The Centers for Disease Control and Prevention (CDC) has updated its recommendation for the treatment of uncomplicated gonorrhea in adults. Effective immediately, uncomplicated gonorrhea of the urethra, cervix, rectum, or pharynx should be treated with ceftriaxone 500 mg, IM, in a single dose (previously 250 mg). Additionally, dual therapy with azithromycin is no longer the recommended approach. The new recommendations, briefly summarized below, are available in 2020 Update to CDC’s Treatment for Gonococcal Infections, published December 17 in MMWR. This new recommendation supersedes the gonorrhea treatment recommendation included in the 2015 STD Treatment Recommendations. The CDC expects to publish revised STI Treatment Guidelines in 2021.

Recommendation:

1. Treat gonorrhea infections with a single 500 mg injection of ceftriaxone.
2. A test-of-cure is not needed for people who receive a diagnosis of uncomplicated urogenital or rectal gonorrhea unless symptoms persist.
3. A test-of-cure is recommended in people with pharyngeal gonorrhea 7-14 days after the initial treatment, regardless of the regimen.
4. Patients who have been treated for gonorrhea should be retested three months after treatment to ensure there is no reinfection.
5. For patients co-infected with chlamydia the treatment is 500 mg IM ceftriaxone PLUS 100 mg oral doxycycline twice daily for 7 day.
6. As always, facilitate partner testing and treatment.

Call SCCHD with questions or to report confirmed/suspect cases (810) 987-5300 during regular business hours.