MOHW & KCDC JOINT PRESS RELEASE Sept. 18, 2018

Confirmed MERS Case Tested Negative

- Two tests returned negative, Patient released from isolation ward -

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- The confirmed MERS patient underwent two rounds of confirmation testing after no longer showing MERS-related symptoms, and both results returned negative. The patient was then released from the isolation ward to the general ward.
- Second confirmation testing for close contacts will be conducted on September 20th
 - * If test results return negative, close contacts will be released from quarantine on September 22nd at 00:00, following the end of the 14-day monitoring period (All close contacts tested negative after the first test on September 13th)
- The Korean government will continue efforts to prevent the additional spread of MERS
- The Ministry of Health and Welfare (MOHW) announced that the results from the first and second confirmation test for the MERS confirmed case have returned negative.
 - After testing positive for MERS on September 8th, the patient was admitted to the negative pressure isolation ward at Seoul National University Hospital for treatment and has recently stopped showing MERS-related symptoms.
 - In accordance with MERS response guidelines*, the patient underwent confirmation testing on September 16th and 17th, with both results returning negative.
 - * 48 hours after a confirmed MERS patient's symptoms disappear, PCR testing of sputum samples is conducted twice in 24-hour intervals, and, if the results return negative, the patient is released from isolation
- The patient was released from isolation on September 18th and moved to the general ward for further care, as necessary.

- □ All 21 close contacts currently under quarantine will undergo a second confirmation test* on September 20th. If results return negative, they will be released from quarantine at the end of the 14-day monitoring period (September 22nd, 00:00).
 - * The first test was conducted on September 13th, with all contacts testing negative
- Active monitoring of all 399 casual contacts (as of September 18, 18:00) will end at the same time.
- According to KCDC analysis of specimens collected from the confirmed case showed that the virus is similar to the Hu Riyadh-KSA -9730 2017; MG912608 virus, and further analysis will be conducted to identify any mutations.
- Should the second test results of close contacts return negative, KCDC will hold another risk assessment meeting and update the infectious disease risk alert level accordingly.
- The Korean government announced that it will provide compensation to the confirmed patient and close contacts for fees incurred (hospital fees, living expenses, mental health counseling) as a result of cooperating with MERS preventive measures.
 - The patient's hospital fees will be covered, and living expense compensation for patients and close contacts will be provided through emergency living funds as they were following the 2015 MERS outbreak.
 - * (2018, Unit: KRW) Single-person household 430,000, Two-person household 740,000, Three-person household 950,000, Four-person household 1,170,000, Five-person household 1,390,000
 - * Individuals who receive paid leave under the Infectious Disease Prevention Act in addition to the 15 days of paid leave provided in accordance with Article 60 of the Labor Standards Act are not eligible for living expense compensation.

- Psychological counseling will be provided to close contacts and their families, as necessary, through the National Trauma Center and local mental health clinics.
 - Also, the government will compensate employers of those who were hospitalized or quarantined with paid leave.
 - * Daily wage (max. 130,000 KRW/day) x Days quarantined
- MOHW and KCDC appreciate the understanding, patience, and cooperation of the 21 close contacts and the 399 casual contacts in quarantine measures and other steps taken to control the spread of MERS, as well as the efforts of healthcare professionals.
 - MOHW and KCDC also announced that it will continue its efforts in preventing additional spread of MERS, and will review and assess all measures taken following this imported case to identify and improve upon any gaps in the MERS prevention, control, and response system.
- MOHW and 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-like 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.

Appendix 1

Middle East Respiratory Syndrome (MERS) Overview

	Details
Cases and Outbreaks	 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	^a 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	 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	□ Cases: Isolation of suspected or confirmed cases □ Close Contacts: Passive surveillance of contacts of suspected cases, isolation and active surveillance of contacts of confirmed cases
Prevention	 Hand washing, cough etiquette, and maintaining proper personal hygiene For travelers to the Middle East Avoid contact with camels and crowded areas; wear a mask if you experience respiratory symptoms; avoid contact with those who have respiratory symptoms

Appendix 2

MERS Educational Content (English & Arabic)





MERS Fact Sheet

What is MERS?



▲ Symptoms









Shortness Sore throat of breath

Vomiting/ Diarrhea

▲ Incubation Period

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

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
 - 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

General Response Protocol

(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

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

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



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



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

Published on Sept. 10th 2018



إذا كان لديكم حمى وأعراض تنفسية، نرجو منكم الاتصال برقم 1339 الخاص بمركز الاتصالات التابع لهيئة السيطرة الكورية على الأمراض والوقاية منها، قبل أن تزوروا أي مستشفى أو عيادة طبية، حتى يتم منع انتشار المزيد من العدوى.

