

| Disease Outbreaks | AWD (May-Nov 2022) | COVID-19 (Feb 20-Nov 2022) | Measles (Jan-Nov 2022) | Dengue fever (Jun-Nov 2022) | CCHF (Jan-Nov 2022) | Pertussis (Jan-Nov 2022) | Malaria (Jun-Nov 2022) |
|--|-----------------------|-------------------------------|---------------------------|--------------------------------|------------------------|-----------------------------|---------------------------|
| Cumulative Cases (Data from 519 surveillance sentinel sites) | 214,155 | 203,732 | 72,245 | 747 | 372 | 768 | 2,591 |
| Deaths "CFR (%)" | 77 (0.04) | 7,826 (3.8) | 378 (0.5) | 1 (0.1) | 15 (4.0) | 15 (1.9) | 0 (0.00) |

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May to 05 Nov 2022)

| Current Week | Cumulative Figures |
|--|---|
| 5,100 new cases (60.6% under 5) | 214,155 cases (<5 years, 55.2%) |
| 3 new deaths | 77 deaths (75.3% < 5 years), CFR=0.04% |
| 4 new districts (Badakhshan, Daikundi and Kandahar) reported new alerts | 170 districts in all 34 provinces |
| 32 samples collected | 2,526 samples collected |

- During week 44-2022, a total of 5,100 new AWD cases with dehydration and 3 new deaths were reported which indicates 4.7% increase and 25.0% decrease in the number of cases and deaths, respectively, compared to previous week (Figure 2).
- The highest number of new AWD cases were reported from Kabul (1,473, 28.9%), followed by Helmand (950, 18.6%), Baghlan (409, 8.0%) and Nangarhar (278, 5.5%) provinces.
- Out of newly reported 3 deaths, (2, 66.7%) were females and all were children below 5. Deaths were reported from 2 provinces (Baghlan (2) and Hirat (1)).
- Cumulatively, Kabul (47,273, 22.1%), Helmand (37,618, 17.6%), Baghlan (14,191, 6.6%), Nangarhar (11,941, 5.6%), and Kandahar (11,566, 5.4%), are the most affected provinces (Figure 1).
- Out of the total 214,155 cases, 118,175 (55.2%) were children below 5 years and 107,186 (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 170 districts in 34 provinces.

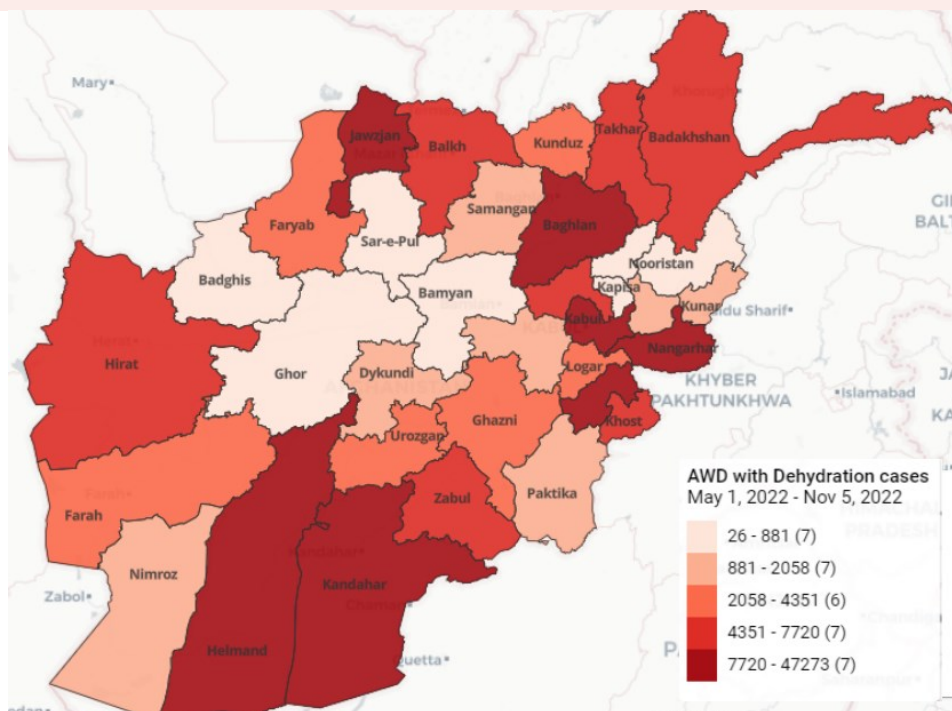


Figure 1. Hotspot areas of AWD with dehydration cases in Afghanistan, May-Nov 2022 (N=214,155)

