

WHO Regional Office for the Eastern Mediterranean Health emergencies biweekly bulletin

25 January–7 February 2024

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Public health events and emergencies dashboard

25 January-7 February 2024



^{*}Signals followed-up: Signals are data and/or information detected that represent a potential acute risk to human health. Signals followed-up are signals for which confirmation is requested and/or for which official government websites and reports are continuously monitored for further information.

Multiple occurrences of the same graded emergency across different countries and territories are considered a single emergency. For instance, COVID-19 is a graded emergency in all 22 countries and territories of the WHO Eastern Mediterranean Region, but it counts as just one emergency when calculating the total number of graded emergencies in the Region.

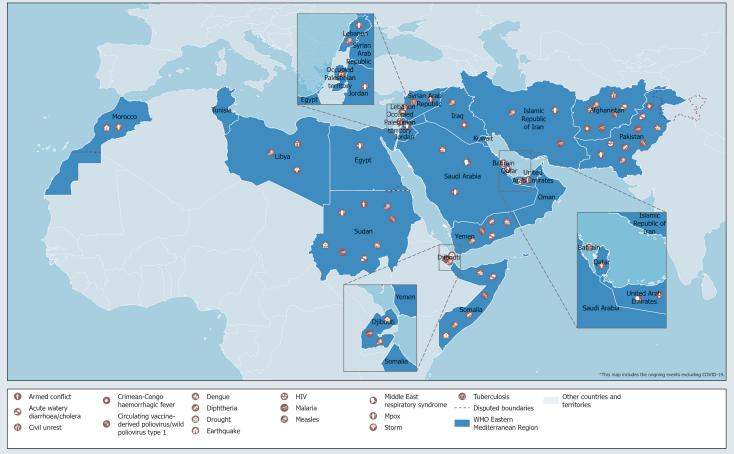
^{**}Events: An event is defined by article 1 of the International Health Regulations (2005) as "a manifestation of disease or an occurrence that creates a potential for disease". This can include events that are infectious, zoonotic, food safety-related, chemical, radiological or nuclear in origin and which are transmitted by people, vectors, animals, goods/food or the environment.

^{***}Grading: Grading is an internal WHO process that triggers WHO emergency procedures and activities for the management of the response.

More information on WHO grading, according to the Emergency Response Framework

Public health events and emergencies map

Geographical distribution of ongoing public health events and emergencies in the Eastern Mediterranean Region As at 7 February 2024



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Somalia: diphtheria

BACKGROUND

Diphtheria is a bacterial infection caused by a bacterium called *Corynebacterium diphtheriae*. The disease presents a range of symptoms that can progress from mild to severe, often with a gradual onset. Severe cases involve the release of a toxin by the bacteria, resulting in the formation of a thick grey or white coating in the throat, potentially obstructing respiration.

Systemic complications can occur if the toxin enters the bloodstream. These include myocarditis (inflammation of the heart muscle); nerve inflammation leading to paralysis; renal problems; and haemorrhagic (bleeding) conditions, contributing to arrhythmias (irregular heartbeats) and neurological deficits.

Diphtheria carries a higher mortality risk among unvaccinated young children. Being vaccinated is the best way to prevent getting sick with diphtheria or spreading it to other people. The vaccine is safe and helps the body to avoid infection.

Somalia has been experiencing persistent complex emergencies for more than two decades owing to protracted armed conflict and recurring cycles of drought and floods. This situation has resulted in chronic food insecurity, internal population displacement, reduced access to basic health services, and outbreaks such as measles and acute watery diarrhoea/cholera.

Less than half of the population has access to basic health services, with most facilities located in urban areas. According to the latest WHO and United Nations Children's Fund estimates of national immunization coverage survey in 2022, only 42% of children received three doses of diphtheria and tetanus toxoid with pertussis-containing vaccine, which protects against the three diseases. Areas under nonstate actors have received no vaccination services for over 15 years, exposing older children and young adults to further outbreaks not limited to diphtheria.



SITUATION UPDATE

Two diphtheria outbreaks have been recorded in Somalia. The first was recorded in February 2019 and resulted in 61 cases (case fatality ratio [CFR]: 50%) and the second was recorded in July 2023. Since the start of the July 2023 outbreak, which is ongoing, Somalia has been reporting suspected cases of diphtheria on a weekly basis. As at 7 February 2024, the country had reported 270 cases in total and 53 deaths (CFR: 20%) from three states (Galmudug, Hirshabelle and Puntland) during this outbreak.

