



November 17, 2005

Dear Syphilis Elimination Coordinators:

Welcome to the first in a series of correspondence with our network of Syphilis Elimination Coordinators. Using this format, we hope to provide quarterly SEE progress reports and other useful information about the effort.

Progress to Date

The goal of the Syphilis Elimination Effort (SEE), first launched in October 1999, is to reduce the incidence and transmission of infectious syphilis in the United States. The public benefits of this effort are significant: improved infant health, reduced health disparities, and improved public health infrastructure. In the beginning the SEE largely addressed endemic syphilis in underserved heterosexual minority populations in the U.S. Today, however, with the re-emergence of syphilis in men who have sex with men, we must expand our efforts to include these newly affected groups. More than 5 years into the national syphilis elimination initiative, it is time to take stock of the lessons learned, share the emerging best practices, and reexamine our strategies as we go forward.

- Numbers (rates) of P&S syphilis: From **34,009** (13.3 per 100,000) in 1992 to **7980** (2.7 per 100,000) in 2004
- Congenital syphilis reduced: From **4067** (1.6 per 100,000) in 1992; **580**(0.2) in 2000; to **353**(0.1) in 2004
- Racial disparities reduced: From **63.0:1** in 1992; **24.0:1** in 2000; to **5.6:1** in 2004
- The proportion of syphilis free counties in the US has exceeded 75% for the past 4 years.
- Continued reductions of P&S syphilis rates in the South: **22.9** per 100,000 in 1992; **3.7** in 2000; and **3.6** in 2004
- Investment (>\$109M) into community based organizations to lead peer-based interventions
- Investment in STD healthcare infrastructure; staff training and development

Changing Disease Epidemiology

Based on data published in the 2004 annual Surveillance Report (www.cdc.gov/std/stats), the epidemiology of syphilis in the U.S. continues to change. The incidence of syphilis in men, many of whom are men who have sex with men (MSM), is increasing. A significant proportion of these MSM are also HIV positive. However, we cannot lose sight of a potential resurgence of syphilis in heterosexuals, and given the serious implications for infant health, we must monitor for a resurgence of syphilis in heterosexual women. In addition to anecdotal reports of increases in women, provisional year to date data for 2005 are also beginning to show increases (15%) in syphilis in women compared to the similar time-period for 2004. Such changes as these require us to be vigilant in our monitoring efforts and ready to intervene early as warranted.

Introducing the DSTDP Syphilis Elimination Implementation Monitoring Group (The IMG)

The IMG is a working/implementation group within the CDC Division of STD Prevention (DSTDP) that works towards improved intra-DSTDP coordination of Syphilis Elimination Effort activities. The workgroup is comprised of members from each of the Division's branches and units. The workgroup meets weekly and its goals are to:

- improve communication on all syphilis activities across DSTDP;
- develop a strategic plan for coordinating SEE activities within DSTDP;
- identify new collaborative cross-Branch initiatives to raise the profile of SEE;
- identify potential problems or areas of need in syphilis prevention and intervention strategies;
- develop and evaluate syphilis prevention and intervention strategies in association with branch colleagues;
- identify and implement key interventions for strengthening SEE efforts;
- evaluate and enhance SEE activities being undertaken within branches; and
- review and update the SEE National Plan.

The Syphilis Elimination Listening Tour (March-June 2005)

Earlier this year, the SEE Coordination Team (Kevin Fenton, SEE Chief & Jo Valentine, SEE Program Coordinator) visited project areas across the country to learn more about current SEE activities at the local level. The visits provided an opportunity to meet with many of you in the field, recognize achievements, collect lessons learned, and identify current challenges facing the effort. We conducted 17 discussion groups with health

department staffs and community-based organization partners in five high morbidity areas. The discussions confirmed that the SEE has made substantial contributions to reducing heterosexual and congenital syphilis, improving STD prevention partnerships, and raising public and professional awareness of STDs. However, greater flexibility, guidance and evidence-based strategies are increasingly required to improve the implementation of the program in responding to the changing disease epidemiology. A report detailing the results of these visits has been produced and will be available shortly.

The Syphilis Elimination Consultation Meeting

On August 1-2, 2005, the CDC Division of STD Prevention conducted a consultation meeting in Atlanta, Georgia to provide key stakeholders with an update on completed SEE activities and achievements, and to solicit input on the reframing of future SEE strategies. More than 90 persons from diverse constituencies attended the consultation meeting. The meeting included interactive discussions on approaches to improve the public health services response; create effective partnerships; and enhance implementation of the SEE. A meeting report has been produced and will be distributed. Further information on the consultation is available on our website at www.cdc.gov/stopsyphilis.

Please Visit the New Syphilis Elimination Website!

We invite you to visit our recently revised Syphilis Elimination website (www.cdc.gov/stopsyphilis). We hope that this will be a dynamic central portal for you to obtain information on the progress of the SEE. Since January we have posted a number of updates and new resources including: State and local epidemiological profiles; the SEE community mobilization tool-kits; relevant *Dear Colleagues letters*; and important program updates. We intend to keep the website current, so please visit it regularly.

Next Steps

Building on the lessons learned from the last five years, the Listening Tour, and the internal and external consultations, the Division of STD prevention is currently developing a revised strategic plan for the SEE which we hope to share with colleagues within the next 3 months or so. We will be inviting feedback from all SEE coordinators on this new plan during the development phase.

The autumn promises to be a busy one for the coordinating team with the production of the revised SEE plan and the completion the Listening Tour and Consultation Event reports. Remember to visit the Syphilis Elimination website. Should you have any further questions or suggestions we are eager to hear from you. Please contact Jo Valentine directly at **(404) 639-8366** or via electronic mail at jvalentine@cdc.gov.

SEE: Together we can!
The CDC Syphilis Elimination Effort Coordinating Team



News Notes

Bicillin L-A Availability

King Pharmaceuticals has been very responsive in ensuring that health departments experiencing delays receive their of Bicillin-LA orders in a timely manner. Guidance on the steps to obtain adequate supplies of Bicillin were circulated in a Dear Colleague letter in August 2005. Copies of this letter are available on the SEE website. Bicillin-LA was previously produced by Wyeth for King (Monarch) Pharmaceuticals, the owner and distributor of the product.

Free Special Supplement of Sexually Transmitted Diseases October 2005, 32(10)

The supplement focuses on STD program responses to the syphilis epidemic in men who have sex with men. The supplement is available at www.stdjournal.com in the Archives section.

The 2004 Annual STD Surveillance Report

The new report is available online at: www.cdc.gov/std/stats.