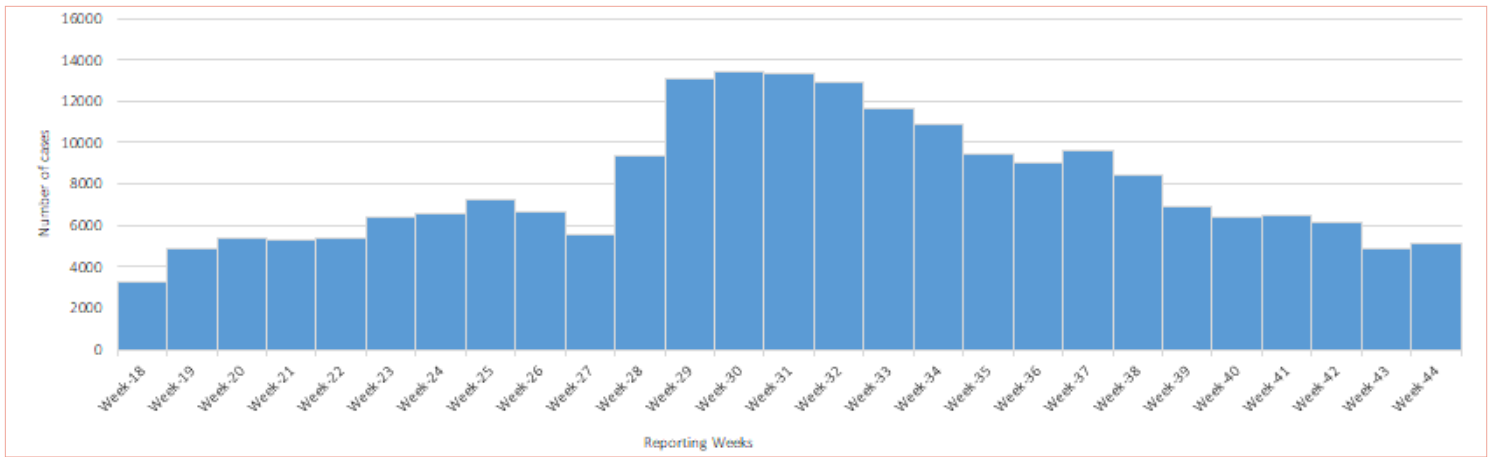


Figure 2. Weekly distribution of AWD with dehydration cases in Afghanistan May-Nov 2022 (N=214,155)

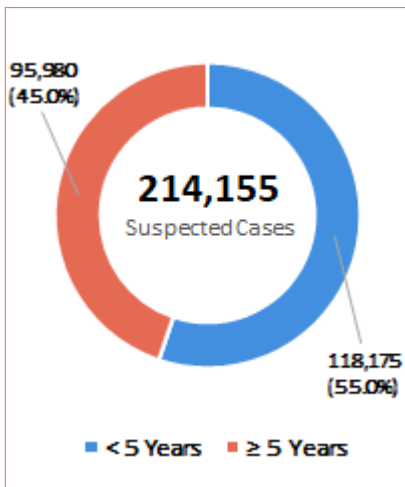


Figure 3. Distribution of AWD with dehydration cases by age groups in Afghanistan, May-Nov 2022

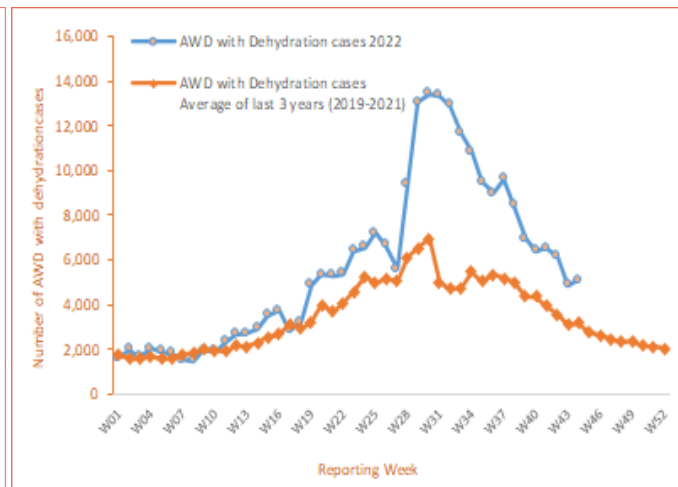


Figure 3.a. Comparing trend of AWD with dehydration cases using 3 years average (2019-2021) vs 2022, in Afghanistan

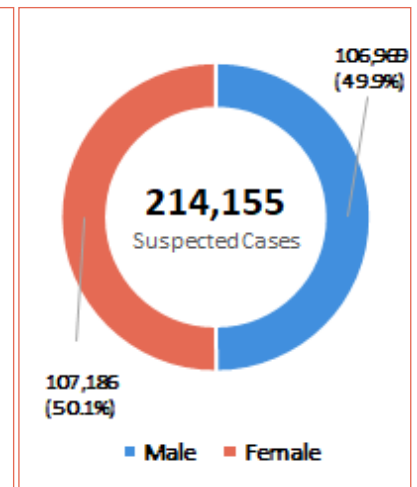


Figure 3.b. Distribution of AWD with dehydration cases by sex in Afghanistan, May-Nov 2022

Response to the AWD outbreak



Figure 4. Construction of safe water facility in a health care center, Zabul province, Afghanistan, October 2022



Figure 5. Training session to health care workers for AWD case management in Hirat province, Afghanistan, Nov 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 actively participating in outbreak investigation, case finding, sample collection and shipment in 34 provinces.
- A total of 54 SSTs' members have been trained on case detection, outbreak investigation, sample collection, storage and transportation.
- Surveillance supportive supervisions have been conducted at different provinces to strengthen early detection and timely response to AWD outbreaks.
- A total of 94 newly recruited surveillance focal points have been trained on case definition of surveillance targeted diseases, monitoring the trend of diseases, filling out weekly watch chart, weekly collection and reporting of data, alert and outbreak thresholds and conducting outbreak investigation.

Case Management

- During the last week, 20 healthcare worker were trained on

AWD case management in Hirat province. The total number of HCWs trained on AWD case management reached to 1,364 in 29 provinces.

- Training of 305 HCWs is planned in the coming weeks at the remaining provinces.

Laboratory and Supplies

- A total of 20 case management kits have been supplied to Helmand province for proper AWD case management.
- A total of 396 different kits (37 central kits, 334 community kits, 45 ORP kits), 700 RDTs and 1,058 Cary Blairs have been distributed to all outbreak affected areas.

