



Syphilis Management Training

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Cutaneous Manifestation of syphilis

- Syphilis is caused by spirochete, *Treponema pallidum*.
- It is a common STI seen at clinics and at dermatology outpatient departments.
- Early clinical presentations must be identified and treated to avoid late manifestations and congenital infections.
- Syphilis is separated into three main clinical stages, namely, primary, secondary and tertiary.
- The great “mimicker”



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Primary syphilis

- The incubation period varies from 10 days to 10 weeks (average of 21 days), although it can be longer.
- The typical lesion that develops initially is called the Hunterian ulcer. It is usually a **single, painless and fairly shallow** ulcer that starts as an indurated papule.
- It commonly occurs on the foreskin, coronal sulcus, vulva, urethra and cervix.
- About 5% of cases present extra-genitally, affecting the lips, oral mucosa or rarely on the trunk.
- **The ulcer will eventually spontaneously heal even without treatment.**



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Secondary syphilis

- Develops 2-8 weeks after primary manifestations. It is worth noting that some patients may not recall having had the primary phase.

Clinical presentation of secondary syphilis takes **many different forms**. The rash is usually generalised, and **asymptomatic** affecting the palms and soles.

- **Condylomata lata** is characterised by the development of flat, moist, warty papules and nodules, typically on the perineum in females.

- The secondary stage of syphilis can also present with **systemic manifestations that include arthritis, nephrotic syndrome, patchy alopecia, meningitis and other systems may be involved.**
- This stage can either resolve spontaneously or be marked with recurrent episodes of relapses.
- The majority of patients will recover fully and a period of latency will then begin where the patient remains asymptomatic for years before late syphilitic manifestations can occur.



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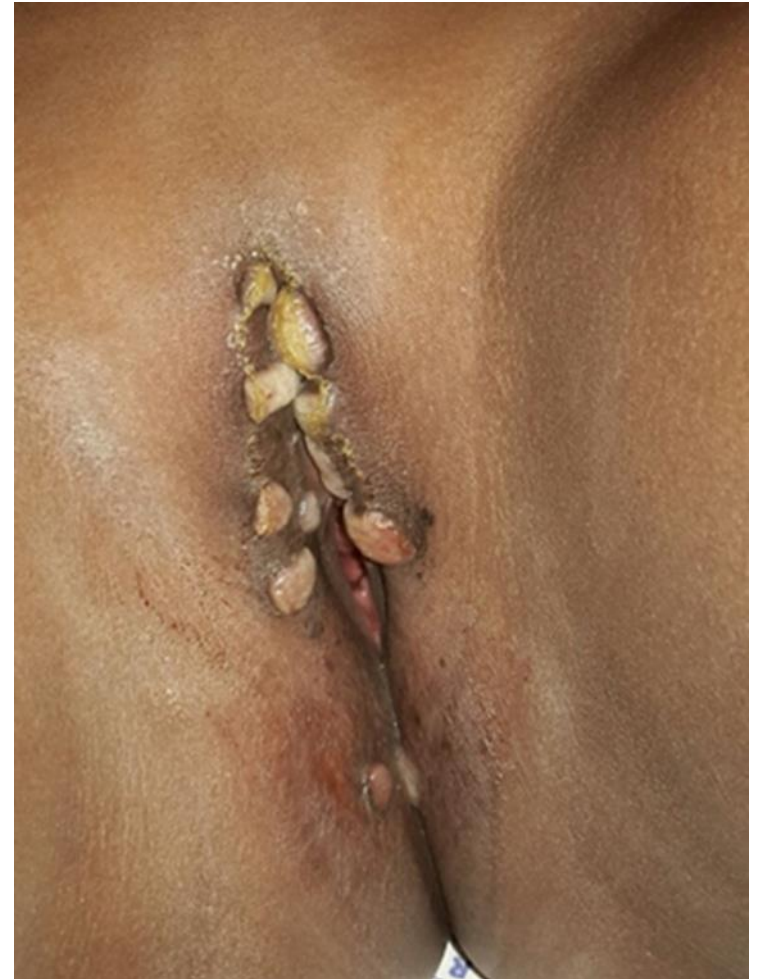




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• **Tertiary syphilis**

- Characterised by gumma formation, an indolent, granulomatous lesion which usually undergoes central degeneration.
- The central nervous system is commonly affected, presenting with papilloedema, meningitis, cranial nerve palsy, and ataxia.
- Pupils may be small and fail to react to light, while retaining the reaction.



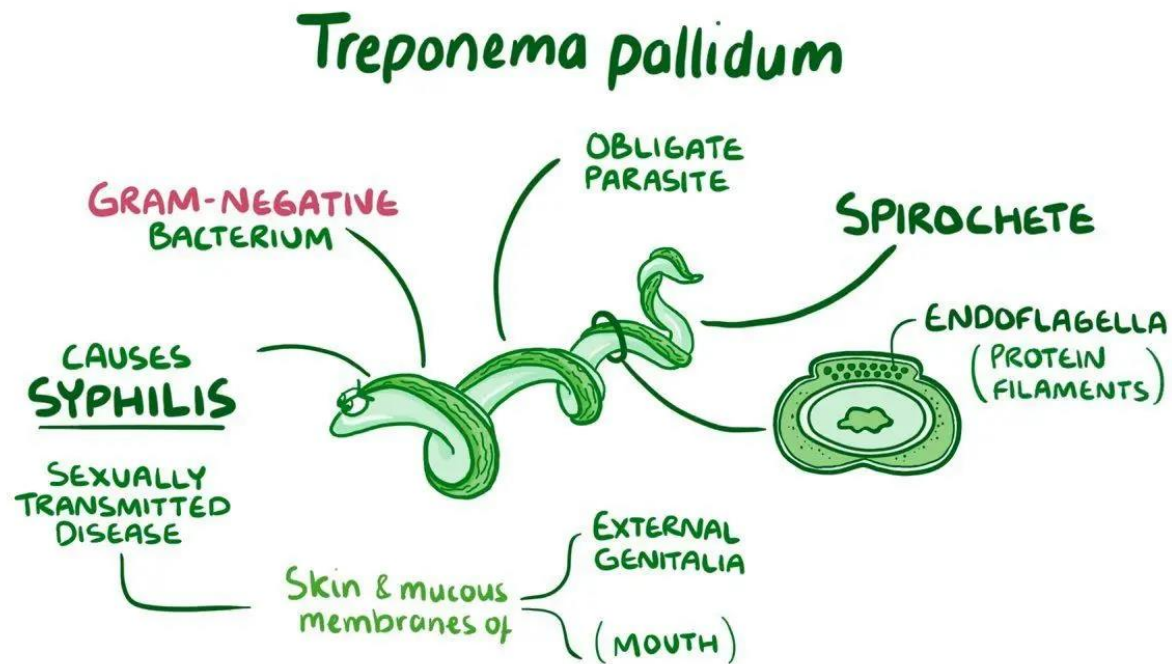
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• Thank you..



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