Severe Acute Respiratory Syndrome (SARS)

FREQUENTLY ASKED QUESTIONS

What is SARS?
Severe acute respiratory syndrome (SARS) is a viral respiratory illness that was recognized as a global threat in March 2003, after first appearing in Southern China in November 2002.

What are the symptoms and signs of SARS?
The illness usually begins with a high fever (measured temperature greater than 100.4°F [>38.0°C]). The fever is sometimes associated with chills or other symptoms, including headache, general feeling of discomfort and body aches. Some people also experience mild respiratory symptoms at the outset. Diarrhea is seen in approximately 10 percent to 20 percent of patients. After 2 to 7 days, SARS patients may develop a dry, nonproductive cough that might be accompanied by or progress to a condition in which the oxygen levels in the blood are low (hypoxia). In 10 percent to 20 percent of cases, patients require mechanical ventilation. Most patients develop pneumonia.

What is the cause of SARS?
SARS is caused by a previously unrecognized coronavirus, called SARS-associated coronavirus (SARS-CoV). It is possible that other infectious agents might have a role in some cases of SARS.

How is SARS spread?
The primary way that SARS appears to spread is by close person-to-person contact. SARS-CoV is thought to be transmitted most readily by respiratory droplets (droplet spread) produced when an infected person coughs or sneezes. Droplet spread can happen when droplets from the cough or sneeze of an infected person are propelled a short distance (generally up to 3 feet) through the air and deposited on the mucous membranes of the mouth, nose, or eyes of persons who are nearby. The virus also can spread when a person touches a surface or object contaminated with infectious droplets and then touches his or her mouth, nose, or eye(s). In addition, it is possible that SARS-CoV might be spread more broadly through the air (airborne spread) or by other ways that are not now known.

What does "close contact" mean?
Close contact is defined as having cared for or lived with a person known to have SARS or having a high likelihood of direct contact with respiratory secretions and/or body fluids of a patient known to have SARS. Examples include kissing or embracing, sharing eating or drinking utensils, close conversation (within 3 feet), physical examination, and any other direct physical contact between people. Close contact does not include activities such as walking by a person or briefly sitting across a waiting room or office.
If I were exposed to SARS-CoV, how long would it take for me to become sick?
The time between exposure to SARS-CoV and the onset of symptoms is called the "incubation period."
The incubation period for SARS is typically 2 to 7 days, although in some cases it may be as long as
10 days. In a very small proportion of cases, incubation periods of up to 14 days have been reported.

How long is a person with SARS infectious to others?
Available information suggests that persons with SARS are most likely to be contagious only when
they have symptoms, such as fever or cough. Patients are most contagious during the second week of illness. However, as a precaution against spreading the disease, CDC recommends that persons with SARS limit their interactions outside the home (for example, by not going to work or to school) until 10 days after their fever has gone away and their respiratory (breathing) symptoms have gotten better.

Is a person with SARS contagious before symptoms appear?
To date, no cases of SARS have been reported among persons who were exposed to a SARS patient before the onset of the patient's symptoms.

What medical treatment is recommended for patients with SARS?
CDC recommends that patients with SARS receive the same treatment that would be used for a patient
with any serious community-acquired atypical pneumonia. SARS-CoV is being tested against various antiviral drugs to see if an effective treatment can be found.

If there is another outbreak of SARS, how can I protect myself?
If transmission of SARS-CoV recurs, there are some common-sense precautions that you can take that apply to many infectious diseases. The most important is frequent hand washing with soap and water or use of an alcohol-based hand rub. You should also avoid touching your eyes, nose, and mouth with unclean hands and encourage people around you to cover their nose and mouth with a tissue when coughing or sneezing.

For more information, please contact your physician or the Dickinson-Iron District Health Department.

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