

What You Should Know About Syphilis

Public Health – Factsheet

What is Syphilis?

Syphilis is a sexually transmitted infection (STI) caused by a bacteria that can lead to long-term complications if it is not treated correctly. It can also cause death or serious health issues in an unborn baby if the mother/birthing parent is infected.

How is syphilis spread?

You can get syphilis from direct contact with a syphilis sore during vaginal, anal or oral sex. Sores can be found on the penis, vagina, anus, in the rectum or on the lips and in the mouth.

Syphilis can also be spread from an infected mother/birthing parent to her unborn baby. This is called **congenital syphilis**. Breastfeeding does not pose a risk unless there is a sore on the mother's breast.

Am I at risk for syphilis?

Any sexually-active person can get syphilis through vaginal, anal or oral sex.

How common is syphilis?

Rates of infectious syphilis and congenital syphilis have been increasing. For current information and recent trends visit:

<https://www.gov.mb.ca/health/publichealth/surveillance/stbbi/index.html>

Who should be tested for syphilis?

You should get tested regularly for syphilis if you are sexually active.

If you are pregnant, you should be tested at least three times during your pregnancy.

Testing is quick and simple with a blood test and/or a swab from a syphilis sore. Many people won't have symptoms, or their sores may be difficult to see, so it's important to get tested often if you are sexually active.

Can syphilis be cured?

Yes, syphilis can be cured with the right antibiotics, which are free of charge from your health care provider. However, treatment might not undo any damage the infection has already caused.

What is the treatment for syphilis?

Syphilis is easy to cure in its early stages. A single injection of penicillin, an antibiotic, will cure a person who has had syphilis for less than a year. Additional doses are needed to treat someone who has had syphilis for longer than a year. For people who are allergic to penicillin, other antibiotics are available to treat syphilis.

Follow-up blood tests are required to check that the treatment has worked.

After treatment, you should avoid sex without a condom until 7 days after the completion of treatment and until all syphilis sores are completely healed. You should also avoid sexual contact with your partner(s) until they have been tested and treated if necessary.

Babies with suspected congenital syphilis may need IV treatment with penicillin for 10 days. Your health care provider may refer you to a pediatric specialist for further care.

I've been treated. Can I get syphilis again?

Yes. Having syphilis once does not protect you from getting it again. Even after you've been successfully treated, you can still be re-infected.

Because syphilis sores can be hidden in the vagina, anus, under the foreskin of the penis or in the mouth, it may not be obvious that you or a sex partner has syphilis. Unless you know your status for certain or that your sex partner(s) has been tested and treated, you may be at risk of spreading or getting syphilis again.

How can syphilis be prevented?

If you are sexually active, the following can lower your chances of getting syphilis:

- Correctly use condoms every time you have sex. Condoms prevent transmission of syphilis by preventing contact with a sore. Sometimes sores occur in areas not covered by a condom. Contact with these sores can still transmit syphilis.
- Make sure you and your sexual partner(s) are regularly tested for syphilis. Tell your partner(s) if you have syphilis, and ask them to tell you if they have it.
- Avoid alcohol and drug use that may lead to risky sexual behaviour.

If you have a sore or rash, particularly in the groin area and/or have an unusual discharge from your penis or your vagina, do not have sex and see your health care provider immediately.

How will my health care provider know if I have syphilis?

Most of the time, a blood test is used to test for syphilis. People who have had syphilis will always test positive on some of the blood tests used to diagnose syphilis. Blood tests can tell the difference between a new infection and one that was previously treated.

What You Should Know About Syphilis

How do I know if I have syphilis?

Symptoms of syphilis are divided into stages:

Primary Stage

During the first (Primary) stage, syphilis most often occurs as a single or multiple painless sore(s) at the site where syphilis entered the body. The sore may be inside the vagina, mouth or anus, and can easily go unnoticed.

The sore can last from three to 90 days and heals with or without treatment. Even though the sore goes away, treatment is needed to stop the infection from moving to the secondary stage and from spreading it to others, including your baby if you are pregnant.

Secondary Stage

The most common feature of this stage is a skin rash. The rash can appear anywhere, including on the palms of hands and/or the bottoms of feet. The rash is sometimes so faint that it won't be noticed.

Other symptoms can include fever, skin lesions, swollen lymph glands, a sore throat, patchy hair loss, headaches, weight loss, muscle aches and feeling tired.

The symptoms from this stage will go away with or without treatment but like in the primary stage, treatment should be taken to prevent late stages of syphilis and to prevent infecting others.

Latent and Late Stages

The latent stage of syphilis begins when all of the earlier symptoms disappear. Without treatment, syphilis can continue to infect the body for years without any signs or symptoms. If you get pregnant you can still infect your baby. Within the first year of this stage you can infect sexual partners even without any symptoms.

Late stage syphilis is very serious and can develop 10 to 30 years after the infection began.

Syphilis can invade the nervous system at any stage of infection, and causes a range of symptoms including headache, eye and hearing problems, changed behavior and movement problems. This is called "neurosyphilis". Syphilis can also damage internal organs such as the heart and arteries. This damage can result in death.

Congenital Syphilis

A pregnant mother/birthing parent with any stage of syphilis can infect their unborn baby. Treatment of syphilis early in pregnancy is very effective in preventing syphilis. The earlier the infection is treated, the lower the risk that the baby will be affected by syphilis.

An infected baby may die in the womb (stillbirth), or the baby may be born early with or without birth abnormalities caused by the infection. Babies born with congenital syphilis may have deformed bones, a low blood count, enlarged liver or spleen, yellowing of the skin or eyes (jaundice), brain and nerve problems such as blindness and deafness, infection of the covering of the brain (meningitis) or skin rashes.

Many babies do not have any symptoms when they are first born. However, if the baby does not receive treatment right away, the baby may develop serious health problems within a few weeks.

After two years of age, more serious symptoms can develop including abnormal front teeth, blindness and sudden loss of hearing.

Where can I go to get more information?

For more information and/or if you have any questions, you can talk to your health care provider or call Health Links-Info Santé at 204 788-8200 or toll free at 1-888-315-9257.