

Healthbrief

29 April - 24 May 2026

Health emergency: Situation overview

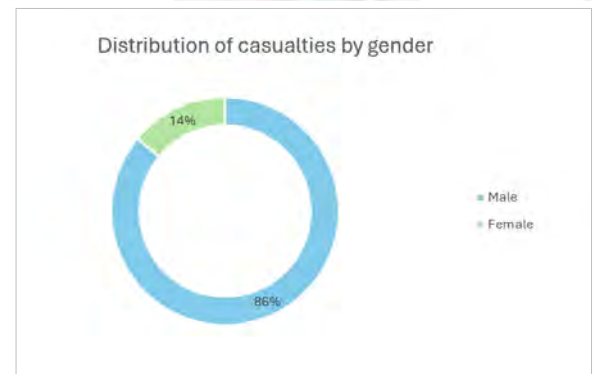
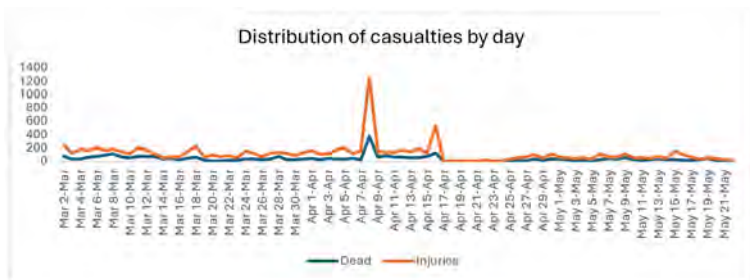
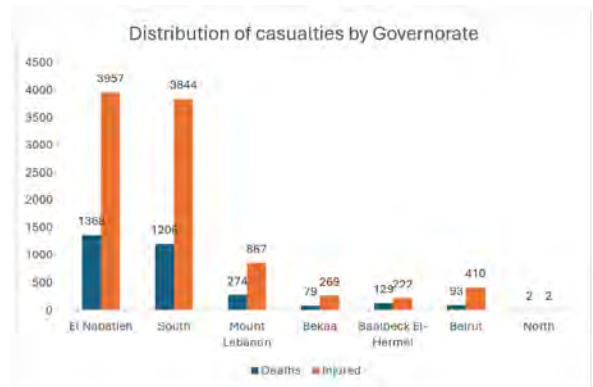
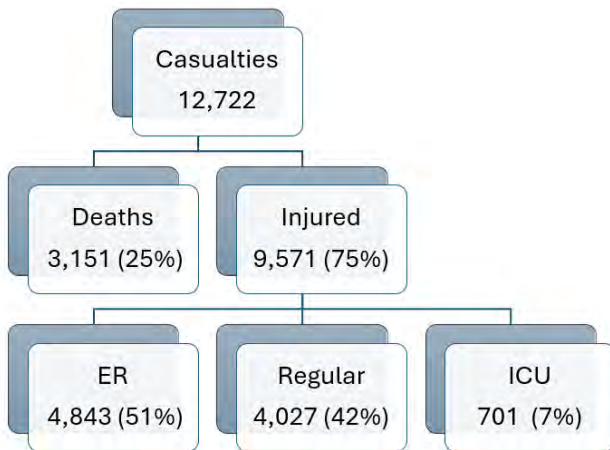
- A total of 12,722 casualties related to the war have been reported from 02/03/2026 till 24/05/2026 as a result of the recent escalation of hostilities including 9,571 injuries and 3,151 deaths.
- During the same period, more than 176 attacks on healthcare have resulted in the deaths of 123 healthcare workers and the injury of 301.



Impact of hostilities from 02 March 2026 - 24 May 2026.
Source: PHEOC MoPH Lebanon.

