

**Nationwide Shortage of Penicillin G Benzathine (Bicillin L-A®) Update - Limiting Doses to Treating Pregnant Women**

<b>DATE:</b>	October 1, 2025
<b>TO:</b>	Health Alert Network
<b>FROM:</b>	Debra L. Bogen, M.D., FAAP, Secretary of Health
<b>SUBJECT:</b>	<b>Nationwide Shortage of Penicillin G Benzathine (Bicillin L-A®) Update - Limiting Doses to Treating Pregnant Women</b>
<b>DISTRIBUTION:</b>	Statewide
<b>LOCATION:</b>	N/A
<b>STREET ADDRESS:</b>	N/A
<b>COUNTY:</b>	N/A
<b>MUNICIPALITY:</b>	N/A
<b>ZIP CODE:</b>	N/A

**This transmission is a “Health Advisory” which provides important information for a specific incident or situation; may not require immediate action.**

**HOSPITALS:** PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, NURSING AND LABORATORY STAFF IN YOUR HOSPITAL; **EMS COUNCILS:** PLEASE DISTRIBUTE AS APPROPRIATE; **FQHCs:** PLEASE DISTRIBUTE AS APPROPRIATE **LOCAL HEALTH JURISDICTIONS:** PLEASE DISTRIBUTE AS APPROPRIATE; **PROFESSIONAL ORGANIZATIONS:** PLEASE DISTRIBUTE TO YOUR MEMBERSHIP; **LONG-TERM CARE FACILITIES:** PLEASE SHARE WITH ALL MEDICAL, INFECTION CONTROL, AND NURSING STAFF IN YOUR FACILITY

**Summary**

- The Pennsylvania Department of Health (DOH) was notified by the Centers for Disease Control and Prevention (CDC) that there continues to be a national shortage of Bicillin L-A, as a result of the voluntary recall by King Pharmaceuticals Inc., a subsidiary of Pfizer, of Bicillin L-A (Penicillin G Benzathine Injectable Suspension) in July 2025.
- Medical providers should prioritize the use of Bicillin L-A for women who are diagnosed with or suspected of having syphilis **and** who are pregnant.
- Medical providers should use Doxycycline 100mg PO BID for two (2) weeks (for early syphilis) or four (4) weeks (for late latent syphilis or syphilis of unknown duration) as the alternative treatment for all other individuals.
- Providers who are having difficulty obtaining Bicillin L-A for pregnant patients should contact the DOH, STD Program at (717) 787-3981 to arrange for appropriate treatment.

**Current Situation**

There continues to be a national shortage of Bicillin L-A, as a result of the voluntary recall by King Pharmaceuticals Inc., a subsidiary of Pfizer, of Bicillin L-A (Penicillin G Benzathine Injectable Suspension) in July 2025. Penicillin is the only recommended treatment for pregnant women and babies with congenital syphilis. Considering this recall, the high levels of syphilis diagnoses in the United States, and the continued limited supply of Bicillin L-A, it is recommended that providers strongly consider preserving Bicillin L-A for treating patients who are pregnant given the dynamic nature of the stockout situation. For additional information, please go to [Pfizer Bicillin L-A Stockout August Update](#).

## **Treatment Recommendations**

- In response to the nationwide stockout, DOH recommends that all medical providers limit the use of Benzathine Penicillin G (Bicillin L-A) to the following people:
  - Newly diagnosed pregnant women with a confirmed positive test for syphilis.
  - Pregnant women who require preventive treatment due to exposure to a known syphilis case within the last 90 days.
- Parenteral Benzathine Penicillin G is the only therapy with documented efficacy that is safe to use during pregnancy. Pregnant women with syphilis in any stage who are penicillin allergic should be desensitized and treated with Benzathine Penicillin G.
- Until this nationwide stockout is resolved, DOH recommends that all other individuals who are diagnosed or exposed to syphilis be treated based on the following 2021 CDC Alternative Treatment Recommendation [Syphilis - STI Treatment Guidelines \(cdc.gov\)](https://www.cdc.gov/std/treatment-guidelines):
  - Primary, Secondary, or Early Latent Syphilis (<1 year): 100 mg Doxycycline BID X 14 Days
  - Latent Syphilis (>1 year): 100 mg Doxycycline BID X 28 Days
- If inventory allows, it is appropriate for providers to treat patients with primary and secondary syphilis who are unlikely to be adherent to an oral regimen.

