

Some Facts About Syphilis

What is syphilis? Syphilis is a complex STD caused by the bacterium *Treponema Pallidum*. It has often been called the great imitator because so many of the signs and symptoms are indistinguishable from those of other diseases.

How is syphilis spread? The syphilis bacterium is passed from person to person through direct contact with a syphilis sore. Sores mainly occur on the external genitals, vagina, anus, or in the rectum. Sores also can occur on the lips and in the mouth. Transmission of the organism occurs during vaginal, anal, or oral sex. Pregnant women with the disease can pass it to the babies they are carrying. Syphilis cannot be spread by toilet seats, door knobs, swimming pools, hot tubs, bath tubs, shared clothing, or eating utensils.

What are the signs and symptoms in adults? The time between picking up the bacterium and the start of the first symptom can range from 10 to -90 days (average 21 days). The primary stage of syphilis is marked by the appearance of a single sore (called a chancre). The chancre is usually firm, round, small, and painless. It appears at the spot where the bacterium entered the body. The chancre lasts 1 to 5 weeks and will heal on its own. If adequate treatment is not administered, the infection progresses to the secondary stage. The second stage starts when one or more areas of the skin break into a rash that usually does not itch. Rashes can appear as the chancre is fading or can be delayed for weeks. The rash often appears as rough, "copper penny" spots on both the palms of the hands and the bottoms of the feet. The rash also may appear as a prickly heat rash, as small blotches or scales all over the body, as a bad case of old acne, as moist warts in the groin area, as slimy white patches in the mouth, as sunken dark circles the size of a nickel or dime, or as pus-filled bumps like chicken pox. Some of these signs on the skin look like symptoms of other diseases. Sometimes the rashes are so faint they are not noticed. Rashes typically last 2 to 6 weeks and clear up on their own. In addition to rashes, second stage symptoms can include fever, swollen lymph glands, sore throat, patchy hair loss, headaches, weight loss, muscle aches, and tiredness. A person can easily pass the disease to sex partners when first or second stage signs or symptoms are present.

The latent (hidden) stage of syphilis begins when the secondary symptoms disappear. If the infected person has not received treatment, he/she still has syphilis even though there are no signs or symptoms. The bacterium remains in the body and begins to damage the internal organs, including the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints. In about one-third of untreated persons, this internal damage shows up many years later in the late or tertiary stage of syphilis. Late stage signs and symptoms include not being able to coordinate muscle movements, paralysis, no longer feeling pain, gradual blindness, dementia (madness) or other personality changes, impotency, shooting pains, blockage or ballooning of the heart vessels, tumors or "gummas" on the skin, bones, liver, or other organs, severe pain in the stomach, repeated vomiting, damage to knee joints, and deep sores on the soles of the feet or toes. This damage may be serious enough to cause death.

Can a newborn get syphilis? An infected pregnant woman has about a 40 percent chance of having a still birth (syphilitic stillbirth) or giving birth to a baby who dies shortly after birth. A baby born to a mother with either untreated syphilis or syphilis treated after the 34th week of pregnancy has a 40 to 70 percent chance of being infected with syphilis (congenital syphilis). An infected baby may be born without symptoms but may develop them within a few weeks, if

not treated immediately. These signs and symptoms can be very serious and include skin sores, a very runny nose, which is sometimes bloody (and infectious), slimy patches in the mouth, inflamed arm and leg bones, a swollen liver, anemia, jaundice, or a small head. Untreated babies may become retarded or may have seizures. About 12 percent of infected newborns will die because of the disease.

How is syphilis diagnosed? The syphilis bacterium can be detected by a health care provider who examines material from infectious sores under a microscope. Shortly after infection occurs, the body produces syphilis antibodies that are detected with a blood test. A syphilis blood test is accurate, safe, and inexpensive. A low level of antibodies will stay in the blood for months or years after the disease has been successfully treated, and antibodies can be found by subsequent blood tests. Because untreated syphilis in a pregnant woman can infect and possibly kill her developing baby, every pregnant woman should have a blood test for syphilis.

What is the link between syphilis and HIV? While the health problems caused by the syphilis bacterium for adults and newborns are serious in their own right, it is now known that the genital sores caused by syphilis in adults also make it easier to transmit and acquire HIV infections sexually. There is a 2 to 5 fold increased risk of acquiring HIV infection when syphilis is present. Areas of the U.S. that have the highest rates of syphilis also have the fastest-growing HIV infection rates in women of childbearing age.

