

Gonorrhoea

Looking after **your** sexual health

Gonorrhoea

Gonorrhoea is a bacterial sexually transmitted infection (STI). If it's not treated early, it can cause painful complications and serious health problems.

This booklet gives you information about gonorrhoea, what you can do if you're worried that you might have it and advice on how to protect yourself and your partners.

What causes gonorrhoea?

Gonorrhoea is caused by bacteria (tiny living cells) called *Neisseria gonorrhoeae*. They can live in the cervix (entrance to the uterus), the urethra (tube where urine comes out), the rectum (back passage), the throat and, occasionally, the eyes.

Anyone who's sexually active can easily get and pass on gonorrhoea. You don't need to have lots of sexual partners.

How's gonorrhoea passed on?

Gonorrhoea is usually passed from one person to another through sexual contact. You can get the infection if you come into contact with infected semen (cum or pre-cum) or infected discharge from the vagina, throat or rectum (back passage).

Gonorrhoea is most commonly spread through:

- vaginal or anal sex without a condom

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- oral sex (going down, giving head) without a condom or dam (a latex or plastic square that covers the anus or vulva)
- sharing sex toys if you don't wash them or cover them with a new condom each time they're used.

If you're pregnant, it's possible to pass gonorrhoea to the baby (see What happens if I get gonorrhoea when I'm pregnant? on page 13).

It's possible for the bacteria to spread from vaginal discharge to the rectum. You don't need to have anal sex for this to happen.

If gonorrhoea is transferred from the genitals to the eye(s) by the fingers it can cause conjunctivitis (an eye infection). This isn't common.

It's not clear if gonorrhoea can be spread by transferring infected semen or vaginal fluid to another person's genitals on the fingers or through rubbing vulvas (female genitals) together.

You can't get gonorrhoea from kissing, hugging, sharing baths or towels, swimming pools, toilet seats or from sharing cups, plates or cutlery.

What are the signs and symptoms?

Around half of people with a vulva and 1 in 10 people with a penis with genital gonorrhoea won't have any obvious signs or symptoms. Signs and symptoms can show up 2–14 days after coming into contact with gonorrhoea, many months later, or not until the infection spreads to other parts of your body. You **might** notice the following:

If you have a vulva

- An unusual vaginal discharge which may be thin or watery, yellow or green.
- Pain when passing urine.
- Lower abdominal pain or tenderness.

- Rarely, bleeding between periods or heavier periods (including those who are using hormonal contraception).

If you have a penis

- An unusual discharge from the tip of the penis the discharge may be white, yellow or green.
- Pain when passing urine.
- Rarely, pain, tenderness or swelling in the testicles.

Other parts of the body

- Infection in the rectum (back passage) doesn't usually have any signs and symptoms but may cause anal pain, discomfort or discharge.
- Infection in the throat usually has no symptoms.
- Infection in the eye(s) (conjunctivitis) can cause pain, swelling, irritation and discharge.

How will I know if I have gonorrhoea?

You can only be certain you have gonorrhoea if you have a test. If you think you might have gonorrhoea, it's important not to delay getting a test so that you can start treatment and don't pass the infection on to anyone else.

You should have a test if:

- you or a sexual partner have, or think you might have, symptoms
- you've recently had unprotected sex with a new partner
- you or a partner have had unprotected sex with other partners
- during a vaginal examination your doctor or nurse says that the cervix is inflamed and/or there's an unusual discharge

- a sexual partner tells you they have a sexually transmitted infection (STI)
- you have another STI.

You could have gonorrhoea even if a partner has tested negative. The only way to make sure you don't have gonorrhoea is to get tested yourself.

If you've had gonorrhoea and it's been treated, you won't be immune to the infection – you can get it again.

If you have gonorrhoea, you'll be encouraged to be tested for other STIs as you can have more than one STI at the same time.

How soon after sex can I have a test for gonorrhoea?

It's important not to delay getting a test if you think you might have gonorrhoea. A test can be done straight away but you may be advised to have another test two weeks after having sex. You can have a test for gonorrhoea even if you haven't got signs or symptoms.

What does the test involve?

- If you have a vulva, you may be asked to use a swab yourself around the inside of your vagina.
- A doctor or nurse may take a swab during an internal examination of your vagina and cervix (entrance to the womb).
- If you have a penis, you may be asked to provide a urine sample. Before having this test you're advised not to pass urine (pee) for 1–2 hours.
- A doctor or nurse may use a swab around the entrance of the urethra (tube where urine comes out). This test is usually for people with a

penis but may sometimes be offered to people with a vulva.

- If you've had anal or oral sex, the doctor or nurse may swab your rectum (back passage) or throat (you may be given the option to do your own tests). These swabs aren't done routinely on everyone.
- If you have symptoms of conjunctivitis (an eye infection) swabs will be used to collect a sample of discharge from your eye(s).

