

Colleen Chawla
AC Health
Director

Dr. Nick Moss
AC Health
Health Officer

Kimi Watkins-Tartt
ACPHD
Director

Dr. Eileen Dunne
ACPHD
HIV/STD Controller

HEALTH ADVISORY
Congenital Syphilis in Alameda County
May 7, 2025

Alameda County's congenital syphilis rate increased 218% between 2019 and 2023. Congenital syphilis occurs when *T. pallidum* bacterium is transmitted across the placenta from a pregnant person with untreated syphilis to their child during fetal development or at birth. Congenital syphilis can cause severe illness in infants including skeletal and neurological abnormalities, anemia, and developmental delays. It can also lead to low birth weight, miscarriage, stillbirth, premature delivery, and neonatal death. Congenital syphilis is preventable with routine screening and timely treatment of syphilis in pregnant persons.

We conducted a 5-year retrospective case review of all congenital syphilis cases in Alameda County from 2019 to 2023. During this period, 57 infants were born with congenital syphilis to 54 birthing persons, representing a 218% increase over time. Most birthing persons received inadequate or a complete lack of prenatal care which resulted in missed opportunities to prevent congenital syphilis. A quarter of birthing persons had no testing for syphilis during pregnancy, and among those who were tested, only 20% were tested ≥ 30 days before delivery, the minimum timeframe required for effective treatment. Additionally, 38% of the birthing persons did not receive adequate treatment for the stage of syphilis infection. More information on this review can be found [here](#).

Actions Requested of Clinicians:

- **Complete and Fax to 510-268-2036 a Confidential Morbidity Report (CMR)** and associated medical records to ACPHD within one working day for all suspected and confirmed cases of syphilis. Include pregnancy status and treatment information.
- Screen all sexually active people ages 15-44 years for syphilis at least once, regardless of gender identity or sexual orientation.
- Conduct a pregnancy test for anyone with confirmed syphilis who is capable of becoming pregnant.

For Pregnant Patients:

- **Screen all pregnant persons for syphilis three times:** (1) at first prenatal encounter (ideally during the first trimester); (2) early in the third trimester (ideally at 28 weeks gestation); and (3) again at delivery.

- Prior to discharge, Emergency Departments should either conduct a syphilis test for all pregnant patients or verify that documented syphilis screening results from the current pregnancy are available.
- If clinically indicated, provide empirical treatment for syphilis while awaiting confirmatory testing for patients with preliminary positive treponemal or non-treponemal test results. Note: In pregnant persons, syphilis treatment must be initiated at least 30 days before delivery to prevent congenital syphilis.
- Ensure that syphilis treatment regimen is appropriate for the stage of syphilis, and that doses are being administered on the proper schedule (see [CDC Syphilis During Pregnancy Guidelines](#)). Note: For unknown duration or late latent syphilis, optimal treatment in pregnancy is 3 doses of benzathine penicillin G with an interval of 7 days between doses. If treatment occurs with more than 8 days or less than 6 days between doses, the full treatment course should be restarted.
- Educate pregnant patients with syphilis on the importance of completing the treatment regimen.

For any questions, please contact the ACPHD Sexual Health team Monday through Friday, 8:30 AM – 5:00 PM, at (510) 267-3250 or email us at SexualHealth@acgov.org.

Resources:

1. [Evaluation and Treatment Guidelines for Neonates with Suspected or Confirmed Congenital Syphilis](#), Centers for Disease Control and Prevention
2. [Clinical Consultation Request](#), National Network of STD Clinical Prevention Training Centers
3. [Updated Syphilis Screening Recommendations](#), California Department of Public Health
4. [Syphilis During Pregnancy: Diagnostic Consideration and Treatment Guidelines](#) (CDC)
5. [STI Treatment Guidelines](#), Centers for Disease Control and Prevention
6. [STI Clinical Trainings and Resources](#), California Prevention Training Center