



TUNISIA

Pr. Amine SLIM

6th Mena Influenza Stakeholders Meeting

Organized by Fondation Mérieux

Prague, Czech Republic
6-7 April 2017

COUNTRY OBJECTIVES FOR THE UPCOMING 3 YEARS

- Maintain reference lab activities
- Increase SARI Surveillance with GIHSN partnership
- Analyse Burden of Flu annually as from 2016
- Priorize Flu Vaccination in the national plan to reduce antimicrobial resistance (2017-2020)

COUNTRY EPIDEMIOLOGICAL UPDATE

1. Start epidemic in january 2017 until fall february
2. 60% A/H3 and 40% B strains
3. A/H3 similar to last year, B mutated and not been well covered by the vaccine
4. Severity of the epidemics:
 - Morbidity: about 220,000 consultants for ILI to date
 - Mortality : 3 SARI cases reported death (none vaccinated, on 241 hospitalised cases for SARI)
 - Data available on:
<http://www.santetunisie.rns.tn/images/docs/anis/bulletinepidemtrimestrielgrippesaison2016-2017.pdf>

NIC Results of Flu Survey

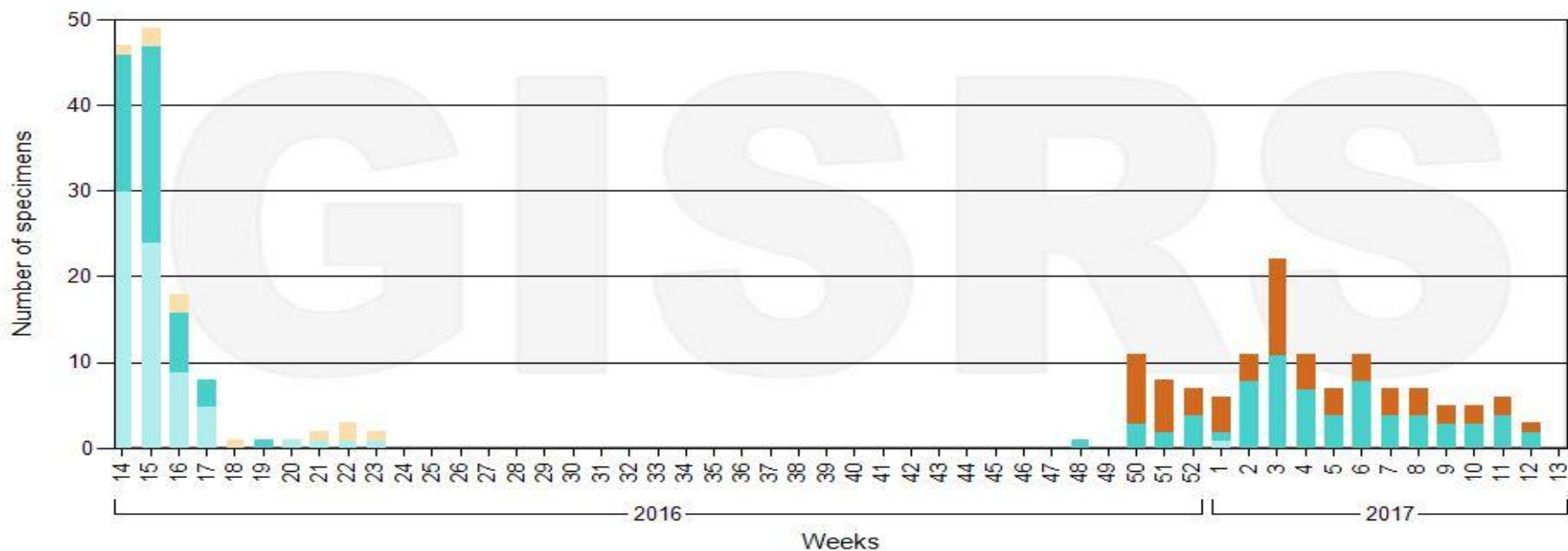


Influenza Laboratory Surveillance Information
by the Global Influenza Surveillance and Response System (GISRS)

