

2022 Monkeypox Outbreak

Kavita K. Trivedi, MD

Communicable Disease Controller


Alameda County Public Health Department

7/12/2022

Monkeypox

- Monkeypox is a rash disease caused by the monkeypox virus
 - It is related to smallpox and the symptoms are similar but milder than smallpox
 - It can be prevented with vaccination, but vaccine supply is currently limited
- Monkeypox is rarely exported from endemic areas
 - The virus is thought to spread to people from infected animals in endemic areas
 - Past US cases have been associated with international travel or imported rodents
- Human-to-human transmission occurs via skin contact with lesions, body fluids or contaminated clothes/linens, or from respiratory droplets
 - **Monkeypox is much less contagious than COVID-19**





Estimated U.S., California and Alameda County Cases as of 07/11/2022

- **Total US cases: 866, from 41 states**
- **Total California cases: 148**
 - Median age=38, range (23-76)
 - 1 hospitalization, no deaths
 - Risk factors: international travel, close/intimate contact with known monkeypox case, participation in venues with multiple sexual partners
- **Total Alameda County cases: 12**
 - Median age 35
 - All are gay men and other men who report sex with men, including transgender men*
 - 2 have completed isolation
 - 3 treated with antiviral medication with good results
 - 35 close contacts actively monitored for symptoms
 - 24 received PEP including 3 HCW (2 of which were categorized as high-risk exposures)

**Please note: anyone can get monkeypox*



Current Outbreak Response

- Surveillance: case identification and reporting to CDPH, approval & coordination of lab testing by CDPH
- Containment: isolation of cases, contact tracing
- Vaccination strategies:
 - Post-exposure Prophylaxis (PEP): Vaccine following exposure to help prevent illness
 - Outbreak Response Post-Exposure Prophylaxis (PEP++): People with certain high-risk behaviors are more likely to have been exposed to monkeypox even if there is no documented exposure to someone with monkeypox
 - Pre-exposure Prophylaxis (PrEP): At this time only laboratorians who handle monkeypox specimens are recommended to receive PrEP
- Outreach: focus is on those most affected; also raising general awareness

[Considerations for Monkeypox Vaccination](#) | [Monkeypox](#) | [Poxvirus](#) | [CDC](#)



Berkeley PEP and PEP++ Pods

- ACPHD partnered with Berkeley Public Health and East Bay AIDS Center (EBAC) to vaccinate employees and persons at a venue on 6/29/2022
 - 24 persons were vaccinated including 13 (54%) Alameda County residents
 - HIV testing provided by EBAC
 - 1 ACPHD PHN participated
- ACPHD partnered with Berkeley Public Health and EBAC in vaccinating persons at a venue on 7/6/2022
 - 194 persons were vaccinated including persons that were sent by ACPHD for PEP
 - 63 (32%) Alameda County residents
 - HIV testing provided by EBAC
 - 1 ACPHD PHNs, 3 registry RNs participated and ran the pod
 - 100 persons turned away due to limited supply



Public Health Response Changes

- Some partners will start vaccinating their own patients with PEP, PEP++ if they have capability (some can't store vaccine) – uninsured will be directed to ACPHD

Residents are eligible for a JYNNEOS vaccine if they identify as:

- Close contact of someone suspected/confirmed with monkeypox
 - Self-report as a close contact of someone who has suspected/confirmed monkeypox
 - Receive a notification from a venue or event of a potential exposure to someone who has suspected/confirmed monkeypox
 - A laboratory worker who routinely handles monkeypox virus samples for diagnosis or testing purposes
 - A healthcare professional who has been identified with a high-risk/intermediate risk occupational exposure to someone who is confirmed with monkeypox according to the [CDC exposure risk assessment](#)
- Some partners will not have to wait for ACPHD to approve testing and now have access to commercially available tests
 - One partner has developed their own LDT
 - One partner using Labcorp

[Monkeypox \(acphd.org\)](https://www.acphd.org/monkeypox)



Monkeypox

Clinical Guidance for Monkeypox

Monkeypox

Public health officials are tracking multiple cases of monkeypox that have been reported in several countries that don't normally report monkeypox ([view global map](#)), including the United States. For travelers, see: [Travel Health Notice for Monkeypox in Multiple Countries](#).

It's not clear how people were exposed to monkeypox, but early data suggest that gay, bisexual, and other men who have sex with men make up a high number of cases. However, anyone who has been in close contact with someone who has monkeypox is at risk.

