

NEW YORK STATE AND NEW YORK CITY HEALTH DEPARTMENTS HEALTH CARE PROVIDER WEBINAR

MONKEYPOX UPDATES

August 25, 2022



Department
of Health



Eugene P. Heslin, MD, FAAFP
First Deputy Commissioner and
Chief Medical Officer
New York State Department of Health

Mary Foote, MD, MPH
Medical Director / Healthcare Systems Support Branch Director
New York City Department of Health and Mental Hygiene

The information presented is based on our knowledge as of 8/24/22 and is subject to change

Agenda

- Updates on the current monkeypox virus (MPV) outbreak
- Journal articles of interest
- Pediatric considerations
- EUA to expand access to JYNNEOS vaccine
- Resources

Updates on the current outbreak

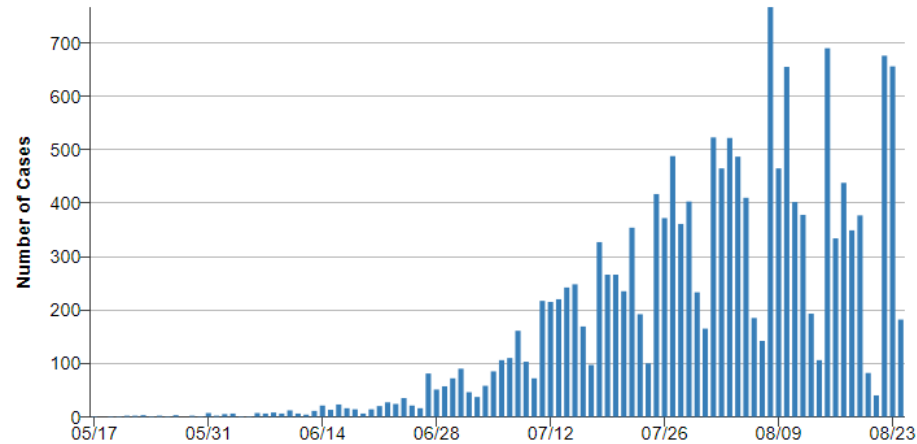
SITUATION REPORT IN NEW YORK STATE

As of August 23, 2022

NEW YORK STATE – 3,073 CASES

- **2,885** in New York City
- 4 in Albany County
- 1 in Broome County
- 1 in Chemung County
- 2 in Columbia County
- 1 in Delaware County
- 9 in Dutchess County
- 11 in Erie County
- 1 in Greene County
- 7 in Monroe County
- 36 in Nassau County
- 2 in Niagara County
- 1 in Onondaga County
- 8 in Orange County
- 2 in Putnam County
- 7 in Rockland County
- 1 in Schenectady County
- 1 in St Lawrence County
- 43 in Suffolk County
- 3 in Sullivan County
- 1 in Tioga County
- 3 in Tompkins County
- 2 in Ulster County
- 41 in Westchester County

U.S. – 16,603 CASES



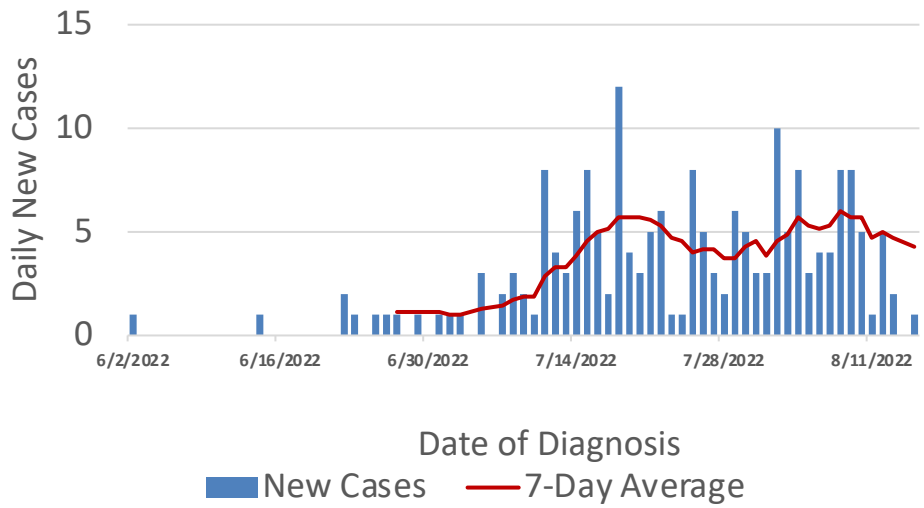
[U.S. Monkeypox Case Trends Reported to CDC | Monkeypox | Poxvirus | CDC](#)

