



AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #42-2024

No. 42 (13 - 19 Oct 2024)

Disease Outbreaks

Cumulative Cases 2024

Cumulative deaths 2024 (CFR %)

AWD with dehydration

152,576

73 (0.05)

Dengue fever
(Suspected)

2,930

1 (0.03)

CCHF
(Suspected)

1,139

93 (8.2)

Measles
(Suspected)

54,088

243 (0.4)

COVID-19
(Confirmed)

11,367

65 (0.6)

Malaria
(Confirmed)

69,727

3 (0.004)

(Data from 608 (99.2%) out of 613 sentinel sites)

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 Jan-19 Oct 2024)

152,576
Total AWD with dehydration cases

73
Total AWD with dehydration deaths

8,172
Samples tested for AWD with dehydration (RDTs)

1,212
RDT-positive cases for AWD with dehydration

14.8%
RDT positivity rate for AWD with dehydration

Table 1: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (25 Aug – 19 Oct 2024)

Indicators	W35	W36	W37	W38	W39	W40	W41	W42	Trend line
Number of cases	5,224	5,528	4,463	4,177	3,657	3,228	3,067	2,954	
Number of deaths	3	2	1	2	2	3	2	1	
CFR (%)	0.1	0.0	0.0	0.0	0.1	0.1	0.1	0.0	

- The epi-curve shows a decreasing trend since week 31-2024, which could be linked to the end of the summer season (Figure 1).
- During week 42-2024, 2,954 AWD with dehydration cases with one associated death were reported from 180 districts, which shows a slight decrease in the number of cases compared to the previous week.
- The new death was under-five female reported from Baghlan province.
- During week 42-2024, 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 (122.9) followed by Nimroz (115.7), Logar (96.1), and Kabul (75.0) (Figure 2).
- Since the beginning of 2024, a total of 152,576 AWD with dehydration cases and 73 associated deaths (CFR=0.05%) were reported from 348 districts. Out of the total cases, 84,419 (55.3%) were under-five children, and 75,593 (49.5%) were females.
- Since the beginning of 2024, 8,172 Rapid Diagnostic Tests (RDTs) have been conducted on AWD with dehydration cases, of which 1,212 tests turned positive (positivity rate 14.8%).

Figure 1. The weekly distribution of AWD with dehydration cases in Afghanistan 01 Jan- 19 Oct 2024 (N=152,576)

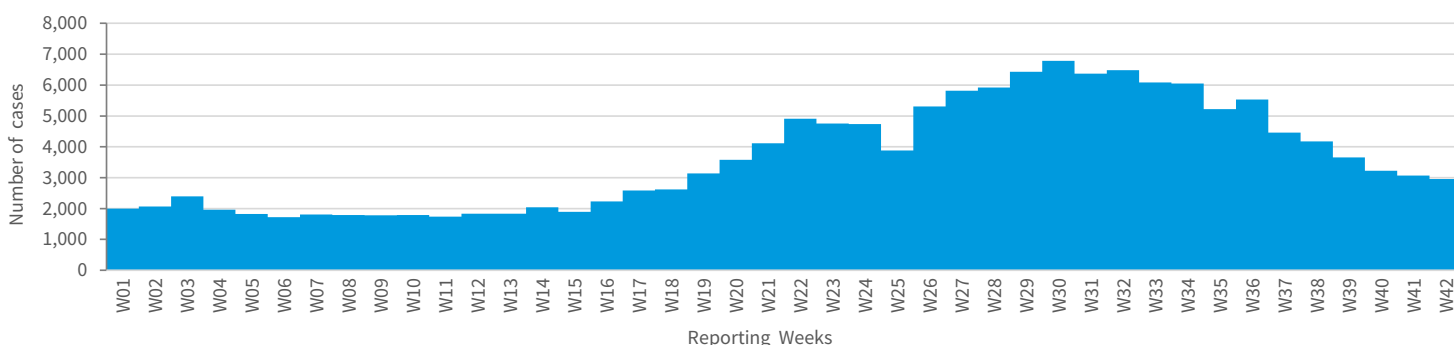
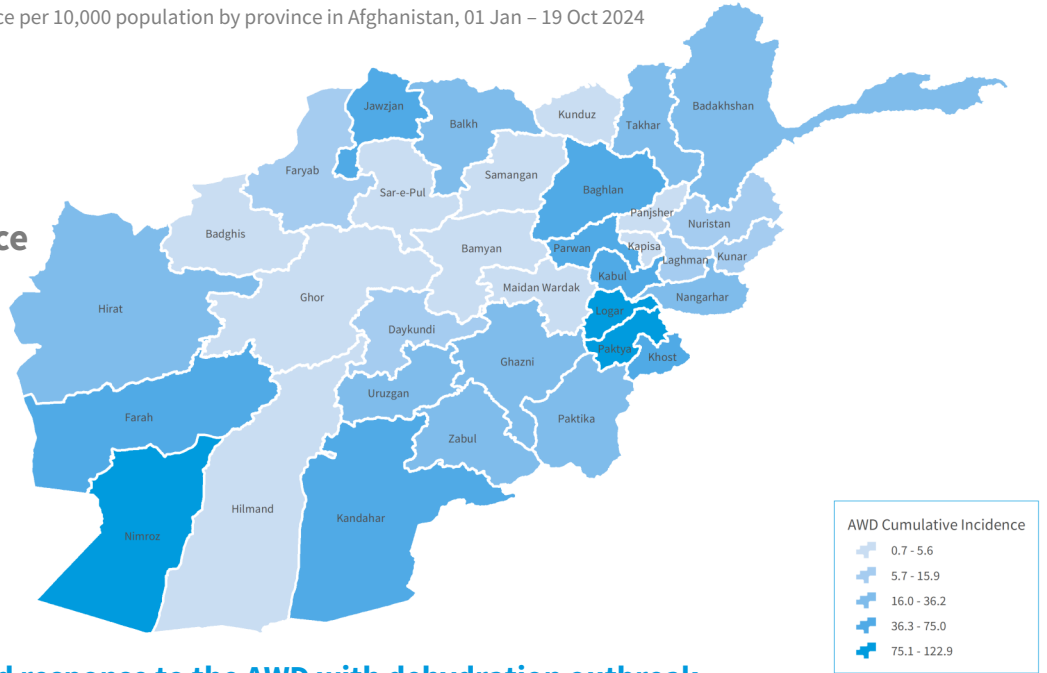




Figure 2. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 19 Oct 2024

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AWD with dehydration cumulative incidence per 10,000 population by province 01 Jan - 19 Oct 2024



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

- During week 42-2024, 124 sentinel sites’ focal points and Community Health Supervisor (CHS) including 26 females were trained on Event-based Surveillance procedures in Bamyan province.
- During week 42-2024, a total of 80 Surveillance sentinel sites’ FPs including 8 females were trained on E-surveillance (automated analysis) from Badghis, Farah, Herat and Ghor provinces. This brings the total number of sentinel sites’ focal points trained on e-surveillance to 485.
- Since the beginning of 2024, the following activities have been conducted:
 - A total of 29 Surveillance Supporting Team members (SSTs) from Nangarhar, Kunar, Laghman, and Nuristan provinces have been trained on sample collection, storage, and shipment of surveillance-targeted diseases.
 - 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 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 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 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-19 Oct 2024)

