



# STIs in Chicago: Current Status and Next Steps



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# Overview

- Status of STIs in Chicago
  - Rates, Risk Populations, Community Areas
- Data Sources
  - Reporting Guidance
- Collaboration
  - What can we do together?

# Status of STIs in Chicago



**Chlamydia, Gonorrhea, and Primary and Secondary (P&S) Syphilis**  
**Counties and Independent Cities Ranked by Number of Reported Cases: United States, 2014**

Rank	Chlamydia	Gonorrhea	P&S Syphilis
1	Los Angeles County, CA 54,881 cases 547.9/100,000 population	Los Angeles County, CA 15,316 cases 152.9/100,000 population	Los Angeles County, CA 1,204 cases 12.0/100,000 population
2	<b><u>Cook County, IL</u></b> 37,371 cases 713.1/100,000 population	<b><u>Cook County, IL</u></b> 10,387 cases 198.2/100,000 population	<b><u>Cook County, IL</u></b> 724 cases 13.8/100,000 population
3	Harris County, TX 24,785 cases 571.5/100,000 population	Harris County, TX 7,126 cases 164.3/100,000 population	New York County, NY 497 cases 30.6/100,000 population

<b>Chicago</b>	27,320 cases 1,012/100,000 population	8,306 cases 307.8/100,000 population	643 cases 23.8/100,000 population
<b>State of IL Rate</b>	66,536 cases 516.5/100,000 population	15,971 cases 124.0/100,000 population	863 cases 6.7/100,000 population
<b>U.S. Rate</b>	1,441,789 cases 456.1/100,000 population	350,062 cases 110.7/100,000 population	19,999 cases 6.3/100,000 population

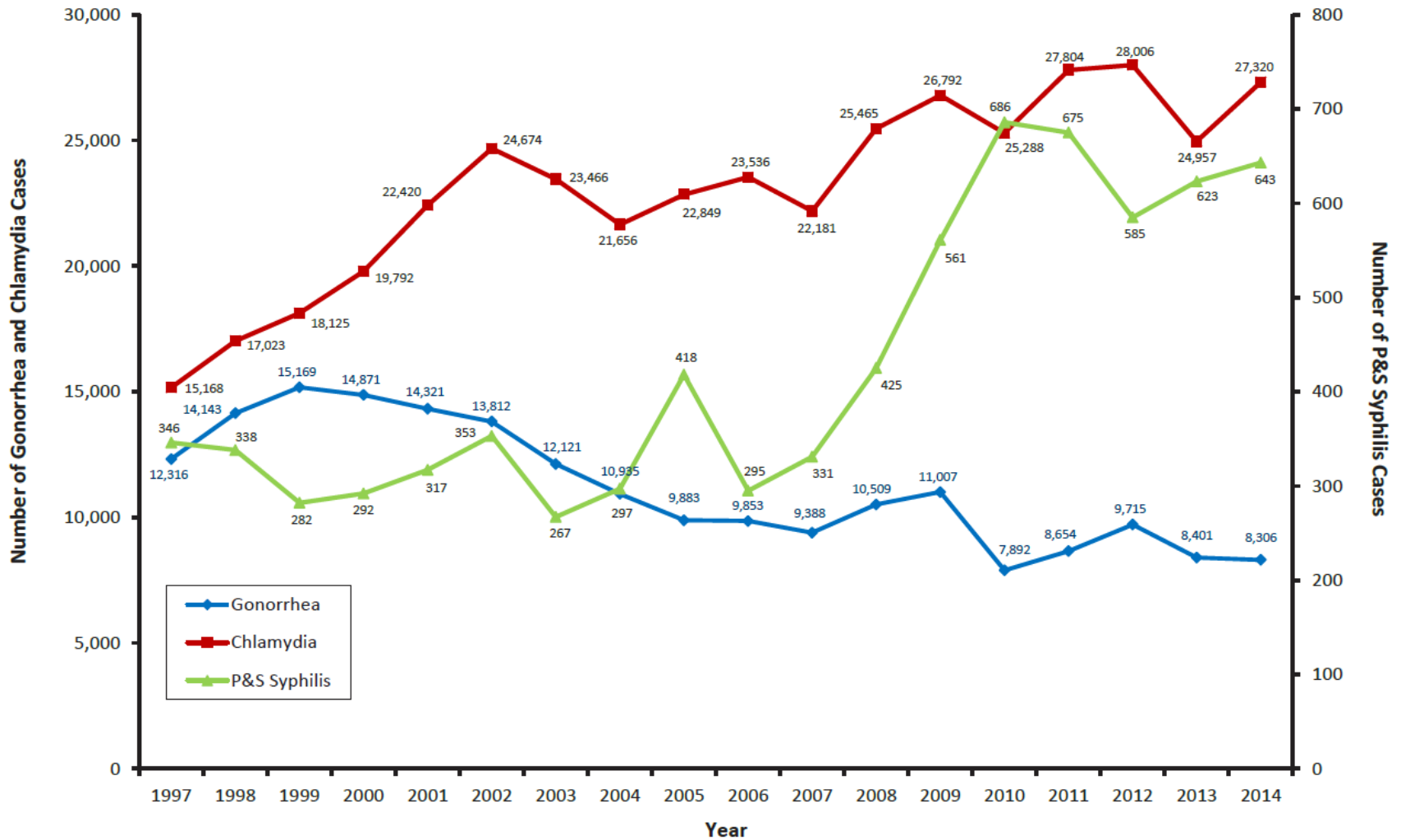
\* Centers for Disease Control and Prevention, Sexually Transmitted Disease Surveillance Report 2014

## Number of Reported STIs in Illinois, 2014

	Illinois	Chicago	% of Illinois Cases
Chlamydia	66,593	27,320	41%
Gonorrhea	15,971	8,306	52%
P&S Syphilis	863	643	75%
Congenital Syphilis	27	20	74%

Illinois Department of Public Health, 2015

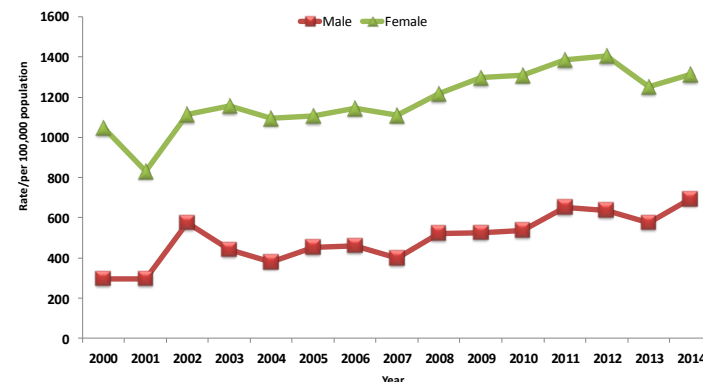
**Figure 6. Number of Reported Sexually Transmitted Infections, Chicago, 1997-2014**



