CONGENITAL SYPHILIS DATA BRIEF

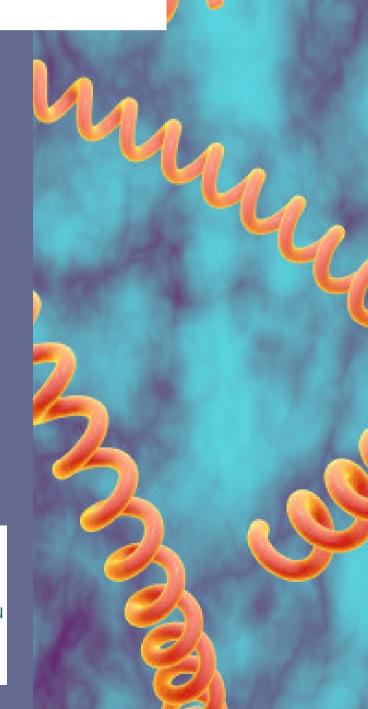
REGION 3, NORTHEAST OHIO 2018 - 2022*

CUYAHOGA COUNTY

BOARD OF HEALTH

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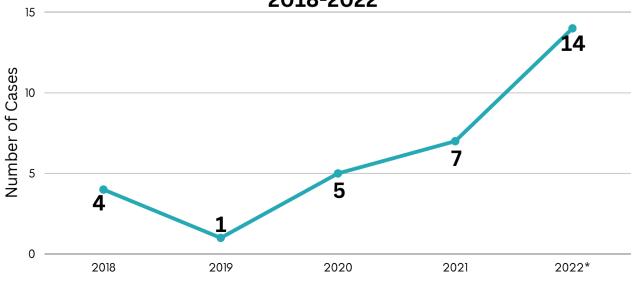
BACKGROUND

Congenital syphilis (CS) is an infection that occurs when a mother with syphilis passes the infection on to her baby through pregnancy and birth. CS can cause miscarriage, stillbirth (a baby born dead), prematurity (a baby born early), low birth weight, or death of the baby shortly after birth.

Babies born with CS can have deformed bones, severe anemia (low blood count), enlarged liver or spleen, jaundice (yellowing of skin or eyes), brain/nerve problems (like blindness or deafness), meningitis, and skin rashes. Some babies may not have symptoms at birth but can develop symptoms later; babies can also die if not given proper treatment.

CASES OF CONGENITAL SYPHILIS <u>DOUBLED</u> IN REGION 3 FROM 2021 TO 2022*

Congenital Syphilis Cases in Region 3, 2018-2022*



This data brief summarizes infections of congenital syphilis from 2018–2022* in Region 3 in northeast Ohio; counties include: Ashtabula, Cuyahoga, Geauga, Lake, Lorain, and Medina. Region 3 is experiencing a surge in all syphilis cases, including congenital syphilis. Almost all of the cases have occurred in Cuyahoga County, and a majority of those were from the city of Cleveland.

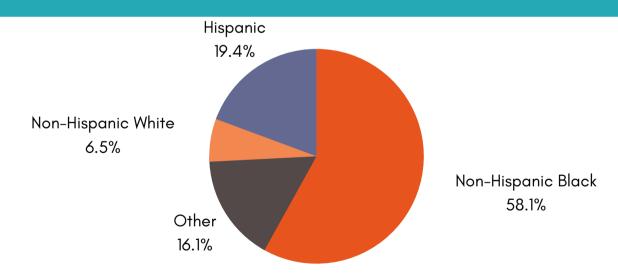
INFANT DEMOGRAPHICS

31

Number of CS cases in Region 3 in 2018–2022*

58%

Babies who are Non-Hispanic
Black/African American comprised over
half of the CS cases in 2018–2022*



2 SYPHILITIC STILLBIRTHS IN THE LAST TWO YEARS (2021 & 2022)



Of the babies born with CS from 2018–2022*, 52% were female and 48% were male.

