



# SARS Prevention and Control in China

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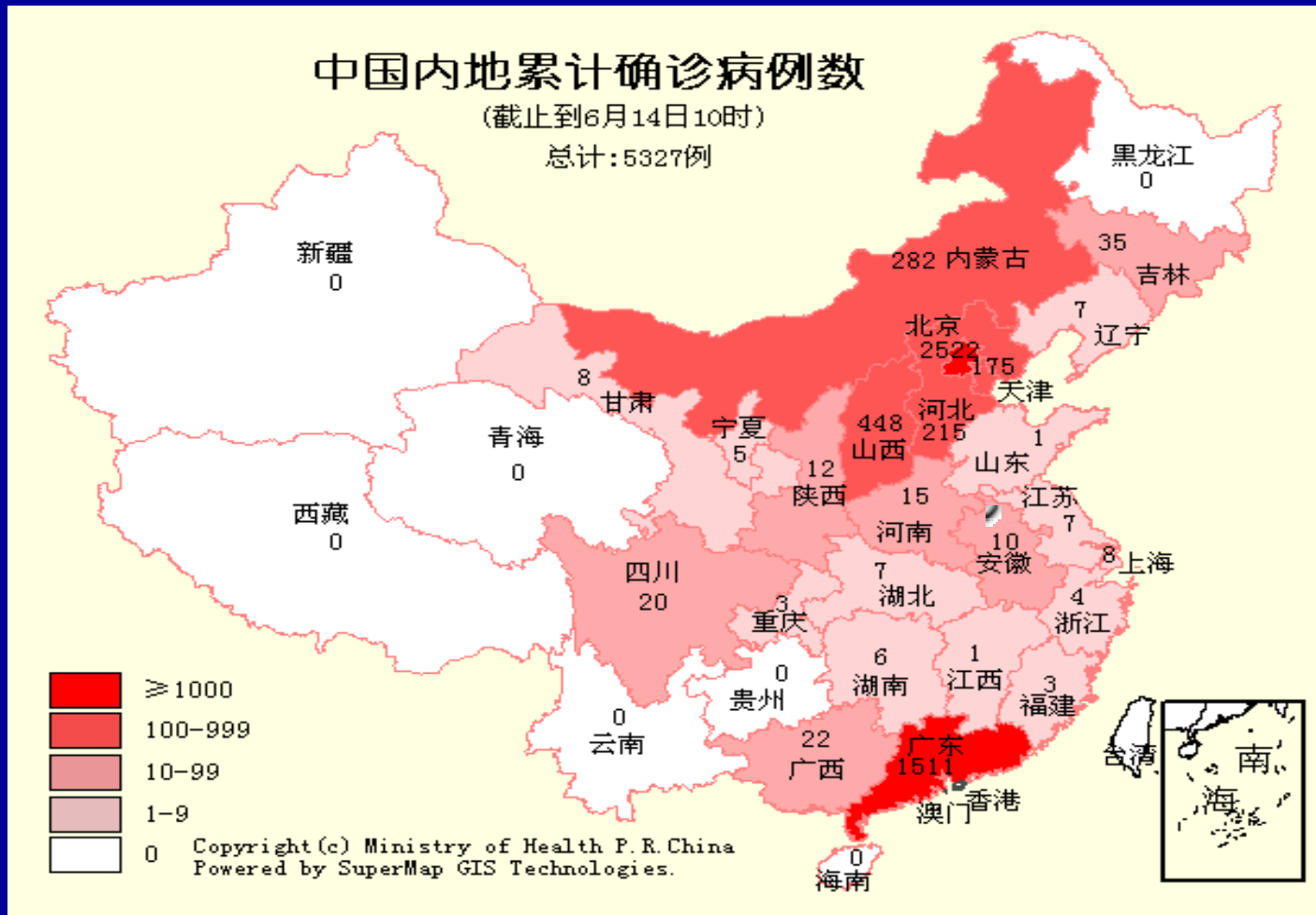
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People's Republic of China

17 June 2003 KuaLa Lumpur

# Epidemic Situation

# 25 Provinces Have Reported SARS Probable Cases as of June 16



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|  |            |
|--|------------|
| ➤ Cumulative No. of probable cases           | 5327       |
| <i>Cumulative No. of health care workers</i> | 969        |
| ➤ No of recoveries                           | 4656 (87%) |
| ➤ Number of deaths                           | 346 (6.5%) |
| ➤ Current No. of suspected cases             | 50         |

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# SARS Epidemic in China

## Three Stages

- Stage I      Onset
- Stage II     Spread
- Stage III    Decline

## Stage I First three months 2003

- Outbreak mainly in Guangzhou city, Guangdong Province
- Total number of cases nationwide: 1190, 1153 in Guangdong Province (96.9%)
- Total number in Guangzhou city: 1030

