

Mpox Virtual Town Hall

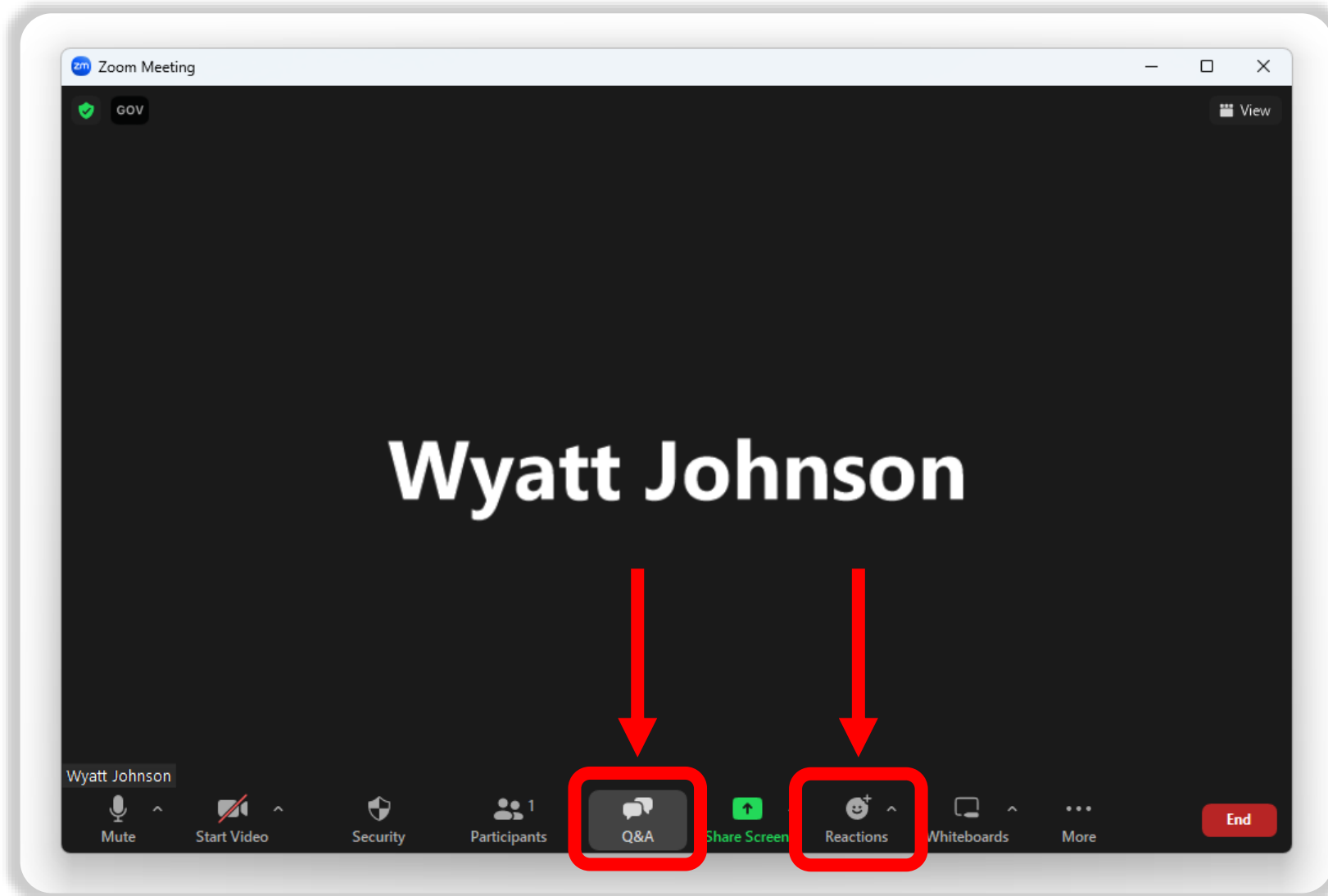
Southwest Region of Virginia
June 25, 2024

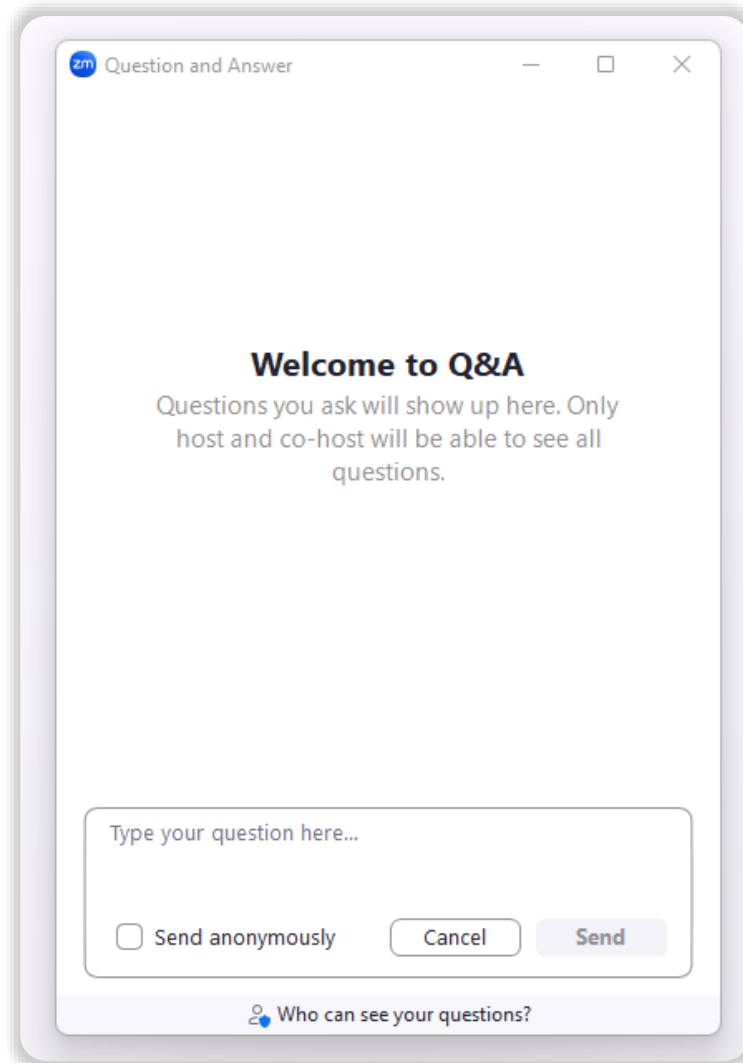
Town Hall Format

- Panelists will share a brief presentation on the topic.
- You can engage in a Q&A session with panelists.
- We'll share discussion questions, requesting your feedback.
- Slides will be available the day after the presentation on
<https://www.vdh.virginia.gov/mpox>

