

TO: Vermont Health Care Providers and Health Care Facilities
DATE: December 19, 2023
FROM: Daniel Daltry, Infectious Disease Program Manager

Congenital Syphilis Prevention

BACKGROUND

Congenital syphilis is a reportable condition that occurs when an untreated syphilis infection, secondary to *Treponema pallidum*, passes to the fetus during any trimester of pregnancy. This can occur either through the placenta or direct contact with a lesion at birth. Congenital syphilis is preventable through testing and treatment during pregnancy.

Rates of congenital syphilis are rising dramatically across the United States. According to the Centers for Disease Control and Prevention (CDC), there was over a 200% increase in reported cases of congenital syphilis from 2017 to 2021. Vermont reported a congenital syphilis case in 2021 after having no cases since 1997.

CLINICAL SIGNS AND SYMPTOMS

Congenital syphilis can lead to miscarriage, stillbirth, prematurity or death shortly after birth. Symptoms may present as early as at birth or as late as 5 years of age.

- Approximately 40% of cases results in stillbirth or death.
- Infected newborns may experience low birth weight, jaundice, maculopapular rash, meningitis, hepatosplenomegaly, severe anemia, deformed bones, infectious rhinitis with nasal discharge, periostitis, and shedding of the skin on palms and soles.
- Later onset of symptoms (> age 2) can often present as blurred vision, dental anomalies (Hutchinson teeth and mulberry molars), nerve deafness, interstitial keratitis, frontal bossing, saddle nose, and rhagades (fissures in the skin).

PREVENTION

Adequate treatment is effective in preventing congenital syphilis. The below strategies can help ensure all pregnant patients are screened for syphilis.

Screen pregnant patients.

- Providers should view any encounter with a pregnant patient (emergency department, urgent care, primary care, etc.), not just obstetrical visits, as an opportunity to ensure syphilis screening.
- Syphilis testing should be done in the first trimester at a minimum with additional screenings in the third trimester based on reported sexual practices/profile of the patient including but not limited to HIV status, new sexual partners, sex with multiple partners, transactional sex, unstable housing, little or no early prenatal care, or sex with drug use (especially heroin and methamphetamine).

- Offer other STI testing, including for HIV. Consider an opt-out approach to testing for both HIV and syphilis especially in the setting of pregnancy.

Provide appropriate treatment when syphilis is detected.

- Reserve Benzathine penicillin G—the only approved treatment during pregnancy—for pregnant individuals due to a limited national supply.
- Doxycycline can be used for sexual partner(s) to prevent reinfection and for other individuals diagnosed with syphilis.

DIAGNOSTIC TESTING

- Two tests are required to diagnose syphilis: treponemal (TP-PA, FA-ABS, TP-EIA, and TP-CIA) and non-treponemal tests (VDLR and RPR).
- Automatic reflex testing should be performed.

REQUESTED ACTIONS

- Be familiar with the syphilis screening and treatment requirements during pregnancy.
- Reserve Benzathine Penicillin G for syphilis infections in pregnant people due to current supply shortages. Doxycycline may be used for other individuals.
- Be familiar with screening and treatment guidelines for congenital syphilis in infants and children.

ADDITIONAL RESOURCES

- [Congenital Syphilis - STI Treatment Guidelines \(cdc.gov\)](#)
- [Syphilis, Congenital 2018 Case Definition | CDC](#)
- [CDC Syphilis Treatment Guidance](#)

If you have any questions, please contact Daniel Daltry at: Daniel.Daltry@vermont.gov.

To be removed from the HAN or have your information updated
please email the Vermont HAN Coordinator at: vthan@vermont.gov.

HAN Message Type Definitions

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.

Info Service Message: Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.