

PAHO



Pan American
Health
Organization



World Health
Organization
REGIONAL OFFICE FOR THE
AMERICAS



MONKEYPOX
MULTI-COUNTRY
OUTBREAK RESPONSE
REGION OF THE AMERICAS

Report n. 7, 3rd March 2023

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MONKEYPOX

SITUATION IN NUMBERS

Region of the Americas

As of 24 February 2023 (16:00)

Total as of 24 Feb 2023	58,578 confirmed cases	Last 4 weeks 28 Jan to 24 Feb 2023	607 new confirmed cases	-55% decrease in variation of cases
31 countries/territories with confirmed cases	76 deaths		9 new deaths	0 newly affected countries

Global WHO Risk Assessment¹: Moderate

Risk Assessment for the Americas¹: Moderate

As of 24 February 2023,

Globally, 86,173 (85,511) confirmed cases of mpox, including 89 deaths, from 110 Member States across all 6 WHO Regions: 68% in the Region of the Americas, 30% in the European Region, 1.6% in the African Region, and ≤1% each in the 3 remaining WHO regions (**Figure 1**).

- The number of new weekly cases in epidemiological week (EW) 7 compared to EW 6 of 2023 (% variation) has decreased by 54%.
- In the past 21 days, 20 countries have reported new cases.
- In last week of full reporting, 5 countries reported an increase in the weekly number of cases, with the highest

increase reported in Costa Rica.

- 97% of cases with available data are male, the median age is 34 years (IQR: 29 – 41). Males between 18-44 years old account for 79% of cases with available data.
- 1% of cases with available age data are aged 0-17 years, including 267 cases aged 0-4 years. 73% of cases aged 0-17 are reported from the Region of the Americas.

In the **Region of the Americas**, 58,578 confirmed cases were reported from 31 countries and territories, including 76 deaths.

- In the past 4 weeks, the Region has reported 86% of global cases.

- Six countries in the Region are among the top 10 countries globally with the highest number of confirmed cases, and account for 92% of confirmed cases within the Region: United States, Brazil, Colombia, Mexico, Peru, and Canada.
- The number of new weekly reported cases in EW 7 compared to EW 6 of 2023 (% variation) decreased by 55%.
- 48,651 (96%) of confirmed cases with available information are male. Most cases with available information are aged 20 to 45 years old and self-identify as men who have sex with other men. 13 countries in the Region have reported 736 confirmed cases among persons ≤17 years old, including 45 cases among infants.

