



Embargoed for Release: Thursday October 7, 1999 4 P.M. EST

Contact: NCHSTP Office of Communications 404-639-8895

Syphilis Continues to Retreat: Nation Sets Sights on Elimination
CDC Reports All-Time Syphilis Lows and Concentration in 1% of U.S. Counties

Syphilis rates have declined an additional 19 percent in 1998 paving the way toward a nation's goal of elimination. The national rate of 2.6 cases per 100,000 population, a drop from 3.2 cases in 1997, is the lowest level ever recorded, according to new data released today by the Centers for Disease Control and Prevention (CDC).

Less than one percent of U.S. counties account for half of reported syphilis cases. The October 8, 1999 CDC *Morbidity and Mortality Weekly Report* documents that half of all new syphilis cases are concentrated in 28 counties¹, mainly in the South and selected urban areas in other regions (*county and state data attached*). The ten counties with the highest number of syphilis cases reported in 1998 are home to the following cities (in descending order by number of cases reported): Baltimore (Independent City), Chicago (Cook County), Memphis (Shelby County), Nashville (Davidson County), Phoenix (Maricopa County), Detroit (Wayne County), Indianapolis (Marion County), Atlanta (Fulton County), Dallas (Dallas County), and Los Angeles (Los Angeles County). Researchers report that lower infection rates and geographic concentration signal continued progress toward syphilis elimination.

"At the close of this century, we have a brief window of opportunity to eliminate one of the public health threats we've been battling the longest," stressed Jeffrey Koplan, M.D., M.P.H., director of CDC. "But if we don't take the opportunity now, we will lose our chance. Another peak in syphilis cases is inevitable unless elimination becomes a reality."

CDC data indicates that African Americans are 34 times more likely to be reported with syphilis than whites (with rates of 17.1 cases per 100,000 and 0.5 cases per 100,000, respectively). Remarkably, the gap has narrowed from rates as much as 64 times higher

in the earlier part of this decade, but the continued burden of disease among African Americans remains extremely high.

"Syphilis is a completely preventable disease that can be cured with one dose of penicillin, yet it takes a staggering toll on the African-American community," stressed Helene Gayle, M.D., M.P.H., director of CDC's National Center for HIV, STD, and TB Prevention (NCHSTP). "Syphilis remains one of the most glaring examples of racial inequities in health status facing this nation. We can and must commit to breaking the cycle of syphilis once and for all."

Syphilis elimination efforts are critical to improving infant health, slowing the spread of HIV infection, and reducing racial disparities in health. Untreated syphilis during pregnancy results in infant death in up to 40 percent of cases, and nearly two-thirds of cases of congenital syphilis are among African Americans. Moreover, syphilis accelerates the spread of the HIV epidemic. The presence of syphilis increases the chances of both acquiring and spreading HIV infection at least two- to five-fold.

To move the nation toward its goal of syphilis elimination, CDC has initiated new efforts targeting 33 states and cities² with either a heavy burden of syphilis or a high potential for re-emergence of syphilis. In addition, Nashville, Indianapolis, and Raleigh were selected as short-term demonstration sites to evaluate and refine national strategies for elimination efforts.

U.S. Surgeon General David Satcher, M.D., Ph.D., CDC Director Jeffrey P. Koplan, and other national and local public health and political leaders will join in an event today in Nashville, to announce the new efforts as the first steps in a national plan to eliminate syphilis.

In the National Plan for Syphilis Elimination, CDC has identified the key strategies needed for elimination, including: expanding surveillance and outbreak response in each community, rapid screening in and out of medical settings, expanded laboratory services, improved agency partnerships, and enhanced community awareness and involvement in syphilis prevention.

"The time is now to eliminate syphilis from the United States," said Judith Wasserheit,

M.D., M.P.H., director of NCHSTP's Division of STD Prevention. "No American should suffer from syphilis. Every stillborn baby, every infant infected, every man and woman infected with HIV because of syphilis should remind us of our obligation to eliminate this disease."

¹ Baltimore and St. Louis are among the 28, but are independent cities and are not located within a county jurisdiction.

²Alabama, Arizona, Arkansas, Baltimore, California, Chicago, Connecticut, Florida, Georgia, Illinois, Indiana, Kentucky, Los Angeles, Louisiana, Maryland, Massachusetts, Michigan, Mississippi, Missouri, New Jersey, New York City, North Carolina, Ohio, Oklahoma, Philadelphia, Puerto Rico, San Francisco, South Carolina, Tennessee, Texas, Virginia, Washington DC, and Wisconsin

###