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COVID-19 UPDATES

APRIL 4, 2023



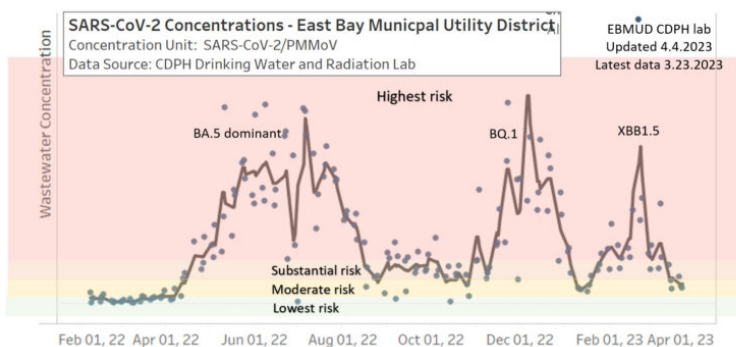
This page includes East Bay COVID viral levels, testing, vaccine, masking, prevention, treatment and other resources, updated monthly. [Please click here to share feedback.](#)

EAST BAY COVID UPDATES

April 2023

There are still free [COVID vaccines](#), [tests](#) and [treatment](#) in the East Bay, available to everyone regardless of immigration and insurance status.

VIRUS LEVELS:



As of April 4, 2023:

- [EBMUD wastewater data](#) shows COVID viral concentration rose and fell sharply in February, reflecting an East Bay [XBB/1.5 variant wave](#). CDPH lab data has only been updated to March 23, 2023. WastewaterSCAN [data](#) shows another rise in viral levels March 23-30, which may be due to increasing XBB.1.9.1 proportions. [Predictions](#) are for East Bay COVID levels to increase through April.
- [COVID hospitalizations](#) leveled off in the East Bay during the month

COVID-19 Updates and Guide

Updates

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Variants

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of March and are predicted to increase slightly in April.

- Immunity lasts 4-6 months, and bivalent boosters add significant additional protection against [hospitalization](#) and [symptomatic](#) and [severe infection](#), so [get your updated bivalent booster](#) if you haven't yet.

To reduce the risk of respiratory illnesses during a time of substantial or high transmission risk, we recommend to:

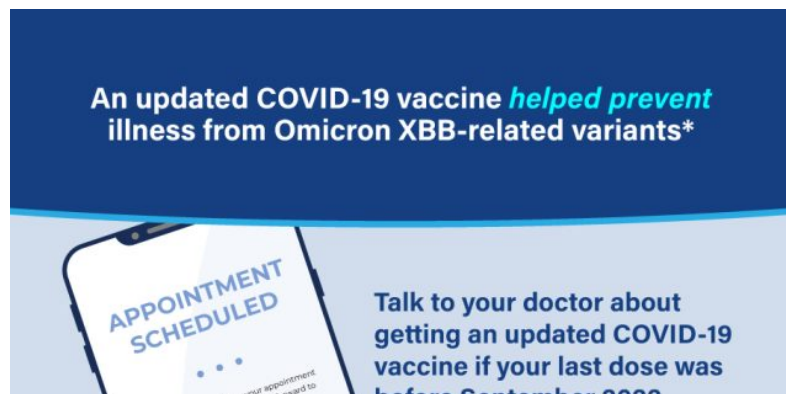
- Stay home and do a home test when sick.
- Gather outdoors instead of indoors when possible.
- When indoors in public and for gatherings: wear high-quality masks, open windows/doors and maximize ventilation and test before gathering to prevent transmissions.

[Click here to read our Wastewater FAQs and 🦌 Feces Facts.](#)

↳ **VARIANTS:**

- **The XBB.1.5 variant is widely circulating in the Bay Area, and XBB.1.9.1 is increasing in proportion.** [Bay Area variant data](#) shows that the XBB.1.5 variant rapidly increased in proportion since January and was projected to be about 84% of the variant proportion by March 29, 2023. CDC data shows that [XBB.1.9.1 is increasing](#) in proportion across the Western US region, including California, and is estimated to be 5% of variants on April 1, 2023, compared to XBB.1.5 at 88%. Boosters, paxlovid, remdesivir and molnupiravir treatment are still effective against severe disease from XBB1.5 and the newer variants. Read more about [East Bay variants here](#).
- **Boosters increase protection against new variants:** [Recent data](#) show us how immunity against Omicron wanes after 4-6 months and boosters are crucial to protect us against these new variants. [Vaccine boosters](#) are [effective](#) in reducing the risk of long Covid, severe disease and death, especially for people over 50 and those at higher risk.
- **Stay healthy** by getting the [updated booster](#), wearing N95/KN95/KF94 [masks](#) and using rapid [tests](#) before gathering and when you have symptoms.

