



# Ohio Region Five HIV & Syphilis

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## Surveillance Report 2019-2023

# Ohio Region Five Surveillance Report

## HIV & Syphilis

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Canton City Public Health STI Prevention Program Data

Centers for Disease Control and Prevention (CDC)

Ohio Disease Reporting System (ODRS)

Ohio Public Health Data Warehouse

Ohio Department of Health (ODH)

United States Census Bureau

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*Special thanks to the Ohio Region Five Regional Advisory Group (RAG) and Canton City Public Health's STI Prevention team for their efforts in helping to collect the data presented in this report.*



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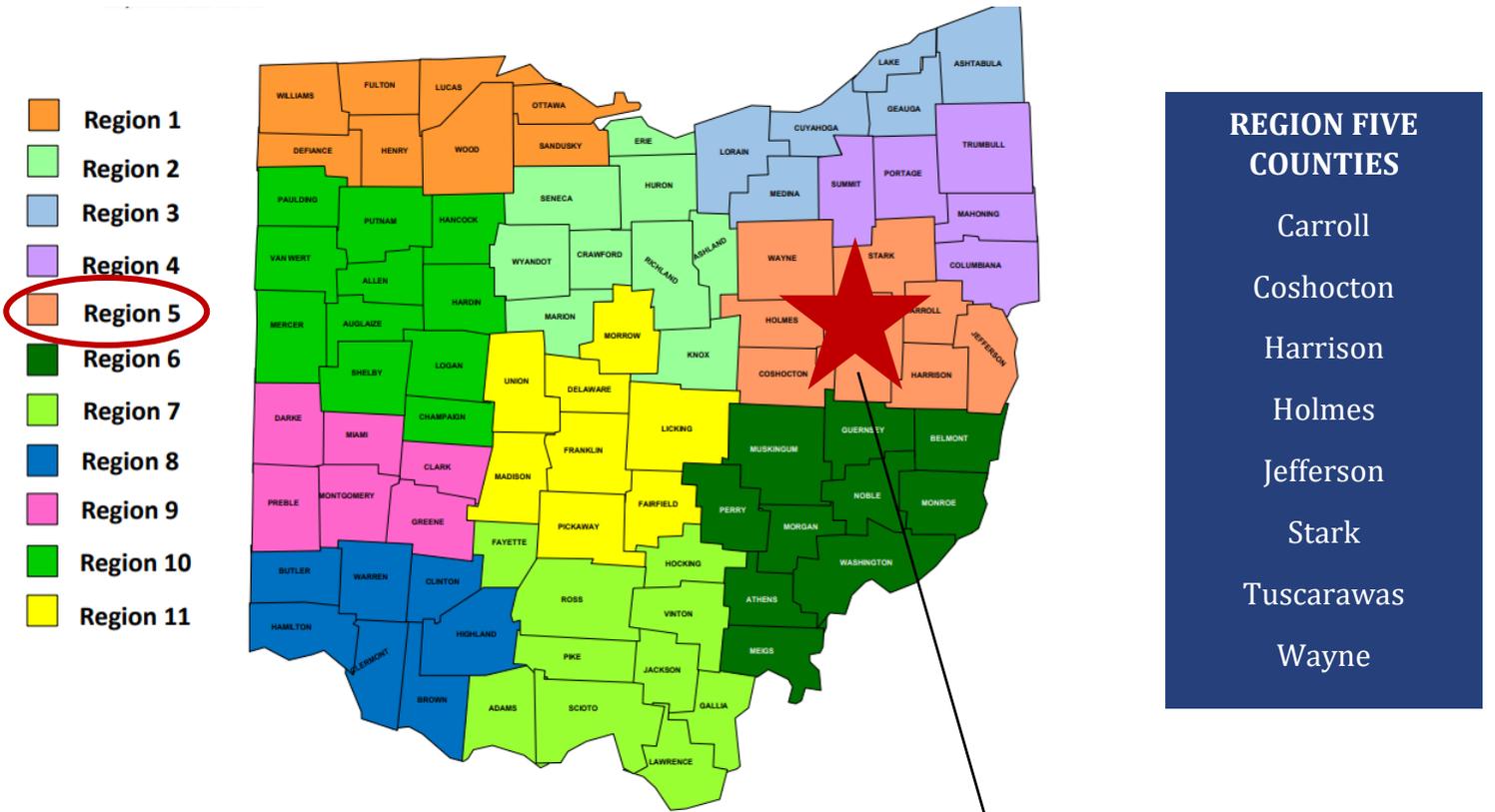


Region 5 HIV Prevention and  
Education Planning Advisory Group

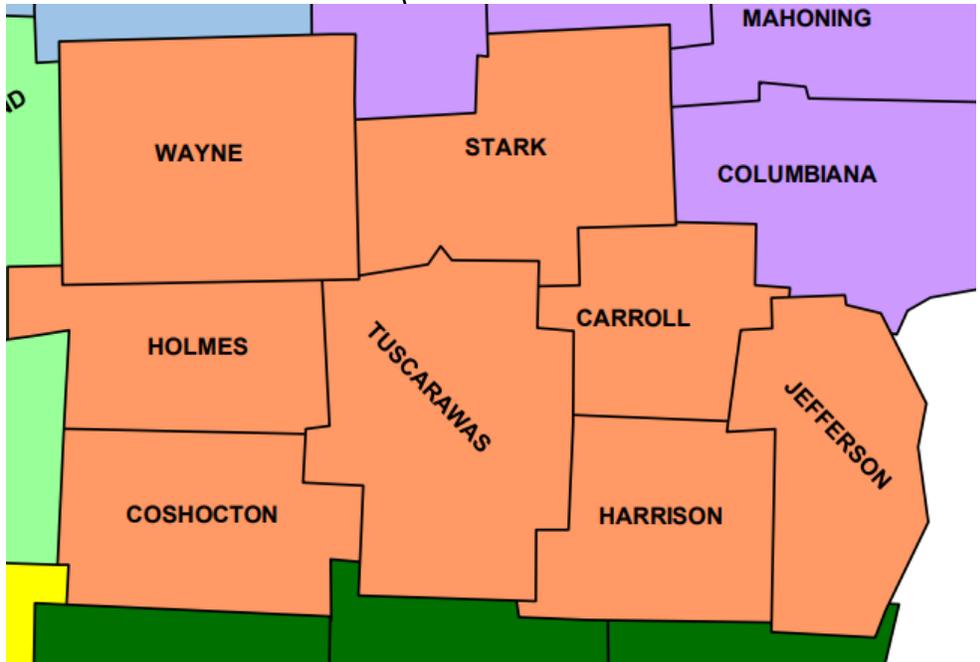
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# Ohio HIV/Syphilis Regions



- REGION FIVE JURISDICTIONS**
- Stark County
  - Canton City
  - Alliance City
  - Massillon City
  - Wayne County
  - Tuscarawas County
  - New Philadelphia City
  - Jefferson County
  - Coshocton City\*
  - Coshocton County\*
  - Carroll County
  - Harrison County
  - Holmes County



\*As of January 1<sup>st</sup>, 2023, the Coshocton City and Coshocton County health departments have combined into the Coshocton Public Health District. Data moving forward in this report reflects this change.

# Executive Summary

Sexually transmitted infections (STIs), like the ones highlighted in this report, are an important public health concern and have been increasing over the years. During the COVID-19 pandemic, the United States saw a decrease in reported STI cases. Factors including reduced screening, limited public health and medical resources, and stay-at-home orders likely contributed to the overall decrease in reported STIs and a possible increase in transmission. According to the CDC, case counts of STIs began to increase again in late 2020, which coincided with an increase in healthcare utilization as state stay-at-home orders began to lift and COVID-19 vaccines became available. In addition to the challenges posed by the COVID-19 pandemic, factors such as decreased condom use, increased substance use and reduced access to sexual and reproductive health services have all been associated with the increase in syphilis we are currently seeing. According to the CDC, the number of syphilis cases we have seen in the last few years have not been seen in the United States since the 1950s.

The data presented in this report provides an overview of syphilis and HIV in Region Five. A few key highlights of this report can be found below:

## Key findings in this report include:

- **Syphilis**

- There has been an increase in both total syphilis cases (263% increase) and infectious syphilis cases (224% increase) in Region Five counties since 2019
- While we have seen an increase in most age groups, the most significant increases have been in 30-34-year old's (367% increase) and in 45-54-year old's (592% increase) in Region Five counties since 2019
- The sex disparity rate among males and females has decreased (3.8 in 2022 vs. 1.9 in 2023). This is largely driven by the increase in cases among both males and females, although males in Region Five are still contracting syphilis at a higher rate.
- The five-year average (2019-2023) disparity rate of total syphilis in Black/African American individuals is over 6 times higher than white individuals in Region Five counties

- **HIV**

- While Region Five saw an increase in new HIV diagnoses starting in 2020, we saw a 23% decrease in overall new cases from 2022 to 2023
- Since 2019, our rates of new HIV diagnoses have been higher in those 25 and older when compared to those less than 25 years old
- The five-year average (2019-2023) disparity rate of total HIV in Black/African American individuals is over 7 times higher than white individuals in Region Five counties

# Syphilis

Syphilis is a treatable and preventable sexually transmitted infection (STI). The signs and symptoms of the infection are classified into four stages (primary, secondary, latent, tertiary). Syphilis is primarily spread through direct contact with a syphilis sore during oral, vaginal, or anal sex. Additionally, syphilis can be spread from an infected mother to an unborn child via placenta or contact with sores (known as congenital syphilis).

