

HEALTH BRIEF

21 May - 4 June 2024

Emergency Readiness and Response

Situation overview

- The violence along the border between Hezbollah and Israel continued to intensify during this reporting period, resulting in increased civilian casualties and damage to homes and public infrastructure.
- An ambulance was attacked by Israel again on Friday, which resulted in the death of one health worker and the wounding of another in Naqoura, South Lebanon.
- WHO is deeply concerned about the rising attacks on health workers and facilities in Lebanon and it advocates for the protection of civilians and health workers at all times.
- Essential health services are still a major gap identified by local communities affected by the conflict and displaced people, despite extra efforts of MoPH and health sector partners.



1 594
People wounded



Out of which
381
People killed

- Increase in the # of casualties by 9.7% and # of fatalities by 4.9% since 20 May 2024. Source: MoPH Lebanon.



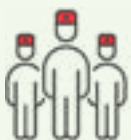
94 126
People displaced



1 570
staying in 18 temporary shelters

IOM data as of 28 May 2024

- The violence clashes between Lebanon and Israel along the border intensified during this report period
- **0.26%** percent increase since 14 May 2024.
- **1.67% increase** in people staying in temporary collective shelters.
- **347** cadasters hosting IDPs who will relocate to self-arranged accommodations.
- Since October 2023, Lebanon has witnessed 11 attacks on healthcare, with 18 deaths among healthcare workers and 23 injuries

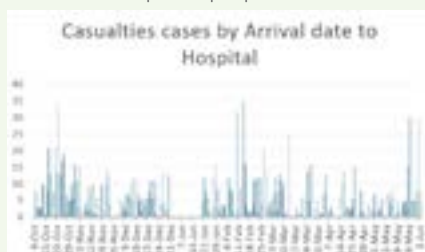


18
Health workers targeted



47 163
PSU consultations

- **18** health workers died in 11 attacks.
- 47,163 PSU services through mobile units
- Six PHCCs are still closed in the South: 3 in Bent Jbeil and 3 in Marjaoun.
- Health facilities that remained open in the areas with increased hostilities have reported very low consultations, and healthcare workers are reporting increased difficulties arriving at their duty stations.
- PSU (PHC Satellite Unit) continues to provide services to displaced populations including providing integrated primary healthcare, including childhood vaccination, reproductive health consultations, awareness sessions, and psychological support.
- Referral hospitals continue to offer mass casualty management to injured individuals, and all hospitals are at their highest preparedness and readiness levels.
- Despite the insecurity in southern Lebanon, MoPH and Health partners continue to provide vital health services to the displaced people.



Health needs and response

- **Public Health Emergency Operation Center** set up by MoPH with WHO's support, remains staffed and operational.
- WHO and MoPH training health workers in hospital readiness for mass casualty management with Module 1 completed for 125 hospitals reaching 3,092 trainees; Module 2 on Mass Casualty Management completed for 118 hospitals reaching 571 trainees, and Module 3 on Management of psychiatric emergencies and basic psychosocial support skills is completed with a total of 1,885 frontliners (160 Doctors trained in 58 hospitals and 1,725 nurses trained in 108 hospitals) have been trained with WHO direct support so far.
- **Mass casualty management** training for high-risk, medium-risk, and low-risk zones- completed with 118 hospitals reached (571 trainees) of which 15 hospitals started drafting or updating their MCM plans which will be followed by activation drills.
- The PHC network has seen an increase in the number of patients with acute or chronic illnesses who are demanding continuity of services, including medications for chronic diseases.
- Maintaining a strong surveillance system to detect potential disease outbreaks- no suspected or confirmed disease outbreak in the South or with displaced population was reported.
- Other sectors have been actively responding to ongoing emergencies and assisting displaced individuals, such as shelter, food, nutrition, WASH, and protection.

Gaps and priorities

- In light of the escalating clashes, the WHO requires approximately USD 12 million to maintain its emergency preparedness and response in Lebanon.
- Maintain stronger national and subnational coordination mechanisms for emergency preparedness and response through the PHEOC and Health Sector Coordination mechanism.
- Improve the mass casualty and emergency care management capacities among frontline health workers through training and mentoring.
- Continued advocacy for protection and respect of health care always.
- Continued support for urgent basic health needs access including medications, especially among the internally displaced.
- Continued support for communicable diseases surveillance, early detection of outbreaks, and awareness among displaced population and in the assigned shelters, ex: respiratory diseases (Flu, COVID, RSV), lice and scabies, and waterborne diseases.

