



National Institutes of Health - Pakistan
(Centers for Disease Control-(CDC-NIH)

Phone: (92-051) 9255237 Fax: (92-051)9255099

National Focal Point for IHR



No: F.1-22/Advisory/CDC/2024

Islamabad, 5th January 2024

Travel Advisory for the Prevention of Influenza and other respiratory infections

Purpose:

Influenza like illness (ILI) is caused by Influenza, Respiratory Syncytial virus and other flu viruses. Flu viruses are continuously changing/mutating with a likelihood of emergence of new flu viruses every year. This makes Influenza a difficult disease to control with varying extent of spread, timing, severity, and length of the season. However, an upsurge of cases in Pakistan is usually been observed in winter season. The flu cases increase as temperature falls during December to February. The ILI cases are observed to be higher in Islamabad specifically due to various reasons ranging from weather instability (dry cold) which causes low precipitation and increased tourism to northern and from northern areas via Islamabad despite satisfactory surveillance of influenza.

The objective of this advisory is to alert and sensitize all the travelers regarding the ILI situation in country specially Islamabad. Also, to alert and sensitize points of entry and healthcare workers to be vigilant in the detection of any suspected case who is travelling to/ from any area where the ILI cases have been reported and to strengthen and improve the level of preparedness for prevention, control and management of Influenza like illness.

The information about the illness is summarized below:

Clinical Picture:

Seasonal influenza viruses can cause mild to severe illness, particularly in the high-risk individuals. Viruses spread from person to person through sneezing, coughing or touching contaminated surfaces. The symptoms start to develop within 48 hours to 10 days of possible exposure and include fever, cough, sore throat, runny or stuffy nose, muscle or body aches, headache, and fatigue. The illness may deteriorate among high risk groups including pregnant women, children under 5 years of age, older people, individuals with chronic medical conditions (such as chronic cardiac, pulmonary, renal, metabolic, neurodevelopmental, liver or hematologic diseases) and individuals with immunosuppressive conditions/treatments (such as HIV, receiving chemotherapy or steroids, or malignancy).

Prevention & Treatment:

ILI are mostly self-limiting and will recover from on their own or may requiring supportive treatment only. Hospitalization is only required when the disease complicates especially in high risk groups. Therefore, People with severe symptoms or other medical conditions should seek medical care.

Prevention Measures for incoming Travelers:

Travelers are encouraged to report, if they have signs/ symptoms of ILI at the time of travel or within 10 days of travel. In this situation traveler should:

- Inform the Airport health staff immediately
- Seek medical care immediately from designated hospitals and inform about complete

travel history and signs/ symptoms.

- Avoid contacts with others.
- Cover mouth and nose with face mask.
- Cough or sneeze into a disposable tissue or the inner crook of your elbow in order to avoid contamination of your hands.
- Wash hands often with soap and water for at least 20 seconds. Use hand sanitizer if soap and water are not available.
- Follow recommendation by International Air Transport Association (IATA) with regard to managing suspected communicable disease on board an air craft.

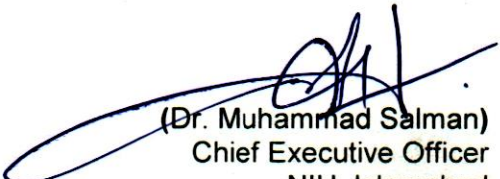
Vaccination: It is the most effective way to prevent infection and severe outcomes caused by influenza viruses particularly in high risk groups. NIH recommends seasonal influenza vaccination as per WHO recommendations for pregnant women (highest priority), children aged 6-59 months, elderly people, individuals with chronic medical conditions and health-care workers as per WHO guidelines.

