

Table 1 STI Cases Reported Among County of San Mateo Residents by Quarter (Oct 1 - Dec 31) and Year to Date for 2025 and 2024

		2025		2024	
		4 th Qtr	YTD ¹	4 th Qtr	YTD
Chlamydia trachomatis (CT)	Total	491	2,140	541	2,384
	Male	188	832	220	984
	Female	296	1,294	319	1,391
	Transgender/Other	1	4	1	3
	Unknown ²	6	10	6	6
Gonorrhea (GC)	Total	173	756	188	783
	Male	148	615	148	653
	Female	22	131	34	115
	Transgender/Other	3	9	6	15
	Unknown	0	1	0	0
GC Clinical Site³	Urine	67	307	70	344
	Genitourinary	7	32	15	42
	Rectal	46	212	56	221
	Pharyngeal	75	295	76	311
	Unknown/Missing	6	28	6	15
	DGI ⁴	1	2	0	1
Early Syphilis⁵	Total	10	63	10	73
	Male	10	53	7	61
	Female	0	8	1	8
	Transgender/Other	0	2	2	4
	Unknown	0	0	0	0
Late Syphilis	Total	27	149	30	124
	Male	12	84	18	79
	Female	15	65	12	42
	Transgender/Other	0	0	0	3
	Unknown	0	0	0	0
Syphilis by Stage	Primary	3	15	2	21
	Secondary	3	17	2	17
	Early Latent	4	31	6	35
	Late Latent	27	149	30	124
	Congenital	0	1	0	1
	Neurosyphilis ⁶	0	3	1	4
Mpox	Clade I	0	0	1	1
	Clade II	4	5	1	9

¹YTD: Year to Date. ²Due to data limitations and confidentiality concerns, transgender women, transgender men, and gender diverse persons are combined. ³Clinical sites for gonorrhea are non-exclusive (individual patient may have multiple sites tested). ⁴Disseminated Gonococcal Infection. ⁵Early Syphilis is defined as primary, secondary, and early latent. ⁶Cases not included in the total as neurosyphilis is a sequelae and not a stage; the neurosyphilis cases are captured under other syphilis stages.

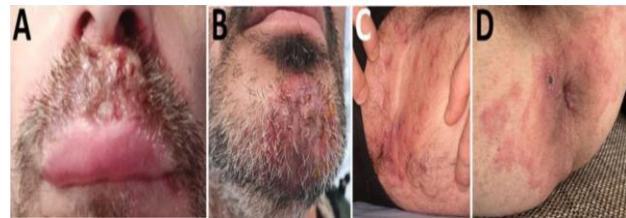
- Early syphilis decreased by 14% and late syphilis increased by 20% compared to this time last year. Among early syphilis cases, 8 cases were female (13%) in 2025 and 8 were female in 2024 (11%). Among late latent cases, 65 cases were female (44%) compared to 42 in 2024 (34%).
- CT decreased 15% in men and 7% in women compared to this time last year. GC decreased 6% in men and increased 14% in women compared to last year.
- There was a 13.2% increase in number of specimens tested for HIV in 2025 compared to 2024. HIV positive prevalence remained consistent at 0.8% in 2025 and 2024.

Table 2 HIV testing through the San Mateo County Health System by Quarter (Oct 1 - Dec 31) and Year to Date for 2025 and 2024¹

		2025		2024	
		4 th Qtr	YTD	4 th Qtr	YTD
Total Specimens Tested for HIV		2,967	11,028	1,928	9,742
	SMC Clinics ²	2,835	10,364	1,711	9,209
	STI/HIV Program Outreach ³	132	664	217	533
Total HIV Antibody Positive		16	92	17	80
	SMC Clinics	16	91	17	80
	STI/HIV Program Outreach ³	0	1	0	0
Total New HIV Cases		3	26	4	16

¹The HIV antibody positives do not reflect the true burden of disease. Some patients may be repeat testers. ²Numbers for SMC Edison STI clinic and other county clinics are combined. ³Testing-on-Demand and STI/HIV Program HIV Rapid Tests. ⁴Includes all HIV testing (oral and blood) at San Mateo Medical Center (SMC), 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.

Trichophyton mentagrophytes genotype VII in men who have sex with men



Trichophyton mentagrophytes genotype VII (TMVII) is an emerging dermatophyte infection that causes highly inflammatory, painful, and persistent lesions, often affecting anogenital and perioral areas, and may not respond to standard topical antifungal therapy. TMVII is associated with close skin-to-skin contact and sexual contact. TMVII has been circulating locally in Europe for several years among men who have sex with men (MSM) and has also been associated with sex tourism in Southeast Asia. Since the first case in the US was reported in 2024 in [New York City](#), there were additional cases there in addition to an outbreak in [Minnesota](#) and most recently, two cases in [San Francisco](#).

If TMVII is suspected, testing should be done to confirm infection. Potassium hydroxide (KOH) preparation of skin scrapings can identify fungal elements, and fungal culture can identify *Trichophyton* species. Providers can collect skin scrapings in a sterile container for fungal culture. If *Trichophyton* species is confirmed, contact SMC Health at 650.573.2346 for assistance with referral to a reference lab for genomic sequencing. Oral terbinafine 250mg once daily until resolution (which may take ≥ 6 weeks) is first line treatment. Report suspect or confirmed cases to SMC Health.