<https://www1.nyc.gov/site/doh/health/health-topics/monkeypox.page>

<https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/>

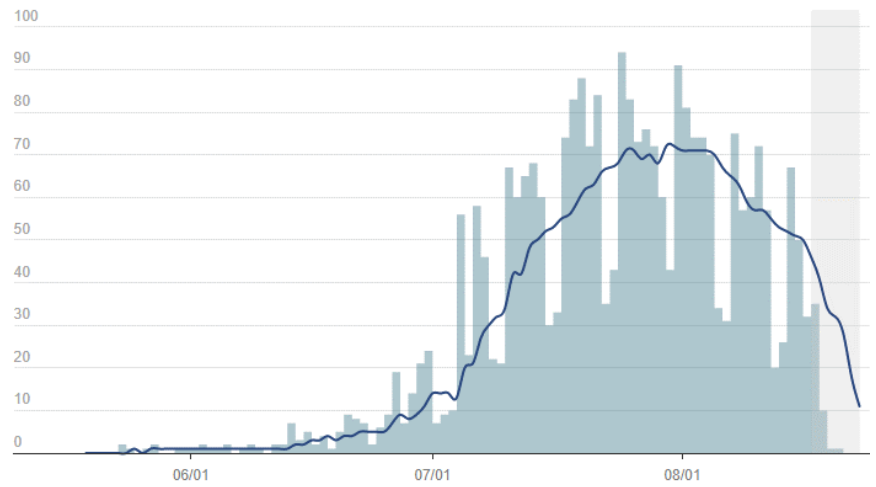
NYS and NYC Monkeypox Data Pages

Daily New Cases in NYS (excluding NYC)



Daily New Cases in NYC

TOTAL = 2,885



[Monkeypox Data - NYC Health](https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/)

<https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/>

NYS and NYC Monkeypox Data Page Summary

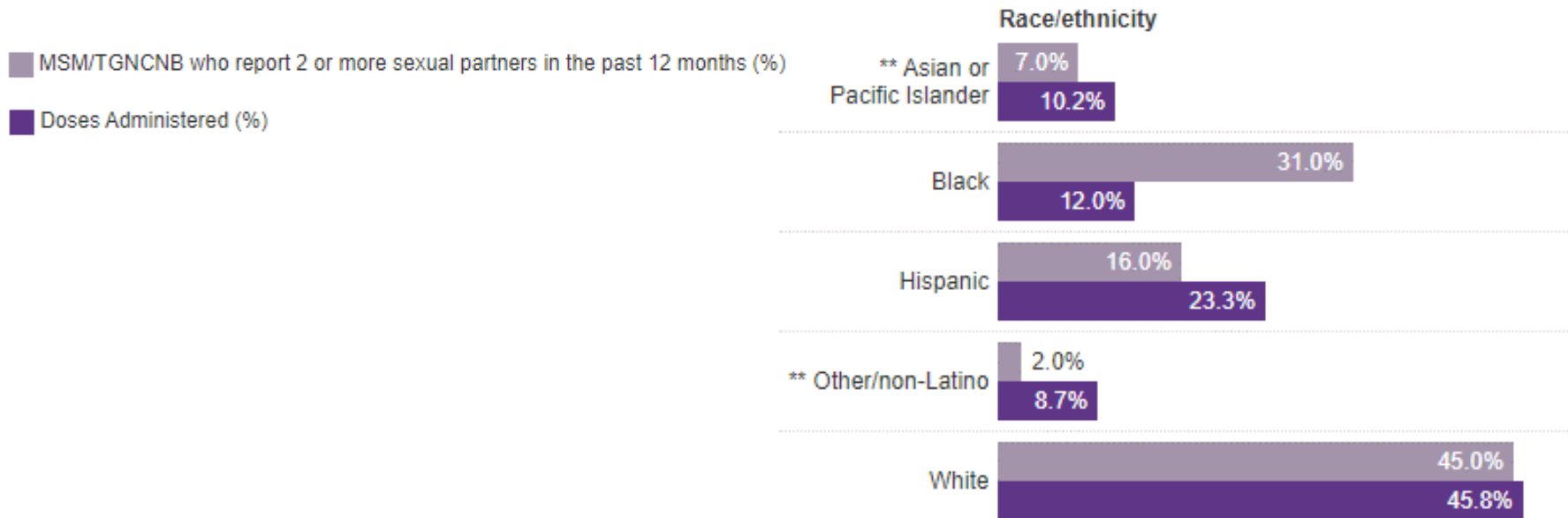
- Continues to primarily be reported among MSM between the ages 18 to 44 years
 - Smaller numbers among persons 45 years and older
 - Two pediatric cases
- For race and ethnicity
 - NYS has higher proportion of cases among people who are White and Latino compared to people who are Black
 - NYC has higher proportion of cases among people who are Latino compared to people who are White or Black
- Few reports of cases requiring hospitalization
- No healthcare-associated cases among health care workers

[Monkeypox Data - NYC Health](https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/)

