



To: CAHAN San Diego Participants

Date: May 16, 2023

From: Public Health Services

Health Advisory Update #6: Potential Risk for Mpox Resurgence

Key Messages

- The Chicago Department of Public Health has identified a cluster of 12 confirmed cases and one probable case of mpox (formerly monkeypox) from April 17, 2023, to May 5, 2023.
- Nine (69%) of the 13 cases reported in Chicago had received two doses of the JYNNEOS mpox vaccine.
- Although vaccine-induced immunity is not complete, vaccination of persons who are vulnerable to mpox remains the most important strategy to prevent new infections and may decrease severity of illness in cases of breakthrough infection.
- Providers should be on alert for new cases of mpox and, in addition to encouraging vaccination for people at risk, should ensure availability of mpox evaluation, testing, and/or treatment when clinically indicated.
- The County of San Diego Sexually Transmitted Diseases (STD) clinics accept referrals for mpox vaccination, evaluation, testing, and treatment, which can be arranged by calling (619) 692-5500.

Situation

In response to a recent cluster of mpox cases in Chicago and in anticipation of large gatherings for festivals and other events during the summer months, the Centers for Disease Control and Prevention (CDC) and California Department of Public Health (CDPH) have issued health alerts calling for vigilance and vaccination of vulnerable persons [\[1\]\[2\]\[3\]](#).

Background

In the United States (U.S.), cases of mpox have declined since peaking in August 2022, but the outbreak is not over. CDC continues to receive reports of cases that reflect ongoing community transmission in the U.S. and internationally. This week, CDC and local partners are investigating a cluster of 12 confirmed cases and one probable case of mpox that were reported in the Chicago area, from April 17 to May 5, 2023. All cases were among symptomatic men, and none of the patients have been hospitalized. Nine (69%) of the 13 cases were among men who had received two JYNNEOS vaccine doses. Confirmed cases were in nine (69%) non-Hispanic White men, two (15%) non-Hispanic Black men, and two (15%) Asian men, and the median age was 34 years (range 24-46 years). Travel history was available for nine cases, and four had recently traveled (New York City, New Orleans, and Mexico) [\[1\]\[2\]\[3\]](#).

For further information and for detailed clinical guidance, please see the [CDC alert](#) released on May 15, 2023. CDC has also scheduled a Clinician Outreach and Communication Activity (COCA) call, on May 18, 2023, at 11am PST: [“Mpox Update: Stay Up to Date on Testing, Treatment, and Vaccination.”](#)

As of April 29, 2023, a total of 474 mpox cases have been reported in San Diego County, including 18 hospitalizations and no deaths. Consistent with national trends, after a peak of 60 cases, during the week ending on August 6, 2022, cases declined significantly. A total of five mpox cases have been reported to date, in 2023. Further information is available on the [County of San Diego mpox webpage](#).

Actions Requested

1. **Offer** JYNNEOS vaccine to people with high potential for exposure to mpox who are unvaccinated or incompletely vaccinated. Vaccine also can be given as post-exposure prophylaxis (PEP) both to people with known and presumed exposure to the mpox virus. Both subcutaneous and intradermal routes of administration are acceptable. Currently, there is no recommendation for booster doses of JYNNEOS vaccine for persons who have received two doses.
2. **Perform** a thorough patient history, including a [detailed sexual history](#), and complete physical examination to assess for possible mpox exposure or risk factors for exposure and to evaluate symptoms suggestive of mpox.
3. **Consider** mpox when determining the cause of a diffuse or localized rash, including in patients who were previously infected with mpox or vaccinated against mpox.
4. **Collect** specimens from lesions, including those inside the mouth, anus, or vagina, and **test** for mpox virus. Test for other sexually transmitted infections (STIs) that can cause lesions (e.g., syphilis, genital herpes). Screen for gonorrhea, chlamydia, and HIV in accordance with [national guidelines](#).
5. **Provide** supportive care and pain control to all patients who are diagnosed with mpox and **treat** patients who have severe disease and/or are at increased risk for complications with tecovirimat. Consider enrollment in the [AIDS Clinical Trials Group \(ACTG\) Study of Tecovirimat for Human Monkeypox Virus \(STOMP\)](#), if recommending oral tecovirimat to a patient.
6. **Educate** patients at increased risk of mpox about preventive measures, including vaccine and [other precautions](#) that they can take when attending large gatherings and during sexual intercourse.
7. **Report** suspected cases of mpox to the County Epidemiology Unit within one working day using a Confidential Morbidity Report faxed to (858) 715-6458 or sent by secure e-mail to epi-cdreporting.hhsa@sdcountry.ca.gov.

Resources

[Interim Clinical Considerations for Use of JYNNEOS and ACAM2000 Vaccines during the 2022 U.S. Mpox Outbreak \(CDC\)](#)
[Considerations for Mpox Vaccination in California \(CDPH\)](#)
[Mpox Clinical Guidance \(CDC\)](#)
[Tecovirimat Treatment Considerations \(CDC\)](#)
[ACTG STOMP Trial](#)
[County of San Diego Mpox Website](#)

Thank you for your participation.

CAHAN San Diego

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