How do we get out of another epidemic?

HMPXV

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Professor of Medicine UC San Diego TikTok & Twitter @DaveySmithMD

September 8, 2022

Here we go again What's going on?

Smith Disclosures

Consultant for

- AstraZeneca
- Bayer
- Evidera
- Model Medicines
- Vx Biosciences

Scientific Advisory Board

- FluxErgy
- Linear Therapies
- Pharma Holdings

Slides From

Ankita Kadakia, MD Susan Little, MD Christine Johnson, MD Steffanie Strathdee, PhD Rehan Syed, MD Tim Wilkin, MD

Outline

Outbreak Virology

Transmission

Disease

Treatment

Vaccination

Research

...there are some days when you don't feel like being **the gay in the room**. Right? But I don't have that option because it's the right thing to do.

Dr. Demetre Daskalakis

https://www.poz.com/blog/cdcs-daskalakis-monkeypox-stigma-gay-room



Governor Newsom Proclaims State of Emergency to Support State's Response to Monkeypox

Published: Aug 01, 2022

Outbreak

The San Diego Union-Tribune San Diego County follows state's lead, declares local monkeypox state of emergency AUG. 2, 2022 5:39 PM PT

The New Hork Times

As Monkeypox Spreads, U.S. Declares a Health Emergency

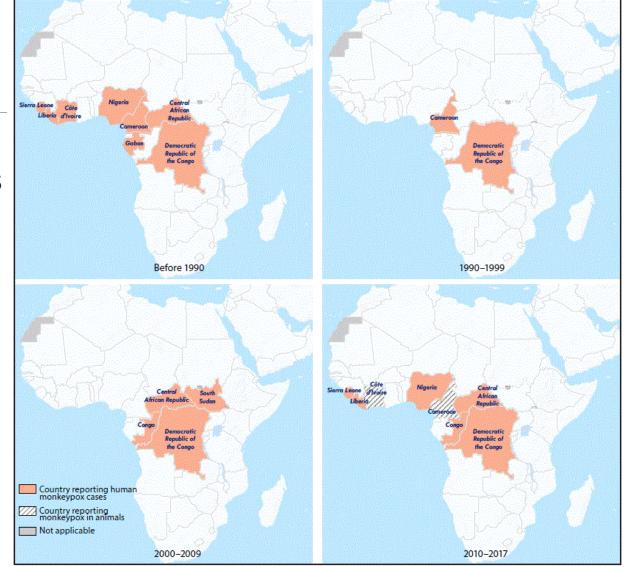
Aug. 4, 2022 Updated 2:42 p.m. ET

When and Where

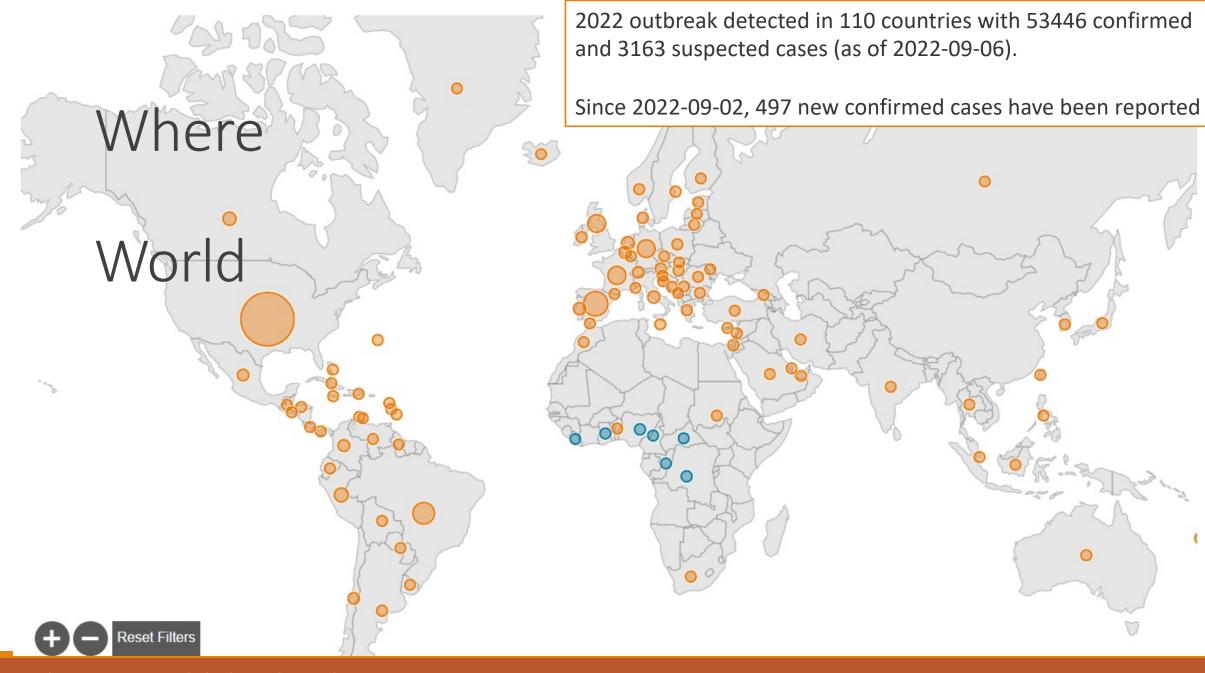
- HMPXV first discovered in lab monkeys in 1958, the primary carriers of monkeypox today are rodents.
 - New name coming! (Orthopox 4?)
- Endemic in Western and Central Africa 1970-2017
- We had HMPXV in US in 2003
 - 71 people infected from pet prairie dogs who got it from a pet rat from Ghana

Why have we not

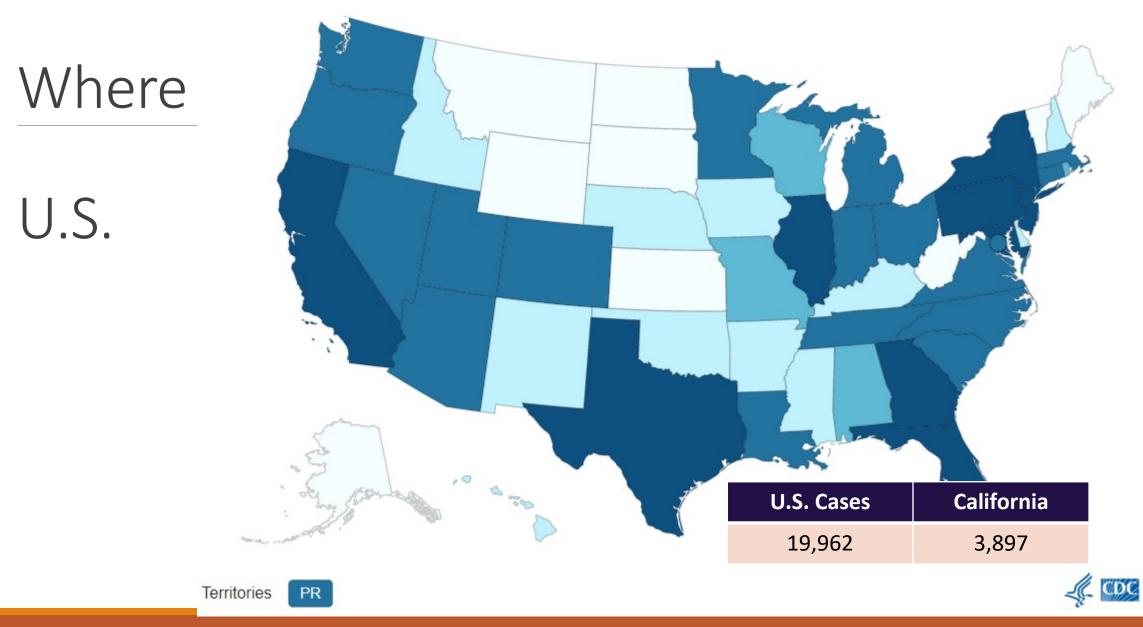
learned?



