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evolutionary implications of delaying intervention without addressing trade-offs that arise due to the inherent scarcity of public health resources. Future research might need to account for both factors to find a balance between minimising delay to prevent virus evolution and increasing delay to ensure optimal resource allocation.

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## Monkeypox and pregnancy: time for global surveillance and prevention strategies

We read with interest the guidelines suggested by Pradith Dashraath and colleagues.<sup>1</sup> We wish to highlight the potential for this monkeypox epidemic to encourage the introduction of global surveillance and prevention strategies. The monkeypox outbreak is of particular concern for pregnant women because infection could affect not only the mothers, but also their babies, by either prenatal vertical transmission or direct transmission after birth. Emerging paediatric cases are a cause for concern because pregnant women, young children, and people who are immunocompromised are considered at highest risk of severe monkeypox.

The fact that monkeypox was first identified in Africa in 1970, with thousands of suspected cases and deaths in the past decade, yet so little is known about its effects on pregnant women or pregnancy outcomes,<sup>2</sup> the risk of vertical transmission, or the safety and effectiveness of vaccination in pregnant women, is an indictment of the international medical community. Several decades of opportunity to understand the prevention, surveillance, investigation, and management of monkeypox have been lost. Had appropriate attention been paid by international funding bodies and medical journals, pregnant populations in the endemic low and middle-income countries (LMICs) would have greatly benefited, and

high-income countries would have been better prepared for the current outbreak.

Lessons must be learned: infectious diseases are likely to spread globally, so should be given appropriate medical focus at an early stage, to benefit both endemic LMICs and those high-income countries that will inevitably be affected sooner or later, ensuring maternal health-care equity.

AK and PO'B are members of the Royal College of Obstetricians and Gynaecologists' group developing guidance on monkeypox in pregnancy. PO'B is Vice President of The Royal College of Obstetricians and Gynaecologists. All other authors declare no competing interests.

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## Protecting patients during a shortage of thrombolytic agents

Pulmonary embolism is a major cause of global death and disability.<sup>1</sup> Pulmonary embolism with haemodynamic instability, defined by European Society of Cardiology