This outbreak was confirmed by one positive sample collected in September 2023 among five other samples that were tested in the United Kingdom Health Security Agency laboratory (a WHO collaborating centre in London) in December 2023.

Most of the affected cases have been children aged under 10 years who are living in displaced communities and have no prior diphtheria vaccination.

RESPONSE ACTIVITIES

- WHO's drought response team aided Somalia's diphtheria outbreak response by distributing 1000 doses of diphtheria antitoxin; 700 more doses are on their way.
- Field investigations were conducted by 110 trained health workers, and 300 sample collection kits were distributed.
- WHO has been updating plans for targeted vaccination campaigns; enhancing surveillance and case management capacities; and providing risk communication and community engagement materials in local languages to raise awareness among vulnerable groups.

Despite the ongoing response by WHO, some challenges remain, including:

- continuous displacement and overcrowding;
- surveillance system and laboratory capacity constraints;
- complex ongoing emergencies and difficulties in sustaining vaccination activities due to overstretched health systems, especially after the El Niño-related floods in 2023;
- global shortage of diphtheria antitoxins; and
- ongoing and increasing internal displacement involving a high proportion of children with no prior diphtheria vaccination.

Saudi Arabia:

dengue epidemiology and strategic response

BACKGROUND

Dengue has been a significant health concern in Saudi Arabia since its first documentation in 1993, with Jeddah the original epicentre. The country experienced sporadic outbreaks in subsequent years, primarily in the western region, leading to its classification as a dengue-endemic area in 2004.

RESPONSE ACTIVITIES

In response to the evolving dengue situation, the Ministry of Health of Saudi Arabia has implemented a comprehensive strategy, incorporating a multiphase approach that includes capacity-building, innovation and consolidation efforts to manage the outbreak effectively. The strategy features a national plan for vector-borne diseases; enhancements in health facility reporting; decentralized testing; and robust surveillance systems.

A team from the WHO Regional Office for the Eastern Mediterranean visited Saudi Arabia to analyse the epidemiological status of dengue, national response strategies and innovative approaches. The team highlighted the country's approach to tackling the disease, which can be categorized into several key areas:

 Leadership, coordination and planning: Strong multisectoral coordination has been implemented. The country's strategic integration concept promotes synergy and efficient decision-making, which are crucial for timely interventions during outbreaks.



WHO team members with Ministry of Health representatives in Saudi Arabia. Photo credit: WHO

- Surveillance and case management: Saudi Arabia has a well-structured surveillance system, enabling real-time data analysis and informed decision-making. The dengue case management approach includes detailed guidelines for health professionals, ensuring that a consistent and effective treatment pathway is integrated within the national health system.
- Laboratory diagnostics: The country boasts a robust laboratory network, with regional and national laboratories playing pivotal roles in dengue diagnosis and surveillance. Saudi Arabia's emphasis on accreditation and workforce development ensures high standards in laboratory diagnostics.
- Vector control: Saudi Arabia's implementation of the Wolbachia project represents a forward-thinking approach to vector control. This project fights dengue by introducing Wolbachia bacteria into mosquito populations to reduce their ability to transmit diseases like dengue. The bacteria impede the mosquito's capacity to spread the virus.
- Community engagement: Effective health education initiatives, like the Red Card campaign, have been implemented to enhance community participation in dengue prevention. These initiatives promote preventive behaviours and encourage community reporting of mosquito breeding sites.
- Clinical management: Comprehensive clinical management guidelines for dengue are available at all health facilities, which is part of providing appropriate care.

Fig. 1. An information product produced by the Red Card campaign to raise awareness of dengue



Saudi Arabia: dengue epidemiology and strategic response

RECOMMENDATIONS INSPIRED BY SAUDI ARABIA'S APPROACH

Saudi Arabia's strategy to fight dengue can serve as a model for other countries and territories of the Region to strengthen their responses to dengue outbreaks. It is crucial, however, to tailor approaches to local contexts, especially in low-resource or conflict-affected contexts.

For countries and territories with limited financial resources, it is vital to:

- prioritize the development of an adaptable national strategic plan, focusing on cost-efficient yet impactful measures such as community-led source reduction and basic larvicidal activities;
- focus on low-cost vector control strategies, such as environmental management and public education campaigns to eliminate breeding sites, as the Wolbachia project may not be feasible owing to cost constraints;
- decentralize testing, using affordable rapid diagnostic tests, to enhance case detection and management;
 and
- emphasize training and capacity-building within existing health facility and community structures, to optimize resource use and empower local responses to dengue.

