

Memo

To: Healthcare Providers

From: Infectious Diseases Team

Date: February 24th, 2025

Re: Update to First Line Treatment for Gonorrhea



SCAN Me

Grand Erie Public Health (formerly Brant County Health Unit and Haldimand-Norfolk Health Unit) is notifying healthcare providers about changes in the treatment of uncomplicated gonococcal infections in adults and adolescents (10 years and older). This update is in response to the rise in antimicrobial resistance (AMR) and increasing infection rates in Canada. As a result, the Public Health Agency of Canada (PHAC) has updated the guidelines for treating *Neisseria gonorrhoeae* (gonorrhea) in the [Canadian Guidelines for Sexually Transmitted Infections](#).

Key Messages for Health Care Providers:

- Recommended first-line treatment for all uncomplicated gonococcal infections, including urethral, endocervical, vaginal rectal and pharyngeal infections, is a single dose of 500 mg of Ceftriaxone intramuscularly (IM). This is a change from the previous recommendation for combined therapy with 250 mg Ceftriaxone (IM) and 1 gram of Azithromycin PO in a single dose.
- Since 500 mg vials of Ceftriaxone are not available in Canada, please continue to use the 250 mg vials to administer the recommended 500 mg dose. If given as one injection, careful attention should be given to reconstitution to avoid medication administration errors. Each 250mg vial must be reconstituted with 0.9 ml of lidocaine or sterile water to provide a final volume of 2 ml.
- If chlamydia has not been excluded by a negative test, concurrent treatment for chlamydia is recommended. Refer to the [Chlamydia and LGV guide: Treatment and follow-up - Canada.ca](#).
- PHAC recommends a culture when NG infection is confirmed by NAAT only, as long as it does not delay treatment
- Culture is recommended where feasible (to assess drug sensitivity) in addition to the specimens for nucleic amplification testing (NAAT). For more information, please see: [Gonorrhea guide: Screening and diagnostic testing - Canada.ca](#).

Test of Cure:

A Test of Cure (TOC) is recommended for all cases of gonorrhea at all positive sites, particularly if a regimen other than ceftriaxone 500 mg IM is used. Recommendations for test of cure depend on timing after treatment completion and patient's symptom status.

- If a test of cure is done 3 to 21 days after treatment completion, culture is recommended regardless of the patient's symptom status.
- If test of cure is done after 21 days from treatment completion and the patient is:
 - Asymptomatic- NAAT is recommended three to four weeks after the completion of treatment because residual nucleic acids from dead bacteria may be responsible for positive results less than three weeks after treatment.
 - Symptomatic - Both Culture and NAAT are recommended.

Treatment Failure:

Treatment failure in gonococcal infections is defined by the absence of sexual contact during the post treatment period, along with one of the following: presence of Gram-negative intracellular diplococci on microscopy 72 hours after treatment, a positive *N. gonorrhoeae* culture 72 hours post-treatment, or a positive NAAT 3-4 weeks after treatment. In cases of treatment failure, healthcare providers should notify Grand Erie Public Health and consider consulting an infectious disease specialist as necessary to determine the appropriate antimicrobial therapy based on susceptibility test results.

Alternative Treatments

Alternative treatments for uncomplicated gonococcal infections are currently under review by the NAC STBBI. You can continue to refer to the current alternative treatment regimens per the federal guidelines.

Ordering Free STI Medications

Healthcare providers can order STI medications by faxing the STI Medication Ordering Form, which is available at <https://hnhu.org/wp-content/uploads/sti-care-provider-nov-2024.pdf>

Chlamydia and Gonorrhea Treatment Guide

Please note that Grand Erie Public Health is updating our Chlamydia and Gonorrhea Treatment Guide to reflect the updates to first line treatment for Gonorrhea. Once this is complete, the updated version will be distributed to health care providers.

Thank you for your continued diligence in working collaboratively with the health unit.

The Infectious Disease Team

For questions, please contact our Infectious Disease Team at 519-426-6170 ext. 3438 or e-mail us at idt@hnhss.ca For after hours and weekends, please contact on-call at 1-877-298-5888

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PUBLIC HEALTH

The Haldimand-Norfolk Health Unit and Brant County Health Unit have merged! While our name might be different, our programs and services will remain the same across the Brantford-Brant and Haldimand-Norfolk regions at current operating locations until further notice