How Q&A Works

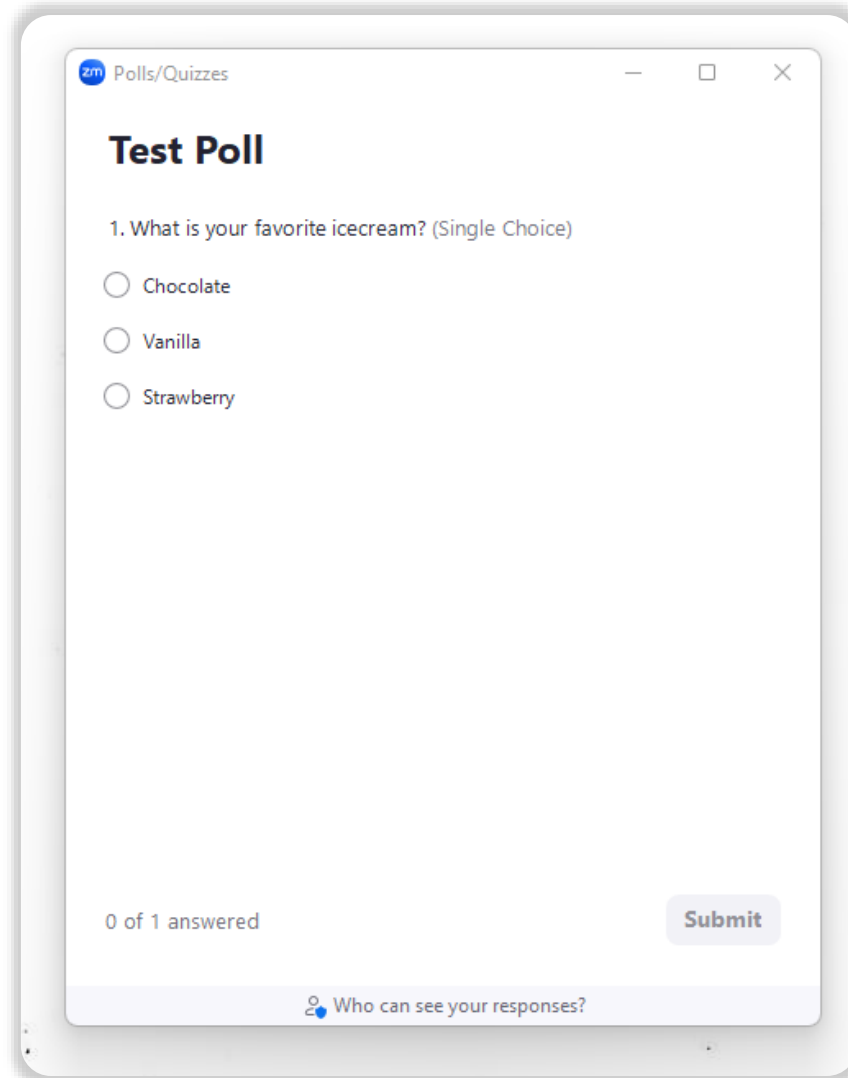
- Use the Q&A button, located on the bottom toolbar.
- Raise your hand and wait for a moderator to call on you.





How Polls Work

- When a prompt appears on the screen, select the choice you prefer.



zm Polls/Quizzes

Test Poll

1. What is your favorite icecream? (Single Choice)

- Chocolate
- Vanilla
- Strawberry

0 of 1 answered

Submit

Who can see your responses?

Other Items

- Please use appropriate language when asking questions or providing feedback (e.g., no profanity).
- Please remain respectful of other audience members and panelists.

Moderators

Wyatt Johnson

Health Promotion Coordinator

Brianna Carey

STD Program Analyst

Panelists

Paige Bordwine

Regional Epidemiologist, Southwest Virginia

Diana Prat

Deputy Director, Division of Disease Prevention

Katie Stephens

Lead, Health Information Team

Poll 1

Which of the following best describes who you are?

Poll 2

How important is mpox to you?

State of Mpox in the Region

About Mpox

- Previously called monkeypox
- Rash illness caused by Monkeypox virus
- Rarely fatal
- Global outbreak began in 2022
 - Mpox seen in countries that had never reported mpox before
 - Person-to-person spread, mainly through sexual contact
- Outbreak peaked in summer of 2022; cases continue to occur
- Virginia and other jurisdictions in the U.S. have had increases recently in number of cases reported



DRC Outbreak and Severe Mpox

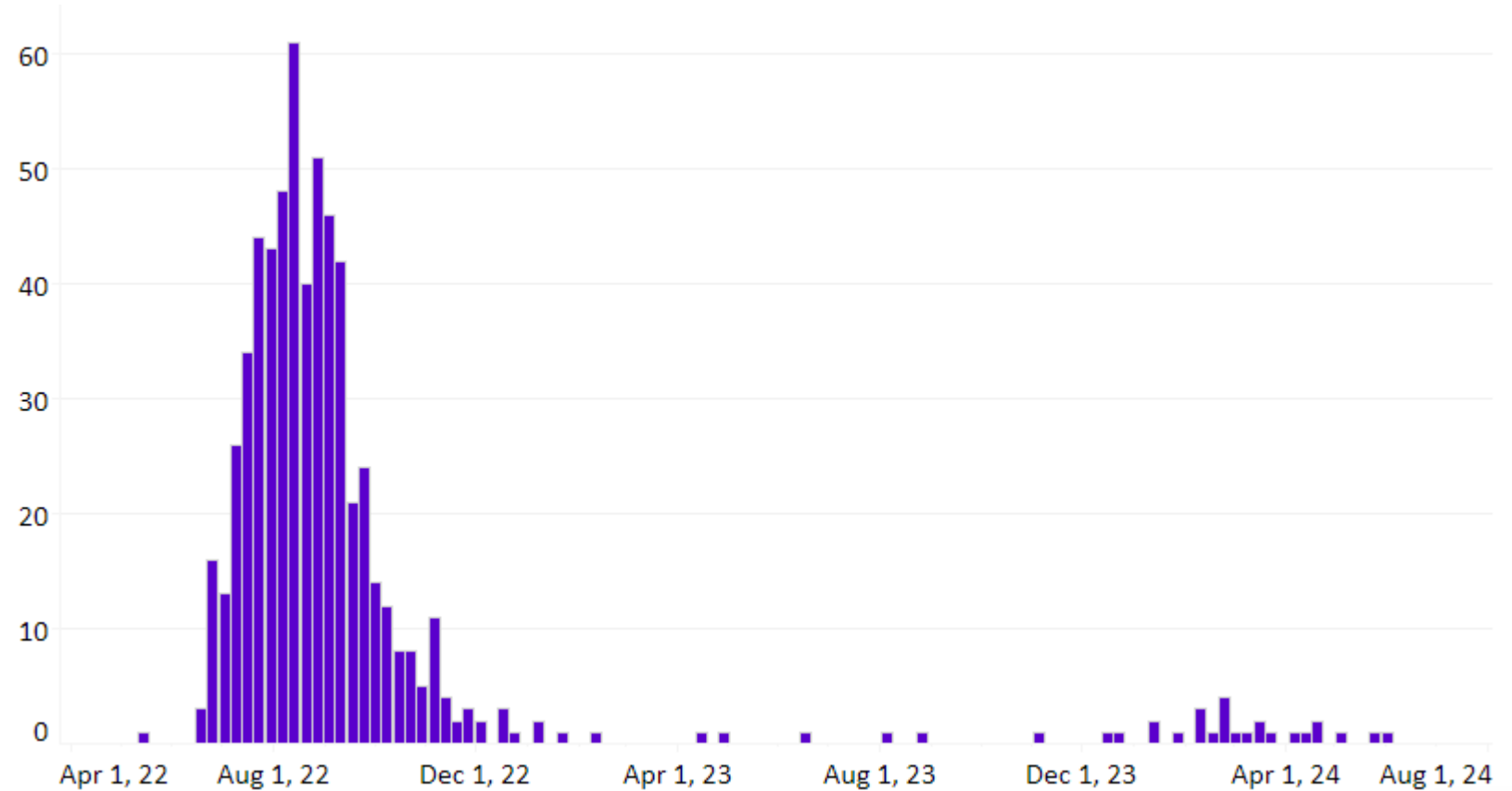
<p>Current outbreak in the Democratic Republic of the Congo (DRC)</p>	<ul style="list-style-type: none"> • Largest outbreak in DRC since mpox was discovered in 1958 • Different type of monkeypox virus than cause of 2022-2023 global outbreak <ul style="list-style-type: none"> ○ More serious disease ○ Spreads more easily ○ Causes more deaths • First time this type of virus spread by sexual contact • No cases reported in the U.S. so far • Risk is considered low in the U.S. • It is expected that our available tests, vaccines and treatments will work
<p>Severe Mpox</p>	<ul style="list-style-type: none"> • Most cases of severe mpox resulting in hospitalization and/or death have been in people with uncontrolled HIV who were newly diagnosed or had HIV for some time, but were not in medical care/on HIV medication • People with well controlled HIV (in care and on medication) typically experience mpox like patients without HIV



Mpox Cases in Virginia

This graph shows the number of mpox cases reported to VDH (usually when the person became ill or was tested for the mpox virus).

We've had a total of 601 cases in Virginia, with 23 cases reported in 2024 (data as of 06/25/2024).



