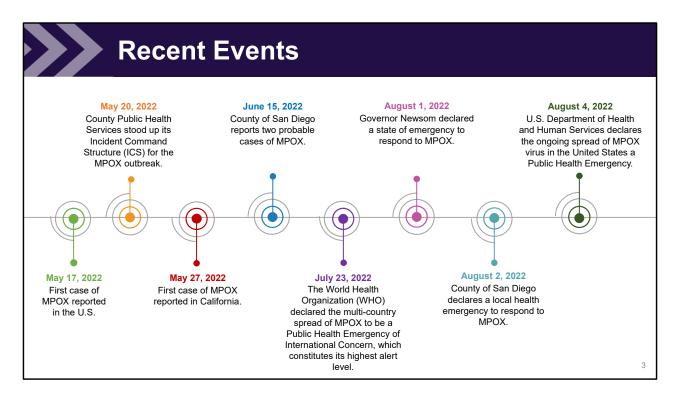


Today we are going to share information about human monkeypox (MPOX) (verbally as 'em-pox') including:

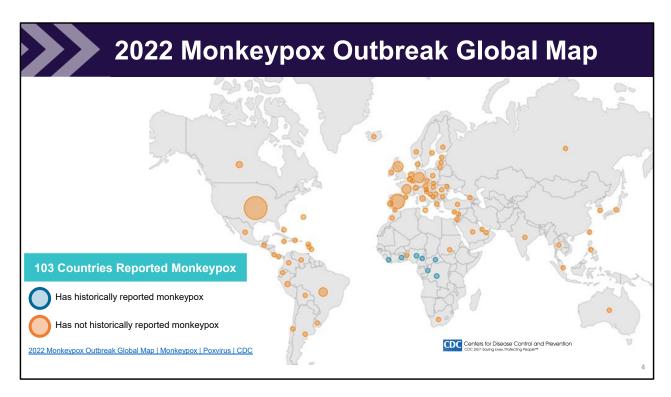
- An overview of the MPOX virus,
- Signs and symptoms,
- Treatment,
- Recommendations,
- JYNNEOS vaccine information,
- Strategies for vaccination and communication, and
- Risk reduction.





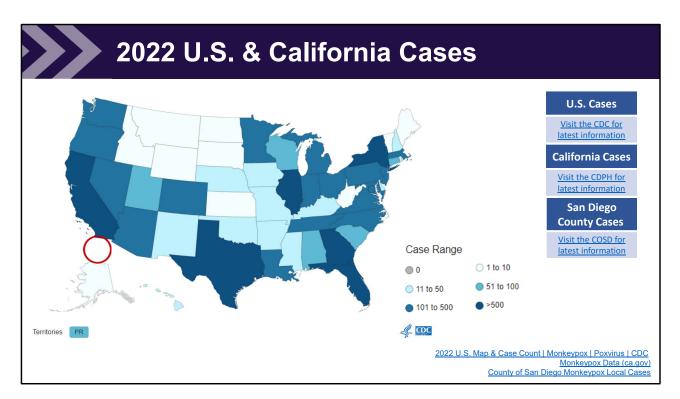
This timeline shows recent events beginning May 17, 2022, to today:

- May 17, 2022: First case of MPOX reported in the U.S.
- May 20, 2022: County Public Health Services stood up its Incident Command Structure (ICS) for the MPOX outbreak.
- May 27, 2022: First case of MPOX reported in California.
- June 15, 2022: County of San Diego reports two probable cases of MPOX.
- July 23, 2022: The World Health Organization (WHO) declared the multi-country spread of MPOX to be a Public Health Emergency of International Concern, which constitutes its highest alert level.
- August 1, 2022: Governor Newsom declared a state of emergency to respond to MPOX.
- August 2, 2022: County of San Diego declares a local health emergency to respond to MPOX.
- August 4, 2022: U.S. Department of Health and Human Services declares the ongoing spread of MPOX virus in the United States a Public Health Emergency.



