



SEXUALLY TRANSMITTED INFECTIONS, HIV/AIDS

SECONDARY SIFILIS: A PHASE WITH MULTIPLE MANIFESTATIONS TO LOOK FOR.

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BACKGROUND: Clinical course of syphilis has been divided into three clinical stages (primary, secondary and tertiary) and two asymptomatic epidemiological periods (early and late latent syphilis). Secondary phase reflects migration of *T. pallidum* from general circulation to tissues and immune response that triggers, leading to a wide range of manifestations that can create diagnostic confusion. Epidemiological data are essential to assess risk for suspicion and an organized physical evaluation seeking to identify entity stigmas allows reducing a probability of diagnostic error. We present a case of secondary syphilis whose sequential physical evaluation allowed to visualize different semiological elements of diagnostic certainty, to initiate treatment immediately to the patient and his contacts; thus stopping the chain of transmission of the infection.

OBSERVATION: Male of 16 years who consulted for plaques with a vegetative appearance in a preputial balano furrow of 1 month evolution; sexarquia at 13, heterosexual with 9 partners / sex life; the diagnosis of Condiloma Acuminata versus Condiloma lata is presented. A sequential cephalocaudal physical examination was performed: Alopecia "in mothballs", Maculo-papular eruption of infiltrative aspect in trunk without plantar affection, mucosal patches on lateral side of the tongue, latero-cervical adenopathy, Perianal opaline patches. Serology is requested and treatment with 2.4 mU Benzathin Penicillin is applied. Two weeks later he brings laboratory results with VDRL 64 dil and disappearance of lesions, only with persistence of alopecia.

KEY MESSAGE: Secondary syphilis, diagnostic certainty

