

MPOX RESOURCES
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DISCLAIMER: This is a living document, which will be revised as new scientific evidence emerges.
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WEBINARS/VIDEOS

U.S. Centers for Disease Control and Prevention (CDC)

- [What Clinicians Need to Know about Mpox in the United States and Other Countries](#) - May 24, 2022
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 - Transcript available [here](#)
- [Mpox: Updates about Clinical Diagnosis and Treatment](#) - June 29, 2022
 - Presentation slides available [here](#)
 - Transcript available [here](#)
- [Mpox Outbreak: Updates on the Epidemiology, Testing, Treatment, and Vaccination](#) - July 26, 2022
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- [5 Things to Know about Mpox](#) - June 3, 2022

Pandemic Response Institute

- [The 2022 Mpox Outbreak: Insights from around the World](#) - July 12, 2022
 - Accessibility note: Captioning and presentation slides not available
- [Mpox: How Communications Can Prevent Misinformation and Stigma](#) - August 2, 2022
 - Accessibility note: Captioning and presentation slides not available

NYC Department of Health

- [Mpox: Information for New York City Health Care Providers](#) - June 24, 2022
 - Presentation slides available [here](#)
- [Mpox Updates: Background, Current Epidemiology, Diagnosis, Prevention, Vaccination, Useful Resources](#) - July 14, 2022
- [Mpox Updates: Treatment and Vaccination](#) - July 22, 2022
- [NYSDOH/NYCDOHMH Providers Webinar: Dermatologic Considerations for Mpox among People of Color](#) - September 29, 2022
- [Mpox and Mental Health in Ethnic Minorities](#) - September 26, 2022 12-1PM (Link TBD)

Other

- [Dr. Celine Gounder MD's FAQ page](#)

READINGS

World Health Organization (WHO)

- [Mpox Outbreak 2022](#)
- [Mpox Fact Sheet](#) - May 19, 2022
- [Public Health Advice](#) - June 28, 2022

U.S. Centers for Disease Control and Prevention (CDC)

- [2022 U.S. Map & Case Count](#)
- [Epidemiologic and Clinical Characteristics of Mpox Cases — United States, May 17–July 22, 2022](#)
 - [Human Mpox without Viral Prodrome or Sexual Exposure, California, USA, 2022](#)
- [Information For Healthcare Professionals](#) - August 19, 2022
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 - [Pets in the Home](#) - August 17, 2022
- [Considerations for Mpox Vaccination](#) - August 22, 2022
 - [Mpox and Smallpox Vaccine Guidance](#) - June 2, 2022

- [Use of JYNNEOS \(Smallpox and Mpox Vaccine, Live, Nonreplicating\) for Preexposure Vaccination of Persons at Risk for Occupational Exposure to Orthopoxviruses: Recommendations of the Advisory Committee on Immunization Practices — United States, 2022](#)
- [If You Are Sick](#) - August 11, 2022
- [Community Settings](#) - August 24, 2022
- [Frequently Asked Questions](#) - August 22, 2022

NYC Department of Health

- [How to Protect Yourself and Others from Mpox](#)
- [Preventing Mpox in Non-health-care Workplaces and Other Settings](#)
- [Cleaning and Disinfection Guidance During Mpox for Homes, Workplaces, Schools and Other Facilities](#)
- [How to Safely Wash Your Laundry if You Have Mpox](#)
- [Coping With Isolation: Tips for People Who Are Recovering from Mpox](#)

Columbia Research Unit (Division of Infectious Diseases) and Project ACHIEVE

- [Monkey Pox Webinar: Everything You Need To Know](#) - July 22, 2022
 - Accessibility note: Presentation slides do not have alternative text.

