

Current major event

Recommended Seasonal Influenza Vaccine for use in 2015-2016,

In February 2015, WHO has recommended influenza viruses for inclusion in the seasonal influenza vaccines in the northern hemisphere for 2015-16.

These recommendations are based on the antigenic and genetic analysis of the circulating influenza viruses shared by the countries with WHO through the Global Influenza Surveillance and Response System (GISRS).

Editorial note

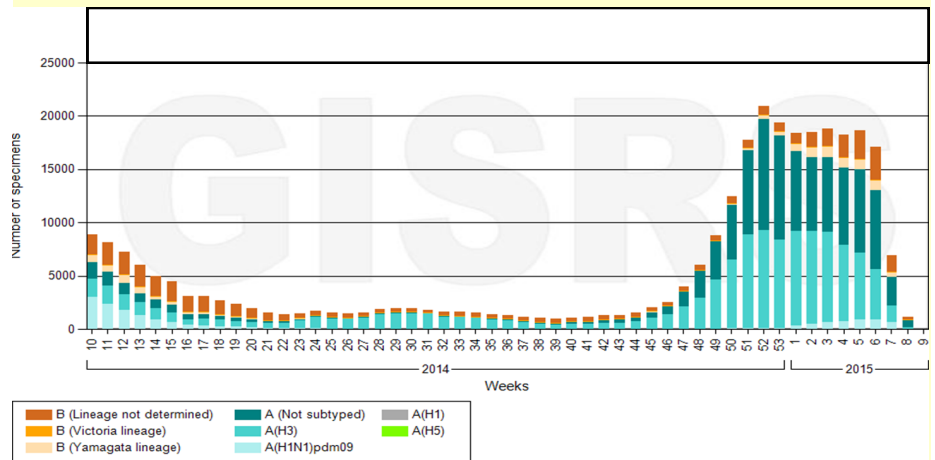
Immunization against influenza is considered to be an essential public-health intervention to control both seasonal epidemics and pandemic influenza.

The WHO's recommendations on influenza virus provide guidance for the countries and the vaccine manufacturers on the viruses to be included in the human influenza vaccines for seasonal influenza during the winter in the countries of the northern hemispheres. The regulatory agencies make the final decision about which influenza strains may be used in influenza vaccines to be licensed in their country. In contrast to many other vaccines, influenza vaccines strains are updated frequently to contain representative circulating viruses as human influenza virus evolve continuously.

Usually, seasonal influenza vaccine comprise three different virus types (i.e., are trivalent) and include influenza A (H1N1), A (H3N2), and B viruses. In the period between first week in 2014 and week number 8 in 2015 (please see above Figure), influenza virus circulation was active in the northern hemisphere including in the Eastern Mediterranean Region states.

In the countries of the Eastern Mediterranean Region (EMR), the circulation of influenza viruses were variable— low and sporadic in certain countries while high in some other countries. The influenza A (H1N1) pdm09 type virus was active in Tunisia from December to January,

Number of specimens positive for Influenza by subtype in Northern Hemisphere, 2014-2015



Recommended influenza viruses to be included in the 2015-2016 seasonal influenza vaccine:

Trivalent vaccines:

- an A/California/7/2009 (H1N1) pdm09-like virus
- an A/Switzerland/9715293/2013 (H3N2)-like virus
- a B/Phuket/3073/2013-like virus

Quadrivalent vaccines:

- The above three viruses and
- a B/Brisbane/60/2008-like virus

while local to regional activities were reported from Bahrain and Islamic Republic of Iran between September and January. In addition, influenza A (H3N2) was widespread actively in Egypt during December and January, and local to regional activity reported from Bahrain and Islamic Republic of Iran from November to January. Furthermore, influenza B virus was reported as active with local or regional levels in Egypt from September to January, in Morocco from November to January, and with local activity in Bahrain and Islamic Republic of Iran.

Based on these circulating patterns observed this year, the three subtypes of influenza viruses— influenza A (H1N1), pdm09, influenza A (H3N2) and influenza B viruses are recommended to be included (please see the box above) for the trivalent vaccine. Furthermore, it is recommended that the quadrivalent vaccines contain the three subtypes of the above viruses and additionally a B/Brisbane/60/2008-like virus.

Update on outbreaks

MERS-CoV in Saudi Arabia, Avian Influenza in Egypt

Current public health events of international concern

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

Avian Influenza A : 2006-2015

Egypt (H5N1)	[292 (103), 35.3%]
Egypt (H9N2)	[1(0), 0%]

MERS-CoV: 2012-2015

Saudi Arabia	[930 (364), 39.1%]
Jordan	[12 (6), 50%]
Oman	[5 (3), 60%]
UAE	[71 (9), 12.7%]
Kuwait	[3 (1), 33.3%]
Tunisia	[3 (1), 33.3%]
Qatar	[10 (4), 40%]
Yemen	[1 (1), 100%]
Egypt	[1 (0), 0%]
Lebanon	[1 (0), 0%]
Iran	[5 (2), 40%]

Ebola Virus Disease: 2014-2015

Guinea	[3175 (2101), 66.2%]
Liberia	[9265 (4057), 43.8%]
Sierra Leone	[11341 (3479), 30.7%]
UK	[1(0), 0%]
Nigeria	[20 (8), 40%]
Senegal	[1(0), 0%]
Spain	[1(0), 0%]
USA	[4(1), 25%]
Mali	[8(6), 75%]

Wild poliovirus: 2014-2015

Pakistan	[319 (0), 0%]
Afghanistan	[29(0), 0%]