

Middle East Respiratory Syndrome coronavirus (MERS-CoV)



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Overview

- Twelve years after the outbreak of Severe Acute Respiratory Syndrome coronavirus (SARS-CoV) 2002-2003

Another threat to global public health.

- In September 2012 , the virus discovered in Saudi Arabia,, causes infections with a clinical manifestation similar to SARS-CoV.

This virus was identified as a novel human coronavirus

, Middle East respiratory syndrome coronavirus (MERS-CoV) or EMC/2012 ([HCoV-EMC/2012](#)), is novel species of the genus [Betacoronavirus](#).

Although certain aspects related to this novel virus have already been unraveled

Source

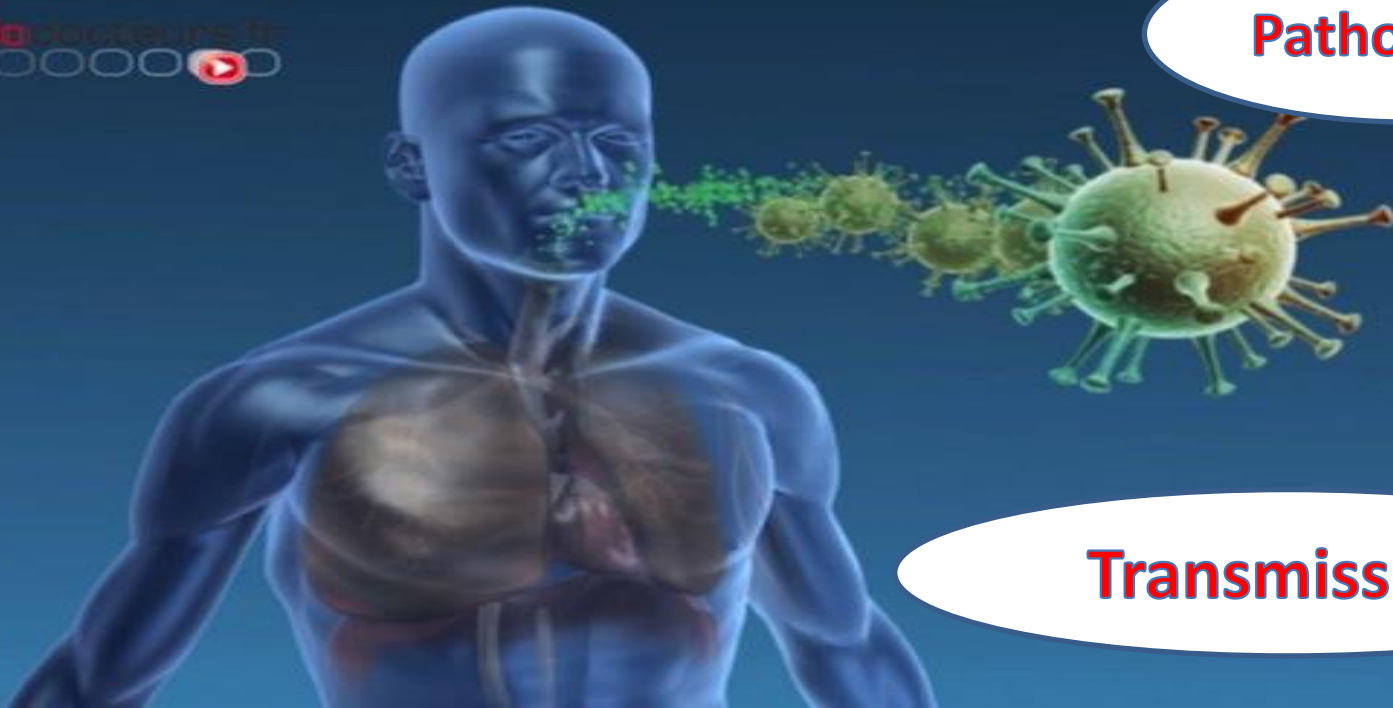
But still knowledge of its source, pathogenesis and ways of transmission remains limited.

Pathogenesis

S

Transmission

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What are Corona viruses?

RNA VIRUSES

**SINGLE STRANDED
positive sense**

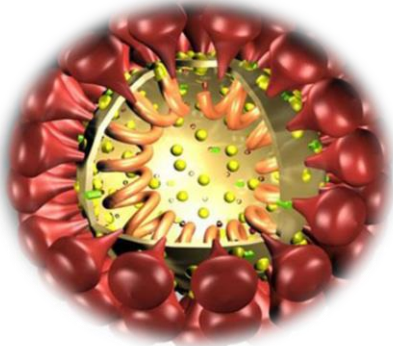
ENVELOPED

ICOSAHEDRAL

**FLAVIVIRIDAE
TOGAVIRIDAE
RETROVIRIDAE**

HELICAL

CORONAVIRIDAE



NONENVELOPED

ICOSAHEDRAL

**PICORNAVIRIDAE
CALICIVIRIDAE**

**SINGLE STRANDED
negative sense**

ENVELOPED

HELICAL

**ORTHOMYXOVIRIDAE
PARAMYXOVIRIDAE
RHABDOVIRIDAE
FILOVIRIDAE
BUNYAVIRIDAE
ARENAVIRIDAE**

DOUBLE STRANDED

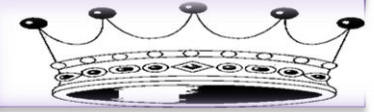
NONENVELOPED

ICOSAHEDRAL

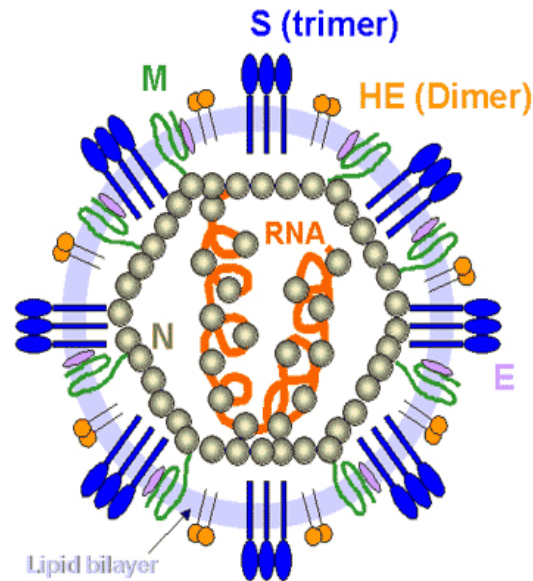
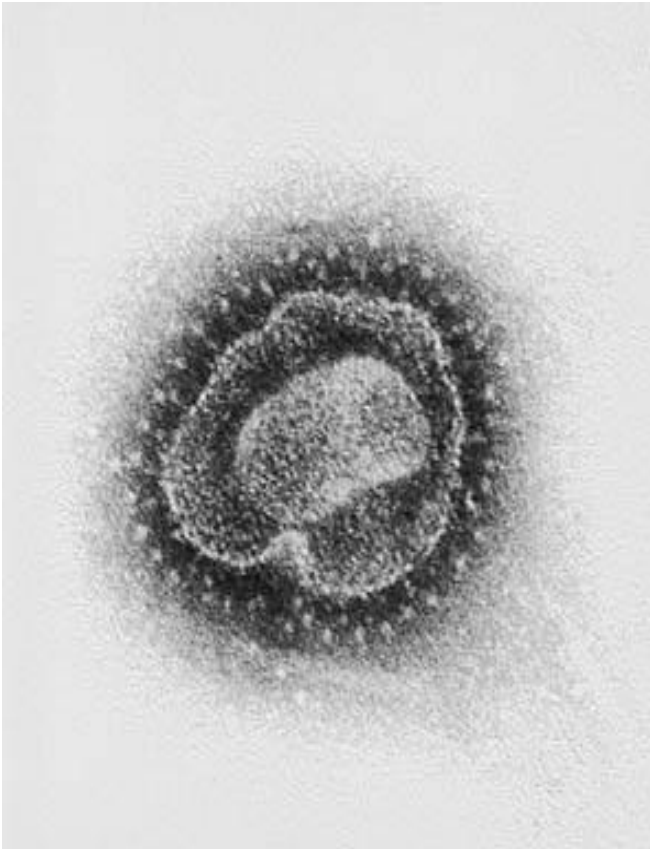
REOVIRIDAE

Modified from Volk et al., Essentials of Medical Microbiology, 4th Ed. 1991

Coronavirus structure



A Crown-like Appearance by E/M

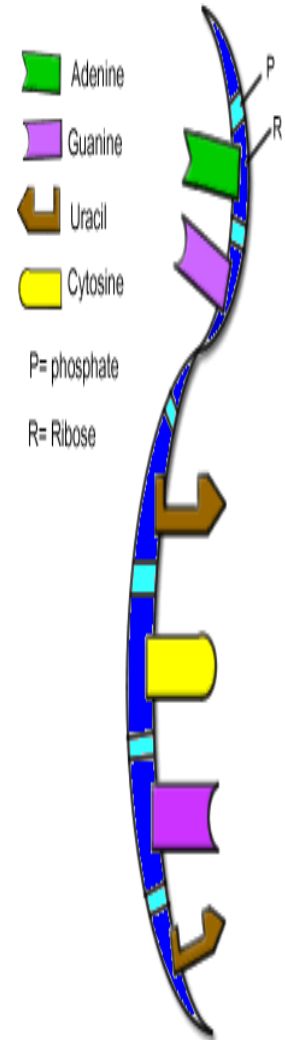


- ❖ Coronaviruses are large enveloped virions 80 to 160 nm,
- ❖ Helical nucleocapsids.
- ❖ ssRNA Virus
- ❖ 2 serogroups: OC43 and 229E
- ❖ **Severe Acute Respiratory Syndrome (SARS)**
- ❖ **Middle East Respiratory syndrome MERS-CoV**