Other Readings

- [National Mpox Public Health Response Guidelines](#) (Nigerian CDC)
- [Factsheet for health professionals on mpox](#) (European CDC)
- [How to Protect Yourself and Others from Mpox](#) (NYC Department of Health)
- [Master Question List for Mpox Virus \(MPXV\)](#) (Department of Homeland Security)
- [Mpox Virus \(MPOX/MPV\)](#) (Building Healthy Online Communities (BHOC))
- [Why the mpox outbreak is mostly affecting men who have sex with men](#)
- [How does mpox spread? What scientists know](#)
- [Mpox patients should not be left to suffer when an FDA-approved drug could help](#)
- [Six Ways We Can Have Safer Sex in the Time of Mpox](#)
- [“Immense Frustration”: Mpox Spreads Amid Slow U.S. Response, Few Vaccines; WHO Declares Emergency](#)
- [We Can’t Fight Mpox “Ourselves”](#)

COMMUNITY RESOURCES

Mpox Vaccination Access Project

- This document is a non-comprehensive, crowdsourced list of where mpox vaccinations are being provided in various U.S. cities while resources continue to be scarce. See also [Mpox Vaccine Locator](#).

TPOXX Patient Access FAQ

- This document is a (non-professional) guide to acquiring TPOXX: the safe, plentiful, effective pill for the treatment of mpox.

So You Got Mpox

- This document contains anecdotal tips offered from lived experiences, community conversations, and reviewed information from the press. See also: [igotmpox.com](#) and [mpox.tips](#)

Mpox Therapeutic Support Group

- Free Zoom support group for people with mpox on Mondays, 7:30PM to 8:30PM ET
- Led by Paul Silverman, LCSW and Jake Weinraub, LMFT (email: MPXOnlineGroup@gmail.com)

RESPND-MI + Community Forum

- RESPND-MI = Rapid Epidemiologic Study of Prevalence, Network, and Demographics of Mpox Infection
- MPX NYC is a LGBTQ+ community-led survey of mpox symptoms and networks among queer and trans people in New York City.
- The study hosts a LGBTQ+ [community forum](#) on Mondays from 3PM to 4PM ET.

NYC-Specific Resources

- [Mpox in NYC - Information and Resources](#)
- [TPOXX FAQ for NYC](#)
- [Mpox \(Orthopoxvirus\)](#)
- [Mpox: What to Do When Sick](#)
- [Free Meals for New Yorkers Isolating With Mpox](#)

Community Demands

- [ACT UP Demands](#)
- [PrEP4All Demands](#)

SUMMARY

Transmission

Any person, regardless of age, gender, or sexual orientation, can acquire and spread mpox.

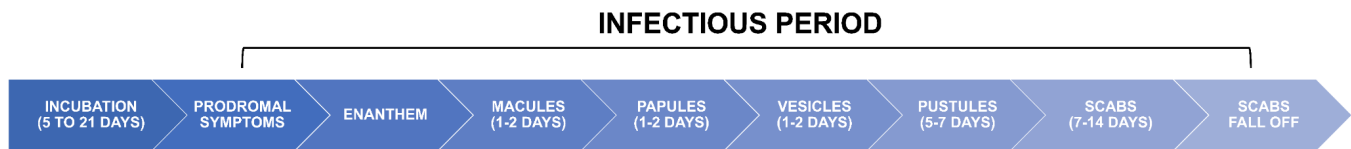
Mpox is spread primarily through direct and prolonged physical contact (skin-to-skin, mouth-to-skin, and mouth-to-mouth) with lesions, bodily fluids, and contaminated materials (fomites) such as clothing, fabrics, and hard surfaces. Transmission can also occur via large [respiratory droplets](#) or secretions (typically during extensive face-to-face contact). **These modes of transmission are inclusive of, but not limited to, sexual contact.**

Respiratory droplets are larger than aerosols (greater than or equal to 5 micrometers) and fall to the ground quickly within 6 feet of the source, whereas aerosols can stay suspended in the air for up to a few hours. Evidence of aerosol transmission of this current clade of mpox is limited and conflicting at this time.

Pregnant people infected with mpox can also transmit the virus to their fetus through the placenta. Mpox infection can occur at the same time as other infections, including COVID-19 and sexually transmitted diseases.

