



Colorado Department  
of Public Health  
and Environment



*Colorado 2010*

**Sexually Transmitted Infections  
Annual Report**



**Disease Control and Environmental Epidemiology Division  
STI/HIV Surveillance Program**

# Sexually Transmitted Infections in Colorado

## Colorado 2010 Sexually Transmitted Infections Annual Report

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## **Executive Summary**

The 2010 Sexually Transmitted Infection Surveillance Report presents statistics and trends for reportable sexually transmitted infections (STIs) in Colorado. These include chlamydia, gonorrhea and syphilis. STIs are the most commonly reported diseases in Colorado, and are among the world's most common diseases, with an annual incidence exceeded only by diarrheal diseases, malaria, and lower respiratory infections. In 2010, 22,372 persons in Colorado were reported as having chlamydia, gonorrhea or primary/secondary syphilis. This report describes trends in reportable STIs by person, place and time.

STI surveillance data are used to detect outbreaks, prioritize resources, develop and target interventions, and evaluate the effectiveness of interventions. It is important to prevent and control STIs because they not only have high rates of complications and adverse health outcomes, but STIs also facilitate HIV transmission. STIs are closely related to other co-morbidities such as substance abuse and mental illness.

## **Data Sources, Methods and Limitations**

Under Colorado law, health care providers and laboratories must report all diagnosed cases of chlamydia and gonorrhea to the Colorado Department of Public Health and Environment (CDPHE) within seven days and all syphilis cases within 24 hours. These case reports are entered into the statewide STI reporting database. Case reports entered into this database are the primary data source for diagnosed cases of STIs. Chlamydia, gonorrhea and syphilis cases most often require laboratory confirmation. All major laboratories report STIs electronically via secure data networks.

The completeness, quality and accuracy of specific data elements can vary widely. Although race and ethnicity are treated as separate categories in calculated rates, this information is often missing on case reports for a number of reasons. For example, the majority of chlamydia cases are reported without race and ethnicity indicated. In 2010, 55.8 percent of reported chlamydia cases were missing race and 67.9 percent were missing ethnicity therefore disease rates for these demographic variables were not calculated. Redistributing unknown cases based on proportions of cases reported with race and ethnicity identified would be unreliable due to the high percentage of missing data.

Beginning in January 2009, Colorado began using a new STI reporting system. This system allows for electronic disease reporting and helps to reduce the reporting delays of the former paper-based case reporting processes. This has led to an improvement in the speed of partner management and treatment activities. Case information is updated as provider reports are received and interviews with patients are completed. Additionally, STI related reports are now geocoded, providing assurance that cases are attributed to the right jurisdiction for official reporting purposes and allowing for more accurate calculation of incidence rates at a geographic level.

Crude incidence rates in this report are calculated based on cases diagnosed in the calendar year per 100,000 persons. The 2010 disease incidence rates for Colorado counties are calculated by dividing the number of cases diagnosed for each county in 2010 by the 2010 census population and multiplying by 100,000.

Rates based on a small number of cases are often statistically unreliable, especially for counties with small populations or where rates are calculated for age, gender or race with small values. Crude age and gender-specific incidence rates are used for this report. The counts presented are summations of all valid data reported in the 2010 reporting year.

## **Guidelines to Prevent Misuse of Data**

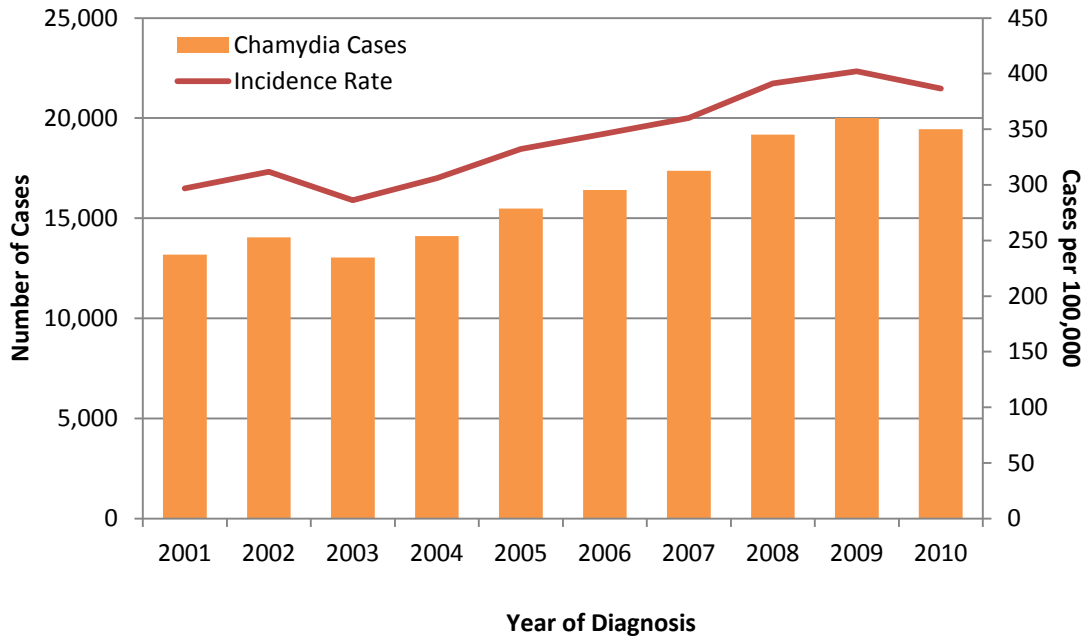
The following guidelines are provided to help prevent data misuse and misunderstanding and should always be considered when reviewing data from any source.

1. Data in this report are primarily reported for new **cases** of STIs diagnosed in 2010. They are not for unique persons diagnosed with disease, e.g. a person may have more than one infection in a single year.
2. Data in this report are based on cases reported to the STI/HIV Surveillance Program, Disease Control and Environmental Epidemiology Division, CDPHE. These data represent infections among persons seeking and receiving care for STIs.
3. Slight changes in numbers from year to year can appear dramatic if the actual number of cases is small. For example, if two cases of gonorrhea are reported in a county in one year and three cases are counted the next year, this is an increase of 50 percent. While this may sound significant, a change of one case does not represent a meaningful increase in the burden of disease. Although disease rates were calculated for counties reporting fewer than five cases, rates based on low case counts are considered statistically unreliable. Caution is recommended in interpreting trends or comparing across counties.
4. Factors that impact the completeness and accuracy of STI data include:
  - Level of STI screening by health care providers
  - Individual test-seeking behavior
  - Sensitivity of diagnostic tests
  - Compliance, completeness and timeliness of case reporting
5. Increases and decreases in STI rates can be due to actual changes in disease occurrence and/or changes in one or more of the above factors.
6. CDPHE does not maintain statistics for other, non-reportable STIs, e.g. herpes, HPV/genital warts.
7. Anyone with questions about how these data should be interpreted is encouraged to contact the STI/HIV Surveillance Program at (303) 692-2700.

## Chlamydia Infections

Chlamydia remains the most commonly reported STI in Colorado. In 2010, there were 19,447 cases diagnosed for a statewide crude incidence rate of 387 per 100,000 persons. **Figure 1** shows annual rates of chlamydia in Colorado from 2001 to 2010. Cases and rates have increased steadily from 2001 through 2010.

