

AEDV 2023 Highlights

Con el patrocinio de:



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11-14 OCTUBRE

Iniciativa científica de:



ACADEMIA ESPAÑOLA
DE DERMATOLOGÍA
Y VENEREOLOGÍA

The graphic features the text 'AEDV 2023 Highlights' in a bold, sans-serif font. 'AEDV 2023' is in dark blue, and 'Highlights' is in white. The text is set against a teal rectangular background. This background is overlaid on a larger teal shape that has a brown, textured circular area on its right side, resembling a cross-section of an orange. The entire graphic is on a dark blue background with a white wavy pattern.

AEDV 2023
Highlights

Infecciones de transmisión sexual

José Pablo Serrano Serra

HGU Reina Sofía, Murcia.

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IG: jserra_

No tengo conflictos de interés



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The graphic features a white line-art map of Berlin on the left, with a repeating text pattern "32º EDICIÓN" curved around it. On the right, the word "BERLIN" is displayed in large, bold, blue block letters, with a stylized tower spire integrated into the letter "I". Below the city name, the dates "11-14 OCTUBRE" are written in white. The background is a semi-transparent teal image of the Brandenburg Gate.

Aparición de **resistencias** en los últimos años en Europa:

- 11% resistencia a azitromicina.
- 0,5% resistencia a cefixima.
- >50% resistencia a ciprofloxacino.

> [Lancet Infect Dis.](#) 2023 Sep;23(9):e332-e333. doi: 10.1016/S1473-3099(23)00479-6.
Epub 2023 Aug 4.

The Enhanced Gonococcal Surveillance Programme, Cambodia

Vichea Ouk ¹, Cau Dinh Pham ², Teodora Wi ³, Sebastiaan J van Hal ⁴, Monica M Lahra ⁵; EGASP Cambodia working group

Affiliations + expand

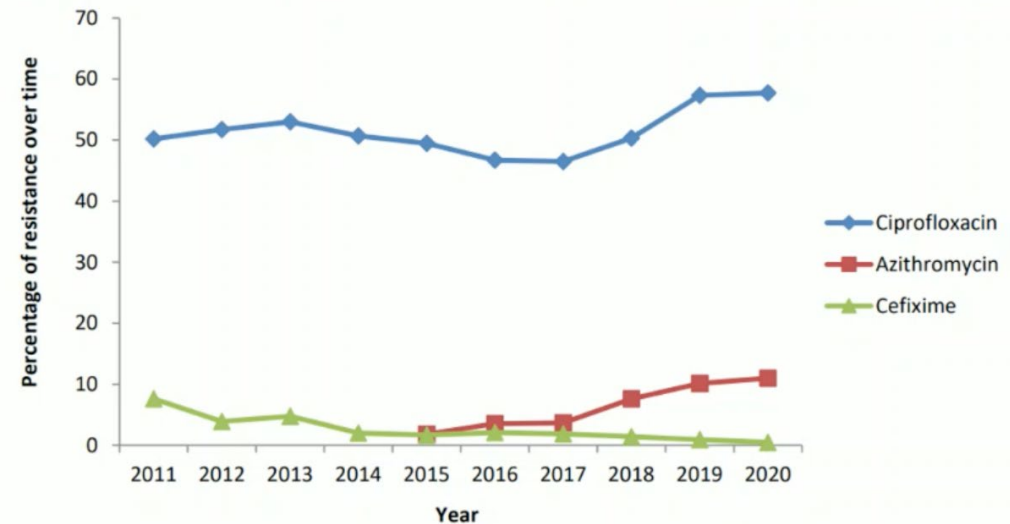
PMID: 37549683 DOI: [10.1016/S1473-3099\(23\)00479-6](#)

Entre 2021 y 2022 el 38% fueron resistentes a ceftriaxona.

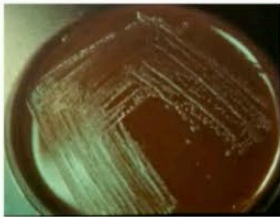
3.2 Antimicrobial susceptibility and resistance

Resistance to cefixime, ciprofloxacin and azithromycin (using breakpoints from the EUCAST for cefixime and ciprofloxacin and ECOFF for azithromycin) over time is summarised in Figure 1 and Table 3.

