

# Predictors of Mortality Among Confirmed, Symptomatic MERS Cases in KSA, 2012-2015

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## Background

- Human coronaviruses (HCoVs) first described in 1960s and associated with the common cold.
- In 2003, Severe Acute Respiratory Syndrome (SARS) was identified, and in 2012, Middle East Respiratory Syndrome (MERS-CoV).
- SARS and MERS both have a relationship with the Acute Respiratory Distress Syndrome (ARDS), and both have high case fatality rates.
- 1,698 confirmed MERS cases reported globally from 26 different countries. Out of these, 609 patients have died (mortality rate ≈ 36%) (as of April 11, 2016).
- In Saudi Arabia alone, total of 1,371 confirmed MERS cases reported, of which 587 died (mortality rate ≈ 43%) (as of April 11, 2016).
- MERS cases have occurred in sporadic and clustering patterns.

## Objectives

- Describe the survival experience of confirmed symptomatic MERS patients in the Kingdom of Saudi Arabia from September 2012 to December 2015.
- Look for factors significantly related to their survival experience.

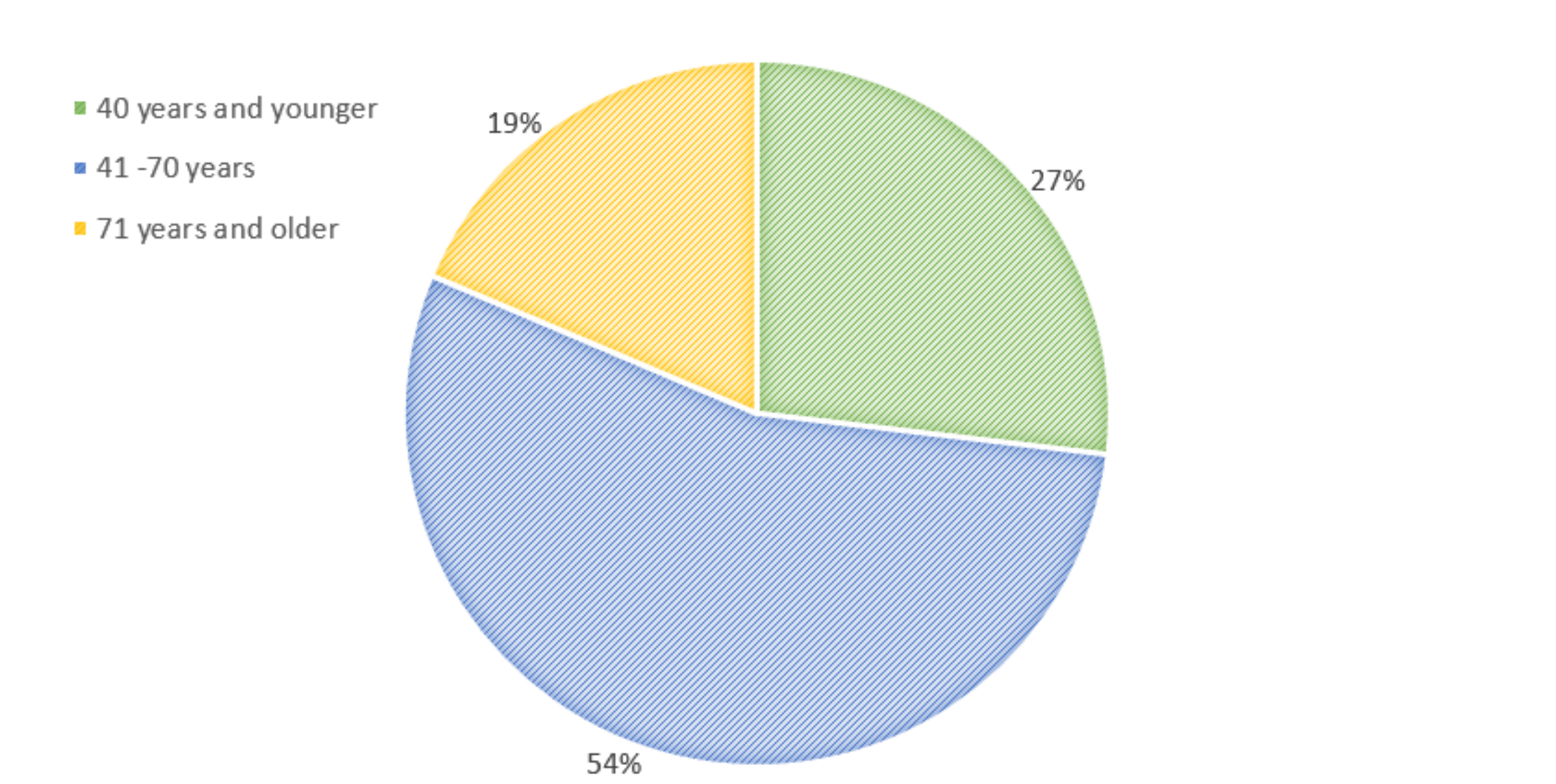
## Methods

- Dataset received from Saudi’s Ministry of Health (SMoH) for period of 2012 through 2015.
- Descriptive analysis and Cox Proportional Hazards Model were applied to address relationship between the survival of patients and variables of interest.

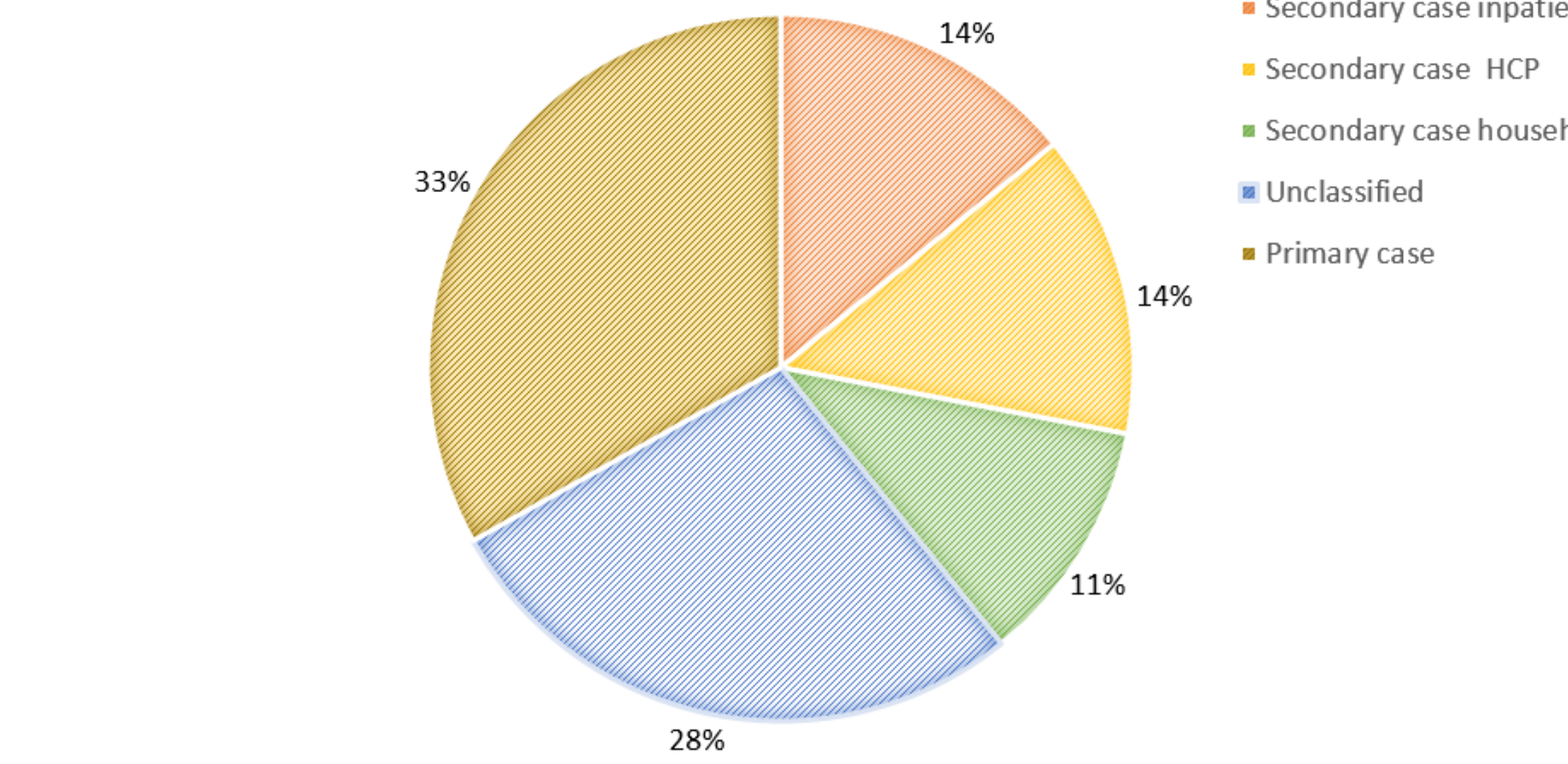
## Results

- Total of 1,128 confirmed symptomatic MERS cases reported to SMoH from September 2012 through December 2015 (mortality rate = 48.67%).
- By age group, cases aged 71 and older had an 80% mortality rate, dropping to 50% in the 41-70 year old age group, and to 25% in the 40 and under group.
- Among those who died, 37.52% were primary cases, 31.69% were unclassified, 20.77% were secondary cases acquired from hospitals, 7.29% were secondary case household, and 2.73% were secondary case HCP.
- No significant association was observed between camel contact and mortality due to MERS.\*

