Helplines and websites

- Call sexual health direct, run by fpa on 0845 122 8690 for confidential information and advice on sexually transmitted infections, contraception, pregnancy choices, abortion and planning a pregnancy or visit www.fpa.org.uk.
- For confidential information about sexually transmitted infections, sexual health or where to find local services call the Sexual Health Line on 0800 567 123. Textphone 0800 521 361. Lines are open 24 hours a day.
- Visit www.condomessentialwear.co.uk and www.ssha.info (Society of Sexual Health Advisers).
- Young people under 25 can also call Brook on 0800 0185 023 or visit www.brook.org.uk.

A final word
The information in this booklet is based on evidence-based guidance produced by The British Association of Sexual Health and HIV (BASHH). Different people may give you different information and advice about certain points.
Syphilis is a sexually transmitted infection (STI). It is not as common as some sexually transmitted infections but if left untreated it can cause very serious health problems in both men and women.

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

What causes syphilis?
Syphilis is caused by bacteria known as Treponema pallidum. This is easily passed from one person to another through sexual contact. Anyone who is sexually active can get it. Both men and women can have syphilis, and pass it on.

How is syphilis passed on?
- You can pass syphilis on without knowing you have the infection because symptoms can be mild and you may not notice or recognise them.
- Syphilis can be passed from one person to another during sex and by direct skin contact with someone who has syphilis sores or a syphilis rash. It can be passed on before symptoms are noticeable, or after they’ve disappeared.
- The infection can spread if you have vaginal, anal or oral sex, or share sex toys. Using a
condom correctly will reduce your chance of getting or passing on syphilis.
• Syphilis can also be transmitted by blood transfusion. However, in the UK all blood donors are screened to detect this before the blood is used.
• It is also possible for a pregnant woman to pass the infection to her unborn baby. This is known as congenital syphilis (see What happens if I get syphilis when I’m pregnant? on page 12).

You cannot catch syphilis from kissing, 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 are the same in both men and women. They can be difficult to recognise and you might not notice them.
Syphilis can develop in three stages:
• the first stage: called primary syphilis
• the second stage: called secondary syphilis
• the third or latent stage: called tertiary syphilis.

If you do get symptoms, you might notice the following:

First stage syphilis
• One or more sores (called a chancre – pronounced ‘shanker’) – usually painless – will appear where the bacteria entered the body. On average, this will be 2–3 weeks after coming into contact with syphilis but it can be sooner or later.
• These sores can appear anywhere on the body. In women, they are found mainly on the vulva (the lips around the opening to the vagina), the clitoris, cervix (entrance to the uterus (womb)), and around the opening of the urethra (tube where urine comes out) and the anus.
• In men, they appear mainly around the opening of the urethra, on the penis and foreskin, and around the anus.
• Less commonly, in men and women, sores may appear in the mouth, and on the lips, tonsils, fingers or buttocks.
• The sores of first stage syphilis are very infectious and may take 2–6 weeks to heal. By this time, the bacteria will have spread to other parts of the body and it will then be known as second stage syphilis.

Second stage syphilis
If the infection remains untreated the second stage usually occurs some weeks after any sores have appeared and healed. Syphilis is still infectious at this stage and can be passed on to someone else.
The symptoms include:
• A painless rash that is not normally itchy. It can spread all over the body, or appear in patches, but it is often seen on the palms of the hands and soles of the feet.
• Flat, warty-looking growths on the vulva in women and around the anus in both men and women (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 or roof of the mouth.
• Patchy hair loss.
How soon after sex can I have a check-up?
It is important not to delay getting a test if you think you might have syphilis. Syphilis may not show up on the test straightaway, so it will be repeated at a later appointment.

What does the check-up involve?
The doctor or nurse will ask you to give a blood sample. They will do a genital examination. For women this may include an internal examination of the vagina and for men an examination of the penis, foreskin and urethral opening (where urine comes out). Both men and women may have the anus examined internally and externally.

The doctor or nurse will also check the body generally for any rashes or warty growths. They may check the mouth and throat area. They will use a swab to collect a sample of fluid from any sores. A swab looks a bit 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 is wiped over any sores to pick up samples of discharge and cells. This only takes a few seconds and is not painful, though it may be uncomfortable for a moment.

Cervical screening tests and routine blood tests do not detect syphilis. If you are not sure whether you have been tested for syphilis, just ask.

Third stage or latent syphilis
When syphilis remains untreated it goes into another phase known as third stage or latent syphilis. Untreated syphilis may, after many years, start to cause very serious damage to the heart, brain, eyes, other internal organs, bones and nervous system. At this stage syphilis can lead to death.

Third stage syphilis is rare in the UK and this booklet does not cover it.

How will I know if I have the infection?
You can only be certain you have syphilis if you have a test. If you think you might have syphilis it is important that you don’t delay getting a test. Even if you don’t have symptoms you may wish to be tested, particularly if:

- you, or a partner, think you might have symptoms
- you have 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 a sexually transmitted infection
- you have another sexually transmitted infection
- you are pregnant or planning a pregnancy.

Don’t delay seeking advice – clinics don’t mind doing sexual health check-ups.
How accurate are the tests?
No tests are 100 per cent accurate, but syphilis tests should pick up almost all infections.

Where can I get a check-up?
There are a number of services you can go to. Choose the service you feel most comfortable with.

A 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 Helplines and websites on the back page.

Pregnant women attending antenatal services and some gynaecology services will routinely be offered a test. See What happens if I get syphilis when I’m pregnant? on page 12.

Will I have to pay for tests and treatment?
All tests are free through NHS services. Treatment is also free unless you go to your general practice when you may have to pay a prescription charge for the treatment.

