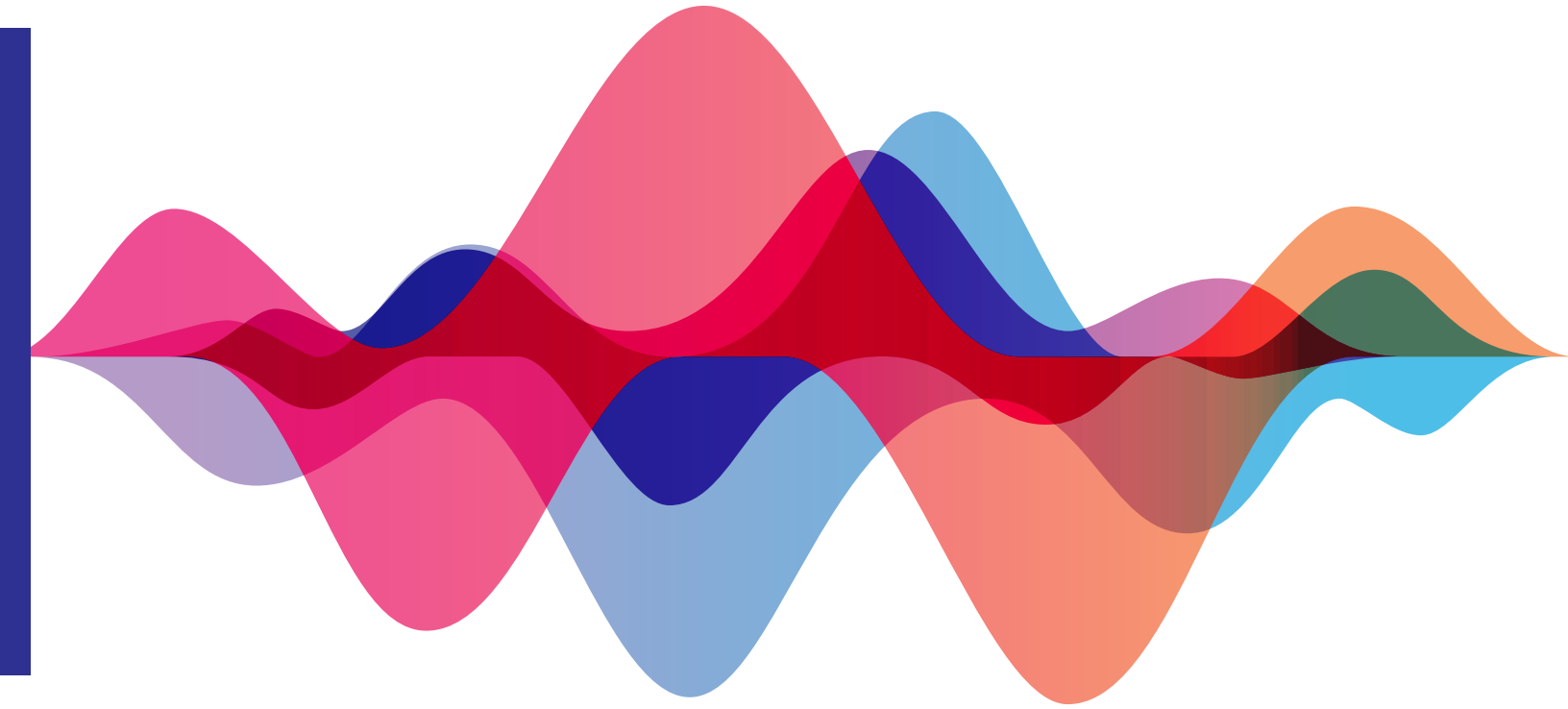
2019

GEORGIA SEXUALLY TRANSMITTED DISEASES SURVEILLANCE REPORT



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- Texas Department of State Health Services, whose Texas STD Surveillance Report was used as a model.

Data Sources

Surveillance data were obtained from:

1) Centers for Disease Control and Prevention. Sexually Transmitted Disease Surveillance 2018. Atlanta: U.S. Department of Health and Human Services; 2019. DOI: 10.15620 /cdc.79370; 2) Centers for Disease Control and Prevention. Sexually Transmitted Disease Surveillance 2019. Atlanta: U.S. Department of Health and Human Services; 2021; 3) Georgia's Online Analytical Statistical Information System (OASIS); 4) Georgia's State Electronic Notifiable Disease Surveillance System (SendSS).

Note about data sources: Data sources are cited throughout this document. The main data source is Georgia's Online Analytical Statistical Information System (OASIS). The source for state rankings is the Centers for Disease Control and Prevention (CDC) Sexually Transmitted Disease Surveillance 2019 data. CDC's rankings are based on their calculated case rates, which differ slightly from data reported by the Georgia Department of Public Health (GDPH) due to differences in reporting dates and deduplication methods. Georgia data regarding sex of sex partners and Georgia statistics for males who have sex with males (MSM) are not available through CDC or OASIS data. These statistics were calculated for this report using data from Georgia's State Electronic Notifiable Disease Surveillance System (SendSS) database. Sex assigned at birth was used for calculating all statistics stratified by sex.

Note about content sources: Some content on diseases and treatments was taken from web pages at CDC.gov/std, where additional information is available at no cost. CDC content and associated CDC links used by the GDPH are cited as to their sources. Use of this content does not imply endorsement of this report by CDC, Agency for Toxic Substances and Disease Registry (ATSDR), United States Department of Health and Human Services (HHS), or the United States Government.

Contents

STD Office Overview

Program Description

The Georgia STD Office focuses on the prevention and control of chlamydia, gonorrhea, and syphilis. The State STD Office provides statewide tracking of STD cases, data analysis, policy development, technical assistance, workforce development, health education initiatives, and public health clinic support.

Availability of Services

Each public health district plays a vital role in providing STD clinical services to low income, uninsured, and underinsured patients and their partners. Every county in Georgia has at least one STD clinic available to patients where they can receive testing and treatment on a sliding fee scale system.

Prevention Strategies

Prevention strategies are carried out statewide. Georgia's 18 health districts are essential in conducting local surveillance, health education activities, disease investigations, and disease interventions. Partner services (also referred to as contact tracing) and expedited partner therapy (EPT) are some of the prevention strategies used. Georgia's priority populations are pregnant persons, adolescents/young adults, and males who have sex with males (MSM).

Outcome Data

According to CDC data, for 2019 Georgia ranked 7th for chlamydia with a rate of 643.8 cases per 100,000 population, 8th in primary and secondary (P&S) syphilis with a rate of 16.6 cases per 100,000 population, 12th in congenital syphilis with a rate of 40.2 cases per 100,000 live births and 19th in gonorrhea with a rate of 202.1 cases per 100,000 population (2). In December, 2020, after Georgia's final 2019 data submission to CDC, Georgia state staff identified additional 2019 congenital syphilis cases. Georgia's 2019 congenital syphilis case rate was updated in January, 2021, to 42.8 cases per 100,000 live births in Georgia's OASIS data (3).

Georgia has seen increasing STD cases and rates coupled with steady or decreasing rankings compared to other states through 2019 (1,2,3). These data indicate a national increase in STDs that has outpaced the increases in Georgia (1,2).

STD Surveillance

STD surveillance entails collecting, analyzing, and interpreting data. These efforts provide insight into disease trends which assist in program planning, implementation, evaluation, and disease control.

In Georgia, collaborative efforts between local and state programs are extremely important. Local health department personnel act as the primary facilitators for data collection. The state STD epidemiologists evaluate the data and give an analysis of disease trends in individual health districts and the state. Collectively, the state and local STD prevention programs work to mitigate negative health outcomes.

Reporting

The State Electronic Notifiable Disease Surveillance System (SendSS) is the preferred method of reporting. This method offers immediate transmission of case reports and can reduce reporting delays for medical providers.

Priority Populations

Pregnant Persons

Untreated maternal syphilis infection can lead to adverse pregnancy outcomes including fetal and infant death, premature birth, and congenital syphilis infection. Congenital syphilis can be prevented if pregnant persons are screened and treated early in the pregnancy. Treating pregnant persons with syphilis at least 30 days prior to delivery improves the odds of the treatment passing through the placenta to the fetus (1,4).

In 2019, CDC ranked Georgia 12th among all states for congenital syphilis rate, with 52 cases reported (40.2 cases per 100,000 live births) (2). In December, 2020, after Georgia's final 2019 data submission to CDC, Georgia identified additional 2019 congenital syphilis cases. Georgia's 2019 OASIS data was updated in January, 2020, to reflect the new count of 54 congenital syphilis cases (42.8 cases per 100,000 live births) (3). The final 2019 rate represented a 74% increase from 2018 (3). Overwhelmingly, the Black population experienced higher congenital syphilis morbidity than any other racial/ethnic population, accounting for 85% of Georgia cases in 2019 (,3).

Reported congenital syphilis cases in Georgia in 2019 (3):	54
Congenital syphilis rate per 100,000 live births population in 2019 (3):	42.8
Increase in congenital syphilis rate from 2018 (3):	74%

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Call to Action

Congenital syphilis cases occur when prevention opportunities are missed. The risk for congenital syphilis can be minimized by providing appropriate medical treatment for pregnant persons with syphilis. Missed opportunities identified for 2019 births that were reported as congenital syphilis cases are shown in the table below.

Primary missed opportunities during pregnancy among mothers of congenital syphilis cases, Georgia, 2019	
Primary missed opportunity	**Number of cases**
No Prenatal Care	15
Prenatal Care - No 3rd Trimester Test between 28-32 weeks	8
Infected after 3rd Trimester Test	7
Inadequate Treatment or Treatment within 30 Days of Delivery	22
Late Prenatal care	1
Other	1
Total	**54**

Data source: (5) GA SendSS

Health care providers can help prevent congenital syphilis cases in Georgia by adhering to the following guidelines and regulations:

- **Test** every pregnant person at the first trimester visit or first prenatal visit, regardless of trimester, and at the third trimester visit as per Georgia law (O.C.G.A. § 31-17-4.2).

- **Test** pregnant persons early in their third trimester (28-32 weeks) to allow the patient to be treated if necessary and to allow time for the treatment to pass through the placenta to the fetus. The odds of a baby being born without syphilis are increased when the mother is treated at least 30 days prior to delivery. Pregnant persons treated within 30 days of delivery are not considered adequately treated.

- **Treat** pregnant persons promptly for syphilis infection with Penicillin G. This is the only known effective treatment for preventing maternal transmission to the fetus and treating fetal infections. Desensitization is required for those with penicillin allergies (4).

- **Report** all cases of syphilis and congenital syphilis to the local health department within 24 hours. If a baby is born to a mother with untreated or inadequately treated syphilis at the time of delivery or to a mother treated for syphilis within 30 days of delivery, the baby should be reported, even if asymptomatic.

Adolescents & Young Adults

There were 94,978 cases of chlamydia, gonorrhea, and syphilis reported to the GDPH in 2019. Over half (58%) of these cases were among young people ages 15 to 24 years (3). STDs can have long term health consequences, including infertility and being a gateway for HIV transmission (1).

- Chlamydia was the most reported STD in Georgia with 67,953 cases reported to the GDPH in 2019 (3).
    - 65% of all chlamydia cases were among adolescents and young adults ages 15 to 24 years (3).
    - Females accounted for 70% of reported chlamydia cases among the age group 15 to 24 (3).

- Gonorrhea was the second most reported STD in Georgia with 21,321 cases reported to GDPH in 2019 (3).
    - 45% of all gonorrhea cases were among young people ages 15 to 24 (3).
    - Females accounted for 50% of reported gonorrhea cases among the age group 15 to 24 (3).

- Primary and secondary (P&S) syphilis cases increased to 1,764 cases reported to the GDPH in 2019 (3).
    - 22% of all P&S syphilis cases were among adolescents and young adults ages 15 to 24 (3).
    - Males accounted for 84% of reported P&S syphilis cases among the age group 15 to 24 (3).

Males Who Have Sex with Males (MSM)

Georgia data regarding sex of sex partners and statistics for males who have sex with males (MSM) are not available through CDC or OASIS data. MSM statistics were calculated for this report using data from Georgia's SendSS database. Sex assigned at birth was used to define sex of the patient and sex of sex partners.

Through 2019, rates of STDs rose among gay and bisexual men, with increases in syphilis seen across the country. Nationally, notifiable STD surveillance data do not routinely include information on sexual behaviors, except for reported syphilis cases. As a result, trends in STDs among MSM in the United States as well as Georgia are limited. For all Georgia men, there was a (35.7%) increase in the combined rate per 100,000 of chlamydia, gonorrhea, and syphilis over the 5-year period from 2015 to 2019 (3).

For 2019, 858 P&S syphilis cases were reported among Georgia MSM. This amounted to 71% of P&S syphilis cases among all men and women with information about sex of sex partners (5).

In 2019, among Georgia MSM with P&S syphilis, 18.2% were White, 73.5% were Black, and 4.9% were Hispanic (5). This reflects a much higher disease burden for non-White MSM relative to the overall racial/ethnic composition of Georgia's 2019 population, which was 60.2% White, 32.6% Black and 9.9% Hispanic (3,5).

Gay, bisexual, and other MSM also frequently get STDs other than syphilis, including chlamydia, gonorrhea, and human papillomavirus (HPV)(1). In the next section of this report, methods used in Georgia to help prevent STDs are discussed.

Note about Transgender Persons

The sexual identity of transgender persons is different from the sex that they were assigned at birth (4,6). Transgender persons often experience stigma and barriers to healthcare that can have a negative impact on their usage of services and may increase their susceptibility to STDs (6). Georgia data on transgender and gender diverse persons are limited and are not summarized in this report. GDPH will make every effort to include information on these populations in future reports.

Prevention Strategies

Partner Services

The purpose of partner services is to reduce disease transmission and improve health outcomes. It also provides epidemiologic insight that is used to understand disease transmission and trends.

STD program personnel who provide partner services are referred to as Communicable Disease Specialists (CDS) or Disease Intervention Specialists (DIS). CDS work with individuals with STDs or exposed to STDs to: 1) educate them on STDs, 2) ensure testing and treatment for the individual, 3) identify individuals at risk, and 4) develop risk reduction strategies to prevent STDs. Partner services may also include referral to medical or other support services.

Expedited Partner Therapy

In 2017, the Georgia General Assembly passed a bill that allowed for the practice of Expedited Partner Therapy (EPT) for partners of chlamydia patients (7). EPT is the clinical practice of treating partners of patients diagnosed with a treatable STD without the healthcare provider first examining the partner. Typically, this consists of patients receiving two prescriptions or doses of a medication at one time, with the intent of sharing that medication with their partner. The alternative is to refer their partners for treatment (8).

According to the CDC, studies have shown that patients whose partners received EPT were 29% less likely to be re-infected than those who simply told their partners to visit the doctor (9). The use of EPT is supported by groups such as the Society for Adolescent Medicine (SAM) (10), the Academy of Pediatrics (AAP) (10), the American College of Obstetrics and Gynecology (ACOG) (11), and the American Academy of Family Physicians (AAFP) (12). Additionally, the American Bar Association backs the removal of legal barriers to allow heath care providers to use EPT (13).

Chlamydia

Chlamydia is caused by the bacterium *Chlamydia trachomatis* and is the most frequently reported bacterial infectious disease in the United States. Infections among men or women can lead to proctitis and urethritis; however, asymptomatic infection is common in both women and men. In women, chlamydia can lead to cervicitis or serious health issues such as pelvic inflammatory disease (PID), tubal factor infertility, ectopic pregnancy, and chronic pelvic pain (1,2,3,14,15). A serovar of the same bacterium, Lymphogranuloma venereum (LGV), occurs frequently as an STD in the developing world. LGV has been shown more recently to be a worldwide cause of proctitis outbreaks among MSM (16).

Chlamydia within the State of Georgia

When CDC compared 2019 chlamydia rates across all states, Georgia ranked 7th in the nation (2). OASIS data show that a total of 67,953 chlamydial infections were reported to the GDPH for the calendar year 2019, which was an increase of 3,566 cases from 2018 (3). Through 2019, chlamydia was the most reported notifiable disease in Georgia (3).

Reported chlamydia cases in Georgia in 2019 (3):	67,953
Chlamydia rate per 100,000 Georgia population in 2019 (3):	640.0
Increase in chlamydia rate from 2018 (3):	4.6%

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Chlamydia Testing and Treatment

Chlamydia is reported most frequently among individuals ages 15 to 24 years. However, all sexually active individuals should talk with their healthcare provider about their risk factors and whether testing for chlamydia or other STDs would be appropriate. Yearly screening is recommended by CDC for all women under 25 who are sexually active as well as for women 25 and older with risk factors, including new or multiple sex partners, or a sex partner with an STD. CDC also recommends MSM who have receptive anal intercourse be screened yearly for rectal chlamydia infection. Some people should be tested (screened) even if they are asymptomatic or have no knowledge of an infected sex partner. Testing is also important among persons whose oral, anal, or vaginal sex partner has had a recent STD diagnosis. Persons with genital symptoms

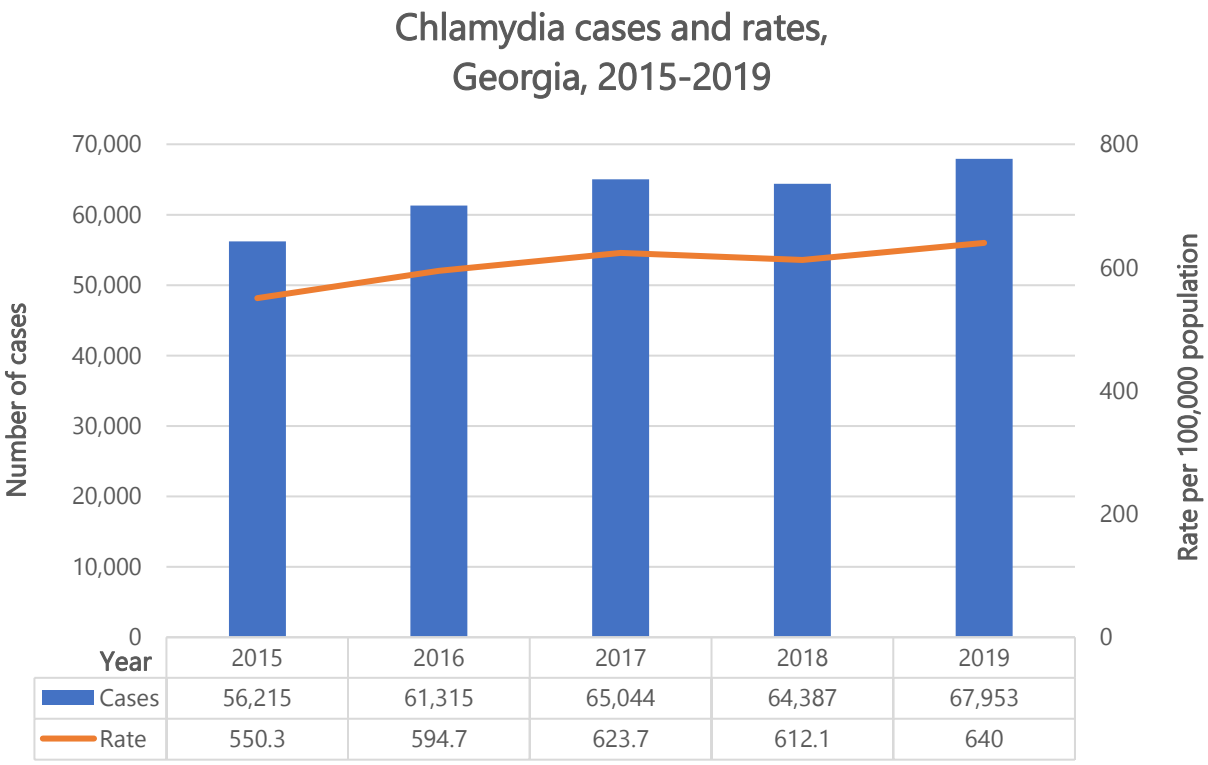
such as unusual sores, discharge, burning during urination, or rash should abstain from sex and see a healthcare provider without delay. (1,17,18).

Chlamydia is curable through antibiotic treatment. Treatment will cure the patient's chlamydia infection but will not repair permanent damage already caused by the disease if it has occurred. All the medication prescribed for the patient's chlamydia should be taken by the patient and should not be shared with anyone (4,17,19).

To prevent spreading the disease to sex partners, patients should abstain from sexual activity until completion of a 7-day treatment regimen. CDC now recommends doxycycline 100 mg orally 2 times/day for 7 days to treat chlamydial infections (6). Persons who continue to have symptoms for more than several days after treatment should return to their health care provider for a reevaluation (4,17,19,6).