<https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/>

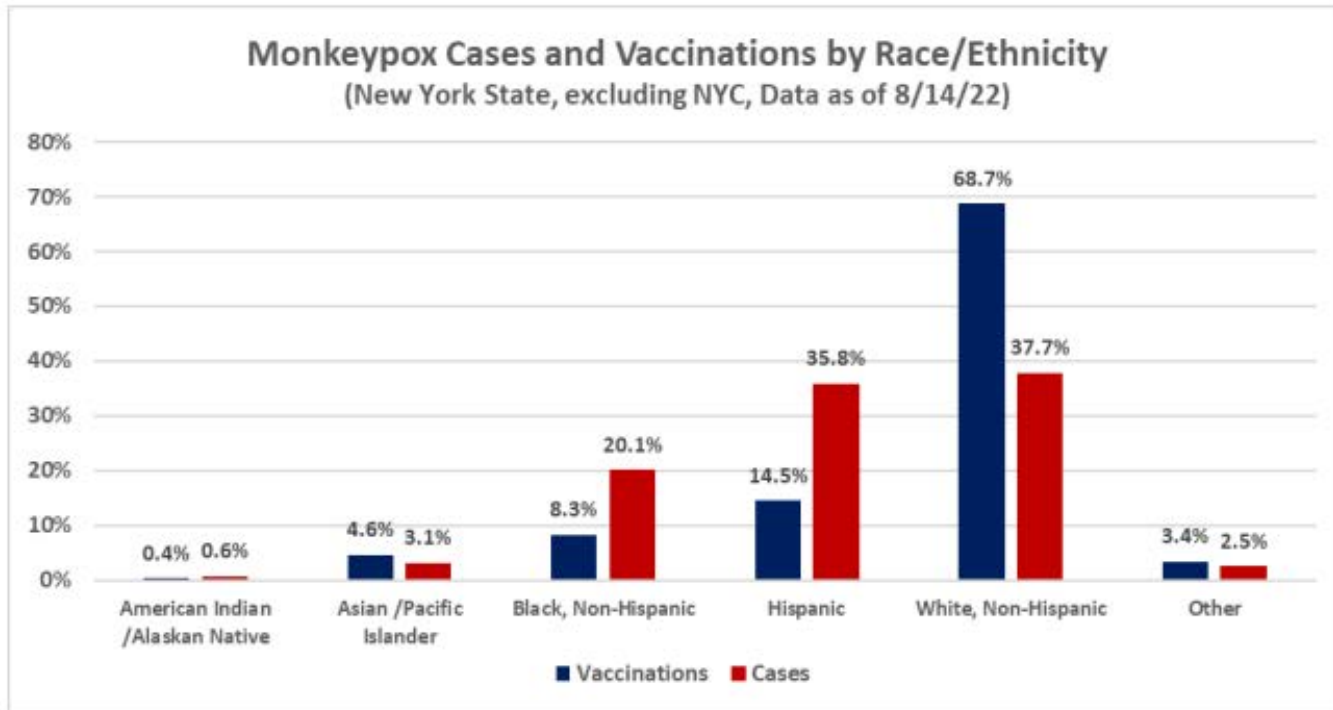
New York City Monkeypox Vaccination Data

[Monkeypox Data page](#)



New York State Monkeypox Vaccination Data

[Monkeypox \(ny.gov\)](https://www.ny.gov/newsroom/monkeypox-vaccination-data)



Ensuring Equitable Access to Vaccine

- Additional doses administered to people referred by community partner organizations and health care providers serving New Yorkers within prioritized populations at elevated risk of infection, and through direct enrollment at community events
- Scheduled appointments available at:
 - The Livonia and The Jefferson (Brooklyn), Long Island City (Queens), NYC Health + Hospitals: Kings (Brooklyn) and Gotham Health, Gouverneur (Manhattan)
- AIDS Institute community outreach(Supported by New York State) Expanded vaccine outreach
 - Working with six AIDS Institute providers focusing on equity lens, with direct patient outreach
 - Focused Vaccine clinics Communities: 3 in Southern tier, Finger Lakes, Mohawk Valley, and Long Island (All outside of New York City)
- NYC granting \$5mil funding for CBOs to promote vaccination equity

NEW - CDC Monkeypox Data Pages

Laboratory Testing Data

Case Demographics & Symptoms

TPOXX Patient Data

Behavioral Survey

- Monkeypox
- About Monkeypox +
- 2022 Outbreak Cases & Data -
- 2022 U.S. Map & Case Count
- U.S. Case Trends
- 2022 Global Map & Case Count
- Laboratory Testing Data**
- Case Demographics & Symptoms
- TPOXX Patient Data
- Behavioral Survey
- What CDC is Doing
- Technical Report
- Past U.S. Cases & Outbreaks
- Signs & Symptoms
- Testing Basics
- How It Spreads
- Prevention +

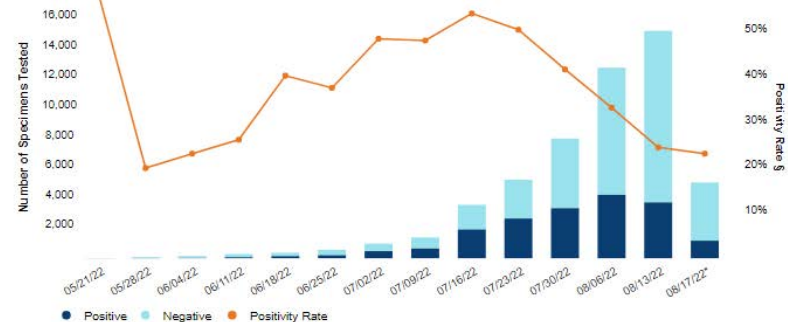
Non-Variola Orthopoxvirus and Monkeypox Virus Laboratory Testing Data