Epidemiology situation - Based on Moph data

COVID-19 Updates during the reporting period



141
New cases

1 252 497
Cumulative cases



0
New deaths

11 001
Cumulative deaths

A. Acute Respiratory Infections

- On 1 June 2024, the Seventy-seventh World Health Assembly agreed on a package of critical amendments to the International Health Regulations (2005) (IHR) and made concrete commitments to completing negotiations on a global pandemic agreement within a year. These critical actions will ensure robust systems are in place in all countries to protect the health and safety of all people from the risk of future outbreaks and pandemics. The package of amendments to the Regulations will strengthen global preparedness, surveillance and responses to public health emergencies, including pandemics.

1- COVID-19

- While no longer classified as a public health emergency, COVID-19 remains a persistent public health concern requiring ongoing monitoring.
- The latest figures available globally show the number of new cases decreased by 48% during the past 28-day period of 1 to 28 April 2024 compared to the previous 28-day period (4 to 31 March 2024), with over one hundred and forty-seven thousand new cases reported. The number of new deaths decreased by 44% as compared to the previous 28-day period, with over 2,600 new fatalities reported. As of 28 April 2024, over 775 million confirmed cases and more than seven million deaths have been reported globally.
- In Lebanon, a total of 141 new COVID-19 cases with no associated death were reported during this reporting period.
- The positivity rate remains stable at 4.8%, with a case fatality ratio standing at 0.88. In the past two weeks, the ICU COVID-19 occupancy rate at referral hospitals was 1%.
- As of 29 May 2024, Lebanon has registered a total of 1,252,497 COVID-19 cases and 11,001 deaths since the start of the pandemic.

2- Integration of seasonal influenza and other respiratory disease surveillance

- With the end of the current influenza season in Lebanon, preparations for the upcoming season have been initiated in collaboration with the MoPH. This includes:
 - Initiating the procurement of essential test kits and other reagents for typing and subtyping.
 - Preparation for the end of season workshop to identify gaps, discuss lessons learned and document best practices.
 - Ensuring availability and accessibility of seasonal influenza vaccine among high-risk groups ahead of the season, mainly with the Partnership for Influenza Vaccine Introduction (PIVI) support to Lebanon.

B. Food and Waterborne Diseases

1- Cholera/Acute Watery Diarrhea

- During this reporting period, 29 acute watery diarrhea patients were enrolled through the AWD sentinel surveillance system and tested negative with cholera RDT. These cases were identified in Baalbeck (20), Hermel (7) and West Bekaa (2).
- No cholera cases were recorded to date across the country, and the laboratory tests of the suspected cases were negative.
- The surveillance team and partners continue to closely monitor the AWD cases with high vigilance and water samples have been collected for testing.
- Cholera remains a significant public health concern and MoPH together with WHO and other partners are enhancing cholera prevention and control measures in Lebanon while leveraging the lessons learned from the last cholera outbreak.

2- Hepatitis A

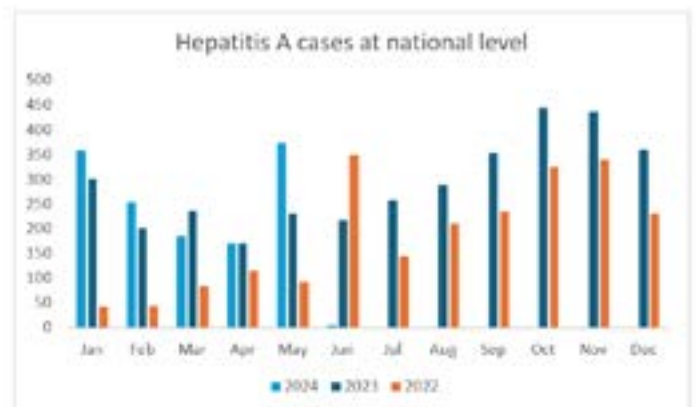


Figure 1: Number of suspected Hepatitis A cases by month for past 3 years

- During this reporting period, a total of 84 new suspected hepatitis A cases were reported across the country. These new cases were identified in Bekaa (43), North (37), Mount Lebanon (1), South (1), Nabatieh (1), and Beirut (1).
- Since the start of 2024, a total of 1,346 suspected Hepatitis A cases have been reported from health facilities across the country. Among the cases reported, 31.2% are between 10-19 years old, followed by 29.4% among 20-39 years old, and 24.2% among 5-9 years old.
- The reported suspected Hepatitis A cases were distributed in North (595), Beqaa (486), Mount Lebanon (117), South (67), Nabatieh (36), Beirut (23), and unknown (22). There were no active clusters of hepatitis A cases recorded among displaced populations in the South.
- Coordination is ongoing between the surveillance and WASH sectors to ensure suspected cases of water-borne diseases are detected and appropriate WASH interventions are implemented.

C. Vaccine-preventable diseases

- Vaccine-preventable diseases (VPDs) remain a priority by the MoPH and WHO to ensure high coverage and completeness of routine immunizations, according to the national calendar for all children under 5 to avoid any potential outbreak of VPDs. This activity is mainly supported by GAVI.