- As of MONTH DD, YYYYY, more than XX cases of MPOX were reported in XX countries.
- For the most up-to-date data, visit the 2022 Monkeypox
   Outbreak Global Map:

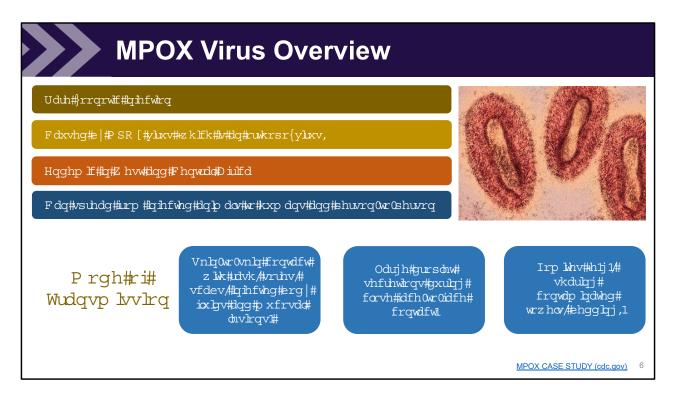
   <u>https://www.cdc.gov/poxvirus/monkeypox/response/2022/world-map.html</u>



• The current case count for the United States, California and San Diego County is shown here.

#### For the latest data, visit:

- CDC: <u>https://www.cdc.gov/poxvirus/monkeypox/response/2022/us-map.html</u>
- CDPH: <u>https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Monkeypox-Data.aspx</u>
- COSD:
  <a href="https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community-epidemiology/dc/human-monkeypox/localcases.html">https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/community-epidemiology/dc/human-monkeypox/localcases.html</a>



Here is an overview of the MPOX virus. MPOX is:

- A rare zoonotic infection.
- Caused by MPOX virus (which is an orthopoxvirus).
- Endemic in West and Central Africa.
- Spread from infected animal to humans and person-to-person.

#### Mode of transmission include:

- Skin-to-skin contact with rash, sores, scabs, infected body fluids and mucosal lesions.
- Large droplet secretions during close face-to-face contact.
- Fomites (e.g., sharing contaminated towels, bedding).

https://www.cdc.gov/poxvirus/monkeypox/about/index.html

# **Addressing 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



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Stop the stigma. Anyone can get MPOX. Blaming any one community may harm public health efforts and cause providers to miss MPOX in other people.

Learn more at gaysexsearch.com



### MPOX Risk, Transmission, and Signs/Symptoms

- Risk to the general population is low but precaution should still be taken especially for children, pregnant women, and the immunocompromised.
- MPOX virus is harder to transmit than other infections like COVID-19.
- The time from infection to symptoms (incubation period) is typically 7 to 14 days but can range from 5 to 21 days.
- Illness typically lasts 2 to 4 weeks.

# KNOW THE SIGNS OF MONKEYPOX (MPX)

Early signs of MPX may include swollen lymph nodes, headache, and fever/chills. Other symptoms may include muscle or backaches, exhaustion, followed by a rash that typically begins on the face and spreads to other parts of the body.







Headache





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Now, let's talk about MPOX signs and symptoms.

### Early signs of MPOX may include:

- Fever,
- · Headache, and
- Swollen lymph nodes.

#### Other symptoms may include:

- Muscle or back aches,
- Chills,
- Exhaustion,
- Followed by a rash that typically begins on the face and spreads to other parts of the body.

#### Know that:

 The risk to the general population is low but precaution should still be taken especially for children, pregnant women, and the immunocompromised.

- MPOX virus is harder to transmit than other infections like COVID-19.
- The time from infection to symptoms (incubation period) is typically 7 to 14 days but can range from 5 to 21 days.
- Illness typically lasts 2 to 4 weeks.

### **MPOX Signs**

- MPOX typically involves a characteristic rash that starts on the face and spreads to other parts of the body. Rash has appeared in the anogenital area first.
- The rash progresses through specific stages from flatten rash, to bumps, to blisters. Palms and soles are often involved.
- The MPOX rash may be confused with more commonly seen infections (e.g., syphilis, chancroid, herpes, and varicella zoster).

# KNOW THE SIGNS OF MONKEYPOX

Rashes, bumps, or blisters may appear in different forms.













