

Welcome! The meeting is about to start..

Microphone

- Mute your microphone.
- Unmute when presenting or if you are invited to talk

Video

 Please keep your video on during the meeting if possible. Otherwise at least when you are talking or presenting.

Chat

• Use the chat to write your questions or comments







Joint virtual meeting of STI and FWD Networks Coordination Committees 7 June 2024

Agenda



- 12:30 12:45 Welcome and introductions
- 12:45 13:00 Brief overview of the events (ECDC)

13:00 – 13:50 Discussion

- How concerned are we about the MDR/XDR and sexual health aspects of these diseases?
- How do we want to react/communicate across the networks about these MDR/XDR *Shigella* clusters/cases?
- Any additional actions from ECDC to facilitate collaboration across networks/countries on the MDR/XDR *Shigella* issue and other "enteric" STIs?
- 13:50 14:00 Conclusions, further actions (ECDC)

Introductions



FWD ECDC team

FWD DNCC

Eelco Franz Silvia Herrera León Stefano Morabito Maria Pavlova Ruska Rimhanen-Finne Mathieu Tourdjman Dieter Van Cauteren Hendrik Wilking Eva Grilc

STI ECDC team

STI DNCC

Béatrice Berçot Irith De Baetselier Maria José Borrego Steen Hoffmann Javier Gómez Castellá Klaus Jansen Maartje Visser Erna M. Kojic Maria Wessman Tatjana Nemeth-Blažić



Overview of the events



Outbreaks of *Shigella* within the EU/EEA have previously mainly been associated with schools, other institutional settings, restaurants, imported fresh vegetables. Large proportion of infections associated with travel.



Fresh mint linked to Danish Shigella outbreak

By Joe Whitworth on October 14, 2020

A Shigella outbreak in Denmark that sickened more than 40 people was likely caused by imported fresh mint.



UK Shigella outbreak linked to spring onions from Egypt

By Joe Whitworth on May 1, 2023

A Shigella outbreak in England in 2021 has been linked to spring onions imported from Egypt.



Shigella sickens eight in Norway; link to peas from Kenya

By Joe Whitworth on December 28, 2019

Increase of events reported in EpiPulse associated with men who have sex with men (MSM)



ID \$	Participating domain 🔶	Title 🔶	Pathogens
٩	٩	٩	٩
2023-FWD-00037	EI, FWD, STI, PREP	New Shigella sonnei cluster among MSM	Shigella sonnei
2022-FWD-00092	FWD	Shigella sonnei ST152 multidrug resistant - Multi- country - 2022	Shigella sonnei
2023-EIP-00023	STI, ARHAI, FWD, EI, PREP	MDR Shigella cases in gbMSM - Ireland/Multi country - 2023	Shigella species, not specified
2023-FWD-00063	FWD	Shigella sonnei cases after festival in Germany (August 2023)	Shigella sonnei
2022-FWD-00088	FWD, EI, PREP	S. sonnei cluster linked to Cape Verde	Shigella sonnei
2022-ARH-00002	ARHAI, EI, STI, FWD, PREP	Extremely antibiotic-resistant Shigella sonnei in men who have sex with men, UK, 1 September 2021 – 10 January 2022	Shigella sonnei
2018-FWD-00076	STI, FWD	EPIS FWD: Multi-drug resistant Shigella sonnei cluster (CTX-M-27) probably associated with men who have sex with men (MSM) circulating in UK and USA - (UI-530)	Shigella sonnei
2022-FWD-00009	FWD	Enteroinvasive E. coli (EIEC) investigation in the US linked to maki rolls	Shigella species, not specified
2020-FWD-00046	FWD	EPIS FWD: Shigella sonnei Outbreak in Denmark - (UI-669)	Shigella sonnei
2019-FWD-00082	FWD	EPIS FWD: Outbreak of Shigella sonnei linked to snap peas in Norway - (UI-619)	Shigella sonnei

In June 2023, the Netherlands launches an event in EpiPulse, FWD domain...



