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# Rectal *Mycoplasma genitalium* in men who have sex with men in Sydney: implications for screening and health promotion

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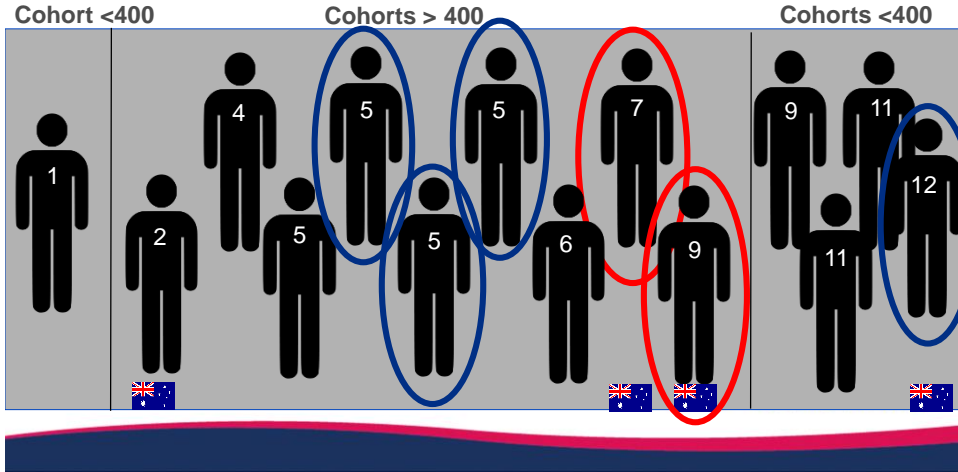
## Rectal Mycoplasma Genitalium

- Limited data on prevalence and natural history of rectal MG
- Potential cause of proctitis and increased HIV transmission in MSM
- Lack of consensus on whether to screen in asymptomatic MSM



## Prevalence & Predictors

- Only repeated association is with HIV infection



## Knowledge & Attitudes

No studies have investigated the knowledge and level of concern towards MG

## Aims

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### Primary aim

To determine the prevalence and predictors of rectal MG in asymptomatic MSM

### Secondary aim

To determine the knowledge and level of concern towards MG in MSM



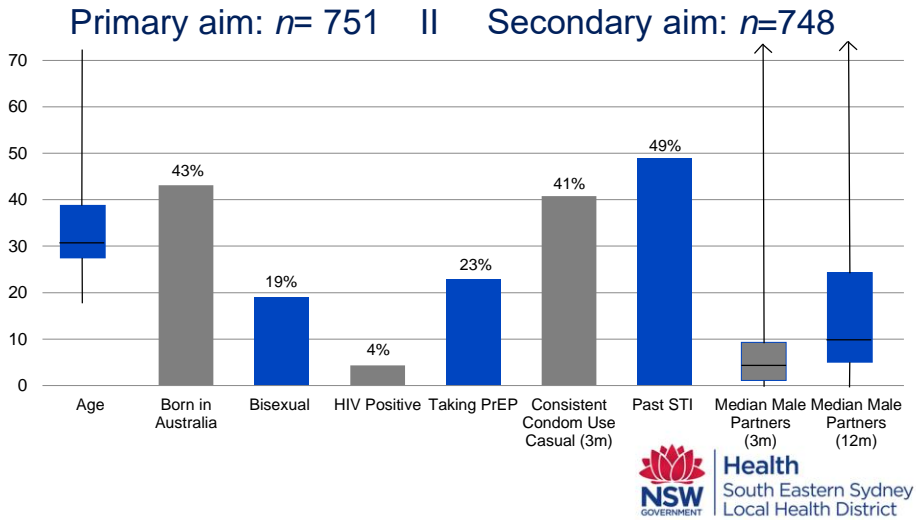
## Methods

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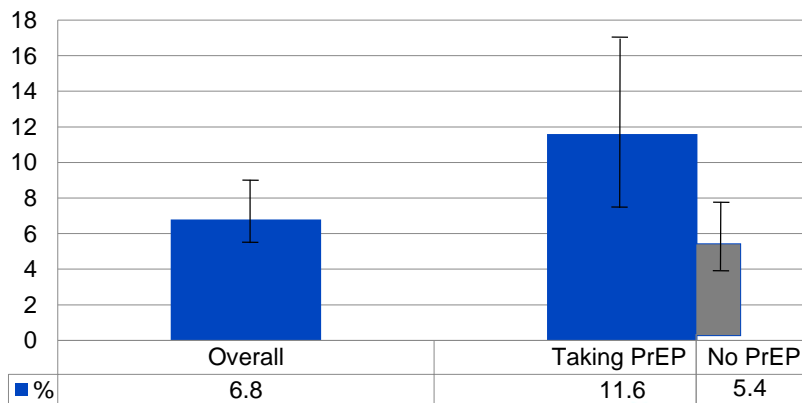
- **Study design:** prospective cross-sectional study
- **Recruitment sites:**
  - Sydney Sexual Health Centre
  - a[TEST]
- **Study group:** rectally asymptomatic MSM, who are having rectal swabs collected as part of their care
- **Data collection:** rectal swab and 14-item questionnaire
- **Data analysis:**
  - **Primary aim:** overall prevalence + multivariate analysis to look at predictors
  - **Secondary aim:** calculated frequencies and 95%CI for questionnaire responses



