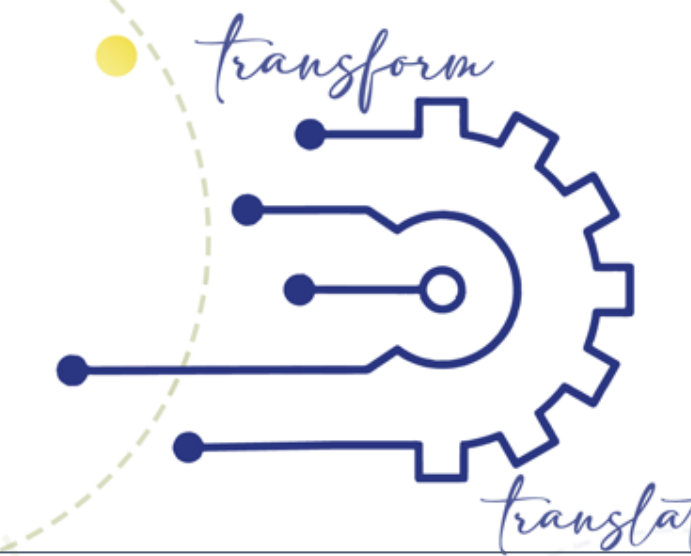


Descriptive analysis of Congenital syphilis cases at a referral regional hospital, Alfred Nzo District, Eastern Cape Province, 2021-2022

*¹Boitumelo Faro,²E. Ramusthila, ²H. Kgatla, ¹M.Makhalane, ³T.Dlamini

1. Alfred Nzo Health District, Eastern Cape Department of Health, Eastern Cape Province
 2. South Africa Field Epidemiology Training Programme, National Institute for Communicable Diseases, Johannesburg.
 3. Eastern Cape Department of Health, Bhisho, Eastern Cape Province
- *Corresponding author, B Faro . Email:faro.b.28@gmail.com Tel: +27799077360

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TRANSFORMING RESEARCH
TRANSLATION-
REIMAGINING
PUBLIC HEALTH EVIDENCE,
POLICIES, AND PRACTICE



BACKGROUND

- Congenital syphilis (CS) is a preventable infection seen in infants that spreads through the placenta to the unborn infant unknown by the infected pregnant mother.
- Prevention of CS relies on effective syphilis screening of pregnant mothers
- Persistence cases observed reflect a failure in prenatal care delivery systems.
- Mother-to-child transmission of syphilis occurs in up to 80% of cases in untreated mothers.
- In SA, CS is a Notifiable Medical Condition (NMC), and the numbers of reported cases vary widely, indicating possible underreporting.
- The current state of congenital syphilis in Alfred Nzo District is unknown

OBJECTIVES

- To describe the characteristics and clinical outcomes of infants born to mothers with reactive serologic tests for syphilis in a regional hospital.

METHODOLOGY

- A retrospective descriptive study conducted at the regional hospital, from 2021- 2022.
- All neonates with a positive rapid plasma reagin (RPR) test, meeting the NMC CS case definitions were included in the study.
- CS disease epidemiology is defined as a condition affecting an infant or child (< 2 years) whose mother had untreated or inadequately treated syphilis.
- Data collected include diagnostic tests used, co-infections, treatment, and clinical outcomes.
- Neonates were excluded if clinical data was not available.
- Descriptive statistics were used to summarise data.

