

Mycoplasma Genitalium:

A snapshot from a sexual health clinic in Central Queensland

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Introduction

The Blood Borne Virus and Sexual Health Service in Rockhampton is a service that provides assessment, screening, diagnosis, treatment or ongoing management as well as education and health promotion to the community and wider Central Queensland Hospital and Health Service. The health service catchment area is thereabouts the size equivalent of Tasmania with a population approximately of 250,000 people.

Background

Mycoplasma Genitalium (MG) is a sexually transmitted bacterium only detectable by nucleic acid amplification tests (NAAT). It is associated with urethritis in men, cervicitis in women and often asymptomatic rectal infection. In 2016 – 2017 macrolide resistance mutations were detected in approximately 80% of MSM and 50% of heterosexual men and women infected with MG at the Melbourne Sexual Health Centre¹.

Aim

Our aim was to define the burden and clinical features of MG to inform clinical practice within a regional setting. To evaluate the rates of positive MG within regional / Central Queensland with all presenting adults at Blood Borne Virus and Sexual Health Service with or without any symptoms suggestive of MG or any other STI were included in this snapshot. Screening results were confirmed through NAAT included Urine, High Vaginal Swab (HVS), Rectal and Throat swabs collected.

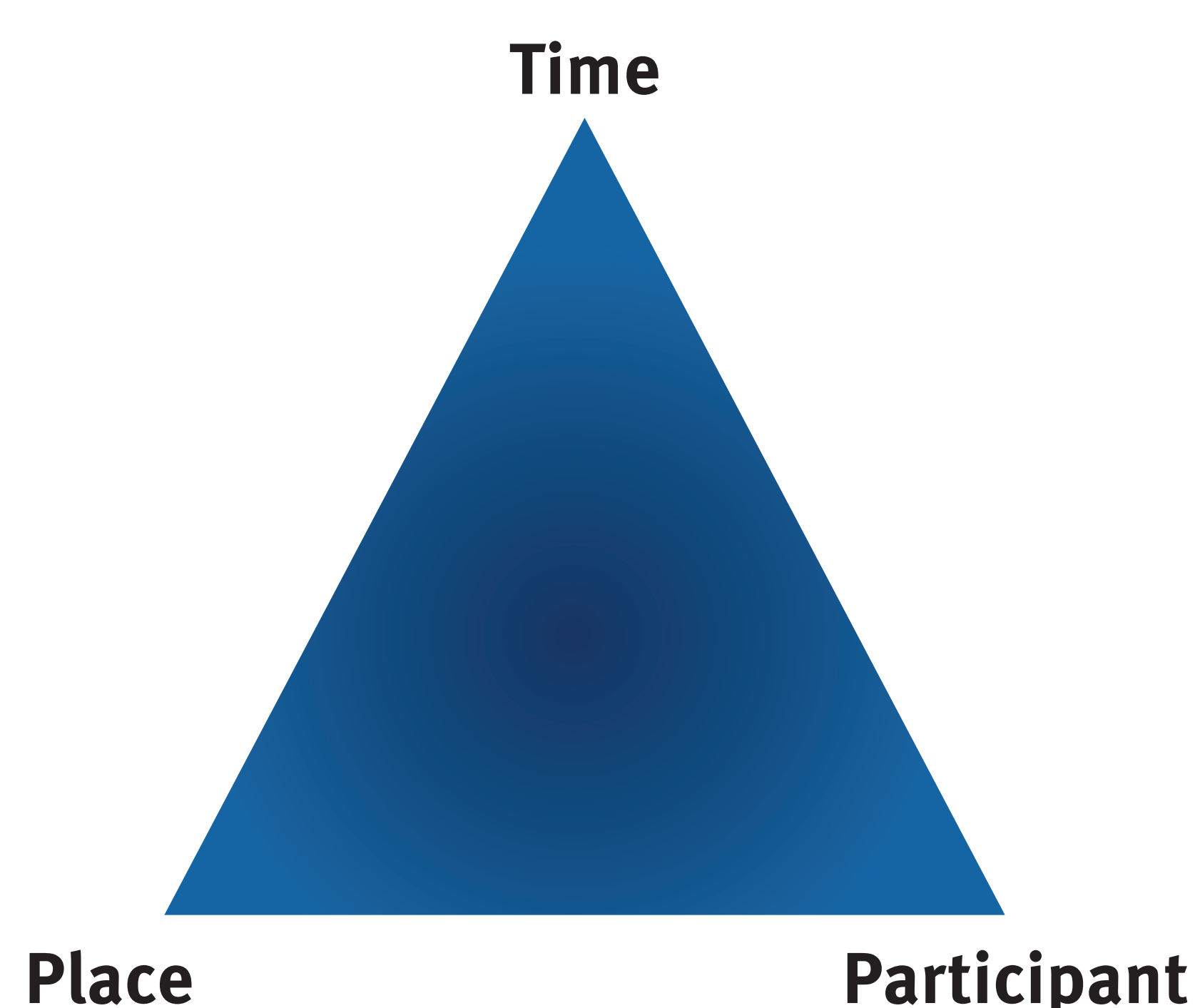
Methods

We undertook an internal quality audit of 1,237 tests performed between January and December 2018.

The aim was to develop a profile on Mg with presenting patients screened. This is formulated by

1. Rates of all positive cases attending Blood Borne Virus and Sexual Health Service
2. Clinical features of Mg
3. Participant / treatment profile of Mg within the Central Queensland Hospital and Health Service

Treatment profile



Results

Characteristics of Positive Cases	Total (n=)51	Total (n=)51
Gender	51	51
Male	41	80%
Female	10	20%
Sexual Preference	51	51
Male/Male	31	61%
Male/Female	19	37%
Both	1	2%
Indigenous Status	51	51
Aboriginal	6	12%
Torres Strait Islander	0	0%
Both	3	6%
Neither	39	76%
Not Stated	3	6%
Symptomatic at Presentation	51	51
Yes	10	20%
No	41	80%
Infection Site	51	51
Urine	30	59%
Rectum	19	37%
Throat	0	0%
Urine/Vagina	1	2%
Urine/Rectum	1	2%
Resistance	51	51
Yes	3	6%
No	4	8%
Not Tested	44	86%

Discussion

Results reflected our current demographic profile with rates higher in males than females. Rates of infection were higher in men who have sex with men (61%) reflecting those of the Melbourne Sexual health Centre. Rates of asymptomatic infection (80%) were four time higher than symptomatic infection (20%). Due to screening constraints it was difficult to extrapolate Rates of resistance. However, anecdotally rates of resistance were higher in rectal infections in men who have sex with men.

Conclusion

This snapshot study was central to increasing both our understanding of and implications of an emerging topic within sexual health. It focused attention screening procedures and process which have had an impact on clinical practice across our service.

Disclosure of Interest Statement

The Rockhampton Blood Borne Virus and Sexual Health Service is part of the Central Queensland Hospital Health Service. No financial grants were received in the development of this study.