

Current major events

Health Conditions for travelers to Saudi Arabia, Hajj, 1431 H

The Ministry of Health of Saudi Arabia has issued the requirements and recommendations for entry visas for Hajj and Umra season in 2010 (1431 H). After the declaration by WHO that the world is no longer in phase 6 of influenza pandemic alert, the requirements follow the WHO's recommendations for influenza in the post-pandemic period.

Editorial note

Every year, at the request of the Government of the Kingdom of Saudi Arabia, WHO is publishing the "*Health conditions for travelers to Saudi Arabia for the pilgrimage to Mecca (Hajj)*" to inform visitors of the full requirements for entry into Saudi Arabia for the Hajj and Umra. However, these stipulated requirements and conditions do not imply an endorsement by WHO.

Hajj pilgrimage to Mecca, Saudi Arabia is one the largest annual mass gatherings in the world. The number of people attending this event has nearly doubled in the past decade, reaching almost 2.5 million in 2009 of whom at least 1.6 million were foreign visitors. Mass gatherings pose complex health-care challenges related to communicable disease surveillance, vaccination, travel medicine, environmental health, emergency preparedness, crowd management, as well as national and international security.

Last year, the pandemic (H1N1) 2009 infection posed a great concern and challenge to the public health officials of the Kingdom of Saudi Arabia for ensuring public health security during the Hajj and Umrah. At the height of phase-6 of influenza pandemic alert level, the public health preparedness of the Kingdom of Saudi Arabia for the Hajj and Umra, 1430 H (2009) was extra-ordinary. This resulted in limiting transmission of pandemic influenza virus amongst the Hajj pilgrims during the Hajj last year as well as preventing Hajj related exportation of pandemic (H1N1) 2009 virus by the returnee pilgrims.

Requirements and Recommendations for Hajj and Umra, 1431 H

1. It is recommended that the international pilgrims be vaccinated against seasonal influenza before arrival in Saudi Arabia with WHO approved strains specific to northern or southern hemisphere, particularly those with preexisting conditions (e.g. the elderly, people with chronic respiratory or heart diseases or cardiac, hepatic or renal failure);
2. All visitors under the age of 15 years coming from countries re-infected with poliomyelitis should be vaccinated against poliomyelitis with the oral polio vaccine (OPV);
3. All travelers arriving from countries at risk of Yellow fever (YF) transmission need to present a valid YF vaccination certificate showing that the person was vaccinated at least 10 days before and not more than 10 years before arrival;
4. Travelers from around the world are required to produce a certificate of vaccination with the quadrivalent (ACYW135) vaccine against meningococcal meningitis issued not more than 3 years previously and not less than 10 days before arrival;

Other health measures

- All pilgrims arriving at entry points will be screened for symptoms of specific diseases of concern such as dengue fever, meningococcal meningitis, measles and yellow fever;
- In the event of a public health emergency of international concern or in the case of any disease outbreak subject to notification under the IHR (2005), the health authorities in Saudi Arabia may take any additional preventive precautions (not included in the measures mentioned above) following consultation with WHO to avoid the spread of infection.

On 30 November 2009, shortly after the end of Hajj, the Kingdom of Saudi Arabia officially reported 100 pilgrims with confirmed pandemic influenza (H1N1) infection including five fatalities, which were relatively low figures compared to the great risk posed by this annual mass gathering event in Saudi Arabia last year.

Although, the world is now in the post-pandemic period meaning that pandemic (H1N1) 2009 virus is likely to take on the behaviour of a seasonal influenza virus and continue to circulate for some years to come and the level of concern is now greatly diminished, vigilance on the part of national health authorities remain important as ever. Such vigilance is specially critical in the immediate post-pandemic period, when the behaviour of the pandemic (H1N1) 2009 virus as a seasonal virus can not be reliably predicted. It is, therefore, important that the current requirements for Hajj and Umra particularly for influenza are followed by all pilgrims in order to mitigate the risk of transmission of influenza and other communicable diseases.

Update on outbreaks

CCHF, Dengue fever and Cholera in Pakistan; **Dengue fever** in Yemen; and **Kala-Azar** in southern Sudan;

Current public health events of international concern

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

Avian influenza

Egypt	[112 (36), 32.1%]
Indonesia	[170 (141), 82.9 %]
Viet Nam	[119(59), 49.6%]
China	[39 (26), 66.6%]
Global total	[507(302), 59.5%]

CCHF

Pakistan	[26(3), 11.5%]
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AWD (Cholera)

Haiti	[4722(303), 6.4%]
Chad	[2508 (111), 4.4%]
Cameroun	[7869 (515), 6.5%]
Nigeria	[29115(1191), 4%]

Kala-Azar (Visceral Leishmaniasis)

S. Sudan	[6363(303). 4.7%]
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Dengue fever

Pakistan	[2062(15), 0.7 %]
Yemen	[1903(12), 0.6 %]

CFR=Case-Fatality Rate
Laboratory-confirmed cases only