Texas STD Surveillance Report

2022 Annual Report

HIV/STD/HCV Epidemiology & Surveillance Unit



Texas Department of State Health Services The *Texas STD Surveillance Report* is an annual report generated by:

Texas Department of State Health Services HIV/STD/HCV Epidemiology & Surveillance Unit, MC 1873 P.O. Box 149347 Austin, Texas 78714 (737)-255-4300

Important notes on the data:

The Texas Department of State Health Services (DSHS) STD Surveillance Program collects demographic, clinical, and lab-related information on people diagnosed with STDs in Texas. This information is used to inform STD prevention program planners, policymakers, and stakeholders about STD epidemiology in Texas. STD cases are reported to the STD Surveillance Program from a variety of sources, including hospitals, private physicians, clinics, counseling and testing sites, laboratories, and other case registries.

This report describes sexually transmitted diseases reported to the STD Surveillance Program from 2013 through 2022. The *Texas STD Surveillance Report* presents data by date of diagnosis and provides state and county-level case counts and rates. The report describes demographic factors, such as age, sex, and race/ethnicity, among reported sexually transmitted diseases.

Population numbers used to calculate rates for 2013-2022 data are from the U.S. Census Bureau and include estimates of the resident population of the United States from January 1, 2013, to December 1, 2022, by year, county, single year of age (0, 1, 2, ..., 85 years and over), bridged race, Hispanic origin, and sex. Data on gender identity is self-reported and not standardized in the Texas STD Surveillance Program.

Population numbers used to calculate 2013-2022 congenital syphilis rates come from vital event birth data disseminated by the Center for Health Statistics at the Texas Department of State Health Services. A delay in updating the race/ethnicity field for chlamydia and gonorrhea data resulted in many cases with race/ethnicity as unknown. Ongoing data quality improvement will address this for future reporting.

For more information, please contact <u>HIVSTDdata@dshs.texas.gov</u>.

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Terms and Resources

Surveillance Case Definitions

A surveillance case definition consists of uniform criteria used to define a disease for public health surveillance. These definitions allow public health officials to classify and count cases consistently across reporting jurisdictions. Surveillance case definitions are not intended for use by healthcare providers making clinical judgements. For more information on surveillance case definitions, visit:

Surveillance Case Definitions for Current and Historical Conditions

Reporting Rules, Surveillance Reports, and Dashboards

Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter F adopted rules and regulations for reporting sexually transmitted diseases. To obtain a copy of the rules, visit:

Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter F

To get information on how to report HIV/AIDS and STD cases, contact your local or regional health department, or visit:

HIV/STD Reporting: Information for Texas Health Care Providers and Laboratories

Please visit the Centers for Health Statistics—Texas Health Data dashboard for state and county-level STD data by age, race/ethnicity, and sex:

Texas Health Data – STD Dashboard

CHLAMYDIA: Overview and Brief Facts

Description and Background

The *Chlamydia trachomatis* bacterium causes the STD, chlamydia. It can cause cervicitis and urethritis in women, and urethritis and proctitis in men. Chlamydial infections in women can lead to serious negative outcomes, including pelvic inflammatory disease, tubal factor infertility, ectopic pregnancy, chronic pelvic pain, and eye infection.¹

Chlamydia is the most frequently reported bacterial sexually transmitted infection in the United States. It is the leading cause of blindness in children. In 2021, the Centers for Disease Control and Prevention (CDC) reported 1,644,416 cases of chlamydia from 50 states and the District of Columbia.² Underreporting occurs due to asymptomatic cases not seeking testing.¹

Impact and Risk

Two-thirds of new chlamydia infections in the U.S. occur in young people aged 15-24.³ The CDC estimates 1 in 20 sexually active females aged 15-24 has chlamydia.⁴ Substantial racial and ethnic disparities exist nationally, with prevalence among non-Hispanic Black people six times higher than non-Hispanic White people.⁵ Men who have sex with men (MSM) are at heightened risk for chlamydial infection, since chlamydia is transmitted by oral or anal sex. Among MSM screened for rectal chlamydia infection, positivity rates range from 3 percent to 10.5 percent.^{6,7} Among MSM screened for pharyngeal chlamydia infection, positivity rates range from 0.5 percent to 2.3 percent.^{7,8}

Chlamydia Screening, Treatment, and Prevention

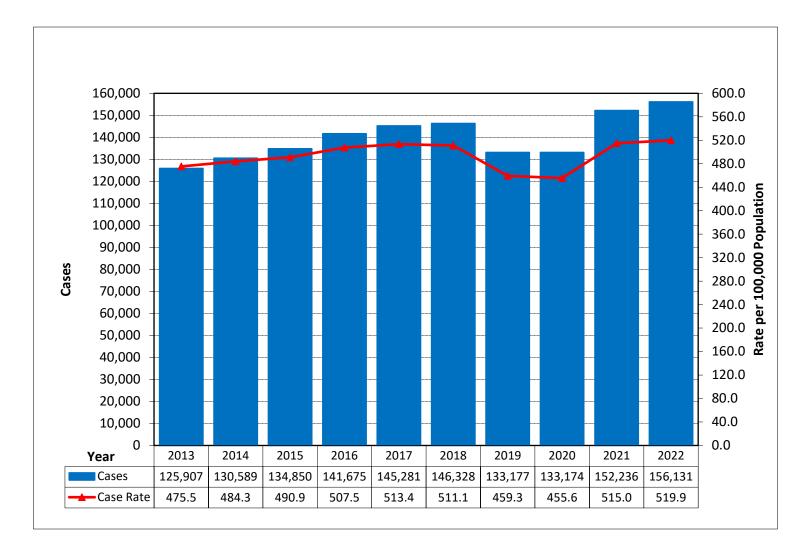
The CDC recommends yearly chlamydia screenings for all sexually active women aged 25 years or younger, and older women with risk factors for infection (e.g., women who have a new, or more than one sex partner).^{1,9} Providers must screen pregnant women during their first prenatal care visit, third trimester visit, and at birth.¹

Providers should consider screening sexually active young men in clinical settings with a high prevalence of chlamydia (e.g., correctional facilities and STD clinics).⁹ Latex condoms used consistently and correctly can reduce risk of transmitting chlamydia.¹⁰ The surest way to avoid chlamydia is to abstain from vaginal, anal, and oral sex, or maintain a long-term, mutually monogamous relationship with a partner who has tested for chlamydia and knows they are uninfected.¹

2022 State of Texas Chlamydia Quick Facts

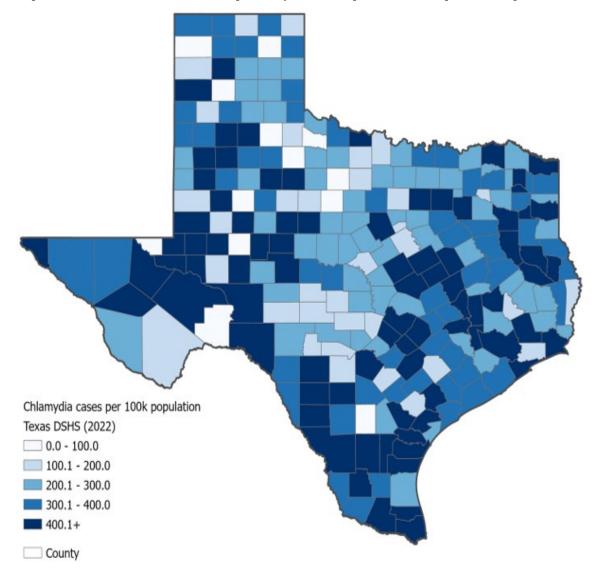
Number of reported chlamydia cases:	156,131
Chlamydia rate per 100,000 Texas residents:	519.9
Percent change in chlamydia rate from 2018 (4-year	+6.69%
percent change):	

