



AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #18-2023

No. 18/(30 Apr to 06 May)

Disease Outbreaks	AWD (May 22 - May 23)	ARI (Oct 22 - May 23)	COVID-19 (Feb 20 - May 23)	Pertussis (Jan 22 - May 23)	Measles (Jan 22 - May 23)	Dengue fever (Jun 22 - May 23)
Cumulative Cases (Data from 604 (98.5%) out of 613 surveillance sentinel sites)	290,406	5,880,716	217,580	1,295	89,964	1,516
Death (CFR %)	113 (0.04)	1,851 (0.03)	7,902 (3.63)	15 (1.15)	423 (0.47)	3 (0.19)

New CCHF outbreak (April - May 2023)

- During the last week, 17 new CCHF cases (10 males and 7 females, all were over 5 years of age) were reported Kandahar (7), Helmand (7), Zabul (2) and (1) from Nimroz provinces, and no new CCHF associated deaths were reported.
- No new cases have been detected from the private hospital since 30 April 2023.
- Out of 25 lab samples tested in CPHL, 5 (20%) were tested positive by PCR in central public health laboratory (CPHL).

- Between Jan 2022-May 2023, a total of 466 suspected CCHF cases were reported from 26 provinces, out of which 330 cases (70.8%) were males and all were over five years of age. out of the total reported cases, 120 (25.8%) were lab confirmed using PCR. A total of 23 CCHF associated deaths were also reported from 10 provinces including 9 deaths from 5 North Region provinces, Balkh (4), Samangan (1), Jawzjan (1), Faryab (1) and Takhar (2).

Response to the current CCHF outbreak in Kandahar

The following multidisciplinary outbreak response have been conducted:

- Coordination meetings with MoPH, PPHD and relevant stakeholders at national and subnational levels were conducted.
- An epidemiological investigation team has been assigned to visit the outbreak affected area in Kandahar Province. The team comprised of an epidemiologist from the WHO, focal point for MoPH surveillance department, and IPC consultant.
- WHO has supplied 1 PCR (96 tests) and 1 ELISA kit (96 tests) for CCHF diagnosis to Kandahar Regional Reference Laboratory (RRL).

- In South Region, case management training workshop was held and included 69 health care workers (12 MD and 57 nurses) who were trained on CCHF case management.
- During last week 40 box of ribavirin (84 capsule 200mg/ box) and 440 ceftriaxone vials 250 mg/vial were supplied to Kandahar sub-office to support the case management response.
- Technical support was provided to laboratory staff on CCHF sample processing.
- SOP on laboratory procedures for sample collection and type of test to be performed was shared with staff at Kandahar RRL.

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Geographical Distribution of Crimean-Congo Hemorrhagic Fever (CCHF) cases by Province As of 06 May 2023

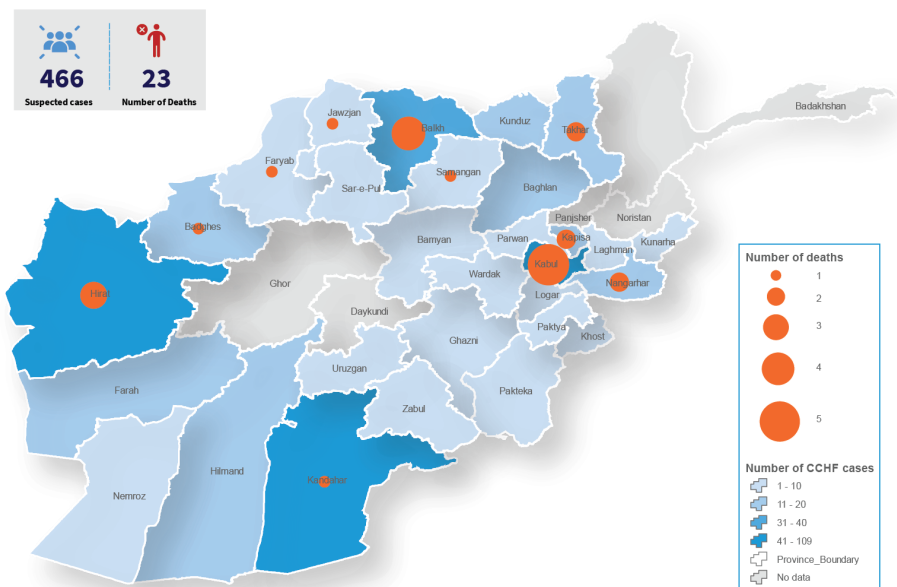


Figure 1. Geographical Distribution of Crimean-Congo Hemorrhagic Fever (CCHF) cases by Province, Jan 2022 - May 2023