Impact of escalation

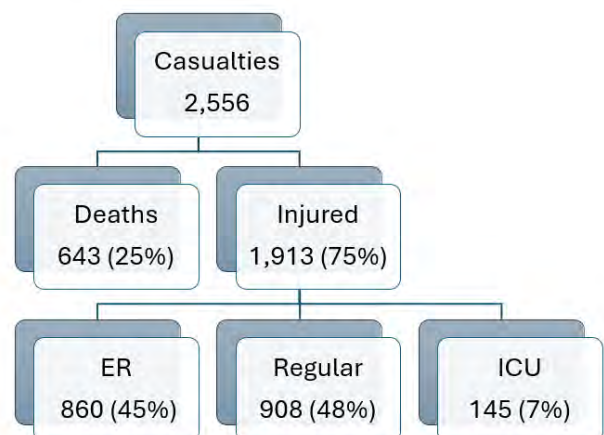
Lebanon War 2026: Tree Diagram in numbers (Deaths and Injuries) from 2 March 2026 to 28 April 2026.

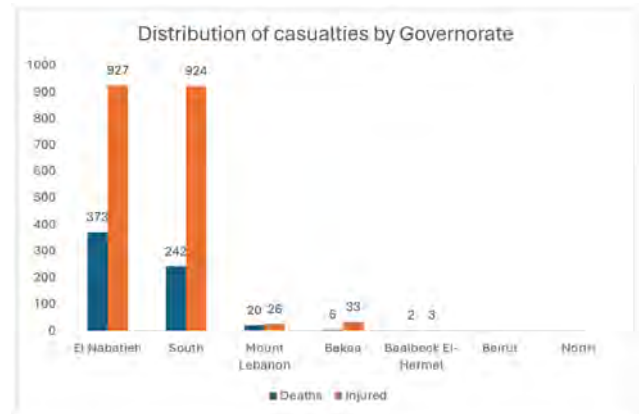
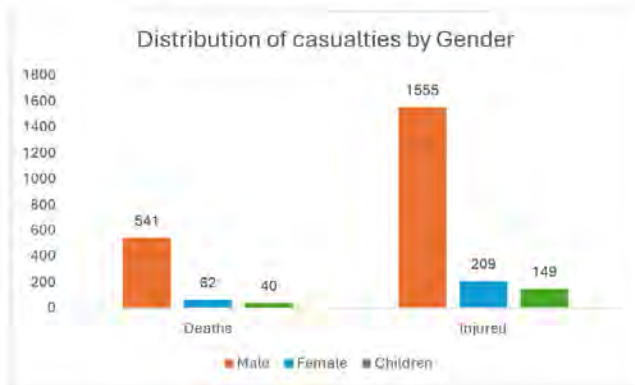
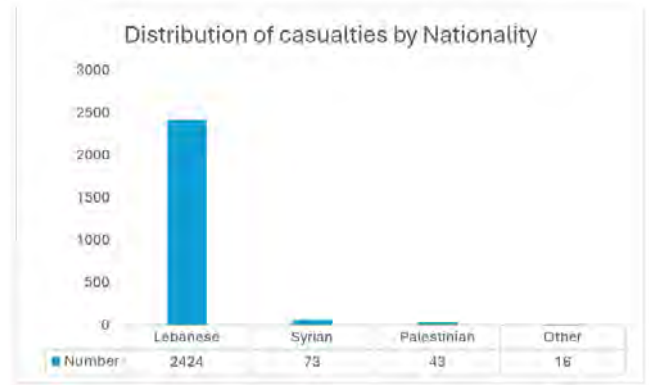
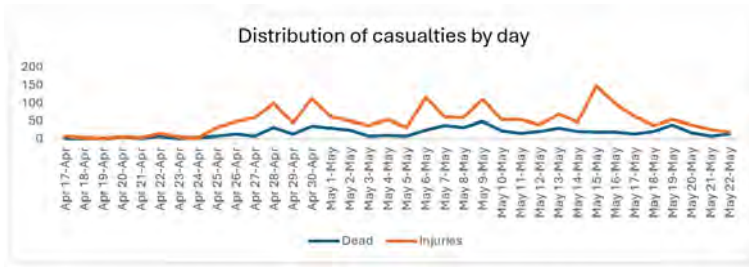


Ceasefire - Situation overview

Since 17 April 2026, 2,556 casualties have been reported including 643 deaths and 1,913 injured.

Lebanon War March 2026: Tree Diagram in numbers (Deaths and Injuries) from 17 April 2026 to 24 May 2026.





