

# **SEXUALLY TRANSMITTED INFECTIONS IN NEW ORLEANS**

**February 2025**



# Executive Summary

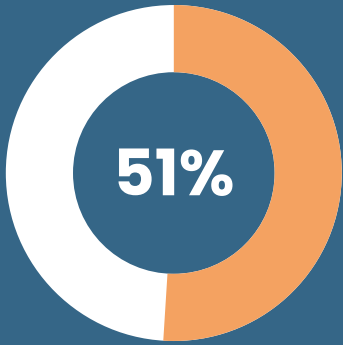
This report provides crucial insights into the rising rates of sexually transmitted infections (STIs) in New Orleans, underscoring the importance of early detection and targeted interventions to reduce transmission. It highlights demographic disparities and key risk factors that contribute to the increasing burden of STIs, particularly among Black residents and younger populations. In 2022, Louisiana ranked 1<sup>st</sup> in the nation for chlamydia, 3<sup>rd</sup> for gonorrhea, 4<sup>th</sup> for HIV, 9<sup>th</sup> for primary and secondary syphilis, and 7<sup>th</sup> for congenital syphilis.<sup>1 2</sup> Data reveals that New Orleans consistently experiences higher incidence rates than the rest of the state, making it a priority for public health efforts.

Written By: Jay England, MPH Candidate, Tulane University 2025

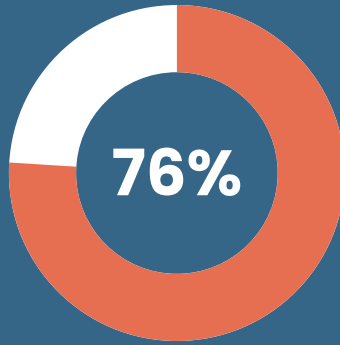
Ryann Martinek, MPH, Sexual & Reproductive Health Specialist, New Orleans Health Department

# AT A GLANCE

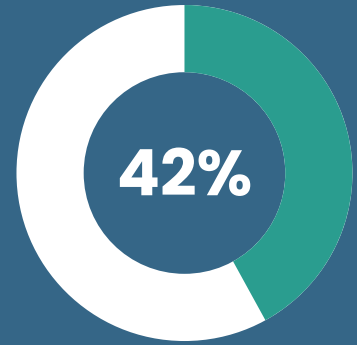
Of all bacterial STI cases diagnosed in New Orleans in 2023...



were diagnosed in male residents



were diagnosed in Black residents



were diagnosed in residents ages 20 - 29

**2** in every **100** individuals were diagnosed with a bacterial STI in New Orleans in 2023



On a national scale, Louisiana ranks...

**1st**

in new chlamydia cases

**3rd**

in new gonorrhea cases

**7th**

in new congenital syphilis cases

# IN FOCUS: SYPHILIS



Incidence rates of primary and secondary syphilis in New Orleans have increased by **6%** between 2018 and 2023.

Syphilis is the most contagious and transmissible during the primary and secondary stages.



Incidence rates of late or unknown stage syphilis in New Orleans have increased by **28%** between 2018 and 2023.



This signals a need for increased access to testing and treatment resources.



## HEALTH CONSEQUENCES

If left untreated, syphilis can cause damage to the heart, blood vessels, brain, and nervous system.

**Syphilis is a curable infection. Early detection and treatment can reduce the long-term health consequences.**

# IN FOCUS: CONGENITAL SYPHILIS



In the last 5 years, the incidence rate of congenital syphilis in New Orleans has increased by **100%**

Point-of-care testing and treatment of pregnant persons and their partners can significantly reduce the rate of congenital syphilis.



Prenatal syphilis testing should occur during the first trimester, between 28 – 32 weeks, and at delivery.

The most commonly missed opportunity to prevent congenital syphilis in 2022 was the third trimester screening.



## HEALTH CONSEQUENCES

Congenital syphilis can result in severe health complications for the baby, including pre-term birth, developmental issues of the nervous system, bones and joints, miscarriage, or stillbirth.

# IN FOCUS: HIV



Incidence rates of HIV cases among New Orleans youth aged 15–19 have increased by **200%** in the last year.

This sudden increase highlights the need for educational and preventative measures for youth, like comprehensive sex education.



In 2023, the rate of co-infection between HIV and syphilis has **decreased by 33%**

This is a positive trend, as co-infection can complicate treatment outcomes for both syphilis and HIV.



New Orleans carries a significant portion of Louisiana's HIV burden, with 33.2 cases of HIV per 100,000 residents.

**HIV is a treatable condition. Through early detection and consistent use of ART, people living with HIV live long and happy lives.**

## Introduction

Sexually transmitted infections (STIs) represent a significant public health challenge, affecting millions of individuals annually in the United States.<sup>3</sup> STIs can lead to severe health complications if left untreated, including chronic pain, organ damage, cancer, infertility, and an increased risk of acquiring other infections. Understanding the incidence and effects of STIs within our community is essential for effective prevention and intervention efforts.

This 2024 report provides a comprehensive overview of the STI landscape in Orleans Parish. It aims to present data on the incidence and prevalence of various STIs, identify trends over time, and highlight populations at higher risk. By doing so, we hope to inform public health strategies, improve community awareness, and enhance the effectiveness of sexual health programs.

The STIs covered in this report include chlamydia, gonorrhea, syphilis, congenital syphilis, and HIV. It is important to note that while cases of trichomoniasis and pubic lice (bacterial infections) and herpes, human papillomavirus (HPV), and hepatitis B (viral infections) exist in New Orleans, limited regional and statewide data tracking prevents accurate reporting on the case load and health burden of these STIs. Each section provides detailed statistics, demographic breakdowns, and insights into the social determinants of health that influence STI transmission and outcomes. Additionally, the report discusses recommendations for reducing the burden of STIs in New Orleans.

Accurate and accessible information is crucial for combating the spread of STIs and supporting those affected. We hope this report serves as a valuable resource for healthcare providers, policymakers, community organizations, and the general public.

## Methodology

Information utilized in this report was gathered from the Louisiana Department of Health's STD/HIV/Hepatitis Program (SHHP) regional profiles, 2022 National CDC STD Rankings, and the Louisiana HIV, AIDS, Early Syphilis, and Congenital Syphilis Surveillance March 2024 Quarterly Report, focusing on data from Orleans Parish. Please note that data gathered from 2023 is the most recent regional data available and was considered to be in preliminary analysis during the creation of this report. Data on the number of STI tests administered was not available at the time of writing this report. As a result, the trends discussed are based solely on positive test results and do not account for variations in test availability or usage.

## Definitions

Below are definitions to assist in reading this report. Please note that each section will provide a definition for the sexually transmitted infection being highlighted.

**Asymptomatic:** a person who is infected with a disease but does not show any physical symptoms, despite being able to transmit the infection to others.