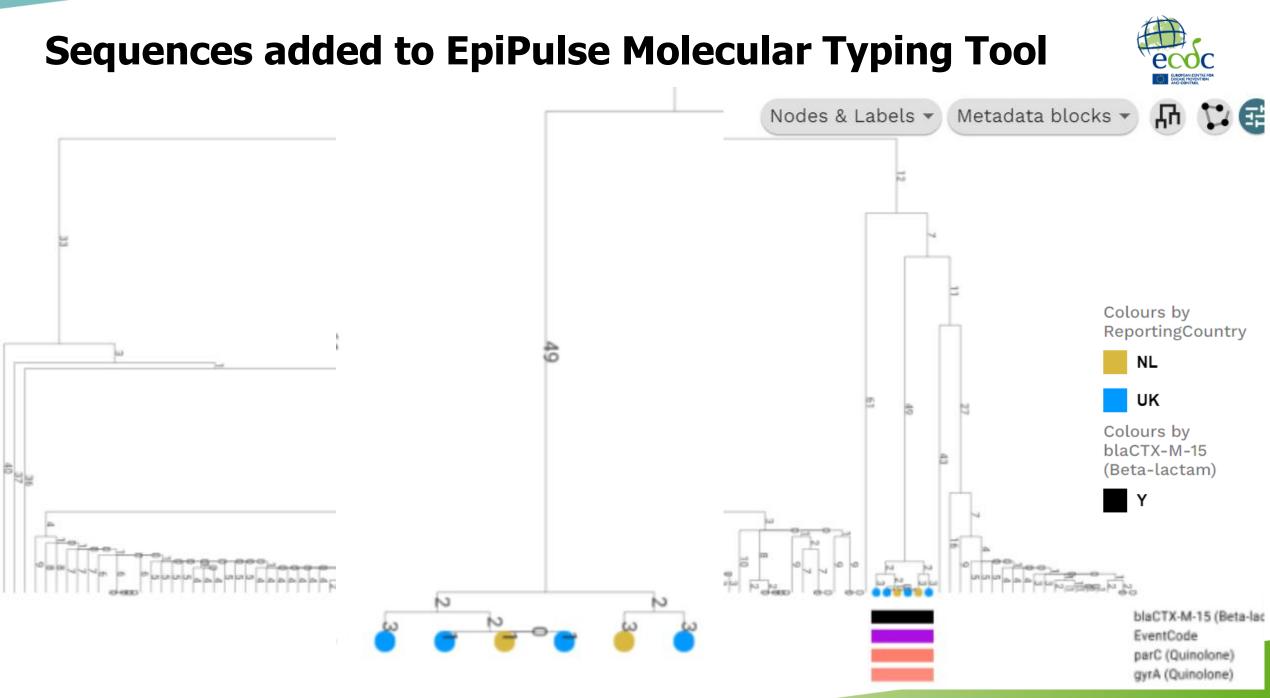
"Cluster of cases with a new strain not seen before, mainly among men who have sex with men."

Outbreak strain sequence file shared

In December 2023 the UK launches an event in **the STI domain**. "*Detection of a new cluster of extremely antibiotic-resistant Shigella sonnei in men who have sex with men*."

Outbreak strain sequence file shared and compared.

->Strain matches the Netherlands outbreak strain.





April 2024 Belgium launches an event in the FWD domain *"Shigella cases linked to Darklands festival Belgium"* Same outbreak strain again, events are merged.

Persistent multi drug (extensively drug) resistant *Shigella* strains within the MSM population.