Figure 1. Percentage of resistant *Neisseria gonorrhoeae* by antimicrobial and year, Euro-GASP, 2011–2020



Phenotypic- vs. genotypic antimicrobial resistance



Phenotypic susceptibility analysis typically takes multiple days and thus, is often not feasible for treatment selection in uncomplicated gonorrhoea

NAAT-based genotypic AMR test

J Antimicrob Chemother 2021; **76**: 84–90
doi:10.1093/jac/dkaa381 Advance Access publication 15 September 2020

Journal of Antimicrobial Chemotherapy

Evaluation of the SpeedX ResistancePlus[®] GC and SpeedX GC 23S 2611 (beta) molecular assays for prediction of antimicrobial resistance/susceptibility to ciprofloxacin and azithromycin in *Neisseria gonorrhoeae*

Ronza Hadad¹, Michelle Jayne Cole², Samantha Ebeyan³, Susanne Jacobsson¹, Lit Yeen Tan³, Daniel Golparian¹, Simon Erskine³, Michaela Day², David Whiley⁴ and Magnus Unemo^{1*} on behalf of the European collaborative group†

¹WHO Collaborating Centre for Gonorrhoea and other Sexually Transmitted Infections, National Reference Laboratory for Sexually Transmitted Infections, Department of Laboratory Medicine, Faculty of Medicine and Health, Örebro University, Örebro, Sweden; ²National Infection Service, Public Health England, London, UK; ³SpeedX Pty Ltd, Sydney, New South Wales, Australia; ⁴Faculty of Medicine, UQ Centre for Clinical Research, The University of Queensland, Herston, Queensland, Australia

*Corresponding author. E-mail: magnus.unemo@regionorebrolan.se
†Members are listed in the Acknowledgements section.

Received 25 February 2020; accepted 6 August 2020

Sensitivity: Ciprofloxacin 100%	Azithromycin 64.3%
Specificity: Ciprofloxacin 99.9%	Azithromycin 99.9%

Current treatment recommendations 2023

Management of gonococcal infection	WHO 2021	IUSTI – EU 2020	CDC 2021	BASHH 2020	ASHM 2021	DSTIG 201
Diagnostics	NAAT, syndromic if limited resource	Microscopy, NAAT, culture, syndromic†	Microscopy, NAAT, culture	Microscopy, NAAT, culture	NAAT, culture	Microscopy, NAAT, culture
Uncomplicated genital and anorectal infection	•CRO 250mg IM ± AZM 1g oral	•CRO 1g IM ± AZM 2g oral	•CRO 500mg IM	•CRO 1g IM •CIP 500mg oral*	•CRO 500mg IM + AZM 1g oral	•CRO 1-2g IV or IM ± AZM 1.5g oral
Uncomplicated pharyngeal infection	•CRO 250mg IM ± AZM 1g oral	•CRO 1g IM ± AZM 2g oral	•CRO 500mg IM	•CRO 1g IM	•CRO 500mg IM + AZM 2g oral	•CRO 1-2g IV or IM ± AZM 1.5g oral
Alternatives (Allergy to principal treatment choice or IM application not possible)	•CFM 400mg oral + AZM 1g oral	•SPT 2g IM+2g oral AZM •CIP 500mg oral* •GEN 240mg IM + 2g oral AZM •CFM 400mg oral + AZM 2g oral	•GEN 240mg IM + 2g oral AZM •CFM 800mg oral	•SPT 2g IM+2g oral AZM •GEN 240mg IM + 2g oral AZM •CFM 400mg oral + AZM 2g oral	•Refer to specialist •(CIP 500mg oral*)	•CFM 800mg oral + AZM 1.5g oral •CIP 500mg oral* •DXY 100mg oral BID for 7 days* •AZM 2g oral*
Follow up // Test of cure		•NAAT 14 days	•NAAT 7-14 days, •Repeat at 3M	•RNA NAAT 7 days •DNA NAAT 14 days	•NAAT 14 days •Repeat at 3M	•NAAT 28 days

* Use only if susceptibility is demonstrated by culture
† purulent discharge & no rapid diagnostics available

AZM – Azithromycin, CFM – Cefixime, CIP – Ciprofloxacin, CRO – Ceftriaxone, DXY – Doxycycline, ETP – Ertapenem, GEN – Gentamicine, IM – intramuscular, IV – intravenous, NAAT – nucleic acid amplification test, SPT - Spectinomycin

