Looking after your sexual health
Syphilis

Syphilis is a sexually transmitted infection (STI). It’s not as common as some sexually transmitted infections but if it’s not treated, it can cause very serious health problems.

This booklet gives you information about syphilis, what you can do if you’re worried that you might have the infection and advice on how to protect yourself and your partners.

What causes syphilis?
Syphilis is caused by bacteria (tiny living cells) called Treponema pallidum. Anyone who’s sexually active can easily get and pass on syphilis.

How’s syphilis passed on?
Syphilis is easily passed from one person to another through sexual contact. You can pass syphilis on without knowing you have it because symptoms can be mild and you may not notice or recognise them. It can also be passed on before symptoms are noticeable, or after they’ve disappeared.

- Syphilis can be passed from one person to another during sex and by contact with the ulcers of someone who has syphilis.
- It can be passed on through vaginal, anal or oral sex, or by sharing sex toys. Using a condom correctly can reduce your chance of getting or passing on syphilis.
- Syphilis can also be passed on by blood transfusion and injecting drug use (sharing needles) but this is very rare. In the UK, all

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blood donations are screened for syphilis before the blood is used.

- If you’re pregnant, it’s possible to pass the infection to the baby before birth. This is known as congenital syphilis (see What happens if I get syphilis when I’m pregnant? on page 13).

You can’t get syphilis from hugging, sharing baths or towels, swimming pools, toilet seats or from sharing cups, plates or cutlery.

**What are the signs and symptoms?**

The signs and symptoms can be difficult to recognise and you might not notice them. Syphilis can develop in stages:

- the early stage (primary and secondary syphilis)
- the latent stage
- the late stage (also called tertiary syphilis).

Early and late syphilis may cause symptoms, while in latent syphilis there are no symptoms. If you do get symptoms, you might notice the following at different stages.

**Primary syphilis**

- One or more ulcers can appear; where the syphilis entered the body. These ulcers are called chancre(s) (pronounced ‘shankers’) and are often painless. They may appear between 2 weeks and 3 months after coming into contact with syphilis but it can be sooner or later.
- These ulcers can appear anywhere on the body.
- Ulcers may appear on the vulva (the opening to the vagina and urethra, the labia - vaginal lips - and the clitoris), or the cervix (entrance to the uterus - womb).
- Ulcers may appear on the penis or foreskin.
- They may be around the opening of the urethra (tube where urine comes out) or around the anus.
- Less commonly, ulcers may appear in the mouth, and on the lips, tonsils, fingers or buttocks.
- The ulcers of primary syphilis are very infectious and may take 2–6 weeks to heal. By this time, if the syphilis hasn’t been treated, it will spread to other parts of the body. It’ll then be known as secondary syphilis.

**Secondary syphilis**

If syphilis isn’t treated, the secondary stage usually occurs around 4–10 weeks after any ulcers have appeared. Syphilis is still infectious at this stage and can be passed on to someone else.

Symptoms might include:

- a painless rash that’s not normally itchy; it can spread all over the body, or appear in patches and is often seen on the palms of the hands and soles of the feet
- flat, warty-looking growths on the vulva or around the anus (often mistaken for genital warts)
- a flu-like illness, tiredness and loss of appetite, with swollen glands (this can last for weeks or months)
- white patches on the tongue, cheeks, or roof of the mouth
- patchy hair loss.
Latent syphilis
When syphilis remains untreated, without any signs or symptoms of infection, it’s known as latent syphilis. Diagnosis is made by a positive blood test. People with latent syphilis may still be infectious.

Tertiary or late syphilis
Untreated syphilis may, after many years, start to cause serious damage to the heart, brain, bones and nervous system.

Late syphilis is rare in the UK and this booklet doesn’t cover it.

How will I know if I have syphilis?
You can only be certain you have syphilis if you have a test. If you think you might have syphilis, it’s important not to delay getting a test so you can start treatment, if needed, and don’t pass the infection on to anyone else.

Have a test if:
- you, or a sexual partner, have or think you might have symptoms
- you’ve recently had unprotected sex with a new partner
- you, or a partner, have had unprotected sex with other partners
- a sexual partner tells you they have syphilis or a sexually transmitted infection
- you have another sexually transmitted infection
- you’re pregnant or planning a pregnancy.

You could still have syphilis even if a partner has tested negative. The only way to make sure you don’t have syphilis is to get tested yourself.

If you’ve had syphilis before, you can still get it again, even if you’ve been treated.

