From: Chen, Ping (NIH/NIAID) [E]
Sent: Wed, 8 Jan 2020 01:28:38 +0000
To: Handley, Gray (NIH/NIAID) [E]; Stemmy, Erik (NIH/NIAID) [E]; Graham, Barney (NIH/VRC) [E]; Bernabe, Gayle (NIH/NIAID) [E]
Subject: Fwd: PRC Response to Pneumonia Cases Shows Increased Transparency Over Past Outbreaks, but Gaps in Epidemiological Data Remain
Attachments: StateSeal.gif

hi, here is the cable from US Embassy Beijing reporting on the pneumonia outbreak in Wuhan, China. It has ruled out SARS, MERS, and flu. (b)(6) confirmed it is viral infection. (b)(5)
The cable contains SBU information. So please don’t distribute it widely.

Ping

Sent from my iPhone

Begin forwarded message:

From: (b)(6)
Date: January 7, 2020 at 6:59:30 PM EST
To: "Chen, Ping (NIH/NIAID) [E] (b)(6)
Subject: FW: PRC Response to Pneumonia Cases Shows Increased Transparency Over Past Outbreaks, but Gaps in Epidemiological Data Remain
Subject: FW: PRC Response to Pneumonia Cases Shows Increased Transparency Over Past Outbreaks, but Gaps in Epidemiological Data Remain

Colleagues,

Cable sent. Best regards,

(b)(6)

UNCLASSIFIED
SBU

Action Office: ECON, RSO, PAS, POL, MGT, IMO, SCIENCE, CDC
Info Office: EXEC_INFO, IMO_INFO, RSO_INFO, DAO_INFO, MED_INFO, MGT_INFO, SCIENCE_INFO, ECON_INFO, POL_INFO

MRN: 20 BEIJING 74
1. (SBU) **Summary and Comment:** China’s response to an outbreak of pneumonia cases of unknown origin in Central China’s Wuhan city has been marked by increased transparency compared to past outbreaks, such as the 2003 SARS epidemic. While PRC health officials have released timely and open general information about the outbreak, a lack of epidemiologic data – including an “epi curve” (a summary of dates of onset of the illness), characteristics of infected individuals, and other basic epidemiologic information – hinders better risk assessment and response by public health officials. Authorities have also not released information on how they are defining a “case”. Given these gaps in detailed information to-date, and lack of a final confirmed pathogen, the risk to the United States and global health is difficult to assess at this time. However, U.S. CDC and Mission China maintain close contact with PRC health authorities and with the World Health Organization (WHO). Mission China will continue to report on the Wuhan pneumonia outbreak as it develops and additional information becomes available. **End Summary and Comment.**

59 Cases of Pneumonia of Unknown Cause Reported in Wuhan

2. (SBU) As of January 7, the Wuhan Health Commission has reported 59 local cases of pneumonia with unknown cause. (Note: Wuhan, a city of approximately 11 million people, is the capital of Central China’s Hubei Province. End note.) According to the Health Commission, some patients are vendors who work in the Huanan Seafood Market, which also sells live exotic animals, including beaver, snakes, porcupines, and deer. The market, which has been sanitized and closed since January 1, 2020, is approximately one square mile in size and located near the Hankou train station, which serves as a transportation hub at the center of China’s domestic train routes.

3. (SBU) Patients began showing symptoms between December 12 and 29. Seven patients remain hospitalized in serious condition; the remainder have stable vital signs and there have been no deaths. 163 contacts are under medical observation with no symptoms. Health officials state there has been no confirmed human-to-human transmission of the disease, and no cases among health workers. Laboratory investigations have ruled out influenza, avian influenza, SARS, MERS, and other common respiratory pathogens, and are awaiting final pathogen results. Continued investigation using nucleic acid testing, virus isolation, and culture is under way. Symptoms include fever, difficulty breathing and chest x-rays showing bilateral lung infiltrates. During an interview with a reporter for the Yanjiang Daily on January 6, the
Director of the Wuhan Center for Disease Control and Prevention said they are conducting active and retrospective case finding in medical institutions throughout Wuhan. It is believed that that active case finding and retrospective investigation since the outbreak was reported on December 31 is the primary reason for the increase in the reported cases over the last week from 27 to 59.

4. (SBU) Suspected cases identified in Hong Kong and Singapore involved patients who had been in Wuhan and exhibited symptoms but did not have exposure to the Huanan Seafood Market. Of the suspected cases from Hong Kong with lab results, most tested positive for influenza or other common viruses, with other results pending.

5. (SBU) The U.S. CDC issued a Level 1 Travel Health Notice (link) on January 6, and is in the process of setting up an incident management structure. A level 1 Notice shares health information with travelers to ensure they are informed and able to travel in the safest way possible. WHO issued a statement on January 5 that it does not recommend any specific measures for travelers, or any travel or trade restrictions.