What You Should Do

Anyone with a rash that [looks like monkeypox](#) should talk to their healthcare provider, even if they don't think they had contact with someone who has monkeypox. People who may be at higher risk might include but are not limited to those who:

[Monkeypox \(acphd.org\)](https://www.acphd.org)



Ongoing Public Health Response

- Increase number and frequency of PEP and PEP++ Pods as more vaccine becomes available
 - Partner with clinics and community organizations
 - Continue pods focusing on impacted populations
- Continue contact tracing and close contact follow up as partners do not have the bandwidth to conduct active surveillance
- Continue allocating vaccine to healthcare systems
- Find partners to administer antiviral medications under IND*

*IND: FDA Investigational New Drug application



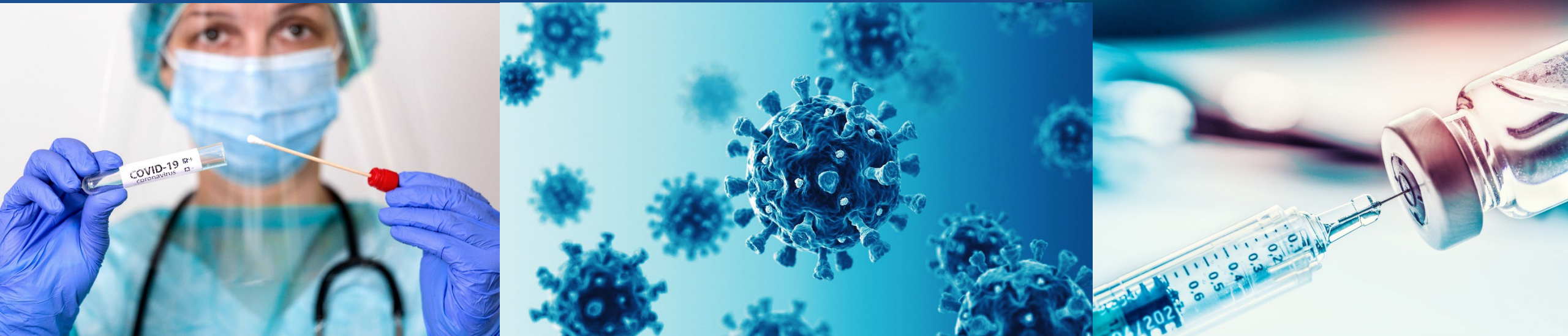
What can County Residents do?

- Anyone with a rash [like monkeypox](#) should talk to a healthcare provider
- People who may be at elevated risk include those who:
 1. Had contact with someone with monkeypox or a rash that looked like monkeypox
 2. Had skin contact with someone in a social network experiencing monkeypox activity
 - Includes gay men and other men who have sex with men meeting partners through websites, apps, or social events
 3. Traveled outside the US to a country with monkeypox activity
- Many other illnesses that cause rashes or skin lesions
 - Syphilis and herpes are much more common and can appear similar
 - Most rashes in those without known exposure risk are unlikely to be monkeypox

[Monkeypox \(acphd.org\)](http://acphd.org)



Behavioral Health - Environmental Health – Office of Agency Director - Public Health
Emergency Medical Services - Homeless Care & Coordination - HealthPAC
Center for Healthy Schools & Communities



COVID-19 Update

July 12, 2022



Alameda County
Health Care Services Agency

Behavioral Health | Environmental Health | Office of Agency Director | Public Health

Data & Policy Update



Epidemic Data Key Points

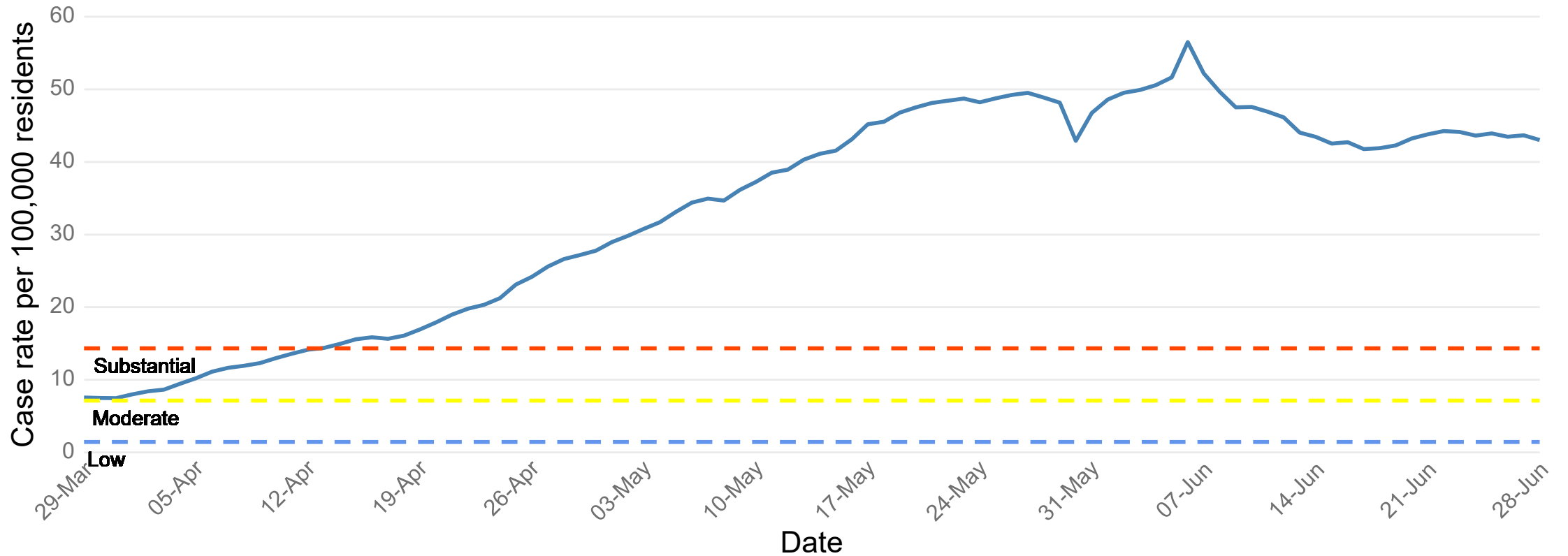
- 43 cases per 100,000 residents per day
- 14% test positivity
- ~6500 reported lab tests per day
- 135 hospitalized, 16 ICU
- 67 deaths since April 1st
- Spring wave having second peak after period of improvement in June
 - May be due to emergence of BA.5
- Overall, conditions reflect increasing return to pre-pandemic activities

