



### AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #37-2024

No. 37 (08 - 14 Sep 2024)

#### Disease Outbreaks

Cumulative Cases 2024

Cumulative deaths 2024 (CFR %)

AWD with dehydration

Dengue fever (Suspected)

CCHF (Suspected)

Measles (Suspected)

COVID-19 (Confirmed)

Malaria (Confirmed)

135,493

2,147

999

50,136

10,353

55,192

63 (0.05)

0 (0.0)

84 (8.4)

225 (0.4)

57 (0.6)

2 (0.004)

(Data from 610 (99.5%) out of 613 sentinel sites)

### Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 Jan-14 Sep 2024)



135,493

Total AWD with dehydration cases



63

Total AWD with dehydration deaths



6,946

Samples tested for AWD with dehydration (RDTs)



1,017

RDT-positive cases for AWD with dehydration



14.6%

RDT positivity rate for AWD with dehydration

**Table 1:** Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (21 Jul – 14 Sep 2024)

Indicators	W30	W31	W32	W33	W34	W35	W36	W37	Trend line
Number of cases	6,788	6,369	6,479	6,081	6,048	5,224	5,528 *	4,463	
Number of deaths	1	2	3	3	1	3	2	1	
CFR (%)	0.01	0.03	0.05	0.05	0.02	0.06	0.04	0.02	

\*A delayed reporting was experienced during week 36 and the number of AWD with dehydration cases was modified from 5,388 to 5,528.

- The epi-curve shows a decreasing trend over the past 6 weeks, which could be linked to the approaching end of the summer season (Figure 1).
- During week 37-2024, 4,463 AWD with dehydration cases with 1 associated death were reported from 209 districts, which shows a 19.3% decrease in the number of cases compared to the previous week.
- The new death was under-five male reported from Dykundi province.
- During week 37-2024, no new district reported an AWD with dehydration alert.
- The highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Paktya (102.0) followed by Nimroz (101.3), Logar (83.6), and Kabul (66.7) (Figure 2).
- Since the beginning of 2024, a total of 135,493 AWD with dehydration cases and 63 associated deaths (CFR=0.05%) were reported from 343 districts. Out of the total cases, 74,966 (55.3%) were under-five children, and 67,105 (49.5%) were females.
- Since the beginning of 2024, 6,946 Rapid Diagnostic Tests (RDTs) have been conducted on AWD with dehydration cases, of which 1,017 tests turned positive (positivity rate 14.6%).

**Figure 1.** The weekly distribution of AWD with dehydration cases in Afghanistan 01 Jan– 14 Sep 2024 (N=135,493)





Figure 2. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 14 Sep 2024

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## AWD with dehydration cumulative incidence per 10,000 population by province 01 Jan - 14 Sep 2024



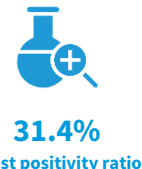
### Updates on the preparedness and response to the AWD with dehydration outbreak

- During week 37-2024, a total of 81 Sentinel sites’ FPs (all were males) from South region were trained on Event-based Surveillance (EBS) and e-surveillance procedures. This brings the total number of focal points trained on EBS and e-surveillance phase-2 (automated analysis) to 405 in the Central, East, South and Southeast regions.
- During week 37-2024, a total of 37 Surveillance Support Team (SST) members from Nangarhar, Kunar, Laghman, and Nuristan were trained on case definition, biosafety protocol, personnel protective equipment (PPE) utilization, use of RDTs, sample collection, storage and shipment .
- Since the beginning of 2024, the following activities have been conducted:
  - A total of 403 sentinel sites’ focal points (including 24 females) have been trained on surveillance procedures in Kabul province, East, South, North, and West regions.
  - A total of 114 Cary Blair kits (100/kit) and 424 RDT kits have been distributed to 7 WHO sub-offices.
  - A total of 125 case management kits have been distributed to the affected communities.
  - A total of 210 HCWs have been trained on AWD with dehydration case management in 5 regions: Central region (70 including 15 females), East region (35 including 15 females), South region (35 all males), North region (35 including 5 females), and Northeast region (35 including 17 females).
  - A total of 38 Data Management Officers, Data Assistants, and Data Entry Clerks (including 3 females) have been trained on data management and analysis.
  - A total of 2,700 Information, Education, and Communication (IEC) materials (1,200 posters and 1,500 brochures) on AWD have been delivered by WHO to Ghor province. These IEC materials have been used in health facilities and flood-affected communities.

### WASH update:

There are no updates for the past 2 weeks.

## Dengue Fever Outbreak (01 Jan-14 Sep 2024 )



Note: Dengue fever laboratory data was reviewed, utilizing the confirmed case definition from WHO. 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 [https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue--outbreak-toolbox\\_20220921.pdf?sfvrsn=29de0271\\_2](https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue--outbreak-toolbox_20220921.pdf?sfvrsn=29de0271_2)

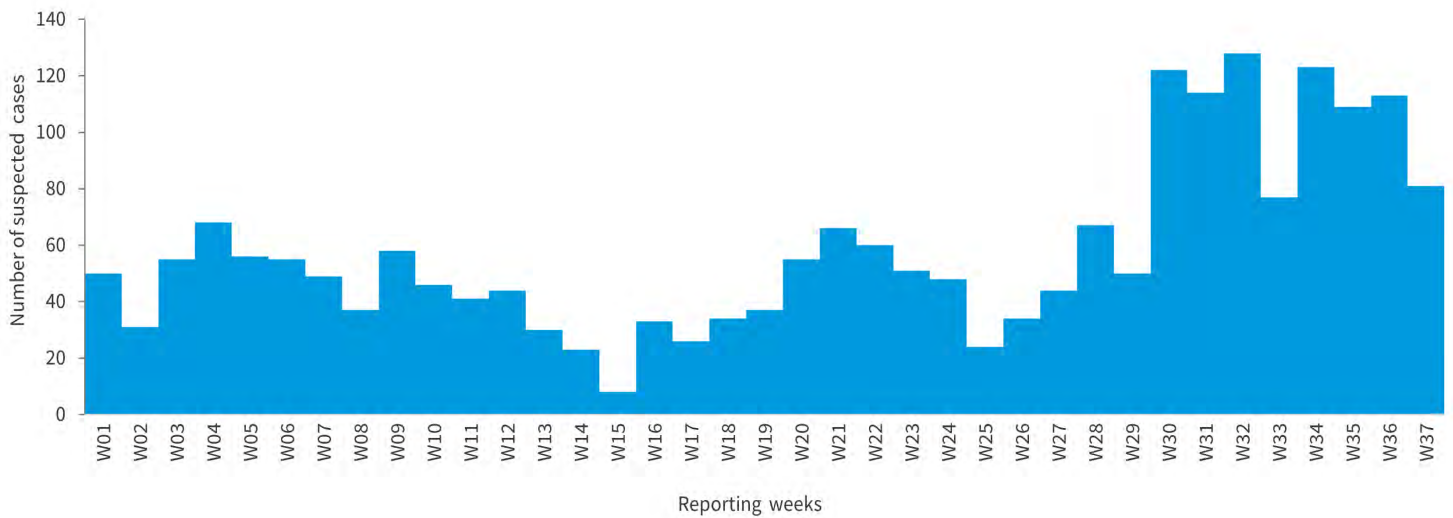


**Table 2:** Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (21 Jul – 14 Sep 2024)

Indicators	W30	W31	W32	W33	W34	W35	W36	W37	Trend line
Suspected cases	122	114	128	77	123	109	113	81	
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 epicure of dengue fever suspected cases shows increasing trend since week 25-2024 (Figure 3).
- During week 37-2024, 81 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province. This represents a 28.3% decrease in the number of suspected cases compared to the preceding week.
- Since the beginning of 2024, the number of suspected dengue fever cases is higher than the 2-year average (2021-2022) and even higher than the number of suspected cases reported in the corresponding weeks in 2023 (Figure 4).
- Since the beginning of 2024, a total of 2,147 suspected cases of dengue fever with no associated deaths were reported, out of which 1,145 (53.3%) were females, and 40 (1.9%) were under-five children. The geographical distribution and weekly change rate are shown in Figure 5.
- Since the beginning of 2024, a total of 1,020 samples have been tested, out of which 320 were positive by PCR (positivity rate 31.4%).