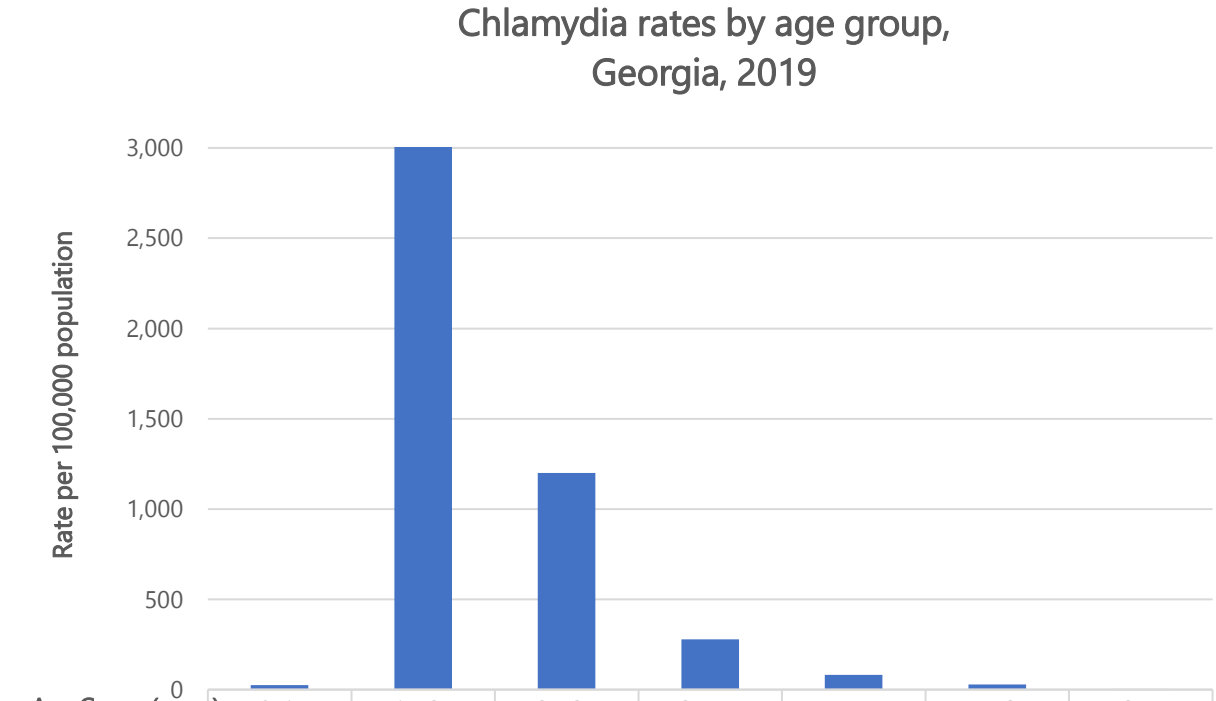
Patients can easily get reinfected with chlamydia unless precautions are taken (8). Women are at especially high risk for reinfection if their sex partners have not received appropriate treatment. Women diagnosed with multiple chlamydia infections during their lifetime are at increased risk for complications such as PID, ectopic pregnancy, and other reproductive health complications (14,15). Both men and women should be retested for chlamydia three months after treatment, even if they believe their partners were successfully treated (6).

Persons with HIV and chlamydia should be given the same chlamydia treatment as persons without HIV (6). Infants acquiring chlamydia through childbirth may develop ophthalmia neonatorum (conjunctivitis) and/or pneumonia. Infants with chlamydia should receive evaluation and age-appropriate care and treatment (6,20).



Year	2015	2016	2017	2018	2019
Cases	56,215	61,315	65,044	64,387	67,953
Rate	550.3	594.7	623.7	612.1	640

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Age Group (years)	0-14	15-24	25-34	35-44	45-54	55-64	65+
Age Group Rate	24.2	3,040.2	1,199.7	277.6	81.1	29.0	4.2

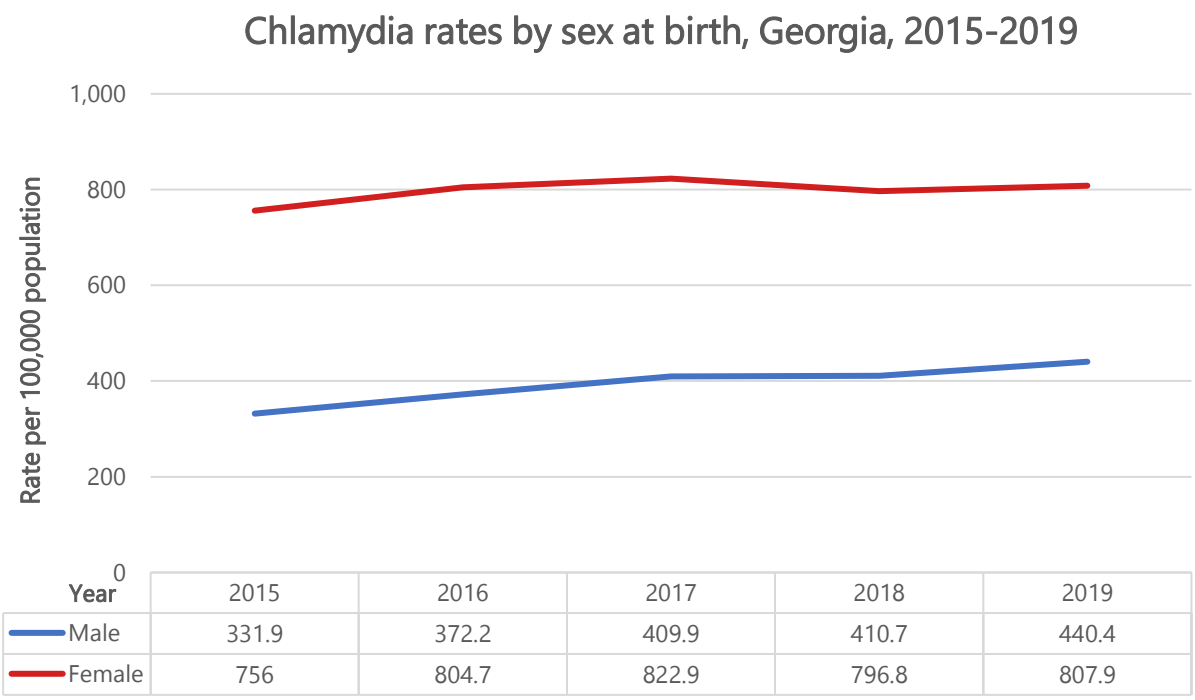
Data source: (3) GA OASIS. https://oasis.state.ga.us/

Chlamydia cases and rates, by sex, race/ethnicity, and age group, Georgia, 2015-2019										
	2015		2016		2017		2018		2019	
	Cases	Rate†	Cases	Rate†	Cases	Rate†	Cases	Rate†	Cases	Rate†
Sex at birth										
Male	16,527	331.9	18,685	372.2	20,803	409.9	21,009	410.7	22,725	440.4
Female	39,575	756.0	42,570	804.7	44,059	822.9	43,060	796.8	44,088	766.9
Unknown	113		60		182		318		1140	
Race/ethnicity‡										
White	7,646	139.0	7,986	145.1	7,921	143.8	8,243	149.6	11,552	209.1
Black	25,446	807.4	28,243	879.7	28,390	868.8	29,817	899.8	37,919	1,128.7
Hispanic	1,764	184.6	1,990	204.6	2,187	217.4	2,383	232.1	3,149	300.3
Other	337	78.3	327	74.1	288	62.5	336	70.8	390	80.4
Multi Race	154	87.6	196	107.7	173	92.2	139	71.9	180	89.7
Unknown race/ethnicity	20,868		22,573		26,085		23,469		14,763	
Age group										
0-14	418	20.1	486	23.4	497	21.6	447	24.2	500	23.1
15-24	38,085	2,636.3	40,852	2,834.9	42,342	2,936.2	41,839	2,895.4	44,068	3,040.2
25-34	13,801	984.3	15,403	1,083.0	17,153	1,180.3	17,089	1,160.0	17,914	1,199.7
35-44	2,830	206.5	3,212	235.7	3,562	260.5	3,506	255.4	3,834	277.6
45-54	766	54.5	990	69.9	1,071	75.5	1,073	76.0	1,135	81.1
55-64	231	19.1	296	23.9	298	23.6	304	23.6	379	29.0
65+	41	3.1	45	3.3	56	4.0	52	3.6	63	4.2
Unknown age	43		31		65		77		60	
Total	**56,215**	**550.3**	**61,315**	**594.7**	**65,044**	**623.7**	**64,387**	**612.1**	**67,953**	**640.0**

†Rates were calculated as cases per 100,000 population.

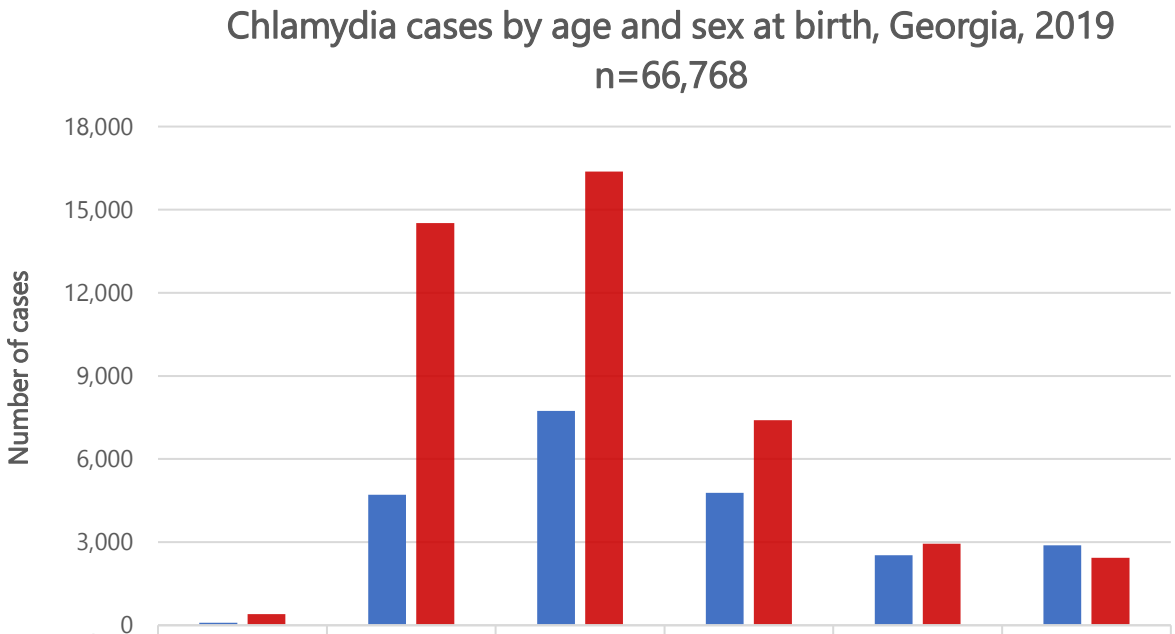
‡The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/



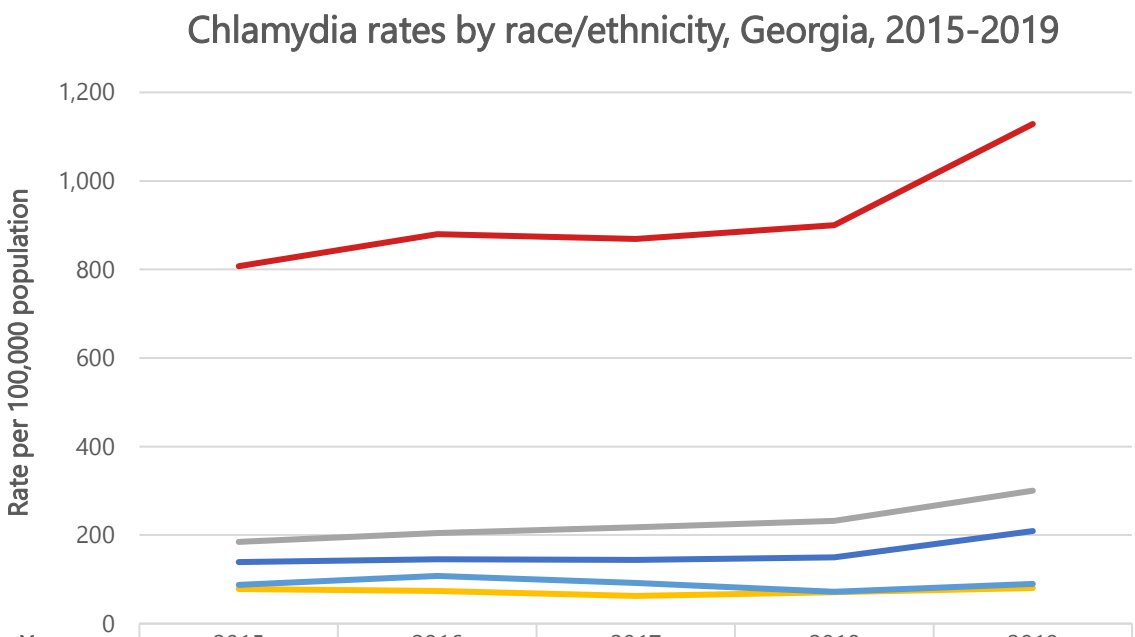
Year	2015	2016	2017	2018	2019
Male	331.9	372.2	409.9	410.7	440.4
Female	756	804.7	822.9	796.8	807.9

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Age Group (years)	<15	15-19	20-24	25-29	30-34	>34
Male	87	4,710	7,733	4,776	2,523	2,880
Female	397	14,517	16,374	7,399	2,939	2,433

Total Georgia chlamydia cases in 2019: N=67,953; missing age: n=60/67,953; missing sex: n=1,140/67,953; missing age and sex: n=15/67,953; missing age or sex: 1,185/67,953. Total chlamydia cases complete for age and sex: n=66,768.
Data Source: (3) GA OASIS. https://oasis.state.ga.us/



Year	2015	2016	2017	2018	2019
White	139	145.1	143.8	149.6	209.1
Black	807.4	879.7	868.8	899.8	1128.7
Hispanic	184.6	204.6	217.4	232.1	300.3
Other	78.3	74.1	62.5	70.8	80.4
Multi Race	87.6	107.7	92.2	71.9	89.7

Note: Interpret with caution; twenty-four to forty-one percent of chlamydia cases were missing race/ethnicity data.
The Black, White, Other and Multi Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.
Data source: (3) GA OASIS. https://oasis.state.ga.us

Gonorrhea

Gonorrhea is caused by the bacterium *Neisseria gonorrhoeae* and is the second most commonly reported bacterial communicable disease in the United States. It can cause infection in the genitals, rectum, eyes, and throat in both men and women. It is common, especially among young people ages 15 to 24 years (21,22).

Gonorrhea within the State of Georgia

CDC ranked Georgia 19th in the nation when comparing 2019 gonorrhea rates across all states (2). Through 2019, gonorrhea was the second most reported notifiable disease in Georgia (3). OASIS data show that 21,321 cases were reported in 2019, which was an increase from 20,618 in 2018 (3).

Reported gonorrhea cases in Georgia in 2019 (3):	21,321
Gonorrhea rate per 100,000 Georgia population in 2019 (3):	200.8
Increase in gonorrhea rate from 2018 (3):	2.4%

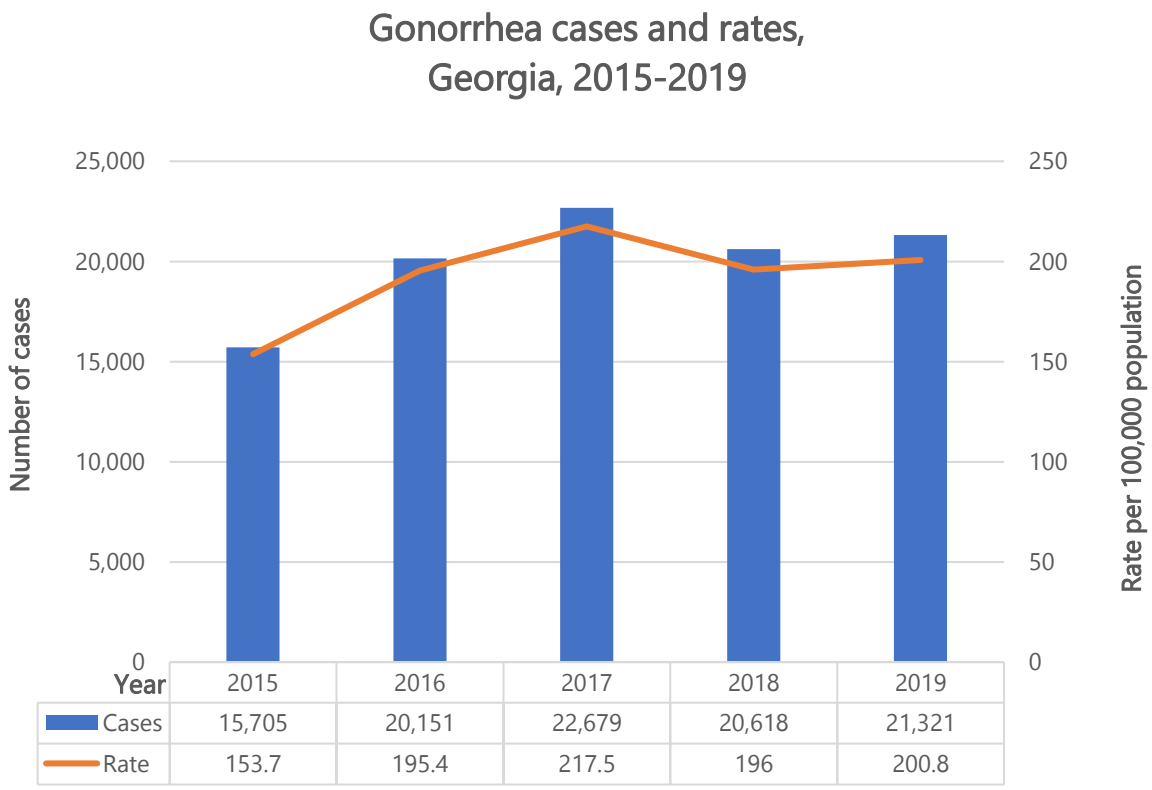
Data source: (3) GA OASIS. https://oasis.state.ga.us/

Gonorrhea Testing and Treatment

Any sexually active individual can become infected with gonorrhea. Persons with genital symptoms such as unusual sores, discharge, burning during urination, or rash should abstain from sex and see a healthcare provider without delay. Testing is also important among anyone whose oral, anal, or vaginal sex partner has had a recent STD diagnosis (21,22).

In addition, all sexually active individuals should talk with their healthcare provider about their risk factors and whether testing for gonorrhea or other STDs would be appropriate. Some people should be tested (screened) even if they are asymptomatic or have no knowledge of an infected sex partner (1). Yearly screening is recommended by CDC for all women under 25 who are sexually active as well as for women 25 and older with risk factors, including new or multiple sex partners, or a sex partner with an STD. Individuals with gonorrhea infection should also be tested for other STDs (21,22).

Gonorrhea infection can be cured with appropriate antibiotic treatment. CDC recommends one 500 mg injection of ceftriaxone (6,22,23,24). Although the treatment will cure the infection, there may be lasting permanent damage. There is also growing concern about antimicrobial resistance in gonorrhea, and the disease is becoming increasingly difficult to treat. No cases of antimicrobial resistant gonorrhea were reported in Georgia during 2015-2019. Capacity for identifying antimicrobial resistance in Georgia is limited. Persons who continue to have symptoms for more than several days after treatment should return to their health care provider for a reevaluation (4,21).