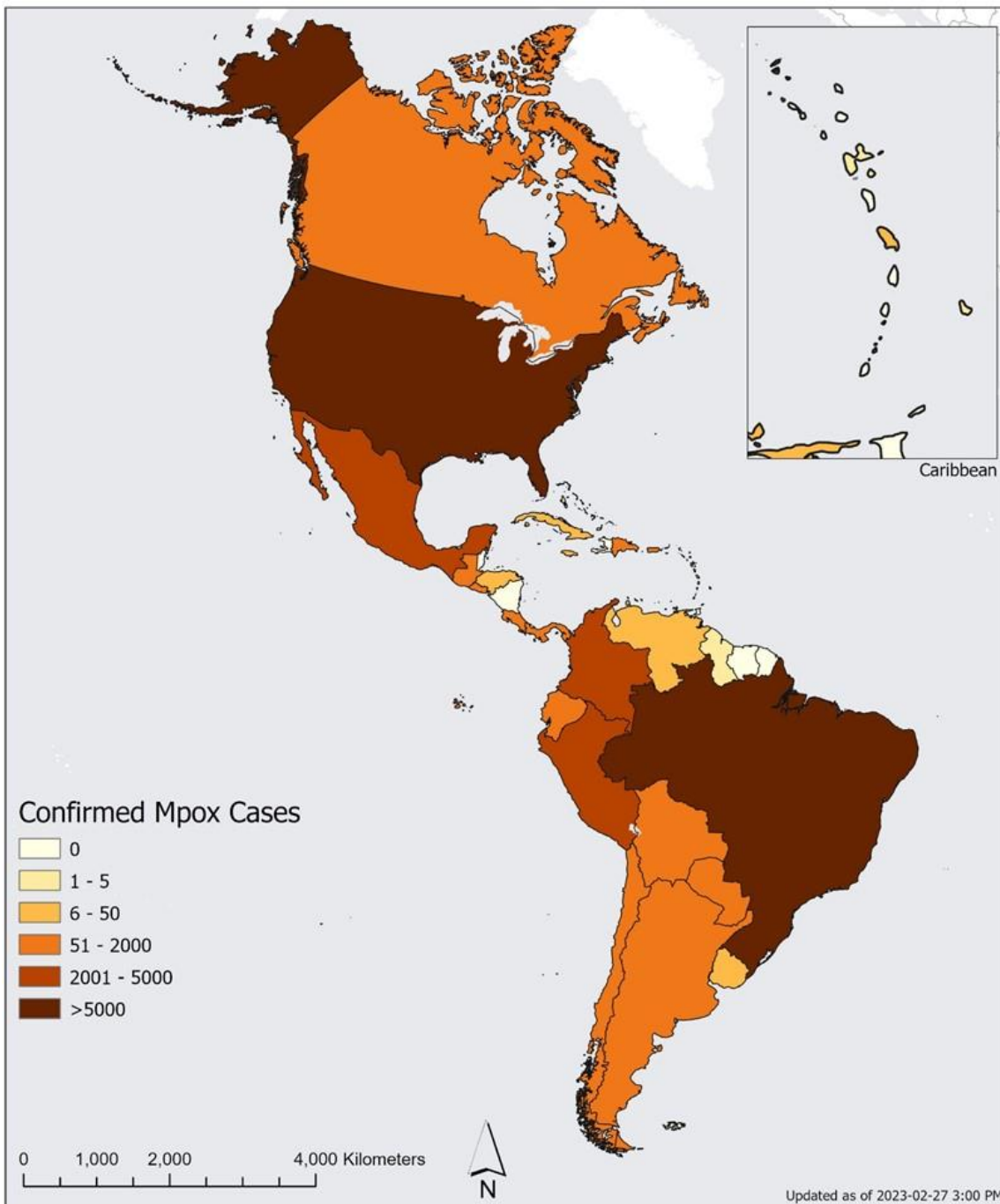
PAHO/WHO response to monkeypox in the Americas

On 23 May 2022, the Pan American Health Organization (PAHO) activated its special emergency procedures (SEPs) and established an incident management support team (IMST) to ensure a timely response to the monkeypox outbreak in the Region of the Americas and lead preparedness efforts in Member States. Under International Health Regulations (IHR) (2005), on 23 July 2022, the World Health Organization (WHO) Director-General declared the monkeypox outbreak a Public Health Emergency of International Concern (PHEIC) and issued recommendations to countries to implement a coordinated response, stop transmission, and protect vulnerable groups.

WHO has issued interim guidance to guide countries in reinforcing their surveillance, case investigation, and contact tracing to break the chains of transmission and stop the outbreak. The first case in the Americas was confirmed on 18 May 2022. Since then and as of the date of this reporting, cases have been confirmed in 31 countries and territories in the Americas.

Due to limited supply at the global level, PAHO and WHO are working together to improve access to a monkeypox vaccine approved in 2019.

As of the date of this reporting, the majority of monkeypox cases were confirmed in gay and bisexual men, and other men who have sex with men. Therefore, PAHO has been working actively with health authorities, civil society, and targeted communities across the Americas to provide information about symptoms and raise awareness about preventive measures. Cases have also been confirmed in women, including pregnant women, which must not be ignored. Cases in children have also been reported in the Region.



