

Prevalence of Chlamydia among Pregnant Adolescents in La Romana, Dominican Republic

Pilar Bancalari, Mailman School of Public Health '21

Dr. Silvia Cunto-Amesty, MD, MPH, MEd, Columbia University Irving Medical Center, Mailman School of Public Health

This study seeks to estimate the prevalence and explore predictors of oral, genital and rectal chlamydia among pregnant adolescents in La Romana, given their high risk for sexually transmitted infections (STIs) and associated sequelae.

BACKGROUND

The estimated global prevalence of chlamydia among 15-49-year-old women is 3.8%, with pregnant adolescents being at particularly high risk of infection and subsequent reproductive and neonatal complications.¹⁻⁴ Early detection and treatment are critical to decreasing HIV/STI morbidity.⁵ STI surveillance data is urgently needed to inform public health efforts in prevention, detection, and treatment.

DESCRIPTION OF ORGANIZATION

The mission of Clínica de Familia in La Romana is to improve the health of families in the eastern region of the Dominican Republic, including vulnerable populations, through integral health services, education and research.



RESULTS

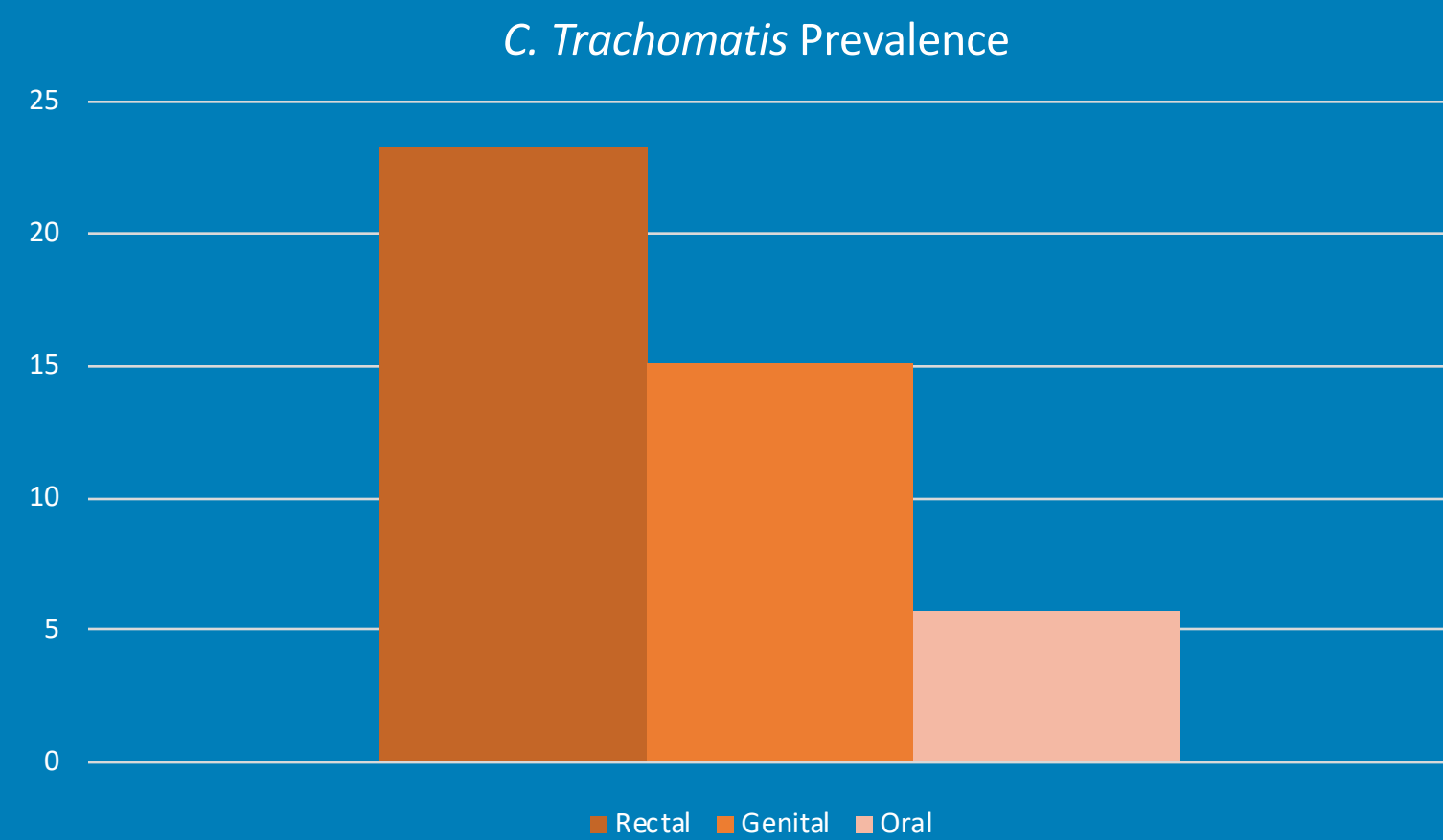


Table 1. Sexual history and behaviors among a sample (N=200) of pregnant adolescents (14-24) presenting at a maternal care unit in La Romana, Dominican Republic.

Characteristic	n	%*
Age of sexual debut, mean	15	
Voluntary	181	91.4
Forced	17	8.6
Sexual partners, last 6 months		
0	14	7.3
1	153	79.3
2-10	25	13.0
>10	1	0.5
Sexual practices, last 6 months		
Oral	95	79.8
Vaginal	166	85.1
Anal	9	4.5
Inconsistent condom use, last 6 months		
Oral	94	99.0
Vaginal	159	95.8
Anal	8	88.9
Experienced intimate partner violence, last 6 months	7	3.5

*Percentages based on different totals due to missing values.

METHODS

200 pregnant adolescents 15-24 years old were recruited by systematic random sampling during their first prenatal visit from a maternal care unit in La Romana, Dominican Republic. A sociodemographic and behavioral questionnaire was administered and blood, urine, and oral/anal swabs were collected and tested for chlamydia (CT).

Descriptive analyses were performed and associations assessed between outcomes (rectal chlamydia) and predictors (demographic characteristics and risk behaviors).

The prevalence of oral, genital and rectal chlamydia was 5.7%, 15.1%, and 23.3%, respectively. Of the examined variables, rectal chlamydia was associated with income.

DISCUSSION

The discrepancy between the high prevalence of rectal chlamydia and low reporting of anal intercourse in this sample of pregnant adolescents could be explained by autoinoculation, concurrent transmission during sex, or underreporting of anal sex. More research is needed to understand sexual behaviors and anal STI risk factors among heterosexual adolescent women. STI screening protocol for pregnant and sexually active adolescents should include routine testing of all three sites.

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