

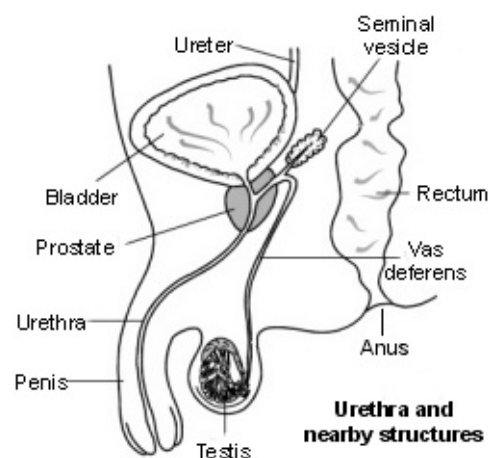
Non-gonococcal Urethritis

If you suspect that you have non-gonococcal urethritis (NGU), see a doctor even if symptoms go without treatment. Medicines called antibiotics usually clear the infection. Your sexual partner(s) should also be treated, even if they have no symptoms. You should not have sex until you have finished treatment.

What is urethritis?

The urethra is the tube between the bladder and the end of the penis. Urethritis means inflammation of the urethra.

- **Gonococcal urethritis** is caused by a germ (bacterium) called *Neisseria gonorrhoeae*. This is one type of sexually transmitted infection. See separate leaflet called Gonorrhoea, which describes gonorrhoea in more detail.
- **Non-gonococcal urethritis (NGU)** is due to causes other than gonorrhoea. This used to be called nonspecific urethritis (NSU). This leaflet describes NGU further.
- **Some men have both** gonococcal and non-gonococcal urethritis at the same time.



What causes non-gonococcal urethritis?

- **Infection with chlamydia** causes about half of cases of NGU. Chlamydia is a germ (bacterium) that is usually caught by sexual contact with an infected person. You can pass chlamydia on during vaginal, anal or oral sex.
- **Various other bacteria or viruses** which are sexually transmitted can cause NGU.
- **Anon-infective problem** is, rarely, the cause. For example, injury from a catheter (a thin, flexible, hollow tube), surgery to the tube between the bladder and the end of the penis (the urethra), a narrowing of the urethra (stenosis) or conditions affecting the lining of the urethra can cause inflammation.
- **No cause** can be found in about 3 in 10 cases. Sexually transmitted infections that are not identified by tests are probably the cause of some of these but not all. However, it is not possible to say which of these cases are due to infection and which are not.

Who gets urethritis?

You are at higher risk of getting urethritis if you are sexually active, aged under 35 and have had a recent partner change. Men who have sex with men and those who have unprotected vaginal intercourse are also at higher risk.

What are the symptoms of non-gonococcal urethritis?

- A white fluid (discharge) from the end of the penis is common but does not occur in every case.
- Pain or burning when you pass urine. This may be confused with a urine infection.
- Irritation inside the penis.
- A feeling of wanting to pass urine frequently.
- In a small number of cases the infection travels up the tube between the bladder and the end of the penis (the urethra) to the testicles (testes) and causes pain and swelling in one or both testes.
- A rare complication is a type of arthritis which can be triggered by NGU. It may be due to the immune system over-reacting to some germs (bacteria) that can cause NGU.

- Up to half of men with chlamydial infection (the most common cause of NGU) do not have any symptoms.

The symptoms may clear over time, even without treatment. This may take up to six months but can be just a couple of weeks or so. However, without treatment, bacteria that cause NGU often remain in the urethra. It is just that the symptoms may go.

Therefore, even if symptoms go, there is a good chance that you can pass on the infection if you are not treated.

Do I need tests?

You will normally be advised to have tests if NGU is suspected - even if symptoms go. You may be referred to a local genitourinary (GUM) clinic for this. Some GPs now also provide treatment for sexual health conditions as an 'enhanced service'. You can also go to the local GUM clinic without a referral from your GP. (See the end of the leaflet for details.)

A urine specimen may be taken to try to identify the cause of the infection. You may also be advised to have tests for other sexually transmitted infections. This might be a swab from the tube between the bladder and the end of the penis (the urethra), or blood tests. Men who have sex with men may also be advised to have a swab from the back of the throat (pharynx) and rectum.

What is the treatment for non-gonococcal urethritis?

A course of medicines called antibiotics usually clears NGU. The antibiotic prescribed may depend on which germs (bacteria) are likely to be found (often chlamydia) and whether other infections are also present. One antibiotic is given as a large single dose - azithromycin. The other is taken twice-daily for seven days - doxycycline.

If no bacteria are found by the tests, you may still be advised to take a course of antibiotics if you have symptoms of NGU. Infection is still the likely cause, even if a bacterium cannot be identified.

Most people get better with antibiotic treatment. It is important to finish the course.

Does my sexual partner need treatment?

Yes. They should be tested for infection, even if they do not have any symptoms. A course of medicines called antibiotics is usually advised for sexual partners, even if the tests are negative, because:

- Many women who are infected with chlamydia do not have symptoms. If this is left untreated, it can cause complications at a later time, such as a serious infection of the womb (uterus), called pelvic inflammatory disease, and infertility.
- Germs (bacteria) that cause NGU are often passed on during sex. Some of these bacteria may cause pelvic inflammatory disease in women. Tests for bacteria are not foolproof. A course of antibiotics helps to make sure that any possible infection is cleared.
- If your sexual partner is infected and not treated, the infection can be passed back to you.

If you have NGU without symptoms, then you may have had it for some time. In this situation, any sexual partners within the previous six months should be tested and treated.

Follow-up

A doctor or healthcare professional will often want to know that treatment has worked. It is common to be reviewed a couple of weeks after you start treatment, to check that symptoms have gone. Sometimes re-testing and a second antibiotic medicine are needed if symptoms persist.

You should not have sex until both you and your sexual partner(s) have finished treatment.

Can non-gonococcal urethritis be prevented?

Wearing a condom during sex (including anal and oral sex) helps to prevent the spread of sexually transmitted infections. The risk of sexually transmitted infections increases with the number of changes of sexual partner.

Note: if you suspect that you have NGU or any other sexually transmitted infection, then contact your local GUM clinic or see your GP. You can go to the local GUM clinic without a referral from your GP. You can ring the local hospital or health authority and ask where the nearest clinic is. It may also be listed in the phone book under 'Genito-Urinary Medicine'.

Further help & information

FPA

50 Featherstone Street, London, EC1Y 8QU

Web: www.fpa.org.uk

BASHH - British Association for Sexual Health and HIV

Web: www.bashh.org

Further reading & references

- [Guidelines on Urological Infections](#); European Association of Urology (Mar 2013)
- [Sexually Transmitted Infections in Primary Care](#); Royal College of General Practitioners and British Association for Sexual Health and HIV (Apr 2013)
- [Urethritis - male](#); NICE CKS, September 2009
- [Chlamydiae.com](#)
- [National Chlamydia Screening Programme](#); Public Health England

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