



Influenza in (PAKISTAN)

6th Mena Influenza Stakeholders Meeting
6-7 April 2017, Prague



COUNTRY OBJECTIVES FOR THE UPCOMING 3 YEARS

To collect more retrospective data to evaluate seasonal variation pattern
Prospective control surveillance data at airport
To create awareness on international guidelines at GPs level
Surveillance of seasonal disease burden
Plan to enter in the Adult Market like Diabetes COPD and IHD with the updated guidelines

EPIDEMIOLOGICAL UPDATE

1. Start and end dates of influenza epidemics: start: DD/MM/YEAR - end: DD/MM/YEAR: Seasonal influenza viruses from September to March with a peak in December
2. Circulating viruses: 1066 (72%) influenza virus A, 423 (28%) Influenza virus B, 2% seasonal H1N1, 16% H3N2 and 82% H1N1 pdm09
3. Subtypes / lineages: A/H1N1, A/H3N2, B/Yamagata, B/Victoria
4. Severity of the epidemics:
 - a) Morbidity (No of reported cases):
 - b) Mortality (No of reported deaths):

KEY ACTION PLAN COMPONENTS / ACTIONS

Actions	Progress achieved since the beginning of MENA INS?	2017 - 2018 Future actions to attain (to be completed in September)	Challenges
1) SURVEILLANCE			To collect the data on a flu burden of diabetic and COPD patient
2) VACCINATION		Starting campaigns like RTDs or SPPs during flu season, i.e september till march through the materials provided by our regional team like slide deck	Raise the vaccination coverage among diabetic, COPD and IHD patients
3) SOCIAL MOBILIZATION / EDUCATION AWARENESS		To educate the GPs through our leading KOLs across Pakistan so they will communicate our message of the importance of vaccination to our local population	More than 60% of population live in rural areas where difficult to arrange scientific sessions
4) ADVOCACY & POLICY			