

Healthbrief

10 August - 10 September 2025

Health emergency: Situation overview

- A total of **76** new injuries and **31** deaths related to the war have been reported from 05 AUGust till 08 September 2025.
- **163** incidents of attacks on healthcare were recorded including **46** impacted health facilities, **241** fatalities, **296** injuries, **113** impacted healthcare workers, **105** impacted medical transport.



Impact of hostilities from 8 Oct 2023 - 08 Sept 2025. Source: MoPH Lebanon.

Cross-borders movement

- Between 14 August and 21 August 2025, a total of 480,229 movements were recorded across 10 (out of 16) official border crossing points (BCPs) and unofficial crossing areas.
- The majority (78%) were air travel movements, including 154,364 entries and 217,852 exits.
- Movement by land accounted for 21 per cent of all movements, with 48,799 entries and 58,802 exits.
- Movements by sea accounted for one per cent of the total, with 185 entries and 227 exits recorded during the reporting period.
- UNHCR-supported Voluntary Repatriation of Syrian refugees Lebanon 2025 31 August 2025: Since January 2025, 238,120 Syrian individuals known to UNHCR have been inactivated from UNHCRs database due to both confirmed and presumed returns to Syria. Among these, 97% spontaneously returned to Syria and identified through UNHCR's various verification procedures. Since July, over 114,996 Syrian individuals (21,463 cases) have expressed interest in the UNHCR-facilitated VolRep program in general – 37% from Bekaa, Baalbek and Hermel, 35% from North and Akkar and 28% from Beirut, Mount Lebanon and South.

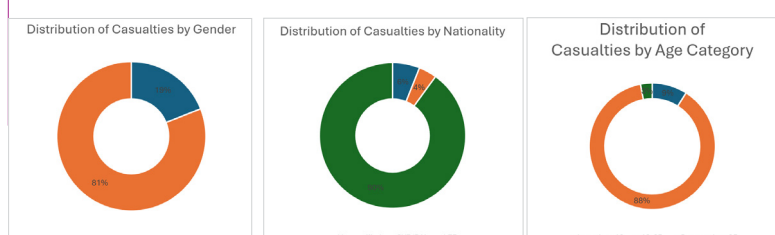
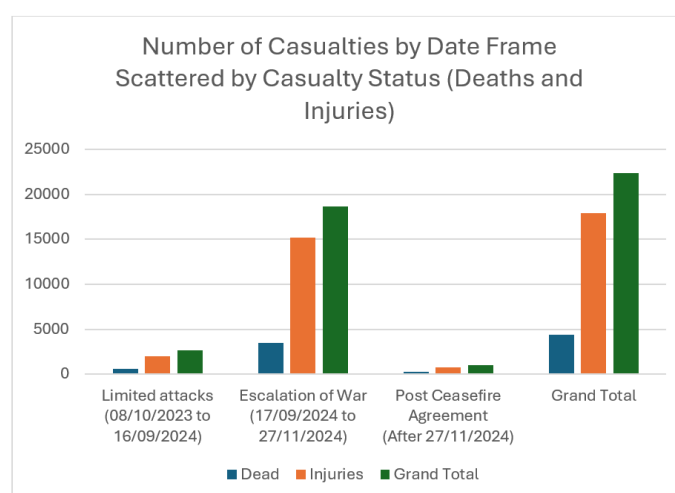
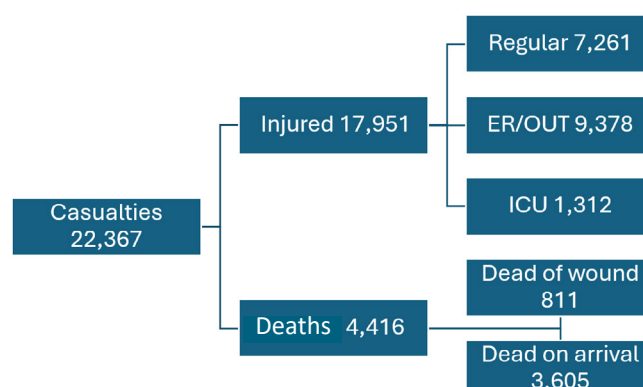
Trauma care pathway updates

