

Updated Gonorrhea Treatment

Update to York Region health care professionals as of February 26, 2025

The Public Health Agency of Canada (PHAC) has updated the preferred treatment for uncomplicated gonorrhea infections, including urethral, endocervical, vaginal, rectal and pharyngeal, for individuals aged ten and older in the [Canadian Guidelines on Sexually Transmitted Infections](#). The preferred treatment is a single dose of ceftriaxone 500 mg intramuscular injection.

Ceftriaxone 500 mg IM (monotherapy)

The new preferred single-dose treatment of ceftriaxone 500 mg IM replaces the dual treatment of ceftriaxone 250 mg IM plus azithromycin 1 g PO. This change was made due to increasing gonorrhea resistance. There will no longer be Ontario-specific gonorrhea treatment guidance.

Alternative treatments are currently under review. In the meantime, refer to the [Canadian guidelines for gonorrhea treatment](#). If there is a concurrent infection with chlamydia, or if it has not been ruled out, refer to the [Canadian guidelines for chlamydia treatment](#).

Ceftriaxone 500 mg vials are currently not available in Canada. Please continue using 250 mg vials; two vials will be required to treat an individual with gonorrhea. This can be administered in one or two injections, as outlined in the reconstitution guide on the second page.

Culture and test of cure is recommended

To assess drug sensitivity, it is recommended to collect a specimen for culture when feasible and perform NAAT testing for increased diagnostic sensitivity.

The guidelines also recommend completing a Test of Cure (TOC) for **all** cases of gonorrhea for all positive sites, particularly if regimens other than ceftriaxone 500 mg IM are used:

- TOC using NAAT can be done 3-4 weeks after completion of treatment
- TOC using culture can be done at least 3 days after completion of treatment
- If suspecting treatment failure more than 3 weeks after treatment, use both NAAT and culture

Order free Sexually Transmitted Infection medication from York Region Public Health

To order publicly funded sexually transmitted infection (STI) medication, complete the [order form](#) and fax it to 905-940-4541, email OnDutyPHN@york.ca or call the Sexual and Blood Borne Infections On Duty Line 1-877-464-9675 ext. 74214.

Resources

- York Region Public Health: [Sexual Health and Blood Borne Infections Information for Health Professionals](#)
- PHAC: [Canadian Guidelines on Sexually Transmitted Infections](#)
- Public Health Ontario (NAAT testing): [Chlamydia trachomatis/Neisseria gonorrhoeae \(CT/NG\) – Nucleic Acid Amplification Testing \(NAAT\)](#)
- Public Health Ontario (culture): [Neisseria gonorrhoeae – Culture, Reference Identification and Susceptibility](#)

CEFTRIAXONE FOR INTRAMUSCULAR INJECTION

DOSAGE

Type of Infection	Route	Dose	Frequency
Uncomplicated <i>Neisseria gonorrhoea</i> (cervical/urethral, pharyngeal & rectal)	IM	500 mg*	Single Dose

*Each vial contains 250 mg Ceftriaxone

ADMINISTRATION

Intramuscular

- Administered by **DEEP INTRAGLUTEAL INJECTION** (not deltoid)
- No more than 1 g to be injected in single site is recommended

Reconstitution

Pain is lessened when reconstituted with 0.9 mL 1% Lidocaine Solution (alternate diluent is sterile water).

ONE INJECTION	TWO INJECTIONS
1. Draw up 1.8 mL of 1% Lidocaine Solution (or Sterile Water) using 3 mL syringe	1. Draw up 1.8 mL of 1% Lidocaine Solution (or Sterile Water) using 3 mL syringe
2. Add 0.9 mL of 1% Lidocaine Solution to each vial of Ceftriaxone 250 mg	2. Add 0.9 mL of 1% Lidocaine Solution to <u>each</u> vial of Ceftriaxone 250 mg
3. Agitate vials until all powder is dissolved	3. Agitate vials until all powder is dissolved
4. Draw up the diluted product from both vials in a SINGLE 3 mL syringe	4. Draw up vial #1 using a 2 mL syringe
5. Ensure that 2 mL of medication has been drawn into the syringe from the 2 reconstituted vials	5. Discard the needle used to draw up the medication and attach 1.5 inch 21-gauge needle to syringe
6. Discard the needle used to draw up the medication and attach 1.5 inch 21-gauge needle to syringe	6. Repeat steps 4 and 5 for vial #2

STABILITY AND STORAGE RECOMMENDATIONS

Ceftriaxone powder should be stored at a controlled room temperature (between 15-30°C) and protected from light.

For Intramuscular Use

Solutions should be reconstituted immediately before use. If storage is required, these solutions may be stored under refrigeration and should be used within 48 hours.

For further information, refer to [product monograph](#) from Sandoz Canada Inc.