TEST POSITIVITY IN ASYMPTOMATIC MEN WHO HAVE SEX WITH MEN WHO PRESENT AS CONTACTS OF GONORRHOEA – SHOULD WE CHANGE PRACTICE?

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Background

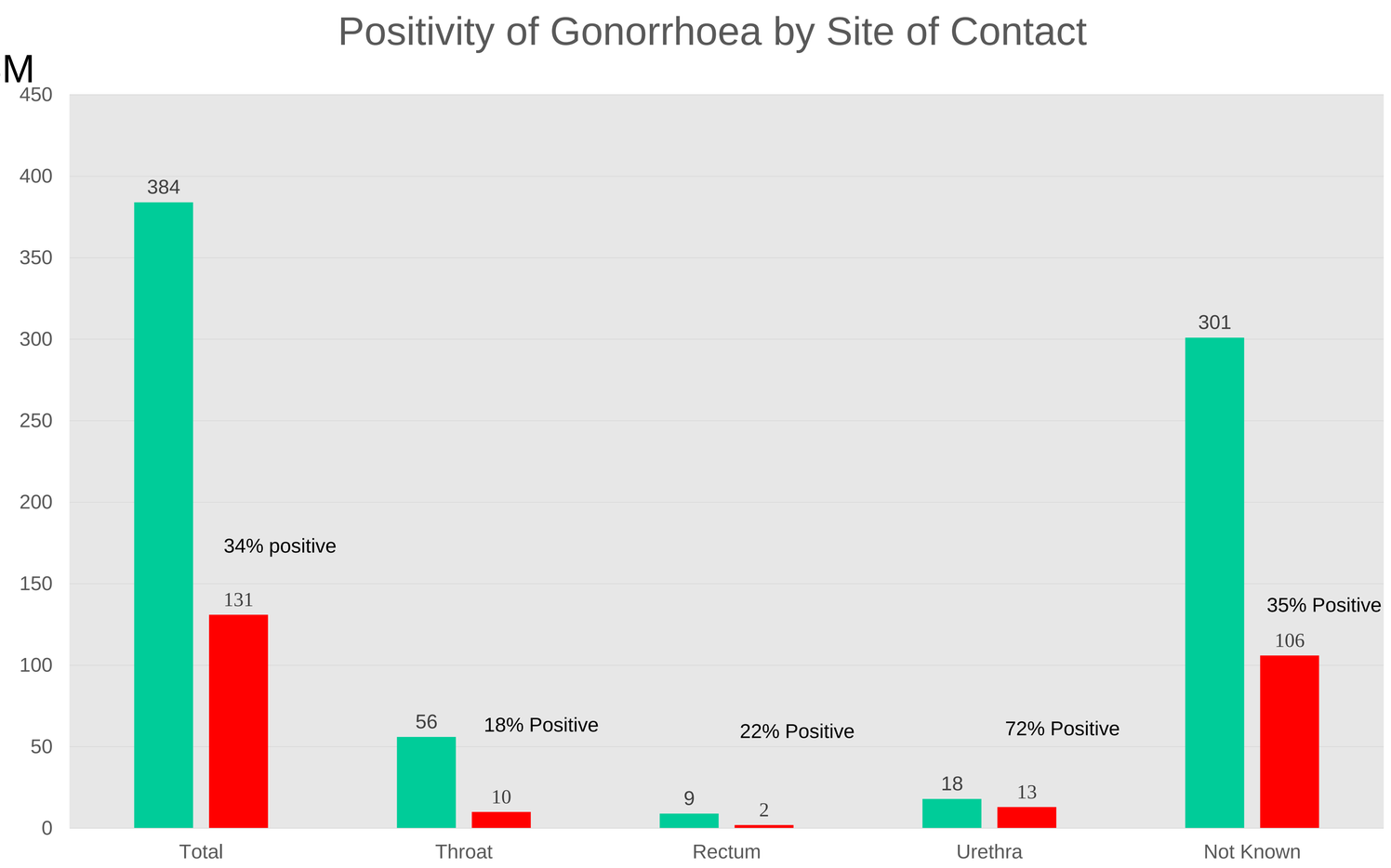
Detection of Neisseria gonorrhoea (GC) in Australia has increased over the past 5 years primarily in men who have sex with men (MSM). It is unclear however if transmission has increased or rather detection has improved. Testing in Australia is performed using Nucleic Acid Amplification Technique (NAAT) methods however, testing from the rectum and pharynx has a reported false positive rate of 8% and 13% respectively. In most settings in Australia MSM attending as contacts of GC would usually be offered empirical treatment and tested. We evaluated the positivity rate in MSM attending Sydney Sexual Health Centre (SSHC) in Sydney as contacts of GC.

Methods

The study population consisted of MSM attending as contacts of GC between 02/01/2015 and 31/12/2015. Contacts of GC at SSHC are screened at all anatomical sites and offered epidemiological treatment. A medical record audit was completed to determine the site (if known) of the index cases' GC and the result of the contacts test.

Results

- During the study period a total of 384 MSM attended as contacts:
  - 56 (14.5%) pharyngeal GC contacts
  - 9 (2.3%) rectal GC contacts
  - 18 (4.6%) urethral GC contacts
  - 301 (78.3%) index site unknown.
- Almost all were asymptomatic (95%).
- Test positivity in contacts screened:
  - 10 (18%) pharyngeal positive test
  - 2 (25%) rectal positive test
  - 13 (72%) urethral positive test
- Of the 365 asymptomatic MSM:
  - 371 (96%) accepted epidemiological treatment
  - Overall 253 (65.8%) tested negative.



Conclusion

Given worldwide increasing GC resistance to current antibiotic regimens, over treating GC should be avoided. Further study is warranted to determine if withholding empirical treatment would be acceptable to clients and clinicians and what impact this has on both clinic flow and treatment rates at follow-up.

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