



Capital Health

MEMORANDUM

TO: Physicians, Clinics

FROM: Dr. Todd Hatchette / Dr Jason LeBlanc
Directors, Virology and Immunology Section

DATE: October 18, 2011

RE: Changes in *Chlamydia trachomatis* (CT) and *Neisseria gonorrhoeae* (GC) testing

On October 31st, the Microbiology laboratory at the QEII will change the way specimens are tested for *Chlamydia trachomatis* (CT) and *Neisseria gonorrhoeae* (GC). Our new Viper XTR system from BD will significantly increase our capacity and allow us to make a number of important changes:

1. **Specimens submitted for CT and/or GC will automatically be tested for both pathogens:** Separate testing will not be available. This is common practice across the country.
2. **Testing will be performed on a single swab. A separate GC swab is not necessary and culture will no longer be performed.** Because of the enhanced sensitivity of this method, we may see an increase in the number of GC positive patients in the coming year.
3. **The preferred specimen for men remains the first 20 ml of voided urine.**
4. **The preferred specimen for women is now a vaginal swab (not an endocervical swab).** Please submit either physician or self collected vaginal swabs (see attached document for instructions). This will facilitate screening since it does not require a speculum exam. We discourage the submission of female urine because of reduced sensitivity compared to the vaginal swab.
5. **You will need to indicate that the swab is vaginal on the requisition.** Currently there is no tick box for vaginal swabs. A new requisition is in development.
6. **Testing requires new collection kits.** It will be important for you to call CDHA stores (466-8070) to replace the old collection kits to ensure a smooth transition. (Order material # 167784 - SWAB VAGINAL SPECIMEN). Swabs will be available on October 28th.
7. **Testing of non-genital specimens.** Although non-genital specimens (eye, throat and rectum) have not been validated in our laboratory, the experience of other laboratories suggests the performance characteristics of these specimen types are reasonable. Clinical correlation in these situations is paramount.
8. **Testing of GC and CT in females over 45 years will be restricted.** Our experience with CT and GC over the last decade found that the positivity rates of CT and GC in women >45 yrs is less than 3/1000. Testing should be restricted to those with symptoms, known exposure, and those with multiple recent partners.
9. **Gram staining for GC:** Because of the superior performance of NAAT testing for GC we will no longer perform Gram stains when requested. Urethral swabs from males are no longer necessary.

If you have any questions please do not hesitate to contact the laboratory at (473-6881)

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