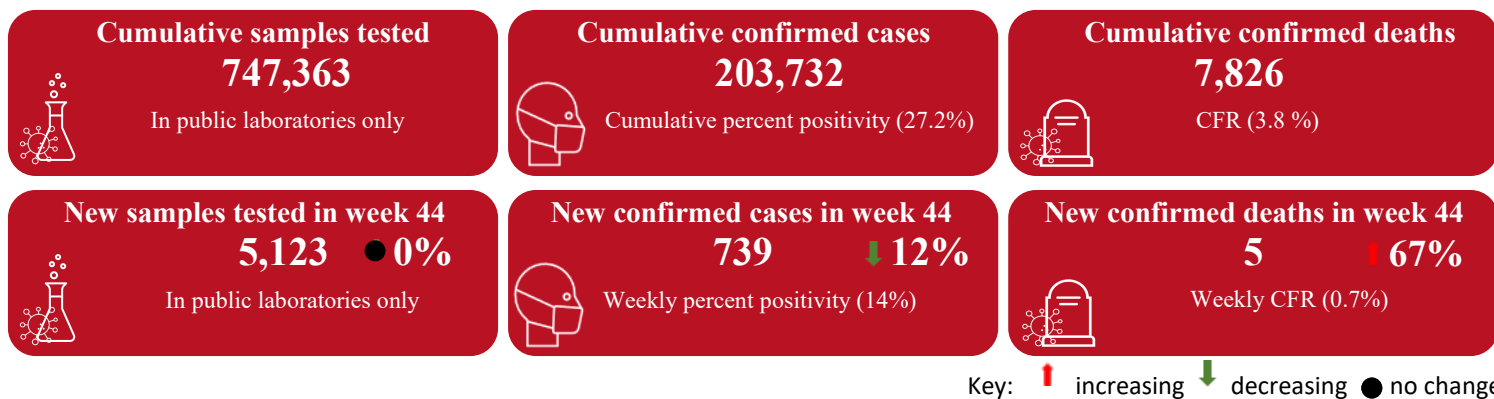
WASH and RCCE

- WASH cluster continued supporting lifesaving WASH response by providing chlorinated water through water trucking to 359,490 people in AWD affected areas.
- Construction of two WASH facilities for provision of safe drinking water in two healthcare centers of Zabul province have been completed.
- 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 of newly recruited surveillance focal points on case definition, weekly watch chart, collection and reporting of data and outbreak investigation, Nov 2022

COVID-19 (24 Feb 2020 – 5 Nov 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 (12 Sep – 5 Nov 2022)

| Indicators | W37-22 | W38-22 | W39-22 | W40-22 | W41-22 | W42-22 | W43-22 | W44-22 | Epi-curve |
|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|-----------|
| Samples tested (in public Lab) | 7,422 | 7,398 | 6,505 | 6,617 | 5,930 | 6,275 | 5,099 | 5,123 | |
| Confirmed cases | 1,321 | 1,125 | 1,005 | 949 | 824 | 913 | 844 | 739 | |
| Percent positivity (%) | 18 | 15 | 15 | 14 | 14 | 15 | 17 | 14 | |
| Confirmed deaths | 9 | 1 | 5 | 4 | 5 | 7 | 3 | 5 | |
| CFR (%) | 0.7 | 0.1 | 0.5 | 0.4 | 0.6 | 0.8 | 0.4 | 0.7 | |

Highlights of the week

- Since the beginning of the pandemic in Feb 2020, a total of 747,363 samples have been tested for COVID-19 through the public laboratories.
- In week 44-2022, 5,123 samples were tested in public labs, of which 739 samples were positive for COVID-19 (test positivity of 14 %) and 5 new deaths were reported. This represents 12% decrease and 67% increase in the number of newly reported cases and deaths, respectively, compared to week 43-2022 (Table 1).
- Cumulatively, 203,732 confirmed cases (overall test positivity of 27.2%) of COVID-19 with 7,826 associated deaths (case fatality ratio = 3.8%) have been reported in Afghanistan since Feb 2020.
- As of 5 Nov 2022, 88.8 % of cases have recovered.
- In week 44-2022, 5 out of 8 regions reported decrease in the number of newly reported cases compared to week 43. At the provincial level, the highest numbers of weekly new cases were reported from Nangarhar (107 cases), Hirat (73 cases), Kabul (44 cases), Kunar (35 cases), and Wardak (34 cases).

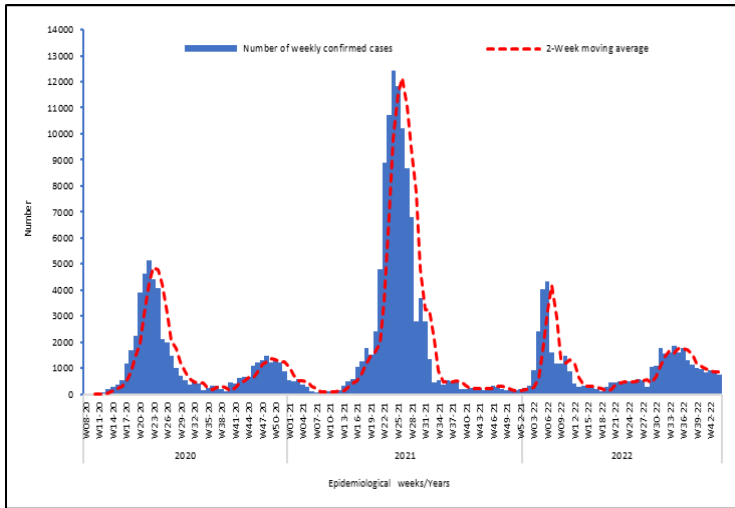


Figure 7: Weekly distribution of confirmed COVID-19 cases in Afghanistan (24 Feb 2020 - Nov 2022)

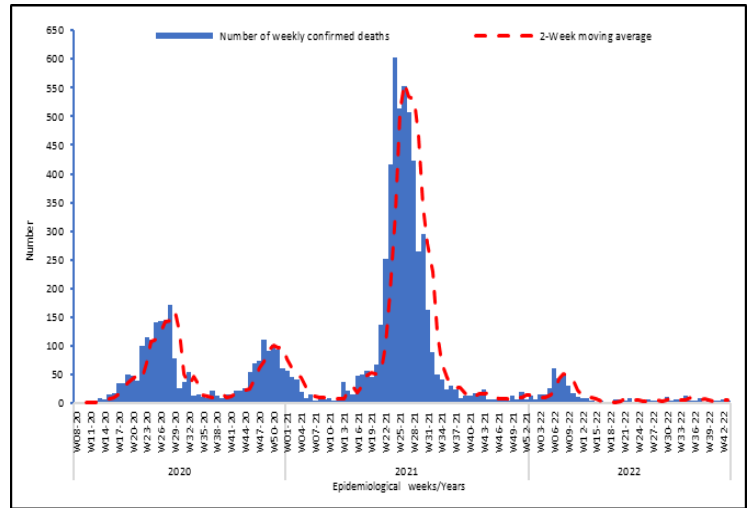


Figure 8: Weekly distribution of COVID-19 associated deaths in Afghanistan (24 Feb 2020 - Nov 2022)

