Press conference with Dr Keiji Fukuda, Assistant Director-General for Health Security and the Environment on MERS-Coronavirus, 17 July 2013

Speaker key

CF Christy Feig
KF Keiji Fukuda
JF Jonathan Fowler
HB Helen Branswell
SB Simeon Bennett
MO Mr Ohte
SH Shigeru
MG Mark Goldberg
GS Gabriela Sotomayor
GA Mrs Galind
ST Stephanie
RK Richard Knox
MZ Mrs Zein

CF Good evening to all of you here in the room. Good evening to everybody online. I'm Christy Feig; I'm the Director of Communications here at the World Health Organization. I'd like to welcome you to this virtual press briefing to discuss the IHR Emergency Committee on the novel coronavirus. Dr Keiji Fukuda, our Assistant Director-General for Health Security and the Environment, is here to brief you. For our journalists on the phone tonight, we're trying something new; what used to be our virtual press conference in the studio we've brought into the library so that our journalists who are here in Geneva could join us in person. I tell you this because we're living on the edge with technology. We are pretty sure this is going to work, but if it all falls apart just bear with us, and we'll get back to you.

I'm going to start by turning it over to Keiji. Because we have journalists in two locations, we will alternate between questions in the room, questions on the line, and I think we'll be okay on time. We have about 45 minutes I believe I've been told. So Keiji, I'll turn it over to you first.

KF Thanks Christy. Welcome everybody, and welcome everybody online. We're in a little bit more intimate setting than we normally are down at the Palais, so it's good to see everybody close up. As I often do, what I'll try to do is make a couple of points and then we'll throw it open for questions and take it wherever you want to go.

I think that all of you know that the Emergency Committee under the International Health Regulations was convened last week on Tuesday, and then we brought them back for a second meeting today. What they did was provide some guidance to the Director-General. Let me put this in a little bit of perspective and context for you. In the first place, WHO convened an Emergency Committee under the IHR to provide an
independent assessment of the current situation related to this novel coronavirus: the so-called MERS Coronavirus. The basic question being posed was whether this current situation should be declared or considered a Public Health Emergency of International Concern.

The reason why we did that is because this is a virus which is new. We have seen that it's been around since 2012, but we didn't know about it before. It's been really quite severe in those that it has infected, so the fatality has been about 55%, and so even though some of the more recent cases have been mild and people have done quite well, still it is a severe virus for many that it infects. This is a virus which has been around now for over a year, so it's been persistent in the Middle East and continues to cause cases. When I last spoke with you not so long ago I indicated that over the past three months, we had seen a steady number of cases each month. This is also an infection for which we don't have any specific vaccines or specific medicines right now, so the way we take care of these people is through general medical care. In looking at all of these things, this is a situation which has been of some concern to WHO. So one of the things that we wanted to do was bring together a group of experts, have them assess the situation and based on that assessment, based on their understanding of the evidence, provide guidance to the Director-General and to WHO, again, as to whether this should be considered a Public Health Emergency of International Concern.

The Emergency Committee had an extensive amount of discussion. There is information that was presented to them both by countries directly, which have had cases, as well as information provided by WHO staff. Based on that, the Committee had a deliberation among itself and then, again, provided some guidance to the Director-General. Basically, what the Emergency Committee said is that the situation that they see right now related to this virus is serious and is something that requires close monitoring. However, in their assessment, the current situation does not constitute a Public Health Emergency of International Concern at present and based on the evidence that they see before them. However, the Emergency Committee also went on to highlight that there are several areas where countries and WHO should pay attention to, and that it should take steps both to strengthen the preparation of countries.

