COVID-19: what's in a name?

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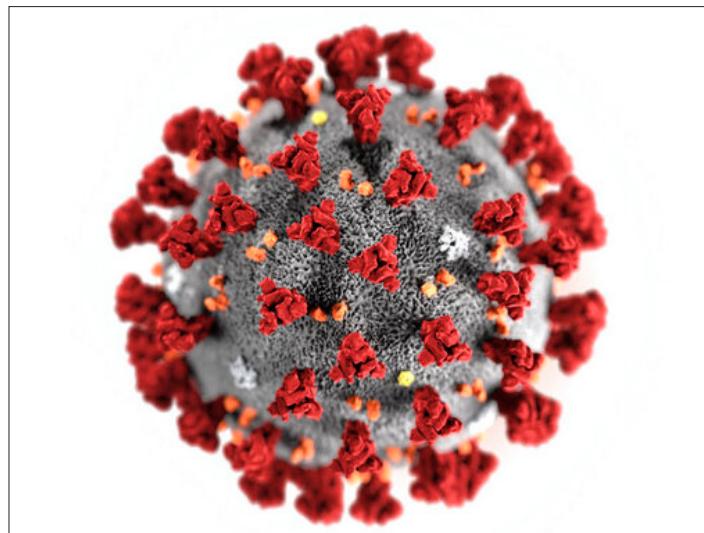
South Sudan Medical Journal

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What does each of the following have in common: Ebola, Marburg, Swine Flu, Spanish Flu and Avian flu? They are all diseases named after a location or an animal host.

In the past, this had been the norm: scientists rushed to name a new disease using the place where it was first identified.

Marburg haemorrhagic fever was named after the City of Marburg in Germany in the 1960s. Swine flu and Avian flu were named after the animals thought to have hosted these infections. The origins of Spanish Flu are debated but it was ascribed to neutral Spain in 1918 by World War 1 censors in order to maintain morale among allied soldiers.

This illustration, created at the Centers for Disease Control and Prevention (CDC), reveals ultrastructural morphology exhibited by coronaviruses (credit: CDC)

The idea of naming diseases after their locations started getting bad reviews in 1976 during the naming of the Ebola virus. According to an article on the etymology of Ebola virus:

"When the international commission considered the name "Yambuku virus," Karl Johnson and Joel Breman noted that naming the Lassa virus after the Nigerian village where it was discovered brought stigma to the community. Johnson suggested naming the virus after a nearby river, and the rest of the commission agreed". [1]

It is clear the scientific community settled for Ebola to avoid leaving an indelible mark of horror on the village of Yambuku, and so avoid it being forever associated with a deadly disease.

It was the norm for the virus causative agent and the resulting disease to have different names. The World Health Organization's (WHO) International Classification of Disease (ICD) names the diseases and the International Committee on Taxonomy of Viruses (ICTV) names the virus.

In 2003, a new coronavirus emerged in Yunnan, China. The WHO moved very quickly to give it a name before a nickname, given by the media, stuck. In order not to name it after the country (Chinese Virus) or the city (Yunnan Virus), the scientific group at WHO convened to name the virus. They wanted a name that included the causative agent or the clinical condition, and an acronym that is easy to use like HIV and AIDS. The WHO settled for SARS - Severe acute respiratory syndrome as the disease and the ICTV named the virus as the severe acute respiratory syndrome coronavirus (SARS-CoV).

In order to make it official, WHO developed best practices for naming new human infectious diseases in 2015.[2, 3] In consultation and collaboration with the World Organisation for Animal Health (OIE) and the Food and Agriculture Organization of the United Nations (FAO), WHO developed the best practices with the aim:

"to minimize unnecessary negative impact of disease names on trade, travel, tourism or animal welfare, and avoid causing offence to any cultural, social, national, regional, professional or ethnic groups".

In short, the scientific community cannot henceforth name a new disease based on the old practice of location, etc. It was a game changer.

When the new coronavirus started in China in December 2019, the media started labelling it the "Wuhan" or "Chinese" virus, according to the location where it started. There were also media references to a 1981 apocalyptic novel by Dean Koontz, The Eyes of Darkness, which mentioned a killer virus called "Wuhan-400". However, Koontz did not predict the corona virus outbreak in his novel.[4]

Because of its similarities to the SARS-CoV mentioned earlier, the ICTV named the virus severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Based on its guidance on best practices, WHO's ICD settled on naming the new emerging disease 'COVID-19' – standing for COrona VIrus Disease of the year 2019. This was a response to avoid a stigmatizing name for the virus being used by the media.

Everyone should use the new name for this coronavirus disease in order not to stigmatize certain communities. Xenophobic attacks against Chinese or Chinese-looking citizens have aggravated the situation.

Calling it what it is can save lives.

References

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A Note on the CORONAVIRUS Special Issue

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This special issue on COVID-19 has been produced by the SSMJ editorial team and SSMJ supporters inside and outside South Sudan. We have put together an issue that deals entirely with the COVID-19 pandemic, drawing on reputable sources including WHO, UNICEF and CDC.

COVID-19 is a new disease and new insights into the disease are being learnt every day. We continue to identify new symptoms and signs and management plans are evolving as our experience grows. People react differently to the disease. Most who develop serious problems and who succumb tend to be elderly or have underlying health conditions. We have selected the information that provides reliable guidance according to current knowledge. Apologies if any links do not work in the future.

We hope this information will be useful to those dealing with the pandemic in South Sudan, and add to that provided by the government and other sources. These papers are just a start to the coverage of COVID-19 that SSMJ will be providing in future issues and on our website.

We welcome contributions and suggestions from our readers, and we thank all the authors and reviewers who helped us to produce this special issue in a very short time.

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