↳ **VACCINES:**





- **Infection and hospitalization data finds that the bivalent booster protects against symptomatic and severe disease from the newest variants, including XBB.1.5.**
 - [Real-world data](#) published in January show that the bivalent booster provided 48% additional protection against symptomatic XBB/1.5 infection compared to no bivalent booster.
 - [CDC hospital data](#) through March shows that people who got the bivalent booster had a 8x lower risk of dying from COVID-19 compared to those who didn't get vaccinated and 2x lower risk of dying compared to vaccinated people who didn't get the bivalent booster.
- **Updated bivalent boosters against the omicron variants are now available for children 6 months and over** who've received their last dose or were last infected 2 or more months ago. The FDA [authorized](#) the updated bivalent boosters for children ages 6 months to 4 years on December 8, 2022 and [March 14, 2023](#) with these eligibility criteria:
 - Moderna booster for ages 6 months to 4 years: all children that had the primary series (2 shots) is eligible for the bivalent booster.
 - Pfizer boosters for ages 6 months to 4 years:
 - If your child completed primary series (3 shots) 2 or more months ago, they can get a bivalent booster. ([FDA authorized](#) March 14, 2023.)
 - If your child did not complete the primary series (i.e., had 1 or 2 shots only), they **are** eligible for the bivalent booster.
- **Get a free updated bivalent booster** at [local pharmacies](#), your [medical provider](#), [MyTurn.ca.gov](#), [Vaccines.gov](#), or [county sites](#).
 - **When should I get the booster?** If it's been...
 - <2-3 months since infection/vaccination: Wait and plan to get the booster 3-6 months out.
 - 3-6 months since infection/vaccination: Get the booster soon. If you have an event or trip, get it 2-4 weeks before to optimize protection.
 - 6+ months since infection/vaccination: Get the booster ASAP.

↓ PREVENTION:

- [California isolation and quarantine guidelines](#) were updated on **March 13:**
 - **If you test positive for Covid, isolate for at least 5 days and**

wear a mask for 10 days.

- You may leave isolation after 5 days if symptoms are gone or improving and have had no fevers for 24 hours without the use of fever-reducing medications.
- Wear a mask around others for 10 full days after start of symptoms. If you had no symptoms, wear a mask for 10 full days after your positive test. You may remove your mask sooner than Day 10 if you have two negative tests in a row, at least one day apart.
- [Click here](#) to download the Alameda County isolation PDF. [Click here](#) to read more isolation details from Alameda County.
- **If you were exposed and have no symptoms, test immediately and 3–5 days after your last exposure. Wear a mask for 10 days, even at home around others.**
- **Masks: [As of April 3 in California](#), masks are *recommended but not required in indoor high-risk settings, including health care, long-term care, correctional facilities; homeless, emergency and warming and cooling centers*.** Individual facilities may still choose to make masks required.
 - Masks will remain [recommended](#) in public indoor and transit settings when community levels are high (or medium for vulnerable people).
 - Masks are also recommended when exposed to or infected with COVID-19.
 - If your goal is to prevent infection and long Covid for yourself and/or people you live with, we recommend following the [wastewater levels above](#) or the [CDC transmission levels](#).

↳ **TEST-AND-TREAT:**

- **Get your free COVID home tests while you can!** Insurance companies will no longer be required to fully cover COVID-related costs, including the 8 COVID home tests per insured person per month after November 11, 2023 in California (a 6 month extension from the federal end thanks to [CA Senate Bill 1473](#)).
 - For everyone: if you haven't yet requested the 4 free COVID home tests since December 19, you can still [click here](#) to request them or call 1-800-232-0233.
 - Contra Costa residents can get 4 additional free at-home COVID test kits per household by filling out [this online form](#) or by calling 833-829-2626.
 - For people with Medi-Cal, Medicare or private insurance: [click here](#) for instructions on how to get free tests through your insurance.
- **Are expired COVID home tests still useful?** If you still get a clear "control" line, the test is likely to still be effective.
- **[Free COVID clinical consults for CA clinicians](#):** California health care providers can now call (866) 268-4322 (COVID-CA) to receive free and confidential consultation on COVID-19 testing and

treatment from the UCSF National Clinician Consultation Center.

- **COVID test-and-treat:** Paxlovid is still free and widely available! Community members at [risk](#) can get [treatment](#) at the same location and on the same day that you test positive and regardless of insurance or immigration status. Please encourage anyone who tests positive to contact their provider or a [free test-and-treat center](#) ASAP, as they may be able to get treatment.
- **What are current COVID treatment options?**
 - **Paxlovid, remdesivir and molnupiravir remain effective** against the newer variants.
 - **Viral rebound** is common for both treated and untreated people with COVID-19. There is no evidence of resistance to Paxlovid. Treatment still helps reduce viral load and severity. Just make sure to re-isolate.
- **How can we prevent long COVID?** Aside from wearing masks and preventing infection, the latest data suggests that you can reduce the risk of long COVID if you get infected with:
 - **Vaccination** with at least 2 doses was associated with a 43% reduction of long COVID in a large [systematic review](#) of 41 studies.
 - **Paxlovid** treatment was found to reduce the risk of long COVID by 26% in a large [VA study](#).
 - **Metformin** (a safe and inexpensive medication usually used for diabetes) taken for 2 weeks during acute COVID infection was found to reduce long COVID by 42% in a [randomized control trial](#).
 - **A "healthy lifestyle"** (BMI 18-25, never smoking, exercise, moderate alcohol intake, high quality diet, sleeping 7-9 hours per day) was found in the [Nurses' Health Study II cohort](#) (all women, 97% white) to be associated with a lower risk of long COVID. Participants with 5-6 healthy lifestyle factors had 49% lower risk of long COVID.

