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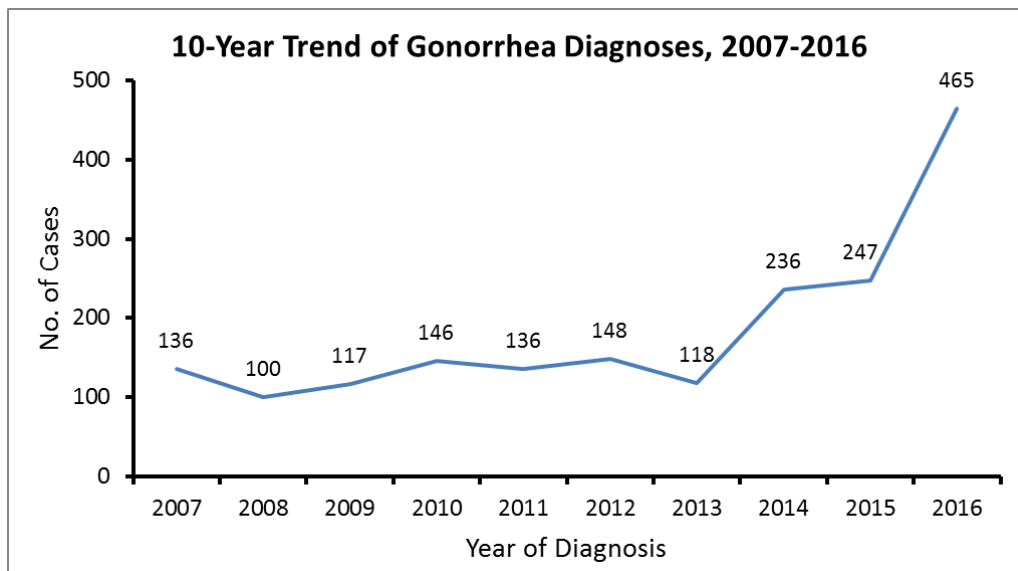
Distributed by the NH Health Alert Network
Health.Alert@dhhs.nh.gov
January 19, 2016 1100 EDT(11:00 AM EDT)
NH-HAN 20170119



Gonorrhea Outbreak in New Hampshire

Key Points and Recommendations:

- New Hampshire is experiencing an outbreak of gonorrhea. There has been a more than 250% increase in the number of gonorrhea cases in 2016 compared with prior baseline.



- Many clinicians are not treating correctly and we ask you to urgently review the current treatment guidelines (<https://www.cdc.gov/std/tg2015/gonorrhea.htm>), which specify the need for dual antibiotic therapy to prevent antibiotic-resistant gonorrhea.
- Healthcare providers should routinely ask their gonorrhea patients to estimate the number of sexual partners they have had in the past 60 days, and help communicate the need for partners to be tested and treated for gonorrhea.
- Clinicians should offer clinic appointments for sex partners, or instruct partners to be evaluated by their own primary care providers or through other low/no-cost options. Options are listed in the attached informational sheet and should be given to patients to give to their sex partners. Additional resources for patients and sex partners can be found on our website: <http://www.dhhs.nh.gov/dphs/cdcs/gonorrhea-providers.htm>.
- Please report all cases of gonorrhea, along with any information about sex partners, to the NH Department of Health and Human Services, Division of Public Health Services (DPHS) at 603-271-4496.
- DPHS will support clinicians by:
 1. Contacting sex partners of individuals diagnosed with gonorrhea
 2. Reviewing patient treatment regimens and offering clinicians and practices in-service training on the current treatment guidelines

Situation:

New Hampshire has seen an unprecedented increase in the number of gonorrhea cases. Between 2007 and 2013, approximately 130 cases per year were reported to DPHS. For 2016, 465 cases have been reported, which represents a more than 250% increase. Most cases have been in males and in those under 40 years of age. The greatest number of cases has been seen in Hillsborough County, followed by Rockingham, Merrimack, and Strafford Counties.

The majority of gonorrhea cases (75%) were diagnosed in either private clinician offices, or in an emergency department or urgent care setting. Based on preliminary data, approximately 25% of patients diagnosed with gonorrhea in 2016 were not correctly treated initially according to current CDC recommendations; this is similar whether a patient was treated in a clinician office, or in an emergency department or urgent care setting.

