

Disease Outbreaks	AWD (May-Oct 2022)	COVID-19 (Feb 20-Oct 2022)	Measles (Jan-Oct 2022)	CCHF (Jan-Oct 2022)	Pertussis (Jan-Oct 2022)	Dengue fever (Jun-Oct 2022)	Malaria (Jun-Oct 2022)
Cumulative Cases <small>(Data from 519 surveillance sentinel sites)</small>	197,951	201,236	70,621	360	760	313	1,816
Deaths "CFR (%)"	68 (0.03)	7,811 (3.88)	378 (0.54)	15 (4.16)	15 (1.97)	0 (0.00)	0 (0.00)

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May to 15 Oct 2022)

Current Week

6,519 new cases (55.2% under 5)

1 new death

2 new districts (Helmand and Bamyan) reported new alerts

72 samples collected

Cumulative Figures

197,951 cases (<5 years, 54.8%)

68 deaths (73.5% < 5 years), CFR=0.03%

151 districts in all 34 provinces

2,352 samples collected

- During week 41-2022, a total of 6,519 new AWD cases with dehydration and 1 new death were reported with no changes in the number of cases and deaths compared to last week (Figure 2).
- The highest number of new AWD cases were reported from Kabul (1,570, 24.1%), followed by Helmand (1,171, 17.9%), Baghlan (560, 8.5%) and Nangarhar (384, 5.8%) provinces.
- Cumulatively, Kabul (42,993, 21.7%), Helmand (34,118, 17.2%), Baghlan (12,785, 6.4%), Nangarhar (11,025, 5.5%), Kandahar (11,011, 5.5%), Jawzjan (8,179, 4.1%) and Paktya

- (7,171, 3.6%) are the most affected provinces (Figure 1).
- Out of the total 197,951 cases, 108,458 (54.8 %) were children below 5 years and 99,252 (50.1%) were females (Figure 3).
- The first few cases of AWD 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 151 districts in 34 provinces.

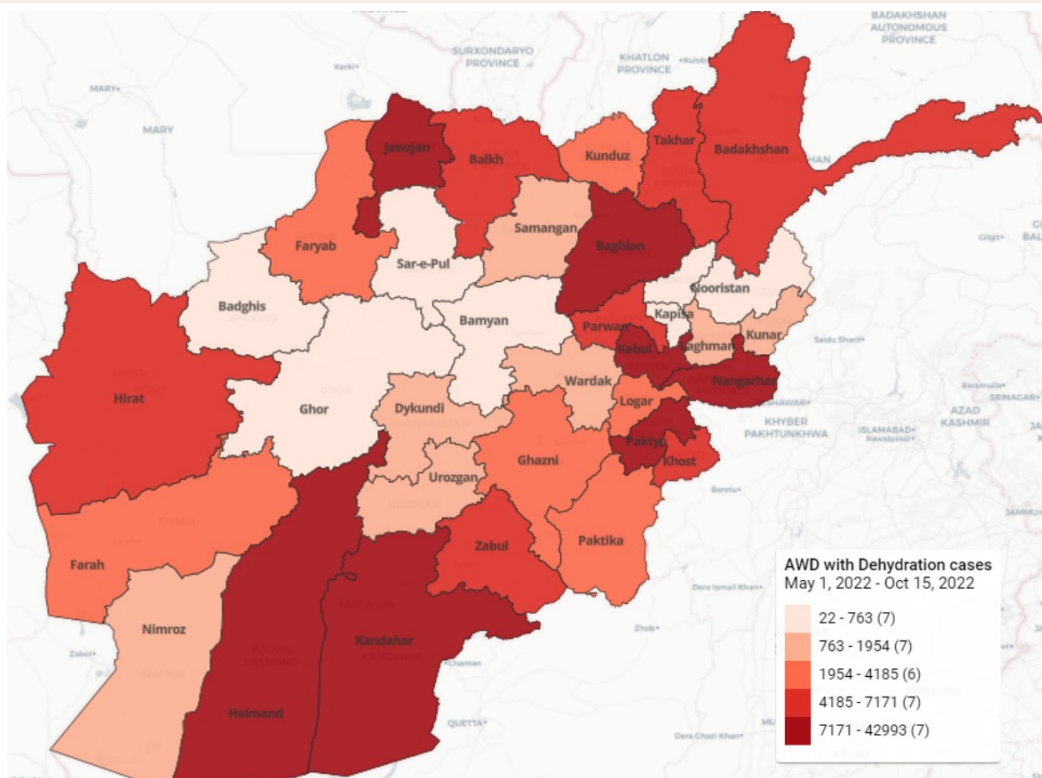


Figure 1. Hotspot areas of AWD with dehydration cases in Afghanistan, May-Oct 2022 (N=197,951)

