

Mpox Surveillance Report

British Columbia | As of September 10, 2024

Introduction

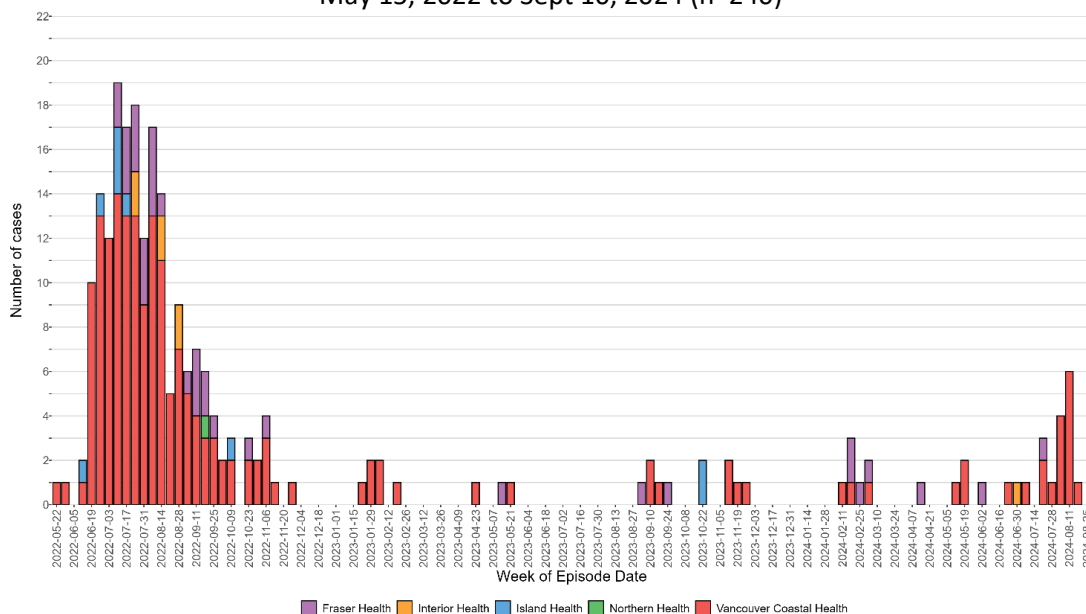
This summary is prepared at the BCCDC in collaboration with regional health authorities in BC. Epidemiological data are summarized to provide an understanding of the public health risk of Mpox. Data in this summary are based on confirmed cases reported to BCCDC by Health Authorities as of the date indicated above. The information in this report may be incomplete for the more recent cases. The current case definitions are available on the [BCCDC website](https://www.bccdc.ca).

Overview

- Since May 2022 there have been 240 confirmed Mpox cases in BC: 190 cases in 2022, 20 in 2023, and 30 in 2024. Cases have mainly been sporadic since the initial outbreak and there has been a slight increase in 2024, mirroring trends observed in other jurisdictions.
- In 2024, all reported cases were over 18 years old and male.
- For the majority of cases, the most likely mode of transmission was person-to-person transmission through close, intimate contact during sexual activity.
- In 2023 and 2024, more than 50% of cases with vaccine information (n = 26/49) were either unvaccinated or under-vaccinated at the time of infection.
- Almost 95% of cases had information on recent travel in the 21 days prior to illness onset and 30% of cases reported recent travel outside of BC.
- As of September 10, 2024, over 31,000 doses of Imvamune® vaccine have been administered in BC and 40% of first dose recipients had received a second dose to complete the series.
- Samples from most cases have been sequenced and among those all have been confirmed as Clade IIb.
- In collaboration with the National Microbiology Laboratory, wastewater monitoring for mpox virus, including for Clade I, is undertaken with samples from treatment plants in the Lower Mainland.

Epidemiological Curve

Figure 1. Confirmed Mpox cases by week of episode date¹ and health authority, BC, May 15, 2022 to Sept 10, 2024 (n=240)



¹ Episode date is the date of the earliest symptom if known, else lab specimen collection date.

