

Chlamydia/Gonorrhea Treatment Recommendations

	Chlamydia	Gonorrhea
First-Line Therapy	<p>Azithromycin 1 g PO in a single dose</p> <p>OR</p> <p>Doxycycline 100 mg PO b.i.d. for 7 days</p>	<p>Ceftriaxone 250 mg IM x one dose AND Azithromycin 1 g PO in a single dose</p> <p>Note: give at the same time</p> <p>First-line dual therapy with ceftriaxone is the strong preference because use of cefixime could potentially accelerate the development of resistance to ceftriaxone, which is the only remaining antimicrobial that is safe, well-tolerated and highly effective</p>
Second-Line Therapy	<p>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</p> <p>Ofloxacin 300 mg PO b.i.d. for 7 days</p> <p>OR</p> <p>Erythromycin 500 mg PO q.i.d. for 7 days</p> <p>OR</p> <p>Erythromycin 250 mg PO q.i.d. for 14 days</p>	<p>Cefixime 400 mg PO in a single dose AND Azithromycin 1 g PO in a single dose</p> <p>Note: give at the same time</p> <p>OR</p> <p>Gentamicin 240 mg in two separate 3 ml IM injections of 40 mg/ml AND Azithromycin 2 g PO</p> <p>Note: give at the same time</p> <p>OR</p> <p>Gentamicin 240 mg intravenous (IV) infused over 30 minutes</p> <p>For clients with an Azithromycin allergy:</p> <p>Ceftriaxone 250 mg IM x one dose AND Doxycycline 100 mg PO b.i.d. for 7 days</p>
Pregnancy & Breastfeeding	<p>Azithromycin 1 g PO in a single dose</p> <p>OR</p> <p>Amoxicillin 500 mg PO t.i.d. for 7 days</p> <p>OR</p> <p>Erythromycin 500 mg q.i.d. for 7 days</p> <p>OR</p> <p>Erythromycin 250 mg q.i.d. for 14 days</p>	<p>Ceftriaxone 250 mg IM x one dose AND Azithromycin 1 g PO in a single dose</p> <p>Note: give at the same time</p>

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

- Abnormal discharge
- Dysuria
- Abnormal vaginal bleeding
- Itchiness/redness
- Discomfort/pain during sex

Testing

- Culture testing is recommended for all symptomatic individuals prior to treatment
- Urine (NAAT) testing to be used for screening of asymptomatic individuals
- Rectal and Pharyngeal testing is recommended for men who have sex with men, those who engage in sex work as well as their sexual contacts, and known sexual contacts of those infected with Gonorrhea
- It is recommended to concurrently test for Chlamydia and Gonorrhea

Treatment

- All sexual partners within the past 60 days must be tested and treated
- 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 medications to treat sexually transmitted infections call 905-668-7711 ext. 2996

Test of Cure is recommended when:

- Alternative treatment used (i.e. second-line treatment)
- Patient is pregnant
- Re-exposure may have occurred
- Compliance is an issue
- Previous treatment failed
- Persistent symptoms post-treatment
- Pharyngeal/rectal gonococcal infection

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



Durham Health Connection Line
905-666-6241 or 1-800-841-2729



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

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