

STI Global Update

Newsletter of the International Union against Sexually Transmitted Infections

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President's Column

As I write, I do so in the shadow of the recent air disaster in Ukraine which has shocked so many of us. On behalf of the entire membership of the International Union against Sexually Transmitted Infections (IUSTI), I offer our sincere condolences to all family members, friends and work colleagues directly affected by the tragic loss of life on Air Malaysia Flight MH17. In particular, IUSTI would like to pay tribute to those professional colleagues, en route to the 20th International AIDS Conference in Melbourne, who worked tirelessly in the fight against HIV/STIs. Their contributions will not be forgotten and this fight will go on.

I would like to thank all IUSTI members who participated in the 2014 STD Prevention Conference (also the 15th IUSTI World Congress and the 2nd Latin American IUSTI-ALACITS Congress) which took place in Atlanta in June.



Professor Tetsuro Matsumoto gave a plenary lecture on gonococcal antimicrobial resistance in Japan (L to R: Tetsuro Matsumoto, Japan; Patty Garcia, Peru; David Lewis, South Africa)

The conference was a tremendous success and relied on the hard work of a dedicated conference team. It was a unique conference for IUSTI as the event brought together so many partners, all of whom who worked well together and ensured a balanced and representative conference programme. IUSTI organized a plenary and mini-

plenary session and two symposia which were well received.



Speakers and participants at the IUSTI Regional Challenges Symposium (L to R: Airi Pöder, Estonia; Mauro Romero Passos, Brazil; Amina Hançali, Morocco; Manju Bala, India; Francis Ndowa, Zimbabwe; Janet Wilson, UK; Somesh Gupta, India)

The conference also marked the 100th anniversary of the American Sexual Health Association (ASHA). IUSTI certificates of appreciation were awarded to Dr. Gail Bolan (Conference Co-Chair, CDC), Lynn Barclay (ASHA) and Professor Patty Garcia (IUSTI's Regional Director for Latin America and the Caribbean) whilst a prestigious IUSTI Silver Medal was awarded to Dr. Sevgi Aral for her sterling efforts in co-ordinating a scientific programme through a novel programmatic science approach that combined an excellent array of US domestic and international presentations. I would like to share IUSTI's appreciation of the support we received from Standard Diagnostics (Korea) and Hologic Gen-Probe (USA) in respect of our scholarship programme. This enabled a large number of scholarships to be awarded to participants from Latin America and the Caribbean; several participants from other IUSTI regions also benefitted from this support.



David Lewis and Patty Garcia thanking the Standard Diagnostics team for their support of the IUSTI scholarship programme

We look forward our next World IUSTI congresses, which will take place in rotation to complete a cycle across our five IUSTI regions. Following the successes of the 14th IUSTI World Congress, held in collaboration with the International Society for STD Research (ISSTDR) in Vienna in 2013 and the recent 16th IUSTI World Congress in Atlanta, IUSTI will once more partner with ISSTDR in 2015 to host the World STI and HIV Congress in Brisbane, Australia (16th IUSTI World Conference, 13-16 September). The planning of the two subsequent IUSTI World Congresses are also well underway and will take place in Marrakesh, Morocco (17th IUSTI World Congress, 9-11 May 2016) and Rio de Janeiro, Brazil (18th IUSTI World Congress, 9-12 July 2017, to be held once more in partnership with the ISSTDR). This is the first time that IUSTI World Congresses will have taken place in all five IUSTI regions within a period of five consecutive years. I hope that you will attend and support as many of these congresses as you are able to. The organizers for each of these meetings are working hard to produce congresses that will showcase top quality scientific programmes.

At the IUSTI Executive Committee meeting, the Executive Committee received the World Health Organization's (WHO) report which outlined a number of its recent achievements. In terms of publications, the Baseline Report on Global STI Surveillance 2012 concluded that the overall global burden of STIs has remained persistently high and calls for enhanced surveillance activities as well as increased use of STI surveillance data to improve programme effectiveness. Global estimates for 2012 will be released in late 2014 for four curable STIs (chlamydial infection, gonorrhoea, trichomoniasis and syphilis), maternal syphilis and associated adverse outcomes, HSV-2 in adults and neonatal herpes. A technical consultation on point-of-care tests (POCT) for STIs was recently held in Annecy (6-8 May) and at which IUSTI was represented. The main achievement of this meeting was to agree on target product profiles for the POCT to detect five STIs (syphilis, chlamydial infection, gonorrhoea, trichomoniasis and human papillomavirus infections). The consultation was the first in a series of meetings to establish an international research platform to be led and co-ordinated by WHO. A WHO supplement on gonococcal antimicrobial resistance was published in *Sexually Transmitted Infections* in November 2013 and contained articles from various regions showcasing the work of WHO's Gonorrhoea Antimicrobial Surveillance Programme (GASP). Finally, WHO held a consultation on STI vaccines earlier this year and resulted in a special issue of *Vaccine* freely available at <http://www.sciencedirect.com/science/journal/0264410X/32/14>.