Case management for trauma care:

- Trauma surgeon second mission in country under preparation. Planned mid-October to mid-November 2025:
 - o 2 rounds of trainings for residents
 - o 1 round of training for surgeons, with focus on trauma care centers
 - o Assessment of 2 additional trauma centers
 - o Meeting with orders of nurses and nursing schools for discussion on institutionalization
 - o Initiation of the discussion on National Clinical Practice Guidelines
 - o Rolling-out Training on emergency critical care in conflict setting for nursing staff
 - o Training material updated with the support of the trauma surgeon based on first round of trainings. Refresh training conducted
- Rolling-out of the Emergency and Critical Care in Conflict Situations (ECCC) training for nurses: 24 rounds of 3-day training under preparation.

Impact of escalation of hostilities

Lebanon War 2023-2025: Tree Diagram in numbers (Deaths and Injuries) from 08 October 2023 to 08 September 2025.



Epidemiological situation

Food and waterborne diseases 10 Aug - 10 Sept 2025

Cholera/Acute watery diarrhea (AWD)



Hepatitis A

New suspected cases: **86** | New confirmed laboratory cases: **41**
Cumulative suspected cases for 2025: **1,113**

DISTRIBUTION BY GOVERNORATE

Akkar	Beqaa	Mt Lebanon	N. Lebanon
19	14	10	31
Nabatieh	Beirut	Baalbek/Hermel	S. Lebanon
8	6	31	8

Vaccine preventable diseases 10 Aug - 10 Sept 2025

Disease outbreaks	New suspected cases	Location of cases	Vaccination status of cases	Cumulative for 2025	Confirmation
AFP	6	1 Akkar, 1 Beirut, 1 Bekaa, 2 North Leb, 1 South Leb	4 fully vaccinated 2 zero dose	0	0
Measles	0	0	0 zero dose	0	0
Meningitis	44	15 Beirut, 4 Bekaa, 7 Mt Lebanon, 5 Nabatieh, 6 North Lebanon, 7 South Lebanon		279	10 Bacterial 28 viral

Preparedness and response

- From weeks 33 until 37 of 2025, **33** Event Based Surveillance (EBS) signals of infectious diseases were registered at the Epidemiological Surveillance Unit (ESU) through the call center (85%), the ESU (9%), and DHIS2 (6%). Public (88%), health facilities (9%), and NGO (3%) were the different sources of information.
- Out of the received signals, **26** signals (78%) were followed-up. 26 of the selected signals (100%) were verified in timely within 24h and investigated within 48h.
- The verified events include: **1** signal of acute jaundice, **1** signal of acute flaccid paralysis (AFP), **3** signals of acute watery diarrhea (AWD), **1** signal of COVID-19, **17** signals of food poisoning, **1** signal of malaria, **1** signal of cholera (with *Vibrio* bacteria detected in water; sample referred to AUB), and **1** signal of typhoid fever.
- A cluster of **3** Malaria cases was identified in Babliyah. The first case (with death) has travel related history and was reported retrospectively. The other cases are siblings and linked to the first case. No additional cases were identified through field investigations, and no anopheles vector was found.

Health needs and response

- Public Health Emergency Operation Center (PHEOC)** is still coordinating the emergency response and referral of the injured patients. The staff are also managing the emergency stock by ensuring the availability of adequate trauma kits, medications and other medical supplies in all hospitals and PHCs.
- WHO continued to support the PHEOC operations including staffing, coordination work and technical support.

Enhancing Influenza preparedness: WHO Lebanon's support in Logistics Management System integration

WHO Lebanon directly supported the introduction of the Logistics Management System (LMS) mechanism for influenza surveillance at the Ministry of Public Health. Through a series of periodic visits to the National



Influenza Center and the Epidemiological Surveillance Unit team focused on influenza surveillance, an inventory of relevant items was diligently conducted. This included the listing and digital coding of equipment, supplies, reagents, diagnostic kits and other relevant consumables. Following this process, several training sessions were organized to introduce ESU and NIC staff to the LMS tool in addition to hands-one trainings on the mechanism of data generation, digital tracking and follow up, and generation of reports. This initiative is supported by the Pandemic Influenza Preparedness Framework.