발열과 호흡기 증상이 있다면 감염 전파 방지를 위해 의료기관 방문 전에 질병관리본부 콜센터 **국 반없이 1339**로 전화하세요



كل ما تحتاج لمعرفته حول فيروس ميرس 메르스 바로 암기

구토 설사

ما هو ميرسي؟ ?ا

هو الأمراض التنفسية الحادة التي يسببها فيروس كورونا الجديد (MERS-COV).

신축 코로나바이러스(MERS-COV)에 의한



급성호흡기 질환을 말합니다.

이후퇴

ি العلامات والأعراض عِنهِ يه به هِ















88.02 기침

전복기 فترة الكمون 이부기

من يومين إلى 14 يوما (تقريبا) 정도로 추정 من يومين إلى 14 يوما

ما الذي يجب الالتزام به من أجل الوقاية من الإصابة بميرس؟ 감염 예방 수칙



반면

اغسلوا أيديكم بالماء والصابون. 물과 비누로 자주 손씻기



حافظوا على النظافة الشخصية الجيدة (لا تلمسوا أعينكم أو أنوفكم أو أفوا هكم قبل غسل أيديكم).

개인 위생 철저 (씻지 않은 손으로 눈, 코, 입 만지지 않기)



عندما تسعلون أو تعطسون، تأكدوا من تغطية أفواهكم وأنوفكم بمنديل ورقى



기침, 재채기 시 휴지로 입과 코를 가리고, 휴지는 반드시 쓰레기통에 버리기



تجنبوا الاتصال المباشر مع الناس الذين لديهم حمى أو أعراض تنفسية. 발열이나 호흡기 중상이 있는 사람과 접촉을 피하기



تجنبوا الاتصال المباشر مع الجمال في أثناء السفر إلى دول الشرق الأوسط. 중동 지역을 여행하는 동안 낙타와 접촉을 피할 것



- الاتصال بجمل ١١٥٥ الاتصال
- শ্ব प्रसास প্রক। الابل الخام अप्राप्त विक्र
- الاتصال المباشر مع مريض مصاب بميرس أو القرب منه 메르스 환자와 직접 또는 긴밀한 접촉

من يجب عليه الإبلاغ؟ ٢٩ ٢٩ ٢٩

আৰু এপ্ৰশ্নমন্ত? १بصابته بميرس؟ (আৰু এপ্ৰশ্নমন্ত

1) من بين أولنك الذين لديهم حمى وأعراض تنفسية (السعال وضيق التنفس والالتهاب الرئوي ومتلازمة ضيق التنفس الحادة وغيرها)

발열과 호흡기중생기침, 호흡곤란, 폐렴, 급성호흡곤란증후군 등)이 있으면서

- -الشخص الذي زار دول الشرق الأوسط* في غضون 14 يوما قبل ظهور الأعراض 증상이 나타나기 전 14일 이내에 중동지역*을 방문한 자
 - الشخص الذي اتصل اتصالا قريبا مع مريض مشكوك بإصابته بميرس في أثناء إظهاره أعراض ميرس

메르스 의심환자가 증상이 있는 동안 밀접하게 접촉한 자

2) من بين أولنك الذين لديهم حمى و أعراض تنفسية (السعال وضيق التنفس وغيرها)، الشخص الذي اتصل اتصالا قريبا بمريض تم التأكد من إصابته بميرس في أثناء إظهاره أعراض ميرس

> 발열 또는 호흡기증상(기침, 호흡곤란 등)이 있고, 메르스 확진환자가 중상이 있는 동안 밀접하게 접촉한 자

* شبه الجزيرة العربية والدول (المناطق) المجاورة لها: البحرين، العراق، إبران، إسرائيل، الأردن، الكويت، لبنان، عمان، قطر، السعودية، سوريا، الإمارات، اليمن (السعودية والإمارات وعُمان وقطر والكويت هي الدول التي تفشي فيها فيروس ميرس في عام 2016 ، وتمثل المناطق الملوثة بالأمراض المعدية الخاصة با لحجر الصحى. ويجب على زوار هذه الدول أن يملؤوا بيانات عن الحالة الصحية عند دخول كوريا ويتقدموا بها إلى موظفى الحجر الصحى)

아라바인반도 및 그 인근 국가지역(바레인 이라크, 이란, 이스라엘 요르던 쿠웨이트, 레바논, 오만 카타르, 사우디아라비아, 시리아, 아랍에이리트, 예엔

2016년 메르스 발생국가인 사우디아라비아, 아랍에미리트, 오만 카타로, 쿠웨이트는 감약감염병 오염지역으로 입국 시 반드시 건강상태 질문서를 작성하여 검역관에게 제출해야 함)