

INFECTIOUS SYPHILIS IN WOMEN OF REPRODUCTIVE AGE, AND CONGENITAL SYPHILIS TRENDS, 2011–2021

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Background:

Mother-to-child transmission of syphilis, called congenital syphilis, can cause serious complications to the developing foetus, including stillbirth. Since 2011 there has been a substantial increase in infectious syphilis rates among young women of reproductive age in Australia. We aimed to describe the notification rates and trends in infectious syphilis in women aged 15–44 years and congenital syphilis, along with the gaps in health care access, syphilis testing and treatment for mothers of infants diagnosed with congenital syphilis.

Methods:

Using national surveillance data (2011–2021), we calculated infectious syphilis notification counts, rates and time trends. Using enhanced congenital syphilis notification data, we calculated case counts, outcomes, and antenatal care history.

Results:

Between 2011–2021 there were 5011 infectious syphilis notifications in women. The notification rate was 9 per 100,000 population, with an upward trend over time ($p < 0.001$). Highest rates were in 15–34-year-old women (11 per 100,000), women living in remote areas (136 per 100,000) and Aboriginal and Torres Strait Islander women (140 per 100,000). There were 74 cases of congenital syphilis, increasing from 6 in 2011 to a peak of 17 in 2020. Rates were highest among Aboriginal and Torres Strait Islander infants (38.3 per 100,000 births in 2021). For congenital syphilis cases, 23% were stillborn, and 56% of mothers resided in major cities, while 43% had not received antenatal care.

Conclusion:

Between 2011–2021, infectious syphilis cases increased in reproductive aged women in Australia, with an associated increase in congenital syphilis. A quarter of infants with congenital syphilis were stillborn. To reduce congenital syphilis numbers, we urgently need to understand barriers to antenatal care and syphilis screening to ensure effective prevention strategies are developed.

Disclosure of Interest Statement:

No disclosure of interest.