

THE PHILIPPINES



OVERVIEW

The Research Institute for Tropical Medicine (RITM) has completed 10 years of support through a capacity building and sustainability cooperative agreement with the U.S. Centers for Disease Control and Prevention (CDC). As part of their sustainability plan, the grantee successfully institutionalized their influenza surveillance and laboratory program with the Philippines Department of Health (DOH) to ensure the continued existence of their influenza surveillance capacity. Currently, the grantee is receiving support under a maintenance cooperative agreement which provides limited support to augment the Philippines National Influenza Center's (PNIC) regular surveillance activities, further improve operations to support the country's compliance with the International Health Regulations (2005), and contribute to regional and global health security efforts.

SURVEILLANCE

Through the collaboration between the PNIC and DOH, surveillance for severe acute respiratory infections (SARI) is being planned for implementation in the second half of 2015. In order to cover the severe end of the spectrum of influenza disease, six sentinel sites in government tertiary hospitals, including RITM, have been identified. Guidelines have been drafted and are now being revised following a workshop for the SARI manual of operations. Moreover, two years after downsizing, the PNIC influenza-like illness (ILI) sentinel surveillance network will undergo review and right-sizing to determine the most appropriate number and locations of sentinel sites.

SURVEILLANCE ACTIVITIES

- Reported 13,823 ILI cases in 33 sentinel sites throughout the country (September 2013–September 2014). Nasopharyngeal and/or oropharyngeal swabs were obtained from 2,827 (20.5%) of these cases.
- Discovered an increase in ILI activity during the second half of the year around the end of June or July.
- Completed the Influenza Burden of Disease study in 2015, with findings to be published soon.

HIGHLIGHTS

- Obtained official recognition of RITM as the Philippine National Influenza Center (PNIC) through an administrative order released by the Department of Health.
- Conducted a project closeout meeting to discuss the 10-year accomplishments of influenza surveillance and plan surveillance activities after CDC funding ends.
- Established the capacity to test for influenza viruses and screen for MERS-CoV at five subnational laboratories.

LABORATORY

PNIC continued to perform testing following its revised algorithm of RT-PCR-based screening followed by virus isolation, producing high quality results that are uploaded within two weeks to the WHO FluNet.

Isolates that are not able to be subtyped and representative isolates for quality assurance were sent to the WHO Collaborating Center in Melbourne.

PNIC also undertook the task of building the capacity and quality assurance of the subnational laboratories as a component of the country's surge capacity for screening influenza and other respiratory viruses.

LABORATORY ACTIVITIES

- Continued to provide proficiency testing for the five subnational laboratories.
- Conducted a laboratory assessment in collaboration with CDC and the Association of Public Health Laboratories (APHL) in November 2014.
- Identified an influenza virus positivity rate of 23% which was 80% of all respiratory viruses detected.
- Identified high virus detection rates in weeks 39 to 42 in 2013 (47%–58%) and weeks 19 and 22 in May 2014 which coincided with the peaks in ILI case reporting.



PREPAREDNESS

CDC support has provided the framework for the continuous development of the Philippines' national preparedness plan.

PREPAREDNESS ACTIVITIES

- Increased laboratory surge capacity by identifying and training first and second tier staff capable of performing RT-PCR to identify influenza viruses and who are expected to respond during outbreaks and pandemics.
- Assisted during the response to the first confirmed case of MERS-CoV in the country.

TRAINING

- Attended the 7th NIC Meeting in Beijing, China, which highlighted the need for establishing SARI surveillance.
- Retrained first and second tier staff for surge capacity.
- Conducted the First Training of Sub-National Laboratories on Emerging and Re-Emerging Diseases in November 2013.

INFLUENZA VACCINE ACTIVITIES

No influenza vaccine activities occurred during this time.

