



May 18, 2023

Dear Colleagues,

It has been a year since the global outbreak of mpox began, driving an unprecedented surge of cases through person-to-person spread in the United States. I want to extend my heartfelt appreciation for your unwavering dedication, as we have seen a significant decrease in cases. At the peak of the outbreak last summer, we were faced with hundreds of cases daily, but today, we only see a handful each week. This achievement is a testament to the collective efforts of communities, healthcare providers, and public health officials.

Although mpox cases have been low, the Centers for Disease Control and Prevention (CDC) continues to receive reports that show ongoing community spread in the United States and internationally. The warmer months are full of events that celebrate the LGBTQ+ community. These events provide opportunities to share important messages that address testing, prevention, and treatment of health conditions that data show disproportionately impact LGBTQ+ people. Without renewed vaccination and prevention efforts, spring and summer events could lead to [a resurgence of cases](#)<sup>1</sup> as people gather in crowds. This is a particular concern for gatherings with high potential for skin-to-skin contact or that are associated with increased sexual activity. The population most affected by this outbreak continues to be gay, bisexual, and other men who have sex with men as well as transgender and nonbinary people, with a disproportionate number of cases among Black and Hispanic or Latino men.<sup>2,3</sup> It is vital that we continue to work together to protect those most impacted by this outbreak.

To address the potential increase in mpox cases during summer events, we must continue to ensure equitable access to reliable information and the safe and effective mpox vaccine. Although more than 1.2 million doses of the JYNNEOS vaccine have been administered nationwide, [CDC research](#)<sup>4</sup> shows that less than 1 in 4 of those at high risk of mpox infection—including gay, bisexual, and other men reporting sex with men, as well as transgender and nonbinary people—are vaccinated. Please consider reviewing your patient or client lists to see if there are unvaccinated or under-vaccinated eligible people that can be encouraged to return to the clinic or be referred for the [vaccine](#).<sup>5</sup> As noted in a recent [CDC Health Alert Network message](#),<sup>6</sup> [infections after vaccination](#)<sup>7</sup> are possible, but they may be milder and less likely to result in hospitalization.

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<sup>1</sup> <https://www.cdc.gov/poxvirus/mpox/response/2022/risk-assessment-of-resurgence.html>

<sup>2</sup> <https://www.cdc.gov/mmwr/volumes/71/wr/mm7132e3.htm>

<sup>3</sup> <https://www.cdc.gov/poxvirus/mpox/response/2022/demographics.html>

<sup>4</sup> [https://www.cdc.gov/mmwr/volumes/72/wr/mm7213a4.htm?s\\_cid=mm7213a4\\_w](https://www.cdc.gov/mmwr/volumes/72/wr/mm7213a4.htm?s_cid=mm7213a4_w)

<sup>5</sup> <https://www.cdc.gov/poxvirus/mpox/vaccines/index.html>

<sup>6</sup> <https://emergency.cdc.gov/han/2023/han00490.asp>

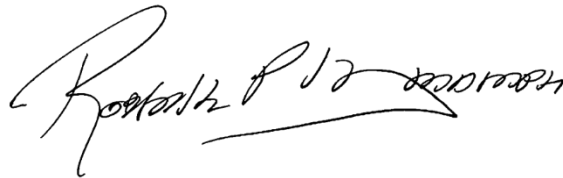
<sup>7</sup> <https://www.cdc.gov/poxvirus/mpox/your-health/vaccines/infections.html>

We are actively updating our messages and collaborating closely with partners. CDC has provided necessary funding to 53 state and local jurisdictions through the Public Health Crisis Response Cooperative Agreement. We continue to work with jurisdictions to enhance mpox vaccine accessibility, conduct case investigations, surveillance, testing, communication, education, and outreach.

I also want to remind you that tecovirimat is an investigational drug in clinical trials to determine its efficacy for those with mpox. The trial includes a placebo-controlled, randomized arm, and an open-label option for individuals with severe disease or those who decline randomization. Tecovirimat is available through enrollment in the [AIDS Clinical Trials Group \(ACTG\) Study of Tecovirimat for Human Monkeypox Virus \(STOMP\)](#).<sup>8</sup> Notably, a person does not need to have severe disease or high risk for progression to enroll in STOMP, and remote enrollment is available. For patients not eligible for the STOMP trial or who decline to participate, stockpiled oral tecovirimat is available upon request for mpox patients who meet treatment eligibility (e.g., have severe disease or are at increased risk for severe disease) under CDC's Expanded Access Investigational New Drug protocol.

Finally, to ensure widespread awareness, we are engaging with news outlets, including mainstream and LGBTQ+ media, particularly in major markets, and areas hosting upcoming summer events. Additionally, we provide valuable resources such as the vaccine finder, clinician guidance, educational materials, and toolkits on vaccine equity through [our website](#).<sup>9</sup> Preventing a new outbreak of mpox requires collaboration among healthcare providers, people affected by mpox, and public health officials to ensure people who need care can readily access it. I am immensely grateful for your exceptional contributions and unwavering commitment to preventing mpox and safeguarding public health.

Sincerely,

A handwritten signature in black ink, appearing to read "Rochelle P. Walensky", with a horizontal line underneath.

Rochelle P. Walensky, MD, MPH (she/her)  
Director, CDC, and  
Administrator, Agency for Toxic Substances and  
Disease Registry

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<sup>8</sup> <https://www.stomptpox.org/main>

<sup>9</sup> <https://www.cdc.gov/poxvirus/mpox/>