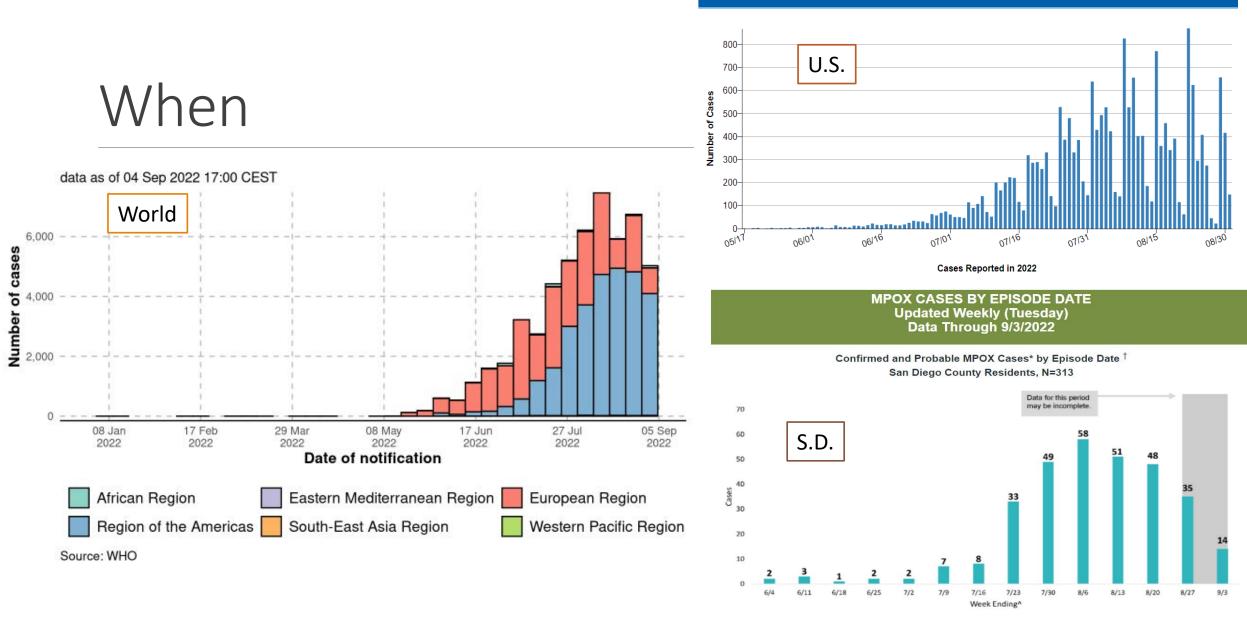
Emergence of Monkeypox — West and Central Africa, 1970–2017 | MMWR (cdc.gov)



Monkeypox 2022 global epidemiology; Report 2022-09-06

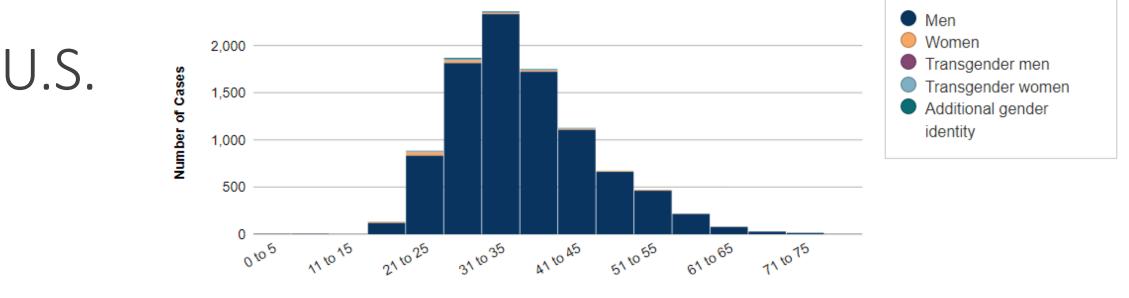


U.S. Monkeypox Case Trends Reported to CDC



Who

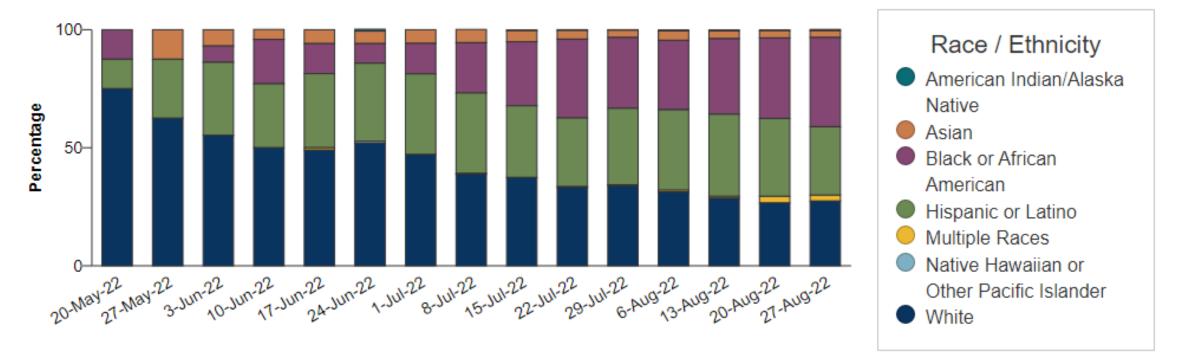
Monkeypox cases reported to CDC: Age and Gender



Age in Years

Who: U.S.

Monkeypox cases reported to CDC: Race/Ethnicity by Week

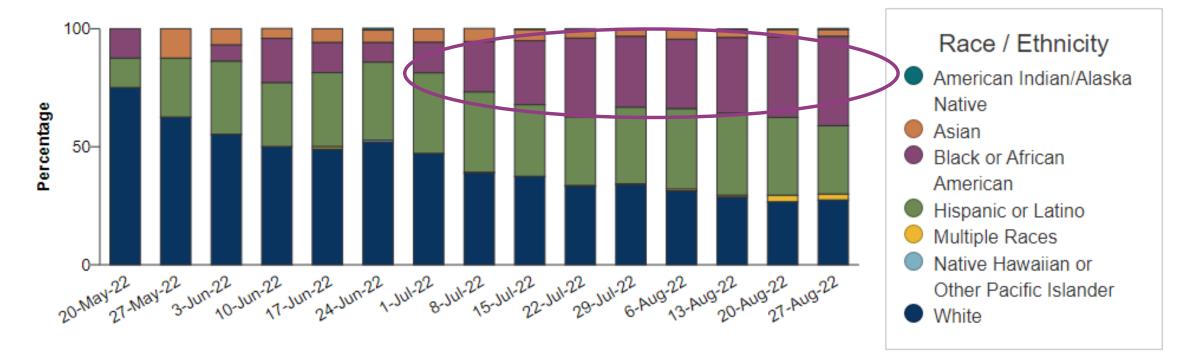


MMWR Week

2022 U.S. Map & Case Count | Monkeypox | Poxvirus | CDC

Who: U.S.

Monkeypox cases reported to CDC: Race/Ethnicity by Week



MMWR Week

	Age		
Who	Median	35	-
	Minimum	20	-
	Maximum	65	-
	Race/Ethnicity [‡]		
	Hispanic or Latino	116	44%
S.D.	White	110	42%
	Black or African American	22	8%
	Asian	6	2%
	Other/Multiple Race	3	1%
	American Indian or Alaska Native	3	1%
	Native Hawaiian or Other Pacific Islander	2	1%
	Unknown or missing	51	
	HHSA Region		
	Central	173	56%
	North Central	52	17%
	South	27	9%
	North Coastal	27	9%
	East	15	5%
	North Inland	15	5%
	Unknown or missing	4	
	Persons Experiencing Homelessness	12	4%
	Hospitalizations	10	3%
	Deaths	0	0%

		Reported values ¹				
Vho		Yes	No	Unknown or Missing Value		
	Men who have sex with men	11923 (95.2%)	607 (4.8%)	33442		
Vorld	HIV-Positive	5576 (44.9%)	6834 (55.1%)	33562		
	Health worker	313 (4.2%)	7070 <mark>(</mark> 95.8%)	38589		
	Travel History	1213 (27.9%)	3127 (72.1%)	41632		
	Sexual Transmission	7822 (91.0%)	777 (9.0%)	37373		
	Hospitalised ²	1550 (8.4%)	16928 (91.6%)	27494		
	ICU	9 (0.1%)	8072 (99.9%)	37891		
	Died	4 (0.0%)	19681 (100.0%)	26287		
	¹ Note given true proportions of variables, yes reporting may be common than no reporting					

Note given true proportions of variables, yes reporting may be common than no reporting