Cases in the Southwest Region

Data 04/01/2022 through 06/25/2024

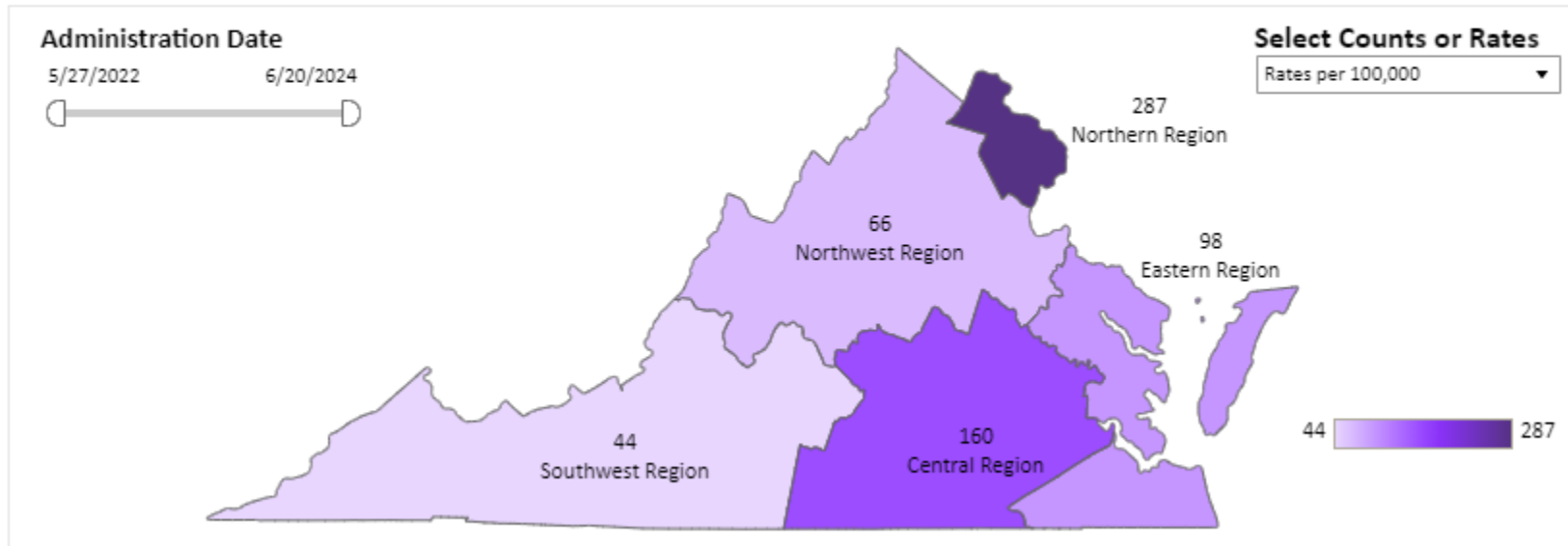
Region	District Name	Case Counts
Southwest	Alleghany	*
	Central Virginia	*
	Cumberland Plateau	*
	Lenowisco	0
	Mount Rogers	*
	New River	*
	Pittsylvania-Danville	0
	Roanoke	6
	West Piedmont	0

* To help protect patient confidentiality, small numbers (between 1 and 4) at the health district level are shown by an asterisk.

Data through 06/25/2024 available on the [VDH Mpox Dashboard](#)

Regional Vaccination Data

As initial JYNNEOS vaccine supply has been limited, it has been allocated throughout Virginia by case counts and close contacts; different areas of the state have had varying levels of Monkeypox activity which has a large effect on vaccine counts regionally and demographically.

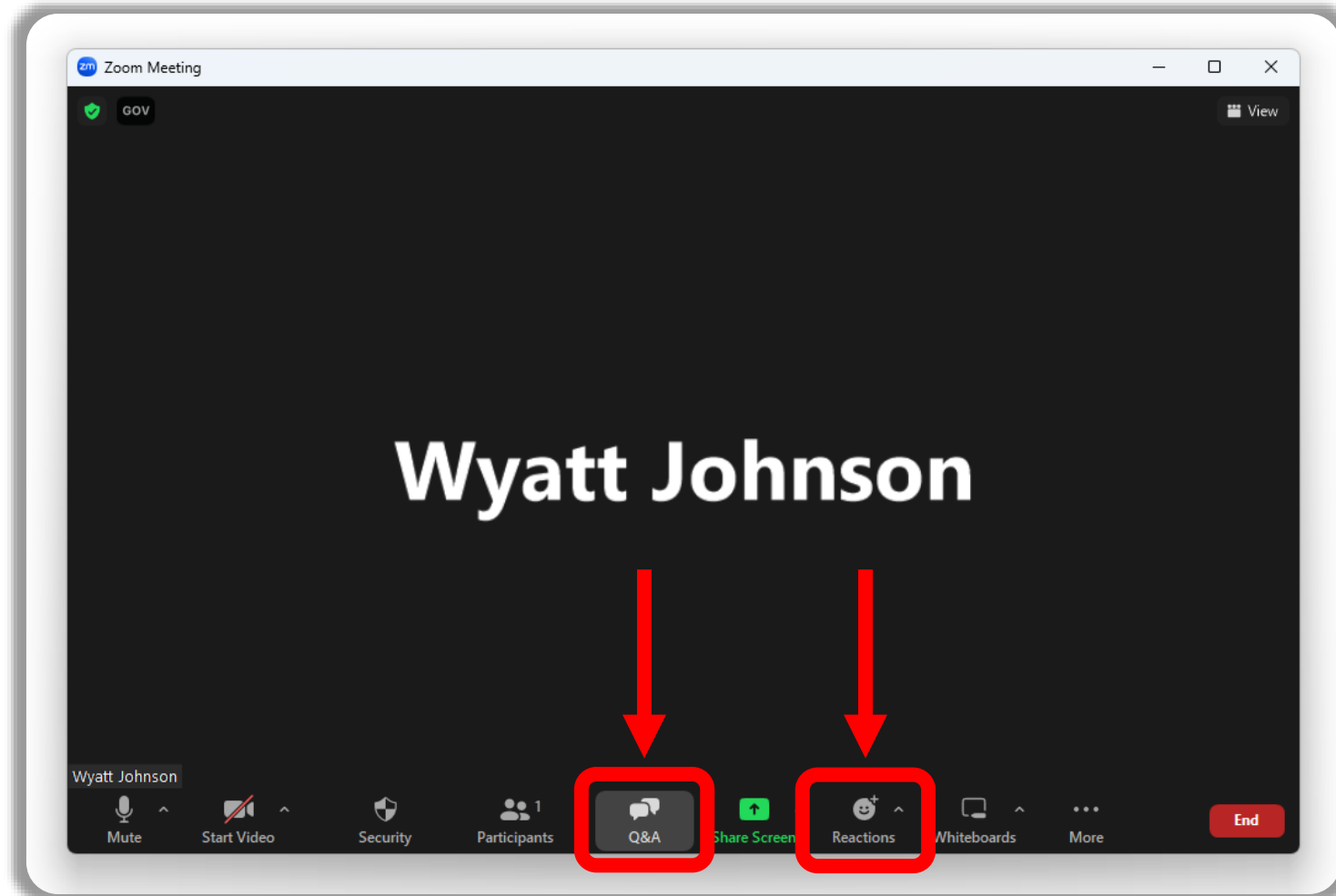


Data through 06/25/2024 available on the [VDH Mpox Dashboard](#)

Ongoing Vaccination Efforts

- Local Health Departments offer vaccine to eligible persons:
 - Those with a known exposure to mpox
 - Those at risk of exposure to mpox
 - Reach out to your Local Health Department to see if the vaccine is available and schedule an appointment
- Multiple vaccination efforts
 - LHD STI clinics
 - Partnership with Rural Health Network
 - Utilization of mobile clinics for LHDs to target high risk areas
 - Work with multiple prevention partners throughout region
 - Partnership with Institutes of Higher Learning
 - Partnership with harm reduction sites
 - Work with multiple recovery groups
 - Partnership with Corrections

Q&A



Discussion Question 1

What would prevent a person from getting tested, vaccinated, or treated for mpox?

