Gonorrhoea - the basics

Gonorrhoea is a treatable sexually transmitted infection (STI) caused by bacteria. It is sometimes called “the clap”. Gonorrhoea can infect the cervix (neck of the womb), urethra (water passage), uterus (womb), fallopian tubes, ovaries, testicles, rectum (back passage), throat and sometimes eyes and joints. It is the second most common bacterial STI in the UK. It is found most often in people under the age of 25, in men who have sex with men, and in people living in large cities.

Common symptoms include discharge and pain in the end of the penis, the vagina or the back passage. Many people with gonorrhoea do not notice anything wrong.

You can get tested at any sexual health clinic and in some GP surgeries, pharmacies and contraceptive services. Home test kits can also be ordered online.

Gonorrhoea needs to be treated in a sexual health clinic to make sure you get the correct antibiotic, and make sure the infection is fully treated.

If you have gonorrhoea, you should have tests for other sexually transmitted infections as well.

How do you get gonorrhoea?

Gonorrhoea is passed on through:

- Vaginal, anal or oral sex, or sharing sex toys, with someone who has gonorrhoea
- Occasionally from genitals to fingers to eyes where it may cause an eye infection (conjunctivitis)
- To your baby during labour

You cannot get gonorrhoea from swimming pools, saunas or toilet seats, or from social contact like hugging, shaking hands or sharing meals.

What would I notice if I had gonorrhoea?

Most people who have gonorrhoea in the vagina or womb do not notice anything wrong. Some people may notice one or more of the following symptoms:

- Bleeding from the vagina between periods
- Bleeding from the vagina after sex
- Lower abdominal (tummy) pain, particularly during sex
- Burning or pain when passing urine
- A change in vaginal discharge

People with gonorrhoea in the penis usually (but not always) get symptoms. For example:

- Discharge from the tip of the penis
- Burning or pain when passing urine

Gonorrhoea usually does not cause symptoms in the throat.

Gonorrhoea can go unnoticed in the back passage (rectum). Sometimes there are symptoms such as:

- Bleeding or discharge from the back passage
- Pain or discomfort in the back passage, especially when going to the toilet

How do I get tested for gonorrhoea?

Testing for gonorrhoea in women and other people with a vagina:

- You can take a swab from your own vagina
- A doctor or nurse can take a swab from the vagina or cervix (neck of the womb) during an internal examination

Testing for gonorrhoea in the penis:

- The test is usually done on a urine sample
- If you have a discharge, a doctor or nurse will take a swab from the tip of your penis
- You should not pass urine for at least an hour before a urine sample or swab is taken

Testing from other areas of the body:

- Swabs may also be taken from the throat or back passage
- You can do these swabs yourself, or sometimes a doctor or nurse will need to take the swabs for you

Most tests for gonorrhoea take a few days. The doctor or nurse will tell you how and when to expect your results.

Some tests for gonorrhoea can be done straight away while you are still in the clinic.

If your first test shows that you have gonorrhoea, you will probably need further swabs to be taken when you go back for treatment. You will also need to have a throat swab taken. This is to make sure you get the right antibiotics.

How is gonorrhoea treated?

Gonorrhoea can be treated with antibiotics. The recommended treatment is usually given by one injection in the buttock.

Occasionally, more antibiotics are needed if the gonorrhoea does not go away after the first treatment.

All treatments from sexual health clinics are free and are given to you in the clinic.

Important information about your treatment

You should tell the person giving you treatment if you have any allergies, or if you have a fear of injections. Then they can give a different antibiotic.

The antibiotics are highly effective if taken correctly.

The antibiotics don't interfere with contraception.

What about my partner?

Gonorrhoea is passed on through sex. It is important that your current sex partner(s) are tested for gonorrhoea and other STIs too.

The clinic can contact your sex partners anonymously for you if you wish.

Some of your previous partners may also need testing. You will be advised about this when you go for treatment.

When can I have sex again?

You must not have sex again until seven days after both you and your partner(s) have taken your treatment. This means all types of sex, oral sex, and sex with a condom. This is to make sure you and your partner(s) do not become re-infected with gonorrhoea.

You might be advised to have another test 2 weeks later to check that the gonorrhoea has gone away completely.

What happens if gonorrhoea is left untreated?

More severe problems can occur if treatment is delayed. The infection may spread to the uterus (womb) and Fallopian tubes and cause pain and fever. This is called PID (pelvic inflammatory disease). PID can cause problems getting pregnant (infertility) or longer-term pain.

The infection can also spread to the testicles and the tubes that connect to the testicles. This can cause pain and swelling.

Rarely, gonorrhoea can also spread to the blood, skin or joints and lead to serious infection.

All these problems can be stopped by getting treated earlier.

How can I avoid getting gonorrhoea again?

It is possible to get gonorrhoea again. To stop this from happening, you should:

- Make sure your partner(s) have been treated before having sex with them again
- Use a condom for all vaginal, anal and oral sex
- Get yourself tested regularly, and ask your partners to do the same
- There is a vaccine that gives some protection against gonorrhoea. Ask at the clinic where you are treated if you should have this vaccine

Gonorrhoea in pregnancy

You can get gonorrhoea when you are pregnant. It is important that gonorrhoea is treated properly so that it is not passed on to the baby. The tests and treatment are similar to when you are not pregnant. Your doctor, nurse or midwife will discuss things in more detail with you.

Notes

This leaflet was produced by the Clinical Effectiveness Group of the British Association for Sexual Health and HIV (BASHH). The information in the leaflet is based on the 'UK National Guidelines on the Management of infection with Neisseria gonorrhoeae (2025)' published by BASHH. More information: BASHH: www.bashh.org/guidelines. The leaflet was developed following The Information Standard principles developed by NHS England. More information: https://www.england.nhs.uk/tis/about/the-info-standard/.

If you would like to comment on this leaflet, e-mail us at: admin@bashh.org.uk. Please type 'Gonorrhoea PIL' in the subject box.