MATERNAL DEMOGRAPHICS

Maternal information is also collected for all CS cases. All mothers of CS cases from 2018–2022* were between 19–36 years old, and had an average age of 26 years old. The syphilis stage of over half (61%) of the mothers was of an unknown duration or considered to be a late stage. Information on prenatal care, testing during pregnancy, and when the mother was diagnosed with syphilis is also collected.

32%

Less than a third of the mothers of babies with CS were treated for syphilis before birth, when prevention of syphilis in the baby is most effective. 71%

A majority of the pregnant mothers had at least **ONE** prenatal care visit.



29% of mothers were considered to have **early syphilis**. This is when syphilis is most infectious.

Almost half (48%) of mothers had their first prenatal care visit in the **first trimester**.



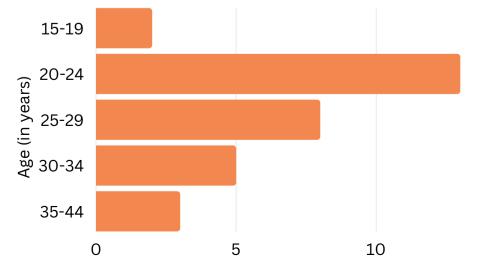


A majority of mothers **did not** receive repeat testing for syphilis at 28-32 weeks' gestation.

13% of pregnant mothers had a history of substance abuse.

15





Mother's Age (in years)

Maternal age ranged from 19-36 years old. Most mothers were between 20-24 years old at the time of the babies birth.

FEMALES OF CHILDBEARING AGE

Cuyahoga County has experienced the majority of CS cases in the last 5 years, with a large spike in cases in 2022*. In Cuyahoga County in 2022. there were **168** syphilis in females of childbearing age (15–44 years old). Information on several different risk factors is collected during case interview.

47%

Almost half of the cases in females of childbearing age in Cuyahoga County had a history of another sexually transmitted infection (STI).

41%

Almost half of cases were considered to be **early syphilis** when it is most infectious.



11% reported having sex with an anonymous partner in the last 12 months



50% of cases reported **sometimes or never** using condoms for vaginal sex 2% reported meeting a sex partner on the internet in the last 12 months



9% reported having sex while intoxicated or high on drugs in the last 12 months.



19%

Females of childbearing age comprised 19% of the total syphilis cases in Cuyahoga County in 2022*

CUYAHOGA COUNTY BOARD OF HEALTH CONGENITAL SYPHILIS, 2018-2022*



SCREENING RECOMMENDATIONS^

- All pregnant persons should be screened for syphilis at their first prenatal visit, 28-weeks gestation prenatal visit, third trimester visit, and at the time of birth.
- Syphilis testing should occur at the time of pregnancy testing.
- HIV and syphilis screening should occur for any pregnant person presenting to an urgent care or emergency room for any reason, including if presenting for other types of STIs.
- Deliver educational messages to the medical community about laboratory tests, diagnostic criteria, treatment, and follow-up of patients who are at risk if infection and may be pregnant.

PREGNANT PERSONS BEING TESTED AND TREATED FOR SYPHILIS EARLY GREATLY REDUCES THE LIKELIHOOD OF COMPLICATIONS IN MOTHERS AND BABIES

*About the data: Data for 2022 is preliminary and subject to change as new/updated information is available. Data is downloaded from the Ohio Disease Reporting System (ODRS). Analysis completed by the department of Epidemiology, Surveillance, and Informatics at the Cuyahoga County Board of Health.

*Based on CDC's Screening Recommendations for Syphilis

Definitions:

Early Syphilis: a suspected, probable, or confirmed diagnosis of primary, secondary, or early syphilis. **Congenital Syphilis**: an infection that occurs when a mother with syphilis passes the infection on to her baby during pregnancy.

Race/Ethnicity: self-defined. "Other" race includes those who have multiple races.

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