² May be hospitalised for isolation or medical treatment

2022 Monkeypox Outbreak: Global Trends (shinyapps.io)

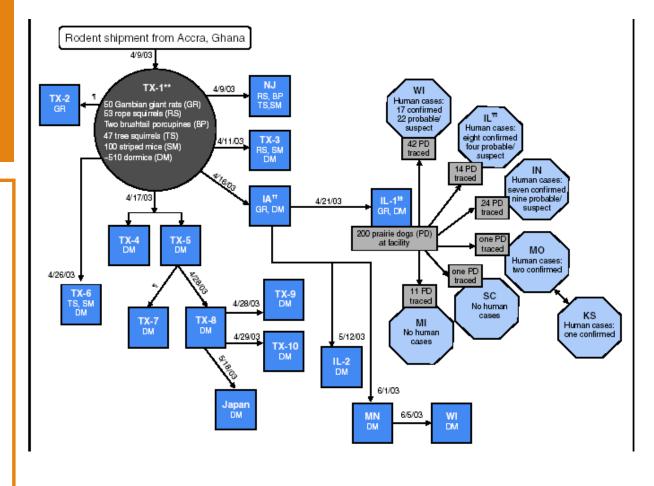
San Diego County Confirmed and Probab Updated Weekly Data Through 9/3/2022, Updated 9/6	Percent [†]	
Total	313	100%
Gender		
Male	308	98%
Female	3	1%
Transgender female	2	1%
Transgender male	0	0%
Genderqueer or non-binary	0	0%
Identity not listed	0	0%
Declined to answer	0	0%
Unknown or missing	0	
Sexual Orientation		
Gay, lesbian, or same-gender loving	210	85%
Bisexual	19	8%
Heterosexual or straight	13	5%
Declined to answer	4	2%
Orientation not listed	0	0%
Questioning/unsure/patient does not know	0	0%
Unknown or missing	67	

Who

S.D.

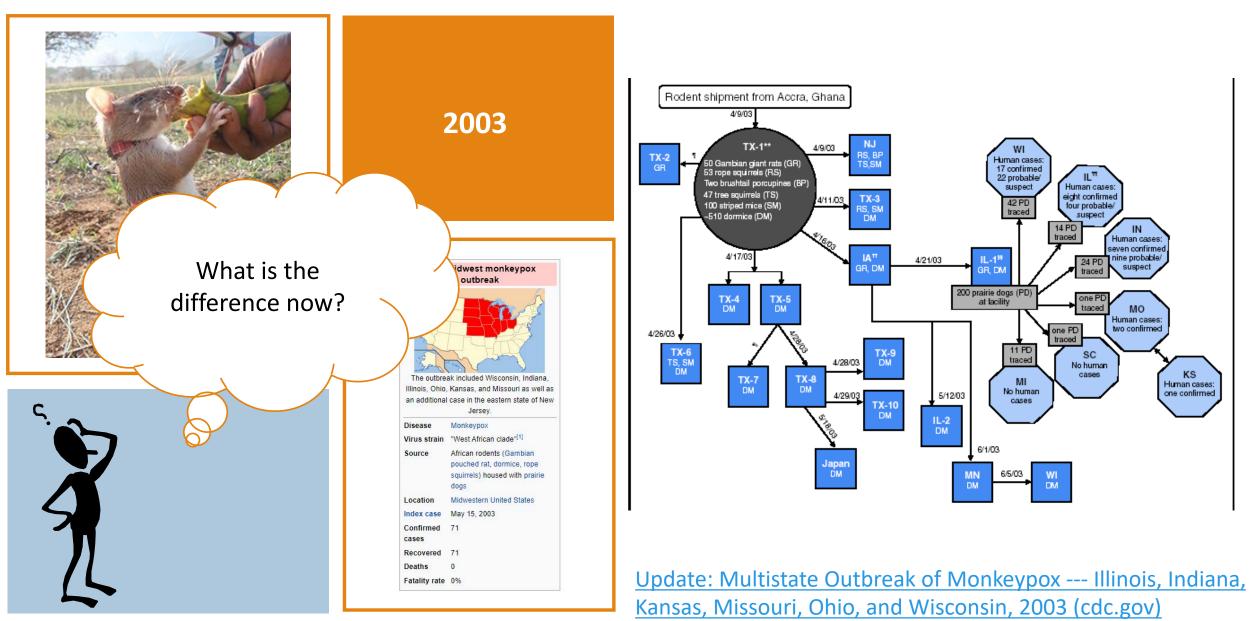






<u>Update: Multistate Outbreak of Monkeypox --- Illinois, Indiana,</u> Kansas, Missouri, Ohio, and Wisconsin, 2003 (cdc.gov)

2003 Midwest monkeypox outbreak - Wikipedia



2003 Midwest monkeypox outbreak - Wikipedia

Why do we not learn? Shigella



Did you know the diarrhea germ *Shigella* can be spread through sexual activity?



Washing your hands and using condoms are key to staying healthy.



To: CAHAN San Diego Participants Date: January 17, 2017

UPDATE: SHIGELLOSIS AMONG MEN IN SOUTHERN CALIFORNIA



To: CAHAN San Diego Participants

Date: October 11, 2021

From: EISB, Public Health Services

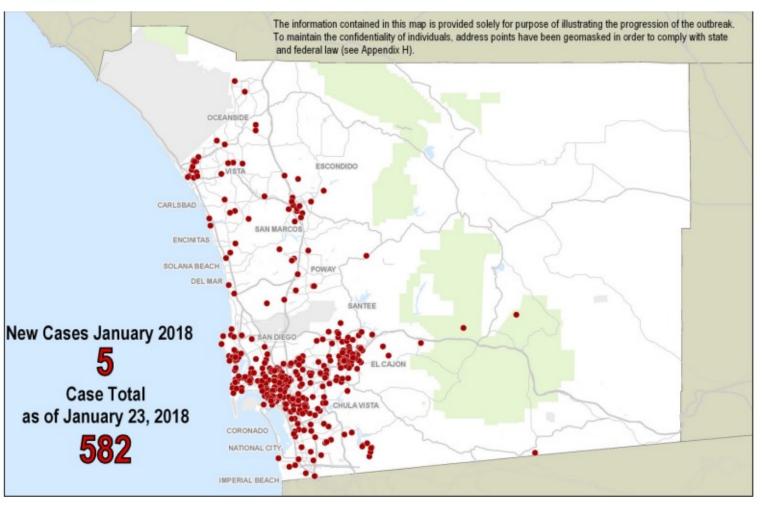
Health Advisory: Shigella sonnei among persons experiencing homeless in San Diego County

Why do we not learn?

<u>Hepatitis A</u>

- Unstably housed
- MSM

There are 582 cases associated with the HAV outbreak as of January 23, 2018, including 20 deaths.



SanDiegoHepatitisAOutbreak-2017-18-AfterActionReport.pdf (sandiegocounty.gov)



lt's 2022. Is stigma real for sexual and gender minorities?

blog.sandiego.org/2012/07/this-weekend-in-san-diego/177942_10151065991116056_1662390907_o/

'Don't say gay' bill passes in Tennessee Senate, would ban teachers from

discussing homosexuality

By ALIYAH SHAHID DAILY NEWS STAFF WRITER • May 21, 2011 at 11:43 am



Alabama governor signs into law two bills limiting transgender youth protections

By Steve Almasy and Amanda Musa, CNN () Updated 4:50 PM ET, Fri April 8, 2022

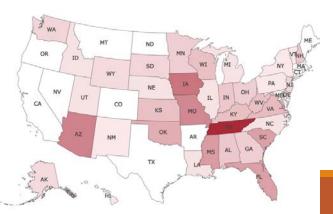
Texas judge blocks Obamacare rule on free HIV drugs claiming they violate religious liberties

Josh Marcus - 9h ago

These anti-LGBTQ laws go into effect today

Most anti-LGBTQ bills will be implemented today. Is your state on the list?

By John Russell Friday, July 1, 2022



Take Away's

- Infectious diseases spread in vulnerable communities.
 - Already stigmatized
 - Already hidden (must disclose to get services)
 - Close knit for survival
- Stigma is real
 - Internal and External
- Devote resources to communities that are being hit.
- Be prepared, not surprised
- Sustain public health resources for vulnerable communities
 - even when there isn't a public health emergency



Virology

HMPXV Virology

Enveloped double-stranded DNA virus that belongs to the Orthopoxvirus genus of the Poxviridae family.

Two distinct genetic clades:

- Central African (Congo Basin) clade 1
- West African clade 3.

Clade 3 causes a less severe disease than Clade 1. (for now)

Isolates from the 2022 outbreak shared **40 mutations** that distinguish it from its closest variant.



