

Introduction by Gauden Galea, WHO Country Director regarding Public Health Emergency of International Concern (PHEIC)

Presentation

by Sylvie Briand, Director Infectious Hazards Management Department at World Health Organization

53 people on call

PHEIC is a trigger for action outside China

Main reason:

- . H2H transmission in other countries
- . Countries exceed WHO recommendations
- . Concerns for countries with a weak health system

Why now PHEIC: past week H2H transmission. Countries implement unilateral travel restrictions which exceed evidence based restrictions. No evidence which warrants the travel restrictions.

Committee does not recommend any travel and trade restrictions based on the current information available. Inside China or outside China, no travel restrictions.

State parties who implement travel or trade restrictions, will be asked by WHO for the health reasons for that decision

The rationale will have to be reported to WHO and published

Follows a technical discussion of Corona virus.

What is not known:

- 1) From where comes the virus
- 2) How easily does it spread
- 3) Who is vulnerable to infection

Not known if animal is the source and if so, which animal.

Time line going back to December 12. In total 20.000 people affected, numbers vary by hour.

Exported cases are mainly where direct connections with Wuhan exist, expect more cases in other countries

Number of newly confirmed cases seem to flatten.

Reproduction rate is 2.2 (one person infecting 2.2 people), comparable to other Corona viruses.

Number of severe cases is declining, more mild cases are being discovered, possibly to earlier detection, earlier treatment which has a better outcome.

Case Fatality Rate (CFR) Wuhan Virus 1-2 %, CFR=SARS 10% MERS = 13-30 %

China is conducting household surveys for determining transmission rate of non-symptomatic persons

Containment policy Hubei: control and mitigation of impact
 Other parts of China: stop transmission
 Countries with imported cases: stop transmission
 Other countries: readiness

Handshake can be a way of transmission so hand washing very important, no handshakes in office, try maintain an distance of 1 meter

Effectiveness of masks when not wearing the right way, is low. Don't touch mask.

No need for N95 , surgical masks are sufficient

Cough discipline is important (in elbow or tissue)

Highest risk are:

- 1) Household contact of an infected person
- 2) One confirmed health care worker cluster to date
- 3) Prolonged exposure in closed space
- 4) Older people and people with pre-existing conditions (asthma, diabetes heart disease obesity are more vulnerable)

In Beijing risk is very low

Returning from Hubei, follow national policies

- 1) Expect to be quarantined for 14 days
- 2) Twice daily monitoring > 38 indicative of illness, cough, shortness of breath
- 3) Maintain strict adherence to hand hygiene, cough etiquette of environmental cleaning
- 4) Wear medical masks to protect in closed settings
- 5) If symptoms develop, call health care workers or hospital ahead of time so that you can managed safely

After exposure to Corona:

. Public health actions are same if it concerns an ill person or a suspected case (1000's samples waiting for processing)

. You will be quarantined

Health authorities watch not how many new cases each day but date of onset of symptoms by new cases. That is indicative of the rate of progress.

WHO/China/Office has adopted work from home policy with outbreak team coming into office (team has visited Wuhan in the previous week)

Treatment: no specific treatment, based on patients clinical condition, early treatment has best outcome

11-12 February WHO meeting in Geneva about development vaccine and therapies

Regional WHO Director will hold a "Zoom" meeting with all MOH's the region about consequences of PHEIC

Q&A

How about survival of virus in open air: droplets main transmission, small particles not known but seems not. Avoid close contact

Average for transmission of close contact of a suspected case is 12 persons

Need to do 2 tests for each case, one day apart to confirm each case. Efficiency and capacity is increasing but huge back logs, a perfect storm.....

Question about proportion of suspected cases which are finally confirmed. Most important is day of onset of new cases. Accumulation of daily cases increases but trend is that recent cases are relatively declining in Hubei

For families with young children: small number of children are affected under 5 yrs. Very different from influenza where young children are affected. For Corona virus: mostly elderly people and with underlying conditions. Pregnant women unknown but few are contaminated.

Household surveys are crucial, so understand if not incubating somewhere else,

About the route of numbers: National Health Commission gives WHO BJ the numbers, BJ checks and reports to Geneva.

Most respiratory viruses are susceptible to higher temperature, too little information yet to say something concrete

Travelling to China, exposure in airports and planes ? diseases is transmitted by close contact, if one meter apart, very low risk. Exit screening when leaving, if temperature, medical examination. If people start feeling unwell during the flight, report to crew, isolate immediately.

Case fatality ratio has declined, was quite high, now 1-2%. More and more mild cases are identified, seeking treatment earlier, medical services are improving. Does not mean that virus is becoming less aggressive.

No special recommendations regarding food (for children)

(10)(2e)

Counselor for Health, Welfare and Sports

Beijing China

31-01-2020