

Date: 4 November 2019
To: South Zone Physicians
From: Medical Officers of Health - South Zone
RE: Rise in Infectious Syphilis Cases in South Zone

South Zone is experiencing a rise in infectious syphilis cases. To date, there have been 28 cases reported in 2019.

Infectious syphilis	2014	2015	2016	2017	2018	2019
Cases	5	5	5	11	28	28

Similar trends have been reported across Alberta, with the largest increase in incidence rate in the North and Edmonton Zones respectively. A provincial syphilis outbreak was declared by Alberta Health in 2016. Most concerning is the fact that the majority of cases are in the heterosexual population; with resulting increase in reported cases of congenital syphilis. Across Alberta, there have been 37 cases of congenital syphilis this year. There have been NONE in the South Zone.

The major identified risk factors include: illicit substance use, being incarcerated, men who have sex with men, transient populations and sex trade workers.

Given the rising rates of syphilis in Alberta, screening for ALL sexually transmitted infections (STIs), should be discussed with all sexually active persons during routine office visits. All persons reporting sex with new, anonymous or multiple partners should be re-screened every 3-6 months.

SCREENING TEST

For *symptomatic and asymptomatic* individuals; the following screening tests are recommended:

- *Urine (males and females):* Genprobe Aptima Combo-2 test, a nucleic acid amplification test (NAAT) for gonorrhoea and chlamydia.
- *Serology:*
 - Syphilis enzyme immuno-assay (EIA)

- Anti-HIV antibody
- Hepatitis B surface antigen (HBsAg) if there is no history of hepatitis B immunization or immunization status is unknown.
- Anti-HBsAg levels should be checked in individuals at high risk for hepatitis B infection unless there is previous documentation of immunity.
- Hepatitis C antibody for people who inject drugs if not already known Hep C Antibody positive.
- *For Men who have Sex with Men:* routine screening of extra-genital sites (e.g. throat and rectum) for gonorrhea and chlamydia with NAAT is recommended at least every 6-12 months.
- *Heterosexual men and women may also require extragenital swabs for STIs* if sexual history indicates possible risk factors. Infections in extragenital sites may not be picked up by urine testing alone.

TREATMENT

- Please refer to the Alberta Treatment Guidelines for Sexually Transmitted Infections (2018) <https://open.alberta.ca/publications/treatment-guidelines-for-sti-2018> or contact AHS Centralized STI Services at the number below.
- Treatment and follow-up of all suspected or confirmed cases of *syphilis* should be done in consultation with AHS Centralized STI Services.
- For any questions, please consult with a STI expert or clinic. Please see numbers below.

PUBLIC HEALTH FOLLOW-UP

- Any clients with positive results will be followed up by Public Health, to ensure appropriate treatment and contact tracing is completed.

FOR CONSULTATION, please call:

AHS Centralized STI Services: 780-735-1466, or toll free: 1-888-535-1466

STI Clinics: Calgary 403-955-6700; Edmonton 780-342-2300; Fort McMurray 780-791-6182

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