In essence, why did the Emergency Committee come to this conclusion? Why did they make this assessment at this time? Basically, in their discussions what they said was that the current situation, the current virus is serious in the sense that it has been persistent. When it infects people it can cause very serious disease; many people end up on respirators; many people die. It's also possible that this virus could spread further in the future. But based on the current situation, when they look at everything, when they weigh everything, they feel that there is not enough evidence for WHO and the Director-General to go ahead and declare a global Public Health Emergency of International Concern. Furthermore, they noted that when you do that – this is really quite a dramatic action – it can also have negative effects, and so on balance, what they suggested, or they recommended was that this was not the time to go ahead with such a declaration but really to, again, monitor the situation very carefully and then take steps to strengthen countries.
In giving that kind of advice they recognise that the situation could change in the future, and so they asked WHO to continue to provide them with updated information on the situation. They also advised the Director-General that it would be good for the Committee to reconvene in the not-so-distant future, again, to assess the situation and see where we are. Now, the Director-General was highly interactive with the Committee, asking a lot of questions and going back and forth, and on this basis I think we can see that what WHO is going to do is to continue to monitor the situation very carefully. As we discussed the last time we met, we have taken a great deal of steps to intensively try to follow what's going on, to try to work with countries in terms of investigation, in terms of trying to find out some of these outstanding questions: where are people getting infected? How are they getting infected? Are there lots of people who have mild or asymptomatic infections, and so on? We'll continue to do that.

The Emergency Committee did highlight a number of areas where they thought that particular attention should be given to, and some of these areas include things like surveillance, ensuring that countries have the capacity in their laboratories to make the diagnosis if the infection is there. They noted that the largest outbreaks take place in health facilities, to date, and that infection control is really a critical area and that we should work with countries to make sure that those guidelines are understood by healthcare professionals and really implemented. We should focus on ensuring that doctors know up-to-date information in terms of managing cases when people get infected. They noted how important risk communications is. It's not enough just to develop guidelines. It's not enough just to pass messages on to a few people, but how do you get that out effectively to people. They also noted that there are a number of areas in which there are critical research questions. Again, some of the issues that I brought up such as how many mild cases are there out there? What serologic studies can help answer those questions?

There was also extensive discussion on travel – I think this is probably no surprise to anybody – driven in part by the discussions and the attention being paid to the Hajj and to the Umrah and to pilgrims visiting Saudi Arabia. Also, though, questions about travel in general, and then some discussion about the fact that it's not only travel that they have concerns about. There's mass gatherings, which take place for other reasons. Now, I think that based on all of this WHO at this time does not have any plans to restrict travel. We don't have any plans to issue advisories for people not to go anywhere and not to travel. However, I think that we do recognise that this, again, is a risk for travellers and that there are certain steps that individual travels in countries can take. People who have certain serious medical conditions, the ones who have been getting infected with this MERS virus, for example, can seek medical counselling or guidance from their physicians about whether this is a good time for them to travel or not. There are certain steps which any traveller can take, both to protect themselves and also to protect others from getting infected, and this important information for travellers. So WHO, after all of this discussion, does plan to put together some travel recommendations in relation to this virus and the current situation. I hope that we get this out in the next few days and hopefully that will be of some help to people.
I hope that gives you a flavour about the discussions. These are the major guidance and decisions which came out of that group. So let's just throw it open for questions, Christy.

CF Thanks, Dr Fukuda. For those of you on the phone, if you have a question hit 01 on your phone and you will be put in the queue for questions. We'll go ahead and take our first question from the room. I do ask that all journalists introduce yourself by your name and your affiliation. There is somebody that's going to be transcribing this interview for the website tonight and it helps them if they know who's asking the question and who you're with.

JF Jonathan Fowler from AFP. Forgive what might be a slightly ignorant question, but what is the criteria for declaring something an international health emergency? What would it take, in a hypothetical case, to raise the alert level?