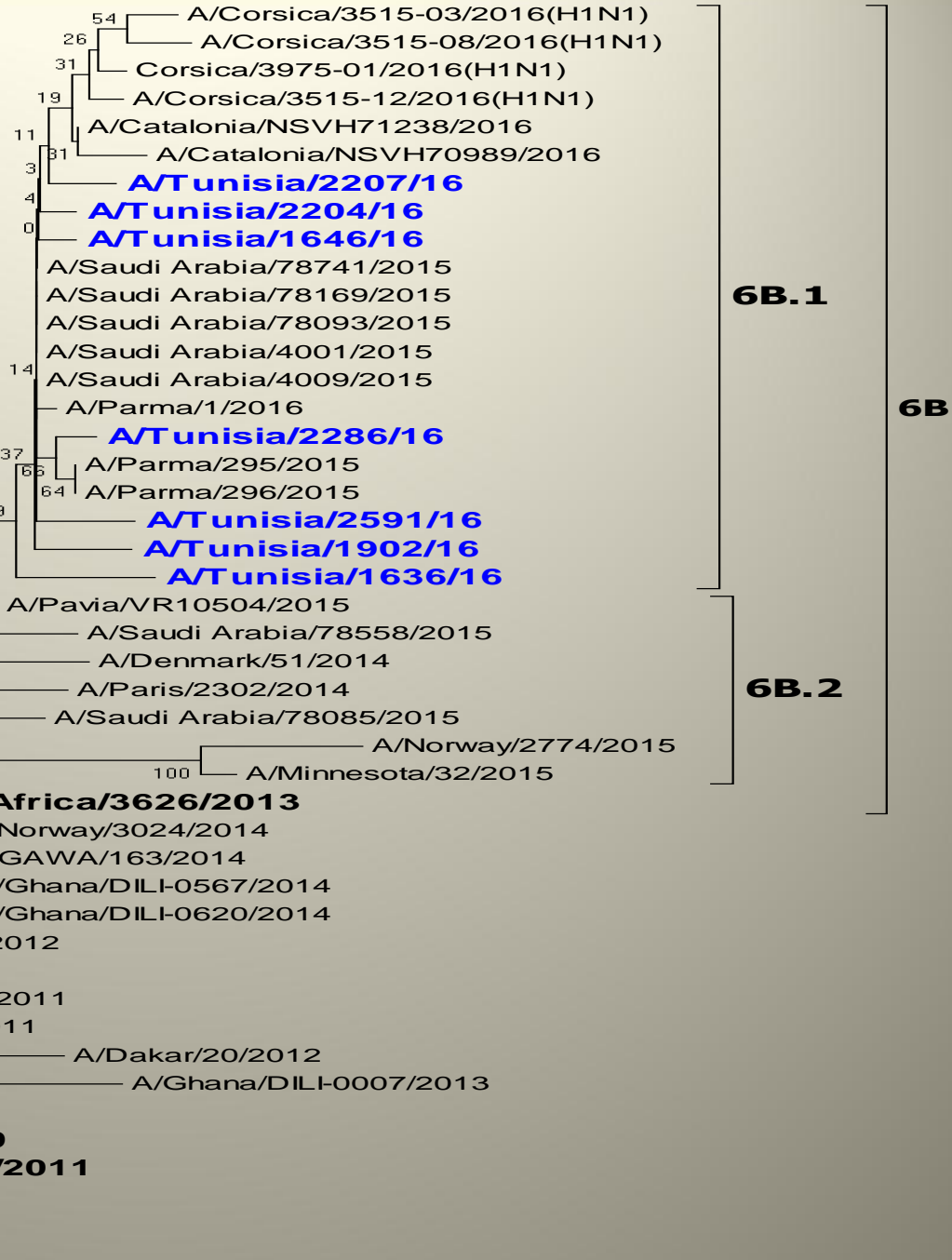
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Tunisia

Number of specimens positive for influenza by subtype



Our 2016 A/H1N1 strains matches better with new A/Michigan/2015 proposed vaccine strain for 2017-2018 season



0,002

Avian Flu alert in Lake Ichkeul, North Tunisia



- With incoming of Flu migrating birds in november (high level rate mortality) fall november 2016
- Positive Duck dead for A/H5 by RT-PCR in national veterinary Lab confirmed by IEO as A/H5N8 clade 4 (Russian strain origin)
- Quarantine decreted for the lake and survey of possible human/poultry cases
- No human case of A/H5 Flu to date
- High cooperation with Algerian veterinaries in this field

