Monkeypox: An Update for Community Based Organizations Serving LGBTQ + Californians

California Department of Public Health

Thursday, June 16, 2022 | 11:00 am-12:00 pm
WEBINAR LOGISTICS

- Please enter your name, pronouns, and organization into the chat
- All participants are muted to preserve sound quality
- Please enter questions into the Q&A tab to be answered by the panelists
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| **Webinar Logistics** | **Jessica Frasure-Williams**  
STD Control Branch, Program Development Section Chief |
| **Welcome and Meeting Purpose** | **Dr. Erica Pan**  
Deputy Director, Center for Infectious Diseases  
California State Epidemiologist |
| **Background and Status of Monkeypox** | **Dr. Phil Peters**  
Medical Officer, Office of AIDS |
| **What Can We Do About Monkeypox?** | **Dr. Eric Tang**  
Chief (Acting), Sexually Transmitted Diseases Control Branch |
| **Moderated Q&A** | **All Panelists** |
| **Closing** | **Jessica Frasure-Williams**  
STD Control Branch, Program Development Section Chief |
Welcome and Purpose

Dr. Erica Pan (she/her)
Deputy Director, Center for Infectious Diseases
California State Epidemiologist
Background and Status of Monkeypox

Dr. Phil Peters (he/him)
Medical Officer, Office of AIDS
What is monkeypox?

- **Monkeypox is a rare infection**
  - an orthopoxvirus
  - similar to smallpox but less transmissible / less severe
  - certain rodents and non-human primates (monkeys) can become infected (e.g., prairie dogs; 2003)
  - endemic in certain rodent populations in Central and West Africa

- **Monkeypox cases previously identified in the U.S.**

- In May 2022, multiple countries (many in Europe) reported the *simultaneous emergence* of monkeypox without travel links to countries with endemic infection or links to an animal exposure
Situational Update: Monkeypox in Non-endemic Countries
as of June 15, 2022
Estimated International and U.S. Cases since May 2022 in non-endemic countries

- Global total: 2,090 monkeypox/orthopox cases, from 53 non-endemic countries, as of 6/10/2022
- U.S.: 84 cases, as of 6/15/2022
  - all adults with less severe strain
  - 19 states
  - Median age: 38 years (range 23-76)
- California: 19 cases, as of 6/15/2020
California cases:

- Most are gay, bisexual and other men who have sex with men (MSM)
- Lesions in genital or perianal area
  - Several have additional lesions in other locations
- Prodrome has been variable from mild or absent. One developed fever after rash presented.
- All have had mild disease. Five have initiated antiviral treatment.
- Post-exposure prophylaxis (PEP) has been provided to almost 50 close contacts
Signs and Symptoms of Monkeypox

- Classically starts with prodrome of flu-like symptoms, followed by rash 1-3 days later
  - Fever, headache, muscle aches; fatigue & swollen lymph nodes
  - Rash usually starts on face and spreads throughout body
  - Discrete lesions (can coalesce) in same stage at same location
  - Palms, soles, mucous membranes can be involved
  - Rash starts red & flat, becomes a bump, becomes fluid and then pus filled, and then crusts/scabs.

- Rash usually resolves in 2-4 weeks
  - Lesions scab and scabs fall off, leaving new skin underneath
  - No longer infectious

Photo: NHS England High Consequence Infectious Diseases Network
Identifying Monkeypox

Monkeypox rash may be confused with other diseases, such as syphilis, herpes, and chickenpox

- Lesions are often firm and umbilicated (resembles a dot on the top of the lesion, with a depression in the center)
- Classically, lesions are similar size and same stage of development on a single site of the body
- Swollen lymph nodes common
- Lesions on palms, soles
- Lesions often described as painful until healing phase when they become itchy (crusts)
Atypical Presentations

Monkeypox symptoms and rash sometimes atypical in current outbreak

- Lesions in different phases of development
- Small lesions and rapid progress through stages
- Sometimes rash localized to a mucosal area (e.g., anogenital)
- Present sometimes anorectal pain or tenesmus
- Prodromal symptoms are variable
- Lymphadenopathy less common
How is monkeypox spread?