A swab looks a bit like a cotton bud, but is smaller and rounded. It sometimes has a small plastic loop on the end rather than a cotton tip. It's wiped over the parts of the body that could be infected. This only takes a few seconds and isn't painful, though it may be uncomfortable for a moment.

It may be possible to look at your swab sample under a microscope straight away and give you the result before you leave the clinic or surgery. Otherwise you'll have to wait up to two weeks to get your result.

Cervical smear tests and routine blood tests don't detect gonorrhoea. If you're not sure whether you've been tested for gonorrhoea, just ask.

How accurate are the tests?

The accuracy of a gonorrhoea test depends on the kind of test used, the type of sample that's collected and which part of your body the sample is collected from.

As no test is 100% accurate there's a small chance that the test will give a negative result when you do have gonorrhoea. This is known as a false negative result. This can sometimes explain why you might get a different result when you go to a different clinic to have another test or why you and a partner might get a different test result.

It's possible for the test to be positive if you haven't got gonorrhoea, but this is uncommon. If there are doubts about the result you may be offered a second test.

Where can I get a test?

There are a number of services you can go to. Choose the one you feel most comfortable with.

A gonorrhoea test can be done at:

- a genitourinary medicine (GUM) or sexual health clinic
- your general practice
- some contraception and young people's clinics.

For information on how to find a service see page 15.

Abortion clinics, antenatal services and some gynaecology services may also offer a test.

In many areas, free home self-sampling tests for gonorrhoea and chlamydia are available to order online. This is where you take your own sample and send it to be tested.

It's also possible to buy a gonorrhoea test from a private online provider to do at home. The accuracy of these tests varies so it's recommended that you go to a sexual health service to have a

test. You can also choose to pay for a gonorrhoea test at a private clinic.

If a self-sampling test or home test shows that you have gonorrhoea, it's important to seek treatment straight away. The test should have instructions explaining what to do.

If you have symptoms, you should always get tested at a sexual health service.

Will I have to pay for tests and treatment?

All tests are free through NHS services. Treatment is also free but if you had a test at a general practice you'll need to go to a sexual health service for your treatment and follow-up tests.

What's the treatment for gonorrhoea?

Gonorrhoea is treated with antibiotics.

Increasingly, antibiotics don't always work when treating gonorrhoea. A doctor or nurse should always take a swab to check which antibiotics might work best at treating the type of gonorrhoea you have. If they don't know which antibiotics will work best, the antibiotics will usually be given as an injection.

If there's a high chance you have gonorrhoea, treatment may be started before the test results are back. You'll also be given treatment if a partner was diagnosed with gonorrhoea in the previous two weeks.

You may also need other treatment if complications have occurred.

Complementary therapies don't cure gonorrhoea.

When will the signs and symptoms go away?

Most people notice an improvement quite quickly after having treatment.

- Discharge or pain when you urinate (pee) should improve within 2–3 days.
- Discharge and discomfort in the rectum (back passage) should improve within 2–3 days.
- Bleeding between periods or heavier periods that have been caused by gonorrhoea should improve by your next period.
- Pelvic pain and pain in the testicles should start to improve quickly but may take up to two weeks to go away.

If you have pelvic pain or painful sex that doesn't improve, see your doctor or nurse. It may be necessary to have further treatment or to investigate other possible causes of the pain.

Do I need to have a test to check that the gonorrhoea has gone?

Yes. This is very important as gonorrhoea can be resistant to antibiotics. You'll need a follow up test 1–2 weeks after finishing the treatment to check it's worked. Your doctor or nurse may also advise other tests. This is particularly important if:

- you think you may have come into contact with gonorrhoea again
- you had unprotected sex with a partner before the treatment for both of you was finished (see [How soon can I have sex again?](#) on page 12)
- the signs and symptoms don't go away (see [When will the signs and symptoms go away?](#) above)
- you had gonorrhoea of the throat
- your test was negative but you develop signs or symptoms of gonorrhoea (see [What are the](#)

[signs and symptoms?](#) on page 4).

How quickly the test can be repeated will depend on which test is being used. The clinic or general practice will advise you.

If you were treated for gonorrhoea in early pregnancy, you may be advised to have another test later in the pregnancy.

You can always go back to the doctor, nurse or clinic if you have any questions or need any advice on how to protect yourself from infection in the future.

What happens if gonorrhoea isn't treated?

Only some people who have gonorrhoea will have complications. If gonorrhoea is treated early it's unlikely to cause any long-term problems. However, without effective treatment the infection can spread to other parts of the body. The more times you have gonorrhoea the more likely you are to get complications.

