Chlamydia symptoms & treatment

FAST FACTS

- Chlamydia is a sexually transmitted infection (STI) that is normally passed on through sex without a condom or sharing sex toys with someone who has the infection.
- Using male or female condoms and dental dams during sex will help to protect you from getting chlamydia.
- Chlamydia is often symptomless however if left untreated it can lead to long-term health problems.
- Chlamydia is easily treated with antibiotics.
- Chlamydia can be passed on from mother to child during pregnancy, so it’s important for pregnant women to get tested.

What is chlamydia?

Chlamydia is a sexually transmitted infection (STI) caused by a bacteria called chlamydia trachomatis.

Usually it doesn't cause any symptoms and can be easily treated with antibiotics. However, if it isn’t treated early it can spread to other parts of your body and lead to long-term health problems.

How do you get chlamydia?

Chlamydia is usually passed on through unprotected vaginal, anal or oral sex.

Chlamydia can be passed on through genital contact. This means you can get chlamydia from
someone who has the infection if your genitals touch, even if you don’t have sex or ejaculate (cum).

You can also get chlamydia if you come into contact with infected semen (cum) or vaginal fluid, or get them in your eye.

Chlamydia can’t be passed on through kissing, hugging, sharing towels or using the same toilet as someone with the infection.

How do you prevent chlamydia?

Using a new male or female condom or dental dam every time you have sex is the best way to protect against chlamydia.

Chlamydia can be passed on by sharing sex toys. Always cover sex toys with a new condom and wash them after use to reduce your risk of getting chlamydia and other STIs.

It’s important to regularly test for chlamydia, even if you don’t have any symptoms, especially if you’ve had multiple sexual partners.

The contraceptive pill and other types of contraception (apart from condoms) won’t prevent you getting chlamydia, and neither will PrEP.

What are the symptoms of chlamydia?

Many people with chlamydia don’t have any symptoms. If you do get symptoms, you may not notice them until several weeks after infection. Other people might not have any symptoms for several months.

Signs of chlamydia in women include:

- increase in vaginal discharge
- pain or burning when urinating (peeing)
- pain during sex and/or bleeding after sex
- pain in the lower stomach – especially when having sex
- bleeding between periods and/or heavier periods.

Signs of chlamydia in men include:

- white, cloudy or watery discharge from the penis
- pain or burning when urinating
- pain and/or swelling in the testicles.

You can also get chlamydia infection in your anus, eyes and throat. For both men and women, this can cause pain, discharge or bleeding in the anus, or inflammation (redness) of the eye (called conjunctivitis). Chlamydia in the throat does not usually have any symptoms.
How do I test for chlamydia?

You can get tested for chlamydia even if you don’t have any symptoms.

Getting tested for chlamydia is easy and doesn’t hurt. A healthcare professional will ask for a urine (pee) sample and/or take a swab from the area that might be infected. This is usually the lower part of the womb (cervix) or the vagina for women, and the tip of the penis (urethra) for men. If you’ve had anal or oral sex, you may have a swab taken from your anus or throat.

In some countries you can get a self-testing kit to do at home.

If you test positive for chlamydia, it’s important to tell any recent sexual partner/s so they can also get tested, and treated if necessary. If you need advice about how to do this, speak to your healthcare professional. You should also test for other STIs.

When should I get tested for chlamydia?

If you have had sex without a condom, or you are worried about chlamydia or other STIs, get tested as soon as possible. However if you test within two weeks of having sex, you may need to repeat the test later as the infection may not always be detectable in the early stages.

How is chlamydia treated?

Chlamydia can be easily treated with a short course of antibiotics. You may be able to take all the antibiotics in one day, or over a week, depending on the type of treatment you are prescribed.

It’s important to not have sex until you and your current sexual partner/s have finished treatment. If you’ve had the one-day course of treatment, you should avoid having sex for seven days afterwards. Ask your healthcare professional when it’s safe to have sex again.

Remember that if you’ve been treated for chlamydia you are not immune and you can get infected again.

Long-term effects of untreated chlamydia

If left untreated, chlamydia can lead to other, sometimes serious, health problems.

In women, untreated chlamydia cause pelvic inflammatory disease (PID). PID can cause pelvic pain, infertility (inability to get pregnant), and ectopic pregnancy (pregnancy outside the uterus) which can be life-threatening. PID can be treated with antibiotics.

In men untreated chlamydia can cause swelling and pain in the testicles, and pain when urinating or during sex. Rarely, it can cause infertility in men.

Chlamydia can also cause reactive arthritis in both women and men – inflammation of the joints, and in some people, the urethra and the eyes (conjunctivitis).
Chlamydia and HIV

If you have been diagnosed with chlamydia you should also test for HIV. Having chlamydia increases your risk of getting HIV, as it causes inflammation and sores that make it easier for HIV to enter the body.

If you are living with HIV and not on treatment, having chlamydia can make you more likely to pass HIV on if you have sex without a condom. However, if you are on effective treatment and have an undetectable viral load, you will not be able to pass HIV on – having chlamydia will not affect this.

If you’re taking antiretrovirals, it’s important to discuss with your doctor how the chlamydia treatment may interact with your HIV drugs.

If you’re worried about HIV infection, find out everything you need to know in our HIV Transmission and Prevention section.

HELP US HELP OTHERS

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Sources:
NHS (2018) 'Chlamydia'
WHO (2016) 'Guidelines for the treatment of Chlamydia trachomatis'
NAM (2017) 'Chlamydia'