**Figure 1: Chlamydia Cases and Incidence Rates, Colorado, 2001-2010**

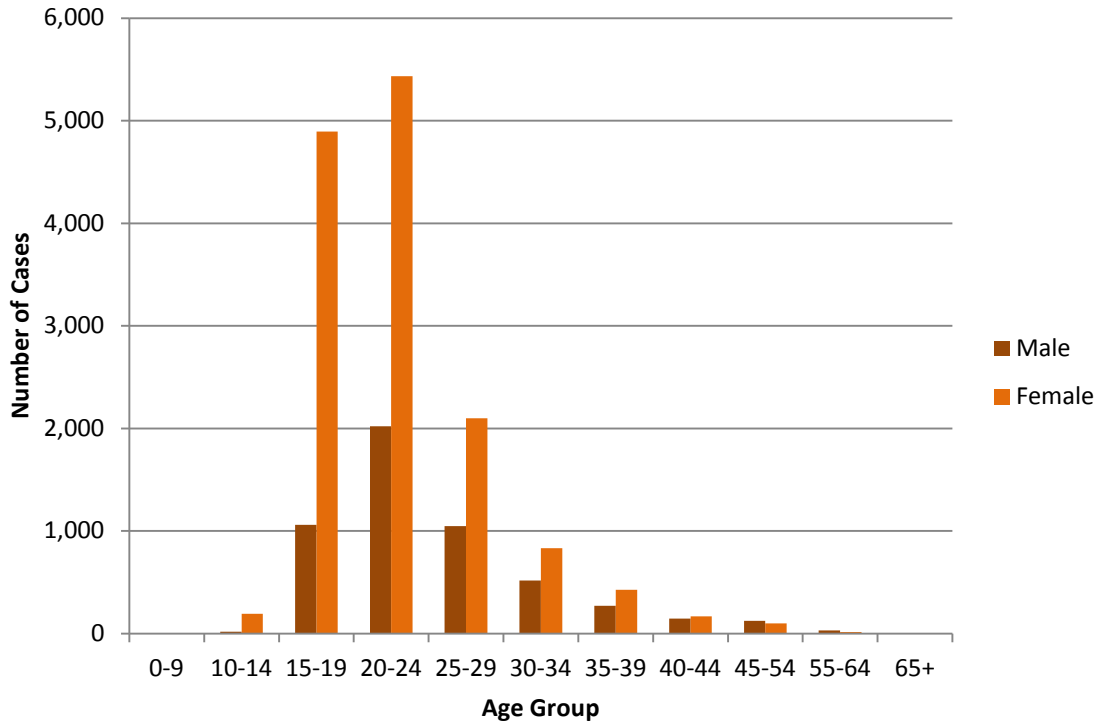


Case rates per 100,000 vary significantly by gender and age. The chlamydia incidence rate is more than two and a half times greater among females, 566 per 100,000, than males, 209 per 100,000 in 2010 (**Table 2**).

**Figure 2** shows age and gender case counts for chlamydia diagnosed in 2010. Females account for nearly three-quarters (73%) of reported chlamydia cases. Among 20-24 year olds, the chlamydia rate for females, 3257 per 100,000, is nearly three times greater than the rate for males, 1113 per 100,000.

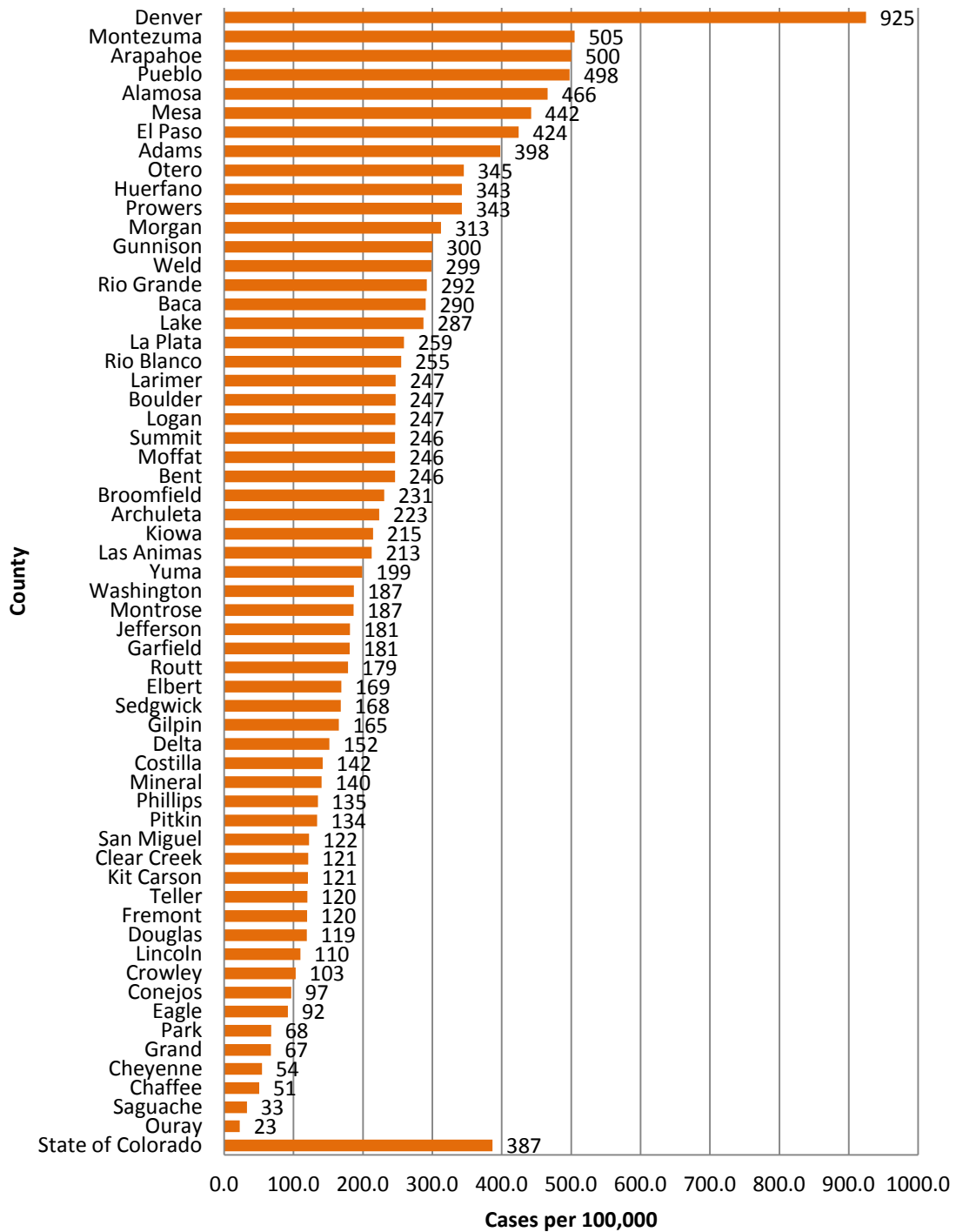
The marked difference in case rates between males and females is primarily an artifact of increased screening in women's reproductive health care settings. To a lesser degree, this difference also reflects the natural history of chlamydia infections. Males may be less susceptible to infection, are not generally symptomatic, and are less likely to access health services. The result is that chlamydia infections among males remains largely undiagnosed, untreated and unreported. Rates of reported chlamydia infections among women have been increasing annually since the late 1980s when public programs for screening and treatment were first established to prevent pelvic inflammatory disease (PID) and related complications.