Visit the COVID-19 [dashboard](#) for more data





Alameda County COVID-19 Daily Case Rate



— New cases per 100,000 per day, 7-day average, by episode date

Includes City of Berkeley

Source: CalREDIE Data Distribution Portal download July 6, 2022



Alameda County Health Care Services Agency

Behavioral Health

Environmental Health

Office of Agency Director

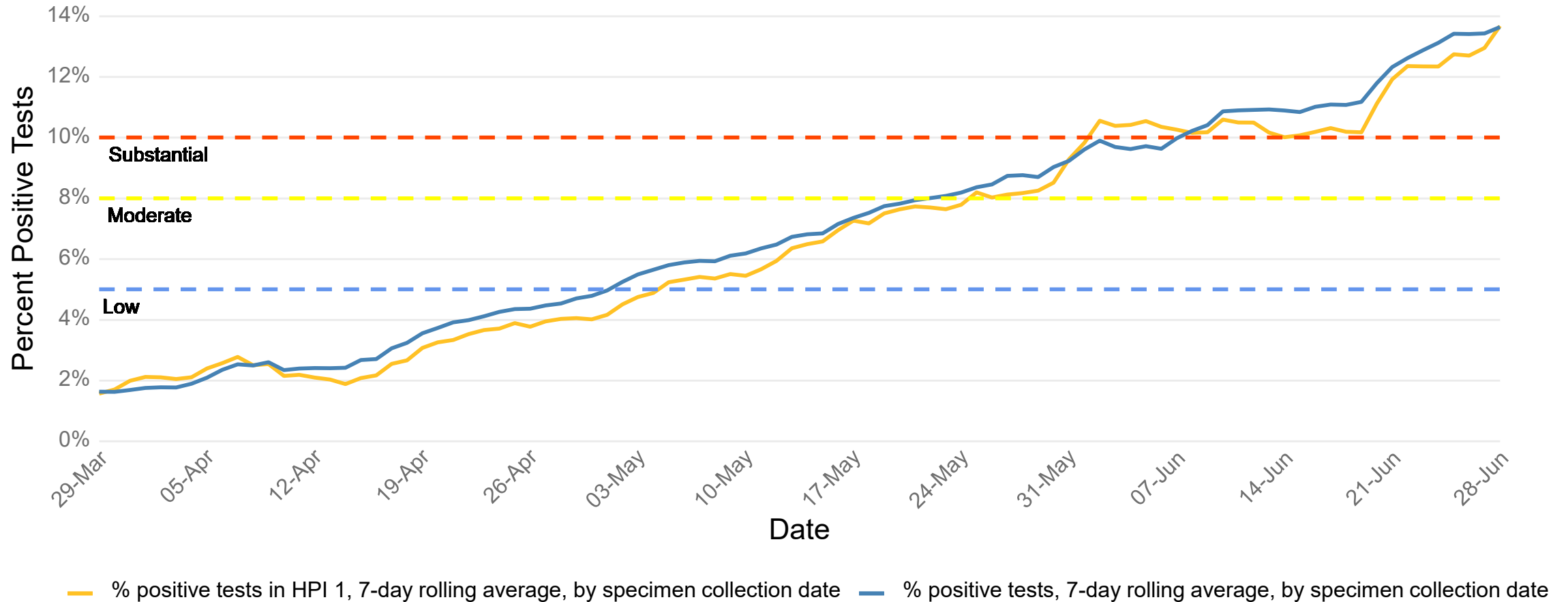
Public Health

Transmission thresholds are adapted from the Centers for Disease Control and Prevention weekly

