Non-gonococcal urethritis (NGU) – the basics

Non-gonococcal urethritis (NGU) is the name given to inflammation of a man’s urethra (water passage) when gonorrhoea is not the cause. Most cases of NGU are caused by sexually transmitted infections (STI) of which chlamydia is the most common. In about one third of cases, no infection can be found.

NGU can nearly always be cured, usually with antibiotics.

Men may notice a discharge from the tip of the penis, pain on passing urine or discomfort or itching at the tip of the penis or just inside the urethra.

Most women whose partners have NGU will not notice anything wrong.

Prompt treatment is recommended to prevent more serious problems, particularly when chlamydia is the cause of NGU: In men the infection can spread to the testicles, causing pain and swelling.

In women the infection can spread to the ovarian (Fallopian) tubes and ovaries, possibly leading to infertility.

Testing is available at any specialised sexual health or genitourinary medicine (GUM) clinic. However, most GUM clinics cannot test for all the causes of NGU.

If you have NGU we recommend that you should have routine tests for other STI, including syphilis and HIV.

How common is NGU?
There are about 100,000 cases a year in the UK.

What causes NGU?
About two thirds of cases of NGU are caused by an STI. The commonest of these is chlamydia which can be passed on through unprotected vaginal, oral or anal sex. A small number of cases are caused by a protozoon (a tiny germ like a bacterium) called Trichomonas vaginalis or the cold sore viruses Herpes simplex 1 and 2.
In about a third of NGU cases, no STI is found. The problem may sometimes be caused when adenoviruses (which normally live in the throat) get into the urethra during oral sex. The bacteria that cause urinary tract infections (cystitis) can sometimes cause NGU. In many cases, no cause for NGU can be found. This could be explained by the presence of an infection which we don’t currently know about or cannot test for. On the other hand, there may be no infection at all; the problem might be caused by chemicals or other irritants.

NGU cannot be caught by kissing, from swimming pools, by sharing towels, saunas or from toilet seats.

What would I notice if I had NGU?

Men will usually notice:
• a discharge from the tip of the penis
• a burning pain when passing urine
• irritation or itching at the tip or opening of the penis

Women will usually not notice anything wrong. However, if their sexual partner’s NGU is caused by chlamydia and the woman also has chlamydia infection, she may notice:
• vaginal bleeding after sex or between periods
• pain in the lower tummy
• an abnormal vaginal discharge
• pain or burning when passing urine

How do I get tested for NGU?

Men
If you have symptoms a doctor or nurse will take a swab from the tip of the penis and make a slide for examination under the microscope. The results of the microscope examination will be given to you before you leave the clinic. You will also be asked to give a urine sample.

Women
Women are only tested when their partner has NGU. A chlamydia test can be done on a vaginal swab taken by the woman herself, or a swab from the cervix (neck of the womb) taken by a doctor or nurse.

You will be told about how you will get your final test results before you leave the clinic.
**How is NGU treated?**
NGU is treated with antibiotics, usually in tablet form.

**Important information about your treatment**
The antibiotics are highly effective if you take them correctly. If your symptoms go away after treatment you do not need to come to the clinic again, provided no other infection is found. All treatments from sexual health clinics are free and are given to you in the clinic.

**What about my partner?**
As NGU is sometimes caused by an STI it is important that your sexual partner is tested for STI, including chlamydia. Your partner will usually be given antibiotic treatment, even if they have no symptoms. If you wish, the clinic can contact your partner for you without mentioning your name.

**When can I have sex again?**
If you are treated with a seven day course of antibiotics you should not have sex (including sex with condoms and oral sex) until you and your partner have taken all your tablets. If you are treated with a single dose of antibiotics, you should wait until one week after you have taken the treatment.

**What happens if my NGU is left untreated?**
That depends on the cause of your NGU. The risk of complications is higher when NGU is caused by chlamydia. The infection can spread from the urethra to the testicles, causing pain and swelling (a condition called epididymo-orchitis—see the BASHH leaflet ‘Epididymo-orchitis’). Very rarely this may affect fertility.

In a few cases when NGU is caused by chlamydia, pain and swelling in joints like the ankle and knee may develop. This is called ‘reactive arthritis.’ Sometimes the eyes can also become red and painful (conjunctivitis).

Female partners infected with chlamydia can develop infection in the womb, the fallopian (or ovarian) tubes and ovaries. This is known as pelvic inflammatory disease or PID. PID can lead to scarring of the fallopian tubes which increases the risk of ectopic pregnancy (where the pregnancy develops in the ovarian tube, not the womb) and tubal infertility.
Can I get NGU again?
Yes you can.
To prevent this make sure that your partner is treated before having sex with them again.
Protect yourself with new partners by using a condom for all anal, oral and vaginal sex.
If you meet a new partner make sure that you both have a sexual health screen or ‘MOT’ before you have sex without condoms.