Sensitivity of gonococci to antibiotics in strains isolated from ‘prostitutes’ in Copenhagen

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The present investigation was performed in order to ascertain whether there is any difference in the sensitivity to antibiotics of gonococci isolated from ‘prostitutes’ in Copenhagen as compared with that of strains isolated from control cases. Since prostitution in Denmark was prohibited by law in 1906, it is necessary to mention that by ‘prostitutes’ is meant females without legal employment who have been taken into custody by the police.

Material

In the Neisseria Department, Statens Seruminstitut, a case of gonorrhoea in a known patient is registered as a new case if there has been an interval of 3 weeks since the last positive culture of gonococci was obtained. The results of the first sensitivity determination from 269 cases in 209 patients* diagnosed during 1966, 1967, and 1968 form the ‘prostitutes’ series.

All the strains of gonococci on which sensitivity determination was performed in the Neisseria Department, Statens Seruminstitut, Copenhagen, during the same years were used as a control series. These comprised about 3,000 to 4,000 strains per year.

Methods

The two series were studied for each of the three years separately, because the percentage of strains that are less sensitive to penicillin among those sent in with a request for sensitivity determination has been decreasing during recent years.

Fig. 1 (kindly supplied by Dr. Alice Reyn) shows that since 1962 the proportions of strains with decreased sensitivity to penicillin have fallen from 57 to 30 per cent.

Sensitivity determination is performed in the Neisseria Department only on request, and the examination for sensitivity to penicillin, tetracycline, and streptomycin is usually carried out by means of a plate-dilution method.

Penicillin

Five concentrations are used in the nutrient plates, which contain from 0·0024 to 0·60 μg. sodium peni-

Tetracycline

Three plates are used containing from 0·20 to 3·2 μg. tetracycline per ml.

The growth of gonococci on the various plates is compared with that on control plates without antibiotic. The reading of the results is graded as 0, 1, 2, 3, and 4 degrees of growth. Degree 4 means full growth like that observed on the control plate, and the other figures correspond to lesser degrees of growth. Degree 2 is designated 50 per cent., and the results are stated in terms of the 50 per cent. inhibitory concentrations, or IC50.

If IC50 is ≥ 0·005 μg. penicillin per ml., the strains are considered as being less sensitive to penicillin.

The corresponding value for tetracycline is ≥ 1·13 μg. per ml. The minimum inhibitory concentration (MIC) would be about twice as high.

Streptomycin

Only one plate containing 25 μg. per ml. is used, and growth of gonococci on this plate means complete resistance to streptomycin.
Results
In Table I the ‘prostitutes’ (P) are compared with the controls (S), showing the percentage of strains less sensitive to penicillin and tetracycline and that resistant to streptomycin.

Penicillin
The immediate impression is that there is a tendency to a higher percentage in the P-strains, particularly in 1966, but the difference is not statistically significant.

Streptomycin
In 1966 the percentage of P-strains resistant to streptomycin is significantly higher than that of the S-strains. In 1967 and 1968 the percentages of P-strains are lower, but not significantly so.

Tetracycline
The percentages of S-strains and P-strains are almost the same. There were somewhat more P-strains in 1966 and slightly fewer in 1967 and 1968.

Although the overall percentage of strains with decreased sensitivity to penicillin is equal in the P- and S-strains, the distribution might be different on the basis of the individual IC₅₀ values observed. Fig. 2 (also from Dr. Reyn’s work) shows the percentage distribution of S-strains according to the IC₅₀ values for penicillin observed in 1963 and 1968, ranging from 0.0012 to > 1.40 µg./ml. The vertical dotted line indicates the limit between sensitive and less sensitive strains.

