



RIGOBERTO VARGAS, MPH, DIRECTOR

ROBERT M. LEVIN, MD, HEALTH OFFICER
HOT TIPS #104 DATE 8/15/2018

Please copy and distribute to ALL physicians at your location.

Selecting Pregnant Women for Additional Syphilis Screening in Ventura County

It is currently recommended that all pregnant women should be screened for syphilis once at the time of their first pre-natal visit. Due to a recent upsurge in syphilis in Ventura County and throughout the State of California, and an increase in both maternal and neonatal syphilis, additional screening of higher risk pregnant women is indicated.

Women who meet one or more of the following criteria should be screened at the first pre-natal visit and **again at the beginning of the third trimester and at delivery**. Serologic testing should be by either nontreponemal (RPR or VDRL) or treponemal studies with confirmatory testing for reactive nontreponemal serology:

- Any woman who delivers a stillborn (fetal demise after 20 weeks gestation) should be evaluated for syphilis
- Women with no, late or sporadic pre-natal care
- Women with a history of substance abuse
- Women reporting new or multiple sexual partners
- Women who have a partner who has male partners
- Women whose sex partner may have multiple other heterosexual partners
- Women who have used a dating app or social media to meet a man in the last year
- Women who live in one of these zip codes*:
 - 93003
 - 93022
 - 93030
 - 93033
 - 93036
 - 93041
 - 93066

Emergency Rooms should screen for:

- Any pregnancy that is diagnosed during that E.R. visit
- Any pregnant woman with a risk factor seeking care for any reason
- Any woman without documented syphilis testing during this pregnancy

No mother or newborn infant should leave the hospital without maternal serologic status being documented at least once during pregnancy, and preferably again at delivery if at risk. It is important to perform the same nontreponemal test on an infant that was performed on the mother.€

In Ventura County rates of primary and secondary syphilis, both of which are contagious, have increased by 73%, moving from 3.5 cases per 100,000 population in 2016 to 6.1 cases per 100,000 population in 2017. There are two cases of congenital syphilis in our county so far in 2018, compared to 1 case each in 2016 and 2017. Other than these cases in the three most recent years, there were no congenital syphilis cases in Ventura County since 2005. Because syphilis can have

Communicable Disease Office

2500 South C Street, Suite B, Oxnard, California 93033 • (805) 981-5201 • FAX (805) 981-5200

severe consequences for a newborn (see below), the Ventura County Health Officer is providing the above recommendations.

If you have or suspect you have a newborn with congenital syphilis, submit a Confidential Morbidity Report to the Ventura County Public Health Communicable Disease Office, as well as calling the office immediately to report a possible case of congenital syphilis. This way, important details needed for further testing and treatment can be arranged. Providers with questions regarding laboratory testing, treatment or reporting of congenital syphilis, primary or secondary syphilis should call the Communicable Disease Office at (805) 981-5201.

Historical data indicate that up to 40% of pregnancies in women with untreated syphilis will result in miscarriage, stillbirth, or infant death. Infants who live may develop severe illness, including skeletal abnormalities, hepatosplenomegaly, jaundice, anemia, optic atrophy, interstitial keratitis, sensorineural deafness, or meningitis, which can cause developmental delays and seizures.

Call the Communicable Disease Office (805) 981-5201 with questions regarding case reporting, treatment, and laboratory testing. For additional information, links are provided below under Additional Resources.

*These are the zip codes in our county where we have seen the highest rates of syphilis over the last year, e.g. incidence of “all-type” syphilis of 30/100,00 or more. The assumption is that a woman is more likely to contract syphilis if there is more syphilis in her community.
€Comparing the nontreponemal titers on the mother and her infant is useful in documenting congenital syphilis.

Additional Resources

CDC Fact Sheet – Congenital Syphilis (available English/Spanish)
<https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.htm>

CDC Treatment Guidelines and Updates
<https://www.cdc.gov/std/syphilis/treatment.htm>

Syphilis Pocket Guide for Providers – Updated booklet for providers containing need-to-know details on the diagnosis, treatment, and prevention of syphilis. (November 30, 2017)
<https://www.cdc.gov/std/syphilis/Syphilis-Pocket-Guide-FINAL-508.pdf>

Communicable Disease Office

2500 South C Street, Suite B, Oxnard, California 93033 • (805) 981-5201 • FAX (805) 981-5200