

# Treatment Recommendations for Adults Diagnosed With Syphilis

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Syphilis is the only sexually transmitted infection for which treatment is dependent upon the stage of the infection. The table on the reverse of this page summarizes recommended treatment regimens by stage.<sup>1</sup>

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## Syphilis in pregnancy



Penicillin G benzathine (Bicillin L-A) is the preferred drug for treatment of all stages of syphilis and is the only recommended treatment for pregnant patients with syphilis. In times when Bicillin L-A supply is limited, health care facilities should prioritize using Bicillin L-A to treat pregnant patients with syphilis and babies with congenital syphilis. Providers can choose doxycycline for nonpregnant patients to help conserve Bicillin L-A supply.

Pregnant patients with known penicillin allergies being treated for syphilis should undergo desensitization in consultation with an allergy specialist and be treated with a penicillin-based regimen as summarized in the table on the reverse of this page. Following treatment, serologic titers should be monitored closely throughout the remainder of the pregnancy to document response to treatment and monitor for evidence of reinfection.

Because ongoing contact with untreated partners poses a risk for reinfection, special attention should be paid to ensure that all partners of pregnant patients receive prompt presumptive therapy.

<sup>1</sup>American Sexually Transmitted Diseases Association. Federal guidelines, reports, and resources. <https://www.astda.org/federal-guidelines-reports-and-resources>

Stage	Symptoms	Description	Treatment	Notes and partner management
Primary	Chancre	Typically, a single or multiple firm, round, and painless lesions occur at site of infection. Atypically, nonindurated or irregularly bordered ulcerations and painful lesions occur, particularly in the anal area.		Partner management — If sexual contact occurred within 90 days before diagnosis, partner(s) should be tested <u>and</u> treated presumptively for early syphilis. If sexual contact occurred more than 90 days before diagnosis, presumptive treatment is indicated if testing is not readily available or follow-up is uncertain. Otherwise, testing can be used to guide treatment.
Secondary	Rash or mucus membrane lesions	Generalized body rash, palmar or plantar rash, mucus patches (highly infectious), alopecia, condylomata lata (highly infectious).		
Early latent	None	<p>Infection occurred within the preceding 12 months, as indicated by one or more of the following:</p> <ul style="list-style-type: none"> <li>• Documented seroconversion or sustained (longer than two weeks) fourfold or greater increase in RPR titers within the preceding 12 months</li> <li>• Signs or symptoms of primary or secondary syphilis within the preceding 12 months</li> <li>• Sexual exposure within the preceding 12 months to a partner who had primary, secondary, or early latent syphilis</li> <li>• First and only sexual contact within the preceding 12 months</li> </ul>	<p>Benzathine penicillin G 2.4 million units intramuscular in a single dose</p> <p>Alternative*: Doxycycline 100 mg orally twice daily for 14 days</p>	
Late latent	None	Infection occurred longer than 12 months ago or exact date of exposure is unknown.	<p>Benzathine penicillin G 7.2 million units, administered as three doses of 2.4 million units intramuscular at one-week intervals</p> <p>Alternative*: Doxycycline 100 mg orally twice daily for 28 days</p>	Partners within the previous 12 months should be referred for testing.

\* Doxycycline is contraindicated and should not be used for pregnant patients. Penicillin G benzathine (Bicillin L-A) is the only recommended treatment for pregnant patients diagnosed with syphilis.

Note: Central nervous system involvement may occur at any stage of syphilis. Treatment for neurosyphilis, ocular syphilis, and otosyphilis differs from those listed in the above table; for information on recommended treatments, see STI Treatment Guidelines at [astda.org/federal-guidelines-reports-and-resources](http://astda.org/federal-guidelines-reports-and-resources).