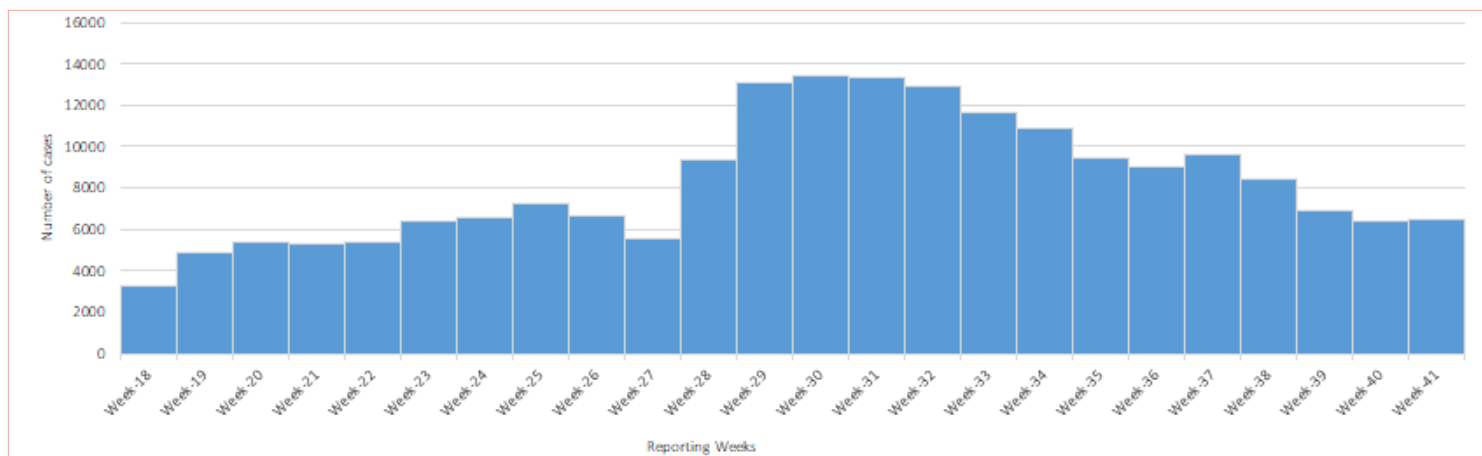


Figure 2. Weekly distribution of AWD with dehydration cases in Afghanistan May-Oct 2022 (N=197,951)

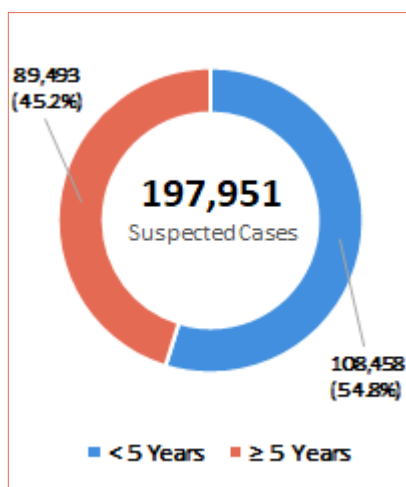


Figure 3. Distribution of AWD with dehydration cases by age groups in Afghanistan, May-Oct 2022

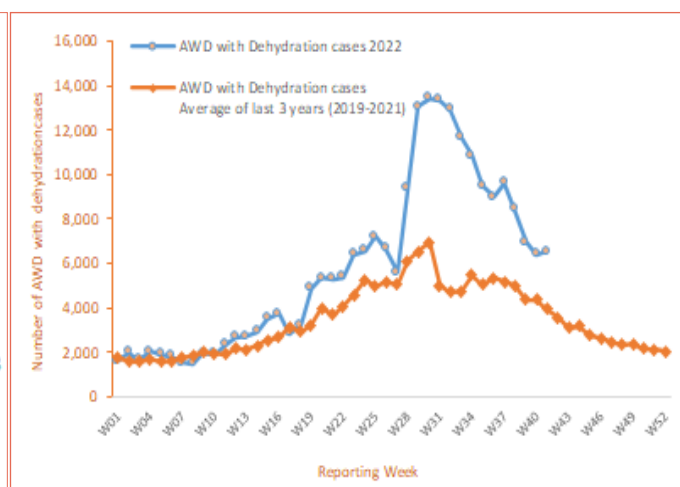


Figure 3.a. Comparing trend of AWD with dehydration cases using 3 years average (2019-2021) vs 2022, in Afghanistan

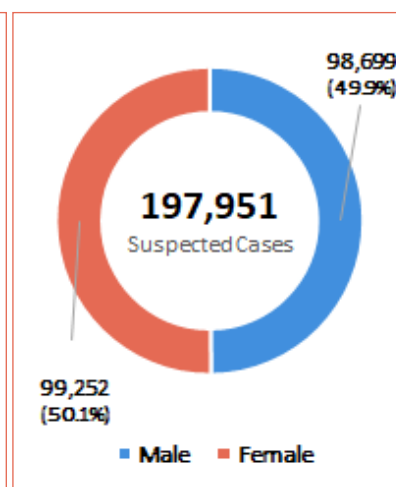


Figure 3.b. Distribution of AWD with dehydration cases by sex in Afghanistan, May-Oct 2022

Response to the AWD outbreak



Figure 4. Distribution of chlorinated water through water tanker to AWD affected population Kabul province, Afghanistan, Oct 2022



Figure 5. Training session for surveillance support teams (SSTs) on AWD case detection, reporting, sample collection and transportation, Kabul province, Afghanistan, Oct 2022

Leadership and Coordination

- Emergency and Preparedness Response Committees (EPR) are active at provincial level.
- Coordination meetings are conducted with Health-WASH partners on biweekly basis to strengthen AWD preparedness and response activities.

Surveillance

- Surveillance support teams (SSTs) were active in 34 provinces to conduct active case finding, sample collection and participate in outbreak investigation.
- During the last week, two-day training was conducted for 54 members of SSTs from 25 provinces in Kabul on case detection, outbreak investigation, sample collection and sample transportation.
- Surveillance supportive supervisions have been conducted at different provinces to strengthen early detection and timely response to AWD outbreaks.

Case Management

- During the last week, 72 healthcare workers (HCWs) were trained on AWD case management in the West Region including Badghis, Farah and Ghor provinces. The total number of HCWs trained on AWD case management reached to 1,270 in 29 provinces.
- Training of 399 HCWs are planned in the coming weeks at

South and remaining part of East and West Regions.

Laboratory and Supplies

- A total of 370 Cary Blairs have been distributed to eight regions for safe transportation of the samples to reference labs as of 15 October-2022.
- In total, 396 different kits (37 central kits, 314 community kits, 45 ORP kits), 600 RDTs and 600 Cary Blairs have been distributed to all outbreak affected areas as of 15 October-2022.
- A technical meeting has been conducted with WHO regional office (EMRO) regarding the mapping of the microbiological agents causing AWD. EMRO will provide necessary technical and logistical supports for the diagnosis of pathogens causing AWD.