## Signs and Symptoms by Stage

### *Primary*

During the primary stage of syphilis infection, firm and round sores will develop at the site where syphilis entered the body. The sores from primary infection may also appear to have a “punched out” appearance with raised borders. These sores are often painless, which can lead to the infection going unnoticed. The sores normally last three to six weeks and will heal regardless of treatment. However, after the sores go away, the patient must continue to be treated to prevent the infection from progressing to the second stage of infection.

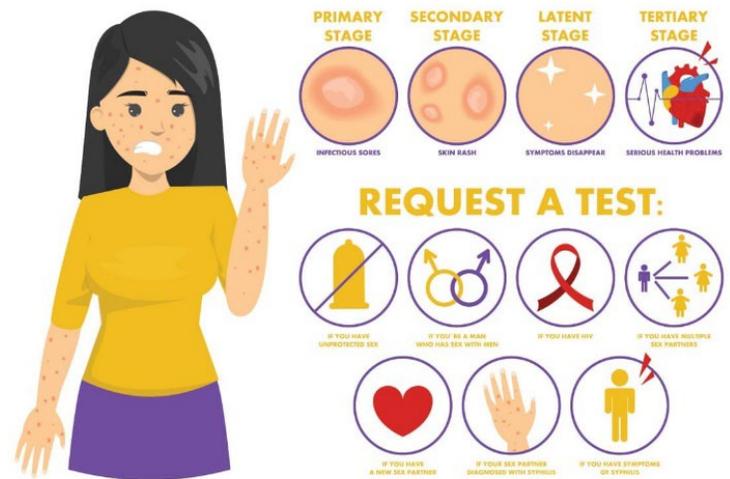
### *Secondary*

The secondary stage of syphilis infection may lead to skin rashes and/or mucous membrane lesions that appear in the mouth, vagina, or anus. The rash can appear when the original sore is healing or several weeks after it has healed. This rash may appear on the palms of the hands or bottoms of the feet. It may go unnoticed as it is usually not itchy and may be faint. Symptoms in this stage may also include: fever, sore throat, hair loss, headaches, weight loss, muscle aches, fatigue, and swollen lymph glands. Secondary stage symptoms will also heal on their own, but if not treated, will continue to advance to the later stages of syphilis.

### *Latent*

The latent stage of syphilis is the span of time when there are no visible signs or symptoms of syphilis. Without treatment, the infection will remain in the body without any signs or symptoms for years, ultimately resulting in the final stage of infection.

## SYPHILIS SYMPTOMS AND RISK FACTORS



### ***Tertiary***

During the tertiary stage of infection, serious damage to internal organs and death may occur. Organs affected include the heart and blood vessels, and the brain and nervous system. Although most individuals with untreated syphilis do not develop tertiary syphilis, this stage of infection is very severe and could occur 10-30 years after initial infection

### ***Congenital***

Congenital syphilis occurs when a mother is infected with syphilis and then passes the infection onto their child during pregnancy. It can result in a variety of adverse health outcomes for the mother, including:

- Miscarriage (losing the baby during pregnancy),
- Stillbirth (a baby born dead),
- Prematurity (a baby born early),
- Low birth weight, or
- Death shortly after birth.



For babies born with congenital syphilis, the following adverse health outcomes can occur:

- Deformed bones,
- Severe anemia (low blood count),
- Enlarged liver and spleen,
- Jaundice (yellowing of the skin or eyes),
- Brain and nerve problems, like blindness or deafness,
- Meningitis, and
- Skin rashes.

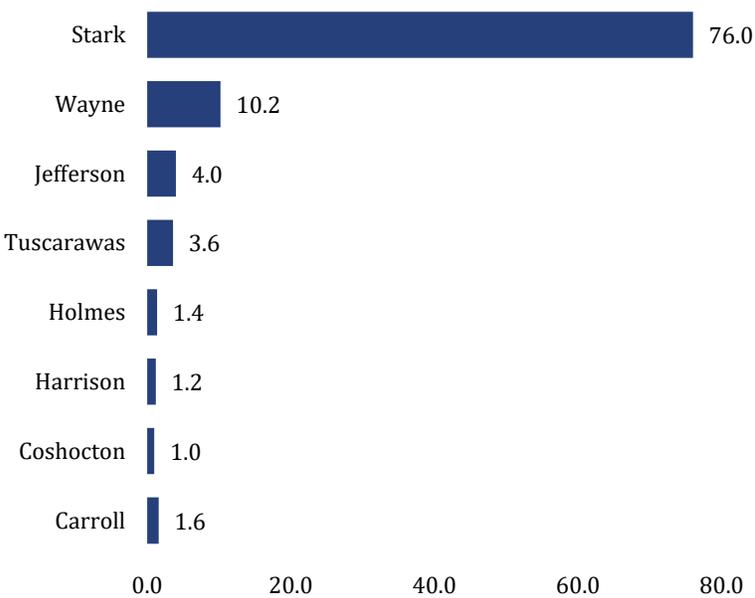
## Region Five Total Syphilis- Overview

In Region Five, total syphilis cases have more than **tripled** since 2019.

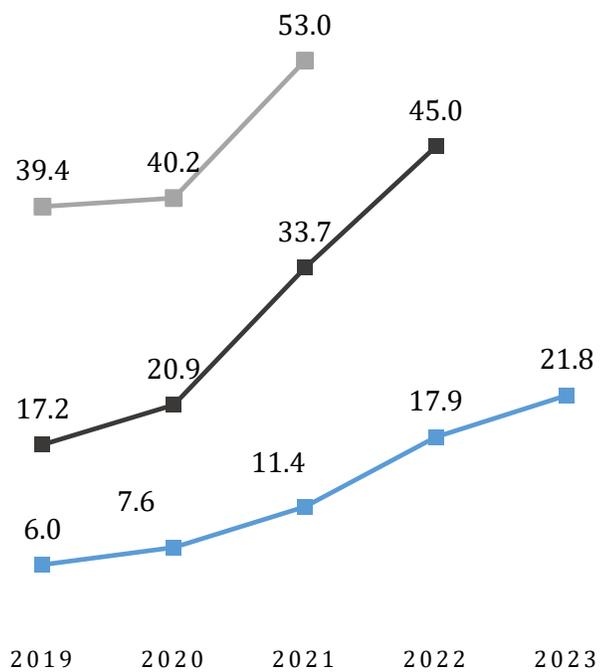


Total syphilis includes **all stages**: Primary, Secondary, Early Latent, Congenital, Late Latent, and Tertiary stages.

Stark County's five-year average of total cases diagnosed per year was **higher** than all other counties in Region Five. In **Region Five**, we saw an average of **99.0 new cases** of syphilis diagnosed each year from 2019-2023.



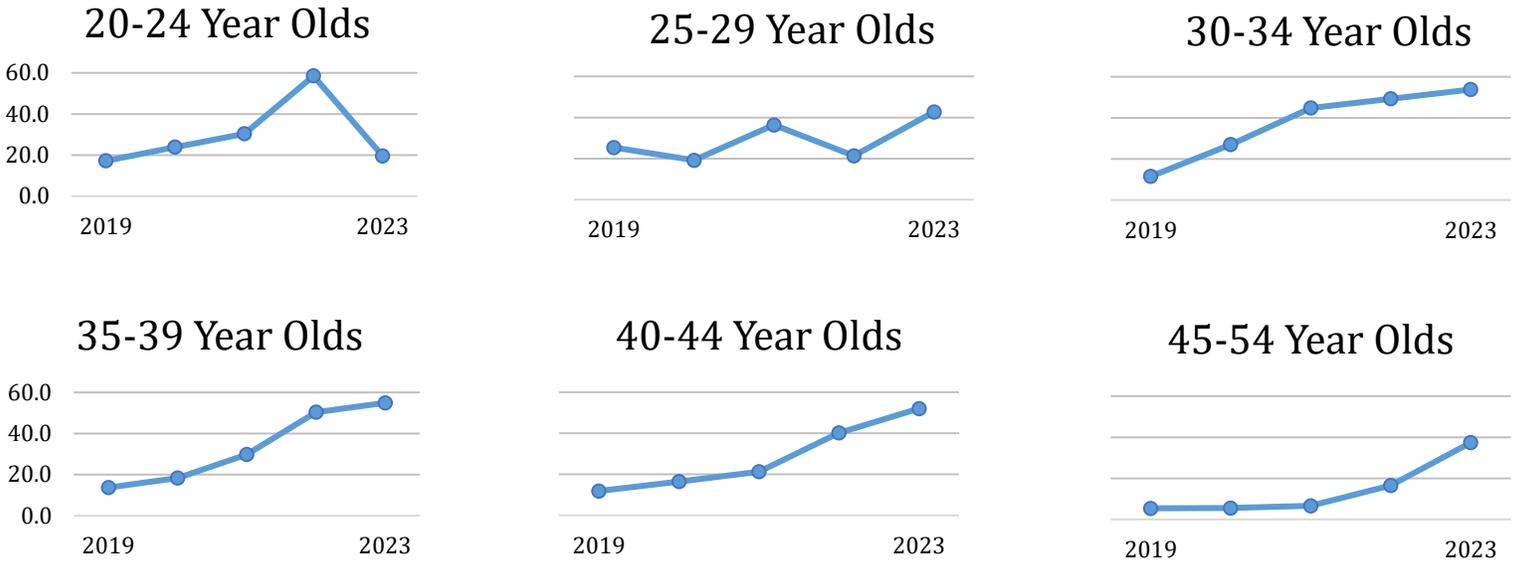
Rates\*\* of total syphilis have **increased nationally**, in **Ohio** and across **Region Five** since 2019.



