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**Severe acute respiratory syndrome (SARS)**

[Martin S Hirsch, MD](#)

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**INTRODUCTION** — On March 15, 2003, worldwide attention was drawn to cases of a rapidly progressive respiratory illness in the Guangdong Province of China, Hong Kong, Vietnam, Singapore, and Canada [1,2]. Termed severe acute respiratory syndrome (SARS) by the World Health Organization (WHO), initial efforts centered on tracking cases, determining an etiology, establishing a laboratory test for diagnosis, evaluating therapies, and testing infection control strategies to prevent further spread. WHO spearheaded these efforts in collaboration with the United States Centers for Disease Control and Prevention (CDC) and health authorities from a number of countries including China, Hong Kong, Vietnam, Singapore, Thailand, and Canada.

Speculation about the etiology of this illness, which appeared to be an infection based upon the symptom complex and patterns of contagion, centered around a new viral strain from the coronavirus family of viruses. Infection control measures had some success in preventing spread,

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