



AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #14-2024

No. 14 (31 Mar-06 Apr 2024)

Disease Outbreaks

Cumulative Cases 2024

Cumulative deaths 2024 (CFR %)

Measles

16,105

83 (0.5)



ARI

529,811

1,220 (0.2)



COVID-19

3,334

22 (0.7)



AWD

26,597

13 (0.1)



CCHF

73

1 (1.4)



Dengue fever

636

0 (0.0)

(Data from 613 (100.0%) out of 613 sentinel sites)

Measles Outbreak (01 Jan-06 Apr 2024)



16,105

Total Cases



83

Total Deaths



4,329

Sample tested



2,497

Lab confirmed cases



57.7%

Test positivity rate

Table 1: Summary of the suspected measles outbreak in the last eight weeks (11 Feb – 06 Apr 2024)

Indicators	W07	W08	W09	W10	W11	W12	W13	W14	Trend line
Suspected cases	1,118	1,190	1,236	1,460	1,618	1,642	1,435	1,535	
Suspected deaths	6	5	8	9	9	7	9	12	
CFR (%)	0.5	0.4	0.6	0.6	0.6	0.4	0.6	0.8	

- The epidemiological curve of suspected measles cases demonstrates a rising trend since the third week of November 2023. This could be explained by increased community transmission exacerbated by the winter season and low immunization coverage (Figure 1, 3).
- During week 14-2024, a total of 1,535 suspected cases and 12 associated deaths were reported, which shows a 7.0% and 33.3% increase in the number of suspected cases and deaths compared to the preceding week, respectively.
- The 12 deaths were reported from 6 provinces: Kandahar (5), Helmand (2), Herat (2), Kabul (1), Kunduz (1), and Kapisa (1); all deaths were under-five children, while 7 (58.3%) of them were females.
- Since the beginning of 2024, a total of 16,105 suspected measles cases and 83 deaths (CFR=0.5%) were reported. Among suspected measles cases, 12,960 (80.5%) were under-five children, and 7,269 (45.1%) were females.
- Considering the number of suspected cases since the beginning of 2024, the highest cumulative incidence of suspected measles per 10,000 population is in Samangan (12.9) followed by Balkh (12.2), Khost (9.6), and Farah (9.4) provinces (Figure 2).

Figure 1. The epidemiological curve of suspected measles cases in Afghanistan, 01 Jan to 06 Apr 2024 (N= 16,105)

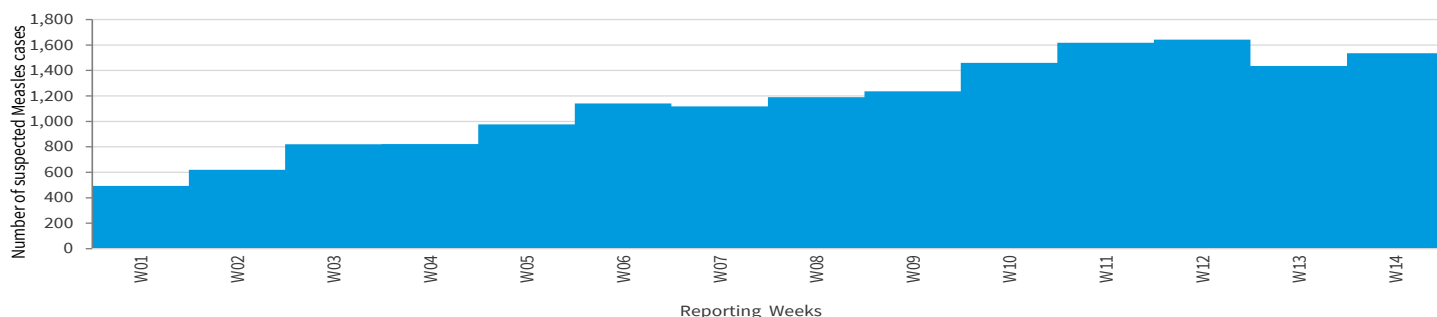




Figure 2. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 Jan-06 Apr 2024

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Suspected measles cumulative incidence per 10,000 population by province 01 Jan—06 Apr 2024

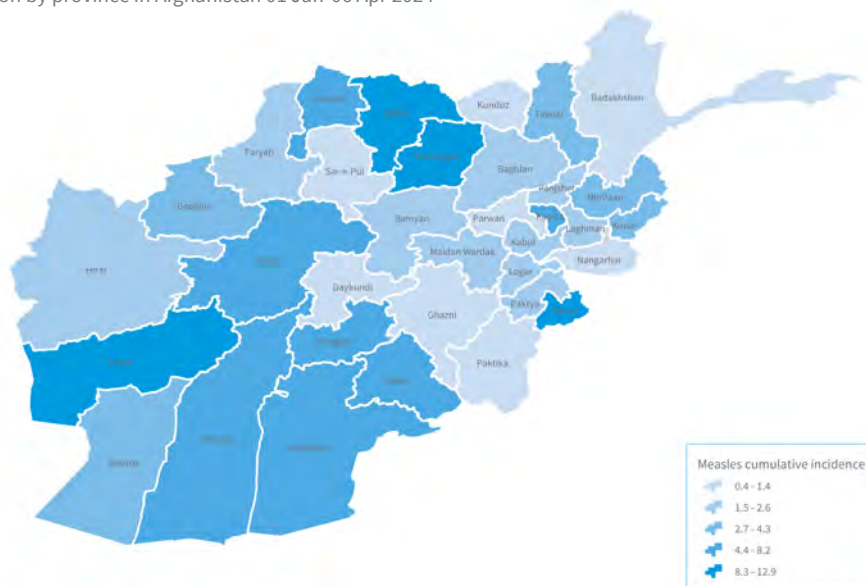
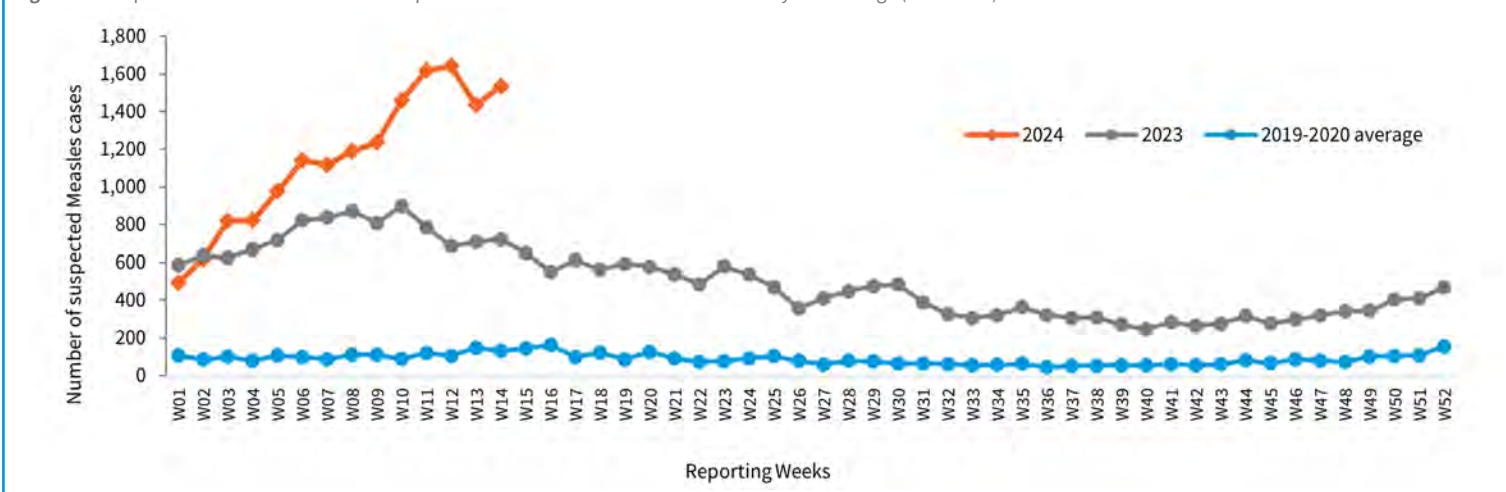


