Testing for Mycoplasma Genitalium in Pelvic Inflammatory disease: A Clinical Audit

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Background:
• Pelvic inflammatory disease (PID) is a spectrum of inflammatory disorders of the female upper genital tract¹
• Common causes for PID are sexually transmitted infections (STIs) including Mycoplasma Genitalium (MG)²
• MG is not always treated with first line PID antibiotic regimens and is of concern due to antibiotic resistance ³,⁴

Aim:
• To establish if patients diagnosed with PID are being tested for MG as per guidelines

Methods:
• All women presenting to Gold Coast Health between January 2019 to January 2020 who satisfied the spectrum of PID were included
• The Australian STI guidelines were used to benchmark the clinical definition for PID
• Descriptive statistical analysis was performed

Results:
• 299 women were included
• 289/299 (96.6%) were of reproductive age
• 220/299 (73.6%) were tested for Chlamydia Trichomonas (CT) and Neisseria Gonorrhoea (NG) but only 34/299 (11.4%) were tested for MG
• Only 27/299 (9%) received antibiotics which would have treated MG infection

Conclusions and Recommendations:
• Testing for MG in PID is low despite good testing rates for CT and NG in patients with PID
• Research into determinants of MG testing amongst patients diagnosed with PID may guide interventions to improve MG testing
• Currently MG prevalence is low, balanced with potential toxicities of antibiotics to treat MG does not justify changing guidelines for the empirical treatment of PID
• Capitalising on high testing rates for CT and NG to include MG in PID as well as reflex macrolide testing for MG can ensure appropriate treatment