Percent change in chlamydia rate from 2021 (1-year +2.55% percent change):



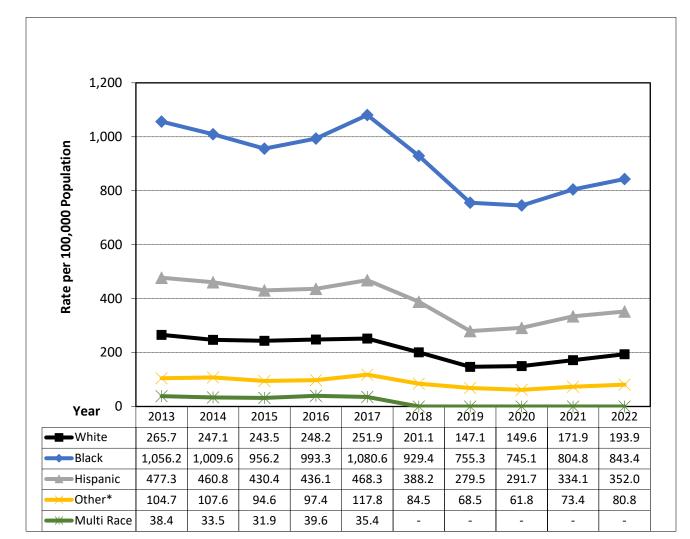
Chlamydia Cases and Case Rates by Year of Diagnosis in Texas, 2013-2022

Chlamydia Incidence Rates by 100,000 Population by County in Texas, 2022



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
	Cases									
Sex										
Male	31,273	33,916	37,144	40,938	43,416	45,398	43,639	42,801	51,646	54,996
Female	93,804	96,509	97,265	100,418	101,522	100,424	89,210	89,740	100,244	100,732
Unknown	830	164	441	319	343	506	328	633	346	403
Race										
White	30,927	28,990	28,773	29,455	29,964	23,957	17,585	17,780	20,456	23,151
Black	32,568	31,848	30,893	32,817	36,436	31,916	26,449	26,661	29,349	31,556
Hispanic	48,649	48,047	45,961	47,618	52,116	43,962	32,218	34,045	39,574	42,482
Asian + NHPI* + AIAN^	1,278	1,389	1,290	1,391	1,751	1,293	1,081	1,015	1,242	1,440
Multi Race	132	121	121	157	146	0	0	0	0	0
Unspecified + unknown	12,353	20,194	27,812	30,237	24,868	45,200	55,844	53,673	61,615	57,502
Age Group										
0 - 14	1,272	1,247	1,134	1,030	1,015	988	912	964	1,069	1,088
15 - 24	85,143	86,174	87,808	91,535	93,198	93,158	83,737	83,111	90,544	91,707
25 - 34	30,857	33,230	35,293	37,217	38,468	39,306	36,222	36,910	44,322	45,608
35 - 44	6,530	7,396	7,833	8,474	8,985	9,159	8,797	8,745	11,615	12,309
45 - 54	1,616	1,939	2,087	2,505	2,633	2,613	2,538	2,439	3,287	3,617
55 - 64	356	431	511	694	766	842	772	748	1,039	1,204
65+	99	125	114	108	170	149	146	123	182	293
Unknown	34	47	70	112	46	113	53	134	178	305
Total	125,907	130,589	134,850	141,675	145,281	146,328	133,177	133,174	152,236	156,131

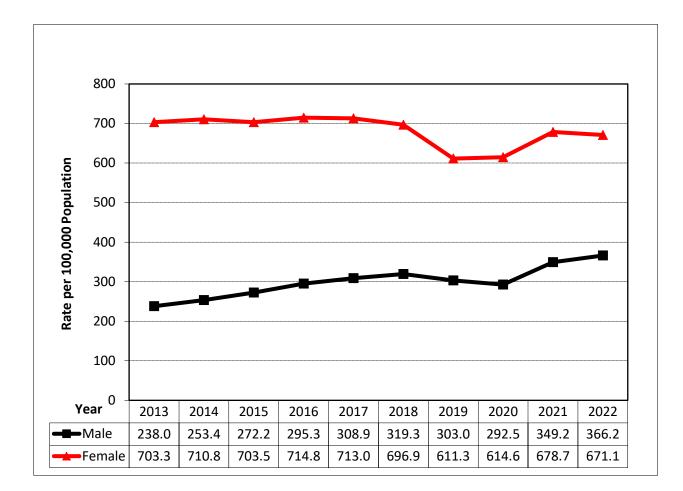
Chlamydia Cases by Sex, Race/Ethnicity, and Age Group, 2013-2022



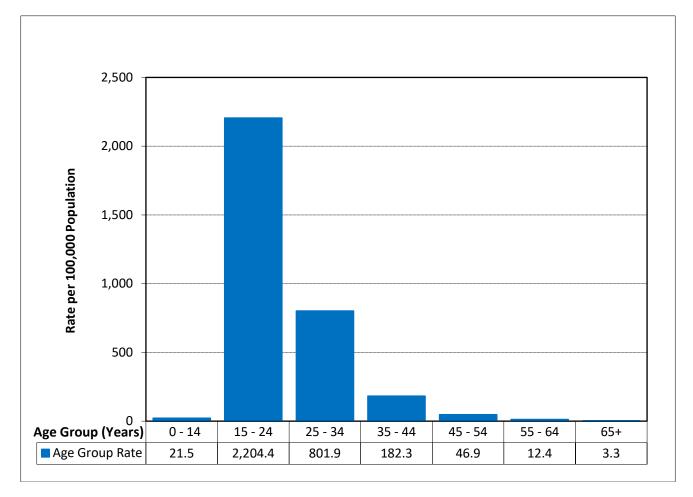
Chlamydia Case Rates by Race/Ethnicity and Year of Diagnosis in Texas, 2013-2022^

^For 2018-2022, Multi Race is included in the Other category.

*Other includes Native Hawaiian/Pacific Islander, American Indian/Alaskan Native, and Asian race/ethnic groups.



Chlamydia Case Rates by Sex and Year of Diagnosis in Texas, 2013-2022



Chlamydia Case Rates by Age Group and Rate of Diagnosis in Texas, 2022

GONORRHEA: Overview and Brief Facts

Description and Background

The *Neisseria gonorrhoeae* bacterium causes the STD, gonorrhea.¹⁰ *N. gonorrhoeae* infects the mucous membranes of the reproductive tract, including the cervix, uterus, and fallopian tubes in women, and the urethra in women and men.¹⁰ *N. gonorrhoeae* can also infect the mucous membranes of the mouth, throat, eyes, and rectum.¹⁰

The CDC estimates that 1.6 million people in the U.S. are infected annually, but only a fraction of these infections are detected and reported.¹¹ Over half of all cases occur among young people aged 15-24 years.¹¹ In 2021, the CDC identified a total of 710,151 reported cases of gonorrhea, making it the second most common notifiable sexually transmitted disease in the U.S. for that year.³

Impact and Risk

In the U.S., the CDC reports sexually active teenagers, young adults, and Black Americans have the highest rates of gonorrhea.³ Data from the STD Surveillance Network (SSuN) suggests that a third of gonorrhea cases occurred among MSM in 2021.³ From 2020–2021, rates increased among both men (6.3 percent) and women (2.3 percent).

