Severe respiratory disease associated with Middle East respiratory syndrome coronavirus (MERS-CoV)

Eighth update, 6 November 2013

Source and date of request

ECDC internal decision, 6 November 2013.

Public health issue

This eighth update of the rapid risk assessment of the MERS-CoV outbreak is intended to provide expert opinion on the risk for Europe with regards to the probable case of MERS reported by Spain on 5 November.

ECDC internal response team

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Event background

On 6 November 2013, Spain reported a case of MERS-CoV infection in a 61-year-old female with no known chronic conditions. She stayed in Saudi Arabia from 2 October to 1 November 2013, initially in Medina, then in Mecca for the Hajj. No contacts with animals or confirmed cases were reported.

She flew from Jeddah to Madrid on 1 November 2013.

The onset of symptoms was reported as of 15 October 2013 (cough, fever) and she was seen at the emergency ward in Mecca Hospital on 28 and 29 October where pneumonia was diagnosed through chest x-ray.

During the return flight she was symptomatic and required oxygen while in the aircraft. She was taken to a hospital in Madrid, admitted with the diagnosis of pneumonia and isolated as per guidelines. This patient is now in a stable condition.

On 5 November 2013, initial PCR laboratory test for MERS-CoV screening was positive on three different samples. Further tests for case confirmation are pending.

On 6 November, the Spanish authorities implemented contact-tracing activities around family members of the case, healthcare personnel and patients that had been in close contact with the case. Passengers, as well as staff and crew from the airline, that had been in close contact with the case are also being traced. Naso-pharyngeal samples will be collected from them. No residents from other EU/EEA countries appear to be on the list of passengers seated within two rows of the index case.
Epidemiological situation worldwide

As of 7 November 2013, there have been 151 laboratory-confirmed cases of MERS-CoV worldwide, including 64 deaths. All cases have either occurred in the Middle East or have had direct links to a primary case infected in the Middle East.

Saudi Arabia has reported 125 symptomatic and asymptomatic cases including 53 deaths; Jordan two cases, both of whom died; United Arab Emirates five cases, including one fatality; Qatar five cases, including two deaths; and Oman one case.

Thirteen cases have been reported from outside the Middle East: in the UK (4), France (2), Tunisia (3), Germany (2), Italy (1) and Spain (1).

ECDC risk assessment for the EU

This is the 13th case reported outside of the Middle East, the tenth reported in EU/EEA Member States, the first reported in Spain and the first reported in the EU/EEA Member States since May 2013.

This case would correspond to an imported case in the EU, following exposure in Saudi Arabia and being symptomatic during the Hajj. The risk that the EU would see importation of new cases was stressed in the ECDC rapid risk assessment published on 24 September, and therefore, this situation was expected.

The Spanish authorities have implemented tracing activities consistent with WHO and ECDC recommendations. Therefore, the risk for further spread in the EU/EEA countries is considered extremely low.

Conclusions

The first case of MERS-CoV infection reported in Spain should remind EU citizens of the risk for contracting MERS-CoV through exposure while travelling to the Middle East. As indicated in previous risk assessments, such cases are expected to be reported in the EU, and in particular, among pilgrims returning from the Hajj.

EU/EEA Member States are investigating potential cases presenting suggestive symptoms on return from the Middle East. Until this case, all investigations turned out to be negative, but this finding confirms the need to pursue efforts to rapidly investigate possible cases.