HIV and Syphilis Dual Diagnoses

Leveraging HIV resources to fight HIV and Syphilis Co-infections



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Kern County Demographics



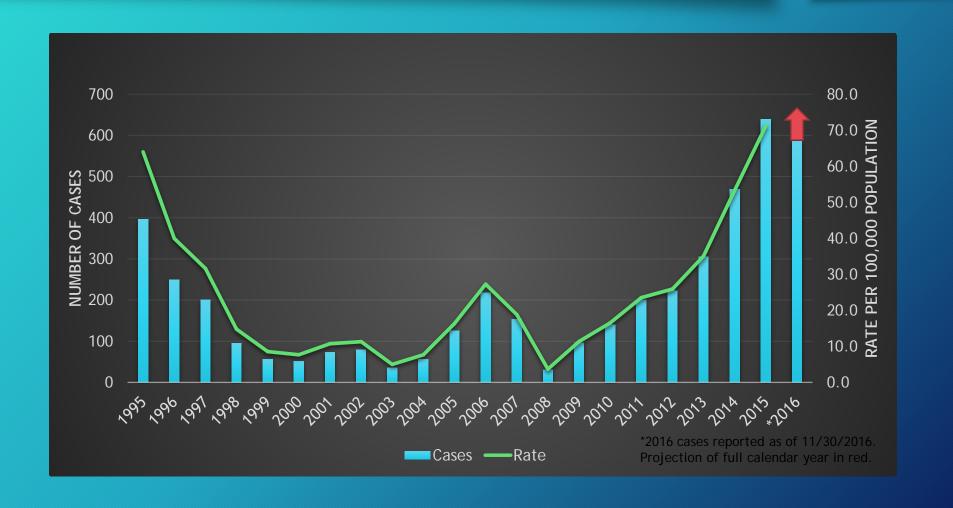
- Population: 865,736
 - 51% Hispanic, 37% White, 5% Black, 4% Asian
 - Median Household Income: \$49,026
 - Children Living Below Poverty: 33%
 - High School Education: 73%
 - Bachelors or higher: 15%
- Geography: 8,161 sq miles
 - I-5 and 99 Fwy North/South, 58 Fwy East/West
 - Valley floor, Sierra mountains, high desert
 - 4 State prisons, 2 Federal correctional facilities
 - 2 military installations
 - Oil and agriculture

Kern County Health Outcomes

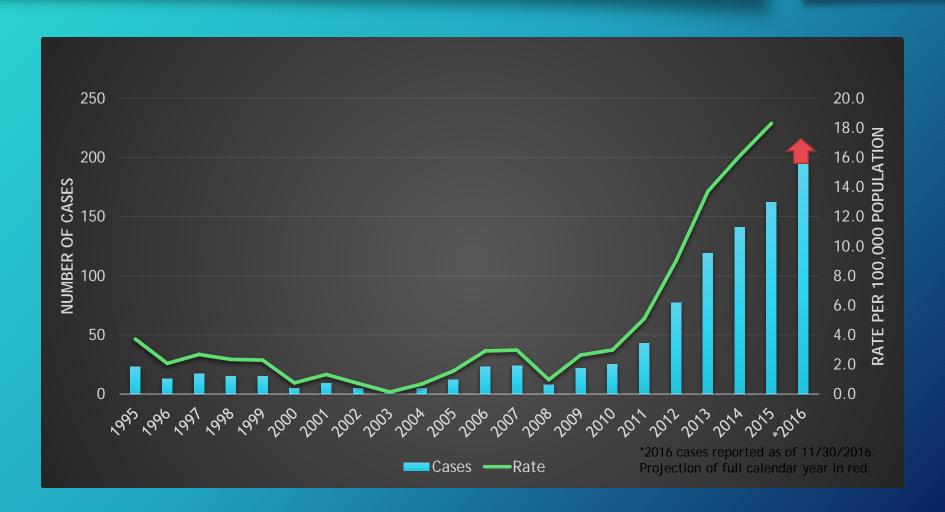


- 7th highest all-cause mortality
- Highest mortality due to diabetes
- 3rd highest mortality due to heart disease
- 7th highest incidence of infant mortality
- Highest rate of births to adolescents
- 2nd highest incidence of chlamydia
- 7th highest incidence of gonorrhea
- 3rd highest incidence of primary and secondary syphilis
- 2nd highest incidence of congenital syphilis

