



Syphilis - Update for the King County Board of Health

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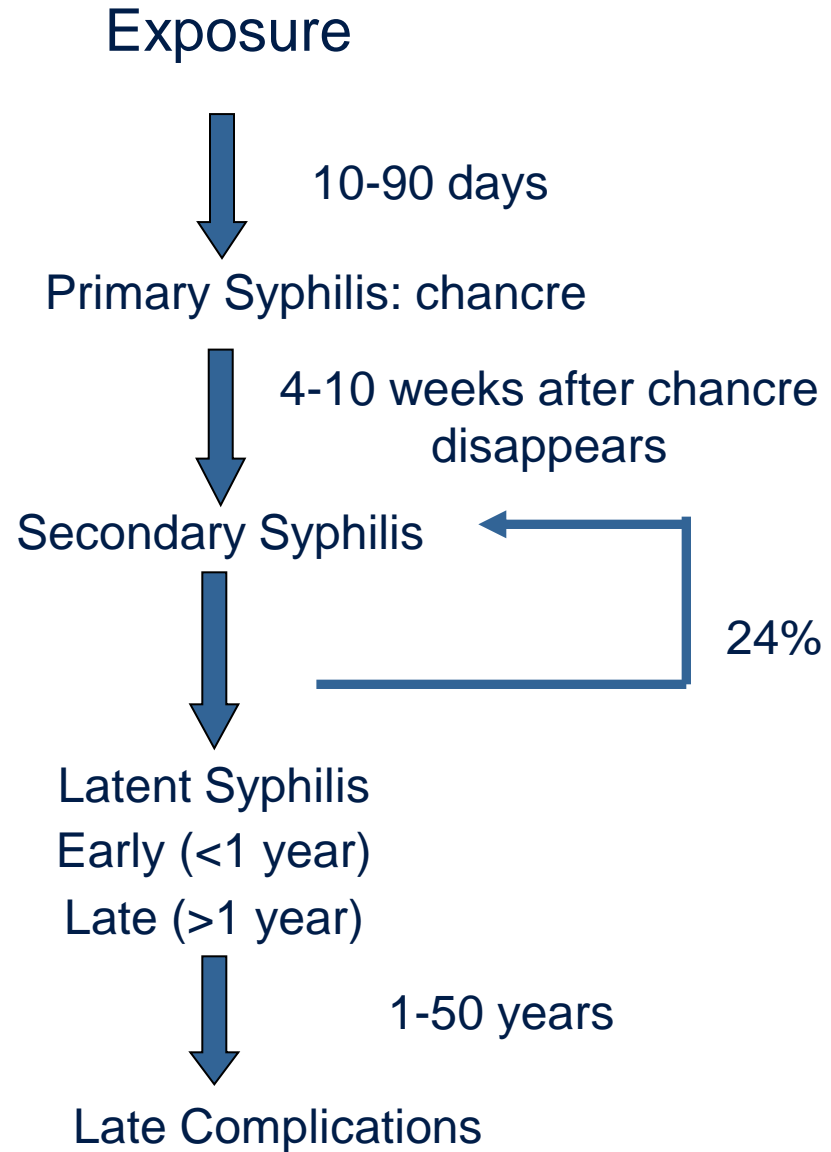
Background - Syphilis