Current treatment recommendations 2023

Management of gonococcal infection	WHO 2021	IUSTI – EU 2020	CDC 2021	BASHH 2020	ASHM 2021	DSTIG 2019
Suspected Cephalosporin Treatment Failure // CRO resistance identified		<ul style="list-style-type: none"> •CRO 1g IM + AZM 2g oral •SPT 2g IM + 2g oral AZM •GEN 240mg IM + 2g oral AZM •ETP 1g IM QD 3 days 	<ul style="list-style-type: none"> •CRO 500mg IM •GEN 240mg IM + 2g oral AZM 			
Pregnancy and breastfeeding		<ul style="list-style-type: none"> •CRO 1g IM ± AZM 2g oral 	<ul style="list-style-type: none"> •CRO 500mg IM 	<ul style="list-style-type: none"> •CRO 1g IM •SPT 2g IM •AZM 2g oral 	<ul style="list-style-type: none"> •Same as above 	<ul style="list-style-type: none"> •CRO 1g IM or IV
Neonates		<ul style="list-style-type: none"> •CRO 25-50mg/kg IM or IV 	<ul style="list-style-type: none"> •CRO 25-50mg/kg IM or IV 			<ul style="list-style-type: none"> •CRO 25-50mg/kg IM or IV
Gonococcal conjunctivitis		<ul style="list-style-type: none"> •CRO 1g IM + AZM 2g oral 	<ul style="list-style-type: none"> •CRO 1g IM 	<ul style="list-style-type: none"> •CRO 1g IM 	<ul style="list-style-type: none"> •CRO 1g IM +AZM 2g oral 	<ul style="list-style-type: none"> •CRO 2g IM or IV QD for 3 days +AZM 2g oral
People living with HIV		<ul style="list-style-type: none"> •Same as above 	<ul style="list-style-type: none"> •Same as above 	<ul style="list-style-type: none"> •Same as above 		<ul style="list-style-type: none"> •Same as above

AZM – Azithromycin, CFM – Cefixime, CIP – Ciprofloxacin, CRO – Ceftriaxone, DXY – Doxycycline, ETP – Ertapenem, GEN – Gentamicine, IM – intramuscular, IV – intravenous, NAAT – nucleic acid amplification test, SPT - Spectinomycin

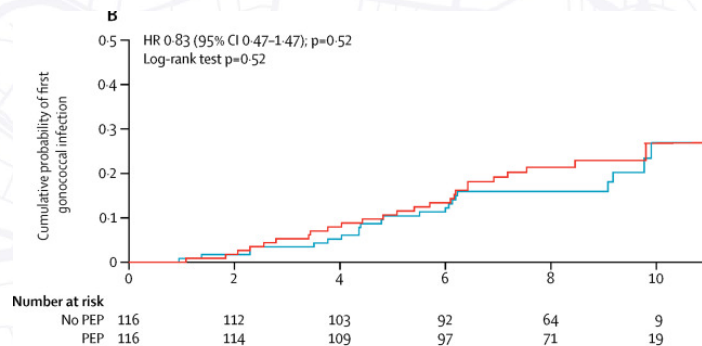
- **Ceftriaxona en monoterapia** en algunas guías:
 - Si baja prevalencia de resistencia a ceftriaxona en el área geográfica.
 - *Test of cure.*

Mycoplasma genitalium

A good reason for Ceftriaxone-monotherapy?

- Estimated MG prevalence:
 - 2% general population [1]
 - 10% STI clinic attendees [2]
 - 17% men with NGU [3]

- **Doxiciclina vo 200mg** en las primeras 72 horas post exposición reducen la probabilidad de contagio de sífilis y chlamydia.
- No protección de gonococo.



Randomized Controlled Trial > [Lancet Infect Dis.](#) 2018 Mar;18(3):308-317.

doi: 10.1016/S1473-3099(17)30725-9. Epub 2017 Dec 8.

Post-exposure prophylaxis with doxycycline to prevent sexually transmitted infections in men who have sex with men: an open-label randomised substudy of the ANRS IPERGAY trial

Jean-Michel Molina ¹, Isabelle Charreau ², Christian Chidiac ³, Gilles Pialoux ⁴, Eric Cua ⁵, Constance Delaugerre ⁶, Catherine Capitant ², Daniela Rojas-Castro ⁷, Julien Fonsart ⁸, Béatrice Bercot ⁹, Cécile Bébéar ¹⁰, Laurent Cotte ³, Olivier Robineau ¹¹, François Raffi ¹², Pierre Charbonneau ¹³, Alexandre Aslan ¹³, Julie Chas ⁴, Laurence Niedbalski ¹³, Bruno Spire ¹⁴, Luis Sagaon-Teyssier ¹⁴, Diane Carette ², Soizic Le Mestre ¹⁵, Veronique Doré ¹⁵, Laurence Meyer ¹⁶; ANRS IPERGAY Study Group

Collaborators, Affiliations + expand

PMID: 29229440 DOI: [10.1016/S1473-3099\(17\)30725-9](#)

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Postexposure Doxycycline to Prevent Bacterial Sexually Transmitted Infections

Anne F. Luetkemeyer, M.D., Deborah Donnell, Ph.D.,
Julia C. Dombrowski, M.D., M.P.H., Stephanie Cohen, M.D., M.P.H.,
Cole Grabow, M.P.H., Clare E. Brown, Ph.D., Cheryl Malinski, B.S.,
Rodney Perkins, R.N., M.P.H., Melody Nasser, B.A., Carolina Lopez, B.A.,
Eric Vittinghoff, Ph.D., Susan P. Buchbinder, M.D., Hyman Scott, M.D., M.P.H.,
Edwin D. Charlebois, Ph.D., M.P.H., Diane V. Havlir, M.D., Olusegun O. Soge, Ph.D.,
and Connie Celum, M.D., M.P.H., for the DoxyPEP Study Team*

Review > J Antimicrob Chemother. 2023 Jul 5;78(7):1561-1568. doi: 10.1093/jac/dkad129.

