



WHO Regional Office for the Eastern Mediterranean  
**Health emergencies biweekly bulletin**

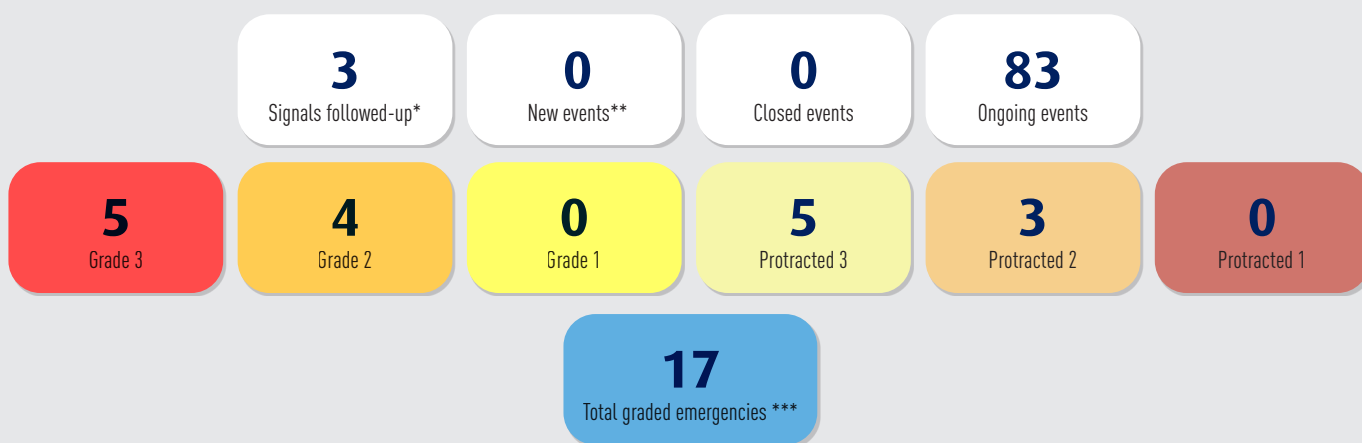
18 April–1 May 2024

# Contents

- 2 Public health events and emergencies dashboard
- 3 Public health events and emergencies map
- 4 **Occupied Palestinian territory: health crises**
- 7 **Occupied Palestinian territory: operational response plan for April to December 2024**
- 9 Ongoing public health events and emergencies
- 16 Closed public health events and emergencies

## Public health events and emergencies dashboard

18 April–1 May 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.

\*\*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.

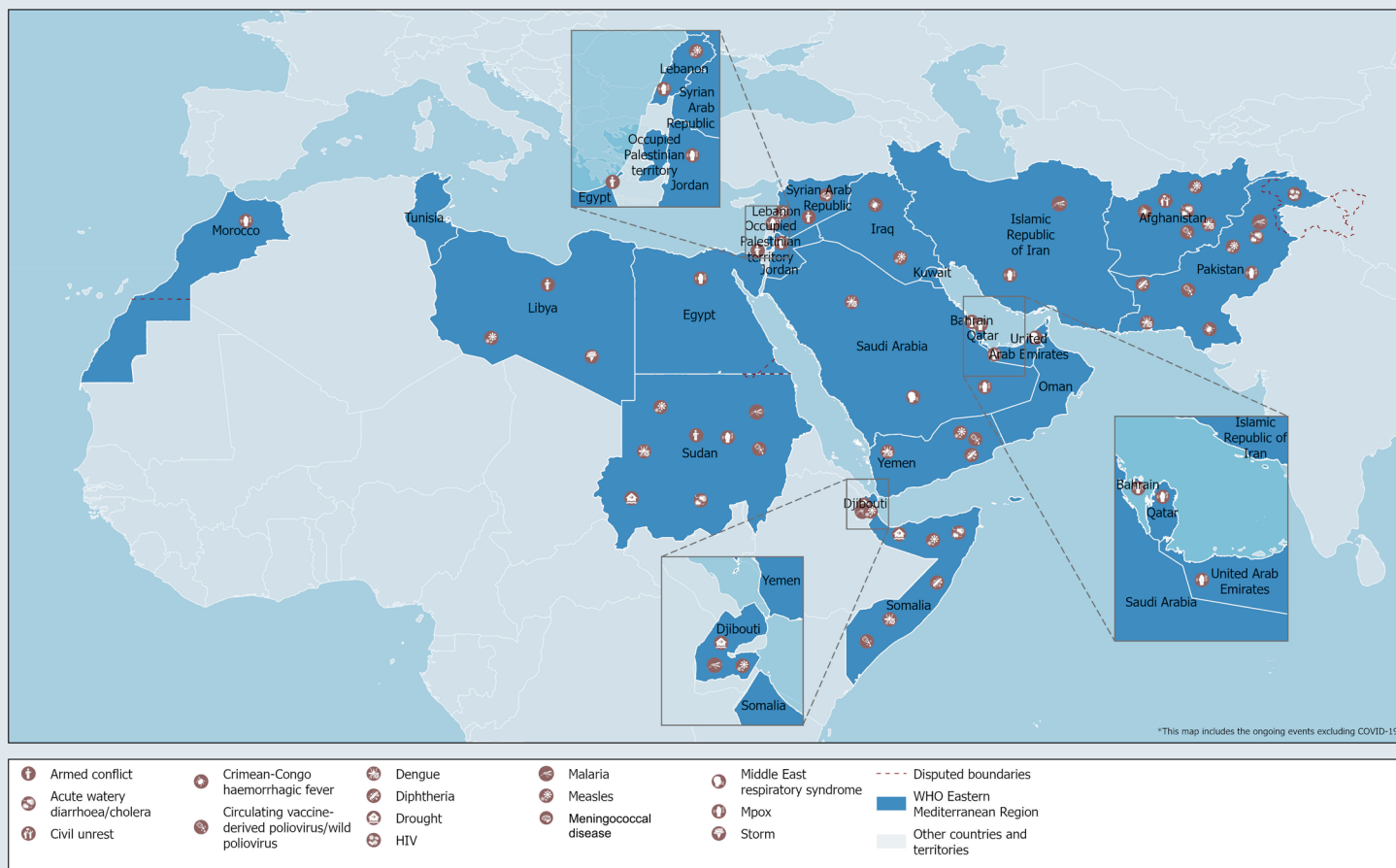
\*\*\*Grading: Grading is an internal WHO process that triggers WHO emergency procedures and activities for the management of the response.

