2022
HIV + SYPHILIS
DATA BRIEF

For HIV and STI resources, information, and more, scan the QR code at left
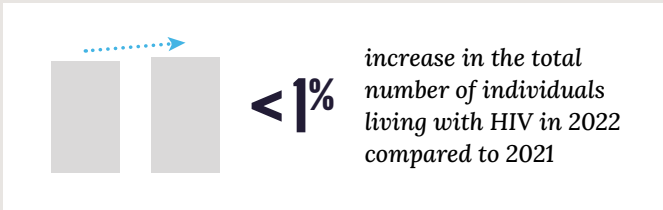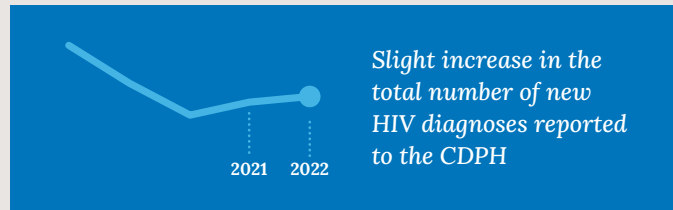
CDPH
Chicago Department
of Public Health

SYNDEMIC INFECTIOUS
DISEASE BUREAU

KEY FINDINGS

The Chicago Department of Public Health (CDPH) 2022 HIV + STI Data Brief Report presents HIV care continuum data, data for new and prevalent cases of HIV, and data for new diagnoses of syphilis including congenital syphilis.

1

In 2022, a total of 627 new HIV diagnoses were reported to the CDPH. This represents a slight increase compared to 2021 (624 new HIV diagnoses).

Slight increase in the total number of new HIV diagnoses reported to the CDPH

2021   2022

2

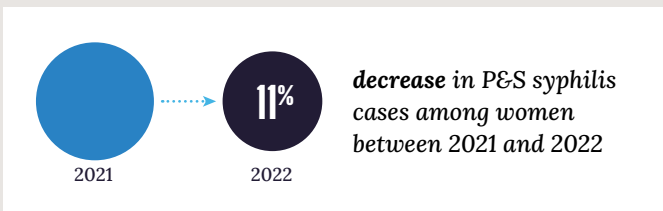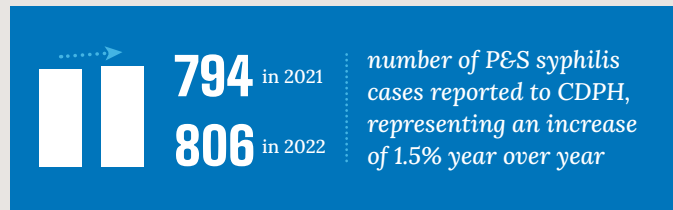*increase in the total number of individuals living with HIV in 2022 compared to 2021*

<1%

A total of 18,887 individuals had been diagnosed with HIV through 2021 and were living with HIV in 2022. This represents a <1% increase compared to 2021 (18,755 prevalent HIV cases).

3

In 2022, a total of 806 primary and secondary (P&S) syphilis cases were reported to CDPH. In 2022, the number of P&S syphilis cases (806) reported to CDPH increased by 1.5% as compared to 2021 (794).

794 in 2021
806 in 2022

number of P&S syphilis cases reported to CDPH, representing an increase of 1.5% year over year

4

decrease in P&S syphilis cases among women between 2021 and 2022

11%

2021   2022

In 2022, the number of P&S syphilis cases among persons with female sex assigned at birth (FSAB) (146) decreased by almost 11% as compared to 2021 (164).

5

In 2022, there were 46 reported cases of congenital syphilis which represents a 5-year increase of 254% since 2018 (13 cases).

254%

2018   2022

increase in reported contenital syphilis cases between 2018 and 2022
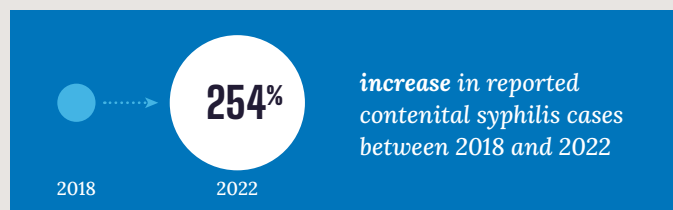
For more HIV + STI Resources, visit:
www.chicago.gov/city/en/depts/cdph/provdrs/infectious_disease/svcs/sti_hiv_resources.html

Data Notes: Please note, in previous years, multiple imputation methodology (MI) was used to calculate the total number of new HIV diagnoses and prevalent HIV cases. In this year's report, similar to the 2021 HIV/STI surveillance report, we no longer use MI. As is in the previous report, for HIV prevalent cases, calculations are based on current place of residence. Previously, we used residence at the time of diagnosis. In addition, all data presented in this report are provisional

HIV Care Continuum

The HIV care continuum is a public health model that outlines the steps or stages people with HIV go through from diagnosis to achieving and maintaining viral suppression (a very low or undetectable amount of HIV in the blood) through care and treatment with antiretroviral therapy (ART).

Since ensuring people living with HIV are engaged in care is critical to both individual and population-level health, the continuum was developed to depict two paths: (a) the percentages of newly diagnosed individuals linked to HIV medical care over the course of one year and (b) the percentages of people living with HIV at specific levels of care engagement and viral suppression.

- In 2022, 81% of persons newly diagnosed with HIV in Chicago were linked to HIV medical care within one month of HIV diagnosis, and 92% were linked to medical care within 12 months (Fig. 1.1). By comparison, in 2021, 84% of persons newly diagnosed with HIV were linked to HIV medical care within one month of HIV diagnosis, and 94% were linked to medical care within 12 months.

- A total of 18,887 individuals had been diagnosed with HIV through 2021 and were living with HIV in 2022, yielding a rate of 687.7 per 100,000 population (Table 1.1). Among all people in Chicago living with HIV in 2022, 74% accessed care (at least 1 medical care visit in 2022), and 46% were retained in medical care (at least 2 medical care visits in 2022, 91 days or more apart) (Fig. 1.1). In comparison, in 2021, 74% of individuals accessed care, and 43% were retained in medical care.

