

KEY HIGHLIGHTS

- The WHO Eastern Mediterranean Region (EMR) continues to monitor influenza and SARS-CoV-2 trends through data reported to FluNet and EMFLU 2.0.
- In week 2 of the 2026-2027 influenza season, 16 out of 22 member states and territory in the EMR reported influenza data to FluNet and/or EMFLU.
- This bulletin provides an analysis of the current season's data (2026-2027) compared to same period in the previous season (2025-2026), highlighting key epidemiological trends and observations.

REGIONAL SARS-COV-2 TRENDS (Figure 1)

- Influenza proportion positive in week 2 of 2026-2027 season have a weekly mean positive of 12.8% compared to 8.8% in the previous week which is higher.
- SARS-CoV-2 activity with a weekly mean positive rate of 0.2%
- In the last season same period influenza circulation is predominant over SARS-CoV-2 virus, same as this season.

REGIONAL INFLUENZA TRENDS (Figure 2, Figure 3, and Map)

- There are variations in influenza activity across countries in the region, reflecting different epidemiological patterns.
- Circulating Viruses: of the influenza viruses detected in week 2 in the Region, influenza type A viruses (94%) were predominant compared with influenza type B viruses (6%).
- In the current week, influenza types A and B are circulating in all countries reporting positive influenza cases except for Oman, Pakistan, Tunisia where only influenza type A is circulating.

COUNTRY-SPECIFIC TRENDS (Figure 4)

Comparable Trends:

- Bahrain, Iran: This country reported comparable influenza positivity trends in 2026-2027 season compared to the same period in the 2025-2026 season.

Decreasing and/or lower trends:

- Afghanistan, Iraq, Kuwait, Oman, Pakistan, Qatar, KSA, Somalia, Syria, Yemen: These countries reported decreasing and/or lower influenza positivity trends in 2026-2027 season compared to the same period in the 2025-2026 season.

Increasing and/or higher trends:

- Lebanon, Morocco, Tunisia: These countries reported a positive trend in 2026-2027 season compared to the same period in the 2025-2026 season.

Figure 1. Influenza and SARS-CoV-2 tested specimens and percent positivity in the Region from week 27, 2022 to week 2, 2026

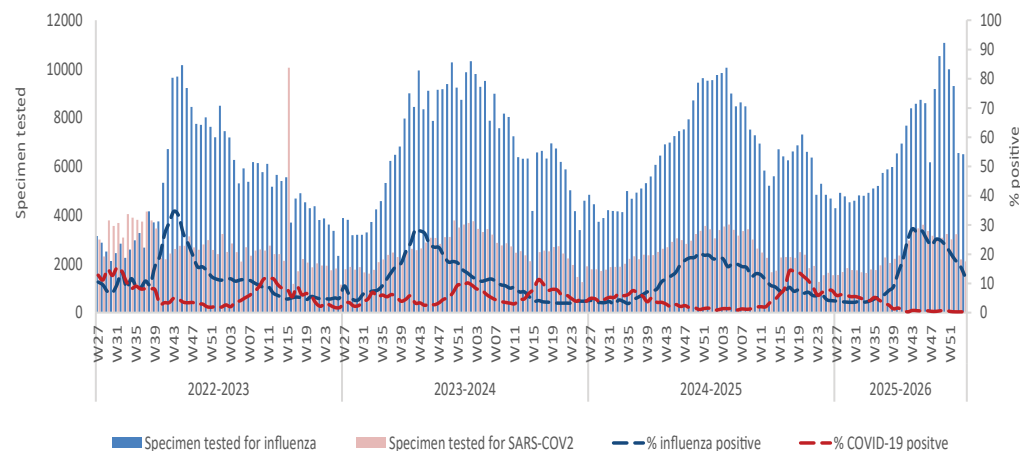


Figure 2. Number of specimens by influenza virus subtypes/lineages and percentage of specimens testing positive for influenza viruses in the Region from week 27, 2022 to week 2, 2026