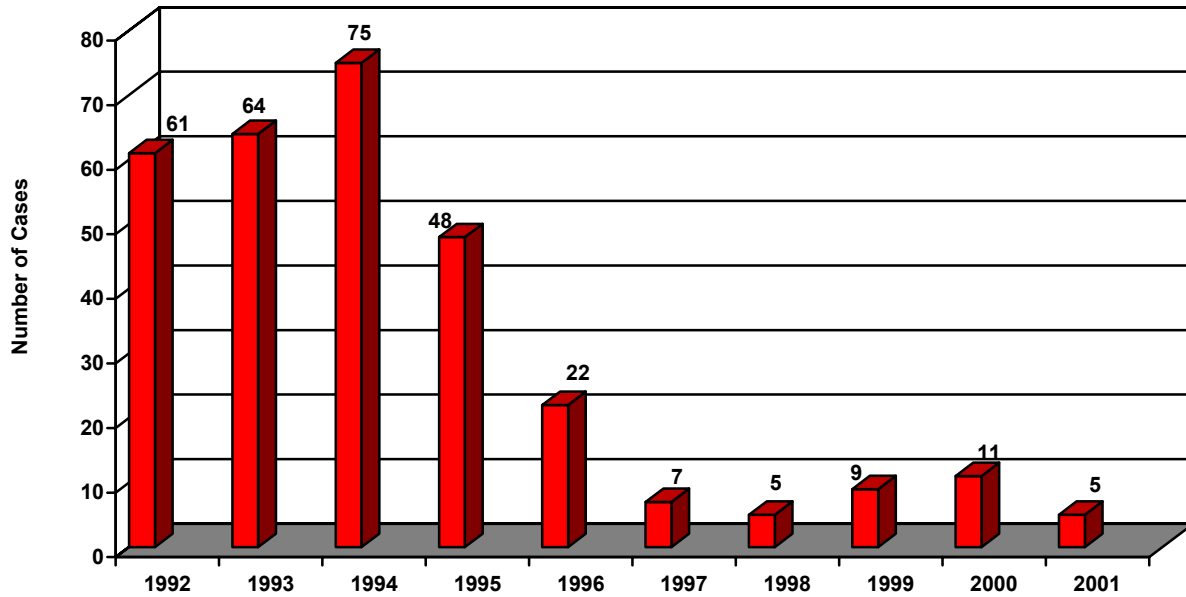
Is there a cure for syphilis? One dose of the antibiotic penicillin will cure a person who has had syphilis for less than one year. More doses are needed to cure someone who has had it for longer than a year. A baby born with the disease needs daily penicillin treatment for 10 days. There are no home remedies or over-the-counter drugs that cure syphilis. Penicillin treatment will kill the syphilis bacterium and prevent further damage, but it will not repair any damage already done. Persons who receive syphilis treatment must abstain from sexual contact with new partners until the syphilis sores are completely healed. Person with syphilis must notify their sex partners so that they also can receive treatment.

Will syphilis recur? Having had syphilis does not protect a person from getting it again. Antibodies are produced as a person reacts to the disease, and, after treatment, these antibodies may only offer partial protection from getting infected again, if exposed right away. Even though there may be a short period of protection, the antibody levels naturally decrease in the blood, and people become susceptible to syphilis infection again if they are sexually exposed to syphilis sores.

How can people protect themselves against infections? Two people who know they are not infected and who have sex with no one but each other cannot contract syphilis. When a person has sex with a person whose syphilis status is unknown, a latex condom put on before beginning sex and worn until the penis is withdrawn is a good defense against infection. Only lab tests can confirm whether someone has syphilis. Because syphilis sores can be hidden in the vagina, rectum, or mouth, it may not be obvious that a sex partner has syphilis. Washing the genitals, urinating, or douching after sex does not prevent STDs, including syphilis. Any unusual discharge, sore, or rash, especially in the groin area, should be a signal to stop having sex and to see a doctor at once.

