



ALERT

Concerns with Community Syphilis Rates and Risks of Congenital Syphilis

March 17, 2023

ATTENTION: FAMILY PHYSICIANS, NURSE PRACTITIONERS, MIDWIVES, OBSTETRICIANS, AND OTHER PRE-NATAL CARE PROVIDERS

Syphilis is increasing in Peterborough and provincially. Please heighten clinical awareness and screening, in particular ante-natal screening of all pregnant people at 3 stages of pregnancy.

Background

While Peterborough has seen a steady increase in syphilis over the last few years, there has been an acceleration in the cases reported during the past few months. The number of cases reported in 2022 was 30. This represents an increase of 18 cases from 2021 and 15 cases from 2020.

Cases have been reported in males and females that identify as heterosexual between 20-60 years of age, including those with lower-risk encounters. Cases have also been reported in the high-risk population previously identified as men who have sex with men (MSM). Federally, provincially, and locally there is an increase in cases in females of childbearing age. Additionally, PPH is seeing an increase locally in neurosyphilis reported in both males and females.

Syphilis can present with a variety of different symptoms which can imitate many other conditions. Syphilis progresses in multiple stages. Early on, common symptoms include: chancres, or non-painful ulcers in the genitals or mouth, lymphadenopathy, body rashes, fever, malaise, sore throat, headaches, alopecia, uveitis, retinitis, visual disturbances, etc.

Recommendations for Screening

Health care providers are encouraged to be vigilant in screening patients for symptoms of syphilis if they have engaged in unprotected sexual activity and regular screening is recommended for patients who may have multiple sexual partners.

Consistent with recommendations now made by other health units experiencing increases in syphilis rates, Peterborough Public Health recommends universal screening for syphilis at three points in pregnancy:

1. During the first trimester or at first prenatal visit;
2. Repeat screening at 28-32 weeks of pregnancy (or as close to this interval as possible); and
3. At delivery.

Screening is also recommended in people who deliver a stillborn infant after 20 weeks gestation.

Pregnant people diagnosed with infectious syphilis should be managed in consultation with an obstetric/maternal-fetal specialist. Assessment for possible congenital syphilis should be done:

- At 20 weeks gestation with a detailed obstetrical ultrasound
- In infancy for those presenting with signs or symptoms compatible with early congenital syphilis even if mother was seronegative at delivery because they may have become infected near term.

More information about screening in pregnancy can be found in the [Syphilis guide: Screening and diagnostic testing](#).

Staging & Treatment

Staging is crucial to ensure adequate treatment. First line therapy for syphilis is **Benzathine Penicillin G**. This specialized penicillin is **NOT** comparable to Penicillin G. **Benzathine Penicillin G** is accessed for health care providers by calling the **Sexual Health Clinic (705) 748-2021**.

A syphilis staging algorithm is available: [Development of an algorithm to facilitate the clinical management of syphilis](#) (please see Figure 1). This clinical algorithm was developed to stage infectious syphilis and was created based on a review of the available United States, Canadian, and British practice guidelines. Clinicians may find this algorithm a useful resource to assist with clinical diagnosis and management.

PHO Lababstracts – [Syphilis – Serology | Public Health Ontario](#)

Canadian Guidelines on Sexually Transmitted Infections – [Canadian Guidelines on Sexually Transmitted Infections - Canada.ca](#). For details on [syphilis](#) testing, staging, and treatment please refer to these guidelines.

If further support is needed, a Public Health Nurse can be contacted by calling the Sexual Health Clinic at 705-748-2021. Alternatively, for more complicated cases, patients can be booked at the Sexual Health Clinic or referred to the Positive Care Clinic (1-866-303-2420). The Positive Care Clinic runs satellite clinics in Peterborough where an Infectious Disease Specialist can be consulted

Other Updates: Advisory Regarding Mpox and XDR Shigella

Mpox Information for Clinicians

While there has been a decline in mpox globally, over the last few weeks more than 20 countries have reported new positive cases. In Ontario specifically, since the start of 2023, there have been new cases identified with no clear epidemiological link. It is suspected that the current ongoing mpox transmission is caused by mild and subclinical infections.

The Ministry of Health is reminding health care providers to consider mpox in their differential diagnoses and to continue testing high risk individuals that present with any signs and symptoms. As of the end of February 2023, less than 20% of eligible Ontarians with a first dose of Imvamune® have received their second dose. The Ministry of Health is also requesting that high-risk patients are encouraged to receive the first and second dose of the Imvamune® vaccine. Eligible residents can book an Imvamune® vaccine appointment with Peterborough Public Health by calling 705-743-1000, ext. 331.

As required by Ontario Regulation 569 under the Health Protection and Promotion Act, all suspected and confirmed mpox cases must immediately be reported to Peterborough Public Health. Please report all clinically suspected cases to 705-743-1000, ext. 131 or after hours, on call staff are available at 705-760-8127.

Mpox Resources

- For patient friendly resources: [Home - GMSH](#)
- Testing and specimen guidance: [Monkeypox Virus | Public Health Ontario](#)
- General mpox information: [Mpox \(formerly known as monkeypox\) | Public Health Ontario](#)
- Case definitions and disease specific information: [Ontario Public Health Standards: Appendix 1: Case Definitions and Disease-Specific Information - Disease: Smallpox and other Orthopoxviruses including Monkeypox - Effective: October 2022 \(gov.on.ca\)](#)

Extensively Drug Resistant Shigella associated with sexual transmission

Public Health Ontario is currently investigating and monitoring trends connected to extensively drug resistant (XDR) Shigella cases across Ontario. Between March 29th 2022 and January 31st 2023, PHO identified 10 male cases of XDR Shigella sonnei in Ontario; 9 in Toronto and 1 in Waterloo. This XDR strain is resistant to all common antibiotics used to treat shigellosis, including: ampicillin, fluoroquinolones, third-generation cephalosporins, azithromycin, and trimethoprim-sulfamethoxazole. As such, there are limited treatment options available and health care providers are being asked to remain vigilant when treating patients who present with symptoms of shigellosis.

Health care providers should remain aware when treating patients who are presenting with symptoms of shigellosis. In patients where shigellosis is suspected, be sure to take a sexual, travel and social history; housing status; and substance use history. In most cases, patients with shigellosis improve without antibiotic intervention, regardless of the XDR strain. Due to the overuse of antibiotics resulting in resistant strains, Shigella should only be treated with antibiotics in patients who are at high risk for severe disease (i.e., hospitalized patients or immunocompromised patients). In patients where antibiotics are essential, infectious disease specialists or clinicians with extensive knowledge in treating XDR bacteria should be consulted and treatment should be guided by antimicrobial susceptibility testing.

Please continue to report all probable and confirmed cases of Shigella to Peterborough Public Health as required by Ontario Regulation 569 under the *Health Protection and Promotion Act*. Probable and confirmed cases can be reported by calling 705-743-1000, Ext. 131 during service hours or by calling 705-760-8127 after hours to speak to an on-call staff.

Shigella Resources

- General shigellosis information: [Shigellosis | Public Health Ontario](#)
- Case definitions and disease specific information: [Ontario Public Health Standards: Appendix 1: Case Definitions and Disease Specific Information- Disease: Shigellosis](#)
- Supportive resource for taking a sexual history: [A Guide to Taking a Sexual History \(cdc.gov\)](#)
- Supportive resource for respectful language: [Language Matters- Using respectful language in relation to sexual health, substance use, STBIs and intersecting sources of stigma](#)

This alert can be found by visiting www.peterboroughpublichealth.ca and clicking on “For Professionals / Health Professionals / Alerts”.