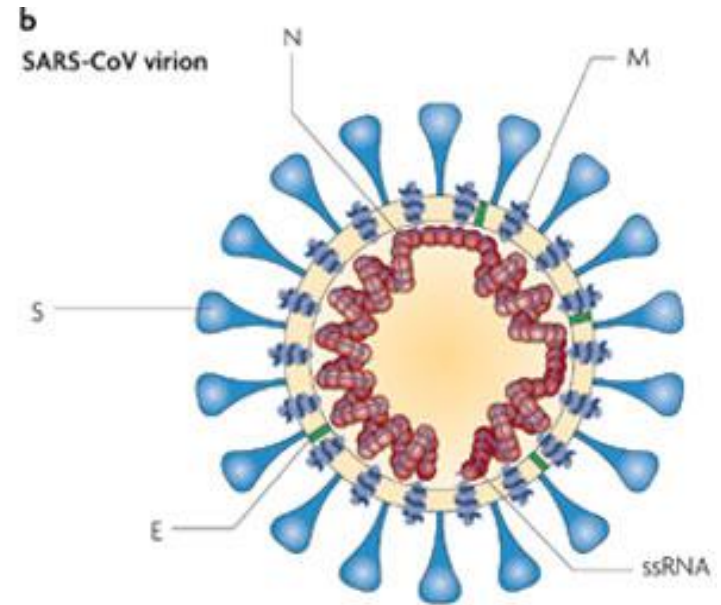
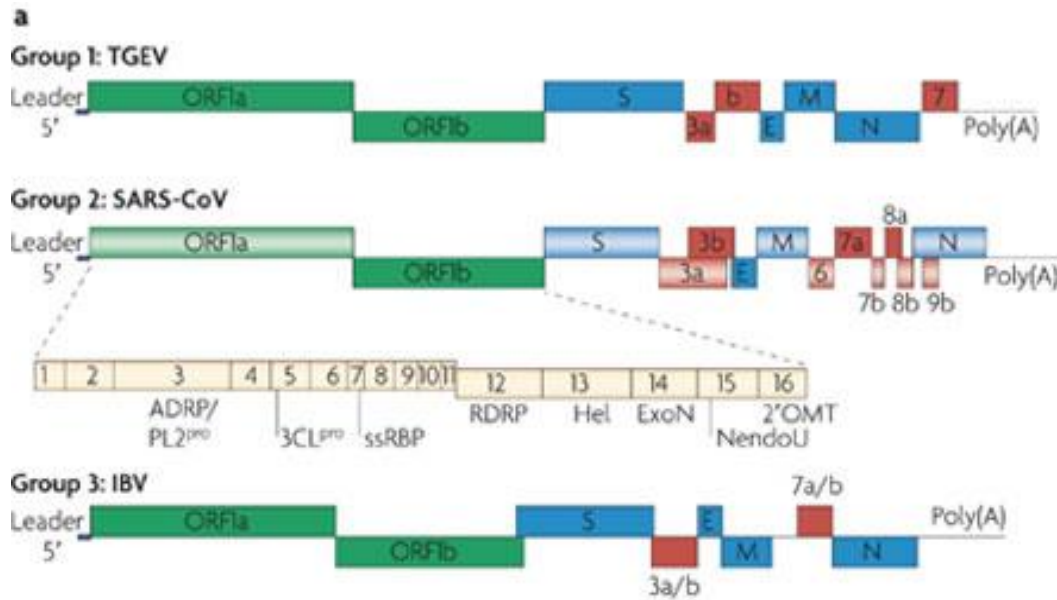
Properties of coronaviruses

- Morphology: “Crown-like” appearance under EM
- Genome: 80~160nm, ssRNA (+), 27-31 kb (longest RNA)
- Sensitive to acid, ether, chloroform, lipid solvents, drying, heating to 56°C/15-20 minutes, but some can through GIT (optimum temperature for virus:33~35°C).
- Inactivation within few minutes at room temperature in 1% formalin,1% cresol and 70% alcohol

They are difficult to isolate in cell culture so **rarely** diagnosed in clinical practice



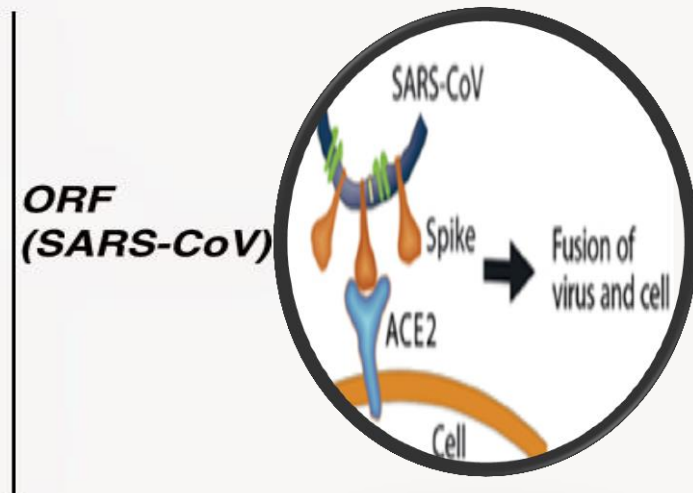
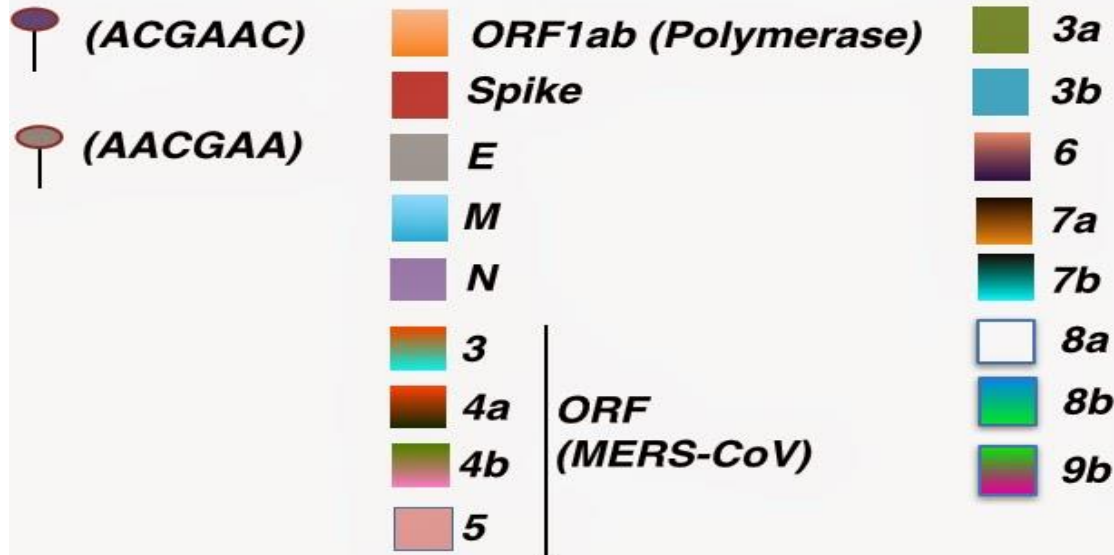
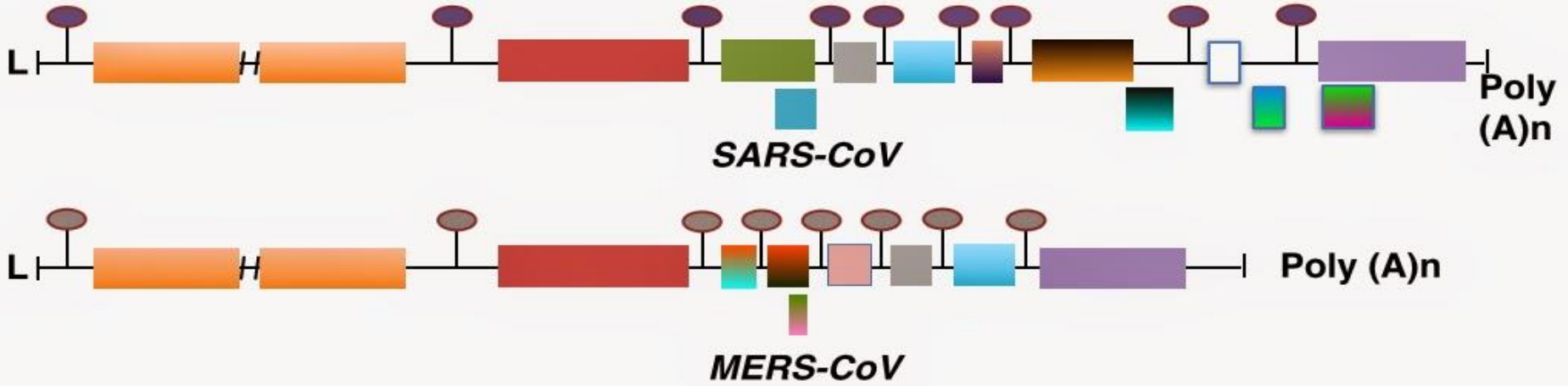
Genome organizations



Nature Reviews | Microbiology

- The gene order for the proteins encoded by all coronaviruses is **PoI-S-E-M-N-3'**. Several open reading frames encoding nonstructural proteins and the HE protein differ in number and gene order among coronaviruses. The SARS virus contains a comparatively large number of interspersed genes for nonstructural proteins at the 3' end of the genome.

Genome Organization



Genetic variation & evolution of new strains

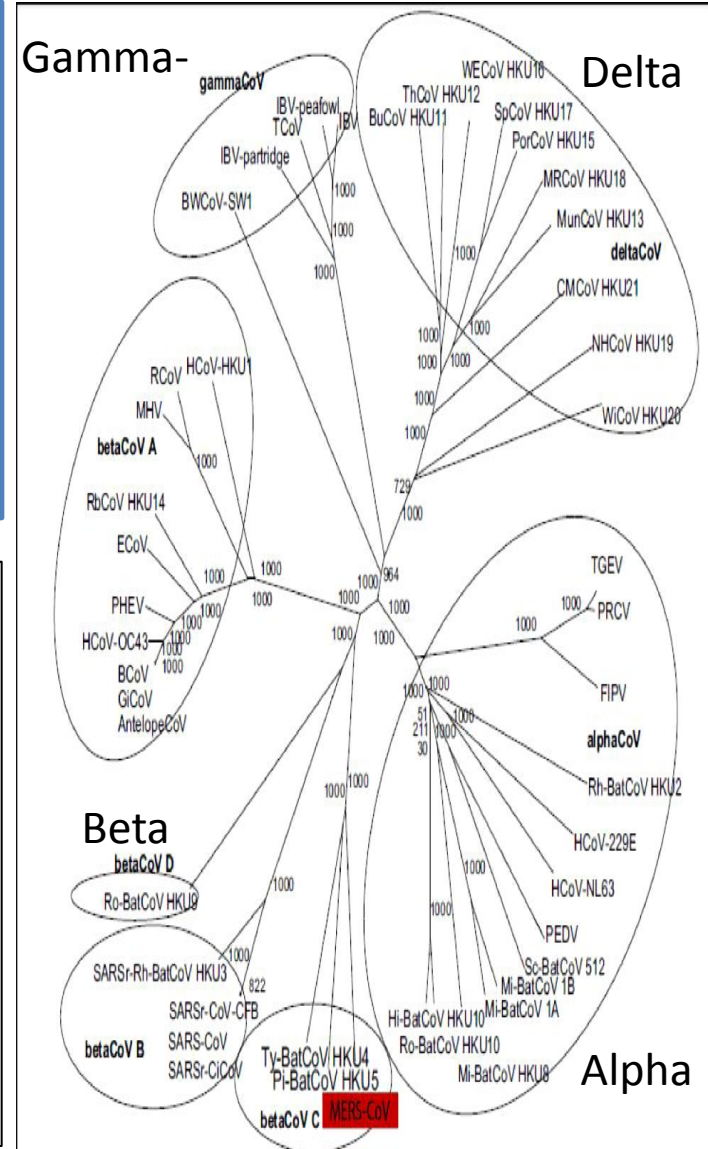
a high frequency of:

- **deletion mutations**
- **high frequency of recombination** during replication which is **unusual for** an RNA virus with **unsegmented genome**

Classification Coronaviruses

The International Committee on Taxonomy of Viruses (ICTV) has divided the family Coronaviruses based on genome sequence analysis, into four genera Alpha-, Beta-, Gamma- and Delta coronavirusidae

- Sixth different currently known strains of Coronaviruses infect humans .
- SARS-Co V represents **a new fourth antigenic group** intermediate between groups I & III
- A sixth was discovered at 2012, known as Novel Coronavirus or MERS-CoV .



