

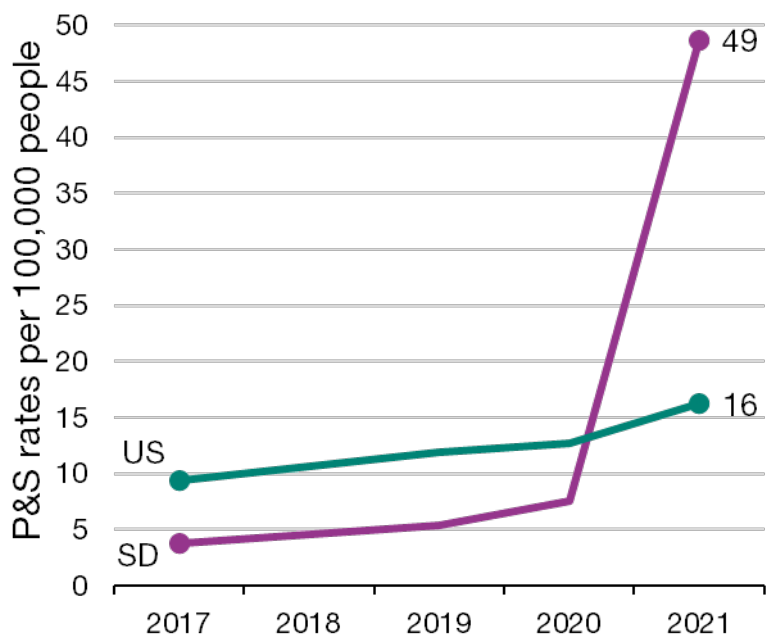
The most recent CDC data suggest that sexually transmitted infection rates have continued to rise.

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 South Dakota (SD) as we work together to turn the tide on STIs.

Syphilis & congenital syphilis rates are rising in the US and South Dakota

Primary and secondary (P&S) syphilis are the most infectious stages of syphilis and represent new infections. From 2017 to 2021, P&S rates per 100,000 people **rose from 9 to 16 in the US** and **rose from 4 to 49 in South Dakota**.

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.



From 2017 to 2021, CS rates rose 219% in the US and 470% in South Dakota.

Routine screening and timely treatment of syphilis can prevent mother-to-child transmission during pregnancy.



Chlamydia & gonorrhea are the most common bacterial STIs in South Dakota

2021 Cases in South Dakota	
4,853	3,258
new cases of chlamydia	new cases of gonorrhea

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



CDC provided \$1,346,619 to South Dakota to prevent and control STIs in 2022





\$346,619

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. ¹

\$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 South Dakota. 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 potentially allowable** for treating chlamydia and gonorrhea in South Dakota.

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

¹ CDC STI funding and \$8,000,000 from CDC HIV funding.

