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**MINI-SYMPOSIUM: SEVERE ACUTE RESPIRATORY SYNDROME (SARS)**

## Guest editorial

The SARS epidemic in 2002–2003 shocked the world. The fast-spreading epidemic claimed 774 lives among the 8096 cases it affected worldwide. In Hong Kong alone 300 lives were lost. Although none of the deaths in Hong Kong were in children, it was nevertheless a highly contagious disease with a significant mortality (17% in Hong Kong, 9.6% worldwide). The exact number of children affected was unknown, as WHO data does not have an age breakdown. In Hong Kong, 121 cases were below 18 years of age, comprising 7% of all patients affected. Although the disease seemed to be milder in children, it is nevertheless very worthy of our attention. Thanks to modern gene and microbiological technologies the offending virus was quickly identified to be a coronavirus. Subsequently, diagnostic tests were developed speedily to help identify the disease. Treatment remains controversial, as no anti-viral agent has yet been proven effective. The use of steroids in Hong Kong has drawn a lot of criticism. However, anecdotal evidence must be supported by randomised trials. Hopefully more trials will elucidate the matter in the future.

In this mini-symposium, authors from Hong Kong, China and the USA review the global chronology of the epidemic in 2002–2003, the epidemiology in China and Hong Kong, the disease in children, its long-term sequelae and possible vaccine developments. The lesson is well-learnt by health authorities in Hong Kong and China, as evident by the very small scale of the outbreak and its immediate control in the fall of 2003 on the mainland. But the laboratory outbreak in March 2004 in China highlights the importance of vigilance, close surveillance and extreme care necessary in the handling of the virus and of the disease. Hopefully lessons learnt will help us understand more about how we humans should live in harmony with the rest of biological life forms in the world.

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