



AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #05-2023

No. 05/(29 Jan to 04 Feb)

Disease Outbreaks	AWD (May 22 - Feb 23)	ARI (Oct 22 - Feb 23)	COVID-19 (Feb 20 - Feb 23)	Pertussis (Jun 22 - Feb 23)	Measles (Jan 22 - Feb 23)	Dengue fever (Jan 22 - Feb 23)
Cumulative Cases (Data from 591 (96.4%) out of 613 surveillance sentinel sites)	254,456	3,556,573	208,676	1,082	80,455	1,304
Death "CFR (%)	91 (0.04)	1,131 (0.03)	7,893 (3.8)	15 (1.4)	400 (0.5)	2 (0.15)

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May 2022 to 04 Feb 2023)

Table 1: summary of the AWD with Dehydration outbreak in the last eight weeks (11 Dec 2022 – 04 Feb 2023)

Indicators	W-50	W-51	W-52	W01	W02	W03	W04	W05	Epi-curve
Suspected cases	3,488	2,829	2,789	3,160	2,427	2,022	* 2,012	2,266	
Deaths	1	1	0	0	2	1	0	1	
CFR (%)	0.03	0.04	0.00	0.00	0.08	0.05	0.00	0.04	
% Change cases	-5.7	-18.9	-1.4	13.3	-23.2	-16.7	-0.5	12.6	

*The number of suspected AWD cases with dehydration was corrected for the epi-week 4-2023 that was reported less due to delayed data entry.

- During week 05-2023, a total of 2,266 new AWD cases with dehydration and 1 new death were reported which indicates 12.6% increase in the number of cases, compared to the previous week.
- The newly reported death was male under 5 years of age from Kabul province.
- Out of 254,456 cases, 140,835 (55.3%) were children be-

low 5 years and 127,059 (49.9%) were females.

- A total of 2,647 samples were tested for AWD.
- The first few cases of AWD with dehydration were reported to the National Disease Surveillance and Response System (NDSR), MoPH and WHO on 04 May 2022 from Kandahar city of Kandahar province and spread to 176 districts in all 34 provinces.

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AWD with dehydration attack rate per 1,000 population by province

As of 04 Feb 2023

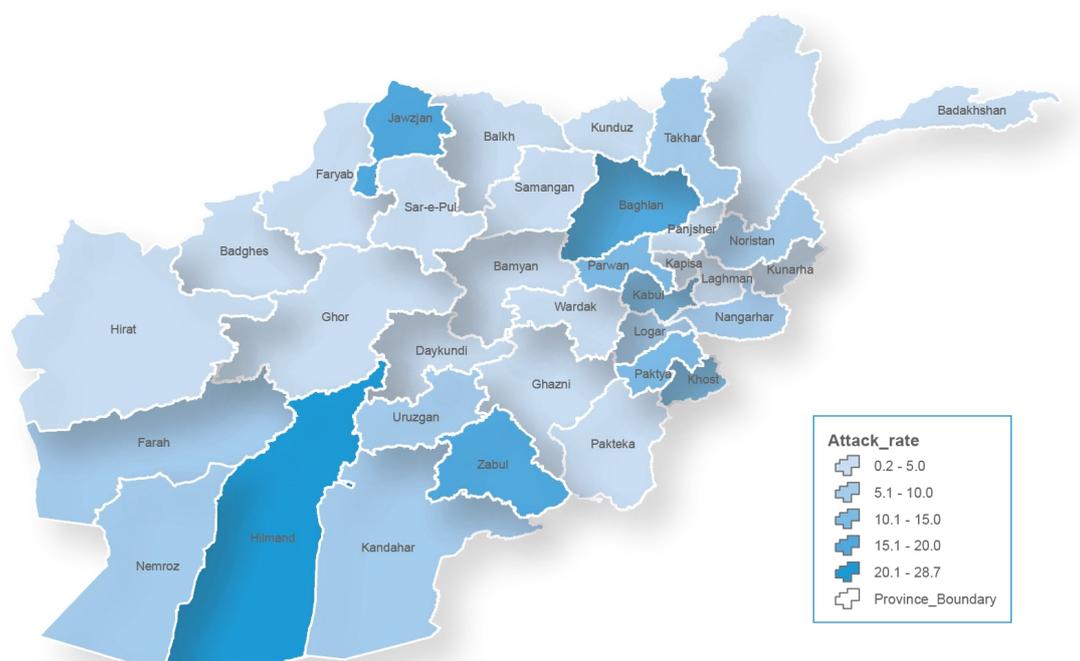


Figure 1. AWD with dehydration attack rate per 1,000 population by province in Afghanistan, May 2022 - Feb 2023

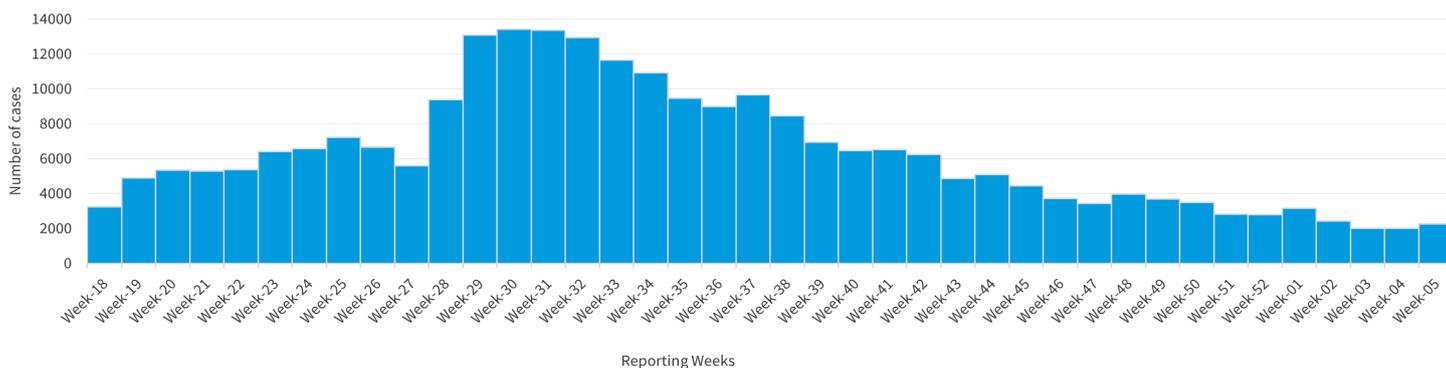


Figure 2. Epidemiological curve of AWD with dehydration cases in Afghanistan May 2022-Feb 2023 (N=254,456)

The epi curve shows gradual decline in the number of AWD with dehydration cases since week-32 2022, this decline could be explained by seasonal change towards winter and partially impact of response to AWD outbreak with improved WASH activities in the affected provinces.

