As of 23 May 2013, the novel coronavirus, which was first detected in March 2012, has caused 44 cases, including 22 deaths. In the majority of cases identified to date, this novel virus has produced severe diseases.

Several countries in the Middle East have been affected, including Jordan, Qatar, Saudi Arabia, and the United Arab Emirates (UAE). Most recently, Tunisia has reported 1 probable and 2 confirmed cases of human infection with the novel coronavirus, with history of travel to the Arabian Peninsula for two of them. Cases with direct or indirect connection to the Middle East have also been reported by France, Germany, and the United Kingdom.

This disease represents a significant public health risk under the International Health Regulations (IHR2005). WHO has issued recommendations for enhanced surveillance and precautions for the testing and management of suspected cases, and is working closely with countries and international partners.

The Coronavirus Study Group of the International Committee on Taxonomy of Viruses has published a proposed new designation for the novel coronavirus, the Middle East Respiratory Syndrome Coronavirus (MERS-CoV).¹

Given the experience in previous international public health events, WHO generally prefers that virus names do not refer to the region or place of the initial detection of the virus. This approach aims at minimizing unnecessary geographical discrimination that could be based on coincidental detection rather than on the true area of emergence of a virus.

WHO did not convene a group to discuss the naming of this virus. The proposed name - MERS-CoV - represents a consensus that is acceptable to WHO. It was built on consultations with a large group of scientists.