Plenary Meeting Report from:  
Middle East Regional Consortium on Infectious Disease Surveillance  

March 6- 8 2003,  
Brussels, Belgium  

Summary

The Middle East Consortium on Infectious Disease Surveillance (MECIDS) held its plenary meeting on the March 6-8,2003,in Brussels. MECIDS is a consortium of scientists. It's goals are to develop and harmonize regional methods for detection, reporting, processing, and collecting data on disease outbreaks, whether natural or caused by a biological attack. Participants include Egyptian, Israeli, Jordanian, and Palestinian governmental and nongovernmental health professionals. Search for Common Ground, which convened the meeting, founded MECIDS and will provide staff support to it.

The Brussels meeting was productive despite the bleak political situation. In addition to Palestinians, Jordanians, and Israelis, there were participants from the World Health Organization and the United States-based Cooperative Monitoring Center at Sandia National Laboratories. The Nuclear Threat Initiative, the Compton Foundation, and the Government of the Netherlands provided support the meeting. Several people commented on how surreal it was to be speaking about common concerns during a week when violence claimed many lives in Gaza, Haifa, and elsewhere.

Highlights of the meeting included:

- New professionals relationships: The director of Jordan's Center for Disease Control met the director of Israel's Director of Public Health for the first time. They can now call upon each other in times of peace as well as times of crisis. A young Palestinian researcher got her first opportunity to attend an international meeting combining science and conflict resolution.

- Vision and organization: MECIDS renewed its vision as a consortium of scientists working to improve infectious disease surveillance in the Middle East, and participants agreed on a sustainable structure that will enable cooperation to continue into the future.

Detailed work program: Israeli, Palestinian, and Jordanian researchers agreed on the design and schedule of a multi-national project to establish a surveillance system that can be used to detect outbreaks of enteric disease in the countries and identify possible common causes of cases such as food-borne exposure. The project will monitor diarrhea diseases in East Jerusalem, West Jerusalem, and a Jordanian city over a six-month period. Participants also agreed to create a week-long epidemiology training course for Middle Easterners, which would enable professionals at all levels to build relationships while improving the human capacity of each nation to conduct disease surveillance.

New Professional Relationship:

"Us being together is probably the most important thing we can do here".  
... Israeli Public Health Official

The twin aims of MECIDS are to reduce the region's vulnerability to disease outbreaks, whether natural or caused by a biological weapon, and to provide ways for health professionals to build trust and confidence across national lines. This meeting deepened existing relationships and
created new ones. It provided the first opportunity for the head of Jordan's Center for Disease Control to meet his Israeli counterpart.

All the participants remarked on the presence of a Palestinian researcher who had recently graduated college. Especially since the resurgence of violence that beginning in September 2000, opportunities for a new generation of Palestinians and Israelis to meet each other have been scarce. As one senior participant said, "We are merely facilitating the process for the new generation of young scientists from the region. Let us hope we will live up to their expectations."

**Vision and Organization:**

"We have to institutionalize our work in the future. The total sum will create better security for all of us. Security is no longer defined in purely military terms. People's expectations and welfare can't be separated"

— Jordanian Retired General

MECIDS renewed its vision as a consortium of scientists working to improve infectious disease surveillance in the Middle East, and participants agreed on a sustainable structure that will enable cooperation to continue into the future. It will comprise a steering committee of professionals from the Middle East, a secretariat and staff support provided by Search for Common Ground, and working groups, which will be formed to carry out specific projects. MECIDS will routinely consult with scientific advisors from the U.S., Europe and international organizations.

Participants voted on what projects to pursue in addition to the food-borne disease project that is already under way. They agreed upon a multinational epidemiological training course and a project on using Geographic Information Systems (GIS) to track diseases, and they discussed building communications networks to support the consortium.

Finally, they discussed the importance of building disease surveillance capacity in each of the participating nations. They noted that Israel, Jordan and Egypt have a responsibility to help their Palestinian colleagues build compatible system

**Detailed Work Program:**

**Food-Borne Disease:**

At the initial MECIDS MEETING in November, regional researchers agreed to pursue a project on food-borne diseases. This project will address a common health concern, will build capacity to detect disease outbreaks, and will exercise the systems that would be used to respond to an outbreak caused by a biological weapon. At this meeting, the participants elaborated on the design and schedule of the project.

This multinational project will establish a surveillance system that can be used to detect outbreaks of enteric disease and identify possible common causes of cases such as food-borne exposure. It will study enteric diseases in local populations in East Jerusalem, West Jerusalem, and a city in Jordan over the course of six months. It will include three components:

- Sentinel clinics: In order to identify pathogenic agents which cause diarrheal disease in the study population, clinics in each city will be asked to send stool samples of all patients presenting with diarrheal disease to laboratory for testing and to fill out a questionnaire. The samples will be tested for shigella, salmonella, and other enteric
diseases, to include the serotype and genotype of the disease strain. Data will be compared across populations.

- **Hospitals**: In order to develop a fuller picture of the causes of diarrheal disease in the study population, researchers will register all cases of diarrheal disease that present to hospitals in the study area. They will register the addresses and other demographic data of patients and the results of many laboratory tests.

- **Population Prevalence Study**: In order to identify the prevalence of diarrheal disease in the study population, researchers will conduct interview at household in each city at the beginning and end of the study period to find out if members of the household suffered from diarrheal disease in the preceding two weeks.

Israeli, Jordanian & Palestinian researchers will share data once a month during the study, and they will communicate with each other immediately if their data indicate an unusual disease outbreak.

**Epidemiology training course**:

Participants agreed to develop a one week international course in interventional field epidemiology for the Middle East/Mediterranean region. Designed for public health professionals involved in the control of infectious disease, the course would offered annually. It would not only build up human capacity for detecting natural and malicious outbreaks, but it would also enable, Palestinians, Egyptian, Jordanian, and Israeli professionals to meet each other.

The director of the World Health Organization Surveillance and Response Division's Lyon Office, which manage integrated capacity development programs for laboratory specialist, said that the WHO could support the course. In addition, Search for Common Ground could offer training in interpersonal communication for course participants to help them get the most out of their interaction with people from other nations.

**Communication Networks**:

Participants discussed the importance of building communication networks at national, regional, and international levels. One option would be secure website to share information among MECIDS members. The participants from Sandia National Laboratories said her organization could work with MECIDS to develop the concept and design for such a site, and the WHO representative said his organization could link it into other disease surveillance networks. A small group of participants agreed to develop this proposal further.