**Co-infection:** when an individual is infected with more than one pathogen at the same time. In the context of this report, co-infection data was only available for syphilis and HIV.

**Cure:** the complete elimination of a disease or infection where no further treatment is needed, and the person is no longer contagious.

**Incidence:** the number of new cases of a disease or condition that occur in a specific population during a defined time period.

**Prevalence:** the total number of cases of a disease, both new and existing, in a specific population at a given time.

**Risk Factors:** characteristics, behaviors, or conditions that increase the likelihood of developing a disease or infection. Risk factors in this report include gay/bisexual men who have sex with men, people who inject drugs, heterosexual contact (not gay/bisexual men), drug use, sex for money or drugs, and incarcerated in the past 12 months.

**Sex at Birth:** the biological classification of an individual as male or female based on physical characteristics such as chromosomes or genitalia, usually assigned at birth. A note that not all the data captured in this report accurately accounts for transgender or non-binary residents.<sup>4</sup>

**Sexually Transmitted Infection (STI):** bacterial, parasitic, or viral infections primarily transmitted through sexual contact, including vaginal, anal, or oral sex. Transmission fluids for STIs include seminal fluid, vaginal fluid, rectal fluid, blood and breastmilk.

Additionally, STIs can be transmitted if persons living with STIs share needles or syringes (HIV and Hepatitis B) and through skin-to-skin contact with the infected area (pubic lice, syphilis herpes, HPV). Lastly, chlamydia, gonorrhea, syphilis, herpes, HPV, and HIV can be passed from a pregnant person to either a fetus in-utero or to an infant during childbirth.

**STI Testing:** the process of screening individuals for STIs, typically through urine, blood, or swab samples. Testing is the only mechanism that reliably confirms STI status.

**Social Determinants of Health:** non-medical factors that influence health outcomes, such as the conditions in which people are born, grow, live, work, and age.<sup>5</sup>

**Treatment:** medical care given to manage, reduce, or eliminate the symptoms of a disease or infection.

**Window Period:** the time between exposure to an infection and when it can be accurately detected by a test.

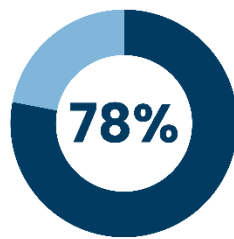


## Acknowledgements

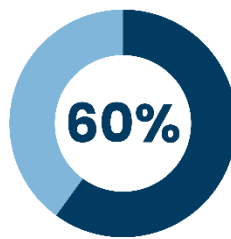
The New Orleans Health Department would like to acknowledge the contributions of the Louisiana Department of Health, specifically the STD/HIV/Hepatitis (SHHP). Without their diligent data collection, this report would not have been possible.

## Chlamydia

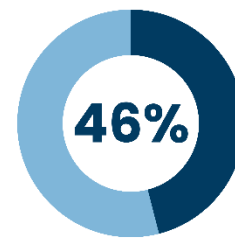
### Of all diagnosed chlamydia cases in New Orleans in 2023...



were diagnosed in  
Black residents  
(*n*=3,548)



were diagnosed in  
female residents  
(*n*=2,720)



were diagnosed in  
residents aged 20-29  
(*n*=2,075)

Chlamydia is a bacterial infection spread through vaginal, anal, or oral sex with an infected person.<sup>6</sup> It can also be transmitted from an infected birthing parent to their baby during childbirth. Individuals with chlamydia often do not develop any symptoms or develop symptoms weeks after exposure. In women, symptoms can include abnormal vaginal discharge or a burning sensation when urinating. In men, symptoms may include penile discharge, a burning sensation when urinating, or swollen testicles. Even in the absence of symptoms, chlamydia can cause significant health issues. If left untreated, chlamydia can cause pelvic inflammatory disease, increase the likelihood of contracting other STIs, and result in permanent sterility in males and females. Chlamydia can be treated and cured with antibiotics. It is important for all sexual partners to be treated to prevent further transmission and/or reinfection.

### Incidence Rates

The incidence rates of chlamydia provide a critical understanding of the impact of these conditions in New Orleans. In 2023, there were 4,549 new cases of chlamydia in New Orleans, providing an incidence rate of 1,230.3 per 100,000 population.<sup>7</sup>

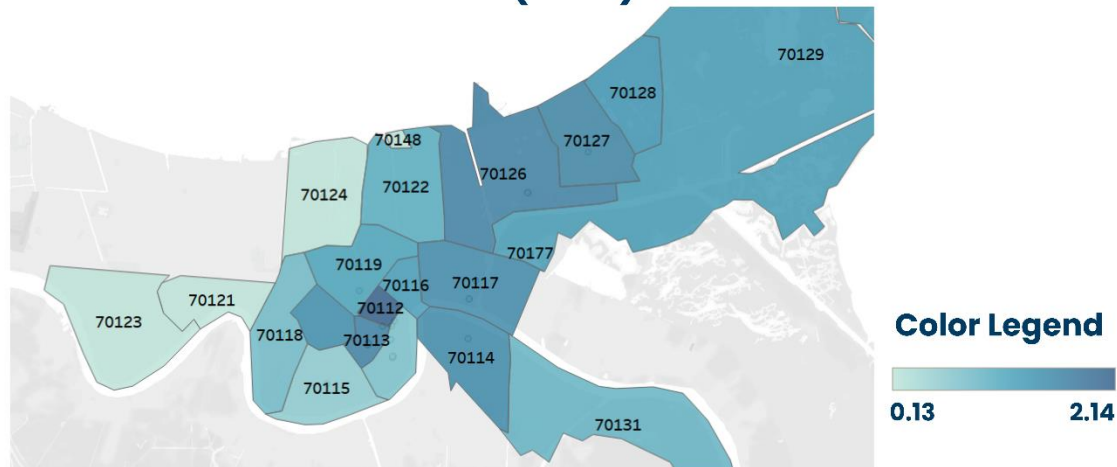
2023 Incidence Rate of Chlamydia per 100,000	
United States	492.2 <sup>8</sup>
Louisiana	792.4 <sup>9</sup>
New Orleans	1,230.0 <sup>7</sup>

## Demographic Breakdown

The distribution of chlamydia cases by sex at birth reveals that females have a slightly higher disease burden compared to males.<sup>7</sup> The data indicates that 60% of new chlamydia cases are female, while 40% are male. In 2023, 78% (n=3,548) of new chlamydia cases occurred among Black residents, 11% (n=511) among White residents, 2% (n=86) among Hispanic/Latino residents, 1% (n=34) among Asian residents, and 8% (n=358) among other racial/ethnic groups. The largest percentage of individuals diagnosed with chlamydia in New Orleans in 2023 were between the ages of 20-29 (46%), followed by ages 10-19 (30%).

