

**Addressing the Rise of Congenital Syphilis in California and Louisiana:
Working toward Setting-specific Solutions among High-Risk Pregnant Women**

July 2018

Background

Syphilis is a sexually transmitted infection that can lead to serious health problems if left untreated.¹ Syphilis is transmitted through direct contact with a syphilis sore during vaginal, anal, or oral sex. Sores are often visible on or around the penis, vagina, or anus; and can also be found in the rectum, on the lips, or in the mouth. Syphilis can spread from an infected mother to her unborn baby. This transmission is referred to as congenital syphilis.²⁻⁴

Despite being easy and relatively inexpensive to prevent, rates of congenital syphilis are increasing all over the country. Between 2012 and 2015, there was a 46% increase in congenital syphilis cases in the U.S., representing a critical public health problem.² Although field records, case reviews and epidemiological surveillance data can help public health leaders identify missed opportunities within the health system to prevent congenital syphilis, two notable gaps exist in currently available data. These are the perspectives of women at risk for who congenital syphilis, and medical professionals who provide prenatal care.

Researchers from the University of California San Diego and Tulane University are partnering with officials from the Kern County Department of Public Health, Louisiana Department of Health in Baton Rouge, March of Dimes and the U.S. Centers for Disease Control and Prevention to assess barriers and missed opportunities for screening and treating congenital syphilis in California and Louisiana. As part of this project, we are conducting focus group discussions with pregnant women receiving antenatal care; and in-depth interviews antenatal care providers in Kern County, CA and East Baton Rouge Parish, LA. Findings from this research will be used to improve congenital syphilis prevention efforts in both states and across the nation.

Setting--This study is taking place in two of the hardest hit, high-morbidity counties in the United States, Kern County, California and East Baton Rouge Parish, Louisiana.



KERN COUNTY, CA

An inland region of Southern California, Kern County's population consists primarily of Latino and white residents.⁵ Although only 8.1% of Kern County residents lack health insurance,⁵ the region has the most cases of congenital syphilis in the state and its rates of new infections are 500% higher than the state average.⁶

EAST BATON ROUGE PARISH, LA

This county is located in central Louisiana. The area consists primarily of white and African-American residents.⁷ A total of 10.6% of East Baton Rouge Parish residents lack health insurance.⁷ In 2015, the city of Baton Rouge had the highest number of congenital syphilis cases in the state.⁸



Specific aims of this study are to:

1. Assess knowledge, attitudes, and practices of prenatal care providers regarding congenital syphilis and its prevention.
2. Assess how both prenatal care providers and high-risk pregnant women learn about congenital syphilis, and what resources they utilize to seek information.
3. Evaluate high-risk pregnant women's knowledge of sexually transmitted infections and syphilis, patient decision making regarding the decision to seek prenatal care, and patient use of prevention behaviors prenatally.
4. Seek suggestions for improving outreach to these demographics.
5. Generate and implement culturally appropriate methods of engaging high-risk pregnant women in the use of prenatal healthcare services.

UC SAN DIEGO CENTER ON GENDER EQUITY AND HEALTH

Methods

The 12-month study involves qualitative interviews and focus group discussions (FGD). Specifically, we are conducting 20 in-depth interviews (IDI) with prenatal care providers (10 in California and 10 in Louisiana) to help understand provider knowledge, awareness, and comfort in talking to patients about congenital syphilis. We are conducting 8-10 focus groups discussions (4-5 in each state) with high-risk pregnant women receiving antenatal care. The goal of talking to pregnant women is to assess general attitudes and practices regarding prenatal care, as well as knowledge about congenital syphilis.

FOR MORE INFORMATION

If you would like more information about this study, or to collaborate with us on its success, please contact the Principal Investigator of this research at UC San Diego.

Jennifer A. Wagman, PhD, MHS

Division of Infectious Diseases and Global Public Health
University of California San Diego | Department of Medicine
9500 Gilman Drive, MC 0507
La Jolla, CA 92093-0507
Tel: +1-858-246-3282 | Fax: +1-858-534-7566
Email: KernCountyPathways@gmail.com

Where can I get more information?

Syphilis and MSM - Fact Sheet

<https://www.cdc.gov/std/syphilis/stdfact-msm-syphilis.htm>

Congenital Syphilis - Fact Sheet

<https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.htm>

STDs during Pregnancy - Fact Sheet

<https://www.cdc.gov/std/pregnancy/stdfact-pregnancy.htm>

STD Information and referrals to STD Clinics

CDC-INFO Contact Center

1-800-CDC-INFO (1-800-232-4636)

TTY: (888) 232-6348

Contact CDC-INFO

<https://www.cdc.gov/dcs/ContactUs/Form>

Source: Syphilis – CDC Fact Sheet

<https://www.cdc.gov/std/syphilis/Syphilis-June-2017.pdf>

REFERENCES CITED

1. Workowski KA, Bolan GA. Sexually transmitted diseases treatment guidelines, 2015. *MMWR Recomm Rep* 2015; 64 (No. RR-3).
2. Bowen V, Su J, Torrone E, Kidd S, Weinstock H. Increase in incidence of congenital syphilis - United States, 2012-2014. *MMWR Morb Mortal Wkly Rep*. 2015 Nov 13;64(44):1241-5. doi:10.15585/mmwr.mm6444a3.
3. World Health Organization. Investment case for eliminating mother-to-child transmission of syphilis: promoting better maternal and child health and stronger health systems. 2012. WHO Press. ISBN 97892 4 150434 8
4. Morbidity and Mortality Weekly Report (MMWR). Dear Colleague Letter - Congenital Syphilis. November 12, 2015. Accessed from: <https://www.cdc.gov/std/dstdp/dcl-csmmw- nov-12- 2015.pdf>
5. U.S. Department of Commerce. U.S. Census Bureau QuickFacts: Kern County, California. Census Bureau QuickFacts, www.census.gov/quickfacts/fact/table/kerncountycalifornia/HEA775216#viewtop.
6. Corson, Michelle. "Babies Born With Syphilis on Rise in Kern County." Kern County Public Health Services, Public Health Dept. of Kern County, 15 Apr. 2016, kernpublichealth.com/babies-born-syphilis-kern-county/.
7. U.S. Department of Commerce. U.S. Census Bureau QuickFacts: East Baton Rouge Parish, Louisiana. Census Bureau QuickFacts, www.census.gov/quickfacts/fact/table/eastbatonrougeparishlouisiana/HEA775216.
8. Louisiana Department of Health. Region 2--Baton Rouge STD/HIV Update. DDH Office of Public Health STD/HIV Program, 18 May 2016.