

Syphilis

Overview

Syphilis is a sexually transmitted infection (STI) that is caused by a bacterium called *Treponema pallidum*.

Symptoms usually begin as a painless ulcer (open sore) on the private parts. Some weeks later a rash develops on the body, and may involve the palms of the hands and the soles of the feet.

Syphilis has 4 classifications: primary, secondary, latent, or tertiary syphilis, depending on the amount of time a person has been infected, and their symptoms.

In some people who are not treated, syphilis can progress to cause very serious illness which may not develop until decades after initial infection.

Syphilis is usually transmitted by through sexual contact with an infected person who has sores or a rash from syphilis on their body. Syphilis can also be passed from a mother to her unborn child during pregnancy. Because syphilis causes open sores on the private parts, it increases the risk of catching other sexually transmitted infections, such as HIV.

Syphilis is diagnosed through a blood test, and it can be cured with antibiotics.

Causes

Syphilis bacteria are usually transmitted through sexual contact with an infected person who has moist sores or a rash from syphilis on his or her body.

A woman who is infected with syphilis can also transfer the infection to her unborn baby.

However, if syphilis is detected in a woman during pregnancy, there is a safe and effective treatment that can be used to stop the infection from being passed on.

Symptoms

Symptoms depend on the stage of infection. Primary syphilis develops an average of 21 days after exposure to syphilis bacteria and causes:

- A single ulcer at the site of infection (e.g. in the vagina, or on the penis or mouth). This ulcer is rounded in shape, and is not painful. It usually gets better by itself after about 3-6 weeks.

Secondary syphilis usually develops 4-8 weeks after primary syphilis develops.

Symptoms may include:

- Headache, a general feeling of being unwell, fever and sore throat.
- A scaly, non-itchy rash on the trunk of the body, the soles of the feet, and the palms of the hands. The rash may be flat against

the skin, or have raised bumps, or be a combination of both.

- Painless marks or ulcers on the lips and inside the mouth.
- Problems with the nervous system, such as meningitis.
- Latent syphilis is present when a person with a syphilis infection has no symptoms. Syphilis infection can remain latent for many years.

Tertiary syphilis develops in up to one-third of people with untreated syphilis. It can develop many years after a period of latent syphilis, and it occurs when the bacterium responsible for the syphilis infection spreads through the cardiovascular system, central nervous system, skin, eyes, and other organs. Tertiary syphilis is rare in Australia.

Examples of possible symptoms of tertiary syphilis include:

- Problems with vision.
- Hearing loss.
- Weakness of the facial muscles.
- Lesions or odd lumps or growths on the bones, skin, and to the tissues of the lips, nostrils, eyes, vagina, anus (back passage), and the opening of the penis.

Babies born with syphilis are said to have congenital syphilis.

Symptoms include:

- Rhinitis (the 'sniffles').
- Rash.
- Problems with the bones in the nose and shins.
- Being born smaller in size than expected.
- Syphilis can be fatal to unborn babies and pregnant women with it should be treated.

Diagnosis

If your doctor suspects that you have an STI such as syphilis he or she will ask you some questions about your symptoms and about your past sexual activity.

This is important information that will help the doctor know which tests to do.

Syphilis is diagnosed using a blood test that shows whether you have been exposed to the bacteria that cause syphilis. If it is a very new infection, repeat blood tests may need to be collected.

Syphilis can also be diagnosed by taking a swab of the moisture from one of the sores on your body to send for testing although this may not be available everywhere (PCR testing).

Treatment options

Syphilis is treated with daily or weekly injections of penicillin (an antibiotic).

The dose and number of injections depends on the stage of the disease. Treatment can consist of a single injection, or it can involve daily injections given for 15 days.

If you have an allergy to penicillin an antibiotic called doxycycline is used, which is given for 14-28 days.

If you are diagnosed with syphilis it is very important that you inform all your sexual partners about your infection, and encourage them to seek medical advice.

Lifestyle

If you are currently being treated for syphilis:

- Do not have sex with anyone until your doctor says your infection has cleared up. Syphilis is very contagious.
- Don't drink any alcohol until your antibiotic treatment has finished, because this will reduce its effectiveness.

Once your syphilis has been treated successfully, you can make sure you are not re-infected by using safe sex practices.

To practice safe sex:

- Use a condom whenever you have sex involving the penis (this includes oral sex).
- Use condoms correctly (follow the directions on the pack).
- Use a dental dam for oral-vaginal or oral-anal sex. (A dental dam is a very thin piece of latex you can buy from some chemists and sexual health services).

Other ways to prevent infection include:

- Not having sex.
- Only having sex with a partner or partners who you know have been tested for any STIs.
- Get tested for STIs as soon as possible after having unprotected sex with someone you suspect might have an STI.

Resources

For more information about STIs and safe sex see the following websites:

- Safe Sex No Regrets (WA AIDS Council): www.safesexnoregrets.com.au.
- NSW Sexual Health Infoline: www.stipu.nsw.gov.au/shil or call 1800 451 624.
- Sexual Health, HIV AIDS, and Viral Hepatitis (Queensland Health): www.health.qld.gov.au/sexhealth
- The Drama Down Under (STIs in Gay Men Action Group; note that this site contains some explicit language) www.the.dramadownunder.info

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Sources

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