Plans for IUSTI going forward include the development of a 5 year strategic plan that will address important issues such as financial sustainability and fund-raising, membership growth, further development of IUSTI's link with/support for WHO, the development of new strategic alliances with other agencies and enhanced advocacy for improved sexual health within all our regions.

David Lewis
IUSTI President

Malaysian Airline Crash

With disbelief and great sadness we are trying to absorb the news of the horrific events that claimed the lives of all 298 passengers on board the Malaysian Airways flight from Amsterdam to Kuala Lumpur. Among them were many of our colleagues who were traveling to the International AIDS Conference in Melbourne, dealing a terrible blow to the international HIV/STI community. We extend our heartfelt condolences to the victims' family members, loved ones, friends and colleagues. As we grieve their loss, we will honor their legacy in pledging our unflagging commitment to continue their fight against AIDS and other sexually transmitted infections.

Kees Rietmeijer - ASTDA president

Membership of IUSTI

The International Union against Sexually Transmitted Infections (IUSTI) is the oldest international organisation in the field (founded in 1923). Its object is the achievement of international cooperation in the control of sexually transmitted diseases, including HIV infection.

IUSTI is concerned not only with the medical aspects but the social and epidemiological aspects of the control of sexually transmitted diseases and HIV/AIDS. It is a registered charity, without political, religious or social ties.

Membership is open to individuals who have a professional interest in the control of sexually transmitted diseases - a medical qualification is not required. Membership is also open to organisations such as national organisations for the study of sexually transmitted diseases.

Full members are entitled to all privileges of membership including voting rights and a reduction in registration fees at most IUSTI regional and world meetings. The membership fee has been set

so that it will be attractive to anyone who participates regularly in IUSTI events (20-50 euros per year depending on region). It is anticipated that any member who attends at least one IUSTI meeting every two years would at least recoup their membership dues via the associated discounted registration cost.

Full members also receive a substantial discount of 40% on a subscription to the Union's official journal, the International Journal of STD and AIDS.

For details of membership see:

<http://www.iusti.org/members/default.htm>

Nurse Education Survey

As part of a forthcoming presentation to be given in Malta @ IUSTI 2014, a short survey for nurses working in Europe has been compiled to scope out what education opportunities are available for nurses who might be working in contraception / sexual health / HIV / dermato-venereology / nurse education. Ideally nurses would complete the survey, however, if you as a medical colleague would like to participate that would be helpful as it will help inform this small piece of work.

The survey is not for staff working in the UK as we are aware of what education is provided for nurses to develop within our specialities. If you have already completed this, I thank you for your support.

The survey can be found at:

<https://www.surveymonkey.com/s/STInurseEurope2013>

The deadline for completion of the survey is August 26th 2014. Thank you for your help.

Colin Roberts

*British Association for Sexual Health and HIV
Nurse Representative*

Regional Reports

North America

The 2014 CDC/15th Global IUSTI STD Prevention Conference

"More STD Prevention for the Money: Maximizing Impact, Efficiency and Return on Program Investments" was held in Atlanta, GA, June 9-12, 2014.



This conference was also a regional meeting for Latin America IUSTI and also included the National Coalition of STD Directors (NCHD) the Pan American Health Organization and the Public Health Agency of Canada. It attracted more than 1400 attendees. It was a very successful, covering a wide variety of topics of interest for individuals working in STD prevention, behavioral research, and screening. There were 4 plenary sessions on program science, social and behavioral issues, changes in health systems and global challenges, an opening plenary covering progress and challenges in sexual health and a macro-picture closing plenary. A Global IUSTI Symposium was Global Challenges/ Advances in STD Prevention.



International delegates at the CDC/IUSTI conference

There were 4 mini-plenary sessions on such topics as big health data, HPV vaccination, scary cases of gonorrhea, health disparities in STD risk data. In addition to numerous oral sessions and symposia there were over 400 poster presentations. More than 500 presentations and posters were presented during the Conference with a wealth of social media and news media outlets discussing the Conference. Several studies were presented on the heavy burden of STDs among youth in the United States, as well as a study on the positive impact of updated guidelines for treating gonorrhea to slow widespread resistance. For those who were not able to attend the Conference, recordings are now available on the Conference website. <http://www.cdc.gov/stdconference/default.htm> Of particular interest to public health officials, STI researchers, and primary care clinicians, several interesting and important topics are summarized below.

1. There is growing interest in the efficacy of azithromycin for the treatment of chlamydia. Wlicox and colleagues reported that 9% of 323 men infected with chlamydia and enrolled

in a multi-center study were not effectively treated with 1 gram of azithromycin. The authors assessed treatment failure using nucleic acid amplification tests 3 weeks after therapy. There appeared to be different rates of treatment failures by geographic location and it would be tempting to speculate that strain diversity may be related treatment outcome. However, there is no evidence suggesting that chlamydia develops resistance to azithromycin and there are no standardized in vitro tests to detect resistance. More research is clearly indicated regarding treatment options for chlamydia.

