

Cabinet drive to make streets safer: 17 May 2022

The Prime Minister and his Cabinet will meet today to drive forward their mission to cut crime and make our streets safer.

In a meeting of Cabinet today, the Prime Minister will reinforce that the critical role of any government is to protect the public before Ministers update on the progress being made to tackle crime and restore confidence in our justice system.

Since the Prime Minister came into office, there are now over 13,500 more police officers across England and Wales. This growing police force has helped roll up over 1,500 county lines and through Project ADDER, disrupt over 700 organised crime groups.

Today's meeting comes as Ministers prepare to announce a package of additional measures to crack down on crime across the country this week, including empowering the police to take more knives our streets and stepping up action on drug use to tackle the crimes they fuel.

Speaking ahead of the Cabinet meeting, Prime Minister Boris Johnson said:

While neighbourhood crime and serious violence is falling, the sad reality is that too many people are still growing up in communities blighted by criminals. That is why this government is determined to crack down on violence and restore confidence in our justice system, in order to truly level up the country.

Through our Beating Crime Plan, we are putting thousands more police on our streets, getting tougher on violent criminals and cracking down on county lines drugs gangs – so that everyone can have the security and stability that comes from having safer streets.

Today's Cabinet meeting comes as the Government continues to back police with the tools and resources they need to protect the public and make our streets safe.

Yesterday, the Home Secretary lifted restrictions on the police using stop and search in areas where they expect serious violence to happen. These restrictions, which have been in place since 2014, have limited when officers could use the vital power and hindered their ability to rid the streets of dangerous weapons. By making it easier for the police to seize more weapons, the government is backing forces to drive down knife crime and save more lives.

Later today, in a speech to the Police Federation, the Home Secretary will

announce that Special Constables will be given powers to use Taser, if Chief Officers authorise it and they receive Taser training. This is the latest example of this Government ensuring they have the tools, power and resources they need to keep us safe and protect themselves.

These announcements coincide with this year's Operation Sceptre – a week of intensive action from every police force in England and Wales to combat knife crime up and down the country.

On Thursday, Policing Minister Kit Malthouse will host a National Drug Summit to tackle drug use and the crimes it fuels. On Friday, Deputy Prime Minister and Justice Secretary Dominic Raab will outline new investment to get young offenders back on track, and reduce reoffending.

During the meeting, the Cabinet will also get an update on the action that has already been taken to make our streets safer.

This includes recruiting over 13,500 police officers to date – putting us well on our way towards meeting the manifesto commitment of putting 20,000 officers on our streets by 2023 – and recruiting more rape specialists to the CPS with a 20% increase in CPS Rape and Serious Sexual Offences staff.

Cabinet will also discuss how the recently passed Police, Crime, Sentencing and Courts Act will give the police and courts the tools they need to keep people safe, overhaul the justice system to restore confidence and make sure punishments fit the severity of the crime.

Together, these initiatives are a crucial step but there is more to do, and Ministers will be urged to ensure all departments support this mission and do everything they can to cut crime and keep the public safe.

As well as cutting crime, this Government's priorities over the coming months are doing all we can to end Putin's onslaught in Ukraine, growing the economy to address the cost of living, funding the NHS to clear the covid backlogs and providing the leadership needed in challenging times.

'Wonder Weevil' released in fight against invasive floating pennywort

In a world-first, South American weevils have been released in England to fight against the invasive non-native species floating pennywort, as part of Invasive Species Week.

An ornamental pond plant originating from North America, floating pennywort has the ability to grow up to 20 centimetres each day, forming dense rafts over our rivers that harm native plant, fish and invertebrate species,

through competition and cutting oxygen levels in water. Floating pennywort impedes navigation routes, disrupts recreational activities like fishing and canoeing and exacerbates flood risk.

Since 2011, the Centre for Agriculture and Bioscience International (CABI), with Defra funding, has been investigating the potential use of a biocontrol agent for floating pennywort. Following a decade of safety and efficacy testing, South American weevils, *Listronotus elongatus*, have been released to manage the plant and minimise its impact on watercourses for those who use them and the wildlife that rely on them. Adult weevils feed on the leaves of floating pennywort and females lay eggs into their stalks. The larvae then eat into the stems of the plant, reducing its ability to grow and spread further.

This is the first use of a biocontrol for floating pennywort across the globe, and only the fourth agent ever released in the UK to tackle non-native plants. The releases were carried out over the winter, with more scheduled for this summer, working alongside the typical approach to managing the plant, which involves physically cutting and extracting it from our waterways.

Minister for Biosecurity Lord Benyon said:

It is important that we tackle invasive non-native species to protect our native plants and animals and safeguard our environment, economy and health.

We all have a role to play in stopping the destruction caused by floating pennywort – and the release of the South American weevil will boost our efforts to eradicate this pest from our waterways once and for all.

Trevor Renals, Senior Technical Advisor on Invasive Species at the Environment Agency, said:

Releasing South American weevils offer us a safe and self-sustaining management option for floating pennywort without the cost and damage associated with herbicide treatment and mechanical removal. It's a natural solution to a problem that we anticipate could get much worse as our winters get milder due to climate change. We need to act now.

Djami Djeddour, Senior Scientific Officer, CABI, said:

Following years of extensive research into the potential biocontrol of floating pennywort, we are pleased and excited to have released the weevil into the wild. Field studies by CABI scientists and collaborators in South America found this weevil to be the most

promising agent and after comprehensive screening in CABI's quarantine facility in the UK, it was confirmed to be highly specialised, only feeding and developing on this damaging weed.

Further releases will begin later this year, supported by a range of sponsors, and the weevil's impact, establishment and spread will be closely monitored.

Today's announcement comes as we mark Invasive Species Week 2022, which will culminate with a weekend of volunteer activity to tackle the spread of floating pennywort. This includes a large removal event on the River Wey – organised by British Canoeing and the Angling Trust – where volunteers will cut down and remove floating pennywort from the water. All waterway users are reminded to [Check, Clean, Dry](#) after leaving the water to help prevent the spread of invasive species.

[UK welcomes Sweden and Finland's NATO membership plans](#)

Press release

The UK has welcomed announcements by Sweden and Finland that they intend to apply for NATO membership.



Foreign Secretary Liz Truss said:

The UK strongly supports applications for NATO membership from Finland and Sweden. They should be integrated into the Alliance as soon as possible; their accession will strengthen the collective security of Europe.

We look forward to working with them as new NATO Allies and stand ready to offer them our every assistance during the accession process.

Our mutual security declarations signed with Sweden and Finland last week by the Prime Minister demonstrate our steadfast and unequivocal commitment to both countries during this process and beyond.

Published 16 May 2022

[Monkeypox cases confirmed in England – latest updates](#)

Latest

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

Previous

Thursday 1 September 2022

Monkeypox case linked with travel to West Africa identified

UKHSA has confirmed that an individual has been diagnosed with monkeypox linked to recent travel to West Africa.

Preliminary genomic sequencing conducted by UKHSA indicates that this case does not have the current outbreak strain circulating in the UK. The individual has been admitted to the High Consequence Infectious Disease (HCID) unit at the Royal Liverpool University Hospital in line with standing advice from the Advisory Committee on Dangerous Pathogens (ACDP).

Contact tracing of close contacts of the individual is underway. So far, no further linked cases have been identified.

