

Current major event

New Coronavirus identified in two patients in the EMR

A new type of coronavirus, not found before in the family of coronaviruses, has been detected in at-least two cases involving humans in the Eastern Mediterranean Region (EMR). One of the patients, a Qatari national, is currently receiving intensive care treatment at a hospital in London. In recent months, a new human coronavirus, almost identical to the one found in Qatari national, was also identified in a patient who presented with acute respiratory illness in Saudi Arabia and later died. In addition, a fatal case of acute respiratory illness of unknown cause in a Saudi resident who was later admitted to a hospital in London in August is currently being investigated.

Editorial note

The coronaviruses belong to large family of viruses which include the viruses that can cause common cold as well as the one that caused the Severe Acute Respiratory Syndrome (SARS) pandemic in 2003. In recent months, the identification of a novel human coronavirus which caused death to two nationals from the Eastern Mediterranean Region has caused a global alert. There is no proof at this stage that the two cases in which the new human coronaviruses were identified are epidemiologically linked. Preliminary investigation also revealed no evidence of illness in contacts of these two cases, including amongst any healthcare workers who were involved in providing care to these confirmed cases. However, the current situation needs to be assessed with great concern as the public health implications of the emergence of this new respiratory virus is still uncertain and key epidemiological, and clinical features as well as exposure risks of this new coronavirus are unknown.

The priority, at this stage, is to ascertain the extent of the spread of this newly identified coronavirus including identifying its sources, pathogenicity, and/or

New coronavirus: Unknowns

- The origin of this new virus is unknown. It may be a mutation of an existing virus or may have been circulating in animals or birds. There is no evidence at the moment that this is a zoonosis;
- There is currently not enough information on how this new virus transmits or how widespread geographically the virus is. It is likely that these viruses typically spreads in a manner similar to flu virus. There is no evidence, yet, of any human-to-human transmission;
- There is very limited information on clinical features that this new virus may cause. Both the fatal cases died of severe respiratory distress with renal failure;
- It is not known whether the new virus was circulating more widely but causing milder illness than what has been observed so far;
- Experts do not have enough information on the virus to make specific treatment recommendations, and can only suggest acute respiratory support to those admitted in hospital;
- It is not known how contagious the virus is. There seems to be very limited transmission of the virus observed so far;

Coronavirus: Knowns

- **Causative agent:** Common cold and SARS;
- **Clinical symptoms:** Fever, cough, and breathing difficulties;
- **Mode of transmission:** By respiratory droplets through coughing and sneezing;
- **Incubation period:** Seven days;
- **Survival of the virus:** Very fragile. Doesn't survive outside the body for more than 24 hours. Easily destroyed by detergents and cleaning agents;

transmissibility of the virus. This will entail collecting detailed information regarding the exposure, clinical, occupational and travel histories from these cases in a standardized manner and share it at the global level. Once such information are available, the public health risk associated with the emergence of this new respiratory virus can be fully ascertained and addressed.

It is important that the countries in the EMR strengthen their disease surveillance system and use a sensitive case definition to quickly detect any suspected case with unknown or unexplained respiratory illness or any unusual increase in ICU admissions due to acute respiratory syndrome. Exchange of full epidemiological and clinical information of these suspected cases with WHO will be the key to fully understand how severe the virus is likely to be. This is how the health security in the region can be ensured in the face of this threat.

Update on outbreaks

in the Eastern Mediterranean Region

Hepatitis E: in S. Sudan; **Novel Coronavirus :** in Qatar and Saudi Arabia; **Dengue** and **CCHF** in Pakistan;

Current public health events of international concern

[cumulative N° of cases (deaths), CFR %]

Avian influenza

China	[43(28), 65.1%]
Egypt	[168 (60), 35.7%]
Indonesia	[190 (158), 83.1 %]
Viet Nam	[123(61), 49.5%]
Cambodia	[21(19), 90.4%]
Bangladesh	[6(0), 0%]
Global total	[607(358), 58.9%]

Hepatitis E

S. Sudan	[539 (19), 3.5%]
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Novel Coronavirus

Saudi Arabia	[2 (2), 100%]
Qatar	[1 (0),]

Crimean-congo haemorrhagic fever

Pakistan	[39 (9) 21.1.%]
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Cholera

Sierra Leone	[18508 (271), 1.5%]
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Ebola Haemorrhagic Fever

D.R Congo	[46 (19), 41.3%]
Uganda	[24(16), 66.7%]

CFR=Case-Fatality Rate; # Suspected cases