- Fifty-three percent of people living with HIV in Chicago achieved viral suppression in 2022 (Fig. 1.1), a 7% decrease from 60% in 2021.

HIV

In 2022, a total of 627 new HIV diagnoses were reported among Chicago residents with a corresponding rate of 22.8 per 100,000 population (Table 1.1). This represents a less than 0.5% increase compared to 2021 (624 new HIV diagnoses). In addition, 275 individuals were newly diagnosed with AIDS, a 12.7% increase over 2021, with an AIDS case rate of 10.0 per 100,000 population (Table 1.1, Fig. 1.3). Of those newly diagnosed in 2022, a total of 124 individuals were considered to have a late/concurrent diagnosis, an increase of 12.7% since 2021, indicating that individuals were diagnosed with HIV and subsequently AIDS within 12 months (Table 1.2, Fig. 1.3).

- Between 2018-2022, there were declines in people living with HIV across most demographic groups (Table 1.3).

- HIV continues to disproportionately impact certain groups more than others. There are roughly 4 times as many new HIV infections diagnosed among cisgender males as compared to cisgender females and 4.7 times as many cisgender men living with HIV as cisgender women. There are roughly 3.5 times as many new HIV infections diagnosed among cisgender gay, bisexual and other men who have sex with men (MSM) as compared to cisgender male and female heterosexuals and 4.7 times as many cisgender MSM living with HIV as cisgender male and female heterosexuals. Additionally, the proportion of new HIV diagnoses, by age, is highest among individuals aged 20-29 years and, by race/ethnicity, among non-Hispanic Black persons (Table 1.2).

- In 2022, the top three community areas with the highest average HIV infection diagnosis rates were Uptown (50.8 per 100,000), Kenwood (47.1 per 100,000), and Oakland (44.1 per 100,000) (Fig. 1.2). The top three community areas with the highest number of new HIV infection diagnoses were Austin (n=35), Uptown (n=28), and Lakeview (n=26) (Fig. 1.2).

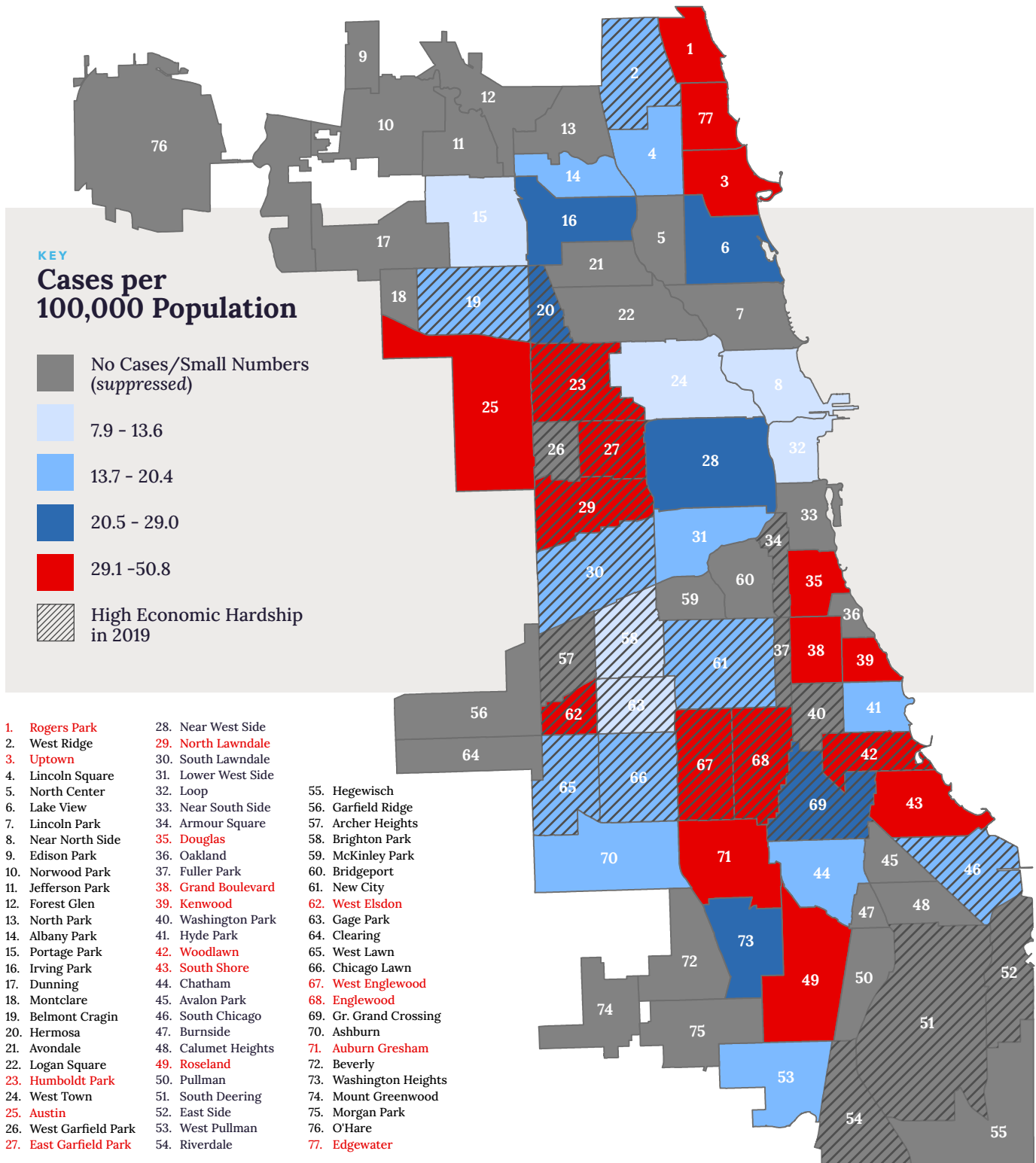# HIV Continuum of Care Among Persons 13 Years and Older, Chicago, 2022 (as of 09/26/2023)
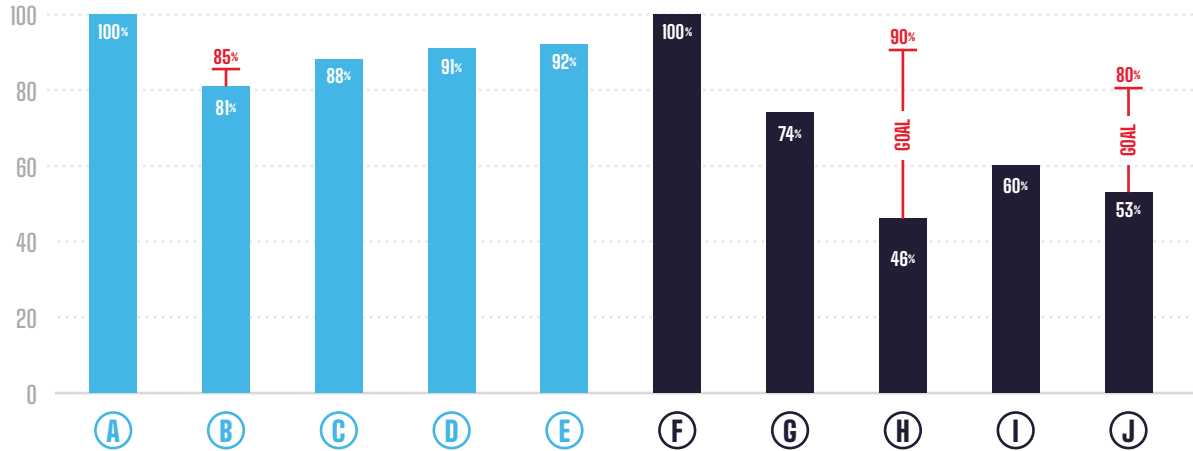
A: # New HIV Diagnoses (2022); **B:** % Linked to Care within 1 month of HIV diagnosis; **C:** % Linked to Care within 3 months of HIV diagnosis; **D:** % Linked to Care within 6 months of HIV diagnosis; **E:** % Linked to Care within 12 months of HIV diagnosis; **F:** # Diagnosed thru 2021 and living with HIV in 2022; **G:** % Accessing Care (*at least 1 visit in 2022*); **H:** % Retained in Care (*at least 2 visits in 2022, 3 months apart*); **I:** # Persons with at least 1 Viral Load test in 12 months; **J:** % Virally Suppressed (*< 200 copies/mL*)