**Figure 3.** The epidemiological curve of suspected dengue fever cases in Afghanistan 1 Jan – 14 Sep 2024, (N=2,147)



**Figure 4.** Comparison between the trends of suspected dengue fever cases in 2024 vs 2023 and 2-year average (2021-2022)

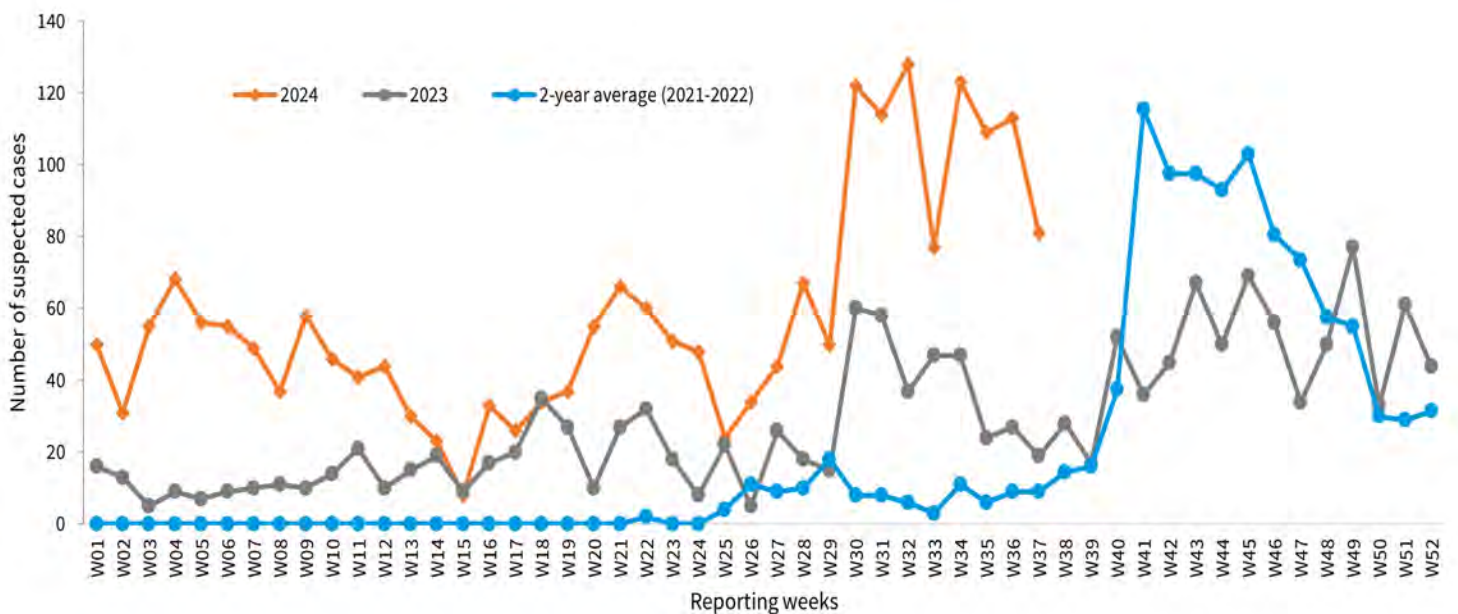


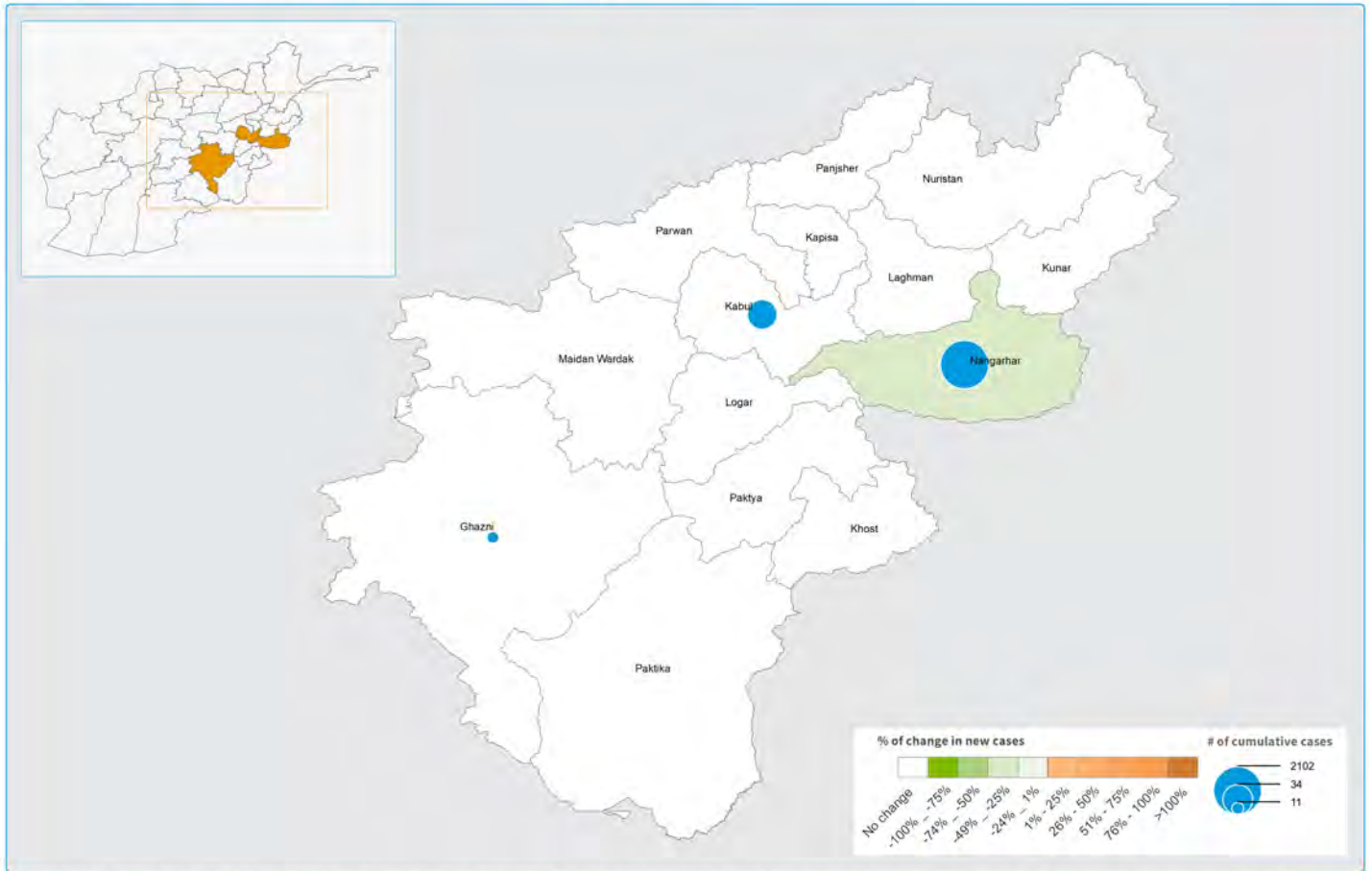




Figure 5. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01 Jan – 14 Sep 2024



**Geographical distribution of suspected dengue fever cases in Nangarhar, Ghazni and Kabul provinces and weekly percent of changes (between weeks 36 and 37, 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: 14 Sep 2024.

