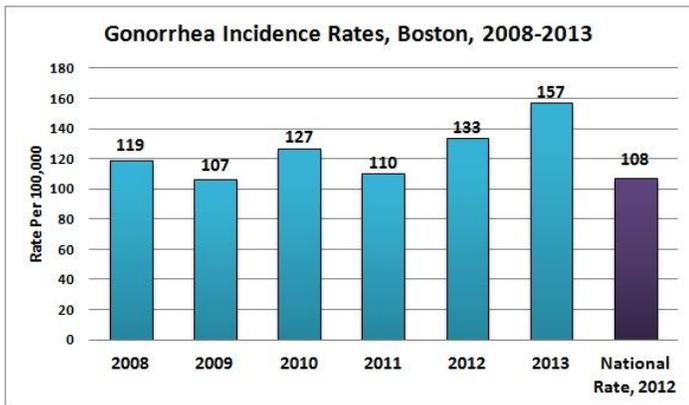
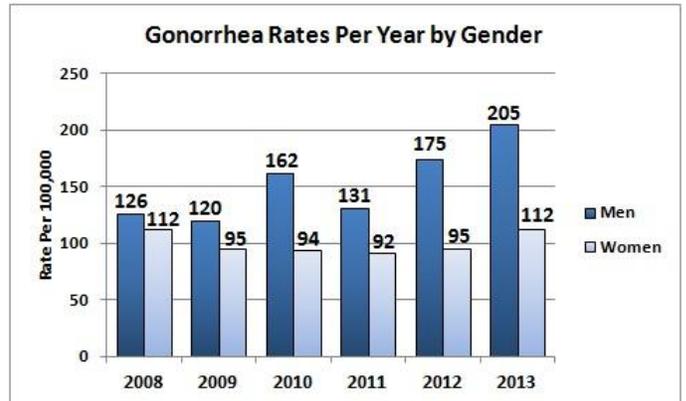


# STIs in Boston: Gonorrhea Brief **2013**

Gonorrhea is the second most commonly reported sexually transmitted infection (STI) and one of the top five most commonly reported communicable diseases in Boston. There were over 300,000 cases of gonorrhea reported in the US in 2012 (Centers for Disease Control & Prevention, CDC).



Due to the high proportion of cases with unknown race/ethnicity (19% of all gonorrhea cases in 2013), analyses using race/ethnicity data should be interpreted with caution. For this analysis, Latino ethnicity is considered alongside Asian, Black, and White racial groups. In 2013, Black residents had the highest incidence rate with 282 cases per 100,000. This rate was 5 times as high as that of White residents. Latino residents had a rate 2 times as high as that of White residents.

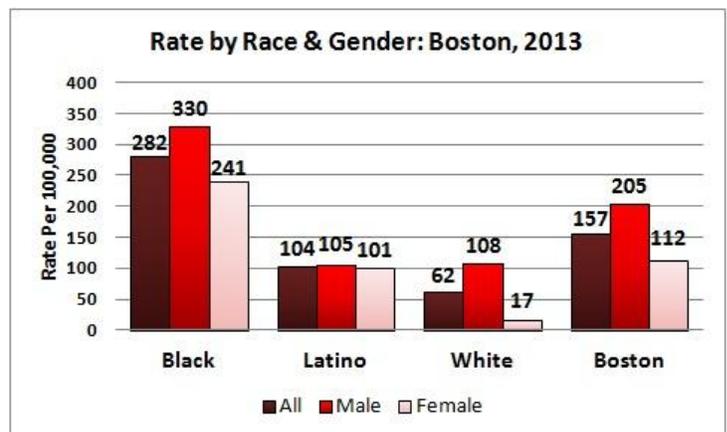
### Boston Epidemiology\*:

In 2013, there were 969 cases of gonorrhea reported in Boston (157 cases per 100,000). This marks an 18% increase since 2012, and an overall 42% increase since 2011. The citywide rate was 1.5 times as high as the most recent national rate (107.5 per 100,000 in 2012, the most recent CDC data available).

### High Risk Groups:

Rates were particularly high in men of color ages 20 to 29 living in Mattapan, North Dorchester, South Dorchester, Roxbury, and the South End.

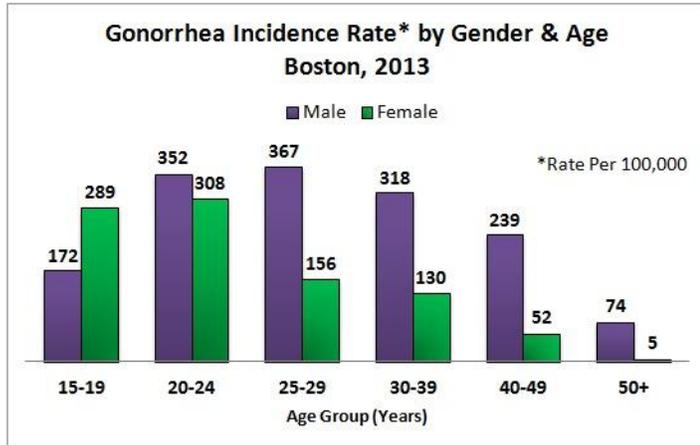
Men accounted for 63% of reported gonorrhea cases in Boston. Though men account for 48% of the Boston population, they have comprised the majority of gonorrhea cases since 2008. Rates have also increased faster in men than women (57% vs. 22% since 2011).



Gonorrhea rates were highest in residents 20-29 years old, with nearly 50% of all cases occurring in this age group (297 cases per 100,000). Rates increased by 32% in 15-19 year

\*Data for 2008-2012 are available on the BPHC website at <http://bphc.org/healthdata/other-reports/Pages/Other-Reports.aspx>

olds, more than any other age group. The median age at diagnosis for men was 6 years older than the median age for women (29 vs. 23, respectively).