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May 2022 to 06 May 2023)

Table 1: summary of the AWD with Dehydration outbreak in the last eight weeks (12 Mar – 06 May 2023)

Indicators	W11	W12	W13	W14	W15	W16	W17	W18	Epi-curve
Suspected cases	2,486	2,942	2,954	3,639	3,314	2,335	3,267	3,882	
% Change cases	32.4	18.3	0.4	23.2	-8.9	-29.5	39.9	18.8	
Suspected deaths	0	0	2	3	5	3	3	2	
CFR (%)	0.00	0.00	0.07	0.08	0.15	0.13	0.09	0.05	

- The number of AWD with dehydration cases continues to show increase, the epi curve shows upward trend since week 10-2023 which could be linked with the start of the new season (Figure 2).
- During week 18-2023, a total of 3,882 new AWD cases with dehydration and 2 new deaths were reported which represents 18.8% increase in the number of cases compared to the previous week.
- The new suspected deaths were (1 male and 1 female) from Kabul and Kandahar provinces.
- Out of 290,406 cases, 161,158 (55.5%) were children be-

low 5 years and 145,021 (49.9%) were females.

- During last week, 3 new districts have reported AWD outbreak, this brings the total number of districts reporting AWD outbreak to 181.
- A total of 3,606 RDT tests were conducted among AWD with dehydration cases.
- The first case of AWD with dehydration was reported on 04 May 2022 from Kandahar city of Kandahar province and now is reported from 181 districts in all 34 provinces (Figure 3).

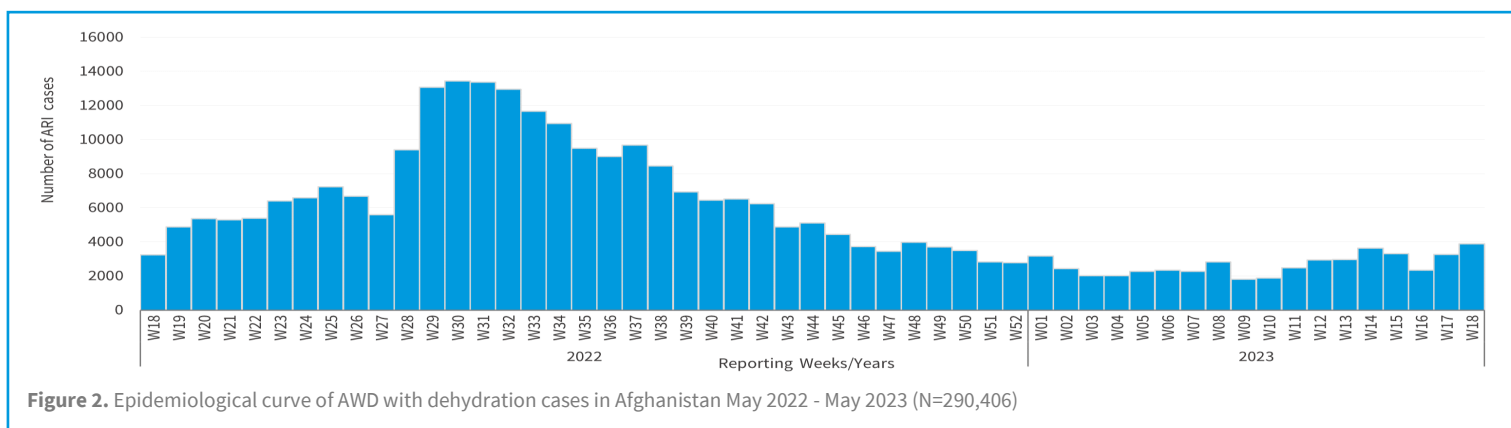


Figure 2. Epidemiological curve of AWD with dehydration cases in Afghanistan May 2022 - May 2023 (N=290,406)

AFGHANISTAN AWD with dehydration attack rate per 1,000 population by province As of 06 May 2023

