



### Monkeypox and IHR

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#### **Outline of the presentation**

- Background
- Global Update
- International Health Regulations (IHR 2005)
- Obligations under the IHR 2005
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### **Background**

- Since 13 May 2022, cases of monkeypox have been reported to WHO from 27 Member States across 4
   WHO regions that are not endemic for monkeypox virus.
- Epidemiological investigations are ongoing; most reported cases so far have presented through sexual health or other health services in primary or secondary health care facilities.
- While the West African clade of the monkeypox virus has been identified from samples of confirmed cases so far, travel links of cases have been to countries in Europe and North America rather than to West Africa where this virus normally circulates.
- The confirmation of monkeypox in persons who have not travelled to an endemic area is atypical and one case of monkeypox in a non-endemic country is considered an outbreak.
- The sudden and unexpected appearance of monkeypox simultaneously in several non-endemic countries without known epidemiological links to West or Central Africa suggests that there has been **undetected transmission for possibly an extended period of time**.





# **Global Update**

- As of 2 June, 780 lab confirmed cases have been reported to WHO from 27 non-endemic countries in 4 WHO Regions **no associated deaths.** 
  - Majority (88%) of confirmed cases (688) are from the WHO European Region (20 countries).
  - O Confirmed cases have also been reported from the Region of the Americas (80), Eastern Mediterranean Region (9) and Western Pacific Region (3).
- Situation is evolving and WHO expects more cases as surveillance expands in non-endemic countries as well as countries known to be endemic that have not recently been reporting cases.

Region	Country	Confirmed	Probable
AMRO	Argentina	2	
	Canada	58	
	Mexico	1	
	United States of America	19	
EMRO	Morocco	1	
	United Arab Emirates	8	
EURO	Austria	1	
	Belgium	12	
	Czechia	6	
	Denmark	2	
	Finland	2	
	France	33	
	Germany	57	
	Hungary	1	
	Ireland	4	
	Israel	2	
	Italy	20	
	Malta	1	
	Netherlands	31	
	Norway	1	
	Portugal	138	
	Slovenia	6	
	Spain	156	
	Sweden	4	
	Switzerland	4	
	United Kingdom of Great Britain and Northern		
	Ireland	207	
WPRO	Australia	3	
Cumulative	27 countries	780	





#### International Health Regulations (IHR 2005)



IHR (2005), represents a binding international legal agreement involving 196 countries across the globe, including all the Member States of WHO, to collectively prepare for and respond to events that may constitute a public health emergency of international concern according to a common set of rules.



- Their aim is to help the international community to prevent and respond to acute public health risks that have the potential to cross borders and threaten people worldwide.
- Purpose and scope of the IHR (2005) is to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, & which avoid unnecessary interference with international traffic and trade.





### **Obligations under the IHR 2005**

- South Africa as a WHO Member State, has obligations under the IHR 2005
- IHR requires States Parties to establish and maintain the capacity to detect, assess, notify and respond to public health risks and acute events, including those at points of entry, (Annex 1 of the Regulations).
- The relevance of the IHR as the legislative instrument to ensure global public health security lies in their full application, implementation and compliance by all States Parties.
- WHO member states have obligations, in terms of the IHR(2005) for having systems in place for identifying and assessing potential public health threats, including Monkeypox.





## WHO recommendation for Preparedness and Response

- Due to the ongoing multi-county outbreak of monkeypox and the complexity in identifying the source of infection, WHO recommends the following actions for consideration by all Member States:
  - Increase surveillance for monkeypox in the human population;
  - Adapt and disseminate risk communication materials to communities at risk, to sensitize the community about monkeypox and its transmission for rapid detection and control of events;
  - Ensure laboratory preparedness in countries (obtain reagents, ensure there are appropriately trained staff, Standard Operating Procedures (SOPs) and specimen collection/testing mechanisms);
  - Identify national partners that could be able to assist if an outbreak occurs.





## Monkeypox resources

- WHO website monkeypox page
  - https://www.who.int/health-topics/monkeypox/
- Monkeypox Fact Sheet
  - https://www.who.int/news-room/fact-sheets/detail/monkeypox
- **Outbreak toolkit** 
  - Monkeypox Outbreak Toolbox (who.int)
- **OpenWHO monkeypox introductory training** 
  - Monkeypox: Introduction | OpenWHO /
  - Variole du singe : Introduction | OpenWHO
- OpenWHO monkeypox extended training

  - Monkeypox epidemiology, preparedness and response | OpenWHO / Épidémiologie de la variole du singe, préparation et réponse | OpenWHO
- **ACVVR** reports
  - **Advisory Committee for Variola virus Research (who.int)**





# Thank you