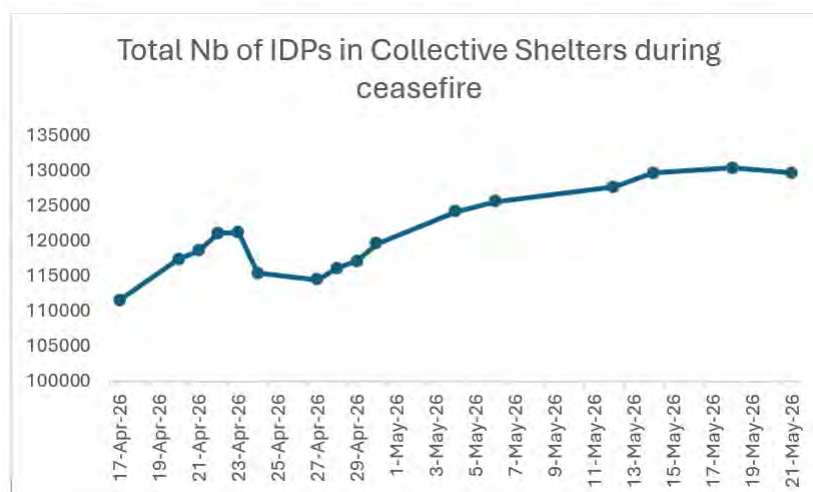
Conflict overview

Casualties and injury overview

- MoPH reported a cumulative number of casualties since 2nd March has reached 12,722 including 3,151 deaths (including 218 children and 302 women) and 9,571 injuries as of 3:00pm on May 24, 2026.
- Out of the total injured, 51% were treated at Emergency room as outpatient, 42% admitted to regular wards and 7% admitted to ICU.
- The majority of fatalities and injuries occurred in Nabatiyeh (5,325 casualties), followed by the South (5,050 casualties), and Mount Lebanon (1,141 casualties). Additional cases were reported across other governorates.
- Of the total casualties, 86% (10,890) were male and 14% female (1,832).
- Of the total casualties, 218 children are dead (2%) and 864 children (7%) are injured.
- Nationality data shows that 94% were Lebanese, 4% Syrian, 1% Palestinian, and 1% from other nationalities.

Displaced people and shelters

- As of 21 May 2026, DRM reported 129,724 displaced individuals residing in 635 collective shelters across the country. Number of IDPs in shelters has increased by 14% since April 17, 2026.



Impact on health services and vulnerable groups

- Despite the ceasefire, attacks on health care have continued, underscoring the fragile protection afforded to health services. Since 2 March 2026, the WHO Surveillance System for Attacks on Health Care has recorded more than 176 attacks which resulted in 301 injuries and 123 deaths among healthcare workers¹.
- Health infrastructure has been heavily affected: Three hospitals remain closed (Bint Jbeil Public, Mays al-Jabal Public), while three others have recently re-opened (Al Borj, AL Sahel, Bahman hospital), while sixteen hospitals have sustained partial damage including 2 hospitals with major physical damage.
- 45 PHCs remain closed and 13 PHCs reported to be damaged.
- 118 pharmacies and pharmaceutical warehouses were damaged. 291 pharmacists were displaced and 320 pharmacists had to stop working (Lebanese Order of Pharmacists).

Healthcare attacks

New Escalation (since 2nd of March 2026)

	Cumulative Since March 2026
# of attacks on Health Care	176
# of Health care workers injured	301
# of Health care workers deaths	123
# of hospitals damaged *	16
# of hospitals closed *	3
# of closed PHCCs **	45

* Source MoPH/PHEOC

** Source MoPH PHC Department

WHO response efforts

Strengthen emergency coordination & health sector leadership

- As part of WHO technical support to MoPH under the International Health Regulations (IHR), an advanced webinar on radio-nuclear hazards was conducted on 15 May 2026 for ER physicians to strengthen hospitals' capacity to effectively detect, respond to, and manage radio-nuclear emergencies in Lebanon. This webinar covered the following:
 - Introduction to basic radiation protection (types of exposures, health effects of radiation, and types of radiation emergencies)
 - Radiation detection equipment in radiation emergencies
 - Decontamination procedures
 - Hospital response (Emergency Rooms set up, medical countermeasures and special stockpiles, including medications)
- Part II of the webinar on radio-nuclear hazards preparedness for emergency doctors was conducted on Monday 25 May 2026 prior to finalizing the roll-out plan of trainings across all hospitals in country.