Strengthening health in Lebanese prisons

Over 30 physicians and nurses with the Internal Security Forces working in prisons participated in workshops and discussions around health in prisons, specifically on chronic disease management, mental health, in line with national guidelines and people-centered care.

This initiative is a collaboration between the Internal Security Forces and WHO, with funding from the Norwegian Embassy.



Strengthening Lebanon's health system through collaborative efforts

Coordinated efforts to strengthen Lebanon's health care system, under the leadership of the Ministry of Public Health and in conjunction with the World Health Organization (WHO) and Amel Association, are continuing. Field visits are being conducted across Lebanon to improve coordination and communication with primary and secondary health care facilities. One such visit took place at Saïda Governmental Hospital where the WHO team met with the hospital's Director and Nursing Director. Discussions focused on the range of services offered before and after the escalation of hostilities in 2024, and ongoing challenges, including critical shortages of health care personnel and support for medical equipment maintenance.

At Al Moasat Primary Health Care Centre (Nazih Al Bizri Centre) the team observed how the services provided complemented those offered in hospitals, enabling a more comprehensive and responsive health care system for patients. In Tyre, the Amel Association Primary Health Care Centre showcased its work in noncommunicable disease management, maternal and mental health, physiotherapy and social services. The team also heard about the pressing challenges being driven by the global development finance crisis and the threats it poses to the sustainability of services. WHO reaffirms its commitment to supporting Lebanon's health sector to ensure equitable access to quality health care for all communities across the country.



Improving prison health: Ensuring no one is left behind

From the hands-on training for physicians and nurses in prisons on the management of chronic conditions, in line with national protocols and the automated health records system.

This initiative is part of WHO's broader effort to strengthen prison health systems and ensure no one is left behind, in collaboration between the Internal Security Forces and funding from the Norwegian Embassy.



Advancing Malnutrition Care: National Training for Healthcare Workers

WHO Lebanon, in partnership with the Ministry of Public Health, are rolling out a national training on the inpatient management of malnutrition at hospitals, marking a major step in the implementation of Lebanon's updated guidelines on the prevention and management of wasting and nutritional oedema.

The training is adapted from global WHO training and tailored to the national context. The aim is to equip healthcare professionals including physicians, nurses, and clinical dietitians with the essential knowledge and skills to effectively manage children hospitalized for malnutrition. The training contributes to standardizing best clinical practices and strengthens Lebanon's capacity to respond to malnutrition.



WHO and MoPH lead workshop to strengthen conflict-related surgical skills

WHO in collaboration with the Ministry of Public Health's Public Health Emergency Operations Centre (PHEOC), conducted an adaptation workshop on surgical skills in conflict settings with Lebanese medical schools, Lebanese Orders of Physicians and relevant partners.

The main aim is to discuss and agree on a national approach to enhance the surgical and clinical experience of the general and orthopedic surgeons in managing conflict-related injuries. This workshop funded by the French government, is a step forward in equipping surgeons to deliver the best evidenced-based care in the most challenging circumstances.



WHO works to **protect** people from health emergencies, including pandemics and other threats. WHO also works to protect against health risks and promote healthy environments. WHO provides guidance, support, and resources to help countries respond quickly and effectively, aiming to protect lives and reduce the impact of emergencies.

Food safety flyers



سلامة الغذاء عند انقطاع التيار الكهربائي

قد لا تكون الأطعمة المبردة أو المجمدة آمنة للأكل بعد انقطاع التيار الكهربائي

ما الذي يمكنك فعله للحفاظ على سلامة الأطعمة أثناء انقطاع التيار الكهربائي ومتى يتعين عليك التخلص من الطعام الذي قد يسبب لك المرض ؟

