

Kent County Health Department
**Severe Acute Respiratory Syndrome
 (SARS) Fact Sheet**



What is SARS?

Severe Acute Respiratory Syndrome (SARS) is caused by a virus. It affects breathing.

How is SARS spread?

SARS seems to be spread by close person to person contact. Most people who were infected with SARS were exposed in their own homes by family members with SARS or in health care facilities. The virus that causes SARS is thought to be transmitted most readily by respiratory droplets produced when an infected person coughs or sneezes. Droplets from the cough or sneeze of an infected person can be sent through the air up to about three feet. They can be deposited on the mucous membranes of the mouth, nose or eyes of people nearby. The virus can also be spread when a person touches a surface or object contaminated with infectious droplets and then touches his or her mouth, nose or eyes.

What are the symptoms of SARS?

Symptoms of SARS are similar to other flu-like illnesses. This makes it hard to tell if a person really has SARS. Symptoms can include:

- Fever (over 100.4° F or 38° C)
- Possible headache, chills, body aches
- Mild respiratory symptoms
- Dry cough after 2 to 7 days
- Diarrhea in 1 or 2 of every 10 patients
- Eventual pneumonia in most patients

How soon do infected people get sick?

The incubation period for SARS is typically two to seven days although in some cases it may be as long as 10 days.

Who is at most risk for getting SARS?

Some people are at a higher risk for getting SARS than others. Your risk is higher if you:

- have recently (within the last 10 days) traveled to a previously SARS-affected area
- have had close contact with someone who is ill and has traveled to a previously SARS-affected area
- work as a health care provider who has direct patient contact with people who may have SARS
- are caring for someone at home who might have SARS

Are you a “close contact” of a person with SARS?

The Centers for Disease Control and Prevention (CDC) defines a “close contact” as someone who has lived with, cared for, or had direct contact with the respiratory secretions or body fluids of a person with SARS. Examples of close contact include kissing or hugging, sharing eating or drinking utensils, talking to someone within three feet, and touching someone directly. Close contact does **not** include activities like walking by a person or sitting across a waiting room or office for a brief time.

How is SARS treated?

There is no effective treatment for SARS at this time. Protecting people from exposure to SARS is still the best way to stop the spread of the illness. Patients with a suspected case of SARS will need to be isolated, either at home or in a health care facility, to prevent the spread of the illness to health care workers, other patients, and visitors.

Severe Acute Respiratory Syndrome (SARS) Fact Sheet – page 2

Although it isn't considered likely, it could become necessary to quarantine people who aren't sick but may have been exposed to SARS. This would mean asking them to stay home so they won't expose other people if they do become sick.

Is there a SARS vaccine?

There is no effective vaccine for SARS at this time.

How can I protect myself from getting SARS?

- Cover your nose and mouth with a tissue whenever you cough or sneeze. Put the tissue in the trash when you're done.
- If you don't have a tissue, cough or sneeze into your sleeve.
- After you cough, sneeze or blow your nose, wash your hands with soap and water or an alcohol-based hand cleaner.

If you are caring for someone at home who has SARS, you should:

- Be sure that the person with SARS has seen a health care provider and is following all instructions on medication and care.
- Be sure that all members in the household are washing their hands often with soap and water or using an alcohol-based hand wash.
- Wear disposable gloves if you have direct contact with body fluids of a person with SARS. **However, wearing gloves is not a substitute for good hand hygiene.** After contact with body fluids from a SARS patient, remove the gloves, throw them out, and wash your hands. **Do not** wash or reuse the gloves.
- Encourage the person with SARS to

cover his mouth and nose with a tissue when coughing or sneezing. If possible, he should wear a mask during close contact with other people in the home. If the person with SARS cannot wear a mask, then other members of the household should wear one when in the room with him.

- Do not use silverware, cups, towels, sheets and pillows, clothing or other items that have been used by the person with SARS until these items have been washed with soap and hot water.
- Clean all surfaces (countertops, tabletops, door knobs, bathroom fixtures, light switches) that have been contaminated by body fluids (sweat, saliva, mucous, vomit or urine) with a household disinfectant used according to the manufacturer's instructions. Wear disposable gloves during all cleaning activities. Throw the gloves out when done. **Do not** reuse them.
- Follow these instructions for 10 days after the sick person's fever and respiratory symptoms have gone away.
- If you develop a fever or respiratory symptoms, call your health care provider right away and tell him you have had close contact with a SARS patient.