Ensure essential health services & reinforce logistics, supply chain, and operational support

- WHO's deployment of 120 KMEDMTRAMK2-A1 Major Trauma Backpack Kits to ambulances and EMS teams strengthens Lebanon's frontline capacity to rapidly respond to emergencies, mass-casualty incidents, and conflict-related injuries.

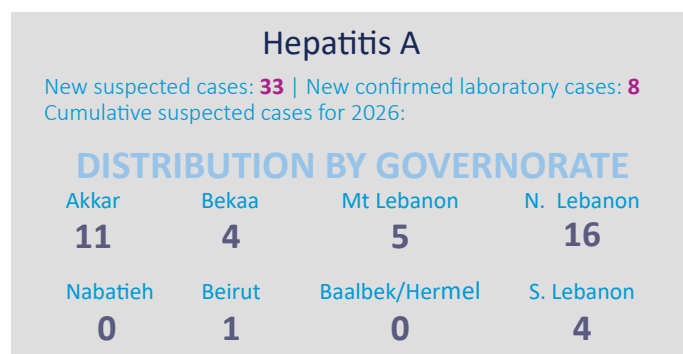
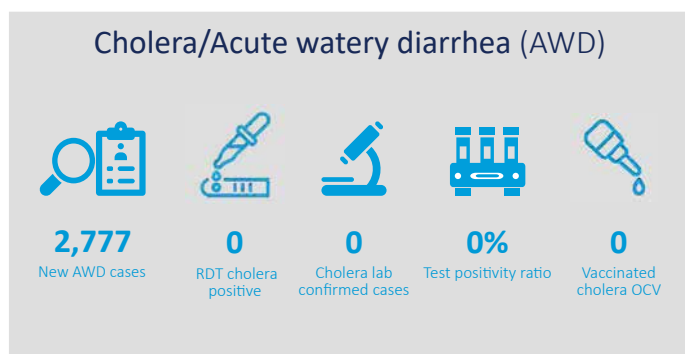
Sustain & expand trauma response

- WHO is covering hospitalization costs for trauma care among non-Lebanese patients. To date, WHO has supported the care of 101 patients, including 93 hospital admissions and 8 emergency room cases across 23 hospitals. Beneficiaries include 91 Syrians and 10 migrant workers. Of the total, 23 individuals (23%) are under 18 years of age and 26 (26%) are female.

WHO works to ensure access to essential health services for all, including universal health coverage. WHO provides support to countries by offering technical expertise, resources, and policy guidance to strengthen health systems. It works closely with governments to improve healthcare access and address public health challenges.

Epidemiological situation

Food and waterborne diseases 19 April until 17 May 2026



Vaccine preventable diseases 19 April until 17 May 2026

Disease outbreaks	New suspected cases	Location of cases	Vaccination status of cases	Cumulative for 2026	Confirmation
Measles	1	1 Beirut	1 zero dose	0	0
AFP	1	1 Mount Lebanon		0	0
Meningitis	31	3 Akkar, 5 Beirut, 2 Bekaa, 13 Mt Lebanon, 2 Nabatieh, 2 N Lebanon, 4 S Lebanon		0	14 Bacterial 11 viral

- By week 20, AWD cases showed a sustained increasing trend, rising from 504 cases in week 17 to 803 cases in week 20 (2,777 cumulative cases), with no confirmed cholera cases detected.
- Hepatitis A cases remained low but geographically concentrated, mainly in the North and Akkar governorates, while measles and AFP continued at very low levels with only one suspected case each and no confirmed cases.
- Meningitis showed a declining trend over the reporting period, with most cases reported from Mount Lebanon and Beirut; bacterial meningitis accounted for 14 classified cases compared to 11 viral meningitis cases.
- None of the reported conditions exceeded emergency alert thresholds during the reporting period.