**Figure 2: Chlamydia Cases by Gender and Age Group, Colorado, 2010**



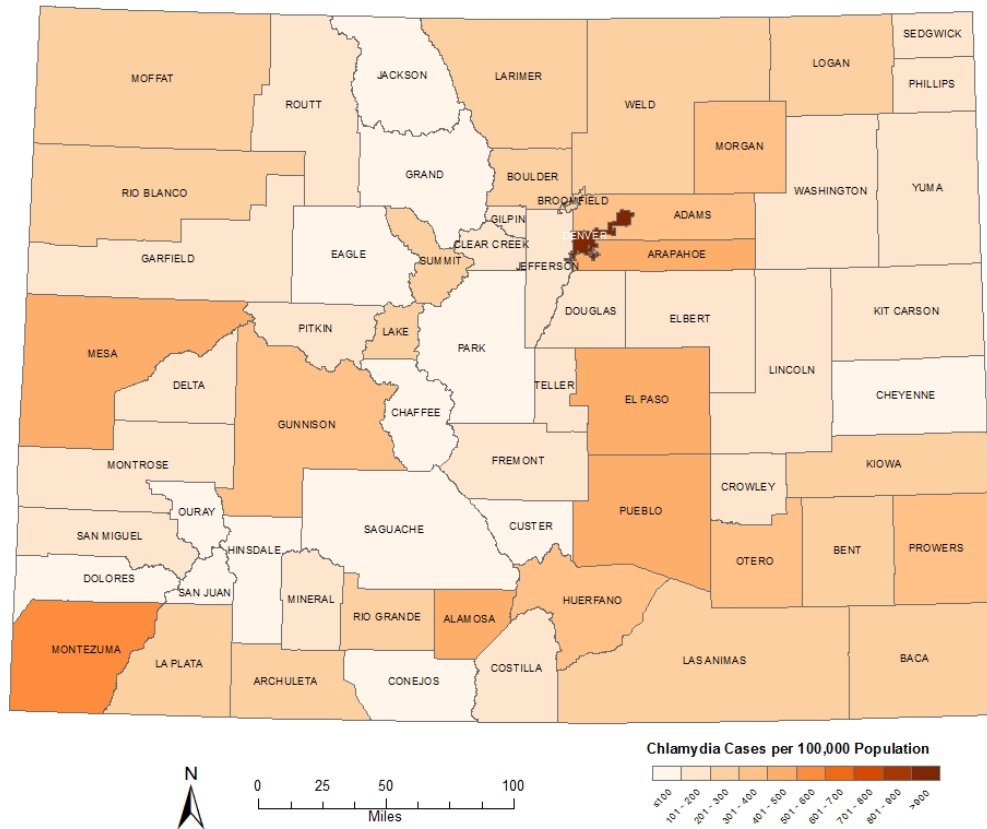
**Figure 3** shows chlamydia infection rates by county for 2010. Denver, Montezuma and Arapahoe counties had the three highest rates of reported chlamydia infections and accounted for 44 percent of chlamydia diagnoses in 2010. **Figure 4** shows the geographic distribution of chlamydia incidence rates for Colorado at the county level. As shown in both **Figures 3 & 4** chlamydia infections are concentrated in Denver County. In 2010, five rural counties reported no chlamydia infections.

**Figure 3: Chlamydia Infection Incidence Rates by County, Colorado, 2010**





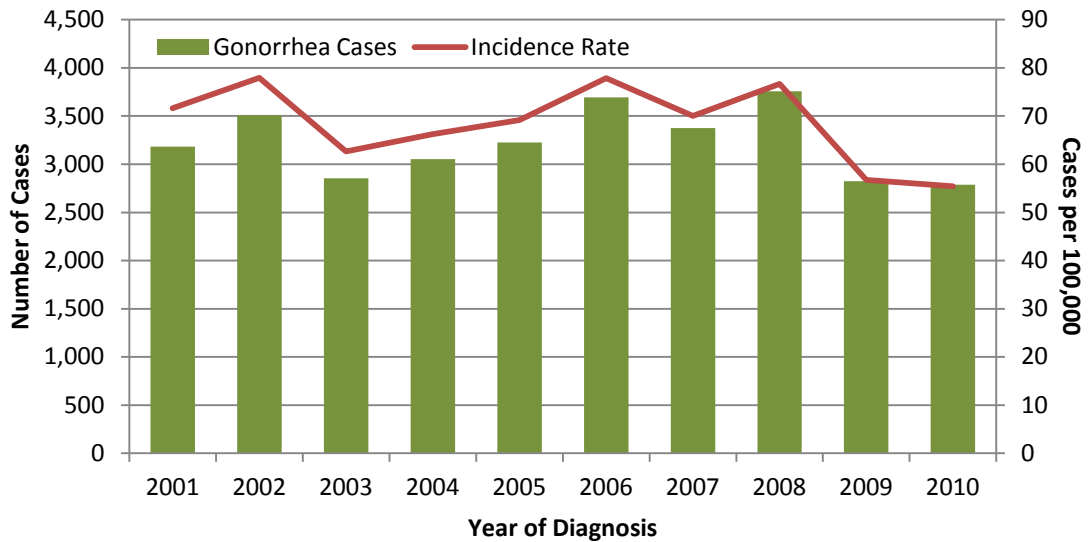
**Figure 4: Chlamydia Incidence Rates by County, Colorado, 2010**



## Gonorrhea

Gonorrhea remains the second most commonly reported STI in Colorado with 2,787 cases reported in 2010, yielding a rate of 55 per 100,000 population. There was a slight decrease in reported gonorrhea cases in 2010 compared to 2009 when 2,823 cases were reported for a rate of 56 per 100,000 population. According to the Centers for Disease Control and Prevention (CDC), the US gonorrhea rate increased from 98 per 100,000 reported in 2009 to 101 per 100,000 in 2010.<sup>1</sup>

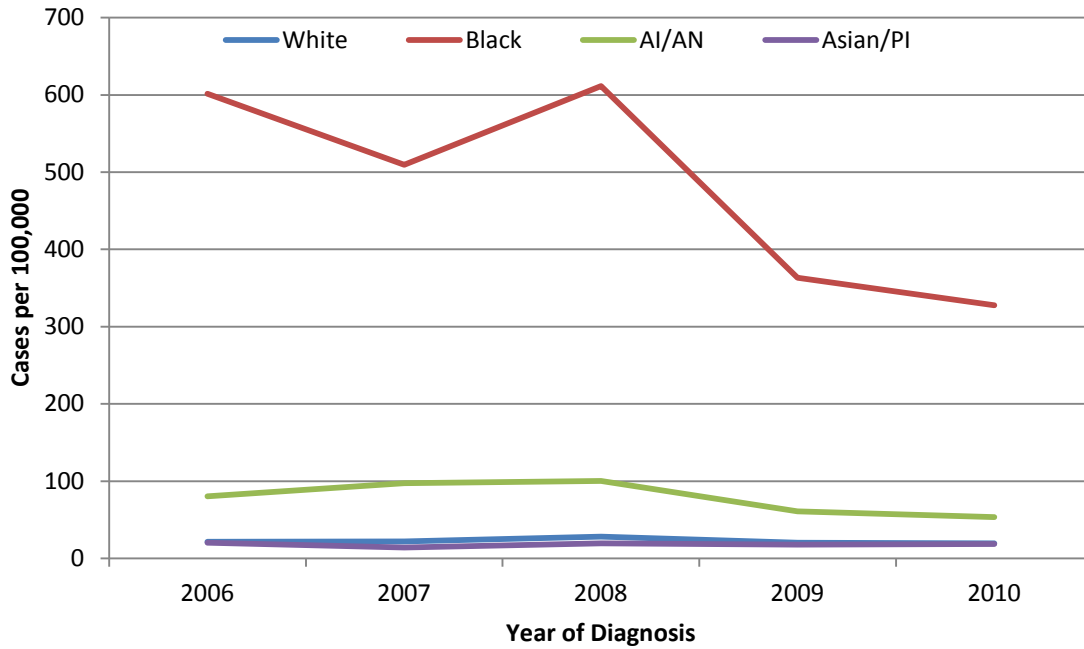
**Figure 5: Gonorrhoea Cases and Incidence Rates, Colorado, 2001-2010**



**Figure 5** shows cases diagnosed each year and the incidence rate per 100,000 from 2001 to 2010. Over this ten year period, overall gonorrhoea rates remained relatively consistent through 2008, with a noted decrease in 2009 and 2010. Persons of color continue to be disproportionately affected by STIs. Blacks represent less than four percent of Colorado’s population, but represent 23.7 percent of reported gonorrhoea cases in 2010. In 2010, gonorrhoea rates were 16.9 times higher for Blacks compared to Whites, 327.7 cases per 100,000 and 19.4 cases per 100,000, respectively.