Dr Sophia Maki, Incident Director, UKHSA, said:

We are working to contact the individuals who have had close contact with the case prior to confirmation of their infection, to assess them as necessary and provide advice.

UKHSA and the NHS have well established and robust infection control procedures for dealing with cases of imported infectious disease and these will be strictly followed and the risk to the general public is very low.

We remind everyone who is planning to travel to West and Central Africa to be alert for the symptoms of monkeypox and to call 111 if you have symptoms on your return.

The ACDP has previously advised that importations of monkeypox directly from West Africa as well as cases caused by Clade I of the virus should still be classified as HCIDs as we cannot predict their characteristics.

Tuesday 30 August 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

Tuesday 23 August 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

Tuesday 16 August 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

Tuesday 9 August 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 8 August 2022, there are 2,914 confirmed and 103 highly probable monkeypox cases in the UK: 3,017 in total. Of these, 2,883 are in England.

A breakdown of cases by upper tier local authority has also been published today.

Data will now be published once a week on Tuesdays.

Dr William Welfare, Incident Director at UKHSA, said:

While the most recent data suggests the growth of the outbreak has slowed, we continue to see new cases every day. While anyone can get monkeypox, the majority of monkeypox cases in the UK continue to be in gay, bisexual and other men who have sex with men, with the infection being passed on mainly through close contact in interconnected sexual networks.

Please continue to be aware of symptoms, including rashes and blisters, particularly if you have recently had a new sexual partner.

Friday 5 August 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 4 August 2022, there are 2,768 confirmed and 91 highly probable monkeypox cases in the UK: 2,859 in total. Of these, 2,730 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a high proportion of cases are in London.

Further epidemiological data and additional analysis can be found in UKHSA's regular monkeypox [technical briefings](#).

Tuesday 2 August 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 1 August 2022, there are 2,672 confirmed and 87 highly probable monkeypox cases in the UK: 2,759 in total. Of these, 2,638 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a high proportion of cases are in London.

Further epidemiological data and additional analysis can be found in UKHSA's regular monkeypox [technical briefings](#).

Friday 29 July 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 28 July 2022, there are 2,469 confirmed and 77 highly probable monkeypox cases in the UK: 2,546 in total. Of these, 2,436 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a significant majority of cases are in London.

Further epidemiological data and additional analysis can be found in UKHSA's regular monkeypox [technical briefings](#).

Tuesday 26 July 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing

monkeypox outbreak.

Up to 25 July 2022, there were 2,367 confirmed and 65 highly probable monkeypox cases in the UK: 2,432 in total.

To expand the UK's capability to detect monkeypox cases, some NHS laboratories are now testing suspected monkeypox samples with an orthopox polymerase chain reaction (PCR) test (orthopox is the group of viruses which monkeypox is part of). Since 25 July 2022, the monkeypox case definition recognises those who are orthopox-positive as highly probable cases, and those who test positive on a monkeypox PCR test as confirmed cases.

Dr Sophia Makki, National Incident Director at UKHSA, said:

Monkeypox cases continue to rise, with the virus being passed on predominantly in interconnected sexual networks. Before you have sex, go to a party or event, check yourself for monkeypox symptoms, including rashes and blisters. If you have monkeypox symptoms, take a break from attending events or sex until you've called 111 or a sexual health service and been assessed by a clinician.

Vaccination will further strengthen our monkeypox response and so we urge all those who are eligible for the vaccine to take it up when offered. It will help protect yourself and others you have had close contact with. While the infection is mild for many, it can cause severe symptoms and hospitalisation in some. Please remember that the vaccine may not provide complete protection against monkeypox, so it is still important to be alert for the symptoms of monkeypox and call 111 or a sexual health clinic if you develop any.

The NHS will provide the vaccine to those eligible, so please wait until you are contacted.

Friday 22 July 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 21 July 2022, there were 2,208 confirmed cases in the UK. Of these, 2,115 are in England.

UKHSA has also published its [fourth technical briefing](#) on the ongoing monkeypox outbreak today. The briefing is based on figures from 20 July 2022. So far, the evidence suggests that transmission continues to occur primarily within interconnected sexual networks. Currently we are not seeing significant levels of transmission outside of these networks, but we continue to monitor for changes.

The most recent data suggests that the growth of the outbreak may have slowed. This means that we continue to identify new infections but at a more

stable rate.

Dr Meera Chand, Director of Clinical and Emerging Infections at UKHSA, said:

While anyone can catch monkeypox, the majority of monkeypox cases in the UK continue to be in gay, bisexual and other men who have sex with men (MSM), with the infection being passed on mainly through close contact between people in interconnected sexual networks.

Before you go to a party or event, check yourself for monkeypox symptoms, including rashes and blisters. If you have monkeypox symptoms, take a break from attending events or sex until you've called 111 or a sexual health service and been assessed by a clinician. It can take up to 3 weeks for symptoms to appear after being in contact with someone with monkeypox, so stay alert for symptoms after you have skin to skin or sexual contact with someone new.

UKHSA will continue to publish regular technical briefings as the response to the outbreak continues.

Tuesday 19 July 2022

UKHSA procures more than 100,000 additional vaccine doses and updates close contact guidance as monkeypox cases rise to 2,137

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 18 July 2022, there were 2,137 confirmed cases in the UK. Of these, 2,050 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a high proportion of cases are in London.

UKHSA [guidance for close contacts of a confirmed monkeypox case](#) has been updated. This means close contacts won't need to isolate at home if they don't have symptoms.

The change is being implemented in response to latest data showing that a relatively small number of close contacts have gone on to develop monkeypox and a lack of evidence of transmission outside of close intimate or sexual contact, now that more epidemiological information is available. It means the latest guidance is proportionate to the latest transmission risks identified and is in line with advice from the WHO, other European countries and the CDC.

For category 2 and category 3 close contacts we now recommend people:

- contact NHS 111 or a [sexual health clinic](#) if they develop a fever or any

of the other symptoms described below

- avoid skin to skin contact with others, such as hugging and kissing
- refrain from sexual or intimate contact
- avoid international travel if possible; travel insurance may also not be valid for people advised not to travel
- let health or dental facility staff know they're a close contact before attending for health or dental care

For category 3 close contacts:

- we recommend avoiding close contact with children aged under 5 years, pregnant women and those who have an impaired immune system
- if they work with children aged under 5 years, pregnant women or those who have an impaired immune system, UKHSA or their employer might inform them if they need to take time off – this decision will be based on a personalised clinical assessment

A smallpox vaccine is still being offered to close contacts with higher risk exposure on a case by case basis.

Trained health protection teams carry out detailed clinical assessments of each case to inform their recommendations and categorisation.

Dr Merav Klinier, Deputy Incident Director at UKHSA, said:

We have now passed over 2,000 confirmed cases of monkeypox in the UK, and the outbreak continues to grow.

Based on the growing evidence of how the monkeypox virus is being passed on in this outbreak, close contacts will no longer have to isolate for 21 days unless they develop symptoms.

While our advice on isolation is changing, monkeypox is still a serious public health challenge, and we urge contacts to take a break from any activities or events involving skin to skin contact, including sex, hugging and kissing to reduce the risk of the virus being passed on unknowingly. Stay alert to symptoms and call a sexual health clinic if you become unwell.

Thank you to all contacts who have isolated already in response to this outbreak. We understand that isolation can be difficult but this was a necessary precaution whilst our knowledge of the outbreak was limited.

