Clinical alert UPDATE: MONKEYPOX



- While most monkeypox cases diagnosed to date have acquired their infection overseas, there is now evidence of local transmission within Australia and possibly in NSW.
- Since 14 May 2022, there has been a global increase in monkeypox cases reported from countries that are not endemic for monkeypox virus.
- Most cases continue to be in men who have sex with men (MSM)
- Clinicians who suspect monkeypox are advised to immediately contact their local infectious diseases specialist to discuss the case and management.
- For up-to-date information, refer to the <u>NSW Health website</u>.

What is the issue?

- As of 8 July, 7 594 confirmed cases of monkeypox have been reported across multiple non-endemic
 countries. The majority of cases are in the UK and other European countries, however, cases have also
 been reported in North and South America, the Middle East, and the Asia-Pacific region. Cases associated
 with this international outbreak are predominantly men who have sex with men (MSM) with no recent travel
 to an endemic country, indicating local transmission.
- As of 8 July, there have been 14 confirmed cases diagnosed in NSW. All cases report recent travel to Europe, with the exception of two cases: one case likely acquired their infection in QLD, the source of the other case is under investigation with sexual contacts in NSW during the incubation period. Five cases have been notified in Victoria and one in South Australia.

What are the symptoms of monkeypox?

- Monkeypox is usually a self-limiting illness and most people recover within a few weeks.
- Monkeypox symptoms include a prodromal illness of fever, malaise, headache, myalgia and
 lymphadenopathy, followed by a maculopapular body rash. However, the presentation of many cases in this
 outbreak has been atypical without a prodromal illness and pimples or pustules first appearing in the genital
 area or buttocks.

How is monkeypox transmitted in this international outbreak?

- Close skin to skin contact with a person infected with monkeypox (including sexual contact) has been the most important mode of transmission in this outbreak.
- Transmission by respiratory droplets in the prodromal phase and contact with clothing, linen or other contaminated items is also possible.

How to manage a suspect monkeypox case

- Clinicians are asked to look out for signs and symptoms consistent with monkeypox particularly in returned travelers or persons with a clinically compatible rash. A telemedicine consultation is advisable where possible.
- If monkeypox is suspected immediately contact the local ID specialist to discuss the case, testing and
 management. The ID specialist should immediately contact the on-call Westmead Hospital Infectious
 Diseases Specialist on 8890 5555 where they suspect monkeypox. Isolate the patient in a negative pressure
 room, or if not available a single room. Ask the patient to wear a surgical mask while awaiting further advice.
- Notify any suspected case to the public health unit to initiate a public health investigation, contact tracing and control measures.
- Monkeypox has been made <u>notifiable to NSW Health</u> by medical practitioners, pathology laboratories and hospital CEs since 20 May 2022.

Further information

Please contact your local Public Health Unit on 1300 066 055 for more information.

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