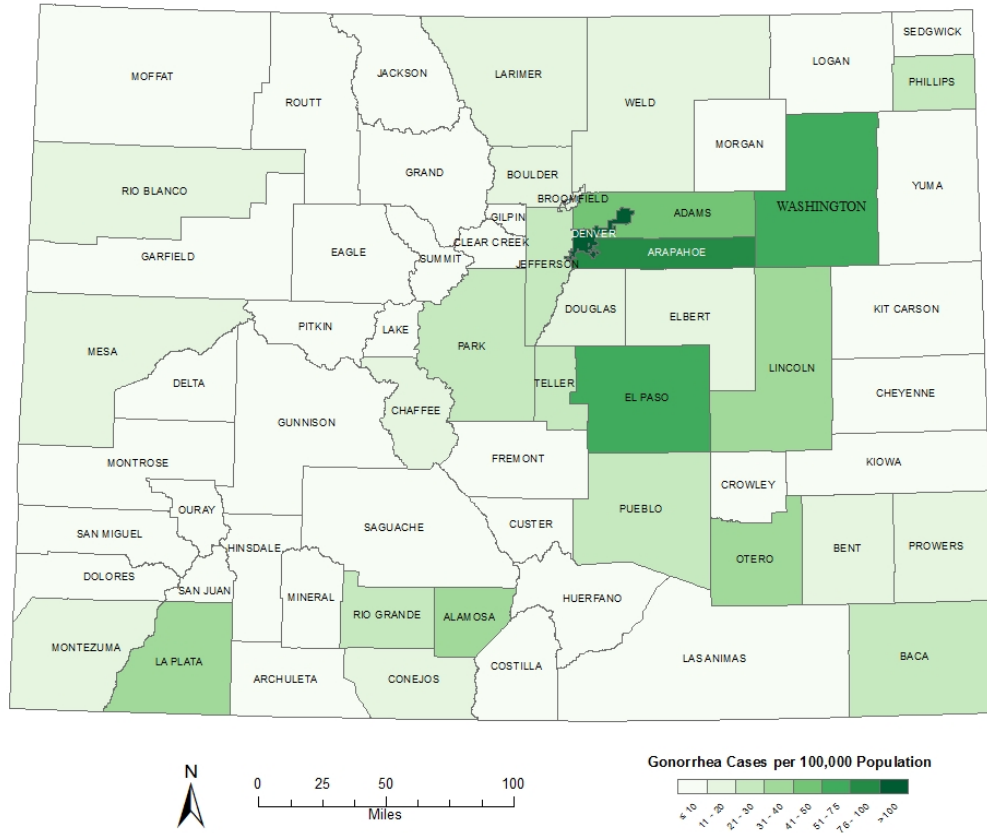
**Figure 6** shows trends in gonorrhoea rates by race for 2006 through 2010. Racial disparities are seen between Blacks and other races. The five-year average gonorrhoea rate for Blacks is 22 times higher compared to Whites. Compared to American Indian/Native Alaskans, the rate for Blacks is 6 times higher. Interpretation of gonorrhoea rates by Hispanic origin is unreliable due to missing data (47 percent of case reports), is therefore not reported.

**Figure 6: Gonorrhea Incidence Rates by Race, Colorado 2006-2010**



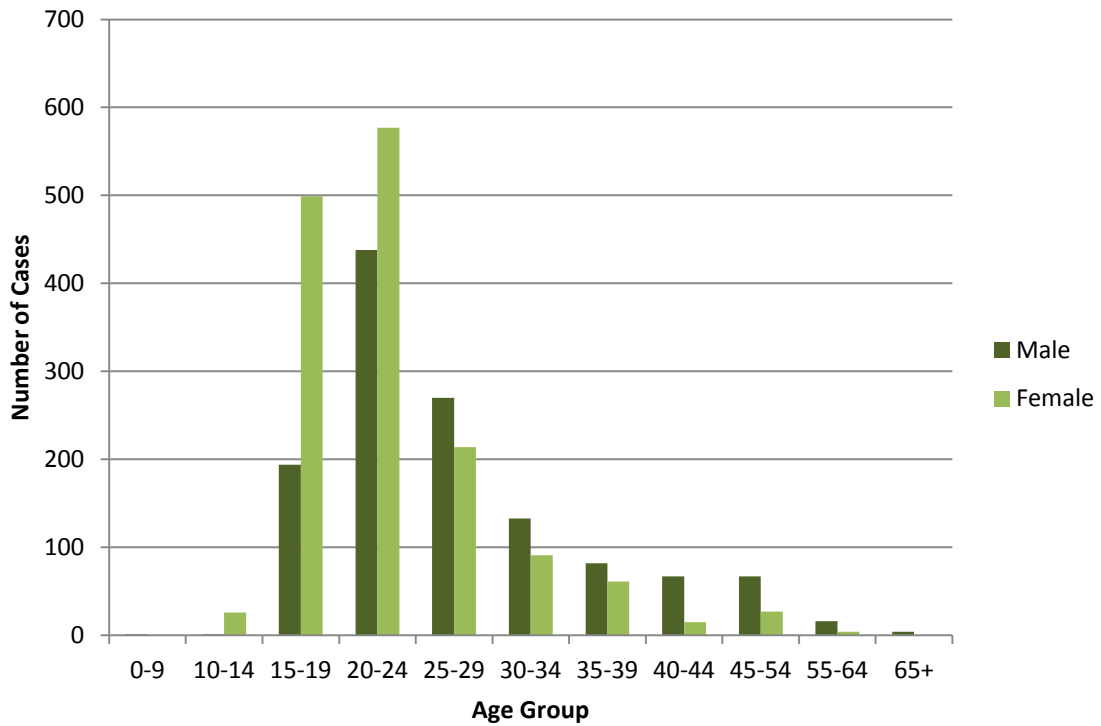
**Figure 7** shows the geographic distribution of gonorrhea incidence rates for Colorado at the county level. The map shows gonorrhea infections are not as widespread as chlamydia. Twenty-six rural counties did not report any gonorrhea cases in 2010. Seventy-eight percent of cases were reported in just three counties: Denver, El Paso and Arapahoe with Denver County accounting for 44 percent of reported cases.

**Figure 7: Gonorrhea Incidence Rates by County, Colorado, 2010**



**Figure 8** shows age and gender case counts for gonorrhea diagnosed in 2010. Females account for 54 percent of gonorrhea diagnoses. Among 15-19 year olds, the gonorrhea rate for females, 305 per 100,000, is nearly three times greater than the rate for males, 110 per 100,000.

**Figure 8: Gonorrhea Incidence rates by Gender and Age Group, Colorado, 2010**

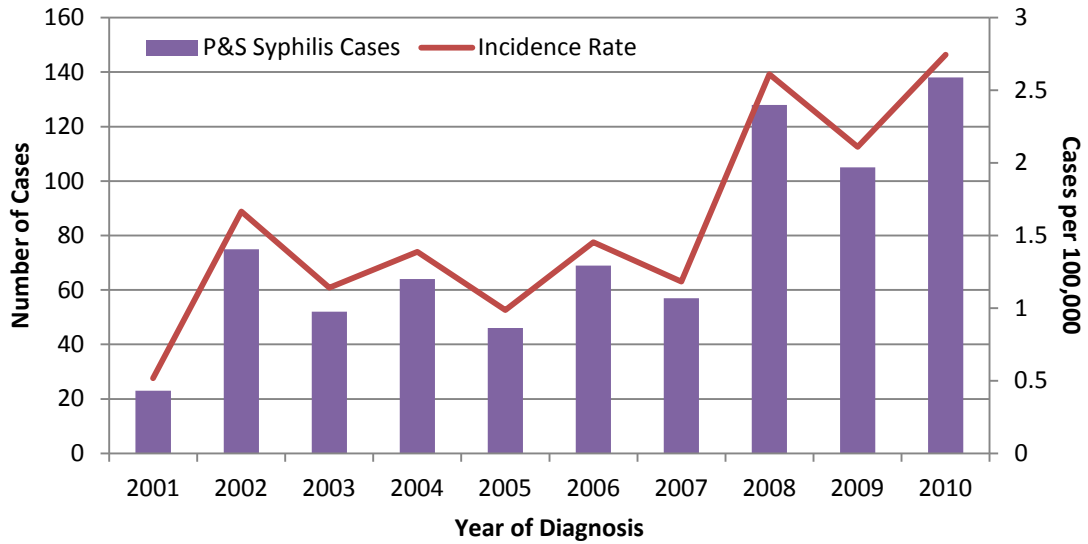


## Syphilis

There were 138 cases of primary and secondary (P&S) syphilis diagnosed and reported in 2010. From 2001 to 2010, Colorado reported a 500 percent increase in primary and secondary syphilis cases, as shown in **Figure 9**.