Figure 3. Comparison between the trends of suspected measles cases in 2024 vs 2023 and 2-years average (2019-2020)



Comparing the trend of suspected measles cases in 2024 with the trend for the average number reported during 2019-2020 and the trend of 2023 reveals that despite prevention efforts, the number of suspected measles cases has not decreased to the endemic levels observed in 2019-2020 and has even surpassed 2023 trend (Figure 3).

Updates on the preparedness and response to the Measles outbreak

- During Mar 2024, 226,306 under-five children were vaccinated in the Multi-Antigen Acceleration Campaign (MAAC) in 13 provinces (Balkh, Farah, Faryab, Helmand, Kabul, Kandahar, Kapisa, Khost, Kunar, Logar, Nangarhar, Takhar, and Zabul).
- During week 14-2024, a total of 1,343 children aged 9-59 months were vaccinated against measles in 4 provinces (Urozgan, Ghor, Helmand, and Laghman). This brings the total number of vaccinated children as part of outbreak response immunization campaigns to 13,754 since Jan 2024.
- During week 14-2024, a total of 126 measles treatment kits were distributed to WHO sub-offices across the country.

Acute Respiratory Infection (ARI) (01 Jan-06 Apr 2024)



***529,811**
Total ARI Cases



***1,220**
Total Deaths



****1,289**
Samples tested for influenza



****58**
Lab confirmed influenza cases



4.5%
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 the ARI season and sending them to the National Influenza Center (NIC) for testing.



Table 2: Summary of the ARI outbreak in the last eight weeks (11 Feb – 06 Apr 2024)

Indicators	W7-24	W8-24	W9-24	W10-24	W11-24	W12-24	W13-24	W14-24	Trend lines
Suspected cases	41,874	38,948	35,533	39,793	36,433	33,841	30,749	28,367	
Suspected deaths	92	81	93	116	75	59	70	58	
CFR (%)	0.2	0.2	0.3	0.3	0.2	0.2	0.2	0.2	

- The epi curve indicates a steady decline in ARI cases since week 07-2024, following the typical seasonal increase observed during the winter (Figure 4).
- During week 14-2024, a total of 28,367 cases of ARI pneumonia and 58 associated deaths were reported, which shows a 7.7% and a 17.1% decrease in the number of cases and deaths, respectively, compared to the previous week.
- Since the beginning of 2024, a total of 529,811 ARI pneumonia cases and 1,220 associated deaths (CFR=0.2%) were reported from 34 provinces. Out of the total cases,

335,069 (63.2%) were under-five children, and 261,597 (49.4%) were females. The cumulative incidence per 10,000 population by province is shown in (Figure 5).

- Out of 1,220 deaths, 1,076 (88.2%) were under-five children and 545 (44.7%) 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 2024 could be explained by the improvement in reporting due to the enhancement of the surveillance system and expansion of surveillance sentinel sites (Figure 6).

Figure 4. The epidemiological curve of ARI Pneumonia cases in Afghanistan, 01 Jan – 06 Apr 2024 (N=529,811)

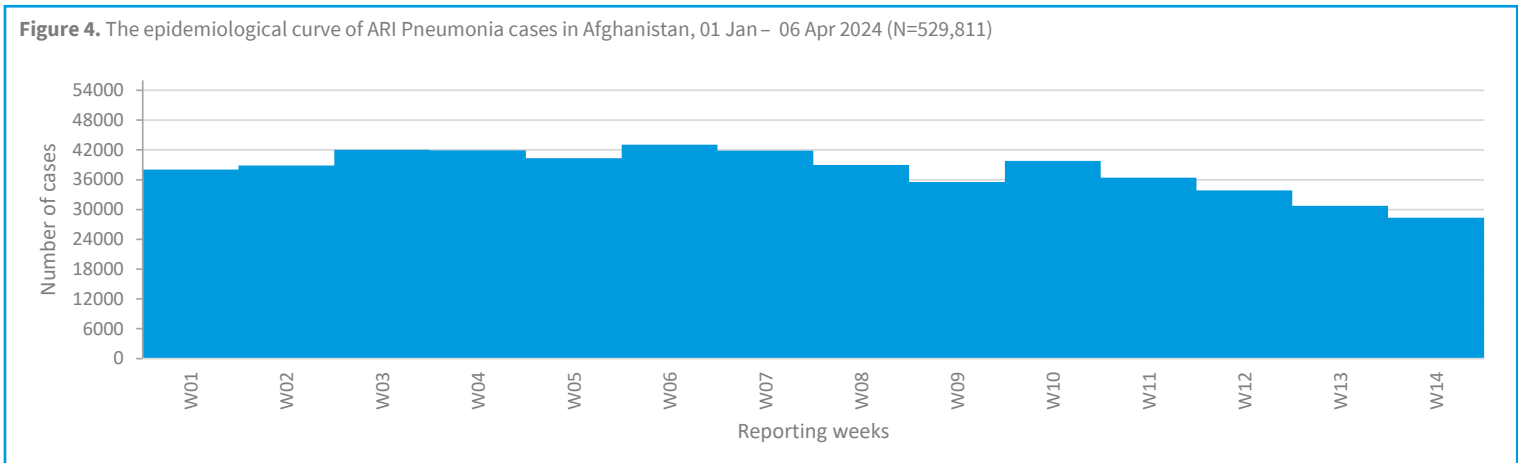


Figure 5. ARI pneumonia cumulative incidence per 10,000 population by province, Afghanistan 01 Jan- 06 Apr 2024

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ARI pneumonia cumulative incidence per 10,000 population by province 01 Jan-06 Apr 2024

