

PRESS RELEASE

MERS Daily Report (Sept. 19)

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◇ To strengthen the rapid and transparent sharing of information, the Korea Centers for Disease Control Central Incident Management System (KCDC Central IMS) will regularly release a daily report (once per day) on situation and operations updates in MERS control and prevention measures.

I. Operations Status (As of 12:00, Sept. 19)

1 Case Overview

○ Confirmed Cases : 0

*The one confirmed case tested negative and was released from the isolation ward on Sept. 18

○ Suspected Cases : All cases tested negative

(Unit: Persons)

Date	Suspected Case			MERS Testing			
	Total	Close Contacts	Casual Contacts	Total	Positive	Negative	Awaiting Results
As of Sept. 18, 18:00	14	1	13	14	0	14	0
As of Sept. 19, 12:00	0	0	0	0	0	0	0
Total	14	1	13	14	0	14	0

2 Close and Casual Contacts

- Close Contacts (Active Surveillance*) : 21 individuals, no change as of yesterday
 - * Active Surveillance: Taking into consideration that these individuals had close contact with the confirmed case, home quarantine and daily monitoring for potential symptoms are being conducted.
 - Seoul (10), Incheon (5), Gyeonggi (3), Daejeon (1), Busan (1), Gwangju (1)
- Casual Contacts (Active Monitoring*) : 396 individuals, no change as of 18:00 yesterday
 - * Active Monitoring: Taking into consideration that these individuals had low levels of contact with the confirmed case, daily monitoring for potential symptoms is being conducted.
 - * Casual contacts with unconfirmed whereabouts : 0 (all foreign nationals accounted for)
 - Casual contacts from same plane: 311; Other casual contacts: 85

II. Message to the Public

- KCDC announced that it is collaborating closely with the Seoul Metropolitan Government and other local governments to conduct thorough contact tracing and management of the situation to prevent further spread of the disease.
 - KCDC would like to express its appreciation to the close and casual contacts of the confirmed case for their active cooperation. During the remaining duration of the monitoring period, contacts are asked to continue cooperating with monitoring procedures. Individuals who experience any MERS-related symptoms (fever, cough, shortness of breath) are advised not to visit hospitals directly*; instead, they should report their symptoms to the KCDC 1339 Call Center or their local public health center and follow their instructions.
 - * There is a risk of infecting other individuals by visiting hospitals and emergency rooms.
 - Healthcare providers are advised to check the travel history of incoming patients with respiratory symptoms to see if they have recently traveled to the Middle East. The travel history of Korean nationals can be checked through the Drug Usage Review (DUR) system, while that of foreign nationals can be checked through direct questioning. Healthcare providers should report any patients suspected of MERS-CoV infection to local public health centers or call the KCDC Call Center at 1339.
 - When visiting the Middle East, individuals are advised to maintain proper personal hygiene, such as washing hands frequently, and to avoid visits to local farms, contact with camels, consumption of raw camel meat or camel milk, and unnecessary visits to local medical facilities.
 - Individuals are asked to cooperate with quarantine procedures, such as honestly completing health status questionnaires at the time of entry.
- * Additional information on the current situation will be provided upon further epidemiological investigation to ensure rapid, accurate, and transparent communication with the public.*

1 Close Contacts

- Taking into consideration that close contacts had high levels of contact with the confirmed case, they are undergoing quarantine and daily monitoring for symptoms
- (Active Surveillance) During the monitoring period, close contacts are contacted twice per day by a local government representative to check for fever or respiratory symptoms
- (Home quarantine or quarantine at a facility) During the monitoring period, close contacts are quarantined to restrict movement and prevent contact with others while symptoms are monitored

2 Casual Contacts

- Taking into consideration that casual contacts had low levels of contact with the confirmed case, they are undergoing daily monitoring for symptoms
- (Active Monitoring) Although passive surveillance* is the standard procedure for casual contacts, active monitoring is being implemented in order to strengthen prevention and control measures. As part of active monitoring, a local government representative contacts casual contacts by phone once per day during the monitoring period to check for fever or respiratory symptoms
- * Passive surveillance: casual contacts are informed to contact their local public health center representative if they experience fever or respiratory symptoms during the monitoring period

3 Suspected Cases

- Individuals under monitoring who experience fever or respiratory symptoms and meet the criteria are classified as suspected cases and undergo further testing
- (Quarantine and Testing) Suspected cases are quarantined and samples are taken for MERS confirmation testing
 - * Should tests return negative, individuals return to standard monitoring procedures according to their contact classification (i.e., close or casual)