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The designations employed and the presentation of the material in these maps do not imply the expression of any opinion whatsoever on the part of the Secretariat of the Pan American Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Annex 1. Geographical distribution of confirmed cases of monkeypox in the Region of the Americas. As of 24 February 2023 (16:00 EST).

PAHO/WHO Response highlights through 28 February 2023

Engaging and protecting communities

Risk communication & community engagement ▪ **Community engagement and response in at-risk populations** ▪ **Mass gatherings & POE**

During the month of February 2023, in **The Bahamas**, PAHO shared flyers with key mpox facts, information, measures for recovering at home and key information for sex workers. The material was distributed to health care facilities and organizations serving high-risk groups (men who have sex with men, sex workers and health care workers).

In **Costa Rica**, in February 2023, PAHO in collaboration with the Ministry of Health disseminated short videos and informative material, calling on the population to seek medical care in the case of detection of lesions in the body or related mpox symptoms for the appropriate diagnosis and treatment. The initiative is part of communication campaign, which also includes information about the prevention and control of mpox through publications on the social networks of the country's Ministry of Health.



Collective intelligence for detection and containment

Laboratory diagnostics ▪ **Surveillance, case investigation & contact tracing** ▪ **Information management & risk assessment** ▪ **Human-to-animal transmission (pets)**

In **Honduras** PAHO has been working in close coordination with local health authorities to help strengthen epidemiological surveillance for mpox in the country since a technical mission carried out in November 2022. During the visit, PAHO met with the Ministry of Health to review the situation of mpox in the country and supported the organization of a

workshop aimed to strengthen the national response in the management and surveillance of mpox, review infection prevention and control measures, among others. The workshop was attended by regional laboratories' staff and epidemiologists. During the mission, PAHO also participated in a workshop on strengthening community response to mpox, organized by the MoH and partners. Representatives of gay men and other MSM communities, transgender population and sex workers participated in the workshop.

PAHO has also been coordinating actions with **Guatemala** and **Panama** after a mission to these countries in the month of November 2022. The visit aimed to provide technical cooperation on surveillance and response to the mpox outbreak in Guatemala, and participation in a congress in Panama. In Guatemala, PAHO visited key health facilities, and NGOs working with the most at-risk populations and met with the Ministry of Health. While in Panama, PAHO participated in the Congress of the Central American and Caribbean Association of Infectious Diseases in a panel dedicated to debate experiences in the clinical management of patients with mpox.

Countermeasures and research: secure access to supplies

Immunitization ▪ **Vaccines access** ▪ **Strategic health supplies** ▪ **Regulatory issues** ▪ **Research**

On 27 February 2023, PAHO updated [Therapeutic options for monkeypox: evidence x synthesis](#), available in Spanish. The publication includes the results of a systematic rapid review of available evidence. Evidence of potential therapeutics was synthesized from available randomized and non-randomized controlled trials and observational studies. As new evidence emerges, PAHO periodically updates the publication and corresponding recommendations.

