



# San Francisco Monthly STD Report

Data for January, 2013  
Report prepared February 20, 2013

Table 1. STDs among residents, January, 2013.

	2013		2012	
	month	YTD	month	YTD
Gonorrhea	210	210	214	214
Male rectal gonorrhea	70	70	75	75
Chlamydia	451	451	392	392
Male rectal chlamydia	116	116	102	102
Syphilis (adult total)	112	112	60	60
Primary & secondary	49	49	29	29
Early latent	46	46	19	19
Unknown latent	0	0	0	0
Late latent	17	17	12	12
Neurosyphilis	0	0	0	0
Congenital syphilis	0	0	0	0
PID	9	9	9	9

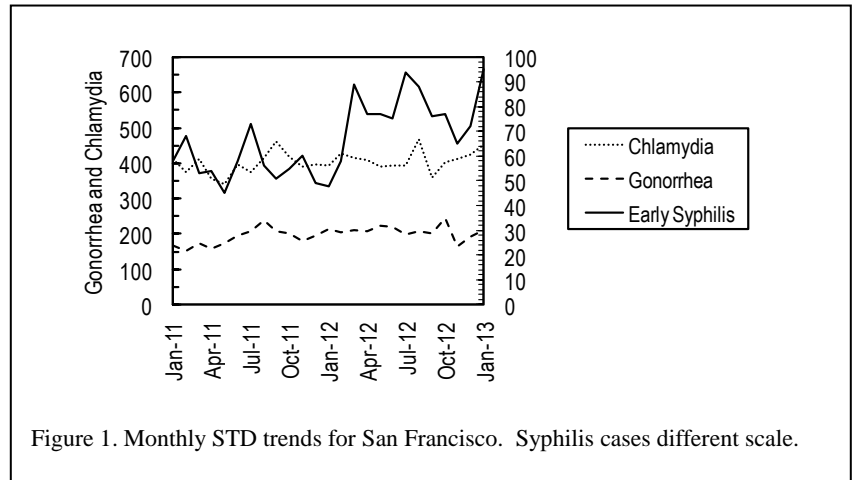


Figure 1. Monthly STD trends for San Francisco. Syphilis cases different scale.

Table 2. Selected STD cases and rates for San Francisco by age and race/ethnicity, 2013 through January only. Rates equal cases per 100,000 residents per year based on 2000 US Census data.

	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
<i>All ages</i>										
Chlamydia	451	696.8	64	304.3	75	1,404.7	63	690.4	151	534.7
Gonorrhea	210	324.4	13	61.8	19	355.9	39	427.4	111	393.0
Early syphilis	95	146.8	7	33.3	11	206.0	20	219.2	53	187.7
<i>Under 20 yrs</i>										
Chlamydia	37	864.3	3	165.2	17	3,098.3	3	324.9	4	432.7
Gonorrhea	4	93.4	0	0.0	3	546.8	0	0.0	0	0.0
Early syphilis	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

Table 3. HIV testing among City Clinic patients, January, 2013.

	2013		2012	
	month	YTD	month	YTD
Tests	552	552	386	386
Antibody positive	9	9	10	10
Acute HIV infection	3	3	2	2

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.

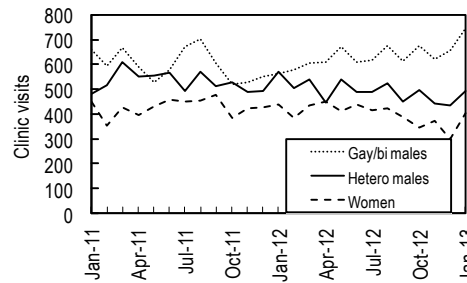


Figure 2. City Clinic visits by gender and orientation.

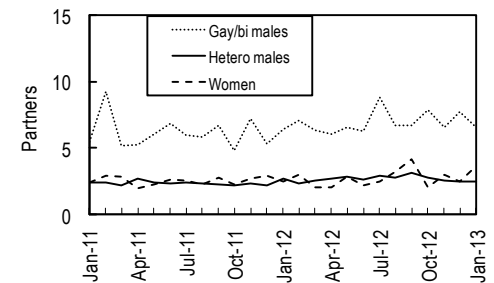


Figure 3. Average number of recent\* sex partners for City Clinic visits by gender and sexual orientation. \*Recall period is 3 months.

## Doxycycline Shortage

The Food and Drug Administration (FDA) reported a shortage of doxycycline on January 18, 2013. Doxycycline is a recommended therapy for some sexually transmitted infections and syndromes including chlamydia, nongonococcal urethritis, epididymitis and pelvic inflammatory disease. It is also an alternative therapy for syphilis in patients with a penicillin allergy. Doxycycline tablets/capsules are currently available in limited supplies. For additional information about the availability of doxycycline, visit the [FDA Drug Shortage Website](http://www.fda.gov/Drugs/DrugSafety/DrugShortages/ucm050792.htm): <http://www.fda.gov/Drugs/DrugSafety/DrugShortages/ucm050792.htm>. Other CDC recommended and additional alternative regimens are listed below and outlined in the [2010 STD Treatment Guidelines](#).

<b>Chlamydia and Nongonococcal urethritis</b> Azithromycin 1 g orally in a single dose  <b>Gonorrhea</b> Ceftriaxone 250 mg IM in a single dose PLUS Azithromycin 1 g orally in a single dose  <b>Syphilis (penicillin allergic)</b> <b>Primary or secondary syphilis</b> Tetracycline 500 mg orally four times daily for 14 days <b>Late latent syphilis</b> Tetracycline 500 mg orally four times daily for 28 days	<b>Epididymitis</b> Ceftriaxone 250 mg IM in a single dose PLUS Tetracycline 500 mg four times daily for 10 days  <b>Pelvic Inflammatory Disease*</b> Ceftriaxone 250 mg IM in a single dose PLUS Clindamycin 450 mg orally four times daily for 14 days WITH OR WITHOUT Metronidazole 500 mg orally twice a day for 14 days *see STD Treatment Guidelines for additional regimens
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To assist us with understanding the extent of this shortage, please contact Deborah Williams at City Clinic (415 487 5514) if your program area is experiencing any difficulty in obtaining doxycycline tablets/capsules. SC/SP