



# Syphilis

Key Findings from the Syphilis Awareness, Knowledge and Action (SAKA) survey of MSM in Ireland

## SAKA 2009 SURVEY

During the Dublin LGBT Pride concert on 25 June 2009, men were approached and invited to participate in a short, self-completing survey. Outreach workers also recruited men in various other venues, including bars, clubs, saunas and LGBT community centres in Dublin and Cork over a six-week period following the Dublin LGBT Pride event. The questionnaire was designed to measure the awareness, knowledge, and action (testing) in relation to syphilis among the MSM population. Questions were also asked to determine the reach of the all-Ireland Syphilis Awareness Campaign. A total of 543 questionnaires were completed and 27 of these were excluded from further analysis. Of the 516 valid surveys, 80% were collected in Dublin and 20% were collected in Cork. 88% respondents identifying as gay, 10% as bisexual, and 2% as other. The age profile of the sample represents a younger population with almost half (46%) under the age of 30 years and approximately one-quarter (24%) aged 24 years or less.

## AWARENESS

	2001		2009	
	n	%	n	%
There is an increase of syphilis among men who have sex with men	741	85.2	345	67.5
Are you aware that you can catch syphilis in the following way:				
Oral sex	669	79.0	369	72.2
Anal sex	754	89.5	449	88.9
Vaginal sex	641	81.0	383	80.3
Kissing	385	47.5	178	36.6
Condoms can reduce the chances of catching syphilis	721	83.7	446	88.3

Compared to the results from the 2001 questionnaire, the awareness level of the syphilis epidemic among MSM is significantly lower. However, this may be predominately due to the younger men who were not aware of the outbreak in 2000/2001. The results also show that awareness of oral sex and kissing as transmission routes for syphilis is low, requiring further awareness among MSM. With the strong association of unprotected oral sex with syphilis transmission, this is a particularly important message to disseminate, especially as oral sex is seen as a low risk activity for HIV transmission. The results from the 2009 survey highlight that awareness of condoms to prevent transmission is high among MSM and greater than that seen in 2001. However, there is a need to raise awareness that men are not fully protected, as transmission can occur through contact with any infected area.

## KNOWLEDGE

	2001		2009	
	n	%	n	%
You can have syphilis and not show any symptoms	651	76.1	367	72.4
You need a blood test to check if you have syphilis	641	75.1	351	69.8
Syphilis can take 3 months to show up in the blood	450	52.9	243	48.4
If positive, syphilis is easy to treat with antibiotics	633	74.6	348	69.7
If treated for syphilis previously, you can be re-infected	463	58.1	296	59.4

Approximately 70% of respondents had knowledge that an individual can be infected with syphilis and not show symptoms, that testing for syphilis requires a blood test, and that syphilis can be easily treated with antibiotics. However, the sample demonstrated a lower level of knowledge about the window period for reliable test results and the possibility for re-infection if infected with syphilis previously. In comparison to the 2001 survey, an overall decrease in knowledge was observed with a significant decrease in knowledge that testing for syphilis requires a blood test and that syphilis can be easily treated with antibiotics. These represent the knowledge gaps that need to be further communicated to increase the knowledge level of syphilis among MSM. Overall, lower than average knowledge of all five statements regarding syphilis was reported among men aged 19 years and younger, and aged 25-29, non-gay identified MSM, men who resided outside of a city, men who had not tested for syphilis, and those who did not indicate exposure to the syphilis campaign.

## ACTION

	2001		2009	
	n	%	n	%
Have you had a blood test for syphilis?	413	47.3	286	58.8
Are you intending to test (or retest) soon?	410	57.5	256	53.9

	n	%
When did you test?		
Within last year	165	63.8
1-2 years ago	40	15.7
Over 2 years ago	56	23.3
Where did you test?		
Gay Men's Health Service	119	43.1
Private/GP	56	20.3
St. James's Hospital (GUIDE)	42	15.2
Mater Hospital	9	3.3
Onsite Testing	6	2.2
Other	44	15.9
Are you aware you may need to re-test for syphilis after 3 months?	155	58.3



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The level of syphilis testing among MSM has increased since the survey in 2001, however further outreach is required among younger men as well as non-gay identified MSM. This study also showed a lower level of testing among MSM in Cork, possibly representing a need for increased availability and/or accessibility of STI testing services. Although the majority of men had received a blood test for syphilis in the previous 12 months, retesting needs to be further promoted especially to those most at risk to syphilis infection. Due to the window period for syphilis antibodies to appear in the blood, testing is recommended once or twice per year. To increase the level of testing among MSM, further interventions need to be implemented including additional on-site testing programmes.

## REACH

	2009	
	n	%
Exposure to any of the syphilis campaign materials	384	74.4
Indicate if you have seen/read the following publications:		
Syphilis adverts in GCN	335	87.2
Syphilis posters in saunas	178	46.4
Syphilis leaflet	279	72.7
Syphilis banner on website	178	46.4
Do you know you can get syphilis information in 9 languages on GHN website?	97	21.2

The results highlighted that approximately three-quarters of the sample were exposed to the all-Ireland Syphilis Awareness Campaign. Respondents who identified exposure to the campaign had a higher awareness of the epidemic and transmission routes, had an overall higher knowledge of syphilis infection, and had higher testing rates. As the adverts in GCN were the most widely seen, producing a series of adverts and posters with a single short message to address knowledge gaps may be quite effective in reaching a majority of MSM. However, there is also a need to further create different and innovative strategies to target men under the age of 30 and men who do not identify as gay, as these groups were least likely to indicate exposure to the campaign. This campaign also aimed to reach those whose first language may not be English, which needs to be further promoted especially among those not born in Ireland.

## RECOMMENDATIONS

Although incidence is not at the same levels seen at the peak of the outbreak in 2001, syphilis remains a major public health concern among MSM due to the serious complications caused by untreated syphilis and the associated risk of HIV transmission. The results of this study identified a number of a key messages and additional health promotion needs of the MSM population in relation to syphilis. This includes targeted interventions for younger men under the age of 25 years and non-gay identified MSM, as these groups of MSM exhibited the lowest level of awareness and knowledge of syphilis and were the least likely to test. Other studies have also highlighted the need for targeting of HIV positive MSM, as they are disproportionately affected by syphilis. With the high prevalence of unprotected oral sex among MSM and the strong association with syphilis infection, there is a need to further communicate this risk and the possibility of HIV co-infection. As the number of MSM who have received a blood test for syphilis increases, it is also necessary to further promote the need for sexually active MSM to test at least once every 12 months, especially those who are most at risk of syphilis infection. This survey also highlighted the vast exposure of the all-Ireland syphilis awareness campaign and provided evidence of the effectiveness of this campaign to raise the awareness and knowledge of syphilis among MSM. However, there is a need to design innovative strategies to reach MSM not exposed to such a campaign and to ensure messages are reaching those most at risk.

