



HEALTH BRIEF 30 January - 13 February 2023

Health Updates



Epidemiology situation - Based on MOPH data

A. Public Health Emergencies of International Concern

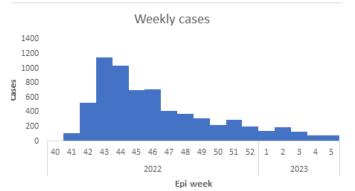


Figure 1: Distribution of suspected and confirmed cholera cases since the start of the outbreak

Cholera updates

- The global cholera situation represents a resurgence of the ongoing seventh cholera pandemic which began in 1961. In 2022, a total of 29 countries reported cholera outbreaks 13 of which are not endemic for cholera and had last reported cases between three and thirty years ago. More info on the global situation can be found <u>here</u>.
- In 2022, there have been eight active cholera outbreaks from countries of the Eastern Mediterranean Region (EMR), including Lebanon.
- Lebanon has been dealing with a cholera outbreak since October 6, 2022. Prior to this, the last cholera case in Lebanon was reported in 1993.
- Since the start of this outbreak, a total of 6,412 suspected cases and 671 laboratory-confirmed cases were recorded across the country.
- The last laboratory-confirmed case was registered on January 5.
- The MOPH will execute a testing strategy for the next 2 weeks to help declare the current cholera outbreak closed: 20 specimens per day will be collected using the following investigation criteria: daily alerts, AWD cases in medical facilities of hotspot areas, and active screening mission in areas previously known to have confirmed cases.

- The trained RRT teams will conduct these investigations and secure specimen transportation to the central and peripheral laboratories whose capacities were built through WHO support.
- The last cholera-associated death was registered on December 5, 2022 and the total number of deaths reported so far is 23. After it had peaked at over 11% at the start of the outbreak, the cholera case fatality ratio (CFR) at the national level currently sits at 0.36%. This is due to both improved case management and suspected case reporting. Cholera cases at national level peaked on epi week 33 (October 31st) with 440 cases reported in one day, after which there has been a steady decrease in the overall cases and
- attack rate. At the national level, the majority of the cases were recorded from Akkar, the North, Bekaa, and Baalbek-Hermel.
- The most affected age group has been children less than 15 years of age, but adults ages are also affected.
- Nationally, over 80% of cholera cases have not required hospitalization, and these cases were managed at outpatient clinics or homes. Cholera hospitalization in major referral hospitals peaked at more than 220 inpatients per day on epi week 42 (October 17) but has continued to drop since then with almost no daily hospitalizations since the start of 2023.
- Lebanon deployed the first dose of OCV vaccines through door-to-door community campaigns on November 17 (epi week 46). The MOPH, with the support of WHO, UNICEF, UNHCR, and other partners, devised and executed a vaccine deployment plan that prioritized areas with the highest attack rates, and with documented water contamination at the source and household levels.
- The MOPH is looking to complete the deployment of a little over 350,000 OCV doses remaining from the 1,501,800 that were purchased by WHO for administration among high-risk populations and districts.
- WHO hosted a mission from the International Centre for Diarrheal Disease Research Bangladesh (ICDDR, B) which included visits to 4 hospitals that received cholera patients during the outbreak and culminated with training on IPC measures, waste disposal, and overall teamwork approaches during outbreaks.

EPI situation continued

B. Seasonal flu

COVID-19

- Based on epidemiological and response capacity indicators, the COVID-19 pandemic in Lebanon is classified as community transmission level 3.
- During this reporting period, a total of 2,899 new COVID-19 cases and 26 associated deaths have been reported. The highest COVID-19 incidence has been in Beirut and Mount Lebanon.
- Lebanon has registered a total of 1,229,915 COVID-19 cases and 10,801 deaths since the start of the pandemic. Over the past week, there have been 8 new deaths and the mortality rate is 0.15 per 100,000.
- On an average daily basis for the past week, 21% of the ICU beds are occupied.
- WHO is providing technical and financial support for the execution of the 4th round of the national seroepidemiological investigation protocol for COVID-19 infection.
- WHO is supporting NGS sequencing at the national level at the Center for Infectious Disease Research at AUB .

