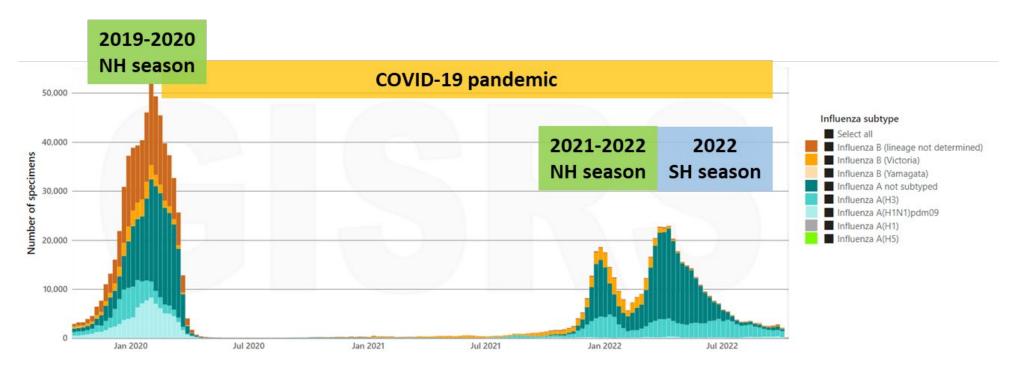
Preparing for the Upcoming Influenza Season & Expanding the Global Influenza Surveillance and Response System (GISRS)

Dr Wenqing Zhang

Global Influenza Programme, WHO 27th October 2022



Seasonal influenza - epidemics coming back

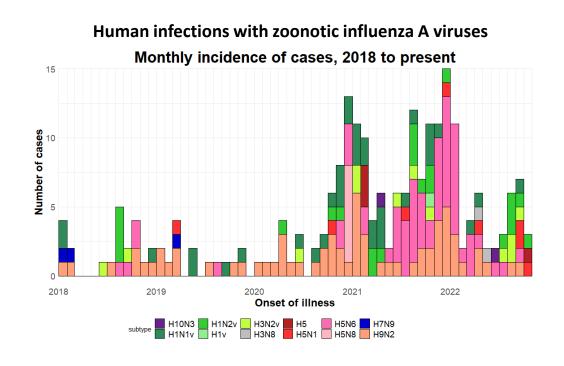


Observations from the Southern Hemisphere 2022 season:

- Influenza epidemics varied in in timing and severity among countries, also in comparison with previous seasons
- Overall influenza activity picked up again often to levels of pre-COVID pandemic (or even higher)



Avian influenza – continuous human infections



Throughout the COVID-19 pandemic:

- Zoonotic influenza infections continue to be detected
- Avian influenza viruses evolved and spread
 - China, first human infections with A(H3N8) and A(H10N3) subtypes
 - Russian Federation, first human infections with A(H5N8) subtype
 - UK and USA, human infections of A(H5N1) subtype reported for the first-time

Signals of the threat of an influenza pandemic persisting throughout the COVID-19 pandemic. Countries should never let down alert to such threat and **strengthen preparedness** for an influenza pandemic



Protecting from influenza: Influenza vaccines

- Influenza viruses constantly evolving, the composition of vaccines needs to be updated periodically in order for the vaccines to be effective
- WHO issued recommendations* on the composition of influenza vaccine for use in the 2023 Southern Hemisphere season on 23rd September 2022
- Safe and effective vaccines are available and have been used for more than 60 years
- Immunity from vaccination wanes over time so annual vaccination is recommended**
 - High risk groups for vaccination (not in priority order): healthcare workers, people with underlying medical conditions, older adults, pregnant women and children
 - Inactivated influenza vaccine can be coadministered with any dose of COVID-19 vaccine using the contralateral limb for injection

Healthcare workers





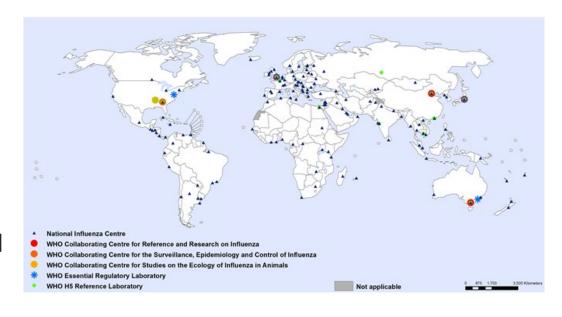
^{**} https://www.who.int/news/item/01-06-2022-who-issues-updated-influenza-vaccines-position-paper



