

Screening Pregnant Women for Syphilis Infection: U.S. Preventive Services Task Force Recommendation

Summaries for Patients are a service provided by *Annals* to help patients better understand the complicated and often mystifying language of modern medicine.

The full reports are titled “Screening for Syphilis Infection in Pregnancy: U.S. Preventive Services Task Force Reaffirmation Recommendation Statement” and “Screening for Syphilis Infection in Pregnant Women: Evidence for the U.S. Preventive Services Task Force Reaffirmation Recommendation Statement.” They are in the 19 May 2009 issue of *Annals of Internal Medicine* (volume 150, pages 705-709 and pages 710-716). The first report was written by the U.S. Preventive Services Task Force; the second report was written by T. Wolff, E. Shelton, C. Sessions, and T. Miller.

Who developed these recommendations?

The U.S. Preventive Services Task Force (USPSTF), which is sponsored by the Agency for Healthcare Research and Quality, is a group of health experts in prevention and primary care that reviews published research and makes recommendations about preventive services, including screening, counseling, and other preventive medications.

What is the problem and what is known about it so far?

Syphilis is an infection that spreads from person to person through sexual contact. In nonpregnant persons, syphilis can cause penile or vaginal discharge; skin sores or rashes; fever; and, if untreated, nervous system problems. In pregnant women, untreated syphilis can lead to serious problems in babies, including stillbirth or death soon after birth, bone deformities, and nervous system problems. Fortunately, syphilis is treatable with antibiotics. Doctors can screen patients for syphilis with a blood test and follow-up tests to confirm infection if the first test shows possible infection. Screening means testing people who do not have symptoms. In 2004, the USPSTF recommended that all pregnant women have screening tests for syphilis at their first prenatal health care visit.

How did the USPSTF develop these recommendations?

The authors reviewed published studies to identify the risks and benefits of screening pregnant women for syphilis infection. The benefits include fewer babies born with problems due to syphilis. The harms of treatment include false-positive test results, which means test results are positive when the woman really does not have syphilis. False-positive results can lead to unnecessary worry and unnecessary antibiotic treatment.

What did the authors find?

No studies have been published since the 2004 USPSTF recommendation that would support a change in the previous recommendation.

What does the USPSTF recommend that patients and doctors do?

All pregnant women should have a screening test for syphilis infection at their first prenatal visit.

What are the cautions related to these recommendations?

These recommendations apply only to screening, which means testing women who have no signs of infection. The recommendations may change if new studies become available.

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