



**DATE:** November 19, 2021  
**TO:** Healthcare Providers  
**FROM:** Dr. Maggie Park, Public Health Officer

**Please distribute to all providers and relevant medical staff in your office.**

## **HEALTH ADVISORY**

### **Rising Rates of Syphilis and Congenital Syphilis**

**California has experienced an alarming increase in syphilis in recent years. This concerning trend has been accompanied by an increase in congenital syphilis cases.** In 2019, 446 congenital syphilis cases were reported in California, the highest number of cases since 1993.

**Incidence rates of syphilis and congenital syphilis in San Joaquin County have been significantly higher than state and national rates.** In 2019:

- Rate of primary and secondary syphilis in San Joaquin County was 27.8 per 100,000 to rank 43rd among all counties *nationwide*—a 600% increase of syphilis from 2013.
- With 40 cases of congenital syphilis, San Joaquin County ranks 2nd among all counties in California—with 6.6 times the number of cases from 2013.

Prevention of congenital syphilis is an urgent public health matter. **Clinicians can prevent congenital syphilis by diagnosing and treating mothers without delay, as well as evaluating and treating their babies, per CDC STD Treatment Guidelines.**

### **ACTIONS REQUESTED OF CLINICIANS**

- **Confirm HIV and syphilis status of all pregnant patients** with documented labs or providing opt-out HIV and syphilis testing for those receiving services at: emergency departments; urgent care clinics; jails; mental health, drug treatment, and syringe services programs; and street medicine or homeless outreach programs.
- **For all pregnant women, test for syphilis three times during pregnancies:** at the initial prenatal visit in the first trimester, during the third trimester, and again at delivery. Screen all women who have a still birth.
  - Treat syphilis in pregnant women as soon as infection is identified.
  - Penicillin (benzathine penicillin G [Bicillin LA] 2.4 mu IM) is the only therapy proven to be effective in pregnancy. Treatment at least 30 days before delivery is 98% effective at preventing congenital syphilis.
  - If a woman is allergic to penicillin, she must be de-sensitized prior to treatment with penicillin. Contact PHS if you have any treatment questions.



- **Screen asymptomatic adults at increased risk** due to a history of incarceration or commercial sex work, living in a low-income area in San Joaquin County, African American and Latino women, and male 30 years old and younger.
  - Men who have sex with men (MSM): At least annually, every 3-6 months if increased risk
  - Transgender and gender diverse people: Consider at least annually
  - Those on HIV PrEP: Every 3-6 months depending on risk (MSM Q3 months)
  - Persons with HIV: At first HIV evaluation; at least annually thereafter
  - Anyone diagnosed with chlamydia or gonorrhea
  
- **Report all syphilis cases to San Joaquin County Public Health Services (PHS) within one working day, as required by State law.**
  - Use the Confidential Morbidity Report (CMR) found at: [www.sjcphs.org/disease/documents/cdph110a.pdf?2](http://www.sjcphs.org/disease/documents/cdph110a.pdf?2)
  - Fax completed CMR to (209) 468-3495.

### **Additional Resources**

California Guidelines for Screening and Treatment in Pregnancy:

[www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/CaliforniaSTD-Sxand-Tx-inPregnancy2017.pdf](http://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/CaliforniaSTD-Sxand-Tx-inPregnancy2017.pdf)

CDPH Dear Colleague Letter – Call to Expand HIV and Syphilis Testing for Pregnant Women:

[www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/DCL\\_perinatal\\_Nov\\_16\\_2021\\_final\\_ADA.pdf](http://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/DCL_perinatal_Nov_16_2021_final_ADA.pdf)

**For more information, call PHS Community Services at (209) 468-3845.**