Paul Ehrlich

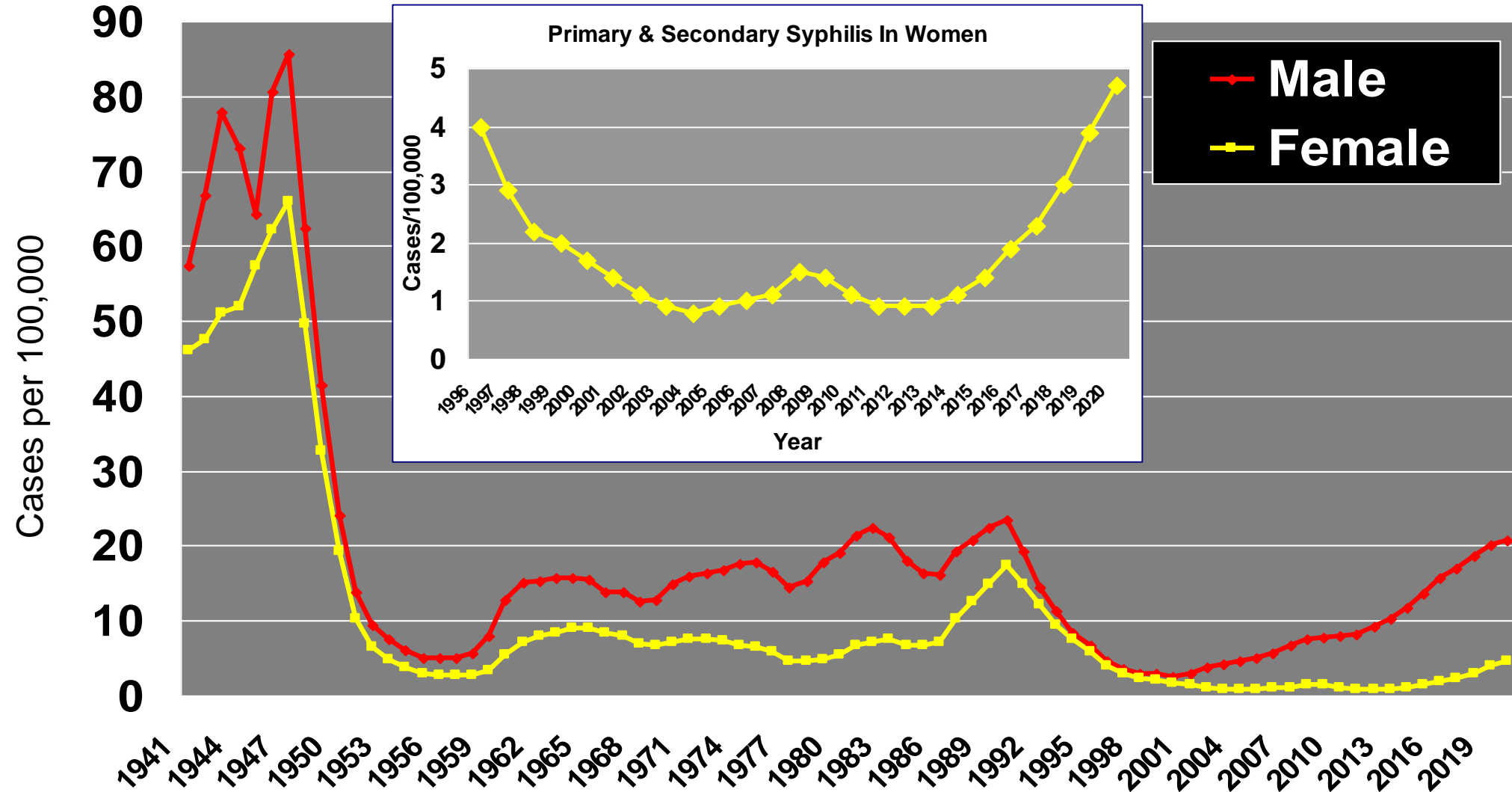
- Bacterial infection caused by *Treponema pallidum*
- Major cause of mortality, heart disease, mental illness, infant mortality in the pre-antibiotic era
- First effective antimicrobial was developed as a treatment for syphilis
 - Salversan (arsphenamine) – 1909



