

GCM teleconference – Note for the Records

Date : Friday 10 January at 2pm GVA time.

Subject: Pneumonia in Wuhan, China.

Agenda:

1. Overview of emerging data on disease epidemiology
2. Overview of research priorities and a collaborative process to offer support -if requested- to the national authorities in China and elsewhere.
3. Mechanisms for coordination/collaboration in terms of international research
4. Next steps including considerations of potential spread scenarios vis a vis research priorities

1. Overview of emerging data on disease epidemiology

WHO China Country Office was informed of cases of pneumonia of unknown etiology (unknown cause) detected in Wuhan City, Hubei Province of China. As of 5 January 2020, a total of 59 patients with pneumonia of unknown etiology have been reported to WHO by the national authorities in China from 12 to 29 December 2019. Of the 59 cases, 7 are severely ill, no deaths reported.

The causal agent has not yet been identified or confirmed. The genetic sequence is not yet available. WHO DG is discussing with the Chinese Health Authorities to share the genetic sequence of the virus.

National authorities report that all patients are isolated and receiving treatment in Wuhan medical institutions. The clinical signs and symptoms are mainly fever, with a few patients having difficulty in breathing, and chest radiographs showing invasive lesions of both lungs.

Preliminary information from the Chinese investigation team, no evidence of significant human-to-human transmission and no health care worker infections have been reported.

2. Overview of the research priorities.

WHO shared with the GCM members the outcomes of the discussion with the SAG.

Diagnostics

- Diagnostic tools and standardized methodology for data collection are critical to understand the epidemiology of the pneumonia outbreak and the risks
- In the absence of known sequence, pan-coronavirus assays could be developed and used, as a health intervention or under a research protocol, for travel entry screening in neighboring countries and/or at entry point with people likely to have history of travel from the Wuhan province, especially in the context of the upcoming Chinese new year's eve.
- A surveillance strategy should include animal testing component when relevant.

Therapeutic and Vaccine candidates

- 2 clinical characterization protocols exist: SPRINT SARI and ISARIC protocols have been shared with Chinese collaborators for standardized collection of SARI.

- WHO will develop a pipeline of investigational therapeutics and vaccines against the novel coronavirus that could be granted access to under research protocol and will make it available to the scientific community.
- WHO developed guidance on how to reliably evaluate MERS-CoV therapeutics and vaccines that will be adapted to this novel coronavirus.
- WHO will work on a evidence-based framework to transparently select most promising/advanced therapeutics and vaccines candidates to move forward for clinical evaluation.

3. Mechanisms for coordination/collaboration in terms of international research

SAG members were invited to suggest research priorities and submit proposal for collaboration.

4. Next Steps

1. WHO R&D Blueprint will set up regulars (weekly) calls to inform GCM partners on the evolution of the outbreak and the research activities
2. WHO R&D Blueprint will produce comprehensive mapping of all therapeutics and vaccine candidates and develop generic protocols for clinical evaluation to be available on WHO website
3. GCM members will provide updated on their R&D activities and proposals to WHO on future collaboration