

Health Advisory: Gonococcal Treatment Change

Minnesota Department of Health, Tue, Jan 26 10:00 CST 2021

Action Steps

Local and tribal health department: Please forward to hospitals, clinics, urgent care centers, emergency departments, and convenience clinics in your jurisdiction.

Hospitals, clinics and other facilities: Please distribute to health care professionals who evaluate and treat patients at risk for sexually transmitted diseases in your jurisdiction.

Health care providers:

- **Use a single 500 mg injection of ceftriaxone to treat uncomplicated cases of urogenital, anal and pharyngeal gonorrhea in people without a history of allergies. Dual treatment with Azithromycin is no longer recommended.**
- If chlamydial infection has not been excluded in patients who are not pregnant, treat concurrently with doxycycline 100 mg orally twice a day for 7 days.
- Sign up for MDH GovDelivery for HIV/STD Prevention and Data Updates to get notified when the new CDC guidelines are released and other key STD updates.

Background

Sexually Transmitted Disease/Sexually Transmitted Infections (STD/STI) rates continue to rise across the U.S., especially rates of gonorrhea (GC) and syphilis. Preliminary 2020 data indicate several cases of disseminated gonorrhea infection (DGI) were reported in Minnesota this past year. While DGI is uncommon, there is concern that as the number of infections increases both statewide and nationally, the number of DGI cases will follow that trend as well. DGI occurs in people with untreated or inadequately treated gonorrhea when it invades the bloodstream and spreads to distant sites in the body.

Drug-resistant gonorrhea remains an urgent public health threat, even though no cases have been confirmed in the U.S. yet. This includes increasing resistance to azithromycin. Effective, accurate, timely treatment for gonorrhea is key to slowing antibiotic resistance, reducing serious complications, and in preventing transmission. Management of all STDs should be guided by the 2015 CDC STD Treatment Guidelines. Hospitalization and consultation with an infectious disease specialist when appropriate is also recommended.

Additional Details on Managing Gonorrhea

- Continue to follow all other STD Treatment Guidelines published in 2015 until new Guidelines are released in 2021.
- During pregnancy, if a person is diagnosed with gonorrhea and chlamydia, azithromycin 1 g as a single dose is recommended to treat chlamydia since doxycycline is contraindicated.
- Gentamycin 240 mg IM single dose plus azithromycin 2 g orally remains the alternative regimen for gonorrhea treatment when ceftriaxone is not available.
- Continue to monitor for possible treatment failures and report those to MDH. If treatment failure suspected, consider obtaining relevant clinical specimen – contact MDH-Public Health Lab for more information on specimen specifics, 651-201-5200.

New CDC STD Treatment Guidelines

CDC expects to publish new treatment guidelines soon. Sign up for MDH GovDelivery for HIV/STD Prevention and Data Updates to get notified when new guidelines are released and receive other STD updates.

For More Information

- MMWR: Update to CDC's Treatment Guidelines for Gonococcal Infection, 2020
- MDH Gonorrhea Information for Health Professionals
- CDC 2015 Sexually Transmitted Diseases Treatment Guidelines: Current CDC guidelines.

A copy of this HAN is available at: MDH Health Alert Network (<http://www.health.state.mn.us/han>)
The content of this message is intended for public health and health care personnel and response partners who have a need to know the information to perform their duties.