Kern County Syphilis Cases



Kern County Primary and Secondary Syphilis Cases



Enhanced Surveillance

- ➤ Bi-weekly syphilis case reviews
- Priority focus on Syphilis in women of childbearing age
- >Men with syphilis lower priority

Collaboration with HIV

- ➤ Early Intervention Services (EIS) Ryan White Funding Core Components:
 - ➤ Counseling on HIV/AIDS;
 - >HIV testing if status not known
 - Provide information on appropriate therapeutic measures
 - Linkage to care/referrals
 - Clinical evaluation and care for HIV positives

Syphilis Follow up Utilizing EIS

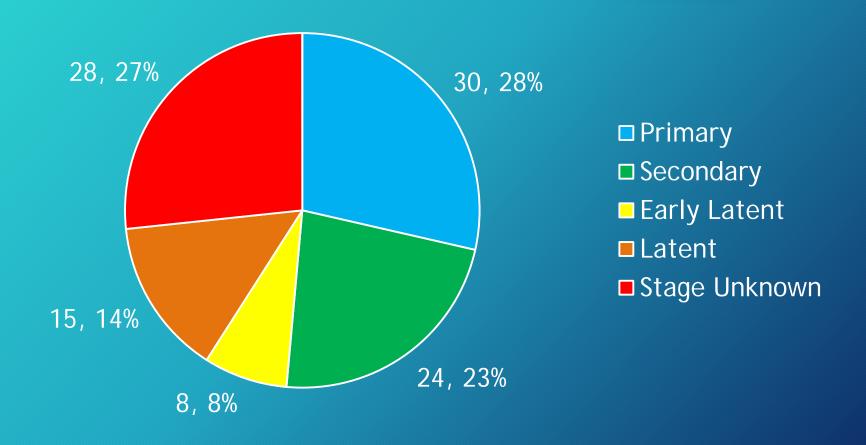
- May 2016 developed a referral process to EIS which included:
 - >Track down syphilis positive males
 - >Interview for partners
 - >Confirm treatment
 - ➤ If not treated assist (including transportation)
 - ➤ Determine HIV status and last HIV test
 - Test if no HIV test in past 6 months

Syphilis Follow up Utilizing EIS

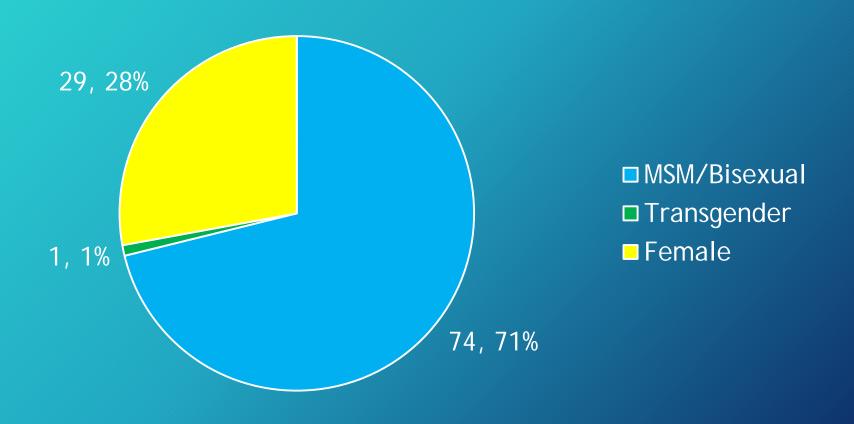
- > If HIV positive determine care status
- Link to medical care/case management
- Refer partners for evaluation for syphilis and HIV
- ➤ Educate on risk reduction strategies and HIV PrEP
- >Link to HIV PrEP Navigator

Kern County Enhanced Surveillance (n=105)

