

## With 'super gonorrhea' a threat, many still getting wrong antibiotics

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(HealthDay)—When an unnamed British man recently contracted a form

of "super gonorrhea" resistant to the antibiotics commonly used to treat it, the news spiked concern in doctors and microbiologists worldwide.

This week, physicians did cure the man's sexually transmitted disease using an antibiotic called ertapenem, but they called the case a "major wake-up call for everybody."

One way to slow [gonorrhea](#)'s progression to total antibiotic resistance is to stick to the recommended treatment regimen. But new data released Thursday finds that just isn't being done in 1 out of every 5 gonorrhea cases in the United States.

In 19 percent of cases reviewed, patients did not receive the dual ceftriaxone-azithromycin antibiotic therapy that's recommended by the U.S. Centers for Disease Control and Prevention, agency researchers reported.

In most gonorrhea cases, patients "should be treated with the recommended regimen to ensure effective treatment and to help forestall the emergence of antimicrobial resistance," said a team led by Emily Weston, an STD researcher at the CDC.

According to the agency, nearly 470,000 cases of gonorrhea were reported in the United States in 2016, up 18.5 percent from the year before. What's more, the bacterium "has progressively developed resistance to most antimicrobials," Weston and her colleagues said.

To find out more about how clinics treat the illness, the researchers looked at medical records for more than 3,200 cases treated at seven regions around the United States.

They found that CDC recommendations were adhered to 81 percent of the time, and proper treatment was much more likely at clinics that

specialized in [sexually transmitted diseases](#) and/or reproductive health than elsewhere. In those clinics, adherence topped 90 percent.

"These findings underscore that publicly funded STD and reproductive health clinics provide quality STD care," said interim executive director Laura Hanen, of the National Association of County and City Health Officials.

"However, we need all health care settings performing at this level in order to effectively treat gonorrhea, prevent new infections, and slow the threat of drug-resistant gonorrhea," she added in an association news release.

When patients did not receive the recommended ceftriaxone-azithromycin dual therapy, they often received just one antibiotic, the CDC study found. In 3 percent of cases patients were treated with azithromycin alone, and in just over 1 percent of cases the patients received doxycycline. Both of these treatments could boost the odds that the gonorrhea bacterium develops new—and potentially dangerous—resistance to antibiotics, the CDC team noted.

The specter of gonorrhea strains resistant to all [antibiotics](#) is worrisome and real, said Dr. Bruce Farber, chief of infectious diseases at North Shore University Hospital in Manhasset, N.Y.

"Resistant gonorrhea already is all over the United States," Farber said. "It's maybe not a strain like that you've just read about from the U.K., which is extraordinary, but nevertheless generally these cases are occurring."

In the meantime, people can prevent the spread of gonorrhea by using condoms, Farber said.

Dr. Edward Hook is an infectious disease expert with the University of Alabama at Birmingham. He said that gonorrhea typically presents with symptoms such as burning sensations while urinating or discharges from the penis or vagina. But many people either don't have symptoms or don't realize they have the infection.

"Persons who have sex with more than one person over a set period of time owe it to themselves to get a sexual health checkup, even in the absence of symptoms," Hook said. "One of the great barriers to addressing this problem is that sometimes people are a little embarrassed about asking to be checked for [sexually transmitted infections](#). I think we need to get over that."

The CDC findings were published in the April 27 issue of the agency's *Morbidity and Mortality Weekly Report*.

**More information:** Edward Hook, M.D., infectious disease specialist, University of Alabama at Birmingham; Bruce Farber, M.D., chief, infectious diseases, North Shore University Hospital, Manhasset, N.Y., and Long Island Jewish Medical Center, New Hyde Park, N.Y.; National Association of County and City Health Officials, news release, April 26, 2018; *Morbidity and Mortality Weekly Report*, April 27, 2018

The U.S. Centers for Disease Control and Prevention has more about [gonorrhea](#).

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