Discussion Question 2

What if the vaccine is not available free of charge after the Fall of 2024? Would this be a barrier for you, and why?

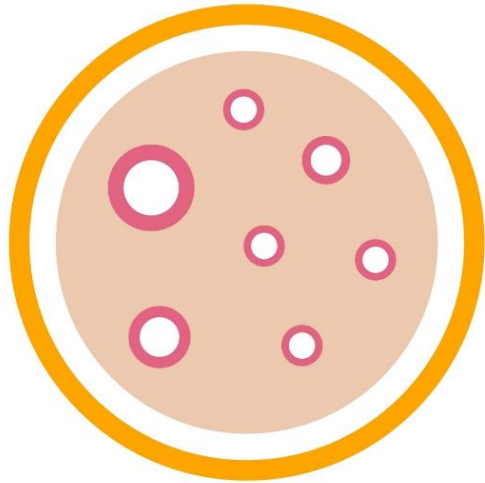
Discussion Question 3

What works or does not work with current vaccination efforts?

Mpox Education and Prevention Measures

Mpox Transmission

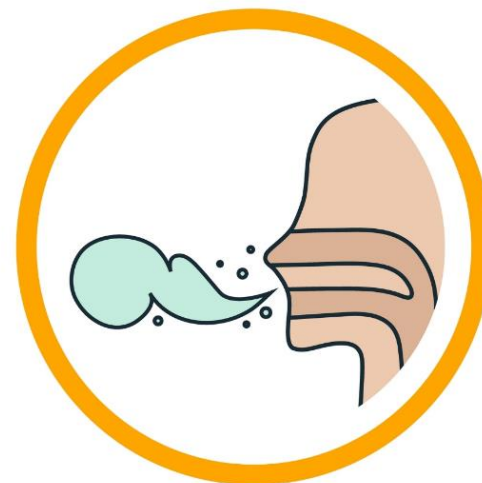
INCUBATION PERIOD IS 3-17 DAYS



CONTACT
WITH LESIONS



BODY
FLUIDS



RESPIRATORY
DROPLET



CONTAMINATED
MATERIALS

Who is at Risk for Mpox?

- Most infections spread through male-to-male sexual contact
 - Close, personal contact with rash and scabs of a person with mpox, or contact with their saliva, upper respiratory secretions (mucus), and areas around the anus, rectum, or vagina
 - **Anyone can get and spread mpox** if they come into close contact with someone who has mpox
- Small number of infections reported as possibly caused from sharps injuries when scraping a rash sample on a patient (CDC recommends against this), skin piercing, or tattooing
- Some people can spread mpox to others 1-4 days before their symptoms appear
- Outbreak has especially affected Black and Hispanic populations, people with HIV

Prevention Measures

- Getting both vaccine doses is the best way to prevent mpox
- Learn how to lower your risk during sex or at a social gathering
- Avoid close skin-to-skin contact with people who have a rash that looks like mpox
- Avoid contact with objects and materials that a person with mpox has used
 - Don't share cups, eating utensils, towels, or clothing
- Wash your hands often, or use an alcohol-based hand sanitizer

Vaccinations

- JYNNEOS is a two-dose vaccine series
- Second dose is recommended 28 days after first dose
- Getting both vaccine doses is the best way to prevent mpox
- You have the most protection 14 days after your second dose
- Vaccination makes it less likely that mpox will make you very severely sick
- It is never too late to get the second dose of vaccine or start the vaccine series
- At this time, booster doses are not recommended



Mpox Vaccine Eligibility

The vaccine is recommended if you

- Are a gay, bisexual, or other same-gender loving man who has sex with men; or are transgender, gender non-binary, or gender-diverse AND in the last 6 months you have had, or expect to have
 - More than one sexual partner, or anonymous sexual or intimate contact
 - Sex at a commercial sex venue
 - Sex in association with a large public event in a geographic area where mpox transmission is occurring
 - One or more sexually transmitted infections

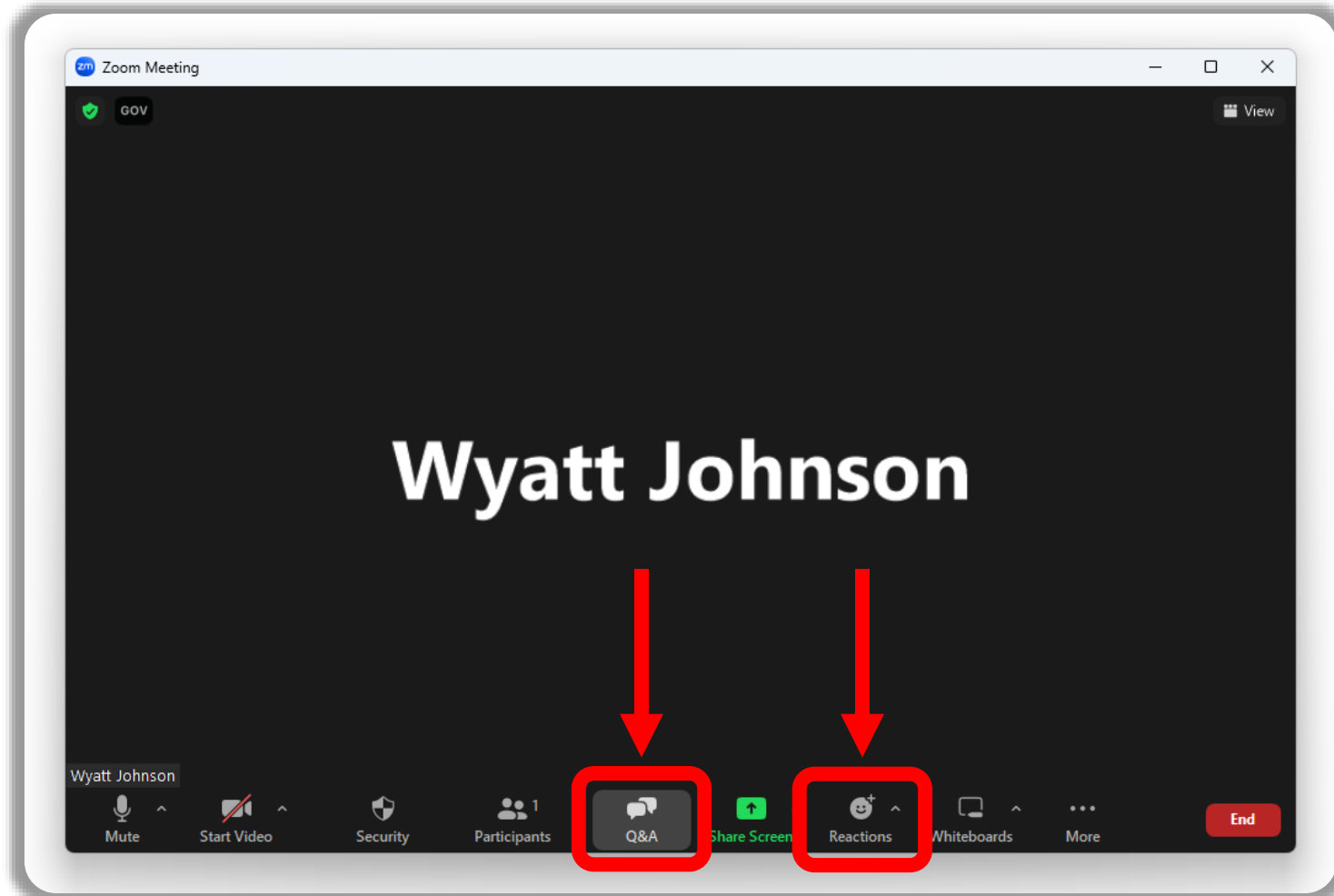
Get the vaccine if you

- Have had sexual or intimate contact with a person who is at risk of mpox as described above
- Have had sexual or intimate contact with someone who may have mpox. Get vaccinated as soon as possible after exposure, regardless of your sexual or gender identity.

