

SEXUALLY TRANSMITTED DISEASES TREATMENT GUIDELINES (Part 1 of 4)

Generic	Brand	Form	Dosing Regimen
BACTERIAL VAGINOSIS¹			
Recommended			
clindamycin cream ²	Cleocin Vaginal Cream	2% vaginal cream	Adults: 1 applicatorful intravaginally at bedtime. <i>Nonpregnant:</i> treat for 3 or 7 days. <i>Pregnant (2nd or 3rd trimester):</i> treat for 7 days
	Clindesse	2% vaginal cream	Adults: 1 applicatorful intravaginally once
metronidazole	Flagyl	scored tabs	Adults: 500mg twice daily for 7 days
	MetroGel-Vaginal Vandazole	0.75% vaginal gel	Adults: 1 applicatorful once daily for 5 days
Alternative			
clindamycin	Cleocin	caps	Adults: 300mg twice daily for 7 days
	Cleocin Vaginal Ovules²	100mg vaginal supp	Adults: 1 supp at bedtime for 3 days
tinidazole	Tindamax	scored tabs	Adults: 2g once daily for 2 days or 1g once daily for 5 days
CERVICITIS³			
azithromycin	Zithromax	tabs, susp, packets	Adults: 1g once
doxycycline ⁴	—	tabs	Adults: 100mg twice daily for 7 days
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
CHLAMYDIA			
Recommended			
azithromycin ⁵	Zithromax	tabs, susp, packets	Adults, pregnancy, children: $\geq 45\text{kg}$ or $\geq 8\text{yrs}$: 1g once
doxycycline ⁴	—	tabs	Adults, children: $\geq 8\text{yrs}$: 100mg twice daily for 7 days
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
erythromycin base ^{6,7}	—	tabs	Children: $< 45\text{kg}$, <i>ophthalmia neonatorum, infant pneumonia:</i> 50mg/kg/day in 4 divided doses for 14 days
	Ery-Tab		
erythromycin ethylsuccinate	Eryc	caps	Children: $< 45\text{kg}$, <i>ophthalmia neonatorum, infant pneumonia:</i> 50mg/kg/day in 4 divided doses for 14 days
	E.E.S.	tabs, susp	
	E.E.S. Granules	susp	
	EryPed		
Alternative			
amoxicillin	—	tabs, caps, susp	Pregnancy: 500mg three times daily for 7 days
	Amoxil	caps, susp	
azithromycin	Zithromax	tabs, susp, packets	Neonates: <i>Ophthalmia neonatorum, infant pneumonia:</i> 20mg/kg/day once daily for 3 days
erythromycin base ^{6,7}	—	tabs	Adults, pregnancy: 500mg 4 times daily for 7 days or 250mg 4 times daily for 14 days
	Ery-Tab		
erythromycin ethylsuccinate	Eryc	caps	Adults, pregnancy: 800mg 4 times daily for 7 days or 400mg 4 times daily for 14 days
	E.E.S.	tabs, susp	
	E.E.S. Granules	susp	
	EryPed		
levofloxacin ⁸	—	tabs, soln	Adults: 500mg once daily for 7 days
ofloxacin	—	tabs	Adults: 300mg twice daily for 7 days
EPIDIDYMITIS⁹			
Etiology: chlamydia + gonorrhea			
ceftriaxone +	—	inj	Adults: ceftriaxone 250mg IM once + doxycycline 100mg orally twice daily for 10 days
doxycycline ⁴	—	tabs	
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
Etiology: chlamydia + gonorrhea + enteric organisms			
ceftriaxone +	—	inj	Adults: ceftriaxone 250mg IM once + levofloxacin 500mg orally once daily for 10 days
levofloxacin	—	tabs, soln	
ceftriaxone +	—	inj	Adults: ceftriaxone 250mg IM once + ofloxacin 300mg orally twice daily for 10 days
ofloxacin	—	tabs	

(continued)

SEXUALLY TRANSMITTED DISEASES TREATMENT GUIDELINES (Part 2 of 4)