The geographic distribution of chlamydia cases highlights areas with the highest infection burden. When comparing zip codes by incidence rates per 100 residents, the following zip codes reported the highest disease burden: 70112 (2.14), 70113 (1.68), 70126 (1.68), 70127 (1.62), 70117 (1.57). The heat maps below illustrate the infection burden, with the darker colors signifying a higher incidence rate.

### Chlamydia Incidence Rates per 100 Cases by Zip Code (2023)



#### Leading Zip Codes with Chlamydia Incidence Rates in 2023

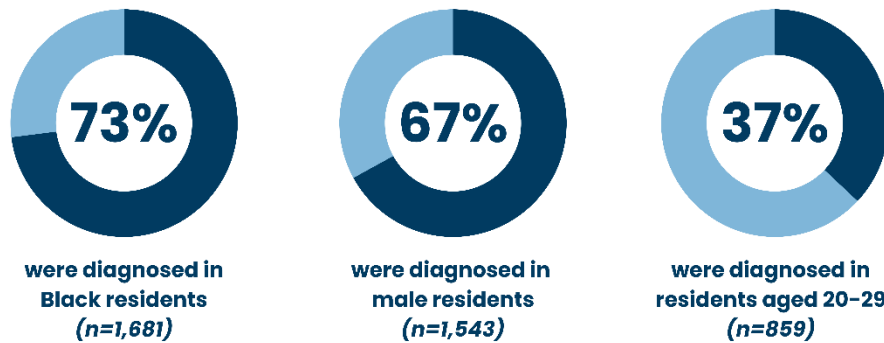
Zip Code	Chlamydia Case Count	Chlamydia Incidence per 100
70112	139	2.14
70113	146	1.68
70126	483	1.68
70127	406	1.62
70117	440	1.57

## Trends over Time

While the total number of new chlamydia cases in Orleans Parish has decreased by 8% over the past five years (2018–2023), cases increased by 4% between 2022 and 2023. <sup>7</sup> Zip code 70129 saw the highest rise in incidence between 2018 and 2023, with a 45% increase, followed by 70125 (14% increase) and 70112 (13% increase). The distribution of burden of infection by demographic characteristics has remained relatively consistent, with Black residents, females, and individuals aged 20–29 being the most affected throughout this period.

## Gonorrhea

### Of all gonorrhea cases in New Orleans in 2023...



Gonorrhea is a bacterial infection transmitted through vaginal, anal, or oral sex. It can also be passed from birthing parent to child during childbirth.<sup>10</sup> Most individuals do not display symptoms but are still at risk for health complications if they do not receive treatment. Symptoms can include a painful or burning sensation when urinating, increased vaginal discharge, or a white, yellow, or green discharge from the penis, as well as vaginal bleeding between periods or painful, swollen testicles. Long-term health consequences resulting from gonorrhea include pelvic inflammatory disease, increased risk of acquiring HIV, and, in rare instances, infertility or blood and joint complications. Gonorrhea can be treated with antibiotics but has become increasingly resistant to certain drugs in recent years. Due to its growing antibiotic resistance, it is crucial to follow recommended prevention and treatment guidelines.<sup>11</sup>

## Incidence Rates

In 2023, there were 2,300 new cases of gonorrhea in Orleans Parish, providing an incidence rate of 622.0 cases per 100,000 population.<sup>7</sup>

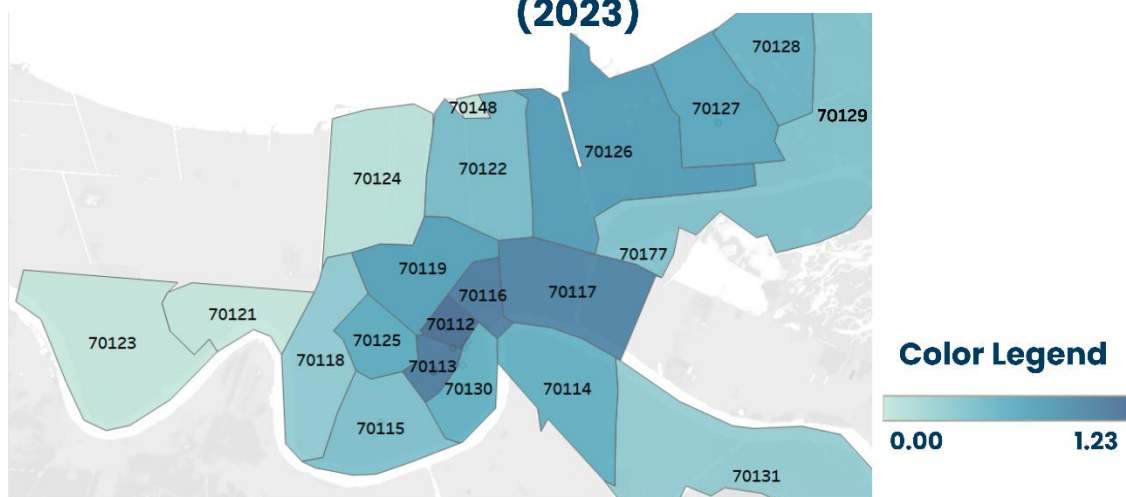
2023 Incidence Rate of Gonorrhea per 100,000	
United States	179.5 <sup>8</sup>
Louisiana	288.4 <sup>12</sup>
New Orleans	622.0 <sup>7</sup>

## Demographic Breakdown

The distribution of gonorrhea cases by sex at birth indicates that males carry a significant portion of the health burden, with 67% of cases in 2023 being diagnosed in males.<sup>7</sup> The breakdown of cases by race/ethnicity shows that 73% of new gonorrhea cases in 2023 occurred among Black residents, 19% (n=432) among White residents, 2% (n=39) among Hispanic/Latino residents, and 1% (n=16) among Asian residents. The remaining 6% (n=129) occurred among other racial/ethnic groups. The majority of new gonorrhea cases in 2023 occurred in residents ages 20-29 (37%). Residents ages 30-39 accounted for the second highest at 26% (n=598), followed by individuals ages 10-19 at 22% (n=505).

When comparing zip codes by incidence rates per 100 residents, the following zip codes reported the highest burden of infection in 2023: 70112 (1.23), 70116 (1.11), 70113 (1.11), 70117 (1.02), and 70126 (0.79). The heat maps below illustrate the health burden, with the darker colors signifying a higher incidence rate.

