4 things every doctor should know about monkeypox

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Monkeypox isn’t a new disease. It’s been around since at least 1970, although it is rarely found outside several central and western Africa countries. As of mid-August 2022, however, it had spread to over 86 countries that had not historically reported the virus, and the U.S. had become the global leader in non-endemic cases.

The World Health Organization has declared the global monkeypox outbreak a public health emergency of international concern—the agency’s highest-level warning and a designation currently used to describe only two other diseases: COVID-19 and polio. The Secretary of the U.S. Department of Health and Human Services (HHS) has also declared the monkeypox outbreak a public health emergency.

A news post on AMA Ed Hub™ provides a breakdown of key clinical issues related to monkeypox to help physicians and other health professionals understand the signs and symptoms of monkeypox, how the virus is transmitted and who is eligible for monkeypox vaccines.

Some may have flu-like symptoms early on

According to the Centers for Disease Control and Prevention (CDC), monkeypox symptoms are similar to those of smallpox—including fever, headache, back ache, muscle aches, swollen lymph nodes, chills and fatigue—but they tend to be milder.

“Not all patients with monkeypox experience flu-like symptoms before developing a rash.; some only experience a rash or sores,” the AMA Ed Hub post says. “A monkeypox rash resembles pimples or blisters on or inside the genitals or anus, but the pox-like bumps may also appear on the face, hands, feet, chest or inside of the mouth.”
Once a rash develops, it goes through four phases, from macules to papules to vesicles to pustules, before scabbing and then crusting over.

Typically, illness from monkeypox lasts about two to four weeks.

Check out this primer on what monkeypox is.

**The rash can be nonspecific**

In fact, it can look a lot like herpes, chickenpox and shingles. Still, there are subtle differences to look for. For example, rashes caused by chickenpox (varicella virus) rapidly progress from macular to papular to vesicular lesions before crusting. Lesions are usually most concentrated on the chest and back.

There have been accounts of patients co-infected with Monkeypox and other infectious agents—such as varicella zoster, syphilis—so patients with a characteristic rash should be considered for monkeypox testing, even if other tests are positive.

“If monkeypox is likely, the rash or skin lesion can be swabbed and the swab sent to a lab for a PCR (polymerase chain reaction) test to determine whether the monkeypox virus is present,” the post says, noting that the CDC offers additional guidance on how to recognize monkeypox.

Look here for help with monkeypox coding.

**Personal contact is key**

Monkeypox spreads through close, often skin-to-skin contact. This includes intimate activities, such as kissing, hugging, massage and sexual intercourse, as well as touching objects, fabrics or surfaces—for example, clothes, bedding and towels—contaminated with the monkeypox virus. It can also spread through contact with respiratory secretions.

While monkeypox seems to be spreading largely among men who have sex with men, it can infect anyone, no matter their sexual orientation.

“According to the CDC, those most at risk for severe outcomes include children 8 years old and younger, people who are pregnant or have compromised immune systems, and those with a history of atopic dermatitis or eczema,” the article notes.
Discover what doctors wish patients knew about monkeypox.

There are two vaccines available

The Food and Drug Administration (FDA) has licensed JYNNEOS for the prevention of smallpox and monkeypox and ACAM2000 to prevent smallpox. ACAM2000 has been made available under an expanded access investigational new drug protocol. The FDA has authorized the emergency use of JYNNEOS vaccine to be given intradermally to people 18 or older at high risk for infection—to increase the number of doses available.

“The sooner, the better,” the AMA Ed Hub post notes. “The CDC currently recommends vaccination for people who have had a sexual partner in the past two weeks who has been diagnosed with monkeypox; have had multiple sexual partners in the past two weeks in an area with known monkeypox cases;” have been identified by public health officials as a contact of someone with monkeypox and “are at occupational risk of monkeypox,” such as laboratory workers who perform monkeypox testing.

For the latest updates, visit the AMA’s monkeypox resource center.

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