Response to the AWD Outbreak

Leadership and Coordination

- Series of meetings have been conducted between health and WASH cluster partners, and the AWD preparedness and response plan will be revised and updated for 2023.
- Emergency and Preparedness Response Committees (EPR) are active at the provincial level.

Surveillance

- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.
- A total of 836 community health supervisors (CHSs) and medical officers have been trained on procedures of event base surveillance (EBS) in 6 provinces.
- Supervisory visits have been conducted in different provinces to strengthen early detection and timely response to AWD outbreaks.

Case Management

- Since the beginning of the outbreak in May 2022, a total of 1,681 HCWs have been trained on AWD case management in 34 provinces.

Laboratory and Supplies

- Since the beginning of the outbreak, a total 34 AWD investigation and 34 RDT kits were supplied to all 34 provinces.

- For supporting of the AWD case management, 5 central AWD case management kits were distributed to Paktia, Paktika, Ghazni, Nuristan and Kunduz provinces (One kit/province).
- Overall, since the beginning of the outbreak between May 2022- Jan 2023, more than 500 AWD case management kits and more than 1,000 investigation kits (Cary Bliars & RDTs) were distributed to all outbreak affected areas.

WASH and RCCE

During the past 5 weeks, the following responses were given:

- A total of 110 drums of chlorine powder (each drum of 50kg) were distributed to health facilities in 7 provinces (Faryab, Samangan, Takhar, Sari Pul, Jawzjan, Baghlan and Kunduz) for the surface disinfection and cleaning purpose.
- More than 11,500 individuals were provided hygiene kits and soap along with hygiene promotion education in outbreak affected areas of Balkh and Kandahar provinces. This brings the total number of residents received hygiene kits and soap to 79,694 in outbreak affected areas in 9 provinces.
- Clean water has been provided to more than 68,000 individuals by chlorination of 2,618 wells in 8 provinces.
- Safe water has been provided to more than 3,000 individuals by rehabilitations of water supply system in Baghlan, Faryab and Helmand provinces.
- Sanitation and hygiene facilities have been provided to more than 8,000 individuals in 10 provinces by emer-

Acute Respiratory Infection (ARI) (01 Oct 2022 to 04 Feb 2023)

3.5M
Total Cases

1,131
Total Deaths

261
Influenza
sample tested

46
Influenza
lab confirmed cases

17.6%
Influenza test
positivity ratio

Table 2: summary of the acute respiratory infection outbreak in the last eight weeks (11 Dec 2022 – 04 Feb 2023)

Indicators	W-50	W-51	W-52	W-01	W-02	W-03	W-04	W-05	Epi-curve
Suspected cases	228,085	235,165	235,561	247,244	213,476	225,249	231,087	219,397	
Deaths	72	69	66	78	100	128	112	83	
CFR (%)	0.03	0.03	0.03	0.03	0.05	0.06	0.05	0.04	
% Change cases	4.8	3.1	0.2	5.0	-13.7	5.5	2.6	-5.1	

- Case definition of ARI: Acute onset of cough, cold, coryza (runny nose), pharyngitis, laryngitis, bronchitis, or bronchiolitis with or without fever, Influenza-Like Illness (ILI), and pneumonia including severe acute respiratory illness (SARI) and suspected COVID-19.
- During week 05-2023, a total of 219,397 new ARI cases and 83 new deaths were reported which shows stabilization in the number of cases and 25.9% decrease in the number deaths, compared to the previous week.
- Since Oct 2022, out of the total 3,556,573 ARI cases, representing 10.9% of the total population of Afghanistan, 1,606,002 (45.2%) were children below 5 years of age and 1,846,695 (51.9%) were females.

