

Current major event

HIV Investigation in Pakistan

Between April 25 and 18 June, Department of Health (DOH) Sindh reported 816 HIV positive cases, including 672 cases under the age of 15. Upon the invitation of the Pakistan Federal Ministry of Health, the World Health Organization (WHO) deployed a multidisciplinary team of experts to support the investigation into the upsurge of HIV cases, particularly in children, reported from Larkana district, Sindh province, of Pakistan.

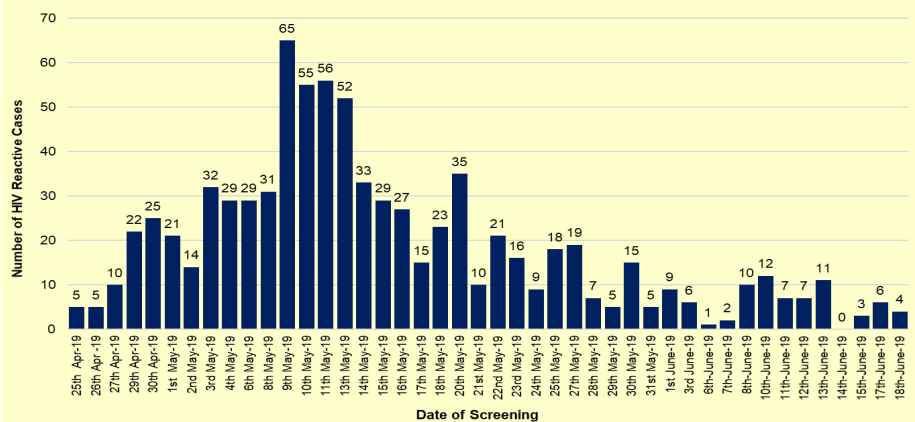
Editorial note

The Human Immunodeficiency Virus (HIV) targets and alters the immune system, increasing the risk and impact of other infections and diseases. HIV can be transmitted via the exchange of body fluids, such as blood, breast milk, semen and vaginal secretions, in addition to mother-to-child transmission. There is no cure for HIV but antiretroviral (ARV) drugs, when taken as prescribed, can control the virus and help prevent the transmission.

HIV continues to be a major global public health issue which has claimed more than 36 million lives. Its prevalence in the Eastern Mediterranean Region is at low epidemic levels; the estimated number of HIV cases in 2018 was 350,000. Pakistan is one of the countries in the Region where the number of HIV infections is increasing at an alarming rate per year since 1987. There is an estimated 165,000 people living with HIV in Pakistan and sporadic outbreaks have occurred frequently in Punjab and Sindh provinces.

A sudden upsurge of HIV positive cases among 0-5 year old children, in Larkana District, Sindh province, was reported in the first week of April 2019. WHO, in close collaboration with DoH and partners, deployed technical team to investigate the extent and cause of the reported HIV outbreak. Between 25 April and 18 June a total of 28,549 people were

Individuals Reactive for HIV by Rapid Diagnostic Test, Ratodero, Larkana, Pakistan, 25th April to 18 June 2019 (N=816)



Age Distribution of HIV-Reactive Cases, Ratodero Larkana 25 April to 18 June 2019

Age group (in years)	HIV (RDT reactive)	Percentage (%)
0—1	63	8.1
2—5	461	56.3
6-15	148	17.9
16-45	122	15.6
46 >	22	2.7
Total	816	100%

screened for HIV. Of these, 816 patients were identified as HIV-positive (CDR: 2.8%). A large proportion (56.3%) of the confirmed cases were between the age of 2 and 5 years old (*see table*). The epicenter of the outbreak is in Taluka Rato -dero, however eight other cities may also have been affected.

The outbreak investigation team has identified a possible cause of this outbreak to be iatrogenic transmission via unsafe injection and poor infection control practices, in addition to other sources of infection such as waste management and blood transfusion. Injection safety has also been implicated in previous outbreaks in the country.

Further investigations are underway to fully understand the extent of this outbreak to inform prevention and control measures. The current situation highlights the significance of consistent application of standard infection prevention and control practices in healthcare settings to prevent threats such as HIV.

Update on outbreaks

in the Eastern Mediterranean Region

MERS in Saudi Arabia; **Cholera** in Somalia; **Cholera** in Yemen; **Multidrug-resistant typhoid fever** in Pakistan.

Current public health events of concern

[cumulative N° of cases (deaths), CFR %]

Avian influenza: 2006-2017

Egypt (A/H5N1) [359 (122), 33.98%]

Egypt (A/H9N2) [4 (0)]

Ebola virus disease (EVD): 2018-2019

Democratic Republic of Congo (DRC) [2 239 (1 506), 66.99%]

Uganda 3 (3), 100%

Cholera: 2017-2019

Somalia [7 650 (46) , 0.60%]

Yemen [1 764 006 (3 390), 0.19%]

Diphtheria: 2018-2019

Yemen [3 524 (203), 5.76%]

Bangladesh [8 641 (45), 0.52%]

MERS: 2012-2019

Saudi Arabia [2 055 (766), 37.27%]

Multidrug-resistant typhoid fever: 2016-2019

Pakistan [8 546 (0)]