## Online chlamydia testing: an innovative approach that appeals to young people

**To the Editor:** We congratulate Kwan and colleagues on their evaluation of an online chlamydia testing program (OLC) in Western Australia. However, their study does not demonstrate OLC to be a "highly effective means of increasing access to testing among young people at risk of STIs [sexually transmitted infections]".[1]

Adolescents account for 30% of chlamydia notifications in WA,[2] yet only 37 of the 377 people (10%) who were tested through the OLC were aged 16–19 years. Eight cases of chlamydia were identified among these adolescents during the 16-month OLC study period, compared with 2856 chlamydia notifications among 15–19-year-olds in WA in 2010. Young adolescents under the age of 16 years were not eligible to access the OLC, being appropriately referred to a telephone helpline or clinical service instead, but the effectiveness of this approach was not reported. In WA, 23.5% of non-Indigenous adolescents and 43.9% of Indigenous adolescents report sexual intercourse by the age of 16.[3] Indigenous Australians are a priority population for STI control,[4] yet only four people accessing the OLC identified as Aboriginal. Additionally, there was poor uptake (9%) by those living in non-metropolitan areas. Socioeconomic status was not measured, but the requirement for access to the internet, a printer, a mobile phone, and a PathWest laboratory facility may preclude uptake by populations most at risk of chlamydia and poor access to health services.

Young people at risk of chlamydia are also at risk of unplanned pregnancy, and chlamydia infection can be associated with other health risk behaviour, such as substance use.[5] While online testing may increase access to chlamydia testing and treatment, it may also introduce a missed opportunity for health service engagement and broader health promotion.

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2 Government of Western Australia Department of Health. The epidemiology of notifiable sexually transmitted infections and blood-borne viruses in Western Australia 2010. Perth: DoH, WA, 2011.

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>
> Marshall et al

***In reply:*** Azzopardi and colleagues seem to equate "young" with "adolescent". We defined "young" as less than 30 years of age; 84% of chlamydia notifications in Western Australia occur in this age group,[1] and they comprised 71% of online chlamydia testing program (OLC) users.[2] This group accesses the internet frequently, with about 90% of Australians under 35 years of age using the internet at least once a week.[3]

Any testing divorced from face-to-face care reduces health promotion opportunities. The WA Department of Health websites (http://www.getthefacts.health.wa.gov.au and http://www.couldihaveit.com.au) from which the OLC is accessed provide relevant health information and advise people with symptoms to seek medical care. In addition, all OLC users found to have a sexually transmitted infection are followed up by a sexual health nurse.[2]

We will continue to advocate for improved access for young people to sexual health services. As evidenced by the chlamydia prevalence of 18% among OLC users,[2] the OLC is an effective addition to existing strategies aimed at increasing chlamydia testing among high-risk groups.

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