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Comment on “Current outbreak of monkeypox: Essentials for the dermatologist”

To the Editor: The article by Khanna et al¹ on the current outbreak of monkeypox was read with great interest from the dermatology perspective, in which various differential diagnoses mimicking monkeypox was discussed. This article is of great assistance in the present scenario where monkeypox outbreaks are being reported from different parts of the world. Most of the differential diagnoses have been discussed by the authors; however, COVID-19 was not included in the table. This is especially important during the ongoing COVID-19 pandemic.

There have been reports of a vesicular rash in patients with COVID-19 over the past 2 years. The prevalence of papulovesicular rash in COVID-19 ranges from 3.7% to 15%.² In COVID-19, localized and generalized vesicular exanthem have been reported. The generalized exanthem is more common and includes polymorphic lesions such as small papules, vesicles, and pustules. The vesicular exanthem in COVID-19 appears 3 days after the onset of systemic symptoms and disappears within 8 days, which suggests an earlier resolution than the monkeypox exanthem, where rash resolution occurs in 2 to 4 weeks.³ COVID-19 papulovesicular exanthem can be differentiated clinically from monkeypox exanthem as having nontender, small-sized lesions with truncal predominant and mild or absent pruritus, whereas monkeypox exanthem have tender, monomorphic large-sized lesions frequently involving the face, extremities, genitals, palms, and soles. Current outbreaks of monkeypox have also been reported in men who have sex with men; however, transmission in semen or vaginal fluid has not been confirmed, whereas transmission of SARS CoV-2 has been confirmed through semen.⁴

At the outset, COVID-19 is much more infectious than monkeypox. There have been more than 15,000 cases of monkeypox worldwide amid the COVID-19 pandemic. The spread of monkeypox to nonendemic countries needs epidemiologic studies in the future. It is also important to recognize early signs

and symptoms of monkeypox, which may mimic COVID-19, especially during the present pandemic and in resource-poor countries where virus-specific polymerase chain reaction testing is not readily available.

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Conflicts of interest

None disclosed.

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