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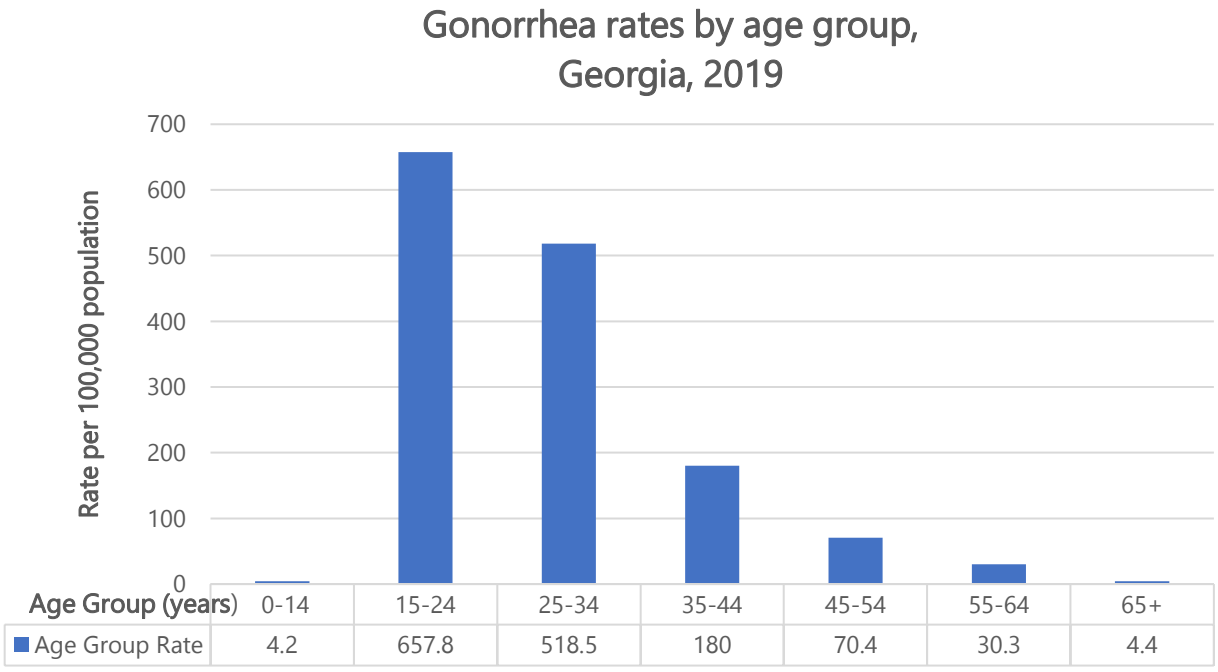


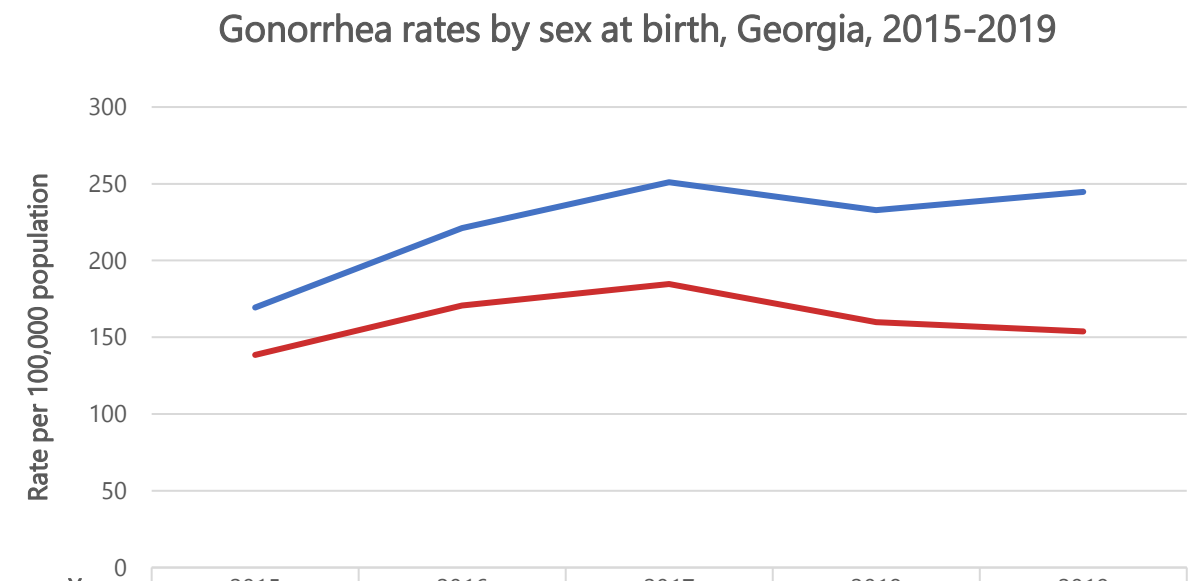
Data source: (3) GA OASIS. https://oasis.state.ga.us/

Gonorrhea cases and rates, by sex, race/ethnicity, and age group, Georgia, 2015-2019										
	2015		2016		2017		2018		2019	
	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Sex at birth										
Male	8,434	169.4	11,106	221.2	12,739	251	11,909	232.8	12,625	244.7
Female	7,248	138.5	9,027	170.6	9,887	184.7	8,639	159.9	8,399	151.9
Unknown sex	23		18		53		70		297	
Race/ethnicity[‡]										
White	1,717	31.2	2,311	42	2,807	51	2,970	53.9	3,498	63.3
Black	9,801	311	12,226	380.8	13,080	400.3	12,455	375.9	14,258	424.4
Hispanic	257	26.9	352	36.2	404	40.2	500	48.7	608	58
Other	68	106.4	98	106.5	76	89.8	94	100.3	103	112.9
Multi Race	40	0	55	0	46	0	56	0	51	0
Unknown race/ethnicity	3,822		5,109		6,266		4,543		2,803	
Age group										
0-14	102	4.9	125	6	132	4.8	99	4.2	86	5.3
15-24	8,451	585	10,475	726.9	10,983	761.6	9,327	645.5	9,535	657.8
25-34	4,974	354.7	6,556	460.9	7,878	542.1	7,577	514.3	7,743	518.5
35-44	1,395	101.8	1,865	136.8	2,397	175.3	2,375	173	2,486	180
45-54	568	40.4	819	57.8	898	63.3	845	59.9	985	70.4
55-64	180	14.9	250	20.2	308	24.4	321	25	396	30.3
65+	24	1.8	50	3.7	66	4.7	60	4.1	66	4.4
Unknown age	11		11		17		14		24	
Total	15,705	153.7	20,151	195.4	22,679	217.5	20,618	196.0	21,321	200.8

[ǂ]Rates were calculated as cases per 100,000 population.

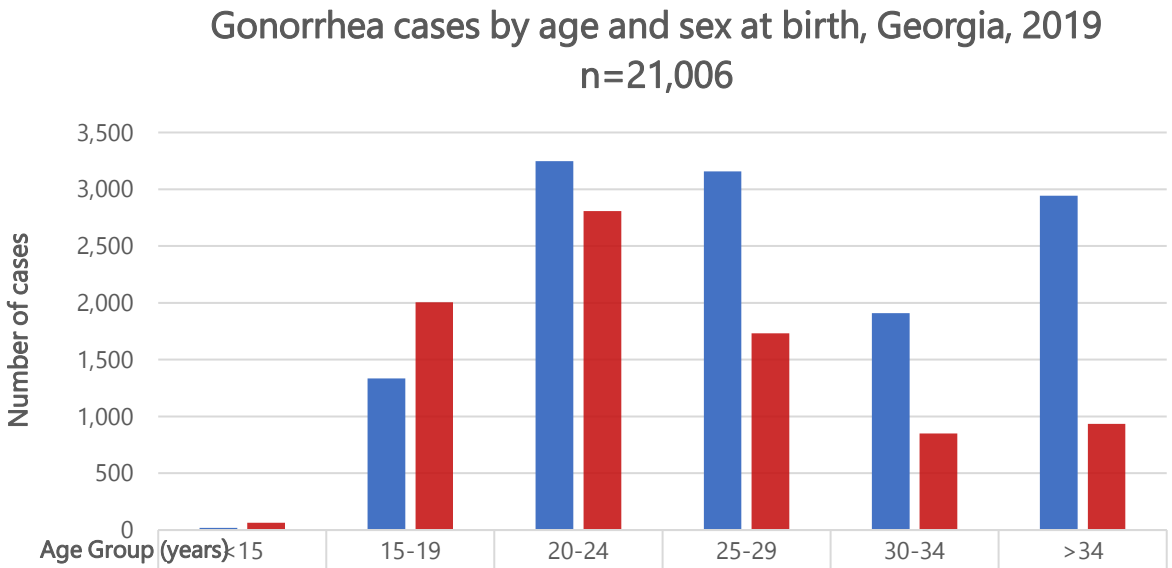
[‡]The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Year	2015	2016	2017	2018	2019
Male	169.4	221.2	251	232.8	244.7
Female	138.5	170.6	184.7	159.9	153.9

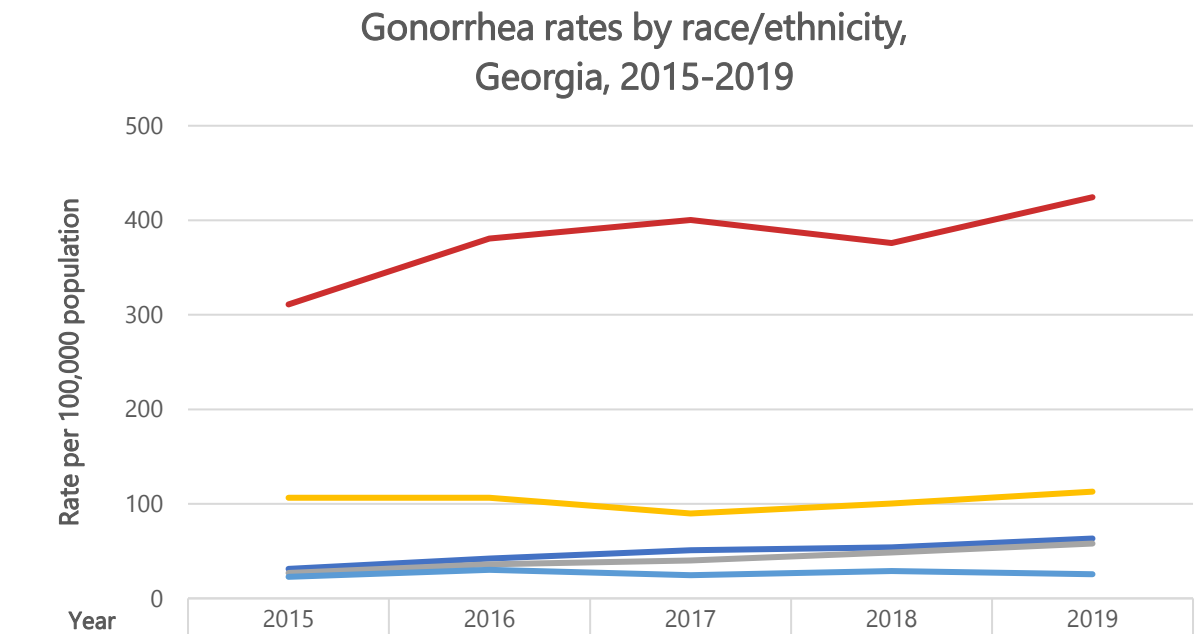
Data source: (3) GA OASIS. https://oasis.state.ga.us/



Age Group (years)	<15	15-19	20-24	25-29	30-34	>34
Male	19	1,336	3,247	3,157	1,908	2,944
Female	63	2,005	2,807	1,733	851	936

Total Georgia gonorrhea cases in 2019: N=21,321; missing age: n=24/21,321; missing sex: n=297/21,321; missing age and sex: n=6/21,321; missing age or sex: n=315/21,321. Total gonorrhea cases complete for age and sex: n=21,006.

Data Source: (4) GA OASIS. https://oasis.state.ga.us/



Year	2015	2016	2017	2018	2019
White	31.2	42	51	53.9	63.3
Black	311	380.8	400.3	375.9	424.4
Hispanic	26.9	36.2	40.2	48.7	58
Other	106.4	106.5	89.8	100.3	112.9
Multi Race	22.8	30.2	24.5	29	25.4

Note: Interpret with caution; fourteen to twenty-eight percent of gonorrhea cases were missing race/ethnicity data. The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Syphilis

Syphilis is a systemic disease caused by the bacterium *Treponema pallidum*. The disease has been divided into stages based on clinical findings, which guide treatment and follow up. Primary syphilis classically presents as a single painless ulcer or chancre at the site of infection but can also present with multiple, atypical, or painful lesions. Secondary syphilis manifestations can include skin rash, mucocutaneous lesions, and lymphadenopathy (6). Early non-primary non-secondary syphilis, also called early latent syphilis, is diagnosed when there is evidence that the infection was acquired within the previous 12 months, but the individual has no signs or symptoms. Syphilis of unknown or late duration, also called late latent syphilis, is diagnosed when there is serologic evidence of infection, but the individual was infected more than 12 months prior to diagnosis, or there is no evidence that the initial exposure occurred in the previous 12 months (2). Tertiary syphilis can occur in syphilis of late duration, and can present with cardiac involvement, gummatous lesions, tabes dorsalis, and general paresis (6). (See also Appendix: Sexually Transmitted Diseases Case Definitions.)

Syphilis within the State of Georgia

When CDC compared 2019 P&S syphilis rates across all states, Georgia ranked 8th (2). Georgia OASIS data show that in 2019 a total of 1,764 cases of P&S syphilis were reported (3). This was an increase of 121 cases from the previous year (3).

Reported syphilis cases (all stages) in Georgia in 2019 (3):	5,704
All syphilis rate per 100,000 Georgia population in 2019 (3):	53.7
Increase in syphilis rate from 2018 (3):	13.8%

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Reported P&S syphilis cases in Georgia in 2019 (3):	1,764
P&S syphilis rate per 100,000 Georgia population in 2019 (3):	16.6
Increase in P&S syphilis rate from 2018 (3):	6.4%

Data source: (3) GA OASIS. https://oasis.state.ga.us/

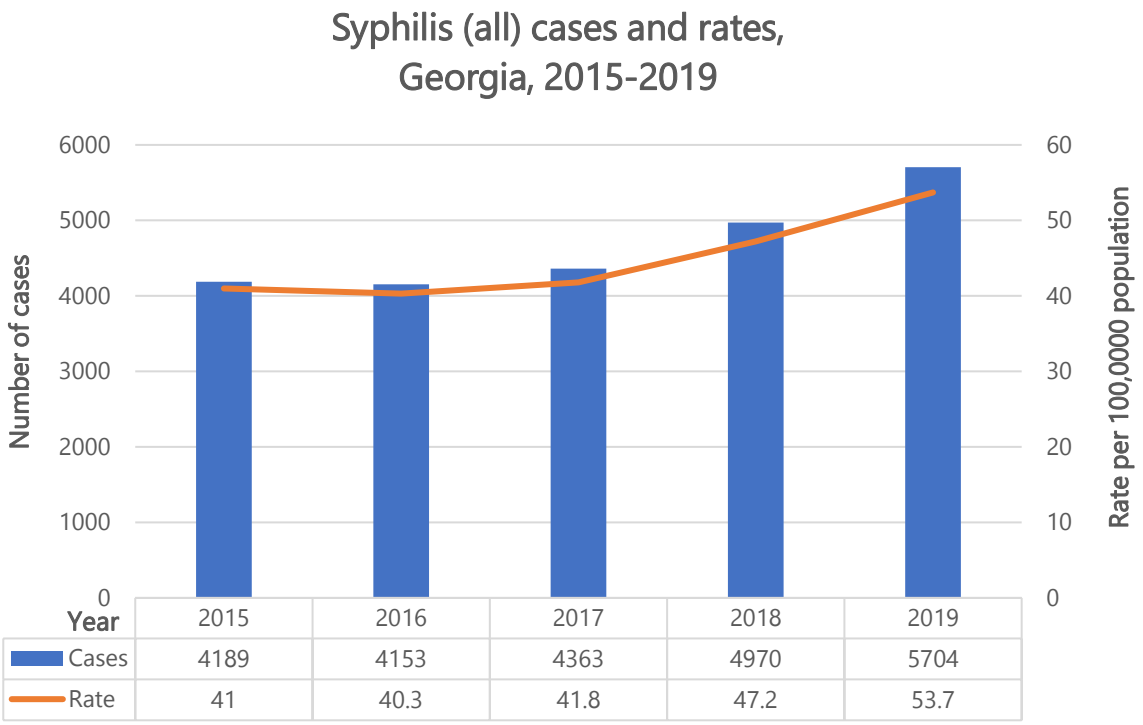
Syphilis Testing and Treatment

Any individual with syphilis symptoms should be tested for syphilis. Testing is also important among anyone whose oral, anal, or vaginal sex partner has had a recent syphilis diagnosis. In addition, all sexually active individuals should talk with their healthcare provider about their risk factors and whether syphilis testing would be appropriate. Some people should be tested (screened) even if they are asymptomatic or have no knowledge of an infected sex partner (25,26,27). People who should be tested regularly include those who are:

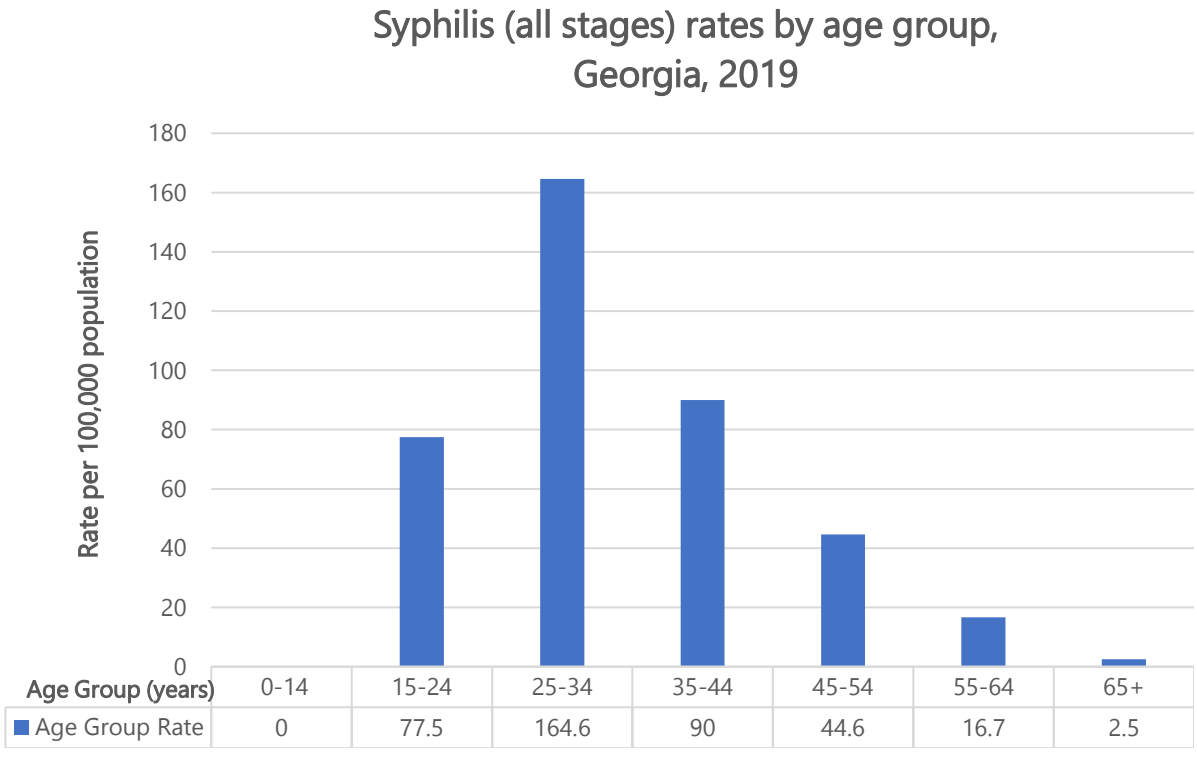
- pregnant;
- sexually active MSM;
- sexually active persons with HIV;
- taking pre-exposure prophylaxis (PrEP) for HIV prevention (25,26,27).

CDC's 2021 STI Treatment Guidelines provide detailed treatment recommendations. The recommended treatment for adults and adolescents with primary, secondary, or early non-primary non-secondary syphilis is Benzathine penicillin G 2.4 million units administered intramuscularly in a single dose. The recommended treatment for adults and adolescents with late latent syphilis or latent syphilis of unknown duration is Benzathine penicillin G 7.2 million units total, administered intramuscularly as 3 doses of 2.4 million units at weekly intervals. The recommended treatment for neurosyphilis, ocular syphilis, and otosyphilis for adults is Aqueous crystalline penicillin G 18-24 million units per day, administered as 3-4 million units intravenously every 4 hours or continuous infusion, for 10-14 days (4,6). Although the treatment will prevent the disease from progressing, there may be lasting permanent damage (6,25).

The appropriate penicillin preparation must be chosen to treat and cure syphilis properly. Some combinations of preparations (e.g., Bicillin C-R, a combination of benzathine penicillin and procaine penicillin) do not provide sufficient doses of penicillin and are therefore not adequate for syphilis treatment (28). For non-pregnant patients who are allergic to penicillin, alternatives may include doxycycline, tetracycline, and for neurosyphilis, potentially ceftriaxone. However, data on penicillin alternatives are limited. Alternatives should only be used if careful clinical follow-up and laboratory testing can demonstrate appropriate serologic response and cure. Individuals who are treated for syphilis must not engage in sexual contact with new partners until after syphilis sores have healed fully. All sex partners must be notified of the original patient's infection so that they can be tested and treated if needed (4,6,25).



