Gonorrhea Treatment Guidelines



This patient has tested positive for this infection through GetCheckedOnline.

This patient does not require re-testing, only treatment.

If you have further questions, please call a BCCDC nurse at 604.707.5603 or 1.888.488.7444

GetCheckedOnline is an online STI and HIV testing service provided by the BC Centre for Disease Control (BCCDC).

CLINICAL EVALUATION

Treat all patients who present with gonorrhea in any of these sites. The patient does not need to have a copy of their lab result.

- urethral
- rectal
- · pharyngeal

Assess for pelvic inflammatory disease (PID) or epididymitis and treat accordingly.

Treat all persons identified as contacts to gonorrhea (e.g., sexual contact with the case in the past 60 days, or last sexual contact).

MANAGEMENT AND INTERVENTIONS

Goals of Treatment:

- · treat bacterial infection
- · prevent complications
- · prevent transmission of gonorrhea

TREATMENT OF CHOICE

First Choice:

- cefixime 800 mg PO in a single dose

 AND
- · azithromycin 1 gm po in a single dose

OR

- ceftriaxone 250 mg IM in a single dose

 AND
- · azithromycin 1 gm PO in a single dose

Note:

- Treatment covers both gonorrhea and Chlamydia.
- DO NOT USE ceftriaxone or cefixime if history of allergy to cephalosporins or a history of anaphylaxis or immediate reaction to penicillins.

ALTERNATE TREATMENT

- cefixime 800 mg PO in a single dose
- · doxycycline 100mg BID for 7 days

OR

- ceftriaxone 250 mg IM in a single dose

 AND
- · doxycycline 100mg BID for 7 days

PREGNANT OR BREASTFEEDING WOMEN

• Consult/refer to physician or NP for women who are pregnant or breastfeeding.

Client Education

Counsel client:

- to abstain from sexual activity during the 7 day course of treatment or for 7 days post single dose therapy for clients and their contacts
- · on methods of partner notification:
 - to inform any sexual contacts within the last 60 days that they require testing and treatment.
 If no sexual contact in the previous 60 days then follow up should occur for the last sexual contact.
 - regarding appropriate use of medications (dosage, side effects, and need for re-treatment if medication is taken incorrectly)
- on harm reduction (condom use significantly reduces the risk of transmission)
- · on the benefits of routine STI and HIV screening
- · on complications from untreated gonorrhea
- on co-infection risk for HIV when another STI is present
- on the asymptomatic nature of STI and HIV
- on the importance of revisiting health care provider if symptoms persist
- to repeat STI screening, which includes testing for gonorrhea, in 6 months as re-infection rate is high

A link to the BCCDC treatment guidelines for STIs is available at:

getcheckedonline.com/healthproviders

