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INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #03-2024

No. 03 (14 - 20 Jan 2024)

Disease Outbreaks	ARI	COVID-19	AWD	Measles	CCHF	Dengue fever
Cumulative Cases 2024	118,815	673	6,435	1,929	20	136
Death 2024 (CFR %)	292 (0.2)	7 (1.0)	8 (0.1)	4 (0.2)	0 (0.0)	0 (0.0)
Cumulative Cases 2023	1,384,646	*230,647	222,249	25,876	1,243	1,496
Death 2023 (CFR %)	2,798 (0.2)	*7,972 (3.5)	101 (0.05)	64 (0.2)	114 (9.2)	1 (0.07)

Data from 603 (98.4%) out of 613 surveillance sentinel sites

* These figures represent the cumulative number of confirmed COVID-19 cases and associated deaths recorded from February 2020 to December 2023.

Acute Respiratory Infection (ARI)

(01-20 Jan 2024)



***118,815**

Total ARI Cases



***292**

Total Deaths



****283**

Samples tested for influenza



****21**

Lab confirmed influenza cases



7.4%

Influenza test positivity ratio

*Currently ARI related data (morbidity and mortality) are reported from 613 surveillance sentinel sites across 34 provinces in the country.

**Currently, there are 10 functional influenza surveillance sentinel sites for both ILI and SARI in ten provinces of Afghanistan. At each site, there is one trained influenza surveillance assistant, collecting specimen and epidemiological data from 4 ILI and 6 SARI cases per week in ARI season and sending them to National Influenza Center (NIC) for testing.

Table 1: Summary of the ARI outbreak in the last eight weeks (26 Nov 2023 - 20 Jan 2024)

Indicators	W48	W49	W50	W51	W52	W1-24	W2-24	W3-24	Trend lines
Suspected cases	34,056	34,762	34,514	35,793	38,719	38,071	38,881	41,863	
Suspected deaths	77	59	65	75	79	91	106	95	
CFR (%)	0.23	0.17	0.19	0.21	0.20	0.24	0.27	0.23	

- The epi curve shows an increase in ARI cases since the 3rd week of September 2023, which could be linked to the change of the season to cold weather across the country (Figure 1).
- During week 03-2024, a total of 41,863 cases of ARI pneumonia and 95 associated deaths were reported, which shows a 7.7% increase in the number of ARI cases and 10.4% decrease in the number of ARI-associated deaths compared to the previous week.
- Since 01 Jan 2024, a total of 118,815 ARI-pneumonia cases and 292 associated deaths were reported from 34 provinces. Out of the total cases, 74,613 (62.8%) were under-five children and 58,756 (49.5%) were females. The cumulative incidence by province is shown in Figure 2.
- Out of total deaths, 254 (87.0%) were under-five children and 121 (41.4%) were females.
- The current number of cases is higher than the average number of cases reported during the three preceding years (2020-2022), the higher number in 2023-24 could be explained by the improvement in reporting due to the enhancement of the surveillance system and expansion of surveillance sentinel sites. (Figure 3).
- Between Jan and Dec 2023, a total of 1,384,646 ARI-pneumonia cases (49.5% female, 61.5% under-5) and 2,798 deaths (46.1% female and 82.4% <5 children) with CFR=0.2% were reported. Also, 3,353 samples were collected for influenza, out of which 168 were reported positive (positivity rate, 5.0%).



Figure 1. The epidemiological curve of ARI Pneumonia cases in Afghanistan, 01 Jan 2023 – 20 Jan 2024 (1,503,461)

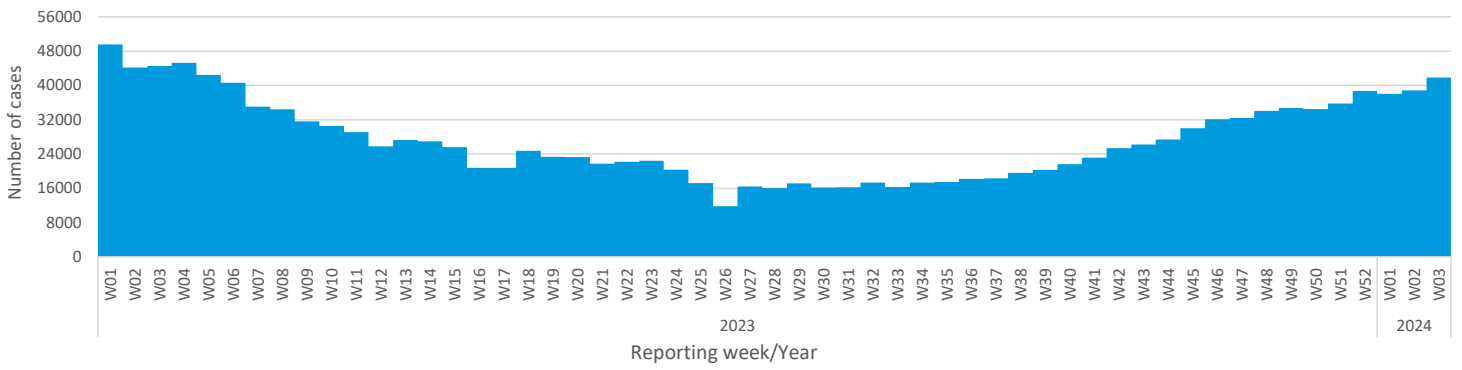


Figure 2. ARI pneumonia cumulative incidence per 10,000 population by province, Afghanistan 01-20 Jan 2024

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ARI pneumonia cumulative incidence per 10,000 population by province 01-20 Jan 2024

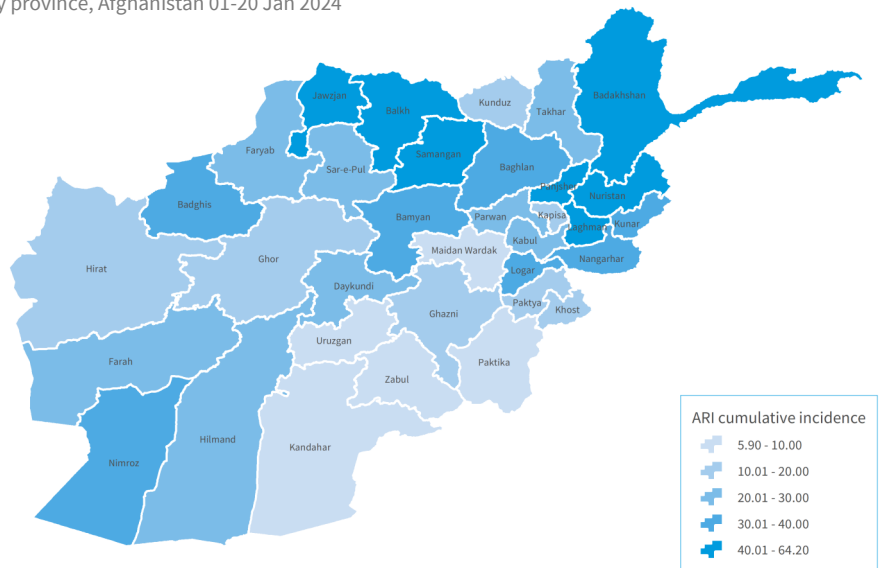
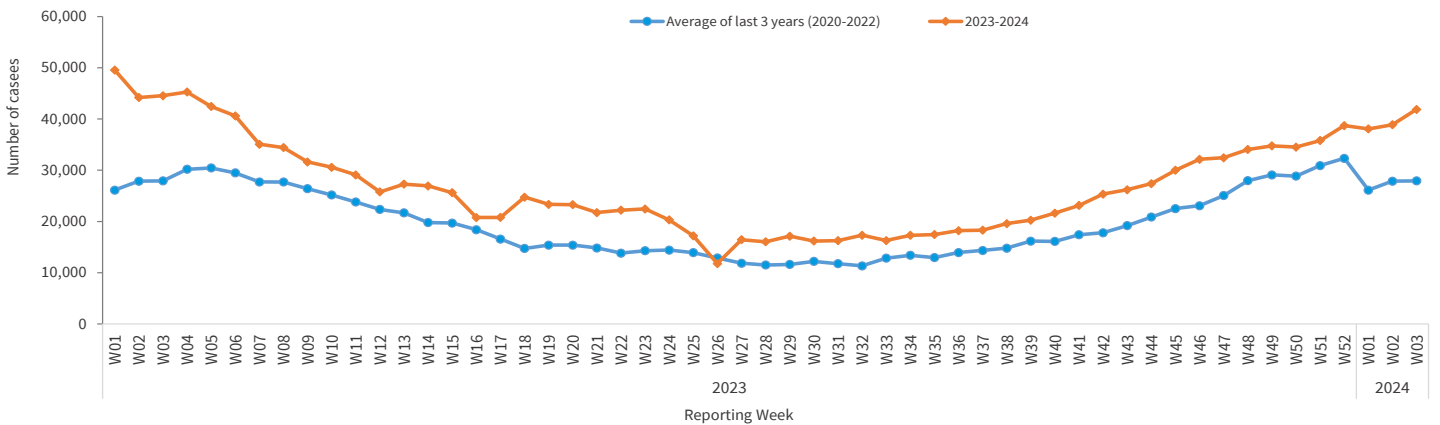


