Table 4.2: Common diagnostic tests (as of June 2012) for detection of N. gonorrhoeae

	Microscopy ^a	Culture	NAAT
Specimen types			
Endocervical swab	Yesa	Yes	Yes
Vaginal swab	No	Yes ^b	Yes (some assays)
Urine Female Male Urethral swab Rectal swab Oropharyngeal swab Conjunctival swab	No No Yesa No No Yes	No No Yes Yes Yes	Yesc Yes Yes Nod Nod
Performance			
Sensitivity ^e	Low-high ^a	Moderate-high	Very high
Specificitye	Moderate-high ^a	Very high	Moderate-very high
Other considerations			
Cost	Low	Moderate	High-very high
Instrumentation	Microscope	Routine microbiology	Large footprint
Throughput/automation	Moderate/no	Moderate/no	High/possible
Technical complexity	Low	Moderate	High
Level of laboratory infrastructure	Peripheral	Peripheral-intermediate	Intermediate-central
Multiple pathogens from one sample	No	No	C. trachomatis, T. vaginalis, and HPV on some platforms
Other comments		 Strict sample collection, transportation, and storage are crucial to maintaining viability This is the only method that allows antimicrobial susceptibility testing. 	NAATs generally have a superior sensitivity compared to culture, especially for pharyngeal and rectal samples. However, the specificity can be suboptimal, and confirmation using supplementary NAAT may be required.

 $HPV, \, human \, papillomavirus; \, NAAT, \, nucleic \, acid \, amplification \, test.$

^a Microscopy has high sensitivity and specificity in symptomatic men (with urethritis), low sensitivity in asymptomatic men, and endocervical infections, and is not recommended for vaginal, urine, rectal, or pharyngeal specimens.

^b Not an ideal specimen, mainly applied for prepubertal girls or women who have had a hysterectomy.

 $^{^{\}circ}$ Urine is not the ideal sample, due to suboptimal sensitivity, for detection of *N. gonorrhoeae* in women.

d There are no internationally licensed NAAT for use with extra-genital samples, but there is increasing evidence that NAATs are more sensitive than culture at these sites. It is recommended that a positive NAAT test for rectal and pharyngeal specimens be confirmed with a supplementary test (NAAT with another target sequence) to avoid false-positive results.

Sensitivity and specificity estimates vary widely depending on the different sensitivity and specificity of assays of the same methodology as well as assays used for comparison (the "gold standard").