## Stage II April 2003

- Epidemic spread to Beijing, Inner Mongolia, Shanxi, Tianjin, Hebei and many other areas
- By end of April, total cumulative probable cases: 3460

## Stage III May and June 2003

- National downward trend
- Epidemic gradually under control
- Average No. of new cases each day:
  - ◆ 1st 10 days of May: 150
  - ◆ 2nd 10 days of May: 45
  - ◆ 3rd 10 days of May: 13
- End of May:
  - ◆ No. of recoveries  $>$  new cases
  - ◆ No. of discarded cases  $>$  new suspects

- In the first 16 days of June
  - ◆ Less than 5 cases per day in 4 days
  - ◆ 0 case in other 12 days
- On June 13
  - ◆ Travel recommendations lifted to Inner Mongolia, Shanxi, Hebei, Tianjin
  - ◆ All provinces but Beijing removed from list of recent local transmission

# Control Measures

# Enhance Government Leadership and Legislation



President Hu Jintao, Premier Wen Jiabao and other national leaders visited SARS affected areas and health care workers, and instructed that SARS must be the highest priority of government work.

## **National Headquarters**

**Headed by Mme WU Yi  
Vice-Premier  
& Minister of Health**

Prevention and Control Team

Health Quarantine Team

Scientific Research Team

Logistics Support Team

Rural Areas Team

Publicity Team

Social Security Team

Foreign Affairs Team

Education Team

Beijing Team

General Office

- State Council inspection teams sent to all provinces
- Similar mechanisms established at all levels
- Legislative efforts:
  - ◆ *Law of Prevention and Control of Infectious Diseases*
  - ◆ *Regulations on Public Health Emergency Alert and Response*
  - ◆ *Regulation on SARS Prevention and Control*

# Improve Surveillance System

- Surveillance over SARS started on Feb.11, “National SARS case definition and technical protocols” issued
- SARS information network established since April 20, through “national disease reporting and management information system”

- Rural surveillance system set up down to village, connecting village, township and county levels
- Epidemiologists organized to trace close contacts
- Daily and zero reporting system established
- Information shared with WHO & publicized on a daily basis

# Strictly Control Infection in Hospitals & Communities

- Farmers, towns and villages mobilized in building mass defense lines
- 242 farmer SARS cases reported, 4.5% of all cases
- Comprehensive measures to reduce hospital infection
  - ◆ National guidelines developed
  - ◆ Feces, secretions & bodies of SARS patients and other medical waste properly treated

- Measures to control community outbreak
  - ◆ Sites of SARS clusters sealed off
  - ◆ Surveillance over mobile population enhanced
  - ◆ Morning temperature check for students
  - ◆ Schools in some areas temporarily closed
  - ◆ Contaminated places disinfected
- SARS health education carried out, Patriotic Health Campaign strengthened
- Quarantine measures in major transport control points

# Clinical Management

- Fever clinics & SARS hospitals designated in all areas
- Medical infrastructure and technical expertise upgraded:
  - ◆ ICU facilities improved in SARS hospitals
  - ◆ Treatment regimens combining both western medicine & TCM disseminated
  - ◆ Attention given to severe cases to reduce case fatality
- Probable and suspected cases isolated and treated separately

- Close contacts quarantined either at home or in designated places
- Expert consultation organized to reduce misdiagnosis and under diagnosis
- Central government special fund for free treatment to farmers and urban residents in financial difficulties

# Research

- Scientific research coordinated by MOST in collaboration with international community
- Research topics:
  - ◆ Etiology
  - ◆ Routes of transmission
  - ◆ Prevention measures
  - ◆ Rapid diagnosis
  - ◆ Clinical treatment
  - ◆ Rehabilitation
  - ◆ Sources of the virus

- Progress achieved in:
  - ◆ Etiology
  - ◆ Epidemiological features
  - ◆ Diagnostic reagents
  - ◆ Treatment with integration of western medicine and TCM
- Technical protocols revised based on scientific findings

# Lessons & Experience

- Strong government leadership
- Improving legislations
- Relying on science & technology
- Mobilizing whole society
- Extensive international cooperation

# Future Plan

- Continue vigilance & cost-effective control measures till final victory
- Further strengthen government role in public health by:
  - ◆ Increasing investment in public health
  - ◆ Establishing outbreak alert & response system
  - ◆ Improving disease control system
  - ◆ Strengthening medical treatment system, especially in rural areas
- Enhance international cooperation

THANK  
YOU!

