

To: CAHAN San Diego Participants

Date: June 10, 2022

From: Public Health Services

Health Advisory: Meningococcal Infections and Monkeypox in Men who Have Sex with Men

Key Messages

- The Centers for Disease Control and Prevention (CDC) has reported a large outbreak of invasive meningococcal disease (IMD) primarily among gay, bisexual, and other men who have sex with men (MSM) in Florida.
- All MSM, regardless of HIV status, should receive at least one dose of meningococcal conjugate (MenACWY) vaccine. A booster dose should be considered for MSM who received MenACWY vaccine ≥ 5 years ago.
- In addition, cases of human monkeypox have been identified among men in the United States with no travel history but who have had close or intimate in-person contact with other men.
- Healthcare providers should maintain a high index of suspicion for monkeypox in persons presenting with an appropriate exposure history and rash. Presenting rashes have not had the classic appearance in U.S. cases and may be confused with other sexually transmitted infections such as secondary syphilis.
- Healthcare providers should raise awareness of these two diseases and recommend prevention strategies.

Situation

This health advisory informs local healthcare personnel about an ongoing outbreak of invasive meningococcal disease (IMD), primarily affecting men who have sex with men (MSM), in Florida, as well as the continued increased risk of monkeypox transmission during close, intimate contact. These infections can affect any population engaging in close contact. However, in anticipation of large gatherings during Pride month and given <u>previous outbreaks</u> that have occurred in MSM, outreach is recommended to increase awareness and prevent these infections.

Background

Invasive meningococcal disease

In April 2022, CDC <u>reported</u> a large, ongoing outbreak of serogroup C, invasive meningococcal disease (IMD) in Florida. The outbreak is primarily among MSM, including those living with HIV. This outbreak is mostly affecting people who live in Florida but has also affected some people who have traveled to Florida.

On June 6, 2022, the California Department of Public Health (CDPH) issued a health advisory with <u>recommendations</u> <u>for meningococcal vaccination</u>. Due to the ongoing outbreak in Florida and in anticipation of crowded gatherings associated with upcoming Pride events, there is a heightened risk of IMD among gay, bisexual, and other MSM. Because meningococcal vaccine-induced immunity wanes, a booster dose should be considered for MSM previously vaccinated ≥ 5 years ago with ongoing exposure. Adults living with HIV who were vaccinated with a two-dose, primary series ≥ 5 years ago should receive a single booster dose. Meningococcal vaccines can be given at the same time as a COVID-19 vaccine.

Effective antibiotics should be administered to patients promptly upon suspicion of IMD. However, CDC has reported multiple cases of penicillin- and ciprofloxacin-resistant meningococcal infection in the U.S., including a recent case in California. Providers should order antimicrobial susceptibility testing (AST) on all meningococcal isolates to direct therapy. AST may also help inform post exposure prophylaxis (PEP) decisions; however, this should not delay initiation of PEP with ciprofloxacin, rifampin, or ceftriaxone.

Monkeypox

On May 20, 2022, CDC issued a health alert on human cases of monkeypox reported in multiple countries where monkeypox is not endemic, including the U.S. CDPH followed up with a health alert detailing the exposure risk and testing guidance for California. As of June 9, 2022, 45 confirmed cases have been reported in the U.S. CDPH reports eight probable or confirmed cases in California. Many recent cases have presented with anogenital lesions and without the typical prodrome symptoms and, therefore, could be easily mistaken for more common infections (e.g., secondary syphilis, genital herpes, varicella zoster virus). Coinfections of monkeypox and sexually transmitted infections have occurred.

Monkeypox spreads between people primarily through direct contact with infectious sores, scabs, or body fluids. It also can be spread by respiratory secretions during prolonged, face-to-face contact. Monkeypox can spread during intimate contact between people, including during sex, as well as activities like kissing, cuddling, or touching parts of the body with monkeypox sores. CDC urges healthcare providers in the U.S. to be alert for patients who have rash illnesses consistent with monkeypox.

Local situation

As of June 9, 2022, no cases of IMD associated with the Florida outbreak, nor confirmed cases of monkeypox, have been identified in San Diego County.

Actions Requested

- 1) Stay up to date with current Meningococcal Vaccination Recommendations which include vaccination of:
 - a) All persons living with HIV (≥2 months of age) who should receive two doses of MenACWY vaccine (Menveo® or Menactra®), 8-12 weeks apart, as their primary series.
 - b) All MSM, regardless of HIV serostatus, should receive at least one dose of MenACWY vaccine (Menveo® or Menactra®). Because meningococcal vaccine induced immunity wanes, a booster dose is recommended for those with ongoing risk of exposure whose last dose of MenACWY was ≥ 5 years ago.
 - c) Consider administering MenACWY vaccine at a COVID-19 vaccine visit. COVID-19 vaccine may be administered without regard to timing of other vaccines. See <u>Coadministration of COVID-19 vaccines with other vaccines</u>.
- 2) In addition to the above, inform persons living with HIV and MSM to take the following steps to reduce the risk of IMD:
 - a) Avoid sharing drinks, cigarettes, or other smoking equipment.
 - b) Avoid contact with saliva or other fluids from the mouth or nose of other persons.
 - c) Condoms protect against sexually transmitted diseases but may not reduce the risk of meningococcal disease.
- 3) Maintain a high index of suspicion for IMD when evaluating patients with fever and petechial or purpuric rash.
- 4) Consider monkeypox when evaluating rashes, especially in the genital area.
 - a) Screen for risk factors including travel and intimate contact with someone having a similar rash. For suspect monkeypox cases call before collecting/submitting specimens for testing. Specimen collection instructions are found here.

5) Report suspected cases of IMD and monkeypox immediately by telephone to the San Diego County Epidemiology Unit, by calling 619-692-8499 (8 am to 5 pm, Monday through Friday); 858-565-5255 (after hours).

Resources

Meningococcal Disease | CDC

Meningococcal Disease: Outbreaks Serogroups A, C, W, and Y. | CDC

Serogroup A, C, W, Y Meningococcal Vaccines (MenACWY and MPSV4): What you need to know | CDC

Clinical Recognition of Monkeypox | CDC

Treatment of Monkeypox | CDC

Social Gatherings, Safer Sex and Monkeypox | CDC

STD Control Branch - MSM Toolkit | CDPH

Human Monkeypox Health Alert 5-23-22 | San Diego County

Thank you for your participation.

CAHAN San Diego

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Urgent Phone for pm/weekends/holidays: (858) 565-5255

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