Exposure Information

During the public health investigation of Mpox cases, potential exposures are assessed to better understand sources of infection.

- The most likely mode of transmission for the vast majority of cases included person-to-person transmission through close, intimate contact during sex (208 of 240). Some cases reported person-to-person transmission, excluding mother-to-child, healthcare-associated, or sexual transmission (n = 4), or through contaminated materials (n = 2) and the exposure was not assessed or assessed as unknown for the remaining cases.
- A quarter of all cases had a known contact either with a Mpox case, a person with symptoms compatible with Mpox symptoms, or with materials contaminated with Mpox virus.
- Most cases did not travel out of BC during the 21 days preceding their illness onset, suggesting acquisition in BC. The percentage of potentially travel-acquired cases was 29% in 2022, 21% in 2023 and 33% in 2024.

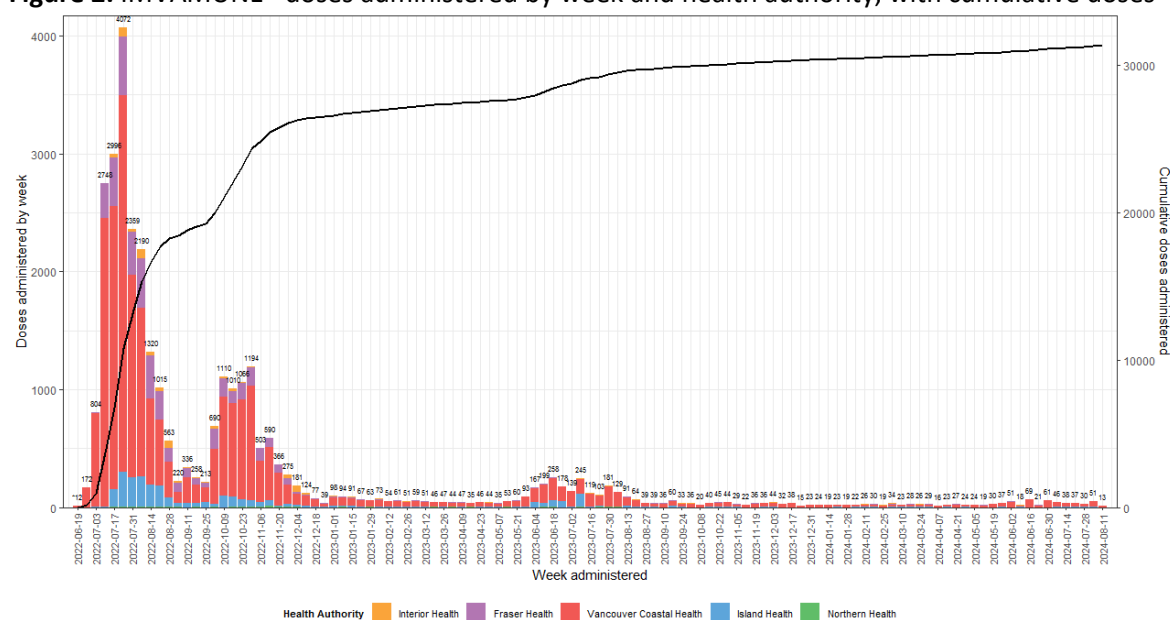
Vaccination Campaign

Table 1. Total IMVAMUNE® doses administered by dose number and health authority

Health Authority	Dose 1	Dose 2	Total Doses Administered
Interior Health	542	230	772
Fraser Health	3,303	978	4,282
Vancouver Coastal	16,879	7,080	23,959
Island Health	1,851	857	2,708
Northern Health	85	54	139
Total	22,660	9,199	31,859

Source: Provincial Immunization Registry (PIR), data extracted September 10, 2024.²

Figure 2. IMVAMUNE® doses administered by week and health authority, with cumulative doses



²Doses given prior to June 20, 2022 are attributed to June 19, 2022. Labels indicate provincial total weekly doses administered.

² Delays exist between vaccine administration and documentation into the PIR, therefore these data likely underrepresent total doses provided.