2. Another interesting presentation that supported the professional recommendations for not screening women >25 years for chlamydia if they are asymptomatic was the oral by Barbee et al. entitled CT positivity and cost per case detected in women > 25 years of age in an STD clinic. From 8,261 asymptomatic women <25 yr seeking care, 5,320 were screened for CT and only 1.95% had a positive CT test, yielding a laboratory cost per patient detected of \$1,254.73 with an overall cost for inappropriate screening of \$140,530 over 10 years. This was an eye opener for cost-conscious health care systems, which especially supports the CDC's and other professional organizations recommendations to not screen asymptomatic women >25 years for CT.
3. Though retesting for chlamydial infections is strongly encouraged given the high rates of reinfection, most programs report a less than 50% patient return rate. Investigators in California coupled patient counseling on the importance of retesting with various methods of patient reminders including postcards, text messages, and emails to increase patient return. In addition, patients were offered the option of home collection of specimens rather than a return to the clinic. There was a significant increase from 54% to 59% in retesting rates following patient education/reminders and up 62% when combined with the option of home collection. These inexpensive interventions were easily implemented and were shown to have a remarkable impact on California's chlamydia retest program.

News From the CDC.

New guidelines for laboratory testing for chlamydia and gonorrhea:

U.S. Centers for Disease Control and Prevention (CDC) released [Recommendations for the Laboratory-Based Detection of Chlamydia trachomatis and Neisseria gonorrhoeae — 2014](#) in its *Morbidity and Mortality Weekly Report* (MMWR). This report updates CDC's 2002 recommendations for screening tests to detect

Chlamydia trachomatis and *Neisseria gonorrhoeae* infections, and provides new recommendations regarding optimal specimen types, the use of tests to detect rectal and oropharyngeal *C. trachomatis* and *N. gonorrhoeae* infections, and circumstances when supplemental testing is indicated.

National HIV Testing Day (observed June 27), CDC is highlighting the importance of early detection of HIV by issuing new recommendations on the approach U.S. laboratories should use for HIV testing. Capitalizing on the latest available testing technologies, this new approach can diagnose HIV infection several weeks earlier than previous practice. Early diagnosis is important because people in the earliest ("acute") stage of infection have high levels of virus in their bodies and are most likely to transmit HIV. By putting the latest testing technology to work, CDC's new recommendations help address a critical gap in the nation's HIV prevention efforts.

News from the American Sexual Health Association (ASHA)



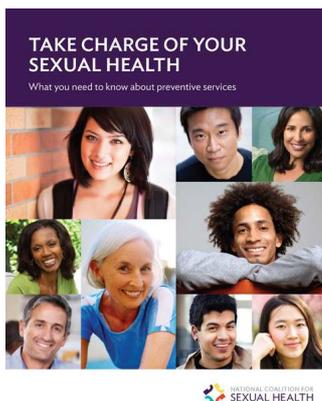
ASHA continued the celebration of our centennial year in 2014 with a birthday bash in June at the STD Prevention Conference. During the opening plenary on June 9th we held the premiere of our documentary *What Does a Sexually Healthy Nation Look Like?* The party was held later that evening during the welcome reception and featured milestones from ASHA's 100 year history, including historical items loaned from the ASHA archives housed at the University of Minnesota.

A key aspect of our centennial activities is the recognition that while tremendous headway has been made in developing a culture of sexual health and sexual rights – the burgeoning (but still inadequate) recognition of LGBTQ rights is one example- there remains much work to be done. In *The More Things Change...* department, consider this: in 1934 CBS cancelled a radio address by Thomas Parran, then New York Commissioner of Health, because he planned to mention the word syphilis. Fast-forward to 2014 and you'll find news stories about a number of media/social media outlets (including Twitter) that are often reluctant to run ads for condoms. ASHA ran into something similar earlier this year when Facebook refused to allow us to promote a blog entry written by an expert on the topic of vaginismus.

The 21st century brims with as much challenge and opportunity in our field as did the 20th. As part of our centennial celebration, ASHA is asking our friends and colleagues to please join us and sign our sexual health pledge. The pledge affirms our

belief that all people have the right to the information and services that will help them to be sexual healthy. We imagine a time when stigma is no longer associated with sexual health and our nation is united in its belief that sexuality is a normal, healthy, and positive part of human life. You can view and sign the pledge on our centennial microsite at <http://www.asha100.org/take-the-pledge/>.

News from the National Chlamydia Coalition (NCC)



The National Coalition for Sexual Health (NCSH) has released a new, easy-to-use guide and website, *Take Charge of Your Sexual Health: What you need to know about preventive services*. This guide informs men and women of all ages about recommended preventive services, such as screening, vaccines, and counselling, to help protect and improve sexual health. The guide, which was audience-tested with members of the public, includes action steps for achieving good sexual health, information about recommended sexual health services, tips on how to find and talk with a health care provider, and a list of additional sexual health resources.