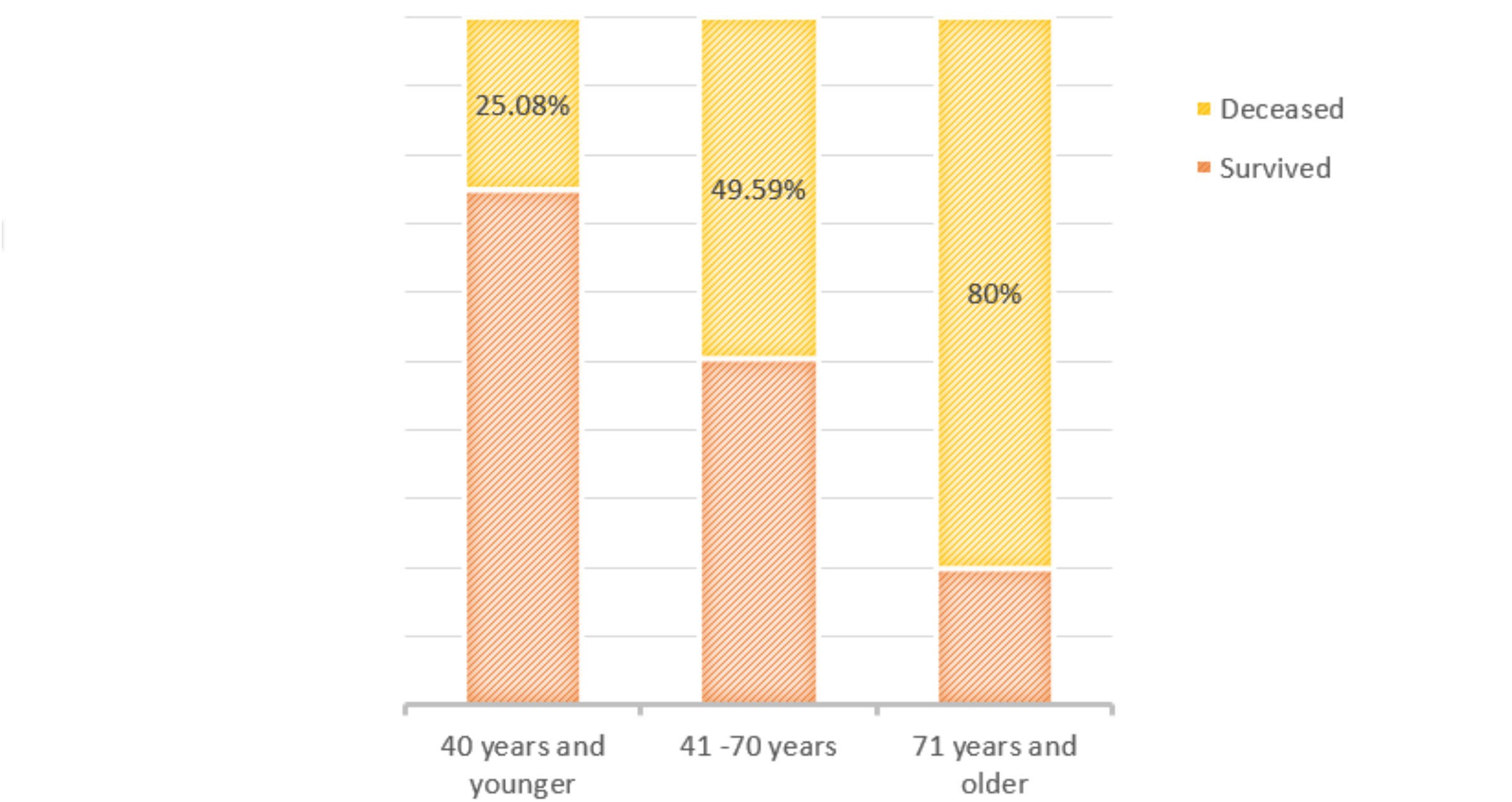
AGE DISTRIBUTION FOR CONFIRMED SYMPTOMATIC MERS CASES, KSA, 2012-2015