REGION OF THE AMERICAS

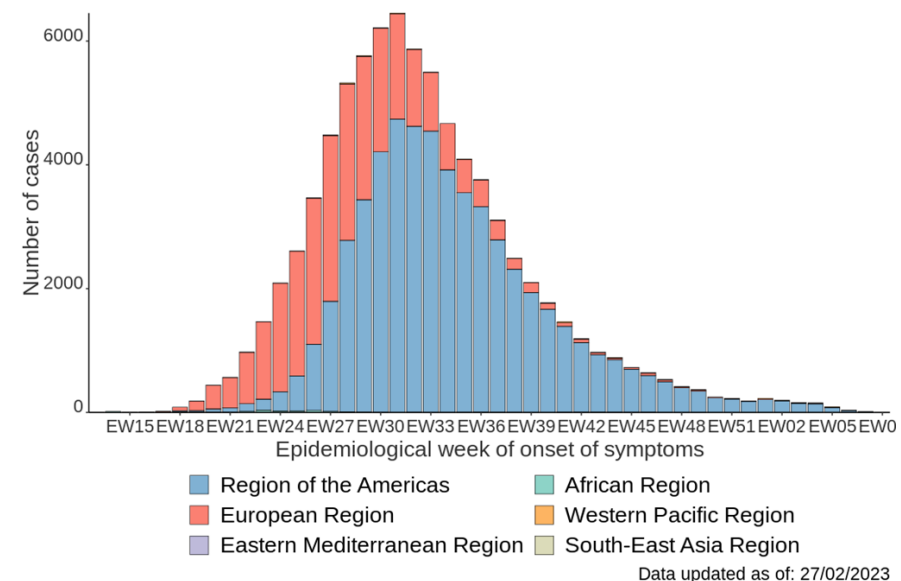
Epidemiological Update

In the Region of the Americas, as of 24 February 2023 (16:00 EST), there is a total of **58,578** confirmed cases of monkeypox, including **76 deaths** in B United States of America (34), Brazil (15), Peru (15), Mexico (4), Chile (2), Ecuador (3), Argentina (2), and Cuba (1), reported from **31 countries** and territories (Table 1).

In the **Region of the Americas**, as of 24 February 2023 (16:00 EST), there are a total of 58,578 confirmed cases of mpox (Table 1, Figure 2) were reported from 31 countries and territories, including 76 deaths in: United States of America (34), Brazil (15), Peru (15), Mexico (4), Chile (2), Ecuador (3), Argentina (2), and Cuba (1), reported from 31 (Table 1, Annex 1, Figure 3). In the last 4 weeks (28 January – 24 February 2023), 607 additional mpox cases were reported from 16 countries and territories, including 9 deaths in Ecuador (1) and United States (8). Eight countries in the Region account for 97% of confirmed cases: United States of America, Brazil, Colombia, Mexico, Peru, Canada, Chile, and Argentina – listed by total number of cases in decrease order (Figure 4). The number of new weekly reported cases in EW 7 compared to EW 6 of 2023 (% variation) decreased by 55%.

PAHO/WHO has received an anonymized line list from Member States regarding 57,801 cases. Of these, 51,160 cases had sex information available, of which 48,651 (96%) were male; 57,524 cases had age information, which ranged from 0 to 95 years old (median 33 years, mean 35 years) and 736 confirmed cases aged 17 years or younger were reported by 13 countries, including 45 cases among infants (<1 year-old); 55,645 cases reported dates of symptom onset in 2022, and 816 cases reported dates of symptom onset in 2023, ranging from 01 January to 19 February 2023. Of 14,324 cases with available information on history of reported travel, 12,933 (90%) reported no recent travel. Among 34,548 confirmed cases with hospitalization information, 3,164 (7%) were hospitalized (including for isolation purposes) (Table 2). Of 2,278 confirmed cases reported among women, 37 are pregnant. One hundred and sixty-five of the cases among women required hospitalization (including for isolation purposes), 13 of these were pregnant.

Figure 1. Global distribution of monkeypox cases by date of symptom onset. As of 24 February 2023.



Source: Information received from the International Health Regulations (IHR) National Focal Points (NFPs) or published on the websites of the Ministries of Health, Health Agencies or similar and reproduced by PAHO/WHO.

Table 1. Confirmed and suspected cases of monkeypox by country/territory in the Region of the Americas. As of 24 February 2023 (16:00 EST)*.