Enhancing regional collaboration is crucial for all countries and territories, as sharing knowledge, expertise and best practices through regional networks can provide critical support. Countries and territories affected by dengue are also recommended to adopt a multisectoral approach, emphasizing strong governance, robust surveillance and comprehensive vector control strategies to better fight dengue.

New public health events and emergencies

25 January-7 February 2024

Member State/territory	Hazard	Event	WHO grade ^a	Cases/injuries	Deaths	Date of start ^b
Somalia	Biological	Diphtheria	Somalia Complex Emergencies, Protracted 3	270	53	29-Jan-24

This diphtheria outbreak, confirmed in January 2024, is believed to be a continuation of an earlier outbreak reported in 2023. From 8 January 2023 to 7 February 2024, 270 suspected cases of diphtheria were reported, with 53 deaths, giving a case fatality ratio of 20%. The cases were reported from Galmudug, Hirshabelle and Puntland states.

Yemen	Biological	Dengue	Multi-region Dengue, Grade 3	34 969	29	25-Jan-24
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Dengue is endemic in Yemen. Various subnational-level outbreaks took place in 2023 and were reported to WHO in January 2024. Over 2023, 34 969 dengue cases were reported, with 29 associated deaths (case fatality ratio: 0.08%). Of the cases, 58% were males, with most cases in the age group 15–29 years (35%). Cases were reported from the northern (36.5%) and southern (63.5%) governorates. A peak in cases was observed in epidemiological week 23 of 2023. Despite the El Niño-related floods, dengue is below the expected levels of reporting.

Yemen	Biological	Diphtheria	Yemen Complex Emergencies, Protracted 3	128	1	25-Jan-24
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Diphtheria is endemic in Yemen, and cases have risen gradually since 2021, with a significant increase noted in 2023, due to low vaccination coverage. On 25 January 2024, WHO was notified of a diphtheria outbreak. From 1 to 29 January 2024, 128 diphtheria cases, with one associated death, were reported, giving a case fatality ratio of 0.8%. The cases were reported from both the northern [80%] and southern [20%] governorates. Children aged 5–14 years accounted for 45% of the cases; 64% of the total cases were males. Challenges reported include limited vaccination coverage in the northern governorates and a shortage of diphtheria antitoxin.

More information on WHO grading, according to the Emergency Response Framework

Global graded emergencies: COVID-19 and mpox

Regional graded emergencies: circulating vaccine-derived poliovirus

Multiregional graded emergencies: dengue, cholera and the Greater Horn of Africa drought and food insecurity

^a Grading is an internal WHO process that triggers WHO emergency procedures and activities for the management of the response.

^b Date of start: The date the health event is created in the Event Management System (EMS).

