

## b Middle East respiratory syndrome coronavirus (MERS-CoV): update

### Current status

As at 14 July 2014, the World Health Organization (WHO) has reported a total of 834 laboratory-confirmed cases of infection with Middle East respiratory syndrome coronavirus (MERS-CoV), including 288 deaths. Although there was a sharp increase in the number of reported MERS-CoV cases since April 2014, there has been an overall decline in numbers reported during recent weeks. To date, all the cases reported have been linked to countries in the Middle East region, with the majority of cases reported from Saudi Arabia. Other countries in the region with laboratory-confirmed cases include Jordan, Saudi Arabia, Yemen, United Arab Emirates (UAE), Qatar, Oman, Kuwait, Lebanon and Iran. Countries with travel-associated cases include United Kingdom (UK), Tunisia, Egypt, Greece, Germany, Italy, Malaysia, Philippines, Algeria, and the United States of America (USA).

### Disease presentation

Individuals with MERS-CoV disease have presented with a wide spectrum of clinical presentations ranging from asymptomatic infection to a rapidly progressive severe lower respiratory illness, characterised by respiratory failure, septic shock and multi-organ failure. Atypical presentations (including mild respiratory illness without fever, and diarrhoea preceding the development of pneumonia) have also been reported, especially in immunocompromised individuals.

### Transmission and infection control

To date, person-to-person transmission has occurred through close contact, both among family contacts and in healthcare settings. However, there

is no evidence of sustained person-to-person transmission in community settings.

As with other respiratory infections, early symptoms of MERS-CoV are non-specific and it is not always possible to identify patients with MERS-CoV early in disease. Healthcare workers are therefore encouraged to practice appropriate infection prevention and control precautions consistently when caring for patients with respiratory illness, regardless of the diagnosis.

### Indications for testing

Healthcare practitioners and facilities should be aware of the possibility of MERS-CoV infection in patients with travel history from the Arabian region who present with acute respiratory illness. Details of case definitions, indications for testing and appropriate specimens for MERS-CoV testing can be accessed at the NICD webpage:

<http://www.nicd.ac.za/?page=alerts&id=5&rid=340>.

### Additional information on MERS-CoV can be accessed at the following websites:

WHO website:

[http://www.who.int/csr/disease/coronavirus\\_infections/en/](http://www.who.int/csr/disease/coronavirus_infections/en/)  
[http://www.who.int/csr/bioriskreduction/infection\\_control/publication/en/](http://www.who.int/csr/bioriskreduction/infection_control/publication/en/)

NICD website: <http://www.nicd.ac.za>

CDC website: <http://www.cdc.gov/coronavirus/index.html>

**Source:** Centre for Respiratory Diseases and Meningitis, NICD-NHLS

### References and additional reading:

ProMED-Mail ([www.promedmail.org](http://www.promedmail.org))

World Health Organization ([www.who.int](http://www.who.int))

Centers for Disease Control and Prevention ([www.cdc.gov](http://www.cdc.gov))