



# 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.

# 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 tested at the first prenatal visit

- Retest at 28 weeks gestation and at delivery if at high risk
- **Many Nebraska counties have high rates (>4.6 per 100,000) of syphilis. Pregnant women in these counties should be tested for syphilis 3 times during pregnancy.**

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 or deafness)
- meningitis

**The NPQIC Annual Summit will feature a speaker with congenital syphilis expertise. Hold your calendars for September 27, 2024!**



For more information about:

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

