Methods From January 2010 to November 2012, all females and MSM were routinely tested for ano-genital, oropharyngeal and urogenital Chlamydia trachomatis (Ct) and Neisseria gonorrhoeae (Ng). Data were collected on demographics and sexual behaviour.

Results The study population comprised 4829 consults. Overall Ct positivity was 6.8% (131/1937) in females and 10.0% (289/2892) in MSM, for Ng this was 4.3% (n = 83) and 6.7% (n = 193) respectively. The proportion isolated ano-genital Ct was 16.8% (n = 22) in females and 63.0% (n = 182) in MSM, for Ng this was 10.8% (n = 9) and 44.0% (n = 85) respectively. Combined urogenital and ano-genital Ct was 45.0% (n = 59) in females and 13.5% (n = 39) in MSM, for Ng this was 19.3% (n = 16) and 11.4% (n = 22) respectively. Isolated oropharyngeal Ct was 9.9% (n = 13) in females and 5.9% (n = 17) in MSM, for Ng this was 53.0% (n = 44) and 31.6% (n = 61) respectively. Isolated urogenital Ct was 28.2% (n = 37) in females and 17.6% (n = 51) in MSM, for Ng this was 16.9% (n = 14) and 13.0% (n = 25) respectively.

Discussion Anorectal and oropharyngeal STD were often isolated and thereby not coincidentally treated with urogenital STD. Therefore urogenital testing only is insufficient. Furthermore, these isolated infections remain undiagnosed if routine ano-genital/oropharyngeal testing is lacking. Combined ano-genital/uro-genital Ct/Ng were also highly prevalent, highlighting the importance of an effective treatment for simultaneous genital and extragenital Ct/Ng.

Conclusion This is a first basic study on homosexual group, summarising their problems in our region.