2,930
Total Cases

1
Total Deaths

***1,412**
Sample tested

494
Lab confirmed cases

35.0%
Test positivity ratio

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



Table 2: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (25 Aug – 19 Oct 2024)

Indicators	W35	W36	W37	W38	W39	W40	W41	W42	Trend line
Suspected cases	109	113	81	118	138	194	152	181	
suspected deaths	0	0	0	0	0	1	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	

- The epi curve of suspected dengue fever cases shows an increasing trend since week 26, 2024 with the highest peak in week 40-2024 (Figure 3).
- During week 42-2024, 181 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province. This represents a 19.1% increase 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 2,930 suspected cases of dengue fever with one associated death were reported (CFR=0.03%), out of which 1,440 (49.1%) were females, and 49 (1.7%) were under-five children. The geographical distribution and weekly change rate are shown in Figure 5.
- Since the beginning of 2024, a total of 1,412 samples have been tested, out of which 494 were positive by PCR (positivity rate 35.0%).

Figure 3. The epidemiological curve of suspected dengue fever cases in Afghanistan 1 Jan – 19 Oct 2024, (N=2,930)

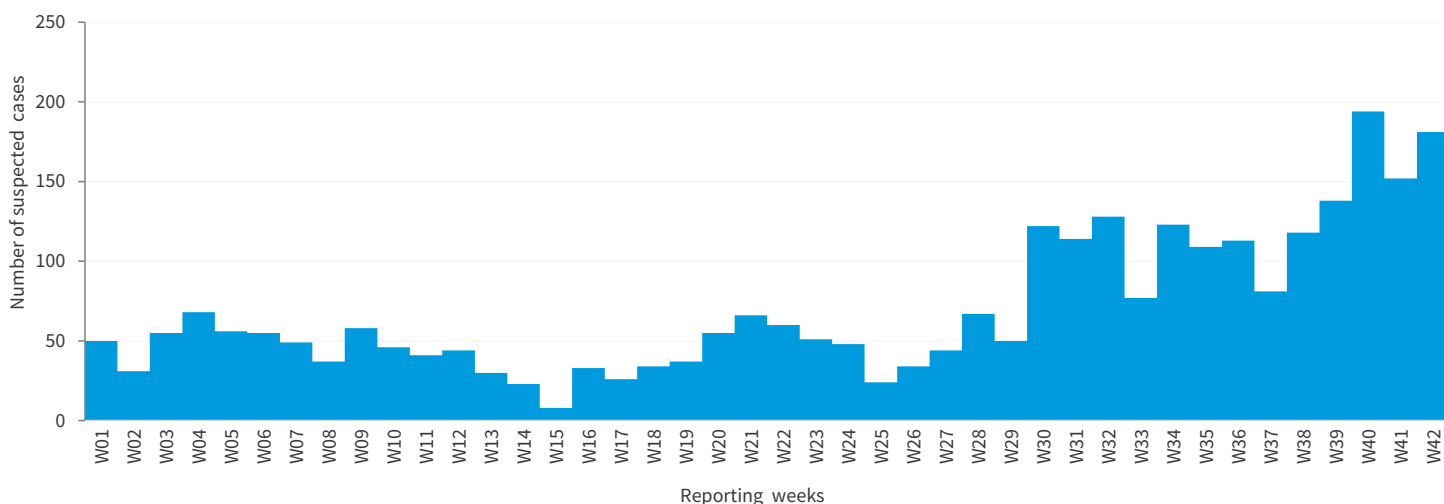


Figure 4. Comparison between the trends of suspected dengue fever cases in 2024 vs 2023 and 2-year average (2021-2022).

