

Sex and Gender Differences

SYPHILIS



Syphilis is a **sexually transmitted infection (STI)** caused by the bacteria *Treponema pallidum* that can cause severe symptoms and health problems.

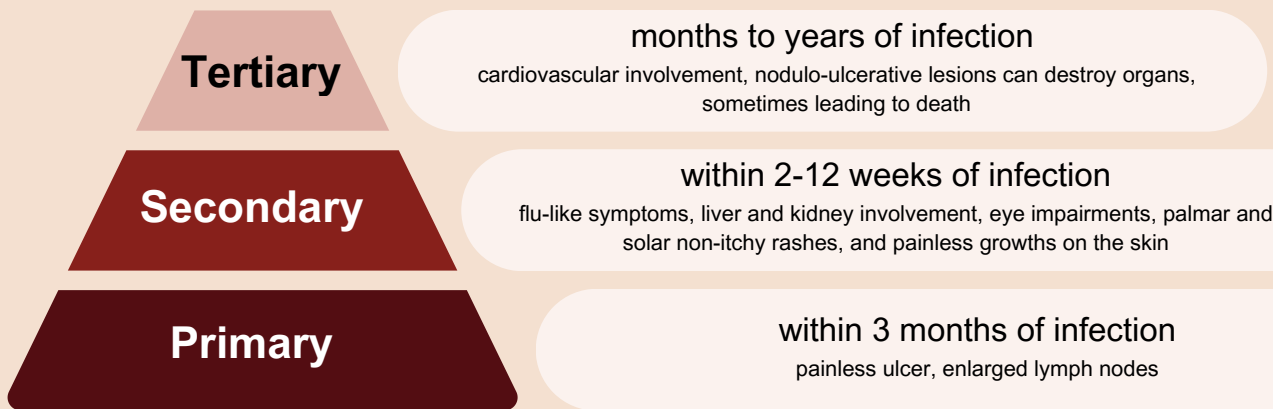
Risk Factors

- Multiple sexual partners
- Previous **STI(s)**
- **HIV+** (**h**uman **i**mmunodeficiency **v**irus)
- Recreational drug use
- Unprotected anal intercourse
- Men who have sex with men

2.3 females vs 16.9 males infected per 100,000 people

Clinical Presentation

- Syphilis progresses through stages if untreated

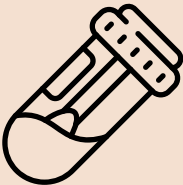


- Untreated primary syphilis can lead to asymptomatic, infectious, latent phase
- **Males more commonly have a co-infection with HIV:**
 - **More severe symptoms**
 - **Increased risk of neurosyphilis**
- **Pregnancy:**
 - Increased risk of: miscarriage, stillbirth, neonatal death, fetal growth restriction
 - **Congenital syphilis** (caused by vertical transmission) can cause long-term health problems, including seizures, dental abnormalities, lower leg bowing, deafness

Transmission

- Transmission modes: blood, placenta, skin-to-skin, and sexual contact
 - Rare modes: unscreened organ/bone transplants, artificial insemination
- Contagion occurs early, bacteria may stay dormant 3-90 days (average is 21 days)
 - Primary and secondary syphilis rashes are highly contagious

Diagnostics/Screening

FEMALE	ALL	MALE
<ul style="list-style-type: none">• Pregnancy:<ul style="list-style-type: none">◦ Screen at first prenatal visit and in third trimester◦ Additional screen at delivery if mother is high risk (engaged in risk factor(s) above)• 7.4% of females are screened in the ED• Females less likely to be diagnosed due to vaginal/cervical lesions	<ul style="list-style-type: none">• Screen every 3-6 months<ul style="list-style-type: none">◦ Those engaged with risk factor(s) (listed above)◦ HIV positive patients 	<ul style="list-style-type: none">• Men who have sex with men: Annual screening• 48.9% of males are screened in the ED• Males diagnosed more frequently and faster due to visibility of penile lesions

Treatment

- Penicillin: Preferred for all stages
 - If allergic, desensitize before treatment
- Pregnancy: Penicillin is the only option
- Men who have sex with men: doxycycline can prevent infection
- **Males are more likely** to be treated due to higher screening and diagnosis rates