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Afghanistan	Biological	Acute watery diarrhoea (AWD)	Afghanistan Complex Emergencies, Protracted 3	203 901	93	22-Sep-21
previous week. Since the start of 2	023, 5912 rapid diagn		ne associated death. This represents a stab ases of AWD with dehydration. Since the st 123.			
Afghanistan	Biological	COVID-19	COVID-19, Protracted 3	229 590	7965	24-Feb-20
As at 9 December 2023, 229 590 ca	ses and 7965 deaths	had been reported. A total of 1 340 648 po	olymerase chain reaction (PCR) tests had b	een conducted by the	same date.	
Afghanistan	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	1-Jan-23
No new cases of cVDPV2 were repo and on strengthening surveillance			bal Polio Eradication Initiative are focusing	on reaching every las	t child in Afgha	anistan with vaccine
Afghanistan	Societal	Civil unrest	Afghanistan Complex Emergencies, Protracted 3	NA	NA	30-Aug-21
In 2023, no major casualities or dis	placements were obs	erved. Civil unrest events increased in the	e country in 2023.			
Afghanistan	Biological	Crimean-Congo haemorrhagic fever	Afghanistan Complex Emergencies, Protracted 3	1234	114	3-May-23
			c fever were reported from 26 provinces, wi ses reported in week 50 of 2023 is almost f			
Afghanistan	Biological	Dengue	Afghanistan Complex Emergencies, Protracted 3	1810	1	14-Aug-22
	ases of dengue and on	ie death were reported. A total of 921 san	50 of 2023, 33 suspected cases of dengue v nples were collected in 2023, of which 356			
Afghanistan	Biological	Malaria	Afghanistan Complex Emergencies, Protracted 3	1609	0	25-Sep-23
			1609 confirmed malaria cases were report hshan, Faryab, Ghazni, Kabul, Kandahar, Ka			
Afghanistan	Biological	Measles	Afghanistan Complex Emergencies, Protracted 3	4871	18	19-Apr-21
Since January 2024, 4871 suspecte (45.9%) were females.	d measles cases and	18 deaths have been reported, giving a ca	ase fatality ratio of 0.4%. Of these cases, 3	936 (80.8%) were chilo	dren aged unde	er 5 years and 2238
Afghanistan	Biological	Wild poliovirus type 1 (WPV1)	Afghanistan Complex Emergencies, Protracted 3	6	0	16-Mar-23
		ry 2023 to 6 February 2024, six cases wer ance and technical support at all levels.	e reported. WHO and the Global Polio Eradi	cation Initiative are fo	cusing on reac	hing all children in
Bahrain	Biological	COVID-19	COVID-19, Protracted 3	696 614	1536	24-Feb-20
As at 9 December 2023, 696 614 CC	OVID-19 cases and 153	36 deaths had been reported. A total of 10	578 766 PCR tests had been conducted by	the same date.		
Bahrain	Biological	Мрох	Mpox, Protracted 2	2	0	18-Sep-22
As at 20 December 2023, two mpox	cacac had boon rong	satesh on dain harr				

As at 7 February 2024

lember State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of sta
jibouti	Biological	COVID-19	COVID-19, Protracted 3	15 690	189	18-Mar-20
s at 9 December 2023, 15 690 COVID-1	9 cases and 189 d	eaths had been reported. A total of 319 15	3 PCR tests had been conducted by the sa	nme date.		
jibouti	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	NA	NA	21-May-23
is estimated that about 11% of the po	pulation of Djibou	ti is acutely food insecure.				
jibouti	Biological	Malaria	Ungraded	254 776	NA	1-Jan-23
			t peaks in confirmed cases were reported to be reported from January to September 202			
jibouti	Biological	Measles	Ungraded	12	NA	26-Jun-22
s at 15 February 2023, 12 suspected m	easles cases had	been reported, two of which were confirme	ed.			
gypt	Biological	COVID-19	COVID-19, Protracted 3	516 023	24 830	16-Feb-20
s at 2 December 2023, 516 023 COVID-	19 cases had beer	n reported, with 24 830 deaths. A total of 1	2 645 544 PCR tests had been conducted	by the same date.		
gypt	Biological	Мрох	Mpox, Protracted 2	3	0	27-Sep-22
s at 20 December 2023, three mpox cas	ses had been repo	rted, with no deaths. The most recent cas	e was reported on 12 December 2022.			
ran (Islamic Republic of)	Biological	COVID-19	COVID-19, Protracted 3	7 626 527	146 799	19-Feb-20
s at 28 January 2024, 7 626 527 COVID	-19 cases had bee	n reported, with 146 799 deaths.				
ran (Islamic Republic of)	Biological	Malaria	Ungraded	4425	1013	11-Dec-22
rea in the Sistan province of the Islami	c Republic of Iran		were locally transmitted. The reported cas an area currently facing a malaria outbrea uel-smuggling activities.			
ran (Islamic Republic of)	Biological	Measles	Ungraded	32	3	8-Jun-21
			ination in the country in 2019. Since the o e ongoing measles outbreak in neighbouri		ses and three a	associated deat
ran (Islamic Republic of)	Biological	Мрох	Mpox, Protracted 2	1	0	18-Aug-22
s at 7 February 2024, only one mpox ca	ase had been repor	ted, with no deaths. The last case was rep	ported on 18 August 2023.			
raq	Biological	COVID-19	COVID-19, Protracted 3	2 465 545	25 375	24-Feb-20
s at 20 December 2023, 2 465 545 COV	ID-19 cases had b	een reported, with 25 375 deaths. A total (of 19 550 473 PCR tests had been conduct	ed by the same date.		
raq	Biological	Crimean-Congo haemorrhagic fever	Iraq Crimean-Congo Haemorrhagic Fever, Grade 2	3584	155	21-Apr-22
			een reported, of which 968 were confirmed vere symptomatic – including one reportec		om 1 January 2	023 to 6 Februa
			Iraq Complex Emergencies,	3655	2	19-Apr-23

community engagement campaigns on measles.

