



San Francisco Monthly STI Report

Data for January, 2024
Report prepared July 30, 2024

Table 1. STIs among residents, January, 2024. Female syphilis cases include patients assigned as female at birth.

	2024		2023	
	month	YTD	month	YTD
Gonorrhea	476	476	496	496
Male rectal gonorrhea	168	168	164	164
Chlamydia	448	448	595	595
Male rectal chlamydia	97	97	208	208
Syphilis (adult total)	102	102	109	109
Primary & secondary	26	26	17	17
Early latent	35	35	51	51
Unknown latent	15	15	15	15
Late latent	26	26	26	26
Neurosyphilis	3	3	2	2
Congenital syphilis	0	0	0	0
Female syphilis	18	18	13	13

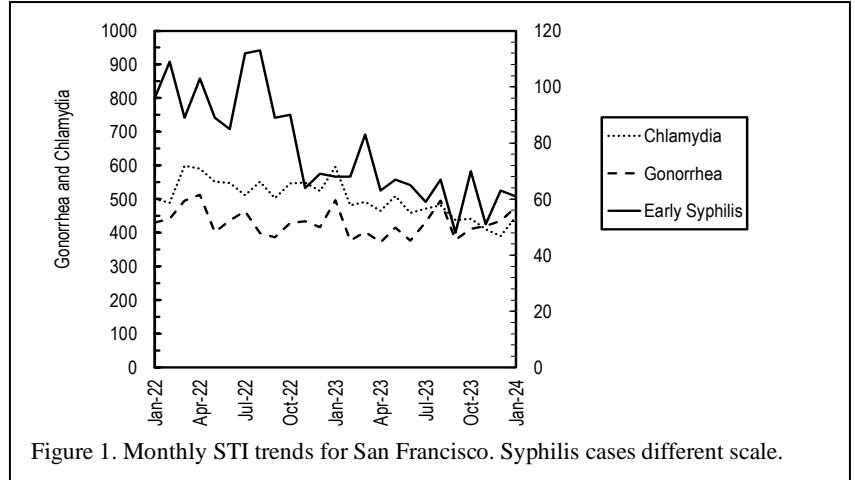


Figure 1. Monthly STI trends for San Francisco. Syphilis cases different scale.

Table 2. Selected STI cases and rates for San Francisco by age and race/ethnicity, 2024 through January only. Rates equal cases per 100,000 residents per year based on 2020 US Census Data. (Please see the Executive Summary of the [2021 San Francisco STI Annual Summary](#) for more details about the incorporation of 2020 Census data.)

	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
<i>All ages</i>										
Chlamydia	448	76.9	44	22.4	44	146.4	71	77.9	92	40.4
Gonorrhea	476	81.7	54	27.5	45	149.8	77	84.5	168	73.8
Early syphilis	61	10.5	2	1.0	8	26.6	16	17.6	27	11.9
<i>Under 20 yrs</i>										
Chlamydia	46	448.2	1	28.4	9	1,303.7	4	155.7	9	372.7
Gonorrhea	6	58.5	0	0.0	2	289.7	0	0.0	1	41.4
Early syphilis	2	19.5	0	0.0	0	0.0	2	77.9	0	0.0

Table 3. HIV testing among City Clinic patients, January, 2024.

	2024		2023	
	month	YTD	month	YTD
Tests	366	366	327	327
Antibody positive	6	6	7	7
Acute HIV infection	0	0	0	0

Note: All statistics are provisional until the annual report is released for the year. Morbidity is based on date of diagnosis. Totals for past months may change due to delays in reporting from labs and providers.

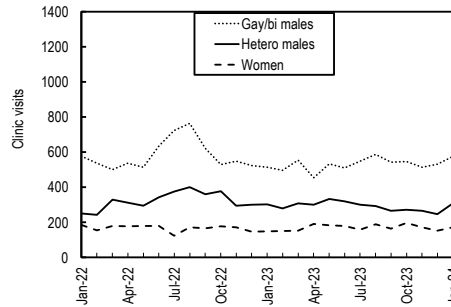


Figure 2. City Clinic visits by gender and orientation.

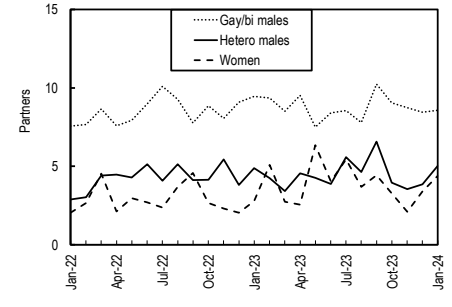


Figure 3. Average number of recent* sex partners for City Clinic visits by gender and sexual orientation. *Recall period is 3 months.

SF Health Access Points: low barrier services meeting communities where they are

The San Francisco Department of Public Health, Community Health Equity and Promotion Branch (CHEP) funds seven [Health Access Points \(HAPs\)](#) focusing on the following communities: Latin/a/e/o/x; trans women; people who use drugs (PWUD) & people experiencing homelessness (PEH); gay, bisexual, and other men who have sex with men (MSM); Asian & Pacific Islanders; young adults (ages 18-24); and Black/African Americans.

The HAPs provide low-barrier clinical and community services in welcoming spaces, free from stigma. The goal is to ensure that all San Franciscans have equitable access to high-quality HCV, HIV, and STI prevention, care & treatment services, and harm reduction & overdose prevention services. This model is based on the idea that each HAP is an expert in serving their specific population and tailors services based on the preferences and needs of its clients. Each HAP consists of a central hub and one to two associated clinical partners and community-based organizations. See below for more information:

A&PI ("LOTUS")	Black/AA ("Umoja")	Latine	MSM	PWUD ("The Lobby")	TAY	Trans women ("STAHR")

Email your questions or comments to HAP@sfdph.org

Provider STI Reporting: 628-217-6653, 628-217-6603 (fax)

www.sfcityclinic.org