

Advances in Sexual Health

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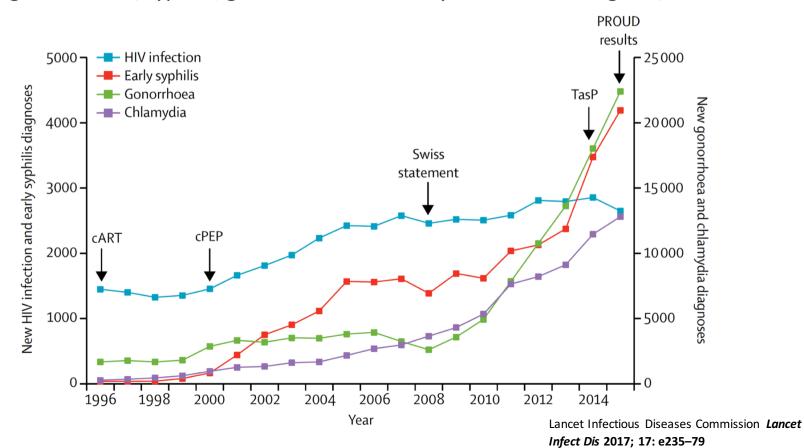
Advances in STI

Testing

Treatment

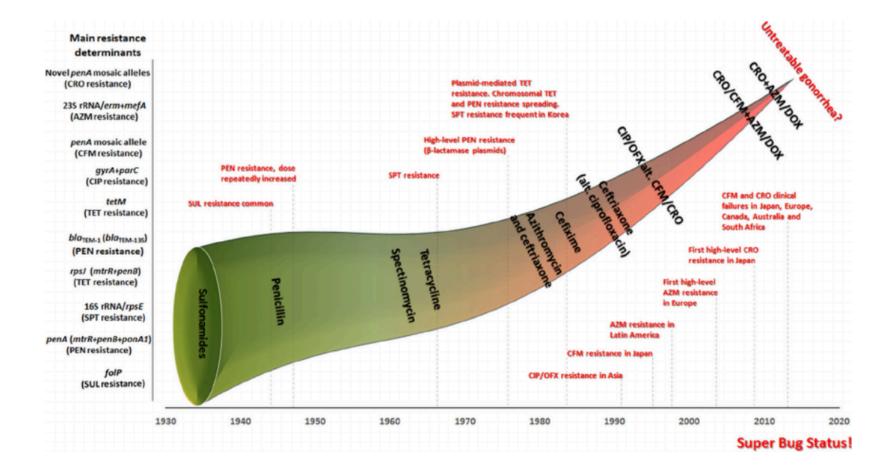
Prevention

New diagnoses of HIV, syphilis, gonorrhoea and chlamydia in MSM in England, 1996-2015

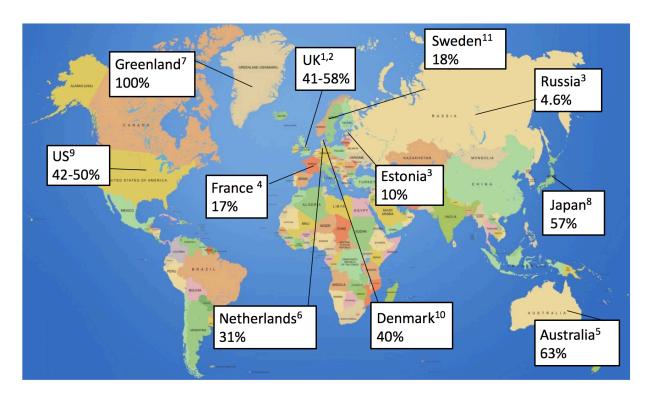


Current shortfalls

- Access to testing
 - Higher pressure on clinic, those with symptoms wait longer*
 - Online testing patchy implementation, reaching enough people?
- Suboptimal diagnostics
 - Narrow repertoire of tests poor coverage of TV and MG NAATs
 - Slow time to results
- Still managing STI syndromes rather than infections
 - Overuse of antibiotics
- Antimicrobial resistance



Mycoplasma genitalium: global macrolide resistance



With permission Katie Ovens

1)Pond MJ, Nori AV, Witney AA, Lopeman RC, Butcher PD, Sadiq ST. High prevalence of antibiotic-resistant Mycoplasma genitalium in nongonococcal urethritis: the need for routine testing and the inadequacy of current treatment options. Clin Infect Dis. 2014 Mar; 58(5):631-72. Dean G, Whetham J, Soni S, Pitt R, Alexander S. Mycoplasma genitalium and macrolide resistance in pelvic inflammatory disease (PID) presented at the Annual Conference for the British Association for Sexual Health and HIV,Oxford, England, July 10-12, 2016 3. Elena Shipitsyna de tal.

Mycoplasma genitalium in five cities in Russia and Estonia PLoS One. 2017; 12(4): e0175763. 4. Chloé Le Roy, Nadège Hénin, Sabine Perveyre, and Cécile Bébéar. Fluorocente de tal.

