

SYPHILIS IN PREGNANCY

Information for women and their partners

Syphilis is a serious infection. You can have syphilis and not know it. Syphilis can harm you and your baby. Congenital syphilis occurs when a mother with syphilis passes the infection on to her baby during pregnancy or at birth. If left untreated, syphilis can lead to premature birth, long-term neurological issues, bone deformities, deafness, or even stillbirth.

Protect yourself and your baby by getting tested for syphilis during your pregnancy, every time you get pregnant. Getting tested is part of standard pregnancy care. Ask your healthcare provider for a syphilis test at your first prenatal visit and again close to the time when your baby is born.

What is syphilis and how is it transmitted?

Syphilis is a serious infection caused by a bacterium called *Treponema pallidum*. People with syphilis are infectious to others. It is highly contagious when a syphilis sore or lesion is present. It can be contracted vaginally, anally, or orally through direct contact with (or skin-to-skin contact with) an infectious syphilis sore (but not from the rash that someone who has had syphilis for a while may develop). It can also be transmitted to a baby in pregnancy or during delivery.

What are the signs and symptoms?

Not all people with syphilis have symptoms so you may not know you have it, unless you have a blood test for it. Sometimes the infection causes no (or very mild) symptoms, or symptoms that mimic other illnesses. Common symptoms can include:

- A hard, painless sore usually on the genitals (but it may be at other sites of contact, such as the mouth or anus),
- A flat red skin rash on the back, chest, hands or feet.

Other symptoms may include:

- Fever,
- Swelling of the glands in the groin and armpits,
- Genital rash,
- Hair loss, and
- General tiredness.

Many years following infection, untreated syphilis may lead to several multi-organ diseases.

Is there treatment for syphilis?

Yes. Syphilis is treated with penicillin. If you are allergic to penicillin, there are alternative treatments.

If you test positive for syphilis during pregnancy, be sure to get treatment right away. Do not wait for your next appointment with your pregnancy care provider.

Although the treatment is straightforward, it is important to have repeat blood tests to check that treatment has worked. If you are pregnant, you will be tested on a regular basis for the remainder of your pregnancy.

Having syphilis once does not protect you from getting it again. Even after you've been successfully treated, you can still be re-infected by having sex with a partner who has syphilis. For this reason, you should continue to take actions that will reduce your risk of getting a new infection (e.g., using a condom during sex and being tested for syphilis during any future pregnancies).

Should my sexual partners also be tested and treated?

If you have been diagnosed with syphilis, all your sexual partners from the last few months should be tested (and treated if necessary). If you screen negative, that is, you do *not* have syphilis, testing partners is not necessary.

For questions or support regarding a diagnosis of syphilis, please refer to the BCCDC Syphilis nursing team: 604-707-5607.

What is congenital syphilis and how can it affect my baby?

Congenital syphilis occurs when a mother with syphilis passes the infection on to her baby in pregnancy or during delivery. How congenital syphilis affects your baby's health depends on how long you have had syphilis and if, or when, you were treated for the infection. Left untreated, syphilis during pregnancy can lead to one or more of the following for your baby:

- Being born early (prematurity),
- Being born small (low birthweight),
- Death before birth (stillbirth),
- Death shortly after birth, or
- Lifelong problems with eyes, ears, teeth, bones, organs, blood, and joints.

Do all babies born with congenital syphilis have signs or symptoms?

No. It is possible that a baby with congenital syphilis will not have any symptoms at birth; instead some may develop health problems in the first few weeks after birth, although some won't show symptoms for years.

Babies who do not get treatment for congenital syphilis and develop symptoms later can die from the infection. They may also be developmentally delayed or have seizures. All babies born to individuals who have had syphilis should be tested (even if there are no symptoms).

Is there a way to treat congenital syphilis?

Yes. Babies with congenital syphilis may need additional testing and will be treated with penicillin by injection or intravenous right away to prevent future complications. Being treated and receiving follow-up care to make sure that the treatment worked is very important to ensuring a baby's best outcomes.

Why am I hearing about this now?

BC is experiencing the highest rates of infectious syphilis in 30 years. Though the largest number of cases continues to be among men who have sex with men, **the rate is increasing among women in their childbearing years.** The graph below shows the rise in syphilis infection among females from 2009 – 2019. This increase has also been noted in Alberta and Manitoba. **In 2019, after many years of no reported cases of congenital syphilis, BC has recorded cases.**

Number and Rate of Female Infectious Syphilis Cases (aged 15-49) in BC, 2009-2019*



*The 2019 projected number and rate assume that the average number of cases over the first two quarters of 2019 (January 1st - June 30th) will remain consistent throughout 2019.

How can I reduce the risk of my baby getting congenital syphilis?

1. Get a syphilis test at your first prenatal visit and again close to when your baby is born.

Screening yourself protects your baby.

First trimester screening has been in place in BC for many years. Adding a second screen around the time of your baby's birth enables the public health system to understand when and how the rise in congenital syphilis cases is happening.

At your first prenatal visit, ask your pregnancy care provider about getting tested for syphilis. It is important that you have an open and honest conversation with your care provider at this time. Discuss any new or unusual physical symptoms you may be experiencing, as well as any medication you are using, and whether you have new or multiple sex partners. This information will allow your care provider to make the appropriate testing recommendations for you and your partner(s). Even if you have been tested for syphilis in the past, you should be tested again when you become pregnant and at delivery.

2. Prevent syphilis transmission before and during your pregnancy.

Preventing syphilis in pregnant individuals and their sexual partners is the best way to prevent congenital syphilis.

If you are sexually active with multiple partners, use latex condoms every time you have sex (vaginal, anal and oral). Although condoms can prevent transmission of syphilis by preventing contact with a sore, you should know that sometimes syphilis sores occur in areas not covered by a condom and contact with these sores can still transmit syphilis. If your partner has other partners, consider asking him or her to get tested as well. **Your baby will not get congenital syphilis if you do not have syphilis.**