- **Classically:** contact with the virus from an infected animal, infected person, or materials contaminated with the virus

- **Current Outbreak:** direct skin contact with a monkeypox lesion
  - can spread during intimate contact but not known if monkeypox can spread through semen or vaginal fluids
  - Can also be spread by respiratory secretions during face-to-face contact. Greater than 3 hours within 6 feet is considered high exposure
Testing

- CA Laboratory Response Network labs can do orthopoxvirus real time PCR
- Testing currently requires consultation with the local health department
  - Efforts are underway to expand testing availability
- More than one lesion (2 – 4) should be swabbed, preferably from different areas of the body; two swabs should be collected from each lesion.
- Confirmatory monkeypox virus testing is only done at CDC
Experience with smallpox: vaccination after an exposure can protect against infection

Jynneos vaccine FDA-approved to prevent monkeypox in the Strategic National Stockpile
  - may be more effective (higher neutralizing antibodies) and safer (few side effects) than older vaccines (e.g., ACAM2000)

For PEP, vaccine should be given within 4 days of exposure to prevent infection
  - 5-14 days after exposure, may reduce symptoms

As more vaccine available, may be able to offer vaccine to more people (not strictly known contacts)

Most infections resolve without treatment but an investigational antiviral treatment is also available through a CDC protocol
Who is at risk of severe illness?

- **People with immunocompromise** *(e.g., due to HIV/AIDS, cancer, organ or stem cell transplantation, certain medications, autoimmune disease)*
- **Children under 8 years of age**
- **Pregnant or breastfeeding women**
- **People with atopic dermatitis or other exfoliative skin conditions** *(e.g., eczema, burns, impetigo, varicella zoster virus infection, herpes simplex virus infection, severe acne, severe diaper rash, psoriasis)*
- **People with one or more complications** *(e.g., secondary bacterial skin infection; gastroenteritis with severe nausea/vomiting, diarrhea, or dehydration; pneumonia; another concurrent disease or other medical condition)*
What to do in quarantine or isolation?

- Stay home except to get medical care; do not have visitors.
- Wear a mask around others; have them consider masking too.
- If you have sores or scabs, cover lesions as much as possible.
- Wear disposable gloves if coming in contact with lesions and discard safely after use.
  - If gloves not available, wash hands or use hand sanitizer
- Do not share bedding, towels, and clothing before washing on warm setting; can add bleach but not necessary. Wash or sanitize hands after handling soiled laundry.
  - Do not shake soiled laundry as that may disperse infectious particles
- Clean/disinfect contaminated surfaces.
- Your contacts should monitor themselves for symptoms for 21 days and consider PEP if indicated.
Conclusions

- **Monkeypox does not spread easily** between people without close contact.
- Patients are most likely to present in outpatient setting for rash; some presentations atypical.
- May be challenging to differentiate between rash caused by monkeypox or by other diseases such as herpes, syphilis, and chickenpox.
- Many patients have **mild disease** and are making a **full recovery**.
What Can We Do About Monkeypox?

Dr. Eric Tang (he/him)
Chief (Acting), STD Control Branch
Echoes of AIDS epidemic…

- Current monkeypox outbreak in US and California disproportionately impacting self-identified gay and bisexual men

- What’s different:
  - We know more about monkeypox
  - It does not cause chronic infection
  - Cases have been mild and no deaths in outbreak
  - We already have a test to detect the virus and have a vaccine (though both currently limited)
  - We’ve learned from the AIDS epidemic on how to better address this outbreak
What CDPH is doing

- Supporting Local Health Departments with Consultation, Guidance, and Resources
  - Prevention (e.g., vaccination of exposed individuals)
  - Testing
  - Treatment (in certain cases)
  - Contact Tracing

