Methods for surveillance and monitoring of Congenital syphilis elimination within existing systems





Initiative for the Global Elimination of Congenital Syphilis

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### Abbreviations

ECS	elimination of congenital syphilis
EIA	enzyme immunoassay
MDG	Millennium Development Goal
M&E	monitoring and evaluation
MNCH	maternal, newborn, and child health
PAHO	Pan American Health Organization
PMTCT	prevention of mother-to-child transmission
RPR	rapid plasma reagin
STI	sexually transmitted infection
ТРНА	Treponema pallidum haemagglutination assay
TPPA	Treponema pallidum particle agglutination
UA	Universal Access (reporting system)
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
VDRL	venereal disease research laboratory
WHO	World Health Organization



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#### **Executive summary**

The Initiative for the Global Elimination of Congenital Syphilis supports global efforts to achieve the Millennium Development Goals (MDGs) 4 (reduce child mortality), 5 (improve maternal health), and 6 (combat human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS), malaria, and other diseases). Surveillance, monitoring, and evaluation are together considered one of the four critical pillars of efforts to eliminate congenital syphilis.

This surveillance, monitoring, and evaluation tool was developed for use at the global, regional, and national level by public health practitioners who are responsible for efforts to eliminate congenital syphilis. The purpose of this document is to provide guidance on the core indicators for elimination of congenital syphilis (ECS) efforts in regions and countries that are harmonized with and can be integrated into existing data collection systems, in order to strengthen the underlying information systems. The use of common global indicators and tools by regions and countries will facilitate comparability of the resulting data between countries, allow establishment of global and regional monitoring of ECS efforts, improve service delivery, and assist in attainment of the MDGs.

It is important to establish clearly delineated policy support for ECS in every country, since, in many countries, activities related to congenital syphilis span multiple programmes and it is often unclear which programme takes primary responsibility. Every country should monitor three core indicators that are necessary for basic ECS programme monitoring and management:

- 1. testing of antenatal care attendees for syphilis at first visit
- 2. positive syphilis serology in pregnant women
- 3. treatment of syphilis-seropositive pregnant women.

Additional ECS-specific and routine maternal, newborn, and child health (MNCH) indicators that are useful for monitoring and management of an ECS programme have been identified, and should be adopted if deemed relevant and feasible to the country context. Special study indicators can be of assistance in measuring the impact of programme efforts, but may be difficult to obtain routinely.

Once a country has established a monitoring policy, selected indicators, and

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