\*\* Rates calculated per 100,000 persons  
 \*National rates are not yet available for 2022 or 2023 and Ohio rates are not yet available for 2023.

## Region Five Total Syphilis- Demographics

We have seen a **steady increase** in case rates\*\* in most age groups since 2019, but have seen a **significant increase** in those over 30 years old.

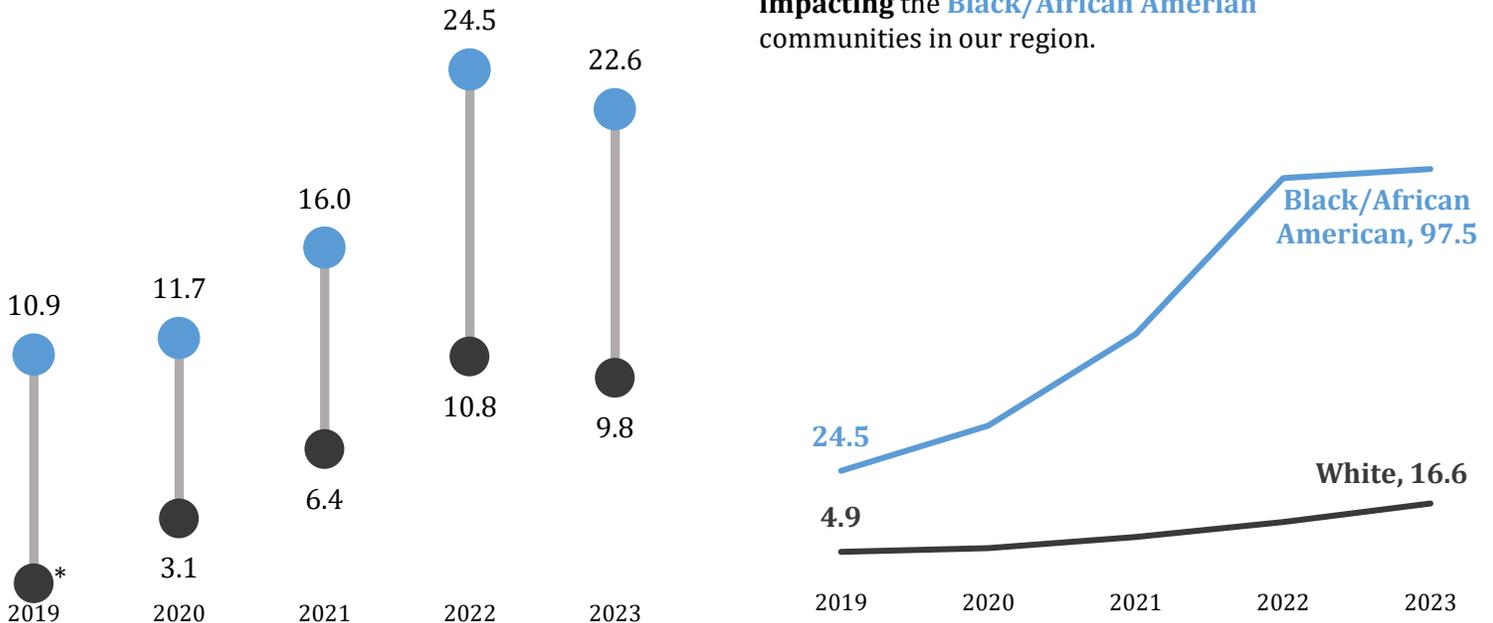


\*\* Rates calculated per 100,000 persons

\*Age groups not included in above charts were excluded due to low case counts among those groups, which would result in unstable rates

Although rates\*\* have consistently been **highest** among **men** in Region Five, an increase among **women** has been seen since 2019.

The average 5-year race disparity ratio was **6.3**, meaning that for every one **White individual** case diagnosed, over 6 **Black individual** cases were diagnosed from 2019-2023. This shows that syphilis has been **disproportionately impacting** the **Black/African American** communities in our region.



\*\* Rates calculated per 100,000 persons

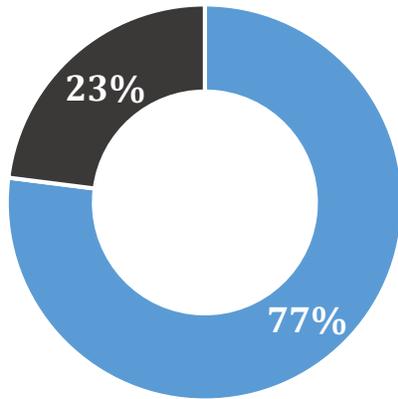
\* 2019 Female and Trans Woman (all years) rates suppressed due to low counts, which would result in unstable rates

\*\* Rates calculated per 100,000 persons

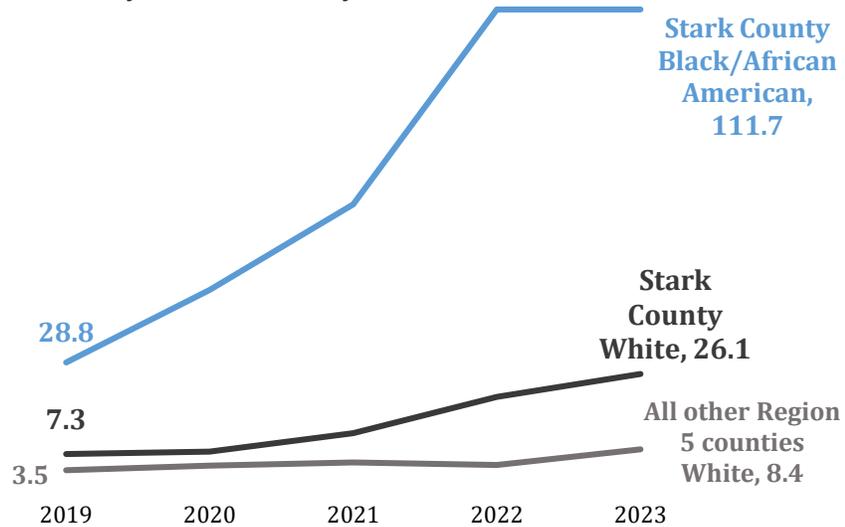
\* Asian, Multiracial and Other Race rates suppressed due to low counts, which would result in unstable rates

## Region Five Total Syphilis- Other Region Five Counties vs. Stark County

Over three-fourths of total syphilis cases in Region Five occurred in **Stark County** from 2019-2023.



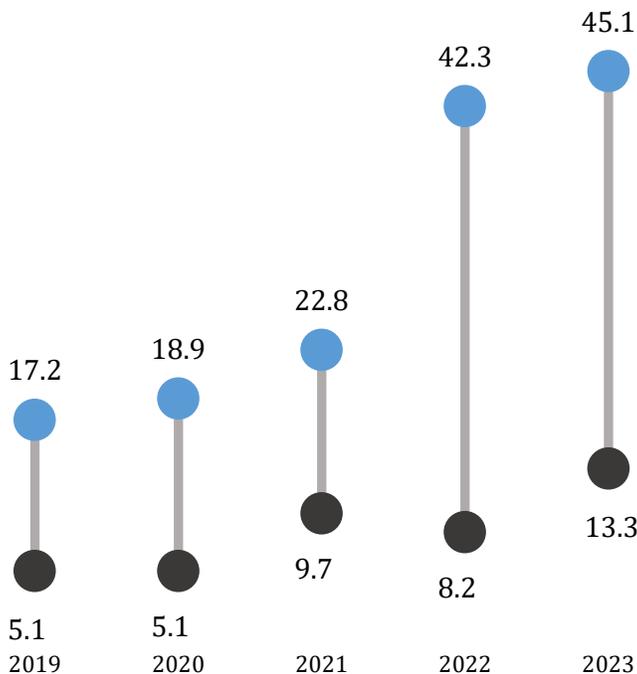
The rise in case rates\*\* has **disproportionately impacted Black/African American** communities, particularly in Stark County.