Although mpox is currently spreading in the sexual networks of the queer and transgender community in the United States, mpox is **not** a “gay disease.” Higher rates of mpox in the queer community, particularly queer people of color, are likely because this community is densely connected, because of pre-existing [health inequities](#), and because there is established infrastructure for sexual health programs and testing in this group. Again, **any person, regardless of gender or sexual orientation, can acquire and spread mpox.**

[Learn more](#) about why the queer and trans community is being prioritized for prevention right now. Fighting queerphobic and transphobic stigma and rhetoric is important, especially in this political climate when queer and trans people, especially trans women of color and trans children, are experiencing increasing violence and loss of rights.



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The [rash](#) changes from macules (lesions with a flat base) to papules (slightly raised firm lesions), vesicles (lesions filled with clear fluid), pustules (lesions filled with pus), and finally, to scabs or crusts which dry up and fall off. Images of lesions at various stages can be found [here](#).

Individuals are infectious and can spread the disease to others beginning from when they first experience prodromal symptoms until after their scabs fall off. Some people do not experience a prodromal phase. A CDC study on mpox cases between May and July 2022 reported [42% of 291 persons with available information had no prodromal symptoms](#). It is still unclear whether or not asymptomatic infected individuals can transmit the virus.

Prodromal symptoms include flu-like symptoms, such as:

- Fever/chills
- Fatigue
- Headache
- Body/muscle aches
- Sore throat
- Cough
- Swollen lymph nodes

Prevention

Personal protective equipment, like surgical masks and higher-quality respirators (N95, KN95, KF94, N99, etc.), face shields, safety goggles, and gloves, can reduce transmission risk for yourself and others in settings where you may be exposed to mpox. Thoroughly wash, sanitize, and disinfect shared items and spaces, including clothes, towels, bedding, **sex toys**, and **fetish gear**. Avoid sharing objects with infected individuals if possible, including utensils and fabrics. However, simply touching a contaminated object or interacting with an infected person does not lead to mpox infection, unless there is prolonged contact or contact with open wounds or mucosal membranes.

Mpox virus is a Tier 1 virus (**EPA approved disinfectants**; shareable link: tinyurl.com/DisinfectantsEVPs). Any standard laundry detergent or soap will kill the mpox virus. **Here is one option for porous non-washable surfaces**.

Many people, especially queer people and people with disabilities, have intimate skin-to-skin contact outside of sexual activity, including through kink, role playing, hugging, massaging, cuddling, co-sleeping, and caregiving. Many chronically ill and disabled people rely on intimate contact for day-to-day living. Many people, including queer people and disabled people, also rely on sex work for survival and may not have the option to reduce close contact.

When possible, avoid circumstances where you may have a lot of skin-to-skin contact, including (but not limited to) clubs, sex parties, and circuit parties. Ask close contacts and potential partners about symptoms and their recent sexual history. If possible, reduce your number of sexual partners or lessen intimate contact with individuals who are symptomatic or whose sexual history is unknown. If you choose to have sex with someone who is symptomatic, cover rashes, lesions, and open wounds with clothing or bandages and use a barrier method for protection, such as condoms.

Consider forming a **pod** for sexual activity or intimate contact. A pod is a social bubble with a small group of people who limit their non-distanced interactions to each other and agree to a set of guidelines or protocols to keep each other safe. Open communication and consent are the foundation of a pod.

There is recent evidence of **human-to-dog transmission of mpox**, suggesting that humans infected with mpox should isolate from their dogs if and when possible. There is currently no evidence of transmission from humans to other animals or from dogs to humans.

The mpox vaccine can be used as both pre-exposure and post-exposure prophylaxis.

- Vaccination within 4 days of exposure can prevent disease.
- Vaccination within 14 days of exposure can reduce symptoms.

JYNNEOS is the only vaccine being administered in the United States as of August 2022. Individuals who experience keloid scarring should request a subcutaneous injection, rather than intradermal administration of the vaccine.

Treatment

Treatment of mpox primarily entails supportive care.

