



San Francisco Monthly STD Report

Data for January, 2015
Report prepared February 26, 2015

Table 1. STDs among residents, January, 2015.

	2015		2014	
	month	YTD	month	YTD
Gonorrhea	371	371	231	231
Male rectal gonorrhea	89	89	74	74
Chlamydia	558	558	473	473
Male rectal chlamydia	113	113	101	101
Syphilis (adult total)	133	133	110	110
Primary & secondary	48	48	47	47
Early latent	72	72	45	45
Unknown latent	0	0	0	0
Late latent	13	13	18	18
Neurosyphilis	1	1	2	2
Congenital syphilis	0	0	0	0
PID	8	8	10	10

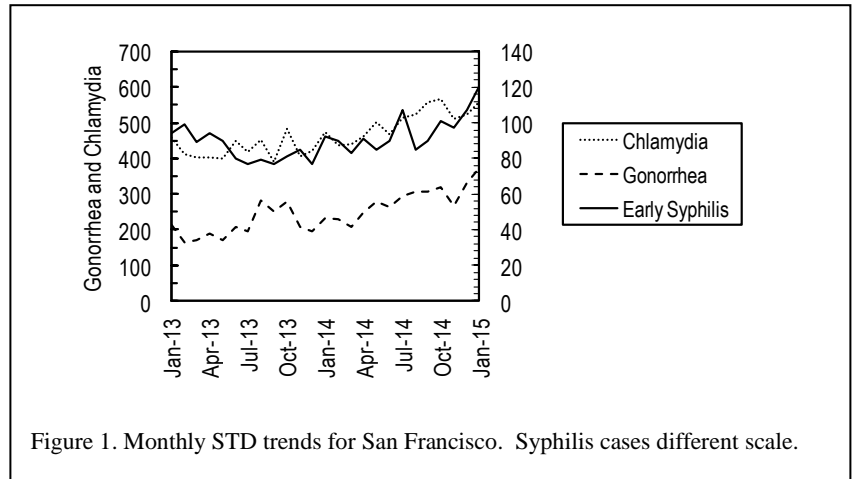


Figure 1. Monthly STD trends for San Francisco. Syphilis cases different scale.

Table 2. Selected STD cases and rates for San Francisco by age and race/ethnicity, 2015 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	558	862.1	64	304.3	63	1,180.0	85	931.5	194	686.9
Gonorrhea	371	573.2	35	166.4	49	917.8	59	646.6	168	594.9
Early syphilis	120	185.4	13	61.8	10	187.3	22	241.1	63	223.1
<i>Under 20 yrs</i>										
Chlamydia	48	1,121.2	5	275.3	12	2,187.0	14	1,516.4	4	432.7
Gonorrhea	8	186.9	2	110.1	5	911.3	0	0.0	1	108.2
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, 2015.

	2015		2014	
	month	YTD	month	YTD
Tests	508	508	611	611
Antibody positive	7	7	11	11
Acute HIV infection	0	0	0	0

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.

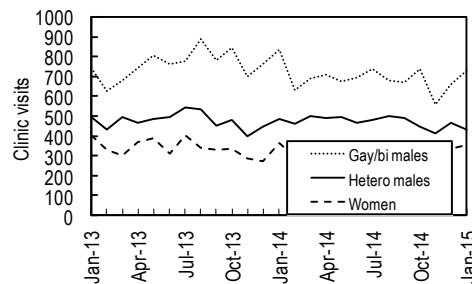


Figure 2. City Clinic visits by gender and orientation.

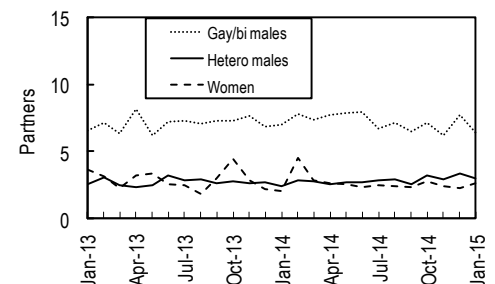


Figure 3. Average number of recent* sex partners for City Clinic visits by gender and sexual orientation. *Recall period is 3 months.

Ocular Syphilis in San Francisco and Washington State

Since December 2014, seven cases of ocular syphilis have been reported in San Francisco – 5 were men who have sex with men (MSM) and 6 were HIV-infected. The cause of this cluster of cases is uncertain; an increase in ocular syphilis cases was recently reported in Washington State. Several of the WA and San Francisco cases experienced a significant or permanent decline in visual acuity.

Syphilitic eye disease can occur during early syphilis (i.e., within 1 year of infection). Prompt treatment with a recommended regimen for central nervous system syphilis usually leads to symptom resolution without vision loss; delayed treatment can result in permanent blindness. Medical providers should initiate penicillin therapy in all patients in whom syphilis is suspected without waiting for laboratory confirmation of the diagnosis.

Clinicians should routinely ask patients with syphilis about changes in vision or hearing to identify persons at high risk for complicated syphilis. All patients being evaluated for syphilis should be tested for HIV infection unless they have a prior HIV diagnosis. Sexually active MSM should undergo screening for syphilis, gonorrhea, and chlamydia every 3 to 6 months.

Providers can call the San Francisco City Clinic for consultation (415-487-5595) or syphilis verification (415-487-5531). All syphilis cases are reportable to the San Francisco Department of Public Health within 24 hours of identification: Call 415-487-5555 or fax to 415-431-4628 the Case Morbidity Report (CMR) Form: <http://www.sfcityclinic.org/providers/CMRandReportableDiseaseList.pdf>

Please note on the CMR if ocular syphilis is suspected or confirmed; we are investigating all cases to better understand the recent increase in reported cases. TQN, SC