



- Please immediately bring to the attention of all doctors -

Date: 15 May 2017

Contact telephone number: **1300 232 272 (24 hours/7 days)**

Syphilis Outbreak in Northern South Australia

The Communicable Disease Control Branch (CDCB) has been closely monitoring infectious syphilis notifications in South Australia in light of a multi-jurisdictional outbreak of syphilis occurring across northern Australia. It appears that this outbreak has spread to South Australia, with sustained transmission occurring in Port Augusta, and there is the potential for spread to other regions of South Australia.

In South Australia since November 2016 there has been a clustering of infectious syphilis cases amongst Indigenous persons in the Port Augusta region. Additional cases have occurred in the APY lands, Ceduna/Yalata and Coober Pedy, some with links to Port Augusta. In total, 11 cases of infectious syphilis have occurred in these regions, and of major concern, four cases of infectious syphilis have been diagnosed in pregnant women, and one child has been born with congenital syphilis.

Syphilis is highly infectious during the first two years of infection. Pregnant women can transmit syphilis to their baby, which can result in perinatal death, premature delivery, and congenital abnormalities. Syphilis also increases the risk of HIV transmission.

Practitioners should be aware of the increased possibility of syphilis in Aboriginal people residing in or travelling from the outbreak areas listed above, and syphilis screening should be offered in the following circumstances:

- Where there is clinical suspicion of syphilis;
- Antenatal testing – in addition to testing at the first visit (10-12 weeks), testing should be repeated at 28 weeks, 36 weeks, at delivery, and at the 6 week post-natal check;
- During routine sexually transmitted infection (STI) screening in 16-35 year olds (offer HIV testing as well);
- For anyone who is diagnosed with another STI such as chlamydia, gonorrhoea or trichomonas (offer HIV testing as well);
- Anyone aged 16-35 who is having a blood test for another reason – e.g. during an adult health check, or emergency department presentation.

Practitioners should consider screening for syphilis in all sexually active patients. Contact SA Pathology (8222 3000) or Clinic 275 (8222 5075) if interpretation of results is required.

Practitioners should test and treat for syphilis on the day of presentation for all people with genital ulcers. Do not wait for a positive test result. Locating, testing, and treating partners of infectious cases is also important in controlling syphilis.

An intramuscular injection of benzathine penicillin 1.8 g (2.4 million units) will cure a person who has had syphilis for less than two years. Women diagnosed in the third trimester should be treated with a second dose of benzathine penicillin 1.8 g (2.4 million units) one week later. If there is a history of penicillin allergy consult with an Infectious Diseases or Sexual Health Physician.

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www.sahealth.sa.gov.au/NotifiableDiseaseReporting