

California's High Priority STD Cases: What does 2016 tell us?

Rilene A. Chew Ng, MPH, DrPH

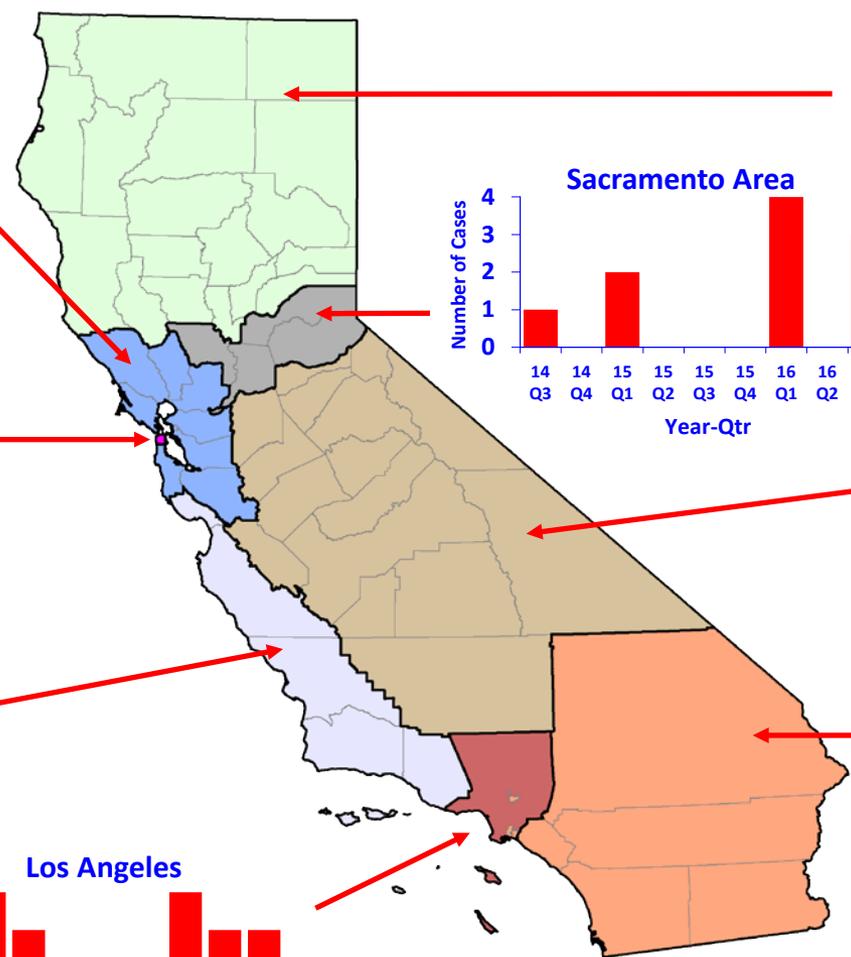
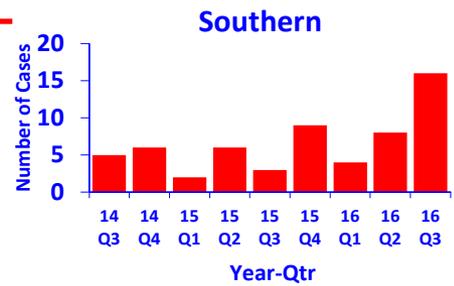
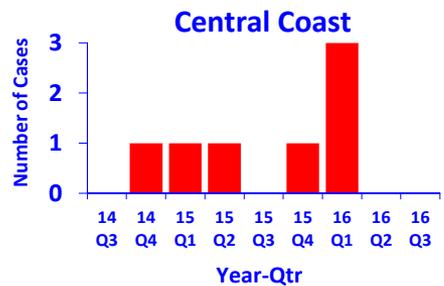
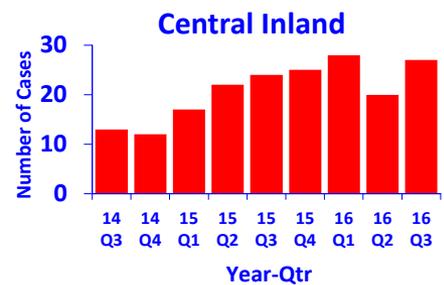
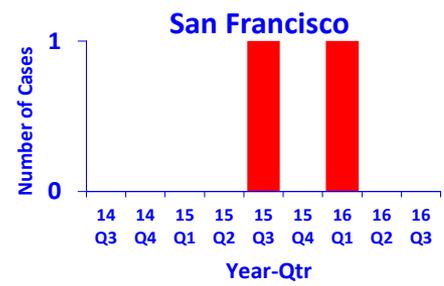
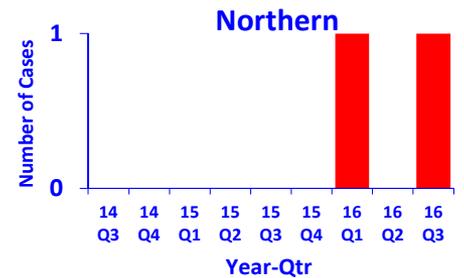
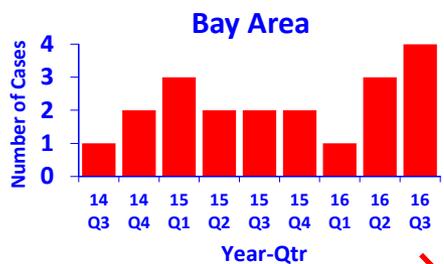
Nicole Burghardt, MPH, Joan Chow, DrPH

