

# MANAGEMENT OF GONORRHOEA CONTACTS: EVALUATION OF A CHANGE FROM UNIVERSAL TO SELECTIVE TREATMENT

## Authors:

Ng S<sup>1,2</sup>, Thanthree DKJ<sup>1</sup>, Chen MY<sup>1,2</sup>, Fairley CK<sup>1,2</sup>, Bradshaw CS<sup>1,2,3</sup>, Ong JJ<sup>1,2</sup>, Aguirre I<sup>1</sup>, Chow EPF<sup>1,2,3</sup>

<sup>1</sup> Melbourne Sexual Health Centre, Alfred Health, Melbourne, Victoria, Australia

<sup>2</sup> School of Translational Medicine, Faculty of Medicine, Nursing and Health Sciences, Monash University, Melbourne, Victoria, Australia

<sup>3</sup> Centre for Epidemiology and Biostatistics, Melbourne School of Population and Global Health, The University of Melbourne, Melbourne, Victoria, Australia

## Background:

Australian guidelines recommend considering presumptive treatment for individuals who reported sexual contact with someone with gonorrhea (hereafter gonorrhoea contacts). In October 2016, the Melbourne Sexual Health Centre (MSHC) changed from routinely treating all gonorrhoea contacts with ceftriaxone plus azithromycin (pre-period) to only treating if subsequent test results were positive for gonorrhoea, unless there was a reason for treatment at presentation (post-period). This study aimed to evaluate whether this policy change led to a fall in ceftriaxone administration and the indications for treatment in the after period.

## Methods:

This was a retrospective study using existing clinical data from MSHC, 2016-2023. We performed a chart review on a subset of cases between January and February in an alternative year to determine the reasons for treatment. We stratified the data into pre-period (2016) and post-period (2018, 2021, 2023).

## Results:

761 chart reviews were performed, most were males (98.4%, 686/761). Overall, gonorrhoea positivity did not differ before (23.6%, 30/127) versus after (30.4%, 192/632) ( $p=0.135$ ) routine treatment was stopped. The proportion of gonorrhoea contacts who received treatment on the day of attendance reduced significantly from 95.3% (123/129) to 37.3% (236/632) ( $p<0.001$ ) respectively. Of the 236 cases who received treatment in post-period, most were because of patient preference without symptoms (32.2%, 76/236), followed by anogenital symptoms at presentation (31.4%, 74/236). Of the 74 who reported symptoms, 24 (32.4%) tested positive for gonorrhoea. The proportion of individuals who tested negative for gonorrhoea but received ceftriaxone decreased from 74.8% (92/123) to 60.6% (143/236) ( $p=0.007$ ). Of the 396 who did not receive ceftriaxone in the after period, 99 (25.0%) tested positive for gonorrhoea and most (89.9%, 89/99) returned to MSHC for treatment.

## Conclusion:

Our findings indicate that although ceftriaxone use fell, a high proportion of gonorrhoea contacts still received ceftriaxone even though they tested negative for gonorrhoea.

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