

## Current major event

### Emergence of novel Coronavirus (2019-nCoV) in China

On 31 December 2019, WHO was informed about the detection of a cluster of pneumonia of unknown etiology in Wuhan City, Hubei Province of China. A novel coronavirus (2019-nCoV) was identified as the causative virus on 7 January 2020.

#### Editorial note

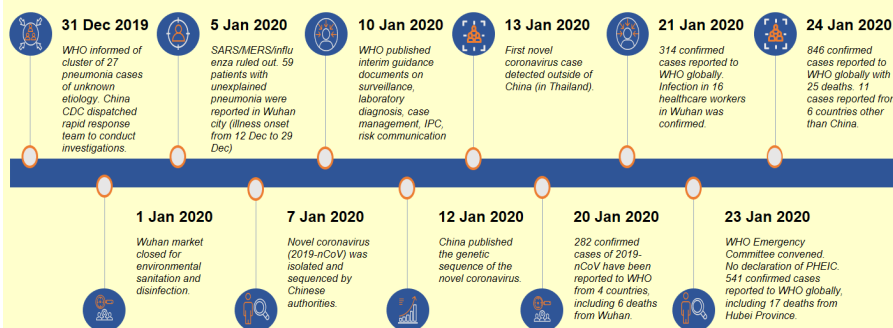
Coronaviruses (CoV) are a large family of viruses that circulate in animals and few of them are known to affect humans causing mild to moderate lower-respiratory tract illnesses. However, if the virus is novel, more severe outcomes are expected. Before current events there were only two incidences where highly pathogenic coronaviruses had emerged: SARS-CoV in 2002 and MERS-CoV in 2012.

2019-nCoV was identified by Chinese authorities on 7 January 2020. Investigations were triggered by the detection of a cluster of 27 pneumonia cases of unknown etiology in Wuhan City, Hubei Province of China on 31 December 2019. The source of infection is still unknown and under investigation. Some cases have reported a common exposure: a local seafood and animal market in Wuhan City. The market was closed on 1 January 2020 for environmental sanitation and disinfection. The Chinese authorities continue to perform intensive surveillance, take preventive measures and conduct further epidemiological investigations (see *timeline of events*).

As of 24 January 2020, a total of 846 confirmed cases have been reported of 2019-nCoV globally. Of them, 830 cases were reported from China including 375 cases confirmed from Hubei Province. Of the 830 cases, 177 have been reported as severely ill and 25 deaths have been reported. 16 healthcare workers were affected as well within China. Since then, the virus has spread to three other administrative regions (5 cases) and six other countries (11 cases) (see table). Almost all reported 2019-nCoV cases outside China had a travel history to Wuhan. No confirmed cases of the new coronavirus have been reported in the WHO Eastern Mediterranean Region to date.

Epidemiological information available from China has confirmed human-to-human transmission, however, more epidemiological data is needed to understand the full extent of human-to-human transmission. Further investigations are ongoing to characterize transmission modes, reproduction interval and clinical spectrum resulting from infections to inform and refine strategies to prevent, control and stop the spread of 2019-nCoV. Current evidence suggests transmission may

### Timeline of the 2019-nCoV outbreak\*



\*Based on currently available information reported to WHO as of 24 January 2020. Details may change as more retrospective findings and developments are reported.

### Number of 2019-nCoV Cases reported Globally, as of 24 January 2020

Country	Number of confirmed cases
China	830
Taipei Municipality	1
Hong Kong Special Administrative Region	2
Macau Special Administrative Region	2
Japan	1
Republic of Korea	2
Vietnam	2
Republic of Singapore	1
Thailand	4
United States of America	1
<b>Total</b>	<b>846</b>

be occurring through droplets, contact and fomites. WHO is recommending standard precautionary measures to prevent infection spread include regular hand washing, covering mouth and nose when coughing and sneezing, thoroughly cooking meat and eggs, as well as avoiding close contact with anyone showing symptoms of respiratory illness such as coughing and sneezing.

On 22 and 23 January, WHO Director-General convened an Emergency Committee under the IHR (2005). The committee has not declared the event as a PHEIC. WHO assessed the risk of this event to be very high in China, high at the regional level and moderate at the global level. WHO encourages all countries to continue enhancing preparedness and prevention activities. WHO advises against the application of any travel or trade restrictions based on the information available. If travellers develop respiratory illness before, during or after travel, they should seek medical attention and share travel history with their health care provider.

WHO has developed technical guidance, most of which was based on MERS experience in EMRO. The guidance is available on <https://www.who.int/health-topics/coronavirus>. It is being continuously reviewed as new information becomes available.

### Update on outbreaks in the Eastern Mediterranean Region

**MERS** in Saudi Arabia; **cholera** in Sudan; **cholera** in Somalia; **cholera** in Yemen; **multidrug-resistant typhoid fever** in Pakistan.

### Current public health events of concern [cumulative N° of cases (deaths), CFR %]

#### Avian influenza: 2006-2017

Egypt (A/H5N1)	[359 (122), 33.98%]
Egypt (A/H9N2)	[4 (0)]

#### Ebola virus disease (EVD): 2018-2020

Democratic Republic of Congo (DRC)	[3412 (2237), 65.56%]
------------------------------------	-----------------------

#### Cholera: 2017-2020

Somalia	[10 113 (51), 0.5%]
Yemen	[2 222 416 (3 761), 0.17%]
Sudan	[346 (11), 3.18%]

#### Diphtheria: 2017-2020

Yemen	[4788 (281), 5.87%]
Bangladesh	[8987 (46), 0.51%]
Sudan	85 (12), 14.12%

#### MERS: 2012-2020

Saudi Arabia	[2108 (784), 37.2%]
United Arab Emirates	[3 (0)]

#### Multidrug-resistant typhoid fever: 2016-2020

Pakistan	[15 480 (0)]
----------	--------------