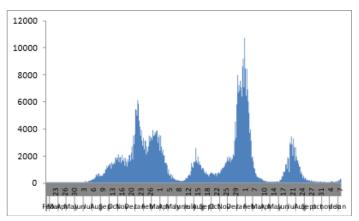


Figure 2: COVID-19 epi curve in Lebanon

Monkeypox

- Globally, there are 85,765 confirmed monkeypox cases, 93 associated deaths, and 110 countries reporting cases. In the EMR, there are so far 82 confirmed cases and 1 death.
- Throughout 2022, the MoPH in Lebanon has detected and reported 26 laboratory-confirmed cases of monkeypox.
- Among these cases, 58% were between 25 and 34 years old, 19% were between 35 and 44 years old, and 15% were equal to or great than 45 years old. One 8-year-old female has also tested positive.
- The majority of cases were reported among males with only 2 cases among females.
- Overall, 61% of cases identified as Men who have Sex with Men (MSM).
- WHO has supported the MoPH with relevant technical guidance.
- WHO, with the support of USAID, will strengthen monkeypox surveillance at the national level by engaging with 5 selected NGOs that will be integrating HIV and monkeypox activities among MSM in Lebanon.
- WHO is supporting the national reference laboratory at RHUH with essential human resources, laboratory reagents, and testing kits (targeted and commercial) for the mon-keypox response.



Figure 3: Number of tested specimens by influenza virus subtypes/lineages and percentage of specimens testing positive for influenza viruses in Lebanon from SARI/ILI sites (week 45, 2022 - week 02, 2023)

- Lebanon has now become a PIVI-supported country and will be receiving for a period of 3 to 5 years influenza vaccine doses along with necessary technical support to ensure system strengthening and a proper exit strategy.
- With the support of WHO and CDC, the MOPH was able to strengthen respiratory disease surveillance by re-activating SARI surveillance. Currently, there are 19 functional sentinel sites across the country: 13 Influenza-like Illness (ILI) and 6 Severe Acute Respiratory Infections (SARI) sentinel sites which operate as per national guidelines by collecting specimens and sending them to the National Influenza Center (NIC) for laboratory testing.
- From epi week 03 2023 till epi week 05 2023, the influenza sentinel network enrolled a total of 267 patients, out of which 208 were tested. Of these tested, 12 specimens were positive for influenza and 69 were specimens positive for SARS-CoV-2. Co-circulation was reported in 4 specimens.
- The influenza positivity rate peaked in week 46 at 36% and then started decreasing to reach 14% in week 02 of the year 2023 and 2.7% in week 04 of 2023.
- WHO continues, through the PIP framework and the CDC influenza division, to support the sentinel site surveillance mechanism through trainings, procurement of sample collection kits, and transportation of specimens.
- WHO will be supporting the MoPH in strengthening monitoring of other respiratory diseases of epidemic and pandemic potential, starting with RSV among children under 5 years of age.

C. Vaccine-Preventable Diseases

It remains 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 Vaccine-Preventable Diseases (VPDs).

Measles

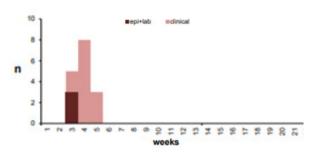


Figure 4: Number of suspected measles cases by week in 2023

- In 2023, there was a total of 16 reported measles cases including 3 laboratory-confirmed cases. Of these cases, 19% were from the North and Akkar governorates, 25% were from Mount Lebanon, 19% from Nabatieh, and another 19% were from Beirut with the rest of the cases spread across the remaining governorates.
- Overall, 56% of cases were between 1-4 years of age, 12% less than one, and another 12% between 5-9 years of age.
- Overall, 43.7% of measles cases were zero-dose individuals, i.e had not taken a single dose of measles-containing vaccines throughout their life course.
- WHO procured essential reagents and repaired the genetic analyzer at the NIC, in addition to hosting a measles accreditation mission which helped identify gaps and challenges, all with the goal of supporting the NIC to perform.

AFP surveillance and poliovirus circulation

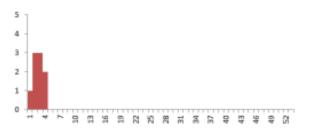


Figure 5: AFP cases by epidemiological week of onset

- Since the start of 2023, the national surveillance system was able to detect 9 AFP cases, none of which were zero dose cases, i.e cases who had not taken any dose of the polio vaccine. These cases were distributed to Mount Lebanon (2), the North (2), Bekaa (2), and Nabatieh (3).
- The nationality of these reported cases was 89% Lebanese and 11% Syrian.
- WHO continues to support the MoPH with human resources for active AFP surveillance and transportation of specimens (AFP and ES) in all governorates of the country through 8 nurses and 8 drivers.
- Although Lebanon has not detected and reported cVDPV2, it has been classified as a high-risk country for cVDPV2 introduction and has initiated and almost completed the preparedness checklist for nOPV2 vaccine introduction in case of detected cVPDV2 circulation.

- WHO continues to provide technical support to update the national immunization calendar .
- WHO is supporting the MoPH at the end of the month with an AFP surveillance mission that will look to update the national guidelines and strengthen linkages with the National Certification Committee (NCC).

