee on Immunization Practices (ACIP) **HPV Vaccine Workgroup**, co-led by DSTDP's Lauri Markowitz, drafted recommendations for use of the quadrivalent HPV vaccine. The workgroup included multiple DSTDP staff, other CDC scientists, and representatives from other agencies and professional organizations. http://www.cdc.gov/nip/recs/provisional_rec/hpv.pdf
- DSTDP staff continued collaborations with other nations, the World Health Organization (WHO), and other international partners in priority areas such as:
 - Development and evaluation of **rapid point-of-care tests**.
 - **Surveillance of newly-emerging STDs**, including highly-resistant gonorrhea and strains of LGV.
 - **Elimination of congenital syphilis** as a public health problem.
 - Guidance on **STD control for HIV prevention**.
- Two special issues of **Sexually Transmitted Diseases** and one of **Sexually Transmitted Infections** edited by DSTDP colleagues provide comprehensive discussion of important topics.
 - **Sexually Transmitted Infections and HIV in the Southern United States: An Overview**, **STD**, July.
 - **The Economics of Sexually Transmitted Infections**, **STD**, October.
 - **Sex Work**. **STI**, October.
- The **2006 National STD Prevention Conference** in Jacksonville, Florida, brought together more than 1300 professionals to consider the complex issues facing STD prevention in the U.S. and provided an opportunity for rich discussion extending beyond the conference.

Looking Forward

Some activities for 2007 are already well underway, including

- **Consultation to Address Bacterial STDs among African Americans** in the Spring of 2007 will focus on reviewing the causes of disparities in this population by examining the latest epidemiological, social and behavioral trends, and ultimately on developing new strategies to address this pervasive problem.

- In collaboration with Council of State and Territorial Epidemiologists (CSTE), a *Consultation on Neonatal Herpes Surveillance* will develop a candidate case-definition for consideration by CSTE, examine the need for neonatal herpes surveillance, and propose the means by which such surveillance might be accomplished.
- Development of the *STD Program Area Module (PAM)* continues, and the Public Health Information Network (PHIN)-compliant system, intended to replace STD*MIS, will begin field testing in late 2007. <http://www.cdc.gov/std/program/std-pam.htm>

Other issues we will address together include

- Increasing our knowledge and use of the *Internet as a public health arena*.
 - *Internet Guidelines for Online STD Prevention and Communication*, produced by our partner National Coalition of STD Directors (NCSDD), will outline promising practices for using the Internet for STD prevention and provide guidance for developing Internet-based programs for partner notification, outreach and health communication. Guidelines are expected in mid-2007.
 - The *Technology Centers of Excellence* will evaluate existing Internet-based STD prevention and control efforts and develop, pilot and evaluate new methods for STD prevention and control.
- Licensing of the *HPV vaccine* presents new challenges for monitoring the impact of this exciting new technology, and DSTDP will play a lead role in a range of monitoring activities which will provide information well before cervical cancer outcomes can be evaluated. Optimal approaches for monitoring are being evaluated, but the activities will include:
 - Monitoring prevalence of CIN 2/3 and occurrence of anogenital warts.
 - Monitoring sexual behavior among those who have and have not received the HPV vaccination.
- Continued increases in *drug-resistant gonorrhea* may leave us with diminishing drug options and increased pressure on local program areas to quickly identify GC treatment failures.
- Important *laboratory topics* will be addressed to support STD prevention efforts.
 - Revision of *A Manual of Tests for Syphilis* in collaboration with APHA.
 - Clinical trials for dual antigen treponemal/non-treponemal point-of-care tests.
- An *aging workforce* with a large number of public health professionals eligible for retirement in the next decade will require us to develop capacity to train, recruit, and retain a vital workforce to ensure critical public health services can be provided and to provide surge capacity to the nation during significant public health emergencies.
- The nation's *fiscal environment* will continue to present challenges for CDC and our STD prevention partners.
 - Since October, CDC's funding has continued at 2006 levels under a Continuing Resolution, and legislation currently being considered includes level funding for the remainder of this fiscal year.
 - The President's 2008 budget includes level funding for STD prevention activities.
 - We will share budget information and its impact on project areas as soon as it is clear.

As I move into my fourth year as Director of DSTDP and reflect on the work we have done together, I continue to feel tremendously proud and privileged to work with such dedicated colleagues. Together, as we focus on the urgent realities of STD prevention, we are making big differences in the health of the people of our nation, particularly populations in need, often in situations where demand is high and resources to meet those demands are limited. I wish you success in this new year as you continue to apply your talent, creativity and vision to our common mission and challenges, and I look forward to seeing as many of you as possible at meetings throughout the country in the coming year.

Sincerely,



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 Division of Sexually Transmitted Disease Prevention
 National Center for HIV, Viral Hepatitis, STD and TB Prevention (proposed)