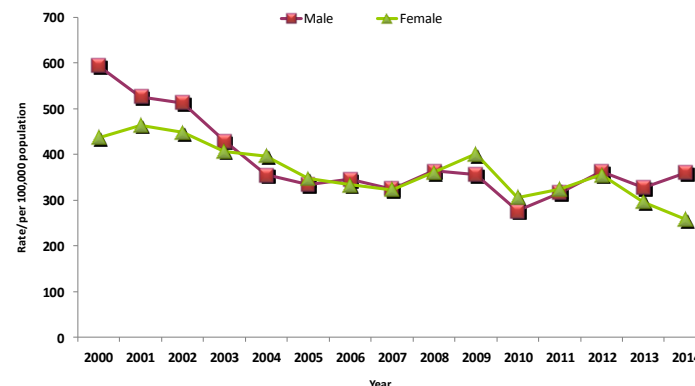
CDPH, HIV/STI Surveillance Report 2015

# STI by Sex, 2010-2014

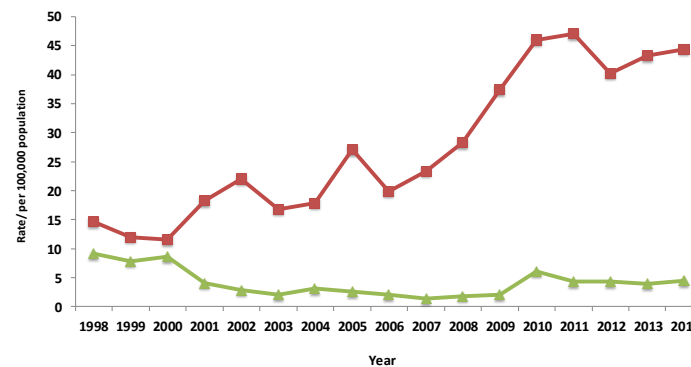
- **Chlamydia** = The number of reported cases among females were about 2x the number of cases among males



- **Gonorrhea** = The number of cases among females were the lowest since 2010 while the number of cases among men were the highest since 2010

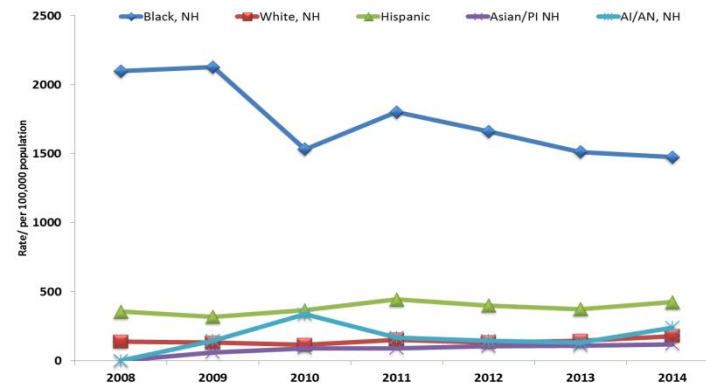


- **P&S Syphilis** = The number of reported cases among males were 9x the number of cases in females

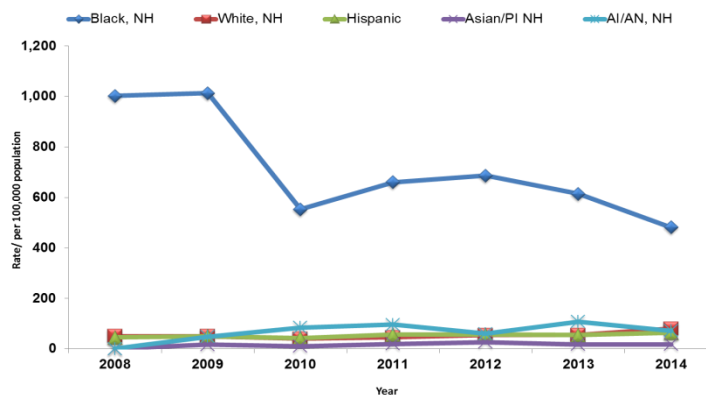


# STI by Race/Ethnicity

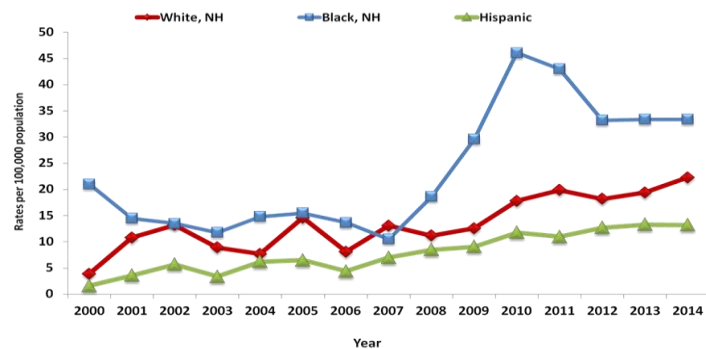
- **Chlamydia (2008-2014)** = Non-Hispanic (NH) Blacks comprised 47.1% of cases



- **Gonorrhea (2008-2014)** = NH Blacks comprised 50.6% of cases



- **P&S Syphilis (2000-2014)** = NH Blacks comprised 43.4% of cases



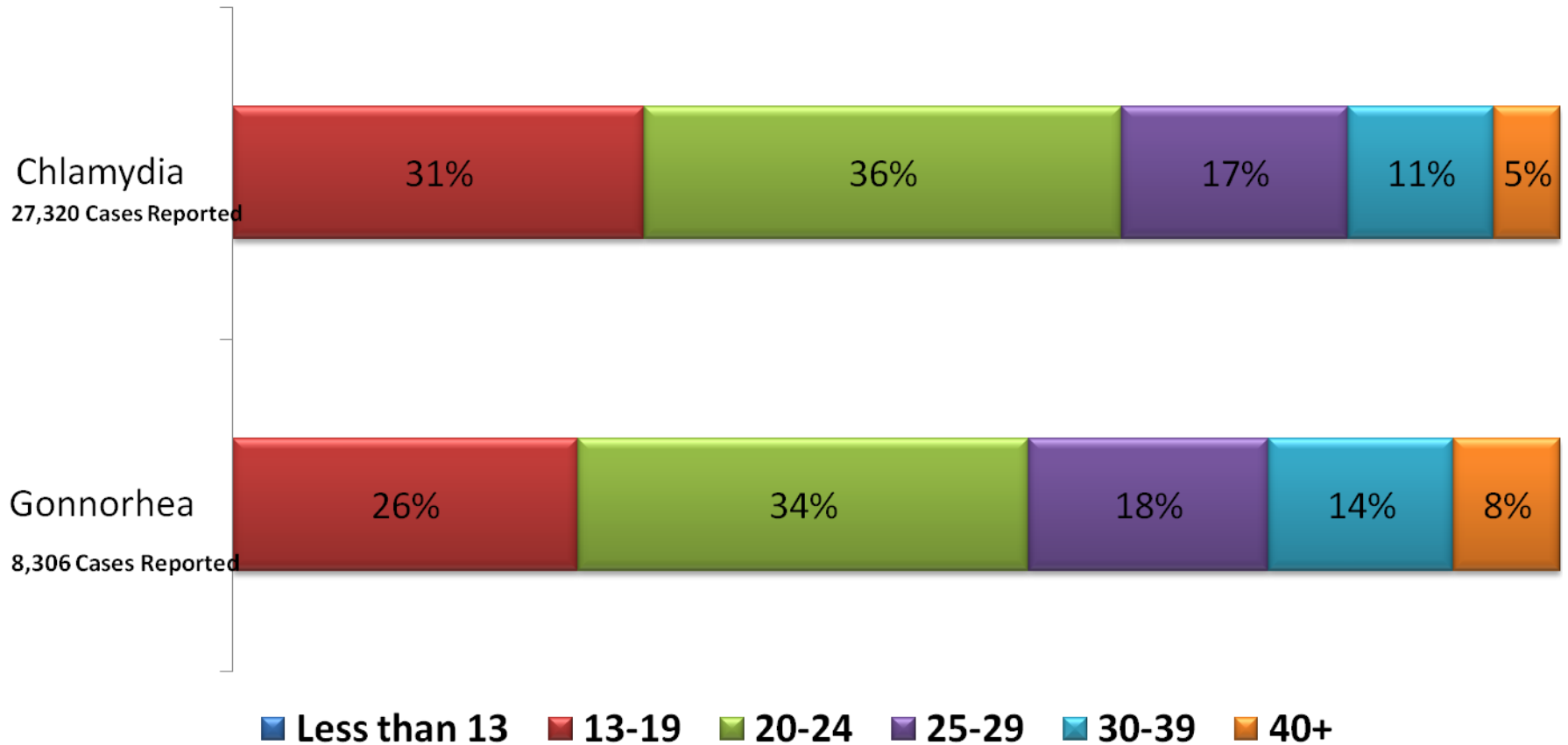
Since 2010, number of reported cases for all STIs have increased for NH Whites and Hispanics



