Indiana's Monkeypox Outbreak Response

This plan describes monkeypox symptoms, risk factors and transmission, and describes Indiana's approach to the monkeypox outbreak affecting multiple countries, including the United States.

A multipronged approach to case investigations, contact tracing, testing, treatment, vaccination, and community outreach will be utilized to limit the spread of monkeypox.

Signs and Symptoms

Symptoms of monkeypox can include:

- Fever
- Headache
- Muscle aches and backache
- Swollen lymph nodes
- Chills
- Exhaustion

These symptoms usually appear 7-14 days after someone is exposed to monkeypox. About 1-3 days later, a rash that can look like pimples or blisters appears, usually on the face, inside the mouth, and on other parts of the body, like the hands, feet, chest, genitals, or anus.

The rash goes through different stages before healing completely. The illness typically lasts 2-4 weeks.

Sometimes, people get a rash first, followed by other symptoms. Others only experience a rash.

How does it spread?

Monkeypox spreads in different ways. The virus can spread from person to person through:

- direct contact with the infectious rash, scabs, or body fluids
- respiratory secretions during prolonged, face-to-face contact, or during intimate physical contact, such as kissing, cuddling, or sex
- touching items (such as clothing or linens) that previously touched the infectious rash or body fluids
- pregnant people can spread the virus to their fetus through the placenta

It's also possible for people to get monkeypox from infected animals, either by being scratched or bitten by the animal or by preparing or eating meat or using products from an infected animal.

Someone who has monkeypox can spread infection to others from the time symptoms start until the rash has fully healed (scabs have fallen off) and a fresh layer of skin has formed. The illness typically lasts 2-4 weeks. People who do not have monkeypox symptoms cannot spread the virus to others. At this time, it is not known if monkeypox can spread through semen or vaginal fluids.
Who is at risk?

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:

- Had contact with someone who had a rash that looks like monkeypox or someone who was diagnosed with confirmed or probable monkeypox
- Had skin-to-skin contact with someone in a social network experiencing monkeypox activity; this includes men who have sex with men who meet partners through an online website, digital application (“app”), or social event (e.g., a bar or party)
- Traveled outside the U.S. to a country with confirmed cases of monkeypox or where monkeypox activity has been ongoing
- Had contact with a dead or live wild animal or exotic pet that exists only in Africa or used a product derived from such animals (e.g., meat, creams, lotions, powders, etc.)

Case Investigations, Contact Tracing, & Monitoring

- IDOH conducts case investigations of individuals identified by healthcare providers.
- Specially trained IDOH staff who focus on improving the overall health of the community conduct contact tracing and help those impacted by monkeypox.
- LHDs (local health departments), Indiana Department of Health (IDOH), and occupational health clinics are conducting monitoring of close contacts of cases and healthcare workers potentially exposed.

Testing

- Healthcare providers submit an automated REDCap [Provider Monkeypox Authorization Form to request testing.
- IDOH is distributing test kits (swabs, tubes, and shipping materials) to all LHDs
- IDOH Laboratories tests for orthopoxvirus, and confirmatory testing is conducted at the Centers for Disease Control and Prevention (CDC).
- Submission, specimen collection and handling guidance can be found on the [IDOH monkeypox website.

Treatment

- Healthcare providers may request Tecovirimat (TPOXX), an oral antiviral for treatment of smallpox in adults and children.
- Data are not available on the effectiveness of Tecovirimat in treating monkeypox infections in people, but studies using a variety of animal species have shown that Tecovirimat is effective in treating disease caused by orthopoxviruses.
• Healthcare providers of suspect monkeypox cases may consult IDOH for requests of TPOXX.

Vaccine

Two FDA-licensed smallpox vaccines (JYNNEOS and ACAM2000) are available from the SNS for use as post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) for monkeypox.

• JYNNEOS is the primary vaccine being used in Indiana for monkeypox.
  o Individuals can be vaccinated following exposure to monkeypox to help prevent illness from monkeypox virus.
  o Vaccine given within 4 days from the date of exposure provides the best chance to prevent onset of the disease
  o If given between 4 and 14 days after the date of exposure, vaccination may reduce the symptoms of disease, but may not prevent the disease.

• Pre-Exposure Prophylaxis (PrEP)
  o PrEP is designated for individuals with certain risk factors who are more likely to be exposed to monkeypox.
  o The U.S. Department of Health and Human Services is allocating a limited supply of JYNNEOS to states for administration of PrEP.

• Indiana’s Tiered Approach

  Indiana has gathered a multi-disciplinary advisory group of healthcare clinicians, pharmacists, public health academics, minority health stakeholders, ethicists, and community advocates to develop Indiana’s tiered allocation approach of this limited vaccine.

Provider & Community Outreach

• IDOH has conducted LHD and healthcare provider webinars to provide updates and share best practices
• IDOH Monkeypox Website
• Collaboration with HIV Case Managers and HIV/STD clinics
• Indiana is engaged with the Indiana AIDS Fund (IAF) to develop a marketing campaign for monkeypox awareness
  o Ads on social apps and social media
  o Signage at bars and bath houses
  o Website