



# **METROPOLITAN HEALTH DISTRICT**

## **Sexually Transmitted Infections (STIs) in Bexar County**

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*2021 Surveillance Report*

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### ***Epidemiology Program***

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## Report Overview

This report describes cases reported to the City of San Antonio Metropolitan Health District Sexually Transmitted Infections (STIs) Control and Prevention Program from January 1 to December 31, 2021, as well as historical data. The 2021 Bexar County STI Surveillance Report presents data by date of diagnosis, not date of report, as in previous surveillance reports. Therefore, cases and case rates from 2005-2012 may differ slightly from those in STI Surveillance Reports that were published after 2012.

Population numbers used to calculate rates for 2011 data are from the National Center for Health Statistics [Estimates of the April 1, 2010 resident population of the United States (US), by county, single-year of age (0, 1, 2, ..., 85 years and over), bridged race, Hispanic origin, and sex], and were accessed through CDC Wonder system.

Population numbers used to calculate rates for 2011-2016 data are from the National Center for Health Statistics [Vintage 2017 postcensal estimates of the resident population of the United States April 1, 2011, July 1, 2010-July 1, 2017, by year, county, single-year of age (0, 1, 2, ..., 85 years and over), bridged race, Hispanic origin, and sex], and were accessed through CDC Wonder system.

STI/HIV cases and rates for 2017 and 2018 are from the Texas Department of State Health Services (DSHS) STD/HIV Program. Population numbers used to calculate rates for 2019 and 2021 are from the Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin: April 1, 2010 to July 1, 2021. Population numbers used to calculate rates for 2010-2021 data are from the U.S. Census Bureau that include estimates of the resident population of the United States from January 1, 2020 to December 31, 2021, by year, county, single-year of age (0, 1, 2, ..., 85 years and over), bridged race, Hispanic origin, and sex.

Data on gender identity is not standardized in the Texas STD surveillance system. The sex of persons represented in this data may or may not reflect their current gender identity. Metro Health is working with the Texas Department of State Health Services to improve data collection on this highly impacted population so that data on transgender people can be included in future reports.

Standard measures of disease frequency<sup>1</sup> were calculated for each condition, frequency, and rate (number of cases per 100,000 population). The following measures are calculated by condition to monitor trends over time (2011-2021):

- Case count and rate by year
- Rates by year and race/ethnicity
- Rates by year and age group
- Rate by year comparing Bexar County to Texas and US
- Geographic mapping of the rates by census tract with an overlay of the council districts

# 01 | Chlamydia

## Description and Background<sup>2,3</sup>

Chlamydia is a sexually transmitted infection (STI) caused by *Chlamydia trachomatis* bacterium. It can cause cervicitis and urethritis in women and proctitis and urethritis in men. Chlamydial infections in women can lead to serious consequences including pelvic inflammatory disease, tubal factor infertility, ectopic pregnancy, and chronic pelvic pain. Chlamydia is the most frequently reported bacterial STI in the United States (US). In 2021, 1,644,416 cases of chlamydia were reported to the Centers for Disease Control and Prevention (CDC) from 50 states and the District of Columbia. Many cases are not reported because most people with chlamydia are asymptomatic and do not seek testing. The cases that are reported are discovered primarily through regular screenings. In 2020, many clinics closed or restricted the number of in-clinic visits in response to the COVID-19 pandemic. The number of chlamydia cases reported, and rate of chlamydia, in 2020 in the US is much lower than in previous years.

## Impact and Risk<sup>3</sup>

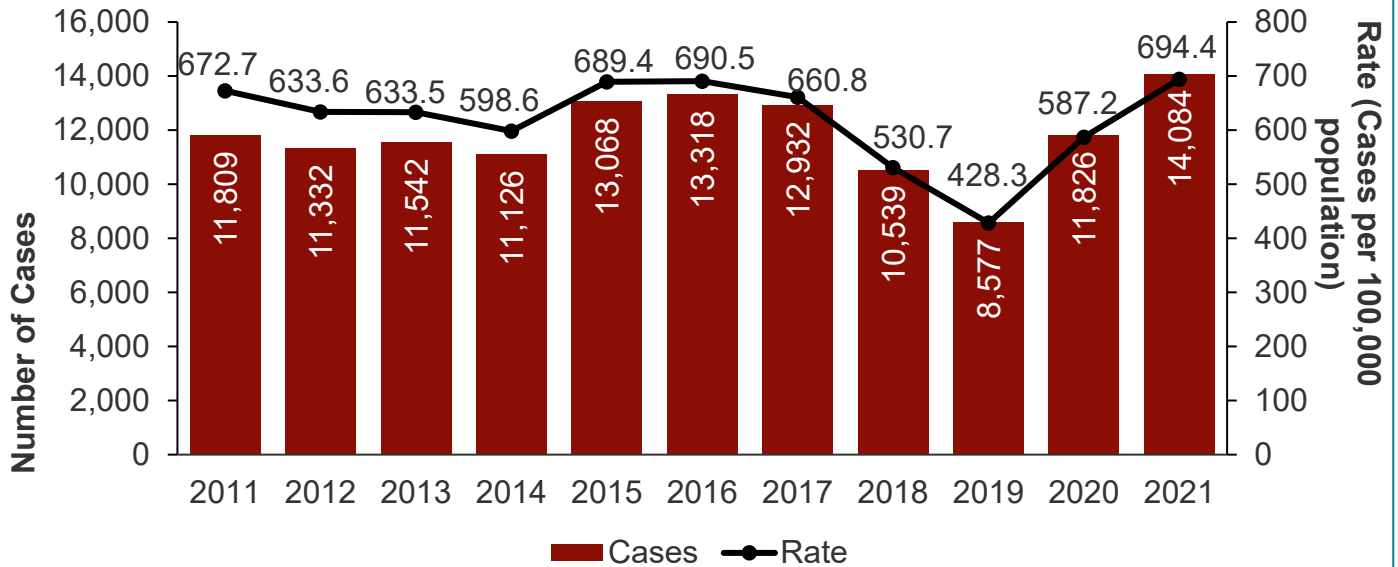
Chlamydia is common among young people. Nearly two-thirds of new chlamydia infections in the US occur in young person's 15-24 years of age. It is estimated that 1 in 20 sexually active females aged 14-24 years has chlamydia. Substantial racial/ethnic disparities in infection exist nationally, with prevalence among the non-Hispanic (NH) Black population at 5.6 times the prevalence among the NH White population. Men who have sex with men (MSM) are also at risk for chlamydial infection since chlamydia can be transmitted by oral or anal sex. Among MSM screened for rectal chlamydia infection, positivity has ranged from 3.0% to 10.5%. Among MSM screened for pharyngeal chlamydia infection, positivity has ranged from 0.5% to 2.3%.

## Chlamydia Screening and Treatment<sup>3</sup>

Because chlamydia is usually asymptomatic, screening is necessary to identify most infections. CDC recommends yearly chlamydia screening of all sexually active women aged 25 years or younger and older women with risk factors for infection (e.g., women who have a new or more than one sex partner). Pregnant women should be screened at their first prenatal care visit. Pregnant women under 25 years of age or at increased risk for chlamydia (e.g., women who have a new or more than one sex partner) should be screened again in their third trimester. Routine screening is not recommended for men. Screening of sexually active young men should be considered in clinical settings with a high prevalence of chlamydia (e.g., correctional facilities and STI clinics) when resources permit and do not hinder screening efforts in women. MSM who have receptive anal sex should be screened each year. Chlamydia can be easily cured with antibiotics. Latex male condoms, used consistently and correctly, can reduce the risk of getting or giving chlamydia. The surest way to avoid chlamydia is to abstain from vaginal, anal, and oral sex, or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected.

## Chlamydia in Bexar County

**Figure 1.** Cases and Rates of Chlamydia by Year of Diagnosis, Bexar County, 2011-2021



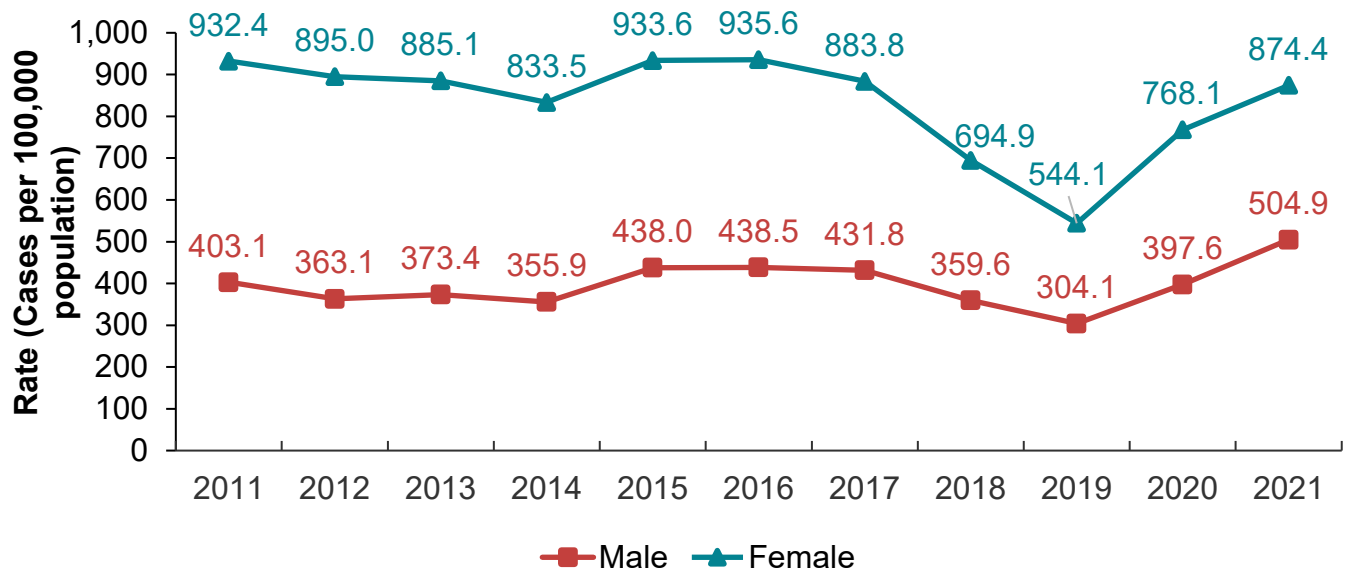
**Table 1.** Cases and Rates of Chlamydia by Year of Diagnosis, Bexar County, 2011-2021

Year	Cases	Rate
2011	11809	672.7
2012	11332	633.6
2013	11542	633.5
2014	11126	598.6
2015	13068	689.4
2016	13318	690.5
2017	12932	660.8
2018	10539	530.7
2019	8577	428.3
2020	11826	587.2
2021	14084	694.4

Figure 1 shows the cases and rates of Chlamydia in Bexar County from 2011-2021 (summarized in Table 1). Rates of chlamydia in 2019 (428.3) were the lowest seen in Bexar County in the last ten years. In fact, 2019 was the only year in the last decade where chlamydia rates in the county fell below the Texas and the US rates.

In 2021, there were 14,084 cases of chlamydia reported in Bexar County with a rate of 694.4 cases per 100,000 population. Compared to 2020 (587.2), the rate of chlamydia in 2021 (694.4) was 18.3% higher. Overall, the rate of chlamydia in Bexar County has increased over the last eleven years from 2011 (672.7) to 2021 (694.4) by 3.2%.

**Figure 2. Rates of Chlamydia by Gender, Bexar County, 2011-2021**



**Table 2. Cases and Rates of Chlamydia by Gender, Bexar County, 2011-2021**

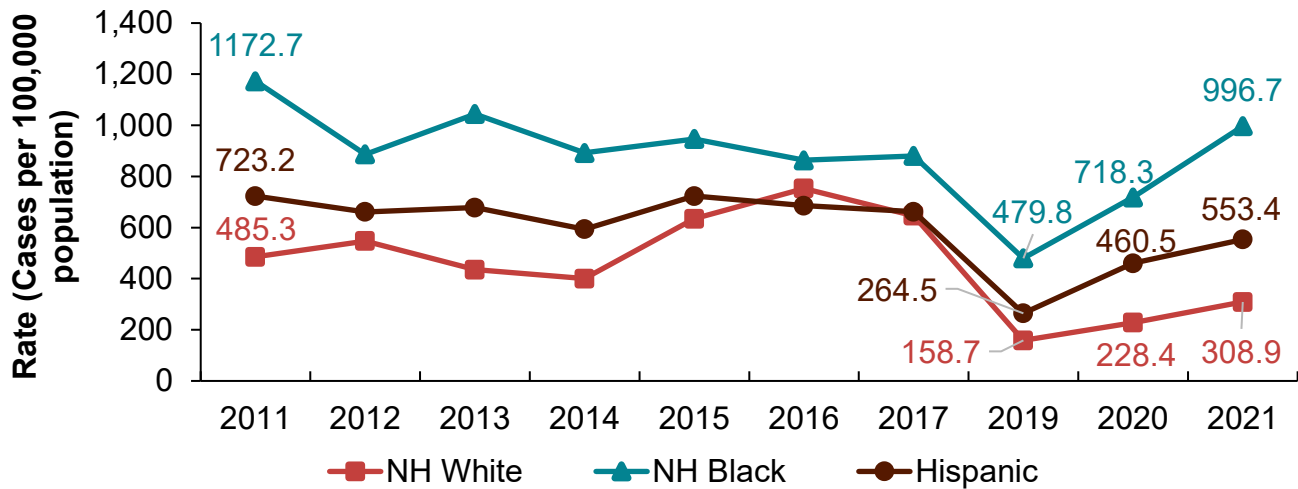
Year	Male Cases	Male Rate	Female Cases	Female Rate
2011	3,472	403.1	8,336	932.4
2012	3,191	363.1	8,141	895.0
2013	3,347	373.4	8,194	885.1
2014	3,257	355.9	7,866	833.5
2015	4,091	438.0	8,977	933.6
2016	4,170	438.5	9,148	935.6
2017	4,173	431.8	8,754	883.8
2018	3,526	359.6	6,987	694.9
2019	3,008	304.1	5,514	544.1
2020	3,975	397.6	7,791	768.1
2021	5,079	504.9	8,938	874.4

Figure 2 shows the rates of Chlamydia by gender in Bexar County from 2011-2021 (cases and rates by gender summarized in Table 2). Transgender persons may be included in male, female, or unknown sex categories.

Rates of chlamydia have historically been higher among females compared to males, which may be related to women receiving more screening than men. In 2021, there were higher rates of chlamydia in females (874.4) than males (504.9) in Bexar County. There has been an increasing trend in the rates of chlamydia in Bexar County since 2019 for both males and females. In Bexar County there was a 13.9% increase in female rates of chlamydia in 2021 (874.4) compared to 2020 (768.1) and a 27.0% increase in male rates in 2021 (504.9) compared to 2020 (397.6).



**Figure 3. Rates of Chlamydia by Race/Ethnicity, Bexar County, 2011-2021**



**Table 3. Cases and Rates of Chlamydia by Race/Ethnicity, Bexar County, 2011-2021**

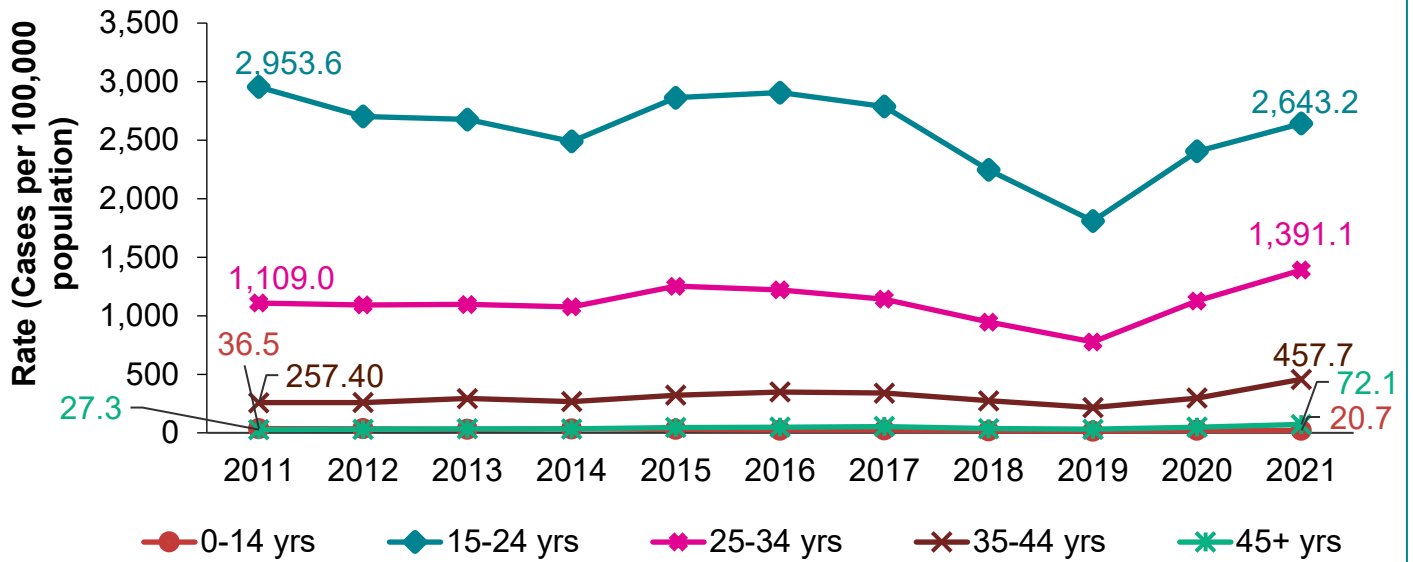
Year	NH White Cases	NH White Rate	NH Black Cases	NH Black Rate	Hispanic Cases	Hispanic Rate	NH Other Cases	NH Other Rate
2011	2,558	485.3	1,441	1172.7	7,486	723.2	318	452.3
2012	2,914	547.6	1,124	886.4	6,983	661.2	301	410.1
2013	2,337	435.5	1,357	1044.6	7,315	678.0	516	672.9
2014	2,167	400.5	1,188	892.2	6,558	593.9	193	240.2
2015	3,448	634.2	1,299	946.8	8,178	723.1	129	154.2
2016	4,100	752.7	1,217	863.2	7,929	685.9	61	70.1
2017	3,518	646.4	1,260	880.6	7,803	662.1	58	92.3
2019	858	158.7	712	479.8	3,217	264.5	130	133.6
2020	1,218	228.4	1079	718.3	5670	460.5	74	109.2
2021	1638	308.9	1525	996.7	6882	553.4	109	158.5

Figure 3 shows the rates of Chlamydia by race/ethnicity in Bexar County from 2011-2021 (cases and rates by race/ethnicity summarized in Table 3). At this time, rates in 2018 for race and ethnicity are not available.

