

STI Annual Diagnoses and Trends in Michigan, 2024

Data as of July 15, 2025

[HIV & STIs in Michigan](#)

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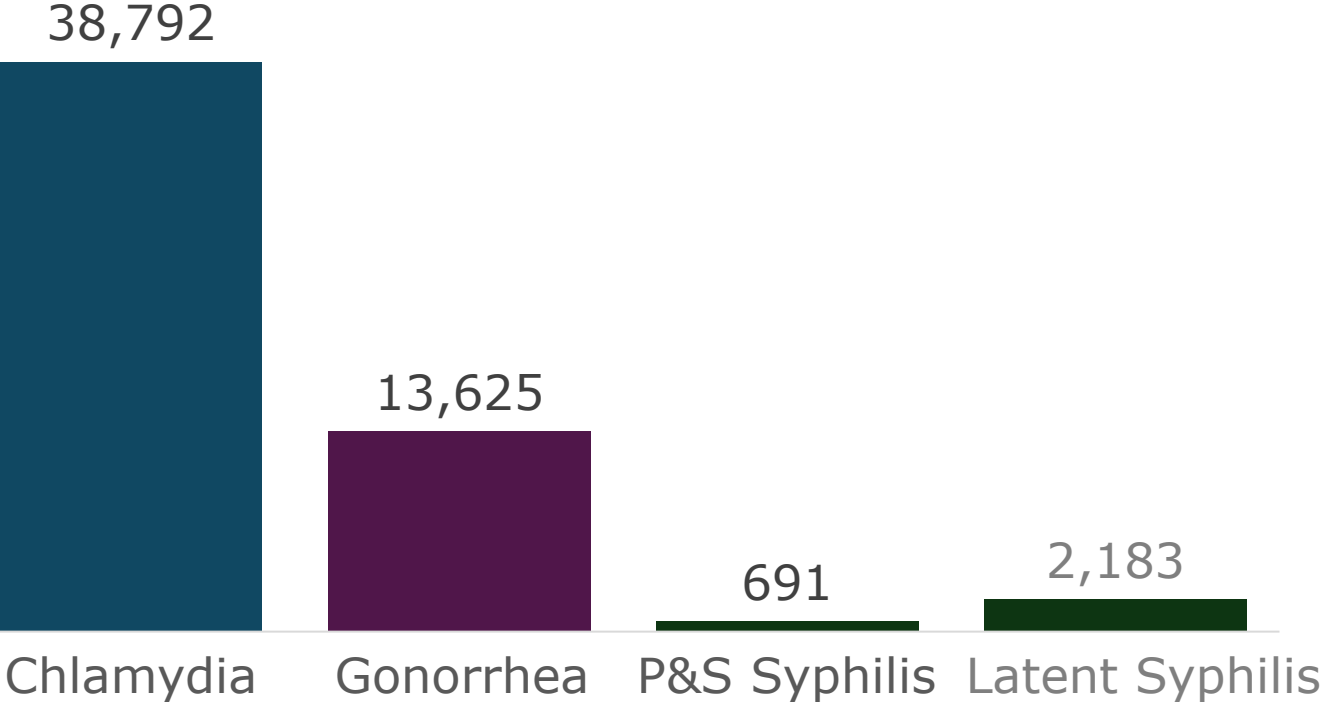
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Total Number and Rates of Reported STI Diagnoses, 2024



	Count (N) ¹	Rate ²
Chlamydia	38,792	382.5
Gonorrhea	13,625	134.4
P&S Syphilis	691	6.8
Latent Syphilis	2,183	21.5

Includes probable and confirmed cases reported in the Michigan Disease Surveillance System (MDSS).

Case dates are pulled from onset date when available, then diagnosis date, then referral date to MDHHS if other dates are blank.

Primary and secondary (P&S), or the earliest stages of syphilis infection, are used to reflect incident rather than prevalent infection. During primary syphilis, symptoms appear where syphilis entered the body and last 3-6 weeks. During secondary syphilis, symptoms typically manifest with body rash and last 2-10 weeks. We will focus primarily on these stages throughout the remainder of the slides.

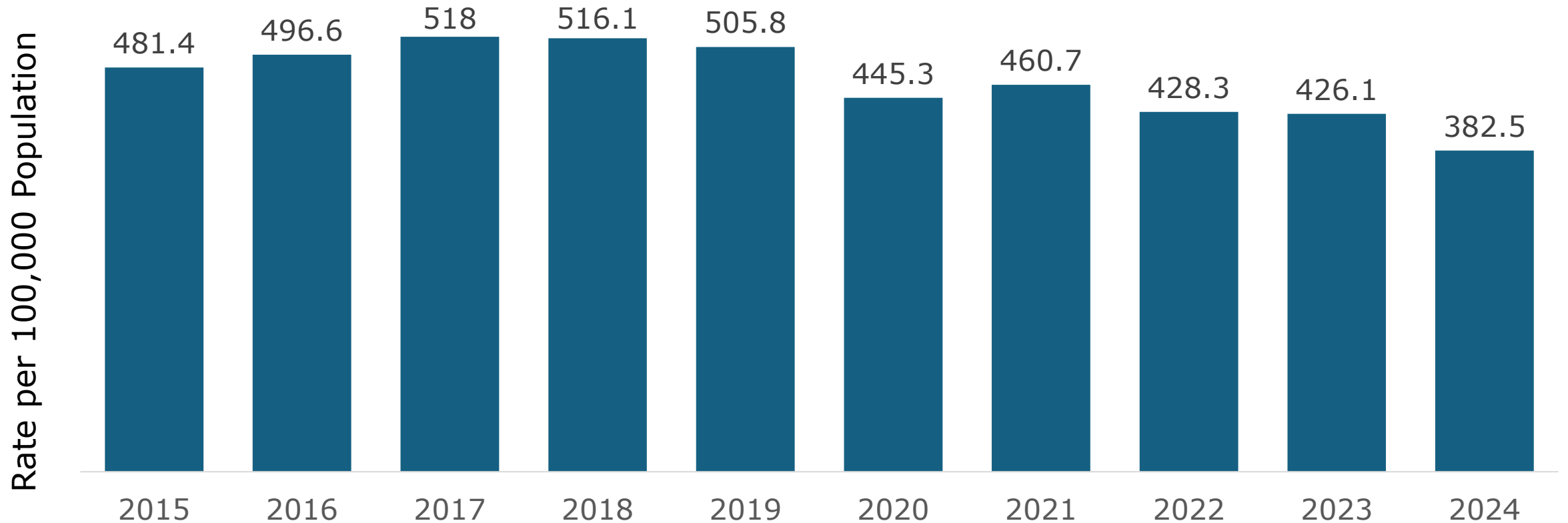
1 - Counts (N) of diagnoses during 2024
 2 - Rate of reported infection per 100,000 population during 2024

Chlamydia

Chlamydia – Trends

Since 2015, chlamydia rates have decreased **2.8 percent** annually, on average.

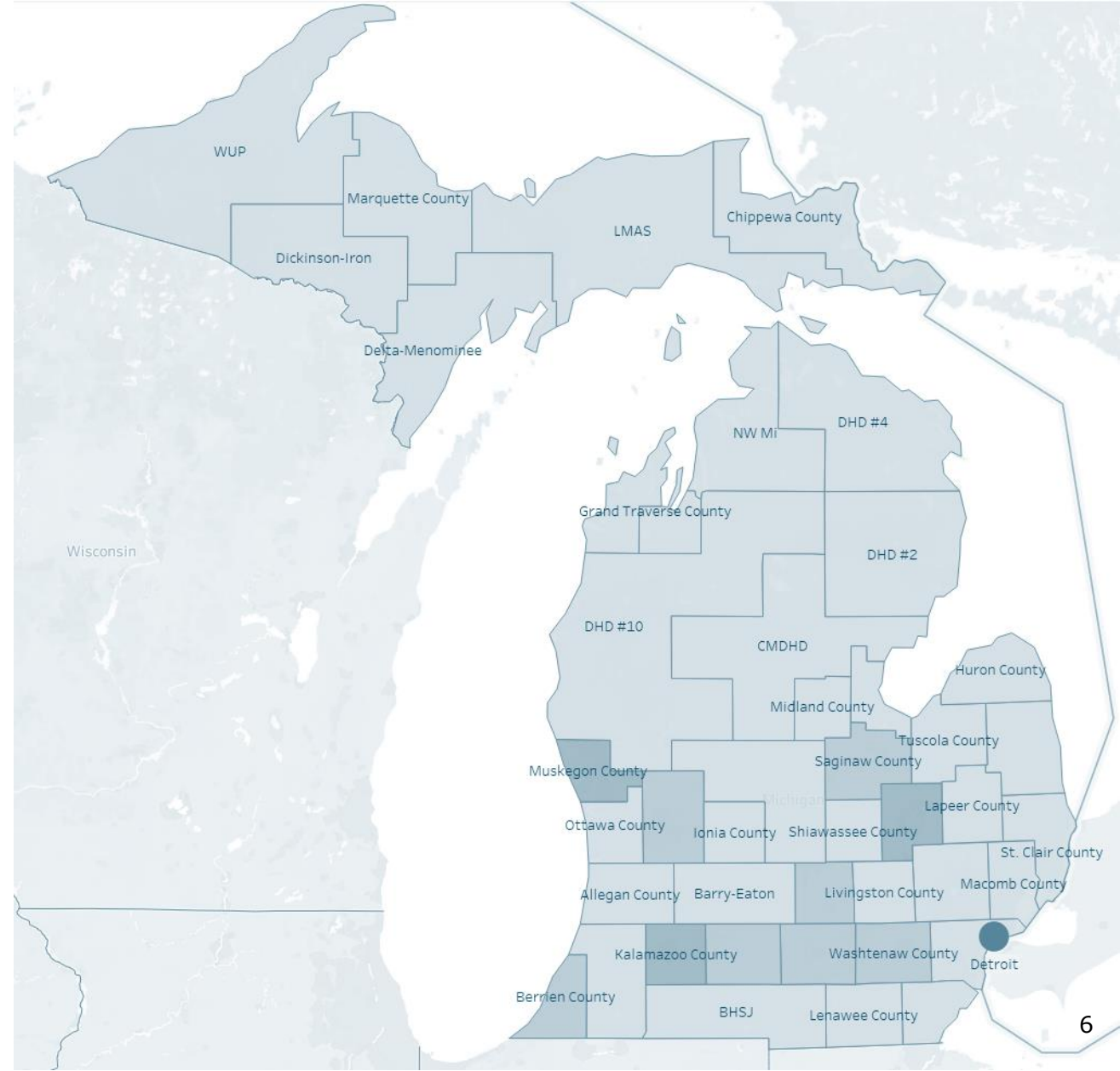
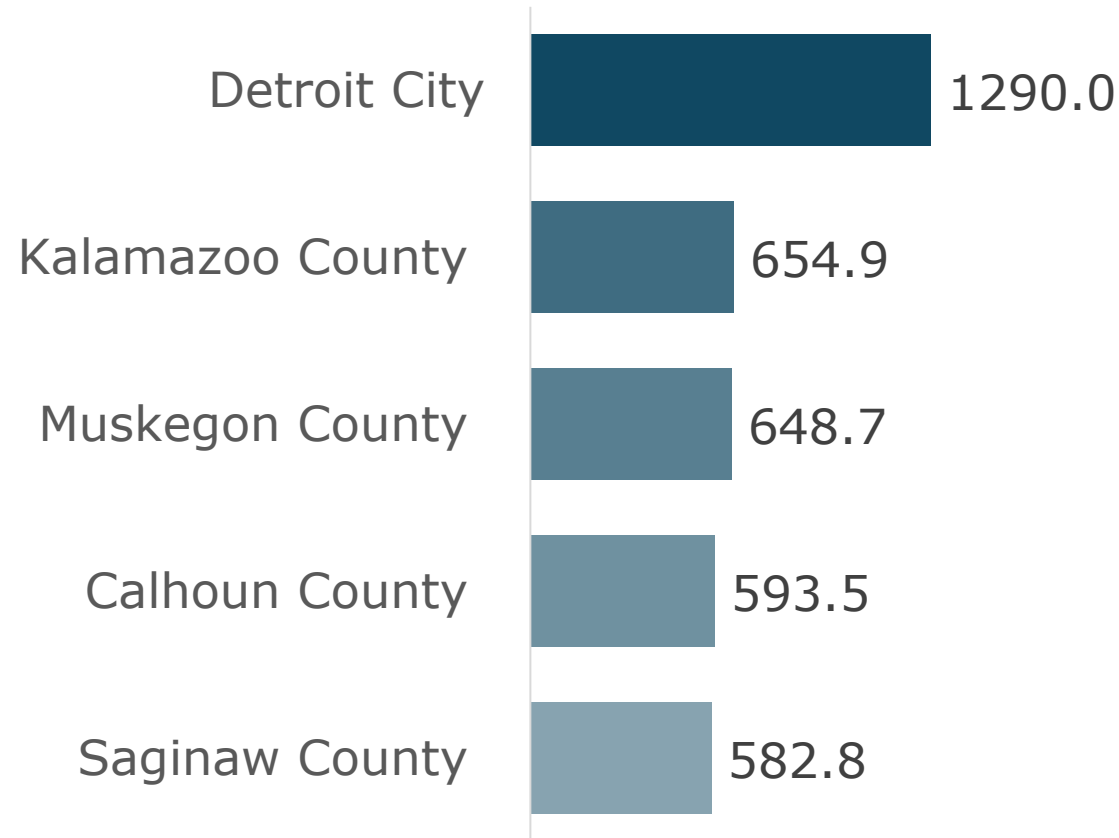
From 2015 to 2017, chlamydia cases increased **8 percent**, but decreased by **26 percent** from 2017 to 2024, with a slight increase observed in 2021.



