## Syphilis Progression and Complications in Adults

**Exposure to pathogen** 

Primary incubation-21
Days (range 3-90 days)

Primary Syphilis (Infectious)
Chancre
Regional lymphadenopathy

Secondary incubation 4-10 weeks

**Secondary Syphilis (Infectious)** 

Rash Alopecia Gumma lesions Malaise Condylomata lata Lymphadenopathy

<1 year duration after infection

**Early Latent Syphilis - Early Non- Primary, Non-Secondary (Infectious)**Asymptomatic

Infections >1 year of duration

Late Latent Syphilis, or Syphilis of Unknown Duration (Infectious Vertically)
Asymptomatic

Neurosyphilis
Invasion of *T. pallidum*into the central
nervous system *Can occur at any stage* 

Typical progression of disease if left untreated

**Early Neurosyphilis** 

Roughly 5% of early syphilis cases, risk increases with HIV infection, may be asymptomatic

May present with severe headache, confusion, nausea, vomiting, stiff neck, deafness, or optic neuritis.

### **Categories:**

- Syphilitic meningitis
- Ocular syphilis
- Otosyphilis



All cases of syphilis with neurological manifestations must be staged.

Rarely fatal in modern times, but can be damaging.

Late Neurosyphilis ~4-7 Years
Meningovasicular syphilis

~10-20 Years General Paresis Progressive dementia

~15-25 Years (Average of 20 years) Tabes Dorsalis

# Tertiary Syphilis (Non-Infectious) 15 years after infection

Gummatous Syphilis (skin, bone, liver, nasal septum/hard palate perforation)

### 10-30 years after infection

90% asymptomatic 10% have angina Also noted - aortic regurgitation, coronary artery stenosis, aneurysm

Cardiovascular Syphilis (Aortitis)

#### References:

Control of Communicable Diseases Manual (CCDM), 20th Edition, Centers for Disease Control and Prevention (CDC), 2015.

Marra, Christina M. Neurosyphilis Up to Date, August 29, 2017.

Chart adapted from: Kent, Molly E. Reexamining Syphilis: An Update on Epidemiology, Clinical Manifestations, and Management Annals of Pharmacotherapy, 2008.

