A downward trend in syphilis screening among pregnant women in Latin America and the Caribbean was observed since 2016, from 74% in 2016 to the lowest coverage in 2018 (60%), and minimal recovery in subsequent years, reaching 72% in 2021. The decrease comes at the expense primarily of Latin America, where coverage of syphilis screening among pregnant women decreased to 57% in 2018, rising to 70% in 2021. The Caribbean region maintained higher syphilis screening coverage, reaching 94% in 2019, 2020 and 2021. Nonetheless, it is not entirely clear how the COVID-19 might have impacted this indicator, as mobility restrictions and disruptions in health services may have reduced the number of pregnant women attending antenatal care, consequently overestimating national testing coverages in 2020 and 2021. Between 2018 and 2021, countries reporting reductions in the coverage of syphilis testing among pregnant women include Argentina with a 5% reduction, Bahamas (−11%), El Salvador (−30%) and Jamaica (−7%). In contrast, data show an increase in Colombia (†48%), Guatemala (†43%), Honduras (†21%), Nicaragua (†15%), Panama (†21%).

After years of stable coverage of appropriate syphilis treatment in Latin America and The Caribbean, the Region reported a drop to 83%, increasing to 88% in 2020 and 2021.

The prevalence of syphilis among tested pregnant women reported by 19 countries in 2021 varied from zero in a few Caribbean countries to 2.2% in Saint Lucia, 2.4% in Haiti and 5.5% in Argentina. Comparing data reported in 2015 or 2016, and in 2020 or 2021, it was observed changes in the prevalence of syphilis among tested pregnant women, indicating a clear increase in most countries. In this analysis, 18 out of 26 countries with available data showed an increase in syphilis prevalence among pregnant women between 2015-2016 and 2020-2021.
There were 30,071 cases of congenital syphilis reported by countries in the Americas in 2021, corresponding to an incidence rate of 2.1 per 1,000 live births. Brazil accounted for 73% of reported congenital syphilis cases in the Region in 2020 (N=22,065), with a national incidence rate of 7.7 congenital syphilis cases. Between 2018 and 2020, Brazil was able to reduce the number of congenital syphilis cases, and preliminary data from 2021 indicate that this reduction trend is decelerating. When analyzing the remaining 38 reporting countries in the Region, excluding Brazil, the number of cases and the incidence rate has been increasing (from 0.3 in 2016, to 0.7 per 1,000 live births in 2021).

Decreases in CS rates were observed in Argentina (−31%), Bolivia (−12%), Chile (−11%), El Salvador (−63%), Guatemala (−88%), Venezuela (−37%). Increasing CS incidence rates are observed in Colombia, Costa Rica, Paraguay, and Peru. Despite the low incidence rate of CS in North America, this region is also observing an increasing incidence rate in recent years. Canada reported an increase from 0.04 in 2018 to 0.14 in 2019, 2020 and 2021 (CS cases/1000lb) while the United States showed a consistent increase from 0.09 in 2013 to 0.54 in 2020 (CS cases/ 1000lb).

By 2021, eight countries in the Americas (Anguilla, Antigua and Barbuda, Bermuda, Cayman Islands, Cuba, Dominica, Montserrat, and Saint Kitts and Nevis) have been validated by WHO for the EMTCT of HIV and syphilis, and based on the evaluation of reported and estimated national impact and programmatic indicators countries with important progresses towards the elimination of MTCT of syphilis include: Aruba, The Bahamas, Barbados, Canada, Chile, El Salvador, Guatemala, Jamaica, Mexico, Nicaragua, Puerto Rico, Saint Vincent and the Grenadines, Trinidad and Tobago, Turks and Caicos, Virgin Islands (US), and Virgin Islands (UK). Saint Lucia, after years of very low incidence of congenital syphilis reported high incidence rate in 2020 (7.3) and 2021 (8.0). The Ministry of Health inform that this situation is a direct result of the impact of COVID-19 on health services, preventing access to antenatal care. Ecuador reported CS incidence rate of 0.7 cases per 1,000 live births in 2019, dropping to 0.2 in 2020, but soon increasing to 0.7 cases per 1,000 live births in 2021, indicating an apparent impact of the COVID-19 pandemic on access to screening and treatment services.

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