

Table 1 STD Cases Reported Among County of San Mateo Residents by Quarter (Oct 1 - Dec 30) and Year to Date for 2019 and 2018

	2019		2018	
	4th Qtr	YTD	4th Qtr	YTD
Chlamydia trachomatis (CT) (CT)(CT)	737	3,184	767	3,104
Male	318	1,416	369	1,326
Female	417	1,759	396	1,773
Unknown / Transgender	2	9	2	5
Lymphogranuloma Venereum	0	2	0	1
Gonorrhea (GC)	239	895	205	730
Male	174	672	158	574
Female	64	216	44	145
Unknown / Transgender	1	7	3	11
Urine	114	392	60	253
Genitourinary	26	95	23	94
Rectal and/or Pharyngeal	80	365	120	357
Unknown/Missing	19	43	2	26
Early Syphilis (total)¹	48	186	41	150
Male	45	168	40	143
Female	3	16	1	4
Transgender/Unknown	0	2	0	3
Syphilis (total)	65	275	54	219
Primary	12	42	6	25
Secondary	14	47	10	52
Early Latent	22	97	25	73
Late Latent	17	88	13	69
Congenital	0	1	0	0
Neurosyphilis ²	0	1	0	1

YTD: Year to Date. ¹Early Syphilis is defined as primary, secondary, and early latent ²Cases not included in the total as neurosyphilis is a sequelae and not a stage; the neurosyphilis cases are captured under other syphilis stages.

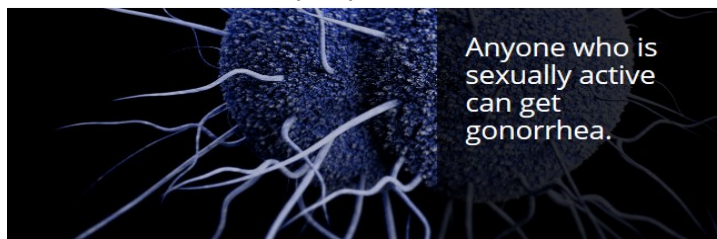
- CT increased 7% in men and decreased 1% in women compared to this time last year.
- GC cases increased 49% in women and 17% in men compared to this time last year. The proportion of GC cases that were rectal/pharyngeal decreased from 49% in 2018 to 41% in 2019.
- Early syphilis cases, of which 90% occurred in men this year, increased 24% compared to this time last year. Cases in females have increased from 3% in 2018 to 9% in 2019.
- Health System HIV positive prevalence for new HIV cases was 0.3% in both 2018 and 2019. HIV cases identified at county clinics were also the same in both 2018 and 2019 (0.3%).

Table 2 HIV testing through the San Mateo County Health System by Quarter (Oct 1 - Dec 30) and Year to Date for 2019 and 2018¹

	2019		2018	
	4th Qtr	YTD	4th Qtr	YTD
Total Specimens Tested for HIV	2,001	8,463	1,951	7,892
SMC-STD Clinic	173	741	170	738
STD/HIV Program Outreach ²	162	659	162	610
Other County Clinics ³	1,666	7,063	1,619	6,544
Total New HIV Cases	6	23	8	22
SMC-STD Clinic	1	2	0	1
STD/HIV Program Outreach ²	1	2	0	3
Other County Clinics ³	4	19	8	18

¹The HIV antibody positives do not reflect the true burden of disease. Some patients may be repeat testers. ²Includes data from Testing on Demand and other STD/HIV program outreach. ³Includes all HIV testing (oral and blood) at San Mateo Medical Center (SMMC), SMMC Satellite Clinics, SMC Public Health (PH) Clinics, and PH Subcontractors. Beginning Aug 2015, a 4th generation HIV screening test was implemented. HIV positive cases may not yet be confirmed by HIV-1/HIV-2 differentiation immunoassay.

CDC Announces National Increase in Disseminated Gonococcal Infection (DGI)



- In 2019, CDC received increasing reports of DGI.
- DGI is an infrequent, well described complication of gonorrhea infection. Signs include: septic arthritis, polyarthralgia, tenosynovitis, petechial or pustular skin lesions or bacteremia, rarely endocarditis or meningitis.
- Cultures from disseminated sites of infection (e.g., skin, synovial fluid, blood, cerebrospinal fluid (CSF)) are often negative. Cultures and NAAT from mucosal sites of infection (e.g., urogenital, rectal, or pharyngeal) have higher diagnostic yield but are often not performed since patients may be asymptomatic at these sites.
- Collect urogenital/extragenital (i.e., rectal and/or pharyngeal) specimens for NAAT and culture for *N. gonorrhoeae*. & other involved sites (e.g., skin, synovial fluid, blood, CSF) for culture for *N. gonorrhoeae*.
- Contact SMC STD Control within one working day for assistance with specimen testing.