



### AFGHANISTAN

#### INFECTIOUS DISEASE OUTBREAKS

#### SITUATION REPORT | Epidemiological week #30-2023

No. 30/(23-29 July)

Disease Outbreaks	CCHF (Jan - Jul 23)	AWD (Jan - Jul 23)	COVID-19 (Feb 20 - Jul 23)	Measles (Jan - Jul 23)	Dengue fever (Jan - Jul 23)
<b>Cumulative Cases</b> <small>(Data from 596 (97.2%) out of 613 surveillance sentinel sites)</small>	<b>715*</b>	<b>112,858</b>	<b>224,386</b>	<b>18,684</b>	<b>518</b>
<b>Death (CFR %)</b>	<b>78 (10.9)</b>	<b>53 (0.05)</b>	<b>7,935 (3.5)</b>	<b>51 (0.3)</b>	<b>1 (0.2)</b>

\* A backlog of 28 CCHF cases and 9 deaths were added to the cumulative number of cases and deaths.

## Outbreak of Crimean Congo Hemorrhagic Fever (CCHF) (01 Jan to 29 Jul 2023)

Table 1: Summary of the CCHF outbreak in the last eight weeks (04 Jun - 29 Jul 2023)

Indicators	W23	W24	W25	W26	W27	W28	W29	W30	Epi-curve
Suspected cases	59	48	50	43	134	59	34	10	
% Change cases	34.1	-18.6	4.2	-14.0	211.6	-56.0	-42.4	-70.6	
Suspected deaths	5	6	5	5	17	6	2	2	
CFR (%)	8.5	12.5	10.0	11.6	12.7	10.2	5.9	20.0	

- During week 30-2023, a total of 10 new cases of CCHF (5 cases were confirmed positive by PCR) and 2 new deaths were reported (Figure 1, Table 1).
- An additional 28 suspected cases and 9 deaths, were added as backlog, to the cumulative number of cases and deaths; this brings the total number of suspected CCHF cases and associated deaths to 715 and 78, respectively (CFR 10.9%), since the beginning of 2023. (Figure2)
- The CCHF-associated deaths were reported from 18 provinces more than half of which were reported from 2 provinces; Kabul (25, 32.1%) and Balkh (17, 21.8%).
- Out of the total cases (715), 714 (99.9%) were above 5 years of age and 199 (29.4%) were females.
- Totally, 689 samples of suspected CCHF cases were tested since the beginning of 2023, of which 239 samples were positive (34.7% positivity).

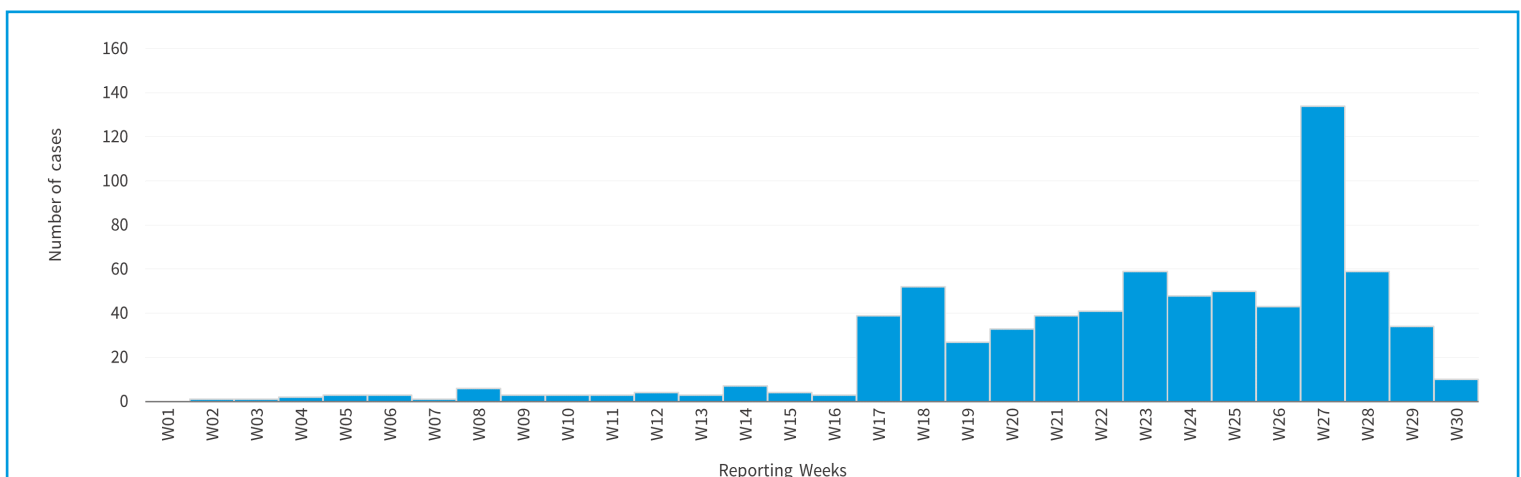


Figure 1: Epidemiological curve of CCHF cases in Afghanistan 1 Jan - 29 Jul 2023 (N=715)

# AFGHANISTAN

## Geographical Distribution of Crimean-Congo Hemorrhagic Fever (CCHF) cases by Province As of 29 Jul 2023

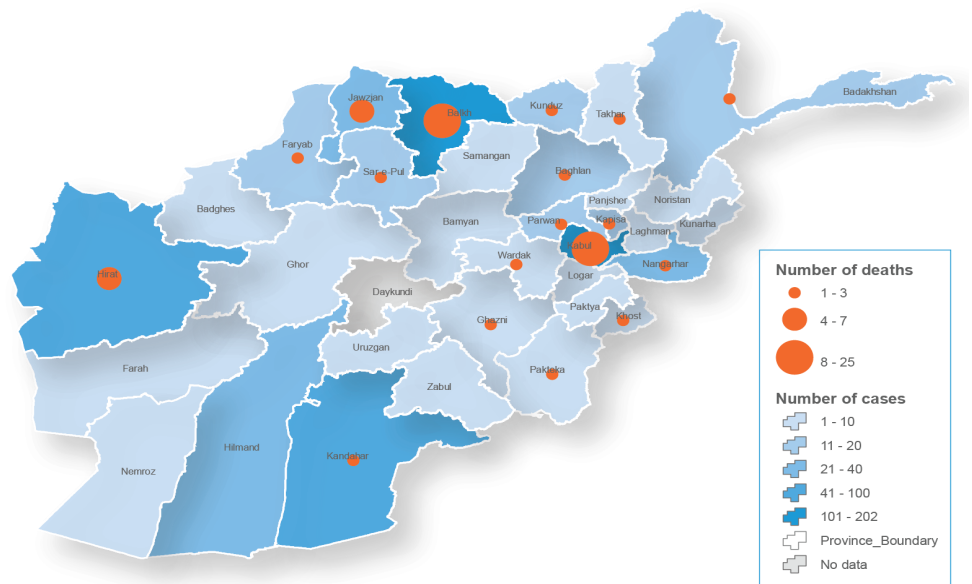


Figure 2. Geographical Distribution of Crimean-Congo Hemorrhagic Fever (CCHF) cases by Province in Afghanistan, 01 Jan–29 Jul 2023

### CCHF Epi Situation between 2017 to 2022

- Crimean Congo Hemorrhagic fever (CCHF) is endemic in Afghanistan; between 2017 and 2022, the total number of suspected cases and deaths reported were 1,971 and 207 respectively.
- Females represented 25.9% (510), and 97.5% (1,922) were over five years of age.
- The most frequently reported occupational groups were those dealing with animals (butchers, farmers, shepherds and animal dealers) representing 37.7% (743) followed by housewives (23.2%, 457).