↳ THE END OF COVID EMERGENCIES:

California's COVID state of emergency [ended](#) on February 28, 2023.

The end of the state emergency has led to the end of extra pandemic-era CalFresh benefits and the closure of some COVID testing and treatment sites. It may also impact hospitals' ability to address staffing and space shortages as well as some COVID-related paid medical leave policies.

The [end of the federal emergency](#) on May 11, 2023 will result in:

- The end of continuous Medi-Cal coverage. Medi-Cal recipients will have to manually prove eligibility again.
- The end of national requirements for insurance to cover COVID-related costs. A CA law ([CA Senate Bill 1473](#)) extends this requirement for 6 more months to November 11, 2023, so insurance coverage of home test kits and Covid-related health care costs in California will extend till then.

- The end of requirements for insurance to cover all telehealth services; coverage will vary by state.
- The loss of federal purchases of COVID vaccines and treatment for people without insurance.

Click to read more about: the [end of the California state emergency](#) and the [end of the federal emergency](#).

↳ LATEST COVID RESOURCES

[Click here for more East Bay COVID guidance and resources](#) on how to protect ourselves and our communities.

NEXT SECTION:

Variants

← BACK TO UPDATES



**EAST BAY
GETTING
TO ZERO**

ABOUT
SERVICES
HIV
COVID-19
MPOX

RESOURCES
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EVENTS
MEMORIAL GARDEN
DONATE

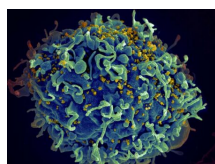


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HIV UPDATES

APRIL 4, 2023



This page includes the latest East Bay HIV updates, which include practice-changing studies and developments. [Please click here to share feedback.](#)

GET TESTED

GET PROTECTED

GET TREATMENT

RAPID
ART

SAME-DAY PREP

COVID-19


ARCHIVES

SIGN UP FOR OUR NEWSLETTER






Jump to:

- [East Bay HIV updates](#)
- [New HIV/STD resources](#)
- [New HIV/STD studies](#)

EAST BAY HIV UPDATES

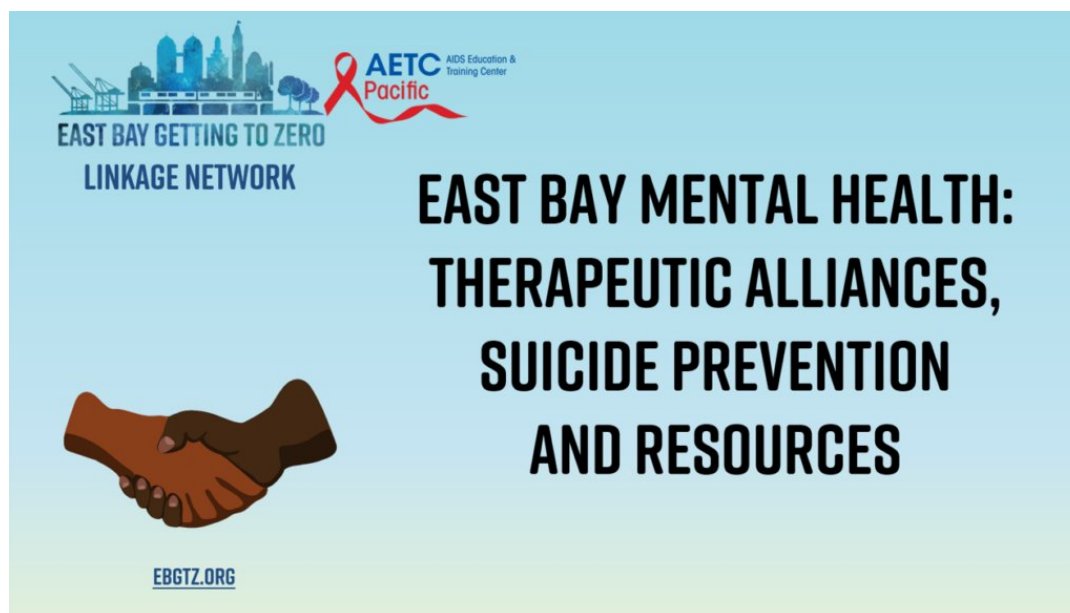


EAST BAY HIV STRATEGIC PRIORITIES FOR 2023

 <p>COMMUNITY MESSAGING</p> <p>EAST BAY AIDS MEMORIAL GARDEN</p> <p>DIGITAL STORYTELLING SERIES</p>	 <p>IMPROVING COLLABORATIONS</p> <p>MENTAL HEALTH SKILLS AND REFERRALS</p> <p>HIV SERVICES IN STREET, SHELTER AND ED SETTINGS</p>	 <p>INNOVATIVE MODELS</p> <p>INJECTABLE PREP & HIV TREATMENT</p> <p>MOBILE HIV SERVICES</p> <p>HOME HIV & STI TESTING</p>	 <p>YOUTH ENGAGEMENT</p> <p>YOUTH-ADULT PARTNERSHIPS IN GENDER & SEXUAL HEALTH EDUCATION</p>	 <p>HOUSING INITIATIVES</p> <p>HOUSING "NUTS AND BOLTS" CASE CONFERENCES</p>
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[The 2023 update of the East Bay HIV Strategic Plan in English](#) is ready to read and use! The update includes latest HIV

data and 2023 strategic activities. More details are posted on our [Strategic Plan](#) webpage. The updated plan in Spanish will be available in May 2023.



