

Indicator: Early Syphilis rate per 100,000 population

Overview

Why is this indicator important?

Over half of the syphilis cases reported in Minnesota are among Hennepin County residents. The symptoms of syphilis emerge as a single sore (primary stage), a rash (secondary stage), and may progress to organ damage, brain or nerve problems, and possibly even death. Although treatable, syphilis continues to persist because people may fail to recognize the symptoms or attribute their condition to other causes.

How are we doing?

- In 2017 *early syphilis* (primary and secondary stages) was most commonly found in *young adults* aged 25-29 years.
- The majority of early syphilis cases were found in men (in 2017, 142 (93%) of early syphilis cases were male). Of these male cases, 92% reported having a male sex partner (*men who have sex with men (MSM)*).
- Syphilis is reported disproportionately in minority populations; the populations with the highest rates of early syphilis were the *American Indian, Black/African American, and Hispanic* populations.

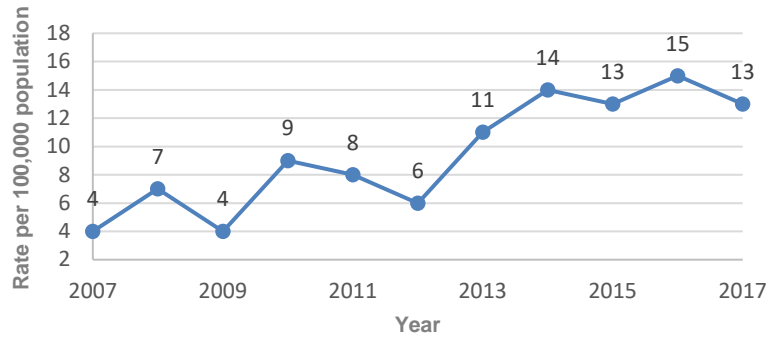
Data Source: Minnesota Department of Health – Sexually Transmitted Diseases Annual Surveillance Data, 2017

Population		Rate per 100,000	Number of Cases*
Hennepin County population overall		13	152
Race/Ethnicity	American Indian	56	6
	Asian/Pacific Islander	7	7
	Black/African American	18	32
	White	10	87
	Hispanic/Latino	22	19
Age Groups	Under 10 years	0	0
	10-14 years	0	0
	15-19 years	3	2
	20-24 years	30	25
	25-29 years	35	35
	30-34 years	30	26
	35-39 years	18	14
	40-44 years	20	16
	45-54 years	15	26
	55 years or over	3	8
Gender	Females	1	8
	Males	25	142

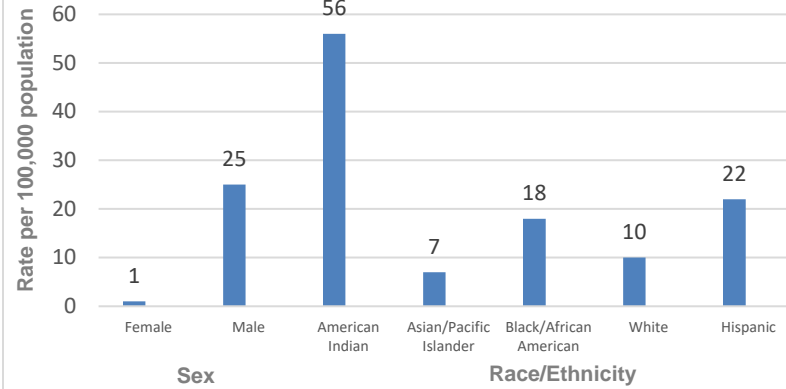
*See Technical Notes for information on the data source, limitations on reporting, and the definitions of the variables.

