



County of Santa Cruz



HEALTH SERVICES AGENCY

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PUBLIC HEALTH ADVISORY

To:	Santa Cruz County Healthcare Providers
From:	Lisa Hernandez, MD, MPH, County Health Officer
Subject:	Syphilis Outbreak in Santa Cruz County
Date:	March 14, 2024

Situational Update: In late February 2024, several cases of syphilis were identified in the City of Watsonville, primarily in the individuals experiencing homelessness. To date, 8 probable syphilis cases have been identified with an additional 10 suspect cases along with 9 case contacts suggesting a potential for more cases.

The number of cases of syphilis have been increasing at a concerning rate over the last several years. In 2022, 120 primary, secondary, and early latent syphilis cases were reported to Santa Cruz County Public Health, more than double the number of cases reported in 2020. The number of early syphilis cases has been increasing significantly, particularly among specific demographics. In 2023, Santa Cruz County Public Health reported 85 cases, with a notable percentage (36%) among persons experiencing homelessness. While females represented 32% of cases in 2023, Santa Cruz fortunately recorded no congenital syphilis cases after having 3 cases in 2022. Since the COVID pandemic ended, the majority of cases have been documented in 35-44 year-olds, with over 50% identifying as Latinx. The distribution of cases shows that 40% are in South County, while 60% are in North County.

The increase in syphilis cases and the identified outbreak in Santa Cruz County, particularly in the face of an ongoing national shortage of Bicillin® L-A, is a public health concern and requires immediate attention and assistance from medical providers caring for persons with untreated syphilis, and particularly pregnant persons and women/non-binary persons of reproductive age.

Background:

Syphilis is a sexually transmitted Infection (STI) caused by the bacterium *Treponema pallidum* that, if left untreated, can spread to the brain and nervous system, resulting in neurosyphilis. Syphilis in pregnancy can result in significant adverse pregnancy outcomes including fetal death. Many refer to syphilis as "The Great Pretender", as its symptoms can look like many other diseases. However, syphilis typically follows a progression of stages that can last for weeks, months, or even years. Syphilis is classified into four stages: primary, secondary, latent, and tertiary.

Each stage has distinct signs and symptoms:

Primary Stage:

During the first (primary) stage of syphilis, a person may notice a single sore (chancre) or multiple sores. The chancre is usually (but not always) firm, round, and painless and it appears at the infection site. These sores usually occur in, on, or around the penis, vagina, anus, rectum, and lips or in the mouth. The chancre lasts 3 to 6 weeks and heals regardless of whether a person receives treatment. However, the infection will progress to the secondary stage if the person with syphilis does not receive treatment.

Secondary Stage:

During the secondary stage, a person may develop rough, red, or reddish-brown skin rashes and/or sores in their mouth, penis, vagina, or anus, as well as on the palms of the hands and bottoms of the feet. This stage generally begins with a rash on one or more parts of the body and might appear when a sore is healing during the primary stage or several weeks after the sore is healed. Condyloma lata are large, raised, gray or white lesions. They may develop in warm, moist areas like the mouth, underarm or groin region. The symptoms of secondary syphilis will go away with or without treatment. However, without treatment, the infection will progress to the latent and possibly tertiary stage of disease.

Latent (Hidden) Stage:

The latent stage of syphilis is when there are no obvious indications or symptoms. Without treatment, a person can have syphilis in their body for years.

Tertiary Stage:

During the tertiary stage, syphilis can affect a variety of organ systems, including the heart and blood vessels, as well as the eyes, brain, and nervous system. In tertiary syphilis, the disease damages internal organs and can result in death.

Congenital Syphilis

Congenital syphilis (CS) can have serious health consequences for a baby born to a person with syphilis. In California, it is required to screen for syphilis during the first prenatal visit and should be repeated during the third trimester. Whether or not the pregnant person received prenatal care can determine how CS may affect baby's health. Syphilis in pregnant persons can cause miscarriage, premature birth, and/or stillborn birth.