Figure 3. Comparison of ARI trend curve using 3 years average (2020-2022) vs 2023-2024



Response to acute respiratory infection outbreak

Surveillance

- Emergency Preparedness and Response Committees (EPR) are active at the provincial level.
- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.
- Supervisory visits have been conducted in different provinces to strengthen early detection and timely response to ARI outbreaks.

Lab and supplies

- Since 1 Jan 2024, a total of 6,500 VTM have been distributed to North-east and Central-east NDSR offices.

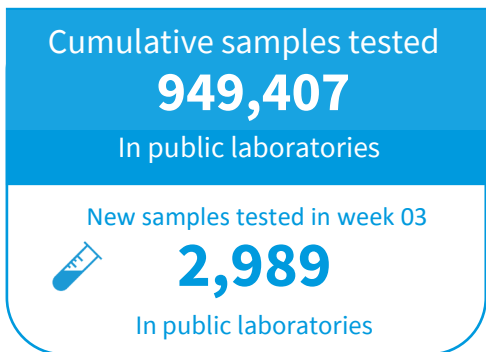
Case management

- As a part of the winter preparedness and response plan to ARI outbreak in 2023-24, a total of 397 case management kits have been prepositioned in WHO main office and regional sub-offices.

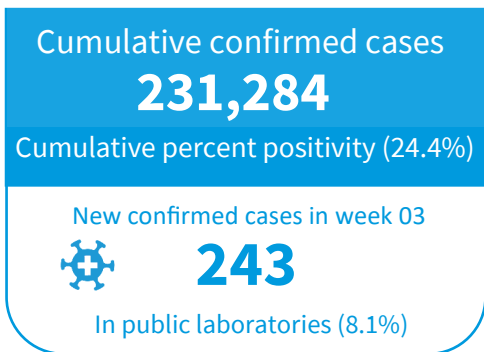
Risk Communication and Community Engagement (RCCE)

- During week 03-2024, the World Health Organization (WHO) co-led a meeting of the Risk Communication and Community Engagement (RCCE) Sub-working Group (SWG). The meeting was attended by over 13 representatives from various organizations involved in RCCE and the purpose of the meeting was to discuss the RCCE plans and priorities of health partners for the year 2024.

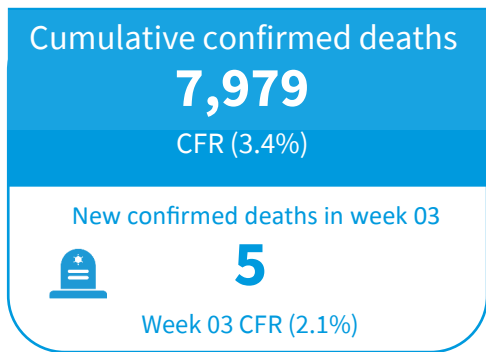
COVID-19 (24 Feb 2020 – 20 Jan 2024)



37.0%



27.2%



100.0%

Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights



Note: During Week 03-2024, around 43,358 doses of various COVID-19 vaccines have been administered which shows an 83.2% decrease compared to week 2-2024; also, the number of COVID-19 vaccinations was updated for week 2-2024 considering delay reporting.

* The total population (denominator) was changed from 39,269,174 (UN estimation) to 43,100,596 (OCHA estimation), therefore, the calculated proportions dropped.

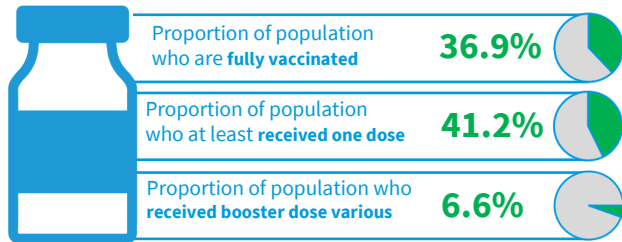


Table 2: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (26 Nov 2023 - 20 Jan 2024)

Indicators	W48	W49	W50	W51	W52	W01	W02	W03	Trend line
Samples tested (in public Labs)	2,720	3,508	3,227	3,372	2,872	2,566	2,182 *	2,989	
Confirmed cases	289	334	371	300	248	203	191 *	243	
Percent positivity (%)	10.6	9.5	11.5	8.9	8.6	7.9	8.8	8.1	
Deaths	2	0	6	3	0	2	0	5	
CFR (%)	0.7	0.0	1.6	1.0	0.0	1.0	0.0	2.1	

* A delayed reporting was experienced during week 02-2024, the number of samples tested, and the number of confirmed cases were modified from 2,136 to 2,182 and from 187 to 191, respectively.

- The epidemiological curve indicates a stabilization in the number of confirmed COVID-19 cases since the 3rd week of June 2023, which could be attributed to a decrease in attendance of infected individuals at healthcare facilities and an improvement in vaccination coverage among eligible populations across the country (36.9%).
- In week 3-2024, a total of 2,989 samples were tested in public labs, of which 243 samples were positive for COVID-19 (positivity rate 8.1%) and 5 associated deaths were reported.
- The number of confirmed COVID-19 cases shows a 27.2% increase compared to the previous week, while the number of deaths shows an increase from 0 in week 02-2024 to 5 in week 03-2024 (Figures 4-5).
- Since the beginning of the pandemic in Feb 2020, a total of 949,407 samples have been tested for COVID-19 through public laboratories.
- During week 03-2024, among 243 confirmed cases 7.7% (18 cases) were hospitalized and one of the 18 hospitalized cases was admitted to ICU (Figure 6).
- Between Jan and Dec 2023, a total of 162,472 samples were tested by public laboratories, of which 22,764 were positive (44.1% female, positivity rate 14.0%); also, 143 deaths (52.0% female) with CFR=0.6% were reported.