Did you miss our **mental health workshop** on March 30? [Click here for our guide to East Bay mental health resources and watch the recording.](#)

NEW HIV/STD RESOURCES

updated April 2023

- [DoxyPEP for sexy peeps! Our new East Bay doxy-PEP resource guide](#) has been posted and will be kept updated as new data, guidance and resources become available.
- [The East Bay Rapid ART quick guide](#) has been updated with the latest guidelines and practices. Many thanks to Drs. Doug White and Sunny Lai and the Highland ED and HIV teams for collaborating with us on this guide! GTZ-SF has also recently updated the [GTZ-SF Rapid ART guide](#).
- **Do you have new staff who want HIV training?** Check out our [Quick start guide for new HIV staff](#) with free trainings and East Bay HIV resources recommended for case managers, clinicians, nurses, pharmacists and HIV all care team members.
- [Updated perinatal HIV breast/chest-feeding guidelines](#) include an important shift away from a recommendation against breast/chest feeding to a recommendation supporting parental choice in the context of virologic suppression.
- **Increase in extensively drug-resistant (XDR) shigellosis:** Alameda County issued a [health alert](#) in March on this enteric bacterial infection, which is transmitted fecal-orally person-to-person, including through sex, as well as through contaminated water and food. A huge increase in recent years have disproportionately impacting MSM, PLWH, international travelers and people experiencing homelessness. Test people with more than 3 days of diarrhea and cramping with a stool [culture](#) and [susceptibility](#) testing.

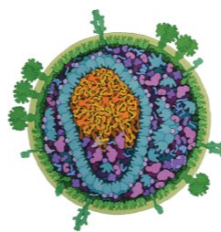
DOXYPEP

NEW HIV/STD STUDIES

updated April 2023

Current lists of open **Bay Area HIV, hepatitis and COVID studies** at UCSF are posted [here](#).

The **CROI 2023** conference took place on February 19-22, one of the most important international scientific conferences covering HIV, STIs, mpox, hepatitis and COVID. You can read selected highlights below, our [complete highlights here](#), more summaries on [Dr. Paul Sax's CROI 2023 Really Rapid Review](#) and on [NATAP's website](#).



CROI
Conference on Retroviruses
and Opportunistic Infections
2023 Highlights

- **Doxy-PEP:** doxycycline post-exposure prevention for STIs was found again to be [effective](#) for MSM and transwomen but [not](#) in a group of ciswomen in Kenya. No marked doxycycline [resistance](#) has been found yet.
- **CAB/RPV (Cabenuva) injectable ART:** [Thigh injections](#) have drug levels equivalent to gluteal injections. CAB/RPV is highly effective even for people with [viremia](#) and adherence challenges and is non-inferior to BIK, but baseline [viremia](#) and NNRTI or INSTI [resistance](#) are associated with CAB/RPV failures so watch those starting with viremia closely and avoid using it alone with baseline resistance.
- **CAB-LA (Apretude) injectable PrEP:** there may be some [forgiveness](#) with late injections. Failures are rare and can be [hard to detect](#), so get an HIV RNA and Ag/Ab at each injection and quarterly after stopping. Treat people with breakthrough infections with protease-inhibitor-based regimens, such as Symtuza.

Please [click here to read our highlights](#) from the updated [IAS-USA HIV guidelines](#).



UPCOMING EVENTS

PACIFIC CENTER'S COMMUNITY DIDACTIC TRAINING SERIES: DISORDERED EATING

📅 April 27 from 1:00 pm to 3:00 pm

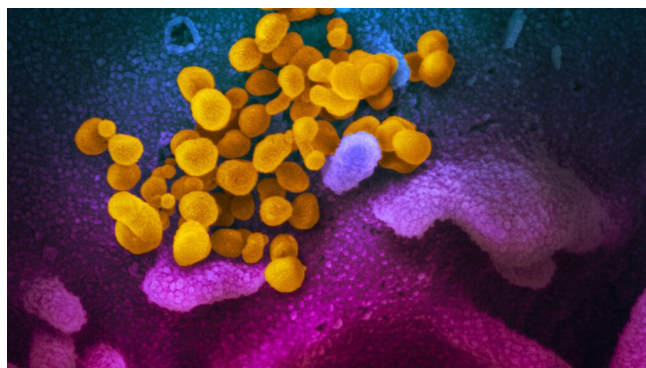
SPANISH OVERDOSE RESPONSE AND NALOXONE ADMINISTRATION TRAININGS

📅 April 20 from 3:00 pm to 5:00 pm

SPANISH OVERDOSE RESPONSE AND NALOXONE ADMINISTRATION TRAININGS

📅 May 18 from 3:00 pm to 5:00 pm

LATEST RESOURCES

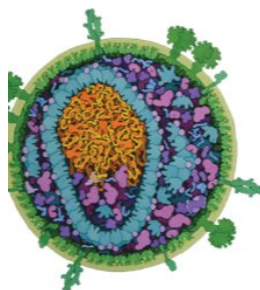


OMICRON AND VARIANT FAQs

APRIL 4, 2023

🔗 [COVID](#), [Data](#), [Epidemiology](#), [Prevention](#)