Gonorrhea Screening, Treatment, and Prevention

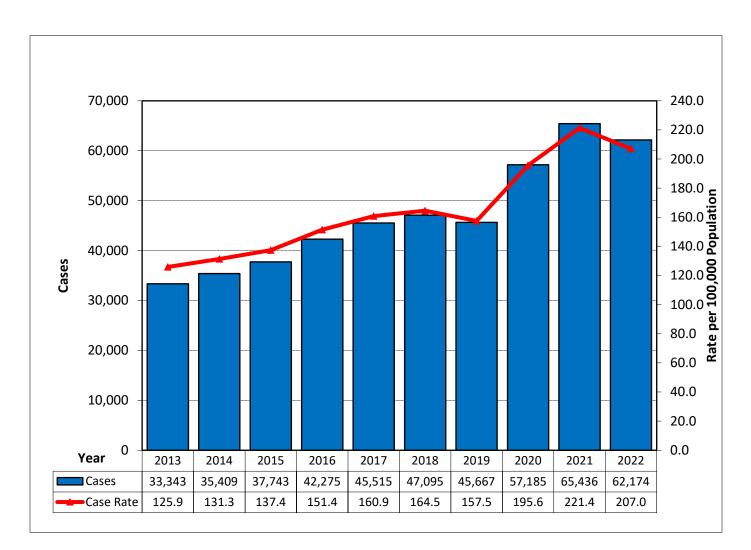
Individuals with genital symptoms such as discharge, burning with urination, genital sores, or rash should stop engaging in sex and see a health care provider immediately.¹⁰ Anyone with a sex partner recently diagnosed with an STD should see a health care provider for evaluation.¹⁰ Sexually active individuals should discuss their risk factors with a health care provider and ask if they should be tested for gonorrhea or other STDs.¹⁰

CDC now recommends a single 500mg intramuscular dose of ceftriaxone to treat gonorrhea.⁸ Although medication stops the infection, it does not repair any permanent damage done by the disease. There is increasing antimicrobial resistance in *N. gonorrhoeae*, making it more difficult to treat successfully. If a person's symptoms continue for more than a few days after receiving treatment, they should return to a health care provider for reevaluation. Latex condoms used consistently and correctly can reduce risk of transmitting gonorrhea.⁹ The surest way to avoid transmission of gonorrhea or other STDs is to abstain from sexual intercourse, or maintain a long-term, mutually monogamous relationship with a partner who has tested and knows they are uninfected.¹

2022 State of Texas Gonorrhea Quick Facts

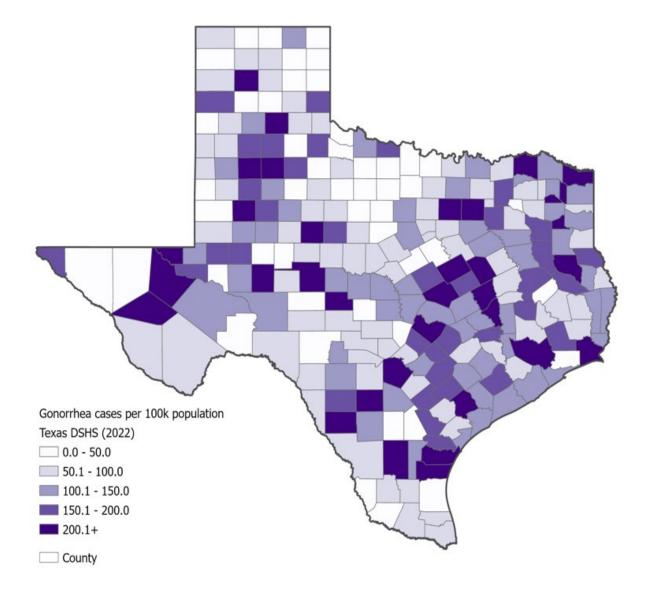
Number of reported gonorrhea cases:	62,174
Gonorrhea rate per 100,000 Texas residents:	207.0

Percent change in gonorrhea rate from 2018 (4-year +32.01% percent change): Percent change in gonorrhea rate from 2021 (1 year -4.98% percent change):



Gonorrhea Cases and Case Rates by Year of Diagnosis in Texas, 2013-2022

Gonorrhea Incidence Rates by 100,000 Population by County in Texas, 2022

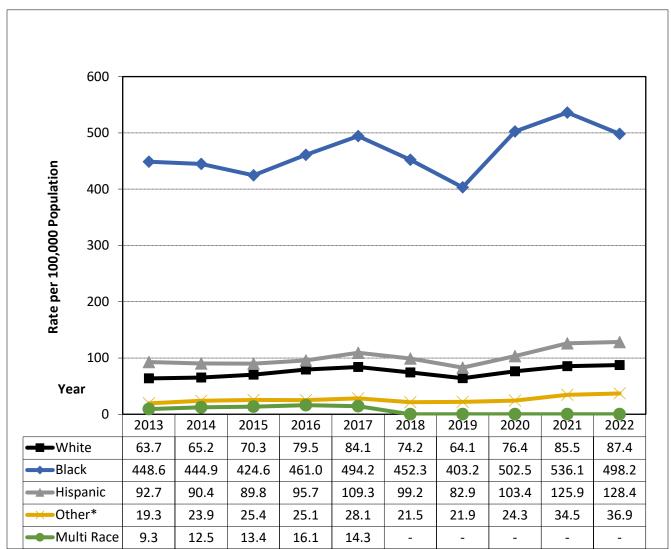


	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
	Cases									
Sex										
Male	16,239	18,077	20,785	23,728	25,213	27,075	26,779	32,609	38,132	37,939
Female	16,932	17,300	16,880	18,490	20,203	19,909	18,681	24,374	27,174	24,111
Unknown	172	32	78	57	99	111	207	202	130	124
Race										
White	7,412	7,645	8,307	9,437	10,004	8,842	7,662	9,079	10,172	10,440
Black	13,834	14,034	13,717	15,230	16,662	15,532	14,119	17,978	19,550	18,642
Hispanic	9,449	9,421	9,594	10,444	12,165	11,228	9,552	12,071	14,918	15,502
Asian + NHPI* + AIAN^	236	308	347	359	418	329	345	399	584	658
Multi Race	32	45	51	64	59	0	0	0	0	0
Unspecified + unknown	2,380	3,956	5,727	6,741	6,207	11,164	13,989	17,658	20,212	16,932
Age Group										
0 - 14	299	322	296	272	249	242	240	347	365	340
15 - 24	20,014	20,072	20,639	22,279	23,222	23,401	21,957	27,488	29,449	28,056
25 - 34	9,181	10,404	11,491	13,410	14,870	15,812	15,380	19,158	22,981	21,584
35 - 44	2,559	3,033	3,312	4,055	4,611	5,005	5,210	6,847	8,568	8,091
45 - 54	959	1,142	1,432	1,660	1,8149	1,800	1,914	2,220	2,738	2,729
55 - 64	258	342	448	474	626	683	698	836	999	1,013
65+	56	81	106	102	106	123	141	173	214	245
Unknown	17	13	19	23	12	29	127	116	122	116
	33,343		-	42,275	45,515	47,095	45,667	57,185	65,436	62,174

