Prevalence of *Chlamydia trachomatis* serovars L_1 - L_3 (Lymphogranuloma venereum) in a high-risk patient collective in Germany

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Introduction and purpose

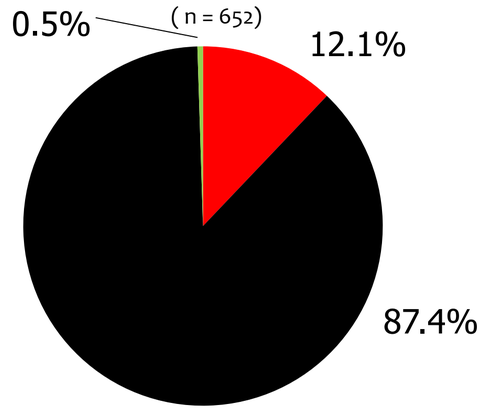
- **Lymphogranuloma venereum** (LGV) is a sexually transmitted disease that affects mostly homosexual men. LGV is endemic in parts of the tropic. Since 2003 **outbreaks in industrialized countries** have been reported [1, 2, 3].
- Early diagnosis and treatment prevent severe and irreversible damage to tissues.
- Infections caused by serovars L_1-L_3 require prolonged antibiotic treatment for 3 weeks.
- The global epidemiological situation for the prevalence of LGV in Germany still remains unclear since no commercial assays exist for the detection of serovars L_1-L_3. This leaves microbiological diagnosis in the hands of a few specialised laboratories and makes the collection of more extensive data difficult.

Methods

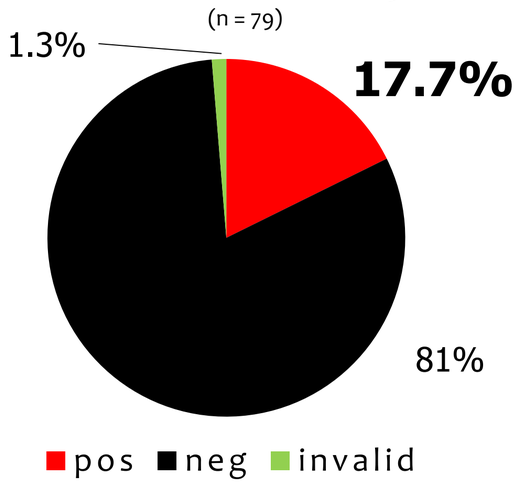
- 652 urogenital/ anal swabs from 365 male patients (HIV polyclinic, University hospital Essen), age: 17-78 years (mdn = 39 years)
- All samples were tested for the presence of *Chlamydia trachomatis* (GeneXpert, Cepheid).
- Extracted DNA from positive samples was tested in a second realtime PCR targeting serovars L_1-L_3 only [1].

Results

C. trachomatis



Serovars L_1 – L_3



Conclusion

Based on a **positive rate of 17.7%** at our clinic we would like to encourage more clinics to establish molecular assays on-site for the detection of *C. trachomatis* serovars L_1-L_3 in order to start early and accurate treatment of LGV.

The data we present here are in agreement with previously published data [4].

Literature:
[1] Morre´ SA et al: Emerg Infect Dis 2005; 11: 1311-12
[2] Robert Koch Institut: HIV&more 2/207
[3] Ceovic R et al: Infect Drug Resist 2015; 8: 39-47
[4] Haar K et al: Emerg Infect Dis 2013; 19: 488-92

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