

## Current major event

### Influenza activities remain low

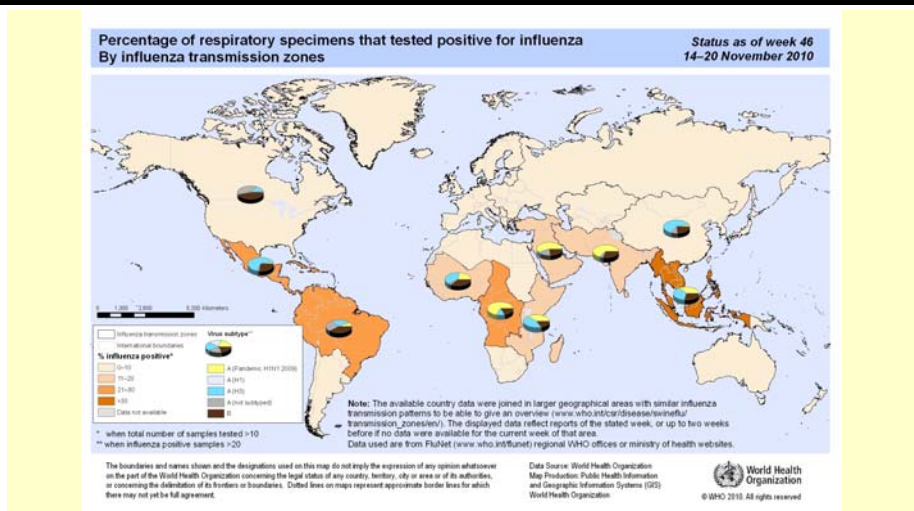
The Eastern Mediterranean Region (EMR), like the rest of the world, is witnessing low activities of influenza. No upsurge in cases of pandemic (H1N1) 2009 influenza virus has been noticed. As the winter season approaches, countries in the EMR, may experience increased activities in influenza-like illnesses (ILI) and pandemic H1N1 (2009) will continue to circulate alongside, A (H3N2) and influenza B viruses as reports received from few selected countries in the Region suggest. (Please see the table)

### Editorial note

The world entered into the post-pandemic period on 10th of August 2010. At that time, it was predicted that the pandemic (H1N1) 2009 virus would continue to circulate as a seasonal virus for some years to come. Based on the past experiences with pandemic influenza, it was deemed critical that the countries remain vigilant and continue to monitor the respiratory disease activities, specially during the influenza seasons. This is crucial since the behaviour of the pandemic (H1N1) 2009 virus as a seasonal influenza virus cannot be reliably predicted.

What has been observed till now in the EMR, as well as in most countries of the northern hemisphere is that, the pandemic (H1N1) 2009 virus is still causing variable level of illnesses and deaths and disproportionately affecting a younger age group, something that is not usual with any other seasonal influenza virus. Groups, therefore, identified during the pandemic as at higher risk of severe or fatal illness (Like pregnant women, those with chronic illnesses, etc) will probably remain at heightened risk, although the number of such cases could diminish.

Given this situation, it is critical that the Member States of the EMR maintain routine surveillance, focusing on influenza-like illness and cases of severe acute respiratory infections. In addition, it is critical that the countries continue to monitor for unusual events, such as clus-



Circulating influenza virus in some of the selected countries of EMR\*

Country	p (H1N1)	A/H3N2	Fl u-B
Afghanistan	X	X	X
Egypt	X	X	☑
Iran	☑	X	☑
Morocco	☑	X	X
Oman	☑	☑	☑
Tunisia	X	X	X

p (H1N1) : Pandemic (H1N1) 2009

\* As reported by the respective NICs to FluNet during week no 40 upto week no 46/2010  
X : Denotes no influenza virus detected during the reporting period.

ters of severe respiratory illness or death during the current influenza season. This will help in early detection of unusual events that might indicate a shift in the severity or pattern of diseases associated with influenza or emergence of a new virus. The functional National Influenza Centers (NICs) in the countries in the Region should step up collection and analysis of influenza viral samples and send selected samples to the WHO Collaborating Centers for further characterization and analysis.

The effects of influenza on the health of the active population should not be underestimated, particularly when the world has just been through its first pandemic in last 41 years. The intensity of respiratory diseases may remain low now but lowering the vanguard may prove too costly if vigilance is not maintained.

## Update on outbreaks

### in the Eastern Mediterranean Region

A(H5N1) in Egypt; CCHF and Dengue fever 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	[113 (37), 32.7%]
Indonesia	[171 (141), 82.4 %]
Viet Nam	[119(59), 49.6%
China	[40(26), 65%]
Global total	[510(303), 59.4%]

#### Crimean-congo haemorrhagic fever

Pakistan	[45(3), 6.6%]
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#### Cholera

Haiti	[97595*(2193), 2.2%]
Chad	[2508 (111), 4.4%]
Nigeria	[ 29115(1191),4%]

#### Kala-Azar (Visceral Leishmaniasis)

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

Pakistan	[10941(40), 0.3 %]#
Yemen	[1903(12), 0.6 %]#

#### Polio

Congo	[184(85), 46.1 %]
Pakistan	[133(0)]

CFR=Case-Fatality Rate; \* Number of hospital visits; # Laboratory-confirmed cases only