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| Communicable Diseases Network Australia logo | Syphilis (less than 2 years duration)  Australian national notifiable diseases case definition |

This document contains the surveillance case definition for syphilis (less than 2 years duration), which is nationally notifiable within Australia. State and territory health departments use this definition to decide whether to notify the Australian Government Department of Health and Aged Care of a case.

| Version | Status | Last reviewed | Implementation date |
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| 1.2 | Change name from‘Syphilis – less than 2 years duration (infectious - primary, secondary and early latent)’ to ‘**Infectious** Syphilis – less than two years duration (includes primary, secondary and early latent)’ Include new case definition for **infectious syphilis, probable case**.  **Reporting**  Both confirmed and probable cases should be notified.  **Laboratory definitive evidence**  Move details regarding treponemal tests to notes section. | May 2014 | 1 July 2015 |
| 1.1 | **Lab Definitive evidence:** Point 1: “… and the latest result is confirmed by either a reactive non specific treponemal test or a different specific treponemal test result.” Added.  **Lab Suggestive Evidence:** Point 1: “microscopy” added to the “direct fluorescent antibody [microscopy]”  Significant rework of the remainder of this section including addition of:  “A reactive specific treponemal test (e.g. IgG enzyme immunoassay, Treponema pallidum haemagglutination assay, Treponema pallidum particle agglutination, Treponema pallidum immobilisation assay, or fluorescent treponemal antibody absorption), confirmed either by a different specific test or a non-specific treponemal test; OR A reactive non-specific treponemal test (e.g. Venereal Diseases Research Laboratory, Rapid Plasma Reagin) confirmed by a specific treponemal test (e.g. IgG enzyme immunoassay, Treponema pallidum haemagglutination assay, Treponema pallidum particle agglutination, Treponema pallidum immobilisation assay, or fluorescent treponemal antibody absorption).” | CDWG O-O-S January 2010 | 1 January 2011 |
| 1.0 | Initial case definition | 2004 | 2004 |

Reporting

**Confirmed** and **probable cases** should be notified.

Confirmed case

A confirmed case requires either:

1. Laboratory definitive evidence

OR

1. Laboratory suggestive evidence **AND** clinical evidence.

Laboratory definitive evidence

1. Seroconversion in past two years: treponemal specific testa reactive when previous treponemal specific test non-reactive within past two years and the latest result is confirmed by either a reactive non-treponemal testb or a different reactive treponemal specific test

OR

1. A fourfold or greater rise in non-treponemal antibody titre compared with the titre within past two years, and a reactive treponemal specific test

**Laboratory suggestive evidence**

1. Demonstration of *Treponema pallidum*by darkfield microscopy (not oral lesions), direct fluorescent antibody microscopy (direct antigen test), equivalent microscopic methods (eg silver stains), or DNA methods (eg nucleic acid testing)

OR

1. A reactive treponemal specific test confirmed by either a reactive non-treponemal test or a different reactive treponemal specific test

OR

1. A reactive non- treponemal test confirmed by a treponemal specific test

Clinical evidence

1. Presence of a primary chancre (or ulcer)

OR

1. Clinical signs of secondary syphilis.

Probable case

A probable case requires that case does not meet the criteria for a confirmed case AND

Either:

1. In a person with no known previous reactive serology: no history of adequate treatment of syphilis, or endemic treponemal disease, and
2. Contact with an infectious case **AND** laboratory suggestive evidence.

OR

1. Laboratory suggestive evidence **AND**RPR ≥16.

OR

1. Positive syphilis IgM **AND**laboratory suggestive evidence.

OR

1. In a person with previous reactive serology: a fourfold or greater rise in non-treponemal antibody titre when the previous serology was done more than two years ago.

AND

1. Contact with an infectious case

OR

1. Positive syphilis IgM

Notes

1. Treponemal specific tests are: IgG immunoassay, *Treponema pallidum* haemagglutination assay, *Treponema pallidum* particle agglutination assay, Fluorescent Treponemal Antibody Absorption, 19S-IgM antibody test, or IgM immunoassay
2. Non-treponemal tests are; Rapid Plasma Reagin (RPR), Venereal Disease Research Laboratory (VDRL)