Data as of 17 Aug 2022 2:00 PM EDT

Print

Total Specimens Tested	Cumulative Positivity Rate	Capacity [†] Available
57,804	35.0%	79.3%

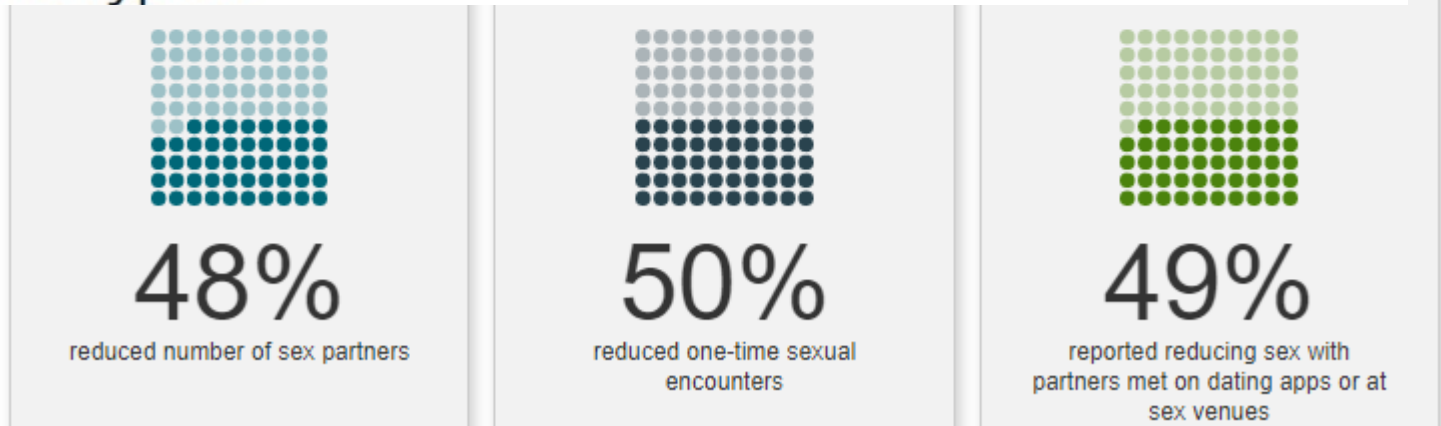
Non-variola orthopox/monkeypox testing from public health and select commercial laboratories [†]



NEW - CDC Monkeypox Data Pages

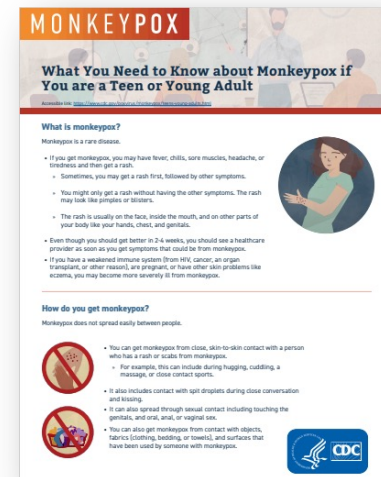
Impact of Monkeypox Outbreak on Select Behaviors

Gay, bisexual, and other men who have sex with men are taking steps to protect themselves and their partners from monkeypox.



Children and Adolescents


- Small number of pediatric patients with MPV infection
- Be judicious when considering MPV testing for pediatric patients
- Many causes of rash in pediatric patients
- Avoid testing when there is no plausible risk of exposure and there is a low suspicion for MPV disease – unless there is a characteristic lesion present
- The decision to test can have a broad impact on children, adolescents and their families
 - Results may take several days possibly resulting in missed school, work, or other activities
 - Stigmatization may affect mental health



[What You Need to Know about Monkeypox if You are a Teen or Young Adult \(cdc.gov\)](https://www.cdc.gov/media/releases/2022/s0823-monkeypox.html)

Testing Guidance

- Anecdotal reports of increasing number of false positive test results
 - All lab types (state and local public health laboratories, commercial and academic)
 - Pre-test probability low if testing people unlikely to have disease resulting in more false positive results
 - Cross contamination possible, check PCR CT values

MONKEYPOX


Testing Patients for Monkeypox

What lesion specimens to collect

- Collect lesion specimens for initial monkeypox testing at Laboratory Response Network (LRN) laboratories located within your public health department or at an authorized commercial laboratory.
- Submission material is recommended.
- Contact the laboratory, LRN or commercial for specific acceptable specimen type.
- For further characterization of a specimen at CDC, three types of specimens are accepted.
 - Dry swabs of lesion material.
 - Swabs of lesion material in viral transport media (VTM).
 - Lesion crusts.


