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Monkeypox, pregnancy, and evidence of vertical transmission: reply

TO THE EDITORS: We appreciate the correspondence by Schwartz et al on our publication on monkeypox and pregnancy.¹ The report on Congo's pregnancy outcomes is mentioned.² Mbala et al² conclusively showed that monkeypox infections in pregnant women can have catastrophic repercussions, including fetal death. In the study by Mbala et al,² a pan-orthopoxvirus minor groove binder–hemagglutinin reverse transcriptase–polymerase chain reaction (PCR) assay was used, and it is not the gold standard for the diagnosis of monkeypox. In addition, the PCR test was conducted according to Kulesh's protocol, which is for rodent orthopox virus diagnosis.³ Mbala and et al² also mentioned that they observed a vertical transmission situation. The fetal death following a monkeypox infection reported by Mbala et al² is not a unique incident according to Kisalu and Mokili's comments on this case.⁴ Orthopoxvirus, according to Kisalu and Mokili,⁴ causes more complications, including higher rates of preterm birth, stillbirth, and spontaneous abortion in pregnant women than in nonpregnant ones. This is because it increases the risk for morbidity and mortality in pregnant patients when compared with nonpregnant ones.⁴ The indexed case reported by Mbala et al² also had a concurrent malaria infection.⁴ ■

Rujittika Mungmunpantipantip, PhD
Private Academic Consultant
Bangkok, Thailand
rujittika@gmail.com

Viroj Wiwanitkit, MD
Department of Community Medicine, DY Patil Vidyapeeth
Pune, India

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