### Updates in the response to the dengue fever outbreak

Since the beginning of 2024, the following activities were conducted:

- A total of 835 dengue fever RDT kits (10 tests/kit) have been distributed to South and East WHO sub-regional offices.
- A total of 386 HCWs (MDs and Nurses) have been trained on dengue fever case management from Kandahar (46 males and 42 females), Southeast region (64 males and 43 females), and East region (104 males and 87 females).
- A total of 150 lab technicians of HF of Kandahar (28), Southeast region (54), and East region (68) have been trained on dengue fever diagnosis.

### Outbreak of Crimean Congo Hemorrhagic Fever (CCHF)

(01 Jan-14 Sep 2024)



999

Total CCHF cases



84

Total CCHF deaths



631

Samples tested for CCHF



237

Lab-confirmed CCHF cases



37.6%

CCHF test positivity rate

Table 3: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (21 Jul – 14 Sep 2024)

Indicators	W30	W31	W32	W33	W34	W35	W36	W37	Trend line
Suspected cases	59	55	43	53	41	33	36	22	
Suspected deaths	4	3	4	4	3	2	5	1	
CFR (%)	6.8	5.5	9.3	7.5	7.3	6.1	13.9	4.5	



- The epi-curve of suspected CCHF cases shows a declining trend since week 27 (Figures 6 & 7).
- During week 37-2024, 22 new suspected CCHF cases with 1 associated death was reported, which shows a 38.9% decrease in the number of suspected CCHF cases compared to the preceding week (Table 3).
- The new death was over-five male, reported from Kabul province.
- Since the beginning of 2024, a total of 999 suspected cases of CCHF with 84 associated deaths (CFR=8.4%) were reported. Out of the total cases, 998 (99.9%) were over-five, while 302 (30.2%) were females.
- The reported deaths were mostly over five years old (83, 98.8%), while 22 (26.2%) were females. Deaths were reported from 8 provinces Kabul (50), Balkh (15), Herat (7), Kunduz (4), Kapisa (3), Baghlan (2), Nangarhar (2) and Kunar (1).
- Since the beginning of 2024, a total of 631 samples of suspected CCHF cases have been tested, out of which 237 were positive (positivity rate 37.6%) from 12 provinces.
- The positive cases were reported from Kabul (160), Balkh (23), Kunduz (20), Herat (11), Kapisa (9), Takhar (3), Baghlan (3), Nangarhar (3), Badakhshan (2), Helmand (1), Paktika (1), and Kandahar (1).
- The highest cumulative incidence of suspected CCHF per 100,000 population in 2024 is reported from Balkh (8.7) followed by Kabul (6.4), Kapisa (6.0), and Jawzjan (4.6) provinces (Figure 8).

Figure 6. Weekly distribution of suspected CCHF cases in Afghanistan 01 Jan – 14 Sep 2024, (N=999)

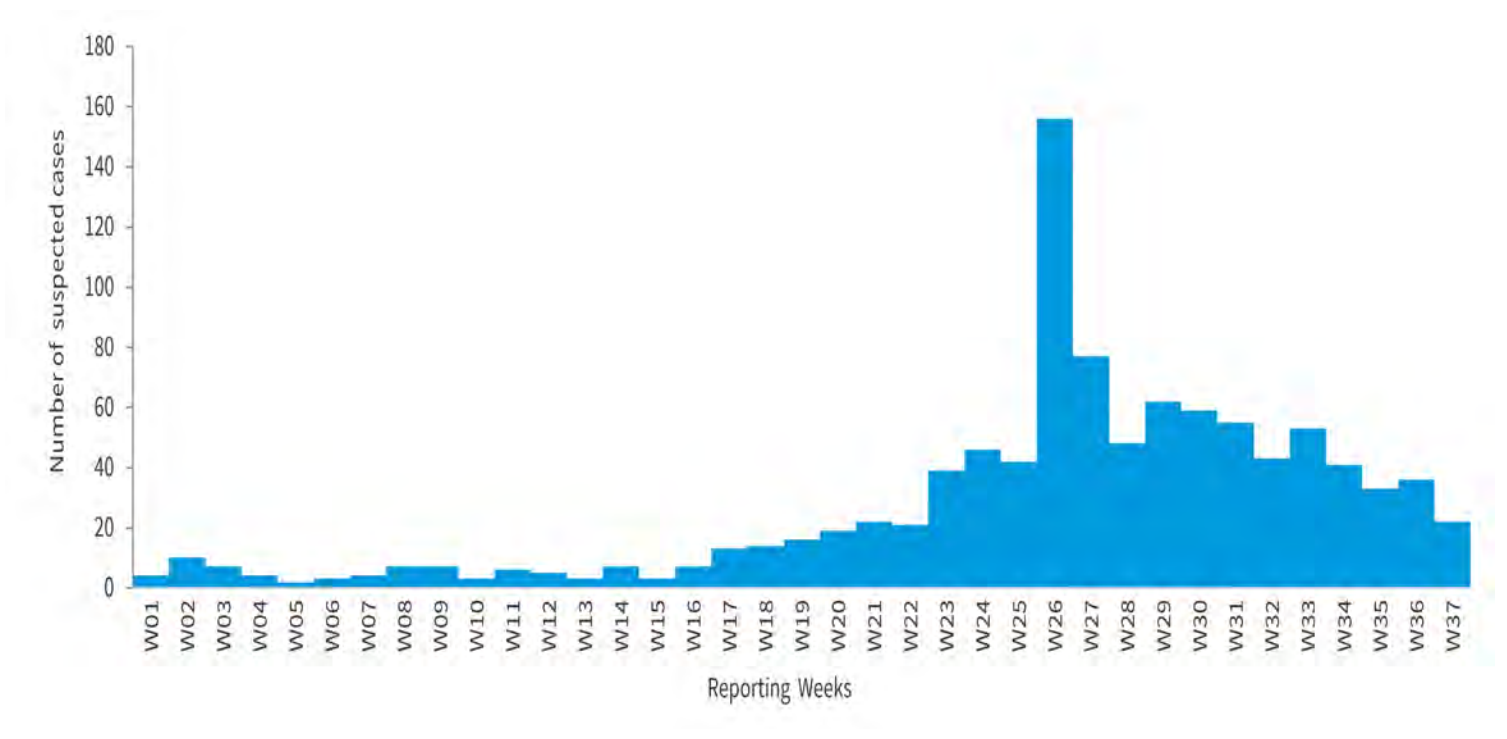
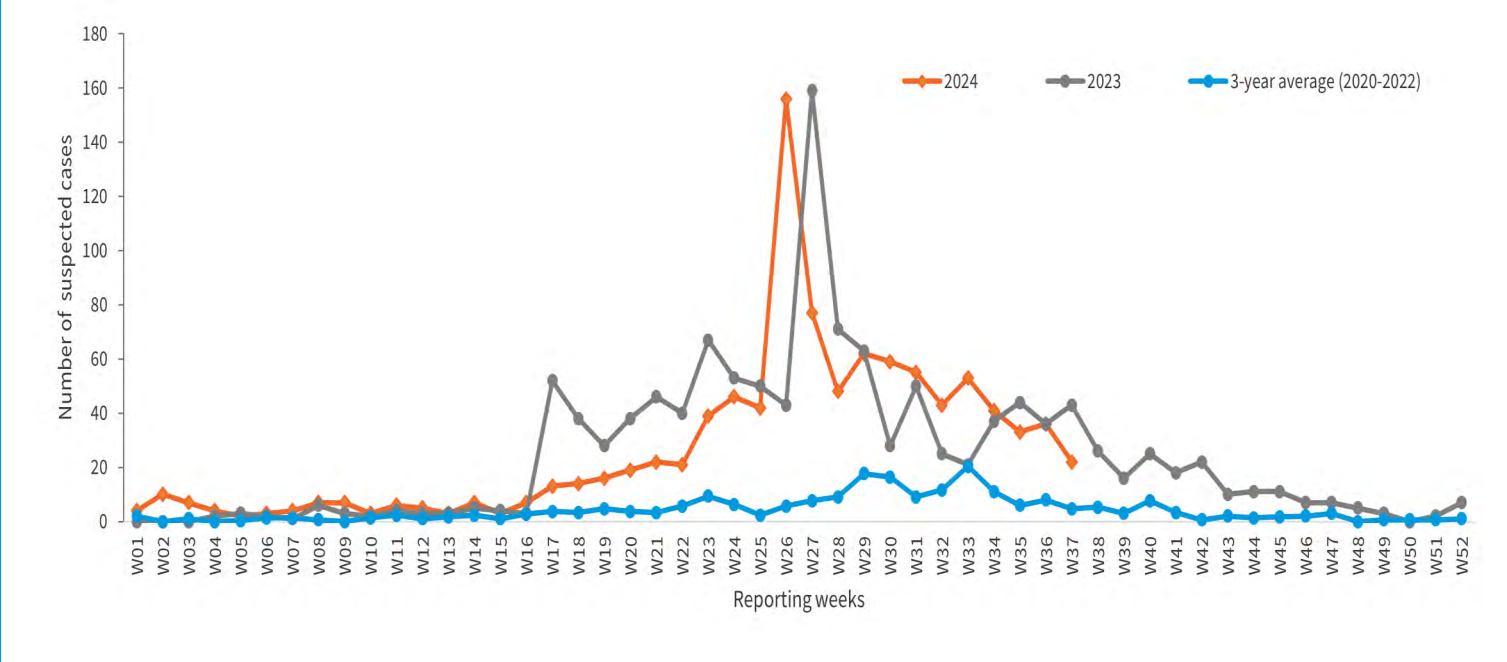