[See full trend report here.](#)

Chlamydia – Geographic Distribution, 2024

Five local health jurisdictions with the highest case rates per 100,000.

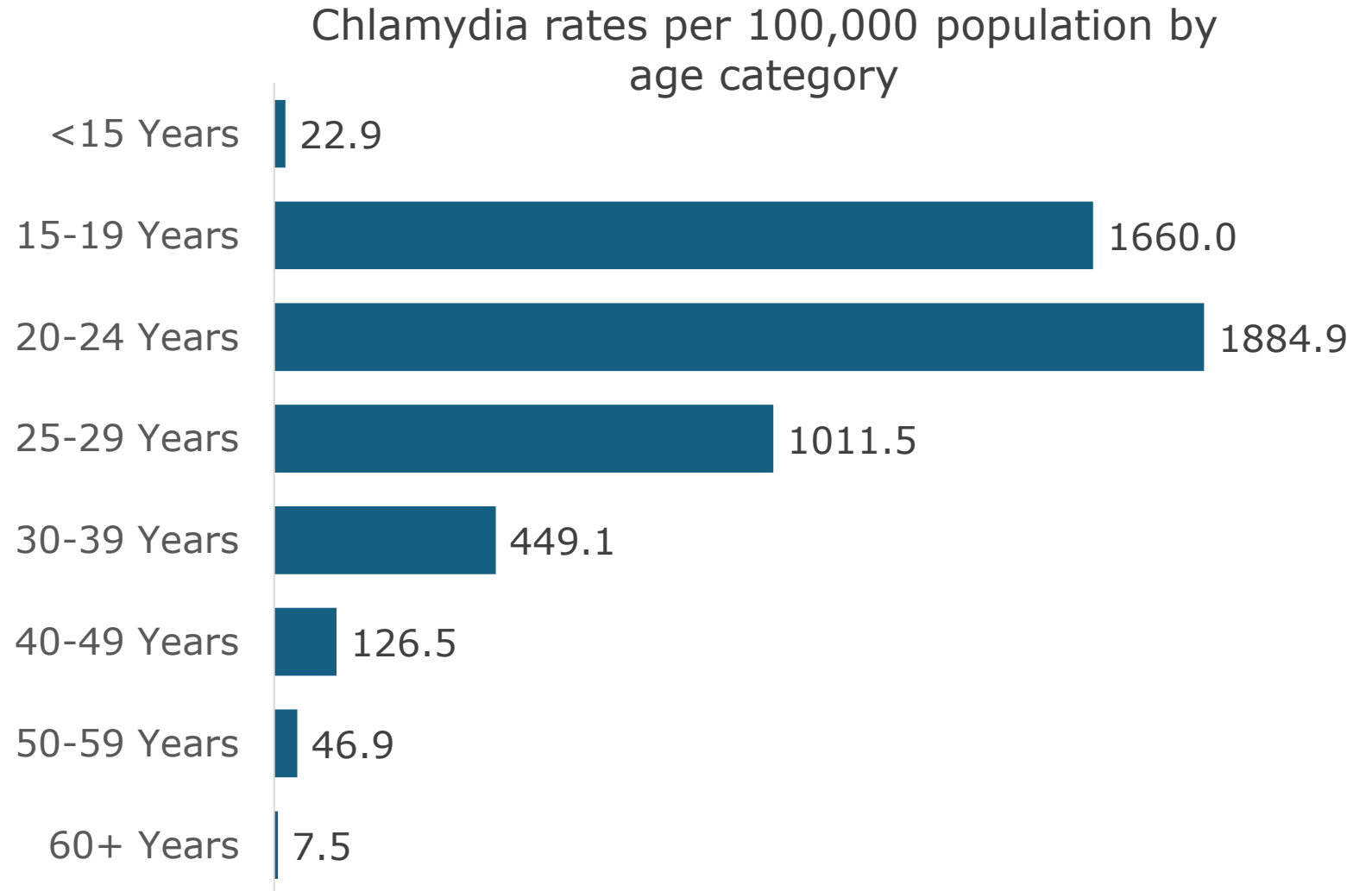


Chlamydia – Priority Populations, 2024

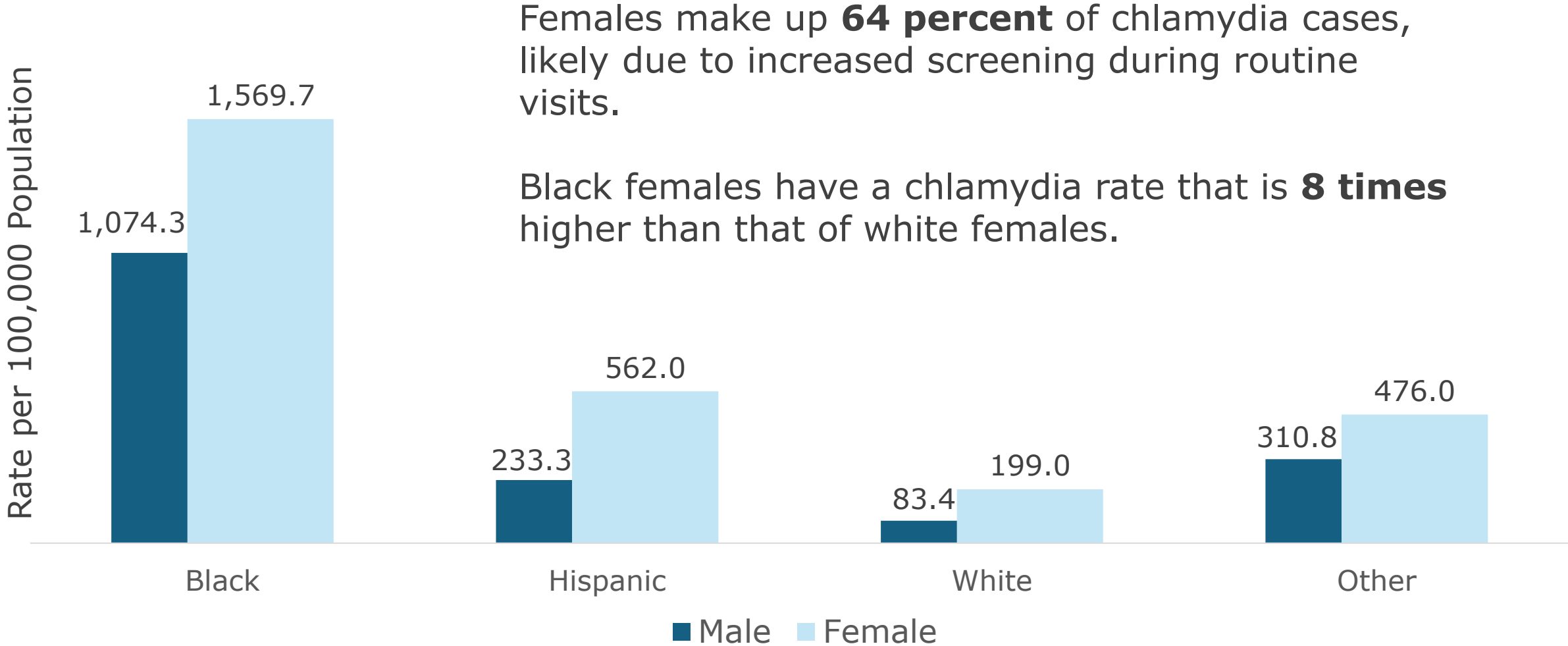
62 percent of chlamydia cases were diagnosed among patients less than 25 years old.

People aged <25 years have a rate of chlamydia that is more than **2 times** that of people aged ≥ 25 years.

Over **10 percent** of cases among people aged <25 years are re-infections.



Chlamydia – Priority Populations, 2024



Females make up **64 percent** of chlamydia cases, likely due to increased screening during routine visits.

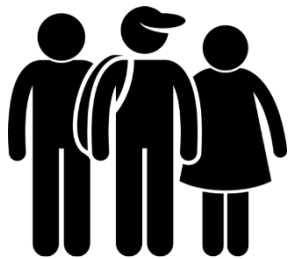
Black females have a chlamydia rate that is **8 times** higher than that of white females.

*Am Indian/AN, Asian/NH/PI, Multi/Other included in 'Other' category

Chlamydia/Gonorrhea Co-infections, 2024

In 2024, **9 percent** of all chlamydia patients were co-diagnosed with gonorrhea; **27 percent** of all gonorrhea patients were co-diagnosed with chlamydia.

People most likely to be co-diagnosed with gonorrhea and chlamydia include:



15–19-Year-Olds
(33% of all co-infections).



20–24-Year-Olds
(28% of all co-infections).

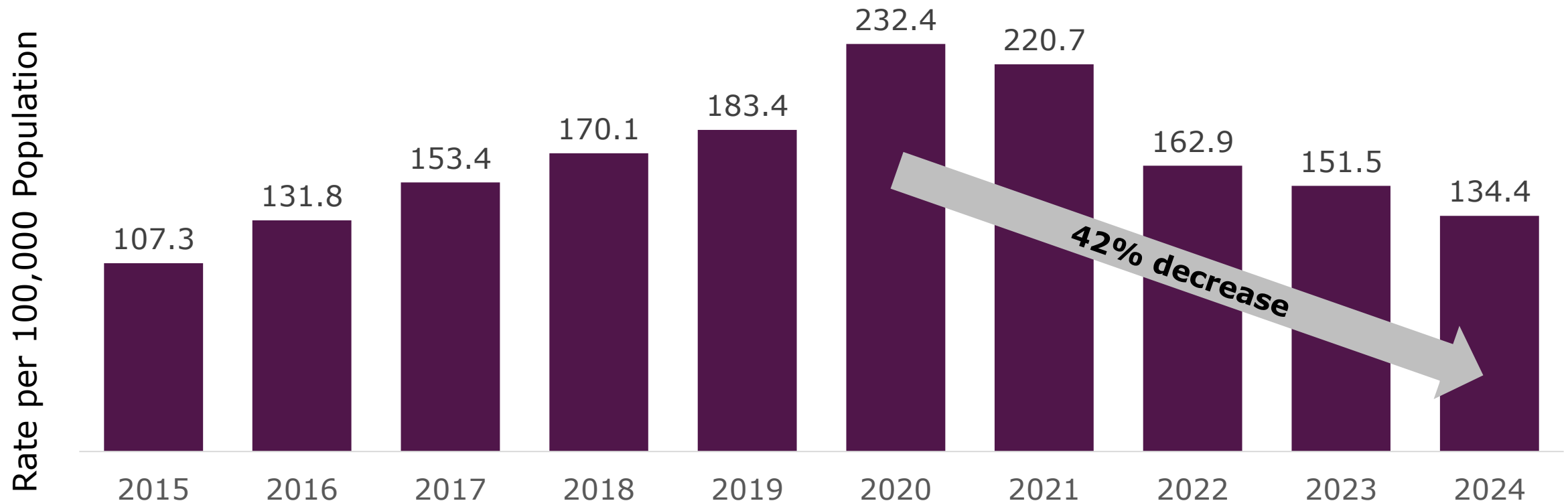


Black Men and Women
(35% and 32% of all
co-infections,
respectively).