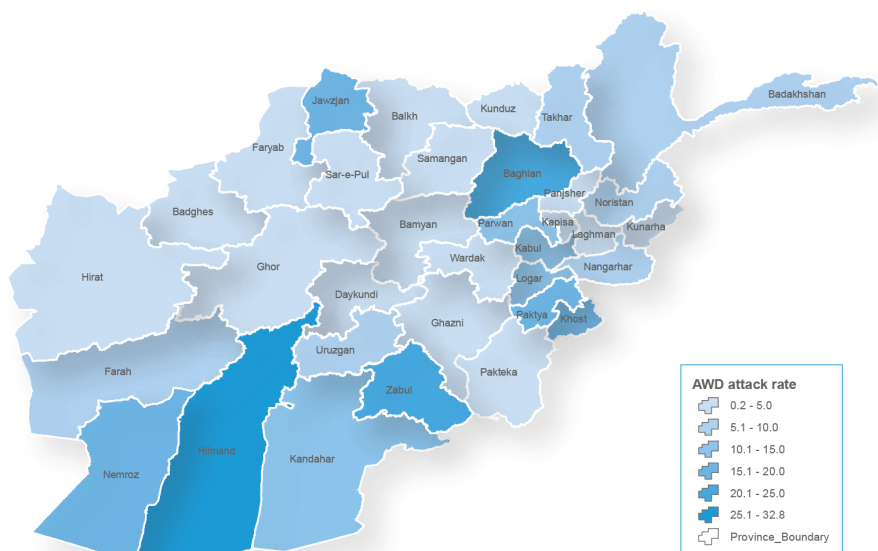


Figure 3. AWD with dehydration attack rate per 1,000 population by province in Afghanistan, May 2022 - May 2023



Preparedness and response to the AWD

Leadership and Coordination

- Regular biweekly AWD task force meetings are conducted among the partners to prepare for the next season of AWD outbreak response.
- Emergency and Preparedness Response Committees (EPR) are active at the provincial level.

Surveillance

- Surveillance support teams (SSTs) are actively participating in outbreak investigation and response activities in 34 provinces.
- Totally, 1,018 medical officers and community health supervisors (CHSs) have been trained on procedures of community event-based surveillance (EBS) in 6 provinces (Kabul, Badakhshan, Bamyan, Herat, Kandahar, and Nangarhar).
- Supervisory visits have been conducted in different provinces to strengthen early detection and timely response to AWD outbreaks.

Case Management

- Since the beginning of 2023, a total of 292 health care workers (HCWs) have been trained on AWD case management.

Laboratory and Supplies

As part of the preparedness plan for 2023 season:

- A total of 3,750 Cary Blairs and 325 kits of RDTs were prepositioned at 34 provinces for supporting specimen collection and confirmation of AWD cases with dehydration.
- Forty laboratory technologists, from regional reference labs (RRLs) (5), provincial PCR labs (28), infectious diseases hospital (IDH) (2), Afghan Japan Hospital Lab (1), and the central public health laboratory (CPHL) (4), were trained on sample collection, transportation, and impact of sample quality on lab results.

WASH and RCCE

From 16 Apr-30 Apr 2023, the following activities were carried out as WASH response:

- More than 18,000 Hygiene Kits were distributed to 107,783 individuals in 7 provinces (Baghlan, Balkh, Kabul, Kunduz, Logar, Maidan Wardak and Takhar).
- Hygiene promotion sessions were provided to around 112,933 people in 7 provinces (Baghlan, Balkh, Kabul, Kunar, Kunduz, Maidan Wardak and Takhar)
- Clean water was provided to around 29,000 people by chlorination of the 473 wells in 3 provinces (Kabul, Kunar and Maidan -Wardak).
- Safe drinking water was provided to around 3,684 individuals in 4 provinces (Kabul, Kapisa, Logar and Maidan Wardak) by rehabilitation of the water supply systems.
- Sanitation and hygiene facilities have been provided to more than 1,600 individuals by emergency latrines installation and rehabilitations in 2 outbreak affected provinces (Kapisa and Maidan Wardak).

Acute Respiratory Infection (ARI) (01 Oct 2022 to 06 May 2023)