GISRS: a global network to protect the world against influenza threats

Global Influenza Surveillance and Response System (GISRS)

- The global foundation for influenza surveillance, preparedness and response
- Global public health model for 70 years
- Currently 158 institutions in 124 Member States
- Institutionalized & functioning capacity in countries
 - Laboratory & disease surveillance integrated
 - Response mechanisms exercised very season in epidemics
 - Enormous commitment from *Member States* and support from international *agencies & partners*











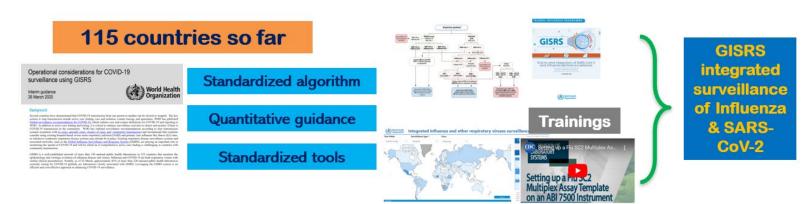






GISRS scope is systematically expanding

- Since 1952: seasonal influenza
- Since 1997: + avian influenza, variant/swine influenza, pandemic influenza
 - New subtypes, new genetic & antigenic variants
- Since 2015: ++ RSV
- Since 2020: +++ SARS-CoV-2

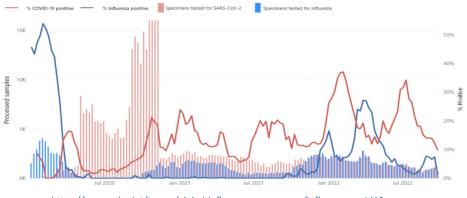




GISRS integrated surveillance*

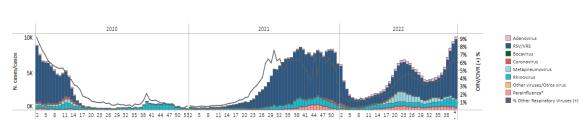
- monitoring co-circulations of respiratory viruses

 Monitor relative (co-)circulations of types/subtypes, lineages/sub-lineages of viruses locally and their relationship to global and regional patterns



https://www.who.int/teams/global-influenza-programme/influenza-covid19

- Describe the epidemic seasonality of influenza and SARS-CoV-2 where relevant
- Monitor evolution of the viruses and their prevalence globally



http://ais.paho.org/phip/viz/ed_flu.asp

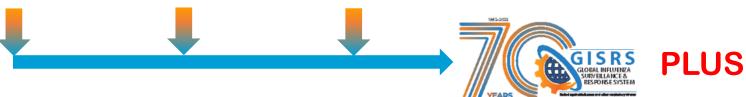
- Establish **baseline** levels of activity for illness and severe disease to evaluate the **relative impact & severity**
- Detect signals of unusual activity associated with known or novel viruses

Early detection of cases for isolation, clinical diagnostics, contact tracing, quarantine and rapid control of clusters and outbreaks are <u>not</u> the primary objectives of sentinel surveillance systems



Complexities arising from COVID-19 pandemic

- Increasing global interest in pan-respiratory or all hazards preparedness and response
 - Multiple actors are looking into integrated approaches to epidemic /pandemic threat of respiratory viruses
- The development of <u>parallel systems</u> for surveillance compete for country focus and finances with GISRS, **can undermine** the GISRS effectiveness
- Countries need coordinated and sustainable approaches to surveil respiratory viruses of public health significance





Broad engagement to inform the GISRS enhancement

- Scoping exercise for an expanded & enhanced GISRS
 - GISRS questionnaire to National Influenza Centres, WHO Collaborating Centres, and epidemiologic focal points (Jul - August 2021)
 - Decision WHA73(14) questionnaire to Member States, industry, Civil Societies Organizations (Jul Sept 2021)
 - Discussions with Directors of WHO Collaborating Centres and Essential Regulatory Laboratories (Aug 2021, Feb & Sept 2022)
 - Discussions with GISRS (Oct 2021, Sept 2022)
- Member State feedback during EB150 (Jan 2022) and WHA75 (May 2022)
 - Secretariat report on influenza preparedness



