



**Public Health Advisory Update
11/20/2024**

First Case of Mpox Clade Ib Diagnosed in the United States

SITUATIONAL AWARENESS SUMMARY

Situation: On November 18, 2024, CDC reported the [first case of clade I mpox](#) diagnosed in California. The individual had recently traveled to an area currently reporting an outbreak of clade Ib mpox.

- Outbreaks of clade Ib have been reported in Central and East African countries including the Democratic Republic of Congo (DRC), Central African Republic, Burundi, Kenya, Rwanda, and Uganda.
- In 2024, travel-associated clade Ib mpox cases have also been reported in Germany (1), India (1), Kenya (17), Sweden (1), Thailand (1), the United Kingdom (UK) (4), Zambia (1), and Zimbabwe (2) with no onward local transmission except in close household contacts in Kenya and UK.
- In 2022, the U.S. mpox outbreak was associated with clade II mpox. It remains present with about 250 cases a month since October 2023.
- As of November 18, 2024, there have been a total of 320 cases of mpox reported in Clark County since the first reported local case in June 2022 associated with the mpox clade II outbreak.
- Clade I mpox has historically caused more severe infections compared with clade II although clade Ib currently has a lower case fatality rate than clade Ia globally and presents as less severe infections outside of Africa.
- Risk to the public in the U.S. remains low.

Recommendations for Providers:

✓ **Consider Mpox in Differential Diagnosis:**

- **Travel History:** Travel to Central or Eastern Africa in the previous 21 days
- **Transmission:** Sexual and intimate contact with symptomatic persons is the leading transmission route for mpox clade I and II.
- **Animal Exposure Risks in Endemic Areas:** Contact with infected wild animals during activities such as hunting, trapping, processing animals, or getting bitten or scratched.
- **Rash:** Persons may or may not report a prodrome of fever, malaise, headache, sore throat or cough, and swollen lymph nodes before rash onset. The rash evolves from an enanthem to a macule, papule, vesicle, pustule to scabs from 7 to 14 days and are contagious until the scabs have fallen off and a fresh layer of intact skin has formed underneath.

✓ **Test All Suspected Cases:**

- **Collect specimens:**
 - i. Collect 2 swabs per 2-3 lesions (contact SNHD at 702-759-1300 for guidance).
 - ii. Wear recommended personal protective equipment.
 - iii. Use only sterile, synthetic swabs (including but not limited to polyester, nylon, or Dacron. Do not use cotton swabs).
 - iv. Swab lesions vigorously to ensure adequate viral DNA is collected (unroofing or aspiration using sharp instruments is not necessary).

✓ **Educate Patients:**

- Isolate until mpox has been ruled out through laboratory testing or if diagnosed, isolation until fresh skin has formed.
- Offer vaccination with Jynneos to persons reporting future travel to endemic areas or reporting risks for mpox clade II acquisition.

✓ **Report:** Mpox is a [reportable condition in Nevada](#). Promptly report suspected or confirmed cases to SNHD's Disease Surveillance and Control team via fax at 702-759-1414 or by phone at (702) 759-1300.

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Health Alert: conveys the highest level of importance; warrants immediate action or attention

Health Advisory: provides important information for a specific incident or situation; may not require immediate action

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action

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