### Gonorrhea Incidence Rates per 100 Cases by Zip Code (2023)



Leading Zip Codes with Gonorrhea Incidence Rates in 2023			
Zip Code	Gonorrhea Case Count	Gonorrhea Incidence per 100	
70112	80	1.23	
70116	123	1.11	
70113	96	1.11	
70117	286	1.02	
70126	226	0.79	

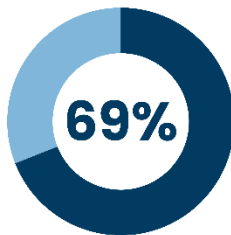
## Trends over Time

Gonorrhea cases in Orleans Parish have increased by 8% since 2018, with an observable broadening of affected demographics.<sup>7</sup> For instance, Black residents accounted for 80% of cases in 2018, compared to 73% in 2023. This change may be due to more detailed data classification, with an increase in cases among individuals identifying with multiple racial/ethnic groups, which previously made up 0% of new cases. A similar shift is seen in the 20-29 age group, which, despite remaining the largest affected group, saw a 16.5% decrease in the amount of gonorrhea cases between 2018 and 2023.

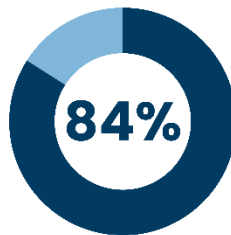
When the data is broken down by zip code, 70129 saw the sharpest rise in gonorrhea incidence rates, with a 71% increase between 2018 and 2023. Similarly, zip codes 70112 and 70115 experienced significant increases, rising by 57% and 39%, respectively. In contrast, zip code 70124 saw a notable decrease in incidence rates, dropping by 38% over the same period. The heat map above highlights the health burden, with darker colors indicating a higher incidence rate.

## Syphilis

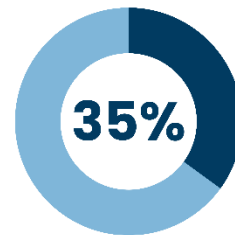
**Of all primary & secondary syphilis cases in New Orleans in 2023...**



were diagnosed in  
Black residents  
(n=114)

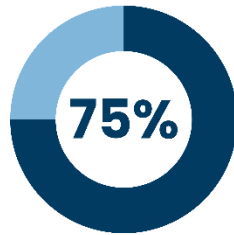


were diagnosed in  
male residents  
(n=138)

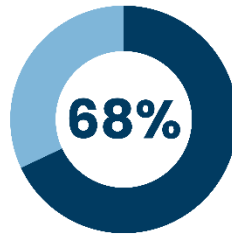


were diagnosed in  
residents aged 20-29  
(n=58)

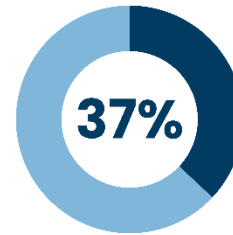
### Of all late or unknown stage syphilis cases in New Orleans in 2023...



were diagnosed in  
Black residents  
(n=224)



were diagnosed in  
male residents  
(n=203)



were diagnosed in  
residents aged 30-39  
(n=97)

Syphilis is a bacterial infection spread through direct contact with a syphilitic sore called a chancre, typically during vaginal, anal, or oral sex.<sup>13</sup> If detected, syphilis can be treated with antibiotics. Syphilis is segmented into stages, which denote the progression of the infection: primary, secondary, latent, and tertiary. Each stage has different symptoms:

- In the primary stage, sores also known as chancres may develop at the location where syphilis entered the body. Chancres can be firm, round, and painless and last between 3 to 6 weeks. While they often heal on their own, it is important to still seek treatment to prevent the infection from progressing to the secondary stage.
- In the secondary stage, rashes and sores can develop around an individual's palms, soles of the feet, mouth, vagina, or anus. The rash can be faint and non-itchy. Other symptoms can include a fever, swollen lymph glands, a sore throat, patchy hair loss, headaches, weight loss, muscle aches, or fatigue.
- The latent stage is characterized by no visible symptoms and can last for years.
- In the tertiary stage, the infection can affect the heart, blood vessels, brain, and nervous system. The tertiary stage can have severe consequences on an individual's health and occurs between 10 to 30 years after initial acquisition.

While it is curable in the early stages of the infection, syphilis poses serious health risks if left untreated. Early detection is crucial for effective treatment and to prevent complications.

Syphilis can also be transmitted from birthing parent to baby during pregnancy, referred to as congenital syphilis. Additional information on congenital syphilis can be found in the next section.

## Incidence Rates

In 2023, New Orleans had an incidence rate of 44.6 per 100,000 population for primary and secondary syphilis cases. There were 80.6 cases per 100,000 population of late or unknown stage syphilis in 2023.<sup>7</sup>

2023 Incidence Rate of Primary & Secondary Syphilis per 100,000	
United States	15.8 <sup>8</sup>
Louisiana	26.1 <sup>14</sup>
New Orleans	44.6 <sup>7</sup>

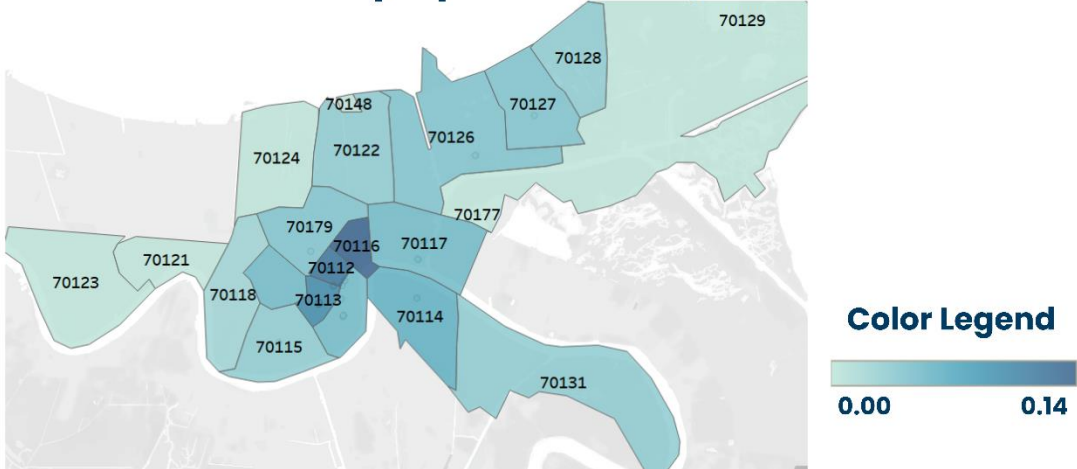
Please note, statewide and national incidence rates of late or unknown syphilis are not tracked currently by CDC, thus rates will only be expressed for the city-level data.

