Minister Phaahla calls for vigilance against Monkey Pox disease

Pretoria: Minister of Health, Dr Joe Phaahla calls for public vigilance as the country records the laboratory-confirmed case of Monkey Pox disease, otherwise known as Mpox. The case is 35-year-old male residing in the Gauteng province who tested positive after on 9 May 2024.

The case was first tested by Lancet Laboratory which was later confirmed by the National Institute for Communicable Diseases (NICD) which immediately notified the department.

Mpox is a rare viral infectious disease in humans caused by the monkeypox virus (MPXV). Although, the virus is not highly transmissible from person-to-person, but it has increased in global public health significance and can cause a painful rash, enlarged lymph nodes and fever. Most people fully recover, but some get very sick.

According to the preliminary investigation and case findings reports, the patient has no recent travel history to countries experiencing an outbreak of the disease. Both the national and Gauteng Departments of Health have been actively involved and are managing the situation as per protocol and national guidelines. Contact tracing has in continuing, identifying any additional linked cases of mpox in South Africa.

From 2023, there is an ongoing mpox outbreak in the Democratic Republic of Congo (DRC) primarily due to a distinct MPXV clade I. The clade I is characterised by its high virulence and has a higher fatality rate than the global outbreak-associated clade II. Additionally, transmission of MPXV clade I is mostly observed among heterosexual individuals through sexual transmission, particularly among female sex workers.

A new variant of the MPXV, named "clade 1b," emerged during epidemiological week 16 of 2024 (14 – 20 April 2024) in Kamituga, a mining enclave within the DRC. This variant exhibit heightened transmissibility, mainly through sexual contact, raising concerns about its potential to cause a pandemic.

Mpox presents with an acute illness characterised by fever and general flu-like symptoms, followed by the eruption of a blister-like rash on the skin. The disease is rarely fatal and cases typically resolve within two to four weeks. Most cases do not require hospital treatment. Prevention of infection hinges on the isolation of cases until fully recovered. The risk to the general population is considered low, given the low
transmissibility of the virus. The last reported cases of mpox in South Africa were in August 2022.

The World Health Organization recommends increasing vigilance for cases with contact tracing and monitoring of laboratory-confirmed cases. Isolation of confirmed cases allows for the prevention of transmission and interruption of the cycle of transmission. Circulation of the MPXV in humans may be eliminated through this classic containment approach. Mass vaccination against the MPXV is not currently recommended.

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