Figure 4. The epidemiological curve of confirmed COVID-19 cases and deaths in Afghanistan Feb 2020 – 20 Jan 2024

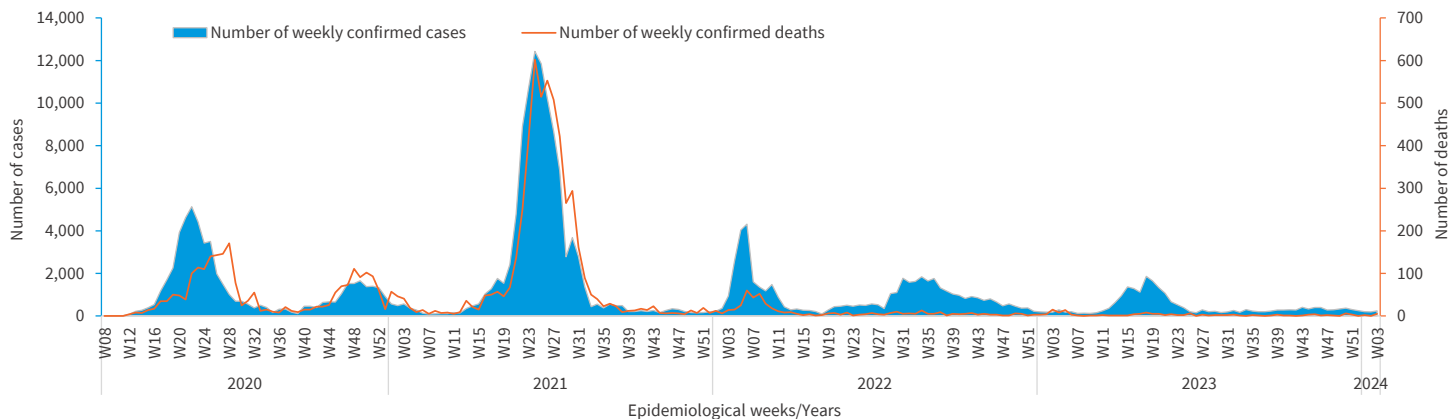


Figure 5. The epidemiological curve of confirmed COVID-19 cases and deaths in Afghanistan 01 Jan 2023 – 20 Jan 2024

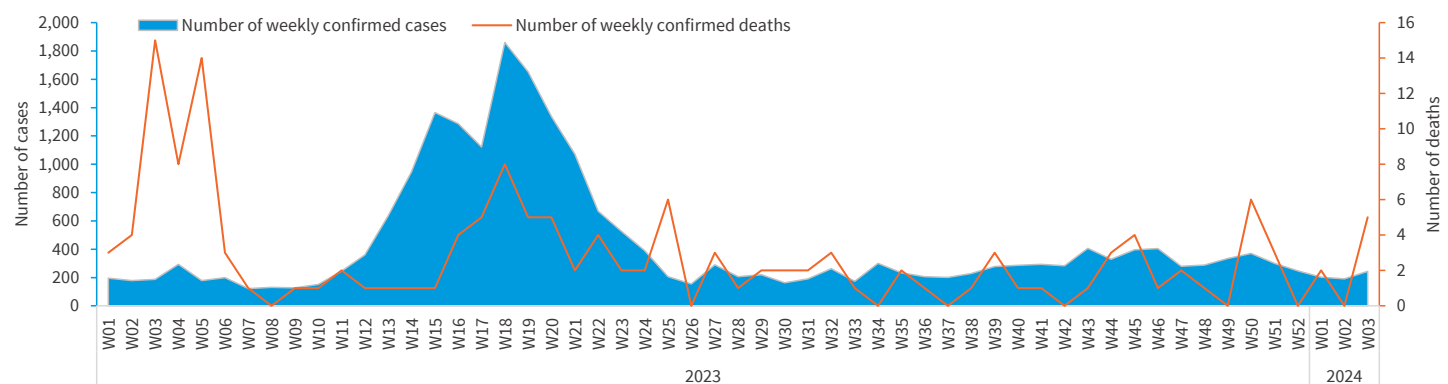
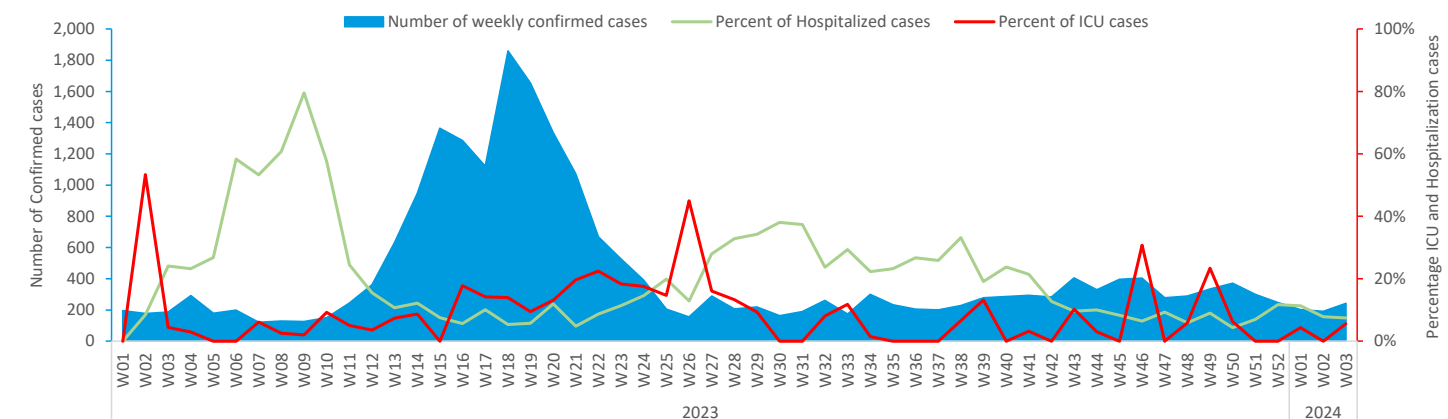


Figure 6. The weekly proportion of hospitalized and ICU cases out of newly confirmed COVID-19 cases in Afghanistan between 01 Jan 2023 to 20 Jan 2024



Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01-20 Jan 2024)

Table 3: Summary of the AWD with Dehydration outbreak in the last eight weeks (26 Nov 2023 - 20 Jan 2024)