thresholds, available at: <https://www.cdc.gov/covid-data-tracker/#county-view>



Alameda County COVID-19 Test Positivity



Includes City of Berkeley

Source: Source: CalREDIE Data Distribution Portal download July 6, 2022



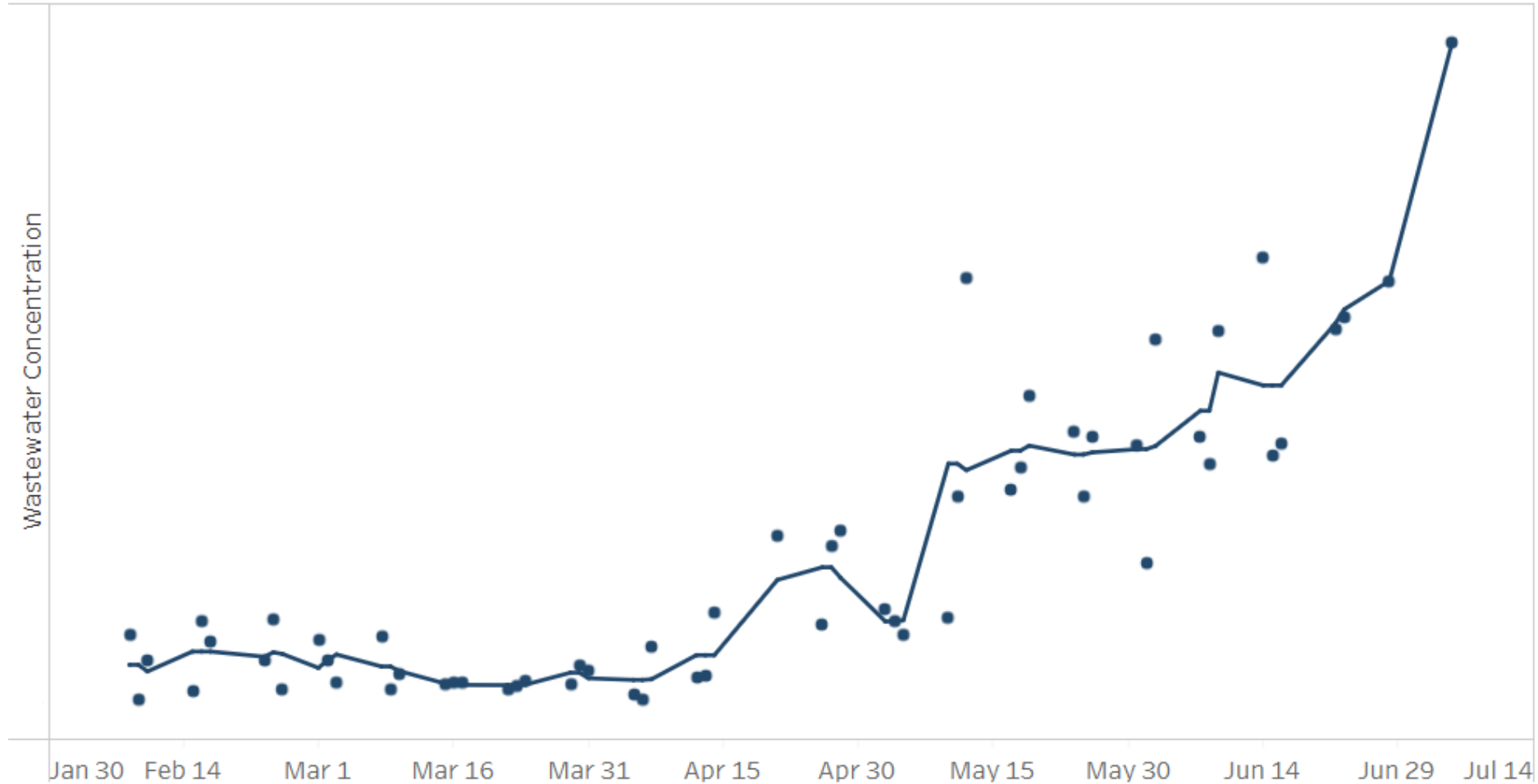
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Wastewater Monitoring to 7/5 – East Bay Municipal Utilities District

Concentration Unit: SARS-CoV-2/PMMoV

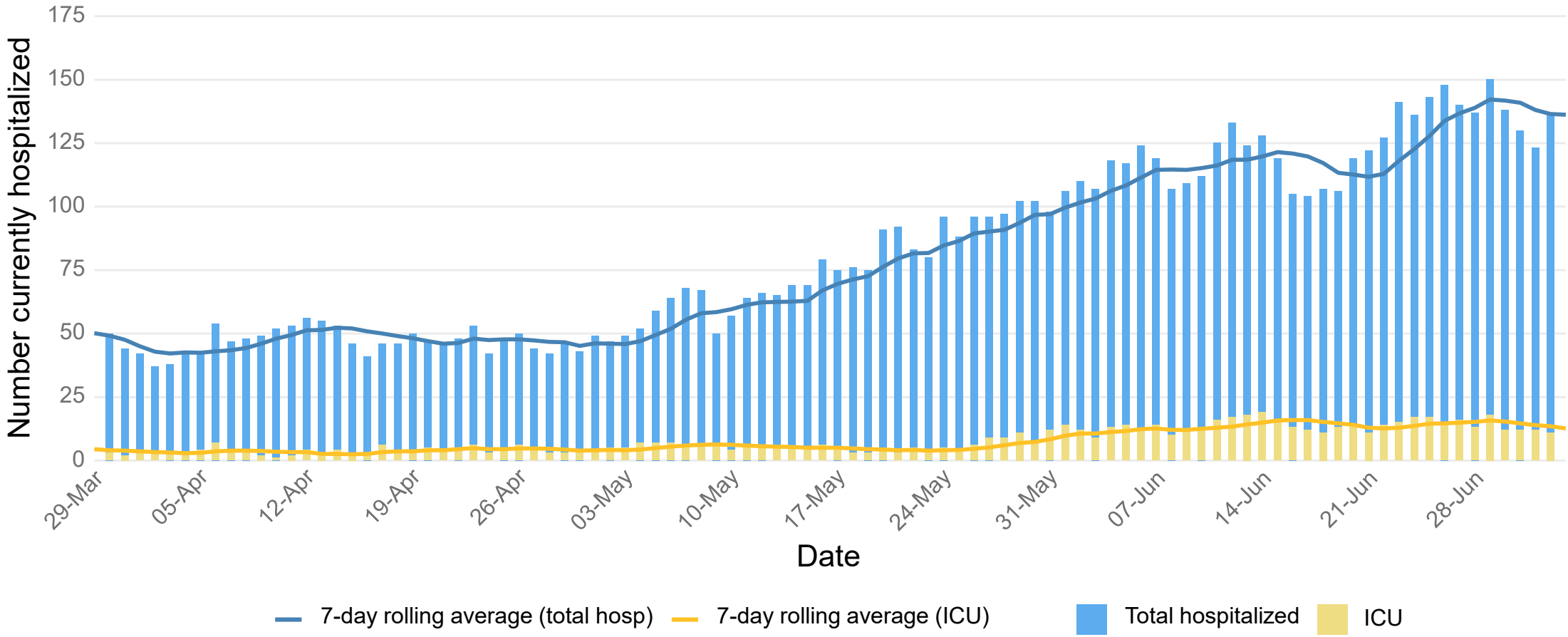
Data Source: CDPH Drinking Water and Radiation Lab