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CROI

Conference on Retroviruses
and Opportunistic Infections

2023 Highlights

CROI 2023 HIGHLIGHTS

APRIL 4, 2023

🔗 [Data](#), [Epidemiology](#), [HIV treatment](#), [PEP](#), [PrEP](#), [Prevention](#), [Rapid ART](#), [Research](#), [STIs](#)

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EAST BAY MENTAL HEALTH RESOURCES

MARCH 30, 2023

🔗 [Linkage](#), [Retention](#), [Training](#)

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[Home](#) / [Mpox](#) / [Mpox \(Monkeypox\) Updates](#)

MPOX (MONKEYPOX) UPDATES

APRIL 4, 2023

Jump to:

- [East Bay Mpox updates](#)
- [How Mpox is spread and how to prevent it](#)
- [Mpox vaccine: how to get it in Alameda County and Contra Costa County](#)
- [East Bay Mpox epidemiology and links](#)
- [Treatment updates](#)
- [Mpox resources: fact sheets, videos, references](#)

EAST BAY MPOX UPDATES

- Mpox cases have been at zero or very low levels through March 2023** in [Alameda County](#), [Contra Costa County](#), [California](#) and [nationwide](#) after a peak in July/August 2022. There were no mpox cases reported in Contra Costa County during the month of March 2023.
- Mpox in PLWH with advanced immunosuppression** can be a [disfiguring](#) and life-threatening opportunistic infection, with a mortality rate of 27% among PLWH with CD4 <100. This data presented at CROI 2023 shows how important it is to test and treat HIV early, vaccinate people against mpox, and treat mpox early in PLWH with immunosuppression.
- The mpox vaccine found to be highly effective:** Another [study](#) presented at CROI 2023 found a 99% effectiveness rate of the mpox vaccine.
- The WHO recommends the new name “mpox”** for monkeypox disease to help address concerns around stigmatizing and racist language that emerged with the monkeypox outbreak.
- Vaccination offers strong protection against mpox:** [Data](#) from the UK found that a single dose of the MVA-BN (JYNNEOS) vaccine provided 78% protection against mpox 14 days after vaccination. A second dose is expected to offer greater and longer protection, and its ongoing efficacy is being studied. All people in the East Bay getting the mpox vaccine are strongly encouraged to receive both doses of the vaccine.
- People living with HIV (PLWH) are at higher risk for infection and severe disease**, especially PLWH of color and those with low CD4 counts or not on treatment. In addition, [presymptomatic mpox transmission has been found to be very common](#) (53%), so **increasing vaccine coverage and rapid access to diagnosis and TPOXX treatment continues to be crucial**.
- Free mpox vaccines** are still available in [Alameda County](#), [Contra Costa County](#) and throughout [California](#), including 2nd doses. Walk-ins are welcome at many locations.
 - Anyone who requests the mpox vaccine should receive it, including women and especially people of color.** On December 9, ACPHD sent a health alert stating: “providers should offer JYNNEOS vaccine to ANY person who may be at risk or believes they may be at risk, and ANY person who requests vaccination should receive it.

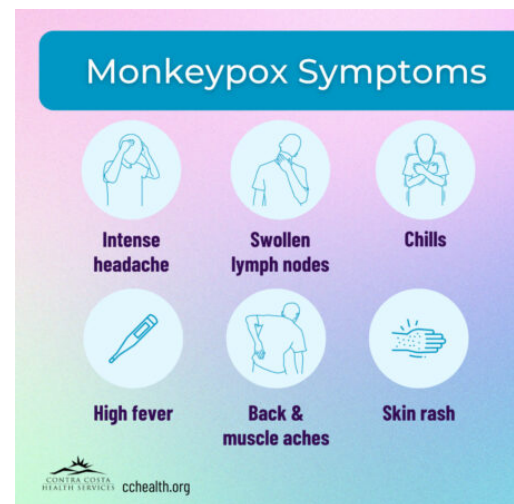
Providers should not require that a person share a reason for wanting vaccination.”

- **More effort is needed to provide vaccine to:** all people living with HIV, MSM, transgender people, people w/multiple sex partners and lab/health care workers with exposures, especially people who are Black/African American and/or Latinx.
- **TPOXX (tecovirimat) treatment for severe and/or high-risk mpox illness is available.**
 - People at high risk include those with weakened immune systems (such as HIV not virally suppressed and/or CD4 <200) and skin conditions (such as eczema).
 - Severe disease includes a large number of lesions, involvement of body parts which might result in scarring or strictures, and serious systemic illness such as sepsis, encephalitis and bleeding.
 - A CDC study found that in a group of people with mpox, most of the people hospitalized for severe mpox were Black/African American cis men living with HIV and had CD4<200. They experienced had delays in diagnosis and treatment. 12 of the 57 in this group died. This study underscores the importance of mpox vaccination, rapid diagnosis and treatment with TPOXX ASAP for all people with severe mpox symptoms and all people living with HIV with CD4<200.
 - In Alameda County, TPOXX may be available at your clinic’s pharmacy, the EBAC pharmacy and through the Summit Emergency Department.
 - In Contra Costa County, TPOXX is available through the county for people with Medi-Cal and no insurance (call 887-661-6230) or through the BASS ID group for people with Medicare and private insurance (call 925-947-2334).
- **Don’t forget other STIs:**
 - Get screened right away for mpox along with other STIs and illnesses if you have symptoms, especially when a rash or other symptoms are not getting better.
 - A recent study found that 38% of people with mpox had HIV, and 41% had an STI in the preceding year.