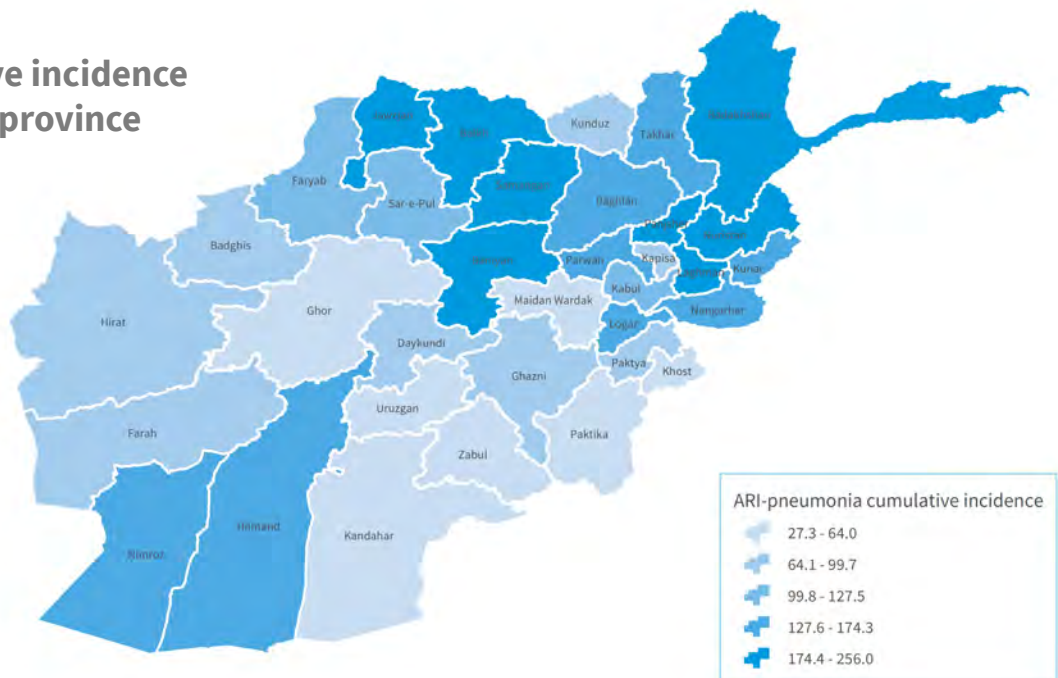
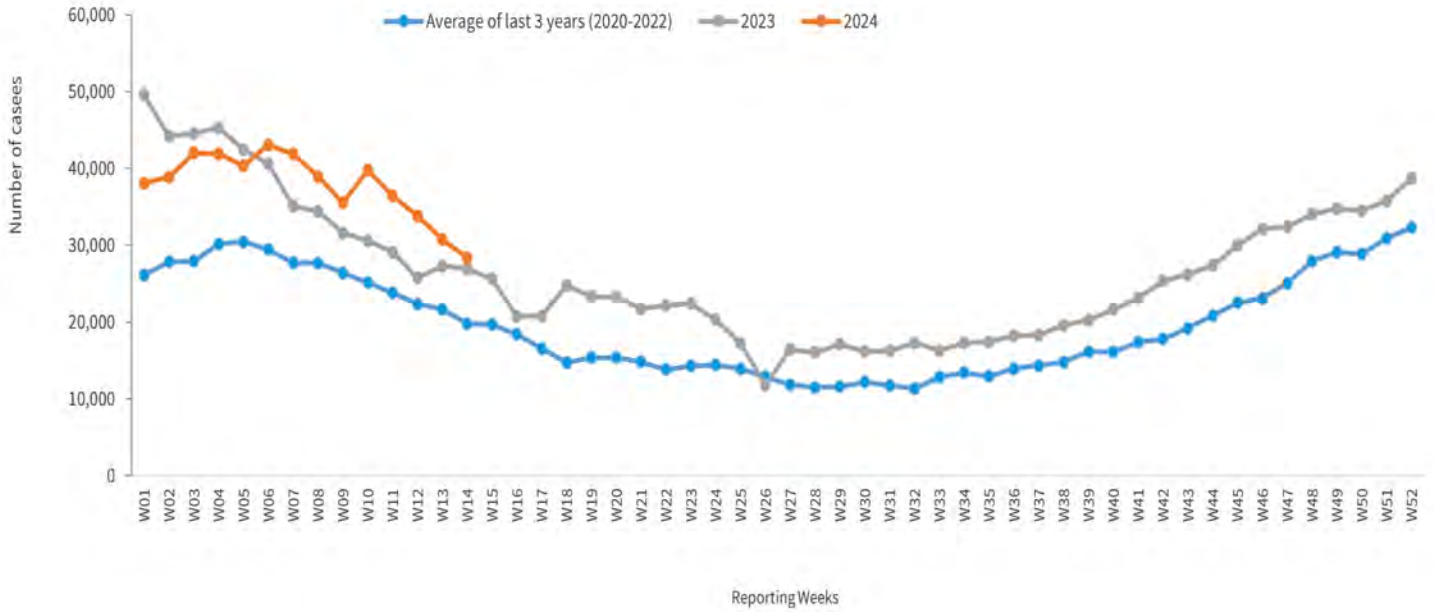




Figure 6. Comparison between the trend of ARI cases in 2024 vs 2023 and 3-years average (2020-2022)



Updates on the response activities to the ARI outbreak

Lab and supplies

- Since the beginning of 2024, a total of 6,500 Viral Transport Media (VTM) have been distributed to the North-east and Central-east NDSR offices.

Case management

- During week 14-2024, a total of 89 PED-SAM kits were distributed to WHO sub-offices across the country to support ARI case management.

Risk Communication and Community Engagement (RCCE)

- During week 14-2024, WHO distributed more than 4,000 Information, Education, and Communication (IEC) materials on Acute Respiratory Infection (ARI) to Herat and Jalalabad provinces (2,000 posters to Herat and 2,000 to Jalalabad). This brings the total number of IEC materials to 89,000 (64,000 Posters and 25,000 Brochures) on ARI handed over to MoPH since 2024.
- Since Jan 2024, the World Health Organization (WHO) co-led two monthly meetings of the Risk Communication and Community Engagement (RCCE) Sub-working Group (SWG). The purpose of the meeting was to recap 2023 RCCE activities and to discuss the RCCE plans and priorities of health partners for 2024.

COVID-19

(24 Feb 2020 — 06 Apr 2024)

Cumulative samples tested

979,285

In public laboratories

New samples tested in week 14

2,450

In public laboratories

-8.5%

Cumulative confirmed cases

233,992

Cumulative percent positivity (23.9%)

New confirmed cases in week 14

356

Weekly percent positivity (14.5%)

+4.1%

Cumulative confirmed deaths

7,994

CFR (3.4%)

New confirmed deaths in week 14

0

Week 14 CFR (0.0%)

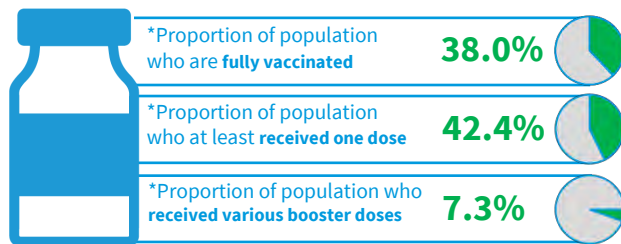
0.0%

Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights



*Note: During Mar 2024, around 199,239 doses of various COVID-19 vaccines have been administered which shows a 50.2% decrease compared to Feb-2024.



* The denominator is 43,100,596 based on OCHA estimation 2024

Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (11 Feb – 06 Apr 2024)

Indicators	W07	W08	W09	W10	W11	W12	W13	W14	Trend line
Samples tested (in public Labs)	2,805	3,247	2,341	3,112	2,610	2,704	2,678 *	2,450	
Confirmed cases	225	278	163	259	193	222	342 *	356	
Percent positivity (%)	8.0	8.7	6.9	8.4	7.7	8.2	12.8	14.5	
Deaths	0	5	3	0	2	3	0	0	
CFR (%)	0.0	1.8	1.8	0.0	1.0	1.4	0.0	0.0	

*A delayed reporting was experienced during week 13-2024, the number of samples tested and the number of confirmed cases were modified from 2,315 to 2,678 and from 322 to 342, respectively.

