

2004

National STD Prevention Conference

2004 NATIONAL STD PREVENTION CONFERENCE

Late-Breaker Research Summaries

Abstract 1520 – Embargo: Tuesday, March 10, 12:00 pm ET

Drug-resistant gonorrhea emerging rapidly among MSM in Seattle area. New research shows that cases of gonorrhea resistant to the antibiotic ciprofloxacin – a standard antibiotic treatment for the disease – increased rapidly in Seattle & King County, Washington in 2003. Led by Dr. William L.H. Whittington of the University of Washington, researchers examined more than 5,000 cases of gonorrhea diagnosed in Seattle & King County between 1995 and 2003 for which data on drug resistance were available. They found that ciprofloxacin resistance – seen only sporadically between 1995 and 2002 – increased from zero cases in the first quarter of 2003 to 3.8 percent of cases in the third quarter and 16.5 percent of cases in the fourth quarter of 2003. Ninety percent of resistant cases occurred among MSM, who were 8.6 times as likely as heterosexual men and women to have resistant infection. Due to the prevalence of ciprofloxacin-resistant gonorrhea infections, local gonorrhea treatment recommendations were modified to exclude ciprofloxacin and other fluoroquinolones as first-line therapy. **[Rapid emergence of gonococcal fluoroquinolone resistance in men who have sex with men in King County, Washington; Late-Breaker Session, Tuesday, March 10, 12:00-1:30 pm]**

Abstract 1518 – Embargo: Tuesday, March 10, 12:00 pm ET

MSM with syphilis diagnosed later and remain infectious longer than heterosexual men. New CDC research shows that MSM are 45 percent less likely to be diagnosed with syphilis during the primary stage of infection – and therefore remain infectious for a longer period of time – than heterosexual men. Led by CDC's Dr. Robert A. Gunn, researchers analyzed data on the 201 cases of primary and secondary syphilis diagnosed in San Diego County, California, between January 2000 and December 2003, of which 72 percent (144) occurred among MSM. In addition to being diagnosed later, MSM tended to be infectious for longer (36 vs. 22 days), have a higher number of sex partners (10.7 vs. 2.7 partners per case), and have contact information for a smaller percentage of their partners (16 vs. 40 percent) than heterosexual men. The findings suggest that traditional syphilis control strategies, which rely on prompt diagnosis of new infectious cases and treatment of patients and their partners, may not be as

effective among MSM as among other populations. **[Syphilis among men who have sex with men: Limitations of traditional case and partner services, San Diego County, CA; Late-Breaker Session, Tuesday, March 10, 12:00-1:30 pm]**

Abstract 1507 – Embargo: Monday, March 8, 2:00pm ET

MSM respond favorably to STD testing and other health services offered in bars and nightclubs. A new campaign launched by the New York City Department of Health and Mental Hygiene (DOHMH) shows that many MSM are willing to undergo HIV and STD tests – and to take advantage of additional health services – offered in bars and nightclubs. Led by the Bureau of STD Control's Syphilis Elimination Group, DOHMH co-sponsored four STD screening events for men attending two local gay bars and a community center in November and December 2003. The events also offered a broad range of other health services, including hepatitis A/B and influenza vaccination and smoking cessation services. Of 930 men attending the events, 33 percent registered to receive at least one of the health services offered. Of those in attendance, 7.2 percent took an HIV test. Of those tested, 9 percent tested positive for HIV.

[Healthy Men's Night Out: A global approach to Health and STD control in the MSM community; Late-Breaker Poster]

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