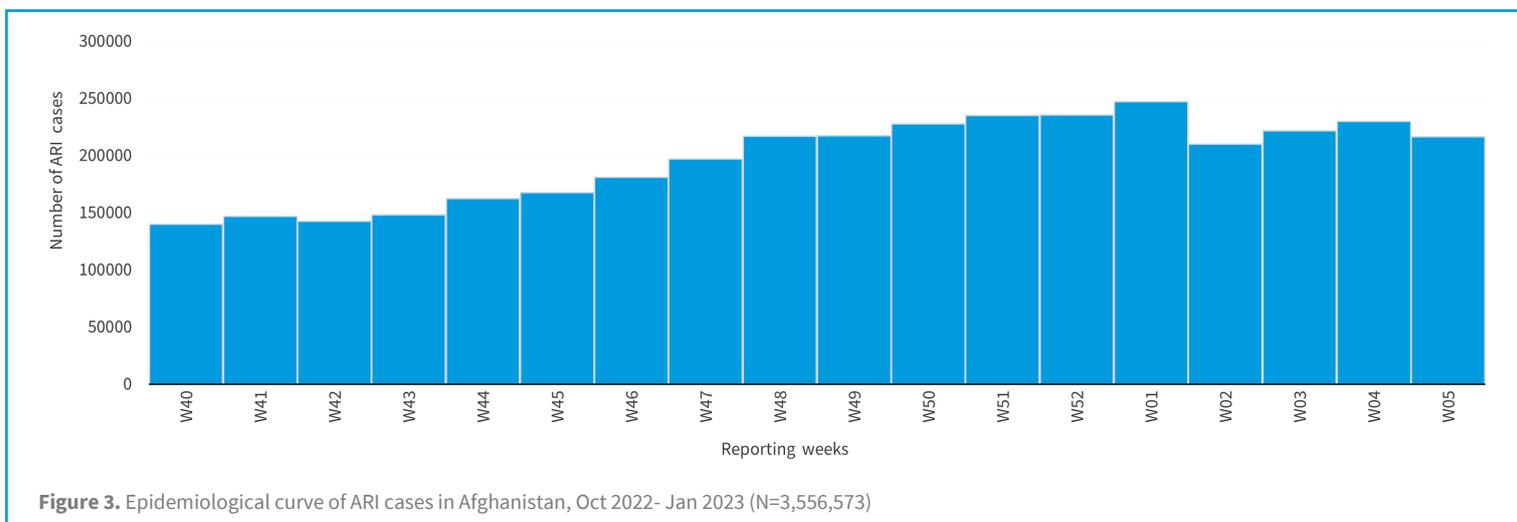


Figure 3. Epidemiological curve of ARI cases in Afghanistan, Oct 2022- Jan 2023 (N=3,556,573)

Figure 3. shows the gradual increase in the weekly number of ARI until epi-week 1-2023 which might be due to multiple factors such as seasonal changes, relatively harsh winter, poor socio-economic condition and susceptibility to the infectious pathogen.

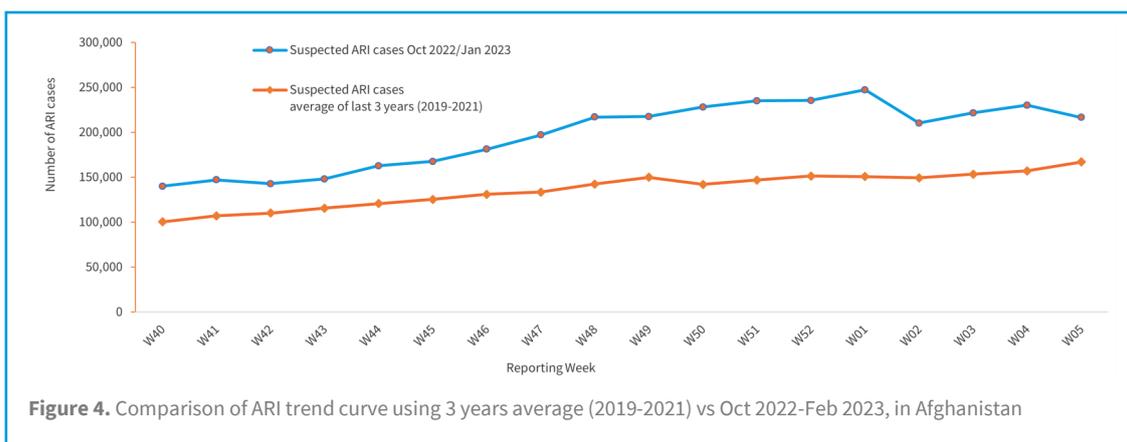


Figure 4. Comparison of ARI trend curve using 3 years average (2019-2021) vs Oct 2022-Feb 2023, in Afghanistan

Figure 4 shows gradual increase in the number of ARI cases in 2022 compared to the average of the last three years. This increase in 2022 could be explained by multiple factors such as lack of immunity to some pathogens after stopping mask use after 3 years of COVID-19, increased access to the health services, and expansion of NDSR sentinel sites.



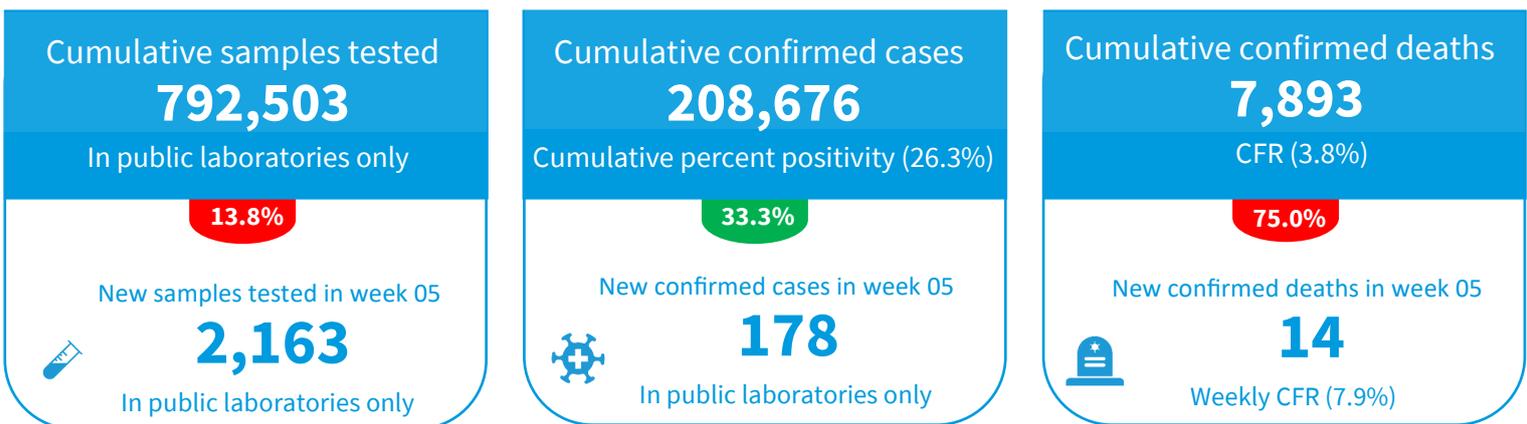
Response to Acute Respiratory Infection outbreak