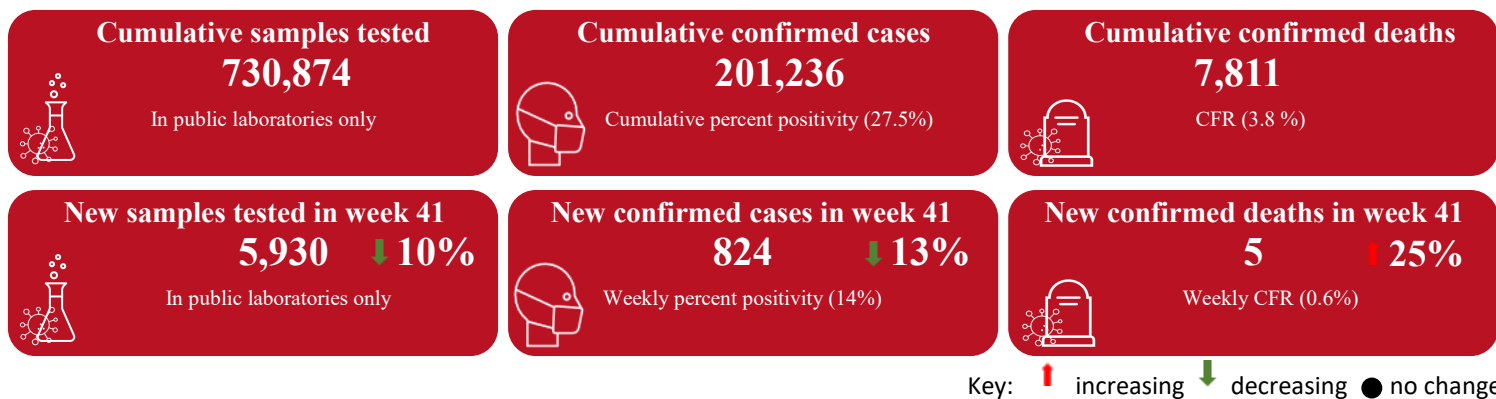
WASH and RCCE

- WASH cluster continued supporting lifesaving WASH response by providing chlorinated water through water tanker to 359,490 people in AWD affected areas.
- Hygiene promotion focusing on hand-washing behavioral change in AWD affected districts is ongoing.
- Distribution of family hygiene kits, soap and water purification tablets to 125,500 people in different locations of Kabul city is in progress.



Figure 6. Training session on AWD case management to healthcare workers in the West Region, Afghanistan, Oct 2022

COVID-19 (24 Feb 2020 – 15 Oct 2022)



COVID-19 Vaccination highlights



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

Table 1: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (21 Aug – 15 Oct 2022)

Indicators	W34-22	W35-22	W36-22	W37-22	W38-22	W39-22	W40-22	W41-22	Epi-curve
Samples tested (in public Labs)	8,495	7,457	8,250	7,422	7,398	6,505	6,617	5,930	
Confirmed cases	1,848	1,626	1,771	1,321	1,125	1,005	949	824	
Percent positivity (%)	22	22	21	18	15	15	14	14	
Confirmed deaths	13	5	5	9	1	5	4	5	
CFR (%)	0.7	0.3	0.3	0.7	0.1	0.5	0.4	0.6	

Highlights of the week

- Since the beginning of the pandemic in Feb 2020, a total of 730,874 samples have been tested for COVID-19 through the public laboratories in the country.
- In week 41-2022, 5,930 samples were tested in public labs, of which 824 samples tested positive for COVID-19 (percent positivity 14) and 5 new deaths were reported. This represents 13% decrease and 25% increase in the number of newly reported cases and deaths, respectively, compared to week 40-2022 (Table 1).
- Cumulatively, 201,236 confirmed cases (overall percent positivity 27.5) of COVID-19 with 7,811 associated deaths (case fatality ratio = 3.8%) have been reported in Afghanistan since Feb 2020.
- As of 15 Oct 2022, 89.3 %, of cases have recovered.
- In week 41-2022, 6 out of 8 regions reported decrease in the number of newly reported cases compared to week 40. At the provincial level the highest number of weekly new cases were reported from Hirat (92 cases), Nangarhar (76 cases), Ghazni (58 cases), Kunar (52 cases), and Bamyán (45 cases).

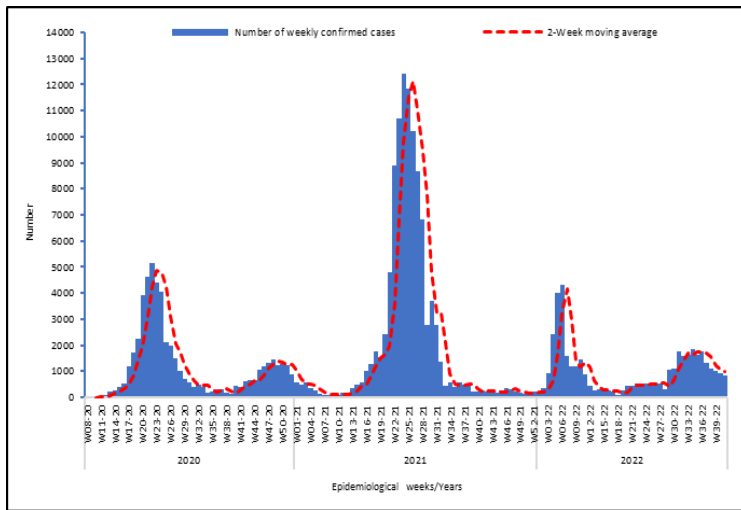


Figure 7: Weekly distribution of confirmed COVID-19 cases in Afghanistan (24 Feb 2020 - 15 Oct 2022)

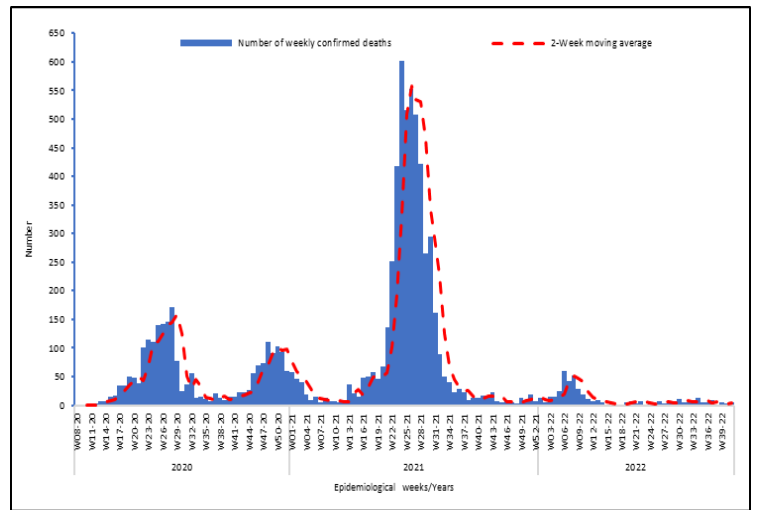


Figure 8: Weekly distribution of COVID-19 associated deaths in Afghanistan (24 Feb 2020 - 15 Oct 2022)