Figure 7. Comparison between the trends of suspected CCHF cases in 2024 vs 2023 and the 3-year average (2020-2022)

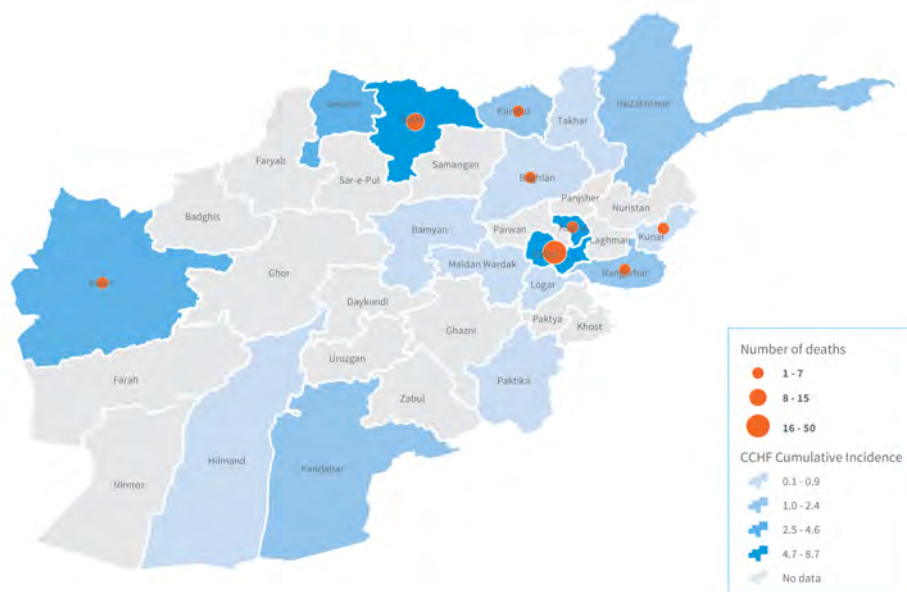




**Figure 8.** Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 01 Jan – 14 Sep 2024

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### Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province and provincial distribution of deaths 01 Jan – 14 Sep 2024



#### Updates on the response to the CCHF outbreak

Since the beginning of 2024, the following activities have been conducted:

- A total of 569 doses of ribavirin tablets and 1,540 doses of ribavirin injections have been distributed to the Infectious Disease Hospital (IDH) in Kabul and all WHO sub-offices.
- Insecticides have been supplied to all 34 provinces for cattle spraying against ticks in animal markets by MAIL and FAO.
- The national Crimean-Congo Hemorrhagic Fever (CCHF) preparedness and response plan has been drafted and shared with MoPH for endorsement. The plan aims to prepare and respond to the CCHF outbreak with focused interventions on surveillance/outbreak investigation, laboratory confirmation, case management and supplies, RCCE for high-risk individuals, and the capacity of healthcare workers.

#### RCCE

Since the beginning of 2024, the following RCCE activities have been conducted as a response to outbreaks:

- WHO has conducted a mass online awareness campaign through the WHO's official social media accounts (Facebook and Twitter) on CCHF and dengue fever preventive measures as a response to infectious diseases, reaching around 25,000 social media users.
- WHO has conducted a seven-day training and mass awareness campaign in Herat, Balkh, and Kandahar provinces, focused on Crimean-Congo Hemorrhagic Fever (CCHF) and other infectious diseases. The campaign included one day of training followed by six days of community outreach. During the campaign, WHO deployed around 110 (43 female and 67 male) social mobilizers to Herat (40 including 18 females), Balkh (35 including 16 females), and Kandahar (35 including 9 females) provinces and reached around 111,696 people through mass awareness campaigns on CCHF and other infectious diseases.