Rates of chlamydia have historically been higher among individuals that are NH Black. While rates have declined for all races over the last ten years in Bexar County, the disparity between minority and majority race/ethnicity groups has widened. In 2021, rates of chlamydia were twice as high in NH Black race/ethnic group (996.7) compared to the Hispanic (553.4) group, and three times as high compared to the NH White (308.9) group.

Overall, there has since been an increase in the rates of chlamydia since 2020 in Bexar County among all races/ethnic groups. In 2021, the rates for chlamydia in Bexar County were the highest among the NH Black population (996.7) and increased by 38.8% from 2020 (718.3). The rates of chlamydia in 2021 for the Hispanic population (553.4) increased by 20.2% from 2020 (460.5). In 2021, the NH White population (308.9) increased by 35.2% since 2020 (228.4).

**Figure 4. Rates of Chlamydia by Age Group, Bexar County, 2011-2021**

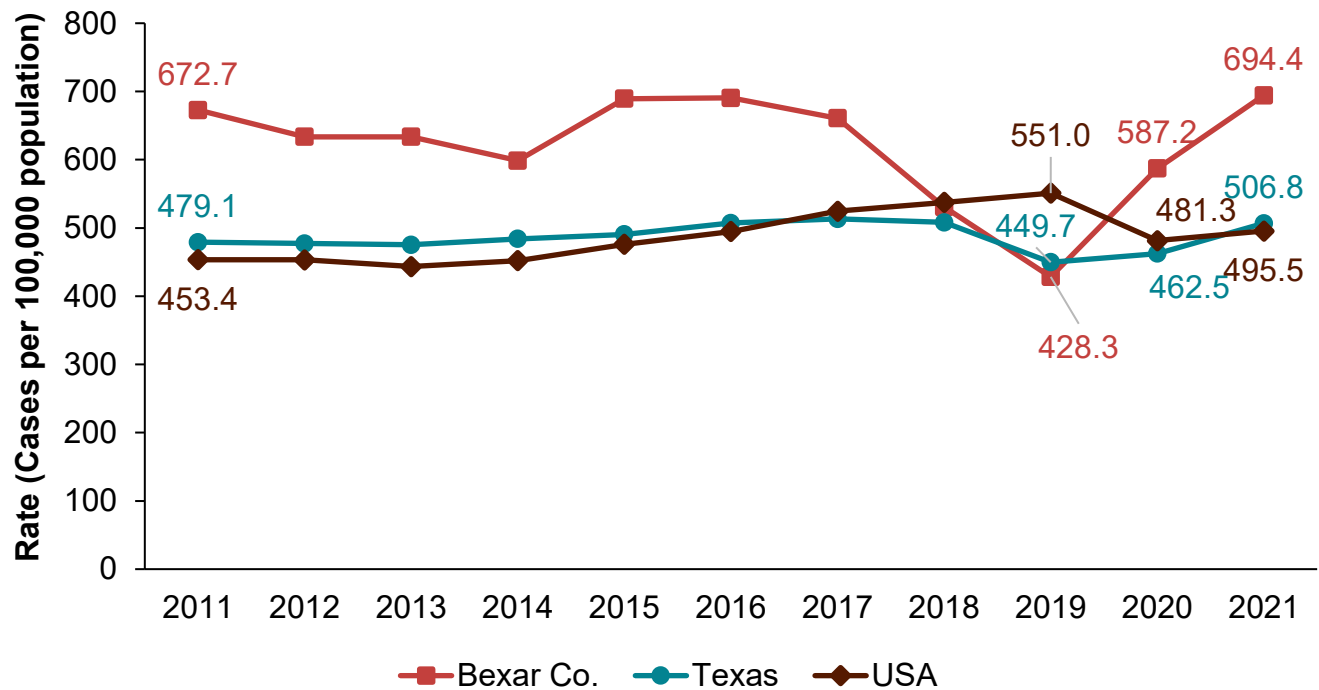


**Table 4. Cases and Rates of Chlamydia by Age Group, Bexar County, 2011-2021**

Year	0-14 Cases	0-14 Rate	15-24 Cases	15-24 Rate	25-34 Cases	25-34 Rate	35-44 Cases	35-44 Rate	45+ Cases	45+ Rate
2011	144	36.5	7,983	2,953.6	2,917	1,109.0	603	257.4	162	27.3
2012	137	34.5	7,423	2,703.2	2,970	1,092.4	616	259.0	186	30.7
2013	116	28.9	7,421	2,676.5	3,084	1,096.5	708	292.9	213	34.3
2014	139	34.1	6,994	2,488.9	3,119	1,076.0	656	266.5	215	33.9
2015	121	29.3	8,110	2,863.0	3,732	1,252.5	808	321.2	296	45.6
2016	92	22.0	8,288	2,906.7	3,721	1,221.6	897	349.8	320	48.1
2017	100	23.8	7,999	2,787.6	3,571	1,141.4	893	339.7	367	54.3
2018	75	17.7	6,466	2,246.4	3,007	946.1	735	273.7	250	36.3
2019	61	14.4	5,216	1,809.3	2,489	776.3	594	216.2	214	30.7
2020	88	20.7	6,971	2,405.1	3,557	1,127.3	842	297.1	331	48.3
2021	87	20.7	7,732	2,643.2	4,390	1,391.1	1,325	457.7	512	72.1

Figure 4 shows the rates of Chlamydia in Bexar County from 2011-2021 (cases and rates by age group summarized in Table 4). Rates of chlamydia in 2021 increased amongst all age groups in Bexar County compared to the rates in 2020. In 2021, the highest rates of chlamydia continue to be observed in the 15 – 24-year age group with a rate of 2,643.2. This was followed by the 25–34-year age group with a rate of 1,391.1, the 35–44-year age group with a rate of 457.7, and the 45+ year age group with a rate of 72.1. The lowest rate of chlamydia was seen in the 0–14-year age group (20.7).

**Figure 5.** Rates of Chlamydia for Bexar County, the State of Texas, and the United States, 2011-2021

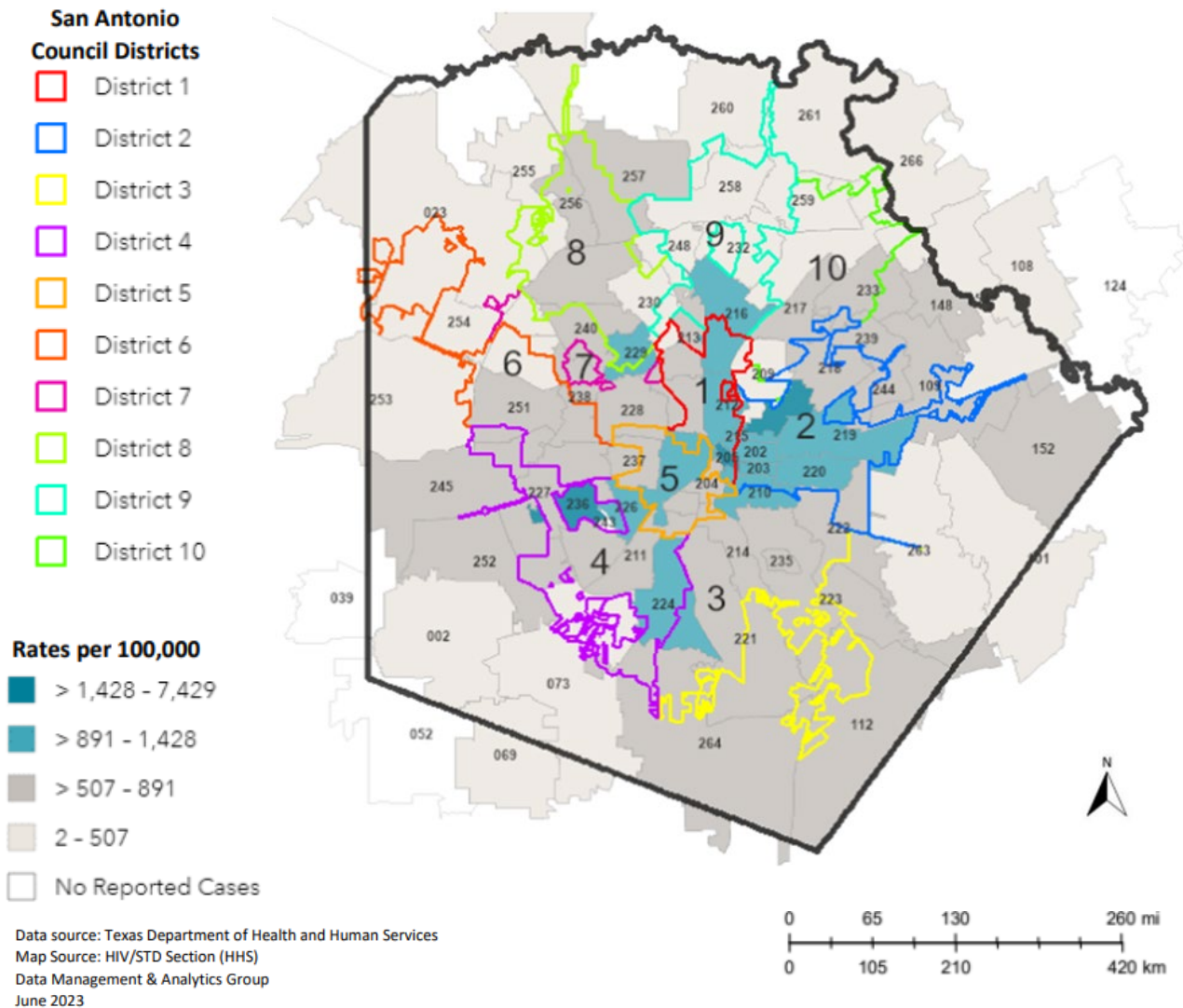


**Table 5.** Rates of Chlamydia for Bexar County, the State of Texas, and the United States, 2011-2020

Year	Bexar Co.	Texas	USA
2011	672.7	479.1	453.4
2012	633.6	477.2	453.3
2013	633.5	475.3	443.5
2014	598.6	484.1	452.2
2015	689.4	490.6	475
2016	690.5	507.1	494.7
2017	660.8	513.3	524.6
2018	530.7	508.2	537.5
2019	428.3	449.7	551
2020	587.2	462.5	481.3
2021	694.4	506.8	495.5

Figure 5 shows the rates of Chlamydia in Bexar County, Texas, and the United States from 2011-2021 (rates for Bexar County, Texas and the United States summarized in Table 5). Rates of chlamydia in Bexar County are comparatively higher to Texas and US rates across all years, apart from 2019. In 2021, Bexar County had the highest rate of chlamydia (694.4) compared to Texas (506.8), and the U.S (495.5).

**Map 1.** Chlamydia Rate per 100,000 Bexar County Population, 2021



Map 1 shows the rates of chlamydia in 2021 in Bexar County per 100,000 population. The map shows the City of San Antonio’s ten Council Districts, each outlined in different colors per district (District 1 – red, District 2 – dark blue, District 3 – yellow, District 4 – purple, District 5 – light orange, District 6 – dark orange, District 7 – Pink, District 8 – light green, District 9 – teal, and District 10 – neon green). The various solid colored shading (white, light grey, dark grey, teal to dark teal) is a scale that indicates the rate of cases per 100,000 population, with white indicating no reported cases and the darker teal indicating the highest reported rates (>1,428 – 7,429).

Geographically, cases occurred throughout the county. All ten districts have rates of more than 507 cases of chlamydia per 100,000 population. There are reports of 891 – 1,428 cases of chlamydia per 100,000 population in certain zip codes in district 1 (78212, 78215, 78216), district 2 (78202, 78203, 78208, 78219, 79220), district 3 (78224), district 4 (78224, 78226), district 5 (78207, 78226), and district 9 (78216). Zip codes within district 1 (78205) and district 2 (78234) both have more than 1,428 – 7,429 cases per 100,000 population.

## 02 | Gonorrhea

### Description and Background<sup>2,4,5</sup>

Gonorrhea is an STI caused by infection with the *Neisseria gonorrhoeae* bacterium. *N. gonorrhoeae* infects the mucous membranes of the reproductive tract, including the cervix, uterus, and fallopian tubes in women, and the urethra in women and men. *N. gonorrhoeae* can also infect the mucous membranes of the mouth, throat, eyes, and rectum. Many infections are asymptomatic, so reported cases only show a fragment of the burden on the population.

Gonorrhea is a very common infectious disease. In 2021, 710,151 cases of gonorrhea (214.0 cases per 100,000 people) were reported to the CDC, making it the second most common reportable STI in the US.<sup>4,5</sup> Over 40% of infections occurred among young people 15-24 years of age.<sup>5</sup> Infection rates were higher among men than in women, which has been a consistent trend since 2013. For both men and women, infection rates are increasing, but the increase was greater among women (15.0%) than in men (6.6%). This may convey differences in gonorrhea screening and diagnosis among men who have sex with men (MSM) in 2020.

In response to the COVID-19 pandemic, many people sheltered-in-place in March and April of 2020. During that time, reported cases of gonorrhea in the US were lower compared to 2019; however, cases of gonorrhea increased later in the year for unclear reasons. The CDC has provided some possible explanations for this increase. During shelter-in-place orders, sexual behaviors may have changed, resulting in a rise in transmission. A limited ability to seek health care services during this time may have led to prolonged infections and therefore more opportunities to transmit the disease. The increase in cases could alternatively be attributed to greater utilization of health care services as shelter-in-place orders lifted nationwide in the later part of the year.

### Impact and Risk<sup>4</sup>

Any sexually active person can be infected with gonorrhea. In the US, the highest reported rates of infection are among sexually active teenagers, young adults, and non-Hispanic Black individuals.

Latex condoms, when used consistently and correctly, can reduce the risk of transmission of gonorrhea. The surest way to avoid transmission of gonorrhea or other STIs is to abstain from sexual intercourse, or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected.

### Gonorrhea Screening and Treatment<sup>4</sup>

Individuals with genital symptoms such as discharge, burning during urination, unusual sores, or rash should stop having sex and see a health care provider immediately. Also, anyone with an oral, anal, or vaginal sex partner recently diagnosed with an STI should see

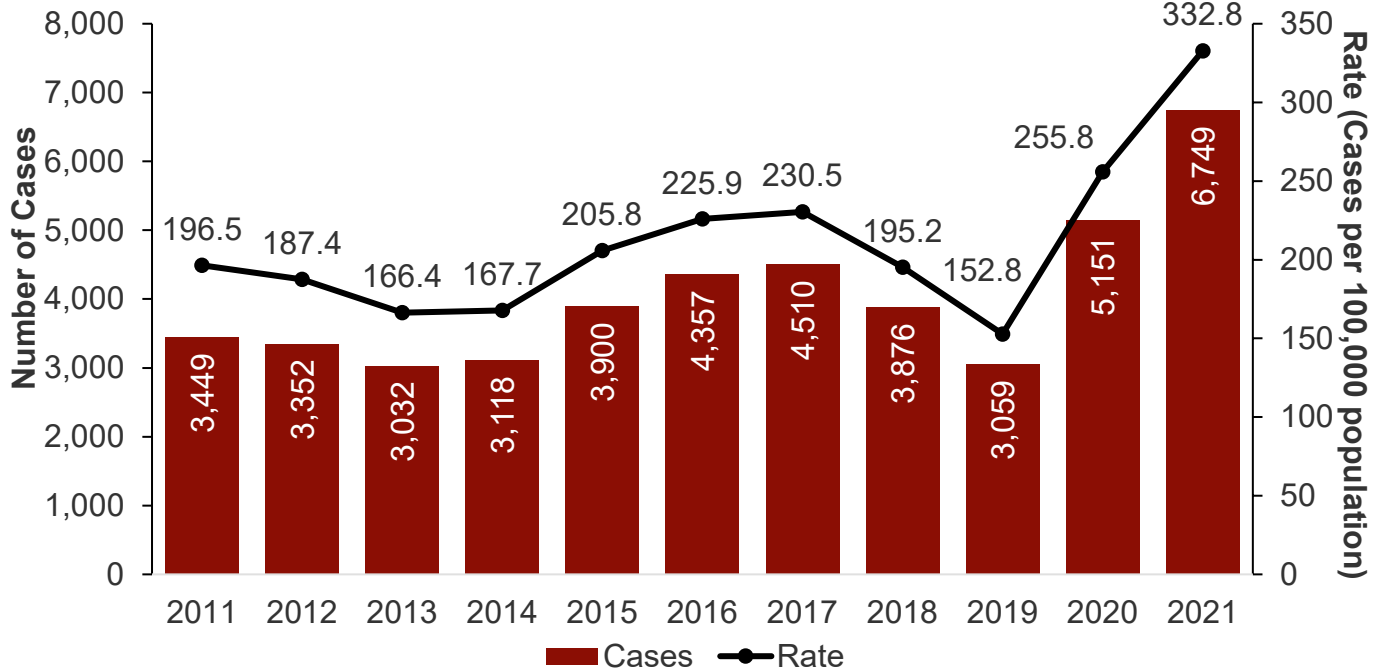
a health care provider for evaluation. Anyone who is sexually active should discuss his/her risk factors with a health care provider and ask whether he/she should be tested for gonorrhea or other STIs.