In response to the ongoing monkeypox outbreak, UKHSA has procured more than 100,000 additional doses of the smallpox vaccine enabling more people to be vaccinated to prevent infection and limit transmission of the virus.

Additional doses will arrive from the manufacturer, Bavarian Nordic, this month, with the remainder expected by September.

The UK previously procured nearly 30,000 doses, enabling the NHS to begin rollout of the vaccine programme to individuals who are most likely to acquire the virus.

While anyone can get monkeypox, the majority of cases in the UK continue to be in gay, bisexual and other men who have sex with men (GBMSM), with the infection being passed on mainly through close contact between people in interconnected sexual networks.

An individual's eligibility for vaccination is detailed in the UKHSA vaccination strategy which was endorsed by the Joint Committee on Vaccination and Immunisation (JCVI).

The vaccine will be offered to some GBMSM who are more likely to acquire the virus, with eligibility based on a number of factors, similar to the criteria used to assess those eligible for HIV pre-exposure prophylaxis (PrEP), even if they are already living with HIV.

Health and Social Care Secretary Steve Barclay said:

Monkeypox is a rare and usually mild disease that does not spread easily between people, but we are taking action to help further manage the outbreak in the UK by procuring over 100,000 additional doses of vaccine.

The NHS is already contacting those eligible for the vaccine, and I would urge people to take up the offer as soon as they are contacted. In the meantime, please contact a sexual health clinic if you notice any unusual rashes or lesions.

I am hugely grateful to the fantastic sexual health staff and 111 call handlers for working hard to keep the current outbreak under control.

Dr Gayatri Amirthalingam, Head of Immunisation at UKHSA, said:

These additional doses mean that we are in an even stronger position to bring the current monkeypox outbreak under control, ensuring those most likely to acquire the virus are protected from infection. We would like to thank our colleagues in sexual health services for all their hard work in rolling out the vaccination programme.

Although most cases of monkeypox in the current outbreak are mild, severe illness can occur in some people, so it is important we use the available vaccine to reach groups where transmission is occurring.

Anyone can get monkeypox and we continue to urge anyone with a rash with blisters, or any other monkeypox symptoms, to take a break

from events, meeting with friends or having sexual contact. Instead, stay at home and contact 111 or your local sexual health service for advice.

The NHS is already rolling out the vaccine to those who are more likely to acquire the virus, including healthcare workers in specialist roles and in clinics where exposure to monkeypox is highest.

The NHS is contacting GBMSM who are eligible for the vaccine.

Friday 15 July 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 14 July 2022, there were 1,856 confirmed cases in the UK. Of these, 1,778 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a significant majority of cases are in London.

Full [guidance on semen testing for monkeypox](#) for clinicians has been published.

The evidence relating to the transmission of monkeypox through semen is limited at the present time. In line with the World Health Organization's (WHO) guidance, UKHSA is now advising people to use condoms for 12 weeks after infection. This is a precaution to reduce the risk of spreading the virus to a partner.

We continue to advise those with monkeypox to not have sex while symptomatic and while lesions are present.

Further epidemiological data and additional analysis can be found in UKHSA's regular monkeypox [technical briefings](#).

Tuesday 12 July 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 11 July, there were 1,735 confirmed cases in the UK. Of these, 1,660 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a significant majority of cases are in London.

Further epidemiological data and additional analysis can be found in UKHSA's regular monkeypox [technical briefings](#).

Friday 8 July 2022

UKHSA has published the latest [epidemiological overview](#) for the ongoing monkeypox outbreak.

It shows that as of 7 July, there were 1,552 confirmed cases in the UK. Of these, 1,482 are in England.

It also includes a breakdown of cases in England by region, which demonstrates that a significant majority of cases are in London.

Further epidemiological data and additional analysis can be found in UKHSA's regular monkeypox [technical briefings](#).

Tuesday 5 July 2022

As of 4 July, [the total number of monkeypox cases in the UK is 1,351](#).

Dr Meera Chand, Director of Clinical and Emerging Infections at UKHSA, said:

While anyone can catch monkeypox, the majority of monkeypox cases in the UK continue to be in gay, bisexual and other men who have sex with men (MSM), with the infection being passed on mainly through close contact between people in interconnected sexual networks.

Before you go to a party or event, check yourself for monkeypox symptoms, including rashes and blisters. If you have monkeypox symptoms, take a break from attending events or sex until you've called 111 or a sexual health service and been assessed by a clinician. It can take up to 3 weeks for symptoms to appear after being in contact with someone with monkeypox, so stay alert for symptoms after you have skin to skin or sexual contact with someone new.

As of July 2022, [the current outbreak clade of monkeypox is no longer classified as a high consequence infectious disease \(HCID\)](#), following review by the Advisory Committee on Dangerous Pathogens (ACDP) and agreement by the UK 4 nations public health agencies.

This does not alter the public health response or measures taken to control monkeypox, but relates to which clinical pathways are used in the NHS.

This decision has been taken because the current outbreak does not meet the criteria for a high consequence infectious disease, which is defined as having a high mortality rate and a lack of available interventions.

We have had no reported deaths from monkeypox in the UK and we have vaccine available for higher risk contacts, healthcare workers who are caring for and who are due to start caring for a patient with confirmed monkeypox, and a new vaccination programme for those who are most at risk.

Future importations of monkeypox directly from West Africa as well as cases caused by the Congo basin clade of the virus will still be classified as HCIDs as we cannot predict their characteristics.

UKHSA is now working to adapt case and contact management using the growing body of evidence about the outbreak. The majority of contacts of cases will no longer be contacted every day following their initial notification and will instead be provided with contact details to approach if they develop symptoms.

This change has been made in light of the emerging evidence about disease severity, meaning that suspected cases do not need to be rapidly transferred to hospital.

NHS England is due to set out details on how eligible people can get vaccinated shortly. People are advised not to come forward for the vaccine until contacted.

Friday 1 July 2022

UKHSA has published the latest [data report on monkeypox](#) in the UK.

As of Thursday 30 June, there are 1,235 confirmed cases in the UK.

Wendi Shepherd, monkeypox incident director at UKHSA, says:

The monkeypox outbreak continues to grow. Our investigations and information from confirmed cases continue to show that the overwhelming majority of cases are in gay, bisexual or other men who have sex with men.

This weekend, let's enjoy Pride safely – before you go to any events or parties, check yourself for blister-like spots and rashes. Please don't attend if you have monkeypox symptoms or feel unwell.

If you have a rash or blisters, stay at home, phone a sexual health clinic, and get tested. Please be vigilant for any monkeypox symptoms in the coming weeks – especially if you are having sex with someone new.

To assist with our contact tracing, we encourage everyone to ensure they exchange contact details with sexual partners, to help us limit further transmission where cases occur.

Anyone can get monkeypox and it can spread from person to person through:

- touching clothing, bedding or towels used by someone with the monkeypox rash
- touching monkeypox skin blisters or scabs (including during sex)
- the coughs or sneezes of a person with the monkeypox rash

We have been advising event organisers throughout the outbreak. See the [latest guidance for organised events and mass gatherings](#).

Tuesday 28 June 2022

UKHSA has published the latest [data report on monkeypox](#) in the UK.

As of Sunday 26 June, there are 1,076 confirmed cases in the UK.

This report is published every Tuesday and Friday.

Dr Sophia Makki, Incident director at UKHSA said:

The monkeypox outbreak in the UK continues to grow, with over a thousand cases now confirmed nationwide. We expect cases to continue to rise further in the coming days and weeks.

