

Weekly Epidemiological Monitor

Regional Office for the Eastern Mediterranean

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Current major event

Seasonal Influenza in 2016 in the **Eastern Mediterranean Region**

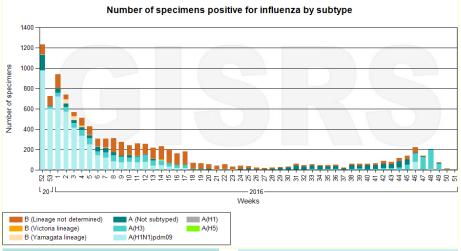
In the Eastern Mediterranean Region of WHO, seasonal influenza peaked at the end of 2015 and beginning of 2016 and returned to low levels by mid May 2016. In most of the countries, the timing of the season generally corresponded to patterns seen in the previous years.

Editorial note

During the 2015-2016 influenza season, influenza A(H1N1)pdm09, A(H3N2), and influenza B viruses were the most detected influenza viruses (please see the graph above) in the Eastern Mediterranean Region of WHO (Middle East and North African countries)

There was great variations in the circulating influenza viruses in the countries. Influenza A(H1N1)pdm09 was predominant with co-circulation of influenza B in Qatar and Bahrain. Influenza B and Influenza A (AH3N2) were cocirculating in Morocco, the Islamic Republic of Iran, Jordan, Pakistan, Iraq and Egypt throughout the season. On the other hand, Influenza B virus was predominant in Lebanon in the early phase of the season then Influenza A(H1N1) pdm09 virus started to co-circulate in December and A(H3N2) were predominant in Tunisia throughout the season. While Influenza A(H1N1)pdm09 was predominantly circulating virus in Syria and Palestine throughout the season.

All these countries experienced a peak in influenza activities that corresponded to the circulation of pre-dominant influenza viruses. Overall, the circulation of Influenza A(H1N1)pdm09 was predominant in the EMR followed by Influenza B and Influenza A (H3N2). The available data showed that the seasonal influenza viruses pre-dominantly circulated in the Region between October to March during the 2015-16 influenza season and the exact beginning and peak time of the influenza season varied by country. In Bahrain and Qatar, the influenza activities began as early as September and peaked in November while influenza activities in Morocco and Tunisia began in November and peaked later in the



Circulating seasonal influenza viruses in the Eastern Mediterranean Region, 2015-2016

Country	A (H3)	Inf (B)	A (H1N1)pdm09
Bahrain		√	√
Egypt	√	V	
Iran	√	V	
Iraq	√	√	
Jordan	√	V	
Lebanon		V	√
Morocco	√	V	
Pakistan	√	V	
Palestine			√
Qatar		V	√
Syria			√
Tunisia	√		

season during February and March respectively. In most other countries in the region (Afghanistan, Egypt, Islamic Republic of Iran, Iraq, Jordan, Oman, and Pakistan) the influenza activities began in November and peaked during December or January. In most of the countries in the region, the influenza activities gradually decreased from March to June.

Overall, the intensity of transmission was variable, but low in general. Reports of severe influenza outbreaks and clusters of severe disease and deaths associated with influenza were reported from Pakistan, Syria, Palestine and Yemen.

There is a need to scale up surveillance for influenza-like illness (ILI) and severe acute respiratory infection (SARI) for better diagnosis and characterization of circulating influenza virus in the Region.

Update on outbreaks

in the Eastern Mediterranean Region

MERS-CoV in Saudi Arabia and Oman; Cholera in Somalia; Cholera in Yemen

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%] Oman [1(0),]

Cholera: 2016

Somalia [14710 (497), 3.5%] Yemen [7730 (82), 1%]

Yellow fever: 2015-2016

Angola [4347 (377), 8.7% DRC [2987 (16), 0.5%

Lassa fever: 2015-2016

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

Avian Influenza A (H7N9): 2013-2016

China [775 (307),36%]

Avian Influenza A (H5N6): 2016

[4(0)]Wild poliovirus: 2014-2016

Pakistan [376(0)] [66(0)]

Zika Virus Infection: 2007-2016

73 countries and territories have reported transmission