

STD/HIV Quarterly Report

San Mateo County Health System, STI/HIV Program

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Table 1 STI Cases Reported Among County of San Mateo Residents by Quarter (Apr 1 - Jun 30) and Year to Date for 2023 and 2022

		2023		2022	
		2nd Qtr	YTD	2nd Qtr	YTD
Chlamydia trachomatis (CT)	Total	664	1,362	544	1,129
	Male	305	637	242	506
	Female	358	718	300	619
	Transgender/Other/Unknown ¹	1	7	2	4
Lymphogranuloma Venereum (LGV)		0	0	0	1
Gonorrhea (GC)	Total	230	476	211	429
	Male	178	373	155	335
	Female	49	96	53	90
	Transgender/Other/Unknown ¹	3	7	3	4
GC Clinical Site²	Urine	106	206	114	219
	Genitourinary	25	56	8	23
	Rectal	61	131	52	120
	Pharyngeal	74	165	66	137
	Unknown/Missing	5	9	3	7
	DGI ³	0	0	0	1
Syphilis	Total	78	160	68	141
	Female	21	39	13	24
Early Syphilis⁴	Total	46	90	40	85
	Male	34	70	32	71
	Female	11	17	6	10
	Transgender/Other/Unknown	1	3	2	4
Syphilis by Stage	Primary	9	17	6	12
	Secondary	11	23	12	23
	Early Latent	26	50	22	50
	Late Latent	32	70	28	56
	Congenital	0	0	0	2
	Neurosyphilis ⁵	2	3	4	7

YTD: Year to Date. ¹Due to data limitations and confidentiality concerns, transgender women, transgender men, and gender diverse persons are combined ²Clinical sites for gonorrhea are non-exclusive (individual patient may have multiple sites tested). ³Disseminated Gonococcal Infection. ⁴Early Syphilis is defined as primary, secondary, and early latent. ⁵Cases not included in the total as neurosyphilis is a sequelae and not a stage; the neurosyphilis cases are captured under other syphilis stages.

- As of the second quarter of 2023, CT increased 26% in men and 16% in women compared to this time last year. GC increased 11% in men and 7% in women compared to last year.
- Total syphilis cases increased by 11% and early syphilis increased 6% compared to this time last year. 24% (n=39) of syphilis cases have been female this year compared to 17% (n=24) last year.
- Specimens tested for HIV increased 50% compared to last year. To date in 2023 HIV positive prevalence is lower at 0.8% (43/5,157) than the first two quarters of 2022 at 1.4% (47/3,430).

Table 2 HIV testing through the San Mateo County Health System by Quarter (Apr 1 - Jun 30) and Year to Date for 2023 and 2022¹

		2023		2022	
		2nd Qtr	YTD	2nd Qtr	YTD
Total Specimens Tested for HIV		2,627	5,157	1,396	3,430
SMC-STI Clinic		49	96	17	43
STI/HIV Program Outreach ²		113	169	78	136
Other County Clinics ³		2,465	4,892	1,301	3,251
Total HIV Antibody Positive		22	43	13	47
SMC-STI Clinic		0	1	1	3
STI/HIV Program Outreach ²		1	1	0	0
Other County Clinics ³		21	41	12	44
Total New HIV Cases		5	10	5	12

¹The HIV antibody positives do not reflect the true burden of disease. Some patients may be repeat testers. ²Testing-on-Demand and STI/HIV Program HIV Rapid Tests. ³Includes all HIV testing (oral and blood) at San Mateo Medical Center (SMMC), SMMC Satellite Clinics, SMC Public Health (PH) Clinics, and PH Subcontractors. Beginning Aug 2015, a 4th generation HIV screening test was implemented. HIV positive cases may not yet be confirmed by HIV-1/HIV-2 differentiation immunoassay.

Bicillin Long Acting L-A® Shortage Continues



- California continues to see significant increases in syphilis, including syphilis in pregnant persons and congenital syphilis in infants.
- CDPH recommends prioritizing Bicillin L-A for pregnant people with syphilis infection (or exposure), infants exposed in utero, and persons with severe contraindication to doxycycline (e.g. anaphylaxis, hemolytic anemia, Stevens-Johnson syndrome); conserve Bicillin L-A by using alternative drugs when appropriate.
- For non-pregnant adults:
 - Doxycycline 100 mg PO BID x 14 days is an acceptable alternative for those with primary, secondary, or early latent syphilis.
 - Doxycycline 100 mg PO BID x 28 days is an acceptable alternative for those with late latent syphilis or syphilis of unknown duration.
- Contact SMC Health if you are experiencing a Bicillin L-A shortage or need to obtain it for pregnant persons with syphilis, infants exposed in utero or persons with severe doxycycline contraindication at (650) 573-2346.