

# **Weekly Epidemiological Monitor**

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## **Current major event**

Regional Office for the Eastern Mediterranean

#### **Hospital outbreak of MERS**

A cluster of MERS-CoV cases was reported from a university hospital in Riyadh, Saudi Arabia in recent time. A total of 18 laboratory-confirmed case of Middle East respiratory syndrome (MERS), including one related death was reported from this cluster. Most of the cases were asymptomatic and were detected following an active screening of close contacts of the index patient. A total of 12 asymptomatic health care workers were identified from this cluster.

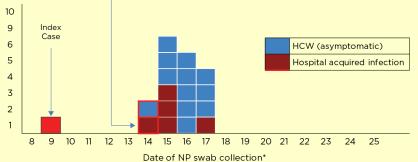
#### **Editorial note**

This is the second hospital outbreak of MERS reported from the Kingdom of Saudi Arabia (KSA) this year.

Hospital outbreaks of MERS continue to be reported since the virus was first identified in a patient from Saudi Arabia in 2012. It has been postulated that a combination of factors such as late recognition or identification of patient, in-adequate infection prevention and control measures and overcrowding in hospitals result in nosocomial transmission of MERS in healthcare settings.

In 2015, two large hospital outbreaks occurred. The outbreak in Republic of Korea (RoK) spread over two months via a single inter-human transmission chain generated additional 185 non-primary cases including 36 deaths. A second hospital based cluster began in late June within a single hospital in Riyadh in Saudi Arabia resulting in a total of 130 cases including 51 deaths until the end of August. These hospital outbreaks were eventually controlled following improved patients management and compliance with infection control measures. What has been observed in all these nosocomial outbreaks is that rapid identification and isolation of all close contacts of the index pa-

#### MERS case cluster reported from a hospital in Riyadh, Saudi Arabia Symptomatic case 10 9 Index 6 HCW (asymptomatic)



\* For symptomatic cases, date of onset is used

#### Asymptomatic cases reported by country, 2013-2016

Country	Year				Total
	2013	2014	2015	2016	
Jordan	-	-	2	2	4
KSA	19	101	36	12	168
Oman	-	-	1	-	1
ROK	-	-	1	-	1
Qatar	-	-	-	1	1
UAE		5	21	1	27
Total	19	106	61	16	202

tient or primary case in the hospital (healthcare workers, patients and patients visitors) is the key to stopping the onward human transmission.

It is not clear if the current hospital outbreak reported from the University Hospital in Riyadh, Saudi Arabia will prolong and generate more secondary (non-primary) cases than reported so far. The fact that an active screening has been conducted immediately following reporting of the initial cluster and all high risk contacts have been put on isolation, the risk of further transmission has been minimized. These are one of good practices to contain nosocomial transmission from MERS which should be praised and appreciated.

### Update on outbreaks

in the Eastern Mediterranean Region

MERS-CoV in Saudi Arabia;; Cholera in Somalia.

#### Current public health events of international concern

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

#### Avian Influenza: 2006-2016

Egypt (A/H5N1) [350 (117), 33.4%] Egypt (A/H9N2) [3(0)]

#### MERS-CoV: 2012-2016

Saudi Arabia [1414 (601), 42.5%] Bahrain [1 (1), 100%]

#### Cholera: 2016

[8838 (433), , 4.9%

### Yellow fever: 2015-2016

Angola [3137 (345), 10.9% DRC [1644 (71). 4.3%

#### Lassa fever: 2015-2016

Nigeria [273(149), 54.5%) Benin [54(28),51.8%

### Avian Influenza A (H7N9): 2013-2016

China [770 (306),39.7%]

#### Avian Influenza A (H5N6): 2016

China [4(0)]Wild poliovirus: 2014-2016

Pakistan [371(0)] Afghanistan [54(0)]

#### Zika Virus Infection: 2007-2016

60 countries and territories have reported transmission so far