[Cal-SuWers Network Dashboard](#) accessed 7/11/22



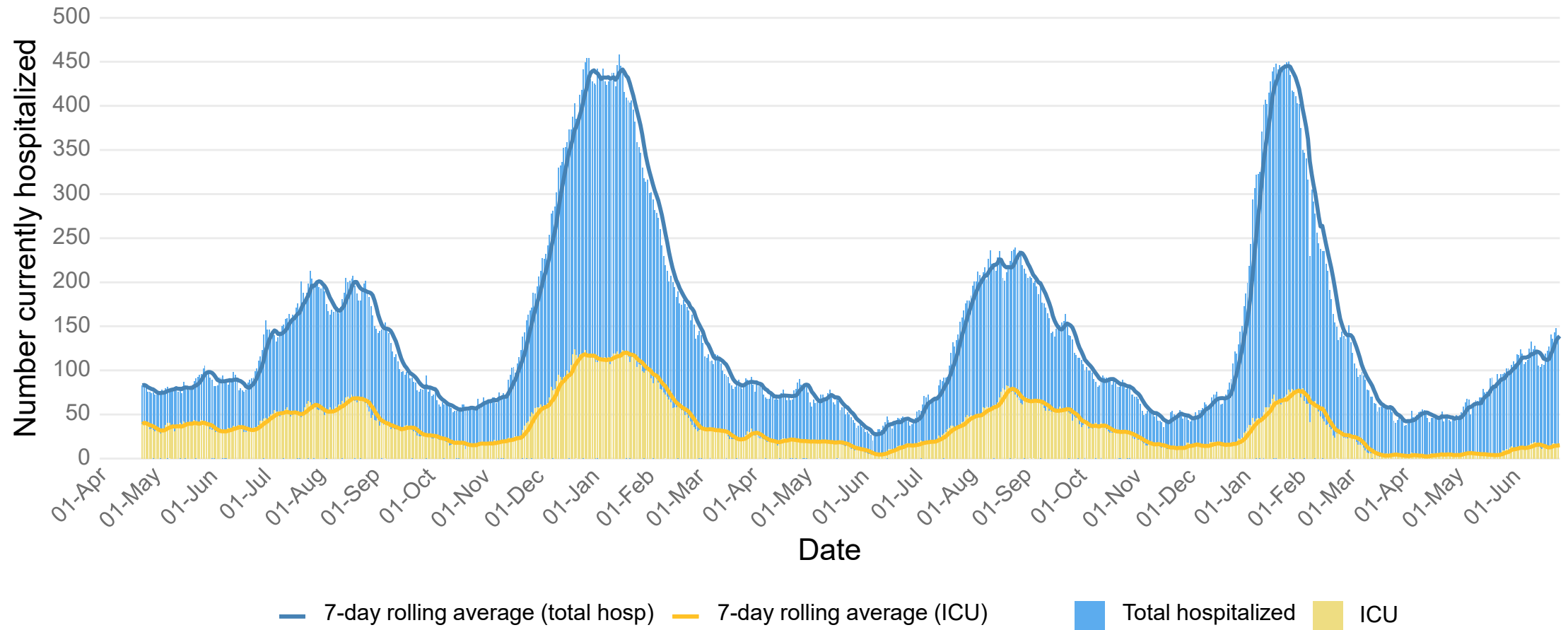
Patients with COVID-19 Currently Hospitalized in Alameda County



