



## **Latest on the monkeypox outbreak with Andrea Garcia, JD, MPH [Podcast]**

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# AMA UPDATE



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### Latest on the monkeypox outbreak with Andrea Garcia, JD, MPH

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## Featured topic and speakers

In today's COVID-19 Update, COVID-19 boosters this September, CDC designates monkeypox as nationally notifiable condition as outbreak continues and new CPT codes added, as covered by AMA Director of Science, Medicine and Public Health, Andrea Garcia, JD, MPH. AMA Chief Experience Officer Todd Unger hosts.

Access guidance and descriptors for new monkeypox CPT codes.

Find additional resources at the Monkeypox resource center.

Learn more at the AMA COVID-19 resource center.

## Speaker

- Andrea Garcia, JD, MPH, director of science, medicine & public health, American Medical Association

## Transcript

**Unger:** Hello. This is the American Medical Association's COVID-19 Update video and podcast. Today we have our weekly look at the numbers, trends and latest news about COVID-19 with the AMA's Director of Science, Medicine and Public Health, Andrea Garcia, in Chicago. I'm Todd Unger, AMA's chief experience officer, also in Chicago.

Andrea, over the past month, we've been talking a lot about the BA.5 subvariant and how it's driving up new cases. Is that continuing this week?

**Garcia:** Well, thanks for having me back. And yeah, BA.5 continues to be the dominant strain. And for the past several weeks, our daily case average has really hovered around 130,000. But as of July 30, according to the New York Times, there is an estimated 124,000 new cases being reported each day.

But I think the good news there is that's a 5% decrease from the prior two weeks. I think, with that being said, we still have about 46% of counties in the U.S. who are at a high COVID-19 community level, based on the CDC metrics. And new cases are still increasing modestly in about half of states. But they are decreasing modestly in the other half. So that is good news.

**Unger:** That is good news. And I know it's too early to tell but hopefully that drop is the beginning of a larger downward trend. Are we seeing that in the downstream hospitalizations, death statistics?

**Garcia:** Not yet. And as you mentioned, it's too soon because these are lagging indicators. But hospitalizations are continuing to increase. They remain well below the peaks reached in the previous surges. Nationwide, we're at about 43,000 people hospitalized with COVID per day. Hospitalizations are up about 6% over the past two weeks.

And then if we turn and look at deaths each day, that number is higher now than it was in July. But it's remained pretty steady over the past few weeks. We're at about 440 fatalities per day, obviously much lower than the 2,600 per day at the height of the Omicron surge but also still higher than we would like to be seeing.

**Unger:** Well, let's talk a little bit about booster shots. There's news here about possible reformulation for the fall, maybe even sooner than anticipated. What's the word there?

**Garcia:** It's being widely reported that the Biden administration is preparing to launch a COVID booster campaign in September. And that is weeks earlier than expected. The booster dose is going to be a bivalent vaccine. And that's designed to provide stronger protection against the Omicron subvariants that are now dominant. Those boosters will contain components from BA.4 and BA.5, as well as the original formula, which was based on that initial version of the virus that spread globally in early 2020.

**Unger:** So I'm curious because there was some concern originally about the timeline. What changed?

**Garcia:** You're exactly right. And Moderna and Pfizer were already working quickly to comply with the FDA's request to get that new bivalent booster ready by October or November. But the FDA, in announcing the fall strategy last week, said they had received assurances from those manufacturers that that reformulated booster will be ready in September. The hope here is the bivalent vaccines will be more effective against the rapidly evolving virus and will help shield us from a potential fall and winter surge.

**Unger:** You know, it's pretty miraculous the turnaround time on those. I hope folks appreciate the science and the work behind getting ready to prevent a winter surge.

Besides having those vaccines ready, of course, the key next step is getting people to get them. And we've seen slow uptake, the primary COVID vaccine, especially with children. And that could really become an issue as kids return to school. Do we know any more about the numbers there?

**Garcia:** Yeah, so FDA authorized and CDC recommended the Moderna and Pfizer vaccines for those kids as young as six months in June. And while we know some parents were really anxiously awaiting those authorizations, there's some new survey data from the Kaiser Family Foundation indicating that many parents of young children are still reluctant to vaccinate their children. And in fact, more than 4-in-10 parents said they would not vaccinate their children under age five. According to Kaiser Family Foundation, less than 3% of children under five, or roughly 544,000, had received at least one dose of the vaccine as of July 20.

**Unger:** And is that research or those figures in line with other surveys that had been conducted prior to those particular authorizations?

**Garcia:** So this particular study released last week really shows an increase in the number of parents who said they wouldn't vaccinate their young children. That is compared with surveys in January and April, before the vaccines were available for this age group. And it's not just the youngest children. Only about 30% of children in that 5 to 11 age group who became eligible for the vaccines back in November have received at least one dose.

And that pace at which that group is getting vaccinated has really slowed considerably. According to the survey results, we're seeing a perceived lack of research, potential side effects. Safety concerns are among the top reasons that parents and caregivers are not getting their kids vaccinated. We know that it's really going to take continued conversations and reassurance from physicians that vaccines are safe and effective. And that's going to be necessary to help ease those concerns, especially, as you said, young kids are heading back to school.