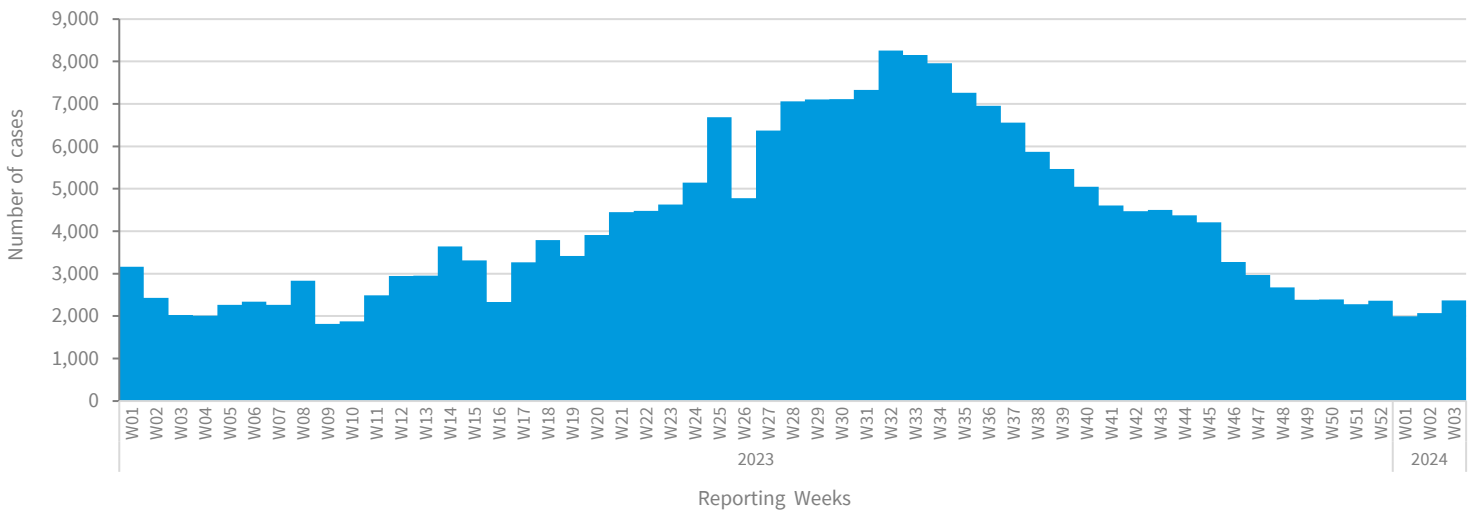
Indicators	W48	W49	W50	W51	W52	W01-24	W02-24	W03-24	Trend line
Suspected cases	2,676	2,382	2,395	2,281	2,363	1,995	2,068	2,372	
Suspected deaths	2	4	1	0	1	1	4	3	
CFR (%)	0.07	0.17	0.04	0.00	0.04	0.05	0.19	0.13	



- The epi-curve of AWD with dehydration cases shows a decreasing trend since the 4th week of August 2023. This decline could be explained by seasonal changes, the conclusion of the summer season in the country.
- During week 03-2024; 2,372 AWD with dehydration cases and 3 associated deaths were reported from 143 districts compared to 2,068 cases and 4 associated deaths in the previous week. (Figures 7 & 8).
- The deceased cases were reported from 3 provinces Kandahar (1), Badakhshan (1) and Baghlan (1); out of the total deaths, 2 (66.7%) were under-five children and 2 (66.7%) were females.
- Since 1 Jan 2024, a total of 6,435 AWD with dehydration cases were reported, out of which 3,566 (55.4%) were under-five children and 3,188 (49.5%) were females.
- During week 03-2024, no new district reported an alert of AWD with dehydration and the number of districts re-

- ported AWD with dehydration remained at 188 since the beginning of 2024.
- Since the beginning of 2024, a total of 156 rapid diagnostic tests (RDTs) were conducted among AWD with dehydration cases, of which 25 samples were reported positive (positivity rate 16.0%).
- Between Jan and Dec 2023, a total of 222,249 AWD with dehydration cases (49.8% female, 57.1% under-5) and 101 deaths (44.6% females, 81.2% under-5) with CFR=0.2% were reported. Also, 6,079 RDTs were conducted, of which 1,333 were positive (positivity rate 21.9%).

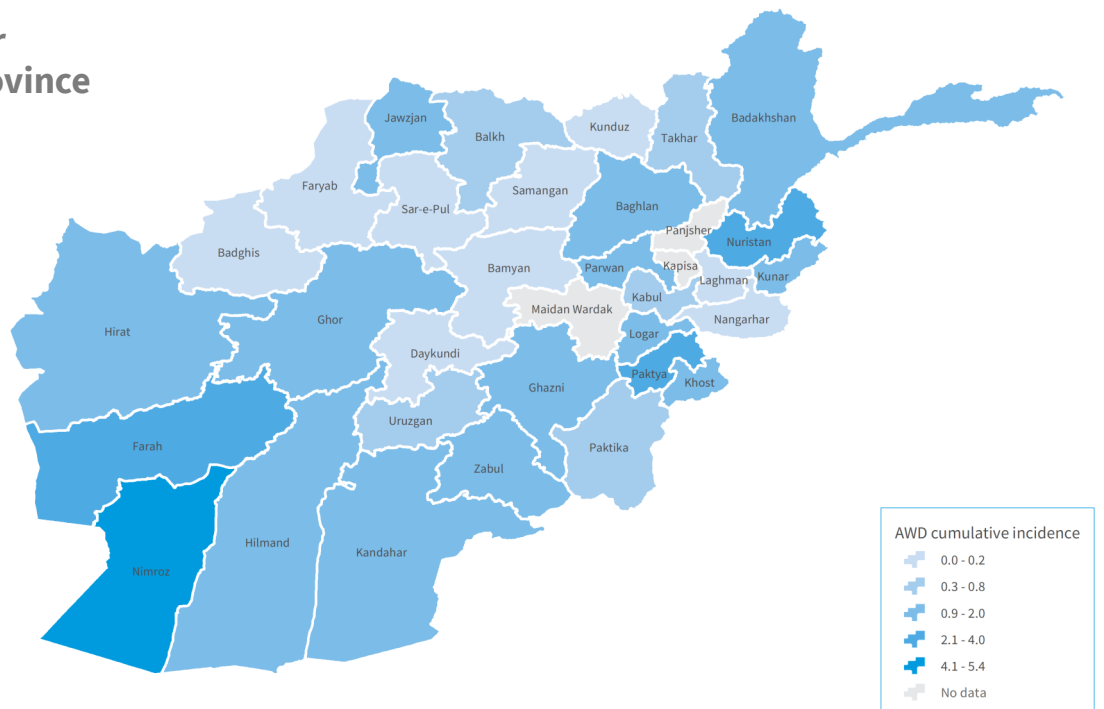
Figure 7. The epidemiological curve of AWD with dehydration cases in Afghanistan 01 Jan 2023– 20 Jan 2024 (N= 228,684)



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AWD with dehydration cumulative incidence per 10,000 population by province 01 - 20 Jan 2024

Figure 8. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 01 - 20 Jan 2024



Preparedness and response to the AWD Outbreak

Leadership and Coordination

- Emergency Preparedness and Response Committees (EPR) are active at the provincial level.
- An integrated AWD preparedness plan has been developed jointly between Health and WASH clusters and endorsed by the Ministry of Public Health.

Surveillance

- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.
- Supervisory visits have been conducted in different provinces to strengthen early detection and timely response to AWD outbreaks.

Case Management

- Case management kits supplied during 2023 are being used for responding to AWD with dehydration outbreak cases reported since 01 Jan 2024.

Laboratory and Supplies

- Laboratory kits supplied during 2023 are being used for the confirmation of AWD with dehydration outbreak cases reported since 01 Jan 2024.

WASH

During the first two weeks of Jan 2024 (01-15 Jan 2024), the following activities were conducted as WASH response:

- Provision of clean water to 6,700 individuals by chlorination of 177 wells in Kabul province.
- Establishment and/or rehabilitation of water supply system to 891 individuals in Nangarhar and Paktya provinces.
- Installation of emergency latrines sufficient for 25,490 individuals in Herat province.
- Conducting hygiene promotion sessions to 150,400 individuals in 7 provinces (Ghazni, Hirat, Kabul, Kunar, Laghman, Nangarhar, and Paktya).
- Distribution of hygiene kits to 143,950 individuals in 5 provinces (Hirat, Kabul, Kunar, Laghman, and Nangarhar).

Risk Communication and Community Engagement (RCCE)

- During week 3-2024, RCCE materials printed in 2023 are being used in outbreak investigations and response to AWD with dehydration outbreaks.