KF I think this is a really important question, Jonathan. One thing for everybody to understand, that declaring a Public Health Emergency of International Concern is not like looking at a menu. We're not really looking at a checklist of have you met this or that, but at its heart, that discussion is really trying to assess the risk of a situation or an event. Does it really pose a danger for the world? In looking at it that way I think there's a couple of important questions that have to be asked to see whether an event or an issue passes the test. One, is it a serious or severe infection or an event? Here we have something which can kill a high percentage of the people who it infects. A second question is is the event or the situation spreading? Is it growing? If it's a small event, or if it remains static, it's not likely to pose a global risk. But is it growing? Is it getting bigger? What's the evidence for that? I think the third question is also important; if the Director-General goes ahead and declares a Public Health Emergency of International Concern is that, on the balance, going to be helpful? Is getting that kind of attention, is putting that kind of notification out there really going to have beneficial effects that are really going to help address the situation more. I think that these are the kinds of criteria which are important to look at when we're determining what kind of event we're dealing with, and this was some of the discussion that was held with the Emergency Committee.

CF Our next question is going to come from online, and it is Mrs Helen Branswell from the Canadian Press.

HB Hi, thanks very much for taking my call. If I could ask a couple of related questions? Keiji, you said that there was concern that there might be negative impacts if the Committee had agreed that this was a Public Health Emergency of International Concern. Did they talk about that? Can you flesh that out? Also, do you have any concerns that having decided that this is not currently an emergency situation, that the decision will be sending a message that this isn't very serious?

KF Sure, okay. Thanks, Helen. In terms of the kinds of negative impact, I think that one of the issues which the Emergency Committee members discussed, in a sense, was that declarations and events have to be proportional to each other, otherwise you begin to lose credibility. Here they're saying look, we have something that we have to keep on top of because it could grow; it could suddenly change, and it could suddenly start spreading. On a daily basis or a near-daily basis, we have heard
about new cases occurring, but this could really escalate and then could move beyond
the region where it is right now. But in their overall balance and assessment, they
were saying that calling for that is probably not going to be seen as commensurate
with a global declaration that there's a global emergency right now. So I think that's
one of the kinds of things that they were thinking about in terms of possible negative
effects. You want to be proportional to the event.

Now, in terms, Helen, of your second question – any concerns that this will send a
message that this is not an important event – I think that the Emergency Committee
did a really good job in landing where many of us assess the situation to be. In
essence, again, they are not saying this is unimportant; they are not saying let's just
now move on to other things. In fact, they're saying that we should stay together as an
Emergency Committee, you – meaning WHO – need to keep us updated; we need to
come back and re-assess the situation and, in fact, there are a number of factions
which WHO and countries should take. But we don't know whether this is going to
grow further; we don't know quite what's going to happen in the future. So I think that
they're sending out a pretty balanced message, and I think it's a little bit similar to the
whole reason why we called the Emergency Committee together now. It was exactly
to get this kind of advice, this kind of assessment. Overall, I think they did a quite
good job doing that.

CF Simeon, whenever the microphone gets to you, introduce yourself if you
would.

SB Hi, Simeon Bennett from Bloomberg News. Two questions, Keiji; first of all,
one of the concerns has been that there may be many more mild or asymptomatic
cases that we don't know about and haven't seen and that the virus may, in fact, be far
more widespread than we know. You probably will have seen today that Saudi Arabia
put out a statement saying they had identified two more cases, but that they've tested
almost 1,500 samples since the start of last month, and they've all come back
negative. So does that indicate to you that, in fact, the virus is not a lot more
widespread than what we've seen? In fact, while it's transmissible in healthcare
settings, it is not that easily transmissible outside of that. And then the second
question is has there been any more evidence since you last briefed us about the origin
of the virus and the means of transmission, and can you update us on who is doing the
work on that and where they're up to? Thank you.

