

2003 Minnesota Sexually Transmitted Disease Statistics Minnesota Department of Health, STD and HIV Section

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Overview of Statistics and Highlights: The number of cases and rates (per 100,000 persons) for all reportable bacterial sexually transmitted diseases (STDs) for the years 1999 through 2003 are presented in Table 1 by year of diagnosis. Table 2 displays chlamydia, gonorrhea and primary/secondary syphilis case numbers and rates by residence, age, gender, and race/ethnicity for 2003. Chlamydia and gonorrhea case numbers and rates by county for 2003 are shown in Table 3.

Between 2002 and 2003 in Minnesota, the chlamydia rate increased by 6% and the gonorrhea rate increased by 5%. The resurgence of early syphilis primarily among gay/bisexual men that began in 2002 continued in 2003. Ninety-two cases of early syphilis (which includes primary, secondary, and early latent stages) were reported in Minnesota in 2003 compared to 82 cases in 2002 and 49 cases in 2001. Of the 92 early syphilis cases in 2003, 83 (90%) occurred among men. Seventy-one (86%) of the men reported having sex with other men (MSM). Almost half (42%) of the MSM diagnosed with early syphilis were co-infected with HIV. Similar trends have been observed in other parts of the country. MDH is collaborating with local physicians, clinics, and community-based organizations to stem the increase.

Between 2002 and 2003 in Minnesota, the primary/secondary syphilis rate decreased by 17% while the early latent syphilis rate increased by 80%. The increase in cases that were reported during the early latent stage (no symptoms present at diagnosis) rather than primary or secondary stage highlights the importance not only building greater awareness of syphilis symptoms among those at risk, but also the importance of routine screening.

STD rates continue to be highest in the seven-county metropolitan area, particularly in the cities of Minneapolis and St. Paul. Adolescents and young adults aged 15-24 years have the highest rates of chlamydia and gonorrhea, whereas the highest rates of primary/secondary syphilis are among persons in older age groups. Gonorrhea rates are comparable for men and women. However, due to more frequent screening among women, the reported rate of chlamydial infection among women is more than twice the rate among men. Rates of STDs remain elevated among communities of color.

Sources and Limitations of Data: In Minnesota, laboratory-confirmed infections of chlamydia, gonorrhea, syphilis, and chancroid are monitored by the MDH through a combined physician and laboratory-based surveillance system. State law (Minnesota Rule 4605.7040) requires both physicians and laboratories to report all cases of these four bacterial STDs directly to the MDH. Other common sexually transmitted conditions caused by viral pathogens, such as herpes simplex virus (HSV) and human papillomavirus (HPV), are not reported to the MDH. Factors that impact the completeness and accuracy of the available data on STDs include: level of screening, individual test-seeking behavior, accuracy of diagnostic tests, and compliance with case reporting. Thus, any changes in STD rates may be due to one of these factors or due to actual changes in STD occurrence.

Population counts used to calculate rates by residence, by gender, and by race/ethnicity were obtained from the U.S. Census Bureau. Population counts for 1999 were estimated by interpolation between the 1990 and 2000 Census data. Rates for 2000-2003 were calculated using each year's case data and population counts from the 2000 Census. The 2000 Census data on race include the number of persons by race alone or in combination with one or more races. Thus, persons who identified themselves by more than one race are "overcounted" in the denominators.

Table 1. Number of Cases and Rates (per 100,000 persons) of Chlamydia, Gonorrhea, Syphilis, and Chancroid Minnesota, 1999 - 2003										
	1999		2000		2001		2002		2003	
Disease	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
Chlamydia	7,459	153	8,147	166	8,369	170	10,118	206	10,714	218
Gonorrhea	2,830	58	3,189	65	2,708	55	3,051	62	3,202	65
All Stages of Syphilis	70	1.4	80	1.6	135	2.7	149	3.0	195	4.0
Primary/Secondary Syphilis	10	0.2	16	0.3	33	0.7	59	1.2	47	1.0
Early Latent Syphilis	9	0.2	18	0.4	16	0.3	23	0.5	45	0.9
Late Latent Syphilis*	50	1.0	44	0.9	81	1.6	65	1.3	103	2.1
Other Syphilis	0	0.0	0	0.0	3	0.1	1	0.02	0	0.00
Congenital Syphilis**	1	1.5	2	3.0	2	3.0	1	1.5	0	0.0
Chancroid	1	0.02	0	0.0	0	0.0	0	0.0	0	0.0

Data exclude federal and private prisoners.

^{**} Congenital syphilis rate is expressed per 100,000 live births.