### Measles Outbreak

(01 Jan-14 Sep 2024)



50,136

Total Cases



225

Total Deaths



10,282

Sample tested



6,055

Lab confirmed cases



58.9%

Test positivity rate

**Table 4:** Summary of the measles outbreak in the last eight weeks in Afghanistan (21 Jul – 14 Sep 2024)

Indicators	W30	W31	W32	W33	W34	W35	W36	W37	Trend line
Suspected cases	1,504	1,470	1,546	1,370	1,403	1,265	892	860	
Suspected deaths	8	10	10	8	7	6	4	2	
CFR (%)	0.5	0.7	0.6	0.6	0.5	0.5	0.4	0.2	





- The epidemiological curves of suspected measles cases show gradual declining trend since week 26-2024 (Figure 9). The trend in 2024 is higher than that reported in 2023 and the 2-year average before the 2021-2022 outbreak period (Figure 10).
- During week 37-2024, a total of 860 suspected cases and 2 associated deaths were reported. This shows a slight decrease in the number of suspected measles cases compared to the preceding week.
- The 2 new deaths were both under five females, reported from Kabul and Herat provinces.
- Since the beginning of 2024, a total of 50,136 suspected measles cases and 225 deaths (CFR=0.4%) were reported. Among suspected measles cases, 40,291 (80.4%) were under-five children, and 22,827 (45.5%) were females.
- Since the beginning of 2024, Khost has reported the highest cumulative incidence of suspected measles cases per 10,000 population (68.2), followed by Balkh (29.6), Jawzjan (21.8), and Urozgan (20.6) (Figure 11).

Figure 9. Weekly distribution of suspected measles cases in Afghanistan, 01 Jan to 14 Sep 2024 (N= 50,136)

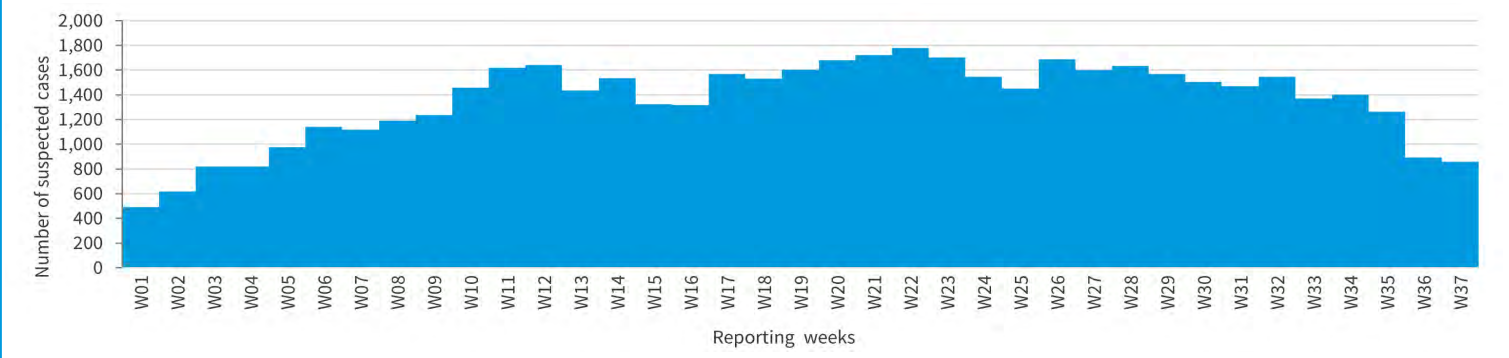


Figure 10. Comparison between the trends of suspected measles cases in 2024 vs 2023 and the 2-year average (2019-2020)

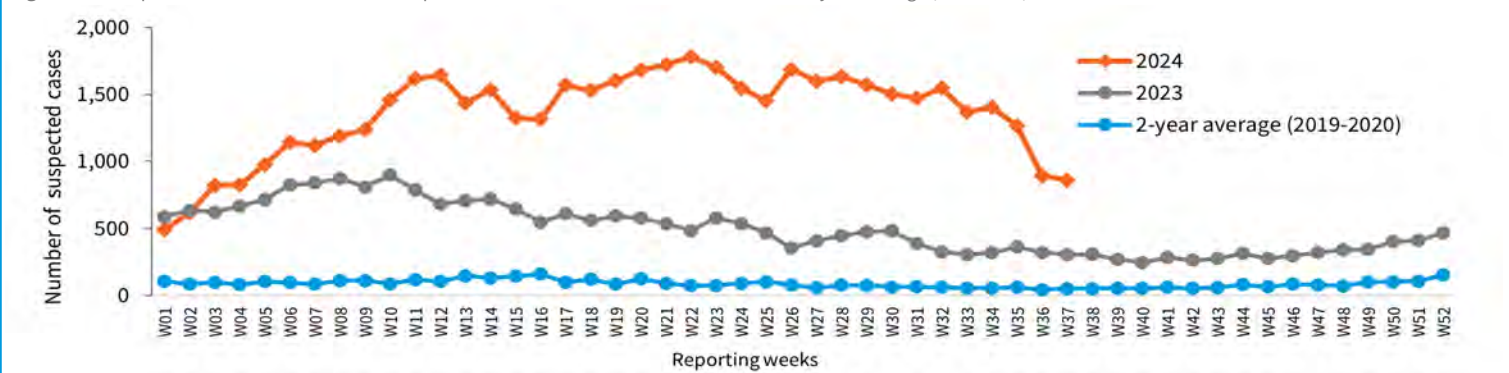
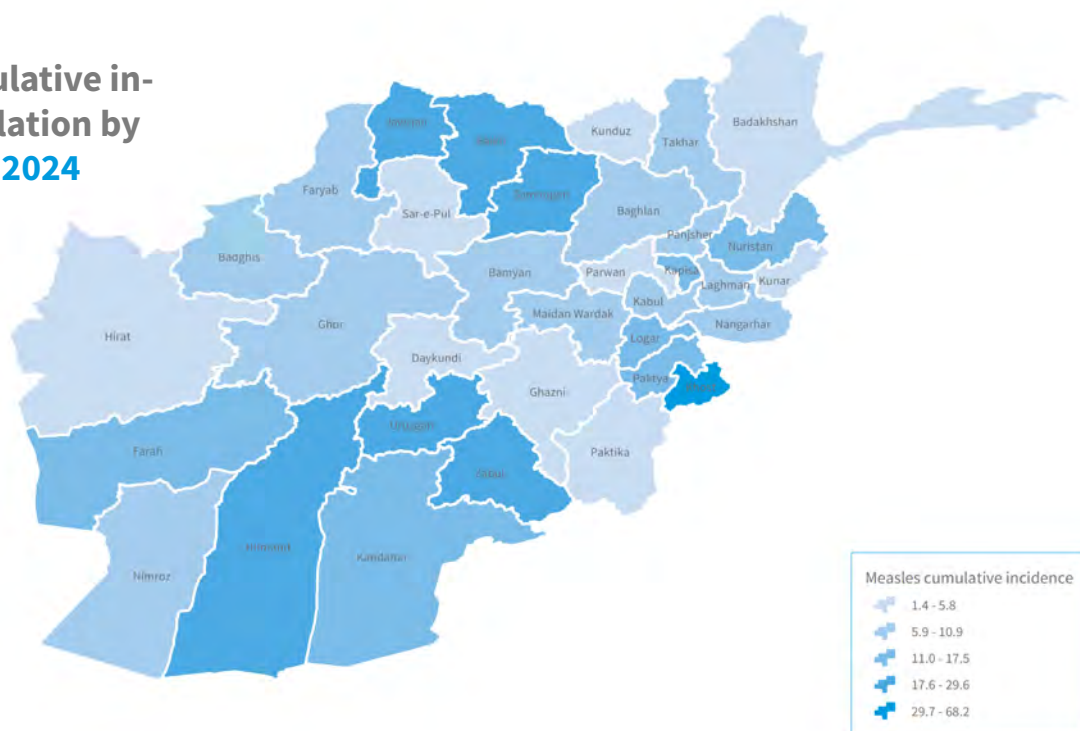