How to collect lesion specimens

1. Wear appropriate personal protective equipment (PPE).
2. Collect two swabs from each lesion, preferably from different locations on the body or from lesions which differ in appearance.
 - Use sterile, dry, synthetic swabs (including, but not limited to polyester, nylon, or Dacron swabs) with a plastic shaft, or other equivalent shaft. Any type of shaft is acceptable as long as it can be broken or cut.
 - Do not use cotton swabs.

3. Generally, with vigorous swabbing, sufficient monkeypox virus DNA is present on the surface of a lesion, and you don't need to de-roof the lesion before swabbing. For each swab into a separate container, either:
 - By using a dry or cutting the end of each swab's applicator (ins 1.5- or 2-mL screw-capped tube with 0.5 or 1-mL other sterile tube) or
 - By cutting the entire swab in a sterile container that has a gasket seal. Use a plastic container instead of a glass container, when possible.

How to ship specimens

- Specimens can be shipped as UN 3373 Biological Substance, Category B.
- Specimens should first be tested by an LRN or authorized commercial laboratory unless you are authorized to send specimens directly to CDC.
- If you are authorized to send specimens directly to CDC, or if you are sending specimens to CDC for viral characterization:
 - Store refrigerated (2-8°C) or frozen (-20°C or lower) within an hour of collection.
 - Ship specimens on dry ice, when possible. Specimens received outside of acceptable temperature ranges will be rejected.
 - Include an electronic Global File Accessioning Template (GFAT) form and ensure that each specimen is labeled with a unique identifier (GFAT).
 - If more than 20 specimens are being submitted to CDC, a [CDC GFAT form](https://www.cdc.gov/monkeypox) for each specimen may be submitted instead of GFAT.
- Please include a printed manifest of your specimens with your shipment.
- Email the GFAT form to Monkeypox@cdc.gov.



For patients with confirmed monkeypox, health care providers may send certain to CDC directly for case verification. See [CDC Monkeypox Testing](https://www.cdc.gov/monkeypox) for details. For more information, see [CDC's 2022 Monkeypox Information for Healthcare Professionals](https://www.cdc.gov/monkeypox).

[Testing Patients for Monkeypox \(cdc.gov\)](https://www.cdc.gov)

Journal Articles of Interest

Asymptomatic MPV Infections Among Men in Belgium and Paris

- Anorectal swabs collected as part of sexually transmitted infection screening among MSM
- Identified MPV PCR positive anorectal swabs from men who were asymptomatic at the time of collection
 - Belgium study identified 3 of 224 men tested
 - All denied having symptoms in the weeks before and after the sample was taken
 - None reported exposure to a monkeypox case, nor did their contacts develop monkeypox
 - Follow-up samples taken 21 to 37 days later, were negative by PCR
 - Paris study identified 13 of 200 men tested
 - None reported symptoms before or at the time of swab collection, or when test results were reported, but 2 subsequently presented to the clinic with symptoms
- Findings suggest possibility monkeypox virus might be transmitted to close contacts in the absence of symptoms

De Baetselier, I. et al., Asymptomatic Monkeypox Virus Infections Among Male Sexual Health Clinic Attendees in Belgium. <http://dx.doi.org/10.2139/ssrn.4142074>
Ferre 2022, *Ann Int Med*; <https://doi.org/10.7326/M22-2183>

Non-viable MPV DNA detected in Case Home

- Study to assess MPV presence, and degree of surface contamination in home shared by two MPV cases, both had lesions in multiple anatomic areas
- Sampling done on day 20 of their isolation
- Among 30 specimens, 21 (70%) yielded a positive rt-PCR result, however **none yielded a positive culture result**
 - 3 porous items (i.e., cloth furniture and blankets)
 - 17 of 25 nonporous surfaces (e.g., handles and switches)
 - 1 chair
- *Monkeypox virus* DNA was detected from many objects and surfaces indicating some level of contamination. However, the inability to detect viable virus suggests virus viability decayed over time or through chemical or environmental inactivation
- Patients showered daily, performed regular hand hygiene, laundered bedding and clothing weekly, and did routine household cleaning

Pfeiffer JA, et al. High-Contact Object and Surface Contamination in a Household of Persons with *Monkeypox Virus* Infection — Utah, June 2022. MMWR. ePub: 19 August 2022. DOI: <http://dx.doi.org/10.15585/mmwr.mm7134e1>

Vaccination Updates

Intradermal JYNNEOS Vaccine

- Federal government has mandated intradermal (ID) administration as part of its National Monkeypox Vaccination Strategy
- Limited supply and high demand of vaccine led to Emergency Use Authorization (EUA) to allow for ID administration using smaller dose volume (0.1mL) in persons aged 18 years and older
 - EUA also allows for subcutaneous (SC) administration for persons under the age of 18 years
- ID administration can yield roughly four to five times more doses of vaccine per vial than SC and deliver the same immune response, based on the data available
- For more information on the vaccine, please refer to the [FDA EUA fact sheet for providers](#)

[Public Health Emergency \(PHE\)](#)