IOWA

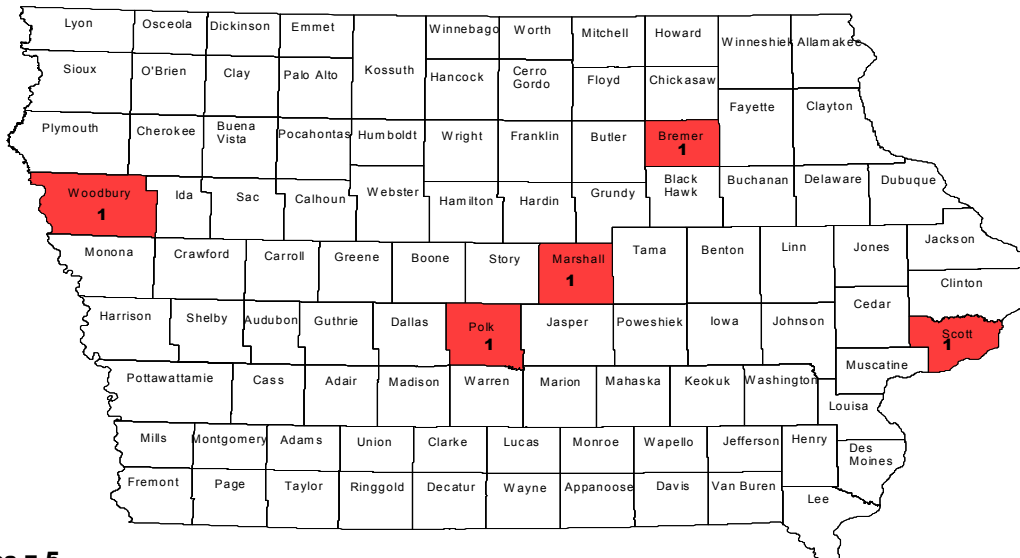
Reported Cases of Primary/Secondary Syphilis by Year 1992 - 2001



Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Primary/Secondary Syphilis by County 2001

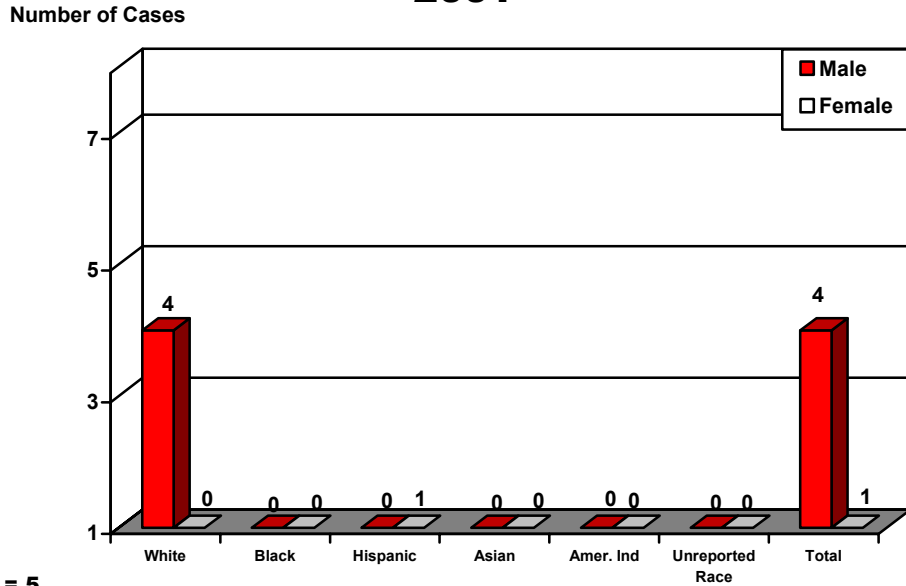


Total Cases = 5

Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Primary/Secondary Syphilis by Race/Ethnicity and Gender 2001

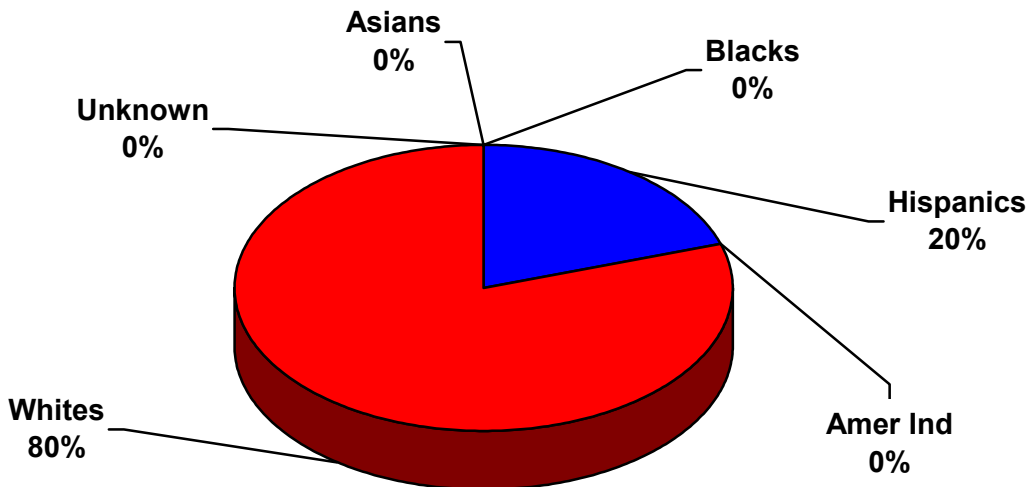


Total Cases = 5

Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Primary/Secondary Syphilis by Race/Ethnicity 2001



Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Primary/Secondary Syphilis by Age, Race/Ethnicity, and Gender 2001

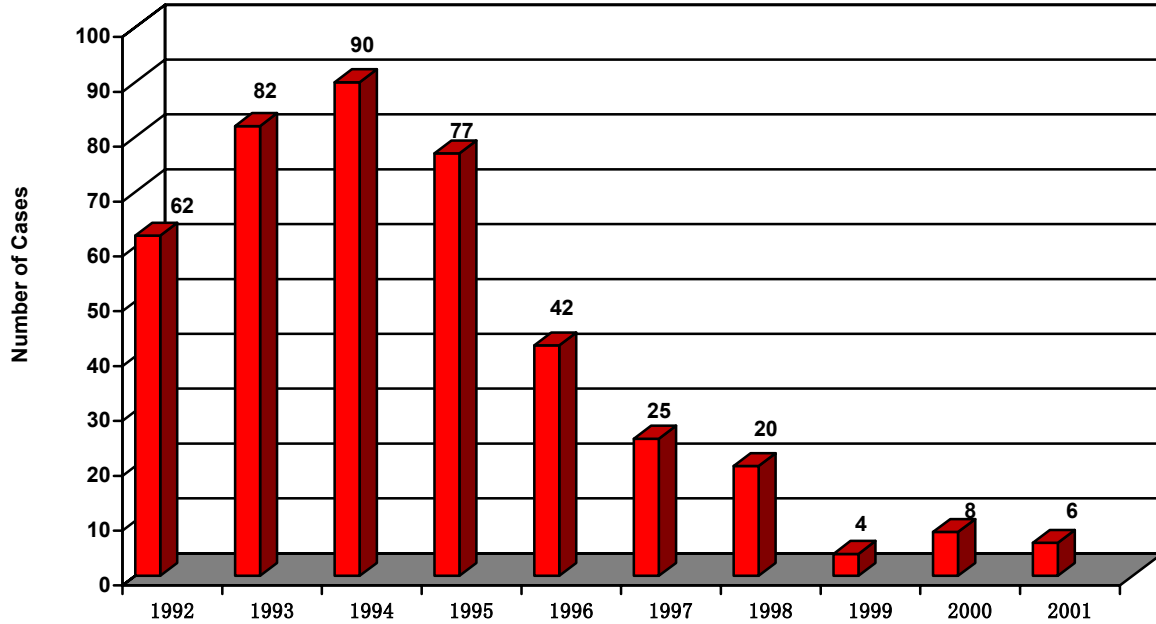
AgeGroup	Asian		Black		Hispanic		Amer. Indian		White		Unknown		Total		Unk Sex	All
	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
0 - 4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5 - 9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10 - 14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15 - 19	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	1
20 - 24	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	1
25 - 29	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30 - 34	0	0	0	0	0	0	0	0	2	0	0	0	2	0	0	2
35 - 39	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	1
40 - 44	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45 - 54	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55 - 64	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65+	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
UNK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	1	0	0	4	0	0	0	4	1	0	5

Total Asians =	0	0%
Total Blacks =	0	0%
Total Hispanics =	1	20%
Total Amer. Ind =	0	0%
Total Whites =	4	80%
Total Unknown =	0	0%