“ *WHA79 delegates met this week against a backdrop of outbreaks, conflict, division, uncertainty and constrained resources. That is exactly the point of multilateralism: not to pretend the difficulties of our world are not there, but to address them together. That is not automatic. It is a choice. A choice to prioritise health. A choice to recognise that no country can address today’s health challenges alone. A choice to work through WHO, not only as an institution, but as a shared platform for shared action. I thank you for that choice.* ”

- Dr. Tedros Adhanom Ghebreyesus, WHO Director-General

Epidemic of Ebola Disease caused by Bundibugyo virus in the Democratic Republic of the Congo and Uganda determined a public health emergency of international concern

Pursuant to paragraph 2 of Article 12- Determination of a public health emergency of international concern, including a pandemic emergency of the International Health Regulations (2005) (IHR), the Director-General of the World Health Organization (WHO), after having consulted the States Parties where the event is known to be currently occurring, is hereby determining that the Ebola disease caused by Bundibugyo virus in the Democratic Republic of the Congo and Uganda constitutes a public health emergency of international concern (PHEIC), but does not meet the criteria of pandemic emergency, as defined in the IHR. [Full article](#).

79th World Health Assembly adopts resolution on the protection of health care submitted by Lebanon

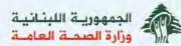
The Seventy-Ninth World Health Assembly, held in Geneva from 18 to 23 May, adopted a resolution submitted by Lebanon on the protection of health care, receiving 95 votes in favour and only two against.

The resolution, endorsed earlier by the Council of Arab Health Ministers, highlights the severe impact of the ongoing escalation of hostilities on Lebanon's health system since 2 March 2026, with significant disruptions to hospitals, primary health care centres, ambulance services, and medical personnel.

It notes that more than a quarter of the population has been displaced, placing extreme pressure on already strained health services amid shortages of medicines, medical supplies, and rising demand for mental health support.

The resolution further documents the direct impact on the health sector, including 116 health workers killed, damage to 16 hospitals, 147 ambulances affected, and 45 primary health care centres forced to close, describing these incidents as serious violations of international humanitarian law.

It calls for strengthened protection of health care, sustained international support to Lebanon's health system, and enhanced operational assistance from WHO to ensure continuity of essential services and support system recovery, while reaffirming the broader importance of safeguarding health care in conflict settings and upholding the right to health.



دليل الوقاية من الامراض المعدية الشائعة

بخطوات بسيطة... نمنع انتشار العدوى

2026



تمت طباعة هذا الكتيب بدعم من



RCCE in action: co-creating resilience in Lebanon's shelters

Following the displacement of nearly 130,000 people into overcrowded collective shelters across Lebanon, WHO Lebanon, in collaboration with the Ministry of Public Health (MoPH), developed and disseminated a practical health awareness booklet to help prevent communicable disease outbreaks among internally displaced populations. The initiative responded to rising reports of lice, scabies, diarrheal diseases, influenza-like illnesses, measles, chickenpox, and hepatitis A in shelters, many of which are schools not designed for long-term living. Through a rapid, community-centered RCCE approach, WHO and MoPH adapted technical health guidance into simple, visual, and context-appropriate messaging focused on hygiene, food and water safety, infection prevention, and early care-seeking. Universities and youth volunteers nationwide supported the design process, while coordination with Health, WASH, Shelter sectors, and the Disaster Risk Management Unit enabled integration of the booklet into hygiene kit distributions reaching approximately 34,000 displaced families. The initiative demonstrates how cross-sector collaboration, community engagement, and leveraging existing operational networks can strengthen resilience, reduce stigma, and help prevent secondary public health crises in humanitarian settings.

[RCCE in action: co-creating resilience in Lebanon's shelters](#)

WHO response

EU, WHO, and MoPH deliver critical trauma supplies to frontline hospitals in Lebanon



The Ministry of Public Health, together with the European Union Humanitarian Aid (ECHO), the European Union, and WHO, continues to strengthen Lebanon's emergency health response through the delivery of critical trauma supplies to frontline hospitals across the country.

