



July 2018

Dear Health Care Provider:

SYPHILIS OUTBREAK

The Winnipeg Health Region (WHR) is continuing to experience unprecedented high rates of **infectious syphilis**. Over 120 cases were reported annually in 2015, 2016 and 2017, and **as of the end of June 2018 the number of cases managed by the WRHA has already exceeded this annual number**. Most cases are heterosexual men and women, and about 15% of cases are HIV positive. Congenital syphilis cases have been confirmed. Cases are detected in all community areas in Winnipeg, as well as other RHAs in Manitoba.

WHO SHOULD BE TESTED?

- **ALL persons with symptoms of syphilis** such as painless genital or oral ulcers, generalized maculopapular rash (typically including palms and soles) and/or lymphadenopathy.

In addition to testing symptomatic persons, also screen the following persons:

- **ALL pregnant persons** - congenital syphilis is often severe, disabling, and life-threatening
- **ALL persons reporting unprotected sex with casual or anonymous partners (consider testing regularly for all sexually transmitted infections (STI) every 3-6 months)**
- **ALL persons who are using intravenous drugs**
- **ALL persons requesting STI testing**
- **ALL persons with any other confirmed or suspected STI** such as gonorrhoea or chlamydia

WHAT TO SEND TO CADHAM PROVINCIAL LABORATORY (CPL)

- 5-10 ml blood in a serum separator tube (red top with yellow cap) or red-topped tube
- The CPL General Requisition should request syphilis serology and HIV antibody testing; and should **provide information on reason for testing, including symptoms or suspected stage of syphilis**
- Swab ulcers, sores, or moist skin lesions with a dacron swab of the lesion and place into viral transport medium. The sample must remain refrigerated until sent to CPL and the CPL requisition should clearly indicate the site and test requested (i.e., Syphilis PCR testing).

WHO SHOULD BE TREATED?

- **ALL at-risk persons who present with symptoms of syphilis (as noted above) should be treated** for infectious syphilis (without awaiting laboratory results)
- **Benzathine penicillin G (Bicillin®) 2.4 million units IM** in a single session (separated into 2 injections – 1.2 million units into each buttock). **NOTE** – caution against inadvertently undertreating with a single injection of 1.2 million units – **a full treatment is 2.4 million units (i.e. 2 injections)**
- The Bicillin® in preloaded syringes is provided free of charge by Manitoba Health, Seniors and Active Living (MHSAL) (see order form below); do not give prescription to take to a pharmacy, as Bicillin® is available by pre-ordering from MHSAL
- **Sex contacts of known syphilis cases MUST ALSO be tested and treated immediately for syphilis (without awaiting testing results)**

REPORTING

Syphilis is reportable under *The Public Health Act*. If you are contacted by a public health nurse for follow up of your patient who has an STI, your collaboration and assistance is greatly appreciated.

RESOURCES

- Syphilis Management Tool http://www.gov.mb.ca/health/publichealth/factsheets/syph_mgmt_tool.pdf
- MHSAL – Syphilis Protocol <http://www.gov.mb.ca/health/publichealth/cdc/protocol/syphilis.pdf>
- Cadham Provincial Laboratory (CPL) – Serology: 204-945-6123
- MHSAL – STI Medication Order Form <http://www.gov.mb.ca/health/publichealth/cdc/protocol/form11.pdf>