



Centre for Disease Control

NT HEALTH

Public Health Alert

Issued: 11 March 2024
Issued to: Health staff, NT wide

Penicillinase-producing *Neisseria gonorrhoeae* (PPNG) and treatment recommendations for gonorrhoea

Summary

- Since January 2023 increased cases of penicillin-resistant gonorrhoea (PPNG) have been detected in the Northern Territory (NT) and an outbreak was declared.
- All uncomplicated gonococcal infections across the NT should now be treated with ceftriaxone based treatment.
- When *Neisseria gonorrhoeae* produces the enzyme called penicillinase it is no longer susceptible to penicillin treatment and is called PPNG.

Treatment

- **All cases of suspected or confirmed** uncomplicated genital and anorectal gonorrhoea should be treated with:
 - **Ceftriaxone 500mg in 1.8mL 1% lignocaine IM single dose AND**
 - **Azithromycin 1g oral single dose**
- Collect **samples for culture and antibiotic sensitivity and testing for other STIs** including serology for HIV and syphilis.
- **Retest 3 months after treatment** as risk of reinfection is high.
- Amoxicillin, probenecid and azithromycin combinations (**ZAP packs**) are **no longer considered effective 1st line treatment** of gonorrhoea in the NT.

Contact tracing

Urgent contact tracing is needed. Sexual contacts in the previous 2 months should:

- Have a **full STI screen** (consider including a swab or urine for culture) AND
- Be **treated** on the same day **with ceftriaxone and azithromycin** as above.

Contact & advice

- Clinic 34 is the NT's specialist sexual health service and their staff can provide further clinical advice if needed. Contact clinic34.ths@nt.gov.au or via your local CDC unit.

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