

## San Francisco Monthly STI Report

Data for March, 2022 Report prepared May 16, 2022

Table 1. STIs among residents, March, 2022. Female syphilis cases include patients assigned as female at birth.

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	2022		2021			
	month	YTD	month	YTD		
Gonorrhea	498	1,369	350	907		
Male rectal gonorrhea	194	565	125	303		
Chlamydia	600	1,589	463	1,317		
Male rectal chlamydia	182	482	130	360		
Syphilis (adult total)	141	443	183	506		
Primary & secondary	27	94	37	113		
Early latent	66	211	77	216		
Unknown latent	18	43	36	82		
Late latent	30	95	33	95		
Neurosyphilis	2	4	4	10		
Congenital syphilis	1	2	0	1		
Female syphilis	17	55	19	41		

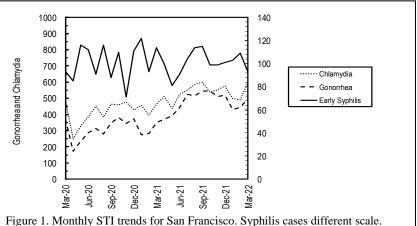


Table 2. Selected STI cases and rates for San Francisco by age and race/ethnicity, 2022 through March only. Rates equal cases per 100,000 residents per year based on 2010 US Census Data.

	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia	1,589	789.3	162	243.9	152	1,299.7	245	804.8	397	470.6
Gonorrhea	1,369	680.1	125	188.2	115	983.3	239	785.1	537	636.5
Early syphilis	305	151.5	42	63.2	32	273.6	75	246.4	103	122.1
Under 20 yrs										
Chlamydia	119	856.2	8	144.5	28	2,381.5	14	442.6	7	228.4
Gonorrhea	33	237.4	2	36.1	9	765.5	7	221.3	3	97.9
Early syphilis	1	7.2	0	0.0	0	0.0	1	31.6	0	0.0

Table 3. HIV testing among City Clinic patients, March, 2022.

	2022		2021	
	month	YTD	month	YTD
Tests	333	975	226	584
Antibody positive	6	9	3	10
Acute HIV infection	0	0	1	1

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.

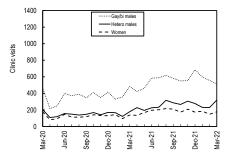


Figure 2. City Clinic visits by gender and orientation.

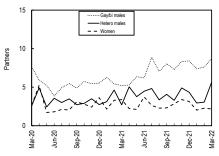


Figure 3. Average number of recent\* sex partners for City Clinic visits by gender and sexual orientation. \*Recall period is 3 months.

## Syphilis Continues to be an Important Public Health Priority in San Francisco

Syphilis among people who are or could become pregnant is of particular concern as it poses a risk for congenital syphilis. Congenital syphilis can lead to significant morbidity and mortality including stillbirth and neonatal death. There was a staggering 224% increase in cases of syphilis among cis-females from 2017 to 2021, with two cases of congenital syphilis reported in 2021, and two congenital cases to date in 2022. The SFDPH recommends screening according to citywide STI guidelines and ensuring treatment of patients and partners:

- 1. Test all individuals who report methamphetamine use or are experiencing homelessness for syphilis, HIV, and HCV at least annually.
- 2. All sexually active people who could become pregnant should receive at least one lifetime screen for syphilis, regardless of risk, and at the time of each HIV test.
- 3. Test all pregnant people 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). Pregnant people should be tested again at delivery unless they have a negative test in the third trimester and no risk factors for syphilis.
- 4. Treat clinically suspected or diagnosed syphilis immediately with penicillin (benzathine penicillin G [Bicillin LA] 2.4 mu IM) which is also the only therapy proven to be effective in pregnancy. Prophylactically treat patients who report a recent exposure to a partner diagnosed with syphilis.
- 5. Refer sex partners for testing and treatment.
- 6. Report all syphilis cases by faxing a confidential morbidity report to 628-217-6603.

## **Important STI Prevention Numbers and Resources**

- Syphilis titer and treatment history & DPH LINCS partner services referrals: 628-217-6639
- San Francisco City Clinic (SFCC) provider line for clinical questions: 628-217-6677
- For DPH Epic Users, SFCC is now available on e-consult: Submit an E-Consult to Sexually Transmitted Infection (STI): San Francisco City Clinic to obtain a patient's syphilis history or for clinical guidance on STI diagnosis and management
- Refer pregnant people experiencing homelessness, with active substance use disorders, or other barriers to care to ZSFG-based Team Lily: 415-802-7615 or email Rebecca.schwartz@ucsf.edu.