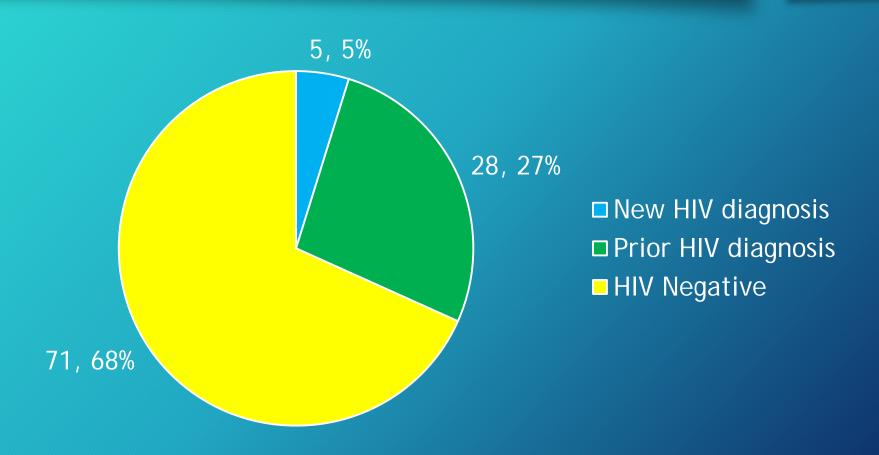
Beginning May 2016



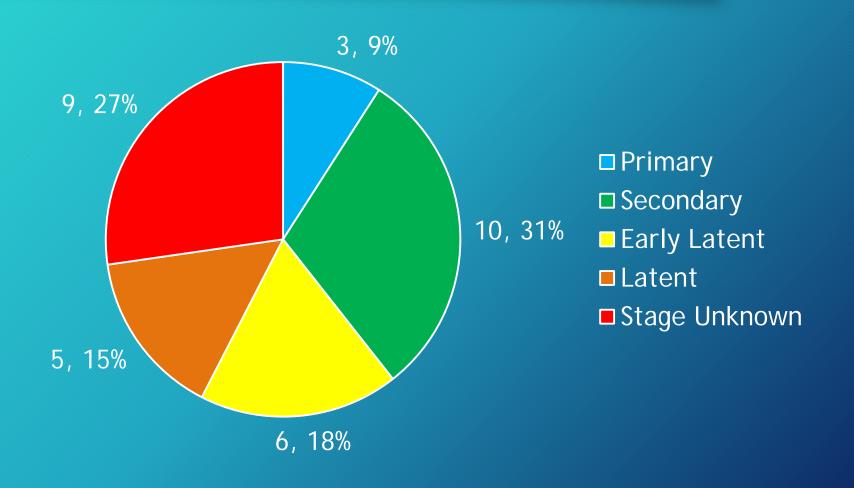
Male Syphilis Cases by Sex Partner (n=104)



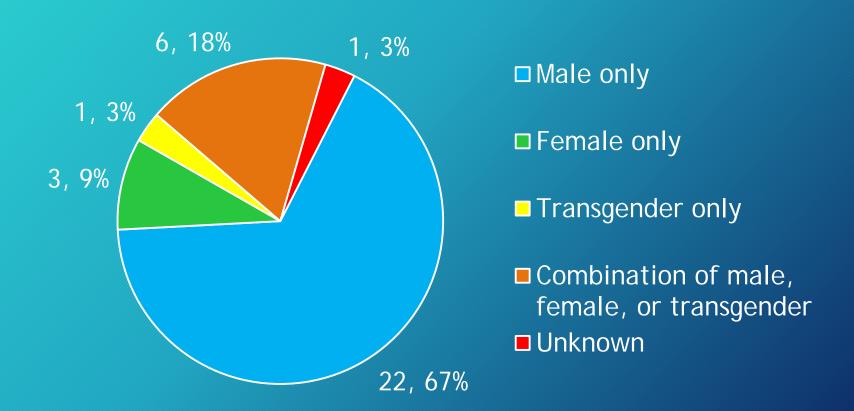
HIV Status of Male Cases (n=104)