CDC now recommends a single 500 mg intramuscular dose of ceftriaxone for the treatment of gonorrhea. Although medication will stop the infection, it will not repair any permanent damage done by the disease.

Antimicrobial resistance is of increasing concern and successful treatment is becoming more difficult. If a person's symptoms continue for more than a few days after receiving treatment, he/she should return to a health care provider to be reevaluated.

## Gonorrhea in Bexar County

**Figure 6.** Cases and Rates of Gonorrhea by Year of Diagnosis, Bexar County, 2011-2021



**Table 6.** Cases and Rates of Gonorrhea by Year of Diagnosis, Bexar County, 2011-2021

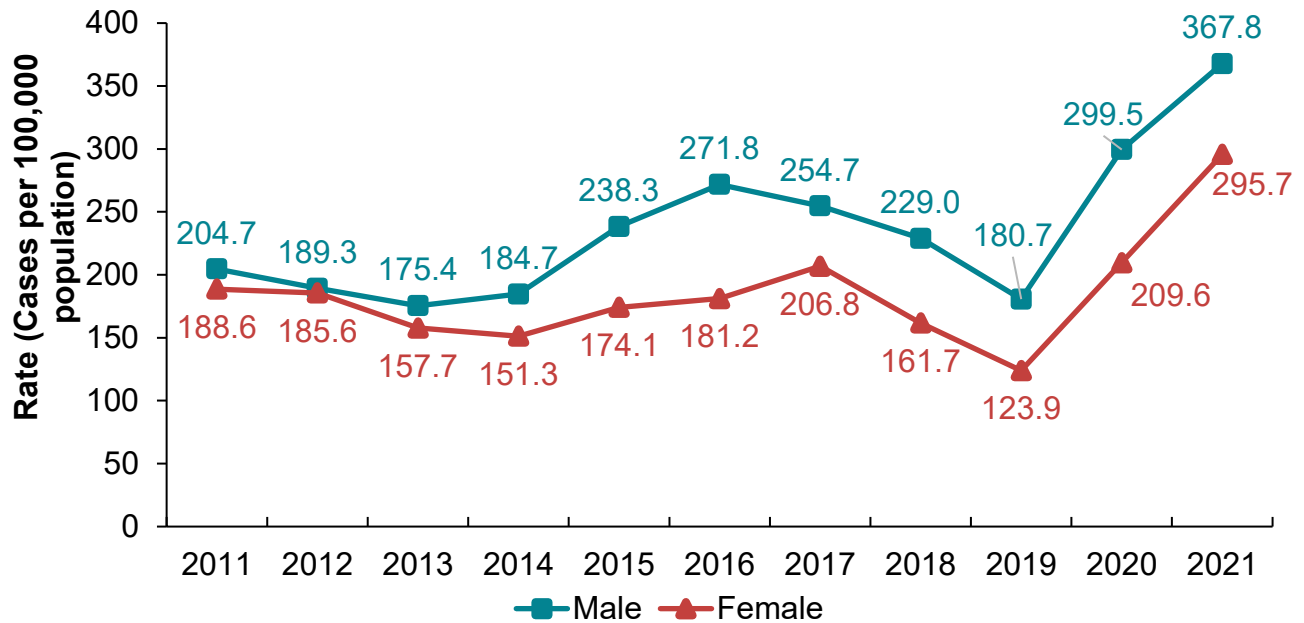
Year	Cases	Rate
2011	3,449	196.5
2012	3,352	187.4
2013	3,032	166.4
2014	3,118	167.7
2015	3,900	205.8
2016	4,357	225.9
2017	4,510	230.5
2018	3,876	195.2
2019	3,059	152.8
2020	5,151	255.8
2021	6,749	332.8

Figure 6 shows the cases and rates of Gonorrhea in Bexar County from 2011-2021 (summarized in Table 6). Rates in 2019 (152.8) were the lowest seen in Bexar County in the last 10 years. In fact, 2019 was the only year in the last decade where gonorrhea rates in the county fell below the Texas and the US rates.

In 2021, there were 6,749 cases of gonorrhea reported in Bexar County with a rate of 332.8 cases per 100,000 population. Compared to 2020 (255.8), the rate of gonorrhea in 2021 increased by 30.1%. Overall, the rate of gonorrhea has increased over the last eleven years from 2011 (196.5) to 2021 (332.8) by 69.4%.



**Figure 7.** Rates of Gonorrhea by Gender, Bexar County, 2011-2021



**Table 7.** Cases and Rates of Gonorrhea by Gender, Bexar County, 2011-2021

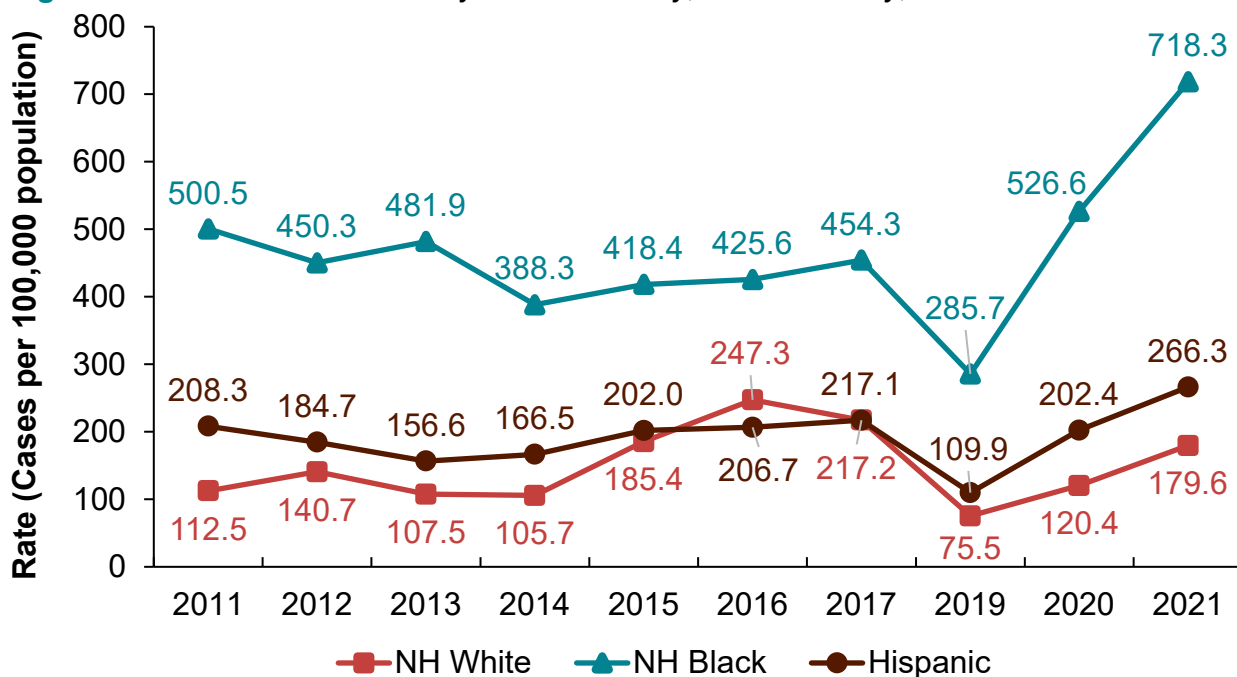
Year	Male Cases	Male Rates	Female Cases	Female Rates
2010	1,763	205.5	1,686	199.8
2011	1,664	204.7	1,688	188.6
2012	1,572	189.3	1,460	185.6
2013	1,690	175.4	1,428	157.7
2014	2,226	184.7	1,674	151.3
2015	2,585	238.3	1,772	174.1
2016	2,245	271.8	2,048	181.2
2017	2,462	254.7	1,626	206.8
2018	2,245	229.0	1,256	161.7
2019	1,787	180.7	2,126	123.9
2020	2,994	299.5	3,023	209.6
2021	3,700	367.8	1,686	295.7

Figure 7 shows the cases and rates of Gonorrhea by gender in Bexar County from 2011-2021 (cases and rates by gender summarized in Table 7). Transgender persons may be included in male, female, or unknown sex categories.

Rates of gonorrhea have historically been higher among males when compared to females in Bexar County. In 2021, the same was true for males (367.8), in which they had a 1.2 times higher rate of gonorrhea than females (295.7). This may be due to extragenital testing, an additional gonorrhea screening that is recommended specifically for MSM populations. In 2021, there was an increase in the rates of gonorrhea in females (295.7) by 41.4% compared to rates in 2020 (209.6). There was also a 22.8% increase in rate of gonorrhea for males in 2021 (367.8) compared to 2020 (299.5).



**Figure 8. Rates of Gonorrhea by Race/Ethnicity, Bexar County, 2011-2021**



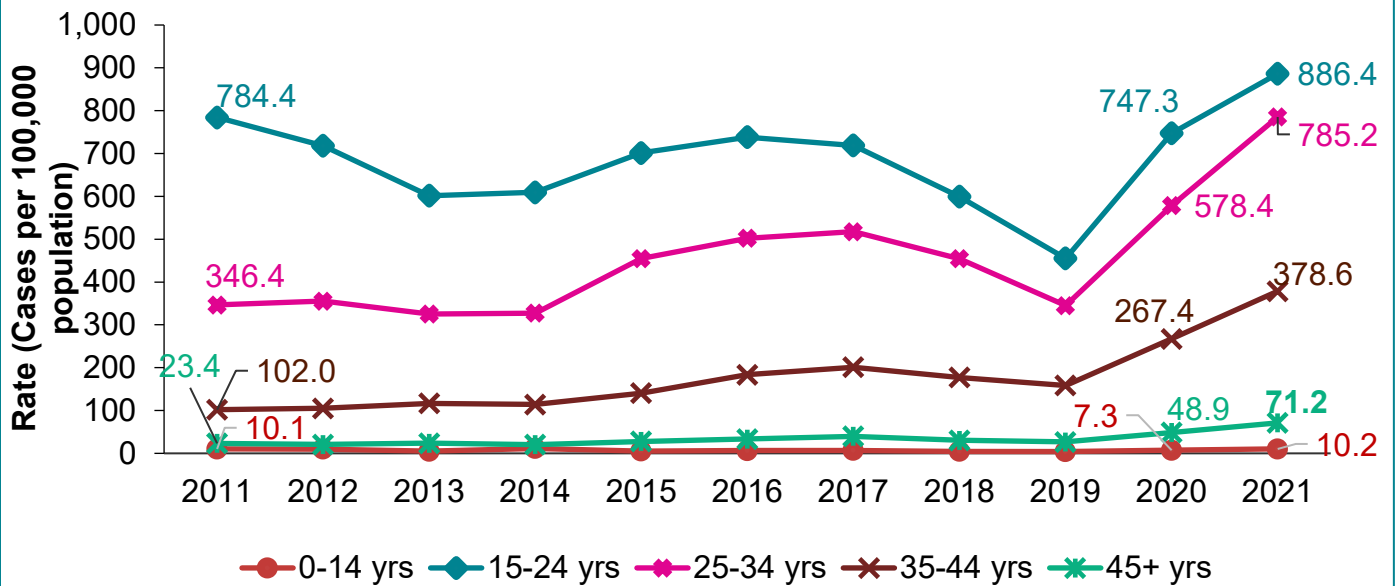
**Table 8. Cases and Rates of Gonorrhea by Race/Ethnicity, Bexar County, 2011-2021**

Year	NH White Cases	NH White Rates	NH Black Cases	NH Black Rates	Hispanic Cases	Hispanic Rates
2011	749	112.5	571	500.5	1,951	208.3
2012	577	140.7	626	450.3	1,690	184.7
2013	572	107.5	517	481.9	1,838	156.6
2014	1,008	105.7	574	388.3	2,285	166.5
2015	1,347	185.4	600	418.4	2,390	202.0
2016	1,182	247.3	650	425.6	2,558	206.7
2017	642	217.2	424	454.3	1,336	217.1
2019	952	75.5	791	285.7	2,492	109.9
2020	593	120.4	1,099	526.6	3,312	202.4
2021	749	179.6	615	718.3	2,156	266.3

Figure 8 shows the cases and rates of Gonorrhea by race/ethnicity in Bexar County from 2011-2021 (cases and rates by race/ethnicity summarized in Table 8). It is important to note that data for 2018 is unavailable due to a delay in reporting race/ethnicity data.

Overall, rates of gonorrhea for all races/ethnicities have increased over the past eleven years in Bexar County and been historically higher among individuals that are NH Black. The same was true in 2021, where the rates for gonorrhea in Bexar County were the highest among the NH Black population (718.3) and increased by 36.4% from 2020 (526.6). The rates of gonorrhea in 2021 for the Hispanic population (266.3) increased by 31.6% from 2020 (202.4). In 2021, the NH White population (179.6) increased by 49.25% since 2020 (120.4).

**Figure 9. Rates of Gonorrhea by Age Group, Bexar County, 2011-2021**

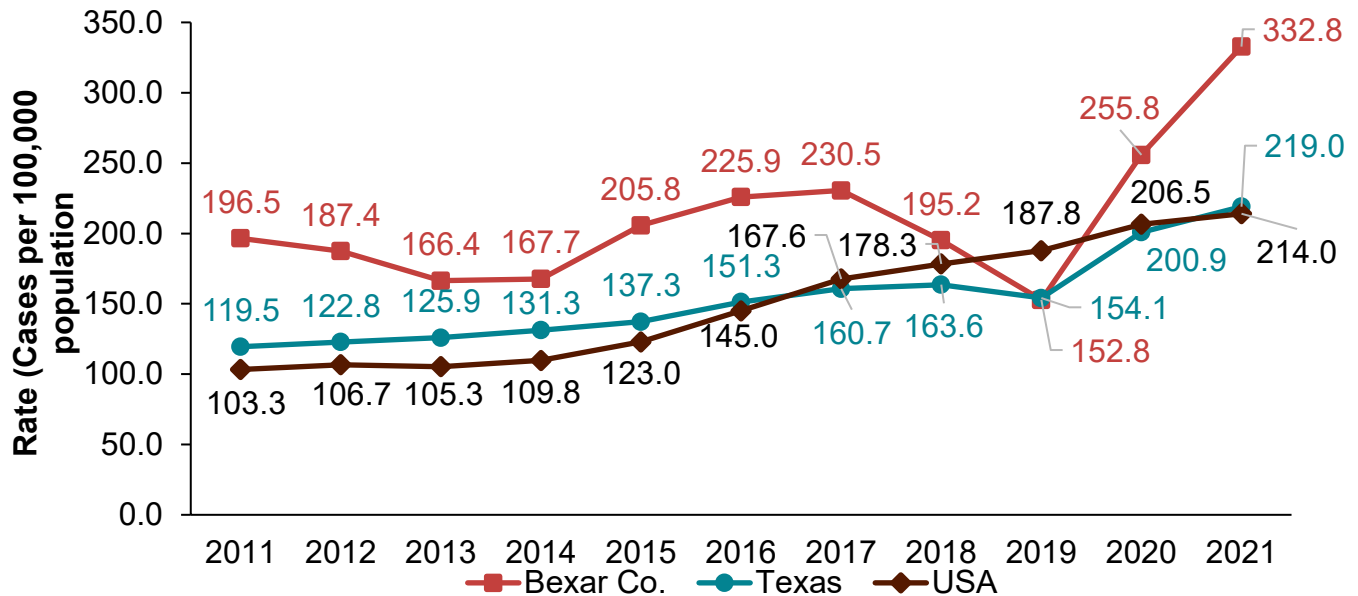


**Table 9. Cases and Rates of Gonorrhea by Age Group, Bexar County, 2011-2021**

Year	0-14 Cases	0-14 Rates	15-24 Cases	15-24 Rates	25-34 Cases	25-34 Rates	35-44 Cases	35-44 Rates	45+ Cases	45+ Rates
2011	40	10.1	2,120	784.4	911	346.4	239	102.0	139	23.4
2012	39	9.8	1,972	718.1	966	355.3	250	105.1	125	20.6
2013	20	5.0	1,668	601.6	915	325.3	282	116.7	147	23.7
2014	46	11.3	1,713	609.6	949	327.4	281	114.1	129	20.3
2015	23	5.6	1,987	701.4	1,355	454.8	354	140.7	181	27.9
2016	28	6.7	2,105	738.2	1,530	502.3	471	183.7	223	33.5
2017	29	6.9	2,063	719.0	1,619	517.5	529	201.2	270	39.9
2018	20	4.7	1,725	599.3	1,444	454.3	476	177.3	210	30.5
2019	18	4.3	1,312	455.1	1,106	345.0	436	158.7	187	26.9
2020	31	7.3	2,166	747.3	1,825	578.4	758	267.4	335	48.9
2021	43	10.2	2,593	886.4	2,478	785.2	1,096	378.6	506	71.2

Figure 9 shows the cases and rates of Gonorrhea in Bexar County by age group from 2011-2021 (cases and rates by age group summarized in Table 9). Rates of gonorrhea in 2021 have increased amongst all age groups in Bexar County compared to rates in 2020. Rates of gonorrhea in Bexar County continue to be highest among individuals in the 15–24-year age group (886.4) followed by the 25–34-year age group (785.2), 35–44-year age group (378.6), 45+ year age group (71.2) and lastly 0–14-year age group (10.2).

**Figure 10.** Rates of Gonorrhea for Bexar County, the State of Texas, and the United States, 2011-2021



**Table 10.** Rates of Gonorrhea for Bexar County, the State of Texas, and the United States, 2011-2021

Year	Bexar Co.	Texas	USA
2011	196.5	119.5	103.3
2012	187.4	122.8	106.7
2013	166.4	125.9	105.3
2014	167.7	131.3	109.8
2015	205.8	137.3	123.0
2016	225.9	151.3	145.0
2017	230.5	160.7	167.6
2018	195.2	163.6	178.3
2019	152.8	154.1	187.8
2020	255.8	200.9	206.5
2021	332.8	219.0	214.0

Figure 10 shows the cases and rates of Gonorrhea in Bexar County, Texas, and the United States from 2011-2021 (rates for Bexar County, Texas and the United States are summarized in Table 10).