Gonorrhoea

Gonorrhea – Trends

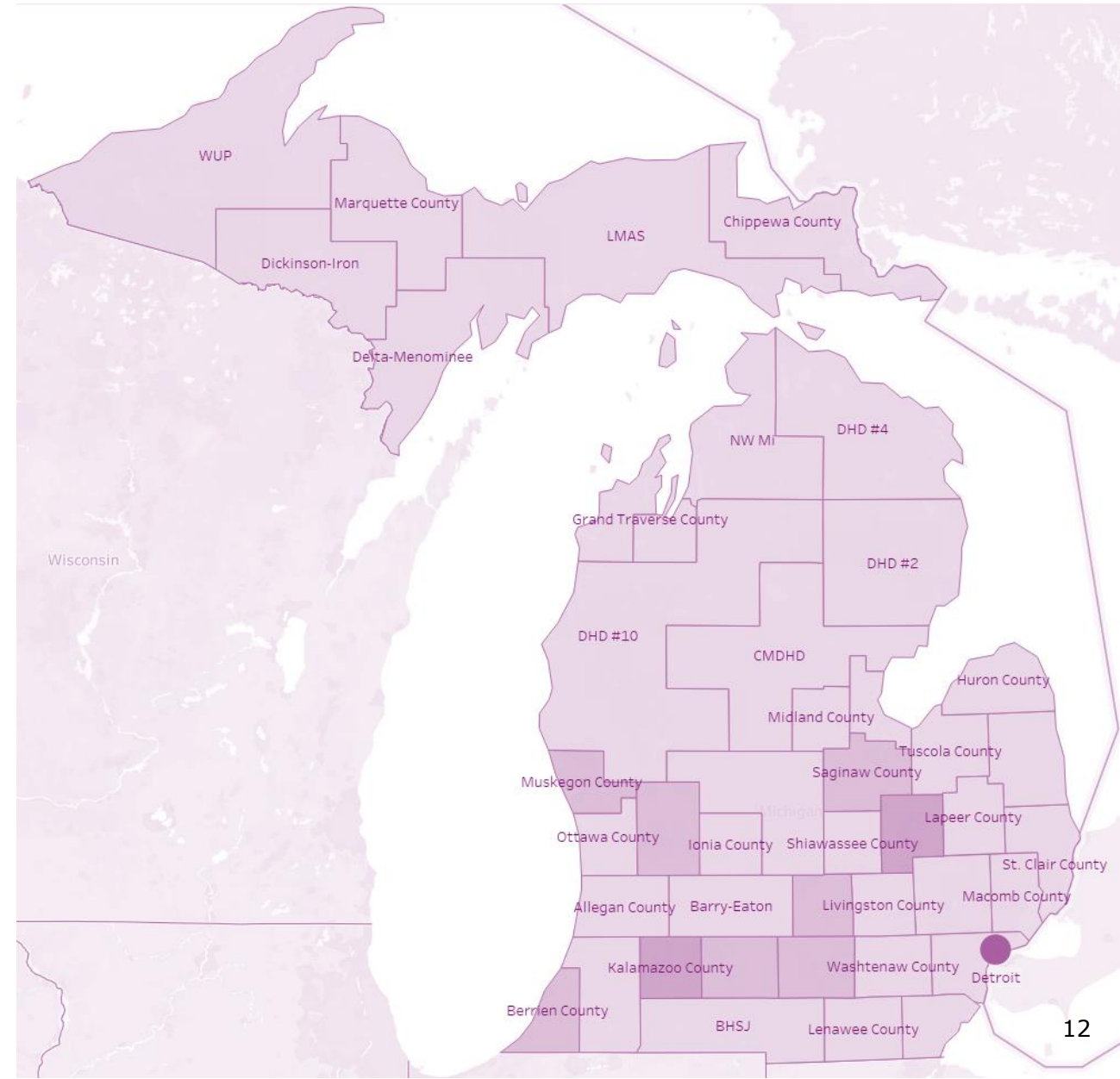
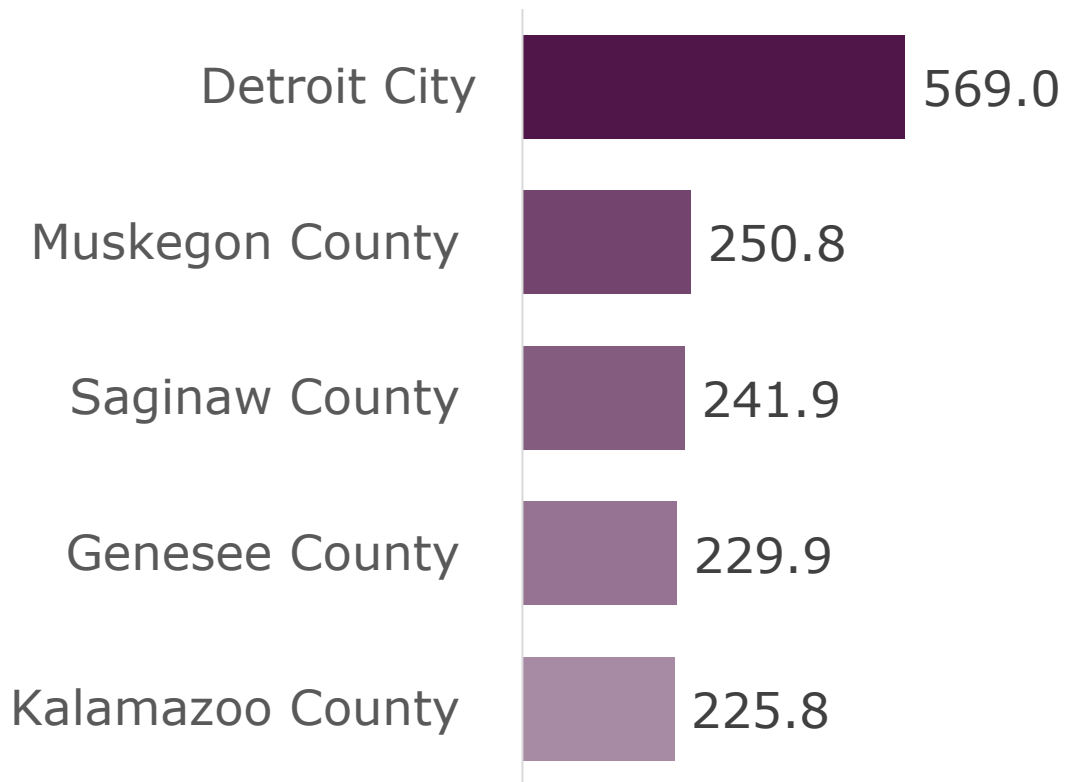
From 2015 to 2020, gonorrhea rates increased by **117 percent** in Michigan, followed by a **42 percent** decrease from 2020 to 2024.



[See full trend report here.](#)

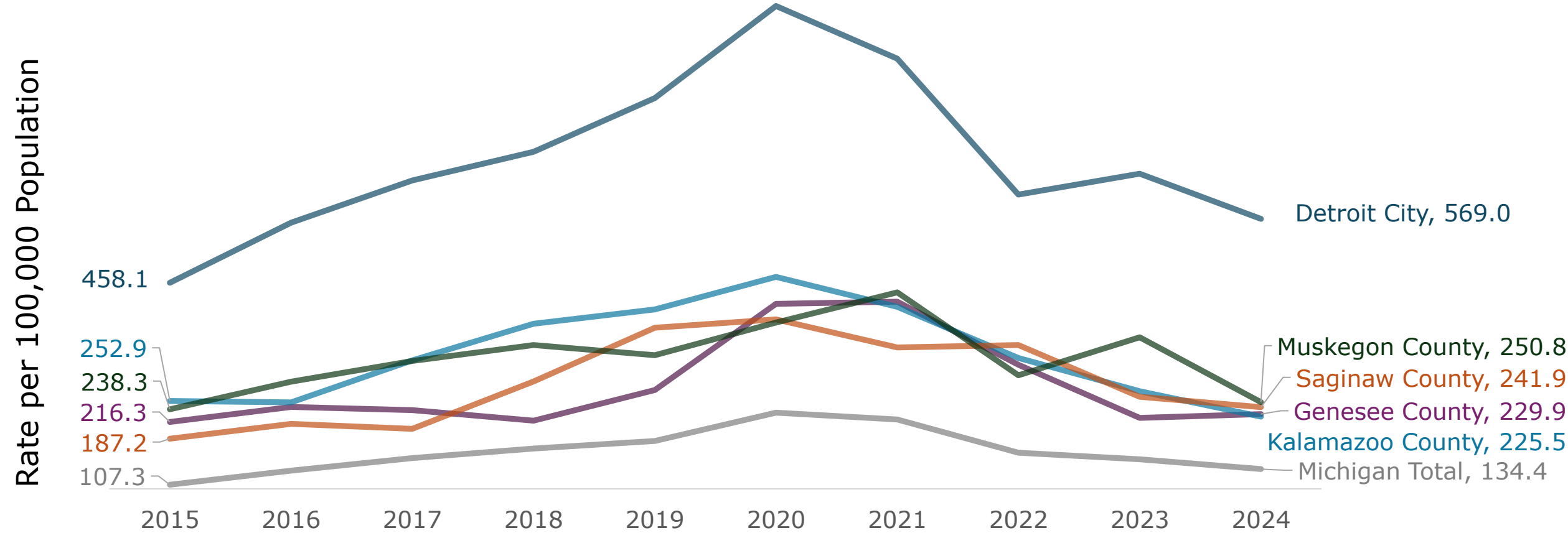
Gonorrhea – Geographic Distribution, 2024

Five local health jurisdictions with the highest case rates, per 100,000.



Gonorrhea Trends Among High Morbidity Jurisdictions

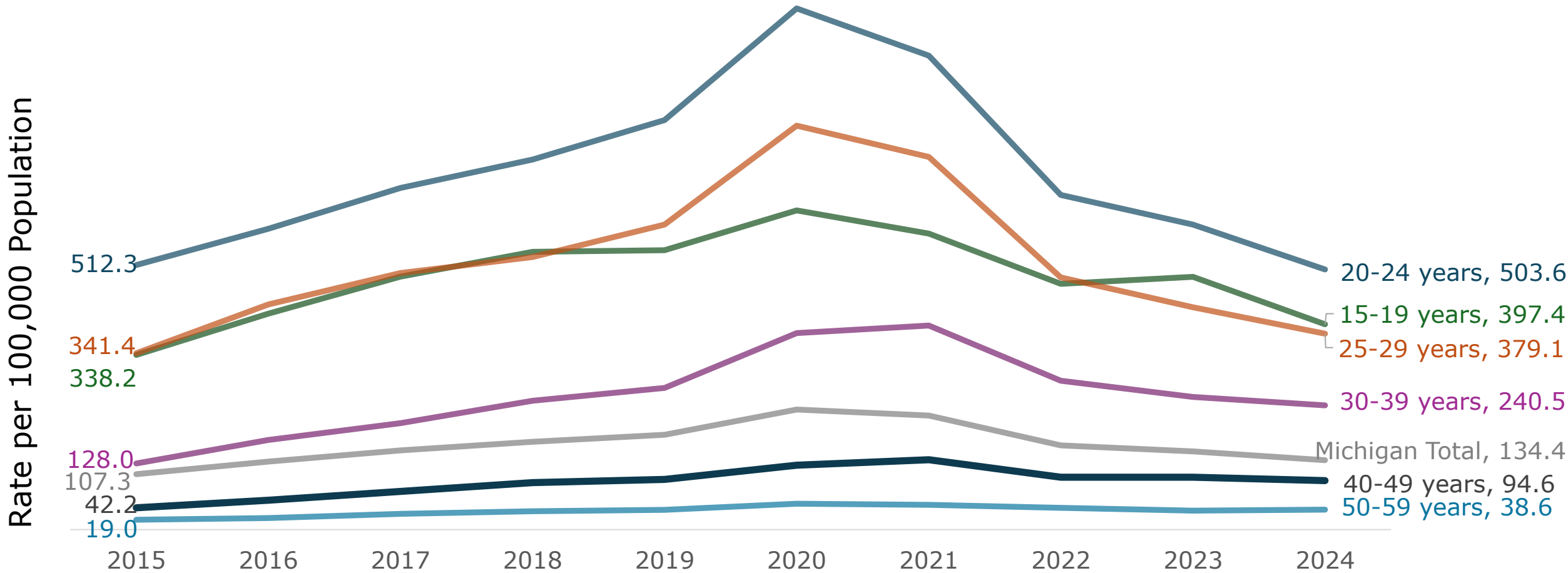
The five jurisdictions with the highest gonorrhea rates in 2024 have had similar trends of increases from 2015 to 2020, then drops in case rates since then.



*2015 and 2024 rates displayed in graph.

Gonorrhea Trends by Age

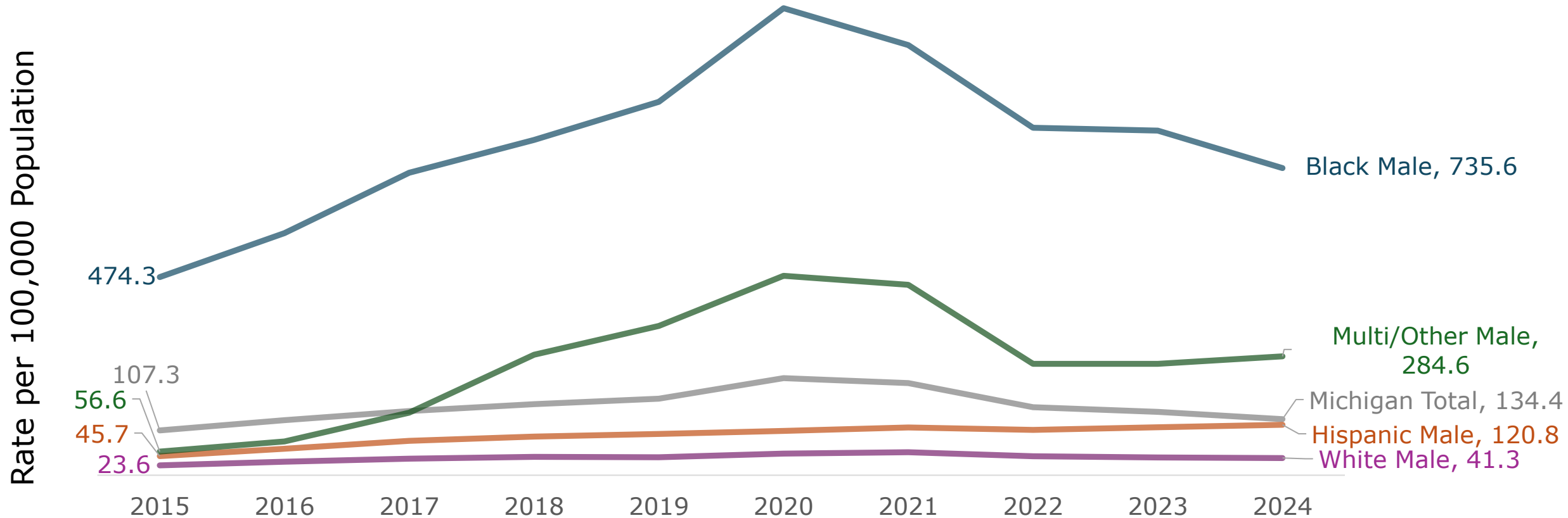
Similar gonorrhea trends have been noted across age groups, and 20–24-year-olds have experienced the highest rates of gonorrhea throughout all of 2015 to 2024.