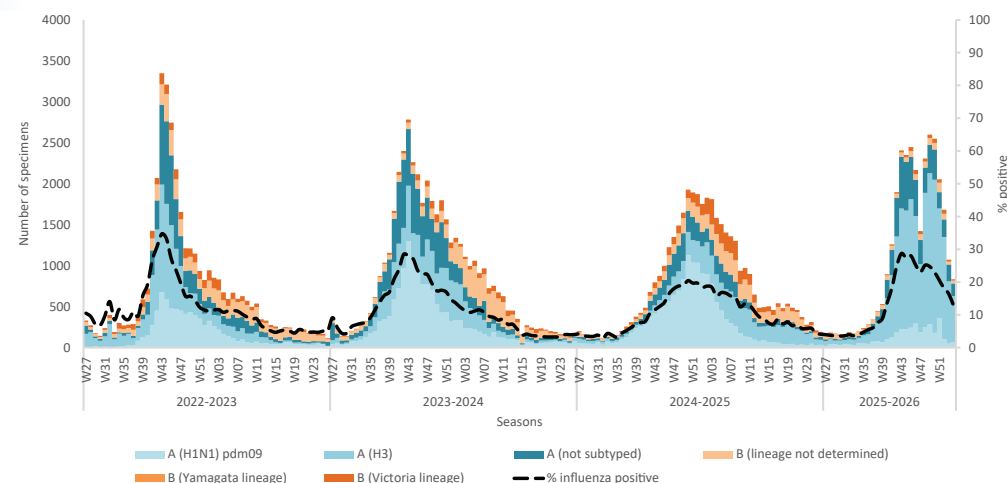
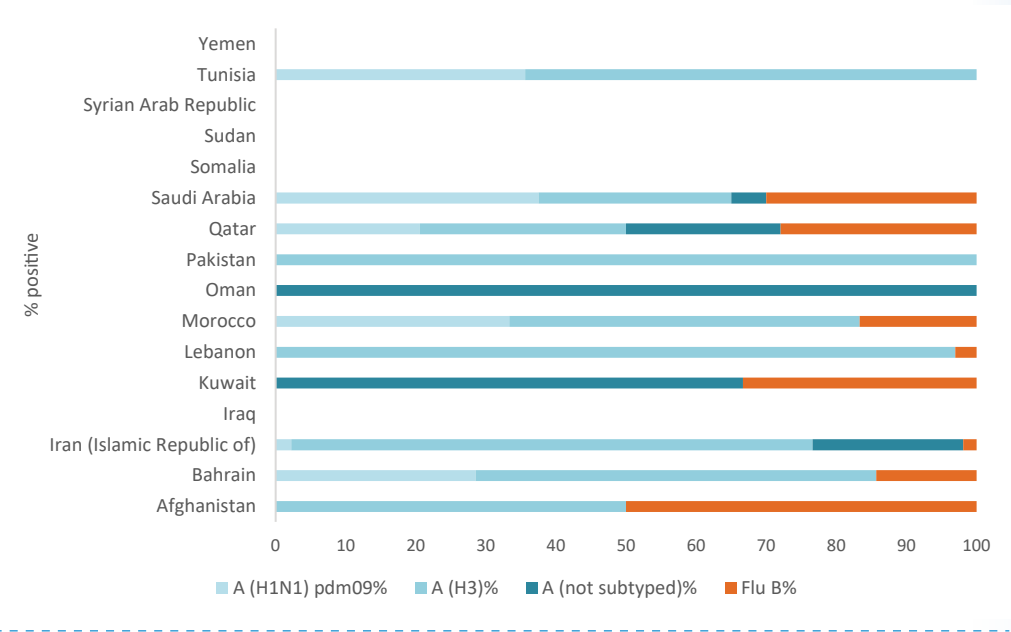


Figure 3. Percentage of influenza virus types and subtypes by country, week 2, 2026



