INFOGRAPHIC

Infectious syphilis and congenital syphilis in Canada, 2022*

There were 13,953 cases of infectious syphilis** reported in 2022, corresponding to a rate of 36.1 cases per 100,000 population

1% rate increase since 2021
109% rate increase since 2018

Total reported cases and rates include reported cases among males, females, gbMSM\(\dagger\), and others of other or unknown sex.

Number of reported cases and rates of infectious syphilis by sex in Canada, from 2016 to 2022

Cases of infectious syphilis in 2022

**Infectious syphilis includes the primary, secondary, early latent and infectious neurosyphilis (less than one year). Syphilis is transmissible. Confirmed early congenital syphilis is defined as a laboratory confirmation of infection by Treponema pallidum.**

\(\dagger\) gbMSM: Gay, bisexual, and other men who have sex with men. Note that only 8 PTs (B.C., Alta., Sask., Ont., N.B., N.S., N.U., and N.W.T.) are included in calculations of gbMSM proportions. Data on other priority populations are not currently available.

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In 2022, there were at least 246 reported cases of congenital syphilis, which includes confirmed early congenital syphilis, probable early congenital syphilis, syphilitic stillbirth, and unknown-stage congenital syphilis.

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Number of reported cases and rates of confirmed early congenital syphilis and rates among females aged 15–39 years in Canada, from 2016 to 2022

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Survey of the impact of COVID-19 on the ability to provide STBBI prevention, testing and treatment including harm reduction services in Canada. Public Health Agency of Canada, Centre for Communicable Diseases and Infection Control. 2022.

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Infectious syphilis and congenital syphilis in Canada, 2022*

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There were 117 cases of confirmed early congenital syphilis** reported in 2022, corresponding to a rate of 31.7 cases per 100,000 live births

7% rate increase since 2021
599% rate increase since 2018

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Confirmed early congenital syphilis cases and rates\(\ddagger\) by province and territory in 2022

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Social and structural determinants of health and health inequities play a role in the inequitable occurrence of syphilis across different populations.\(\ddagger\)

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Syphilis screening and timely treatment are essential to prevent transmission and complications. First PHAC’s recently updated syphilis screening recommendations in the STBBI Guides for Health Professionals.

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1. Data were directly obtained from provincial and territorial PHS through both manual and electronic surveillance systems for syphilis. Due to periodic updates of surveillance data, sites and counts may change over time. In cases of discrepancy between data reporting PHAC and those reported by individual PHS, PT data should take precedence. When a discrepancy persists, data from the reporting PHAC will be used.
3. Consideration of inequitable occurrence of syphilis across different populations.
4. Data on other priority populations are not currently available.
5. Data were directly obtained from provincial and territorial PHS through both manual and electronic surveillance systems for syphilis. Due to periodic updates of surveillance data, sites and counts may change over time. In cases of discrepancy between data reporting PHAC and those reported by individual PHS, PT data should take precedence. When a discrepancy persists, data from the reporting PHAC will be used.
7. Consideration of inequitable occurrence of syphilis across different populations.