Source: Iowa Department of Public Health STD Prevention Program

IOWA

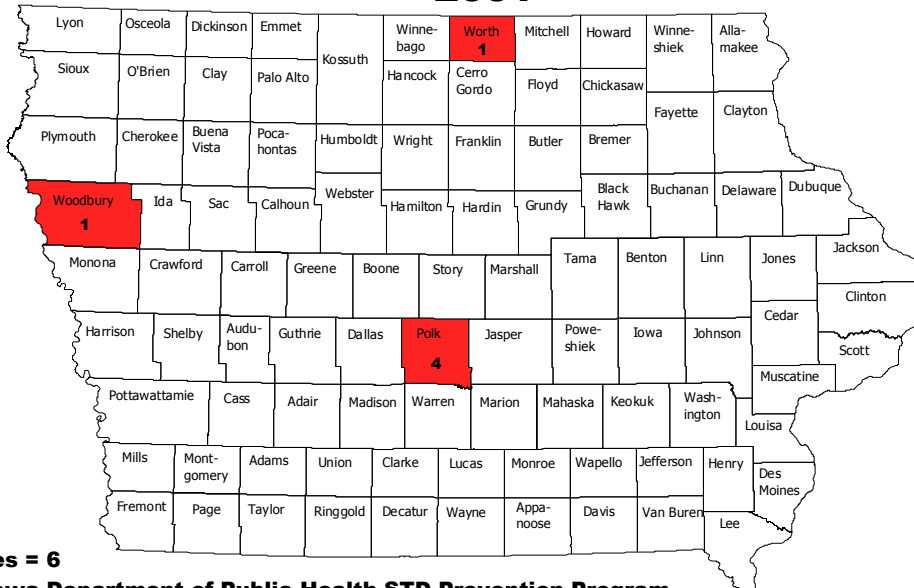
Reported Cases of Early Latent Syphilis by Year 1992 - 2001



Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Early Latent Syphilis by County 2001

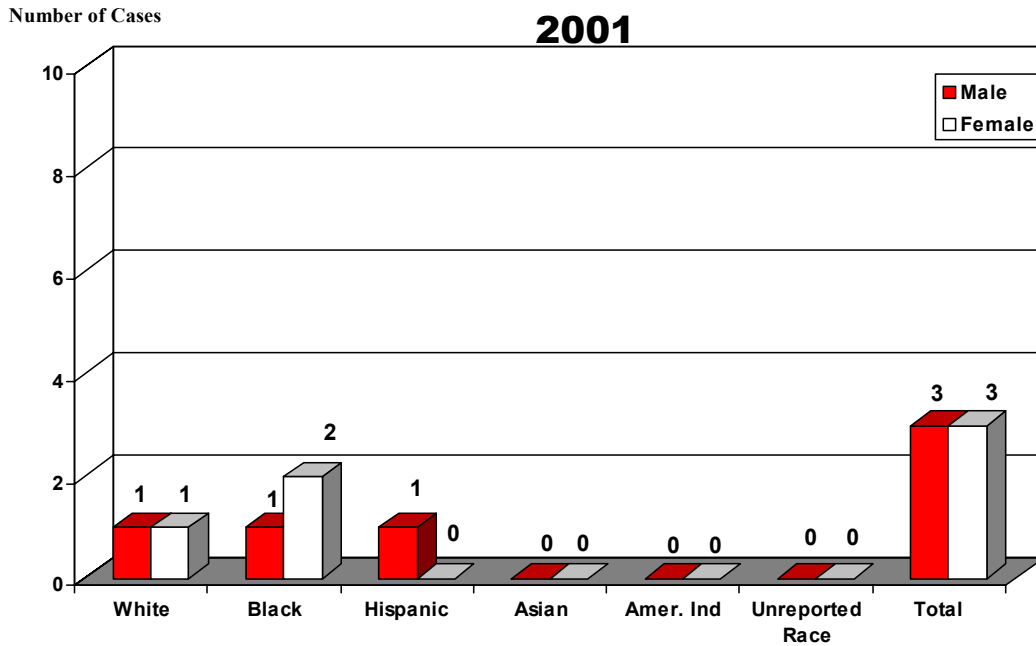


Total Cases = 6

Source: Iowa Department of Public Health STD Prevention Program

IOWA

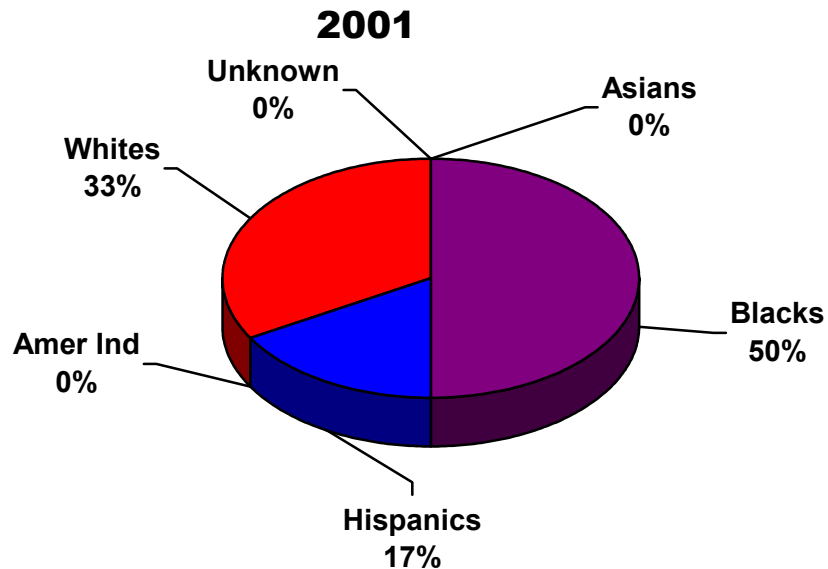
Reported Cases of Early Latent Syphilis by Race/Ethnicity and Gender



Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Early Latent Syphilis by Race/Ethnicity



Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Early Latent Syphilis by Age, Race/Ethnicity, and Gender 2001

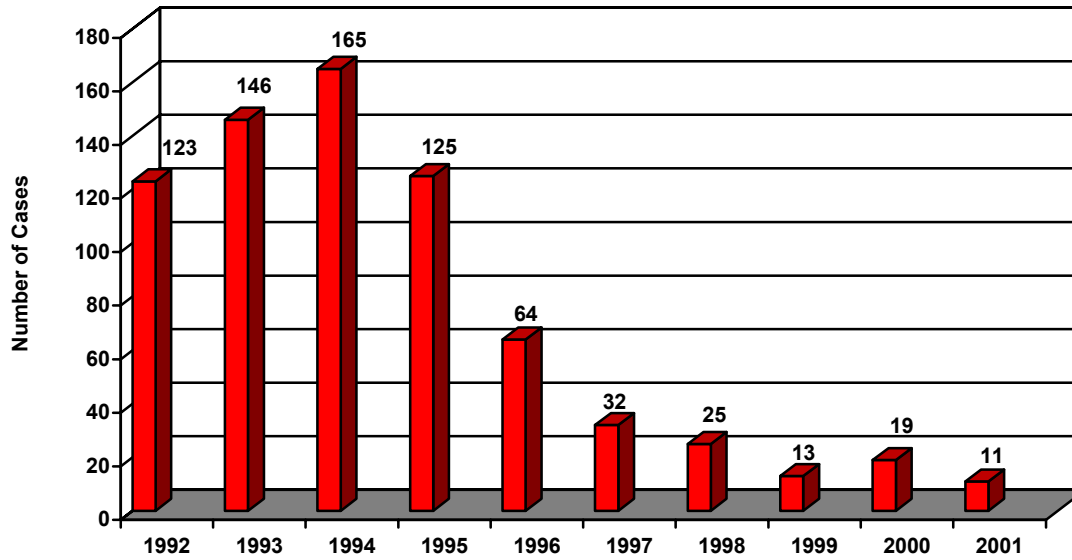
AgeGroup	Asian		Black		Hispanic		Amer. Indian		White		Unknown		Total		Unk Sex	All
	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
0 - 4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5 - 9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10 - 14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15 - 19	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20 - 24	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	1
25 - 29	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30 - 34	0	0	1	1	0	0	0	0	0	1	0	0	1	2	0	3
35 - 39	0	0	0	1	0	0	0	0	1	0	0	0	1	1	0	2
40 - 44	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45 - 54	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55 - 64	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65+	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
UNK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	1	2	1	0	0	0	1	1	0	0	3	3	0	6

Total Asians =	0	0%
Total Blacks =	3	50%
Total Hispanics =	1	17%
Total Amer. Ind =	0	0%
Total Whites =	2	33%
Total Unknown =	0	0%

