



Serial Number 2024/022

Date 11 June 2024

Event: Middle East Respiratory Syndrome coronavirus (MERS-CoV) and pilgrims returning from the Hajj

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Contact:

To arrange for MERS testing (primary test/screening for MERS), please contact either the Birmingham or Manchester UKHSA Public Health Laboratory. Testing is also possible through local NHS laboratories with validated assays. The contact details are available in the published [testing guidelines document](#).

Note that primary test samples should not be sent to the Respiratory Virus Unit at Colindale as this will delay results.

If you are a clinician notifying UKHSA of a potential MERS case, or a locally positive MERS result, please notify your local health protection team ([Health Protection Team Finder](#)).

For Health Protection Team (HPTs) or Regional UKHSA laboratories who wish to discuss possible or report presumptive positive cases, please contact the Clinical and Emerging Infection out of hours duty doctor and follow the [algorithm](#) and testing [guidance](#). This service has 24-hour cover.

For general, routine enquiries about MERS such as guidance or testing arrangements, please email acute.respiratory@ukhsa.gov.uk (monitored weekday working hours only).

NIERP Level: Not applicable

Cascade

- **Devolved Administrations** to cascade to Medical Directors and other DA teams as appropriate to their local arrangements
- **Regional Deputy Directors** to cascade to Directors of Public Health
- **UKHSA microbiologists** to cascade to non-UKHSA labs (NHS labs and private)
- **UKHSA microbiologists** to cascade to NHS Trust infection leads
- **NHSE EPRR** to cascade to NHS regional EPRR teams and NHS providers
- **NHS labs/NHS infection leads/NHS microbiologist/NHS infectious disease specialists** to cascade to relevant local services, including clinicians (infectious diseases, emergency departments and primary care)



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Summary

The Hajj is taking place in the Kingdom of Saudi Arabia (KSA) from 14 June to 19 June 2024. This is the annual Islamic pilgrimage to Mecca and many pilgrims from around the world are expected to travel there including from the UK. Umrah pilgrimage also takes place to KSA throughout the year.

UK travel advice for KSA is published [here](#), with information from the Saudi Ministry of Health, on health aspects of the Hajj [here](#).

Clinicians are reminded that travellers to the Hajj are exposed both to infections endemic to KSA, and infections associated with mass gatherings. Clinicians should discuss appropriate tests with their local infection services if required. However, pilgrims returning from the Hajj may have respiratory symptoms after their visit. Some may therefore meet the [case definitions for MERS](#), warranting further investigations and management. Clinicians should familiarise themselves with the [case definition](#), [the public health investigations and management for suspected MERS cases](#), [testing arrangements](#) and the measures for [infection prevention and control](#) while waiting for test results and if subsequently a positive diagnosis is made.

Risk assessment

There have been 2,613 laboratory confirmed MERS cases, with 941 deaths, reported worldwide by the World Health Organization up to May 2024. Most MERS cases have been reported from the KSA (2,204 cases, with 860 deaths). Infection caused by the MERS-CoV virus ranges in severity from asymptomatic to severe respiratory disease leading to death. The case fatality rate is stated as 36%, but this is likely to be an overestimate, since only laboratory confirmed infections are counted, and mild or asymptomatic cases are unlikely to present to hospitals and therefore will remain undetected through global surveillance systems.

MERS-CoV can be acquired from close contact with camels or from consuming camel products e.g., unpasteurised camel milk, although there have been some instances of person-to-person transmission including in healthcare settings.

Significant numbers of UK nationals will travel to the KSA over the period of 14 to 19 June 2024. The congregation of large numbers of pilgrims from multiple countries during the Hajj, including from the UK, is likely to expose UK travellers there to respiratory pathogens, including COVID-19 and influenza, and some may return with respiratory symptoms. Although currently MERS is infrequently reported in KSA, people may present with symptoms / signs that could be consistent with MERS and therefore should be managed accordingly.

General [travel advice for the public for travellers going to the KSA](#) has been issued by NaTHNaC and further specific advice on pilgrims planning to perform Hajj available here: [Hajj-NaTHNaC](#), and MERS is available here: [MERS NaTHNaC advice](#)

The risk of infection with MERS-CoV to UK residents travelling to the KSA / Eastern Mediterranean/Middle East is very low but may be higher in those with exposure to specific risk factors within the region, such as to camels (or camel products) or the local healthcare system.

The small number of sporadic importations of MERS to the UK since 2012 highlight that there is a continued risk of importation of cases to the UK, reflecting the



epidemiology of MERS-CoV infection in the Eastern Mediterranean/Middle East region.

Implications and recommendations

Clinicians and NHS providers

NHS providers should ensure that appropriate clinical teams (emergency departments and teams involved in assessing fevers, respiratory illness or returning travellers) are aware of the [current MERS guidance](#). Clinicians should be alert to patients meeting the possible case definition and contact the relevant [health protection team](#) if a possible case is identified. Testing can be undertaken locally if available or through the UKHSA primary testing laboratories in Birmingham and Manchester. The Respiratory Virus Unit (RVU) at Colindale should **NOT** be used for these primary tests as this will delay the results. RVU undertakes confirmatory testing of positive primary tests only.

Staff should familiarise themselves with the testing pathway [here](#) as following the correct pathway should reduce delays in getting results.

Should a positive result be returned from local or UKHSA testing, the NHS provider must immediately inform the relevant UKHSA HPT and activate the NHS High Consequences Infectious Diseases network through the NHS England EPRR on call.

UKHSA Regions

HPTs may be contacted regarding possible or presumptive positive (locally tested) cases. For possible cases, HPTs should advise the Trust to follow the current guidance on testing and infection prevention and control. HPT staff should familiarise themselves with the testing pathway [here](#).

For presumptive positive cases, HPTs should immediately inform the Acute Respiratory Infections team in hours at acute.respiratory@ukhsa.gov.uk (monitored 9am to 5pm Monday to Friday excluding Bank Holidays) and the Clinical and Emerging Infection on call consultant out of hours.

MERS-CoV testing laboratories outside UKHSA

NHS and other laboratories offering MERS-CoV testing outside UKHSA must inform the referring clinician of positive results immediately by telephone and notify the local health protection team. Positive tests undertaken outside UKHSA are designated presumptive positive and need further confirmation by the reference laboratory. Staff should familiarise themselves with the testing pathway [here](#).

UKHSA laboratories

UKHSA laboratories undertaking MERS-COV testing must notify all results directly to the clinician and the health protection team urgently. Samples identified as positive at the Birmingham or Manchester UKHSA laboratories are presumptive positive and need confirmation at the Respiratory Virus Unit reference laboratory. Staff should familiarise themselves with the testing pathway [here](#).



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Note

If you are concerned about other travel associated infections in a patient returning from the Hajj, the Imported Fever Service is available 24/7 for advice. Please note the IFS does not manage MERS advice or testing

References/ Sources of information

[UKHSA risk assessment of MERS-CoV - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/ukhsa-risk-assessment-of-mers-cov)

[Algorithm for the investigation and management of possible cases of MERS-CoV \(accessible text version\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/algorithm-for-the-investigation-and-management-of-possible-cases-of-mers-cov)

[MERS-CoV: presumptive positive sample referral pathway - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/mers-cov-presumptive-positive-sample-referral-pathway)

<https://www.gov.uk/government/publications/mers-cov-referral-of-samples-to-public-health-laboratories>

<https://www.who.int/health-topics/middle-east-respiratory-syndrome-coronavirus-mers>

[WHO EMRO | MERS outbreaks | MERS-CoV | Health topics](#)