## Demographics



## Prevalence



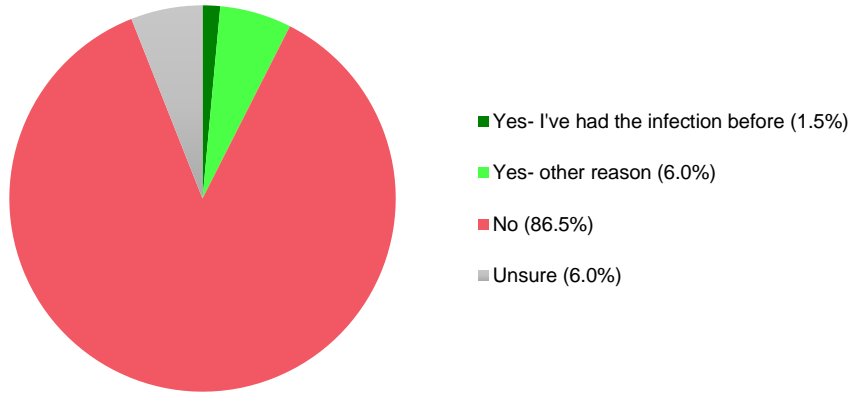
## Univariate

Variable	Crude Odds Ratio (95% CI)	P-value
Currently on PrEP	2.32 (1.28-4.18)	0.03
Past STI	2.01 (1.11-3.64)	0.02
Inconsistent Condom Use Casual (3m)	1.94 (1.00-3.73)	0.04

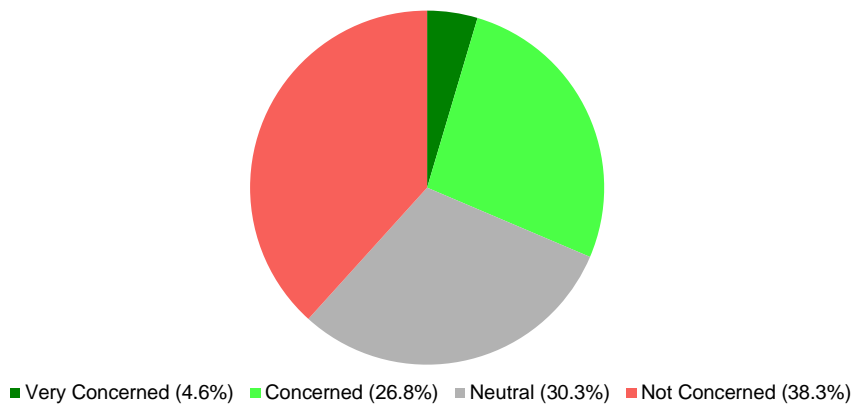
## Multivariate

Variable		Odds Ratio (95% CI)	P-value
Currently on PrEP		2.06 (1.11-3.83)	0.02
Past STI		1.79 (0.95-3.34)	0.07
HIV		0.96 (0.22-4.29)	0.96
Age	<25	1	-
	25-29	0.96 (0.41-2.28)	0.93
	30-34	0.89 (0.36-2.23)	0.81
	≥35	0.66 (0.28-1.54)	0.33

## Prior Knowledge of MG

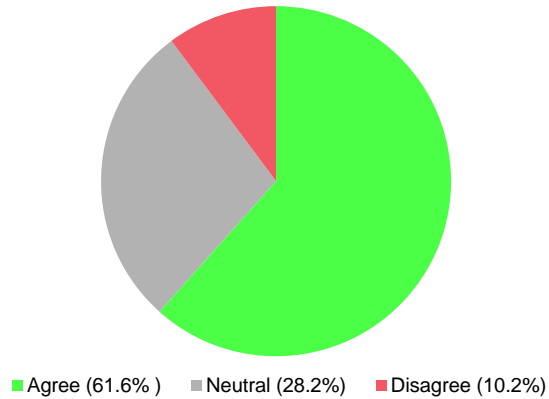


## Level of concern towards having MG



## Would you increase condom use in response to high antibiotic resistance

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## Key Findings

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1. We found a prevalence of 6.8%
2. Men who were on PrEP had a significantly higher prevalence of MG
3. We found that PrEP use was associated with rectal MG
4. We identified low awareness and concern of MG amongst MSM

## Strengths & Limitations

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### Strengths:

- Largest study to look at the predictors of rectal MG
- First study to look at knowledge and level of concern towards MG



## Strengths & Limitations

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### Limitations:

- Low numbers of HIV positive patients
- Only 62% of eligible patients were asked to participate
- Didn't collect data on co-infections





## Acknowledgments

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- Dr. Rick Varma, Dr. Anna McNulty, Ms. Vickie Knight, Mr. Leon McNally, Ms. Dimitra Iliakis- co-authors
- Dr. Zhixin Liu- statistical analysis
- Mr. Heng Lu- data extraction
- Clinical staff and peers at SSHC and a[TEST] for patient recruitment

## Questions

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