- **Proctitis** (inflammation of the lining of the rectum)
 - Stool softeners
 - Lidocaine gel
 - Anti-inflammatory medications (NSAIDs) if there is no bleeding
 - **Sitz baths**
- Genital lesions: Frequent bathing and clothing changes
- Oropharyngeal lesions: Magic mouthwash (prescription required)

Severe cases are treated with **TPOXX (Tecovirimat)**. **TPOXX is available** to those with severe disease or those at risk for severe disease and illness complications.

Severe disease includes:

- **Sepsis**
- Hospitalization
- Viremia (the presence of viruses in the bloodstream)

- Lesions in areas at risk of significant scarring or stricture (narrowing of a body passage):
 - Eyes
 - Mouth
 - Pharynx
 - Rectum
 - Urethra
 - Vagina

Illness complications include:

- Secondary bacterial infection
- [Proctitis](#) with tenesmus
- Uncontrolled pain
- Rectal bleeding
- [Gastroenteritis](#)
- [Pneumonia](#)
- [Encephalitis](#)

Mpox infection can also lead to vision damage and vision loss. Children are at higher risk of complications.

Populations at risk of severe disease include individuals who are:

- HIV-positive with high viral load or low CD4 cell count
- Severely immunocompromised
- Younger than 8 years old
- Pregnant or breastfeeding
- Diagnosed with significant active exfoliative dermatologic conditions (such as psoriasis or eczema/atopic dermatitis)
- At increased risk for stricture or fistula (such as those with inflammatory bowel diseases)
- With multiple cardiac risk factors, such as high blood pressure, high cholesterol, a history of smoking, and heart disease at age ≤50 years in a first-degree relative

[The JYNNEOS vaccine is safe for most people with at risk of severe disease.](#) Clinical data and evidence from animal studies suggests the JYNNEOS vaccine is at least 85% effective in preventing mpox.

Most people with mpox recover on their own within 2 to 4 weeks. While the current clade of mpox circulating in the United States is less fatal, [deaths have been reported in 1% of people who are infected](#). This fatality rate may be higher among immunocompromised individuals. Prevention and early treatment are critical to preventing severe disease and death.

GLOSSARY

- **Aerosol** - a suspension of tiny particles in the air
- **Asymptomatic** - not having symptoms of an infection or disease
- **Clade** - a group of viruses who share similar genetic sequences and mutations and a common ancestry
- **Droplet** - liquids 5 micrometers or greater in size; respiratory droplets are produced when people talk, cough, sneeze, or sing and fall to the ground or on nearby objects or surfaces within seconds to minutes
- **Enanthem** - a rash inside the body involving the mucous membranes, like the mouth, tongue, or throat
- **Encephalitis** - inflammation of the tissues of the brain caused by an infection or an autoimmune response
- **Fomite** - surfaces or objects that have been contaminated with a pathogen, such as bacteria or viruses
- **Gastroenteritis** - also known as “stomach flu” or “stomach bug,” an infection with symptoms including watery diarrhea, abdominal pain or cramping, nausea or vomiting, and sometimes fever
- **Health Inequity** - avoidable differences in health status and outcomes between groups of people that have systemic and unjust causes, such as living conditions, access to healthcare, and discrimination
- **Incubation Period** - the time between when you are infected with something (like a virus) and when you may begin to see symptoms; the incubation period for mpox is 5 to 21 days
- **Infectious Period** - the time during which an infected individual is contagious and can transmit their infection to someone else; the infectious period for mpox starts with prodromal symptoms and continues until after the lesion scabs fall off
- **Lesion** - a wound or injury to an organ, such as a pimple, cyst, ulcer, or abscess
- **Macule** - a flat, discolored area of skin, usually less than 1 centimeter wide
- **NSAID** - Nonsteroidal anti-inflammatory drug, such as ibuprofen and naproxen
- **Papule** - a raised, discolored area of skin, usually less than 1 centimeter wide
- **Personal Protective Equipment** - equipment worn to minimize exposure to hazardous substances
- **Pharynx** - throat
- **Pneumonia** - an infection of the air sacs in one or both of the lungs
- **Post-exposure prophylaxis** - treatment to prevent infection after someone has been exposed to a virus
- **Pre-exposure prophylaxis** - treatment to prevent infection before someone has been exposed to a virus
- **Proctitis** - inflammation of the lining of the rectum (the lower end of the colon leading to the anus)
- **Prodrome** - early signs or symptoms of an infection or disease before major, diagnostically specific symptoms develop
- **Pustule** - an area of skin filled with pus, usually less than 1 centimeter wide
- **Secondary infection** - an infection that occurs during, after, or because of another infection
- **Sepsis** - the body’s extreme response to infection, which can lead to tissue damage, organ failure, and death
- **Stricture** - narrowing of a body passage, especially a tube or canal such as the esophagus or urethra
- **Tecovirimat** - the FDA-approved antiviral treatment for human smallpox disease in adults and children
- **Tenesmus** - the feeling that you need to poop, even though your bowels are already empty
- **TPOXX** - the brand name for the medication Tecovirimat
- **Transmission** - when a pathogen spreads from an infected person to an uninfected person
- **Vesicle** - an area of skin filled with clear fluid (similar to a blister), usually less than 1 centimeter wide
- **Viremia** - the presence of viruses in the bloodstream