(a) Number of persons ≥ 13 years of age at diagnosis and diagnosed with HIV infection between 1/1/2022 and 12/31/2022. Source: Chicago enhanced HIV/ AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Link1 Table. (b) Percent of persons ≥ 13 years of age linked to care (at least one CD4, VL, or HIV-1 genotype test) within 1 month of HIV diagnosis among those diagnosed with HIV infection between 1/1/2022 and 12/31/2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2022). NHAS output, Link1 Table. (c) Percent of persons ≥ 13 years of age linked to care (at least one CD4, VL, or HIV-1 genotype test) within 3 months of HIV diagnosis among those diagnosed with HIV infection between 1/1/2022 and 12/31/2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Link1 Table. (d) Percent of persons ≥ 13 years of age linked to care (at least one CD4, VL, or HIV-1 genotype test) within 6 months of HIV infection among those diagnosed with HIV infection between 1/1/2022 and 12/31/2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Link1 Table. (e) Percent of persons ≥ 13 years of age linked to care (at least one CD4, VL, or HIV-1 genotype test) within 12 months of HIV diagnosis among those diagnosed with HIV infection between 1/1/2022 and 12/31/2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Link1 Table. (f) Number of persons ≥ 13 years of age on 12/31/2021 diagnosed with HIV through 12/31/2021 and living with HIV on 12/31/2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Care1 and VL1 Tables. (g) Percent of persons ≥ 13 years of age on 12/31/2021 diagnosed with HIV through 12/31/2021 and living with HIV on 12/31/2022 who received at least one medical care visit (at least one CD4 or VL) between January 2022 and December 2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Care1 Table. (h) Percent of persons ≥ 13 years of age on 12/31/2021 diagnosed with HIV through 12/31/2021 and living with HIV on 12/31/2022 who received at least two medical care visits (at least one CD4 or VL at each), 3 months apart, between January 2022 and December 2022. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, Care1 Table. (i) Percent of persons ≥ 13 years of age on 12/31/2021 diagnosed with HIV through 12/31/2021 and living with HIV on 12/31/2022 who received at least one VL test in the past 12 months. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, VL1 Table. (j) Percent of persons ≥ 13 years of age on 12/31/2021 diagnosed with HIV through 12/31/2021 and living with HIV on 12/31/2022 whose most recent viral load test result was less than 200 copies/mL. Source: Chicago enhanced HIV/AIDS reporting system (eHARS) (as of 09/26/2023). NHAS output, VL1 Table. Note: Red bars represent the National HIV/AIDS Strategy (NHAS) indicators for 2020

Rate of HIV Infection Diagnoses by Community Area, Chicago, 2022

KEY

Cases per 100,000 Population

- No Cases/Small Numbers (*suppressed*)
- 7.9 - 13.6
- 13.7 - 20.4
- 20.5 - 29.0
- 29.1 -50.8
- High Economic Hardship in 2019

