

CDPH Health Advisory Bicillin® L-A (Benzathine Penicillin G) Shortage June 2, 2023

The California Department of Public Health (CDPH) has issued a health advisory today regarding a national shortage of long-acting penicillin G benzathine injectable suspension products (Bicillin® L-A). Benzathine penicillin G is the recommended, first-line treatment for syphilis, and the only recommended treatment for pregnant people and infants with syphilis. This is of considerable concern as California, including LA County, continues to see significant increases in syphilis, including syphilis in pregnant persons and congenital syphilis in infants.

CDPH recommends prioritizing Bicillin® L-A for pregnant people with syphilis infection or exposure, infants with congenital syphilis infection or exposure, and patients with contraindications to doxycycline. Guidelines for prioritization and conservation of shortage drugs is included in the CDPH advisory. Health care providers can monitor the Bicillin® L-A drug shortages on the FDA Drug Shortages webpage.

In LA County, for further information or consultation assistance, please contact the LAC DPH Sexually Transmitted Diseases Provider Consultation line at 213-368-7441 Monday through Friday from 8 am-5pm.

Read the CDPH communication below or online.

To view this and other communications or to sign-up to receive LAHANs, please visit <u>ph.lacounty.gov/lahan</u>.



State of California—Health and Human Services Agency California Department of Public Health



Health Advisory

To: Healthcare Providers Subject: Bicillin[®] L-A (Benzathine Penicillin G) Shortage 6/1/2023

Key Messages:

- Long-acting penicillin G benzathine injectable suspension products (Bicillin[®] L-A), the first-line treatment for syphilis and the only recommended treatment for pregnant people and infants with syphilis, is short in supply according to the CDC and the FDA.
- Health care providers may use acceptable alternatives such as Doxycycline 100 mg in specific doses. Other intramuscular formulations of penicillin, such as Bicillin[®] C-R, are not acceptable alternatives for the treatment of syphilis.
- Health care providers should follow CDPH guidelines for priotization and conservation of shortage drugs.

The <u>Centers for Disease Control and Prevention</u> (CDC) and the <u>U.S. Food and Drug</u>

Administration (FDA) have announced and listed **long-acting penicillin G benzathine injectable suspension products (Bicillin® L-A)** on their respective drug shortage webpages, <u>estimating a recovery</u> <u>timeframe in Q4 2023</u>. This is of considerable concern to California as the state continues to see significant increases in syphilis, including syphilis in pregnant persons and congenital syphilis in infants.

Benzathine penicillin G is the recommended, first-line treatment for syphilis, and the <u>only</u> recommended treatment for pregnant people. Prompt and timely treatment of syphilis in pregnancy is nearly 100% effective at preventing <u>devastating outcomes of congenital syphilis</u>, including the fact that up to 40% of infants born to pregnant people with untreated syphilis will be stillborn or suffer early infant death, or face long-term morbidity including blindness, deafness, and bone damage.

Among non-pregnant adults:

- Doxycycline 100 mg PO BID x 14 days is an acceptable alternative for those with primary, secondary, or early latent syphilis.
- Doxycycline 100 mg PO BID x 28 days is an acceptable alternative for those with late latent syphilis or syphilis of unknown duration.

Use of other intramuscular formulations of penicillin, including Bicillin[®] C-R, are <u>not</u> acceptable alternatives for the treatment of syphilis.

Given the current Bicillin[®] L-A drug shortage, the California Department of Public Health (CDPH) STD Control Branch (STDCB) recommends the following:

- 1. Prioritize Bicillin[®] L-A for pregnant people with syphilis infection (or exposure) as well as for infants exposure to syphilis in utero.
- 2. **Prioritize Bicillin[®] L-A for patients with contraindications to doxycycline** (e.g., anaphylaxis, hemolytic anemia, Stevens Johnson syndrome).
- 3. **Conserve Bicillin® L-A by using alternative drugs** for the treatment of infectious diseases (e.g., streptococcal pharyngitis) where oral medications or other effective antimicrobials are available.
- 4. **Contact your local health department** if you are experiencing a Bicillin[®] L-A shortage and/or having trouble obtaining the medication.

Follow-up clinical and serologic evaluation should be performed after treatment at the recommended intervals per the <u>2021 CDC STI Treatment Guidelines</u>.

Health care providers can monitor the Bicillin[®] L-A drug shortages on the <u>FDA Drug Shortages</u> <u>webpage</u>. 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 CDPH STDCB at (510) 620-3400 by phone or <u>stdcb@cdph.ca.gov</u> by email.

Sincerely,

Original Signed by Dr. Kathleen Jacobson

Kathleen Jacobson, MD

Chief, STD Control Branch

California Department of Public Health

Resources:

- FDA <u>Bicillin[®] L-A shortage webpage</u>
- CDC <u>Drug Notices webpage</u>
- CDC Syphilis STI Treatment Guidelines, 2021
- CDC Congenital Syphilis STI Treatment Guidelines, 2021
- CDC <u>Syphilis | Effects and Burden | Pregnancy</u>

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