

Gonorrhoea

The basics

Gonorrhoea is a sexually transmitted infection (STI) caused by bacteria. It can affect the cervix (entrance to the womb), urethra (where you pee through), womb, fallopian tubes, testicles, rectum (back passage), throat and, rarely, the eyes or joints. Many people have no symptoms.

How do people get gonorrhoea?

Gonorrhoea is passed on through vaginal, anal or oral sex, sharing sex toys, occasionally from genitals to fingers and eyes, and from mother to baby during labour. You cannot catch it from toilet seats, swimming pools, towels, hugging or sharing food.

What symptoms might I notice?

Many people have no symptoms. When they do occur, they may include bleeding between periods or after sex, lower tummy pain, pain during sex, burning or pain when peeing, or changes in vaginal discharge. In the penis, symptoms may include discharge from the tip or pain when peeing. In the rectum, symptoms may include discharge, bleeding or discomfort. Gonorrhoea in the throat usually causes no symptoms.

How is gonorrhoea tested?

Testing is simple. A self-taken vaginal swab or a swab during an examination may be used. For the penis, a urine sample or a swab from the tip may be taken. Swabs may also be taken from the throat or rectum. Most results take a few days. If your test is positive, you may need extra swabs to ensure you receive the most effective antibiotic.

How is it treated?

Gonorrhoea is treated with antibiotics, usually given as a single injection in the buttock. Treatment is free at sexual health clinics. Tell the clinician if you have allergies or are worried about injections so they can discuss alternatives.

What about my partner(s)?

Your current partner(s) should be tested and treated. The clinic can contact partners anonymously if you prefer. Some previous partners may also need testing.

When can I have sex again?

Avoid all sex – including oral sex and sex with condoms – until seven days after both you and your partner(s) have completed treatment. You may be asked to return for a test to confirm the infection has cleared.

What happens if it isn't treated?

If untreated, gonorrhoea can cause pelvic inflammatory disease (PID), infertility or long-term pain, painful infection of the testicles, and rarely serious infection in the blood, skin or joints. Early treatment prevents these complications.

How can I avoid getting it again?

Make sure partners are treated before having sex again. Use condoms for vaginal, anal and oral sex. Test if you have symptoms, especially with new partners. There is a vaccine that offers some protection against gonorrhoea. Ask your clinic whether it is suitable for you.

Gonorrhoea in pregnancy

Gonorrhoea can be safely treated during pregnancy. Treating it reduces the chance of passing it to your baby. Your doctor, nurse or midwife will discuss the best approach.

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.

For more information regarding BASHH:

www.bashh.org/guidelines

The leaflet was developed following The Information Standard principles developed by NHS England.

If you would like to comment on this leaflet, e-mail us at:

admin@bashh.org.uk. Please type 'Gonorrhoea PIL'

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