Figure 11. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 Jan-14 Sep 2024

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### Suspected measles cumulative incidence per 10,000 population by province 01 Jan–14 Sep 2024



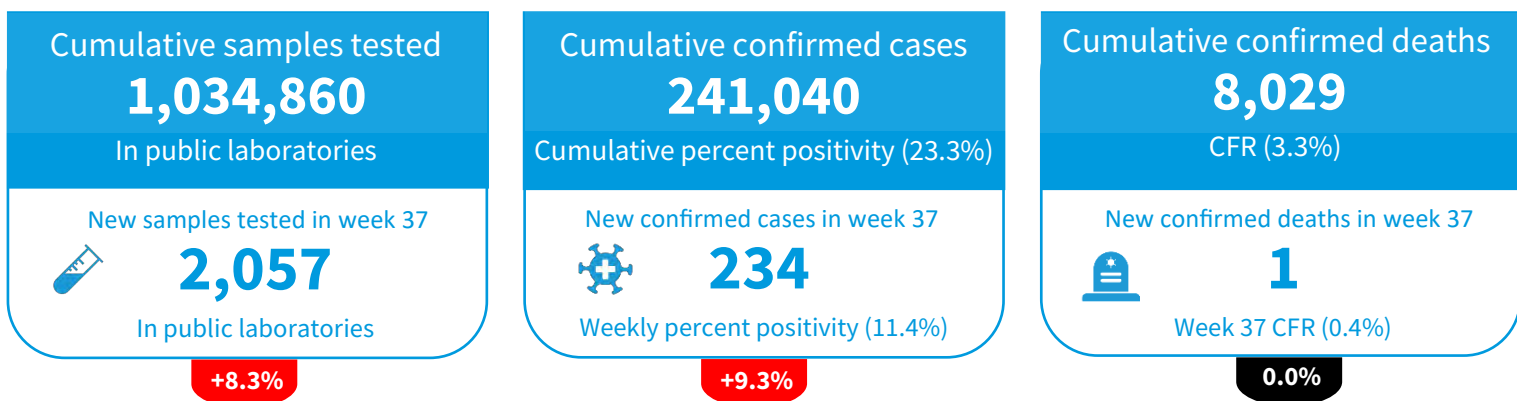


### Updates on the preparedness and response to the Measles outbreak

- During week 37-2024, a total of 268 children aged 9-59 months were vaccinated against measles as part of outbreak response immunization activities in 3 provinces (Paktya, Nuristan and Kapisa). This brings the total number of children vaccinated in outbreak response immunization to 28,065 since the beginning of 2024 across the country.
- Since the beginning of 2024, the following activities have been conducted:
  - A total of 103 SSTs (each team included 2 members) were trained on sample collection, storage, and shipment from 3 regions: Central (63 SSTs), West (3 SSTs), and South (37 SSTs) regions.
  - A total of 126 measles case management kits have been distributed to WHO sub-offices across the country.
- During April and May 2024, a total of 794,676 children aged 9-59 months were vaccinated in 2 phases of the Multi-Antigen Acceleration Campaign (MAAC) in 78 districts of 25 provinces:
  - During the first phase, 624,767 children aged 9-59 months were vaccinated in 53 districts of 13 provinces (Kapisa, Kandahar, Logar, Zabul, Helmand, Khost, Takhar, Nangarhar, Kunar, Balkh, Faryab, Farah, and Kabul).
  - During the second phase, a total of 169,909 children aged 9-59 months were vaccinated in 25 districts of 12 provinces (Wardak, Bamyán, Parwan, Panjshir, Urozgan, Paktya, Paktika, Ghazni, Baghlan, Nuristan, Samangan, and Badghis).

### COVID-19

(24 Feb 2020 — 14 Sep 2024)

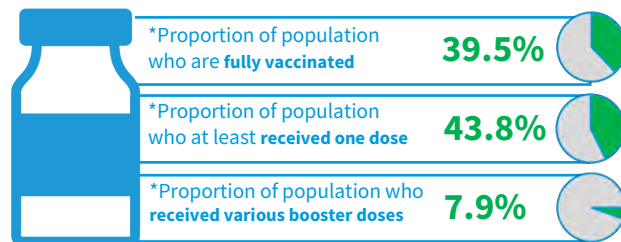


Key: ● Increasing ● Decreasing ● No change

### COVID-19 Vaccination highlights



\*Note: During August 2024, around 13,104 doses of various COVID-19 vaccines have been administered which shows a 65.8% decrease compared to July 2024.



