



Overview of Monkey Pox Infection in a Person with Eczema

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DESCRIPTION

Eczema Monkey Poxvirus (EMPV) is a rare but serious complication of Atopic Dermatitis (AD). EMPV is a type of poxvirus that causes a severe form of monkey pox in individuals with AD. The virus is transmitted from animals to humans through bites or scratches, and can also be spread through contact with infected bodily fluids or contaminated surfaces.

The first reported case of EMPV was in 2003 in the United States of America, where a patient with AD developed severe skin lesion and was diagnosed with monkey pox. The patient had been in contact with an infected prairie dog, which was later identified as the source of the virus. Since then, there have been several other reported cases of EMPV in patients with AD.

Atopic dermatitis is a chronic skin condition that affects approximately 10% of the population. It is characterized by dry, itchy, and inflamed skin, and is often associated with allergies and asthma. Patients with AD have a weakened skin barrier, which makes them more susceptible to infections and viruses.

EMPV infection in patients with AD can lead to severe complications, including pneumonia, sepsis, and death. In a recent case report published in the Journal of the American Academy of Dermatology, a patient with AD was diagnosed with monkey pox after being bitten by an infected monkey.

The patient was a 28-year-old woman with a history of AD who had travelled to West Africa for a missionary trip. While in Africa, she was bitten by a monkey and developed a fever, headache, and a rash on her face, trunk, and extremities. She was initially diagnosed with a viral infection and treated with antiviral medication, but her symptoms continued to worsen.

Upon her return to the USA, she was admitted to the hospital and diagnosed with monkeypox. Laboratory tests confirmed

the presence of EMPV in her skin lesions. She was treated with intravenous antiviral medication and her symptoms gradually improved.

The case highlights the importance of taking precautions when traveling to areas where monkey pox is endemic, especially for patients with AD. Patients with AD should avoid contact with animals and take extra precautions to protect their skin from injury and infection.

In addition, healthcare providers should be aware of the risk of EMPV infection in patients with AD and consider monkey pox as a differential diagnosis in patients with a history of travel to endemic areas and who present with fever, rash, and lymphadenopathy.

The diagnosis of EMPV can be challenging, as the clinical presentation can be similar to other viral infections. Laboratory testing, including viral culture and PCR, can be used to confirm the diagnosis.

Treatment of EMPV infection in patients with AD is similar to that in other patients with monkey pox. Antiviral medication, such as cidofovir and brincidofovir, can be effective in treating the infection. Supportive care, including intravenous fluids and respiratory support, may also be necessary.

In conclusion, EMPV is a rare but serious complication of atopic dermatitis that can lead to severe complications and death. Patients with AD should take extra precautions to protect their skin from injury and infection, especially when traveling to areas where monkey pox is endemic. Healthcare providers should be aware of the risk of EMPV infection in patients with AD and consider monkey pox as a differential diagnosis in patients with a history of travel to endemic areas and who present with fever, rash, and lymphadenopathy. Early diagnosis and treatment can be life-saving for patients with EMPV infection.

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