California Department of Public Health, STD Control Branch

California Syphilis Prevention Summit, Los Angeles

Jan 10, 2017

Number of Congenital Syphilis Cases by Region and Year-Quarter of Birth

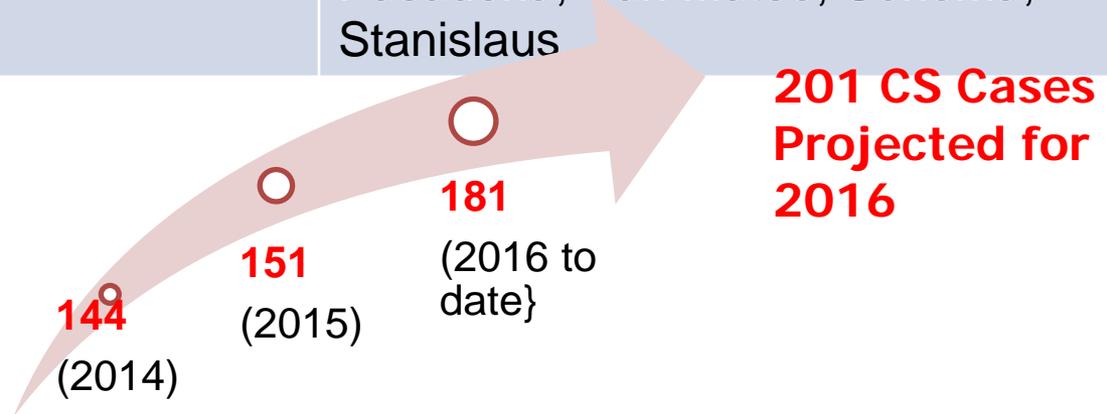


CS Cases



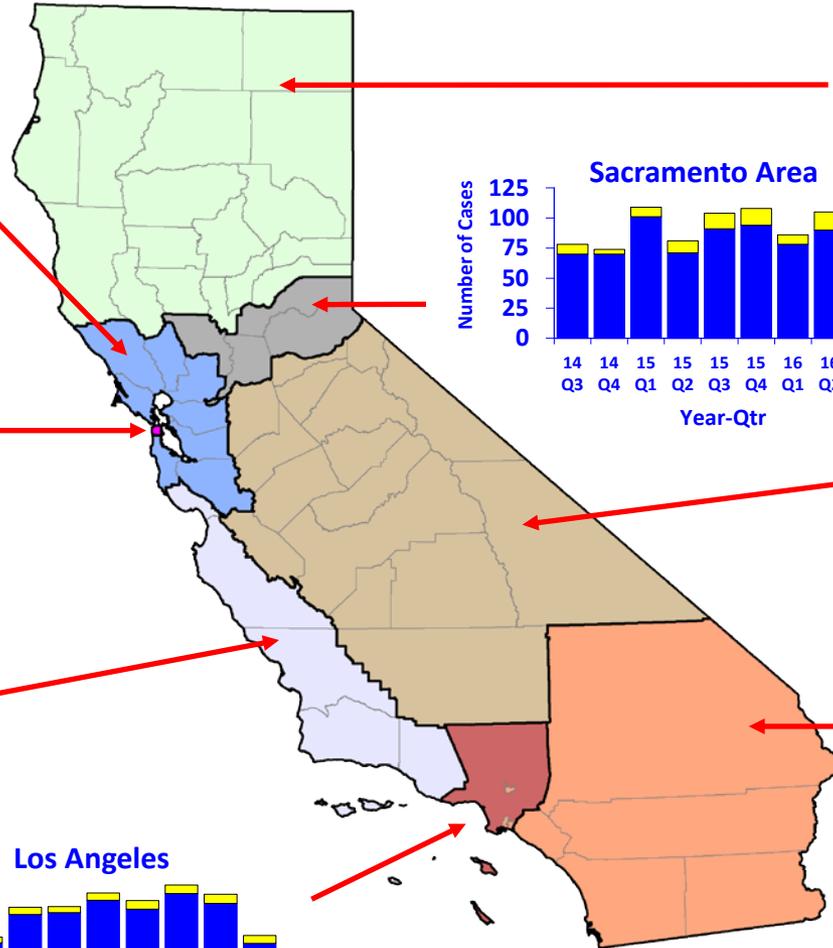
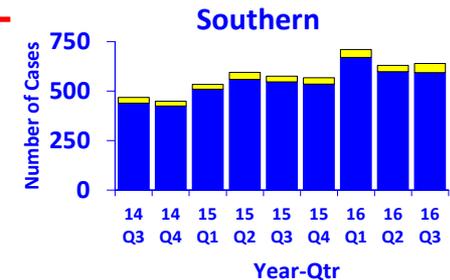
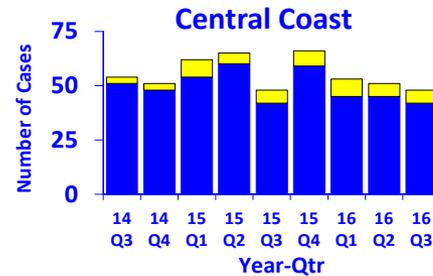
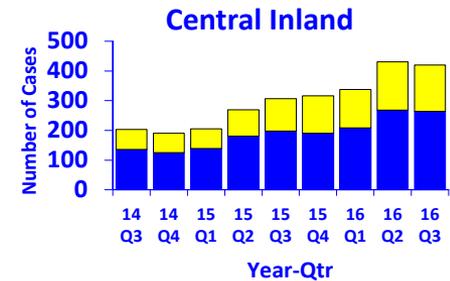
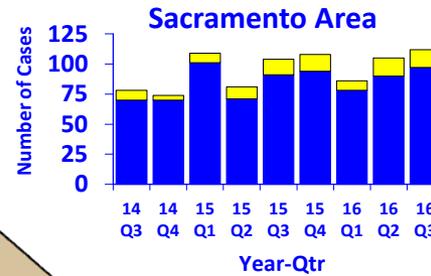
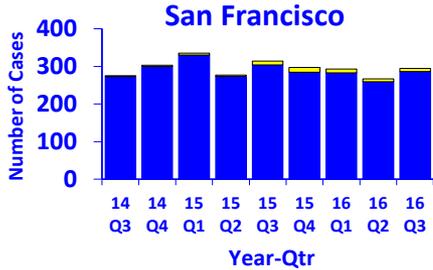
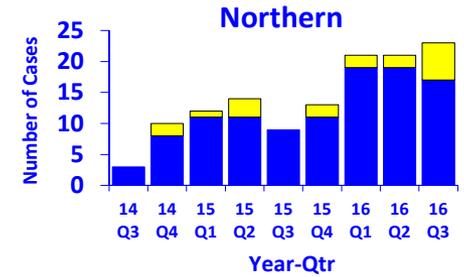
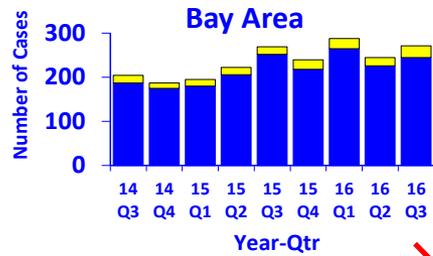
ONE CS case is a sentinel event at the local level

CS case trends in 2016*	Local Health Jurisdictions
Zero to 1+ cases	Butte, Colusa, Contra Costa, Kings, Long Beach, Riverside, Sacramento, San Bernardino, Santa Barbara, Santa Clara, San Francisco, Tulare, Tuolumne, Ventura
High morbidity	Fresno, Kern, LA, San Joaquin
Decreases	Alameda, Imperial, Monterey, Pasadena, San Mateo, Sonoma, Stanislaus