Measles Outbreak (01-20 Jan 2024)



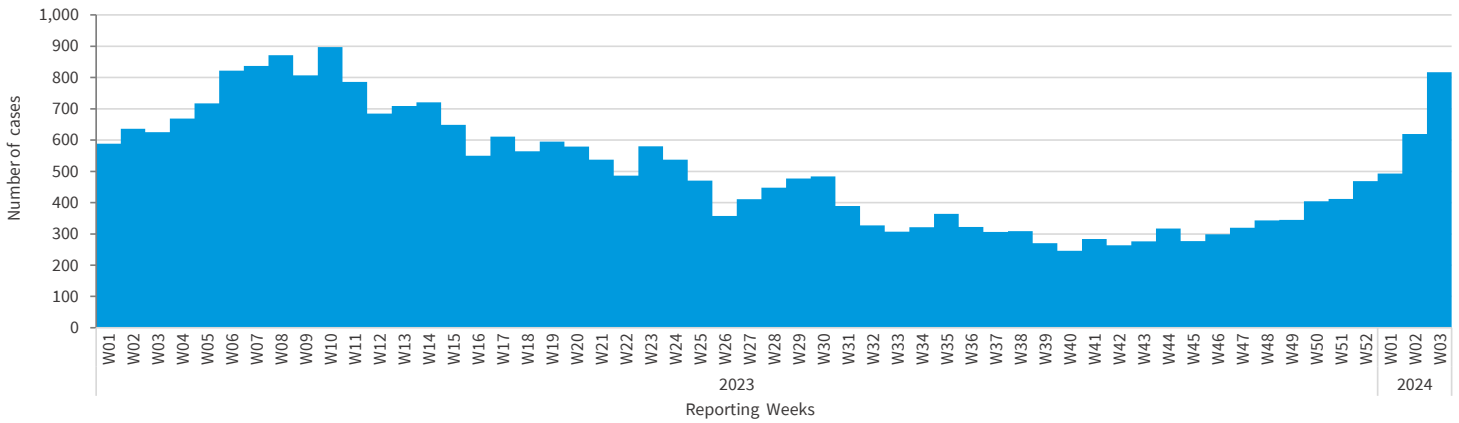
Table 4: Summary of the suspected measles outbreak in the last eight weeks (26 Nov 2023 - 20 Jan 2024)

Indicators	W48	W49	W50	W51	W52	W01-24	W02-24	W03-24	Trend line
Suspected cases	343	345	404	412	469	493	619	817	
Suspected deaths	0	0	0	0	0	0	2	2	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.3	0.2	

- The epidemiological curve of suspected measles cases demonstrates a rising trend since the third week of November 2023, which could be explained by increased community transmission exacerbated by the winter season and low immunization coverage (Figure 9).
- During week 03-2024, a total of 817 suspected cases and 2 measles-associated deaths were reported which shows a 32.0% increase in the number of suspected measles cases and stabilization in the number of deaths compared to the previous week.
- The 2 deceased cases were: one under-five male from Herat and one over five female from Farah provinces.
- Since Jan 2024, a total of 1,929 suspected measles cases and 4 deaths (CFR=0.2%) were reported. Among suspected measles cases, 1,563 (81%) were under-five children and 896 (46.4%) were females.
- Between Jan and Dec 2023, a total of 25,876 suspected measles cases (47.1% female, 71.5% under 5) and 64 deaths (43.8% females, 92.2% under 5) with CFR=0.2% were reported. Also, 5,497 samples were tested; of which 2,639 were positive (positivity rate= 48.0%).



Figure 9. The epidemiological curve of suspected measles cases in Afghanistan, 01 Jan 2023 to 20 Jan 2024 (N= 27,805)



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Suspected measles cumulative incidence per 10,000 population by province 01-20 Jan 2024

Figure 10. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 -20 Jan 2024

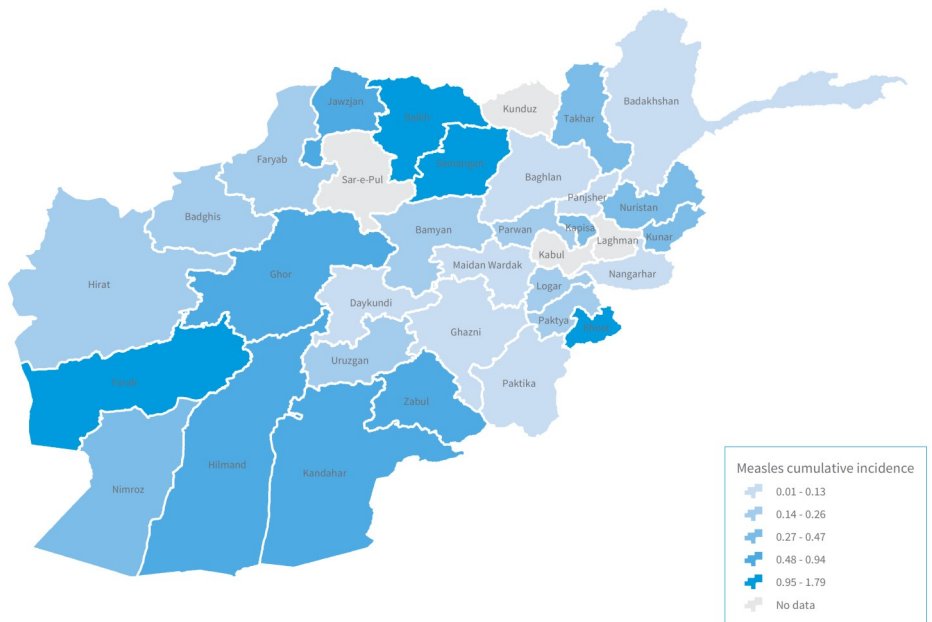
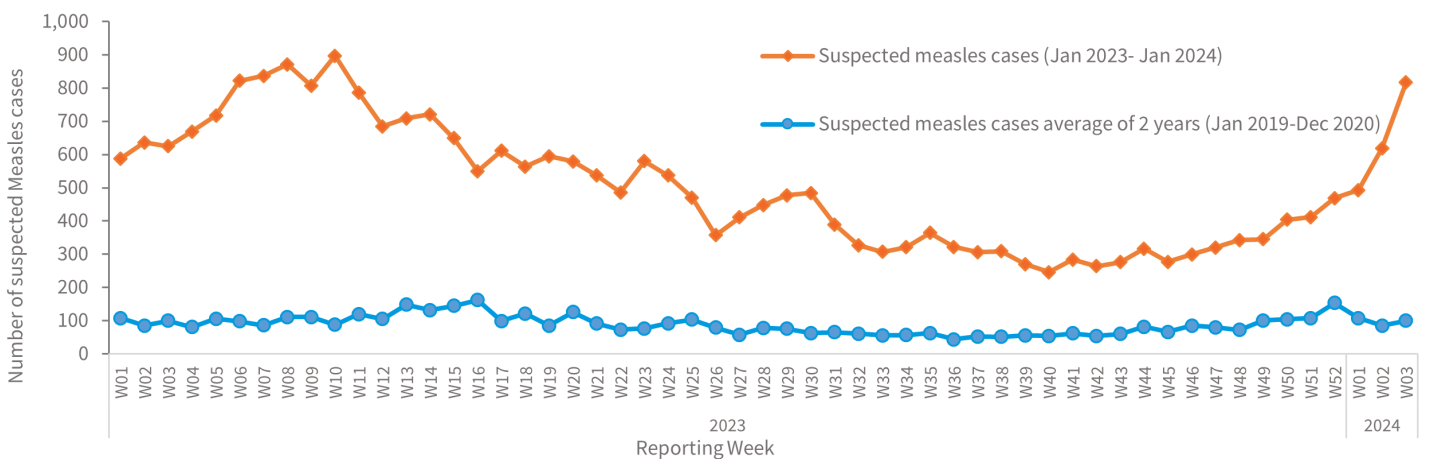


Figure 11. Comparison of suspected measles trend curve using 2 years average (2019-2020) vs 2023-2024, Afghanistan



Comparing the 2023-24 trend with the trend for the average number of suspected cases reported during 2019-2020; reveals that despite efforts to control the outbreak, measles cases are still occurring at a higher rate during years 2023-24 as compared to the endemic level during 2019-2020 (Figure 11).

