Continuing evidence that COVID-19 has influenced syphilis epidemiology in Rome

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There are conflicting data on how COVID-19 has impacted STI epidemiology worldwide.1 In Rome, we observed a marked decrease in syphilis diagnoses during the first lockdown of spring 2020.2 Extending our previous observations, we compared syphilis diagnoses (primary/secondary/recent) during the whole of 2020 versus those of the previous 3 years (figure 1). While diagnoses by month were homogeneous in the prepandemic period (p for trend=0.40), 2020 showed a peak in June, a sharp and atypical decline in September, returning to the usual figures in November, when Rome was in ‘soft’ lockdown. We speculate that the increase in June might reflect: (1) visit postponement by patients who, despite being symptomatic, were reluctant to attend the hospital; (2) diagnoses of infections acquired during lockdown. Overall, syphilis diagnoses were 81 in 2020 compared with mean 106 (SE: 7) in 2017–2019 suggesting, to some extent, a reduction of at-risk sexual encounters in the pandemic period.

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Figure 1 Number of infectious syphilis (primary/secondary/recent syphilis), by month, diagnosed at the STI/HIV Unit of the San Gallicano Dermatological Institute (Rome, Italy), during the pandemic period (2020) and mean number (with range) of infectious syphilis, by month, diagnosed in the prepandemic period (2017–2019): the first strict lockdown and the second ‘soft’ lockdown (when Rome was in the low-risk yellow zone) are also indicated. (Created by the authors.)

REFERENCES

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