

# syphilis

Syphilis is a sexually transmitted infection. New diagnoses of infectious syphilis have increased dramatically in the UK and many other countries over the past few years. If left untreated, syphilis can cause damage to the heart and brain and can lead to death. Syphilis can be harder to cure in people with HIV and it is particularly important that disease is treated early.

## Transmission

Syphilis is a complex infection caused by bacteria. There are three stages to the disease; primary syphilis; secondary syphilis and tertiary syphilis. During the primary and secondary stages the disease is highly contagious.

Syphilis can be contracted from contact with syphilitic sores during unprotected anal, oral or vaginal sex. It can also be transmitted by close physical contact with syphilitic rashes and lesions, which can be anywhere on the body, and from contact with blood. Syphilis can also be transmitted from mother to baby.

It's likely that untreated primary and secondary syphilis can make a person with HIV more infectious. Having syphilis may also make it much more likely that an HIV-negative person will be infected with HIV if exposed to the virus.

## Prevention

Using a condom for oral, anal, or vaginal sex offers protection from infection with syphilis, or from passing on the bacteria to somebody else. Protection is not complete because lesions and rashes may not necessarily be in the genital area. People who are sexually active are advised to have regular sexual health check-ups, where they can be tested for syphilis and other sexually transmitted infections. Most HIV treatment centres have an associated sexual health clinic where free and confidential treatment can be obtained without referral from your GP or HIV doctor.

## Symptoms

Syphilis can cause a range of symptoms or none at all. In the early stage of disease, symptoms may be easily missed. Syphilis can progress more quickly and severely in people with HIV, and may present slightly different symptoms.

Shortly after becoming infected with syphilis (primary syphilis) a small sore, spot or ulcer (called a chancre) may

appear at the site of infection, usually on the penis, in or around the anus or vagina or in the mouth. The chancre does not hurt and usually heals quite quickly. It can be accompanied by swollen glands.

Secondary syphilis can cause a rash, swollen glands, fever, muscle pain, headache, ringing in the ears, and in rare cases, meningitis. Dark brown sores, about the size of a penny piece may also appear on the hands and feet. The rash and sores are highly infectious. Secondary syphilis normally develops within six months of exposure.

Tertiary syphilis usually develops within ten years of infection and can cause damage to almost all the internal organs and the brain (neurosyphilis). If left untreated syphilis can cause death.

## Diagnosis

A general sexual health check-up will include a blood test for syphilis, and any lesions will be swabbed. It can take up to three months for the body to develop antibodies to the bacteria that cause syphilis, so a test taken shortly after exposure may not detect infection. There is some evidence to suggest that tests for syphilis are not as reliable in HIV-positive people. If brain involvement is suspected, a lumbar puncture may be carried out to assess the extent of disease.

## Treatment

Syphilis is usually treated with a course of penicillin injections. People who are allergic to penicillin are given a course of antibiotic tablets, or may be offered penicillin desensitisation where doses are built up gradually over a short period. People with HIV usually receive higher doses of medication for longer. To ensure that the syphilis is completely cured it is vital to have all your prescribed injections or take all your medication. To avoid infecting other people with syphilis, or being re-infected with the bacteria, it is important to avoid sex altogether until treatment has been completed and you have been given the all clear.

Follow-up blood tests will be carried out at intervals of 1, 2, 3, 6, 12 and 24 months to ensure the infection has gone.

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