The syphilis epidemic is primarily occurring in non-Hispanic White males, representing 61 percent of reported cases. Additionally, 80 percent of P&S syphilis cases reported MSM risk. In 2010, the prevalence of HIV among people diagnosed with P&S syphilis was 60 percent.

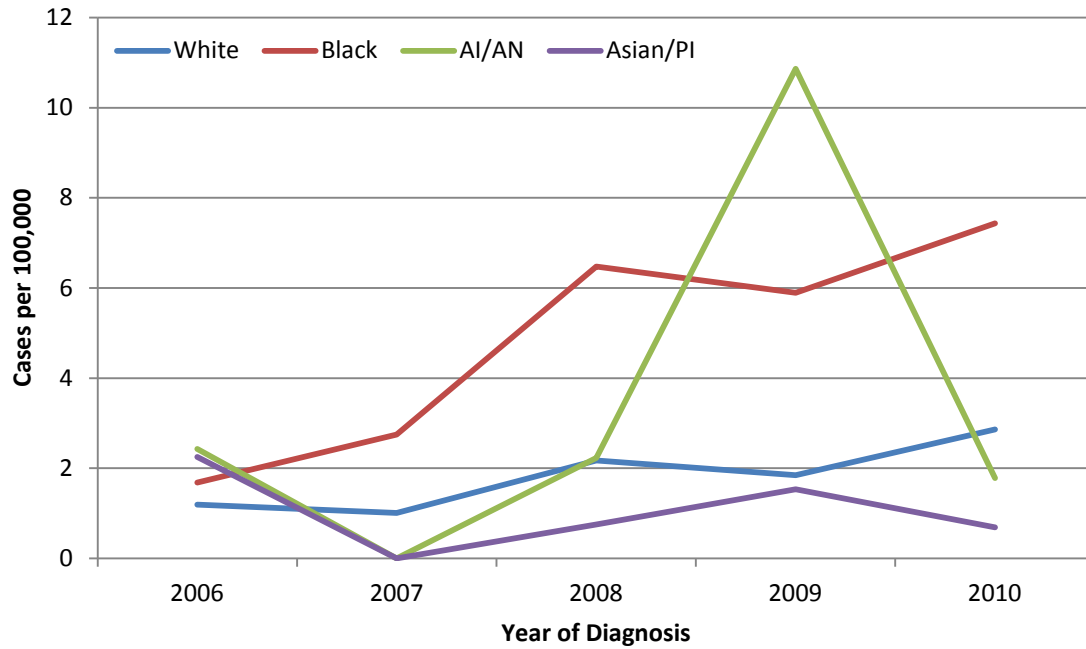
**Figure 9: Primary & Secondary Syphilis cases and Incidence Rates, Colorado, 2001-2010**



**Figure 10** shows that the highest rates of P&S syphilis are seen among Blacks, 7 per 100,000 in 2010. Although Whites account for the majority of the P&S syphilis cases, 85 percent, their infection rate is 2.6 times lower than Blacks (2.9 per 100,000 in 2010).

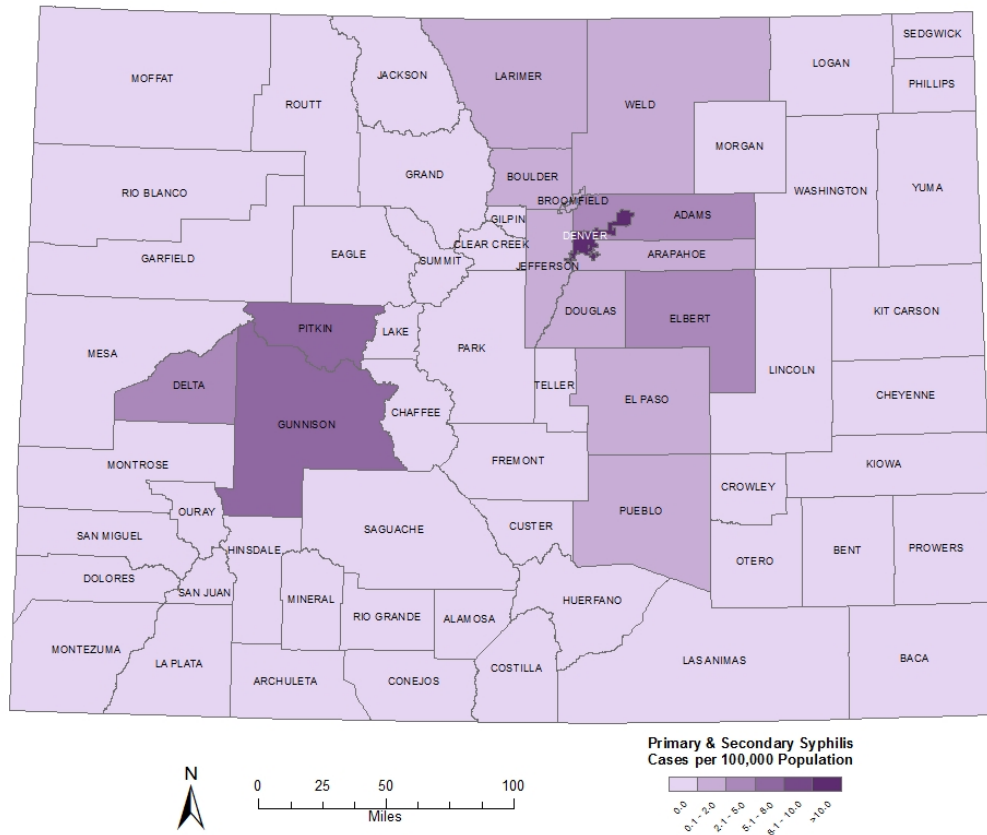
Persons of non-Hispanic origin account for the majority of diagnoses, 72 percent of P&S syphilis cases. However, crude incidence rates are equal for individuals of both Hispanic and Non-Hispanic origin, with 2.5 per 100,000 population.

**Figure 10: Primary & Secondary Syphilis Incidence Rates by Race, Colorado, 2006-2010**



**Figure 11** shows the geographic distribution of P&S syphilis incidence rates for Colorado at the county level. The map shows P&S syphilis infections have been diagnosed in 15 of 64 counties with Denver County reporting the highest proportion of cases, 65 percent in 2010. The P&S syphilis crude incidence rate in Denver County was the highest of the counties, 15 per 100,000. The next four highest rates occurred in counties with small populations and should be interpreted with caution: Gunnison, Pitkin, Elbert and Delta counties (**Table1**).

**Figure 11: Primary & Secondary Syphilis Incidence Rates by County, Colorado, 2010**



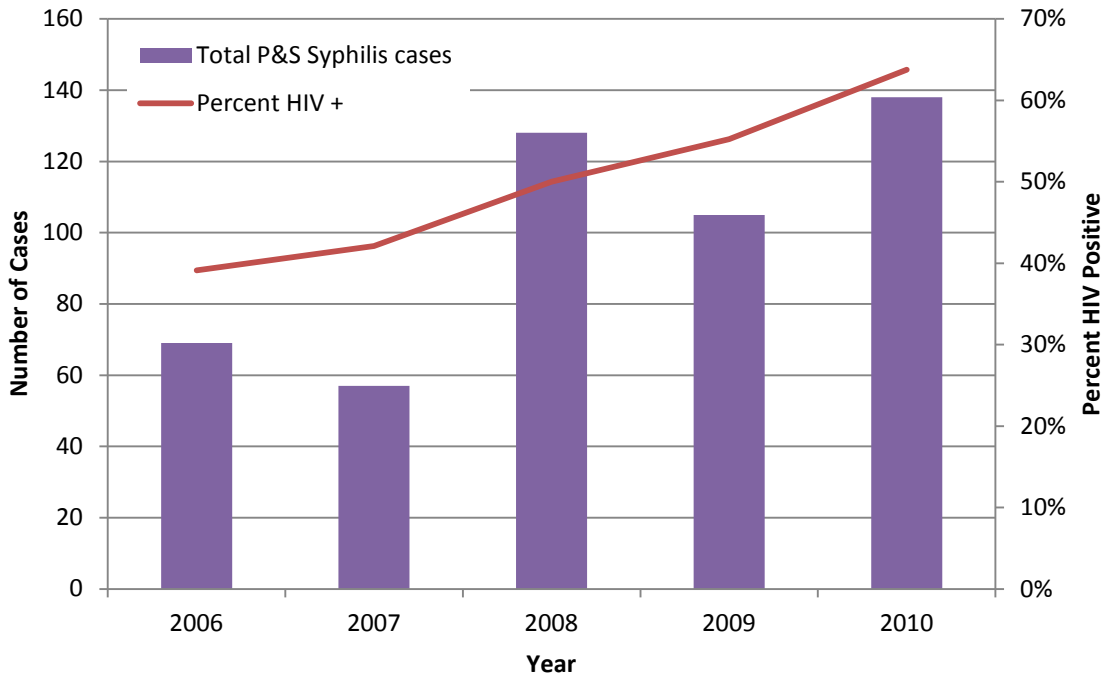
**Trends in HIV/P&S Syphilis Co-Infection**

