

Gonorrhea, Chlamydia, and Syphilis

Infection with *gonorrhea* and *chlamydia* causes two of the most common *sexually transmitted diseases (STDs)*. *Syphilis*, another STD, occurs less often, but can be serious if it is not treated. STDs can be passed by vaginal, anal, or oral sex.

This pamphlet will explain:

- Symptoms of these infections
- Their diagnosis and treatment
- How to keep from passing them to someone else
- How to prevent getting them

Gonorrhea and Chlamydia

Both gonorrhea and chlamydia can occur in the mouth, the genitals, and the rectum. The infections also can appear in the eyes of a newborn. In women, the most common place they grow is the cervix (the opening of the uterus). From there, they can spread into the uterus and fallopian tubes. They also may grow in the urethra (the opening through which urine is passed). Teenaged girls are at greater risk than adults for both of these infections, although they can occur at any age.

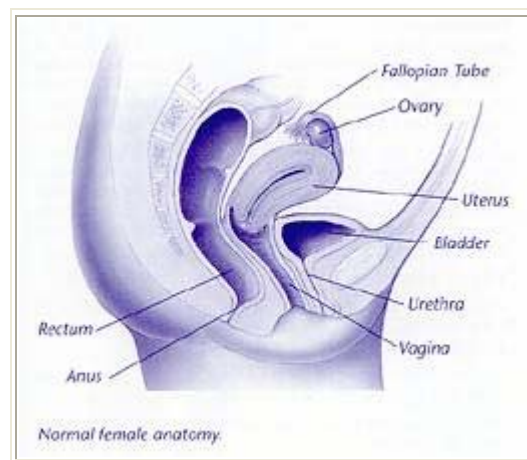
If you think you may be at risk for gonorrhea, chlamydia, or syphilis, get tested. These diseases will do the least harm if they are caught early.

Symptoms

Gonorrhea and chlamydia often have no symptoms. When symptoms do occur, they may show up 2 days to 3 weeks after infection. Common symptoms are listed in the box.

Diagnosis

To find out if you have gonorrhea or chlamydia, your doctor may take a sample from your throat, cervix, urethra, or another area where there may be an infection. You may have more than one STD at the same time. Thus, your doctor may test you for other STDs. In most cases, if you are found to have either gonorrhea or chlamydia, your doctor will go ahead and treat you for both diseases.



Treatment

Gonorrhea and chlamydia can be treated at the same time with antibiotics. It is important to take all of your medicine. Your partner also must be treated.

Symptoms of Gonorrhea and Chlamydia

The most common symptoms in women include:

- A yellow vaginal discharge
- Painful or frequent urination
- Burning or itching in the vaginal area
- Redness, swelling, or soreness of the vulva
- Pain in the pelvis or abdomen during sex
- Abnormal vaginal bleeding
- Rectal bleeding, discharge, or pain

The most common symptoms in men include:

- Discharge from the penis
- Pain and burning during urination
- Rectal bleeding, discharge, or pain

If you have any of these symptoms, see your doctor.

You can pass gonorrhea and chlamydia to your partner even while you are being treated. If you have either disease, avoid sexual contact until both you and your partner have finished treatment.

Health Risks

Both gonorrhea and chlamydia can cause severe problems:

- Pelvic inflammatory disease (PID) is an infection of the uterus, fallopian tubes, and other parts within the pelvis. This can cause chills, fever, and pelvic pain. PID may lead to ***infertility***. Some women may not have symptoms until PID has been present for a while.
- ***Ectopic pregnancy*** can result from the scarring of the fallopian tubes caused by PID. That might block them partly or completely. When this happens, an egg released by an ovary may not be able to move through the tube to the uterus.

Syphilis

Syphilis occurs in stages. It is more easily spread in some stages than in others. If not treated, syphilis may affect your heart, blood vessels, and nervous system. It can cause brain damage, blindness, paralysis, and even death. If syphilis is treated early, it will cause less damage.

Symptoms

Syphilis first appears as a painless sore called a chancre. It lasts 10 days to 6 weeks after contact with the disease. You also may have swollen lymph glands in the groin area.

If not treated, the next stage begins 1 week to 3 months later when a rash may appear. In most cases, the rash is on the soles of the feet and palms of the hands. Flat warts also may be seen on the *vulva*, outside the vagina. During this stage, you may feel like you have the flu. This stage is highly contagious.

