Antibiotic resistance of Mycoplasma Genitalium in North Queensland (Cairns and surroundings)

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Background:

Mycoplasma genitalium (MG) is often an asymptomatic disease but can manifest similarly to chlamydia with dysuria and urethral/vaginal discharge. It is a well-established cause of non-gonococcal urethritis in males and has a growing body of evidence supporting its role in cervicitis/PID in females. The natural disease course of MG is not fully understood, which makes testing and management a grey area for clinicians, especially with a growing rate of antibiotic resistance in Australia, and globally.

Methods:

Eighty-three patients at Cairns Sexual Health clinic with any positive MG test from 15/02/21 - 5/01/23. The data collected includes - Patient demographics; Presenting symptoms; Specimen type; Dates of testing and results; Treatment; TOC status; Follow-up.

Results:

At the Cairns clinic, macrolide resistance rate for MG was 75.3% of those tested, higher than the rates found in the larger Australian population (> 50%) and North Queensland (almost 60%) in other studies. Interestingly, of the macrolide susceptible patients (23%), almost half (~42%) were overseas travellers. Most of the MG positive patients received doxi+moxi, but a large proportion initially received azithromycin before resistance result was known. When TOC was completed, an 82% cure rate was found but TOC was not completed in 46% of cases.

Conclusion:

From this, there is potentially excessive use of presumptive azithromycin for MG positive patients. Most guidelines do not recommend moxifloxacin as first-line therapy unless there is known/suspected macrolide resistance. Consistent with our findings, fluoroquinolone resistance in North Queensland is low and does not necessarily correlate to treatment failure. Perhaps in the future, fluoroquinolone resistance testing will become as routinely completed as macrolide resistance tests. Our findings are potentially limited by the short period of time of 2 years, patients lost to follow-up and that other factors were not examined.

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None.

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