Disparities by race were more pronounced in this age group; the rates in Black and Latino residents were 12 and 5 times that of White residents in this age group, respectively.

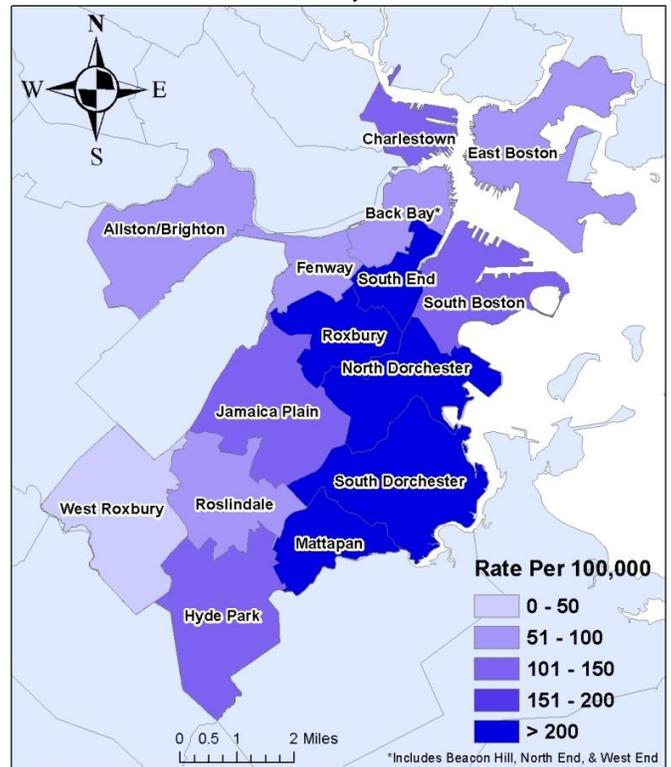
The incidence rate was highest in Mattapan (321 cases per 100,000), a 67% increase in this neighborhood since 2012. North Dorchester, South Dorchester, Roxbury, and the South End all had rates higher than 200 cases per 100,000. Similar distribution was noted in 20-29 year olds. Note the difference in scale in Maps 1 & 2.

In 2013, 26% of all people diagnosed with gonorrhea were also diagnosed with chlamydia at some point during the year. Most were men (57%), and 55% were Black residents. The majority of cases occurred in North Dorchester, South Dorchester, and Mattapan, and 54% were 20-29 years old.

Future Directions:

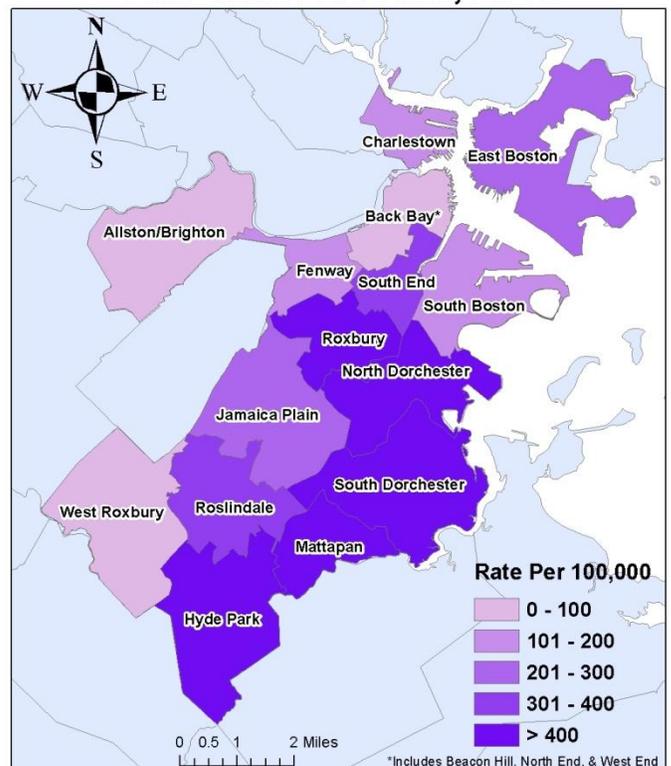
While the rate of chlamydia infection in Boston is 4.5 times as high as the rate of gonorrhea, the increase in gonorrhea cases is of particular

### Gonorrhea Rates by Neighborhood Boston, 2013



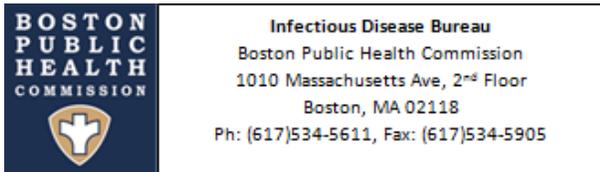
Map 1

### Gonorrhea Rates in 20-29 Year Olds: Boston, 2013



Map 2

concern in light of the rise in antibiotic resistant gonorrhea nationwide. Differences in demographic data demonstrate that populations at high risk for gonorrhea are not necessarily the same populations at high risk for chlamydia, indicating that outreach methods need to vary. Early detection and treatment of gonorrhea cases and their partners as well as initiatives to promote safer sex are important to decrease the number of gonorrhea cases.



Data:

Data for this report were collected by the Massachusetts Department of Public Health, and were cleaned and analyzed by BPHC. Regulations passed in spring of 2013 require that chlamydia, gonorrhea, and syphilis are reported directly to BPHC.

Additional information about gonorrhea in Boston can be obtained by emailing [infectiousdisease@bphc.org](mailto:infectiousdisease@bphc.org) or by calling the BPHC Infectious Disease Bureau at (617) 534-5611. Please note that data limitations and confidentiality issues may preclude BPHC from fulfilling certain requests.