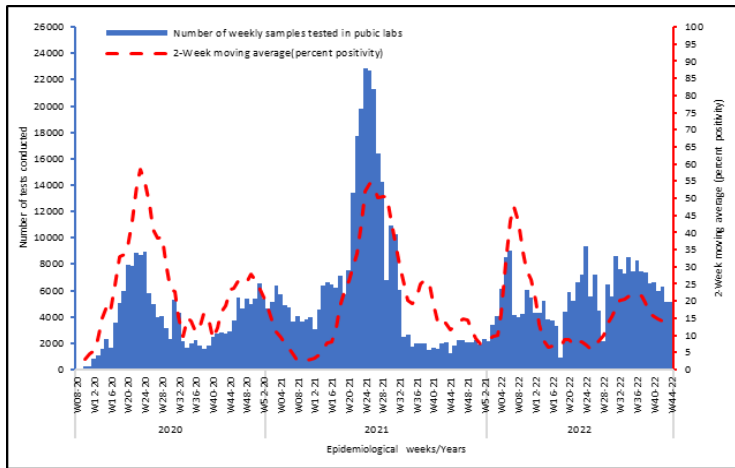


Figure 9: Number of weekly PCR tests conducted and 2-week moving average of percent positivity in Afghanistan (24 Feb 2020 - Nov 2022)

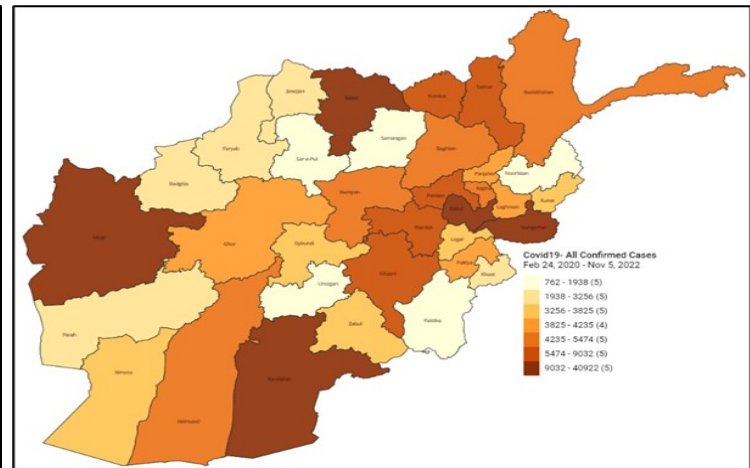


Figure 10: Geographic distribution of COVID-19 confirmed cases in Afghanistan (24 Feb 2020 - Nov 2022)

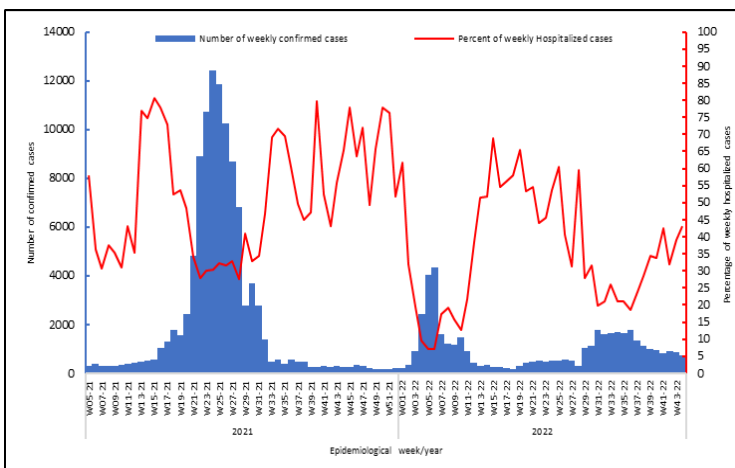


Figure 11: Weekly proportion of hospitalized cases out of new COVID-19 confirmed cases in Afghanistan as of (24 Feb - Nov 2022)

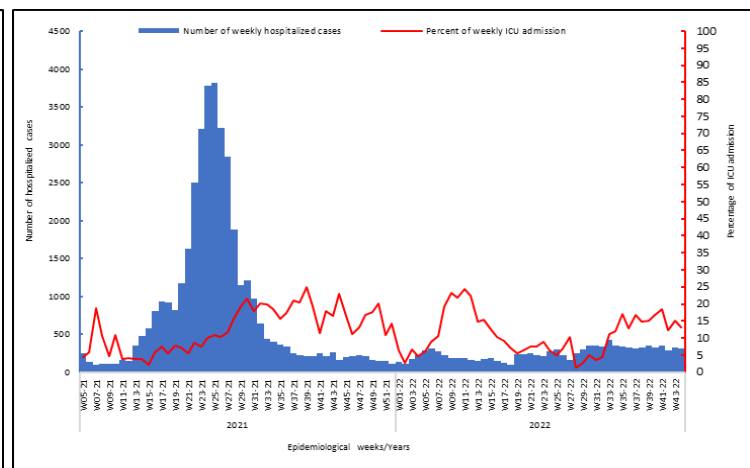


Figure 12: Weekly proportion of ICU admissions out of newly hospitalized COVID-19 cases in Afghanistan as of (24 Feb - Nov 2022)

Measles outbreak (01 Jan to 05 Nov 2022)

72,245 Total cases
 378 Total deaths
 9,246 Samples tested
 5,463 Lab confirmed cases
 59.1% Test positivity ratio

