WHO GHANA MEDIA ADVISORY NOTE

Novel coronavirus (2019-nCoV) outbreak

10 February 2020

I  BACKGROUND

Coronaviruses are a family of viruses that infect both animals and humans. Human coronaviruses can cause mild disease like a common cold, while others cause more severe disease (such as MERS - Middle East Respiratory Syndrome and SARS – Severe Acute Respiratory Syndrome). Some coronaviruses that are found in animals can infect humans – these are known as zoonotic diseases.

Human coronaviruses are usually spread through droplets (coughing) and close personal unprotected contact with an infected person (touching, shaking hands).

On 31 December 2019, WHO was alerted to several cases of pneumonia in Wuhan City, Hubei Province of China. The virus did not match any other known virus. This raised concern because when a virus is new, how it affects people may not be well known.

One week later, on 7 January 2020, Chinese authorities confirmed that they had identified a new virus. The new virus is a coronavirus, which is a family of viruses that are known to cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). This new virus was temporarily named “2019-nCoV.”

Key Updates:

1. WHO believes that it is still possible to interrupt virus spread, provided that countries put in place strong measures to detect disease early, isolate and treat cases, trace contacts, and promote social distancing measures commensurate with the risk.

2. So far, 99% of cases are in China. Most of the cases in other countries have direct links to Wuhan or other parts of China.
4. WHO is working 24/7 with networks of scientists, clinicians, disease trackers, governments, supply chain experts and partners from the public and private sector to coordinate the 2019-nCoV response, in various technical fields, including:

- **Vaccines**: working with networks of experts to accelerate research on possible treatments and vaccines for this virus, including clinical trials as soon as possible;

- **Clinical management**: conducting regular briefings with clinical experts currently treating patients infected with 2019-nCoV acute respiratory disease to share case information and standardize data collection.

5. WHO recommends the use of masks for people who show symptoms of the 2019-nCoV acute respiratory disease, in order to protect others from the risk of getting infected. The use of masks is also crucial for health workers and people who are taking care of someone in close settings (at home or in a health care facility).

However, wearing using a mask alone is not guaranteed to stop infections and should be combined with measures, such as hand hygiene.

Wearing medical masks when not indicated can create a false sense of security that can lead to neglecting other essential measures, such as hand hygiene practices. In certain circumstances masks can also be hard to obtain and costly for many people.

**WHO recommendations are for masks to be used by:**

- People with respiratory symptoms, e.g. cough or difficulty breathing. Including when seeking medical attention;

- People providing care to individuals with respiratory symptoms;

- Health workers, when entering a room with patients or treating an individual with respiratory symptoms.

A medical mask is not required for members of the general public who do not have respiratory symptoms, as no evidence is available on its usefulness to protect non-sick persons. However, masks might be worn in some countries according to local cultural
habits. If masks are used, best practices should be followed on how to wear, remove, and dispose of them and on hand hygiene action after removal.


Situation/epidemiology

• China: 40,171 confirmed cases, including 6,484 severe cases and 908 deaths, see @WHO-WHO on Twitter for latest updates on China.

• Outside of China: 270 confirmed cases in 24 countries, 1 death (Philippines)

• More than 99% of cases are in China and 75% in China are from Hubei province.

• Mode of transmission: The main driver of transmission, based on currently available data, is people who have symptoms. WHO is aware of possible transmission of 2019-nCoV from infected people before they developed symptoms. Detailed exposure histories are being taken to better understand the pre-symptomatic phase of infection and how transmission may have occurred in these few instances. Transmission from an asymptomatic person is very rare with other coronaviruses, as we have seen with Middle East Respiratory Syndrome coronavirus (MERS-CoV). Persons who are symptomatic spread viruses more readily through coughing and sneezing.

• Source: Based on current information, an animal source seems the most likely primary source of this outbreak. Detailed investigations are ongoing to determine it. WHO’s guidance to countries and individuals remains the same: people could become infected through contact with animals, contaminated food or from close contact with an infected person.