Intradermal JYNNEOS Vaccine

- Results from a clinical study showed that the lower intradermal dose was immunologically non-inferior to the standard subcutaneous dose
- When comparing ID and SC vaccine recipients who developed a local injection site reaction, moderate to severe redness and induration (firmness) was more common after ID dosing (95% vs SC 58%) and ~1/3rd of people who got ID dose had mild discoloration at injection site that lasted 6+ months
- History of keloid scar formation is contraindication to ID administration

Frey SE et al. Comparison of lyophilized versus liquid modified vaccinia Ankara formulations and subcutaneous versus intradermal routes of administration in healthy vaccinia-naïve subjects. *Vaccine*. 2015 Sep 22;33(39):5225-34. doi: [10.1016/j.vaccine.2015.06.075](https://doi.org/10.1016/j.vaccine.2015.06.075)

CDC. Interim Clinical Considerations for Use of JYNNEOS and ACAM2000 Vaccines during the 2022 U.S. Monkeypox. Available at: <https://www.cdc.gov/poxvirus/monkeypox/considerations-for-monkeypox-vaccination.html>

Immunogenicity and Reactogenicity

Assay	SC peak titer	ID peak titer	Difference
SLU PRNT	8.37	8.36	0.005
BN PRNT	5.63	5.90	-0.27
SLU ELISA	9.66	9.52	0.14
BN ELISA	9.59	9.57	0.02

Reactogenicity event	SC (%) N=166	ID (%) N=190
Feeling Tired	49.7	51.3
Muscle Aches	41.3	30.4
Headache	43.1	41.4
Nausea	21.6	23.0
Change in Appetite	15.0	20.4
Chills	12.6	14.7
Joint Pain	9.0	17.8
Pain at injection site	91.0	65.4
Erythema at injection site	81.4	99.5
Induration at injection site	69.5	99.5
Itchiness	48.5	89.0
Underarm pain	18.0	20.9
Underarm swelling	6.0	10.5

Frey SE et al. Comparison of lyophilized versus liquid modified vaccinia Ankara formulations and subcutaneous versus intradermal routes of administration in healthy vaccinia-naïve subjects. *Vaccine*. 2015 Sep 22;33(39):5225-34. doi: [10.1016/j.vaccine.2015.06.075](https://doi.org/10.1016/j.vaccine.2015.06.075)

Intradermal JYNNEOS Vaccine

- New York City and New York State have adopted the ID strategy and are training vaccinators in preparation for broader-scale ID administration
- During the transition to ID administration, the Health Departments will continue to work with providers and community partners to route those who are eligible to vaccine appointments, and provide guidance on the best methods of administration for each person
- Some of the vaccine appointments will continue to be for doses administered SC for the next several weeks
- With more doses available, information about second dose availability will be shared within the next week

Intradermal JYNNEOS Vaccine

- 0.1 mL of vaccine given ID on the same schedule produces similar efficacy to SC, though with more local redness
- A person aged 18 years or older who received one JYNNEOS dose SC may receive a second dose ID to complete the vaccination series
 - For example, a person who received only one dose SC before August 9 may receive second dose ID to complete the two-dose series

CDC SC and ID Videos and Guidance

- Subcutaneous injection video:
<https://www.youtube.com/watch?v=R5jd4SDEcsA>
- Intradermal injection video:
[CDC video: How to administer a JYNNEOS vaccine intradermally](#)
- Intradermal Vaccine Preparation and Administration Summary Alternative Dosing Regimen:
[CDC's JYNNEOS Intradermal Vaccine Preparation and Administration Summary](#)
- [Vaccine Administration Errors and Deviations | Monkeypox | Poxvirus | CDC](#)

Health Department Vaccine Clinics – PEP++

- Vaccination is free and available regardless of immigration status
 - Appointments being released on a rolling basis based on vaccine supply with some appointments reserved for patients and clients of clinical and non-clinical partners
- For information on the NYC vaccine program
 - Visit nyc.gov/monkeypox for information including on how to make an appointment in NYC
- For information on the NYS vaccine program
 - Visit [Monkeypox Vaccination \(ny.gov\)](https://www.ny.gov/monkeypox-vaccination) for information on where vaccine is available in NYS.
 - Local county health departments that have received a supply will administer the vaccine directly and are establishing their own appointment processes. Please refer to county webpages for more information. (Current counties outside of New York City: [Albany County](#), [Erie County](#), [Monroe County](#), [Nassau County](#), [Rockland County](#), [Saratoga County](#), [Sullivan County](#), [Suffolk County](#), [Westchester County](#), Columbia, Dutchess, Onondaga, Orange, and Ulster

Clinical Guidance



Tecovirimat – How to obtain Treatment

- The CDC's IND protocol was recently revised to make it even easier for any provider to prescribe TPOXX
 - Fill out FDA form 1572 only once
 - update only when adding sub investigators/new information
 - Consent form streamlined
 - Spanish translated version now available
 - Patient intake form streamlined to two pages
 - Follow up visits highly recommended but no longer required
 - Up to 7 days to submit paperwork after initiating treatment



