NCDHHS Corrections Team

COMMUNICABLE DISEASE BRANCH

Monkeypox Guidance for Corrections

NCDHHS is working with CDC to track an outbreak of monkeypox that has spread across several countries that typically don't report monkeypox, including the United States. Since May 2022, Monkeypox virus infections have been identified within the US, outside of endemic or native areas in individuals with no travel history.

Unlike COVID-19, monkeypox has been known since the 1950s. Monkeypox virus is part of the same family of viruses as variola virus, the cause of smallpox and molluscum contagiosum virus. Symptoms are similar to smallpox, but milder; and monkeypox is rarely fatal. Monkeypox is not related to chickenpox. Monkeypox is a viral illness that typically involves flu-like symptoms, swelling of the lymph nodes and a rash that includes bumps that are initially filled with fluid before scabbing over. Most infections last two to four weeks. Although there are no treatments specifically for monkeypox virus infections, monkeypox and smallpox viruses are genetically similar, which means that antiviral drugs and vaccines developed to protect against smallpox may be used to prevent and treat monkeypox virus infections. There is one vaccine that has been approved by the FDA for the prevention of monkeypox.

Transmission

Monkeypox spreads among people in different ways. Monkeypox virus is most often spread through direct contact with a rash or sores of someone who has the virus. Monkeypox virus can be spread person-to-person through infected body fluids (including saliva and lesion fluid), items that have been in contact with infected fluids or lesion crusts, and respiratory droplets. Monkeypox can be spread from the time symptoms start until all sores have healed and a fresh layer of skin has formed – this can take several weeks.

Signs and symptoms

The disease typically begins with early flu-like symptoms followed a few days later by a rash. The rash goes through different stages before healing completely. Sometimes, people get a rash first, followed by other symptoms. Others only experience a rash.

- Signs/Symptoms
 - Fever
 - Headache
 - Muscle aches
 - Backache
 - Swollen lymph nodes
 - Chills
 - Exhaustion
 - A rash that can look like pimples or blisters that appears on the face, inside the mouth, and/or on other parts of the body, like the hands, feet, chest, genitals, or anus.

Testing and Reporting:

Any suspected cases of monkeypox should immediately be reported to your <u>local health department</u>. Testing is widely available and there is no shortage of testing capability.



Testing can be performed through the NC State Laboratory of Public Health (NCSLPH). Providers must call (919-733-3419) before sending samples to the NCSLPH. This will provide clinical consultation, guidance on proper collection and sample submission, and facilitate prioritization of specimens for processing. Testing is also now available commercially, including through

- LabCorp: <u>https://www.labcorp.com/infectious-disease/monkeypox</u>
- Quest Diagnostics: https://www.questdiagnostics.com/healthcare-professionals/clinicaleducation-center/faq/faq286
- Aegis Science: <u>https://www.aegislabs.com/our-services/monkeypox</u>

Other laboratories continue to stand up testing, so this list is not exhaustive. Staff, volunteers, or residents who are suspected to have monkeypox should be medically evaluated and tested for monkeypox.

Infection Prevention

Anyone who is identified to have monkeypox should isolate away from others until all scabs separate and a fresh layer of healthy skin has formed underneath. Decisions about discontinuation of isolation should be made in consultation with a medical provider.

Some congregate living facilities may be able to provide isolation on-site while others may need to move residents off site to isolate. Detainees' isolation spaces should have a door that can be closed and a dedicated bathroom that other residents do not use. Multiple detainees who test positive for monkeypox can stay in the same living space.

Clean and disinfect the areas where people with monkeypox spent time — Avoid activities that could spread dried material from lesions (e.g., use of fans, dry dusting, sweeping, or vacuuming) in these areas. Soiled laundry should be gently and promptly contained in a laundry bag and never be shaken or handled in a manner that may disperse infectious material. Covering mattresses in isolation areas (e.g. with sheets, blankets, or a plastic cover) can facilitate easier laundering. When handling dirty laundry from people with known or suspected monkeypox infection, staff, volunteers, or residents should wear a gown, gloves, eye protection, and a well-fitting mask or respirator.

Treatment

Antivirals, such as tecovirimat (TPOXX), may be recommended for people who are more likely to get severely ill, like individuals with weakened immune systems. Consult with a medical provider for specific treatment options. Additional treatment Information can be found here, <u>Treatment Information for Healthcare Professionals | Monkeypox | Poxvirus | CDC</u>. Providers interested in obtaining monkeypox therapeutics must request them through NC DHHS using <u>Monkeypox Medical Countermeasure Request Form v1 - NC Public Health (readyop.com)</u>.

Vaccination

When properly administered before or within 14 days after exposure, vaccines can be effective tools at protecting people against monkeypox illness or reducing the severity of illness. One vaccine licensed by the U.S. Food and Drug Administration (FDA) is available for preventing monkeypox infection – JYNNEOS (also known as Imvamune or Imvanex in other countries)

Currently 7 local health departments (Buncombe, Durham, Forsyth, Mecklenburg, New Hanover, Pitt, and Wake) have been designated as vaccination storage hubs. If you have an individual who meets the below vaccination criteria contact <u>your local health department</u> for assistance in obtaining vaccination.

Vaccination Criteria

- People who have been in <u>close physical contact</u> with someone diagnosed with monkeypox in the last 14 days (PEP)
- Men who have sex with men, or transgender individuals, who report any of the following in the last 90 days:
 - Having multiple or anonymous sex partners
 - Being diagnosed with a sexually transmitted infection
 - Receiving HIV pre-exposure prophylaxis (PrEP)
- Available for certain healthcare workers and public health response team members designated by public health authorities

For questions or additional information pertaining to Monkeypox, email <u>NCDHHSCorrectionsTeam@dhhs.nc.gov</u>

Resources:

CDC:

U.S. Monkeypox Outbreak 2022: Situation Summary CDC's Response to the 2022 Monkeypox Outbreak | Monkeypox | Poxvirus | CDC 2022 U.S. Map & Case Count | Monkeypox | Poxvirus | CDC Monkeypox and Smallpox Vaccine Guidance Interim Clinical Guidance for the Treatment of Monkeypox Congregate Living Settings | Monkeypox | Poxvirus | CDC

NC DHHS:

<u>NC DHHS Monkeypox Website</u> <u>Monkeypox Communication Toolkit</u> <u>Provider Memo</u> (July 14th) Vaccine Toolkit

> NC Department of Health and Human Services • Division of Public Health, Communicable Disease Branch, Corrections Team • <u>https://tinyurl.com/CorrectionsTeam</u> • NCDHHS is an equal opportunity employer and provider. • 8/2022

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