Data source: (3) GA OASIS. https://oasis.state.ga.us/



Congenital syphilis cases are not included.
Data source: (3) GA OASIS. https://oasis.state.ga.us/

Syphilis (all stages) cases and rates, by sex, race/ethnicity, and age group, Georgia, 2015-2019										
	2015		2016		2017		2018		2019	
	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Sex at birth										
Male	3,641	73.1	3,643	72.6	3,763	74.1	4,258	83.2	4,876	94.5
Female	548	10.5	509	9.6	598	11.2	708	13.1	824	15.1
Unknown	0		1		2		4		4	
Race/ethnicity‡										
White	766	13.9	742	13.5	754	13.7	814	14.8	960	17.4
Black	2,998	95.1	2,965	92.3	3,046	93.2	3,531	106.6	4,167	124
Hispanic	217	22.7	269	27.7	295	29.3	306	29.8	383	36.5
Other	57	12.1	47	9.7	51	10.1	48	9.2	59	11.1
Multi Race	17	9.7	22	12.1	17	9.1	20	10.3	22	11
Unknown race/ethnicity	138		110		201		253		117	
Age group										
0-14	2	*	1	*	0	0	5	0.7	0	0
15-24	886	61.3	868	60.2	846	58.7	1006	69.6	1123	77.5
25-34	1,575	112.3	1,662	116.9	1,811	124.6	2,186	148.4	2,458	164.6
35-44	892	65.1	817	59.9	931	68.1	958	69.8	1,243	90
45-54	642	45.6	590	41.6	578	40.7	584	41.4	624	44.6
55-64	153	12.7	181	14.6	167	13.2	191	14.9	218	16.7
65+	39	12.7	34	14.6	29	13.2	40	14.9	38	16.7
Unknown age	0		0		0		0		0	
Total	**4,189**	**41.0**	**4,153**	**40.3**	**4,363**	**41.8**	**4,970**	**47.2**	**5,704**	**53.7**

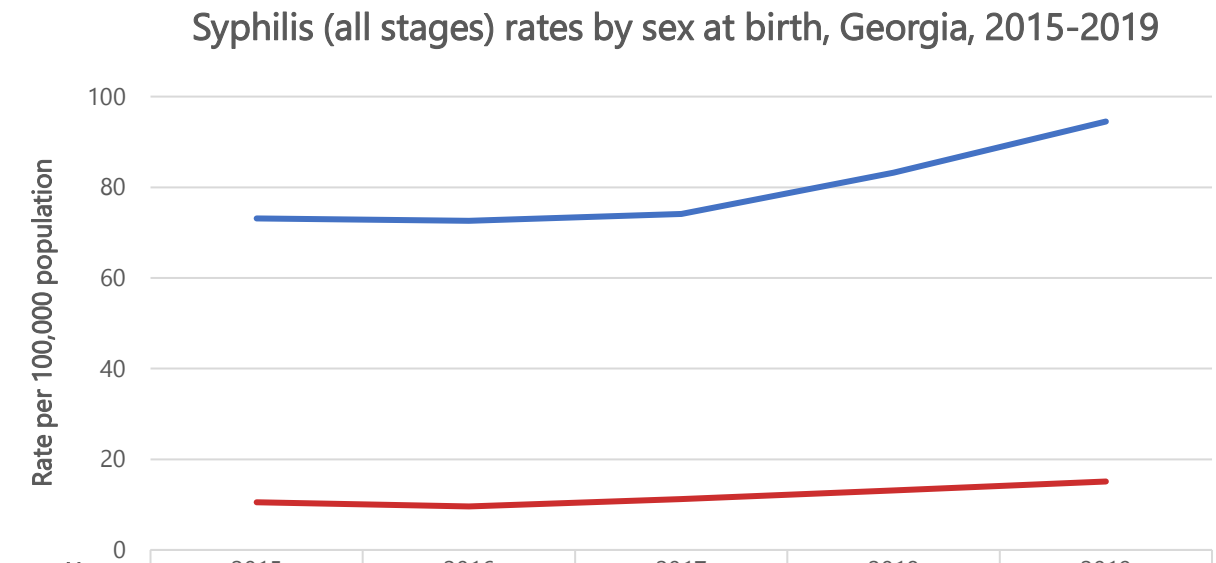
[ǂ]Rates were calculated as cases per 100,000 population.

*Rates based on 1-4 events are not shown and are indicated by an *.

Congenital syphilis cases are not included.

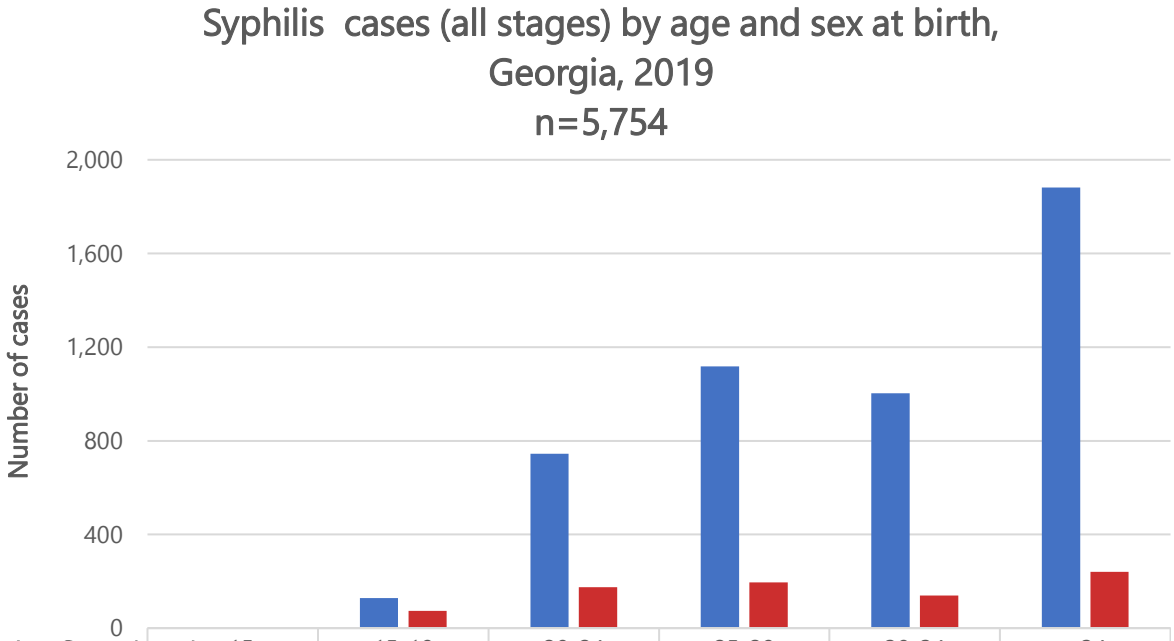
‡The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/



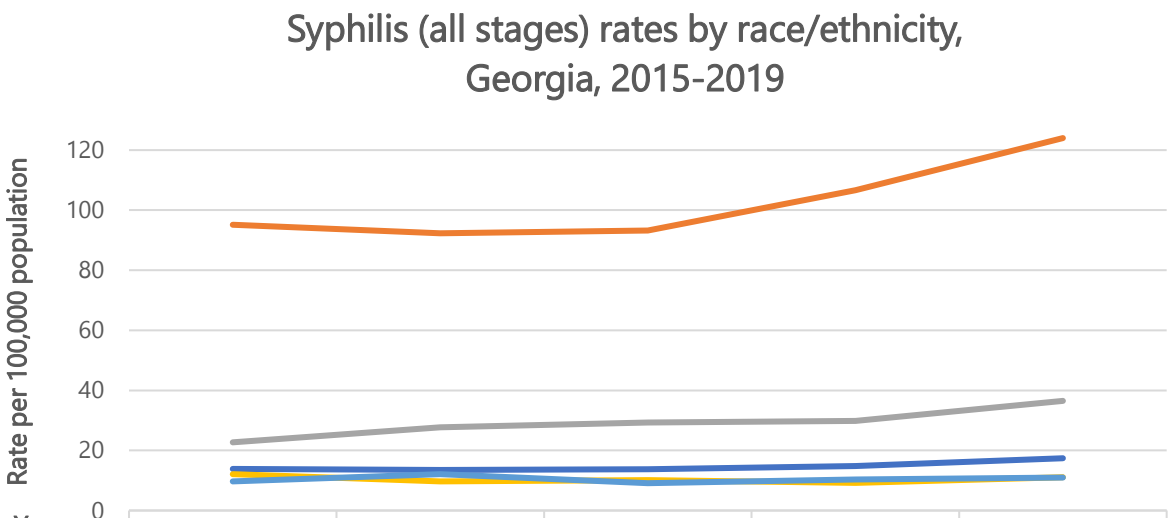
Year	2015	2016	2017	2018	2019
Male	73.1	72.6	74.1	83.2	94.5
Female	10.5	9.6	11.2	13.1	15.1

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Age Group (years)	<15	15-19	20-24	25-29	30-34	>34
Male	0	128	745	1,118	1,003	1,882
Female	0	74	175	196	139	240

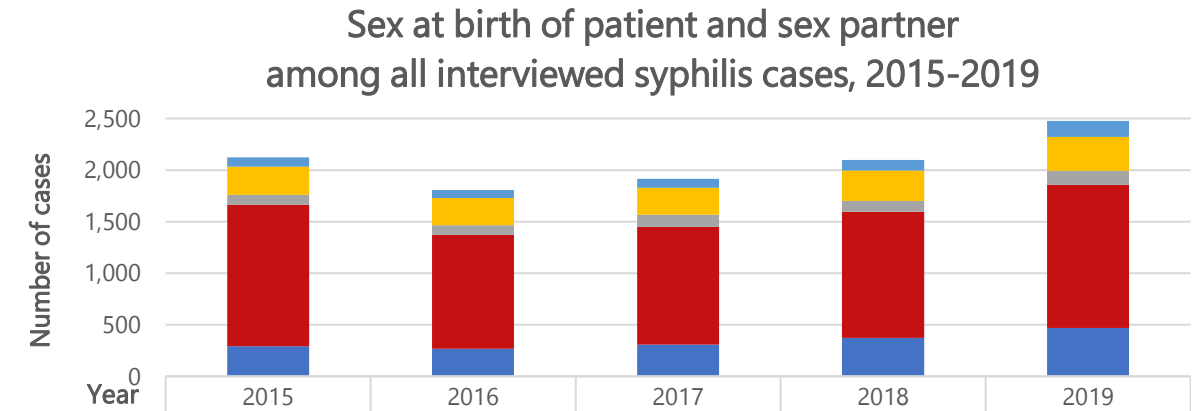
Total Georgia syphilis cases in 2019: N=5,758; missing age: n=0/5,758; missing sex: n=4/5,758; missing age and sex: n=0/5,758; missing age or sex: n=4/5,758. Total syphilis cases complete for age and sex: n=5,754.
Data Source: (3) GA OASIS. https://oasis.state.ga.us/



Year	2015	2016	2017	2018	2019
White	13.9	13.5	13.7	14.8	17.4
Black	95.1	92.3	93.2	106.6	124
Hispanic	22.7	27.7	29.3	29.8	36.5
Other	12.1	9.7	10.1	9.2	11.1
Multi Race	9.7	12.1	9.1	10.3	11

The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Year	2015	2016	2017	2018	2019
UNKNOWN	90	75	89	102	157
MSW	273	265	259	296	326
MSMW	96	94	119	104	137
MSM	1372	1103	1141	1223	1388
FEMALE	292	268	308	373	469

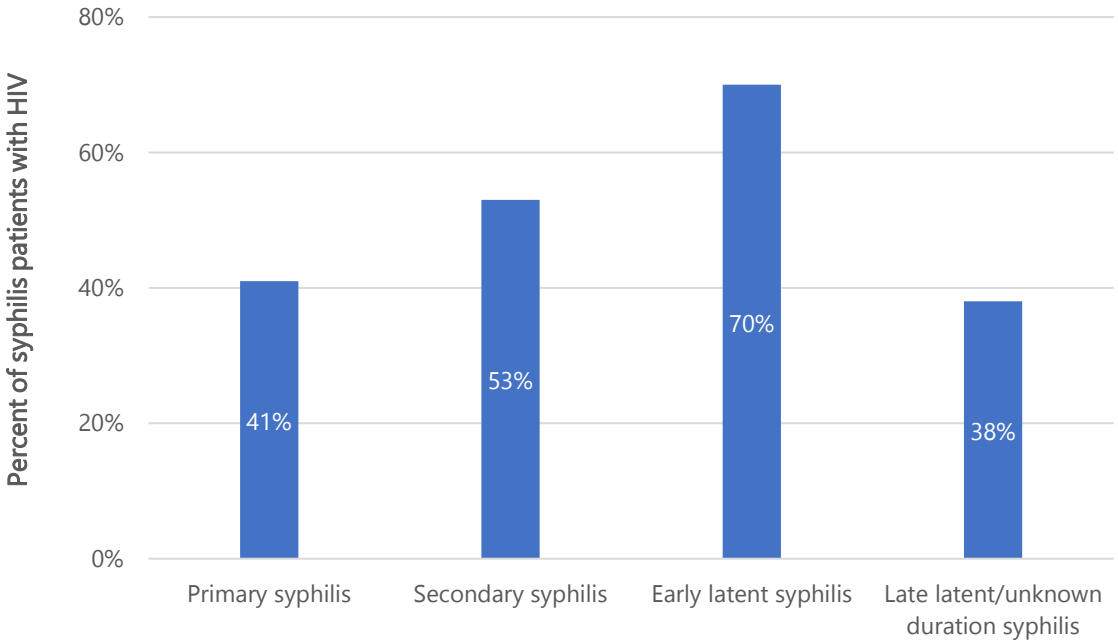
MSW: Men who have sex with women only; MSMW: Men who have sex with both men and women; MSM: Men who have sex with men only.

Patient sex at birth was used for all analyses.

FEMALE category includes for 2015-2019: 1,527 women who had sex with men only; 83 women who had sex with both men and women; 88 women whose sex of sex partner was unknown and 12 women who had sex with women only.

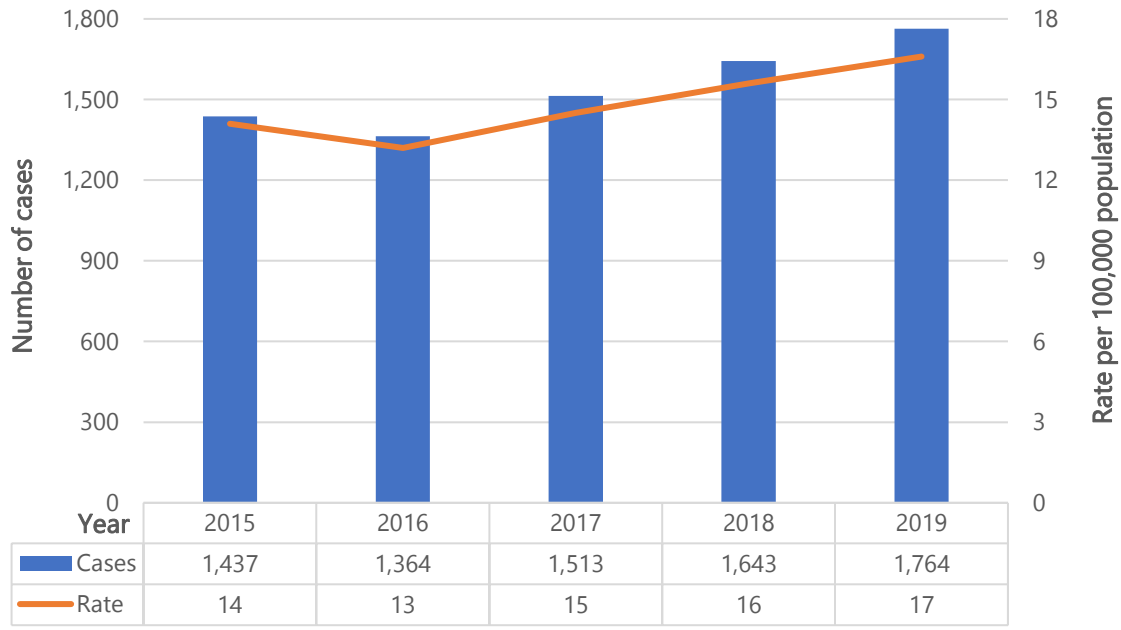
Data source: (5) GA SendSS

Percent of syphilis patients with HIV at the time of syphilis diagnosis, by stage of syphilis, Georgia, 2019



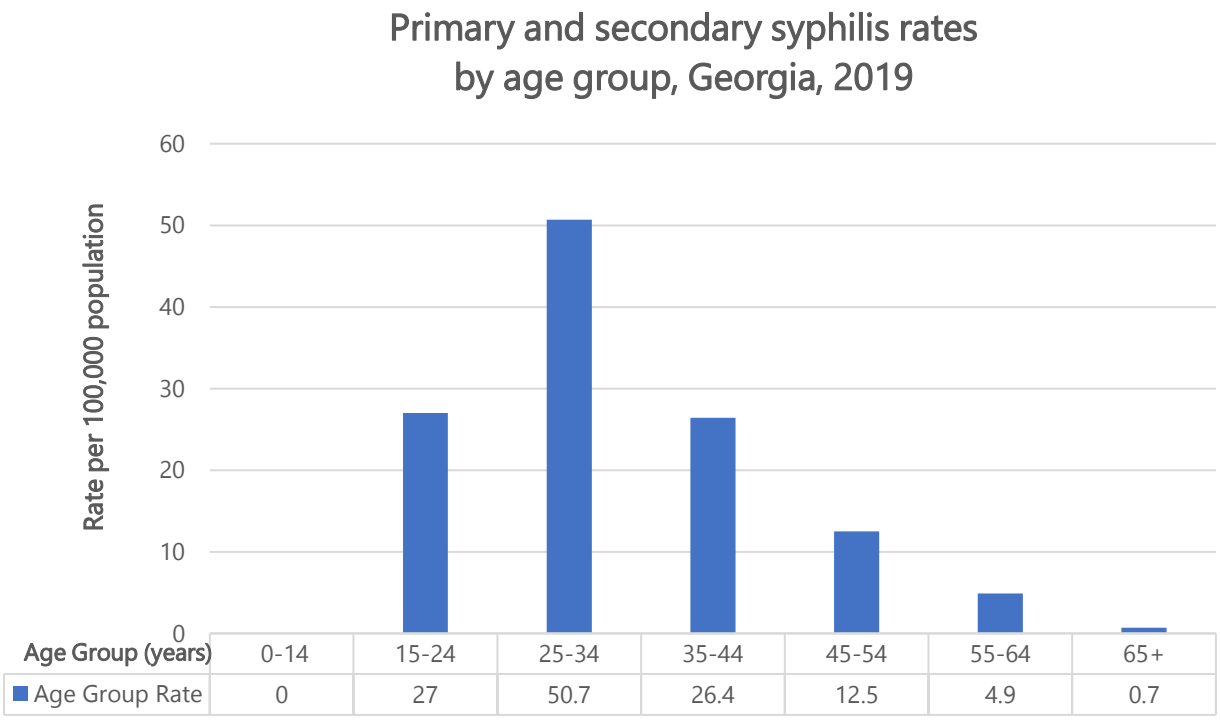
Includes persons diagnosed with HIV before or at the time of syphilis diagnosis
Data source: (5) GA SendSS

Primary and secondary syphilis cases and rates, Georgia, 2015-2019



Year	2015	2016	2017	2018	2019
Cases	1,437	1,364	1,513	1,643	1,764
Rate	14	13	15	16	17

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Data source: (3) GA OASIS. https://oasis.state.ga.us/

P&S syphilis cases and rates, by sex, race/ethnicity, and age group, Georgia, 2015-2019										
	2015		2016		2017		2018		2019	
	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Sex at birth										
Male	1,341	26.9	1,250	24.9	1,373	27.1	1,454	28.4	1,567	30.4
Female	96	1.8	114	2.2	140	2.6	189	3.5	197	3.6
Unknown	0		0		0		0		0	
Race/ethnicity**		0		0		0		0		0
White	279	5.1	257	4.7	278	5	294	5.3	345	6.2
Black	1,056	33.5	980	30.5	1,067	32.7	1,197	36.1	1,283	38.2
Hispanic	48	5	84	8.6	86	8.5	75	7.3	77	7.3
Other	10	2.3	17	3.9	9	2	15	3.2	18	3.7
Multi race	10	5.7	7	3.8	6	3.2	10	5.2	10	5
Unknown race/ethnicity	34		19		67		52		31	
Age group										
0-14	1	*	1	*	0	0	2	*	0	0
15-24	357	24.7	352	24.4	361	25	367	25.4	392	27
25-34	583	41.6	569	40	654	45	736	50	757	50.7
35-44	286	20.9	239	17.5	282	20.6	286	20.8	365	26.4
45-54	166	11.8	157	11.1	155	10.9	176	12.5	175	12.5
55-64	41	3.4	42	3.4	59	4.7	68	5.3	64	4.9
65+	3	*	4	*	2	*	8	0.5	11	0.7
Unknown age	0		0		0		0		0	
Total	1,437	14.1	1,364	13.2	1,513	14.5	1,643	15.6	1,764	16.6

