Here are a few general answers to common questions we are hearing about Monkeypox. Monkeypox is a viral disease that can be spread between people or between people and certain animals. If you have specific questions about Monkeypox relates to your health status, please reach out to your provider – we are happy to discuss the vaccinations and answer any questions for you.

FACTS AS OF 8/7/2022. DECLARED A PUBLIC HEALTH EMERGENCY IN THE US ON AUG. 4, 2022

The name: The name given is a misnomer, since the virus may NOT actually originate from monkeys. Most likely the reservoir is from rodents, but can infect many species. So, expect a name change. (smile)

How long have we known about Monkeypox?: The viral disease has been around for years with the 1st know human case diagnosed in an infant in 1970; however, the recent quick passage in humans is new. Why?

WHAT ARE THE POSSIBLE REASONS FOR THE SPREADING?

- Increase contact with humans and animals as we encroach on their habitat.
- Increase wild life trade.
- Shifting in climate related ecology that brings animals and humans closer.
- Increased proportion of people not vaccinated against smallpox (may confer protection).
- Increase in global travel

IS MONKEYPOX AIRBORN?

Although it is not thought to be as much airborne (as opposed to SARS CoV- 2), as medical providers, we are still using all PPE precautions.
IS MONKEYPOX SEXUALLY TRANSMITTED?

Monkeypox is NOT just transmitted sexually since the virus can be spread by close contact that is not sexual. *Sex is just one type of close contact.* Therefore, it is not thought to be an STD, but spread by close contact including from household contacts and exposure through towels and bedsheets. It can persist in such environments. It seems to not be as infectious until rash shows; however, Monkeypox can still be infectious in its early stages.

WHAT ARE OTHER "POX" VIRUSES?

Pox viruses include Smallpox, Cowpox and Monkeypox. Smallpox declared eradicated in 1980. And if previously vaccinated against smallpox (stopped mandatory vaccination in 1972), there is some protection against other Pox viruses.

WHAT DO WE KNOW ABOUT THE RASH?

The rash associated with Monkeypox usually starts as small papules or macules, which usually are flat or slightly raised, and previously spread from a central location and then to the arms and legs. The size is typically 2-5 mm and often painful. The rash often starts in genital area anorectal or mucous membranes. Some may appear today and a few days later, a few more. For providers, when we see the person, there may be different stages, and some may be crusted over. The visible rash may go through the phases of macules, to vesicles, then pustules to scabs. They may last up to 4 weeks and the person is infectious as long as the rash is present. The rash can be cultured without breaking open the lesion; thus, the lesions are infective even if not open. These lesions may also be in mouth and genital area.

We encourage providers to also screen/test for all STI’s as well. Remember that there are other things that can cause a rash such as herpes zoster(shingles), syphilis, drug eruptions and allergic skin rashes, to name a few.

WHAT IS THE INCUBATION PERIOD?

According to the Centers for Disease Control and Prevention (CDC), Monkeypox symptoms usually start within 3 weeks of exposure to the virus. If someone has flu-like symptoms, they will usually develop a rash 1-4 days later. Monkeypox can be spread from the time symptoms start until the rash has healed, all scabs have fallen off, and a fresh layer of skin has formed. The illness typically lasts 2-4 weeks. The incubation period can be 1-2 weeks, usually, 10-14 days.

WHAT SHOULD I DO IF I AM INFECTED OR SOMEONE IN MY HOME?

Usually, people with Monkeypox can isolate at home. *Isolate means from all in household, including pets.* The individual should still routinely wash their hands and keep their hands away from their eyes. The individual MUST isolate from the rest of the people in the household. However, there may be a secondary infection with bacteria which may cause problems; so, consulting with your medical provider is critical. Pain from the rash may also cause a major problem.
ARE THERE ANY CONSIDERATIONS LIKE THOSE RECOMMENDED TO REDUCE COVID-19 EXPOSURE OFFERED TO HELP ME MAINTAIN MY ENVIRONMENT?