- If you have a vulva, gonorrhoea can spread to other reproductive organs causing pelvic inflammatory disease (PID). This can lead to long-term pelvic pain, blocked fallopian tubes, infertility and ectopic pregnancy (when the pregnancy develops outside the uterus).
- If you have a penis, gonorrhoea can lead to a painful infection in the testicles and possibly reduce fertility.
- Less commonly, gonorrhoea can cause pain and inflammation of the joints and tendons, known as sexually acquired reactive arthritis (SARA); this can sometimes also cause inflammation of the eyes, and skin lesions.

Can gonorrhoea go away without treatment?

It can, but it can take a long time. If you delay seeking treatment you risk the infection causing long-term damage and you may pass the infection on to someone else.

How soon can I have sex again?

It's strongly advised you don't have any sexual intercourse, including vaginal, anal or oral sex, or use sex toys, until seven days after you and your partner(s) have **both** finished the treatment. This is to help prevent you being re-infected or passing an infection on to someone else.

Will I know how long I've had gonorrhoea?

The gonorrhoea test can't tell you how long the infection has been there. If you feel upset or angry about having gonorrhoea and find it difficult to talk to a partner or friends, don't be afraid to discuss how you feel with the staff at the clinic or general practice.

Should I tell my partner(s)?

If the test shows that you have gonorrhoea, it's **very important** that your current sexual partner(s) and any other recent partners are tested and treated.

You may be given a contact slip to send or give to your partner(s) or, with your permission, the clinic can do this for you. This is called partner notification. It can sometimes be done by text message. The message or contact slip will say that they might've been exposed to a sexually transmitted infection and suggest they go for

a check-up. It may or may not say what the infection is. It won't have your name on it, so your confidentiality is protected.

You're strongly advised to tell your partner(s), but it isn't compulsory. The staff at the clinic or general practice can discuss with you which of your sexual partners may need to be tested.

Can gonorrhoea affect my fertility?

Gonorrhoea is just one of many factors that can affect your fertility. Most people who've had gonorrhoea won't become infertile or have an ectopic pregnancy (see What happens if gonorrhoea isn't treated? on page 11). You won't normally be offered any routine tests to see if you're fertile unless you or a partner are having difficulty getting pregnant. If you're concerned, talk to your doctor or practice nurse.

What happens if I get gonorrhoea when I'm pregnant?

Gonorrhoea can be passed to the baby during the birth. This can cause inflammation and discharge in the baby's eyes (conjunctivitis). Gonorrhoea can be treated with antibiotics when you're pregnant or breastfeeding. The antibiotics won't harm the baby but do tell the doctor or nurse if you're pregnant or breastfeeding.

Does gonorrhoea cause cervical cancer?

No, gonorrhoea doesn't cause cervical cancer.

How can I protect myself from gonorrhoea and other sexually transmitted infections?

The following measures will help protect you from gonorrhoea and most other sexually transmitted infections such as HIV and chlamydia.

It's possible to get a sexually transmitted infection (STI) by having sex with someone who has the infection, even if they have no symptoms. If you have an STI they'll also help prevent you from passing it on to someone.

- Use condoms (male/external or female/internal) every time you have vaginal or anal sex.
- If you have oral sex (going down, giving head), use a condom to cover the penis, or a dam (latex or plastic square) to cover the vulva (external female genitals) or anus.
- If you're not sure how to use condoms correctly visit www.sexwise.org.uk for more information.
- Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.

Using a service

- Wherever you go, you shouldn't be judged because of your sexual behaviour or who you have sex with.
- All advice, information and tests are free.
- All services are confidential.
- All tests are optional and should only be done with your permission.
- Ask as many questions as you need to – and

make sure you get answers you understand.

- The staff will offer you as much support as you need, particularly if you need help on how to tell a partner.

Where can I get more information and advice?

The National Sexual Health Helpline provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123. It's open Monday to Friday from 9am-8pm.

For more information on sexual health visit www.sexwise.org.uk

Information for young people can be found at www.brook.org.uk

You can find details of sexual health clinics and services on these websites:

- England, www.nhs.uk
- Wales, www.nhsdirect.wales.nhs.uk
- Scotland, www.nhsinform.scot
- Northern Ireland, www.sexualhealthni.info

You can find details of general practices and pharmacies in England at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland you can find details of general practices at www.nhsinform.scot and in Northern Ireland at www.hscni.net

A final word

This booklet can only give you general information.

The information is based on evidence-based guidance produced by The British Association of Sexual Health and HIV (BASHH) and Public Health England.



the sexual health charity



sexwise.org.uk

www.fpa.org.uk

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If you'd like information on the evidence used to produce this booklet or would like to give feedback email feedback@fpa.org.uk