Rates of gonorrhea in Bexar County are higher annually compared to the Texas and US rates, except for 2019. This was the first time in eleven years where the rate of gonorrhea in Bexar County was lower than both Texas and the US. There was a drastic increase in rates of gonorrhea in Bexar County by 30.1% from 2020 (255.8) to 2021 (332.8). In Texas, there was a 9.0% increase in rates of gonorrhea from 2020 (200.9) to 2021 (219.0) and a 3.6% increase in rates in the US from 2020 (206.5) to 2021 (214.0). Overall, the highest rates of gonorrhea were seen in Bexar County (332.8) compared to rates in Texas (219.0) and the US. (214.0).

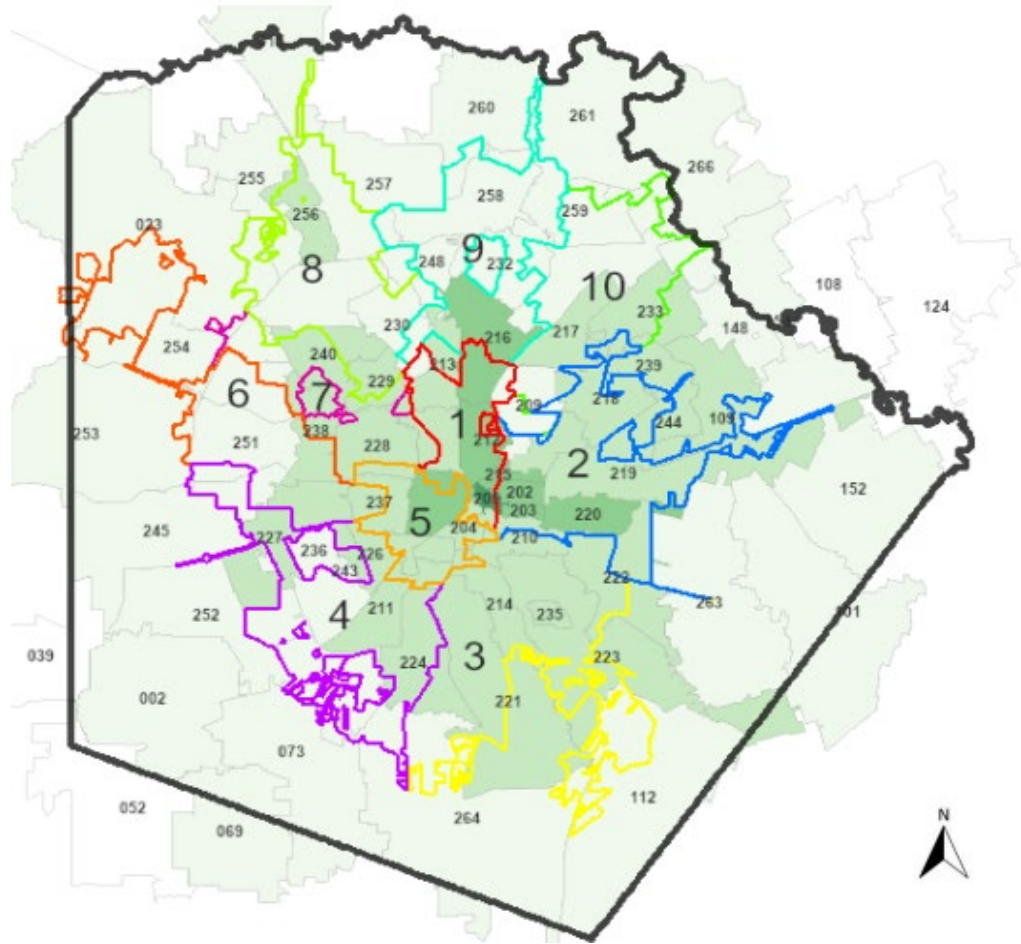
**Map 2. Gonorrhea Rate per 100,000 Bexar Population, 2021**

**San Antonio Council Districts**

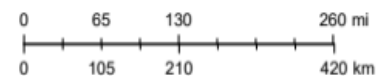
- District 1
- District 2
- District 3
- District 4
- District 5
- District 6
- District 7
- District 8
- District 9
- District 10

**Rates per 100,000**

- > 1,053 - 5,522
- > 626 - 1,053
- > 270 - 626
- 7 - 270
- No Reported Cases



Data source: Texas Department of Health and Human Services  
 Map Source: HIV/STD Section (HHS)  
 Data Management & Analytics Group  
 June 2023



Map 2 shows the 2021 rates of Gonorrhea in Bexar County per 100,000 population. The map shows the City of San Antonio’s ten Council Districts, each outlined in different colors per district (District 1 – red, District 2 – dark blue, District 3 – yellow, District 4 – purple, District 5 – light orange, District 6 – dark orange, District 7 – Pink, District 8 – light green, District 9 – teal, and District 10 – neon green). The various solid colored shading (White) is a scale that indicates the rate of cases per 100,000 population, with white indicating no reported cases and the darkest green indicating the highest reported rates (>1,053 – 5,522).

Geographically, cases occurred throughout the county. All ten districts have reported to have rates of more than 270 cases of gonorrhea per 100,000 population. There are reported rates of 626 – 1,053 cases of gonorrhea per 100,000 population in certain zip codes within district 1 (78212, 78215), district 2 (78202, 78203, 78220), district 5 (78207), and district 9 (78216) One zip code (78205) within district 1 reported a rate of 1,053 – 5,522 cases per 100,000 population.

## 03 | Syphilis

### Description and Background<sup>6</sup>

Syphilis is an STI caused by the bacterium *Treponema pallidum* and can cause long-term complications if not adequately treated. In 2021, 176,713 cases of syphilis were reported to CDC in the US. Of these, 53,767 were primary and secondary (P&S) syphilis, the earliest and most transmissible stages of syphilis. There has been a sharp increase in the number of babies born with syphilis in the US, a condition called congenital syphilis (CS). More than 2,000 cases of CS were reported in 2021, the highest number since 1994.

Syphilis is transmitted from person to person by direct contact with a syphilitic sore, known as a chancre. Chancres occur on the external genitals, vagina, anus, or in the rectum, as well as on the lips and in the mouth. Transmission of syphilis occurs during vaginal, anal, or oral sex. Congenital syphilis (CS) is an infectious disease that is transmitted from a mother with syphilis to her baby during pregnancy. CS is a serious disease that can cause birth defects, miscarriages and still births.

Syphilis cases followed a similar trend as gonorrhea cases amid the pandemic in 2020: initially showing a decline in March and April, then rising in the later part of the year. The CDC offers the same reasoning for this trend as it does for the trend of gonorrhea in 2020: increases in disease transmission during shelter-in-place orders, or increased clinic utilization once shelter-in-place orders lifted.

### Impact and Risk<sup>6,7</sup>

In the 1990s, syphilis in the US primarily occurred among heterosexual men and women of racial/ethnic minority groups. However, during the 2000s, cases increased among MSM. In 2002, rates of P&S syphilis were highest among men 30–39 years old, but in 2020, rates of P&S syphilis were highest among men 20–34 years old. This epidemiologic shift reflects increasing cases reported among young MSM in recent years. MSM accounted for 43% of all P&S syphilis cases and 53% of P&S syphilis cases among men in 2020. However, in recent years, the rate of P&S syphilis has been increasing among MSM as well as heterosexual men and women. Non-Hispanic Black, Hispanic, and other racial/ethnic minorities are disproportionately affected by P&S syphilis in the US. The rate of reported P&S syphilis cases was highest among non-Hispanic Black populations in 2021.

### Syphilis Screening, Diagnosis and Treatment<sup>6</sup>

Providers should routinely test persons who: 1) are pregnant, 2) are members of an at-risk subpopulation (persons in correctional facilities and MSM), 3) describe high risk sexual behaviors (having unprotected vaginal, anal, or oral sexual contact; multiple sexual partners; using drugs and alcohol; and engaging in commercial or coerced sex), 4) have partner(s) who have tested positive for syphilis, and 5) are sexually active and live in areas with high syphilis morbidity.

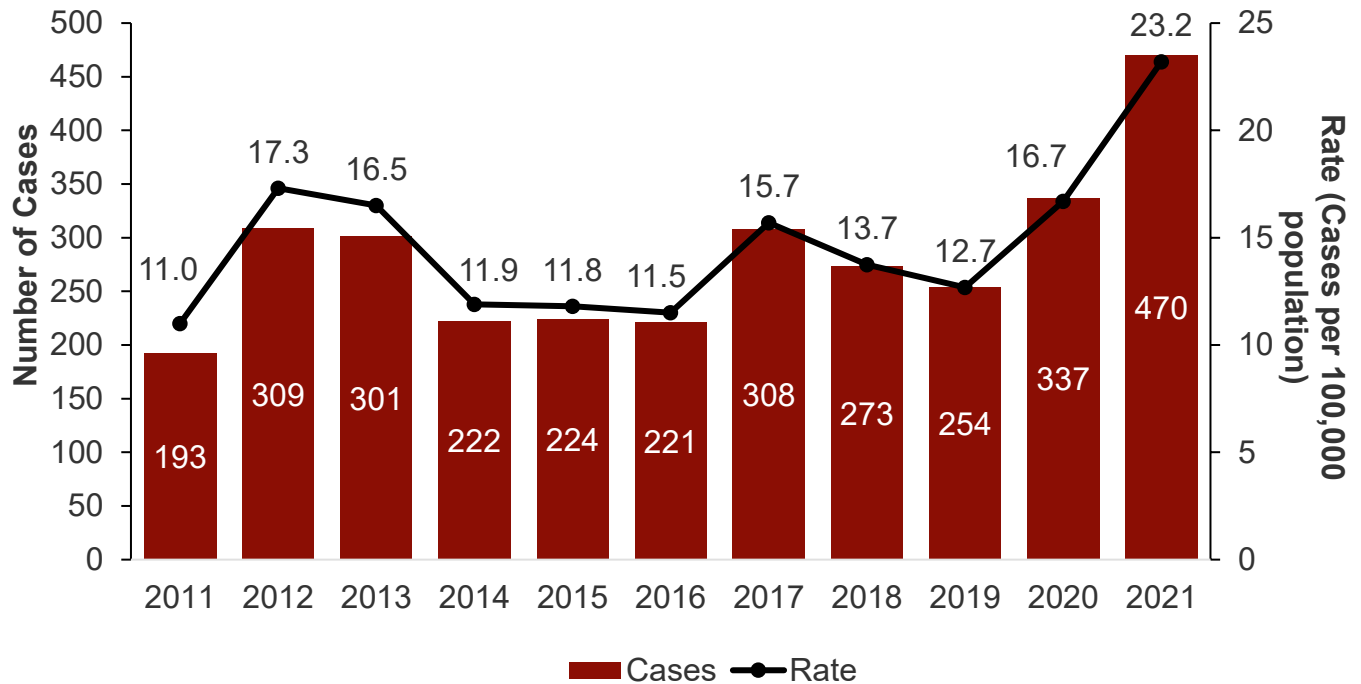
Syphilis diagnoses are commonly made using blood tests. There are two types of blood tests available for syphilis: treponemal and nontreponemal. Treponemal tests (TP-PA, various EIAs, immunoblots, rapid treponemal assays, and chemiluminescence immunoassays) detect antibodies specific for syphilis. If a treponemal test is used for screening and the results are positive, a nontreponemal test with titer should be performed to confirm diagnosis and guide patient management decisions. Nontreponemal tests (VDRL and RPR) are simple and often used for screening, but they are not specific for syphilis and by themselves are insufficient for diagnosis. Persons with a reactive nontreponemal test should receive a treponemal test to confirm a syphilis diagnosis.

Syphilis can be cured in its early stages. A single intramuscular injection of long-acting Benzathine penicillin G will cure a person who has primary, secondary or early latent syphilis. Three doses of long-acting Benzathine penicillin at weekly intervals is recommended for individuals with late latent syphilis or latent syphilis of unknown duration. Treatment will kill the syphilis bacterium and prevent further damage, but it will not repair damage already done. Correct and consistent use of latex condoms can reduce the risk of syphilis only when the infected area or site of potential exposure is protected. However, a syphilis sore outside of the area covered by a latex condom can still allow transmission, so caution should be exercised even when using a condom. The surest way to avoid transmission of sexually transmitted diseases, including syphilis, is to abstain from sexual contact or to be in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected.



## Primary and Secondary (P&S) Syphilis in Bexar County

**Figure 11.** Cases and Rates of Primary and Secondary Syphilis by Year of Diagnosis, Bexar County, 2011-2021



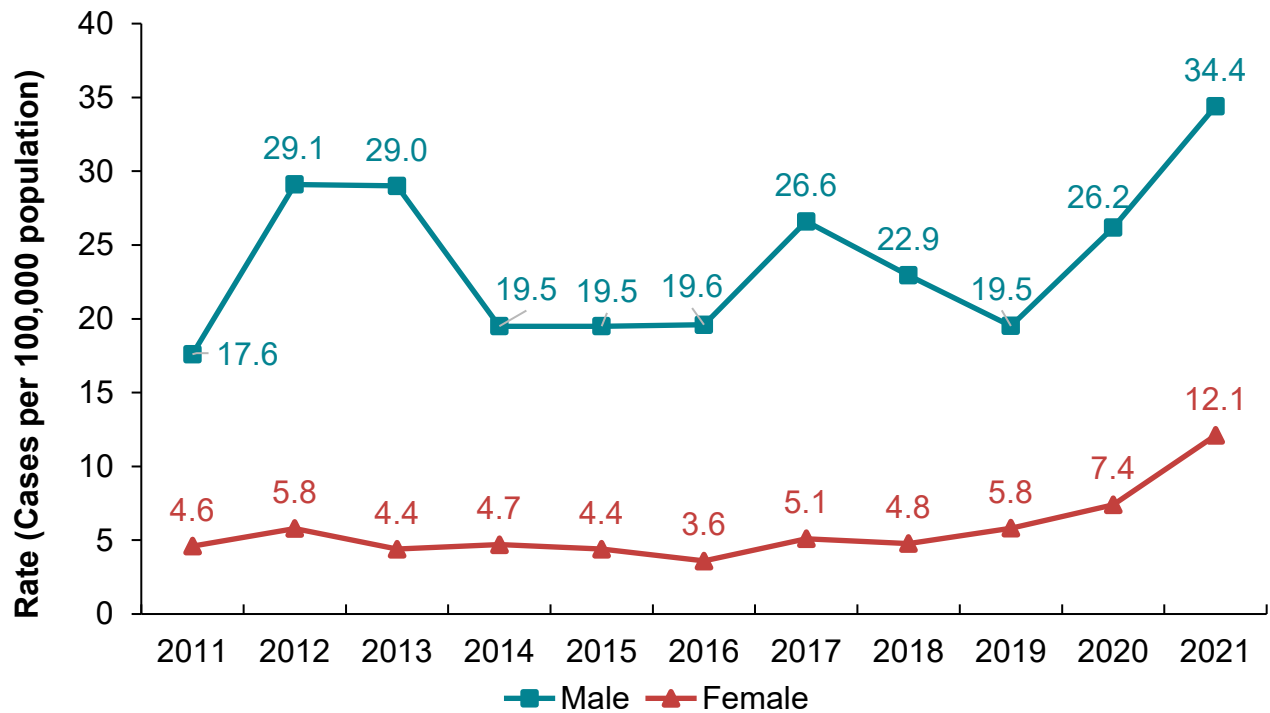
**Table 11.** Cases and Rates of P&S Syphilis by Year of Diagnosis, Bexar County, 2011-2021

Year	Cases	Rate
2011	193	11.0
2012	309	17.3
2013	301	16.5
2014	222	11.9
2015	224	11.8
2016	221	11.5
2017	308	15.7
2018	273	13.7
2019	254	12.7
2020	337	16.7
2021	470	23.2

Figure 11 shows the cases and rates of P&S Syphilis in Bexar County from 2011-2021 (summarized in Table 11).

The rate of P&S syphilis has increased over the last eleven years by 110.9% from 2011 (11.0) to 2021 (23.2). In 2021, there were 470 cases of P&S syphilis reported in Bexar County with a rate of 23.2 cases per 100,000 population. This is the highest rate of P&S syphilis seen in over a decade. Rates of P&S syphilis increased by 38.9% from 2020 (16.37) to 2021 (23.2).