Get both doses of the vaccine

Unless there is a medical reason you cannot get the vaccine, like a severe allergic reaction (such as anaphylaxis) after a previous dose or a severe allergic reaction to a vaccine component.

Q&A



Discussion Question 1

What do you think about current methods of mpox prevention, such as vaccination campaigns and outreach programs?

What improvements would you suggest?

Poll 3

How related do you think STI education is to mpox education?

Discussion Question 2

VDH has staff who contact people's sex/needle sharing partners anonymously and confidentially to offer testing. Do you have suggestions on how VDH can encourage more people to accept this service to stop the spread of disease?

Ongoing Mpox Communication Efforts in Virginia

How is VDH Reaching Communities?

- Statewide communications in various formats
- Resources (print and digital) available in multiple languages
- Collaborations between local health departments and community-based organizations

Statewide Mpox Communication Efforts

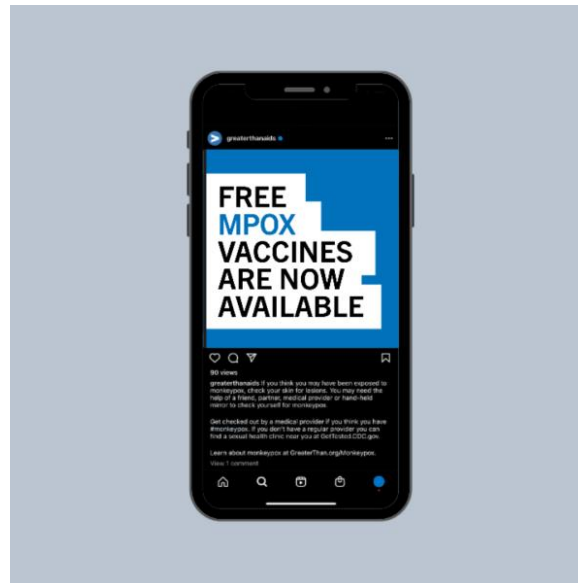
- Press Releases
 - March 25, 2024 - [Virginia Department of Health is Seeing an Increase in Reported Mpox Cases](#)
- Clinician Letters
 - February 13, 2024 - [Mpox, Measles, and Sexually Transmitted Infection Prevention Updates](#)
 - December 11, 2023 - [Mpox Updates for Virginia](#)
- Social Media Posts (X, Facebook, Instagram)
 - March 2024 – Black History Month
 - April 2024 – STI Awareness Month
 - May 2024- Stop Mpox Before It Starts / Summer Prep
 - June 2024 – Pride / Vaccination

Statewide KFF Ad Campaign

- VDH has been working with KFF to reach those in Virginia most at-risk for mpox with messaging on mpox awareness and vaccination
- Digital advertising ongoing since 2023 with videos from healthcare providers who work in sexual health and simple banner ads (in English and Spanish) throughout Virginia

Let's Talk
About **Mpox!**

Demetre
Daskalakis
MD, MPH



SCAN ME

VDH Mpox Communication Resources

- VDH's [mpox webpage for public](#) and [mpox webpage for healthcare professionals](#)
- Resources for the public, community-based partners, and healthcare professionals
- Print materials available in multiple languages
 - Request printed materials/assistance using this REDCap survey: [Mpox Central Office Printed Materials for Non-LHDs](#)
 - REDCap Link available on [VDH mpox communications webpage](#)
- Social media graphics
- Videos
- Resources can be found on VDH Mpox Webpage
 - vdh.virginia.gov/monkeypox/communications-resources/

Handouts – Mpox Fact Sheet & What to Know About Mpox



What is mpox?

Mpox is a contagious rash illness caused by the mpox virus. Mpox can cause a range of symptoms. Some people have mild symptoms, while others can develop serious symptoms and need care in a healthcare facility. Those at higher risk for severe disease or complications include people who are pregnant, children, and people with weakened immune systems.

In the 2022 outbreak, cases have occurred in many countries or areas where this infection was not usually found, including in the U.S. and Virginia. The number of cases has declined since August 2022, but cases continue to occur in the U.S. The mpox outbreak is not over yet. Most, but not all, cases have been in gay, bisexual, or other men who have sex with men. This group, particularly those with multiple sex partners, is currently at greatest risk.

How is mpox spread?

In this outbreak, most people have become infected with mpox when they come into close contact with an infected person. Spread can occur from touching skin lesions, bodily fluids, or clothing or linens that have been in contact with an infected person. Spread can also occur during prolonged, face-to-face contact. Some people can spread mpox to others from one to four days before their symptoms start.

Mpox can spread from person to person through:

- Sexual or intimate contact (including oral, anal, and vaginal sex)
- Hugging, kissing, cuddling, and massage
- Sharing a bed, towel, or clothes that have not been washed

Mpox does not spread from person to person through

- Casual conversation with someone who is infected
- Walking by someone who is infected

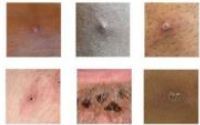


Photo credit: UK Health Security Agency

What are symptoms of mpox?

Skin rash on any part of your body (even if it is only 1 or 2 spots); for some people, this rash may be their only symptom

- Fever
- Chills
- Headache
- Muscle aches and back aches
- Swollen lymph nodes
- Feeling tired
- Respiratory symptoms (nasal congestion, cough, or sore throat)

You may experience all or only a few symptoms. Symptoms usually appear within 3 weeks after exposure.



What do I do if I have symptoms?

If you have symptoms, you should separate yourself from other people and pets, cover your rash, and contact your healthcare provider. It is important to call ahead before going to a healthcare facility and let them know that you are concerned about mpox. You should avoid close physical contact with others until you have talked with your provider.

How can mpox be prevented?

Get Vaccinated. The two-dose mpox vaccine is recommended for people with known exposure to someone with mpox or those at high risk of exposure. For the most protection, it is important to get both doses of the vaccine. To see if you are eligible for vaccination, visit [CDC's mpox webpage](#). If you are eligible visit the [CDC vaccine finder](#).

Avoid close, skin-to-skin contact with another person's rash or scabs. Avoid kissing, hugging, cuddling or having sex with someone who is infected. Do not share eating utensils and cups. Do not share bedding, towels, or personal grooming devices.

Wash your hands with soap and water or use an alcohol-based hand sanitizer after contact with infected individuals.

Wear a mask if you think you have mpox and need to have close face-to-face contact with other people or need to have close contact with someone who may be infected.

Consider the events you attend and your behavior at those events. If there is close, prolonged skin-to-skin contact, the risk of spreading mpox is higher.

Treatment for mpox

Antivirals, such as tecovirimat (TPOXX), may be recommended for people who are more likely to get severely ill, like those with weakened immune systems. Talk to your healthcare provider about treatment or look into the [Study of Tecovirimat \(TPOXX\) for Human Monkeypox Virus \(STOMP\) trial](#) which offers free treatment and people can participate in the trial remotely. Those diagnosed with mpox may also need treatment for symptoms such as pain, itching, nausea and vomiting.

Where can I get more information about mpox?

VDH website www.vdh.virginia.gov/mpox

WHAT YOU NEED TO KNOW ABOUT MPOX



WHAT ARE THE SYMPTOMS?

Rash

Can look like pimples or blisters. Might develop on one part of the body or on many parts of the body. The rash may be painful.

OTHER POSSIBLE SYMPTOMS



Fever



Headache



Muscle / Back Aches



Swollen Lymph Nodes



Chills



Tiredness

To learn more about the mpox virus, call the VDH Hotline at 877-879-4682 or visit www.vdh.virginia.gov/monkeypox/



HOW CAN YOU PREVENT THE SPREAD?



AVOID CLOSE CONTACT including sexual contact, with people who are sick or have a rash.



AVOID SHARING personal items. Clean and disinfect personal items before others use them.



STAY HOME and contact your doctor if you have symptoms.



GET VACCINATED if you are exposed to mpox or are eligible.



HOW DO I LEARN MORE?