Fig. 1: Phylogenetic analysis of MPXV viral sequences associated with the 2022 worldwide outbreak. | Nature Medicine

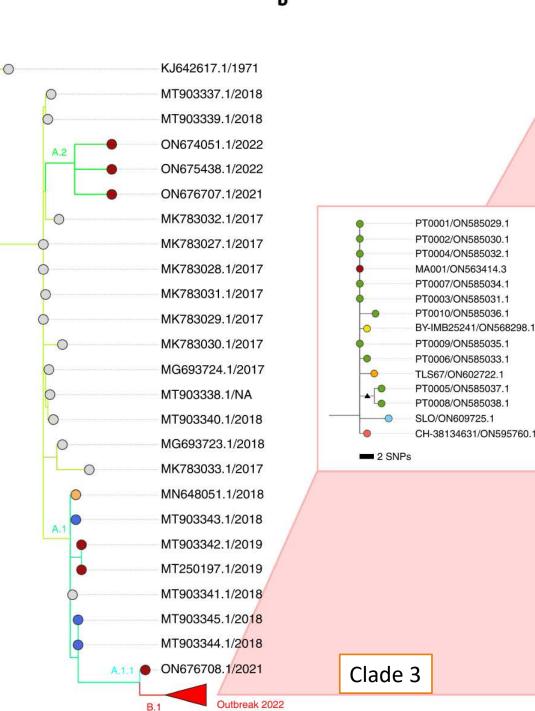
5 SNPs

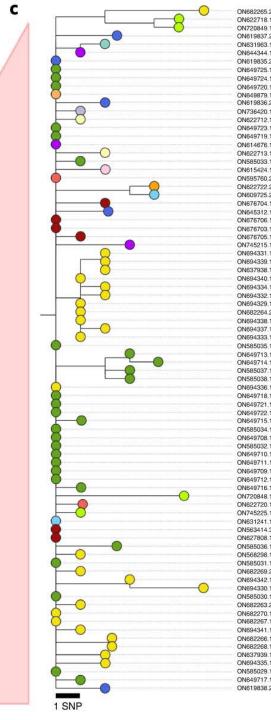
Clade 3

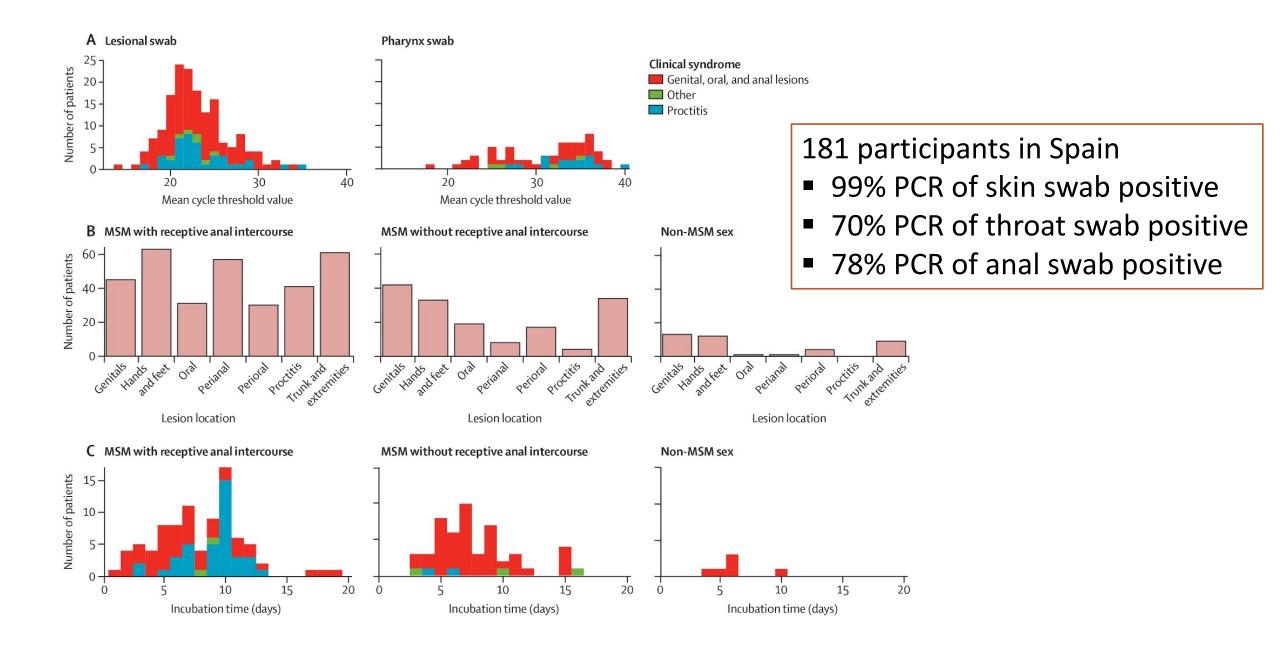
Clade 2



а

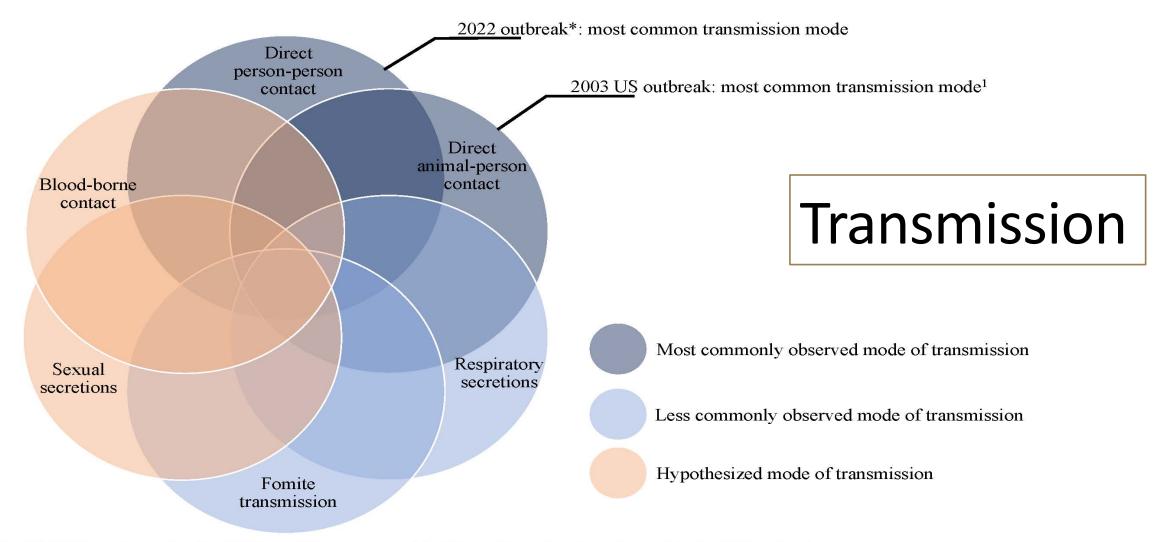






Tarín-Vicente et al, Lancet 2022

Transmission



*The HMPXV which circulated in 2003 is a different variant of the West African clade than observed in the 2022 outbreak. 1. Reynolds, M. G., Davidson, W. B., Curns, A. T., Conover, C. S., Huhn, G., Davis, J. P., ... & Damon, I. K. (2007). Spectrum of infection and risk factors for human monkeypox, United States, 2003. Emerging infectious diseases, 13(9), 1332. doi: 10.3201/eid1309.070175

Strathdee et al, PLoS Med under revision. 2022

MSM

Three reasons monkeypox outbreak seems to be driven by sexual transmission in MSM



MSM or bisexual men Sexual transmission suspected for 95% of all cases

Seminal fluid samples positive for monkeypox DNA Patients reported anogenital lesions

Disease

HMPXV Infection

The time from exposure to onset of symptoms from 5 to 21 days.

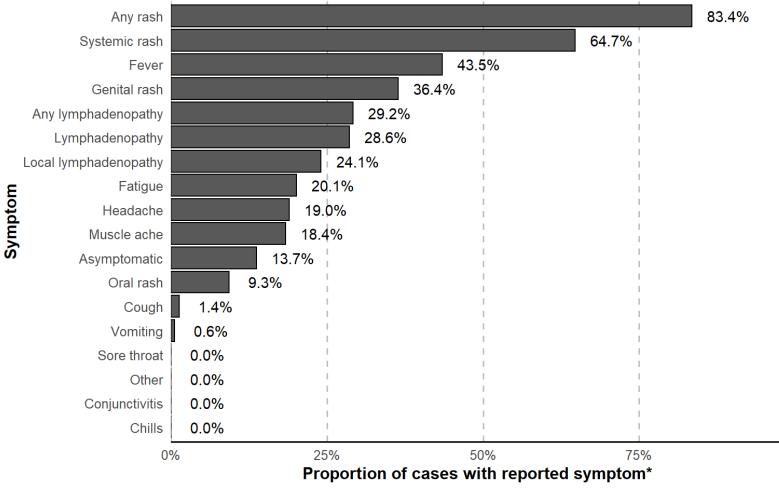
Replicates at the inoculation site then spreads to regional lymph nodes.