Gonorrhea Cases by Sex, Race/Ethnicity, and Age Group, 2013-2022

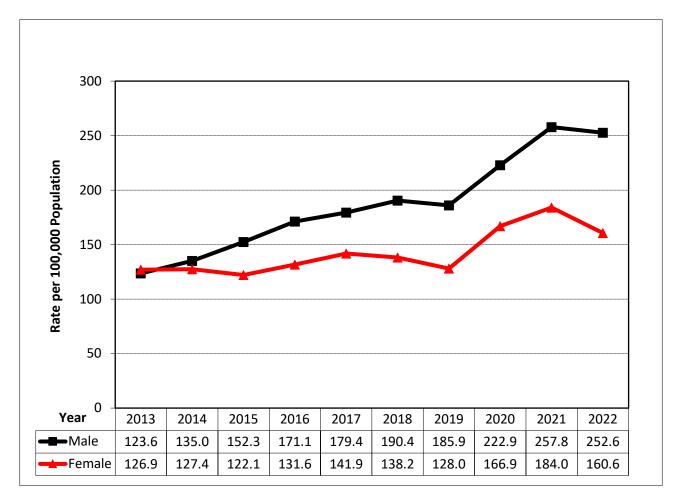
*NHPI: Native Hawaiian/Pacific Islander, ^AIAN: American Indian/Alaskan Native

Gonorrhea Case Rates by Race/Ethnicity and Year of Diagnosis in Texas, 2013-2022^

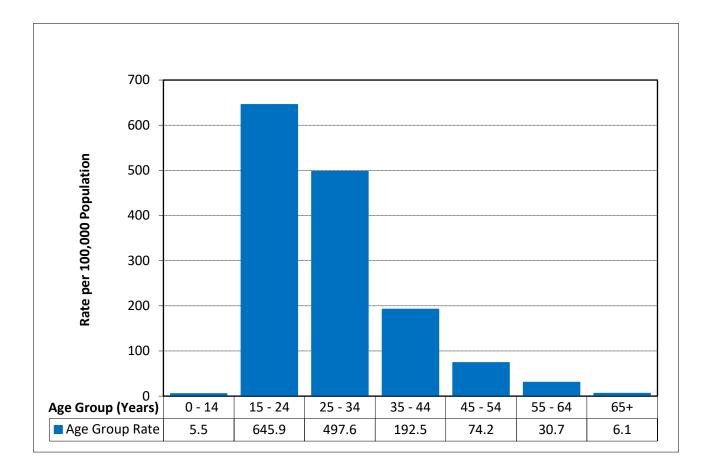


^For 2018-2022, multi-race is included in the Other category.

*Other includes Native Hawaiian/Pacific Islander, American Indian/Alaskan Native, and Asian race/ethnic groups.



Gonorrhea Case Rates by Sex and Year of Diagnosis in Texas, 2013-2022



Gonorrhea Case Rates by Age Group and Rate of Diagnosis in Texas, 2022

SYPHILIS: Overview and Brief Facts

Description and Background

The *Treponema pallidum* bacterium causes the STD syphilis, and can lead to long-term complications if not adequately treated.¹⁴ The total number of syphilis cases reported in the U.S. increased by more than 53 percent from 2018 to 2021, with 176,713 total syphilis cases reported to the CDC.¹⁵ Primary and secondary (P&S) syphilis, the earliest and most transmissible stages of syphilis, accounted for 53,767 of reported cases.¹⁵ Syphilis transmits from person-to-person by direct contact with a syphilitic sore, known as a chancre.¹⁴ Chancres occur on the external genitals, vagina, anus, or in the rectum, as well as on the lips and in the mouth.¹⁴ Transmission of syphilis occurs during vaginal, anal, or oral sex. Pregnant women with syphilis can transmit it to their unborn child, and can also pass via delivery.

Impact and Risk

From 2020 to 2021, rates of P&S syphilis increased by 28.6 percent, with increases among both men and women of every age group, in all regions of the U.S.¹⁵ Rates of P&S syphilis increased in every racial group with non-Hispanic, American Indian, and Alaskan Native groups experiencing the largest increases. MSM continue to experience disproportionate impact, with 46.5 percent of P&S cases occurring among MSM.¹⁵ Rates of P&S syphilis among women increased by 55.3 percent from 2020 to 2021, and by 217.4 percent from 2017 to 2021.¹⁵ The highest rates of reported P&S syphilis cases occurred among American Indian/Alaskan Native persons, and it disproportionately affects Black, Hispanic, and other racial and ethnic minorities in the U.S.¹⁶

Syphilis Screening, Treatment and Prevention

Providers should routinely test persons who:

- 1. Have partner(s) who have tested positive for syphilis.
- 2. Are pregnant.
- 3. Are sexually active MSM.
- 4. Are living with HIV and are sexually active.
- 5. Are taking PrEP for HIV prevention.

SYPHILIS: Overview and Brief Facts – Continued

Nontreponemal and treponemal blood tests are commonly used to diagnose syphilis. Treponemal antibodies appear earlier than nontreponemal antibodies and typically remain detectable for life, even after successful treatment.¹⁴ If using a treponemal test (FTA-ABS, TP-PA, various EIAs, and chemiluminescence immunoassays) for screening purposes and results are positive, perform a nontreponemal test (VDRL and RPR) with titer.¹⁴ This confirms diagnosis and guides clinical decisions.

Surveillance staging uniformly defines syphilis for public health surveillance activities, such as accurate staging and consistent case count reporting.¹⁶ Additionally, surveillance staging uses a combination of clinical descriptions and laboratory criteria to determine adequate treatment based on the CDC's STI Treatment Guidelines for 2021.¹⁷ Clinicians should not use surveillance staging to clinically diagnose a person.

A single intramuscular injection of long acting Benzathine Penicillin G cures primary, secondary, and early latent syphilis (also referred to as early non-primary nonsecondary syphilis).⁹ For individuals with unknown duration or late syphilis, CDC recommends three doses of long-acting Benzathine Penicillin at weekly intervals.⁹ Treatment kills the syphilis bacterium and prevents further damage, but does not repair damage already done.

Correct and consistent use of latex condoms reduces the risk of syphilis only if the condom protects the infected area or site of potential exposure.¹⁰ However, a syphilis sore outside of the area covered by a latex condom still allows transmission, so individuals should exercise caution when using a condom.¹⁴ The surest way to avoid transmission of sexually transmitted diseases, including syphilis, is to abstain from sexual contact, or maintain a long-term, mutually monogamous relationship with a partner who has tested and knows they are uninfected.¹

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2022 State of Texas Total Syphilis Quick Facts