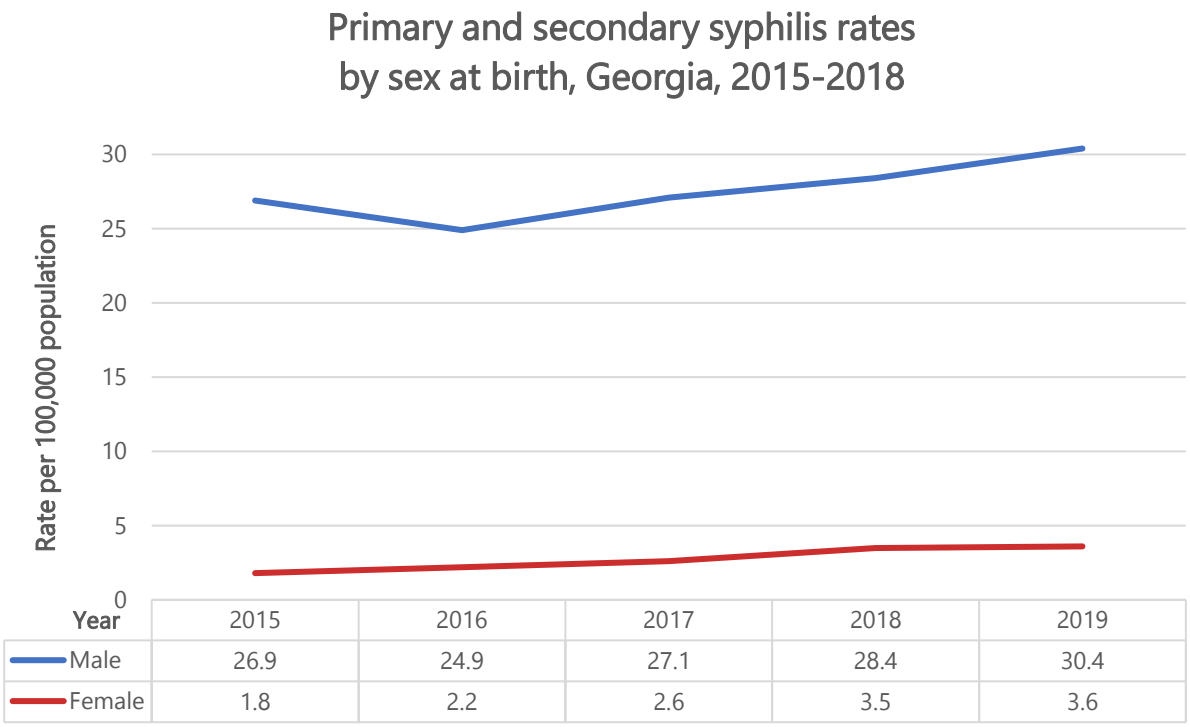
P&S: Primary and secondary

[ǂ]Rates were calculated as cases per 100,000 population.

*Rates based on 1-4 events are not shown and are indicated by an *.

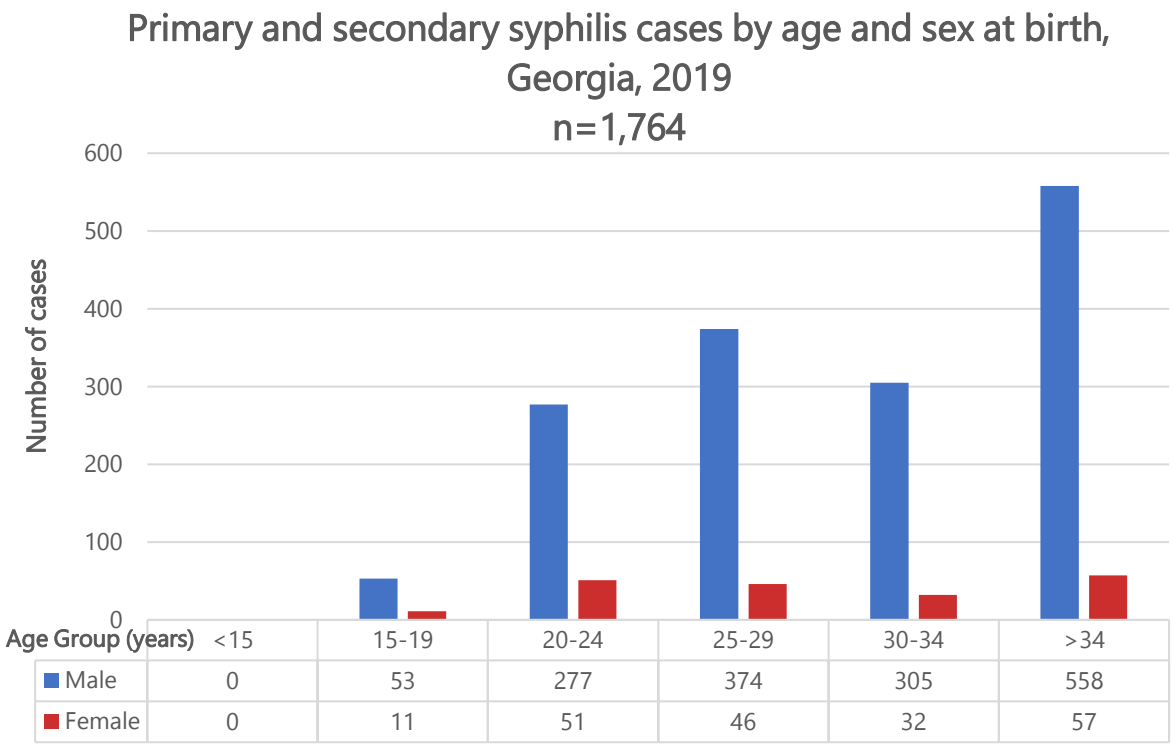
**The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/



Year	2015	2016	2017	2018	2019
Male	26.9	24.9	27.1	28.4	30.4
Female	1.8	2.2	2.6	3.5	3.6

Data source: (3) GA OASIS. https://oasis.state.ga.us/

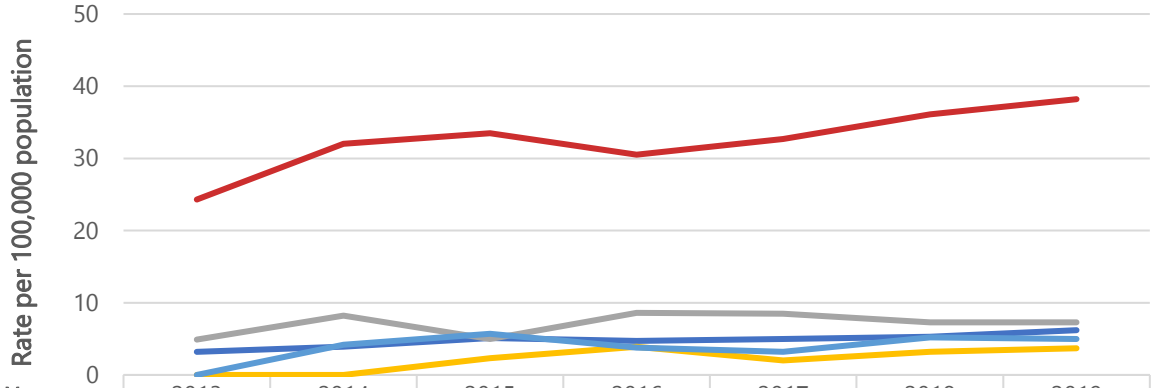


Age Group (years)	<15	15-19	20-24	25-29	30-34	>34
Male	0	53	277	374	305	558
Female	0	11	51	46	32	57

Total Georgia P&S syphilis cases in 2019: N=1,764; missing age or sex: n=0/1,764. Total gonorrhea cases complete for age and sex: n=1,764.

Source: Georgia DPH Office for Health Indicators and Planning (OHIP); OASIS

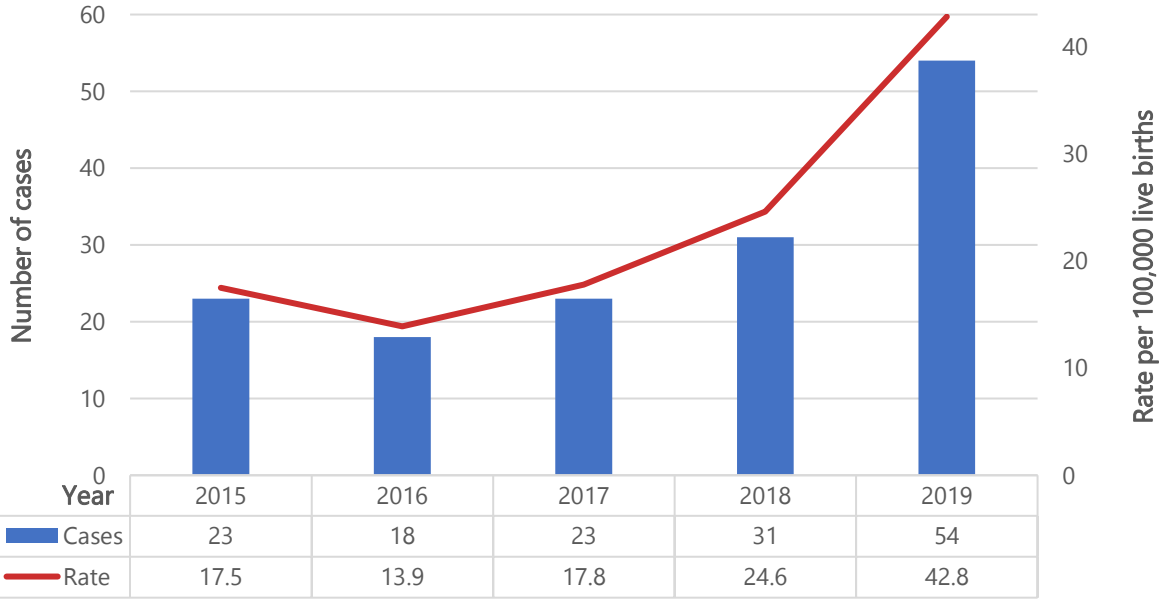
Primary and secondary syphilis rates by race/ethnicity, Georgia, 2015-2019



Year	2013	2014	2015	2016	2017	2018	2019
White	3.2	3.9	5.1	4.7	5	5.3	6.2
Black	24.3	32	33.5	30.5	32.7	36.1	38.2
Hispanic	4.9	8.2	5	8.6	8.5	7.3	7.3
Other	0	0	2.3	3.9	2	3.2	3.7
Multi Race	0	4.2	5.7	3.8	3.2	5.2	5

The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.
Data source: (3) GA OASIS. https://oasis.state.ga.us/

Congenital syphilis cases and rates, Georgia, 2015-2019



Year	2015	2016	2017	2018	2019
Cases	23	18	23	31	54
Rate	17.5	13.9	17.8	24.6	42.8

Rates were calculated as cases per 100,000 live births.
Data source: (3) GA OASIS. https://oasis.state.ga.us/

Congenital syphilis cases and rates, Georgia, 2015-2019										
	2015		2016		2017		2018		2019	
Race/ethnicity**	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
White	2	*	2	*	5	8.7	5	8.9	5	9.1
Black	18	40.8	7	16.0	14	31.4	23	52.3	46	104.4
Hispanic	2	*	5	27.9	1	*	0	0.0	3	*
Other	1	*	2	.0	1	*	0	.0	0	.0
Multi Race	0	.0	2	.0	0	.0	1	*	0	.0
Unknown	0	0	0	0	0	.0	2	*	0	.0
Total	23	17.5	18	13.9	21	17.8	31	24.6	54	42.8

[ǂ]Rates were calculated as cases per 100,000 live births.

*Rates based on 1-4 events are not shown and are indicated by an *.

**The Black, White, Other and Multi-Race categories exclude Hispanic ethnicity. Other race includes Asian, American Indian, Alaska Native, Native Hawaiian, other Pacific Islander. Cases with Hispanic ethnicity are grouped in the Hispanic category regardless of their race.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

STDs by Georgia Geographic Regions

Chlamydia cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Appling	72	390.2	99	537.2	91	491.3	84	453.9	81	440.6
Atkinson	58	690.6	36	435.2	56	671.3	46	554.4	43	526.6
Bacon	34	300.9	62	545.2	55	485.9	56	500.7	54	483.7
Baker	5	157.2	13	412.7	9	281.3	18	582.1	5	164.6
Baldwin	243	534.5	288	638.0	324	721.5	383	854.5	340	757.4
Banks	41	221.7	37	201.1	47	252.2	40	210.7	42	218.4
Barrow	235	311.8	272	352.7	284	359.2	270	334.1	230	276.3
Bartow	404	393.2	443	426.8	482	458.8	469	440.8	500	464.1
Ben Hill	94	540.1	118	684.3	119	700.2	122	726.8	130	778.4
Berrien	64	337.5	61	321.2	84	437.8	87	451.9	78	402.1
Bibb	1,507	980.3	1,528	1,000.3	1,481	968.8	1,650	1,077.8	1,783	1,164.1
Bleckley	66	539.1	77	593.7	86	670.3	96	747.8	107	831.2
Brantley	48	260.1	59	321.4	42	224.2	58	306.9	77	403.0
Brooks	108	689.7	96	612.0	73	468.3	79	509.3	92	595.2
Bryan	149	424.1	160	441.6	156	420.9	159	417.2	138	348.2
Bulloch	722	993.8	622	832.4	582	764.3	671	868.1	713	895.6
Burke	146	641.9	158	696.4	145	643.8	158	704.6	168	750.6
Butts	103	436.6	83	348.5	101	419.8	89	367.9	116	465.2
Calhoun	34	524.8	40	632.5	33	511.2	30	472.3	34	549.4
Camden	186	357.0	239	450.9	269	507.1	225	419.2	235	429.9
Candler	43	395.0	52	476.6	58	537.2	36	332.2	46	425.8
Carroll	737	643.4	692	595.2	713	605.2	696	589.2	665	554.2
Catoosa	136	205.9	178	268.1	189	284.0	205	304.1	227	335.9
Charlton	46	354.8	50	400.1	41	322.5	65	501.2	63	470.4
Chatham	2,473	861.8	2,500	864.8	2,685	924.3	2,565	886.9	2,672	923.2
Chattahoochee	24	211.1	15	137.3	24	232.0	77	720.7	133	1,219.4
Chattooga	77	309.0	82	330.3	88	355.3	102	411.5	95	383.2
Cherokee	618	262.0	617	255.3	735	296.9	661	260.1	674	260.5
Clarke	1,034	834.5	1,047	839.6	1,113	875.9	831	652.6	927	722.4
Clay	16	509.4	17	562.9	16	540.2	18	623.5	19	670.4
Clayton	2,622	957.1	2,757	986.5	2,880	1,010.0	2,714	937.1	2,990	1,023.1
Clinch	46	667.3	43	629.7	37	550.0	41	616.7	53	800.8
Cobb	3,501	472.3	3,863	516.3	3,891	514.9	3,853	509.1	3,970	522.3
Coffee	204	473.2	195	453.4	289	671.9	268	621.9	284	656.3
Colquitt	160	349.0	252	551.3	219	477.8	237	519.8	201	440.8
Columbia	349	242.3	464	314.7	495	326.6	495	320.8	538	343.3

[†]Rates were calculated as cases per 100,000 population.

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N/A5 indicates that the numerator is less than 5; therefore, the number is suppressed at county levels.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Chlamydia cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County name	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]
Cook	91	531.4	105	611.6	99	573.0	123	716.7	155	897.5
Coweta	443	320.0	482	343.0	468	327.0	486	333.2	473	318.5
Crawford	45	363.3	43	349.0	39	317.2	49	397.8	37	298.3
Crisp	168	734.2	174	765.8	159	699.3	131	579.6	154	688.4
Dade	30	184.5	22	135.3	38	233.3	39	240.4	60	372.3
Dawson	44	188.7	46	194.9	42	172.3	52	207.3	61	233.6
Decatur	218	802.2	278	1,036.5	236	883.4	252	948.3	244	924.1
DeKalb	5,099	693.9	5,984	808.3	6,193	822.2	5,990	791.7	5,957	784.5
Dodge	90	431.0	118	573.8	123	593.3	114	550.6	119	577.5
Dooly	45	320.6	69	501.3	47	342.1	68	496.1	53	395.8
Dougherty	949	1,039.1	1,116	1,239.8	1,113	1,243.5	1,163	1,274.6	1,183	1,345.0
Douglas	954	677.9	980	689.1	912	633.9	1,058	728.0	1,038	709.3
Early	108	1,021.3	117	1,131.6	92	893.6	101	985.7	111	1,089.3
Echols	9	222.8	19	479.6	21	533.5	15	375.0	14	349.5
Effingham	242	423.8	221	376.4	233	388.4	276	443.8	269	418.4
Elbert	86	444.1	95	496.3	94	491.9	73	381.8	80	416.8
Emanuel	195	858.7	156	689.2	145	643.6	154	681.1	171	755.1
Evans	58	537.7	49	459.2	49	454.8	80	746.2	125	1,173.3
Fannin	15	61.7	34	136.5	29	114.5	37	142.5	30	114.6
Fayette	341	308.0	330	295.6	389	345.6	362	319.1	403	352.2
Floyd	486	503.6	492	509.5	507	519.4	487	497.3	510	517.8
Forsyth	267	125.7	392	177.4	414	181.6	401	169.5	430	176.0
Franklin	90	403.4	73	327.1	73	319.9	76	330.1	69	295.5
Fulton	7,260	718.4	8,448	825.5	9,833	944.2	9,066	863.3	10,661	1,002.0
Gilmer	45	153.1	49	164.8	58	189.1	68	220.7	71	226.3
Glascock	5	163.1	9	299.4	6	196.0	7	233.7	N/A5	*
Glynn	449	537.2	582	688.7	581	681.3	655	768.6	654	766.8
Gordon	136	240.4	150	263.6	166	290.8	173	299.9	218	376.1
Grady	149	591.2	138	556.3	127	511.7	130	525.3	130	527.7
Greene	80	478.8	118	694.0	90	520.8	84	474.6	93	507.5
Gwinnett	3,564	397.8	3,966	437.2	4,099	445.4	4,073	439.0	4,305	459.8
Habersham	107	243.2	98	221.5	144	323.1	161	354.7	137	302.2
Hall	573	296.1	554	281.7	675	338.6	713	352.7	761	372.2
Hancock	62	725.1	62	717.6	65	759.3	57	682.8	62	733.1

[‡]Rates were calculated as cases per 100,000 population.