Take Charge of your Sexual Health can be easily accessed online and is available for download and print in full PDF format or in short chapters. It is smartphone compatible so patients may access the full guide, including questions to ask your provider and charts of recommended services, while on the go or at the doctor's office.

News from the American Sexually Transmitted Diseases Association (ASTDA) (www.astda.org) [Our North American IUSTI]

The ASTDA membership has elected Kees Rietmeijer, M.D., Ph.D., M.S.P.H., to succeed Dr. Bradley Stoner as President. Dr. Rietmeijer officially assumed his new position in June during the STD Prevention Conference in Atlanta, GA. His duties as President include oversight of the field's flagship scientific journal *Sexually Transmitted Diseases*, co-sponsorship of national and international scientific conferences, and the

granting of developmental and recognition awards for new and experienced investigators in the field of sexually transmitted infections.



The ASTDA is very pleased to announce the winners of the 2014 ASTDA Recognition Awards: The Distinguished Career Award: Dr. Franklyn N. Judson. This award is presented annually to a member for long and distinguished contributions in the field of STD research and prevention.

The Achievement Award: Dr. Christina M. Marra. This annual award is presented for a single recent major achievement in the field of STD research and prevention.

Young Investigator Award: Dr. Christina A. Muzny. This award is given each year to an outstanding investigator in the field of STD who is no more than five years beyond fellowship training.

Each spring ASTDA also offers a mentored Developmental Award to encourage new investigators to pursue an STD research career. The award is open to PhD or MD investigators in the U.S. who recently earned faculty rank and who have not served as PI on STD-related research supported an NIH (or other) grant.

The winner of the award for 2014 is Brandie Taylor, PhD., M.P.H., an Assistant Professor of Epidemiology and Biostatistics with the School of Public Health, Texas A&M University Health Science Center. Dr. Taylor's Developmental Award will support the work outlined in her proposal *Host Genetic Susceptibility to Chlamydia-Associated Reproductive Morbidity*.

STD Prevention Science Series

ASTDA has partnered with the Centers for Disease Control and Prevention Division of STD Prevention (DSTDP) to bring you the latest research and best practices for STD prevention with the STD Prevention Science Series. This quarterly series presents lectures on cutting edge issues by scientists and program experts of world renown to all persons interested in the prevention of STI including HIV. Topics covered include HIV transmission dynamic, the microbiome of the adolescent penis, and the evolving role of public health outreach to control HIV/STDs. These and other archived presentations in the series are available at <http://www.astda.org/std-prevention-science-series/>.

www.cdc.gov/stdconference

Charlotte Gaydos

Europe

IUSTI Europe annual congresses in the following next three years

1. The Congress of IUSTI-Europe in Malta will be held 17-20 September, 2014. The President of the Congress will be Dr Joe Pace, the Chair of the Scientific Board – Dr Jackie Sherrard.
2. The Congress of IUSTI-Europe will be held in Barcelona, 24-26 September, 2015. The President of the Congress will be Dr Marti Vall Mayans, the Chair of the Scientific Board - Dr Keith Radcliffe.
3. The Congress of IUSTI-Europe will be held in Budapest, September, 2016 (the exact dates TBA). The President of the Congress will be Dr Viktoria Varkonyi.

European STI Guidelines Project

Work on the guidelines continues steadily and was discussed at a teleconference of Editorial Board members held on 15 July.

A number of guidelines have recently been completed and posted on the website:

1. Balanoposthitis (2013 European guideline for the management of balanoposthitis. SK Edwards, CB Bunker, F Ziller, Willem van der Meijden. *Int J STD AIDS* 2014; 25(9): 615-626.)
2. Sexually acquired reactive arthritis (accepted for publication in *IJSA*).
3. Lymphogranuloma venereum (2013 European guideline on the management of lymphogranuloma venereum. De Vries HJ, Zingoni A, Kreuter A, Moi H, White JA. *J Eur Acad Dermatol Venereol.* 2014 Mar 24. doi: 10.1111/jdv.12461. Epub ahead of print).

Work continues on the following guidelines:

1. A new guideline on partner management – this is at the stage of final drafting and should shortly be available on the website
2. Epididymo-orchitis
3. Non-gonococcal urethritis
4. Genital herpes
5. Chlamydia

A new guideline is also being produced on genital mycoplasmas. The lead author is Jorgen Skov Jensen from Copenhagen with Harald Moi from Oslo as editor. A very interesting debate on this subject was held at the recent meeting of IUSTI-Estonia, organised by Airi Poder, in which Keith Radcliffe, Mikhail Gomberg and Harald Moi participated. This is a controversial area and hence a guideline is expected to be very useful.