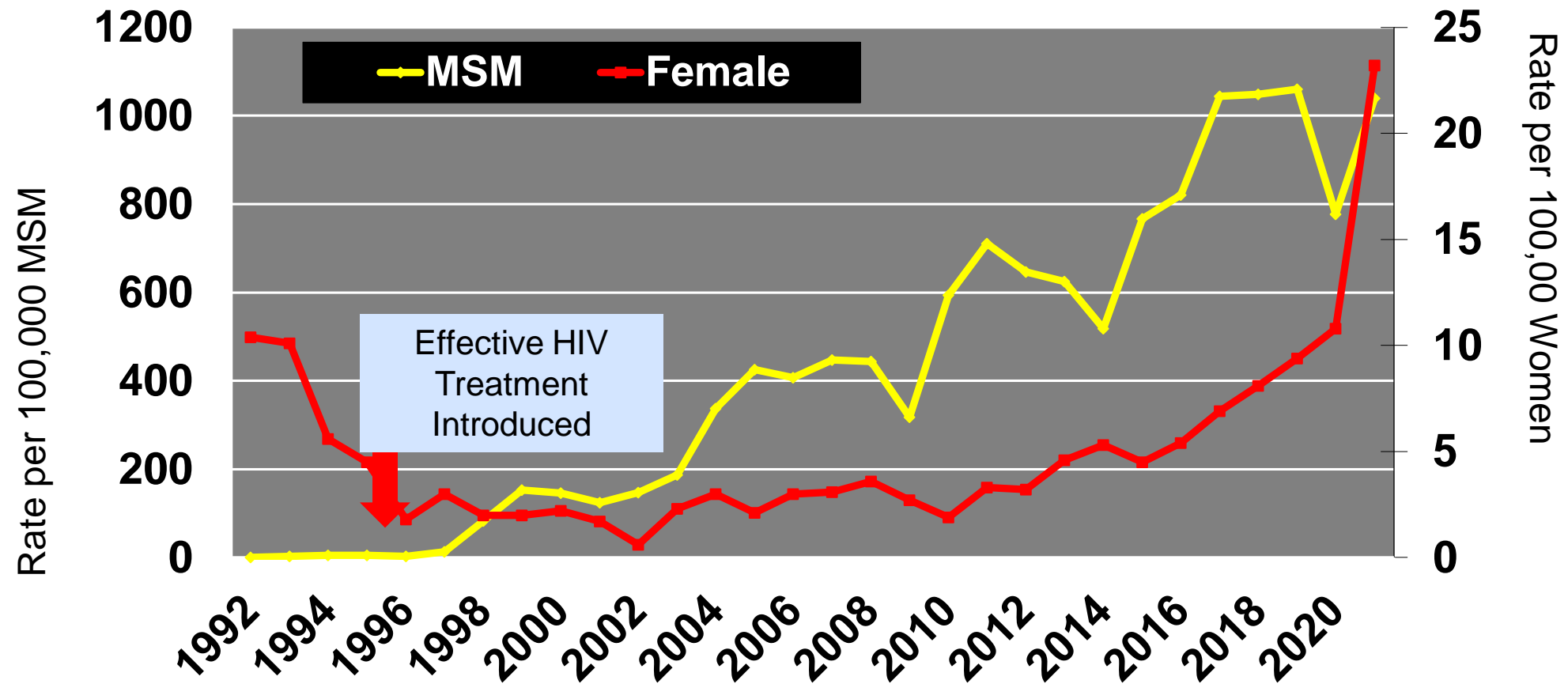
Natural History Syphilis



Rates of Primary & Secondary Syphilis per 100,000 in the United States, 1941-2020

