

Exploring the resurgence of a neglected disease:

Lessons from the 2023-2024 mpox outbreak in Brazil

Mayara Secco Torres da Silva, MD, PhD
Instituto Nacional de Infectologia Evandro Chagas, INI-Fiocruz

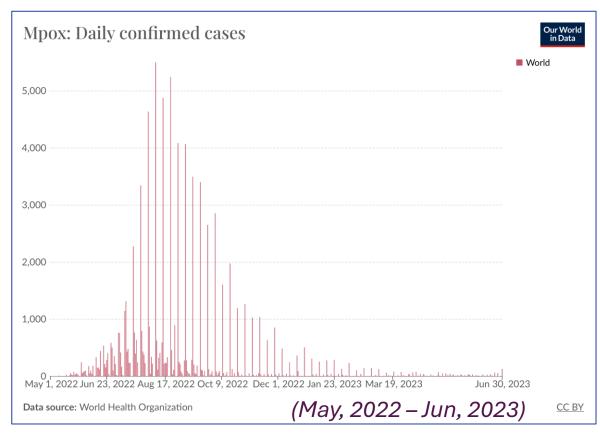
Background

Cumulative mpox diagnoses



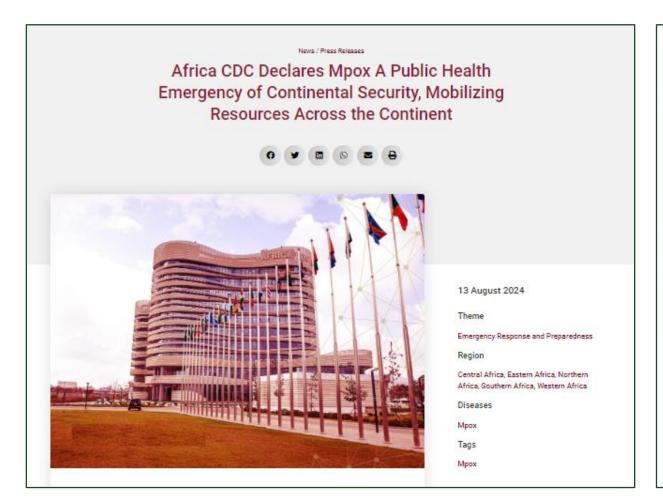
(PAHO, 2024)

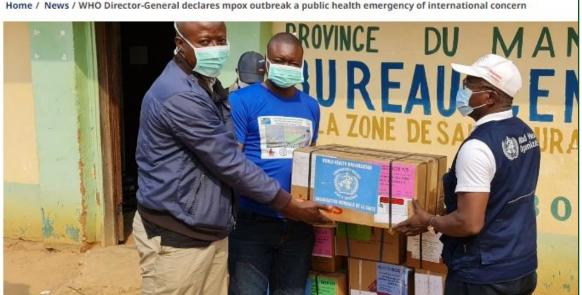
Mpox: daily global diagnoses



(Our World in Data, 2024)

Mpox in 2024





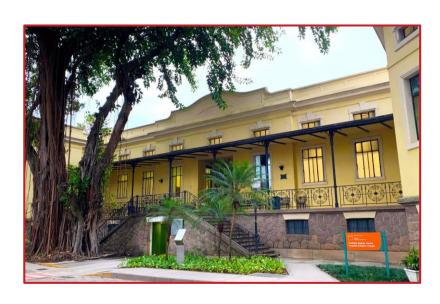
WHO Director-General declares mpox outbreak a public health emergency of international concern

INI-Fiocruz Mpox Cohort





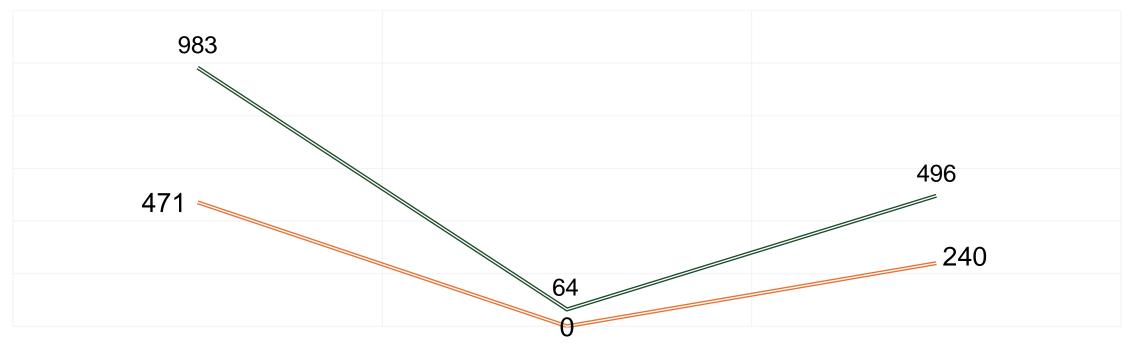
- Prospective cohort of persons with suspected Mpox since June, 2022.
- Current analysis aims to present initial evidence on the emerging Mpox second outbreak in Rio de Janeiro, Brazil.
- All persons with confirmed mpox were included.
- Comparison between:
 - 1st outbreak: 12th Jun 2022 31st May 2023;
 - 2nd outbreak: 26th Sept 2023 20st Sep 2024.