Table 2 summary of the measles outbreak in the last eight weeks (11 Sep– 05 Nov 2022)

| Indicators | W-37 | W-38 | W-39 | W-40 | W-41 | W-42 | W-43 | W-44 | Epi-curve |
|-----------------|------|------|------|------|------|------|------|------|-----------|
| Suspected cases | 619 | 473 | 578 | 539 | 548 | 469 | 524 | 631 | |
| Deaths | 2 | 1 | 1 | 2 | 0 | 0 | 0 | 0 | |
| CFR (%) | 0.32 | 0.21 | 0.17 | 0.37 | 0.00 | 0.00 | 0.00 | 0.00 | |

- During epidemiological week 44-2022, a total of 631 new cases were reported which indicates 20.4% increase in the number of new cases compared to last week.
- No new deaths were reported during the last 4 weeks.
- The average number of weekly suspected measles cases was 548 during the last 8 weeks (Figure 15).
- During the last week, 6 out of 8 regions reported increase in the suspected measles cases compared to the preceding week. The highest relative increase was reported in the South and Central West regions (87.4% and 25.0%, respectively) (Table 3).
- The most affected provinces are Badakhshan (11.9%), Kabul (10.2%), Nangarhar (9.9%), Kunduz (7.8%), Helmand (7.6%), Takhar (5.4%) and Hirat (5.0%) (Figure 14).
- Out of the total 9,246 samples tested for measles, 5,463 were laboratory confirmed from Jan-Nov 2022.
- During the last week, no new districts reported suspected measles cases (Figure 13).

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

| Regions | W-37 | W-38 | W-39 | W-40 | W-41 | W-42 | W-43 | W-44 | Epi-curve | % of change compared to week 43 |
|--------------|------|------|------|------|------|------|------|------|-----------|---------------------------------|
| South | 113 | 121 | 111 | 136 | 121 | 108 | 111 | 208 | | 208 (↑ 87.4) |
| Central East | 181 | 94 | 172 | 169 | 117 | 151 | 162 | 167 | | 167 (↑ 3.1) |
| East | 94 | 90 | 75 | 61 | 79 | 49 | 61 | 71 | | 71 (↑ 16.4) |
| South East | 59 | 37 | 81 | 56 | 105 | 56 | 56 | 59 | | 59 (↑ 5.4) |
| North | 51 | 27 | 51 | 25 | 38 | 33 | 45 | 51 | | 51 (↑ 13.3) |
| Central West | 46 | 35 | 33 | 23 | 36 | 42 | 24 | 30 | | 30 (↑ 25.0) |
| North East | 53 | 53 | 42 | 50 | 42 | 20 | 42 | 28 | | 28 (↓ 33.3) |
| West | 22 | 16 | 13 | 19 | 10 | 10 | 23 | 17 | | 17 (↓ 26.1) |

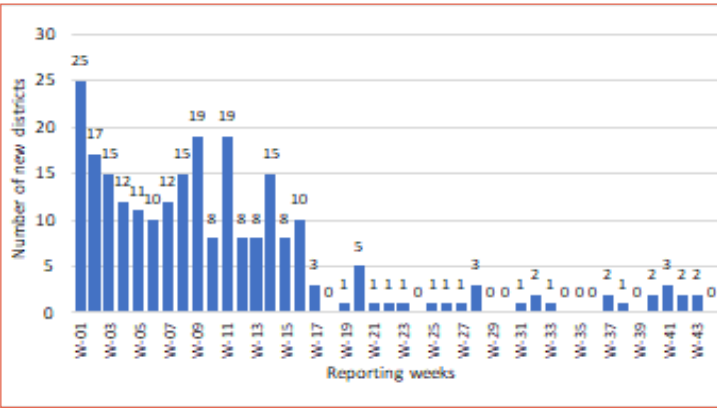


Figure 13. New districts reporting suspected measles cases on weekly basis in Afghanistan Jan– Nov 2022 (N=246)

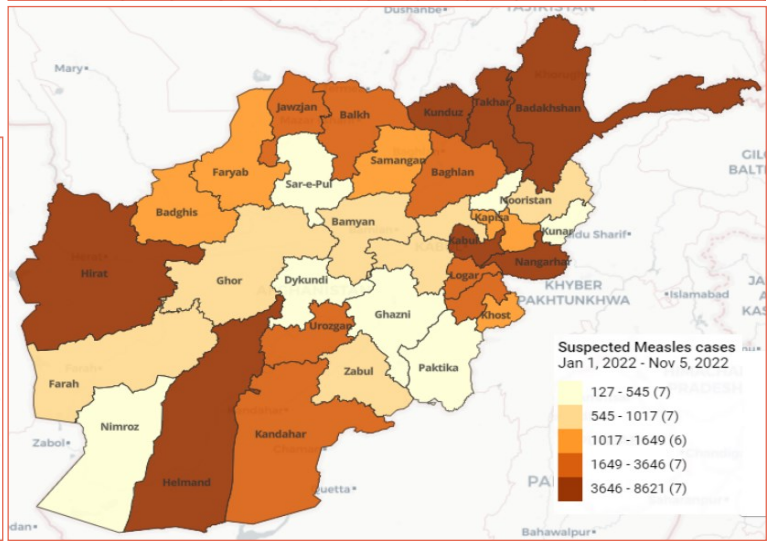


Figure 14. Geographical distribution of suspected measles cases in Afghanistan Jan - Nov 2022 (N=72,245)