### Potential reasons behind that increase:

#### • A real increase in the numbers of cases that could be attributed to:

- Environmental and ecological changes affecting the vectors breeding.
- Movement across neighboring countries.

#### • Enhanced reporting due to improvements brought to the national disease surveillance and response:

- Enhanced surveillance activities:
  - ◆ Employment of additional data reporting mechanisms that were not previously used in the preceding years; data in 2023 compiles data from IBS (sentinel sites) in addition to alerts of outbreaks reported from other sources (other than sentinel sites).
  - ◆ Expansion of the sentinel sites from 519 to 613 since November 2022.
  - ◆ Deployment of 130 surveillance support team support teams (SSTs) across the 34 provinces participating in the active case findings in the field.

#### • The number of CCHF cases reported during 2023 is higher than: (Figure 3)

- Average of cases reported before COVID-19 pandemic (2017 – 2019).
- Average of cases reported after COVID-19 pandemic (2020 – 2022).
- Average of cases reported over the past 6 years (2017 – 2022).

#### • The highest weekly number of cases during the past 6 years was recorded in 2019 (week 35, with 92 suspected cases), which was exceeded during week 27-2023 (134 suspected cases).

#### ◆ Declaration of the ending of the global COVID-19 pandemic.

#### ◦ Enhanced laboratory diagnostic capacities:

- ◆ As of 2023, the CCHF testing capacities have been expanded to be conducted in 6 laboratories (CPHL, Advanced lab of Infectious Disease Hospital in Kabul, and four regional reference laboratories (RRLs) in Kandahar, Balkh, Herat, and Nangarhar.

#### ◦ Two outbreaks of nosocomial CCHF were experienced in 2 regions (South and North):

- ◆ The first nosocomial outbreak in the South Region was reported in late April 2023 which included an index case and 48 additional secondary cases.
- ◆ The second nosocomial outbreak was reported from the North Region as of 12 May 2023. Between 12 - 30 May 2023, a total of 9 suspected CCHF cases have been reported from Jawzjan and Balkh provinces.

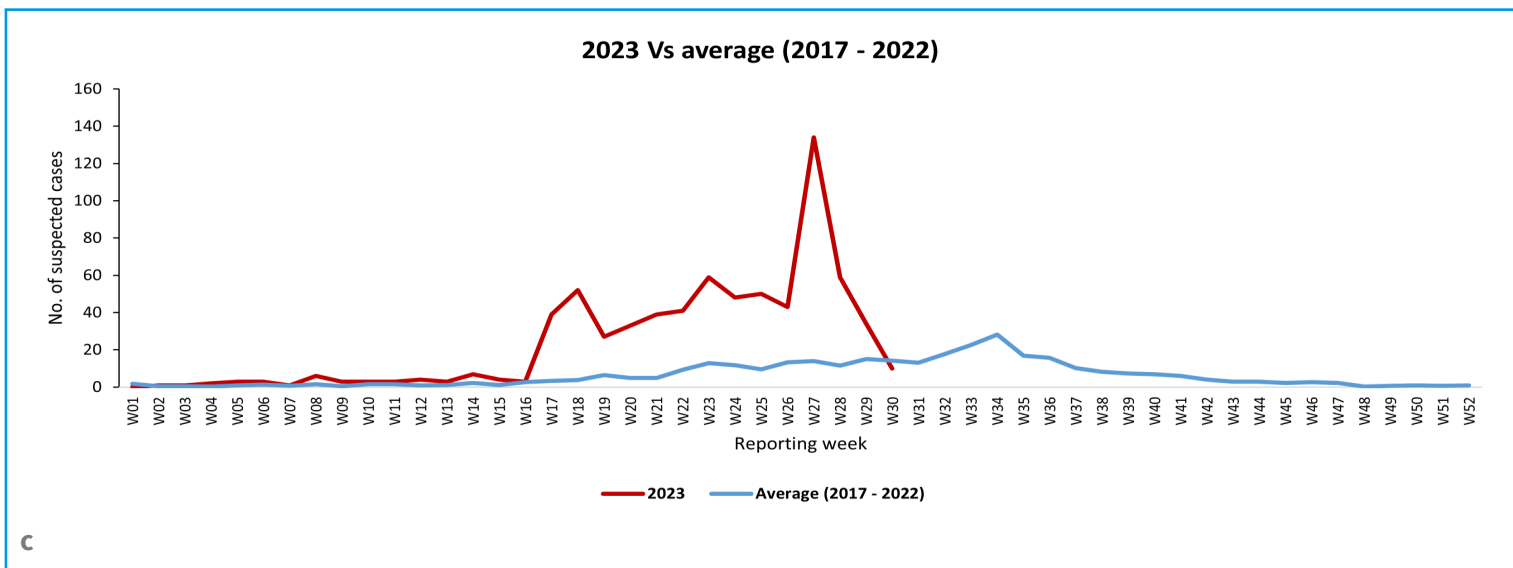
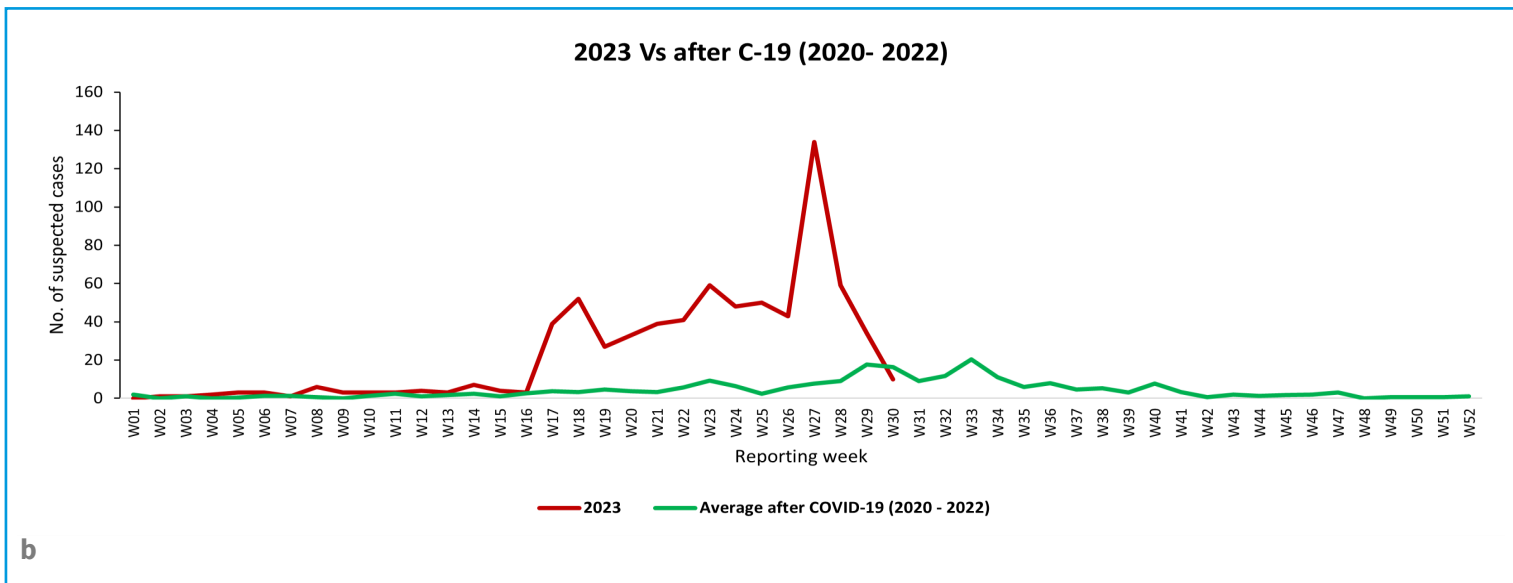
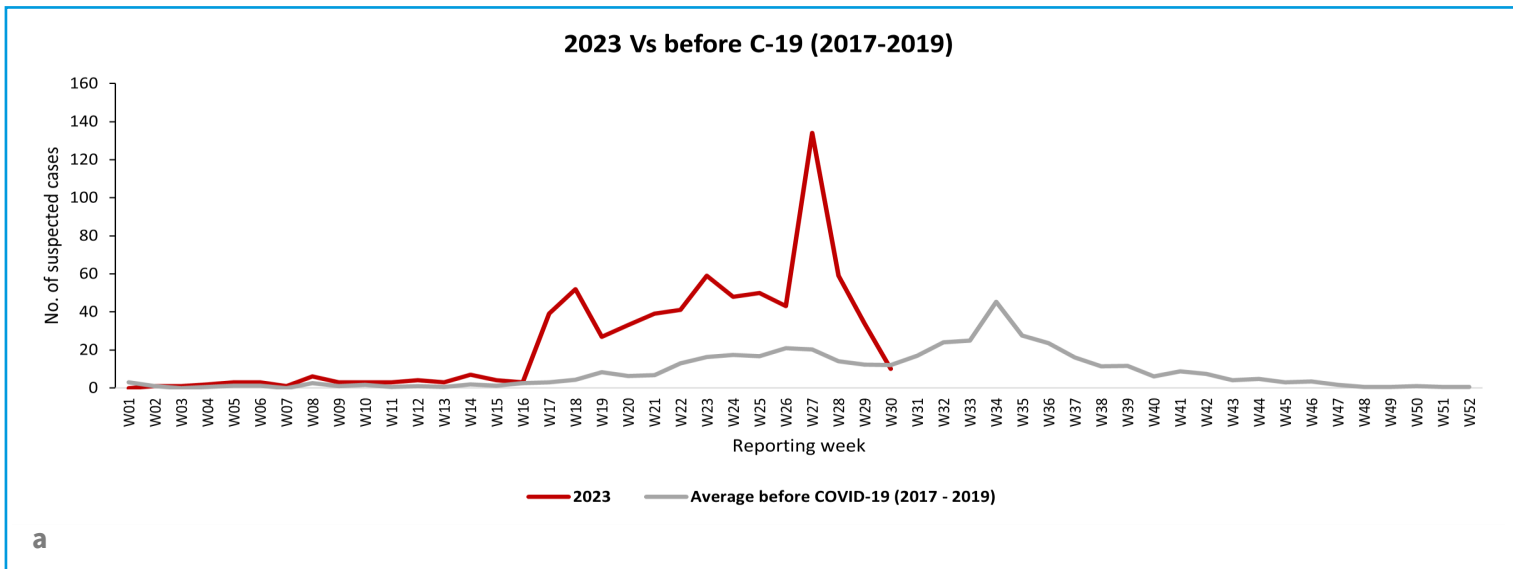


