It’s really important that you don’t have sex with your partner before they are tested and treated as you could become infected again.

What happens if my gonorrhoea is left untreated?

In men:
Gonorrhoea can spread from the urethra (the tube through which you pass urine) to the testicles and cause pain (a condition called epididymo-orchitis). In some rare cases this affects fertility.

In women:
Gonorrhoea may spread internally from the cervix (neck of the womb) to the uterus (womb), and then up into the fallopian tubes and ovaries. This can lead to pelvic infection and pain – a condition called Pelvic Inflammatory Disease (PID).

PID can lead to scarring of the fallopian tubes and increase the risk of infertility and ectopic pregnancy (a pregnancy that occurs outside the womb, usually in one of the fallopian tubes).

In both men and women:
Rarely gonorrhoea can spread to the blood (septicaemia) or joints and lead to serious infection.

How can I prevent myself from getting gonorrhoea again?

Use condoms every time you have sex. If you have a new partner it is a good idea for both of you to have a sexual health screen before any unprotected sex.

Gonorrhoea in pregnancy

If you are pregnant and you have gonorrhoea, it is important that you get it treated to prevent your baby catching the infection during childbirth. In newborn babies, gonorrhoea may cause redness of the eyes (conjunctivitis).

If you need to be treated while you’re pregnant, your doctor or nurse will make sure that the antibiotic prescribed is safe to take while you are pregnant.

If you need treatment while you’re pregnant, you should make sure that you are re-tested after finishing your gonorrhoea treatment. This is to make sure that you have a negative gonorrhoea test before you give birth, ensuring that your baby will not be infected.

You can order more copies of this leaflet free of charge from www.healthpromotion.ie
What is gonorrhoea?
Gonorrhoea is a curable bacterial infection caused by the bacteria *Neisseria gonorrhoeae*.

Gonorrhoea can infect the cervix (neck of womb), urethra (the tube through which you pass urine), the uterus (womb), fallopian tubes, ovaries, testicles, rectum (back passage), pharynx (throat) and sometimes the eyes.

Men will usually notice a discharge from the tip of the penis but women are less likely to have any symptoms.

How common is gonorrhoea?
Gonorrhoea is the second most common bacterial sexually-transmitted infection (STI) in Ireland.

It is found most frequently in young people under the age of 25 and in men who have sex with men (MSM).

How do I get gonorrhoea?
In most cases, gonorrhoea is passed from one person to another through:

- unprotected sex (oral, vaginal and anal)
- rimming (mouth-to-anus contact)
- using unwashed sex toys
- delivery of a baby (from mother to baby).

You cannot catch gonorrhoea by:

- hugging
- kissing
- swimming pools or saunas
- toilet seats
- sharing cutlery or towels.

What symptoms would I have with gonorrhoea?

**Men**

- Discharge or liquid from the tip of the penis
- Burning pain when passing urine
- 1 in 10 men have no symptoms.

Infections in the pharynx (throat) or rectum (back passage) usually go unnoticed.

Symptoms in men usually appear between 1 to 14 days after coming into contact with the infection.

**Women**

- 7 in 10 women have no symptoms.

Women may not notice anything wrong but they can still pass the infection on to their partner.

How can I be tested for gonorrhoea?
The type of test will depend on your symptoms.

**For men,** a urine sample is taken, and sometimes a swab is needed from your penis.

**For women,** a swab is taken from the vagina.

Sometimes, a swab is needed from your throat or rectum (back passage). Your doctor or nurse can do this and sometimes it will be explained to you by your doctor or nurse how to take the swab yourself.

How is gonorrhoea treated?
Gonorrhoea can be treated with antibiotics.

Treatment usually consists of a combination of two antibiotics. The first is usually injected into the bum muscle. The other is given as a single dose or a course of tablets to take orally (by mouth).

Sometimes you will be treated straight away, without waiting for the result of a gonorrhoea test. This will happen, for example, if your partner is known to be infected or if you have symptoms.

You will be asked to return for a repeat test to make sure the infection has gone. The repeat test is usually done two weeks after treatment.

What about my partner?
If you have gonorrhoea, your current partner (or partners) will also be offered testing and treatment.

It is important that all of the people you have recently been in sexual contact with are given the option to be tested and treated. Your doctor or nurse will discuss this with you.

When can I have sex again?
We recommend that you don’t have sex until 2 weeks after you have finished the treatment and you have repeated the test to confirm that you have cleared the infection.