- The epidemiological curve indicates an increasing trend for the past two weeks following a stabilization in the number of confirmed COVID-19 cases for a long time, which should be closely monitored (Figure 7).
- During week 14-2024, a total of 2,450 samples were tested in public labs, of which 356 were positive for COVID-19 (positivity rate 14.5%) with no associated deaths. This represents a stabilization in number of confirmed cases compared to the preceding week (Table 3 and Figure 8).
- Since the beginning of 2024, a total of 3,334 COVID-19 confirmed cases and 22 deaths (CFR=0.7) have been reported. Out of the total cases, 1,589 (47.7%) and out of total deaths, 7 (31.8%) were females.
- During week 14-2024, among 356 confirmed cases, 2.0% (7 cases) were hospitalized while no cases were admitted to the ICU (Figure 9).
- Since the beginning of the pandemic in Feb 2020; 979,285 samples have been tested for COVID-19 through public laboratories.

Figure 7. The epidemiological curve of confirmed COVID-19 cases and deaths in Afghanistan Feb 2020 – 06 Apr 2024 (cases= 233,992, deaths=7,994)

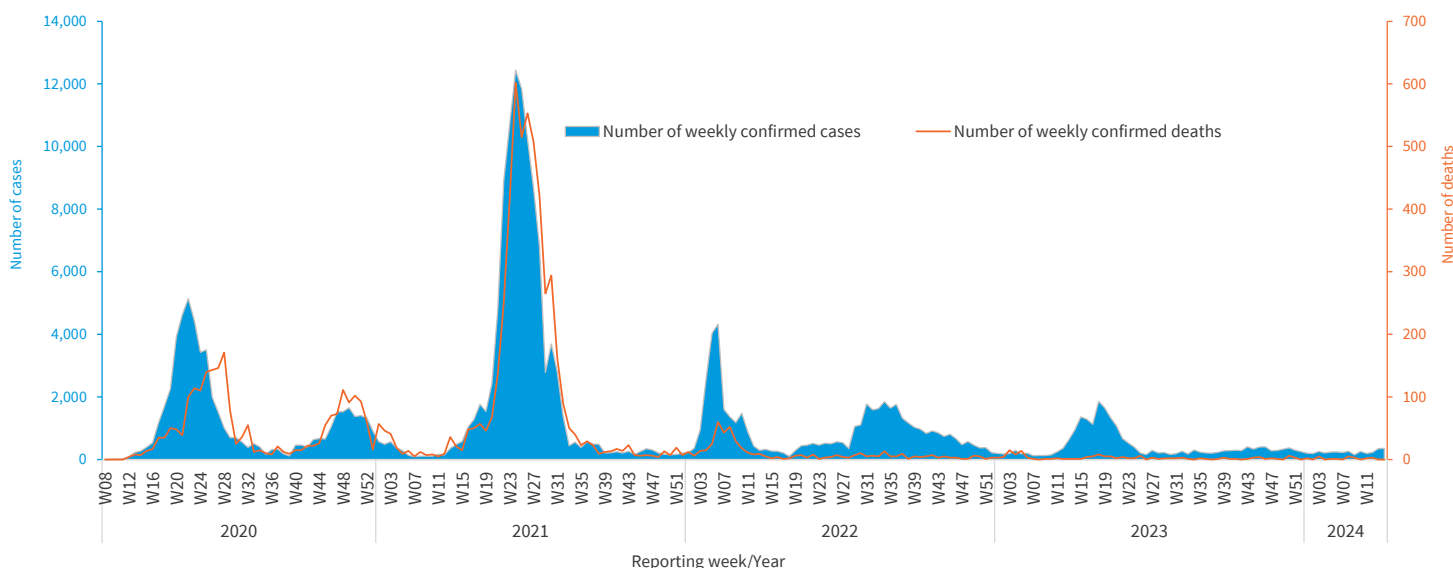




Figure 8. The epidemiological curve of confirmed COVID-19 cases and deaths in Afghanistan 01 Jan – 06 Apr 2024 (cases=3,334, deaths=22)

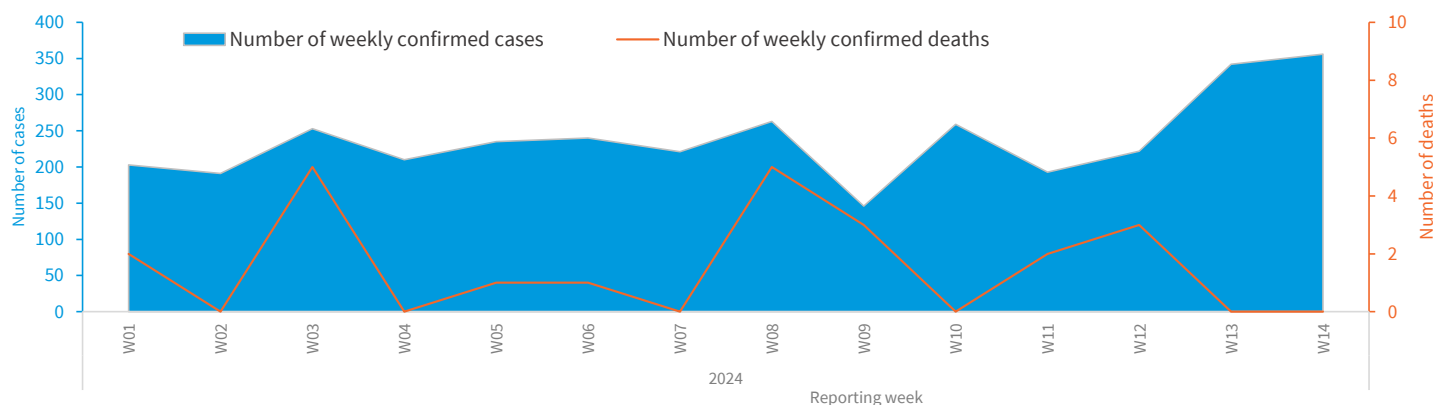
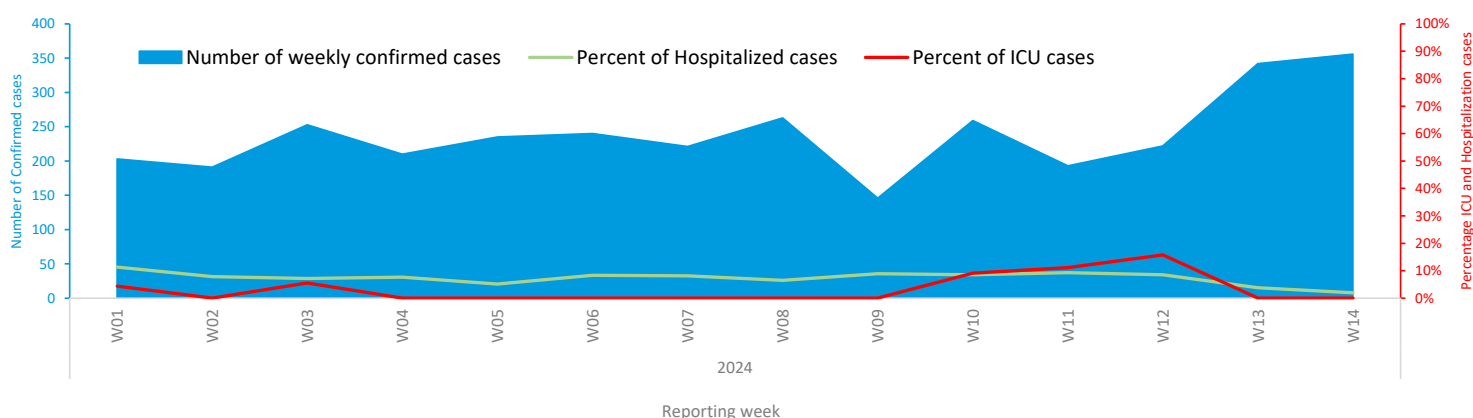


Figure 9. The weekly proportion of hospitalized and ICU cases and the number of confirmed COVID-19 cases in Afghanistan between 01 Jan-06 Apr 2024*



*The hospitalized rate was calculated among confirmed cases, while the ICU rate was calculated among hospitalized cases.