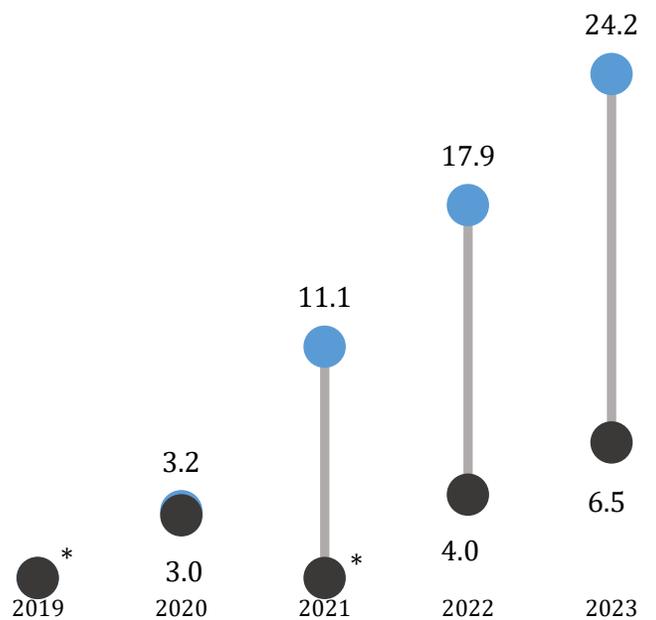
\*\* Rates calculated per 100,000 persons

\* Asian, Multiracial, Other Race and Other Region Five counties Black/African American rates suppressed due to low counts, which would result in unstable rates

Total case rates\*\* in both **Stark County men** and men in all other Region Five counties are on the rise.



Total case rates\*\* have increased significantly among **Stark County females** when compared to females in all other Region Five counties.



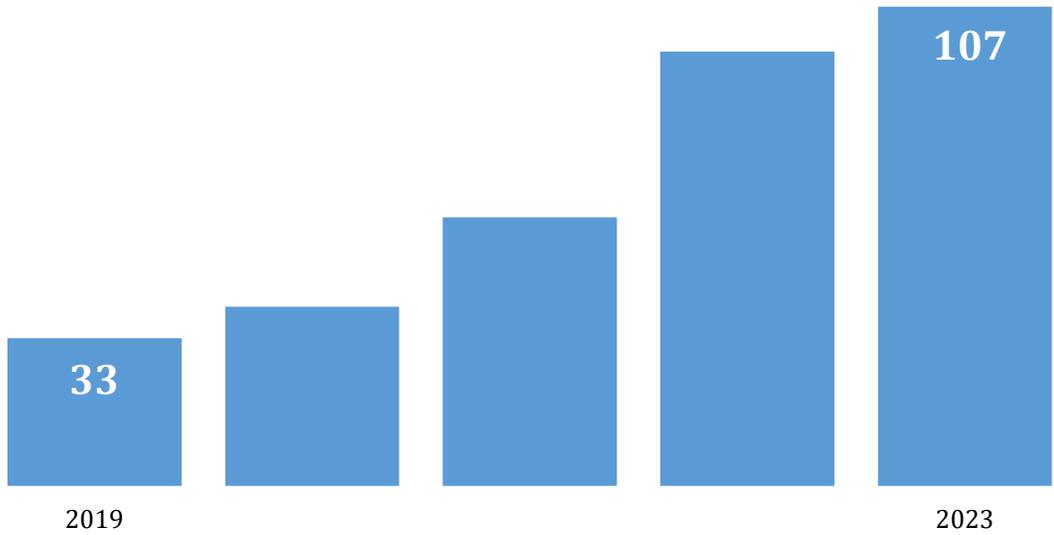
\*\* Rates calculated per 100,000 persons

\*\* Rates calculated per 100,000 persons

\* 2019 and 2021 Female rates suppressed due to low counts, which would result in unstable rates

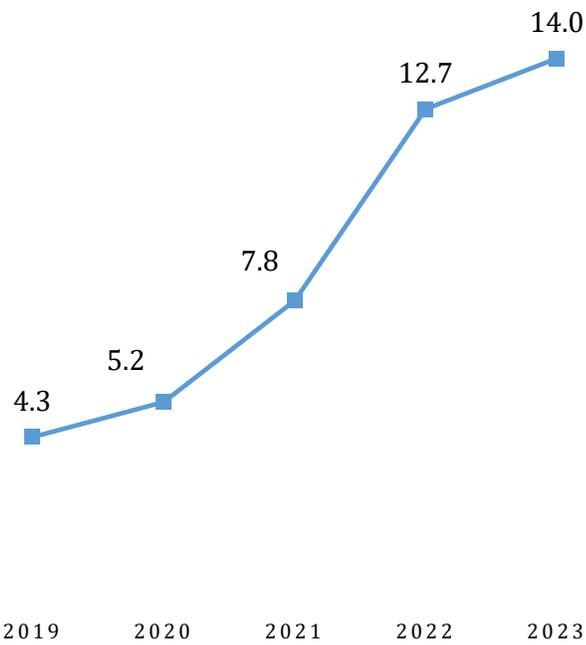
## Region Five Syphilis- Infectious Syphilis

Cases of infectious syphilis have increased **three-fold** since 2019.



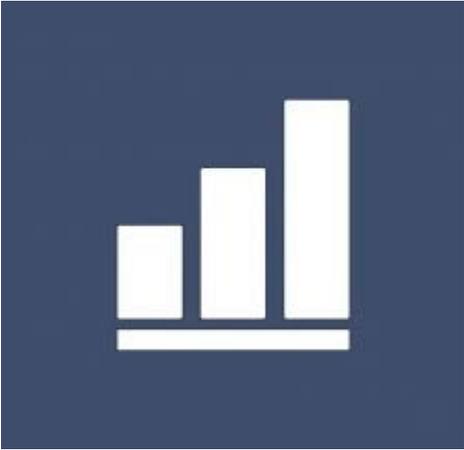
Infectious syphilis includes **the following stages:** Primary, Secondary, Early Latent and Congenital stages. They are considered infectious because they can be spread person-to-person.

A **226% increase** in Region Five 's infectious syphilis case rate\*\* was seen from 2019 to 2023.



For more information about syphilis in Region Five, please visit our dashboard:

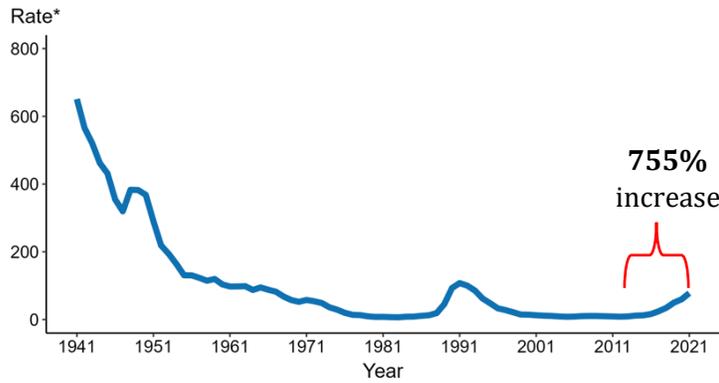
[Canton City Public Health- Region Five Syphilis Dashboard](#)



\*\* Rates calculated per 100,000 persons

## Emerging Issues: Congenital Syphilis

### Congenital Syphilis — Rates of Reported Cases by Year of Birth, United States, 1941–2021



\* Per 100,000 live births

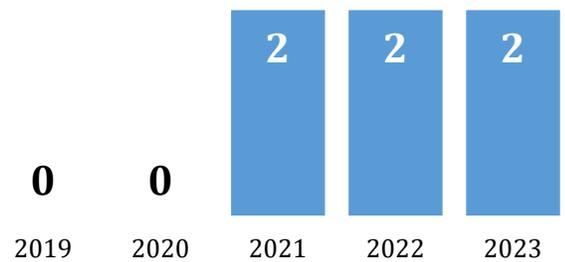


The CDC has expressed particular concern over the rise in congenital syphilis cases; a staggering 755% increase in the rate of congenital syphilis was observed from 2012 to 2021. Similar trends have been seen both statewide and in Region Five.

From 2018-2022, Ohio saw a 322% increase in the total number of congenital syphilis cases reported. In Region Five, the first congenital syphilis case in the region was reported a few years ago. Since then, we have had cases reported every year.

Region Five has **consistently** seen cases of congenital syphilis since 2021.

