CAIRO, 19 February 2014 – A World Health Organization team has finished a mission to support the Egyptian Ministry of Health and Population (MoHP) in its response to the recent surge of seasonal influenza cases.

The WHO mission found that the event currently happening in Egypt is not unexpected. Many countries around the world are currently experiencing a similar situation and reporting a high number of seasonal influenza cases and Egypt has not been spared. While the number of cases nationally appears to be similar to the number in the 2012–2013 influenza season, certain areas of the country have registered substantial increases in severe cases.

"We believe that only about 20% of the world's population were infected by influenza A(H1N1)pdm2009 virus when it first appeared in 2009. The surveillance system in Egypt has also documented that the virus has not circulated widely in the country for the last two winters. That means that a large majority of the population is still susceptible, and we know that influenza A (H1N1) virus, as opposed to other subtypes of influenza, disproportionately affects younger adults with underlying medical conditions, and it can hit those people hard," said Dr Anthony Mounts, leader of the epidemiological portion of the WHO mission.

"After extensive discussions with surveillance, clinical and laboratory personnel in the MoHP, in hospitals, in the Central Public Health Laboratory, NAMRU-3 and elsewhere, we can conclude that what has happened in Egypt this winter is a surge in seasonal influenza cases without unusual or abnormal clinical presentations," said Dr Mounts. "Though the numbers of severe influenza cases has been higher than in recent years, we seem to have passed its peak about two weeks ago. We expect that the numbers of severe cases will likely continue to decline, though there may be minor resurgences of the virus or the appearance of another influenza virus before the end of winter."

Clinical presentation, i.e. cases with severe pneumonia, and age groups affected by the influenza virus during the current season are the same as in the previous seasons where the influenza A(H1N1)pdm 2009 virus was predominatly circulating, the team noted.

The WHO team presented a series of recommendations to the MoHP for the improvement of early detection and notification of influenza-like illness (ILI) and severe acute respiratory illness (SARI) events. "On the whole, Egypt has a well-established and well functioning surveillance

system, with eight sentinel sites for ILI, eight for SARI, and over 450 reporting sites," said Dr Henk Bekedam, WHO Representative in Egypt. "In the future, we will be working with the Government to further improve early detection and notification of unusual number of influenza cases including quality of specimen collection for laboratory diagnosis."

WHO is already working with the MoHP on the training of critical care doctors on specimen collection and the care of critically-ill pneumonia patients, including infection control, and on the training of MoHP personnel on media and risk and communications. Cooperation has also been established between the Egyptian Central Public Health Laboratory and laboratories outside Egypt on sample collection and testing.

"We are working with the MoHP on surveillance, detection and response to all infectious disease events, not just those influenza-related," continued Dr Bekedam, "and we stand ready to provide further support as needed."

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