Update on the response activities to COVID-19

During week 14-2024, a total of 1,300 kits of COVID-19 Rapid Diagnostic Tests (RDT) were distributed to 7 WHO regions across the country. This brings the total number of RDT kits to 1,350 since the beginning of the year 2024.

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 Jan-06 Apr 2024)

Table 4: Summary of the AWD with Dehydration outbreak in the last eight weeks (11 Feb – 06 Apr 2024)

Indicators	W07	W08	W09	W10	W11	W12	W13	W14	Trend line
Suspected cases	1,808	1,787	1,784	1,790	1,742	1,834	1,837	2,044	
Suspected deaths	1	1	2	0	0	1	0	0	
CFR (%)	0.1	0.1	0.1	0.0	0.0	0.1	0.0	0.0	

- The epi-curve of AWD with dehydration cases shows a stabilization since the beginning of 2024.
- During week 14-2024, 2,044 AWD with dehydration cases with no associated deaths were reported from 133 districts, which shows an increase of 11.3% in the number of cases compared to the previous week (Figure 10). The cumulative incidence of AWD with dehydration cases per 10,000 population by province is illustrated in Figure 11.
- Since the beginning of 2024, a total of 26,597 AWD with dehydration cases and 13 associated deaths (CFR=0.1%) were reported, out of which 14,533 (54.6%) were under-five children and 13,268 (49.9%) were females.
- The number of districts reporting AWD with dehydration has reached 253 since the beginning of 2024, while no additional new district has reported AWD with dehydration cases this week.
- Since the beginning of 2024, 1,043 Rapid Diagnostic Tests (RDTs) have been conducted on AWD with dehydration cases, of which 136 tests turned positive (positivity rate 13.0%).



Figure 10. The epidemiological curve of AWD with dehydration cases in Afghanistan 01 Jan– 06 Apr 2024 (N=26,597)

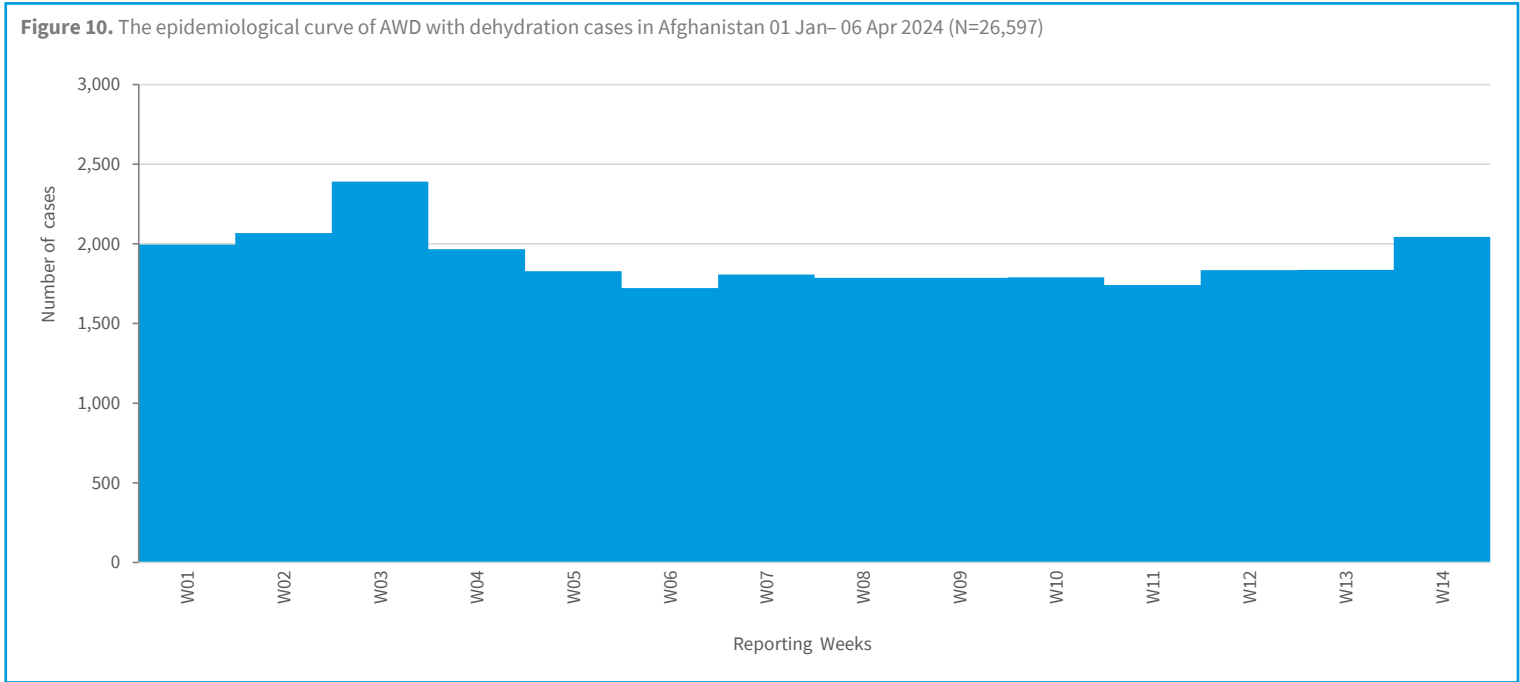


Figure 11. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 06 Apr 2024

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AWD with dehydration cumulative incidence per 10,000 population by province 01 Jan - 06 Apr 2024



Updates on the preparedness and response to the AWD with dehydration outbreak

Surveillance

- Since Jan 2024, a total of 233 sentinel sites’ focal points, including 10 females, were trained on surveillance procedures in Kabul, East, and South regions.

Lab and Supplies

- During week 14-2024, a total of 380 boxes of surgical gloves were distributed to NDSR offices in 34 provinces across the country for the Infection Prevention and Control (IPC) activities.
- Since the beginning of 2024, a total of 8 kits of Carry Blairs (125/kit) and 125 AWD case management kits were distributed to WHO regional offices in Kandahar, Nangarhar, Balkh, Herat, Bamyan, Kunduz, and Paktya provinces.

WASH

The updates are provided on a bi-weekly basis; hence, there are no updates for this week.



Outbreak of Crimean Congo Hemorrhagic Fever (CCHF) (01 Jan-06 Apr 2024)

Table 5: Summary of the CCHF outbreak in the last eight weeks (11 Feb – 06 Apr 2024)

Indicators	W07	W08	W09	W10	W11	W12	W13	W14	Trend line
Suspected cases	4	7	7	3	6	5	3	7	
Suspected deaths	0	0	0	0	0	0	1	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	33.3	0.0	

- The epi-curve indicates fluctuation in the number of CCHF suspected cases since the beginning of 2024, following the peak during the week 27-2023 with a declining trend in the weeks later (Figures 12 & 13).
- During week 14-2024, 7 new suspected CCHF cases with no associated death were reported, compared to the 3 cases and 1 death in the preceding week (Table 5).
- Since the beginning of 2024, a total of 73 suspected cases of CCHF with one associated death (CFR=1.4) were reported. All the suspected cases were over five years of age, while 27 (37.0%) of them were females.
- The associated death case was an over-five female, reported from Balkh province in the late Mar 2024.
- Since the beginning of 2024, a total of 49 samples of suspected CCHF cases have been tested, out of which two were positive, both were under-five males reported from Balkh and Kapisa provinces (positivity 4.1%).

