FACT SHEET

Severe Acute Respiratory Syndrome(SARS)

What is SARS?

Severe Acute Respiratory Syndrome (SARS) is a disease that can cause severe difficulty breathing and pneumonia.

Who can be infected?

Anyone can become infected but cases of SARS have been reported mainly among people who have had direct close contact with an infected person, such as those sharing a household with a SARS patient and healthcare workers who did not use infection prevention procedures while taking care of a SARS patient. In the United States, there have been signs of community spread, though spread to close contacts and healthcare workers has not occurred.

How does SARS Spread?

The main way that SARS appears to spread is by close person-to-person contact. Most cases of SARS have involved people who cared for or lived with someone with SARS, or who had direct contact with infectious material (for example, respiratory secretions) from a person who has SARS. Potential ways in which SARS can be spread include touching the skin of other people or objects that are dirty with infectious droplets and then touching your eye(s), nose, or mouth. This can happen when someone who is sick with SARS coughs or sneezes droplets onto themselves, other people, or nearby surfaces. It also is possible that SARS can be spread more broadly through the air or by other ways that are currently unknown.

What are the symptoms of SARS?

Symptoms of SARS will begin within 10 days of exposure. In general, SARS begins with a fever greater than 100.4°F [>38.0°C]. Other symptoms may include headache, an overall feeling of discomfort, and body aches. Some people also experience mild respiratory symptoms. After 2 - 7 days, SARS patients may develop a dry cough and have trouble breathing, frequently leading to pneumonia.

What is the cause of SARS?

Scientists at CDC and other laboratories have detected a previously unknown virus. This has been named SARS-associated coronavirus (SARS-CoV).

Are there travel recommendations related to SARS?

When SARS is occurring in the world, CDC will issue recommendations and guidelines for people who may be affected. CDC will also issue travel alerts for areas where SARS may be present but no transmission is occurring. In these areas, CDC recommends that U.S. travelers observe precautions to safeguard their health. These precautions include frequent handwashing and staying away from ill people.

Travelers to areas reporting SARS cases should avoid settings where transmission is most likely to occur, such as health care facilities, caring for SARS patients, and residences of SARS patients.

What should people do if they think they might have SARS?

People who have had potential exposure to SARS and/or have had contact with someone with SARS should monitor their health status for 10 days after their last possible exposure. People with symptoms of SARS (fever greater than 100.4°F [>38.0°C] accompanied by a cough and/or difficulty breathing) should limit their contact with others and call their healthcare provider to arrange to be seen in a safe manner at a clinic or emergency room. Do not go to a clinic or emergency room without calling ahead. To help healthcare providers make a diagnosis, tell them about any recent travel to places where SARS has been reported or whether there was contact with someone who had these symptoms. Cover your mouth and

nose with tissue when coughing or sneezing. If you have a surgical mask, wear it during close contact with other people. A mask can reduce the number of droplets coughed into the air.

If you have SARS and are being cared for at home, you should:

Follow the instructions given by your state or local health department, which will include: Staying home until 10 days after temperature has returned to normal and respiratory symptoms have gone away. Other instructions may be:

- Do not go to work, school, or public areas.
- Wash your hands often and well, especially after you have blown your nose.
- Cover your mouth and nose with tissue when you sneeze or cough.
- If possible, wear a surgical mask when around other people in your home. If you can't wear a mask, the members of your household should wear one when they are around you.
- Do not share silverware, towels, or bedding with anyone in your home until these items have been washed with soap and hot water.
- Clean surfaces (counter or tabletops, door knobs, bathroom fixtures, etc.) that have been contaminated by body fluids (sweat, saliva, mucous, or even vomit or urine) from the SARS patient with a household disinfectant used according to the manufacturer's instructions. Wear disposable gloves during all cleaning. Throw these out when you are done. Do not re-use them. If clothing has become soiled with body fluids, it should be changed.
- Follow these instructions for 10 days after fever and respiratory symptoms are gone.

If you are caring for someone at home who has SARS, you should:

- Be sure that the patient has contacted a healthcare provider and is following instructions for medication and care.
- Be sure that all members of your household are washing their hands frequently with soap and warm water or using alcohol-based hand wash.
- Wear disposable gloves if you have direct contact with body fluids of a SARS patient. However,
 the wearing of gloves is not a substitute for good hand hygiene. After contact with body fluids of
 a SARS patient, remove the gloves, throw them out, and wash your hands. Do not wash or reuse the gloves.
- Encourage patients with SARS to cover their mouth and nose with a tissue when coughing or sneezing. If possible, the patient should wear a surgical mask during close contact with other people in the home. If the patient cannot wear a surgical mask, other members of the household should wear one when in the same room with that person.
- Do not use silverware, towels, bedding, clothing, or other items that have been used by the patient until these items have been washed with soap and hot water.
- Clean surfaces (counter or tabletops, door knobs, bathroom fixtures, etc.) that have been
 contaminated by body fluids (sweat, saliva, mucous, or even vomit or urine) with a household
 disinfectant used according to the manufacturer's instructions. Wear disposable gloves during all
 cleaning. Throw these out when done. Do not re-use them. If clothing has become soiled with
 body fluids, it should be changed.
- Follow these instructions for 10 days after the patient's fever and respiratory symptoms have gone away.
- If you develop a fever or respiratory symptoms, call your healthcare provider immediately and tell him or her that you have had close contact with a SARS patient.

What laboratory tests are available for SARS?

Several laboratory tests can be used to detect SARS-CoV. A reverse transcription polymerase chain reaction (RT-PCR) test can detect SARS-CoV in clinical specimens such as blood, stool and nasal secretions. Diagnosis is a combination of history, symptoms and tests results.

What should be done for healthy people returning to the U.S. from areas of risk?

The risk in a healthy individual traveler is extremely low. A traveler with no symptoms needs to monitor for a fever > 100.4 F and/or cough for 10 days after leaving the affected area. If symptoms develop, contact a healthcare provider immediately by phone. Do not go to a clinic or hospital without phoning first so proper isolation precautions can be immediately taken to prevent spread.

This fact sheet provides basic information about the disease and what is being done to fight its spread. To find out more about SARS, go to CDC's SARS web site: www.cdc.gov/niosh/topics/SARS/