Generic	Brand	Form	Dosing Regimen
EPIDIDYMITIS⁹ (continued)			
Etiology: enteric organisms			
levofloxacin	—	tabs, soln	Adults: 500mg once daily for 10 days
ofloxacin	—	tabs	Adults: 300mg twice daily for 10 days
GENITAL HERPES SIMPLEX			
acyclovir	—	tabs, caps, susp, inj	Adults: <i>First episode:</i> 400mg orally 3 times daily or 200mg orally 5 times daily for 7–10 days ¹⁰ <i>Episodic:</i> 400mg orally 3 times daily or 800mg orally twice daily for 5 days, or 800mg orally 3 times daily for 2 days <i>Suppressive:</i> 400mg orally twice daily <i>HIV episodic:</i> 400mg orally 3 times daily for 5–10 days <i>HIV suppressive:</i> 400–800mg orally 2–3 times daily <i>Pregnancy suppressive:</i> 400mg orally 3 times daily (start at 36wks of gestation) Neonates: 20 mg/kg IV every 8hrs for 14 days (skin, mucous membranes) or 21 days (disseminated disease involving CNS)
	Zovirax	susp	
famciclovir	—	tabs	Adults: <i>First episode:</i> 250mg 3 times daily for 7–10 days ¹⁰ <i>Episodic:</i> 125mg twice daily for 5 days or 1g twice daily for 1 day ¹⁰ or 500mg once then 250mg twice daily for 2 days <i>Suppressive:</i> 250mg twice daily <i>HIV episodic:</i> 500mg twice daily for 5–10 days <i>HIV suppressive:</i> 500mg twice daily
valacyclovir	Valtrex	scored tabs	Adults: <i>First episode:</i> 1g twice daily for 7–10 days ¹⁰ <i>Episodic:</i> 500mg twice daily for 3 days or 1g once daily for 5 days <i>Suppressive:</i> 500mg or 1g once daily <i>HIV episodic:</i> 1g twice daily for 5–10 days <i>HIV suppressive:</i> 500mg twice daily <i>Pregnancy suppressive:</i> 500mg twice daily (start at 36wks of gestation)
GENITAL WARTS (HPV)			
Recommended			
imiquimod ²	Aldara	5% cream	Adults: Apply at bedtime 3 times a week, up to 16 weeks
	Zyclara	3.75% cream	Adults: Apply at bedtime daily until total clearance or for up to 8 weeks
podofilox	Condylox	0.5% gel, soln	Adults: Apply twice daily for 3 days followed by 4 day break, up to 4 cycles
sinecatechins ²	Veregen	15% ointment	Adults: Apply ½ cm 3 times daily, up to 16 weeks
bichloroacetic acid	—	90% soln	Adults: Provider administered: Apply weekly if needed
trichloroacetic acid	—	80% soln	Adults: Provider administered: Apply weekly if needed
Alternative			
podophyllin resin in benzoin compound tincture	—	10–25%	Adults: Provider administered: Apply weekly if needed
GONOCOCCAL INFECTIONS			
Recommended			
ceftriaxone	—	inj	Adults: <i>Uncomplicated urogenital, rectal, pharyngeal, pregnancy¹¹:</i> (<150kg): 500mg IM once; (≥150kg): 1g IM once. <i>Conjunctivitis:</i> ceftriaxone 1g IM once + azithromycin 1g orally once Children: <i>Uncomplicated urogenital, rectal, pharyngeal:</i> (≤45kg): 25–50 mg/kg IV or IM once, max 125mg
Alternative			
gentamicin + azithromycin	—	inj	Adults: <i>Uncomplicated urogenital, rectal¹¹:</i> gentamicin 240mg IM once + azithromycin 2g once
cefixime	Suprax	tabs, susp	Adults: <i>Uncomplicated urogenital, rectal¹¹:</i> cefixime 800mg once
LYMPHOGRANULOMA VENEREUM			
Recommended			
doxycycline ⁴	—	tabs	Adults: 100mg twice daily for 21 days
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
Alternative			
erythromycin base	—	tabs	Adults: 500mg 4 times daily for 21 days
	Ery-Tab		
	Eryc	caps	

(continued)

SEXUALLY TRANSMITTED DISEASES TREATMENT GUIDELINES (Part 3 of 4)

