Severe Acute Respiratory Syndrome (SARS)

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Severe acute respiratory syndrome (SARS) is a condition of unknown cause that has effected patients in Asia, North America, and Europe. Although the possible spread of SARS is of concern, it remains a rare disease. To date there have been about 2300 cases of SARS worldwide and less than 100 deaths from it. The signs and symptoms of SARS are similar in many ways to those of the flu. They include fever, muscle aches, headache, sore throat, dry cough, shortness of breath, or difficulty breathing. These can progress to pneumonia, decreased oxygen in the blood, and ultimately to acute respiratory distress. The severity of illness might be highly variable, ranging from mild illness to death. Although a few close contacts of patients with SARS have developed a similar illness, the majority have remained well. Some close contacts have reported a mild, febrile illness without respiratory signs or symptoms, suggesting the illness might not always progress to the respiratory phase. As the CDC (Centers for Disease Control) and WHO (World Health Organization) learn more about this condition the definition of a "suspect case" of SARS continues to evolve. At this time the definition is:

Persons with respiratory illness of unknown cause with onset since February 1, 2003

- Has one or more signs or symptoms of respiratory illness including cough, shortness of breath, difficulty breathing, hypoxia, or x-ray findings of pneumonia or acute respiratory distress syndrome AND
- Fever > 100.4 degrees Fahrenheit AND one or more of the following:
- *Close contact* within 10 days of onset or symptoms with a person under investigation or suspected of having SARS
- Travel within 10 days of onset of symptoms to an area with documented transmission of SARS.

*Close contact is defined as having cared for, having lived with, or having had direct contact with respiratory secretions and/or body fluids of a patient suspected of having SARS.

**Areas with transmission of SARS: Hong Kong Special Administrative Region and Guandong province, Peoples' Republic of China, Hanoi, Vietnam, Singapore, and Toronto, Canada.

What are the Signs and Symptoms of SARS?

The majority of patients identified as having SARS have been adults aged 25--70 years who were previously healthy. Few suspected cases of SARS have been reported among children aged <15 years. The incubation period for SARS is typically 2--7 days; however, isolated reports have suggested an incubation period as long as 10 days. The illness begins generally with a prodrome of fever (>100.4°F [>38.0°C]). Fever often is high, sometimes is associated with chills and rigors, and might be accompanied by other symptoms, including headache, malaise, and muscle aches. At the onset of illness, some persons have mild respiratory symptoms. After 3--7 days, a lower respiratory phase begins with the onset of a dry, nonproductive cough or dyspnea (difficulty breathing), which might be accompanied by or progress to decreased oxygen content in the blood. In 10%--20% of cases, the respiratory illness is severe enough to require mechanically assisted breathing. The case-fatality rate among persons with illness meeting the current WHO case definition of SARS is approximately 3%.

What Should I Do if I Think I May Have SARS?

The best way to find out if you may have SARS is to consult with your physician. Tell him or her about your symptoms, any recent travel you had to an area of transmission, and whether you were in contact with someone who had symptoms of SARS. Your doctor will decide whether to order certain laboratory tests or x-rays to help diagnose this syndrome. He or she will also prescribe appropriate medications, if any.

How Can I Protect Myself from SARS?

If you believe you may be exposed to someone with SARS while on the job, report this immediately to your supervisor. Protective measures include avoidance of direct contact with an individual who has been diagnosed with SARS or is suspected of having it. This is unlikely to occur in the course of your work at Amtrak. However, if direct contact with such and individual is unavoidable, then wearing latex or vinyl gloves and a facemask is appropriate. Since the origin of SARS seems to be from the Far East, the CDC is taking steps to advise travelers arriving in the United States from there to monitor their health and be especially aware of the symptoms to watch for over the next 7-10 days. Since our traveling population does not typically include those arriving directly from an area of transmission, the risk of contracting SARS is extremely low. We are not recommending the routine use of any personal protective gear such as respirators at this time. Maintaining good work practices such as frequent hand watching is prudent. Minimizing hand contact with your face, mouth, and nose is another good way to avoid transmitting any potentially infectious material. No vaccine or prophylactic medication for SARS is known or available at this time.

For Further Information: Contact your Regional Health Services Office or look on the Web at http://www.cdc.gov/ncidod/sars http://www.cdc.gov/ncidod/sars. Global case counts are available at http://www.who.int.