### Demographic Breakdown

For both primary and secondary syphilis, as well as late or unknown stage syphilis, males account for the overwhelming majority of cases.<sup>7</sup> In 2023, 84% of new cases of primary and secondary syphilis and 68% of late or unknown stage syphilis occurred in male residents. Black residents are overwhelmingly impacted by syphilis, with 69% (n=114) of all new primary and secondary syphilis cases and 75% (n=224) of all late or unknown stage syphilis cases occurring in Black residents in 2023. White residents represented the second highest proportion of cases, accounting for 22% (n=37) of new primary and secondary syphilis cases and 15% (n=46) of late or unknown stage syphilis cases. The largest percentage of individuals diagnosed with primary or secondary syphilis in New Orleans in 2023 were between the ages of 20-29 (35%, n=58), followed by ages 30-39 (27%, n=44) and 50+ (21%, n=35). For late or unknown stage syphilis, the most impacted age groups include 30-39 (33%) and 20-29 (28%, n=82).

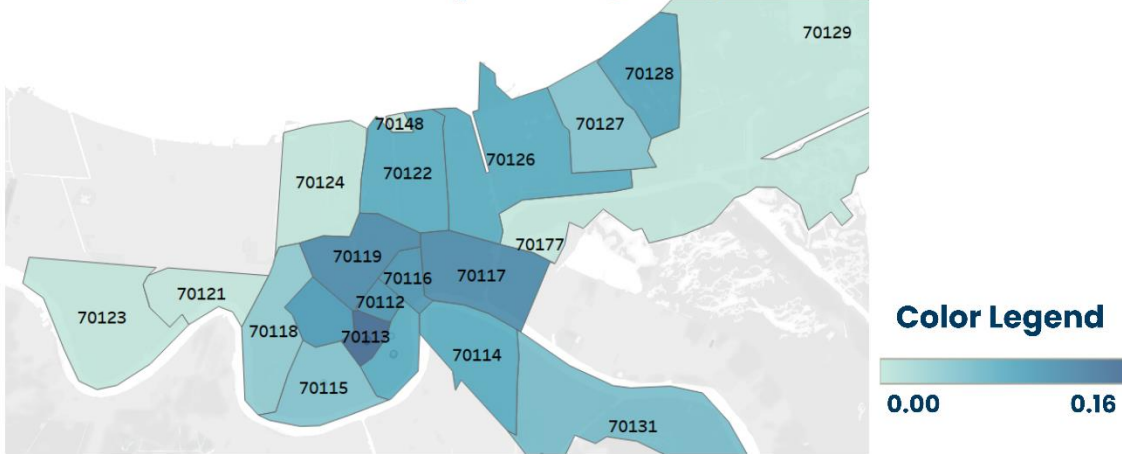
When comparing zip codes by incidence rates per 100 residents, the following zip codes reported the highest burden of infection for primary and secondary syphilis: 70116 (0.14), 70112 (0.12), 70113 (0.10), 70114 (0.06), and 70117 (0.05). Late or unknown stage syphilis incidence was highest in the following zip codes: 70113 (0.16), 70117 (0.12), 70119 (0.12), 70116 (0.11), and 70112 (0.11). The heat maps below illustrate the health burden, with the darker colors signifying a higher incidence rate.

### Primary/Secondary Syphilis Incidence Rates per 100 Cases by Zip Code (2023)



Leading Zip Codes with Primary & Secondary Syphilis Incidence Rates in 2023		
Zip Code	P&S Syphilis Case Count	P&S Syphilis Incidence
70116	15	0.14
70112	8	0.12
70113	9	0.10
70114	14	0.06
70117	15	0.05

### Late/Unknown Syphilis Incidence Rates per 100 Cases by Zip Code (2023)



Leading Zip Codes with Late or Unknown Syphilis Incidence Rates in 2023		
Zip Code	Late or Unknown Syphilis Case Count	Late or Unknown Syphilis Incidence
70113	14	0.16
70117	34	0.12
70119	41	0.12
70116	12	0.11
70112	7	0.11

### Trends over Time

Rates of primary and secondary syphilis, as well as late or unknown stage syphilis, have been rising locally over the past 5 years.<sup>7</sup> This mirrors national trends reported by the CDC, which indicate that syphilis has increased 80% in the United States between 2018 and 2022.<sup>15</sup> Louisiana ranked 9<sup>th</sup> in the United States for primary and secondary syphilis diagnoses in 2022, and Region 1 accounted for 20% of the state’s new syphilis cases in between January and March 2023.<sup>2</sup>



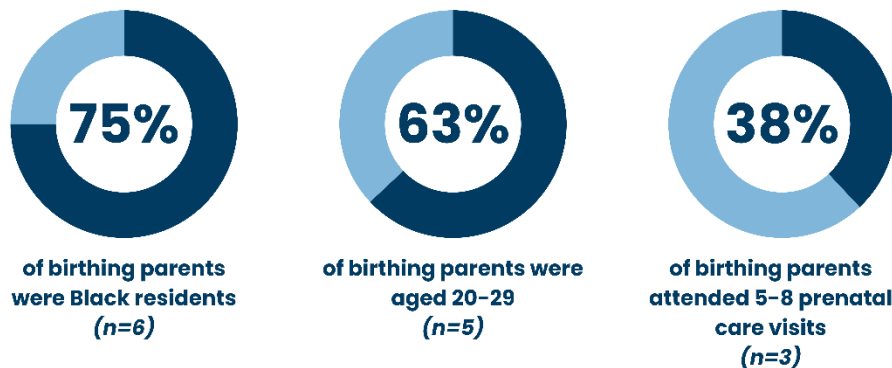
In New Orleans, primary and secondary syphilis cases have seen an increase of 6% over the past 5 years, while late or unknown stage syphilis cases have surged by 28% in the same period.<sup>7</sup> Zip codes 70114 and 70115 experienced a 100% increase in incidence rates for primary and secondary syphilis between 2018 and 2023. Throughout this time frame, residents who are Black, male, or between the ages 20-39 have consistently been the most affected by all stages of syphilis. The high incidence rate of primary and secondary syphilis is concerning, as this is when syphilis is most infectious and transmissible to others.

Additionally, the progression of syphilis across stages can take a significant amount of time, with many individuals going between having physical symptoms like chancres for periods of time and being asymptomatic. The significantly larger increase in late-stage cases suggests potential challenges in early detection and treatment. This is of particular public health concern, as untreated syphilis can have adverse health effects on the heart and brain. It is important that residents frequently test for STIs including syphilis, as the absence of symptoms does not indicate the absence of an STI.

