

Philadelphia Department of Public Health Division of Disease Control

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Health Advisory

Monkeypox Vaccination Strategy and Prioritization of First Doses August 4, 2022

SUMMARY POINTS

- The Health Department is implementing a single dose vaccination strategy to make vaccine available to those at highest risk of exposure to monkeypox.
- The Health Department will expand eligibility and give second doses as more supply becomes available.

As of August 3, 2022, there were 84 cases of monkeypox in Philadelphia. Cases continue to rise.

The Health Department will prioritize providing first doses to offer protection to more at-risk Philadelphians until we receive adequate vaccine supply. This single dose strategy is consistent with the monkeypox vaccine distribution strategy taken in the UK, Canada, and New York City.

This decision is based on the available scientific evidence, the accelerating outbreak, the high number of eligible people and demand for vaccine, and extreme shortages of JYNNEOS[™] vaccine nationally. In a phase 3 study comparing Jynneos to ACAM2000, the antibody titers were comparable at 2 weeks post vaccination with each of the vaccines. ACAM2000 is thought to be effective at that time and so Jynneos may be as well. A longer interval will not negatively affect protection from monkeypox.

Until there is sufficient supply in the city, all vaccine doses will be treated as first doses, and second dose appointments will be scheduled once we have enough vaccine to do so. The Department will communicate to people who have received first doses about when second doses are available and how to receive them. Providers giving vaccine out of their clinics and offices should do the same.

Individuals experiencing symptoms of monkeypox cannot receive vaccine until they have a negative test, or if no rash was present, until symptoms resolve. Individuals who have been infected should not receive vaccine at this time as immunity is thought to be long lasting.

In addition to vaccine, other prevention measures offer protection. Advise patients to avoid close physical contact if sick, especially if they have a new or unexpected rash or sore. For those who choose to have sex while sick, it is best to avoid kissing and other face-to-face contact. Also, sores should be covered with clothing or sealed bandages. This may help reduce — but not eliminate — the risk of transmission. Cleaning hands, sex toys, and bedding before and after sex or other intimate activities is advised. When making plans, Philadelphians should consider the level of risk. Having sex or other intimate contact with multiple or anonymous people (such as those met through social media, dating apps, or at parties) can increase risk of exposures. For further guidance on risk reduction, visit the <u>CDC's website</u>.

For recent data, guidance, and information about monkeypox, see the <u>Health Department's monkeypox</u> <u>webpage</u>.