Mycoplasma genitalium, Southwestern France. Emerg Infect Dis. 2016 Sep; 22(9): 1677–1679. 5. Tabrizi SN, SuJ, Bradshaw S, Fairley CK, Walker S, Tan LY, Mokany E, Garland SM. Prospective evaluation of Resistance-Plus** MG, a new multiplex qPCR assay 2 for the detection of Mycoplasma genitalium and macrolide resistance. J. Clin. Microbiology 2017 Aprillo. RH Nijhuis et al. High Levels of Macrolide Resistance-Associated Mutations in Mycoplasma Genitalium Warrant Antibiotic Susceptibility-Guided Treatment. J Antimicrob Chemother 70 (9), 2515-2518. 2015 May 207. Gesink DC, Mulvad G, Montgomery-Andersen R, et al. Mycoplasma genitalium presence, resistance and epidemiology in Greenland. Int J Circumpolar Health 2012; 71:1–8.8. Shimada Y, Deguchi T, Nakane K, et al. Macrolide resistance-associated 23S rRNA mutation in Mycoplasma genitalium. Japan. Emerg Infect Dis 2011; 17:1148–50.11. Damon Getman, Alice Jiang, Meghan O'Donnell and Seth Cohen: Mycoplasma genitalium Prevalence, Coinfection, and Macrolide Antibiotic Resistance Frequency in a Multicenter Clinical Study Cohort in the United States. J. Clin. Mycoplasma Genitalium Macrolide Resistance in Stockholm, Sweden. Sex Transm Infect Published Online First: 08 August 2016. doi: 10.1136/sextrans-2016-052688

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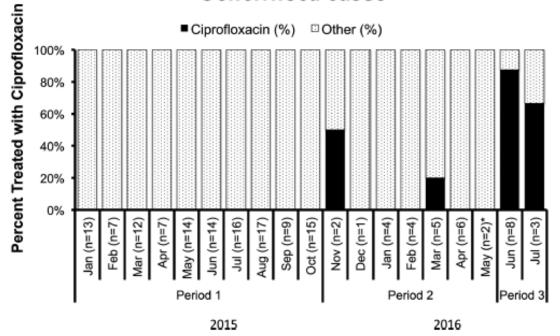
Macrolide resistance testing in M. genitalium

- Simultaneous detection of MG and mutations in the 23sRNA gene A2058G, A2058T, A2059G, A2059T
- proportion of treatment failures can be reduced from 40% to around 3% (Bradshaw - unpublished work)
- Quinolone resistance assay in development





Use of Ciprofloxacin Increased in Non-Empirically Treated gyrA Wild-Type N. Gonorrhoea cases



Implemented a Gyr A genotypic assay

Text reminders that cipro could be used

Increased use of cipro from: Period 1 0% Period 2 12.5% (3/24) Period 3 81.8% (9/11)

Rapid diagnostics

Cepheid 90 minutes Atlas Genetics io 30 minutes

TwistDx
15 minutes













Test and wait

- Do all partners need treating?
- N. gonorrhoeae guidelines 2018 if contact was >2 weeks ago, test and wait for results
- Needs to be weighed up against the risk of re-infection
- Decision should be based on a clinical risk assessment and in partnership with the patient.
- M. genitalium guidelines 2018 test current partner only

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Future possibilities for treatment of GC

- Use less ceftriaxone, use other sensitive agents
- New drugs
 - Solithromycin Phase 3 SOLITAIRE-U non-inferior to cef/azith
 - Zoliflodacin, Gepotidacin
 - Recycling of older antibiotics spectinomycin, gentamicin, fosfomycin

Poor activity against non-genital gonorrhoea

The Sydney Morning Herald

Kissing kids to blame for gonorrhoea spike, 'evidence out of Melbourne' suggests

- 1. Gonorrhoea in saliva implications for transmission without direct inoculation of pharynx
- 2. Saliva used as lubricant for anal receptive practices

- 3. RCT Listerine against pharyngeal GC
- Gargled Listerine or saline for 1 min
- Less likely to be culture positive on after listerine (p=0.013)
- Look out for OMEGA study daily mouthwash



Dequalinium intravaginal tablet for treatment of bacterial vaginosis

- 6 days pv tablet compared with clindamycin
- Cure rate 81.5% cf 78.4% clindamycin
- Non-inferiority demonstrated
- Only short term follow up



Arch Gynecol Obstet (2016) 293:469-484

- Well tolerated
- Cost slightly more than metronidazole
- No interactions
- 2018 NIHR have commissioned a BV study with dequalinium

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Vaccines – MeNZB (Bexsero)

- No GC vaccines so far. N. meningitidis and N. gonorrhoea are similar
- Mass vaccination programme of <20 year olds in NZ
- Retrospective case control study of young people attending GUM clinics
- Those vaccinated significantly less likely to have GC
- Vaccine effectiveness 31%



PEP with doxycycline 200mg <24hours for MSM taking PrEP

232 MSM

Molina JM et al Lancet Infect Dis 2018 Mar;18(3):308-317

Overall reduction in incident STIs 47%

70% decrease in CT diagnoses, 73% decrease in syphilis diagnoses





Position Statement on Doxycycline as Post-Exposure Prophylaxis for Sexually Transmitted Infections PAY ONLINE | f FOLLOW US ON FACEBOOK | Login / Register







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\$72.00 - \$140.00



Product not as displayed

Kamagra 100 (U.K. & N-IRELAND)

\$26.00 - \$88.00



Doxycycline PEP - more evidence needed

Larger clinical trials – how long before resistance detected?

ClinicalTrials.gov Identifier: NCT02864550

Official Title: A Randomized, Placebo-controlled Trial of Oral Doxycycline for the Prevention of Syphilis in Men Who Have Sex With Men (MSM)

- Observational data from clinics
 - "Have you taken any antibiotics since your last visit?"
 - How are they taking it? Daily? Event based?
 - Tolerability
 - Incident infections
- UK sales data from Dynamix

Summary

- Decoupling of incident HIV and bacterial STI
- Syndromic management is still routine for certain STI presentations
- Faster and more novel tests in pipeline
- Threat of AMR two almost untreatable STI

Top tips

- 1. Use less antibiotics (test and wait)
- 2. Use the right antibiotic (reflex resistance testing, known antimicrobial sensitivities)
- 3. In future consider using a non-antibiotic
- 4. Find out if your patients are taking doxycycline