Information on Monkeypox Updated 18072022

More information from <u>NHS Inform</u>, <u>Terrence Higgins Trust</u>, and <u>i-base</u>

What is Monkeypox?

Monkeypox is a viral infection. It is related to Smallpox but is not as severe. In the past, infections were seen in central or west Africa and only occasionally in the UK, usually in people who had travelled to Africa.

Since May 2022 some cases have been reported in the UK, Europe and other international countries. Most of the cases in Scotland, the UK and across Europe, have been in gay, bisexual, and other men who have sex with men (GBMSM)

What illness does it cause?

<u>Monkeypox</u> is usually a mild self-limiting illness that causes painful skin lesions, with a high temperature and fever. A blistering rash usually starts 1 to 5 days after other symptoms – the rash may start on the face or in the genital area and may spread to other parts of the body. We know that in the current outbreak of Monkeypox, some people have just a single spot or lesion. Some people have presented with inflammation of the rectum (pain and discharge from the anus – called proctitis), sometimes without any rash.

Why is it affecting GBMSM?

The UK has had one of the largest outbreaks. Most but not all of these cases are in GBMSM who have no link to Africa. Most of the cases seen so far in Scotland are in GBMSM.

It seems that the current cases are linked to GBMSM networks (socialising, apps, dating etc) and this means that numbers are currently higher in this group, even though not all cases are transmitted through sex and sexual contact. Having sex at sex parties, sex-on-premises venues (for example, saunas) or in darkrooms and cruising grounds carries a higher risk of Monkeypox infection.

Is a vaccine available?

Smallpox vaccine gives some protection against Monkeypox (Smallpox was eradicated from the world in 1980). Supplies of the smallpox vaccine in the UK are now being distributed and plans are in place to start vaccinating people at the highest risk as soon as possible. The people who will be offered vaccine first are GBMSM who are at higher risk of infection, including those who have multiple partners, participate in group sex or attend sex on premises venues.

GBMSM living with HIV that are in these groups will be prioritised. NHS staff who work directly with people who have Monkeypox and staff who work in sex on premises venues will also be offered a vaccine.

As more vaccines become available, it will be offered to a wider group of individuals at lower risk. In the next few weeks, the focus will be on giving a first dose of vaccine to as many people as possible. A second dose gives long-term protection and is given at least 28 days

after the first, although it can be delayed for longer than this. A second dose is not needed for people who have previously had a Smallpox vaccination as children (mostly people over the age of 50). Plans for second doses of vaccination are underway

Where can I find more information on Monkeypox vaccination?

More details relating to the vaccination programmes can be found at:

UKHSA Information on vaccination

UKHSA Leaflet on Vaccination

Why haven't I been offered vaccination yet?

Despite some reports in the press and on social media, vaccines for pre-exposure protection has only just become available in Scotland and supplies are limited at this time. first doses of vaccination are starting to be offered to people who are at the highest risk of infection. As further vaccination supplies become available, vaccination will gradually be offered to more people. More information will be available online on who is eligible and how to book appointments for vaccination as soon as clinics are available.

More information on waiting for a vaccination can be found here:

UKHSA Leaflet on Waiting for vaccination

How do I avoid Monkeypox if I haven't been vaccinated?

Until vaccines are more widely available, it is recommended that limiting the number of sexual partners you have if you are sexually active. Reducing or avoiding group sex or sex in saunas or cruising grounds may also reduce your risk.

How is Monkeypox transmitted?

Monkeypox is transmitted by contact with the blisters or ulcers and by respiratory droplets of an infected person. It isn't a sexually transmitted infection, but it is passed on by any close contact, including during sex. Touching, hugging, kissing or sharing a bed without sex could also transmit Monkeypox. Condoms do not offer protection against Monkeypox.

How can the transmission of Monkeypox be reduced?

While Monkeypox is rare, there are things you can do to reduce your risk of getting it:

 avoid close contact, including sexual contact, with someone who is unwell and may have monkeypox

- avoid touching the clothes, bedding or towels of a person who may have a monkeypox rash
- avoid coughs and sneezes from a person who may have monkeypox
- practice careful hand hygiene if visiting or caring for ill friends and relatives who may have monkeypox including washing your hands with soap and water regularly or use an alcohol-based hand sanitiser as you may have come into contact with skin lesions or secretions which might have ended up on your hands

How serious is it?

The current cases in GBMSM in the UK are a milder form of the virus than has been seen in the past. There have been few cases of serious illness in the current outbreak and very few deaths – possibly none - in Europe, even where case numbers are high.

Who is more at risk of becoming severely unwell with Monkeypox?

People who may be more at risk of serious illness with Monkeypox include children, pregnant people and people who have low immunity (immunosuppressed).

Does Monkeypox affect people living with HIV differently?

The current advice is that treatment and care should be the same as for people who are HIV negative. About 40% of all Monkeypox cases in Europe are in people living with HIV. There have been few cases of serious illness in the current outbreak, including in people living with HIV.

Most people living with HIV in the UK are on treatment and well. The risk of severe illness might be greater for people with a CD4 count<200, a recent HIV related illness, or a viral load over 200 copies/mL. BHIVA has released a <u>statement on HIV and Monkeypox</u>.

What should I do if I think I have become infected with Monkeypox?

You should stay home, avoid close contact with others and seek help with medical services via phone until you're assessed.

Phone your GP if:

- you think that you may have monkeypox
- you've been in close contact with someone who might have monkeypox
- You have a new unexplained rash or lesion on your body, especially the face or genitals.
- If your GP is closed, phone 111. In an emergency phone 999.

Phone your local sexual health clinic if:

- you have genital lesions (for example a blister or sore) and:
- you think that you may have monkeypox

• You have a new unexplained rash or lesion on your body, especially the face or genitals.

• you've been in close contact with someone who might have monkeypox

• If your sexual health clinic is closed, phone your GP. If your GP is closed, phone 111. In an emergency phone 999.

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