Table 2. Number of Cases and Rates (per 100,000 persons) of Chlamydia, Gonorrhea, and Primary/Secondary Syphilis by Residence, Age, Gender, and Race/Ethnicity Minnesota, 2003									
	Chlamyo		Gonorr	hea	Primary/Secondary Syphilis				
Group	Cases	Rate	Cases	Rate	Cases	Rate			
Residence									
Minneapolis	2,887	755	1,374	359	21	5.5			
St. Paul	1,776	618	575	200	5	1.7			
Suburban*	3,073	156	789	40	16	0.8			
Greater Minnesota	2,978	131	464	20	5	0.2			
Age									
<10 yrs	11	2	0	0	0	0.0			
10-14 yrs	159	42	55	15	0	0.0			
15-19 yrs	3,469	927	783	209	2	0.5			
20-24 yrs	4,040	1,253	1,035	321	4	1.2			
25-29 yrs	1,656	518	538	168	2	0.6			
30-34 yrs	732	207	326	92	10	2.8			
35-44 yrs	522	63	347	42	22	2.7			
45+ yrs	125	8	118	7	7	0.4			
Gender									
Male	2,848	117	1,418	58	43	1.8			
Female	7,866	317	1,784	72	4	0.2			
Race**/Ethnicity									
White	4,703	105	995	22	34	0.8			
Black	3,025	1490	1,475	727	6	3.0			
American Indian	376	464	84	104	2	2.5			
Asian/PI	462	275	49	29	1	0.6			
Other	259	291	72	81	1	1.1			
Unknown***	1,889		527		3				
Hispanic****	804	561	152	106	2	1.4			
TOTAL	10,714	218	3,202	65	47	1.0			

Data exclude federal and private prisoners.

^{*} Late latent syphilis includes neurosyphilis.

^{*} Suburban is defined as the seven-county metropolitan area (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington counties), excluding the cities of Minneapolis and St. Paul.

^{**} Case counts include persons by race alone. Population counts used to calculate rates include race alone or in combination.

^{***} No comparable population data available to calculate rates.

^{****} Persons of Hispanic origin may be of any race.

	Table 3. No	umber of C			100,000 persons) of Ch dence Minnesota, 200		onorrhea		
1	Chlan	Chlamydia		rrhea	<u> </u>	Chlamydia		Gonorrha	
County	Cases	Rate	Cases	Rate	County	Cases	Rate	Cases	Rate
Aitkin	14	91	1	7	Marshall	7	69	1	10
Anoka	495	166	133	45	Martin	14	64	3	14
Becker	37	123	7	23	Meeker	15	66	3	13
Beltrami	99	250	14	35	Mille Lacs	13	58	2	9
Benton	34	99	5	15	Morrison	21	66	1	3
Big Stone	0	0	0	0	Mower	67	174	12	31
Blue Earth	154	275	41	73	Murray	8	87	0	0
Brown	12	45	2	7	Nicollet	15	50	2	7
Carlton	50	158	10	32	Nobles	26	125	4	19
Carver	43	61	11	16	Norman	1	13	0	0
Cass	37	136	5	18	Olmsted	274	220	67	54
Chippewa	16	122	3	23	Otter Tail	32	56	7	12
Chisago	55	134	3	7	Pennington	29	213	5	37
Clay	52	102	5	10	Pine	16	60	1	4
Clearwater	5	59	0	0	Pipestone	5	51	0	0
Cook	3	58	1	19	Polk	36	115	5	16
Cottonwood	8	66	2	16	Pope	5	44	1	9
Crow Wing	67	122	4	7	Ramsey	2,042	400	642	126
Dakota	621	174	130	37	Red Lake	3	70	0	0
Dodge	24	135	3	17	Redwood	13	77	0	0
Douglas	20	61	0	0	Renville	15	87	1	6
Faribault	11	68	1	6	Rice	73	129	9	16
Fillmore	23	109	1	5	Rock	5	51	0	0
Freeborn	28	86	2	6	Roseau	14	86	1	6
Goodhue	49	111	6	14	St. Louis	453	226	74	37
Grant	2	32	0	0	Scott	114	127	19	21
Hennepin	4,190	375	1,751	157	Sherburne	54	84	7	11
Houston	17	86	2	10	Sibley	11	72	1	7
Hubbard	11	60	0	0	Stearns	294	221	35	26
Isanti	34	109	9	29	Steele	52	154	14	42
Itasca	67	152	8	18	Stevens	8	80	0	0
Jackson	4	35	0	0	Swift	14	117	0	0
Kanabec	10	67	2	13	Todd	17	70	0	0
Kandiyohi	59	143	4	10	Traverse	1	24	0	0
Kittson	1	19	0	0	Wabasha	44	204	5	23
Koochiching	11	77	3	21	Wadena	10	73	0	0
Lac qui Parle	4	50	1	12	Waseca	28	143	4	20
Lake	6	54	2	18	Washington	231	115	52	26
Lake of the Woods	2	44	0	0	Watonwan	16	135	3	25
Le Sueur	23	90	3	12	Wilkin	3	42	0	C
Lincoln	1	16	1	16	Winona	45	90	16	32
Lyon	30	118	5	20	Wright	84	93	8	g
McLeod	36	103	11	32	Yellow Medicine	10	90	2	18
Mahnomen	11	212	3	58					

Data exclude federal and private prisoners.