

## ***Health Advisory***

### **Prevention of Congenital Syphilis in Philadelphia**

October 29, 2018

Historically, congenital syphilis increases when cases of syphilis among women of childbearing age increase. From 2015-2017, the Philadelphia Department of Public Health (PDPH) has observed a 77% increase in reported early syphilis cases among women (80 reports in 2015 compared to 142 reports in 2017), the majority of which were among women of child bearing age. In 2017, there were 6 cases of congenital syphilis reported in the City of Philadelphia. Syphilis reports among women in 2018 have identified increases in certain risk factors.

These include women who inject drugs, women who have sex with men who inject drugs, and women who exchange sex for drugs or money.

Congenital syphilis occurs when a mother infected with syphilis transmits the infection to her child during pregnancy. Congenital syphilis can cause severe illness in babies, including premature birth, low birth weight, birth defects, blindness, and hearing loss. It can also lead to stillbirth and infant death. Prevention relies on early detection of unrecognized syphilis in the pregnant woman, detection of newly acquired syphilis during pregnancy, and ensuring completion of maternal treatment at least four weeks before delivery. In addition to screening at intervals indicated below, pregnant women presenting with any of the following symptoms should be tested for syphilis immediately: generalized maculo-papular rash, a palmar plantar rash, genital or rectal sore or lesion, moist papules in the genital or rectal regions and patchy hair loss. Testing and treatment are readily available.

#### **The Philadelphia Department of Public Health recommends syphilis screening for:**

- Women of childbearing age diagnosed with another sexually transmitted disease
- Women who are pregnant seen in Emergency Departments
- Women with multiple sexual partners, women who inject drugs, have sex with people who inject drugs, and women who exchange sex for drugs or money
- Pregnant women, in accordance with 28 PA Code 27.89, which mandates screening at the following times:
  - At the first prenatal appointment
  - At the third trimester of pregnancy (28-32 weeks gestation is best)
  - At the delivery of a child
  - At the delivery of a still born child

Treat syphilis in pregnant women as soon as the infection is identified. Pregnant women should be treated with a penicillin regimen appropriate for their stage of infection. Penicillin (benzathine penicillin G [Bicillin LA] 2.4 mu IM) is the only therapy proven to be effective in pregnancy. Pregnant women with a history of allergy to penicillin should be desensitized and treated with penicillin. **Treatment at least 30 days before delivery is 98% effective at preventing congenital syphilis.** Additional information regarding the diagnosis and treatment of syphilis is available at [www.cdc.gov/std/treatment](http://www.cdc.gov/std/treatment) or by calling the health department at (215) 685- 6737.

#### **SUMMARY POINTS**

- Syphilis rates are high in Philadelphia and increasing among women.
- Congenital syphilis is preventable through screening and treatment in pregnancy.
- Test women who are at high risk for syphilis early in the third trimester and treat promptly.