- The provincial NDSR team through provincial EPR committee is leading the outbreak response activities.
- Surveillance is conducted by the SSTs and case management is done by the BPHS and EPHS implementing partners. Samples are collected and shipped to CPHL/NIC for testing.
- During the last week, 14 kits of PED-SAM INJECTABLE (medicines needed to treat sick children at hospital level in critical condition), 46 kits of PED-SAM ORAL (medicine needed to treat sick children at hospital level who can take oral medication), 75 kits of IEHK Basic (essential medicines and consumables), 360 boxes of amoxicillin 500mg (100 capsule per box) and 600 boxes of ampoule gentamicin (10 ampoules per box) were supplied to 8 provinces (Kandahar, Badakhshan, Balkh , Kunduz, Herat, Bamyan, Paktya and Nangarhar) for the management of the ARI. Additionally, 378 kits (medicines, reagents, equipment etc.) has been provided for ARI management to five provinces (Badakhshan, Nuristan, Dailkundi, Jawzjan and Ghazni).
- A total of 70 health care workers (HCW) from Kabul specialty hospital have been trained on the case management of ARI. Approximately, 1,250 HCW will be trained in all 34 provinces across the country in coming weeks.
- As part of preparedness and response activities to infectious disease outbreaks during the winter season, required supplies has been prepositioned in all 34 provinces across the country.

The following response activities has been conducted in Badakhshan province for ARI outbreak:

- The emergency preparedness and response committee (EPR) meeting was conducted at the Badakhshan provincial public health directorate with the Local health authorities, partners and WHO to coordinate the response to ARI outbreak on-the ground.
- A team from the NDSR was deployed to Wakhan district on 28 January 2023 and conducted the following activities:
 - Line listing a total of 33 ARI cases from Wakhan district/ villages near to Pamir e Kalan village.
 - 6 samples were collected from ARI cases for the diagnosis of influenza which were shipped to national Influenza center (NIC).
 - 15 samples were collected from suspected COVID-19 cases and shipped to central public health laboratory (CPHL) for the case confirmation.
 - Health education sessions were conducted to 150 residents of Wakhan district (near to Pamir e Kalan village) on the prevention, control and health seeking measures of ARI.
 - Medical staff of Khandooq, Qala-e-Panj and Kapee-kot health facilities were provided on the job training on ARI case detection, reporting and management.
 - WHO has delivered and prepositioned medicines and medical supplies at the district level as part of the winterization preparedness and these have been deployed to Pamir Kalan village to support the case management, as well.

COVID-19 (24 Feb 2020 – 04 Feb 2023)



Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights



Total population: 39,269,174 (Ref: UN estimation, AFG CMYP 2022)

Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (11 Dec 2022 - 04 Feb 2023)

Indicators	W50-22	W51-22	W52-22	W01	W02	W03	W04	W05	Epi-curve
Samples tested (in public Labs)	4,192	3,979	2,834	1,891	1,954	2,365	1,901	2,163	
Confirmed cases	372	365	204	194	174	240	267	178	
Percent positivity (%)	8.87	9.17	7.20	10.26	8.90	10.15	14.05	8.23	
Confirmed deaths	6.0	5.0	1.0	3.0	3.0	15.0	8.0	14.0	
CFR (%)	1.6	1.4	0.5	1.5	1.7	6.3	3.0	7.9	

- Since the beginning of the pandemic in Feb 2020, a total of 792,503 samples have been tested for COVID-19 through public laboratories.
- In week 05-2023, 2,163 samples were tested in public labs, of which 178 samples were positive for COVID-19 (test positivity of 8.2%) and 14 new deaths were reported. This represents a 33.3% decrease and 75.0% increase in the number of newly reported cases and deaths, respectively, compared to the previous week.

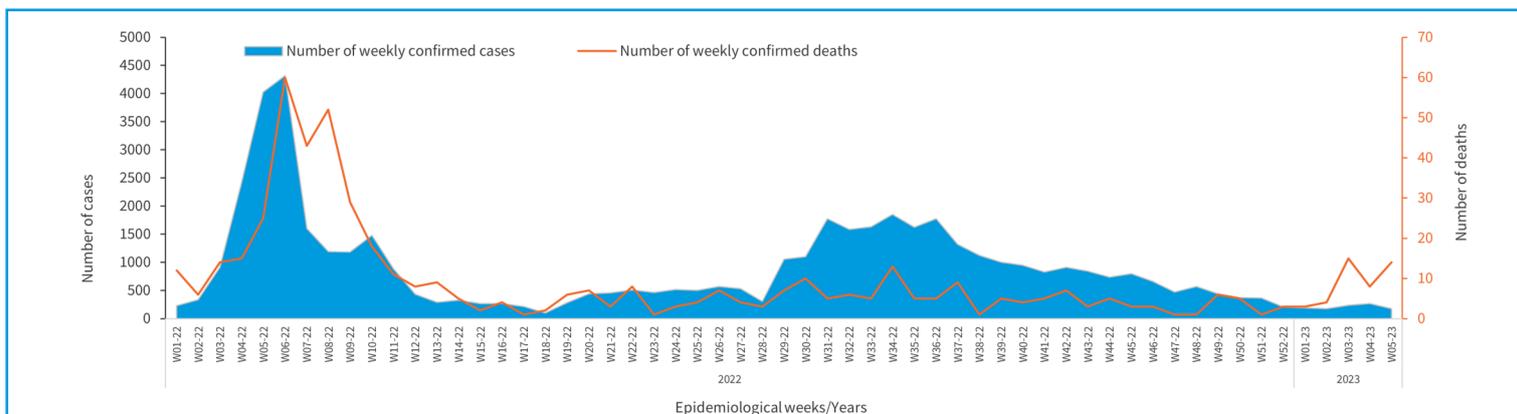


Figure 5. Epidemiological curve of confirmed COVID-19 cases and deaths in Afghanistan Jan 2022 - Feb 2023

Figure 5 shows a decline trend of confirmed cases and deaths since week-36 of 2022, with stabilization of the number of cases at very low level during the past 5 weeks, while deaths showed slight increase since during the past 3 weeks with average of 12 deaths/week. This pattern could be explained by reduction in the number of samples tested (suspected patients are not testing), reduced susceptibility of general population to COVID-19 and impact of nationwide vaccination campaigns.

