



October 9, 2009

Dear Syphilis Elimination Coordinators:

As we enter the final quarter of another year, the SEE Coordination Team sends each of you best wishes and thanks for another a great season! We hope you find these updates and resources helpful for your SE and STD prevention activities.



African American MSM Consultation

To further engage external partners in the development of strategies to address the high rates of STDs among African Americans, the STD Prevention Disparities Workgroup has instituted a series of consultation conference calls with external stakeholders. The August 31 consultation conference call focused on identifying approaches to reduce STDs among African-American men who have sex with men (MSM), a population experiencing increasing rates of infectious syphilis. Participants made several recommendations including assessment of state and local STD clinics' adherence to CDC screening guidelines for MSM populations; promotion of effective STD prevention messages about the STD-related risks associated with oral sex; and identification of venues where African-American men gather (e.g., barbershops) to disseminate prevention messages. External stakeholders stressed the need for individual-level interventions tailored to African-American men, in general, to better reach those who have sex with men but do not identify as gay or bisexual. Detailed reports from these consultations are forthcoming.

IOWA Electronic Health Markets (IEhM)– The Syphilis Prediction Market



The Syphilis Prediction Market is currently underway with participants providing real-time estimates of anticipated syphilis activity and trends! There is a long history of using prediction markets to predict elections, product sales, and most recently infectious diseases like seasonal flu. We invite and encourage all of you to [join the markets for syphilis](#); on enrollment you will be given \$100 to buy shares that correspond to your prediction or your answer to a specific question. For example, one market is set up to predict the total number of P&S syphilis cases expected in the U.S. this quarter. Currently, there are 23 traders participating, and most are predicting between 3,451 and 3,550 syphilis cases. The shares for this prediction are selling at the highest price of \$0.46 per share. If the actual number of P&S syphilis cases for the quarter falls in that range, share owners will receive \$1 for each share that they purchased. The markets can be a bit confusing at first, so we encourage you to just jump in, get an account, and begin trading. You cannot lose money, because IEhM provides you with the \$100. We need your help to get the markets going and to determine if this can be utilized as a successful tool in SE efforts! For more information about the Syphilis Prediction Market, please contact [Tom Peterman](#) or [Fred Bloom](#).

Evidence-based Action Plans (EBAP) Review

The [EBAP](#) subcommittee of the SE Implementation and Monitoring Group recently finished reviewing all of the action plans for the SE HMAs and p-HMAs. Thorough reviews were sent to the program consultants, and these will be included in your Technical Review documents. This year, project areas will receive only one set of reviews that include comments from both reviewers about your entire set of EBAPs. We hope this is a more streamlined and efficient approach. Please refer to the reviews for comments, recommendations, and information about available technical assistance.

CDC-Developed Resources & Updates

[Erythromycin \(0.5%\) Ophthalmic Ointment Shortage](#)

CDC has issued guidance on the shortage of erythromycin ophthalmic ointment (0.5%), the recommended prophylaxis for ophthalmia neonatorum. Updates on the shortage and adverse events are on the [STD Treatment Guidelines home page](#).

[Addressing Social Determinants of Health: HIV/AIDS, Viral Hepatitis, STD and TB – Meeting Report](#)

NCHHSTP convened an external consultation to identify key short- and long-term priorities for addressing social determinants of HIV/AIDS, viral hepatitis, STDs, and tuberculosis that are appropriate for NCHHSTP to undertake.

Recent MMWR Publications

[Sexual and Reproductive Health of Persons Aged 10-24 Years – United States, 2002-2007](#)

This report presents data for 2002 – 2007 concerning the sexual and reproductive health of persons 10 – 24 years of age in the United States. Data were compiled from the National Vital Statistics System and multiple surveys and surveillance systems that monitor sexual and reproductive health outcomes into a single reference report that makes this information more easily accessible to policy makers, researchers, and program providers who are working to improve the reproductive health of young persons in the United States. The report addresses three primary topics: 1) current levels of risk behavior and health outcomes; 2) disparities by sex, age, race/ethnicity, and geographic residence; and 3) trends over time.

[Clinic Based Testing for Rectal and Pharyngeal Neisseria gonorrhoeae and Chlamydia trachomatis Infections by Gay-Focused Community-Based Organizations — 5 U.S. Cities, 2007](#)

CDC recommends screening of at-risk men who have sex with men (MSM) at least annually for urethral and rectal gonorrhea and chlamydia, and for pharyngeal gonorrhea. Although the standard method for diagnosis is culture, nucleic acid amplification (NAA) testing is generally more sensitive and favored by most experts. NAA tests have not been cleared by the Food and Drug Administration for the diagnosis of extragenital chlamydia or gonorrhea and may not be marketed for that purpose. However, under U.S. law, laboratories may offer NAA testing for diagnosis of extragenital chlamydia or gonorrhea after internal validation of the method by a verification study. To determine sexually transmitted disease testing practices among community-based organizations serving MSM, CDC and the San Francisco Department of Public Health gathered data on rectal and pharyngeal gonorrhea and chlamydia testing at screening sites managed by six gay-focused community-based organizations in five U.S. cities during 2007. This report summarizes the results of the study. A corresponding [Dear Colleagues Letter](#) was also distributed.

Additional Resources

[NAACHO STI/HIV Toolkits](#)

NACCHO's Toolbox is a free service available for public use and is intended to promote and advance public health objectives. The Toolbox consists of useful public health-related tools for STD and HIV prevention, including information sheets, evidence-based interventions, guides, and practical applications.

As always, should you have any further questions or suggestions we are eager to hear from you. Please contact Jo Valentine directly at (404) 639-8366 or via electronic mail at jvalentine@cdc.gov.

The CDC Syphilis Elimination Effort Coordinating Team