Public health advice for gatherings during the current monkeypox outbreak

Purpose

The purpose of this document is to provide public health advice to:

- host governments, public health authorities, national or international organizers and professional staff involved in the planning and delivery of gathering events;
- people organizing smaller gatherings or attending gatherings of any size and type.

Information on this outbreak is changing rapidly as we learn more. Check [Monkeypox outbreak 2022 - Global \(who.int\)](#) for the most up to date information.

Background

- The unexpected appearance of monkeypox in several WHO regions in the initial absence of epidemiological links to areas that have historically reported monkeypox suggests that there may have been undetected transmission for some time. Epidemiological investigations are ongoing.
- Most reported monkeypox cases have presented through sexual health or other health services in primary or secondary healthcare facilities.
- The identification of confirmed and suspected cases of monkeypox with no direct travel links to previously affected areas is atypical, and even a single case of monkeypox in a newly affected country is considered an outbreak.
- For the latest information on transmission, signs and symptoms please refer to [Clinical management and infection prevention and control for monkeypox: Interim rapid response guidance](#).

Scope

- Gatherings are events characterized by the concentration of people at a specific location for a specific purpose over a set period of time, and may be public or private, planned or spontaneous, recurrent or one-off, and also of varying size, duration and visibility. They can be of different nature, including, although not limited to, sports, religious, cultural, entertainment, political, business and health-campaign events.
- During gatherings, the likely high density and mobility of attendees (crowding) represents a conducive environment for close, prolonged and frequent interactions between people. Some gatherings may lead to attendees socially interacting with people previously unknown to them. For some, these new interactions could lead to sexual activity which can play a role in the spread of the monkeypox virus.

Risk-based approach for gatherings

Principles

- WHO recommends that the decision-making process related to holding, modifying, postponing or cancelling gatherings of any size and type should rely on a risk-based approach, tailored to the characteristics of the event under consideration and be repeated at regular intervals.
- The risk-based approach entails three steps:
 1. Risk evaluation: identification and quantification of the baseline risks based on the characteristics of the event and the context in which it takes place;
 2. Risk mitigation: application of a package of precautionary measures aimed at decreasing the baseline risk;
 3. Risk communication: proactive dissemination of information on the measures adopted, their rationale and purpose, and on how the relevant decisions were taken.
- In the context of the current outbreak, monkeypox-associated risks should be considered and factored in when planning a gathering event.
- Postponing or cancelling gatherings in areas where monkeypox cases have been detected is not required as a default measure.

Monkeypox-associated risks during the current outbreak

- In the context of the current monkeypox outbreak, cases have been primarily identified among some gay, bisexual and other men who have sex with men including those who have reported recent sex with a new partner or multiple partners.
- Key transmission routes include skin-to-skin, mouth-to-mouth and mouth-to-skin contact during sexual activity. Transmission can also occur through skin-to-skin contact not related to sexual practices, face-to-face contact via respiratory droplets and from contaminated surfaces or material; it is still unclear if infected people with no symptoms can transmit the monkeypox virus, making it important for anyone attending gatherings to exert additional care.