HOST RANGES AND DISEASE OF CORNVIRUSES

Genetic Group	Virus	Host	Diseases (infection sites)			Receptor
			Respiratory	Enteric	Other Site	
1	HCoV- 229E	human	X			* APN CD 13
	TGEV	pig	(X)			
	PRCoV	pig	X			
	PEDV	pig			X	
	FIPV	cat	X		X	Systemic
	FCoV	cat			X	
	CCoV	dog			X	
(HE)	2 HCoV- OC43	human	X		??	CEACAM1 CD66a
	MHV	mouse	X		X	CNS, systemic +
	RCoV	rat	X			Eye, GU
	HEV	pig			X	CNS
	BCoV**	cattle	X		X	
3	IBV	chicken	X		X	Kidney
	TCoV	turkey			X	
4	SARS- CoV	human	X		(X) (Kidney)	??

* APN (Aminopeptidase N; CD13): Antigen processing & presentation

The three major antigenic groups of CoV

- **Group I** contains canine, feline, swine coronaviruses and a human corona virus **HCoV 229E** the prototype of the group
- **Group II** contains bovine, swine, rat and mouse CoV and the other **human strain which is OC43**
- **Group III no human strains** only Turkey and Avian CoV

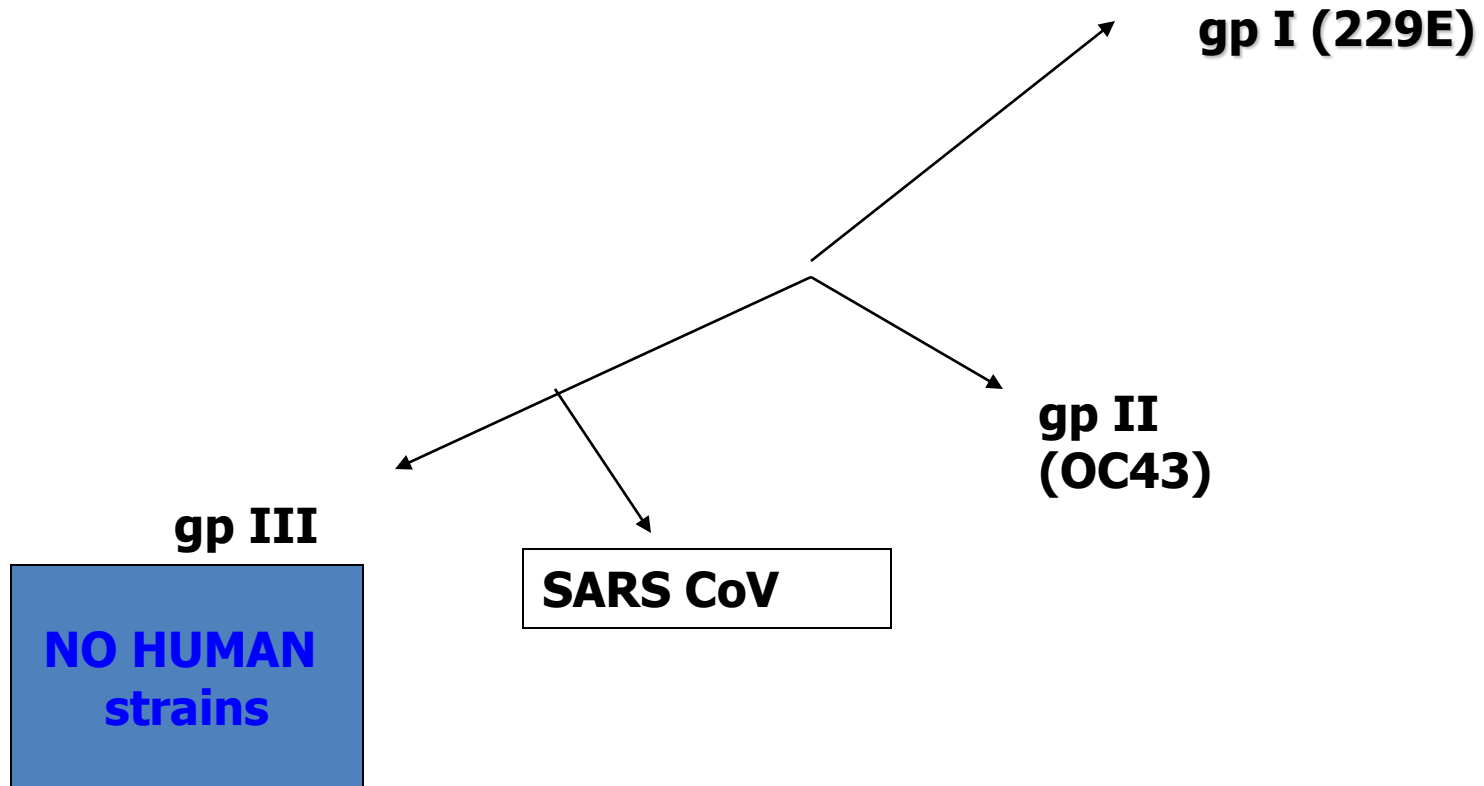
Evolution of SARS 2002

- A novel human corona virus named SARS associated corona virus represents **a new fourth antigenic group** intermediate between groups I & III