HOW MPOX SPREADS AND HOW TO PREVENT IT

- The mpox virus spreads mostly through close, intimate contact with someone who has mpox.
- A large study in the UK found that 53% of mpox transmissions occurred before symptoms started.
- You can take steps to prevent getting mpox, such as through vaccination, and lower your risk during sex.
- CDC recommends vaccination for people who have been exposed to mpox and people who are at higher risk of being exposed to mpox.
- If you’ve been exposed to someone with mpox, get the vaccine, talk to your healthcare provider and try to avoid close, intimate contact for 16-23 days.
- If you have any symptoms of mpox, talk to your healthcare provider, even if you don’t think you had contact with someone who has mpox.
- Providers: be alert for patients who have rashes consistent with mpox and evaluate for mpox along with HIV and other STIs.

[Click here for photos of mpox skin rashes \(goes to CDC website\).](#)



MPOX VACCINE UPDATES

The JYNNEOS vaccine is a live attenuated virus that is considered safe and effective at preventing the onset of disease and severity of illness due to the mpox virus. It is most effective as prevention and within 4 days of exposure but can be

given 4–14 days after exposure to help decrease disease severity. Full vaccination requires 2 doses at least 28 days apart and a person is not considered fully vaccinated until 2 weeks after their second dose. Although a 28-day interval is optimal, there is no need to restart or add doses to the vaccine series if the second dose is given after 28 days. As of September 2022, there is adequate supply of the vaccine in the East Bay to give second doses.

WHERE TO GET THE VACCINE IN ALAMEDA COUNTY:

Oakland LGBTQ Center: Please [click](#) for more information and [click here for vax registration](#).

- Schedule: Walk-ins and appointments for mpox vaccinations will be held weekly on Tuesdays 11–4 pm. Please call 510-781-2639 for more info.
- Location: Directly across from the Oakland LGBTQ Center and the T-Mobile store, at the corner of Lakeshore and Lakeside, beneath the 580 overpass at 533 Lake Park Ave.

Kaiser: Kaiser members who are Alameda County residents who get their care at the Oakland Medical Center can call 510-225-8233. Kaiser members who get their care at Kaiser Fremont and San Leandro can call 510-454-2780.

Other potential vaccine options: please contact your healthcare provider or occupational health department if you are eligible for the mpox vaccine. [Click for more options throughout California](#). If you do not have a healthcare provider, please contact monkeypox@acgov.org.

WHO IS ELIGIBLE IN ALAMEDA COUNTY:

ACPHD recommends that “**Mpox vaccine providers should offer JYNNEOS vaccine to ANY person who may be at risk or believes they may be at risk**, and ANY person who requests vaccination should receive it. Providers should **not require** that a person share a reason for wanting vaccination.” This includes women and especially people of color, who have faced the biggest gaps in vaccination rates.

In Alameda County, although 40% of persons with mpox are Latinx and 25% are Black/African American, only 19% of vaccine recipients are Latinx and 12% Black/African American. It is crucial that we ensure outreach and access for communities of color.

ACPHD recommends intradermal administration as the preferred route of administration of JYNNEOS vaccine. This allows more vaccine doses to be given per vial. Vaccination sites run by Alameda County staff and contractors will allow all minors 12 to 17 years of age to receive the JYNNEOS vaccine without parent/guardian consent.

Second Doses of JYNNEOS

- Second doses of JYNNEOS vaccine should be administered to anyone who received a first dose at least 28 days prior. Although a 28-day interval is optimal, there is no need to restart or add doses to the vaccine series if the second dose is given after 28 days.
- Persons with moderate to severe immunosuppression should receive their second dose no later than 35 days after their first dose.
- Persons 18 and older who received their first dose subcutaneously may receive a second dose intradermally.
- Persons diagnosed with mpox after their first dose are not recommended to receive the second dose (unless they are immunocompromised), because mpox infection likely confers additional immune protection.

WHERE TO GET THE VACCINE IN CONTRA COSTA COUNTY:

In Contra Costa County, walk-in or schedule your mpox vaccine appointment at locations listed [here](#) or call 1-833-829-2626. [Click for more options throughout California](#).

Second doses of the mpox vaccine are available to individuals if it has at least been 28 days since someone got the first dose.

WHO IS ELIGIBLE IN CONTRA COSTA COUNTY

Contra Costa Health (CCH): “recommends vaccination for anyone who thinks they are at risk for an MPX infection (see risk factors below).

For the best protection, people should get two doses of Jynneos vaccine for MPX at least 28 days apart. There are [two methods for vaccine injection](#), intradermal (similar to a TB test) or subcutaneous (a regular shot like you’d get for chickenpox or measles). At county-run vaccination sites, you can choose which injection method you prefer.