Member States feedback

- Broad support for GISRS Plus from MS across all six WHO regions
 - o *Integrated surveillance* should be further explored
 - Influenza surveillance and collaborations should not be negatively impacted
 - Influenza surveillance can benefit from capacities built during COVID-19
 - Inclusion of ORVs should have clear public health objectives
- Access and benefit of non-influenza virus sharing must be thought through transparently
- Specific request for additional information on technical, financial and administrative implications of GISRS Plus



Goal of GISRS Plus

- An efficient global system of integrated surveillance and response to influenza and other priority respiratory viruses with epidemic or pandemic potential.
- Priority respiratory viruses are defined as those that:
 - are a known pandemic threat or are an emerging novel threat of pandemic potential, Or
 - are a known epidemic threat where surveillance can directly inform prevention & control

And

can be integrated effectively and seamlessly into the existing GISRS operation

Primary focus: capacity-building at national and regional/global levels for the integrated surveillance of influenza and other respiratory viruses through the existing GISRS system (infrastructure, workforce, trust and confidence)



Objectives of GISRS Plus

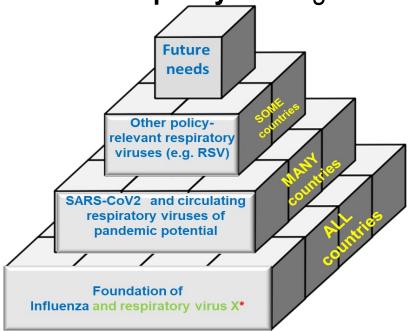
- Integrate sentinel surveillance & monitoring of influenza, SARS-CoV-2, and other priority respiratory viruses as defined at national, regional, and global levels
- Build, expand, and enhance national capacities & capabilities of end-to-end integrated surveillance
- 3. Build, expand, and enhance relevant regional & global expertise and capacities
- Ensure an effective global coordination mechanism to support, facilitate and strengthen integrated surveillance and risk assessment; and
- Strengthen policy, strategy, advocacy and communications efforts to further engage GISRS in the WHO long-term programmatic goals to the fullest extent



Modular approach & Operation model

- Modular approach:
 - Maintain the influenza foundation
 - Country priorities inform actions
 - Quality over Quantity

Broad capacity building



- GISRS Operation Model
 - Broad connections & engagement with specialized entities



Initial feedback on administrative and financial implications

- Survey conducted on 27 Sept 2022 among National Influenza Centres (NICs) attending a global GISRS meeting
- 22 NICs representing AFRO (7), AMRO/PAHO (1), EMRO (3), EURO (6), SEARO (2), and WPRO (3)
 - Sources of funding: ~ 60% internal, 40% external
 - Status of integrated surveillance:
 - 22/22 (100%) incorporated **SARS-CoV-2** into GISRS sentinel surveillance
 - 20/22 (91%) incorporated **RSV** into GISRS sentinel surveillance
- New costs related to integrated surveillance

Cost category	No increase	0-25% increase	26-50% increase	50-75% increase	>75% increase
Human resources in the lab	9	3	7	1	1
Lab equipment & supplies	1	8	6	2	4
Shipping	8	9	1	2	1



Two Task Forces to guide consultative process

- Define formal consultative process
- Identify and address key technical and policy questions
- Guide development of strategic action plan and country pilots

	Technical Task Force	Policy Task Force
Sample questions	 What is the current landscape of GISRS capacities & capabilities? How does GISRS Plus formally integrate epi aspects of the network? How can countries strategically select additional respiratory viruses? How should we update case definitions? 	 How to ensure influenza foundation of GISRS not impacted negatively? What additional advisory functions are needed for GISRS Plus? What tools are needed for NICs to monitor administrative and financial impacts of integrated surveillance?
Potential sub-task forces	 Pathogen selection & prioritization Laboratory considerations Epidemiological considerations 	 Coordination and operation structure Finance & sustainability Monitoring & evaluation



