

Public Health Service

Centers for Disease Control and Prevention (CDC) Atlanta GA 30333

September 25, 2018

Dear Partners in Prevention,

Today, the Centers for Disease Control and Prevention (CDC) released its <u>Sexually Transmitted</u> <u>Disease (STD) Surveillance Report, 2017</u>. This annual report presents data and trends for sexually transmitted diseases (STDs) in the United States. As you may remember, we released preliminary national data for chlamydia, gonorrhea and syphilis at last month's STD Prevention Conference. Today I would like to draw your attention to the troubling trends in congenital syphilis (CS).

The Report shows that CS cases have more than doubled since 2013, with a total of **918 cases** in 2017 – marking the most cases in one year since 1997. These increases parallel a similar upward trend in primary and secondary syphilis among women of reproductive age.

Syphilis is an STD that can have very serious complications if not promptly diagnosed and treated. When passed from mother to baby during pregnancy it can lead to miscarriage, premature birth, stillbirth, or even death of a newborn. In fact, there were 64 reported stillbirths from congenital syphilis in 2017 (up from 41 in 2016).

Thirty-seven states had at least one case of CS in 2017. Although CS is a national problem, some parts of the country – primarily Western and Southern states – are disproportionately burdened. With effective screening and treatment options available, even one case of CS is one case too many. Yet, these data severely underscore the need for improved testing and treatment among pregnant women.

What we know is this: **Prenatal care is crucial for every pregnancy.** *All* pregnant women should be tested for syphilis at their first prenatal visit. The U.S. Preventive Services Task Force agrees – early syphilis screening of all pregnant women is a strong recommendation that they <u>reaffirmed</u> earlier this month.

But for many women, one test may not be enough. Pregnant women at *high risk* for syphilis and in areas of *high prevalence* should also be tested at the beginning of the third trimester (approximately 28 weeks' gestation) and again at delivery. Syphilis during pregnancy can be safely and easily cured with the right antibiotics.

CDC is committed to protecting newborns – and mothers – from syphilis. In fact, we are funding a pilot project in nine hard-hit areas to strengthen local capacity to address CS. To learn more about that work, please see <u>CDC's one-pager</u>. With today's announcement reminding us of the threat of congenital syphilis, we ask that you renew your commitment, as well. For specific action steps that you can take, I encourage you to take another look at the CDC Call to Action (*Let's Work Together to Stem the Tide of Rising Syphilis in the United States*).

Keep up-to-date, know the STD burden in your communities and help share important prevention messages with health care providers, leaders and other stakeholders in your community. We are pleased to share the following resources:

- <u>CDC's 2017 STD Surveillance Report website</u> is your one-stop shop for Report-related resources. From this page you can access:
 - A <u>customizable infographic</u> that you can adapt and use in your state;
 - And <u>sample social media</u> and social media ready <u>graphics</u> (also pasted below for your convenience).
- <u>Syndicated Content</u> Add CDC STD information to your web site to ensure that your STD content stays up-to-date.
- <u>CDC STD Fact Sheets</u> Basic, disease-specific fact sheets in multiple languages with print versions for easier distribution and detailed fact sheets with more in-depth information.
- <u>Provider Pocket Guides</u> Can be downloaded or ordered free through CDC-INFO on Demand.
- <u>What Can You Do webpages</u> Based on CDC's Call to Action, these pages include syphilis prevention messages for healthcare providers and pregnant women. Information specific to public health partners can be found <u>here</u>.
- <u>March of Dimes infographic</u> A plain language infographic about CS for moms-to-be that can be downloaded and shared.
- <u>The National Network of STD Clinical Prevention Training Centers (NNPTC)</u> A CDCfunded group of regional practicing clinical experts who are dedicated to increasing knowledge and skills in the area of sexual health. The NNPTC provides year-round, high quality and efficient educational opportunities in the prevention and treatment of STDs.

Join the online conversation using #STDreport, and spread the word by retweeting <u>@CDCSTD</u> and sharing posts from the <u>CDC STD Facebook</u> page.

Thank you for your continued dedication to STD prevention.

Sincerely,

Gail Bolan, M.D. Director, Division of STD Prevention National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention U.S. Centers for Disease Control and Prevention

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Sample Social Media

Twitter

- JUST RELEASED! Newborn #syphilis cases more than double in 4 years, reaching 20year high. Full #STDreport and more: <u>https://go.usa.gov/xPrMA</u>
- DYK? You can pass untreated #syphilis to your baby while pregnant. Here's what you
 need to know to keep you both healthy: <u>https://go.usa.gov/xPrMs</u> #STDreport

- Clinicians: Syphilis AND congenital #syphilis is increasing. Here are actions you can take to stop it: <u>https://go.usa.gov/xPrM6</u> #STDreport
- ALL pregnant women should be tested for syphilis once, BUT one test is not enough for EVERY woman. More info: <u>https://go.usa.gov/xPrMF</u> #STDreport
- Clinicians: Treat patients—especially pregnant women—with suspected or diagnosed syphilis IMMEDIATELY. Test and treat their partners, too! <u>https://go.usa.gov/xPrMM</u> #STDreport
- #Pregnant women: Get treated right away if you test positive for #syphilis. Don't wait for your next visit! <u>https://go.usa.gov/xPrMe</u> #STDreport

Facebook

- NEW! CDC's 2017 STD Surveillance Report finds newborn syphilis cases more than double in 4 years, reaching 20-year high: <u>https://go.usa.gov/xPrex</u>
- The number of babies born with syphilis in 2017 = 918. That's the most cases seen in the US since 1997. Let's change that! Here's how: <u>https://go.usa.gov/xPrea</u>
- Healthcare Providers: You play an important role in reducing the sharp rise in congenital syphilis. Actions you can take: <u>https://go.usa.gov/xPreC</u>
- Clinicians: Test ALL pregnant women for syphilis at the first prenatal visit, AND test high risk pregnant women – or those in areas of high morbidity – at about 28 weeks and at delivery: <u>https://go.usa.gov/xPrer</u>
- Clinicians: Patients with syphilis should be treated IMMEDIATELY, especially if they're pregnant. Test and treat their sex partner to avoid reinfection. CDC's STD Treatment Guidelines can help: https://go.usa.gov/xPreb
- DYK? ALL pregnant women should be tested for syphilis. Some women may need to be tested more. Talk to your healthcare provider about what's right for you: <u>https://go.usa.gov/xPreD</u>
- Pregnant women: If you test positive for syphilis, be sure to get treatment right away. Your doctor can treat you with medicine that is safe for both you and your baby. More: <u>https://go.usa.gov/xPreW</u>