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Current major event

Influenza Surveillance in EMR

Surveillance of influenza and other respiratory pathogens in the Eastern Mediterranean Region (EMR) made a significant progress in the last few years with regards to the epidemiological and virological surveillance. As of December 2017, 19 out of the 22 countries have functional influenza surveillance systems. The laboratory diagnostic capacities were enhanced through recognition of 17 functioning National Influenza Centers (NICs).

Editorial note

Respiratory emerging infectious diseases pose a substantial risk to humans because of their extremely high potential to spread from person to person. These diseases can cause high morbidity and mortality. Influenza is a major cause of morbidity and mortality worldwide, especially in high-risk groups. The risk of an influenza pandemic is continuing with potentially devastating health, economic and social impacts, particularly for developing countries, which suffer a higher disease burden and are more vulnerable.

Member states in EMR, in collaboration with WHO/EMRO and other partners, are working to enhance epidemic and pandemic influenza preparedness and response. Establishing and/or maintaining epidemiological and virological influenza surveillance, data dissemination and specimens sharing, linkage surveillance findings with public health policies and building the response capacities are the main pillars that have been targeted.

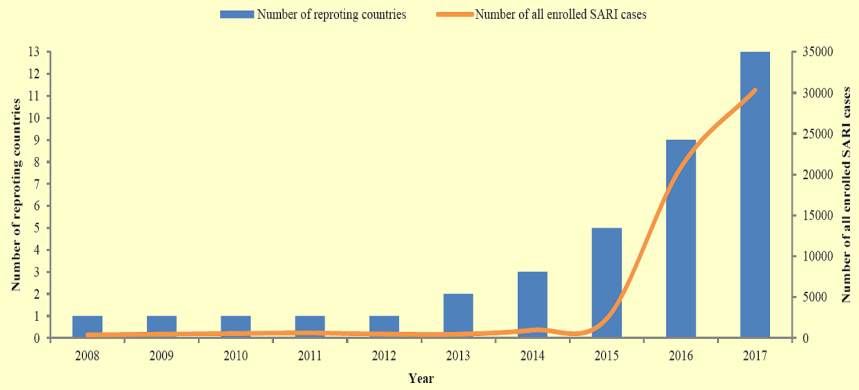
Currently, 19 out of the 22 EMR countries have functional influenza surveillance systems. The epidemiological data sharing has significantly improved during the last couple years (*please see graph above*). Most of these countries regularly share their influenza surveillance data with the regional platform, the Eastern Mediterranean Flu (EMFLU) Network as well as with the global platforms, FluNet and FluID. EMFLU Network was officially launched in May 2016 to facilitate timely data collection, sharing and management, and to fulfill member states needs. Up to December 2017, 13 countries from the EMR shared their SARI data with EMFLU Network, and also, 13 countries shared their influenza data with the global platform FluNet.

Moreover, sharing specimens from the functioning NICs, in 16 countries of the region, has significantly increased during the last few years (*please see table*). NICs viruses sharing contributes in the assessment of pandemic risk, development of pandemic vaccines, updating of diagnostic reagents and test kits, and surveillance for resistance to antiviral medicines.

Additionally, following a regional training that was conducted by WHO and attended was by 15 member states in August 2017, 7 countries have used their surveillance data to complete influenza burden estimation exercise, and 5 countries are working on their influenza baseline estimates and threshold values for outbreak detection.

The expansion of influenza surveillance in the Region has enabled better understanding of influenza occurrence patterns at the national, regional and global levels. The Regional Office has worked closely with member states to maintain and enhance national capacities for early detection and response to suspected outbreaks of influenza. However challenges still remain especially in Member States experiencing disruptions of their influenza programmes due to humanitarian crisis such as Iraq and Yemen.

Number of SARI cases and number of reporting countries on EMFLU Network, 2008-2017



Number of Influenza Specimens shared with WHO-CC from NICs in EMR, 2012 - 2017

Year	NICs sharing specimens	Number of shipments
2012	6	6
2013	9	13
2014	8	11
2015	10	18
2016	13	27
2017	14	28

Update on outbreaks in the Eastern Mediterranean Region

MERS in Saudi Arabia; **cholera** in Somalia; **cholera** in Yemen; **dengue** in Sudan.

Current public health events of international concern

[cumulative N° of cases (deaths), **CFR** %]

Avian influenza: 2006-2017	
Egypt (A/H5N1)	[359 (122), 34%]
Egypt (A/H9N2)	[4 (0)]
Avian influenza A (H7N9): 2013-2017	
China	[1,565 (612), 39.1%]
Chikungunya: 2016-2018	
Pakistan	[8,462 (0)]
Cholera: 2017-2018	
Somalia (2018)	[334 (1), 0.29%]
Yemen	[1,051,789 (2252), 0.21%]
Diphtheria: 2018	
Yemen	[923 (60), 6.5%]
Bangladesh	[5,253 (37), 0.7%]
Dengue fever: 2017-2018	
Sudan	[197 (3), 1.5%]
MERS: 2012-2018	
Saudi Arabia	[1,778 (696), 39.1%]
Wild poliovirus: 2018	
Afghanistan	[1 (0)]
Yellow Fever: 2017-2018	
Brazil	[145 (20)] 13.7%