KF Sure. So Simeon, let me take the first question. I think right now, on balance,
it's fair to say we really don't have a good idea of how many asymptomatic or mild
cases may be missed. It is true that when we look among contacts, people who have
had contact with someone who is known to be infected, we don't find that many
people who are infected among those contacts. On the other hand, we're pretty early in
that kind of testing, and we also don't have the kinds of serologic studies that we
would normally want to see. For example, if we were to take a group of people in the
neighbourhood where some of the neighbourhood or community cases have come
from, in fact, are there a lot of other people who have been potentially infected but
never have come to anybody's attention? Or if we look at people who are in different
kinds of jobs or occupations, are there groups of people like that who we're missing?
So I think we're still pretty early in those kinds of investigations. But those are exactly
the kinds of studies and investigations that were done, for example, when we had
some of the new avian influenza viruses come up or SARS viruses and so on. I think that it's too early to make that determination.

Then in terms of the evidence of the origin, again, in general, what people have been doing is trying to look at if you take samples from animals is there evidence, either by doing PCR testing or by doing serologic testing, that these animals have been exposed or have been infected in the past with this MERS Coronavirus? I'm not sure that I really know all of the groups who are doing this kind of testing. There are groups in the Netherlands. There are academic groups in the United States that are doing some of this work. But I think it is fair to say right now there are a number of hypotheses, there are a number of possibilities, but we're still unable to say really we think it's this animal species or that animal species which is the reservoir for it.

CF  Again, if you're online and you have questions you can hit 01 and you will go into the queue to ask questions. Our next question comes from Mr Ohte [?] with the German Press Agency.

OT  Hi, my question regards the travel guidance. Could you flesh out a bit what you said earlier about chronically sick people, that they should seek advice from their doctors? Do you mean they should seek advice whether to go to Middle Eastern countries? And my second question would be does that mean you do not follow Saudi Arabia's call on chronic patients not to visit Mecca?

KF  Thank you for the questions. Yes, I think that we are planning to put up guidance on travel because there are so many questions coming from many Member States, and it is clear that part of the questions are being raised because of the large numbers of people that travel on pilgrimage for Hajj and Umrah. So I think that this is an important reason; there's clearly a concern out there about this. I think that the advice that travellers, particularly travellers who have any kinds of chronic medical conditions, should talk with their physician about what are the risks for me is, in fact, good advice for anybody in general who is travelling anywhere. But I think in this particular situation, where there are concerns about this new infection, it is something that should be specifically discussed with your physician. But, in general, it is prudent advice. So for example, if you are a traveller who has a heart condition, of course you want to talk with your doctor to make sure that wherever you're going to travel, under whatever conditions, it's a good idea for you. So I think these are some of the things that were discussed today, and I think that this is prudent advice.

Now, in terms of the recommendations from the Government of the Kingdom of Saudi Arabia, again, these are guidance and advice and recommendations put out by that government who has a responsibility for people coming into the country for people who may fall ill when they're on the Hajj. So they have a particular set of concerns and considerations: how do we make sure that we can handle all of these potential illnesses? This is not just for MERS, but this is really for, I think, a range of infections and other diseases. So for WHO, however, we have a somewhat different responsibility. Our responsibility is to put out travel recommendations, which is really relevant for all Member States and, in essence, all countries in the world. Here it's not a matter of do we endorse the Kingdom of Saudi Arabia's recommendations on the Hajj? We're not normally focusing on single events or single issues in terms of travel
recommendations, and here we will very much take the same approach: what is prudent travel recommendations that can be given to a broad range of people around the world? But again, recognising that it is in the context of concerns about the Hajj, and it is in the context of concerns about this particular virus. And so no we don't specifically plan to endorse anybody's recommendations; however, we are very much aware of the recommendations and, in fact, have discussions with the Kingdom of Saudi Arabia on these recommendations, and then we'll put out WHO's recommendations in the next few days.

SH Shigeru of Yomiuri Shimbun. Dr Fukuda, I would like to get some explanation if this Public Health Emergency of International Concern is declared, what kind of measures each country has to introduce and WHO has to introduce? Maybe some are automatically and some are case-by-case.

