

Weekly Epidemiological Monitor

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Current major event

Seasonal influenza situation in the WHO Eastern Mediterranean Region

The Eastern Mediterranean Region is well into the influenza season (2022–2023), with surveillance data showing a downward trend over the past 15 weeks after an initial surge in influenza cases. Countries need to maintain their influenza surveillance systems and monitor influenza activities as the trend could reverse.

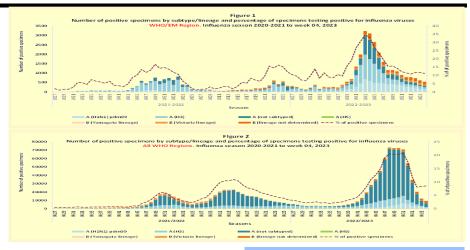
Editorial note

Seasonal influenza is a significant global health burden. Every year, influenza causes between 3 million and 6 million severe illnesses and up to 650 000 deaths worldwide. In the Eastern Mediterranean Region, an estimated 2000 to 12 000 influenza associated deaths occur annually.

Following the past two consecutive seasons (2020-2021 and 2021-2022) of low influenza activity, the current influenza season (2022-2023) started with a rapid upsurge of cases across the Region in line with the global predictions by scientists and modelers. However, after the initial surge, the number of cases quickly started declining since epidemiological week 43, 2022 (See Fig 1). The overall trend of seasonal influenza activity in the Region is consistent with the global trend (See Fig 2). While this downward trend is notable, influenza is unpredictable and the current downward trend may reverse. Therefore, countries need to continue monitoring the influenza situation, specifically, focusing on both epidemiological and virological data to detect cases caused by any novel influenza sub-types.

Seasonal influenza affects people of all ages. However, young children (<5 years of age) and older people (65+ years) are at greater risk of influenza infection and severe outcomes (*See table*). Other high-risk groups are pregnant women, healthcare workers and persons with chronic health conditions such as diabetes and heart disease. Vaccination is the most effective control measure against seasonal influenza.

During January 2023, 24 446 potential influenza cases were enrolled, of which 23 896 were tested for influenza (98%), of which 2725 specimens (11%) were positive. Of the influenza-positive specimens, 796 (29%) were influenza A (H1N1) pdm09, 674 (25%) were influenza B (lineage not determined), 507 (19%) were A(H3), 400 specimens (15%) were influenza A (not subtyped), and 348 (13%) were influenza B (Victoria lineage).



Proportion of positive cases by age group in the EMR, from week 27, 2022 to week 4, 2023

| Age groups | Proportion of positive |
|-----------------|------------------------|
| 0 — < 2 years | 14% |
| 2 — < 5 years | 9% |
| 5 — < 15 years | 16% |
| 15 — < 50 years | 40% |
| 50 — < 65 years | 12% |
| ≥ 65 years | 9% |

The WHO Regional Office for the Eastern Mediterranean promotes seasonal influenza vaccination for people as young as six months old and above. The administration of seasonal influenza vaccines needs to be prioritized. Due to vaccines limited availability, WHO recommends priority vaccination for the aforementioned high-risk groups.

WHO's Regional Office support for 2022–2023 influenza season

WHO's Regional Office continues to support countries in building laboratory capacities for improved molecular detection and genomic sequencing under the integrated surveillance framework for influenza, COVID-19, Respiratory syncytial virus (RSV) and other respiratory viruses of epidemic and pandemic potential. Support is being provided to integrate testing of samples for influenza, SARS-CoV-2 and other respiratory viruses into existing influenza surveillance systems. Gathering high-quality surveillance data and timely sharing of influenza data are crucial for controlling the disease and preventing potential epidemics and pandemics caused by any novel influenza subtypes. WHO's Regional Office continuously encourages and supports countries to share virological and epidemiological data through the regional, EMFLU, and global, FluNet surveillance platforms.

Update on outbreaks

in the Eastern Mediterranean Region

COVID-19 in 22 EMR countries

Current public health events of concern [cumulative N° of cases (deaths), CFR %]

Coronavirus disease 2019 (COVID-19):

| 2019–2023 | |
|---|----------------------------|
| Afghanistan | [208 452 (7876), 3.8%] |
| Bahrain | [696 614 (1536), 0.2%] |
| Djibouti | [15 690 (189), 1.2%] |
| Egypt | [515 635 (24 806), 4.8%] |
| Iran (Islamic Republic of) | [7 564 046 (144 744) 1.9%] |
| Iraq | [2 465 545 (25 375), 1%] |
| Jordan | [1 746 997 (14 122), 0.8%] |
| Kuwait | [662 858 (2570), 0.4%] |
| Lebanon | [1 228 262 (10 786), 0.9%] |
| Libya | [507 162 (6437), 1.3%] |
| Morocco | [1 272 222 (16 296), 1.3%] |
| occupied Palestinian territory (oPt) | [703 228 (5708), 0.8%] |
| Oman | [399 449 (4628), 1.2%] |
| Pakistan | [1 576 270 (30 640), 1.9%] |
| Qatar | [492 254 (686), 0.1%] |
| Saudi Arabia | [827 828 (9568) 1.2%] |
| Somalia | [27 318 (1361), 5%] |
| Sudan | [63 742 (5001), 7.8%] |
| Syrian Arab Republic | [57 423 (3163), 5.5%] |
| Tunisia | [1 150 356 (29 308), 2.5%] |
| United Arab Emirates | [1 049 209 (2348), 0.2%] |

[11 945 (2159), 18.1%]