

## Middle East respiratory syndrome coronavirus (MERS-CoV)

As of 7 July 2013, the Middle East respiratory syndrome coronavirus (MERS-CoV) infection, formerly known as novel coronavirus (nCoV), has been laboratory confirmed in 81 patients, including 45 deaths (case fatality rate 56%). Fortynine of 75 cases (65%) for which the sex is known were male and the median age of the cases with known age is 51 years (range, 14 months to 94 years). The MERS-CoV infection has been associated with severe respiratory illness, with most patients presenting with fever, cough, and breathing difficulties, while atypical symptoms such as diarrhoea have also been reported, especially in patients who are immunocompromised.

To date, all cases identified have had either a direct or indirect link to four countries in or near the Arabian Peninsula (see table below for countries that reported cases). However, some cases identified in recent travellers from the Middle East have resulted in local, non-sustained transmission to close contacts.

The latest case reported is a 56-year-old female from Hafr Al-Batin city, in the north-eastern region of Saudi Arabia. She is a health care worker with history of contact with a previously reported laboratory-confirmed MERS-CoV case, who subsequently recovered and was discharged. For more information on cases see WHO link below:

[http://www.who.int/csr/don/archive/disease/coronavirus\\_infections/en/index.html](http://www.who.int/csr/don/archive/disease/coronavirus_infections/en/index.html).

The original source(s), route(s) of transmission to humans, and the mode(s) of human-to-human transmission have not been determined.

Health care providers are advised to be vigilant among recent travellers returning from areas affected by the virus, who develop severe acute respiratory illness (SARI) or pneumonia. Lower respiratory tract specimens should be obtained for diagnosis where possible. Clinicians are reminded that MERS-CoV infection should be considered even with atypical signs and symptoms in patients who are significantly immunocompromised. Health care facilities that provide care for patients with suspected or confirmed MERS-CoV infection should

take appropriate measures to decrease the risk of transmission of the virus to other patients, health care workers and visitors.

Travellers to the Middle East that develop symptoms either during travel or after their return are encouraged to seek medical attention and to share their history of travel. WHO does not advise special screening at points of entry with regard to this event nor does it currently recommend the application of any travel or trade restrictions.

For guidance on case definitions and testing for MERS-CoV, clinicians can access information at: [http://nicd.ac.za/assets/files/Guidelines%20for%20case%20finding%20and%20laboratory%](http://nicd.ac.za/assets/files/Guidelines%20for%20case%20finding%20and%20laboratory%20testing%20for%20novel%20coronavirus%2027%20Nov2012.pdf)

**Table 2. MERS-CoV cases and deaths, April 2012 to 7 July 2013**

Countries	Cases (Deaths)
Saudi Arabia	66 (38)
Italy	3 (0)
Jordan	2 (2)
Qatar	2 (0)
France	2 (1)
Tunisia	2 (1)
United Kingdom (UK)	3 (2)
United Arab Emirates (UAE)	1 (1)
<b>Total</b>	<b>81 (45)</b>

<http://nicd.ac.za/assets/files/Guidelines%20for%20case%20finding%20and%20laboratory%20testing%20for%20novel%20coronavirus%2027%20Nov2012.pdf>.

For guidance on infection control in specimen collection and patient management, see WHO link below:

[http://www.who.int/csr/disease/coronavirus\\_infections/IPcncovguidance\\_06May13.pdf](http://www.who.int/csr/disease/coronavirus_infections/IPcncovguidance_06May13.pdf)

### Additional information

WHO website: [http://www.who.int/csr/disease/coronavirus\\_infections/en/index.html](http://www.who.int/csr/disease/coronavirus_infections/en/index.html)

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