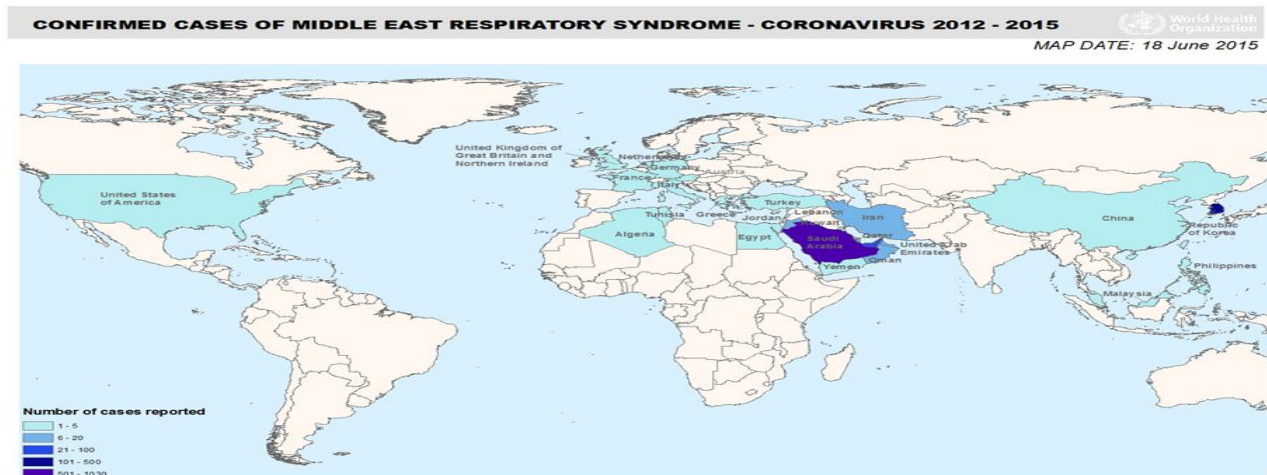


MERS-CoV Update – June 22, 2015

What is New about MERS-CoV?

Middle Eastern Respiratory Syndrome Coronavirus (**MERS-CoV**) presents as a severe acute respiratory infection (SARI).

A cluster of over 165 cases of MERS-CoV in South Korea have been identified and all stem from 1 importation from the Middle East. The virus has not mutated in this instance, but cases are largely based on nosocomial spread, due to inadequate infection control measures and based on contacts of cases.



There has continued to be MERS-CoV cases occurring sporadically in the Middle East (predominantly Saudi Arabia) with over 1330 cases worldwide reported (see above map for affected countries).

Case fatality rate remains high (approx. 35%) and individuals with chronic co-morbidities remain at higher risk of severe infection.

Camels have been identified as the animal reservoir for infection although the method of transmission to humans is still unknown.

What do I Need to Know as a Health Professional?

- Always elicit travel history for links to affected areas in the 2 weeks prior to illness onset for patients presenting with SARI (this includes South Korea).
- Implement respiratory precautions immediately for suspect cases.
- Report to CPHO for further guidance and follow-up.
- Consult with laboratory for appropriate specimen collection and testing protocols.

No sustained human-to-human transmission has been noted, however it is likely that more cases will be identified and that imported cases will continue to occur.

Please remain aware of the SARI guideline, which contain all relevant information and appropriate infection control measures to ensure prompt recognition and isolation of any suspect cases.

The guideline can be accessed at:

<http://www.gov.pe.ca/health/index.php3?number=1023261&lang=E>