REFERENCES


Cost-Effective Screening for Trichomoniasis

To the Editor: I read with interest a recent article in your journal, “Trichomonas vaginalis, HIV, and African Americans” (1), and I commend the authors’ suggestion to implement screening and reporting of trichomoni- asis for high-risk populations.

In the article, a cost-effective screening approach is mentioned, which includes culturing only for those women whose wet-mount tests are negative. In 1999, my colleagues and I reported on the validity of this method for diagnosing trichomoni- asis in women (2). During our study, an additional vaginal swab was collected during the pelvic examination and placed into a glass tube. If the wet mount was negative, this swab was later added to a culture pouch for T. vaginalis. We found no statistically significant difference in the sensitivity of this method compared with that of adding swabs immediately to pouches at bedside. This method of delaying the second test until the results of the first test are known should be considered in screening women for trichomoni- asis, especially in high-prevalence populations.

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References


Reply to Dr. Schwebke

To the Editor: We welcome Dr. Schwebke’s thoughtful comments about decreasing the cost of screening for Trichomonas vaginalis. Dr. Schwebke and her colleagues have demonstrated that storing a vaginal swab for 15–20 minutes in a glass tube at room temperature does not affect the viability of T. vaginalis or reduce the sensitivity of subsequent culture. This finding shows that vaginal swabs may be stored briefly while a wet-mount preparation is made and examined. If the wet mount is negative for T. vaginalis, the stored swab can then be processed for culture. If the wet mount is positive for T. vaginalis, no further culture of the specimen is needed, thereby reducing unnecessary costs. Given that the prevalence of this infection often exceeds 20% in high-risk populations, this approach can reduce costs substantially without compromising the accuracy of the tests. Any method that reduces the cost of diagnosis will advance further...