The CDC reports that lack of timely testing and adequate treatment during pregnancy contributed to 88% of congenital syphilis cases seen in the United States in 2022. These identified gaps represent missed opportunities to prevent this disease. The CDC recommends routine serologic screening of pregnant women during the first prenatal visit. Among populations for whom prenatal care is not optimal, serologic screening and treatment based on a reactive test should be performed at the time of testing. Additionally, serologic testing should be done at 28 weeks' gestation and at delivery for women who live in communities with high rates of syphilis, women with HIV infection, or those who are at increased risk for syphilis during their pregnancy.



In 2023, the FDA warned of the limited supply of the drug, Bicillin L-A®, used to treat syphilis due to the increase in demand. The CDC encourages public health professionals to monitor local supply of the drug and to prioritize it for treatment of pregnant persons with syphilis and babies with congenital syphilis, as it's the only recommended treatment for these populations. Shortage of Bicillin L-A® are expected to continue into 2024.

# Human Immunodeficiency Virus (HIV)

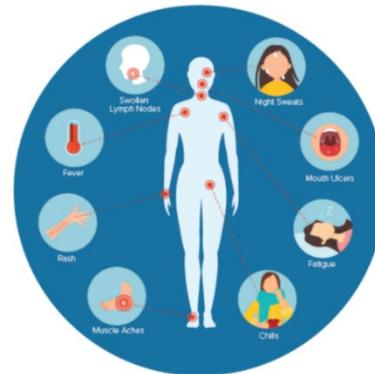
Human immunodeficiency virus (HIV) is a virus that attacks the body's immune system. Right now, there is no cure for HIV, but with proper medical care it can be controlled. However, if HIV is not treated, it can lead to acquired immunodeficiency syndrome (AIDS).

## **Signs and Symptoms by Stage**

### ***Stage 1: Acute HIV Infection***

At this stage, the infected person is the most contagious as a large amount of HIV is in the blood. Some people may experience flu-like symptoms 2 to 4 weeks after infection, and others may not have any symptoms at all. These symptoms can last for several weeks and include but are not limited to:

- Fever,
- Chills,
- Rash,
- Night sweats,
- Muscle aches,
- Sore throat,
- Fatigue,
- Swollen lymph nodes, and
- Mouth ulcers.



### ***Stage 2: Chronic HIV Infection***

HIV is still active but at very low levels; it can also be referred to as asymptomatic HIV infection or clinical latency. People may not experience any symptoms during this phase. HIV can still be transmitted during this phase. If an individual infected with HIV does not take HIV medication, this phase could last up to a decade or longer. At the end of this phase, the amount of HIV in the blood (viral load) goes up and the CD4 cell count goes down. As the virus levels increase within the body, the person may have symptoms.

### ***Stage 3: AIDS***

AIDS is the most severe stage of HIV infection. If a person's CD4 cell count drops below 200 cells/mm of blood or if they get an increasing number of severe illnesses (opportunistic infections), this person will receive an AIDS diagnosis. Opportunistic infections are the result of badly damaged immune systems, compromising the body's ability to fight off infections. People with an AIDS diagnosis often have a very high viral load and will remain highly infectious.

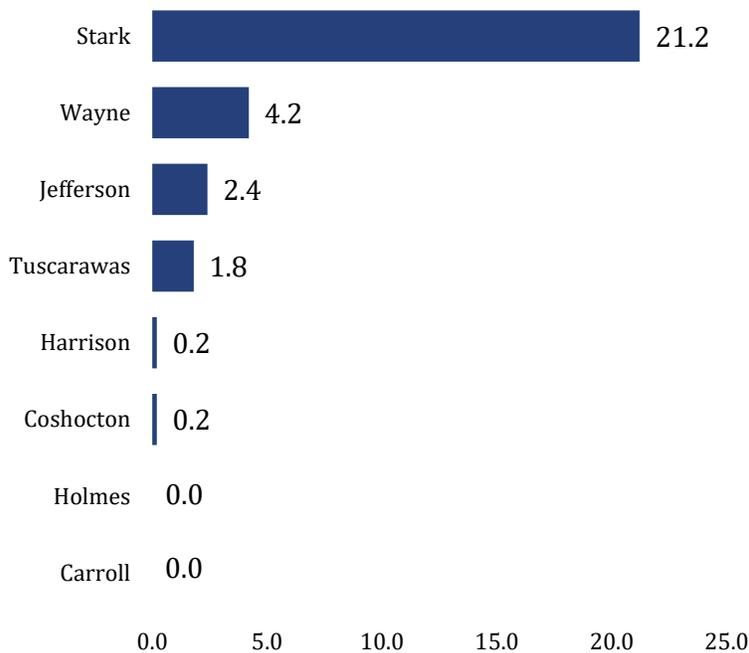
## Region Five HIV Data- Overview

In Region Five, new HIV cases started to **increase** in 2020, but have overall **decreased** in 2023.

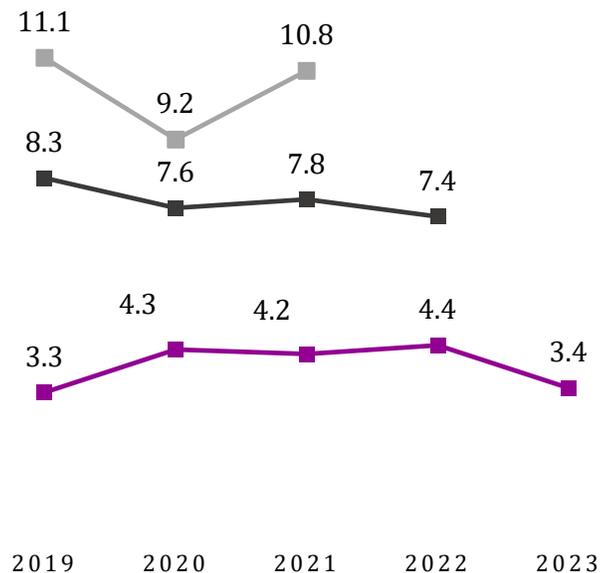


HIV data includes both those diagnosed with **HIV** and those diagnosed with **AIDS**.

Region Five's five-year average for new HIV cases was **30.0 per year**, with Stark County having the **most cases** out of all counties in **Region Five**.



Rates\*\* of new HIV diagnoses have declined in **Ohio** and across **Region Five** since 2020. **Nationally**, we have seen an increase.



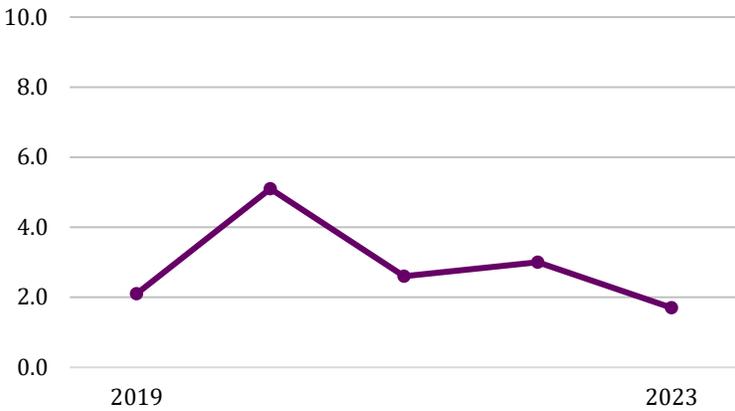
\*\* Rates calculated per 100,000 persons

\*National rates are not yet available for 2022 or 2023 and Ohio rates are not yet available for 2023.

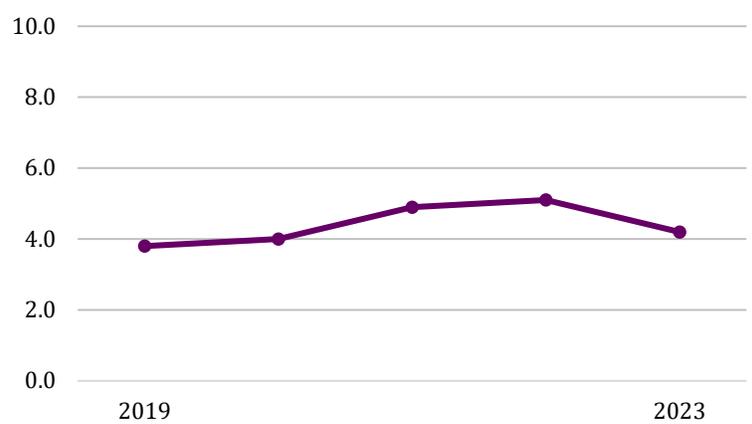
## Region Five HIV- Demographics

Since 2019, we have seen a **20% decrease** in new HIV diagnoses in youth (those under 25) in Region Five. Non-youth (those 25 and older) cases have been on the rise, with a **10% increase**.

