

MPOX AND THE MARITIME INDUSTRY: EVERYTHING YOU NEED TO KNOW

MPOX (FORMERLY KNOWN AS MONKEYPOX) IS A VIRAL ILLNESS. IT WAS INITIALLY IDENTIFIED IN 1958 IN RESEARCH MONKEYS. HOWEVER, IT IS NOW ALSO KNOWN TO OCCUR IN OTHER WILD ANIMAL SPECIES, WITH THE FIRST HUMAN CASE IDENTIFIED IN 1970 IN CONGO (DRC). SINCE THEN, TWO VIRUS TYPES CALLED CLADES ARE KNOWN TO BE ENDEMIC (OCCUR COMMONLY) IN CENTRAL AND WEST AFRICA. THE OUTBREAKS OCCURRING IN 2022 AND NOW IN 2024 SHOW A PREDOMINANT HUMAN TO HUMAN TRANSMISSION.

DR KATHERINE SINCLAIRE, SENIOR MEDICAL ADVISOR, MEDSEA

CURRENT SITUATION: A PUBLIC HEALTH EMERGENCY OF INTERNATIONAL CONCERN (PHEIC)

Following outbreaks of mpox within the Democratic Republic of Congo (DRC) in August, spilling into surrounding countries, and the rapid spread of a new clade, the virus was declared by the World Health Organisation (WHO) as a PHEIC. This declaration allows for improved global coordination and response to contain the outbreak and prevent further international spread. As a result of this, it is important to understand the risks of the virus and the implications for the wider maritime community.



REMAIN EDUCATED ABOUT MPOX RISKS

As the leading medical and security services provider, MedSea, an International SOS Company will continue to monitor the situation and provide updates via their pandemic site and find out more at my.internationalsos.com/medsea.

HOW IS MPOX SPREAD?

HUMAN TO HUMAN TRANSMISSION CAN OCCUR IN SEVERAL WAYS:

- Close direct contact with the rash or body fluids of an infected person
- Exposure to virus-contaminated objects, such as bedding or clothing
- Infected respiratory droplets during prolonged face-to-face contact
- In healthcare settings when there are breaches in infection control
- During pregnancy via the placenta.

Animal to human transmission can occur through bites, contact with blood or other bodily fluids, or touching the rash on an infected animal's skin.

SIGNS AND SYMPTOMS

Symptoms usually begin about 5-21 days after contact with the mpox virus. They initially may begin as a flu-like illness with fever, headache, body pains and fatigue, and infected people may have swollen lymph nodes. After about 1-3 days a rash develops. The rash is often painful and can involve any area of the body including inside the mouth. The rash may initially begin as red spots and progress to form blisters, then pustules, before eventually crusting and falling off. The visual nature of these symptoms may make mpox easier to identify, compared to a predominantly respiratory illness like Covid-19.

Most people will present with mild symptoms and recover after 2-4 weeks; however, it can be severe, leading to hospitalisation and even death. Children and people with immune deficiency are at higher risk of severe disease.

A person with mpox is considered to be infectious until all the lesions have crusted over and fallen off. It is possible that the virus can be sexually transmitted for a further 12 weeks which is why most authorities recommend using condoms for this period.

DIAGNOSIS AND TREATMENT

Diagnosis is made through specialised laboratory testing of blood and swabs of the rash. Testing capabilities may be limited in some locations.

Treatment includes supportive management of symptoms such as fever and body aches.

Specific antiviral medications can be used to treat mpox however they are in limited supply. Authorisation, availability and treatment protocols differ from country to country. Research and development are ongoing.

IS THERE AN MPOX VACCINATION?

A vaccine used for the prevention of smallpox and mpox infection, known by the names, Jynneos, Imvamune and Imvanex, is increasingly available in several locations. The primary vaccination course requires two doses, given 28 days apart. Supply is limited and countries have different eligibility criteria. Additional mpox vaccines are currently in various stages of research and development.

CURRENT RECOMMENDATIONS FOR THE MARITIME INDUSTRY

- **Crew Education:** Educate crew members about mpox symptoms, prevention, and reporting procedures
- **Ensure your crew members follow good general hygiene practices** and avoid close skin-to-skin contact in areas where mpox cases are present
- **Report any illnesses early**
- **Make sure that your medical kit/chest is stocked and up to date:** Most vessels will already have medication on board in their inventory to provide supportive treatment for crew members who might have contracted mpox
- **What about mpox vaccinations?** Mpox vaccine availability varies in different locations and may be restricted to those that have a high risk of exposure or severe illness. Local health authority guidelines will need to be followed.
- **Consider chicken pox vaccination.** Mpox can look clinically similar to chicken pox so having crew vaccinated against chicken pox may prevent a case on board and the subsequent quarantine and disruption that may occur. Chicken pox vaccination does not protect against mpox.