1. Rogers Park
2. West Ridge
3. Uptown
4. Lincoln Square
5. North Center
6. Lake View
7. Lincoln Park
8. Near North Side
9. Edison Park
10. Norwood Park
11. Jefferson Park
12. Forest Glen
13. North Park
14. Albany Park
15. Portage Park
16. Irving Park
17. Dunning
18. Montclare
19. Belmont Cragin
20. Hermosa
21. Avondale
22. Logan Square
23. Humboldt Park
24. West Town
25. Austin
26. West Garfield Park
27. East Garfield Park
28. Near West Side
29. North Lawndale
30. South Lawndale
31. Lower West Side
32. Loop
33. Near South Side
34. Armour Square
35. Douglas
36. Oakland
37. Fuller Park
38. Grand Boulevard
39. Kenwood
40. Washington Park
41. Hyde Park
42. Woodlawn
43. South Shore
44. Chatham
45. Avalon Park
46. South Chicago
47. Burnside
48. Calumet Heights
49. Roseland
50. Pullman
51. South Deering
52. East Side
53. West Pullman
54. Riverdale
55. Hegewisch
56. Garfield Ridge
57. Archer Heights
58. Brighton Park
59. McKinley Park
60. Bridgeport
61. New City
62. West Elsdon
63. Gage Park
64. Clearing
65. West Lawn
66. Chicago Lawn
67. West Englewood
68. Englewood
69. Gr. Grand Crossing
70. Ashburn
71. Auburn Gresham
72. Beverly
73. Washington Heights
74. Mount Greenwood
75. Morgan Park
76. O'Hare
77. Edgewater

Data Source: Illinois National Electronic Disease Surveillance System (as of 09/26/2023), City of Chicago GIS Shapefiles and US Census.

This map represents 87.8% (551/627) of total new HIV infection diagnoses. The economic hardship index utilizes multiple indicators to measure economic conditions of Chicago Community Areas. High hardship index scores indicate worse economic conditions.

People Living with HIV Infection (PLWH), People Diagnosed with HIV Infection, People Diagnosed with AIDS, Concurrent HIV/AIDS Diagnoses, and Deaths Among PLWH, Chicago, 1990-2022 (as of 9/26/2023)
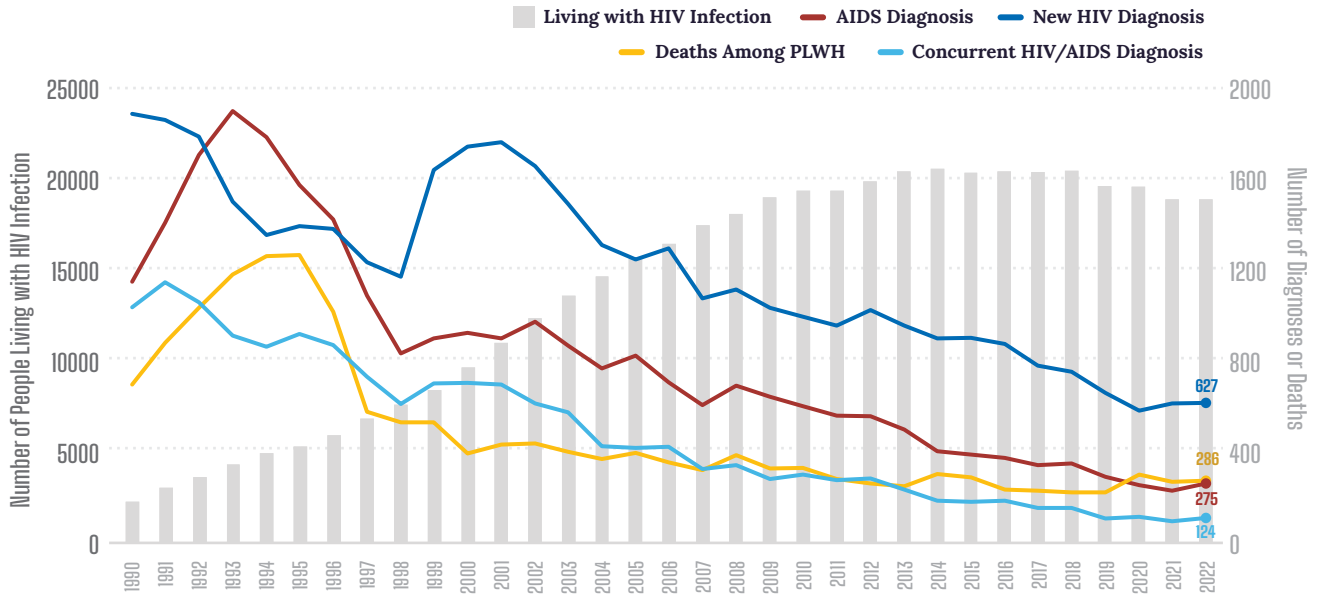
Notes on Surveillance Reporting: **1983** *AIDS case reporting begins;* **1995** *Effective drug therapy against HIV becomes available;* **1999** *Code-based HIV reporting begins;* **2006** *Name-based HIV reporting begins;* **2012** *All CD4 and viral load labs become reportable*

HIV & AIDS Case Rates by Race/Ethnicity and Birth Sex, Chicago, 2022¥

Demographic Characteristics	HIV Infection§		AIDS		HIV Prevelance, 2022§	
	No.	Rate*	No.	Rate*	No.	Rate*
Race/Ethnicity^						
Black, non-Hispanic	301	38.2	151	19.2	8,887	1,128.4
White, non-Hispanic	94	10.9	37	4.3	3,769	436.4
Hispanic	193	23.6	62	7.6	4,407	537.8
Asian/PI, non-Hispanic	18	9.5	<5	1.1	239	125.5
AI/AN, non-Hispanic	<5	30.0	0	0.0	13	390.2
Other, non-Hispanic	17	20.7	21	25.6	1,486	1,812.7
Unknown	<5		<5		86	
Sex¶						
Female	113	8.0	70	4.9	3,278	231.9
Male	514	38.6	205	15.4	15,609	1,171.2
Unknown						
Chicagoβ	627	22.8	275	10.0	18,887	687.7

¥ 2022 Diagnoses for HIV and AIDS; 2022 HIV Prevalence; All rates per 100,000 population using U.S. Census Bureau Population Figures from 2020.§ HIV infection diagnosis and prevalence represents people with HIV at any stage of disease through 12/31/22. ^ AI/AN refers to American Indian/ Alaskan Native. ¶ Counts based on birth sex. β Totals of newly diagnosed HIV and AIDS may be lower due to incomplete laboratory reporting.