Appendix 2

Middle East Respiratory Syndrome (MERS) Overview

	Details
Cases and Outbreaks	<ul style="list-style-type: none"> ▫ MERS cases have been identified in the Middle East around the Arabian Peninsula, with approximately 2,229 confirmed cases around the world from 2012 to June 30, 2018 (according to WHO) ▫ Since January 2018, there have been 116 confirmed MERS cases (as of September 8, 2018) in the Middle East (114 in Saudi Arabia*, 1 in UAE, 1 in Oman) * One case was infected in Saudi Arabia and imported the virus to the UK
Pathogen	▫ Middle East Respiratory Syndrome coronavirus ; MERS-CoV
Mode of Transmission	▫ Although the mode of transmission is uncertain, animal-to-human transmission has been observed through contact with infected camels and consumption of camel meat and milk, and limited direct and indirect human-to-human transmission has been observed through droplet infection following close contact with infected individuals
Incubation Period	▫ Approximately 2-14 days
Symptoms and Clinical Course	<ul style="list-style-type: none"> ▫ MERS patients usually experience fever, cough, sputum, shortness of breath, and other respiratory symptoms. They may also suffer from diarrhea, vomiting, and other gastrointestinal symptoms. ▫ Many patients have low lymphocyte or platelet counts ▫ Case Fatality Rate: The prognosis for those with pre-existing conditions or weakened immune systems is rather poor, with a fatality rate of approximately 30%
Diagnosis	▫ Routing confirmation is conducted by RT-PCR testing of unique sequences of viral RNA; confirmation by nucleic sequencing can be conducted when necessary
Treatment	▫ There is no cure for MERS, but individuals can be treated for their symptoms
Case Management	<ul style="list-style-type: none"> ▫ Cases: Quarantine of suspected or confirmed cases ▫ Close Contacts: Passive surveillance of contacts of suspected cases, quarantine and active surveillance of contacts of confirmed cases
Prevention	<ul style="list-style-type: none"> ▫ Hand washing, cough etiquette, and maintaining proper personal hygiene ▫ For travelers to the Middle East <ul style="list-style-type: none"> - Avoid contact with camels and crowded areas; wear a mask if you experience respiratory symptoms; avoid contact with those who have respiratory symptoms



Korea Centers for Disease
Control & Prevention



MERS Fact Sheet

What is MERS?

▲ MERS



MERS is **an acute respiratory disease**
caused by a new Coronavirus(MERS-CoV)

▲ Symptoms



Fever



Cough



Shortness
of breath



Sore throat



Vomiting/
Diarrhea

▲ Incubation Period

Approximately **2 to 14 days**

Who are possible suspected MERS cases?

1. Those experiencing fever and respiratory symptoms
(cough, shortness of breath, etc.) and:
 - Have traveled to the **Middle East*** within 14 days from the onset of symptoms
 - Have had close contact with a symptomatic suspected MERS case
2. Those experiencing fever and respiratory symptoms
(cough, shortness of breath, etc.) and also had close contact
with a symptomatic confirmed MERS case

* The Arabian Peninsula and nearby countries (regions): Bahrain, Iraq, Iran, Israel, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, Syria, UAE, Yemen

Infection Route

(In Korea) contact with confirmed MERS case
(Outside Korea) contact with infected camels,
consumption of camel meat or camel milk,
or contact with confirmed MERS case

General Response Protocol

If you experience any MERS-like
symptoms (fever, cough, etc.) please
call the KCDC Call Center at **1339**



Preventing MERS Infection

In Korea

How to Prevent



Check MERS related
information on the
KCDC website at cdc.go.kr



Should you experience
symptoms and suspect MERS
infection, report to the
KCDC 1339 Call Center or
your local public health center



Maintain proper personal
hygiene (frequent hand washing
and covering your mouth
and nose with your sleeves
when coughing)

If MERS Infection is Suspected



If you experience fever and
respiratory symptoms within
14 days of traveling to the
Middle East, report to the
KCDC 1339 Call Center or your
local public health center



If you do not experience
any symptoms, feel free to carry
out your daily activities as usual

Outside Korea (the Middle East)

Prevention guidelines when traveling to the Middle East



When traveling to the Middle East,
avoid visiting local farms,
direct contact with camels,
and consumption of
raw camel meat or milk



Avoid direct contact
with anyone showing
MERS-like symptoms,
such as cough or fever



Avoid visiting crowded areas and
local healthcare facilities unless
absolutely necessary
(if you must visit, wear a mask)



Maintain proper personal
hygiene (frequent
hand washing, covering your
mouth and nose with your
sleeves when coughing, etc.)



When entering Korea after traveling
to the Middle East, submit the provided health questionnaire.
If you experience symptoms within 14 days
after returning home, call the KCDC Call Center
at 1339 or your local public health center

Appendix 4

Steps to Prevent MERS

Before Traveling

- * Confirm the local MERS risk status of your destination
 - ※ Visit the KCDC website for more information (cdc.go.kr)
- * Young children, those 65 years and older, pregnant women, cancer patients, and other individuals with weakened immune systems should be advised not to travel to such areas

While Traveling

- * Maintain proper personal hygiene and wash your hands frequently
- * Avoid visiting local farms or contact with animals (especially camels)
- * Do not consume raw camel meat or milk
- * Do not visit local healthcare facilities or heavily crowded areas unless absolutely necessary (if you must, wear a mask)
- * Avoid contact with individuals who have fever or respiratory symptoms
- * Wear a mask if you experience any respiratory symptoms
- * Cover your mouth and nose with your sleeve when coughing or sneezing

After Traveling

- * If you have any MERS-related symptoms at the time of arrival in ROK, report to a quarantine officer immediately after disembarking the plane
- * If you experience any MERS-related symptoms (fever, cough, shortness of breath) call the KCDC 1339 Call Center or your local public health center first before visiting a healthcare facility