

**STD Case Counts**

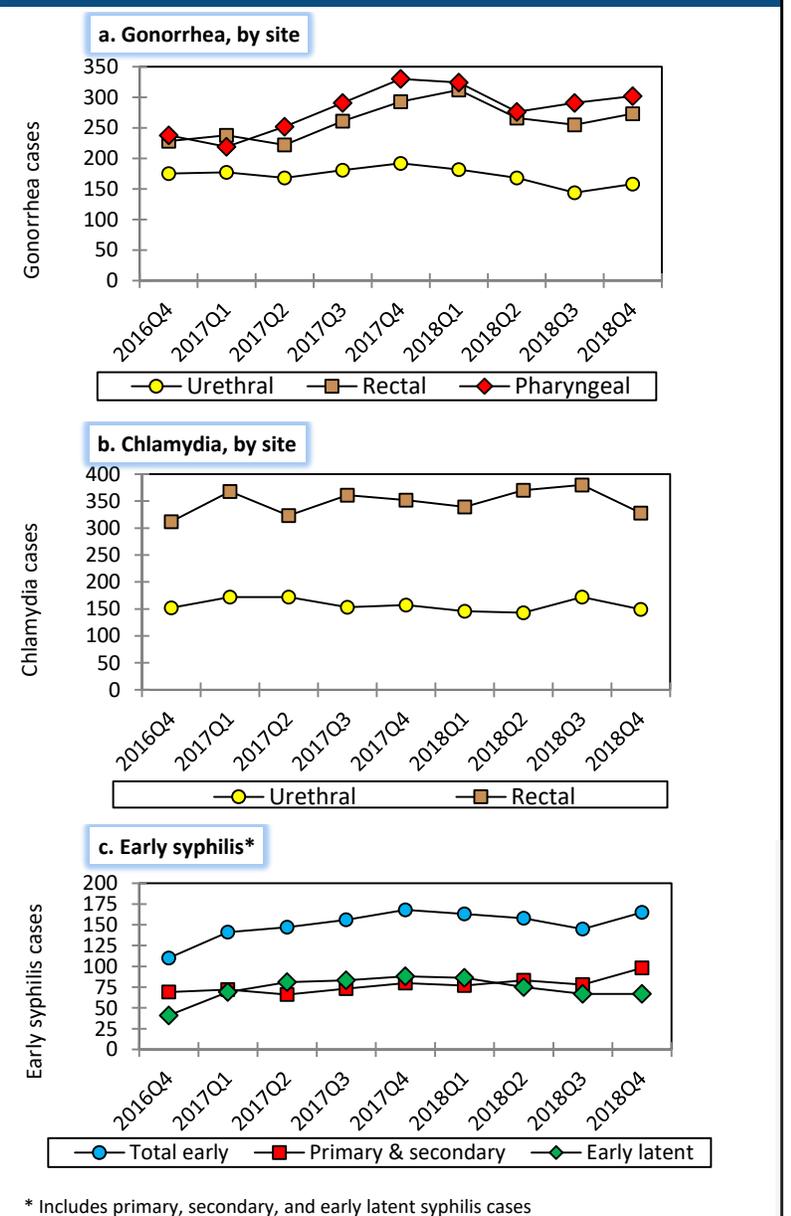
Table 1: King County STD morbidity				
	2017		2018	
	2017Q4	YTD	2018Q4	YTD
<b>Gonorrhea (GC)*</b>	1170	4182	1133	4438
GC: MSM	626	2206	575	2321
Urethral GC	192	718	158	652
Rectal GC	293	1014	273	1106
Pharyngeal GC	330	1092	302	1193
GC: Women^	246	948	246	953
GC: MSW^	194	701	201	732
GC: Transgender	6	32	8	35
<b>Chlamydia (CT)*</b>	2438	9801	2655	10479
CT: MSM	504	2106	485	2051
Urethral CT	157	654	149	610
Rectal CT	352	1404	328	1417
CT: Women^	1265	5226	1345	5219
CT: MSW^	410	1640	342	1387
CT: Transgender	7	33	10	39
<b>Total Syphilis (all stages)*</b>	227	877	241	922
Primary and secondary	89	324	109	399
Early latent	92	340	79	334
Late + unk duration	46	213	53	189
Early syphilis: MSM	168	612	165	631
Early syphilis: Women	2	7	8	29
Early syphilis: MSW	5	19	7	36
Early syphilis: Transgender	0	0	2	8
Congenital syphilis	0	0	0	0

Table 2: King County newly diagnosed HIV cases*				
	2017		2018	
	2017Q3	YTD	2018Q3	YTD
<b>Total†</b>	60	162	71	222
MSM	38	100	33	111
Women	14	37	24	63
MSW	3	8	2	8
Transgender‡	1	1	1	1

\* Data shown for prior quarter due to reporting delay.  
 † Column may not equal total due to missing sexual preference data.  
 ‡ Transgender identity relies on review of information documented in medical records and obtained through Partner Services Interviews. Data presented here are a potential undercount.

