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Letter to the Editor

Number of ocular syphilis cases creeps to record high

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We would like to bring to the readers' attention the sharp increase in incidence of syphilis in Australia and the corresponding increase in the number of ocular syphilis presentations to the Royal Victorian Eye and Ear Hospital (RVEEH) over the past 10 years.

The incidence of syphilis notifications to the national notifiable disease surveillance system has tripled in the past 10 years in Australia, from approximately 4.3 per 100,000 in 2006 to 13.4 per 100,000 in 2016.¹ We report a corresponding increase in ocular syphilis cases in RVEEH over the same period (Figure 1). Our internal audit has shown an increase from 2 cases per year in 2006 to 9 cases in 2016. This is out of proportion to population growth, which increased from 5.13 million in 2006 to 5.94 million in 2016. The estimated prevalence rate of ocular syphilis among syphilis cases is estimated to be 0.6%.²

Ocular syphilis with its varied presentations (Figure 2), has been previously described.^{3,4} In light of the current syphilis epidemic in Australia, we would like to remind the ophthalmic community that we will likely continue to see increasing numbers of ocular syphilis cases and thus a high index of suspicion is needed. We recommend that ophthalmologists routinely test for syphilis in newly diagnosed uveitis cases, take a sexual history to identify the high risk group of men who have sex with men, and also test for HIV in confirmed cases of syphilis, given the high rates of co-infection.²

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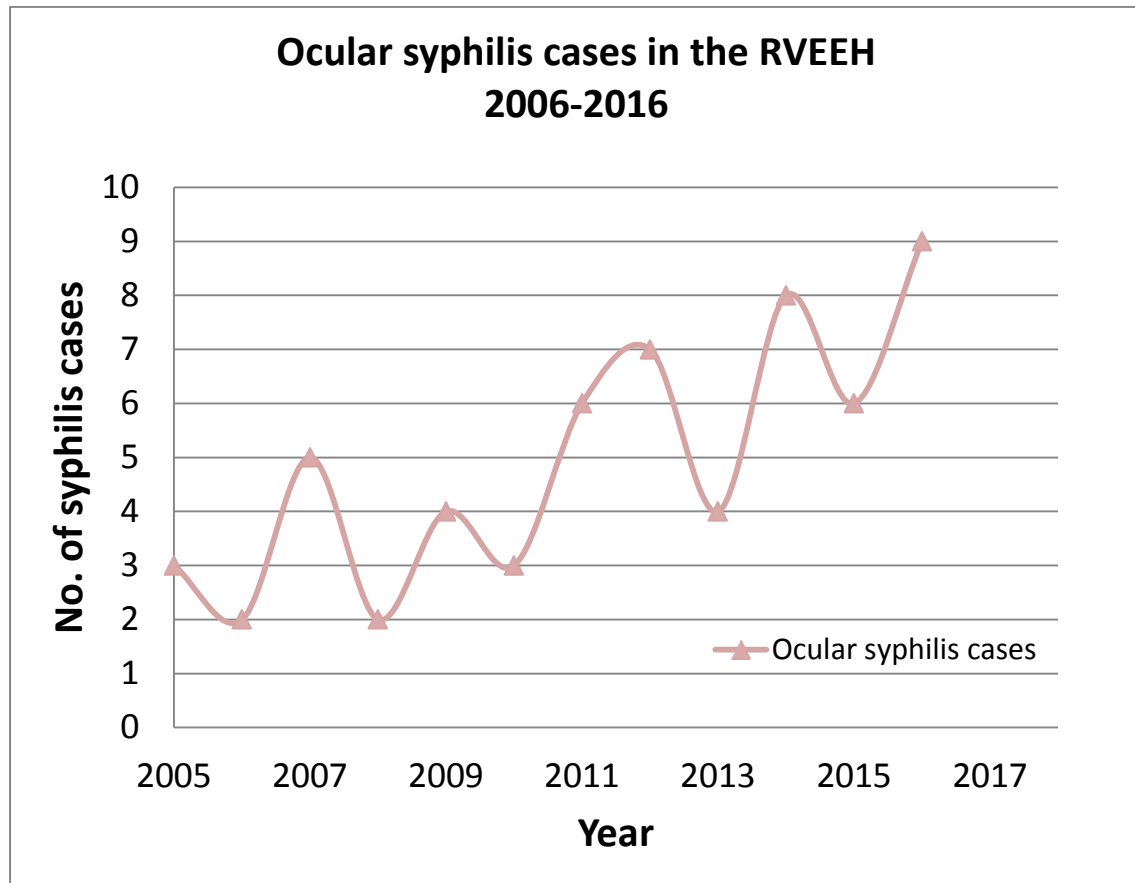