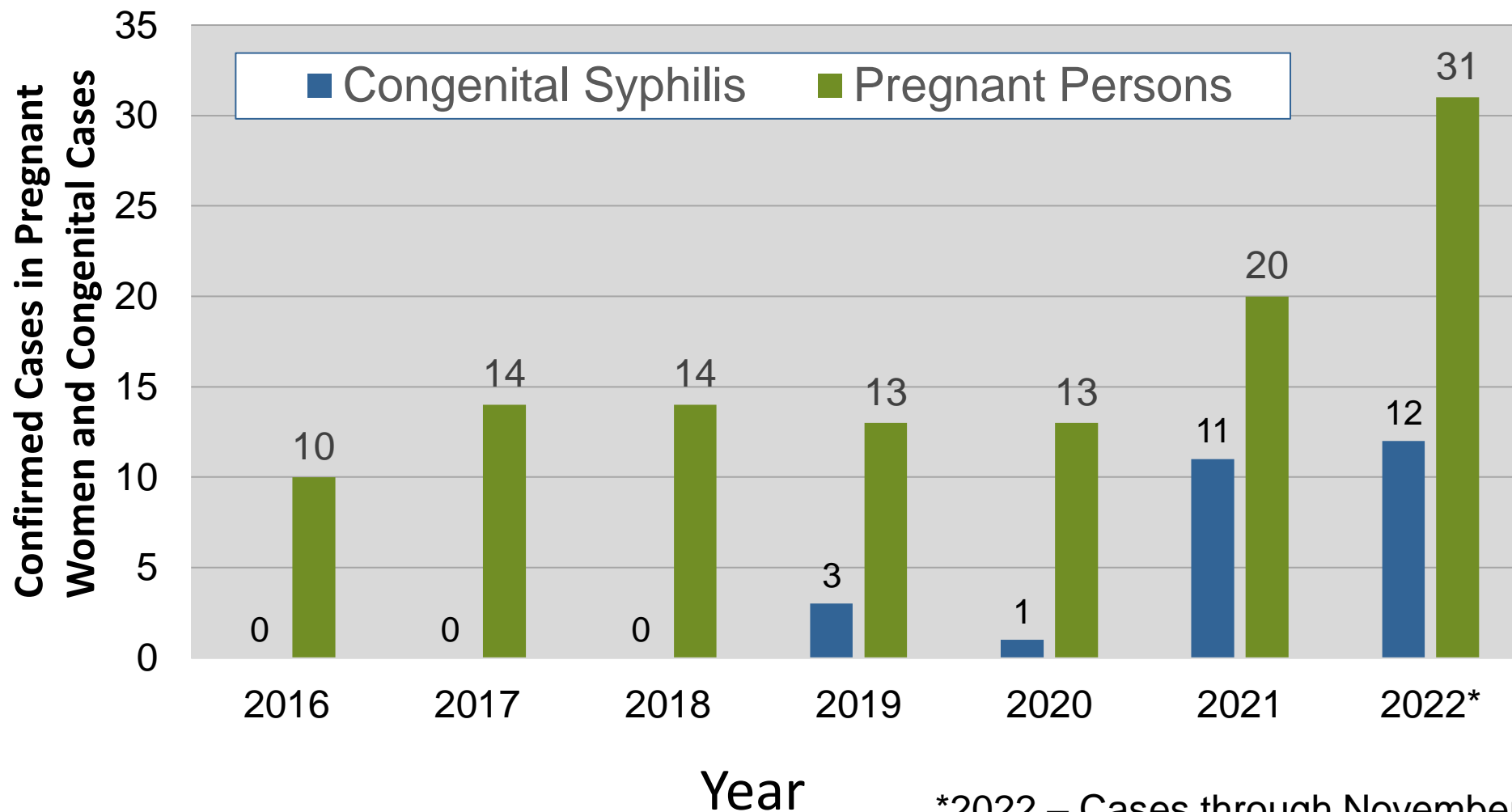


Rates of Early Syphilis per 100,000 in Men Who Have Sex with Men & Rates of Syphilis (All Stages) per 100,000 in Women, King County, WA,



Congenital Syphilis Cases 2016 - 2022

King County, Washington



*2022 – Cases through November 15, 2021

Characteristics of 2021-22 Syphilis Cases in Pregnant Persons, King County

	Percent (N=40)
Race/Ethnicity	
NH White	22%
NH Black	15%
Hispanic	32%
Native Am.Alaska Native	2%
Mult/Unknown	20%
Risk Factors	
Living homeless	40%
Substance use	62%
Exchange sex	5%
No risk	32%
South King County	55%

Congenital Syphilis Cases in King County in 2021-22

Identified Gaps in Congenital Syphilis Prevention

Limited/No prenatal care	6 (54%)
No syphilis test at first prenatal visit	1 (9%)
Untreated	4 (36%)