Public health advice for decision-makers (authorities and event organizers)

The following precautionary measures can be considered to decrease risk of monkeypox transmission associated with gathering events:

- Health authorities are invited to:
 - identify those events in their jurisdiction that are most likely to be associated with risk of monkeypox virus transmission, based on the prevailing modes of transmission and the likely profile of the attendees;
 - ensure that monkeypox is included among the diseases regularly reported through routine surveillance; WHO has published [guidance](#) on surveillance, case investigation and contact tracing for monkeypox;
 - make provision to ensure prompt isolation and adequate clinical management of identified cases; WHO has published [guidance](#) in this regard;
 - keep the general population and event organizers informed on the evolution of the outbreak, and adequately monitor and address rumours and misinformation about monkeypox.
- Event organizers should establish a liaison with the relevant health authorities and be aware of the epidemiology of monkeypox in the host area.
- Gatherings should be used as opportunities for information outreach and for risk communication and community engagement (RCCE) activities; these should also target individual behaviours associated with side gatherings, unplanned congregation, and unstructured socialization in public or private spaces.
- Health authorities and event organizers should facilitate the adoption of appropriate public health and social measures, including those aimed at infection prevention and control, to decrease the risk of transmission of monkeypox virus in conjunction with the event.

- Staff responsible for dealing with people who fall ill at the event should be provided with information on how to identify and manage people with signs and symptoms consistent with monkeypox, and with the relevant personal protective equipment.
- RCCE activities including the development of communication materials for travellers on signs and symptoms consistent with monkeypox, on infection prevention and control measures, and on how to seek medical care in countries where monkeypox cases have been reported, should be considered at points of entry.

Public health advice for people organizing smaller gatherings or attending gatherings of any size and type

- People with signs and symptoms consistent with monkeypox should refrain from close contact with any other individual, should avoid attending gatherings, and should follow advice issued by relevant health authorities.
- Close contact, including sexual contact, with someone who has signs and symptoms consistent with monkeypox should be avoided.
- Anyone who feels they may have been exposed to monkeypox should exercise additional care.
- Information specifically designed for communities of gay, bisexual and other men who have sex with men is now available, including updated public health [advice](#).

Gatherings attendees should always be reminded to apply individual-level responsibility to their decisions and actions, with the aim of preserving their health, that of the people they interact with, and ultimately that of their community.

WHO continues to monitor the current monkeypox closely for any changes that may affect the advice included in this document. Should any factors change, WHO will issue a further update.

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WHO reference number: WHO/MPX/Gatherings/2022.1



Social Gatherings, Safer Sex and Monkeypox

Monkeypox is a disease caused by a virus (monkeypox virus) not commonly seen in the United States. Monkeypox can cause a rash which may look like pimples or blisters, sometimes with a flu-like illness. While CDC works to contain the current outbreak and learn more about the virus, it is important that you have information so you can make informed choices when you are in spaces or situations where monkeypox could be spread. As new information becomes available, CDC will continue to update the CDC monkeypox website to help keep you informed.

How is monkeypox spread?

Monkeypox can spread to anyone through close, personal, often skin-to-skin contact including:

- Direct contact with monkeypox rash, scabs, or body fluids from a person with monkeypox. We believe this is currently the most common way that monkeypox is spreading in the U.S.
- Touching objects, fabrics (clothing, bedding, or towels), and surfaces that have been used by someone with monkeypox.
- Contact with respiratory secretions.

This contact can happen during intimate contact including:

- Oral, anal, and vaginal sex or touching the genitals (penis, testicles, labia, and vagina) or anus (butthole) of a person with monkeypox.
- Hugging, massage, and kissing.
- Prolonged face-to-face contact.
- Touching fabrics and objects during sex that were used by a person with monkeypox and that have not been disinfected, such as bedding, towels, fetish gear, and sex toys.

What are the symptoms of monkeypox?