[More information on WHO grading, according to the Emergency Response Framework](#)

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.

# Public health events and emergencies map

Geographical distribution of ongoing public health events and emergencies in the Eastern Mediterranean Region  
As at 1 May 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.

# Occupied Palestinian territory: health crises

## BACKGROUND

On 7 October 2023, hostilities escalated in the occupied Palestinian territory, resulting in deaths, injuries, missing persons, and displacement, including of most of the population of the Gaza Strip. In addition to the casualties and displacements, the ongoing humanitarian crisis involves challenges in distributing nutritional supplies and medicines, in delivering water and sanitation services, and resulting from damage to health infrastructure – all of which heavily affect the health of the population.



Bodies under the rubble raise further risks of spreading diseases due to high temperatures that can accelerate the decomposition of bodies, October 2023.

Photo credit: WHO

## SITUATION UPDATE

Between 7 October 2023 and 1 May 2024, 34 596 people were killed and 77 816 injured in the Gaza Strip. It is estimated that 1.7 million people (75% of the Gaza Strip's population) had been displaced internally by the same date.

On 30 April 2024, the Palestinian Civil Defence stated that an estimated 10 000-plus missing people were currently

beneath the rubble. It also warned that rising temperatures could accelerate the decomposition of bodies and the spread of diseases.


There have been attacks on health facilities, with WHO reporting 443 attacks on health facilities in the Gaza Strip between 7 October 2023 and 30 April 2024 (Fig. 1). These attacks killed 723 people and injured 924. The attacks further affected 106 ambulances and 101 health facilities.

Fig. 1. Attacks on health care in the Gaza Strip, 7 October 2023–30 April 2024

### 443 health attacks

 **723**  
people killed in attacks


 **924**  
people injured in attacks

 **118**  
health workers detained/arrested

 **101** health facilities affected

 Including **31** hospitals damaged

 **106** ambulances affected

 Including **54** that sustained damages

# Occupied Palestinian territory: health crises

There were also 447 attacks on health care in the West Bank, including East Jerusalem, over the same period (Fig. 2). These attacks killed 12 people and injured 95.

The attacks further affected 52 health facilities, including 19 mobile clinics, plus 298 ambulances.

Fig. 2. Attacks on health care in the West Bank, including East Jerusalem, 7 October 2003–30 April 2024

## 447 health attacks



**12**  
people killed  
in attacks



**95**  
people injured  
in attacks



**52**  
health facilities  
affected



Including  
**19** mobile clinics



**298**  
ambulances  
affected

The population is also affected by malnutrition. It has been reported that, as at 30 April 2024, 28 patients had died of malnutrition, and in the northern Gaza Strip, 16–25% of children aged 6–59 months are suffering from acute malnutrition, with 2–4% of the affected children experiencing severe acute malnutrition. In the southern Gaza Strip, 3–7% of children in the same age group are suffering from acute malnutrition.

Communicable diseases are also spreading in the Gaza Strip, and there have been noticeable challenges and delays in reporting diseases. From 16 October 2023 to 22 April 2024, there were 711 178 cases of acute respiratory infections, 381 487 cases of diarrhoea, 87 800 cases of scabies and lice, 51 055 cases of skin rashes, 48 177 cases of acute jaundice syndrome and 7827 cases of chickenpox.

As at 30 April 2024, 12 out of 36 (33%) hospitals are partially functional. Seven field hospitals are fully functional. Meanwhile, 26 out of 88 (30%) primary health care centres are functional.

Out of 453 medical points, 188 facilities (42%) remain functional. Some 105 (56%) of these functional medical points are managed by the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA); 45 (24%) are informal medical points; and 38 (20%) are public medical points.

As at 30 April 2024, there were 18 operational Emergency Medical Teams in the Gaza Strip. These teams assisted more than 15 254 patients in the week 22–28 April. In addition, Al-Awda and Kamal Adwan hospitals in the northern Gaza Strip each have an international Emergency Medical Team on site. These two international teams aim to enhance the capacity of the national health systems in the occupied Palestinian territory.



A child suffering from severe acute malnutrition and dehydration is treated in a WHO-supported nutrition stabilization centre run by the International Medical Corps, April 2024.

Photo credit: WHO

# Occupied Palestinian territory: health crises

## RESPONSE ACTIVITIES

WHO and partners have conducted the following activities to support people in the occupied Palestinian territory.

- The United Nations Population Fund (UNFPA) supported the establishment of two field hospitals: one in Khan Younis and another in Rafah, provided by UK-Med and the International Medical Corps (IMC) respectively. These field hospitals offer emergency obstetric and newborn care.
- WHO, in collaboration with the health authorities, has conducted assessments across medical facilities in Rafah, Khan Younis and Deir Al-Balah. These exercises have identified the need for key interventions such as the deployment and coordination of Emergency Medical Teams and the distribution of additional resources.
- WHO is also procuring and delivering vital medical supplies such as obstetric kits, delivery beds, drugs and consumables. Plans are under way to expand medical facilities, establish referral pathways to secondary care, and support birth registration.
- As at 1 May 2024, WHO had procured US\$ 24.2 million worth of health supplies, 56% (678 metric tonnes) of which has already been delivered to the Gaza Strip. This includes trauma, noncommunicable diseases and malnutrition kits, as well as critical medications.
- Restoration efforts are under way at Nasser Medical Complex. Meanwhile, its emergency ward, operating theatres, intensive care units, maternity ward, neonatal intensive care unit and outpatient department are partially functional. WHO has also established a large warehouse in Deir Al-Balah to facilitate the rapid movement of health supplies.
- Training initiatives are also ongoing, with WHO liaising with Médecins Sans Frontières (MSF) to train UNRWA health workers on wound management. WHO has also conducted field visits and on-the-job trainings to assess disease reporting and disseminate updated antimicrobial use guidelines.
- The WHO-led Health Cluster reported that 59 partners are currently operating in the Gaza Strip, as at 30 April 2024, each reaching 223 100 people on average. Additionally, 188 medical points are providing essential primary health care services. The new field hospitals opened by IMC, in Deir Al-Balah, and by UK-Med, in Rafah, bring the total number of functional field hospitals to seven.