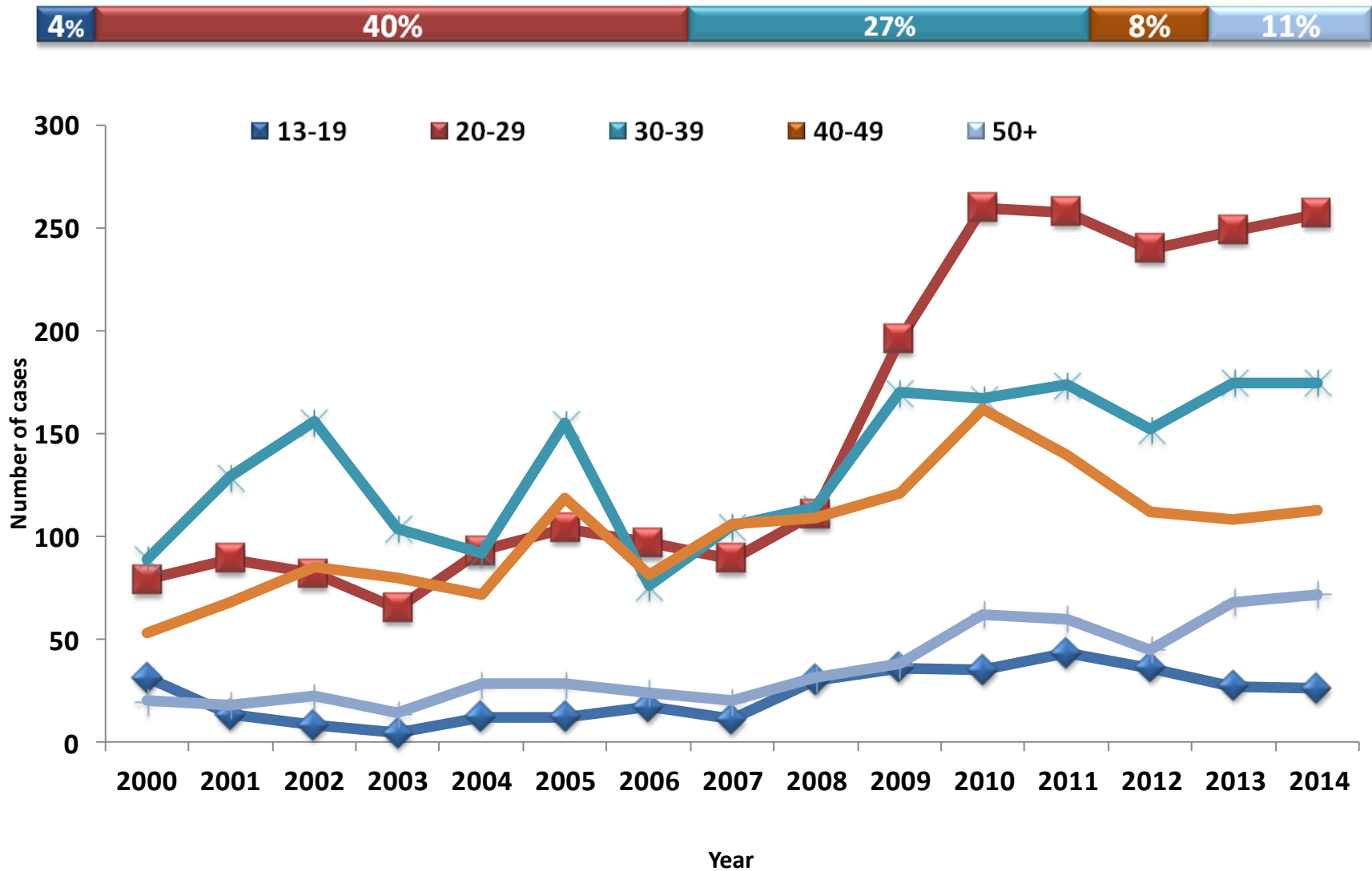
# STIs by Age, 2014

- Majority of STI diagnoses in Chicago are concentrated among adolescents and young adults
- Individuals 13-24 yrs old accounted for 59.7% of Gonorrhea cases and 66.7% of Chlamydia cases
- 44.0% of P&S Syphilis cases were reported in individuals < 30 years

# Most Reported Chlamydia and Gonorrhea Infections are among 13 – 24-Year-Olds, 2014



# P&S Syphilis, Cases by Age groups, Chicago, 2000-2014

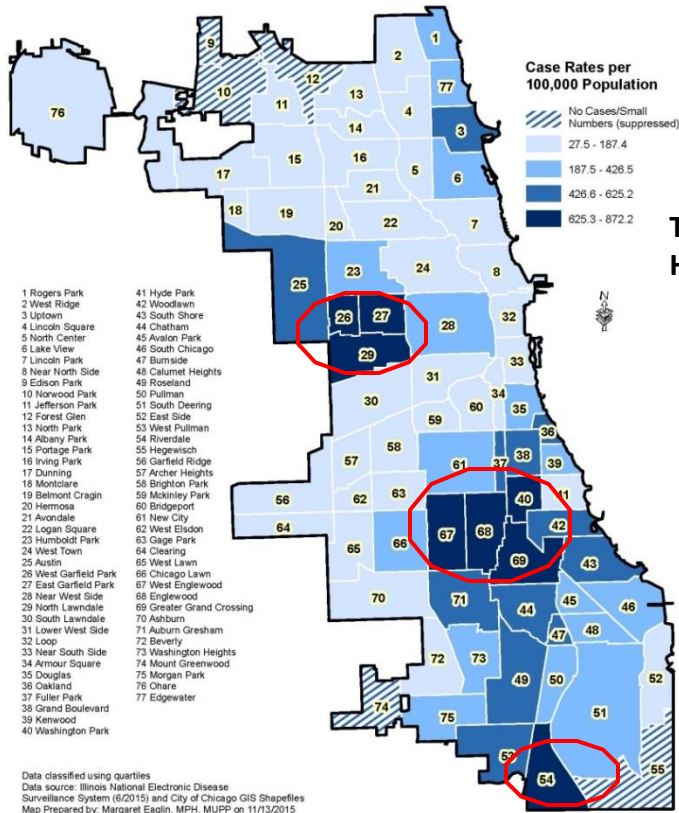


# STIs by Community Area, 2014

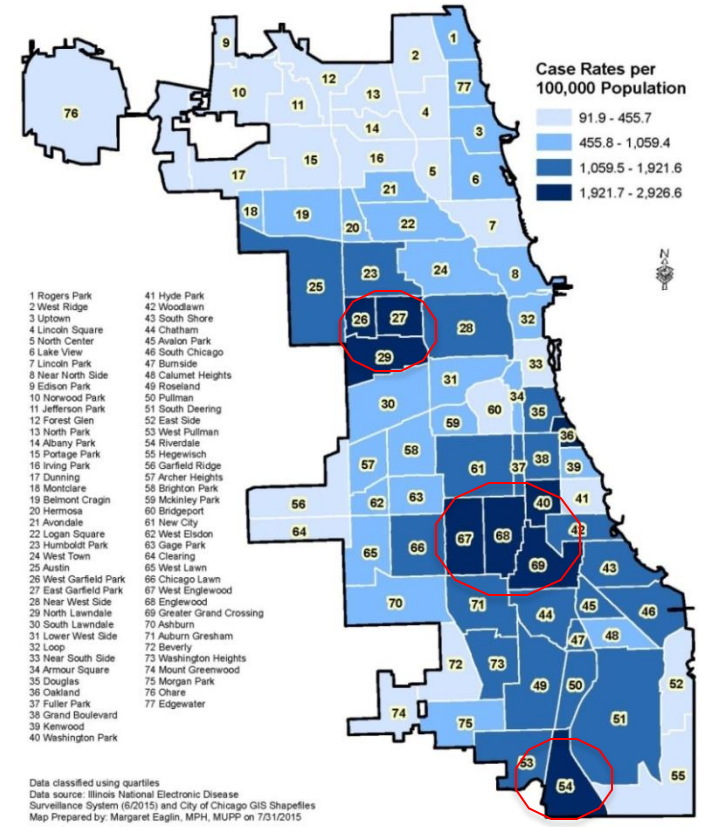
- Chicago community areas with the highest Chlamydia and Gonorrhea case rates were located in the west and south
- Chicago community areas with the highest P&S Syphilis case rates were located mostly in the north, with other smaller high rate areas in the west and south