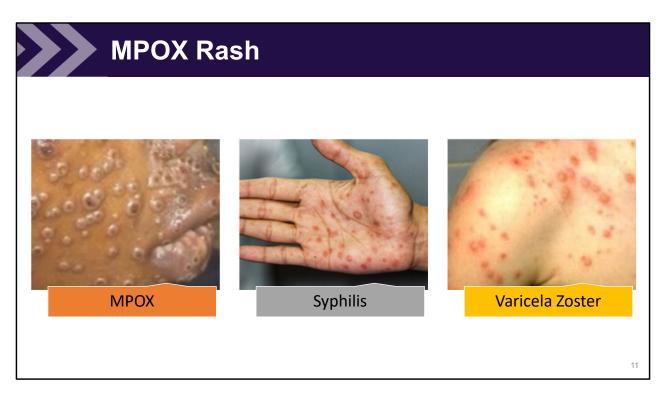






10

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- The MPOX rash may be confused with more commonly seen infections (e.g., syphilis, chancroid, herpes, and varicella zoster).
- Rashes, bumps, or blisters may appear in different forms.



Here you will see MPOX rash unique characteristics that differ from syphilis and varicela zoster.



People with MPOX get a rash that may be located on or near the genitals (penis, testicles, labia, and vagina) or anus and could be on other areas like the hands, feet, chest, face, or mouth.

- The rash will go through several stages, including scabs, before healing.
- The rash can initially look like pimples or blisters and may be painful or itchy.





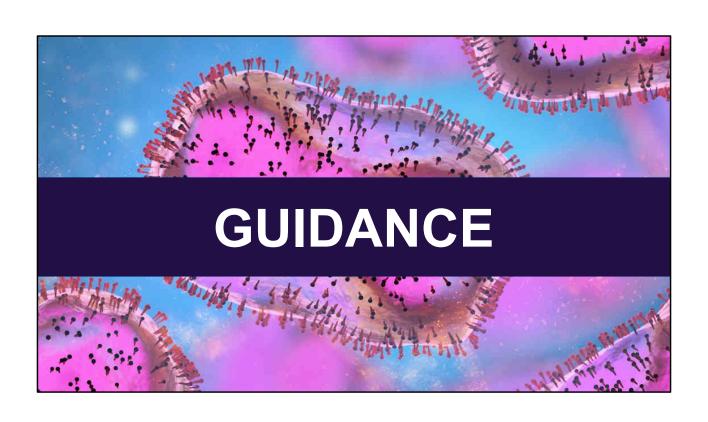


- Tecovirimat is an antiviral medication developed to treat smallpox but CDC has expanded use for MPOX.
  - Also known as TPOXX or ST-246.
- Oral capsule and IV formulations were approved by FDA in July 2018 and May 2022, respectively.
- Indication
  - Tecovirimat is indicated for severe disease and those who are at risk of developing severe disease.

Source: CDC Clinician Outreach and Communication Activity (COCA)

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- The antiviral medication, tecoviramat, can be used for MPOX and obtained from the federal National Strategic Stockpile.
- This treatment is available for severe infections or associated painful lesions and for those who are at risk for developing severe disease.
- Tecovirimat is available as oral capsule and IV formulations and was approved by The Food and Drug Administration in July 2018 and May 2022, respectively.





If you are sick,

- **1. ISOLATE**, stay at home and monitor your symptoms.
- **2. CONTACT** your healthcare provider to get tested, if you have a rash.
- **3. GET TREATMENT**, if needed.
- **4. INFORM CLOSE CONTACT(S)**. Visit www.tellyourpartner.org for anonymous partner notification.



#### Persons with MPOX who live with other people should:

- Isolate outside the home if an uninfected person in your household is at high risk of severe disease.
- Avoid close contact with other people and animals or pets in the home.
- Avoid kissing, hugging, cuddling, sleeping in the same bed, or having sex or other close skin-to-skin contact with other people.
- Stay in a separate room and use a separate bathroom, if possible.
- · Avoid sharing bedding, towels, utensils or cups, and electronics.
- · Wear a respirator or a well-fitting mask when in close contact for more than a brief encounter.
- · Keep skin lesions covered.
- Clean and disinfect frequently touched items, following CDC guidance.
  - · Avoid activities that may put viral particles in the air, like dry dusting, sweeping, and vacuuming.
- Wash hands frequently with soap and water or use an alcohol-based hand sanitizer.
- Avoid use of contact lenses to prevent inadvertent infection of the eve.
- · Avoid shaving lesion-covered areas of the body as this can lead to spread of the virus.

MPOX Home Isolation Guidance for the General Public (ca.gov) 17

The following recommendations apply to people with confirmed MPOX and those with MPOX symptoms while waiting to be evaluated or for test results.