*As of case reports received January 4, 2017

Number of Early Syphilis† Cases by Region, Gender, and Year-Quarter



† Early syphilis includes primary, secondary and early latent syphilis

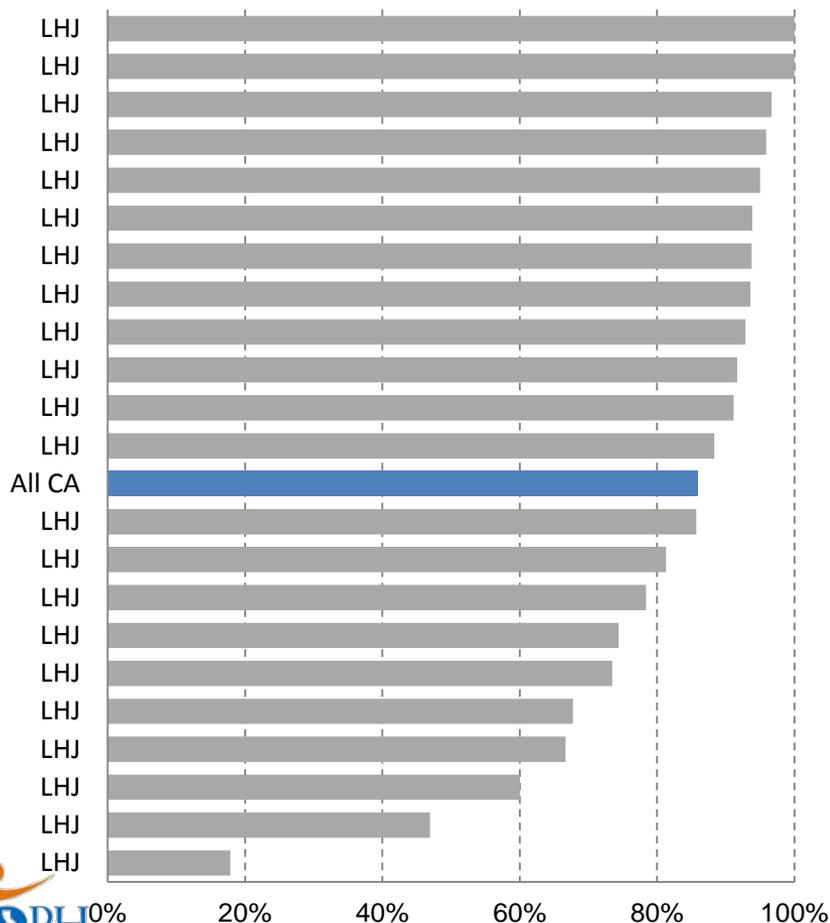
Provisional Data (Rev. 12/2016)

STD Control Branch

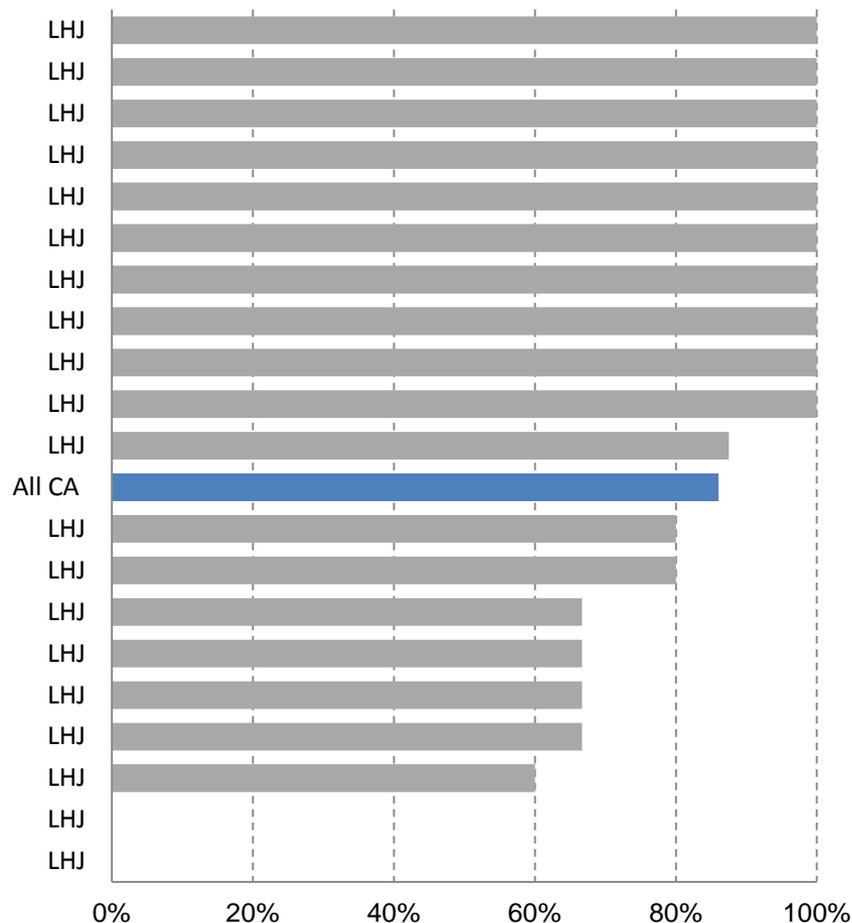


Completeness of pregnancy status, Females of reproductive age (15-44) diagnosed with syphilis in California, Q1-Q3 2016

