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*Ensuring the health of
LGBT individuals and
communities through the
support of scholarship
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LGBT HEART HEALTH ALERT

MULTI-DRUG RESISTANT STAPH INFECTION FOUND IN SAN FRANCISCO AND BOSTON GAY COMMUNITIES

January 15, 2008 – A new and highly drug-resistant strain of the bacteria known as MRSA has been discovered with alarming frequency among gay men in San Francisco and Boston according to a research study released yesterday.

The study, published in the *Annals of Internal Medicine*, indicated that the new MRSA strain, known as pUSA03, has spread rapidly among men who have sex with men in San Francisco and Boston. According to the study, the bacterium appears to have spread through anal intercourse as well as casual skin-to-skin contact and by touching contaminated sources. The study also noted that infections were seen in patients independent of their HIV status.

“The identification of a new and more virulent strain of MRSA that appears to spread by sexual contact is an alarming new development,” said Manuel Hernandez, MD, MBA, President of LGBT HEART. “The seriousness of this bacterial infections signals the need for our community to be ever-vigilant with regard to our health.”

Once confined mainly to hospitals, MRSA, short for methicillin-resistant *Staphylococcus aureus*, has gained greater notoriety as otherwise healthy individuals have become acquired the bacteria outside of the hospital setting.

MRSA infections can range from localized skin infections, abscesses and ulcers, to the life-threatening condition known as necrotizing fasciitis, more commonly referred to as the flesh-eating bacteria. MRSA has also been known to cause pneumonia and systemic blood infections, among other difficult-to-treat infections.

According to Dr. Hernandez, there are steps that can be taken to help minimize the risk of contracting the multi-drug resistant MRSA strain.

“The San Francisco study suggested that washing with soap and water after sexual intercourse may help reduce the risk of transmission. We know from past experiences with other MRSA strains that liberal use of soap and water can significantly reduce the risk of transmission,” said Dr. Hernandez.

The treatment for multi-drug resistant MRSA varies and depends on the severity of the infection, the patient’s baseline health status and the results of bacterial cultures showing which antibiotics are an effective treatment option. In the case of pUSA03, the MRSA strain spreading through the gay male community, only one antibiotic commonly used to treat MRSA appears to be effective. That antibiotic, known as trimethoprim-sulfamethoxazole (Bactrim®), can be used in oral or intravenous preparations. Other, less commonly used antibiotics also show effectiveness against the virulent strain.

“Any patient who has the warning signs of a potential skin infection of abscess should seek immediate medical attention,” stated Dr.Hernandez. “Early detection and treatment, in addition to intimate partner notification is critical to help minimize the effects of a multi-drug resistant MRSA infection.”

MRSA AT A GLANCE

What is it?: MRSA, short for methicillin-resistant Staphylococcus aureus is a bacterial infection.

How do you get it?: Transmission of MRSA occurs through direct contact with the bacteria. This can occur through skin-to-skin contact, such as during intimate or sexual contact, or by direct contact with any surface contaminated with the bacteria.

Some individuals are “carriers” of the bacteria, meaning they have the bacteria in their nasal passages or on their body but they have not developed an infection.

What are the symptoms?: The symptoms of a MRSA infection vary and depend on the type of infection that occurs. Skin infections commonly present as an area of redness that can be tender and/or warm to the touch. An abscess, or boil, can also be seen at the site of infection. MRSA that has spread throughout the body can cause fever, fatigue, nausea, vomiting, lethargy and many other symptoms of systemic illness.

When should I seek medical care?: MRSA is a serious infection that requires immediate medical treatment. If you suspect you have a skin or systemic infection, you should seek medical care immediately.

What is the treatment?: The treatment for a MRSA infection depends on the severity of the illness, the location of the illness, your baseline health status and the results of bacterial cultures.

Skin abscesses (boils) should be evaluated immediately by a physician for likely drainage and culture. Some patients can be treated simply with oral antibiotics while more severe cases of MRSA may require hospitalization and administration of intravenous antibiotics. Patients who are HIV-positive or have other conditions that may impact their immune system should make their healthcare provider aware of this before treatment is initiated.

Carriers of the MRSA bacteria can be treated based on guidance from a physician. However, the recent study that has identified this new pUSA03 strain of MRSA has suggested that standard treatments for carriers might not be effective. Consultation with a physician is recommended for anyone suspected of being a carrier of the pUSA03 strain of MRSA.