GISRS Plus development plan

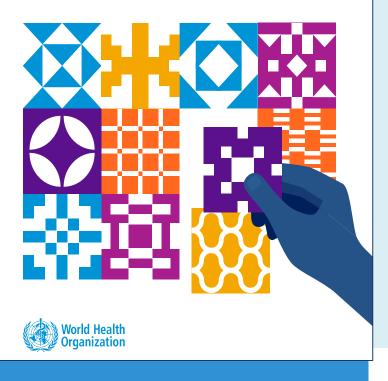
Milestones	Target Date	
Recruit policy and technical task forces	Q4 2022/Q1 2023	
First draft of strategic action plan developed	Q1 2023	
Global and regional consultations held to inform development of strategic action plan	Q2 2023	
Member State briefing	Q2 2023	
Public comment period	Q3 2023	
Strategic action plan piloted in countries	Q3 2023	
Finalize strategic action plan based on pilots	Q4 2023	

Meanwhile continue ongoing GISRS end-to-end integrated surveillance of influenza and SARS-CoV-2, as well as RSV, and associated capacity building



"Crafting the mosaic":

A framework for resilient surveillance for respiratory viruses of pandemic potential



A framework for resilient surveillance for respiratory viruses of pandemic potential

Dr Joshua Mott



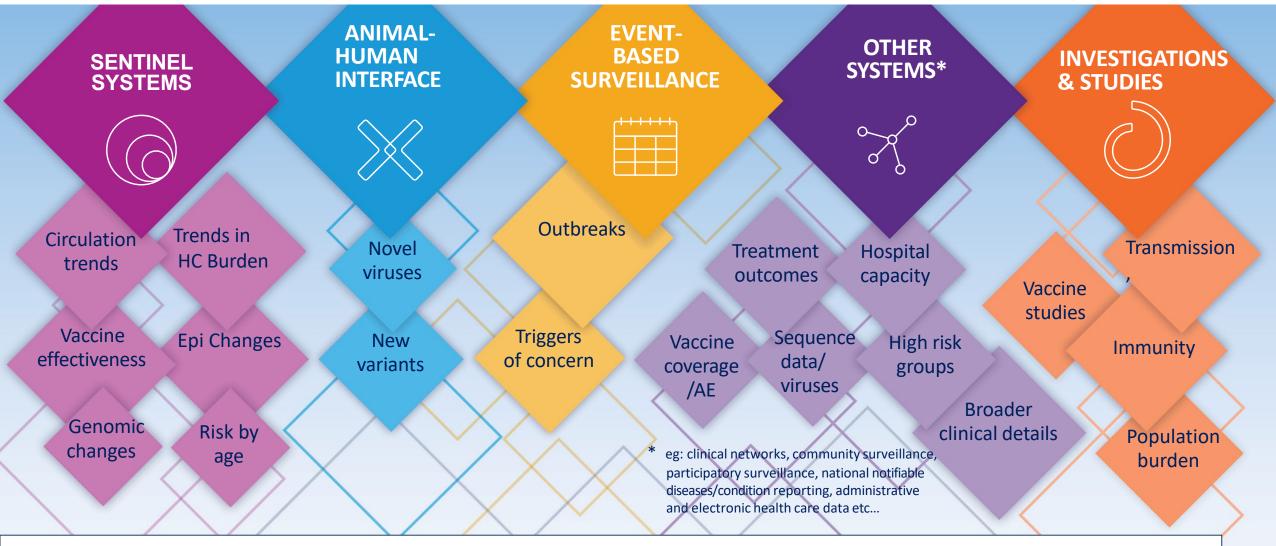
SYSTEMS Trends in Circulation HC burden trends Vaccine **Epi Changes** effectiveness Genomic Risk by changes age

 Sentinel systems are one component of many essential surveillance systems.