ACTION PLAN COMPONENTS UPDATE

COMPONENTS / Actions	Progress achieved since the beginning of MENA INS?	2017 – 2018- Future actions to attain (to be completed in September)	Challenges
SURVEILLANCE	<ul style="list-style-type: none"> -success to maintain lab activities - Partnership with GIHSN started in 2017 	<ul style="list-style-type: none"> -Regional lab (sousse and sfax) functional from october 2017 -More accurate Burden of the Flu expected 	<ul style="list-style-type: none"> -advocacy for budget
VACCINATION	<ul style="list-style-type: none"> -success to maintain vaccination budget but no increase to date (still 300,000 doses) 	<ul style="list-style-type: none"> - Advocacy for prioritize flu vaccine in antimicrobial resistance plan 	<ul style="list-style-type: none"> -advocacy for budget
SOCIAL MOBILIZATION / EDUCATION / AWARENESS	<ul style="list-style-type: none"> -continue press radio TV mobilization for vaccination of high risk groups 	<ul style="list-style-type: none"> - Vaccinate children from 2-5 years as potential reservoir of transmission to elderly 	<ul style="list-style-type: none"> -advocacy to pediatrics
ADVOCACY & POLICY	<ul style="list-style-type: none"> - Try to introduce flu as obligatory vaccine in certain High risk groups 	<ul style="list-style-type: none"> - Sentitize Ministry of finances 	<ul style="list-style-type: none"> -advocacy for budget

Other activities enhancing Prevention and Flu Vaccine (1)



Other activities enhancing Prevention and Flu Vaccine (2)

Brainstorming with RKI and
Tunisian partners for enhancing
Biosafety/Biosafety rules and
Media communication on
pandemic events to be
implemented 2017-2019 in the
cooperative program with GIZ



Other activities enhancing Prevention and Flu Vaccine (3)

Kick-Off national
planing meeting for
lowering antimicrobial
resistance , Tunis,
17th march 2017



Detailed plan for enhancing S. Pneumoniae, Pertussis and Flu vaccination (2017-2020)

- Part of the strategic axe 3 « prevention, hygiene and vaccination »
- For Flu it asks to promote vaccine of high risk groups and SARI potential at risk persons
- Actors will be MOH, Social assurances and Industrial companies through medical supervisors
- Resulting : Lower consumption of antibiotics for ILI , lowering incidence of SARI cases

Proposition de tableau à adopter pour le PLAN D'ACTION NATIONAL DE LUTTE CONTRE L'ANTIBIORESISTANCE

Axe stratégique 3: "Prévention, Hygiène et Vaccination"

Actions	N°	Acteur	Déclinaison	Source de financement (montant de l'activité)	Résultats attendus	Indicateurs de suivi
2-Réduire l'utilisation des antibiotiques dans les infections non bactériennes de 25% en 3 ans						
<p>Action 1 : Promouvoir la vaccination contre la grippe des personnes à risques de surinfection et de formes sévères (personnes âgées et /ou porteur d'affection respiratoires chronique ou d'affection cardiaque ou métabolique, obèses, grossesse...)</p> <ul style="list-style-type: none"> *Sensibilisation des professionnels *Sensibilisation du grand public *Sensibilisation des employeurs et des caisses sécurité sociale *Disponibilité du vaccin pour les indications retenues 		DSSB Médecine de travail CNAM	2018 -2019- 2020	MSP/ Employeurs CNAM *Sensibilisation intégrée aux autres axes *cout du vaccin : 100 000 Dinars /an	*réduction de l'usage des AB pour les affections grippales et pseudo grippales *baisse de l'incidence des formes sévères de grippe compliquée	*incidence des formes sévères de la grippe (réseau national de surveillance de la grippe) *baisse de la proportion des ordonnances avec AB pour grippe sévère
<p>Action 2 : Promouvoir l'usage des tests rapides d'orientation Diagnostic pour détecter les angines nécessitant un TTT antibiotique (rapid test ou "strepto test"):</p> <ul style="list-style-type: none"> *Disponibilité des tests *Sensibilisation des professionnels 		DSSB Faculté et Société savantes	2018 -2019- 2020	MSP/CNAM/Malade privé *cout du Test : 10 à 15 Dinars /test+ Sensibilisation intégrée aux axes	Eviter de traiter une angine virale aux AB et donner un AB approprié aux angines à streptocoque B hémolytique	% des consultations de médecine générale et de pédiatrie ou le test rapide est disponible % des praticiens privés utilisant le test rapide

CONCLUSIONS / HIGHLIGHTS

- Economic situation in Tunisia cannot allow several tasks to be achieved in time
- Introducing Flu Vaccine in High risk groups as obligatory through the national program of antimicrobial resistance can help for budgeting