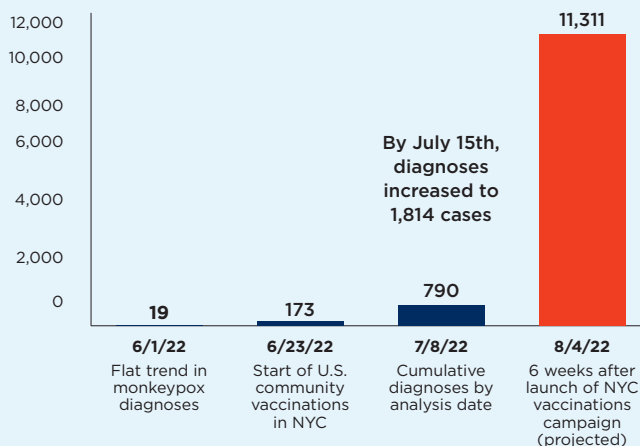


MONKEYPOX AND MENINGOCOCCAL DISEASE OUTBREAKS SIGNAL NEW HEALTH THREATS FOR COMMUNITIES HEAVILY IMPACTED BY HIV AND DEMAND IMMEDIATE ACTION

IN APRIL 2022, A NEW VARIANT OF MONKEYPOX VIRUS INFECTION was identified in the United Kingdom that has exploded into a global outbreak. The first case was diagnosed in the United States in May and as of July 15 1,814 cases have been reported, with 12,556 cases worldwide. In June 2022, the Centers for Disease Control and Prevention (CDC) also announced that they were working with Florida public health authorities on a large and growing outbreak of meningococcal disease. Both conditions are currently concentrated among gay and bisexual men and other men who have sex with men (MSM). These crises are sentinels of a growing threat of infectious diseases, and if they are not effectively contained, they could spread to broader populations, similar to HIV.

We are very early in this new monkeypox crisis and likely early in an unfolding and growing threat of meningococcal and other infectious diseases. Many have reflected on how the course of HIV could have been curbed had we had a government that took swift, decisive, and helpful actions. We applaud the rapid response of the Biden-Harris Administration and are grateful for their commitment to our communities. Nonetheless, time is of the essence to effectively curb and limit current and future threats. **As our analysis shows, projected monkeypox cases may grow exponentially, and the time to act is now.** This includes short-term solutions to serve MSM and other highly-impacted communities by providing emergency resources to combat these threats and by reinforcing existing partnerships with trusted community-based organizations (CBOs) to address stigma, ensure equitable testing, vaccination and care, and to create effective social marketing efforts. Longer-term, we need to bolster funding for public health writ large, including a sustained commitment to expanding sexual health clinic capacity to address a variety of sexually transmitted infections (STIs).

EXPONENTIAL GROWTH: PROJECTED U.S. MONKEYPOX DIAGNOSES AS EARLIEST GROUP OF GAY MEN BECOMES FULLY VACCINATED



SOURCE: amfAR analysis using data downloaded from *Our World in Data*, July 10th, 2022 based on current guidelines indicating that it takes six weeks from first dose of vaccine to achieve full protection. Analysis: Log-linear regression: $\log(\text{cumulative cases}) = B_0 + B_1 \cdot t$, t is days since June 1st ($t \geq 0$). Resulting output used to estimate projected cases by August 4, 2022. Projected number of diagnoses will be affected by: 1. Proportion of population vaccinated by August 4th; 2. Whether diagnoses begin to reflect the actual number of cases; 3. Behaviors that facilitate transmission.

TIME IS OF THE ESSENCE

Policy action is needed to:

BOLSTER THE OUTBREAK RESPONSE

Increase testing and surveillance for monkeypox

Expand vaccine access to achieve herd immunity as early as possible:

- **Focus on containment in MSM communities** by distributing greater quantities of the JYNNEOS vaccine to the most heavily impacted communities right now, even at the risk of future temporary stockouts.
- **Consider a one-dose regimen** of the JYNNEOS vaccine to achieve greater immunity and reduce exponential growth in weekly transmissions.
- **Consider expanding meningococcal disease vaccination guidelines** to all MSM, not only those in or traveling to Florida.

EXPAND COMMUNITY RESPONSE CAPACITY

- **Fund a diversity of organizations**, including Black and Latinx, ballroom community, leather and other groups serving gay and bisexual men, transgender people and other affected communities, as well as networks of people living with HIV, people who use drugs, and people who engage in sex work to provide education, help with contact tracing, interface with researchers and government officials and community members, and support the delivery of vaccination and other services with community-based clinical providers.

IDENTIFY AND ALLOCATE EMERGENCY RESOURCES

- **Use transfer authority to mobilize resources to fund HIV and STI programs** to provide services for the uninsured, support education and outreach, and conduct research focused on health trends experienced by people with HIV and HIV-affected communities as part of a sustained commitment to greater funding for sexual health clinic capacity to address a variety of sexually transmitted infections (STIs).

All of this should be done in the context of a global response plan that envisions much greater resource sharing with other nations, even in light of domestic resource shortages.