Afghanistan

### **AFGHANISTAN**

INFECTIOUS DISEASE OUTBREAKS SITUATION REPORT | Epidemiological week #45



No. 66/ (06 to 12 Nov 2022)

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)	218,603	204,532	72,789	911	374	783	2,591
Deaths "CFR (%)"	<b>79</b> (0.04)	<b>7,829</b> (3.83)	<b>380</b> (0.52)	<b>2</b> (0.22)	<b>15</b> (4.01)	<b>15</b> (1.92)	0 (0.00)

## Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May to 12 Nov 2022)

Current Week	Cumulative Figures					
<b>4,448</b> new cases (58.2% under 5)	218,603 cases (<5 years, 55.2%)					
2 new deaths	79 deaths (75.9% < 5 years), CFR=0.04%					
2 new districts (Paktika and Ghazni) reported new alerts	172 districts in all 34 provinces					
36 samples collected	2,562 samples collected					

- During week 45-2022, a total of 4,448 new AWD cases with dehydration and 2 new deaths were reported which indicates 12.8% and 33.3% 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 (1,145, 25.7%), followed by Helmand (802, 18.0%), Baghlan (487, 10.9%) and Nangarhar (236, 5.3%) provinces.
- Out of newly reported 2 deaths, (1, 50.0%) was female and all were children below 5. Deaths were reported from 2 provinces Kabul and Baghlan.
- Cumulatively, Kabul (48,418, 22.1%), Helmand (38,420, 17.6%), Baghlan (14,678, 6.7%), Nangarhar (12,177, 5.6%), and Kandahar (11,766, 5.4%), are the most affected provinces (Figure 1).
- Out of the total 218,603 cases, 120,764 (55.2%) were children below 5 years and 109,386 (50.0%) 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 172 districts in 34 provinces.

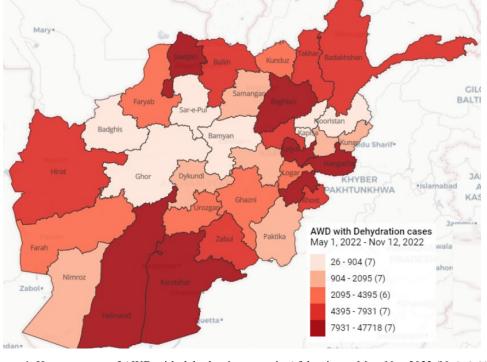


Figure 1. Hotspot areas of AWD with dehydration cases in Afghanistan, May-Nov 2022 (N=218,603)

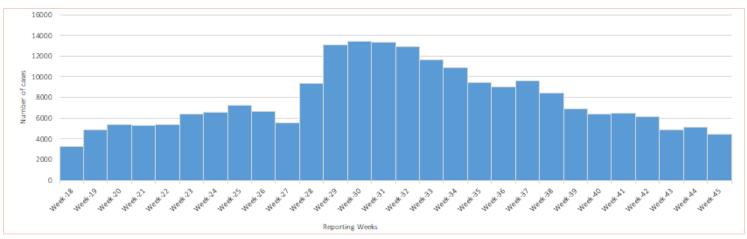


Figure 2. Weekly distribution of AWD with dehydration cases in Afghanistan May-Nov 2022 (N=218,603)

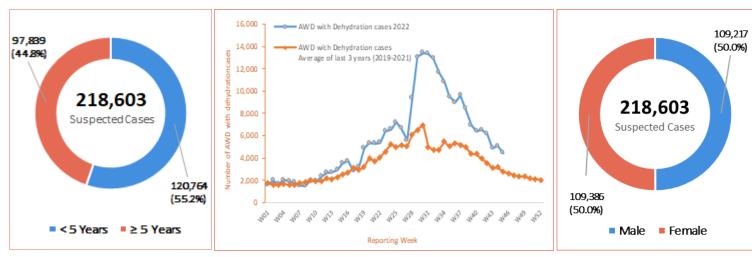


Figure 3. Distribution of AWD with dehydration cases by age groups in Afghanistan, May-Nov 2022

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. Training of AWD with dehydration case management to Healthcare workers in Zabul province, November 2022



Figure 5. Training session of newly recruited surveillance focal points on case definition, weekly watch chart, collection and reporting of data and outbreak investigation, 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) are 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.
- Supervisory visits 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, 50 healthcare workers (25 medical doctors and 25 nurses) were trained on AWD case management in Zabul province. The total number of HCWs trained

- on AWD case management reached to 1,414 in 30 provinces.
- Training of 255 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 to support 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 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 people in different locations of Kabul city is in progress.