[Information for Healthcare Providers on Obtaining and Using TPOXX \(Tecovirimat\) for Treatment of Monkeypox | Monkeypox | Poxvirus | CDC](#)

Prescribing Tecovirimat

- Step by step instructions for prescribing or obtaining tecovirimat for patients in NYC
 - <https://www1.nyc.gov/assets/doh/downloads/pdf/cd/monkeypox-treatment-guidance-interim.pdf>
 - [Health Advisory #16: Accessing Tecovirimat for People with Monkeypox](#)
- Obtaining tecovirimat for patients in NYS
 - Providers can contact one of the institutions in the MPV provider treatment network

NYC Health NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Adrienne Vasson, MD, PhD
Commissioner

2022 Health Advisory #16: Accessing Tecovirimat for People with Monkeypox

- Many people with monkeypox in New York City (NYC) have developed complications including proctitis, which can progress to become severe and debilitating, and lesions in anatomical sites at risk of scarring or other permanent sequelae. Supportive care, including pain control, is a mainstay of treatment.
- Tecovirimat (TPOXX) is an antiviral medication available through the Centers for Disease Control and Prevention (CDC) that is being used to treat monkeypox infection under [CDC's Expanded Access Investigational New Drug \(IND\) protocol](#). To date, tecovirimat has been prescribed for over 400 patients in NYC.
- Recently the FDA and CDC [simplified this protocol](#) so that treatment with tecovirimat can begin upon obtaining [informed consent](#) from the patient. No pre-registration is required and evaluations can be done by telemedicine. Additional forms must be submitted to CDC after initiating treatment.
- Providers are urged to take the necessary steps to prescribe tecovirimat when indicated for the patients that have a positive test result (or are awaiting test results and have a clinically compatible illness). NYC providers who want to prescribe tecovirimat and can adhere to the IND protocol can email MPVtherapies@nyc.health.ny.gov for information on free delivery to patients or to request supplies for a pharmacy at their facility.
- For more information about monkeypox, visit the NYC Department of Health and Mental Hygiene's [Monkeypox Information for Providers](#) webpage.

August 2, 2022

Dear Colleagues,

The number of people diagnosed with monkeypox continues to rise in [New York City \(NYC\)](#), the [US](#) and [other countries](#). On July 23, 2022, the World Health Organization declared MPX a [Public Health Emergency of International Concern](#); on July 28, the New York State Department of Health declared monkeypox an [Imminent Threat to Public Health](#) and, on July 29, the State declared a [State Disaster Emergency](#); and on July 30, the NYC Department of Health and Mental Hygiene (Health Department) declared monkeypox a [Public Health Emergency](#), and on August 1, the City declared a [State of Emergency](#).

[Health Advisory #16: Accessing Tecovirimat for People with Monkeypox](#)
[NYSDOH Health Alert Notice for providers in New York State - July 8, 2022 \(PDF\)](#)

Outside NYC MPV Provider Treatment Network

Institution	Region	Contact information for MPV Provider Treatment Network For providers to contact on behalf of their patients
AMC	Capital	518-264-4769 {518-(264-4POX)}
SUNY Upstate	Central	315-464-3979
Univ of Rochester	Finger Lakes	https://www.urmc.rochester.edu/medicine/infectious-disease/infectious-disease-updates/monkeypox.aspx
Northwell	Long Island	monkeypoxinfo@northwell.edu
SUNY Stonybrook	Long Island	www.stonybrookmedicine.edu
Mount Sinai South Nassau	Long Island	516-255-8410 website is: www.southnassau.org/sn
WMC	Mid Hudson	(914)326-2060; website is: www.wmchealth.org/
Vassar	Mid Hudson	www.nuvancehealth.org/health-tips-and-news/monkeypox-what-you-need-to-know
MVHS	Mohawk Valley	Khall3@mvhealthsystem.org
CVPH	North Country	CVPH @ 518-561-2000
Canton-Potsdam Hospital	North Country	
UHS	Southern Tier	607-763-5991
ECMC	Western	www.ecmc.edu/health-services-and-doctors/monkeypox-resources/
VA Western New York Healthcare System	Western	only for enrolled veterans

Resources

Resources

NYSDOH: [Monkeypox \(ny.gov\)](https://www.ny.gov/monkeypox)

- [Palm Card](#)
- [Information Card](#)
- SMS text notification to 81336:
English – MONKEYPOX
Spanish - MONKEYPOXESP

NYC: [nyc.gov/monkeypox](https://www.nyc.gov/monkeypox)

- Text "MONKEYPOX" to 692-692 or, for Spanish, text "MONKEYPOXESP"
- [Monkeypox Information for Providers - NYC Health](#)

CDC

- [Information For Healthcare Professionals | Monkeypox | Poxvirus | CDC](#)

Protect Yourself and Others From Monkeypox

- Do not have sex or other intimate contact if you or your partners have a new rash or sores, feel sick, or were recently exposed to monkeypox. Ask your partners whether they have monkeypox symptoms and about their recent sexual history.
- Frequently wash your hands, bedding, towels and other shared items. Sex toys should be washed after each use or sex act.
- Get vaccinated if you may have been recently exposed to monkeypox. To find a vaccination site, visit [nyc.gov/vaccinefinder](https://www.nyc.gov/vaccinefinder).
- Talk to your health care provider about testing, pain management or treatment if you have monkeypox symptoms. If you do not have a provider, call 311 to get connected to care.