If you are attending large events over the summer or having sex with new partners, be alert to any monkeypox symptoms so you can get tested rapidly and help avoid passing the infection on.

Currently the majority of cases have been in men who are gay, bisexual or have sex with men. However, anyone who has had close contact with an individual with symptoms is also at increased risk.

If you are concerned that you may have monkeypox, don't go to events, meet with friends or have sexual contact. Instead, stay at home and contact 111 or your local sexual health service for advice.

We are grateful to all the people who have come forward so far for testing and to assist us with our contact tracing.

Tuesday 21 June 2022

UKHSA is now publishing a regular [data report on monkeypox](#) in the UK.

The report will be published every Tuesday and Friday.

Dr Sophia Makki, Incident Director at UKHSA, said:

We continue to see a steady increase in monkeypox cases. We're reminding everyone to be aware of the symptoms of monkeypox, particularly if you've recently had new or multiple sexual partners, to help prevent further spread and protect others.

If you have a rash with blisters, or any other monkeypox symptoms, don't go to events, meet with friends or have sexual contact. Instead, stay at home and contact 111 or your local sexual health service for advice. Please contact the clinic ahead of your visit and avoid close contact with others until you've been reviewed by a

clinician.

Monday 20 June 2022

From this week, UKHSA will be moving to a twice-weekly schedule for reporting monkeypox case numbers in the UK.

Updated case data will be published on Tuesdays and Fridays beginning on Tuesday 21 June.

Friday 17 June 2022

The UK Health Security Agency (UKHSA) has detected 46 additional cases of monkeypox in England, 3 additional cases in Scotland and 1 in Wales.

This brings the total number confirmed in the UK to 574, as of 16 June.

There are currently 550 confirmed cases in England, 16 in Scotland, 2 in Northern Ireland and 6 in Wales.

Anyone can get monkeypox, particularly if you have had close contact, including sexual contact, with an individual with symptoms. Currently most cases have been in men who are gay, bisexual or have sex with men.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks
- to West or Central Africa in the past 3 weeks

Dr William Welfare, Incident Director at UKHSA, said:

As case numbers of monkeypox continue to rise and with many summer events and festivals ahead, we're reminding people to be aware of the symptoms of monkeypox, particularly if you've recently had new or multiple sexual partners, to help prevent further spread and protect others.

If you have a rash with blisters, or any other monkeypox symptoms, don't go to events, meet with friends or have sexual contact. Instead, stay at home and contact 111 or your local sexual health service for advice. Please contact the clinic ahead of your visit and avoid close contact with others until you've been seen by a clinician.

UKHSA is working closely with partners across the country, including event organisers and venues, to raise public awareness of monkeypox symptoms so everyone has a safe, happy and healthy summer.

Wednesday 15 June 2022

The UK Health Security Agency (UKHSA) has detected 52 additional cases of monkeypox in England, one additional case in Scotland and one in Wales.

This brings the total number confirmed in the UK to 524, as of 14 June.

There are currently 504 confirmed cases in England, 13 in Scotland, 2 in Northern Ireland and 5 in Wales.

Anyone can get monkeypox, particularly if you have had close contact, including sexual contact, with an individual with symptoms. Currently most cases have been in men who are gay, bisexual or have sex with men.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks.
- to West or Central Africa in the past 3 weeks.

Monday 13 June 2022

The UK Health Security Agency (UKHSA) has detected 104 additional cases of monkeypox in England.

This brings the total number confirmed in the UK to 470, as of 12 June.

There are currently 452 confirmed cases in England, 12 in Scotland, 2 in Northern Ireland and 4 in Wales.

Anyone can get monkeypox, particularly if you have had close contact, including sexual contact, with an individual with symptoms. Currently most cases have been in men who are gay, bisexual or have sex with men.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks.
- to West or Central Africa in the past 3 weeks

UKHSA publishes first monkeypox technical briefing

The UK Health Security Agency (UKHSA) has [published its first technical briefing](#) on the ongoing monkeypox outbreak. The briefing shares UKHSA analysis with other public health investigators and academic partners.

This first publication includes updated epidemiological data, with evidence from anonymised detailed interviews with patients which are helping us to understand transmission and to determine how to target interventions.

Of the cases interviewed, 81% were known to be London residents and 99% were male. The median age of confirmed cases in the UK was 38 years old.

152 cases participated in more detailed questionnaires. In this data, 151 of the 152 men interviewed identified as gay, bisexual, or men who have sex with men, or reported same sex contact. Recent foreign travel, within 21 days prior to symptom onset, was reported by 75 cases, with 59 of these reporting travel within Europe.

We also share preliminary assessment of the genomic differences between the outbreak virus and previous monkeypox viruses. In any emerging infection outbreak we assess the virus or bacteria for any changes. We will be working to investigate the significance of the mutations identified so far to determine if they will have any impact on the virus' behaviour

Dr Meera Chand, Director of Clinical and Emerging Infections, UKHSA said:

We are working, both in the UK and together with global partners, to progress the investigations that we need to help us better understand the virus, its transmission and the best use of mitigations such as vaccines and treatments. We use the new data rapidly to inform the public health response and we continue to work to reduce transmission.

We are grateful to all those who have come forward for testing and the patients who continue to help us understand the outbreak through participating in studies and investigations.

UKHSA has identified a number of aspects of this outbreak which require further investigation. We will release the results of our ongoing investigations in subsequent technical briefings – these will be published regularly.

Friday 10 June 2022

The UK Health Security Agency (UKHSA) has detected 43 additional cases of monkeypox in England, one additional case in Scotland and one additional case in Wales.

This brings the total number confirmed in the UK to 366, as of 9 June.

There are currently 348 confirmed cases in England, 12 in Scotland, 2 in Northern Ireland and 4 in Wales.

Anyone can get monkeypox, particularly if you have had close contact, including sexual contact, with an individual with symptoms. Currently most cases have been in men who are gay, bisexual or have sex with men.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks
- to West or Central Africa in the past 3 weeks

Wednesday 8 June 2022

The UK Health Security Agency (UKHSA) has detected 18 additional cases of monkeypox in England, and one additional case in Scotland.

This brings the total number confirmed in the UK to 321, as of 7 June.

There are currently 305 confirmed cases in England, 11 in Scotland, 2 in Northern Ireland and 3 in Wales.

Anyone can get monkeypox, particularly if you have had close contact, including sexual contact, with an individual with symptoms. People who are gay or bisexual and men who have sex with men remain disproportionately affected.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks
- to West or Central Africa in the past 3 weeks

Tuesday 7 June 2022

Monkeypox designated a notifiable disease

Monkeypox is to be listed as a notifiable disease in law from 8 June 2022.

Legislation has been laid today (7 June 2022) which will make monkeypox a notifiable infectious disease under the Health Protection (Notification) Regulations 2010 from 8 June 2022.

This means all doctors in England are required to notify their local council or local Health Protection Team (HPT) if they suspect a patient has monkeypox. Laboratories must also notify the UK Health Security Agency (UKHSA) if the monkeypox virus is identified in a laboratory sample.

Wendi Shepherd, monkeypox incident director at UKHSA, said:

Rapid diagnosis and reporting is the key to interrupting

transmission and containing any further spread of monkeypox. This new legislation will support us and our health partners to swiftly identify, treat and control the disease.