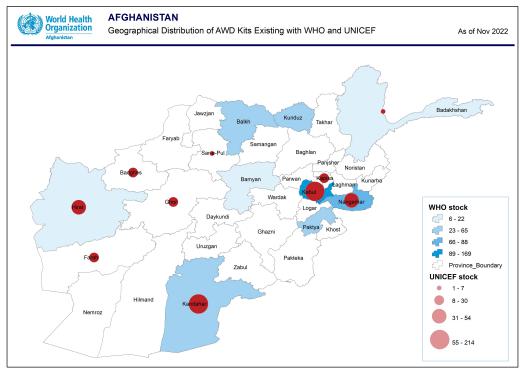


Figure 6. Distribution of existing AWD kits of WHO and UNICEF by province in Afghanistan, Nov 2022

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

Cumulative samples tested 752,473 In public laboratories only

**Cumulative confirmed cases** 204.532

Cumulative percent positivity (27.1%)

**Cumulative confirmed deaths** 7.829

CFR (3.8 %)

New samples tested in week 45 5.110 • 0%

In public laboratories only

New confirmed cases in week 45 800 8%

Weekly percent positivity (16%)

New confirmed deaths in week 45 40%



Weekly CFR (0.4%)

increasing decreasing on change Key:

## **COVID-19 Vaccination highlights**



Partially vaccinated: 1,684,429

At least one dose of any vaccine received: 12,196,763

Proportion of population\* who are fully vaccinated

26.8 %

Proportion of population\*

who at least received one dose

31.1 %

Table 1: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (19 Sep – 12 Nov 2022)

Indicators	W38-22	W39-22	W40-22	W41-22	W42-22	W43-22	W44-22	W45-22	Epi-curve
Samples tested (in public Lab.	7,398	6,505	6,617	5,930	6,275	5,099	5,123	5,110	
Confirmed cases	1,125	1,005	949	824	913	844	739	800	
Percent positivity (%)	15	15	14	14	15	17	14	16	
Confirmed deaths	1	5	4	5	7	3	5	3	****
CFR (%)	0.1	0.5	0.4	0.6	0.8	0.4	0.7	0.4	*****

### Highlights of the week

- Since the beginning of the pandemic in Feb 2020, a total of 752,473 samples have been tested for COVID-19 through the public laboratories.
- In week 45-2022, 5,110 samples were tested in public labs, of which 800 samples were positive for COVID-19 (test positivity of 16%) and 3 new deaths were reported. This represents 8% increase and 40% decrease in the number of newly reported cases and deaths, respectively, compared to week 44-2022 (Table 1).
- Cumulatively, 204,532 confirmed cases (overall test positivity of 27.1%) of COVID-19 with 7,829 associated deaths (case fatality ratio = 3.8%) have been reported in Afghanistan since Feb 2020.
- As of 12 Nov 2022, 88.9% of cases have recovered.
- In week 45-2022, 3 out of 8 regions reported increase in the number of newly reported cases compared to week 44. At the provincial level, the highest numbers of weekly new cases were reported from Nangarhar (195 cases), Ghazni (73 cases), Hirat (61 cases), Paktika (55 cases), and Dykundi (39 cases).

<sup>\*</sup>Total population: 39,269,174\*(Ref: UN estimation, AFG CMYP 2022)

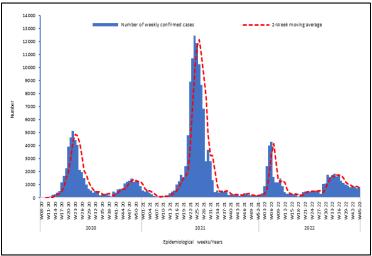


Figure 7: Weekly distribution of confirmed COVID-19 cases in Afghanistan (24 Feb 2020 - Nov 2022)

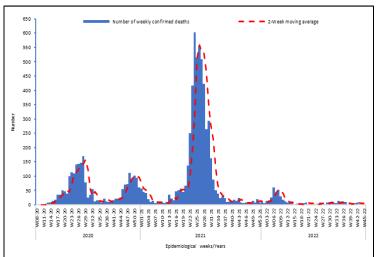


Figure 8: Weekly distribution of COVID-19 associated deaths in Afghanistan (24 Feb 2020 - Nov 2022)

