



Philadelphia Department of Public Health  
**Division of Disease Control**

CARMEN I. PARIS, M.P.H.  
Health Commissioner

JOSEPH C. CRONAUER  
Executive Deputy

Caroline C. Johnson, MD  
Director, Division of Disease Control

# ***Health Notification***

## **Syphilis in Women**

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In 2007 to date, the Department of Public Health has identified three cases of congenital syphilis among residents of Philadelphia. This interrupts the downward trend in the number of reported cases of congenital syphilis over the past decade. For the coincident time period, few cases of early syphilis have been reported in women compared to the number of congenital syphilis cases identified. Historically, increases in congenital syphilis have been associated with increases in early syphilis among women. Thus, re-emergence of congenital syphilis locally suggests that syphilis incidence is increasing in women, and that the infections are going unrecognized or unreported. ***The purpose of this health notification is to encourage healthcare providers to be vigilant for occurrence of syphilis in women and to screen pregnant women for infection, as described below.***

The infants with congenital syphilis who were recently identified were primarily born to mothers for whom English was not the primary language. Because of language barriers these women may have had difficulty accessing traditional medical services. Additionally, drug use and exchanging sex for drugs or money may have been a risk factor for some of the women.

Congenital syphilis is preventable if syphilis is identified and adequately treated in the mother at least 30 days or more prior to delivery. Persons with primary and secondary syphilis may have a painless genital ulcer/sore, a rash, patchy hair loss, fever and adenopathy. Persons with early latent syphilis will have no symptoms of syphilis therefore the only way to identify infection is through serologic testing.

The Philadelphia Department of Public Health recommends syphilis screening (RPR or VDRL) for:

- Women of childbearing age diagnosed with another STD;
- Women pregnant or of childbearing age seen in Emergency departments;
- Persons with multiple sexual partners including sex workers or their clients;
- Pregnant women, in accordance with 28 Pa Code 27.89, which mandates screening at the following times:
  - At the first prenatal appointment
  - At the third trimester of pregnancy
  - At the delivery of a child
  - At the delivery of a still born child

Patients who test positive for syphilis should be treated with benzathine penicillin 2.4 million units IM, as first line therapy for primary, secondary and early latent syphilis. Patients with late latent syphilis or syphilis of unknown duration should be treated with benzathine penicillin 2.4 million units IM weekly for 3 weeks.

Additional information regarding the diagnosis and treatment of syphilis, including management of penicillin allergic pregnant women, is available at [www.cdc.gov/std/treatment](http://www.cdc.gov/std/treatment) or by calling the Health Department at 215-685-6740.

**All patients with syphilis should be promptly reported to the Philadelphia Department of Public Health at 215-685-6737.**