Centers for Disease Control and Prevention (CDC) 2015 Sexually Transmitted Diseases (STD) Treatment Guidelines:

The Centers for Disease Control and Prevention (CDC) has identified drug-resistant gonorrhea as one of the top three urgent national threats for antibiotic-resistance infections. Because of concern for increasing antibiotic resistance, the current CDC 2015 STD treatment guidelines require treatment of gonorrhea infections with two different antibiotics to prevent antibiotic resistance (<https://www.cdc.gov/std/tg2015/gonorrhea.htm>). **Single drug regimens should not be used.**

Due to emerging antibiotic resistance, the only recommended treatment for gonorrhea (cervical, urethral, rectal, or pharyngeal infection) is a two-drug regimen consisting of IM ceftriaxone and oral azithromycin:

Recommended Regimen
Ceftriaxone 250 mg IM in a single dose PLUS Azithromycin 1g orally in a single dose

Oral cefixime is no longer routinely recommended because blood and tissue levels are lower than with IM ceftriaxone, and gonococcal isolates with reduced susceptibility to cefixime have been increasing. Oral cefixime (in combination with oral azithromycin) is only recommended if IM Ceftriaxone is not available. Doxycycline is also no longer a recommended therapy due to increasing tetracycline resistance, but can be considered as a part of dual therapy for azithromycin allergic patients.

Alternative Treatment Regimens for Gonorrhea:

- Cefixime 400mg orally in a single dose PLUS azithromycin 1g orally in a single dose is an alternative regimen only if IM Ceftriaxone is not available, and should only be considered for uncomplicated urethra, cervix, and rectum infections (not pharyngeal infections).
- For patients with an azithromycin allergy, doxycycline 100 mg orally twice daily for seven days can be substituted for azithromycin (in combination with ceftriaxone 250 mg IM).
- For patients with a cephalosporin allergy, the following regimens can be considered:
 1. Gemifloxacin 320 mg orally in a single dose PLUS azithromycin 2g orally in a single dose (note, there is currently a national shortage of Gemifloxacin).
 2. Gentamicin 240 mg IM in a single dose PLUS azithromycin 2g orally in a single dose.

Screening for Gonorrhea:

Healthcare providers should take sexual histories on all patients and test for STDs based on patient risk. Patients should be screened at the site of exposure. If patients engage in oral or anal sex, for example, they should be screened for gonorrhea in the oropharynx and rectal areas, respectively. Screening should include, but is not limited to, the follow:

- Persons who are sexually active with a partner who was diagnosed with gonorrhea should be evaluated, tested, and empirically treated (i.e., do not wait for test results to return before treating).
- Any patient reporting high-risk sexual activity should be screened. This includes new or multiple sex partners, unprotected sex, a sex partner with an STD, exchanging sex for money or drugs, men who have sex with men (MSM), etc.
- All sexually active females aged <25 years, regardless of risk, should be screened annually for *Chlamydia trachomatis* and *Neisseria gonorrhoeae*.
- Men who have sex with men (MSM) should be screened at least annually or sooner depending on risk.
- Women ≤35 years old and men <30 years old in correctional facilities.

Additional information and resources:

1. CDC 2015 STD Treatment (and screening) guidelines: <http://www.cdc.gov/std/tg2015/default.htm/>
2. STD screening recommendations: <http://www.cdc.gov/std/prevention/screeningReccs.htm>
3. CDC report on emerging *Neisseria gonorrhoeae* antibiotic resistance: https://www.cdc.gov/mmwr/volumes/65/ss/ss6507a1.htm?s_cid=ss6507_w
4. CDC STD webpage: <http://www.cdc.gov/std/default.htm>
5. CDC A Guide to Taking a Sexual History: <http://www.cdc.gov/STD/treatment/SexualHistory.pdf>
6. NH STD/HIV Surveillance Report 2011-2015: <http://www.dhhs.nh.gov/dphs/cdcs/documents/std-hiv-aids-2011-15.pdf>
7. NH Gonorrhea Outbreak website: <http://www.dhhs.nh.gov/dphs/cdcs/gonorrhea-providers.htm>.
8. National Network of STD Clinical Prevention Training Centers (NNPTC) maintains an online clinical consultation service called the STD Clinical Consultation Network (STDCCN): www.stdccn.org and www.nnptc.org.

NH DHHS-DPHS, NH HAN 20170119, Gonorrhea Outbreak in NH

For any questions regarding the contents of this message, please contact NH DHHS, DPHS, Bureau of Infectious Disease Control at 603-271-4496 (for urgent matters after hours 603-271-5300).

To change your contact information in the NH Health Alert Network, contact Thom Flynn at 603-271-7499 or email thomas.flynn@dhhs.nh.gov.

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From: Benjamin P. Chan, MD, MPH – State Epidemiologist
Originating Agency: NH Department of Health and Human Services, Division of Public Health Services

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**New Hampshire Department of Health and
Human Services**
Division of Public Health Services



STD Partner Agencies

Sexually Transmitted Disease (STD) Partner Agencies

These agencies provide full STD testing and treatment services, as well as testing for Human Immunodeficiency Virus (HIV) and Viral Hepatitis C (HCV). Please contact the agency directly for more information about walk-in hours and appointment availability.

