Diagnosing and Treating Bacterial STIs in Men Who Have Sex with Men (MSM)

- STIs are on the rise among NYC MSM. Anal gonorrhea (GC), anal Chlamydia (CT) and syphilis may facilitate HIV transmission.
- Many anogenital STIs are asymptomatic. Urine/urethral screening alone misses over half of GC and CT cases in asymptomatic MSM and transgender people.
- Empiric treatment is often indicated based on symptoms, and the most commonly associated pathogens.

### Use a 3-Site Screening Strategy

<table>
<thead>
<tr>
<th>Site</th>
<th>Test for</th>
<th>Type of sexual exposure</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throat</td>
<td>GC only</td>
<td>Oral receptive</td>
<td>NAAT (Self-collection if patient prefers)</td>
</tr>
<tr>
<td>Anorectal</td>
<td>GC/CT</td>
<td>Anal receptive (bottom)</td>
<td>NAAT (Self-collection if patient prefers; still conduct physical exam)</td>
</tr>
<tr>
<td>Urine or urethral</td>
<td>GC/CT</td>
<td>Oral/anal insertive (top)</td>
<td>NAAT (First catch urine preferred)</td>
</tr>
<tr>
<td>Serology</td>
<td>Syphilis</td>
<td>Any</td>
<td>Treponemal lgG, RPR, Darkfield microscopy of anogenital lesions.</td>
</tr>
</tbody>
</table>

Screening recommended every 3 to 6 months for MSM with multiple or anonymous sex partners or illicit drug use.
## Treatment Regimens

<table>
<thead>
<tr>
<th>Syndrome</th>
<th>First-line empiric therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Urethritis</strong></td>
<td><strong>Empiric tx for GC and CT</strong></td>
</tr>
<tr>
<td></td>
<td>Ceftriaxone 250 mg IM PLUS</td>
</tr>
<tr>
<td></td>
<td>Azithromycin 1g PO</td>
</tr>
<tr>
<td><strong>Proctitis</strong></td>
<td><strong>Empiric tx for GC and CT</strong></td>
</tr>
<tr>
<td></td>
<td>Ceftriaxone 250 mg IM PLUS</td>
</tr>
<tr>
<td></td>
<td>Doxycycline 100 mg PO BID x 7 days*</td>
</tr>
<tr>
<td></td>
<td>* Extend DOX 100 mg BID to 21 days for confirmed rectal CT or high clinical suspicion of lymphogranuloma venereum (LGV)</td>
</tr>
<tr>
<td><strong>Chancre or disseminated rash</strong></td>
<td><strong>Empiric tx for primary (chancre) or secondary (rash) syphilis</strong></td>
</tr>
<tr>
<td></td>
<td>Single dose Benzathine penicillin G 2.4 million units IM</td>
</tr>
</tbody>
</table>

+ For detailed STI treatment guidelines, and alternative regimens, see the “STD Treatment Guidelines Table” in your Action Kit, or www.cdc.gov/std/tg2015

## Reporting STI Cases

- Report confirmed cases of GC, CT and syphilis **within 24 hours** using Reporting Central, accessible via NYCMED at [nyc.gov/nycmed](http://nyc.gov/nycmed), unless otherwise noted.
  - Go to [nyc.gov/health/diseasereporting](http://nyc.gov/health/diseasereporting) for more information about how to report online or about other methods of reporting.
  - Register for an NYCMED account at [nyc.gov/nycmed](http://nyc.gov/nycmed). For assistance with registration, email [nycmed@health.nyc.gov](mailto:nycmed@health.nyc.gov) or call 888-NYCMED9 (888-692-6339)