

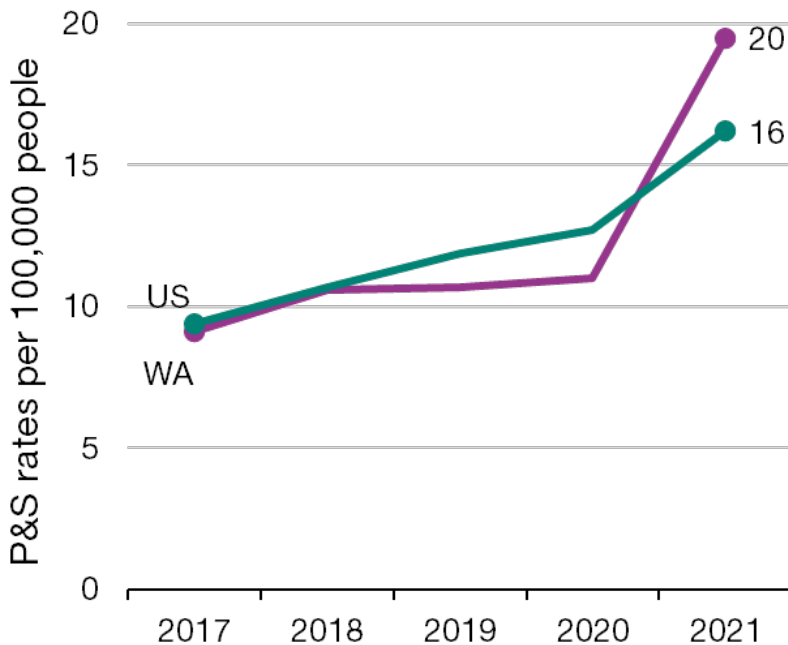


The most recent CDC data suggest that sexually transmitted infection rates have continued to rise.

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 Washington (WA) as we work together to turn the tide on STIs.

Syphilis & congenital syphilis rates are rising in the US and Washington

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 114% in Washington**.



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 rose 816% in Washington.

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



Chlamydia & gonorrhea are the most common bacterial STIs in Washington

2021 Cases in Washington

29,632

new cases of chlamydia

11,231

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 \$6,602,279 to Washington to prevent and control STIs in 2022

\$1,812,734	<u>Strengthening STD Prevention and Control for Health Departments (STD-PCHD)</u> 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
\$3,779,428	The <u>Disease Intervention Specialist (DIS) Workforce Development Funding</u> was a \$200 million per year investment to support 21st century outbreak response via the American Rescue Plan Act of 2021.
\$730,117	<u>Strengthening the U.S. Response to Resistant Gonorrhea (SURRG)</u> addresses antibiotic-resistant gonorrhea through enhanced surveillance and rapid detection, response, and field investigations. Antimicrobial Resistance Initiative Funding provided \$5,374,514 for SURRG nationally in 2022.
\$280,000	The <u>STD Surveillance Network (SSuN)</u> aims to improve the capacity of national, state, and local STD programs to detect, monitor, and respond to trends in STDs. SSuN provided \$3.2 million nationally in 2022. ²

CDC supports states' STI prevention and treatment efforts by:



Providing on-the-ground support



Promoting treatment best practices



Monitoring STI trends



Turning data into action



Experienced CDC field staff are an asset to programs they are directly embedded in, often filling leadership roles and providing expertise that may be challenging to sustain at the state and local level. **Eight of the 76 CDC STI prevention field staff positioned throughout the US are stationed in Washington health departments.**

Prevention-focused policies can help reduce STI rates



Prenatal Syphilis Screening is legally required during the first visit only in Washington. 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 permissible** in Washington.

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

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

² CDC STI (72%), HIV (13%), and CARB (16%) funding.

