

# STI Screening & Treatment In Pregnancy

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# Routine STI Screening in Pregnancy

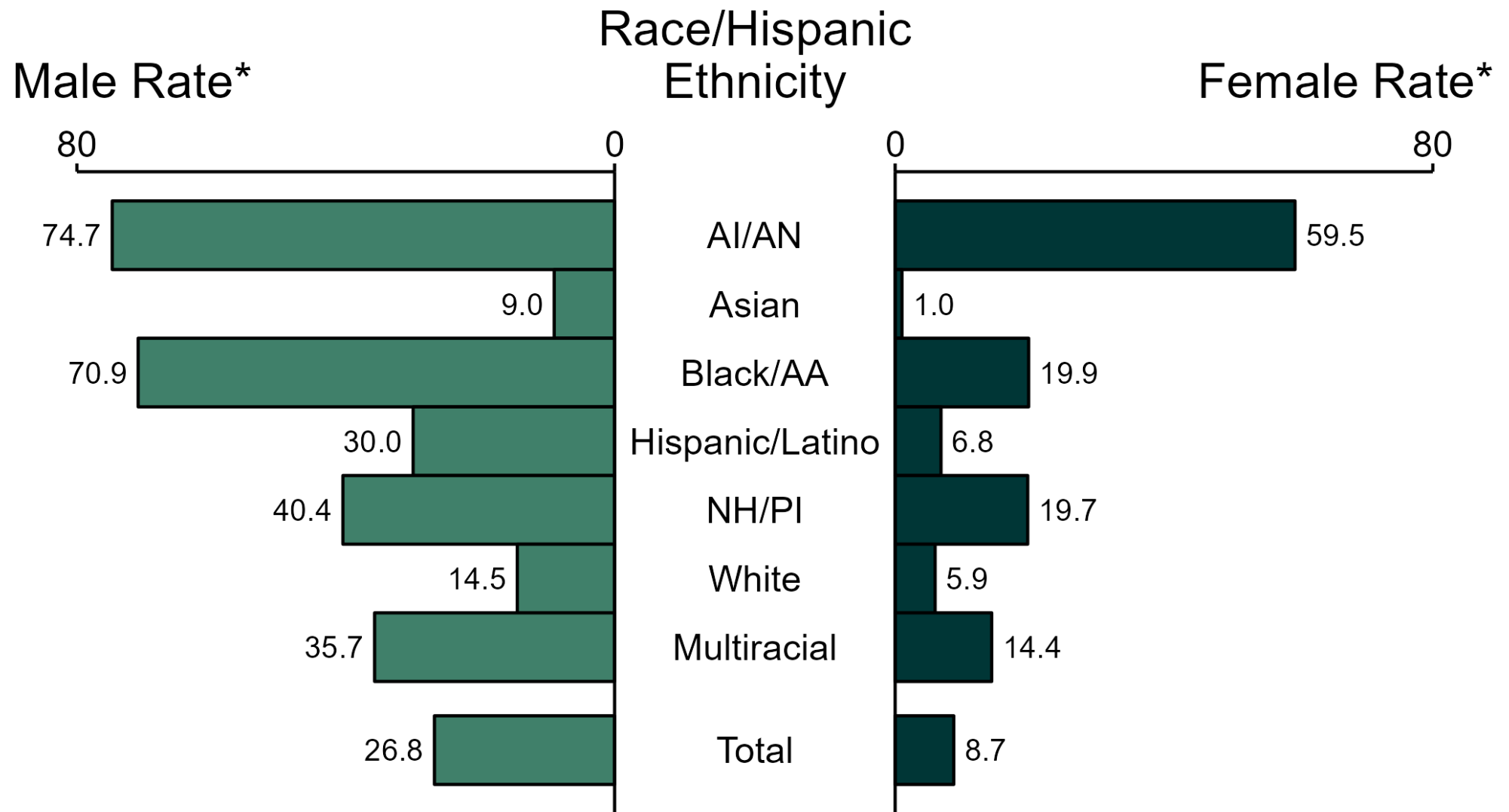
Recommendations for all:

- HIV
- Hepatitis B and C
- Syphilis – triple testing  
(first OB visit, 28 weeks, delivery)
- Chlamydia
- Gonorrhea

If symptomatic:

