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Monkeypox and Nursing in Pakistan: Frontline Guardians Against **Emerging Infectious Diseases**



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Monkeypox (mpox) is a re-emerging zoonotic viral infection caused by an Orthopoxvirus, clinically resembling smallpox but generally presenting with lower mortality. In recent years, its unexpected spread beyond endemic regions has raised global public health concerns, particularly for low- and middle-income countries with constrained health systems such as Pakistan [1].

The recent outbreak of Monkeypox has highlighted the fact that nurses have a very important role to play in controlling and preventing new infectious illnesses across the globe, including in Pakistan. Previously being regarded as a geographically constrained zoonotic disease, Monkeypox has now shown itself as a worldwide health hazard, accompanied by global travel, commerce, and altered epidemiological distributions. In Pakistan, where a healthcare system is already challenged by limited resources, population density, and uneven knowledge of overall health, nurses are in a unique position to control the disease spreading, provide maximum care to the patients, and be the forefront of community health education policies [2,3]. Monkeypox is clinically characterized by fever, headache, myalgia, lymphadenopathy, and characteristic papules which develop into vesicles and crusts. Although in most cases self-limiting, the disease may lead to serious complications in the case of immunocompromised people, and that is why it is important to tell and treat the disease in a timely manner. The nurses in Pakistan are also central in timely symptom identification, disease progression, and enabling laboratory testing, such as PCR, serological testing, and other. They have high vigilance which results in the early detection of cases, timely isolation and minimizing the spread of cases in hospital and community [1,2].

Infection control is one of the pillars in nursing practice when it comes to Monkeypox. Strict procedures undertaken by the nurses include the isolation of patients, strict hand hygiene, correct utilization of personal protective equipment (PPE), and the disinfection of the environment. In addition to these technical measures, the nurses train patients and families on prevention of infections, personal hygiene, safe use of contaminated materials and compliance with isolation measures. In Pakistan, the community sensitization of the general population to the emergent infectious diseases might be low, therefore, the outreach of nurses in form of public awareness campaign, school programs, and local health centers is very important in preventing the spread of infection [4].

The other vital nursing care components include symptom management and psychosocial support. Nurses give drugs to manage fever, pain, and secondary infections and provide good skin care to the lesions. They also respond to the emotional and psychological consequences of infection, counsel patients and family members, and alleviate anxiety, stigma, and social isolation. In Pakistan, this empathetic support and education on nurses have been found to help patients significantly improve their outcomes and the society adhere to the public health measures where stigma towards infectious diseases may impede care-seeking behaviour [2,3].

Vaccination is also another example of the role of nursing in disease prevention. Nurses do not just give vaccines but they also follow up on their effects after the vaccination, educate the community on the benefits of vaccination and organize

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immunization campaigns. Their role plays a central role in the development of herd immunity, outbreak control, and the reinforcement of social trust in preventive health care measures, especially in areas where healthcare is not accessible to all people [2,3].

Nurses have to cope with numerous challenges during the time of outbreaks, such as work-related overload, increased chances of being infected, and mental problems. Additional issues related to ethics concern issues like patient confidentiality and equal allocation of scarce resources. In Pakistan, empowering nurses to cope with these challenges in a way that could be effective is essential through strengthening nursing education, offering psychosocial support, and availability of adequate resources [2,3].

Monkeypox outbreak emphasizes the necessity of nurses in Pakistan to act as caregivers, educators, and promote health. Their experience on how to control infection, care and education to the community is the foundation of controlling outbreaks. Helping the frontline nurses are critical measures of ensuring that the country is prepared in relation to the emerging infectious diseases by incorporating them into the multidisciplinary response teams and ensuring that the effects of infectious diseases are well known to the people. Nurses in Pakistan, as custodians of the population health, remain the protectors of the people, as well as the health system, making it more resilient in confronting the changing global threats.

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