Map. Influenza positivity rate by country, EMR, week 2, 2026

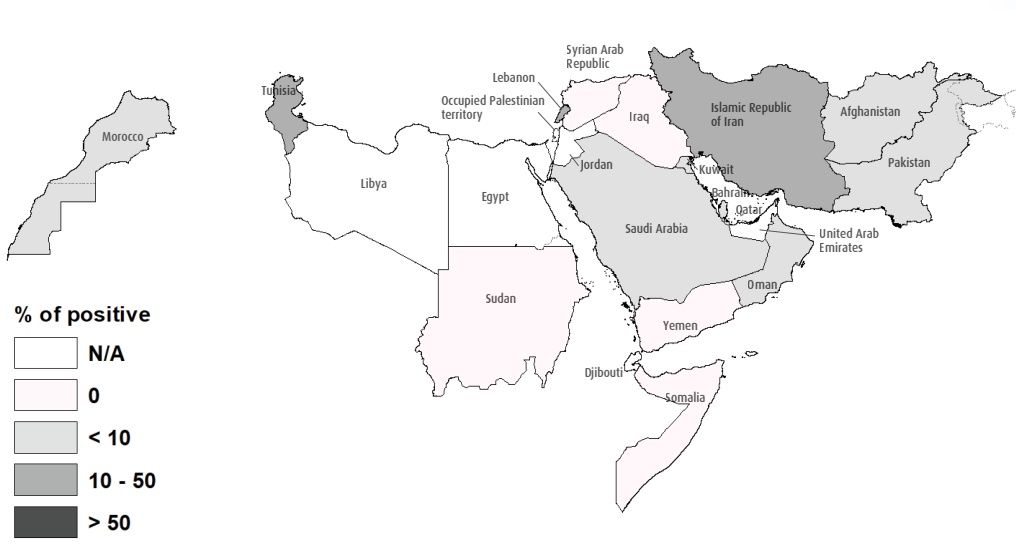
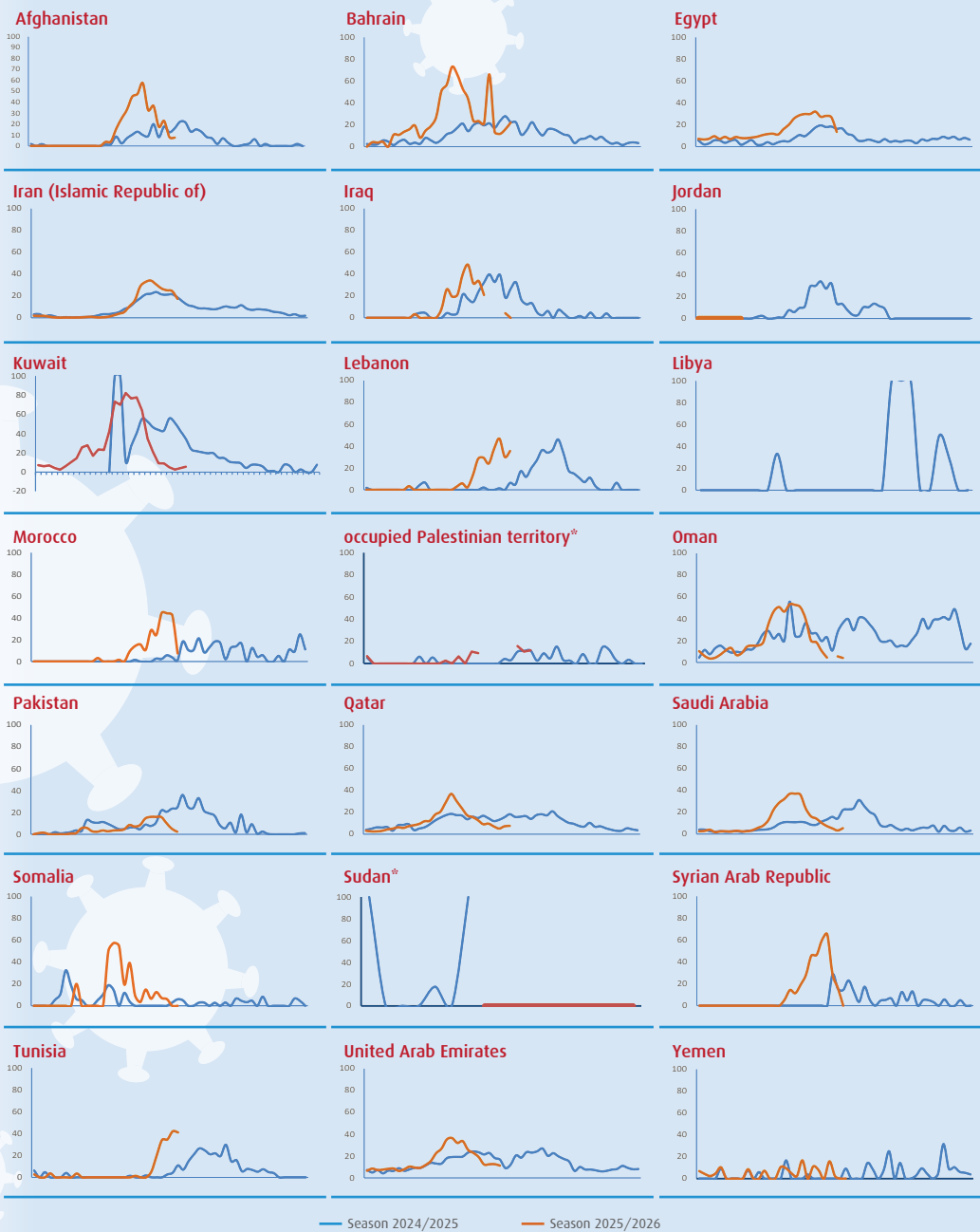


