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NEW MEXICO HEALTH ALERT NETWORK (HAN) ALERT

Recommendation for Expanded Syphilis Screening to Reduce Rising Rates of Congenital Syphilis

October 16, 2023

Background:

In the United States, cases of congenital syphilis have increased every year since 2013. The Centers for Disease Control and Prevention (CDC) reported 2,855 cases of congenital syphilis in the US in 2021, including 220 congenital syphilis-related stillbirths and infant deaths.

- In 2021, the US congenital syphilis rate was **77.9 cases per 100,000** live births (218% increase from 2017)
- In 2021, the NM congenital syphilis rate was **205.7 per 100,000** live births (4,300% increase from 2017)¹
- In 2022, the New Mexico Department of Health (NMDOH) reported 76 cases of congenital syphilis (73% increase from 2021 and 660% increase in the last 5 years)².
- In 2023 to date, there have been 8 fetal demises related to congenital syphilis reported to NMDOH.

New Mexico:

New Mexico had the second highest rate of both congenital syphilis and primary/secondary syphilis in the nation in 2021 (the most recent finalized CDC data)¹ with rates more than double the national average. New Mexico first issued a congenital syphilis Public Health Order (PHO) in 2020 to increase awareness of rising rates of congenital syphilis and to recommend expanded testing in pregnancy based on high prevalence statewide. While this approach has led to the successful treatment of many pregnant women and the prevention of many cases of congenital syphilis, congenital syphilis cases continue to increase. Similarly, the rates of syphilis in the non-pregnant population continue to rise.

Given the continued high rates of syphilis in NM, the PHO is being reissued. It renews the recommendation to screen pregnant people during the first and third trimesters, and at the time of delivery and includes a recommendation for syphilis screening in *non-pregnant individuals ages 18 – 50*. Both CDC and US Preventive Services Task Force (USPSTF) state that living in areas of high syphilis prevalence is a risk factor that warrants increased screening.

The current public health order recommends screening for all people ages 18 – 50 for syphilis in the next 12 months. This recommendation for screening in non-pregnant people is based on the following:

1. **High rates of syphilis across the state.** The rate of syphilis (all stages) is 241.9 per 100,000 in people ages 18 – 50 (266.1 per 100K for men and 216.7 per 100K for women). USPSTF

¹ [STD Data and Statistics \(cdc.gov\)](https://www.cdc.gov/std/data-and-statistics/)

² [STD Program Summary Slides 2022 \(nmhealth.org\)](https://www.nmhealth.org/std-program-summary-slides-2022)

recommends screening in areas or populations of high prevalence³. While CDC reports early syphilis (primary and secondary) because it is the most infectious, all stages of syphilis have the potential for serious health outcomes if not addressed. Neurosyphilis can occur at any time in the infection and can cause loss of vision or hearing, among other serious outcomes.

2. **Decreased efficacy of contact tracing.** Testing contacts of people diagnosed with syphilis provides an efficient approach to finding new cases. NMDOH Disease Intervention Specialists (DIS) continue to reach out to anyone diagnosed with syphilis to confirm treatment and contact partners named by the patient. However, this strategy alone has not been sufficient to decrease syphilis rates, making broad screening more important for detecting cases of syphilis.
3. **Rising congenital syphilis cases:** Despite three years of mandatory testing (per the prior public health orders) of pregnant people, congenital syphilis cases continue to rise. Lack of timely prenatal care and lack of adequate treatment for a pregnant person despite a timely diagnosis are the two most commonly missed opportunities for congenital syphilis prevention. Structural barriers to care such as poverty, stigma of substance use in pregnancy, citizenship status, lack of healthcare coverage, and low sexual literacy also contribute to this rise in cases.

