

Chlamydia/Gonorrhea Treatment Guidelines

Testing

- Screening for Chlamydia and Gonorrhea is recommended based on risk factors, signs/symptoms, and for all pregnant people
- Screen females using NAAT with vaginal or cervical swabs or with first-void urine
- Screen males using NAAT with first-void urine
- Screen extragenital sites (throat and rectal) if there was unprotected sexual exposure at these sites
- For all patients with suspected gonorrhea infection send a Gonorrhea culture as well as NAAT testing from all potentially exposed sites (e.g. urethral/cervical, pharyngeal, rectal)

	Chlamydia	Gonorrhea
First-Line Treatment	Doxycycline 100 mg PO BID for 7 days OR Azithromycin 1 g PO in a single dose	Ceftriaxone 500 mg IM in a single dose Note: If Chlamydia infection has not been excluded by a negative test, concurrent treatment for Chlamydia is recommended.
Second-Line Treatment Alternative therapeutic options are only to be considered if first-line therapy is not possible (i.e. due to an allergy) and must be followed by a test of cure.	Levofloxacin 500 mg PO once a day for 7 days	Cefixime 800 mg PO in a single dose AND Doxycycline 100 mg PO twice daily for 7 days OR Cefixime 800 mg PO in a single dose AND Azithromycin 1 g PO in a single dose OR Gentamicin 240 mg IM in a single dose AND Azithromycin 2 g PO in a single dose OR Gentamicin 240 mg IM in a single dose AND Doxycycline 100 mg PO twice daily for 7 days
Pregnancy & Breastfeeding	Azithromycin 1 g PO in a single dose OR Amoxicillin 500 mg PO TID for 7 days OR Erythromycin 500 mg QID for 7 days OR Erythromycin 250 mg QID for 14 days	Ceftriaxone 500 mg IM in a single dose Alternative treatment regimens are not recommended in pregnancy.
Follow Up	Chlamydia test of cure (TOC) is recommended 3 weeks after completion of treatment when compliance to treatment is suboptimal, an alternative treatment regimen is used or the person is prepubertal or pregnant. Repeat screening 3 months post-treatment.	A gonorrhea test of cure (TOC) should be done for all positive sites in all cases. For asymptomatic individuals, a NAAT should be done 3-4 weeks after treatment. If a TOC is done within 3 weeks, obtain culture at least 3 days after completion of treatment. Repeat screening 6 months post- treatment.

Common signs and symptoms of Chlamydia & Gonorrhea (often asymptomatic)

- Abnormal discharge
- Dysuria
- Abnormal vaginal bleeding
- Itchiness/redness
- Discomfort/pain during sex
- Rectal pain, bleeding and discharge with proctitis
- Sore throat

Treatment

- Sexual partners within the past 60 days should be treated and offered testing
- Refer clients to the Durham Region Sexual Health Clinics for counseling and free treatment. For clinic locations visit durham.ca/sexualhealth
- To order publicly funded STI medications visit durham.ca/STIMeds

Remind client to abstain from sex for 1 week, to wear condoms and to be rescreened.



Durham Health Connection Line
905-668-2020 or 1-800-841-2729
durham.ca/health
Dial 311 (within regional limits)

If you require this information in an accessible format, contact 1-800-841-2729.

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