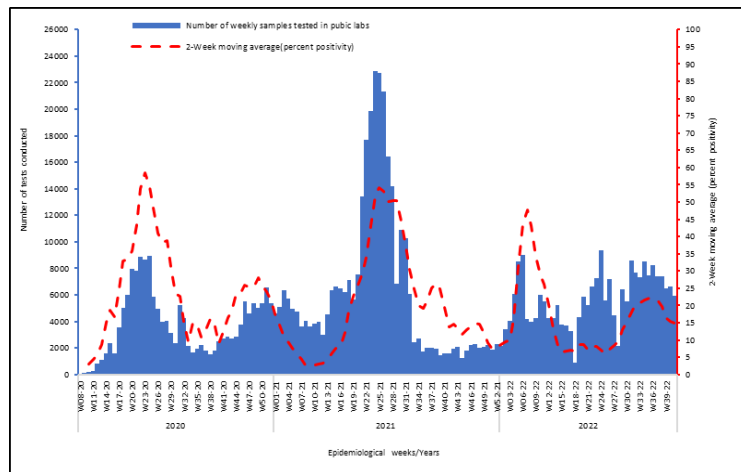


Figure 9: Number of weekly PCR tests conducted and 2-week moving average of percent positivity in Afghanistan (24 Feb 2020 - 15 Oct 2022)

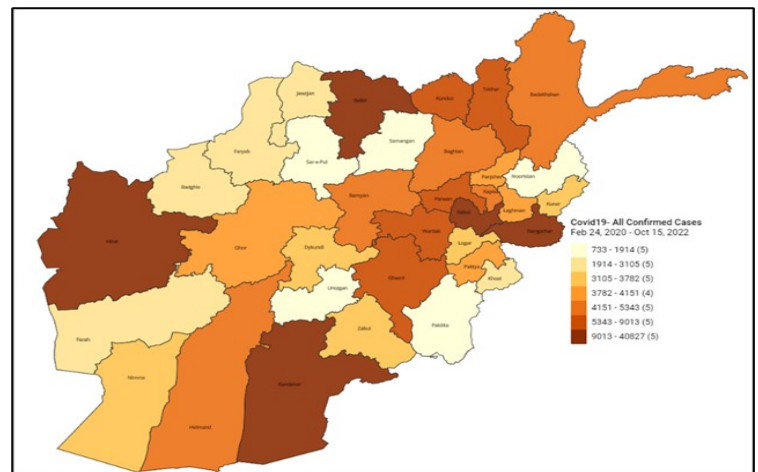


Figure 10: Geographic distribution of COVID-19 confirmed cases in Afghanistan (24 Feb 2020 - 15 Oct 2022)

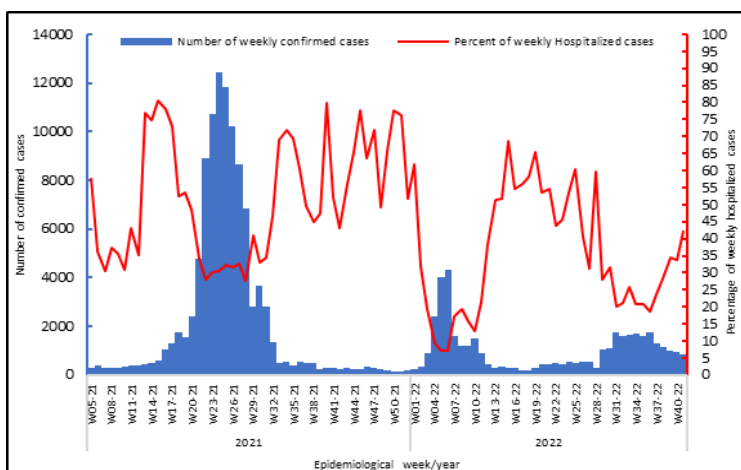


Figure 11: Weekly proportion of hospitalized cases out of new COVID-19 confirmed cases in Afghanistan as of (24 Feb - 15 Oct 2022)

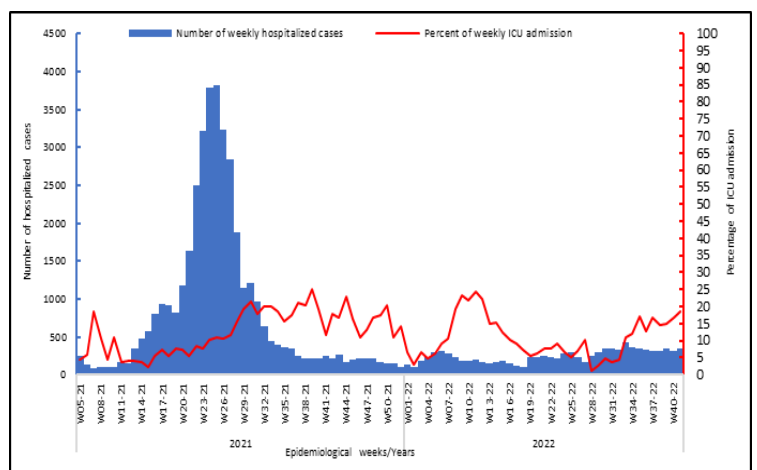


Figure 12: Weekly proportion of ICU admissions out of newly hospitalized COVID-19 cases in Afghanistan as of (24 Feb - 15 Oct 2022)