The rash goes away in a few weeks or months, but that does not mean the disease is gone. It is still in your body. This is called the latent period. Years later, the disease may return.

How Syphilis Is Spread

Syphilis is spread by contact with a chancre. It also can be spread by touching the rash, warts, or infected blood during the second stage of infection. It enters the body through a cut in the skin or mucus membrane.

Diagnosis

In the early stages, your doctor can examine discharge from open sores to see if you have syphilis. A blood test also may be done. It may need to be done more than once. If you have other STDs, you may be given a blood test for syphilis.

Treatment

Syphilis is treated with antibiotics. If it is caught and treated early, long-term problems can be prevented. Antibiotics should clear up the infection. Because it is easy to spread the disease in the first and second stages, you should avoid sexual contact until your treatment and your partner's treatment is finished.

Problems During Pregnancy

If you are pregnant when you have gonorrhea, chlamydia, or syphilis, problems may occur for both you and your baby. The infection can be passed from mother to baby and may cause these problems:

- Preterm birth (birth before 37 weeks of pregnancy)
- Premature rupture of membranes (when the sac that surrounds the baby breaks before labor begins)
- ***Miscarriage***
- Eye infection in the baby, called conjunctivitis, which can lead to blindness
- Pneumonia
- Birth defects
- Death of the baby

Who Is At Risk?

Anyone who has had sex can get an STD. But the risk is higher in young women and those who:

- Have more than one sexual partner
- Have sex with someone who has or has had more than one partner
- Began sexual activity at an early age
- Have other types of STDs, either now or in the past
- Use drugs

Because of these risks, pregnant women are tested for syphilis. Pregnant women also may be offered testing for gonorrhea and chlamydia. If the mother is infected, she then can be treated during pregnancy.

Prevention

Even if you already have had gonorrhea, chlamydia, or syphilis, there are things you can do to keep from getting them again. These safeguards also help protect against other STDs:

- Limit your sexual partners. The more sexual partners you have, the higher your risk of getting STDs.
- Know your partner. Ask about your partner's sexual history. Ask whether he or she has had STDs. Even if your partner has no symptoms, he or she still may be infected.
- Use a condom. Both male and female condoms are sold over-the-counter in drug stores. They help protect against STDs (see box).
- Avoid contact with any sores on the genitals.

How to Use a Condom

If you and your partner have not used condoms before, talk about it before you have sex. Explain that condoms help protect both of you from STDs and prevent pregnancy. If your partner refuses to use a condom, you can refuse sex.



If you still want to have sex, you can use the female condom. Because it is new, not much is known about how well it prevents STDs. It may provide the same protection as a male condom.

To use the male condom, place the rolled-up condom over the tip of the erect penis. Hold the end of the condom to allow a little extra space at the tip. Unroll the condom over the penis. Right after ejaculation, hold the condom around the base of the penis. Withdraw the penis. Throw away the condom. Never reuse it.

To use the female condom, squeeze the inner ring between your fingers. Insert the condom into your vagina. Push the inner ring up until it is just behind the pubic bone. An inch of the open end should be outside your body. Right after ejaculation, squeeze and twist the outer ring. Pull the pouch out gently. Throw the



condom away. Never reuse it.

Finally...

If you think you may be at risk for gonorrhea, chlamydia, or syphilis, get tested. These diseases will do the least harm if they are caught early. Prompt treatment and protecting yourself against getting an STD again are the best ways to take care of your health.

Glossary

Chlamydia: A sexually transmitted disease that can cause pelvic inflammatory disease, infertility, and problems during pregnancy.

Ectopic Pregnancy: A pregnancy in which the fertilized egg begins to grow in a place other than inside the uterus, usually in the fallopian tubes.

Gonorrhea: A sexually transmitted disease that may lead to pelvic inflammatory disease, infertility, and arthritis.

Infertility: A condition in which a couple has been unable to get pregnant after 12 months without the use of any form of birth control.

Miscarriage: The spontaneous loss of a pregnancy before the fetus can survive outside the uterus.

Sexually Transmitted Disease (STD): A disease that is spread by sexual contact.

Syphilis: A sexually transmitted disease that is caused by an organism called *Treponema pallidum*; it may cause major health problems or death in its later stages.

Vulva: The lips of the external female genital area.