5.8M
Total Cases

1,851
Total Deaths

1,441
Influenza
samples tested

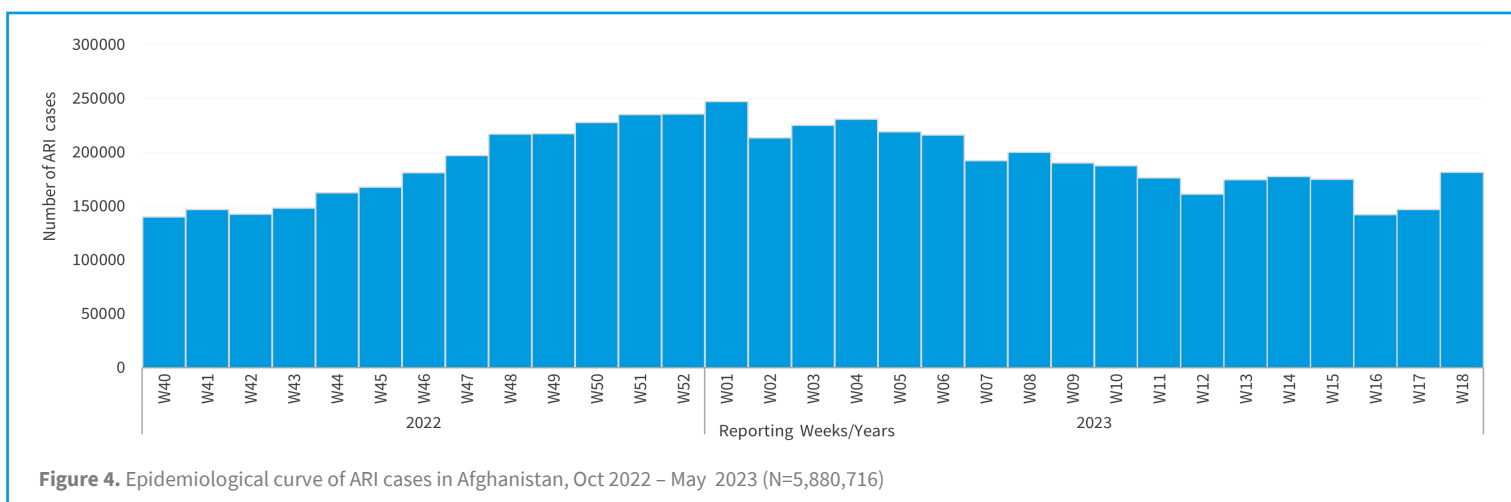
195
Influenza
lab confirmed cases

13.5%
Influenza test
positivity ratio

Table 2: summary of the acute respiratory infection outbreak in the last eight weeks (12 Mar – 06 May 2023)

Indicators	W11	W12	W13	W14	W15	W16	W17	W18	Epi-curve
Suspected cases	176,562	161,213	174,873	177,785	142,150	142,150	146,984	181,585	
% Change cases	-5.9	-8.7	8.5	1.7	-20.0	0.0	3.4	23.5	
Suspected deaths	48	78	49	43	49	33	58	50	
CFR (%)	0.03	0.05	0.03	0.02	0.03	0.02	0.04	0.03	

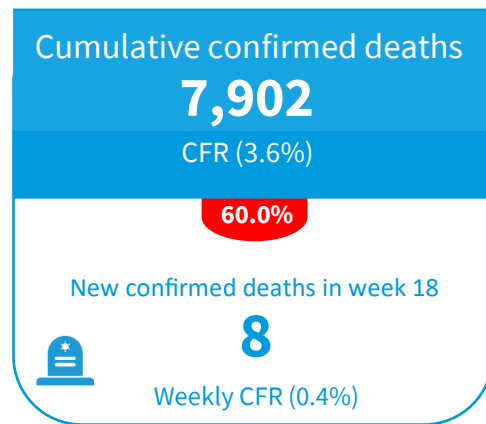
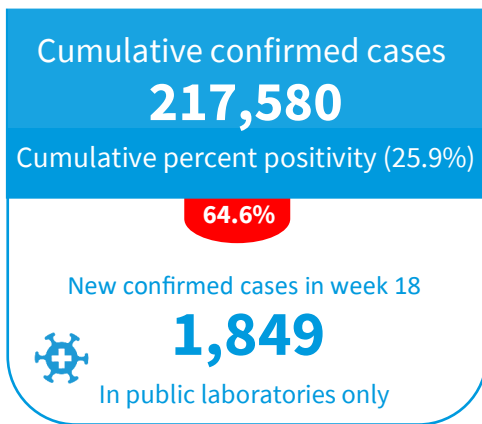
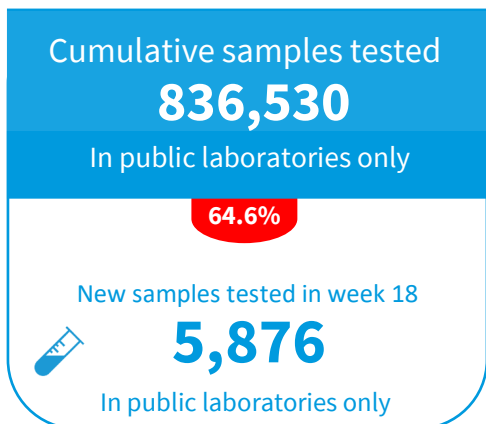
- The number of ARI cases shows a noticeable increase after consistent decrease since week 4-2023. This increase should be monitored closely to confirm the trend (Figure 4).
- During week 18-2023, a total of 181,585 new ARI cases and 50 new deaths were reported which indicates a 23.5% increase in the number of cases and 13.8% decrease in the number of in comparison with week 17.
- Since Oct 2022, out of the total 5,880,716 ARI cases, representing 17.9% of the total population of Afghanistan, 2,660,329 (45.2%) were children below 5 years of age and 3,059,991 (52.0%) were females.



