



WHO is seeking to better understand the transmission patterns of the virus and control measures. Since mid-March 2014, over 100 people have tested positive for MERS in the Jeddah area and 31 of them have died. Photo: WHO/T. JasarevicCairo, Egypt 7 May, 2014 – A team of experts from the World Health Organization (WHO) completed a 5-day mission to Saudi Arabia to assist the national health authorities to assess the recent increase in the number of people infected by the Middle East respiratory syndrome coronavirus (MERS-CoV) in Jeddah.

As of 3 May, 489 cases, including 126 deaths, were reported to WHO globally and 406 cases, including 101 deaths, from Saudi Arabia. These numbers can change from one day to the next according to when Member States inform WHO.

The team looked into the epidemiological, disease prevention, organizational and communication aspects of this recent outbreak to understand the public health risk and transmission chain and to propose next steps and actions.

After meeting health officials in the capital, WHO experts visited two main hospitals in Jeddah to analyse transmission patterns and review infection control measures.

Key findings of the Jeddah outbreak included the following.

Current evidence does not suggest that a recent increase in numbers reflects a significant change in the transmissibility of the virus. The upsurge in cases can be explained by an increase, possibly seasonal, in the number of primary cases amplified by several outbreaks in

hospitals due to breaches in WHO's recommended infection prevention and control measures. There is no evidence of sustained human-to-human transmission in the community and the transmission pattern overall remained unchanged.

The majority of human-to-human infections occurred in health care facilities. One quarter of all cases have been health care workers. There is a clear need to improve health care workers' knowledge and attitudes about the disease and systematically apply WHO's recommended infection prevention and control measures in health care facilities.

The reasons for the increase in the number of primary community cases, as well as the infection route, remain unknown. Three quarters of all primary community cases have been male, the majority of whom have been over 50 years old. Secondary transmission in the community and households is much lower than in health care settings.

Some confirmed cases presented with mild or no symptoms.

Based on the current situation and available information, WHO encourages all Member States to continue their surveillance for severe acute respiratory infections and to carefully review unusual patterns.

WHO does not advise special screening at points of entry with regard to this event nor does it currently recommend the application of any travel or trade restrictions, including for upcoming pilgrimage travel to Saudi Arabia.

### **Related links**

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