

## SYNOPSIS

01/31/2020

# Review of “Early transmission dynamics in Wuhan, China, of novel coronavirus-infected pneumonia”

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## One-minute summary

- Case series of **425 confirmed 2019 novel coronavirus (2019-nCoV) cases** diagnosed between December 2019 and January 22, 2020.
- **Median age** of cases was **59 years**; **Age range** was 15-89 years; **56% were male**
- Compared cases identified in three time periods: period 1 - before January 1, 2020 (before the Huanan Seafood Market closed) (N=47); period 2 - January 1- 11, 2020 (N=248); and period 3 - January 12- 22, 2020 (N=130).
- The proportion of **cases in healthcare workers increased across the time periods:**
  - 0% in period 1; 3% in period 2; and 7% in period 3.
- Cases in period 1 were more likely than in period 3 to:
  - be **male (66% vs. 48%, respectively)**
  - be **less than 65 years of age (77% vs. 63%, respectively)**
  - have had exposure to the **Huanan Seafood Market (55% vs 6%, respectively)**
- In periods 2 and 3, **72% and 73% of cases, respectively, had no exposures** to either markets or people with known respiratory symptoms
- Mean duration from **illness onset to first medical visit** decreased from **5.8 days** in period 1 to **4.6 days** in period 2
- Mean duration from **illness onset to hospital admission** decreased from **12.5 days** in period 1 to **9.1 days** in period 2.
- The mean **incubation period** was estimated to be **5.2 days** (95% confidence interval (CI): 4.1-7.0), with 95<sup>th</sup> percentile of the distribution at 12.5 days, based on information from 10 cases

- The mean **serial interval** (time from illness onset in the first case to illness onset in a secondary case) was estimated as **7.5 days**+/- 3.4 days standard deviation (95% CI: 5.3-19 days) based on six pairs of cases
- The **basic reproductive number** ( $R_0$ ) was estimated to be **2.2** (95% CI: 1.4-3.9) based on cases before January 4, 2020 when awareness about the outbreak increased

## Additional information

- Laboratory confirmation was based on testing upper and/or lower respiratory specimens; testing methods were reverse transcriptase polymerase chain reaction (RT-PCR), genome sequencing and/or viral isolation
- The **lack of infected children** is notable, indicating that children are either less likely to be infected or more likely to only show mild symptoms and not seek health care
- **Fewer health care workers** were infected with 2019-nCoV relative to the SARS or MERS outbreaks. Transmission of MERS and SARS were associated with superspreading events, which have not yet been identified with 2019-nCoV.
- Time to first medical visit was shorter than time to hospitalization emphasizing the importance of proactive case finding in outpatient clinics and emergency departments
- Although no clinical information is provided, the case definition for most of the study period focused on pneumonia. Mild cases were therefore less likely to be detected.

## PHO reviewer's comment

This is the largest case series of 2019-nCoV published to-date, however represents cases which occurred in one province in China relatively early in the outbreak.

## Citation

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Review of “Early transmission dynamics in Wuhan, China, of novel coronavirus-infected pneumonia”. Toronto, ON: Queens’s Printer for Ontario; 2020.

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