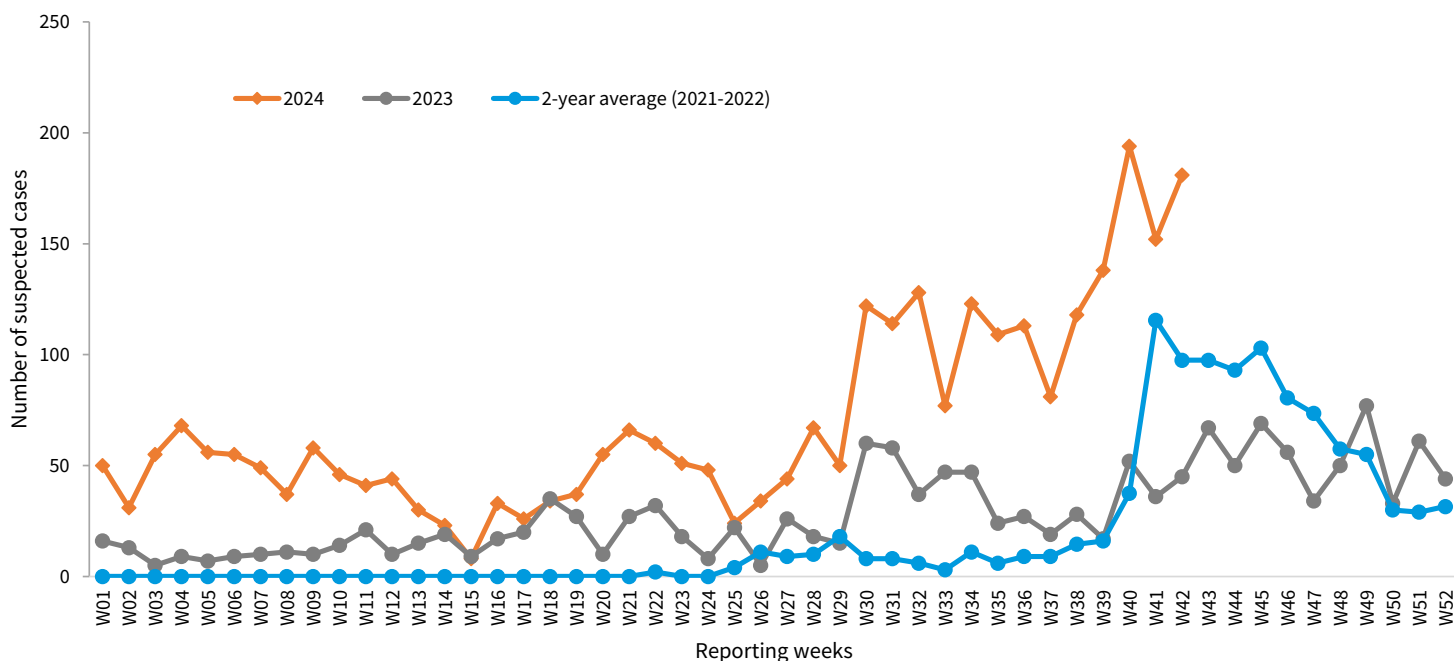
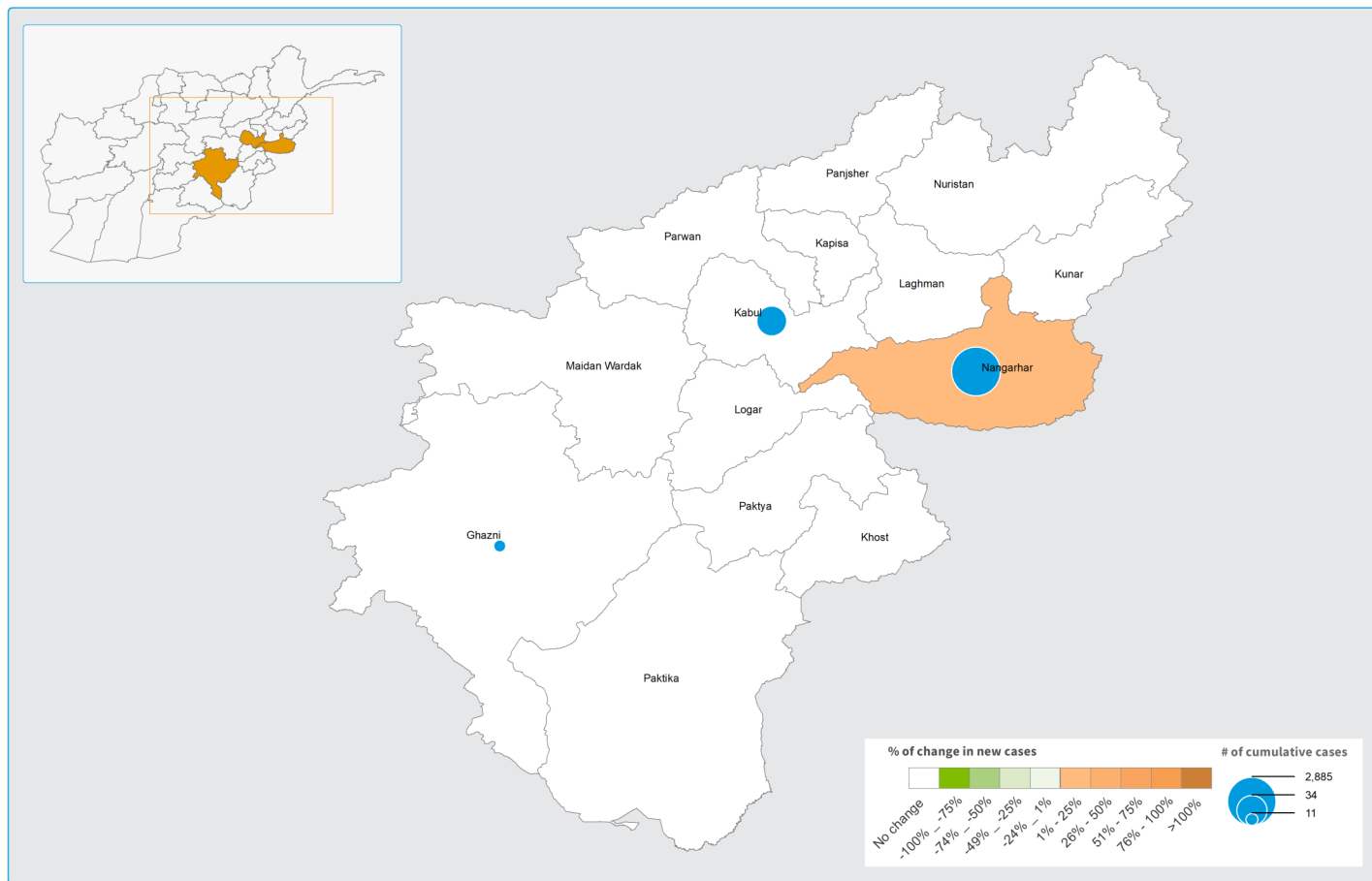


Figure 5. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01 Jan – 19 Oct 2024



Geographical distribution of suspected dengue fever cases in Nangarhar, Ghazni and Kabul provinces and weekly percent of changes (between weeks 41 and 42, 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: 19 Oct 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 HFs 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-19 Oct 2024)



1,139

Total CCHF cases



93

Total CCHF deaths



763

Samples tested for CCHF



251

Lab-confirmed CCHF cases



32.9%

CCHF test positivity rate

Table 3: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (25 Aug – 19 Oct 2024)

Indicators	W35	W36	W37	W38	W39	W40	W41	W42	Trend line
Suspected cases	33	36	22	31	31	40	18	20	
Suspected deaths	2	5	1	3	1	1	1	3	
CFR (%)	6.1	13.9	4.5	9.7	3.2	2.5	5.6	15.0	



- The epi-curve of suspected CCHF cases shows a declining trend since week 27-2024 (Figures 6 & 7).
- During week 42-2024, 20 new suspected CCHF cases with 3 associated deaths were reported, which shows a 11.1% increase in the number of suspected CCHF cases compared to the preceding week (Table 3).
- On Sep 21, 2024, a CCHF outbreak was reported from Kafshan valley of Shinwari district of Parwan province. After the investigations and contact tracings as of Oct 2, 2024, a total of 36 cases have been detected among which 11 were confirmed by RT-PCR testing. The cases were referred to the National Infectious Disease Hospital (NIDH) of Kabul.
- Since the beginning of 2024, a total of 1,139 suspected cases of CCHF with 93 associated deaths (CFR=8.2%) were reported. Out of the total cases, 1,134 (99.6%) were over-five, while 355 (31.2%) were females.
- The reported deaths were mostly over five years old (92, 98.9%), while 26 (28.0%) were females. Deaths were reported from 9 provinces Kabul (55), Balkh (18), Herat (5), Kunduz (4), Kapisa (4), Nangarhar (3), Baghlan (2), Badakhshan (1), and Kunar (1).
- Since the beginning of 2024, a total of 763 samples of suspected CCHF cases have been tested, out of which 251 were positive (positivity rate 32.9%) from 13 provinces.
- The positive cases were reported from 13 provinces Kabul (170), Balkh (23), Kunduz (20), Herat (11), Kapisa (11), Takhar (3), Baghlan (3), Nangarhar (3), Badakhshan (2), Jawzjan (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 (9.5) followed by Kabul (7.6), Kapisa (6.6), and Jawzjan (5.7) provinces (Figure 8).

