

Percentage of Mycoplasma pneumoniae infections up since September 2023, research shows

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The percentage of Mycoplasma pneumoniae infections decreased during the pandemic, but has increased since September 2023, according to research <u>published</u> in the Feb. 22 issue of the U.S. Centers for Disease



Control and Prevention Morbidity and Mortality Weekly Report.

Chris Edens, Ph.D., from the CDC in Atlanta, and colleagues used data from the CDC National Syndromic Surveillance Program (NSSP) to compare the percentage of M. pneumoniae-related diagnoses among all pneumonia emergency department visits before (January 2018 to April 2020), during (May 2020 to August 2023), and after (September 2023 to December 2023) the COVID-19 pandemic.

In addition, during the same period, data from the New Vaccine Surveillance Network (NVSN) were analyzed to compare the percentage of positive M. pneumoniae laboratory test results in the United States.

The researchers observed a decrease in the percentage of M. pneumoniae-related diagnoses among pneumonia emergency department visits reported in NSSP, from 1.15 to 0.35 percent during the prepandemic period and pandemic period, respectively; this was followed by an increase to 0.89 percent during the postpandemic period.

The corresponding percentage of laboratory test results within the NVSN that were positive for M. pneumoniae decreased from 1.2 to 0.04 percent and then increased to 0.53 percent. Thirteen of 14 M. pneumoniae-positive specimens that were tested for macrolide resistance during September 2023 to January 2024 were susceptible to macrolides.

"Providers should consider M. <u>pneumoniae</u> as part of the differential diagnosis for cases of community-acquired pneumonia during fall and winter respiratory illness seasons," the authors write.

More information: Chris Edens et al, Notes from the Field: Reemergence of Mycoplasma pneumoniae Infections in Children and Adolescents After the COVID-19 Pandemic, United States, 2018–2024, *MMWR. Morbidity and Mortality Weekly Report* (2024). DOI:



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