RISK FACTORS

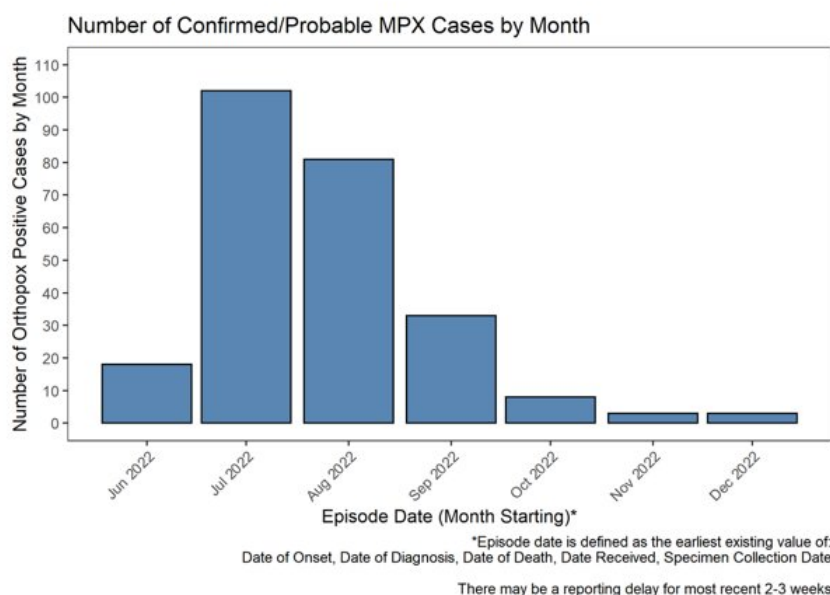
- Sex with multiple partners
- Sex at a commercial sex venue (like a sex club or bathhouse) or at an event
- People who have had close contact with someone with suspected or confirmed MPX
- People taking or prescribed HIV Pre-Exposure Prophylaxis (PrEP)
- People with HIV
- People who have been diagnosed with syphilis or gonorrhea infection in the past 12 months
- People whose sexual partner identifies with any of the above scenarios”

ALAMEDA COUNTY MPOX UPDATES



ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
PUBLIC HEALTH DEPARTMENT

MPX Case Epidemiological Curve



[Click here](#) for the latest Alameda County mpox and other health advisories.

CONTRA COSTA COUNTY MPOX UPDATES

Contra Costa Health Services, along with the California Department of Public Health (CDPH) and other agencies, are monitoring mpox cases in the United States and California. Visit the CDPH [mpox page](#) and [data dashboard](#) for the latest information about confirmed or suspected cases of monkeypox in the county.

Mpox data dashboards: [Alameda County](#) | [Contra Costa County](#) | [California](#) | [United States](#)

MPOX TREATMENT UPDATES

Most mpox infections are mild and will heal without treatment.

TPOXX ([tecovirimat](#)) treatment is available and should be given without delay to people with severe mpox illness and/or at high-risk.

- People at high risk include those with HIV not virally suppressed and/or CD4<200, other immunocompromising conditions, skin conditions (such as eczema), children under 8 years of age, and people who are pregnant or breastfeeding.
- [Severe disease](#) includes a large number of lesions, involvement of anatomic areas (such as eyes or genitals) which might result in serious sequelae that includes scarring or strictures, and serious systemic illness such as sepsis, encephalitis and bleeding.
- If you have mpox and want treatment but don't have a medical provider and/or want to participate in a research study, please consider enrolling in the [STOMP study at UCSF](#) (call 415-535-9495).
- Clinicians: please see the [CDC TPOXX treatment guide](#) and [TPOXX investigational new drug \(IND\) protocol here](#).
- In Alameda County, TPOXX may be available at your clinic's pharmacy, the EBAC pharmacy and through the Summit Emergency Department.
- In Contra Costa County, TPOXX is available through the county for people with Medi-Cal and no insurance (call 887-661-6230) or through the BASS ID group for people with Medicare and private insurance (call 925-947-2334).

RESOURCES FOR COMMUNITY MEMBERS AND ORGANIZATIONS:

[Alameda County Public Health Department: Information on Mpox](#)

[Alameda County Public Health Department: Clinical Guidance on Mpox](#)

What is **Monkeypox**?

¿Qué es la viruela del mono?

Monkeypox is a virus that appears as a distinctive rash, and spreads through close contact skin to skin, sex, kissing, and breathing at close range.

La viruela del mono es un virus que se manifiesta como un característico sarpullido y se contagia a través del contacto estrecho de piel a piel, las relaciones sexuales, los besos y la respiración a corta distancia.

How to protect yourself: Cómo puede protegerse:



Cover exposed skin in crowds

Cúbrase la piel expuesta en espacios concurridos



Don't share bedding or clothing

No comparta sábanas ni ropa de vestir



Ask close physical contacts about recent rashes or sores

Pregunte a las personas con las que mantiene un contacto



Pregunte a las personas con las que mantiene un contacto físico estrecho si han tenido sarpullidos o llagas recientemente



Stay aware when traveling to outbreak countries

Esté al tanto si viaja a países donde hay brotes

See a provider right away if you have a rash, or if you have been in contact with someone who has monkeypox. Stay home if you feel sick.

Acuda a un médico de inmediato si le sale un sarpullido o si ha estado en contacto con alguien a quien se le ha diagnosticado la viruela del mono. Quédese en casa si se siente enfermo.