The prevalence of HIV among persons being diagnosed with STIs can be ascertained through self-reported HIV status for patients who are interviewed during routine partner services. However, disease registry matching provides a more comprehensive method for assessing trends in HIV/STI co-infection. Separate surveillance registries are maintained for HIV disease and for other STIs. Both registries are person-based and contain sufficient data to match patients across registries. Information in the HIV surveillance system such as date of initial HIV infection can be used to determine if the patient was HIV positive at the time they were diagnosed with syphilis. These data are important in helping estimate the risk of ongoing HIV infection. In addition, STIs among HIV positive persons establishes biologic evidence of unprotected sexual behavior, creating risk potential for HIV transmission if their sex partners are uninfected. Furthermore, STIs among persons with HIV may be more challenging to treat and present more frequently with complications. At the population level, HIV/P&S syphilis co-infections add to the burden of disease in a medically fragile population.

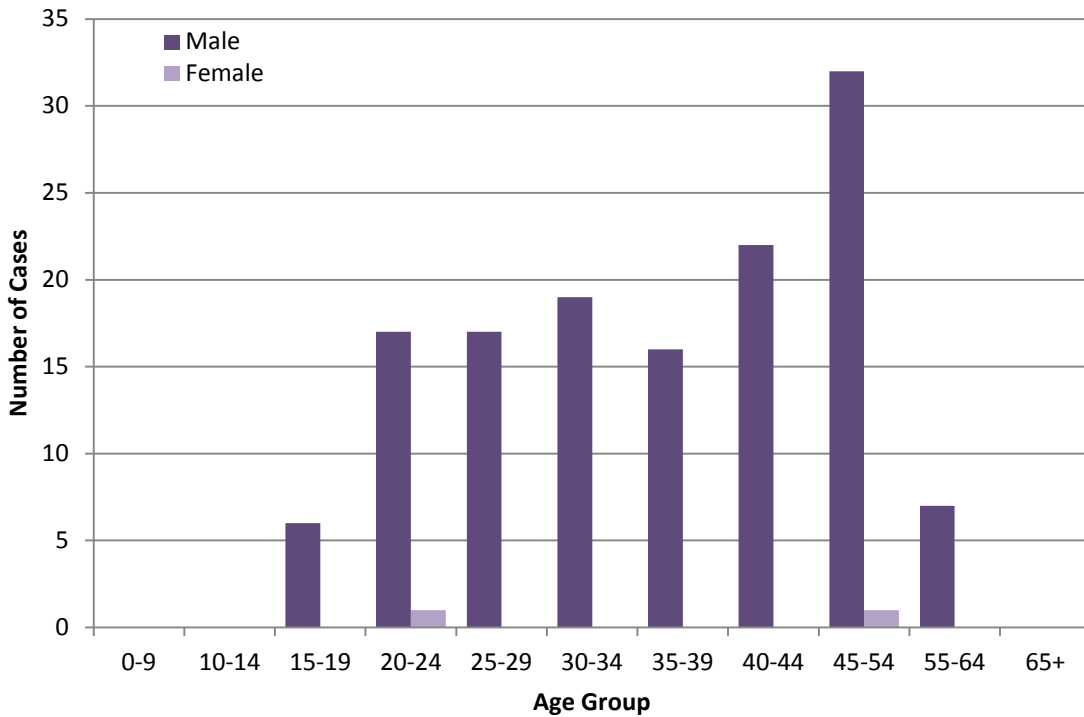
**Figure 12** shows the prevalence of HIV among people diagnosed with P&S syphilis for 2006-2010. Data for this chart are based on disease registry matching for patients reported with HIV and P&S syphilis through December 2010. Among people diagnosed with P&S syphilis, the HIV prevalence ranged from 39 percent to 64 percent. Averaging over this 5-year period, 53 percent of P&S syphilis cases were found to be HIV- positive at the time of their P&S syphilis diagnosis.



**Figure 12: P&S Syphilis Cases and percent HIV+ by Year of Diagnosis, Colorado, 2006-2010**

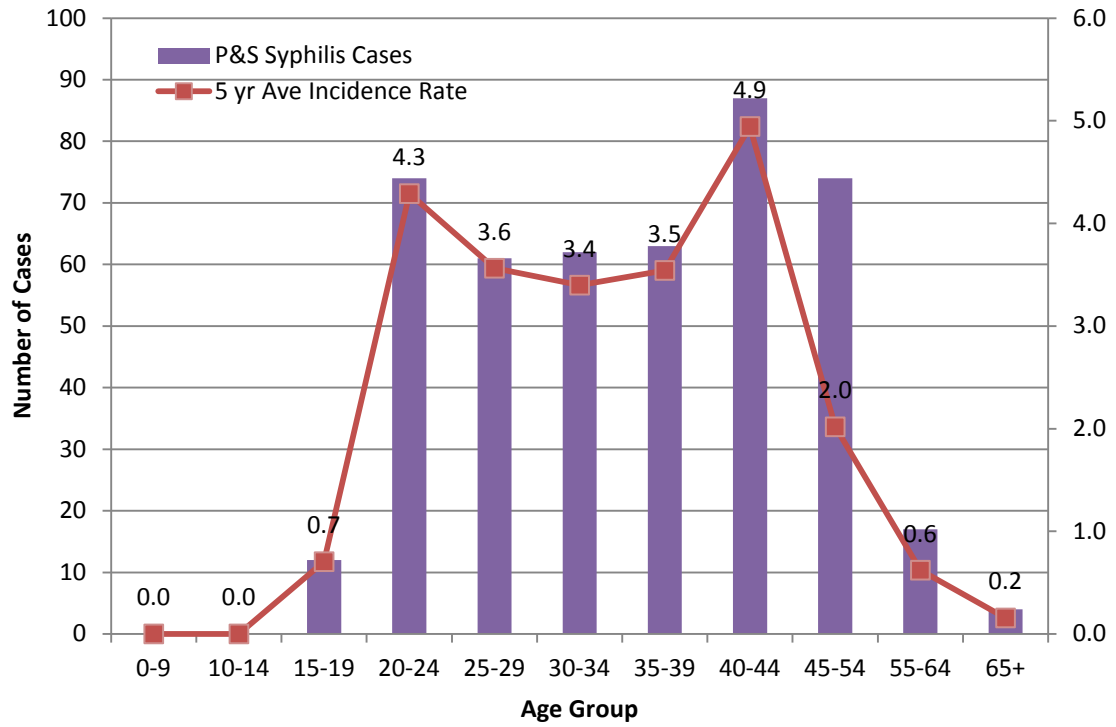


**Figure 13: P&S Syphilis Case Count by Gender and Age Group, Colorado, 2010**



**Figure 13** shows age and gender case counts for P&S syphilis diagnosed in 2010. The mean age at diagnosis is 37 with a range of 16 to 61 years of age. The highest rates were reported among 40-44 year old males whose infection rate of 13 cases per 100,000, is almost 1 ½ times the rate for 25-29 year old males, at 9 per 100,000. In 2010, 28 percent of the cases occurred among 35-44 year old males followed by 25-34 year olds, accounting for 26 percent of cases.

