

ADVISORY: Mycoplasma pneumoniae

November 18, 2024

Key Information

- Mycoplasma pneumoniae (M. pneumoniae) activity is increasing in Ontario
 - Typically circulates in late summer and early fall
 - Cyclical increases every 3-7 years
- Most common symptoms of *M. pneumoniae* infection: fever, headache, and slowly worsening cough

Actions

- Consider *M. pneumoniae* infection among patients with community-acquired pneumonia who aren't clinically improving on antibiotics that are known to be ineffective against *M. pneumoniae* (e.g., beta-lactams)
- Be aware of <u>how to test for *M. pneumoniae*</u> including the use of an unexpired viral "universal transport media" (UTM) swab
- Consider using a second-line antibiotic regimen (e.g. beta-lactams) to treat patients with suspected or confirmed *M. pneumoniae* who aren't improving on macrolides
 - PHO has identified molecular markers that are associated with macrolide resistance in a subset of samples tested
- Promote measures to prevent transmission of respiratory diseases (vaccination, masking, improved ventilation, hand hygiene etc.), including pneumonia

Further Information

M. pneumoniae is not a designated Disease of Public Health Significance and is not subject to mandatory reporting. As a result, there is no provincial or national surveillance system for the disease. Through laboratory testing, it has been noted that the disease activity began increasing from inter-seasonal lows in May and June, with more rapid increases in July and August. Activity has continued to be high since August.

Based on preliminary data from Public Health Ontario, disease activity is highest in children and adolescents. Activity is highest in those aged 10-19 years, then 5-9 years, followed by 1-4 years. This is notable; historically those under 4 years of age have had very low disease activity. Currently, there is lower disease activity in adult age groups. Similar trends have been seen both in the <u>United States</u> and in Ontario hospital labs that have anecdotally shared results of *M. pneumoniae* testing.