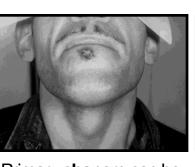
Consider Syphilis with Every Patient

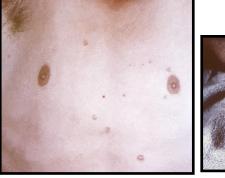
Think.



Primary chancre can be on lips, mouth, genitals or area of direct contact



with symptoms including: floaters, flashing lights vision loss, other ocular symptoms.



Rash on palms of hands. bottoms of feet, trunk or any part of the body.



Lesions on hands.

Test.	Traditional Screening (RPR or VDRL) with titer	 Obtain same n day of initial tr treponemal (TPPA or FTA-ABS) Obtain same n day of initial tr treatment, or n If neuro, ocula specimen to as 	reatme nore fi r or tei
	Presumptive	Early Syphilis	
Treat.	Patients who have had sexual contact with an individual diagnosed with early syphilis.	If signs/symptoms of primary or secondary syphilis or history <u>within past 12</u> <u>months of:</u>	If th mee Tre :
	If last contact within 90 days or if last contact over 90 days ago and follow up not certain:	 4-fold increase of non-treponemal titer (i.e. 1:2 to 1:8) or greater. Also consider treatment failure. 	mill wee
	Treat presumptively for early syphilis regardless of lab results with benzathine penicillin G 2.4 million units IM once	 Previous symptoms consistent with primary or secondary syphilis Exposure to partner with early syphilis Sexual debut 	
		Treat with benzathine penicillin G 2.4 million units IM once	



Health and Humar Services Agency

Syphilis is a Title 17 mandatory reportable condition. Report within 1 working day by phone, fax, mail, or CalREDIE. In Shasta County you can fax the Confidential Morbidity Report (CMR) to (530) 225-5074.

For questions see treatment guidelines at CDC.gov or CDPH.ca.gov, or contact the STD Clinical Consultation Network stdccn.org or (510) 620-3400. Shasta County HHSA - Public Health at 225-5591. www.STD530.com

Photos courtesy of Public Health Image Library, CDC/ Richard Deitrick, CDC/ Susan Lindsley, VD, CDC/J. Pledger, CDC/ Robert Sumpter





Condylomata lata lesions. Appearance can mimic genital warts.

Alopecia

eponemal titer used for screening again on nent and at 6 and 12 months following frequently/longer duration as case requires. ertiary syphilis is suspected, also obtain CSF for neurosyphilis.

Late or Unknown Syphilis

the patient is asymptomatic and does not eet the early syphilis criteria:

eat with benzathine penicillin G 2.4 illion units IM once per week for 3 eks