

This fact sheet summarizes 2011 data on chlamydia, gonorrhea, and syphilis published in CDC's annual report, *Sexually Transmitted Disease Surveillance, 2011* (available at www.cdc.gov/std/stats). The data are based on state and local STD case reports from a variety of private and public sources which indicate that the majority of cases are seen in non-STD clinic settings, such as private physician offices and health maintenance organizations.

Many cases of chlamydia, gonorrhea, and syphilis continue to go undiagnosed and unreported, and data on several additional STDs — such as human papillomavirus, herpes simplex virus, and trichomoniasis — are not routinely reported to CDC. As a result, the annual surveillance report captures only a fraction of the true burden of STDs in America. However, it provides important insights into the scope and trends of this hidden epidemic.

STDs Inflict Significant Human and Economic Costs

STDs are a significant health challenge facing the United States. CDC estimates that nearly 20 million new sexually transmitted infections occur every year in this country, half among young people ages 15–24. Each of these infections is a potential threat to an individual's immediate and long-term health and well-being. In addition to increasing a person's risk for HIV infection, STDs can lead to severe reproductive health complications, such as infertility.

STDs are also a serious drain on the U.S. health care system, costing the nation almost \$16 billion in health care costs every year.

Snapshot: STDs in the United States, 2011

Chlamydia

- Cases reported in 2011: 1,412,791
- Rate per 100,000 people: 457.6; increase of 8% since 2010
 - This rise is most likely due to increased screening, expanded use of more sensitive tests and more complete national reporting

Gonorrhea

- Cases reported in 2011: 321,849
- Rate per 100,000 people: 104.2; 4% increase since 2010
 - Though rates remain at near-historic lows, this is the second consecutive year of increases

Syphilis (primary and secondary)

- Cases reported in 2011: 13,970
- Rate per 100,000 people: 4.5; unchanged from 2010
 - The overall steady trend masks declining infections among women and increases among men, particularly gay and bisexual men

Syphilis (congenital)

- Cases reported in 2011: 360
- Rate per 100,000 live births: 8.5; 7% decrease since 2010
 - Since 2008, the rate has decreased by nearly 20 percent



Some Groups Bear a Disproportionate Burden of STDs

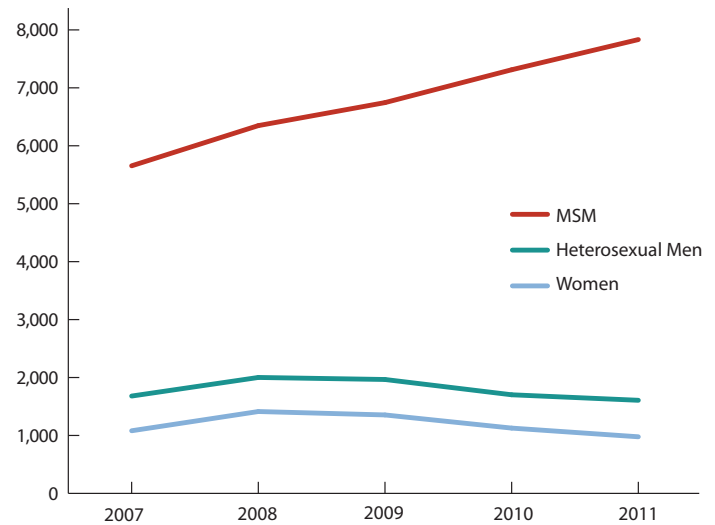
While anyone can become infected with an STD, certain groups, including gay and bisexual men and young people, are at greatest risk.

Troubling rise in syphilis infections among gay, bisexual, and other men who have sex with men (MSM)

Trend data available for the first time show that men who have sex with men (MSM)* now account for nearly three quarters (72 percent) of all primary and secondary syphilis cases. Primary and secondary syphilis are the most infectious stages of the disease, and if not adequately treated, can lead to visual impairment, stroke, and in rare cases, even death. Surveillance data from several major cities throughout the country indicate that an average of 4 in 10 MSM with syphilis are also infected with HIV. Syphilis infection can place a person at increased risk for HIV infection, or increase an HIV-infected person's viral load. Given the high prevalence of HIV in the MSM community, increasing syphilis infections among men who have sex with men are particularly troubling.