D. Other communicable diseases

Meningitis

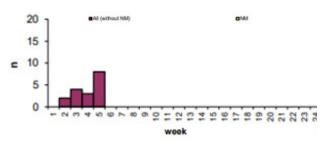


Figure 6: Meningitis cases over time

- From the start of 2023, there were 17 reported cases of meningitis based on clinical presentation.
- The most affected areas governorates based in incidence per 100,000 are Beirut, South, and Beqaa.
- These 17 cases were distributed in Mount Lebanon (29%), Beirut (29%), South (29%), and Beqaa (12%).
- Upon further specimen extraction (CSF and serum), 7 of these cases were classified as bacterial infection. Culture results showed 1 case of S. pneumoniae.

I've never in my life seen the level of destruction as I did on the road from Aleppo to Damascus. Skeletons of houses. Almost no people in sight. Over a decade of war has taken an unimaginable toll. Syrians need our support now and in years to come to rebuild their lives.

Dr Tedros Adhanom Ghebreyesus

WHO response

Strengthening the prison health system in Lebanon

Launching of the National Health Strategy at the Grand Serail



Under the patronage of Prime Minister HE Mr. Najib Mikati, the Ministry of Public Health and the World Health Organization in Lebanon launched today the National Health Strategy at the Grand Serail.

The launch of the Lebanon National Health Strategy: Vision 2030 marks an important milestone toward reforming the health sector in the country. The strategy at the core promotes partnership in support of health and proposes the framework under which all government institutions, the private sector, and partners work to improve the overall health of the people in the country.

The MOPH and WHO and partners took the initiative to construct a national health strategy in response to the country's immediate health needs, as well as longer-term objectives to rebuild a sustainable and resilient health system, especially after the disruption caused by the current crises and the COVID-19 pandemic.

"This strategy comes at a critical time when we are all thinking of ways to rebuild and strengthen the national health system after the disruption caused by the current crisis and the COVID pandemic", stated Dr Abdinasir Abubakar, WHO representative in Lebanon.

This initiative was made possible through financial support from the European Union and the UHC Partnership Program. Dr. Abubakar touched on the hard work put into making this strategy how everyone has been working hard to strengthen this national health system, especially during this crisis, and would like to acknowledge and thank all persons involved the in formulation of this strategy

The content of the strategy document is the sole responsibility of the MOPH and does not necessarily reflect the views of the EU and WHO.

"WHO remains committed to achieving universal health coverage and health for all by all in line with the Region's vision for 2023", concluded Dr Abdinasir.



The Minister of Interior and Municipalities, Judge Bassam Al-Mawlawi, the Norwegian Ambassador, Martin Yttervik and Representative of the World Health Organization Office in Lebanon, Dr Abdinasir Abubakar, launched the second phase of a project aimed at strengthening the prison health system and access to health services in Lebanon's central prisons and women prisons.

In this context, His Excellency the Minister of Interior and Municipalities mentioned that health in prison is a basic human right. "We would like to express our gratitude to WHO and the Norway Embassy for your support in improving the health conditions in Lebanese prisons. Any collaboration makes a difference. The Ministry of Interior and Municipalities is committed to providing basic needs for prisoners including health care and to improving their condition in line with human rights", expressed the Minister Judge Bassam Al-Mawlawi.

"The terrible health conditions in prisons are a major concern. We hope Norway's support will further strengthen the health system in prisons and that the learnings from this programme can help improve the national health system to the benefit of everyone in Lebanon", said the Norwegian Ambassador Martin Yttervik.

As mentioned in the United Nations Mandela Rules, "prisoners should enjoy the same standards of health care that are available in the community and should have access to necessary health care services free of charge without discrimination on the grounds of their legal status."

Through this project, WHO will continue to work closely with the Internal Security Forces to support Roumieh Central Prison in providing a comprehensive health assessment and services and follow-up for prisoners via a multidisciplinary team of physicians, nurses and social workers, in line with the national protocols of care. Special emphasis will be given to prisoners with chronic conditions including mental disorders and those aged 50 years and above. Through Norway's support, and in close coordination with the Ministry of Public Health, the Roumieh medical centre was integrated in the national Primary Health Care network in 2022. Under this project, the health care service support will be extended to the other central prisons (Zahle and Qobbe) and to women's prisons. Another important component of the project also includes equipping health clinics in central prisons and women's prisons with basic medical equipment and supplies.

This project complements other health projects implemented by WHO including early detection and management of prison inmates with COVID-19 or cholera as well as coverage of hospitalization for inmates with COVID-19 or other severe acute life-threatening diseases. "Since the start of COVID-19, WHO has been supporting Lebanese prisons to mitigate the impact of the pandemic on prisoners and their families as well as on prison personnel. WHO is committed to continue its support for improving access and availability of essential health services to the prison population, so that no one is left behind", said Dr Abubakar.