Preparedness and response to the Measles Outbreak

- During week 3-2024, a total of 54 children aged 9-59 months were vaccinated in the Garm Seer district of Helmand and Ghorak district of Kandahar provinces as a response to the measles outbreak by the implementing partner. This brings the total number of children aged 9-59 months vaccinated for measles to 75 in 3 provinces (Kandahar, Helmand and Zabul) since 1 Jan 2024.

Outbreak of Crimean Congo Hemorrhagic Fever (CCHF) (01-20 Jan 2024)

Table 5: Summary of the CCHF outbreak in the last eight weeks (26 Nov 2023 - 20 Jan 2024)

Indicators	W48	W49	W50	W51	W52	W01-24	W02-24	W03-24	Trend line
Suspected cases	5	3	0	2	7	3	10	7	
Suspected deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

- The epi-curve for Crimean-Congo Hemorrhagic Fever (CCHF) indicates a decreasing trend in the number of suspected CCHF cases since 3rd week of September 2023. This decline could be attributed to seasonal changes towards winter and response activities (Figures 12 & 13).
- During week 03-2024, 7 new suspected CCHF cases with no associated deaths were reported, compared to 10 cases reported in the previous week (Table 5).
- Since 01 Jan 2024, 20 suspected cases of CCHF with no associated deaths were reported. All the suspected cases were over five years of age, while 6 (30.0%) of them were females.
- In total, 6 samples of suspected CCHF cases were tested since the beginning of 2024, of which none of them were reported positive (positivity rate 0.0%).
- Between Jan and Dec 2023, a total of 1,243 suspected CCHF cases (27.2% females, 0.2% under-5) and 114 deaths (27.2% female, 100.0% over 5) with CFR=9.2% were reported. Also, 1,098 samples were tested; of which 383 were positive (positivity rate 34.9%).

Figure 12: The epidemiological curve of CCHF cases in Afghanistan 01 Jan 2023 – 20 Jan 2024, (N=1,263)

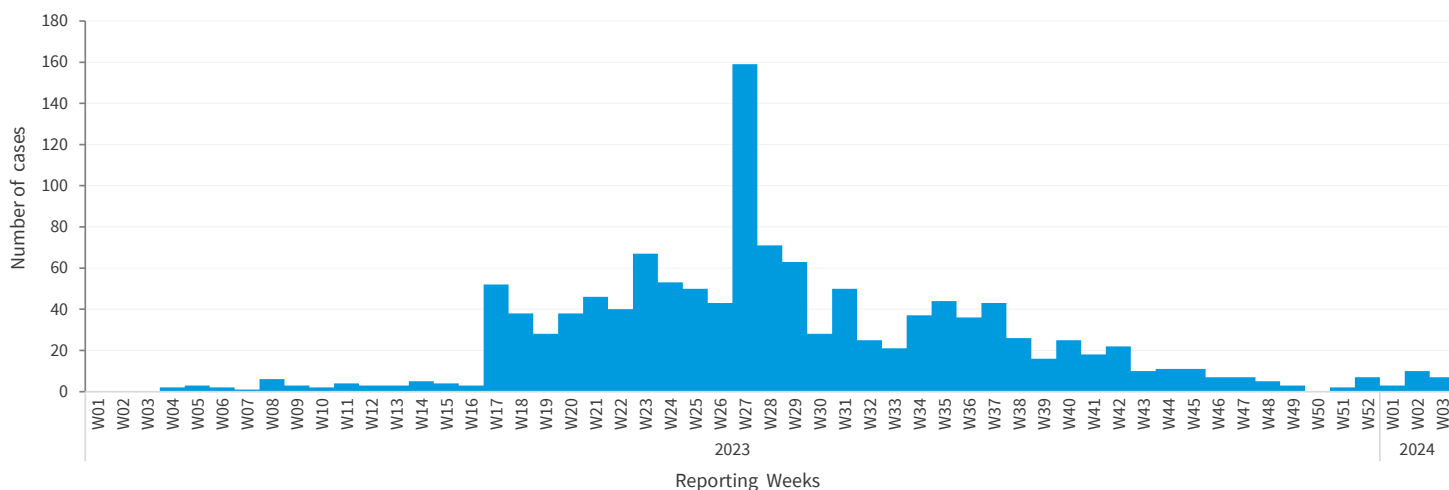
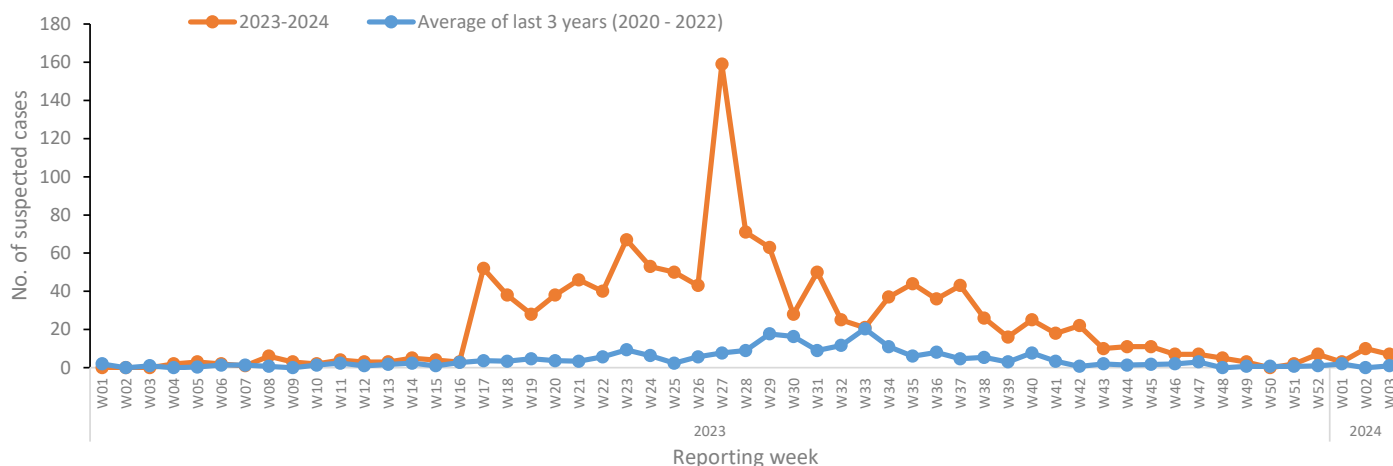


Figure 13. Comparison of trend curves for suspected CCHF cases using 3 years average (2020-2022) vs 2023-2024, Afghanistan

