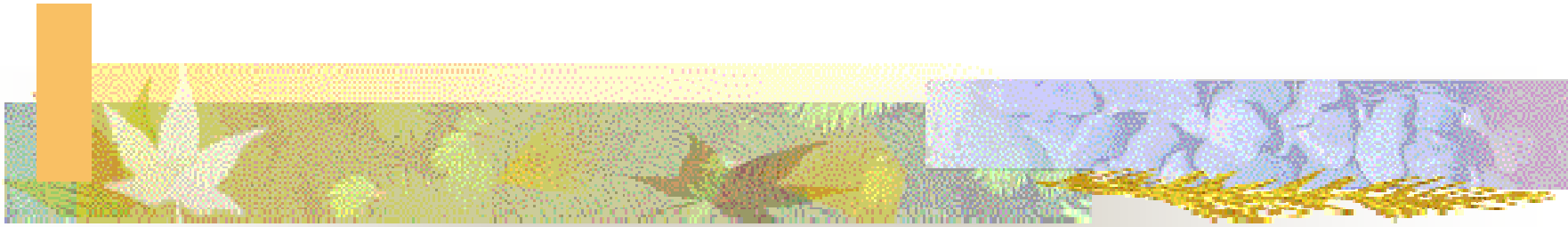


# **Saving Pregnancies and Newborn Babies From Syphilis**



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Reproductive Health Research Unit

(South Africa) January 2002



# Overview

- Syphilis is a preventable & curable disease
- 15% of antenatal women have syphilis
- Syphilis causes 1 out of 10 stillbirths
- Testing of antenatal care is widely available
- Policy recommended treatment is being followed by health providers



# Problem Statement

Syphilis treatment, compliance, and partner tracing remains a problem.



# Objective

- To document the program of providing syphilis screening and management in South Africa:
  - Preparedness of program
  - Effectiveness of management strategy
  - Availability of drugs



# Methodology

- Reproductive Health Research Unit conducted a case study in 2000
- Site: KwaZulu-Natal, 9 clinics and 2 hospitals
- Methods used: inventories, observations, interviews, and others



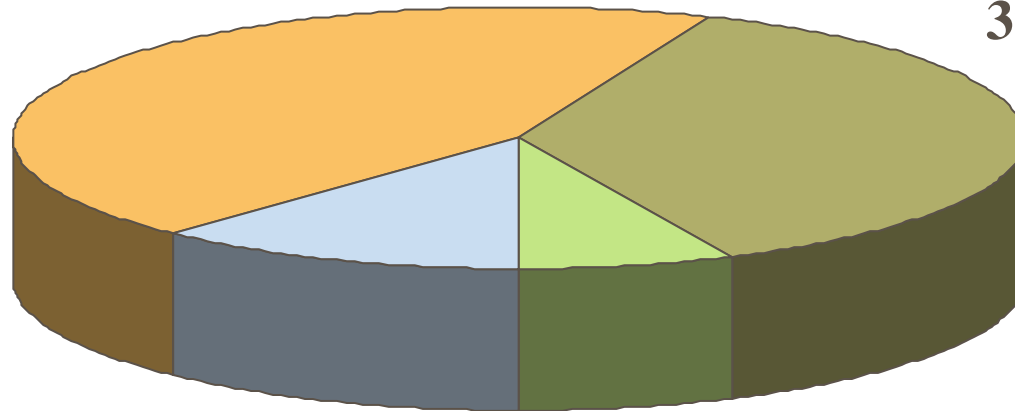
# Key Findings

- Five out of nine facilities had the guidelines
- All antenatal clients were screened
- Blood analysis was done off-site
- Blood results turn-around was 4-6 weeks
- One penicillin injection given weekly for 3 weeks
- Drugs were often out of stock

