

**Date:** December 10, 2025

**From:** Dr. Dueck, Medical Officer of Health

**Re:** Syphilis Screening during Pregnancy

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This memo reminds health care providers to ensure syphilis screening during pregnancy.

## Background

[Public Health Ontario](#) has issued notice that infectious syphilis among individuals of childbearing age has increased, with subsequent increase in congenital syphilis in Ontario.

Key messages from Public Health Ontario on this issue include:

- 2014 to 2023: continuous increased incidence of infectious syphilis in Ontario.
- Syphilis cases reported among females occurred primarily during childbearing ages (i.e., ages 15 to 44 years), with subsequent increase in cases of congenital syphilis.
- Ensuring adequate treatment for pregnant people with syphilis is critical for preventing congenital syphilis (information: [p 15, Ontario Public Health Standards](#)).
- Common challenges encountered implementing syphilis case and contact management approaches for pregnant people in Ontario include:
  - Lack of treatment of syphilis due to health system factors (e.g., awareness);
  - Lack of access to health care services, due to determinants of health (e.g., lack of housing, transportation) or individual barriers (e.g., health literacy).

## Clinical Guidance

Refer to [Public Health Agency of Canada](#) guidance for screening, diagnosis, treatment, and monitoring syphilis:

- Routine syphilis screening recommended for anyone with [risk factors for syphilis](#).
- For **all pregnant people**, syphilis screening should be conducted at:
  - **First visit** or in the **first trimester**, and
  - For those at **increased risk**, syphilis serology should be conducted:
    - During the interval of **gestational age 28-32 weeks**, and
    - Again **at delivery**.

- Screening is recommended for all people who deliver a stillborn infant after 20 weeks gestation.
- **Pregnant people diagnosed with infectious syphilis** should be managed in consultation with an **Obstetric/Maternal-Fetal Specialist**. Assessment for possible congenital syphilis should be done:
  - At 20 weeks gestation with a detailed obstetrical ultrasound, and
  - In infancy. Test infants presenting with signs or symptoms compatible with early congenital syphilis even if their mother was seronegative at delivery because they may have become infected near term.
- Assessment of neonates exposed to syphilis is recommended at delivery by an **Infectious Diseases Specialist**.
- Base post-treatment serology testing per the stage and time of previous treatment.
- People diagnosed with syphilis may also be at risk for other sexually transmitted infections, including chlamydia, gonorrhea, or HIV.

## Reporting Requirements

All suspected or confirmed cases of syphilis must be reported to Lambton Public Health. Refer to [Diseases of Public Health Significance](#) for reporting information.

Diagnostic testing of reportable diseases is essential to ensure proper isolation, treatment, surveillance, and contact tracing, with information found at [PHO's Test Information Index](#).

**For Further Information:** Phone: 519-383-8331 Extension 3547; Fax: 519-383-7092.