Important considerations regarding the widespread use of doxycycline chemoprophylaxis against sexually transmitted infections

Fabian Yuh Shiong Kong¹, Chris Kenyon^{2,3}, Magnus Unemo^{4,5}

Affiliations + expand

PMID: 37129293 DOI: 10.1093/jac/dkad129

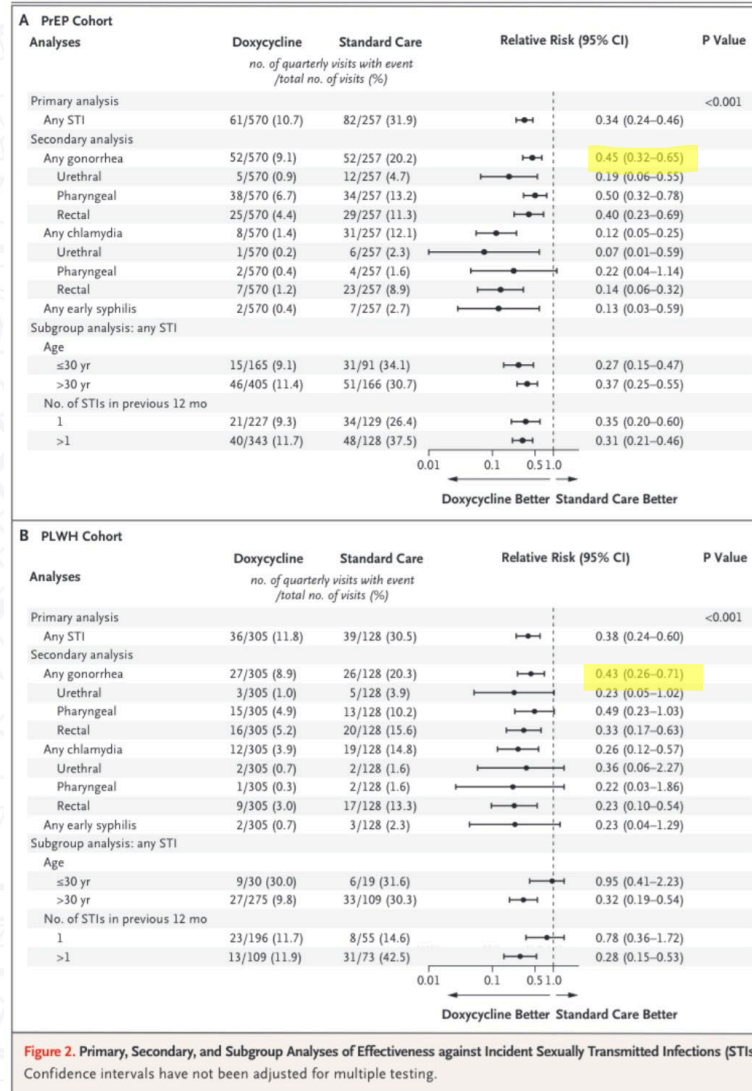


Figure 2. Primary, Secondary, and Subgroup Analyses of Effectiveness against Incident Sexually Transmitted Infections (STIs). Confidence intervals have not been adjusted for multiple testing.



