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## Letter to the Editor

## Monkeypox infections in vulnerable groups

### Dear editor,

Patauner and colleagues provided an excellent update on the current global outbreak of monkeypox infections [1]. They have also cited the recent reports in non-endemic countries involving sexually active men and men who have sex with men, with several asymptomatic cases identified in sexually transmitted infection clinics [1,2].

We would like to highlight that these recent reports in high-risk men with and without symptoms pose a potentially great challenge for vulnerable subjects such as young children and pregnant women, especially from poor socio-economic background. The likelihood of human-to-human spread among household contacts will present an unprecedented risk to children and sexually active pregnant women. The risk can be further increased in overcrowded households and situations of unprotected sex, problems that are associated with lower income groups. Since monkeypox symptoms are often nonspecific (fever, muscle aches etc.), and skin rashes in palms and soles may resemble common viral exanthem seen in young children, early diagnosis may be delayed and containment of spread within households difficult to achieve. Furthermore, skin lesions in hidden anogenital regions in these high-risk men [4] may be missed or ignored, increasing the transmission risk to family members.

It is also important to highlight that almost all the reported monkeypox associated severe complications such as encephalitis were reported in patients less than 18 years of age [3]. Interestingly, the median age at presentation of monkeypox among the young appeared to have increased significantly in the last few decades, suggesting infection among adolescents and young adults is also a concern [4].

We will need more epidemiologic data to better understand the role of viral load and vaccination, and to decipher the mode of transmission in order to provide optimal guidance on how to minimize spread of infections to children and pregnant women within households. A quick and easily available diagnostic test is urgently needed.

#### CRediT authorship contribution statement

**Brendan Bryan Jen-Wei Tan:** Conceptualization, Writing – original draft. **Ling-Ling Chan:** Conceptualization, Writing – original draft. **Eng-King Tan:** Conceptualization, Writing – original draft.

#### **Declaration of Competing Interest**

The authors declare they have no conflict of interest.

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