



PROVIDER GUIDANCE FOR DIAGNOSIS AND MANAGEMENT OF EARLY SYPHILIS

TO: West Virginia Local Health Departments, Health Care Providers, Health Care Facilities, Health Professional Organizations and Other Health Partners

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LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY HEALTH CARE PROVIDERS, HEALTH CARE FACILITIES, AND OTHER APPLICABLE PARTNERS.

Like other states in the nation, West Virginia is seeing an increase in early syphilis, which primarily began among men who have sex with men (MSM), but has grown to include females having sex with MSM. Early syphilis (Primary and Secondary) cases in West Virginia increased from 8 in 2012 to 15 (88% increase) in 2013. In 2014, 32 cases were diagnosed showing an increase of 113% from 2013.

The following guidelines should be considered when diagnosing all cases of STDs seen in all medical facilities.

1. Any patient seen in an STD clinic should be tested for syphilis.
2. The diagnosis of early syphilis should be considered in a patient with the following physical findings:
 - *Anogenital lesion - very often painless, but may be painful if secondarily infected.
 - *Oral lesions - especially on tongue or soft palate, mucous patches seen on the tongue.
 - *Unexplained rash or skin eruption - including but not limited to palmar-plantar rash, patchy hair loss, and rash resembling pityriasis.

If additional information is needed on syphilis diagnosis and symptoms, please access the following website:

<http://www.cdc.gov/std/syphilis/STDFact-Syphilis.htm>

3. If patients present with a history of sexual contact in the last twelve months with a known syphilis case, the patient should be preventively treated.
4. If needed, the West Virginia Division of STD/HIV/Hepatitis can provide the appropriate medications as prescribed in the 2010 STD Treatment Guidelines at <http://www.cdc.gov/std/treatment/>, free of charge.

What Health Care Providers Can Do to Help Control Syphilis and other STDs:

Assess risk: Conduct a complete sexual risk assessment for patients, particularly MSM. Ask patients about specific behaviors over the last 12 months, such as number of partners, sex of partners, and sexual practices, to guide laboratory testing. Elicit information on the use of social networking sites and mobile applications help to identify sex partners.

Examine accordingly: Carefully inspect any and all exposed sites including mouth, anus cervix and vagina, as syphilitic lesions in these locations can go unnoticed by patients.

Report all suspected and confirmed syphilis cases promptly to public health. Do not hesitate to contact your local health department or the WVDSHH Program locally at (304) 558-2195 or (800) 642-8244.

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