

Current major event

MERS - CoV in Iran (Islamic Republic of)

The Ministry of Health and Medical Education (MOH&ME) in Iran reported to WHO its first case of Middle East respiratory syndrome coronavirus (MERS-CoV) on 26 May 2014. Two laboratory-confirmed cases were reported from Kerman province on the same day. On 04 June, the MOH&ME reported to WHO the third laboratory-confirmed case of MERS-CoV who had a history of contact with the first laboratory-confirmed case reported by the MOH&ME on 26 May 2014.

Editorial note

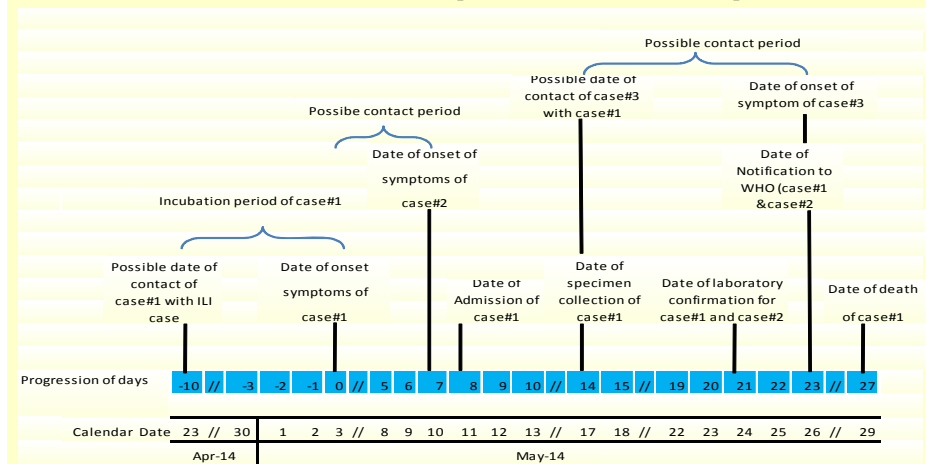
This is the first time, the Islamic Republic of Iran reported case of MERS-CoV. To date, eleven countries in the region- Egypt, Jordan, Islamic Republic of Iran, Kingdom of Saudi Arabia, Kuwait, Lebanon, Oman, Qatar, Tunisia, United Arab Emirates and Yemen have reported cases of MERS-CoV.

The first case of MERS-CoV in Iran (Islamic Republic of) was a 52 year old female housekeeper who got sick on 3rd of May and admitted to hospital on 11 May. On 22 May (*please see the timeline*), the patient was laboratory-confirmed. She was hypertensive. The patient had no history of travel outside the province. However, case investigation revealed that she had a history of close contact with a female with Influenza like Illness (ILI) at-least ten days prior to her illness. This ILI patient had performed Umrah recently. The patient died on 29 May.

On 10 May, her sister, a 50 old female housekeeper developed influenza like symptoms and was admitted at the same hospital on 17 May. She was laboratory-confirmed on 24 May 2014.

The third case was a 35 years old female health care worker who developed symptoms on 26 May. The patient is a nursing assistant working at the intensive care unit who was in close contact with case no 1 (52 year old female housekeeper who later on died) from 14 to 24 May. Investigations revealed that she performed tracheal intubation on case

Timelines of cases of MERS-CoV reported from Iran (Islamic Republic of)



no 1 as well was responsible for providing general care. She was identified through contact tracing, and was the only positive case among the 26 close contacts of case-1 who were identified as having symptoms following close contact with case no 1 and later on sampled for laboratory testing.

Although up to now there is no news of any further case from the same cluster, it is not yet certain if the transmission has stopped. It would be prudent to continue the field investigation to identify the source of infection of the first case who reportedly was in close contact with a female having a travel history to the Kingdom of Saudi Arabia for Umrah. Identification of this female who later on developed ILI symptoms would be important to understand the transmission chain associated with this cluster. Additionally, it will be important to continue the contact tracing of case no 3 and case no 2 and take appropriate precautionary measures to stop the transmission within and outside this cluster.

The current evidence is another example of the importance of applying infection prevention and control measures in healthcare facilities systematically and consistently irrespective of the diagnosis of the patient. Transmission will continue to occur in healthcare facilities as has been observed in other countries in the region if the IPC measures are not followed routinely in healthcare facilities. Raising the awareness of healthcare workers will be the key to stopping the transmission within healthcare facilities.

Update on outbreaks

in the Eastern Mediterranean Region

MERS-CoV in Saudi Arabia, UAE and Iran (Islamic Republic of)

Current public health events of international concern

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

Avian Influenza A (H5N1): 2003-2014

Egypt [175 (63), 36%]

MERS-CoV: 2012-2014

Saudi Arabia [590 (256), 43.4%]

Jordan [11 (6), 54.5%]

Oman [2 (2), 100%]

UAE [67 (8), 11.9%]

Kuwait [3 (1), 33.3%]

Tunisia [3 (1), 33.3%]

Qatar [7 (4), 57.1%]

Yemen [1 (1), 100%]

Egypt [1 (0), 0%]

Lebanon [1 (0), 0%]

Iran [3 (1), 33.3%]

Ebola Hemorrhagic Fever: 2014

Guinea [351 (226), 64.4%]

Liberia [12 (11), 91.7%]

Sierra Leone [89 (7), 7.9%]

Wild poliovirus: 2012-2014

Pakistan [222 (0), 0%]

Cholera 2014

South Sudan [1720 (37), 2.1%]

CFR=Case-Fatality Rate; # Suspected cases