

NEWS

WHO sets up expert committee to advise on coronavirus

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The World Health Organization has convened a group of international experts to advise it on the Middle East respiratory syndrome coronavirus.

The committee, convened under the WHO's international health regulations, is made up of experts including immunologists, virologists, and epidemiologists and held its first telephone conference on Tuesday 9 July, when it reviewed current information about the disease. This is the first time that an international committee of experts, independent of WHO, has met since the H1N1 pandemic in 2009.

Keiji Fukuda, WHO's assistant director general for health, security, and environment, told a press conference on 4 July that it was unlikely that the committee, convened to investigate the causes of the disease and how it is likely to evolve, would make recommendations on 9 July, but he said that he did not want to second guess the experts' actions.

Fukuda said that one of the key pieces of missing information was whether there were many people who had mild or asymptomatic infections.

"That would help us to understand what is the transmission and epidemiology," he said.

The committee is being convened while the incidence is still fairly low so that WHO can act quickly if it starts to spread more rapidly, said Fukuda.

"We don't want to wait until we are in the midst of an emergency situation and have to pull everything together really quickly," said Fukuda. "We don't know what's going to happen so let's be prudent."

As at 7 July there had been 80 laboratory confirmed cases of MERS and 44 deaths, including the death of a man at St Thomas' Hospital in London last week. The 49 year old, who was flown to the UK from Qatar, had been in intensive care since last September.

The disease, of which most cases have occurred in the Middle East, affects all age groups, but most particularly older men and people with comorbidities. The pattern of the disease has been

fairly steady over the last three months with 19 cases in April, 21 in May, and 22 in June.

Ian Jones, professor of virology at the University of Reading, said that the most urgent priority was to find the source of the

"The virus is related to a bat virus and comes directly from bats. These people [affected with the diseases] are not cavers. Either an intermediary is involved or it is a contaminated food source, which is known for some other bat viruses. If that's the case it needs to be cleaned up," he said.

He added that he was less concerned about person to person transmission, as the virus has so far been genetically stable and has spread only among susceptible individuals.

Fukuda described the disease as a "patchwork of local infections, some of them occurring sporadically, some of them occurring through local person to person transmission," without sweeping through countries or regions.

He said, "Right now we don't know what the animal reservoir is, and we don't know the exact exposure for how people in communities are getting infected. We don't know whether it's exposure to some kind of animal or perhaps a contaminated environment. This is unclear to us despite a fair amount of investigation."

He said it was impossible to predict what would happen in the future. The virus may simply fade away, it could remain at its current level, or it may mutate and spread more rapidly. Jones said that the evidence so far did not indicate that MERS would develop into a major pandemic.

Unlike the severe acute respiratory syndrome epidemic of 2003, MERS has infected few health workers, said Fukuda.

"This may have something to do with better infection control practices which have occurred in the past decade since SARS. If this is true it will be a very good explanation," he said.

Cite this as: BMJ 2013:347:f4426

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