Figure 14: P&S Syphilis Cases and incidence Rates by Age Group, Colorado, 2006-2010



**Table 1: Chlamydia, Gonorrhea and Primary & Secondary Syphilis Cases Diagnosed and Incidence Rate with Rankings by County & Health Statistics Region (HSR), 2010**

	2010 Population	Chlamydia				Gonorrhea				Syphilis			
		Cases	Rate	County Rank*	HSR Rank^	Cases	Rate	County Rank*	HSR Rank^	Cases	Rate	County Rank*	HSR Rank^
<b>Region 1:</b>	<b>72,546</b>	<b>183</b>	<b>252.3</b>	<b>---</b>	<b>11</b>	<b>6</b>	<b>8.3</b>	<b>---</b>	<b>17</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Logan	22,709	56	246.6	22	---	1	4.4	33	---	0	0.0	16	---
Morgan	28,159	88	312.5	12	---	1	3.6	34	---	0	0.0	16	---
Phillips	4,442	6	135.1	42	---	1	22.5	16	---	0	0.0	16	---
Sedgwick	2,379	4	168.1	37	---	0	0.0	38	---	0	0.0	16	---
Washington	4,814	9	187.0	31	---	3	62.3	4	---	0	0.0	16	---
Yuma	10,043	20	199.1	30	---	0	0.0	38	---	0	0.0	16	---
<b>Region 2: Larimer</b>	<b>299,630</b>	<b>741</b>	<b>247.3</b>	<b>20</b>	<b>12</b>	<b>33</b>	<b>11.0</b>	<b>27</b>	<b>15</b>	<b>2</b>	<b>0.7</b>	<b>13</b>	<b>10</b>
<b>Region 3: Douglas</b>	<b>285,465</b>	<b>340</b>	<b>119.1</b>	<b>49</b>	<b>19</b>	<b>30</b>	<b>10.5</b>	<b>29</b>	<b>16</b>	<b>1</b>	<b>0.4</b>	<b>15</b>	<b>12</b>
<b>Region 4: El Paso</b>	<b>622,263</b>	<b>2641</b>	<b>424.4</b>	<b>7</b>	<b>5</b>	<b>395</b>	<b>63.5</b>	<b>3</b>	<b>3</b>	<b>5</b>	<b>0.8</b>	<b>12</b>	<b>9</b>
<b>Region 5:</b>	<b>38,659</b>	<b>56</b>	<b>144.9</b>	<b>---</b>	<b>18</b>	<b>6</b>	<b>15.5</b>	<b>---</b>	<b>12</b>	<b>1</b>	<b>2.6</b>	<b>---</b>	<b>2</b>
Cheyenne	1,836	1	54.5	56	---	0	0.0	38	---	0	0.0	16	---
Elbert	23,086	39	168.9	36	---	4	17.3	19	---	1	4.3	4	---
Lincoln	5,467	6	109.7	50	---	2	36.6	6	---	0	0.0	16	---
Kit Carson	8,270	10	120.9	46	---	0	0.0	38	---	0	0.0	16	---
<b>Region 6:</b>	<b>71,108</b>	<b>200</b>	<b>281.3</b>	<b>---</b>	<b>9</b>	<b>10</b>	<b>14.1</b>	<b>---</b>	<b>13</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Baca	3,788	11	290.4	16	---	1	26.4	10	---	0	0.0	16	---
Bent	6,499	16	246.2	25	---	1	15.4	23	---	0	0.0	16	---
Crowley	5,823	6	103.0	51	---	0	0.0	38	---	0	0.0	16	---
Huerfano	6,711	23	342.7	10	---	0	0.0	38	---	0	0.0	16	---
Kiowa	1,398	3	214.6	28	---	0	0.0	38	---	0	0.0	16	---
Las Animas	15,507	33	212.8	29	---	0	0.0	38	---	0	0.0	16	---
Otero	18,831	65	345.2	9	---	6	31.9	8	---	0	0.0	16	---
Prowers	12,551	43	342.6	11	---	2	15.9	20	---	0	0.0	16	---
<b>Region 7: Pueblo</b>	<b>159,063</b>	<b>792</b>	<b>497.9</b>	<b>4</b>	<b>3</b>	<b>41</b>	<b>25.8</b>	<b>12</b>	<b>6</b>	<b>2</b>	<b>1.3</b>	<b>10</b>	<b>7</b>
<b>Region 8:</b>	<b>46,027</b>	<b>123</b>	<b>267.2</b>	<b>---</b>	<b>10</b>	<b>9</b>	<b>19.6</b>	<b>---</b>	<b>8</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Alamosa	15,445	72	466.2	5	---	5	32.4	7	---	0	0.0	16	---
Conejos	8,256	8	96.9	52	---	1	12.1	25	---	0	0.0	16	---

	2010 Population	Chlamydia				Gonorrhea				Syphilis			
		Cases	Rate	County Rank*	HSR Rank^	Cases	Rate	County Rank*	HSR Rank^	Cases	Rate	County Rank*	HSR Rank^
Costilla	3,524	5	141.9	40	---	0	0.0	38	---	0	0.0	16	---
Mineral	712	1	140.4	41	---	0	0.0	38	---	0	0.0	16	---
Rio Grande	11,982	35	292.1	15	---	3	25.0	14	---	0	0.0	16	---
Saguache	6,108	2	32.7	58	---	0	0.0	38	---	0	0.0	16	---
<b>Region 9:</b>	<b>91,716</b>	<b>289</b>	<b>315.1</b>	<b>---</b>	<b>7</b>	<b>20</b>	<b>21.8</b>	<b>---</b>	<b>7</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Archuleta	12,084	27	223.4	27	---	0	0.0	38	---	0	0.0	16	---
Dolores	2,064	0	0.0	60	---	0	0.0	38	---	0	0.0	16	---
La Plata	51,334	133	259.1	18	---	16	31.2	9	---	0	0.0	16	---
Montezuma	25,535	129	505.2	2	---	4	15.7	21	---	0	0.0	16	---
San Juan	699	0	0.0	60	---	0	0.0	38	---	0	0.0	16	---
<b>Region 10:</b>	<b>100,190</b>	<b>180</b>	<b>179.7</b>	<b>---</b>	<b>16</b>	<b>4</b>	<b>4.0</b>	<b>---</b>	<b>19</b>	<b>2</b>	<b>2.0</b>	<b>---</b>	<b>4</b>
Delta	30,952	47	151.8	39	---	0	0.0	38	---	1	3.2	5	---
Gunnison	15,324	46	300.2	13	---	1	6.5	32	---	1	6.5	2	---
Hinsdale	843	0	0.0	60	---	0	0.0	38	---	0	0.0	16	---
Montrose	41,276	77	186.5	32	---	3	7.3	31	---	0	0.0	16	---
Ouray	4,436	1	22.5	59	---	0	0.0	38	---	0	0.0	16	---
San Miguel	7,359	9	122.3	44	---	0	0.0	38	---	0	0.0	16	---
<b>Region 11:</b>	<b>45,364</b>	<b>93</b>	<b>205.0</b>	<b>---</b>	<b>14</b>	<b>1</b>	<b>2.2</b>	<b>---</b>	<b>21</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Jackson	1,394	0	0.0	60	---	0	0.0	38	---	0	0.0	16	---
Moffat	13,795	34	246.5	23	---	0	0.0	38	---	0	0.0	16	---
Rio Blanco	6,666	17	255.0	19	---	1	15.0	24	---	0	0.0	16	---
Routt	23,509	42	178.7	35	---	0	0.0	38	---	0	0.0	16	---
<b>Region 12:</b>	<b>168,571</b>	<b>252</b>	<b>149.5</b>	<b>---</b>	<b>17</b>	<b>4</b>	<b>2.4</b>	<b>---</b>	<b>20</b>	<b>1</b>	<b>0.6</b>	<b>---</b>	<b>11</b>
Eagle	52,197	48	92.0	53	---	1	1.9	37	---	0	0.0	16	---
Garfield	56,389	102	180.9	34	---	2	3.5	36	---	0	0.0	16	---
Grand	14,843	10	67.4	55	---	0	0.0	38	---	0	0.0	16	---
Pitkin	17,148	23	134.1	43	---	0	0.0	38	---	1	5.8	3	---
Summit	27,994	69	246.5	23	---	1	3.6	34	---	0	0.0	16	---
<b>Region 13:</b>	<b>76,198</b>	<b>86</b>	<b>112.9</b>	<b>---</b>	<b>20</b>	<b>6</b>	<b>7.9</b>	<b>---</b>	<b>18</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Chaffee	17,809	9	50.5	57	---	2	11.2	26	---	0	0.0	16	---

