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2019 NOVEL CORONAVIRUS OUTBREAK

The 2019-nCoV identified in China is a new strain of coronavirus that has not been previously identified in humans. Outbreaks of novel virus infections among people are always of public health concern, especially when there's little knowledge about the characteristics of the virus, how it spreads between people, how severe are the resulting infections and how to treat them[1].

The source of infection is unknown and could still be active. Human-to-human transmission has been confirmed but more information is needed to evaluate the full extent of this mode of transmission and understanding how the virus spreads[1,2].

Since 31 December 2019 and as of 30 January 2020, 7 824 laboratory-confirmed cases of novel coronavirus (2019-nCoV) infection have been reported, including 16 healthcare workers and 170 deaths[3]. The majority of the cases are reported in Asia but cases have now been detected in several countries in Australia, Europe and North America.

If cases are detected in a timely manner and rigorous infection control measures are applied, the likelihood of sustained human-to-human transmission in community settings in the EU/EEA is low. Systematic implementation of infection prevention and control measures were effective in controlling SARS-CoV and MERS-CoV[3]. Nevertheless, global spread and further importation to Europe is likely. Since the source of the virus remains unknown and human-to-human transmission is documented, further cases and deaths are not unexpected[4].

Standard recommendations from WHO (World Health Organization) to prevent infection spread include regular hand washing, covering mouth and nose when coughing and sneezing, thoroughly cooking meat and eggs. Avoid close contact with anyone showing symptoms of respiratory illness such as coughing and sneezing[5].

In parallel and for healthcare settings, WHO has published the first edition of guidance on infection prevention and control (IPC) strategies for use when infection with a novel coronavirus (2019-nCov) is suspected[6]. It describes IPC strategies to prevent or limit transmission in healthcare settings and includes the following:

- ensuring triage, early recognition, and source control (isolating patients with suspected nCoV infection);
- applying standard precautions for all patients;
- implementing empiric additional precautions (droplet and contact and, whenever applicable, airborne precautions) for suspected cases of nCoV infection;
- implementing administrative controls;
- using environmental and engineering controls

As new information becomes available, the CDC and WHO will update these guidelines.

Among others, it is recommended to ensure that cleaning and disinfection procedures are followed consistently and correctly and that home care workers are applying the WHO's "My 5 Moments for Hand Hygiene" approach.

ENVIRONMENTAL (SURFACES) DISINFECTION

In Europe, the commercialization and use of disinfectants are regulated by two different regulatory tools:

- disinfectant used to disinfect medical devices must be conform to Directive 93/42/EC and bear the CE mark.
- disinfectant used to disinfect other surfaces (including surfaces in medical area) must be conform to Regulation (EU) No 528/2012

The products UMONIUM38® listed in table 1 are conform to the relevant directive or regulation. Their microbial efficacy has been tested as per European norm EN 14885 (2018). More specifically the virucidal activity has been proven as per norm EN 14476 (2013) covering both enveloped and non-enveloped virus.

Coronaviruses are viruses in the family Coronaviridae, in the order Nidovirales. They are enveloped viruses. Enveloped viruses are usually more susceptible to chemical disinfectant than non-enveloped viruses. Consequently, since the product UMONIUM38® listed in the table below are efficient on both enveloped and non-enveloped viruses and based on current knowledge of the 2019-nCov virus, they are expected to be efficient on this new Coronavirus strain.

HAND HYGIENE

The CDC recommends using alcohol-based hand sanitizers as the preferred method for hand disinfection when soap and water are not readily available. In Europe, hand sanitizers are PT-1 (product type-1) biocides that must be conform to Regulation (EU) No 528/2012.

PHYTOGEL by HUCKERT'S® **Sanitizer** is a PT-1 biocide that is conform to Regulation (EU) No 528/2012. Its microbial efficacy has been tested as per European norm EN 14885 (2018). More specifically, the virucidal activity has been proven as per EN 14476:2005 norm on Poliovirus and Adenovirus and as per EN 14476:2013 + A1:2015 on murine Norovirus and on Vaccinia virus in 30 second contact time.

Coronaviruses are viruses in the family Coronaviridae, in the order Nidovirales. They are enveloped viruses. Enveloped viruses are usually more susceptible to chemical disinfectant than non-enveloped viruses. Consequently, since the product PHYTOGEL by HUCKERT'S® **Sanitizer** is efficient on both enveloped and non-enveloped viruses and based on current knowledge of the 2019-nCov virus, it is expected to be efficient on this new Coronavirus strain.

	CONCENTRATED	SPRAYS (RTU)	WIPES (RTU)
MEDICAL DEVICES (DIRECTIVE 93/42/EC)	UMONIUM38® INSTRUMENTS UMONIUM38® EQUIPMENTS UMONIUM38® NEUTRALIS	UMONIUM38® MEDICAL SPRAY UMONIUM38® NEUTRALIS SPRAY	UMONIUM38® MEDICAL TISSUES UMONIUM38® NEUTRALIS TISSUES
BIOCIDES (REGULATION (EU) N° 528/2012)	UMONIUM38® MASTER UMONIUM38® MASTER FOOD	UMONIUM38® MASTER SPRAY UMONIUM38® MASTER FOOD SPRAY	UMONIUM38® MASTER TISSUES UMONIUM38® MASTER FOOD TISSUES

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