Scan the QR code

Visit: www.vdh.virginia.gov/monkeypox/


Both available in English, Amharic, Arabic, Chinese, Korean, Spanish, Tagalog, Ukranian, Vietnamese

Editable version available

To learn more about the mpox virus, call the VDH Hotline at 877-879-4682 or visit www.vdh.virginia.gov/monkeypox/



Handout – What Vaccines Do You need?



VACCINE	ABOUT THE VACCINE	WHO CAN GET IT	WHY GET IT	WHEN TO GET IT	WHERE TO GET IT
FLU VACCINE	The annual flu vaccine is designed to protect against the 4 flu viruses that are predicted to be most common this flu season.	Everyone aged 6 months or older.	It can reduce the risk of flu illness, hospitalization, and death. For those who do get the flu, it can reduce the severity of illness.	September and October are the best times to get it, but it can still provide protection if received later and flu is still circulating.	Health departments, pharmacies, and medical offices. Find a location at vaccines.gov
COVID-19 VACCINE	The 2023–2024 COVID-19 vaccines have been updated to target the Omicron XBB.1.5 variant and are expected to provide protection against other Omicron variants.	Everyone aged 6 months or older.	Staying up to date on COVID-19 vaccines protects against severe illness, hospitalization, and death from COVID-19. It also reduces the risk of Long COVID.	People can get the vaccine now. Those previously vaccinated for COVID-19 can receive the vaccine at least 2 months after their last dose.	Health departments, pharmacies, and medical offices. Find a location at vaccinate.virginia.gov
MPOX VACCINE	A two-dose vaccine to protect against mpox.	People who have had close contact with someone with mpox or those at high risk of getting mpox .	It can prevent severe illness, hospitalization, and death from mpox.	Right away if you're eligible— whether you've been exposed to mpox or are at high risk for mpox. Get both doses for the best protection.	Most health departments and some medical offices. Find a location at cdc.gov/poxvirus/mpox/vaccines/vaccine-recommendations.html
MENINGOCOCCAL VACCINE	Two different types of vaccines to help prevent meningococcal disease. Each vaccine type is two doses.	All preteens, teens, and people with certain health conditions, such as HIV.	It can help prevent meningococcal disease, which can cause meningitis.	Right away if you are eligible and have not received a meningococcal vaccine. Get both doses for the best protection.	Most health departments, pharmacies, and medical offices.
OTHER VACCINES	You may need other vaccines, such as those for respiratory syncytial virus (RSV) infection or pneumococcal disease, based on your age, health conditions, or other factors. Talk with your healthcare provider about what vaccines are right for you.				
FOR MORE INFORMATION	Flu and COVID-19: https://www.vdh.virginia.gov/epidemiology/respiratory-diseases-in-virginia/ Mpox: vdh.virginia.gov/mpox Meningococcal: vdh.virginia.gov/surveillance-and-investigation/meningococcal-disease-outbreak-response		In many cases, these vaccines can be given at the same time. If you have questions about any immunization, talk with a healthcare provider or a pharmacist. If you do not have a healthcare provider, find your local health department at vdh.virginia.gov/health-department-locator and talk with them.		

Last updated 10/2023

Available in English and Spanish

Handout - Get Prepped for Pride

GET PREPPED FOR PRIDE!

- 🌈 Get the mpox vaccine
- 🌈 Get tested for STIs (including HIV)
- 🌈 Learn about PrEP for HIV and DoxyPEP for STIs



Find services here
<https://bit.ly/2OE8EaC>

- Recently updated to include DoxyPEP
- All versions available in English and Spanish
- Versions with no VDH Logo also available

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Social Media Graphics – Mpox Basics

- (Updated) [Mpox spreads through close contact](#)
- (Updated) [Mpox Symptoms](#)
- (Updated) [If you have mpox](#)
- (New) [If you were exposed to mpox](#)
- (New) [Mpox vaccination](#)

Available in English and Spanish

The most common mpox symptom is a rash that looks like pimples or blisters. The rash can be on any part of your body, including on or around the genitals and/or buttocks. Other symptoms can include:

- Body aches
- Swollen lymph nodes
- Fever
- Chills
- Respiratory symptoms (cough, congestion)



If you have symptoms, get tested right away and avoid contact with others.

vdh.virginia.gov/mpox **VDH** VIRGINIA DEPARTMENT OF HEALTH

If you think you were exposed to mpox, get vaccinated right away and watch for mpox symptoms for 21 days.

- Vaccination can reduce the chance of getting mpox or lessen the severity of illness
- Vaccines are available now for free at your local health department
- Be sure to get both doses for the best protection
- Symptoms can include a rash, flu-like symptoms, and more

vdh.virginia.gov/mpox **VDH** VIRGINIA DEPARTMENT OF HEALTH

If you have mpox, protect yourself and others

- Avoid contact with others until your rash is completely healed
- Keep rash covered with bandages and don't scratch rash
- Talk to a health care provider about treatment if your symptoms are severe or you have a weakened immune system
- Let your close contacts know about their risk

vdh.virginia.gov/mpox **VDH** VIRGINIA DEPARTMENT OF HEALTH

Get vaccinated if you're at risk of getting mpox or have close contact with someone with mpox.

- Vaccination can reduce the chance of getting mpox or lessen the severity of illness
- Vaccines are available now for free at your local health department
- Be sure to get both doses for the best protection

vdh.virginia.gov/mpox **VDH** VIRGINIA DEPARTMENT OF HEALTH

Mpox spreads through close, often skin-to-skin, contact with someone who has mpox. It can also be spread by an object that's been used by someone with mpox. Protect yourself by:

- Getting vaccinated with both doses
- Avoiding contact with people with mpox or who have a rash that looks like mpox
- Practicing safer sex
- Washing hands often

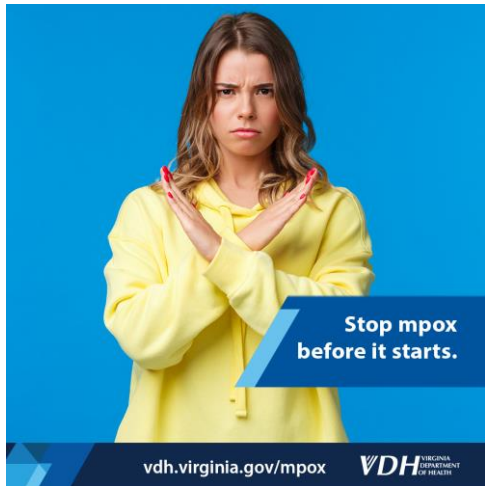
vdh.virginia.gov/mpox **VDH** VIRGINIA DEPARTMENT OF HEALTH

New Vaccine Social Media Graphics

Stop mpox before it starts.

- Available in English and Spanish
- Versions with no VDH logo and post copy provided on mpox webpage

Don't let mpox spoil your summer plans.



New Mpox Vaccine Flyer and Social Media Graphics

MPOX VACCINES:
WHAT YOU NEED TO KNOW

Take Your Shot: Anyone Exposed to Mpox or Thinks They're at Risk Can Get the Vaccine

- Vaccines are available now for free at your local health department
- You do not have to share personal risk information

Double Up: Both Doses Provide the Best Protection

- Even if you received the first dose months ago – you can still get your second
- Two weeks after your second dose is when you'll have the most protection against mpox

Just the Right Spot: Choose Where You Get the Vaccine

- You can get it in your arm, upper back, or shoulder

For more information visit vdh.virginia.gov/mpox

MPOX VACCINES:
WHAT YOU NEED TO KNOW

SWIPE >>>
to learn more

vdh.virginia.gov/mpox

JUST THE RIGHT SPOT:
Choose Where You Get the Vaccine

- You can get it in your arm, upper back, or shoulder

vdh.virginia.gov/mpox

TAKE YOUR SHOT:
Anyone Exposed to Mpox or Thinks They're at Risk Can Get the Vaccine

