



UNIVERSITY OF MARYLAND UNIVERSITY HEALTH CENTER

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Nongonococcal Urethritis (NGU) in Men: Causes, Diagnosis, and Treatment

Q. What does the name nongonococcal urethritis mean?

A. The urethra is the tube in the penis that carries urine from the bladder to the opening of the penis. Urethritis means that this tube is inflamed - that is, it has been injured in some way and is reacting with a discharge, perhaps, or with some discomfort during urination. But there may be no noticeable signs of infection or inflammation at all. If the cause of the inflamed urethra is one disease-causing bacterium called a gonococcus, then the inflammation is called gonorrhea. If it is some other microorganism or another cause altogether, it's called nongonococcal urethritis - NGU for short.

Q. What causes NGU?

A. In the past, NGU was sometimes called a "strain," or was thought to be due to heavy alcohol intake or spicy foods; it was even said that too much sexual activity (or too little) could cause it. But today we know the truth; NGU is an infection transmitted by unprotected oral, anal, or vaginal sexual contact. Several different types of bacteria and other microorganisms can cause NGU. In up to three-fourths of cases, the culprit is either *Chlamydia trachomatis*, *Ureaplasma urealyticum*, or both. A handful of other microorganisms, including herpes simplex virus, cause a few cases of NGU.

Q. How do you get NGU?

A. Like gonorrhea, one usually gets NGU through sexual contact with an infected partner. That's true for homosexual men as well as heterosexual men. Despite the popular belief, there's no evidence that frequent masturbation or squeezing of the penis can cause the disease. Research has also discounted food allergies, heavy use of coffee or other caffeine-containing products, alcohol, and marijuana as possible causes of NGU.

Q. How common is NGU?

A. In most states there is no requirement to report cases of NGU to health authorities, so the exact number of cases is not known. But experts in sexually transmitted infections agree that NGU is extremely common - at least 3-10 times, as common as gonorrhea.

Q. Who is most likely to get NGU?

A. As for all STIs, NGU is most common in men with more than one sex partner, in those who change sex partners frequently, and in those whose partners are at high risk for STI. Any man can get NGU if his sexual partner is carrying the bacteria that cause it. Some cases are even caused by bacteria that are normally carried in his partner's vagina, rectum, or mouth. The causes of NGU can be carried for many months and even several years.

Therefore, the appearance of NGU in a monogamous man does not necessarily mean his partner has been unfaithful.

Q. What are the symptoms of NGU in men?

A. Both gonorrhea and NGU have similar symptoms: a discharge from the penis and itching or burning during or at the end of urination. Problems usually begin between one and six weeks after catching the infection. These symptoms are usually less severe in NGU than in gonorrhea, but that's not a certain way to tell the two diseases apart. Examination and testing are necessary to make the diagnosis.

Q. Do women get NGU?

A. NGU is sexually transmitted, and women commonly are infected with the bacteria that cause NGU. But the condition is not called NGU in women. Many infected women have no symptoms, and the physical examination may be normal, which is why condom use is important.

Q. How is NGU diagnosed?

A. NGU is diagnosed by examining the patient to see if abnormal discharge is present, examining the discharge under a microscope, and testing the discharge for gonorrhea and chlamydia. Sometimes the urine is tested as well.

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Q. Can someone have both gonorrhea and NGU?

A. Many people with one STI have others as well. In fact, infection with both gonorrhea and NGU is common in men with urethritis – even in cases when both conditions hardly cause any symptoms. Tests for both NGU and gonorrhea are done before starting treatment.

Q. Should the sex partners of men diagnosed with NGU also be tested?

A. Yes. This is very important. 30-60% of all female partners can test positive for chlamydia even if they show no symptoms. Other organisms such as mycoplasma or gardnerella may be present and are not usually tested for. To be safe, most doctors recommend treatment of partners even if tests are negative.

Q. What is the treatment for NGU?

A. The best treatment is one of the tetracycline or erythromycin classes of antibiotics.

Q. Does antibiotic treatment prevent reinfection with NGU?

A. If taken properly, antibiotics will usually cure NGU, but they don't protect against getting it again. It's important to use condoms for any sexual contact until it is certain that there is no remaining trace of NGU, and that one's partner is free of infection as well. Avoiding sex until both partners are infection free is the way to avoid reinfection.

Q. Can NGU reappear even if it's been treated?

A. For reasons that aren't clear, some cases of NGU persist or recur, despite treatment. In those cases, a doctor may investigate again for other causes of the symptoms. If no other explanation is found, a longer course of antibiotics may be prescribed to get rid of the bacteria that survived previous treatment.

Q. What happens if NGU is left untreated?

A. Although symptoms may disappear without treatment in some men, they can be infectious to a sexual partner. A small percentage of cases will go on to develop complications. These can include epididymitis, a painful swelling of the testicles; blockage of the urine passage due to scarring and Reiter's syndrome, a kind of arthritis. Women infected with chlamydia often get pelvic inflammatory disease, a serious infection of the fallopian tubes that can lead to sterility. For the sake of one's own health and the health of a sex partner, and to prevent the spread of this sexually transmitted disease, men with symptoms of NGU should immediately cease sexual activity and seek medical attention.