



# HEALTH ADVISORY #101

## West Virginia Syphilis Outbreak Update

**TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities**  
**FROM: Rahul Gupta, MD, MPH, FACP, Commissioner for Public Health and State Health Officer, WVDHHR, Bureau for Public Health**  
**DATE: 07-24-2015**

**LOCAL HEALTH DEPARTMENTS:** PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

**OTHER RECIPIENTS:** PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

As of July 24, primary, secondary or early latent syphilis continues to be a problem in West Virginia. Syphilis outbreaks have been declared in multiple counties. Thirty nine (39) cases of syphilis have been identified throughout WV since January 2015, six (6) of which are co-infected with HIV. Syphilis cases were 24 times higher in 2014-15 than 2011.

Please be on the lookout for cases of syphilis and:

1. Order appropriate diagnostic testing for syphilis; either:
  - a. Dark field examination of a primary chancre; or
  - b. Serological tests for syphilis, including:
    - i. Nontreponemal tests (e.g., VDRL and RPR). These are screening tests that are reported as a titer. Nontreponemal tests can have false positive results and should always be confirmed with a more specific treponemal test.
    - ii. Treponemal tests (e.g., FTA-ABS, TP-PA, various EIAs, and chemiluminescence immunoassays). These tests detect antibodies that are specific for syphilis and are necessary to confirm the diagnosis of syphilis. Both tests together can be used to confirm the diagnosis of syphilis and guide patient management decisions.
2. Treat appropriately:
  - a. Primary, secondary or early latent syphilis: A single intramuscular (IM) injection of long acting Benzathine penicillin G (2.4 million units administered intramuscularly) is recommended.
  - b. Late latent syphilis or latent syphilis of unknown duration: Three doses of long acting Benzathine penicillin G (2.4 million units IM) at weekly intervals are recommended.
3. Report cases of syphilis to your local health department.

Primary syphilis is characterized by appearance of a chancre; a firm, round, and painless lesion, usually on the genitalia; however they can appear in locations that make them difficult to find (e.g., the vagina or anus). MSM and women are less likely to be diagnosed in primary stage than men having sex with women only. The chancre lasts 3 to 6 weeks and heals with or without treatment. Without adequate treatment, the infection progresses to secondary syphilis. Secondary syphilis is characterized by skin rashes and/or mucous membrane lesions (sores in the mouth, vagina, or anus). Rashes can appear when the primary chancre is healing or several weeks after the chancre has healed. The characteristic rash of secondary syphilis may appear as rough, red, or reddish brown nonpruritic spots both on the palms of the hands and the bottoms of the feet. However, the rash can be variable in presentation and associated with other signs and symptoms including condyloma lata, fever, swollen lymph nodes, sore throat, patchy hair loss, headache, weight loss, myalgias, and fatigue. Like primary syphilis, secondary syphilis also goes away with or without treatment. Without treatment, the infection will progress to latent and then late syphilis.

Providers can access on-line training about syphilis at: <http://www2a.cdc.gov/stdtraining/self-study/syphilis/default.htm>  
For more information about sexually transmitted infections in West Virginia, see: <http://www.dhr.wv.gov/oeps/std-hiv-hep/Pages/default.aspx> or call 1 (800) 642-8244.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

**Categories of Health Alert messages:**

**Health Alert:** Conveys the highest level of importance. Warrants immediate action or attention.

**Health Advisory:** Provides important information for a specific incident or situation. May not require immediate action.

**Health Update:** Provides updated information regarding an incident or situation. Unlikely to require immediate action.