Following a period of initial viremia, the virus spreads to other body organs.

Duration of symptoms is typically 2 to 4 week.

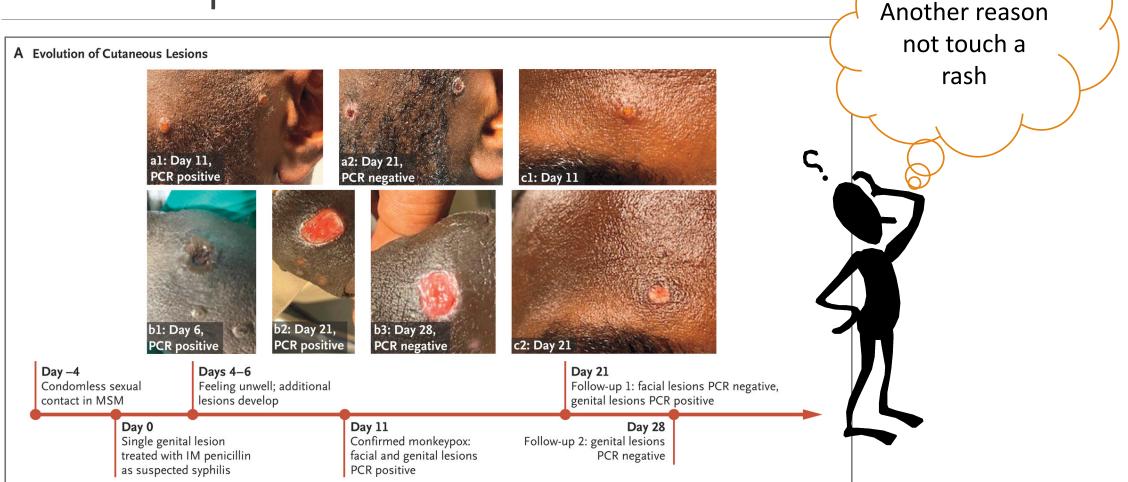
The 2022 outbreak and the pathobiology of the monkeypox virus - ScienceDirect

https://worldhealthorg.shinyapps.io/m px_global/



Source: WHO

*12811 cases with at least one reported symptom from a country where at least two unique symptoms reported used as denominator



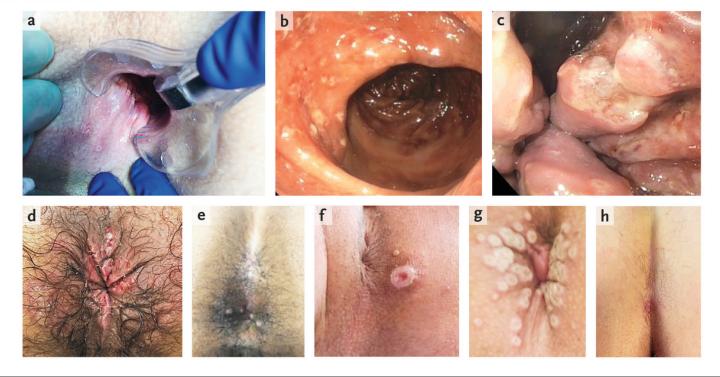
https://www.nejm.org/doi/full/10.1056/NEJMoa2207323

B Oral and Perioral Lesions



https://www.nejm.org/doi/full/10.1056/NEJMoa2207323

C Perianal, Anal, and Rectal Lesions



https://www.nejm.org/doi/full/10.1056/NEJMoa2207323

Fatality Rate

Countries/Clade	Case Fatality Rate	95% Cl ¹
All countries ²	78/892 = 8.7%	7.0%- 10.8%
Clade 1 ³	68/640 = 10.6%	8.4%-13.3%
Clade 3 ⁴	9/247 = 3.6%	1.7%- 6.8%
Clade 3, African countries only	9/195 = 4.6%	2.1%-8.6%

Clade 3, non-Africa Countries

- 1. Spain, male 40 yo "brain inflammation"
- 2. Spain male 31 yo "brain inflammation"
- 3. Brazil male 41 yo lymphoma on treatment (immunocompromised)
- 4. India male 22 yo "brain inflammation"
- 5. Ghana no information
- 6. Texas- "immunosuppressed" (?)

seekingalpha.com/news/3877939-texas-reportsfirst-us-death-linked-to-monkeypox

www.ncbi.nlm.nih.gov/pmc/articles/PMC8870502/

Potential Treatments

Vaccinia Immune Globulin, Cidofovir, Brincidofovir, and Tecrovirimat

Brincidofovir

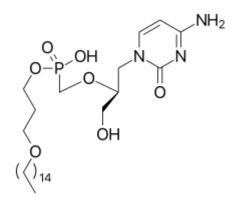
Brincidofovir FDA approved to treat smallpox

Prodrug of Cidofovir (conjugated with a lipid molecule)

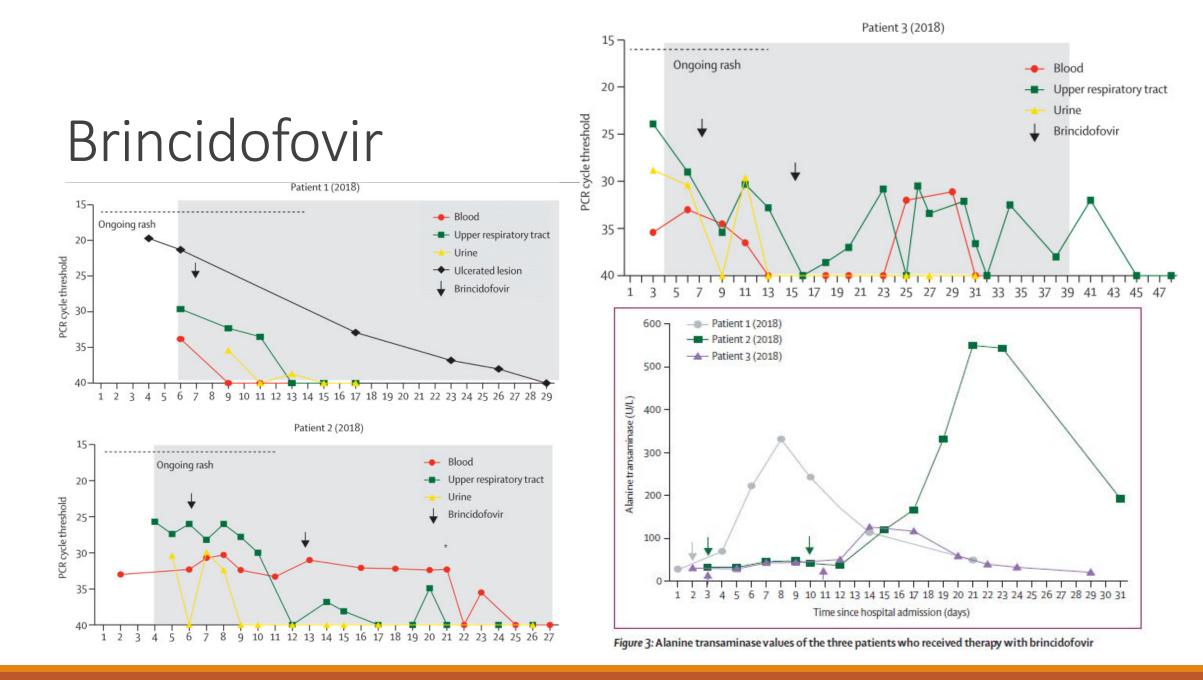
Inhibits viral DNA polymerase and acyclic nucleotide incorporating into viral DNA chain

Safety and efficacy data are lacking for HMPXV

Brincidofovir is not available through the US CDC eIND



Treatment Information for Healthcare Professionals | Monkeypox | Poxvirus | CDC



Tecovirimat

Tecovirimat is a promising treatment for HMPXV disease

- Indicated for the treatment of human smallpox disease
- Works by inhibiting viral p37 protein (highly conserved in orthopoxviruses) and blocks its interaction with cellular Rab9 GTPase and TIP47, preventing the formation of egresscompetent enveloped virions
- Safety and efficacy data are lacking for HMPXV

