

16 August 2022 (week 32 of 2022)

MULTI-COUNTRY MONKEYPOX OUTBREAK: SITUATION UPDATE

The situational report updates the epidemiological and public health response activities on the ongoing multi-country monkeypox outbreak.

The situation in South Africa

Since the last update (<u>https://www.nicd.ac.za/wp-content/uploads/2022/08/NICD-Multi-country-monkeypox-outbreak-situation-update 09-August-2022 final.pdf</u>), there has been one new laboratory-confirmed monkeypox case. The diagnosis was confirmed through testing at a private-sector laboratory on 14 August 2022. This brings the total number of cases reported in South Africa since 22 June 2022, to four, with no deaths. The latest case is a 28-year-old male from Western Cape Province with a recent travel history to Spain. He returned to South Africa on 12 August 2022 after staying for about two weeks in Barcelona. Public health response measures have been initiated. At the time of this report, there have been no secondary cases linked to this case.

From 25 May to 16 August 2022, the National Institute for Communicable Diseases conducted 323 monkeypox laboratory tests (PCR) from individuals suspected of monkeypox disease within South Africa (n=215) and other African countries (n=108). Full genetic sequencing for the case from Gauteng and the first case identified from the Western Cape was conducted. The viral genomes clustered in the B.1 lineage of the Western Africa clade with other viral genomes associated with cases of the current multi-country outbreak.

Even though the risk of monkeypox to the general South African public is considered low, healthcare workers should be on high alert and maintain a high index of suspicion for any individuals presenting with an unexplained acute rash or skin lesions **AND** one or more of the following signs or symptoms: headache, acute onset of fever (>38.5°C), lymphadenopathy (swollen lymph nodes), myalgia (muscle pain/body aches) and backache **AND** for which the following differential diagnoses are excluded: chickenpox, measles, bacterial skin infections, syphilis, molluscum contagiosum, allergic reactions and other locally relevant common cause of papular or vesicular rash. For more information on monkeypox preparedness and response activities, visit <u>https://www.nicd.ac.za/diseases-a-zindex/monkeypox/</u>

Global situation

Since January 2022 to 16 August 2022, more than 36 900 laboratory-confirmed monkeypox cases including 12 deaths have been reported from 92 countries/areas/territories across all six WHO Regions (European Region, Region of the Americas, Eastern Mediterranean Region, Western Pacific Region, South-East Asia Region and African Region). The majority of the cases have been reported from the WHO European Region with over 17 800 cases and the Region of the Americas with over 14 900 cases. The African Region is the third region reporting more cases with over 380 confirmed cases. The 12 monkeypox-associated deaths reported includes five deaths that occurred outside of Central and West Africa where monkeypox is usually found. These five deaths were reported from Spain (n=2), Brazil (n=1), Peru (n=1) and India (n=1). In the ongoing 2022 multi-country monkeypox outbreak, males aged between 18 - 44 years and males who self-identify as men who have sex with men (MSM) and have reported recent sexual activities with one or multiple partners continues to be disproportionately affected, except the West and Central Africa countries.

On 23 July 2022, the WHO Director-General declared this outbreak a public health emergency of international concern (PHEIC) and issued temporary recommendations for countries in order to stop transmission and containing the outbreak. The latest updates on the global situation can be accessed at <u>here</u>

