Presidential Advisory Council on HIV/AIDS (PACHA)

Resolution Concerning Urgent Action Recommended for Syphilis Syndemic

Whereas, PACHA held its 77th full council meeting in Phoenix, AZ between June 28 - 29, 2023 and visited HIV programs the day prior, PACHA members heard urgent concerns from HIV providers serving American Indian/Alaskan Native and other patients of large and escalating numbers of syphilis and congenital syphilis cases requiring a robust and comprehensive federal, state, and local response;

Whereas, several PACHA members in their usual roles are seeing the same escalating number of syphilis and congenital syphilis cases and some of their jurisdictions are declaring syphilis outbreaks and public health emergencies;

Whereas, in 2021 there were 176,713 cases of syphilis reported in the U.S., which was a 32% increase in the reported rate from the prior year, and of those 176,713 cases, 53,767 of those were primary and secondary cases, the most infectious stages;¹

Whereas, all regions of the U.S. have had large increases in the rates of primary and secondary syphilis, the West having the highest with a 25% increase from 2020, followed by the South with a 26% increase, then the Midwest with a 48% increase, and the Northeast with a 21% increase;²

Whereas, between 2020 and 2021, the rate of primary and secondary syphilis rate among women increased 55% and 23% in men³;

Whereas, rates of primary and secondary syphilis increased in all racial/Hispanic ethnicity groups, and Non-Hispanic American Indians or Alaska Native persons had the greatest five-year increase of reported primary and secondary syphilis with a 324% increase between 2017 and 2021;⁴

Whereas, during 2017 to 2021, 46% of primary and secondary syphilis cases were among men who have sex with men, and increased by 7% from 2020 to 2021,⁵

Whereas, in 2021, there was a total of 2,855 cases of congenital syphilis, all of which are preventable with appropriate screening of persons who are pregnant, and this was a 30% increase in the rate from 2020;⁶

¹ https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 4) all were accessed on June 29, 2023
² https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 7)
³ https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 6)
⁴ https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 12)
⁵ https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 23)
⁶ https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 31)
Whereas, tragically, 220 of these babies born with congenital syphilis died (197 stillbirths and 23 infant deaths);\(^7\) which was a 45% increase from 2020 (152 deaths) and a 175% increase from 2017 (80 deaths);\(^8\)

Whereas, the FDA listed Bicillin® L-A (penicillin G), the preferred treatment, as in shortage as of April 26, 2023 and estimated recoveries not until second quarter of 2024\(^9\) and the drug manufacturer, Pfizer, announced on June 12, 2023 that Bicillin® L-A Pediatric Prefilled Syringes are estimated to be depleted by the end of Q2 2023\(^10\);

Whereas, on June 13th, governmental public health jurisdictions received word that as part of H.R. 3746 there was a $400 million rescission in funds that support disease intervention specialists (DIS), the public health workforce that helps to identify, control and prevent disease transmission and outbreaks, which will defund 3,000 DIS workers.\(^{11}\)

Therefore, be it resolved that, the PACHA recommends and advises the Secretary of the United States Department of Health and Human Services (HHS) to:

1. Establish, with haste, a Federal Task Force led by HHS that includes other Federal agencies, as appropriate, to coordinate a comprehensive response to limit and control this syndemic, and that it be timely and effectively coordinated with state and local governmental public health and health care providers and meaningfully inclusive of community stakeholders;

2. Notify, with haste, health care providers and the public about the urgent threat of syphilis, including congenital syphilis, and work to ensure all persons, including pregnant persons, receive the recommended screening for syphilis and treatment as appropriate;

3. Give full consideration to declaring the syphilis syndemic a public health emergency;

4. Work with the U.S. Food and Drug Administration, and Administration for Strategic Preparedness and Response, manufacturers, and other appropriate entities to address, as rapidly as possible, the shortage of Bicillin® L-A and evaluate equivalent alternative treatment modalities for syphilis during the shortage; and

5. Work with federal agencies to evaluate all options to retain the DIS workforce who are on the front line addressing this syndemic, and further work to retain, long-term, this vital public health workforce.

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\(^7\) https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 43)

\(^8\) https://www.cdc.gov/std/statistics/2021/figures.htm (Syphilis slide set, slide 91)

\(^9\) https://www.accessdata.fda.gov/scripts/drugshortages/dsp_ActiveIngredientDetails.cfm?AI=Penicillin%20G%20Benzathine%20Injectable%20Suspension&st=c accessed June 29, 2023

\(^10\) https://www.fda.gov/media/169427/download, accessed June 29, 2023