Figure 12: The epidemiological curve of CCHF cases in Afghanistan 01 Jan – 06 Apr 2024, (N=73)

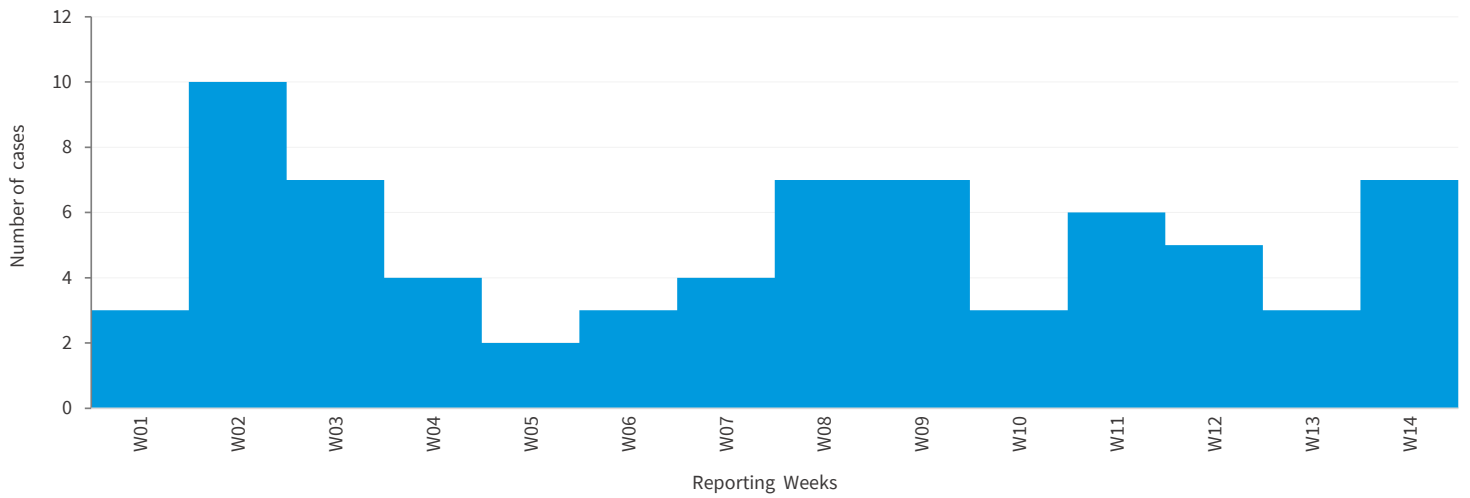


Figure 13. Comparison between the trends of suspected CCHF cases in 2024 vs 2023 and 3 years average (2020-2022)

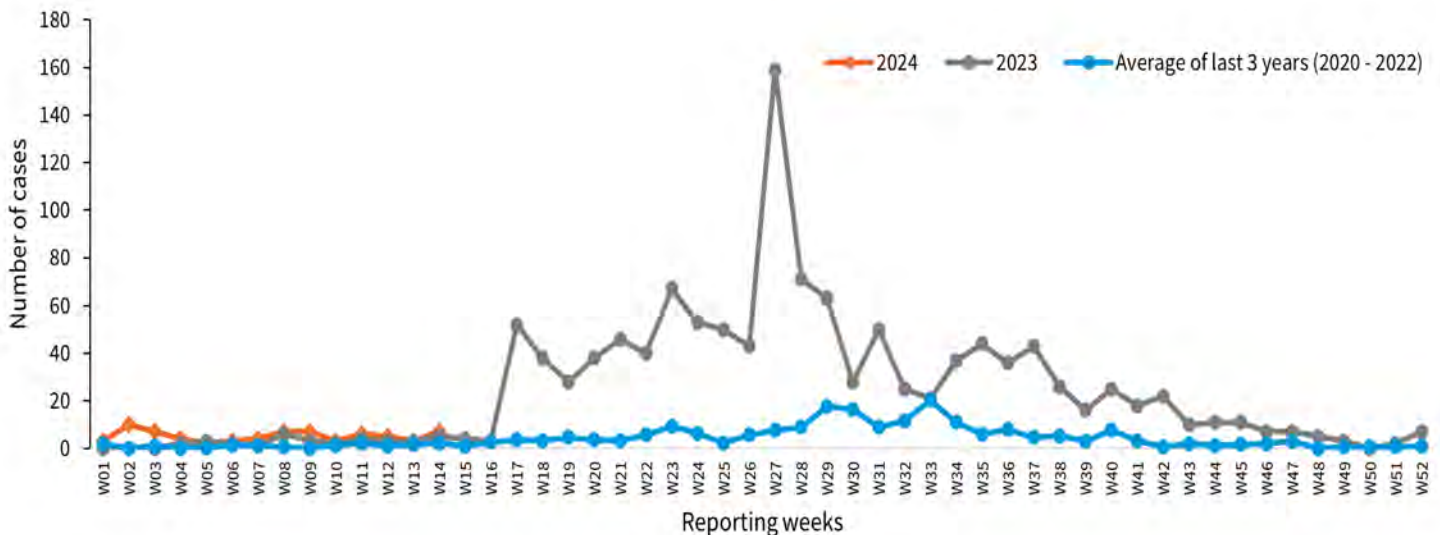
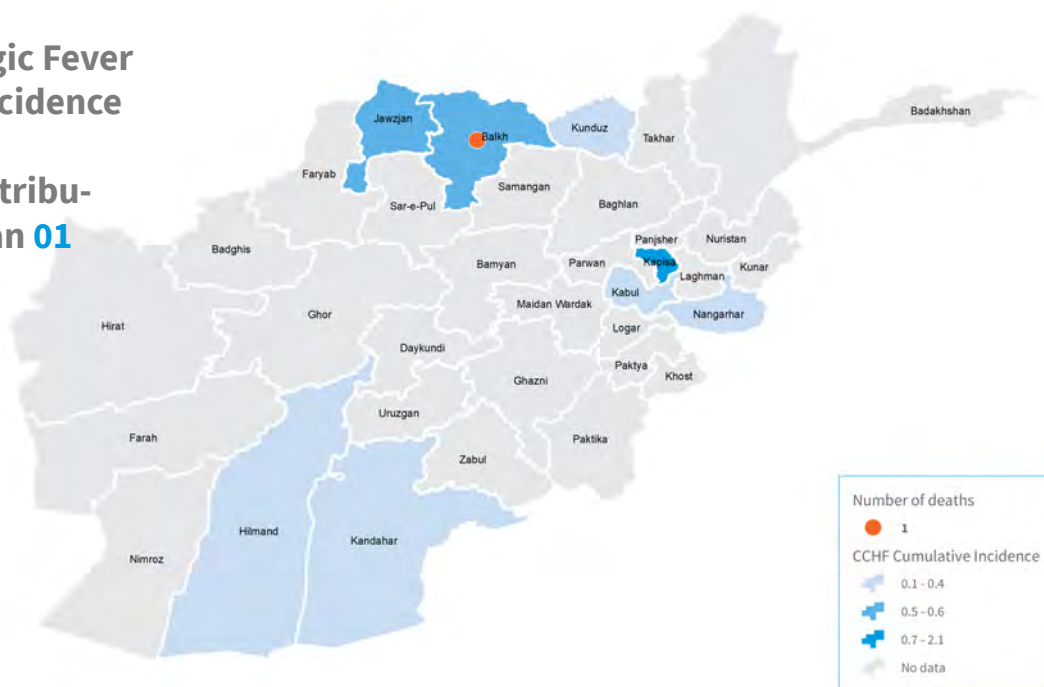