Figure 6. Weekly distribution of suspected CCHF cases in Afghanistan 01 Jan – 19 Oct 2024, (N=1,139)

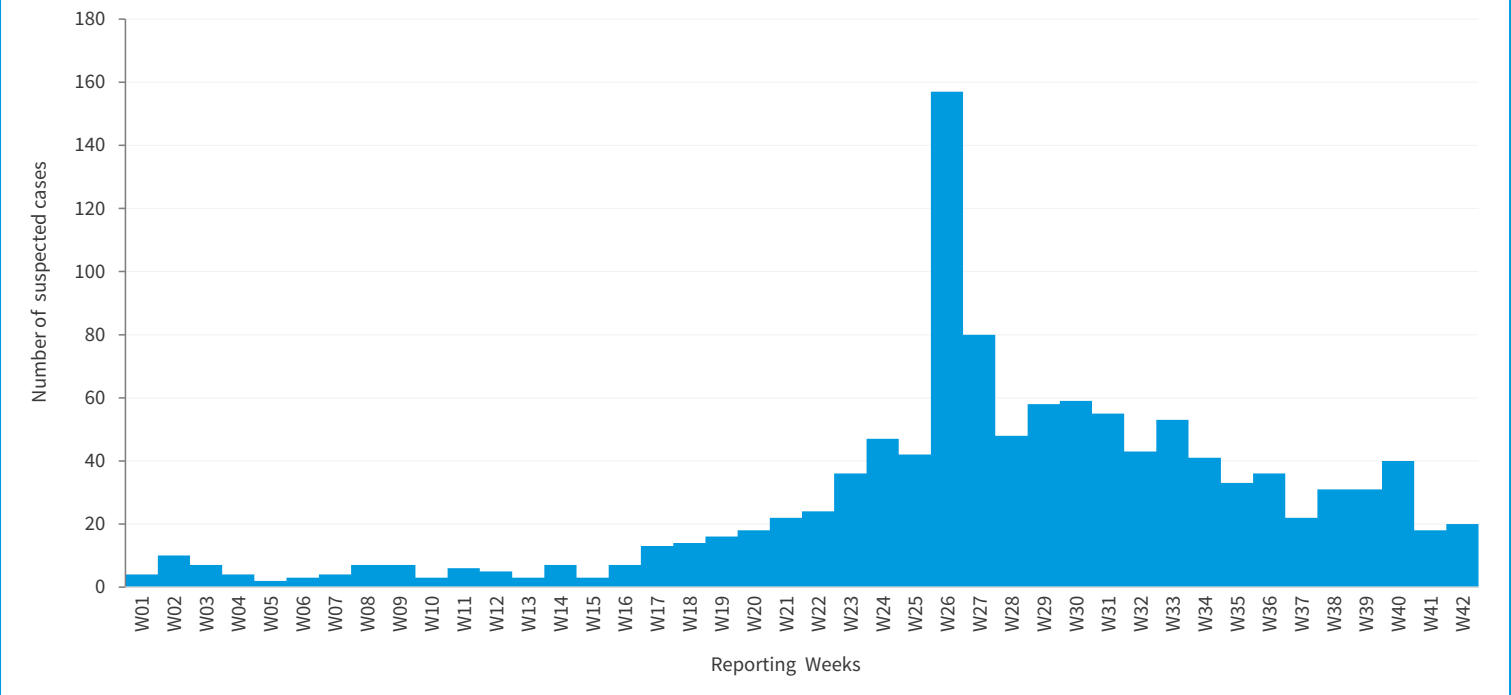


Figure 7. Comparison between the trends of suspected CCHF cases in 2024 vs 2023 and the 3-year average (2020-2022)

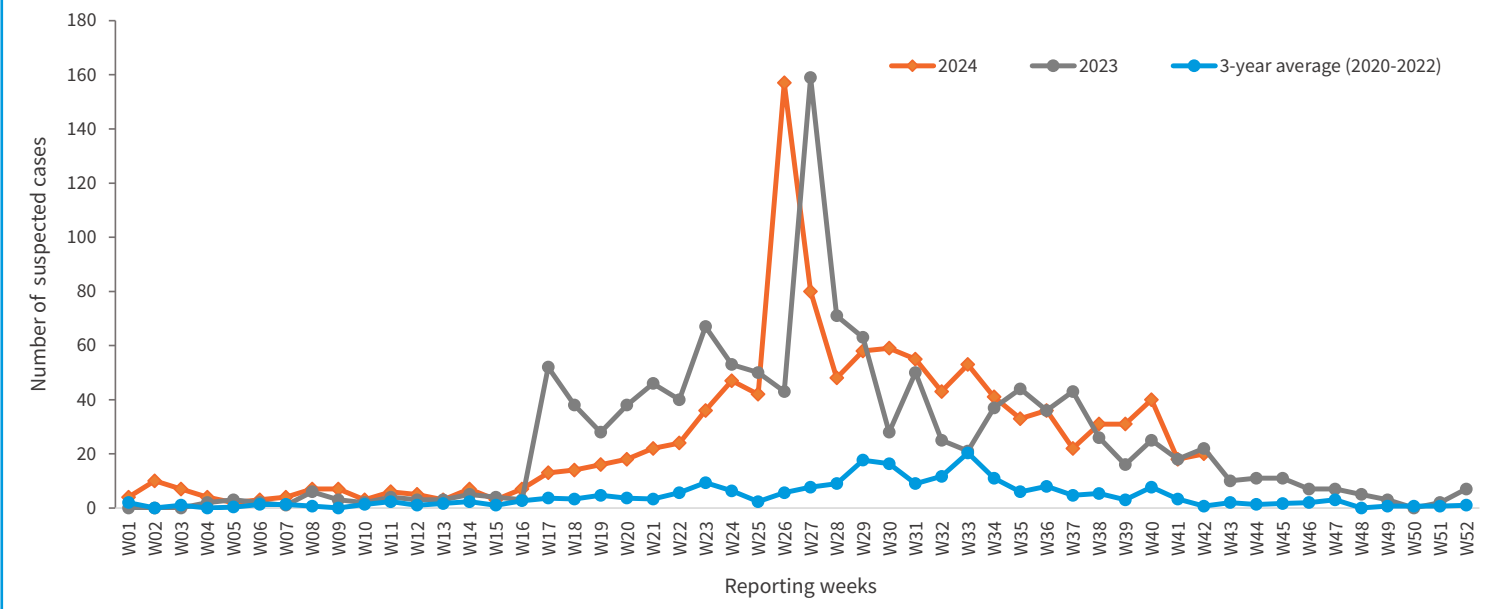
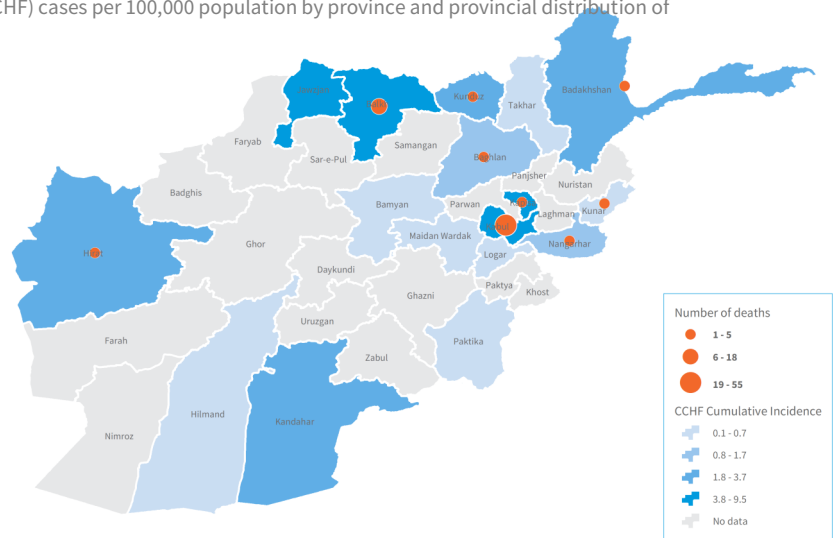