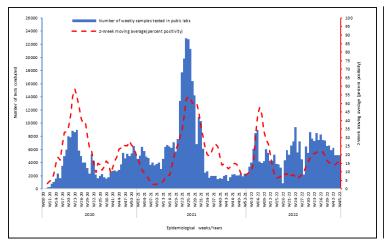


Figure 9: Number of weekly PCR tests conducted and 2-week moving average of percent positivity in Afghanistan (24 Feb 2020 – Nov 2022)

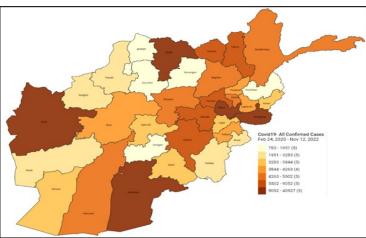


Figure 10: Geographic distribution of COVID-19 confirmed cases in Afghanistan (24 Feb 2020 - Nov 2022)

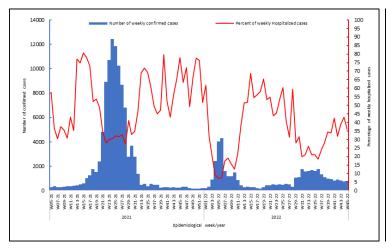


Figure 11: Weekly proportion of hospitalized cases out of new COVID-19 confirmed cases in Afghanistan as of (24 Feb - Nov 2022)

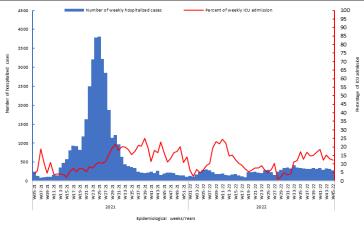


Figure 12: Weekly proportion of ICU admissions out of newly hospitalized COVID-19 cases in Afghanistan as of (24 Feb - Nov 2022)

# Measles outbreak (01 Jan to 12 Nov 2022)





380 Total deaths



9,253 Samples tested



5,466 Lab confirmed cases



59.1% Test positivity ratio

Table 2 summary of the measles outbreak in the last eight weeks (18 Sep- 12 Nov 2022)									
Indicators	W-38	W-39	W-40	W-41	W-42	W-43	W-44	W-45	Epi-curve
Suspected cases	473	578	539	548	469	524	631	544	
Deaths	1	1	2	0	0	0	0	2	
CFR (%)	0.21	0.17	0.37	0.00	0.00	0.00	0.00	0.37	

- During epidemiological week 45-2022, a total of 544 new cases and 2 new deaths were reported which indicates 13.8% decrease in the number of new cases compared to last week.
- Out of newly reported 2 deaths, all were female and children below 5. Deaths were reported from 2 provinces Badakhshan and Helmand.
- The average number of weekly suspected measles cases was 538 during the last 8 weeks (Figure 15).
- During the last week, the suspected measles cases have increased by 23.5% in West region only, as compared to the preceding week respectively (Table 3).
- The most affected provinces are Badakhshan (11.9%), Kabul (10.3%), Nangarhar (9.9%), Kunduz (7.8%), Helmand (7.7%), Takhar (5.3%) and Hirat (5.0%) (Figure 14).
- Out of the total 9,253 samples tested for measles, 5,466 were laboratory confirmed from Jan-Nov 2022.
- During the last two weeks, no new districts reported suspected measles cases (Figure 13).

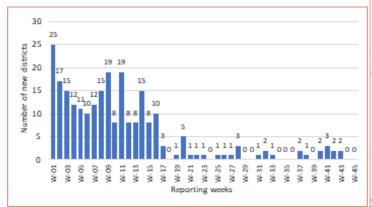
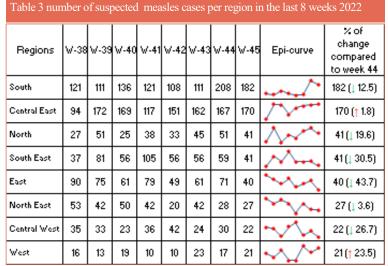


Figure 13. New districts reporting suspected measles cases on weekly



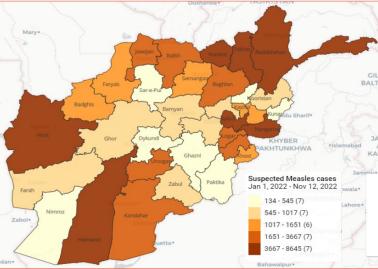


Figure 14. Geographical distribution of suspected measles cases in Afghanistan Jan - Nov 2022 (N=72,789)