A NOVEL FOURTH ANTIGENIC GROUP

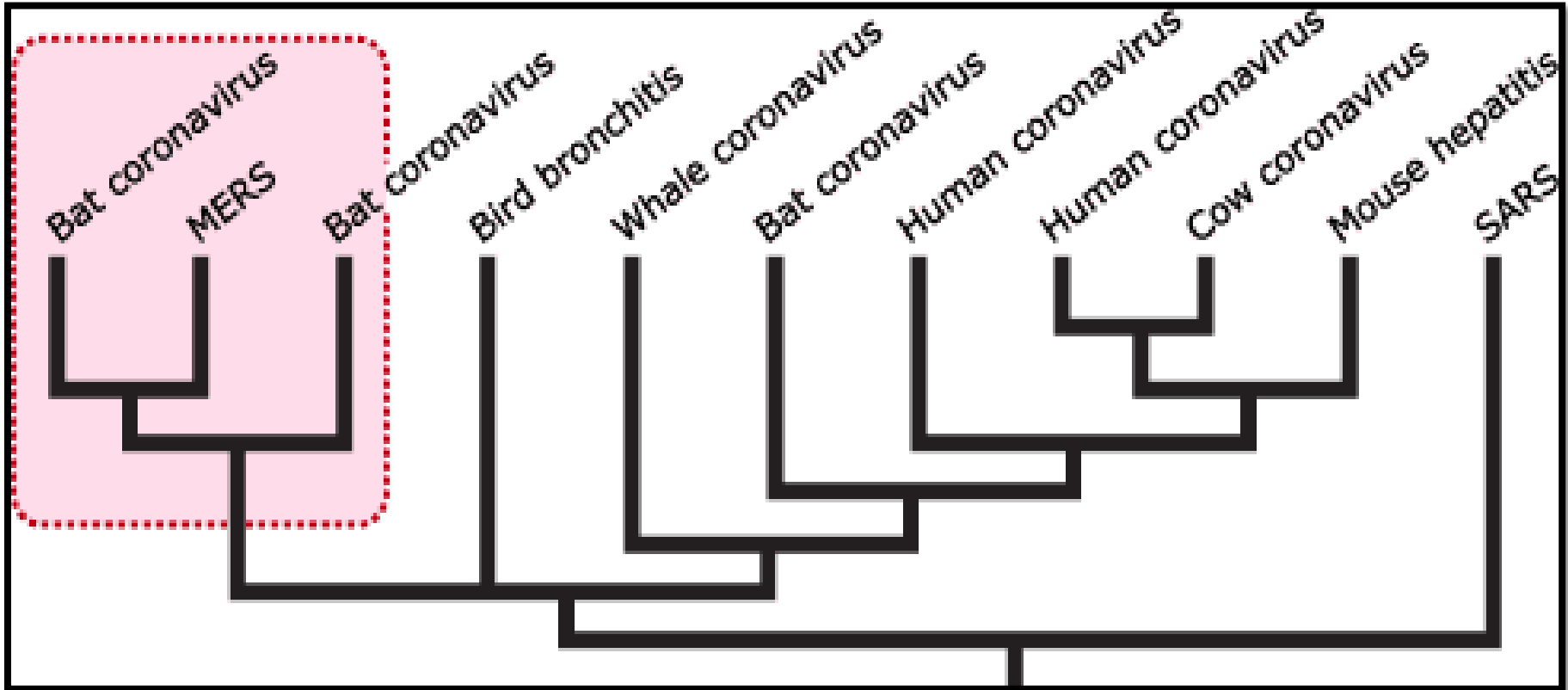
SARS

Evolution of SARS

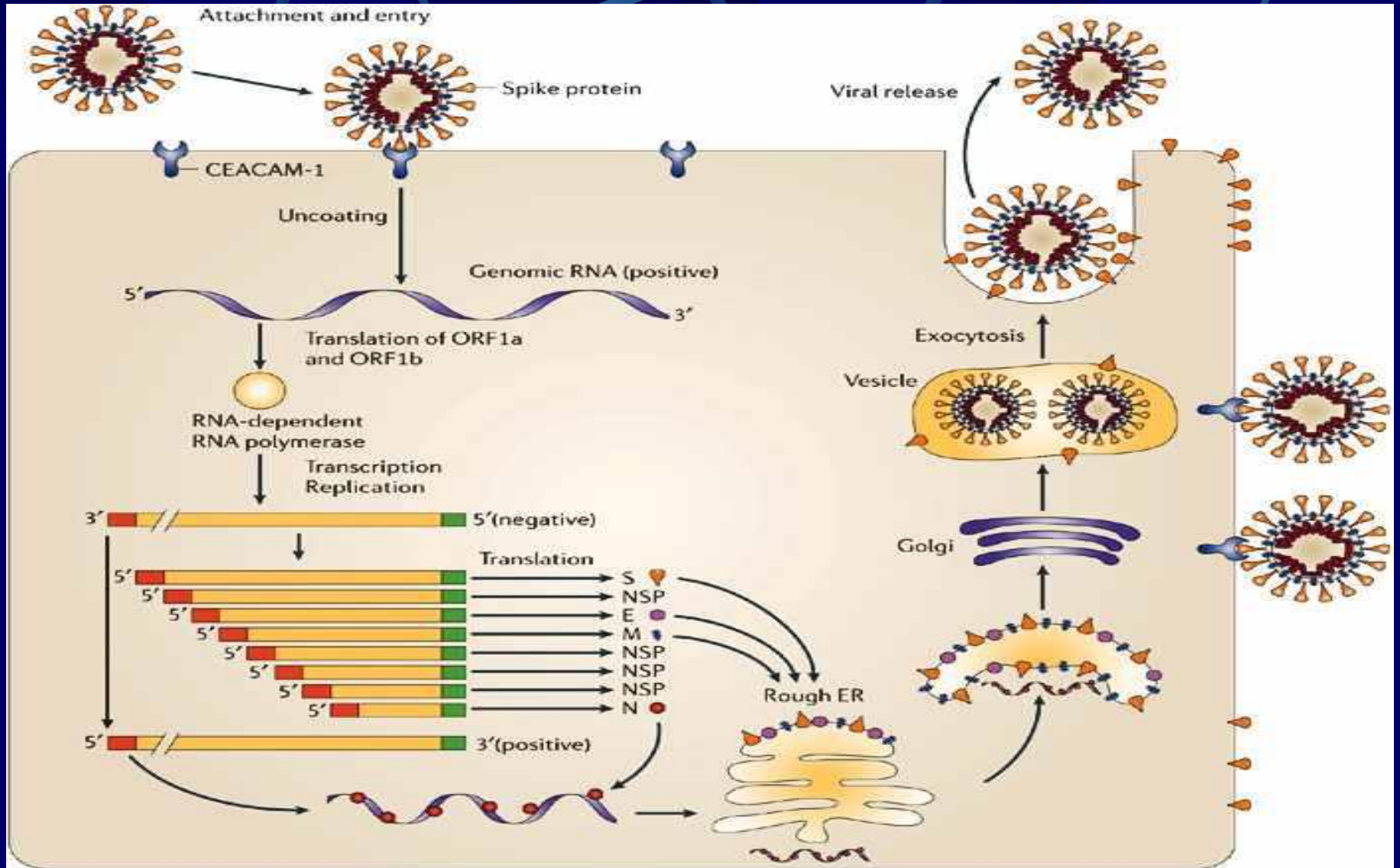


Middle East Respiratory Syndrome Coronavirus (MERS-CoV)

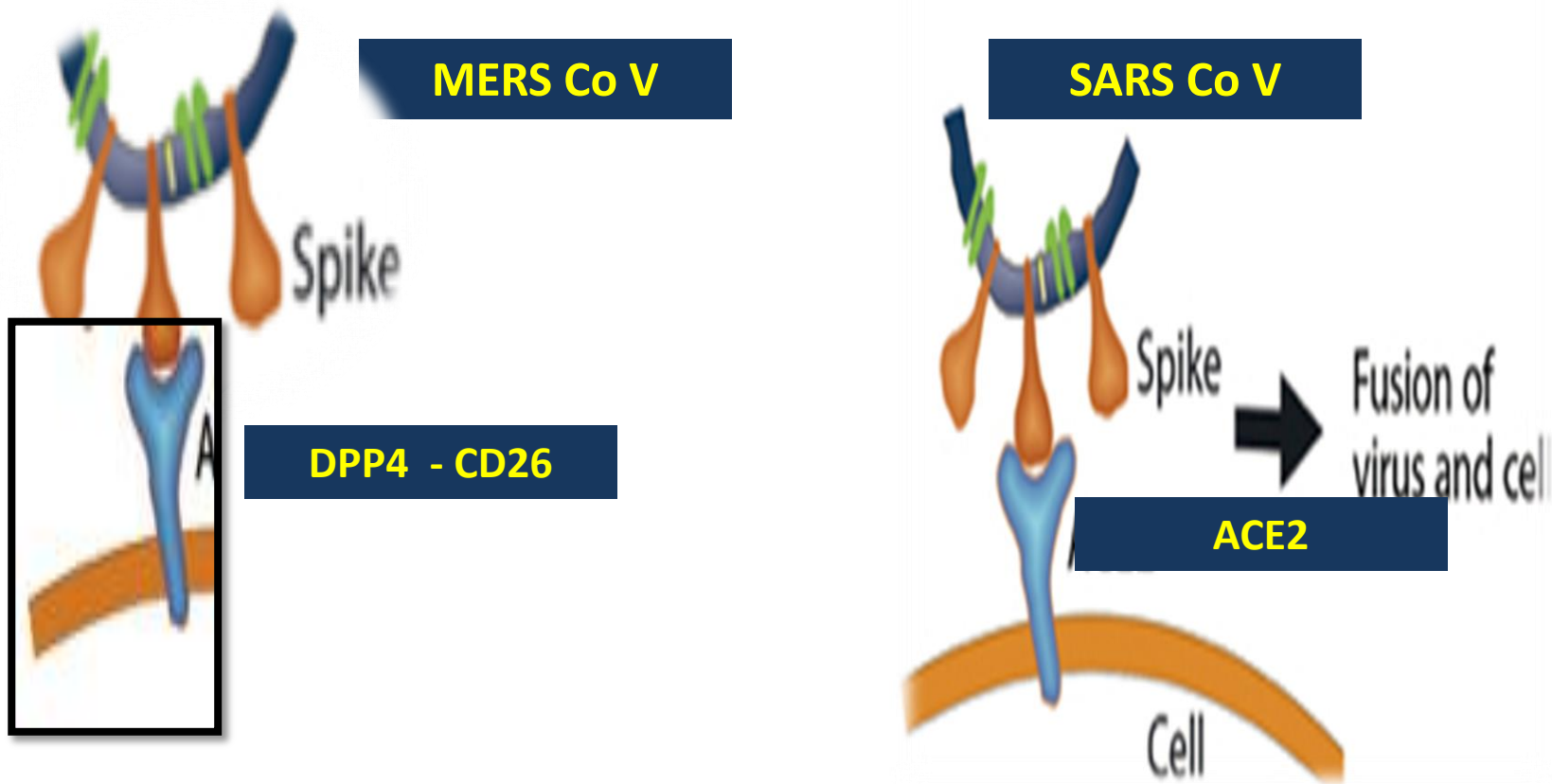
Novel coronavirus that emerged in 2012 ,Causes severe acute respiratory illness



Coronaviruses Replication



Different between SARS-CoV and MERS-CoV receptors



Due to the clinical similarity between MERS-CoV and [SARS-CoV](#) . Exopeptidase, Angiotensin converting enzyme 2 ([ACE2](#)) Neutralization of ACE2 by recombinant antibodies does not prevent MERS-CoV infection Dipeptyl peptidase 4 ([DPP4](#); also known as [CD26](#)) as a functional cellular receptor for MERS-CoV.

Coronaviruses Infections in Humans

Pathogenesis

Limited knowledge

Highly **species-specific**

Typically **mild upper respiratory infections**
("colds") that remain localized

Exception: SARS

Immunity is **not durable**

Many people become resusceptible
after a few years

Tissue tropism

Susceptibility studies testing the ability of MERS-CoV to infect cell lines derived from different organs provided indications about the tissue tropism of the virus. MERS-CoV was found to infect cells of the human respiratory tract, kidney, intestine and liver

Tropism of MERS-CoV for cells of the respiratory tract, kidney and intestine is correlated with the detection of the virus in respiratory swabs, tracheal aspirates, sputum, urine and stool of MERS



How are Novel Coronaviruses transmitted?



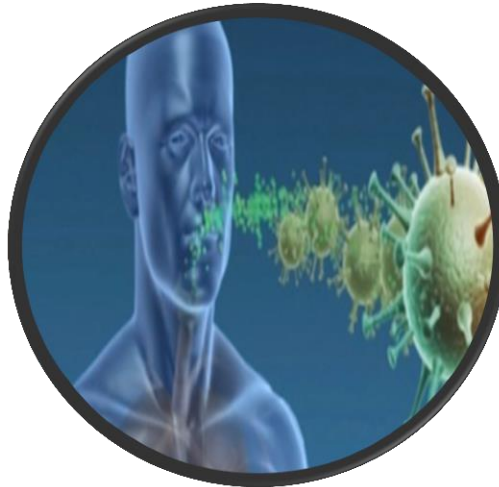
How are Novel Coronaviruses transmitted?