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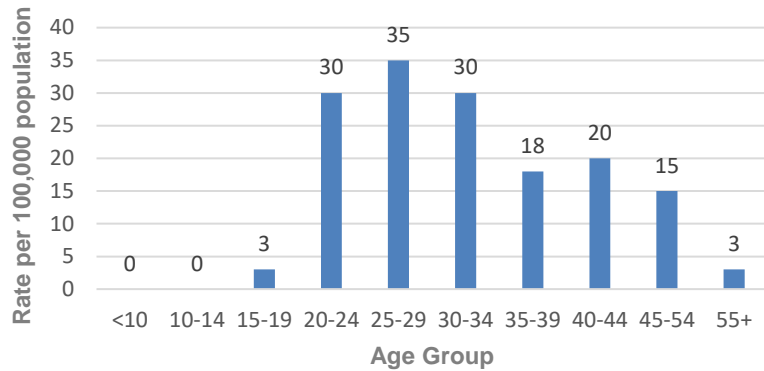
Hennepin County Early Syphilis Rate Trend Data 2007-2017



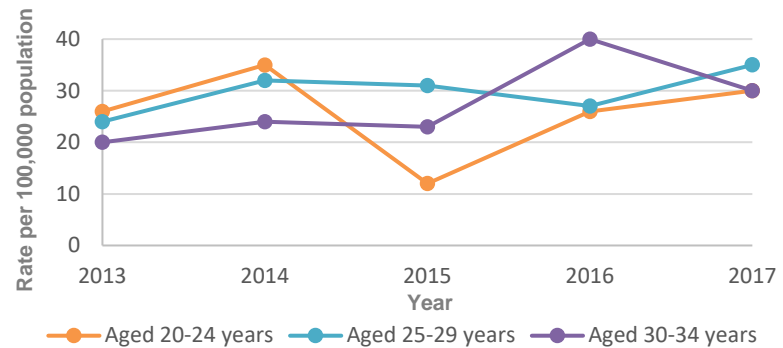
2017 Hennepin County Early Syphilis Rates by Sex and Race/Ethnicity



2017 Hennepin County Early Syphilis Rate by Age Group



Hennepin County Early Syphilis Rate Young Adults and Adults Recent Trend Data 2013-2017



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Technical Notes

Definition of indicator: Hennepin County's syphilis rate per 100,000 population includes people diagnosed within a given calendar year.

Data source: Doctors, clinics, and other health services providers are required to report all laboratory-confirmed cases of syphilis to the Minnesota Department of Health (MDH). Annually, the Epidemiology unit of Hennepin County's Department of Human Services and Public Health (HSPHD) receives a database with demographic information about the reported cases. The Epidemiology unit reviews these data and produces case counts and population rates using 2010 US Census Bureau population estimates, except for rates by race. Rates by race are calculated using the US Census Bureau's Bridged Population Estimates as the base for the rates per 100,000 population. This information is reported in the Hennepin County Annual STD Surveillance Report. Additional information about sexually transmitted diseases in Hennepin County can be found at <http://www.hennepin.us/epiupdates>.

Importance of this indicator: More than half of cases reported in Minnesota are among Hennepin County residents. The symptoms of syphilis emerge as a single sore (primary stage), a rash (secondary stage), and may progress to organ damage, brain or nerve problems, and possibly even death. Although treatable, syphilis continues to persist because people may fail to recognize the symptoms or attribute their condition to other causes.

Health disparities: Young adults aged 25-29 years comprise the age group with the highest risk for early syphilis infections. The rate in 2017 for this group was 35 cases per 100,000 population, compared to 13 cases per 100,000 population for the Hennepin County population overall. Most cases of early syphilis are reported in males. Of these male cases, 92% reported having a male sex partner (men who have sex with men (MSM)). Syphilis is reported disproportionately in minority populations; the groups with the highest rates of early syphilis were American Indians, Black/African Americans, and Hispanics (rates were 56 cases, 18 cases, and 22 cases per 100,000 population, respectively).

Special notes on reporting rates by race/ethnicity: The rate reported for Black/African Americans combines members from both the US-born and African-born communities; rates would be expected to be different for these two sub-groups.

Special notes on location of residence: The number of cases and rates per 100,000 population reported for sexually transmitted infections differs notably by location of residence. For early syphilis, the rate for Minneapolis was 27 cases per 100,000 population compared to 13 cases per 100,000 population for Hennepin County overall. Minneapolis residents comprised 105 of the 152 cases of early syphilis reported in Hennepin County in 2017.

Special notes on reporting population rates versus numbers of cases for relatively small populations: Both the rate and the actual number of cases have been reported in the table appearing in this fact sheet. Given the actual size of a particular community or sub-group, the magnitude of the rate reported may be very high, where the actual number of cases is relatively small. Both of these statistics (rate and number of cases) should be compared and taken into consideration in determining the scope of the problem for smaller communities or sub-group.