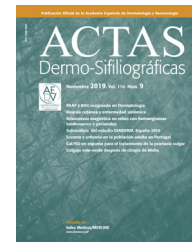
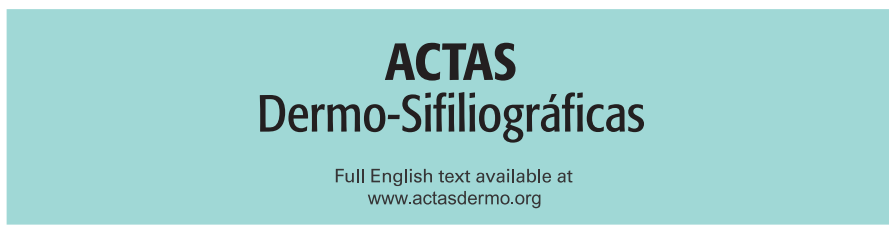




Elsevier has created a [Monkeypox Information Center](#) in response to the declared public health emergency of international concern, with free information in English on the monkeypox virus. The Monkeypox Information Center is hosted on Elsevier Connect, the company's public news and information website.

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LETTER TO THE EDITOR

Treatments for Monkeypox

Tratamientos para la viruela del mono

Dear Editor,

We would like to share ideas on the publication "Potential Treatments for Monkeypox."¹ According to Rodríguez-Cuadrado et al., tecovirimat, an antiviral that blocks the VP37 protein found on the surface of orthopoxviruses, is the only medication currently licensed for the treatment of MPX (EMA). Its effectiveness and good safety profile, with the most common side effects being headache and nausea, led Cuadrado et al. to approve it "under extraordinary conditions".¹ In addition to the well-known pox infections, new zoonotic pox diseases have emerged as a severe concern in infectious medicine.² Europe is now experiencing a significant public health hazard due to the spread of monkey pox.³ Due to zoonosis, the unusual pox infection known as monkey pox has returned.² Many parts of the world are now experiencing a significant public health threat from monkey pox.²

The best way to cure monkeypox is yet unknown. Rodríguez-Cuadrado et al. brought out tecovirimat's potential benefit. This medication is rarely used in Africa, where it is endemic, and the patient's recovery could take place naturally. In addition to tecovirimat, the immune globulin intravenous may be another possibility that has to be thoroughly researched.⁴ There are few details available about tecovirimat's safety. In a prior UK study, tecovirimat had no adverse effects while brincidofovir did, but the sample size was too small to draw any firm conclusions.⁵ A report from the USA on the safe use of tecovirimat to a patient is also available.⁶ The moment has come for more data collection due to the limited reports. Because of the scarcity of reports, it is now necessary to collect more data and conduct post-approval monitoring of the efficacy and safety of tecovirimat for the treatment of monkeypox.

Conflict of Interest

None declared.

Funding

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References

1. Rodríguez-Cuadrado FJ, Pinto-Pulido EL, Fernández-Parrado M. Potential treatments for monkeypox. *Actas Dermosifiliogr.* 2022, <http://dx.doi.org/10.1016/j.ad.2022.06.013> [S0001-7310(22)00601-9; online ahead of print].
2. Wiwanitkit S, Wiwanitkit V. Atypical zoonotic pox: acute merging illness that can be easily forgotten. *J Acute Dis.* 2018;7:88–9.
3. Mungmunpuntipantip V, Wiwanitkit V. Re-emerging monkeypox: an old disease to be monitored. *BMJ Rapid Response.* 2022. <https://www.bmj.com/content/377/bmj.o1239/rr-1> [accessed 21.05.22].
4. Rizk JG, Lippi G, Henry BM, Forthal DN, Rizk Y. Prevention and treatment of monkeypox. *Drugs.* 2022;1–7, <http://dx.doi.org/10.1007/s40265-022-01742-y> [online ahead of print].
5. Adler H, Gould S, Hine P, Snell LB, Wong W, Houlihan CF, et al. Clinical features and management of human monkeypox: a retrospective observational study in the UK. *Lancet Infect Dis.* 2022. S1473-3099(22)00228-6.
6. Rao AK, Schulte J, Chen TH, Hughes CM, Davidson W, Neff JM, et al. Monkeypox in a traveler returning from Nigeria – Dallas, Texas, July 2021. *MMWR Morb Mortal Wkly Rep.* 2022;71:509–16.

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