

U.S. Preventive Services Task Force Issues Draft Recommendation Statement on Screening for Syphilis

Task Force finds evidence to support screening in persons at increased risk for infection

WASHINGTON, D.C. – December 15, 2015 – Today, the U.S. Preventive Services Task Force (Task Force) posted a draft recommendation statement and draft evidence review on screening for syphilis infection in nonpregnant adults and adolescents. The Task Force strongly recommends screening individuals at increased risk for syphilis infection. **This is an A recommendation.** This recommendation complements a 2009 recommendation statement in which the Task Force recommended screening for syphilis infection in all pregnant women.

The Task Force is providing an opportunity for public comment on this draft recommendation statement and the accompanying draft evidence review until January 18. All comments will be considered as the Task Force develops its final recommendation and final evidence review.

Grade in this recommendation:

A: Recommended.

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Syphilis is an infectious disease that can be transmitted sexually between partners. Syphilis may initially present as a sore on the skin, and without treatment, can progress to more severe disease; late-stage disease may cause inflammation of the heart, skin, or other organs. Syphilis can also affect the nervous system at any stage of infection and can cause a loss of coordination or dementia.

Syphilis rates in the United States have been increasing. In 2014, there were 19,999 cases of the earliest stages of syphilis, the highest since 1994. “Given the rising rates of syphilis infection, clinicians should focus on screening people at increased risk,” said Task Force member Francisco García, M.D., M.P.H.

People at the highest risk for syphilis infection are men who have sex with men and people living with HIV. Other factors associated with increased rates of syphilis infection which clinicians may also consider in deciding whom to screen include age, race, and local rates of syphilis infection.

“Fortunately, in the case of syphilis, there are accurate tests available for screening and effective therapies that can cure syphilis, prevent further complications, and prevent the spread of infection,” said Task Force member Ann E. Kurth, Ph.D., R.N., M.S.N., M.P.H.

Everyone can reduce their risk for syphilis infection by consistently using latex condoms, limiting sexual activity to a mutually monogamous relationship, or by abstaining from sex.

The Task Force’s draft recommendation statement and draft evidence review have been posted for public comment on the Task Force Web site at www.uspreventiveservicestaskforce.org. Comments can be submitted from December 15 to January 18 at <http://www.uspreventiveservicestaskforce.org/Page/Name/us-preventive-services-task-force-opportunities-for-public-comment>.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. García is the director and chief medical officer of the Pima County Department of Health in Tucson, AZ, and the distinguished outreach professor of public health at the University of Arizona.

Dr. Kurth is a professor in the New York University College of Nursing and the School of Medicine, Department of Population Health, as well as associate dean for research in the College of Global Public Health.

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