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start	
Jordan	Biological	COVID-19	COVID-19, Protracted 3	1 746 997	14 122	2-Mar-20	
As at 9 December 2023, 1 746 997 COVID	D-19 cases had be	en reported, with 14 122 deaths. A total of	17 201 885 PCR tests had been conducted	d by the same date.	1		
Jordan	Biological	Мрох	Mpox, Protracted 2	1	0	11-Sep-22	
As at 20 December 2023, only one mpox	case had been rep	ported, with no deaths. The last case was	reported on 8 September 2022.				
Kuwait	Biological	COVID-19	COVID-19, Protracted 3	666 551	2570	24-Feb-20	
As at 9 December 2023, 666 551 COVID-	19 cases had beer	reported, with 2570 deaths. A total of 8 4	55 743 PCR tests had been conducted by t	he same date.			
Lebanon	Biological	COVID-19	COVID-19, Protracted 3	1 239 904	10 947	22-Feb-20	
As at 9 December 2023, 1 239 904 COVID	D-19 cases had be	en reported, with 10 947 deaths. A total of	10 696 009 PCR tests had been conducted	d by the same date.			
Lebanon	Biological	Measles	Ungraded	6	0	4-Jul-23	
5 years, followed by children aged 5–9 y WHO supported the Ministry of Public H	From 4 to 18 January 2024, six suspected measles cases were reported from Nabatieh (2), South Lebanon (2), Bekaa (1) and North Lebanon (1). The highest attack rates were for children aged under 5 years, followed by children aged 5–9 years. Among the measles cases in children, 77% of cases had never received a single dose of measles vaccine. WHO supported the Ministry of Public Health in Lebanon to conduct a measles risk assessment. It will continue to support the Ministry to enhance surveillance and disease outbreak investigation and response. To improve early detection and reporting, WHO supported the Ministry to run 25 training sessions targeting 919 health workers across all central and peripheral hospitals and medical centres in the country.						
Lebanon	Biological	Мрох	Mpox, Protracted 2	27	0	20-Jun-22	
As at 20 December 2023, a total 27 mpo	x cases had been	reported, with no deaths. The last case wa	s reported on 9 March 2023.				
Libya	Societal	Armed conflict	Libya Complex Emergencies, Protracted 2	NA	NA	2-Sep-18	
A state of emergency was announced by conflicts have been reported.	the government o	n 2 September 2018 and there have been	on-and-off conflicts since then, and into 2	024. Since August 20	23, however, no	major armed	
Libya	Biological	COVID-19	COVID-19, Protracted 3	507 269	6437	25-Mar-20	
From 3 January 2020 to 7 February 2024	, 507 269 confirme	ed COVID-19 cases were reported, with 643	7 deaths (case fatality ratio: 1.3%).				
Libya	Meteorological	Cataclysmic storm	Libya Tropical Storm, Grade 2	NA	5898	12-Sep-23	
response teams used 182 sentinel sites deaths. More than 96% of the cases we	for daily data sha re either respirator	which caused extensive damage, especial ring from the flood-hit areas, which report y infections or diarrhoea. On 1 February 2I the damage caused by Tropical Storm Da	ed 11 226 suspected cases of infectious d 024, the Libyan government declared a sta	iseases/medical cond	ditions, includinç	two associated	
Libya	Biological	Measles	Libya Complex Emergencies, Protracted 2	1962	1	16-Mar-23	
		2023, affecting six districts. Sabha has bee nella cases were confirmed, with one associ					
Morocco	Biological	COVID-19	COVID-19, Protracted 3	1 277 956	16 298	3-Mar-20	
As at 19 December 2023, 1 277 956 COV	ID-19 cases and 1	6 298 deaths had been reported. A total of	13 068 242 PCR tests had been conducted	d by the same date.			
Morocco	Geological	Earthquake	Morocco Earthquake, Grade 2	1204	1037	10-Sep-23	
		measuring 6.8 on the Richter scale, with n acted areas, reported considerable damage					