4CMenB (Bexsero®) to prevent gonorrhoea

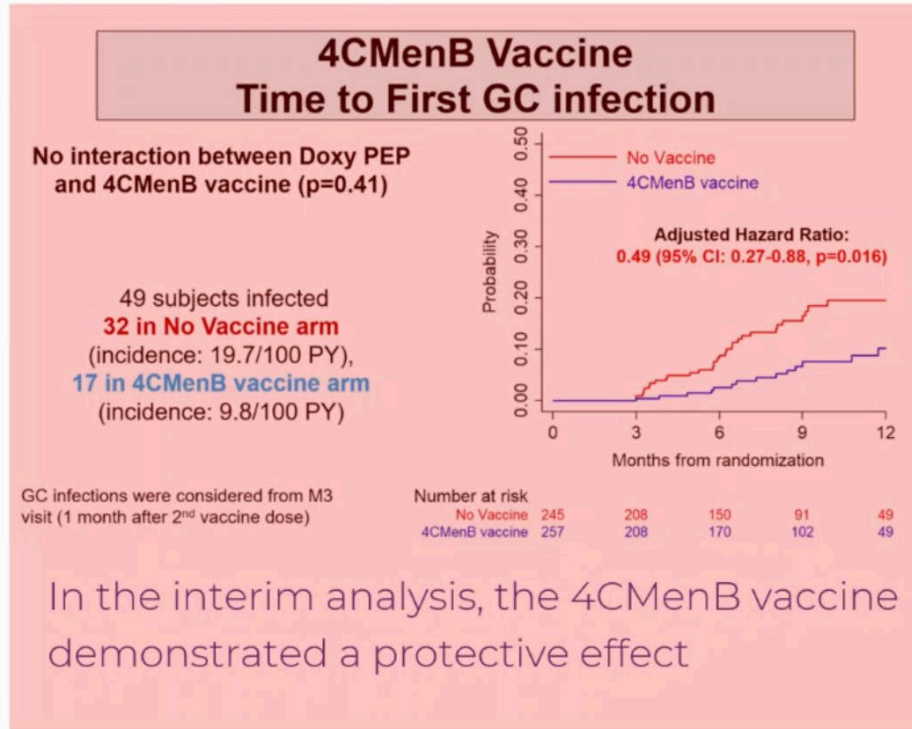
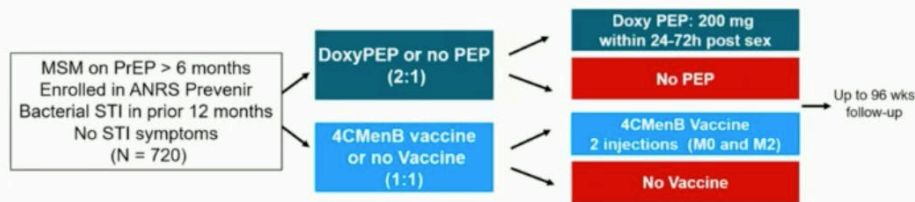
119 ANRS 174 DOXYVAC: AN OPEN-LABEL RANDOMIZED TRIAL TO PREVENT STIs IN MSM ON PrEP
10:13



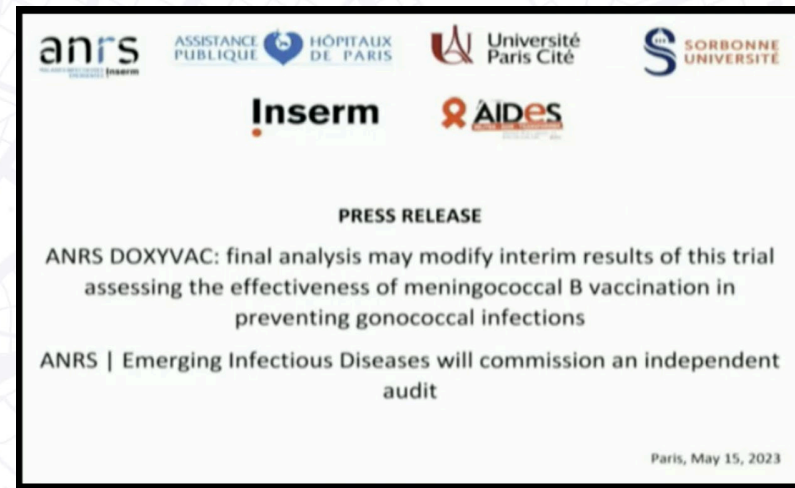
Jean-Michel Molina, Beatrice Bercot, Lambert Assoumou, Algarde-Genin Michele, Emma Rubenstein, Gilles Pialoux, Christine Katlama, Laure Surgers, Cecile Bebear, Nicolas Dupin, Jean-Paul Viard, Juliette Pavie, Claudine Duvivier, Jade Ghosn, Dominique Costagliola
Research Group: ANRS 174 Doxyvac Group

Study Design

- Multicenter, 2 x 2 factorial randomized, open-label, superiority, phase III trial (NCT04597424)



- **Discrepancia** entre análisis final y análisis interno en cuanto a la eficacia de vacunación con 4CMenB para prevención de infección gonocócica.
- Pendiente de **auditoría** independiente.



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PRESS RELEASE

ANRS DOXYVAC: final analysis may modify interim results of this trial assessing the effectiveness of meningococcal B vaccination in preventing gonococcal infections

ANRS | Emerging Infectious Diseases will commission an independent audit

Paris, May 15, 2023

> J Clin Oncol. 2023 Jul 20;41(21):3712-3723. doi: 10.1200/JCO.22.02459. Epub 2023 May 16.