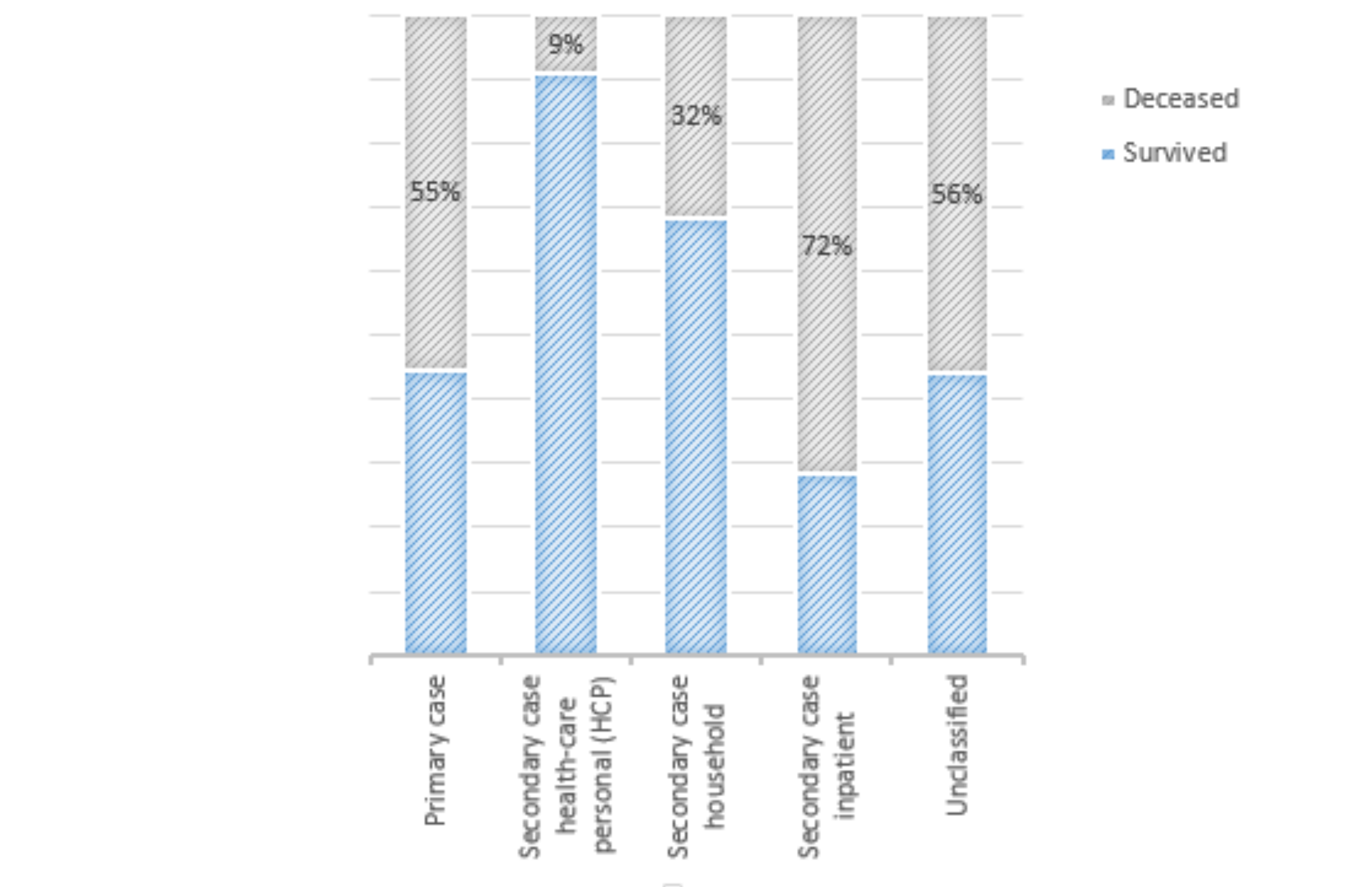
PROBABLE SOURCE OF INFECTION FOR CONFIRMED SYMPTOMATIC MERS CASES, KSA, 2012-2015