قبل انقطاع التيار الكهربائي

- احتفظ بجهاز مخصص لقياس درجة الحرارة في البراد والثلاجة الخاصين بك
- يجب أن تكون درجة حرارة البراد 4 درجات مئوية أو أقل ، يجب أن تكون درجة حرارة الثلاجة -18 درجة مئوية أو أقل
- قمر بتجميد عبوات الماء وأكياس الثلج للمساعدة في الحفاظ على طعامك بارداً عند 4 درجات مئوية أو أقل
- ضع عبوات جل مبردة ومبرد / براد ثلج في متناول يدك في حال اضطرت إلى إخراج طعامك من البراد لإبقائه بارداً
- اشتر ثلجاً جافاً أو مكعبات ثلج للحفاظ على طعامك بارداً في البراد إذا كنت تعتقد أن التيار الكهربائي سينقطع لفترة طويلة

خلال انقطاع التيار الكهربائي

- حافظ على أبواب البراد والثلاجة مغلقة قدر الإمكان أثناء انقطاع التيار الكهربائي
- إذا ظلت الأبواب مغلقة ، فستبقى الأطعمة آمنة حتى:
- 4 ساعات في البراد
- 48 ساعة في ثلاجة ممتلئة ، 24 ساعة في ثلاجة نصف ممتلئة
- في حال انقطاع التيار الكهربائي لمدة 4 ساعات ، وتوافر المبرد / براد الثلج وتلج ، ضع الأطعمة المبردة القابلة للتلف في براد الثلج ، للحفاظ عليها عند 4 درجات مئوية أو أقل أخف ثلجاً أو مصدر تبريد مثل أكياس ثلج مجمدة.

بعد انقطاع التيار الكهربائي

- لا تذوق الطعام ابداً لتحديد ما إذا كان آمناً للأكل عندما تكون في حالة شك، التخلص منه
- التخلص من الأطعمة القابلة للتلف الموجودة في برادك (للحوم، والأسماك، وقطع الفاكهة والخضروات، والبيض، والحليب وبقايا الطعام) بعد مرور 4 ساعات على انقطاع التيار الكهربائي أو عدم وجود وسيلة تبريد أخرى كالتلج الجاف
- التخلص من أي طعام ذي رائحة، أو لون أو شكل غير عادي
- التخلص من الأطعمة المحفوظة في درجة حرارة تفوق الـ 4 درجات مئوية في المبرد أو البراد المزود بمصدر تبريد إضافي
- يمكنك إعادة تجميد أو طهي الأطعمة المجمدة المذابة بأمان والتي لا تزال تحتوي على بلورات ثلجية أو المحفوظة في درجة حرارة 4 درجات مئوية أو أقل.

إذا كنت تعاني من أعراض التسمم الغذائي، اطلب من طبيبك إبلاغ وزارة الصحة العامة على الرقم التالي: 1787. يساعد هذا الإبلاغ في رصد الحالات والتدخل بشكل أسرع لحماية الصحة العامة.

حافظ على سلامة طعامك... تحمي صحتك



حافظ على سلامة طعامك... لتحمي صحتك

في ظل ارتفاع درجات الحرارة خلال فصل الصيف، تزداد حالات التسمم الغذائي نتيجة سوء حفظ وتخزين الطعام أو تحضيره بطرق غير آمنة، ما يشكل خطراً مباشراً على صحة الأفراد، خصوصاً الأطفال وكبار السن. وقد رُصد في الآونة الأخيرة ازدياد في عدد حالات التسمم الغذائي في لبنان، مما يبرز الحاجة الملحة لتعزيز الوعي المجتمعي حول سلامة الغذاء.

يهدف هذا المنشور إلى تعميم الإرشادات الوقائية المبينة على أفضل الممارسات العالمية، للحد من خطر الأمراض المنقولة عبر الغذاء خاصة خلال موسم الصيف.

هل تعلم أن؟

- في بعض الحالات، يمكن أن يتسبب تناول أغذية غير آمنة بوفاة الأشخاص.
- تتعلم عن سلامة الأغذية وتحضيرها وحفظها بشكل آمن يقلل من المخاطر.
- بعض البكتيريا الضارة تصبح غير نشطة عند تجميدها، ولكن بمجرد إذابتها يمكن أن تصبح خطيرة مرة أخرى وبالتالي، قوموا بإذابة الأغذية النيئة في البراد، وقوموا أيضاً بطهي الطعام جيداً.
- قسّم كبير من الجراثيم التي قد تسبب تسمم غذائي لا تغير الغذاء أو رائحته.