Tecovirimat is being used through CDC EA-IND and community demand for treatment is high

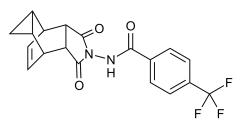


Table. Clinica	l Charac	teristic	s of Pa	atients	With M	onkeyp	oox Infec	tion Tr	eated Wi	th Tecov	virimat														
Patient	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
Smallpox vaccination history	Unk	Unk	No	No	No	No	No	Unk	Unk	Unk	Unk	No	No	No	Unk	No	Unk	Jynneos	Jynneos	No	Jynneos	Remote	No	Jynneos	Unk
HIV, ^a hepatitis B, hepatitis C status	HIV	None	None	None	None	HIV	HIV	HIV	None	HIV	HIV	None	HIV	None	None	HIV	None	None	None	None	None	None	None	None	HIV
Systemic symptoms	None	Fever, back- ache, fatigue	sea, chills	,	Fa- tigue	Fever, fa- tigue	Fever, backach headach diarrhea chills	ie, ie,	Malaise, fever	Fever	Fever, sore throat, itching, fatigue	Fever, head- ache	Fever, head- ache	Head- ache, shoul- der and neck pain	Head- ache, hoarse ness	fatigue, - head- ache,	, head- ache, nausea, fatigue	Fever, myalgia, head- ache, sore throat	Fever, chills, urethritis	Fever	Fever, sore throat, back pain	Fever, sore throat	Fever, chills, night sweats	Fever, chills, fatigue, painful bowel moveme	Fever nts
Lymphade- nopathy	None	None	None	None	In- gui- nal	In- gui- nal and neck	None	None	Neck and in- guinal	Cervical	Neck and in- guinal	Right in- guinal	None	None	In- gui- nal	In- gui- nal	None	In- gui- nal	None	In- gui- nal	Cer- vical, inguinal	Cer- vical	None	In- gui- nal	None
No. of lesions	10- 100	<10	<10	10- 100	<10	10- 100	10- 100	<10	10- 100	10- 100	10- 100	10- 100	>100	10- 100	<10	<10	10- 100	<10	<10	<10	<10	<10	<10	10- 100	<10
Genital lesions	Pe- rianal	Pe- rianal	Gen- ital	Gen- ital	Gen- ital	Pe- rianal	Pe- rianal	Gen- ital	Genital	No	Gen- ital	No	Pe- rianal and genita	Gen- ital l	Gen- ital	Pe- rianal	Gen- ital	Gen- ital	Pe- rianal	Gen- ital	Pe- rianal and genital	Gen- ital	Gen- ital	Gen- ital	Pe- rianal

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HIV, ^a hepatitis B, hepatitis C status	HIV	None	None	e None	None	HIV	HIV	HIV	None	ніv Some	ніv prev	None	ніv sma	None		ніv cinat	None ed ar	None Nd son	_{None} ne wi	None th Jy	None nneos	None Vaccii	None Natec	None	HIV
Systemic symptoms	None	Fever, back- ache, fatigue	Nau- sea, chills myal	5,	r Fa- tigue	Fever, fa- tigue	Fever, backach headach diarrhea chills	ie, ie,			Fever, sore throat, itching, fatigue	Fever, head- ache		Head-	Head- ache, hoarse ness	Fever, fatigue,	Fever, , head- ache, nausea, fatigue	Fever, myalgia, head-	Fever, chills, urethritis	Fever	Fever, sore throat, back pain	Fever, sore throat	Fever, chills, night sweats	Fever, chills, fatigue, painful bowel moveme	Fever
Lymphade- nopathy	None	None	None	e None	ln- gui- nal	In- gui- nal and neck	None	None	Neck and in- guinal	Cervical	Neck and in- guinal	Right in- guinal	None	None	In- gui- nal	In- gui- nal	None	In- gui- nal	None	In- gui- nal	Cer- vical, inguinal	Cer- vical	None	In- gui- nal	None
No. of lesions	10- 100	<10	<10	10- 100	<10	10- 100	10- 100	<10	10- 100	10- 100	10- 100	10- 100	>100	10- 100	<10	<10	10- 100	<10	<10	<10	<10	<10	<10	10- 100	<10
Genital lesions	Pe- rianal	Pe- rianal	Gen- ital	Gen- ital	Gen- ital	Pe- rianal	Pe- rianal	Gen- ital	Genital	No	Gen- ital	No	Pe- rianal and genita	Gen- ital Il	Gen- ital	Pe- rianal	Gen- ital	Gen- ital	Pe- rianal	Gen- ital	Pe- rianal and genital	Gen- ital	Gen- ital	Gen- ital	Pe- rianal

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HIV, ^a hepatitis B, hepatitis C status	HIV	None	None	None	None	HIV	HIV	HIV	None	HIV	HIV	None	HIV	None	None	HIV	None	None	None	None	None	None	None	None	
Systemic symptoms	None	Fever, back- ache, fatigue	sea, chills	,	Fa- tigue	Fever, fa- tigue	Fever, backach headach diarrhea chills	e, Ie,	Malaise, fever	Fever	Fever, sore throat, itching, fatigue	Fever, head- ache	Fever, head- ache	Head- ache, shoul- der and neck pain	Head- ache, hoarse ness	Fever, fatigue, - head- ache, consti- pation, sore throat	, head- ache, nausea,	head-	Fever, chills, urethritis	Fever	Fever, sore throat, back pain	Fever, sore throat	Fever, chills, night sweats	Fever, chills, fatigue, painful bowel moveme	Fever nts
Lymphade- nopathy	None	None	None	None	In- gui- nal	In- gui- nal and neck	None	None	Neck and in- guinal	Cervical	Neck and in- guinal	Right in- guinal	None	None	In- gui- nal	In- gui- nal	None	In- gui- nal	None	In- gui- nal	Cer- vical, inguinal	Cer- vical	None	In- gui- nal	None
No. of lesions	10- 100	<10	<10	10- 100	<10	10- 100	10- 100	<10	10- 100	10- 100	10- 100	10- 100	>100	10- 100	<10	<10	10- 100	<10	<10	<10	<10	<10	<10	10- 100	<10
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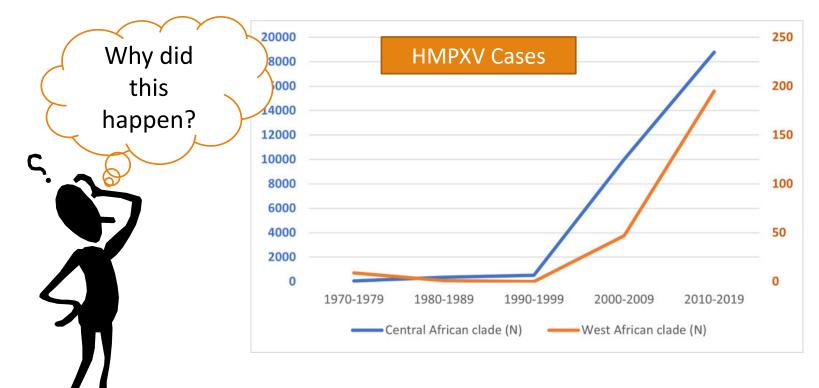
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Smallpox vaccination history	Unk	Unk	No	No	No	No	No	Unk	Unk	Unk	Unk	No	No	No	Unk	No	Unk		Jynneos		Jynneos	Remote		Jynneos	
HIV, ^a hepatitis B, hepatitis C status	HIV	None	None	None	None	HIV	HIV	HIV	None	HIV	HIV	None	HIV	None	None	HIV	None	None	None	None	None	None	None	None	HIV
Systemic symptoms	None	Fever, back- ache, fatigue	Nau- sea, chills, e myalo	,	r Fa- tigue	Fever, fa- tigue	Fever, backach headach diarrhea chills	ie, ie,	Malaise, fever	Fever	Fever, sore throat, itching, fatigue	Fever, head- ache	Fever, head- ache	Head- ache, shoul- der and neck pain	Head- ache, hoarse ness	Fever, fatigue, - head- ache, consti- pation, sore throat	ache, nausea,	head-	Fever, chills, urethritis	Fever	Fever, sore throat, back pain	Fever, sore throat	Fever, chills, night sweats	Fever, chills, fatigue, painful bowel moveme	Fever ents
Lymphade- nopathy	None	None	None	None	In- gui- nal	In- gui- nal	None	None	Neck and in- guinal	Almo	ost all	with	nger	nital	or pe	eri-ar	nal les	sions.	Wide	e ran	ge of r	numbe	er of	lesion	N e
					nat	and			gunat				-		•						0				
No. of lesions	10- 100	<10	^10	10- 100	<10	10- 100	10- 100	<10	10- 100	10- 100	10- 100	10- 100	>100	10- 100	<10	<10	10- 100	<10	<10	<10	<10	<10	<10	10- 100	<10
Genital lesions	Pe- rianal	Pe- rianal	Gen- ital	Gen- ital	Gen- ital	Pe- rianal	Pe- rianal	Gen- ital	Genital	No	Gen- ital	No	Pe- rianal and	Gen- ital	Gen- ital	Pe- rianal	Gen- ital	Gen- ital	Pe- rianal	Gen- ital	Pe- rianal and	Gen- ital	Gen- ital	Gen- ital	Pe- riana

Prevention

Will vaccines work?