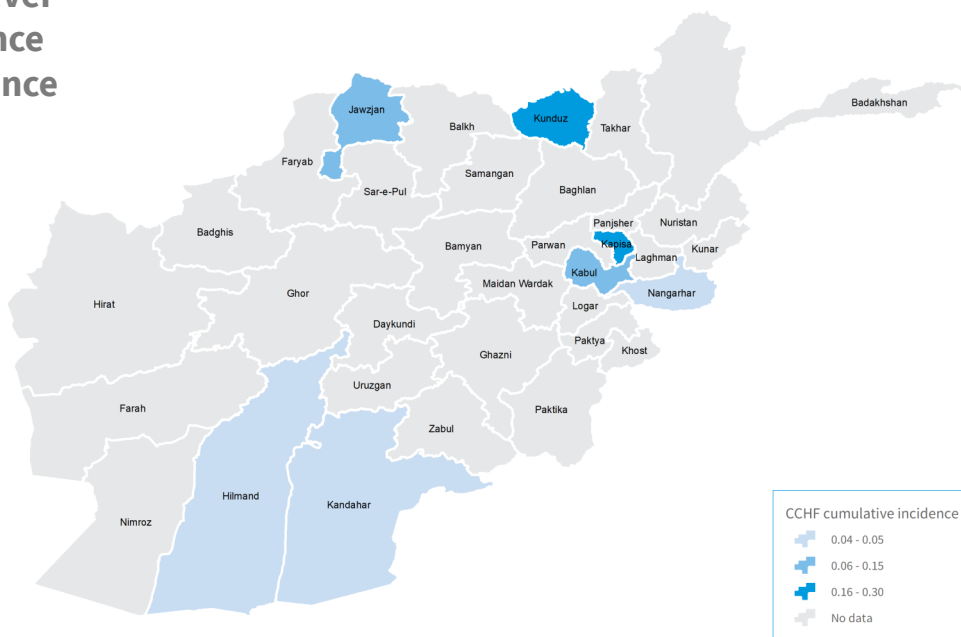




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Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province 01-20 Jan 2024

Figure 14. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province in Afghanistan, 01 -20 Jan 2024



Response to CCHF outbreak during 2023

Coordination and leadership (during 2023)

- A 2-day national workshop was conducted in Kabul-Afghanistan focused on implementing the One Health approach and involved various stakeholders, including experts from organizations like WHO, FAO, MoPH, NEPA, MAIL, Dairy Form Union, and Kabul University's veterinary department. The workshop covered six key areas: leadership and governance, multisectoral coordination, environmental health, zoonotic disease, food safety, and antimicrobial resistance, highlighting existing structures, gaps, and challenges. The main recommendations from the workshop included securing government support and creating a strategic national plan, along with establishing a national-level Technical Working Group (TWG).

Surveillance

- During week 03-2024, a total of 168 tick samples, and 86 blood samples were collected from cattle in 14 districts of Kabul province. This brings the total number of tick samples and blood samples to 268 and 171, respectively since Jan 2024.
- During week 03-2024, a total of 2015 households' animal stables were sprayed in 14 different districts of Kabul province (Qarabagh, Kalakan, MirBachkot, Guldara, Shakar Dara, Paghman, Bagrami, Mosawi, Charasyab, Khaki Jabar, Deh Sabz, Shorubi, Farza, and Estalif). This brings the total number of households sprayed by insecticides to 2,115 households since Jan 2024.
- During week 03-2024, awareness sessions related to the source, route of transmission, and signs and symptoms of CCHF were conducted in the households of targeted 14 districts.
- Since Jan 2024, more than 100 animal shelters have been sprayed with insecticide in 14 districts of Kabul province.
- Since Jan 2024, the spraying activities have been conducted in 4 live animal markets in Kabul province (Company, Qarabagh, Sarai Shamali, and Arzan Qimat).

- Since Jan 2024, a total of 280 veterinarians have been trained on the case definition of CCHF as well as the collection, storage, and transportation of the blood and tick samples to the Central Veterinary Diagnostic and Research Laboratory (CVDRL) for confirmation and vector control activities.
- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.

Laboratory and supplies

- During week 03-2024, a total of 469 doses of ribavirin 200mg film-coated tablets and 1,530 ribavirin injections were supplied to 7 WHO sub-offices across the country.

Case management

- Case management supplies delivered during 2023 are being used for responding to CCHF outbreak cases reported since 01 Jan 2024.

Risk Communication and Community Engagement (RCCE)

- Since Jan 2024, 700 butchers received training on preventive measures against CCHF and the safe handling of animals through the partnership with the Food and Agriculture Organization (FAO).

Dengue Fever Outbreak (01-20 Jan 2024)



136
Total Cases



0
Total Deaths



63
Sample tested



48
Lab confirmed cases



76.2%
Test positivity ratio

Table 6: Summary of the Dengue fever outbreak in the last eight weeks (26 Nov 2023 - 20 Jan 2024)

Indicators	W48	W49	W50	W51	W52	W01-24	W02-24	W03-24	Trend line
Suspected cases	50	77	33	61	44	50	31	55	
Deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

- Overall, the epidemiological curve depicts a rising trend in suspected dengue fever cases starting from the last week of Aug 2023; this could be linked to increased vector activity and enhanced surveillance in vector-borne disease detection and reporting (Figures 15 & 16).
- During week 03-2024, 55 suspected cases of dengue fever were reported from 2 province; Nangarhar (49) and Ghazni (6), compared to 31 suspected dengue fever cases reported in the previous week.
- Since 01 Jan 2024, a total of 136 suspected cases of dengue fever and no deaths were reported (Figure 17), out of which, 73 (53.7%) were females and 1 (0.7%) was under 5 years of age.
- The first-ever confirmed cases of dengue fever were reported from the provincial hospital of Ghazni province during week 3-2024. The confirmed cases were a male 14-year-old and a female 11-year-old from the Langar Khail area of Ajeristan district, Ghazni province. A family of 6 members was admitted to the PH hospital of Ghazni province on 16 Jan 2024 with fever, cough, sore throat, anorexia, malaise, nausea, and general body pain. After lab examination for dengue by ELISA, the results of 2 individuals were confirmed positive.
- Since Jan 2024, a total of 63 samples have been collected, out of which 48 were confirmed (positivity 76.2%).
- Between Jan and Dec 2023, a total of 1,496 suspected dengue fever cases (48.3% females, 2.3% under 5 children) and 1 death with CFR=0.07% were reported. Also, 921 samples were tested; out of which, 356 (positivity rate 38.7%) were positive.

