

QUICK GUIDE TO SYPHILIS MANAGEMENT



Syphilis is a bacterial STI common in the Kimberley

Syphilis is transmitted

Sexually (through unprotected vaginal, anal or oral sex)

Mother to baby (congenital syphilis)

Syphilis often has No Symptoms

Common symptoms may include:

- Ulcer (chancre, sore)
- Rash
- Swollen lymph glands
- Patchy hair loss
- Muscle and joint aches

ALERT: Congenital Syphilis

Can result in severe disease and death of the unborn baby and infant

PREVENTION OF CONGENITAL SYPHILIS IS OF THE HIGHEST PRIORITY

Treatment during pregnancy is very effective

What Can We Do About Syphilis?

<u>TALK</u>

TEST

Yarn often about sexual health - discuss using condoms and encourage regular STI check ups

Screening for syphilis is essential as most people will not have symptoms

Test

On a blood test using a yellow top tube.



Also do a PCR swab of genital ulcer if present



Kimberley Syphilis Screening Guidelines

15 - 34 yo	35-39 yo	Pregnancy
At least	At least	At least
every	every	5 times
6 months	12 months	(1st appointment, 28
		weeks, 36 weeks, at birth
		and 6 weeks post natal)

Test more frequently if concerned

Syphilis is treated with **Long Acting Bicillin (LAB).**Treatment depends on how long the person has been infected - KPHU will provide advice

TREAT

Treat on the day if:

DO NOT

- Symptoms are present
- **WAIT FOR**
- Named contact of syphilis **RESULTS**

Additional Tests

- Pregnancy test must be done for all women of child bearing age
- Always repeat syphilis serology on day of treatment
- Repeat serology at 3, 6 and 12 months post treatment
- Test for other STIs & BBVs

TRACE

Contact tracing is important and should be started immediately