**Table I** Comparison of gonococcal strains isolated from ‘prostitutes’ in Copenhagen with strains sent in with request for sensitivity determination

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Penicillin (Per cent. less sensitivity)</th>
<th>Streptomycin (Per cent. resistant)</th>
<th>Tetracycline (Per cent. less sensitivity)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>S¹</td>
<td>P¹</td>
<td>S</td>
</tr>
<tr>
<td>1966</td>
<td>2,632</td>
<td>106</td>
<td>36.2</td>
<td>44.3</td>
</tr>
<tr>
<td>1967</td>
<td>3,447</td>
<td>95</td>
<td>32.5</td>
<td>35.8</td>
</tr>
<tr>
<td>1968</td>
<td>4,246</td>
<td>68</td>
<td>30.0</td>
<td>33.8</td>
</tr>
</tbody>
</table>

¹ Strains sent in with request for sensitivity determination.
² Strains isolated from ‘prostitutes’ in Copenhagen.
³ Significant deviation from control series (P = 0.02).

**Table II** Interrelation of antibiotic sensitivity of gonococcal strains in S and P strains, 1968

<table>
<thead>
<tr>
<th>Penicillin</th>
<th>Tetracycline</th>
<th>Streptomycin</th>
<th>Cases tested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sensitive</td>
<td>Sensitive</td>
<td>Sensitive</td>
<td>Number</td>
</tr>
<tr>
<td></td>
<td>Resistant</td>
<td>Resistant</td>
<td>S</td>
</tr>
<tr>
<td>Less sensitive</td>
<td>Resistant</td>
<td>Sensitive</td>
<td>2,942</td>
</tr>
<tr>
<td></td>
<td>Resistant</td>
<td>Resistant</td>
<td>31</td>
</tr>
<tr>
<td>Less sensitive</td>
<td>Resistant</td>
<td>Resistant</td>
<td>0</td>
</tr>
<tr>
<td>Less sensitive</td>
<td>Resistant</td>
<td>Resistant</td>
<td>411</td>
</tr>
<tr>
<td></td>
<td>Resistant</td>
<td>Resistant</td>
<td>430</td>
</tr>
<tr>
<td>Less sensitive</td>
<td>Resistant</td>
<td>Resistant</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Resistant</td>
<td>Resistant</td>
<td>402</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>4,246</td>
</tr>
</tbody>
</table>
sensitive strains. In each year there are two peaks at about 0·005 and 0·30 µg./ml. and a smaller peak at 0·075 µg./ml. In 1968 the percentage of sensitive strains has increased in relation to 1963, and a small peak has appeared at 1 µg./ml. In 1968 the percentage of strains less sensitive to penicillin was 30 as against 47 in 1963.

When the strains isolated from 'prostitutes' were analysed in the same way, and the distributions compared with those of the S-strains in the years 1966, 1967, and 1968, they were found to be almost identical.

It is usually found that decreased sensitivity of gonococci to penicillin is combined with resistance to streptomycin and decreased sensitivity to tetracycline. About two-thirds of strains with decreased sensitivity to penicillin are resistant to streptomycin, and of these about one-third are less sensitive to tetracycline. The two series of strains were divided into two groups according to their sensitivity to penicillin, then into four groups according to their sensitivity to tetracycline, and finally into eight groups according to their response to streptomycin. The results for 1968 (Table II) show that the sensitivity pattern is essentially the same for both the S- and P-strains.

**Summary**

A survey was conducted to determine whether strains of gonococci isolated from Danish 'prostitutes' in 1966, 1967, 1968, included a higher proportion less sensitive to antibiotics than did 'routine' strains sent to the Statens Seruminstitut with a request for sensitivity determination during the same year. Isolates were tested at the Neisseria Department, Statens Seruminstitut, against penicillin, tetracycline, and streptomycin by the plate-dilution method. It was found that percentages of strains less sensitive to penicillin, tetracycline and streptomycin did not differ significantly in the two groups; in 1966 the proportion of streptomycin-resistant gonococci was significantly higher in the prostitute group, but this isolated phenomenon is not considered to be important.

