

# Mpox VACCINE

## Mpox Prevention

JYNNEOS 0.5ml single-dose vial  
Live, attenuated non-replicating orthopoxvirus

### Dose:

#### Adults ≥18 years old [1], [2]:

Subcutaneous [**Preferred**]: Two doses (0.5ml each) 4 weeks apart  
Intradermal: Two doses (0.1ml each) 4 weeks apart

#### Paeds 6 months - <18 years old [2]:

Subcutaneous: Two doses (0.5ml each) 4 weeks apart

**Efficacy:** Both subcutaneous & intradermal routes share similar efficacy and interchangeable.

### Post-exposure prophylaxis (PEP) [2]:

Within 14 days (*Ideally within 4 days*) after exposure.

If >14 days exposure, the clinicians should consider the benefit & risk of receiving vaccine on case-by-case basis.

Benefit might still outweigh risks in some cases (e.g. severely immunosuppressed person with a recent sex partner confirmed to have Mpox).

**PEP after onset of signs & symptoms of Mpox – NOT expected to obtain any benefit.**

### References:

1. JYNNEOS (Smallpox and Mpox Vaccine, Live, Non-replicating) Suspension for Subcutaneous Injection [Product Insert]. Denmark: Bavarian Nordic A/S; February 2025
2. CDC. (February 14, 2025). Interim Clinical Considerations for Use of Vaccine for Mpox Prevention in the United States. Retrieved from <https://www.cdc.gov/Mpox/hcp/vaccine-considerations/vaccination-overview.html>

### Pregnancy & Lactation [1], [2]:

Insufficient data. Use if benefit outweigh risk.

### Preparation & Administration [1], [2]:

1. Allow the vaccine to thaw and reach room temperature.

*After thawed, JYNNEOS is a milky, light yellow-pale while coloured suspension. DO NOT administer if any particulate matter or discolouration observed.*

2. Swirl the vial gently for at least 30 seconds before use.
3. Withdraw a dose of 0.5ml into a sterile syringe.
4. Administer via the selected route:

- Subcutaneous: Inject over triceps (≥12 months old), or over anterolateral thigh (<12 months old).

- Intradermal: Typically inject in the volar aspect (inner side) of forearm, but can be done at the upper back below scapula / at the deltoid.

### Interaction with other vaccines [2]:

#### Influenza vaccines

Can be given at the same day, but administer at different sites.

#### COVID-19 vaccines

Recommends a **minimum interval of 4 weeks** between vaccines – Risk of myocarditis & pericarditis.

However, if the patient is at increased risk of Mpox / severe disease due to COVID-19, administration of JYNNEOS & COVID-19 vaccines should NOT be delayed.

### Delay doses/Booster [2]:

**Maximum interval:** Up to 7 days later than the recommended interval of 28 days (e.g. up to 35 days after 1<sup>st</sup> dose). No booster dose required if 2<sup>nd</sup> dose administer after the recommended maximum interval.

**Minimum interval:** 4 days before the recommended interval of 28 days (e.g. 24 days after 1<sup>st</sup> dose).

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### Special situations [1], [2]:

#### Patient with underlying of atopic dermatitis, eczema or other exfoliative skin conditions

No concerning safety signals

#### Patient with a history of developing keloid scars

Administer by subcutaneous route

#### Patient with congenital/acquired immune deficiency disorders (including those taking immunosuppressive medications & RVD patient regardless of immune status)

Administer as indicated based on age

#### Patient with prior history of Mpox

- Diagnosed Mpox before 1<sup>st</sup> dose of JYNNEOS: Not recommended to be vaccinated at this time – Mpox likely confers additional immune protection but the duration of immunity is unknown.
- Diagnosed Mpox after 1<sup>st</sup> dose of JYNNEOS: Not recommended for 2<sup>nd</sup> dose of vaccination – Mpox likely confers additional immune protection.

### Adverse effects (common) [2]:

#### Local side effects:

- Erythema
- Pain
- Edema
- Pruritis
- Hyperpigmentation
- Induration

#### Systemic side effects:

- Fatigue
- Headache
- Myalgias
- Nausea
- Chills
- Fever

*Local side effects may be more severe with intradermal administration compared with subcutaneous administration.*

### Contraindications & Precautions [1], [2]:

- Contraindicated in patient with severe allergic reaction after a previous dose, or to a vaccine component.
- JYNNEOS contains small amount of gentamicin & ciprofloxacin.
- JYNNEOS produced by chicken embryo fibroblast cells.
- Patient with minor illness, such as cold, may be vaccinated.
- Patient with moderate-severe illness with / without fever should usually wait until they have recovered to their baseline health status before vaccination. However, waiting might be NOT appropriate if vaccination is used for PEP.

### Storage & Stability [1]:

-60 to -40°C : 5 years of shelf life

-25 to -15°C : 3 years of shelf life

*Store in the original package to protect from light.*

2 - 8°C : 4 - 8 weeks

*Do NOT refreeze once thawed.*

### References:

1. JYNNEOS (Smallpox and Mpox Vaccine, Live, Non-replicating) Suspension for Subcutaneous Injection [Product Insert]. Denmark: Bavarian Nordic A/S; February 2025
2. CDC. (February 14, 2025). Interim Clinical Considerations for Use of Vaccine for Mpox Prevention in the United States. Retrieved from <https://www.cdc.gov/Mpox/hcp/vaccine-considerations/vaccination-overview.html>

Only for internal circulation ( HSgB). For further enquires, kindly contact ext 4126. Revised 24 February 2025.