Safety and Activity of Immune Checkpoint Inhibitors in People Living With HIV and Cancer: A Real-World Report From the Cancer Therapy Using Checkpoint Inhibitors in People Living With HIV-International (CATCH-IT) Consortium

Talal El Zarif¹, Amin H Nassar², Elio Adib^{1,3}, Bailey G Fitzgerald⁴, Jiaming Huang¹, Tarek H Mouhieddine⁴, Paul G Rubinstein⁵, Taylor Nonato⁶, Rana R McKay⁶, Mingjia Li⁷, Arjun Mittra⁷, Dwight H Owen⁷, Robert A Baiocchi⁸, Michael Lorentsen⁹, Christopher Dittus⁹, Nazli Dizman², Adewunmi Falohun¹⁰, Noha Abdel-Wahab^{10,11}, Adi Diab¹⁰, Anand Bankapur¹², Alexandra Reed¹², Chul Kim¹³, Aakriti Arora¹⁴, Neil J Shah¹⁵, Edward El-Am¹⁶, Elie Kozaily¹⁶, Wassim Abdallah¹⁷, Ahmad Al-Hader¹⁶, Batool Abu Ghazal¹⁸, Anwaar Saeed^{18,19}, Claire Drolen²⁰, Melissa G Lechner²⁰, Alexandra Drakaki²⁰, Javier Baena²¹, Caroline A Nebhan²², Tarek Haykal²³, Michael A Morse²³, Alessio Cortellini^{24,25}, David J Pinato^{24,26}, Alessia Dalla Pria^{24,27}, Evan Hall²⁸, Veli Bakalov²⁹, Nathan Bahary²⁹, Aarthi Rajkumar³⁰, Ankit Mangla³⁰, Vishal Shah³¹, Parminder Singh³¹, Frank Aboubakar Nana³², Nerea Lopetegui-Lia³³, Danai Dima³³, Ryan W Dobbs⁵, Pauline Funchain³³, Rabia Saleem³⁴, Rachel Woodford³⁵, Georgina V Long³⁶, Alexander M Menzies³⁵, Carlo Genova^{37,38}, Giulia Barletta³⁹, Sonam Puri⁴⁰, Vaia Florou⁴⁰, Dame Idossa⁴¹, Maristella Saponara⁴², Paola Queirolo⁴², Giuseppe Lamberti⁴³, Alfredo Addeo⁴⁴, Melissa Bersanelli⁴⁵, Dory Freeman¹, Wanling Xie¹, Erin G Reid⁶, Elizabeth Y Chiao¹⁰, Elad Sharon⁴⁶, Douglas B Johnson²², Ramya Ramaswami⁴⁷, Mark Bower^{24,27}, Brinda Emu², Thomas U Marron⁴, Toni K Choueiri¹, Lindsey R Baden³, Kathryn Lurain⁴⁷, Guru P Sonpavde⁴⁸, Abdul Rafeh Naqash³⁴

Affiliations + expand

PMID: 37192435 PMCID: PMC10351941 (available on 2024-07-20) DOI: 10.1200/JCO.22.02459

PLWHIV vs
PWOHIV with
NSCLC:
No Diff in OS/PFS
No Diff in Tox
(20 vs 22%)

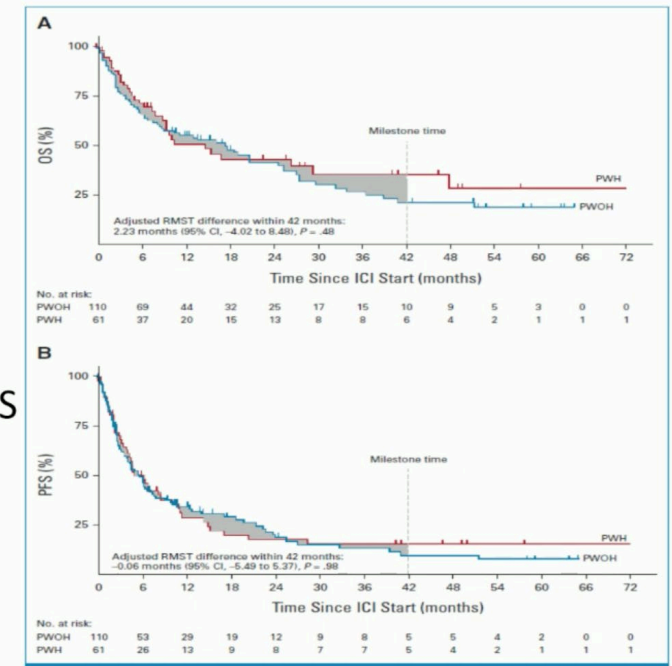


FIG 3. Kaplan-Meier analysis of (A) OS and (B) PFS between PWH and PWOH with mNSCLC. The gray area corresponds to the difference in the areas under the survival curves or the RMST up to 42 months after ICI initiation (milestone time) where the number of PWH or PWOH is ≥ 5 . ICI, immune checkpoint inhibitor; mNSCLC, metastatic non-small-cell lung cancer; OS, overall survival; PFS, progression-free survival; PWH, people living with HIV; PWOH, people living without HIV; RMST, restricted mean survival time.

