SYNOPSIS
01/28/2020

Review of “Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China”


One-Minute Summary
- Case series of 41 patients admitted to hospital in Wuhan from December 16, 2019 to January 2, 2020 with laboratory-confirmed 2019-nCoV from respiratory samples, with the earliest date of onset of December 1, 2019.
- Direct exposure to the Huanan seafood market - 66%
- Male - 73%; median age 49 years (no children)
- Underlying diseases - 32%
- Admitted to the ICU - 32%
- Died - 15% (six patients)
- Abnormalities on chest CT - 100%; all patients had pneumonia
- Most common presenting symptoms: fever (98%), cough (76%), dyspnea (55%), myalgia or fatigue (44%)
- Demonstrated person to person transmission in one case

Additional Information
Other clinical information:
- Lymphopenia in 63%
- Acute respiratory distress syndrome occurred in 29%
- RNA in blood found in 15%
- Acute cardiac injury in 12%
• Diarrhea was not common
• Upper respiratory tract infections not common (e.g., not common to have runny nose, sneezing or sore throat)
• Severity may be related to cytokine storm

Serial interval: In one patient who passed infection to his wife, the serial interval was 5 days (from onset of symptoms in the husband to onset in the wife)

Management:
• Using airborne precautions for suspect cases
• Combination of lopinavir and ritonavir showed benefit in SARS, so a randomized clinical trial is being initiated using these drugs
• Corticosteroids not recommended
• Discharge criteria – abatement of fever for at least 10 days, with improvement of chest X-ray and viral clearance in upper respiratory samples

Case fatality rates of MERS-CoV and SARS-CoV:
• SARS-CoV - 10%
• MERS-CoV - 37%

PHO Reviewer’s Comments
The epidemiology of these 41 cases may not represent the current epidemiology, as 66% of the cases in this case series were from the original market exposure. We know from avian influenza exposures that older men are more likely to go to the markets and may also be more prone to severe disease.
Citation

Disclaimer
This document was developed by Public Health Ontario (PHO). PHO provides scientific and technical advice to Ontario’s government, public health organizations and health care providers. PHO’s work is guided by the current best available evidence at the time of publication.

The application and use of this document is the responsibility of the user. PHO assumes no liability resulting from any such application or use.

This document may be reproduced without permission for non-commercial purposes only and provided that appropriate credit is given to PHO. No changes and/or modifications may be made to this document without express written permission from PHO.

Public Health Ontario
Public Health Ontario is a Crown corporation dedicated to protecting and promoting the health of all Ontarians and reducing inequities in health. Public Health Ontario links public health practitioners, front-line health workers and researchers to the best scientific intelligence and knowledge from around the world. For more information about PHO, visit publichealthontario.ca.