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

syphinis cases include patre	2024		2023	
	month	YTD	month	YTD
Gonorrhea	502	4,025	411	4,143
Male rectal gonorrhea	188	1,425	132	1,324
Chlamydia	380	3,606	441	4,822
Male rectal chlamydia	74	717	87	1275
Syphilis (adult total)	79	746	107	987
Primary & secondary	11	143	24	234
Early latent	27	267	46	424
Unknown latent	13	134	15	135
Late latent	28	202	22	194
Neurosyphilis	2	10	1	20
Congenital syphilis	1	3	1	4
Female syphilis	14	126	28	148

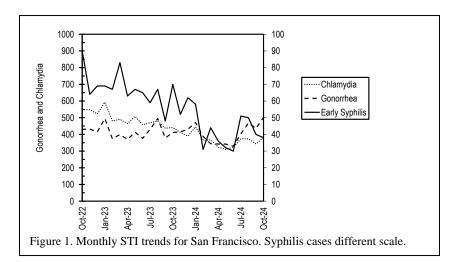


Table 2. Selected STI cases and rates for San Francisco by age and race/ethnicity, 2024 through October only. Rates equal cases per 100,000 residents per year based on 2020 US Census Data. (Please see the Executive Summary of the 2021 San Francisco STI Annual Summary for more details about the incorporation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

	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia	3,606	61.9	344	17.5	456	151.8	521	57.1	766	33.7
Gonorrhea	4,025	69.1	409	20.9	353	117.5	829	90.9	1,434	63.0
Early syphilis	410	7.0	31	1.6	62	20.6	114	12.5	131	5.8
Under 20 yrs										
Chlamydia	424	413.2	24	68.1	110	1,593.4	24	93.4	57	236.1
Gonorrhea	62	60.4	5	14.2	15	217.3	6	23.4	7	29.0
Early syphilis	7	6.8	0	0.0	1	14.5	6	23.4	0	0.0

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

OCIODCI, 2024.				
	2024		2023	
	month	YTD	month	YTD
Tests	326	3,402	322	3,240
Antibody positive	2	54	2	43
Acute HIV infection	0	1	0	3

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.

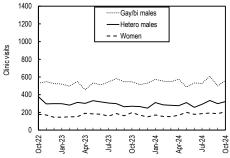


Figure 2. City Clinic visits by gender and orientation.

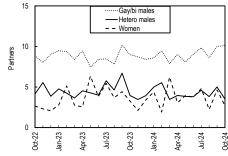


Figure 3. Average number of recent* sex partners for City Clinic visits by gender and sexual orientation. *Recall period is 3 months.

SFDPH Embarks on Strategic Plan to Eliminate Congenital Syphilis in San Francisco

San Francisco is continuing to experience concerning increases in syphilis among people assigned female at birth, resulting in congenital syphilis (CS) cases. There was a 360% increase in female syphilis cases from 2014 to 2023, with 15% of those cases among pregnant people last year. Six CS cases were reported in 2023, which is the highest number of CS cases in San Francisco in 30 years.

In response, the San Francisco Department of Public Health has been convening the CS taskforce since 2020 to address rising syphilis rates and the underlying social determinants of health resulting in cases of CS. The taskforce's key initiatives to date include conducting regular CS case review boards to identify missed opportunities for prevention, weekly care coordination calls for pregnant people with barriers to care, and Epic tools to identify patients in need of syphilis testing or treatment. This past year the CS taskforce worked with partners and stakeholders to develop a <u>strategic plan</u> for CS elimination in San Francisco.

In addition to outlining the CS taskforce's mission and values, the <u>strategic plan</u> identified four core strategies including 1) Increasing low barrier access to syphilis testing for people capable of pregnancy and for their partners, 2) Developing sustainable systems for CS education and capacity building for the workforce and impacted populations, 3) Optimizing the use of data to support syphilis prevention and response efforts among people capable of pregnancy, and 4) Improving care coordination of pregnant patients with syphilis.

Please reach out to <u>alyson.decker@sfdph.org</u> if you're interested in becoming involved in one of these initiatives or joining the Congenital Syphilis Taskforce. You can find additional <u>syphilis resources</u> for patients and providers on our SF City Clinic website.