

Current major event

Hajj 1437 H: No major public health event reported

The hajj of 1437 H concluded with no major health threat or event of concern. No major disease outbreak was reported among the nearly two million pilgrims who performed their hajj this year.

Editorial note

The hajj this year passed off without any major event or outbreaks. For the past ten years, there were no major public health event reported during the hajj.

As part of public health preparedness for hajj, the Ministry of health has conducted, together with WHO, a health risk assessment of the health hazards that might occur during the hajj. Based on the findings of this risk assessment, several public health mitigation measures were put in place during the hajj as per the International Health Regulations 2005 (IHR) requirements. These measures included enforcement of health requirements issued by the Kingdom for the hajj pilgrims, intensive risk communication amongst the pilgrims, screening of pilgrims at the points of entry for compliance with health requirements, active surveillance for infectious diseases that are of epidemiologically important, piloting syndromic based surveillance for early detection of any cluster of diseases as well as effective communication and coordination with all agencies involved in management of hajj.

Preliminary information indicated that compared to past years, there has been a decrease in the morbidity and mortality from most of the diseases commonly found amongst the pilgrims. For example, cases of seasonal influenza have declined compared with last year. This situation might be related to the Saudi's Ministry of Health's decision to make the use of seasonal influenza vaccine, compulsory to all internal pilgrims. It is worth noting that some countries have also vaccinated their pilgrims against seasonal influenza in accordance with the Saudi Arabia's health requirements for hajj

Reported events related to hajj and response by Saudi Arabia

Event/disease	Reported year	Burden	Action taken by Saudi authorities
Meningococcal meningitis (W135)	2000	>400 cases in KSA and other 15 countries	Requirement of ACYW135 vaccine from 2001 forward
Cholera	1989	102 cases	Improve water supply and sewage system
Meningococcal meningitis (A)	1987	Outbreak in KSA and other two countries	Requirement of AC vaccine from 1988 forward
Pneumonia	annual	cause of more than 50% of the hospital admissions	Advisory committee recommended Pneumococcal vaccine to >65 and <65 with co morbidity
Influenza	annual	Most of consultations are ILI	Recommend seasonal influenza vaccine since 2009 specially for the high risk groups
Stampede	hajj 2006	380 deaths and 289 wounded	Construction of new multi-level bridge (4 levels)
food poisoning	annual	44-132 cases per year	Activation of food regulation, Health education
Poliomyelitis	Annual	Disease for global eradication	Proof of vaccination required for all under 15 years who comes from affected country, and will be vaccinated again in entry points
Stampede	hajj 2015	2000 deaths (estimated)	New timings and controlled movement of the crowd visiting Jamarat

Past major health events related to hajj

1. Meningococcal meningitis caused by *serogroup W135* in 2000: > 400 cases in Saudi Arabia and in 12 other countries
2. Meningococcal meningitis caused by *serogroup A* in 1987: Outbreak reported in Saudi Arabia and two other countries
3. Cholera in 1989: 102 cases in Saudi Arabia

Heatsrokes, another potential health concern amongst the pilgrims also decreased compared to last year. This may be due to a number of measures that were put in place to reduce the high temperature effects on pilgrims such as awareness campaigns amongst the pilgrims on preventing health strokes and heat exhaustion

No cases of Middle East Respiratory Syndrome (MERS-CoV) were also reported among the pilgrims during the hajj. Now that the hajj is over with no health concern, vigilance for continuously monitoring the public health threats that may be associated with the returnee pilgrims should not be lowered as health security remains a shared responsibility.

Mass gatherings like the hajj is also an opportunity to improve surveillance and risk communication by way of documenting and sharing experience and best practices on what works and what doesn't work in mass gatherings. In such situations, innovative, time-bound and focused strategies are critical to prevent spread of diseases. This is also important for global health security.

Update on outbreaks

in the Eastern Mediterranean Region

MERS-CoV in Saudi Arabia;; Cholera in Somalia.

Current public health events of international concern

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

Avian Influenza : 2006-2016

Egypt (A/H5N1) [356 (121), 33.9%]
Egypt (A/H9N2) [3 (0)]

MERS-CoV: 2012-2016

Saudi Arabia [1414 (601), 42.5%]
Bahrain [1 (1), 100%]

Cholera : 2016

Somalia [8838 (433), 4.9%

Yellow fever: 2015-2016

Angola [3867 (369), 9.5%]
DRC [2269 (16), 0.7%

Lassa fever : 2015-2016

Nigeria [273(149), 54.5%]
Benin [54 (28), 51.8%

Avian Influenza A (H7N9) : 2013-2016

China [775 (307), 36%]

Avian Influenza A (H5N6) : 2016

China [4 (0)]

Wild poliovirus: 2014-2016

Pakistan [371(0)]
Afghanistan [54(0)]

Zika Virus Infection: 2007-2016

70 countries and territories have reported transmission so far