Facts You Need to Know

- Syphilis is a sexually transmitted disease (STD) that advances in three stages: primary, secondary and tertiary (late).
- Syphilis can be cured by antibiotics in its primary and secondary stages. However, if left untreated, late-stage syphilis can cause paralysis, blindness, dementia and death.
- From 1990–2000, the number of primary and secondary cases of syphilis in the U.S. dropped by nearly 90 percent. However, in the past three years, the number of cases has been rising.
- Many other industrialized nations have eliminated syphilis. Elimination is possible in the U.S. if the disease is targeted and treated in the geographic areas where it is most prevalent.
- Physical symptoms from primary and secondary-stage syphilis often disappear on their own. Even so, the bacteria remain in the body. In its last stages, syphilis is no longer contagious, but by then it is in the nervous or cardiovascular system, where it can cause serious damage.

Who’s Likely to Get Syphilis?

- People who live in poverty with high unemployment and inadequate health care are at greater risk for getting syphilis. The rate of syphilis among African Americans was 8 times higher than for whites in 2002.
- The rate of congenital syphilis in African American babies was 28 times higher than it was for white babies in 2002.
- Over 32,000 cases of syphilis were reported in the U.S. in 2002. Half of those cases came from only 16 counties, nearly all of which were in the Southeast.
- The incidence of syphilis is highest among young women aged 20–24, and among men aged 35–39.
- Men who have sex with men have rapidly increasing rates.

How Is Syphilis Transmitted?

- Syphilis is transmitted when an infected sore (chancre) comes in contact with the skin or mucous membranes of an uninfected person.
- In primary-stage syphilis, sores usually appear in the genital area—the site of infection. In this stage, the disease most typically spreads through sexual activity.
- In secondary-stage syphilis, a rash and sores can appear all over the body, especially on the palms of the hands and soles of the feet. At this stage, the disease can be spread by coming in contact with the sores.
- Pregnant women with syphilis can transmit the infection to their unborn babies. Infants with congenital syphilis can have seizures, brain damage and serious physical deformities. In addition, between 25–50 percent of pregnant women with acute syphilis are likely to have miscarriages.

Costs and Consequences

- People with syphilis have at least a three times greater risk of becoming infected with HIV, the virus that causes AIDS.
- The direct medical costs of syphilis in the U.S. are $3.6 million a year.
- Untreated syphilis can cause dementia, paralysis, blindness and death.

Prevention and Treatment Basics

- Outside of sexual abstinence, the surest way to avoid getting syphilis is to refrain from sexual contact with an infected person or to be in a long-term, mutually monogamous relationship with an uninfected person.
- A single dose of penicillin can cure syphilis in those who’ve been infected less than a year. Those who’ve been infected longer need additional doses of medicine.

- Syphilis can be diagnosed by a blood test or by microscopic examination of bacteria from infected sores.
- Although using condoms can significantly reduce the risk of getting syphilis, condoms don’t cover the entire genital area, and therefore, cannot provide total protection.
- Good prenatal care, which includes testing and treatment for syphilis, can prevent the spread of syphilis to unborn babies.

Public Health and Policy Issues

- Syphilis is highly localized. Partnerships between federal, state and local governments have been very effective in reducing rates in targeted communities.
- STD control programs at the state and local levels need resources in order to continue initiatives in communities where syphilis rates have been lowered.
- Resources are also needed for the control of recent surges in syphilis prevalence in populations such as men who have sex with men (MSM).