Congratulations are due to Prof A.B Serwin who has recently completed a Polish translation of the European guideline on gonorrhoea for the Polish Association of Dermatologists. This has been published in *Dermatological Review* and a link to

this guideline will shortly be available from the European guidelines web page. She has also produced Polish translations of the patient information on chlamydia, gonorrhoea and syphilis, and these will also soon be on the website.

A meeting of the editorial board will take place in Malta on 18 September during the 2014 IUSTI Europe Congress.

Any comments about the guidelines or patient information would be welcome; please email Keith Radcliffe at k.radcliffe@virgin.net.

Eastern European Network for Sexual and Reproductive Health

The main activities of the network during this period were devoted to enhance of the quality of the laboratory diagnosis of the STIs in the EE SRHR project area countries. Laboratory quality control management (LQCM) issues were discussed and data from the participating laboratories from Belarus, Estonia, Georgia, Latvia, Lithuania, Russia, and Ukraine were analyzed during the meetings held on 7-8 of March (Uppsala, Sweden), 8-11 of May (Riga, Latvia). At the meetings arranged on 30th of May (Nelijärve, Estonia) and 31st of May (Riga, Latvia) the EE SRHR Guidelines for the Laboratory Diagnosis of STIs and further LQCM data according to the standard ISO 15189, were presented and analyzed by the LQCM coordination group, namely Kai Joers (Tartu University Hospital, Tartu, Estonia); Iryna Boiko (Ternopil Dermatovenereologic Dispensary, Ternopil, Ukraine); Prof Alevtina Savitcheva and Elena Rybina (DI Ott Research Institute of Obstetrics and Gynecology, St Petersburg, Russia); and Assoc Prof Marius Domeika (Department of Communicable Disease Control and Prevention, Uppsala County Council, Uppsala, Sweden).

Standardization of genital tract microscopy have been one of the top priorities of the EE SRHR Network for several years. During the last year three courses were organized by Kai Joers and Marius Domeika.

The 1st microscopy course “Microscopy and women” took place on the 28th of March in Tallinn. A lecture about using microscopy for diagnosing lower genital tract infections was presented by microbiologist Tatjana Brilene (Tartu University, Estonia). But the most interesting and inspiring lecture was delivered by Prof Gilbert Donders (Antwerp, Belgium). The lecture was followed by the course “Lower Genital Tract Infections, Diagnosis and management, including real time microscopy” which was held by G Donders.



Microscopy course in Tallinn (Estonia)
March, 28

The 2nd microscopy course “Microscopy and men” took place on the 30th of May in Nelijärve, Estonia which was organized close to the XVI Conference of Estonian Union of Sexually Transmitted Infections. The course was given by venereologist Harald Moi (Oslo, Norway) and was mainly devoted to the microscopy of the male genital tract. During the course Estonian microbiologist Tatjana Brilene spoke about microscopy in daily practice.



Microscopy course in Nelijärve (Estonia)
May, 30

The 3rd course was organized and held during the 12th Congress of the Baltic Association of Dermatovenereology (BADV) in Riga, Latvia. Harald Moi discussed use of the microscope for diagnosis of genital tract conditions in both males and females.

Gilbert Donders and Harald Moi use the microscope in their daily clinical practice and are strong believers and enthusiasts in bedside microscopy as an important tool in the management of the genital tract infections and other conditions. During the courses, project manager Marius Domeika (Uppsala, Sweden) also stressed that microscopy, if performed in the laboratory, has to be standardized and give an answer, understandable to the physician.



Microscopy course in Riga (Latvia) - May, 31

One another very important mission of the EE SRHR is advocating and implementing the IUSTI clinical STI management guidelines into the clinical practice in Network Countries. Therefore, during the Congress of Baltic Association of Dermatovenereology symposium on STI management was arranged. Prominent IUSTI members, namely Keith Radcliffe, Raj Patel, Harald Moi, Mikhail Gomberg gave overviews of the European approaches of the STI management, developed by the IUSTI Guideline Group.

Other IUSTI related STI activities in Europe

12th Congress of the Baltic Association of Dermatovenereology

The 12th Congress of BADV (annual meetings taking place in one of the Baltic Republics) was hosted by Riiia University Department of Dermatovenereology (Chair, Prof Andris Rubins), in Latvia in May 30-31, 2014.

IUSTI - Russia

There were several events organized by IUSTI-Russia in 2014. In February 2014 at the gynecological conference devoted to diseases of the cervix IUSTI-Russia organized the session where Peter Greenhouse gave a talk on cervical screening. The main event of the year was an annual meeting of IUSTI-Russia in March 2014. The group of well-known specialists from Europe were invited to speak at this conference: Angelika Stray, Airi Poder, Mihael Skerlev, Gilbert Donders and Magnus Unemo. During winter-spring 2014 Mikhail Gomberg - President of IUSTI-Russia organized a school named “Viral STI” in different Russian cities throughout the country. There were 9 cities covered by this program from St.Petersburg in the West of the country to Vladivostok on the Far East.

