



This is the final bi-weekly issue. Starting next edition, the bulletin will be released monthly.



# HEALTH BRIEF

04 - 18 May 2025

## Ceasefire - Situation overview

- Access to health services in the affected areas slowly improving:
  - Damage repair is ongoing at Mays El Jabal hospital which is still closed due to major damage.
- A total of **18** new injuries and **6** deaths related to the war have been reported from 4 till 18 May 2025.
- 163** incidents of attacks on healthcare. (Out of the 163 incidents, **46** impacted health facilities, **241** fatalities, **296** injuries, **113** impacted healthcare workers, **105** impacted medical transport).



**17 720**  
People injured



**4 335**  
Deaths

Impact of hostilities from 8 Oct 2023 - 20 May 2025. Source: MoPH Lebanon.



**90 020**  
People displaced

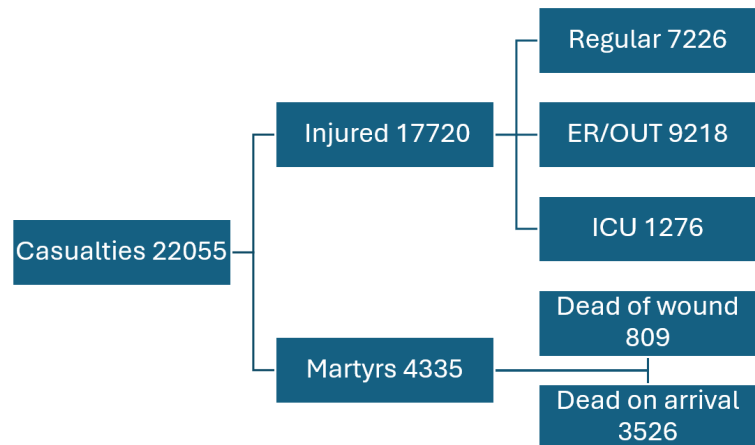


**994**  
Registered IDPs in  
15 collective sites

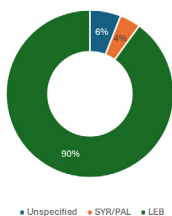
Source: Displacement Tracking Matrix 2 May 2025.

## Impact of Escalations of Hostilities

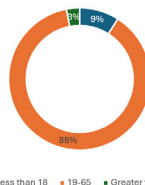
Lebanon War 2023-2025: Tree Diagram in numbers (Deaths and Injuries) from 08 October 2023 to 20 May 2025.



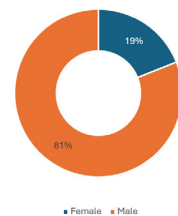
Distribution of Casualties by Nationality



Distribution of Casualties by Age Category



Distribution of Casualties by Gender



## Health needs and response

- Public Health Emergency Operation Center 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 and coordination work.

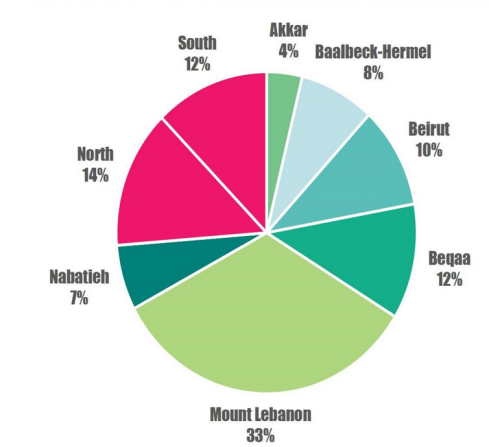
### Trauma Care Trainings and Refreshers

#### Breaking Bad News in Conflict Situations

Total number of participants from 114 hospitals was 1 966:

Year	# of participants
2024 (Hospital staff)	109
2025 (Hospital staff)	1 857
2025 (Social workers)	33
Total	1 966

#### Hospital Distribution by Governorate



#### Emotional Crises Management Training

Emotional crisis management training was previously provided to hospitals and received positive evaluations. In 2025, five hospitals participated, with a total of 82 healthcare workers trained. A total of 59 participants attended the TOT sessions, with each hospital nominating one or two staff members based on its capacity. Hospitals were selected according to their size, geographic location, and number of staff, with a focus on including hospitals that have a Continuous Education Unit to ensure that emotional crisis management is embedded in their annual training plans.