Risk factors for acquiring syphilis include being a gay or bisexual man (GBM) who has sex with men (MSM), people who inject drugs, engaging in heterosexual contact, drug use, exchanging sex for money or drugs, and having been incarcerated in the past 12 months. Data from the past 5 years indicate that rates of syphilis are decreasing in GBM and MSM, a group that previously accounted for a disproportionate percentage of cases in New Orleans. In Louisiana as a whole, the primary risk factor for acquiring syphilis is heterosexual activity.<sup>2</sup>

## Congenital Syphilis

### Of all congenital syphilis cases in New Orleans in 2023...



Congenital syphilis occurs when syphilis is transmitted from an infected birthing parent to their baby during pregnancy.<sup>16</sup> This can result in severe health complications for the baby, including pre-term birth, developmental issues of the nervous system, bones and joints, miscarriage, or stillbirth. Congenital syphilis can be prevented through early and regular screenings during pregnancy and treatment with antibiotics. The CDC recommends that a minimum of three syphilis tests are conducted during pregnancy, occurring at the first prenatal visit, between 28-32 weeks, and at

delivery.<sup>17</sup> Adhering to recommended screenings allows physicians sufficient time to interpret the test results, begin treatment, and decrease the likelihood of pre-term birth.<sup>18</sup>

To combat rising numbers of congenital syphilis, Louisiana has implemented requirements for syphilis screening during the first prenatal visit and again during the third trimester.<sup>19</sup> A recently launched syphilis prevention pilot program from the Louisiana Department of Health offers additional syphilis screenings at every prenatal visit in select hospitals in Baton Rouge, Lafayette, and Monroe. Early detection and treatment are key to reducing congenital syphilis cases, which can be more feasible with increased opportunities for syphilis testing.

## Incidence Rate

As of 2023, there were 8 new cases of congenital syphilis in Orleans Parish, with an incidence rate of 137.2 per 100,000 population.<sup>7</sup>

2023 Incidence Rate of Congenital Syphilis per 100,000 Live Births	
United States	105.8 <sup>8</sup>
Louisiana	193.0 <sup>20</sup>
New Orleans	137.2 <sup>7</sup>

## Demographic Breakdown

Of the 2023 congenital syphilis cases, 88% (n=7) of the birthing parents had late/unknown stage syphilis. 38% of the birthing parents attended between 5-8 prenatal care visits and 25% (n=2) attended more than 14 visits.<sup>7</sup> The number of prenatal care visits was unknown for an additional 38% (n=3) of birthing parents. Black birthing parents represent a majority of the congenital syphilis cases in 2023 at 75%. Hispanic/Latino and White birthing parents each account for 13% (n=1) of remaining cases. In 2023, 63% of parents who gave birth to an infant with congenital syphilis were between 20-29 years old, while 25% (n=2) were between 30-39 years old.

## Trends over Time

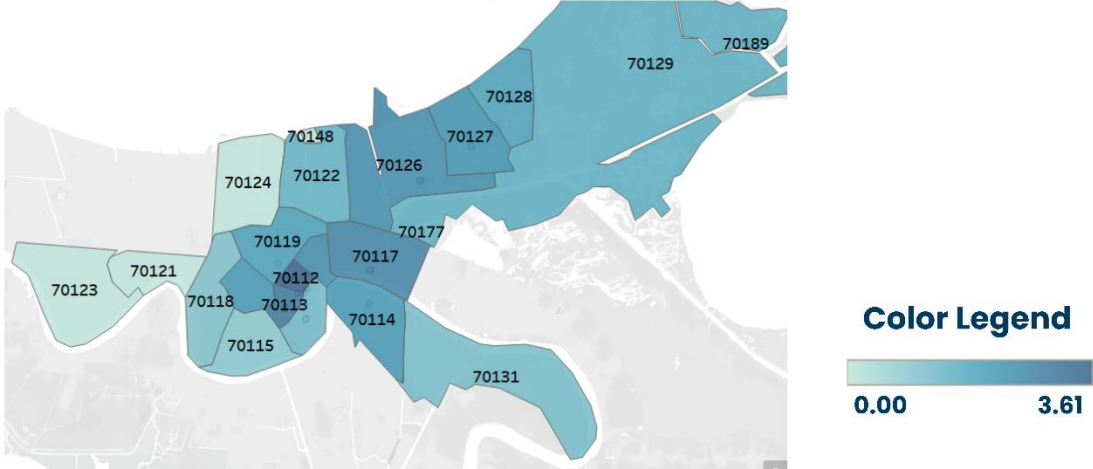
While the incidence rate for congenital syphilis appears low, it is important to note that the incidence rate has increased 100% in New Orleans between 2018 and 2023.<sup>7</sup> On a national scale, Louisiana is ranked 7<sup>th</sup> for congenital syphilis rates.<sup>1</sup> Despite mandated screenings during the first prenatal visit and the third trimester, congenital syphilis cases continue to rise. In 2022, the most commonly missed opportunity to prevent congenital syphilis was the third trimester screening.<sup>19</sup> Possible explanations for the low adherence to the third trimester screening include misconceptions about sexual activity among pregnant people and partners with syphilis remaining untreated, which leaves room for reinfection during pregnancy.

# Geographic Distribution of Bacterial STIs in New Orleans

Examining the bacterial STIs (chlamydia, gonorrhea, and syphilis), the following zip codes had the highest incidence rates per 100 residents in 2023: 70112 (3.61), 70113 (3.05), 70117 (2.76), 70116 (2.64), and 70126 (2.59).<sup>7</sup> These geographic trends suggest that certain neighborhoods may be experiencing disproportionate impacts. This warrants further investigation and may indicate the need for focused public health efforts.

The heat map below illustrates the spread of all new bacterial STI cases in New Orleans in 2023, with darker colors representing a higher burden of infection.

## All Bacterial STI Incidence Rates per 100 Cases by Zip Code (2023)



A full chart is included below with the number of new cases and incidence rates per zip code in 2023.

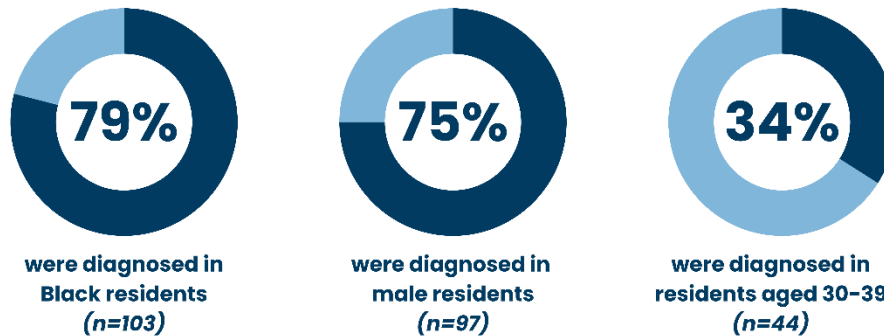
New Orleans, LA Bacterial STI Case Count and Incidence Rate by Zip Code in 2023