It also supports us with the swift collection and analysis of data which enables us to detect possible outbreaks of the disease and trace close contacts rapidly, whilst offering vaccinations where appropriate to limit onward transmission.

[Full guidance about reporting notifiable diseases and causative organisms](#) can be found on GOV.UK.

It is important anyone concerned they may have symptoms of monkeypox feels able to access healthcare and clinical advice immediately.

To enable this, The National Health Service (Charges to Overseas Visitors) Regulations 2022 have been amended making the diagnosis and treatment of monkeypox, and suspected monkeypox, exempt from charges for all overseas visitors.

Monday 6 June 2022

The UK Health Security Agency (UKHSA) has detected 73 additional cases of monkeypox in England, 2 additional cases in Scotland and 2 in Wales.

This brings the total number confirmed in the UK to 302, as of 5 June.

There are currently 287 confirmed cases in England, 10 in Scotland, 2 in Northern Ireland and 3 in Wales.

Anyone can get monkeypox, particularly if you have had close contact, including sexual contact, with an individual with symptoms. People who are gay or bisexual and men who have sex with men remain disproportionately affected.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks
- to West or Central Africa in the past 3 weeks

Friday 3 June 2022

The UK Health Security Agency (UKHSA) has detected 15 additional cases of monkeypox in England and 3 in Scotland.

This brings the total number confirmed in England to 214, as of 2 June.

There are currently 8 confirmed cases in Scotland, 2 in Northern Ireland and 1 in Wales, taking the UK total to 225.

Anyone can get monkeypox. Currently most cases have been in men who are gay, bisexual or have sex with men, so it's particularly important to be aware of the symptoms if you're in these groups.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks
- to West or Central Africa in the past 3 weeks

Thursday 2 June 2022

The UK Health Security Agency (UKHSA) has detected 11 additional cases of monkeypox in England.

This brings the total number confirmed in England to 199, as of 1 June.

There are currently 5 confirmed cases in Scotland, 2 in Northern Ireland and 1 in Wales, taking the UK total to 207.

Anyone can get monkeypox. Currently most cases have been in men who are gay, bisexual or have sex with men, so it's particularly important to be aware of the symptoms if you're in these groups.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks
- to West or Central Africa in the past 3 weeks

Wednesday 1 June 2022

The UK Health Security Agency (UKHSA) has detected 5 additional cases of monkeypox in England and 1 in Scotland.

This brings the total number confirmed in England to 188, as of 31 May.

There are currently 5 confirmed cases in Scotland, 2 in Northern Ireland and 1 in Wales, taking the UK total to 196.

Anyone can get monkeypox. Currently most cases have been in men who are gay, bisexual or have sex with men, so it's particularly important to be aware of the symptoms if you're in these groups.

Contact a sexual health clinic if you have a rash with blisters and you've been either:

- in close contact, including sexual contact, with someone who has or might have monkeypox (even if they've not been tested yet) in the past 3 weeks

weeks

- to West or Central Africa in the past 3 weeks

A further [epidemiological update on the current outbreak](#) using data up to 30 May has been published.

Tuesday 31 May 2022

Eleven new monkeypox cases identified in England

The UK Health Security Agency (UKHSA) has detected 11 additional cases of monkeypox in England.

The latest cases, as of 30 May, bring the total number confirmed in England since 7 May to 183.

There are currently 4 confirmed cases in Scotland, 2 in Northern Ireland and 1 in Wales, taking the UK total to 190.

The risk to the UK population remains low, but we are asking people to be alert to any new rashes or lesions, which would appear like spots, ulcers or blisters, on any part of their body.

Although this advice applies to everyone, the majority of the cases identified to date have been among men who are gay, bisexual and men who have sex with men, so we are asking these people in particular to be aware of the symptoms, particularly if they have recently had a new sexual partner.

You should call NHS 111 or a sexual health centre immediately if you have a rash with blisters. Do not go to a sexual health clinic without contacting them first. Stay at home and avoid close contact with other people until you've been told what to do.

Dr Ruth Milton, Senior Medical Advisor at UKHSA, said:

The risk to the general public from monkeypox is still low, but it's important that we work to limit the virus being passed on. We remind people that they should be alert to new spots, ulcers or blisters on any part of their body. If anyone suspects they might have these, particularly if they have recently had a new sexual partner, they should limit their contact with others and contact NHS 111 or their local sexual health service as soon as possible, though please phone ahead before attending in person.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk assessed and remain well to isolate at home for up to 21 days.

Monday 30 May 2022

Seventy-one additional monkeypox cases identified in England

The UK Health Security Agency (UKHSA) has detected 71 additional cases of monkeypox in England.

The latest cases, as of 29 May, bring the total number confirmed in England since 7 May to 172.

There are currently 4 confirmed cases in Scotland, 2 in Northern Ireland and 1 in Wales, taking the UK total to 179.

The risk to the UK population remains low, but we are asking people to be alert to any new rashes or lesions, which would appear like spots, ulcers or blisters, on any part of their body.

Although this advice applies to everyone, the majority of the cases identified to date have been among men who are gay, bisexual and men who have sex with men, so we are asking these people in particular to be aware of the symptoms, particularly if they have recently had a new sexual partner.

You should call NHS 111 or a sexual health centre immediately if you have a rash with blisters and either, you:

- have been in close contact with someone who has or might have monkeypox (even if they have not been tested yet) in the past 3 weeks
- have been to West or Central Africa in the past 3 weeks
- are a man who has sex with men

Tell the person you speak to if you have had close contact with someone who has or might have monkeypox, or if you've recently travelled to central or west Africa.

Do not go to a sexual health clinic without contacting them first. Stay at home and avoid close contact with other people until you've been told what to do.

Additionally, today, UKHSA has published [guidance principles agreed across all 4 UK nations](#) on how to effectively limit transmission of monkeypox and limit onward transmission when cases are identified.

This includes [advice and protocols](#) for those testing positive for monkeypox, their close contacts and anyone involved in their treatment or care, including healthcare workers. The principles are already in use in response to the outbreak, and today's publication confirms the UK's aligned response.

Dr Ruth Milton, Senior Medical Advisor at UKHSA, said:

We are continuing to work closely with our colleagues in Scotland, Wales and Northern Ireland to ensure we are aligned in our approach to reducing the risk of transmission of monkeypox in the UK.

We are reminding people to look out for new spots, ulcers or blisters on any part of their body. If anyone suspects they might have these, particularly if they have recently had a new sexual partner, they should limit their contact with others and contact NHS 111 or their local sexual health service as soon as possible, though please phone ahead before attending in person. This will help us to limit the virus being passed on.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk assessed and remain well to isolate at home for up to 21 days.

UKHSA has also purchased over 20,000 doses of a safe smallpox vaccine called Imvanex (supplied by Bavarian Nordic) and this is being offered to identified close contacts of those diagnosed with monkeypox to reduce the risk of symptomatic infection and severe illness.

Friday 27 May 2022

Sixteen additional monkeypox cases identified in England

The UK Health Security Agency (UKHSA) has detected 16 additional cases of monkeypox in England.

The latest cases, as of 26 May, bring the total number confirmed in England since 7 May to 101.

There are currently 3 confirmed cases in Scotland, one in Wales and one in Northern Ireland, taking the UK total to 106.

The risk to the UK population remains low, but we are asking people to be alert to any new rashes or lesions, which would appear like spots, ulcers or blisters, on any part of their body.

