November 7, 2016

To: Oregon Medical Providers

From: Sean Schafer, MD MPH
Medical Director, HIV/STD/TB Section

Situation
A current ad campaign in Lane County called “SyphAware” will likely to lead to questions about need for syphilis screening.

Executive Summary
Public service ads sponsored by Oregon Health Authority and Lane County Public Health advising people about the syphilis epidemic in Portland are now appearing on buses in Lane County and will be seen for several months. The ads will also direct the public to a dedicated syphilis awareness website (www.SyphAware.org). We hope the ads and accompanying website lead patients to inquire about syphilis. We want you to be aware and prepared in advance. Though the ads will run in the Lane County Area, they might lead to calls and questions in other parts of Oregon.

Background that a healthcare provider needs to know
- Infectious syphilis in Oregon has increased approximately 2000% since 2007 from fewer than 30 reported cases to approximately 550 expected cases during 2016.
- Besides abstinence and monogamy and condom use, frequent screening of people at risk is likely to be the most effective means of interrupting the epidemic.
- Not everyone needs to be screened for syphilis, but you can’t tell by looking at someone whether they need to be tested for syphilis.
- Congenital syphilis cases ranged from 0 to 1 case a year in Oregon through 2013. Two congenital infections were reported during 2014, 6 during 2015, and 5 more so far during 2016.

We Recommend that healthcare providers:
- Be prepared for questions from patients about the need for syphilis screening
- Take a good sexual and drug use history from all patients
- Order a test for syphilis for patients at risk (see risk categories and screening frequency below)
- Use rapid plasma reagin test (RPR) for screening if possible but be familiar with reverse algorithm screening (see: www.healthoregon.org/std)
- Order a test for HIV as well for patients at risk who are not already HIV-positive

Who needs to be screened during the syphilis epidemic?
- Men who have sex with men
- People with HIV
- People of either sex who use illicit drugs including, but not limited to, methamphetamine, opioids, and cocaine
- People of either sex who engage in sex work or exchange sex for money or other things of value
- People who have or have had other bacterial or viral sexually transmitted infections
- People who have been exposed to syphilis

**How often should screening be done?**
- At least annually for all the groups listed regardless of condom use or number of partners
- Every three months if sexually active with multiple partners

**How often should pregnant women be screened?**
- Once at the first prenatal visit
- Again at beginning of third trimester
- At delivery

*Under non-epidemic circumstances pregnant women are only screened once at the first prenatal visit, unless they have additional risk factors.

**Important questions that healthcare providers should ask all patients:**
- Sex and number of recent sex partners
- Drug use
- Past sexually transmitted infections or exposure to syphilis

* Unless clinicians ask, patients frequently don’t divulge this information. A useful guide for healthcare providers on taking a sexual history can be found at: http://nationalcoalitionforsexualhealth.org/tools/for-healthcare-providers.

**Additional provider resources** (www.healthoregon.org/std).
- Copy of this Letter
- Oregon Public Health Syphilis Investigative Guidelines
- Summary of ocular syphilis cases
- Summary of congenital syphilis cases
- By-county summaries of syphilis cases
- Information about the "reverse algorithm" for syphilis screening
- 2015 CDC STD Treatment Guidelines
- Link to downloadable smartphone application for 2015 STD Treatment Guidelines
- Link to syphilis self-study modules for clinicians

Questions regarding the campaign and provider resources available can be directed to Josh Ferrer, STD/HIV Prevention Technical Consultant at joshua.s.ferrer@state.or.us or 971-673-0149.