

Current Health Event

Influenza Season In Lebanon

Under the Pandemic Influenza Preparedness (PIP) framework, and with the support of the World Health Organization (WHO), the ministry of public health (MoPH) in Lebanon has declared the beginning of the influenza season 2017-2018 with the first influenza case detected in 2017 at week 51. Influenza cases started emerging thereof with detected influenza B, and influenza A pdmH1N1 along with H3N2.

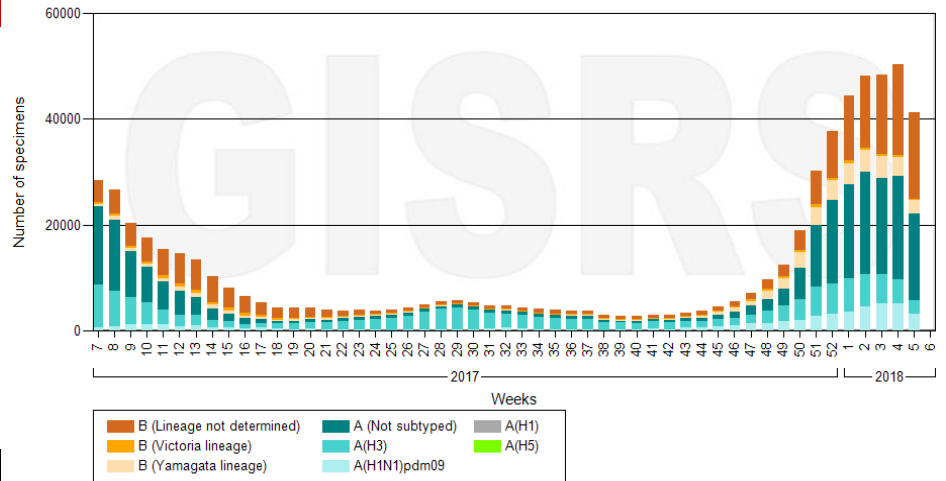
Editorial note:

Following the 2009 H1N1 pandemic, the importance of having appropriate surveillance systems to monitor influenza trends became evident globally. WHO initiated its support to priority countries to develop and/or enhance a “Severe Acute Respiratory Infection” (SARI) surveillance under the PIP framework. Lebanon was one of the countries supported and initiated its SARI sentinel surveillance in December 2014. SARI can be the result of viral, bacterial, and parasitic agents - bacterial and parasitic agents being the least common. Among the viruses, influenza and coronaviruses are among the most common causes of SARI.

Influenza is an acute viral infection that occurs commonly in a seasonal pattern. Seasonality in temperate climates occurs mainly in winter; while it is less defined in tropical regions. Influenza viruses are classified into types A, B, C, and D. Currently circulating in humans are types A, B, and less frequently C; however, only types A and B are of public health importance as they can cause epidemics.

Influenza illnesses can range from mild malaise to hospitalization and death, most prominently among high risk groups. The burden toll of influenza includes productivity losses due to increased absenteeism from schools and work. Person-to-person transmission is rapid and occurs through infectious droplets in the air or contact with hands

Figure 1: Number of specimens positive for influenza by subtype globally 2017W7-2018W5



contaminated with the virus.

In a recent WHO report, the annual global attack rate of influenza was estimated at 5–10% in adults and 20–30% in children. Moreover, annual epidemics were estimated to result in about 3 to 5 million cases of severe influenza, and about 290,000 to 650,000 deaths.

In Lebanon, during the first 4 weeks of 2018, 104 SARI cases were identified from the SARI network and tested for influenza. A total of 7% were positive for influenza, 57% of which were positive for influenza B, and the rest for influenza A. Among influenza A positive tests, 33% were further subtyped into H1N1pdm09 and 67% into H3N2.

The MoPH, with the support of WHO has recently worked on updating a national influenza pandemic preparedness plan for Lebanon and conducted a series of rapid response trainings to strengthen response capacities including diagnostics, disease surveillance, strengthening of human animal interface under the One health framework, and outbreak management.

The most effective strategies for preventing influenza are annual vaccinations and practicing good hand hygiene. WHO recommends vaccination of pregnant women at any stage of pregnancy, children aged between 6 and 59 months, elderly individuals of more than 65 years of age, individuals with chronic medical conditions and healthcare workers.

SARI WHO Case Definition:

An acute respiratory infection with:

- History of fever or measured fever of $\geq 38^{\circ}\text{C}$;
- Cough
- Onset within the last 10 days
- Requiring hospitalization

Notifiable Diseases in Lebanon [cumulative n° of cases among all residents] as of 6 February 2018

Disease	2017	2018	Dec 17	Jan 18
Vaccine Preventable Diseases				
Polio	0	0	0	0
AFP	77	9	5	9
Measles	130	13	22	13
Mumps	235	6	11	6
Pertussis	92	0	5	0
Rabies	1	1	0	1
Rubella	10	2	0	2
Tetanus	1	0	0	0
Viral Hep. B	321	7	17	7
Water/Food Borne Diseases				
Brucellosis	460	5	14	5
Cholera	0	0	0	0
Hydatid cyst	18	1	2	1
Typhoid fever	656	30	27	30
Viral Hep. A	776	52	69	52
Other Diseases				
Leishmaniasis	140	0	0	0
Meningitis	363	34	31	34
Viral Hep. C	130	5	9	5