Partner organizations observe the severe destruction to a hospital in Khan Younis, Gaza Strip, April 2024.

Photo credit: WHO

# Occupied Palestinian territory: operational response plan for April to December 2024

## BACKGROUND

In response to the ongoing war in the occupied Palestinian territory, WHO has released the [WHO operational response plan: occupied Palestinian territory](#), for April to December 2024. This new plan builds on the plan published in November 2023, which had initially been developed in October 2023.

The previous plan, part of the broader humanitarian flash appeal, was about 50% funded as at 18 March 2024, with US\$ 107 million received. The new plan aligns with the updated flash appeal and the Health Cluster response plan. While principles remain unchanged, operational priorities now reflect current challenges and the long-term impact of the war on the occupied Palestinian territory.



WHO leads the assessment of the destruction of Al-Shifa hospital to guide the restoration efforts, April 2024.

Photo credit: WHO

# Occupied Palestinian territory: operational response plan for April to December 2024

## RESPONSE PLAN

The following is an overview of the operational response plan priorities, which aim to address the immediate and long-term health needs of the affected populations.

**Maintain and scale up essential health services.** Support hospitals and health centres with staff, medications and specialized care teams. Adapt the package of priority health services, based on conditions and access, and develop referral and medical evacuation pathways. Further, ensure safe and sustained access to health facilities and protect the health system in line with international humanitarian law.

**Support delivery of essential health services.** Implement a priority health services package in shelters, among mobile medical teams and in primary health care centres. This package should focus on urgent care, chronic illness medication, maternal and child health, nutrition, immunization, wound care, and referrals. Moreover, relaunch vaccination programmes, integrate acute malnutrition management as part of essential health services, and provide rehabilitation and mental health support.

**Operationalize referral pathways.** Develop triage protocols and referral criteria within the Gaza Strip. In addition, establish medical evacuation pathways to Egypt for critically injured and chronically ill patients.

**Respond to severe acute malnutrition.** Scale up screening and management of severe acute malnutrition, strengthen nutrition stabilization centres and support infant and young child feeding practices.

**Enhance public health intelligence, early warning, prevention and control.** Enhance early warning systems, disease surveillance, data collection, and reporting tools. Additionally, support diagnostics and laboratory capacity for infectious diseases. Further, increase risk communication and community engagement activities.

**Prevent and respond to outbreaks.** Establish rapid response teams, provide clinical protocols and support immunization services.

**Improve infection prevention and control (IPC) and water, sanitation and hygiene (WASH).** Assess and address IPC and WASH gaps in health facilities, provide supplies and train health workers.

**Strengthen health information analytics and reporting.** Establish an integrated health information system, monitor barriers to health care access, produce public health reports and scale up health facility assessments.

**Provide supplies and logistics support.** Coordinate logistics for medical supplies, prioritize needs and monitor the supply pipeline. In addition, transport supplies within the Gaza Strip, strengthen warehouses and provide essential medications, diagnostics and equipment. Moreover, support stock management and offer technical guidance on health infrastructure and safety.

**Provide coordination.** Coordinate with the United Nations logistics hub to forecast demand for health supplies, monitor the supply pipeline and optimize the entry of supplies to the occupied Palestinian territory. Coordinate the efforts of partners to respond in line with the humanitarian strategy, to ensure resources, to liaise with other sectors and to advocate for health needs.

**Support communications, advocacy and visibility.** Develop media products, advocate for human rights and highlight the protection of civilians and health facilities.

**Support early recovery, rehabilitation and reconstruction.** Coordinate recovery efforts, support health authorities and integrate risk reduction measures as part of the early recovery, rehabilitation and reconstruction plan. Conduct damage assessments, support recovery frameworks and provide technical guidance. Moreover, re-establish supply chains and health information systems and support the health workforce.

**Mainstream early recovery.** Support health services by establishing temporary health facilities and deploying Emergency Medical Teams. Rehabilitate health facility infrastructure based on health service needs.

**Develop coordinated recovery interventions.** Revise health service packages for recovery, integrating risk reduction measures, and ensure a smooth transition between relief and development.



# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade <sup>a</sup>	Cases/injuries	Deaths	Date of start <sup>b</sup>
<b>Afghanistan</b>	Biological	Acute watery diarrhoea (AWD)	Afghanistan Complex Emergencies, Protracted 3	33 307	16	22-Sep-21
<p>From 21 to 27 April 2024, 2584 cases of AWD with dehydration were reported, with two associated deaths, from 147 districts. This represents a 15.7% increase in the number of cases compared with the previous week. Since the start of 2024, a total of 33 307 cases of AWD with dehydration and 16 associated deaths have been reported, giving a case fatality ratio of 0.05%. Of this total, 18 367 cases (55.1%) were children aged under 5 years; 16 597 cases (49.8%) were females. Since 1 January 2024, 1637 rapid diagnostic tests have been conducted, of which 183 were positive (positivity rate: 11.2%). Since the start of 2024, 267 districts have reported AWD with dehydration.</p>						
<b>Afghanistan</b>	Biological	COVID-19	COVID-19, Protracted 3	229 590	7965	24-Feb-20
<p>As at 1 May 2024, 229 590 cases and 7965 deaths had been reported. A total of 1 340 648 polymerase chain reaction (PCR) tests had been conducted by the same date.</p>						
<b>Afghanistan</b>	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	5-Jun-20
<p>No new cases of cVDPV2 were reported from 1 January 2022 to 17 April 2024. WHO and the Global Polio Eradication Initiative are focusing on reaching every last child in Afghanistan with vaccines and on strengthening surveillance and technical support at all levels.</p>						
<b>Afghanistan</b>	Societal	Civil unrest	Afghanistan Complex Emergencies, Protracted 3	–	–	30-Aug-21
<p>Since 2023, no significant casualties or displacements have been recorded. Civil unrest incidents escalated in the country in 2023, however.</p>						
<b>Afghanistan</b>	Biological	Crimean-Congo haemorrhagic fever	Afghanistan Complex Emergencies, Protracted 3	93	2	5-Mar-23
<p>From 1 January to 27 April 2024, a total of 93 suspected cases of Crimean-Congo haemorrhagic fever, with two associated deaths were reported, giving a case fatality ratio of 2.2%. All suspected cases were aged over 5 years, while 33 (35.5%) of them were females. Since 1 January 2024, 469 doses of ribavirin tablets and 1530 ribavirin injections have been supplied to seven WHO sub-offices across the country.</p>						
<b>Afghanistan</b>	Biological	Dengue	Afghanistan Complex Emergencies, Protracted 3	702	0	14-Aug-22
<p>From 21 to 27 April 2024, Nangarhar province reported 25 suspected dengue cases, with no associated deaths. This represents a 24.2% decrease in the number of suspected cases compared with the previous week. Since 1 January 2024, 702 suspected dengue cases have been reported, with no associated deaths.</p>						
<b>Afghanistan</b>	Biological	Measles	Afghanistan Complex Emergencies, Protracted 3	20 313	98	19-Apr-21
<p>From 21 to 27 April 2024, 1569 suspected measles cases and four associated deaths were reported. This represents a 19.2% increase in the number of suspected measles cases compared with the previous week. Since the start of 2024, a total of 20 313 suspected measles cases and 98 deaths (case fatality ratio: 0.5%) have been reported. Among suspected measles cases, 16 358 cases (80.5%) were children aged under 5 years; 9170 cases (45.1%) were females. From 21 to 27 April 2024, as part of the outbreak response immunization campaigns, 430 children aged 9–59 months were vaccinated against measles in Kapisa, Khost, Nuristan, Paktya, Urozgan and Wardak provinces. In total, 14 372 children have been vaccinated against measles since 1 January 2024.</p>						
<b>Afghanistan</b>	Biological	Wild poliovirus type 1	Afghanistan Complex Emergencies, Protracted 3	6	0	16-Mar-23
<p>Wild poliovirus is endemic in Afghanistan. From 1 January 2023 to 17 April 2024, six cases were reported. WHO and the Global Polio Eradication Initiative are focusing on reaching all children in Afghanistan with vaccines and on strengthening surveillance and technical support at all levels.</p>						
<b>Bahrain</b>	Biological	COVID-19	COVID-19, Protracted 3	696 614	1536	24-Feb-20
<p>As at 1 May 2024, 696 614 COVID-19 cases and 1536 deaths had been reported. A total of 10 578 766 PCR tests had been conducted by the same date.</p>						

<sup>a</sup> 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](#)

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

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

# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
<b>Bahrain</b>	Biological	Mpox	Mpox, Protracted 2	2	0	18-Sep-22
As at 1 May 2024, two mpox cases had been reported, with no deaths.						
<b>Djibouti</b>	Biological	COVID-19	COVID-19, Protracted 3	15 690	189	18-Mar-20
As at 1 May 2024, 15 690 COVID-19 cases and 189 deaths had been reported. A total of 319 153 PCR tests had been conducted by the same date.						
<b>Djibouti</b>	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	–	–	21-May-23
Drought and food insecurity have severely affected the already fragile health system in Djibouti, restricting access to health care, causing shortages of medical supplies and health workers and limiting the presence of nongovernmental organizations.						
<b>Djibouti</b>	Biological	Malaria	Ungraded	254 776	–	13-Feb-19
From January 2019 to September 2023, 254 776 confirmed malaria cases were reported. The highest peaks in confirmed cases were reported for the years 2020 (73 535 cases) and 2021 (59 176), with a marked decrease in confirmed cases in 2022 (40 542). In total, 32 121 confirmed cases were reported from January to September 2023. Malaria reporting in Djibouti is under revision to consolidate various sources of data.						
<b>Djibouti</b>	Biological	Measles	Ungraded	12	–	26-Jun-22
As at 15 February 2023, 12 suspected measles cases had been reported, two of which were confirmed. Both confirmed cases originated from the Djibouti region, while most of the suspected cases were reported from Dikhil.						
<b>Egypt</b>	Biological	COVID-19	COVID-19, Protracted 3	516 023	24 830	16-Feb-20
As at 1 May 2024, 516 023 COVID-19 cases had been reported, with 24 830 deaths. A total of 12 645 544 PCR tests had been conducted by the same date.						
<b>Egypt</b>	Biological	Mpox	Mpox, Protracted 2	3	0	27-Sep-22
As at 1 May 2024, three mpox cases had been reported, with no deaths. The most recent case was reported on 12 December 2022.						
<b>Iran (Islamic Republic of)</b>	Biological	COVID-19	COVID-19, Protracted 3	7 632 170	146 992	19-Feb-20
As at 1 May 2024, 7 632 170 COVID-19 cases had been reported, with 146 992 deaths.						
<b>Iran (Islamic Republic of)</b>	Biological	Malaria	Ungraded	4425	–	12-Nov-22
As of 2022, malaria cases have shown an increasing trend, with 4425 reported cases, of which 1013 were locally transmitted. The reported cases were primarily concentrated around the border area in the Sistan and Baluchestan province of the Islamic Republic of Iran and the Balochistan province of Pakistan, an area currently facing a malaria outbreak. The surge in cases may be attributed to increased cross-border movement.						
<b>Iran (Islamic Republic of)</b>	Biological	Mpox	Mpox, Protracted 2	1	0	18-Aug-22
As at 1 May 2024, only one mpox case had been reported, with no deaths. The most recent case was reported on 18 August 2023.						
<b>Iraq</b>	Biological	COVID-19	COVID-19, Protracted 3	2 465 545	25 375	24-Feb-20
As at 1 May 2024, 2 465 545 COVID-19 cases had been reported, with 25 375 deaths. A total of 19 550 473 PCR tests had been conducted by the same date.						
<b>Iraq</b>	Biological	Crimean-Congo haemorrhagic fever	Iraq Crimean-Congo Haemorrhagic Fever, Grade 2	146	5	21-Apr-22
As at 28 April 2024, 146 suspected Crimean-Congo haemorrhagic fever cases had been reported, with five deaths, giving a case fatality ratio of 3.4%. Among the suspected cases, 20 have been confirmed, with one death, giving a case fatality ratio of 5%.						
<b>Iraq</b>	Biological	Measles	Iraq Complex Emergencies, Protracted 2	3655	2	19-Apr-23
From 1 January to 6 February 2024, 3655 measles cases were reported, with an incidence rate of 84 cases per 1 000 000 population, and two deaths. Iraq's health ministry will conduct a measles, mumps and rubella vaccination campaign for children aged under 5 years in schools in high-risk areas and populations. It will also enhance measles surveillance and conduct awareness and community engagement campaigns on measles.						

# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
<b>Jordan</b>	Biological	COVID-19	COVID-19, Protracted 3	1 746 997	14 122	3-Feb-20
As at 1 May 2024, 1 746 997 COVID-19 cases had been reported, with 14 122 deaths. A total of 17 201 885 PCR tests had been conducted by the same date.						
<b>Jordan</b>	Biological	Mpox	Mpox, Protracted 2	1	0	9-Nov-22
As at 1 May 2024, only one mpox case had been reported, with no deaths.						
<b>Kuwait</b>	Biological	COVID-19	COVID-19, Protracted 3	667 177	2570	24-Feb-20
As at 1 May 2024, 667 177 COVID-19 cases had been reported, with 2570 deaths. A total of 8 455 743 PCR tests had been conducted by the same date.						
<b>Lebanon</b>	Biological	COVID-19	COVID-19, Protracted 3	1 239 904	10 947	22-Feb-20
As at 1 May 2024, 1 239 904 COVID-19 cases had been reported, with 10 947 deaths. A total of 10 696 009 PCR tests had been conducted by the same date.						
<b>Lebanon</b>	Biological	Measles	Ungraded	37	0	4-Jul-23
From 21 to 27 April 2024, seven new suspected measles cases were reported across various regions. All new cases were unvaccinated. Since the start of 2024, 37 suspected measles cases have been reported. Thirty-six suspected cases were unvaccinated children; seven of the total suspected cases were confirmed. Baalbeck-Hermel has the highest measles rate; children aged under 5 years have been the most affected age group.						
<b>Lebanon</b>	Biological	Mpox	Mpox, Protracted 2	27	0	20-Jun-22
As at 1 May 2024, 27 mpox cases had been reported, with no deaths. The most recent case was reported on 9 March 2023.						
<b>Libya</b>	Societal	Armed conflict	Libya Complex Emergencies, Protracted 2	–	–	9-Feb-18
A state of emergency was announced by the government on 2 September 2018 and there have been on-and-off conflicts since then, and into 2024. Since August 2023, however, no major armed conflicts that could affect public health have been reported.						
<b>Libya</b>	Biological	COVID-19	COVID-19, Protracted 3	507 269	6437	25-Mar-20
As at 1 May 2024, 507 269 confirmed COVID-19 cases had been reported, with 6437 deaths (case fatality ratio: 1.3%).						
<b>Libya</b>	Meteorological	Cataclysmic storm	Libya Tropical Storm, Grade 2	–	5898	9-Dec-23
On 11 September 2023, heavy rains and flooding hit Libya, which caused extensive damage, especially in Derna city, displacing more than 44 800 residents and leading to 5898 fatalities. Emergency response teams used 182 sentinel sites for daily data sharing from the flood-hit areas. As at 1 May 2024, WHO still delivers support to affected areas, strengthening the national capacities of Libya's health system. A risk profiling is being conducted to develop a national emergency preparedness and response plan.						
<b>Libya</b>	Biological	Measles	Libya Complex Emergencies, Protracted 2	1962	1	16-Mar-23
A measles outbreak has been spreading in Libya since early 2023, affecting six districts. Sabha has been the most affected district. As at week 49 of 2023, 1962 suspected measles and rubella cases had been reported, among which 251 measles cases and 196 rubella cases were confirmed, with one associated death. Since then and as at May 2024, reporting of data has been intermittent.						
<b>Morocco</b>	Biological	COVID-19	COVID-19, Protracted 3	1 277 956	16 298	3-Mar-20
As at 1 May 2024, 1 277 956 COVID-19 cases and 16 298 deaths had been reported. A total of 13 068 242 PCR tests had been conducted by the same date.						
<b>Morocco</b>	Biological	Mpox	Mpox, Protracted 2	3	0	6-Feb-22
As at 1 May 2024, three mpox cases had been reported, with no deaths. The most recent case was reported on 20 August 2022.						
<b>Occupied Palestinian territory</b>	Societal	Armed conflict	Israel/oPt Hostilities, Grade 3	77 816	34 596	7-Oct-23
Ongoing hostilities in the occupied Palestinian territory since 7 October 2023 have compounded an existing health crisis. As at 1 May 2024, the Palestinian Ministry of Health reported that over 34 596 people had been killed and more than 77 816 injured. The Gaza Strip bears the highest casualties, including children, women and elderly people.						
<b>Occupied Palestinian territory</b>	Biological	COVID-19	COVID-19, Protracted 3	703 228	5708	3-Dec-20
As at 1 May 2024, 703 228 COVID-19 cases, with 5708 deaths, had been reported. A total of 3 477 872 PCR tests had been conducted by the same date.						

# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
<b>Oman</b>	Biological	COVID-19	COVID-19, Protracted 3	399 449	4628	24-Feb-20
As at 1 May 2024, 399 449 COVID-19 cases and 4628 deaths had been reported. A total of 3 737 036 PCR tests had been conducted by the same date.						
<b>Pakistan</b>	Biological	COVID-19	COVID-19, Protracted 3	1 580 631	30 656	27-Feb-20
As at 1 May 2024, 1 580 631 COVID-19 cases and 30 656 deaths had been reported. A total of 31 656 354 PCR tests had been conducted by the same date.						
<b>Pakistan</b>	Biological	Cholera	Multi-region Cholera, Grade 3	118 490	0	17-Apr-22
From 1 January to 28 April 2024, 118 490 suspected cholera cases were reported, including nine confirmed cases (all from Sindh), with no deaths. From 22 to 28 April 2024, 521 suspected cholera cases were reported, most of them (60%) from Balochistan province.						
<b>Pakistan</b>	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	11-Dec-19
As at 1 May 2024, zero cVDPV2 cases or environmental samples had been reported in Pakistan since 2022.						
<b>Pakistan</b>	Biological	Crimean-Congo haemorrhagic fever	Ungraded	19	4	11-Dec-23
As at 17 April 2024, 19 confirmed Crimean-Congo haemorrhagic fever cases had been reported – of which 18 were health workers – including four deaths.						
<b>Pakistan</b>	Biological	Dengue	Multi-region Dengue, Grade 3	157	0	9-Apr-23
From 22 to 28 April 2024, 157 suspected dengue cases were reported. Most of the cases were reported from Sindh province (73%), followed by Balochistan province (18%).						
<b>Pakistan</b>	Biological	Diphtheria	Ungraded	10	0	11-Feb-23
From 22 to 28 April 2024, 10 suspected diphtheria cases were reported from Balochistan (three cases) and Khyber Pakhtunkhwa (seven cases) provinces. In response to the outbreak, more than 1.9 million people across Balochistan, Khyber Pakhtunkhwa, Punjab and Sindh provinces have received a diphtheria-containing vaccine.						
<b>Pakistan</b>	Biological	HIV infection-AIDS	Ungraded	5234	590	5-Jul-19
Since the beginning of this outbreak in 2019 to 31 December 2023, 5234 cases of HIV/AIDS were registered in three hospitals, with 590 deaths (case fatality ratio: 11%). In 2023 alone, 1255 cases were registered. The WHO Regional Office for the Eastern Mediterranean is analysing 2023 data, and the WHO Country Office in Pakistan is closely following the HIV/AIDS situation.						
<b>Pakistan</b>	Biological	Malaria	Ungraded	67 679	–	23-Sep-22
From 22 to 28 April 2024, 67 679 malaria cases were reported. Most of the cases were reported from Sindh province (80%), followed by Balochistan province (6.6%).						
<b>Pakistan</b>	Biological	Measles	Ungraded	674	–	26-Jan-21
From 22 to 28 April 2024, 674 suspected measles cases were reported. Most of the cases were reported from Khyber Pakhtunkhwa province (55%), followed by Sindh province (34%).						
<b>Pakistan</b>	Biological	Mpox	Mpox, Protracted 2	7	0	21-Apr-23
As at 1 May 2024, seven mpox cases had been reported, with no deaths. The most recent case was reported on 21 September 2023.						
<b>Pakistan</b>	Biological	Wild poliovirus type 1 (WPV1)	Ungraded	8	0	16-Mar-23
Wild poliovirus is endemic in Pakistan, and instances are reported retrospectively. From 1 January 2023 to 17 March 2024, eight confirmed WPV1 cases were reported. WHO and the Global Polio Eradication Initiative are focusing on reaching every last child in Pakistan with vaccines, and strengthening surveillance and technical support at all levels.						
<b>Qatar</b>	Biological	COVID-19	COVID-19, Protracted 3	514 524	690	3-Jan-20
As at 1 May 2024, 514 524 COVID-19 cases and 690 deaths had been reported.						
<b>Qatar</b>	Biological	Mpox	Mpox, Protracted 2	5	0	25-Jul-22
As at 1 May 2024, five mpox cases had been reported, with no deaths. The most recent case was reported on 20 September 2022.						

# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
<b>Saudi Arabia</b>	Biological	COVID-19	COVID-19, Protracted 3	841 469	9646	3-Mar-20
As at 1 May 2024, 841 469 COVID-19 cases, with 9646 deaths, had been reported. A total of 45 484 848 PCR tests had been conducted by the same date.						
<b>Saudi Arabia</b>	Biological	Dengue	Multi-region, Dengue Grade 3	2304	0	5-Feb-23
As at January 2024, 2304 suspected dengue cases had been reported, of which 1470 were confirmed.						
<b>Saudi Arabia</b>	Biological	Middle East respiratory syndrome (MERS)	Ungraded	2204	860	11-May-12
Since the first report of MERS in Saudi Arabia in 2012, the country has reported 2204 MERS cases in total, including 860 deaths.						
<b>Saudi Arabia</b>	Biological	Mpox	Mpox, Protracted 2	8	0	17-Jul-22
As at 1 May 2024, eight mpox cases had been reported, with no deaths. The most recent case was reported on 30 August 2022.						
<b>Somalia</b>	Biological	COVID-19	COVID-19, Protracted 3	27 334	1361	16-Mar-20
As at 1 May 2024, 27 334 confirmed COVID-19 cases had been reported, with 1361 deaths, giving a case fatality ratio of 5%.						
<b>Somalia</b>	Biological	Cholera	Multi-region Cholera, Grade 3	10 647	102	2-Aug-18
In week 18 of 2024, 630 new cholera cases were reported from 31 districts, with no deaths. Of the cases, 345 (56%) were severe cases, 449 (71%) were children aged under 5 years, and 309 (49%) were females. Since the start of 2024, there have been 10 647 cases and 102 deaths, giving a case fatality ratio of 1.0%. In response to the outbreak, 1 400 000 oral cholera vaccine doses were approved for Somalia, with 920 000 doses deployed for the initial vaccination phase.						
<b>Somalia</b>	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	29	0	18-Aug-20
No new cVDPV2 cases were reported in week 18 of 2024. Just two cVDPV2 cases have been reported in 2024 in total. The total number of cases reported since 2020 is 29 cases.						
<b>Somalia</b>	Biological	Dengue	Multi-region Dengue, Grade 3	1863	–	5-Oct-23
As at 30 November 2023, 1863 suspected dengue cases had been reported, of which 668 cases were confirmed. The WHO Country Office in Somalia drafted a detailed work plan for dengue and other arbovirus infections. The activities will be implemented in an integrated approach since Somalia has adopted Integrated Disease Surveillance and Response.						
<b>Somalia</b>	Biological	Diphtheria	Somalia Complex Emergencies, Protracted 3	489	64	29-Jan-24
During week 17 of 2024, 10 suspected diphtheria cases, with no deaths, were reported. Of these, seven cases (70%) were children aged under 5 years. The regions with the highest number of reported cases were Mudug (three cases), Karkaar (two cases) and Galgaduud (two cases).						
<b>Somalia</b>	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	–	125	6-Feb-22
The drought situation in Somalia is extremely serious. The country marked its fifth consecutive failed rainy season at the start of 2023. This has led to an acutely food-insecure population and the worsening of food security and nutrition outcomes, affecting more than 7.8 million people. Later in 2023, in October, Somalia finally experienced rain; however, this took the form of El Niño floods that hit the country. The flooding caused serious damage instead of improving the drought impacts. According to the Somali Disaster Management Agency, as at 10 December 2023, 2.48 million people had been affected by the drought, with 899 000 people displaced and 118 fatalities across the country. In addition, the annual Gu rains, which typically begin in April and end in June, have started. Flash floods caused by the rains from 18 to 28 April 2024 affected more than 163 400 people, including 37 120 people who were displaced and seven children killed.						
<b>Somalia</b>	Biological	Measles	Somalia Complex Emergencies, Protracted 3	6791	20	3-Sep-22
During week 18 of 2024, a total of 277 suspected cases and one death were reported through the surveillance system for fever and rash. This marks a 23% decrease against the 360 cases reported in week 17 of 2024.						

# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
<b>Sudan</b>	Societal	Armed conflict	Sudan Conflict and Complex Emergency, Grade 3	33 000	15 550	22-Jan-21
<p>Since the outbreak of the current war in Sudan on 15 April 2023, at least 15 550 people have been killed and 33 000 injured; establishing the exact numbers of civilian casualties and injuries has been challenging. More than a third of the country's population is experiencing acute hunger, with the Famine Early Warning Systems Network warning of a potential famine. It is estimated that 4.9 million vulnerable people – children aged under 5 years and pregnant and lactating women – suffer from acute malnutrition. Since the eruption of the conflict, more than 8.7 million people have been displaced from their homes, including 4.6 million children.</p>						
<b>Sudan</b>	Biological	COVID-19	COVID-19, Protracted 3	63 993	5046	15-Mar-20
<p>As 1 May 2024, 63 993 COVID-19 cases and 5046 deaths had been reported. A total of 479 278 PCR tests had been conducted by the same date.</p>						
<b>Sudan</b>	Biological	Cholera	Multi-region Cholera, Grade 3	10 802	291	5-Oct-23
<p>From 28 June 2023 to 3 April 2024, 10 802 cholera cases, including 291 deaths (case fatality ratio: 2.7%), were reported across nine states and 48 localities. Suspected cholera cases have shown a decreasing trend since the start of December 2023 and continuing into 2024.</p>						
<b>Sudan</b>	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	0	0	8-Oct-20
<p>No new cVDPV isolates were reported in week 14 of 2024. As at 3 April 2024, zero cVDPV2 cases had been reported in Sudan in 2024.</p>						
<b>Sudan</b>	Biological	Dengue	Multi-region Dengue, Grade 3	9126	71	20-Oct-21
<p>From 1 January to 1 May 2024, 1738 dengue cases and six deaths were reported. In total, 9126 dengue cases and 71 deaths were reported since the outbreak's onset on 28 June 2023 to 1 May 2024. A major decrease in cases was observed as of December 2023. Since March 2024, a stable trend has been seen, with fewer than 20 cases reported per week.</p>						
<b>Sudan</b>	Climatological	Drought	Greater Horn of Africa Drought and Food Insecurity, Grade 3	–	–	21-May-23
<p>Prolonged dry spells and crop failures across 14 states in Sudan are affecting more than 5.6 million people. Over 22 million people – half of the Sudanese population – live in the 115 affected areas, and 3.1 million people need short- to long-term assistance. The ongoing war has triggered population displacement, which, combined with a major deterioration of the economy, has led to acute food insecurity at levels higher than usual. As at 21 March 2024, high rates of acute food insecurity were observed in North Darfur (25%), West Darfur (22%), North Kordofan (20%), South Kordofan (20%), Gedaref (19%) and central, eastern and southern states.</p>						
<b>Sudan</b>	Biological	Malaria	Sudan Conflict and Complex Emergency, Grade 3	1 467 006	215	10-Sep-22
<p>As at 10 November 2023, 1 467 006 malaria cases had been reported, with 215 deaths.</p>						
<b>Sudan</b>	Biological	Measles	Sudan Conflict and Complex Emergency, Grade 3	4039	107	8-Jan-21
<p>Measles cases continue to be reported from 12 states in Sudan, reaching 4039 cases and 107 deaths by 31 January 2024, giving a case fatality ratio of 2.65%.</p>						
<b>Sudan</b>	Biological	Mpox	Mpox, Protracted 2	19	1	31-Jul-22
<p>As at 1 May 2024, 19 mpox cases and one death had been reported. The most recent case was reported on 5 April 2023.</p>						
<b>Syrian Arab Republic</b>	Societal	Armed conflict	Syrian Arab Republic Complex Emergencies, Protracted 3	–	–	27-Jun-18
<p>The security situation within the Syrian Arab Republic remains unstable.</p>						
<b>Syrian Arab Republic</b>	Biological	COVID-19	COVID-19, Protracted 3	57 423	3163	23-Mar-20
<p>As at 1 May 2024, 57 423 COVID-19 cases and 3163 deaths had been reported. A total of 202 513 PCR tests had been conducted by the same date.</p>						
<b>Syrian Arab Republic</b>	Biological	Meningococcal disease	Syrian Arab Republic Complex Emergencies, Protracted 3	1	0	16-Apr-24
<p>On 9 April 2024, a confirmed case of meningococcal disease was reported in a refugee camp in Idlib, northwest Syrian Arab Republic – a child aged 10 years.</p>						