- Vaccines are available now for free at participating local health departments
- You **do not** have to share personal risk information

vdh.virginia.gov/mpox

DOUBLE UP:
Both Doses Provide the Best Protection

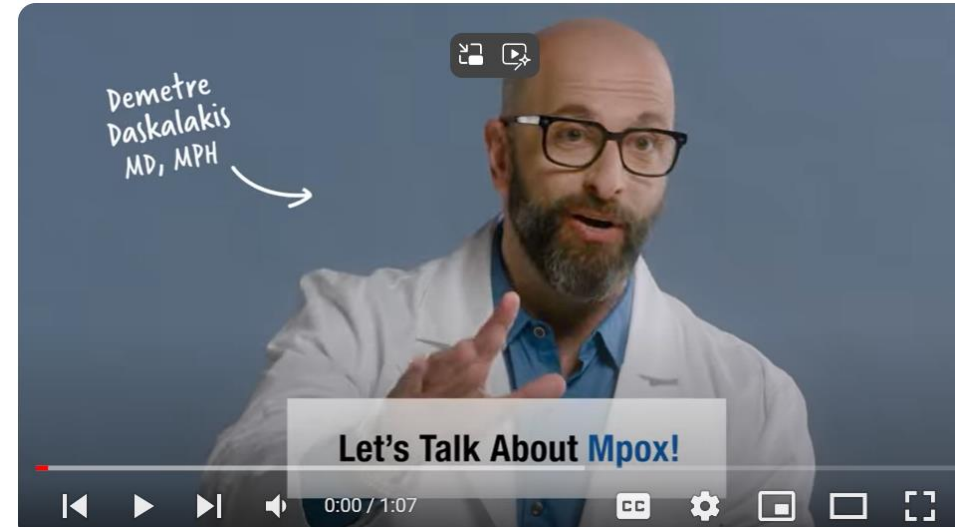
- Even if you received the first dose months ago, you can still get your second!
- Two weeks** after your second dose is when you'll have the most protection against mpox

vdh.virginia.gov/mpox

- Available in English and Spanish

Videos

- [Max Your Vax \(CDC\)](#)
- [Mpox is Now \(CDC Foundation\)](#)
- [Mpox Videos \(CDC\)](#)
- [The Realization \(CDC Foundation\)](#)
- [We Are Greater Than Mpox FAQ Videos](#)



Resources for Healthcare Providers

Find the latest information, tools, and resources on mpox vaccination, testing, and treatment at VDH's [Mpox for Healthcare Providers](#) website.

How Do I Know If My Facility's Disinfectant Will Kill Mpox Virus?

Follow these simple instructions to check if the disinfectant product that your facility uses will kill mpox virus.

Step 1: Find the Environmental Protection Agency (EPA) Registration Number. This will be on the product's label.

Example: Super Sani-Cloth wipes (note: use of this product as an example does not denote VDH endorsement of this specific product)



Step 2: Go to the [EPA List Q website](#) (Disinfectants for Viral Emerging Pathogens)

Step 3: Scroll down to the [pathogens section](#) of the List Q website. Note that it says that mpox virus is a Tier 1 pathogen. When looking at the table of disinfectants, we will want to make sure that the product says "Yes" in the "For use on Tier 1 viruses?" column.

Step 4: Enter your disinfectant's EPA Registration Number in the corresponding field on the List Q website (in our example, 9480-4).

List of Disinfectants for Emerging Viral Pathogens (EVPs)

Product to be used for emerging viral pathogens. Use the table below to determine whether the pathogen you intend to disinfect is Tier 1, 2, or 3. Then, use the filters to identify products appropriate to your needs.

Information about listed products current as of the date on this list. Inclusion on this list does not constitute endorsement by EPA. EPA labels and/or marketing statements that do not state they are for use against the pathogen listed on the EPA List Q website are not included. All claims and/or marketing statements that do not state they are for use against the pathogen listed on the EPA List Q website are not included. EPA List Q website is not intended to be used for legal purposes. For more information, visit [www.epa.gov/epahq](#).

If you are the registrant holder and believe your product qualifies for EPA List Q, please email disinfectants@epa.gov.

EPA Registration Number	Product Name	Company	Disinfectant Type	Surface Type	For use on Tier 1 viruses?	For use on Tier 2 viruses?	For use on Tier 3 viruses?
9480-4	Super Sani-Cloth Wipes	Clorox Company	Wipe	Hard	Yes	No	No

Filter by: Disinfectant Type: Wipe, Surface Type: Hard, For use on Tier 1 viruses?: Yes, For use on Tier 2 viruses?: No, For use on Tier 3 viruses?: No

Virginia Department of Health
Mpox Information Sheet for Healthcare Providers
Updated 1/29/2024

Situation	The 2022 multi-country outbreak caused by Clade II Monkeypox virus (MPXV) affected all U.S. states. U.S. cases have decreased significantly but sporadic cases continue to occur and there is a risk of resurgence of cases. Mpox is spreading mostly through close, intimate contact with someone who has mpox. While anyone can get mpox, most cases have occurred in gay, bisexual, and other men who have sex with men. Providers should be on alert for cases (even in vaccinated persons) and contact their local health department (LHD) if they suspect an mpox case. In December 2023, CDC released an alert about sexual spread of Clade I MPXV in the Democratic Republic of the Congo (DRC). To date, no cases of Clade I virus have been reported in the U.S., but clinicians should alert the LHD to discuss clade testing if a patient presents with mpox symptoms and had recent travel to DRC.
Organism	<ul style="list-style-type: none"> MPXV belongs to genus <i>Orthopoxvirus</i> (Other Orthopoxviruses that can infect humans: variola [smallpox], vaccinia, cowpox virus) Previously affected areas include parts of west and central Africa Two clades: Clade I and Clade II (milder), with subclades Clade Iia and Clade Iib Current outbreak is Clade Iib Animal reservoir unknown; hosts include African rodents and nonhuman primates
Transmission	<ul style="list-style-type: none"> Direct contact with sores, scabs, or body fluids from an infected person or animal Indirect contact with contaminated items Large respiratory droplet transmission during prolonged face-to-face contact
Incubation	3-17 days
Symptoms and Signs	<ul style="list-style-type: none"> Characterized by a specific type of rash (see photos below) <ul style="list-style-type: none"> Both mucosal and cutaneous lesions may occur and can begin on the genitals, anorectal areas, or oral cavity. Cutaneous lesions progress through stages—macules→deep-seated, firm, round papules (umbilicate)→vesicles→pustules→scabs Lesions can be the first or only sign of illness. Presentation can be a few or only a single lesion and may be painful. Rectal symptoms (e.g., purulent or bloody stools, rectal pain, or rectal bleeding) have been frequently reported. Some patients have a prodrome, including malaise, fever, lymphadenopathy, and other symptoms. Respiratory symptoms (e.g., sore throat, nasal congestion, or cough) can occur Illness duration is typically 2-4 weeks Co-infection with HIV and other sexually transmitted infections (STIs) are common
Infectious Period	<ul style="list-style-type: none"> Some people can spread MPXV to others from one to four days before symptoms of mpox appear. People with mpox are infectious until lesions scab, fall off, and a new layer of skin forms. No current evidence that people who never develop symptoms have spread mpox to someone else
When to Suspect Mpox	<ul style="list-style-type: none"> If the patient has a new characteristic rash or if the patient meets one of the epidemiologic criteria listed in the next bullet and there is a high clinical suspicion for mpox Within previous 21 days, patient: <ul style="list-style-type: none"> Reports having contact with a person with a similar appearing rash or who received a diagnosis of confirmed or probable mpox OR Had close or intimate in-person contact with individuals in a social network experiencing mpox activity, this includes men who have sex with men who meet partners through an online website, digital application ("app"), or social event (e.g., a bar or party) OR Traveled outside the U.S. to a country with confirmed cases of mpox or where <i>Monkeypox</i> virus is endemic OR Had contact with a dead or live wild animal or exotic pet that is an African endemic species or used a product derived from such animals (e.g., game meat, creams, lotions, powders, etc.)

