Increasing Reports of Disseminated Gonococcal Infections (DGI) in California

California has recently experienced increases in reports of disseminated gonococcal infection (DGI), a severe complication of untreated gonorrhea.

- DGI occurs when gonorrhea invades the bloodstream and spreads to distant sites in the body, leading to clinical manifestations such as septic arthritis, polyarthritis, tenosynovitis, petchial/pustular skin lesions, bacteremia, or, on rare occasions, endocarditis or meningitis.
- If there is clinical suspicion for DGI, nucleic acid amplification test (NAAT) and culture specimens from urogenital and extragenital (e.g., pharyngeal and rectal) mucosal sites, as applicable, should be collected and processed, in addition to NAAT and culture specimens from disseminated sites of infection (e.g., skin, synovial fluid, blood, cerebrospinal fluid).
- DGI should be reported to SFDPH on a confidential morbidity form. If the patient has a positive gonococcal culture from a sterile site, SFDPH will arrange for shipment of an isolate to CDC for whole genome sequencing.
- Management of DGI cases should be guided by the CDC STD Treatment Guidelines. Hospitalization and consultation with an infectious disease specialist when available are recommended for initial therapy. Providers can call the SF City Clinical team for clinical consultation at 415-487-5595.

Screening for HIV and other STIs has declined sharply during the COVID-19 pandemic. Screening patients at risk for HIV and STIs, and promptly administering effective treatment can prevent complications and reduce transmission. **SEC**