Risk behavior alone does not explain the disproportionate levels of infection among gay and bisexual men. Complex issues like homophobia and stigma also can make it difficult for gay and bisexual men to seek appropriate care and treatment.

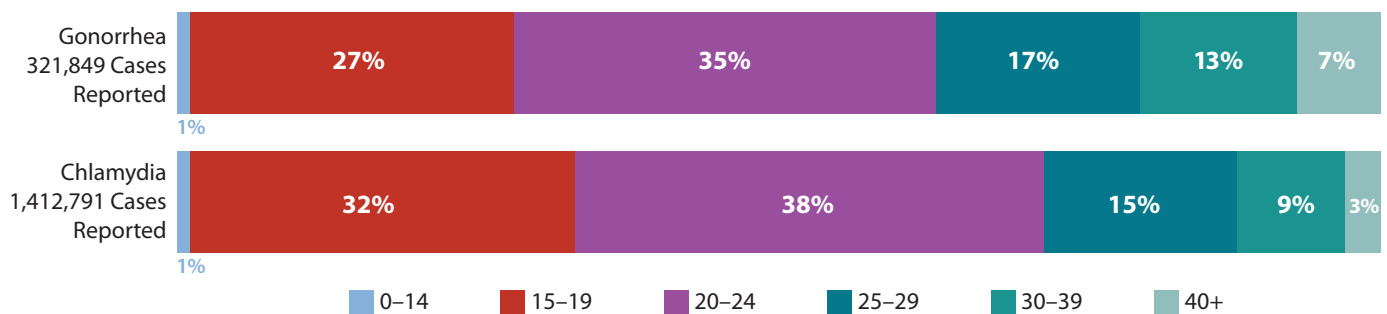
Gay and Bisexual Men Face Highest — and Rising — Number of Syphilis Infections



Gonorrhea and chlamydia primarily affect young people

Surveillance data continues to show that numbers and rates of reported chlamydia and gonorrhea cases are highest in Americans between the ages of 15 and 24.

Most Reported Chlamydia and Gonorrhea Infections Occur among 15–24-Year-Olds



Percentages may not add to 100 because ages were unknown for a small number of cases.

Both young men and young women are heavily affected by STDs — but young women face the most serious long-term health consequences. Left untreated, these diseases can silently steal a woman's chance to have children later in life; it is estimated that undiagnosed STDs cause 24,000 women to become infertile each year.

*The term men who have sex with men is used in CDC surveillance systems because it indicates the behaviors that transmit infection, rather than how individuals self-identify in terms of their sexuality.

CDC Screening Recommendations

- Annual chlamydia screening for all sexually active women age 25 and under, as well as older women with risk factors such as new or multiple sex partners.
 - Yearly gonorrhea screening for at-risk sexually active women (e.g. those with new or multiple sex partners, and women who live in communities with a high burden of disease).
 - Syphilis, HIV, chlamydia, and hepatitis B screening for all pregnant women, and gonorrhea screening for at-risk pregnant women at the first prenatal visit, to protect the health of mothers and their infants.
- Screening at least once a year for syphilis, chlamydia, gonorrhea, and HIV for all sexually active gay men, bisexual men, and other men who have sex with men (MSM). MSM who have multiple or anonymous partners should be screened more frequently for STDs (i.e., at 3 to 6 month intervals). In addition, MSM who have sex in conjunction with illicit drug use (particularly methamphetamine use) or whose sex partners participate in these activities should be screened more frequently.

Source: CDC. Sexually Transmitted Diseases Treatment Guidelines, 2010. *MMWR* 2010;59(No. RR-12).

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Other information requests may be directed to the Division of STD Prevention (**www.cdc.gov/std**) or the CDC-INFO Contact Center: 1-800-CDC-INFO (1-800-232-4636) or **cdcinfo@cdc.gov**.