WHO response



WHO clinical case management mission in Lebanon

On February 3rd, 2023, WHO Lebanon organized a workshop for the Cholera Hospitalization Committee, Infectious Disease Doctors, and Senior Nurses previously deployed to Diarrhea Treatment Centers (DTCs) and Cholera Treatment Centers/Units to Cholera hotspot areas as part of WHO Cholera surge capacity support to the Public Health Emergency Operation Centre (PHEOC) at the Ministry of Public Health held at its premises. The training is part of the clinical case management mission by Dr. Shoeb Bin Islam, from the International Centre for Diarrheal Disease Research (ICDDR) in Bangladesh which lasted from January 16 to February 4, 2023. WHO Infection Prevention and Control (IPC) expert Mona Haddad, presented findings from the pre and post-assessments and training coaching and interventions at 15 DTCs/CTCs/CTUs across Lebanon, including patient flow, toilets or latrines, chlorine basins, linen management, water supply, waste management and wastewater, and dietetics.

During the mission, Dr. Bin Islam visited five Governmental Hospitals that hosted Cholera cases where coaching teams of infectious disease doctors and senior nurses were deployed for five coaching consecutive days followed by weekly follow-ups as part of hospital preparedness for the waterborne diseases outbreak. The objectives of the workshop were to share clinical case management and infection prevention and control (IPC) recommendations based on field observations, interventions, and technical assistance to DTCs/CTUs/CTCs in Cholera hotspot areas by sharing practical experiences following WHO guidelines on clinical case management of diarrheal diseases during outbreaks as well as prevention in order to improve knowledge and provide an outline for the management of Cholera and outbreak preparedness. The main recommendations include strengthening preparedness and response plans to ensure Lebanon's health systems are able to deal with any sudden surges or emergence of Cholera as well as strengthening surveillance systems to ensure rapid detection of any potential Cholera cases for a rapid and coordinated response. improving awareness program on health education, nutrition, oral rehydration solutions (ORS), and Zinc portion, as well as safe clean water and sanitation was also highlighted. Furthermore, strengthening the clinical, and socio-cultural training skills of professionals and paraprofessionals deployed at hospitals to avoid high fatality rates was recommended.

WHO funds a home-based palliative care model



On January 26, WHO met with Sanad, the Home Hospice Organization of Lebanon to discuss the progress in the development of the Home-based Palliative Care Model project in Tripoli. During this encounter, a practical observer-ship training session was given to the interdisciplinary team of Sanabel Nour which included case studies, role-playing, and discussions on the psychosocial, cultural and spiritual aspects in palliative patient care.

The Ongoing project funded by WHO started in mid-August 2022, and was divided into four phases.

The first phase entailing a needs assessment in Tripoli around the perceptions of the community and the Healthcare workers on palliative care was concluded. In parallel, phases two and three which include the development of the home-based palliative care components, theoretical trainings, and practical observership are currently ongoing. Within the latter, Sanabel's team will rotate with the Sanad team during clinical care visits at patients' homes to observe the work firsthand.

Sanabel Nour is a Tripoli-based NGO, whose mission is to support the vulnerable population in Tripoli and North Lebanon by providing a multi-faceted approach to basic services, and to support vulnerable populations devoid of discrimination in all of its forms.



WHO Global response

WHO sends health supplies to reach 400 000 people impacted by the earthquakes in Türkiye and the Syrian Arab Republic



In response to the devastating earthquakes impacting Türkiye and the Syrian Arab Republic, the World Health Organization delivered 72 metric tons of trauma and emergency surgery supplies, including treatments, to both countries to support ongoing response efforts.

A first charter flight departed to Türkiye on 9 February carrying 37 metric tons of life-saving supplies, and a second flight is scheduled to deliver 35 metric tons of supplies to the Syrian Arab Republic today.

In total, these life-saving supplies from both flights will be used to treat and care for 100 000 people as well as for 120 000 urgent surgical interventions in both countries.

A third flight is scheduled to reach the Syrian Arab Republic on 12 February and expected to carry 37 metric tons of emergency health supplies to reach an additional 300 000 people.

The trauma and emergency surgery supplies are designed to treat those injuries sustained during an earthquake as well as to treat illnesses such as pneumonia that are expected to rise over the next days and weeks as people are exposed to cold temperatures and many are sheltering outside or in temporary shelters. The supplies also follow WHO's immediate release, on Monday 6 February, of prepositioned medical and surgical supplies in Syria to 16 hospitals treating survivors of the earthquake in the northwest of the country.

WHO has released more than US\$ 16 million from the Contingency Funding for Emergencies, including US\$ 3 million within hours of the disaster, including for these chartered flights. These 110 metric tons of supplies, valued at USD 826 000 in total, are being sent from the WHO Global Logistics Hub located within the International Humanitarian City (IHC) in Dubai, United Arab Emirates. The flights, donated by the IHC, are providing a vital link to those impacted by this devastating event. <u>Read full article</u>.

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.



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