

County of San Diego Monthly STD Report

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Table 1. STDs Reported Among County of San Diego Residents, by Month and Previous 12 Months Combined.

	2021		2022	
	Apr	Previous 12-Month Period*	Apr	Previous 12-Month Period*
Chlamydia	1493	17786	1417	17994
Female age 18-25	559	6689	512	6359
Female age ≤ 17	52	605	44	613
Male rectal chlamydia	117	1270	113	1660
Gonorrhea	707	6961	629	8138
Female age 18-25	103	1063	102	1271
Female age ≤ 17	14	134	7	123
Male rectal gonorrhea	126	1012	115	1462
Early Syphilis (adult total)	118	1221	85	1159
Primary	20	205	12	168
Secondary	33	418	21	381
Early latent	65	598	52	610
Congenital syphilis	1	11	5	39

* Cumulative case count of the previous 12 months.

Table 2. Selected STD Cases and Annualized Rates per 100,000 Population for San Diego County by Age and Race/Ethnicity, Year-to-Date.

	All Races*		Asian/PI		Black		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
<i>All ages</i>										
Chlamydia	5756	516.5	165	134.2	162	305.1	578	151.7	610	119.1
Gonorrhea	2634	236.3	71	57.7	167	314.5	373	97.9	432	84.4
Early Syphilis	361	32.4	16	13.0	34	64.0	152	39.9	109	21.3
<i>Under 20 yrs</i>										
Chlamydia	847	288.0	24	74.0	33	236.0	97	96.5	77	57.1
Gonorrhea	240	81.6	3	9.3	24	171.6	36	35.8	19	14.1
Early Syphilis	5	1.7	0	0.0	2	14.3	3	3.0	0	0.0

Note: Rates are calculated using 2020 Population Estimates; County of San Diego, Health and Human Services Agency, Public Health Services Division, Community Health Statistics Unit. 8/2021.

* Includes cases designated as "other," "unknown," or missing race/ethnicity.

Note: All data are provisional. Case counts are based on the earliest of date of diagnosis, date of specimen collection, and treatment date. Totals for past months might change because of delays in reporting from labs and providers.

Figure 1. Chlamydia and Gonorrhea Reported Among County of San Diego Residents, by 3-Month Period.

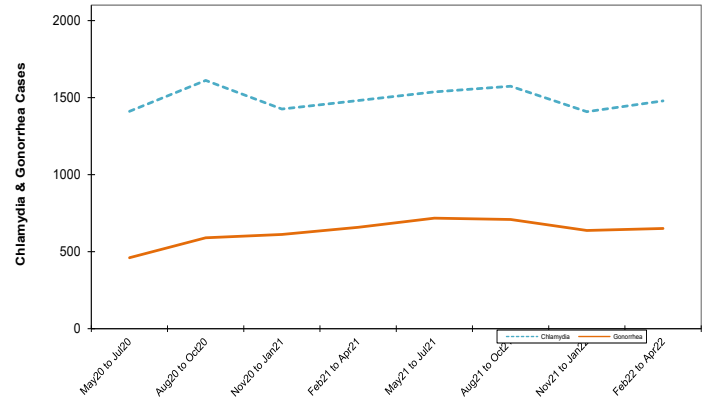
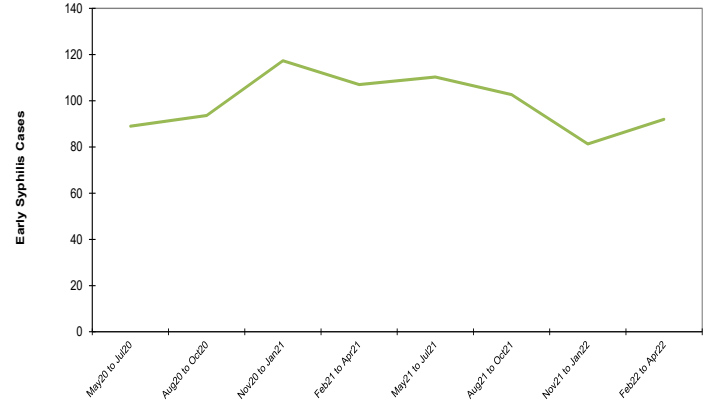


Figure 2. Early Syphilis Reported Among County of San Diego Residents, by 3-Month Period.



Editorial Note: USPSTF Reaffirms Syphilis Screening Recommendation for Non-Pregnant Persons

The United States Preventive Services Task Force (USPSTF) continues to recommend screening for syphilis in nonpregnant persons who are at increased risk for infection, consistent with the 2016 recommendation issued by the panel. Based on a reappraisal of the evidence in support of screening, the USPSTF assigned this recommendation a Grade A rating, meaning that there is high certainty that there is a substantial net benefit of screening for syphilis in nonpregnant persons who are at increased risk of infection. The recommendation statement was published in the *Journal of the American Medical Association* [1]. USPSTF recommendations for pregnant persons are published in a [separate statement](#), and additional screening recommendations for pregnant persons in California are available through the [California Department of Public Health](#).

Risk of syphilis is higher in men who have sex with men (MSM), persons living with human immunodeficiency virus (PLWH) or persons with other sexually transmitted infections, persons who use illicit drugs, and persons with a history of incarceration, sex work, or military services [1]. In San Diego County, a total of 1,818 cases of syphilis were reported in 2020, including 1,118 cases of early syphilis (i.e., infections that could be demonstrated to have occurred during the previous 12 months). Of early syphilis cases reported in 2020, 72.3% were among MSM, and 52.6% of MSM early syphilis cases were PLWH [2]. While the USPSTF does not recommend a specific screening frequency, MSM and PLWH may benefit from screening at least annually or more frequently (i.e., every 3-6 months) if they continue to be at high risk [1].

In addition, the USPSTF advises clinicians to be aware of how common syphilis is in their community and patients' individual risk, the latter of which can be assessed by taking a thorough sexual history. Resources for sexual history taking and discussing sexual health with patients are available through the [Centers for Disease Control and Prevention](#) and the [National Coalition for Sexual Health](#).

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