EADV Spring Meeting in Belgrade

In the 12th EADV Spring meeting which took place in Belgrade in May, 22 -24. In contrast to many previous EADV conferences, a big focus was given to STIs with 9 symposium/ workshops and half of IUSTI Europe Council members giving a presentation.

IUSTI - Estonia

In May 30 -31 the 16th Conference of IUSTI Estonia took place in Aegviidu. The main topics of the conference were HIV & other STIs (invited speaker Keith Radcliffe), BV as a sexually transmitted infection (invited speaker Janet Wilson), complications of STIs including infertility and pregnancy (invited speakers Raj Patel and Mikhail Gomberg) and urogenital mycoplasmas (invited speaker Harald Moi).

Ukraine

1. Compiled adopted and published national guidelines "Diagnostics and treatment of sexually transmitted infections, in populations vulnerable to infection by HIV"
2. Compiled and adopted national guidelines "New Approaches To Laboratory Diagnosis Of Syphilis"
3. Organized seminars and delivered lectures on European STI guidelines implementation in Ukraine:
 - Problems of genital herpes – control of relapses, Kharkov, 11/06/2013
 - Problems of vulvovaginitis – not only vaginal discharge, Kharkov, Donetsk, Lugansk, Zaporozhe, Dnepropetrovsk, March-April 2014

Bulgaria

1. Conference of the Regional Branch Plovdiv, Juni 2013
2. Conference of the Regional Branch Stara Sagora, September 2013
3. Dermatological Days 2013, Sofia November 2013
4. Conference of the Regional Branch Varna, April 2014
5. Summer Academy Sofia, Juni 2014
6. Conference of the Regional Branch Plovdiv, Juni 2014

Airi Pöder

Latin America

Participation of professionals from Latin America in IUSTI Congress 2014

During IUSTI Congress held in Atlanta, Georgia, from 8 to 12 June 2014, the "Satellite Symposium: STI Prevention and Control in Latin American and the Caribbean" took place. The organizers were: The Latin American Association against STI (ALACITS) IUSTI-LA / PAHO / CDC / and the Brazilian Ministry of Health.



Members from ALACITS participating at the Latin American Symposium

The symposium was divided in four sections:

(1) Elimination of mother-to-child transmission of HIV and congenital syphilis in the Americas: where PAHO presented the status of the validation of MTCT elimination in the Americas and experience of the use of dual tests in Peru and the progress in the implementation of elimination of congenital syphilis in Panama

(2) Laboratory update: Quality control and quality assurance of syphilis testing: where a representative from CDC presented Proficiency testing for National Programs, Dr. Perez from PAHO presented the report from a recent regional meeting on Syphilis testing algorithms, Brazil presented a country case study of the acceptability of HIV home-based testing and Peru presented the experience of the use of dried tube specimens for QA of dual rapid and HIV testing.

(3) A session for Oral presentations from Latin America:

- Place Matters: Sexual Practices, HIV Testing and HIV Status Among Transwomen Sex Workers in Peru. Clients of Male and Trans women Sex Workers in Peru: Sexual Partners and Practices and HIV Testing and Status
- Sex Work Characteristics Associated with Forced Sex in Three Cities in Honduras, 2013.
- Congenital syphilis in a reference hospital in Bolivia.

(4) STI surveillance Improving Efforts: in which PAHO presented the regional challenges and opportunities of STI surveillance in Latin America and the Caribbean, the WHO estimation tool for national and subnational estimates of syphilis in pregnancy was discussed and finally Argentina shared the experienced of their Antimicrobial Surveillance Program

A very active discussion occurred during the symposium. The main conclusions were: a) There is a need to intensify the activities towards the elimination of congenital syphilis and prevention of vertical transmission of HIV in the region: dual rapid tests for syphilis and HIV have an important role to increase coverage of screening. b) Quality control of tests is also important and countries with more experience in the subject could help other countries that need advice and technical assistance for the implementation of quality assurance systems and c) There is a need to strength surveillance activities of STIs in the region.

Fredy Tinajeros & Patty Garcia

Asia Pacific

The next IUSTI-AP congress is scheduled to be held in Bangkok, Thailand from 11 to 14 November 2014. Thailand has already organized one

Regional and one World meeting in past 10 years. From the past experience, I can assure you that this will be a memorable event with Scientific and Organizational success. Preceding this meeting, Dr. Sunil Sethi, the secretary general of IUSTI-AP, is organizing an Indian national meeting from 31st October to 2nd November 2014.



Antimicrobial resistance in Neisseria gonorrhoeae in South-East Asia Region

Antimicrobial resistance (AMR) in *Neisseria gonorrhoeae* is a serious threat to public health. Systematic AMR surveillance of *N. gonorrhoeae* at the local, regional, national and global levels helps to detect the emergence of new resistance, monitor changing patterns of susceptibility and be able to update treatment recommendations on a regular basis. The World Health Organization (WHO), therefore, established the Gonococcal Antimicrobial Surveillance Program (GASP) in 1990. WHO GASP was established in the South-East Asia Region (SEAR) in 1997 with Regional Reference Laboratory (RRL) at Safdarjung Hospital, New Delhi, India.

