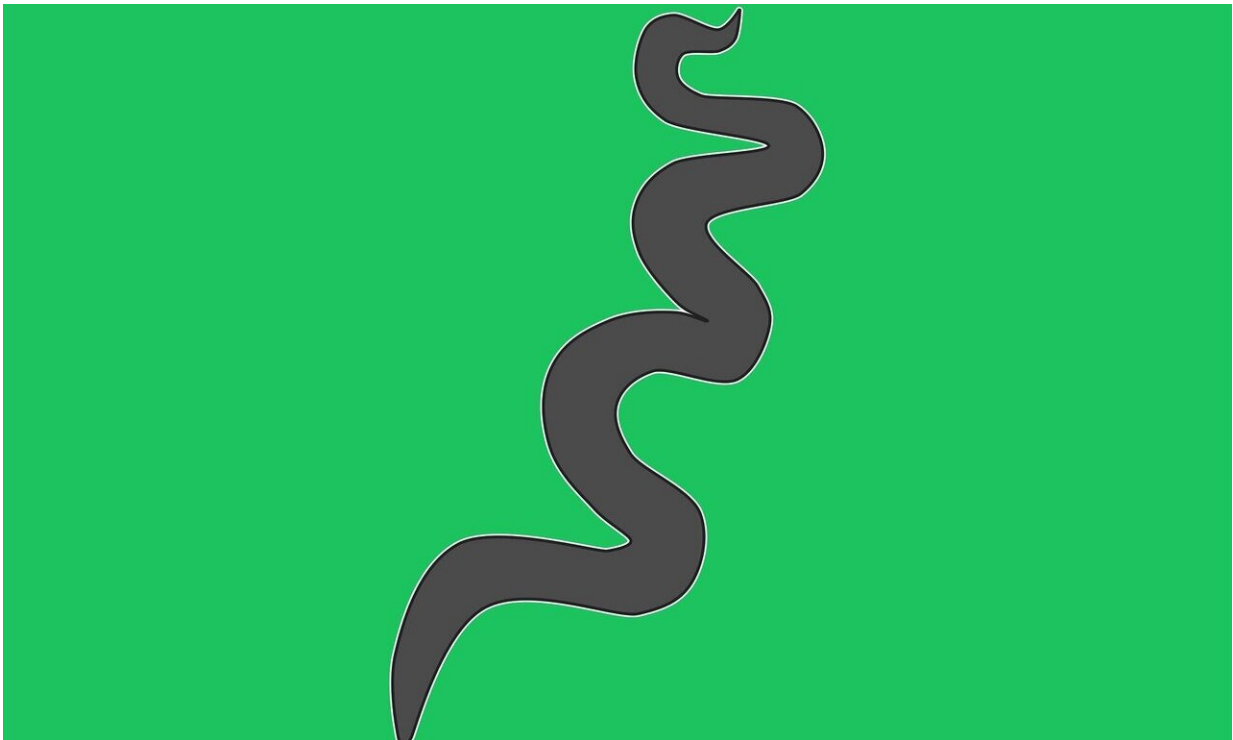


Self-testing could reduce the global impact of syphilis, study finds

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Self-testing for syphilis could reduce the sexually transmissible infection's global impact, a Monash University-led study has found.

Syphilis continues to be a major health issue, with an estimated 7 million people infected world-wide each year.

Published in *The Lancet Public Health*, the global systematic review found [syphilis](#) self-testing was acceptable and feasible to implement. Like self-testing for COVID or HIV, syphilis self-tests allow an individual to test themselves at home, without the need to visit a health facility.

The world-first synthesis of evidence will inform future World Health Organization (WHO) recommendations on syphilis self-testing.

Senior author and Melbourne Sexual Health Center physician, Monash University Central Clinical School Associate Professor Jason Ong, said self-testing could help improve testing rates and earlier treatment.

"The COVID-19 pandemic has shown us the value of self-tests," Associate Professor Ong said. "Syphilis self-testing is a key that unlocks the door to widespread testing and treatment, much like self-testing has done for HIV, Hepatitis C and COVID-19.

"If we can improve access to self-testing for syphilis, we can also have a major impact on the current syphilis epidemic in Australia and beyond. This has global policy implications for countries to license and allow syphilis self-testing kits to be accessible, so that populations who are less likely to attend facilities to test are able to test themselves privately, accurately and at their convenience."

The study found compelling evidence that self-testing across many different diseases, including HIV and COVID-19, is safe, acceptable and effective to implement, and can be cost-effective, particularly among those unreachable by existing services including key populations. The [potential benefits](#) from syphilis self-testing outweighed any potential risks.

"Early detection and treatment access are critical to controlling the

syphilis pandemic," the researchers found. "SST (syphilis self-testing) can complement existing testing services, as further decentralization of syphilis testing allows more underserved populations to access testing and care more easily."

"Countries should consider incorporating the offer of SST as part of a package of self-testing and self-care programs. Future implementation research, especially on the sensitivity and specificity of SST compared to facility-based testing, would strengthen the [evidence base](#) and help optimize service delivery and national strategic planning."

The report found single syphilis, and dual HIV/syphilis rapid tests had been an important innovation in many settings and had potential to increase syphilis testing and treatment coverage, particularly during pregnancy as syphilis can harm unborn babies.

Professor Christopher Fairley, the Director of Melbourne Sexual Health Center, emphasized the importance of testing.

"The case for more testing and treatment is overwhelming; syphilis cases fell 98% when penicillin was discovered," Professor Fairley said. "How you test doesn't matter; you just need to test and [self-testing](#), while a critical component of testing overall, remains substantially underused. Governments need to make it widely available."

More information: Janet M Towns et al, The role of syphilis self-testing as an additional syphilis testing approach in key populations: a systematic review and meta-analysis, *The Lancet Public Health* (2023). [DOI: 10.1016/S2468-2667\(23\)00128-7](https://doi.org/10.1016/S2468-2667(23)00128-7)

Provided by Monash University

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