**Figure 12.** Rates of Primary and Secondary Syphilis by Gender, Bexar County, 2011-2021



**Table 12.** Cases and Rates of P&S Syphilis by Gender, Bexar County, 2011-2021

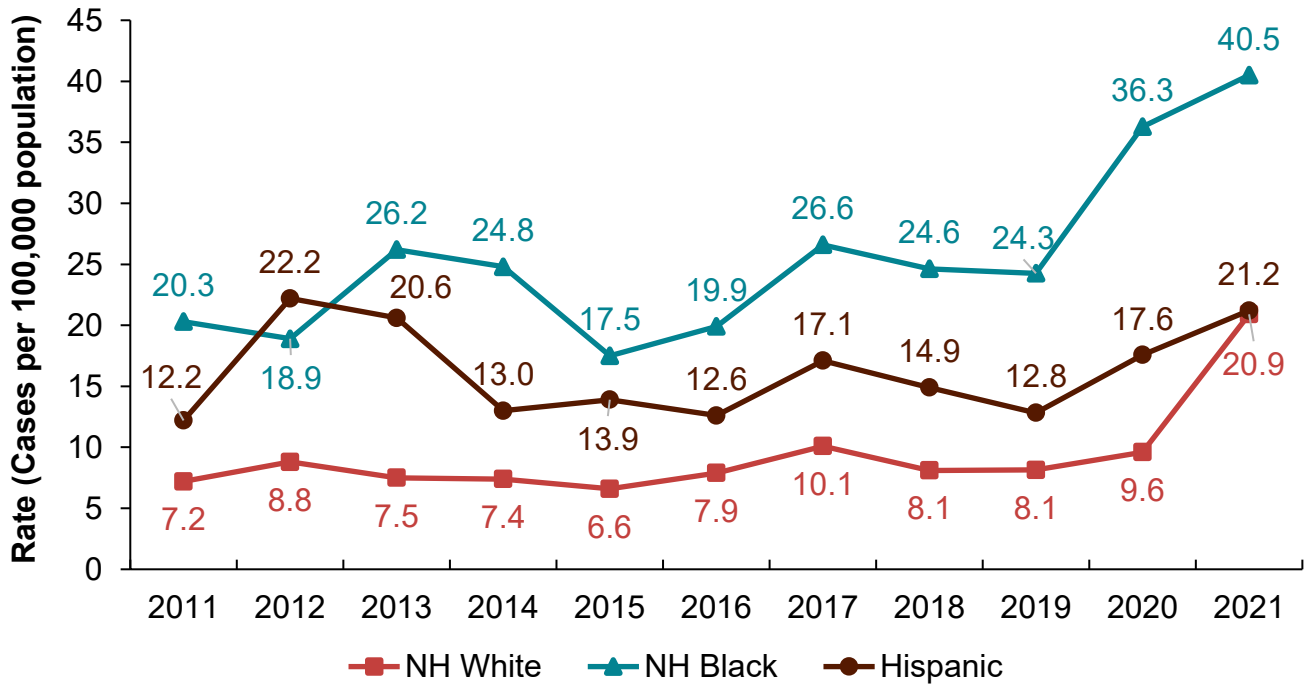
Year	Male Cases	Male Rates	Female Cases	Female Rates
2011	152	17.6	41	4.6
2012	256	29.1	53	5.8
2013	260	29.0	41	4.4
2014	178	19.5	44	4.7
2015	182	19.5	42	4.4
2016	186	19.6	35	3.6
2017	257	26.6	51	5.1
2018	225	22.9	48	4.8
2019	193	19.5	59	5.8
2020	262	26.2	75	7.4
2021	346	34.4	124	12.1

Figure 12 shows the rates of P&S Syphilis by gender in Bexar County from 2011-2021 (cases and rates by gender summarized in Table 12.). Transgender persons may be included in male, female, or unknown sex categories.

Rates of P&S syphilis in Bexar County have historically been higher among males when compared to females. In 2021, rates of P&S syphilis were about 2.8 times higher in males (34.4) than in females (12.1). The rates of P&S syphilis have been on the rise in both males and females. In 2020, rate of males with P&S syphilis was 26.2 and increased by 31.3% in 2021 (34.4). The rate of females with P&S syphilis was 7.4 in 2020 and increased by 63.5% in 2021 (12.1).



**Figure 13. Rates of P&S Syphilis by Race/Ethnicity, Bexar County, 2011-2021**



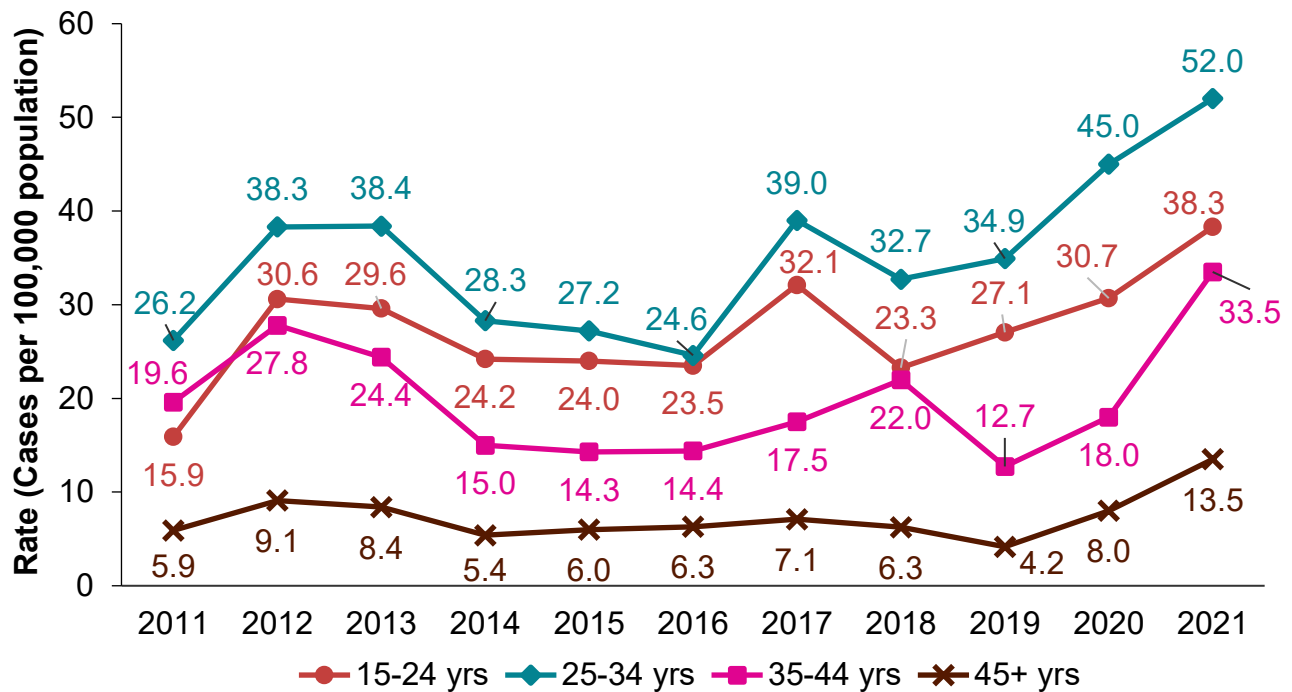
**Table 13. Cases and Rates of P&S Syphilis by Race/Ethnicity, Bexar County, 2011-2021**

Year	NH White Cases	NH White Rates	NH Black Cases	NH Black Rates	Hispanic Cases	Hispanic Rates
2011	38	7.2	25	20.3	126	12.2
2012	47	8.8	24	18.9	234	22.2
2013	40	7.5	34	26.2	222	20.6
2014	40	7.4	33	24.8	144	13.0
2015	36	6.6	24	17.5	157	13.9
2016	43	7.9	28	19.9	146	12.6
2017	55	10.1	38	26.6	202	17.1
2018	44	8.1	36	24.6	179	14.9
2019	44	8.1	36	24.3	156	12.8
2020	51	9.6	55	36.3	217	17.6
2021	111	20.9	62	40.5	263	21.2

Figure 13 shows the rates of P&S syphilis by race/ethnicity in Bexar County from 2011-2021 (cases and rates by race/ethnicity summarized in Table 13).

Overall, rates of P&S syphilis for all races/ethnicities have increased over the past eleven years in Bexar County and been historically higher among individuals that are NH Black. The same was true in 2021, where the rates of P&S syphilis in Bexar County were the highest among the NH Black population (40.5) and increased by 11.6% from 2020 (36.3). The rates of gonorrhea in 2021 for the Hispanic population (21.2) increased by 20.5% from 2020 (17.60). In 2021, the NH White population (20.9) increased by 117.7% since 2020 (9.6). This is a large increase in the annual rate of P&S syphilis in the NH White population, considering that rates have consistently been lower than 10 in previous years in this race/ethnicity.

**Figure 14.** Rates of P&S Syphilis by Age Group, Bexar County, 2011-2021



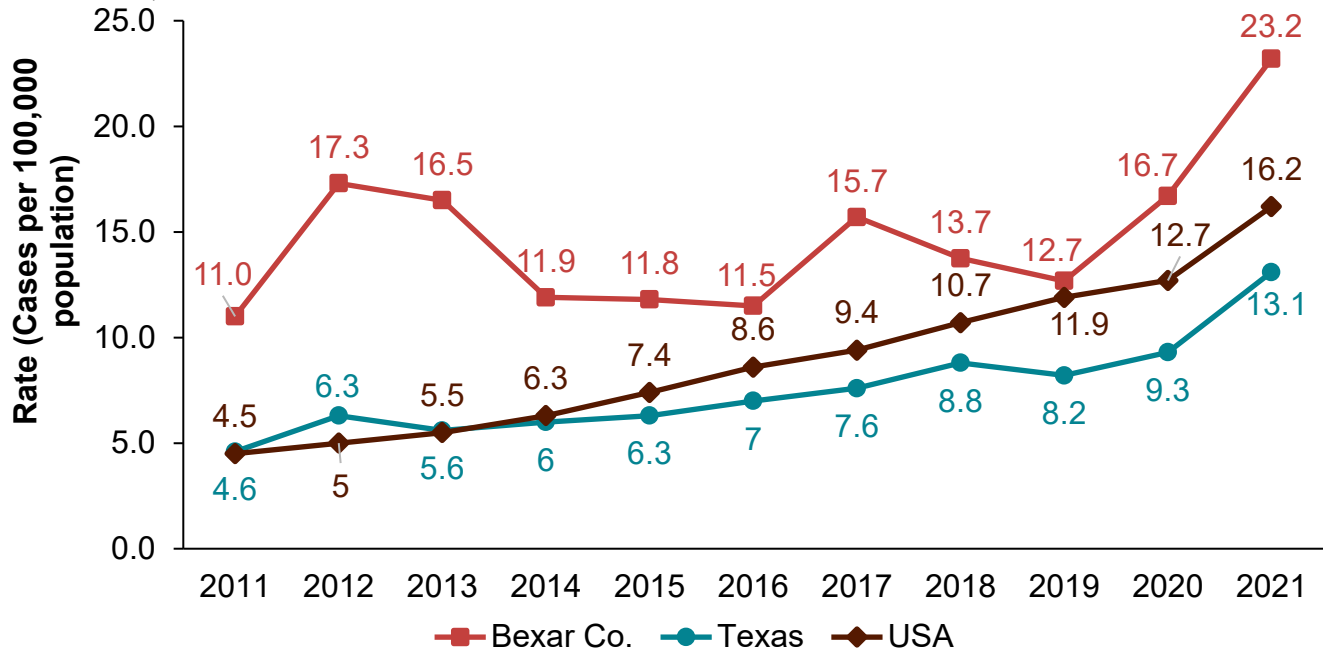
**Table 14.** Cases and Rates of P&S Syphilis by Age Group, Bexar County, 2011-2021

Year	15-24 Cases	15-24 Rates	25-34 Cases	25-34 Rates	35-44 Cases	35-44 Rates	45+ Cases	45+ Rates
2011	43	15.9	69	26.2	46	19.6	35	5.9
2012	84	30.6	104	38.3	66	27.8	55	9.1
2013	82	29.6	108	38.4	59	24.4	52	8.4
2014	68	24.2	82	28.3	37	15.0	34	5.4
2015	68	24.0	81	27.2	36	14.3	39	6.0
2016	67	23.5	75	24.6	37	14.4	42	6.3
2017	92	32.1	122	39.0	46	17.5	48	7.1
2018	67	23.3	104	32.7	59	22.0	43	6.3
2019	78	27.1	112	34.9	35	12.7	29	4.2
2020	89	30.7	142	45.0	51	18.0	55	8.0
2021	112	38.3	164	52.0	97	33.5	96	13.5

Figure 14 shows the rates of P&S Syphilis by age group in Bexar County from 2011-2021 (cases and rates by age summarized in Table 14).

Rates of P&S syphilis have increased greatly amongst all age groups in Bexar County over the last decade. Rates of P&S syphilis continue to be highest amongst individuals in the 25–34-year age group (52), followed by the 15–24-year age group (38.3), the 35–44-year age group (33.5), and lastly the 45+ year age group (13.5).

**Figure 15.** Rates of P&S Syphilis for Bexar County, the State of Texas, and the United States, 2011-2021



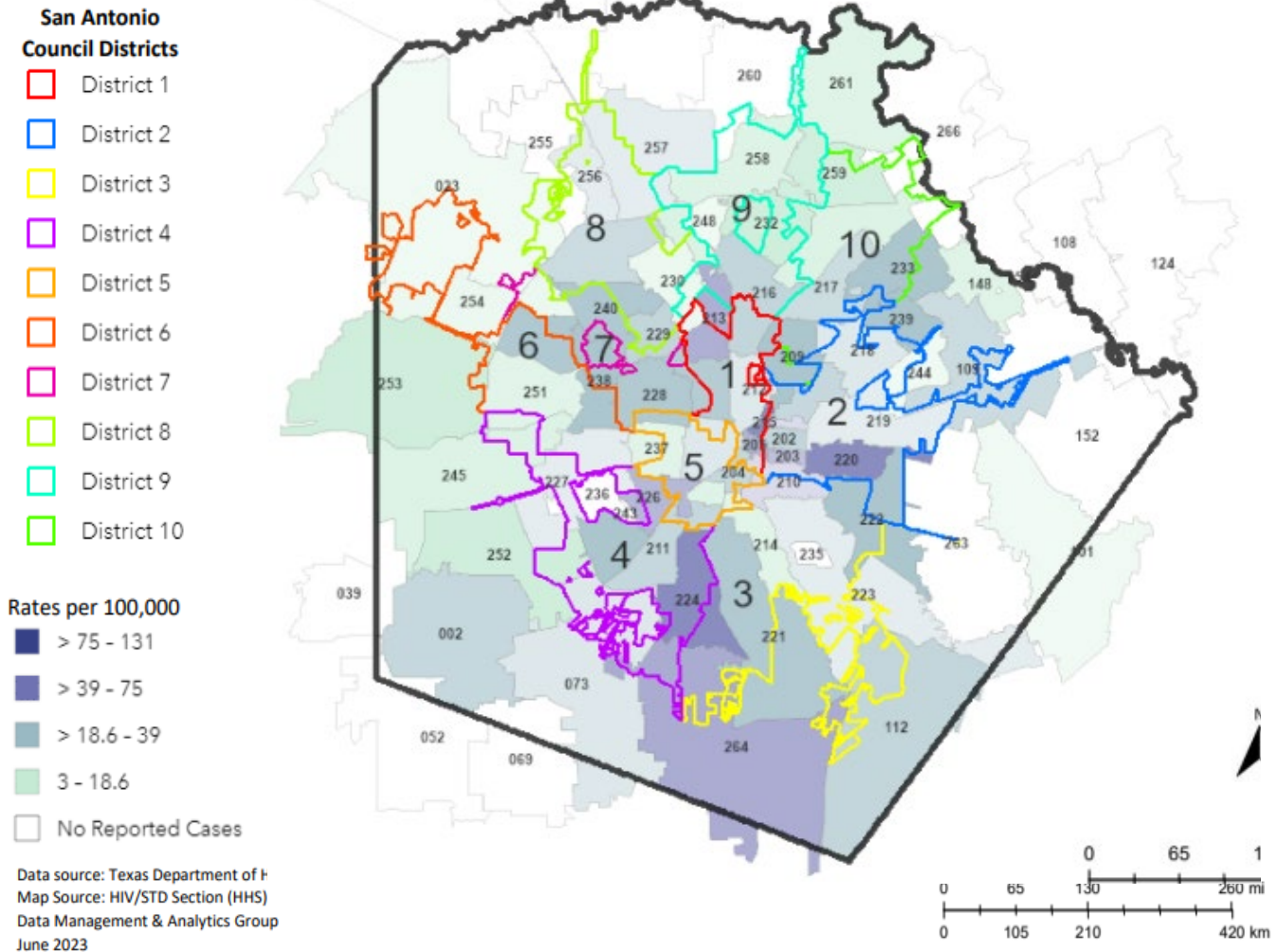
**Table 15.** Rates of P&S Syphilis for Bexar County, the State of Texas, and the United States, 2011-2021

Year	Bexar Co.	Texas	USA
2011	11.0	4.6	4.5
2012	17.3	6.3	5
2013	16.5	5.6	5.5
2014	11.9	6	6.3
2015	11.8	6.3	7.4
2016	11.5	7	8.6
2017	15.7	7.6	9.4
2018	13.7	8.8	10.7
2019	12.7	8.2	11.9
2020	16.7	9.3	12.7
2021	23.2	13.1	16.2

Figure 15 shows the rates of P&S Syphilis in Bexar County, Texas, and the United States from 2011-2021 (cases and rates for Bexar County, Texas and the United States summarized in Table 15).

Rates of P&S syphilis in Bexar County have consistently been higher compared to the Texas and US rates. The same is true for the rates of P&S syphilis seen in 2021, where Bexar County had a rate of 23.2, the US had a rate of 16.2, and Texas had a rate of 13.1. There was an 38.9% increase in the P&S syphilis rates in Bexar County from 2020 (16.7) to 2021 (23.2), a 40.8% increase in Texas rates from 2020 (9.3) to 2021 (13.1), and a 27.6% increase in US rates from 2020 (12.7) to 2021 (16.2).

