

Monkeypox: WTF

*What the f*ck is up with monkeypox?*

A guide on what we know and what remains unclear about the current outbreak in BC.

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Monkeypox is a viral infection. It is related to smallpox, but less severe. Until the current global outbreak started in May of 2022, human to human transmission of monkeypox had not been seen in Canada except for sporadic cases affecting travelers.

During the current global monkeypox outbreak, almost every case in British Columbia has been within sexual networks in the communities of gay, bi and queer men, and gender diverse people. Because much is yet to be uncovered about transmission of the monkeypox virus, there is not a lot of data to rely on which can seem scary and hard to plan for.

This handy document compiles some of what we know, and some things that are still unclear to help make sense of WTF is going on with monkeypox across the province.

Disclaimer - As more information is available and public health guidance change, so might the information contained herein. We value our community's ability to make informed decisions and make decisions that work for them.

How is monkeypox transmitted?

What we know:

Monkeypox is commonly spread through contact with sores or blisters of people who have monkeypox.

The main mode of transmission driving the current outbreak is close skin-to-skin contact during sex. However, it may also be transmitted through items like bedding or towels that have monkeypox virus on them. Infrequently, monkeypox may be spread through respiratory droplets such as coughs and sneezes during close, face-to-face contact with a person who has monkeypox. The recent cases among our communities are likely due in part to shared sexual/social networks, as well as large events that may have facilitated transmission. These events have had some sex-on-premises, making it hard to know whether monkeypox was spread through sex or through being at large events.

What is still unclear....

Monkeypox can be transmitted via sexually associated skin-to-skin contact and thus is considered a sexually associated infection. In addition, monkeypox virus has been detected in semen. The main mode of transmission is still considered to be skin-to-skin contact with lesions, though transmission via semen may be possible. Research is currently underway to determine if condom use can help prevent transmission of monkeypox during sex.

What can I do to prevent monkeypox?

Below are actions rooted in harm reduction that can help prevent monkeypox. We value our community's ability to make informed decisions and make decisions that work for them.

What we know:

Precautions can be taken to prevent the spread of monkeypox and are integral to protecting yourself and your community. Vaccination, and remaining diligent in monitoring ourselves for symptoms and seek testing if we think we are symptomatic.

What is still unclear....

As mentioned previously, research is being done to see if condoms can help reduce the likelihood of monkeypox transmission. While we don't know for certain, you may want to consider using condoms during sex as part of your monkeypox prevention strategies in the meanwhile (condoms also help prevent STIs, including HIV!).

It is unclear if respiratory droplets have contributed to transmission of monkeypox during this current outbreak, but epidemiologists feel it to be much less than skin-to-skin contact.

The monkeypox virus can survive on shared items such as towels and beddings. It is unclear if certain traditionally queer spaces like bathhouses and circuit parties may be sites of transmission even for people who aren't having sex. HIM has been working with these types of venues across the province to ensure they are up-to-date on all things monkeypox, including cleaning, to keep them as safe as possible. These venues are invested in the health of our communities, and many have even worked with public health to organize their own pop-up vaccine clinics.

Is monkeypox severe?

What we Know:

Cases of monkeypox can range from mild to severe. Examples might include everything from one or two itchy/uncomfortable pox blisters to more severe cases with the entire face, hands, mouth, genitals, and anus covered with incredibly painful and itchy skin lesions accompanied with intense fever and intense pain that requires treatment and/or pain control. Original reports that described monkeypox as "mild" are now being updated to reflect what we've seen on the ground: each person's situation is different, and some people have experienced severely painful cases.

For some people, contracting monkeypox has meant having to take time off work to avoid close contact with others, manage pain and recover. This can affect income and a person's ability to provide for themselves and loved ones. Some employees have been forced by their

employer to supply doctors' notes indicating if they are able to be at work, a requirement that is not supported by public health.

To learn more about the effects of monkeypox including first-hand accounts, a longtime community advocate has created a website to document theirs and other's experiences - check it out here - igotmpox.ca.

What are the symptoms of monkeypox?

The most 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 grouping of lesions or rash which can last for two to three or four weeks. The rash can be found 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 many. Lesions begin flat, then fill with liquid before they crust over, dry up and scabs fall off, with a fresh layer of skin forming underneath.

Symptoms typically last two to three weeks and usually go away on their own or with supportive care, such as medication for pain or fever. People remain infectious until all of the lesions have crusted over, the scabs fallen off and a new layer of skin has formed underneath.

- *World Health Organization & BC Centre for Disease Control*

What do I do if I think I have monkeypox?

If you have been monitoring for symptoms and suspect you have monkeypox, or if you have been in contact with someone with monkeypox, seek a health care provider for testing.

