Facts You Need to Know

Gonorrhea is a common bacterial sexually transmitted disease (STD). The infection can spread from the genital area to other parts of the body, such as the eyes and throat. Gonorrhea is also known as “the clap.”

About 700,000 people in the U.S. are infected with gonorrhea each year. Only about half of these infections are reported to the Centers for Disease Control and Prevention (CDC).

Gonorrhea is the second most frequently reported STD. Chlamydia is the first.

Men and women with gonorrhea have different symptoms. About 80–90% of newly infected males feel burning while urinating and have penile discharge. Some also have inflamed testicles.

Symptoms in women are usually mild or nonexistent. Women who do have symptoms often feel pain while urinating and have vaginal discharge or bleeding.

With early diagnosis and antibiotic treatment, gonorrhea can be cured. However, drug-resistant strains of the infection are increasing throughout the world, including the U.S., making treatment more difficult.

Untreated gonorrhea can have serious health consequences for both men and women. It can result in infertility, as well as chronic pain and problems with joints, the heart and the brain.

Pregnant women with untreated gonorrhea risk miscarriage, premature birth and damage to their newborns, such as blindness.

How Is Gonorrhea Transmitted?

Gonococcal bacteria infect the genital areas of the body, including the rectum. They can also infect the mouth. The disease is transmitted through contact with infected areas. Gonorrhea can then spread to other parts of the body, such as the eyes and throat.

The risk of getting gonorrhea increases with the number of sex partners—and with unprotected sex.

Who’s Likely to Get Gonorrhea?

Teenagers, African Americans and Hispanics are at high risk for gonorrhea. Men who have sex with men (MSM) are also at high risk.

Young people aged 15–29 constitute three-quarters (75%) of all reported cases.

The rate of gonorrhea is highest in the South and among African Americans.

Many people who have gonorrhea also have chlamydia.

Since the creation of a national gonorrhea control program in the mid-1970s, rates of gonorrhea in the U.S. have significantly declined—from about one million new cases a year to 700,000. The decline has been highest among older white adults. Disease rates for teenagers, African Americans and Hispanics remain high.

Costs and Consequences

The direct medical costs of treating gonorrhea in the U.S. are $56 million per year. The indirect costs from lost wages and productivity are much higher.

Though gonorrhea can be cured with antibiotics, untreated gonorrhea can cause serious problems in both men and women. Women can develop pelvic inflammatory disease (PID), a complication that can cause infertility, chronic pain and tubal pregnancy.

Men can develop an infection of the testicles (epididymitis), which can result in infertility. Men can also develop bladder and prostate gland problems.

In both men and women, untreated gonorrhea can spread to the joints or blood, causing serious, life-threatening conditions.

Pregnant women with untreated gonorrhea can pass the infection to their babies during delivery. Neonatal gonorrhea can cause blindness in newborns, as well as joint infection and a potentially fatal blood infection.

A person with gonorrhea has a greater risk of getting HIV, the virus that causes AIDS. HIV is more contagious from an infected person with gonorrhea than it is from an HIV-infected person without gonorrhea.
Prevention and Treatment Basics

- Outside of sexual abstinence, the surest way to avoid getting gonorrhea is to refrain from sexual contact with an infected person or to be in a long-term, mutually monogamous relationship with an uninfected person.
- Using condoms regularly and correctly can significantly decrease the risk of gonorrhea.
- A simple lab test can diagnose gonorrhea.
- Several types of antibiotics can cure gonorrhea. However, drug-resistant strains of the disease are increasing in many parts of the world, including the U.S., making treatment more difficult.
- A national program, the Gonococcal Isolate Surveillance Project (GISP), monitors strains of drug-resistant gonorrhea and determines treatment therapies. In 2001, GISP found 21 percent of gonorrhea strains to be resistant to antibiotics such as penicillin and tetracycline.
- High-risk young women should be screened regularly for gonorrhea, even if they have no symptoms.
- People with gonorrhea usually also have other STDs, especially chlamydia. They should be tested for these diseases and treated.
- Pregnant women should be screened for gonorrhea and treated with antibiotics as soon as they are diagnosed.