

Public Health Advisory Syphilis Outbreak Identified in Clark County February 29, 2016

Situation:

The Southern Nevada Health District (SNHD) has identified a 128 percent increase in reported syphilis cases in Clark County since 2012 and has declared a syphilis outbreak in Clark County. This increase is associated with early syphilis cases. An early syphilis case is defined as a syphilis infection that was acquired within the previous 12 months. In 2015 early syphilis cases were seen mostly among men, who comprise 615 of the 694 cases reported in 2015.

Guidance for Clinicians:

- SNHD strongly encourages medical providers, particularly those who provide health care services for men, to:
- Determine risk and provide syphilis screening with reflex confirmatory testing for the following individuals:
 - men who have sex with men
 - persons who engage in anonymous sex, including through websites or apps
 - persons with multiple sex partners
 - persons who are symptomatic or who test positive for other sexually-transmitted diseases such as Gonorrhea, Chlamydia, and HIV.
- o Provide prompt recommended treatment to persons with syphilis and their sexual partners.
 - o Immediately report all patients treated for syphilis with or without confirmatory laboratory testing by phone (702)759- 0727, fax (702) 759-1454, or online at https://www.southernnevadahealthdistrict.org/diseasereports/forms/disease-reporting
- o Recommend HIV testing as well as screening for other sexually transmitted infections for anyone who has been diagnosed with syphilis.
- Untreated syphilis during pregnancy can result in a stillbirth or a baby's death soon after birth.

Diagnostic testing:

- o A presumptive diagnosis of syphilis requires use of two tests:
 - nontreponemal test such as Rapid plasma reagin (RPR) or Venereal Disease Research Laboratory (VDRL) and a
 - treponemal test such as *Treponema pallidum* particle agglutination (TP-PA), fluorescent treponemal antibody absorbed (FTA-ABS), various enzyme immunoassays (EIAs), chemiluminescence immunoassays (CIAs), microbead immunoassays (MBIAs), immunoblots, or rapid treponemal assays.



 Use of only one type of serologic test is insufficient for diagnosis and can result in falsenegative results in persons tested during primary syphilis and false-positive results in persons without syphilis.

The traditional syphilis screening algorithm starts with a nontreponemal test with confirmation of reactive results using a treponemal test. Some clinical laboratories are screening samples using a treponemal test, typically EIA or CIA. Persons with a reactive treponemal screening test should have a standard nontreponemal test with titer performed reflexively by the laboratory to guide patient management decisions. If the nontreponemal test is non-reactive, the laboratory should perform a different treponemal test to confirm the initial test results. http://www.cdc.gov/std/tg2015/syphilis.htm

There are a variety of syphilis screening test options available at clinical laboratories. The clinician should consult with the testing laboratory to ensure that the initial syphilis screening test will reflex to appropriate confirmatory testing. An overview of syphilis diagnostic testing is available from the Association of Public Health Laboratories (APHL) at http://www.aphl.org/aphlprograms/infectious/std/Pages/STD-syphilis.aspx

• Recommended treatment:

- One benzathine penicillin G injection (2.4 million units administered intramuscularly) will cure a person who has primary, secondary, or early latent syphilis.
- A total of three benzathine penicillin G injections (2.4 million units administered intramuscularly per dose) given one dose at a time at weekly intervals is recommended for individuals with late latent syphilis or latent syphilis of unknown duration.
- o Benzathine penicillin G sold as Bicillin LA is not interchangeable with Bicillin CR which is a combination of benzathine penicillin G and procaine penicillin G.
- o Please refer to CDC 2015 Sexually Transmitted Diseases Treatment Guidelines for full treatment recommendations. http://www.cdc.gov/std/tg2015/syphilis.htm

General information about syphilis can be found online at www.cdc.gov/std/syphilis.

Joseph P. Iser, MD, DrPH, MSc

Losoph P. Iser

Chief Health Officer

Southern Nevada Health District

Health Alert: conveys the highest level of importance; warrants immediate action or attention
Health Advisory: provides important information for a specific incident or situation; may not require immediate action
Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action