	2010 Population	Chlamydia				Gonorrhea				Syphilis			
		Cases	Rate	County Rank*	HSR Rank^	Cases	Rate	County Rank*	HSR Rank^	Cases	Rate	County Rank*	HSR Rank^
Custer	4,255	0	0.0	60	---	0	0.0	38	---	0	0.0	16	---
Fremont	46,824	56	119.6	48	---	4	8.5	30	---	0	0.0	16	---
Lake	7,310	21	287.3	17	---	0	0.0	38	---	0	0.0	16	---
<b>Region 14: Adams</b>	<b>441,603</b>	<b>1757</b>	<b>397.9</b>	<b>8</b>	<b>6</b>	<b>190</b>	<b>43.0</b>	<b>5</b>	<b>4</b>	<b>11</b>	<b>2.5</b>	<b>6</b>	<b>3</b>
<b>Region 15: Arapahoe</b>	<b>572,003</b>	<b>2860</b>	<b>500.0</b>	<b>3</b>	<b>2</b>	<b>543</b>	<b>94.9</b>	<b>2</b>	<b>2</b>	<b>11</b>	<b>1.9</b>	<b>7</b>	<b>5</b>
<b>Region 16:</b>	<b>350,456</b>	<b>857</b>	<b>244.5</b>	<b>---</b>	<b>13</b>	<b>42</b>	<b>12.0</b>	<b>---</b>	<b>14</b>	<b>5</b>	<b>1.4</b>	<b>---</b>	<b>6</b>
Boulder	294,567	728	247.1	21	---	32	10.9	28	---	4	1.4	9	---
Broomfield	55,889	129	230.8	26	---	10	17.9	18	---	1	1.8	8	---
<b>Region 17:</b>	<b>54,085</b>	<b>59</b>	<b>109.1</b>	<b>---</b>	<b>21</b>	<b>10</b>	<b>18.5</b>	<b>---</b>	<b>10</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
Clear Creek	9,088	11	121.0	45	---	0	0.0	38	---	0	0.0	16	---
Gilpin	5,441	9	165.4	38	---	0	0.0	38	---	0	0.0	16	---
Park	16,206	11	67.9	54	---	4	24.7	15	---	0	0.0	16	---
Teller	23,350	28	119.9	47	---	6	25.7	13	---	0	0.0	16	---
<b>Region 18: Weld</b>	<b>252,825</b>	<b>756</b>	<b>299.0</b>	<b>14</b>	<b>8</b>	<b>48</b>	<b>19.0</b>	<b>17</b>	<b>9</b>	<b>3</b>	<b>1.2</b>	<b>11</b>	<b>8</b>
<b>Region 19: Mesa</b>	<b>146,723</b>	<b>649</b>	<b>442.3</b>	<b>6</b>	<b>4</b>	<b>23</b>	<b>15.7</b>	<b>21</b>	<b>11</b>	<b>0</b>	<b>0.0</b>	<b>---</b>	<b>13</b>
<b>Region 20: Denver</b>	<b>600,158</b>	<b>5551</b>	<b>924.9</b>	<b>1</b>	<b>1</b>	<b>1224</b>	<b>203.9</b>	<b>1</b>	<b>1</b>	<b>89</b>	<b>14.8</b>	<b>1</b>	<b>1</b>
<b>Region 21: Jefferson</b>	<b>534,543</b>	<b>970</b>	<b>181.5</b>	<b>33</b>	<b>15</b>	<b>140</b>	<b>26.2</b>	<b>11</b>	<b>5</b>	<b>4</b>	<b>0.7</b>	<b>13</b>	<b>10</b>
<b>Unknown</b>		<b>12</b>	<b>---</b>	<b>---</b>	<b>---</b>	<b>2</b>	<b>---</b>	<b>---</b>	<b>---</b>	<b>1</b>	<b>---</b>	<b>---</b>	<b>---</b>
<b>STATEWIDE TOTAL</b>	<b>5,029,196</b>	<b>19447</b>	<b>386.7</b>	<b>---</b>	<b>---</b>	<b>2787</b>	<b>55.4</b>	<b>---</b>	<b>---</b>	<b>138</b>	<b>2.7</b>	<b>---</b>	<b>---</b>

\*Counties ranked by STI incidence rate per 100,000 population

^Health Statistics Regions ranked by STI incidence rate per 100,000 population

All STI surveillance data reported to the Colorado Department of Public Health and Environment for the year 2010.

**Table 2: Chlamydia, Gonorrhea and Primary & Secondary Syphilis Cases Diagnosed by Demographic Characteristics, 2010**

	2010 Population ^	Chlamydia			Gonorrhea			Syphilis*		
		Cases	%	Rate†	Cases	%	Rate†	Cases	%	Rate†
<b>Total</b>	5,029,196	19,447	100.0	386.7	2,787	100.0	55.4	138	100.0	2.7
<b>Gender</b>										
Male	2,520,662	5,259	27.0	208.6	1,273	45.7	50.5	136	98.6	5.4
Female	2,508,534	14,188	73.0	565.6	1,514	54.3	60.4	2	1.4	0.1
<b>Race</b>										
White	4,089,202	4,552	23.4	111.3	794	28.5	19.4	117	84.8	2.9
Black	201,737	1,676	8.6	830.8	661	23.7	327.7	15	10.9	7.4
American Indian	56,010	143	0.7	255.3	30	1.1	53.6	1	0.7	1.8
Asian/PI	145,651	133	0.7	91.3	27	1.0	18.5	1	0.7	0.7
Other	536,596	2,099	10.8	391.2	223	8.0	41.6	4	2.9	0.7
Unknown		10,844	55.8	-	1,052	37.7	-	0	0.0	-
<b>Hispanic Origin</b>										
Hispanic	1,038,687	3,338	17.2	321.4	546	19.6	52.6	26	18.8	2.5
Non Hispanic	3,990,509	2,908	15.0	72.9	922	33.1	23.1	99	71.7	2.5
Unknown		13,201	67.9	-	1,319	47.3	-	13	9.4	-
<b>Age Group</b>										
0 to 9	692,563	8	0.0	1.2	1	0.0	0.1	-	-	-
10 to 14	332,654	214	1.1	64.3	27	1.0	8.1	-	-	-
15 to 19	339,475	5,956	30.6	1754.5	693	24.9	204.1	6	4.3	1.8
20 to 24	348,615	7,457	38.3	2139.0	1,015	36.4	291.2	18	13.0	5.2
25 to 29	372,459	3,147	16.2	844.9	484	17.4	129.9	17	12.3	4.6
30 to 34	353,819	1,351	8.5	381.8	224	8.0	63.3	19	13.8	5.4
35 to 39	353,605	701	3.6	198.2	143	5.1	40.4	16	11.6	4.5
40 to 44	346,039	315	1.6	91.0	82	2.9	23.7	22	15.9	6.4
45+	1,889,967	284	1.5	15.0	118	4.2	6.2	40	29.0	2.1

\*Primary and Secondary Syphilis

^2010 Census Population

†Rate per 100,000

## References

Colorado Department of Public Health and Environment, Disease Control and Environmental Epidemiology Division, Colorado Revised Statutes § 6 CCR 1009-1, Rules and Regulations Pertaining to Epidemic and Communicable Disease Control (Promulgated by The State Board of Health). <http://www.cdphe.state.co.us/regulations/diseasecontrol/100901epidemiccommunicablediseasecontrol.pdf>. Amended November 17, 2010.

Centers for Disease control and Prevention. *Sexually Transmitted Disease Surveillance 2010*. Atlanta: U.S. Department of Health and Human Services; 2011;138. <http://www.cdc.gov/std/stats>.