

Philadelphia Department of Public Health Division of Disease Control

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Health Advisory

Gonorrhea with Decreased Susceptibility January 23, 2023

Background:

Last week, the CDC reported the identification of 2 cases of a novel strain of Neisseria gonorrhoeae in Massachusetts. This strain, which has been recently reported in the UK and was previously found in Asia-Pacific countries, was found to have decreased susceptibility to most classes of antibiotics used to treat gonorrhea (GC), including reduced susceptibility to ceftriaxone, cefixime and azithromycin and resistance to ciprofloxacin, penicillin, and tetracycline. The cases in Massachusetts were identified though routine susceptibility testing and enhanced surveillance of GC and were successfully treated with the recommended treatment dose of ceftriaxone 500 mg IM.

These cases remind us that antibiotic-resistant gonorrhea remains an urgent public health threat. The Philadelphia Department of Public Health (PDPH) participates in enhanced sentinel surveillance for resistant GC through CDC's Gonococcal Isolate Surveillance Project (GISP) using specimens collected at Health Center 1; to date, no isolates with the reduced susceptibility pattern described above have been identified among samples sent from Philadelphia.

Recommendations:

Patients with gonorrhea or suspected gonorrhea should be treated with CDC recommended therapy ceftriaxone 500 mg IM (1 gram for pts over 300lbs). When ceftriaxone cannot be used for treating gonorrhea because of cephalosporin allergy, a single 240 mg IM dose of gentamicin plus a single 2 g oral dose of azithromycin is an option.

Providers in all clinical settings should remain aware of the possibility of treatment-resistant GC. Gonorrhea cases with decreased susceptibility to antibiotics should be suspected in patients who do not have full resolution of symptoms or who repeatedly test positive at the same anatomic site without evidence of reinfection.

If cases are suspected, the following steps should be taken:

- Conduct a thorough sexual history to evaluate for possible reinfection.
- If reinfection has been ruled out and symptoms persist despite appropriate treatment call the STD Control Program at (215) 685-6737 so that further action can be taken; the STD program can facilitate culture and susceptibility testing; with appropriate follow up testing at CDC reference lab.
- Test of cure should be conducted on all patients with suspected treatment-resistant GC. (It should be noted that current CDC recommendations include routine test of cure for all patients with pharyngeal gonorrhea.)