If you are sick and live with other people:

- Isolate outside the home if an uninfected person in your household is at high risk of severe disease.
- Avoid close contact with other people and animals or pets in the home.
  - Avoid kissing, hugging, cuddling, sleeping in the same bed, or having sex or other close skin-to-skin contact with other people.
  - Stay in a separate room and use a separate bathroom, if possible.
  - Avoid sharing bedding, towels, utensils or cups, and electronics.

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- Avoid shaving lesion-covered areas of the body as this can lead to spread of the virus.

https://www.cdc.gov/poxvirus/monkeypox/clinicians/infection-control-home.html

https://www.cdc.gov/poxvirus/monkeypox/pdf/monkeypox-interim-guidance-for-household-disinfection-508.pdf

# **Discontinuation of Isolation**

#### Resume limited activities outside the home when:

- Any fever or respiratory symptoms have been resolved for at least 48 hours; AND
- No new lesions have appeared for at least 48 hours: AND
- Any lesions that cannot be covered, such as those on the face, are fully healed (scabs have fallen off and a fresh layer of skin has formed at the lesion sites).

MPOX Home Isolation Guidance for the General Public (ca.gov) 18

Individuals can end isolation and resume limited activities outside the home when:

- Any fever or respiratory symptoms have been resolved for at least 48 hours; AND
- No new lesions have appeared for at least 48 hours; AND
- Any lesions that cannot be covered, such as those on the face, are fully healed (scabs have fallen off and a fresh layer of skin has formed at the lesion sites).

### **Precautions for Resuming Limited Activities**

Cover any unhealed lesions with clothing or bandages.

Wear a wellfitting respirator or mask at all times when in contact with other people.

Wash hands frequently with soap and water or an alcohol-based hand sanitizer and avoid direct contact with lesions.

Do not share towels or other personal objects with others.

Avoid crowded settings such as bars, clubs, parties, saunas, and bath houses.

Avoid direct skin-to-skin contact or intimate physical contact with others including kissing, cuddling, and sexual contact.

MPOX Home Isolation Guidance for the General Public (ca.gov) 19

Once all of the discontinuation criteria are met, persons with MPOX may resume limited activities outside the home using the following precautions:

- Cover any unhealed lesions with clothing or bandages.
- Wear a well-fitting respirator or mask at all times when in contact with other people.
- Wash hands frequently with soap and water or an alcohol-based hand sanitizer and avoid direct contact with lesions
- Do not share towels or other personal objects with others.
- Avoid crowded settings such as bars, clubs, parties, saunas, and bath houses.
- Avoid direct skin-to-skin contact or intimate physical contact with others including kissing, cuddling, and sexual contact.

### **Return to Work**

Workers may return to non-high-risk workplaces when certain criteria AND all of the following conditions are met:

- Employment does not involve direct physical care or contact with others (e.g., massage therapy, estheticians, sex work);
- · Employment is not in a high-risk setting;\* AND
- · Virtual work is not possible.

If these conditions for return to work are not met or work in a high-risk setting, persons with MPOX should not return to work until their skin lesions are fully healed and other symptoms have been resolved for at least 48 hours.

MPOX Home Isolation Guidance for the General Public (ca.gov) 20

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If these conditions for return to work are not met or work in a highrisk setting, persons with MPOX should not return to work until their skin lesions are fully healed and other symptoms have been resolved for at least 48 hours.

\*High-risk settings include: Homeless shelters, migrant shelters, emergency shelters, and residential drug treatment facilities, Healthcare settings, State and local correctional facilities and detention centers, Long-term care, adult and senior care facilities, and in-home services involving physical care, Childcare and preschool settings that provide care for children from infancy through pre-school, assuming that there will be close physical contact for diapering, toileting, feeding, hygiene and general interaction, K-12 schools and other settings (before/after school programs) that provide care for school-aged children younger than age 8 or older children whose care requires close physical contact, if job duties require direct physical contact with such children.

### **Resume Normal Activities**

Once all skin lesions have healed (i.e., scabs have fallen off and a fresh layer of skin has formed at the lesion sites), and any other symptoms have been resolved for at least 48 hours.