The first study for surveillance of AMR trends in selected SEAR countries was carried out between 1996 and 2000. Thereafter, there were various AMR surveillance reports from WHO GASP in SEAR countries. Out of the 11 WHO SEAR member states (Bangladesh, Bhutan, DPR Korea, Indonesia, India, Maldives, Myanmar, Nepal, Sri Lanka, Thailand and Timor-Leste), 6 countries (Bhutan, Indonesia, India, Myanmar, Sri Lanka and Thailand) at present are participating in the GASP. Bangladesh and Nepal participated initially and discontinued later.

The latest report provides an insight into the AMR data from 18 focal point laboratories from six countries during the period 2009 to 2012. High-level resistance to traditional antibiotics, penicillin (25-100%), tetracycline (10-100%) and ciprofloxacin (38-100%) was observed in all the six countries. Overall, >90% of less susceptible and resistant isolates to penicillin and ciprofloxacin were identified from 15 laboratories. The high percentages of resistance reported towards penicillin, tetracycline and ciprofloxacin.

Decreased susceptibility to ceftriaxone and cefpodoxime (0.1%-84.2%) was reported from nine centers. The emergence of decreased susceptibility to ceftriaxone threatens the future utility of this class of antimicrobials for gonorrhea therapy in SEAR countries. Cefuroxime axetil 1 gram is used for the management of gonococcal

infections in Sri Lanka. Emergence of cefuroxime resistance in Sri Lanka to the level of 12.5% in 2012 indicates that this antimicrobial should be removed from treatment guidelines of gonorrhoea. Azithromycin resistance (0.3-3.8%) was reported only from three centres. Spectinomycin resistance, although less than 5%, was demonstrated from two laboratories in Bhutan. Emergence of resistance to alternative treatment options, spectinomycin and azithromycin in SEAR countries is a cause of concern.

Mycoplasma genitalium infections in south east Asia

The WHO estimates of sexually transmitted infections acquired worldwide account for 448 million new cases annually. *Mycoplasma genitalium*, is an emerging sexually transmitted pathogen. Investigations estimating geographic prevalence of *M. genitalium* document generally low incidence, but some communities exhibit infection frequencies comparable to that of *Chlamydia trachomatis*. Studies from Southeast Asian countries reported varying prevalence profile based on the population assessed with a study from Indonesia reporting 12.5% in female sex workers to as low as 0.8% among married women of reproductive age in a rural area in Vietnam. (1. Mawu, et al. *Sex Health* 2011; 8: 52-60. 2. Olsen, et al. *J Eur Acad Dermatol Venereol* 2009; 23: 533-7). Accumulating evidence suggests its definitive etiological role in acute and persistent non-gonococcal urethritis in men and is responsible for approximately 20-35 per cent of non-chlamydial NGU cases. Collective data show the detection of *M. genitalium* in 14.1 to 33.3% of men with acute NGU recruited at STD clinics and in 13.2 to 15.6 % of those at urology clinics. An earlier study from our centre showed that *M. genitalium* was detected in 6% (6/100) of NGU cases. The infection rate was 7.1 per cent (5 of 70) among the HIV positive individuals whereas only one HIV negative NGU case was found to be positive (3.3%). Its association with inflammatory reproductive tract syndromes in women such as cervicitis, pelvic inflammatory disease, and infertility, although reported is yet to be established beyond conflict. Further research is required to understand the dynamics of HIV and *M. genitalium* co-infections. Standard diagnostic assays for detection of *M. genitalium*, although still in pipeline, several nucleic acid amplification assays have documented >95% sensitivities and specificities for this pathogen. Until date there is no definitive screening protocol for *M. genitalium* in sexual health strategy. Also, published guidelines or recommendations for treating *M. genitalium* positive urethritis are still lacking. Azithromycin is supported by all present evidences as first drug of choice for treatment of *M. genitalium* infections. Resistance to macrolides and fluoroquinolones appears to be increasing, and the trend is especially remarkable in Japan

(Kikuchi, et al. J Antimicrob Chemother. 2014; Jun 2, epub). The contrasting nature of the existing literature regarding multiple dimensions of this emergent pathogen requires further establishing studies.

Somesh Gupta, Manju Bala & Sunil Sethi

Conference Update

IUSTI Events:

IUSTI Europe Conference, 2014

Dates: September 18-20, 2014

Location: Malta

Website: <http://www.iustimalta2014.org/>

38th National Conference of Indian Association for the Study of STD & AIDS

Dates: October 31-November 2, 2014

Location: Chandigarh, India

Website: <http://asticon2014.com/>

IUSTI-AP congress 2014

Dates: November 11-14, 2014.