Figure 3. Comparison of weekly distribution of suspected CCHF cases during 2023, a. average before COVID-19 pandemic (2017 – 2019); b. average after COVID-19 pandemic (2020-2022); c. average of last 6 years (2017 – 2022), Afghanistan

## Response to CCHF outbreak during 2023

### Coordination and leadership

•National zoonosis committee meeting has been held and chaired by CDC-MoPH where relevant departments from the Ministry of Agriculture, Kabul Municipality, Ministry of Information and Technology, and national and international partners attended the meeting; coordinating the preparedness and response to zoonotic diseases outbreak (including CCHF); public awareness and case management of infected cases were discussed and decided among the committee members.

### Surveillance

•Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.

### Laboratory and supplies

•CCHF PCR kits were delivered to the advanced Lab of the Infectious Disease Hospital (2), Balkh RRL (1) and Herat RRL (1); this makes the total number of CCHF PCR kits supplied to different laboratories to 13 since the beginning of 2023.

•Four (4) Automated Nucleic acid extraction machines are delivered to the CPHL (1), Nangarhar RRL (1), Herat RRL (1), and Balkh RRL (1) that will minimize the sample processing time and improve the quality of the results and the safety of the lab staff.

•On-the-job training has been conducted for Nangarhar, Herat and Balkh RRLs' staff; the capacities have been built to utilize the PCR and ELISA technologies for laboratory confirmation of CCHF.

•A 6-day training on PCR and ELISA has been conducted for 6 Regional NDSR lab focal points at CPHL.

### Case management

•Case management guideline for CCHF has been revised and is being reviewed by the MoPH for their endorsement; a one-day workshop was also held with the participation of representatives from specialty hospitals and the guideline protocol department of MoPH to present and finalize the guideline.

•Since the beginning of 2023, a total of 177 healthcare workers (HCWs) from all regions have been trained on CCHF case management protocol.

•A total of 1,600 double bags were donated by WHO to Balkh province to support CCHF case management.

•A total of 15 Ribavirin (antiviral medicine) courses (each course containing 84 tablets), and 200 personal protective equipment for infection prevention and control have been supplied to the North region.

### RCCE





•9,538 people (2,736 females) were reached through a 7-day mass awareness campaign on Crimean-Congo hemorrhagic fever (CCHF) in three districts of Herat province.

•45 social mobilizers (15 women) were deployed to 23 locations in these districts to raise awareness through community engagement sessions and interpersonal communications.

•More than 13,000 information, education and communication (IEC) materials (e.g., brochures and posters) on CCHF have been distributed during the campaign in Herat.

## Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 Jan to 29 Jul 2023)

Table 2: summary of the AWD with Dehydration outbreak in the last eight weeks (04 Jun - 29 Jul 2023)

Indicators	W23	W24	W25	W26	W27	W28	W29	W30	Epi-curve
Suspected cases	4,627	5,143	6,688	4,775	6,373	7,059	7,105	7,081	
% Change cases	3.3	11.2	30.0	-28.6	33.5	10.8	0.7	-0.3	
Suspected deaths	2	1	7	1	3	3	4	3	
CFR (%)	0.04	0.02	0.10	0.02	0.05	0.04	0.06	0.04	

•The number of AWD with dehydration cases is increasing. The general trend is on the rise since week 10-2023 which could be linked to the summer season (Figure 4).

•During week 30-2023, a total of 7,081 new AWD cases with dehydration and 3 new deaths were reported from 235 districts all over the country, which shows stabilization in the number of cases compared to last week (Figure 5).