- Perfil de **seguridad** similar a no VIH.
- No alteraciones en curso de infección VIH.
- **Efecto antitumoral** similar a pacientes no VIH.
- Efectos in vivo contra VIH.
- Se recomienda utilizar **inhibidores de checkpoint** en estos pacientes.

> [Cells](#). 2022 Mar 17;11(6):1015. doi: 10.3390/cells11061015.

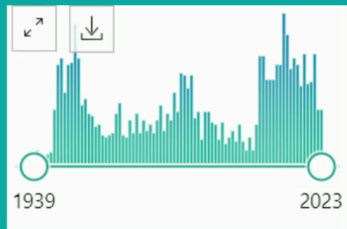
Impact of Anti PD-1 Immunotherapy on HIV Reservoir and Anti-Viral Immune Responses in People Living with HIV and Cancer

Marine Baron ¹, Cathia Soulié ², Armelle Lavalé ³, Lambert Assoumou ⁴, Baptiste Abbar ¹, Baptiste Fouquet ¹, Alice Rousseau ¹, Marianne Veyri ⁵, Assia Samri ¹, Alain Makinson ⁶, Sylvain Choquet ⁷, Julien Mazières ⁸, Solenn Brosseau ⁹, Brigitte Autran ¹, Dominique Costagliola ⁴, Christine Katlama ¹⁰, Jacques Cadranel ³, Anne-Geneviève Marcelin ², Olivier Lambotte ^{11 12}, Jean-Philippe Spano ⁵, Amélie Guihot ¹, The French Cooperative Thoracic Intergroup Ifct Chiva-Investigators, The Anrs Co OncoVIHAC Study Group

Affiliations + expand

PMID: 35326466 PMCID: [PMC8946896](#) DOI: [10.3390/cells11061015](#)

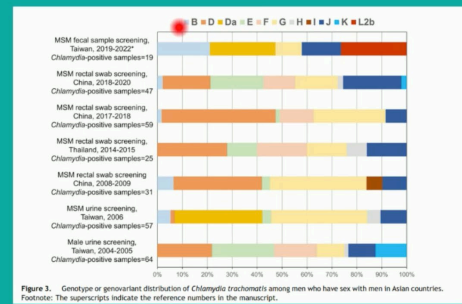
LGV: an emerging problem



NO LYMPHOGRANULOMA
in Clinical trials.gov

2012 - 69
2022 - 24
2023 - 24

Characteristics of rectal chlamydia among men who have sex with men in southern Taiwan, 2020-2022: An emerging threat of rectal lymphogranuloma venereum L2b