Since HMPXV is closely related to smallpox, the smallpox vaccine works

Smallpox eradicated in 1980, and most worldwide vaccination campaigns wound down in 1970s



https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8870502/



Strategic National Stockpile

Prevention

One FDA approved vaccine for HMPXV:

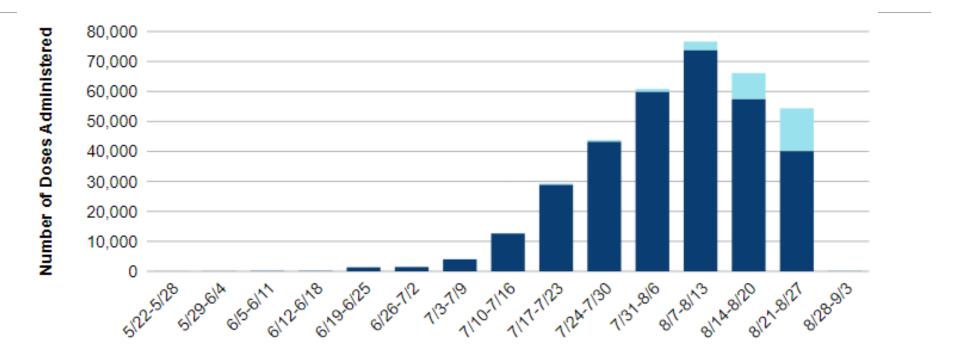
- JYNNEOS live, **non-replicating** virus. Rec 2 subcutaneous injections 4 weeks apart.
- PrEP and PEP

Although 20 million doses of Jynneos were stored in the SNS <10 years ago, all but 2,400 doses had expired by 2022.

- Sufficient vaccine for 1,200 people
- To date, almost 20,000 MPX cases in the US alone
- Additional Jynneos vaccine (other sources) allocated
- Emergency Use Authorization for Intradermal use (1/5th standard dose)

Total JYNNEOS Vaccine Doses Administered and Reported to CDC

S





 Second doses administered
 First doses administered

CUMULATIVE VACCINE SUMMARY Updated Weekly (Tuesday) Data Through 9/5/2022

San Diego

Note: Effective 8/29/22, the Cumulative Vaccine Summary will be updated on Tuesdays, with data through the previous day.

Data are preliminary and subject to change

33,468 vials requested by the County.

7,917 vials received by the County.1

5,755 vials allocated/distributed^

2,162 vials reserved for post-exposure prophylaxis.

¹ The number of vials received was allocated from the California Department of Public Health (CDPH) to respond to the current MPOX outbreak. These vials are then distributed to public and community/hospital vaccination sites to administer.

^The number of vials distributed to healthcare systems, FQHC, and County clinics.

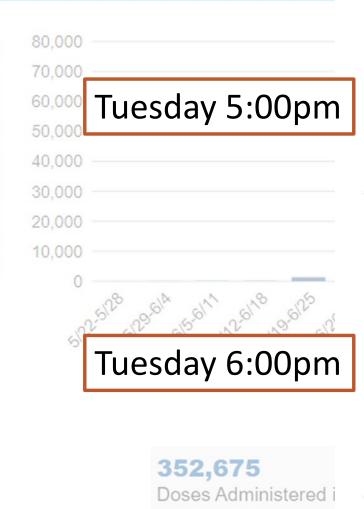
Data as of: September 5, 2022 Updated: September 6, 2022



Text **COSD MONKEYPOX** to **468-311** to get text alert updates.

Total JYNNEOS Vaccine Doses Admir

Number of Doses Administered



Mpox vaccine appointments are available for high-risk clients at North County vaccination event this Thursday. Schedule now at <u>myturn.ca.gov</u>

loses ⊭red ∋s administered

All Mpox vaccination appts. are filled. Stay tuned for more. -Todas las citas de la vacuna contra Mpox se han llenado. Mantente al tanto para más información.



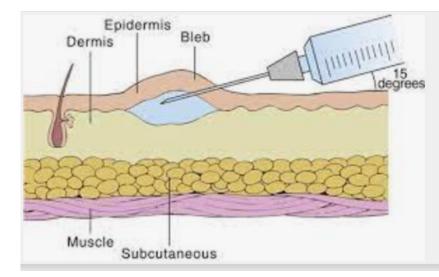
Gay, bisexual, and other men who have sex with men are taking steps to protect themselves and their partners from monkeypox.

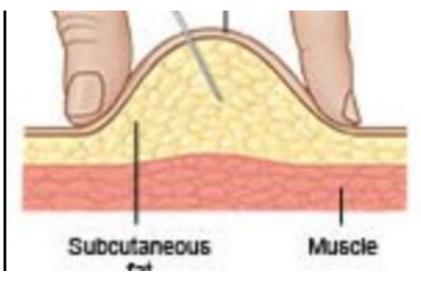


American Men's Internet Survey, 2022 Monkeypox Supplemental Survey. <u>https://emoryamis.org/</u>

Impact of Monkeypox Outbreak on Select Behaviors | Monkeypox | Poxvirus | CDC

Research





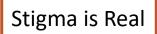
NIH Multisite 22-0020 DoSES Clinical Trial

- Dose Reduction Strategies of the Jynneos Vaccine
 - To evaluate dose sparing strategies to extend the limited vaccine supply
 - To compare immune responses between current licensed dose and dose sparing vaccine strategies

USA TODAY

You have a lump on your arm weeks after monkeypox vaccine. Why it's a 'super common' side effect.

Patrick Ryan, USA TODAY August 25, 2022 · 5 min read



A5418

A Randomized, Placebo-Controlled, Double-Blinded Trial of the Safety and Efficacy of Tecovirimat for the Treatment of Persons with Human Monkeypox Virus Disease

<u>Study of Tecovirimat for Human Monkeypox Virus (STOMP)</u>

SPONSOR: NIH/AIDS CLINICAL TRIALS GROUP

Other tecovirimat studies for HMPXV

PALM-007: randomized, double-blind, controlled trial of tecovirimat for HMPXV to be conducted in the Democratic Republic of Congo (n=450)

• Patients hospitalized for duration of treatment; different clade than current epidemic

PLATINUM: a randomized, double-blind controlled trial of tecovirimat for HMPXV to be conducted in the UK (n=500)

• Conducted remotely

Canadian trial (details unknown)

WHO/ANRS trial: 6 yrs and old; platform trial; time to complete resolution

All trials are evaluating same dose of tecovirimat, sampling of various compartments for HMPXV

 Unique features of A5418 rectal sampling, cross-over to tecovirimat for progression or severe pain, 2:1 allocation ratio, enrollment of presumptive HMPXV, earlier in course of disease, structure pain assessment

Study Summary

Design and Sample size	2:1 Randomized, Blinded, Placebo-controlled (n=530) Intensively sampled subset (n=100) Open label for children, persons with pregnancy or severe disease, severe immune suppression or severe skin disease (n≅250)
Study Population	Symptomatic HMPXV infection (greater than 3 kg)
Design	Superiority
1 ⁰ Outcome	Time to clinical resolution
Duration	57 days
Enrollment period	8 weeks
Agent	Weight based oral Tecovirimat

Hypothesis

1⁰ Objective

and endpoint

Tecovirimat will lead to faster clinical resolution of HMPXV disease compared to placebo.

To compare time to clinical resolution between people with HMPXV randomized to tecovirimat or placebo.