TABLE 1.2

HIV and AIDS Infections, HIV Late Diagnoses and HIV Prevalence by Selected Demographic Characteristics, Chicago, 2022 (as of 09/26/2023)

Demographic Characteristics	HIV*		AIDS*		Late Diagnosis‡		Prevalence‡	
	No.	%	No.	%	No.	%	No.	%
RACE/ETHNICITY^								
Black, non-Hispanic	301	48.0%	151	54.9%	63	50.8%	8887	47.1%
White, non-Hispanic	94	15.0%	37	13.5%	11	8.9%	3769	20.0%
Hispanic	193	30.8%	62	22.5%	41	33.1%	4407	23.3%
Asian/PI, non-Hispanic	18	2.9%	<5	<1%	<5	<1%	239	1.3%
AI/AN, non-Hispanic	<5	<1%	0	0.0%	0	0.0%	13	<1%
Multiple, non-Hispanic	17	2.7%	21	7.6%	7	5.6%	1486	7.9%
Unknown	<5	<1%	<5	<1%	0	0.0%	86	0.5%
GENDER**								
Female	113	18.0%	69	25.1%	31	25.0%	3227	17.1%
Male	488	77.8%	200	72.7%	91	73.4%	15194	80.4%
Transgender: FtM	0	0.0%	<5	<1%	0	0.0%	51	<1%
Transgender: MtF	26	4.1%	5	<1%	<5	1.6%	415	2.2%
TRANSMISSION GROUP								
Male Sex w/Male	377	60.1%	129	46.9%	55	44.4%	11469	60.7%
Injection Drug Use	<5	<1%	16	5.8%	<5	2.4%	1298	6.9%
MSM and IDU§	8	1.3%	6	<1%	<5	0.0%	832	4.4%
Heterosexual	106	16.9%	59	21.5%	32	25.8%	2312	12.2%
Other¶	0	0.0%	<5	<1%	0	0.0%	207	1.1%
NIRα	132	21.1%	62	22.5%	32	25.8%	2769	14.7%
AGE GROUP†								
13–19	18	2.9%	<5	<1%	<5	1.6%	74	<1%
20–29	238	38.0%	61	22.2%	37	29.8%	1869	9.9%
20–24	87	13.9%	18	6.5%	14	11.3%	514	2.7%
25–29	151	24.1%	43	15.6%	23	18.5%	1355	7.2%
30–39	198	31.6%	77	28.0%	41	33.1%	4059	21.5%
40–49	91	14.5%	46	16.7%	20	16.1%	3743	19.8%
50–59	51	8.1%	41	14.9%	12	9.7%	4954	26.2%
60+	31	4.9%	47	17.1%	12	9.7%	4188	22.2%
TOTAL€	**627**	**100.0%**	**275**	**100.0%**	**124**	**100.0%**	**18887**	**100.0%**

Note: Groups may not total 100% due to rounding. Use caution when interpreting data based on less than 20 events; rate/percent is unreliable. Due to methodology of reporting HIV and AIDS numbers in line with National HIV/AIDS Strategy, this table will not contain HIV and AIDS cases less than 13 years of age *HIV infection diagnoses represents people newly diagnosed with HIV, at any stage of disease through 12/31/2022. AIDS represents all newly diagnosed as AIDS, or stage 3 HIV, through 12/31/2022. ‡ Late diagnosis represents those diagnosed with stage 3 HIV (AIDS) within 1 year of being diagnosed with HIV. ** Current gender identity or gender with which a person identifies. Because total diagnoses were calculated using current gender, independently of values using birth sex, total diagnoses may differ slightly across tables. ^ Multiple, non-Hispanic indicates more than one race identified. § Men who have sex with men and inject drugs. ¶ Includes perinatal transmission, blood transfusion and hemophilia. α No indicated risk (NIR). † Age at time of diagnosis. € Total case count may be lower due to incomplete laboratory reporting..

TABLE 1.3

People Living with HIV/AIDS by Selected Demographic Groups Using NHAS Indicator Methodology, Chicago, 2018-2022