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Morocco	Biological	Мрох	Mpox, Protracted 2	3	0	2-Jun-22
As at 20 December 2023, three mpox cas	ses had been repo	rted, with no deaths. The last case was re	ported on 20 August 2022.			
Occupied Palestinian territory	Societal	Armed conflict	Israel/occupied Palestinian territory Hostilities, Grade 3	67 147	27 708	7-0ct-23
		ian territory had killed 27 708 and injured s, including children, women and elderly p	67 147 people since 7 October 2023. Abou eople.	t 1.7 million people h	ad been interna	lly displaced by
Occupied Palestinian territory	Biological	COVID-19	COVID-19, Protracted 3	703 228	5708	12-Mar-20
As at 29 January 2023, 703 228 COVID-1	9 cases, with 5708	3 deaths, had been reported. A total of 3 4	77 872 PCR tests had been conducted by t	he same date.		
Oman	Biological	COVID-19	COVID-19, Protracted 3	399 449	4628	24-Feb-20
As at 9 December 2023, 399 449 COVID-	19 cases and 4628	deaths had been reported. A total of 3 73	7 036 PCR tests had been conducted by th	ne same date.		
Pakistan	Biological	COVID-19	COVID-19, Protracted 3	1 580 631	30 656	27-Feb-20
As at 9 December 2023, 1 580 631 COVID	0-19 cases and 30	656 deaths had been reported. A total of 3	31 656 354 PCR tests had been conducted	by the same date.		
Pakistan	Biological	Cholera	Multi-region Cholera, Grade 3	1893	NA	17-Apr-22
7 February 2024 (week 6). Of this total, 9	904 cases (48%) w	vere from Balochistan province. A decreasi	tute of Health of Pakistan, the country rep ng trend in weekly cases was observed fr ltures performed, a single sample tested	om week 1, when 477	suspected case	
Pakistan	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	12-Nov-19
Zero cVDPV2 cases were reported in 202	2 and 2023, and th	ne number of cVDPV2-positive environmen	tal samples in 2022 and 2023 was also ze	ro.		
Pakistan	Biological	Crimean-Congo haemorrhagic fever	Ungraded	19	4	12-Nov-23
As at 20 November 2023, 19 positive Crin	mean-Congo haem	norrhagic fever cases had been reported –	of which 18 were health workers – includ	ing four deaths.		
Pakistan	Biological	Dengue	Multi-region Dengue, Grade 3	319	NA	4-Sep-23
In week 34 of 2023, 319 confirmed deng	ue cases were rep	orted. Most of the cases were reported fro	m Faisalabad, Lahore, Multan and Rawalp	indi.		
Pakistan	Biological	Diphtheria	Ungraded	611	55	2-Nov-23
As at week 45 of 2023, 611 suspected di cases (20.1%) were children aged under	•	d been reported, with 55 deaths, giving a o	case fatality ratio of 9%. Children aged abo	ove 5 years accounted	d for 488 cases	(79.9%), while 123
Pakistan	Biological	HIV/AIDS	Ungraded	5234	590	1-Jan-19
		registered in three hospitals, with 590 de WHO Country Office in Pakistan is closel	raths (case fatality ratio: 11%). In 2023, 12 y following the HIV/AIDS situation.	255 cases were regist	ered. The WHO	Regional Office for
Pakistan	Biological	Malaria	Ungraded	2 036 831	NA	23-Sep-22
As at 5 November 2023, 2 036 831 confir same period of 2022 (1 959 896 confirme			the number of cases reported that year wa	as already 1.75 times	as many cases	as reported in the
Pakistan	Biological	Measles	Ungraded	13 628	NA	26-Jan-21
From week 1 to week 43 of 2023, 13 628 (35%), while 4182 cases (31%) were chi			78 cases per 1 000 000 population. Childre	en aged 9 to 24 month	ns accounted fo	4801 of the cases
Pakistan	Biological	Мрох	Mpox, Protracted 2	7	0	21-Apr-23
As at 20 December 2023, seven mpox ca	ses had been repo	rted, with no deaths. The last case was re	ported on 21 September 2023.			

