



## Health Alert Network Message 22-31: Increasing Numbers of Syphilis and Congenital Syphilis Diagnoses Across Louisiana

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**To:** Medical Providers and Community Leaders in Louisiana

**From:** Joseph Kanter, MD, Louisiana State Health Officer

**Date:** September 22, 2022

**Subject: Increasing Numbers of Syphilis and Congenital Syphilis Diagnoses Across Louisiana**

### **Summary**

New diagnoses of syphilis are on the rise nationally and across Louisiana. Early syphilis, an infection of syphilis in the past year, increased in Louisiana by 36% from 2020 to 2021. Of particular concern are the disproportionate rates of early syphilis among women, people of color, and gay and bisexual men in Louisiana. In 2021, 66% of early syphilis occurred among people of color and 37% of diagnoses were among gay and bisexual men; 47% of all early syphilis diagnoses were among Black men.

In 2020, Louisiana had the 7th highest case rate in the nation with 63 congenital syphilis (CS) cases. In 2021, Louisiana reported 110 cases — an increase of 75% compared to 2020; 65% of cases occurred among Black women and 64% of mothers were under the age of 30 at delivery. During this same time, all nine of Louisiana's public health regions reported diagnoses of congenital syphilis.

**The Louisiana Department of Health, Office of Public Health is requesting all healthcare providers in the state to increase syphilis screening and ensure timely treatment and reporting of syphilis** according to CDC recommendations and Louisiana reporting requirements that are referenced and summarized below:

### **Screening:**

- The CDC's current testing guidelines for syphilis and other STIs can be accessed at <https://www.cdc.gov/std/treatment-guidelines/screening-recommendations.htm>.
- Due to rising syphilis rates, Louisiana recommends that all men and women should be screened for syphilis, especially if determined to be at increased risk. All gay and bisexual men, transgender persons and gender diverse populations should be screened at least annually. Persons living with HIV should be screened at their first HIV evaluation and annually thereafter.
- Per Louisiana 2014 Act 459, all pregnant women residing in Louisiana are to be screened for syphilis at their first prenatal care visit, at their first prenatal care visit in

their third trimester and at delivery. *No infant should leave the hospital without documentation of the mother's serological status at least once during pregnancy.*

- All neonates born to women who have a reactive nontreponemal and treponemal tests should be evaluated with a quantitative nontreponemal serologic test (RPR or VDRL) and be examined thoroughly for evidence of congenital syphilis.

### **Treatment:**

#### **Early Syphilis (Primary, Secondary, Early Non-Primary Non-Secondary)**

<b>No Allergy to PCN</b>	<b>Benzathine penicillin G 2.4 million units IM (give as 1.2 million units IM)</b>
<b>Pregnant or Lactating</b>	Benzathine penicillin G 2.4 million units IM (give as 1.2 million units IM)
<b>Allergy to PCN (Pregnant)</b>	Desensitization and treatment with PCN
<b>Allergy to PCN (Non-pregnant)</b>	Treatment with Doxycycline 100 mg PO BID x 14 days

#### **Late Latent Syphilis or Syphilis of Unknown Duration**

<b>No Allergy to PCN</b>	<b>Benzathine penicillin G 2.4 million units IM x 3 doses</b> <ul style="list-style-type: none"> <li>• Give as 1.2 million units IM each week for 3 consecutive weeks.</li> <li>• A minimum of 6 days and maximum of 14 days between doses or series must be restarted.</li> </ul>
<b>Pregnant Women</b>	<b>Benzathine Penicillin G 2.4 million units IM x 3 doses</b> <ul style="list-style-type: none"> <li>• Give as 1.2 million units IM each week for 3 consecutive weeks.</li> <li>• Due to pregnancy, a strict dosage schedule for every 7 days for 3 doses (7.2 mU total) should be followed; however, a range of 6-9 days between each dose is allowable.</li> <li>• If any doses are given outside of the 6-9 day range, then restart the entire 3 dose series again.</li> </ul>
<b>Allergic to PCN (Pregnant)</b>	Desensitization and treatment with PCN
<b>Allergic to PCN (Non-pregnant)</b>	Doxycycline 100 mg PO BID x 28 days

- Penicillin G, administered parenterally, is the preferred drug for treating patients in all stages of syphilis. The preparation used (i.e., Benzathine, aqueous procaine or aqueous crystalline), dosage and length of treatment depend on the stage and clinical manifestations of the disease.
- Adequate and timely treatment of syphilis in pregnant women decreases the rate of congenital syphilis. Penicillin G is the only known effective antimicrobial for treating fetal infection and preventing congenital syphilis.
- Infants born to untreated mothers or mothers with inadequate treatment (including those treated <30 days prior to delivery) should be evaluated and treated for congenital syphilis per CDC guidelines ( <https://www.cdc.gov/std/treatment-guidelines/congenital>). Infected infants can be asymptomatic at birth, but can develop serious symptoms in the neonatal period or later in life, including hydrops fetalis; hepatosplenomegaly; rashes; fevers; failure to thrive; deformity of the face, teeth and bones; blindness; and deafness.

- Congenital syphilis should be considered in all stillbirths after 20 weeks, and in infants of mothers with evidence of syphilis infection during pregnancy, especially if syphilis is newly acquired during pregnancy.

**Syphilis Reporting:**

Louisiana State Sanitary Code LAC 51:II.105 requires healthcare providers and laboratories to report notifiable diseases including syphilis, syphilis in pregnancy and perinatal exposure of syphilis. Disease intervention specialists (DIS) confidentially notify exposed partners to prevent additional transmission. Timely reporting of new syphilis cases and treatment are essential to mitigating the spread of syphilis and decreasing the number of congenital syphilis cases in Louisiana. Providers can report syphilis diagnoses and treatment by submitting the STD 43 form:

[https://ldh.la.gov/assets/oph/HIVSTD/STDForm43NewCRx\\_Design-FormsCommitteerapprovedNov202.pdf](https://ldh.la.gov/assets/oph/HIVSTD/STDForm43NewCRx_Design-FormsCommitteerapprovedNov202.pdf)

**Please report all information related to clinical and laboratory reports on suspected/probable congenital syphilis cases to Perinatal Surveillance Supervisor Elizabeth Lindsay at 504-568-7047.**