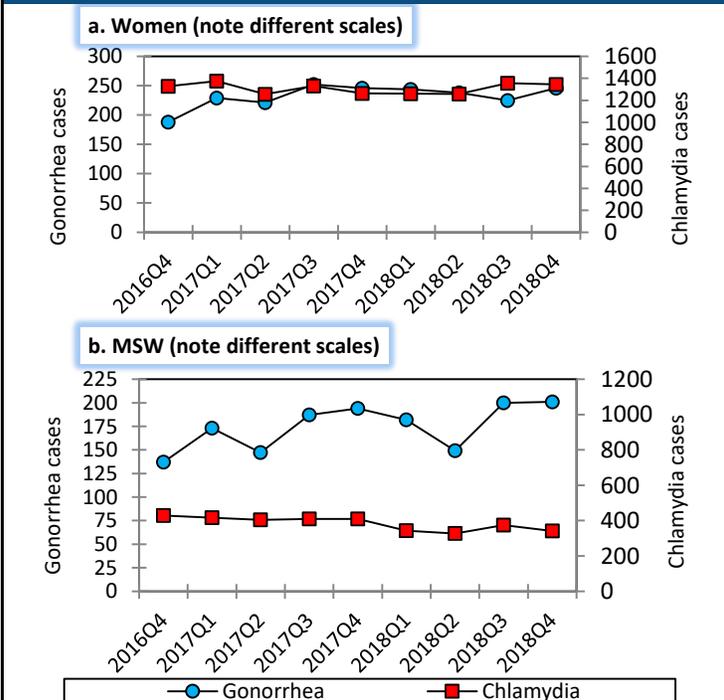
**Trends in STD Morbidity**

**Figure 2: Quarterly King County STD morbidity among MSM**

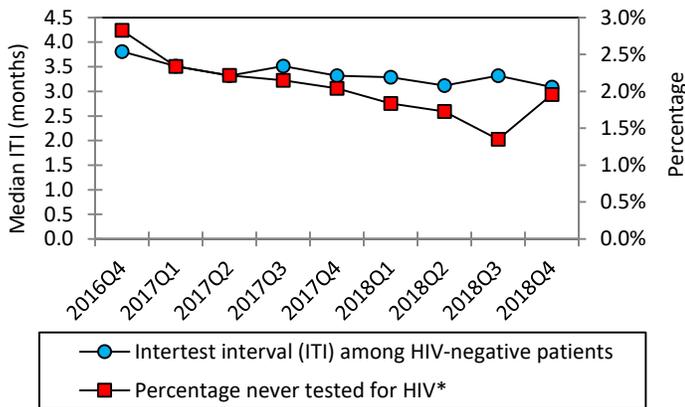


**Trends in STD Morbidity**

**Figure 1: Quarterly King County STD morbidity, women and MSW**



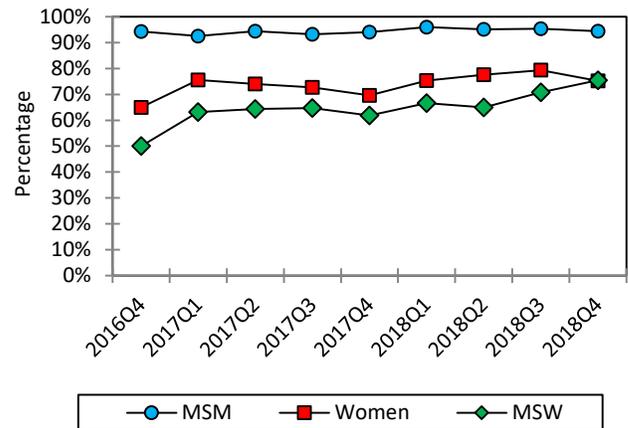
**Figure 3: HIV testing among PHSKC STD Clinic patients, MSM (note different scales)**



\* Denominator includes patients who reported never testing or negative/unknown results

