

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

URGENT: Critical Penicillin G Benzathine (Bicillin®) Shortage Earliest Anticipated Recovery Date - Quarter 2, 2024

June 23, 2023

Dear Colleague:

The <u>Centers for Disease Control and Prevention</u> (CDC) and United States <u>Food and Drug Administration</u> (FDA) are reporting <u>limited supply and impending depletion of stock</u> for select Bicillin® L-A (penicillin G benzathine injectable suspension) and Bicillin® C-R (penicillin G benzathine and penicillin G procaine injectable suspension) Prefilled Syringes. While this is a dynamic situation, and these estimates may change, the earliest <u>anticipated recovery date is Quarter 2 in 2024</u>, according to a June 12, 2023 <u>letter issued by Pfizer</u>.

Treatment Considerations

The Maryland Department of Health (MDH) urges clinicians in Maryland to follow <u>CDC guidance</u> for syphilis treatment during the drug shortage:

- Bicillin L-A is the <u>only</u> acceptable treatment for pregnant people infected with or exposed to syphilis and should be prioritized for them and for infants exposed to syphilis in utero. No proven alternatives to penicillin are available for treating syphilis during pregnancy. Pregnant people who have a history of penicillin allergy should be desensitized and treated with Bicillin L-A®.
- Utilize alternative treatment with doxycycline for <u>non-pregnant</u> individuals.
 - On Doxycycline 100mg PO BID for two weeks (for early syphilis) or for four weeks (for late latent or syphilis of unknown duration) is an alternative for the treatment of non-pregnant people with a penicillin allergy.
 - Other intramuscular formulations of penicillin, such as Bicillin® C-R, are <u>not</u> acceptable alternatives for the treatment of syphilis.
- For neonatal and pediatric treatment, follow the CDC STI Treatment Guidelines, 2021: <u>Congenital Syphilis treatment recommendations</u> (see "Penicillin Shortage").
- Conserve Bicillin L-A® by using alternative drugs to treat other conditions, such as group A strep pharyngitis and for primary rheumatic fever prophylaxis, e.g. penicillin V, amoxicillin, and azithromycin.

Assistance for Clinicians: Syphilis Staging, Historical Treatment Information, Clinical Questions

- Clinicians can call the MDH Center for STI Prevention (MDH CSTIP) with questions regarding syphilis staging and obtaining historical treatment and RPR titers for evaluating response to treatment or re-infection: 410-767-6690.
- For clinical questions related to the treatment of syphilis during the Bicillin® L-A shortage, please contact the <u>STD Clinical Consultation Network</u>, your <u>local health department</u>, or MDH CSTIP: 410-767-6690, or <u>mdh.sticlinicalconsult@maryland.gov</u>.

Reporting Drug Shortages

- To help CDC monitor this situation, please notify stdshortages@cdc.gov of:
 - O Shortages or stock-outs of Bicillin L-A® in the jurisdiction.
 - O Situations in which patients diagnosed with syphilis are not being treated due to the inability to procure Bicillin L-A® in the jurisdiction.
- The CDC will post updates on their <u>website</u> as they become available.

Resources

- CDC STD Treatment <u>Drug Notices</u>
- CDC 2021 STI Treatment Guidelines
- CDC Congenital Syphilis 2021 STI Treatment Guidelines
- STD Clinical Consultation Network
- Provider Morbidity Report form for Syphilis, other STIs, Hepatitis, and HIV

Thank you for your attention to this important public health issue.

Sincerely,

Nilesh Kalyanaraman, MD, FACP

Deputy Secretary, Public Health Service

cc: Elizabeth Edsall Kromm, PhD, MSc, Director, Prevention and Health Promotion Administration Courtney McFadden, MPH, Deputy Director, Prevention and Health Promotion Administration David Blythe, MD, MPH, Director, Infectious Disease Epidemiology and Outbreak Response Bureau Peter DeMartino, PhD, Director, Infectious Disease Prevention and Health Services Bureau Carrie Durham, JD, Chief of Staff, Prevention and Health Promotion Administration