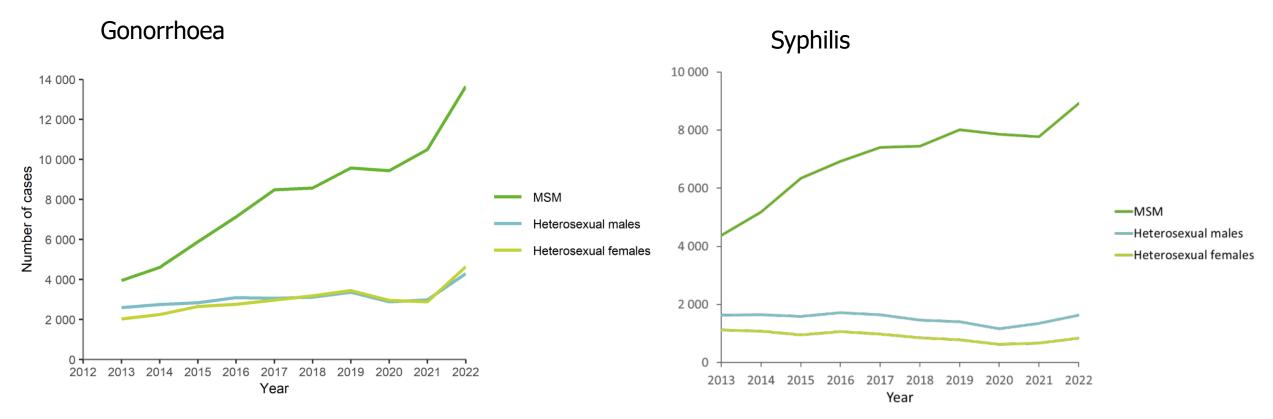


Context

'Traditional' STIs are increasing in MSM



12



Source: Country reports from Czechia, Denmark, Finland, Greece, the Netherlands, Norway, Romania, Slovenia, and Sweden.

Source: *Country reports from Czechia, Germany, Greece, Latvia, the Netherlands, Norway, Romania, Slovakia, Slovenia, and Sweden.*

ECDC (2024). Syphilis - Annual Epidemiological Report for 2022 (europa.eu)

ECDC (2024). Gonorrhoea - Annual Epidemiological Report for 2022 (europa.eu)

Non-traditional STIs



Enteric

- Shigella
- Hepatitis A
- Mpox
- Meningitis

Hepatitis A



Spread of genotype IB **hepatitis A virus** strains in several EU/EEA countries and UK

- 300 cases
- Majority young males-many MSM
- Q1-Q2 of 2022

Outbreak also in 2016-2018

2024: Portugal and a few cases in NL, DE

https://www.ecdc.europa.eu/sites/default/files/documents/RRA%20hep%20A%20outbreak%20EU%20EE A%20in%20MSM%20third%20update%2028%20June%202017_0.pdf https://www.ecdc.europa.eu/en/news-events/spread-hepatitis-virus-strains-genotype-ib-several-eucountries-and-united-kingdom





