

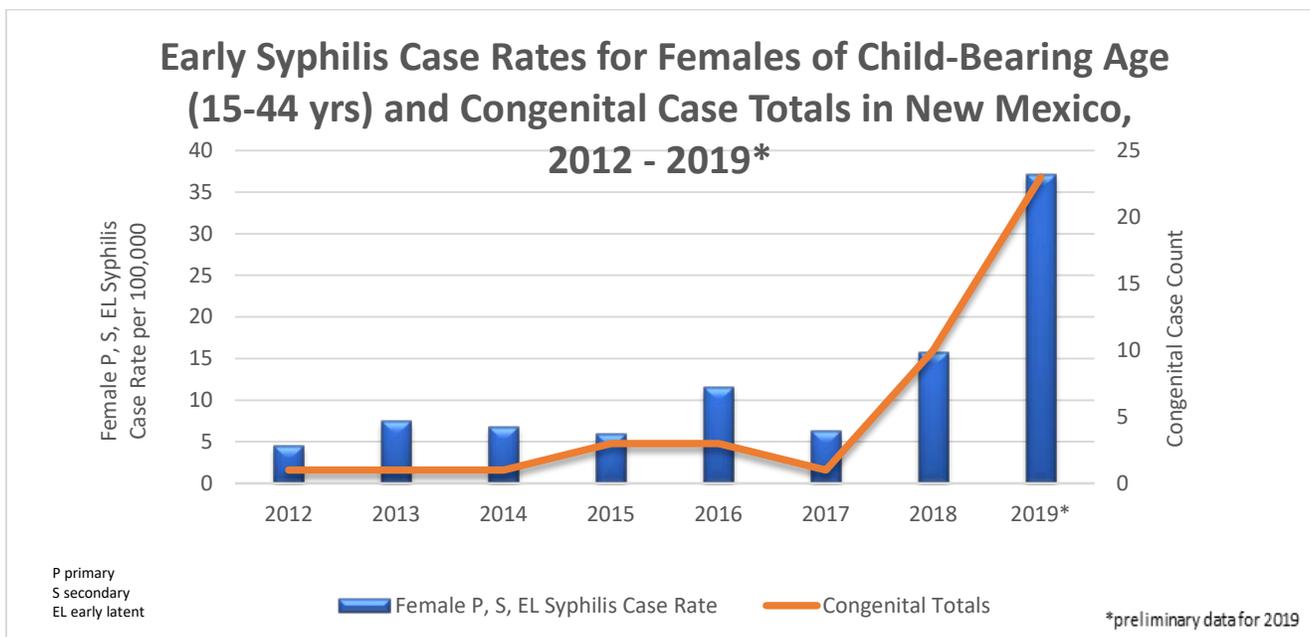
NEW MEXICO HEALTH ALERT

Congenital Syphilis is on the Rise: New Mexico Department of Health Requests Syphilis Testing for All Pregnant Women in the First Trimester, Third Trimester, and again at Delivery

Background: In the United States, the number of cases of primary and secondary syphilis among women and cases of congenital syphilis has increased every year since 2012. The Centers for Disease Control and Prevention (CDC) recently announced that MORE THAN 1,300 CASES of congenital syphilis were reported in 2018.¹

Situation: New Mexico is experiencing an increase of syphilis in women and an increase in the total number of congenital syphilis cases. Syphilis case rates among women in the state have increased 378% from 2012 to 2018. New Mexico now ranks **8th in the nation for rates of congenital syphilis cases**. As of December 31, 2019, **23 cases (preliminary data) of congenital syphilis have been reported in New Mexico**. From 2012 to 2017, New Mexico averaged 2 cases of congenital syphilis per year.

Disease: Congenital syphilis occurs when a pregnant woman with untreated early syphilis transmits the infection to her fetus. It is a potentially devastating disease that can lead to fetal demise, stillbirth or cause severe illness in babies including prematurity, birth defects, blindness, hearing loss, bone and dental abnormalities. Although live-born infants may appear normal at birth, clinical manifestations can appear between 2 months and 2 years of age.²



New Mexico Department of Health (NMDOH) Direction to Healthcare Providers

1) Consider syphilis in all pregnant women

Most women who gave birth to babies in New Mexico with congenital syphilis received limited prenatal care late in pregnancy or none at all. Congenital syphilis prevention relies on screening and treatment of pregnant women found to have syphilis. Many women are unaware that a prior untreated syphilis infection *now asymptomatic* can still transmit syphilis to her unborn child and result in poor pregnancy outcomes.

¹ CDC Fact Sheet <https://www.cdc.gov/nchstp/newsroom/docs/factsheets/STD-Trends-508.pdf>

² Centers for Disease Control and Prevention Congenital Syphilis Fact Sheet <https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.htm>

Use *every health encounter* with a pregnant woman as an opportunity to test for syphilis, especially those who are at *high risk* or not yet engaged in adequate prenatal care. This includes emergency department and urgent care settings, correctional facilities, women, infants, and children (WIC) programs, residential and out-patient addiction treatment centers, homeless facilities, and harm-reduction program and outreach sites.

A pregnant woman at **high risk** for giving birth to a child with congenital syphilis is defined as a woman who

- has signs and symptoms of syphilis infection: [CDC syphilis fact sheet](#)
- was diagnosed with a sexually transmitted infection during pregnancy
- received late, limited or no prenatal care
- has a history of incarceration
- is involved with substance use,
- exchanges sex for substances, money, housing, or other resources

- 2) **Screen all Pregnant Women** - it is required by law that pregnant women get tested for syphilis at their first prenatal visit. In response to New Mexico's increase in rates of congenital syphilis, NMDOH has issued a public health order effective January 10, 2020 to increase syphilis screening among pregnant women. The public health order states:

All medical practitioners shall perform the following upon consent of the patient:

- Syphilis testing for all pregnant women in their 1st trimester (or initial prenatal visit) and 3rd trimester (28-32 weeks gestational age).**
- Syphilis testing for all pregnant women again at delivery.**
- Syphilis testing for all pregnant women who present to an urgent care center or an emergency room if the patient has not received prior prenatal care.**
- Syphilis testing of any woman with an intrauterine fetal demise at any gestational age.**
- Syphilis testing for all pregnant women at correctional facilities, including prisons, jails, and juvenile detention centers, at the intervals and events ordered herein.**

3) Treatment

In pregnancy, penicillin is the only recommended therapy. Pregnant women with penicillin allergies should be desensitized and treated with penicillin according to the dosage schedules appropriate for the stage of syphilis. More information on syphilis treatment can be found in CDC 2015 STD Treatment Guidelines Congenital Syphilis Evaluation & Treatment at <https://www.cdc.gov/std/tg2015/congenital.htm>.

4) Prevention

All congenital cases of syphilis can be prevented with timely screening and prompt treatment. Prevent reinfection of pregnant women by treating **all** sex partners.

5) Reporting

New Mexico law requires that all syphilis infections be reported to the health department within 24 hours of diagnosis. **For suspected or confirmed congenital syphilis cases please report immediately to NMDOH 24/7/365 on-call service at (505) 827-0006.** Reporting of routine syphilis cases can be completed through the New Mexico Department of Health Sexually Transmitted Disease Program at Fax # (504) 476-3638. Reporting forms can be found here: <https://nmhealth.org/publication/view/form/1594/>. Further guidance on reporting and links to New Mexico Department of Health are available here: <https://nmhealth.org/about/phd/idb/std/>.

If you have further questions or need more information, consider contacting your local Infectious Disease Expert or call the NMDOH STD program at (505) 476-3636.