Figure 8. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 01 Jan – 19 Oct 2024

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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 – 19 Oct 2024



Updates on the response to the CCHF outbreak

- On 2 Oct 2024, a team consisting of WHO, NDSR, and JACK team members visited the Shinwar district of Parwan province and provided the needed support as well as investigated and responded to the cluster of confirmed CCHF cases in the province.
- 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-19 Oct 2024)



Total Cases



Total Deaths



Sample tested



Lab confirmed cases



Test positivity rate

Table 4: Summary of the measles outbreak in the last eight weeks in Afghanistan (25 Aug – 19 Oct 2024)

Indicators	W35	W36	W37	W38	W39	W40	W41	W42	Trend line
Suspected cases	1,265	892	860	779	804	820	719	830	
Suspected deaths	6	4	2	2	4	6	4	2	
CFR (%)	0.5	0.4	0.2	0.3	0.5	0.7	0.6	0.2	



- The epidemiological curve of suspected measles cases shows a decreasing 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 42-2024, a total of 830 suspected cases and 2 associated deaths were reported.
- The 2 new deaths were both under five children while one of them was female, reported from Kabul and Kandahar provinces.
- Since the beginning of 2024, a total of 54,088 suspected measles cases and 243 deaths (CFR=0.4%) were reported. Among suspected measles cases, 43,468 (80.4%) were under-five children, and 24,653 (45.6%) were females.
- Since the beginning of 2024, Khost has reported the highest cumulative incidence of suspected measles cases per 10,000 population (70.1), followed by Balkh (32.3), Jawzjan (23.4), and Urozgan (23.1) (Figure 11).

Figure 9. Weekly distribution of suspected measles cases in Afghanistan, 01 Jan to 19 Oct 2024 (N= 54,088)

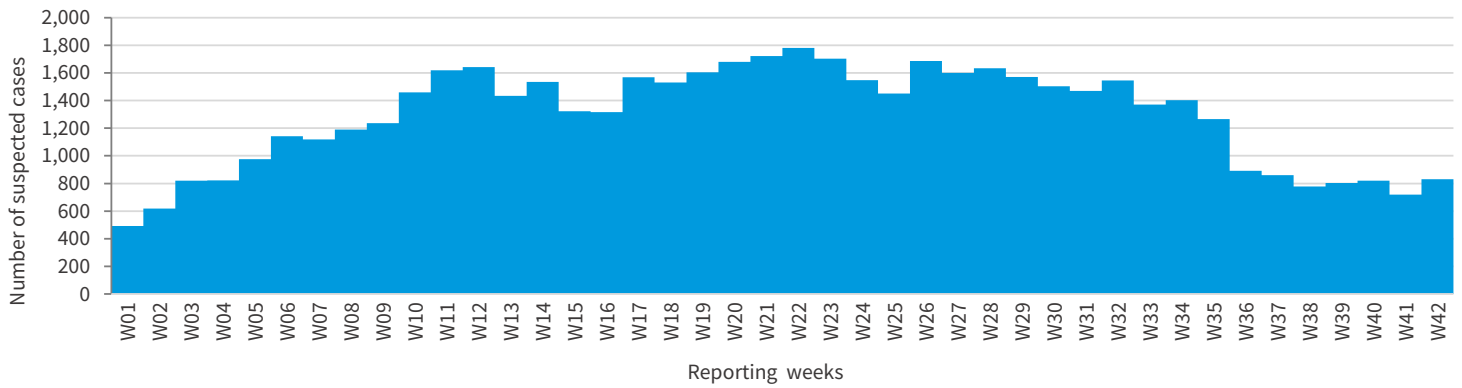


Figure 10. Comparison between the trends of suspected measles cases in 2024 vs 2023 and the 2-year average (2019-2020)

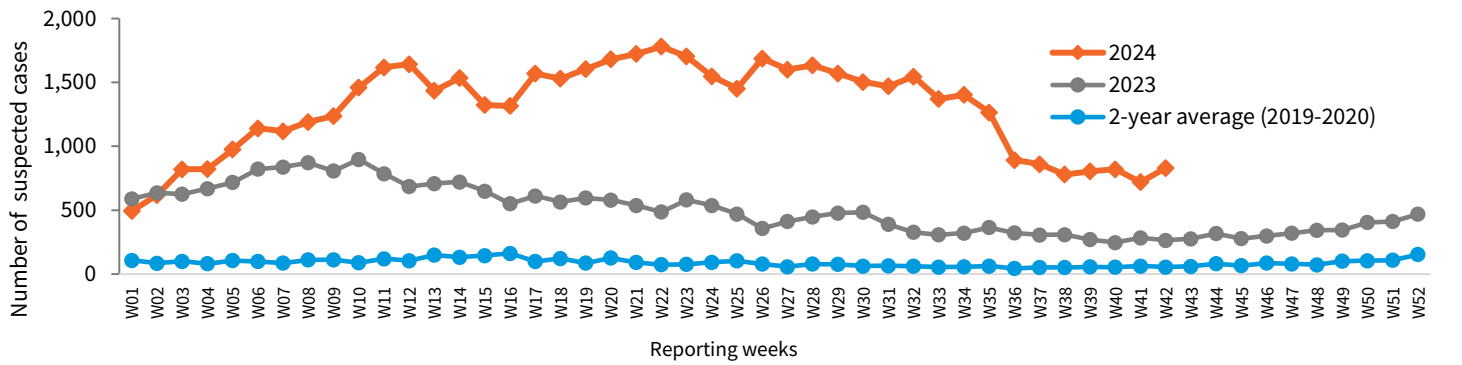
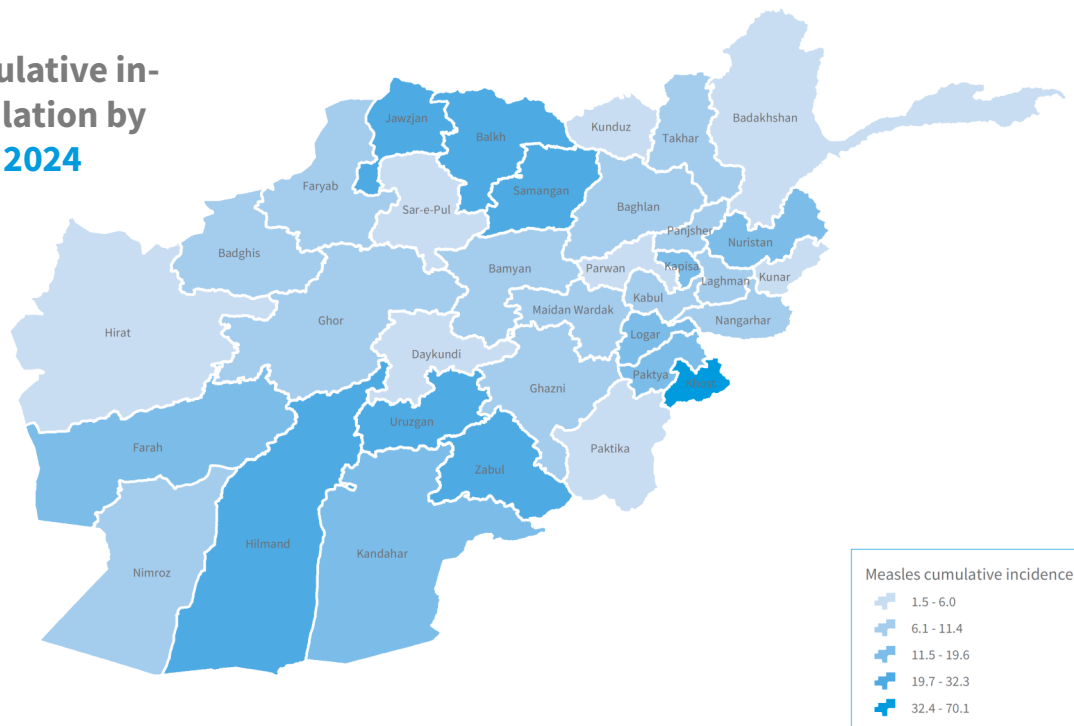