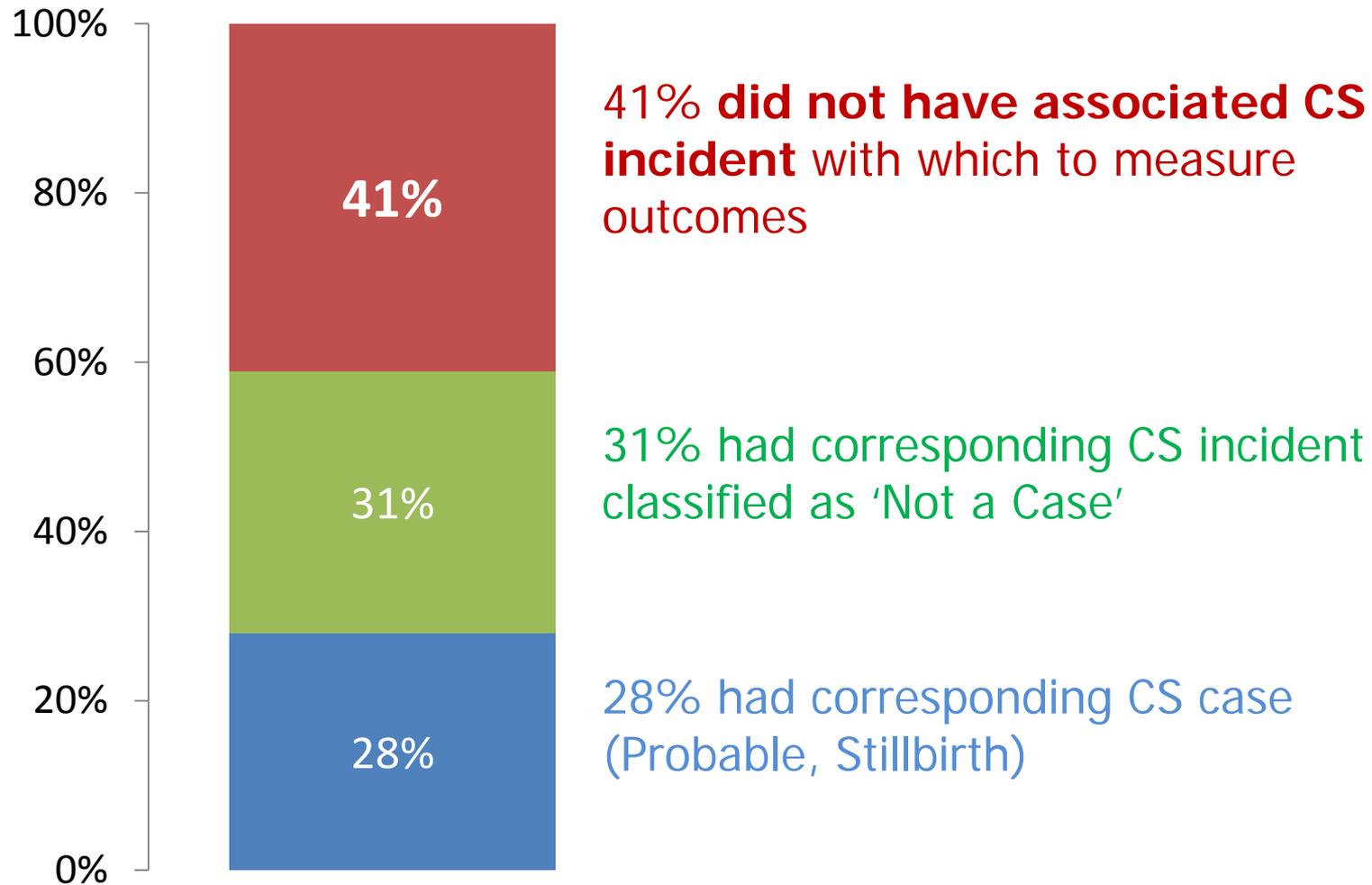
**LHJs with ≥ 10 female cases
(range 10-352 cases)**



**LHJs with < 10 females cases
(range 1-8 cases)**



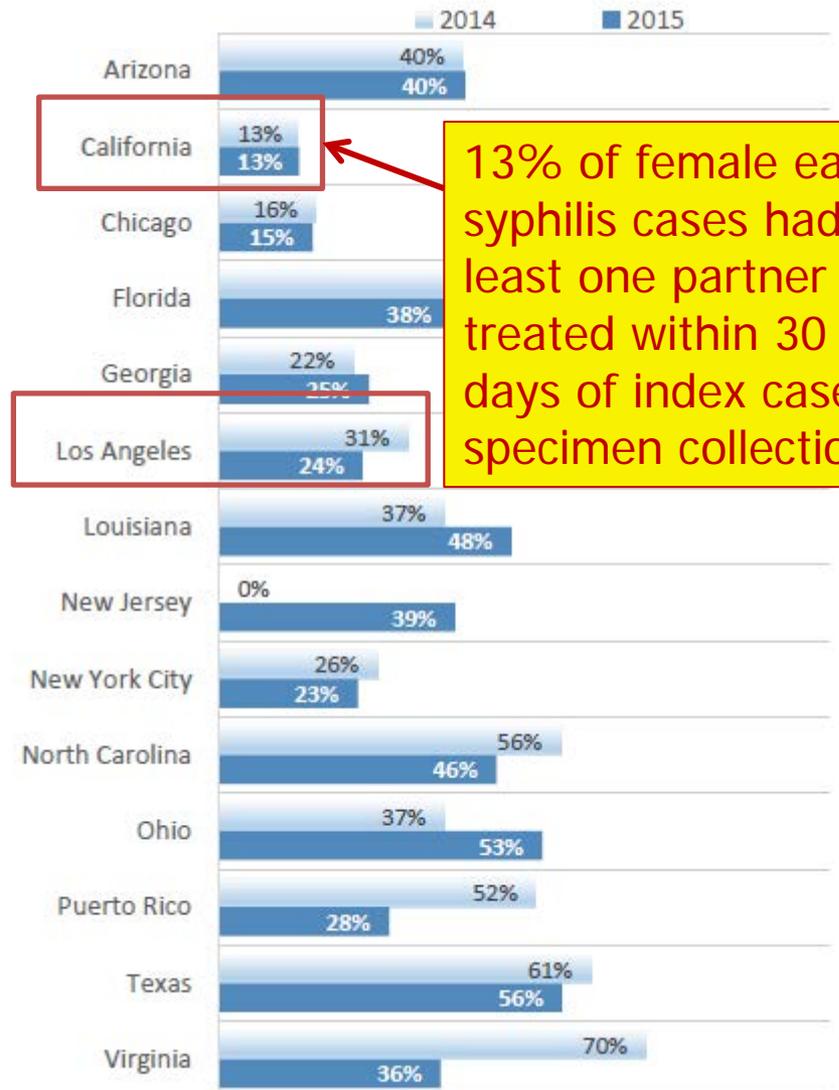
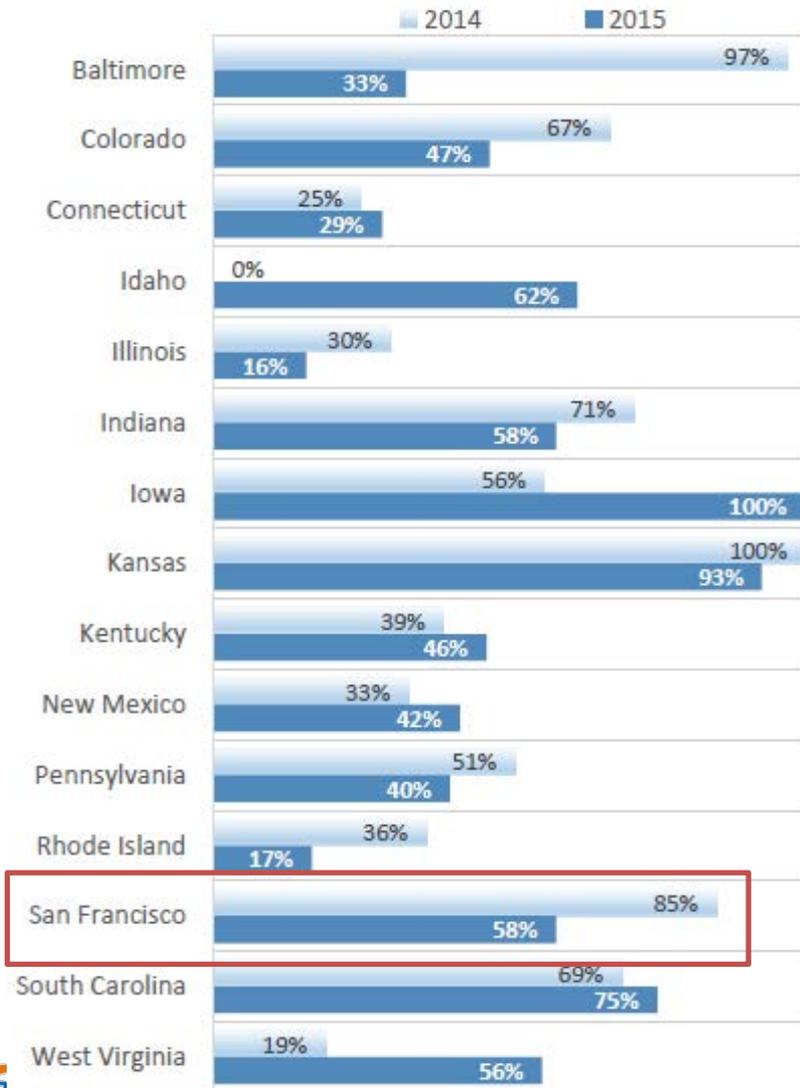
Birth outcomes for pregnant* female syphilis cases diagnosed in CPA, 2015 (n=399)