Figure 1: ocular syphilis cases presented the RVEEH over 10 years

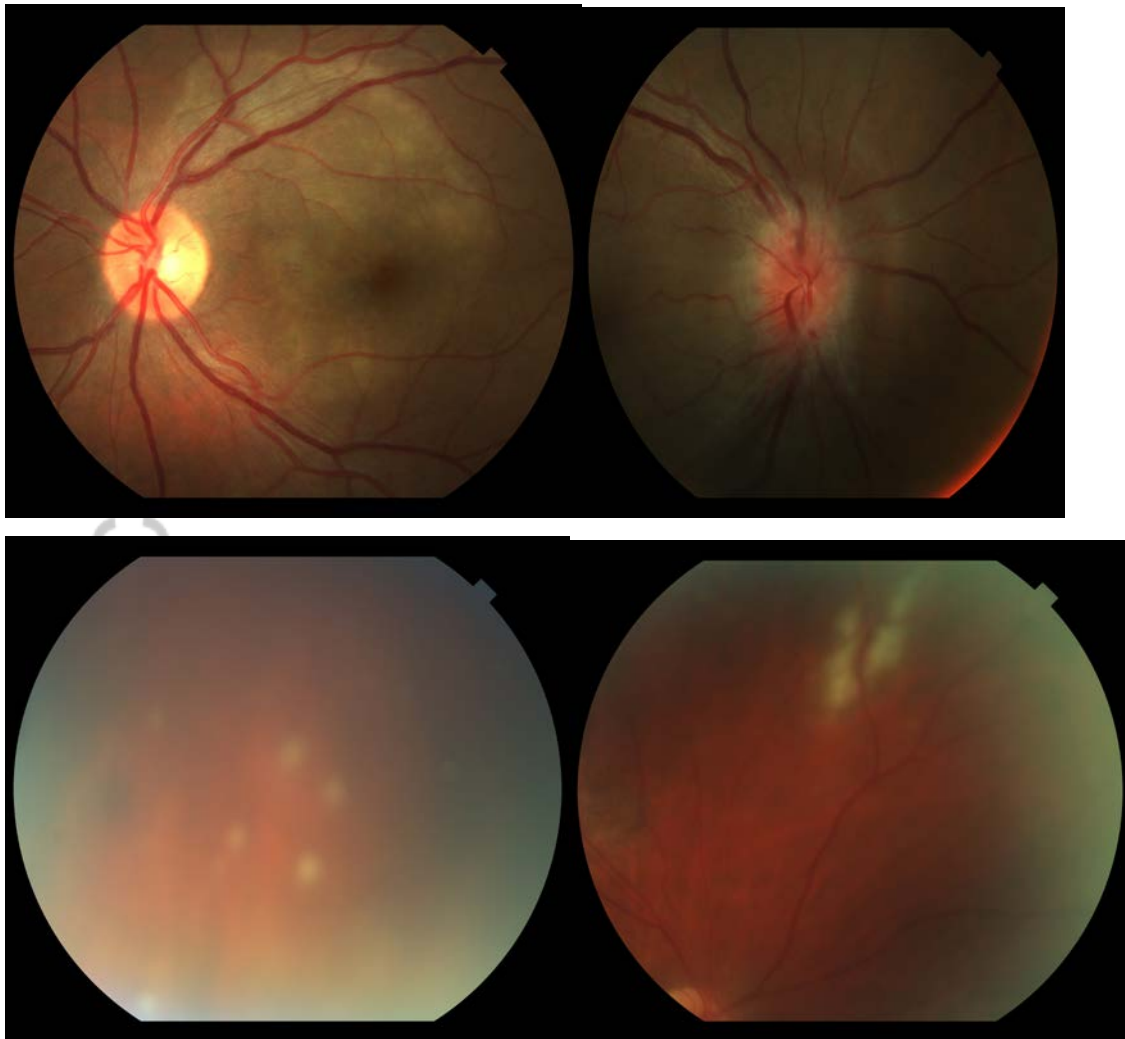


Figure 2: Examples of syphilis as the great masquerade: posterior placoid chorioretinitis (top left); disc swelling (top right); punctate inner retinitis (bottom left); perivascular retinitis (bottom right).