KF I think, in essence, in that kind of situation nothing is automatic; it is really a case-by-case assessment. If, for example, we are dealing with an event which warrants being declared a Public Health Emergency of International Concern, then I think that we have to look very carefully at what are the specific circumstances? What do we know about the disease? What are the specific concerns about its spread? And then an Emergency Committee, at that time, would be expected to look at the specific details of it and provide guidance to the Director-General. So I think it's not a cookie-cutter process, but really a very intense examination of each event on a case-by-case basis.

CF Our next question comes from Mark Goldberg. Mark, if you can tell us who you're writing for please?

MG I'm with UN Dispatch. When will the Emergency Committee meet next? And can you briefly describe what actions the WHO is already taking in the region to mitigate the crisis?

KF Sure. We have not exactly set the date yet, but we anticipate that we will meet with them in the early fall. In the meantime, we will provide updated information to them, but then what we have also indicated to them is that if there is a sudden change in the events or there's something going on which warrants calling them back urgently, then we will do so. But right now, I think that we will plan to bring them back in the early fall period, and then the specific dates to be decided based on a number of different factors, including availability.

Now, the things which have been going on; WHO has been working very closely with countries, both in the Middle East but also in some of the countries in Europe, the ones, in particular, who have had travel-related cases in their own countries. And so, some of the things that we have done and have started working on quite a long time ago, for example, has been suggestions and guidance on how to strengthen surveillance, how to conduct investigations of cases. As part of that, there have been case definitions, which have been provided. We have worked directly with countries in sending staff out, both international staff as well as WHO staff, in terms of conducting investigations in those countries. We have worked and put out clinical guidance based on networks of physicians who have been pulled together; their information about treating these cases, not theoretical information but really based on what's the experience dealing with the cases that we see now.
We have worked with countries in terms of communications. In Cairo, the regional office there has worked and pulled together two scientific meetings in which all the investigators in all the countries with infections have been brought together, both to review what is known about the situation, what is going on in terms of research studies, where are we in terms of the development of different assays and so on. Furthermore, we've been working with countries in terms of getting viruses moved around so we can work on the diagnostic tests. We have been working with a number of laboratories on the development of the diagnostic tests, the PCR assays and so on. And then, we're working with countries in terms of trying to help understand which are the better serologic tests to be used, and how to use those tests. So these are some of the kinds of activities which have been going on, and gives you a little bit of a flavour.

CF I have a question down this side of the table. I apologise that I can't see faces.

GS Hi, thank you very much. Gabriela Sotomayor from Mexican News Agency. Even though this is not an international emergency, do you consider that this outbreak could be a public health emergency for the Middle East? And also, how do you explain that people that travelled from Latin America, United States, Canada or in other parts of the world, there is nothing but in Europe? Thank you.

KF Hi Gabriela, thanks for the question. The Emergency Committee and also the affected countries are very heavily represented in terms of the Middle East, and the discussion and really the advice to the Director-General was given on a unanimous basis. So I think no, I don't think we have a separate Public Health Emergency of International Concern going on for the Middle East. I think, again; it's fair to say we have a situation which bears careful monitoring, and I think that everybody agreed with that assessment, including all of the countries and all of the individuals coming from the Middle East. I know you asked me a second question; I can't remember it. Oh sure, sorry. I don't know. I can't explain that. I think that when we look at a map right now, we see that the travel-related cases have been detected in Europe, and they haven't been detected in Latin America, whereas we know that a lot of people from North America, Latin America will go on the Hajj. We also know that people will go travel to the Middle East from the east of the Kingdom of Saudi Arabia. So I think right now, whether this reflects that surveillance is not detecting these cases or whether there is something else going on that perhaps people travelling from Europe are travelling to different places than other people are in general, I think right now we simply don't understand that well enough. It's something that we all see, but we don't understand it.

CF Our next question comes from Mrs Galind [?] of the British Medical Journal.

