HBsAg was 0.92%. Co-infections confirmed were of Syphilis 1.72%, 1.54% for HIV and 0.43% for Hepatitis C. The total population’s age was normally distributed with mean of 29 ±1.7 years and a range of 44 years.

Conclusion Predominant genotype amongst Botswana blood donors is D3. There is a major concern to address STIs in Botswana much work is being done on HIV but the results reflect a burden of all STIs.

Introduction

To investigate whether there is persistence of Tracey pallidum (TP) DNA in the breast milk of female patients with syphilis and provide scientific evidence for breast-feeding for female syphilis patients after childbirth.

Methods

A polymerase chain reaction (PCR) technique was used for the detection of TP DNA in the breast milk of female syphilis patients in Shenzhen, China.

Results

An early syphilis patient after six months childbirth with hard chancre in the labia majora and secondary syphilitic eruption in the trunk and limbs had toluidine red unheated serum test (TRUST) positive with the titer of 1:128 and Treponema pallidum particle agglutination test (TPPA) positive and had TP DNA detected in her breast milk by PCR technique. Her six-month-old daughter had TRUST positive with the titer of 1:256 and TPPA positive with secondary syphilitic eruption in the trunk and limbs. The mother syphilis patient received 3 weekly intramuscular injections of 2.4 million units of benzathine penicillin G (BPG) on both sides, once a week. After one weekly intramuscular injection of BPG, TP DNA wasn’t detected in the breast milk of the female patient and remained negative after two weekly injection of BPG in the breast milk of the female patient. Ten cases of syphilis before and during pregnancy received BPG treatment in our hospital all had no TP DNA detected in their breast milk.

Conclusion

Female early syphilis patients never received BPG treatment have TP DNA detected in their breast milk and are unable to breast-feed their babies temporarily. Female syphilis patients received BPG treatment have no TP DNA detected in their breast milk and can breast-feed their babies but need to be followed-up regularly.

Clinical case

We present the case of a 32 year-old man, HIV positive in treatment, that presented to our hospital. He had erythematous papules scattered through his trunk, limbs (including palms and soles) and genitalia. He denied previous genital, oral or anal ulcer. His previous serological tests for syphilis were negative. We suspected a secondary syphilis and prescribed Benzathin G Penicillin G 2.4 M IU. The patient referred to the emergency room for a flu-like reaction and worsening of the skin lesions after the injection. We performed a biopsy that confirmed the clinical diagnosis of syphilis, and the serological test came out positive (RPR 64). After the second injection of penicillin, the patient experienced a second reaction, with fever and malaise. Before the third treatment we administered prednisone for three days, and he had no reaction. The Jarisch-Herxheimer Reaction (JHR) is well known since the Middle Ages, when it was associated with mercury ointments used for the treatment of syphilis. The first literary descriptions came from Jarisch in 1895 and Herxheimer seven years later. Since then it has been described.