* 'Pregnant female' criteria: 1) PREGNANT=YES, or 2) female case with associated CS incident in CalREDIE (regardless of pregnancy status)

Partner treatment for female early syphilis cases, 2014-2015

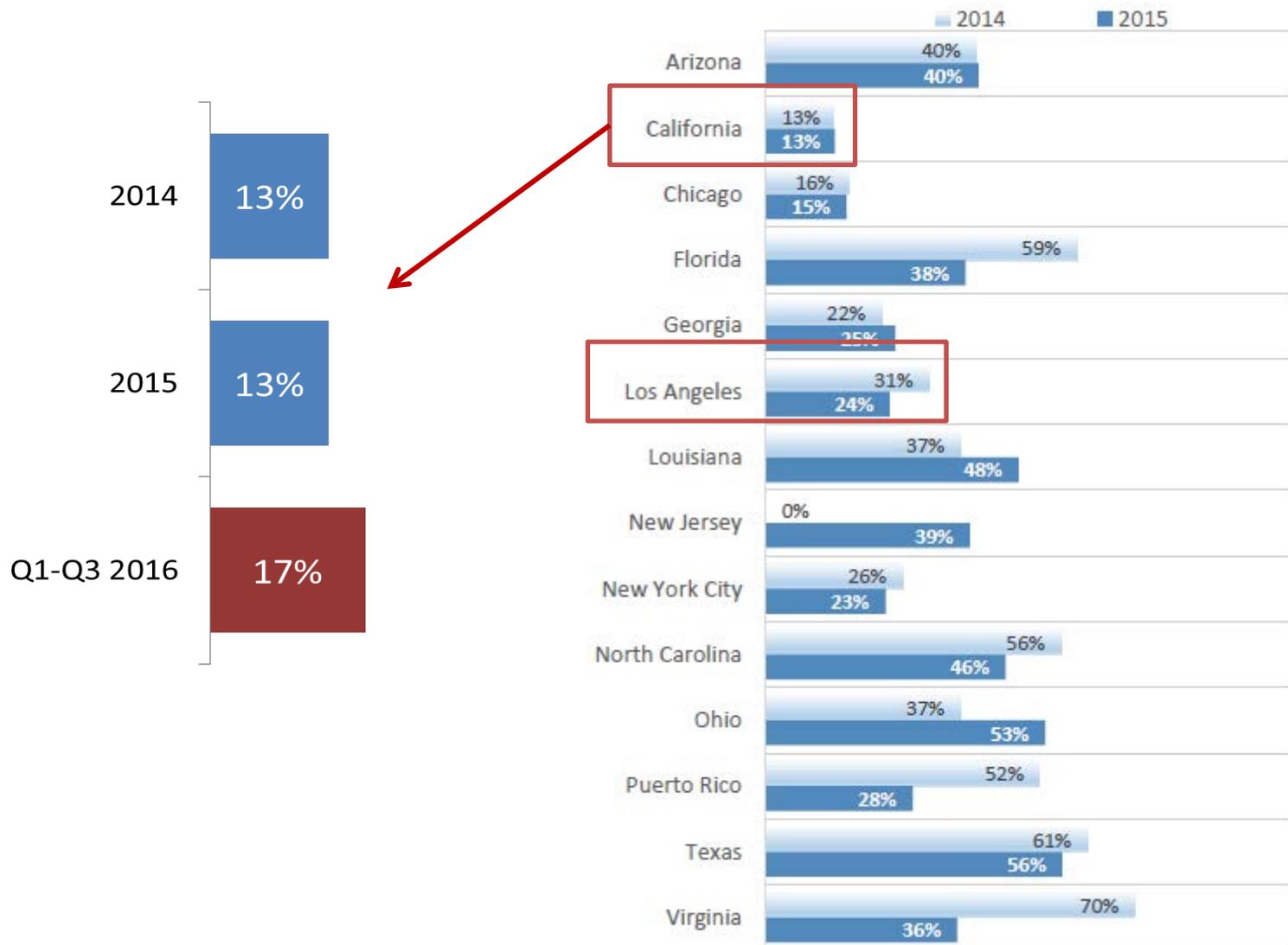
How does California measure up?



13% of female early syphilis cases had at least one partner treated within 30 days of index case specimen collection