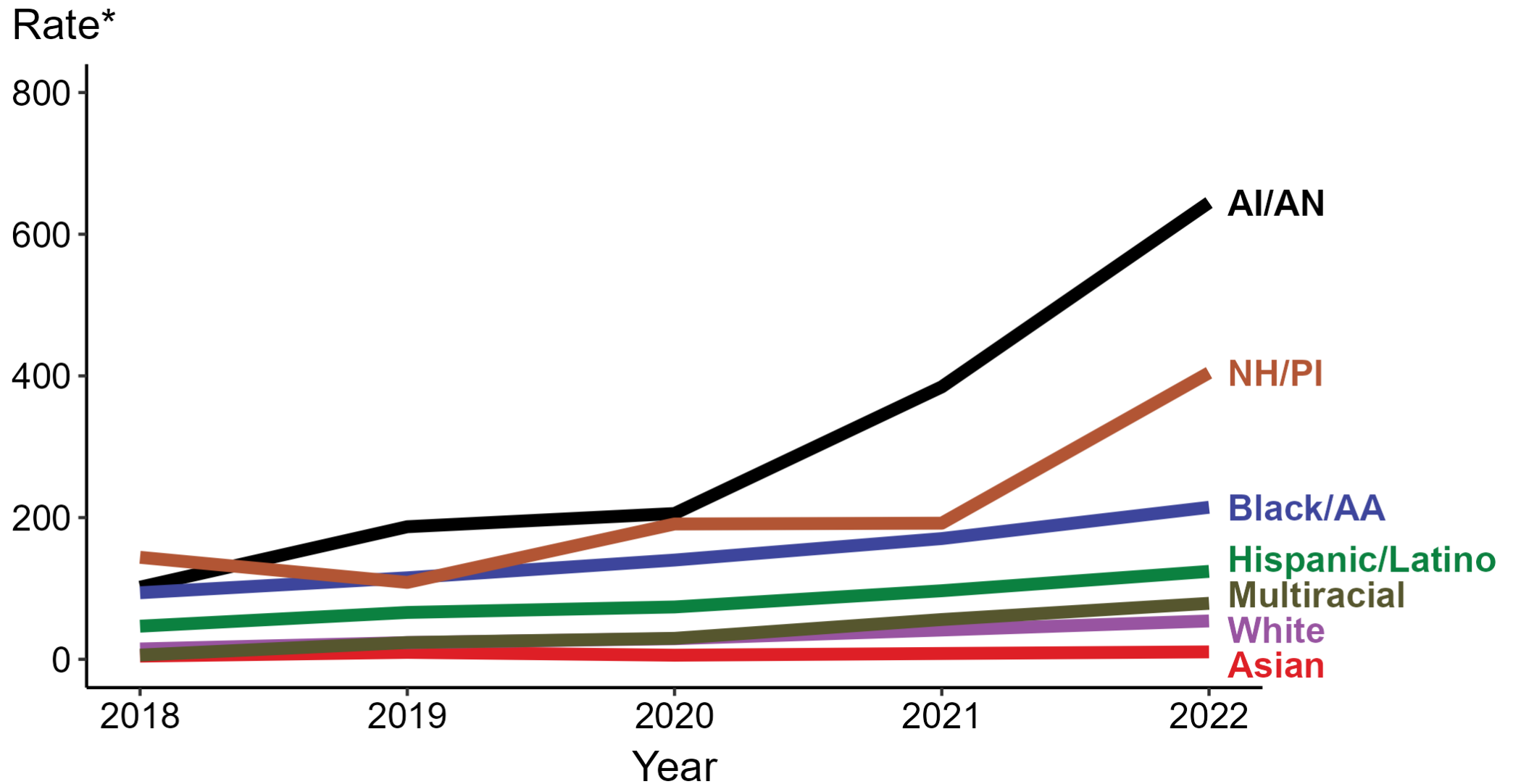
- HSV-1, HSV-2
- Trichomoniasis

# Primary & Secondary Syphilis Cases by Race/Ethnicity (2022)



Primary and Secondary Syphilis – Rates of Reported Cases by Race/Hispanic Ethnicity, United States, 2022 (\* Per 100,000)  
[National Overview – Sexually Transmitted Disease Surveillance, 2022](#)

# Congenital Syphilis is Highest in AI/AN Patients (2018-2022)



Congenital Syphilis – Rates of Reported Cases by Year of Birth, Race/Hispanic Ethnicity of Mother, United States, 2018–2022 (\* Per 100,000)  
[National Overview – Sexually Transmitted Disease Surveillance, 2022](#)

# Congenital Syphilis

Clinical findings in early congenital syphilis are variable:

- 60-90% asymptomatic at birth
- Jaundice, hepatomegaly, rhinitis, rash and desquamation, lymphadenopathy

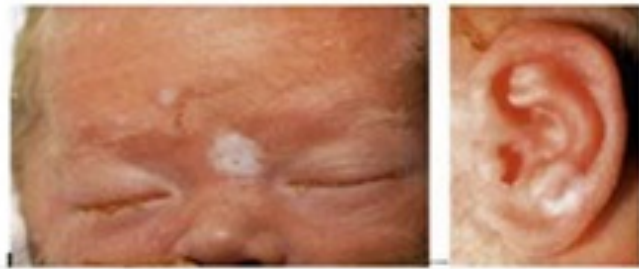
CNS: acute leptomeningitis, chronic meningovascular syphilis

- Hydrocephalus, cranial nerve palsies, optic atrophy, seizures, neurodevelopmental regression