 **PRC’s Response in Line with WHO International Health Regulations; Additional Epidemiological Information Would be Useful**

6. (SBU) PRC officials on December 31, 2019 alerted WHO to the pneumonia outbreak. WHO contacts told Embassy officials that PRC health departments continue to provide information about the outbreak in accordance with WHO’s International Health Regulations (IHR). While China has been forthcoming with standard information, WHO contacts note they have not received more detailed and potentially useful information, such as “epi curves” or other epidemiological data. The flow of official PRC information on this outbreak is limited to that coming from the Wuhan Health Commission and National Health Commission. China CDC is referring queries to the three official notices issued to-date by the Wuhan Health Commission.

7. (SBU) The PRC’s release of information during the early stages of the outbreak has been regular and stands in contrast to past outbreaks, such as the 2003 SARS epidemic, where officials publicly denied the epidemic despite mounting infections and deaths. In the seven days since the notification to WHO of the current outbreak, the Wuhan Health Commission has issued three official notices, and the interview with the Wuhan CDC Director is publicly available. Additionally, an editor of the China CDC Weekly (launched in November 2019 and modeled after the U.S. CDC’s Morbidity and Mortality Weekly Report) informed a U.S. CDC officer that an investigator has been assigned to write a report on the outbreak. Such a report could provide additional epidemiologic data that will be useful for global public health officials to understand the cluster of cases.

8. (SBU) In response to the outbreak, U.S. CDC Director Robert Redfield called China CDC Director George Gao. Director Redfield offered U.S. CDC technical support; however, China CDC has not yet responded to the offer. WHO’s China office told us they have daily calls with WHO Geneva and the WHO Western Pacific Regional office to share information on the outbreak. WHO is also preparing to provide technical support to the PRC if requested.

9. (SBU) have indicated they have been instructed not
to discuss the outbreak, beyond normal government information control, and have expressed frustration regarding the lack of internal communication among the medical community. According to a local virologist, authorities will not be permitted to talk about the outbreak and have to rely on international media.

**Wuhan On-the-Ground**

10. (SBU) (b)(6) observing that among the approximately 100 police guards surrounding the large market, most in the area were not wearing masks. (b)(6) also visited the city’s main infectious disease treatment facility, (b)(6) were observed wearing surgical masks, gloves, gowns, and caps. Guards outside the building were wearing surgical masks. A special reception desk was set up for patients exhibiting pneumonia symptoms. Otherwise, the hospital appeared to be operating normally.

11. (SBU) (b)(6) that patients in Wuhan are usually diagnosed in clinics, and if they show matching symptoms, are then sent to Jinyintan Hospital. (b)(6) have a general questionnaire that includes whether patients have been to the Huanan market or have had contact with sick people from the market. If a patient has fever, a full blood work is done.

12. (SBU) (b)(6) observed no additional medical screening at metro, train stations, or airports. Aside from the closed market, all observations and reports are that the city is operating normally.

**Media and Social Media Reaction in China**

13. (SBU) The viral pneumonia cases in Wuhan are widely covered by Chinese media. Reports are factual in nature and cover the three statements released by the Wuhan Municipal Health Commission between December 31 and January 5. A report from Xinhua on January 1 cautioned that false information about the illness was circulating online and warned that spreading rumors and disrupting social order would not be tolerated. The article also stated that eight people were being investigated by public security for spreading rumors.

14. (SBU) On Chinese social media, viral pneumonia in Wuhan has been a hot topic for the past week, with the hashtag #武汉发现不明原因肺炎# (Wuhan reported mysterious pneumonia) receiving 870 million views with 77,000 discussions to date. However, it’s also a heavily censored topic and has not been listed in any trending topics lists on Sina Weibo. Before SARS was ruled out as a cause of the mystery pneumonia by the Chinese government, many netizens commented that it reminded them of the SARS epidemic of 2003. Most netizen comments express concern and hope that the Chinese government can disclose information whenever possible. Some comments express confidence in the Chinese government’s ability to handle the problem.

**Embassy Awareness Raising and Preparedness**
15. (SBU) In coordination with U.S. CDC, Mission China issued a MASCOT message to the general public on January 7. This message mirrored CDC Watch Level 1 guidance on prevention and actions to take if someone has symptoms and/or has been in direct contact with an infected person. Post has sent a management notice to Mission China mirroring the ACS Mascot message. The MASCOT message also appears on the Mission website. There have been no reports of affected U.S. citizens.

16. (SBU) The Beijing Health Unit has disseminated information on the cases to Mission China regional RMOs/MPs and will have new PCR-based respiratory disease screening capabilities starting January 10. The Health Unit is also preparing for clinical management for any Mission personnel in Wuhan that develop respiratory symptoms and for those that return from Wuhan with respiratory symptoms.

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XMT: CARACAS, AMEMBASSY; ST PETERSBURG, AMCONSUL

Action Post: NONE
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