• Severity: Current information suggests that the virus can cause mild, flu-like symptoms as well as more severe disease. Patients have a range of symptoms. Most seem to have mild disease, and about 14% appear to progress to severe disease, including pneumonia, respiratory failure and in some cases death. Fatal cases seem so far to be strongly associated with age. Chinese authorities report that about 2% of people with the disease have died, although the exact case-fatality ratio is still difficult to assess as the denominator (or number of infections) remains unknown. It may be lower. This is a new
disease and our understanding is changing rapidly. We will continue to analyse information on both current and any new cases, as this is critical to enhancing our understanding of severity.

• **Incubation period:** Current estimates of the incubation period range from 1-12.5 days with median estimates of 5-6 days. These estimates will be refined as more data become available. Based on information from other coronavirus diseases, such as MERS and SARS, the incubation period of 2019-nCoV could be up to 14 days. Therefore, WHO recommends that the follow-up of contacts of confirmed cases is 14 days. (note: the incubation period is the time between infection and the onset of clinical symptoms of the disease)

**WHO’s role**

Since 2 January, the three levels of WHO (China country office, Regional Office for the Western Pacific and headquarters) have been working together to respond to this outbreak. And now, all WHO regional and country offices are engaged. We are bringing together resources from across the Organization to deliver the following:

• **Increasing understanding of the disease:** WHO is constantly analysing data as we receive it and working closely with global experts on a range of topics. WHO is proposing specific studies to better understand transmission, risk factors, and source of the infection. Some of these studies are already underway.

• Providing advice (which we are continuously updating, as we learn more):

  o WHO has provided advice to countries on how to identify people sick with the virus, how to care for them, and how to prevent spread. www.who.int/health-topics/coronavirus

  o WHO has issued advice for individuals on how to protect themselves and others, including on the safe home care for patients with suspected 2019-nCoV infection. The advice includes protecting others from coughs and sneezes, hand cleaning, food safety and best practices at markets. www.who.int/health-topics/coronavirus
WHO has issued advice on travel and for international traffic in relation to the outbreak of the novel coronavirus 2019-nCoV. www.who.int/ith/2019-nCoV_advice_for_international_traffic

- Keeping countries and the general public informed: WHO has been in regular and direct contact with Chinese authorities as well as authorities in other countries since the outbreak began. WHO is also informing other countries about the situation and providing support as requested. WHO is also informing the public through daily situation reports and dashboards displaying real-time data:
  - WHO Health Emergency dashboard
  - WHO 2019-nCoV situation dashboard
  - WHO 2019-nCoV alerts in African region
  - WHO current outbreaks in the Eastern Mediterranean region
  - PAHO 2019-nCoV alerts in the Americas

- Coordinating with partners: WHO is working with our networks of researchers and other experts to coordinate global work on surveillance, epidemiology, modelling, diagnostics, clinical care and treatment, and other ways to identify, manage the disease and limit onward transmission. Examples:
  - Activation of the Pandemic Supply Chain Network, which connects public and private sector organizations working on emergency supplies to ensure these supplies reach the countries and people who need them.
  - Efforts to ensure laboratories across the globe have the supplies they need to quickly test cases so people and health workers can get results quickly and know what to do.
  - Guidance to hospitals in who to test and where the person should be while waiting for test results.
  - Trials underway to see what treatment works best.
• **Helping countries prepare**: WHO is working closely with countries to help them prepare for the rapid detection and response to cases or clusters. The Strategic Preparedness and Response plan (SPRP) outlines the support the international community can provide to all countries to prepare and respond to the virus.

**Supplies**

- WHO developed a 2019-nCoV kit, similar to treatment kits used for cholera, Ebola or other high threat pathogens in emergencies.
- We updated the Disease Commodity Package. This document provides guidance on commodities required for all aspects of response.
- Guidance is currently being developed for managing the logistics associated with case management, focusing on isolation, triage and standard treatment center configuration.
- We are setting up a global supply chain system and a coordination mechanism between responders and suppliers to ensure access to essential commodities for countries/populations most in need.

• WHO manages different expert networks, such as clinical management and laboratory networks:

  - 15 laboratories from various regions are taking part in the network dedicated to 2019-nCoV to address testing of the virus and samples sharing
  - 40 clinicians are involved in the clinical network, from 15 different countries, to discuss clinical presentation, complications severity of cases and challenges experienced, and treatments used