•During last week, 2 new districts reported alerts of AWD with dehydration.

•The new deaths reported this week were from 2 provinces:

Badakhshan (2) and Kabul (1). All deaths were males and 1 death (33.3%) was under-five.

•Since Jan 2023, a total of 112,858 AWD with dehydration cases were reported from 329 districts, out of which 64,452 (57.1%) were children below 5 years and 55,940 (49.6%) were females.

•A total of 1,565 RDT tests were conducted among AWD with dehydration cases since the beginning of 2023.

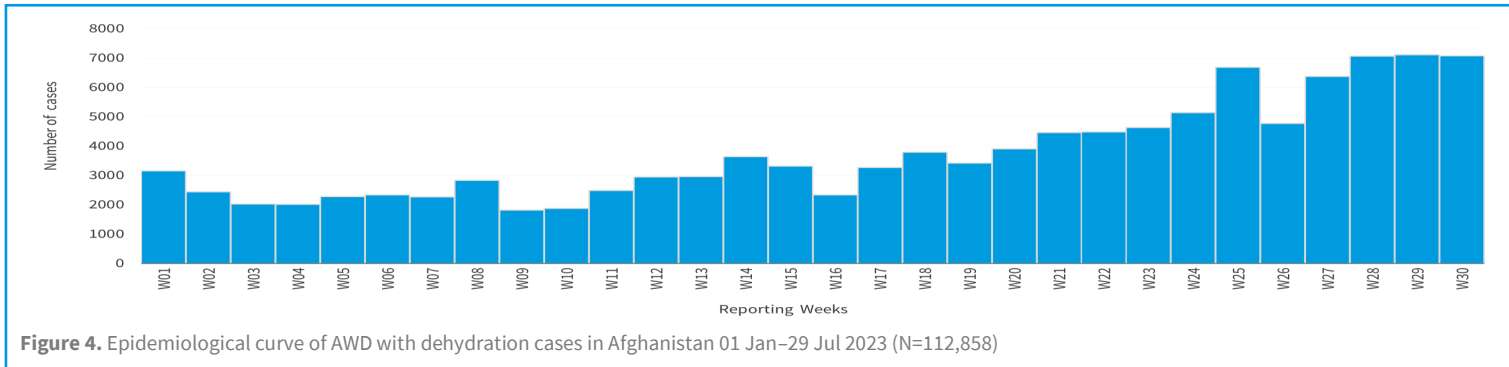


Figure 4. Epidemiological curve of AWD with dehydration cases in Afghanistan 01 Jan–29 Jul 2023 (N=112,858)

# AFGHANISTAN

## AWD with dehydration attack rate per 10,000 population by province As of 29 Jul 2023

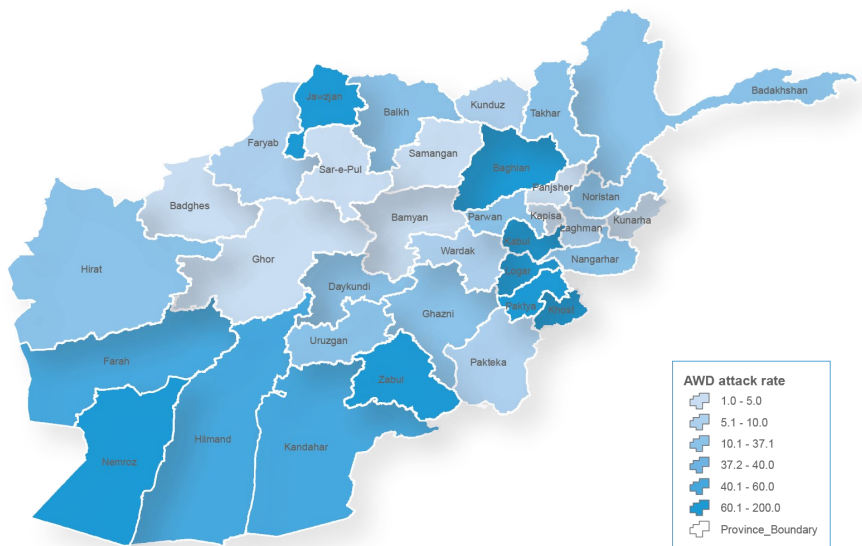


Figure 5. AWD with dehydration attack rate per 10,000 population by province in Afghanistan, 01 Jan–29 Jul 2023

### Preparedness and response to the AWD Outbreak

#### Leadership and Coordination

- Regular biweekly AWD task force meetings are conducted for health partners to coordinate the 2023 season AWD outbreak response.
- 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

- During last week, 26 SST members from South region were trained on outbreak investigation and reporting, lab sample collection and transportation which brings the total number of SST members trained since the beginning of 2023 to 195.
- 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

- During last week, a total of 32 medical officers and 34 nurses were trained on AWD case management in Central and Central Highland provinces (Parwan, Bamiyan, Daykundi, Wardak, Logar, Kapisa, Panjshir).
- 762 HCWs have been trained on AWD case management in 5 regions (Central, Central Highland, West, North and East).

- Around 350 HCWs are targeted for case management training over the coming few weeks.

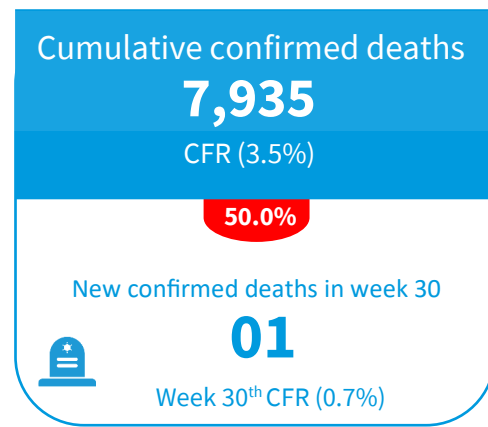
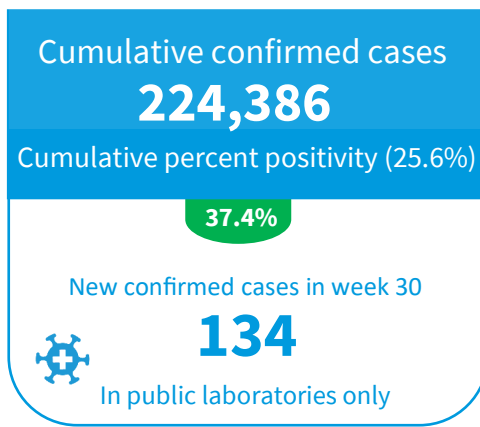
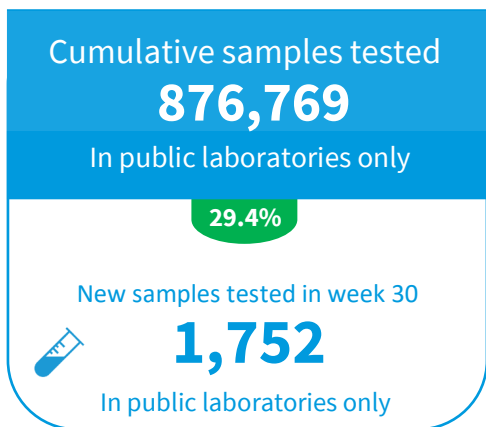
#### Laboratory and Supplies

- A total of 3,750 Carry Blairs media for laboratory culture and 330 kits of RDTs were prepositioned in 34 provinces for supporting specimen collection and laboratory confirmation of AWD cases with dehydration.
- Seven public health laboratories including CPHL, IDH and 5 RRLs (Kandahar, Paktya, Nangarhar, Balkh and Herat regional reference labs) have the testing/confirmation capacity for AWD with dehydration and they have been supplied with diagnostic kits.