## **Alternative Treatment Recommendations**

- Providers may consider alternative treatments as recommended by CDC for treating pregnant women.
  - Extencilline: [Extencilline Product Information](#)  
To address the ongoing shortages of Bicillin L-A (Penicillin G Benzathine injectable suspension) in the United States, Laboratoires Delbert in conjunction with Provepharm Inc. (Provepharm) and Direct Success, Inc. (Direct Success) is coordinating with the U.S. Food and Drug Administration (FDA) to temporarily import Extencilline (Benzathine Benzylpenicillin) Powder and diluent for reconstitution for injection, 1,200,000 units and 2,400,000 units into the U.S. market.
  - Lentocilin: [Lentocilin Product Information](#)  
To address the shortages of Bicillin L-A (penicillin G benzathine injectable suspension) in the United States, Mark Cuban Cost Plus Drug Company, PBC (“MCCPDC”) is coordinating with the FDA to temporarily import Lentocilin (Benzathine Benzylpenicillin Tetrahydrate) Powder and diluent for suspension for injection, 1,200,000 units into the United States. Benzathine Benzylpenicillin is another name for Penicillin G Benzathine.

## **Patient Follow-up**

- Patients receiving the alternative Doxycycline treatment are recommended to have a clinical and serologic evaluation performed at 3, 6, and 12 months after treatment; more frequent evaluation might be prudent if follow-up is uncertain or if repeat infection is a concern.
- Serologic response (i.e., titer) should be compared with the titer at the time of treatment. However, assessing serologic response to treatment can be difficult, and definitive criteria for cure or failure are not well established. In addition, nontreponemal test titers might decline more slowly for persons previously treated for syphilis.

## **Management of Sex Partners**

- Persons who had sexual contact with a person who receives a diagnosis of primary, secondary, or early latent syphilis <90 days before the diagnosis, should be treated presumptively for early syphilis, even if serologic test results are negative or unknown.
- Persons who had sexual contact with a person who receives a diagnosis of primary, secondary, or early latent syphilis >90 days before the diagnosis, should be treated presumptively for early syphilis if serologic test results are not immediately available and the opportunity for follow-up is uncertain.
  - If serologic tests are negative, no treatment is needed.
  - If serologic tests are positive, treatment should be based on clinical and serologic evaluation and syphilis stage.
- Long-term sex partners of persons who have late latent syphilis should be evaluated clinically and serologically for syphilis and treated based on the findings.

### **Reporting Requirements**

DOH requires all providers and laboratories to electronically report all diseases, infections and conditions listed in 28 Pa. Code Chapter 27, Subchapter B (relating to reporting of diseases, infections, and conditions) through its electronic disease surveillance system, PA-NEDSS. Reporting requirements are that providers report the diagnosis of and treatments for STD cases. Providers not registered for PA-NEDSS can do so by contacting the PA-NEDSS Security Officer by email at [RA-DHNESSACCTREQ@pa.gov](mailto:RA-DHNESSACCTREQ@pa.gov) or by phone at 717-783-9171.

### **Additional Information**

Providers who are having difficulty obtaining Benzathine penicillin G (Bicillin L-A) for priority pregnant patients should contact PA DOH at (717) 787-3981 to arrange for appropriate treatment.

For up-to-date information on the Benzathine Penicillin G (Bicillin L-A) shortage, providers are encouraged to review the following information online at: <https://www.cdc.gov/std/treatment/drug-notices.htm>

Additional information on syphilis testing and treatment for pregnant women can be found online at: [Clinical Guidance for STIs | STI | CDC](#)

Physicians needing additional information should call the following number:

Pennsylvania Department of Health  
 Bureau of Communicable Diseases  
 Division of TB/STD  
 STD Program  
 (717) 787-3981  
**8:00 A.M. – 5:00 P.M**

Individuals interested in receiving further PA-HANs are encouraged to register at HAN Notification Registration ([mir3.com](http://mir3.com))

Categories of Health Alert messages:

**Health Alert:** conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory:** provides important information for a specific incident or situation; may not require immediate action.

**Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of October 1, 2025 but may be modified in the future. We will continue to post updated information regarding the most common questions about this subject.