



EMERGING EPIDEMIC ALERT

CONGENITAL SYPHILIS:

a disease that occurs when a mother with syphilis passes the infection on to her baby during pregnancy

Rates of congenital syphilis are on the rise.



- Over 10 times as many babies were born with congenital syphilis in 2022 than in 2012.
- 18 Nebraska counties have high syphilis rates (>4.6 per 100,000).

10X

Timely testing & treatment during pregnancy might have prevented 88% of congenital syphilis cases in 2022.



Congenital syphilis can cause:

- miscarriage
- stillbirth
- prematurity
- low birth weight
- death shortly after birth

TESTING

All pregnant women should be screened serologically:

- At the **first prenatal visit**, followed by
- **Universal rescreening** during the **third trimester and again at birth**,

Any woman who had no prenatal care before delivery should have a syphilis serologic test before she or her neonate is discharged.

TREATMENT

Syphilis symptoms will resolve regardless of treatment; however, timely treatment must be received to reduce the chance of in-utero transmission and disease progression.



Babies born with congenital syphilis may have:

- “snuffles” (copious nasal secretions)
- rash and peeling skin (most severe on hands and feet)
- jaundice
- pneumonia
- deformed bones
- severe anemia
- low platelets
- enlarged liver or spleen
- brain and nerve problems (e.g. blindness, deafness, paralysis, seizures)
- meningitis
- developmental delays



For more information about:

- Congenital Syphilis ([Healthy Start](#), [CDC clinical manifestation](#), [ACOG recommendation](#))
- Syphilis Rates ([CDC County-Level data](#), [CDC syphilis in babies](#).)
- Treatment ([CDC Treatment Guidelines](#))