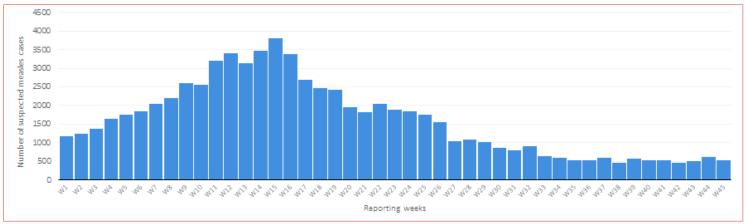
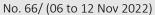


Figure 15. Weekly distribution of suspected measles cases in Afghanistan, Jan-Nov 2022 (N=72,789)



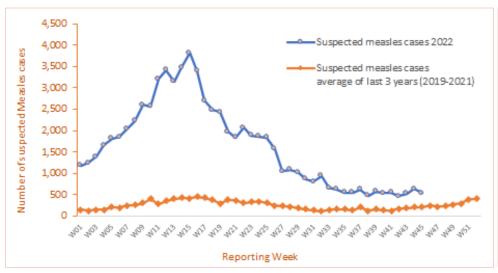


Figure 16. Comparing trend of suspected measles cases using 3 years average (2019-2021) vs 2022, in Afghanistan

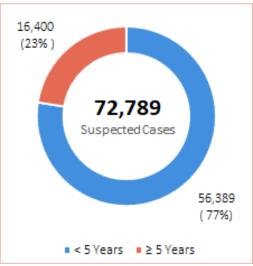


Figure 17. Distribution of suspected measles cases by age groups in Afghanistan, Jan-Nov 2022

### Response to Measles outbreak

- 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.
- The national immunization campaign, supposed to be conducted between 1-10 November, has been rescheduled to start on 26<sup>th</sup> November 2022 for 10 days.
- Cascade trainings to district coordinators, cluster supervisors and frontline workers will take place between 16

- and 23 November 2022 in all 34 provinces.
- As part of preparation activities, all dry supplies have been procured and supplied to 34 provinces.
- A total of 593 measles kits have been supplied to 28 provinces in 7 regions across the country to support case management.



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 12 Nov 2022)

### **Highlight:**

- A total of 164 suspected dengue fever cases and one death have been reported during week 45-2022 from Nangarhar (159) and Kabul (5) provinces which brings the total number of cases and deaths to 911 and 2, respectively as of 12 Nov 2022.
- The new cases reported from Kabul had recent travel history to Pakistan (endemic for dengue).
- Out of 911 reported cases, 180 (19.7%) were females and 906 (99.4%) were over five years of age.
- Out of 911 samples, 341 (37.4%) samples were positive using PCR (328 and 13 in Nangarhar and Kabul, respectively).
- The newly reported death this week was a 32-year old male, resident of Momandara district of Nangarhar province without any comorbidity.

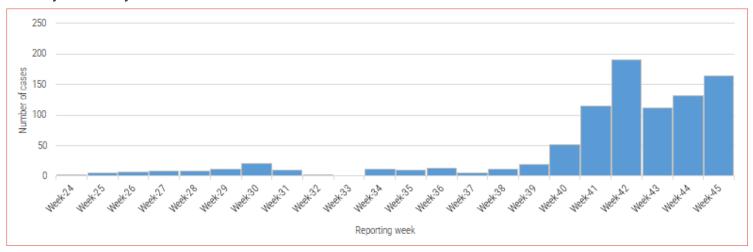
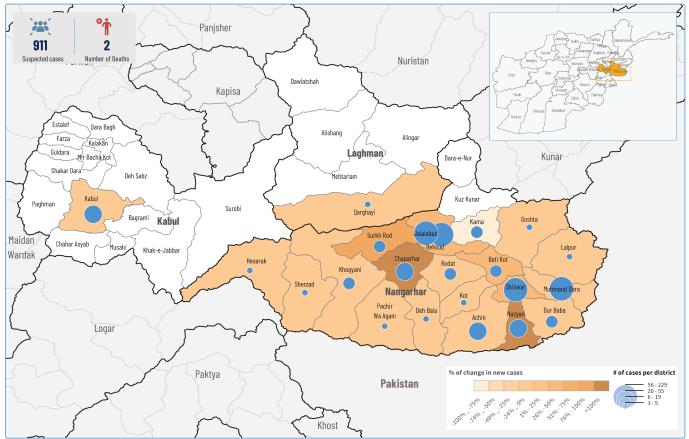


Figure 19. Weekly distribution of dengue fever cases in Afghanistan Jun-Nov 2022 (N=911)





The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization (WHO) concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries, the lines on map reperesent approxite border lines for which there may not yet be full agreement. Sources: MoPH, WHO, AGCHO. Creation date: 12 November 2022.

