Knowledge of Human Mpox virus infection among healthcare providers and associated factors in Addis Ababa, Ethiopia P3-L15

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128 (64.6%) respondents had poor knowledge regarding Human Mpox Virus infection using a cutoff point of 70% threshold (i.e., 15 correct answers).

BACKGROUND

• This study aimed to assess knowledge regarding mpox and associated factors among healthcare providers in Addis Ababa, Ethiopia.

There are increasing instances of the mpox virus appearing outside of locations where it is endemic, such as Kuwait, where a study showed a low level of confidence regarding mpox diagnosis and management. Up to 50% of suspected mpox cases are misdiagnosed as chickenpox. To comprehend this constantly shifting epidemiology of reemerging diseases, increased clinical skills and professional capabilities are essential. Controlling outbreaks requires significant cooperation between knowledgeable and skilled healthcare providers and the healthcare system.

METHODS

- This facility-based cross-sectional study was set in Addis Ababa, Ethiopia.
- Replies were collected from physicians, nurses, or health officers working in outpatient and emergency departments at selected public health centers of Addis Ababa, Ethiopia using a structured questionnaire with two sections that was adapted from literature. The final analysis included 198 participants.
- The collected data were analyzed using Statistical Package for Social Sciences, v. 25. The knowledge assessment section was analyzed to determine how many respondents had replied correctly to more than 15 questions out of 21. Finally, using binary logistic regression, statistical significance/insignificance was determined for each independent variable.

RESULTS

• The mean score of knowledge assessment was 13.42, with a range of 7–20 out of the 21 questions.

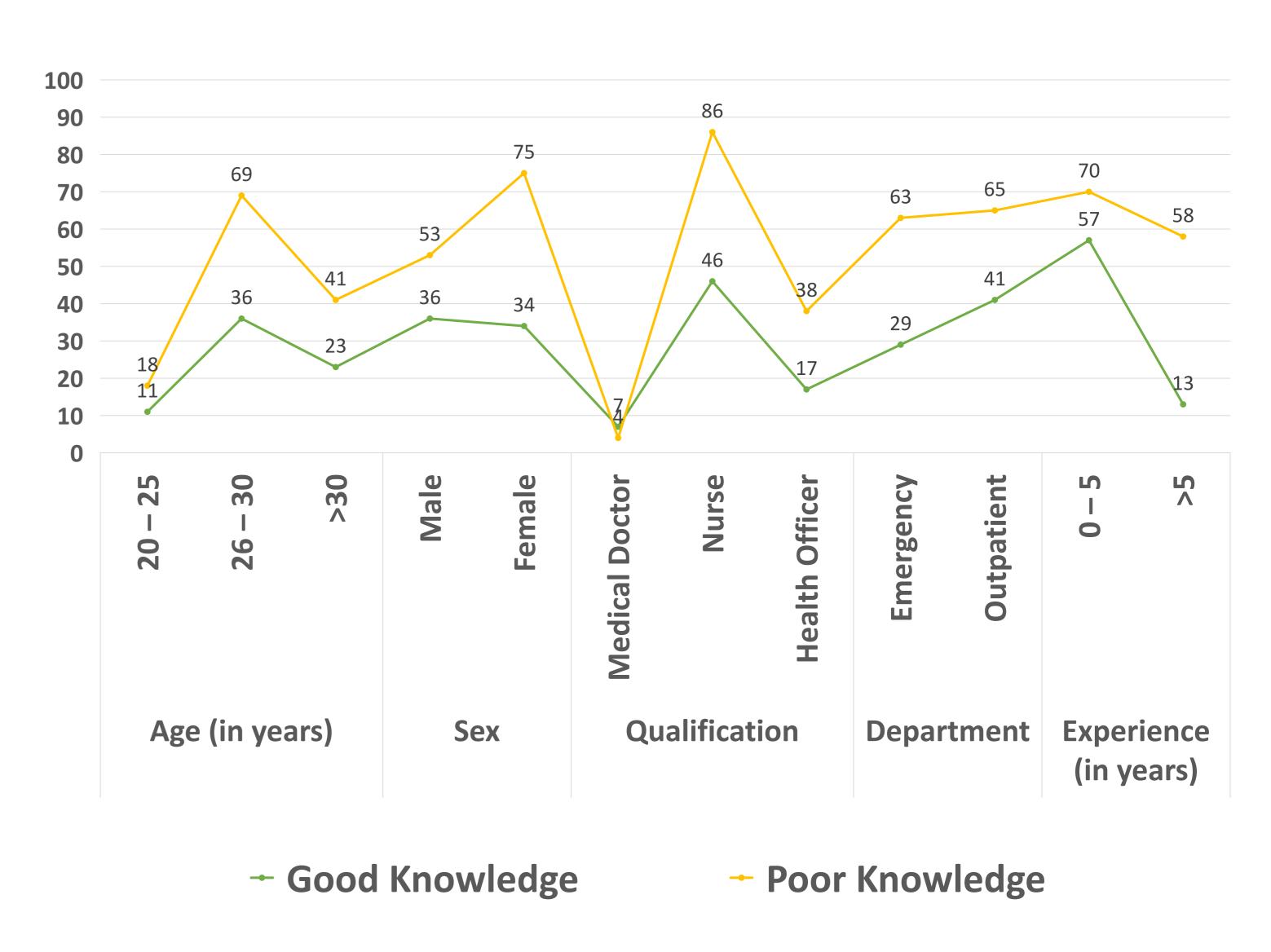
Table 1. Sociodemographic characteristics of participants, January 2023, Addis Ababa, Ethiopia

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Variable	Category	Frequency	Percentage
Age (in years)	20 – 25	29	14.6
	26 – 30	105	53
	>30	64	32.3
Sex	Male	89	44.9
	Female	109	55.1
Qualification	Medical Doctor	11	5.5
	Nurse	132	66.6
	Health Officer	55	27.7
Department	Emergency	92	46.4
	Outpatient	106	53.5
Experience (in years)	0 - 5	127	64.1
	>5	71	35.9

RESULTS CONTINUED

• Using Bloom's cutoff point of 70% threshold (i.e., 15 correct answers), 128 (64.6%) fell within the poor knowledge category.

Figure 2. Frequency of Good/Poor Knowledge



Health professionals with work experience of 5 years or less were found to have a 30.1% increased chance of having good knowledge compared with those who had stayed more than 5 years on the job (aOR: 0.301; 95% CI: 0.149–0.609; P = 0.000).

CONCLUSIONS

According to our results, knowledge of mpox among healthcare providers in Addis Ababa is poor across sociodemographic characteristics and professional levels. In comparison, younger healthcare professionals had better odds of having good knowledge of mpox. This implies that education on mpox among healthcare providers in Ethiopia may prove to be critical, as other epidemics and pandemics have shown how important preparing the health workforce is to curbing potential damage.

ADDITIONAL KEY INFORMATION

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