

Dear Colleague,

This letter serves as the Georgia Department of Public Health, STD program update on antibiotic resistant gonorrhea and introduction of the “Gonorrhea Flow Chart for Healthcare Providers” as a reference guide, which includes updated treatment guidelines.

The Centers for Disease Control and Prevention (CDC) began monitoring the emergence of antibiotic resistant gonorrhea in the United States with the Gonococcal Isolate Surveillance Project (GISP) in 1986. In the [Antibiotic Resistance Threats in the United States, 2013](#) report, CDC listed *Neisseria gonorrhoeae* as one of three organisms posing the highest threat to human health. Although antibiotic resistant gonorrhea has been concentrated on the west coast of the United States, it is clear from CDC’s threat assessment that public health professionals across the country, including Georgia, need to be concerned. The attached flow chart can help determine if a case is resistant.

Providers can prevent the spread of antibiotic resistance of *N. gonorrhoeae* by:

- Reporting all gonorrhea cases within seven days to your [local district health office or through SendSS](#) (disease reporting should include patient demographics, lab testing and treatment).
- Prescribing dual antibiotic therapy for all gonorrhea cases - **250 mg Ceftriaxone in a single intramuscular dose and 1 g Azithromycin orally in a single dose**. Both medications should be administered together on the same day, preferably simultaneously and under direct observation. Monotherapy is no longer recommended because of concerns over the ease with which *N. gonorrhoeae* can develop resistance to macrolides, and because several studies have documented azithromycin treatment failures. Additional guidelines for treatment shortages, individuals with allergies, pregnant women and children are on the attached flow chart, and also available at <http://www.cdc.gov/std/tg2015/default.htm>.
- Ensuring clients’ sexual partners are also treated appropriately to prevent further transmission.
- Recognizing possible resistant cases using the attached flow chart to guide the process and reporting these immediately to the district health department.
- Screening clients with risk factors: Individuals <25 years old, previous history of a STD, report of new or multiple partners, report of inconsistent condom use, men who have sex with men, sex workers or drug users.

Thank you for working with the Georgia Department of Public Health (DPH), STD Program to improve surveillance. If you have any questions or concerns, please contact your local district health office or call the DPH at 1-866-PUB-HLTH (1-866-782-4584).

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