RAPID RISK ASSESSMENT

Hepatitis A outbreak in the EU/EEA mostly affecting men who have sex with men

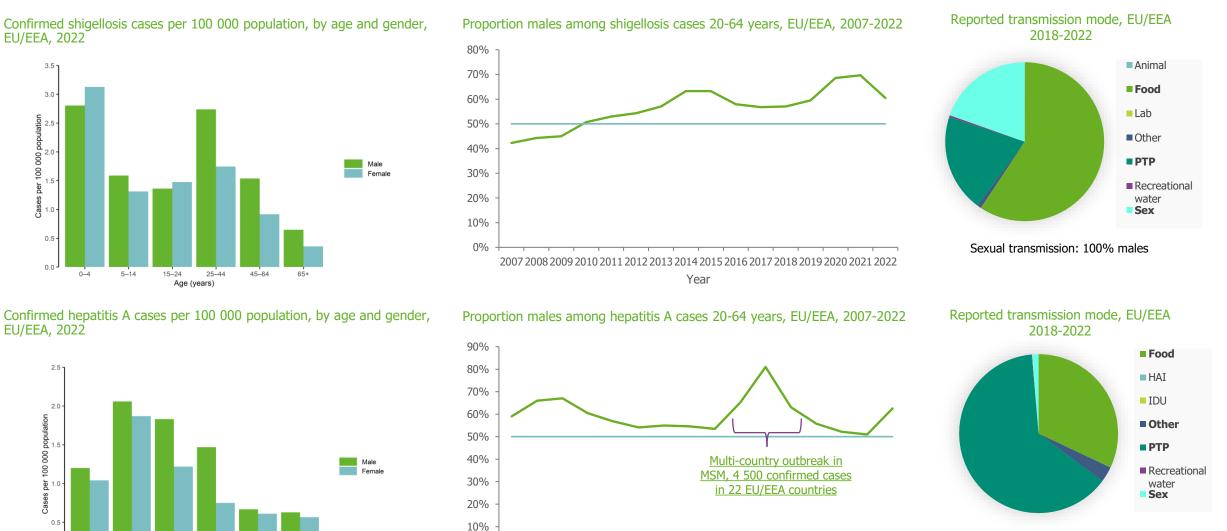
Third update, 28 June 2017

Conclusions and options for response

Changing epidemiology



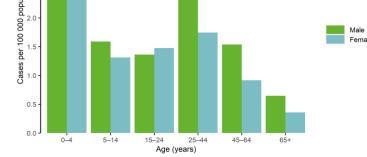
Sexual transmission: 98% males



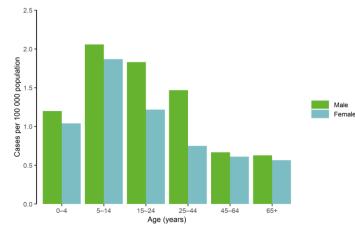
0%

2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022





Confirmed hepatitis A cases per 100 000 population, by age and gender,



Antimicrobial resistance in gbMSM strains



ECDC contacted by Irish FWD expert, April 2023

"We in Ireland – in common with many countries - have seen a marked and sustained increase in MDR shigella cases in gbMSM.

Since the beginning of the year we have had 44 cases of shigellosis notified; 2-3 times the rate of notification for the same period prior to the pandemic. Males - primarily under the age of 35 - make up 77% (n=32) of these cases. Of these 32, 47% are reported as gbMSM. *Flexneri* makes up ~40% of cases – *sonnei*, the bulk of the remainder. Typing analysis on 24 isolates from 2023, indicates that 15 (62%) belong to one of six clusters, some of which extend back to 2016. These clusters range in size from four to 57 cases. Five of the six clusters have cases reported as gbMSM, and four of the six clusters have cases associated with international travel. No new clusters have been identified among the isolates sequenced to date in 2023.

AMR gene analysis indicates that:

- Sonnei isolates display varying proportions of resistance genes to: Tetracycline, Quinolone, Azithromycin, Trimethoprim, Sulphamethoxazole and ESBL production, and
- Flexneri isolates display varying proportions of resistance genes to: Tetracycline, Quinolone, Chloramphenicol, Azithromycin, Trimethoprim, Sulphamethoxazole, Ampicillin and ESBL production."

In June 2023, Ireland published "<u>Recommendation on aspects of management of shigellosis in</u> <u>Ireland in the context of current antimicrobial resistant Shigella species associated with gay,</u> <u>bisexual and men who have sex with men (gbMSM)</u>"

Recommendations for clinical practice

- Adult male patients who require hospitalisation and are seriously ill with suspected shigellosis (clinical dysentery like illness) or with laboratory confirmed shigellosis should be treated with a carbapenem such as meropenem until there are laboratory results to guide the use of alternative agents such as ceftriaxone, azithromycin or a fluoroquinolone. This may also be a consideration in all patients with suspected or confirmed shigellosis acquired during travel outside of the EU as antimicrobial resistance is also a significant concern in some countries.
- 2. Adult male patients with laboratory confirmed shigellosis other than those described above should be offered treatment with azithromycin 500mg daily PO for 3 days unless there is a contraindication to use of azithromycin. They should be advised that sexual partners are likely to be at risk and should seek healthcare if they currently have or develop diarrhoea.
- 1. For severe cases, IE recommends last resort intravenous antimicrobial treatment until known whether susceptible to normal first line antimicrobials
- 2. For less severe cases, recommends macrolide (azithromycin), second line oral antimicrobial

Sexual practices associated with transmission of enteric pathogens in MSM

- Faecal-oral contact
- Anal => oral
- Fisting, fingering
- Rimming
- Use of sex toys
- Douching (contaminated equipment)





