

Regional Office for the Eastern Mediterranean

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Current major event

Increasing trend of influenza in the Middle-East

Recently, a number of countries in the region *(please see the table)* have reported increasing trend of severe influenza cases caused by influenza A(H1N1) pdm09. Some fatal cases have also been reported from these countries.

Editorial note

An increasing number of severe influenza cases reported from a number of countries in the region has raised some concerns in recent time. While in most of the countries in the region the present winter season has been quiet showing no marked increase either in consultation rates for influenza/Influenza-like illnesses (ILI) and hospitalization rates for severe acute respiratory infections (SARI), the situation looked different in three countries of the region- namely Iraq, occupied Palestine territory (oPt) and Yemen. The predominantly circulating influenza virus in the region as a whole was found to be either influenza B or influenza A(H3N2), but the proportion of influenza samples positive for influenza A(H1N1) pdm09 was increasing in Iraq, Yemen and also in the occupied Palestine territory (oPt). Presently, in these three countries, the influenza A (H1N1) pdm09 appears to be the dominant influenza sub-type, being also responsible for severe disease manifestations in a handful number of cases. Many of the reported cases were also fatal, the majority, however, were amongst groups most at risk of severe from influenza infection disease (pregnant women and those with chronic health conditions).

The current trend of severe influenza cases in some of the countries in the region needs to be investigated. It is important to assess public health risk associated with this influenza virus- influenza A(H1N1) pdm09 which is responsible for majority of severe infections in these countries. It is also important to get a full epidemiological picture of the laboratory-confirmed cases re-



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Influenza cases reported from selected countries in the region*		
Country	Reported lab- confirmed cases	Death
Iraq	4	2
oPt	600	21
Yemen	24	7
* Data up to 13 January 2013		

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ported so far from these countries in order to assess transmission of cases, particularly to rule out any community – transmission. More importantly, complete virological data, specially sequencing data on circulating influenza subtypes and influenza A(H1N1)pdm09 will be helpful in understanding if any antigenic change has taken place in the circulating viruses which might explain the changing virulence of the virus as has been observed in these countries.

Globally, though *(please see the map)*, all different influenza sub-types are in circulation in northern hemisphere countries, and influenza A(H1N1)pdm09 has become a seasonal influenza virus since the pandemic influenza of 2009, some countries outside the EMR have also reported increased influenza activities due to influenza A(H1N1)pdm09. It makes good sense, therefore, to constantly monitor the circulating viruses as any change detected in its antigenicity may contribute to effective vaccine strains which may prevent lot of unnecessary deaths.

Update on outbreaks

in the Eastern Mediterranean Region

Novel Coronavirus in Saudi Arabia, Qatar and Jordan; Yellow fever in Sudan; Hepatitis E: in South Sudan; WNV in Tunisia.

Current public health events of international concern [cumulative N° of cases (deaths), CFR %] **Avian influenza** Egypt [169 (60), 35.75] Indonesia [190 (158), 83.1 %] Viet Nam [123(61), 49.5%] Cambodia [21(19), 90.4%] Global total [610(360), **59%**] Hepatitis E S. Sudan [2484 (29),1.1%]# Novel coronavirus Saudi Arabia [5 (3), **60 %**] Qatar [2(0)] Jordan [2 (2), 100%] West Nile Virus Tunisia [81 (12) **14.8.%**]# Yellow fever Sudan [849 (171), **20.2%**] # **Ebola Haemorrhagic Fever** D.R Congo [77(36), **46.7%**] Uganda [7 (4), 57%]

CFR=Case-Fatality Rate; # Suspected cases