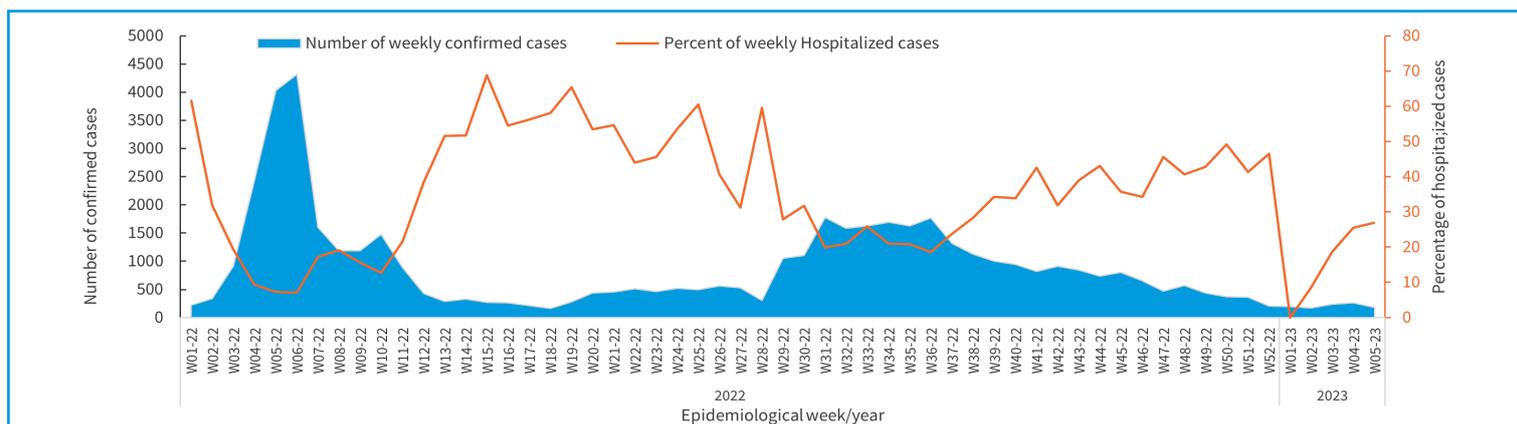


Figure 6. Weekly proportion of hospitalized cases out of new COVID-19 confirmed cases in Afghanistan as of Jan 2022- Feb 2023

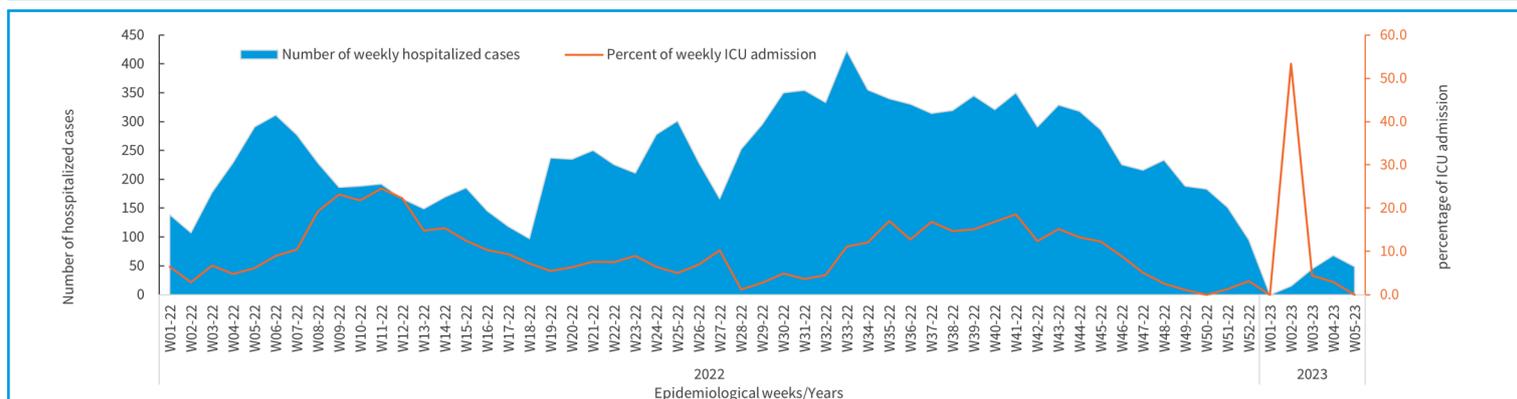


Figure 7. Weekly proportion of ICU admissions out of newly hospitalized COVID-19 cases in Afghanistan as of Jan 2022- Feb 2023

Suspected Pertussis Outbreaks (Jan 2022 – Feb 2023)

1,082
Total Cases

15
Total Deaths

Table 4: summary of the suspected pertussis outbreak in the last eight weeks (11 Dec 2022 – 04 Feb 2023)

Indicators	W-50	W-51	W-52	W01	W02	W03	W04	W05	Epi-curve
Suspected cases	30	26	21	38	16	13	9	13	
Deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
% Change cases	-11.8	-13.3	-19.2	81.0	-57.9	-18.8	-30.8	44.4	

- During week 05-2023, a total of 13 new suspected pertussis cases were reported from Nuristan (6), Zabul (5) and Kabul (2) provinces, this brings the total number of suspected cases to 1,082 from 20 provinces.
- Out of the total 1,082 cases, 753 (69.6%) were children below 5 years and 517 (47.8%) were females.