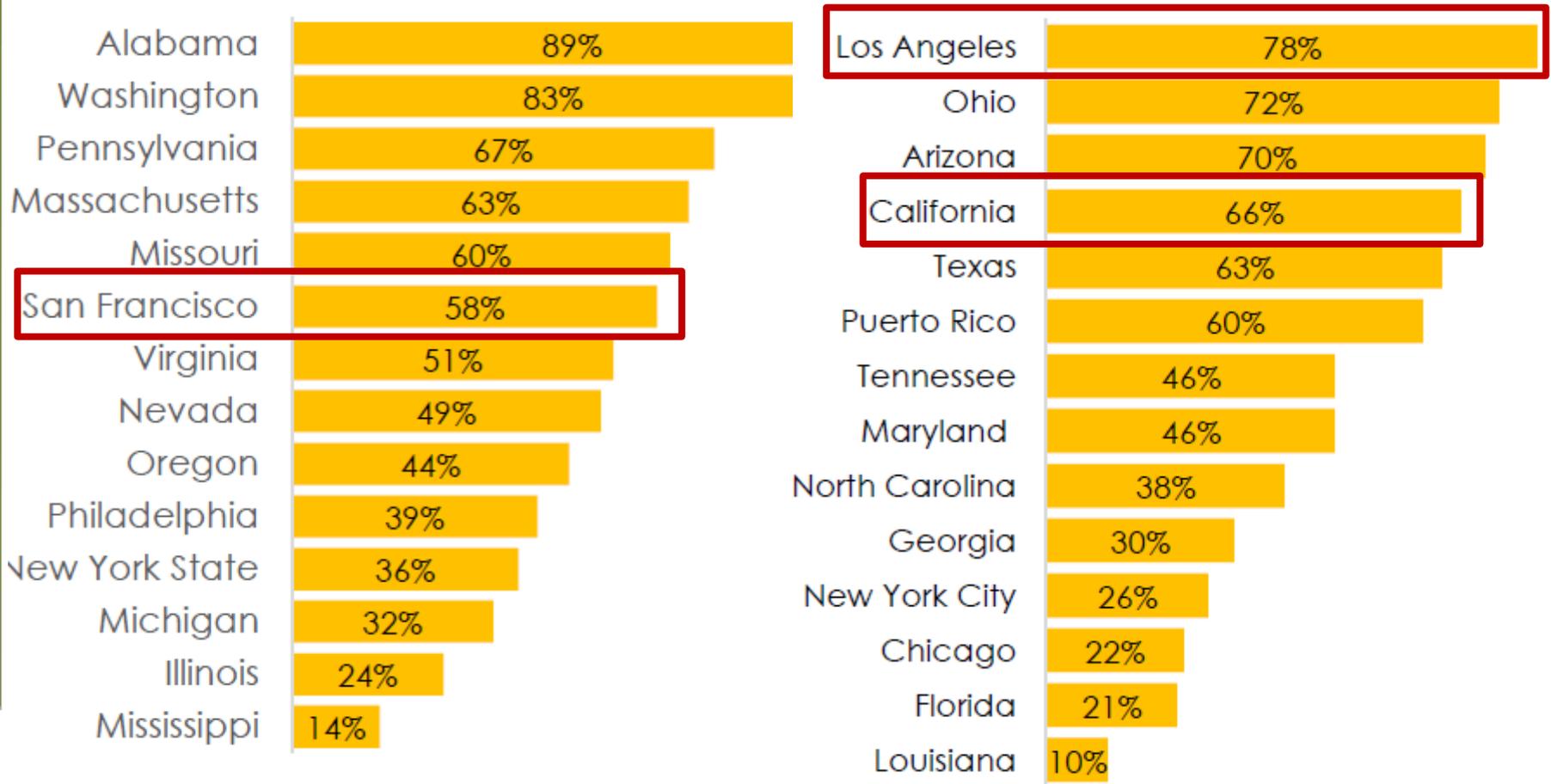
Partner treatment for female early syphilis cases, 2014-2016 Q1-3

How does California measure up?



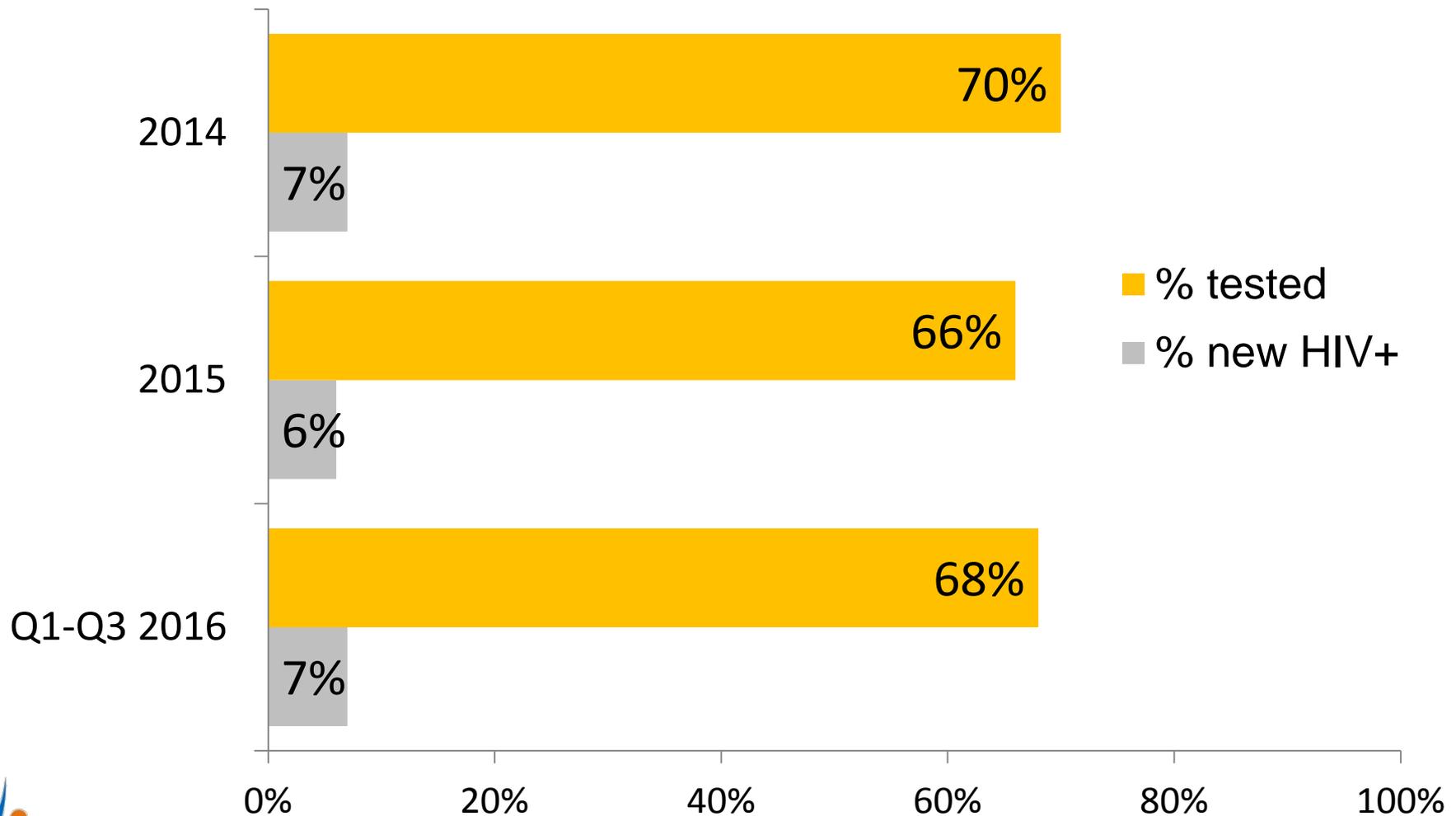
Program Outcome Measure: HIV testing among early syphilis cases, 2015

How does California measure up?