For more information, including about vaccine eligibility, visit [nyc.gov/monkeypox](https://www.nyc.gov/monkeypox) or scan the QR code. Text "MONKEYPOX" to 692-692 for the most up-to-date information.

NYC



8/6/22

Monkeypox and Sexual Health: What all New Yorkers Should Know

All New Yorkers should stay informed about monkeypox. This means understanding the symptoms, how it spreads, and what to do if you are exposed.

What are the symptoms of

Symptoms of monkeypox include
 • Rash, bumps, or blisters that are similar in appearance to common skin ailments like pox;

• Flu-like symptoms, such as fever, muscle aches, chills, and fatigue; symptoms may occur before or after the rash appears, or not at all.

How does monkeypox spread?

Monkeypox is spread through direct contact between individuals. This includes:
 • Direct contact with monkeypox rashes on an individual who has monkeypox;
 • Respiratory droplets or oral fluids from someone with monkeypox, particularly those who have close contact with you or are around them for a long time;
 • It can also be spread through contact with objects or fabrics (e.g., clothing, towels) that have been used by someone with monkeypox.

Be Aware, Your Community Cares!

Protect yourself and your community by staying informed about monkeypox. Visit: [health.ny.gov/monkeypox](https://www.health.ny.gov/monkeypox)



Department of Health

13674

06/22

MONKEYPOX

Monkeypox and Safer Sex

Vaccination is an important tool in preventing the spread of monkeypox. But given the current limited supply of vaccine, consider temporarily changing some behaviors that may increase your risk of being exposed. These temporary changes will help slow the spread of monkeypox until vaccine supply is adequate.

Reducing or avoiding behaviors that increase risk of monkeypox exposure is also important when you are between your first and second shots of vaccine. Your protection will be highest when you are two weeks after your second dose of vaccine.

Make a habit of exchanging contact information with any new partner to allow for sexual health follow-up, if needed.

Talk with your partner about any monkeypox symptoms and be aware of any new or unexplained rash or lesion on either of your bodies, including the mouth, genitals (penis, testicles, vulva, or vagina), or anus (butthole). If you or your partner have or recently had monkeypox symptoms or have a new or unexplained rash anywhere on your body, do not have sex and see a healthcare provider. In some cases, symptoms may be mild, and some people may not even know they have monkeypox.



If you or a partner has monkeypox or think you may have monkeypox, the best way to protect yourself and others is to avoid sex of any kind (oral, anal, vaginal) and kissing or touching each other's bodies – while you are sick. **Especially avoid touching any rash.** Do not share things like towels, fetish gear, sex toys, and toothbrushes.

Even if you feel well, here are some ways to reduce your chances of being exposed to monkeypox if you are sexually active:

- Take a temporary break from activities that increase exposure to monkeypox, until you are two weeks after your second dose. This will greatly reduce your risk.

Continue to Next Page →



CS-133304-A | 08/05/2022

www.cdc.gov/monkeypox

Limit your number of sex partners to reduce your likelihood of exposure.

- Spaces like back rooms, saunas, sex clubs, or private and public sex parties where intimate, often anonymous sexual contact with multiple partners occurs – are more likely to spread monkeypox.
- Condoms (latex or polyurethane) may protect your anus (butthole), mouth, penis, or vagina from exposure to monkeypox. However, condoms alone may not prevent all exposures to monkeypox, since the rash can occur on other parts of the body.
- Gloves (latex, polyurethane, or nitrile) might also reduce the possibility of exposure if inserting fingers or hands into the vagina or the anus. The gloves must cover all exposed skin and be removed carefully to avoid touching the outer surface.
- Avoid kissing or exchanging spit, since monkeypox can spread this way.
- Masturbate together at a distance, without touching each other and without touching any rash.
- Have virtual sex with no in-person contact.
- Consider having sex with your clothes on or covering areas where rash is present, reducing as much skin-to-skin contact as possible. Leather or latex gear also provides a barrier to skin-to-skin contact; just be sure to change or clean clothes/gear between partners and after use.

• Be aware that monkeypox can also spread through respiratory secretions with close, face-to-face contact.

• Remember to wash your hands, fetish gear, sex toys, and any fabrics (bedding, towels, clothes) after having sex.



What should a person do if they have a new or unexplained rash or other symptoms?

- Avoid sex or being intimate with anyone until you have been checked out by a healthcare provider.
- If you don't have a provider or health insurance, visit a public health clinic near you.
- When you see a healthcare provider, wear a mask, and remind them that this virus is circulating in the area.
- Avoid gatherings, especially if they involve close, personal, skin-to-skin contact.



CS-133304-A | 08/05/2022

www.cdc.gov/monkeypox

Thank You