Para obtener más información, visite: sf.gov/monkeypox



City & County of San Francisco
Department of Public Health

LO QUE LOS HOMBRES GAY Y BISEXUALES NECESITAN SABER SOBRE LA VIRUELA DEL MONO

Se han detectado casos entre hombres gay y bisexuales, pero **no exclusivamente**.

¿QUÉ ES LA VIRUELA DEL MONO?

La viruela del mono es una infección viral transmitida a través del contacto personal cercano, que incluyen besos, sexo y otro contacto de piel a piel.

¿CUÁLES SON LOS SÍNTOMAS?

SÍNTOMAS PRINCIPALES



ERUPCIONES, ABULTAMIENTOS O AMPOLLAS
Pueden aparecer en cualquier parte del cuerpo, incluyendo los genitales. Esto puede parecer similar a sífilis, herpes u otras erupciones cutáneas comunes.

OTROS SÍNTOMAS



FIEBRE Y DOLOR DE CABEZA



DOLOR MUSCULARES



GANGLIOS LINFÁTICOS INFLAMADOS

El inicio de los síntomas oscila entre 5-21 días

WHAT GAY & BISEXUAL MEN NEED TO KNOW ABOUT MONKEYPOX

Cases have been detected among gay and bisexual men but **not exclusively**.

WHAT IS MONKEYPOX?

Monkeypox is a viral infection transmitted through close personal contact, including kissing, sex, and other skin-to-skin contact.

WHAT ARE THE SYMPTOMS?

KEY SYMPTOM



RASH, BUMPS, OR BLISTERS
These may appear anywhere on the body, including the genitals. This may look similar to syphilis, herpes, or other common skin rashes.

OTHER SYMPTOMS



FEVER & HEADACHES



MUSCLE ACES



SWOLLEN LYMPH NODES

Symptom onset ranges from 5-21 days

LO QUE PUEDE HACER



MANTÉNGASE INFORMADO

Mantenga la calma. Esta es una situación que cambia rápidamente. Visite el sitio web de los CDC o CDPH para obtener orientación actualizada.



CONTACTE

Si tiene síntomas, llame (no visite) a su proveedor de atención médica y pregunte acerca de las pruebas.



TOMÉ UNA PAUSA

Si tiene síntomas, quédese en casa, use una máscara y cúbrase para proteger a los demás.

Actualizada: junio 2022

WHAT YOU CAN DO



STAY INFORMED

Remain calm. This is a rapidly changing situation. Visit CDC or CDPH websites for up-to-date guidance.



CONTACT

If you have symptoms, call (do not visit) your health care provider, and ask about testing.



TAKE A BREAK

If you have symptoms, stay at home, wear a mask, and cover sores to protect others.

Updated: June 2022

ALTO AL ESTIGMA

CUALQUIER PERSONA PUEDE CONTRAER LA VIRUELA DEL MONO

Al culpar a una sola comunidad puede dañar los esfuerzos de salud pública y causar que los proveedores de atención médica no detecten la viruela del mono en otra gente.



Obtenga las últimas actualizaciones y archivos descargables de Gay Sexuality & Social Policy Initiative @ UCLA Luskin
gaysexresearch.com

STOP STIGMA

ANYONE CAN GET MONKEYPOX

Blaming any one community may harm public health efforts and cause providers to miss monkeypox in other people.

Get the latest updates & downloadable files from Gay Sexuality & Social Policy Initiative @ UCLA Luskin
gaysexresearch.com



LOS ANGELES LGBT CENTER



WHAT IS MONKEYPOX?



¿QUÉ ES LA VIRUELA DEL MONO?

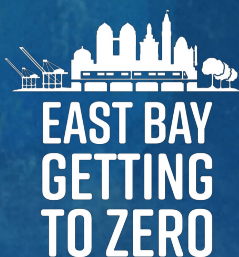
- CDC: Monkeypox: [Get the facts!](#)
- CDC: [Monkeypox Facts for People Who are Sexually Active](#)
- CDC: [Social Gatherings, Safer Sex and Monkeypox](#)
- CA Department of Public Health: [Monkey Pox Q&A](#)
- InterPride: [Monkeypox & Pride: Know Before You Go! \(webinar\)](#)

- CDPH: [Monkeypox: An Update for Community-Based Organizations Serving Lesbian, Gay, Bisexual, Transgender and Queer \(LGBTQ+\) Californians](#) (Webinar). Passcode: **zZ#!8d. Slides can be found [here](#).

COMMUNICATIONS RESOURCES AND TOOLKITS:

- [Event Organizer Letter Template](#) (CDC)
- [Summer 2022 Health Tips for Gay and Bi Men: Palm Card with QR Code linking to information on monkeypox, meningococcal disease, HIV, STIs, and COVID](#) (CDC)
- [Grindr and Meta \(Facebook/Instagram\) Ads](#) (CDPH)
- [Monkeypox Communications Toolkit](#) (CDPH)
- *Monkeypox: An Update for Community-Based Organizations Serving Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+) Californians*, hosted by the California Department of Public Health (CDPH) on June 16, 2022. If you were unable to attend, the [recording is available here](#) Passcode: **zZ#!8d. Slides from the webinar are [here](#).

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