Adverse Birth Outcomes

Fetal Demise/Stillbirth	2 (18%)
Premature Birth	5 (45%)
Symptomatic	6 (54%)
None	1 (9%)

- 2022 - 8/12 congenital cases were born premature and 9 were symptomatic
- No defined cases of stillbirth or fetal demise
 - At least 2 cases of fetal demise/still birth in pregnant women with syphilis

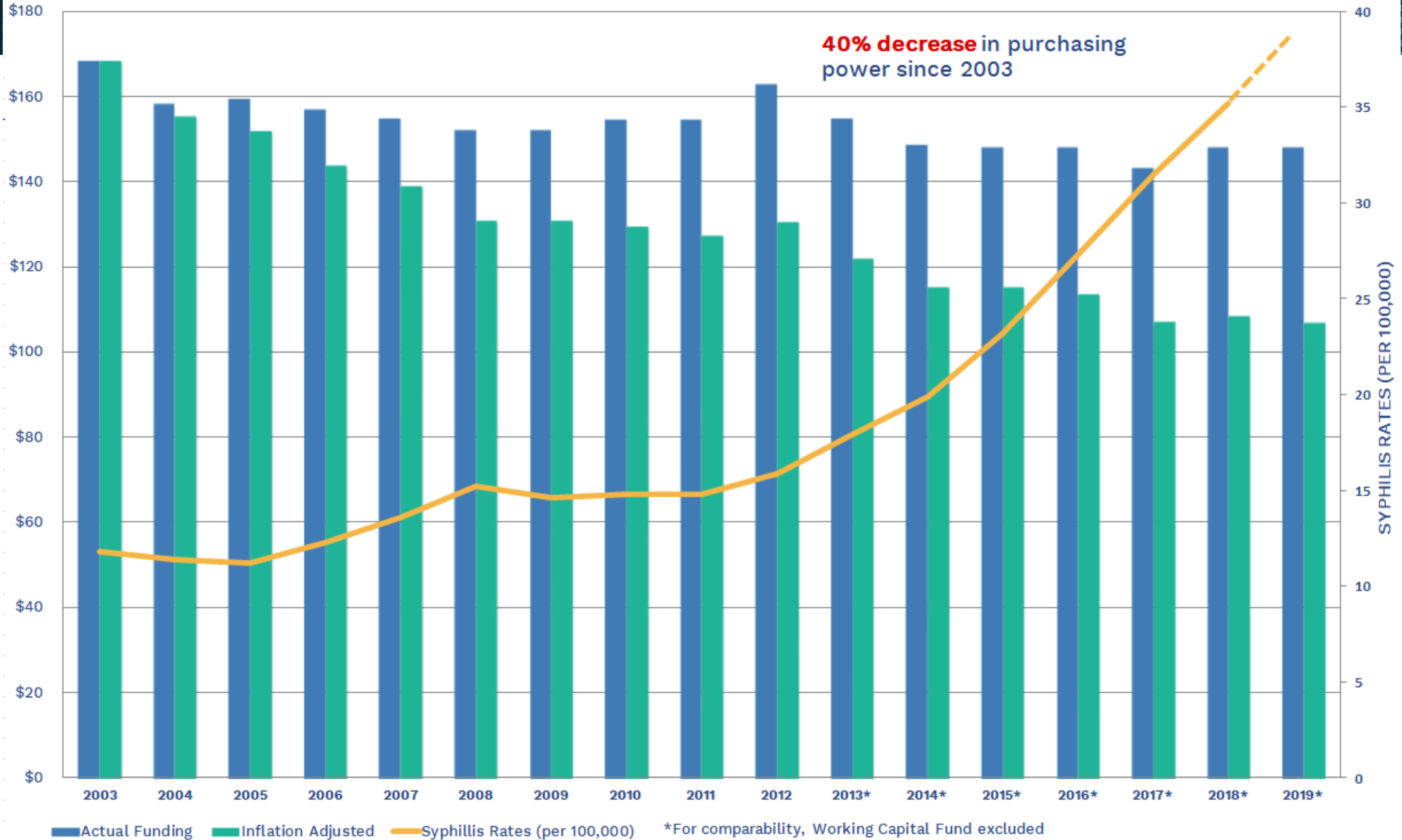
What is Public Health Doing?

