

County of San Diego Monthly STD Report

Volume 17, Issue 11: Data through June 2025; Report released November 25, 2025.



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

| | 2024 | | 2025 | |
|------------------------------|------|---------------------------|------|---------------------------|
| | June | Previous 12-Month Period* | June | Previous 12-Month Period* |
| Chlamydia | 1207 | 16726 | 1205 | 15643 |
| Female age 18-25 | 382 | 5381 | 400 | 5085 |
| Female age ≤ 17 | 50 | 611 | 53 | 586 |
| Male rectal chlamydia | 87 | 1501 | 60 | 970 |
| Gonorrhea | 497 | 6144 | 409 | 5539 |
| Female age 18-25 | 46 | 588 | 26 | 480 |
| Female age ≤ 17 | 13 | 91 | 1 | 64 |
| Male rectal gonorrhea | 125 | 1472 | 100 | 1309 |
| Early Syphilis (adult total) | 54 | 837 | 35 | 553 |
| Primary | 3 | 107 | 8 | 95 |
| Secondary | 12 | 235 | 6 | 146 |
| Early latent | 39 | 495 | 21 | 312 |
| Congenital syphilis | 2 | 27 | 1 | 27 |

* 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 |
| All ages | | | | | | | | | | |
| Chlamydia | 7693 | 467.6 | 224 | 107.4 | 329 | 426.0 | 848 | 148.3 | 975 | 136.9 |
| Gonorrhea | 2495 | 151.7 | 91 | 43.6 | 174 | 225.3 | 548 | 306.7 | 468 | 65.7 |
| Early Syphilis | 244 | 14.8 | 8 | 3.8 | 36 | 46.6 | 103 | 18.0 | 60 | 8.4 |
| Under 20 yrs | | | | | | | | | | |
| Chlamydia | 1244 | 303.4 | 19 | 43.8 | 50 | 264.2 | 93 | 52.1 | 161 | 113.2 |
| Gonorrhea | 117 | 28.5 | 5 | 11.5 | 12 | 63.4 | 18 | 10.1 | 15 | 10.6 |
| Early Syphilis | 7 | 1.7 | 0 | 0.0 | 3 | 15.9 | 1 | 0.6 | 2 | 1.4 |

Note: Rates are calculated using 2023 Population Estimates; County of San Diego, Health and Human Services Agency, Public Health Services Division, Community Health Statistics Unit. 01/2025.

* 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.

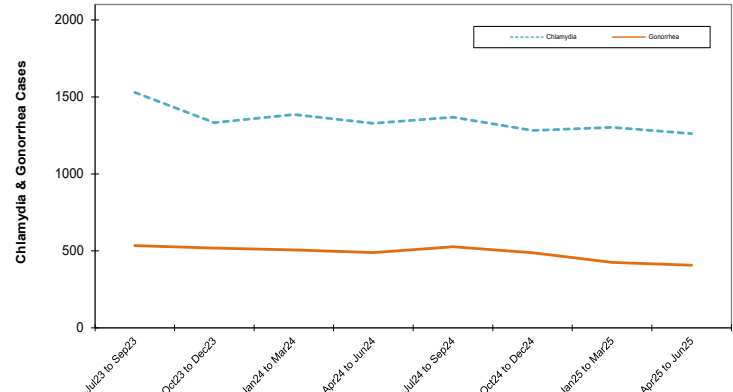
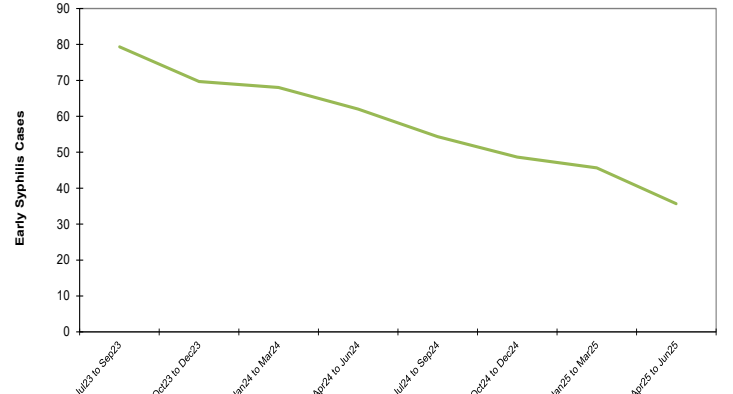


Figure 2. Early Syphilis Reported Among County of San Diego Residents, by 3-Month Period.



Editorial Note: CDPH Recommends Male Partner Treatment to Prevent Recurrent Bacterial Vaginosis

The California Department of Public Health (CDPH) recommends that clinicians consider offering partner therapy for male partners of cisgender women with confirmed bacterial vaginosis (BV) recurrence in ongoing monogamous relationships. The following combination regimen is suggested for male partner treatment:

- Oral metronidazole 500 mg twice daily for 7 days, *concurrent with*
- Topical clindamycin 2% cream applied to the penile skin once daily for 7 days

Male partner treatment should occur concurrently while female partners receive standard BV treatment with oral metronidazole or intravaginal treatments according to the Centers for Disease Control and Prevention (CDC) [2021 Sexually Transmitted Infection Treatment Guidelines](#). Partners should abstain from all sexual contact throughout their respective treatment periods. Clinicians may also consider male partner treatment as part of shared decision-making in other scenarios outside the setting of BV recurrence in monogamous heterosexual relationships. For further information, please see the [Dear Colleague Letter](#) released by CDPH on 11/12/25.

These recommendations are based on results of an open-label randomized trial that was published in March 2025 and covered in [Volume 17, Issue 3](#) of this report. The American College of Obstetricians and Gynecologists (ACOG) also released a [Clinical Practice Update](#) with similar guidance in October 2025.

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