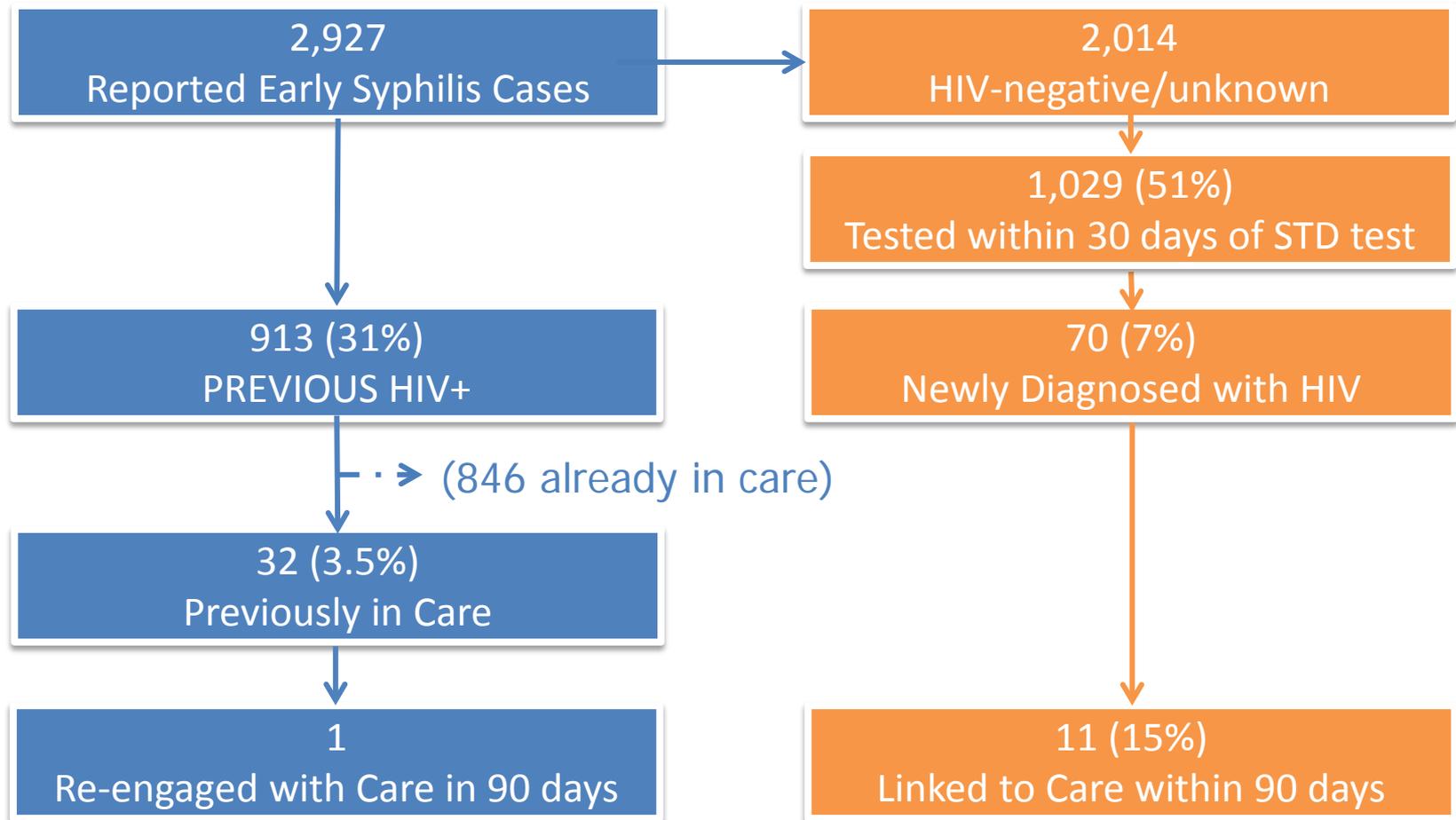


HIV testing and new diagnosis among early syphilis cases, 2014-2016 Q1-3

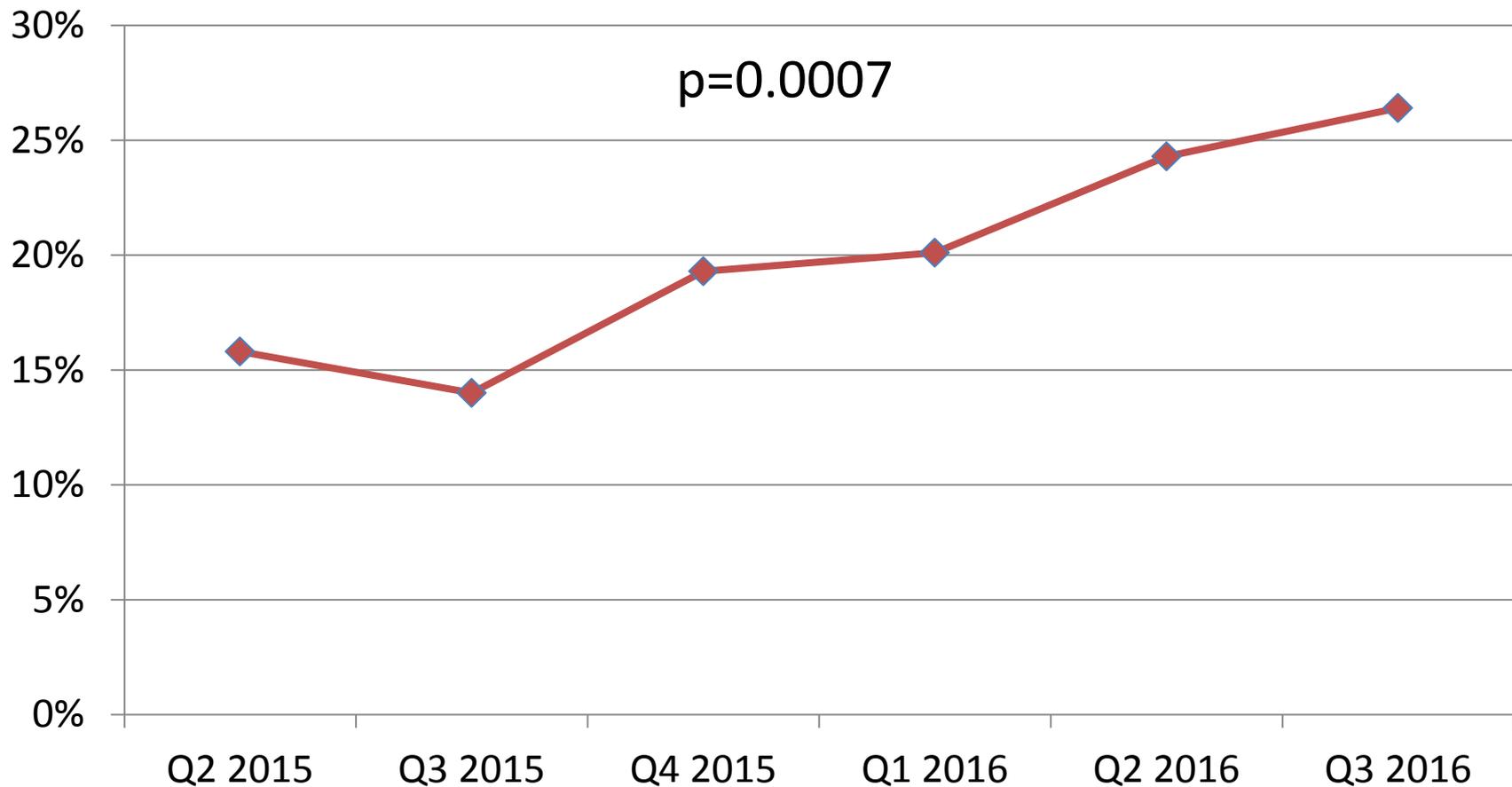
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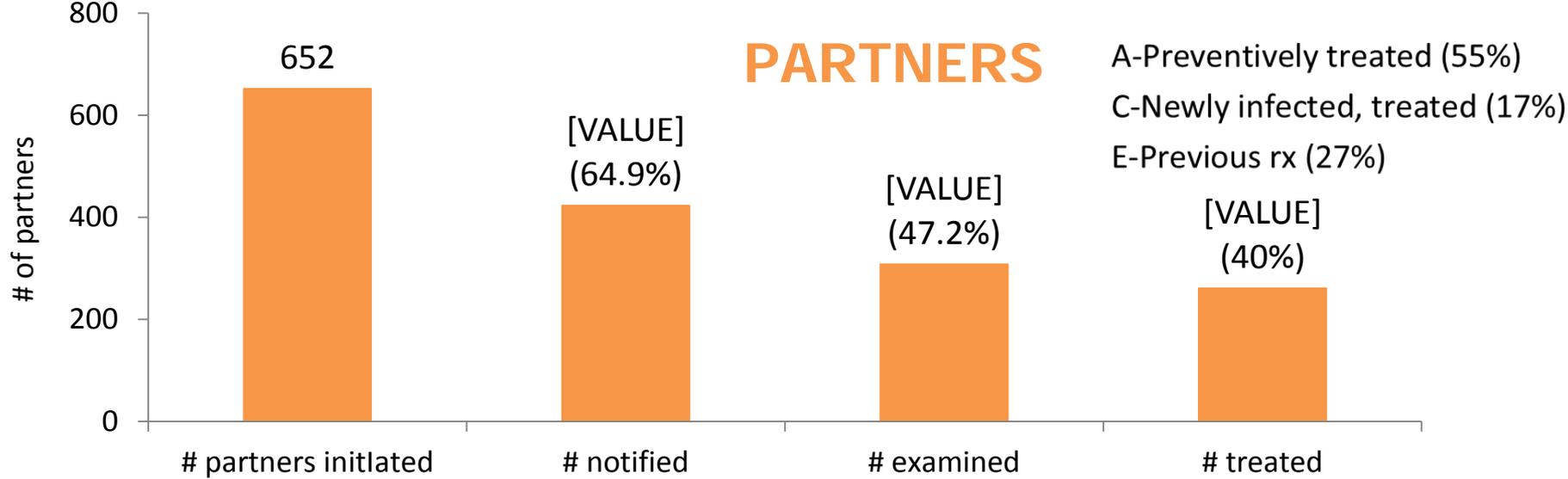
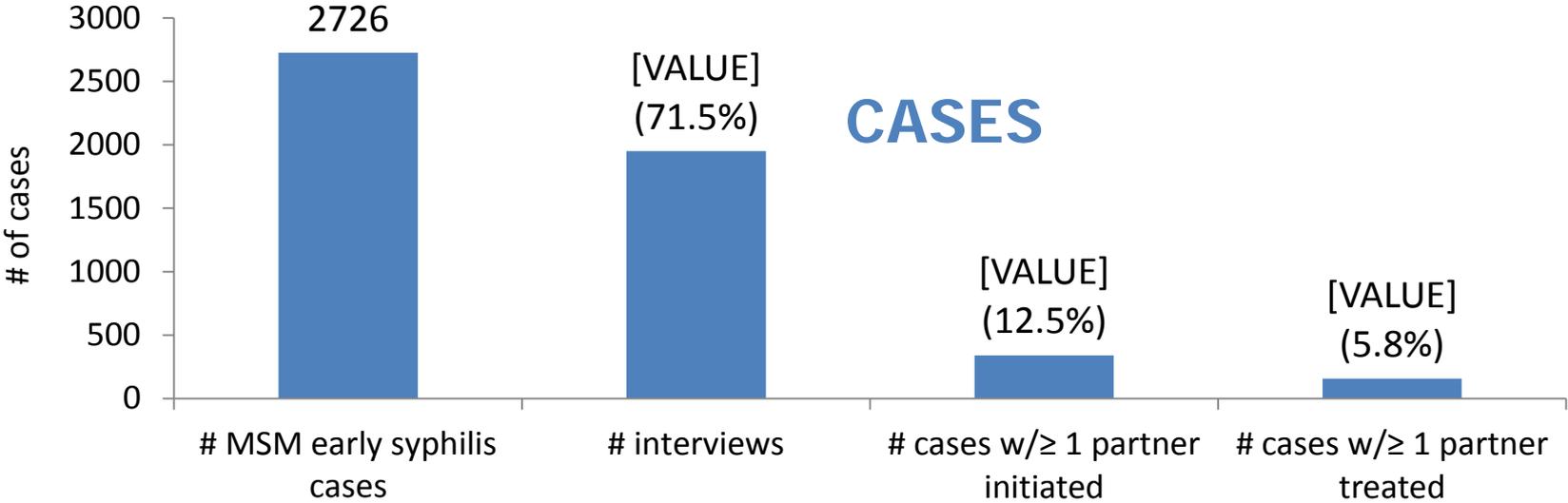
Early syphilis/HIV co-infected cases, CPA 2016 Q1-2: Linkage to care for previous/new HIV+



Increases in self-reported PrEP use among interviewed HIV-negative MSM with early syphilis, CPA



MSM partner services outcomes for early syphilis, CPA 2016 Q1-3



What are some **upstream** solutions to improvement?

- ELR flags for prenatal, labor/delivery reactors
- STD/HIV data integration for more rapid assessment of co-infection and care status
- Improve case management functionality

What are some **downstream** solutions to improvement?

- ensuring partners are linked/documentated appropriately
- HIV testing, linkage to care on Health Dept. Follow-up Tab
- others?