



November 28, 2018

Syphilis Treatment Options

Patients with signs and symptoms consistent with syphilis should undergo serologic testing to confirm the diagnosis. However, certain patients can be treated empirically for early syphilis based upon clinical findings (e.g., patients with a suspected chancre) or known recent exposure, especially if they are unlikely to follow up.

A single intramuscular injection of long acting Benzathine penicillin G (2.4 million units administered intramuscularly) will cure primary, secondary or early latent syphilis. Three doses of long acting Benzathine penicillin G (2.4 million units administered intramuscularly) at weekly intervals is recommended for individuals with late latent syphilis or latent syphilis of unknown duration. Treatment will kill the syphilis bacterium and prevent further damage, but it will not repair damage already done.

Selection of the appropriate penicillin preparation is important to properly treat and cure syphilis.

Combinations of some penicillin preparations (e.g., Bicillin C-R, a combination of benzathine penicillin and procaine penicillin) are not appropriate treatments for syphilis, as they provide inadequate doses of penicillin.

Although data to support the use of alternatives to penicillin is limited, options for non-pregnant patients who are allergic to penicillin may include doxycycline, tetracycline, and, for neurosyphilis, ceftriaxone. These therapies should be used only in conjunction with close clinical and laboratory follow-up to ensure appropriate serological response and cure.

Recommended Regimens for Adults*
Early Latent Syphilis <ul style="list-style-type: none"> • Benzathine penicillin G 2.4 million units IM in a single dose
Late Latent Syphilis or Latent Syphilis of Unknown Duration <ul style="list-style-type: none"> • Benzathine penicillin G 7.2 million units total, administered as three doses of 2.4 million units IM each at weekly intervals
*For recommendations for treating syphilis in persons with HIV infection and pregnant women, please visit www.cdc.gov/std/tg2015/syphilis.htm#syph-hiv

Recommended Regimens for Infants and Children
Early Latent Syphilis <ul style="list-style-type: none"> • Benzathine penicillin G 50,000 units/kg IM, up to the adult dose of 2.4 million units in a single dose
Late Latent Syphilis <ul style="list-style-type: none"> • Benzathine penicillin G 50,000 units/kg IM, up to the adult dose of 2.4 million units, administered as 3 doses at 1-week intervals (total 150,000 units/kg up to the adult total dose of 7.2 million units)

Monitoring following treatment is strongly recommended. The Centers for Disease Control and Prevention recommend that clinical and serologic evaluation be performed at six and twelve months after treatment; more frequent evaluation may be prudent if follow up is uncertain or if repeat infection is a concern. Serologic response should be compared with the titer at the time of treatment. Comprehensive treatment guidelines are available at <https://www.cdc.gov/std/tg2015/default.htm>.

The Alliance recommends that clinics stock Benzathine penicillin G to prevent any delay in treatment. If you have any concerns about billing or reimbursement for the treatment of Alliance members, please reach out to the Alliance Claims department at (800) 700-3874, ext. 5503.

References:

<https://www.cdc.gov/std/syphilis/treatment.htm>

<https://www.uptodate.com/contents/syphilis-treatment-and-monitoring>