- Surveillance and epidemiology
- Case investigation and contact tracing – focus on ensuring treatment
- Public education
- Policy – New screening recommendations
- Expanded outreach testing
 - Jails
 - Emergency rooms
 - Healthcare Organizations (HCOs)
- Expanded clinical services
 - PHSKC Sexual Health Clinic
 - New low barrier care clinics – SHE Clinic, two new clinics in south county
 - Expanded work through Family Planning Program

Annual CDC STD Prevention Budget, Inflation Adjusted Budget, and Syphilis Rates, FY 2003 - FY 2019

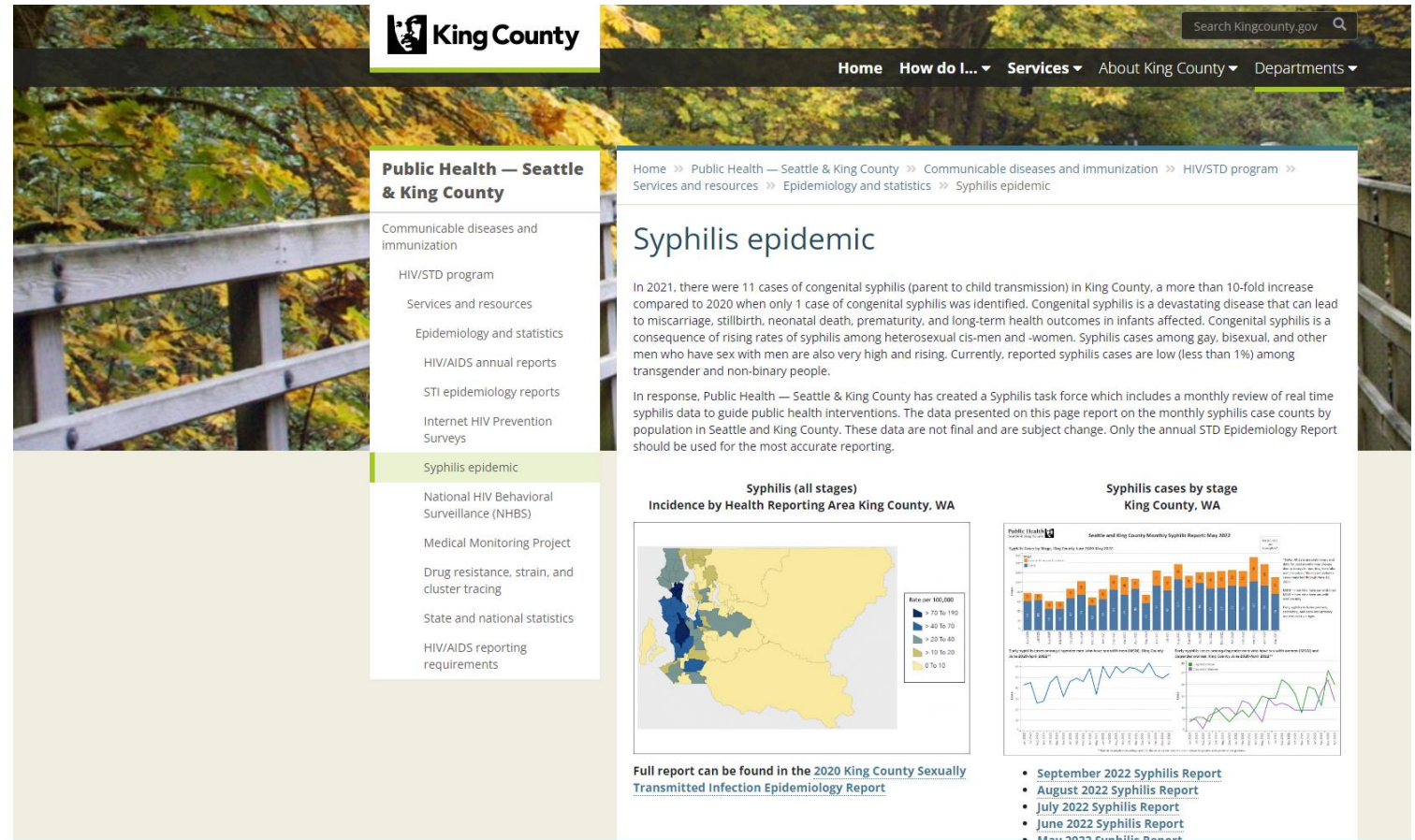


MILLIONS



Epidemiology

- New monthly syphilis epidemiology report
- Improves accountability
- Informs the community, including elected officials



Case Investigation and Contract Tracing

- Resources insufficient to investigate and provide partner services to all cases
- Disease investigators prioritize cases in heterosexuals (particularly cis-women) with goal of averting congenital syphilis
 - All HIV+ cases in people who are not virally suppressed prioritized
- Focus on ensuring that pregnant persons are treated
 - Very resource intensive

Number of Syphilis Cases Reported, Assigned for Investigation, and Interviewed, King County, WA, Jan-Sept 2023

	Total Reported Cases	Assigned N (%)	Interviewed N (%)
Cis-Women	260	254 (98)	123 (47)
MSW	245	242 (99)	132 (54)
MSM*	491	197 (40)	78 (16)
Total	996	693 (70)	333 (33)

*Only early syphilis cases included

Syphilis Rising

- Expanded media campaign focusing on both MSM and women
- Seeks to promote testing and symptom recognition

<https://syphilisrising.com/>

SYPHILIS IS RISING

Syphilis infections are quickly rising among women and pregnant people.