# Ongoing public health events and emergencies

As at 1 May 2024

Member State/territory	Hazard	Event	WHO grade	Cases/injuries	Deaths	Date of start
<b>Tunisia</b>	Biological	COVID-19	COVID-19, Protracted 3	1 153 361	29 423	3-Feb-20
As at 1 May 2024, 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.						
<b>United Arab Emirates</b>	Biological	COVID-19	COVID-19, Protracted 3	1 067 030	2349	29-Jan-20
As at 1 May 2024, 1 067 030 COVID-19 cases and 2349 deaths had been reported. A total of 200 761 593 PCR tests had been conducted by the same date.						
<b>United Arab Emirates</b>	Biological	Middle East respiratory syndrome (MERS)	Ungraded	1	0	7-Oct-23
On 10 July 2023, a 28-year-old male MERS-CoV case was reported in the United Arab Emirates. Investigation revealed no camel or sick person contact. Immediate actions included contact tracing, incident reporting and notifying relevant authorities.						
<b>United Arab Emirates</b>	Biological	Mpox	Mpox, Protracted 2	16	0	25-May-22
As at 1 May 2024, 16 mpox cases had been reported, with no deaths. The most recent case was reported on 24 July 2022.						
<b>Yemen</b>	Biological	COVID-19	COVID-19, Protracted 3	11 945	2159	4-Oct-20
As at 1 May 2024, 11 945 COVID-19 cases and 2159 deaths had been reported. A total of 329 592 PCR tests had been conducted by the same date.						
<b>Yemen</b>	Biological	Circulating vaccine-derived poliovirus type 1 (cVDPV1)	Polio (cVDPV), Grade 2	0	0	29-May-20
As at 1 May 2024, there was no evidence of cVDPV1 in the country. The Global Polio Eradication Initiative and partners are supporting the local public health authorities in field investigation and field monitoring.						
<b>Yemen</b>	Biological	Circulating vaccine-derived poliovirus type 2 (cVDPV2)	Polio (cVDPV), Grade 2	5	0	30-Nov-21
During week 18 of 2024, no new cVDPV2 cases were reported in Yemen. For 2024, Yemen has reported a total of five cVDPV2 cases.						
<b>Yemen</b>	Biological	Dengue	Multi-Region Dengue, Grade 3	6094	4	25-Jan-24
From week 1 to week 17 of 2024, 6094 suspected dengue cases were reported, with four associated deaths (case fatality ratio: 0.07%). This marks a slight decrease in the number of cases reported during the 2024 dengue season compared with the numbers reported for the same period in 2023 and 2022.						
<b>Yemen</b>	Biological	Diphtheria	Yemen Complex Emergencies, Protracted 3	318	9	25-Jan-24
By week 8 of 2024, 318 suspected diphtheria cases, including nine deaths, had been reported from the northern and southern governorates. This marks a significant increase on the 265 cases reported in the same period of 2023. Most of these cases (70%) in 2024 were reported from northern Yemen: particularly Abyan, Al Hudaydah, Dhamar, Hajjah and Taiz, with Al Hudaydah alone accounting for 16.4% of all cases. About 75% of the total cases have been clinically diagnosed, yet a concerning 77.6% of affected individuals have not been vaccinated.						
<b>Yemen</b>	Biological	Measles	Yemen Complex Emergencies, Protracted 3	14 552	95	29-Mar-21
From 1 January to 27 April 2024, 14 552 suspected measles cases, with 95 associated deaths (case fatality ratio: 0.7%), were reported. About 67% of all cases occurred in the northern governorates, but data on age, gender and vaccination status are unavailable. Nearly all cases in the southern governorates were children: 96% of cases were children aged under 15 years; 66% were aged under 5 years. Further, 82.5% of the cases in the southern governorates had no vaccination history.						

# Closed public health events and emergencies

18 April–1 May 2024

Member State/territory	Hazard	Event	WHO grade	Date of start
<b>Iran (Islamic Republic of)</b>	Biological	Measles	Ungraded	6-Aug-21
No new measles cases have been reported since 2019 and the situation remains stable.				
<b>Pakistan</b>	Hydrological	Flood	Ungraded	3-Jun-24
The floods have subsided, ending the emergency for which WHO's support had been needed.				





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