#### WASH and RCCE

- Rehabilitation of water systems in 7 provinces (Zabul, Kabul, Maidan Wardak, Nangarhar, Laghman, Kandahar and Balkh) supporting 37,625 Individuals
- Chlorination of water wells in Zabul.
- Latrine construction in 5 provinces (Balkh, Nangarhar, Takhar, Badakhshan and Kabul) reaching more than 300 individuals.
- Hygiene promotion activities in 15 provinces benefitting around 26,000 individuals.
- Distribution of aqua tabs and soaps in 4 provinces (Hilmand, Kandahar, Nimroz and Zabul) reaching around 9,000 individuals.
- Distribution of Hygiene kits in 5 provinces (Hilmand, Uruzgan, Kandahar, Nimroz and Zabul) covering more than 200 individuals.

## COVID-19 (24 Feb 2020 – 29 Jul 2023)



Key: ● Increasing ● Decreasing ● No change

### COVID-19 Vaccination highlights



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

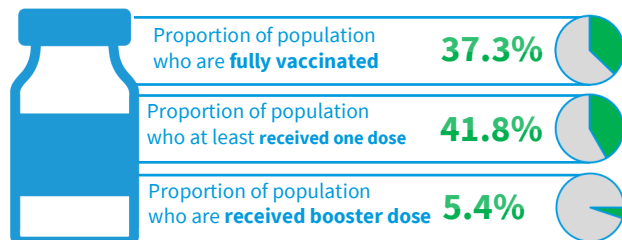


Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (04 Jun - 29 Jul 2023)

Indicators	W23	W24	W25	W26	W27	W28	W29	W30	Epi-curve
Samples tested (in public Labs)	3,764	3,022	1,943	904	2,183	2,553	2,482	1,752	
Confirmed cases	526	372	196	155	290	207	214	134	
% Change cases	-20.8	-29.3	-47.3	-20.9	87.1	-28.6	3.4	-37.4	
Percent positivity (%)	14.0	12.3	10.1	17.1	13.3	8.1	8.6	7.6	
Deaths	2	2	6	0	3	1	2	1	
CFR (%)	0.4	0.5	3.1	0.0	1.0	0.5	0.9	0.7	

\*A delayed reporting was experienced during week 29-2023, the number of samples tested and new cases were modified from 2,334 to 2,482 and from 204 to 214, respectively.

- During week 30, the number of COVID-19 cases is decreasing. Generally, the epi curve shows a decline in the number of confirmed cases over the past 10 weeks (Figure 6).
- Since the beginning of the pandemic in Feb 2020, a total of 876,769 samples have been tested for COVID-19 through public laboratories.
- In week 30-2023, a total of 1,752 samples were tested in public labs, of which 134 samples were positive for COVID-19 (test positivity of 7.6%) and 1 new death was reported (CFR=1.0%).
- During week 30-2023, 37.3% (50/134 confirmed cases) were hospitalized (Figure 7), while no cases were admitted to the ICU (Figure 8).
- During last week, 408 ABBOT ID Now COVID-19 kits have been supplied to the CPHL.

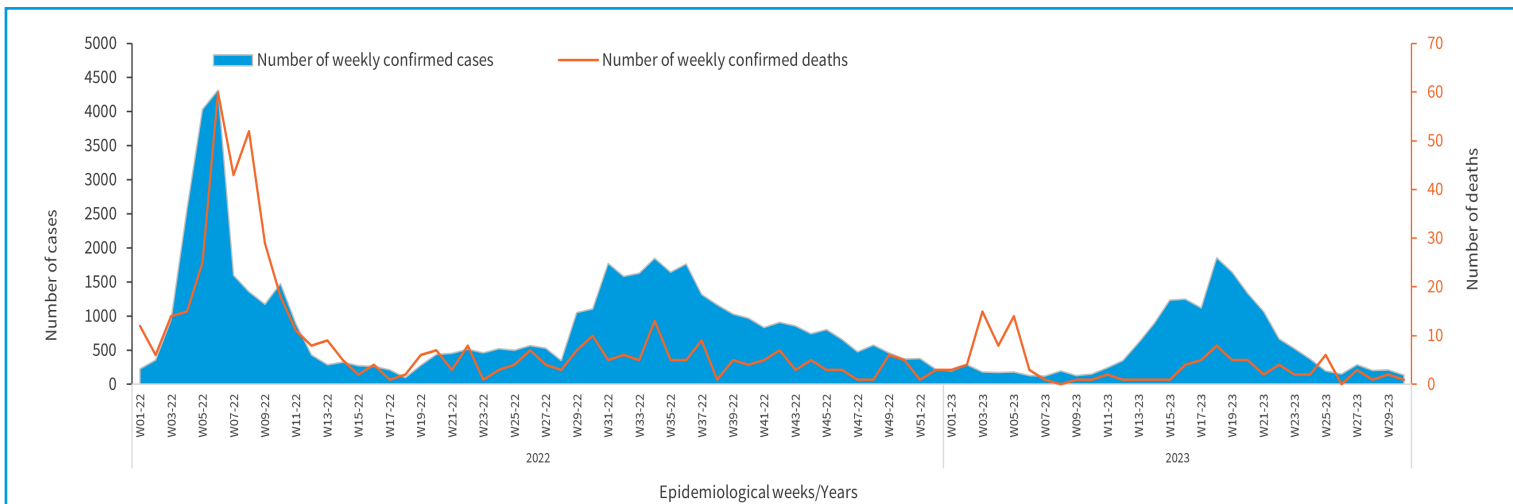


Figure 6. Epidemiological curve of confirmed COVID-19 cases and deaths in Afghanistan 01 Jan 2022–29 Jul 2023