- You may experience all or only a few of the symptoms of monkeypox.
- Most people with monkeypox will get a rash. Some people have developed a rash before (or without) flu-like symptoms.
- Monkeypox symptoms usually start within 3 weeks of exposure to the virus.
 - The flu-like symptoms may include fever, headache, muscle aches and backache, sore throat, cough, swollen lymph nodes, chills, or exhaustion.
 - If someone has flu-like symptoms, they will usually develop a rash 1-4 days later.
- The rash may be located on or near the genitals or anus but could also be on other areas like the hands, feet, chest, or face.
 - The rash will go through several stages, including scabs, before healing.
 - The rash can look like pimples or blisters and may be painful or itchy.
 - The rash may also be inside the body, including the mouth, vagina, or anus.



Monkeypox can be spread from the time symptoms start until the rash has healed, all scabs have fallen off, and a fresh layer of skin has formed. This can take several weeks.

What are researchers investigating?

- If the virus can be spread when someone has no symptoms
- If the virus could be present in semen (cum), vaginal fluids, and fecal matter (poop)
- How effective the current smallpox vaccines are for the prevention of monkeypox illness



How can a person lower the chance of getting monkeypox at places like raves, parties, clubs, and festivals?

When thinking about what to do, seek out information from trusted sources like the local health department. Second, consider how much close, personal, skin-to-skin contact is likely to occur at the event you plan to attend. If you feel sick or have a rash, do not attend any gathering, and see a healthcare provider.

- Festivals, events, and concerts where attendees are fully clothed and unlikely to share skin-to-skin contact are safer. However, attendees should be mindful of activities (like kissing) that might spread monkeypox.
- A rave, party, or club where there is minimal clothing and where there is direct, personal, often skin-to-skin contact has some risk. Avoid any rash you see on others and consider minimizing skin-to-skin contact.
- Enclosed spaces, such as back rooms, saunas, sex clubs, or private and public sex parties where intimate, often anonymous sexual contact with multiple partners occurs, may have a higher likelihood of spreading monkeypox.



How can a person lower their risk during sex?

Talk to your partner about any recent illness and be aware of new or unexplained rash on your body or your partner's body, including the genitals and anus. If you or your partner have recently been sick, currently feel sick, or have a new or an unexplained rash, do not have sex and see a healthcare provider.

If you or a partner has monkeypox, the best way to protect yourself and others is to avoid sex of any kind (oral, anal, vaginal) and do not kiss or touch each other's bodies while you are sick, especially any rash. Do not share things like towels, fetish gear, sex toys, and toothbrushes.

If you or your partner have (or think you might have) monkeypox and you decide to have sex, consider the following to reduce the chance of spreading the virus:

- Have virtual sex with no in-person contact.
- Masturbate together at a distance of at least 6 feet, without touching each other and without touching any rash.
- Consider having sex with your clothes on or covering areas where rash is present, reducing as much skin-to-skin contact as possible. If the rash is confined to the genitals or anus, condoms may help; however, condoms alone are likely not enough to prevent monkeypox.
- Avoid kissing.
- Remember to wash your hands, fetish gear, sex toys and any fabrics (bedding, towels, clothing) after having sex.
- Having multiple or anonymous sex partners may increase your chances of exposure to monkeypox. Limiting your number of sex partners may reduce the possibility of exposure.
- Avoid touching the rash. Touching the rash can spread it to other parts of the body and may delay healing.

What should a person do if they have a new or unexplained rash or other symptoms?

- Avoid sex or being intimate with anyone until you have been checked out by a healthcare provider.
- If you don't have a provider or health insurance, visit a public health clinic near you.
- When you see a healthcare provider, wear a mask, and remind them that this virus is circulating in the area.
- Avoid gatherings, especially if they involve close, personal, skin-to-skin contact.
- Think about the people you have had close, personal, or sexual contact during the last 21 days, including people you met through dating apps. To help stop the spread, you might be asked to share this information if you have received a monkeypox diagnosis.

For more information, visit www.cdc.gov/monkeypox