*2015 and 2024 rates displayed in graph.

Gonorrhea Trends Among Men

There were increases in gonorrhea rates from 2015 to 2020 among all men (117%), Black males (136%), multiracial males (737%), Hispanic males (130%) and White males (117%); these rates decreased for most groups through 2024 (total, -42%; Black, -34%; multi/other, -40%; White, -21%) or were relatively unchanged (Hispanic, 14%).

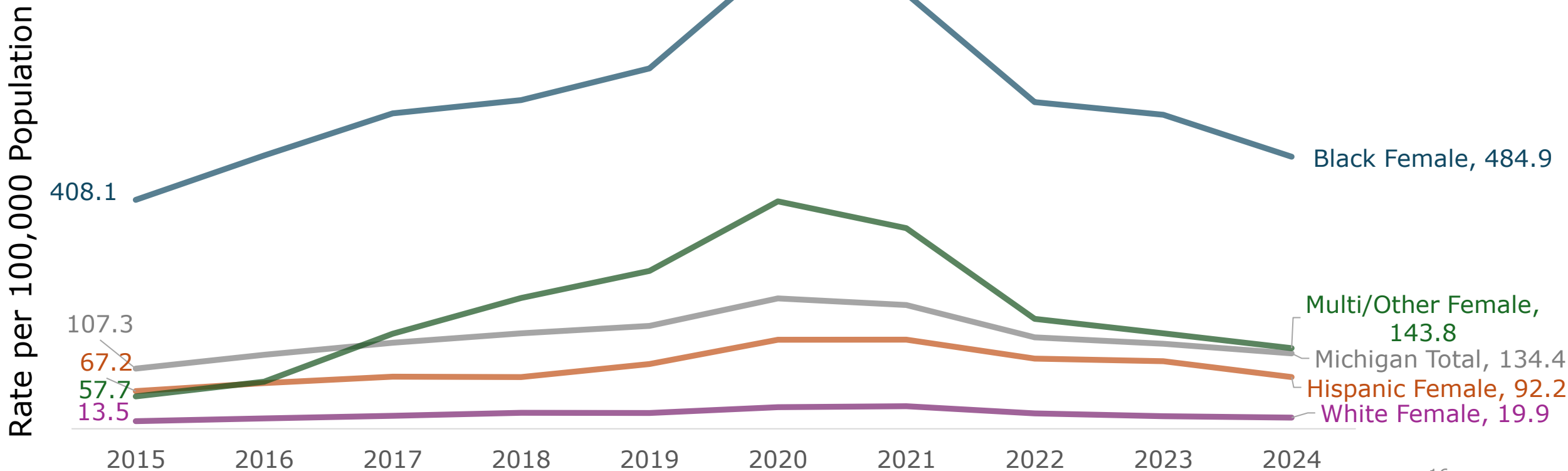


*2015 and 2024 rates displayed in graph.

Gonorrhea Trends Among Women

Among women, similar trends have been noted across racial/ethnic groups.

Increases are steep for nearly all racial and ethnic groups among women between 2015 and 2020, with large disparities across select racial identities. From 2020 to 2024, gonorrhea rates decreased across all racial/ethnic groups, with a 42% decrease among Black females and a 64% decrease among Multi/Other females.



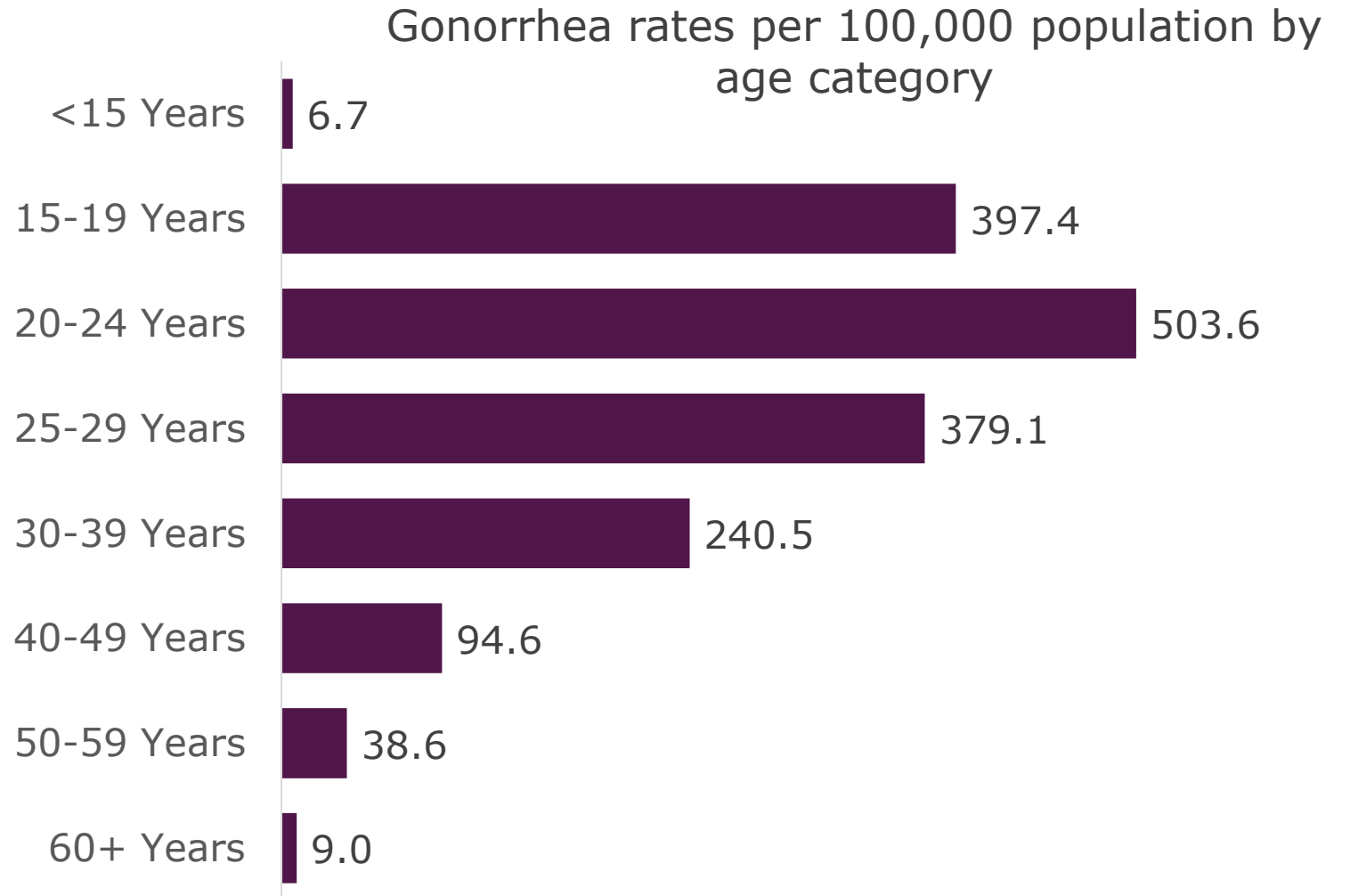
*2015 and 2024 rates displayed in graph.

Gonorrhea – Priority Populations, 2024

45 percent of gonorrhea cases were diagnosed among patients less than 25 years old.

20–24-year-olds have the highest gonorrhea diagnosis rate of all age groups, alone making up 25 percent of all cases.

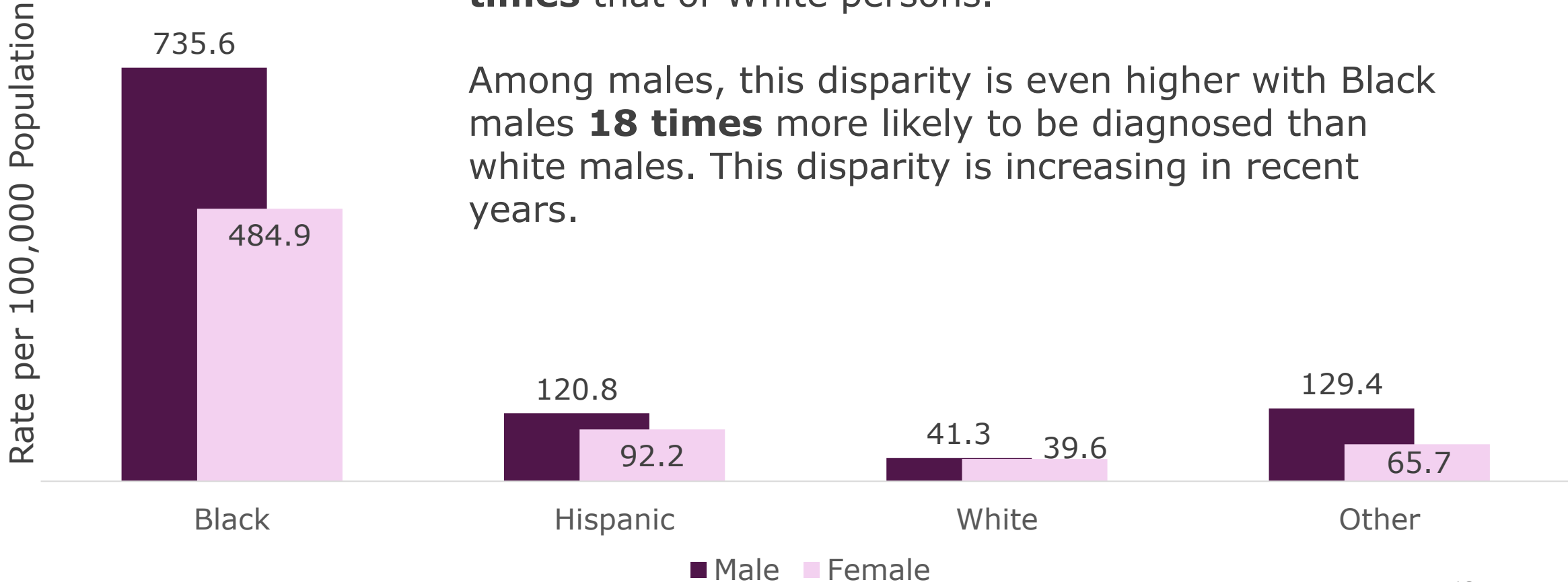
9 percent of cases among 15–19-year-olds are re-infections, and **47 percent** are co-infected with chlamydia.



Gonorrhea – Priority Populations, 2024

Black persons have a rate of gonorrhea that is **15 times** that of White persons.

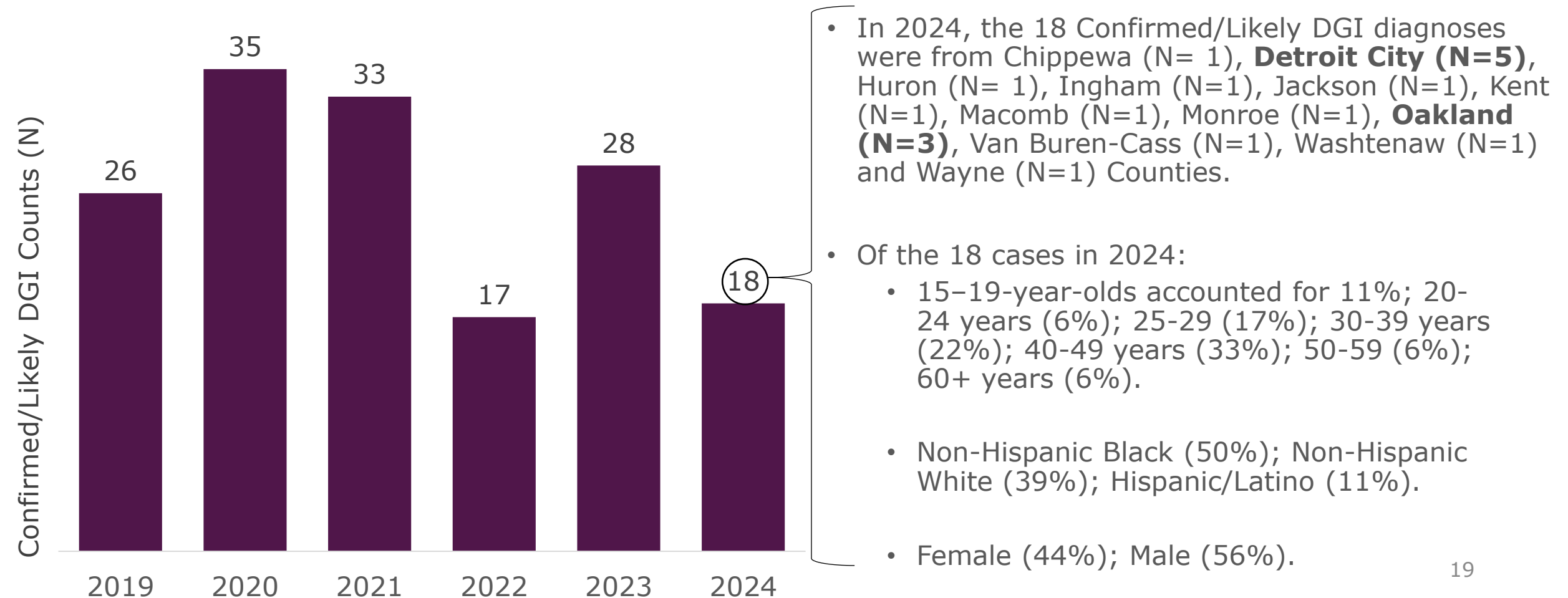
Among males, this disparity is even higher with Black males **18 times** more likely to be diagnosed than white males. This disparity is increasing in recent years.