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Chlamydia cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Haralson	88	305.0	96	330.6	74	252.9	108	365.7	85	285.3
Harris	80	239.7	84	249.6	73	215.2	118	342.3	114	323.5
Hart	103	403.4	110	430.5	92	356.7	91	348.7	101	385.4
Heard	36	312.0	34	296.0	47	400.7	47	395.7	38	318.7
Henry	1,095	502.9	1,254	565.5	1,285	569.1	1,356	589.0	1,528	651.4
Houston	892	594.5	1,020	670.5	1,068	695.9	1,007	647.7	1,055	668.3
Irwin	47	508.4	50	530.7	47	499.5	58	617.2	53	562.9
Jackson	174	274.6	190	294.0	184	272.5	161	228.6	201	275.4
Jasper	35	256.7	36	263.7	67	479.8	61	434.5	50	351.6
Jeff Davis	59	395.4	69	463.8	82	545.8	65	432.5	85	562.4
Jefferson	106	658.1	139	873.3	130	830.8	135	874.9	113	735.6
Jenkins	56	625.2	36	406.8	47	536.1	44	506.7	31	357.3
Johnson	63	652.4	51	536.6	41	418.9	42	432.6	78	808.9
Jones	119	417.6	102	356.4	87	305.6	98	342.5	107	372.4
Lamar	55	302.2	82	444.0	91	489.3	90	473.7	78	408.9
Lanier	27	261.8	39	375.0	41	393.3	54	522.2	54	518.1
Laurens	284	595.0	297	625.1	292	616.9	315	665.6	398	837.1
Lee	104	356.1	111	378.4	103	349.5	106	356.1	126	420.1
Liberty	753	1,205.4	843	1,347.3	868	1,414.0	843	1,370.8	554	901.8
Lincoln	25	325.8	26	332.1	32	406.1	26	328.5	24	303.0
Long	79	445.5	88	477.3	95	499.6	109	573.7	76	388.6
Lowndes	1,079	956.0	1,201	1,047.7	1,052	910.9	1,084	931.9	1,091	929.3
Lumpkin	66	210.1	76	241.7	71	216.0	85	257.9	79	235.0
McDuffie	172	798.5	211	981.9	155	721.0	141	654.9	174	816.4
McIntosh	64	458.2	64	459.5	64	453.7	90	627.6	68	472.9
Macon	73	535.5	98	728.6	90	676.0	91	692.4	83	641.1
Madison	105	369.2	129	447.5	116	395.9	116	391.2	90	301.2
Marion	39	445.2	35	410.6	42	497.0	45	538.9	37	442.6
Meriwether	104	490.8	125	593.1	120	570.1	138	655.0	138	652.0
Miller	23	392.9	48	810.0	37	633.8	26	457.3	32	559.6
Mitchell	157	695.5	139	618.9	142	637.0	159	716.5	163	745.6
Monroe	102	376.3	77	282.0	92	339.3	99	359.7	100	362.6
Montgomery	40	446.9	36	397.4	48	531.5	61	663.5	57	621.5
Morgan	69	382.4	86	473.3	91	494.2	85	450.9	79	409.8
Murray	100	252.7	110	279.8	127	319.2	164	410.8	173	431.5
Muscogee	1,641	818.1	1,681	851.2	1,829	942.5	1,747	899.8	1,901	971.0

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Chlamydia cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Newton	711	674.1	736	687.9	868	803.1	846	772.3	909	813.5
Oconee	79	219.7	102	276.9	95	249.8	76	193.5	70	173.8
Oglethorpe	53	356.4	61	408.8	56	376.4	40	265.7	41	268.7
Paulding	547	359.3	563	361.3	561	351.8	659	401.7	658	390.1
Peach	161	602.5	225	844.1	237	874.6	241	882.9	254	922.1
Pickens	46	151.8	57	184.9	71	224.8	74	231.4	78	239.3
Pierce	72	376.9	75	391.2	75	388.5	85	438.4	72	369.9
Pike	42	234.1	39	217.4	39	214.1	39	209.3	47	247.9
Polk	154	370.9	165	395.0	183	434.8	194	456.8	267	626.6
Pulaski	56	491.4	40	355.5	62	553.5	68	614.3	86	772.2
Putnam	94	440.2	129	600.6	102	469.4	117	536.5	129	583.2
Quitman	8	347.5	15	642.4	6	254.5	12	526.5	21	913.4
Rabun	30	184.3	29	175.1	44	265.0	55	326.1	22	128.4
Randolph	33	458.8	46	640.9	37	523.0	34	497.6	46	678.7
Richmond	2,087	1,034.2	1,990	986.9	2,465	1,221.5	2,546	1,263.2	2,574	1,271.0
Rockdale	565	635.9	640	716.2	731	809.4	724	799.2	768	844.9
Schley	15	290.2	18	353.1	12	230.2	8	152.8	13	247.3
Screven	65	459.0	90	640.8	77	551.9	86	617.0	77	551.3
Seminole	65	751.7	57	673.1	43	518.6	53	637.4	55	679.9
Spalding	298	465.3	337	520.0	413	631.7	421	636.9	453	679.1
Stephens	84	328.3	92	357.3	96	370.8	99	380.3	91	351.0
Stewart	26	444.4	31	543.4	33	551.4	28	451.7	27	407.8
Sumter	257	835.0	248	816.1	264	884.5	281	945.1	272	921.3
Talbot	30	473.4	37	599.6	30	480.1	43	685.6	25	403.6
Taliaferro	12	732.2	6	376.6	7	430.0	6	373.1	N/A5	*
Tattnall	74	293.3	96	382.6	92	363.1	133	523.8	132	522.0
Taylor	28	336.1	35	425.2	43	528.1	45	559.8	49	611.0
Telfair	82	500.0	74	463.5	76	475.3	73	459.8	75	472.9
Terrell	95	1,042.5	95	1,059.4	89	1,019.6	134	1,556.1	126	1,477.0
Thomas	309	685.7	280	618.8	275	614.1	303	681.7	318	715.4
Tift	226	554.4	290	710.3	300	739.0	296	729.6	311	765.2
Toombs	164	602.0	159	584.6	219	811.1	214	795.9	201	749.2
Towns	13	116.3	13	114.1	12	104.3	19	160.3	16	132.9
Treutlen	37	545.3	34	512.3	31	459.9	32	470.0	27	391.2
Troup	485	695.2	432	617.1	556	796.7	582	831.0	579	828.1
Turner	58	706.1	60	747.2	80	1,004.9	59	745.7	90	1,127.1

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Chlamydia cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Twiggs	30	357.6	46	563.0	55	672.9	38	464.1	47	578.8
Union	12	53.9	17	74.1	23	98.0	28	116.7	21	85.7
Upson	124	470.3	140	531.6	133	508.9	132	503.5	171	649.7
Walker	159	233.6	155	228.3	210	304.6	180	259.3	230	329.7
Walton	360	407.2	388	430.2	417	455.2	316	338.0	350	370.0
Ware	279	788.8	320	895.4	336	936.7	312	874.4	308	861.9
Warren	43	787.5	32	588.0	30	565.7	31	590.4	39	742.3
Washington	173	831.1	209	1,021.7	197	969.8	154	755.4	196	962.0
Wayne	122	413.1	143	475.0	154	516.5	136	456.3	178	594.8
Webster	21	793.1	13	500.2	15	575.8	15	574.5	19	728.8
Wheeler	28	354.3	29	363.5	18	226.4	24	304.6	33	420.1
White	39	137.7	51	176.6	54	183.3	54	180.2	52	168.8
Whitfield	382	366.5	354	338.5	464	443.3	458	440.1	458	437.7
Wilcox	44	496.8	36	410.9	37	420.5	37	419.9	41	474.8
Wilkes	63	638.5	81	826.1	72	727.9	72	729.0	55	562.5
Wilkinson	53	578.9	54	593.1	49	546.9	71	785.7	75	837.6
Worth	100	483.1	94	453.1	127	618.5	111	546.8	118	582.8
All Counties	**56,215**	**550.3**	**61,315**	**594.7**	**65,044**	**623.7**	**64,387**	**612.1**	**67,953**	**640.0**

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Gonorrhea cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Appling	31	168.0	26	141.1	36	194.4	30	162.1	50	271.9
Atkinson	N/A5	*	8	96.7	6	71.9	10	120.5	6	73.5
Bacon	13	115.1	5	44.0	12	106.0	26	232.5	11	98.5
Baker	N/A5	*	0	0.0	5	156.3	N/A5	*	N/A5	*
Baldwin	34	74.8	71	157.3	102	227.1	115	256.6	142	316.3
Banks	6	32.4	N/A5	*	10	53.7	15	79.0	9	46.8
Barrow	54	71.6	72	93.4	78	98.7	73	90.3	62	74.5
Bartow	134	130.4	159	153.2	197	187.5	153	143.8	160	148.5
Ben Hill	29	166.6	24	139.2	46	270.7	25	148.9	42	251.5
Berrien	7	36.9	22	115.8	15	78.2	20	103.9	18	92.8
Bibb	574	373.4	573	375.1	512	334.9	749	489.2	702	458.3
Bleckley	13	106.2	16	123.4	28	218.2	23	179.2	30	233.0
Brantley	N/A5	*	14	76.3	24	128.1	26	137.6	15	78.5
Brooks	22	140.5	26	165.7	27	173.2	16	103.1	20	129.4
Bryan	16	45.5	28	77.3	32	86.3	24	63.0	38	95.9
Bulloch	108	148.7	138	184.7	196	257.4	188	243.2	168	211.0
Burke	41	180.3	37	163.1	59	262.0	48	214.1	53	236.8
Butts	25	106.0	28	117.6	32	133.0	24	99.2	16	64.2
Calhoun	8	123.5	9	142.3	11	170.4	8	125.9	9	145.4
Camden	37	71.0	37	69.8	61	115.0	63	117.4	57	104.3
Candler	13	119.4	11	100.8	9	83.4	16	147.7	14	129.6
Carroll	213	186.0	204	175.5	195	165.5	230	194.7	249	207.5
Catoosa	36	54.5	49	73.8	62	93.2	65	96.4	91	134.7
Charlton	6	46.3	8	64.0	17	133.7	24	185.1	17	126.9
Chatham	797	277.7	847	293.0	824	283.6	654	226.1	778	268.8
Chattahoochee	5	44.0	N/A5	*	8	77.3	20	187.2	37	339.2
Chattooga	19	76.2	34	137.0	54	218.0	49	197.7	45	181.5
Cherokee	99	42.0	113	46.8	140	56.5	135	53.1	110	42.5
Clarke	227	183.2	363	291.1	328	258.1	213	167.3	209	162.9
Clay	N/A5	*	5	165.6	N/A5	*	6	207.8	N/A5	*
Clayton	846	308.8	1,032	369.3	1,144	401.2	993	342.9	1,035	354.1
Clinch	5	72.5	12	175.7	11	163.5	22	330.9	13	196.4
Cobb	882	119.0	1,168	156.1	1,149	152.0	1,016	134.2	1,037	136.4
Coffee	50	116.0	63	146.5	77	179.0	102	236.7	78	180.3
Colquitt	46	100.3	43	94.1	76	165.8	69	151.3	52	114.0
Columbia	77	53.5	106	71.9	111	73.2	100	64.8	133	84.9

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Gonorrhea cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Cook	25	146.0	26	151.5	20	115.8	36	209.8	32	185.3
Coweta	91	65.7	98	69.7	167	116.7	114	78.2	106	71.4
Crawford	14	113.0	20	162.3	13	105.7	21	170.5	9	72.6
Crisp	34	148.6	54	237.7	74	325.5	43	190.3	55	245.8
Dade	N/A5	*	6	36.9	11	67.5	15	92.4	14	86.9
Dawson	N/A5	*	5	21.2	9	36.9	16	63.8	13	49.8
Decatur	64	235.5	105	391.5	53	198.4	60	225.8	105	397.7
DeKalb	1,706	232.1	2,400	324.2	2,655	352.5	2,319	306.5	2,380	313.4
Dodge	12	57.5	43	209.1	32	154.4	29	140.1	49	237.8
Dooly	11	78.4	12	87.2	10	72.8	16	116.7	15	112.0
Dougherty	195	213.5	289	321.1	305	340.8	322	352.9	311	353.6
Douglas	218	154.9	289	203.2	297	206.4	236	162.4	274	187.2
Early	16	151.3	45	435.2	38	369.1	13	126.9	31	304.2
Echols	N/A5	*	0	0.0	7	177.8	N/A5	*	N/A5	*
Effingham	38	66.5	33	56.2	57	95.0	42	67.5	60	93.3
Elbert	27	139.4	34	177.6	26	136.1	16	83.7	20	104.2
Emanuel	65	286.2	58	256.2	21	93.2	41	181.3	53	234.0
Evans	23	213.2	10	93.7	14	129.9	15	139.9	23	215.9
Fannin	N/A5	*	N/A5	*	N/A5	*	5	19.3	12	45.8
Fayette	63	56.9	87	77.9	75	66.6	59	52.0	70	61.2
Floyd	145	150.3	184	190.6	287	294.0	187	191.0	259	262.9
Forsyth	36	16.9	53	24.0	62	27.2	55	23.2	54	22.1
Franklin	39	174.8	20	89.6	18	78.9	20	86.9	25	107.1
Fulton	2,816	278.7	3,918	382.9	4,381	420.7	3,649	347.5	3,891	365.7
Gilmer	N/A5	*	8	26.9	9	29.3	11	35.7	11	35.1
Glascock	0	0.0	N/A5	*	0	0.0	0	0.0	N/A5	*
Glynn	141	168.7	201	237.9	230	269.7	250	293.4	209	245.0
Gordon	36	63.6	37	65.0	80	140.1	70	121.3	49	84.5
Grady	32	127.0	32	129.0	24	96.7	50	202.0	52	211.1
Greene	15	89.8	25	147.0	26	150.5	28	158.2	28	152.8
Gwinnett	745	83.2	970	106.9	1,005	109.2	922	99.4	972	103.8
Habersham	18	40.9	18	40.7	36	80.8	41	90.3	45	99.3
Hall	86	44.4	151	76.8	104	52.2	160	79.1	175	85.6
Hancock	7	81.9	16	185.2	28	327.1	19	227.6	25	295.6
Haralson	33	114.4	22	75.8	31	106.0	39	132.1	46	154.4
Harris	18	53.9	23	68.3	21	61.9	25	72.5	26	73.8

[ǂ]Rates were calculated as cases per 100,000 population.

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Data source: (3) GA OASIS. https://oasis.state.ga.us/

Gonorrhea cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Hart	53	207.6	39	152.6	34	131.8	19	72.8	62	236.6
Heard	8	69.3	7	60.9	8	68.2	18	151.5	9	75.5
Henry	327	150.2	407	183.5	402	178.0	360	156.4	429	182.9
Houston	210	140.0	325	213.6	407	265.2	432	277.9	364	230.6
Irwin	12	129.8	12	127.4	22	233.8	16	170.2	10	106.2
Jackson	25	39.5	51	78.9	53	78.5	36	51.1	40	54.8
Jasper	9	66.0	10	73.2	17	121.7	16	114.0	21	147.7
Jeff Davis	9	60.3	19	127.7	13	86.5	22	146.4	14	92.6
Jefferson	41	254.6	36	226.2	44	281.2	33	213.9	33	214.8
Jenkins	13	145.1	9	101.7	9	102.7	11	126.7	6	69.2
Johnson	8	82.9	14	147.3	23	235.0	13	133.9	14	145.2
Jones	24	84.2	35	122.3	24	84.3	33	115.3	31	107.9
Lamar	11	60.4	27	146.2	24	129.0	27	142.1	23	120.6
Lanier	N/A5	*	22	211.6	14	134.3	17	164.4	15	143.9
Laurens	81	169.7	85	178.9	95	200.7	115	243.0	153	321.8
Lee	11	37.7	14	47.7	24	81.4	26	87.4	28	93.4
Liberty	205	328.2	136	217.4	199	324.2	173	281.3	185	301.1
Lincoln	N/A5	*	6	76.6	7	88.8	6	75.8	N/A5	*
Long	23	129.7	17	92.2	18	94.7	24	126.3	23	117.6
Lowndes	372	329.6	467	407.4	371	321.2	345	296.6	331	281.9
Lumpkin	6	19.1	15	47.7	11	33.5	10	30.3	19	56.5
McDuffie	30	139.3	61	283.9	33	153.5	50	232.2	55	258.1
McIntosh	17	121.7	17	122.1	30	212.7	22	153.4	24	166.9
Macon	11	80.7	24	178.4	26	195.3	31	235.9	41	316.7
Madison	20	70.3	55	190.8	32	109.2	21	70.8	22	73.6
Marion	7	79.9	8	93.9	6	71.0	6	71.8	6	71.8
Meriwether	29	136.9	40	189.8	50	237.5	43	204.1	40	189.0
Miller	N/A5	*	16	270.0	7	119.9	N/A5	*	12	209.9
Mitchell	25	110.7	23	102.4	42	188.4	38	171.2	53	242.4
Monroe	32	118.1	24	87.9	29	107.0	22	79.9	28	101.5
Montgomery	11	122.9	19	209.7	7	77.5	18	195.8	16	174.4
Morgan	19	105.3	13	71.5	34	184.7	25	132.6	15	77.8
Murray	18	45.5	37	94.1	58	145.8	49	122.7	48	119.7
Muscogee	539	268.7	717	363.1	963	496.2	568	292.5	573	292.7
Newton	184	174.5	248	231.8	263	243.3	230	210.0	294	263.1
Oconee	5	13.9	11	29.9	23	60.5	21	53.5	14	34.8

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Gonorrhea cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Oglethorpe	13	87.4	14	93.8	25	168.0	11	73.1	16	104.9
Paulding	135	88.7	154	98.8	150	94.1	149	90.8	183	108.5
Peach	45	168.4	69	258.9	79	291.5	89	326.0	81	294.1
Pickens	6	19.8	20	64.9	17	53.8	19	59.4	14	43.0
Pierce	9	47.1	16	83.5	35	181.3	32	165.0	33	169.5
Pike	9	50.2	12	66.9	6	32.9	10	53.7	18	94.9
Polk	38	91.5	70	167.6	116	275.6	74	174.2	102	239.4
Pulaski	8	70.2	15	133.3	22	196.4	18	162.6	18	161.6
Putnam	12	56.2	25	116.4	33	151.9	39	178.8	35	158.2
Quitman	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Rabun	N/A5	*	N/A5	*	8	48.2	16	94.9	7	40.8
Randolph	5	69.5	13	181.1	8	113.1	10	146.3	16	236.1
Richmond	603	298.8	567	281.2	1,053	521.8	1,194	592.4	985	486.4
Rockdale	145	163.2	183	204.8	219	242.5	191	210.8	254	279.4
Schley	N/A5	*	N/A5	*	6	115.1	5	95.5	N/A5	*
Screven	9	63.6	20	142.4	28	200.7	16	114.8	10	71.6
Seminole	11	127.2	20	236.2	7	84.4	14	168.4	18	222.5
Spalding	69	107.7	88	135.8	121	185.1	114	172.5	108	161.9
Stephens	40	156.3	24	93.2	33	127.5	37	142.1	39	150.4
Stewart	5	85.5	11	192.8	12	200.5	9	145.2	N/A5	*
Sumter	77	250.2	64	210.6	60	201.0	61	205.2	83	281.1
Talbot	10	157.8	19	307.9	8	128.0	N/A5	*	9	145.3
Taliaferro	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Tattnall	12	47.6	21	83.7	31	122.4	27	106.3	22	87.0
Taylor	9	108.0	13	157.9	15	184.2	11	136.8	13	162.1
Telfair	15	91.5	25	156.6	19	118.8	24	151.2	8	50.4
Terrell	11	120.7	15	167.3	20	229.1	18	209.0	29	339.9
Thomas	67	148.7	90	198.9	88	196.5	94	211.5	116	261.0
Tift	45	110.4	57	139.6	85	209.4	69	170.1	78	191.9
Toombs	48	176.2	49	180.2	28	103.7	86	319.9	93	346.6
Towns	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Treutlen	9	132.6	7	105.5	5	74.2	11	161.6	7	101.4
Troup	139	199.2	117	167.1	183	262.2	207	295.6	200	286.0
Turner	N/A5	*	14	174.3	29	364.3	21	265.4	19	237.9
Twiggs	11	131.1	11	134.6	20	244.7	34	415.2	14	172.4
Union	0	0.0	N/A5	*	5	21.3	N/A5	*	8	32.6

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Gonorrhea cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[ł]	Cases	Rate[ł]	Cases	Rate[ł]	Cases	Rate[ł]	Cases	Rate[ł]
Upson	29	110.0	29	110.1	34	130.1	71	270.8	35	133.0
Walker	52	76.4	49	72.2	79	114.6	79	113.8	90	129.0
Walton	87	98.4	96	106.4	111	121.2	71	75.9	60	63.4
Ware	77	217.7	202	565.2	193	538.0	132	370.0	89	249.1
Warren	9	164.8	8	147.0	10	188.6	7	133.3	10	190.3
Washington	16	76.9	43	210.2	41	201.8	52	255.1	50	245.4
Wayne	33	111.7	42	139.5	62	207.9	50	167.7	41	137.0
Webster	6	226.6	N/A5	*	0	0.0	N/A5	*	N/A5	*
Wheeler	N/A5	*	N/A5	*	14	176.1	N/A5	*	6	76.4
White	N/A5	*	N/A5	*	12	40.7	23	76.7	20	64.9
Whitfield	63	60.5	58	55.5	126	120.4	113	108.6	127	121.4
Wilcox	7	79.0	7	79.9	15	170.5	12	136.2	11	127.4
Wilkes	8	81.1	15	153.0	20	202.2	9	91.1	18	184.1
Wilkinson	10	109.2	15	164.8	5	55.8	21	232.4	18	201.0
Worth	N/A5	*	20	96.4	29	141.2	47	231.5	18	88.9
All Counties	**15,705**	**153.7**	**20,151**	**195.4**	**22,679**	**217.5**	**20,618**	**196.0**	**21,321**	**200.8**

[ł]Rates were calculated as cases per 100,000 population.