Although this advice applies to everyone, the majority of the cases identified to date have been among men who are gay, bisexual and men who have sex with men, so we are asking these people in particular to be aware of the symptoms, particularly if they have recently had a new sexual partner.

You should contact a sexual health clinic immediately if you develop a rash or lesions – though please phone ahead before attending in person.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

We are continuing to promptly identify further monkeypox cases in England through our extensive surveillance and contact tracing networks, our vigilant NHS services, and thanks to people coming

forward with symptoms.

We are asking people to look out for new spots, ulcers or blisters on any part of their body.

If anyone suspects they might have these, particularly if they have recently had a new sexual partner, they should limit their contact with others and contact NHS 111 or their local sexual health service as soon as possible, though please phone ahead before attending in person.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk assessed and remain well to isolate at home for up to 21 days.

UKHSA has also purchased over 20,000 doses of a safe smallpox vaccine called Imvanex (supplied by Bavarian Nordic) and this is being offered to identified close contacts of those diagnosed with monkeypox to reduce the risk of symptomatic infection and severe illness.

Thursday 26 May 2022

Eight additional monkeypox cases identified in England

The UK Health Security Agency (UKHSA) has detected 8 additional cases of monkeypox in England.

The latest cases, as of 25 May, bring the total number confirmed in England since 7 May to 85.

There are 3 confirmed cases in Scotland, one in Wales and one in Northern Ireland, taking the UK total to 90.

The risk to the UK population remains low, but we are asking people to be alert to any new rashes or lesions on any part of their body.

Although this advice applies to everyone, a notable proportion of the cases identified to date have been among men who are gay, bisexual and men who have sex with men (MSM), so we are asking these people in particular to be aware of the symptoms, particularly if they have recently had a new sexual partner.

You should contact a sexual health clinic immediately if you develop a rash or lesions – please phone ahead.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

We are continuing to promptly identify further monkeypox cases in England through our extensive surveillance and contact tracing networks, our vigilant NHS services, and thanks to people coming forward with symptoms.

If anyone suspects they might have rashes or lesions on any part of their body, particularly if they have recently had a new sexual partner, they should limit their contact with others and contact NHS 111 or their local sexual health service as soon as possible, though please phone ahead before attending in person.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk assessed and remain well to isolate at home for up to 21 days.

UKHSA has also purchased over 20,000 doses of a safe smallpox vaccine called Imvanex (supplied by Bavarian Nordic) and this is being offered to identified close contacts of those diagnosed with monkeypox to reduce the risk of symptomatic infection and severe illness.

Wednesday 25 May 2022

Seven additional monkeypox cases identified in England

UKHSA has detected 7 additional cases of monkeypox in England

The latest cases bring the total number confirmed in England since 7 May to 77, as of 24 May.

Public Health Scotland confirmed on Monday it had identified one monkeypox case, taking the total cases identified in the UK to 78.

As of 24 May, no cases have been identified in Wales or Northern Ireland. Despite further cases being detected, the risk to the UK population remains low.

Anyone with unusual rashes or lesions on any part of their body should immediately contact NHS 111 or their local sexual health service – please phone ahead before attending in person.

A notable proportion of the cases identified to date have been among people who are gay, bisexual and MSM, so we are asking these groups in particular to be aware of the symptoms, particularly if they have recently had a new sexual partner.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

We are continuing to promptly detect new monkeypox cases through our extensive surveillance network and NHS services.

If anyone suspects they might have rashes or lesions on any part of their body, particularly if they have recently had a new sexual partner, they should limit their contact with others and contact NHS 111 or their local sexual health service as soon as possible – though please phone ahead before attending in person.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk assessed and remain well to isolate at home for up to 21 days.

In addition, UKHSA has purchased supplies of a safe smallpox vaccine (Imvanex, supplied by Bavarian Nordic) and this is being offered to close contacts of those diagnosed with monkeypox to reduce the risk of symptomatic infection and severe illness.

Tuesday 24 May 2022

Fourteen more cases of monkeypox identified by UKHSA

The UK Health Security Agency (UKHSA) has detected 14 additional cases of monkeypox in England.

The latest cases bring the total number of cases confirmed in England since 7 May to 70, as of 23 May.

Public Health Scotland confirmed on Monday it had identified one monkeypox case, taking the total cases identified in the UK to 71.

As of 23 May, no cases have so far been identified in Wales or Northern Ireland.

Despite further cases being detected, the risk to the UK population remains low.

Anyone with unusual rashes or lesions on any part of their body should immediately contact NHS 111 or their local sexual health service.

A notable proportion of the cases identified to date have been among people who are gay, bisexual and men who have sex with men, so we are asking these groups in particular to be aware of the symptoms.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

We are continuing to promptly identify further monkeypox cases in England through our extensive surveillance and contact tracing networks, our vigilant NHS services and thanks to people coming forward with symptoms.

If anyone suspects they might have rashes or lesions on any part of their body, particularly if they have recently had a new sexual partner, they should limit their contact with others and contact NHS 111 or their local sexual health service as soon as possible – though please phone ahead before attending in person.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk assessed and remain well to isolate at home for up to 21 days. In addition,

UKHSA has purchased supplies of a safe smallpox vaccine (called Imvanex, supplied by Bavarian Nordic) and this is being offered to identified close contacts of someone diagnosed with monkeypox to reduce the risk of symptomatic infection and severe illness.

Monday 23 May 2022

Thirty-six more cases of monkeypox identified by UKHSA

The UK Health Security Agency (UKHSA) has detected 36 additional cases of monkeypox in England.

The latest cases bring the total number of monkeypox cases confirmed in England since 7 May to 56.

The virus does not usually spread easily between people, but it can be passed on through close person-to-person contact or contact with items used by a person who has monkeypox, such as clothes, bedding or utensils. Monkeypox is usually a self-limiting illness and most people recover within a few weeks.

While the current outbreak is significant and concerning, the risk to the UK population remains low.

Anyone with unusual rashes or lesions on any part of their body, especially their genitalia, should immediately contact NHS 111 or their local sexual health service.

A notable proportion of cases detected have been in gay and bisexual men, so UKHSA continues to urge this community to be alert to monkeypox symptoms.

People should notify clinics ahead of their visit and can be assured their call or discussion will be treated sensitively and confidentially.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

Alongside reports of further cases being identified in other countries globally, we continue to identify additional cases in the UK. Thank you to everyone who has come forward for testing already and supported our contact tracing efforts – you are helping us limit the spread of this infection in the UK.

Because the virus spreads through close contact, we are urging everyone to be aware of any unusual rashes or lesions and to contact a sexual health service if they have any symptoms.

A notable proportion of recent cases in the UK and Europe have been found in gay and bisexual men so we are particularly encouraging these men to be alert to the symptoms.

UKHSA health protection teams are contacting people considered to be high-risk contacts of confirmed cases and are advising those who have been risk

assessed and remain well to isolate at home for up to 21 days. In addition, UKHSA has purchased supplies of a safe smallpox vaccine (called Imvanex) and this is being offered to identified close contacts of someone diagnosed with monkeypox to reduce the risk of symptomatic infection and severe illness.

We continue to engage with partners across the sector to ensure people are aware of the signs and symptoms and what action to take.