Airborne

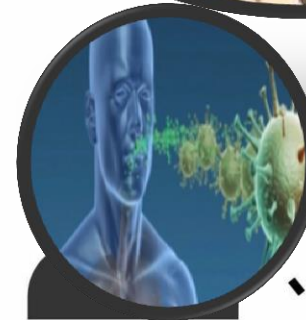
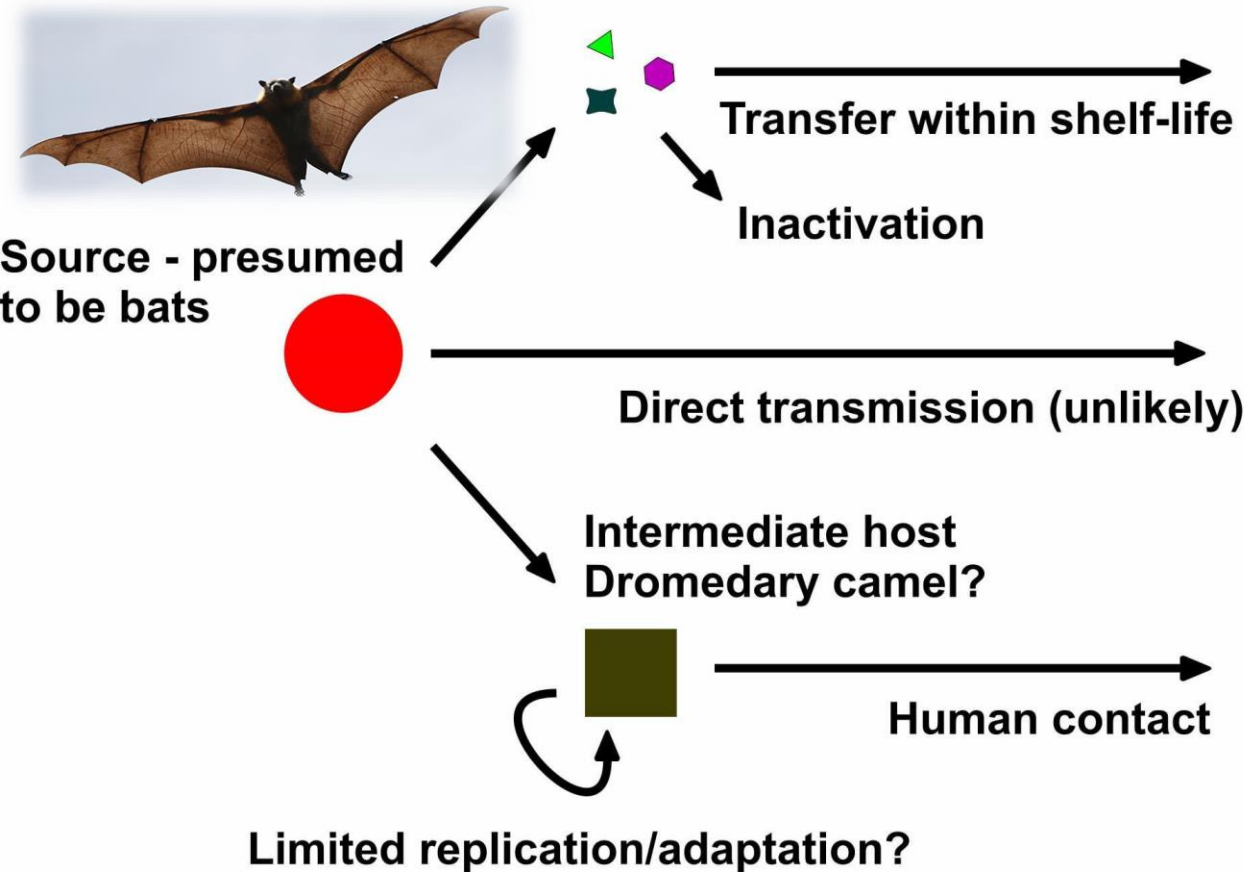
Incubation period is 10-14 days

❑ Transmitted between family members or in a health care setting, **the WHO said in an update .**

❑ Human-to-human transmission, the exact mode of transmission is unknown.



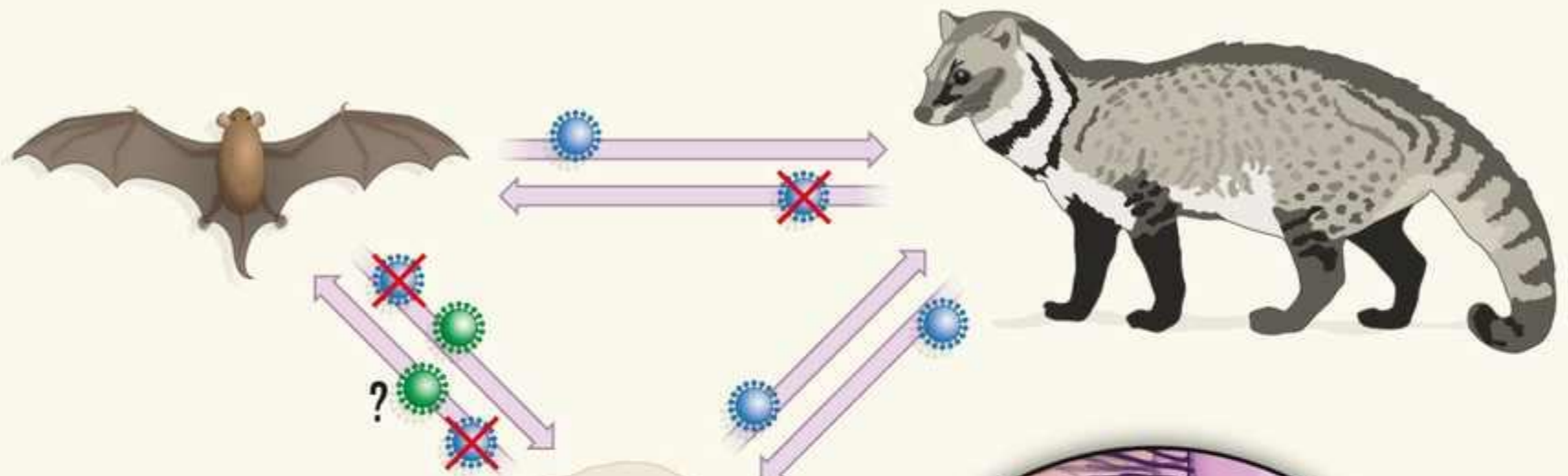
- Transmission between close contacts



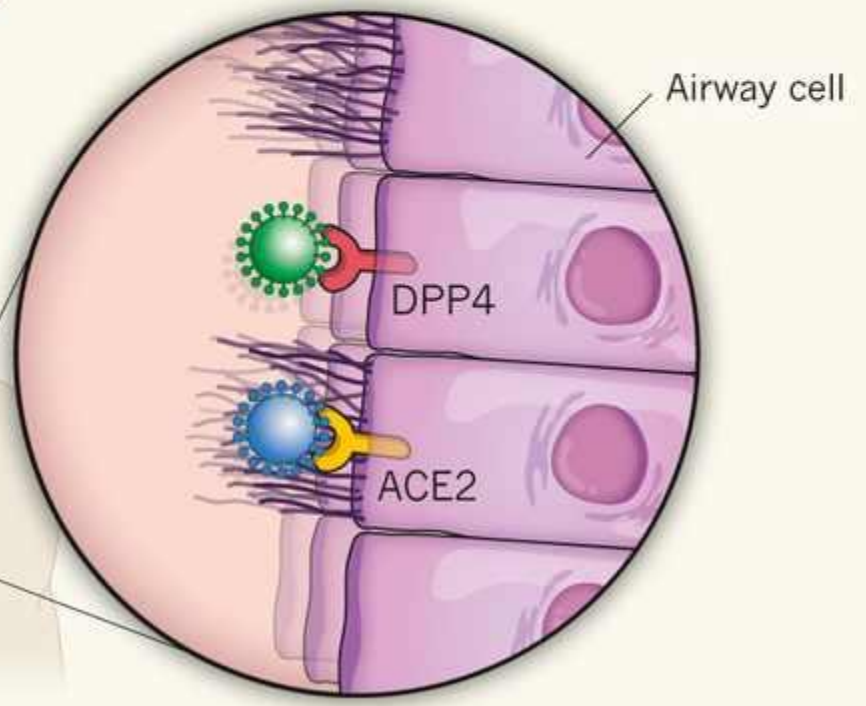
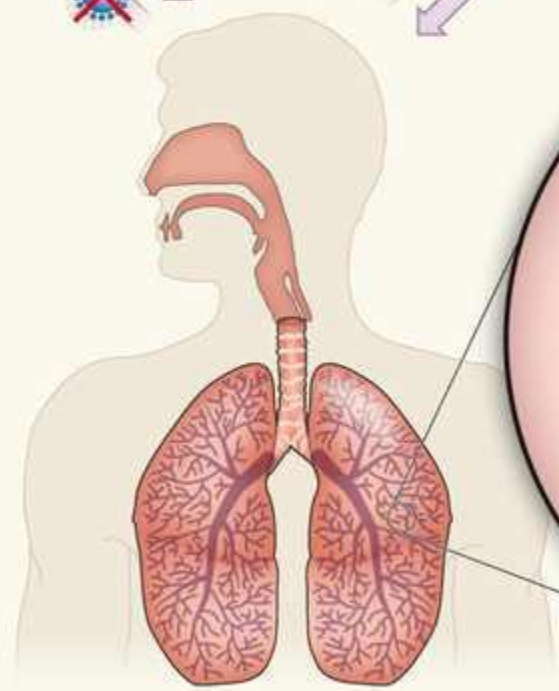
Infection

Transmission
close contact





 SARS-CoV
 hCoV-EMC



Insects
Attract bats



Bats
Excreta
Saliva
Parturition



HOW A ZOONOTIC MERS-COV INFECTION MAY BE INDIRECTLY ACQUIRED FROM A PRIMARY OR SECONDARY ANIMAL HOST

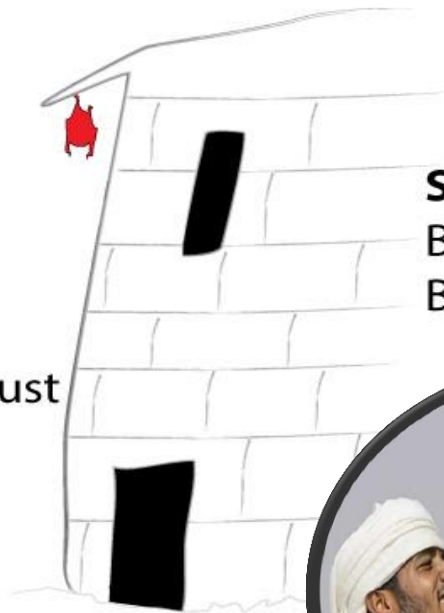


Palms
Dates
Sap/Drinks
Shade
Contact (climbing)

Dust/dirt
Contaminated



Wind
Stirs up dust



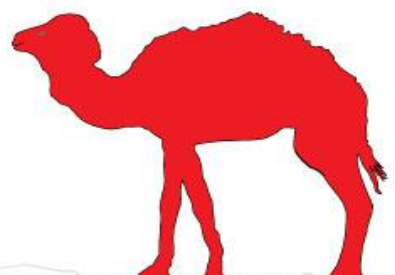
Structures/Caves
Bat roosts
Baboon/cat contact



