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Annual Epidemiological Report

Lymphogranuloma venereum

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Key facts

- In 2014, 1 416 cases of LGV were reported in 21 countries.
- Three countries (France, the Netherlands and the United Kingdom) accounted for 87% of notified cases.
- Almost all cases were reported among men who have sex with men; in those cases with known HIV status, 87% were HIV positive in 2014.
- The number of cases reported in 2014 increased by 32% compared with 2013.
- A number of countries have not reported LGV cases over the years, suggesting considerable under-diagnosis and underreporting.

Methods

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In 2014, the majority of reporting countries (12) used the EU case definitions. Four countries reported using national case definitions, and five countries did not report which case definition they were using. Surveillance systems for LGV in Europe vary: 14 countries reported having comprehensive surveillance systems, but five countries operate sentinel systems which only capture LGV diagnoses from a selection of clinics (Annex).

Reporting of LGV infection is compulsory in all countries with comprehensive systems, with a few exceptions: the United Kingdom has a comprehensive system, but reporting is not compulsory; reporting is compulsory in Hungary, which has a sentinel system. Reporting is voluntary in the remainder of countries with sentinel systems.

Rates of LGV infection are not calculated because many LGV surveillance systems are not able to generate data that are considered representative of the national population. There are also significant differences in the availability of LGV diagnostics across Europe.

Epidemiology

In 2014, 21 countries provided data on the reporting of LGV cases. Eleven of these 21 countries reported a total of 1 416 cases, while the remaining 10 countries reporting zero cases (Table 1). Compared with 2013, the number of cases reported in 2014 increased by 32%. All countries except Finland, Italy and Malta reported an increase in case numbers. The largest proportional increase was reported in Ireland (sixfold) and the Czech Republic (1.5-fold).

Transmission category was reported for 889 cases in 2014 (63% of all reported cases). All but four were reported among MSM. Age was reported for all but one case, with the large majority of cases distributed evenly among 25–34-year-olds (29%), 35–44-year-olds (34%) and those aged 45 years or over (33%) (Figure 1).

In 2014, information on HIV status was available for 1 354 LGV cases (96%), of whom 54% were reported as HIV positive, 8% as HIV negative and 38% as unknown. Of cases with known HIV status, 87% were HIV positive. Between 2005 and 2014, information on HIV status was available for 4 647 cases (74% of all reported cases), of whom 65% were reported as HIV positive, 14% as HIV negative, and 21% as unknown.

Between 2005 and 2014, 6 303 cases of LGV were reported in 12 countries, with the majority of cases reported in the United Kingdom (53%; 3 367 cases), France (20%; 1 276 cases) and the Netherlands (16%; 1 023 cases). The overall increasing trend for reported cases of LGV between 2005 and 2014 is due to an increase in the number of reporting countries and an increase in case number in most of the reporting countries (Figure 2).

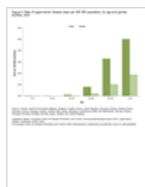
Table 1. Number of reported LGV cases, EU/EEA, 2010–2014

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Country	2010	2011	2012	2013	2014
Austria	-	-	-	-	-
Belgium	22	21	23	48	60
Bulgaria	-	-	-	-	-
Croatia	-	-	0	0	0
Cyprus	0	0	0	0	0
Czech Republic	1	6	9	8	20
Denmark	20	29	24	32	36
Estonia	0	0	0	0	0
Finland	0	3	5	7	2
France	184	191	197	327	377
Germany	-	-	-	-	-
Greece	-	-	-	-	-
Hungary	0	0	1	2	3
Iceland	0	0	0	0	0
Ireland	1	0	3	5	35
Italy	6	11	27	21	12
Latvia	0	0	0	0	0
Liechtenstein	-	-	-	-	-
Lithuania	-	-	-	-	-
Luxembourg	0	0	0	0	0
Malta	0	0	0	1	0
Netherlands	66	70	190	112	172
Norway	0	0	0	0	21
Poland	0	0	0	0	0
Portugal	-	-	-	-	-
Romania	-	-	-	-	-
Slovakia	-	-	-	-	-
Slovenia	0	0	0	0	0
Spain	-	-	-	-	-
Sweden	0	0	0	0	0
United Kingdom	428	408	402	512	678
EU/EEA total	728	739	881	1075	1416

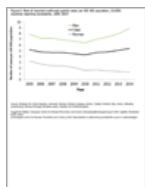
Country	2010	2011	2012	2013	2014
Source: Country reports					
Legend: - = no report					

Figure 1. Age distribution of reported confirmed LGV cases, EU/EEA, 2014



Source: Country reports

Figure 2. Number of reported confirmed LGV cases for selected EU/EEA Member States, 2005–2014



Source: Country reports from Belgium, Denmark, France, the Netherlands, the United Kingdom.

Discussion

In 2014, the number of reported cases of LGV continued to increase in western and central European countries. The largest increases were reported from Ireland and the Czech Republic, but many other countries also reported increases. The number of reported cases is an underestimate because many countries do not routinely report LGV and the diagnosis of LGV requires confirmation through genotyping. The increase in reported cases indicates that LGV transmission continues mainly among HIV-positive MSM undertaking high-risk practices [1-3]. Different, and at times insufficient, testing strategies fail to detect a substantial number of asymptomatic cases [4].

Public health conclusions

The increasing number of cases of LGV in Europe mirror the trend for other sexually transmitted diseases, with increases predominantly due to transmission between MSM. Effective interventions need to be identified and targeted at this group of predominantly HIV-positive MSM who might have less incentive to use condoms. In addition, clinical suspicion and early diagnosis is essential in order to prevent complications. In many parts of Europe, surveillance for LGV is not well developed due to limited availability of diagnostics. Little information is therefore available on the incidence of the infection in some parts of Europe. An ECDC project will be piloting enhanced LGV surveillance in these countries in order to try to shed more light on the scope of the problem.

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Additional information

European Centre for Disease Prevention and Control. Sexually transmitted infections in Europe 2013. Stockholm: ECDC; 2015. Available from: <http://ecdc.europa.eu/en/publications/Publications/sexual-transmitted-infections-europe-surveillance-report-2013.pdf>

Annex. Surveillance systems overview

Table 2. Lymphogranuloma venereum, surveillance systems overview, 2014

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* The European Surveillance System (TESSy) is a system for the collection, analysis and dissemination of data on communicable diseases. EU Member States and EEA countries contribute to the system by uploading their infectious disease surveillance data at regular intervals.