Source: California Department of Public Health

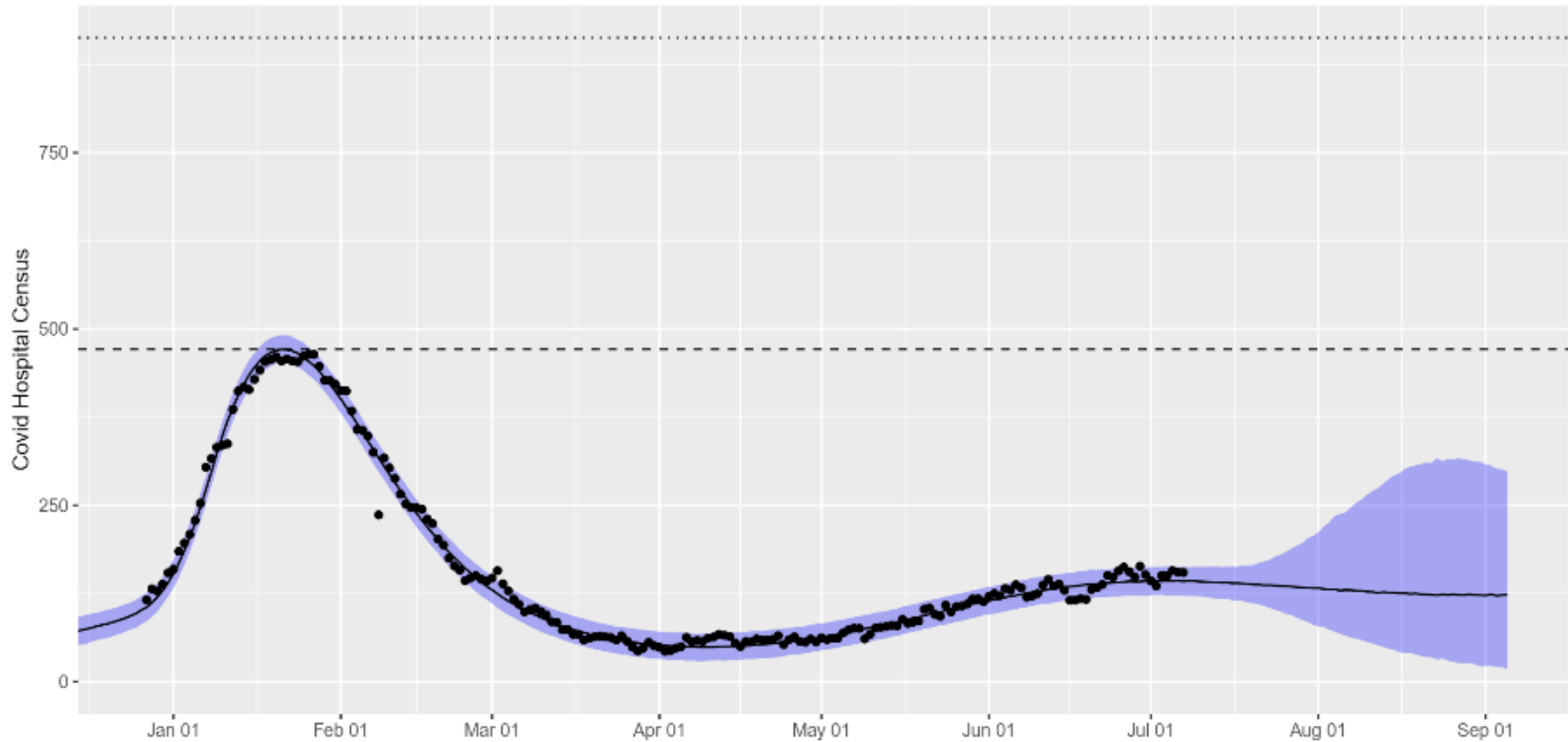


Patients with COVID-19 Currently Hospitalized in Alameda County, 2020-2022



Source: California Department of Public Health

Alameda County Projected Hospitalizations - LEMMA 7/9/22



Local Epidemic Modeling for Management & Action
[LEMMA-Forecasts/All_CA_county_Forecasts.pdf at master · LocalEpi/LEMMA-Forecasts · GitHub](#)

Dashed line is county pre-Omicron peak (including incidental)
Dotted line is California per capita average pre-Omicron peak (including incidental)