Generic	Brand	Form	Dosing Regimen
NON-GONOCOCCAL URETHRITIS			
Recommended			
azithromycin	Zithromax	tabs, susp, packets	Adults: 1g once <i>Persistent, recurrent (doxycycline-treated):</i> 1g once
doxycycline ⁴	—	tabs	Adults: 100mg twice daily for 7 days
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
moxifloxacin	Avelox	tabs	Adults: <i>Persistent, recurrent (azithromycin failure):</i> 400mg once daily for 7 days
metronidazole ¹⁴	Flagyl	scored tabs	Adults: <i>Persistent, recurrent (T. Vaginalis prevalent):</i> 2g once
tinidazole	Tindamax	scored tabs	Adults: <i>Persistent, recurrent (T. Vaginalis prevalent):</i> 2g once
Alternative			
erythromycin base	—	tabs	Adults: 500mg 4 times daily for 7 days or 250mg 4 times daily for 14 days
	Ery-Tab		
	Eryc	caps	
erythromycin ethylsuccinate	E.E.S.	tabs, susp	Adults: 800mg 4 times daily for 7 days or 400mg 4 times daily for 14 days
	E.E.S. Granules	susp	
	EryPed		
levofloxacin	—	tabs, soln	Adults: 500mg once daily for 7 days
ofloxacin	—	tabs	Adults: 300mg twice daily for 7 days
PEDICULOSIS PUBIS			
Recommended			
permethrin	Nix	1% cream	Adults: Apply, wash off after 10mins; may repeat after ≥7 days
pyrethrins + piperonyl butoxide	Rid	0.33%/4% shampoo	Adults: Apply, wash off after 10mins; repeat in 7–10 days
Alternative			
ivermectin ¹⁶	Stromectol	tabs	Adults: 250mcg/kg once, repeat in 2 weeks
malathion	Ovide	0.5% lotion	Adults: Apply, wash off after 8–12hrs
PELVIC INFLAMMATORY DISEASE⁹			
Recommended			
cefotetan +	—	inj	Adults: cefotetan 2g IV every 12hrs + doxycycline 100mg orally or IV every 12hrs
doxycycline ⁴	—	inj, tabs	
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
cefoxitin +	—	inj	Adults: cefoxitin 2g IV every 6hrs + doxycycline 100mg orally or IV every 12hrs
doxycycline ⁴	—	inj, tabs	
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
clindamycin +	Cleocin	inj	Adults: clindamycin 900mg IV every 8hrs + gentamicin 2mg/kg IV or IM loading dose then 1.5mg/kg every 8hrs or 3–5mg/kg daily
gentamicin	—	inj	
ceftriaxone +	—	inj	Adults: ceftriaxone 250mg IM once + doxycycline 100mg orally twice daily for 14 days +/- metronidazole 500mg orally twice daily for 14 days
doxycycline ⁴ +/-	—	inj, tabs	
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
metronidazole	Flagyl	scored tabs	
cefoxitin +	—	inj	Adults: cefoxitin 2g IM once + probenecid 1g orally once in a single dose + doxycycline 100mg orally twice daily for 14 days +/- metronidazole 500mg orally twice daily for 14 days
probenecid +	—	scored tabs	
doxycycline ⁴ +/-	—	inj, tabs	
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
metronidazole	Flagyl	scored tabs	

(continued)

SEXUALLY TRANSMITTED DISEASES TREATMENT GUIDELINES (Part 4 of 4)

Generic	Brand	Form	Dosing Regimen
PELVIC INFLAMMATORY DISEASE⁹ (continued)			
Alternative			
ampicillin/sulbactam + doxycycline ⁴	Unasyn	inj	Adults: ampicillin/sulbactam 3g IV every 6hrs + doxycycline 100mg orally or IV every 12hrs
	—	inj, tabs	
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	

SCABIES			
Recommended			
ivermectin ¹⁶	Stromectol	tabs	Adults: 200mcg/kg once, repeat in 2 weeks
permethrin ¹⁵	—	5% cream	Adults, children: Apply, wash off after 8–14hrs

Alternative			
lindane ^{12,13}	—	1% lotion, cream	Adults: Apply 1oz. lotion or 30g cream, wash off after 8hrs

