

We described the reported samples by sex and age and characterised isolates tested in NRL by resistance patterns. We calculated proportions and medians, together with interquartile range (IQR), where appropriate.

Results Between April and December 2014 we received information on 651 isolates tested in 19 laboratories. Altogether, 90.3% isolates were from men and 8.5% from women. Median age of tested men was 36 (IQR 29–49) and women 28 (IQR 22–41) years.

NRL received 502 isolates, 342 were vital and 253 were tested for AMR. From those 0 were resistant towards ceftriaxone, 1.6% towards cefixime, 11.1% towards azithromycin, 73.1% towards ciprofloxacin, and 30.4% towards penicillin. Further 37.9% and 50.6% isolates were intermediate susceptible to Azithromycin and to Penicillin. From 205 isolates tested for beta-lactamase, 25.9% were positive.

Conclusion In Germany isolates tested for NG-AMR were mostly from men. We assume that a substantial proportion of these isolates could be from men having sex with men. NG-AMR to ceftriaxone and cefixime remains low, while resistance and intermediate susceptibility to azithromycin, ciprofloxacin and penicillin is substantial. Monitoring of NG-AMR should be highly prioritised.

Disclosure of interest statement The GORENET Project is funded by German Federal Ministry of Health. No conflicts of interest.

P05.11 ANTIMICROBIAL SUSCEPTIBILITY OF *NEISSERIA GONORRHOEAE* STRAINS FROM MALE URETHRITIS IN JAPAN: SURVEILLANCE AT 2012–2013

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Introduction *Neisseria gonorrhoeae* is one of the most important pathogens causing sexually transmitted infection. Resistant *N. gonorrhoeae* strains against several antimicrobials are increasing worldwide. In this study, the trends of antimicrobial susceptibilities among *N. gonorrhoeae* strains isolated from male patients with urethritis were investigated as the second Japanese national surveillance, which was conducted by a Japanese surveillance committee.

Methods The targets were male patients older than 16 years with urethral discharge and symptoms of urethritis. Urethral discharge was collected from patients at 26 medical facilities from March 2012 to January 2013 and the antimicrobial susceptibility of strains were tested.

Results From 151 patients (median age 32 years), 103 *N. gonorrhoeae* strains were tested for susceptibility to 20 antimicrobial agents. None was susceptible to penicillin G (MIC: ≤ 0.06 µg/mL). The prevalence of penicillinase producing *N. gonorrhoeae* or chromosomally mediated resistant *N. gonorrhoeae* was 1.9% or 20.8%, respectively. The susceptible rate for fluoroquinolone such as ciprofloxacin or levofloxacin was 20.3%. The susceptible rate for cefixime was 89.3%, that decreased from 98.8% at 2009. No ceftriaxone-resistant strains founded. The prevalence

of less susceptible strain to ceftriaxone (MIC: 0.125 µg/mL) was 10.7%. No azithromycin high-resistant strain found and 5 strains (4.9%) had MIC ≥ 0.5 µg/mL. Among all strains, 83 strains (80.6%) were resistant to more than 2 kinds of antimicrobials and 42 strains (40.1%) was included to the criteria as multi-drug resistant *N. gonorrhoeae*.

Conclusion The antimicrobial susceptibility of *N. gonorrhoeae* was not different between 2009 and 2012–2013, in Japan.

Disclosure of interest statement Nothing to declare.

P05.12 ANALYSIS OF BACTERIAL FLORA OF THE URINE SPECIMENS FROM MALE PATIENTS WITH URETHRITIS BY THE CLONE LIBRARY METHOD BASED ON THE 16S RRNA GENE

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Introduction *Chlamydia trachomatis*, *Mycoplasma genitalium* or *Trichomonas vaginalis* are the pathogens for non-gonococcal urethritis, but pathogenicity of other microorganisms for the male urethral has not be confirmed. In this study, the bacterial flora of urine specimens from male patients with urethritis was analysed by the clone library method based on the 16S rRNA gene.

Methods The first voided urine specimens of male patients with urethritis were collected. The detection of *Neisseria gonorrhoeae*, *C. trachomatis* were examined by transcriptional mediated amplification (TMA) method and *M. genitalium*, *Ureaplasma urealyticum*, *Ureaplasma parvum* and *Mycoplasma hominis* were examined by real-time PCR method. The urine specimens were strained by Ethidium bromide and the number of bacterial cells were counted. DNA was extracted from the urine and amplification of the 16S rRNA gene via PCR (universal primers) and determination of the nucleotide sequences of 96 colonies were performed. The homology search was performed with a basic local alignment search tool (BLAST) using in-house software system and phylotypes of bacteria in each specimens were analysed. **Results** Urine specimens were collected from 58 patients and the divided to 4 group; gonococcal urethritis (n:9), chlamydial urethritis (n:12), non-chlamydial non gonococcal urethritis detecting with *Ureaplasmas* or *Mycoplasmas* (UM+NCNGU, n:15) and non-chlamydial non gonococcal urethritis detecting without *Ureaplasmas* or *Mycoplasmas* (UM-NCNGU, n:22). Cell numbers were higher in UM+NCNGU than in UM-NCNGU. Among specimens, 2427 clones in 38 bacterial flora could be analysed and 91 bacterial phylotypes were detected together with *N. gonorrhoeae*, *C. trachomatis*, *Mycoplasmas* or *Ureaplasmas* positive specimens among chlamydial urethritis or UM+NCNGU groups. *Gardnerella vaginalis* was detected with *Mycoplasma/Ureaplasma* in Chlamydial urethritis or UM+NCNGU.

Conclusion The clone library method by using 16S rRNA gene is the new technology for analysis the bacterial flora of urine with urethritis. The relationship between *G. vaginalis* and *Ureaplasma/Mycoplasma* was found by this analysis.

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