**Youth (Those Under 25)**

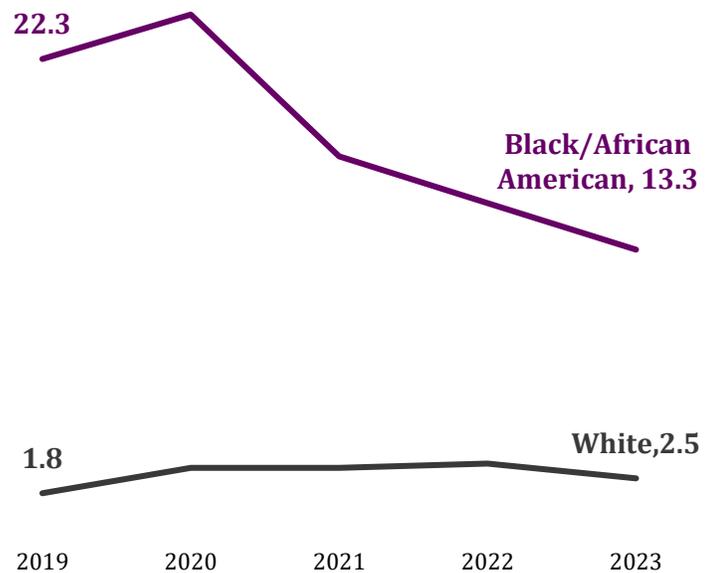
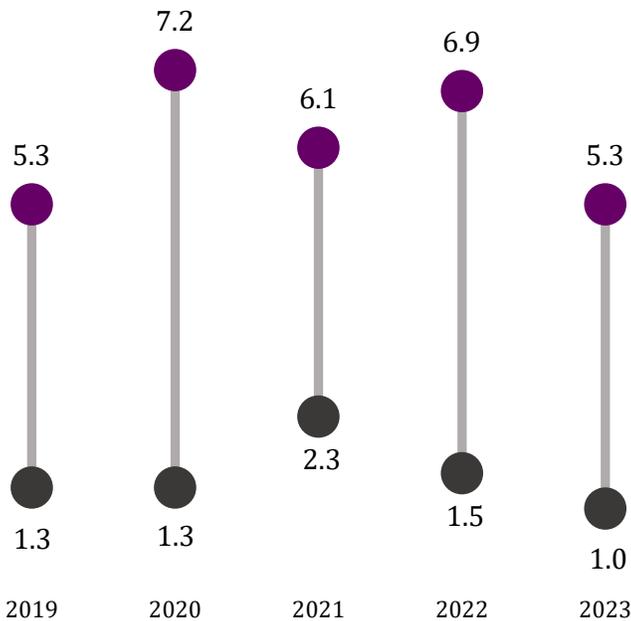


**Non-Youth (Those 25 and older)**



Rates\*\* of new HIV diagnoses have consistently been **highest among men** in Region Five, compared to **women** in the same region.

The average 5-year race disparity ratio was **7.3**, meaning that for every one **White individual** case diagnosed, over 7 **Black individual** cases were diagnosed from 2019-2023, which shows that HIV has been **disproportionately impacting** the **Black/African American** communities in our region.



\*\* Rates calculated per 100,000 persons

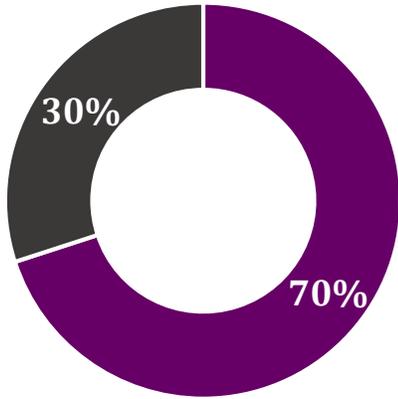
\* Trans Woman rates suppressed due to low counts, which would result in unstable rates

\*\* Rates calculated per 100,000 persons

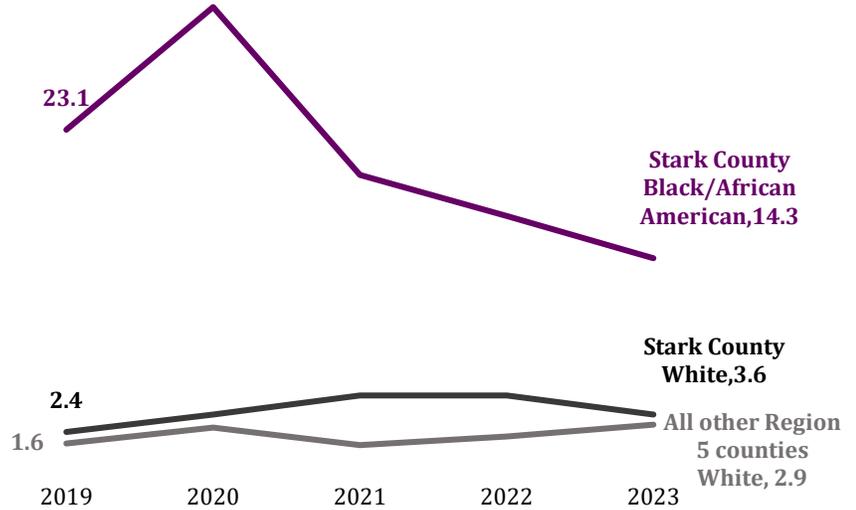
\* Asian, Multiracial and Other Race rates suppressed due to low counts, which would result in unstable rates

## Region Five HIV-Other Region Five Counties vs. Stark County

**Over two-thirds** of total HIV cases in Region Five occurred in **Stark County** from 2019-2023.



The rise in case rates\* has **disproportionately impacted Black/African American** communities, particularly in Stark County.



*\*\* Rates calculated per 100,000 persons  
\*Asian, Multiracial, Other Race and Other Region Five counties Black/African American rates suppressed due to low counts, which would result in unstable rates*

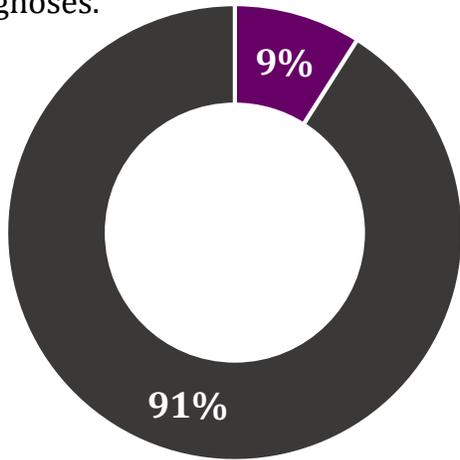
Case rates \*\* of new HIV diagnoses have been on the **decline in Stark County men**, but on the rise in **men in all other Region Five counties**.



*\*\* Rates calculated per 100,000 persons*

## Region Five HIV-Risk Factors

From 2019-2023, almost 1 in 10 persons newly diagnosed with HIV **was co-infected with syphilis** at the time of diagnoses.



### Select HIV Risk Factors:

#### ***Men Who Have Sex with Men (MSM)***

Gay, bisexual, and other self-identifying men who have sexual contact/intercourse with men.