Location: Bangkok, Thailand

Website: <http://iusti2014bangkok.com/cms/>

World STI & HIV Congress 2015

Dates: September 13-16, 2015

Location: Brisbane, Australia

Website: <http://www.isstdr.org/future-meetings.php>

IUSTI Europe 2015

Dates: September 22-24, 2015

Location: Barcelona

Website: <http://www.iusti.org/events/default.htm>

2016 World IUSTI Congress

Dates: To be announced

Location: Morocco

Website: <http://www.iusti.org/events/default.htm>

IUSTI Europe 2016

Dates: September 15-17, 2016

Location: Budapest, Hungary

Website: <http://www.iusti.org/events/default.htm>

World STI & HIV Congress 2017

Location: Rio de Janeiro, Brasil

Dates: TBA

Website: <http://www.isstdr.org/future-meetings.php>

Other STI or Related Meetings/Congresses/Courses:

The 29th International Papillomavirus Conference

Dates: August 20-25, 2014.

Location: Seattle, Washington

Website: <http://www.hpv2014.org/>

Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC 2014)

Dates: September 5 – 9, 2014

Location: Washington, USA

Website: www.icaac.org/

16th Annual International Meeting of the Institute of Human Virology

Dates: September 14 – 17, 2014

Location: Baltimore, USA

Website:

medschool.umaryland.edu/ihvmeeting/default.html

21st World Congress of World Association of Sexual Health

Dates: September 21-24, 2014

Location: Porto Alegre, Brazil

Website:

<http://www.2013was.com/ingles/index.php>

2nd Southern African HIV Clinicians Society Biennial Conference (SAHIVSOC)

Dates: September 24-27, 2014

Location: Cape Town, South Africa

Website: <http://sahivsoc2014.co.za/>

3rd Eastern Asia Dermatology Congress

Dates: September 24-26, 2014

Location: Jeju, Korea

Website: www.eadc2014.org/

The 10th Annual National Conference on HIV/AIDS & Aging

Date: September 26, 2014

Location: Boston, USA

Website:

http://neaetc.org/images/Flyers/PY_27/NEAHOF%20Brochure%209-26-14.pdf

U.S. Conference on AIDS

Dates: October 2-5, 2014

Location: San Diego, USA

Website: <http://nmac.org/2014-u-s-conference-on-aids/>

23rd EADV Congress

Dates: October 8-12, 2014

Location: Amsterdam, The Netherlands

Website: <http://www.eadv.org/nc/news/article/23rd-eadv-congress//6/bf6f4b66d75f39375ffaa2e9e4d6384d/>

2014 Australasian Sexual Health Conference

Dates: October 9-11, 2014

Location: Sydney, Australia

Website:

<http://www.sexualhealthconference.com.au/>

International Pathogenic Neisseria Conferences

Dates: October 12 - 17, 2014
Location: Asheville, North Carolina, USA
Website: <http://neisseria.org/ipnc/>

4th BASHH Genital Dermatology Course

Date: October 24, 2014
Location: London, UK
Website:
http://www.bashh.org/BASHH/Education/BASHH_Training_Courses_and_Meetings/BASHH/Education/BASHH_Training_Courses_and_Meetings/Meetings/4th_BASHH_Genital_Dermatology_Course.aspx

9th International Workshop on HIV Transmission – Principles of Intervention

Dates: October 25 – 26, 2014
Location: Cape Town, South Africa
Website: <http://www.virology-education.com/event/upcoming/9th-hiv-transmission-workshop-2014/>

HIV R4P

Dates: October 28- 31, 2014
Location: Cape Town, South Africa
Website: <http://hivr4p.org/>

HIV Glasgow Drug Therapy

Dates: November 2-6, 2014
Location: Glasgow, United Kingdom
Website: <http://hivglasgow.com/>

EUROGIN 2015 Congress

Dates: February 4-7, 2015
Location: Seville, Spain
Website: <http://www.eurogin.com/2015/>

International Society for the Study of Women's Sexual Health 2015 annual Meeting

Dates: February 19-22, 2015
Location: Austin, TX - USA
Website:
<http://www.isswsh.org/pdf/2014Meeting.pdf>

XII International Workshop of Lower Genital Tract Pathology

Dates: March 5-7, 2015
Location: Rome, Italy
Website: www.hpv2015rome.com

23rd World Congress of Dermatology

Dates: June 8-13, 2015
Location: Vancouver, Canada
Website: <http://derm2015.org/>
<http://www.congresmtl.com/en/index.aspx?lg=en>

Somesh Gupta

STI Global Update is published by the International Union against Sexually Transmitted Infections. Its aims are to provide an international perspective on the management and control of sexually acquired infections. Regular contributions from the regional directors of IUSTI and feedback from conferences is supplemented by short reviews of relevant topics and input from the Center for Disease Control (US), Health Protection Agency (UK), European Centre for Disease Prevention and Control, and the World Health Organisation.

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Further information on the activities of IUSTI available at
www.iusti.org