What you need to know about monkeypox

As you likely know, the World Health Organization (WHO) declared monkeypox a Public Health Emergency of International Concern (PHEIC) earlier this week. I'd like to help you contextualise and understand the situation.

Considering our recent COVID-19 experience, you may well be experiencing some déjà vu at the moment.

Rest assured that the dynamics so far around the monkeypox outbreak are quite different to what we saw in the early days of the COVID-19.

That said, it is very important that you fully understand the monkeypox outbreak.

A little history

The first human case of monkeypox was recorded in 1970 and this disease has affected people in Central and West Africa for decades. It's been well controlled through simple measures like isolating infected people.

This WHO declaration of a Public Health Emergency follows a change in the pattern of monkeypox spread, with recent rapid spread of monkeypox in all continents. There are now about 16,000 recorded cases across more than 70 countries. The disease appears to be spreading in countries that have not historically reported monkeypox infections and through new modes of transmission, which are not yet fully understood.

Fortunately, monkeypox is almost never fatal, and typically resolves spontaneously. Of all the cases recorded in this outbreak, there are thus far five confirmed deaths.

Why has the WHO declared a Public Health Emergency (PHEIC)?

Declaring a PHEIC is the highest level of alert by the WHO. It's intended to send a powerful signal to countries to initiate urgent action to combat the spread of the disease and to mobilise resources to fund research on diagnostics, treatments and vaccines. It also obligates countries to share information with the WHO, to monitor the spread of infections globally. In other words, this PHEIC status raises awareness, triggers action, and ensures notifiable reporting of cases.

Where has monkeypox spread to?

The WHO's assessment is that the risk of monkeypox is moderate in all regions globally, except for in the European region, where the risk is rated as 'high'. Countries with the highest number of reported infections to-date are Spain (3125), the USA (2316), Germany (2191), UK (2137) and France (1449).

In South Africa only three cases of monkeypox have been formally confirmed in this outbreak (from 22 June to date). These cases have been appropriately isolated, and their contacts traced to limit the spread of infection. To the best of our understanding, all three patients have experienced mild illness.

Monkeypox is different to COVID-19

To allay any anxiety, the differences between monkeypox and COVID-19:

- Monkeypox is a well-known, typically rare viral disease that has been around for a long time. COVID-19 developed from a novel (newly identified) Coronavirus that quickly became ubiquitous globally.
- Monkeypox is significantly less contagious than the SARS-CoV-2 virus, which causes COVID-19. Importantly, to date, this outbreak of monkeypox appears to be transmitted through direct bodily fluid contact, whereas COVID-19 spread posed a much higher person-to-person transmission risk through proximity to an infected individual. That said, more needs to be understood about monkeypox's mode of transmission which seems to have changed, resulting in the current outbreak.
- Monkeypox is almost never fatal, and typically resolves spontaneously, consequently posing a low threat to healthcare systems. We are not at all likely to witness healthcare professionals and the healthcare system being severely impacted by this monkeypox outbreak, to the same extent as COVID-19.
- It is highly unlikely to have the global healthcare and economic consequences of COVID-19.

How does it spread?

- The monkeypox virus is transmitted from one person to another by close contact with the skin and mucosal lesions, body fluids, respiratory droplets, and even contaminated materials such as bedding.
- The risks of infection appear to be increased in people who have multiple sexual partners, and there have been reports of increased spread at large social events where there is close physical contact.
- To date, the outbreak has been primarily in men who have intercourse with men.

What are the symptoms?

- Monkeypox is a self-limiting disease with the symptoms typically lasting from two to four weeks.
- It usually presents with an acute illness characterised by fever and general flu-like symptoms, often followed by a blister-like rash on the skin.
- The disease is rarely fatal, and cases typically resolve without requiring treatment
- Severe cases may occur especially in new-born babies, children, and people with immune system deficiencies, but these are rare.

How to prevent monkeypox infection?

The risk of coming into contact with monkeypox is low. However, it's important to be cautious and aware. The best ways to prevent monkeypox infection are to:

- Avoid contact with people who are suspected or known to be infected with the virus
- Avoid contact with bedding and other materials that may be contaminated with the virus
- Practice safe sex, including the use of condoms and dental dams

- Wash your hands frequently with soap and water.

We will keep you informed and updated

The National Institute of Communicable Diseases (NICD) is monitoring the situation closely in South Africa, and conducting a full investigation of the reported cases, to assess the risk and advise on appropriate precautions for people in South Africa.

Just as we have done over the course of the COVID-19 pandemic, Discovery Health will cooperate closely with healthcare professionals and government organisations, and we will also monitor our own data closely and share any relevant insights.

You can keep up to date on the latest available research and information on monkeypox on the NICD website, as well as access the WHO situation updates for global data.