

# Gonorrhoea

## Definition

Gonorrhoea is a sexually-transmitted disease (commonly known as "**the clap**") caused by the bacterium **Neisseria gonorrhoea**.

## Causes, incidence, and risk factors:

- Gonorrhoea is most frequently transmitted during sexual intercourse, including both oral and anal sex.
- Gonorrhoea is a notifiable disease.
- The incidence of the disease is estimated at .....mostly because the majority of cases go unreported.
- The disease has a higher prevalence in
  - large metropolitan areas, inner city areas,
  - populations with lower overall levels of education,
  - people with lower socioeconomic status
  - most prevalent in **15 to 29** age bracket
- Risk factors include
  - having multiple sexual partners
  - a partner with a past history of any STD
  - unprotected sex

- It is easily transmitted and can be contracted during
  - oral
  - vaginal
  - or anal sex
- The causative organism can infect
  - the throat (gonococcal pharyngitis)
  - the vagina (vaginitis)
  - and the anus and rectum (proctitis).
- In addition, the organisms may spread up the female reproductive tract, to the Fallopian tubes (salpingitis)
- If the bacteria spreads beyond the fallopian tubes into the peritoneum then peritonitis occurs.

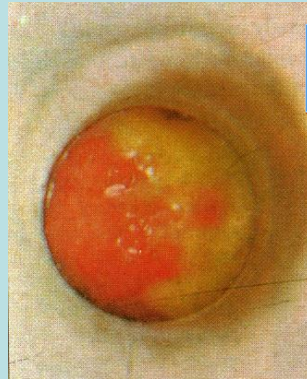
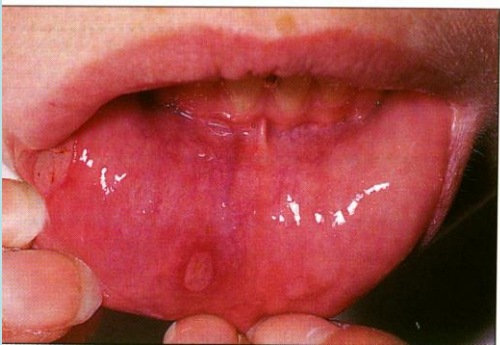
- The bacteria can also spread to the blood stream causing gonococemia causing gonococcal arthritis.
- Infected mothers can spread the disease to her newborn child during childbirth
- Gonorrhoea can be contracted from intimate contact with recently contaminated objects
- 50% of women with gonorrhoea are asymptomatic, and subsequently do not seek treatment.
- Incubation period is short and symptoms appear 2 to 5 days following exposure
- When symptomatic, the most frequently observed symptoms include
  - vaginal discharge,
  - increased urinary frequency
  - dysuria.
  - abdominal pain
  - fever
- Gonorrhoea is often associated with the presence of other sexually-transmitted diseases ( 50% Chlamydia, and should be tested for HIV).

## Prevention

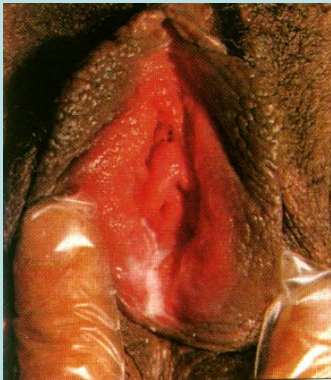
- Abstinence is the only absolute method of preventing gonorrhoea.
- A monogamous sexual relationship with an individual known to be free of any STD is advisable.
- Safe sex behaviour
- Treatment of all sexual partners is essential to prevent reinfection.

## Symptoms Female

- Vaginitis (vaginal discharge)
- Dysuria (pain or burning on urination)
- urinary hesitancy
- Pharyngitis (sore throat)
- Dyspareunia (painful sexual intercourse)
- mouth ulcers



**Proctitis**



## Symptoms Male

- increased urinary frequency or urgency
- incontinence
- urethral discharge
- dysuria
- urethritis
- testalgia



## Tests

- An immediate preliminary diagnosis of gonorrhoea can be made at the time of examination.
- A cervical smear is taken, stained, and examined under the microscope.
- In suspected cases of gonorrhoea, cultures should be taken from
  - the cervix
  - vagina
  - anus
  - urethra
  - the throat

## Treatment

- Common prescriptions are:
  - [ceftriaxone](#) 125 mg (milligrams) injected into a [muscle](#), one time
  - [cefixime](#) 400 mg by mouth, one time
  - [ciprofloxacin - oral](#) 500 mg by mouth, one time
  - [ofloxacin - oral](#) 400 mg by mouth, one time
  - Spectinomycin 2 grams injected into a muscle, one time
  - cefuroxime [Axotal](#) 1 gram by mouth, one time
  - [cefepodoxime proxetil](#) 200 mg by mouth, one time
  - [enoxacin](#) 400 mg given by mouth, one time
  - [erythromycins - oral](#) 500 mg by mouth, four times a day for one week
- A follow-up visit 7 days after treatment to recheck cultures and confirm the cure of infection is important, especially for women who may not have symptoms associated with the infection

## Prognosis Female

- When gonorrhoea is treated immediately upon onset, the outcome is likely to be good, meaning that no permanent scarring will have taken place and fertility will be maintained.
- When treatment is delayed there is a greater likelihood of complication and a high probability of sterility.

## Prognosis Male

- When gonorrhoea is treated immediately, the outcome is likely to be good and no permanent scarring of the urethra will take place.
- The infection will not spread to other areas of the body.
- When treatment is delayed there is a greater likelihood of complication.

## Complications Female

- salpingitis
- PID (pelvic inflammatory disease)
- peritonitis
- bacteremia (gonococcemia)
- gonococcal arthritis
- gonococcal pharyngitis
- ophthalmia neonatorum (gonococcal conjunctivitis)
- vulvovaginitis
- sterility
- dyspareunia

## Complications Male

- periurethral abscess
- gonococcal arthritis
- gonococcal pharyngitis
- gonococcal conjunctivitis
- infection or inflammation of the male reproductive system
  - epididymitis
  - prostatitis
  - seminal vesiculitis
  - cowperitis