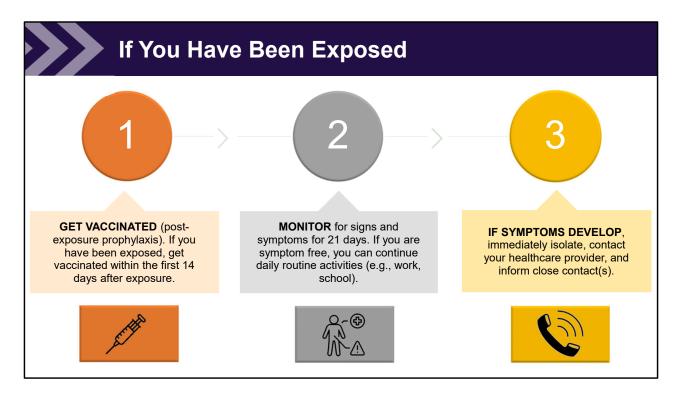
Evidence on MPOX transmission via genital excretions is lacking, and a precautionary approach for the use of condoms during sexual activities for 12 weeks after infection is recommended, even after skin lesions are healed.

MPOX Home Isolation Guidance for the General Public (ca.gov) 21

Resume normal activities once all skin lesions have healed (i.e., scabs have fallen off and a fresh layer of skin has formed at the lesion sites), and any other symptoms have been resolved for at least 48 hours.

Note, evidence on MPOX transmission via genital excretions is lacking, and a precautionary approach for the use of condoms during sexual activities for 12 weeks after infection is recommended, even after skin lesions are healed.





#### If you have been exposed:

- GET VACCINATED (post-exposure prophylaxis). If you have been exposed, get vaccinated within the first 14 days after exposure.
- 2. **MONITOR** for signs and symptoms for 21 days. If you are symptom free, you can continue daily routine activities (e.g., work, school).
- **3. IF SYMPTOMS DEVELOP**, immediately isolate, contact your healthcare provider, and inform close contact(s).



Due to the limited supply, vaccines are prioritized to two categories based on risk:

- Post-exposure Prophylaxis (PEP)
- Post-exposure Prophylaxis (PEP++)

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- Post-exposure Prophylaxis (PEP)
- Post-exposure Prophylaxis (PEP++)

# **Who Should Get Vaccinated?**

Populations currently eligible for PEP include:

 People who have been identified as <u>exposed or potentially exposed to</u> <u>close contacts</u> of confirmed or probable MPOX cases during the case investigation process.

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Considerations-for-Expanded-MPOX-Post-Exposure-Prophylaxis.aspx 25

Populations currently eligible for PEP include:

 People who have been identified as high- or intermediate-risk close contacts of confirmed or probable MPOX cases during the case investigation process.

https://www.cdc.gov/poxvirus/monkeypox/clinicians/monitoring.html https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Consideration s-for-Expanded-MPOX-Post-Exposure-Prophylaxis.aspx

### **Who Should Get Vaccinated?**

#### **Populations** currently eliaible for PEP++ include:

#### Tier I Priority Groups:

- Gay, bisexual, and other men (including cisgender and transgender men) who have sex with men (MSM) or transgender women who meet at least one of the following criteria:
- Have been diagnosed with a bacterial sexually transmitted disease (e.g., chlamydia, gonorrhea, syphilis) in the past 3 months, OR
- · Have engaged in chemsex or group sex with other men, OR
- Have had sex recently with anonymous male partners, OR
- Have attended sex-on-premises venues (e.g., saunas, bathhouses, sex clubs), OR
   Have engaged in survival and/or transactional sex, OR
- Are part of other populations who are at highest risk of MPOX exposure, as identified through local epidemiological investigations.
- Among this group, individuals who are living with HIV (particularly those with CD4 count <200/mm3 or an opportunistic infection) or other conditions that cause immunocompromise should be prioritized for vaccination, including second doses.
- Tier II Priority Groups:
- Gay, bisexual, and other men (including cisgender and transgender men) who have sex with men (MSM) or transgender women who do not meet Tier I criteria but meet one of the following criteria:
- · Have been diagnosed with a bacterial sexually transmitted disease (e.g., chlamydia, gonorrhea, syphilis) between the past 4- 12 months, OR
- · Use or are recommended to use HIV PrEP, OR
- · Are living with HIV and are considered at risk for MPOX exposure

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Considerations-for-Expanded-MPOX-Post-Exposure-Prophylaxis.aspx 26

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  - Are living with HIV and are considered at risk for MPOX exposure.