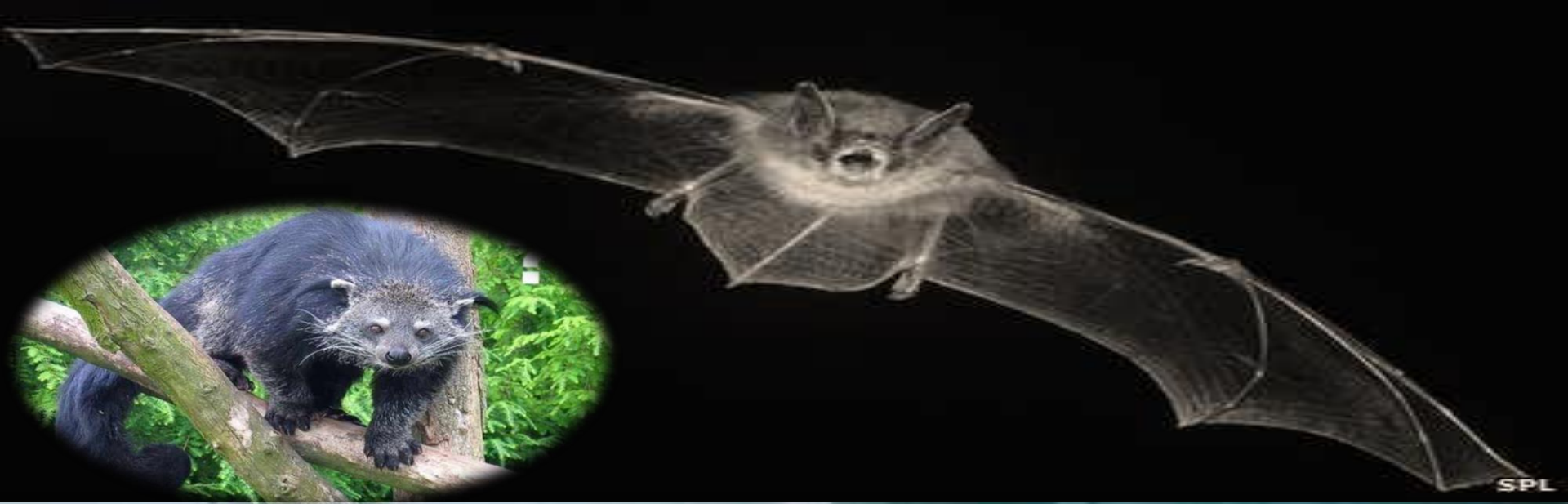
Baboons
Fresh excreta

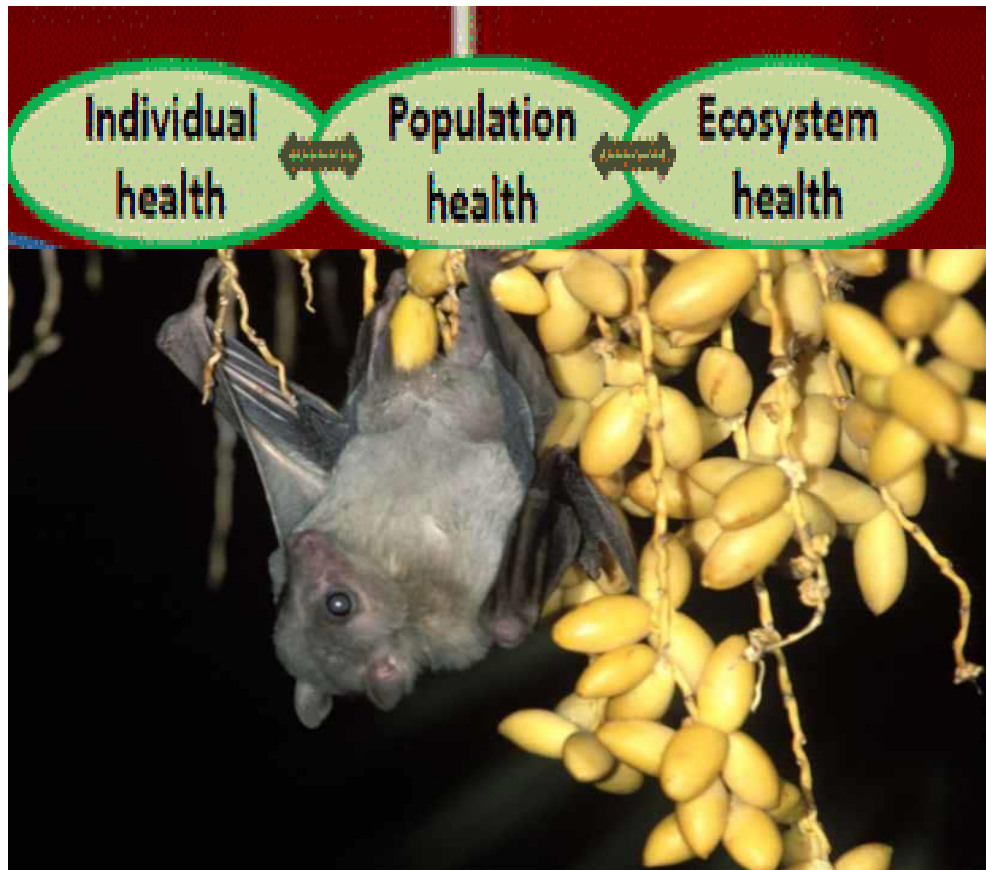


Cats
Fresh excreta
Pets
Close contact



Humans
Aerosol
Inhalation
Ingestion?







Clinical picture & epidemiology

- **Upper respiratory infections, similar to “colds” caused by rhinoviruses, but with a longer incubation period (average three days).**
 - **15-30% of respiratory illness in adults during winter months but lower respiratory infections were rare.**
 - **Antibodies appear early in childhood and are found in 90% in adults**

SARS Corona Virus

This has a unique pathogenesis because it causes both upper and lower respiratory tract infections and can also cause Gastroenteritis.

Recent History

- In 2003 The SARS epidemic resulted in over 8,000 infections, about 10% of which resulted in death.**



MERS- CoV Symptoms

- A person will show the symptoms after a week

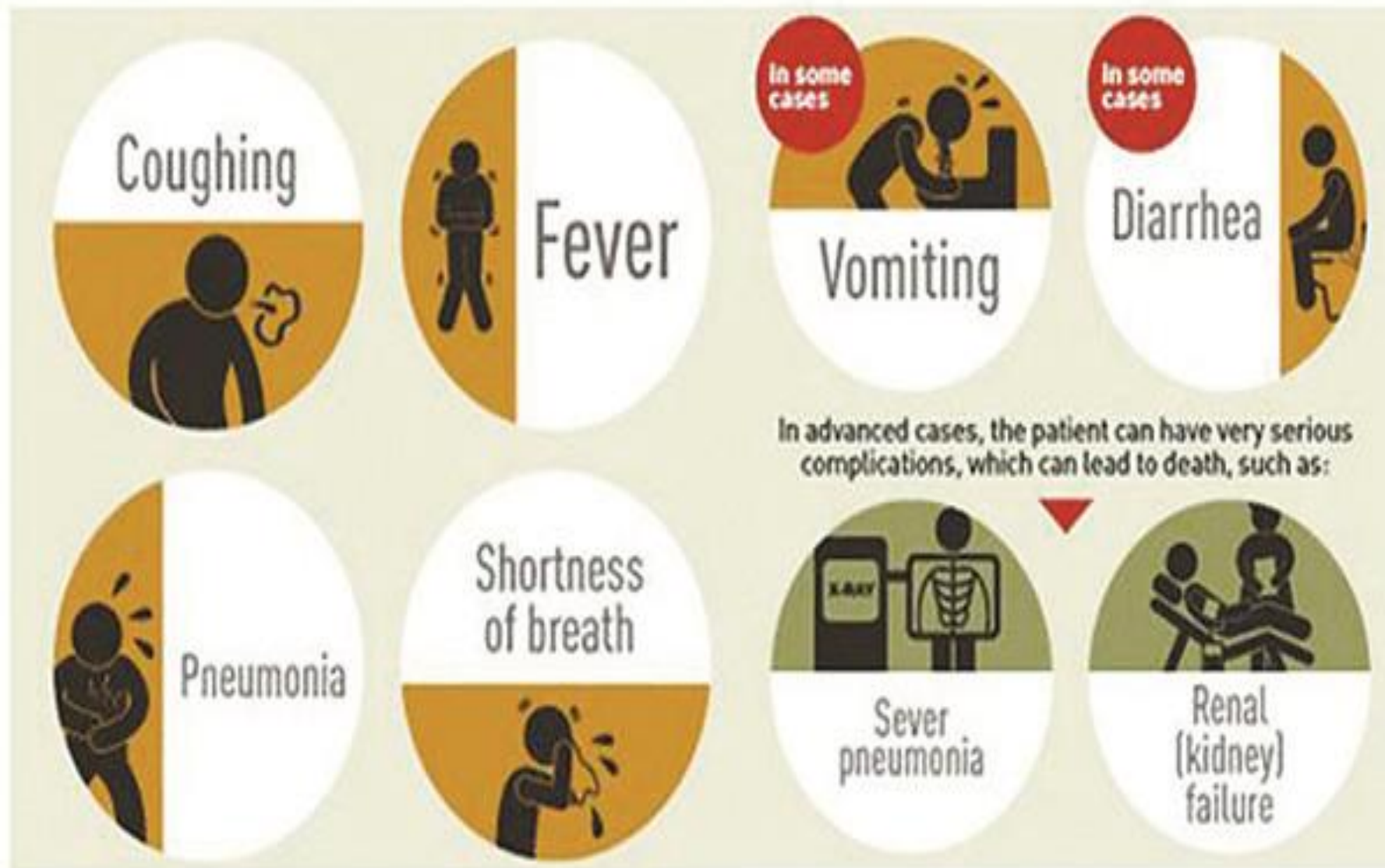
- Flu-like symptoms,

a heavy cough.