Measles outbreak (01 Jan to 15 Oct 2022)

70,621 Total cases
 378 Total deaths
 7,705 Samples tested
 3,660 Lab confirmed cases
 47.5% Test positivity ratio

Table 2 summary of the measles outbreak in the last eight weeks (21 Aug– 15 Oct 2022)

Indicators	W-34	W-35	W-36	W-37	W-38	W-39	W-40	W-41	Epi-curve
Suspected cases	620	549	549	619	473	578	539	548	
Deaths	0	3	0	2	1	1	2	0	
CFR (%)	0.00	0.55	0.00	0.32	0.21	0.17	0.37	0.00	

- During epidemiological week 41-2022, a total of 548 new cases were reported which indicates stabilization in the number of cases compared to last week.
- No new deaths were reported in the last week.
- The number of weekly suspected measles cases was around 559 during the last 8 weeks (Figure 15).
- During the last week, the number of suspected measles cases have increased by 87.5% in South East, 56.5% in Central West, 52.0% in North and 29.5% in East regions, as compared to the previous week (Table 3).
- The measles outbreak affected the entire country; however, the most affected provinces are Badakhshan (21.1%), Kabul (10.0%), Nangarhar (10.0%), Kunduz (8.0%), Helmand (7.2%), Takhar (5.5%) and Hirat (5.1%) (Figure 14).
- Out of the total 7,705 samples tested for measles, 3,660 were laboratory confirmed from Jan-Oct 2022.
- During the last week, 3 new districts were reported suspected measles cases (Figure 13).

Table 3 number of suspected measles cases per region in the last 8 weeks 2022

Regions	W-34	W-35	W-36	W-37	W-38	W-39	W-40	W-41	Epi-curve	% of change compared to week 40
South	96	101	70	113	121	111	136	121		121 (↓ 11.0)
Central East	164	142	146	181	94	172	169	117		117 (↓ 30.8)
South East	66	54	75	59	37	81	56	105		105 (↑ 87.5)
East	72	109	69	94	90	75	61	79		79 (↓ 29.5)
North East	123	75	80	53	53	42	50	42		42 (↓ 16.0)
North	45	32	57	51	27	51	25	38		38 (↑ 52.0)
Central West	28	17	42	46	35	33	23	36		36 (↑ 56.5)
West	26	19	10	22	16	13	19	10		10 (↓ 47.4)

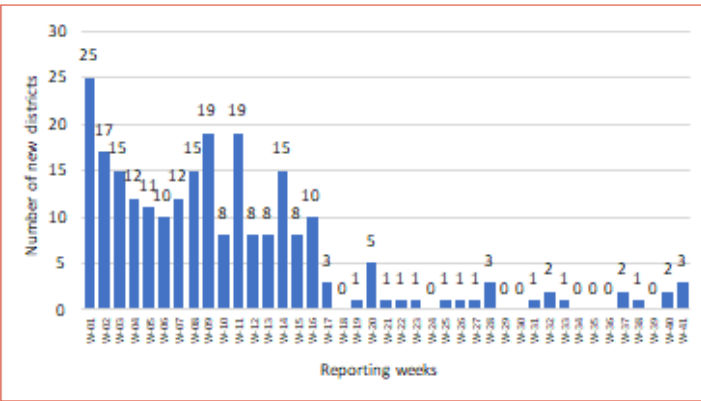


Figure 13. New districts reporting suspected measles cases on weekly basis

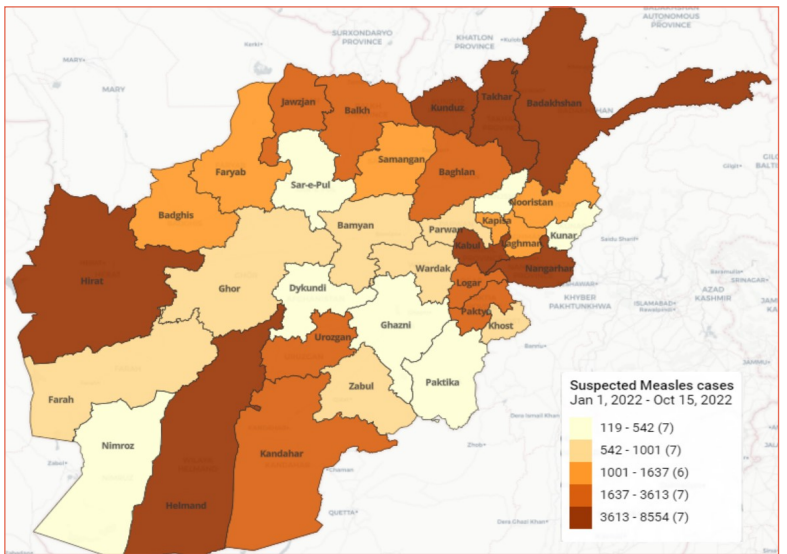


Figure 14. Geographical distribution of suspected measles cases in Afghanistan Jan - Oct 2022 (N=70,621)