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% at Least One Dose

91.4%

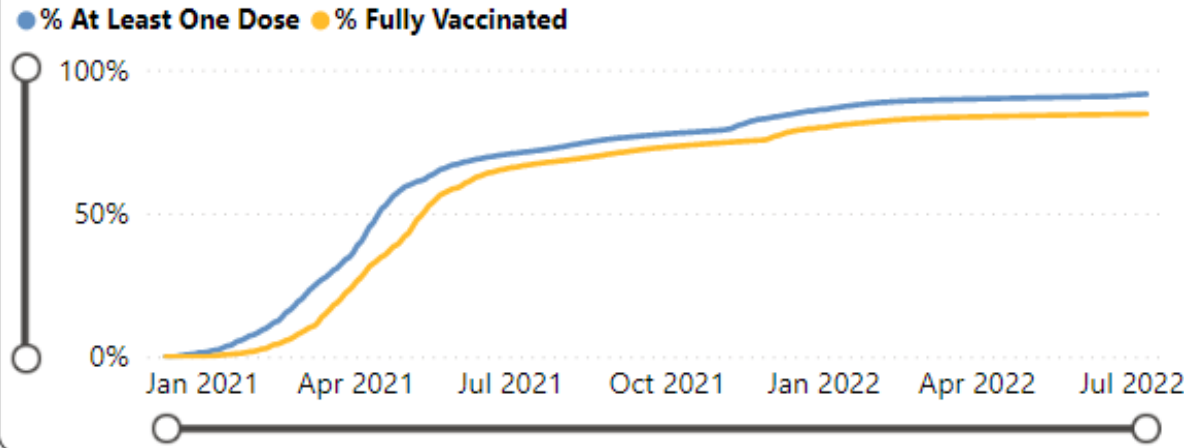
See Counts

% Fully Vaccinated

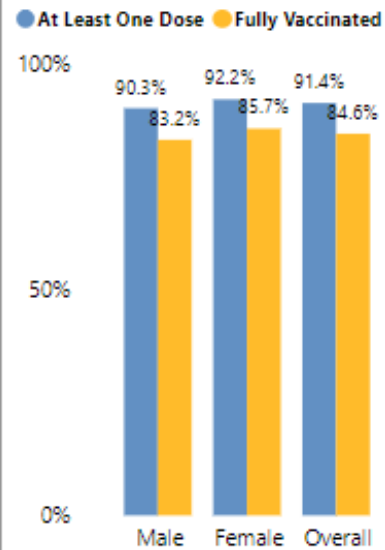
84.6%

See Boosters

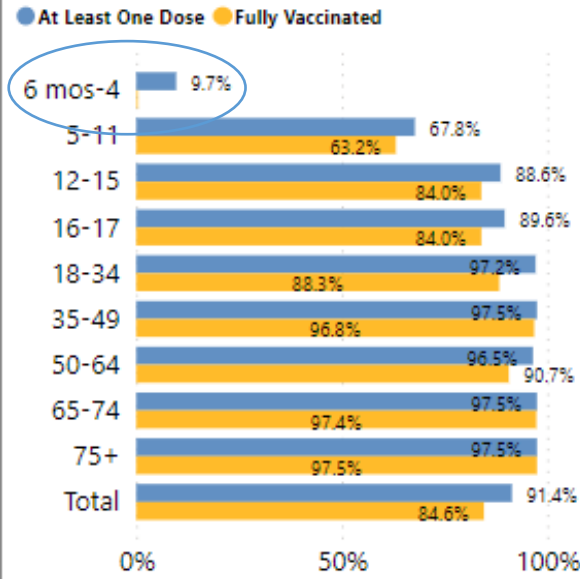
Alameda County Cumulative Doses (% of Total Population)



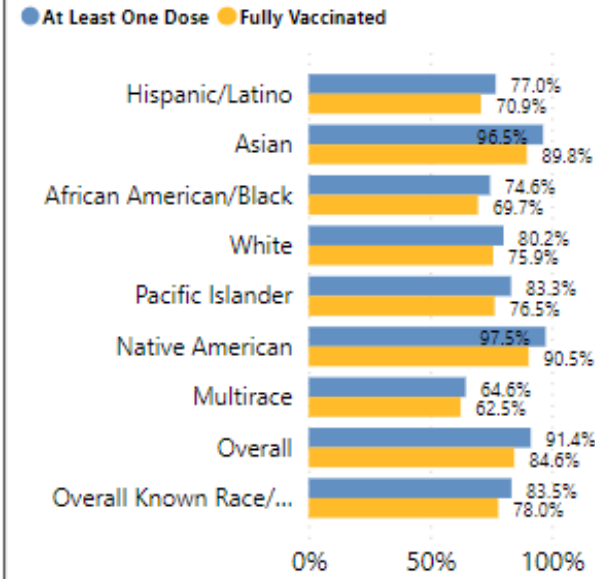
Doses by Gender (% of Total Population)



Doses by Age Group (% of Total Population)



Doses by Race/Ethnicity (% of Total Population)



