Congenital Syphilis in North Carolina
Reported Syphilis Case Data, 2016

Syphilis is increasing in North Carolina

- Early syphilis (primary, secondary, and early latent) cases among women increased from 2012 to 2015, and congenital syphilis has also been increasing.
- There were 11 probable congenital syphilis cases (9.1 cases per 100,000 live births) reported in 2015. This is a 70% increase from 2014.

*Preliminary data show 18 congenital syphilis cases (14.9 cases per 100,000 live births) in 2016, which is a 63% increase from 2015.

Syphilis and congenital syphilis is also increasing in the US

- Nationally, congenital syphilis rates have been increasing since 2012. The national rate was 12.4 cases per 100,000 live births in 2015.
- Increases in congenital syphilis parallel increases in primary and secondary syphilis among women during 2014-2015 and during 2011 – 2015 (see figure on left). *

*CDC. 2015 STD Surveillance Report

Congenital syphilis is preventable!

Among women with syphilis who gave birth to an infant with congenital syphilis in North Carolina in 2015:

- Although most mothers accessed some prenatal care, none of the mothers had full screening for syphilis, as indicated by North Carolina testing requirements.
- 60% of mothers were infected during pregnancy, emphasizing the importance of full syphilis screening during pregnancy.
- Mothers AND their partners must be treated to prevent reinfection.
What is North Carolina doing to decrease babies born with congenital syphilis?

- Program alerts are sent out to medical providers as new information is available.
- State and local health departments are collaborating to increase local awareness and train local providers.
- More information about testing for syphilis, especially among pregnant women can be accessed at: North Carolina testing requirements.

What CLINICIANS can do

- Ensure that ALL pregnant women receive full syphilis screening (first prenatal visit, between 28-30 weeks gestation, and at delivery).
  - Perform a thorough sexual health and risk assessment at every prenatal visit.
  - Testing for syphilis during first and third trimesters allows the mother to be treated prior to birth and can prevent congenital syphilis.
  - Testing at delivery ensures that all potential congenital syphilis infections are identified and treated appropriately.
  - Newborns should not be discharged from the hospital until the serologic status of the mother is known.
  - Treat all sexual partners of pregnant women diagnosed with syphilis to prevent re-infection.

- For any questions, refer to the STD Clinical Consultation line: https://www.stdccn.org/

- For provider training resources, refer to the National Network of STD Clinical Prevention Training Centers: http://nnptc.org/

What YOU can do

- If you are sexually active make sure your care provider is offering you regular screening for all STDs.
- If you are diagnosed with syphilis, notify your sexual partners of the need to seek testing and treatment.