

## Antimicrobial resistance among Neisseria gonorrhoeae

## **October-December 2006**

This surveillance of antimicrobial resistance among *Neisseria gonorrhoeae* is based on antimicrobial susceptibility test results collected quarterly from the laboratories that do the majority of the local sexual health clinic and general practice gonococcal diagnostic work. All the participating laboratories use CLSI susceptibility test methods.

This report covers the 3 months of 1 October to 31 December 2006 and the previous 12 months of 1 January to 31 December 2006. The rates of ciprofloxacin, penicillin and tetracycline resistance are shown by district health board in the table on the next page. All isolates tested were susceptible to ceftriaxone.

During the 12 months, 1 January to 31 December 2006, ciprofloxacin resistance was more prevalent than penicillin resistance among gonococci in most parts of the country, with national rates of 12.9% and 6.3%, respectively. As has been previously noted, both ciprofloxacin and penicillin resistance rates are quite variable throughout the country. Ciprofloxacin resistance was  $\geq 5\%$  in 10 of the 14 district health board areas for which data was available for the last 12 months, with rates  $\geq 10\%$  in 7 board areas. In contrast, penicillin resistance was < 5% in 10 of the 14 district health boards areas.

Helen Heffernan Antibiotic Reference Laboratory

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District Health Board <sup>1,2</sup>	Ciprofloxacin				Penicillin				Tetracycline			
	Oct - Dec 06		Jan - Dec 06		Oct - Dec 06		Jan - Dec 06		Oct - Dec 06		Jan - Dec 06	
	No. tested	% resistant	No. tested	% resistant	No. tested	% resistant (intermediate)	No.	% resistant (intermediate)	No. tested	% resistant	No. tested	% resistant
Northland	11	9.1	45	6.7	11	0 (90.9)	45	11.1 (66.7)	7	0	28	14.3
Auckland <sup>3</sup>	264	8.7	1063	10.0	265	9.4 (82.6)	1068	10.3 (75.5)	64	29.7	279	41.9
Waikato	65	41.5	328	25.9	48	0 (70.8)	234	2.1 (53.9)	0	-	0	-
Lakes	32	18.8	151	13.9	28	7.1 (78.6)	131	6.1 (71.8)	0	-	1	100
Bay of Plenty	33	6.1	131	22.9	33	3.0 (51.5)	123	1.6 (47.2)	0	-	13	38.5
Tairawhiti	19	47.4	93	26.9	9	0 (77.8)	37	2.7 (51.4)	9	55.6	37	32.4
Hawkes Bay	53	11.3	212	3.8	54	5.6 (72.2)	213	3.3 (56.8)	13	23.1	41	14.6
MidCentral	23	13.0	88	6.8	23	0 (39.1)	88	0 (26.1)	23	8.7	88	8.0
Capital and Coast/Hutt <sup>4</sup>	0	-	157	21.7	0	-	157	1.9 (60.5)	0	-	157	23.6
Nelson Marlborough	3	0	20	10.0	3	0 (66.7)	20	5.0 (65.0)	3	0	20	10.0
West Coast	1	0	3	0	1	0 (0)	3	0 (66.7)	1	0	3	0
Canterbury <sup>5</sup>	82	7.3	336	7.4	82	1.2 (80.5)	337	4.5 (73.3)	82	8.5	337	8.6
Otago	5	0	30	3.3	5	0 (60.0)	30	3.3 (80.0)	2	0	14	0
Southland	4	0	26	3.9	4	0 (0)	26	3.9 (23.1)	2	0	15	6.7
Total	595	14.0	2684	12.9	566	5.7 (75.6)	2513	6.3 (66.3)	206	17.5	1034	21.4

Ciprofloxacin, penicillin and tetracycline resistance among *Neisseria gonorrhoeae*, during the 3 months, October to December 2006, and the previous 12 months, January to December 2006

Notes:

1 The patient's place of residence, if known, was used to assign cases to a DHB, otherwise the location of the laboratory was used. For laboratories that do a lot of out-of-area work, place of residence data was available and used.

2 No data for Taranaki, Whanganui or Wairarapa District Health Boards.

3 The three Auckland District Health Boards (Waitemata, Auckland and Counties Manukau) are combined.

4 The two Wellington District Health Boards (Capital and Coast, and Hutt) are combined.

5 The two Canterbury District Health Boards (Canterbury and South Canterbury) are combined.