Number of persons with suspected and confirmed mpox according to time of diagnosis



▲ Persons with confirmed mpox



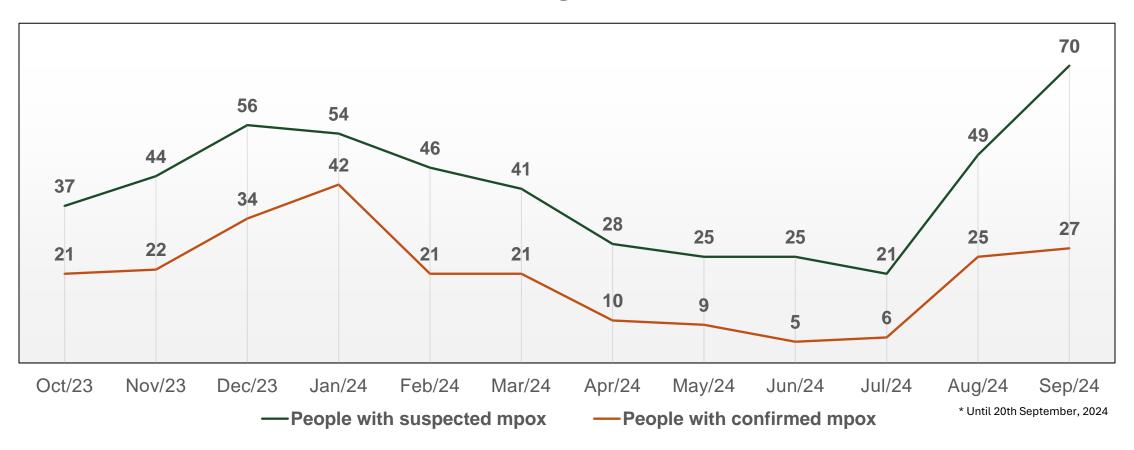
1st outbreak

Jun/22 - May/23

2nd outbreak

Sep/23 - Sep/24*

People with suspected and confirmed mpox assessed at INI-Fiocruz during the last 12 months



		1 st Outbreak (N=471)	2 nd Outbreak (N=240)	p-value
Age (years)	<18	3 (0.6%)	1 (0.4%)	
	18-24	53 (11.3%)	33 (14%)	0.83
	25-29	96 (20.4%)	50 (21%)	
	30-39	195 (41.4%)	100 (42%)	
	≥ 40	124 (26.3%)	56 (23%)	
Gender identity	Cismen	421 (90%)	225 (94.1%)	
	Ciswomen	35 (7.1%)	10 (4.2%)	
	Non-binary	0	1 (0.4%)	0.05
	Transwomen	15 (2.9%)	3 (1.3%)	
	Transmen	0	0	

		1 st Outbreak (N=471)	2 nd Outbreak (N=240)	p-value	
	White	152 (39.1%)	86 (36.6%)		
Race	Indigenous	3 (0.8%)	1 (0.4%)	0.79	
	Black/Pardo	234 (60.1%)	148 (63%)		
Educational	Primary	34 (8.5%)	12 (5.1%)		
Educational level	Secondary	134 (33.4%)	78 (33.2%)	0.27	
IEVEI	Post-Secondary	233 (58.1%)	145 (61.7%)		
Men who have sex with men		363/400 (90.8%)	216/224 (96.4%)	0.04	
More than 1 sex partner ¹		171 (53%)	147 (68%)	<0.01	
Reported anal sex ¹		195 (68.4%)	201 (87%)	<0.01	
Current PrEP use		74 (32.3%)	57 (50.9%)	0.01	
PLHIV		237 (52%)	124 (52%)	0.91	
¹ In the last 30 days prior to symptoms onset					

		1 st Outbreak (N=471)	2 nd Outbreak (N=240)	p-value
	Syphilis	93 (21.6%)	46 (19%)	0.50
Postorial STI	Gonorrheae	32 (8.3%)	24 (11%)	0.26
Bacterial STI	Chlamydia	34 (8.8%)	19 (8.8%)	>0.99
	Any	146 (38%)	72 (33%)	0.20
Current/past HCV infection		26 (6%)	18 (7.6%)	0.44
Any systemic signs or symptoms		380 (85.4%)	185 (80%)	0.09
Pharyngitis and/or odynophagia		121 (26.7%)	49 (21%)	0.10
Proctitis		105 (22.6%)	63 (27%)	0.19
Time from symptoms onset to enrollment (days) (Median, IQR)		6 (4,10)	7 (5,11)	0.02
Hospitalization during follow-up		49 (10%)	22 (9.2%)	0.60

Among PLHIV...

	1 st Outbreak (N=237)	2 nd Outbreak (N=124)	p-value
HIV-RNA viral load > 200 copies/mL	36 (15.4%)	16 (13.5%)	0.50
Lymphocyte T CD4+ ≤ 350 cells/mm3	28 (13%)	19 (12%)	0.43
Concominant opportunistic infections	4 (1.7%)	6 (8.3%)	0.01
Suspected mpox-associated immune reconstitution inflammatory syndrome	3 (1.3%)	3 (2.\$%)	0.15

Conclusions

- A new and ongoing mpox outbreak emerged in Rio de Janeiro, Brazil, following a period with no signs of sustained transmission.
- Crucial need to enhance sustained surveillance strategies to detect emergent
 STIs within the context of HIV care and prevention services.
- Insights in mpox surveillance and prevention in the context of the 2024 mpox public health emergency of international concern: beyond the Global North.
- Implementation of routine mpox vaccination in LMICs targetting the most affected populations is critical.

Gratidão!



mayara.secco@fiocruz.br