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Syphilis (all stages) cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]
Appling	0	0.0	N/A5	*	6	32.4	5	27.0	N/A5	*
Atkinson	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Bacon	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Baker	N/A5	*	0	0.0	0	0.0	N/A5	*	0	0.0
Baldwin	7	15.4	N/A5	*	10	22.3	14	31.2	17	37.9
Banks	N/A5	*	0	0.0	0	0.0	N/A5	*	0	0.0
Barrow	7	9.3	N/A5	*	8	10.1	15	18.6	12	14.4
Bartow	15	14.6	9	8.7	11	10.5	14	13.2	12	11.1
Ben Hill	N/A5	*	N/A5	*	N/A5	*	0	0.0	0	0.0
Berrien	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Bibb	52	33.8	55	36.0	48	31.4	102	66.6	98	64.0
Bleckley	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Brantley	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Brooks	N/A5	*	N/A5	*	5	32.1	6	38.7	N/A5	*
Bryan	N/A5	*	N/A5	*	N/A5	*	7	18.4	8	20.2
Bulloch	30	41.3	17	22.8	30	39.4	20	25.9	46	57.8
Burke	0	0.0	6	26.4	N/A5	*	9	40.1	N/A5	*
Butts	29	122.9	44	184.7	58	241.1	65	268.7	79	316.8
Calhoun	N/A5	*	N/A5	*	0	0.0	N/A5	*	N/A5	*
Camden	N/A5	*	8	15.1	11	20.7	8	14.9	6	11.0
Candler	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Carroll	17	14.8	11	9.5	15	12.7	12	10.2	23	19.2
Catoosa	N/A5	*	N/A5	*	N/A5	*	N/A5	*	10	14.8
Charlton	14	108.0	16	128.0	20	157.3	16	123.4	13	97.1
Chatham	144	50.2	136	47.0	179	61.6	204	70.5	180	62.2
Chattahoochee	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Chattooga	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Cherokee	22	9.3	22	9.1	19	7.7	25	9.8	30	11.6
Clarke	27	21.8	34	27.3	47	37.0	58	45.6	45	35.1
Clay	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Clayton	224	81.8	234	83.7	270	94.7	321	110.8	353	120.8
Clinch	N/A5	*	N/A5	*	N/A5	*	0	0.0	0	0.0
Cobb	269	36.3	271	36.2	292	38.6	323	42.7	353	46.4
Coffee	11	25.5	10	23.2	9	20.9	N/A5	*	10	23.1
Colquitt	6	13.1	6	13.1	N/A5	*	7	15.4	6	13.2
Columbia	13	9.0	14	9.5	14	9.2	22	14.3	25	16.0

[‡]Rates were calculated as cases per 100,000 population.

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Syphilis (all stages) cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Cook	5	29.2	11	64.1	5	28.9	6	35.0	N/A5	*
Coweta	29	20.9	18	12.8	15	10.5	23	15.8	29	19.5
Crawford	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Crisp	N/A5	*	N/A5	*	7	30.8	5	22.1	9	40.2
Dade	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Dawson	0	0.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Decatur	0	0.0	5	18.6	N/A5	*	N/A5	*	8	30.3
DeKalb	885	120.4	829	112.0	837	111.1	857	113.3	1,016	133.8
Dodge	N/A5	*	N/A5	*	N/A5	*	5	24.1	N/A5	*
Dooly	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Dougherty	55	60.2	38	42.2	24	26.8	52	57.0	75	85.3
Douglas	43	30.6	46	32.3	39	27.1	39	26.8	77	52.6
Early	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Echols	N/A5	*	N/A5	*	0	0.0	N/A5	*	N/A5	*
Effingham	6	10.5	N/A5	*	10	16.7	7	11.3	13	20.2
Elbert	0	0.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Emanuel	5	22.0	0	0.0	5	22.2	6	26.5	8	35.3
Evans	N/A5	*	N/A5	*	N/A5	*	8	74.6	7	65.7
Fannin	N/A5	*	0	0.0	0	0.0	N/A5	*	N/A5	*
Fayette	12	10.8	14	12.5	18	16.0	15	13.2	18	15.7
Floyd	13	13.5	11	11.4	34	34.8	30	30.6	36	36.5
Forsyth	8	3.8	13	5.9	16	7.0	14	5.9	20	8.2
Franklin	N/A5	*	N/A5	*	N/A5	*	N/A5	*	6	25.7
Fulton	1,304	129.0	1,321	129.1	1,318	126.6	1,367	130.2	1,623	152.5
Gilmer	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Glascock	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Glynn	18	21.5	24	28.4	20	23.5	20	23.5	15	17.6
Gordon	5	8.8	5	8.8	N/A5	*	6	10.4	11	19.0
Grady	N/A5	*	0	0.0	0	0.0	N/A5	*	N/A5	*
Greene	0	0.0	N/A5	*	6	34.7	N/A5	*	N/A5	*
Gwinnett	227	25.3	257	28.3	247	26.8	306	33.0	336	35.9
Habersham	N/A5	*	N/A5	*	10	22.4	8	17.6	18	39.7
Hall	15	7.8	13	6.6	14	7.0	23	11.4	35	17.1
Hancock	5	58.5	N/A5	*	N/A5	*	0	0.0	N/A5	*
Haralson	N/A5	*	N/A5	*	N/A5	*	N/A5	*	6	20.1
Harris	N/A5	*	N/A5	*	N/A5	*	0	0.0	N/A5	*

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Syphilis (all stages) cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Hart	N/A5	*	N/A5	*	N/A5	*	5	19.2	5	19.1
Heard	N/A5	*	N/A5	*	0	0.0	N/A5	*	0	0.0
Henry	59	27.1	50	22.5	65	28.8	56	24.3	96	40.9
Houston	45	30.0	23	15.1	18	11.7	40	25.7	41	26.0
Irwin	N/A5	*	N/A5	*	N/A5	*	5	53.2	0	0.0
Jackson	N/A5	*	8	12.4	N/A5	*	6	8.5	12	16.4
Jasper	6	44.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Jeff Davis	N/A5	*	N/A5	*	N/A5	*	5	33.3	N/A5	*
Jefferson	5	31.0	N/A5	*	N/A5	*	N/A5	*	7	45.6
Jenkins	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Johnson	N/A5	*	N/A5	*	N/A5	*	N/A5	*	0	0.0
Jones	0	0.0	5	17.5	N/A5	*	N/A5	*	N/A5	*
Lamar	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Lanier	0	0.0	0	0.0	N/A5	*	5	48.4	N/A5	*
Laurens	N/A5	*	14	29.5	6	12.7	14	29.6	11	23.1
Lee	7	24.0	N/A5	*	5	17.0	N/A5	*	N/A5	*
Liberty	10	16.0	11	17.6	18	29.3	23	37.4	38	61.9
Lincoln	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Long	0	0.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Lowndes	36	31.9	37	32.3	92	79.7	78	67.1	51	43.4
Lumpkin	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
McDuffie	N/A5	*	N/A5	*	N/A5	*	5	23.2	7	32.8
McIntosh	0	0.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Macon	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Madison	0	0.0	N/A5	*	N/A5	*	0	0.0	6	20.1
Marion	N/A5	*	N/A5	*	N/A5	*	0	0.0	0	0.0
Meriwether	0	0.0	N/A5	*	5	23.8	N/A5	*	5	23.6
Miller	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Mitchell	N/A5	*	N/A5	*	N/A5	*	6	27.0	9	41.2
Monroe	N/A5	*	7	25.6	0	0.0	N/A5	*	N/A5	*
Montgomery	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Morgan	N/A5	*	N/A5	*	5	27.2	N/A5	*	N/A5	*
Murray	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Muscogee	85	42.4	101	51.1	69	35.6	122	62.8	87	44.4
Newton	35	33.2	30	28.0	24	22.2	36	32.9	46	41.2
Oconee	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*

[†]Rates were calculated as cases per 100,000 population.

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N/A5 indicates that the numerator is less than 5; therefore, the number is suppressed at county levels.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Syphilis (all stages) cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Oglethorpe	0	0.0	N/A5	*	5	33.6	0	0.0	N/A5	*
Paulding	28	18.4	22	14.1	19	11.9	41	25.0	22	13.0
Peach	6	22.5	6	22.5	8	29.5	15	55.0	17	61.7
Pickens	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
Pierce	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Pike	N/A5	*	N/A5	*	N/A5	*	5	26.8	N/A5	*
Polk	5	12.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Pulaski	N/A5	*	0	0.0	0	0.0	N/A5	*	N/A5	*
Putnam	N/A5	*	6	27.9	5	23.0	5	22.9	N/A5	*
Quitman	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Rabun	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
Randolph	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Richmond	109	54.0	94	46.6	87	43.1	134	66.5	187	92.3
Rockdale	23	25.9	21	23.5	25	27.7	37	40.8	43	47.3
Schley	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Screven	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Seminole	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Spalding	11	17.2	12	18.5	13	19.9	18	27.2	24	36.0
Stephens	0	0.0	5	19.4	0	0.0	N/A5	*	N/A5	*
Stewart	N/A5	*	N/A5	*	0	0.0	0	0.0	N/A5	*
Sumter	8	26.0	N/A5	*	N/A5	*	7	23.5	N/A5	*
Talbot	N/A5	*	N/A5	*	0	0.0	0	0.0	N/A5	*
Taliaferro	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Tattnall	N/A5	*	N/A5	*	7	27.6	N/A5	*	6	23.7
Taylor	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
Telfair	N/A5	*	0	0.0	N/A5	*	N/A5	*	9	56.7
Terrell	N/A5	*	5	55.8	0	0.0	0	0.0	N/A5	*
Thomas	8	17.8	6	13.3	N/A5	*	12	27.0	17	38.2
Tift	5	12.3	N/A5	*	N/A5	*	11	27.1	17	41.8
Toombs	0	0.0	7	25.7	7	25.9	7	26.0	13	48.5
Towns	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Treutlen	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Troup	6	8.6	16	22.9	15	21.5	14	20.0	13	18.6
Turner	N/A5	*	0	0.0	N/A5	*	N/A5	*	7	87.7
Twiggs	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Union	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*

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Syphilis (all stages) cases and rates by county, Georgia, 2015-2019, continued										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Upson	N/A5	*	N/A5	*	7	26.8	9	34.3	6	22.8
Walker	N/A5	*	N/A5	*	N/A5	*	N/A5	*	5	7.2
Walton	9	10.2	5	5.5	6	6.6	7	7.5	7	7.4
Ware	6	17.0	N/A5	*	N/A5	*	13	36.4	6	16.8
Warren	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Washington	7	33.6	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Wayne	N/A5	*	7	23.3	9	30.2	N/A5	*	5	16.7
Webster	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Wheeler	N/A5	*	N/A5	*	0	0.0	N/A5	*	N/A5	*
White	N/A5	*	0	0.0	0	0.0	N/A5	*	5	16.2
Whitfield	9	8.6	9	8.6	11	10.5	11	10.6	N/A5	*
Wilcox	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Wilkes	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Wilkinson	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Worth	0	0.0	N/A5	*	N/A5	*	N/A5	*	6	29.6
All Counties	**4,189**	**41.0**	**4,153**	**40.3**	**4,363**	**41.8**	**4,970**	**47.2**	**5,704**	**53.7**

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Primary and secondary syphilis cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]
Appling	0	0.0	0	0.0	N/A5	*	N/A5	*	0	0.0
Atkinson	0	0.0	N/A5	*	0	0.0	0	0.0	0	0.0
Bacon	N/A5	*	0	0.0	0	0.0	0	0.0	0	0.0
Baker	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Baldwin	5	11.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Banks	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Barrow	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Bartow	N/A5	*	5	4.8	N/A5	*	N/A5	*	5	4.6
Ben Hill	N/A5	*	0	0.0	0	0.0	0	0.0	0	0.0
Berrien	0	0.0	N/A5	*	N/A5	*	0	0.0	N/A5	*
Bibb	26	16.9	19	12.4	22	14.4	38	24.8	32	20.9
Bleckley	N/A5	*	N/A5	*	0	0.0	N/A5	*	N/A5	*
Brantley	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Brooks	N/A5	*	N/A5	*	N/A5	*	N/A5	*	0	0.0
Bryan	0	0.0	N/A5	*	N/A5	*	0	0.0	N/A5	*
Bulloch	8	11.0	9	12.0	11	14.4	9	11.6	20	25.1
Burke	0	0.0	5	22.0	N/A5	*	6	26.8	N/A5	*
Butts	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Calhoun	N/A5	*	0	0.0	0	0.0	0	0.0	N/A5	*
Camden	N/A5	*	5	9.4	6	11.3	N/A5	*	N/A5	*
Candler	0	0.0	N/A5	*	0	0.0	0	0.0	N/A5	*
Carroll	10	8.7	N/A5	*	8	6.8	5	4.2	10	8.3
Catoosa	N/A5	*	N/A5	*	N/A5	*	N/A5	*	5	7.4
Charlton	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Chatham	42	14.6	35	12.1	64	22.0	60	20.7	61	21.1
Chattahoochee	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Chattooga	0	0.0	0	0.0	N/A5	*	0	0.0	N/A5	*
Cherokee	8	3.4	11	4.6	N/A5	*	N/A5	*	10	3.9
Clarke	9	7.3	19	15.2	16	12.6	16	12.6	14	10.9
Clay	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Clayton	67	24.5	66	23.6	81	28.4	95	32.8	77	26.3
Clinch	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Cobb	87	11.7	89	11.9	99	13.1	85	11.2	73	9.6
Coffee	N/A5	*	5	11.6	0	0.0	N/A5	*	N/A5	*

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Primary and secondary syphilis cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Colquitt	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Columbia	N/A5	*	5	3.4	5	3.3	13	8.4	13	8.3
Cook	N/A5	*	8	46.6	N/A5	*	N/A5	*	N/A5	*
Coweta	6	4.3	5	3.6	8	5.6	7	4.8	6	4.0
Crawford	0	0.0	0	0.0	N/A5	*	0	0.0	N/A5	*
Crisp	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Dade	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Dawson	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Decatur	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
DeKalb	326	44.4	269	36.3	291	38.6	260	34.4	323	42.5
Dodge	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Dooly	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Dougherty	26	28.5	17	18.9	16	17.9	25	27.4	29	33.0
Douglas	17	12.1	8	5.6	12	8.3	10	6.9	20	13.7
Early	0	0.0	0	0.0	0	0.0	N/A5	*	0	0.0
Echols	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Effingham	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Elbert	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Emanuel	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Evans	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Fannin	0	0.0	0	0.0	0	0.0	N/A5	*	0	0.0
Fayette	N/A5	*	N/A5	*	N/A5	*	6	5.3	8	7.0
Floyd	N/A5	*	N/A5	*	14	14.3	11	11.2	10	10.2
Forsyth	N/A5	*	N/A5	*	7	3.1	N/A5	*	7	2.9
Franklin	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Fulton	466	46.1	411	40.2	425	40.8	460	43.8	539	50.7
Gilmer	N/A5	*	0	0.0	0	0.0	N/A5	*	N/A5	*
Glascock	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Glynn	6	7.2	10	11.8	7	8.2	8	9.4	7	8.2
Gordon	N/A5	*	N/A5	*	N/A5	*	N/A5	*	7	12.1
Grady	N/A5	*	0	0.0	0	0.0	N/A5	*	0	0.0
Greene	0	0.0	N/A5	*	N/A5	*	0	0.0	N/A5	*
Gwinnett	101	11.3	107	11.8	120	13.0	110	11.9	98	10.5
Habersham	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Hall	N/A5	*	N/A5	*	N/A5	*	N/A5	*	11	5.4
Hancock	N/A5	*	N/A5	*	0	0.0	0	0.0	0	0.0

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Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]	Cases	Rate[ǂ]
Haralson	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Harris	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Hart	N/A5	*	N/A5	*	N/A5	*	N/A5	*	0	0.0
Heard	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Henry	14	6.4	8	3.6	13	5.8	14	6.1	16	6.8
Houston	11	7.3	8	5.3	10	6.5	23	14.8	11	7.0
Irwin	0	0.0	0	0.0	0	0.0	N/A5	*	0	0.0
Jackson	N/A5	*	N/A5	*	N/A5	*	N/A5	*	6	8.2
Jasper	N/A5	*	N/A5	*	N/A5	*	N/A5	*	0	0.0
Jeff Davis	0	0.0	N/A5	*	0	0.0	N/A5	*	0	0.0
Jefferson	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Jenkins	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Johnson	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
Jones	0	0.0	N/A5	*	0	0.0	N/A5	*	N/A5	*
Lamar	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Lanier	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Laurens	N/A5	*	8	16.8	N/A5	*	12	25.4	5	10.5
Lee	N/A5	*	N/A5	*	0	0.0	N/A5	*	N/A5	*
Liberty	N/A5	*	N/A5	*	9	14.7	9	14.6	17	27.7
Lincoln	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Long	0	0.0	N/A5	*	N/A5	*	0	0.0	N/A5	*
Lowndes	11	9.7	22	19.2	55	47.6	40	34.4	16	13.6
Lumpkin	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
McDuffie	N/A5	*	N/A5	*	N/A5	*	N/A5	*	5	23.5
McIntosh	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Macon	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Madison	0	0.0	0	0.0	N/A5	*	0	0.0	5	16.7
Marion	N/A5	*	N/A5	*	N/A5	*	0	0.0	0	0.0
Meriwether	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Miller	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Mitchell	N/A5	*	N/A5	*	0	0.0	N/A5	*	N/A5	*
Monroe	0	0.0	N/A5	*	0	0.0	0	0.0	N/A5	*
Montgomery	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Morgan	N/A5	*	N/A5	*	N/A5	*	0	0.0	0	0.0
Murray	N/A5	*	0	0.0	N/A5	*	0	0.0	N/A5	*
Muscogee	12	6.0	37	18.7	20	10.3	44	22.7	30	15.3

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Primary and secondary syphilis cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]	Cases	Rate[†]
Newton	11	10.4	10	9.3	13	12.0	6	5.5	15	13.4
Oconee	0	0.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Oglethorpe	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Paulding	9	5.9	9	5.8	6	3.8	19	11.6	7	4.2
Peach	N/A5	*	N/A5	*	N/A5	*	5	18.3	N/A5	*
Pickens	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Pierce	0	0.0	N/A5	*	0	0.0	0	0.0	0	0.0
Pike	0	0.0	0	0.0	0	0.0	N/A5	*	0	0.0
Polk	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Pulaski	N/A5	*	0	0.0	0	0.0	0	0.0	N/A5	*
Putnam	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Quitman	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Rabun	0	0.0	N/A5	*	0	0.0	N/A5	*	0	0.0
Randolph	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Richmond	38	18.8	43	21.3	35	17.3	74	36.7	100	49.4
Rockdale	7	7.9	14	15.7	10	11.1	15	16.6	9	9.9
Schley	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Screven	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Seminole	0	0.0	0	0.0	N/A5	*	0	0.0	0	0.0
Spalding	0	0.0	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Stephens	0	0.0	N/A5	*	0	0.0	0	0.0	N/A5	*
Stewart	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Sumter	6	19.5	0	0.0	0	0.0	N/A5	*	N/A5	*
Talbot	0	0.0	N/A5	*	0	0.0	0	0.0	0	0.0
Taliaferro	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Tattnall	N/A5	*	0	0.0	N/A5	*	N/A5	*	N/A5	*
Taylor	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
Telfair	0	0.0	0	0.0	N/A5	*	N/A5	*	N/A5	*
Terrell	0	0.0	N/A5	*	0	0.0	0	0.0	0	0.0
Thomas	N/A5	*	N/A5	*	N/A5	*	5	11.2	6	13.5
Tift	N/A5	*	N/A5	*	N/A5	*	6	14.8	9	22.1
Toombs	0	0.0	N/A5	*	0	0.0	N/A5	*	5	18.6
Towns	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Treutlen	N/A5	*	N/A5	*	N/A5	*	N/A5	*	0	0.0
Troup	0	0.0	N/A5	*	8	11.5	N/A5	*	N/A5	*
Turner	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*

[†]Rates were calculated as cases per 100,000 population

*Rates based on 1-4 events are not shown and are indicated by an *.

N/A5 indicates that the numerator is less than 5; therefore, the number is suppressed at county levels.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

Primary and secondary syphilis cases and rates by county, Georgia, 2015-2019										
Geography	2015		2016		2017		2018		2019	
County Name	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]	Cases	Rate[‡]
Twiggs	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Union	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Upson	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
Walker	N/A5	*	N/A5	*	0	0.0	N/A5	*	0	0.0
Walton	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Ware	N/A5	*	N/A5	*	N/A5	*	N/A5	*	N/A5	*
Warren	0	0.0	0	0.0	0	0.0	N/A5	*	N/A5	*
Washington	0	0.0	N/A5	*	0	0.0	0	0.0	0	0.0
Wayne	N/A5	*	N/A5	*	0	0.0	N/A5	*	0	0.0
Webster	0	0.0	0	0.0	0	0.0	0	0.0	N/A5	*
Wheeler	N/A5	*	N/A5	*	0	0.0	N/A5	*	0	0.0
White	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Whitfield	5	4.8	N/A5	*	N/A5	*	N/A5	*	0	0.0
Wilcox	0	0.0	0	0.0	0	0.0	N/A5	*	0	0.0
Wilkes	0	0.0	0	0.0	N/A5	*	N/A5	*	0	0.0
Wilkinson	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Worth	0	0.0	N/A5	*	N/A5	*	N/A5	*	0	0.0
All Counties	**1,437**	**14.1**	**1,364**	**13.2**	**1,513**	**14.5**	**1,643**	**15.6**	**1,764**	**16.6**

[‡]Rates were calculated as cases per 100,000 population.