**Map 3. P&S Syphilis Rate per 100,000 Bexar Population, 2021**

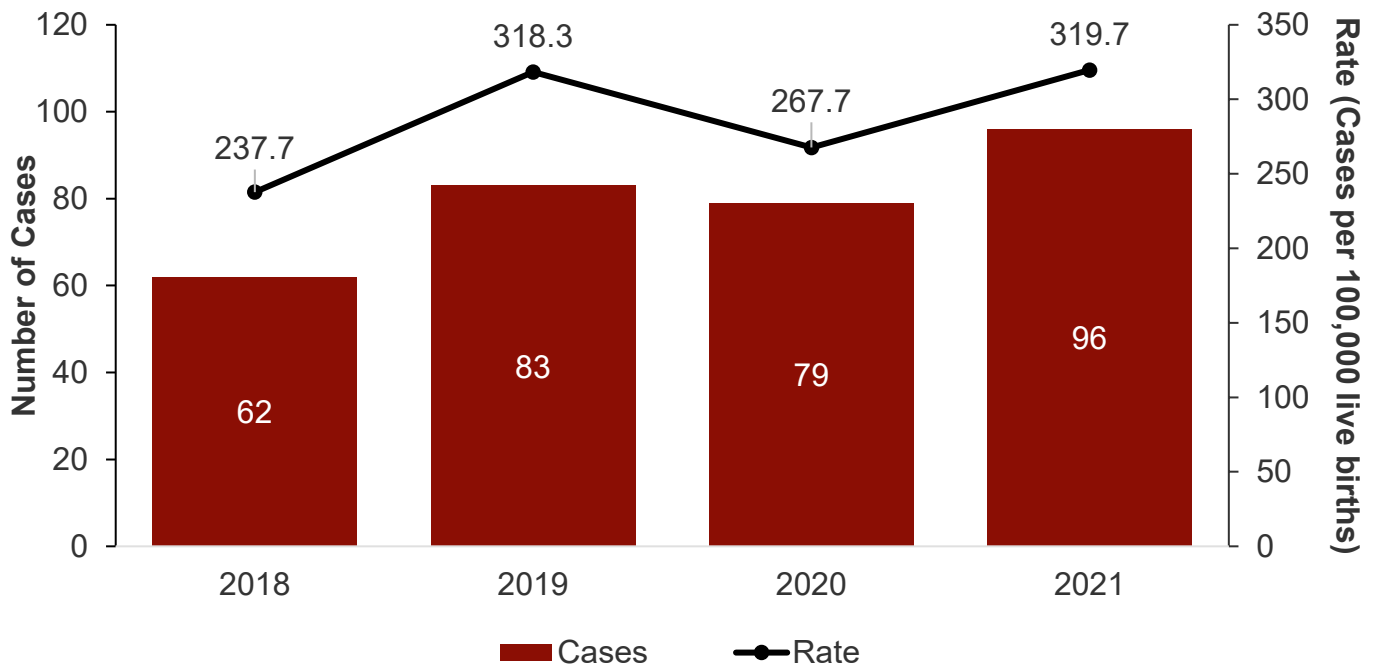


Map 3 shows the 2021 rates of P&S Syphilis in Bexar County per 100,000 population. The map shows the City of San Antonio’s ten Council Districts, each outlined in different colors per district (District 1 – red, District 2 – dark blue, District 3 – yellow, District 4 – purple, District 5 – light orange, District 6 – dark orange, District 7 – Pink, District 8 – light green, District 9 – teal, and District 10 – neon green). The various solid colored shading (white, light green, green, light purple, dark purple) is a scale that indicates the rate of cases per 100,000 population, with white indicating no reported cases and the dark purple indicating the highest reported rates (>75 - 131).

Geographically, cases occur throughout the county and are more heavily concentrated within the city limits. All ten districts reported rates of P&S syphilis between 3 – 18.6 per 100,000 population. Some zip codes have P&S syphilis rates of 75-131 per 100,000 population within district 1 (78215), district 2 (78220), district 3 (78224) and district 4 (78224). There are reports of rates of P&S syphilis between 39 - 75 per 100,000 population within certain zip codes in district 1 (78205, 78213), district 2 (78203, district 78210, 78215), district 3 (78264), district 4 (78226, 78264), district 5 (78226), and district 9 (78213).

## Congenital Syphilis (CS) in Bexar County

**Figure 16.** Cases and Rates of CS by Year of Diagnosis, Bexar County, 2018-2021



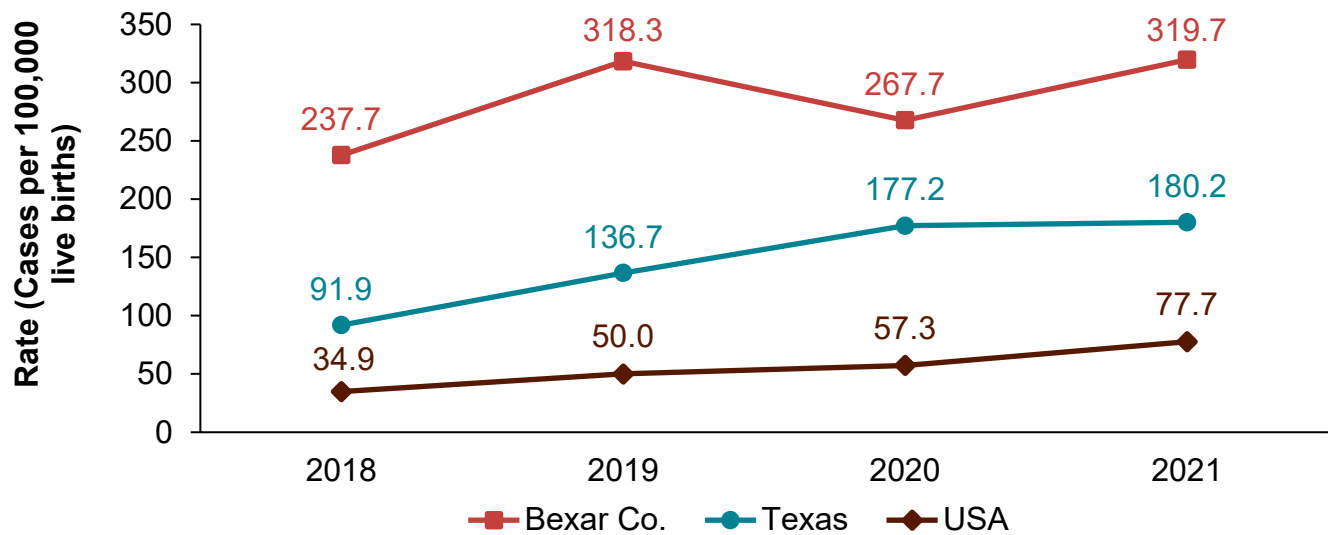
**Table 16.** Cases and Rates of CS in Bexar County, 2018-2021

Year	Cases	Rate
2018	62	237.7
2019	83	318.3
2020	79	267.7
2021	96	319.7

Figure 16. shows the rates of CS in Bexar County, from 2018-2021 (cases and rates for Bexar County summarized in Table 16). The case definition for CS changed in 2018 and any data prior to this has been omitted for the purposes of this report. Case rates for 2020 and 2021 are also based on provisional birth data.

Overall, there has been a drastic increase in the number of congenital syphilis (CS) cases in the past decade across the US. The same can be seen in Bexar County where the rate of CS cases jumped from 237.7 in 2018 to 319.7 in 2021, which is a 34.5% increase. More recently, the rate of CS increased by 46.0% from 2020 (267.7) to 2021 (319.7).

**Figure 17.** Rates of CS for Bexar County, the State of Texas, and the United States, 2014 – 2021



**Table 17.** Cases and Rates of CS for Bexar County, the State of Texas, and the United States, 2014 – 2021

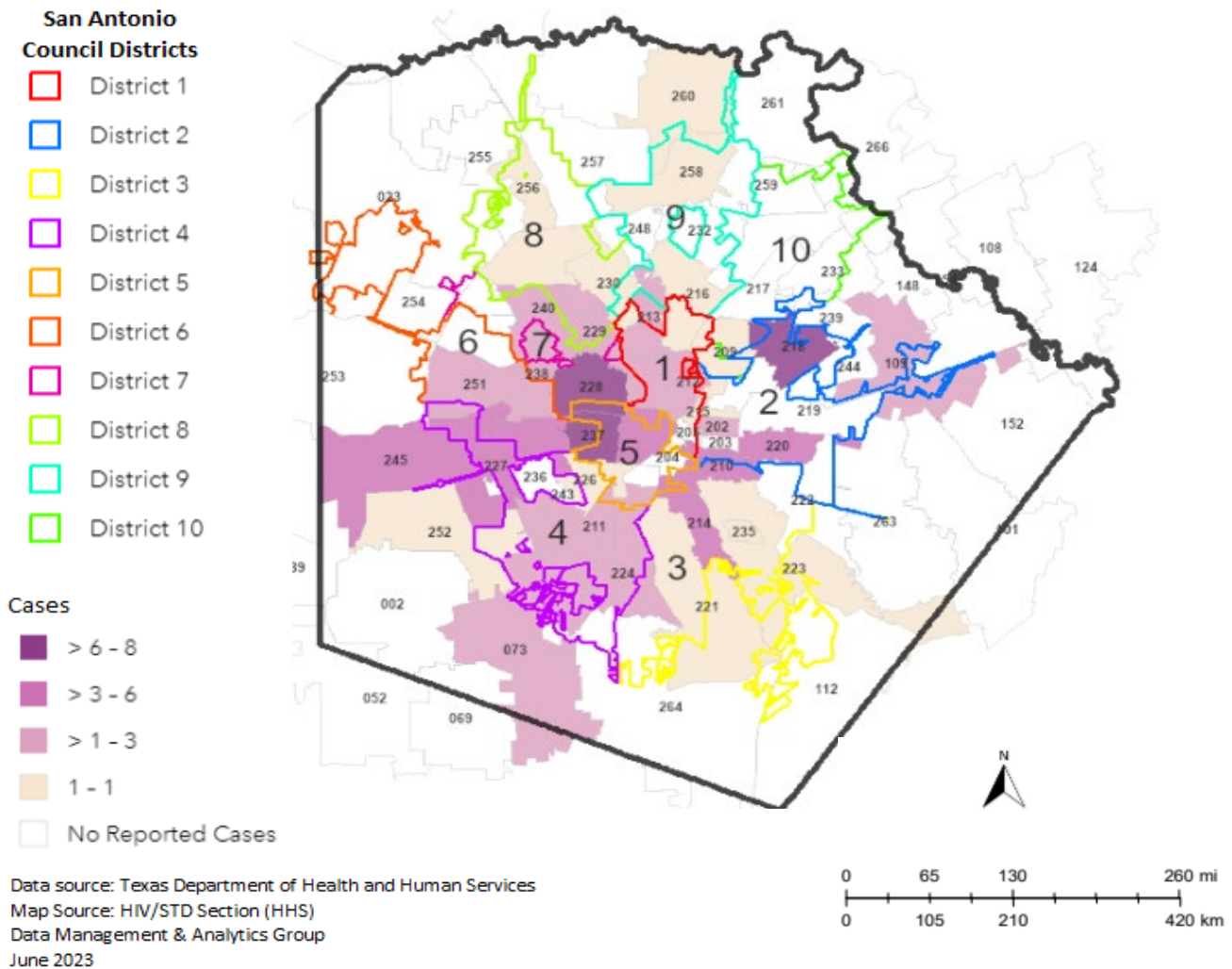
	Year	CS Cases	CS Rate
<b>Bexar County</b>	2018	62	237.7
Bexar County	2019	83	318.3
Bexar County	2020	79	267.7
Bexar County	2021	96	319.7
<b>Texas</b>	2018	371	91.9
Texas	2019	528	136.7
Texas	2020	561	177.2
Texas	2021	685	180.2
<b>United States</b>	2018	1,313	34.9
United States	2019	1,875	50.0
United States	2020	2,157	57.3
United States	2021	2,855	77.7

Figure 17. shows the rates of CS in Bexar County, Texas, and the United States, from 2018-2021 (cases and rates for Bexar County, Texas and the United States summarized in Table 17).

Rates of CS in Bexar County have generally been higher compared to the Texas and US rates. The same is true for the rates of CS seen in 2021, where Bexar County had a rate of 319.7, Texas had a rate of 180.2, and the US had a rate of 77.9. In 2020, there was a dip in the rates of CS in Bexar County (267.7) by about 15.9% from 2019 (318.3), but quickly increased by 19.4% by the following year in 2021 (319.7).



**Map 4. Congenital Syphilis Cases per 100,000 Bexar Population, 2021**



Map 4 shows the 2021 cases of CS in Bexar County. The map shows the City of San Antonio’s ten Council Districts, each outlined in different colors per district (District 1 – red, District 2 – dark blue, District 3 – yellow, District 4 – purple, District 5 – light orange, District 6 – dark orange, District 7 – Pink, District 8 – light green, District 9 – teal, and District 10 – neon green). The various solid colored shading (white, beige, light pink, light purple, dark purple) is a scale that indicates the number of cases, with white indicating no reported cases and the dark purple indicating the highest reported cases (>6 - 8).

Geographically, cases occur throughout the county and are more heavily concentrated within the city limits. All districts have reported to have a minimum of 1 or more cases of CS. Some zip codes have between 6 – 8 cases of CS within district 2 (78218), district 5 (78237), district 6 (78237), and district 10 (78218). There are reports of 3 – 6 cases of CS within district 1 (78207), district 2 (78210, 78220), district 3 (78210, 78214), district 4 (78245, 78227), district 5 (78207), and district 6 (78245, 78227).

## 03 | Human Immunodeficiency Virus (HIV)

### Description and Background<sup>9</sup>

HIV stands for human immunodeficiency virus. It is the virus that can lead to acquired immunodeficiency syndrome, or AIDS, if not treated. Unlike some other viruses, the human body cannot get rid of HIV completely, even with treatment. Therefore, once a person has HIV, they will have it for life.

### Impact and Risk<sup>9</sup>

HIV attacks the body's immune system, specifically the CD4 cells (T cells), which help the immune system fight off infections. Untreated, HIV reduces the number of CD4 cells (T cells) in the body, making the person more likely to get other infections or infection-related cancers. Over time, HIV can destroy so many of these cells that the body cannot fight off infections and disease.

These opportunistic infections or cancers take advantage of a very weak immune system and signal that the person has AIDS, the last stage of HIV infection. About 1 in 7 people in the US who have HIV do not know they have it. In 2020, 30,635 people in the US received an HIV diagnosis, a 17% decrease in cases from 2019. The CDC suggests this decrease is likely due to disruptions in clinical care services, and shortages in material for HIV tests during the COVID-19 pandemic. Recently in 2021, the CDC reported that there were 36,136 new HIV diagnoses, which is a 18% increase since the previous year in 2020.

### HIV Screening and Treatment<sup>9</sup>

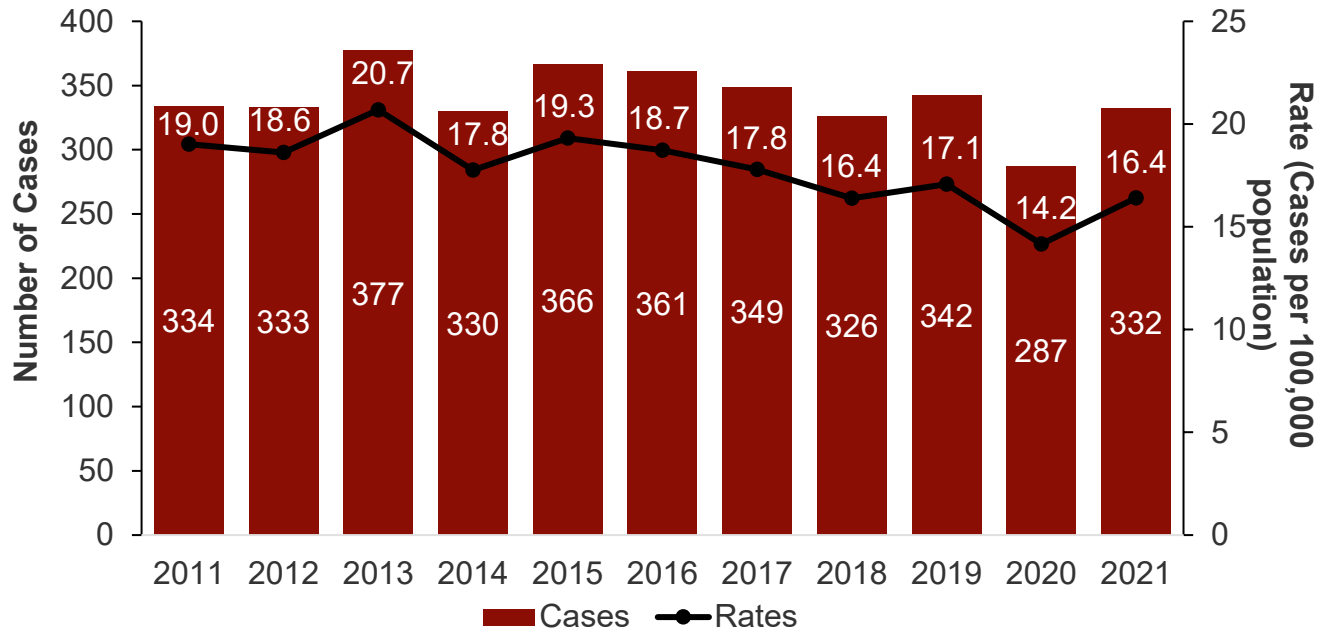
The only way to know for sure whether you have HIV is to get tested. CDC recommends that everyone between the ages of 13 and 64 get tested for HIV at least once as part of routine health care. Knowing your HIV status gives you powerful information to help you take steps to keep you and your partner healthy.

No effective cure currently exists, but with proper medical care, HIV can be controlled. The medicine used to treat HIV is called antiretroviral therapy or ART. If people with HIV take ART as prescribed, their viral load (amount of HIV in their blood) can become undetectable. If it stays undetectable, they can live long, healthy lives and have effectively no risk of transmitting HIV to an HIV-negative partner through sex. Before the introduction of ART in the mid-1990s, people with HIV could progress to AIDS in just a few years. Today, someone diagnosed with HIV and treated before the disease is far advanced can live nearly as long as someone who does not have HIV.