Figure 11. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 Jan-19 Oct 2024

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Suspected measles cumulative incidence per 10,000 population by province 01 Jan–19 Oct 2024

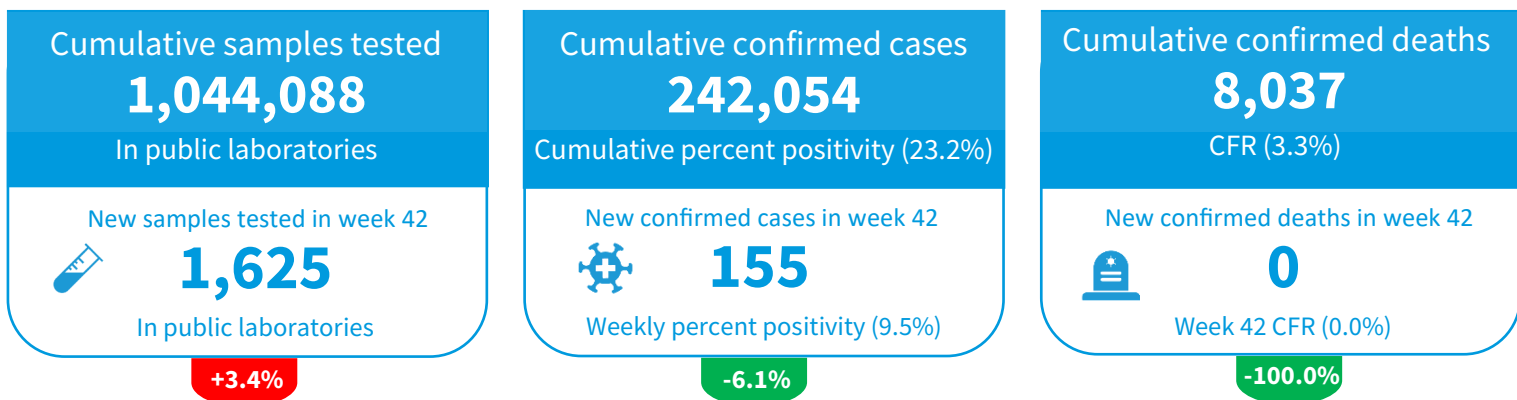


Updates on the preparedness and response to the Measles outbreak

- During week 42 – 2024, 1,328 children aged 9-59 months were vaccinated against measles in 6 provinces (Kabul, Kandahar, Urozgan, Zabul, Nuristan and Paktya) as part of outbreak response immunization activities across the country. This brings the total number of children aged 9-59 months vaccinated against measles to 29,408 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 – 19 Oct 2024)

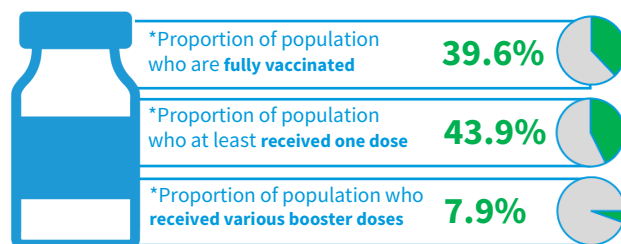


Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights



*Note: During September 2024, around 12,307 doses of various COVID-19 vaccines have been administered which shows a 65.7% decrease compared to August 2024.