# Gonorrhea/Chlamydia case rates distribution by community areas, Chicago, 2014

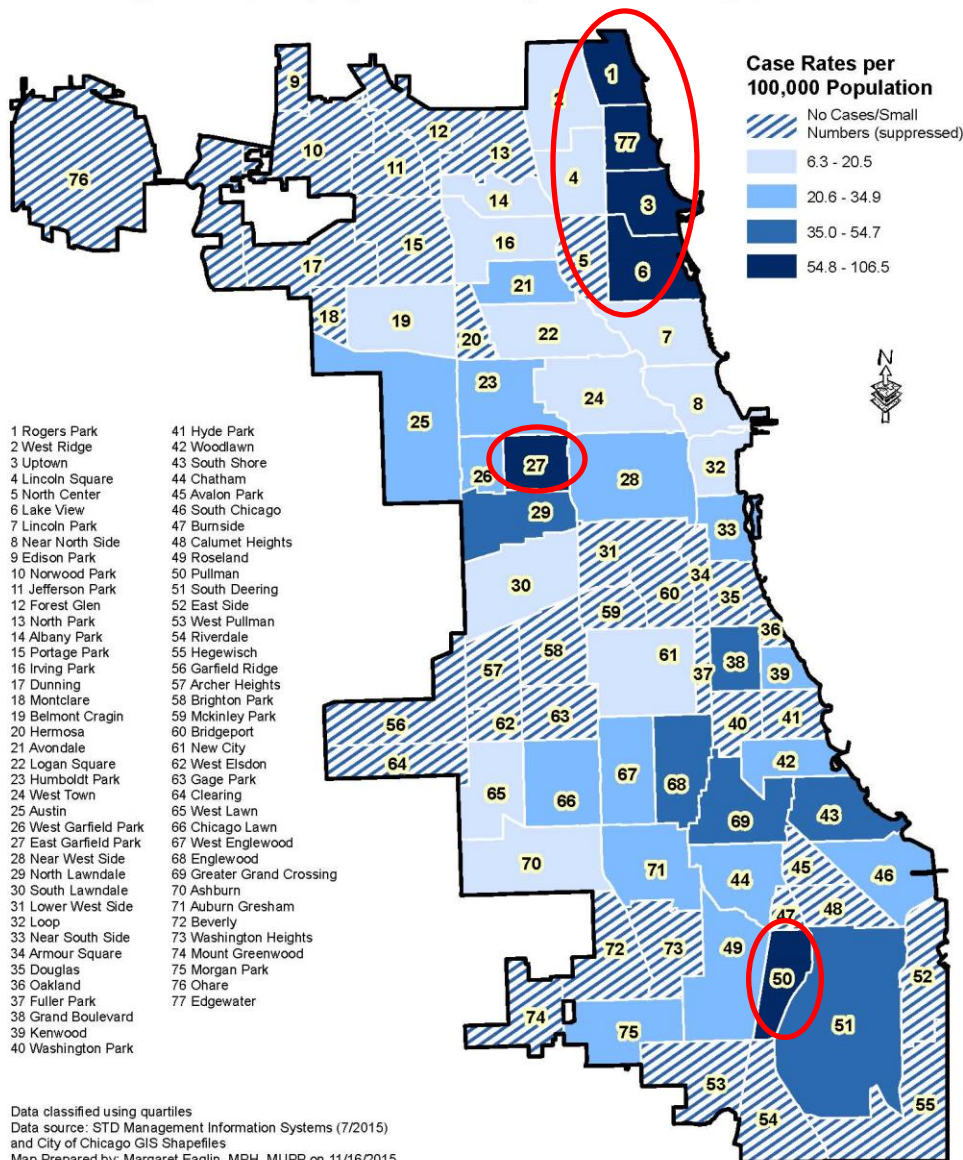
**Figure 7. Gonorrhea Case Rates (per 100,000) by Community Area, Chicago, 2014**



**Figure 8. Chlamydia Case Rates (per 100,000) by Community Area, Chicago, 2014**



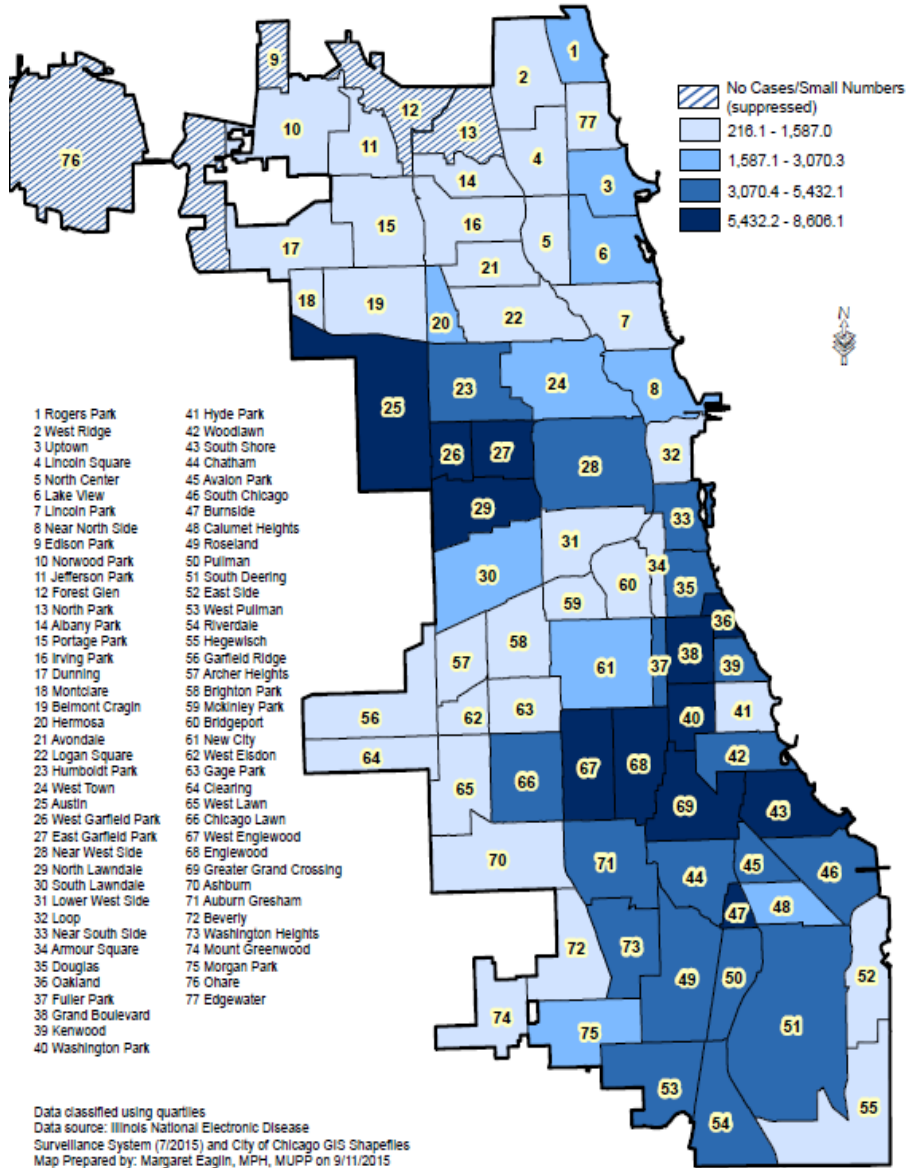
**Figure 9. Primary and Secondary Syphilis Case Rates (per 100,000) by Community Area, Chicago, 2014**



