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**To:** Sexual Health Providers, Local Health Departments, Family Planning Providers, Hospitals, Emergency Rooms, Community Health Centers, College Health Centers,

Community-Based Organizations, and Internal Medicine, Family Medicine, Pediatric, Adolescent Medicine, Dermatology, Infectious Disease, Obstetrics/Gynecology, and Primary Care Providers

From: New York State Department of Health, AIDS Institute, Office of Sexual Health and Epidemiology

Date: November 6, 2024

## HEALTH ADVISORY: PRELIMINARY REPORTS SHOW INCREASING SYPHILIS-RELATED INFANT DEATHS IN NEW YORK STATE OUTSIDE OF NEW YORK CITY

Five infant deaths presumptively linked to syphilis during pregnancy have been reported in counties outside of New York City between January and October of 2024.

#### **SUMMARY**

- Rising syphilis diagnoses in pregnant persons, both nationally and in New York State, have resulted in sustained increases in congenital syphilis births as well as associated stillbirths and infant deaths.<sup>1,2</sup>
- In New York State counties outside of New York City congenital syphilis diagnoses increased by 267% from nine in 2019 to 33 in 2023.
- Preliminary data from January to October 2024, shows this trend continuing, with <u>26</u> congenital syphilis diagnoses reported.
- 33% (n=34) of congenital syphilis diagnoses from 2019-2023 were associated with health/prenatal care access issues, and 11% (n=11) to untimely<sup>2</sup> testing.
- Of the five reported infant deaths in 2024, four are <u>preliminarily</u> associated with health/prenatal care access issues and one to untimely<sup>2</sup> testing.
- Increased efforts to link pregnant persons to prenatal care and screening for syphilis <u>at least three times</u> throughout pregnancy are needed.<sup>3</sup>
- Shared responsibility and communication among providers are needed; non-prenatal providers are strongly encouraged to bridge clinical gaps by providing necessary care until patients are successfully linked and engaged in obstetric care.
- Implementing effective, innovative, and science-informed health promotion messaging is needed.

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<sup>&</sup>lt;sup>1</sup>https://www.cdc.gov/media/releases/2023/s1107-newborn-syphilis.html

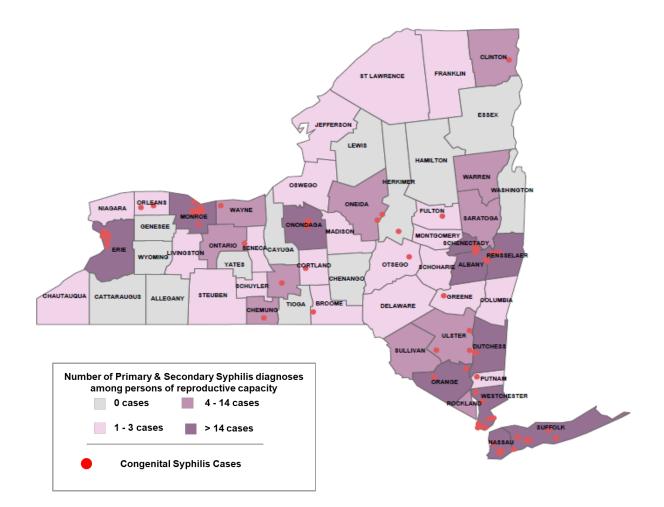
<sup>&</sup>lt;sup>2</sup>https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s\_cid=mm7246e1\_w

<sup>&</sup>lt;sup>3</sup>https://www.health.ny.gov/diseases/communicable/congenital\_syphilis/providers/docs/third\_trimester\_screening\_lett

#### BACKGROUND

Increases in syphilis among those who give birth have resulted in large increases in congenital syphilis – which results from untreated syphilis infection in pregnancy by transmission in utero or during vaginal delivery. In New York State outside of New York City, congenital syphilis cases have been increasing annually since 2016 resulting in the issuance of several health advisories and a Dear Colleague Letter.<sup>4,5,6,7</sup> A multitude of factors contribute to this increase among which include individuals not being able to access prenatal care to receive testing and treatment, and an increase of pregnant persons acquiring syphilis later in pregnancy. However, the main driver of the increases is the result of increasing rates of syphilis. New York State providers and public health professionals successfully avert roughly 70-80% of all possible congenital syphilis cases, which translates to more averted cases every year.

**Figure 1**: Primary and Secondary syphilis diagnoses among persons of reproductive capacity and associated congenital syphilis births in New York State counties outside of New York City, 2013- 2022



<sup>&</sup>lt;sup>4</sup> <u>https://gallery.mailchimp.com/cd1e7395309e0fe2f2e061ccd/files/6c5a2488-b332-40bd-9d41-a58917b3a74e/NYSDOH\_CS\_Advisory\_FINAL\_07162018.pdf</u>

<sup>&</sup>lt;sup>5</sup> https://www.health.ny.gov/diseases/communicable/std/docs/health\_advisory\_syphilis.pdf

<sup>&</sup>lt;sup>6</sup> https://www.health.ny.gov/diseases/aids/providers/health advisories/docs/syphilis increase guidance.pdf

<sup>&</sup>lt;sup>7</sup> https://www.health.ny.gov/diseases/aids/providers/health\_advisories/docs/health\_advisory\_bicillin.pdf