#### Basic Psychological Skills- Early rehabilitation

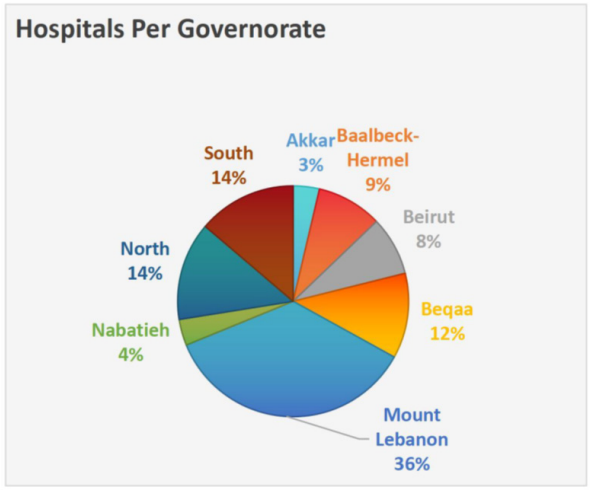
A one-day Basic Psychological Support training session was conducted as part of early rehabilitation efforts. The trainings targeted 17 to 20 participants from various rehabilitation specialties, including audiologists, optometrists, physiotherapists, speech therapists, and occupational therapists. This initiative aimed to equip professionals with foundational skills to support individuals coping with psychological distress due to disability. Ten sessions have been completed reaching 199 participants from different specialists as shown in the below table:

Position	# of participants
Audiologist	6
Occupational therapy	19
Optometrist	49
Other	2
Physiotherapy	66
Speech therapy	57
Grand total	199

#### Mass Casualty Management (MCM) Plan Finalization and Refresher Training

Following the MCM training and activation drills conducted under the trauma care pathway, the PHEOC with support from WHO, initiated a phase of hospital visits to ensure MCM readiness. This phase focused on conducting structured audits and delivering refresher training sessions, without reactivating drills, to confirm that hospitals had finalized their MCM plans and were operationally prepared for mass casualty incidents. The visits covered 109 public and private hospitals across Lebanon. The training was done for multidisciplinary team who are involved in the MCM plan, the total number of participants was 2 261.

#### Hospitals Per Governorate



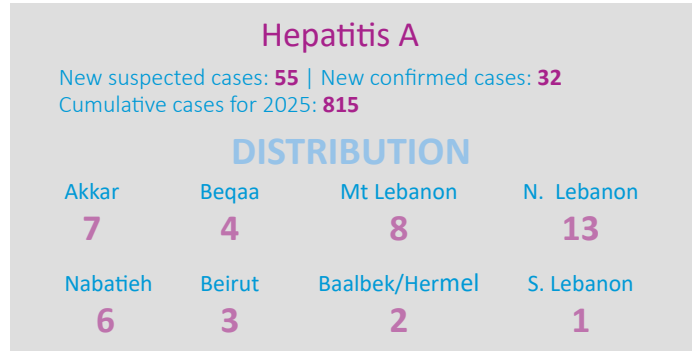
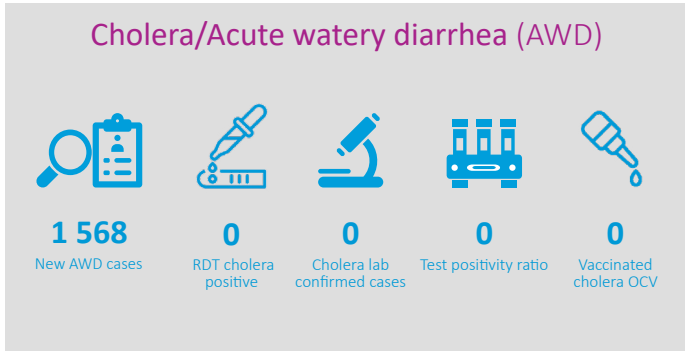
“It’s official: the [Pandemic Accord](#) is officially adopted by the World Health Assembly! My warmest congratulations to WHO Member States for their commitment to keeping their people and the world safer. What a moment in global health history. Together!

– Dr. Tedros Adhanom Ghebreyesus, WHO Director-General

”

## Epidemiological situation

### Food and waterborne diseases 04 - 18 May 2025



### Vaccine preventable diseases 04 - 18 May 2025

Disease outbreaks	New suspected cases	Location of cases	Vaccination status of cases	Cumulative for 2025	Confirmation
<b>AFP</b>	2	1 Bekaa, 1 Mount Lebanon	1 fully vaccinated & 1 zero dose	33	0
<b>Measles</b>	3	2 North Lebanon, 1 Mount Lebanon	3 zero dose	26	0 confirmed measles
<b>Meningitis</b>	19	3 Akkar, 2 Beirut, 4 Bekaa, 6 Mt Lebanon, 1 Nabatieh, 1 North Lebanon, 2 South Lebanon		111	13 Bacterial 3 viral

#### Preparedness and response

- Ministry of Public Health has reported 1 child fatality (12 years old boy) from meningitis. Laboratory findings confirmed the isolation of *Neisseria Meningitidis* through PCR testing. The case had no travel history, and no additional cases were reported. Antibiotrophylaxis was provided to household and classmates.
- Between weeks 19 and 20 of 2025, 3 EBS signals of infectious diseases were registered at the Epidemiological Surveillance Program (ESP) through the call center (100%). Public (100%) was the only source of information.
- The Epidemiological Surveillance Program (ESP) selected 2 of these signals, of which 100% were verified within 24 hours and all investigated within 48hrs. 2 signals were verified as true and included: 1 AWD signal and 1 signal of rabies exposure.
- WHO continues to support the MOPH 1787 call center, which has received a cumulative of 12 370 calls since September 2024. During the past two weeks, 230 new calls were received, averaging 16 calls per day.

