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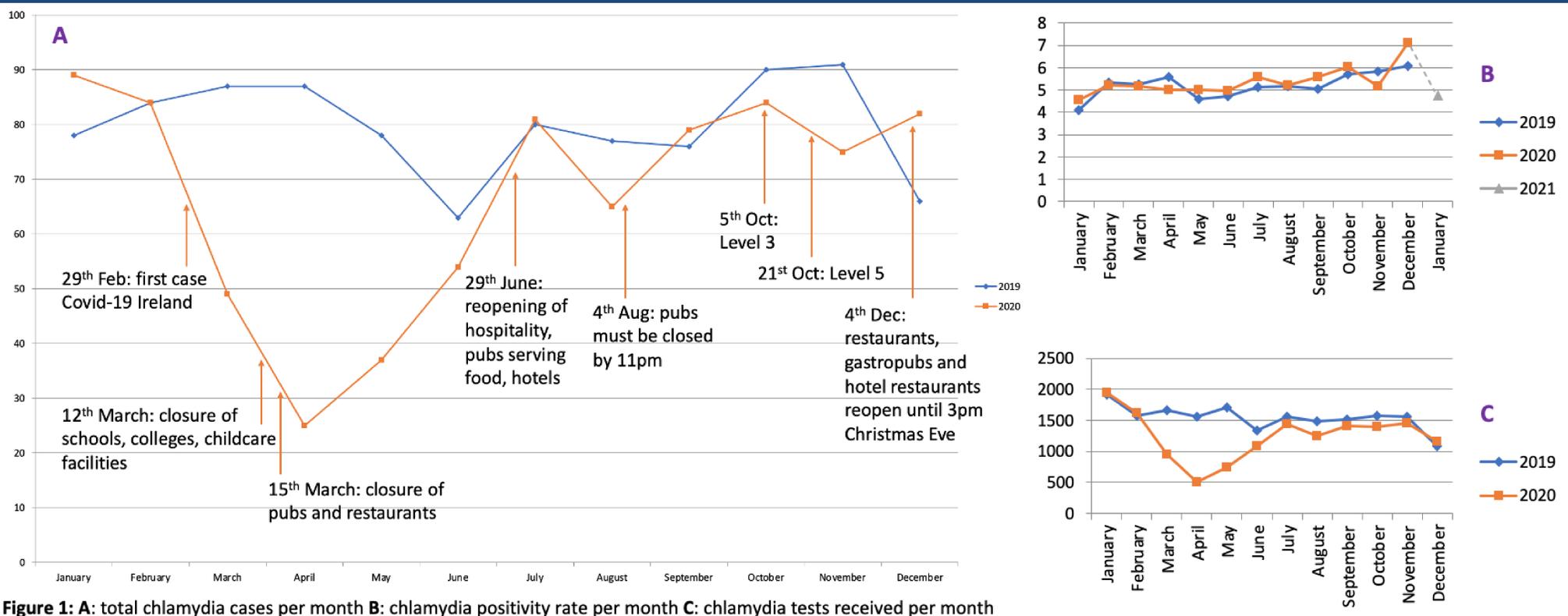
Background:

The Covid-19 Pandemic has affected rates of screening for STIs both directly, via government restrictions, and indirectly, due to public fear of attending healthcare settings for testing. Sexual Health clinics have experienced reduced capacity and rapid service reconfiguration. A HSE pilot for home STI self-testing kits went live in January of 2021, with an overwhelming response rate, highlighting the public need for this service. Cork University Hospital (CUH) provides chlamydia/ gonorrhoea RT-PCR diagnostics to Cork and Kerry, including GP and dedicated STI clinics.

Aim: To analyse the effect of government restrictions during the Covid-19 Pandemic on rates of chlamydia/ gonorrhoea screening in CUH.

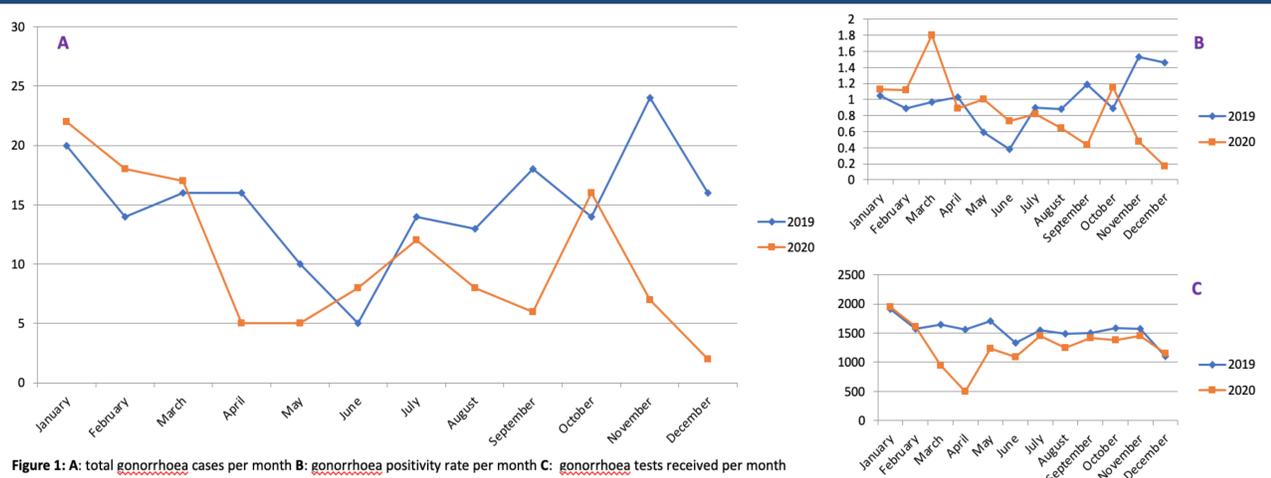
Methods:

A search was performed for all specimens processed for chlamydia/gonorrhoea RT-PCR during 2019 (pre-Pandemic) and 2020. Duplicates were removed and anonymised data was correlated with dates of government guidelines to analyse trends.



Attendances for testing per age group

Age	2019	2020
≤16	186 (1%)	121 (0.8%)
16-24	5046 (27%)	4542 (30%)
25-39	9543 (51%)	7417 (50%)
40-54	3283 (18%)	2542 (17%)
55-69	440 (2%)	291 (2%)
≥70	45 (0.2%)	30 (0.2%)



Results and Discussion:

During the first lockdown from March-May 2020, there was a dramatic reduction in positive chlamydia cases(A), and overall tests received(C). When this decline was analysed using denominator data, the positivity rate for chlamydia remained unchanged compared with the previous year(B). A 14.5% increase in the positivity rate for chlamydia was evident in the month of December 2020 compared with 2019, despite Level 3 restrictions.

A comparable decline in figures was not seen during the second lockdown (October-December 2020). This may be attributable to service reconfiguration, as per government guidelines, and use of telephone consultations.

As fewer patients tested positive for gonorrhoea, the data is more difficult to interpret, however, a similar downward trend was evident during March-May which again was not replicated in the second lockdown.

Previous studies have demonstrated a marked decrease in attendance of younger adults for testing, postulating that it may be due to feelings of shame for not adhering to government guidelines, lack of public transport etc. There was no difference between age groups seen in our analysis.