



February 14, 2019

Dear Colleagues,

Today, the Centers for Disease Control and Prevention (CDC) published a [new analysis in \*Morbidity and Mortality Weekly Report \(MMWR\)\*](#) finding **drug use more than doubled among heterosexuals with syphilis from 2013-2017**. CDC simultaneously released a detailed [Syphilis Surveillance Supplement](#) with tables presenting data on reported risk behaviors and characteristics for primary and secondary (P&S) syphilis cases for these same years. To better understand recent and significant increases in syphilis rates among heterosexuals nationally, the MMWR article analyzed self-reported risk behaviors of women and men who have sex with women (MSW) diagnosed with P&S syphilis from 2013-2017. The data showed a substantial spike in methamphetamine, injection drug, and heroin use over the five-year period. Specifically:

- The proportion of women and MSW with syphilis who report **they used methamphetamines** during the past 12 months increased from 6.2% to 16.6% and from 5.0% to 13.3% respectively.
- The proportion of women and MSW with syphilis who report that they **used heroin** during the past 12 months increased from 2.1% to 5.8% and 0.8% to 2.7% respectively.
- The proportion of women and MSW with syphilis who report that they **injected drugs** during the past 12 months increased from 4.0% to 10.5% and from 2.8% to 6.3% respectively.

For women with syphilis, use of these drugs increased in every region and were notably highest in the West for both men and women. Of note:

- More than 1 in 3 female cases (35%) AND 1 in 4 MSW cases (25%) in the West used methamphetamines in the last 12 months.
- 1 in 5 female cases in the West used injection drugs (21%) in the last 12 months.

These data suggest a merging of two epidemics: heterosexual syphilis and drug use.

**Confronting these intersecting epidemics will require collaboration on all fronts.** These public health dangers are not happening separately and neither can our work. STD programs should identify opportunities to partner with substance use disorder prevention and treatment programs, as well as harm reduction programs and other organizations providing services to people with substance use disorders in the local community. For example:

- STD programs – such as health department STD clinics or Disease Intervention Specialists – can integrate screening for substance use disorders and link to drug use prevention and treatment services, when needed.
- Substance use disorder and harm reduction programs and other community-based organizations can integrate screenings for syphilis/other STDs, link to treatment services when needed, promote safer sex practices, and distribute condoms.

Steps such as these move us closer towards the more holistic care our patients and clients need —care that takes us beyond a diagnosis to consider who a person is, what circumstances they face, and how those circumstances may affect their risk. These considerations are essential to breaking an endless cycle that endangers the health and wellbeing of too many.

CDC's flagship STD prevention funding for state and local health departments, known as [STD PCHD](#) (or Strengthening STD Prevention and Control for Health Departments) provides a pathway for supporting these and other related activities. For instance:

- Action-oriented collaboration and strategic partnerships – with governmental and non-governmental partners at the national, state and local levels – are encouraged for all STD prevention and control activities.
- Health departments are also well positioned to analyze and use data for program improvement. We encourage all jurisdictions to look at these data locally to design screening programs for substance use disorders in STD programs and STD screening and prevention services in substance use disorder programs.

**CDC is committed to understanding syphilis increases in the U.S. – and how to tackle it.** The [U.S. is experiencing steep and sustained increases in reported STDs in recent years](#), including syphilis. In 2017, there were more than 100,000 cases of syphilis of any stage reported, including 30,644 cases of P&S syphilis, the earliest, most infectious stages. Rates are the highest seen in 20 years, and since 2013, rates of P&S syphilis have increased 73 percent overall, 66 percent among men, and 156 percent among women. [Congenital syphilis also continues to surge.](#)

This analysis is just one way CDC is working to determine why syphilis is trending in the wrong direction, and we will continue to turn over every stone to learn more.

We know that fighting syphilis is challenging – and that decades of progress have come with a price. Fewer healthcare providers are familiar with it, and too many Americans believe it's a disease of the past. The tools to detect it are outdated—and having only one recommended drug compounds issues such as drug shortages. Stigma also remains within communities and the healthcare system.

Despite these obstacles, we must all rise to the challenge. The findings of this report are concerning; however, they also present a prevention opportunity to reach Americans caught in the middle of two troubling epidemics. Let's seize this opportunity together.

Thank you for your commitment to STD prevention.

Best Regards,



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Centers for Disease Control and Prevention

## Resources

- [Full MMWR](#): Increased Methamphetamine, Injection Drug, and Heroin Use among Women and Heterosexual Men with Primary and Secondary Syphilis — United States, 2013–2017
- [Syphilis Surveillance Supplement](#): presents surveillance data on reported behaviors and characteristics among reported P&S syphilis cases in the U.S. during 2013-2017; data tables and slides also available

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