



Epi Update for Monday, June 13, 2022

**Office of the Public Health Medical Director
Center for Acute Disease Epidemiology (CADE)
Bureau of HIV, STD, and Hepatitis**

Iowa Department of Public Health (IDPH)

Items for this week's Epi Update include:

- **Monkeypox update**
- ***Candida auris*: Third case identified in MN, guidance for laboratories**
- **Infographic: Social gatherings, safer sex, and monkeypox**

Monkeypox update

Cases of monkeypox continue to be identified in countries that don't normally report monkeypox, with the highest case counts occurring European countries and Canada. As of June 10, 1,472 cases have been identified in 33 countries. A total of 49 cases have been identified in the U.S., with New York (11) and California (10) reporting the most cases. No cases have been identified in Iowa.

It's not clear how the people were exposed to monkeypox, but early data suggest that gay, bisexual, and other men who have sex with men make up a high number of cases. However, anyone who has been in close contact with someone who has monkeypox is at risk.

If clinicians identify patients with a rash that could be consistent with monkeypox, especially those with a recent travel history to central or West African countries, parts of Europe where monkeypox has been reported, or other areas reporting monkeypox cases, monkeypox should be considered as a possible diagnosis.

Clinicians must report suspected monkeypox cases to IDPH as soon as monkeypox is suspected and prior to collecting specimens. IDPH will consult with CDC and SHL to determine the need and plan for laboratory testing.

- Contact IDPH by calling 515-242-5935 during business hours or 515-323-4360 outside of business hours.
- Contact SHL by calling 319-335-4500 or 1-800-421-4692.

SHL has capacity to test patients suspected of having monkeypox for orthopoxvirus by real-time PCR and may forward additional specimens to CDC for confirmatory testing.

For more information about the ongoing outbreak, including clinical characteristics of monkeypox lesions, visit www.cdc.gov/poxvirus/monkeypox/response/2022/index.html.

Candida auris: Third case identified in MN, guidance for laboratories

A third case of *C. auris* in two years has been identified in Minnesota from a patient with a history of recent inpatient health care in Florida. Illinois and Florida have reported some of the highest counts of *C. auris* in the last year. *C. auris* is reportable in Iowa, where one case has been identified to date from a patient with a history of inpatient care in the Chicago-land area.

The risk in Iowa of import cases from patients receiving care in hotspots is increasing. Hospital infection prevention programs can prevent transmission by efforts to detect carbapenemase-producing organisms (CPO) and *C. auris* upon admission of high-risk patients. This allows for early action to prevent spread and manage the risk of transmission in post-acute settings.

C. auris is frequently misidentified by traditional phenotypic methods and automated testing systems. Labs should be familiar with the limitations of their automated testing system as it relates to *C. auris*. Yeast isolates that need further workup should be sent to SHL for confirmation. Colonization screening for high-risk patients is available through SHL and the Minnesota Department of Health as part of the Antibiotic Resistance Laboratory Network.

For a list of automated systems and their potential misidentifications, see: www.cdc.gov/fungal/diseases/candidiasis/pdf/Testing-algorithm-by-Method-temp.pdf.

For guidance on reporting *C. auris* to IDPH, visit https://idph.iowa.gov/Portals/1/userfiles/79/Documents/HAI/2021%20C_%20auris%20reporting%20guidance.pdf.

For general information about *C. auris*, visit www.cdc.gov/fungal/candida-auris/index.html.

Infographic: Social gatherings, safer sex, and monkeypox

Social Gatherings, Safer Sex and Monkeypox

Monkeypox is a disease caused by a virus not commonly seen in the United States. While we work to contain the current outbreak and study the virus, we want you to have information so you can make informed choices when you are in spaces or situations where monkeypox could be spread through close, intimate contact or during sex. There is a lot we still need to learn about monkeypox, and we will update this information as we learn more on www.cdc.gov/monkeypox.

What is monkeypox?

Monkeypox is a disease that can make you sick, including a rash, which may look like pimples or blisters, often with an earlier flu-like illness. Monkeypox can spread to anyone through close, personal, often skin-to-skin contact including:


- Direct contact with monkeypox rash, sores, or scabs from a person with monkeypox. We believe this is currently the most common way that monkeypox is spreading in the U.S.
- Contact with objects, fabrics (clothing, bedding, or towels), and surfaces that have been used by someone with monkeypox.
- Contact with respiratory secretions, through kissing and other face-to-face contact.

This contact can happen when you have sex including:

- Oral, anal, and vaginal sex or touching the genitals (penis, testicles, labia, and vagina) or anus (butt) of a person with monkeypox.
- Hugging, massage, and kissing
- Touching fabrics and objects during sex that were used by a person with monkeypox and that have not been disinfected, such as bedding, towels, fetish gear, and sex toys.

What are the symptoms of monkeypox?

- Monkeypox symptoms usually start within 2 weeks of exposure to the virus.
- The first symptoms might be like the flu, such as fever, headache, muscle aches and backache, swollen lymph nodes, chills, or exhaustion.
- Within 1-3 days of these symptoms beginning, people develop a rash or sores.



- The rash or sores may be located on or near the genitals or anus but could also be on other areas like the hands, feet, chest, or face.
- The sores will go through several stages, including scabs, before healing.
- The sores can look like pimples or blisters and may be painful or itchy.
- Sores may be inside the body, including the mouth, vagina, or anus.

You may experience all or only a few of these symptoms. Most people with monkeypox will get the rash or sores. Some people have reported developing the rash or sores before (or without) the flu-like symptoms.

Monkeypox can be spread from the time symptoms start until all sores, including scabs, have healed and a fresh layer of skin has formed. This can take several weeks.

To view in full size, visit www.cdc.gov/poxvirus/monkeypox/pdf/MPX_Social_Gatherings_Safer_Sex-508.pdf.

Have a healthy and happy week!

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