

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

**JOHANNE E. MORNE, M.S.** Executive Deputy Commissioner

May 17, 2024

**To**: Healthcare Providers, Hospitals, Local Health Departments, Sexual Health Providers, Family Planning Providers, Emergency Rooms, Community Health Centers, College Health Centers, Community-Based Organizations, and Internal Medicine, Family Medicine, Pediatric, Adolescent Medicine, Dermatology, Infectious Disease, and Primary Care Providers, Higher Education Institution Health Clinics

This communication provides updates to New York State Department of Health: Health Alert Notice for providers in New York State – November 27, 2023.

## **SUMMARY**

Governor

- Mpox transmission continues to be reported across the state, but case counts remain lower relative to the peak of the 2022 outbreak. In 2024, <u>mpox cases in the United</u> <u>States</u> are higher compared to this time last year. In 2024, <u>mpox diagnoses</u> in New York State have been reported in Albany, Dutchess, Erie, Nassau, Onondaga, Otsego, Putnam, Suffolk, Ulster, and Westchester counties.
- Vaccination among communities disproportionately affected by mpox remains one of our strongest tools at preventing severe illness as well as further transmission.
- Providers should review recently issued evidence-based clinical practice
  recommendations on how to address mpox prevention, presentation, diagnosis, and
  treatment in adults on the <a href="New York State Department of Health AIDS Institute Clinical">New York State Department of Health AIDS Institute Clinical</a>
  Guidelines website, along with a convenient pocket guide and slide set.

Mpox transmission continues to be reported across the state, but case counts remain lower relative to the peak of the 2022 outbreak. In 2024, mpox diagnoses have been reported in Albany, Dutchess, Erie, Nassau, Onondaga, Otsego, Putnam, Suffolk, Ulster, and Westchester counties. In 2024, <a href="majorage-mpox cases in the United States">mpox cases in the United States</a> are higher compared to this time last year. The communities most affected by mpox, as well as the route of transmission of close personal contact/skin to skin contact with mpox lesions, remain the same.

Vaccination among communities disproportionately affected by mpox remains one of our strongest tools at preventing severe illness as well as further transmission. The vaccine has been routinely <u>recommended</u> for the prevention of mpox by the Centers for Disease Control and Prevention (CDC). In addition to being protective against Clade IIb mpox, which is the strain currently circulating in the United States, the JYNNEOS vaccine is also expected to protect against Clade I mpox, a more clinically serious strain which is associated with an outbreak in the Democratic Republic of the Congo. While no cases have been reported in the United States to date, CDC and jurisdictional health departments are taking steps to enhance readiness for responding to Clade I mpox. More information can be found in the <u>December 7, 2023 CDC Health Advisory</u>.

As of April 1, 2024, JYNNEOS is available through the commercial <u>market</u>. Requests for vaccines submitted to the New York State Department of Health via <u>mpox@health.ny.gov</u>, which

have previously been fulfilled through federally procured supply, will be accepted only in cases where commercially available JYNNEOS vaccine is not available or accessible.

CDC has released an updated <u>Vaccine Storage and Handling Toolkit</u>, which includes updates to mpox vaccine storage and handling information.

For those who do acquire mpox, while there are no approved antiviral treatments currently available, some medications are being studied for their effectiveness in treating mpox, including tecovirimat (TPOXX). As of early 2023, the federal government has concluded pre-positioning of tecovirimat (TPOXX), and no pre-positioned supply is currently housed in New York State. However, the following avenues remain for healthcare providers to access tecovirimat (TPOXX):

- Study of Tecovirimat for Mpox (STOMP): Treatment of mpox with oral tecovirimat (TPOXX) is available through the Study of Tecovirimat for Human Mpox Virus (STOMP) trial facilitated by the National Institute of Allergy and Infectious Diseases (NIAD). Providers are encouraged to discuss the trial with patients with mpox. Multiple participating study sites are located within New York State. More information is available here.
- Expanded Access Investigational New Drug (EA-IND) Protocol: Providers with
  patients who are not able to enroll in the STOMP trial, who decline enrollment, or who
  require intravenous tecovirimat (TPOXX) and meet treatment eligibility under the EA-IND
  protocol should work in concert with their county health department to request a supply
  of tecovirimat by contacting the CDC's Emergency Operations Center (EOC) at (770)
  488-7100 or poxvirus@cdc.gov.

Evidence-based clinical practice recommendations to inform primary care providers and other clinicians in New York State on how to address mpox prevention, presentation, diagnosis, and treatment in adults are available on the <a href="New York State Department of Health AIDS Institute">New York State Department of Health AIDS Institute</a> Clinical Guidelines website, along with a convenient pocket guide and slide set.

Questions about mpox or the content of this letter may be submitted to mpox@health.ny.gov.