Syphilis Infections in North Carolina
Reported Syphilis Case Data, 2015

Reported syphilis infections have increased rapidly over the past few years.

Syphilis Infections by Gender and Diagnosed Year
2006-2015

- 1,866 early syphilis (primary, secondary, and early latent) infections were diagnosed in North Carolina. This is a 64% increase from 2014, where only 1,137 early syphilis infections reported.
- Severe clinical outcomes are being seen (see page 2).

Syphilis is increasing in many different groups. The majority of cases are among men, many of whom have HIV.

Syphilis among women and infants (congenital syphilis) is increasing.

Syphilis Infections by Gender and Diagnosed Year
2006-2015

Syphilis Rates among Women, 2012-2015

Congenital Syphilis Cases by Birth Year
2008-2015
Syphilis Infections in North Carolina
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Severe Outcomes of Untreated Syphilis

- There has been an increase in reported ocular syphilis cases, including cases resulting in severe or complete vision loss (42 cases in 2015, up from 21 in 2014)
- There has also been an increase in infants diagnosed with congenital syphilis, which can lead to birth defects and stillbirths (12 cases in 2015, up from 7 in 2014)

What CLINICIANS can do

- If you see patients who are sexually active and have visual changes or complaints, test for syphilis and refer patient for immediate ophthalmologic evaluation.

- Ensure that ALL pregnant women receive full syphilis screening (first prenatal visit, between 28-30 weeks gestation, and at delivery).
  - Many babies with congenital syphilis in 2015 and 2016 were born to mothers who received some, but not all, of the recommended screening tests.
  - 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.

- Screen syphilis patients for other sexually transmitted diseases including HIV.

What is North Carolina doing to decrease syphilis infections?

- 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

What YOU can do

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

Recommendations from the CDC 2015 STD Treatment Guidelines:

- Penicillin G is the preferred drug for treating people in all stages of syphilis.
- If allergic to penicillin, non-pregnant patients can be treated with doxycycline, while pregnant women must be desensitized to and then treated with penicillin.
- Preparation, dose, and length of treatment depends on the stage and clinical manifestations of syphilis.
- People with HIV and primary or secondary syphilis should be evaluated for treatment failure at 3, 6, 9, 12, and 24 months after treatment.

Data Source:
North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of June 1, 2016).