



## **Monkeypox Factsheet**

### **August 19, 2022**

#### **What is monkeypox?**

Monkeypox is a rare disease caused by a viral infection. The monkeypox virus is part of the same family of viruses which causes smallpox. It is not related to chickenpox. It is rare for monkeypox to be fatal.<sup>1</sup>

#### **What are the symptoms of monkeypox?**

While some infected with monkeypox have mild symptoms, others may develop serious symptoms and may need to be hospitalized. People who are pregnant, children and the immunocompromised are at higher risk for severe symptoms and complications.

Common symptoms of monkeypox include fever, headache, muscle aches, back pain, low energy and swollen lymph nodes. This is followed or accompanied by the development of a rash which can last for two to three weeks on the face, palms of the hands, soles of the feet, eyes, mouth, throat, groin and genital and/or anal regions of the body. The number of lesions can range from one to several thousand. Lesions begin flat, then fill with liquid before they crust over, dry up and fall off, with a fresh layer of skin forming underneath.

Symptoms generally last two to three weeks and usually go away on their own. People remain infectious until all of the lesions have crusted over, the scabs fallen off and a new layer of skin has formed underneath.”<sup>2</sup>

#### **How is monkeypox spread?**

Monkeypox spreads through close contact with someone who has a monkeypox rash, including through face-to-face, skin-to-skin, mouth-to-mouth or mouth-to-skin contact, including sexual contact.

Environments and objects can be contaminated with the monkeypox virus. For example, when an infectious person touches clothing, bedding, towels and other objects, someone else who touches these items can become infected. It is also possible to become infected from breathing in skin flakes or virus from clothing, bedding or towels.

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<sup>1</sup> [“About Monkeypox.”](#) Centers for Disease Control and Prevention, Updated July 22, 2022.

<sup>2</sup> [“What are the symptoms of Monkeypox?”](#), World Health Organization, Updated August 4, 2022.

Lesions or sores in the mouth can be infectious, meaning the virus can spread through direct contact with the mouth, respiratory droplets and possibly through short-range aerosols.<sup>3</sup>

Monkeypox can be spread from a pregnant person to their fetus.

Scientists are still studying the possibility of other forms of transmission.<sup>4</sup>

### **How is monkeypox prevented?**

- Avoid close, skin-to-skin contact with people who have a rash that looks like monkeypox.
- Avoid contact with objects and materials that a person with monkeypox has used.
- Wash your hands often.<sup>5</sup>

### **What treatment and vaccines are available?**

The CDC recommends vaccination for people who have been exposed to monkeypox and people who may be more likely to get monkeypox. The preferred vaccine to protect against monkeypox is JYNNEOS, a two-dose vaccine. It takes 14 days after getting the second dose of JYNNEOS for its immune protection to reach its maximum. The ACAM2000 vaccine may be an alternative to JYNNEOS. ACAM2000 is a single-dose vaccine, and it takes four weeks after vaccination for its immune protection to reach its maximum. However, it has the potential for more adverse side effects than JYNNEOS. It is not recommended for those who are immunocompromised. Consult your healthcare provider to see if you should get vaccinated against monkeypox, and which vaccine you should get.<sup>6</sup>

There are no treatments specifically for monkeypox virus infections. However, antiviral drugs and vaccines developed to protect against smallpox may be used to prevent and treat monkeypox virus infections. Antivirals, such as tecovirimat (TPOXX), may be recommended for people who are at risk of becoming severely ill.<sup>7</sup>

### **What protections should be in place at congregate living workplaces?**

Congregate living settings includes correctional and detention facilities, long-term care, dormitories higher education institutions, residential substance use treatment facilities and other similar settings.

The following steps should be taken to minimize monkeypox exposure:

- Provide clear information to staff and residents, including the potential for transmission through close, physical contact, including sexual activity. Provide prevention guidance including considerations for safer sex. Keep messages fact-based to avoid introducing stigma when communicating about monkeypox.
- Test and medically evaluate staff and residents who are suspected to have monkeypox.