*Am Indian/AN, Asian/NH/PI, Multi/Other included in 'Other' category

Disseminated Gonococcal Infection (DGI)

If gonorrhea goes untreated, the bacteria that causes the infection can cause disseminated gonococcal infection or DGI, which occurs when the bacteria invade the bloodstream and spread to distant sites in the body ([CDC - Gonococcal Infections](#)).

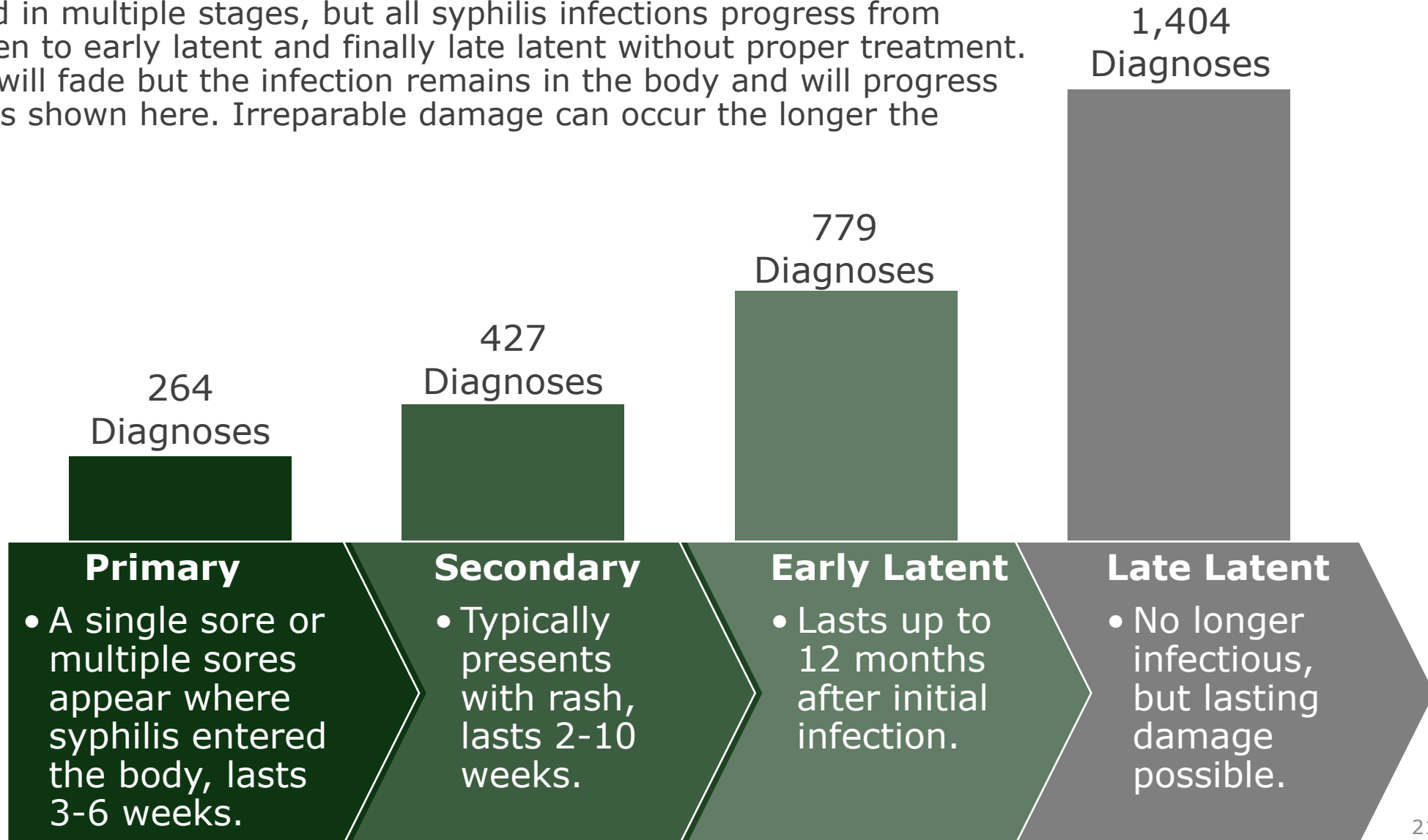


Syphilis

Syphilis – Stages of Infection, 2024

Syphilis can be diagnosed in multiple stages, but all syphilis infections progress from primary to secondary, then to early latent and finally late latent without proper treatment. Early syphilis symptoms will fade but the infection remains in the body and will progress through successive stages shown here. Irreparable damage can occur the longer the infection goes untreated.

Most people with untreated syphilis do not develop tertiary syphilis. However, when it does happen, it can affect many different organ systems, including the heart and blood vessels, and the brain and nervous system. In tertiary syphilis, the disease damages your internal organs and can result in death.



Syphilis Manifestations

Without treatment, syphilis can spread to the brain, eyes, ears, and other nervous system tissues. This can happen during any stage of syphilis.

Of syphilis cases in 2024, **3.8 percent** had an adverse manifestation reported.

Neurosyphilis



- **2%** of 2024 syphilis cases
- Severe headache
- Muscle weakness
- Changes to mental state

Ocular Syphilis



- **3%** of 2023 syphilis cases
- Eye pain or redness
- Changes in vision of blindness

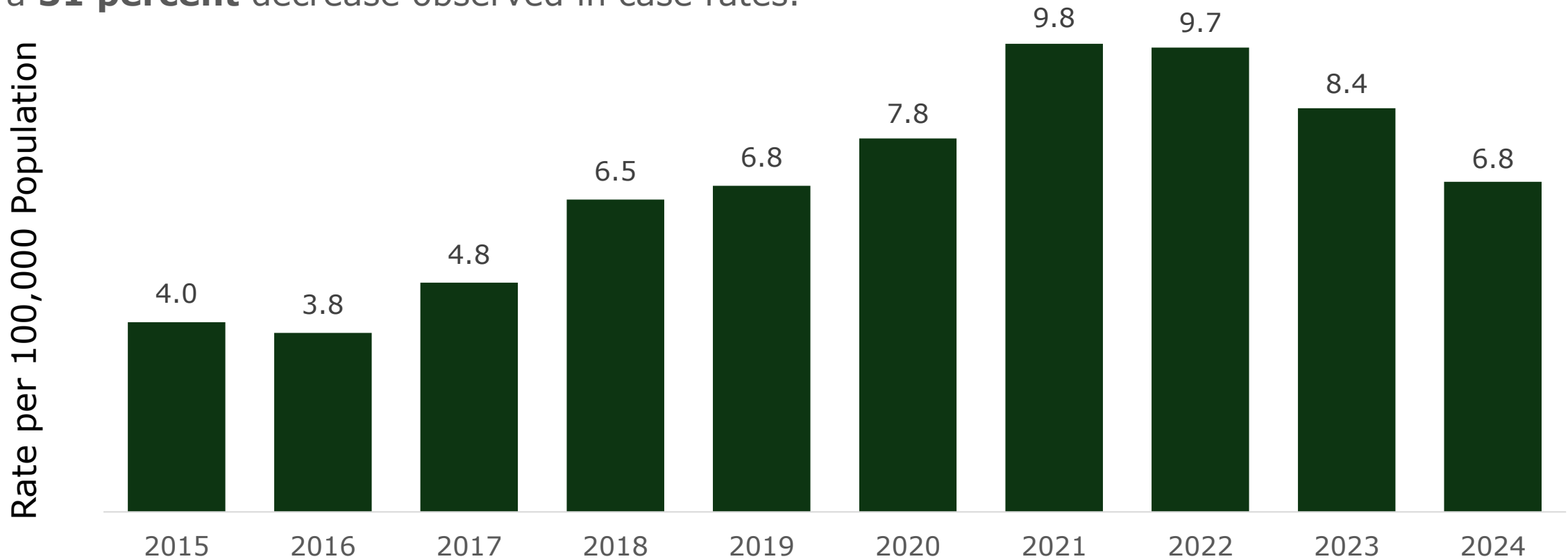
Otosyphilis



- **0.7%** of 2024 syphilis cases
- Hearing loss
- Ringing, buzzing in ear; tinnitus
- Dizziness or vertigo

P&S Syphilis – Trends

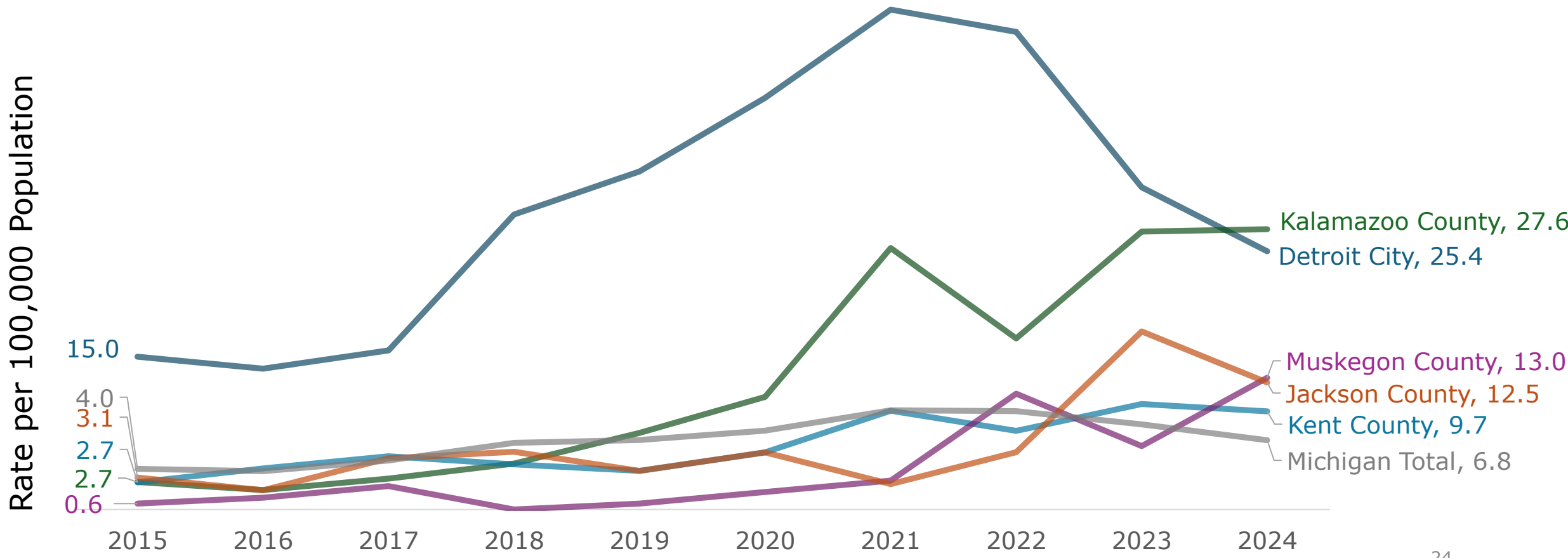
Since 2015, P&S syphilis rates have increased **10 percent** annually, on average; however, from 2020 to 2021, syphilis case rates increased **26 percent**, but from 2021 to 2024 there was a **31 percent** decrease observed in case rates.