Country/Territories	Total cases	Total deaths	Total cases per 1M	Cases - EW7	Cases - EW6	% variation
United States of America	30,012	34	90.7	13	41	-68.3
Brazil	10,825	15	50.9	0	50	-100
Colombia	4,081	0	80.2	6	2	200
Mexico	3,877	4	30.1	0	60	-100
Peru	3,752	15	113.8	15	10	50
Canada	1,460	0	38.7	0	0	-
Chile	1,431	2	74.9	4	6	-33.3
Argentina	1,098	2	24.3	6	14	-57.1
Ecuador	510	3	28.9	5	14	-64.3
Guatemala	383	0	21.4	0	12	-100
Bolivia (Plurinational State of)	264	0	22.6	0	0	-
Puerto Rico	210	0	73.4	0	0	-
Costa Rica	188	0	36.9	38	0	-
Panama	139	0	32.2	10	11	-9.1
Paraguay	104	0	14.6	6	10	-40
El Salvador	96	0	14.8	0	0	-
Dominican Republic	52	0	4.8	0	0	-
Uruguay	19	0	5.5	0	0	-
Honduras	18	0	1.8	1	3	-66.7
Jamaica	18	0	6.1	0	0	-
Venezuela (Bolivarian Republic of)	12	0	0.4	0	0	-
Cuba	8	1	0.7	0	0	-
Martinique	7	0	18.7	0	0	-
Aruba	3	0	28.1	0	0	-
Curaçao	3	0	18.3	0	0	-
Bahamas	2	0	5.1	0	0	-
Guyana	2	0	2.5	0	0	-
Bermuda	1	0	16.1	0	0	-
Barbados	1	0	3.5	0	0	-
Guadeloupe	1	0	2.5	0	0	-
Saint Martin	1	0	25.9	0	0	-

Data is preliminary and subject to change.

Source: Information received from the International Health Regulations (IHR) National Focal Points (NFPs) or published on the websites of the Ministries of Health, Health Agencies or similar at national or subnational levels. The country/territory data published in this table is collected either automatically using web-scraping processes or manually when the extraction is not possible; therefore, it is subject to human error, as well as further change due to retrospective adjustment

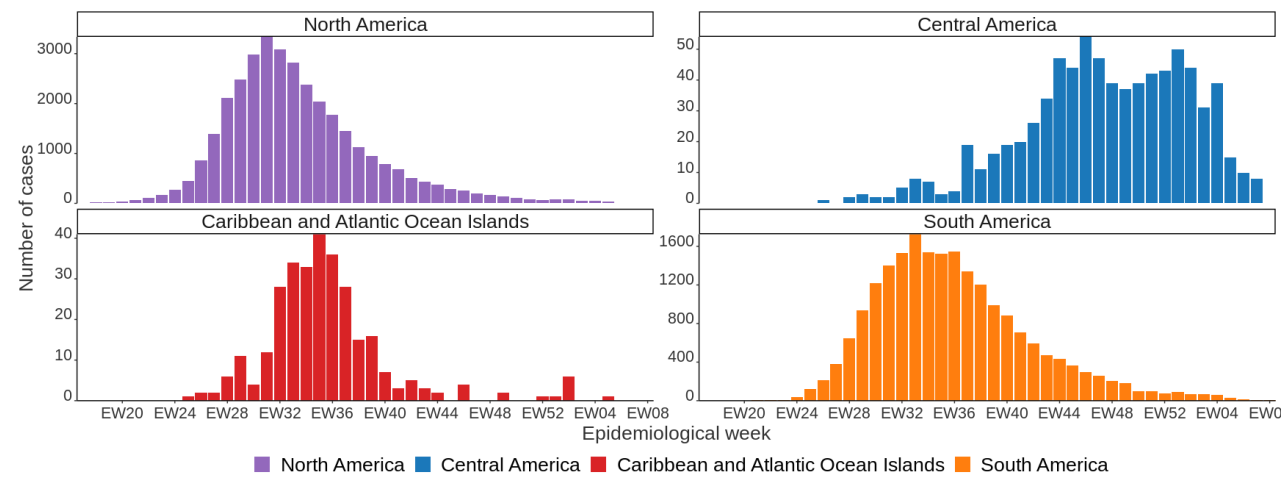
Table 2. Clinical-epidemiological characteristics of confirmed cases of mpox in the Region of the Americas. As of 24 February 2023 (16:00 EST)*.