If you are concerned that you have been exposed to gonorrhea or a partner has told you that they have gonorrhea, please notify the agency when you call and testing and treatment for gonorrhea will be provided at no cost. Additional STD, HIV and HCV services are provided at low-to-no cost.

MANCHESTER HEALTH DEPARTMENT

1528 Elm Street
Manchester, NH
Tel: 603-624-6466

NASHUA DIVISION OF COMMUNITY AND PUBLIC HEALTH SERVICES

18 Mulberry Street
Nashua, NH
Tel: 603-589-4500

Primary Care and/or Family Planning Partner Agencies

Please contact these agencies to learn more about affordable testing and treatment for gonorrhea and other STDs, including HIV:

AMMONOOSUC COMMUNITY HEALTH SERVICES

25 Mt Eustis Road
Littleton, NH 03561
Tel: 603-444-2464

CAP BELKNAP/MERRIMACK COUNTY

121 Belmont Road
Laconia, NH 03246
Tel: 603-524-5453

CONCORD HOSPITAL - FAMILY HEALTH CENTER

250 Pleasant Street
Concord, NH 03301
Tel: 603-227-7000

COOS COUNTY FAMILY HEALTH SERVICES

54 Willow St.
Berlin, NH 03570
Tel: 603-752-3669

EQUALITY HEALTH CENTER (formerly CONCORD FEMINIST HEALTH CENTER)

38 South Main Street
Concord, NH 03301
Tel: 603-225-2739

FAMILIES FIRST OF THE GREATER SEACOAST

100 Campus Drive, Suite 12
Portsmouth, NH 03801
Tel: 603-422-8208

FEMINIST HEALTH CENTER OF PORTSMOUTH/LOVERING HEALTH CENTER

559 Portsmouth Avenue
Greenland, NH 03840
Tel: 603-436-7588

GOODWIN COMMUNITY HEALTH CENTER

311 Route 108
Somersworth, NH 03878
Tel: 603-516-2550

HEALTH FIRST FAMILY CARE CENTER

841 Central St.
Franklin, NH 03235
Tel: 603-934-0177

HARBOR HOMES

45 High Street
Nashua, NH 03060
Tel: 603-882-3616

INDIAN STREAM HEALTH CENTER

141 Corliss Lane
Colebrook, NH 03576
Tel: 603-237-8336

LAMPREY HEALTH CARE - NASHUA

22 Prospect Street
Nashua, NH 03060
Tel: 603-659-2494

LAMPREY HEALTH CARE – NEWMARKET

207 South Main Street
Newmarket, NH 03857
Tel: 603-659-3106

LAMPREY HEALTH CARE – RAYMOND

128 Route 27
Raymond, NH 03077
Tel: 603-895-3351

MANCHESTER COMMUNITY HEALTH CENTER

145 Hollis Street
Manchester, NH 03101
Tel: 603-626-9500

**MANCHESTER COMMUNITY HEALTH CENTER
(CHILD HEALTH SERVICES)**

1245 Elm Street
Manchester, NH 03101
Tel: 603-629-9707

**MANCHESTER HEALTH DEPARTMENT
(Manchester Healthcare for the Homeless)**

1528 Elm Street
Manchester, NH 03101
Tel: 603-624-6466

MID-STATE HEALTH CENTER

101 Boulder Drive, Suite 1
Plymouth, NH 03264
Tel: 603-536-4099

**NEW LONDON HOSPITAL ASSOCIATION, INC
(Newport Health Center)**

273 County Road
New London, NH 03257
Tel: 603-526-5512

**PLANNED PARENTHOOD OF NORTHERN NEW
ENGLAND- DERRY**

4 Birch St.
Derry, NH 03038
Tel: 603-434-1354

**PLANNED PARENTHOOD OF NORTHERN NEW
ENGLAND- EXETER**

108 High St.
Exeter, NH 03833
Tel: 603-772-9315

**PLANNED PARENTHOOD OF NORTHERN NEW
ENGLAND- KEENE**

8 Middle St.
Keene, NH 03431
Tel: 603-352-6898

**PLANNED PARENTHOOD OF NORTHERN NEW
ENGLAND- MANCHESTER**

24 Pennacook St.
Manchester, NH 03104
Tel: 603-669-7321

WEEKS MEDICAL CENTER - LANCASTER

173 Middle Street
Lancaster, NH 03584
Tel: 603-788-4911

WEEKS MEDICAL CENTER – WHITEFIELD

24 Lancaster Road
Whitefield, NH 03598
Tel: 603-837-9005

**WHITE MOUNTAIN COMMUNITY HEALTH
CENTER**

298 White Mountain Highway
Conway, NH 03818
Tel: 603-447-8900