[See full trend report here.](#)

P&S Syphilis Trends Among High Morbidity Jurisdictions

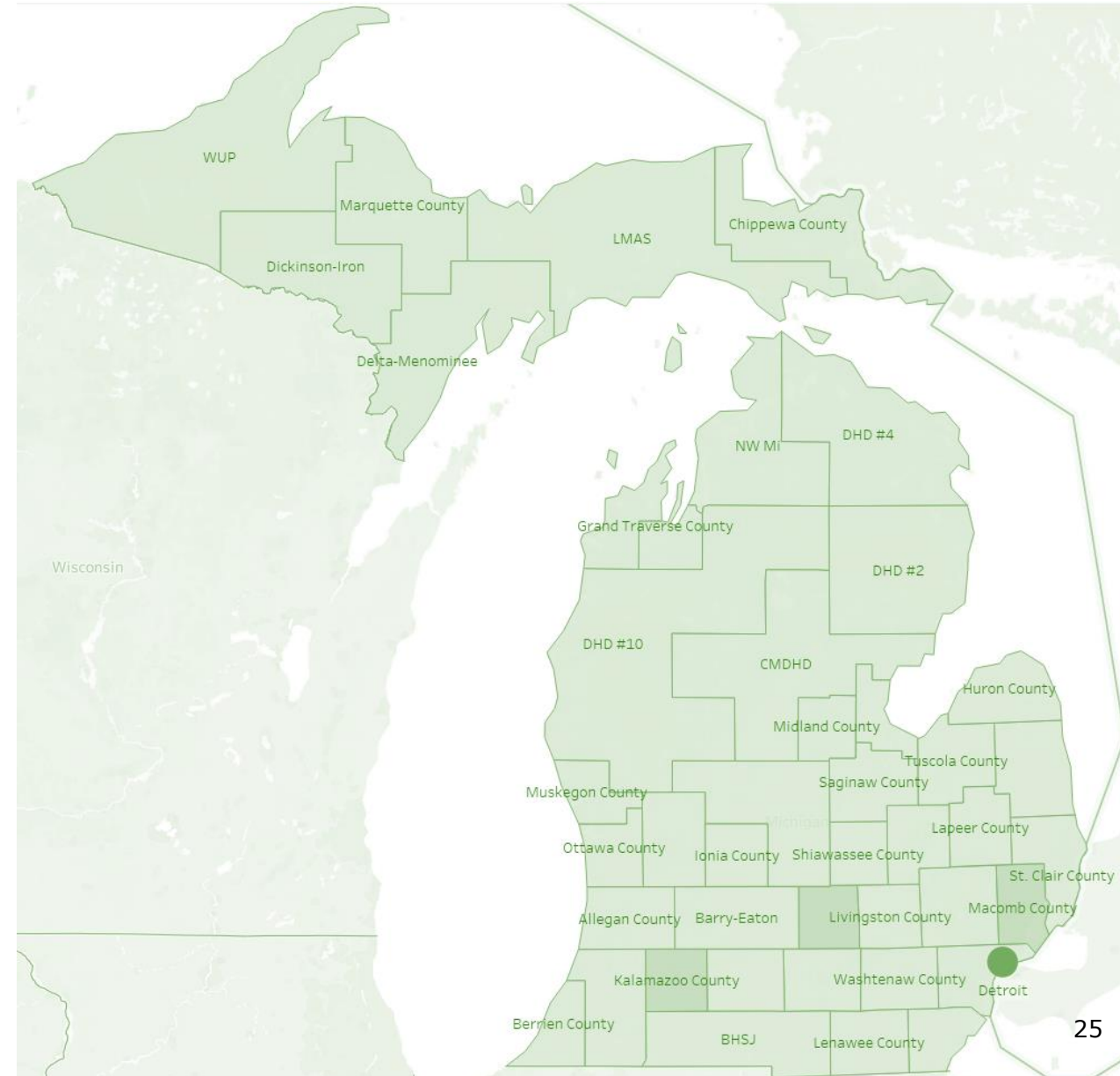
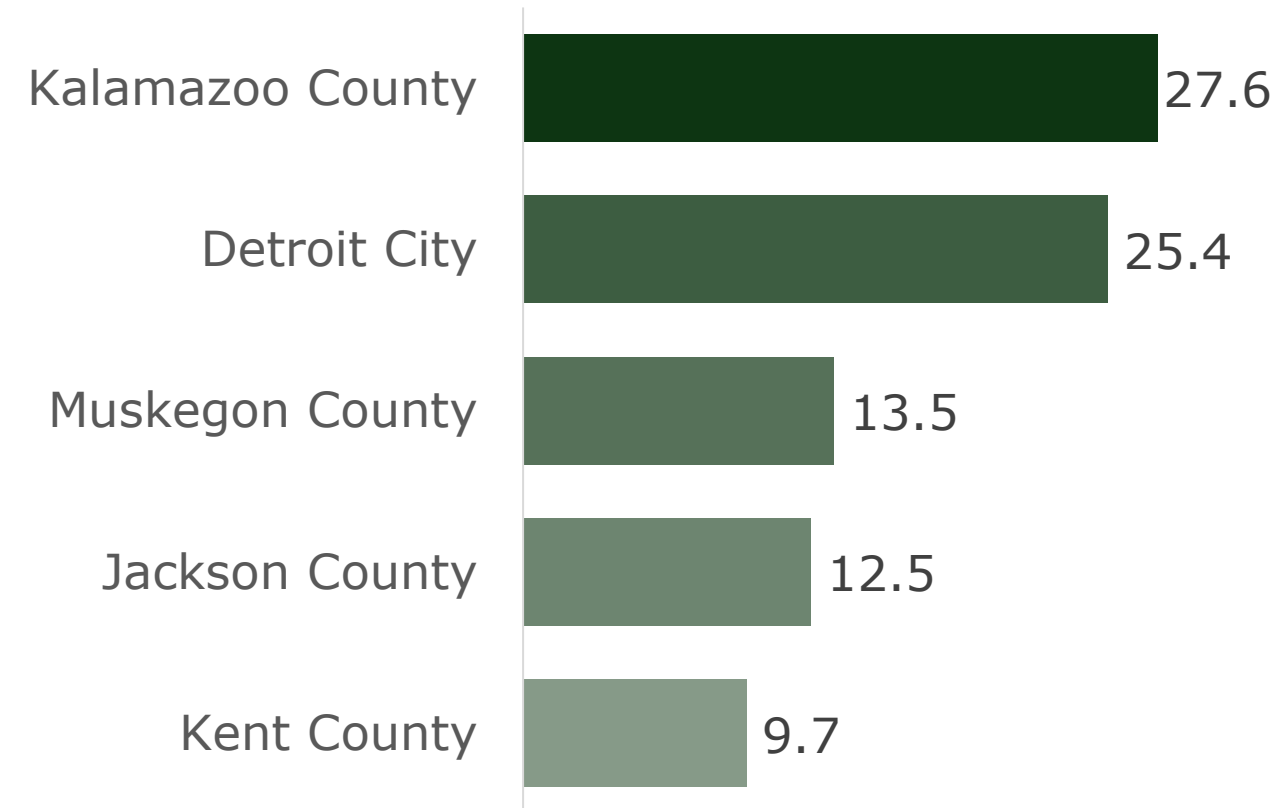
The five jurisdictions with the highest P&S syphilis rates in 2024 have varying shifts in case rates over time. From 2015-2024, Kalamazoo and Muskegon Counties have experienced the greatest average annual changes across all jurisdictions, with a 37.4 and 43.7 percent average annual increase, respectively, while Detroit City rates increased by 228% from 2015 to 2021, followed by a 50% decrease from 2021 to 2024.



*2015 and 2024 rates displayed in graph.

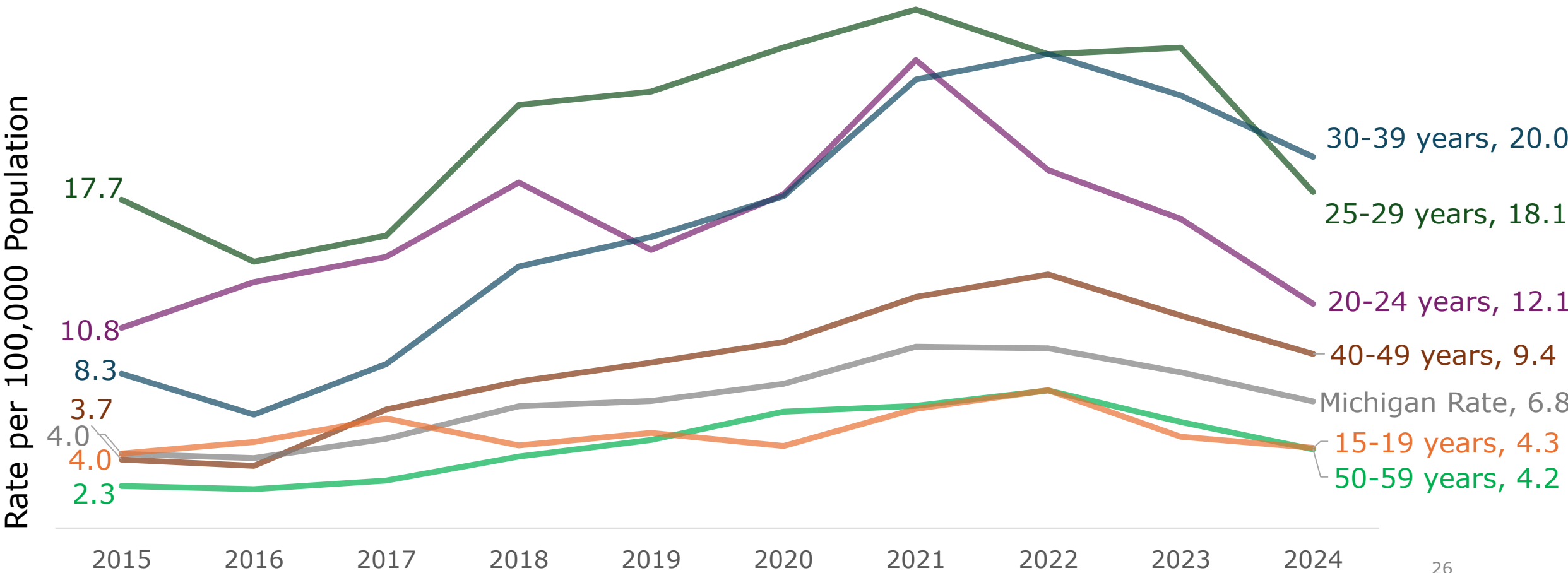
P&S Syphilis – Geographic Distribution, 2024

Five local health jurisdictions with the highest case rates, per 100,000.



P&S Syphilis Trends by Age

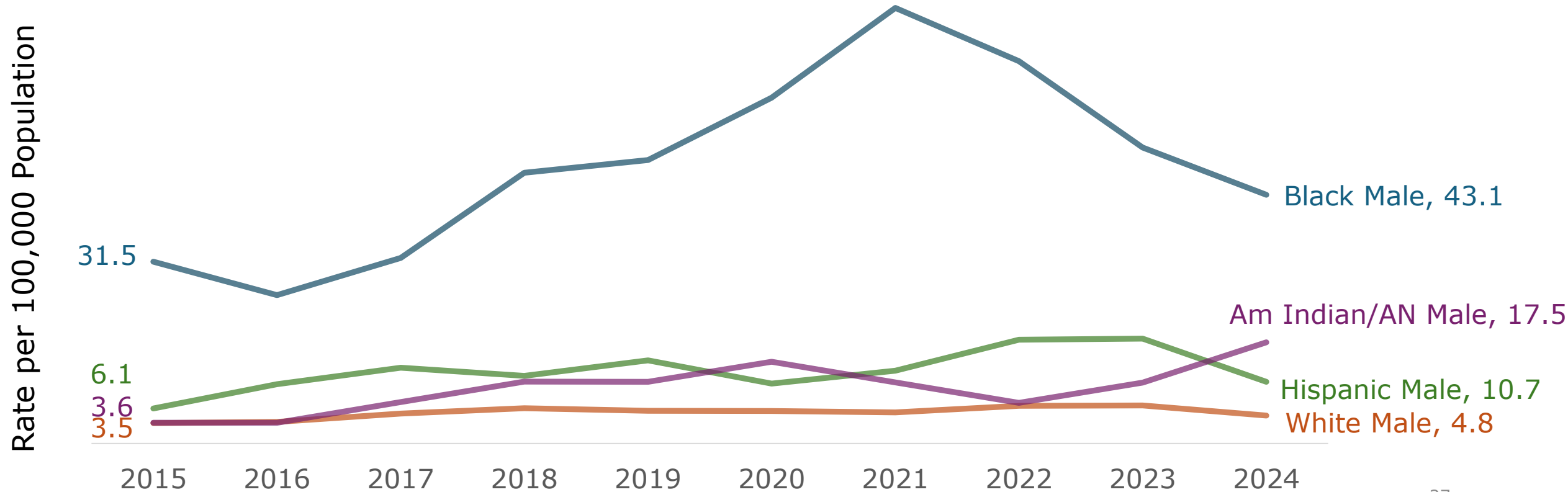
Among age groups, varying shifts in case rates are apparent over time. People 25-to-29-years-old continued to experience the highest case rates until 2024, following a 36% decrease from 2021 to 2024. Additionally, 30-39-year-olds experienced a 150% increase from 2015 to 2024. People 20-to-24-years-old had mostly increasing rates from 2015 to 2021, followed by a 52% decrease from 2021 to 2024.



*2015 and 2024 rates displayed in graph.

P&S Syphilis Trends Among Men

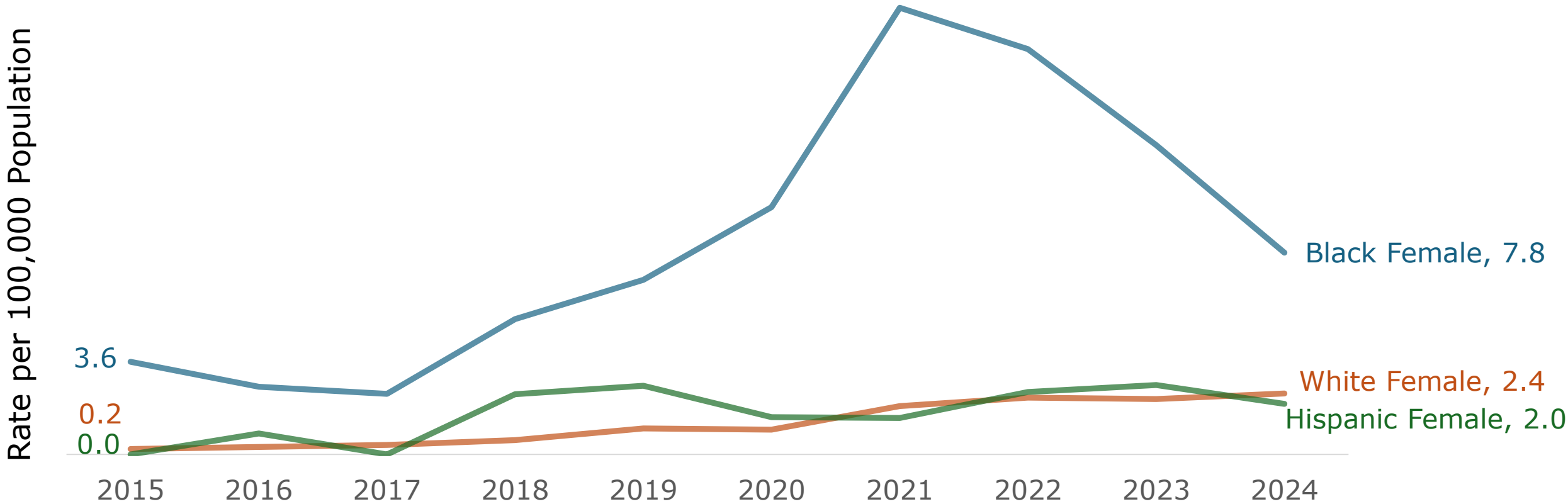
There were increases in P&S syphilis rates from 2015 to 2021: Black males (139%), American Indian/Alaska Native males (194%), Hispanic males (107%) and White males (54%); these rates decreased for most groups through 2024 (Black, -43%; Hispanic, -15%; White, -11%) or continued to increase (American Indian/Alaska Native, 65%). The disparity between Black men and men of all other racial/ethnic groups peaked in 2021 but has now narrowed by 2024.