Sexual partnership frequency distribution





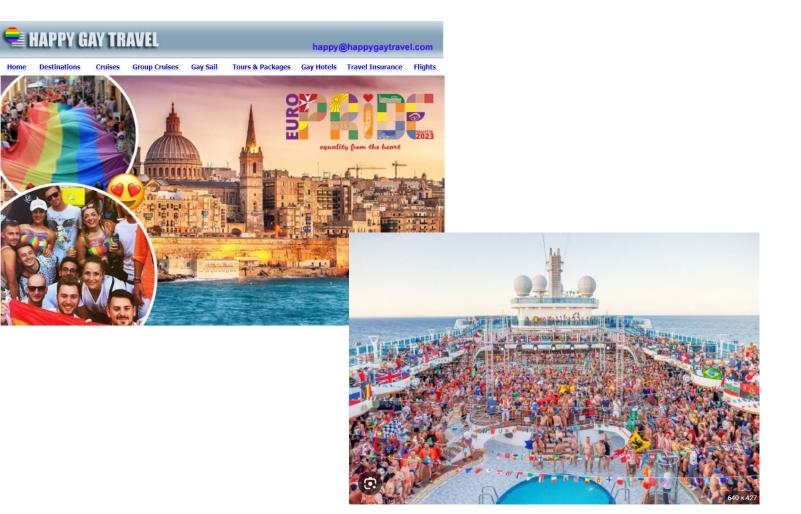
More likely to be on apps / HIV+: May not be representative of all MSM

Numbers of non-steady male sexual partners in last 12 months (men who had ever	Non-steady male partners (N=122 660, missing n=1 802)	
had sex with a man)	%	Cumulative %
None	23.3	23.3
1	8.3	31.6
2	8.9	40.5
3	8.0	48.5
4	5.8	54.3
5	6.2	60.4
6	3.9	64.3
7	2.2	66.5
8	2.3	68.8
9	0.7	69.6
10 or more	5.3	74.8
11-20	11.9	86.8
21-30	5.2	92.0
31-40	2.3	94.3
41-50	1.4	95.7
More than 50	4.3	100.0
TOTAL	100.0	-

Sexual networks / international spread







Shigella





ECDC NORMAL

Civil society

LGBTIQ+ Support Organisations

Health and Welfare



Queensland Council for LGBTI Health
Sexual Health
Trans Health & Many Genders, One Voice

Mental Health
 Alcohol & Other Drugs
 LGBT Seniors
 LGBT Seniors
 2 Spirits (Promoting Aboriginal & Torres Strait Islander Communities
 Training Facilitation



Diverse Voices Diverse Voice is a Queeniated based non-profit organisation with a focus on the wellbeing of the diverse voices that make up our community, There focus in one the operation of a peer-to-peer testephone and internet counseling service. They operate in collaboration with our national partners QLB and the <u>Mariod LGB1 Health Alling</u>: To contact the Neuron Voices QLB endition call 1000 144 527. This service operates between 30m and Midneth 365 days. For administrative and



Gloucestershire County Council

LGBT foundation

WE'RE HERE IF YOU NEED US 0345 3 30 30 30 lgbt.foundation







Who takes care of it?





We need both skillsets



FWD





ogen

Nomenclature

Routes of transmission

Incubation

Duration of infectiousness

Persistence in the environment

Treatment

Species / serotypes

AMR issues









The population

MSM population Sexual risk behaviours Venues Terminology Stigma Connections with civil society How to communicate

Outputs so far



Feb 2022 – rapid risk assessment



23 February 202

Summary 2022 the United Biodom Health Scorth Agency (UKHS4) reported in Increase in extension from 27 manay 2022, the United Biodom Health Scorth Agency (UKHS4) reported in Increase in extension from creaters Agency and Spann Hear reported cases of alignment with sampling dates from 2020 to 2022 and with the analysis of the same protection of alignment with sampling dates from 2020 to 2022 and with memory and Spann Hear reported cases of alignment with sampling dates from 2020 to 2022 and with the same protection of t

https://www.ecdc.europa.eu/en/publ ications-data/rapid-risk-assessmentincrease-extensively-drug-resistantshigella-sonnei

July 2023 – Epi update

Spread of multidrug-resistant Shigella in EU/EEA among gay, bisexual and other men who have sex with men

TEGERINIOSopial Lipolato 13 Jul 2023 Translate this page Translate this page

Since April 2023, over 300 shigellosis cases, many with multidrug-resistant Shigella sonnei infections, have been reported to the European Centre for Disease Prevention and Control (ECDC).

The cases are linked to seven national and international distinct microbiological clusters, with chains of transmission largely, but not exclusively, among ags, bisexual and other men who have sex with men (gMSM). Cases have been reported in Belgium (26), Denmark (13), Germany (33), Ireland (50), the Netherlands (21), Spain (> 60), and the United States (106), Most cases have been recorded during the period 2022-2023, bis one date back to 2016.