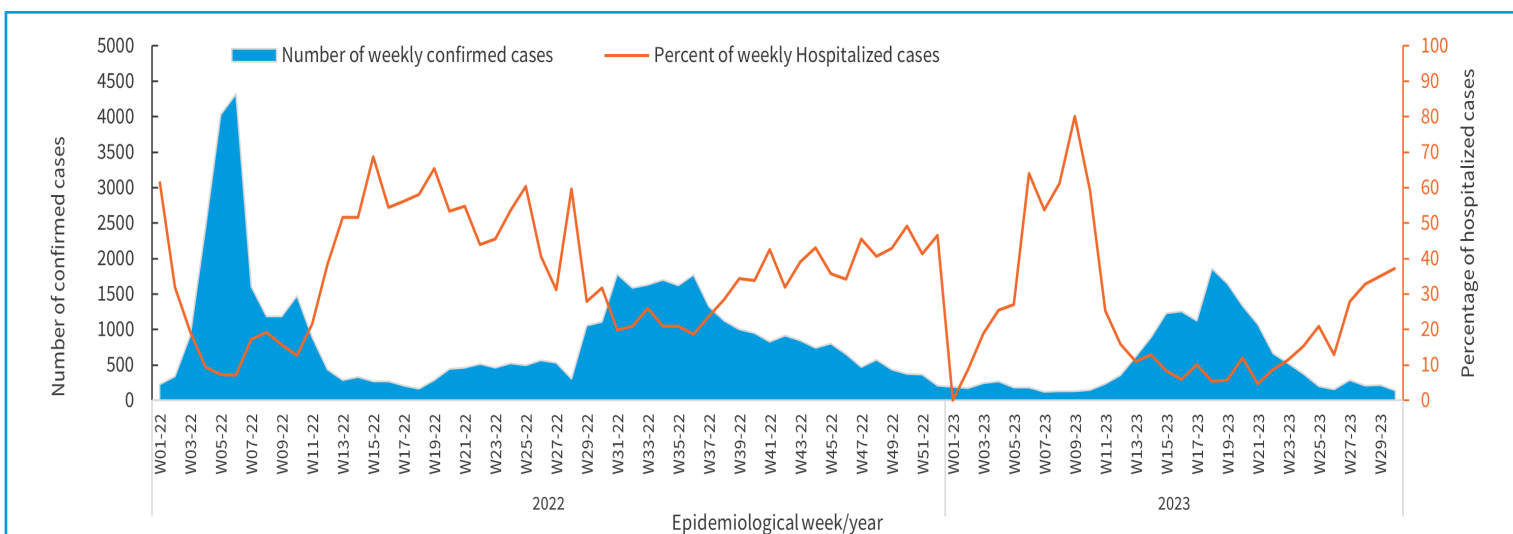


Figure 7. Weekly proportion of hospitalized cases out of newly confirmed COVID-19 cases in Afghanistan as of 01 Jan 2022–29 Jul 2023

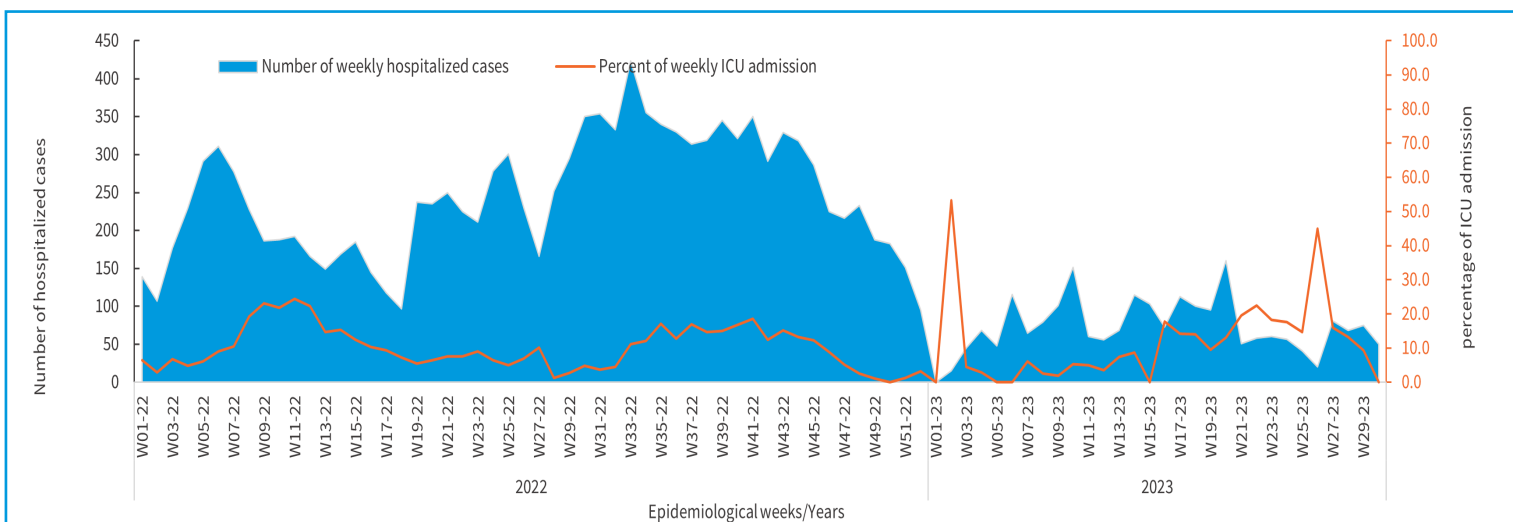


Figure 8. Weekly proportion of ICU admissions out of newly hospitalized COVID-19 cases in Afghanistan as of 01 Jan 2022–29 Jul 2023

## Measles Outbreak (01 Jan to 29 Jul 2023)

**18,684**  
Total Cases

**51**  
Total Deaths

**4,086**  
Sample tested

**2,067**  
Lab confirmed cases

**50.6%**  
Test positivity ratio

Table 4: summary of the suspected measles outbreak in the last eight weeks (04 Jun - 29 Jul 2023)

Indicators	W23	W24	W25	W26	W27	W28	W29	W30	Epi-curve
Suspected cases	580	537	470	357	411	448	477	463	
% Change cases	19.3	-7.4	-12.5	-24.0	15.1	9.0	6.5	-2.9	
Suspected deaths	1	2	1	0	0	1	1	1	
CFR (%)	0.2	0.4	0.2	0.0	0.0	0.2	0.2	0.2	

- The epi-curve shows a stabilization in the number of suspected measles cases during week 30-2023 after the increase observed for 3 consecutive weeks; however, overall, measles cases are showing a slow declining trend since week 10 (Figure 9).
- During epidemiological week 30-2023, a total of 463 suspected cases and one associated death were reported which indicates almost a stabilization in the number of cases, compared to the last week.
- Since Jan 2023, a total of 18,684 suspected measles cases were reported, out of which 13,218 (70.7%) were children under 5 years of age and 8,817 (47.2%) were females.

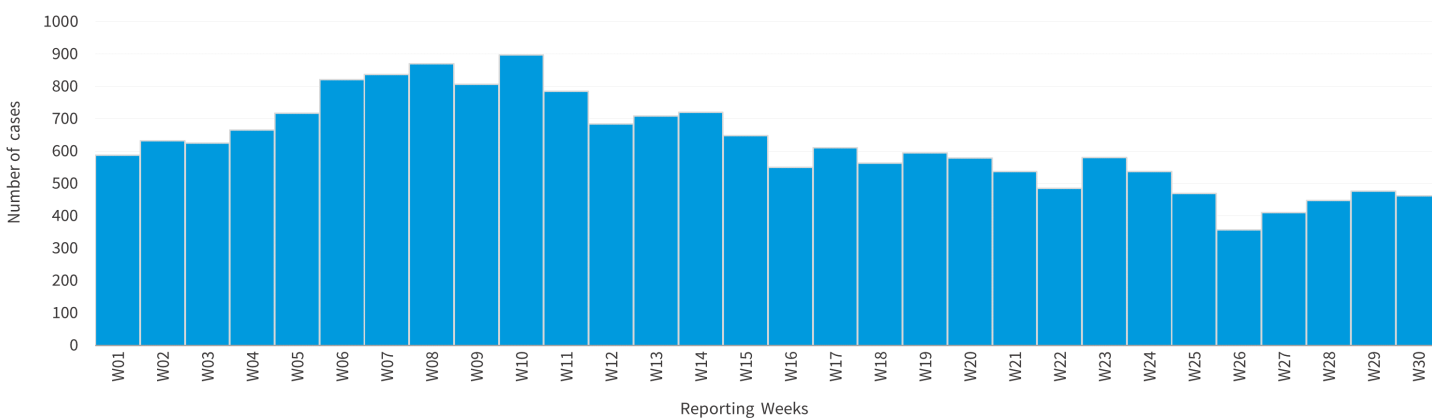


Figure 9. Epidemiological curve of suspected measles cases in Afghanistan, 01 Jan to 29 Jul 2023 (N=18,684)

