NEISSERIA GONORRHOEA POSITIVITY IN CLIENTS PRESENTING AS ASYMPTOMATIC CONTACTS OF GONORRHOEA AT A SEXUAL HEALTH CENTRE

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Background: Previous guidelines at the Sydney Sexual Health Centre (SSHC) recommended empirical antibiotic treatment for asymptomatic contacts of *Neisseria gonorrhoea* at the time of testing. However, a 2015 audit observed that only 34% of MSM clients presenting as contacts of gonorrhoea to SSHC had a positive gonorrhoea test. This evidence, along with increasing concerns over the emerging antibiotic resistance of gonorrhoea, suggests that guidelines should be changed so that asymptomatic contacts are offered testing, and only treated with antibiotics if diagnosed with an STI.

Methods: This is a retrospective study of data extracted from the SSHC electronic medical record. A total of 295 contacts of gonorrhoea from 1/01/2018 to 30/06/2018 were included in the analysis. The primary outcome was proportion of asymptomatic gonorrhoea contacts with a positive gonorrhoea result from any anatomical site. Statistically significant differences in rates of gonorrhoea positivity according to gender, sexual preference, use of PrEP, sex worker status, country of birth, preferred language, and number of partners were calculated using Pearson's Chi-squared test.

Results: The overall proportion of asymptomatic gonorrhoea contacts with a positive gonorrhoea result was 27.8% (95% CI: 22.8-33.3%). The proportion of gonorrhoea positivity was significantly higher in females compared to males (52.0% vs. 26.4%, p<0.01), gay and bisexual men compared to heterosexual men (28.7% vs. 8.0%, p<0.05) and non-users of PrEP compared to PrEP users (31.2% vs. 12.5%, p<0.05). No statistically significant differences in gonorrhoea positivity were found in subgroups divided by sex worker status, country of birth, preferred language and number of partners.

Conclusion: The relatively low proportion of gonorrhoea positivity (27.8%) in asymptomatic gonorrhoea contacts at the SSHC between January and June 2018 supports a change in guidelines to no longer provide empirical antibiotic treatment to asymptomatic contacts.

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