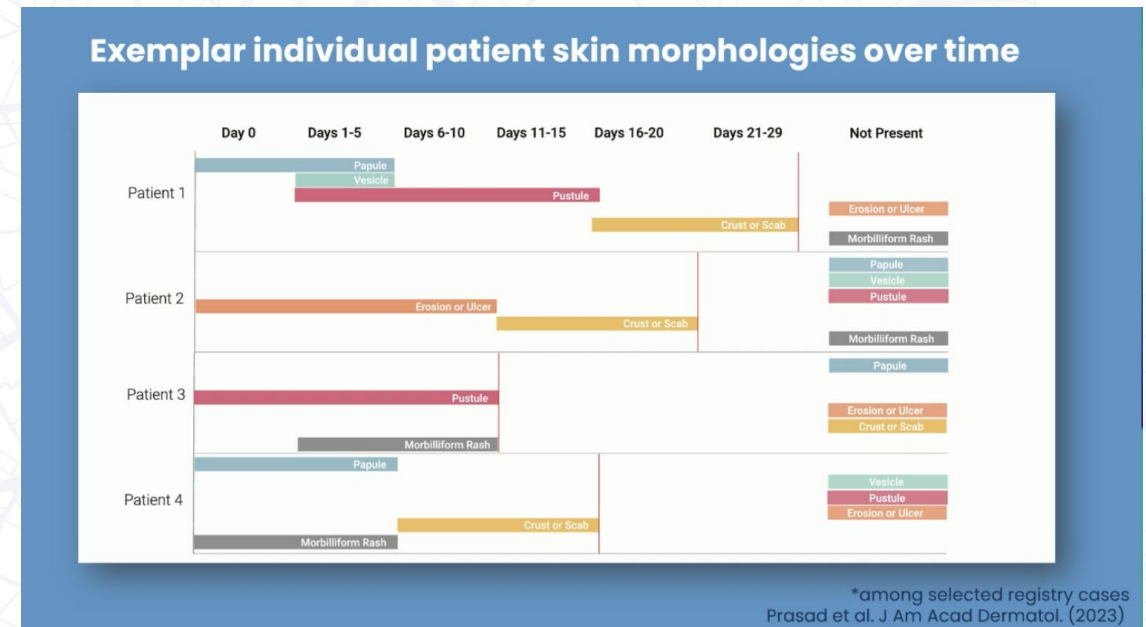
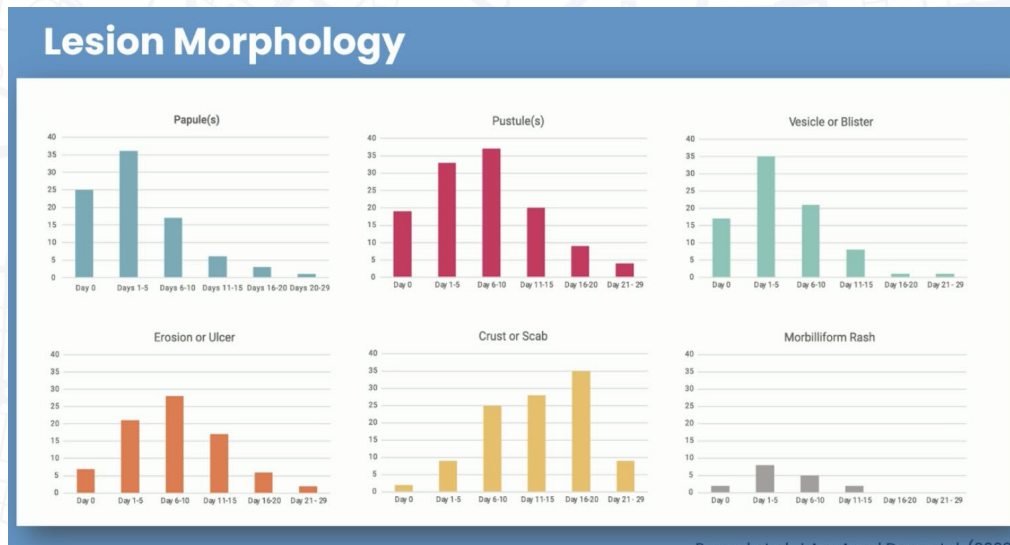


Journal of
Microbiology,
Immunology and
Infection 56 (2023)
408e415

Figure 3. Genotype or genovariant distribution of *Chlamydia trachomatis* among men who have sex with men in Asian countries. Footnote: The superscripts indicate the reference numbers in the manuscript.

- Problema emergente en los últimos años.
- **Proctitis** similar a EI y patología **ulcerosa** genital.
- Diagnóstico molecular de elección.
 - HSH con *C. Trachomatis* anorrectal deben realizar test diagnóstico de LGV.
 - Contactos sexuales de casos confirmados.
- Prioridad para HSH con VIH o candidatos a PrEP.
- Test disponible en 1 semana.
- Doxiciclina 100mg/12h x 21 días.

- Variabilidad clínica de las lesiones, más allá de la clásica presentación como pápulo-pústulas acrales y diseminadas.
- Posible **exantema morbiliforme** como debut.



- Variantes graves en pacientes VIH e inmunodeprimidos.

Severe Cases

- Ulcerative or necrotic lesions, secondary bacterial infections, bacteremia, amputation, shock, and death have been reported



Miller et al. (2022) CDC- MMWR



Govind A, et al. (2023). Clin Infect Dis
Photography by Joshua Estrada.

Vaccines

JYNNEOS



- Newer vaccine
- 2 doses (28 days apart)
- Considered fully vaccinated 2 weeks after final dose
- May receive in the forearm, upper arm, or thigh

ACAM 2000

(old vaccine)



- Older smallpox vaccine
- 1 dose with multiple pricks to skin
- Considered fully vaccinated 28 days after dose

(CDC, 2022)



Those NOT vaccinated were 14x more likely to become infected than those who received one dose of Jynneos.

La Academia Española de Dermatología y Venereología expresa su agradecimiento al patrocinador UCB, por su especial apoyo y contribución con la actividad formativa Highlights 2023.



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