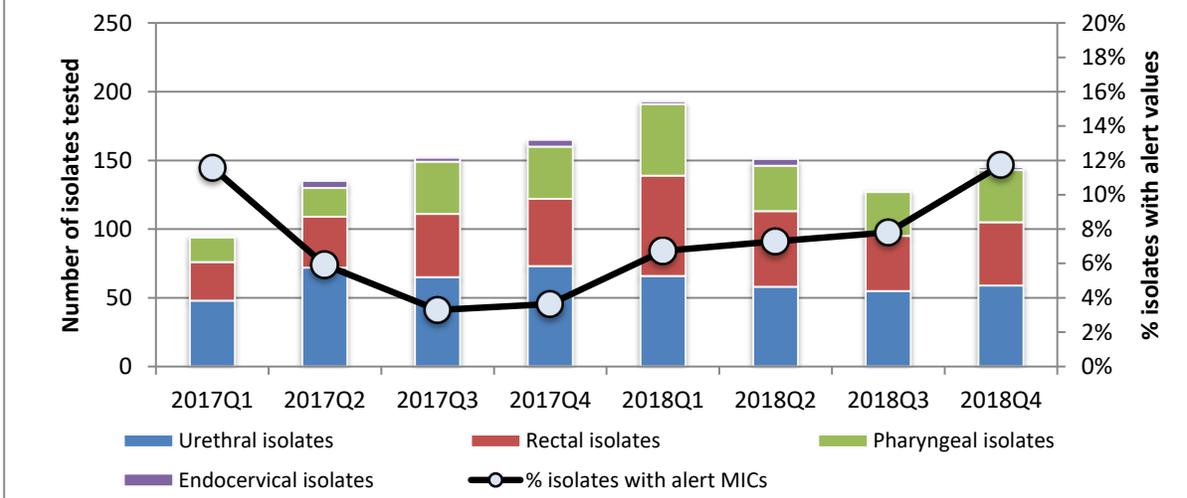
HIV testing should be performed annually on low-risk MSM and quarterly on high-risk MSM<sup>a</sup>.

**Figure 4: Percentage of King County residents with a bacterial STD tested for HIV (excludes HIV+ residents)**



Anyone diagnosed with a bacterial STD should be tested for HIV.

**Figure 5: Percentage of SURRG<sup>b</sup> isolates with alert values for cephalosporins or azithromycin (note scales)**



Alert value = Minimum Inhibitory Concentration (MIC, lowest antibiotic concentration needed to halt bacterial growth) is higher than preset thresholds<sup>c</sup>. Alert value MICs represent decreased susceptibility to an antibiotic but may not represent resistance.

**Footnotes and Abbreviations:**

MSM = Men who have sex with men  
 MSW = Men who have sex with women  
<sup>a</sup>High-risk = MSM with any one of the following in the prior year: diagnosis of a bacterial STD, methamphetamine or popper use, ≥10 sex partners (anal or oral), or unprotected anal sex with a partner of unknown or discordant HIV status  
 Low-risk = sexually active MSM who do not meet high-risk criteria  
<sup>b</sup>Strengthening the U.S. Response to Resistant Gonorrhea Surveillance (SURRG), source of antibiotic susceptibility data, is supported by the Centers for Disease Control and Prevention  
<sup>c</sup>Alert values:  
 Ceftriaxone MIC ≥ 0.125 µg/ml  
 Cefixime MIC ≥ 0.25 µg/ml  
 Azithromycin MIC ≥ 2.0 µg/ml

**Table 3: SURRG isolates with alert values for cephalosporins (ceph) or azithromycin (azi)**

	2018Q4		YTD	
<b>Unique cases tested*</b>	130		553	
MSM	103		448	
MSW	19		74	
Women	5		20	
Transgender	1		6	
<b>Alert cases and % of cases with alert MICs</b>	<b>Azi</b>	<b>Ceph</b>	<b>Azi</b>	<b>Ceph</b>
	<b>N (%)</b>	<b>N (%)</b>	<b>N (%)</b>	<b>N (%)</b>
<b>Unique alert cases*</b>	13 (10)	1 (1)	41 (7)	4 (1)
MSM	13 (13)	1 (1)	40 (9)	3 (1)
MSW	0 (0)	0 (0)	0 (0)	1 (1)
Women	0 (0)	0 (0)	1 (5)	0 (0)
Transgender	0 (0)	0 (0)	0 (0)	0 (0)

\* Column may not equal total due to missing sexual preference data