Figure 14. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 01 Jan – 06 Apr 2024

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Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province and provincial distribution of deaths in Afghanistan 01 Jan -06 Apr 2024



Updates on the response to the CCHF outbreak

- Since the beginning of 2024, a total of 469 doses of ribavirin 200mg tablets and 1,530 ribavirin injections have been supplied to 7 WHO sub-offices across the country.
- During the same period, collection of 1,000 tick samples and 500 cattle’s blood samples and sending them to CVDRL; spraying of 26,020 households’ animal stables, 46 live animal markets, and 36 commercial dairy farms; provision of awareness sessions in 60,715 households; distribution of 28,043 flyers and stickers; provision of training to 280 veterinarians on CCHF case definition and sample management as well as training of 700 butchers on preventive measures and safe handling of animals have been conducted as preparedness and response to outbreaks of CCHF in 7 provinces (Balkh, Herat, Kandahar, Kabul, Kunduz, Nangarhar, and Takhar) through the partnership with the Food and Agriculture Organization (FAO).

Dengue Fever Outbreak (01 Jan-06 Apr 2024)

636
Total Cases

0
Total Deaths

341
Sample tested

116
Lab confirmed cases

34.0%
Test positivity ratio

Note: Dengue fever laboratory data was reviewed, utilizing the confirmed case definition from EMRO. This definition is characterized by confirmation through PCR, positive virus culture, DENV NS1 antigen detection, seroconversion of IgG in paired sera, or a significant increase (fourfold) in IgG titer in paired sera. The focus was placed on cases confirmed by PCR, excluding cases that were only positive for IgM or IgG based on a single sample (dengue--outbreak-toolbox_20220921.pdf (who.int))

Table 6: Summary of the dengue fever outbreak in the last eight weeks (11 Feb – 06 Apr 2024)

Indicators	W07	W08	W09	W10	W11	W12	W13	W14	Trend line
Suspected cases	49	36	57	45	41	43	28	23	
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 illustrates a decreasing trend over the past five weeks, following a period characterized by intermittent fluctuations of dengue suspected cases (Figure 15).
- The number of suspected dengue fever cases in 2024 is higher than the 2-year average (2021-2022) and has surpassed the previous year's trend (Figure 16).
- During week 14-2024, 23 suspected cases of dengue fever with no associated deaths were reported only from Nangarhar, which shows a 17.9% decrease in the number of suspected cases compared to the preceding week.
- Since the beginning of 2024, a total of 636 suspected cases of dengue fever and no deaths were reported, out of which 394 (61.9%) were females, and 6 (0.9%) were under 5 years of age. The geographical distribution and weekly change rate are shown in Figure 17.
- Since the beginning of 2024, a total of 341 samples have been collected, out of which 116 were positive (positivity 34.0%).

Figure 15. The epidemiological curve of suspected dengue fever cases in Afghanistan 01 Jan – 06 Apr 2024, (N=636)

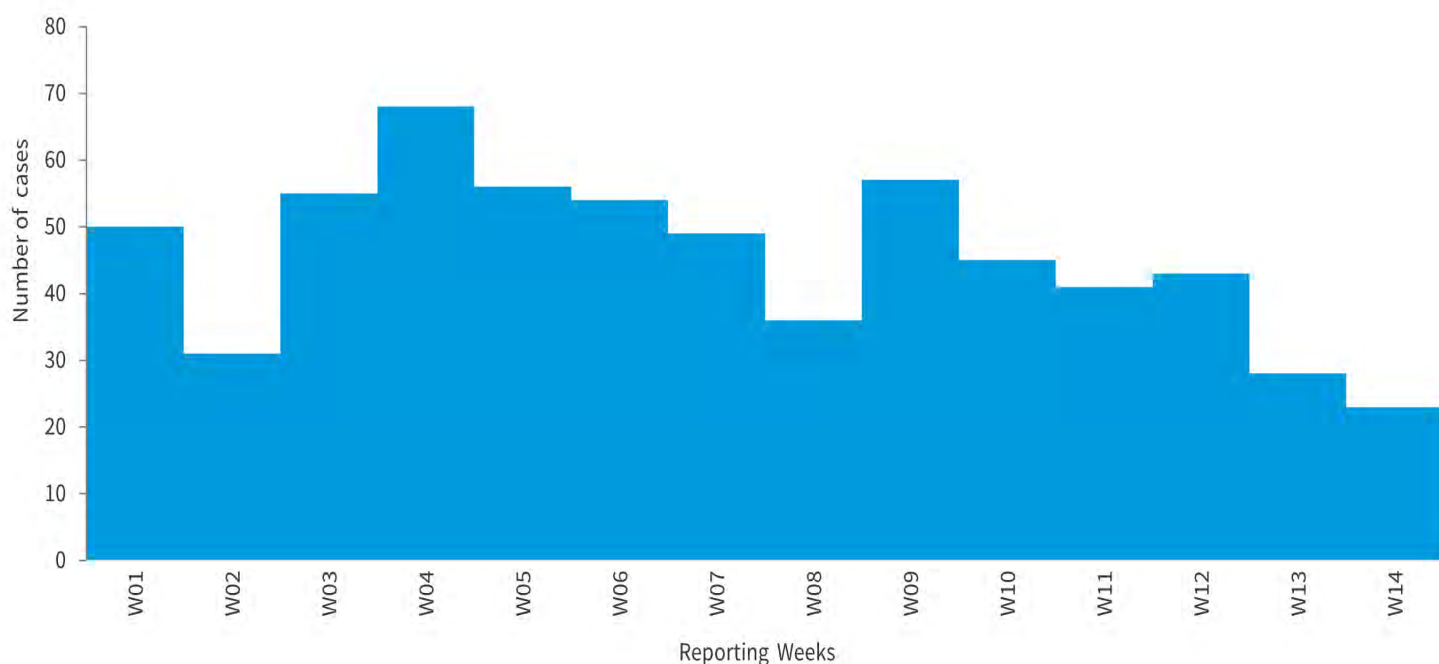


Figure 16: Comparison between the trends of suspected dengue fever cases in 2024 vs 2023 and 2-years average (2021-2022).