- Communication and Community Engagement
  - Educating front-line healthcare workers
  - Educating the public with two-pronged approach:
    - Communication to general public
    - Getting the word out to affected communities
• General Public Education
  • Non-stigmatizing language
  • Fact-based
  • Focus on exposures, rather than identities

• Community Engagement
  • Working with LGBTQ+ organizations to get the word out to impacted communities
  • Social media and “apps”
What CBOs serving the LGBTQ+ community can do

- Share information as trusted messengers
- Provide clear call to action
- Work with local health departments to direct community members to local healthcare providers who can coordinate testing
1. Don’t panic

2. Ask sex partners or people you live with about symptoms

3. Notice if you develop symptoms
   - If feeling sick or experience a new or unexplained rash, seek medical attention
   - Avoid sex or being intimate and take a break from going out to bars, gyms, clubs, and other events or gatherings until you are checked out

4. Stop the spread if you (or your partner) have monkeypox
   - Avoid sex or being intimate with anyone until all sores have healed and a fresh layer of skin has formed
   - Work with public health to inform close contacts so they can get evaluation, testing, and care they need
Key Messages: Pride, Social Gatherings, Harm-Reduction

- If feeling sick or have any rashes or sores, do not attend any gatherings, and seek medical attention
- Make informed choices about attending large events
  - Harm-reduction messaging on how to lower chances of getting monkeypox during Pride events: https://www.cdc.gov/poxvirus/monkeypox/sexualhealth/social.html
- If an event, party, or venue is discovered to be where monkeypox was transmitted, getting the word out about what people who attended can do if develop symptoms and where they can get evaluated and tested
CDPH Flyer for Gay and Bisexual Men with QR Code

- Worked with Gay Sexuality and Social Policy Initiative of UCLA and LA LGBT Center to co-brand their materials
  - Flyer was created by and for gay, bisexual, and transgender people who have sex with men
CDPH Social Media Ads for Gay and Bisexual Men
Building Healthy Online Communities (BHOC) Health Alert

Catered for gay, bi, and trans men who may be exposed through sex and intimate contact
Updated as situation evolves

Grindr Pop-Up:

Health Alert (May-June 2022): Monkeypox
Updated 6/10/2022

GET THE FACTS: MONKEYPOX

There is a small but ongoing outbreak of Monkeypox among gay & bi men. Our partners at Building Healthy Online Communities suggested we share this message with you:

Don’t Panic. As of now, there are very few cases of Monkeypox, but knowing this information could help prevent you from getting or spreading the virus.

Monkeypox is spread through close contact, including through respiratory droplets (coughing, sneezing), skin-to-skin contact, or sharing things like bedding or towels.

If you or any recent partners (from the last 21 days) have unexplained sores or a rash, go see a healthcare provider, and remind them that Monkeypox is circulating.

Learn More

https://bhocpartners.org/sexual-health-info/stis/#toggle-id-16
Other Tools and Resources

- **Interpride: Monkeypox & Pride: Know Before You Go -- Recorded Webinar:**
  [https://medium.com/interpride/monkeypox-pride-know-before-you-go-7ea091bc2400](https://medium.com/interpride/monkeypox-pride-know-before-you-go-7ea091bc2400)

- **CDC Monkeypox Information and Resources:**
  [https://www.cdc.gov/poxvirus/monkeypox/index.html](https://www.cdc.gov/poxvirus/monkeypox/index.html)
  - Health Alert Update 6/14/22: [https://emergency.cdc.gov/han/2022/han00468.asp](https://emergency.cdc.gov/han/2022/han00468.asp)

- **CDPH Monkeypox Information and Resources:**
  [https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Monkeypox.aspx](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Monkeypox.aspx)

- **Local Health Department Services/Offices:**
  [https://www.cdph.ca.gov/Pages/LocalHealthServicesAndOffices.aspx](https://www.cdph.ca.gov/Pages/LocalHealthServicesAndOffices.aspx)
Please enter questions into the Zoom Q&A Feature
THANK YOU
FOR ALL YOU DO TO PROTECT THE HEALTH OF LGBTQ+ CALIFORNIANS