



A.9606 (Tapia)

AN ACT to amend the public health law, in relation to requiring third trimester syphilis testing

The New York State Association of County Health Officials (NYSACHO) strongly supports the above- referenced legislation which amends NYS public health law 2308 to require physicians and other authorized practitioners to obtain third trimester testing for syphilis.

The rise in syphilis cases and rates nationally and within the state of New York led the NYS Department of Health to issue a Health Advisory¹ in June 2021 describing an alarming increase in syphilis overall, syphilis among persons reported as female, and congenital syphilis. The Department of Health subsequently issued a Dear Colleague letter to NYS clinicians in January 2022 reporting on continued increases through the remainder of 2021.

Syphilis is a complicated infection and may lead to significant health conditions in those who contract the infection. It is difficult to diagnose without specific testing of blood and is highly contagious. Congenital syphilis (syphilis in a fetus or newborn) is a tragic consequence of undiagnosed and/or untreated syphilis in those who are pregnant and is completely preventable with vigilant testing and treatment. As public health practitioners, local health departments have seen the effects of the rapidly increasing rates of syphilis and all of its myriad health complications in our populations including devastating congenital infections. A recent analysis of congenital syphilis cases occurring in New York State outside of NYC revealed that syphilis occurring late in pregnancy was the most frequent reason for the congenital syphilis cases.

The addition of required third trimester testing to the existing NYS requirements for testing at the initial visit is the most effective intervention to lead to enhanced treatment of syphilis in pregnancy and thereby decrease the occurrence of congenital syphilis. In addition, the adoption of this additional testing during pregnancy would align New York state public health law with a similar change already enacted through local regulation in New York City and assure that all pregnant New Yorkers would be receiving the highest quality of care.

NYSACHO is mindful of the need to respect the clinical judgement of healthcare practitioners, however, local health departments strongly believe that both the growing incidence of syphilis infections in the general population and in pregnant women, as well as the increase in congenital syphilis warrant moving the legislation forward as a requirement. We therefore support the Assembly version of this legislation and recommend that it be enacted into law.

NYSACHO Contact: Sarah Ravenhall, Executive Director, sravenhall@nysacho.org