**Reference**


**La sensibilité aux antibiotiques des souches de gonocoques isolées chez les 'prostituées' à Copenhague**

**SOMMAIRE**

Une enquête fut effectuée pour savoir si les souches de gonocoques isolées chez les prostituées danoises en 1966, 1967, 1968, étaient proportionnellement moins sensibles aux antibiotiques que celles qui étaient envoyées au Statens Serum Institut pour étude de la sensibilité pendant l'année considérée. Ces souches ont été examinées dans le Département de Neisseria du Statens Seruminstitut, par la méthode des dilutions sur plaque, vis-à-vis de la pénicilline, de la tétracycline et de la streptomycine. On constata que le pourcentage des souches moins sensibles à pénicilline, tétracycline et streptomycine, ne présentait pas de différence significative pour les deux groupes; en 1966, la proportion des gonocoques résistant à la streptomycine fut significativement plus élevée pour le groupe des prostituées, mais ce phénomène isolé n'est pas considéré comme étant important.
Book review


This book, written in Rumanian, is published as a manual for teaching purposes. It contains all the chapters to be expected in such a manual and the authors present in each chapter the most important, generally accepted facts and also a certain number of problems which have not yet been completely explained. The treatise is, on the whole, very clear, with an extensive bibliography, but not all the chapters are equally good. It is understandable that the authors develop more extensively the subjects to which they themselves contributed. Other chapters, however, are too short, notwithstanding the bibliographical references which indicate the knowledge which could have been summarized in a few lines.

Two subjects, which have been particularly studied by the authors, deserve to be dealt with here in some detail: the action of cortisone and the influence of low temperatures on the course of experimental syphilis in rabbits.

The action of cortisone has been studied by the authors during all stages of T. pallidum infection: the incubation period, primary syphilis, and latency, and during treatment. They observe the changes in duration and severity of the lesions and the number of treponemes found, its influence on the generalization of experimental disease and changes in the development of antibodies compared with controls. Furthermore, they have studied the influence of cortisone on the level of carbohydrate, lipids, cholesterol, proteins (by means of electrophoresis), haematological changes, body weight, and the histopathology of lesions.

Their conclusion is that, under the influence of treatment with cortisone, multiple lesions are induced, very rich in treponemes relatively insensitive to antibodies. Thus better antigens can be obtained for serological testing and, especially, for the possible preparation of specific vaccines.

The second point, the influence of low temperatures on the course of experimental syphilis in the rabbit, is dealt with in several paragraphs according to the method of inoculation of the treponemes:

(a) Inoculation under the scrotal skin or intratesticularly:

(i) animals kept at an ambient temperature of 35°C. seldom show clinical lesions at the site of inoculation and usually develop inapparent syphilis;

(ii) with an ambient temperature of 20°C. clinical lesions are found at the inoculation site with metastatic or secondary orchitis in 12 per cent. of cases;

(iii) at a temperature of 15°C., clinical lesions occur at the inoculation sites with secondary orchitis in 30 per cent. and occasionally generalized lesions, but only on the shaven parts of the skin;

(iv) at an ambient temperature between 0° and 6°C., the influence of the low temperature becomes very marked: clinical lesions at the inoculation site are found, together with secondary orchitis in 96 per cent. of cases, generalized lesions of skin and mucous membranes in 42 per cent., and even, in a limited number of cases, visceral lesions (this last point is not very clearly expressed in the text). The influence of low temperatures is also evident in the shortened incubation period, the more florid lesions produced, and the greater number of treponemes contained in the lesions compared with control animals kept at higher temperatures.

(b) Intravenous inoculation:

At low temperatures (0°–6°C.) generalization of lesions is observed in 62 per cent. of cases.

(c) Intracardiac inoculation:

With the same treponeme suspension and in the same conditions as those described above, the rate of generalization increases to 90 per cent.

All animals which show generalized manifestations have an increased immunity of longer duration.

The authors conclude from these observations, perhaps somewhat prematurely, that rabbits kept at a low temperature develop a syphilitic infection comparable with human syphilis.

To sum up, this monograph is very interesting and useful for those who are studying treponematoses, but unfortunately it is only accessible to a limited number of scientists, as it is written in Rumanian.

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Correction

In the article by R. Nielsen, which appeared in the April, 1970, issue of the Brit. J. vener. Dis., vol. 46, p. 153, col. 2, line 9 from the bottom:

for 0.005 µg. penicillin per ml.

PLEASE READ 0.05 µg.