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

**Table 5:** Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (21 Jul – 14 Sep 2024)

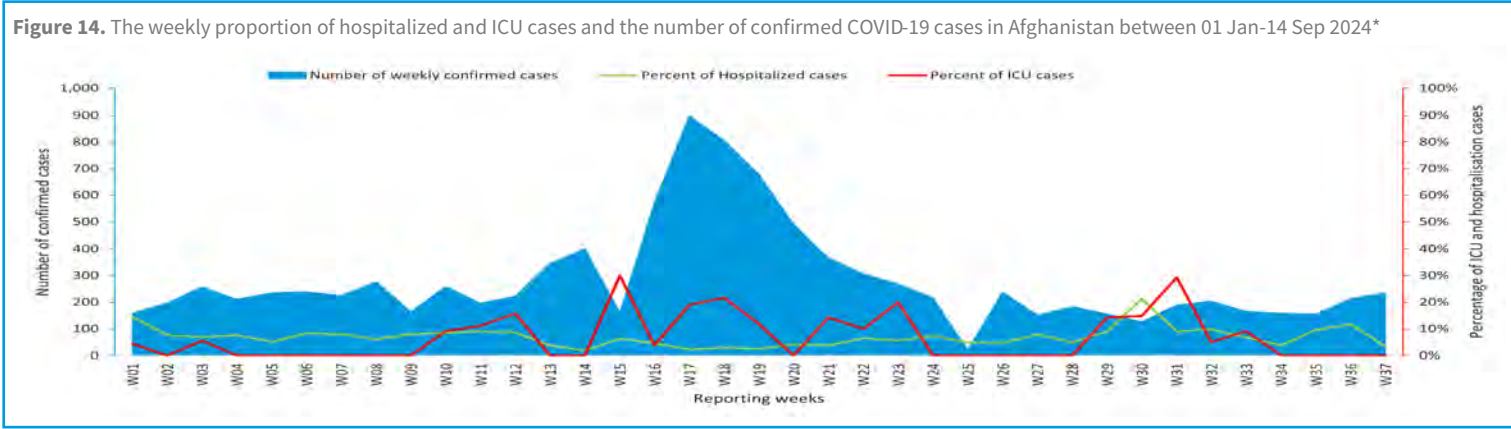
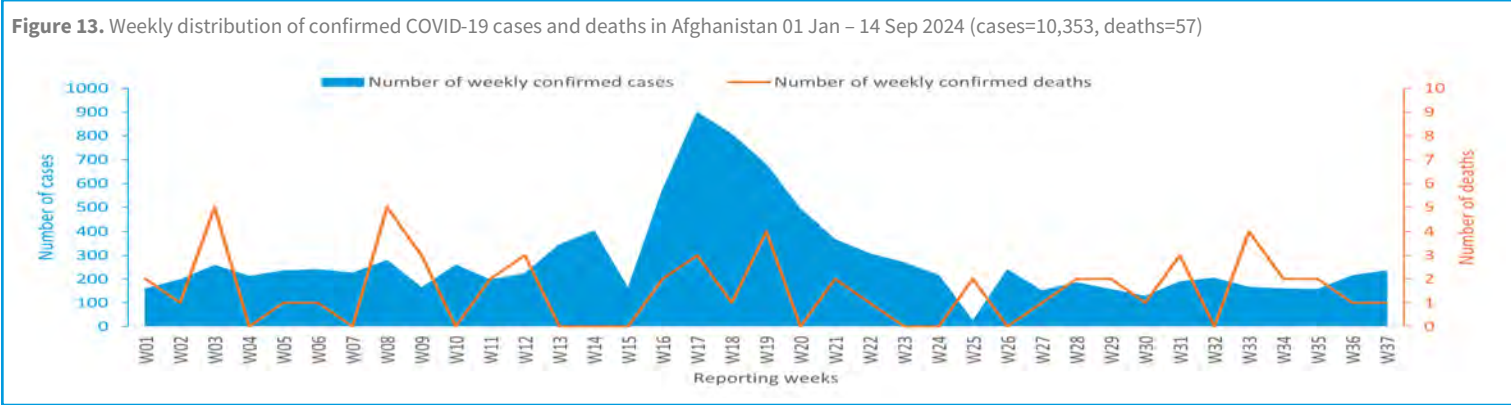
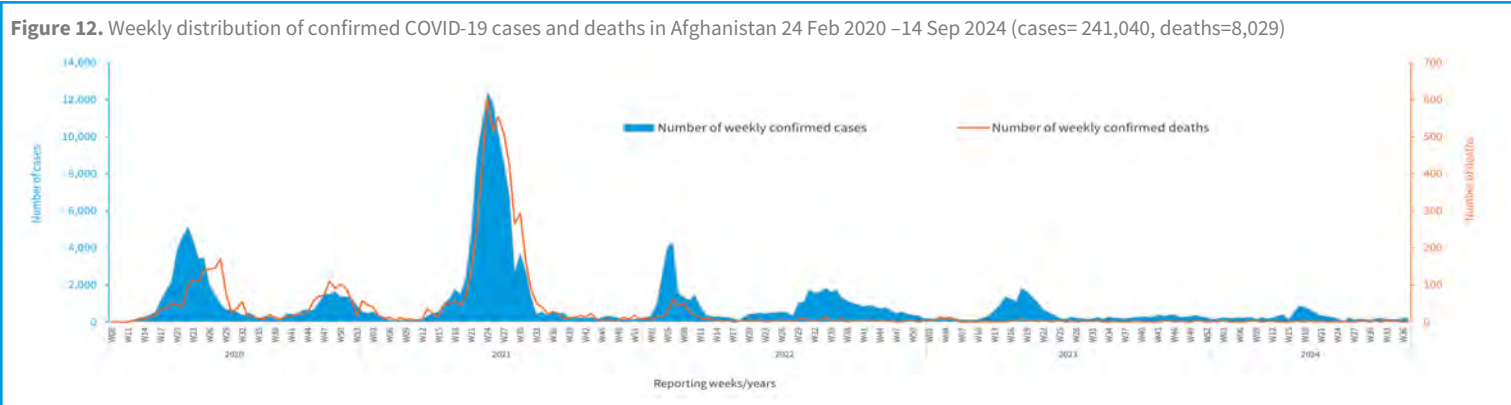
Indicators	W30	W31	W32	W33	W34	W35	W36	W37	Trend line
Samples tested (in public Labs)	1,818	2,020	2,237	1,446	1,739	1,572	1,899 *	2,057	
Confirmed cases	127	189	204	165	159	156	214 *	234	
Percent positivity (%)	7.0	9.4	9.1	11.4	9.1	9.9	11.3	11.4	
Deaths	1	3	0	4	2	2	1	1	
CFR (%)	0.8	1.6	0.0	2.4	1.3	1.3	0.5	0.4	

\*A delayed reporting was experienced during week 36 and the number of samples tested and confirmed COVID-19 cases were modified from 1,828 to 1,899 and from 208 to 214, respectively.





- The epidemiological curve of confirmed COVID-19 cases indicates an increasing trend for the past 2 weeks following a decrease since week 18-2024 (Figures 12 & 13).
- During week 37-2024, a total of 2,057 samples were tested in public labs, of which 234 were positive for COVID-19 (positivity rate 11.4%) with 1 associated death (CFR 0.4%). The number of positive cases shows a 9.3% increase compared to the preceding week (Table 5 and Figure 13).
- The new reported death was over five female from Kabul.
- Since the beginning of 2024, a total of 10,353 COVID-19 confirmed cases and 57 deaths (CFR=0.6%) have been reported. Out of the total cases, 5,641 (54.5%) were females while females represented 3 quarters of deaths (43 - 75.4%).
- During week 37-2024, among 234 confirmed cases, 8 (3.4%) were hospitalized, while none of the hospitalized cases were admitted to ICU (Figure 14).
- Since the beginning of 2024, a total of 89,259 samples of COVID-19 have been tested by public health laboratories across the country, out of which 10,353 were positive (positivity rate 11.6%), while the overall number of COVID-19 samples tested by public health laboratories reached to 1,034,860 since the beginning of the pandemic in February 2020.



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

**Update on the response activities to COVID-19**

- Since the beginning of 2024, the below supplies have been distributed to all regional sub-offices:
  - A total of 930 VTM kits (50 units per kit).
  - A total of 1,571 COVID-19 RDT kits (25 tests per kit).

## Confirmed Malaria Outbreak

(01 Jan-14 Sep 2024)



55,192

Total confirmed Malaria Cases



2 (0.004)

Total malaria deaths (CFR %)

**Table 6:** Summary of the confirmed malaria outbreak in the last eight weeks in Afghanistan (21 Jul – 14 Sep 2024)

Indicators	W30	W31	W32	W33	W34	W35	W36	W37	Trend line
Confirmed cases	2,509	2,494	2,931	2,444	2,850	3,489	3,895 *	3,922	
Confirmed deaths	0	0	0	1	0	0	0	0	
CFR (%)	0.00	0.00	0.00	0.04	0.00	0.00	0.00	0.00	

\*A delayed reporting was experienced during week 36 and the number of confirmed malaria cases were modified from 3,894 to 3,895.