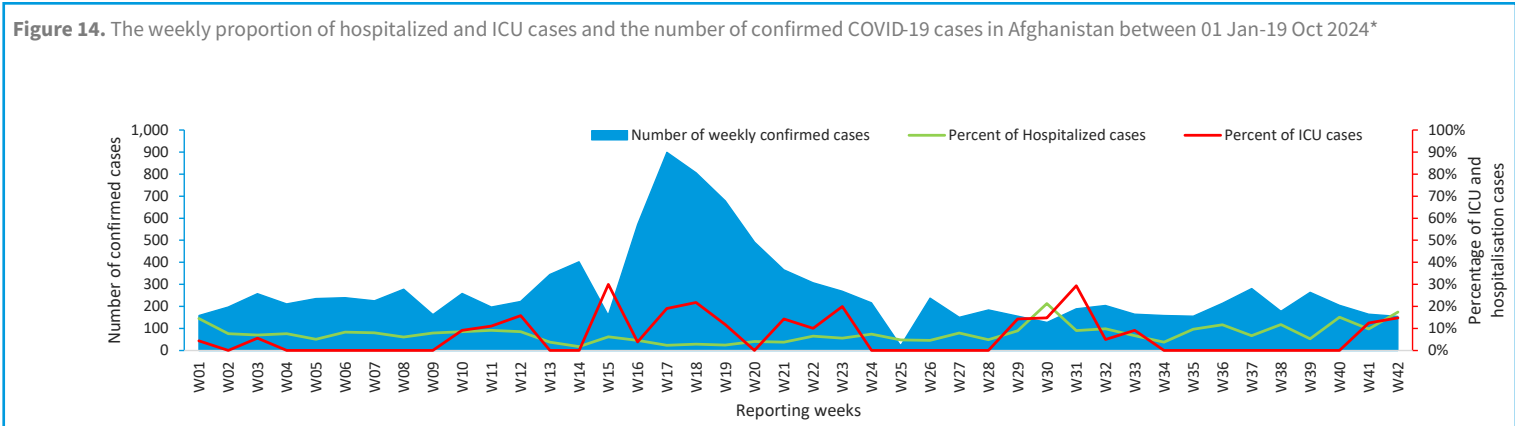
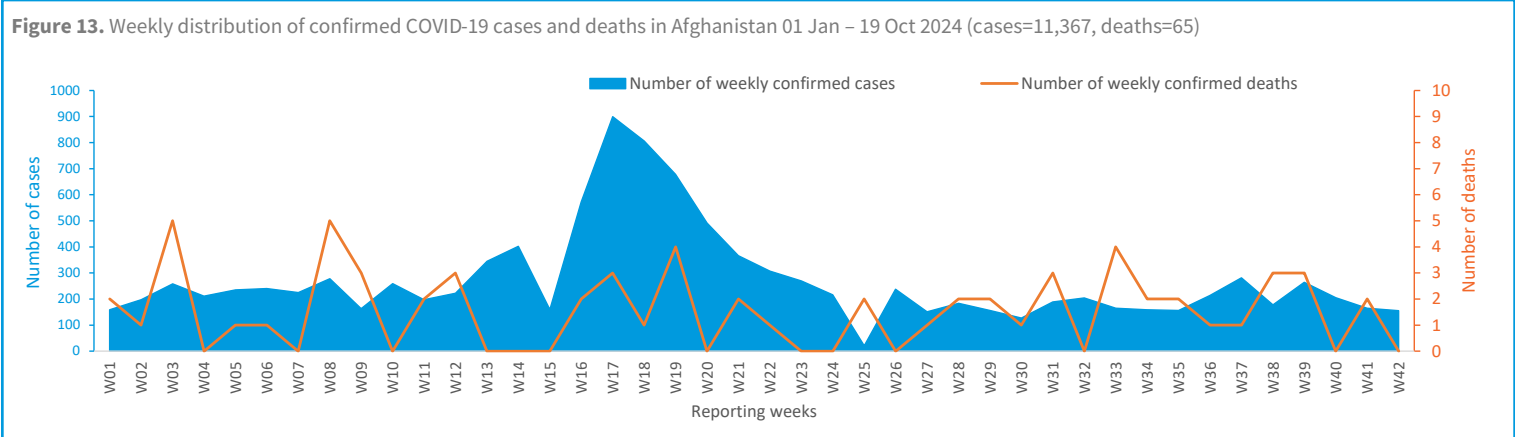
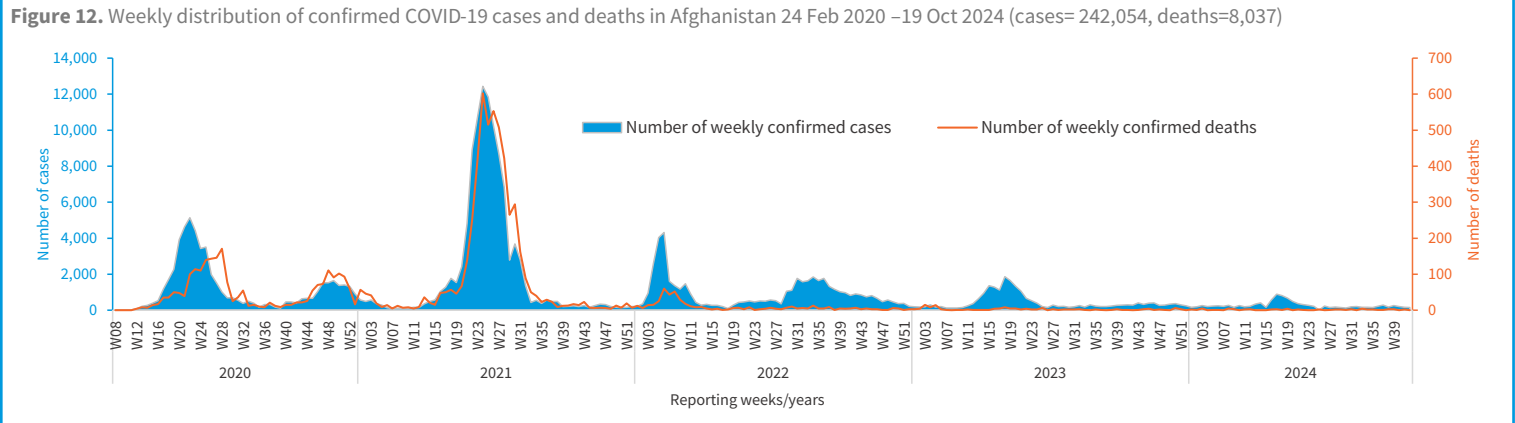
* The denominator is 43,100,596 based on OCHA estimation 2024

Table 5: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (25 Aug – 19 Oct 2024)

Indicators	W35	W36	W37	W38	W39	W40	W41	W42	Trend line
Samples tested (in public Labs)	1,572	1,899	2,546	1,720	1,966	1,856	1,572*	1,625	
Confirmed cases	156	214	281	178	264	205	165*	155	
Percent positivity (%)	9.9	11.3	11.0	10.3	13.4	11.0	10.5	9.5	
Deaths	2	1	1	3	3	0	2	0	
CFR (%)	1.3	0.5	0.4	1.7	1.1	0.0	1.2	0.0	

*A delayed reporting was experienced during week 41 and the number of samples tested and confirmed COVID-19 cases were modified from 1,404 to 1,572 and from 146 to 165, respectively.

- The epidemiological curve of confirmed COVID-19 cases indicates a fluctuation at the lower level in the recent weeks following the peak in the week 17-2024 (Figures 12 & 13).
- During week 42-2024, a total of 1,625 samples were tested in public labs, of which 155 were positive for COVID-19 (positivity rate 9.5%) with no associated deaths. The number of positive cases shows a 6.1% decrease compared to the preceding week (Table 5 and Figure 13).
- Since the beginning of 2024, a total of 11,367 COVID-19 confirmed cases and 65 deaths (CFR=0.6%) have been reported. Out of the total cases, 6,181 (54.4%) were females while females represented 3 quarters of deaths (49 - 75.4%).
- During week 42-2024, among 155 confirmed cases, 27 (17.4%) were hospitalized, while 4 of the 27 hospitalized cases (14.8%) was admitted to ICU (Figure 14).
- Since the beginning of 2024, a total of 98,487 samples of COVID-19 have been tested by public health laboratories across the country, out of which 11,367 were positive (positivity rate 11.5%), while the overall number of COVID-19 samples tested by public health laboratories reached to 1,044,088 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-19 Oct 2024)



69,727

Total confirmed Malaria Cases



3 (0.004)

Total malaria deaths (CFR %)

Table 6: Summary of the confirmed malaria outbreak in the last eight weeks in Afghanistan (25 Aug – 19 Oct 2024)

Indicators	W35	W36	W37	W38	W39	W40	W41	W42	Trend line
Confirmed cases	3,489	3,895	3,922	3,886	3,043	2,553	2,493	2,560	
Confirmed deaths	0	0	0	0	0	0	1	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

- The epi curve of confirmed malaria cases shows a declining trend over the past three weeks, after reaching its peak during week 37-2024. However, 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 15, 16).
- During week 42-2024, 2,560 confirmed cases with no associated death were reported from 32 provinces, which shows a slight increase in the number of cases compared to the previous week.
- Since the beginning of 2024, a total of 69,727 confirmed malaria cases with 3 associated deaths were reported from 32 provinces. Out of the total cases, 14,575 (20.9%) were under-five children, and 32,780 (47.0%) were females.
- The highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (374.4) followed by Kunar (271.0), Laghman (156.1), and Nangarhar (87.0) (Figure 17).