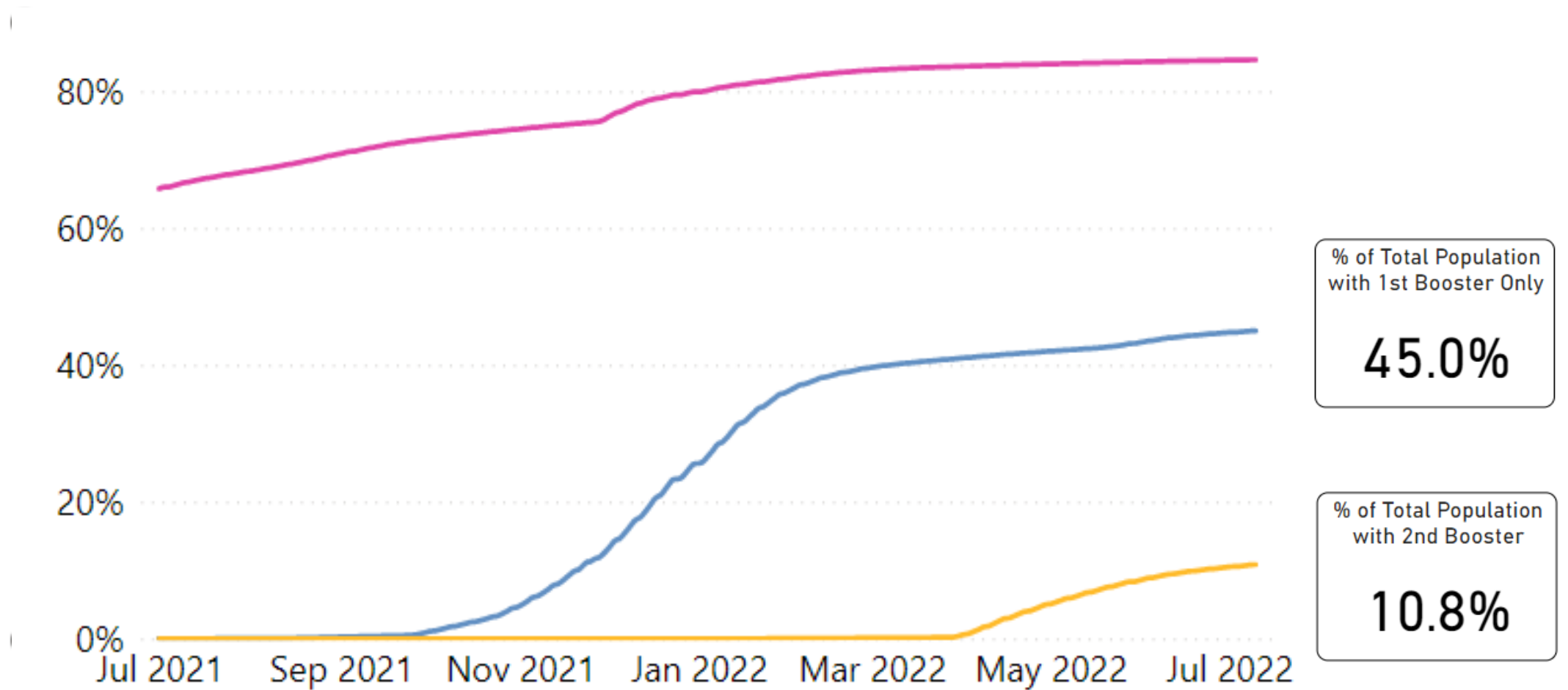
% of Total Population

Place	At Least One Dose	Fully Vaccinated
Alameda	91.9%	86.1%
Albany	93.7%	86.8%
Ashland	78.2%	73.0%
Berkeley	97.5%	93.9%
Castro Valley	92.7%	86.0%
Cherryland	81.9%	76.3%
Dublin	94.4%	86.0%
Emeryville	86.5%	78.8%
Fairview	87.2%	82.4%
Fremont	94.0%	86.4%
Hayward	89.1%	82.8%
Hayward Acres	77.9%	72.6%
Livermore	85.5%	79.2%
Newark	88.8%	81.8%
Oakland	89.3%	82.6%
Piedmont	97.5%	97.5%
Pleasanton	95.8%	88.6%
Remainder of County	63.8%	59.2%
San Leandro	91.2%	85.9%
San Lorenzo	89.7%	84.7%
Sunol	92.6%	85.9%
Union City	89.6%	83.3%



Alameda County COVID-19 Booster Vaccine Progress

● Cumulative Fully Vaccinated ● Cumulative 1st Booster ● Cumulative 2nd Booster



Key Local Policy Updates

- Mask requirement lifted 6/24 after key metrics improved or stabilized
 - Subsequent increases in metrics reflect ongoing spring wave
 - Indoor masking remains strongly recommended
- Quarantine policy now aligned with CDPH & CalOSHA
 - Quarantine of close-contacts not required except in high-risk settings
 - Anyone in a shared indoor airspace with an infectious person is considered exposed to COVID-19
 - Masking around others for 10 days and testing within 3-5 days recommended after an exposure
 - Isolation of persons with COVID-19 infection is still required

Updated State K-12 School Guidance for 22-23

- Improve indoor air quality
- Follow mask guidance for general public
- Support antigen testing access
- Support hand hygiene
- Stay home when sick
- Notify families about COVID-19 exposures
 - Asymptomatic exposed children can stay in school; masks and testing recommended
- School and class closures for COVID-19 should only be used as last resort

[K-12-Guidance-2022-23-School-Year \(ca.gov\)](#)

Testing update

- Persistent high case rates, exposures and workplace disruptions highlight need for ongoing testing support for highly impacted communities
- County-supported testing sites have high test positivity
 - They reach residents with COVID-19 who need a test
- New County testing contracts (July 1- September 30) focus on rapid testing with decrease in reliance on lab processing
 - Community testing infrastructure is being disrupted by shifting funding landscape and uncertain state and federal resources
 - Carryover funding covering gaps for now

STAY INFORMED

THANK YOU!



JOIN THE CONVERSATION

@Dare2BWell



Community Advisory Group

Second Tuesday at 5:30 PM (monthly)

<https://covid-19.acgov.org/community-advisory-group>



Alameda County Health Care Services Agency Bi-Weekly COVID-19 Updates

Includes presentations & newsletters

<https://covid-19.acgov.org/response>



COVID-19 Website

Dashboard, Testing, Vaccines, and More

<https://covid-19.acgov.org>