- The epi curve of confirmed malaria cases shows a gradual increase, with the peak reached during week 37-2024 (Figure 15).
- During week 37-2024, 3,922 confirmed cases with no associated deaths were reported from 21 provinces, which shows a slight increase in the number of cases compared to the previous week.
- The trend of confirmed malaria cases in 2024 is higher than the 3-year average (2020-22), while closely following the trend observed in 2023 (Figure 16).
- Since the beginning of 2024, a total of 55,192 confirmed malaria cases with 2 associated deaths were reported from 32 provinces. Out of the total cases, 11,570 (21.0%) were under-five children, and 25,964 (47.0%) were females.
- The highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (326.0) followed by Kunar (224.7), Laghman (117.8), and Nangarhar (66.5) (Figure 17).

Figure 15. The epidemiological curve of confirmed malaria cases in Afghanistan 01 Jan– 14 Sep 2024 (N=55,192)

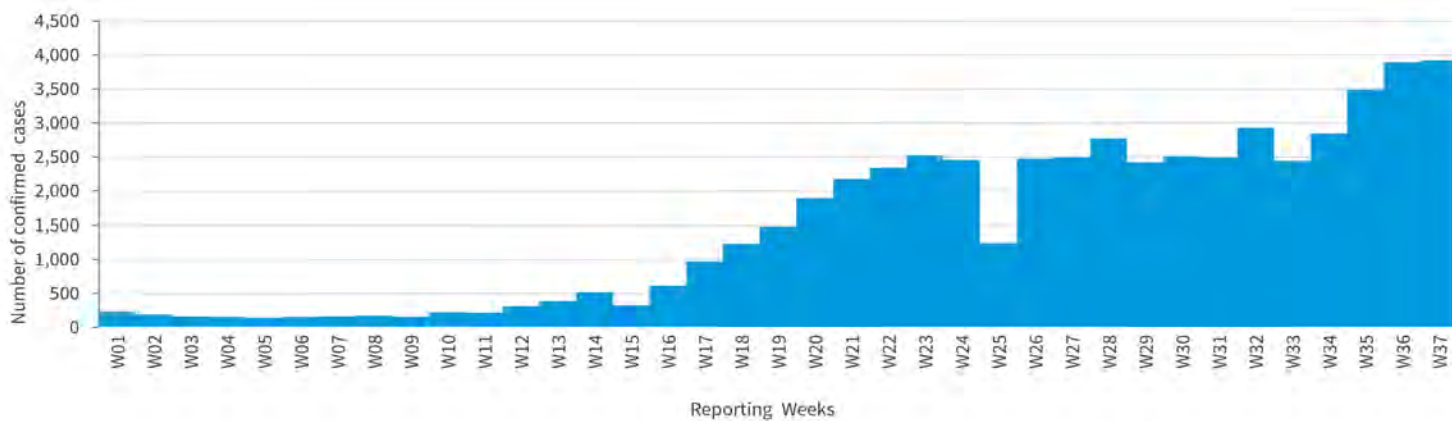


Figure 16. Comparison between the trends of confirmed malaria cases in 2024 vs 2023 and 3-year average (2020-2022)

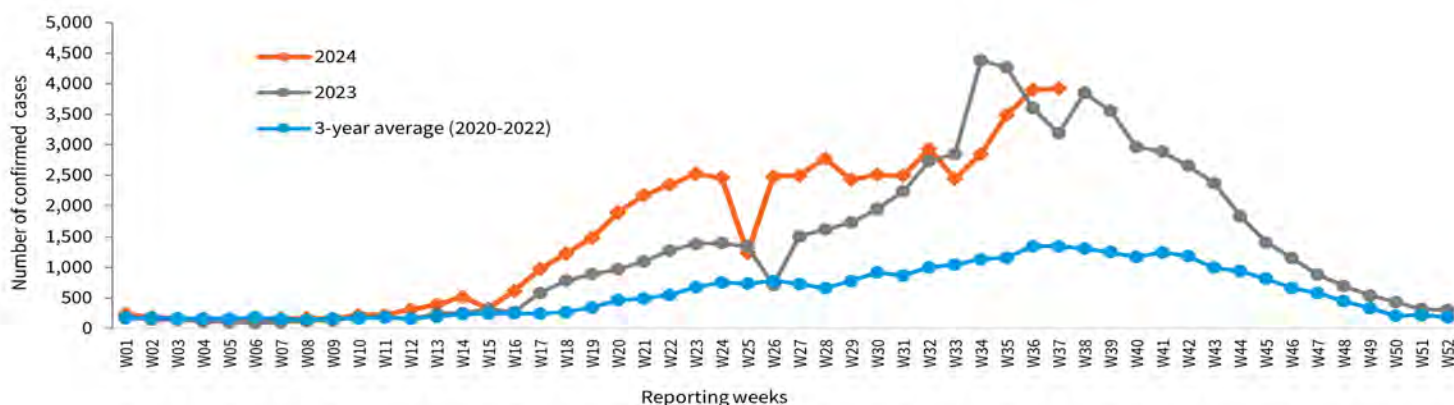
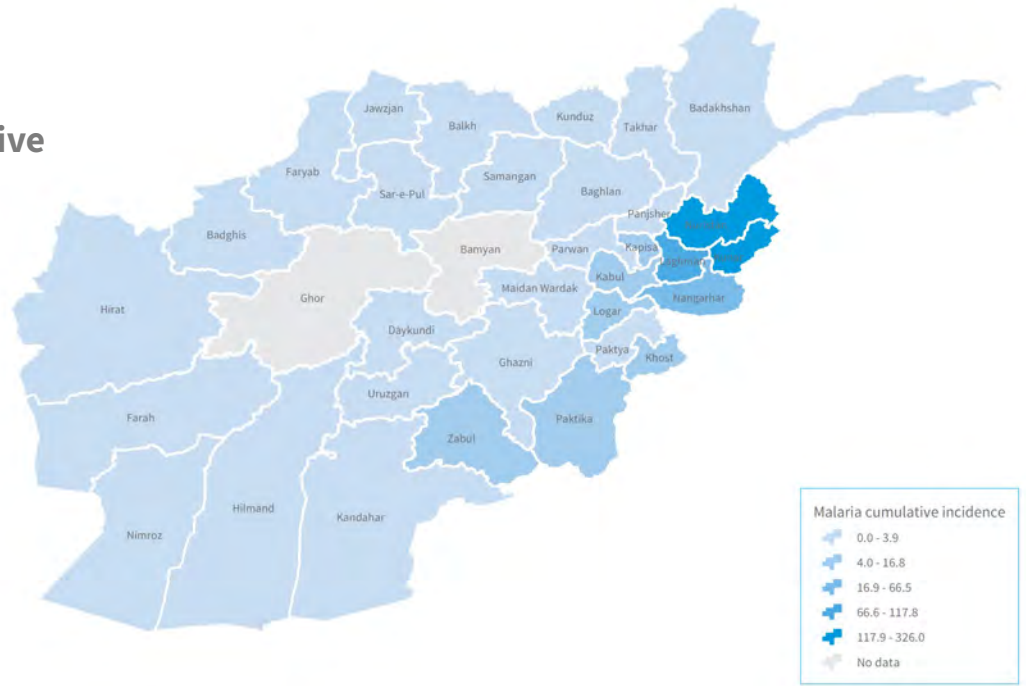




Figure 17. Confirmed malaria cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 14 Sep 2024

**AFGHANISTAN**  
**Confirmed malaria cumulative**  
**Incidence per 10,000**  
**population by province**  
**01 Jan-14 Sep 2024**



Note: MOPH is the source of epidemiological data

[Case definition & alert/outbreak thresholds](#)

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