## **CURRENT DATA ON CONGENITAL SYPHILIS AND SYPHILIS-RELATED DEATHS**

**Table 1.** Congenital syphilis diagnoses and infant death(s) by New York State region, 2019-2024<sup>\*</sup>

Region	Congenital syphilis diagnoses (Still births/Infant Deaths)						
	2019	2020	2021	2022	2023	2024*	Total
Buffalo Region	1	1	3	3	1	7(2)	16 (2)
Capital Region	3 (1)	1	5	1	5	3 (2)	18 (3)
Central Region	0	3	1	6 (1)	3	3	16 (1)
Rochester Region	1	2	4 (1)	16 (1)	10	6 (1)	39 (3)
Hudson Valley	3 (1)	4	2	2 (1)	10 (1)	4	25 (3)
Long Island	1	1	2 (1)	4	4	3	15 (1)
Total (outside of New York City)	9 (2)	12	17 (2)	32 (3)	33 (1)	26 (5)	129 (13)

\*2024 data are preliminary and subject to change; includes reported cases from January-October 31, 2024

# **CLINICAL CONSULTATION AND SUPPORT**

The **Clinical Education Initiative Line 1.866.637.2342** is a toll-free number **for clinicians in New York State** to discuss a variety of topics including HIV, Sexual Health, and Drug User Health patient management with a specialist.

- For questions on syphilis in newborns, press 6, then 1, to speak with a pediatric infectious disease specialist.
- For questions on Sexually Transmitted Infections, including syphilis and syphilis in pregnancy, press 6, then 2, to speak with an adult infection disease specialist.

# ACCESS ISSUES

The prevention of congenital syphilis faces numerous challenges, which include:

- individual factors like insurance status and support networks,
- systemic issues such as structural inequalities, limited access to healthcare, and medication shortages,<sup>8</sup>
- syndemics of discrimination, stigma, substance use, mental health, and poverty,
- structural barriers to prenatal care access and utilization including socioeconomic limitations, criminalization of substance use during pregnancy, citizenship status, and low sexual health literacy, and
- healthcare settings factors that may include lack of cultural sensitivity, language, and attitudes toward persons experiencing homelessness or engaging in sex work.<sup>9</sup>

Acknowledging and addressing access issues aims to improve access to syphilis prevention during pregnancy, reduce or eliminate congenital syphilis, and advance health equity.

<sup>&</sup>lt;sup>8</sup> <u>https://www.health.ny.gov/diseases/aids/providers/health\_advisories/docs/health\_advisory\_bicillin.pdf,</u> <u>https://www.health.ny.gov/diseases/aids/providers/health\_advisories/docs/health\_advisory\_bicillin\_guidance.pdf</u>

<sup>&</sup>lt;sup>9</sup> McDonald R, et. al. Vital Signs: Missed Opportunities for Preventing Congenital Syphilis - United States, 2022. MMWR Morb Mortal Wkly Rep. 2023.;Chan, E.Y.L., et. al. A qualitative assessment of structural barriers to prenatal care and congenital syphilis prevention in Kern County, California. PLOS ONE. 2021.; Wagman, J.A., et. al. Understanding perinatal patient's health preferences and patient-provider relationships to prevent congenital syphilis in California and Louisiana. BMC Pregnancy and Childbirth. 2022

## **RESOURCES AND BEST PRACTICES FOR PROVIDERS**

The New York State Department of Health promotes public health efforts that focus on normalizing discussions about sexual health and reducing shame associated with syphilis. It strives for the implementation of a combination of interventions to achieve this goal. This may include public policy changes, provider education, health promotion campaigns/messaging, community engagement efforts, and community-based programming which are critical to raising public awareness, addressing provider bias, and promoting equitable care.

For more information on New York State's efforts to address syphilis during pregnancy and rising congenital syphilis rates as well as information and guidance for providers, please visit: <u>https://www.health.ny.gov/diseases/communicable/congenital\_syphilis/providers/</u> and, <u>https://www.health.ny.gov/diseases/communicable/congenital\_syphilis/</u>

For recommended best practices for preventing syphilis, congenital syphilis, and ensuring equitable access to comprehensive sexual health services, please visit: <a href="https://www.health.ny.gov/diseases/aids/providers/health\_advisories/docs/syphilis\_increase\_gui\_dance.pdf">https://www.health.ny.gov/diseases/aids/providers/health\_advisories/docs/syphilis\_increase\_gui\_dance.pdf</a>

For any questions regarding syphilis screening during pregnancy, please see: <u>Syphilis</u> <u>Screening During Pregnancy: New York State Laws and Regulations Frequently Asked</u> <u>Questions</u><sup>10</sup>

For a one-page summary on syphilis in New York State, please visit: <a href="https://www.health.ny.gov/statistics/diseases/communicable/std/docs/syphilis\_infographic.pdf">https://www.health.ny.gov/statistics/diseases/communicable/std/docs/syphilis\_infographic.pdf</a>

For additional resources please review a previously issued health advisory: <u>Health Advisory:</u> Congenital Syphilis Increasing in New York State (NYS) Outside of New York City (NYC)

<sup>&</sup>lt;sup>10</sup> <u>https://www.health.ny.gov/publications/21452.pdf</u>