*2015 and 2024 rates displayed in graph.

P&S Syphilis Trends Among Women

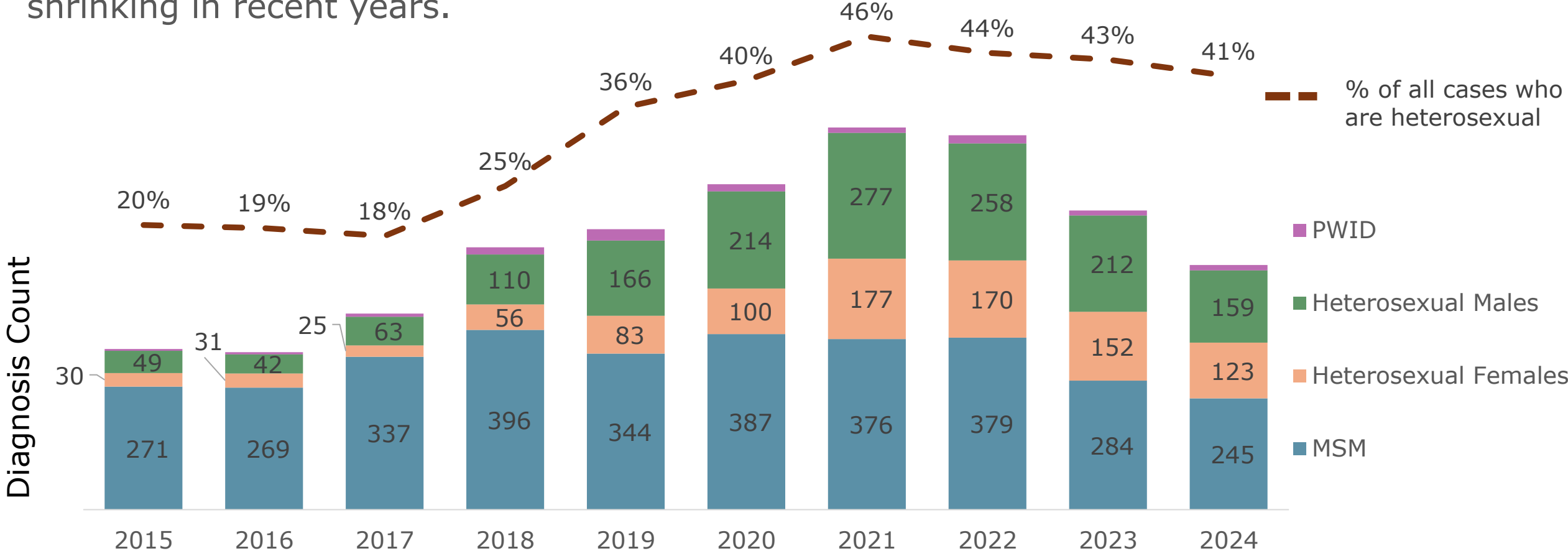
While females have a lower rate of reported syphilis compared to men, that difference is shrinking in recent years. There were increases in P&S syphilis rates from 2015 to 2021 among Black females (381%), followed by a decrease from 2021-2024 by 55%. Hispanic and White females have rates that have increased from 2015-2024. The disparity between Black females and females of all other racial/ethnic groups peaked in 2021 but has now narrowed by 2024.



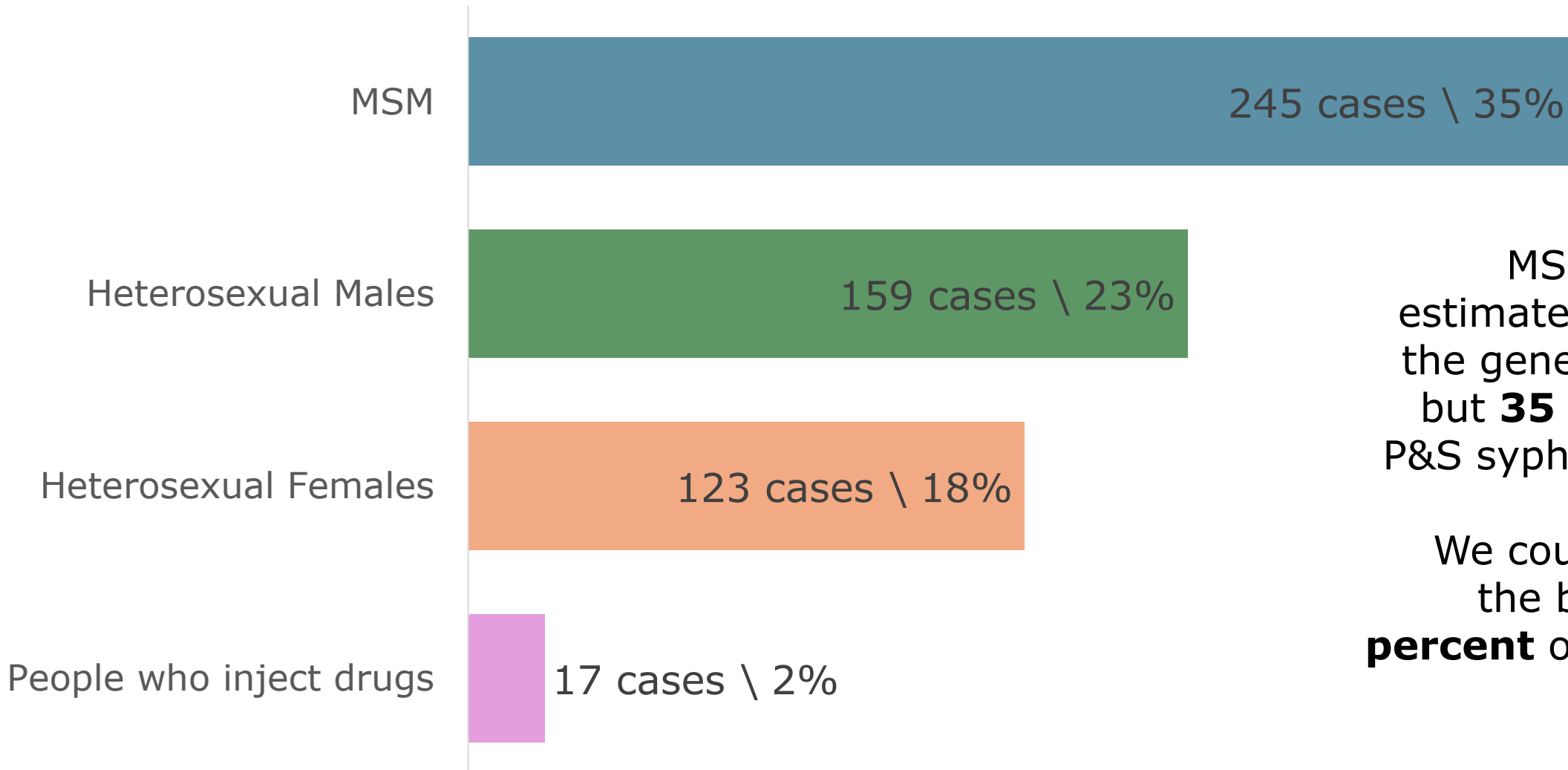
*2015 and 2024 rates displayed in graph.

P&S Syphilis Trends by Exposure Factors

By exposure factor, cases have been increasing most significantly among people who report only heterosexual sex. Though men who have sex with men (MSM) maintain the highest number of diagnoses of syphilis across exposure factors, the difference is shrinking in recent years.



P&S Syphilis – Priority Populations, 2024



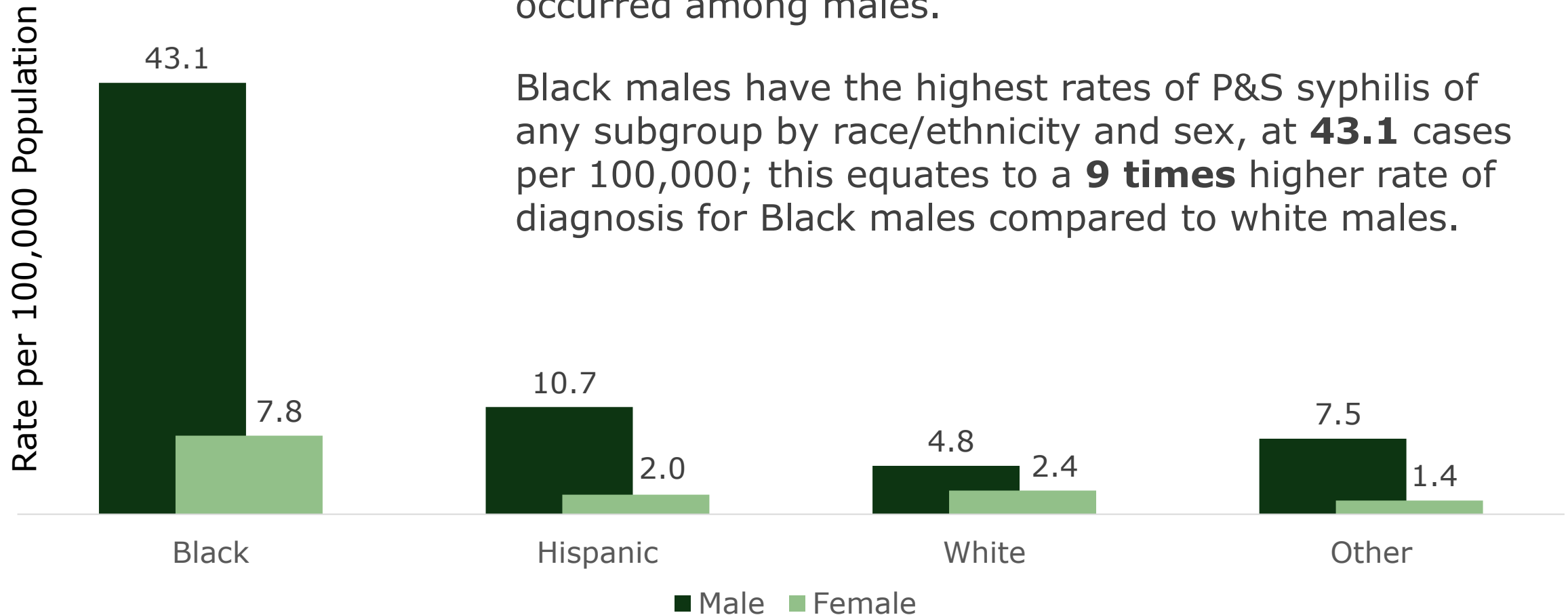
MSM make up an estimated 6 percent of the general population but **35 percent** of all P&S syphilis diagnoses.

We could not classify the behavior of **21 percent** of cases due to missing data.

P&S Syphilis – Priority Populations, 2024

Among reported P&S syphilis cases in 2024, **77%** occurred among males.

Black males have the highest rates of P&S syphilis of any subgroup by race/ethnicity and sex, at **43.1** cases per 100,000; this equates to a **9 times** higher rate of diagnosis for Black males compared to white males.

