INFECTIOUS SYPHILIS MANAGEMENT TOOL

WHO SHOULD I TEST?

ALL PERSONS WHO PRESENT WITH SYMPTOMS OF SYPHILIS

such as painless genital, anal or oral ulcers, generalized maculopapular rash (typically including palms and soles) and/or lymphadenopathy.

See Manitoba Health, Healthy Living and Seniors (MHHLS) protocol (below) for details on clinical presentations

IN ADDITION TO TESTING SYMPTOMATIC PERSONS, ALSO SCREEN THE FOLLOWING PERSONS:

- ALL pregnant persons congenital syphilis is often severe, disabling, and life-threatening
- ALL persons reporting unprotected sex with casual or anonymous partners should be routinely tested for sexually transmitted infections (STI) every 3-6 months
- ALL persons requesting STI testing
- ALL persons with any confirmed or suspected STI such as gonorrhea, chlamydia or HIV
- consider offering serology for all patients as part of routine care

WHO IS INFECTIOUS?

PRIMARY SYPHILIS: painless genital, anal or oral ulcerative lesions, +/- inguinal lymphadenopathy. The initial ulcer typically heals spontaneously.

SECONDARY SYPHILIS: usually a generalized maculopapular nonpruritic rash (typically including palms and soles) +/- other rash types, +/- fever, +/- generalized lymphadenopathy +/-alopecia +/-condyloma lata.

EARLY LATENT SYPHILIS: cases are asymptomatic, only detected with serologic screening.

NOTE: neurosyphilis can occur during any stage of infection. Consult ID if neurologic symptoms.

HOW DO I TEST?

- 5-10 ml blood in a red-stoppered tube or a serum separator tube (red top with yellow cap)
- Cadham Provincial Laboratory (CPL) requisition form should request syphilis serology testing and HIV antibody testing; and should provide information on reason for testing, including symptoms or suspected stage of syphilis. (Consider choosing CPL's STI panel which includes serology testing for syphilis, HIV and hepatitis B and test for hepatitis C as well.)
- Swab ulcers, sores, or moist skin lesions with a dacron swab (ex: swab from GenProbe package) of the lesion and place into viral transport medium. The sample must remain refrigerated until sent to CPL and the CPL requisition should clearly indicate the site and test requested: T. pallidum PCR testing.

WHAT IS THE TREATMENT?

- Benzathine penicillin G (Bicillin®) 2 injections of 1.2 million units IM in a single session (2.4 MU total). See MHHLS protocol for information on allergy, pregnancy and HIV positive persons.
- The Bicillin[®] in preloaded syringes is provided free of charge by MHHLS (see order form below).
- Sex contacts of known syphilis cases MUST ALSO immediately be offered treatment for syphilis, without awaiting testing results.
- When staging is questionable in asymptomatic person, consider staging as Early Latent for reporting purposes, but treating as Late Latent (3 weekly treatments of Bicillin).
- Follow serologic response as per provincial protocol and current outbreak response. If titres do not decrease as per protocol, repeat HIV testing and consult ID.

IS IT REPORTABLE? Cases of syphilis are reportable under The Public Health Act, as are identified contacts of cases. If you are contacted by a public health nurse for follow up of your patient who has an STI, your collaboration and assistance would be greatly appreciated.

WHERE CAN I GET MORE INFO?

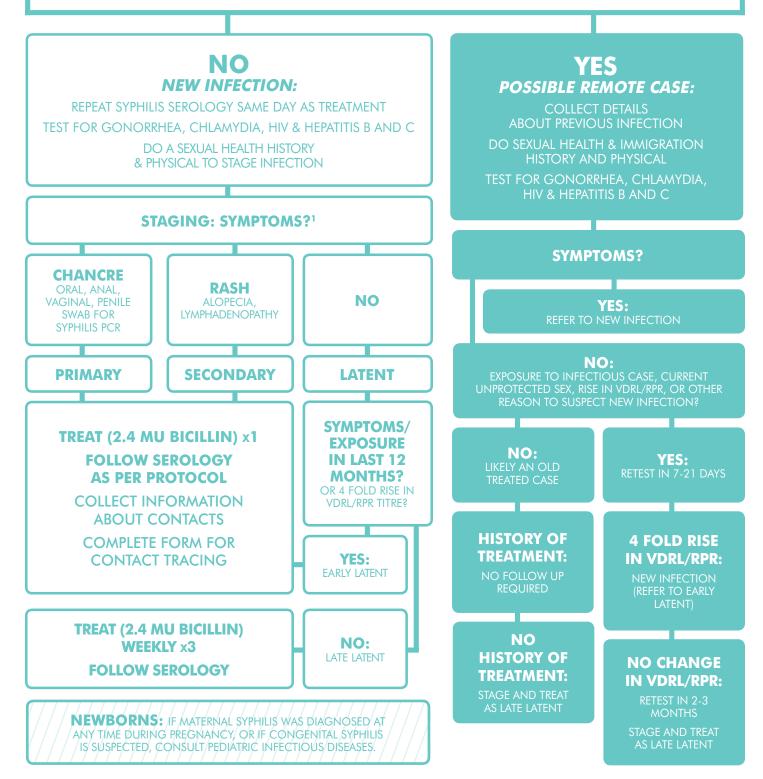
- Any complicated cases, all cases of neurosyphilis, or for assistance, consult Infectious Diseases.
- Consult Pediatric Infectious Diseases for any pregnant patient diagnosed with syphilis, any newborn if maternal syphilis was diagnosed at any time during pregnancy, or if congenital syphilis is suspected.
- MHHLS Syphilis Protocol http://www.gov.mb.ca/health/ publichealth/cdc/protocol/syphilis.pdf
- CPL -Cadham Provincial Laboratory Serology section: 204-945-6123
- MHHLS STI Medication Order Form http://www.gov.mb.ca/health/ publichealth/cdc/protocol/form11.pdf





POSITIVE SYPHILIS SEROLOGY

CLIENT HISTORY OR CADHAM LAB DOCUMENTATION OF REMOTE POSITIVE SYPHILIS SEROLOGY?



1. NEUROSYPHILIS CAN OCCUR DURING ANY STAGE OF INFECTION. CONSULT ID IF NEUROLOGIC SYMPTOMS.