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
Pakistan	Biological	Wild poliovirus type 1 (WPV1)	Ungraded	6	0	16-Mar-23
From 1 January 2023 to 6 February 2024 strengthening surveillance and technical		were reported. WHO and the Global Polio E vels.	radication Initiative are focusing on reach	ing every last child in	ı Pakistan with v	accines, and
Qatar	Biological	COVID-19	COVID-19, Protracted 3	514 524	690	1-Mar-20
As at 29 January 2024, there had been 5	14 524 confirmed	COVID-19 cases, with 690 deaths, giving a	case fatality ratio of 0.1%.			
Qatar	Biological	Мрох	Mpox, Protracted 2	5	0	25-Jul-22
As at 7 February 2024, five mpox cases I	had been reported,	with no deaths. The last case was reporte	ed on 20 September 2022.			
Saudi Arabia	Biological	COVID-19	COVID-19, Protracted 3	841 469	9646	3-Mar-20
As at 9 December 2023, 841 469 COVID-	19 cases, with 964	66 deaths, had been reported. A total of 45	484 848 PCR tests had been conducted by	y the same date.		
Saudi Arabia	Biological	Dengue	Multi-region, Dengue Grade 3	14 055	0	2-May-23
As at 20 December 2023, 14 055 confirm	ned dengue cases	had been reported, with no deaths.				
Saudi Arabia	Biological	Middle East respiratory syndrome (MERS)	Ungraded	2200	858	5-Nov-12
Since the first report of MERS in Saudi A	Arabia in 2012, the	country has reported 2200 MERS cases in	total, including 858 deaths. These figures	are correct as at 12	December 2023	
Saudi Arabia	Biological	Мрох	Mpox, Protracted 2	8	0	17-Jul-22
As at 20 December 2023, eight mpox cas	ses had been repo	rted, with no deaths. The most recent case	e was reported on 30 August 2022.			
Somalia	Biological	COVID-19	COVID-19, Protracted 3	27 334	1361	16-Mar-20
As at 4 February 2024, 27 334 confirmed	l COVID-19 cases h	nad been reported, with 1361 deaths, givin	g a case fatality ratio of 5%.			
Somalia	Biological	Cholera	Multi-region Cholera, Grade 3	1401	18	8-Feb-18
		ted, with 18 associated deaths. The Banaa e highest number of reported cases, accou		le increase in the nur	mber of reported	cholera cases
Somalia	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	27	0	18-Aug-20
As at 4 February 2024, 27 cases of cVDF	PV2 had been repo	rted since the start of the outbreak in Aug	ust 2020. From 1 January to 4 February 20	124, no new cVDPV2 c	ases were repor	ted from Somalia.
Somalia	Biological	Dengue	Multi-region Dengue, Grade 3	668	NA	5-0ct-23
		nd been reported, of which 668 cases teste an integrated approach since Somalia has			ed work plan for	dengue and other
Somalia	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	NA	118	2-Jun-22
and the worsening of food security and r El Niño floods that hit the country. The f	nutrition outcomes flooding caused se	country marked its fifth consecutive faile s, affecting more than 7.8 million people. I rrious damage instead of improving the dro nt, with 899 000 people displaced and 118	ater in 2023, in October, Somalia finally e ought impacts. According to the Somali Dis	xperienced rain; how	ever, this took tl	ne form of
Somalia	Biological	Measles	Somalia Complex Emergencies, Protracted 3	1247	NA	9-Mar-22
As at 21 January 2024, 1247 suspected	measles cases had	d been reported. The regions reporting the	most cases were Banaadir (302 cases), Ge	edo (156) and Lower S	Shabelle (152).	