The vaccination of high-risk contacts of cases is underway. As of 10am on 23 May 2022, over 1,000 doses of Imvanex have been issued, or are in the process of being issued, to NHS Trusts. There remain over 3,500 doses of Imvanex in the UK.

Friday 20 May 2022

Eleven more cases of monkeypox identified by UKHSA

The UK Health Security Agency (UKHSA) has detected 11 additional cases of monkeypox in England.

The latest cases bring the total number of monkeypox cases confirmed in England since 6 May to 20.

The infection can be passed on through close contact or contact with clothing or linens used by a person who has monkeypox.

However, the virus does not usually spread easily between people and the risk to the UK population remains low.

Anyone with unusual rashes or lesions on any part of their body, especially their genitalia, should contact NHS 111 or call a sexual health service if they have concerns.

We continue to engage with partners across the sector at pace to deliver training webinars about monkeypox to clinicians to increase knowledge and awareness of this infection which is unusual in clinical settings in the UK. The first of these was hosted earlier this week by British Association for Sexual Health and HIV (BASHH) and was attended by over 900 people.

A notable proportion of early cases detected have been in gay and bisexual men and so UKHSA is urging this community in particular to be alert.

People should notify clinics ahead of their visit and can be assured their call or discussion will be treated sensitively and confidentially.

Monkeypox is usually a mild self-limiting illness, spread by very close contact with someone with monkeypox and most people recover within a few weeks.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

We anticipated that further cases would be detected through our

active case finding with NHS services and heightened vigilance among healthcare professionals.

We expect this increase to continue in the coming days and for more cases to be identified in the wider community. Alongside this we are receiving reports of further cases being identified in other countries globally.

We continue to rapidly investigate the source of these infections and raise awareness among healthcare professionals. We are contacting any identified close contacts of the cases to provide health information and advice.

Because the virus spreads through close contact, we are urging everyone to be aware of any unusual rashes or lesions and to contact NHS 111 or a sexual health service if they have any concerns.

Please contact clinics ahead of your visit and avoid close contact with others until you have been seen by a clinician.

A notable proportion of recent cases in the UK and Europe have been found in gay and bisexual men so we are particularly encouraging them to be alert to the symptoms and seek help if concerned.

Clinicians should be alert to any individual presenting with unusual rashes without a clear alternative diagnosis and should contact specialist services for advice.

Symptoms

Initial symptoms of monkeypox include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion.

A rash can develop, often beginning on the face, then spreading to other parts of the body including the genitals.

The rash changes and goes through different stages – it can look like chickenpox or syphilis, before finally forming a scab which later falls off.

Wednesday 18 May 2022

Two more cases of monkeypox identified by UKHSA

The UK Health Security Agency (UKHSA) has detected 2 additional cases of monkeypox, one in London and one in the South East of England.

The latest cases bring the total number of monkeypox cases confirmed in England since 6 May to 9, with recent cases predominantly in gay, bisexual or men who have sex with men (MSM).

The 2 latest cases have no travel links to a country where monkeypox is

endemic, so it is possible they acquired the infection through community transmission.

The virus spreads through close contact and UKHSA is advising individuals, particularly those who are gay, bisexual or MSM, to be alert to any unusual rashes or lesions on any part of their body, especially their genitalia, and to contact a sexual health service if they have concerns.

Monkeypox has not previously been described as a sexually transmitted infection, though it can be passed on by direct contact during sex. It can also be passed on through other close contact with a person who has monkeypox or contact with clothing or linens used by a person who has monkeypox.

The 2 new cases do not have known connections with [previous confirmed cases](#) announced on 16, 14 and 7 May.

UKHSA is working closely with the NHS and other stakeholders to urgently investigate where and how recent confirmed monkeypox cases were acquired, including how they may be linked to each other.

The virus does not usually spread easily between people. The risk to the UK population remains low.

Anyone with concerns that they could be infected with monkeypox is advised to contact NHS 111 or a sexual health clinic. People should notify clinics ahead of their visit. We can assure them their call or discussion will be treated sensitively and confidentially.

Monkeypox is a viral infection usually associated with travel to West Africa. It is usually a mild self-limiting illness, spread by very close contact with someone with monkeypox and most people recover within a few weeks.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

These latest cases, together with reports of cases in countries across Europe, confirms our initial concerns that there could be spread of monkeypox within our communities.

UKHSA has quickly identified cases so far and we continue to rapidly investigate the source of these infections and raise awareness among healthcare professionals.

We are particularly urging men who are gay and bisexual to be aware of any unusual rashes or lesions and to contact a sexual health service without delay if they have concerns. Please contact clinics ahead of your visit.

We are contacting any identified close contacts of the cases to provide health information and advice.

Clinicians should be alert to individuals presenting with rashes without a

clear alternative diagnosis and should contact specialist services for advice.

Symptoms

Initial symptoms of monkeypox include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion. A rash can develop, often beginning on the face, then spreading to other parts of the body including the genitals.

The rash changes and goes through different stages, and can look like chickenpox or syphilis, before finally forming a scab, which later falls off.

16 May 2022

Four more cases of monkeypox indentified by UKHSA

The UK Health Security Agency (UKHSA) has detected 4 additional cases of monkeypox, 3 in London and one linked case in the North East of England.

The 4 new cases do not have known connections with the previous confirmed cases [announced on 14 May](#) and the case [announced on 7 May](#).

Investigations are underway to establish links between the latest 4 cases, who all appear to have been infected in London. All 4 of these cases self-identify as gay, bisexual or other men who have sex with men (MSM).

Currently, common contacts have been identified for 2 of the 4 latest cases.

There is no link to travel to a country where monkeypox is endemic, and exactly where and how they acquired their infections remains under urgent investigation, including whether they have further links to each other.

Those patients needing medical care are all in specialist infectious disease units at the Royal Free Hosptial, Royal Victoria Infirmary in Newcastle upon Tyne and Guys' and St Thomas'. The individuals have the West African clade of the virus, which is mild compared to the Central African clade.

These latest cases mean that there are currently 7 confirmed monkeypox cases in the UK, diagnosed between 6 and 15 May.

Due to the recent increase in cases and uncertainties around where some of these individuals acquired their infection, we are working closely with NHS partners to identify if there may have been more cases in recent weeks, as well as international partners to understand if similar rises have been seen in other countries.

Monkeypox is a viral infection usually associated with travel to West Africa. It is usually a mild self-limiting illness, spread by very close contact with someone with monkeypox and most people recover within a few weeks.

The virus does not spread easily between people and the risk to the UK

population is low. However, the most recent cases are in gay, bisexual and other MSM communities, and as the virus spreads through close contact, we are advising these groups to be alert to any unusual rashes or lesions on any part of their body, especially their genitalia, and to contact a sexual health service if they have concerns.

Anyone with concerns that they could be infected with monkeypox is advised to make contact with clinics ahead of their visit. We can assure them their call or discussion will be treated sensitively and confidentially.

Dr Susan Hopkins, Chief Medical Adviser, UKHSA, said:

This is rare and unusual. UKHSA is rapidly investigating the source of these infections because the evidence suggests that there may be transmission of the monkeypox virus in the community, spread by close contact.

We are particularly urging men who are gay and bisexual to be aware of any unusual rashes or lesions and to contact a sexual health service without delay.

We are contacting any potential close contacts of the cases to provide health information and advice.

Clinicians should be alert to individuals presenting with rashes without a clear alternative diagnosis and should contact specialist services for advice.

