



County of San Diego Monthly STD Report

Issue No. 18: Data through June 30, 2010; Report prepared August 31, 2010.



Table 1. STDs reported among San Diego County residents, by month (June 2010), and year to date.

	2010		2009	
	Jun	YTD	Jun	YTD
Gonorrhea	153	985	159	966
Female age 18-25	24	164	33	200
Female age ≤ 17	3	20	5	36
Male rectal gonorrhea	19	145	18	110
Chlamydia*	1233	6344	1198	6079
Female age 18-25	546	2862	518	2748
Female age ≤ 17	88	491	103	531
Male rectal chlamydia	25	137	30	134
Early Syphilis (adult total)	32	204	32	220
Primary	7	45	5	38
Secondary	13	80	21	104
Early latent	12	79	6	78
Neurosyphilis**	1	1	1	4
Congenital syphilis	0	1	0	7
Pelvic Inflammatory Disease	9	65	7	38
HIV Infection				
HIV (not AIDS)	39	257	50	301
AIDS	29	198	40	223

YTD: Year to Date

*Chlamydia data are only through May 2010, and are compared with May 2009.

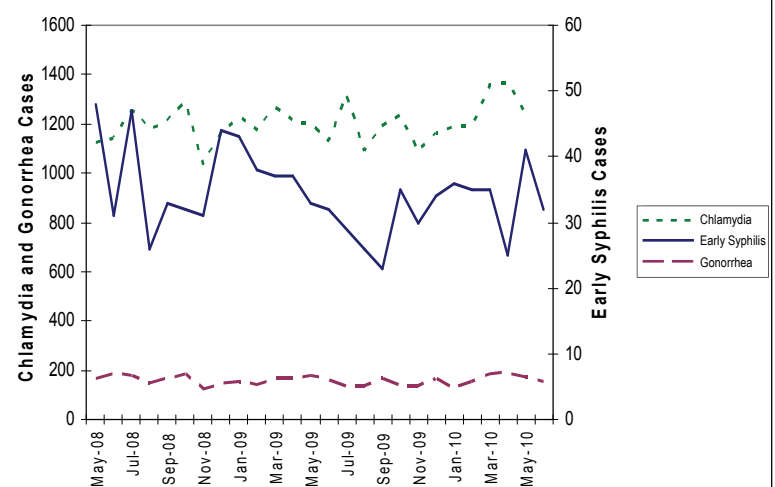
**Includes confirmed and probable cases of neurosyphilis among cases of early syphilis only.

Table 2. Selected STD cases and rates per 100,000 population for San Diego County by age and race/ethnicity, by month.*

	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia*	6344	199.9	238	70.6	558	335.1	1316	137.2	854	54.1
Gonorrhea	985	31.0	33	9.8	107	64.3	141	14.7	188	11.9
Early syphilis	204	6.4	8	2.4	26	15.6	57	5.9	111	7.0
Under 20 yrs										
Chlamydia*	1610	182.8	49	59.1	191	374.8	423	1083.2	167	48.4
Gonorrhea	104	11.8	2	2.4	25	49.1	21	53.8	7	2.0
Early syphilis	1	0.1	0	0.0	0	0.0	0	0.0	1	0.3

*Gonorrhea and early syphilis data are through June 2010. Chlamydia data are only through May 2010.

Figure 1. Chlamydia, early syphilis* and gonorrhea cases reported among San Diego County residents, by month.**



*Early syphilis includes primary, secondary and early latent syphilis.

**Gonorrhea and early syphilis data are through June 2010. Chlamydia data are only through May 2010.

Key Points, comparing 2010 with 2009

- Early syphilis declined 7%
- Overall, Chlamydia and gonorrhea are stable, but...
 - Gonorrhea in females age 18–25 declined 18%
 - Male rectal gonorrhea increased 32%

Note: All data are provisional. Morbidity is based on date of diagnosis. If date of diagnosis is not available, date of specimen collection is used. Totals for past months might change because of delays in reporting from labs and providers.

Editorial Note: Availability of Generic Valacyclovir for Genital Herpes Infections

Marketed by GSK as Valtrex® since 1995, valacyclovir is one of three medicines that can be used for treatment of acute or recurrent genital herpes outbreaks or for suppressive therapy for genital herpes. Suppressive therapy has been shown to reduce the frequency of genital herpes outbreaks and the risk of genital herpes transmission to sex partners. Since November 2009, ten generic formulations of valacyclovir have been approved by the Food and Drug Administration, an important development because generics typically cost less than branded medications. The Table below shows CDC treatment recommendations for genital herpes./KK

First clinical episode of genital herpes in HIV–negative individuals*	Recurrent clinical episode of genital herpes in HIV–negative individuals	Suppressive therapy for genital herpes in HIV–negative individuals
Acyclovir 400 mg orally three times a day for 7–10 days OR Acyclovir 200 mg orally five times a day for 7–10 days OR Famciclovir 250 mg orally three times a day for 7–10 days OR Valacyclovir 1 g orally twice a day for 7–10 days	Acyclovir 400 mg orally three times a day for 5 days OR Acyclovir 800 mg orally twice a day for 5 days OR Acyclovir 800 mg orally three times a day for 2 days OR Famciclovir 125 mg orally twice daily for 5 days OR Famciclovir 1000 mg orally twice daily for 1 day OR Valacyclovir 500 mg orally twice a day for 3 days OR Valacyclovir 1.0 g orally once a day for 5 days	Acyclovir 400 mg orally twice a day OR Famciclovir 250 mg orally twice a day OR Valacyclovir 500 mg orally once a day OR Valacyclovir 1.0 g orally once a day
First clinical episode of genital herpes in HIV–positive individuals*	Recurrent clinical episode of genital herpes in HIV–positive individuals	Suppressive therapy for genital herpes in HIV–positive individuals
Same as above	Acyclovir 400 mg orally three times a day for 5 days OR Famciclovir 500 mg orally twice daily for 5–10 days OR Valacyclovir 1.0 g orally once a day for 5–10 days	Acyclovir 400–800 mg orally twice to three times a day OR Famciclovir 500 mg orally twice a day OR Valacyclovir 500 mg orally twice a day

* Treatment might be extended if healing is incomplete after 10 days of therapy.

Information from CDC about genital herpes diagnosis and treatment: <http://www.cdc.gov/std/treatment/2006/genital-ulcers.htm#genulc3>

Information about the County of San Diego STD Clinics: www.STDSanDiego.org

STD Clinical Consultation Pager: (877) 217-1816 (8 a.m.–5 p.m., M–F, except major holidays)

Provider STD Reporting: (619) 692-8520; fax (619) 692-8541

STD Clinic: (619) 692-8550; fax (619) 692-8543