

Single-drug regimen now advised for uncomplicated gonorrhea

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(HealthDay)—A single 500-mg intramuscular dose of ceftriaxone is

recommended for treatment of uncomplicated urogenital, anorectal, and pharyngeal gonorrhea, according to updated guidelines published in the Dec. 18 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Noting that 2010 guidelines recommended a single 250-mg intramuscular dose of ceftriaxone and a single 1-g oral dose of azithromycin for treatment of uncomplicated gonococcal infections of the cervix, urethra, and rectum, Sancta St. Cyr, M.D., from the CDC in Atlanta, and colleagues updated previous guidelines for treatment of sexually transmitted infections caused by *Neisseria gonorrhoeae*. The recommendation was reevaluated based on increasing concern for antimicrobial stewardship and the potential impact of dual therapy on commensal organisms and concurrent pathogens, as well as consideration of a low incidence of ceftriaxone resistance and increased incidence of azithromycin resistance.

The authors recommend a single 500-mg intramuscular dose of ceftriaxone for uncomplicated urogenital, anorectal, and pharyngeal [gonorrhea](#). Concurrent treatment with doxycycline (100 mg orally twice a day for seven days) is recommended in cases in which chlamydial infection has not been ruled out.

"The high frequency of [pharyngeal](#) gonorrhea with substantial underscreening and the increased understanding of wide individual pharmacokinetic and pharmacodynamic variability has contributed to the [recommendation](#) for the increased ceftriaxone dose," the authors write.

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