Syphilis is curable, and congenital syphilis (parent-child transmission) is preventable.

SYMPTOMS

- Open Sore
- Spotted Rash
- Blurry Vision
- Hearing Loss
- Hair Loss
- Skin Growths

TESTING

A simple blood test can detect syphilis! Get tested if :



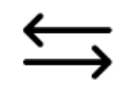
You are pregnant



You've been exposed to syphilis



You are unhoused or without shelter



You exchange sex for money or drugs



You use meth, heroin, or cocaine

TREATMENT

Syphilis is curable!

Getting cured can prevent serious health conditions like:



Congenital syphilis, stillbirth, neonatal death



Blindness



Hearing Loss



Organ Damage



Impaired mental state, dementia

Get Tested. Get Cured.

Public Health
Seattle & King County

Washington State Department of Health

New Screening Recommendations

- PHSKC and WA State DOH have longstanding guidelines recommending frequent testing in MSM
- New expanded guidelines focused on heterosexuals

Persons at elevated risk – Test at least annually & whenever patients present for care up to every 3 months:

Injection drugs

Methamphetamine or nonprescription opioids

Homelessness or who are unstably housed

Transactional sex

Incarceration in the prior 2 years (including current)

History of syphilis in the prior 2 years

Persons with a sex partner with any of the above risks - at least annually

Pregnant persons:

First prenatal care

3rd trimester (24-28 weeks)

Time of delivery if any of the above risks or patient diagnosed with a STI during pregnancy⁺⁺.

Pregnant persons not engaged in prenatal care

Test any time that present to a clinical setting (i.e., ERs, jail, substance use treatment facilities, labor and delivery, etc.)

