

## Syphilis

Syphilis is a sexually transmitted infection (STI), which was considered nearly extinct in Spain until 2000. However in the United Kingdom and other countries surrounding us, the 'STIs' have had quite an alarming sprout. A new rise of 'STI' (Syphilis and other infections) has started to show up in Spain since 2003 both in general population and people with HIV. Immigrants are not exempted from this risk.

If not treated, syphilis can damage the heart and the brain, and can provoke the death. Curing syphilis in people with HIV can be a lot more difficult. Therefore it is of great importance that the illness is treated on time.

### Transmission

Syphilis is a complex infection caused by a bacterium. There are 3 stages of the illness: Primary syphilis, secondary syphilis and tertiary syphilis. During the primary and secondary stages the illness is alarmingly contagious. Syphilis can be contracted through contact with the ulcers caused by anal, oral or vaginal sexual relations without protection.

It can also be transmitted through intimate physical contact with the skin rashes and wounds that can appear in any part of the body and through contact with the blood. Syphilis can also be transmitted from mother to child.

The syphilis of a person with HIV might become more infectious if the primary and secondary syphilis have not been treated. Having syphilis can also increase the possibility of being infected with the HIV of an HIV negative person if he is exposed to the virus.

### Prevention

If you use condoms in anal, oral or vaginal sexual relations, you are protected against infection with syphilis and they also avoid the transmission of the bacterium to other people. However the protection is not totally perfect since the skin rashes and wounds do not necessarily have to be in the genital area. Sexually active people are advised to have regular medical check-ups to determine if they have contracted syphilis or other 'STIs'.

Most centres where they treat HIV are associated with other sexual health centres, where a free and confidential treatment can be obtained without seeing the general practitioner or the HIV doctor (See *InfoVIHta#25: Sexual health check-ups*).

### Symptoms

Syphilis can cause a series of symptoms or none. In the first stage of the illness, the symptoms are easily confusing. At times syphilis progresses faster and more seriously in people with HIV, and can show slightly different symptoms.

Short time after contracting syphilis (Primary syphilis), a small injury wound or ulcer (called chancroid) can appear in the place, where the infection has been produced, normally on the penis, the anus or the area around it, in the vagina or the area around it or in the mouth. Chancroid is not painful and usually cures fast by itself. An inflammation of glands can also be produced.

Secondary syphilis can provoke skin rashes, inflammation of glands, fever, muscular pain, headache, buzzing sounds in the ears and in rare cases meningitis. Dark brown skin rashes, size of a cent coin, can also appear on the palms of the hands or the soles of the feet. The rash and the possible wounds can turn out to be very infectious. Secondary syphilis normally develops during the subsequent six months after the infection.

Tertiary syphilis normally develops during the ten years after the infection and can provoke lesions in most of the internal organs and the brain (neurosyphilis). If syphilis is not treated, it can provoke death.

### Diagnosis

An examination, which determines possible illnesses of sexual transmission, must include a blood analysis for syphilis. The body can take up to 3 months to develop antibodies for the bacterium that causes syphilis. So an analysis carried out short time after the infection may not detect it. There is evidence that suggests that analyses to determine the existence of syphilis are not totally reliable in HIV positive people. If there is suspicion that the infection can affect the brain, lumbar puncture can be carried out to determine the expansion of the infection.

### Treatment

Syphilis is usually treated by a series of penicillin injections. In case there is allergy to penicillin, the treatment consist of an alternative antibiotic, provided in a series of tablets or it is also possible to overcome the allergy to penicillin, providing during a short time a series of slightly higher dosage. People with HIV normally get higher dosage of medication during more time. To make sure that syphilis is completely cured, it is of vital importance to complete the

treatment until the end, using injections or tablets. To prevent the transmission of syphilis to other people or being reinfected by the bacterium, it is important that there will be no sexual relations until the treatment has finished and you are discharged by the doctor.

To make sure that the infection has been completely eliminated, a successive blood analysis carried out after the doctor's discharge, in the following months 1,2,3,6,12 and 24.

