

Regional Office for the Eastern Mediterranean

WeeklyEpidemiological **Monitor**

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Current major event

MERS-CoV and haii

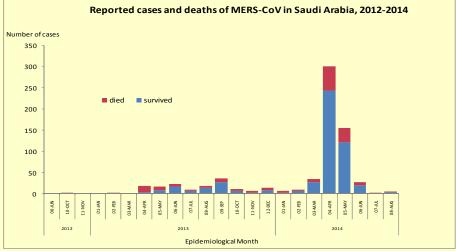
As the Muslims around the world start assembling in the holy places of Kingdom of Saudi Arabia (KSA) for the haji (1435H), the focus is again on the situation of Middle East Respiratory Syndrome Coronavirus (MERS-CoV) in Saudi Arabia as the country has been worst hit by this outbreak since the emergence of the virus in 2012. During the past two months (July-August), the Ministry of Health (MoH) of KSA reported 8 sporadic cases of MERS-CoV including 3 deaths.

Editorial note

Since June 2012, the MOH of KSA reported a total of 726 laboratoryconfirmed cases of MERS-CoV in KSA including at least 267 deaths (CFR: 36.8%). Almost 67% of these reported cases were from Jeddah and Riyadh area (Please see the map) and almost 77% of these cases were reported during the current year.

The majority of cases of MERS-CoV reported so far from the KSA was in April -May this year (please see the above graph) when in addition to an increase in primary cases, secondary transmissions resulting in hospital outbreaks of MERS-CoV occurred in some of the major hospitals in Jeddah due to an aberrant breach in infection control measures in the hospitals.

The MoH in Saudi Arabia has put in place a detailed plan for preventing any surge in both primary as well as hospital acquired infections from MERS-CoV during the current haji (1435 H) specially in the holy places of the Kingdom where the pilgrims will assemble for their religious rituals. Appropriate use of risk communication messages amongst the pilgrims, enhancing surveillance as well as improving infection prevention and control measures in the hospitals offering healthcare services to the pilgrims are part of this plan of the MoH to increase its operational readiness for preventing spread of MERS-CoV infection amongst the pilgrims during the hajj





(1435). Preventing international spread of MERS-CoV that may be associated with the returnee pilgrims would be another challenge this year that also needs to be addressed jointly and collaboratively by all countries, WHO and other international health partners as this remains a shared responsibility.

During the last two months and also during the month of Ramadan when the Muslims usually visit the holy places for Umrah in large numbers (sometimes over 5 to 6 million people), there were not many cases of MERS-CoV reported from the KSA. While this is assuring, public health vigilance needs to be continued and guards should not be lowered during the hajj and even in its aftermath so as to prevent any further spike. It is also prudent to say that the countries sending the pilgrims also need to put in place a sensitive system for surveillance, early detection and response to any infection of MERS-CoV that may be introduced to their countries with the returnee pilgrims. This will be the testing time for all for the sake of protecting global health security.

Update on outbreaks

in the Eastern Mediterranean Region

MERS-CoV in Saudi Arabia

Current public health events of international concern

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

Avian Influenza	A	(H5N1): 2006-2014

Lgypt	[170 (04), 30.470
MERS-CoV: 2012-2014	
Saudi Arabia	[726 (267), 36.8%

Jordan [11 (6), 54.5%] Oman [2 (2), 100%] UAE [68 (8), 11.8%] 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%**] [5 (1), **20%**]

Ebola Hemorrhagic Fever: 2014

Guinea	[771 (494), 64%]
Liberia	[1698 (871), 51.2%]
Sierra Leone	[1216 (476), 39.1%]
Nigeria	[21 (7), 33.3%]
Senegal	[1 (0), 0%]
DRC	[24 (13), 0%]
Wild poliovirus: 2014	
Pakistan	[117 (0), 0%]
Afghanistan	[8 (0), 0%]

Dengue Fever: 2014

Somalia

Sudan [1151 (9), 0.8%]

[4(0), 54.2%]