

CLINICAL COURSE of MONKEYPOX

A MILDER and RARELY FATAL version of smallpox.

EXPOSURE

- PERSON-to-PERSON
 - Direct contact with an infectious rash, scab, or body fluids.
 - Touching clothing and other items that were in contact with an infectious rash, scab, or body fluids.
 - Respiratory secretions during direct and prolonged face-to face contact or during intimate, physical or sexual contact.
 - Fetal exposure through the placenta.
- PERSON-to-ANIMAL
 - Eating meat or food products from an infected animal.
 - Scratches or bites from an infected animal.

INCUBATION

- As early as four days or up to two weeks after infection.

PRODROME

- LOW GRADE Fever (BEFORE the rash)
- MYALGIA, backache, and FATIGUE
- UPPER RESPIRATORY SYMPTOMS with nasal congestion, cough, sore throat and LYMPADENOPATHY
- HEADACHE

RASH

- Separate clusters of lesions may appear at different times on ANY part of the body.
- Affects the extremities more than the trunk.
- Each cluster progresses through FOUR STAGES of the Rash:
 - Macular: 1-2 days \rightarrow
 - Papular: 1-2 days → with discomfort and pain
 - \circ $\;$ Vesicular: 1-2 days \rightarrow with discomfort and pain
 - Pustular: 5-7 days

Scab and resolution over another 7-14 days. Hypo or hyper pigmentation may remain as well as pitted scarring. (AFTER ALL THE SCABS HAVE FALLEN OFF THE PERSON IS NO LONGER CONTAGIOUS)

RECOVERY

- 2-4 weeks depending on the viral strain, route of and location of exposure and initial health of individual
- Unlike smallpox lifetime immunity is unknown.