What is Syphilis?
Syphilis is a curable sexually transmitted infection (STI) caused by the bacteria Treponema pallidum. Nearly 28,000 new cases of syphilis are reported in the United States every year.

How can you get it?
Most often, transmission occurs through unprotected sexual contact — when the skin or mucous membranes of one sexual partner come into contact with a chancre (a painless ulcer/lesion) located on another partner's body. Transmission can occur without penetration, as chancres can be found at the site of any sexual contact (e.g., external genitals, within the vagina, or in or around the anus, rectum, or mouth).
Syphilis can also be transmitted from a pregnant woman to her fetus. Called “congenital syphilis,” this can create serious consequences such as neurological problems or miscarriage. Transmission cannot occur through contact with objects such as toilets or towels.

How would I know if I have it?
Syphilis can be a challenge to diagnose. It is often known as “the great imitator,” meaning that symptoms can be similar to other infections or medical conditions. There are several different “stages” of syphilis:

Primary syphilis:
The appearance of a chancre (painless ulcer/lesion) is the symptom of primary syphilis. It typically appears some time (10-90 days) after contact with an infected sexual partner and it spontaneously heals within 3-6 weeks, with or without treatment. (Note: chancres are not always noticeable due to the number and variety of places in which they occur.)

Secondary syphilis:
Secondary syphilis typically presents with the healing of the chancre(s) or within 1-6 months of chancre resolution. This stage is characterized by a rash that can affect the palms of the hands, soles of feet, or the chest and back. Other symptoms of secondary syphilis may include a sore throat, fever, swollen lymph nodes, fatigue, muscle aches, patchy hair loss, and wart-like patches around the genitals/skin folds. These physical symptoms typically resolve in time. However, the infection is still contagious and treatment is still necessary to prevent progression to the “latent” and “tertiary” stages of syphilis.

Latent syphilis:
During the latent syphilis phase, the syphilis bacteria are still alive in your body, but you will no longer have any signs or symptoms of the infection. You’re not contagious during this stage, but syphilis may affect your heart, brain, nerves, bones, and other parts of your body. This phase can last for years.

Tertiary syphilis:
A small percentage of untreated syphilis cases will develop into the tertiary stage, typically 10-30 years after initial infection. This stage includes serious medical complications that can be fatal and involve multiple organs including the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints.

How can I get tested?
Tested for syphilis is easy. A blood test called Rapid Plasma Reagin (RPR) is the recommended screening test for syphilis. If the RPR test result is positive, then a confirmatory test called the fluorescent treponemal antibody absorbed (FTA-ABS) will be done to detect the presence of specific antibodies to syphilis.
Treatment

Treating syphilis is relatively easy. A single shot of Benzathine penicillin, administered intramuscularly, is the recommended treatment for adults and adolescents with primary, secondary, or early latent syphilis. Abstaining from sexual activity is also necessary, until a chancre has fully resolved.

Sexual partners who may have been exposed should be notified for screening and treatment.

Follow-up screening is recommended for individuals at 6, 12, and 24-month intervals, depending on the stage of syphilis treatment.

How to I find out more?

Please talk with your Cornell Health provider about any questions or concerns you may have. We also recommend the online health information found at:

- American Social Health Association: ashastd.org
- U.S. Centers for Disease Control and Prevention: cdc.gov