

March 2019

Dear New Mexico clinician,

New Mexico has seen huge increases in cases of reportable sexually transmitted diseases (STD) over the last five years. We are writing to ensure that you have current information about epidemiological trends, best practices and new approaches. This will ensure that you can effectively identify, diagnose and treat these cases to help us reduce the spread of disease.

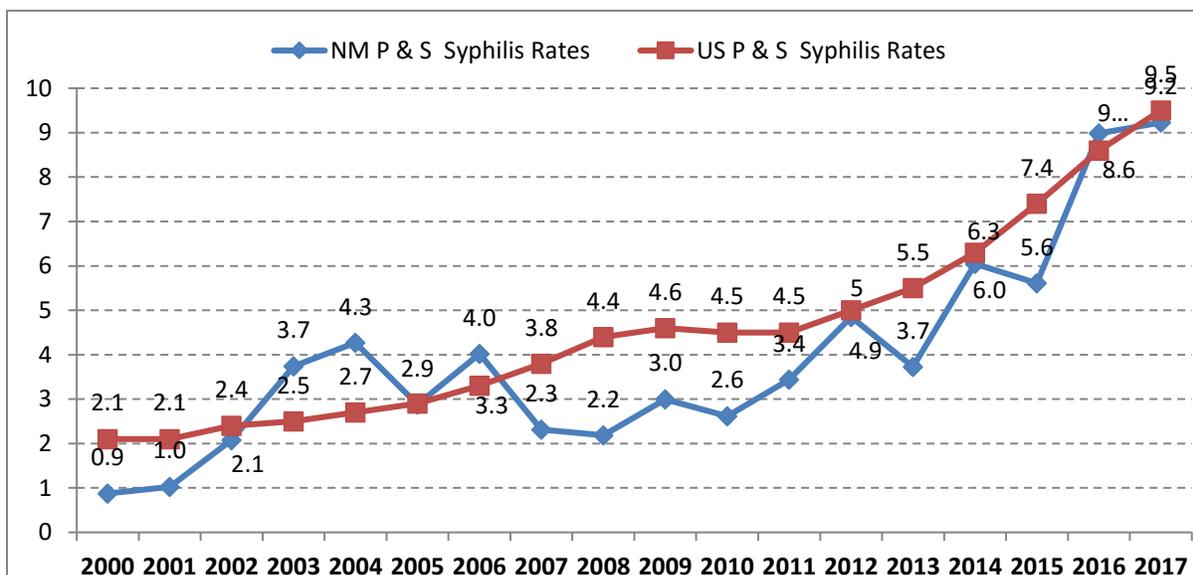
This is the first of two letters. Our focus here is on appropriate diagnosis, staging and treatment of syphilis. The following letter will emphasize gonorrhea, as there are important updates from the federal Centers for Disease Control and Prevention (CDC) on appropriate treatment to avoid resistance.

If you want electronic copies of these letters, the attached resources, or our Confidential Case Report form, these are all available on our website at:

<https://nmhealth.org/about/phd/idb/std/>

National rates of reported primary and secondary (P&S) syphilis in 2000-2001 were the lowest since reporting began in 1941. However, they have almost tripled since that time, according to the CDC (<https://www.cdc.gov/std/stats17/tables/1.htm>).

Unfortunately, New Mexico is seeing the same alarming trends. Cases of syphilis increased 61% in just one year from 2015 to 2016. Our state now ranks 11th in the nation with a total of 470 cases of Primary and Secondary (P & S) syphilis.



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The New Mexico Department of Health (NMDOH) has several initiatives to respond to these high rates.

- We have a Disease Prevention Team (DPT) in every region of the state who interview cases, provide disease management, and ensure partner services to get timely treatment to sexual partners. They are an excellent resource if you have questions or need referrals.
- We recently started a new initiative to expand capacity to diagnose, stage and treat syphilis at our busiest Public Health Offices (PHO) by recruiting new mid-level providers.
- We have several targeted outreaches and special clinic nights at PHOs to reach persons most likely to have syphilis, including gay/bisexual men.

Clinicians across the state are essential partners to fight expanding STD and reduce our rates, with timely and effective diagnosis and treatment. What can you do?

- ✚ Test and presumptively treat all patients who present with Primary or Secondary Syphilis symptoms.
- ✚ Test and presumptively treat all these cases' sexual partners. Stress to your patients the importance of getting their partners treated to prevent re-infection.
- ✚ If you suspect syphilis based on symptoms or exposure, order an RPR with Reflex to Titer and a Treponemal test for a confirmatory.
- ✚ Report promptly to the STD Program by sending the Confidential Case Reporting Form via fax to 505.476.3638.
- ✚ Determine pregnancy status for all infected women. Test all pregnant women for syphilis during the first prenatal visit, again at 28 weeks, and at delivery.
- ✚ Order serial RPR's at least every three months if you are concerned about re-exposure.

Attached is information from the Centers for Disease Control and Prevention (CDC) and California STD Prevention Training Center about evaluating patients for Primary and Secondary Syphilis. You can also download a free CDC app for your smart phone called "CDC STD Tx Guide". Finally, you can find CDC guidelines online here: <https://www.cdc.gov/std/>.

Thanks for your attention. And check your mailbox for the second letter on gonorrhea in roughly a month.



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