At this year’s biennial National STD Prevention Conference in August, CDC presented preliminary data showing five-year trends in sexually transmitted diseases (STDs). These data show that nearly 2.3 million cases of chlamydia, gonorrhea, and syphilis were reported to CDC for 2017, exceeding the previous 2016 record by more than 200,000 cases. These alarming data show that from 2013 to 2017, increases in STDs continued, syphilis cases almost doubled, gonorrhea increased by 67%, and chlamydia rates remained at record highs. It is evident the systems that identify, treat, and ultimately prevent STDs are strained to near-breaking point. STD prevention and control in the U.S. is complex—the epidemiology of different STDs intersect with one another, and also with HIV, reproductive health, and substance use. It involves many diseases, populations, intervention strategies, and stakeholders. To change the course of STDs in this country, we will need to expand effective efforts and introduce new, innovative strategies.

**New Act Against AIDS Initiative**

Act Against AIDS launched a new initiative for health care providers, Prescribe HIV Prevention, which focuses on pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP). PrEP is a way for people who are HIV-negative but at high risk for getting the virus to prevent HIV infection by taking a pill every day. PrEP is highly effective when taken as prescribed. PEP is the use of antiretroviral drugs after a single high-risk event to prevent HIV. It must be started within 72 hours of a possible exposure. Prescribe HIV Prevention educates providers and patients about these biomedical prevention tools and encourages providers to consider PrEP and PEP for patients at high risk for HIV. It includes resources such as a guide for discussing sexual health with patients, brochures and posters to educate patients about PrEP and PEP, continuing medical education programs, and a medication guide for patients.

**MMWR on HBV Treatment Access**

Worldwide, an estimated 257 million persons are living with chronic hepatitis B virus (HBV) infection. A recent MMWR, Access to Treatment for Hepatitis B Virus Infection — Worldwide, 2016, reports on the global progress in access to hepatitis B treatment. Overall, global coverage is very low, with only about 10% (27M) of persons with HBV infection aware of their status and about 17% of those aware (4.5M) receiving antiviral treatment. The study shows there are numerous ways to increase access, including greater availability of generic treatments for hepatitis B virus, more awareness of the true burden of hepatitis B, better access and availability of diagnosis, and more training for health care providers.