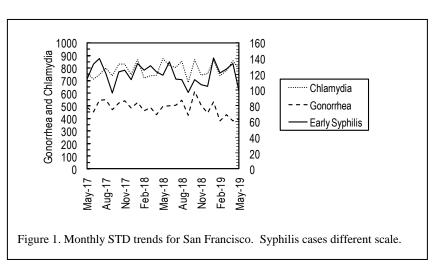


San Francisco Monthly STD Report

Table 1. STDs among residents, May, 2019. Female syphilis cases include patients assigned as female at birth

	2019	2018		
	month	YTD	month	YTD
Gonorrhea	393	2,116	497	2,395
Male rectal gonorrhea	104	571	141	702
Chlamydia	792	4,027	877	3,948
Male rectal chlamydia	198	998	249	1082
Syphilis (adult total)	125	769	138	745
Primary & secondary	39	230	45	219
Early latent	61	394	74	413
Unknown latent	10	35	2	13
Late latent	15	110	17	100
Neurosyphilis	0	12	4	11
Congenital syphilis	0	1	0	0
Female syphilis	16	61	9	48



Partners

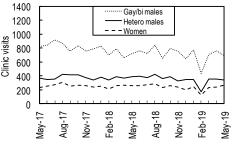
Table 2. Selected STD cases and rates for San Francisco by age and race/ethnicity, 2019 through May only. Rates equal cases per 100,000 residents per year based on 2010 US Census Data.

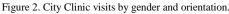
	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia	4,027	1,200.3	523	472.4	401	2,057.3	748	1,474.2	1,293	919.6
Gonorrhea	2,116	630.7	243	219.5	229	1,174.8	427	841.6	822	584.6
Early syphilis	624	186.0	57	51.5	79	405.3	142	279.9	274	194.9
Under 20 yrs										
Chlamydia	319	1,377.1	36	390.2	89	4,541.8	85	1,612.4	38	743.8
Gonorrhea	43	185.6	1	10.8	16	816.5	13	246.6	4	78.3
Early syphilis	4	17.3	2	21.7	1	51.0	1	19.0	0	0.0

Table 3. HIV testing among City Clinic patients, May, 2019.

	2019	2018		
	month	YTD	month	YTD
Tests	478	2,400	510	2,582
Antibody positive	3	16	3	19
Acute HIV infection	1	3	1	5

Note: All statistics are provisional until the annual report is released for the year. Morbidity is based on date of diagnosis. Totals for past months may change due to delays in reporting from labs and providers.





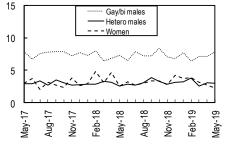


Figure 3. Average number of recent* sex partners for City Clinic visits by gender and sexual orientation. **Recall period is 3 months.*

SFDPH Health Alert and Activation: Rising Rates of Syphilis Among Pregnant Women

On May 22, 2019, the San Francisco Department of Public Health released a Health Alert regarding the ongoing increases in syphilis infections among women and prevention of congenital syphilis. <u>https://www.sfcdcp.org/wp-content/uploads/2019/05/Health-Alert-Syphilis-SFDPH-FINAL-05.22.2019.pdf</u>

A key Action Requested of Clinicians includes *testing all pregnant women for syphilis at least twice during pregnancy*: 1) at the first clinical encounter (ideally during the first trimester) and 2) during third trimester (ideally between 28-32 weeks gestation). Women with risk factors for syphilis should be tested a third time at delivery. Infants should not be discharged from the hospital unless the mother has been tested for syphilis at least once during pregnancy.

• Risk factors for syphilis in women include substance use, homelessness, sex work, sex in exchange for money, housing or drugs, intimate partner violence, a history of incarceration, or sex with a partner who may be at risk for syphilis.

On June 3, 2019, SFDPH activated the Incident Command System to align intra-departmental and inter-City agency work to increase syphilis screening and treatment, provide comprehensive services to pregnant women who need support, and to prevent congenital syphilis.

Syphilis Provider Detailing is available to any clinician/clinical group that provides or seeks to provide syphilis testing. A trained educator provides training and technical assistance, including clinical resources and patient materials, to support providers in syphilis screening, diagnosis, treatment, and patient education. Contact <u>Alyson.Decker@sfdph.org</u> for more information.

To access services for patients or partners or ask questions about syphilis, please call us at 415-487-5595. Please continue to **report syphilis to us within 1 working day**. We thank you for your critical partnership in syphilis prevention and treatment. *TQN/DS/AD/SEC/SSP*

Provider STD Reporting: 415-487-5555, 415-431-4628 (fax)