

# MERS Daily Report (Sept. 13)

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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. 13)

### 1 Case Overview

#### ○ 1 Confirmed Case

Name	Sex	Age	Isolation Facility	Date of Confirmation
ㅇㅇㅇ	M	61	Seoul National University Hospital	9.8.

- Suspected Case Reports and Testing Status : No additional reports; all cases tested negative

(Unit: Persons)

Date	Suspected Case			MERS Testing			
	Total	Close Contacts	Casual Contacts	Total	Positive	Negative	Awaiting Results
As of 18:00, Sept. 12	11	1	10	11	0	11	0
As of 12:00, Sept. 13	0	0	0	0	0	0	0
Total	11	1	10	11	0	11	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, self-isolation and daily monitoring for potential symptoms are being conducted.
- Seoul (10), Incheon (7), Gyeonggi (2), Busan (1), Gwangju (1)

- Casual Contacts (Active Monitoring\*) : 431 individuals, an increase of 3 from 18:00 yesterday (+3, 428→431)
  - \* 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 : 4 foreign nationals (tracking underway in collaboration with the National Police Agency and the Ministry of Foreign Affairs)
- Casual contacts from same plane increased by 2 (+2, 343→345)\*, and other casual contacts increased by 1 (+1, 85→86)\*\*
- \* Numbers were adjusted to include two individuals who subsequently sat in the same and adjacent seat on the same airplane during the next flight
- \*\* Numbers were adjusted to include customers who subsequently rode in the same taxi that the confirmed case had taken

## II. Measures Taken

- MERS Confirmation Test Conducted on All Close Contacts
  - After the average incubation period (6 days) has passed, MERS confirmation testing was conducted for strict monitoring of close contacts
    - \* Test results will be available tomorrow
  - Confirmation tests are scheduled for Sept. 13th and Sept. 20th, the sixth (average incubation period) and thirteenth (before the end of the incubation period) day after suspected exposure, respectively
- Team of KCDC epidemiological officers and private experts dispatched to Kuwait (Sept. 13th)
  - A team of 2 KCDC epidemiological officers and 1 private expert was dispatched to Kuwait to conduct investigations on the health status and management of on-site contacts of the confirmed case and to gather local epidemiological information
- Number of foreign nationals with unconfirmed whereabouts down to 4; number of taxi customers increased by 1 (successfully contacted)
  - 23 of the 27 casual contacts of foreign nationality whose whereabouts had not been confirmed as of Sept. 12 have now been confirmed (-23, 27→4). 4 individuals remain unconfirmed.
  - Records showed that the taxi taken by the confirmed case made 24 other stops, and 1 additional passenger was confirmed (+1, 27→28 total passengers). All passengers have been identified and contacted, and none of them show any symptoms.

- \* 27 individuals are being managed as casual contacts (the remaining 1 individual is abroad and is undergoing constant monitoring)

### III. 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.
- When visiting the Middle East, the general public is 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, and to report any symptoms of fever, cough, or shortness of breath within 2 weeks after returning home. Should individuals experience such symptoms, they are advised to call the KCDC Call Center at 1339 or local public health centers to report their symptoms before visiting hospitals.
- Healthcare providers should 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 interviews. Healthcare providers should report any patients suspected of MERS-CoV infection to local public health centers or call the KCDC Call Center at 1339.

*\* 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 isolation and daily monitoring for symptoms
- (Active Surveillance) During the incubation period, close contacts are contacted twice per day by a local government representative to check for fever or respiratory symptoms
- (Self-isolation or Isolation at a Facility) During the incubation period, close contacts are isolated 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 incubation period to check for fever or respiratory symptoms
- \* Casual contacts are informed to contact their local public health center representative if they experience fever or respiratory symptoms during the incubation 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
  - (Isolation and Testing) Suspected cases are isolated 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
<b>Cases and Outbreaks</b>	<ul style="list-style-type: none"> <li>▫ 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)</li> <li>▫ 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)</li> <li>* One case was infected in Saudi Arabia and imported the virus to the UK</li> </ul>
<b>Pathogen</b>	▫ Middle East Respiratory Syndrome coronavirus ; MERS-CoV
<b>Mode of Transmission</b>	▫ 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
<b>Incubation Period</b>	▫ Approximately 2-14 days
<b>Symptoms and Clinical Course</b>	<ul style="list-style-type: none"> <li>▫ 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.</li> <li>▫ Many patients have low lymphocyte or platelet counts</li> <li>▫ 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%</li> </ul>
<b>Diagnosis</b>	▫ Routing confirmation is conducted by RT-PCR testing of unique sequences of viral RNA; confirmation by nucleic sequencing can be conducted when necessary
<b>Treatment</b>	▫ There is no cure for MERS, but individuals can be treated for their symptoms
<b>Case Management</b>	<ul style="list-style-type: none"> <li>▫ Cases: Isolation of suspected or confirmed cases</li> <li>▫ Close Contacts: Passive surveillance of contacts of suspected cases, isolation and active surveillance of contacts of confirmed cases</li> </ul>
<b>Prevention</b>	<ul style="list-style-type: none"> <li>▫ Hand washing, cough etiquette, and maintaining proper personal hygiene</li> <li>▫ For travelers to the Middle East <ul style="list-style-type: none"> <li>- Avoid contact with camels and crowded areas; wear a mask if you experience respiratory symptoms; avoid contact with those who have respiratory symptoms</li> </ul> </li> </ul>



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](http://cdc.go.kr)

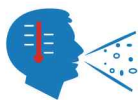


Should you experience  
symptoms and suspect MERS  
infection, report to the  
KCDC 1339 Call Center or  
your local public health center



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

## 2018 MERS Report Sources

- Reports of Suspected Domestic Cases (as of 12:00 on Sept. 12)

(Units : Cases, Persons)

Type	Number	Source			
		1339/ Public Health Center	Healthcare Facility	Quarantine Station	Other (119, 112 )
Suspected Case Report	1,079	840	164	68	7
Suspected Case	201*	109	77	15	0

\* Of the suspected cases, 11 had contact with the confirmed case