



ALERT FOR dermatologists, neurologists, and ophthalmologists Syphilis outbreak across Western Australia

KEY POINTS

- Western Australia is experiencing a syphilis outbreak. From Jan 2014 to Dec 2022 the annual number of infectious syphilis notifications increased nine-fold.
- Consider and test for syphilis in patients presenting with unexplained rashes, ocular or neurological symptoms.
- Testing involves syphilis serology and, where possible, syphilis PCR of an ulcer or lesion. CSF testing may be undertaken for neurological presentations.

Background

- Historically, most syphilis cases occurred in Aboriginal people from regional and remote communities and gay, bisexual and other men who have sex with men in metropolitan Perth.
- While these groups continue to be at increased risk, syphilis notifications are occurring across all populations in WA. Populations disproportionately represented in the current outbreak include:
 - o people experiencing homelessness or insecure housing
 - o people who use methamphetamine and/or inject drugs
 - o culturally and linguistically diverse people
 - o people aged 16-39 years
 - o women of childbearing age (currently 24% of all infectious syphilis notifications in metropolitan Perth and 48% of notifications in regional WA).
- From 2014 to date, 14 congenital syphilis cases have been reported, with four new cases of congenital syphilis reported since 1 January 2022.

Test

- WA Health urges doctors to consider syphilis in patients presenting with unexplained rashes, ocular or neurological symptoms.
- If a person has ulcer(s) or skin lesion, swab the lesion (dry swab) and order a syphilis PCR test, in additional to taking blood for syphilis serology.

- The first line treatment for syphilis is long-acting penicillin (benzathine penicillin, bicillin L-A). This can be ordered through the Doctor's Bag so that it is available at your practice. See www.pbs.gov.au/browse/doctorsbag.
- The number of treatment doses required varies by stage of disease.
- Patients with neurosyphilis require hospital admission and IV penicillin.

Trace

• Re-infection can occur. Therefore, contact tracing should begin as soon as possible so sexual contacts can be followed-up for testing and treatment. Contact your local public health unit for assistance with contact tracing.

For more information

Refer to the Quick guide for testing and treatment of syphilis for more information.

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Access Clinician Alerts at ww2.health.wa.gov.au/Articles/F I/Health-alerts-infectious-diseases