

Syphilis ,gonorrhoea

Recognition of the disease

- **Syphilis:**

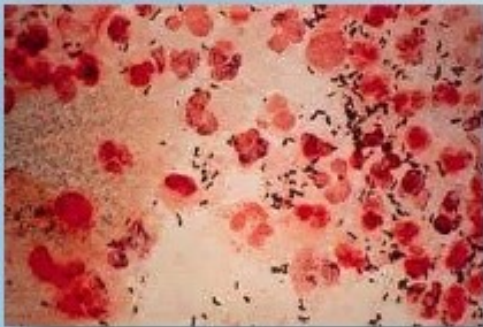
- Syphilis is caused by a type of bacteria. If not treated, syphilis can infect many parts of the body, causing major health problems—even death.
- Most people have no symptoms of syphilis. The first sign of syphilis may be a painless, smooth sore at the site of the infection. Syphilis is easily treated in this early stage. Other symptoms of syphilis are warts and a skin rash.



cont

- **Gonorrhea:**

- Gonorrhea are caused by bacteria. These diseases often occur at the same time.
- Gonorrhea often have no symptoms. When symptoms do occur, they may appear 2–21 days (3 weeks) after contact with an infected person. Symptoms may include:
 - A discharge from a woman's vagina or a man's penis
 - Painful or frequent urination
 - Pain in the pelvis or abdomen



THE DIFFERENT

	SYPHILIS	GONORRHOEA
Agent:	Treponema pallidum	Neisseria gonorrhoea
Immunity:	Resist re-Infection.	Non Resist re-Infection.
Time:	Long period of time until show full effect.	Take 2 – 21 day to show the full effect.
Process:	Have four stages which are primary, secondary, latent and tertiary.	No stage.
Symptoms:	wound at the infection section	Fester pee.
Way to be transmitted:	Vaginal, anal or oral sex, non-sexual contact if the sores (chancres) rashes or mucous patches caused by syphilis come in contact with the broken skin of a non-infected individual.	vaginal, anal or oral sex,

STAGES OF SYPHILIS

Primary syphilis



Secondary syphilis



Latent syphilis



Darkfield (treponema pallidum)



syphilis



Secondary syphilis



Infective Lesions (Impetigo)



D/D

- Eczema
- Pyoderma
- Insect-Bites
- Systemic Diseases

SHEDDING SKIN

Skin starts sloughing



Skin completely gone



GUIDELINE FOR TREATMENT OF SJS & TEN

Admit to intensive care or burn unit

Discontinue culprit medication and all unnecessary medications

Sterile technique in handling patient

Place intravenous or central line in area of uninvolved skin if possible

GUIDELINE FOR TREATMENT OF SJS & TEN

1. Culture skin, blood, urine daily
2. Avoid prophylactic systemic antibiotics and silver sulfadiazine to skin
3. Fluid and electrolyte monitoring and replacement
4. Initiate total parenteral nutrition or nasogastric feedings if unable to take po

GUIDELINE FOR TREATMENT OF SJS &TEN

Remove oral and nasal debris daily; antiseptic mouthwashes or oral sprays daily

Antiseptic eye drops daily and ophthalmology consultation

Anticoagulation to prevent deep vein thrombosis and pulmonary embolism

TREATMENT

Treatment is similar to that of severe burns

All suspicious meds are discontinued immediately.

Systemic antibiotic treatment with corticosteroids, used with extreme caution.

Genital herpes