 Global need for a strategic framework to guide countries on how respiratory viruses of pandemic potential should be resiliently detected and monitored using coordinated surveillance systems

No surveillance system can be "everything to everyone"





Data ≠ Knowledge

→ each system must be targeted to high priority local objectives /decisions, and, fit-for-purpose to be resilient



Engaging countries and regions: flexible approach

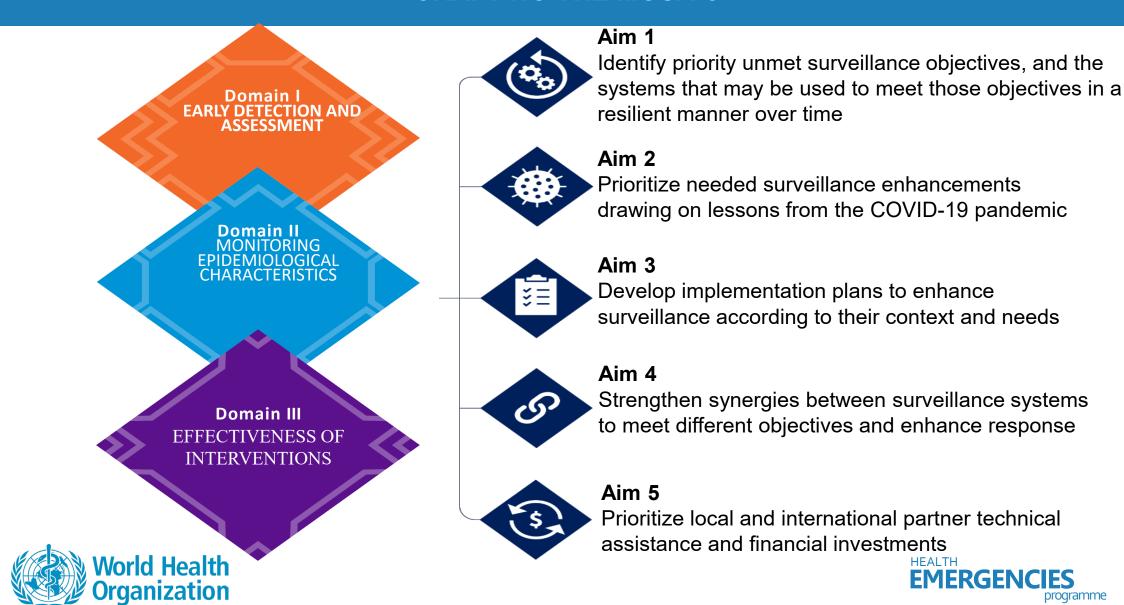
- ✓ Alignment with other surveillance guidance, strategies and frameworks
- ✓ Country inputs gathered using regional surveys, online country-level surveys, focused country discussions, regional country consultations
- ✓ Consolidated results then served as the foundation for a WHO global consultation in May 2022, with attendees from countries, WHO, and external partner and donor organizations
- ✓ Inputs on draft documents

✓ Public comments period on WHO web

WHO web	WHO REGIONS						
	AFR	EMR	EUR	AMR	SEAR	WPR	
Country-level survey	X		Х		Х	Х	
Regional office survey	Х	X	Х	Х	Χ	Х	
Country focused discussions	Х		Х				
Country consultations		X	Χ	Х	Х		



A framework for resilient surveillance for respiratory viruses of pandemic potential: "CRAFTING THE MOSAIC"





Domain I: EARLY DETECTION AND ASSESSMENT OF AN EMERGING RESPIRATORY VIRUS NOT YET WIDELY IN CIRCULATION AMONG HUMANS

- Detect and investigate emerging respiratory disease outbreaks of pandemic potential
- Assess transmission, risk factors for transmission, and the extent of infection from an emerging virus
- Describe clinical presentation and risk factors for severe outcomes associated with an emerging virus



Domain II:
MONITOR
EPIDEMIOLOGICAL
CHARACTERISTICS
OF RESPIRATORY
VIRUSES WITH
SUSTAINED

CIRCULATION IN

POPULATIONS

Domain III:

MONITOR THE

EFFECTIVENES OF

HUMAN HEALTH

INTERVENTIONS

HUMAN

- Monitor trends in illness, severe illness, and the relative circulation of viruses
- Monitor virologic characteristics of circulating viruses (including phenotypic and genomic characteristics)
- Monitor virus transmissibility and associated risk factors
- Monitor clinical characteristics and management, and associated risk factors
- Monitor high-risk settings and vulnerable populations groups
- Monitor health care system coping abilities



 Monitor the impact of non-medical interventions in the population, including public health and social measures (PHSM)