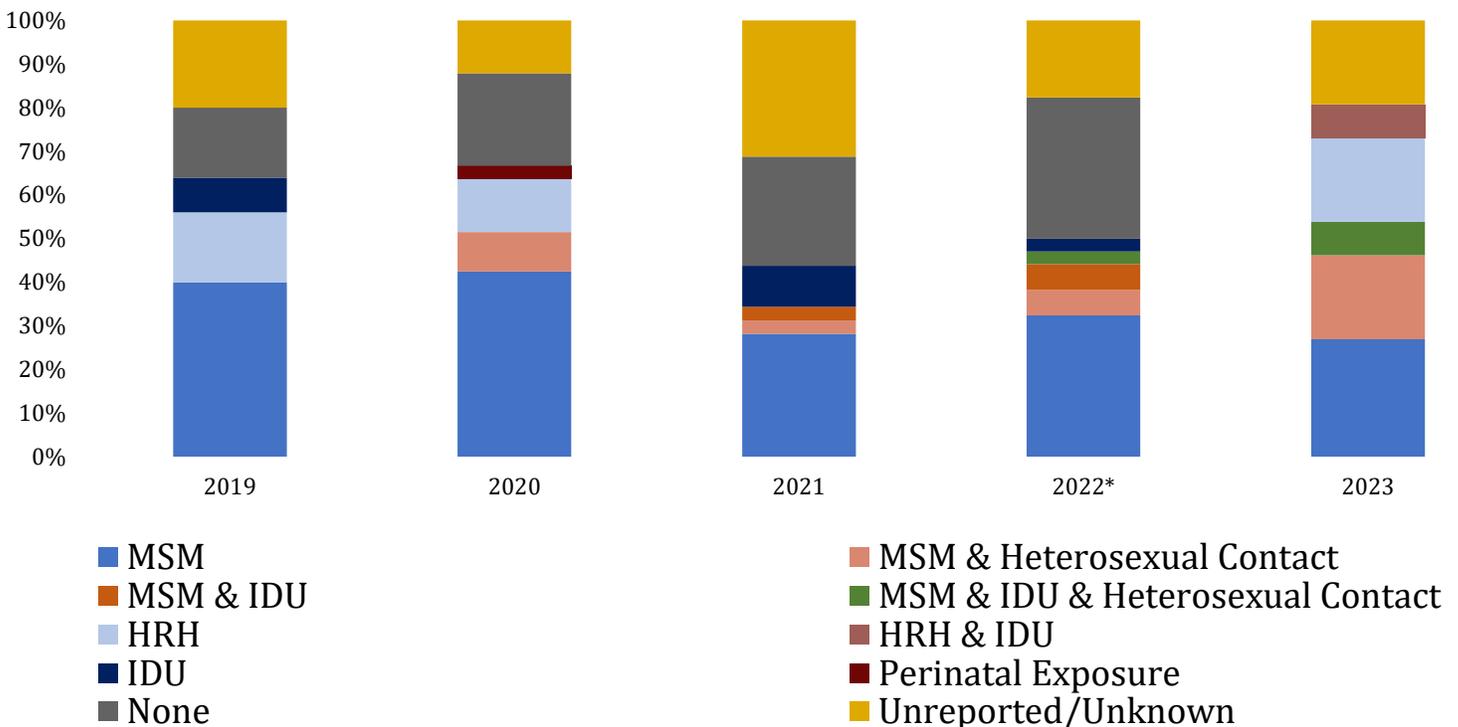
#### ***High Risk Heterosexual (HRH)***

Heterosexual contact with a person known to have, or be at high risk for, HIV infection.

#### ***Intravenous Drug Use (IDU)***

Those who inject a substance/drug into the vein using a syringe.

In Region Five, we have seen a **30% decrease** in new HIV diagnoses in those identifying MSM as sole exposure category and a **25% increase** in those who reported HRH as sole exposure category since 2019.



\*Data may be underreported for exposure categories in 2022 due to incomplete data collection.

# Health Equity

Evaluating sexually transmitted infection (STI) surveillance data should be done through a health equity lens to ensure that everyone has an equal opportunity to be healthy, regardless of their background, including gender, race, ethnicity, sexual identity, disability, and religion. Through this report, the aforementioned factors have affected the incidence of HIV and Syphilis among the Ohio Region Five population, resulting in higher rates among certain groups.

Historically, STI rates have been higher among racial/ethnic minority groups compared to White individuals, and higher among men who have sex with men (MSM), compared to heterosexual individuals. Nationally, MSM accounted for almost half (45.1%) of all male primary and secondary syphilis cases in 2022. In 2022, the highest rate of reported cases of primary and secondary syphilis was among non-Hispanic American Indian/Alaskan Native men (74.7 per 100,000), followed closely by non-Hispanic Black/African American men (70.9 per 100,000). This is compared to a rate of 14.5 in non-Hispanic white men. This is a 5.2 and 4.9 racial disparity rate, respectively.

In this report, we observed a large increase in cases and disparity between syphilis rates among Black/AA individuals compared to white individuals. In 2023, the rate of total syphilis among Ohio Region Five Black/African American individuals was 97.5 per 100,000 versus the rate among white individuals at 16.6 per 100,000. HIV rates among the Ohio Region Five Black/African American population have decreased over the past few years, but the disparity between Black/African American individuals and white individuals remains the same.



We must continue to incorporate health equity-based public health practices in regards to HIV and syphilis prevention. A health equity approach will be a key factor in reducing health disparities moving forward. Our Region Five HIV Prevention and Education Planning Advisory Group (RAG) works together to identify priority populations for services and identifies ways those services can be distributed in an equitable manner.

*“Disease only treats humans equally when  
our social orders treat humans equally”  
- John Green*

# Screening Recommendations

## Syphilis Screening Recommendations:

- **Women**
  - o Screen asymptomatic individuals at increased risk
- **Pregnant women**
  - o First prenatal visit
  - o Retest at 28 weeks gestation and at delivery if high risk
- **Men who have sex with women**
  - o Screen asymptomatic individuals at increased risk
- **Men who have sex with men (MSM)**
  - o Annually for sexually active MSM
  - o Every 3-6 months if at increased risk
  - o Asymptomatic individuals at increased risk
- **Transgender and Gender Diverse Population**
  - o At least annually (based on reported sexual behavior and exposures)
- **Persons with HIV**
  - o At first HIV evaluation (if sexually active)
  - o At least annually

## HIV Screening Recommendations:

- **Women**
  - o Those ages 13-64 years old
  - o Those who seek STI evaluation and treatment
- **Pregnant women**
  - o First prenatal visit
  - o Retest in 3<sup>rd</sup> trimester if at high risk
  - o Rapid testing at delivery if not previously screened during pregnancy
- **Men who have sex with women**
  - o Those ages 13-64 years old
  - o Those who seek STI evaluation and treatment
- **Men who have sex with men (MSM)**
  - o At least annually for sexually active MSM if HIV status is unknown or negative and have had more than one partner since most recent test
  - o Every 3-6 months if at increased risk
- **Transgender and Gender Diverse Population**
  - o Should be discussed and offered to all transgender persons

# Prevention and Outreach in Region Five

- **The following jurisdictions offer STI and/or HIV testing. Please call the number below or visit their website:**
  - o [Alliance City](#)- 330-821-7373
  - o [Canton City](#)- 330- 489-3322
  - o [Harrison County](#)- 740-942-2616 Ext. 5
  - o [Jefferson County](#)- 740 283-8530
  - o [Massillon City](#)- 330-830-1714
  - o [New Philadelphia City](#)- 330-364-4491
  - o [Stark County](#)- 330-493-9928 ext. 1495
  - o [Tuscarawas County](#)- 330-343-5555 ext. 1810
  - o [Wayne County](#)- 330-264-1942
- **Additionally, Canton City Public Health and Massillon City Health Department have a “Brown Bag Program”. These programs provide free condoms to anyone—no STI testing services are required to participate. Canton City Public Health’s STI Prevention Program team has also participated in a variety of community outreach events, such as Stark Pride and World AIDS Day, with a focus on free HIV testing and condoms.**



**FREE  
CONDOMS**



STOP BY OUR NURSING OFFICE  
& ASK FOR A "BROWN BAG"



CANTON CITY PUBLIC HEALTH  
420 MARKET AVE N  
CANTON OH 44702  
8:30 AM - 4:30 PM  
(CLOSED NOON - 1PM)



**STARK  
PRIDE**  
June 10th, 2023

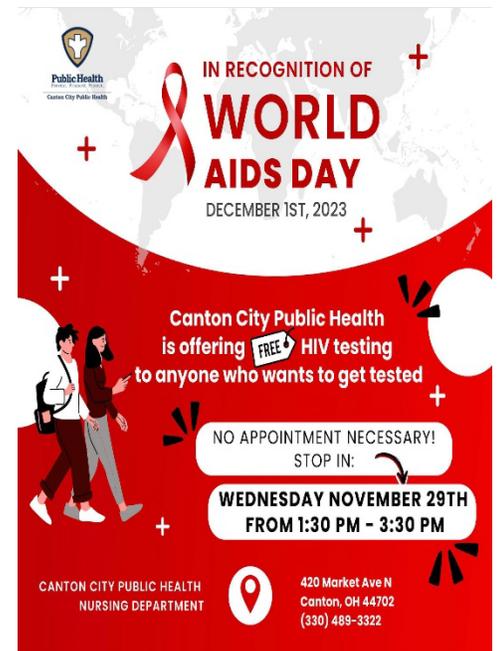
**FREE HIV TESTING**

2PM-7PM

**Public Health**  
Prevent. Promote. Protect.  
Canton City Public Health

CANTON CITY PUBLIC HEALTH  
420 MARKET AVE NORTH  
CANTON, OH 44702

*Take pride in Your Health  
Know your Status!*



**IN RECOGNITION OF  
WORLD  
AIDS DAY**  
DECEMBER 1ST, 2023

Canton City Public Health  
is offering **FREE** HIV testing  
to anyone who wants to get tested

NO APPOINTMENT NECESSARY!  
STOP IN:

**WEDNESDAY NOVEMBER 29TH  
FROM 1:30 PM - 3:30 PM**

CANTON CITY PUBLIC HEALTH  
NURSING DEPARTMENT

420 Market Ave N  
Canton, OH 44702  
(330) 489-3322

# References

1. <https://www.washingtonpost.com/health/2024/02/01/syphilis-cases-surge-united-states/>
  - a. Factors influencing the rise in syphilis cases
2. <https://www.cdc.gov/std/statistics/2020/2020-SR-4-10-2023.pdf>
  - a. COVID-19's impact on national STI numbers
3. <https://odh.ohio.gov/know-our-programs/stip/resources/std-prevention-map>
  - a. Ohio STD/HIV Regions map
4. <https://www.cdc.gov/std/syphilis/stdfact-syphilis-detailed.htm>
  - a. Syphilis signs and symptoms
5. <https://www.cdc.gov/std/syphilis/stdfact-congenital-syphilis.htm>
  - a. Congenital syphilis info
6. <https://www.cdc.gov/std/statistics/2022/slides/2022-STI-Surveillance-All-Slides.pptx>
  - a. Congenital syphilis graph- Slide 80
  - b. Statistics by sexual and gender minorities/racial and ethnic minorities for health equity page- Slides 67 and 76
7. [https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s\\_cid=mm7246e1w](https://www.cdc.gov/mmwr/volumes/72/wr/mm7246e1.htm?s_cid=mm7246e1w)
  - a. Congenital syphilis statistics and prevention recommendations
8. <https://www.cdc.gov/std/treatment-guidelines/syphilis-pregnancy.htm>
  - a. Syphilis treatment guidelines during pregnancy
9. <https://www.cdc.gov/std/dstdp/dcl/2023-july-20-Mena-BicillinLA.htm>
  - a. Syphilis drug treatment shortage and its implications for pregnant persons and babies
10. <https://www.cdc.gov/hiv/basics/syndication-test.html>
  - a. HIV signs and symptoms
11. <https://odh.ohio.gov/know-our-programs/hiv-aids-surveillance-program/Data-and-Statistics>
  - a. HIV definitions
10. <https://www.cdc.gov/std/treatment-guidelines/screening-recommendations.htm>
  - a. Screening recommendations for syphilis and HIV by population

# Tables

**TABLE 1. TOTAL SYPHILIS CASES IN REGION FIVE COUNTIES, OHIO, 2019-2023**

	2019	2020	2021	2022	2023
<b>Carroll</b>	0	2	0	3	3
<b>Coshocton</b>	0	1	1	1	2
<b>Harrison</b>	1	3	0	1	1
<b>Holmes</b>	1	0	4	0	2
<b>Jefferson</b>	2	3	6	4	5
<b>Stark</b>	34	42	64	112	128
<b>Tuscarawas</b>	4	2	3	3	6
<b>Wayne</b>	4	5	9	13	20
<b>Totals</b>	<b>46</b>	<b>58</b>	<b>87</b>	<b>137</b>	<b>167</b>

**TABLE 2. TOTAL SYPHILIS CASES BY DEMOGRAPHIC CHARACTERISTICS, OHIO REGION FIVE, 2019-2023**

	2019	2020	2021	2022	2023
<b>Sex</b>					
Female	4	12	25	42	59
Male	41	44	60	92	107
Trans Woman	1	2	2	3	1
<b>Age</b>					
CS	0	0	2	2	2
15-19	1	1	2	3	1
20-24	8	11	14	27	9
25-29	12	9	17	10	20
30-34	5	12	20	22	24
35-39	6	8	13	22	24
40-44	5	7	9	17	22
45-54	5	5	6	15	34
55-64	4	4	4	16	24
65+	0	1	0	3	7
<b>Race</b>					
Asian	0	0	0	1	0
Black/African American	11	16	26	43	44
Multiracial	0	1	1	6	4
Other	0	0	0	1	1
White	35	41	60	86	118

**TABLE 3. TOTAL SYPHILIS CASES BY DEMOGRAPHIC CHARACTERISTICS, OHIO REGION FIVE (EXCLUDING STARK COUNTY), 2019-2023**

	2019	2020	2021	2022	2023
<b>Sex</b>					
Female	2	6	4	8	13
Male	10	10	19	16	26
Trans Woman	0	0	0	1	0
<b>Age</b>					
CS	0	0	1	0	0
15-19	1	1	0	0	0
20-24	0	4	4	9	5
25-29	4	1	3	2	6
30-34	2	6	4	4	3
35-39	1	2	5	3	5
40-44	1	0	3	1	1
45-54	2	1	2	3	11
55-64	1	1	1	2	5
65+	0	0	0	1	3
<b>Race</b>					
Asian	0	0	0	1	0
Black/African American	1	0	3	4	5
White	11	15	20	18	32
Multiracial	0	1	0	2	2

**TABLE 4. TOTAL SYPHILIS CASES BY DEMOGRAPHIC CHARACTERISTICS, STARK COUNTY, OHIO, 2019-2023**

	2019	2020	2021	2022	2023
<b>Sex</b>					
Female	2	6	21	34	46
Male	31	34	41	76	81
Trans Woman	1	2	2	2	1
<b>Age</b>					
CS	0	0	1	2	2
15-19	0	0	2	3	1
20-24	8	7	10	18	4
25-29	8	8	14	8	14
30-34	3	6	16	18	21
35-39	5	6	8	19	19
40-44	4	7	6	16	21
45-54	3	4	4	12	23
55-64	3	3	3	14	19
65+	0	1	0	2	4
<b>Race</b>					
Black/African American	10	16	23	39	39
Multiracial	0	0	1	4	2
Other	0	0	0	1	1
White	24	26	40	68	86

**TABLE 5. INFECTIOUS SYPHILIS CASES IN REGION FIVE COUNTIES, OHIO, 2019-2023**

	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>	<b>2023</b>
<b>Carroll</b>	0	2	0	2	2
<b>Coshocton</b>	0	0	1	1	1
<b>Harrison</b>	0	2	0	0	1
<b>Holmes</b>	1	0	4	0	2
<b>Jefferson</b>	1	1	4	4	4
<b>Stark</b>	26	32	45	80	81
<b>Tuscarawas</b>	4	1	1	3	5
<b>Wayne</b>	1	2	5	7	11
<b>Totals</b>	<b>33</b>	<b>40</b>	<b>60</b>	<b>97</b>	<b>107</b>

**TABLE 6. HIV CASES IN REGION FIVE COUNTIES, OHIO, 2019-2023**

	2019	2020	2021	2022	2023
<b>Carroll</b>	0	0	0	0	0
<b>Coshocton</b>	0	0	0	1	0
<b>Harrison</b>	0	0	1	0	0
<b>Holmes</b>	0	0	0	0	0
<b>Jefferson</b>	1	3	4	2	2
<b>Stark</b>	18	24	25	25	14
<b>Tuscarawas</b>	0	3	0	2	4
<b>Wayne</b>	6	3	2	4	6
<b>Totals</b>	<b>25</b>	<b>33</b>	<b>32</b>	<b>34</b>	<b>26</b>

**TABLE 7. HIV CASES BY DEMOGRAPHIC CHARACTERISTICS, OHIO REGION FIVE, 2019-2023**

	2019	2020	2021	2022	2023
<b>Sex</b>					
Female	5	5	9	6	4
Male	20	27	23	26	20
Trans Woman	0	1	0	2	2
<b>Age</b>					
<15	0	1	0	0	0
15-24	5	11	6	7	4
25-34	8	8	16	9	2
35-44	1	4	2	8	5
45-54	8	5	3	7	9
55-64	1	3	3	2	3
65+	2	1	2	1	3
<b>Race</b>					
Asian	0	0	0	1	0
Black/African American	10	11	8	7	6
Multiracial	2	1	3	2	2
Other	0	0	0	1	0
White	13	21	21	23	18

**TABLE 8. HIV CASES BY DEMOGRAPHIC CHARACTERISTICS, OHIO REGION FIVE (EXCLUDING STARK COUNTY), 2019-2023**

	2019	2020	2021	2022	2023
<b>Sex</b>					
Female	1	3	2	0	1
Male	6	6	5	10	10
Trans Woman	0	0	0	0	1
<b>Age</b>					
<15	0	1	0	0	0
15-24	1	0	2	3	2
25-34	1	1	3	2	2
35-44	0	1	0	4	4
45-54	5	4	1	1	3
55-64	0	2	0	0	1
65+	0	0	1	0	0
<b>Race</b>					
Asian	0	0	0	1	0
Black/African American	2	0	1	1	1
Multiracial	0	0	1	1	0
Other	0	0	0	0	0
White	5	9	5	7	11

**TABLE 9. HIV CASES BY DEMOGRAPHIC CHARACTERISTICS, STARK COUNTY, OHIO, 2019-2023**

	2019	2020	2021	2022	2023
<b>Sex</b>					
Female	4	2	7	6	3
Male	14	21	18	16	10
Trans Woman	0	1	0	2	1
<b>Age</b>					
<15	0	0	0	0	0
15-24	4	11	4	4	2
25-34	7	7	13	7	5
35-44	1	3	2	4	5
45-54	3	1	2	6	0
55-64	1	1	3	2	2
65+	2	1	1	1	0
<b>Race</b>					
Asian	0	0	0	0	0
Black/African American	8	11	7	6	5
Multiracial	2	1	2	1	2
Other	0	0	0	1	0
White	8	12	16	16	14