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Abstract (publication only)

**Epidemiology of syphilis in Tunisia: a ten-year-experience of a tertiary care hospital**

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**Background:** Syphilis, is considered as re-emergent disease in general population, in many parts of the world. It is a chronic systemic infection, sexually transmitted, caused by *Treponema pallidum* subspecies *pallidum*. Active infectious syphilis during pregnancy can result in congenital syphilis from transplacental infection, with devastating outcomes in the affected infants. Neurosyphilis may occur when then central nervous system is infected with the bacterium and causes symptomatic or asymptomatic manifestations. **Objectives:** No data were previously published about syphilis infection in Tunisia. The purpose of this study was to analyze data of syphilis serologies analyzed in our laboratory during a 10-year period (2002 to 2011) and to compare two 5 year periods. **Methods:** We analyzed, retrospectively, syphilis serological data performed in our laboratory (Habib Bourguiba University Hospital in Sfax) during 10 years from 2002 to 2011. We included all patients for which syphilis serology was requested on the basis of clinical data: prenatal consultation for pregnant woman, suspicion of a sexually transmitted infection (STI), suspicion of neurosyphilis (NS) and suspicion of congenital syphilis. All patients' sera were screened using both the Veneral Disease Research Laboratory (VRDL) and the *Treponema Pallidum* Hemagglutination Assay tests (TPHA). A positive serology was considered if TPHA was positive or both VRDL and TPHA were positives. Two periods of five years each were compared: 2002-2006 and 2007-2011. **Results:** During the 10-year study, 47793 syphilis serologies were performed. Positive serological tests were observed in 400 cases (0.8%). According to clinical presentations, positive serological tests were noted in patients with NS in 189 cases (47.2%), with STI in 135 cases (33.7%), among pregnant women in 70 cases (17.5%) and in patients with congenital syphilis in 6 cases (1.7%). When comparing the two periods, decreasing positivity rates of syphilis serology were noted (1.1% versus 0.6%). Regarding distribution according to clinical presentations, positive serological tests were more frequently observed among pregnant women (15% versus 21.1%) and patients with congenital syphilis (0.4% versus 3%) during the second period. **Conclusion:** In our study, there is still a substantial carriage of syphilis in our population even of the encouraging decrease. Our study showed high rates of NS and STI. Besides, the reappearance of congenital syphilis in the last two years is alarming.