Symptoms

Initial symptoms of monkeypox include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion. A rash can develop, often beginning on the face, then spreading to other parts of the body including the genitals.

The rash changes and goes through different stages, and can look like chickenpox or syphilis, before finally forming a scab, which later falls off.

14 May 2022

Two additional cases of monkeypox identified in London

Two individuals have been diagnosed with monkeypox in London, the UK Health Security Agency (UKHSA) has confirmed.

The cases live together in the same household. They are not linked to the previous confirmed [case announced on 7 May](#). Where and how they acquired their infection remains under investigation.

Monkeypox is a rare viral infection that does not spread easily between people. It is usually a mild self-limiting illness and most people recover

within a few weeks. However, severe illness can occur in some people.

The infection can be spread when someone is in close contact with an infected person, however, there is a very low risk of transmission to the general population.

One of the cases is receiving care at the expert infectious disease unit at St Mary's Hospital, Imperial College Healthcare NHS Trust, London. The other case is isolating and does not currently require hospital treatment.

As a precautionary measure, UKHSA experts are working closely with the individuals and NHS colleagues and will be contacting people who might have been in close contact to provide information and health advice.

People without symptoms are not considered infectious but, as a precaution, those who have been in close proximity to the individuals are being contacted to ensure that, if they do become unwell, they can be treated quickly.

Dr Colin Brown, Director of Clinical and Emerging Infections, UKHSA, said:

We have confirmed 2 new monkeypox cases in England that are not linked to the case announced on May 7. While investigations remain ongoing to determine the source of infection, it is important to emphasise it does not spread easily between people and requires close personal contact with an infected symptomatic person. The overall risk to the general public remains very low.

We are contacting any potential close contacts of the case. We are also working with the NHS to reach any healthcare contacts who have had close contact with the cases prior to confirmation of their infection, to assess them as necessary and provide advice.

UKHSA and the NHS have well established and robust infection control procedures for dealing with cases of imported infectious disease and these will be strictly followed.

Professor Julian Redhead, medical director at Imperial College Healthcare NHS Trust, said:

We are caring for a patient in our specialist high consequence infectious diseases unit at St Mary's Hospital. All of the necessary infectious control procedures have been followed and we are working closely with UKHSA and NHS England.

Symptoms

Initial symptoms of monkeypox include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion.

A rash can develop, often beginning on the face, then spreading to other

parts of the body, particularly the hands and feet.

The rash changes and goes through different stages before finally forming a scab, which later falls off.

7 May 2022

Monkeypox case confirmed in England

The UK Health Security Agency (UKHSA) can confirm an individual has been diagnosed with monkeypox in England.

The patient has a recent travel history from Nigeria, which is where they are believed to have contracted the infection, before travelling to the UK.

Monkeypox is a rare viral infection that does not spread easily between people. It is usually a mild self-limiting illness and most people recover within a few weeks. However, severe illness can occur in some individuals.

The infection can be spread when someone is in close contact with an infected person; however, there is a very low risk of transmission to the general population.

The patient is receiving care at the expert infectious disease unit at the Guy's and St Thomas' NHS Foundation Trust, London.

As a precautionary measure, UKHSA experts are working closely with NHS colleagues and will be contacting people who might have been in close contact with the individual to provide information and health advice.

This includes contacting a number of passengers who travelled in close proximity to the patient on the same flight to the UK. People without symptoms are not considered infectious but, as a precaution, those who have been in close proximity are being contacted to ensure that if they do become unwell they can be treated quickly. If passengers are not contacted then there is no action they should take.

Dr Colin Brown, Director of Clinical and Emerging Infections, UKHSA, said:

It is important to emphasise that monkeypox does not spread easily between people and the overall risk to the general public is very low.

We are working with NHS England and NHS Improvement (NHSEI) to contact the individuals who have had close contact with the case prior to confirmation of their infection, to assess them as necessary and provide advice.

UKHSA and the NHS have well established and robust infection control procedures for dealing with cases of imported infectious disease and these will be strictly followed.

Dr Nicholas Price, Director NHSE High Consequence Infection Diseases (airborne) Network and Consultant in Infectious Diseases at Guy's and St Thomas', said:

The patient is being treated in our specialist isolation unit at St Thomas' Hospital by expert clinical staff with strict infection prevention procedures. This is a good example of the way that the High Consequence Infectious Diseases national network and UKHSA work closely together in responding swiftly and effectively to these sporadic cases.

Initial symptoms include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion. A rash can develop, often beginning on the face, then spreading to other parts of the body. The rash changes and goes through different stages before finally forming a scab, which later falls off.

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The delegation of Mongolia was headed by HE Mr. Enkh-Amgalan Luvsantseren, Minister of Education and Science while the delegation of the United Kingdom (UK) was headed by The Rt Hon Amanda Milling MP, Minister of State for Asia and the Middle East at the Foreign, Commonwealth and Development Office.

Ministers recalled that Mongolia and the UK established diplomatic relations in 1963. They welcomed the continued progress in the Mongolia-UK bilateral relationship, reaffirmed their commitment to broaden this further and set out their desire to negotiate a Partnership and Cooperation Agreement, to coincide with the 60th anniversary of diplomatic relations in 2023.

Trade, Economic, and Investment cooperation

Ministers welcomed the inclusion of Mongolia in the UK's "Enhanced Framework" Trade Preference Arrangements from 1 January 2021 and expressed their intention to engage actively to facilitate bilateral trade and economic cooperation.

They also welcomed the recent first visit of the UK Prime Minister's Trade Envoy to Mongolia, Daniel Kawczynski MP and the recent agreement between Rio Tinto and the Mongolian government on commencement of the underground phase of the Oyu Tolgoi project.

They noted the importance of an attractive business and investment environment in Mongolia and welcomed ongoing work on investment protection, legal reform and combatting corruption.

Ministers welcomed the long-standing relationship between the London Stock Exchange and the Mongolian Stock Exchange and looked forward to further collaboration between respective financial institutions.

Ministers welcomed ongoing collaboration between the National Geological Office of Mongolia and the British Geological Survey, as well as efforts to introduce advanced technologies, equipment, and best practice to the fields of geology, mining and heavy industry of Mongolia.

Education and Science cooperation

Ministers agreed to promote cooperation aimed at improving the education and assessment systems of Mongolia and enhancing the training capacity and English language skills of teachers, including through inter alia the Cambridge programme, the Chevening partnership agreement and the Global Partnership for Education.

Climate, Energy and Environment cooperation

Ministers welcomed the historic climate agreement reached at COP26 in Glasgow, which keeps the 1.5C goal alive, as well as global action on coal, cars, cash and trees, and new net zero commitments covering 90% of the global economy.

In this regard, Ministers welcomed President Khurelsukh's attendance at COP26 and his pledge to protect forests and Plant Billion Trees by 2030.

Ministers agreed on the importance of full implementation of Nationally Determined Contributions, as well as greening the energy sector and increasing the use of renewable energy sources. In this regard they welcomed the prospect of cooperation on hydropower opportunities in Mongolia.

Ministers welcomed mutual action to support an ambitious Global Biodiversity Framework at COP15. They also welcomed existing cooperation in combating the Illegal Wildlife Trade, including the Zoological Society of London's UK-funded projects in Mongolia to support these efforts and in conservation.

Transport Cooperation

Ministers looked forward to renewing in the near future the bilateral Air Services Agreement, to support transport links between the two countries.