

Syphilis

What is syphilis?

Syphilis is a curable sexually transmitted disease (STD). It is caused by *Treponema pallidum*, a type of bacteria called a spirochete. The spirochete first causes a sore called a *chancre* and then spreads throughout the body. Syphilis progresses through four stages: *primary*, *secondary*, *latent*, and *tertiary (late)*.

How many people get syphilis?

The rate of syphilis in the United States has been relatively low for many years with about 33,000 new cases annually.

How is syphilis transmitted?

Syphilis is passed from person to person through direct contact with a syphilis sore during oral, vaginal or anal sex. Because syphilis sores can be hidden in the vagina, rectum or mouth, it may not be obvious that a sex partner has syphilis. Transmission does not occur after the secondary stage of syphilis. A pregnant woman can also transmit syphilis to her unborn baby (congenital syphilis).

What are the symptoms?

Each stage of syphilis has different symptoms. Even if a person does not notice symptoms, he or she still has the disease which can progress to the next stage.

- **Primary Syphilis** - The first symptom of syphilis is a single, raised sore called a chancre. It usually appears on the genitals, mouth, or rectum an average of 3 weeks after exposure. When the chancre is on the penis or near the vagina, lymph nodes in the groin may also become swollen. Because the sore is painless, many people may ignore it unless it becomes infected. The sore can last for several weeks and go away by itself. Without treatment, however, the person still has syphilis which can progress to the *secondary stage*.
- **Secondary Syphilis** - This stage usually starts with a reddish-brown, spotted rash on one or more areas of the body, but most often on the palms of the hands or soles of the feet. The rash usually does not itch and can appear as the chancre is healing or several weeks after the chancre has gone away. The rash may come and go for up to two years. Other common symptoms may include swollen lymph nodes, fever, fatigue, patchy hair loss, weight loss, and headache. These symptoms usually last from 2 to 6 weeks and will clear up with or without treatment. If untreated, the disease will still be present and will then enter into the *latent stage*.
- **Latent Syphilis** - The latent stage of syphilis begins when secondary symptoms disappear. During this stage, syphilis becomes *latent*, which means it shows no signs or symptoms. The infection can be detected only by a blood test. A relapse of secondary syphilis can occur during the first two years of latency. If not treated, latent syphilis continues for life and may progress to the final *tertiary stage*.
- **Tertiary (late) Syphilis** - About one-third of people without treatment suffer serious damage to the nervous system, heart, brain, or other organs. Tertiary syphilis can cause paralysis, mental problems, blindness, deafness, heart failure, and even death.

Individuals who are co-infected with HIV can progress more rapidly to this late stage. Though treatment at this phase will cure the disease and stop future damage, it cannot repair or reverse the damage that occurred before treatment.

- **Congenital Syphilis** - A mother infected with syphilis can pass the disease to her unborn child during pregnancy. A newborn infected in this way has congenital syphilis.

Many cases of syphilis infection during pregnancy result in miscarriage or stillbirth. Surviving babies may have serious, even fatal, problems of the brain, liver, and other organs. Sometimes congenital syphilis is silent at birth but shows up later in childhood or even in the adult years.

What happens if I have syphilis?

If untreated, syphilis will progress through the primary, secondary, latent and perhaps tertiary stages. Treatment stops the infection, but if organ damage has already occurred--especially in tertiary syphilis--the damage cannot be repaired. Serious health problems may continue. If you are HIV-positive and have syphilis sores, there is 2 – 5 times greater risk of giving HIV to your partner.

How do I avoid getting syphilis?

The only sure way to avoid syphilis and other STDs is to not have sex (abstinence).

If you do have sex:

- Talk with your partner(s) about syphilis and other STDs. Work out a plan to reduce risks that feels comfortable to you both.
- Have sex with one partner who is uninfected and has sex only with you (mutual monogamy)
- Have sex with fewer people. More partners = more risk.
- Use male or female condoms the right way and every time you have sex. *Condoms must cover the actual sores to prevent transmission. They can protect the penis and vagina but may not prevent skin contact with sores on other parts such as the scrotum or anal area.*
- Don't have sex if you see an unusual sore or rash on you or your partner's body.
- If you think *you* might have syphilis (or any STD), seek care at a local STD clinic, hospital, or with your health care provider.

If you have syphilis (or any STD), tell each of your sex partners so they can get treated also. Do not have sex with a partner who has syphilis until he or she completes treatment.

How do I find out if I have syphilis?

Syphilis can be detected by blood tests or by testing fluid taken from lesions or swollen lymph nodes. Sometimes a spinal tap is necessary to check for syphilis in the spinal fluid. This is especially important when syphilis has been present longer than a year, when previous treatment has failed, or if infection may have spread to the nervous system.

How is syphilis treated?

Primary and secondary stages of syphilis can usually be cured with a single injection of penicillin. Infection longer than a year or infection of the nervous system usually requires several doses of penicillin over time.

- Important information about treatment

- There are no home remedies or over-the-counter drugs that will cure syphilis.
- **Never** treat yourself with old, leftover antibiotics or pills from home.
- Do not have sex until you and each of your sex partners have been treated and cured. It is possible to pass syphilis back and forth. If you get treated and your partner doesn't, you may get infected again.
- Follow-up - Even though symptoms go away, it may take more than one single treatment to completely cure the infection. It is very important to have repeat blood tests 3 months, 6 months, and a year after treatment to be sure the treatment worked.

Having syphilis once does not protect you against getting syphilis again.

How does syphilis affect pregnancy?

A pregnant mother who is infected with syphilis can transmit the disease to the unborn infant. This is most likely if the mother has primary or secondary syphilis when pregnant. Depending on how long a pregnant woman has been infected, she may have a high risk of having a stillbirth or giving birth to a baby who dies shortly after birth.

An infected baby may not have symptoms at birth, so routine, pre-natal screening is the best way to diagnose syphilis. Without treatment, the baby may develop serious birth defects such as damage to the heart, brain, and bones as well as blindness.

Since damage to a fetus due to syphilis can be prevented, it is very important for women to get tested early in their pregnancy. Pregnant women can be treated to prevent transmission or damage to the unborn baby.

For more help

- Washington State HIV/HEPC/STD hotline - (800) 272-AIDS (2437) - Testing and treatment resources and information.
- American Social Health Association STI Resource Center - (919) 361-8488 - STI/STD information.
- Centers for Disease Control National STD/HIV Hotline - (800) CDC-INFO (232-4636) Spanish (800) 344-7432, TTY (800) 243-7889 - General information on many health topics including STDs and HIV.

More information

- [Syphilis fast facts](#) (American Social Health Syphilis Information)
- [Syphilis fact sheet](#) (Centers for Disease Control)
- [Syphilis information](#) (Planned Parenthood)

