Syphilis Laboratory Results/Interpretation

CMIA (Screening Test)	**RPR** (Non-treponemal)	**TP-PA/FTA-ABS** (Treponemal Test)	**Possible Interpretations** (Results should be interpreted in conjunction with history and clinical findings)
Reactive	Reactive (titres may vary)	Reactive	• Infectious syphilis (primary, secondary, early latent), especially if history of symptoms, contact with an infected partner, or other risks • Early latent syphilis or late latent syphilis of unknown duration, if no known symptoms and no history of treatment • Previously treated syphilis • In persons from endemic countries, yaws (e.g. Caribbean), pinta (e.g. Central America), or bejel (e.g. Middle East) • Lyme Disease
Reactive	Non-Reactive	Reactive	• Incubating infectious early primary syphilis, especially if history of symptoms, contact with an infected partner, or other risk factors • Early latent syphilis or late latent syphilis of unknown duration, with no history of treatment • Previously treated syphilis • In persons from endemic countries, yaws (e.g. Caribbean), pinta (e.g. Central America), or bejel (e.g. Middle East) • Lyme Disease
Reactive	Non-Reactive	Indeterminate	Repeat blood work in 2-4 weeks. If no change, likely false positive. No further follow-up needed. If RPR becomes reactive consider one of the following: • Usually incubating infectious early primary syphilis, especially if history of symptoms, contact with an infected partner, or other risk factors • Early latent syphilis or late latent syphilis of unknown duration, with no history of treatment • Treated syphilis • In persons from endemic countries, yaws (e.g. Caribbean), pinta (e.g. Central America) or bejel (e.g. Middle East) • Lyme Disease
Reactive	Non-Reactive	Non-Reactive	False positive. No further follow-up needed.

Staging/Treatment

Stage	**Incubation Period**	**Clinical Symptoms**	**Preferred Treatment**	**Recommended Follow-Up Blood Work**
Primary (infectious)	3-90 days	Chancre and/or regional lymphadenopathy	Benzathine penicillin G 2.4 m.u. IM x 1 dose	3, 6, 12 months after treatment
Secondary (infectious)	2 weeks - 6 months	A rash, typically involving palms, soles and flexor areas of extremities, regional lymphadenopathy, patchy or diffuse alopecia, meningitis, headaches and retinitis.	Benzathine penicillin G 2.4 m.u. IM x 1 dose	3, 6, 12 months after treatment
Early Latent (infectious)	less than 1 year	Asymptomatic	Benzathine penicillin G 2.4 m.u. IM x 1 dose	3, 6, 12 months after treatment
Late Latent Syphilis or Latent Syphilis (not previously treated; not infectious)	greater than or equal to 1 year	Asymptomatic	Benzathine penicillin G 2.4 m.u. IM	12 and 24 months after treatment
Late Latent Syphilis or Latent Syphilis (previously treated; not infectious)	greater than 1 year	Asymptomatic	No treatment required	No further follow-up
For those with HIV and Syphilis at any stage			Consult with an Infectious Disease specialist	3, 6, 12, and 24 months after treatment and yearly thereafter

- Universal screening is recommended for pregnant people during the first trimester or at first prenatal visit. Repeat screening at 28 to 32 weeks and again at delivery for pregnant people with ongoing risk of infection or reinfection. Screen all people who deliver a stillborn infant after 20 weeks gestation. Refer the mother and baby to an Infectious Disease Specialist if positive for follow-up.
- If further assistance required for interpretation of lab results, staging and treatment please refer to an Infectious Disease Specialist.
- For further information on STIs, alternative treatments and penicillin allergies refer to Canadian Guidelines on Sexually Transmitted Infections.
- To order publicly funded STI medications visit **durham.ca/STIMeds**.

DURHAM REGION HEALTH DEPARTMENT

Durham Health Connection Line
905-668-2020 or 1-800-841-2729
durham.ca/health

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May 23