Chlamydia

Recently, your healthcare provider performed a laboratory test that has revealed that you tested positive for a sexually transmitted disease called chlamydia. Even though symptoms of chlamydia are usually mild or absent, serious complications can cause irreversible damage, including infertility, which can occur “silently” before a woman ever recognizes a problem. Chlamydia also can cause discharge from the penis of an infected man.

In the United States over 3 million people are infected with chlamydia annually and under-reporting is substantial because most people with chlamydia are asymptomatic or not aware of their disease and do not seek testing. Chlamydia is a kind of bacteria that targets the cells of the mucous membranes, which are the soft, moist tissues of the body not covered by skin. Examples of such areas include the vagina, cervix, anus, penis, urethra or eye. Chlamydia, like other sexually transmitted diseases (STDs), is passed from an infected person to a partner through certain sexual activities. Key causes of the spread of chlamydia include engaging in unsafe sex, having sex with multiple sexual partners, or having sex with someone who has had multiple partners. Women can be re-infected if their sex partners are not treated. Chlamydia can be easily treated with antibiotics; but if left untreated, serious complications as described above may occur.

Chlamydia Background Information

Any sexually active person can be infected with chlamydia. The risk of infection increases dramatically if you have a large number of sex partners. Because the cervix (opening to the uterus) of teenage girls and young women is not fully matured they are more susceptible to infection, particularly if they are sexually active. It is estimated that one in 10 adolescent females test positive for chlamydia. Chlamydia is most prevalent in young women ages 15-24 for the reasons described above.

Although chlamydia is the most common sexually transmitted bacterial infection in the United States, many people do not know they have it because of a lack of noticeable symptoms. People who are asymptomatic or lack symptoms may pass the infection to their sex partners without knowing. Chlamydia often occurs with gonorrhea, a similar sexually transmitted disease. The infection is a serious health threat for women and usually begins on the cervix. It can then spread to the fallopian tubes or ovaries. When left untreated, up to 40% of women with a chlamydia infection will develop pelvic inflammatory disease (PID). PID can cause serious damage to a woman’s reproductive organs and can lead to infertility, chronic pelvic pain and an increased risk of ectopic pregnancy (a pregnancy that occurs outside the uterus). If you are a pregnant woman and are infected with chlamydia, you may pass the infection on to your child at birth, and your child could encounter health complications.
Symptoms

Chlamydia is known as a “silent” disease because about three quarters of infected women and about half of infected men have no symptoms. If symptoms do occur, they usually appear within 1 to 3 weeks after exposure.

In women, the bacteria initially infects the cervix and the urethra (urine canal). Women who have symptoms might have an abnormal vaginal discharge or a burning sensation when urinating. When the infection spreads from the cervix to the fallopian tubes (tubes that carry fertilized eggs from the ovaries to the uterus), some women still have no signs or symptoms; others have lower abdominal pain, low back pain, nausea, fever, pain during intercourse, or bleeding between menstrual periods. Chlamydia infection of the cervix can also spread to the rectum.

Men with signs or symptoms might have a discharge from their penis or a burning sensation when urinating. Men might also have burning and itching around the opening of the penis. Pain and swelling in the testicles are uncommon.

Men or women who have receptive anal intercourse may acquire chlamydia infection in the rectum, which can cause rectal pain, discharge, or bleeding. Chlamydia can also be found in the throats of women and men having oral sex with an infected partner.

Follow-up and Treatment Options for Chlamydia

Chlamydia can be easily treated and cured with antibiotics. It is important to remember to take all of the prescribed medicine; even if the symptoms disappear, the infection may remain in your system. It is also important that you and your partner be treated at the same time and that you both avoid sexual contact during treatment to prevent re-infection.

Women whose sex partners have not been appropriately treated are at high risk for re-infection. Having multiple infections increases a woman’s risk of serious reproductive health complications, including infertility. Retesting should be encouraged for women three to four months after treatment. This is especially true if a woman does not know if her sex partner received treatment.

To minimize your risk for chlamydia infection, you should:

• Use condoms or diaphragms during sexual intercourse;
• Remain in a monogamous relationship;
• Limit your number of sexual partners;
• Include chlamydia screening as part of your annual examination or when you have your first prenatal visit;
• Abstain from sexual intercourse.

Questions to Ask Your Healthcare Provider

• What do my test results mean?
• What follow-up actions do you recommend?
• What do you recommend in treating this disease and why?
• How can I prevent this disease from happening again?
• How often do I get a repeat chlamydia test?
• Should I be tested for any other sexually transmitted diseases?

Sources for Additional Information

• National Institute of Allergy and Infectious Diseases: www.niaid.nih.gov
• Centers for Disease Control and Prevention: www.cdc.gov
• American Social Health Association: www.ashastd.org

The content on this handout is provided to you as general information and not intended as diagnosis. Please consult with your physician regarding the essential details about your condition.