GA Oh hi, thanks very much for taking my question. I just wanted to know what the Emergency Committee recommended that WHO isn't doing at the moment, and countries aren't doing either? Were there new recommendations or was it merely sort of a question of stepping up what you and what the countries affected are doing?

KF That's a good question. I think that, in general, the kinds of activities and the kinds of areas that the Emergency Committee stressed that countries and WHO should
do, many of those activities have been initiated. But I think that what the Emergency Committee did was, again, provide a degree of urgency to it. For example, some of the people speaking on behalf of conditions in Africa pointed out the capacity to identify this virus in some of the countries there is really poor, and they pointed out that the importance of really strengthening infection control practices in a number of countries is really important. And so I think that these are not new themselves, but again, what they really emphasise was that after assessing the situation, there are some basic things which are really important to have in place; the capacity to do surveillance, the capacity to do reduce infections by having good control measures in place, and that these are really important to do. So in many respects it was really a very strong emphasis on the activities which have been started but, which have not been completed.

CF Again, if you're online and you have a question you can hit 01 and get in the queue for questions. Do we have any other questions in the room? Yes, Stephanie.

ST Can you say a little bit more, Keiji, about hospital infections and spread in hospitals among patients and also among some of the healthcare workers? And if any new evidence or conclusions emerged during the discussions?

KF Stephanie, one of the interesting things which emerged from the discussion was that, as you know, we've had really two notably large clusters taking place in health facilities; the one which took place in Jordan last year and then the one which is taking place in the eastern part of Saudi Arabia this year. The investigators spoke a little bit about how difficult it was trying to tease out what may have been introductions of cases coming in from the community, from what was person-to-person transmission taking place within hospitals. So I think that, if anything, by doing more investigations, teasing those basic things out was still very difficult for the investigators, but they are working on this pretty hard.

I think a second important observation that was made though, was that with this virus when infection control is applied, in fact, you can bring these hospital facility outbreaks under good control. And it doesn't take extraordinary means to do that; it's really the application of good, basic infection control measures, which really has brought the outbreaks to an end in the health facilities. And so these were two points which were emphasised in the discussions today.

CF Our next question comes from Mr Knox with National Public Radio.

RK Yes, it's Richard Knox from National Public Radio, thank you. A couple of unrelated things, if I may ask? One follows-on the question from the gentleman from Yomiuri Shimbun having to do with the implications of declaring or not declaring a Public Health Emergency of International Concern. I realise what you mean about not having a cookie-cutter recipe for it, but I still would like to know in reporting the meaning of your decision or the Committee's decision, what would a declaration have meant? Are there some things...? It sounds like a pretty formal thing, so I assume that it enables things to happen that wouldn't happen otherwise, and I'd like to know what kinds of things it might have triggered. Along those lines, I'd like to know more about the negative effects that you were concerned about, other than just losing credibility if it didn't seem proportionate. And if I may, I have a second question.
KF Sure. So Richard, let me address this first question. What, in effect, would a Public Health Emergency of International Concern declaration mean? I think that, again, in terms of specifics, we would expect the Emergency Committee to give their guidance on the specifics, but in general, this is a quite heavy declaration, and by making such a heavy declaration under the International Health Regulations, it would send a very strong political signal around the world, and basically push an issue up very high on the agenda for national priorities. Basically, it sends a signal that this is something which needs highest level attention. And so I think that this, again, goes back to the issue of you want to make these declarations when they are proportional to the event. You don't want to just simply make such a declaration without realising the weight of what you're asking countries to do. Again, I can't really tell you what the specific recommendations would be, because that's what the Committee would be there for, to give that kind of guidance. But I hope it gives you a sense that we all consider this a very substantial declaration if it is made.

CF Dick, did you have a second question?

RK Yes, thank you. On the important question of serologic tests, I just wondered if you could give us a bit more update on that issue, that problem; are there candidates that are set there that are being validated? Are there particular scientific problems in coming up with a reliable test? And third, I wonder if you expect when the Committee meets again in the fall it might be able to consider some data on transmission within neighbourhoods, communities, occupations and contacts?