# Timing of First Antenatal Visit

4-5 months  
44%

6-7 months  
37%



3 months  
12%

8-9 months  
7%

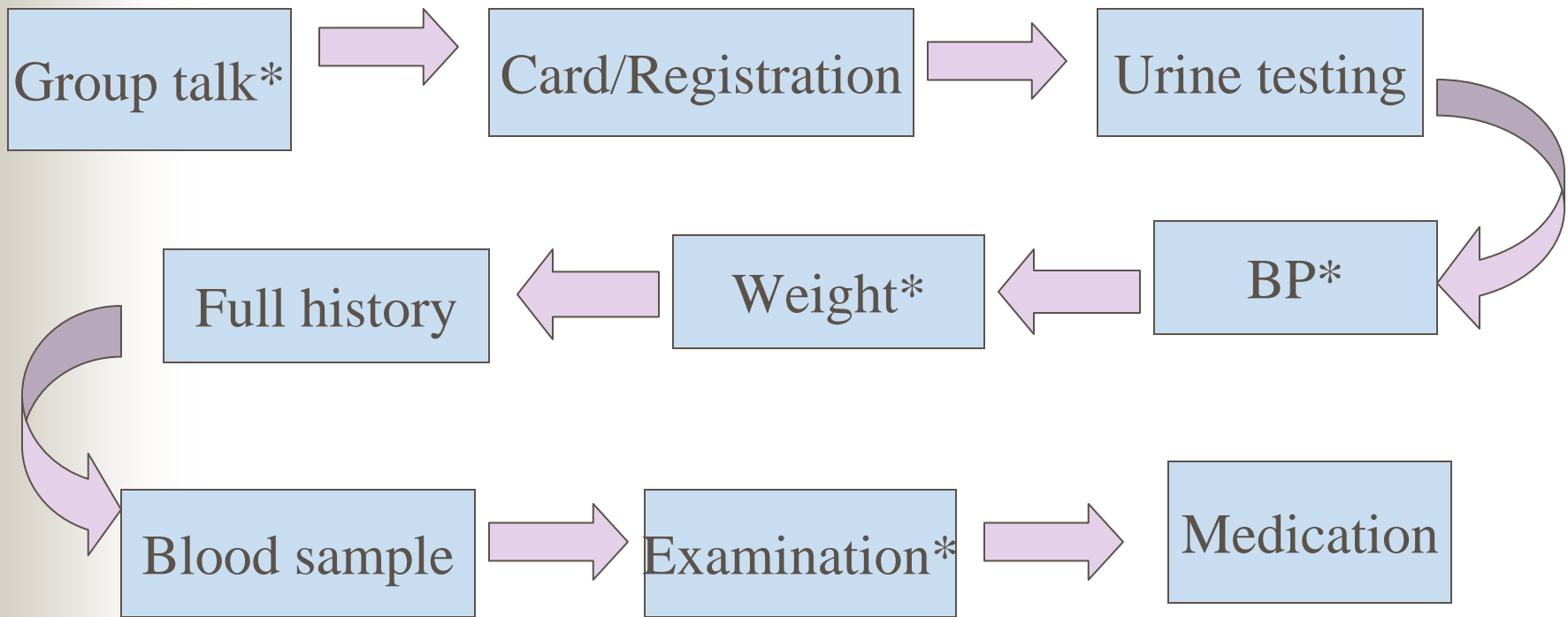


# Antenatal Care Services

- Clinics opened at 07.00
- Clients come at least 2-3 hours before
- Clients spend 4-6 hours for 20 minutes first visit and 10 minutes repeat visit
- Each client can have up to 8 contacts per visit