# MPOX (JYNNEOS) Vaccine: Administration

The JYNNEOS vaccine is given through a shot (injection). The JYNNEOS vaccine can be given in two methods.

- 1. The standard method is a **subcutaneous injection** which is a shot given beneath the skin in the upper arm. This method has been approved for people 18 years or older and is also authorized under an Emergency Use Authorization (EUA) for people under 18 years.
- 2. Under new guidelines from the FDA and CDC, the vaccine can also be given through **intradermal injection**, or in the skin layer underneath the epidermis (which is the upper skin layer) for people 18 years or older. Intradermal injection is typically given in the forearm and requires a smaller amount of vaccine than the subcutaneous injection to create a similar immune response.

The CDC recommends eligible people get two JYNNEOS doses four weeks apart.

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The CDC recommends eligible people get two JYNNEOS doses four weeks apart.

https://www.cdc.gov/poxvirus/monkeypox/considerations-for-

monkeypox-vaccination.html



# **CDC Changes How Vaccine is Administered**

**FDA NEWS RELEASE** 

### Monkeypox Update: FDA Authorizes Emergency Use of JYNNEOS Vaccine to Increase Vaccine Supply

- 08/09/2022: FDA issued EUA that allows for change in how vaccine is given.
  - · Intradermal instead of subcutaneous.
  - Obtain 5 doses from 1-dose vial.
  - Expands national stockpile from 441K to over 2.2M
- · Also, EUA approved to vaccinate high-risk individuals under 18 years (subcutaneous).

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On August, 9, 2022, FDA issued EUA that allows for change in how vaccine is given.

- Intradermal instead of subcutaneous.
- Obtain 5 doses from 1-dose vial.
- Expands national stockpile from 441K to over 2.2M

Also, EUA approved to vaccinate high-risk individuals under 18 years (subcutaneous).

# MPOX (JYNNEOS) Vaccine: Schedule

Two regimens are available for the JYNNEOS vaccine:

- A limited supply of JYNNEOS vaccine, from the strategic national stockpile, was first made available as early as May 25, 2022, for the prevention of MPOX.
- The **standard regimen** involves a subcutaneous (SC) route of administration with an injection volume of 0.5mL. The standard regimen is the FDA-approved dosing regimen. Since August 9, 2022, the standard regimen has been authorized for people aged <18 years under an Emergency Use Authorization.
- In the context of the current national Public Health Emergency (PHE), an alternative regimen may be used for
  people age ≥18 years under an Emergency Use Authorization beginning August 9, 2022. The authorized alternative
  regimen involves an intradermal (ID) route of administration with an injection volume of 0.1mL.

#### Vaccination Schedule and Dosing Regimens for JYNNEOS Vaccine

Alternative regimen  People age ≥18 years  ID  0.1 mL  2  Standard regimen  People age <18 years  Subcut  0.5 mL  2	ıfrp p hqghg# Uhfrp p hqgh	a certificant has a red off
People age ≥18 years         ID         0.1 mL         2           Standard regimen           People age <18 years         Subcut         0.5 mL         2	pehu#ri#grvhv ehwzhhq#uv#	
Standard regimen           People age <18 years         Subcut         0.5 mL         2		
People age <18 years         Subcut         0.5 mL         2	28 days	
Paralla of any and who have a history of	28 days	
People of any age who have a history of Subcut 0.5 mL 2 developing keloid scars	28 days	
<u>JYNNE</u>	NEOS Vaccine Interim Guidance - V	/accine Schedule

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https://www.cdc.gov/poxvirus/monkeypox/interimconsiderations/jynneos-vaccine.html#interim https://www.cdc.gov/poxvirus/monkeypox/clinicians/pediatric.html

### What's In The Vaccine?

#### **Main Ingredients:**

- Non-replicating Orthopoxvirus Weakened live virus from the strain Modified Vaccinia Ankara-Bavarian Nordic
- Salts (Sodium Chloride) Buffers the vaccine to stabilize the pH to match the pH of our bodies

#### **Residual (Very Small) Amounts:**

- Host-cell DNA and Protein
- Benzonase A type of amino acid that assists in the removal of DNA from the virus during the manufacturing process
- Gentaminicin and Ciprofloxacin Antibiotic used during manufacturing to prevent bacterial contamination