INTEGRATING MPOX VACCINATION, TESTING, AND TREATMENT INTO SEXUAL HEALTH AND HIV CLINICAL CARE

VACCINATION



- [VDH Mpox Vaccine Guidance](#)
- Questions and Vaccine Requests: mpxquestions@vdh.virginia.gov
- [CDC Vaccine Considerations](#)

In Virginia, the mpox vaccine JYNNEOS is available to people who are at risk of exposure to mpox or those who have been exposed to mpox. JYNNEOS is available at most local health departments and some private providers. Consider offering mpox vaccine as part of routine care to patients seeking services in STI or HIV clinics or to patients that disclose risk factors for exposure.

JYNNEOS may be administered using the standard FDA-approved regimen (subcutaneous route) or the alternative EUA-authorized regimen (intradermal route) for patients aged 18 and older. Providers should discuss with patients to determine which route of administration each patient prefers.

TESTING



- [CDC Clinical Recognition](#)
- [CDC Testing Patients for Mpox](#)
- [DCLS Testing Instructions](#)

VDH encourages clinicians to have a high level of suspicion for mpox, especially in people with risk factors. Vigorous swabbing of a new rash or lesion is recommended for specimen testing. It is not necessary to unroof or aspirate the lesion. Providers should use commercial laboratories for testing whenever possible.

Public health testing at Virginia state lab (DCLS) is available for uninsured or underinsured people, those at **high risk** of severe disease, healthcare providers, and those living or working in congregate settings. Contact [LHD](#) for more information.

People being tested for mpox who are sexually active should also be tested for HIV and other STIs. If tests are positive, they should be treated.

TREATMENT



- [CDC Clinical Treatment](#)
- [CDC Pain Management](#)
- [CDC clinical consultation service 770-488-7100 or email \[eoevent482@cdc.gov\]\(mailto:eoevent482@cdc.gov\)](#)

Provide supportive care for all patients with mpox based on their needs, including pain management, skin and wound care, maintenance of fluid balance, and treatment of co-occurring STIs, including HIV, or bacterial superinfections.

Inform patients with mpox about the [STOMP Trial](#), a clinical trial evaluating TPOXX (tecovirimat) effectiveness. Patients do not need to have severe disease or be at high risk of severe illness to enroll in the study. Virginia Commonwealth University is a participating site.

Consider TPOXX treatment in people with severe disease, involvement of anatomic areas which might result in serious complications (e.g., scarring or strictures), or people at high risk for severe disease (e.g., those with poorly controlled HIV, immunocompromised people, people with conditions affecting skin integrity, children <1 year of age, or women who are pregnant or breastfeeding).



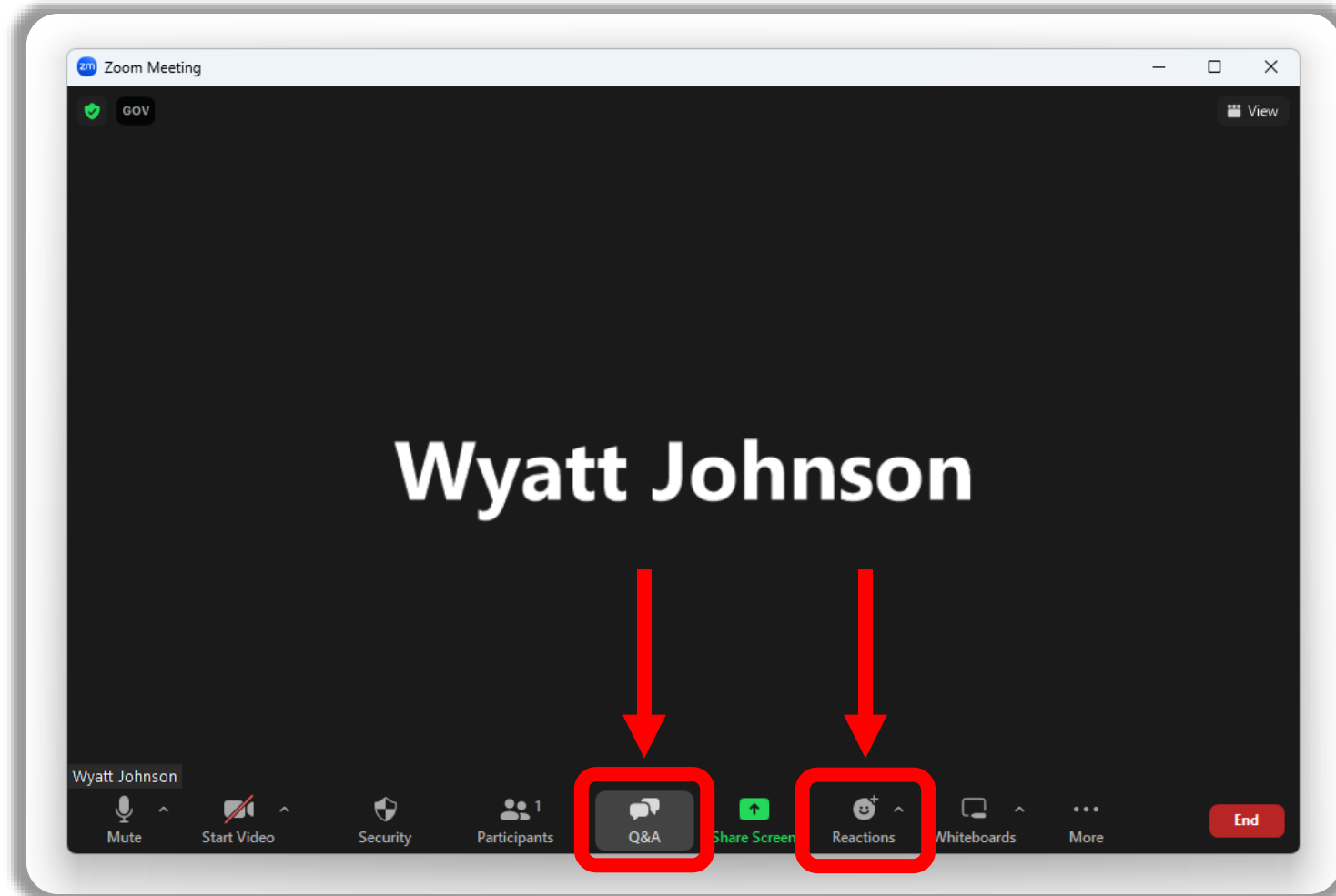
Additional information at CDC's Information for Healthcare Professionals webpage: www.cdc.gov/poxvirus/mpox/clinicians/index.html

Adapted from Michigan Department of Health & Human Services

More Communication Resources Available on our Webpage

- [Let's Talk About Mpox - Greater Than HIV](#)
- [CDC Mpox Communication Resources](#)
- [Public Health Communications Collaborative](#)
- [National Coalition of STD Directors](#)

Q&A



Discussion Question 1

When VDH creates messaging about mpox, how important is it to see yourself or groups that you identify with represented in messaging? Or should messaging be more general and shared with the public at large?

Discussion Question 2

VDH ad campaigns about mpox focused on online and internet advertising and less on radio, TV, and other methods.

What methods would be most effective in the future, and why?

Poll 4

How do you usually find health information that you find trustworthy?

Poll 5

Do you believe that you encountered any misinformation about mpox? If so, what?

Discussion Question 3

Do you have suggestions on how VDH can better address misinformation or disinformation?

**Thank you for your
participation!**

Questions and Feedback

If you have questions or comments, please complete an anonymous survey by scanning the QR code to the right.

Note: An email address is not required, but if you choose to enter your email address for us to respond to you, your survey will no longer be anonymous.



Bonus Discussion Question 1

What do you think people consider when deciding whether or not to get vaccinated?

How can we get more people to get both doses of the vaccine?

Bonus Discussion Question 2

What makes you comfortable discussing your sexual health with a medical provider?

Why?

Bonus Discussion Question 3

How do you think people view the relationship between mpox and STIs?

Bonus Discussion Question 4

What can help groups and communities change their behaviors to prevent the spread of disease?

Bonus Discussion Question 5

In what ways can VDH help community members actively participate in mpox prevention efforts?

What would be most effective?

Bonus Discussion Question 6

What role can friends and family play in promoting mpox awareness and prevention?

What might that look like?

Bonus Discussion Question 7

What has your experience been with mpox and STI messaging from these trusted sources?