**Unger:** And importantly, as Dr. Peter Hotez referenced last week in our discussion with them, there are serious downsides of not getting children vaccinated. Significant number of children have died, issues around long COVID. These are very serious. And obviously, it will be reinforced to get those numbers up. I know the AMA will continue to provide resources for physicians on how to have those conversations.

Another concern—obviously, we're hearing a lot about it in the news, continues to make headlines—is monkeypox. What's the latest news there?

**Garcia:** Well, the Council of State and Territorial Epidemiologists and the CDC announced last week that monkeypox is being designated as a national notifiable condition. And that's effective August 1. It is recommended that states enact laws to make monkeypox a reportable disease in their jurisdictions and that jurisdictions conducting surveillance submit those case notifications to the CDC.

Monkeypox has been designated immediately notifiable urgent, meaning those case reports should go to the CDC within 24 hours. Of course, this comes more than two months after the disease began spreading in the U.S. This move is designed to help CDC get a better understanding of just how quickly the virus is spreading. And it also allows the agency to monitor and respond to monkeypox, even if the current outbreak recedes. We know right now that CDC's reporting about 5,811 confirmed cases of monkeypox in the U.S. And that number is going to continue to grow.

**Unger:** Now, for all the physicians, resident students out there that do have questions about monkeypox, we've heard your questions. We've created a Monkeypox Resource Center on the AMA site. If you don't see it on the home page, just type in "monkeypox," and we'll get you there with a lot of information. We're also going to be talking to Dr. Sandra Fryhofer, chair of the AMA Board of Trustees, with more about what physicians need to know about monkeypox.

Andrea, with the numbers that you're talking about and the coverage that we're seeing, just a great deal of concern here about where this has gone. How is the administration responding to the increase in numbers that we're seeing?

**Garcia:** President Biden has tapped two new people to lead the country's monkeypox response. And he's pulling from both FEMA and the CDC. Robert Fenton, who helped lead FEMA's mass vaccination effort for COVID as the agency's acting administrator when Biden first took office, will be the White House coordinator for monkeypox.

And Dr. Demetre Daskalakis of the CDC will be his deputy. We know Dr. Daskalakis is the director of CDC's Division of HIV Prevention. He's the national expert on issues affecting the LGBTQ community. And he previously led New York City's HIV prevention efforts. He's also been really instrumental in CDC's vaccine equity efforts during the COVID pandemic.

**Unger:** And that's terrific news to have such impressive leaders to take the reins here, given the level of concern. As we ramp up leadership and coordinate efforts at the federal level, where do we stand on vaccines for monkeypox right now? Are we still seeing the demand outstripping supply?

**Garcia:** The Department of Health and Human Services reported that 340,000 doses have already been delivered across the country since the start of the outbreak. We know that FDA has authorized 800,000 additional doses of the Geneos vaccine. Remember, this is a two-dose vaccine. Those doses are being allocated to jurisdictions based on their case numbers and also the size of their at-risk populations.

Part of what I'm hearing the challenge is is the lack of transparency in supply. So jurisdictions don't know how much vaccine is arriving and when. And that is making their planning efforts really difficult.

**Unger:** I'll bet. Well, in another sign of how serious the situation is, last week, the World Health Organization also declared monkeypox a global health emergency. And since then, some U.S. states have followed suit. Tell us more about that.

**Garcia:** So at the time of this filming, we've seen three states declare states of emergency in response to the monkeypox outbreak. It began last Friday with New York and then followed on Monday with Illinois and California. These three states combined have a reported 47% of the confirmed monkeypox infections in the U.S. And we know that declaring an emergency gives these states the opportunity to expand resources, including ramping up vaccine and testing efforts, as they work to slow the spread. And I think we're going to continue to see states make these declarations as they increase efforts to more effectively manage their response to the disease.

**Unger:** Now, testing has always been an issue from the get-go here. Is that still a challenge?

**Garcia:** It is but there are efforts underway. We are hearing that capacity is increasing. And last Thursday, HHS Secretary Becerra reported that the U.S. now has the capacity to conduct 60,000 to 80,000 tests for monkeypox per week. And that is up from only 6,000 tests per week at the beginning of the outbreak. I think this is coming down to messaging. And we need to be really clear about where patients can go to get tested if they think they've been exposed to monkeypox.

**Unger:** And at a practical level, another signal of the growing number of cases, the AMA just announced that there are new CPT codes in the wake of the monkeypox outbreak. What do physicians need to know about this?

**Garcia:** So the AMA created three new CPT codes in response to the outbreak, a new laboratory test code—and that comes at a good time with commercial labs ramping up testing—and then two new vaccine codes. And we will put the link where physicians can find more information on those and how they can be used in the description of this episode.

**Unger:** Well, Andrea, thank you so much for being with us here today. That concludes today's episode. And we'll be back with another COVID-19 Update video and podcast soon. For resources on COVID-19, visit [ama-assn.org/COVID-19](https://www.ama-assn.org/COVID-19) and check out the AMA's Monkeypox Resource Center by visiting the AMA site. Thanks for joining us today. Please take care.

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