What to Know About Human Monkeypox (MPX) in Non-Healthcare Community Settings

The Maryland Department of Health (MDH) continues to monitor and respond to the global human monkeypox (MPX) outbreak. This information is for individuals in non-healthcare settings where unrelated people may be in close proximity, including group homes, correctional facilities, universities, schools or child care facilities, or workplaces.

How can I stay informed about human monkeypox (MPX) in Maryland?

Information about and resources for human MPX can be found on the MDH website and the CDC website. Employers and facility administrators should provide information to staff, residents, families, and students as appropriate.

Who can get MPX?

Anyone can get and spread MPX, which 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. MPX spreads from person-to-person through:

- Direct contact with sores, scabs, bodily fluids
- Intimate contact, including sex
- Contact with contaminated items such as linens
- Respiratory droplets during prolonged face-to-face contact

Currently, most cases are in men who self-identify as gay, bisexual, or other men who have sex with men (MSM). MSM with multiple sex partners are at greatest risk. For the most up-to-date information about cases in Maryland, visit the MDH website.

What are the symptoms of MPX?

People with monkeypox get a rash that may be located on or near the genitals or anus and could be on other areas like the hands, feet, chest, face, or mouth. The rash will go through several stages, including scabs, before healing. The rash can initially look like pimples or blisters and may be painful or itchy. Other symptoms of monkeypox can include fever, chills, swollen lymph nodes, exhaustion, muscle aches, backache, headache, and respiratory symptoms. The illness typically lasts 2-4 weeks.
What should I do if someone in my facility might have MPX?

Anyone with symptoms, such as a new or unexplained rash, should be referred to a health care provider for medical evaluation. If individuals do not have a healthcare provider, they should seek evaluation at a public healthcare clinic (e.g. Federally Qualified Health Center or local health department (LHD)).

Suspect cases should isolate and be excluded from work, school, or other activities pending the medical evaluation and testing, if indicated.

Non-healthcare community settings should follow cleaning and disinfection instructions. Congregate settings, such as group homes, should refer to the CDC’s guidance for congregate settings (as applicable), with particular attention when handling laundry.

What happens if someone is diagnosed with MPX?

When a person is diagnosed with MPX, there are several actions workplaces, schools and facilities can take to prevent further transmission and ensure the best health outcome for the person with MPX. These include isolating, ensuring infection control, participating in contact tracing, and considering whether treatment is appropriate.

Isolation

People who are diagnosed with MPX should take actions to prevent transmission to others, including staying away from other people (isolating) and not sharing things they touched with others. People with MPX are contagious from when symptoms start until all sores have healed and a fresh layer of skin has formed. This can take 2–4 weeks.

People with MPX should isolate at home or within their facility if they live in a congregate setting. If a private isolation room is not available, cohorting with others who have MPX is acceptable. If leaving the isolation room or when it is not possible to stay separated from others, people with MPX should wear a well-fitting face mask, cover the skin where rash or sores are present, and wash their hands.

Infection control

Facilities should take the following steps to help prevent the spread of MPX:

- Hand washing - Ensure access to soap and water or hand sanitizer with at least 60% alcohol is available to staff, volunteers, residents, and students with proper storage and supervision for young children. Anyone who touches lesions or clothing, linens, or surfaces that may have had contact with MPX lesions should wash their hands immediately.
- Cleaning and disinfection - In areas where people with MPX spent time, perform disinfection using an EPA-registered disinfectant with an Emerging Viral Pathogens claim (see EPA’s List Q). Avoid use of fans, dry dusting, sweeping, vacuuming or other activities that could spread dried material from lesions. Gently and promptly contain soiled laundry in a laundry bag. Linens may be laundered using regular detergent and warm water.
- Personal protective equipment - When cleaning or disinfecting areas where a
person with MPX spent time, or handling dirty laundry from a person with MPX, individuals should wear a gown, gloves, eye protection, and a well-fitting mask or respirator. Staff who enter isolation areas should wear a gown, gloves, eye protection, and a NIOSH-approved particulate respirator equipped with N95 filters or higher.

**Contact tracing**
People diagnosed with MPX should participate when local health departments conduct contact tracing, in order to determine who they might have exposed to MPX.

**Treatment**
There are no specific FDA-approved treatments for MPX, but antivirals available through CDC might help those at risk of severe illness. Individuals with MPX interested in treatment should discuss that with their health care provider. In Maryland, health care providers can access treatments by contacting the local health department, if their healthcare system does not already have a process for obtaining it.
What does contact tracing involve?
When a person is diagnosed with MPX, the LHD will conduct contact tracing in order to identify people who might have been exposed to the infected individual. The employer or facility should work with the LHD to identify close contacts of the infected individual. Congregate settings with access to healthcare providers may coordinate with the LHD to assess and monitor any residents who are close contacts.

What happens if someone is identified as a close contact of someone with MPX?
Close contacts should monitor their health, but do not need to quarantine as long as they don’t develop symptoms. The LHD may recommend that some close contacts get vaccinated in order to prevent disease. The vaccine works best the sooner it is given; ideally, the first dose is given within four days of exposure. If close contacts do develop symptoms, they should isolate and talk to their healthcare provider.

Is there a vaccine for MPX?
Yes. The preferred vaccine to protect against MPX is JYNNEOS, which is administered as a series of two doses 28 days apart. It takes 14 days after the second dose of JYNNEOS for its immune protection to reach its maximum. Maryland currently has limited quantities of the JYNNEOS vaccine and is working with LHDs and other partners to make doses available to populations at higher-risk.

Who should get vaccinated against MPX?
Vaccination is currently recommended for people who have been exposed to MPX and people who may be more likely to get MPX, including:
- People who have been identified as a close contact of someone with MPX (including community and healthcare exposures)
- People who know one of their sexual partners in the past 2 weeks was diagnosed with MPX
- Gay, bisexual, other men who have sex with men, and transgender people who report any of the following in the past 2 weeks:
  - Recent group sex or sex with multiple partners
  - Sex or employment at a venue or in association with an event, venue, or defined geographic area where MPX transmission has been reported
How can I sign up to get vaccinated against MPX?
Maryland residents interested in being vaccinated to prevent MPX infection may pre-register for vaccination at https://health.maryland.gov/phpa/OIDEOR/Pages/mpx-vax-preregistration.aspx. Individuals who pre-register will be reviewed to determine if they meet criteria for a MPX vaccination appointment. If they do, they will receive an invitation to claim an appointment, as vaccine availability allows.

I'm worried about stigma that might result from MPX in the community. What can I do?
Stigma can create lost opportunities to detect and address infections in certain populations, and it is important to avoid marginalizing groups who may be at increased risk for MPX. Combat stigma by providing fact-based information. More information is available about reducing stigma on this CDC website.

Find more MPX information
- Maryland Department of Health Human Monkeypox website: health.maryland.gov/monkeypox
- CDC Monkeypox website: cdc.gov/poxvirus/monkeypox
- Congregate Settings (CDC Guidance): Preventing Monkeypox Spread in Congregate Settings
- Schools and Child Care (CDC Guidance): Schools, Early Care and Education Programs, and Other Settings Serving Children or Adolescents
- Institutions of Higher Education (CDC website): Institutions of Higher Education
- Disinfecting Home and Other Non-Healthcare Settings (CDC Guidance): Disinfecting Home and Other Non-Healthcare Setting
- Reducing Stigma (CDC website): Reducing Stigma in Monkeypox Communication and Community Engagement

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