

IMPORTANT UPDATE ON SYPHILIS

To: Physicians, Nurse Practitioners, Nurses, and Midwives
Hospital Infection Control Departments and Emergency Departments

FOR IMMEDIATE ATTENTION



The number of cases of infectious syphilis has been on the rise [across Canada](#) and provincially over the last several years. **Currently, syphilis rates are increasing in the region and THU has been unable to reach a number of contacts. Given the current trend, THU expects that there will be more local cases over the next few months.**

The purpose of this Advisory Alert is to provide an update regarding the importance of proper diagnosis and management of Syphilis cases. This alert will serve as a reminder of treatment for cases as per the Canadian Guidelines on Sexually Transmitted Infections.

Etiology, Transmission, Signs and Symptoms

Syphilis is a sexually transmitted infection (STI) caused by the bacterium *Treponema pallidum*. Clinical manifestations vary by stage (primary, secondary, latent, tertiary). Primary, secondary, and early-latent syphilis are considered infectious (see Table 1, below) and are the focus of this alert. The main mode of transmission is by vaginal, anal, and oral sexual contact. Vertical transmission can occur, resulting in congenital syphilis. Direct contact with lesions of primary and secondary syphilis pose the greatest risk of transmission. Not all lesions may be readily apparent. A high proportion of individuals fail to recall primary chancre. Signs and symptoms may be modified in the presence of HIV co-infection.

Table 1: Clinical Manifestations of Infectious Syphilis by Stage of Infection

Stage	Clinical Manifestations	Incubation Period	
Primary	Chancre, regional lymphadenopathy	3 weeks (3-90 days)	
Secondary	Rash, fever, malaise, lymphadenopathy, mucous lesions, condyloma lata, patchy or diffuse alopecia, meningitis, headaches, uveitis, retinitis	2-12 weeks (2 weeks to 6 months)	
Early Latent	Asymptomatic	<1 year	

If you have any questions or concerns, please contact your local Timiskaming Health Unit:

Monday to Friday
8:30 a.m. – 4:30 p.m.

New Liskeard

Tel: (705) 647-4305
Toll Free: (866) 747-4305
Fax: (705) 647-5779

Kirkland Lake

Tel: (705) 567-9355
Toll Free: (866) 967-9355
Fax: (705) 567-5476

After-Hours or Weekend
On-Call Number
(705) 647-3033

www.timiskaminghu.com

If you have any questions or concerns, please contact your local Timiskaming Health Unit:

Monday to Friday
8:30 a.m. – 4:30 p.m.

New Liskeard

Tel: (705) 647-4305
Toll Free: (866) 747-4305
Fax: (705) 647-5779

Kirkland Lake

Tel: (705) 567-9355
Toll Free: (866) 967-9355
Fax: (705) 567-5476

After-Hours or Weekend
On-Call Number
(705) 647-3033

www.timiskaminghu.com

Diagnosis: Laboratory Testing

1. [Testing from lesions of primary and secondary syphilis](#)
2. Serology: indicated for routine diagnosis of suspected syphilis cases, monitoring of treatment of diagnosed syphilis, and as part of prenatal screening, and donor screening.
3. Use the [General Test Requisition from Public Health Ontario Laboratory](#) when submitting a specimen for syphilis.

Treatment

Long acting benzathine penicillin is required to adequately treat infectious syphilis and achieve detectable serum levels of penicillin for two (2) to four (4) weeks. A longer course of treatment is required to cure infections of longer duration (late latent and/or tertiary syphilis).

Short acting penicillin agents are not adequate to cure syphilis. Alternative treatments (e.g. doxycycline, ceftriaxone) may take longer and individuals should be advised to abstain from sexual contact until treatment of the index case and (if indicated) all current partners has been completed and ideally for seven (7) days after completion of treatment.

Note: To avoid unnecessary retreatment, obtain and document prior history of treatment for syphilis and prior serologic results.

Table 2: The following table outlines the preferred treatment for infectious syphilis:

Patient	Preferred treatment
All non-pregnant adults with primary, secondary or early latent syphilis	Benzathine penicillin G-LA (long acting) 2.4 million units IM as a single dose*
Epidemiological treatment* of all sexual contacts in the preceding 90 days to primary, secondary or early latent syphilis	*The medication is dispensed as two separate, preloaded syringes , administered in each dorsogluteal or ventrogluteal muscle, for a total of 2.4 million units. Benzathine penicillin G-LA must be refrigerated between (2-8 degrees C)
Pregnant women with primary, secondary, or early latent syphilis	Benzathine penicillin G-LA 2.4 million units IM as a single dose [B-II] or Benzathine penicillin-LA G 2.4 million units IM as a single dose weekly for two (2) doses [C-III] (Manage people diagnosed with infectious syphilis during pregnancy in consultation with an obstetric/maternal-fetal specialist)
*Refers to treatment provided when diagnosis is considered likely on clinical, laboratory or epidemiologic grounds, but before results of confirmatory tests are known	

HEALTHCARE PROVIDER ALERT

September 9, 2022



If you have any questions or concerns, please contact your local Timiskaming Health Unit:

Monday to Friday
8:30 a.m. – 4:30 p.m.

New Liskeard

Tel: (705) 647-4305
Toll Free: (866) 747-4305
Fax: (705) 647-5779

Kirkland Lake

Tel: (705) 567-9355
Toll Free: (866) 967-9355
Fax: (705) 567-5476

After-Hours or Weekend **On-Call Number**

(705) 647-3033

www.timiskaminghu.com

Please consult the [Canadian Guidelines on Sexually Transmitted Infections](#) for additional guidance.

Health care practitioners can refer for or have access to publicly funded syphilis treatment by contacting the THU Sexual Health nurse using the contact information below. Patients who are referred to the clinic for treatment must have a prescription which includes staging.

Reporting

Health care practitioners are encouraged to call the sexual health nurse at 705-647-4305, to report suspect or confirmed syphilis cases. The sexual health nurse can support practitioners with any questions or concerns related to infectious syphilis case and contact management.