

Presumptive oral treatment of uncomplicated anogenital gonorrhea infection in the absence of ready access to injectable treatment during the COVID-19 crisis, New York City, 2020

Update (April 24, 2020): Oral regimens recommended for gonorrhea treatment (e.g., Cefixime, Azithromycin) may be difficult to find in local pharmacies. When prescribing, please make sure the pharmacy has the medication(s) in stock or can get it the next day.

	First choice oral regimen ^{1,2}	Second choice oral regimen ^{1,2,3}
Men		
Men who have sex with women only	Cefixime 400 mg PO x 1, PLUS Azithromycin 1 gram PO x 1	Cefpodoxime 400 mg PO q12 hours x 2 doses, PLUS Azithromycin 1 gram PO x 1
Men who have sex with men (MSM) and transgender women ⁴	Cefixime 800 mg PO x 1, PLUS Doxycycline 100 mg PO BID x 7 days ⁵	Cefpodoxime 400 mg PO q 12 hours X 2 doses, PLUS Doxycycline 100 mg PO BID x 7 days ⁵
Women		
Non-pregnant ⁶	Cefixime 400 mg PO x 1, PLUS Azithromycin 1 gram PO x 1	Cefpodoxime 400 mg PO BID x 1 day, PLUS Azithromycin 1 gram PO x 1
Pregnant	Cefixime 400 mg PO x 1, PLUS Azithromycin 1 gram PO x 1	Cefpodoxime 400 mg PO BID x 1 day, PLUS Azithromycin 1 gram PO x 1
Allergy to penicillins or cephalosporins⁷		
Non-pregnant	Azithromycin 2 grams PO x 1	Call the NYC Health Department for clinical consultation at 347-396-7959.
Pregnant	Azithromycin 2 grams PO x 1	Call the NYC Health Department for clinical consultation at 347-396-7959.
¹ Presumptive oral gonorrhea treatment regimens presented here include antibiotic coverage for concurrent chlamydial infection, which is assumed, absent lab testing.		

²Doxycycline can be substituted for azithromycin in all regimens EXCEPT those for pregnant women. Alternatives for pregnant women include amoxicillin, erythromycin base or erythromycin ethyl succinate (see the Centers for Disease Control and Prevention (CDC) Sexually Transmitted Diseases (STD) Treatment Guidelines for chlamydial infection and pregnancy at cdc.gov/std/tg2015/chlamydia.htm).

³Cefpodoxime has lower efficacy than cefixime in treating gonorrhea, especially oropharyngeal infection.

⁴Treatment regimens for MSM are of higher dose and longer duration to provide adequate coverage for possible pharyngeal or rectal infection.

⁵Azithromycin 1 gram orally can be substituted for doxycycline 100 mg PO BID x 7 days.

⁶Cefixime and Cefpodoxime use is acceptable in lactating women.

⁷Closely assess history of penicillin or cephalosporin allergy. Allergic reactions to first-generation cephalosporins occur in <2.5% of persons with a history of penicillin allergy and are uncommon with third-generation cephalosporins (e.g., cefixime or cefpodoxime). Use of cefixime or cefpodoxime is contraindicated in persons with a history of an IgE-mediated penicillin allergy (e.g., anaphylaxis, Stevens Johnson syndrome, toxic epidermal necrolysis).