



A Brief for Policy Makers: NCS D Releases Its Second Survey of the Bicillin L-A Shortage Severity

The National Coalition of STD Directors (NCS D), the association representing state and local health department sexually transmitted disease directors and staff, has conducted a survey on the national Bicillin L-A shortage. The survey updates [NCS D's survey of sexual health clinics in August, which was the first known survey to measure the impact of the shortage on sexual health clinics](#) and has been expanded to include the very first survey questions for health department STI leaders on the shortage and its potential impact on syphilis cases.

As a follow-up to NCS D's first clinic survey on the shortage, this survey also explores how clinics and patients are impacted by use of doxycycline, the alternative treatment recommended by CDC for patients who are not pregnant. While doxycycline is an effective treatment for syphilis, patients can struggle to complete the full course of treatment needed to treat their syphilis and clinics must often add services to help patients complete treatment.

With responses from 151 clinics and 136 health departments representing 39 states, one territory, Washington, D.C. and communities served by Indian Health Services, the survey illustrates a worsening drug shortage with implications for the nation's explosive congenital syphilis outbreak.

Second Bicillin L-A Shortage Severity Survey November 6, 2023 – November 9, 2023

Health departments and clinics urgently need more information and resources from CDC and HHS to manage the impact of the shortage on patients and clinics.

- Given the number of respondents that reported pregnant people whose treatment was delayed, CDC needs a better system for monitoring cases of pregnant patients not accessing Bicillin L-A.
- The CDC needs to increase its communication to providers across different healthcare settings (80% of responding health departments want more communication in this area).
- Federal agencies and Pfizer need to be more communicative about the availability of Bicillin L-A (70% of responding health departments want more communication in this area).
- Health departments need additional funding to support disease intervention specialists' work to control rising congenital syphilis and syphilis (68% of health departments who responded to the survey say the Bicillin L-A shortage will cause syphilis rates to increase in their jurisdiction, and 67% of responding health departments say more funding for DIS would help them manage the shortage).
 - One state reported: *"we will lose 15 DIS who specifically follow up on syphilis in June of 2024."*

Pregnant patients are not getting the syphilis treatment they need when they need it.

- In the past three months, health departments from thirteen states and one tribal health board have received reports of a pregnant person in their jurisdiction who could not access Bicillin L-A, delaying treatment up to 28 days.
- Untreated or delayed treatment for syphilis during pregnancy can lead to congenital syphilis, a preventable and dangerous infection that can lead to serious side effects or death.
- Congenital syphilis rates rose significantly in the 2022 data released in CDC's Vital Signs Report. Survey data highlighting that pregnant people *in care* are being delayed treatment points to a dangerous on-the-ground situation that fails to address missed opportunities for screening and treatment.

The burden of the shortage is getting worse.

- In the previous three months, 46% of clinics have attempted to order Bicillin L-A, but the drug was not available (compared to 40% of clinics reporting this challenge in our first survey conducted in August).
 - 55% of clinics that had orders completely unfilled had more than half of their orders unfilled. (compared to only 38% of clinics reporting this challenge in our first survey).
- In the previous three months, 31% of clinics have received partially filled orders (compared to 33% of clinics reporting this challenge in our first survey).
- In the previous three months, 40% of clinics have had their Bicillin L-A orders delayed (compared to 37% of clinics reporting this challenge in our first survey).

Clinics are being good stewards throughout the shortage and ensuring patients are getting treated for syphilis.

- Two thirds of clinics are reserving doses for people who cannot use doxycycline, including pregnant people, or who would have challenges completing treatment with doxycycline, such as unhoused patients.
- Four in five clinics are only ordering the amount of Bicillin L-A they forecast needing.
- Using alternative treatment is an increased burden for providers due to the length of the treatment regimen. 63% of clinics have added follow-up appointments for patients receiving doxycycline, the alternative treatment CDC recommends for patients who are not pregnant.
- Despite the shortage, 100% of clinics that responded to the survey plan to protect the availability of client services, even as their capacity is stretched. This approach to patient care repeats the same pattern of dedication without being provided resources that the nation experienced during the 2022 mpox outbreak.

About the Survey

The Second Bicillin L-A Shortage Severity Survey was conducted November 6, 2023 – November 9, 2023. Responses were received from 136 state and local health departments and 151 sexual health clinics. The clinics that responded to the survey collectively serve nearly 70,000 patients each month and estimate providing syphilis screening or treatment to a minimum of 21,000 patients each month. View the full survey results [here](#).