For 2023-2024, the WHO recommends quadrivalent vaccines for use in the northern hemisphere influenza season contain the following:

- *an A/Wisconsin/588/2019 (H1N1)pdm09-like virus*
- *an A/Darwin/6/2021 (H3N2)-like virus and*
- *a B/Austria/1359417/2021 (B/Victoria lineage)-like virus*
- *an A/Sydney/5/2021 (H1N1)pdm09-like virus*

For any further assistance in this context, the center for Disease control (CDC), NIH (051 – 9255237 and Fax No. 051-9255575) may be contacted.

This advisory may please be widely distributed among all concerned


(Dr. Muhammad Salman)
Chief Executive Officer
NIH, Islamabad

Distribution overleaf

Distribution List:

1. Secretary, Health Department, Government of the Punjab, Lahore
2. Secretary, Health Department, Government of Sindh, Karachi
3. Secretary, Health Department, Government of KPK, Peshawar
4. Secretary, Health Department, Government of Balochistan, Quetta
5. Secretary, Health Department, Government of AJK, Muzaffarabad
6. Secretary, Health Department, Government of Gilgit-Baltistan, Gilgit
7. Chief Executive Officer, Islamabad Healthcare Regulatory Authority, Islamabad
8. Chief Executive Officer, Punjab Healthcare Commission, Lahore
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22. Executive Director, CDA Capital Hospital, Islamabad
23. Executive Director, Federal Government TB Hospital, Rawalpindi
24. Executive Director, National Institute of Rehabilitation Medicine (NIRM), Islamabad
25. Director General Health Services, Capital Development Authority, Islamabad
26. Director General, PAEC Hospital, Islamabad
27. Director General, KRL Hospital, Islamabad
28. Director General, NESCOM Hospital, Islamabad
29. Director, Border Health Services-Pakistan, Islamabad
30. District Health Officer, ICT, Islamabad
31. Director, Nuclear Oncology & Radiotherapy Institute (NORI), Islamabad
32. Commandant, PAF Hospital, Islamabad
33. Commandant, Naval Complex Hospital, (PNS Hafeez), Islamabad
34. Medical Superintendent, Social Security Hospital, Islamabad
35. Director, Federal General Hospital, Park Road, Islamabad
36. Executive Director, Shifa International Hospital, Islamabad
37. Executive Director, Qaid-e-Azam International Hospital, Islamabad
38. Executive Director, Maroof International Hospital, Islamabad
39. Commandant, Combined Military Hospital (CMH), Rawalpindi
40. Commandant, Military Hospital (MH), Rawalpindi
41. Medical Superintendent, Cantonment General Hospital, Rawalpindi
42. Medical Superintendent, District Headquarter Hospital, Rawalpindi
43. Medical Superintendent, Fauji Foundation Hospital, Rawalpindi
44. Medical Superintendent, Holy Family Teaching Hospital, Rawalpindi
45. Medical Superintendent, Benazir Bhutto Hospital, Rawalpindi
46. Medical Superintendent, WAPDA Hospital, Rawalpindi
47. Medical Superintendent, Railway Hospital, Rawalpindi
48. Medical Superintendent, IHITC, Islamabad
49. In-charge, Federal Disease Surveillance Unit (FDSRU), NIH Islamabad
50. Officer In-charge, Provincial Disease Surveillance Unit (PDSRU) at Provincial Health Directorates, Lahore, Hyderabad, Peshawar, Quetta, Gilgit and Muzaffarabad
51. Deputy Commissioners with the request to direct all concerned departments at district level.
52. Provincial Coordinator, EPI, Punjab, Sindh, KPK, Balochistan, AJK & GB

C.c:

1. Chief Secretary, Govt of Punjab, Sindh, KPK, Balochistan, GB and AJK.
2. Surgeon General Pakistan Army, GHQ Rawalpindi
3. Chief Commissioner, ICT Administration Islamabad
4. WHO Country Representative, Islamabad
5. SPS to Federal Minister of Health, M/o NHR&C, Islamabad
6. SPS to Secretary, M/o NHR&C, Islamabad
7. PS to Director General Health, M/o NHR&C, Islamabad