

SYPHILIS

WHAT IS SYPHILIS?

Syphilis is a sexually transmitted infection caused by a type of bacterium called *Treponema pallidum*.

HOW IS IT TRANSMITTED?

You can catch syphilis through oral, vaginal or anal sex with a person who has syphilis. It is transmitted through skin-to-skin contact with an infected area. The chance of catching syphilis is greatly reduced by using condoms during sex. Condoms also protect you against other sexually transmissible infections. Syphilis is highly contagious when the sore or rash is present. More rarely, syphilis is transmitted from mother to baby during pregnancy.

WHAT ARE THE SIGNS AND SYMPTOMS?

Not all people with syphilis have symptoms so you may not know you have it unless you have a blood test for it. There are 3 stages of infection, known as primary, secondary and late syphilis. The symptoms vary according to the stage. People with primary or secondary syphilis are infectious to their sexual partners.

PRIMARY SYPHILIS

A hard, painless sore occurs usually on the genitals but it may be at other sites of sexual contact such as the mouth or anus. Because it is typically painless and may occur in hidden sites (eg cervix or mouth) you may not notice it. The sore or ulcer usually appears 3-4 weeks after infection.

However, it can occur 10 to 90 days after infection which may make it difficult to know who you caught it from. The sore usually heals by itself within about 4 weeks. Even though the sore heals, if you have not had treatment, you still have syphilis infection and can pass it on to others.

SECONDARY SYPHILIS

Symptoms may occur 2-4 months after infection and last several weeks. There may be a flat red skin rash on the back, chest, hands and feet. Other symptoms include fever, swelling of the glands in the groin and armpits, a genital rash, hair loss and general tiredness. If untreated, these symptoms may come and go for up to 2 years. While the rash is present, secondary syphilis is highly infectious.

LATENT SYPHILIS

If syphilis is not treated in the primary or secondary phase it becomes latent. At this stage there are no symptoms and it is only picked up on blood tests. If syphilis is diagnosed and treated early in the latent phase there are usually no problems. About a third of people who have latent syphilis but are not treated over time develop late syphilis. This can show as serious problems with several organs, mainly the brain and heart. If you have latent syphilis you may need further tests, specialist review and longer treatment. Latent and late syphilis is not infectious and can be avoided by early treatment.

HOW DO YOU TEST FOR SYPHILIS?

Your doctor may suggest the diagnosis of syphilis based on the appearance of a genital sore or body rash. They may recommend treatment based on this but they will always do some tests to confirm you have syphilis.

They may do a swab test from the sore to look under the microscope or to look for syphilis DNA. They will also order blood tests. The blood tests measure antibodies, your body's response to infection. (It can take 3 months to develop antibodies, so the tests may be negative early on.)

One part of the blood test looks for past infection and one part looks for current infection. The blood tests are also used to monitor your body's response to the treatment and may help work out how long you have had syphilis.

This fact sheet is designed to provide you with information on Syphilis. It is not intended to replace the need for a consultation with your doctor. All clients are strongly advised to check with their doctor about any specific questions or concerns they may have. Every effort has been taken to ensure that the information in this pamphlet is correct at the time of printing.

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HOW IS SYPHILIS TREATED?

Penicillin is the usual treatment of syphilis. If you are allergic to penicillin there are alternative treatments.

Although the treatment is straightforward, it is important to have repeat blood tests to check that the treatment has worked.

Usually your doctor will arrange to see you one month after treatment. They will also recommend follow-up blood tests and review at 3, 6 and 12 months after treatment. It is very important to do these tests as if they are not showing improvement you may need further tests or more treatment.

After treatment with penicillin some people (particularly in early syphilis) have a flu-like illness for 24 hours. This includes fevers, aches and pains and generally feeling unwell. It will go away and doesn't require any specific treatment except plenty of rest and fluids.

SHOULD MY SEXUAL PARTNERS ALSO BE TREATED?

If you have been diagnosed with syphilis, all of your sexual partners from the last few months should be checked by a doctor. If you had sex with them while the rash or sore was present they will usually need treatment too.

It is very important all sex partners are checked because if syphilis is not treated it can cause serious problems later on. If you are embarrassed to tell them, your doctor can help by sending them a letter. The letter will not mention you; it will just say that one of their partners is being treated for syphilis and they should get tested for syphilis. There is also a service to find casual partners if you don't know how to contact them. Your regular sexual partners will usually need treatment and follow up.

You should not have sex until your rash or sore clears up because you remain infectious for some time after treatment.

If you have difficulty telling your partners, we have a website you can visit www.letthemknow.org.au. As

well as general advice and sample conversations it has emails, SMSs and letters you can send to your partners either personally or anonymously.

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