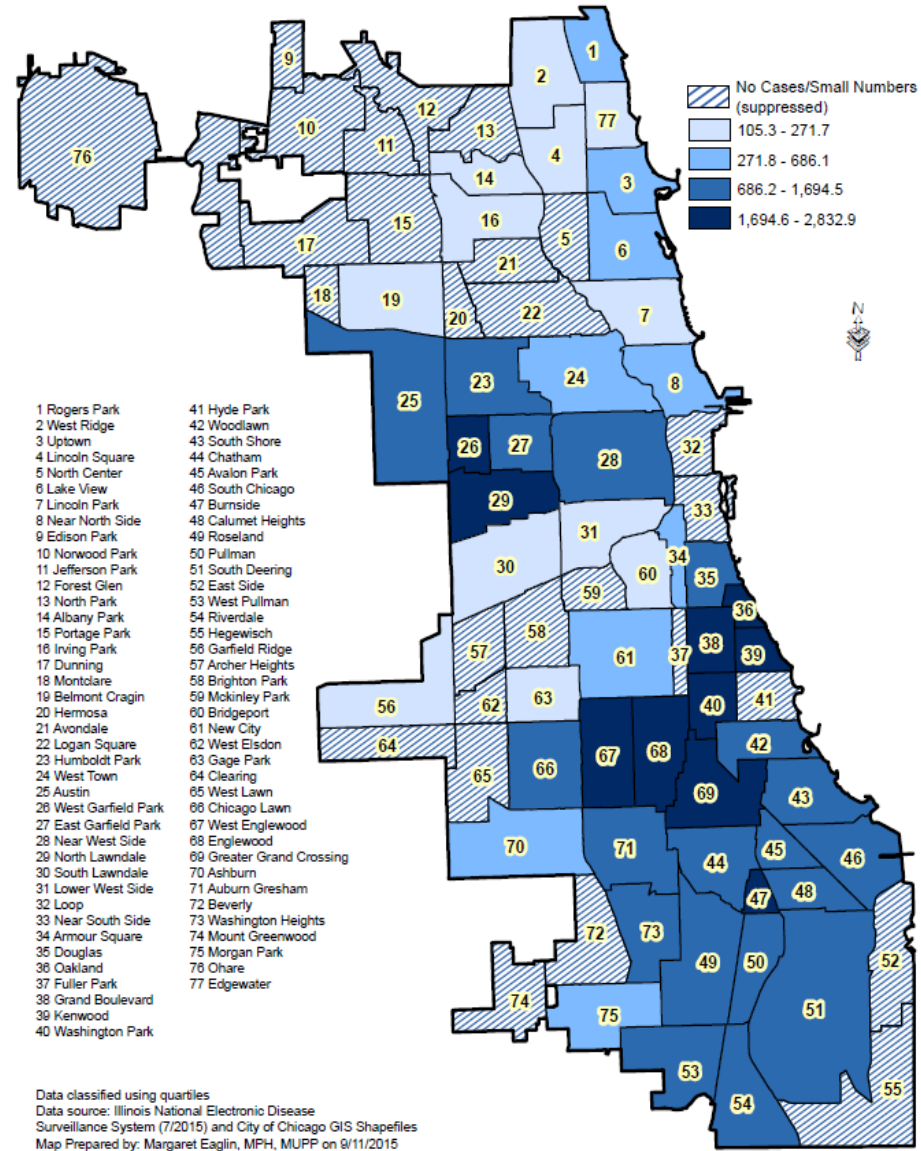
Data classified using quartiles  
Data source: STD Management Information Systems (7/2015)  
and City of Chicago GIS Shapefiles  
Map Prepared by: Margaret Eaglin, MPH, MUPP on 11/16/2015



## Chlamydia Case Rates (per 100,000) among Adolescents Aged 13-19 by Community Area, Chicago, 2014



## Gonorrhea Case Rates (per 100,000) among Adolescents Aged 13-19 by Community Area, Chicago, 2014



# Repeat P&S Syphilis Infections, 2014

**Characteristics of MSM with multiple versus single episodes of P&S syphilis in Chicago (N=3,544)**

	<b>Multiple Episodes</b> n = 316	<b>Single Episodes</b> n = 3,228
<b>Median Age(years)</b>	35	33
<b>Median# Sex Partners</b>	4	3
<b>Race/Ethnicity, N(%)</b>		
NH White	136 (43.0)	1333 (41.3)
NH Black	134 (42.4)	1180 (36.6)
Hispanic	39 (12.3)	546 (16.9)
Other	7(2.2)	169 (5.2)
<b>HIV status, N(%)</b>		
Positive	<b>168 (53.2)</b>	915 (28.3)
Negative	121(38.3)	1,729 (53.6)
Unk/Refused	27(8.5)	584(18.1)

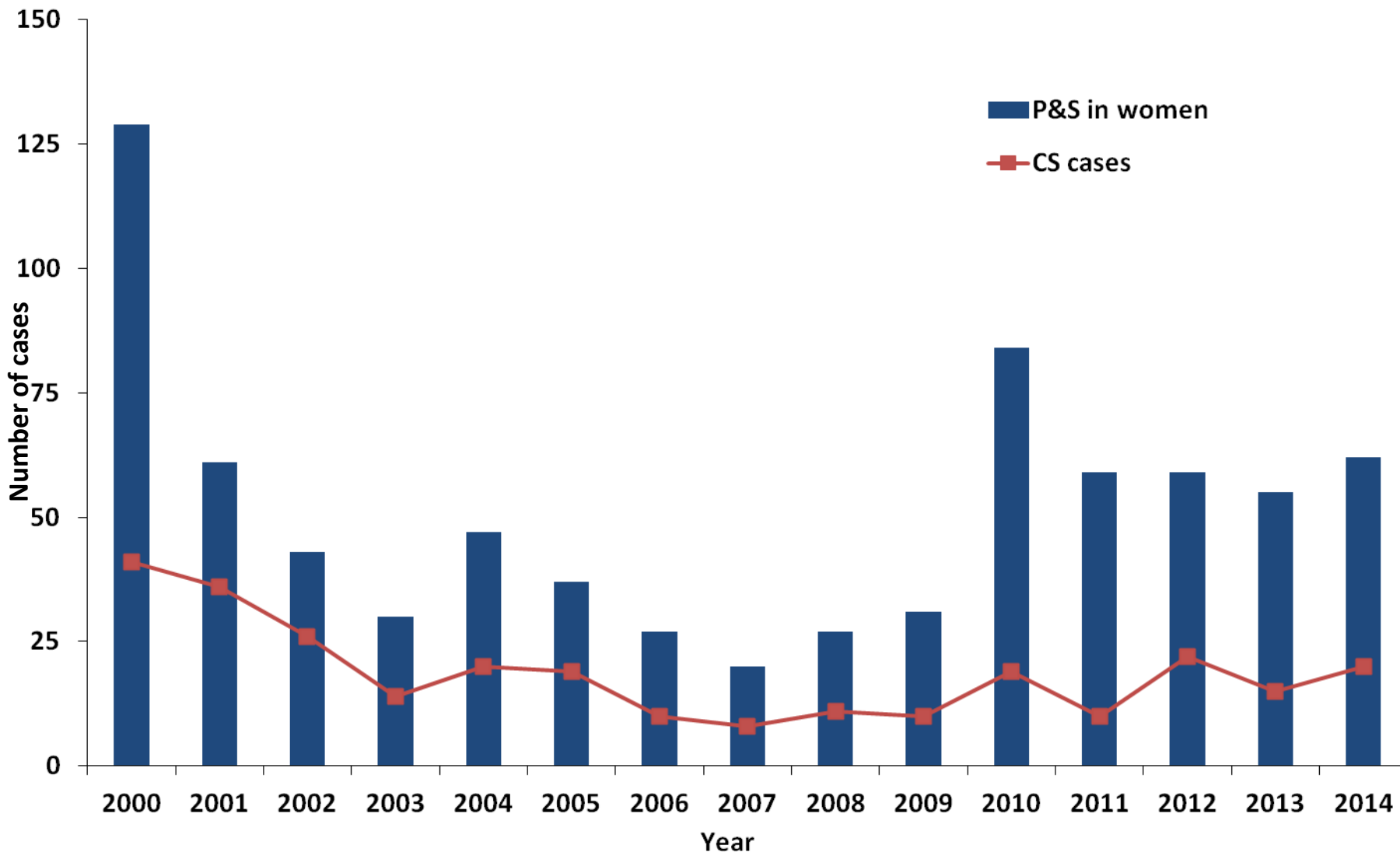
MSM with multiple episodes were similar to those with single episode with respect to median age ,number of sex partners and race/ethnicity (OR black vs white) = 1.1 (95% CI=0.866-1.431) but were more likely to be HIV positive (OR HIV status) = 2.6 (95% CI: 2.049–3.359).



