# Press release: MERS-CoV case in England

## Latest update

Nick Phin, Deputy Director, National Infection Service, Public Health England, said:

We can confirm that the patient who was hospitalised with MERS is no longer considered infectious and has been discharged from Royal Liverpool Hospital. All those who may have had close and sustained contact with the case have been identified and appropriate follow up and testing undertaken.

To date, all contacts that have been tested as part of our follow up have been negative for MERS CoV and no other cases of MERS have been identified. Contacts will continue to be followed up for 14 days following last exposure, to ensure we can take necessary action if needed. We would like to thank all the staff who have worked so hard to treat the patient and trace all known contacts.

#### A Royal Liverpool spokesperson said:

The patient was cared for on a specialist tropical and infectious disease unit by a highly skilled team who successfully treated the patient, whilst ensuring no further spread of the infection.

The team at the Royal have worked around the clock to support his recovery. We are delighted with how well the patient has responded to treatment. We would like to thank all staff involved, both here and at Leeds Teaching Hospitals Trust prior to the patient's transfer.

## **Previous updates**

## 23 August 2018

The patient was initially admitted to a hospital in Leeds and was transferred to Royal Liverpool Hospital, an expert respiratory infectious disease centre, where they are stable and receiving appropriate treatment.

The patient is a resident of the Middle East, where they are believed to have contracted the infection, before travelling to the UK.

While this is a serious infection for the individual, the risk of

transmission to the general population from this case is very low.

MERS-CoV (the virus that causes MERS) can be spread when someone is in close contact with a patient for a sustained period of time. This means there is a very low risk to the general population of becoming ill.

This is the fifth case of MERS diagnosed in England, with previous cases diagnosed in 2012 to 2013.

As a precautionary measure, PHE experts are working closely with NHS colleagues to advise them on infection control measures. They will be contacting people who might have been in close contact with the individual to monitor their symptoms and provide health advice. This will include contacting a number of passengers who travelled in close proximity to the patient on the same flight to the UK.

People without symptoms are not considered infectious but, as a precaution, those who have been in close proximity will be contacted and monitored to ensure that if they do become unwell they can be treated quickly.

If people show symptoms of MERS after travelling to the Middle East, our advice remains unchanged and they should contact health services through the usual routes — by calling their GP or NHS 111.

Typically MERS symptoms include fever, cough and shortness of breath.

Healthcare professionals are advised to remain vigilant for severe unexplained respiratory illness occurring in anyone who has recently travelled into the UK from the Middle East, particularly in light of increased travel associated with the Hajj.

Dr Jenny Harries, Deputy Medical Director at PHE, said:

A patient in hospital in Liverpool is being treated for Middle East Respiratory Syndrome coronavirus (Mers-CoV) infection. The patient is thought to have contracted the infection whilst in the Middle East before travelling to the UK.

Public Health England is following up those who have had close and sustained contact with the patient to offer advice and to monitor them as necessary.

It is important to emphasise that although a case has been identified, the overall risk of disease transmission to the public is very low.

As we've seen in previous cases, we have well established and robust infection control procedures for dealing with cases of imported infectious disease and these will be strictly followed to minimise the risk of transmission.

### Background

- 1. No further details about the patient will be provided due to patient confidentiality.
- 2. The patient was first assessed, diagnosed and treated at Leeds Teaching Hospitals NHS Trust before being transferred to the specialist unit in Liverpool. The NHS will not issue daily condition checks. An update will only be provided if there is a significant change to the patient's condition.
- 3. The patient travelled on Saudi Arabian Airlines flight (number SV123) on 16 August 2018. Aircraft recycle and filter the air in the cabin and this is why contact tracing is usually restricted to 3 rows in front and 3 behind the case. If you have not been contacted then you are not considered at risk.
- 4. The total number of laboratory confirmed cases detected in the UK is now 5: the current case, 2 imported from the Middle East in 2012 to 13 and 2 as a result of onward transmission from one of the cases whilst in the UK. General travel health advice for travellers going to the Middle East is available from NaTHNaC's website <a href="TravelHealthPro">TravelHealthPro</a>.
- 5. MERS guidance issued by PHE for clinicians can be accessed from the:

  <u>Middle East respiratory syndrome coronavirus (MERS-CoV): clinical</u>

  <u>management and guidance</u>.
- 6. Health advice posters are available here on the PHE website.
- 7. Typically MERS symptoms include fever, cough and shortness of breath. Pneumonia is common, but not always present. Gastrointestinal symptoms, including diarrhoea, have also been reported.