ENVI in Focus



Novel Coronavirus Outbreak

Following the <u>extraordinary Council meeting of health ministers</u> on 13 February 2020, this paper summarises the latest available information on the novel coronavirus outbreak, and the Union's preparedness and response actions.

Coronavirus basics

Coronaviruses are a family of viruses that can be found in humans and animals. These viruses originate from animals, transmitted from animals to humans (**zoonotic viruses**), and then spread from one individual to the other. The way of human-to-human transmission is still to be confirmed, but most likely it is via droplets in personal contact. In humans, they cause various **respiratory infections**, from the common cold to more severe, potentially lethal respiratory diseases. The virus is named after its morphology, as the spikes on the surface of the virus create an image similar to a crown or a solar corona.



Studies identified that the 2012-2013 Middle-East Respiratory Syndrome coronavirus (MERS-CoV) came from dromedary camels, and the 2002-2003 Severe Acute Respiratory Syndrome (SARS) from civet cats. Research is currently undergoing to **detect the animal origin of the new coronavirus**. An earlier study suggested snakes but later it was discarded. According to <u>current knowledge</u>, the virus might come from bats, and transmitted to humans via an intermediary host animal, probably the pangolins, but this needs further investigation and confirmation. The **geographic origin** of the virus is Wuhan, a city in Central China's Hubei province.

Given the year of the outbreak, and due to the fact that it is a **new virus strain** that has not been identified in humans before, the virus was named by the World Health Organisation (WHO) temporarily as the novel (i.e. new) coronavirus, **2019-nCoV**. On some occasions, it was also referred to as the novel coronavirus pneumonia or **NCP**. On 11 February 2020, the <u>WHO announced</u> that they named the virus **COVID-19**, <u>co</u>rona <u>vi</u>rus <u>d</u>isease. The <u>International Committee</u> <u>on Taxonomy of Viruses</u> classified the new virus as severe acute respiratory syndrome coronavirus 2, **SARS-CoV-2**.

Global situation

The WHO publishes daily <u>situation reports</u> on the evolution of the disease. According to the <u>latest available data</u>, on 12 February 2020 there were **over 45.000 cases confirmed worldwide**, of which more than 2.000 appearing in the last 24 hours. The focal point of the disease remains in China, where the number of confirmed cases is in the range of 44.700, and the death toll is now over 1.100.

Based on the likelihood of further spread, the impact on human health, and the effectiveness of preparedness and response measures, the WHO assesses the **risk to be very high for China, and high at regional and global level**. On 30 January 2020, the WHO <u>declared</u> **public health emergency of international concern**; and on 3 February 2020, it published its <u>strategic preparedness and response plan</u> to deal with the crises.

State of play in the EU/EEA and the UK

The European Centre for Disease Prevention and Control (ECDC) publishes <u>daily situation updates for the EU/EEA and</u> the UK. Pursuant to the latest update, **43 cases** have been reported from eight countries, with the highest number of cases in Germany (16) and the lowest in Belgium, Finland and Sweden (one each).

In its <u>updated risk assessment</u> of 12 February 2020, the ECDC assesses **the risk of COVID-19 infection for the EU/EEA** and the UK population as currently low. The *probability of infection* in the area is very low, and containment measures are in place. *If an infection is acquired*, it has a high impact for the person concerned, and the impact for the population as a whole is moderate to high. The combination of these factors result in an overall low risk assessment.



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EU legal framework

Though public health is **primarily the competence of the Member States**, the Union supports and complements the actions taken by them (Article 168 TFEU). Decision No 1082/2013/EU on **cross-border threats to health** elaborates further on the Treaty provision, by laying down rules on epidemiological surveillance, monitoring, early warning of, and combating serious cross-border threats to health. Under the Decision, a **Health Security Committee** (HSC) was set up, which is composed of the representatives of the Member States, and chaired by the Commission. An **Early Warning and Response System** (EWRS) was established for direct and permanent communication between the Commission and the national authorities. An alert through the EWRS triggers the preparation of a **risk assessment** by ECDC or other competent agencies, depending on the nature of the threat. Members States then consult each other within the HSC and in liaison with the Commission, in order to **coordinate their responses**.

The **EU Integrated Political Crisis Response (IPCR) Arrangements** were established by the <u>Council Implementing</u> <u>Decision No 2018/1993</u>. The ICPR mechanism supports the Council Presidency, the Coreper and the Council, by providing tools and creating a platform for sharing information and coordinating crises responses at political level.

Decision No 1313/2013/EU established, and in 2019 strengthened further, the Union Civil Protection Mechanism (UCPM). The UCPM plays a role in fostering cooperation in prevention of, preparedness for, and response to disasters. With the 24/7 Emergency Response Coordination Centre, a pool of assets and resources, and a European medical corps, the Mechanism can be activated in case of both natural and man-made disasters.

Preparedness and response measures taken at EU level

The **ECDC monitors closely and assesses regularly the situation**. Through its <u>dedicated website</u>, it issues daily situation updates and upto-date risk assessment, and provides technical guidance on a number of issues, e.g. on dealing with patients, cleaning, the use of personal protection equipment, and non-pharmaceutical measures to delay and mitigate the impact of the virus.

The **Croatian Presidency** activated the IPCR in relation to the new coronavirus outbreak, in information-sharing mode. That is in order to facilitate the exchange of information, ensure that there is common understanding of the situation, and allow for the preparation of analytical reports.



The **Health Security Committee** <u>met several times</u>, to exchange information on the situation, and on the preparedness needs and gaps of the Member States.

The **Union Civil Protection Mechanism** <u>was activated</u> at the end of January 2020. Four flights **repatriated already 550 EU citizens** from Wuhan. The Emergency Response Coordination Centre is liaising with the Member States to facilitate the delivery of further batches of **personal protective equipment** to China.

10 million EUR has been mobilised from the **Horizon 2020 programme** as <u>emergency research funding</u>, while <u>other</u> <u>EU-funded research actions</u> are also underway. The supercomputer centres are ready to help the work of researchers.

In an **extraordinary Council meeting on 13 February 2020**, health ministers adopted <u>conclusions</u> urging the Member States to take measures to protect public health, with particular attention to international travel, and calling for close and enhanced cooperation and sharing of information. The Council also called on the Commission to, inter alia, facilitate the cooperation of the Member State; activate existing funding mechanisms to prepare for and respond to the health threat; promote amongst Member States the alignment of measures efficiently minimising the risk of further infections; and in cooperation with the European Medicines Agency and the national medicines agencies, evaluate the consequences of global health threats for the availability of medicines within the EU and the security of supply chains.

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