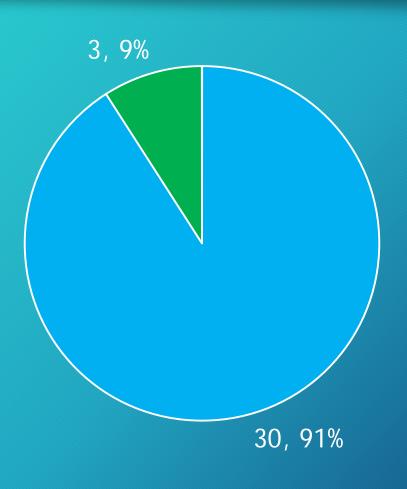
HIV+ Male Syphilis Cases by Syphilis Stage (n=33)



HIV+ Male Syphilis Cases by Reported Sex Partner (n=33)

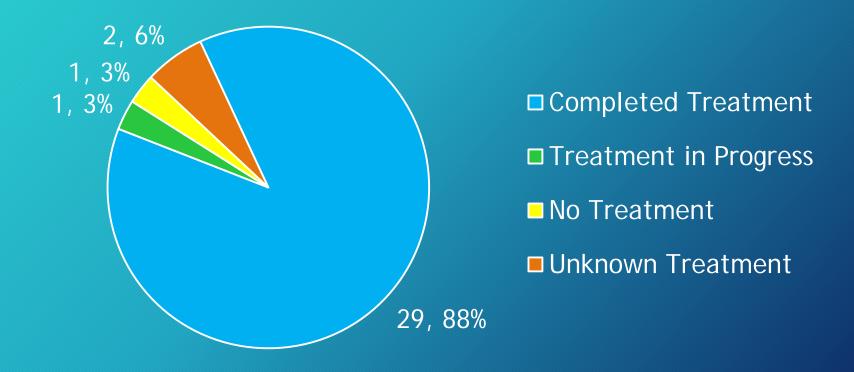


HIV+ Male Syphilis Cases by Care Status

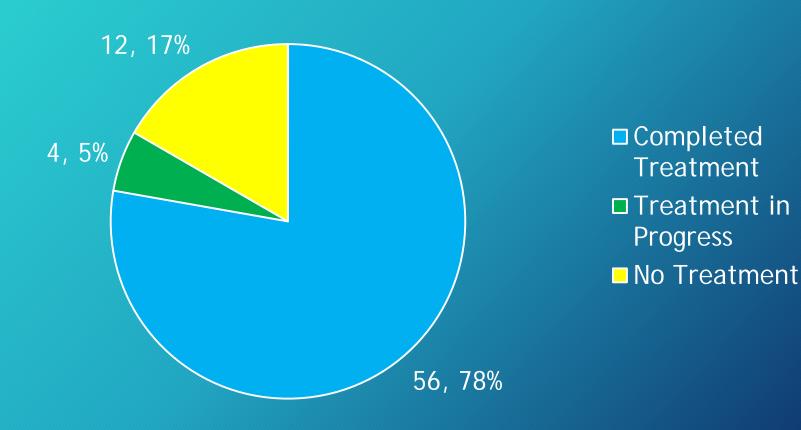


- In Care
- □ Linked to Care

HIV+ Male Syphilis Cases by Syphilis Treatment Status



HIV- Male Syphilis Cases by Syphilis Treatment Status



Successes with HIV + Cases

- ➤ 2 HIV+ patients who were out of care were re-linked to care
- ➤ 88% HIV+ patients are fully treated and 3% have treatment in progress

Opportunities with HIV + Cases

- Emphasize importance of staying in care
- Risk reduction education
- Partner Identification and notification for both syphilis and HIV

Successes with HIV - Cases

- >78% HIV- patients are fully treated and 5% have treatment in progress
- Assessment of HIV status and risk reduction education

Opportunities with HIV - Cases

- Partner Identification and notification for both syphilis and HIV
- Discussion on benefits of HIV PrEP and linkage to PrEP Navigator

Challenges

- Substance use: difficult clients to reach and keep in care
- Known HIV+ status not preventing acquisition of new STD

Opportunities

- Increased collaboration with HIV providers
- ➤ Increased awareness in the HIV and MSM community
- Strategies to address HIV+ patients who are out of care
- >HIV PrEP

Questions??