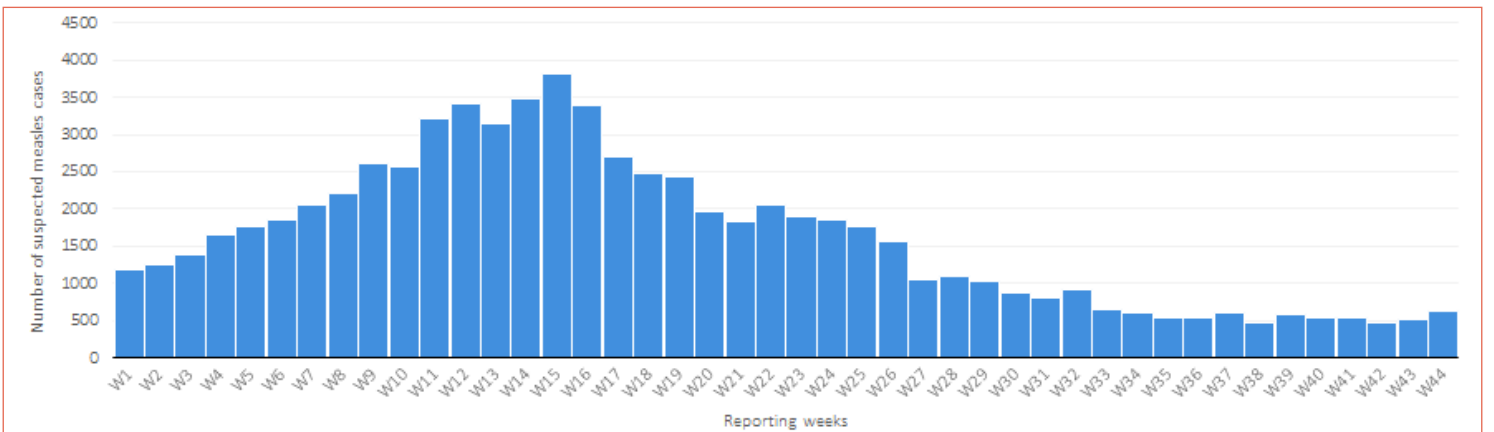


Figure 15. Weekly distribution of suspected measles cases in Afghanistan, Jan– Nov 2022 (N=72,245)

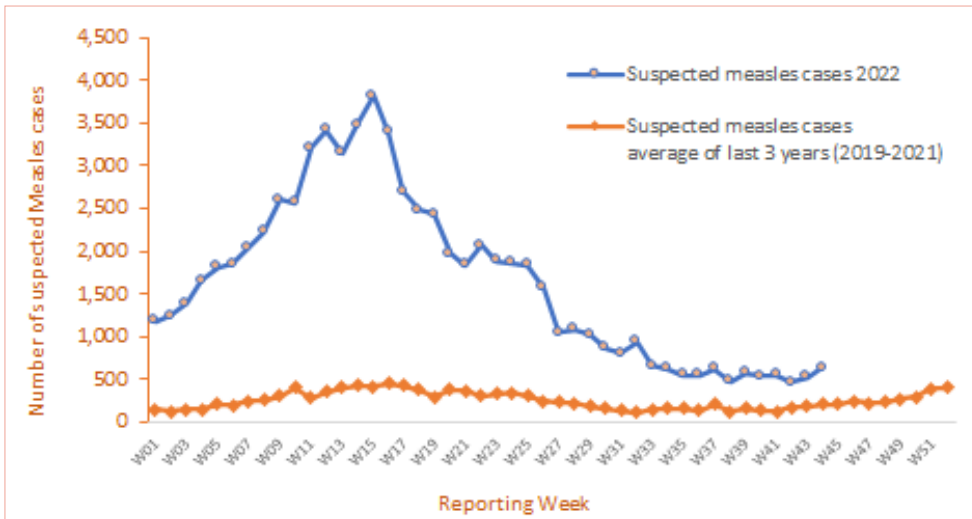


Figure 16. Comparing trend of suspected measles cases using 3 years average (2019-2021) vs 2022, in Afghanistan

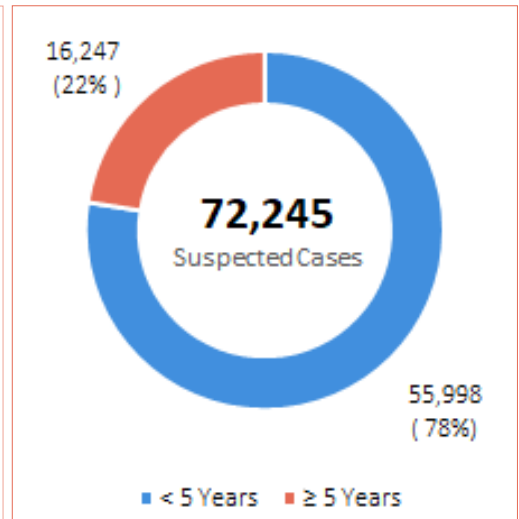


Figure 17. Distribution of suspected measles cases by age groups in Afghanistan, Jan-Nov 2022

Response to Measles outbreak

- During the last week, 593 measles kits were supplied to 28 provinces in 7 regions across the country to support case management.
- 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 was planned to be conducted between 1-10 November 2022, however, the campaign has been stopped by the MoPH.
- As part of preparation activities, all dry supplies have been procured and supplied to 34 provinces.



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

Dengue Fever Outbreak (01 Jun to 05 Nov 2022)

Highlight:

- A total of 131 suspected dengue fever cases have been reported during week 44-2022 from Nangarhar province which brings the total number of cases to 747 as of 05 Nov 2022.
- No new cases were reported from Kabul province during the last week.
- No new deaths have been reported during the last two weeks.
- Out of 747 reported cases, 162 (21.7%) were females and 742 (99.3%) were over five years of age.
- Out of 747 samples, 290 (38.8%) samples were positive using PCR (277 and 13 in Nangarhar and Kabul, respectively).

