

# County of San Diego Monthly STD Report

Volume 18, Issue 5: Data through December 2025; Report released May 28 2026.



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

	2024		2025	
	December	Previous 12-Month Period*	December	Previous 12-Month Period*
Chlamydia	1124	16092	1170	15330
Female age 18-25	366	5332	393	5036
Female age ≤ 17	49	567	38	592
Male rectal chlamydia	71	1191	45	811
Gonorrhea	430	6030	470	5267
Female age 18-25	28	568	29	385
Female age ≤ 17	6	81	1	30
Male rectal gonorrhea	103	1441	114	1271
Early Syphilis (adult total)	46	699	54	543
Primary	7	106	5	75
Secondary	20	195	10	132
Early latent	19	398	39	336
Congenital syphilis	4	32	2	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.**

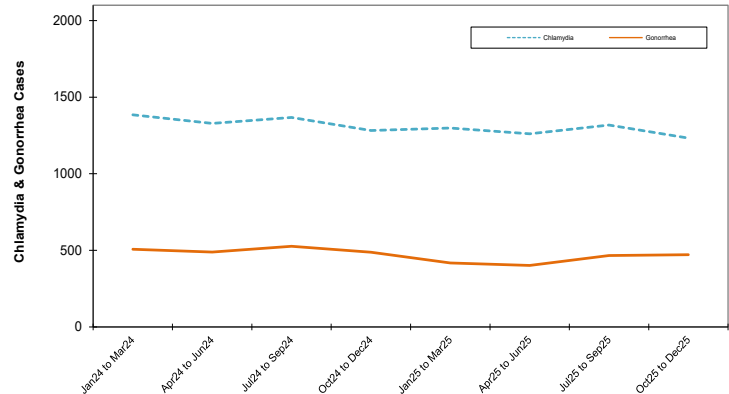
	All Races*		Asian/PI		Black		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
<b>All ages</b>										
Chlamydia	15330	465.9	454	108.8	631	408.6	1794	156.8	1981	139.1
Gonorrhea	5267	160.1	194	46.5	345	223.4	1142	319.6	1084	76.1
Early Syphilis	543	16.5	21	5.0	60	38.8	260	22.7	136	9.5
<b>Under 20 yrs</b>										
Chlamydia	2573	313.8	44	50.7	101	266.8	224	62.7	324	114.0
Gonorrhea	242	29.5	9	10.4	19	50.2	43	12.0	37	13.0
Early Syphilis	10	1.2	0	0.0	3	7.9	4	1.1	2	0.7

Note: Rates are calculated using 2024 Population Estimates; County of San Diego, Health and Human Services Agency, Public Health Services Division, Community Health Statistics Unit. 09/2025.

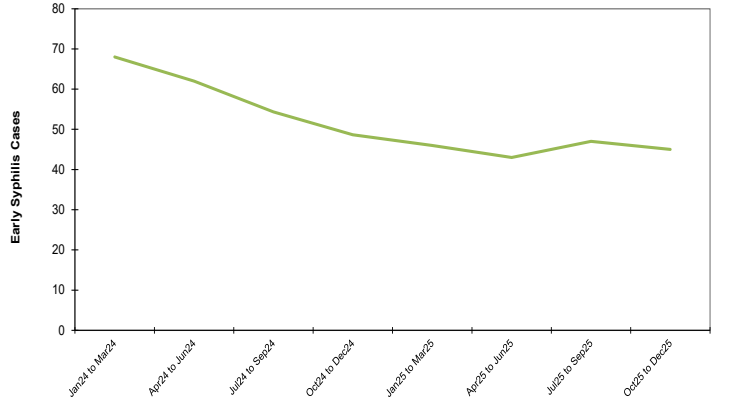
\* Includes cases designated as "other," "unknown," or missing race/ethnicity.

**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 Issues Clinical Recommendations for Recently Approved Oral Treatment Options for Uncomplicated Urogenital Gonorrhea

The California Department of Public Health (CDPH) has issued [clinical recommendations](#) regarding the use of two novel oral antibiotics, gepotidacin (Blujepa) and zoliflodacin (Nuzolvence), that were approved by the U.S. Food and Drug Administration (FDA) in December 2025 for treatment of uncomplicated urogenital gonorrhea (see [Volume 17, Issue 12](#) of this report). Both gepotidacin and zoliflodacin were found to be non-inferior to a combination of single doses of ceftriaxone 500 mg intramuscularly and azithromycin 1 gram orally in achieving microbiological cure, defined as a negative urogenital culture at the test-of-cure visit, in open-label, international clinical trials. Neither study contained a sufficient sample size to determine efficacy for rectal or pharyngeal gonococcal infections.

Based on the available data and FDA approvals, CDPH recommends that clinicians:

- Continue to use ceftriaxone as the first-line treatment of uncomplicated urogenital, pharyngeal, or rectal gonococcal infections.
- Continue to use cefixime as an alternative treatment for uncomplicated urogenital or rectal infection when ceftriaxone is unavailable, including as the primary option for expedited partner therapy (EPT) if partners are unable to access care for recommended testing and treatment.
- Consider gepotidacin and zoliflodacin for non-pregnant persons with uncomplicated urogenital gonococcal infection when ceftriaxone and alternative regimens (cefixime or gentamicin plus azithromycin) are contraindicated or unavailable.

The [CDPH Dear Colleague Letter](#) includes further details regarding the clinical trials and evidence leading to the FDA approval of gepotidacin and zoliflodacin, rationale for the above recommendations, and important medication information including side effects, warnings, and precautions.