JYNNEOS Vaccine Package Insert 30

The JYNNEOS vaccine contains two main ingredients:

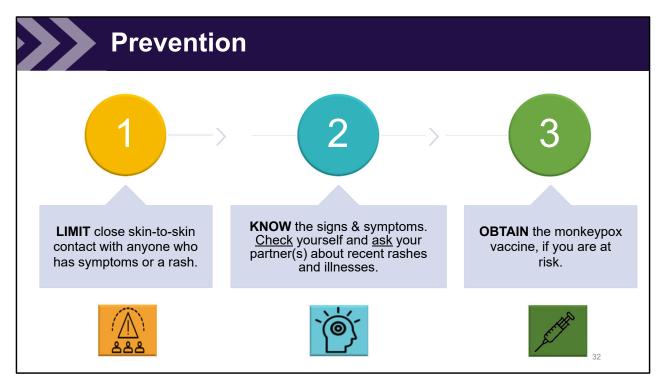
- The weakened, non-replicating orthopoxvirus, and
- Salts to buffer the vaccine to stabilize the pH to match the pH of our bodies.

During the manufacturing process, very very small and harmless amounts of the following may be present:

- Leftover host-cell DNA and protein.
- Benzonase a type of amino acid (amino acids are essential building blocks for protein in our bodies) that assists in the removal of DNA from the virus.
- Gentaminicin and Cuprofloxacin Antibiotic used to prevent bacterial contamination.

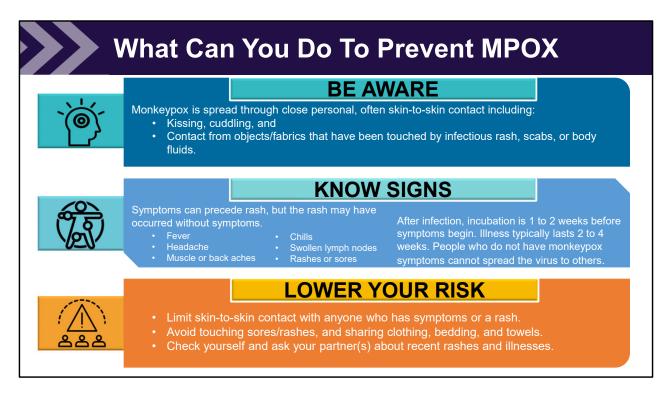
https://www.fda.gov/media/131078/download





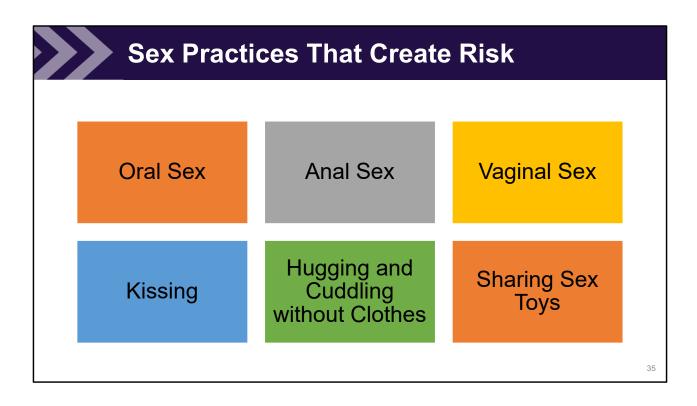
Prevent the spread of MPOX by practicing the following three actions:

- **1. LIMIT** close skin-to-skin contact with anyone who has symptoms or a rash.
- 2. **KNOW** the signs & symptoms. Check yourself and ask your partner(s) about recent rashes and illnesses.
- **3. OBTAIN** the MPOX vaccine, if you are at risk.



- To prevent the community-wide spread of the monkeypox virus, the key strategy is prevention.
- Be aware of the modes of transmission,
- Know the signs and symptoms,
- And limit skin-to-skin contact with anyone who has symptoms or a rash, to lower the risk of contacting the virus.





The most common route of transmission during the 2022 global MPOX outbreak is direct (i.e., skin-to-skin) contact with MPOX lesions, including but not limited to contact that occurs during sexual activity and close contact within households.

Sex practices that increase risk of transmission include:

- Oral sex,
- · Anal sex,
- · Vaginal sex,
- Kissing,
- Hugging and cuddling without clothes, and
- · Sharing sex toys.