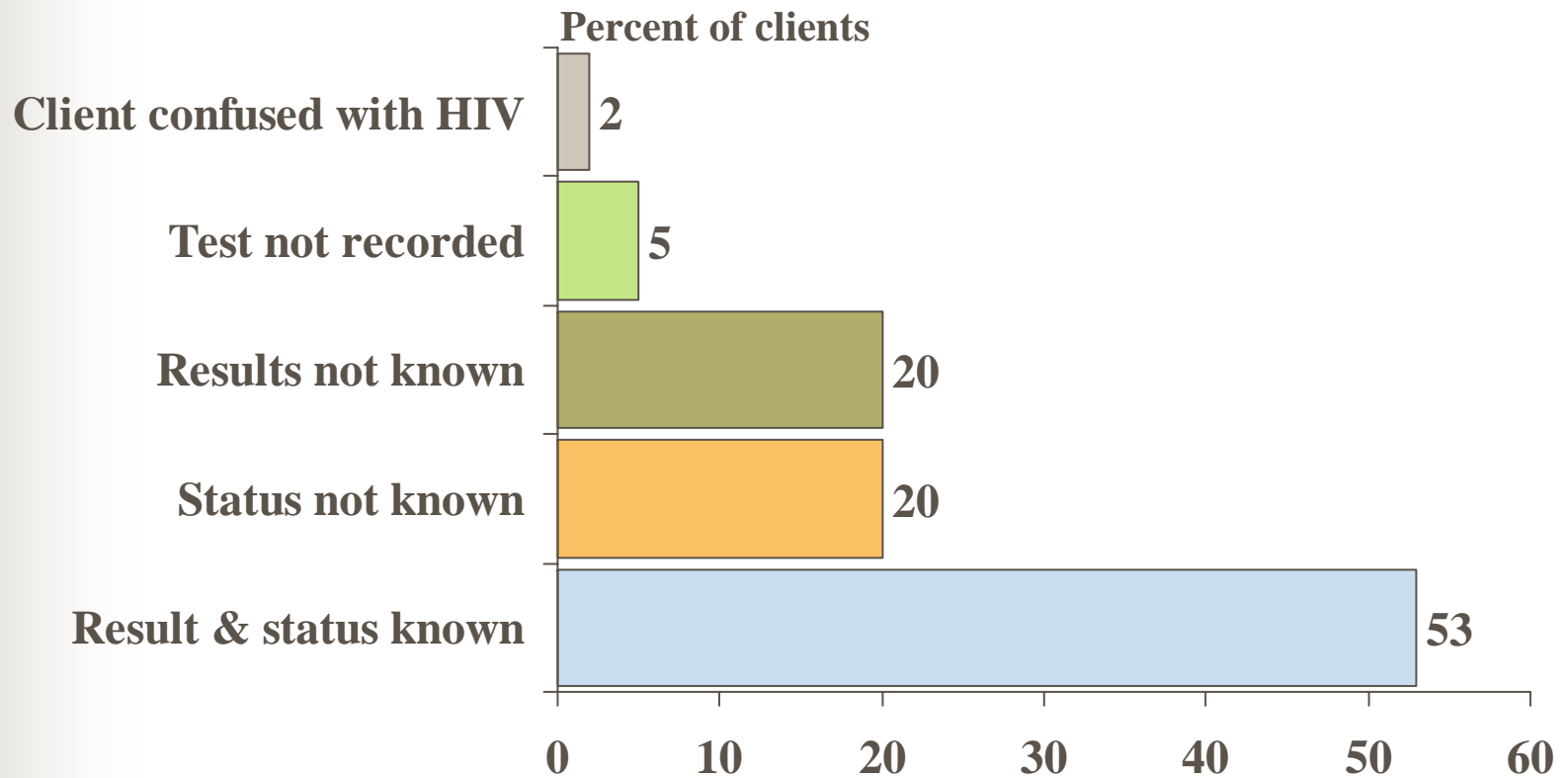


# Routine Procedure for Antenatal Care



\*Procedure repeated at subsequent visits

# Knowledge of Syphilis Status





# Partner Tracing & Treatment

- *“Now that you ask...I have worked for 15 years here, I do not remember treating a man said to be a partner,”* said one health provider
- *“I would like to see on-site testing being done, women start ANC late and end up delivering before treatment, let alone tracing partners,”* said one health provider



# Policy Implications

- Pregnant women start ANC late
- Pregnant women spend more time and get minimal quality of service
- Analysis of blood off-site causes a delay in commencing treatment
- Partners are not treated for syphilis



# Recommendations

- Initiate programmes for motivating women to start ANC in their first 3 months
- Provide more resources for syphilis screening and treatment
- Review the following:
  - Rendering of ANC services
  - Partner tracing



# Summary

- Available programme can cure and even prevent syphilis, provided that:
  - Testing is done on-site
  - Treatment begins on the first ANC visit
  - Sufficient drugs are provided
  - Partners are involved during ANC services