# Congenital Syphilis, 2014

- Trends observed in Congenital Syphilis case numbers usually follow trends for P&S Syphilis in females, with a lag of 1-2 yrs
- From 2010-2014, the number of P&S Syphilis cases among females decreased from 84 to 62 cases
- During this same time period, the number of Congenital Syphilis cases increased only slightly (19 to 20 cases)

# P&S Syphilis among Women & Congenital Syphilis Cases, Chicago 2000 - 2014

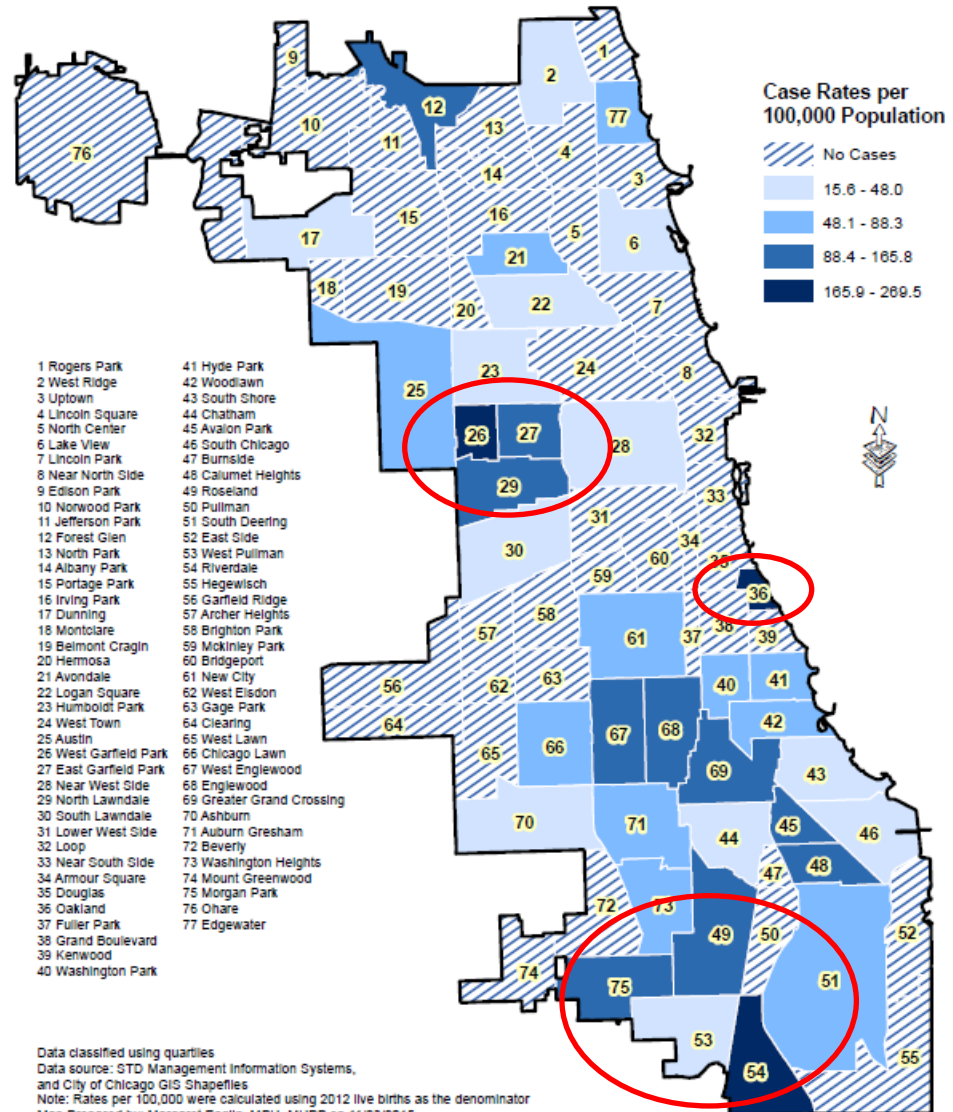




# Protecting Your Baby from Congenital Syphilis



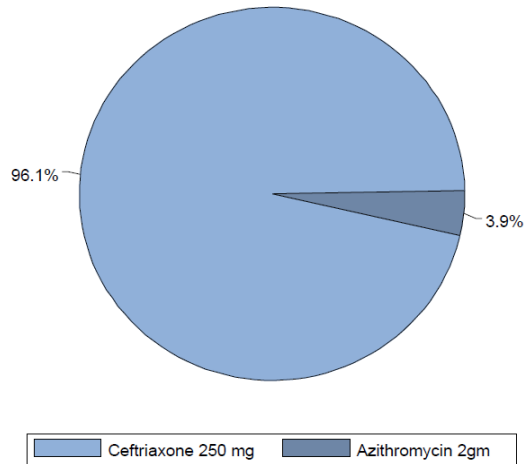
**Figure 10. Average Annual Congenital Syphilis Case Rates (per 100,000 live births) by Community Area, Chicago, 2010-2014 (city total rate = 39.7)**



# Gonococcal Isolate Surveillance Project (GISP), 2014

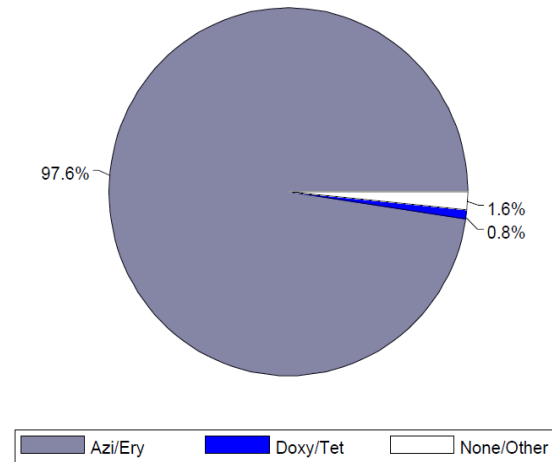
Chicago, Illinois (N=129)

Figure D. Primary antimicrobial drug used to treat gonorrhea among GISP participants, 2014