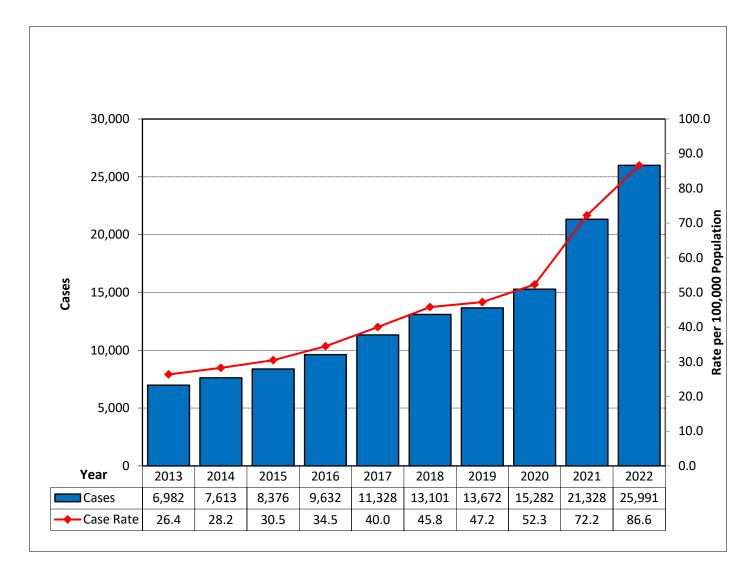
25,991
86.6
+98.38%
+21.86%

2022 State of Texas Primary and Secondary Syphilis Quick Facts

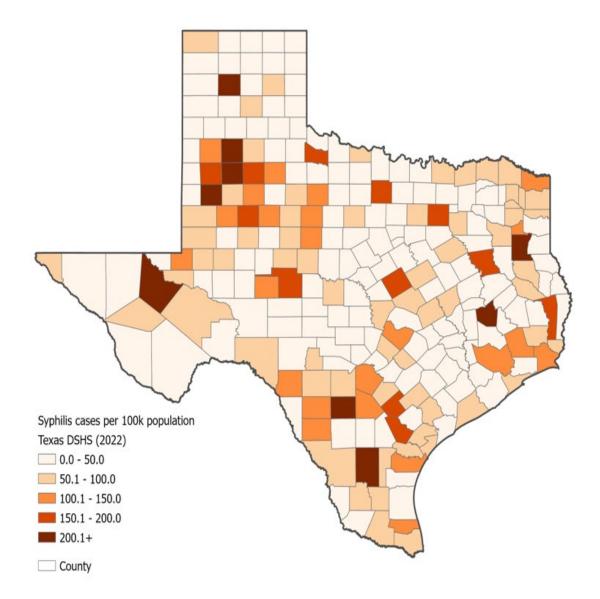
Number of reported primary and secondary syphilis cases: 4,655

Primary and Secondary Syphilis rate per 100,000 Texas	15.5
residents:	
Percent change in primary and secondary rate from 2018	+78.76%
(4-year percent change):	
Percent change in primary and secondary rate from 2021	+18.56%
(1-year percent change):	





Syphilis Incidence Rates by 100,000 Population by County in Texas, 2022



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases
Sex										
Male	5,353	5,866	6,579	7,752	9,085	10,304	10,249	11,349	14,983	17,121
Female	1,629	1,747	1,795	1,880	2,242	2,790	3,410	3,922	6,339	8,256
Unknown	0	0	2	0	1	7	13	11	6	14
Race										
White	1,605	1,742	1,962	2,257	2,503	2,696	2,688	3,153	4,624	5,693
Black	2,415	2,700	2,652	3,071	3,593	4,125	4,084	4,766	6,243	7,029
Hispanic	2,770	2,906	3,422	3,999	4,729	5,386	5,628	5,975	8,441	10,812
Asian + NHPI* + AIAN^	86	123	136	154	178	197	187	209	240	307
Multi Race	14	18	20	23	31	0	0	0	0	0
Unspecified + unknown	92	124	184	128	294	697	1,085	1,179	1,780	2,150
Age Group										
0 - 14	5	8	9	8	6	10	15	9	22	39
15 - 24	1,830	2,070	2,177	2,467	2,736	3,055	3,170	3,296	4,484	5,200
25 - 34	2,311	2,675	3,030	3,591	4,501	5,122	5,492	6,226	8,543	10,058
35 - 44	1,375	1,439	1,594	1,786	2,097	2,538	2,609	3,089	4,773	6,169
45 - 54	993	937	1,037	1,198	1,350	1,508	1,461	1,641	2,119	2,688
55 - 64	324	357	403	440	508	673	743	801	1,102	1,451
65+	144	127	126	142	129	193	181	219	283	383
Unknown	0	0	0	0	1	2	1	2	3	3
	6,982	7,613	-	9,632	11,328	13,101	13,672	15,282	21,328	25,991

Total Syphilis Cases by Sex, Race/Ethnicity, and Age Group, 2013-2022

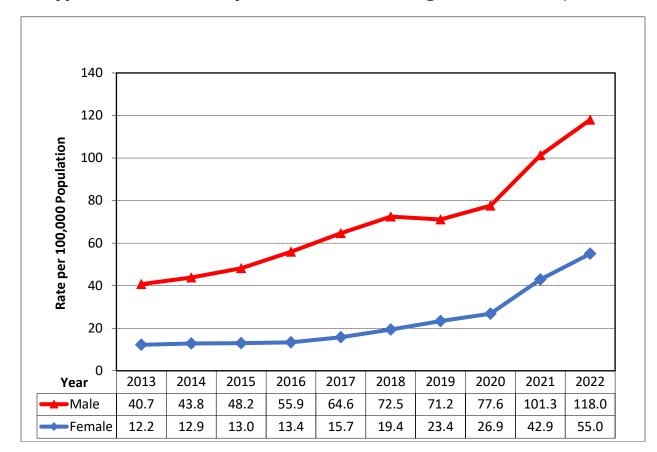
*NHPI: Native Hawaiian/Pacific Islander, ^AIAN: American Indian/Alaska Native

200 180 160 Rate per 100,000 Population 140 120 100 80 60 40 20 0 Year 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 White 13.8 14.8 16.6 19.0 21.0 22.6 22.5 26.5 38.9 47.7 187.9 Black 78.3 85.6 82.1 92.9 106.6 120.1 116.6 133.2 171.2 Hispanic 27.2 27.9 32.0 36.6 42.5 47.6 48.8 51.2 71.3 89.6 Other* 7.0 9.5 10.0 10.8 12.0 12.9 11.9 12.7 14.2 17.2 Multi Race 4.1 5.0 5.3 5.8 7.5 _ _ _ _ _

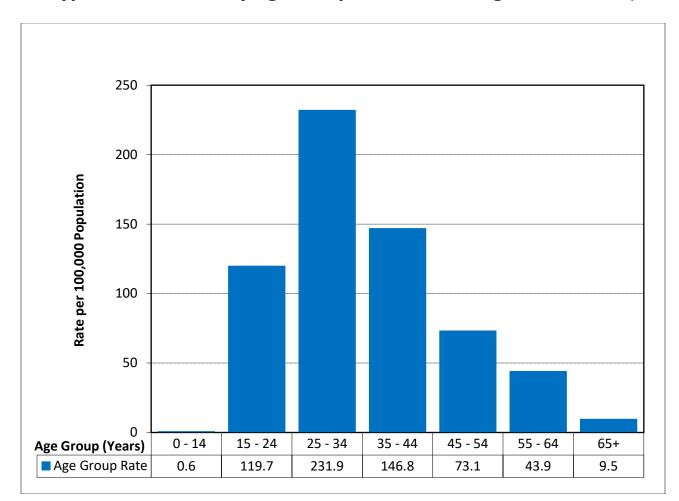
Total Syphilis Case Rates by Race/Ethnicity and Year of Diagnosis in Texas, 2013-2022^

^For 2018-2022, multi-race is included in the Other category.

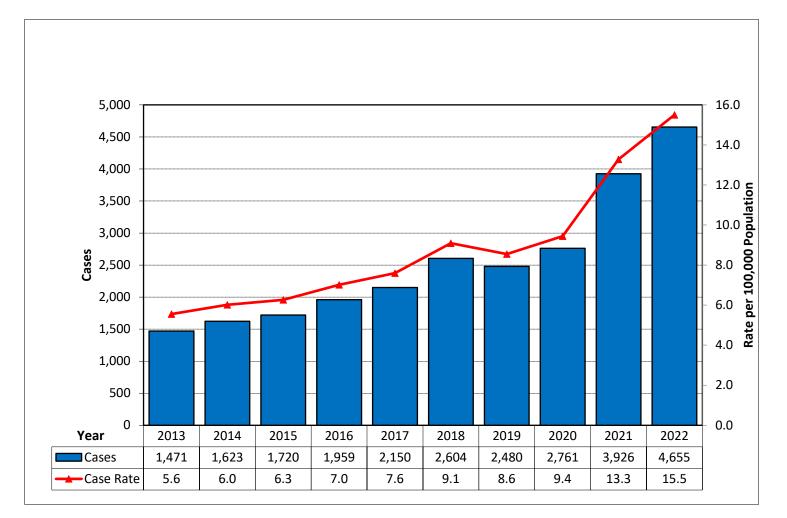
*Other includes Native Hawaiian/Pacific Islander, American Indian/Alaskan Native, and Asian race/ethnic groups.