Neurosyphilis

Neurosyphilis is a central nervous system infection of the brain's meninges, the brain itself, or the spinal cord. It can occur at any syphilis stage, especially if the disease is left untreated or if the person is immunocompromised.

In all patients with syphilis (or highly suspected of having syphilis), inquire about neurologic, ocular, or optic symptoms and complete a neuro exam. Headaches, new-onset weakness, walking difficulties, memory or cognition problems, and personality changes are all symptoms of neurosyphilis. If clinical indications or symptoms of neurologic involvement are evident (e.g., cranial nerve dysfunction, meningitis, stroke, acute or chronic altered mental status, or motor or sensory impairments), a CSF examination should be performed.

Patients are at risk of contracting syphilis if they are sexually active, and are at a higher risk of contracting syphilis if they:

- Engage in high-risk sexual activity: i.e., having sex without a condom, having multiple sexual partners, having anonymous sex, and/or having sex while using drugs.
- Have HIV or other sexually transmitted infections.
- Are taking pre-exposure prophylaxis (PrEP) for HIV prevention.
- Have partner(s) who have tested positive for syphilis.

ACTIONS REQUESTED OF HEALTHCARE PROVIDERS

Test for syphilis: Syphilis serology testing should include a rapid plasma regain (RPR) with titer that reflexes to a treponemal test if the RPR is reactive.

- Pregnant women should be screened for syphilis at their first prenatal care visit. Testing should be repeated during the third trimester and at delivery for women who are at high risk for syphilis.
- Sexually active gay, bisexual, and other men who have sex with men should be screened annually or sooner following disclosure of high-risk sexual activity.

Follow the Centers for Disease Control and Prevention’s [\(CDC’s\) guidelines for treatment.](#)

- All providers are encouraged to treat patients and their partners in their practice. Family PACT, Medi-Cal, and private insurances normally cover testing and treatment for syphilis.

All patients with syphilis should be tested for HIV if not already known to be HIV-infected.

Perform Opt-out testing:

Routine Opt-out Testing (ROOT): Emergency departments (EDs) are uniquely positioned to identify people with syphilis, HIV, and hepatitis C who otherwise might remain undiagnosed.

- EDs often serve as the sole point of contact with the healthcare system. EDs act as a safety net for these individuals and offer an important opportunity to identify and treat these patients, as well as bridge the gap with public health, while providing immediate and essential medical care for people who are at highest risk for sexually transmitted diseases (STD), HIV, and hepatitis C
- California Department of Public Health (CDPH) recommends that EDs consider implementing routine opt-out testing for syphilis, HIV, and hepatitis C.
- Review [CDPH Dear Colleague letter on ROOT](#)

Promptly report: Promptly report all cases of syphilis, including congenital syphilis, to Santa Cruz County – Public Health (statutory requirement). Call 831-454-4114 or submit a [Confidential Morbidity Report \(CMR\)](#) by faxing 831-454-5049 or via the CalREDIE Provider Portal.

ADDITIONAL RESOURCES

- CDPH: [CDPH Dear Colleague Letter - Powdered Benzathine Benzylpenicillin \(Extencilline®\) for the Treatment of Syphilis \(1/26/24\) \(PDF\)](#)
- CDPH: [CDPH Health Advisory - Bicillin L-A Shortage - June 1, 2023](#)
- CDPH: [Screening for Syphilis in Emergency Departments Resource Guide](#)
- [CDC Syphilis Resources](#)
- CDC: [Neurosyphilis, Ocular Syphilis, and Ootosyphilis \(cdc.gov\)](#)
- CDC: [Detailed STD Facts - Syphilis \(cdc.gov\)](#)
- CDC: [STI Screening Recommendations \(cdc.gov\)](#)
- CDC: [STD Facts - Congenital Syphilis \(cdc.gov\)](#)

- [Expanded Syphilis Screening Recommendations for the Prevention of Congenital Syphilis Guidelines for California Medical Providers 2020](#)

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.