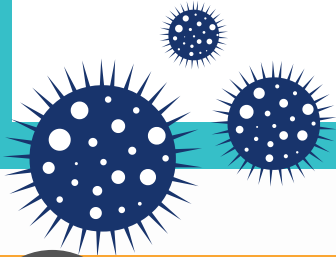


Human Monkeypox (MPX)

MYTHS & FACTS

MYTH #1

MPX is a new virus.



FACT!

MPX was first identified in 1958 in colonies of monkeys kept for research. The first human case of MPX was recorded in 1970. The last U.S. MPX outbreak in 2003 was due to animal-to-human transmission.

MYTH #2

MPX is similar to chickenpox.

FACT!

While the chickenpox rash may look similar to a MPX rash, they are not related. Because chickenpox is caused by a virus that is unrelated to MPX, having had chickenpox (varicella) infection or vaccine in the past will not protect you from MPX.

MYTH #3

MPX only affects gay and bisexual men.



FACT!

Anyone can get MPX. However, during the current outbreak, cisgender males who are gay, bisexual, or same-gender loving have been affected the most. At this time, MPX has mostly spread between people who have had close physical contact with a person who had the virus.



For updates, text COSD MONKEYPOX to 468-311. For resources, visit:

SanDiegoCounty.gov/monkeypoxSD



MPX MYTHS & FACTS

MYTH #4

MPX is a sexually transmitted infection (STI).

FACT!

While MPX is not currently classified as an STI, it is transmitted through close physical contact that includes sexual activity. MPX also spreads through other close physical contact (e.g., hugging, kissing, cuddling), but especially skin-to-skin contact with an infected individual. The MPX rash may look like an STI and can appear on the genitals.

MYTH #5

MPX can be spread from a handshake or touching a door knob.

FACT!

MPX is primarily spread through close, prolonged skin-to-skin contact. MPX does not spread well through indirect exposures, such as shaking hands or touching door knobs.



MYTH #6

There are no treatments or vaccines for MPX.

FACT!

Antiviral drugs and vaccines used to treat and prevent smallpox are effective against MPX.

Vaccines are available and in limited supply. The County is following CDPH guidelines for prioritizing those who have been exposed to MPX and who have certain risk factors. The vaccine may prevent infection if given within four days or lessen symptoms within 14 days after exposure. If symptoms begin, the vaccine will not change the course of the illness. The vaccine is not a treatment for MPX.



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