Clinical resolution is when all skin lesions are scabbed over, desquamated, or healed and all visible mucosal lesions healed

Step 1: daily self skin checks and photographsStep 2: participant reports clinical resolutionStep 3: video visit to confirm clinical resolutionStep 4: confirmation at in person visit

A5418 Population Eligibility

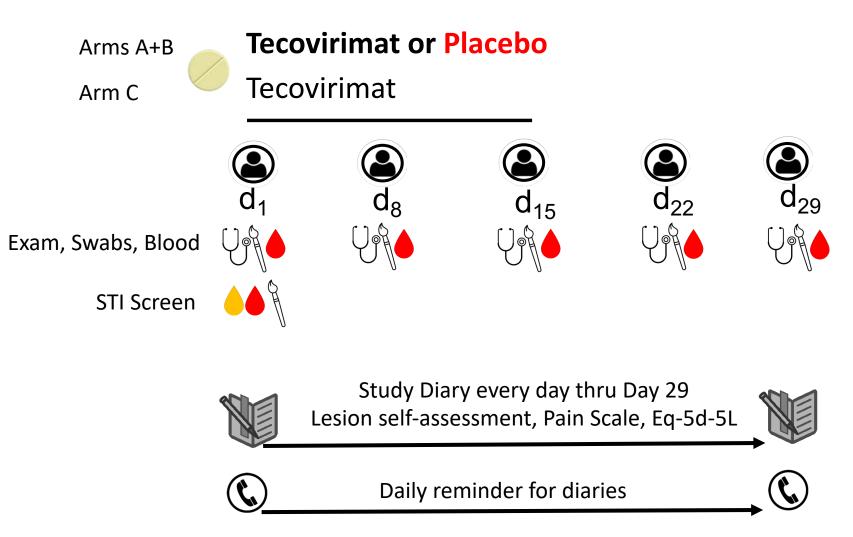
Outpatients (> 3 kg) with:

- **Confirmed or presumptive** disease (oral, rectal, or skin lesion)
 - Laboratory-confirmed infection preferred
 - Presumptive diagnosis with compatible skin or mucosal lesions or proctitis in cisgender men or transgender women with sexual contact with 1 or more cismen or transwomen in 14 days prior to symptom onset or people with exposure to another person with known HMPXV.
- Onset of symptoms of HMPXV infection ≤14 days prior to randomization,
- At least one active, (not yet scabbed) skin lesion, mouth lesion or proctitis with or without visible ulcers

Randomization restricted to those 18 years or older without one of the following conditions

Those with severe disease (ocular involvement, hospitalization, deep lesions requiring surgical intervention, potentially disfiguring lesions on the face), pregnant and breastfeeding people, and those with severe immunodeficiency, severe inflammatory skin conditions, children are in open-label cohort.

Schedule of Evaluations



(2) d₅₇ ()

Modified schedule for those <18 years of age

Randomized arm can move to open label tecovirimat for disease progression or severe pain (day 5 or later) Phase 2 Randomized, Open-Label Multisite Trial o Evaluate the immunogenicity of Dose Reduction Strategies of the MVA-BN Vaccine

OBJECTIVES						
Primary						
To determine if peak humoral immune			Route of	Vaccination Day		
responses following an ID regimen of 2	Arm	Dose of JYNNEOS (MVA-BN)	Administration	Day 1	Day 29	
x 10 ⁷ TCID ₅₀ MVA-BN are non-inferior to the licensed regimen of 1 x	1	2 x 10 ⁷ TCID ₅₀ (0.1 mL) – EUA regimen	Intradermal	Х	Х	
10 ⁸ MVA-BN administered SC	2	$1 \times 10^7 \text{ TCID}_{50} (0.05 \text{ mL}) - \text{on-tenth dose}$	Intradermal	Х	Х	
	3	1 x 10 ⁸ TCID ₅₀ (0.5 mL) – licensed regimen	Subcutaneous	Х	Х	
To determine if peak humoral immune responses following an ID regimen of 1 x 10 ⁷ TCID ₅₀ MVA-BN are non-inferior to the licensed regimen of 1 x 10 ⁸ MVA-BN administered SC						

Phase 2 Randomized, Open-Label Multisite Trial o Evaluate the immunogenicity of Dose Reduction Strategies of the MVA-BN Vaccine

- This study will enroll healthy, non-pregnant, non-breastfeeding adults 18 to 50 years old.
- Participants with stable medical conditions and well-controlled HIV infection, as determined by the investigator, can participate.
- Participant Inclusion and Exclusion Criteria <u>must be confirmed by an</u> <u>investigator named on the delegation log</u>. If there is any uncertainty, the PI should make the decision on whether a potential participant is eligible for study enrollment.
- No exemptions are granted on Inclusion/Exclusion Criteria.

Have you received the Monkeypox vaccine and/or been diagnosed or recovered from Monkeypox?

La Jolla Institute is seeking participants to contribute to research on the human response by providing their blood for study.

ELIGIBILITY

Volunteers received the Monkeypox vaccine and/or have been diagnosed or recovered from Monkeypox
Over 18 years of age

 Financial compensation is up to \$500 for your time and effort

PARTICIPATION

 Participation will consist of completing a brief study questionnaire + up to 5 blood draws

For more information or how to get involved:

- call (858) 255-0680
- email donors@lji.org
- visit lji.org/study



PREPARE INSTITUTE



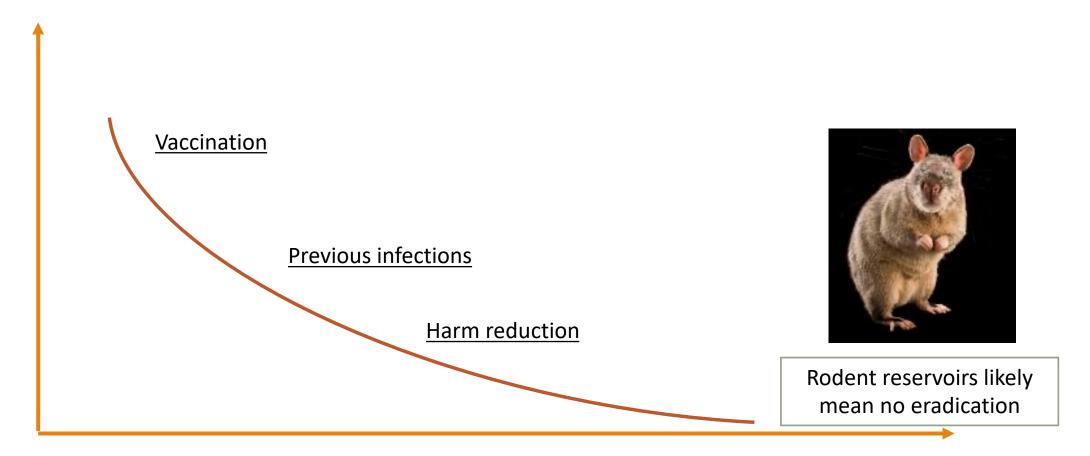


The joint SD CFAR & UC San Diego PREPARE Institute Developmental Grant in HIV/MPX is currently open.

This opportunity allows early stage (pre-R01) investigators who hold faculty appointments at an SD CFAR member institution to apply for up to \$50,000 in funding for a one-year project on MPX in the context of HIV risk, prevention, transmission, and/or treatment.

Developmental Grants (ucsd.edu)

Getting to zero







Resources and Information

WEBSITE & EDUCATIONAL MATERIALS

Human Monkeypox



8/22/2022 **NEW** Vaccine Webpage 8/11/2022 Town Hall Recording

About

Transmission, symptoms, treatment, exposure, prevention, and frequently asked questions (FAQs)





Cases and Test, Trace, and Treat (T3) dashboard

Vaccine

Vaccine eligibility, cumulative vaccine summary, and FAQs

Action items and resources

Healthcare Professionals

Local Cases



Local Health Emergency

Educational Materials

FAQs, flyers, and social media

Events

Town halls and telebriefings

Multiple languages available

SMS

Text COSD MONKEYPOX to 468-311.

Get text updates about monkeypox from the County, Text COSD MONKEYPOX to 468-311. (Phone users: tap to create the message)

TELEBRIEFINGS



Text COSD MONKEYPOX to 468-311 to SMS get text alert updates.

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Tag: monkeypox



County Distributing More Than 700 Vials Of Mpox Vaccine Aug. 22, 2022 | 5:56 PM

The County of San Diego is distributing 705 vials of Mpox (monkeypox) vaccine this week to healthcare providers around the region.





For updates, text COSD MONKEYPOX to 468-311. For resources, visit: SanDiegoCounty.gov/monkeypoxSD

