

Denver Health Guideline for the Treatment of Gonococcal and Chlamydial Infections

	Gonorrhea <u>and</u> Chlamydia treatment **CDC now recommends empiric chlamydial therapy in all patients treated for gonorrhea ^{1,2**}	Chlamydia treatment ONLY
Uncomplicated Infections of Cervix, Urethra, and Rectum	<p><i>Ceftriaxone 250mg IM once (preferred)</i> OR <i>Cefixime 400mg PO once</i></p> <p>PLUS</p> <p><i>Azithromycin 1 gram PO once</i> OR <i>Doxycycline 100mg PO BID x 7 days</i></p>	<p><i>Azithromycin 1 gram PO once</i> OR <i>Doxycycline 100mg PO BID x 7 days</i></p>
Disseminated and all other types	<i>Treatment varies, consult ID or refer to STD clinic as appropriate</i>	
PLEASE NOTE: Given the high incidence of repeat infection in gonorrhea-infected patients, clinicians should advise all patients with gonorrhea to be retested 3 months after treatment.		
Recommended therapy IF: <u>Severe cephalosporin allergy</u> (anaphylaxis, respiratory distress, Stevens Johnson Syndrome):	<i>Azithromycin 2 grams PO once</i>	<i>Azithromycin 1 gram PO once</i> OR <i>Doxycycline 100mg PO BID x 7 days</i>
<u>Pregnancy</u>	<p><i>Ceftriaxone 250mg IM once (preferred)</i> OR <i>Cefixime 400mg PO once</i></p> <p>PLUS</p> <p><i>Azithromycin 1 gram PO once</i></p>	<i>Azithromycin 1 gram PO once</i>
<u>Pregnancy AND severe cephalosporin allergy</u>	<i>Azithromycin 2 grams PO once</i>	<i>Azithromycin 1 gram PO once</i>
For partners of the patients in the Expedited Partner Therapy (EPT) Program (STD Clinic) OR patients in the SANE Program (ED), consider:	<p><i>Cefixime 400mg PO once</i> PLUS <i>Azithromycin 1 gram PO once</i></p>	<i>Azithromycin 1 gram PO once</i>

References: **(1)** MMWR Dec 17, 2010 / Vol. 59 / No. RR-12; **(2)** MMWR Weekly. July 8, 2011 / 60(26);873-877