



Protecting, maintaining and improving the health of all Minnesotans

June 4, 2008

Dear Colleague:

We would like to advise you of two recent developments regarding the treatment of gonococcal infections.

First, fluoroquinolones (i.e., ciprofloxacin, ofloxacin, or levofloxacin) are no longer recommended to treat gonorrhea in Minnesota. Increasing prevalence of fluoroquinolone resistance in *Neisseria gonorrhoeae* (QRNG) has been documented by the Centers for Disease Control and Prevention (CDC). In April 2007, the CDC removed fluoroquinolones from their list of recommended gonorrhea therapies for all patients because national surveillance data showed that QRNG among heterosexual males had risen to 6.7%, exceeding the five percent threshold used by CDC and the World Health Organization. At that time, QRNG prevalence among heterosexuals in Minnesota was low (0.8%), leading the Minnesota Department of Health (MDH) to recommend the continued cautious use of fluoroquinolones for the treatment of gonorrhea in heterosexuals. By December 2007, however, QRNG prevalence in this population rose to 4.5%. As a result, the MDH has updated its recommendations to be consistent with the CDC: fluoroquinolones should not be used for the treatment of any gonococcal infections. QRNG prevalence remains especially high (28% in 2007) in men who have sex with men.

The loss of fluoroquinolones as a gonorrhea treatment option is tempered by the recent announcement that **cefixime (Suprax®) 400 milligram tablets are once again available for distribution in the United States.** Cefixime 400 mg tablets are the only drug recommended by CDC that may be given in a single, oral dose to treat uncomplicated urogenital and rectal infections. Pharyngeal gonococcal infections should be treated with a 125 mg injection of ceftriaxone (Rocephin®). For more information on how to obtain cefixime, contact Lupin Pharmaceuticals at (866) 587-4617.

The MDH will continue to closely monitor antimicrobial susceptibilities of *N. gonorrhoeae* to agents used to treat gonorrhea, especially cefixime and ceftriaxone. If you have a suspected cephalosporin treatment failure, or any additional questions, please call the MDH STD and HIV Section at (651) 201-5414 for consultation.

Sincerely,

A handwritten signature in black ink that reads "Ruth Lynfield". The signature is fluid and cursive, with the first name being the most prominent.

Ruth Lynfield, MD
State Epidemiologist and Medical Director
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St. Paul, MN 55164-0975

A handwritten signature in black ink that reads "Peter Carr". The signature is cursive and somewhat stylized, with the last name being the most prominent.

Peter Carr, MPH, Section Manager
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