Some cases have had atypical presentations : Initially presented with abdominal pain and diarrhea and later developed respiratory complications



Signs and symptoms of MERS coronavirus infection

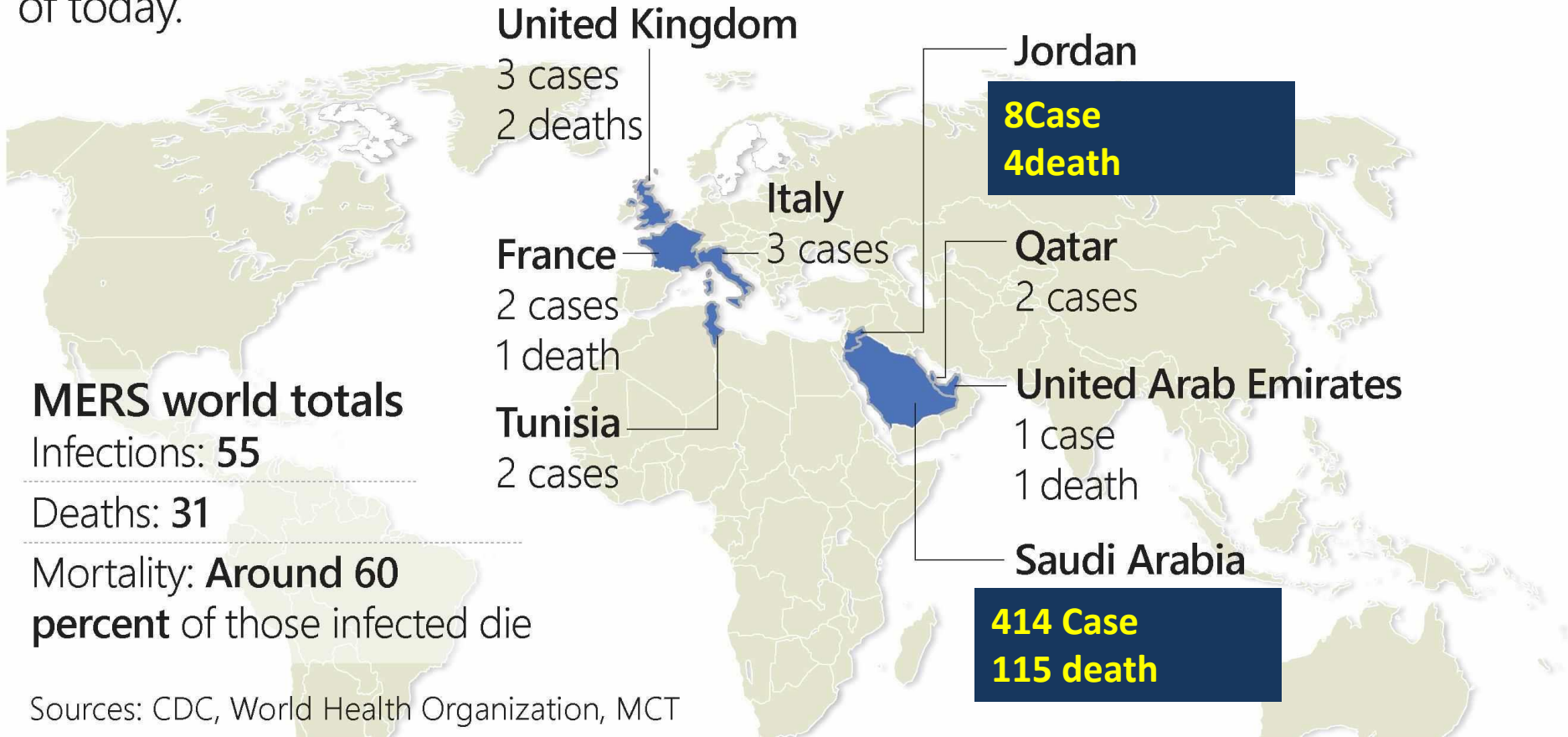


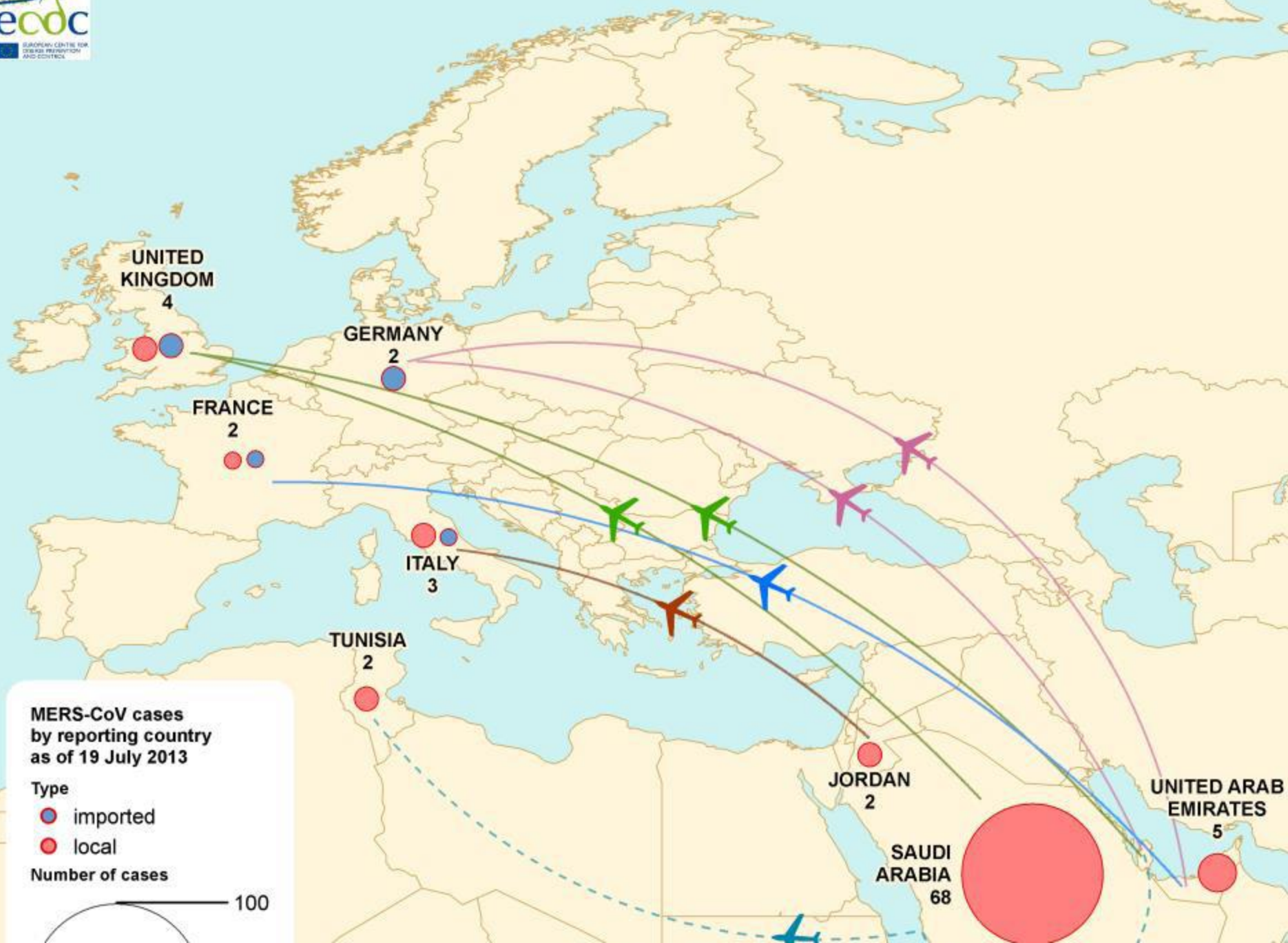
Epidemiological summary MERS-CoV Cases

- As of 16 April 2014, MERS-CoV cases have been reported in several countries, including
 - Saudi Arabia,**
 - Malaysia,**
 - Jordan**
 - Qatar,**
 - the United Arab Emirates,**
 - France**
 - Germany**
 - Italy**
 - UK**
 - USA**
 - Tunisia,**
 - Philippines.**
- The official WHO MERS count
- In 6 May 2014 there are 339 confirmed cases in Saudi Arabia, with 115 deaths.

MERS cases and deaths

Cases of Middle East respiratory syndrome coronavirus (MERS) worldwide as of today.





Immunity

As with other respiratory viruses, immunity develops but is not absolute.

Immunity against the surface projection antigen is probably most important for protection.

Resistance to reinfection may last several years, but reinfections with similar strains are common.

Most patients (>95%) with SARS developed an antibody response to viral antigens detectable by a fluorescent antibody test or ELISA.

It was important that the convalescent serum be collected more than 28 days after symptom onset.

Figure 5. Schematic representation of key responses to MERS-CoV related to outcome.

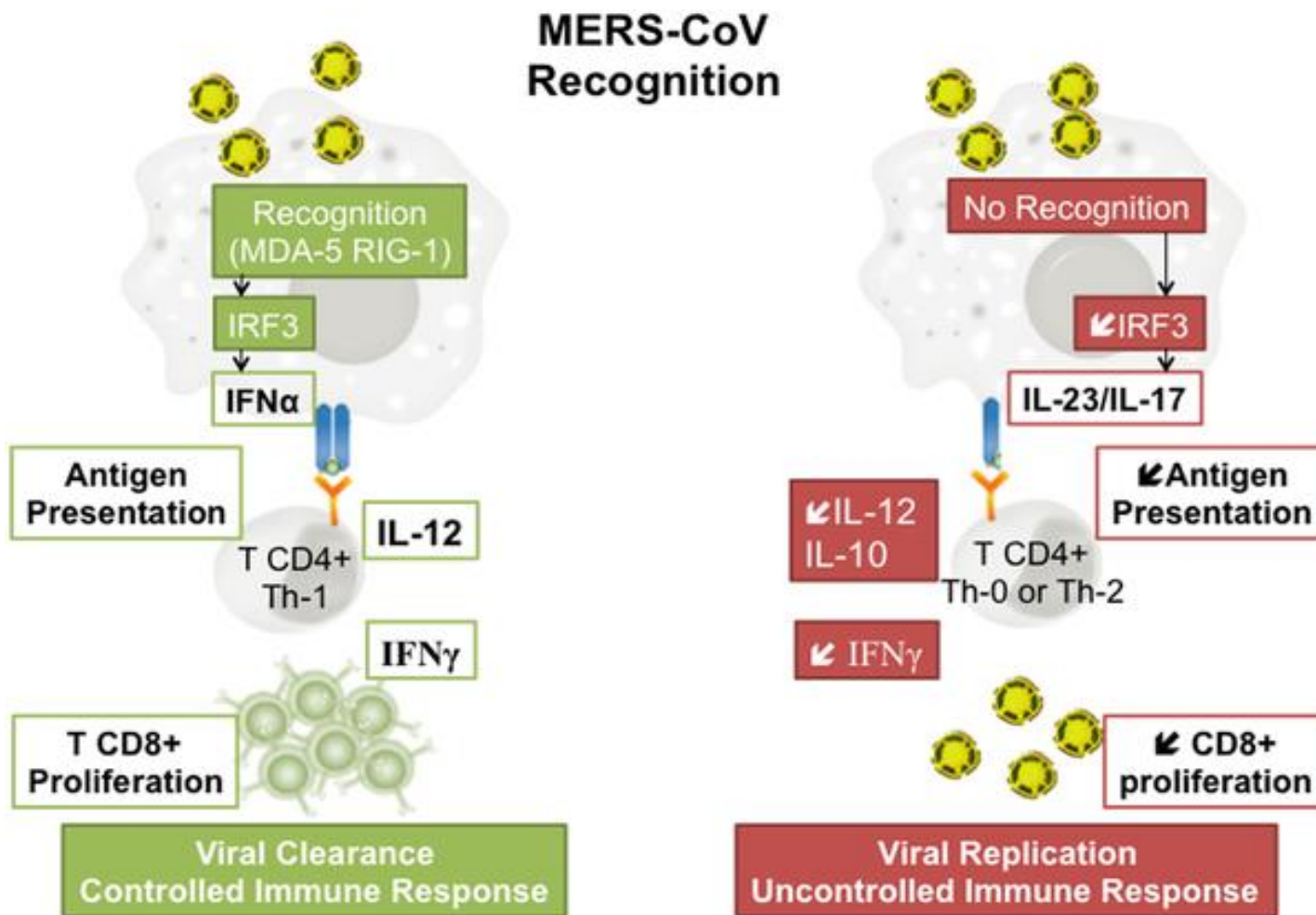


Figure 5

Faure E, Poissy J, Goffard A, Fournier C, et al. (2014) Distinct Immune Response in Two MERS-CoV-Infected Patients: Can We Go from Bench to Bedside?. PLoS ONE 9(2): e88716. doi:10.1371/journal.pone.0088716
<http://www.plosone.org/article/info:doi/10.1371/journal.pone.0088716>

