

# Health Advisory Increase in Mpox Cases Among SF Residents

**August 30, 2023** 

# **Situational Update**

There have been 7 mpox cases among SF residents in the last 5 weeks. While mpox cases remain low compared to 2022, this is an increase from an average of 1 case per month from January to June 2023.

The JYNNEOS vaccine is safe and effective, and completion of the 2-dose series provides improved protection compared to 1 dose. No vaccine is 100% effective and people who have been vaccinated may still get mpox, but vaccination <u>may decrease illness severity and reduce the risk of hospitalization</u>. The two doses are administered 28 days apart. If a person has received 1 dose more than 28 days ago, the second dose can be administered immediately, and the series does not need to be re-started. Booster doses are not recommended at this time. Vaccination is not <u>recommended in persons who have previously been diagnosed with mpox</u> as infection likely confers immune protection. For immunocompromised persons who have been previously diagnosed with mpox, we recommend case-by-case shared decision making based on the clinician's clinical judgment. There are no supply limitations, and the vaccine can be administered by either subcutaneous or intradermal injection.

## **Actions Requested of SF Clinicians**

- 1. **Maintain awareness** of potential mpox cases and test <u>suspected lesions</u>.
- 2. Continue to strongly recommend and administer mpox vaccine to those who may be at risk and ensure that all who have received JYNNEOS complete the 2-dose series in order to achieve more lasting immunity.
- 3. Counsel patients on how to reduce risk. Getting vaccinated is a great way to protect individuals and communities from a resurgence of mpox disease, but it is not 100% effective. Using condoms and reducing number of sex partners are additional strategies for reducing risk of mpox infection.
- 4. **Include** assessment of mpox risk and vaccination status at all sexual health visits for men, trans or nonbinary people who have sex with men, trans or nonbinary people.
- 5. Consider referring anyone diagnosed with mpox to the <u>STOMP Trial</u>, a national randomized controlled trial on the efficacy and safety of tecovirimat (TPOXX). Persons with severe disease will be prescribed TPOXX and persons with mild to moderate disease will be randomized to either TPOXX or placebo. TPOXX can be prescribed by clinicians though an EA-IND protocol through the CDC. If you are not a TPOXX prescriber and would like to become one, please see instructions <a href="https://example.com/here-national-nationa

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- 6. **Provide** mpox vaccine as part of a comprehensive package (for those with non-occupational risk for mpox) that includes the following:
  - a. Discussion of HIV PrEP
  - Linkage to and engagement in HIV care for those living with HIV
  - c. Every 3-month screening for gonorrhea, chlamydia, and syphilis
  - d. Offering vaccines against other sexually transmitted or sexually associated infections, according to current local eligibility criteria and ACIP guidance, including <u>Meningococcal vaccine</u> (MenACWY), <u>Hepatitis A vaccine</u>, <u>Hepatitis B vaccine</u>, and <u>HPV vaccine</u>.

## **Additional Resources**

SF.gov Mpox pages for the public: <a href="mailto:sf.gov/information/mpox">sf.gov/information/mpox</a>
SF City Clinic Provider Pages: <a href="mailto:www.sfcityclinic.org/providers">www.sfcityclinic.org/providers</a>

SFDPH Mpox for Providers: <a href="https://www.sfcdcp.org/mpxhcp">www.sfcdcp.org/mpxhcp</a>

CDPH Mpox: www.cdph.ca.gov/Programs/CID/DCDC/Pages/monkeypox.aspx

## **Program Contact Information**

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### **Links Included in This Health Advisory**

- Vaccination may decrease mpox severity and risk of hospitalization:
   https://www.cdc.gov/mmwr/volumes/71/wr/mm715152a2.htm?s cid=mm715152a2 w
- Vaccine administration considerations for persons previously diagnosed with mpox: <a href="https://www.cdc.gov/poxvirus/mpox/interim-considerations/special-populations.html">https://www.cdc.gov/poxvirus/mpox/interim-considerations/special-populations.html</a>
- Clinical recognition of mpox: <a href="https://www.cdc.gov/poxvirus/mpox/clinicians/clinical-recognition.html">https://www.cdc.gov/poxvirus/mpox/clinicians/clinical-recognition.html</a>
- CDPH JYNNEOS vaccine guidance: <a href="https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Mpox/Mpox-Vaccine-QA-for-Providers--LHD.aspx">https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Mpox/Mpox-Vaccine-QA-for-Providers--LHD.aspx</a>
- STOMP Study in SF: https://clinicaltrials.ucsf.edu/trial/NCT05534984
- Become a TPOXX prescriber: <a href="https://www.sfcdcp.org/wp-content/uploads/2022/08/SFDPH-Tecovirimat-New-Treatment-Provider-Process.pdf">https://www.sfcdcp.org/wp-content/uploads/2022/08/SFDPH-Tecovirimat-New-Treatment-Provider-Process.pdf</a>
- Vaccine guidance:
  - Meningococcal vaccine: <a href="https://www.sfcdcp.org/wp-content/uploads/2022/05/Advisory-MenACWY-MSM-FINAL-2022.05.18-1.pdf">https://www.sfcdcp.org/wp-content/uploads/2022/05/Advisory-MenACWY-MSM-FINAL-2022.05.18-1.pdf</a>
  - o Hepatitis A vaccine: <a href="https://www.cdc.gov/mmwr/volumes/69/rr/rr6905a1.htm">https://www.cdc.gov/mmwr/volumes/69/rr/rr6905a1.htm</a>
  - Hepatitis B vaccine: https://www.cdc.gov/mmwr/volumes/67/rr/rr6701a1.htm





o HPV vaccine: https://www.cdc.gov/vaccines/vpd/hpv/hcp/recommendations.html

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