Year of Diagnosis	2018		2019		2020		2021		2022		% Change 2018 – 2022€
	No.	%	No.	%	No.	%	No.	%	No.	%	
RACE/ETHNICITY^											
Black, non-Hispanic	9,553	46.7%	9,248	47.1%	9,284	47.4%	8,900	47.1%	8,887	47.1%	-7.0%
White, non-Hispanic	4,549	22.2%	4,139	21.1%	4,029	20.6%	3,792	20.1%	3,769	20.0%	-17.1%
Hispanic	4,421	21.6%	4,361	22.2%	4,404	22.5%	4,344	23.0%	4,407	23.3%	-0.3%
Asian/PI, non-Hispanic	236	1.2%	237	1.2%	244	1.2%	234	1.2%	239	1.3%	1.3%
AI/AN, non-Hispanic	12	<1.0%	11	<1.0%	12	<1.0%	12	<1.0%	13	<1.0%	8.3%
Other, non-Hispanic	1,695	8.3%	1,632	8.3%	1,616	8.2%	1,597	8.5%	1,572	8.3%	-7.3%
GENDER											
Female	3,622	17.7%	3,453	17.6%	3,422	17.5%	3,277	17.4%	3,227	17.1%	-10.9%
Male	16,419	80.2%	15,733	80.2%	15,703	80.2%	15,137	80.2%	15,194	80.4%	-7.5%
Transgender: FtM	55	<1.0%	53	<1.0%	51	<1.0%	51	<1.0%	51	<1.0%	-7.3%
Transgender: MtF	370	1.8%	389	2.0%	413	2.1%	414	2.2%	415	2.2%	12.2%
TRANSMISSION GROUP											
Male Sex w/Male	12,276	60.0%	11,787	60.1%	11,812	60.3%	11,407	60.4%	11,469	60.7%	-6.6%
Injection Drug Use	1,733	8.5%	1,588	8.1%	1,483	7.6%	1,346	7.1%	1,298	6.9%	-25.1%
MSM and IDU§	1,058	5.2%	957	4.9%	934	4.8%	882	4.7%	832	4.4%	-21.4%
Heterosexual	2,610	12.8%	2,495	12.7%	2,456	12.5%	2,341	12.4%	2,312	12.2%	-11.4%
Other¶	222	1.1%	212	1.1%	216	1.1%	213	1.1%	207	1.1%	-6.8%
NIRɑ	2,567	12.5%	2,589	13.2%	2,688	13.7%	2,690	14.2%	2,769	14.7%	7.9%
AGE GROUP†											
13-19	127	<1.0%	109	<1.0%	89	<1.0%	76	<1.0%	74	<1.0%	-41.7%
20-29	2,575	12.6%	2,398	12.2%	2,283	11.7%	2,063	10.9%	1,869	9.9%	-27.4%
20-24	745	3.6%	666	3.4%	597	3.0%	541	2.9%	514	2.7%	-31.0%
25-29	1,830	8.9%	1,732	8.8%	1,686	8.6%	1,522	8.1%	1,355	7.2%	-26.0%
30-39	4,045	19.8%	4,007	20.4%	4,107	21.0%	3,994	21.2%	4,059	21.5%	0.3%
40-49	4,613	22.5%	4,175	21.3%	4,029	20.6%	3,773	20.0%	3,743	19.8%	-18.9%
50+	9,106	44.5%	8,939	45.5%	9,081	46.4%	8,973	47.5%	9,142	48.4%	0.4%
TOTAL	20466		19628		19589		18879		18887		-7.7%

Note: Groups may not total 100% due to rounding. Use caution when interpreting data based on less than 20 events; rate/percent is unreliable. HIV and AIDS cases as of 09/26/2023. ^AI/AN refers to American Indian/ Alaskan Native, Asian/PI refers to Asian/ Pacific Islander. ¶Includes perinatal transmission, blood transfusion, and hemophilia. ɑ No indicated risk (NIR). †Current Age. €Annual Percent Change (APC) is used to provide a general picture of disease trends across the 5 years of the report. Due to methodology of reporting HIV and AIDS numbers in line with National HIV/AIDS Strategy, this table will not contain HIV and AIDS cases less than 13 years of age & as a result, caution should be used when comparing this year's report to previous years.

Primary and Secondary (P&S) Syphilis

- In 2022, a total of 806 P&S syphilis cases were reported to the CDPH at a rate of 29.3 per 100,000 (Table 2.1). This represents a 1.5% increase from 2021 (794 P&S syphilis cases).

- Nearly 82% of P&S syphilis cases in 2022 were diagnosed among persons with male sex assigned at birth (MSAB). Roughly one-third of reported P&S syphilis cases (36.6%) were diagnosed among MSAB who have sex with men (MSM) in 2022 (Table 2.1). It is worth noting that the proportion of P&S syphilis among persons with MSAB of unknown transmission risk in 2022 was 35.5% (Table 2.1), which is much higher than in previous years (from the years 2018 to 2020, the percentage of persons with MSAB with unknown transmission risk was between 9% to 25%).

- In 2022, individuals aged 20-29 years were the most frequently diagnosed group for P&S syphilis (32.0%), followed by those aged 30-39 years (31.6%) (Table 2.1).

- The majority of P&S syphilis cases reported in 2022 were among non-Hispanic Blacks (46.8%) (Table 2.1).

- The community areas with the highest rates of P&S Syphilis in 2022 were Uptown (88.9 per 100,000 population), Washington Park (78.7 per 100,000), and South Shore (71.3 per 100,000 population) (Fig. 2.1). The top three community areas with the highest number of new P&S syphilis infection diagnoses were Lakeview (n=52), Uptown (n=49), and Austin (n=38) (Figure 2.1).

TABLE 2.1

Reported Cases of Primary and Secondary (P&S) Syphilis by Selected Demographic Characteristics, Chicago, 2022

Demographic Characteristics	P&S Syphilis		
	No.	%	Rate
RACE/ETHNICITY^			
Black, non-Hispanic	377	46.8%	47.9
White, non-Hispanic	137	17.0%	15.9
Hispanic	138	17.1%	16.8
Asian/PI, non-Hispanic	8	1.0%	4.2
AI/AN,^ non-Hispanic	<5	<1%	30.1
Other, non-Hispanic	10	1.2%	12.2
Unknown	135	16.7%	
GENDER			
Female	146	18.1%	10.3
Male	660	81.9%	49.5
Unknown	0	0.0%	0.0
TRANSMISSION GROUP‡			
Male sex w/Male	295	36.6%	
Heterosexual Males	79	9.8%	
Females	146	18.1%	
Male unknown	286	35.5%	
AGE GROUP†			
Less than 13	0	0.0%	
13-19	28	3.5%	
20-29	258	32.0%	
20-24	96	11.9%	
25-29	162	20.1%	
30-39	255	31.6%	
40-49	146	18.1%	
50+	119	14.8%	
TOTAL	**806**		**29.3**

Note: Groups may not total 100% due to rounding. Use caution when interpreting data based on less than 20 events; rate/percent is unreliable. Rate per 100,000 population using 2010 U.S. Census Bureau population figures. ^AI/AN refers to American Indian/ Alaskan Native. ‡Transmission Group represents the sex of sexual partner of syphilis cases. Data on sex of sexual partners are not collected for chlamydia and gonorrhea. †Age a time of diagnosis. **Includes cases with unknown sex.