Figure 4. Percent positivity trends among EMR member states for two seasons: from week 27, 2024 till week 26, 2025 and from week 27, 2025 till week 2, 2026



* Sudan and oPt: disruption of surveillance system in 2023-2024 season due to emergency conflicts

SUPPLEMENTAL INFORMATION

WHO support to EMR countries:

WHO/EMRO has made significant progress in strengthening the sustainability of influenza surveillance systems across the region. These efforts have enhanced national core capacities to detect and respond to influenza and other respiratory pathogens with epidemic and pandemic potential, such as SARS-CoV-2, MERS-CoV, H5N1, and others. This support yielded the following current regional status:

- 21 out of 22 countries have existing influenza surveillance systems, National Influenza Centers/National Influenza Labs, and capacity to conduct genomic sequencing
- 21 countries in the region share viruses through their NICs and influenza labs to WHO Collaborating Centers that feed into GISRS
- 18 countries report influenza data to WHO global and/or regional platforms (FluNet/EMFLU)
- 12 countries in EMR benefit from PIP Partnership Contribution, with Pakistan and Tunisia selected to benefit from outputs 1 and 4 under HLIP III 2024-2030
- 14 countries have national seasonal influenza vaccination policy
- 3 newly PIVI supported countries (Jordan, Lebanon, Egypt) and 2 countries have previous direct support from PIVI (Morocco and Tunisia)

Regional and Global WHO platforms for Influenza:

EMFLU is a regional WHO platform that facilitates sharing of epidemiological and virological data on influenza from EMR countries to EMRO. Since its launch in 2016, the platform has been used at national and regional levels to monitor trends of circulating influenza viruses. Following the COVID-19 pandemic, WHO global and regional guidance has advocated for the integration of SARS-CoV-2 and other respiratory viruses (ORVs) with epidemic and pandemic potential into the influenza sentinel surveillance system, a well-established system in the Region.

To support this, EMRO upgraded the regional platform to EMFLU 2.0, which now includes advanced data capturing functionalities for multi-pathogen surveillance. This upgrade strengthened the Region's integrated surveillance efforts.

RespiMart, developed from FluMart, is a global platform to facilitate exchange, harmonization, consolidation and storage of surveillance data for respiratory viruses with epidemic and pandemic potential, including influenza, respiratory syncytial virus (RSV) and SARS-CoV-2. It provides one single platform for sharing aggregated and case-based data from different applications and/or data sources and allows for integrated analysis and reporting.

Alongside the regional platform, countries' NICs are encouraged to maintain reporting to FluNet for both sentinel and non-sentinel data.

The ongoing synchronization between EMFLU and RespiMart platforms ensures timely data complementarity and streamlined reporting.