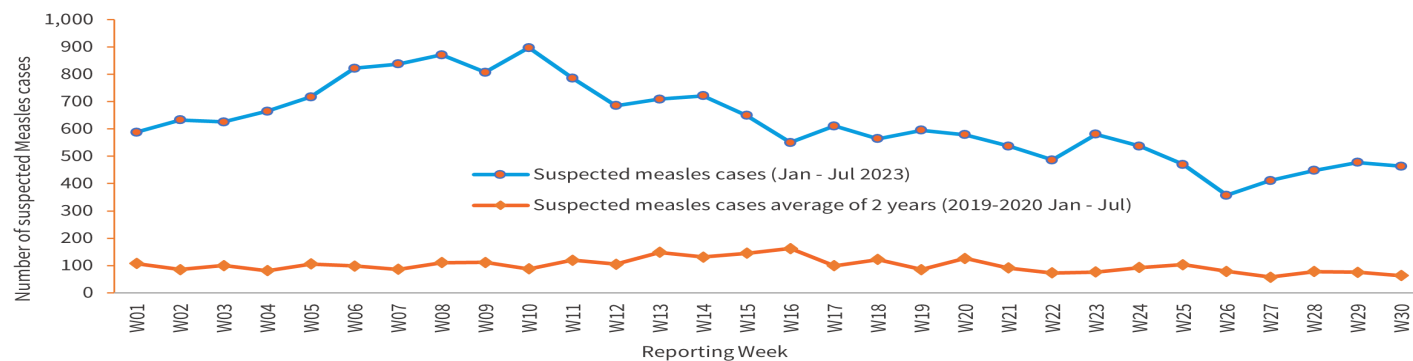


Figure 10. Comparison of suspected measles trend curve using 2 years average (2019-2020) vs Jan-Jul 2023, Afghanistan

Comparing the current trend with the trend for the average number of suspected cases reported during 2019-2020; reveals that despite efforts to control the outbreak, still, measles cases are occurring at a higher rate as compared to the endemic level during 2019-2020 (Figure 10).



# AFGHANISTAN

Suspected measles attack rate per 10,000 population of by province

As of 29 Jul 2023

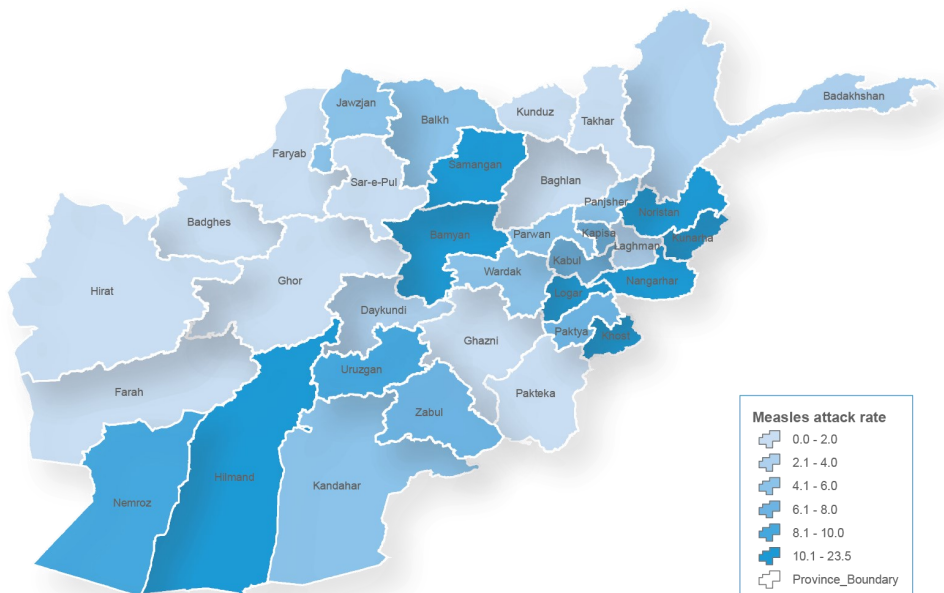


Figure 11. Suspected measles attack rate per 10,000 population by province in Afghanistan 01 Jan–29 Jul 2023 (N=18,684)

## Dengue Fever Outbreak (01 Jan to 29 Jul 2023)

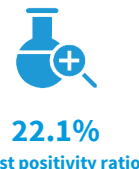


Table 5: summary of the Dengue fever outbreak in the last eight weeks (04 Jun - 29 Jul 2023)

Indicators	W23	W24	W25	W26	W27	W28	W29	W30	Epi-curve
Suspected cases	18	8	22	5	26	18	15	60	
% Change cases	-43.8	-55.6	175.0	-77.3	420.0	-30.8	-16.7	300.0	
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	

- A total of 60 suspected dengue fever cases with no new deaths were reported during week 30-2023; Most of the cases (95.0%, 57 cases) were reported from Nangarhar province while the remaining cases were reported from Laghman province, which brings the total number of cases to 518 and one death since the beginning of 2023.
- During week 30, the number of weekly suspected cases shows huge increase by 300.0% compared to week 29 (Figure 12).
- Out of 518 reported cases, 277 (53.5%) were females and 505 (97.5%) were over 5 years of age.
- Since Jan 2023, a total of 181 samples have been collected, out of which 40 were confirmed (22.1% positivity).