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

### Response to the dengue fever outbreak

- During the last week, two dengue fever PCR Kits (180 tests) were supplied to the Nangarhar RRL for detecting dengue fever pathogen.
- During the last week, WHO and MoPH conducted a joint mission to Nangarhar provinces to monitor the dengue outbreak investigation and response activities focusing on case detection and management, vector surveillance and vector control activities.
- During the mission, a task force has been developed and with the participation of PPHD, WHO, NDSR, vectoral control program, BPHS and EPHS implementers to coordinate the outbreak response activities.
- Surveillance support and entomology teams were provided with on-the-job training to conduct quality case and vector surveillance related activities.
- Two villages in the hotspot's areas were provided with awareness and health education sessions to reduce source of infection and prevent being infected.
- The BPHS implementers supplied the needed medicines (particularly paracetamol) to Torkham BHC and Ghanikhil DH.
- In response to the cases reported in Kabul, dengue fever vectors (Aedes aegypti and Aedes albopictus) have not been detected after extensive field investigation.

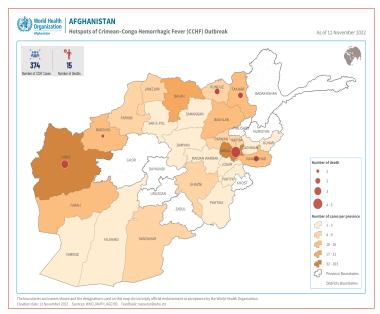


Figure 21. Dengue fever field visit in Nangarhar province, Afghanistan Nov

# Other infectious diseases outbreaks (Jan-Nov 2022)

### **CCHF Highlight:**

- During week 45-2022, a total of 2 new suspected CCHF cases were reported from Paktya and Ghazni provinces. This brings the total number of suspected CCHF cases to 374 from 26 provinces.
- Out of 374 cases, 295 (78.8%) were males and all were over five years of age.
- Out of 374 cases, 103 (27.5%) were lab confirmed using PCR.
- No new deaths have been reported for the last seven weeks, and the total number of CCHF associated deaths remained at 15 (Kabul (5), Hirat (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 Figure 22. Hotspot areas of CCHF cases in Afghanistan, Jan-Nov 2022 distributed to all regions.
- Totally, 91 healthcare workers (HCWs) have been trained on CCHF case management in 8 regions (33 provinces) as of 12 Nov 2022.



### Pertussis Highlight:

- During week 45-2022, a total of 15 new suspected pertussis cases were reported from Zabul (7), Kapisa (4), Kandahar (3) and Kabul (1) provinces, this brings the total number of suspected cases to 783 from 17 provinces.
- Out of the total 783 cases, 491 (62.7%) were children below 5 years and 374 (47.7%) were females.
- The highest number has been observed in Ghazni (188, 24.0%) followed by Kabul (168, 21.5%) and Kandahar (155, 19.8%) Figure 23.
- No new suspected pertussis associated deaths have been reported for the last ten 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).

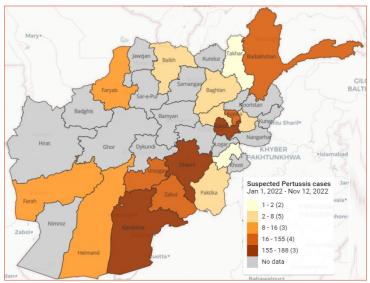


Figure 23. Geographical distribution of suspected pertussis cases in Afghanistan Jan - Nov 2022 (N=783)

### Malaria Outbreak Highlight:

- During week 45-2022, there was no indication of new outbreak while comparing trends in different locations. In total, the number malaria cases remained at 2,591 from 7 provinces, Kandahar 683 (26.4%), Laghman 663 (25.6%), Kunar 562 (21.7%), Badghis 552 (21.3%), Nangarhar 86 (3.3%) Farah 39 (1.5%) and Kapisa 6 (0.2%) as of 12 Nov 2022.
- Out of 2,591 cases, 1,112 (42.9%) were females and 419 (16.2%) were children below 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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