During a visit to the Ministry of Public Health's central warehouse in Karantina, Minister of Public Health Dr. Rakan Nassereddine and EU Commissioner for Equality, Preparedness and Crisis Management Ms. Hadja Lahbib reviewed the trauma emergency kits donated by ECHO to support hospitals responding to growing health needs.

A total of 60 trauma emergency kits have been delivered to the central warehouse, with kits already distributed to 29 hospitals and the remaining supplies set to reach 31 frontline hospitals. Each kit can treat up to 50 trauma patients. The supplies arrived in Lebanon as part of the European humanitarian air bridge.

The WHO Deputy Representative in Lebanon Dr Yutaro Setoya said: "WHO extends its sincere gratitude to the European Union for their generous support to Lebanon's health sector. These essential medical supplies and equipment will help strengthen emergency preparedness and response capacities, ensure continuity of care, and support hospitals and vulnerable communities across the country during a critical period."

WHO continues to work closely with national authorities and international partners to ensure timely delivery and distribution of life-saving medical assistance to hospitals, primary healthcare centres, and vulnerable communities throughout Lebanon.

Strengthening community-based disease surveillance across Lebanon



The Ministry of Public Health's Epidemiological Surveillance Unit (ESU), with support from WHO and funding from the Spanish Agency for International Development Cooperation (AECID), conducted a five-day Community-Based Surveillance (CBS) training workshop for NGO focal points representing all governorates across Lebanon.

The training aimed to strengthen the early detection and reporting of priority communicable diseases through the DHIS2 platform and the supported 1787 hotline, enhancing timely verification, investigation, and public health response at the community level. Participants are expected to cascade the surveillance and reporting procedures within their respective organizations, further reinforcing early warning and outbreak detection capacities, particularly amid the current challenges facing Lebanon. This initiative aligns with WHO's mandate to support epidemiological surveillance and emergency preparedness efforts to ensure the rapid detection and containment of potential outbreaks.

WHO assesses public health needs at Jdeideh school shelter



A WHO Lebanon team visited the Jdeideh School for Girls shelter yesterday, where 377 people (90 families) are currently residing, to understand their living conditions and identify priority public health concerns.

WHO continues to work with partners to address public health issues through supporting continuity of care, specifically access to medications and hospitalization, health education, hygiene promotion, & coordination with other sectors.

WHO response

EU, France, and WHO deliver emergency health supplies to support Lebanon's health sector



WHO, in collaboration with the Ministry of Public Health, received a humanitarian health shipment at Beirut's Rafic Hariri International Airport provided by the European Union, ECHO, and the Government of France to support Lebanon's health sector.

The shipment includes:

- 8 Non-Communicable Disease Kits supporting up to 80,000 people with chronic illnesses for 3 months
- 151 trauma and emergency medical supply sets
- 804 boxes of medicines and vaccines supporting up to 2,000 trauma patients and 10,000 beneficiaries
- Mental health medications, oral medicines, and renewable medical equipment
- 2 Mobile Health Units from France, each capable of treating 500 casualties

The support will strengthen emergency preparedness, ensure continuity of essential health services, and support hospitals and vulnerable communities across Lebanon.

WHO thanks the European Union, ECHO, and the Government of France for their continued solidarity and commitment to Lebanon's health sector.

Joint health sector field visit highlights emergency response gaps in shelters in the north



A joint health sector partners field visit was conducted to Meryata Complementary School shelter in the North Governorate on 20 May 2026 to monitor the multi-sectoral emergency response. The mission was attended by the Mayor of Meryata, the MoPH Rais al Maslah for North Governorate, MoSA representatives, WHO, UNICEF technical team, the Health Sector coordination team, and other health partners. Strong coordination between MoSA, MoPH, and partners was observed, with functional internal referrals. Key gaps include lack of specialized mental health services, limited ER coverage, and insufficient support for displaced Syrians. Additional challenges include high needs, economic pressures, suboptimal food assistance, and resistance to generic medicines, highlighting the need for stronger community engagement and a more comprehensive response.

WHO assesses health needs & continuity of care for displaced families in Qmatieh and Kaifoun



A WHO Lebanon team visited Qmatieh and Kaifoun to understand the health needs and continuity of services for displaced families.