Figure 15. The epidemiological curve of dengue fever cases in Afghanistan 1 Jan 2023 – 20 Jan 2024, (N=1,632)

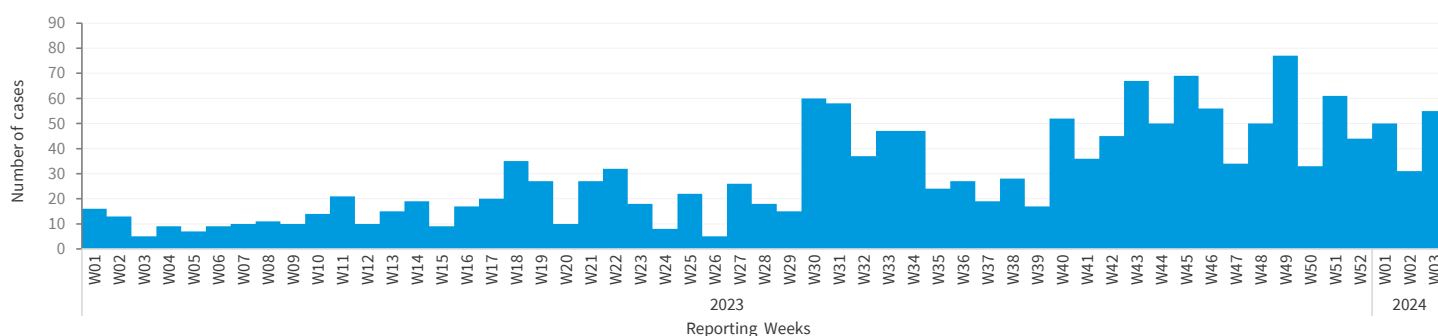


Figure 16. Comparison of trend curves for suspected dengue fever cases using 3 years average (2020-2022) vs 2023-2024,

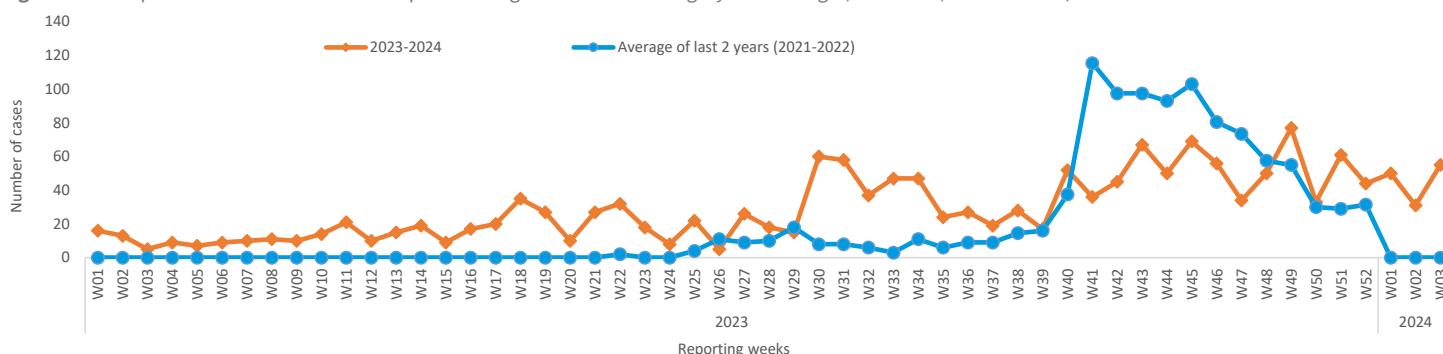
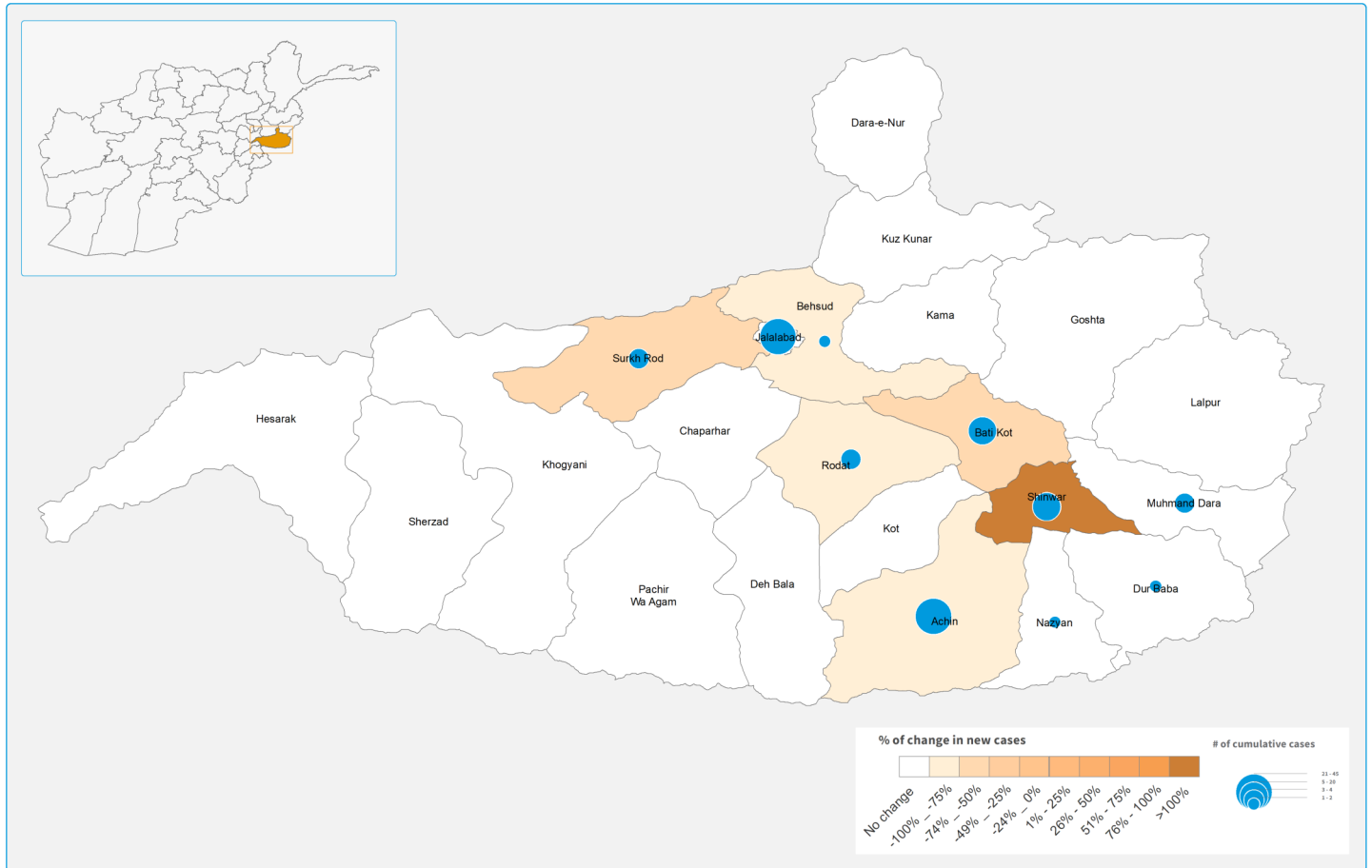




Figure 17. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01-20 Jan 2024



Geographical distribution of suspected dengue fever cases in Nangarhar province and weekly percent of changes
(between weeks 02 and 03, 2024)



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 represent approximate border lines for which there may not yet be full agreement. Sources: MoPH, WHO, AGCHO. Creation date: 13 Jan 2024.

Response to the dengue fever outbreak

- During week 03-2024, 380 Kits (10 tests/kit) of dengue RDTs were delivered to Nangarhar, Laghman and Kunar NDSR offices.
- Emergency Preparedness and Response Committees (EPR) are active at the provincial levels.
- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.
- Supervisory visits have been conducted in different provinces to strengthen early detection and timely response to dengue fever outbreaks.

Note: MOPH is the source of epidemiological data

Case definition & alert/outbreak thresholds

Contact us for further information:

- Dr. Mohamed Tahoun, MD, MPH, PhD : Head of Infectious Hazard Preparedness, WHO-CO, (tahounm@who.int)
- Dr. Mohammad Omar Mashal, MD, PhD: National Surveillance Officer WHO-CO, (mmashal@who.int)
- Mr. Hafizullah Safi, BSF, MBA, MPH: Data Management Officer, WHO-CO, (safih@who.int)
- Mr. Abdul Wahid Amiri: Surveillance Data Analyst, WHO-CO, (amiria@who.int)