Indicator	Region of the Americas	
	n	%
Hospitalization		
Available information	34,548	60.2%
No hospitalized	31,384	90.8%
Hospitalized	3,164	9.2%
Clinical need	935	29.6%
Isolated	303	9.6%
Unknown cause	1,926	60.9%
ICU	37	1.2%
Other characteristics		
Male	48,651	95.8%
MSM	14,628	71.5%
HIV+	13,272	52.4%

*Data is preliminary and is subject to change.

Source: Information received from the International Health Regulations (IHR) National Focal Points (NFPs) or published on the websites of the Ministries of Health, Health Agencies or similar at national or subnational levels.

Figure 2. Confirmed mpox cases by cases by subregion and epidemiological week (EW) of symptom onset or rash/diagnosis/report in the Region of the Americas. As of 24 February 2023 (16:00 EST)*.

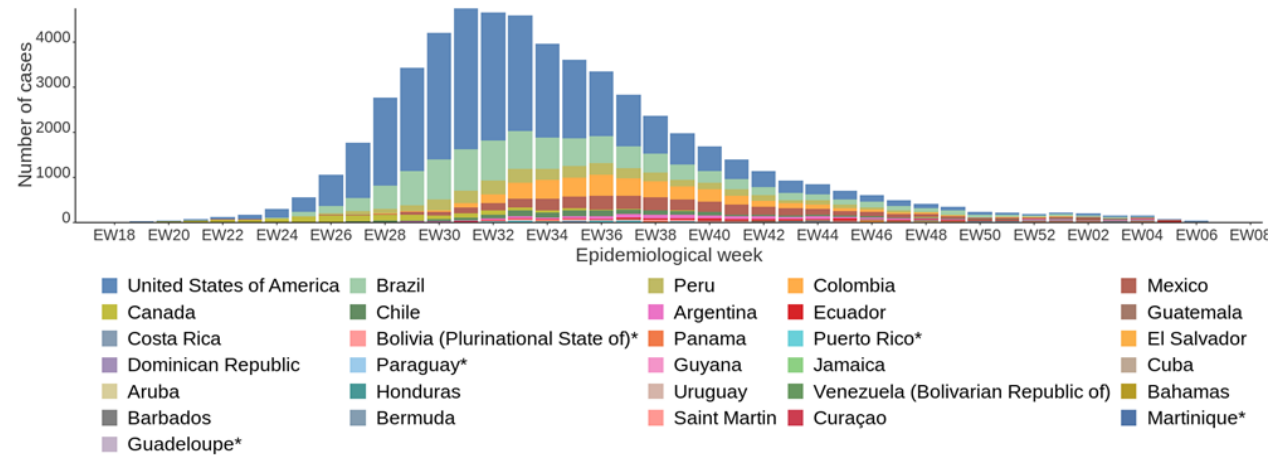


Figures are subject to change based on the latest data reported by countries/territories

*Data is preliminary and is subject to change.

Source: Information received from the International Health Regulations (IHR) National Focal Points (NFPs) or published on the websites of the Ministries of Health, Health Agencies or similar at national or subnational levels.

