



County of San Diego Monthly STD Report

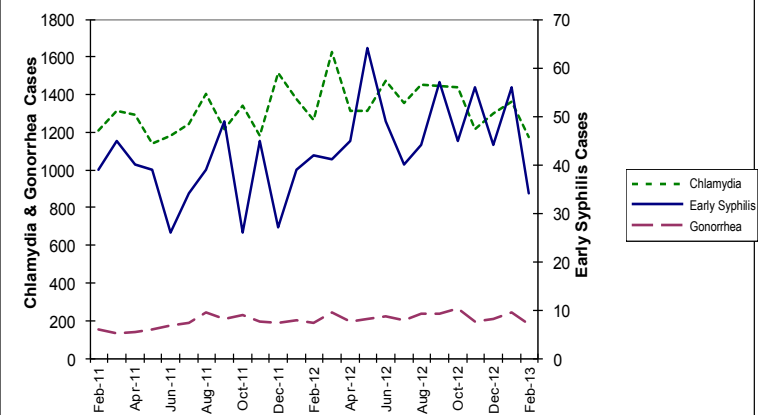
Issue No. 50: Data through February 28, 2013; Report released May 31, 2013.



Table 1. STDs reported among San Diego County residents, by month (February 2013) and year-to-date.

	2012		2013	
	Feb	YTD	Feb	YTD
Chlamydia	1262	2635	1172	2534
Female age 18-25	548	1138	472	1055
Female age ≤ 17	53	128	77	148
Male rectal chlamydia	29	74	41	99
Gonorrhea	185	390	184	425
Female age 18-25	40	69	33	70
Female age ≤ 17	3	6	3	11
Male rectal gonorrhea	21	59	28	59
Early Syphilis (adult total)	42	81	34	90
Primary	11	20	8	16
Secondary	21	34	18	41
Early latent	10	27	8	33
Neurosyphilis*	2	2	0	0
Congenital syphilis	0	0	0	0
HIV Infection**				
HIV (not AIDS)	43	76	43	88
AIDS	32	51	29	54

Figure 1. Chlamydia, early syphilis* and gonorrhea cases reported among San Diego County residents, by month.



*Early syphilis includes primary, secondary and early latent syphilis.

YTD: Year to Date

*Includes confirmed and probable cases of neurosyphilis among cases of early syphilis only.

**New infections are reported either as HIV or, if an individual was also diagnosed with AIDS within one month, as AIDS.

Table 2. Selected STD cases and annualized rates per 100,000 population for San Diego County, by age and race/ethnicity, year-to-date, 2013.

	All races*		Asian/PI		Black		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia	2534	483.7	90	151.7	165	710.3	630	365.1	408	164.0
Gonorrhea	425	81.1	16	27.0	41	176.5	83	48.1	96	38.6
Early syphilis	90	17.2	7	11.8	6	25.8	29	16.8	45	18.1
Under 20 yrs										
Chlamydia	499	354.9	14	100.2	50	798.0	161	253.9	65	135.4
Gonorrhea	42	8.0	0	0.0	9	143.6	12	18.9	5	10.4
Early syphilis	2	1.4	0	0.0	1	16.0	1	1.6	0	0.0

Note: Rates calculated using 2012 SANDAG population estimates.

*Includes cases denoted as "other" or "unknown" and for which no race/ethnicity data are specified.

Key Points comparing YTD cases reported through February 2012 to February 2013.

- Chlamydia has decreased 3.8%.
 - Female (≤17) chlamydia has increased 15.6%.
 - Male rectal chlamydia has increased 33.8%.
- Gonorrhea has increased 9.0%.
 - Female (≤17) gonorrhea has increased 83.3%.
- Early syphilis has increased 11.1%.

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.

Editorial Note: New Instructional Poster: How to Report STDs with the CMR

The California Code of Regulations, Title 17, mandates that health care providers report various communicable diseases to the appropriate health agency using the Confidential Morbidity Report (CMR). Diagnosing providers must report the following sexually transmitted diseases (STDs):

- Chancroid (caused by *Haemophilus ducreyi*)
- Chlamydia, including Lymphogranuloma Venereum (LGV) (caused by *Chlamydia trachomatis*)
- Gonorrhea (caused by *Neisseria gonorrhoeae*)
- Pelvic Inflammatory Disease (PID, all types)
- Syphilis (caused by *Treponema pallidum*)

Accurate and timely disease reporting and data collection are crucial to effective STD surveillance efforts and the ability of the County of San Diego, HIV, STD and Hepatitis Branch (HSHB) to identify and track community outbreaks. However, CMRs are often received with incomplete data or sometimes not received at all. In an effort to enhance STD reporting, HSHB partnered with the California Department of Public Health (CDPH), STD Control Branch and Family Health Centers of San Diego to develop an easy-to-use poster to guide health care providers in completing the required CMR.

The CMR instructional poster and CMR form are available to download from the HSHB website. For more information regarding the reporting of STDs in San Diego County, please call (619) 692-8501.

Please Note: HIV/AIDS case reporting is accomplished using the Adult HIV/AIDS Confidential Case Report form (CDPH 8641A). For information on reporting HIV/AIDS, please visit the CDPH Office of AIDS website.

We thank you for your cooperation in our data collection process.