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Geographical Distribution of Suspected Pertussis Cases by Province
As of 04 Feb 2023

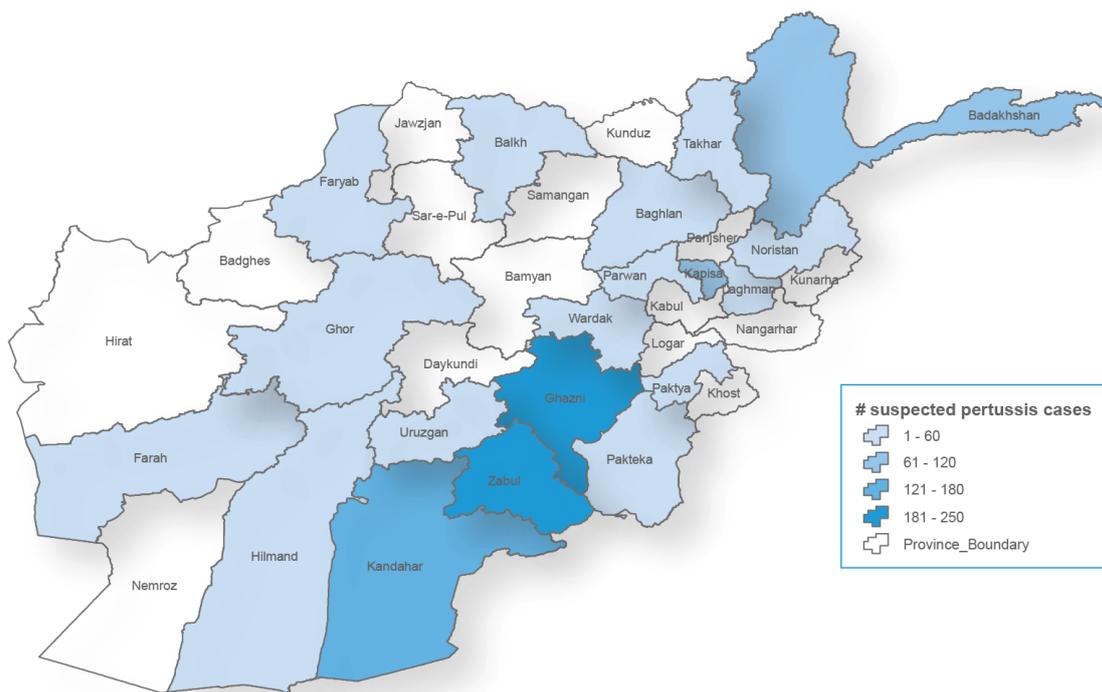


Figure 8. Geographical distribution of suspected pertussis cases in Afghanistan Jan 2022 - Feb 2023 (N=1,082)

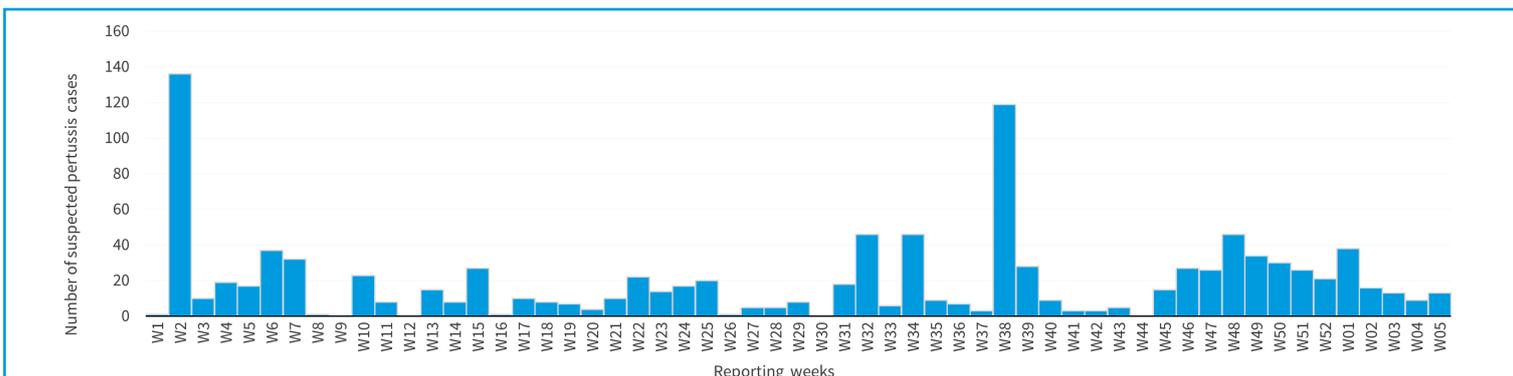


Figure 9. Epidemiological curve of suspected Pertussis cases in Afghanistan, Jan 2022 to Feb 2023 (N=1,082)

Measles Outbreak (01 Jan 2022 to 04 Feb 2023)

80,455
Total Cases

397
Total Deaths

9,950
Sample tested

5,840
Lab confirmed cases

58.7%
Test positivity ratio

Table 5: summary of the suspected measles outbreak in the last eight weeks (11 Dec 2022 – 04 Feb 2023)

Indicators	W-50	W-51	W-52	W-01	W-02	W-03	W-04	W-05	Epi-curve
Suspected cases	699	608	685	588	633	625	665	717	
Deaths	1	2	1	3	2	0	3	3	
CFR (%)	0.14	0.33	0.15	0.51	0.32	0.00	0.45	0.42	
% Change cases	23.1	-13.0	12.7	-14.2	7.7	-1.3	6.4	7.8	

- During epidemiological week 05-2023, a total of 717 new cases and 3 new deaths were reported which indicates 7.8% increase in the number of new suspected cases and stabilization in the number of deaths, compared to last week.
- The 3 newly reported deaths all were males and children under 5 years of age from Helmand (2) and Nangarhar (1) provinces.
- Out of the total 80,455 cases, 62,079 (77.2%) were children under 5 years of age and 39,203 (48.7%) were females.