What is the treatment for syphilis?
- First and second stage syphilis is treated using a single antibiotic injection or a course of injections or by taking antibiotic 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 are allergic to penicillin.
- Treatment usually lasts around 10–14 days but sometimes longer. If complications have occurred you may also need other treatment.
- If there is a high chance of you having the infection, treatment may be started before the results of the test are back. You will usually be given treatment if any sexual partner has syphilis.
- Some of the antibiotics that are used to treat syphilis interact with methods of contraception that contain the hormones estrogen and progestogen (for example, the combined oral contraceptive pill, contraceptive patch and contraceptive vaginal ring). Tell the doctor or nurse if you are using one of these methods so they can advise you on how to ensure you are protected from pregnancy.
- You cannot buy any treatments without a prescription.
- There is no evidence that complementary therapies can cure syphilis.
- Treatment can safely be given in pregnancy (see What happens if I get syphilis when I’m pregnant? on page 12).

How effective is the treatment?
First and second stage syphilis
- Treatment is very effective for both first and second stage syphilis. As long as the treatment is taken correctly the syphilis will be completely cured.

Third stage or latent syphilis
Syphilis at this stage can be treated, but any damage already done to your body will be permanent.
**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 4–6 hours after treatment. It is thought to be caused by the treatment causing a big release of the bacteria into the blood stream all at the same time. If you are concerned ask your doctor or nurse for advice.

**Do I need to have a test to check that the syphilis has gone?**
Yes. You will need to go back for follow-up tests to check that the infection has gone and that you have not come into contact with the infection again.

Your blood test will probably remain positive in any future tests – even after successful treatment. So, if you need documents for emigration or any other reason, ask your clinic for a certificate explaining your treatment. This also means that you will be advised to have regular blood tests to check there are no changes, monitor your condition and make sure that all is okay.

If you have any questions, ask the doctor or nurse and make sure you know how to protect yourself in the future.

**What happens if syphilis isn’t treated?**
Without proper treatment the infection can spread to other parts of the body causing serious, long-term complications.

Left untreated syphilis may start to cause very serious damage to the heart, brain, eyes, other internal organs, bones and nervous system. This damage could lead to death.

**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?**
It is strongly advised that you do not have any sexual intercourse, including vaginal, anal or oral sex until you and your partner(s) have both finished the treatment and any follow-up treatment. If you or a partner have any sores or rashes you should avoid any kind of skin contact until the treatment has been completed and until sores are fully healed. This is to help prevent you being re-infected or passing the infection on to someone else. If it is not possible to avoid sex, make sure that you use a condom. This might reduce the risk of infection, but won’t eliminate it.

**Will I know how long I’ve had the infection?**
The syphilis test cannot accurately tell you how long the infection has been there. If you have had more than one sexual partner it can be difficult to know which partner you got syphilis from. If you feel upset or angry about having syphilis and find it difficult to talk to your partner(s) 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 is very important that your current sexual partner(s) and any other recent partners are also tested and treated. The staff at the clinic or general practice can discuss with you which of your sexual partners will need to be tested.

You may be given a ‘contact slip’ to send or give to your partner(s) or, with your permission, the clinic can do this for you. The slip explains that they may have been exposed to a sexually transmitted infection and suggests that they go for a check-up. It may or may not say what the infection is. It will not have your name on it, so your confidentiality is protected. This is called partner notification. You are strongly advised to tell your partner(s), but it isn’t compulsory.

Will syphilis affect my fertility?
No. There is no evidence that syphilis will affect fertility in men or women.

What happens if I get syphilis when I’m pregnant?
All pregnant women are screened for syphilis. You should be offered an explanation and a blood test for syphilis when you attend for antenatal care. If syphilis is found, you can be given treatment safely during pregnancy. This can help prevent the baby from becoming infected and there is no risk of the treatment harming the baby.

If the syphilis is untreated you may pass the infection to your baby in the uterus. This can lead to miscarriage or stillbirth, or the baby being born with syphilis.

Does syphilis cause cervical cancer?
There is no evidence that syphilis causes cervical cancer.

How can I help protect myself from syphilis and other sexually transmitted infections?
It is possible to get syphilis and other sexually transmitted infections by having sex with someone who has the infection but has no symptoms. The following measures will help protect you from syphilis and most other sexually transmitted infections including HIV, chlamydia and gonorrhoea. If you have a sexually transmitted infection without knowing it they will also help prevent you from passing it on to a partner.

• Use condoms (male or female) every time you have vaginal or anal sex.
• If you have oral sex, cover the penis with a condom or the female genitals and male or female anus with a latex or polyurethane (soft plastic) square.
• If you are a woman and rub your vulva against a female partner’s vulva one of you should cover the genitals with a latex or polyurethane square.
• If you are not sure how to use condoms correctly visit www.fpa.org.uk for more information or call fpa’s helpline (see Where can I get more information and advice? on page 14).
• Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.
Where can I get more information and advice?

Call sexual health direct, run by fpa, for confidential information and advice on all sexually transmitted infections, contraception, pregnancy choices, abortion and planning a pregnancy. We can also give you details of sexual health services and a wide range of booklets, including a guide to male and female condoms.

fpa helplines

England
0845 122 8690
9am to 6pm Monday to Friday

Northern Ireland
0845 122 8687
9am to 5pm Monday to Thursday
9am to 4.30pm Friday

or visit fpa’s website www.fpa.org.uk

Details of clinics can be found in your local directory under sexual health, genitourinary medicine (GUM) or sexually transmitted infections (STIs).

Using a service

• Wherever you go, you shouldn’t be judged because of your sexual behaviour.
• 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.
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