1- Measles

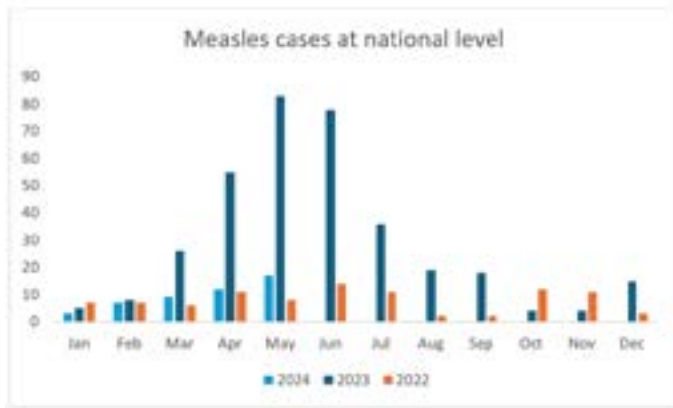


Figure 2: Number of suspected measles cases by month for past 3 years

- During this reporting period, a total of 5 new suspected measles cases were reported from North (2), Akkar (1), Beirut (1) and Unspecified (1). The new suspected cases affected various age groups, and 3 cases were unvaccinated.
- Since the start of 2024, a total of 48 suspected measles cases have been reported at the national level, indicating a decrease compared to the number of cases observed in the previous year. Among these cases, 10 cases were lab-confirmed.
- Baalbeck-Hermel district has the highest measles attack rate, while the most affected age group was under 5 years.
- There were no active clusters of measles cases recorded among displaced populations in the South.
- Overall, 45 out of 48 measles cases reported were zero-dose children, which means those children had not taken a single dose of measles-containing vaccines throughout their life course.

2- Poliovirus

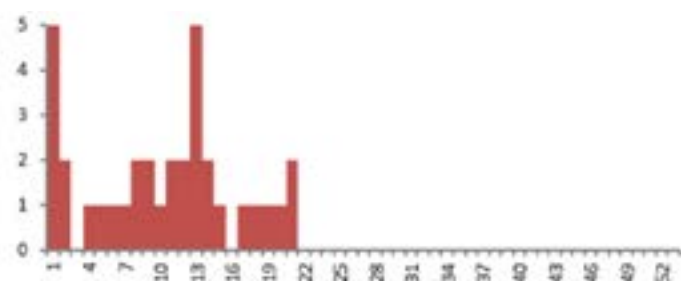


Figure 3: AFP cases by epidemiological week of onset

- During this reporting period, 3 new suspected AFP cases were detected through active case finding and reported for further investigation. These new cases were identified in North (1), Akkar (1) and Mount Lebanon (1), aged 10-14 years (3) and vaccinated.
- Since the start of 2024, the national surveillance system was able to detect 34 suspected AFP cases. All reported AFP

cases had received at least one dose of a polio-containing vaccine.

- Out of 34 reported AFP cases, 29 were Lebanese and 5 were Syrian.
- Lebanon is now fully verified to deploy nOPV2 in case of cVDPV2 detection.

D. Other Communicable Diseases

1- Monkeypox

- While Mpox no longer constitutes a global public health emergency, it continues to pose a significant threat to the health of individuals and high-risk populations.
- On 24 May 2024, WHO released a strategic framework for enhancing prevention and control of Mpox (2024–2027). This new framework will guide health authorities, communities, and stakeholders worldwide to control Mpox outbreaks in every context, advance Mpox research and access to countermeasures, and to minimize zoonotic transmission.
- Globally, there are 97,208 confirmed Mpox cases, and 186 associated deaths, from 117 countries reporting cases. In the EMR, there are so far 95 confirmed cases and 1 death (as of 30 April 2024).
- Since the first case was detected on the 14th of June 2022, the MoPH in Lebanon has detected and reported 27 laboratory-confirmed cases of Mpox. No new Mpox case was detected or reported from Lebanon since January 2023.

