INTERIM GUIDELINE ON SYphilIS SCREENING IN PREGNANCY

In April 2019, the first case of congenital syphilis in British Columbia since 2013 was reported. A second case of congenital syphilis was reported in May 2019 in a stillborn delivered in January 2019. Current and past practice in BC has included screening for syphilis as part of routine care in the first trimester; historically subsequent syphilis screening has not been routinely recommended unless there was concern for syphilis risk during pregnancy.

There have been ongoing discussions between the BC Centre for Disease Control’s Sexually Transmitted Infections (BCCDC STI) team and expert partners and stakeholders about the best way to approach syphilis screening in pregnancy. Recent epidemiologic syphilis trends seen in BC – including increased overall rates, increased rates in females of reproductive age, along with an increasing number of infectious syphilis cases among males who report both male and female sexual partners – have motivated us to rethink our existing recommendations. The goal is to maximize detection and prevention of congenital syphilis, while maintaining a responsible approach to screening. The following interim guidelines regarding syphilis screening in pregnancy will be reviewed as the epidemiology of syphilis in the province evolves. We anticipate keeping these guidelines in place for approximately one year.

We recommend the following guidelines for prenatal syphilis screening:

All pregnant individuals should have syphilis screening performed at two time points:

1. During the first trimester of pregnancy or at the first prenatal visit (existing recommendation); and
2. At delivery – at time of admission for delivery or any time after 35 weeks for those planning home births (new recommendation).

As with other perinatal screens, syphilis screening remains a choice for pregnant patients and opting out is possible. However, we are considering these guidelines the standard of care and are highly recommending screening due to the infectious, yet treatable nature of syphilis. These recommendations apply to all individuals, regardless of assessed or perceived risk, and are in line with several other jurisdictions in Canada.

The new BC Public Health Laboratory (PHL) Serology Screening Requisition is available. Continue to check off Syphilis Antibody (1st Trimester) in the prenatal screening section. Check the box for Perinatal Syphilis for the ‘at delivery’ screen. If using any other requisition (e.g., outpatient maternity requisition), include the gestational age on the requisition.

Any individual of reproductive age and able to get pregnant who is diagnosed with syphilis should have a pregnancy test performed.

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