If you have syphilis, you’ll be advised to get tested for other sexually transmitted infections (STIs). It’s possible to have more than one STI at the same time.

How soon after sex can I have a check-up?
It’s important not to delay getting a test if you think you might have syphilis.

A test can be done straight away but you may be advised to have another test later to confirm the result. You can have a test even if you don’t have signs and symptoms.

What does the check-up involve?
A doctor or nurse will ask you to give a blood sample.

They may do a genital examination. This may include an internal examination of the vagina, or an examination of the penis, foreskin and opening of the urethra (where urine comes out).

They may also examine your anus, internally and externally.

The doctor or nurse will also check the body for any rashes, ulcers or warty growths. They may check the mouth and throat area.

They’ll use a swab to collect a sample of fluid from any ulcers. A swab looks like a cotton bud, but is smaller and rounded. It sometimes has a small plastic loop on the end rather than a cotton tip. It’s wiped over any ulcers. This only takes a few seconds and isn’t painful, though it may be uncomfortable for a moment.

Cervical screening tests and routine blood tests don’t detect syphilis. If you’re not sure whether you’ve been tested for syphilis, just ask.
How accurate are syphilis tests?
No tests are 100% accurate, but syphilis tests should pick up almost all syphilis infections if done at the right time.

Where can I get a syphilis test?
There are a number of services you can go to. Choose the one you feel most comfortable with.
A syphilis test can be done at:
• a genitourinary medicine (GUM) or sexual health clinic
• some general practices (ask a doctor or practice nurse).
For information on how to find a service see Where can I get more information and advice? on page 15.

If you’re pregnant you’ll be offered a syphilis test when you attend for antenatal care (see What happens if I get syphilis when I’m pregnant on page 13).

In some areas you can order a free self-sampling kit from your local sexual health service. This is where you take your own sample and send it to be tested.

It’s also possible to buy a syphilis test to do at home. The accuracy of these tests varies so it’s recommended that you go to a sexual health service to have a test. You can also choose to pay for a syphilis test at a private clinic.

If a self-sampling test or home test shows that you have syphilis it’s important to seek treatment straight away. The test should have instructions explaining what to do.

If you have symptoms you should always get tested at a sexual health service.

Will I have to pay for tests and treatment?
All tests are free through NHS services. Treatment is also free but if you get a test at a general practice you might have to pay a prescription charge or go to another service for the treatment.

What’s the treatment for syphilis?
• Syphilis is treated with antibiotics. This may be a single injection, a course of injections or tablets or capsules. Penicillin is the most common treatment for syphilis, but there are several different antibiotics that can be used. Let the doctor or nurse know if you’re allergic to penicillin.
• If complications have occurred you may also need other treatment.
• If there’s a high chance of you having syphilis, treatment may be started before the results of the test are back. You’ll usually be given treatment if a sexual partner has syphilis.
• There’s no evidence that complementary therapies can cure syphilis. Complementary therapies are therapies that fall outside of mainstream healthcare.
• Treatment can safely be given during pregnancy (see What happens if I get syphilis when I’m pregnant? on page 13).
How effective is the treatment?

**Primary and secondary syphilis**
- Treatment is very effective for both primary and secondary syphilis. As long as the treatment is taken correctly the syphilis will be completely cured.

**Latent syphilis**
- Syphilis can be treated and cured in the latent stage without developing any long-term problems.

**Tertiary or late syphilis**
- Syphilis can be treated and cured in the late stage but any damage already done to your body won’t be reversed.

Are there any side effects from the treatment?
After the first treatment some people get a reaction known as the Jarisch-Herxheimer reaction. This is a flu-like illness with high temperature, headache and aches and pains in the muscles and joints. This only lasts for up to 24 hours and starts within 12 hours after treatment. This reaction isn’t dangerous, and will get better on its own but it may help to rest, drink plenty of water and take some pain-relieving drugs.

Do I need a test to check the syphilis has gone?
Yes. You’ll need to go back for follow-up tests 6-12 weeks after treatment to check the syphilis has gone and that you haven’t come into contact with the infection again.

Even after successful treatment and cure, you may still sometimes get a positive blood test for syphilis in the future. So, if you need documents for emigration or any other reason, ask your clinic for a certificate explaining your treatment. You may be advised to have regular blood tests to check there are no changes, monitor your condition and make sure that all is OK.

If you have any questions, ask the doctor or nurse and make sure you know how to protect yourself in the future (see How can I help protect myself from syphilis and other sexually transmitted infections? on page 14).

