

Syphilis on the Rise

The North Dakota Department of Health (NDDoH) is reporting an increase in the number of syphilis cases throughout the state. Syphilis has been increasing nationally with large outbreaks reported across the country, including in nearby states. As of June 20th, there have been 63 reported cases of syphilis for the year in North Dakota with 33% being diagnosed in the past six weeks. The majority of recent cases have resided in McKenzie, Burleigh, and Morton Counties however infections are spread widely across the state and are in both men and women. Risk factors for these infections include heterosexual contact, men who have sex with men, injection drug use, multiple partners and/or co-infection with other sexually transmitted infections (STI).

Action Items:

Local and Tribal Health Departments: Please forward this health advisory to all health care providers in your jurisdiction.

Hospitals and Clinics: Please forward this health advisory to all infectious disease, primary care, OB/GYN, and emergency/urgent care providers.

Health Care Providers:

- Obtain a complete sexual risk history of all patients.
- Test for syphilis and other STIs, including HIV, for all persons with high-risk sexual behaviors.
- Test and treat patients presumptively with symptoms suggestive of primary or secondary syphilis.
- Test and treat patients presumptively when exposed to syphilis.
- Test all pregnant persons at the first prenatal visit, at 28-32 weeks and then at delivery, regardless of risk.

NDDoH is asking all healthcare providers in North Dakota to obtain a complete sexual history of their patients to identify individuals that may be at high-risk for syphilis and other STIs, including HIV. A complete sexual risk assessment includes the discussion of risk factors such as anonymous sex, drug use, number of sex partners, type of sexual activity, and history of past or current infections with other STIs or HIV. Individuals that are tested for syphilis should also be tested for other STIs and HIV as many cases have had multiple infections. Chlamydia and gonorrhea testing should be site specific (genital, oral and/or rectal), depending on the type of sexual activity. If a patient is HIV negative, pre-exposure prophylaxis (HIV PrEP) should be provided if the patient is at high risk for HIV infection.

In order to stop the transmission of syphilis, those infected and all their sexual partners need to be treated. The treatment for early syphilis (primary, secondary and early non-primary, non-secondary stages) is 2.4 million units benzathine penicillin G IM. Persons who have had sexual contact with an infected person within 90 days of an early syphilis diagnosis should be tested and treated presumptively with 2.4 million units benzathine penicillin G IM. If facilities are unable to obtain benzathine penicillin G in a timely matter, the NDDoH Department Operations Center can be contacted at 701-328-0707 to obtain the medication through the State Medical Cache.

Table 1. Recommended syphilis treatment by stage of infection.

Stage	Treatment
Primary (Presence of one or more ulcerative lesions, e.g. chancre)	Benzathine penicillin G 2.4 million units IM
Secondary (Localized or diffuse mucocutaneous lesions, e.g. rash, palmar or plantar rash, alopecia)	Benzathine penicillin G 2.4 million units IM
Early non-primary, non-secondary (No symptoms, initial infection likely occurred within the previous 12 months)	Benzathine penicillin G 2.4 million units IM
Latent (No symptoms, initial infection likely occurred greater than 12 months previously)	Benzathine penicillin G 7.2 million units total, administered as 3 doses of 2.4 million units IM each at 1-week intervals

For more information on treatment and clinical management of syphilis, please refer to the [STI Treatment Guidelines](#). For any questions, please contact the NDDoH STI program at 701.328.2378 or 800.472.2180.

If your facility would like an in-person or virtual training on how to better integrate sexual health services into your practice, please contact Sarah Weninger at sweninger@nd.gov or by calling 701.328.2378 or 800.472.2180.

Resources:

The following resources can be ordered for use in your facility as a quick reference for providers to use while assessing sexual health risk and the provision of STI prevention, care and treatment.

[Sexual Health and Your Patients: A Provider’s Guide for Screening, Testing and Treatment of Sexually Transmitted Infections](#)

(https://ndhealth.co1.qualtrics.com/jfe/form/SV_bvZqDzoTOZd1yPc)

[Provider Reference Cards: Taking a Sexual Health History](#)

(https://ndhealth.co1.qualtrics.com/jfe/form/SV_bvZqDzoTOZd1yPc)

[Treatment Summary of 2021 Treatment Guidelines](#)

(https://ndhealth.co1.qualtrics.com/jfe/form/SV_bvZqDzoTOZd1yPc)

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Categories of Health Alert Network messages:

Health Alert Requires immediate action or attention; highest level of importance

Health Advisory May not require immediate action; provides important information for a specific incident or situation

Health Update Unlikely to require immediate action; provides updated information regarding an incident or situation

HAN Info Service Does not require immediate action; provides general public health information

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##