SYPHILIS			
Recommended			
penicillin G benzathine	Bicillin L-A	inj	Adults, pregnancy: <i>Primary, secondary, or early latent <1yr:</i> 2.4 million units IM once <i>Latent >1yr, unknown duration:</i> 2.4 million units IM weekly for 3 weeks, max 7.2 million units total Children: <i>Primary, secondary, or early latent <1yr:</i> 50,000 units/kg IM once, max 2.4 million units <i>Latent >1yr, unknown duration:</i> 50,000 units/kg IM once weekly for 3 weeks, max 7.2 million units total
penicillin G aqueous crystalline	—	inj	Adults: <i>Neurosyphilis, ocular syphilis:</i> 3–4 million units IV every 4hrs (18–24 million units/day) or continuous infusion for 10–14 days

Alternative			
doxycycline ⁴	—	tabs	Adults: <i>Primary, secondary, or early latent <1yr:</i> 100mg twice daily for 14 days <i>Latent >1yr, unknown duration:</i> 100 mg twice daily for 28 days
	Doryx	del-rel tabs	
	Vibramycin	caps, susp, syrup	
tetracycline	—	caps	Adults: <i>Primary, secondary, or early latent <1yr:</i> 500mg 4 times daily for 14 days <i>Latent >1yr, unknown duration:</i> 500mg 4 times daily for 28 days
penicillin G procaine + probenecid	—	inj	Adults: <i>Neurosyphilis, ocular syphilis:</i> penicillin G procaine 2.4 million units IM once daily + probenecid 500mg orally 4 times daily, both for 10–14 days
	—	scored tabs	

TRICHOMONIASIS			
Recommended			
metronidazole ¹⁴	Flagyl	scored tabs	Adults: 2g once <i>Persistent/recurrent:</i> initially 500mg twice daily for 7 days; 2g once daily for 7 days if initial recurrent regimen fails
tinidazole	Tindamax	scored tabs	Adults: 2g once <i>Persistent/recurrent:</i> 2g once daily for 7 days if initial recurrent regimen fails

Alternative			
metronidazole ¹⁴	Flagyl	scored tabs	Adults: 500mg twice daily for 7 days

NOTES

Key: caps = capsules, del-rel = delayed-release, HPV = human papillomavirus, inj = injection, supp = suppository, susp = suspension, tabs = tablets

¹ Treatment is recommended for all symptomatic pregnant women.

² Oil-based formulation may weaken latex condoms and diaphragms.

³ Consider concurrent treatment for gonococcal infection if at increased risk (<25 yrs, new sex partner, multiple sex partners, or a sex partner who has a STI).

⁴ Avoid in pregnancy, lactation, or children <8yrs.

⁵ Preferred for pregnancy

⁶ Erythromycin estolate is contraindicated in pregnancy.

⁷ Effectiveness of erythromycin treatment is approximately 80%, a second course of therapy may be required.

⁸ Contraindicated in pregnant or lactating women.

⁹ No response to therapy within 72 hrs needs re-evaluation; close follow-up is essential for suspected disease.

¹⁰ Treatment may be extended if incomplete healing after 10 days of therapy.

¹¹ Oral doxycycline 100mg twice daily for 7 days is recommended if chlamydia infection has not been excluded. During pregnancy, azithromycin 1g once is recommended for chlamydia.

¹² Contraindicated in pregnant or lactating women and children <10yrs.

¹³ Do not use after a bath; should not be used by persons with extensive dermatitis.

¹⁴ Pregnant patients can be treated with 2g single dose.

¹⁵ Preferred for infants and young children.

¹⁶ Off-label indication.

Not an inclusive list of medications, dosing regimens, formulations, and/or official indications. See drug monograph at www.eMPR.com and/or contact company for full drug labeling. Under certain clinical conditions (eg, impaired renal or hepatic function), the dose may need to be adjusted.

REFERENCES

Frieden TR, Jaffe HW, Cono J, et al. Sexually Transmitted Diseases Treatment Guidelines, 2015. *MMWR Recommendations and Reports*. 2015;64(3):1-135. Available at: <http://www.cdc.gov/std/tg2015>.

St. Cyr S, Barbee L, Workowski KA, et al. Update to CDC's Treatment Guidelines for Gonococcal Infection, 2020. *MMWR Morb Mortal Wkly Rep*. 2020;69:1911–1916. DOI: <http://dx.doi.org/10.15585/mmwr.mm6950a6>

(Rev. 4/2021)