STI SURVEILLANCE QUARTERLY REPORT, 1st Quarter 2020

STI/HIV/Viral Hepatitis Surveillance Program, Published August 2020



Chlamydia, Gonorrhea, and Syphilis diagnoses occurring January 1, 2020 through March 31, 2020, reported in Colorado¹

III colorado	Chlamydia		Gonorrhea		Prim & Sec Syphilis ²		All Stages of Syphilis ³	
	No.	%	No.	%	No.	%	No.	%
Total	7,128	100%	2,225	100%	135	100%	419	100%
Sex at birth								
Male	2,612	37%	1,298	58%	119	88%	355	85%
Female	4,516	63%	927	42%	16	12%	64	15%
Unknown	0	0%	0	0%	0	0%	0	0%
Race and Hispanic Origin ⁴								
White	1,688	24%	512	23%	66	49%	187	45%
Black	547	8%	339	15%	19	14%	52	12%
Hispanic (All Races)	1,614	23%	512	23%	40	30%	132	32%
Asian / Pacific Islander	101	1%	22	1%	4	3%	7	2%
Native American	65	1%	31	1%	1	1%	9	2%
Other/Unknown	3,113	44%	809	36%	5	4%	32	8%
Age group (years) ⁵								
Under 13	3	<0.1%	0	0.0%	0	0%	3	1%
13-19	1,858	26%	351	16%	7	5%	13	3%
20-29	3,760	53%	975	44%	49	36%	145	35%
30-39	1,056	15%	567	25%	36	27%	125	30%
40-49	306	4%	224	10%	30	22%	75	18%
50-59	102	1%	90	4%	9	7%	41	10%
60 and over	43	1%	18	1%	4	3%	17	4%
Unknown	0	0%	0	0%	0	0%	0	0%
County of Residence ⁶								
Denver TGA ⁷	4,125	58%	1,467	66%	96	71%	308	74%
Non-TGA Urban ⁸	2,399	34%	636	29%	28	21%	83	20%
Rural	604	8%	122	5%	11	8%	28	7%
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, 2020. 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.