

Lymphogranuloma Venereum Outbreak among MSM in Madrid

Puerta T¹, Rodríguez MJ², Menéndez B¹, Rodríguez C¹, Ballesteros J¹, Clavo P¹, Vera M¹, Galán J.C², Del Romero J¹.

(1).- Centro Sanitario Sandoval.- Comunidad de Madrid.

(2) Servicio de Microbiología del Hospital Ramón y Cajal de Madrid.

Objective

Quantify rates and describe epidemiological characteristics of patients infected with *Chlamydia trachomatis* (CT) lymphogranuloma venereum (LGV) associated serovars, in people with high-risk sexual practices, by directed or systematic search, of this pathogen, in people attended at a Sexually Transmitted Diseases (STDs) Clinic, in Madrid.

Methods

✓ Between June 2009 and August 2010, 1025 rectal swabs were processed for diagnosis of CT infection; commercial real-time PCR based methods were used.

✓ To specifically detect L1, L2 and L3 serovars, and in-house real-time PCR was used. Nested-PCR and sequencing of *ompA* gene was performed for confirmation of previous results.

✓ Epidemiological characteristics were collected from a structured questionnaire.

Results

Of the 1025 samples tested, 156 (15%) were positive for CT, 34 (3% overall and 21.8% of positive samples) yielded a positive result for LGV.

Characteristics of patients with LGV (I)

- ❑ Average age 34 years
- ❑ 100% MSM
- ❑ 91% HIV-infected
- ❑ 89% had a history of STIs:
 - 50% syphilis
 - 41% Gonococcal urethritis
 - 35% HPV
- ❑ 73.6% had an STI Concomitant:
 - 38% syphilis
 - 23.5% Gonococcal proctitis

Characteristics of patients with LGV (II)

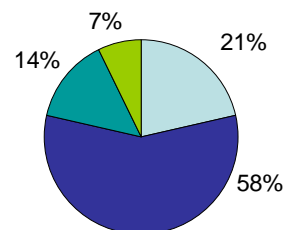
- ❑ Mean CD4 = 662 cells / ul (294-1073)
- ❑ Mean viral load = 55,986 cop / ml (<50 -443,239)
- ❑ HCV positive 5 / 27 patients (18.5%)
- ❑ 15 HBV hepatitis last, 2 acute, 9 vaccinated, 3 susceptible
- ❑ 16 HVA last, 5 susceptible, 6 vaccinated

Sexual behavior in patients with LGV



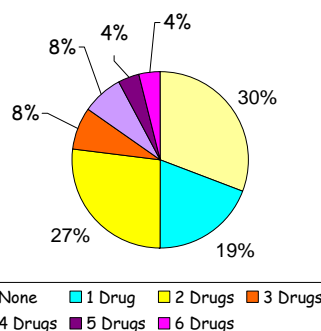
- ✓ All of them had practiced unprotected anal intercourse and 3% fisting.
- ✓ Media partners in the last year was 80.
- ✓ 53% had unprotected sex under the influence of alcohol and non-injected drugs.
- ✓ Four patients (11.8%) were sex workers
- ✓ None declared to be customer of prostitution.

Stage of syphilis in patients diagnosed with concomitant LGV



Legend: Primary (light blue), Secondary (dark blue), Early latent (teal), Latent unknown duration (light green)

Drug use in patients with LGV



None	8
Alcohol	10
Alcohol+other drugs	6
1 drug	Cannabis, poppers
2 drugs	Cannabis, poppers
3 drugs	Cocaine, poppers, GHB
4 drugs	Alcohol, cocaine, poppers, cannabis
4 drugs	Alcohol, cocaine, crystall meth, MDMA.
6 drugs	Ketamine, cocaine, speed, GHB, Sildenafil, crystall meth.

Conclusions

- ❑ Although LGV infection has been previously considered an infection from endemic areas, this work demonstrates that like in other Western countries, the L2b serovar of CT is present in population at risk in Madrid.
- ❑ Main group affected are homo / bisexual men with HIV infection. Systematic studies are needed to specifically detect LGV-associated serovars in patients with *Chlamydia trachomatis* infection.
- ❑ It is advisable to perform HIV serology and screening for other STIs in patients diagnosed with LGV.