

County of San Diego Quarterly STD Report

Public Health Services
HIV. STD. AND HEATING

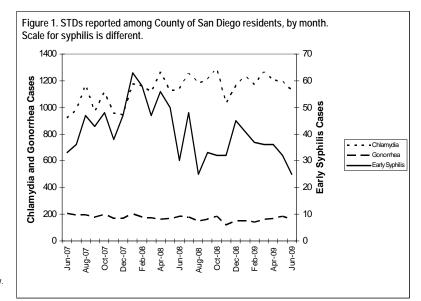
Issue No. 6; Data for April 1, 2009–June 30, 2009; Report prepared August 31, 2009

Table 1. STDs reported among County of San Diego residents, by quarter (April 1, 2009–June 30, 2009), and year to date.

	2009		2008	
	Quarter	YTD	Quarter	YTD
Gonorrhea	507	966	519	1071
Male rectal gonorrhea	49	109	63	108
Chlamydia	3528	7198	3526	6977
Male rectal chlamydia	74	152	66	125
Early Syphilis (adult total)	93	207	136	304
Primary	17	34	27	52
Secondary	51	98	69	147
Early latent	25	75	40	105
Neurosyphilis*	2	3	7	12
Congenital syphilis	0	0	1	4
Pelvic Inflammatory Disease	14	35	16	41

Quarter is April 1, 2009-June 30, 2009

^{*}Includes confirmed and probable cases of neurosyphilis among cases of early syphilis only



Note: All statistics are provisional. Morbidity is based on date of diagnosis. If date of diagnosis is not available for Chlamydia, gonorrhea, and pelvic inflammatory disease, date of specimen collection is used. Totals for past months may change due to delays in reporting from labs and providers.

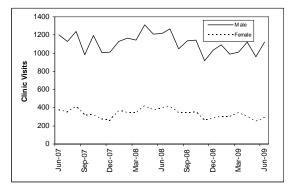


Figure 2. Monthly visits to all County of San Diego STD clinics, by gender.

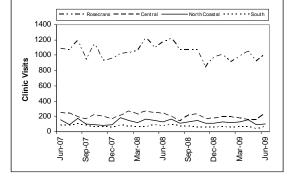


Figure 3. Monthly patient visits to County of San Diego STD clinics, by clinic site. Rosecrans is open five days per week, Central two days per week, and North Coastal and South one day per week.

Syphilis Screening Blitz Targeting Men Who Have Sex with Men, April 2009

Primary and secondary syphilis cases in the County of San Diego increased 47% from 2006 (n=234) to 2008 (n=344), with most cases (78%) in 2008 continuing to occur in men who have sex with men (MSM). As part of a response to that increase, in April 2009 the County's HIV, STD, and Hepatitis Branch partnered with six community-based organizations, the UCSD Antiviral Research Center, and the California Department of Public Health to conduct a syphilis screening blitz targeting MSM.

During April 2009, 26 syphilis screening events were conducted at gay bars and clubs, at Balboa Park, and at clinics and included evening and weekend hours. Of 194 syphilis tests performed, 6 (3.1%) were reactive. One case of primary syphilis and two cases of secondary syphilis were identified. Of those testing, 48% said they had never before been tested for syphilis. Of 141 individuals reporting HIV status, 16% were HIV infected, of whom 30% said they had never before been tested for syphilis.

The County of San Diego recommends screening for syphilis (as well as for urethral, rectal and pharyngeal *Neisseria gonorrhea* and *Chlamydia trachomatis* infections) every 3–6 months for sexually active MSM in nonmonogamous relationships. MSM at higher risk for syphilis include those who have multiple or anonymous partners, have sex in conjunction with illicit drug use, use methamphetamine, or whose sex partners participate in these activities. Clinicians should remain vigilant for syphilis, inquire about the gender of their patients' sex partners, and appropriately screen for syphilis. TG/KK

Questions about community activities related to syphilis: Tom Gray, 619-692-8835

Questions about syphilis screening, diagnosis, or treatment: Kenneth Katz, MD, STD Control Officer, 619-692-8394

STD Clinical Consultation Pager: 877-217-1816 (8 a.m.-5 p.m., Monday through Friday, except major holidays)

Information about STD clinic hours: http://www.sdcounty.ca.gov/hhsa/programs/phs/hiv_std_hepatitis_branch/std_clinical_services.html

Provider STD Reporting: 619-692-8520; fax 619-692-8541 STD Clinic: 619-692-8550; fax 619-692-8543

YTD: Year to Date