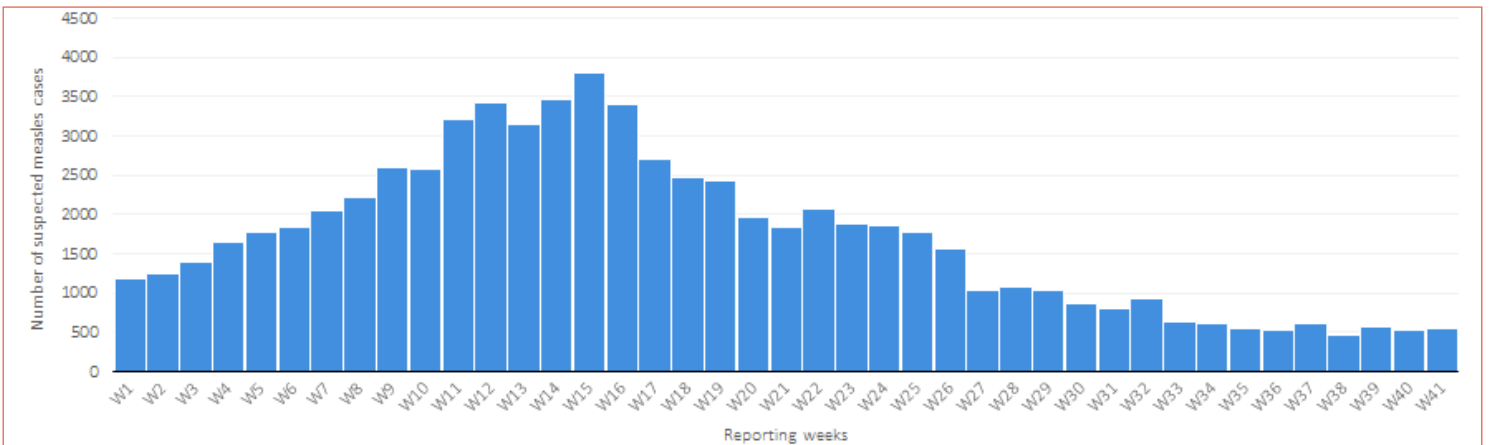


Figure 15. Weekly distribution of suspected measles cases in Afghanistan, Jan– Oct 2022 (N=70,621)

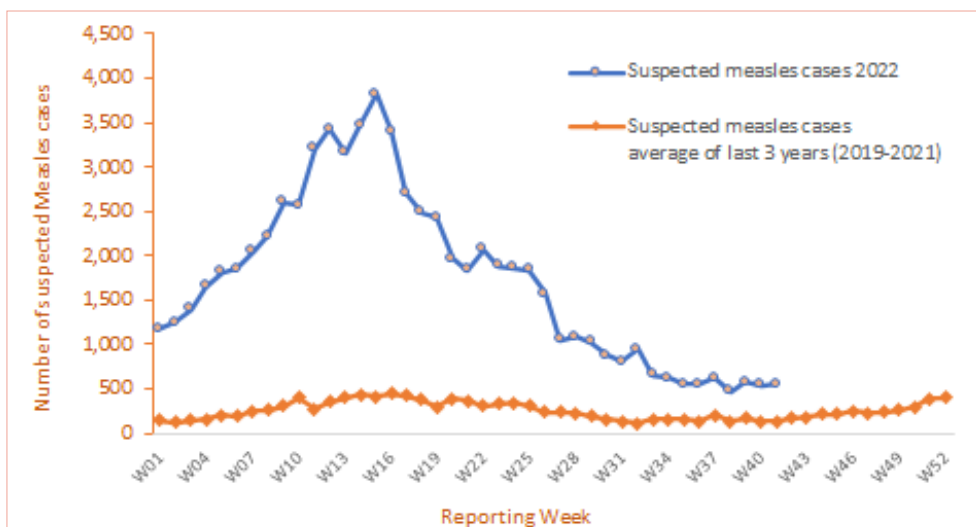


Figure 16. Comparing trend of suspected measles cases using 3 years average (2019-2021) vs 2022, in Afghanistan

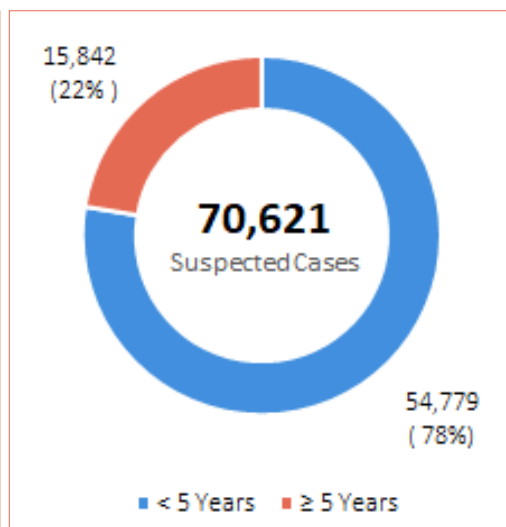


Figure 17. Distribution of suspected measles cases by age groups in Afghanistan, Jan-Oct 2022

Response to Measles outbreak

- Since December 2021, around 6 million children (aged between 6 months to 14 years) have been vaccinated through 4 different measles outbreak response immunization campaigns in 29 provinces.
- A national immunization campaign is planned to be conducted in November 2022. National TOT training has been conducted to more than 100 national and provincial EPI staff.
- Preparation is ongoing for cascading the training to district coordinators, cluster supervisors and frontline workers which will take place during 21-30 October 2022 in all 34 provinces.



Figure 18. TOT training to national and provincial EPI staff as preparation for National Immunization Campaign, Kabul, Afghanistan, Oct 2022

Dengue Fever Outbreak (01 Jun to 01 Oct 2022)

Highlight:

- A total of 114 suspected dengue fever cases have been reported during week 41-2022 from Nangarhar province (105 cases) and Kabul city (9 cases) which brings the total number of cases to 313 as of 15 Oct 2022.
- New cases from Kabul have the travel history to Pakistan (endemic area for dengue) who returned to Kabul last week.
- Out of 313 reported cases, 115 (36.7%) were females and 310 (99.0%) were over five years of age.
- Out of 313 collected blood samples, 80 cases tested positive using PCR (75 in Nangarhar and 5 in Kabul).

