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| Protect your baby from  congenital syphilis |
| Information for pregnant women and their partners |
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| **Protect your baby from congenital syphilis.  Get tested for syphilis during pregnancy and if you test positive, get treated quickly.**  Consider asking your partner to get tested as well.  Syphilis is a sexually transmissible infection (STI). It’s possible to get syphilis and not know it.  Congenital syphilis occurs when infection passes from a mother to her baby during the pregnancy or at the time of birth.  Congenital syphilis can cause miscarriage or stillbirth. It can also cause other serious health problems in your baby including organ, brain or nerve damage. |

**What is syphilis?**

Syphilis is caused by a bacterium called *Treponema pallidum*. It can affect both men and women and is transmitted sexually. Syphilis is highly contagious when the syphilis sore (chancre) or rash is present.

You can pick up syphilis through unprotected oral, vaginal or anal sex with a person who has recently become infected. It can also be spread through skin-to-skin contact if the syphilis rash is present.

Early treatment of syphilis is effective. However, people may not have any symptoms or may not notice the symptoms of early syphilis and therefore may not seek medical advice. Untreated syphilis may lead to severe health problems affecting many parts of the body.

**What are the signs and symptoms?**

Not all people with syphilis have symptoms so you may not know you have it unless you have a blood test.

There are three stages of infection known as primary, secondary and latent syphilis. The symptoms vary according to the stage. Common symptoms include a hard, painless sore usually on the genitals, but it may be at other sites of sexual contact such as the mouth or anus, or a flat red skin rash on the back, chest, hands and feet.

Other symptoms include fever, swelling of the glands in the groin and armpits, a genital rash, hair loss and general tiredness. People with primary or secondary syphilis can pass on the infection to their sexual partners.

Remember that it’s possible to get syphilis and not know it, because sometimes the infection causes no symptoms, only very mild symptoms, or symptoms that mimic other illnesses.

**Syphilis cases in Victoria are increasing**

The number of people with infectious syphilis in Victoria has been increasing over the past eight years in both men and women.

Congenital syphilis has re-emerged as an important public health problem in Victoria.

**What is congenital syphilis and how can it affect my baby?**

Congenital syphilis occurs when a mother with syphilis passes the infection on to their baby during pregnancy or at birth. Congenital syphilis can have serious health impacts on your baby. How congenital syphilis affects your baby’s health depends on how long you had syphilis and if, or when, you were treated for the infection.

Left untreated, syphilis during pregnancy can cause:

* miscarriage (losing the baby during pregnancy)
* stillbirth (a baby born dead)
* prematurity (a baby born early)
* low birth weight, or
* death shortly after birth.

Babies born with congenital syphilis may suffer bone deformities, severe anaemia (low blood cell count), issues with their vital organs (liver and kidneys), jaundice (yellowing of the skin or eyes), brain and nerve problems, like blindness or deafness, and skin rashes.

**Do all babies born with congenital syphilis have signs or symptoms?**

No. It is possible that a baby with congenital syphilis won’t have any symptoms at birth, but without treatment, the baby may develop serious problems. Usually, these health problems develop in the first few weeks after birth, but they can also happen years later.

Babies who do not get treatment for congenital syphilis and develop symptoms later can die from the infection. They may also have developmentally delayed or have seizures.

**I’m pregnant. Do I need to get tested for syphilis?**

Yes. All pregnant women should be tested for syphilis at least 3 times: at the first antenatal visit (the first time you see your doctor for health care during pregnancy), at 26-28 weeks and at 36 weeks (or at birth).

In addition, you should get tested if you develop any signs or symptoms of syphilis at any time during pregnancy.

**Is there treatment for syphilis?**

Yes. Syphilis is treated with penicillin. If you are allergic to penicillin, there are alternative treatments. If you test positive for syphilis during pregnancy, be sure to get treatment right away.

Abstain from sexual contact for seven days after treatment.

Although the treatment is straightforward, it is important to have repeat blood tests to check that the treatment has worked. Your doctor may recommend follow-up blood tests at three, six and 12 months after treatment. They should also test you for other STIs like gonorrhoea and chlamydia.

Having syphilis once does not protect you from getting it again. Even after you’ve been successfully treated, you can still be reinfected by having sex with a partner who still has syphilis. For this reason, you must continue to take actions that will reduce your risk of getting a new infection (e.g. using a condom during sex).

**Should my sexual partners also be treated?**

Yes. If you have been diagnosed with syphilis, all your sexual partners (both casual and regular) from the last few months should be checked by a doctor.

If you have difficulty telling your partners, the website [Let Them Know](http://www.letthemknow.org.au) <www.letthemknow.org.au> can help. As well as general advice and sample conversations it has emails, text messages and letters you can send to your partners either personally or anonymously.

The Partner Notification Officers (PNOs) from the Department of Health are also available to assist. The PNOs are nurses who can contact the sexual partners of a person diagnosed with an STI and provide advice and information on where to get tested. Any identifying information is kept confidential. The PNOs can be contacted on 9096 3367 or via email at  
[contact.tracers@dhhs.vic.gov.au](mailto:contact.tracers@dhhs.vic.gov.au)

**My baby was born with congenital syphilis. Is there a way to treat the infection?**

Yes. Babies who have congenital syphilis need to be treated right away or they can develop serious health problems. It’s also important that babies treated for congenital syphilis get follow-up care to make sure that the treatment worked.

**How can I reduce the risk of my baby getting congenital syphilis?**

Your baby will not get congenital syphilis if you do not have syphilis. There are two important things you can do to protect your baby, and the health problems associated with this infection. These are:

1. **Get tested for syphilis at least 3 times: at your first antenatal visit, at 26-28 weeks and at 36 weeks/birth.**

If you are pregnant, and have syphilis, you can still reduce the risk of congenital syphilis in your baby. Getting tested and treated for syphilis can prevent serious health complications in both mother and baby.

At your first antenatal visit, ask your doctor about getting tested for syphilis. It is important that you have an open and honest conversation with your doctor at this time.

Discuss any new or unusual physical symptoms you may be experiencing, and whether you have new or multiple sex partners. This information will allow your doctor to make the appropriate testing recommendations for you and your partner(s). Even if you have been tested for syphilis in the past, you should be tested again when you become pregnant.

If you test positive for syphilis, you will need to be treated right away. Do not wait for your next antenatal visit.

Syphilis testing in later pregnancy (at 26-28 weeks) and at 36 weeks or at the time of delivery of the baby is also recommended for all women.

If you develop any symptoms or you are concerned that you may be at increased risk of syphilis at any time during pregnancy discuss with your doctor and get tested without delay.

Talk with your doctor about your risk for syphilis. Have an open and honest conversation about your sexual history and sexual health testing. Your doctor can give you the best advice on any testing and treatment that you may need.

1. **Reduce your risk of getting syphilis before and during your pregnancy.**

Preventing syphilis in pregnant women and their sexual partners is the best way to prevent congenital syphilis.

If you are sexually active use latex condoms every time you have sex (both vaginal, anal and oral). Although condoms can prevent transmission of syphilis by preventing contact with a sore, you should know that sometimes syphilis sores occur in areas not covered by a condom and contact with these sores can still transmit syphilis.

Ask your partner to get tested as well, particularly if they have multiple partners.

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