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Dear Client,

Re: **Increase in Ciprofloxacin/Ofloxacin Resistant *Neisseria gonorrhoea* ("gonorrhoea") in Ontario**

A recent study at the Ontario Public Health Laboratories of *Neisseria gonorrhoeae* case isolates from Ontario identified a significant increase in quinolone resistance (ciprofloxacin/ofloxacin). As a result, it is recommended that quinolones be reserved for use where the antimicrobial susceptibility of the patient's isolate is known. Quinolones should be avoided whenever possible in the empiric therapy of infection with *Neisseria gonorrhoeae* infections, particularly in male patients. In the absence of contraindications, cefixime and ceftriaxone remain highly effective antimicrobial agents for the treatment of gonorrhoea and related infections in Ontario.

Please refer to the Canadian Guidelines on Sexually Transmitted Infections, 2006 edition (January 2008 update) available online at http://www.phac-aspc.gc.ca/std-mts/sti_2006/sti_intro2006_e.html for current therapeutic recommendations.

The retrospective cohort study investigated the antibiotic susceptibility patterns and risk factors for *N. gonorrhoeae* using laboratory data from Ontario case isolates.

The following important information has been determined from the study:

- The general incidence of *Neisseria gonorrhoeae* infections has increased by 17% from 2002 to 2006.
- Quinolone resistance in *Neisseria gonorrhoeae* in Ontario has increased from 4.0% in 2002 to 27.8% in 2006.
- Males were more likely to be at risk for quinolone resistant *Neisseria gonorrhoeae*.

To date, no resistance to cefixime, ceftriaxone and spectinomycin has been detected

Sincerely,

Original document signed by Dr. Frances Jamieson.

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Cc: Dr. D. Low
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