



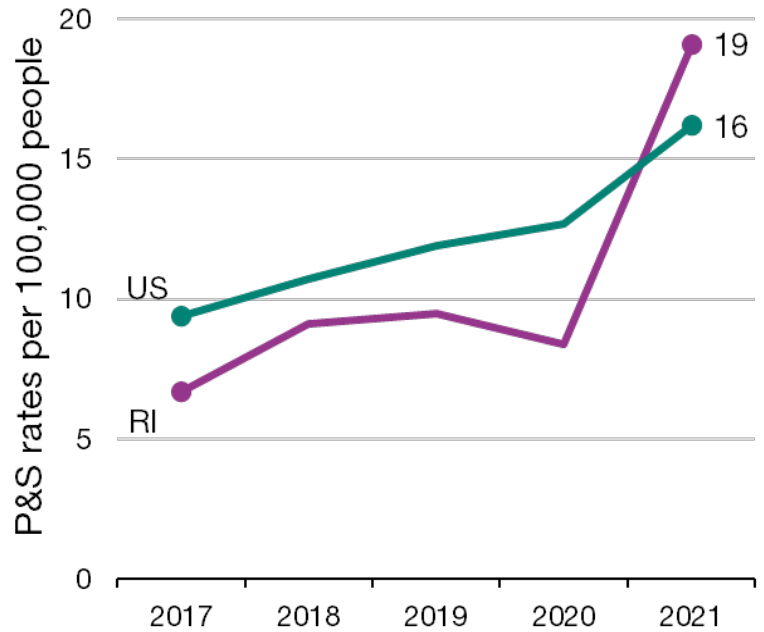
## The most recent CDC data suggest that sexually transmitted infection rates have continued to rise.

In 2021, chlamydia, gonorrhea, and syphilis continued to increase in the United States (US) – reaching a total of more than 2.5 million reported cases – a 7% increase overall from 2017 to 2021. CDC continues to support US jurisdictions like Rhode Island (RI) as we work together to turn the tide on STIs.

### Syphilis & congenital syphilis rates are rising in the US and Rhode Island

**Primary and secondary (P&S) syphilis** are the most infectious stages of syphilis and represent new infections. From 2017 to 2021, P&S syphilis rates per 100,000 people **rose 72% in the US** and **rose 185% in Rhode Island**.

**Congenital syphilis (CS)** occurs when syphilis is passed to a baby during pregnancy. The growing rate of CS per 100,000 live births in the US mirrors the rising rates of P&S syphilis.



### Chlamydia & gonorrhea are the most common bacterial STIs in Rhode Island

**Chlamydia** and **gonorrhea** are often asymptomatic. Preventing the spread of these STIs relies on screening to detect infections and starting treatment early.

2021 Cases in Rhode Island	
<b>5,199</b>	<b>1,681</b>
new cases of chlamydia	new cases of gonorrhea



## CDC provided \$1,365,959 to Rhode Island to prevent and control STIs in 2022

**\$365,959**

**Strengthening STD Prevention and Control for Health Departments (STD-PCHD)** provides all states and 9 cities and territories with 5-year funding to prevent and control STIs. In 2022, total STD-PCHD funding was \$95.5 million. <sup>1</sup>

**\$1,000,000**

The **Disease Intervention Specialist (DIS) Workforce Development Funding** was a \$200 million per year investment to support 21st century outbreak response via the American Rescue Plan Act of 2021.

### CDC also supports states' STI prevention and treatment efforts by:

- Providing on-the-ground support
- Promoting treatment best practices
- Monitoring STI trends
- Turning data into action

### Prevention-focused policies can help reduce STI rates



**Prenatal Syphilis Screening is legally required during the first visit only** in Rhode Island. CDC recommends all pregnant women should be screened for syphilis at the first prenatal visit, and at 28 weeks and delivery if the mother lives in a community with high syphilis rates or is at risk for syphilis.



**Expedited Partner Therapy (EPT)** provides patients' sex partners with STI treatment without a physical exam. **EPT is authorized** for treating chlamydia and gonorrhea in Rhode Island.

For more information, visit: <http://www.cdc.gov/std>

<sup>1</sup> CDC STI funding and \$8,000,000 from CDC HIV funding.

