WASHINGTON, D.C. – September 4, 2018 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on screening for syphilis infection in pregnant women. The Task Force looked at whether screening helps to prevent babies from getting congenital syphilis, which is syphilis passed from mother to baby during pregnancy. Based on the evidence, the Task Force recommends early screening for syphilis infection in all pregnant women. This is an A recommendation.

The number of babies born with syphilis in the United States is increasing, nearly doubling from 2012 to 2016 and mirroring the recent increase of syphilis among women. Syphilis during pregnancy can lead to negative birth outcomes, such as death of the baby during pregnancy or within the first month after birth, premature birth, or low birth weight. Babies born with congenital syphilis also can have birth defects, such as bone deformities, blindness, or deafness.

“Screening for and treatment of syphilis in pregnant women is extremely effective in preventing the infection from being passed to the baby,” says Task Force member Melissa A. Simon, M.D., M.P.H. “Treatment is most effective when it is done early, so we strongly recommend that all women be screened as early in their pregnancy as possible.”

A blood test is used to screen pregnant women for syphilis. If syphilis is found, the standard treatment for the disease is the antibiotic penicillin. Treatment is most effective when started early in pregnancy.

“An infected mother can pass syphilis to her baby at any time during the pregnancy, causing serious health problems for the baby, including death,” adds Task Force member Chien-Wen Tseng, M.D., M.P.H., M.S.E.E. “Since the early stages of syphilis may have no symptoms, it is important for all pregnant women to be screened to protect their health and the health of their babies.”

This recommendation statement is consistent with recommendations from other organizations. Many states also require screening all pregnant women for syphilis.

The Task Force’s recommendation and corresponding evidence summary have been published online in JAMA, as well as on the Task Force Web site at: www.uspreventiveservicestaskforce.org. A draft version of the recommendation was available for public comment from February 6 to March 5, 2018.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.
Dr. Simon is the George H. Gardner professor of clinical gynecology, the vice chair of clinical research in the Department of Obstetrics and Gynecology, and professor of preventive medicine and medical social sciences at Northwestern University Feinberg School of Medicine.

Dr. Tseng is the Hawaii Medical Service Association endowed chair in health services and quality research, a professor, and the associate research director in the Department of Family Medicine and Community Health at the University of Hawaii John A. Burns School of Medicine.

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