The individual diagnosed with Monkeypox and those in their home may use alcohol-based hand rub to keep hands clean in addition to regular hand washing. It should be >60% alcohol concentration and also similar disinfecting agents like those recently recommended to reduce the risk for COVID exposure may be used to clean environment. Consider cleaning porous surfaces (carpet, rugs, car interiors) with steam cleaning and non-porous surfaces with EPA-registered disinfectants. Read the label. Lysol is only one of them.

WHAT PARTS OF THE POPULATION ARE AT HIGHER RISK?

People at higher risk for Monkeypox include people living with HIV, men who have sex with men, and healthcare workers working with high-risk patients. All of MAO's patients living with HIV AND our PrEP patients are considered at high risk; HOWEVER, all of them are eligible for the vaccine. CDC says especially at high risk, are people with HIV who are not virally suppressed. In earlier, smaller outbreaks, there seemed to be a higher risk of death in patients with uncontrolled HIV who became infected with Monkeypox.

WHAT IS KNOWN ABOUT THE VACCINE FOR MONKEYPOX?

Vaccination (for MAO, JYNNEOS will be the vaccine we are referring to) DOES seem to be safe for people living with HIV and who are on antiretroviral therapy (ART). This vaccine is live, but is a non-replicating virus; so, less risky than the other approved vaccine (ACAM2000). Note: the risk may be increased for people living with HIV with a CD4<200; so, providers, a shared discussion about potential risk and benefit should be had. The contraindications for this vaccine are: severe allergic reaction to this vaccine previously, severe allergic reaction to gentamycin, ciprofloxacin, severe allergic reaction to chicken and egg and avoiding all chicken and egg products. For this definition of severe allergic reaction, we mean anaphylaxis or similar reaction. This vaccine is given in the triceps (upper arm) and given subq. If accidently given IM, no need to repeat, but report it (drug.safety@bavarian nordic.com). It is 2 doses, given 28 days apart.

We can vaccinate high risk people who have not been infected (pre exposure prophylaxis) as well as post exposure prophylaxis. Vaccination is approved in >18 yo, and if given after exposure, is most helpful if given< 4 days after exposure to prevent infection. If given 5-15 days after exposure, vaccine may help to reduce symptoms. For patients of MAO, every culture taken as part of a Monkeypox evaluation are submitted to the Alabama Department of Public Health (ADPH). If confirmed, ADPH will then do contact tracing, follow-up and offer help with treatment, if indicated.
MORE ABOUT VACCINATIONS

Whereas, we can treat Monkeypox with TPOXX (Tecovirimat), that is approved for smallpox and investigational for Monkeypox. As of now, there may be some interaction with Rilpivirine, Doravirine, and Maraviroc. Providers are encouraged to check for updates on the University of Liverpool app. The evidence is low grade and with a short course of TPOXX, discuss with patient and weigh benefit of medicine vs. Monkeypox. We encourage providers to consider TPOXX treatment in patients with uncontrolled HIV or severely immunosuppressed or eye involvement.

WHAT MORE SHOULD I KNOW ABOUT MONKEYPOX AND HIV?

If HIV is diagnosed at the same time as Monkeypox, treatment for both should be started A.S.A.P. Monkeypox in patients living with HIV may look a little different than seen in previous outbreaks. There may be a higher rate of secondary bacterial infections, a more prolonged illness (and a longer period of infectiousness), and higher incidence of a confluent rash instead of discrete lesions.

ADDED RESOURCES FOR YOU

Alabama Department of Public Health
https://www.alabamapublichealth.gov/monkeypox/

Centers for Disease Control and Prevention - Monkeypox
https://www.cdc.gov/poxvirus/monkeypox/index.html

World Health Organization (WHO) - Monkeypox
https://www.who.int/news-room/fact-sheets/detail/monkeypox

Get the facts on monkeypox and stay healthy.
1-800-228-0469
alabamapublichealth.gov/monkeypox

STAY CONNECTED!
MONTGOMERY - DOTHAN - SELMA
South Alabama
(800) 510-4704
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