*Rates based on 1-4 events are not shown and are indicated by an *.

N/A5 indicates that the numerator is less than 5; therefore, the number is suppressed at county levels.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

STD cases and rates by public health district, Georgia, 2019										
Geography	Chlamydia		Gonorrhea		P&S Syphilis		Congenital Syphilis		All Syphilis	
Public Health District	Cases	Rate*	Cases	Rate*	Cases	Rate*	Cases	Rate**	Cases	Rate*
Northwest Health District (Rome)	2,850	417.0	1,039	152.0	37	5.4	2	25.7	111	16.2
North Georgia Health District (Dalton)	1,484	300.6	322	65.2	13	2.6	0	0.0	43	8.7
North Health District (Gainesville)	1,882	256.8	480	65.5	25	3.4	0	0.0	97	13.2
Cobb/Douglas Health District	5,008	552.5	1,311	144.6	93	10.3	2	19.4	430	47.4
Fulton Health District	10,66	1,002.0	3,891	365.7	539	50.7	11	94.3	1,623	152.5
Clayton County Health District	2,990	1,023.1	1,035	354.1	77	26.3	4	92.4	353	120.8
Gwinnett, Newton, and Rockdale	5,982	525.2	1,520	133.5	122	10.7	2	14.5	425	37.3
DeKalb Health District	5,957	784.5	2,380	313.4	323	42.5	9	86.8	1,016	133.8
District 4 Public Health	4,689	535.0	1,303	148.7	47	5.4	4	40.8	300	34.2
South Central Health District (Dublin)	1,021	679.6	312	207.7	15	10.0	1	61.4	44	29.3
North Central Health District (Macon)	4,235	792.5	1,520	284.4	61	11.4	0	0.0	196	36.7
East Central Health District (Augusta)	3,972	808.9	1,368	278.6	130	26.5	1	16.2	251	51.1
West Central Health District (Columbus)	2,966	803.5	889	240.8	40	10.8	3	66.1	120	32.5
South Health District (Valdosta)	2,068	799.4	567	219.2	31	12.0	4	114.6	81	31.3
Southwest Health District (Albany)	2,846	830.0	837	244.1	44	12.8	3	71.2	133	38.8
Southeast Health District (Waycross)	2,515	673.3	687	183.9	34	9.1	2	43.9	121	32.4
Coastal Health District (Savannah)	4,666	742.2	1,374	218.6	100	15.9	5	59.1	266	42.3
Northeast Health District (Athens)	2,161	414.5	486	93.2	33	6.3	1	17.3	94	18.0
All Districts	67,953	640.0	21,321	200.8	1,764	16.6	54	50.5	5,704	53.7

STD: Sexually transmitted disease

*Rates were calculated as cases per 100,000 population.

**Congenital syphilis rates were calculated as cases per 100,000 live births.

Data source: (3) GA OASIS. https://oasis.state.ga.us/

STD county rankings: Top 25 counties for cases, Georgia, 2019												
Ranking	Chlamydia			Gonorrhea			P&S Syphilis			All Syphilis		
	County	Cases		County	Cases		County	Cases		County	Cases	
1	Fulton	10,661		Fulton	3,891		Fulton	539		Fulton	1,623	
2	DeKalb	5,957		DeKalb	2,380		DeKalb	323		DeKalb	1,016	
3	Gwinnett	4,305		Cobb	1,037		Richmond	100		Clayton	353	
4	Cobb	3,970		Clayton	1,035		Gwinnett	98		Cobb	353	
5	Clayton	2,990		Richmond	985		Clayton	77		Gwinnett	336	
6	Chatham	2,672		Gwinnett	972		Cobb	73		Richmond	187	
7	Richmond	2,574		Chatham	778		Chatham	61		Chatham	180	
8	Muscogee	1,901		Bibb	702		Bibb	32		Bibb	98	
9	Bibb	1,783		Muscogee	573		Muscogee	30		Henry	96	
10	Henry	1,528		Henry	429		Dougherty	29		Muscogee	87	
11	Dougherty	1,183		Houston	364		Bulloch	20		Butts	79	
12	Lowndes	1,091		Lowndes	331		Douglas	20		Douglas	77	
13	Houston	1,055		Dougherty	311		Liberty	17		Dougherty	75	
14	Douglas	1,038		Newton	294		Henry	16		Lowndes	51	
15	Clarke	927		Douglas	274		Lowndes	16		Bulloch	46	
16	Newton	909		Floyd	259		Newton	15		Newton	46	
17	Rockdale	768		Rockdale	254		Clarke	14		Clarke	45	
18	Hall	761		Carroll	249		Columbia	13		Rockdale	43	
19	Bulloch	713		Clarke	209		Hall	11		Houston	41	
20	Cherokee	674		Glynn	209		Houston	11		Liberty	38	
21	Carroll	665		Troup	200		Carroll	10		Floyd	36	
22	Paulding	658		Liberty	185		Cherokee	10		Hall	35	
23	Glynn	654		Paulding	183		Floyd	10		Cherokee	30	
24	Troup	579		Hall	175		Rockdale	9		Coweta	29	
25	Liberty	554		Bulloch	168		Tift	9		Columbia	25	

STD: Sexually transmitted disease

Data source: (3) GA OASIS. https://oasis.state.ga.us/

STD county rankings: Top 25 counties for rates, Georgia, 2019											
Ranking	Chlamydia			Gonorrhea			Syphilis (all)			P&S Syphilis	
	County	Rate*		County	Rate*		County	Rate*		County	Rate*
1	Terrell	1,477.0		Richmond	486.4		Butts	316.8		Fulton	50.7
2	Dougherty	1,345.0		Bibb	458.3		Fulton	152.5		Richmond	49.4
3	Richmond	1,271.0		Decatur	397.7		DeKalb	133.8		DeKalb	42.5
4	Chattahoochee	1,219.4		Fulton	365.7		Clayton	120.8		Dougherty	33.0
5	Evans	1,173.3		Clayton	354.1		Charlton	97.1		Liberty	27.7
6	Bibb	1,164.1		Dougherty	353.6		Richmond	92.3		Clayton	26.3
7	Turner	1,127.1		Toombs	346.6		Turner	87.7		Bulloch	25.1
8	Early	1,089.3		Terrell	339.9		Dougherty	85.3		McDuffie	23.5
9	Clayton	1,023.1		Chattahoochee	339.2		Evans	65.7		Tift	22.1
10	Fulton	1,002.0		Laurens	321.8		Bibb	64.0		Chatham	21.1
11	Muscogee	971.0		Macon	316.7		Chatham	62.2		Bibb	20.9
12	Washington	962.0		Baldwin	316.3		Liberty	61.9		Toombs	18.6
13	Lowndes	929.3		DeKalb	313.4		Peach	61.7		Madison	16.7
14	Decatur	924.1		Early	304.2		Bulloch	57.8		Muscogee	15.3
15	Chatham	923.2		Liberty	301.1		Telfair	56.7		Douglas	13.7
16	Peach	922.1		Hancock	295.6		Douglas	52.6		Lowndes	13.6
17	Sumter	921.3		Peach	294.1		Toombs	48.5		Thomas	13.5
18	Quitman	913.4		Muscogee	292.7		Rockdale	47.3		Newton	13.4
19	Liberty	901.8		Troup	286.0		Cobb	46.4		Gordon	12.1
20	Cook	897.5		Lowndes	281.9		Jefferson	45.6		Clarke	10.9
21	Bulloch	895.6		Sumter	281.1		Muscogee	44.4		Gwinnett	10.5
22	Ware	861.9		Rockdale	279.4		Lowndes	43.4		Laurens	10.5
23	Rockdale	844.9		Appling	271.9		Tift	41.8		Floyd	10.2
24	Wilkinson	837.6		Chatham	268.8		Mitchell	41.2		Rockdale	9.9
25	Laurens	837.1		Newton	263.1		Newton	41.2		Cobb	9.6

STD: Sexually transmitted disease

Data source: (3) GA OASIS. https://oasis.state.ga.us/

*Rates were calculated as cases per 100,000 population.

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Appendix: Sexually Transmitted Diseases Case Definitions

Note: The following case definitions are taken verbatim from the Centers for Disease Control and Prevention (CDC) report: Sexually Transmitted Disease Surveillance 2019 (2). Exceptions include repetition of "effective" dates of these case definitions, for clarification purposes.

Chlamydia trachomatis Infection (Effective 1/2010)

Clinical description

Laboratory criteria for diagnosis Infection with *Chlamydia trachomatis* may result in urethritis, epididymitis, cervicitis, acute salpingitis, or other syndromes when sexually transmitted; however, the infection is often asymptomatic in women. Perinatal infections may result in inclusion conjunctivitis and pneumonia in newborns. Other syndromes caused by *C. trachomatis include* lymphogranuloma venereum (see Lymphogranuloma Venereum) and trachoma.

- Isolation of *C. trachomatis* by culture, OR
- Demonstration of *C. trachomatis* in a clinical specimen by detection of antigen or nucleic acid.

Case classification

Confirmed: a case that is laboratory confirmed.

Gonorrhea (Effective 1/2014)

Clinical description

A sexually transmitted infection commonly manifested by urethritis, cervicitis, proctitis, salpingitis, or pharyngitis. Infection may be asymptomatic.

Laboratory criteria for diagnosis

- Observation of gram-negative intracellular diplococci in a urethral smear obtained from a male or an endocervical smear obtained from a female, OR
- Isolation of typical gram-negative, oxidase-positive diplococci by culture (presumptive *Neisseria gonorrhoeae*) from a clinical specimen, OR
- Demonstration of *N. gonorrhoeae* in a clinical specimen by detection of antigen or nucleic acid

Case classification

Probable: demonstration of gram-negative intracellular diplococci in a urethral smear obtained from a male or an endocervical smear obtained from a female.

Confirmed: a person with laboratory isolation of typical gram-negative, oxidase-positive diplococci by culture (presumptive *N. gonorrhoeae*) from a clinical specimen, or demonstration of *N. gonorrhoeae* in a clinical specimen by detection of antigen or detection of nucleic acid via nucleic acid amplification (e.g., polymerase chain reaction [PCR]) or hybridization with a nucleic acid probe.

Syphilis (Effective 1/2018)

Syphilis is a complex sexually transmitted disease that has a highly variable clinical course. Adherence to the following surveillance case definitions will facilitate understanding the epidemiology of this disease across the US.

Syphilis, primary (Effective 1/2018)

Clinical description

A stage of infection with *Treponema pallidum* characterized by one or more ulcerative lesions (e.g. chancre), which might differ considerably in clinical appearance.

Laboratory criteria for diagnosis

Confirmatory:

- Demonstration of *T. pallidum* by darkfield microscopy in a clinical specimen that was not obtained from the oropharynx and is not potentially contaminated by stool, OR
- Demonstration of *T. pallidum* by polymerase chain reaction (PCR) or equivalent direct molecular methods in any clinical specimen.

Supportive:

- A reactive nontreponemal serologic test (Venereal Disease Research Laboratory [VDRL], rapid plasma reagin [RPR], or equivalent serologic methods), OR
- A reactive treponemal serologic test (T. pallidum particle agglutination [TP-PA], enzyme immunoassay [EIA], chemiluminescence immunoassay [CIA], or equivalent serologic methods). *

* These treponemal tests supersede older testing technologies, including microhemagglutination assay for antibody to T. pallidum [MHA-TP].

Case classification

Probable: a case that meets the clinical description of primary syphilis and the supportive laboratory criteria.

Confirmed: a case that meets the clinical description of primary syphilis and the supportive confirmatory criteria.

Syphilis, secondary (Effective 1/2018)

Clinical description

A stage of infection caused by *T. pallidum* characterized by localized or diffuse mucocutaneous lesions (e.g., rash – such as non-pruritic macular, maculopapular, popular, or pustular lesions), often with generalized lymphadenopathy. Other symptoms can include mucous patches, condyloma lata, and alopecia. The primary ulcerative lesion may still be present. Because of the wide array of symptoms possibly indicating secondary syphilis, serologic tests for syphilis and a thorough sexual history and physical examination are crucial to determining if a case should be classified as secondary syphilis.

Laboratory criteria for diagnosis

Confirmatory:

- Demonstration of *T. pallidum* by darkfield microscopy in a clinical specimen that was not obtained from the oropharynx and is not potentially contaminated by stool, OR
- Demonstration of *T. pallidum* by polymerase chain reaction (PCR) or equivalent direct molecular methods in any clinical specimen.

Supportive:

- A reactive nontreponemal serologic test (VDRL, RPR, or equivalent serologic methods), AND
- A reactive treponemal serologic test (TP-PA, EIA, CIA, or equivalent serologic methods).

Case classification

Probable: a case that meets the clinical description of secondary syphilis and the supportive laboratory criteria.

Confirmed: a case that meets the clinical description of secondary syphilis and the confirmatory laboratory criteria.

Syphilis, early non-primary non-secondary (Effective 1/2018)

Clinical description

A stage of infection caused by *T. pallidum* in which initial infection has occurred within the previous 12 months, but there are no signs or symptoms of primary or secondary syphilis.

Laboratory criteria for diagnosis

Supportive:

- A current nontreponemal test titer demonstrating fourfold or greater increase from the last nontreponemal test titer, unless there is evidence that this increase was not sustained for >2 weeks.

Case classification

Probable: a person with no clinical signs or symptoms of primary or secondary syphilis who has one of the following:

- No prior history of syphilis, AND a current reactive nontreponemal test (e.g., VDRL, RPR, or equivalent serologic methods), AND a current reactive treponemal test (e.g., TP-PA, EIA, CIA, or equivalent serologic methods), OR
- A prior history of syphilis and meets the supportive laboratory criteria.

AND evidence of having acquired the infection within the previous 12 months based on one or more of the following criteria:

- Documented seroconversion or fourfold or greater increase in titer of a nontreponemal test during the previous 12 months, unless there is evidence that this increase was not sustained for >2 weeks
- Documented seroconversion of a treponemal test during the previous 12 months
- A history of symptoms consistent with primary or secondary syphilis during the previous 12 months
- Meets epidemiologic criteria.

Epidemiological criteria:

- A history of sexual exposure to a partner within the previous 12 months who had primary, secondary, or early non-primary non-secondary syphilis (documented independently as duration <12 months).
- Only sexual contact (sexual debut) was within the previous 12 months.

Syphilis, unknown duration or late (Effective 1/2018)

Clinical description

A stage of infection caused by *T. pallidum* in which initial infection has occurred >12 months previously or in which there is insufficient evidence to conclude that infection was acquired during the previous 12 months.

Case classification

Probable: a person with no clinical signs or symptoms of primary or secondary syphilis who meets one of the following sets of criteria:

- No prior history of syphilis, and a current reactive nontreponemal test (e.g., VDRL, RPR, or equivalent serologic methods), and a current reactive treponemal test (e.g., TP-PA, EIA, CIA, or equivalent serologic methods), OR
- A prior history of syphilis, and a current nontreponemal test titer demonstrating fourfold or greater increase from the last nontreponemal test titer, unless there is evidence that this increase was not sustained for >2 weeks, OR
- Clinical signs or symptoms and laboratory results that meet the likely or verified criteria for neurologic, ocular, otic, or late clinical manifestations syphilis (see below)
- AND who has no evidence of having acquired the disease within the preceding 12 months (see Syphilis, early non-primary non-secondary).

Comments: Although cases of syphilis of unknown duration are grouped together with late syphilis for the purposes of surveillance, the conservative clinical and public health responses to these cases will differ when there is uncertainty about the duration of infection. When faced with uncertainty, clinicians should act conservatively and treat unknown duration syphilis as if it were late infection, with three doses of benzathine penicillin. In contrast, the most conservative approach for STD control programs would be to manage cases of syphilis of unknown duration as early non-primary non-secondary infections and search for partners who may have been recently infected. Because this would not be feasible for most STD control programs, programs should consider prioritizing cases of syphilis of unknown duration with higher nontreponemal titers (e.g., 1:32 or higher) for investigation and partner services. Although nontreponemal titers cannot reliably distinguish between early infection (<12 months duration) and late infection (>12 months duration), nontreponemal titers usually are higher early in the course of syphilis infection.

Syphilis, Congenital (Effective 1/2018)

Clinical description

A condition caused by infection in utero with *T. pallidum*. A wide spectrum of severity exists, from inapparent infection to severe cases that are clinically apparent at birth. An infant or child (aged less than 2 years) may have signs such as hepatosplenomegaly, rash, condyloma lata, snuffles, jaundice (nonviral hepatitis), pseudoparalysis, anemia, or edema (nephrotic syndrome and/or malnutrition). An older child may have stigmata (e.g., interstitial keratitis, nerve deafness, anterior bowing of shins, frontal bossing, mulberry molars, Hutchinson teeth, saddle nose, rhagades, or Clutton joints).

Laboratory criteria for diagnosis

- Demonstration of *T. pallidum* by darkfield microscopy of lesions, body fluids, or neonatal nasal discharge, OR
- PCR or other equivalent direct molecular methods of lesions, neonatal nasal discharge, placenta, umbilical cord, or autopsy material, OR
- Immunohistochemistry (IHC), or special stains (e.g., silver staining) of specimens from lesions, placenta, umbilical cord, or autopsy material.

Case classification

Probable: a condition affecting an infant whose mother had untreated or inadequately treated* syphilis at delivery, regardless of signs in the infant, OR an infant or child who has a reactive non-treponemal test for syphilis (VDRL, RPR, or equivalent serologic methods) AND any one of the following:

- Any evidence of congenital syphilis on physical examination (see Clinical description).
- Any evidence of congenital syphilis on radiographs of long bones.
- A reactive CSF VDRL test.
- In a non-traumatic lumbar puncture, an elevated CSF leukocyte (white blood cell [WBC]) count or protein (without other cause):
- Suggested parameters for abnormal CSF WBC and protein values:

    1. During the first 30 days of life, a CSF WBC count of >15 WBC/mm3 or a CSF protein >120 mg/dL is abnormal.
    2. After the first 30 days of life, a CSF WBC count of >5 WBC mm3 or a CSF protein >40 mg/dL, regardless of CSF serology.

The treating clinician should be consulted to interpret the CSF values for the specific patient.

* Adequate treatment is defined as completion of a penicillin-based regimen, in accordance with CDC treatment guidelines, appropriate for stage of infection, initiated 30 or more days before delivery.

Confirmed: a case that is laboratory confirmed.

Comments: Congenital and acquired syphilis may be difficult to distinguish when a child is seropositive after infancy. Signs of congenital syphilis may not be obvious, and stigmata may not yet have developed. Abnormal values for CSF VDRL, WBC count, and protein may be found in either congenital or acquired syphilis. Findings on radiographs of long bones may help because radiographic changes in the metaphysis and epiphysis are considered classic signs of congenitally acquired syphilis. While maternal antibodies can complicate interpretation of serologic tests in an infant, reactive tests past 18 months of age are considered to reflect the status of the child. The decision may ultimately be based on maternal history and clinical judgment. In a young child, the

possibility of sexual abuse should be considered as a cause of acquired rather than congenital syphilis, depending on the clinical picture. For reporting purposes, congenital syphilis includes cases of congenitally acquired syphilis among infants and children as well as syphilitic stillbirths.

Syphilitic Stillbirth (Effective 1/2018)

Clinical description

A fetal death that occurs after a 20-week gestation or in which the fetus weighs greater than 500g and the mother had untreated or inadequately treated* syphilis at delivery.

* Adequate treatment is defined as completion of a penicillin-based regimen, in accordance with CDC treatment guidelines, appropriate for stage of infection, initiated 30 or more days before delivery.

Comments: For reporting purposes, congenital syphilis includes cases of congenitally acquired syphilis among infants and children as well as syphilitic stillbirths.

Comments: Additional information to be collected on clinical manifestations of reported syphilis cases (Effective 1/2018)

Syphilis is a systemic infection that, if untreated, can cause a variety of clinical manifestations, including:

- Signs and symptoms of primary and secondary syphilis (see above case definitions).
- Latent infections (i.e., those lacking any signs or symptoms).
- Neurologic, ocular, or otic manifestations (neurosyphilis, ocular syphilis, or otosyphilis), which can occur at any stage of syphilis.
- Late clinical manifestations (tertiary syphilis), which generally occur after 15–30 years of untreated infection.