

Current major event

Middle East Respiratory Syndrome-Coronavirus (MERS-CoV) in EMR

From 21 March 2012 to 26 May 2013, 44 laboratory-confirmed cases of Middle East Respiratory Syndrome-Coronavirus with 23 deaths (CFR: 52.2%) were reported worldwide. Several countries in the Eastern Mediterranean Region were affected by this virus; including Jordan, Saudi Arabia, Qatar, United Arab Emirates, and Tunisia. (Please see the chart).

Editorial note

The MERS-CoV was discovered for the first time in September 2012. It looked like SARS (Severe Acute Respiratory Syndrome), which caused an epidemic in 2002-2003, but still distinct from it and from the common cold coronavirus. Since the SARS epidemic, the global surveillance of potential epidemics and countries preparedness has improved. In May 2013, the Coronavirus Study Group of the International Committee on Taxonomy of Viruses selected the official designation for the virus, as the “Middle East Respiratory Syndrome Coronavirus” (MERS-CoV), which was adopted by the World Health Organization (WHO) to provide uniformity and facilitate communication about the disease to replace the previous designation Novel coronavirus 2012 used by WHO since 2012 till April 2013.

The countries affected by MERS-CoV were: Jordan, Saudi Arabia, Qatar, United Kingdom, France, United Arab Emirates and Tunisia. Eighteen out of the 23 people who died and thirty two out of the 44 reported cases were in Saudi Arabia (Please see the table), one of the EMRO countries, qualifying it as the most affected country worldwide. The last reported case was a 63 year-old man, who was admitted to a hospital in Al-Qasem region in the Central part of KSA on 15 May 2013 and died on 20 May 2013, after a cluster of cases reported from Al-Ahsa region in the Eastern part of the country. Even cases from the affected European countries (UK and France) had a direct or indirect connection to the EMR. It is obvious now that the virus spreads from person-to-person in close contact. Transmission from infected patients to healthcare personnel was also observed in some countries. Clusters of cases were reported in Jordan, Saudi Arabia, UK and France. Most probably, the recent increase in reported cases is due to increased awareness among the medical community.

At the sixty-sixth World Health Assembly (WHA) that took place last week, in Geneva, WHO Director General, Margaret Chan, declared that intellectual property, or patents on strains of the new virus, should not impede nations from protecting their citizens by limiting scientific investigations. Countries in the EMR, in particular, should maintain a high level of vigilance and follow WHO guidelines for testing of suspect cases of MERS-CoV. More cases are expected to be reported during the next few days as the virus has recently been spreading more rapidly. It is critical to report these cases and related information urgently to WHO, as required by the International Health Regulations (IHR), to inform effective international alertness, preparedness and response.

Update on outbreaks in the Eastern Mediterranean Region

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

Avian influenza

Egypt [173 (63), 36.4%]
Indonesia [192 (160), 83.3%]
Viet Nam [125 (62), 49.6%]
Cambodia [31 (27), 87.1%]
Global total [629 (375), 59.6%]

Hepatitis E

South Sudan [10507 (193), 1.8%]#

Novel Coronavirus

Saudi Arabia [32 (18), 56.2% ]
Qatar [2 (0)]
Jordan [2 (2), 100%]
UK [3 (2), 66.6%]
UAE [1 (1), 100%]
France [2 (0)]
Tunisia [2 (0)]

Influenza A (H7N9) virus

China [131 (36), 27.4%]#

Meningococcal meningitis

South Sudan [154 (6), 3.8%] #

Wild poliovirus

Somalia [1 (0)]

CFR=Case-Fatality Rate; # Suspected cases

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