Epididymitis +/- orchitis

Organisms:
- Sexually transmitted pathogens e.g. C. trachomatis, N. gonorrhoeae
- Urinary tract pathogens e.g. E.coli.
- Mumps virus

Practice points:
Ensure testicular torsion is excluded in any case of pain and/or swelling of the epididymis or testis.
Consider mumps orchitis if history of headache, fever or parotid swelling 7-10 days prior to testicular swelling. Scrotal involvement can occur in the absence of any systemic symptoms of mumps. Mumps is a notifiable disease.

A detailed sexual history is required in all cases. Sexually transmitted pathogens are more likely in <35yrs, and urinary pathogens are more likely in >35yrs but there is overlap between these groups dependant on sexual history, e.g. recent new partner, or recent procedure e.g. urological instrumentation.

Treatment is based on likely source of infection:
- If sexually-transmitted infection is a more likely possibility, during daytime hours do not start antibiotics and contact an integrated sexual health centre to discuss management and make a same day appointment.
- If out-of-hours, take the following specimens and treat empirically until results available. If an STI is suspected then all sexual contacts, male or female, will also require treatment and follow-up in an integrated sexual health centre.
  - If urethral discharge present, take a urethral swab for MC&S.
  - First pass urine for C. trachomatis and N. gonorrhoeae NAATs.
  - A mid-stream urine sample and review result to check that empirical treatment is appropriate.
- If urinary tract pathogens more likely, send a pre-treatment MSU and start empirical antibiotics.

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<thead>
<tr>
<th>Drug</th>
<th>Dose</th>
<th>Duration of TX</th>
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<tbody>
<tr>
<td>If sexually transmitted organisms a possibility:</td>
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<tr>
<td>Daytime: contact an integrated sexual health centre for same day appointment.</td>
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<td>Out-of-hours take specimens as above and treat as below:</td>
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<tr>
<td>Ceftriaxone</td>
<td>1g IM (add 1ml lidocaine 1% to each 250mg vial and give by deep IM injection only)</td>
<td>Single dose</td>
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<td>Plus</td>
<td>Doxycycline 100mg BD</td>
<td>14 days</td>
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If urinary pathogens more likely:
- Ofloxacin 200mg BD 14 days