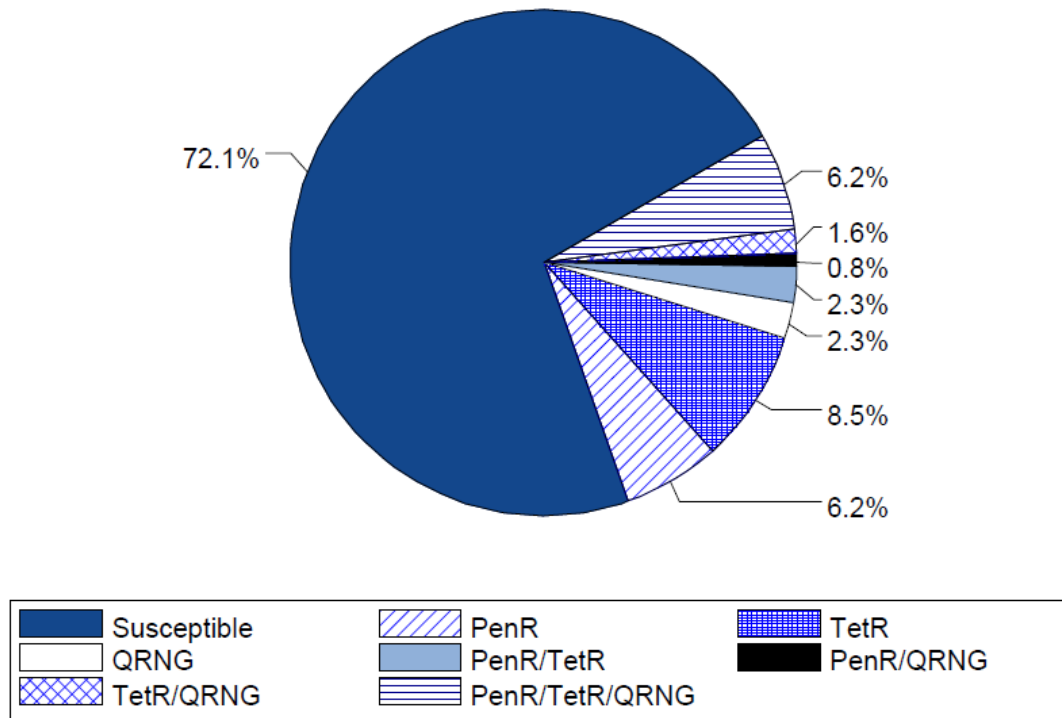
Chicago, Illinois (N=129)

Figure E. Secondary antimicrobial drug used to treat gonorrhea among GISP participants, 2014



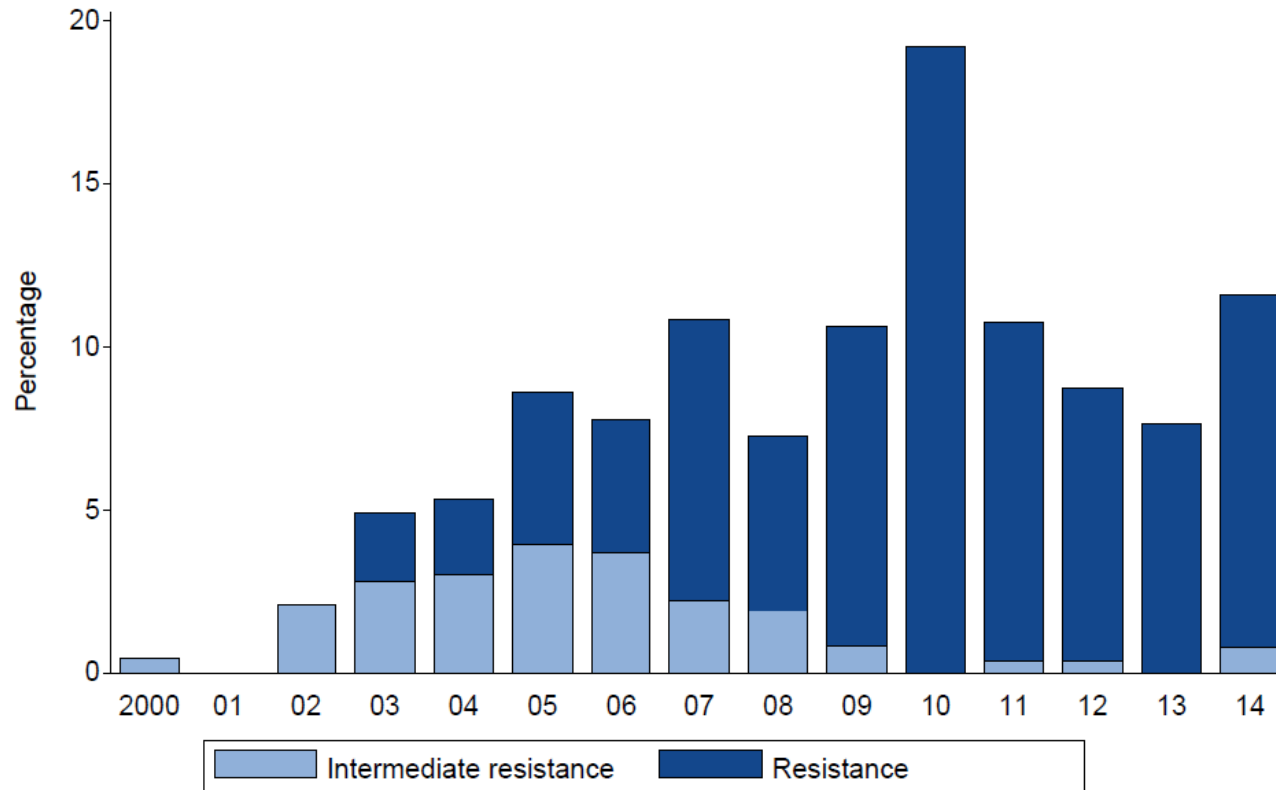
Chicago, Illinois (N=129)

Figure F. Percentage of isolates with penicillin, tetracycline, and/or ciprofloxacin resistance, 2014