KF Richard, in terms of the serologic tests, I think it's fair to say that there are a number of tests out there. By number, I mean probably on the order of four or five serologic tests or assays, which have been developed by different groups, and I think that right now some of the scientific issues are: are all of them comparable? Are they all detecting the same kinds of antibodies? So if you look at the results using one test, can they be meaningfully compared with the results using a different test? Those are important issues to understand, because if you're going to be looking at multiple communities in multiple countries using multiple tests, you want to know are we comparing apples with apples and oranges with oranges. I think that right now the question is can we get enough serum in which to make sure that the tests are behaving comparably, so that when results are done, when there are the larger studies that are done, in fact, we can compare the results from one community with those from another. So these are some of the issues which are being discussed right now, and hopefully we can get all of these resolved pretty soon.

CF Any questions left in the room? All right, I've got two more online. The first one is going to come from Mrs Zein of the Kalesh [?] Times.

MZ Yes, hello. Thank you for taking my question. I'm a journalist who is based in the UAE, and as a journalist based here I would like to know what the WHO recommends for the general public who is living in the middle of the virus. The virus is also named after this region. What is the recommendation for the general public? Thank you.
KF    Okay. I think this is really a very important question, and particularly when you're dealing with a new virus that we have some information on, but not full information. I think probably the most basic, important message for people who are in the community is that simply they should be aware that there is such an infection. So particularly if you're in a country in which cases have been reported, it is good for people to understand simply that there is this kind of infection. Secondly, we don't have specific information about how people are getting infected; however, we have very good ways for people to reduce the possibility of getting infected or transmitting infection if they get infected. For example, it's important to wash your hands; hand hygiene, it turns out to be an extremely important way to prevent yourself from getting infected. This can be done with soap and water. This can be done using sanitizers. But one of the things which is important to do is to keep your hands clean. A second thing is that if you are developing symptoms, particularly respiratory symptoms, and if they become severe – and by severe I mean that you start to have high fevers or particularly if you have symptoms like troubled breathing – it's really important to seek medical care and not to wait too long. A third thing, again, is that if you are infected, and you are coughing; you are sneezing; you don't want to be coughing or sneezing into people's faces. What you want to do is to be coughing into tissue papers or perhaps into the sleeves of your shirt, but in essence, you want to take those kinds of measures to try to stop the spread of infection to your family members or your friends. These kinds of precautions are so useful because it's not just for viruses like this MERS virus, but these are the steps which can reduce your chances of getting infected by things like influenza viruses or many other infections. It's also a way that you can prevent from spreading them to other people.

So again, just to summarise, being informed, as always, is really I think the foundation for taking care of yourself and your family, and this is something that we would recommend. There is information about this, and so to try to keep people aware. Too, there are individual actions that you can take both to reduce your chances of getting infected or to infect others, and so there's a number of guidance on these things, and we can provide more details. But these are some of the more important things that anyone can do. Thank you.

CF    Our last question from the phone is, again, from Mr Ohte with the German Press Agency.

MO    Just a quick question; could you give us the latest tally of cases and lethal cases as of today?

KF    Well, as of when we walked into the room, the tally of cases was 82 cases; I'm actually not quite sure what the number of deaths was. We do know that there are potentially pending reports going out to countries about additional cases, but this is the official tally right now.

CF    Any other questions from the room? All right then, thank you for joining us. A special thank you to Dr Keiji Fukuda. There will be a video of this press conference posted online shortly. It will be in the Media Centre in case you want to go back to listen to any pieces again. A transcript will be done overnight tonight and should be posted on the website in the Media Centre as well by about 10:00 AM. If you have
any questions, obviously you can reach us through the Media Line as well. Thank you so much for joining us. Good night.

KF    Thanks, everyone.