Figure 15. The epidemiological curve of confirmed malaria cases in Afghanistan 01 Jan- 19 Oct 2024 (N=69,727)

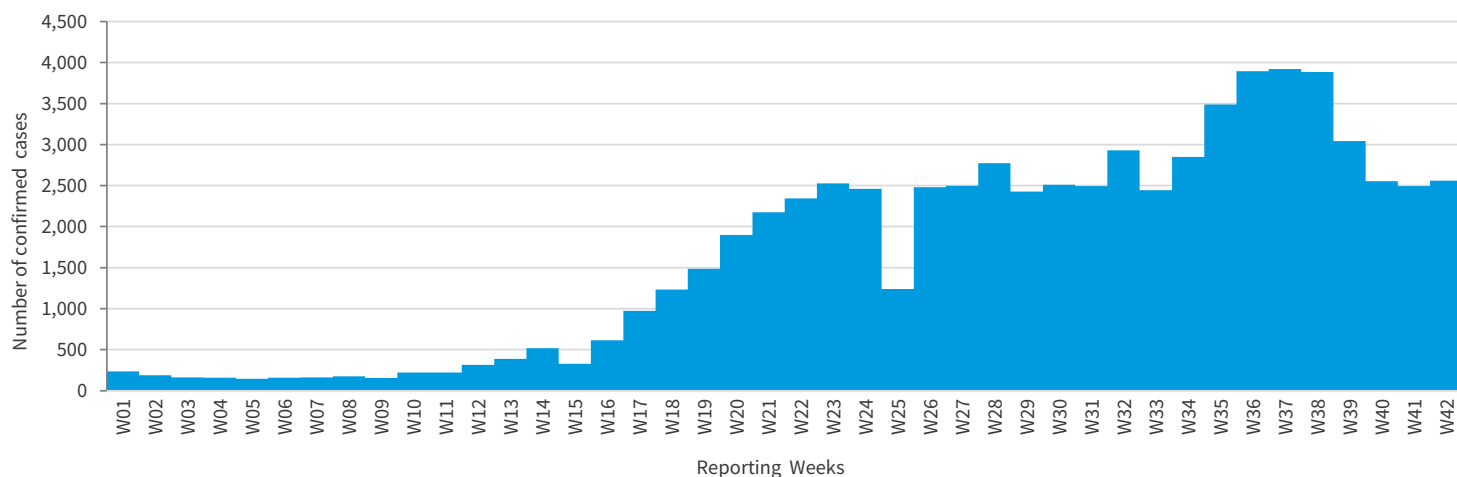


Figure 16. Comparison between the trends of confirmed malaria cases in 2024 vs 2023 and 3-year average (2020-2022)

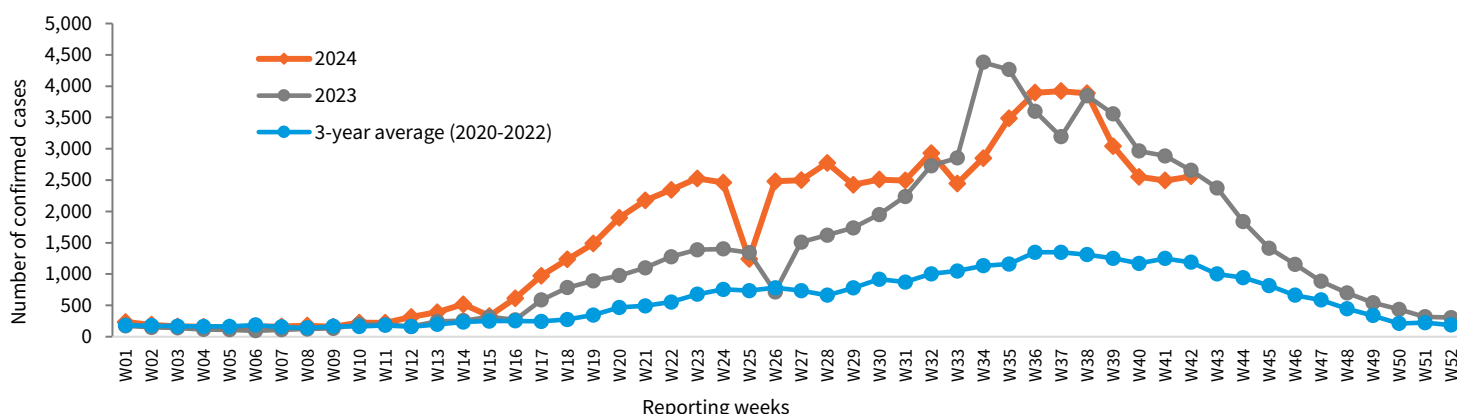
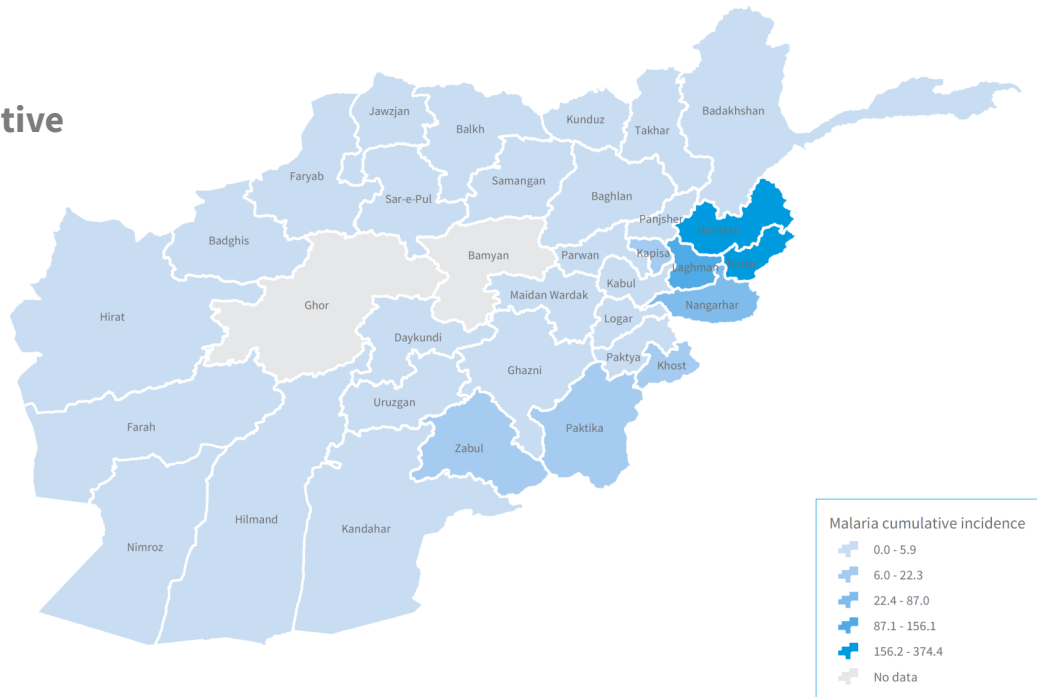




Figure 17. Confirmed malaria cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan – 19 Oct 2024

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Confirmed malaria cumulative Incidence per 10,000 population by province 01 Jan-19 Oct 2024



Note: MOPH is the source of epidemiological data

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

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