What happens if syphilis isn’t treated?
If it’s not treated, syphilis can spread to other parts of the body causing serious, long-term complications. It may start to cause very serious damage to the heart, brain, eyes, other internal organs, bones and nervous system. In some cases, this damage could lead to death.

If you have syphilis you may be at more risk of becoming infected with HIV if you have sex with someone who’s HIV positive and they’re not on effective treatment. If you’re HIV positive and not on effective treatment then you may be more at risk of transmitting syphilis to a partner.

Effective HIV treatment can suppress HIV in the body (known as having an undetectable viral load) and means HIV can’t be passed on to a partner.

Will syphilis go away without treatment?
No. If you delay seeking treatment you risk the infection causing long-term damage and you might pass the infection on to someone else.
How soon can I have sex again?
Don’t have any sexual intercourse, including vaginal, anal or oral sex until two weeks after you and your partner(s) have finished the treatment and any follow-up treatment. If you or a partner have any ulcers or rashes you should avoid any kind of sexual contact until sores are fully healed and two weeks after treatment is finished. This is to help prevent you being reinfected or passing the infection on to someone else.

Will I know how long I’ve had syphilis?
The test can’t tell you how long you’ve had syphilis. If you feel upset or angry about having syphilis and find it difficult to talk to a partner or friends, don’t be afraid to discuss how you feel with the staff at the clinic or general practice.

Should I tell my partner(s)?
If the test shows that you have syphilis then it’s very important that your current sexual partner(s) and any other recent partners are also tested and treated.

You may be given a contact slip to send or give to your partner(s) or the clinic can do this for you, with your permission. This is called partner notification. It can sometimes be done by text message. The message or contact slip will say that they may have been exposed to a sexually transmitted infection and suggest they go for a check-up. It may or may not say what the infection is. It won’t have your name on it, so your confidentiality is protected.

You’re strongly advised to tell your partner(s), but it isn’t compulsory. The staff at the clinic or general practice can discuss with you which of your sexual partners may need to be tested.

Will syphilis affect my fertility?
No. There’s no evidence that syphilis will affect your fertility.

What happens if I get syphilis when I’m pregnant?
If you’re pregnant, you’ll be offered a blood test for syphilis when you attend antenatal care and your health professional should explain why this is happening.

If syphilis is found, you can be given treatment safely during pregnancy. This can help prevent the baby from becoming infected. There’s no risk of the treatment harming the baby.

If the syphilis is untreated you may pass the infection to your baby before the birth. This can lead to miscarriage, premature (early) birth or stillbirth, or the baby being born with syphilis.

If you have unprotected sex with a new partner or think you might have been at risk of syphilis, it’s important to get tested again, even if you’ve previously had a negative test (see How will I know if I have syphilis? on page 6).

Does syphilis cause cervical cancer?
No. Syphilis doesn’t cause cervical cancer.
How can I help protect myself from syphilis and other sexually transmitted infections?

The following measures will help protect you from syphilis and most other sexually transmitted infections, such as HIV, chlamydia and gonorrhoea. It’s possible to get a sexually transmitted infection (STI) by having sex with someone who has the infection, even if they have no symptoms. If you have an STI they’ll also help prevent you from passing it on to someone.

- Use condoms (male/external or female/internal) every time you have vaginal or anal sex.

- If you have oral sex (going down, giving head), use a condom to cover the penis, or a dam (latex or plastic square) to cover the vulva (external female genitals) or anus.

- If you’re not sure how to use condoms correctly visit www.sexwise.org.uk for more information.

- Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.

Using a service

- Wherever you go, you shouldn’t be judged because of your sexual behaviour or who you have sex with.

- All advice, information and tests are free.

- All services are confidential.

- All tests are optional and should only be done with your permission.

- Ask as many questions as you need to – and make sure you get answers you understand.

- The staff will offer you as much support as you need, particularly if you need help on how to tell a partner.

Where can I get more information and advice?

The National Sexual Health Helpline provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123. It’s open Monday to Friday from 9am-8pm.

For more information on sexual health visit www.fpa.org.uk or www.sexwise.org.uk

Information for young people can be found at www.brook.org.uk

Clinics

To find your closest clinic you can:

- use Find a Clinic at www.fpa.org.uk/clinics

- download FPA’s Find a Clinic app for iPhone or Android.

You can find details of general practices and pharmacies in England at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland you can find details of general practices at www.nhsinform.scot and in Northern Ireland at www.hscni.net
A final word

This booklet can only give you general information. The information is based on evidence-based guidance produced by The British Association for Sexual Health and HIV (BASHH).