2- Meningitis

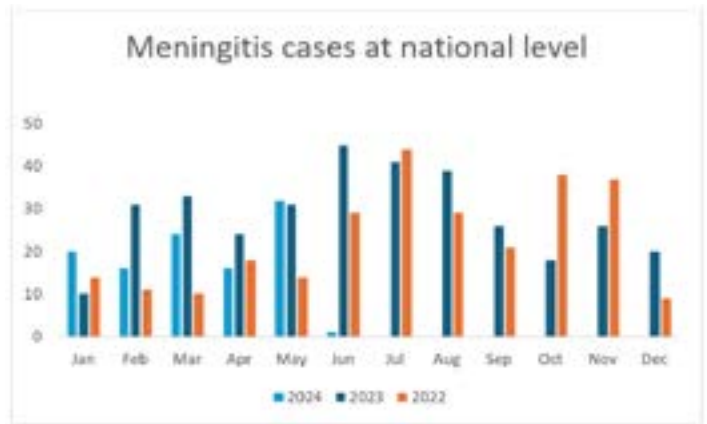


Figure 4: Number of suspected meningitis cases by month for past 3 years

- During this reporting period, 17 new suspected cases of meningitis were reported due to Pneumococcus (1), bacterial with no identified agent (1), viral (1) and unspecified agents (14). These cases were located in Mount Lebanon (4), South (4), Nabatieh (4), Beirut (2), North (1), Bekaa (1) and Baalbeck-Hermel (1). No active clusters of meningitis cases were reported.
- Since the start of 2024, a total of 109 suspected meningitis cases with 11 associated deaths were reported across the country.
- The South is the most affected governorate based on incidence per 100,000. These suspected meningitis cases were distributed in Mount Lebanon (31.2%), South (20.2%), Beirut (7.3%), Bekaa/ Baalbeck Hermel (11.9%), North/Akkar (10.1%) Nabatieh (2.8%) and unspecified (16.5%).
- Upon further specimen testing (CSF and serum), 42 of these cases were classified as bacterial infection. Culture results showed 9 cases of *S. pneumoniae* and 4 HI.

EPI situation *continued*

E. WHO support to surveillance

- The integrated disease surveillance structure established at the MoPH is currently:
 - maintaining high vigilance for the detection of clusters of measles, AFP, meningitis and any new outbreak wave.
 - monitoring the epidemiological situation of food and waterborne diseases at public and private facilities across the country and conducting field investigations.
- Preparations for the consultation of priority disease surveillance with main stakeholders have been initiated with support from WHO.

“

Vaccines are the single greatest reason for reductions in child mortality over the past decades -- from 11 million child deaths in 1990 to 4.5 million deaths in 2022. #VaccinesWork

”

Dr. Tedros Adhanom Ghebreyesus,
WHO Secretary General

WHO response

Health Ministry receives an Award for Step-by-Step initiative



In the sidelines of the 77th World Health Assembly, the Ministry of Public Health received the 2023 Award of the United Nations Inter-Agency Task Force 2023 on the Prevention and Control of Non-Communicable Diseases and mental health, in recognition of **Step-By-Step**.

The National Mental Health Programme at the ministry worked closely with WHO on developing, testing and scaling up of this digital WHO-guided self-help intervention for depression. We extend our gratitude to all the partners who contributed since 2016 to create a digital self-help intervention for depression.

The Ministry of Public Health launched the national campaign to abstain from smoking



The Ministry of Public Health organized a national campaign to abstain from smoking under the slogan “**علقتها علقه**” on the occasion of World No Tobacco Day. This event comes at a time when studies by the WHO showed that Lebanon ranks third in the world in terms of cigarette consumption, and tobacco costs Lebanon 1.9% of the annual gross domestic product, or about one hundred and forty Million dollars annually.

Many NGOs, academic institutions and civil society organizations participated in the event with games and information displays targeting children and youth. WHO Lebanon Team Lead Dr Alissar Rady took part in the event with a word emphasizing that “All forms of tobacco are not safe.”

The Minister of Public Health Dr Firass Abiad launched the event stressing on the Ministry’s continues intensified campaign targeting youth for tobacco prevention, “The objective is Don’t Start Smoking” stated Dr Abiad pointing out that “Lebanon has already approved Law 174, its time to reactivate it”.



World Health Assembly agreement reached on wide-ranging, decisive package of amendments to improve the International Health Regulations

And sets date for finalizing negotiations on a proposed Pandemic Agreement

In an historic development, the World Health Assembly, the annual meeting of its 194 member countries, today agreed a package of critical amendments to the International Health Regulations (2005) (IHR), and made concrete commitments to completing negotiations on a global pandemic agreement within a year, at the latest. These critical actions have been taken in order to ensure comprehensive, robust systems are in place in all countries to protect the health and safety of all people everywhere from the risk of future outbreaks and pandemics.

These decisions represent two important steps by countries, taken in tandem with one another on the final day of the Seventy-seventh World Health Assembly, to build on lessons learned from several global health emergencies, including the COVID-19 pandemic. The package of amendments to the Regulations will strengthen global preparedness, surveillance and responses to public health emergencies, including pandemics. [Read full article.](#)

WHO Lebanon would like to thank the support of all partners and donors who have and are still contributing generously and directly to the WHO health response. Together health for all by all.



[WHO dashboard](#) • [WHO COVID-19 page](#) • [Q&A \(English/Arabic\)](#) • [WHO Lebanon website](#)
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