Skeletal abnormalities

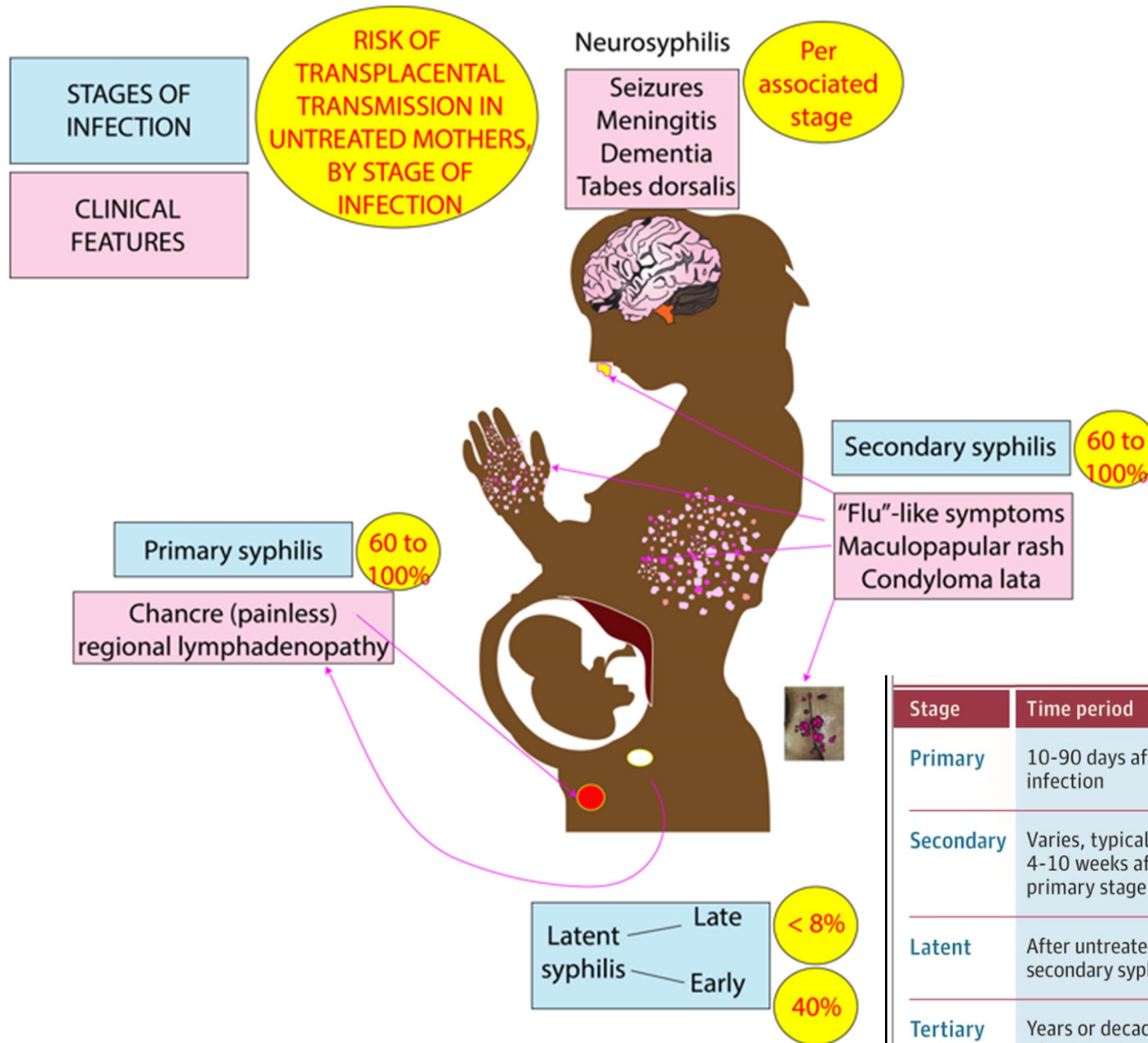
- Osteomyelitis, osteitis, periostitis

Pituitary gland involvement: hypoglycemia or diabetes insipidus





# Syphilis in pregnancy



Stage	Time period	Symptoms
Primary	10-90 days after infection	Painless ulcer (chancre) on the genitals or mouth Typically heals on its own within 3-6 weeks
Secondary	Varies, typically 4-10 weeks after primary stage	Full-body rash (can involve palms of hands and soles of feet) and flu-like symptoms (eg, fever, headache, sore throat)
Latent	After untreated secondary syphilis	No symptoms but the infection is still present Can still be transmitted congenitally
Tertiary	Years or decades after initial infection	May cause damage to the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints May be life-threatening

**Neurosyphilis** (infection of the brain and spinal cord) can occur at any stage and cause meningitis, stroke, hearing loss, blindness, paralysis, and dementia.

Figure from Sankaran et al, Congenital Syphilis—An Illustrative Review; *Children* 2023, 10(8), 1310

# Treatment in Pregnant Patients

Parenteral penicillin is the most effective treatment, only tx in pregnancy

- Superior treatment over doxycycline; treat partner with PCN
- Intramuscular benzathine penicillin G (PBG)
- If allergy – admit for desensitization

Empiric treatment can be provided to patients with vague but consistent symptoms in high-prevalence areas while waiting for lab results

- Even one dose can reduce infectiousness and may be full treatment

Treatment at least 30 days prior to delivery can reverse effects and prevent congenital syphilis