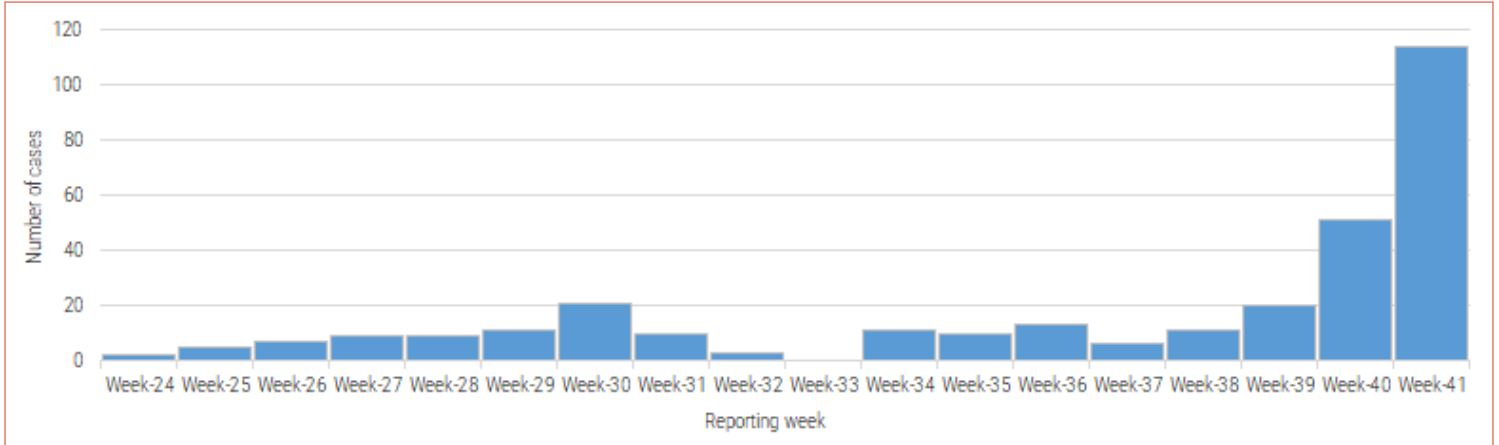
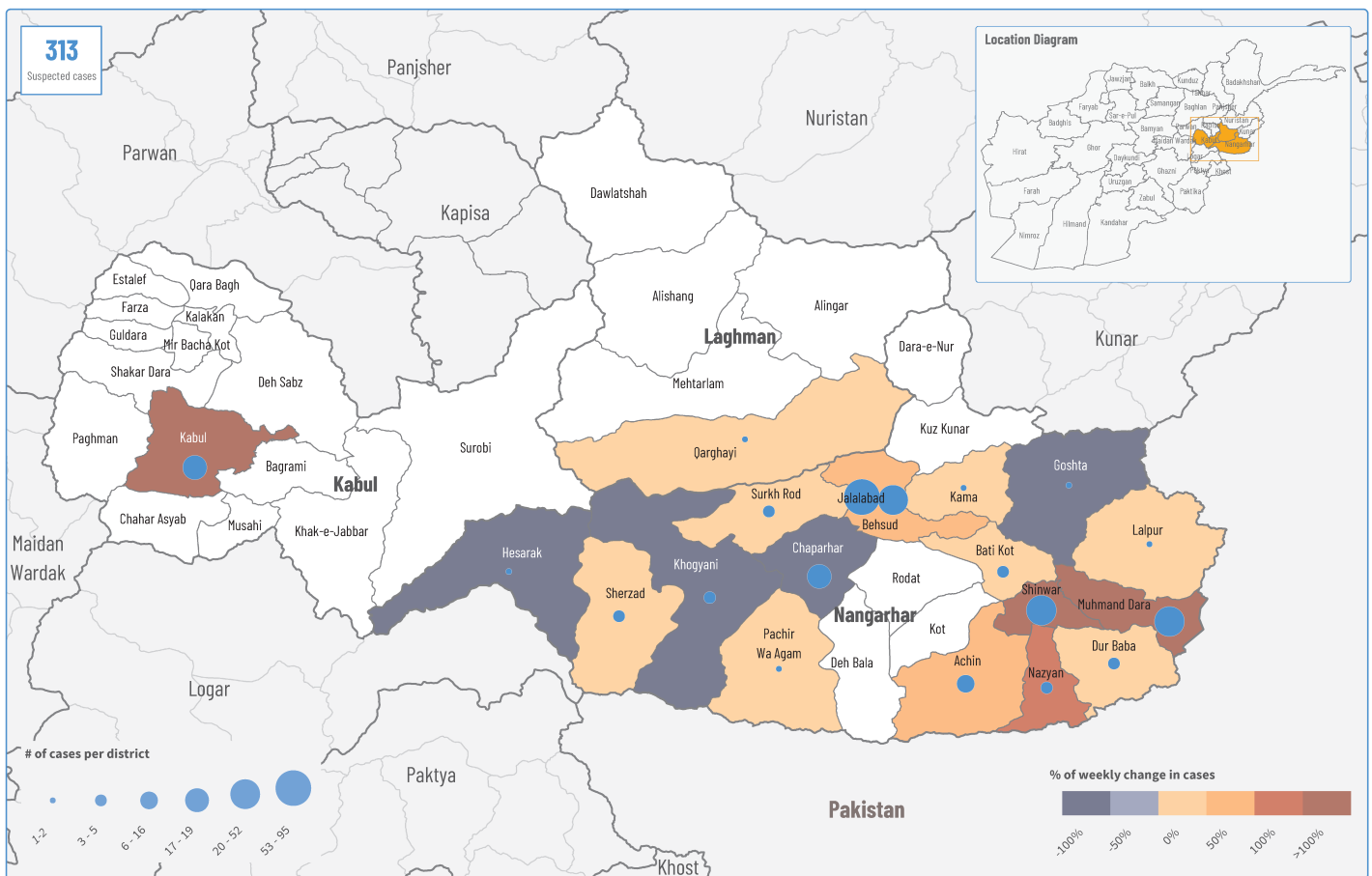


Figure 19. Weekly distribution of dengue fever cases in Afghanistan Jun-Oct 2022 (N=313)



Geographical distribution of dengue fever cases in Afghanistan and weekly percent changes (between week 40 and 41, 2022)



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the World Health Organization. Creation date: 15 October 2022 Sources: MoPH, WHO, AGCHO. Feedback: nasseryr@who.int

Figure 20. Hotspot areas of dengue fever cases and percent change of new cases in Afghanistan, Jun-Oct 2022

Response to the dengue fever outbreak

- Required medicine for dengue fever case management has been provided to Kabul infectious disease hospital (IDH) and Nangarhar regional hospital.
- WHO is conducting regular field visits in coordination with National vector control program (MoPH) to provide necessary outbreak response in the affected districts, in Kabul and Nangarhar provinces.
- 14 SST members have been trained on dengue sample collection, packing, sample transportation and use of RDTs in Nangarhar Province.
- 6 laboratory technicians have been trained on using PCR and ELISA tests for dengue case confirmation at Nangarhar regional reference laboratory (RRL).
- Field investigation of confirmed dengue fever cases in Kabul province is ongoing by Malaria and other vector borne diseases control program (MVDP) to determine the availability of dengue vector (Aedes mosquito) and possibility of further transmission of the virus.
- Efforts are in place to release Larvicide from the costume to be used in the field.