Zip Code	Population	Chlamydia		Gonorrhea		P&S Syphilis		Late/Unknown Syphilis		Total Case Count	Incidence per 100
		Count	Incidence	Count	Incidence	Count	Incidence	Count	Incidence		
70112	6,489	139	2.14	80	1.23	8	0.12	7	0.11	234	3.61
70113	8,686	146	1.68	96	1.11	9	0.10	14	0.16	265	3.05
70114	22,360	347	1.55	134	0.60	14	0.06	18	0.08	513	2.29
70115	32,165	186	0.58	140	0.44	10	0.03	15	0.05	351	1.09
70116	11,096	143	1.29	123	1.11	15	0.14	12	0.11	293	2.64
70117	28,079	440	1.57	286	1.02	15	0.05	34	0.12	775	2.76
70118	34,869	300	0.86	113	0.32	8	0.00	15	0.04	436	1.25
70119	35,613	428	1.20	268	0.75	15	0.04	41	0.12	752	2.11
70122	37,436	393	1.05	178	0.48	12	0.03	31	0.08	614	1.64
70124	22,864	29	0.13	17	0.07	0	0	0	0.00	46	0.20
70125	18,038	273	1.51	115	0.64	9	0.05	18	0.10	415	2.30
70126	28,769	483	1.68	226	0.79	12	0.04	23	0.08	744	2.59
70127	25,039	406	1.62	173	0.69	9	0.04	13	0.05	601	2.40
70128	18,724	262	1.40	106	0.57	6	0.03	17	0.09	391	2.09
70129	10,997	145	1.32	46	0.42	0	0.00	0	0.00	191	1.74
70130	14,533	109	0.75	87	0.60	7	0.05	12	0.08	215	1.48
70131	28,240	272	0.96	88	0.31	8	0.03	16	0.06	384	1.36

\*Black boxes indicate the highest incidence rate for the STI in the associated column.

# HIV

## Of all HIV cases in New Orleans in 2023...



Human Immunodeficiency Virus (HIV) is a virus that attacks the body's immune system and is transmitted through primarily during unprotected sex and exposure to the virus via seminal fluid, vaginal fluid, rectal fluid, or blood.<sup>21</sup> Sharing needles, syringes, or equipment used for injection drug use is the second most common way HIV is transmitted from a person living with HIV to another via blood. Lastly, HIV can also be passed from birthing parent to baby during pregnancy, childbirth through vaginal fluids and/or blood or after birth through breastfeeding, as breastmilk can carry the virus.

HIV can be managed with antiretroviral therapy (ART), a combination of medications that control the virus. Sustained use of ART can reduce the amount of HIV in the body to undetectable levels, meaning the individual cannot transmit HIV to sexual partners.<sup>22</sup> U=U (Undetectable = Untransmittable) is a global health campaign aimed at increasing awareness around viral load, or the concentration of HIV and transmission risk. If a person's viral load of HIV is unable to be detected on a test conducted by a medical professional, there is no risk of HIV being transmitted to another person. It is vital to note that the only way to determine the concentration of the virus is with the support of trained medical professionals and consistent use of ART. Left untreated, HIV can progress to Acquired Immunodeficiency Syndrome (AIDS), which refers to an HIV infection that has progressed to stage 3.<sup>23</sup> At this stage, the immune system becomes severely damaged, leaving the body vulnerable to infections and certain cancers. While there is no cure, ART allows people with HIV to live long, healthy lives and reduces the risk of transmission.

## Prevalence and Incidence Rates

As of 2023, there were 5,065 people living with HIV (PLHIV) in Orleans Parish.<sup>2</sup> Data reveals that of the 5,056 cases, 130 were new diagnoses from 2023, providing an incidence rate of 35.2 cases per 100,000 population.<sup>24</sup> In Louisiana, 47% (n= 10,969) of all people living with HIV have AIDS.<sup>2</sup>

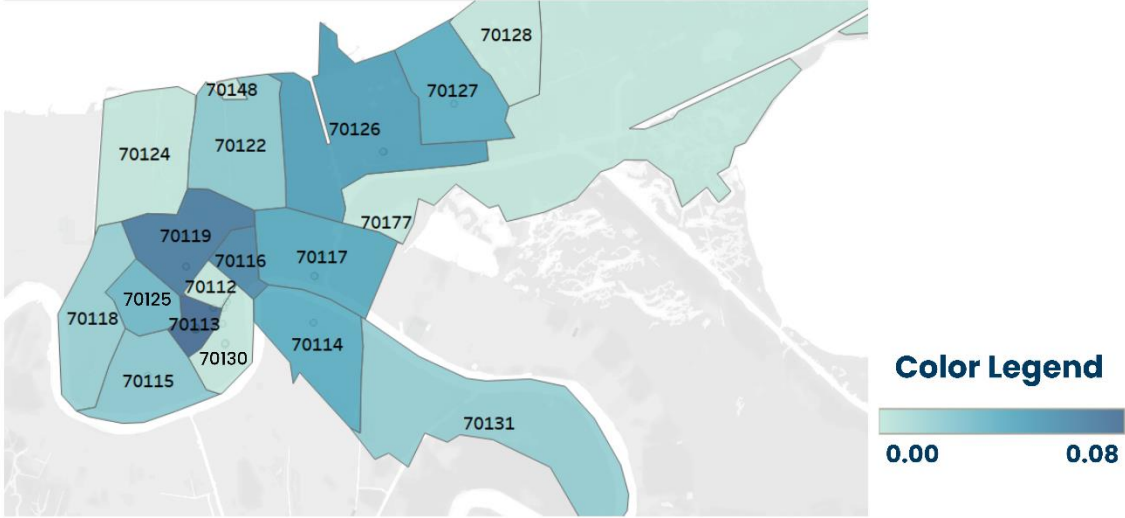
2023 Prevalence Rate of People Living with HIV per 100,000	
United States	13.3 <sup>25</sup>
Louisiana	22.3 <sup>2</sup>
New Orleans	35.2 <sup>24</sup>

### Demographic Breakdown

The distribution of HIV cases by sex at birth reveals significant differences. The data indicates that 75% of new cases are male, while 21% are female and 5% are transgender.<sup>24</sup> The breakdown of cases by race/ethnicity shows that 79.2% (n=103) of new HIV cases occurred among Black residents, 15.4% (n=20) among White residents, and 5.4% (n=7) among Hispanic/Latino residents. 34% of new HIV cases occurred among individuals between the ages of 30-39 and 31% (n=40) between the ages of 20-29. The remaining distribution is as follows: 40-49 (15%, n=20), 50+ (13%, n=17), and 15-19 (7%, n=9).

When comparing zip codes by incidence rates per 100 residents, the following zip codes reported the highest burden of infection for HIV: 70113 (0.08), 70119 (0.07), 70116 (0.06), 70126 (0.05), 70117 (0.04), and 70114 (0.04). The heat maps below illustrate the health burden, with the darker colors signifying a higher incidence rate.