Source: Iowa Department of Public Health STD Prevention Program

IOWA

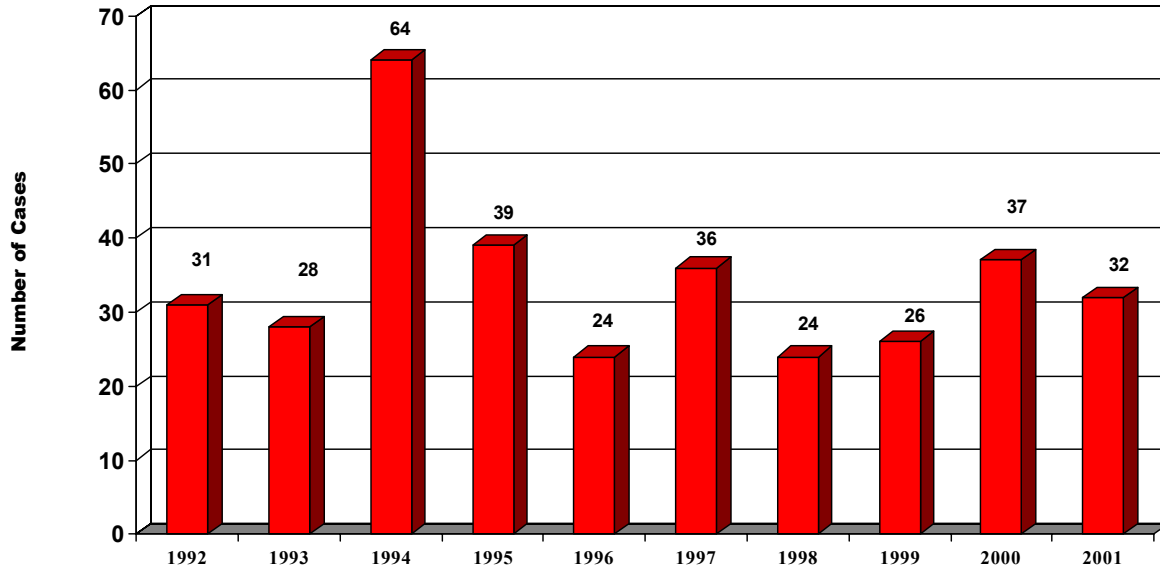
Reported Cases of Total Early Syphilis by Year 1992 - 2001



Source: Iowa Department of Public Health STD Prevention Program

IOWA

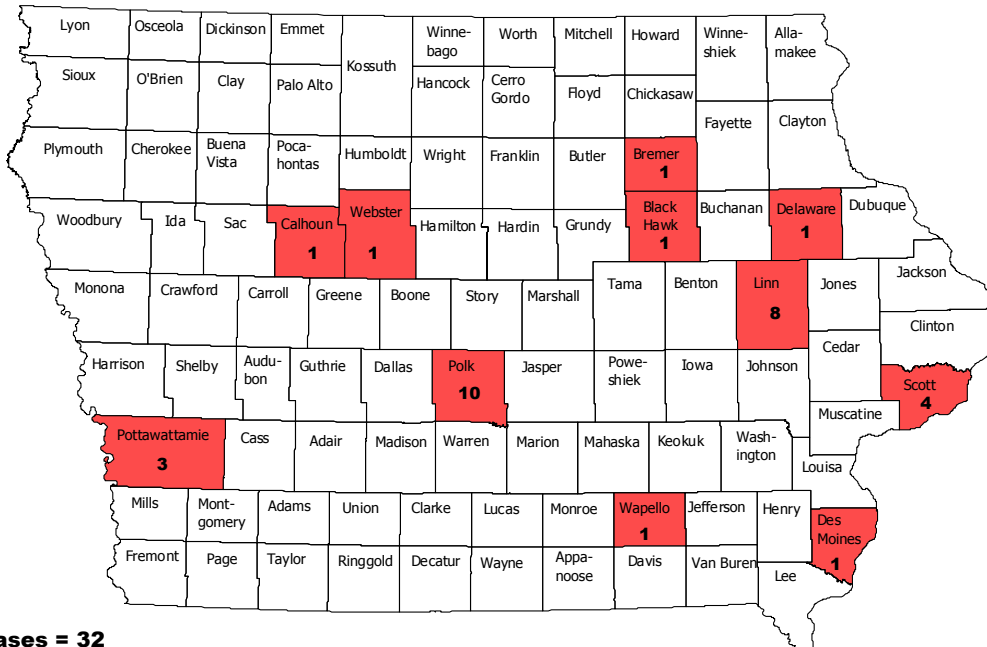
Reported Cases of Late Latent Syphilis by Year 1992 - 2001



