

## Current Shortage of Bicillin L-A® and Syphilis Treatment Recommendations

To: North Dakota Healthcare Providers and Pharmacists

CC: ND Local Health Departments

Date: October 11, 2023

In light of rising syphilis cases in North Dakota and in surrounding jurisdictions, I am writing to inform you about the current shortage of Bicillin L-A® (penicillin G benzathine) in the United States and to reiterate the recommended treatment guidelines for syphilis. Additionally, we would like to address the issue of access to Bicillin L-A® and encourage individuals experiencing difficulties to reach out to the North Dakota Department of Health and Human Services (HHS) for assistance if needed.

### Bicillin LA Shortage

There is currently a shortage of Bicillin L-A®, a critical component in the treatment of syphilis. This shortage has been a result of several factors, including disruptions in the supply chain and increased demand for the medication. We understand the concern this may raise, especially given the resurgence of syphilis cases in recent years. The U.S. Food and Drug Administration (FDA) is reporting that this shortage could continue until Quarter 2 of 2024.

### Syphilis Treatment Recommendations

In light of the Bicillin L-A® shortage, it is essential that healthcare providers adhere to the updated syphilis treatment recommendations provided by the Centers for Disease Control and Prevention (CDC). The CDC recommends the following treatment regimens for syphilis:

*Primary, Secondary, and Early Latent Syphilis (less than 1 year duration):*

Benzathine penicillin G 2.4 million units intramuscularly (IM) in a single dose.

Alternate Therapy: Doxycycline 100mg orally 2x/day for 14 days.

*Late Latent Syphilis or Tertiary Syphilis (duration greater than or equal to 1 year):*

## Important Notice – Current Shortage of Bicillin L-A® and Syphilis Treatment Recommendations

Benzathine penicillin G 7.2 million units IM total, administered as three doses of 2.4 million units IM each at 1 week intervals.

Missed doses spaced >9 days apart are not acceptable during pregnancy. If a dose is missed or delayed >9 days, the pregnant patient will have to restart the full course of therapy.

Alternate Therapy: Doxycycline 100mg orally 2x/day for 28 days.

*Neurosyphilis:*

Aqueous crystalline penicillin G 18-24 million units per day, administered as 3-4 million units IV every 4 hours or continuous infusion for 10-14 days.

Alternate Therapy: Procaine penicillin G 2.4 million units IM once daily for 10-14 days PLUS probenecid 500 mg orally for 4x/day for 10-14 days.

\*Prioritize using Bicillin L-A® to treat pregnant people with syphilis and babies with congenital syphilis – penicillin is the only recommended treatment for these populations.

Choose doxycycline for non-pregnant people to help preserve Bicillin L-A® supplies. See [CDC's treatment recommendations](#) for more information.

Consider involving antimicrobial stewardship leaders to help institute systems-level approaches to limit the use of Bicillin L-A® and encourage the use of alternative effective antimicrobials for treatment of other infectious diseases.

The appropriate staging of infection can reduce the use of multiple doses in people who likely do not have latent syphilis. For more information on determining the stage and thus the appropriate treatment recommendations for people with syphilis, visit:

<https://www.cdc.gov/std/informatics/adult-syphilis-surveillance-staging.pdf>

Please be aware that alternative medications, such as aqueous crystalline penicillin G or doxycycline, may be considered as appropriate substitutes when Bicillin L-A® is unavailable. However, the choice of alternative treatment should be based on a careful assessment of the individual patient's condition and consultation with an infectious disease specialist or healthcare professional with expertise in syphilis management.

**Accessing Bicillin L-A®**

We understand that the current shortage may pose challenges in accessing Bicillin L-A® for patients requiring syphilis treatment. We urge healthcare providers and patients who encounter difficulties in obtaining Bicillin L-A® to reach out to HHS for assistance. HHS has access to a small number of doses that we are reserving for pregnant persons who otherwise can not gain access to treatment.

Important Notice – Current Shortage of Bicillin L-A® and Syphilis Treatment Recommendations

We understand the critical importance of timely and effective treatment for syphilis to prevent complications and further transmission. We appreciate your cooperation and diligence in managing syphilis cases during this challenging period.

For local information about syphilis cases and rates in your jurisdiction, visit: [ND Disease Dashboard](#)

If you have any questions or require further information, please do not hesitate to contact us at 701.328.2378.

Thank you for your dedication to patient care and public health.

Sincerely,

A handwritten signature in black ink that reads "L. VanderBusch". The signature is written in a cursive, flowing style.

Lindsey VanderBusch, MPH

Director

Sexually Transmitted & Bloodborne Disease Unit

NDHHS

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