FIGURE 2.1

Primary and Secondary (P&S) Syphilis Case Rates by Community Area, Chicago, 2022

KEY

Cases per 100,000 Population

- No Cases/Small Numbers (*suppressed*)
- 9.0 - 19.3
- 19.4 - 33.3
- 33.4 - 57.5
- 57.6 - 88.9
- High Economic Hardship in 2019

1. Rogers Park
2. West Ridge
3. Uptown
4. Lincoln Square
5. North Center
6. Lake View
7. Lincoln Park
8. Near North Side
9. Edison Park
10. Norwood Park
11. Jefferson Park
12. Forest Glen
13. North Park
14. Albany Park
15. Portage Park
16. Irving Park
17. Dunning
18. Montclare
19. Belmont Cragin
20. Hermosa
21. Avondale
22. Logan Square
23. Humboldt Park
24. West Town
25. Austin
26. West Garfield Park
27. East Garfield Park
28. Near West Side
29. North Lawndale
30. South Lawndale
31. Lower West Side
32. Loop
33. Near South Side
34. Armour Square
35. Douglas
36. Oakland
37. Fuller Park
38. Grand Boulevard
39. Kenwood
40. Washington Park
41. Hyde Park
42. Woodlawn
43. South Shore
44. Chatham
45. Avalon Park
46. South Chicago
47. Burnside
48. Calumet Heights
49. Roseland
50. Pullman
51. South Deering
52. East Side
53. West Pullman
54. Riverdale
55. Hegewisch
56. Garfield Ridge
57. Archer Heights
58. Brighton Park
59. McKinley Park
60. Bridgeport
61. New City
62. West Elsdon
63. Gage Park
64. Clearing
65. West Lawn
66. Chicago Lawn
67. West Englewood
68. Englewood
69. Gr. Grand Crossing
70. Ashburn
71. Auburn Gresham
72. Beverly
73. Washington Heights
74. Mount Greenwood
75. Morgan Park
76. O'Hare
77. Edgewater

Data Source: Illinois National Electronic Disease Surveillance System (as of 08/30/23), City of Chicago GIS Shapefiles and US Census.

This map represents 91% (733/806) of total Primary and Secondary Syphilis cases. The economic hardship index utilizes multiple indicators to measure economic conditions of Chicago Community Areas. High hardship index scores indicate worse economic conditions.

Congenital Syphilis (CS)

Congenital syphilis (CS) is a significant public health problem. The incidence of CS reflects rates of P&S syphilis in persons of childbearing age. Most cases develop because a pregnant person received no prenatal care or insufficient treatment for syphilis before or during pregnancy. Syphilis infection left untreated in a pregnant person can lead to CS, which can subsequently lead to infection of the fetus and increased risk for stillbirth or death of the infant.

In 2022, the number of CS cases nearly doubled despite an 11% decrease in the number of P&S syphilis cases among persons with female sex assigned at birth (FSAB) between 2021 (164 P&S syphilis cases) and 2022 (146 P&S syphilis cases), (Table 2.1-2.2). In 2022, a total of 46 CS cases were reported to the CDPH, an 84% increase from 2021 (25 CS cases) and 253% increase in comparison to 2018 (13 CS cases) (Table 2.2).

- In 2022, pregnant people aged 20-29 years accounted for 54.3% of CS cases. The median age for CS cases in 2022 was 26 years old, similar to the median age in 2021 (27 years old) (Table 2.2).

- The highest proportion of CS cases were among non-Hispanic Black persons with FSAB (89.1%) (Table 2.2).

- The community areas with the highest average rates of CS between 2018 and 2022 were Fuller Park (1,000 per 100,000 live births), West Garfield Park (543.0 per 100,000 live births), and Greater Grand Crossing (465.1 per 100,000 live births) (Figure 2.2).
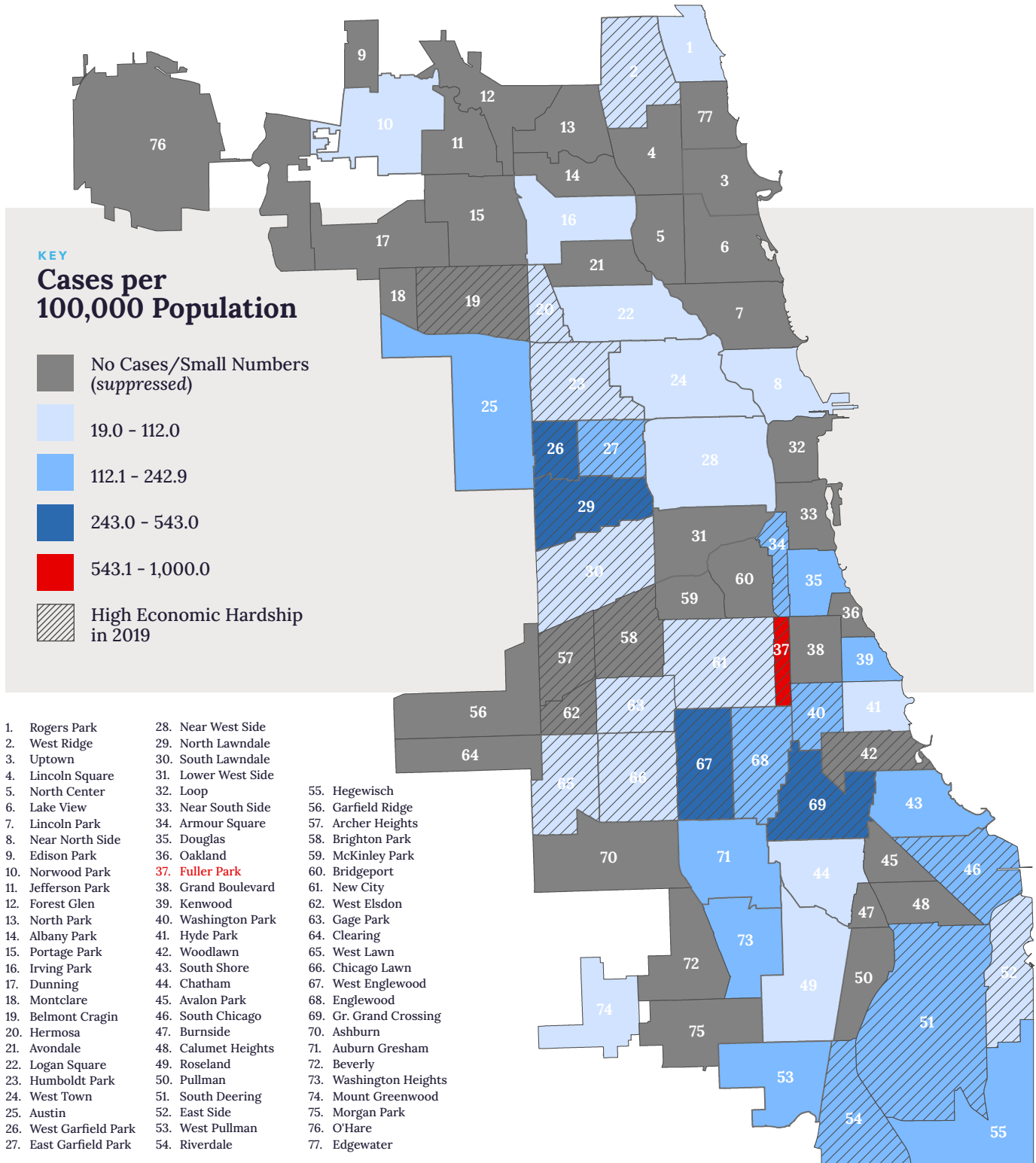
TABLE 2.2