**Health measures at points of entry into Saudi Arabia**

To help protect your health and the health of fellow hajjis, Saudi authorities may

- ✓ administer preventive antibiotics for meningitis
- ✓ administer oral polio vaccine
- ✓ verify that your travel documents include valid certificates
- ✓ screen for symptoms such as diarrhoea and offer preventive treatment if needed

World Health Organization  
Eastern Mediterranean Region

**Simple precautions to guard against respiratory infections**

- Wash your hands regularly with soap or use hand sanitizer
- Wear a mask in crowded places
- Use tissues when coughing or sneezing, and dispose of them properly
- Avoid sharing personal items like cups and utensils
- Keep a respectful distance from anyone who appears unwell
- Avoid contact with camels

World Health Organization  
Eastern Mediterranean Region

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### WHO and MOPH teams visit pharmaceutical manufacturer to assess MediTrack implementation



A joint delegation from World Health Organization's Lebanon Office and the National eHealth Program conducted field visits to the Union Healthcare warehouses as part of the Lebanese Ministry of Public Health's continued commitment to advancing the MediTrack system—designed to trace medications and uphold their safety standards.

The purpose of these visits was to assess how well the system is being integrated across the pharmaceutical supply chain and to verify that operations align with national guidelines for medication monitoring and quality control.

The team reviewed how pharmaceuticals are registered into the system via 2D barcodes, and how key logistics such as receiving, storage, and distribution are digitally tracked on the MediTrack platform. These observations confirmed meaningful strides in the rollout of this critical initiative.

We sincerely thank the program's donors—the European Union in Lebanon, the Italian Government, and the Italian Agency for Development Cooperation (AICS)—for their continued support of the MediTrack system. We remain committed to deepening our collaboration with the local pharmaceutical sector to ensure that every patient in Lebanon can access safe, traceable, and high-quality medicines.

### Mental Health in Crisis: WHO and OCHA emergency directors visit conflict-affected areas of Beirut



Mental health brings together Mr. Altaf Musani, WHO Emergency Director, and Ms. Edem Wosornu, OCHA Emergency Director, who led a joint mission to the southern suburbs of Beirut, focusing on the mental health and psychosocial support (MHPSS) needs of conflict-affected populations, particularly those still residing in collective shelters.

The delegation visited two public healthcare centers supported by partner organizations delivering MHPSS services.

The first stop was at the Amel Association Primary Health Care (PHC) Center in Burj Al Barajneh, where the team participated in a focus group discussion with women affected by the conflict, with a particular emphasis on mental health challenges.

The second visit took place at the Rafic Hariri PHC Center in Tarik El Jdeideh. There, the team met with the health operational partner, the International Medical Corps (IMC), the PHC staff, and service beneficiaries to better understand existing challenges and service gaps.

Key issues discussed included access to timely and adequate mental health services, availability of resources, and the quality of care. The mission underscored the critical importance of ensuring that mental health services are not overlooked—especially in conflict-affected settings where the need is urgent and growing even amongst males.





## WHO calls for urgent action to ban flavoured tobacco and nicotine products

On World No Tobacco Day, the World Health Organization (WHO) today launches a [new publication](#) and calls on governments to urgently ban all flavours in tobacco and nicotine products, including cigarettes, pouches, hookahs and e-cigarettes, to protect youth from addiction and disease.

Flavours like menthol, bubble gum and cotton candy are masking the harshness of tobacco and nicotine products turning toxic products into youth-friendly bait. Flavours not only make it harder to quit but have also been linked to serious lung diseases. Cigarettes, which still kill up to half of their users, also come in flavours or can have flavours added to them.

“Flavours are fuelling a new wave of addiction, and should be banned,” said Dr Tedros Adhanom Ghebreyesus, Director-General of WHO. “They undermine decades of progress in tobacco control. Without bold action, the global tobacco epidemic, already killing around 8 million people each year, will continue to be driven by addiction dressed up with appealing flavours.”

The publication, Flavour accessories in tobacco products enhance attractiveness and appeal, reveals how flavours and accessories like capsule filters and click-on drops are marketed to bypass regulations and hook new users. [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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