We recognize that not everyone has a family doctor or primary care provider. In British Columbia, places you might look for testing are Primary Care or Urgent Primary Care Centres (UPCCs), STI Testing and Treatment Clinics, and youth clinics if under age 25. In more rural locations where access to these types of services may be limited we recommend a walk-in clinic or your nearest emergency room.

For help navigating the healthcare system in BC, please call 236-688-4153 to speak to a HiM staff or volunteer. Online you can go to [SmartSexResource Clinic](#) Finder and choose monkeypox testing in service menu for a provincial list of STI testing clinics.

It is possible the spaces mentioned above have implemented standard operating procedure regarding monkeypox testing and treatment. If your provider is unfamiliar with monkeypox, or considerations around testing and treatment, you can hand them HiM's [What's Up Doc?](#) document.

What does testing for monkeypox entail?

Right now, testing is only being done for those who have symptoms that may be due to monkeypox,

Testing looks a little different from place to place, swabbing a pox mark is the preferred method of testing. Places like emergency rooms may do everything from a blood draw to multiple swabs or a urine test, an STI clinic or primary care may only swab a few pox marks. Wait time for results will vary depending on where you accessed testing in the province; all tests are shipped to the BC Centre for Disease Control where they are analyzed within 48 hours of arrival.

Having monkeypox sores, lesions, or symptoms but haven't been able to get tested?
Call **HiM** for help navigating your local healthcare system, and to be connected to a testing site: **236-688-4153**

It is important to note that if your test comes back negative, but you are still displaying what you think may be symptoms, seek further consultation. Monkeypox lesions can look like those from herpes, syphilis, chicken pox, or other viruses.

The results from my test came back. I have monkeypox. What do I do now?

People with monkeypox should follow the advice of their health care provider. Symptoms normally resolve on their own without the need for treatment. If needed, medication for pain (analgesics) and fever (antipyretics) can be used to relieve some symptoms. It is important for anyone with monkeypox to stay hydrated, eat well, and get enough sleep.

Until all lesions have healed, avoiding close skin-to-skin contact with others including refraining from sexual activity is recommended. This will help prevent the spread of monkeypox. This does not mean isolation in homes. People can go out and about as long as they are wearing a mask and all lesions are covered. If people choose to decrease the number of their contacts, they should take care of their mental health by doing things they find relaxing and enjoyable, staying connected to loved ones using technology, exercising (indoors or outdoors) if they feel well enough and can do so, and asking for support with their mental health if they need it. Check out HiM's mental health resources, including low-barrier counselling, [here](#).

Secondary skin infections can be serious. To avoid them, people with monkeypox should not scratch their skin and take care of the rash by cleaning their hands before and after touching

*Adapted from:
BC Centre for Disease Control
The World Health Organization*

lesions and keeping skin dry and uncovered (unless they are unavoidably in a room with someone else, in which case they should cover it with clothing or a breathable bandage until they are able to avoid contact again). The rash can be kept clean with sterilized water or antiseptic. Saltwater rinses can be used for lesions in the mouth, and warm baths with baking soda and Epsom salts can help with lesions on the body. Lidocaine or ice packs can be applied to oral and perianal lesions to relieve pain.

- *World Health Organization*

I'm in too much pain/discomfort and need treatment.

For more severe cases of monkeypox, healthcare providers may prescribe supportive treatment for symptom management. Treatment options depend on the patient's unique situation, so it will look different from person to person.

In Canada, gabapentin and codeine have been used to help those with pain, and hydroxyzine and oral lidocaine have been used for swelling and oral pain. These supportive options do not work for everyone, and some patients have been prescribed stronger pain control.

Personal care of monkeypox may include;

- Keeping lesions clean and dry; showering as normal.
- Avoiding itching or disruption of lesions, if possible.
- Covering lesions to prevent transmission of secretions to clothes, linen etc.
- Using a breathable bandage/gauze
- No need to add ointments/antibiotic creams
- Ice packs may support itch/discomfort
- Taking pain control as needed (Advil/Tylenol)

You can talk to your health care provider about these and other options.

Make sure you communicate with your provider your level of pain discomfort, reminding them that original descriptions around the low severity of monkeypox have been updated to reflect much more painful experiences of monkeypox in the current outbreak. If your provider is unable to support you, request a referral to an alternative primary care provider, urgent care, or- if left with no other option- emergency department.

In rare cases, individuals with monkeypox may need hospital care for complications. Please see your health care provider if you are having worsening or new throat or rectal pain, severe fever or chills, shortness of breath or chest pain or any other symptoms that you find concerning.

Having difficulty getting the monkeypox care you need? Or is your provider not able to meet your needs?

Call **HiM** for help navigating your local healthcare system, or to be connected to an Infectious Disease Specialist who can help: **236-688-4153**