Pregnant persons with fetal demise at ≥ 20 weeks gestation

Other Adults

Sexually active aged <45 - if not tested since January 2021

Annual - Women whose male partners have sex with both men and women

Annual – HIV+ - Sexually active outside of mutually monogamous relationships

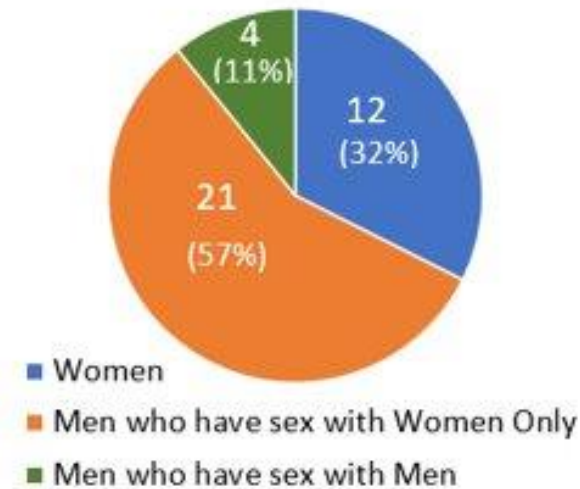
Persons diagnosed with gonorrhea or HIV

Rapid Syphilis Testing in Jail

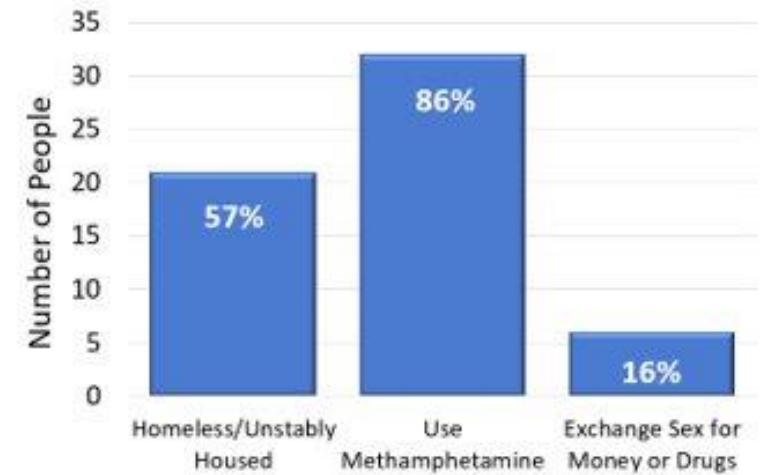
37/585 (6%) of tested persons were positive

- Pilot project evaluated rapid syphilis testing in one of King County's jails
- 11/15/21-7/31/22
- Testing ongoing with new staff assigned to SCORE

Gender and Gender of Sex Partners among People with Reactive Rapid Tests (N=37)



Key Characteristics of People with Reactive Rapid Tests (N=37)



Unmet Needs/Barriers to Success

- Insufficient DIS staff to investigate all cases
- Need for expanded sexual health infrastructure – walk-in sexual health care
 - King County has one sexual health clinic – located at Harborview
 - Working with family planning and community partners to expand services, particularly in south King County, but infrastructure is insufficient
 - No walk-in obstetrics available in King County
- Additional resources for testing in jails & other outreach settings
 - Greater use of rapid tests
- High cost benzathine penicillin (~\$400 per dose) – discourages providers from treating
- Social determinants of health underlie our community's vulnerability
 - Homelessness and unstable housing
 - Substance use
 - Poverty

Unmet Needs

- Report to the WA State Legislature presents comprehensive list of recommendations to improve sexual health in WA State
 - Currently being finalized

Report to the Legislature

STI & HBV Legislative Advisory Group Recommendations

December 1, 2022

ESSB 5092, Sec. 222.22



Prepared by:
Office of Infectious Disease on behalf of
the STI & HBV Legislative Advisory Group



Conclusions

- Growing syphilis epidemic
 - Continued high rates in MSM
 - New epidemic affecting marginalized heterosexuals – growing number of congenital syphilis cases
 - Reflects local and national epidemics of homelessness and methamphetamine use
- Need for expanded sexual health infrastructure
 - Disease investigation
 - Walk-in sexual health care – including obstetrics
 - Outreach testing and treatment