STI SURVEILLANCE QUARTERLY REPORT, 1st Quarter 2019

STI/HIV/Viral Hepatitis Surveillance Program, Published August 2019



Chlamydia, Gonorrhea, and Syphilis diagnoses occurring January 1, 2019 through March 31, 2019, reported in Colorado¹

	Chlamydia No. %		Gonorrhea No. %		Prim & Sec Syphilis ² No. %		All Stages of Syphilis ³ No. %	
-	-		No.		No.		No.	
Total	7,447	100%	2,151	100%	130	100%	373	100%
Sex at birth								
Male	2,728	37%	1,284	60%	119	92%	318	85%
Female	4,719	63%	867	40%	11	8%	55	15%
Unknown	0	0%	0	0%	0	0%	0	0%
Race and Hispanic Origin ⁴								
White	2,091	28%	661	31%	64	49%	173	46%
Black	695	9%	320	15%	12	9%	34	9%
Hispanic (All Races)	1,613	22%	608	28%	43	33%	130	35%
Asian / Pacific Islander	104	1%	19	1%	1	0.8%	8	2%
Native American	52	1%	18	1%	3	2%	6	2%
Other/Unknown	2,892	39%	525	24%	7	5%	22	6%
Age group (years) ⁵								
Under 13	2	<0.1%	1	<0.1%	0	0%	3	1%
13-19	1,965	26%	335	16%	2	2%	9	2%
20-29	3,963	53%	946	44%	42	32%	132	35%
30-39	1,063	14%	559	26%	47	36%	115	31%
40-49	321	4%	211	10%	24	18%	60	16%
50-59	108	1%	88	4%	11	8%	43	12%
60 and over	25	0.3%	11	1%	4	3%	11	3%
Unknown	0	0%	0	0%	0	0%	0	0%
County of Residence ⁶								
Denver TGA ⁷	4,246	57%	1,404	65%	89	68%	269	72%
Non-TGA Urban ⁸	2,593	35%	652	30%	34	26%	84	23%
Rural	608	8%	95	4%	7	5%	20	5%
Unknown	0	0%	0	0%	0	0%	0	0%

Data Source: Patient Reporting Investigating Surveillance Manager (PRISM). All percents are column percents and may not equal 100% due to rounding. These data are preliminary and subject to change. ¹For events reported by July 16, 2019. ²Includes primary and secondary syphilis. ³May include primary, secondary, early latent, late latent, unknown latent, and congenital syphilis. ⁴Race/ethnicity is not collected for all cases due to resources and staffing. ⁵Age at diagnosis. ⁶Based on residence at time of diagnosis. ⁷Includes Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson counties. ⁸Includes Boulder, El Paso, Larimer, Mesa, Pueblo, and Weld counties. The Colorado Department of Public Health and Environment acknowledges that social, economic and environmental inequities result in adverse health outcomes and have a greater impact than individual choices. Reducing health disparities through systems change can help improve opportunities for all Coloradans.