Congenital Syphilis Cases by Selected Demographic Characteristics, Chicago, 2018-2022

Demographic Characteristics	2018* No.	2018* %	2019* No.	2019* %	2020 No.	2020 %	2021 No.	2021 %	2022 No.	2022 %
CASE CLASSIFICATION										
Presumptive Cases	13	100%	8	100%	17	89.5%	24	96.0%	46	100.0%
Stillborns	0	0.0%	0	0.0%	<5	--	5	4.0%	0	0.0%
RACE/ETHNICITY^										
Black, non-Hispanic	10	76.9%	5	62.5%	15	78.9%	19	76.0%	41	89.1%
White, non-Hispanic	<5	--	<5	--	<5	--	<5	--	<5	--
Hispanic	<5	--	0	0.0%	0	0.0%	<5	--	<5	--
Asian/PI, non-Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
AI/AN, non-Hispanic	0	0.0%	<5	--	0	0.0%	0	0.0%	0	0.0%
Other, non-Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
MATERNAL AGE CATEGORY†										
Less than 13	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
13-19	<5	--	0	0.0%	<5	--	<5	--	8	17.4%
20-29	8	61.5%	5	62.5%	10	52.6%	15	60.0%	25	54.3%
20-24	<5	--	5	62.5%	<5	--	5	20.0%	14	30.4%
25-29	5	38.5%	0	0.0%	7	36.8%	10	40.0%	11	23.9%
30-39	<5	--	<5	25.0%	8	42.1%	8	32.0%	13	28.3%
40+	0	0.0%	<5	12.5%	0	0.0%	<5	--	0	0.0%
Median Age	25		24		27		27		26	
TOTAL	**13**		**8**		**19**		**25**		**46**	

Note: Groups may not total 100% due to rounding. Use caution when interpreting data based on less than 20 events; rate/percent is unreliable. ^AI/AN refers to American Indian/ Alaskan Native.†Age at time of diagnosis. *Number of cases are based on the date of report to the Health Department. 2018 and 2019 case counts differ from previously reported count due to reclassification of cases.

Average Annual Congenital Syphilis Case Rates by Community Area, Chicago, 2018-2022

KEY

Cases per 100,000 Population

- No Cases/Small Numbers (*suppressed*)
- 19.0 - 112.0
- 112.1 - 242.9
- 243.0 - 543.0
- 543.1 - 1,000.0
- High Economic Hardship in 2019

1. Rogers Park	28. Near West Side	55. Hegewisch
2. West Ridge	29. North Lawndale	56. Garfield Ridge
3. Uptown	30. South Lawndale	57. Archer Heights
4. Lincoln Square	31. Lower West Side	58. Brighton Park
5. North Center	32. Loop	59. McKinley Park
6. Lake View	33. Near South Side	60. Bridgeport
7. Lincoln Park	34. Armour Square	61. New City
8. Near North Side	35. Douglas	62. West Elsdon
9. Edison Park	36. Oakland	63. Gage Park
10. Norwood Park	37. Fuller Park	64. Clearing
11. Jefferson Park	38. Grand Boulevard	65. West Lawn
12. Forest Glen	39. Kenwood	66. Chicago Lawn
13. North Park	40. Washington Park	67. West Englewood
14. Albany Park	41. Hyde Park	68. Englewood
15. Portage Park	42. Woodlawn	69. Gr. Grand Crossing
16. Irving Park	43. South Shore	70. Ashburn
17. Dunning	44. Chatham	71. Auburn Gresham
18. Montclare	45. Avalon Park	72. Beverly
19. Belmont Cragin	46. South Chicago	73. Washington Heights
20. Hermosa	47. Burnside	74. Mount Greenwood
21. Avondale	48. Calumet Heights	75. Morgan Park
22. Logan Square	49. Roseland	76. O'Hare
23. Humboldt Park	50. Pullman	77. Edgewater
24. West Town	51. South Deering	
25. Austin	52. East Side	
26. West Garfield Park	53. West Pullman	
27. East Garfield Park	54. Riverdale	

Data Source: Chicago Health Information Management System (as of 08/04/2023), City of Chicago GIS Shapefiles, and U.S Census.

Note: Rates per 100,000 were calculated using 2020 live births as the denominator.
The economic hardship index utilizes multiple indicators to measure economic conditions of Chicago Community Areas. High hardship index scores indicate worse economic conditions.