## Reduce the number of sex partners Reduce or avoid anonymous sex encounters Avoid group sex spaces Talk to your sex partners Condoms

Following these recommended prevention practices related to sexual activity can help protect you and your community:

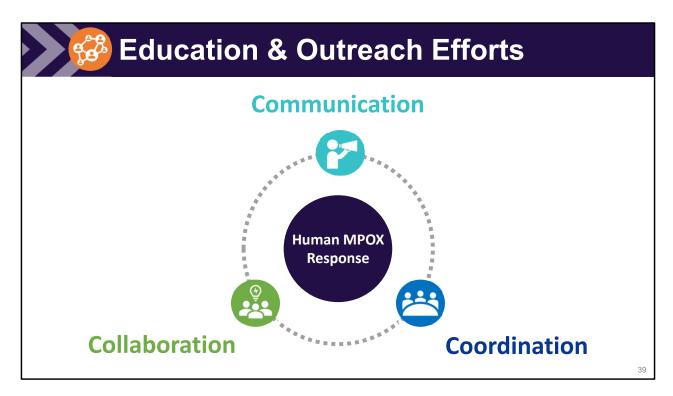
- Reduce the number of sex partners.
- Reduce or avoid anonymous sex encounters.
- · Avoid group sex spaces.
- Talk to you sex partners.
- · Wear condoms.



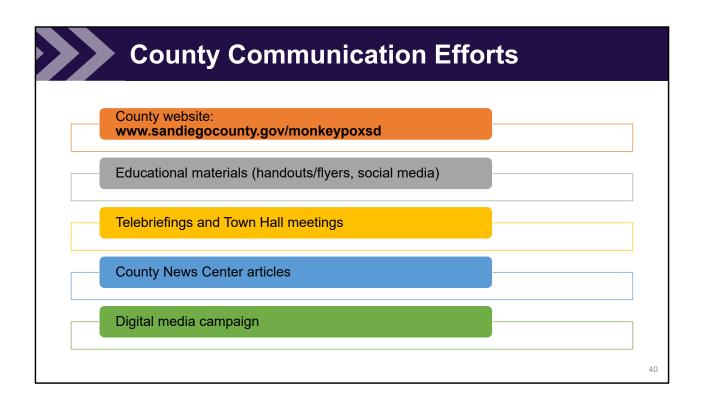
If we use all the tools we have, we can keep our loved ones, communities, schools, and workplaces safe.

Be aware. Know the signs. Reduce the spread.





- At the end of May, the County of San Diego launched its MPOX response and quickly began to formulate its response strategy leveraging our infrastructure and lessons learned from our COVID-19 response.
- In the next remaining slides, we will review the County's actions thus far related to education and outreach efforts.
- It is important to note that even before the first local cases in June, the County's public education campaign had provided information using different modes of communication, and coordination and collaboration efforts with local County partners to prevent the spread of the virus were underway.







 We also promote and educate via digital media to reach those at most risk for MPOX by advertising awareness and prevention information and resources through various social apps.

## **Coordination and Collaboration Efforts**

Text alert system (COSD MONKEYPOX to 468-311)

Coordinated with all **Libraries** to add MPOX link to their websites & post flyers.

Assembled & Distributed 1,000 Hygiene Kits to include band-aids and MPOX flyers.

Amended community contracts to conduct **outreach**, **health education**, **and risk reduction** at restaurants, bars, clubs, and other identified locations.

Developing contracts with healthcare providers to provide MPOX services for the under/non-insured, specifically Testing, TPOXX Treatment, and Foot Team Outreach and Vaccinations.

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As part of the Coordination and Collaboration efforts, the County has:

- Established a text alert system for interested individuals to receive notifications about MPOX (text COSD MONKEYPOX to 468-311).
- Coordinated with all Libraries to add the Mpox link to their websites & post flyers their sites.
- Conducted several Community Town Halls.
- Assembled & Distributed 1,000 Hygiene Kits to include bandaids and Mpox flyers.
- Amended community contracts to conduct outreach, health

- education, and risk reduction at restaurants, bars, clubs, and other identified locations.
- And we are in the process of developing contracts with healthcare providers to provide Mpox services for the under/noninsured, specifically for Testing, TPOXX Treatment, and Foot Team Outreach and Vaccinations.