Total Syphilis Case Rates by Sex and Year of Diagnosis in Texas, 2013-2022

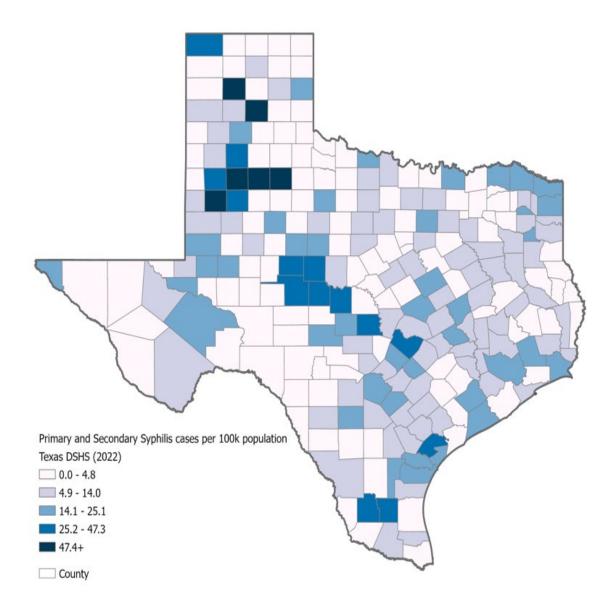


Total Syphilis Case Rates by Age Group and Rate of Diagnosis in Texas, 2022



Total Primary and Secondary Syphilis Cases and Case Rates by Year of Diagnosis in Texas, 2013-2022

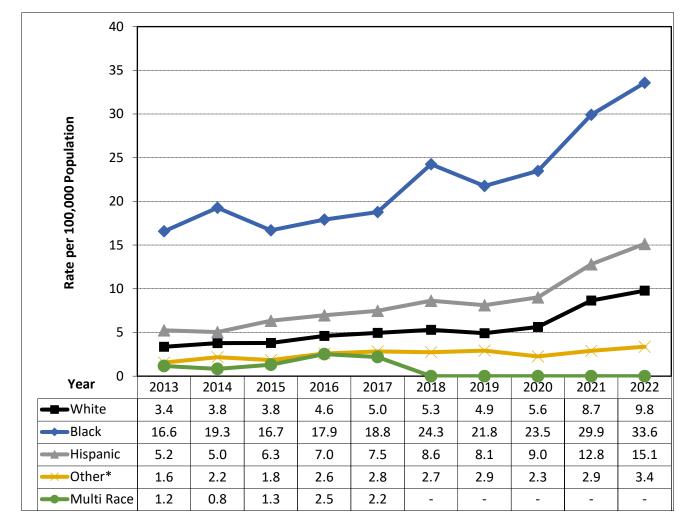
Primary and Secondary Syphilis Incidence Rates by 100,000 Population by County in Texas, 2022



	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
	Cases									
Sex										
Male	1,285	1,379	1,485	1,726	1,846	2,183	2,053	2,200	2,914	3,390
Female	186	244	235	233	304	419	423	560	1,011	1,265
Unknown	0	0	0	0	0	2	4	1	1	0
Race										
White	391	444	450	546	590	632	581	670	1,030	1,168
Black	511	508	539	592	633	833	762	840	1,091	1,256
Hispanic	535	526	677	760	832	977	935	1,053	1,518	1,827
Asian + NHPI* + AIAN^	19	28	25	37	42	42	46	37	49	60
Multi Race	4	3	5	10	9	0	0	0	0	0
Unspecified + unknown	11	14	24	14	44	120	150	161	238	344
Age Group										
0 - 14	0	3	0	1	1	2	3	3	3	11
15 - 24	438	531	564	595	590	728	651	690	930	1,080
25 - 34	515	590	645	752	883	1,041	1,034	1,145	1,574	1,778
35 - 44	269	269	264	314	355	427	389	495	843	1,049
45 - 54	177	169	162	211	227	261	261	287	349	464
55 - 64	55	54	67	67	78	116	117	123	186	228
65+	17	7	18	19	16	27	25	18	41	45
Unknown	0	0	0	0	0	2	0	0	0	0
Total	1,471	1,623	1,720	1,959	2,150	2,604	2,480	2,761	3,926	4,655

Total Primary and Secondary Syphilis Cases by Sex, Race/Ethnicity, and Age Group, 2013-2022

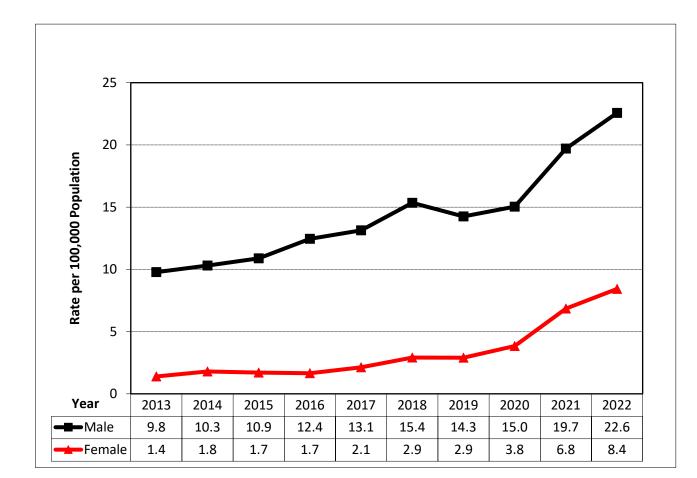
*NHPI: Native Hawaiian/Pacific Islander, ^AIAN: American Indian/Alaska Native



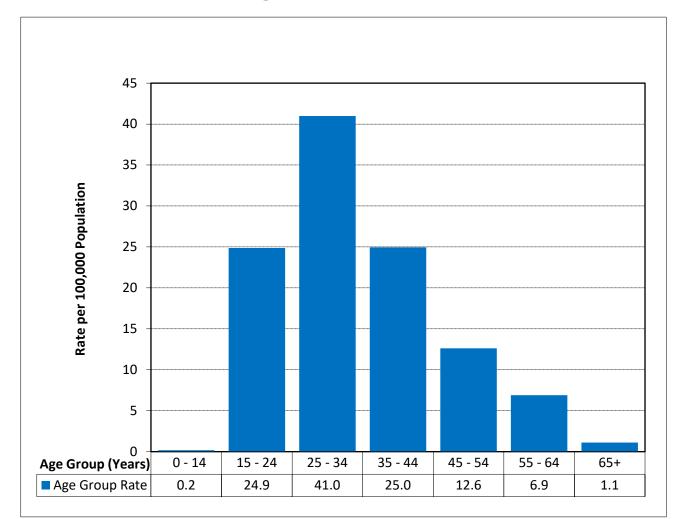
Total Primary and Secondary Syphilis Case Rates by Race/Ethnicity and Year of Diagnosis in Texas, 2013-2022^

[^]For 2018-2022, multi-race is included in the Other category.

*Other includes Native Hawaiian/Pacific Islander, American Indian/Alaskan Native, and Asian race/ethnic groups.