### HIV Incidence Rates per 100 Cases by Zip Code (2023)



Leading Zip Codes with HIV Incidence Rates in 2023		
Zip Code	HIV Case Count	HIV Incidence
70113	7	0.08
70119	25	0.07
70116	7	0.06
70126	14	0.05
70117	12	0.04
70114	9	0.04

### Trends over Time

According to data from the First Quarter 2024 HIV and Syphilis Report, a total of 875 people were newly diagnosed with HIV in Louisiana in 2023.<sup>2</sup> Of these, 25% occurred in Jefferson, Orleans, Plaquemines, and St. Bernard Parishes. Comparing HIV incidence rates at the state and city levels, Louisiana saw 22.3 new diagnoses per 100,000 in 2023, while New Orleans had 35.2 per 100,000. These figures underscore that New Orleans bears a significant portion of the state's HIV burden. Nationally, HIV incidence has decreased by 12% between 2018 and 2022, whereas New Orleans experienced a 2% increase since 2022.<sup>19, 25</sup>

A significant concern is the sharp rise in HIV diagnoses among New Orleans residents aged 15-19, while this group accounts for less 1% of people living with HIV, new diagnoses increased by 200% between 2022-2023, changing from 3 new cases to 9 between 2022 and 2023. Over the course of five years, there have been 32 new cases of HIV among 15–19-year-olds, with 72% of individuals being males who identify as gay or bisexual. Of these new cases, 91% occurred among Black residents with White and Hispanic/Latino residents each accounting for 4% of new cases within this age group.<sup>24</sup> While HIV can be managed with ART, it remains a lifelong condition requiring ongoing treatment and monitoring, and it increases the risk of acquiring additional infections. This rise in cases among adolescents may point to emerging risk behaviors or gaps in youth-targeted prevention and education programs, calling for immediate public health action.

Additionally, when cases are stratified by age, New Orleans has experienced a 44% increase of new HIV diagnoses among individuals aged 55-64. Between 2022-2023, new diagnoses went from 9 to 13.<sup>24</sup> Nationally and globally, STIs including HIV are on the rise among individuals over 45. With this age group typically beyond reproductive age, studies indicate they may be less likely to utilize barrier methods such as condoms as STI prevention.<sup>26</sup> Additionally, aging can naturally weaken the immune system which can increase the likelihood that exposure to an STI will result in infection. Given the rise of new HIV diagnoses of individuals over 55 in New Orleans, tailored efforts for education and linkage to health care services should be considered.

Risk factors for acquiring HIV include being a gay or bisexual man, a person who injects drugs, or being a high-risk heterosexual. Between 2022 and 2023, the number of gay or bisexual men in New Orleans reporting an HIV diagnosis increased by 7%. There was a significant decrease in HIV diagnoses reported among gay or bisexual men who inject drugs (-38%) and those engaging in high-risk heterosexual activity (-25%).

Co-infection, or the presence of more than one pathogen in an individual at one time, is common – particularly between syphilis and HIV.<sup>27</sup> The presence of an open syphilitic sore provides an easier entry point for HIV to enter the body. Co-infection can complicate both diagnosis and treatment, as syphilis can progress more aggressively in people living with HIV. Between 2022 and 2023, there has been a 33% decrease in co-infection for syphilis and HIV in New Orleans.<sup>24</sup> This is a positive trend, as co-infection with HIV can exacerbate the progression of syphilis and complicate treatment outcomes for both infections.

## Discussion and Next Steps

This report highlights several critical findings, most notably the disproportionate burden of HIV and syphilis in New Orleans compared to the rest of Louisiana. The 200% increase in HIV diagnoses among New Orleans residents aged 15-19 signals an urgent need for targeted interventions to address the rising incidence among adolescents.<sup>24</sup> Additionally, syphilis remains a significant public health concern, particularly with the increasing rates of congenital syphilis, underscoring the importance of integrating syphilis testing into routine prenatal care.<sup>7</sup>

Given the findings, there are several key steps that should be taken to address these issues:

- **Promote Awareness of STI Testing Sites and Encourage Routine Testing:** To reduce the incidence of STIs, it is crucial to raise awareness about the availability of free and low-cost STI testing. The CDC recommends that sexually active individuals are screened for all STIs at least once a year. Additionally, testing every 3 months is encouraged as routine health care for individuals who have multiple sexual partners, use intravenous drugs or share needles, have previously had an STI or have a partner that has an STI.<sup>28</sup> Outreach campaigns should focus on encouraging early detection, which can lead to timely treatment and reduce transmission. This is especially important in addressing the disproportionate incidence of syphilis, particularly late-stage syphilis, in New Orleans.
- **Introduce Targeted Interventions for Adolescents:** The rise in HIV diagnoses among individuals aged 15-19 calls for focused educational and preventive measures, including increased access to sexual health education in schools and community-based settings and linkage to health care services. Comprehensive sex education programs have been found to reduce the rates of STIs by 31%, sexual activity by 12%, and the number of sexual partners by 14%.<sup>29</sup> Implementing such programs can help address the increasing rates of HIV among adolescents.



- **Create Innovative Opportunities for STI testing and Disseminating Sexual Health Information:** In effort to reduce stigma associated with STIs, creative approaches need to be taken to deliver medically accurate, bias free information that can easily be understood by community members. Examples of these strategies include tabling at community events, mobile testing units, parade and second-line outreach, localized campaigns, and working across sectors. Language and disability accessibility must be prioritized throughout all efforts to ensure ample education, care, and support opportunities exist for the many communities living in New Orleans.
- **Investigate Barriers to Healthcare Access in High-Burden Areas:** Certain zip codes, such as 70117, 70119, and 70126, have consistently high rates of STIs, while zip code 70114 has seen a significant increase over the past five years.<sup>7</sup> A deeper investigation into healthcare access and socio-economic barriers in these areas is necessary to develop localized solutions that can slow the spread of STIs.
- **Implement Culturally Tailored Prevention and Treatment Efforts:** Black residents disproportionately experience higher rates of HIV, syphilis, chlamydia, and gonorrhea. It is essential to design and implement prevention and treatment efforts that are culturally relevant and resonate with this community, ensuring equitable access to care and support. A critical factor is addressing medical mistrust in the Black community, which stems from historical injustices like the Tuskegee Syphilis Study, where treatment for syphilis was deliberately withheld from Black male patients without their informed consent.<sup>30</sup> Prevention and treatment strategies must acknowledge this harmful legacy when developing interventions to reduce syphilis incidence in this community.
- **Strengthen Prenatal Syphilis Testing:** To address the growing burden of congenital syphilis, healthcare providers should integrate point-of-care syphilis testing into all prenatal visits, providing patients with rapid results and treatment. Additionally, provider education should be expanded to address misconceptions about sexual activity during pregnancy, emphasize the importance of treating partners for syphilis to reduce the risk of reinfection, and account for rotating residents, which may contribute to low adherence to third-trimester testing. These adjustments would increase early detection and treatment, significantly reducing the risk of transmission to newborns.

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