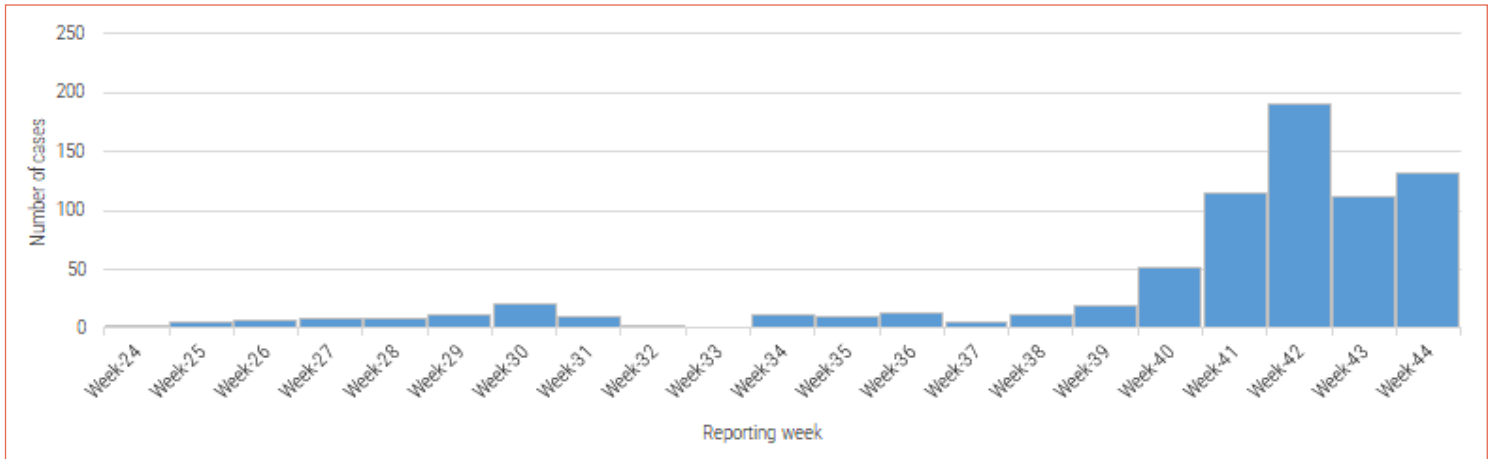
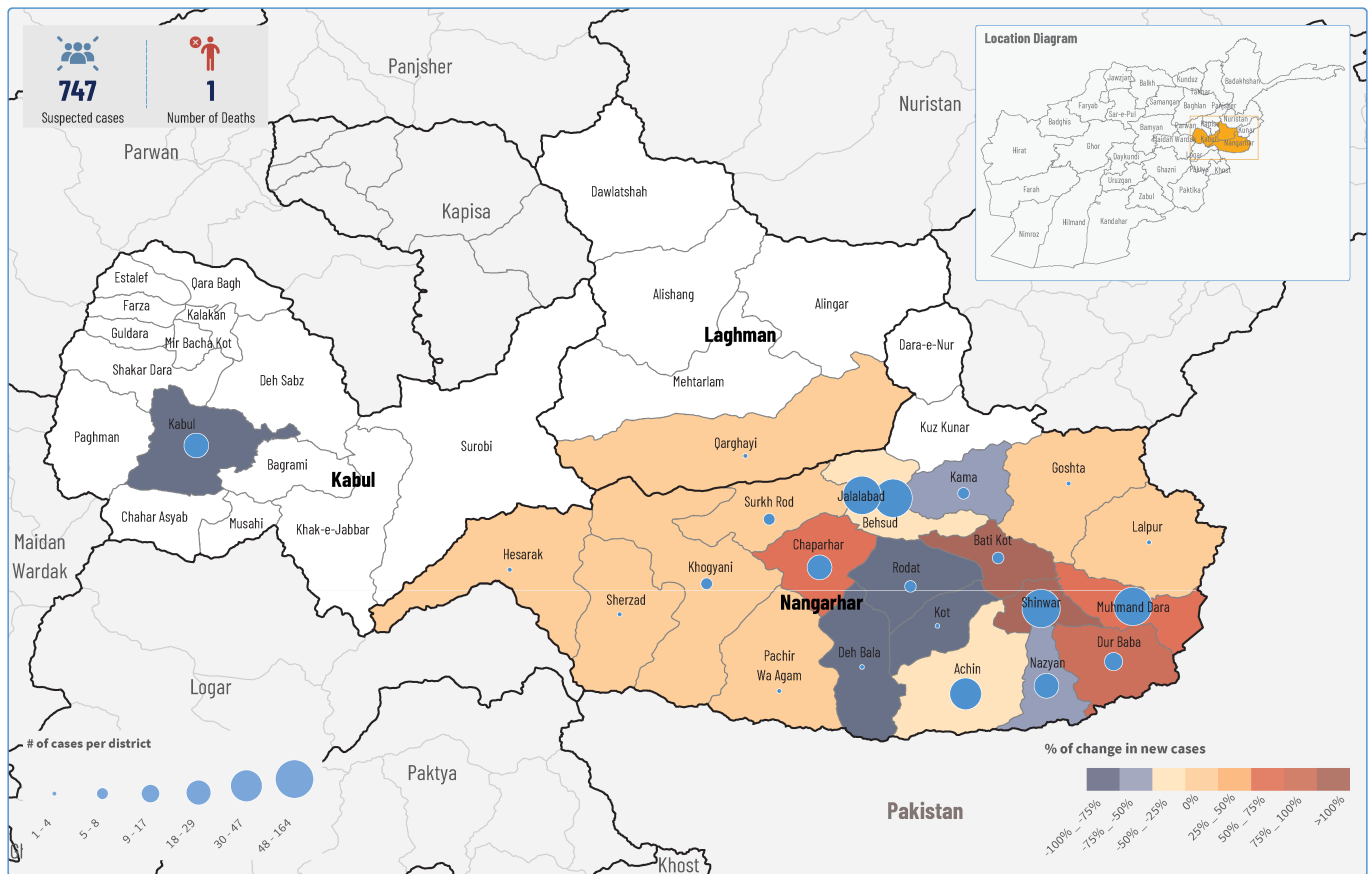


Figure 19. Weekly distribution of dengue fever cases in Afghanistan Jun-Nov 2022 (N=747)



Geographical distribution of suspected dengue fever cases in Afghanistan and weekly percent of changes (between weeks 43 and 44, 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: 05 November 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-Nov 2022 (N=747)

Response to the dengue fever outbreak

- Support Kabul infectious disease hospital (IDH) and Nangarhar regional hospital to provide the needed case management of suspected cases.
- Capacity building of deployed SSTs on sample collection, packing, transportation and use of RDTs.
- Capacity building of 6 laboratory technicians on the use of PCR and ELISA techniques to confirm the diagnosis of dengue fever.
- In response to the cases reported in Kabul, dengue fever vectors (*Aedes aegypti* and *Aedes albopictus*) have not been detected after extensive field investigation.
- Technical support to the response to the dengue fever outbreak in Nangarhar will be offered through a field mission between 6-13 November.