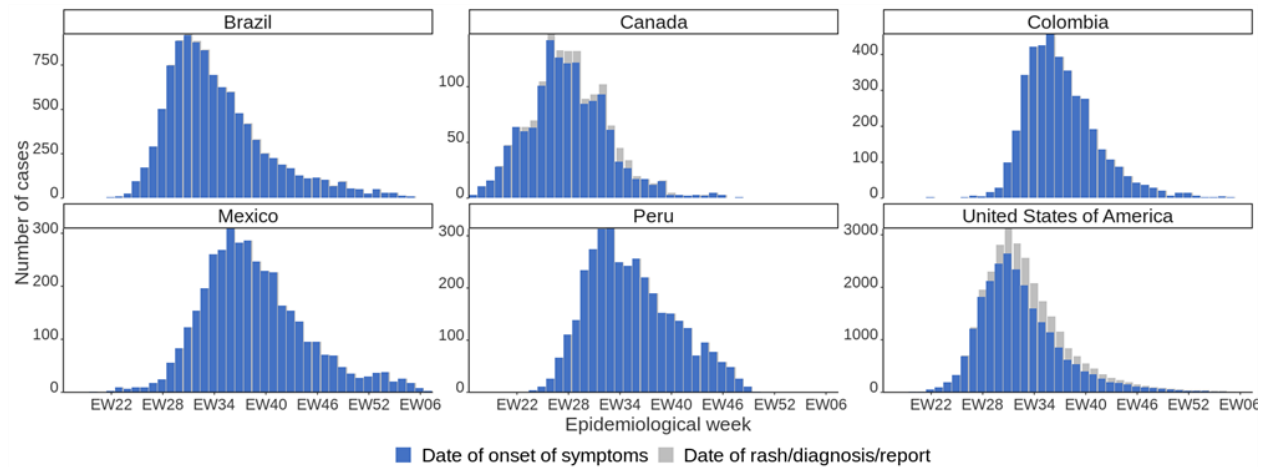
Figure 3. Confirmed monkeypox cases by country/territory and epidemiological week (EW) of symptom onset for cases with available information in the Region of the Americas. As of 24 February 2023 (16:00 EST)*



Figures are subject to change based on the latest data reported by countries/territories
*For these countries/territories only date of report is available

Source: Information received from the International Health Regulations (IHR) National Focal Points (NFPs) or published on the websites of the Ministries of Health, Health Agencies or similar at national or subnational levels.

Figure 4. Confirmed monkeypox cases by select countries and epidemiological week (EW) of symptom onset or rash/diagnosis/report in the Region of the Americas. As of 24 February 2023 (16:00 EST)*.



Figures are subject to change based on the latest data reported by countries/territories

Source: Information received from the International Health Regulations (IHR) National Focal Points (NFPs) or published on the websites of the Ministries of Health, Health Agencies or similar at national or subnational levels.

FUTURE OUTLOOK

The Region of the Americas continues to account for the highest cumulative proportion of monkeypox cases globally and the highest proportion of new weekly cases. Six countries in the Region (United States, Brazil, Peru, Colombia, Mexico, and Canada) are among the top 10 countries with the highest number of confirmed cases globally and account for 95% of cases in the Region, of which 2 have been recently added: Mexico and Colombia, indicating increased transmission in more countries in the Region. Additionally, there is a likelihood of increased transmission in other population groups. The most at-risk populations have predominantly remained the same; however, cases among women, including pregnant women, as well as in children cannot be overlooked. Cases among indigenous and incarcerated persons are of concern. The response should continue to have a key focus on communication with and engagement of at-risk communities, leveraging mass gatherings for communication and preventive measures, the timely detection and treatment of patients, and protection of health workers. Transmission chains should also be contained in close cooperation with affected communities. PAHO provides detailed recommendations on response actions through regular [Epidemiological Updates](#).

Response Strategy and Donor Alert

PAHO and its strategic partners throughout the Americas, using a whole-of-society approach have launched a Response Strategy and Donor Alert to continue supporting Latin American and Caribbean countries.

An estimated US\$1,284,000 is needed for the response plan to stem further transmission of monkeypox and mitigate the impact of the outbreak.

Donations will enable PAHO to:

- Ensure evidence-based information is communicated appropriately and that communities are engaged to prevent infection and combat misinformation.
- Ensure that the Member States have installed capacities to timely detect and contain the spread of monkeypox.
- Treat and protect health workers, ensuring that Member States receive evidence-based guidance and appropriate tools to manage cases of monkeypox adequately.
- Provide leadership, coordination, and logistical support for the emergency response phase of monkeypox epidemics in the Region.

Donate now: [read the donor alert](#)

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