Source: Iowa Department of Public Health STD Prevention Program

Iowa

Reported Cases of Late Latent Syphilis by County 2001

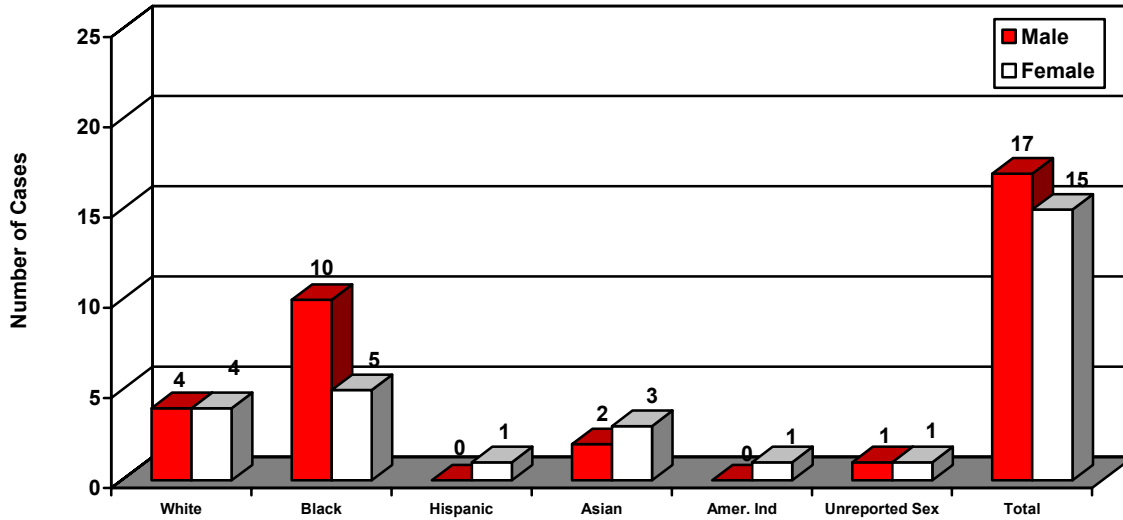


Total Cases = 32

Source: Iowa Department of Public Health STD Prevention Program

IOWA

Reported Cases of Late Latent Syphilis by Race/Ethnicity and Gender 2001

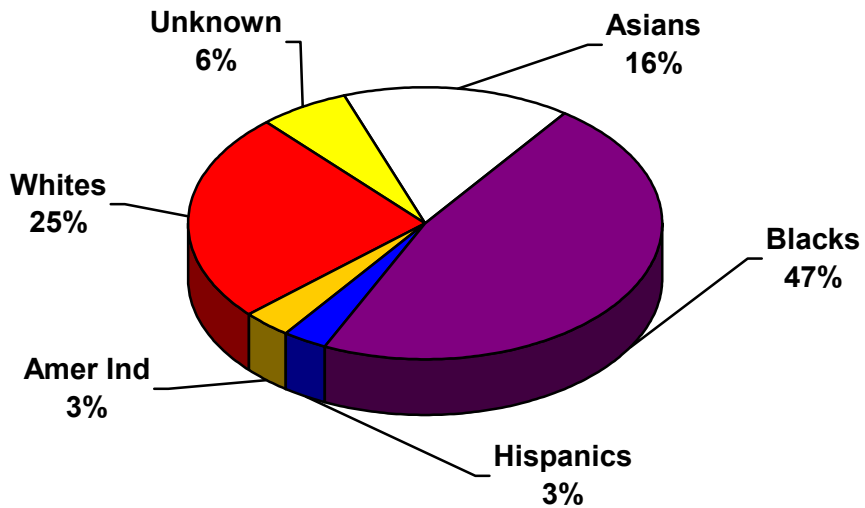


Total Cases = 32

Source: Iowa Department of Public Health STD Prevention Program

Iowa

Reported Cases of Late Latent Syphilis by Race/Ethnicity 2001



Source: Iowa Department of Public Health STD Prevention Program

Iowa

Reported Cases of Late Latent Syphilis by Age, Race/Ethnicity, and Gender

2001

AgeGroup	Asian		Black		Hispanic		Amer. Indian		White		Unknown		Total		Unk Sex	All
	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
0 - 4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5 - 9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10 - 14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15 - 19	0	0	1	2	0	0	0	0	0	0	0	0	1	2	0	3
20 - 24	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
25 - 29	0	1	2	1	0	0	0	0	0	1	1	0	3	3	0	6
30 - 34	0	0	5	0	0	1	0	0	0	0	0	0	5	1	0	6
35 - 39	0	0	2	1	0	0	0	0	2	0	0	0	4	1	0	5
40 - 44	0	0	0	0	0	0	0	0	0	2	0	0	0	2	0	2
45 - 54	1	1	0	1	0	0	0	1	1	0	0	0	2	3	0	5
55 - 64	0	1	0	0	0	0	0	0	1	0	0	1	1	2	0	3
65+	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1
UNK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	2	3	10	5	0	1	0	1	4	4	1	1	17	15	0	32

Total Asians =	5	16%
Total Blacks =	15	47%
Total Hispanics =	1	3%
Total Amer Ind =	1	3%
Total Whites =	8	25%
Total Unknown =	2	6%

Source: Iowa Department of Public Health STD Prevention Program