## HIV in Bexar County

**Figure 18.** Cases and Rates of Human Immunodeficiency Virus (HIV) by Year of Diagnosis, Bexar County, 2011-2021



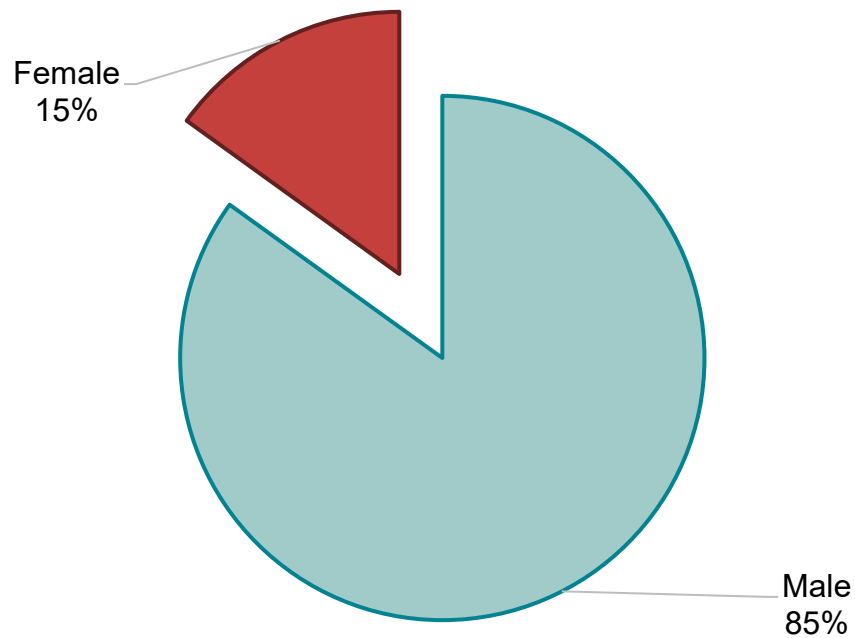
**Table 18.** Cases and Rates of HIV in Bexar County, 2011-2021

Year	Cases	Rates
2011	334	19.0
2012	333	18.6
2013	377	20.7
2014	330	17.8
2015	366	19.3
2016	361	18.7
2017	349	17.8
2018	326	16.4
2019	342	17.1
2020	287	14.2
2021	332	16.4

Figure 18 shows the cases and rates of HIV in Bexar County, from 2011-2021 (summarized in Table 18).

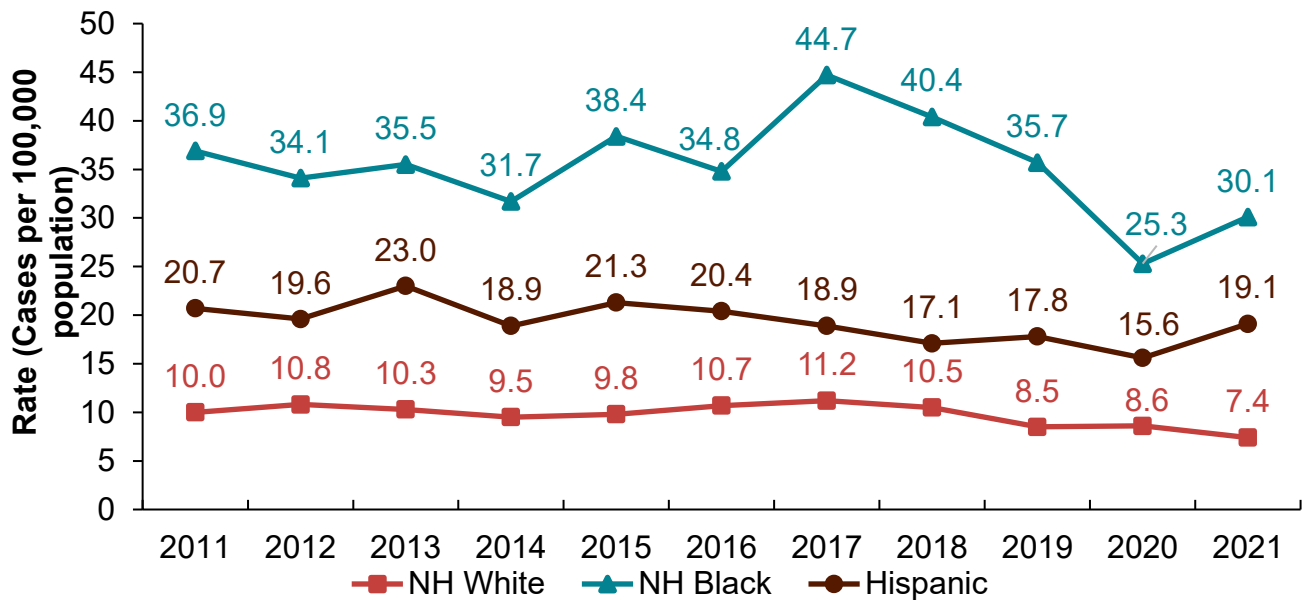
The rates of HIV in Bexar County have changed minimally since 2011. Overall, there has been a slight decrease in the rates of HIV per 100,000 population in Bexar County by 13.7% from 2011 (19.0) compared to 2021 (16.4). In 2021 there were 332 cases of HIV reported in Bexar County with a rate of 16.4 cases per 100,000 population. This is an increase in the rate of HIV in 2021 by 15.5% compared to 2020 (14.2).

**Figure 19.** Percent of New Diagnoses of HIV by Gender, Bexar County, 2021



The pie chart in figure 19 breaks down the percentage of new diagnosed HIV in Bexar County by gender in 2021 (case breakdown by gender summarized in table 19). There was a higher percent of newly diagnosed HIV amongst males (85%) compared to females (15%).

**Figure 20.** Rates of HIV by Race/Ethnicity, Bexar County 2011-2021



**Table 19.** Rates of HIV by Race/Ethnicity, Bexar County 2011-2021

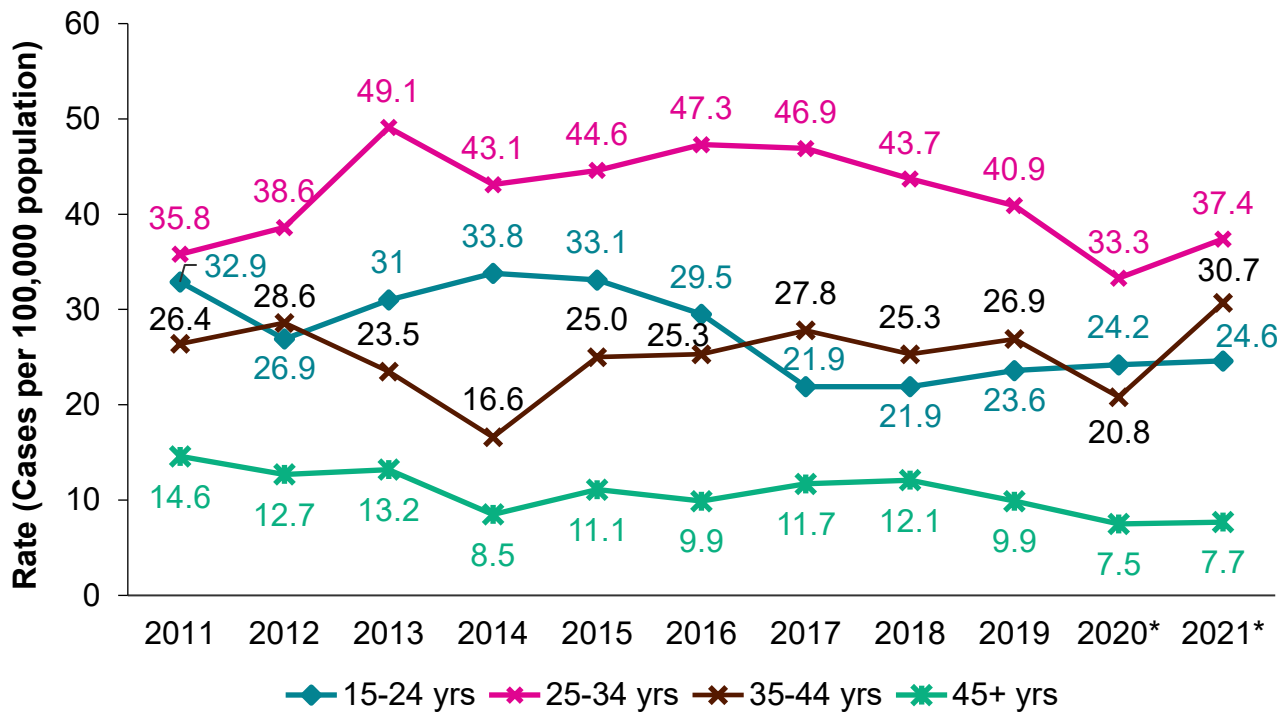
Year	NH White Rate	NH Black Rates	Hispanic Rates
2011	10.0	36.9	20.7
2012	10.8	34.1	19.6
2013	10.3	35.5	23.0
2014	9.5	31.7	18.9
2015	9.8	38.4	21.3
2016	10.7	34.8	20.4
2017	11.2	44.7	18.9
2018	10.5	40.4	17.1
2019	8.5	35.7	17.8
2020	8.6	25.3	15.6
2021	7.4	30.1	19.1

Figure 20 shows the rates of HIV in Bexar County, from 2011-2021 (summarized in Table 20).

Rates in 2020 were the lowest rates seen in both NH Black and Hispanic populations over the last ten years. This decrease may be a result of disruptions in clinical care services, and shortages in material for HIV tests during the COVID-19 pandemic, as suggested by the CDC. After 2020, rates for both NH black and Hispanic populations were greater than the rates seen before the COVID-19 pandemic.

Historically, rates of HIV have been highest among non-Hispanic (NH) Black populations. In 2021, the highest rates of HIV in Bexar County were seen in NH Black populations (30.1) followed by Hispanic (19.1), and lastly NH White populations (7.4). The rates of HIV in Bexar County increased by 22.4% among Hispanic populations from 2020 (15.6) to 2021 (19.1), increased by 19.0% in NH Black populations from 2020 (25.3) to 2021 (30.1), and decreased by 14.0% in NH White populations from 2020 (8.6) to (7.4).

**Figure 21. Rates of HIV by Age Group, Bexar County, 2011-2021**



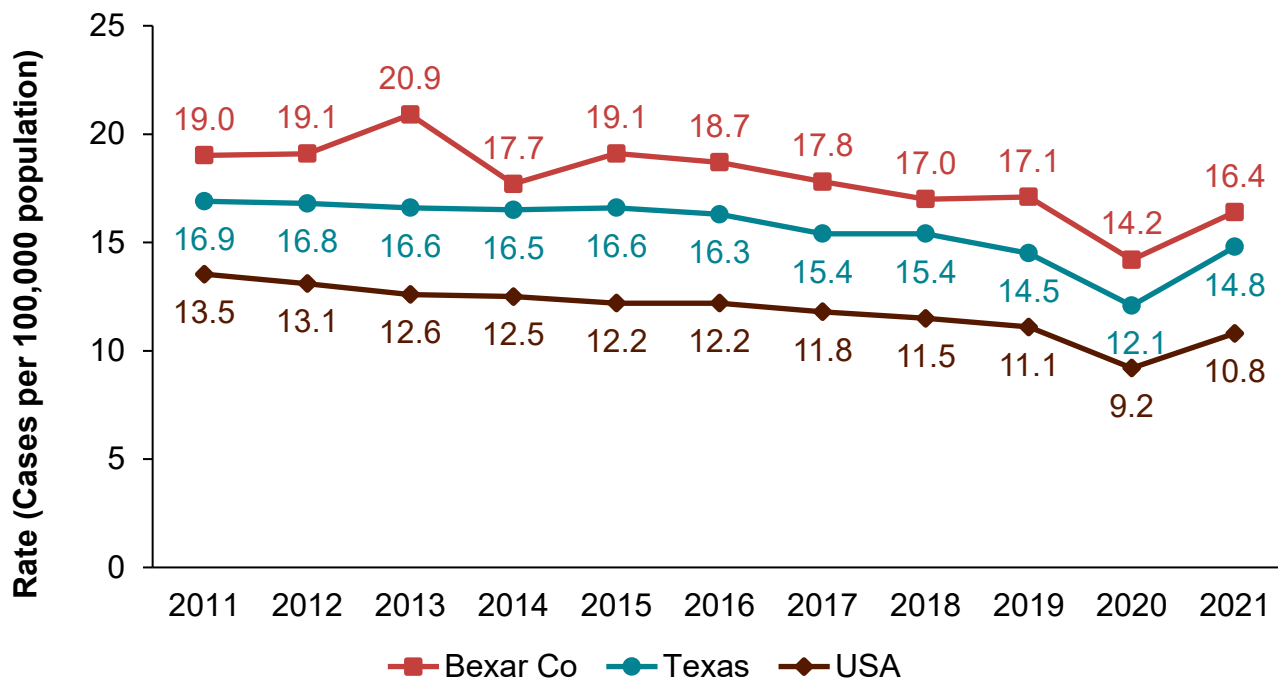
**Table 190. Rates of HIV by Age Group, Bexar County, 2011-2021**

Year	0-14 yrs	15-24 yrs	25-34 yrs	35-44 yrs	45+ yrs
2011	0.3	32.9	35.8	26.4	14.6
2012	0.5	26.9	38.6	28.6	12.7
2013	0.2	31	49.1	23.5	13.2
2014	1.1	33.8	43.1	16.6	8.5
2015	0.2	33.1	44.6	25.0	11.1
2016	0.2	29.5	47.3	25.3	9.9
2017	0.2	21.9	46.9	27.8	11.7
2018	0.97	21.9	43.7	25.3	12.1
2019	0	23.6	40.9	26.9	9.9
2020*	N/A	24.2	33.3	20.8	7.5
2021*	N/A	24.6	37.4	30.7	7.7

Figure 21 shows the rates of HIV by age group in Bexar County, from 2011-2021 (summarized in Table 21).

Rates of HIV have historically been the highest among individuals in the 25–34-year age group in Bexar County. In 2021, rates of HIV continued to be highest among individuals in the 25–34-year age group (37.4), followed by the 35–44-year age group (30.7), the 15–24-year age group (24.6), and lastly the 45+ year age group (7.7).

**Figure 22.** Rates of HIV for Bexar County, the State of Texas, and the United States, 2011-2021



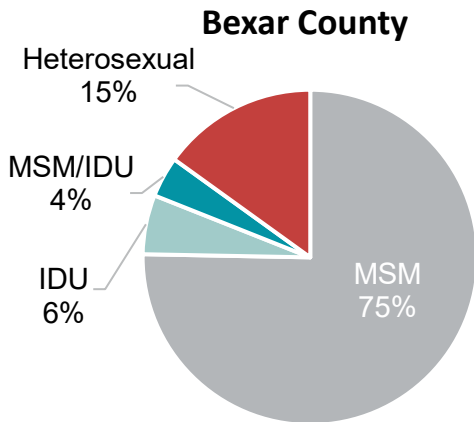
**Table 201.** Rates of HIV for Bexar County, the State of Texas, and the United States, 2011-2021

Year	Bexar Co	Texas	USA
2011	19.0	16.9	13.5
2012	19.1	16.8	13.1
2013	20.9	16.6	12.6
2014	17.7	16.5	12.5
2015	19.1	16.6	12.2
2016	18.7	16.3	12.2
2017	17.8	15.4	11.8
2018	17.0	15.4	11.5
2019	17.1	14.5	11.1
2020	14.2	12.1	9.2
2021	16.4	14.8	10.8

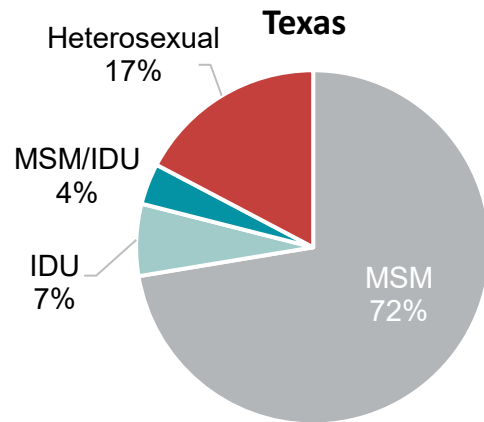
Figure 22 shows the rates of HIV in Bexar County, Texas, and the United States from 2011-2021 (summarized in Table 22).

Rates of HIV have consistently been highest in both Bexar County and in Texas compared to the United States. Overall, the rates of HIV in Bexar County have decreased by 13.7% in 2021 (16.4) compared to rates seen in 2011 (19.0). During this timeframe, the lowest rate of HIV in Bexar County in over a decade occurred in 2020 with 14.2, which may be a result of disruption in services and testing during the COVID-19 pandemic. Since then, the rate of HIV in Bexar County in 2021 (16.4) increased by over 15.5% from 2020 (14.2). The rate of HIV in Texas rose by 22.3% from 2020 (12.1) to 2021 (14.8) and increased in the US by 17.4% from 2020 (9.2) to 2021 (10.8).