Figure 21. Dengue vector investigation in Kabul province, Afghanistan Oct 2022

Other infectious diseases outbreaks (Jan-Oct 2022)

CCHF Highlight:

- During week 41-2022, a total of 05 new suspected CCHF cases were reported. The highest number of new CCHF cases were reported from Kabul (2, 40.0%) province. This brings the total number of suspected CCHF cases to 360 from 25 provinces.
- Out of 360 cases, (271, 75.3%) were males and all were over five years of age.
- Out of 360 cases, (61, 16.9%) were lab confirmed using PCR.
- No new deaths have been reported for the last five weeks,

and the total number of CCHF associated deaths remained at 15 (Kabul (5), Herat (3), Takhar (2), Kapisa (2), Nangarhar (2) and Badghis (1)).

- The CCHF cases are managed in the health facilities according to the national guidelines. Ribavirin and double bags needed for the treatment of CCHF cases have been distributed to all regions.
- Totally, 91 healthcare workers (HCWs) have been trained on CCHF case management in 8 regions (33 provinces) as of Oct-15.



Figure 22: Training of CCHF case management to HCWs from East, North-east and South Regions in Kabul, Oct 2022

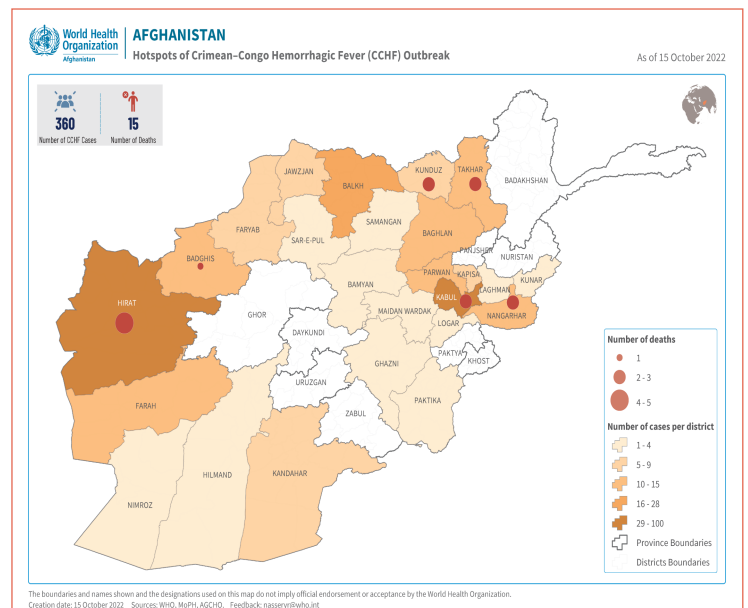


Figure 23. Hotspot areas of CCHF cases in Afghanistan, Jan-Oct 2022

Pertussis Highlight:

- During week 41-2022, a total of 3 new suspected pertussis cases were reported from Kapisa (2) and Ghazni (1) provinces, this brings the total number of suspected cases to 760 from 16 provinces
- Out of the total 760 cases, (475, 62.5 %) were children below 5 years and (359, 47.2%) were females.
- The highest number has been observed in Ghazni (188, 24.7%) followed by Kabul (166, 21.8%) and Kandahar (152, 20.0%) Figure 24.
- No new suspected pertussis associated deaths have been reported for the last seven weeks, and the total number of suspected pertussis associated deaths remains at 15.

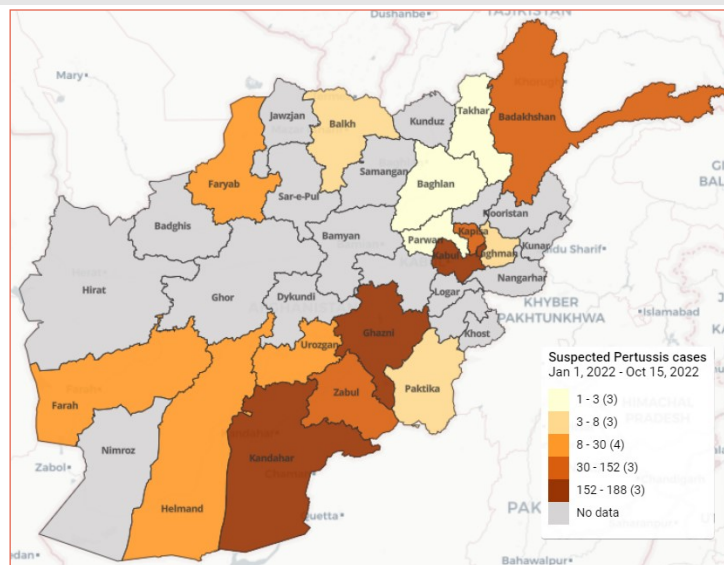


Figure 24. Geographical distribution of suspected pertussis cases in Afghanistan Jan - Oct 2022 (N=760)

Malaria Outbreak Highlight:

- During week 41-2022, there was no indication of new outbreak while comparing trends in different locations.
- In Farah (Balabolok district): 39 cases (28 (71.7%) were females and 5 (12.8%) were under 5).
- In Laghman (Alishang district): 663 cases (339 (51.1%) were females, and 142 (21.4%) were under 5).
- In Kunar (Waterproof): 562 cases (314 (55.8%) are females, and 153 (27.2%) were under 5).
- In Badghis (Qale-e-naw): 552 cases.
- A joint mission of the WHO and Malaria and other Vector-borne Disease Control Program (MVDP) are in the affected districts to provide the needed technical and operational support.

Note: MOPH is the source of epidemiological data

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