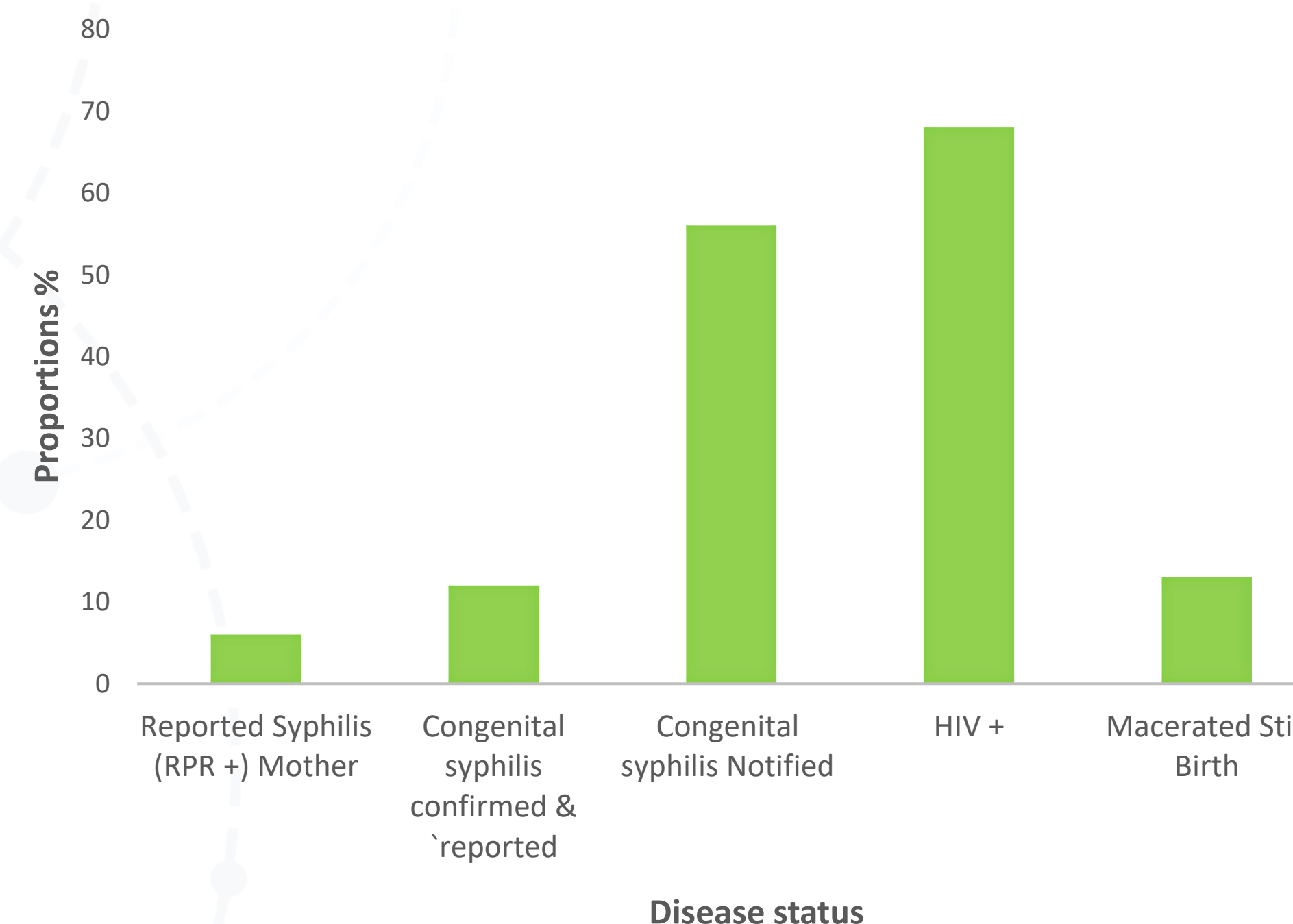


Alfred Nzo District Map

RESULTS

9 Cases reported **30% HIV co-infected** **11% case fatality**

89% treated with Benzathine penicillin



Congenital syphilis cases by disease status, Alfred Nzo District, 2021-2022

LIMITATIONS

- Data limited to one sentinel site
- Limited data on infant and maternal clinical history
- Poor completion of data collection tools
- Limited variables on data collection tools

CONCLUSIONS

- Our findings showed a low number of CS cases reported a in two-year period
 - we cannot conclude that this is related to the best prevention and control strategies in place.
- It is possible that cases are missed and not reported,
- We recommend
 - Active CS case finding
 - Harmonization of reporting systems to prevent underreporting or overreporting of CS cases.

ADVOCACY MESSAGE

- CS is a preventable infection that can be managed properly through the best antenatal care strategies in place.
- The cooperation of healthcare workers in the notification of CS cases will assist in providing a clear picture of CS epidemiology in the country

ACKNOWLEDGMENTS

