Update on management of syphilis in pregnancy
BASHH CEG Statement  August 2011

Following feedback from colleagues in Obstetrics, the BASHH Clinical Effectiveness Group sought to revise the 2008 guidance on the management of pregnant women diagnosed with syphilis. This work has been undertaken with the British Fetal Medicine Society. The following guidance replaces the final paragraph in the section titled “Management in pregnancy: General considerations” in the UK National Guidelines on the Management of Syphilis 2008 International Journal of STD & AIDS 2008; 19: 729–740:

“Management should be in close liaison with obstetric, midwifery and paediatric colleagues. If appropriate, the obstetrician could discuss the case with a fetal medicine unit for further advice and management of a suspected affected fetus.
In pregnancy the rate of the Jarisch-Herxheimer reaction is the same as in the non-pregnant, circa 40%, based on small series (Klein 1990, Myles 1998). In addition, the pregnant woman may experience uterine contractions (circa 40-65%) which resolve within 24 hours. The uterine contractions appear to occur secondary to the development of fever. Fetal heart rate decelerations are also reported occurring in about 40%, concomitant with maternal fever, and resolve within 24 hours of maternal penicillin treatment. In one series no fetuses required delivery because of fetal heart rate abnormalities (Myles 1998).
There may be a theoretical increased risk, therefore, of spontaneous and iatrogenic preterm delivery and fetal demise associated with the Jarisch-Herxheimer reaction, though these complications are also associated with maternal and fetal syphilis infection.
Management of the Jarisch-Herxheimer reaction in pregnancy should be supportive as in the non-pregnant woman with antipyretics. There is no evidence that administration of high dose oral prednisolone will reduce the occurrence of uterine contractions or fetal heart rate abnormalities.”

Dr Margaret Kingston
Consultant Physician in Genitourinary Medicine, Manchester Royal Infirmary, on behalf of the British Association of Sexual Health and HIV.

Professor Fionnuala McAuliffe
Professor of Obstetrics & Gynaecology, National Maternity Hospital Dublin, on behalf of the British Maternal and Fetal Medicine Society