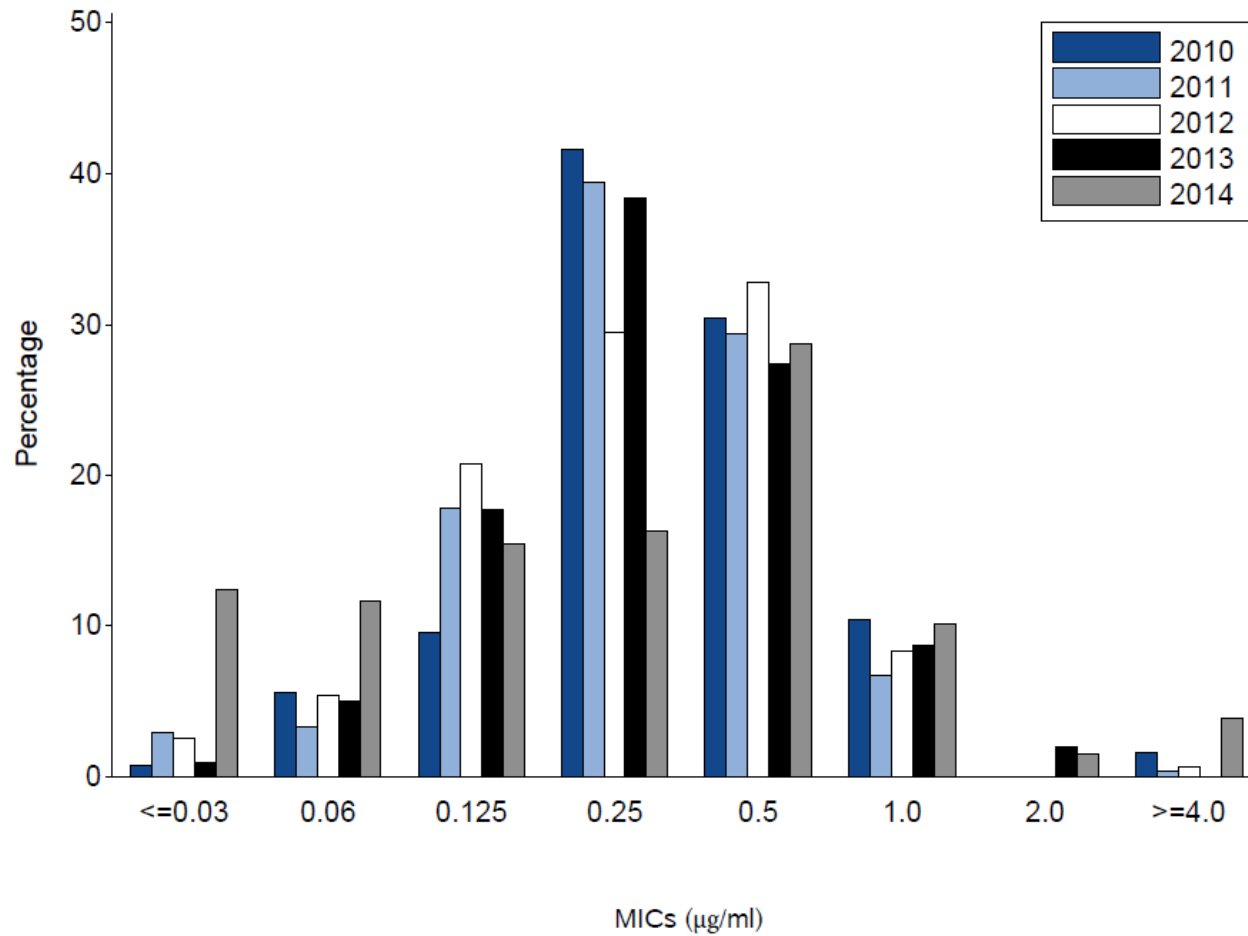
## Chicago, Illinois

Figure I. Percentage of isolates with intermediate resistance or resistance to ciprofloxacin, 2000-2014



# Chicago, Illinois

Figure J. Distribution of azithromycin minimum inhibitory concentrations (MICs) among GISP isolates, 2010-2014



# Sneak Peak 2015 STI Data





# Ocular Syphilis

## Ocular Syphilis Cases Chicago vs West coast, 2015

Jurisdiction	Time Period	Total# cases	Sexual Behavior	Median Age (Range)	Ocular Sign/Symptoms	RPR Test (titer range)	Syphilis Stage	HIV status	Median CD4 count	Median HIV-RNA	Ophtho Exam	CSF VDRL (# of cases)	Rx (# of case)	Ocular symptoms after Rx
<b>King County, WA<sup>1</sup></b>	12/1/14-01/30/15	4	MSM(7)	39 years (29-52)	Blurry Vision/vision loss & flashing lights	1:256 - 1:4096	Early Latent (3) Late Latent (1)	<b>Positive (75%)</b> 3 cases	111 cells/ml	34,740 copies/ml	Uveitis(4)	Positive(2)	Pen G IV (3) Procaine pen and probenecid (1)	Initial improvement(4), However: 1 pt still had a 2 legally blind after 5 month 1 lost to follow up
<b>San Francisco, CA<sup>1</sup></b>	12/15/14-03/25/15	8	MSM(6) MSW(1) Female(1)	52 years (35-58)	Blurry vision	1:256 - 1:8192	Secondary(3) Early Latent (4) Late Latent (1)	<b>Positive (88%)</b> 6 cases	291 cells/ml	84,500 copies/ml	Optic neuropathy, Uveitis Retinal	Positive (3)	Pen G IV(8)	Improvement (7) Permanent visual loss after 3 months (1)
<b>Chicago, IL<sup>2</sup></b>	01/01/15-12/31/15	5	MSM(3) MSM/W(1) MSW(1)	32 years (32-58)	Blurry vision	1:16 - 1:4096	Secondary 2) Late Latent(3)	<b>Positive (80%)</b> 4 cases	221 cells/ml	56,037 copies/ml	Panuveitis (2) Chorioretinitis(2) Papilledema(1)	Positive (2)	Pen G IV(3) Pen G IV&BIC 2.4 IM (1)	Improvement (3) No information (2)

<sup>1</sup>Notes from the Field: A Cluster of Ocular Syphilis Cases — Seattle, Washington, and San Francisco, California, 2014  
2015(<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6440a6.htm>) MMWR October 16, 2015

## 2015 STI Co-infection Data – Chicago (as of 06.21.2016)

Disease	Total Morbidity	STI/HIV Co-infected (#)	STI/HIV Co-infected (%)
Chlamydia	29,018	839	3%
Gonorrhea	8,786	761	9%
Early Syphilis	1,352	567	42%

## 2015 MSM HIV/PS Co-infected – Chicago (as of 06.21.2016)

Population	PS Syphilis (#) (n=241)	PS Syphilis (%)	% Change 2014-15
NHB MSM 20-29	55	23%	+96%
NHB MSM 30-39	26	11%	+86%
NHW MSM 30-39	26	11%	+136%
NHW MSM 40-49	25	10%	+39%
NHB MSM 40-49	17	7%	+42%

# CDPH Data Sources



# Where do the data come from?

- Provider Reporting
  - You! Morbidity and Laboratory reports
- CDPH clinic reporting
  - Screening data
- Federally funded research projects
  - Behavioral associations
- CDPH funded collaborations
  - Specialized focus

**We are only as  
accurate as the  
data we receive**

# State of Illinois Reporting Requirements

(77 Ill. Admin Code 693.30)

- Providers must report within **7 days** to local health department diagnosis and/or treatment for a client positive for STI test result
- Laboratories must report within **7 days** to local health department a positive STI result
- Failure to comply **can be punishable by fines up to \$500 for EACH violation** or allows the Illinois Department of Public Health to report such violations to the regulatory agency which provides licensing for your health care profession

# What happens with the data?

- CDPH STI Surveillance receives **~40,000 cases** each year
  - 4-5 hrs to sift through mail each day
  - Triaged, followed-up, and closed
- 13.5 dedicated staff members
- Reported to IDPH and CDC

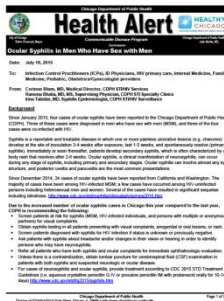
# Collaborations





# Reciprocal Reporting

- Case Reporting
  - Morbidity
  - Laboratory
- Provider Visits
  - Report Card
  - Population Metrics
- Communication via HAN



Above all else show the data.

Edward Tufte

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# Understanding the ‘why’ behind the ‘how many’

- Barriers to health care, medication, etc. for:
  - NH Black females and MSM
  - Individuals living in specific community areas
- Repeat infection
  - Behavioral characteristics
  - Co-morbidities
- Innovative prevention efforts surrounding young Chicagoans

# Final Take-aways

- City of Chicago has high morbidities of STIs
  - NH Blacks have the highest burden across all STIs
    - Females
    - MSM
  - Individuals < 30 yrs of age account for the majority of reported STIs in Chicago
- Case reporting is crucial in obtaining accurate information and ensuring all patients are receiving appropriate care
- Provider and community partnerships to explain the ‘why’ behind the surveillance data

# Thank You & Questions?



## Thanks to:

### **STI Surveillance Team**

Tammy Rutledge  
Gabrielle Henley  
Darletta Smith  
Maria Molina  
Bertha Spearman  
Maria Vega  
Antonio Andres  
Charlayne Guy  
Regina Green  
Karen Canada  
Alison Scot  
Joanne Davenport

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