

Doxycycline Post-Exposure Prophylaxis (Doxy PEP) Guidance

The Centers for Disease Control and Prevention (CDC) has released guidance for doxycycline post-exposure prophylaxis (doxy PEP) as a prevention strategy to reduce the incidence of syphilis, chlamydia (CT) and gonorrhea (GC). These sexually transmitted infections (STIs) disproportionately affect gay, bisexual and other men who have sex with men (GBMSM) and transgender women (TGW).

Guidelines and Recommendations

Efficacy and Evidence

Individuals taking HIV Pre-Exposure Prophylaxis (PrEP)	People living with HIV
<ul style="list-style-type: none">• 87% reduction in syphilis.• 88% reduction in chlamydia.• 55% reduction in gonorrhea.	<ul style="list-style-type: none">• 77% reduction in syphilis.• 74% reduction in chlamydia.• 57% reduction in gonorrhea.

Doxy PEP is only a prevention strategy for syphilis, chlamydia and gonorrhea.

Doxy PEP **does not** prevent human immunodeficiency virus (HIV), mpox, human papillomavirus (HPV), herpes simplex virus (HSV) or other STIs.

Who Can Benefit from Doxy PEP

The CDC recommends health care providers discuss doxy PEP with all GBMSM and TGW with a history of at least one bacterial STI (e.g., syphilis, chlamydia, gonorrhea) in the last 12 months. Additionally, GBMSM and TGW individuals who have had multiple sex partners in the past year, engage in group sex, engage in chemsex or will be participating in sexual activities known to increase the likelihood of STI exposure can also benefit from doxy PEP for bacterial STI prevention.

Note: There is insufficient evidence to recommend doxy PEP for individuals who report receptive vaginal sex. Health care providers may consider a shared-decision model with certain cisgender women with significant bacterial STI frequency. **If prescribed to people who can become pregnant, pregnancy testing should be conducted regularly, as doxycycline use should be avoided during pregnancy.**

Dosing and Prescribing

1. 200 mg of doxycycline should be taken ideally within 24 hours, but no later than 72 hours, after condomless oral, anal or vaginal sex.
2. Doxycycline can be taken as often as every day depending on the frequency of sexual activity, but individuals should not take more than 200 mg within a 24-hour period.

3. Either doxycycline hyclate delayed release 200 mg (one tablet) **OR** doxycycline hyclate or monohydrate immediate release 100 mg (two tablets taken simultaneously) are acceptable.
4. Immediate release tablets may be less expensive than delayed release tablets and should be equivalently bioavailable.
5. For ICD10 diagnosis code, use Z20.2 for contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission.
6. Doxycycline is available via AIDS Drug Assistance Program (ADAP) for individuals enrolled in ADAP and via 340b through local health departments for uninsured patients.

Monitoring While Taking Doxycycline

1. Individuals taking doxy PEP should be screened every three to six months for gonorrhea and chlamydia at all anatomic sites of exposure, syphilis and HIV (if not known to be living with HIV). If a patient reports an exposure to a bacterial STI while using doxy PEP:
 - a. **Chlamydia & Gonorrhea:** providers can wait and test, and then treat empirically.
 - b. **Syphilis:** providers should treat empirically without waiting for test results.
2. If a patient is diagnosed with an STI while using doxy PEP, they should be treated according to standard [CDC STI Treatment Guidelines](#).
 - a. Patients diagnosed with chlamydia and gonorrhea should be informed about [Expedited Partner Therapy \(EPT\)](#) as a treatment option for their partners.

Counseling Messages

1. Counsel patients about possible drug interactions of doxycycline, including:
 - a. Risk of sun sensitivity.
 - b. Remaining upright for 30 minutes after taking doxycycline to reduce the risk of pill esophagitis.
 - c. Rare risk of benign intracranial hypertension.
2. Study-related data on the impact of doxy PEP on antibiotic resistance and the gut microbiome are being collected and reviewed.
3. Impacts of long-term use of doxy PEP for STI prevention for individual patients and for population-level rates of antimicrobial resistance are unknown, but doxycycline has been previously used safely for long-term prophylaxis of malaria and treatment for acne.
4. When offered, doxy PEP should be implemented in the context of a comprehensive sexual health approach, including risk reduction counseling, STI screening and treatment, recommended vaccination and linkage to HIV PrEP, HIV care or other services as appropriate.

We encourage you to keep the [MDHHS Doxy PEP One Pager & Log](#) in your office or clinic to reference and share with patients.

References

- [CDC Clinical Guidelines on the Use of Doxycycline Postexposure Prophylaxis for Bacterial Sexually Transmitted Infection Prevention, June 2024](#)
- [Doxy PEP as an STI Prevention Strategy | CDC](#)
- [Guidelines for Doxycycline | CDC](#)
- [Sexual Health Prevention Tool Associated with Declines in Sexually Transmitted Infections in San Francisco](#)
- [Dr. Shira Heisler/Detroit Public Health STD Clinic](#)
- [Postexposure Doxycycline to Prevent Bacterial Sexually Transmitted Infections | New England Journal of Medicine \(nejm.org\)](#)