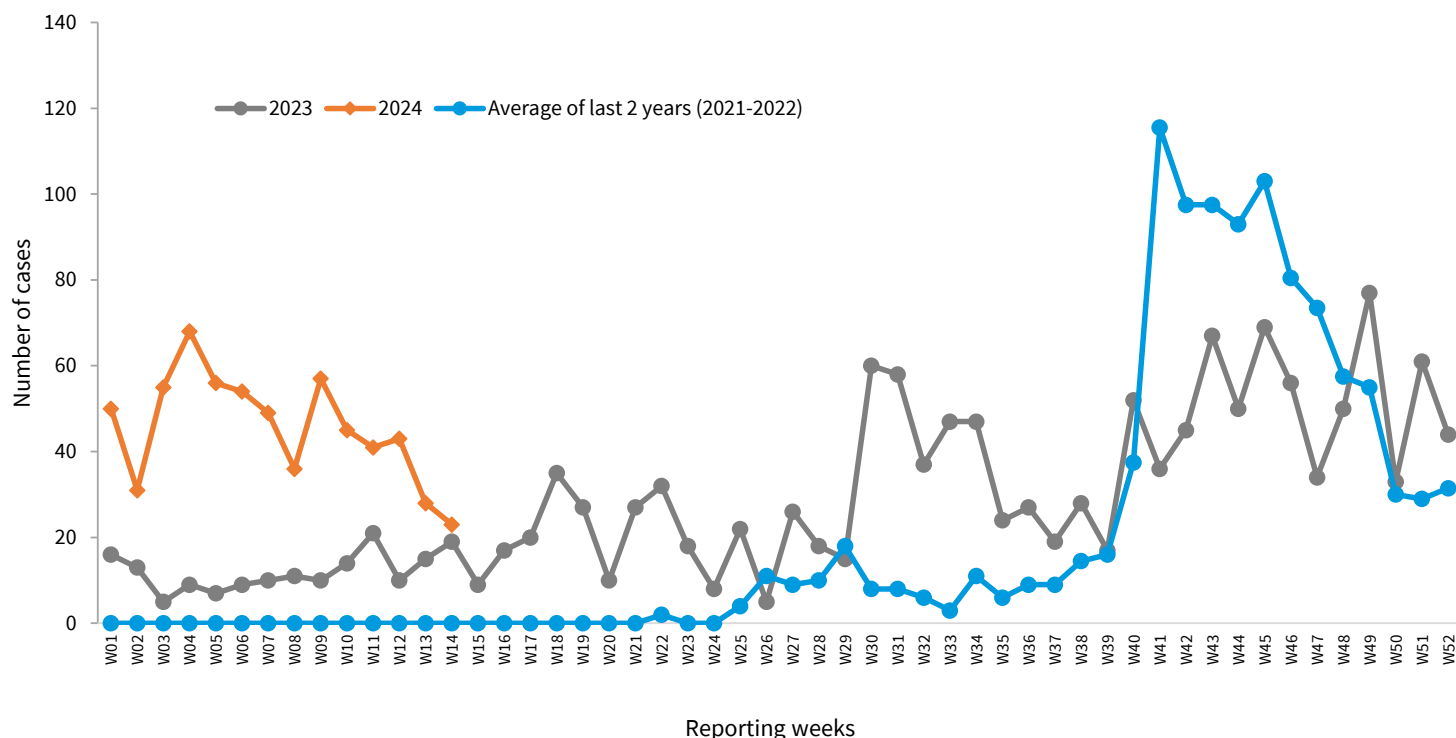
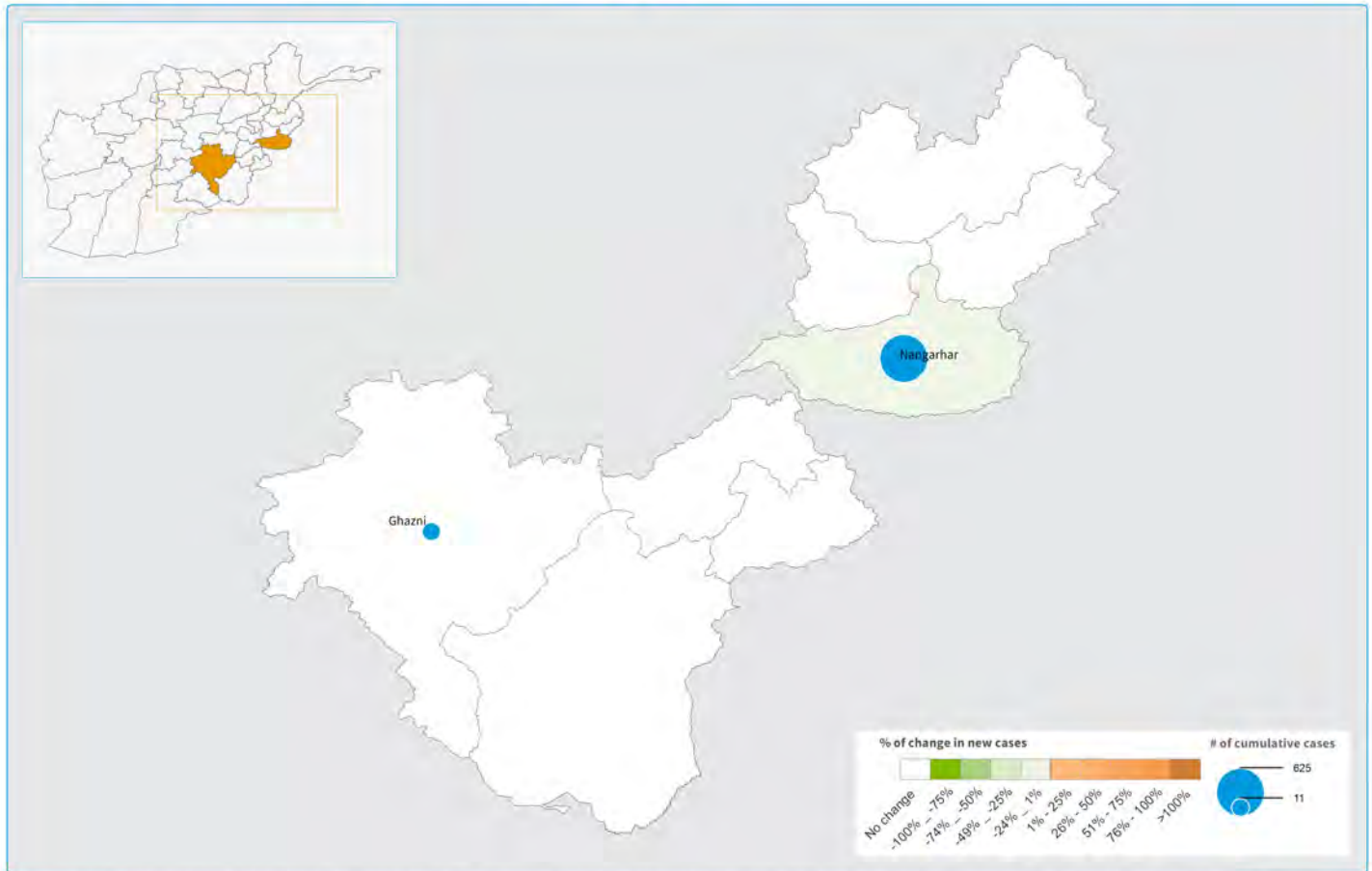




Figure 17. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01 Jan – 06 Apr 2024



Geographical distribution of suspected dengue fever cases in Nangarhar and Ghazni provinces and weekly percent of changes (between weeks 13 and 14, 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, AGCHD. Creation date: 06 Apr 2024.

Updates in the response to the dengue fever outbreak

- Since the beginning of 2024, a total of 400 dengue RDT kits have been distributed to South and East regions.

Note: MOPH is the source of epidemiological data

Case definition & alert/outbreak thresholds

Contact us for further information:

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