An increase in extensively drug-resistant Shigella sonnei infections among gbMSM was already noted during the period 2020-2022 (ace ECDC's Rapid Risk Assessment dated 23 February 2022).

All strains in these seven clusters show resistance to first and second-line antibiotics, such as third-generation

Spread of multidrug-resistant Shigella in EU/EEA among gay, bisexual and other men who have sex with men (europa.eu)

December 2023 – CDTR



7. Cluster of extensively drug resistant Shigella Sonnei among men who have sex with men - multi-country (EU/EEA and the UK) - 2023

Overview

In December 2023, the UK notified ECDC of an extensively drug resistant cluster of 97 cases of *Shigelia* sonner: which has been occurring during 2023, identified using whole genome sequencing, involving mostly (90%) adult males. Cases are distributed across all regions of England and reports increased in frequency from May 2023. An additional four cases occurred as single cases during 2022. The outbreak strain is extensively drug-resistant with non-susceptibility to pencillins, thrit-generation ceptalogorins (CTM+15), aminoglycoside, tetracycline,

Communicable disease threats report, 17-23 December 2023, week 51

April 2024 – CDTR



4. Cases of Shigella infections in five EU countries related to the Darklands festival in Belgium, with strains resistant to many commonly used antimicrobial agents

ECDC NORMAL

Weekly Communicable Disease Threats Report, Week 15, 7-13 April 2024

Overview

On 9 April 2024, Belgium reported to ECDC an increase in extensively drug-resistant (XDR) Shigella sonnei infections with a total of 31 cases since January 2024. Of these cases, 27 are male and one

ECDC weekly CDTR Week 15, 7–13 April 2024

Protect your health this summer: ECDC urges vigilance against rising STI cases





3 Jun 2024





Due to the concerning rise in sexually transmitted infection (STIs) transmission across Europe, the European Centre for Disease Prevention and Control (ECDC) is urging everyone to keep informed and practice safer sex as they leave for holidays, festivals, and travel this summer season.

ECDC also reports that some infections that cause severe diarrhoea – such as Shigella and Hepatitis A, also spread among men who have sex with men. To prevent these, use disposable gloves for fingering or fisting, dental dams during oral-anal sex, as well as changing condoms between anal and oral sex. It is recommended that people do not share sex toys and ensure proper cleaning and disinfection after their use, and between partners. It is also important to wash hands, genital and anal areas before and after sexual contact. If experiencing diarrhoea, it is important to avoid sexual activity and seek health care.



Discussion

Discussion



How concerned are we about

- the MDR/XDR aspect and risk for spread into general community?
- the severity of these infections?
- the sexual health aspects of these diseases?





How do we want to react/communicate across the networks about these MDR/XDR *Shigella* clusters/cases? Is the information provided in EpiPulse adequate for you to take action?

Any additional actions from ECDC to facilitate collaboration across networks/countries on the MDR/XDR *Shigella* issue and other "enteric" STIs?



Thank you for today!



Our recommendations (if we have time)

What we advise - prevention



- Disposable gloves for fingering or fisting
- Dental dams during oral-anal sex
- Changing condoms between anal and oral sex
- Not share sex toys
- Ensure proper cleaning and disinfection after use of sex toys and between partners
- Wash hands, genital and anal areas before and after sexual contact

What we advise – if symptoms



If a person develops gastrointestinal symptoms:

- Refrain from sexual activity, pay extra attention to personal hygiene and seek healthcare
- Inform the physician that the infection may have been acquired through sexual activity.
- Not handle or prepare food in catering establishments, avoid using public pools, spas and hot tubs

If diagnosed:

- Avoid sexual activity for at least seven days after symptoms have completely disappeared
- Avoid oral-anal contact during sex for four to six weeks
- Sexual partners of patients diagnosed with shigellosis should be notified

What we advise – for clinicians



- Increase awareness among clinicians and microbiology laboratories
- Ensure antimicrobial susceptibility testing of *Shigella* for cases of gastroenteritis in gbMSM
- Physicians should be aware that among young adult males the route of acquisition can be sexual (especially among those without travel history to a country with known increased risk of shigellosis).
- Report shigellosis cases to public health authorities and send *Shigella* isolates to national reference laboratories