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Suspected measles attack per 1,000 population of by province
As of 04 Feb 2023



Figure 10. Suspected measles attack rate per 1,000 population of by province in Afghanistan Jan 2022- Feb 2023 (N=80,455)

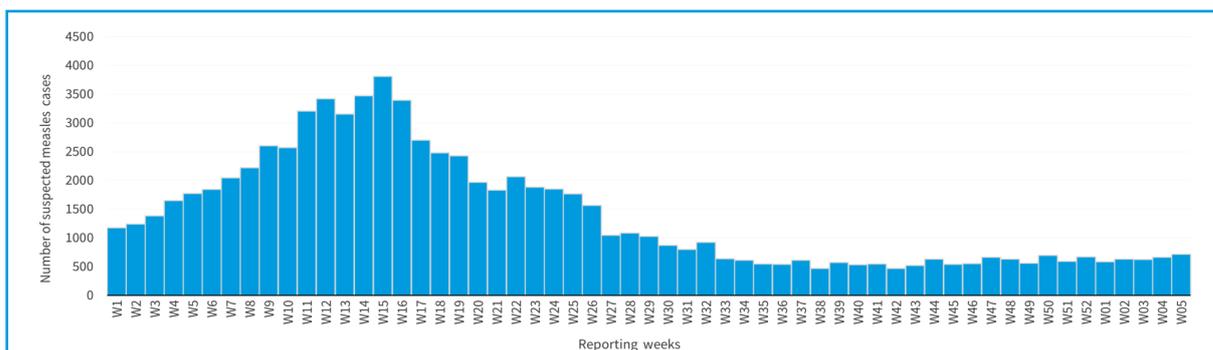


Figure 11. Epidemiological curve of suspected measles cases in Afghanistan, Jan 2022 to Feb 2023 (N=80,455)

Figure 11 shows increasing trend of suspected weekly measles cases, reached to the peak at epi-week 15-2022 and followed decreasing pattern. Since epi-week 33-2022, the weekly number of suspected measles cases has been stabilized which could be explained by the response activities especially immunization campaigns and decrease susceptibility of the children.

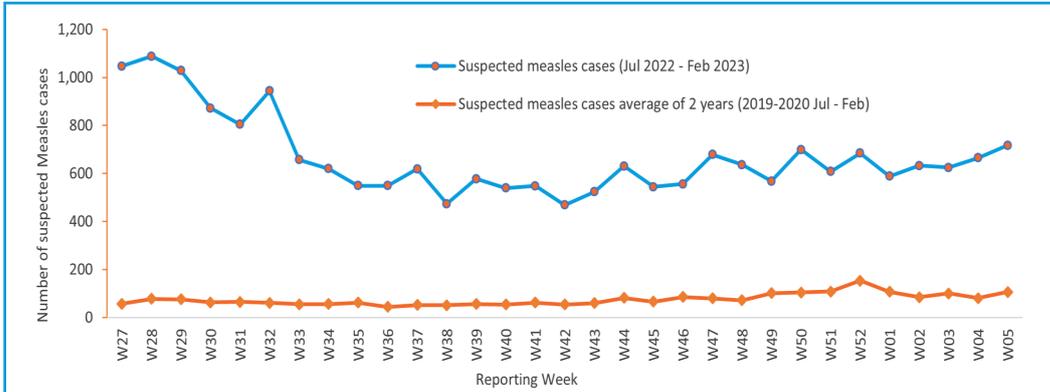


Figure 12. Comparison of suspected measles trend curve using 2 years average (2019-2021) vs Jul 2022-Feb 2023, Afghanistan

The weekly number of suspected measles cases indicates decreasing trend from week 27-35, 2022, followed by stabilization up to week 1 -2023, laying above the average of last 2-years (2019-2020). The decrease and stabilization of the weekly number of suspected measles cases after week 27, 2022, could be attributed to the nationwide vaccination campaigns and decrease susceptibility of the children against measles. A slight increase has been observed in the trend from week 1 to week 5 requires monitoring of the situation.

Response to Measles outbreak

- Implementing partners (NGOs), have been vaccinated around 1,977 children aged 9-59 months in different provinces as an outbreak response.
- The national measles immunization campaign was conducted during 26 Nov-12 Dec-2022; immunizing 5.3 million children aged 9-59 months in 329 planned districts of 34 provinces across the country (almost 99% admin coverage).
- Since December 2021, around 11 million children (aged between 6 months to 14 years) have been vaccinated through 5 different measles outbreak response and national immunization campaigns in 34 provinces.
- A total of 593 measles case management kits have been supplied to 28 provinces in 7 regions across the country to support case management.

Dengue Fever Outbreak (01 Jun 2022 to 04 Feb 2023)

1,304	2	470	383	81.5%
Total Cases	Total Deaths	Sample tested	Lab confirmed cases	Test positivity ratio

Table 6: summary of the Dengue fever outbreak in the last eight weeks (11 Dec 2022 – 04 Feb 2023)

Indicators	W-50	W-51	W-52	W-01	W-02	W-03	W-04	W-05	Epi-curve
Suspected cases	36	12	9	9	12	3	8	6	
Deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
% Change cases	-21.7	-66.7	-25.0	0.0	33.3	-75.0	166.7	-25.0	

- A total of 6 suspected dengue fever cases with no new deaths have been reported during week 05-2023, all cases were reported from Nangarhar province, which brings the total number of cases and deaths to 1,304 and 2, respectively.
- Out of 1,304 reported cases, 311 (23.8%) were females and 1,288 (98.8%) were over five years of age

