



2019-nCoV

Daily updates on the emerging novel coronavirus from the Johns Hopkins Center for Health Security.

The Center for Health Security will be analyzing and providing updates on the emerging novel coronavirus. If you would like to receive these daily updates, please [sign up here](#) and select "2019-nCoV."

Additional resources are now available on our [website](#) .

January 24, 2020 - Afternoon Update

EPI UPDATES Official updates from China's National Health Commission are not expected until tomorrow morning. The Johns Hopkins University Center for Systems Science and Engineering is maintaining a [dashboard to monitor the outbreak](#) in near-real-time, and its latest estimate is 939 confirmed cases and 26 deaths (as of 3:28pm EST/UTC -5). This estimate is based on a compilation of data across a [variety of official and unofficial sources](#) . We will provide updated official figures in our next update.

The US CDC confirmed the [second travel-related case](#) of 2019-nCoV in the US. The patient is a woman in Chicago who recently returned from Wuhan. The case investigation is underway, but preliminary findings indicate that she had limited contacts outside her home.

There are multiple [media reports](#) that France has confirmed the country's first 2 cases of 2019-nCoV, one in Bordeaux and one near Paris. We have not yet identified an official source, but the statement has been attributed to France's Minister of Solidarity and Health, Dr. Agnès Buzyn. These 2 cases come on the heels of a report of a woman who managed to [evade fever screening](#) entering France and then posted about it on social media, prompting involvement by the Chinese embassy in France.

WUHAN UPDATES The Hubei Provincial Health Commission announced that [40 military clinicians](#) from the military hospital in Wuhan are being deployed to the Wuhan Pulmonary Hospital to support the civilian outbreak response. In addition to the existing

travel and transportation restrictions, the Wuhan New Pneumonia Prevention and Control Command announced that the “river crossing tunnel” is [closed as of midnight](#) on January 24, and that fever screening would be implemented at bridge crossings and the “third ring road.” Additionally, normal operations for the [city’s taxi service have been suspended](#) , and [6,000 taxis](#) have been allocated to provide limited but free transportation services, including food and medicine delivery, in the central area of the city. Several [charity organizations](#) , including the local Red Cross Society, are coordinating the [collection and distribution of donations](#) .

LABORATORY TESTING BARRIERS The [Beijing News](#) is reporting that there are some delays and limitations for diagnostic testing for 2019-nCoV infection due to the availability of testing kits and requirements for their use. According to the article, a number of companies have developed nucleic acid testing kits for the virus, but some are not yet approved for use.

ECONOMIC IMPLICATIONS The value of the [Chinese yuan fell slightly](#) against the dollar Friday, as the ongoing epidemic threatens consumer spending and travel ahead of the Lunar New Year. The relative value of the Chinese Yuan fell approximately 1% over the course of the week.

SCIENTIFIC PUBLICATIONS Several studies were recently published in *The Lancet* . The [first study](#) , conducted by faculty at the University of Hong Kong and the University of Hong Kong-Shenzhen Hospital, describes the “epidemiological, clinical, laboratory, radiological, and microbiological findings of five patients in a family cluster who presented with unexplained pneumonia after returning to Shenzhen, Guangdong province, China, after a visit to Wuhan, and an additional family member who did not travel to Wuhan.” The article outlines exposure history and, crucially, identifies characteristics of the isolates that are consistent with human-to-human transmission of 2019-nCoV.

The [second article](#) described the clinical features of the disease associated with 2019-nCoV. The study evaluated an early cohort of 41 confirmed cases admitted to Jin Yin-tan Hospital, including clinical charts and notes, laboratory test results, and chest x-rays for each patient. The patients had symptoms onset between December 1, 2019 and January 1, 2020. Among these patients, 66% had direct exposure to the Huanan seafood market, with similar rates of exposure between ICU and non-ICU patients. The most common symptoms were fever (98%), cough (76%), and “myalgia or fatigue” (44%). At the time of the study (January 22, 2020), 28 of the patients had been discharged, 7 remained in the hospital, and 6 had died (including 1 patient not admitted to the ICU). The requirement for discharge was an afebrile period of 10 days with associated improvements of chest x-rays and viral clearance from upper respiratory tract specimens.

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