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<sup>3</sup> [“How Does Monkeypox Spread From Person To Person?”](#) World Health Organization, Updated August 4, 2022.

<sup>4</sup> [“How it Spreads.”](#) Centers for Disease Control and Prevention, Updated July 29, 2022.

<sup>5</sup> [“Monkeypox Prevention Steps.”](#) Centers for Disease Control and Prevention, Updated July 29, 2022.

<sup>6</sup> [“Vaccine Protection.”](#) Centers for Disease Control and Prevention, Updated August 5, 2022.

<sup>7</sup> [“Treatment.”](#) Centers for Disease Control, Updated August 10, 2022.

- Facilities should monitor the health of any staff or residents who might have had close contact with someone who has monkeypox. Those who may have been exposed should be advised to monitor for symptoms. Contact tracing can help prevent additional cases.
- People identified to have monkeypox should remain isolated away from others until there is full healing of all lesions, with formation of a fresh layer of skin, which typically takes two to four weeks. Consult your state, tribal, local or territorial health department before discontinuing isolation.
- Some congregate living facilities can provide isolation on-site while others may need to move residents off site to isolate. Isolation spaces should have a door that can be closed and a dedicated bathroom that other residents do not use. Multiple residents who test positive for monkeypox can stay in the same room.
- Residents with monkeypox should wear a well-fitting disposable mask over their nose and mouth and cover any skin lesions with long pants and long sleeves, bandages, or a sheet or gown if they need to leave the isolation area or if isolation areas are not yet available.
- Employers should provide flexible sick leave policies and remind staff to not come into work if they have any symptoms.
- Limit the number of staff who are entering the isolation areas to those who are essential to isolation area operations.
- Manage waste from isolation areas (i.e., handling, storage, treatment and disposal of soiled PPE, patient dressings, etc.) in accordance with [U.S. Department of Transportation \(DOT\) Hazardous Materials Regulations \(HMR; 49 CFR, Parts 171-180\)](#).
- **Ensure access to handwashing.** Soap and water or hand sanitizer with at least 60% alcohol should be available at all times and at no cost to all staff and residents. Anyone who touches lesions or clothing, linens or surfaces that may have had contact with lesions should wash their hands immediately.
- **Clean and disinfect the areas where people with monkeypox spent time.** Avoid activities that could spread dried material from lesions (e.g., use of fans, dry dusting, sweeping or vacuuming) in these areas. Perform disinfection using an EPA-registered disinfectant with an Emerging Viral Pathogens claim, which may be found on [EPA's List Q](#). Linens can be laundered using regular detergent and warm water. Soiled laundry should be gently and promptly contained in a laundry bag and never be shaken or handled in a manner that may disperse infectious material. Cover mattresses in isolation areas (e.g. with sheets, blankets or a plastic cover).
- **Provide appropriate personal protective equipment (PPE).** Employers are responsible for ensuring that workers are protected from exposure to Monkeypox virus and that workers are not exposed to harmful levels of chemicals used for cleaning and disinfection. PPE should be worn in these circumstances:
  - Entering isolation areas—Staff who enter isolation areas should wear a gown, gloves, eye protection and a NIOSH-approved particulate respirator equipped with N95 filters or higher.
  - Laundry—When handling dirty laundry from people with known or suspected monkeypox infection, staff should wear a gown, gloves, eye protection and a well-fitting mask or respirator. PPE is not necessary after the wash cycle is completed.

- Cleaning and disinfection—Staff should wear a gown, gloves, eye protection and a well-fitting mask or respirator when cleaning areas where people with monkeypox spent time.”<sup>8</sup>

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<sup>8</sup> [“Considerations for Reducing Monkeypox Transmission in Congregate Living Settings.”](#) Centers for Disease Control and Prevention, Updated August 4, 2022.