Total Primary and Secondary Syphilis Case Rates by Sex and Year of Diagnosis in Texas, 2013-2022



Total Primary and Secondary Syphilis Case Rates by Age Group and Year of Diagnosis in Texas, 2022

CONGENITAL SYPHILIS: Overview and Brief Facts

Description and Background

The *Treponema pallidum* bacterium causes congenital syphilis (CS). CS is syphilis transmitted during pregnancy or at delivery by an untreated or inadequately treated woman with syphilis to her baby. CS can lead to miscarriage, stillbirth, preterm delivery, birth defects, and perinatal death. Some infants with CS are asymptomatic and healthy at birth but develop life-altering complications later in life. ¹⁷ According to the Centers for Disease Control and Prevention (CDC), 40 percent of babies born to women with untreated syphilis are stillborn or die as newborns. ¹⁵

Early CS occurs when a child exhibits symptoms from birth up to their second birthday, and late CS occurs when symptoms start after age two. Early CS may cause vision or hearing loss, inflammation of the liver causing jaundice of the skin and eyes, long bone abnormalities, developmental delays, snuffles (a physical symptom of CS consisting of mucous around the eyes, nose, and mouth), rashes, wart-like lesions on the genitals, and other symptoms. Infants with snuffles are highly contagious to those caring for them. Clinical manifestations of late CS include problems with bone and tooth development, hearing, and vision, as well as the central nervous and cardiovascular systems. Timely prenatal care, testing, and treatment can prevent CS in babies born to infected mothers.²

Impact and Risk

Since 2013, national CS rates have increased. In 2022, 3,755 CS cases were reported nationally, including CS-related stillbirths, and 51 infant deaths.^{20,21} Texas accounted for 25 percent of total CS cases in the U.S. In 2022, Texas reported 922 cases at a rate of 230 per 100,000 live births, which is a 34 percent increase from 2021. The 922 reported cases for 2022 represent more than a 147 percent increase in CS cases since 2018. In 2022, 107 Texas counties reported at least one CS case compared to 2021, when 78 Texas counties reported at least one CS case. Highest rates occurred among people who identify as Black (524.2 cases per 100,000 live births), followed by Hispanics (236.2 cases per 100,000 live births), Whites (171.2 cases per 100,000 live births), and others (33.5 cases per 100,000 live births).

CONGENITAL SYPHILIS: Overview and Brief Facts - Continued

Syphilis Screening and Treatment Among Women of Childbearing Age

The Texas Health and Safety Code §81.090 mandates syphilis screening during pregnancy:

- · At the first prenatal care examination;
- · During the third trimester (no earlier than 28 weeks of gestation); and
- \cdot At delivery.

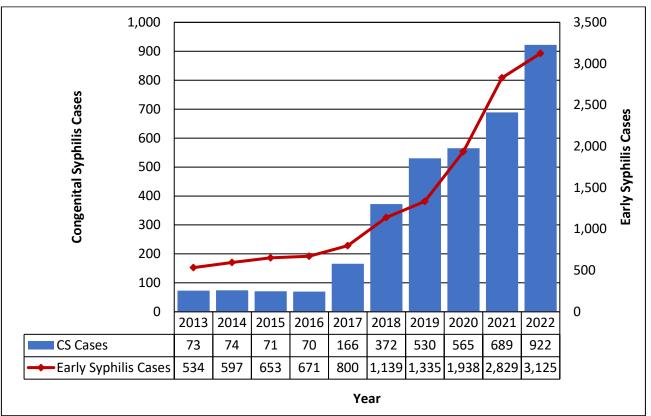
CDC recommends people who experience a stillbirth after 20 weeks of gestation should test for syphilis. A penicillin-based regimen is the only effective treatment during pregnancy to treat syphilis and prevent transmission to the infant. Treatment with penicillin results in a success rate of 98 percent in preventing *in utero* transmission. Pregnant women who report a penicillin allergy should be referred to a specialist for desensitization and receive treatment with penicillin.¹⁵

CS Screening and Treatment

At the time of delivery, an infected infant may not exhibit signs or symptoms. If not treated immediately, the infant may develop serious health problems. Untreated infants may experience developmental delays, seizures, or death. Infants born to women who test positive for syphilis during pregnancy should have thorough screenings and examinations for evidence of CS.¹⁷

2022 State of Texas CS Quick Facts

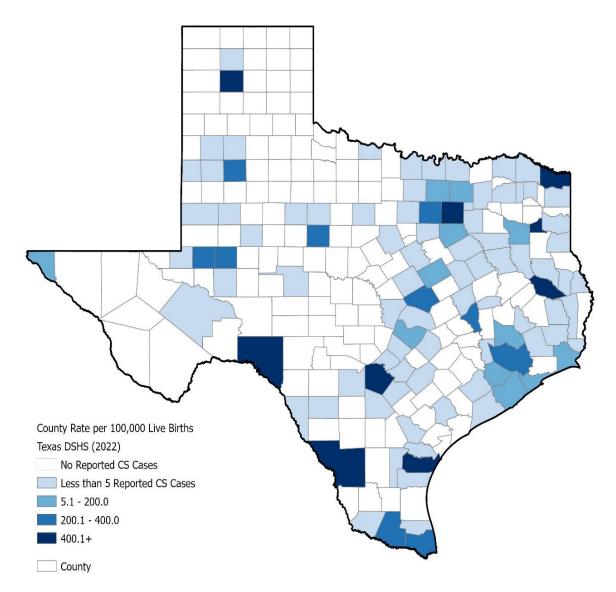
Number of reported CS cases:	922
CS rate per 100,000 Texas residents:	230.0
Percent change in congenital syphilis rate from	+147.84%
2018 (4-year percent change):	
Percent change in congenital syphilis rate from	+33.81%
2021 (1-year percent change):	

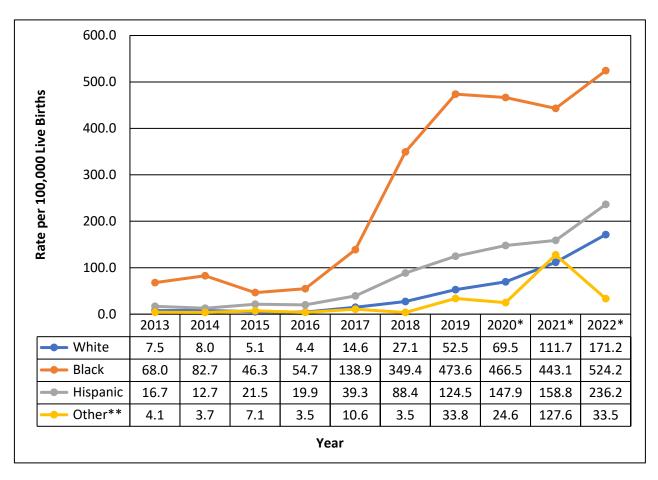


Congenital Syphilis Cases and Early Syphilis Cases* Among Women of Childbearing Age by Diagnosis Year in Texas, 2013-2022

*Early Syphilis cases include primary, secondary, and early non-primary non-secondary cases.

Congenital Syphilis Incidence Rates by 100,000 Live Births by County in Texas, 2022





Congenital Syphilis Rates⁺ by Race/Ethnicity in Texas, 2013-2022*

[†]Rates represent cases per 100,000 live births.

*2020, 2021, and 2022 rates are based on provisional 2020, 2021, and 2022 birth data.

