

Current major events

Reporting of an "unknown" disease leads to contact tracing in Lebanon

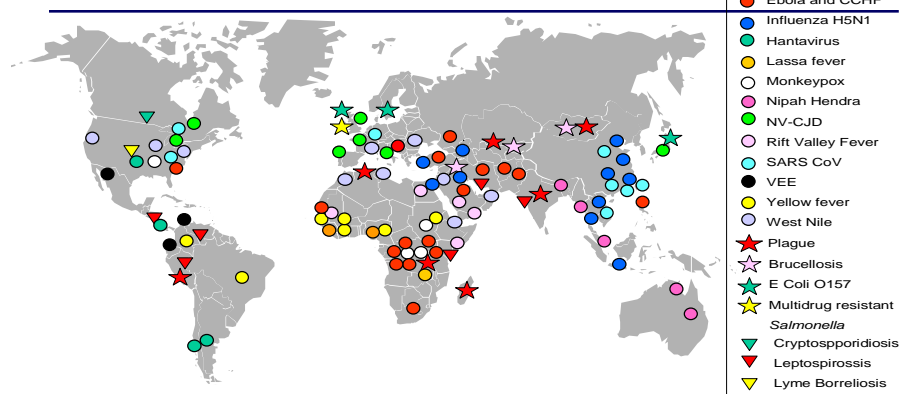
Recently an "unknown" disease caused deaths to one safari tour operator in Zambia and two other nurses in South Africa who cared and attended this tour operator in a hospital of South Africa. Reporting of this "unknown" disease by AFRO led to a detailed epidemiological investigation by WHO-HQ and its GOARN partners which resulted in the finding that the deaths have been caused by a new virus from Arenaviridae family. During this investigation, it was also revealed that a Lebanese male tourist in his 20s might have also been exposed to this new virus since he was on the safari in Zambia with the same tour operator who was the index case in this outbreak of "unknown" disease and later died. This prompted EMRO to trace this possible "contact" in Lebanon. Clinical investigation revealed that the Lebanese tourist fell ill immediately after the safari and was initially treated in Zambia. He was later flown in to Beirut and treated in a hospital. He had symptoms closely similar to haemorrhagic fevers and had minor bleed which stopped spontaneously.. Repeated laboratory tests did not reveal anything conclusive and he was eventually discharged from the hospital and has recovered from his illness.

Editorial note

International travel can pose various risks to health depending on the characteristics of both the traveller and travel. All people planning to travel should know about the potential hazards of the countries they are travelling to and learn how to minimize their risk of acquiring these diseases. Forward planning, appropriate preventive measures and careful precautions can substantially reduce the risks of adverse health consequences.

The spread of infectious diseases including emerging diseases from one part of the world to another is not a new, but in recent years a number of factors have underscored the fact that infectious dis-

Emerging and re-emerging infectious diseases, 1996-2008



Epidemic and Pandemic Alert and Response

Infectious diseases of potential risk for travelers

- **Foodborne or waterborne diseases:** Travelers' diarrhea, giardiasis, hepatitis A, typhoid fever, hepatitis E and cholera;
- **Vector-borne diseases:** malaria, yellow fever, dengue, chikungunya;
- **Zoonoses:** rabies, brucellosis, viral haemorrhagic fevers, anthrax;
- **Sexually transmitted diseases:** Hepatitis B, HIV/AIDS;
- **Bloodborne diseases:** Hepatitis B and C, HIV/AIDS and malaria;
- **Airborne diseases:** Meningococcal meningitis, pneumonia, pertussis, SARS,

ease events in one country may be of potential concern for the entire world. Timely reporting of any unusual public health event under the International Health Regulations 2005 provide a legal foundation for prevention, protection, control and response to such events which has the potential for international spread. The requirement for reporting, under IHR 2005, of any public health event of potential international concern takes into account the need for avoidance of negative impact on international travel and trade in the event of any emerging and re-emerging health risks.

The event in Zambia and the subsequent follow-up of a case "contact" in Lebanon is a sharp reminder that in a truly globalized world, the full compliance of IHR 2005 for timely and transparent reporting of an event of international concern as well as sensitive and efficient surveillance system for disease detection will hold the key to ensure global health security in the years to come.

Update on outbreaks

in the Eastern Mediterranean Region

Anthrax: in Iraq, Afghanistan, **Dengue:** in Pakistan, Saudi Arabia. **Cholera:** in Iraq; Iran, Somalia, Afghanistan

Current public health events of international concern

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

Avian influenza

Egypt	[50 (22), 44%]
Indonesia	[137 (112), 81.7%]

AWD/Cholera

Somalia	[261 (0), 0.0%]
Iran	[195 (4), 2%]
Afghanistan	[20 (0), 0.0%]
Iraq	[479 (8), 1.7%]

Dengue fever

Saudi Arabia	[533 (?), ?%]
Pakistan	[10 (8), 80%]#

Hepatitis E

Uganda	[6530 (104), 1.6%]
Sudan	[224 (23), 10.2%]*

Arenavirus (New Virus)

Zambia	[9 (4), 44%]
South Africa	[4 (3), 75%]

Yellow fever

Cote d' Ivoire	[6 (0), 0%]
Guinea	[2 (0), 0%]

Crimean Congo H. Fever

Afghanistan	[24 (4), 16.6%]
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(* = Unofficial figures) CFR = Case-Fatality Rate
? = No data # = Risk assessment ongoing