# Chinese Notifiable Infectious Diseases Surveillance Report

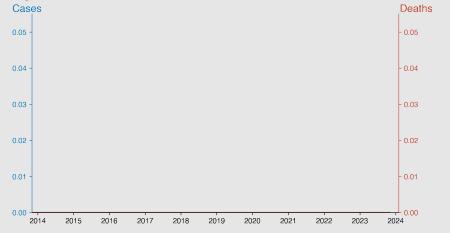
#### SARS-CoV

November 2023

#### Introduction

Severe Acute Respiratory Syndrome Coronavirus (SARS-CoV) is a respiratory virus that first emerged in Guangdong Province, China, in 2002. It belongs to the family Coronaviridae and the species SARS-CoV. SARS-CoV is highly contagious and primarily spreads through respiratory droplets. The infection can lead to a severe and potentially fatal respiratory disease known as SARS. Symptoms typically include fever, cough, and difficulty breathing. Outbreaks of the virus occurred in 2002-2003, with significant episodes in China and Canada, affecting over 8000 people worldwide with a mortality rate of around 10%.

#### Temporal Trend



### **Highlights**

- No reported cases or deaths from SARS-CoV in Chinese mainland from November 2013 to November 2023, indicating a lack of virus activity.
- The sustained absence of SARS-CoV suggests very effective control measures or the virus's eradication in China.
- Persistent surveillance remains crucial to detect any potential reintroduction of SARS-CoV or related pathogens.
- The data implies successful mitigation of the virus since the early 2000s outbreaks.

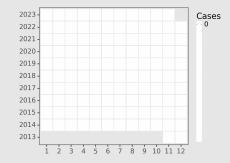
## **Cases Analysis**

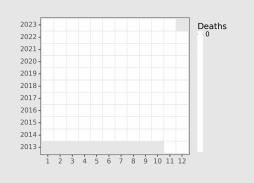
From November 2013 to November 2023, the reported data for SARS-CoV (Severe Acute Respiratory Syndrome Coronavirus) in the Chinese mainland shows consistently zero cases. The absence of any reported cases over a decade suggests effective containment and elimination after the initial outbreak in 2002-2003. This data may reflect stringent public health measures, successful surveillance and intervention strategies, and/or limitations in reporting. Continuous vigilance is necessary to prevent reintroductions and manage possible zoonotic reservoirs.

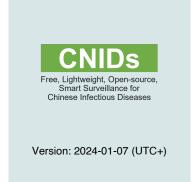
## **Deaths Analysis**

The reported death toll for SARS-CoV in the Chinese mainland remains at zero for the period from November 2013 to November 2023. This indicates no known fatalities associated with the virus since well before the provided data timeframe. It signifies a successful response post the SARS epidemic of 2002-2003 that likely included post-outbreak infection control practices, public health preparedness, and perhaps no re-emergence of the virus. The surveillance systems might have been kept on high alert to respond effectively to any potential re-emergence of the disease.

#### **Distribution**







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