- Provide candidate vaccine viruses for vaccine composition, production, and risk assessment
- Monitor vaccine coverage, effectiveness, impact, cost-effectiveness
- Monitor the effectiveness of current antivirals
- Monitor adverse events to vaccines and therapeutics
- Monitor effectiveness of clinical care pathways

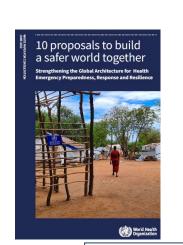
- Is there an emerging respiratory of virus of pandemic potential in my country?
- Does this emerging virus spread easily in humans?
- How severe is the clinical presentation of this emerging virus?
- Who are the high-risk groups for infection and severe complications?
- Are we moving into an epidemic period or season for virus circulation?
- Is this season or a "bad season" compared to others?
- Are my health care systems coping? What are the genotypic and phenotypic characteristics of circulating viruses?
- What are the clinical and epidemiologic characteristics associated with infection? Have they changed?
- What is the impact in high-risk groups and settings?
- Are current vaccines and medications effective?
- How can we improve our clinical care?
- Is the vaccine well-matched to viruses in our country?
- Have PHSM affected the transmission of viruses in our country?
- What is the uptake of current interventions and are there adverse events?

Mosaic framework: build on existing systems- enhance connections

does not supersede other guidance, but provides context for their use

Regional Guidance





Global architecture: HEPR "Collaborative Surveillance"

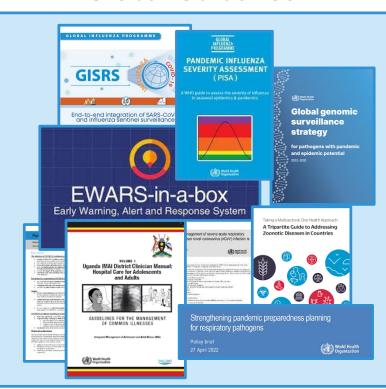


"Crafting the mosaic":

A framework for resilient surveillance for respiratory viruses of pandemic potential

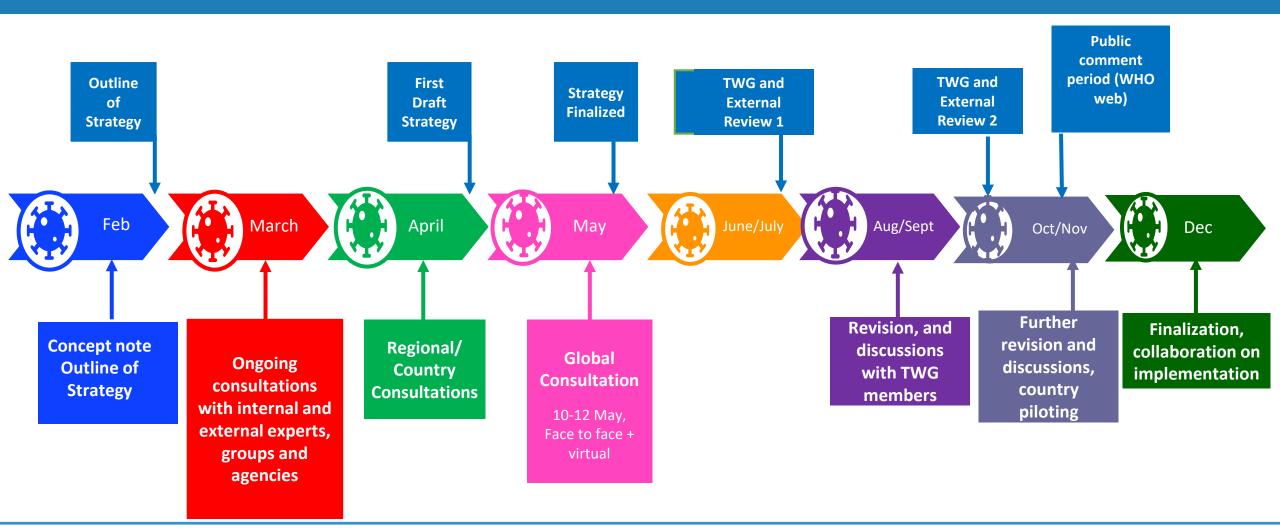


Global Guidance





Timeline for framework development





Thank You