Laboratory Diagnosis of coronaviruses

DIRECT DETECTION:

- **Antigen detection** in cells of respiratory secretions by IF or ELISA
- **NA detection** in respiratory secretions by RT-PCR

The detection of MERS-CoV in the first reported case was performed by a pan-coronavirus RT-PCR assay. This assay targets the gene of the RNA-dependent RNA polymerase

ISOLATION:

- **CoV are difficult to grow in CC.**
- **Reliable isolation of the virus is accomplished using human embryonic tracheal organ cultures.**
- **These methods are not routinely available.**

Serology:

- **Serologic tests are not routinely available.**

An alternative diagnostic approach is the detection of an antibody response against MERS-CoV, by immunofluorescence microscopy

Practical means to confirm coronavirus infection using **paired sera to detect rising or stationary high antibody level by:**

**- PASSIVE HAEMAGGLUTINATION
TEST**

- ELISA

TREATMENT

- **TREATMENT TRAILS**
- **TRAILS FOR PRODUCTION OF MERS-COV VACCINE**

VACCINE STUDIES IN MICE.

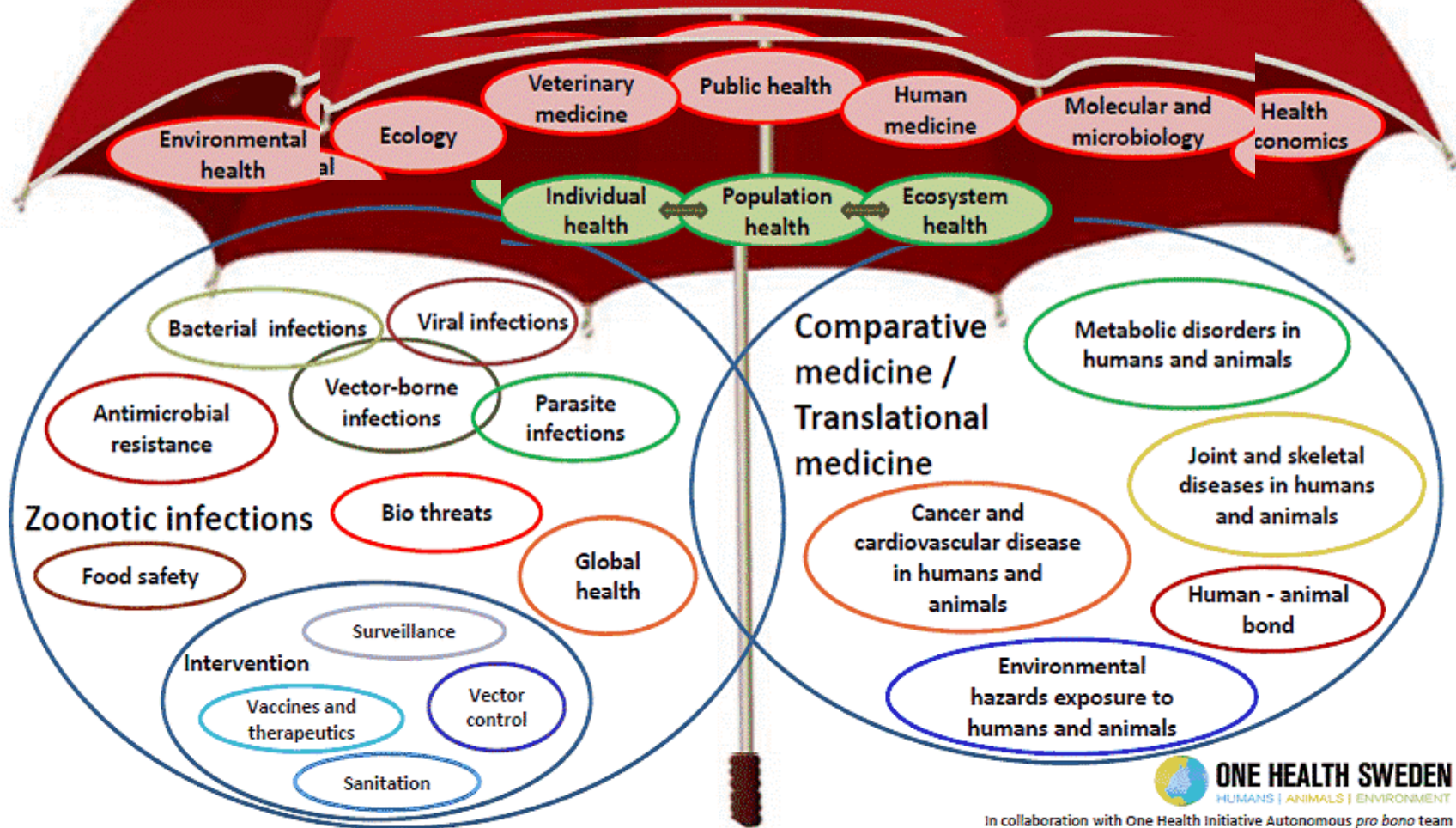
Compounds that have been suggested as possible drug candidates against MERS-CoV infections

Drug candidate	Observed effect	Study
INF- α	Reduction of MERS-CoV replication in pseudo-stratified HAE cultures	Kindler <i>et al.</i> (2013) ⁵⁰
pegylated IFN- α	Inhibition of MERS-CoV-induced CPE and reduction of the viral RNA levels in human lung epithelial and monkey kidney cell lines	de Wilde <i>et al.</i> (2013) ⁵²
INF- β	Reduction of the viral load in MERS-CoV-infected human lung epithelial and monkey kidney cell lines	Zielecki <i>et al.</i> (2013) ⁴⁸
INF- λ 3	Reduction of MERS-CoV replication in pseudo-stratified HAE cultures	Kindler <i>et al.</i> (2013) ⁵⁰
INF- α 2b	Reduction of the MERS-CoV-induced CPE and the viral protein levels in monkey kidney cell lines (more efficient when combined with Ribavirin)	Falzarano <i>et al.</i> (2013) ⁷²
Ribavirin	Reduction of the MERS-CoV-induced CPE and the viral protein levels in monkey kidney cell lines (more efficient when combined with INF- α 2b)	Falzarano <i>et al.</i> (2013) ⁷²
Corticosteroids	Significant improvement of the respiratory condition of a MERS-CoV patient (no direct effect has been proved)	Guberina <i>et al.</i> (2013) ⁶⁵
Cyclosporin A	Inhibition of the MERS-CoV-induced CPE in monkey kidney and a human liver cell lines	de Wilde <i>et al.</i> (2013) ⁵²
SB203580	Reduction of the viral load in a human lung epithelial cell line	Josset <i>et al.</i> (2013) ⁵⁴
ADS-J1	Inhibition of MERS-CoV pseudo-virus infection in human liver and mink lung cell lines	Zhao <i>et al.</i> (2013) ²⁹
HP-HAS	Inhibition of MERS-CoV pseudo-virus infection in human liver and mink lung cell lines	Zhao <i>et al.</i> (2013) ²⁹
MDL28170	Inhibition of MERS-CoV-S-mediated transduction of a human fetal lung fibroblast cell line	Gierer <i>et al.</i> (2013) ²⁵
NH4Cl	Inhibition of MERS-CoV-S-mediated transduction of a human fetal lung fibroblast cell line	
Camostat	Inhibition of MERS-CoV-S-mediated transduction of a human colon cell line	Gierer <i>et al.</i> (2013) ²⁵
N3	Inhibition of the proteolytic activity of MERS-CoV 3CLpro	Ren <i>et al.</i> (2013) ⁷³
CE-10	Inhibition of the proteolytic activity of MERS-CoV 3CLpro	Kilianski <i>et al.</i> (2013) ⁷⁴
MERS-CoV RBD	Reduction of the viral load in a MERS-CoV-infected monkey kidney cell line	Chen

**YET STOPPING THE SPREAD OF
INFECTION WAS POSSIBLE
THROUGH**

**EFFECTIVE CONTROL
MEASURES**

One Health



KEY POINTS IN CONTROL OF ANY COMMUNICABLE DISEASE

- Early case detection
- Swift isolation
- Thorough control of infection measures
- Vigorous identification and management of close contacts
- Public information for those at risk of infection
- Education of health care professionals

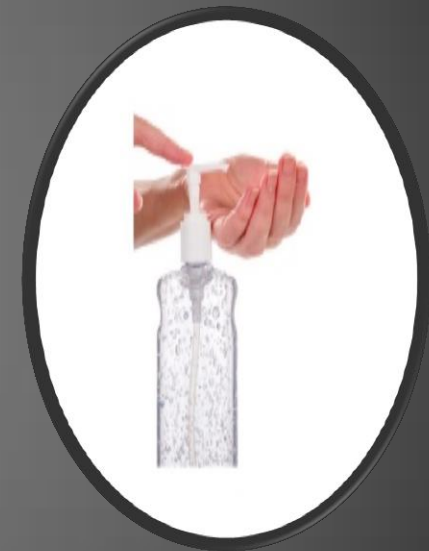
**Veterinary
medicine**

Public health

**Human
medicine**

Prevention Measures

- ✓ Because there are no treatments and no vaccine ,
- ✓ Keep away from someone with a heavy cough, use a tissue to cover the nose/mouth when coughing
- ✓ Sneezing, wiping and blowing noses, if a tissue isn't available, cough or sneeze into the inner elbow rather than the hand
- ✓ Wash hands with hot water and soap at least six or seven times a day
- ✓ Disinfect common surfaces as frequently as possible.
- ✓ Wash hands or use a sanitizer when in contact with common surfaces like door handles.





MERS Resources

- MERS overview:
<http://www.cdc.gov/coronavirus/mers/index.html>
- Case definitions and guidance:
<http://www.cdc.gov/coronavirus/mers/case-def.html>
- Additional MERS resources:
<http://www.cdc.gov/coronavirus/mers/related-materials.html>

MERS-COV RESOURCES