In Qmatieh, a village hosting around 12,000 displaced people, a community-activity done by MSF helps people accessing essential health services, psychological support, as well as psychosocial and recreational activities for children.

At Kaifoun, a Primary Health Care centre is opening its door 24/7 to ensure people have access to services when needed.

WHO continues to support frontline partners to ensure access to essential services including medications for chronic and mental health conditions.

WHO field visits highlight integrated health and MHPSS services in PHC and shelter settings



Two field visits were conducted by WHO team in coordination with IMC and PUI, on Tuesday 19 May, with focus on highlighting the importance of integrated health and mental health services and psychosocial support services for vulnerable communities and internally displaced people.

The first visit was to Rafic Hariri Primary Health Care Center in Tarik Jdide; the second visit included a nearby shelter hosting around 1,200 displaced persons across three buildings, served by the PHC and its affiliated PSU team.

While the Rafic Hariri PHCC is already providing chronic and mental health conditions medications for nearly 1,000 patients, it was noted that the crisis constituted an important opportunity to integrate essential services and created an opportunity for early detection of noncommunicable diseases and mental health conditions.

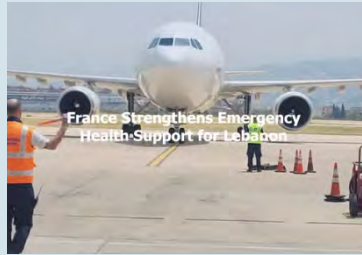
Although efforts are geared towards ensuring continuation of essential services, significant challenges remain, including limited food assistance, shortages of cleaning supplies, overcrowded conditions, and safety concerns related to smoking inside rooms.

Despite these challenges, frontline health workers and partners continue to deliver critical care and support to communities in need.

WHO response



Safe blood saves lives. With the generous support of the Government of **Japan**, WHO is strengthening 16 public hospitals across Lebanon with blood bank equipment to ensure safe blood transfusions and reinforce emergency response during times of conflict. Reliable blood, resilient hospitals, stronger health systems.



France continues to stand with Lebanon. Through the EU Humanitarian Air Bridge, France delivered critical medicines, emergency medical supplies, vaccines, and two mobile health units to strengthen emergency healthcare services across the country.



The **European Union** and WHO stand by Lebanon's Ministry of Public Health, in strengthening emergency preparedness and support for hospitals and vulnerable communities across Lebanon with medicines, vaccines, trauma supplies, and mobile health units.



WHO's response does not begin when a crisis erupts; it begins years earlier through investing in preparedness, strengthening health systems, and supporting countries to save lives when emergencies strike. That is why WHO's response to the current crisis in Lebanon did not start on 2 March 2026. It began more than 1,500 days earlier through continuous support to strengthen PHEOC — because preparedness saves lives.

WHO response VIDEOS



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.



Seventy-ninth World Health Assembly updates

[79th World Health Assembly adopts resolution to strengthen pharmacovigilance](#)

The Seventy-ninth World Health Assembly adopted a resolution to advance smart and efficient pharmacovigilance as a core element of strong and resilient health systems, marking a significant step towards expanding access to safe and effective medicines and vaccines worldwide and advancing progress towards universal health coverage.

[World Health Assembly endorses resolution on precision medicine](#)

At the Seventy-ninth World Health Assembly, Member States endorsed a new resolution on Precision medicine: a path towards targeted, personalized and equitable care, taking an important step towards advancing precision medicine as part of efforts to strengthen equitable, effective and sustainable health systems.

[Healing the future: Traditional medicine drives innovation, equity and planetary health at WHA79](#)

Traditional medicine (TM) was highlighted as a critical lever for global health transformation at the 79th World Health Assembly (WHA79), with a series of high-level convenings exploring its growing role in advancing equity, sustainability and innovation.

[Seventy-ninth World Health Assembly honours global champions advancing primary health care](#)

the World Health Assembly recognized individuals and institutions whose contributions to global health have gone far beyond the call of duty.

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

- Dr Abdinasir Abubakar
WHO Lebanon Representative
abubakara@who.int
- Hala Habib
WHO Lebanon Communication Officer
hhabib@who.int