**Other includes Native Hawaiian/Pacific Islander, American Indian/Alaskan Native, and Asian race/ethnic groups.

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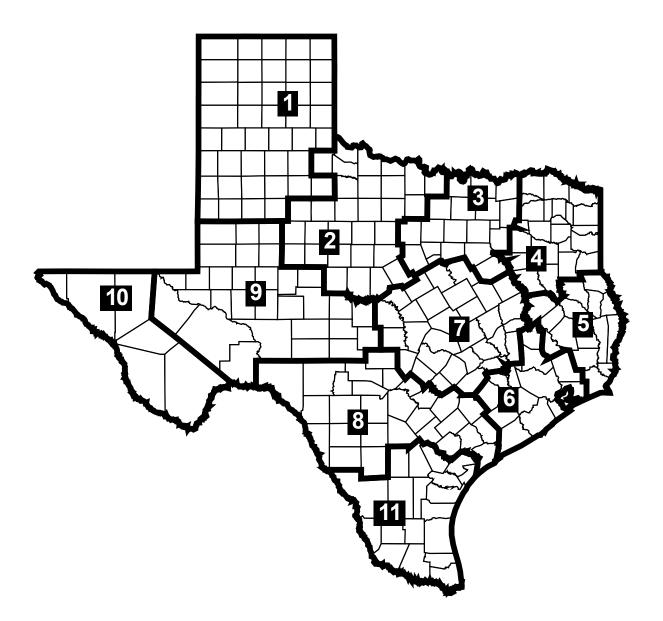
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Appendix A

Geographic Breakdowns And Rankings

Public Health Regions in Texas, 2022



	S	TD Cases	and Rate	s by Publ	ic Health	Region	in Texas,	2022		
Public Health	Chlan	Chlamydia Gonorrhea		P&S Syphilis		Congenital Syphilis		Total Syphilis		
Region	Cases	Rate*	Cases	Rate*	Cases	Rate*	Cases	Rate*	Cases	Rate*
Region 1	4,759	546.4	2,572	295.3	118	13.5	29	257.0	382	43.9
Region 2	1,894	341.4	817	147.3	23	4.1	14	223.9	111	20.0
Region 3	34,863	416.5	16,713	199.7	596	7.1	252	237.1	4,488	53.6
Region 4	4,092	348.4	1,911	162.7	55	4.7	43	318.8	362	30.8
Region 5	3,158	410.4	1,372	178.3	65	8.4	24	265.3	243	31.6
Region 6	32,480	432.0	13,944	185.5	773	10.3	197	204.7	4,294	57.1
Region 7	19,825	515.1	9,021	234.4	445	11.6	58	123.1	1,594	41.4
Region 8	15,283	489.1	6,300	201.6	369	11.8	140	363.7	1,902	60.9
Region 9	2,797	438.0	1,099	172.1	52	8.1	27	274.4	314	49.2
Region 10	4,417	495.4	1,192	133.7	45	5.0	16	139.6	266	29.8
Region 11	9,806	432.4	2,460	108.5	175	7.7	122	369.7	1,029	45.4
State Total	133,374	444.1	57,401	191.1	2,716	9.0	922	230.0	14,985	49.9

*Rates represent cases per 100,000 population

	25 Counties with the Highest STD Case Numbers in Texas, 2022										
	Chlamy	dia	Gonorrh	iea	P&S Sy	philis	Total Syphilis				
Rank	County	Cases	County	Cases	County	Cases	County	Cases			
1	Harris	31,406	Harris	12,935	Harris	1,082	Harris	5,670			
2	Dallas	22,073	Dallas	10,696	Bexar	500	Dallas	4,223			
3	Bexar	12,305	Bexar	5,983	Tarrant	442	Bexar	2,602			
4	Tarrant	9,937	Travis	4,661	Travis	418	Tarrant	1,570			
5	Travis	9,452	Tarrant	4,316	Dallas	307	Travis	1,470			
6	El Paso	5,112	El Paso	1,351	Lubbock	218	El Paso	686			
7	Hidalgo	3,938	Bell	1,311	El Paso	143	Lubbock	641			
8	Bell	3,224	Collin	1,079	Nueces	83	Hidalgo	483			
9	Collin	2,818	Nueces	1,026	Potter	77	Nueces	461			
10	Lubbock	2,649	Lubbock	1,011	Hidalgo	67	Collin	345			
11	Nueces	2,578	Denton	979	McLennan	63	Potter	328			
12	Denton	2,575	Hidalgo	835	Bell	62	Denton	298			
13	Cameron	2,363	Fort Bend	789	Hays	56	Jefferson	275			
14	Fort Bend	2,330	Jefferson	737	Fort Bend	54	Cameron	272			
15	Williamson	1,886	Potter	686	Jefferson	52	Bell	260			
16	McLennan	1,665	Williamson	684	Montgomery	51	Fort Bend	252			
17	Brazos	1,600	McLennan	664	Collin	50	Montgomery	235			
18	Brazoria	1,545	Brazos	615	Denton	48	Taylor	214			
19	Potter	1,521	Brazoria	519	Williamson	43	Galveston	206			
20	Montgomery	1,494	Galveston	508	Tom Green	42	Williamson	200			
21	Galveston	1,486	Montgomery	439	Ector	36	Tom Green	195			
22	Jefferson	1,461	Smith	435	Taylor	33	McLennan	195			
23	Smith	1,382	Hays	427	Brazos	31	Webb	193			
24	Hays	1,343	Cameron	392	Midland	30	Hays	171			
25	Webb	1,268	Gregg	308	Webb	29	Coryell	166			

25 Counties with the Highest STD Case Rates in Texas, 2022								
	Chlamydia		Gonorrhea		P&S Syphilis		Total Syphilis	
Rank	County	Rate*	County	Rate*	County	Rate*	County	Rate*
1	Reeves	4,277.4	Loving	3,921.6	Crosby	100.0	Reeves	333.2
2	Potter	1,315.2	Potter	593.2	Lubbock	68.6	Terry	293.9
3	Frio	1,246.1	Reeves	426.2	Potter	66.6	Potter	283.6
4	Dimmit	1,216.2	Dallas	411.3	Terry	60.5	Hale	254.5
5	Dallas	848.7	Travis	351.4	Dickens	57.9	Frio	247.0
6	Lubbock	834.2	Bell	337.6	Armstrong	54.1	Duval	232.6
7	Bell	830.1	Lubbock	318.4	Hockley	47.3	Rusk	217.5
8	Kleberg	790.5	Bowie	309.7	Jim Hogg	42.0	Walker	204.1
9	Reagan	765.6	Jefferson	293.8	McCulloch	40.0	Lubbock	201.9
10	Nueces	733.1	Nueces	291.7	Tom Green	35.3	Bee	197.4
11	Travis	712.6	Bexar	290.5	Lynn	34.9	Coryell	195.2
12	Gregg	691.9	Dimmit	286.2	Hale	34.6	Foard	189.2
13	Walker	680.9	Nolan	283.3	Travis	31.5	Hockley	189.0
14	Ector	667.6	Victoria	277.8	Llano	31.1	Crosby	180.1
15	Bowie	663.9	Harris	270.6	Runnels	30.4	Borden	170.9
16	Brazos	661.1	Kleberg	260.2	Refugio	30.2	Jack	168.1
17	Terry	657.0	Frio	258.2	Coke	30.0	Anderson	165.3
18	Harris	656.9	Morris	256.6	Concho	29.9	Tom Green	164.0
19	Zavala	650.5	Robertson	256.5	Brooks	29.0	Dallas	162.4
20	Tom Green	641.8	Brazos	254.1	Dallam	27.6	Karnes	161.8
21	Hale	634.7	Menard	254.1	Mason	25.1	Jasper	160.1
22	Uvalde	629.5	McLennan	248.8	Bowie	25.0	Haskell	148.1
23	McLennan	624.0	Gregg	245.5	Bexar	24.3	Taylor	147.4
24	Victoria	619.3	Duval	242.7	Scurry	24.0	Jones	145.5
25	Duval	616.9	Dawson	239.1	Lamar	23.8	Bowie	136.9

*Rates represent cases per 100,000 population