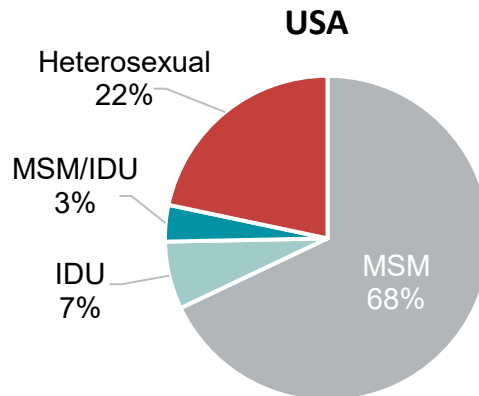
**Figure 23.** Percentage of New HIV Diagnoses by Risk Factor, Bexar County, 2021



**Figure 24.** Percentage of New HIV Diagnoses by Risk Factor, Texas, 2021



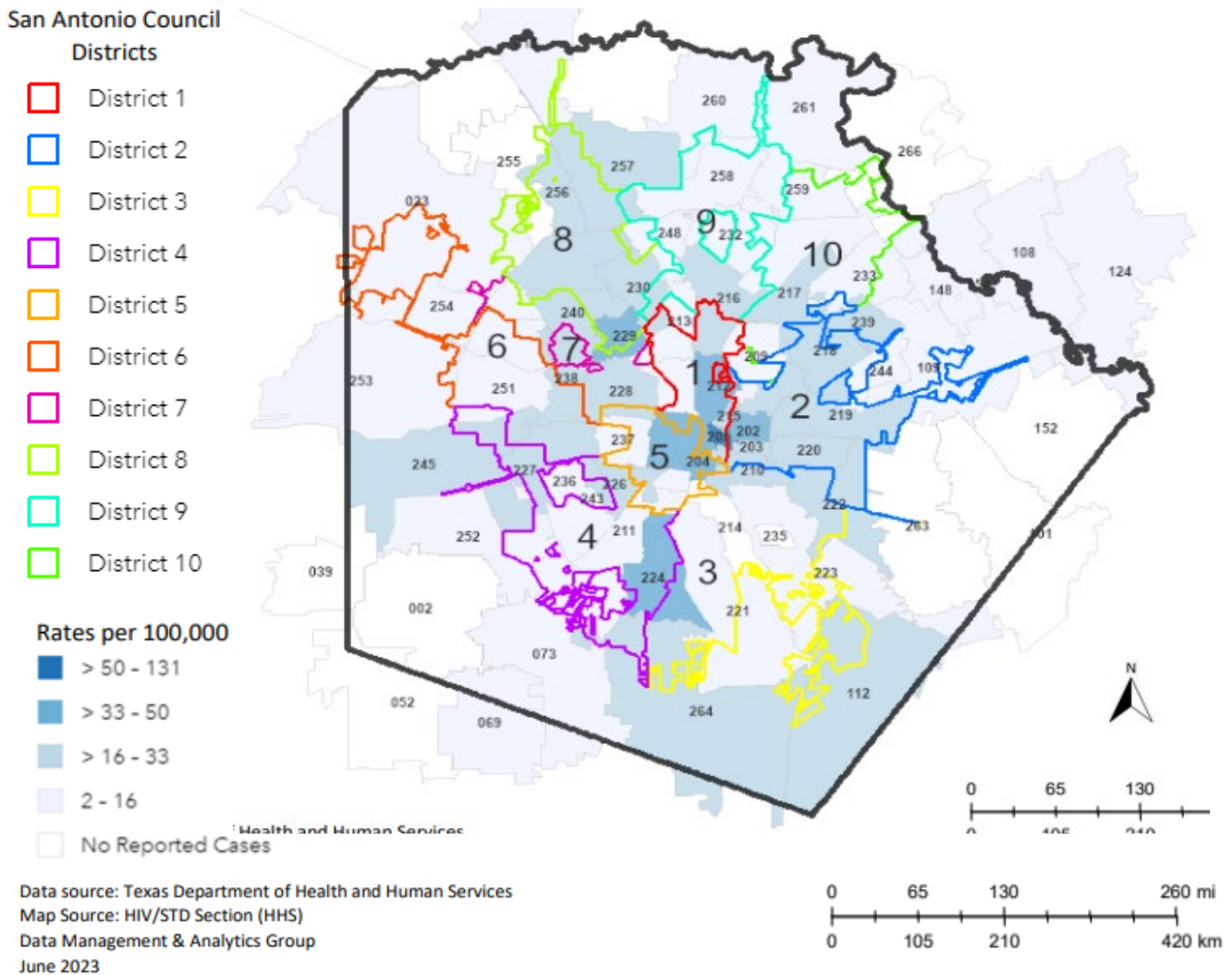
**Figure 25.** Percentage of New HIV Diagnoses by Risk Factor, Bexar County, 2021



The three pie charts in figures 23-25, illustrate the percentage of new diagnoses of HIV by risk factor for Bexar County (figure 23), Texas (figure 24), and the US (figure 25). The risk factors are Heterosexual, Men who have Sex with Men (MSM), Intravenous Drug Users (IDU), and both MSM and IDU (MSM/IDU). Overall, MSM had a higher percentage of newly diagnosed cases in all three geographical locations.

Bexar county had the highest percentage of newly diagnosed cases of HIV among MSM (75%) compared to Texas (72%) and the US (68%) The US had a higher percentage of newly diagnosed HIV among the heterosexual group (22%) when compared to Texas (17%) and Bexar County (15%). Comparatively, all other risk factors (MSM/IDU, and IDU alone) among the three geographical locations were relatively similar.

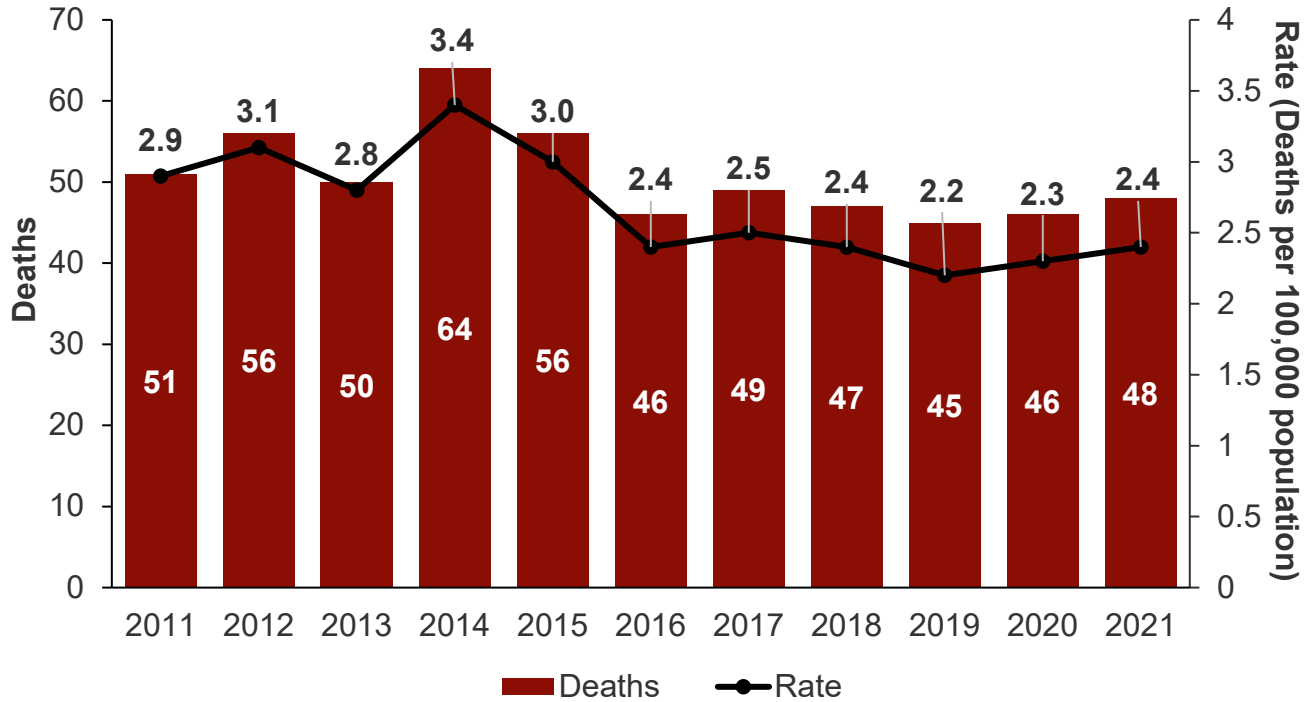
**Map 5. Rate per 100,000 of HIV Newly Diagnosed Bexar County Population, 2021**



Map 5 shows the 2021 rates of newly diagnosed HIV in Bexar County per 100,000 population. The map shows the City of San Antonio’s ten Council Districts, each outlined in different colors per district (District 1 – red, District 2 – dark blue, District 3 – yellow, District 4 – purple, District 5 – light orange, District 6 – dark orange, District 7 – Pink, District 8 – light green, District 9 – teal, and District 10 – neon green). The various solid colored shading (white, light blue, periwinkle, teal, dark blue) is a scale that indicates rates, with white indicating no reported cases and the dark blue indicating the highest reported rates (>50 - 131).

Geographically, cases occur throughout the county. All ten districts have reported to have rates of at least 16 or more newly diagnosed HIV per 100,000 population. Rates between 50 – 131 cases of newly diagnosed HIV per 100,000 population was identified in only one zip code within Districts 1 (78205). There are reports of rates between 33 – 50 newly diagnosed HIV per 100,000 population within district 1 (78207, 78121, 78215), district 2 (28202, 78215), district 3 (78224), district 4 (78224), district 5 (78204, 78207), and district 8 (78229).

**Figure 26.** Cases and Rates of Deaths due to HIV, Bexar County, 2011-2020



**Table 22.** Cases and Rates of Deaths due to HIV, Bexar County, 2011-2021

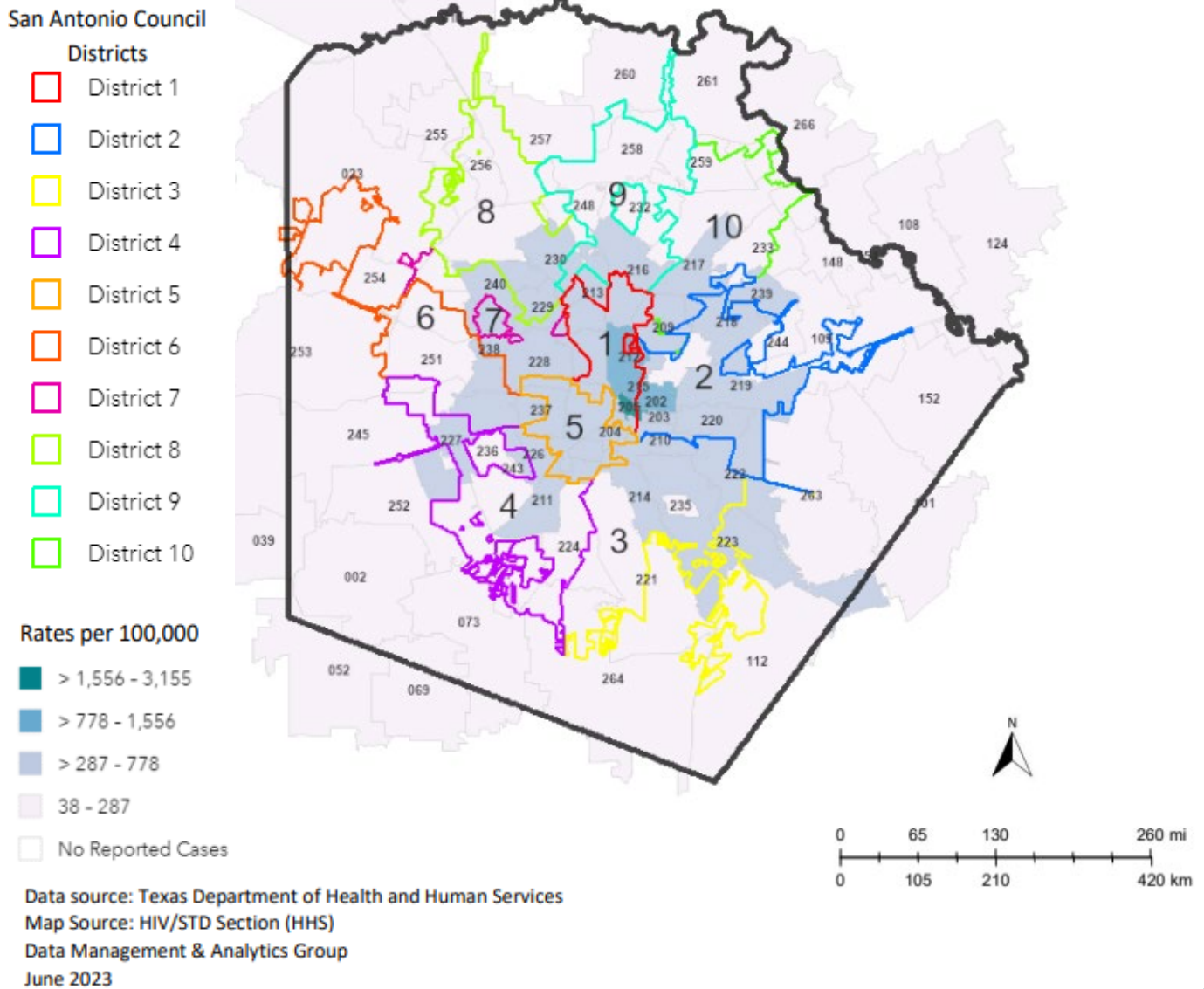
Year	Deaths	Rate
2011	51	2.9
2012	56	3.1
2013	50	2.8
2014	64	3.4
2015	56	3.0
2016	46	2.4
2017	49	2.5
2018	47	2.4
2019	45	2.2
2020	46	2.3
2021	48	2.4

Figure 24 shows the number and rates of death due to HIV in Bexar County, from 2011-2021 (summarized in Table 23).

In 2021, there were 48 individuals who died due to HIV in Bexar County. This is a rate of 2.4 per 100,000 population. The highest number of cases seen in the last decade was in 2014 with 64 cases.



**Map 6. Rate per 100,000 of People Living with HIV/AIDS Bexar County Population, 2021**



Map 6 shows the 2021 rates of people living with HIV in Bexar County per 100,000 population. The map shows the City of San Antonio’s ten Council Districts, each outlined in different colors per district (District 1 – red, District 2 – dark blue, District 3 – yellow, District 4 – purple, District 5 – light orange, District 6 – dark orange, District 7 – Pink, District 8 – light green, District 9 – teal, and District 10 – neon green). The various solid colored shading (white, grey, light blue, teal, dark teal) is a scale that indicates rates, with white indicating no reported cases and the dark teal indicating the highest reported rates (>1,556 – 3,155).

Geographically, cases occur throughout the county. All ten districts have reported to have rates between 287 – 778 of people living with HIV per 100,000 population. The highest rates of people living with HIV, between 1,556 – 3,155 per 100,000 population, was reported in only one zip code in District 1 (78205). Within district 1 (78212, 78215), and district 2 (78202) there are reports of rates of more than 778 – 1,556 of people living with HIV per 100,000 population.

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3. Centers for Disease Control and Prevention-Chlamydia CDC Fact Sheet (Detailed Version), accessed on 7/11/2023 at <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia-detailed.htm>.
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5. Centers for Disease Control and Prevention, Table 9. Gonorrhea — Reported Cases and Rates of Reported Cases by Age Group and Sex, United States, 2017-2021, accessed on 7/11/2023 at <https://www.cdc.gov/std/statistics/2021/tables/9.htm>.
6. Centers for Disease Control and Prevention Syphilis & MSM CDC Fact Sheet (Detailed Version), accessed on 7/11/2023 at <https://www.cdc.gov/std/syphilis/stdfact-syphilis-detailed.htm>.
7. Centers for Disease Control and Prevention, Table 16B. Primary and Secondary Syphilis — Rates of Reported Cases by Race/Hispanic Ethnicity, Age Group, and Sex, United States, 2020, accessed on 7/11/2023 at <https://www.cdc.gov/std/statistics/2021/tables/16b.htm>.
8. Centers for Disease Control and Prevention Congenital Syphilis Fact Sheet (Detailed Version), accessed on 7/11/2023 at <https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.html>.
9. Centers for Disease Control and Prevention website accessed on 7/11/2023 at <https://www.cdc.gov/hiv/>.
10. Centers for Disease Control and Prevention - Atlas Plus, accessed 8/31/2023 at <https://gis.cdc.gov/grasp/nchhstpatlas/tables.html>.

### **Chlamydia Data Sources**

Case data: Texas STD File for Bexar County

Denominators: CDC Wonder, <https://wonder.cdc.gov/std-sex.html>, accessed 7/14/2017; CDC's 2016 & 2015 Sexually Transmitted Diseases Surveillance, <https://www.cdc.gov/std/stats16/tables.htm> and <https://www.cdc.gov/std/stats15/tables.htm>, respectively, accessed 11/14/2017; Texas DSHS Vital Statistics, <http://healthdata.dshs.texas.gov/VitalStatistics/Birth>, <https://www2.census.gov/programs-surveys/popest/datasets/2010-2016/counties/asrh/cc-est2016-alldata-48.csv>, accessed 7/14/2017, and Texas DSHS, HIV/STD Program.

### **Gonorrhea Data Sources**

Case data: Texas STD File for Bexar County

Denominators: CDC Wonder, <https://wonder.cdc.gov/std-sex.html>, accessed 6/21/2017; CDC's 2016 & 2015 Sexually Transmitted Diseases Surveillance, <https://www.cdc.gov/std/stats16/tables.htm> and <https://www.cdc.gov/std/stats15/tables.htm>, respectively, accessed 11/14/2017; Texas DSHS Vital Statistics, <http://healthdata.dshs.texas.gov/VitalStatistics/Birth>, <https://www2.census.gov/programs-surveys/popest/datasets/2010-2016/counties/asrh/cc-est2016-alldata-48.csv>, accessed 6/21/2017, and Texas DSHS, HIV/STD Program.

### **Syphilis Data Sources**

Case data: Texas STD File for Bexar County

Denominators: CDC Wonder, <https://wonder.cdc.gov/std-sex.html>, accessed 7/11/2017; CDC's 2016 & 2015 Sexually Transmitted Diseases Surveillance, <https://www.cdc.gov/std/stats16/tables.htm> and <https://www.cdc.gov/std/stats15/tables.htm>, respectively; Texas DSHS, <http://healthdata.dshs.texas.gov/VitalStatistics/Birth>, and <https://www2.census.gov/programs-surveys/popest/datasets/2010-2016/counties/asrh/cc-est2016-alldata-48.csv>, accessed 11/15/2017.

### **Congenital Syphilis Sources:**

Case Data: Texas STD File for Bexar County

U.S. CS Rates/Cases: [Centers for Disease Control and Prevention - Atlas Plus](#), accessed [08/31/2023](#), accessed 8/31/2023.

**For information on STD/HIV Services, please contact:**

**Metro Health STD/HIV Clinic**

512 East Highland  
San Antonio, TX 78210  
210.207.8830

**Hours:**

**Monday:** 7:45 am - 4:30 pm  
**Tuesday:** 7:45 am - 4:30 pm  
**Wednesday:** 7:45 am - 7:45 pm  
**Thursday:** 7:45 am - 4:30 pm  
**Friday:** 7:45 am - 12 pm

**Counseling Hours**

**Mon, Tue, Thu** - 8:00 am - 4:30 pm  
**Wed** - 8:00 am - 7:30 pm  
**Fri** - 8:00 am - 12 pm

**Suggested Citation:**

San Antonio Metropolitan Health District. *Sexually Transmitted Diseases Surveillance Report, Bexar County, 2021.* **December 2023**