إعتمد القواعد الأساسية الـ 5 لضمان سلامة الغذاء

1- حافظ على النظافة

نظافتك الشخصية

- اغسل يديك جيداً بالماء والصابون قبل البدء بإعداد الطعام - بعد الخروج من دورة المياه
- كرر غسل يديك كلما انتهت تحضير نوع من الأطعمة
- استبدل القفازات المطاطية كلما انتهت تحضير نوع من الأطعمة
- ابق شعرك قصيراً أو مربوطاً ومغطى دائماً
- ابق أظفارك قصيرة ونظيفة
- حافظ على نظافة ملابسك

نظافة المطبخ

- اغسل وتنظف جميع المساحات والمعدات المستخدمة لإعداد الطعام بالماء والصابون
- احمر الطعام ومساحات المطبخ من الحشرات وسائر الحيوانات
- بديل المعطلة والشوكة المستعملتين لتذوق الطعام بعد كل استعمال.

4- إفصل بين الطعام المطبوخ وغير المطبوخ

- إفصل كل اللحوم والدواجن والأسماك وثمار البحر غير المطبوخة عن بعضها البعض وعن الأطعمة الأخرى
- استعمل لإعداد الطعام غير المطبوخ معدات وأوان وأدوات منفصلة
- احفظ الطعام في أوعية وأماكن منفصلة تفادياً للتماس بين الأطعمة المطبوخة وغير المطبوخة

5- إحتفظ الطعام على درجة حرارة مأمونة

- اطحن المأكولات جيداً عبر غليها حتى تتضج
- إحتفظ جميع الأطعمة المطبوخة والقابلة للفساد في الثلاجة (أقل من 5°C)
- لا ترك الطعام المطبوخ في درجة حرارة الغرفة أكثر من ساعتين
- لإزالة تجميد الأطعمة ضعها في الأدوار السفلى من الثلاجة أو استعمل الميكرويف أو أطبخها فوراً
- امتنع عن تخزين الطعام مدة طويلة في البراد أو الثلاجة
- سخن الطعام المطبوخ تسخيناً جيداً
- لا تعدد الأطعمة بعد إزالة تجميدها.

حافظ على سلامة طعامك... تحمي صحتك

“Your health is your greatest wealth; invest in it with nutrition and daily exercise!”

- Dr. Tedros Adhanom Ghebreyesus, WHO Director-General

”

WHO promotes healthier populations by supporting countries in preventing diseases, improving nutrition, and encouraging healthy lifestyles. It provides guidance, tools, and partnerships to help people live longer, healthier lives. WHO focuses on promoting health through various initiatives, including health promotion activities and addressing the social determinants of health. They aim to ensure healthy lives and well-being for all at all ages.



WHO updates list of essential medicines to include main cancer and diabetes treatments

the World Health Organization (WHO) has released updated editions of its Model Lists of Essential Medicines (EML) and Essential Medicines for Children (EMLc), adding new treatments for various types of cancer and for diabetes with associated comorbidities such as obesity. Medicines for cystic fibrosis, psoriasis, haemophilia and blood-related disorders are among the other additions.

WHO EML and EMLc include medicines for priority health needs of populations. They are adopted in over 150 countries, serving as a basis for public sector procurement, supply of medicines and health insurance, reimbursement schemes. The revisions mark the 24th edition of WHO EML and 10th edition of EMLc.

“The new editions of essential medicines lists mark a significant step toward expanding access to new medicines with proven clinical benefits and with high potential for global public health impact,” said Dr Yukiko Nakatani, Assistant Director-General for Health Systems, Access and Data.

Launched in 1977 largely to promote better access to medicines in developing countries, the WHO Model Lists have become a trusted global policy tool for decisions related to the selection and universal coverage of medicines within all health systems.

The WHO Expert Committee on the Selection and Use of Essential Medicines reviewed 59 applications, including 31 proposals for the addition of new medicines or medicine classes. As a result, 20 new medicines were added to the EML and 15 to the EMLc, along with new use indications for seven already-listed products. [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.



Further information

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