Figure 21. Dengue fever field visit in Nangarhar province, Afghanistan Nov 2022

Other infectious diseases outbreaks (Jan-Nov 2022)

CCHF Highlight:

- During week 44-2022, a total of 5 new suspected CCHF cases were reported from Kabul, Hirat, Nangarhar, Balkh and Ghazni provinces. This brings the total number of suspected CCHF cases to 372 from 25 provinces.
- Out of 372 cases, 295 (79.3%) were males and all were over five years of age.
- Out of 372 cases, 103 (27.7%) were lab confirmed using PCR.
- No new deaths have been reported for the last six weeks, and the total number of CCHF associated deaths remained

at 15 (Kabul (5), Hirat (3), Takhar (2), Kapisa (2), Nangarhar (2) and Badkhis (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 05 Nov 2022.



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

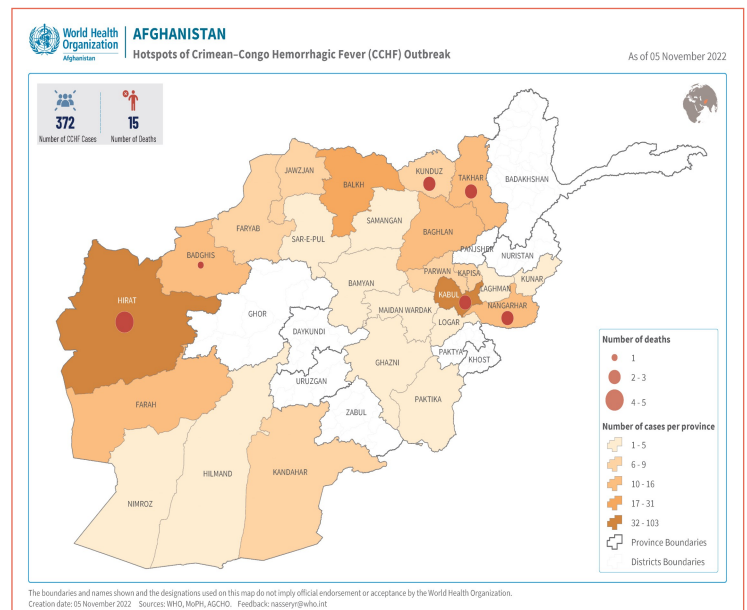


Figure 23. Hotspot areas of CCHF cases in Afghanistan, Jan-Nov 2022

Pertussis Highlight:

- No new suspected pertussis cases have been reported during week 44-2022; the total number of suspected cases remains 768 from 17 provinces.
- Out of the total 768 cases, 481 (62.6%) were children below 5 years and 365 (47.5%) were females.
- The highest number has been observed in Ghazni (188, 24.5%) followed by Kabul (167, 21.7%) and Kandahar (152, 19.8%) Figure 24.
- No new suspected pertussis associated deaths have been reported for the last nine weeks, and the total number of associated deaths remains at 15.
- As part of preparedness activities to respond to expected pertussis outbreak during upcoming winter season, required supplies prepositioning is ongoing in five provinces (Badakhshan, Jawzjan, Daikundi, Nooristan and Ghazni).

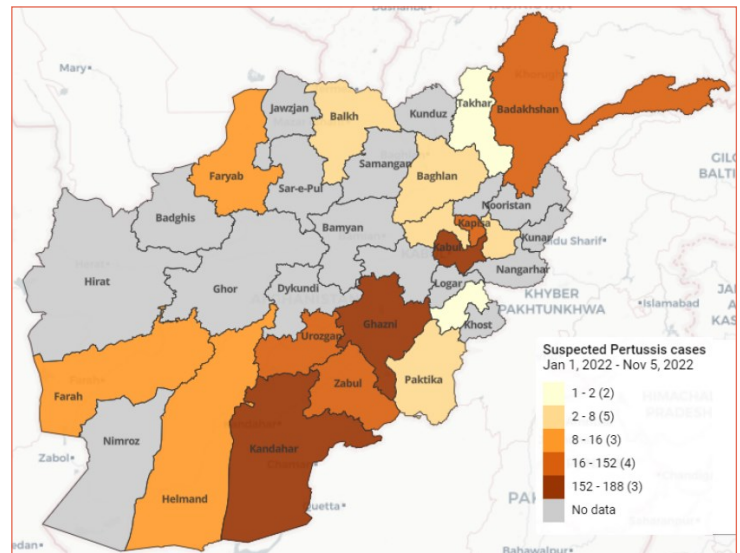


Figure 24. Geographical distribution of suspected pertussis cases in Afghanistan Jan - Nov 2022 (N=768)

Malaria Outbreak Highlight:

- During the last week, an outbreak of malaria was reported from Jangalbagh village of Nejrab district, Kapisa province. Initial investigation revealed that 6 lab confirmed cases were detected (4 (66.7%) were females and 2 (33.3%) were under 5).
- In Nangarhar (Sorkhroad district): during the last week, 59 new lab confirmed PF malaria cases have been detected which bring the total number of PF confirmed cases to 86 (57 (66.7%) were females and 29 (22.2%) were under 5).
- In Kandahar (Shorabak district): 683 cases (17.9% were females and 11.4% were under 5).
- 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 (55.1% were male and 2.0% were under 5).
- 32 malaria case management kits were supplied to Nangarhar province; 9 kits were distributed to outbreak affected area (Amarkhil village of Surkhrood district).
- Required medicine for case management and RDTs for diagnosis of suspected malaria were supplied by partners to the outbreak affected area.

Note: MOPH is the source of epidemiological data

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