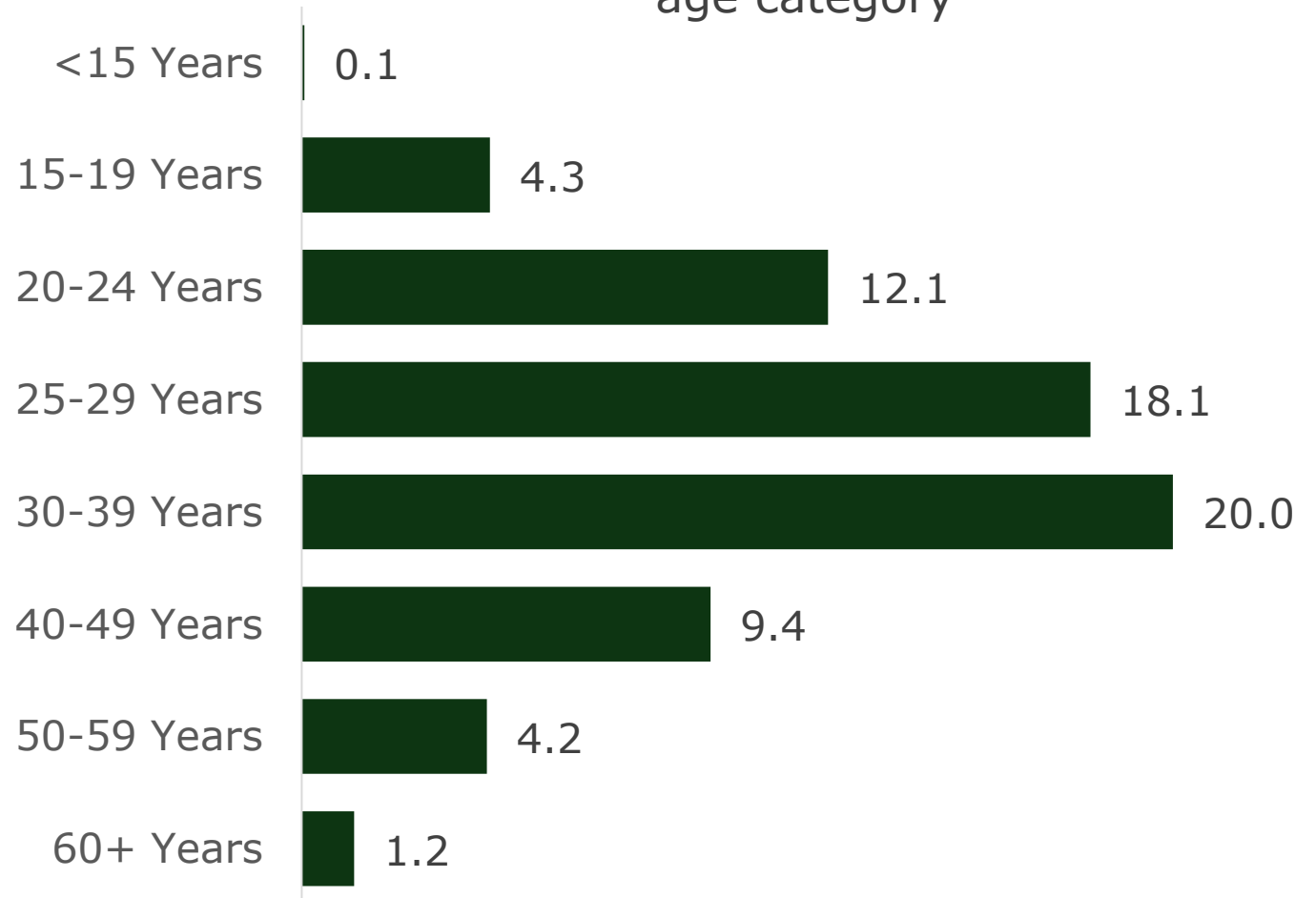


*Am Indian/AN, Asian/NH/PI, Multi/Other included in 'Other' category

P&S Syphilis – Priority Populations, 2024

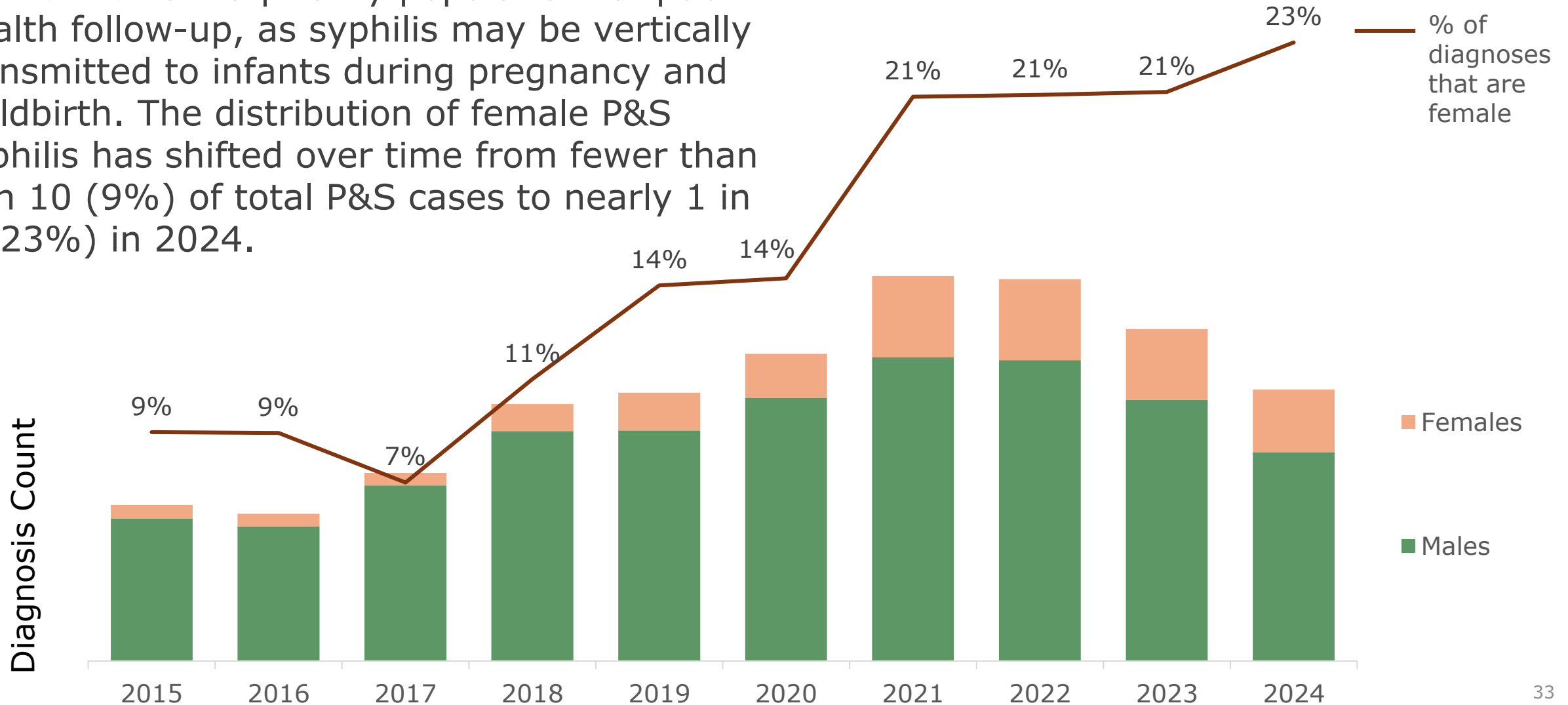
By age, **30-to-39-year-olds** experience the greatest burden of P&S syphilis across all age categories (rate of 20 per 100,000 population), followed by folks in their 20s.

P&S Syphilis rates per 100,000 population by age category



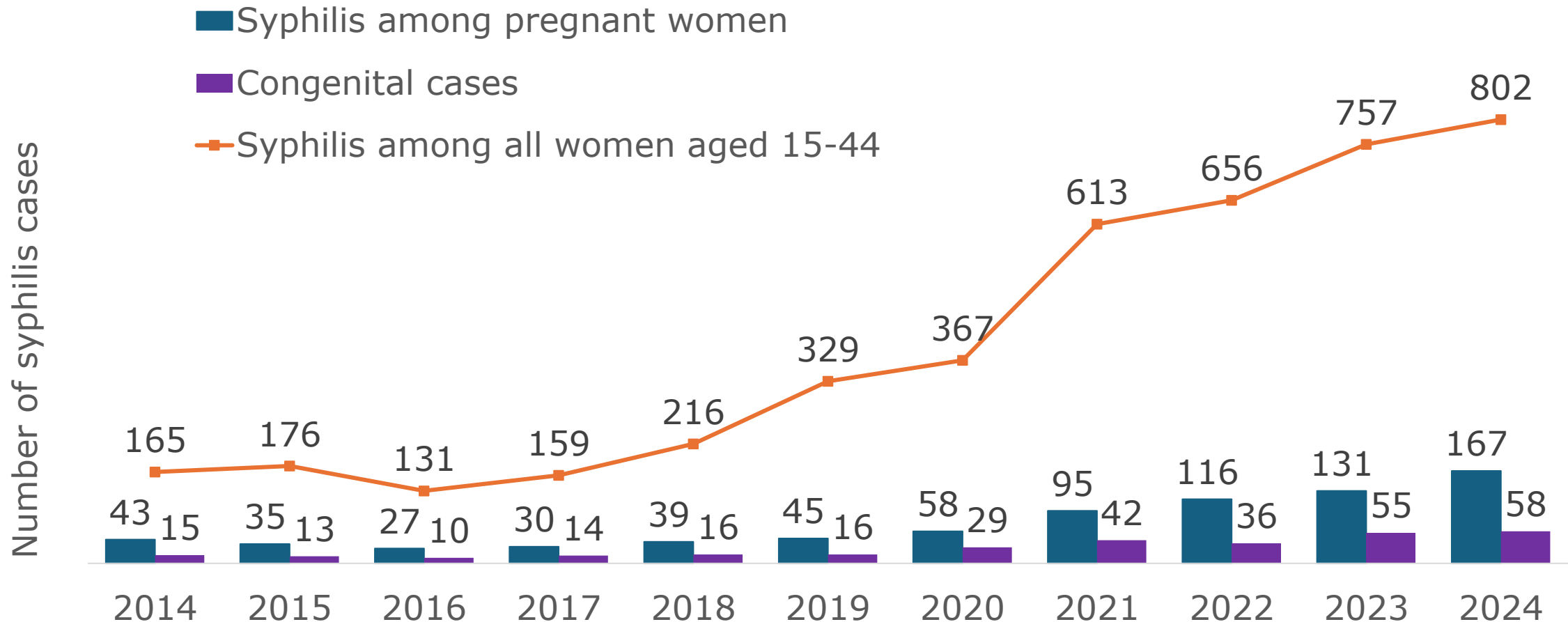
P&S Syphilis Among Women

Women remain a priority population for public health follow-up, as syphilis may be vertically transmitted to infants during pregnancy and childbirth. The distribution of female P&S syphilis has shifted over time from fewer than 1 in 10 (9%) of total P&S cases to nearly 1 in 4 (23%) in 2024.



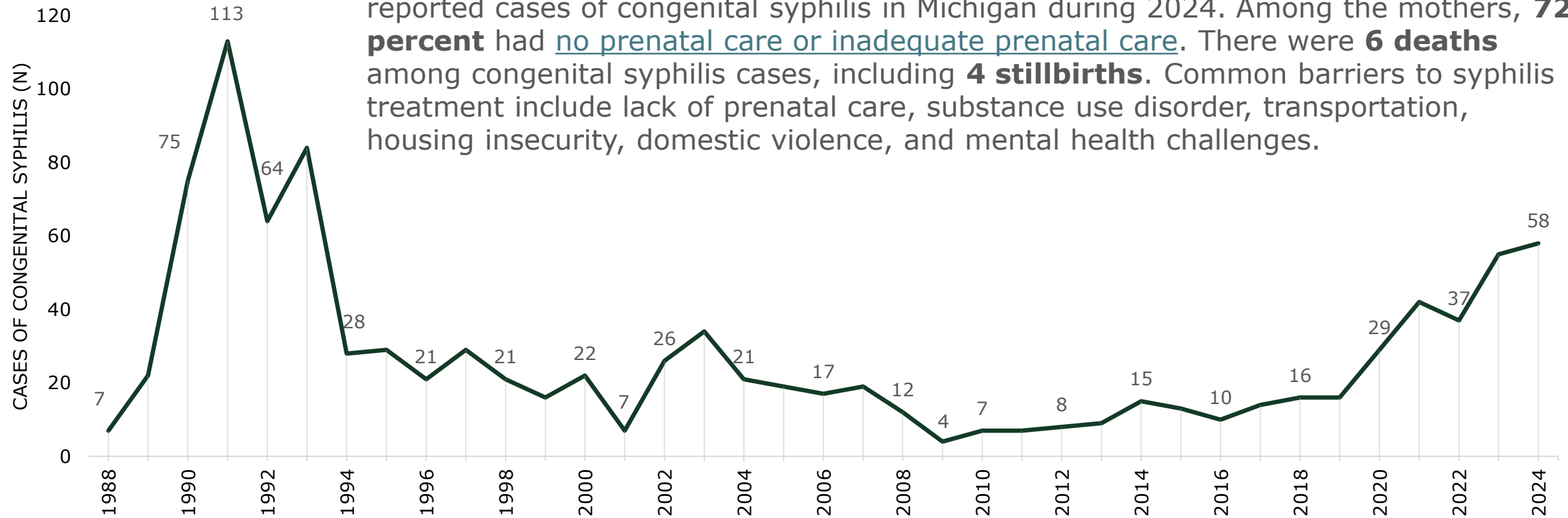
Maternal and Infant Syphilis Trend

Since 2018, syphilis has increased in parallel among all women ages 15 years to 44 years (271%), pregnant women (328%), and for congenital syphilis births (263%).



Congenital Syphilis

Congenital syphilis, or vertical transmission from mother to infant, can be prevented by timely diagnosis and complete treatment of pregnant women. There were **58** reported cases of congenital syphilis in Michigan during 2024. Among the mothers, **72 percent** had no prenatal care or inadequate prenatal care. There were **6 deaths** among congenital syphilis cases, including **4 stillbirths**. Common barriers to syphilis treatment include lack of prenatal care, substance use disorder, transportation, housing insecurity, domestic violence, and mental health challenges.



For questions on using these data or for additional data, submit requests to:

www.Michigan.gov/SHOARS