Direction for Healthcare Providers:

1. **Screen people ages 18 – 50 for syphilis at least once in the next 12 months or more often as recommended based on individual risk or pregnancy status.**
2. **Testing for pregnant people:**
 - a. Test for syphilis in both the 1st trimester (or initial prenatal visit) and 3rd trimester (28-32 weeks gestational age) of pregnancy.
 - b. Test for syphilis at delivery.
 - c. Syphilis testing for all pregnant people who present to urgent care or an emergency room if the patient has not received prior prenatal care.
 - d. Syphilis testing of any person with an intrauterine fetal demise at any gestational age.
 - e. Syphilis testing for all pregnant people at correctional facilities, including prisons, jails, and juvenile detention centers, at the intervals listed above.
3. **Consider syphilis in all pregnant persons:**

Syphilis during pregnancy is associated with miscarriage, stillbirth, perinatal death, preterm delivery, and congenital infection. Timely diagnosis and treatment of syphilis among pregnant people can prevent congenital syphilis.

Most people who gave birth to babies with congenital syphilis received limited or no prenatal care. Therefore, *every health encounter* with a pregnant person can be considered an opportunity to test for syphilis. Maternal risk factors for syphilis during pregnancy include⁴:

- sex with multiple partners,
- sex in conjunction with drug use or transactional sex,
- late entry to prenatal care or no prenatal care,
- methamphetamine or heroin use,
- incarceration of the person or their partner,
- unstable housing or homelessness

³ [Recommendation: Syphilis Infection in Nonpregnant Adolescents and Adults: Screening | United States Preventive Services Taskforce \(uspreventiveservicestaskforce.org\)](#)

⁴ [Syphilis During Pregnancy - STI Treatment Guidelines \(cdc.gov\)](#)

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4. Treatment:

Benzathine penicillin G (Bicillin L-A®) is the **only approved antimicrobial for treating fetal infection and preventing congenital syphilis**. Pregnant people with penicillin allergies should be desensitized and treated with penicillin according to the dosage schedules appropriate for the stage of syphilis. Complete information on syphilis treatment can be found in the [CDC 2021 STD Treatment Guidelines](#).

Currently, there is a nationwide shortage of Bicillin L-A® which is expected to resolve in the second quarter of 2024. CDC issued [clinical guidance](#) for providers in July 2023, and NMDOH issued [prioritization guidance](#) in May 2023. Doxycycline is an acceptable second line treatment for non-pregnant people with syphilis given the Bicillin shortage.

5. Prevention:

Congenital syphilis can be prevented with timely screening and prompt treatment. During pregnancy care, providers should assess the risk for reinfection and prevent reinfection by treating all sex partners.

Providers should also be aware of the [indications for doxy-PEP](#) as an STI prevention strategy. Taking a 200mg dose of doxycycline within 72 hours of condomless sex has been shown to decrease acquisition of chlamydia, gonorrhea, and syphilis by 60% in men who have sex with men and transgender women.

6. Reporting:

New Mexico law requires that syphilis infections be reported to NMDOH within 24 hours of diagnosis. Fax completed reporting forms to the NMDOH STD Program at (505) 476-3638. Reporting forms: <https://nmhealth.org/publication/view/form/1594/>

Reporting allows cases to be investigated and partners to be contacted. NMDOH has more than 25 Disease Intervention Specialists (DIS) who are certified to conduct confidential syphilis case investigations.

For consultation, including results from previous testing, providers can call [1-833-76-REPRO](tel:1-833-76-REPRO) (1-833-767-3776). The STD PRISM database has past positive syphilis test results.

NMDOH STD program information: <https://nmhealth.org/about/phd/idb/std/>

New Mexico Health Alert Network: To register for the NM Health Alert Network, please visit the following site [New Mexico Health Alert Network \(HAN\) Registration & Access Portal - New Mexico \(readyop.com\)](#). Please fill out the registration form completely and click Submit at the bottom of the page, to begin receiving Important health alerts, advisories, and updates.

Please Note that our system also utilizes text messaging to notify members of important health information. Due to FCC Regulation changes that are designed to decrease the amount of unwanted spam text messages sent each year to citizens, please save, this phone number **(855) 596-1810** as the **“New Mexico Health Alert Network”** default phone number for your account used for text messages on the mobile device(s) you register with us.

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