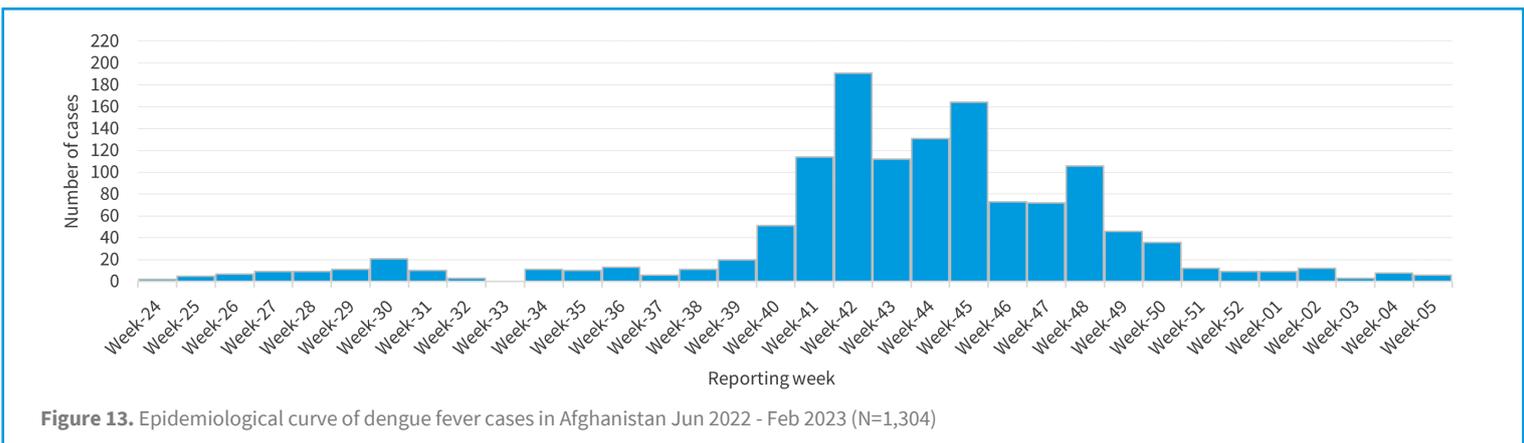


Figure 13. Epidemiological curve of dengue fever cases in Afghanistan Jun 2022 - Feb 2023 (N=1,304)

Figure 13 shows stabilization at low level in the number of dengue cases in the last 6 weeks, which might be due to seasonal change (winter season in Nangarhar province).

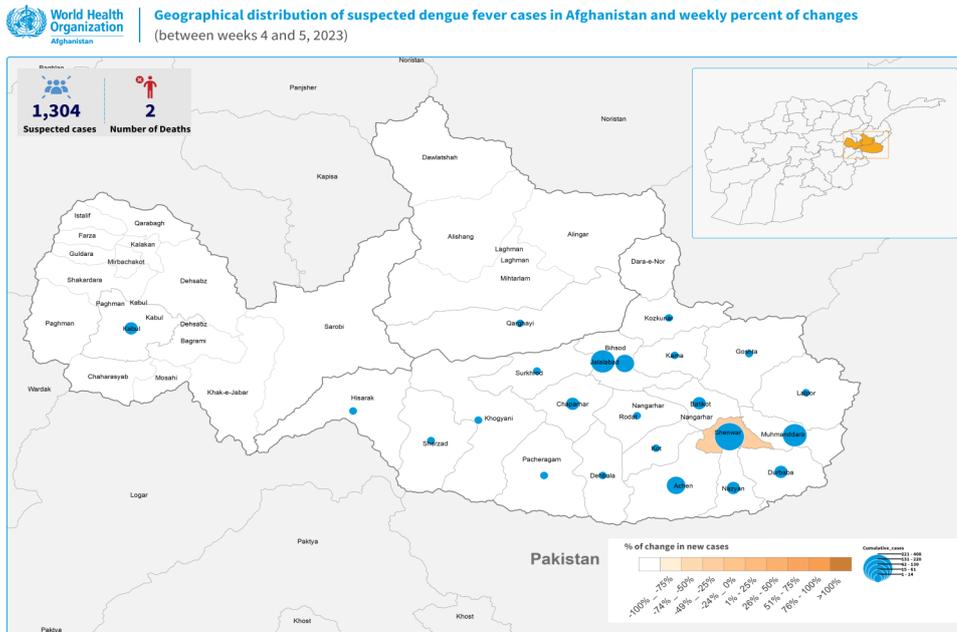


Figure 14. Hotspot areas of dengue fever cases and percent change of new cases in Afghanistan, Jun 2022 - Feb 2023

Response to the dengue fever outbreak

- A task force committee meeting on dengue outbreak preparedness and response was conducted in Nangarhar province. The committee coordinated dengue fever outbreak response activities with the active participation of PPHD, WHO, NDSR, vector control program, BPHS and EPHS implementers in the outbreak affected areas.
- Since July 2022 a total of 9 PCR kits has been delivered to the Nangarhar reference lab (RL) to support the case confirmation of diagnosis among suspected dengue cases.
- Overall, 1,000 Kgs of larvicides have been released and distributed to Nangarhar sub-office to support dengue fever vector control activities.
- Surveillance support and entomology teams in addition to surveillance activities (case detection, reporting and sample collection) monitoring the outbreak situation.
- Health education sessions were conducted in two villages of hotspot areas (Jalalabad city and Shinwar district) for increasing public awareness regarding source reduction activities as well as how to protect themselves from being infected.
- During the week 5, 3 kits of dengue ELISA have been supplied to central public health, 2 kits supplied to infectious disease hospital (IDH) and 4 kits supplied to Nangarhar reference laboratory for confirmation of dengue fever.

CCHF highlights

- Between Jan 2022-Feb 2023, a total of 391 suspected CCHF cases were reported from 26 provinces, out of which 301 cases (76.9%) were males and all were over five years of age. From the reported cases, 103 (26.3%) were lab confirmed using PCR.
- Between Jan-2022-Jan 2023, a total 22 CCHF associated deaths were reported from 10 provinces including the 9 deaths from 5 northern provinces, Balkh (4), Samangan (1), Jawzjan (1), Faryab (1) and Takhar (2).
- No new CCHF cases or associated deaths have been reported in the last 5 weeks.
- The CCHF cases are managed in the health facilities according to the national guidelines.
- 2,000 double bags and 500 doses ribavirin needed for the treatment of CCHF were procured and distributed to all regions.
- A total of 91 healthcare workers (in 33 provinces) were trained on CCHF case management protocol in the country.
- During the week 5, 2 kits of CCHF ELISA have been supplied to central public health, 2 kits supplied to infectious disease hospital (IDH) and 1 kit supplied to Nangarhar reference laboratory for confirmation of CCHF cases.

Note: MOPH is the source of epidemiological data

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