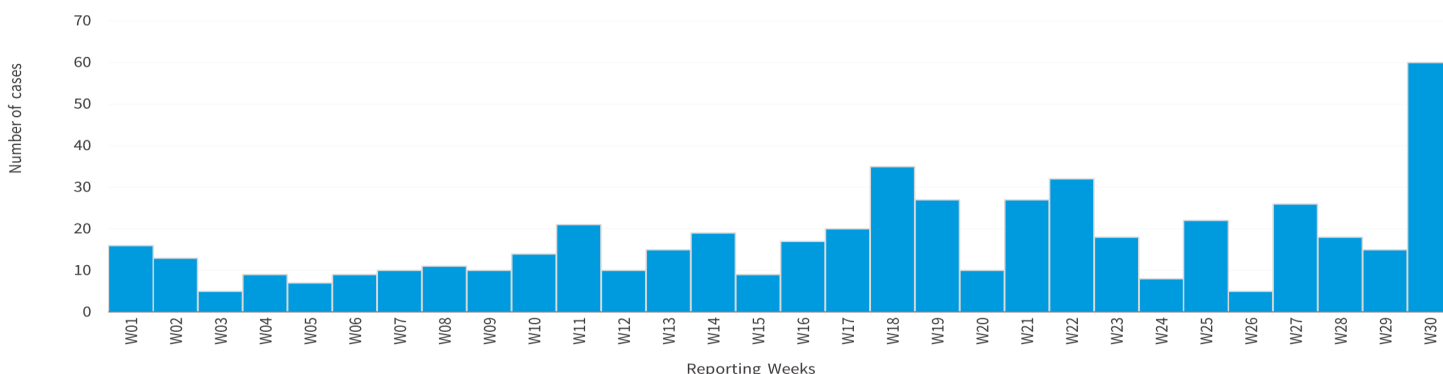
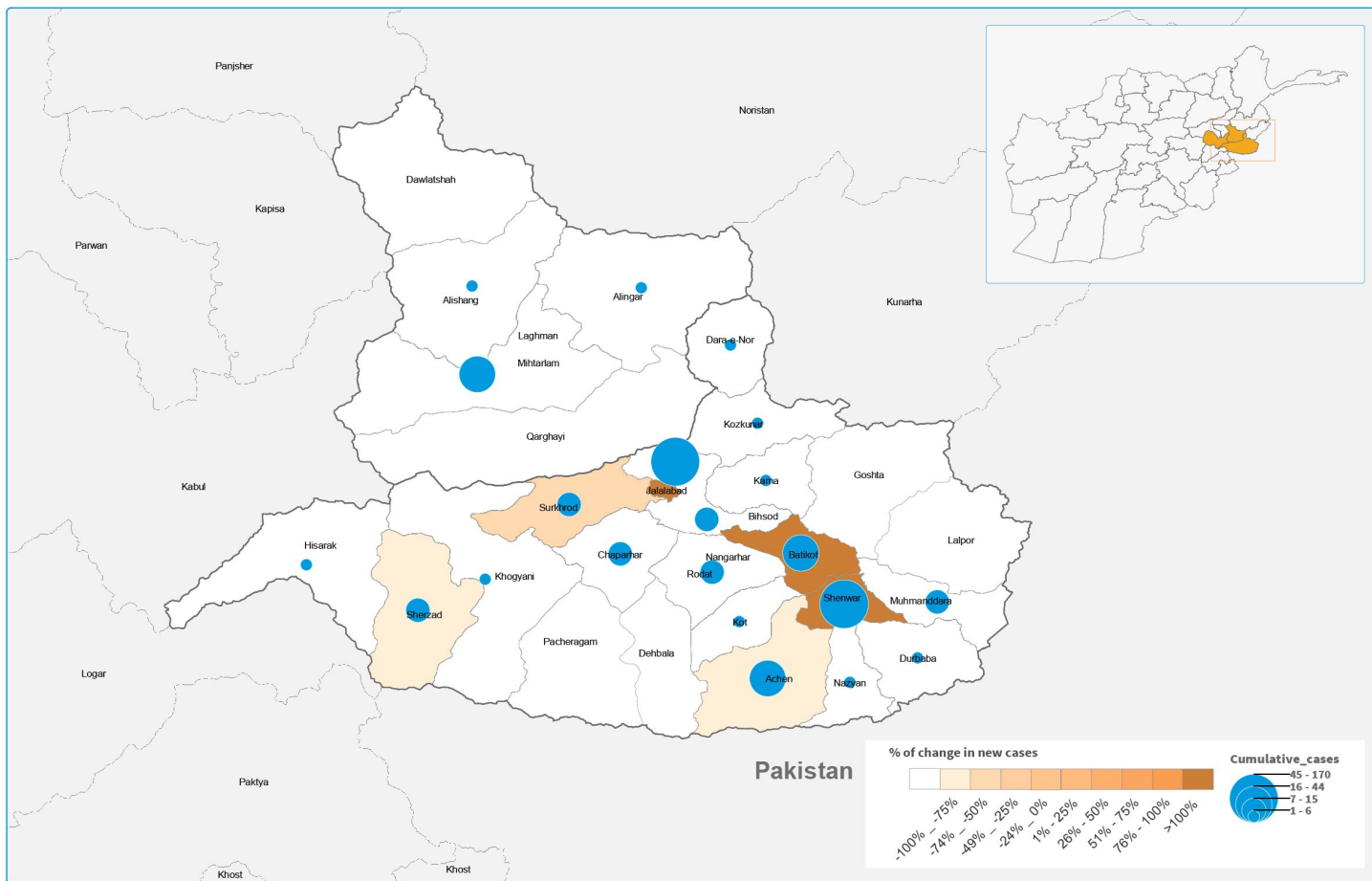


Figure 12. Epidemiological curve of dengue fever cases in Afghanistan 01 Jan–29 Jul 2023 (N=518)



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: 29 July 2023.

**Figure 13.** Hotspot areas of dengue fever cases and percent change of new cases in Afghanistan, Jan-Jul 2023

### Response to the Dengue fever outbreak

- Case management guideline for dengue fever has been revised and being reviewed by the MoPH for their endorsement; a one-day workshop was also held with the participation of representatives from specialty hospitals and the guideline protocol department of MoPH to present and finalize the guideline.
- Since the beginning of 2023, a total of 320 HCWs have been trained on dengue case management in the East region.

### Outbreaks of suspected botulism

- During week 30-2023, two outbreaks of suspected botulism were reported from 2 regions; North region (Balkh) and West region (Badghis).
- In Balkh province:
  - The outbreak occurred in Qaraghojla village, Dawlatabad district of Balkh province.
  - Total number of suspected cases was 4, including one death.
  - One case has recovered while the remaining 2 cases are hospitalized in the national infectious disease hospital in Kabul.
  - All cases were over 5 years of age and 2 (50.0%) were females, the death case was female.



- In Badghis province:

- The outbreak occurred in Ghaib Ali Dasht in Qadis district, Badghis province.
- Total number of suspected cases was 8, including 5 deaths.
- One case has recovered while the remaining 2 cases are admitted to the ICU in Herat Regional Hospital.
- Seven (87.5%) cases were over 5 years of age and 5 (62.5%) were females.
- Among the 5 deaths, 3 (60.0%) were females and 4 (80.0%) were above five years.

### Challenges to the response:

- Currently botulism anti-toxin is not available in Afghanistan and the Country Office is working closely with the technical team in EMRO to bring in the anti-toxin.
- No diagnostic capacity to confirm the diagnosis of botulism in Afghanistan and discussions are on-going either to establish the capacity or to send the samples to one of the WHO Collaborating Centers.

Note: MOPH is the source of epidemiological data

#### Contact us for further information:

- Dr. Alaa AbouZeid, MD, MPH, MSc, PhD: Health Emergencies Team Lead, WHO-CO, ([abouzeida@who.int](mailto:abouzeida@who.int))
- Dr. Mohamed Tahoun, MD, MPH, PhD : Head of Infectious Hazard Preparedness, WHO-CO, ([tahounm@who.int](mailto:tahounm@who.int))
- Dr. Mohammad Omar Mashal, MD, PhD: National Surveillance Officer WHO-CO, ([mmashal@who.int](mailto:mmashal@who.int))
- Mr. Hafizullah Safi, BSF, MBA, MPH: Data Management Officer, WHO-CO, ([safih@who.int](mailto:safih@who.int))
- Mr. Abdul Wahid Amiri: Surveillance Data Analyst, WHO-CO, ([amiria@who.int](mailto:amiria@who.int))