MORTALITY RATE BY AGE DISTRIBUTION FOR CONFIRMED SYMPTOMATIC MERS CASES, KSA, 2012-2015



MORTALITY RATE BY AGE DISTRIBUTION FOR CONFIRMED SYMPTOMATIC MERS CASES, KSA, 2012-2015



## Results (cont.)

- Hazard of death among inpatients was 40.9% more than the hazard of death among primary cases.\*
- Hazard of death among secondary case HCP was 18.5% of the hazard of death among primary cases.\*
- Among individuals 71 years old or older, the hazard of death was 236% more than the hazard of death among individuals aged 40 and under.\*

\* Controlling for other demographic characteristics among patients diagnosed in the same year.

| Hazard ratios of MERS mortality factors among confirmed symptomatic MERS cases, KSA, 2012-2015  |                      |  |            |              |              |         |                    |              |              |         |
|---|----------------------|--|------------|--------------|--------------|---------|--------------------|--------------|--------------|---------|
|   |                      |  | Unadjusted |              |              |         | Adjusted           |              |              |         |
| Variable  | Level                | Reference Group                        | HR         | 95% Lower CI | 95% Upper CI | p-value | HR                 | 95% Lower CI | 95% Upper CI | p-value |
| Saudi / Non-Saudi   |                      | Non-Saudi                              | 2.001      | 1.601        | 2.502        | <.0001  | 1.300 <sup>+</sup> | 1.028        | 1.644        | 0.0285  |
| Gender  |                      | Female                                 | 1.180      | 0.981        | 1.420        | 0.0786  | 0.881              | 0.727        | 1.067        | 0.1936  |
| History of camel contact  |                      | Cases with no history of camel contact | 1.204      | 0.869        | 1.668        | 0.2643  | 1.103              | 0.785        | 1.550        | 0.5716  |
| Probable source of infection  | 2ndry case inpatient | Primary                                | 1.481      | 1.177        | 1.862        | 0.0008* | 1.409              | 1.105        | 1.798        | 0.0057* |
|   | 2ndry case HCP**     |  | 0.157      | 0.093        | 0.265        | <.0001* | 0.185              | 0.105        | 0.327        | <.0001* |
|   | 2ndry case household |  | 0.603      | 0.430        | 0.846        | 0.0034* | 0.631              | 0.445        | 0.895        | 0.0099* |
|   | Unclassified         |  | 1.073      | 0.876        | 1.314        | 0.4965  | 1.110              | 0.900        | 1.370        | 0.3281  |
| Region  | Eastern              | Central                                | 1.366      | 1.061        | 1.759        | 0.0156* | 1.480              | 1.130        | 1.940        | 0.0045* |
|   | Northern             |  | 1.592      | 0.973        | 2.602        | 0.0640  | 1.896              | 1.149        | 3.129        | 0.0123* |
|   | Southern             |  | 1.022      | 0.648        | 1.612        | 0.9243  | 1.072              | 0.675        | 1.703        | 0.7690  |
|   | Western              |  | 1.232      | 1.016        | 1.493        | 0.0339* | 1.346              | 1.087        | 1.667        | 0.0065* |
| Age (year)  | 41-70                | 40 and less                            | 2.015      | 1.567        | 2.592        | <.0001* | 1.525              | 1.175        | 1.980        | 0.0015* |
|   | 71 and more          |  | 3.717      | 2.834        | 4.876        | <.0001* | 2.520              | 1.890        | 3.361        | <.0001* |
| Year***   | 2012+2013            | 2015                                   | 1.234      | 0.953        | 1.596        | 0.1102  | -                  | -            | -            | -       |
|   | 2014                 |  | 1.299      | 1.079        | 1.563        | 0.0057* | -                  | -            | -            | -       |
| * Statistical significance    ** HCP: Health Care Personal    *** Year was stratified in the adjusted model    + The adjusted model does not include age, due to the strong association between age and nationality. In particular, 24% of Saudi are 71 and older, compared to 6% of non-Saudi are 71 and older |                      |  |            |              |              |         |                    |              |              |         |

\* Statistical significance \*\* HCP: Health Care Personal \*\*\* Year was stratified in the adjusted model + The adjusted model does not include age, due to the strong association between age and nationality. In particular, 24% of Saudi are 71 and older, compared to 6% of non-Saudi are 71 and older

## Discussion

- Older age is associated with MERS mortality.
- Probable source of infection can play a protective role or increase MERS mortality.
- MERS mortality rate is also linked to different geographical distribution.
- Underreporting may be an explanation for the lack of association between camel contact and MERS mortality.

## Recommendations

- Nearly 30% of confirmed symptomatic MERS cases in Saudi Arabia acquired infection within health care facilities.
- Infection control compliance must be improved.
- Protocol should be enforced in all health care facilities.