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of star
udan	Societal	Armed conflict	Sudan Conflict and Complex Emergency, Grade 3	33 000	14 600	22-Jan-21
		d-April 2023, at least 14 600 people have b from the use of heavy weaponry in densel				
Sudan	Biological	COVID-19	COVID-19, Protracted 3	63 993	5046	15-Mar-20
As at 9 December 2023, 63 993 COVI	D-19 cases and 5046	6 deaths had been reported. A total of 479 2	278 PCR tests had been conducted by the	same date.		
Gudan	Biological	Cholera	Multi-region Cholera, Grade 3	10 640	295	10-May-23
		ases, including 295 deaths (case fatality ra lecreasing trend since the start of Decemb		es and 48 localities, w	rith an attack r	rate of 47.5 per 10
Sudan	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	10-Aug-20
No new cVDPV isolates were reported positive environmental samples in 20		. As at December 2023, zero cVDPV2 cases one such sample in 2022.	had been reported in Sudan, compared wi	th one case in 2022. 1	There were also	o zero cVDPV2-
Sudan	Biological	Dengue	Multi-region Dengue, Grade 3	5525	55	20-0ct-21
		ported, with 55 deaths (case fatality ratio: highest share of cases (58%), followed by I			r localities in 1	10 states
Sudan	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	NA	NA	21-May-23
		n Sudan are affecting more than 5.6 million ssistance. The ongoing war has triggered p				
Sudan	Biological	Malaria	Sudan Conflict and Complex Emergency, Grade 3	1 467 006	215	9-0ct-22
s at 10 November 2023, 1 467 006 r	malaria cases had be	een reported, with 215 deaths.				
Gudan	Biological	Measles	Sudan Conflict and Complex Emergency, Grade 3	4039	107	1-Aug-21
Measles cases continue to be report	ed from 12 states in	Sudan, reaching 4039 cases and 107 death	ns by 11 December 2023, with a case fatal	ity ratio of 2.65%.		
Gudan	Biological	Мрох	Mpox, Protracted 2	19	1	31-Jul-22
As at 20 December 2023, 19 mpox ca	ses and one death h	ad been reported. The most recent case wa	as reported on 5 April 2023.			
Syrian Arab Republic	Societal	Armed conflict	Syrian Arab Republic Complex Emergencies, Protracted 3	NA	NA	27-Jun-18
The security situation within the Syri	an Arab Republic rei	mains unstable.				
Syrian Arab Republic	Biological	COVID-19	COVID-19, Protracted 3	57 423	3163	23-Mar-20
as at 19 December 2023, 57 423 COV	TID-19 cases and 316	63 deaths had been reported. A total of 202	513 PCR tests had been conducted by the	e same date.		
Syrian Arab Republic	Biological	Tuberculosis	Syrian Arab Republic Complex Emergencies, Protracted 3	10	0	5-Dec-23
	10 tuberculosis case	Tuberculosis s, with 20 contacts, was reported from Al- d contacts received preventive treatment. A	Emergencies, Protracted 3 Hasakah governorate. Of the 10 cases, six	were confirmed and f	our were suspe	

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start			
Tunisia	Biological	COVID-19	COVID-19, Protracted 3	1 153 361	29 423	2-Mar-20			
As at 19 December 2023, 1 153 361 COV	As at 19 December 2023, 1 153 361 COVID-19 cases and 29 423 deaths had been reported. A total of 5 013 383 PCR tests had been conducted by the same date.								
United Arab Emirates	Biological	COVID-19	COVID-19, Protracted 3	1 067 030	2349	29-Jan-20			
As at 20 December 2023, 1 067 030 COV	ID-19 cases and 2	349 deaths had been reported.							
United Arab Emirates	Biological	Middle East respiratory syndrome (MERS)	Ungraded	1	0	10-Jul-23			
		reported in the United Arab Emirates. Invertizing public health without disclosing per	stigation revealed no camel or sick person rsonal data.	contact. Immediate	actions included	l contact tracing,			
United Arab Emirates	Biological	Мрох	Mpox, Protracted 2	16	0	25-May-22			
As at 20 December 2023, 16 mpox cases	s had been reporte	d, with no deaths. The most recent case w	as reported on 24 July 2022.						
Yemen	Biological	COVID-19	COVID-19, Protracted 3	11 945	2159	10-Apr-20			
As at 9 December 2023, 11 945 COVID-1	9 cases and 2159	deaths had been reported. A total of 329 5	92 PCR tests had been conducted by the s	ame date.					
Yemen	Biological	Cholera	Multi-region Cholera, Grade 3	4108	14	11-Jul-17			
cases, about 36% (1479 cases) were ch	ildren aged under	$ar{b}$ years. WHO is leading the development $ar{b}$	ases, with 14 associated deaths, giving a c of a proposal to the International Coordina O is also supporting surveillance; water, s	ting Group on Vaccine	Provision. The	plan proposes			
Yemen	Biological	Circulating vaccine-derived poliovirus type 1 (cVDPV1)	Polio (cVDPV), Grade 2	0	0	29-May-20			
As at 17 December 2023, there was no eand field monitoring. The most recent c			n Initiative and partners are supporting th	e local public health :	authorities in fie	ld investigation			
Yemen	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	3	0	30-Nov-21			
As at 12 December 2023, three cVDPV2	cases had been re	ported in Yemen in 2023.							
Yemen	Biological	Measles	Yemen Complex Emergencies, Protracted 3	49 498	396	29-Mar-21			
As at 25 November 2023, 49 498 suspec Yemen accounts for 61.3% of reports an		and 396 deaths had been reported. The m	nain hot spots are Saada (11.3% of cases),	Taiz (8.3%), Al Bayda	a (8.1%) and Ade	en (7.3%). North			



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