Response to Acute Respiratory Infection outbreak

- During the last week, 51 HCWs, 25 medical officers and 26 nurses were trained on ARI case management in Balkh, Jawzjan, Samangan and Sare-pul provinces; this brings the total number of ARI trained HCWs to 895 in 16 provinces.
- Since the beginning of the outbreak, a total of 512 ARI case management kits and 960 packs of essential antibiotics were distributed in the 13 highly affected provinces.
- During the last week, a total of 43 samples were collected and shipped to CPHL/NIC for testing.

COVID-19 (24 Feb 2020 – 06 May 2023)



Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights



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

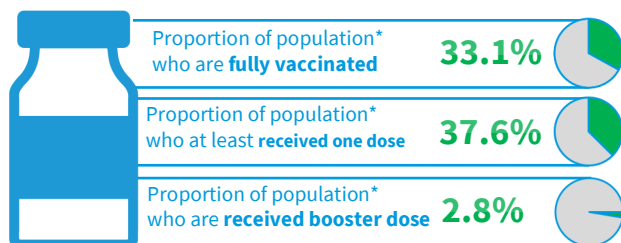
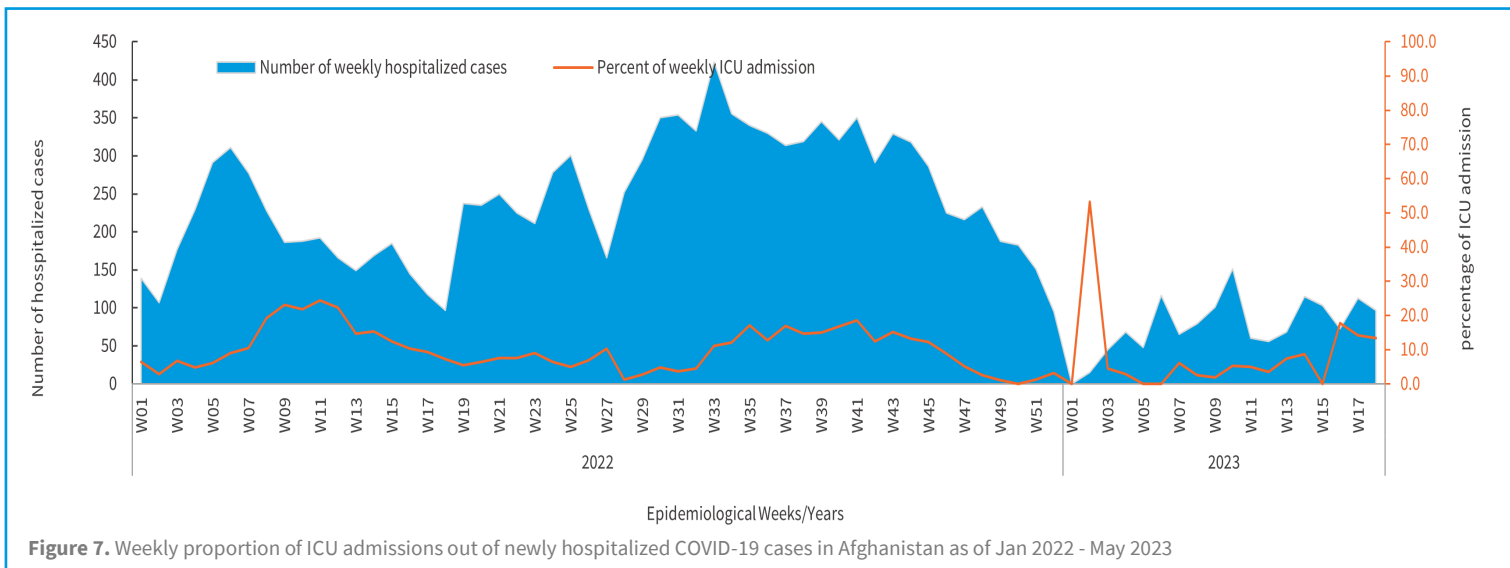
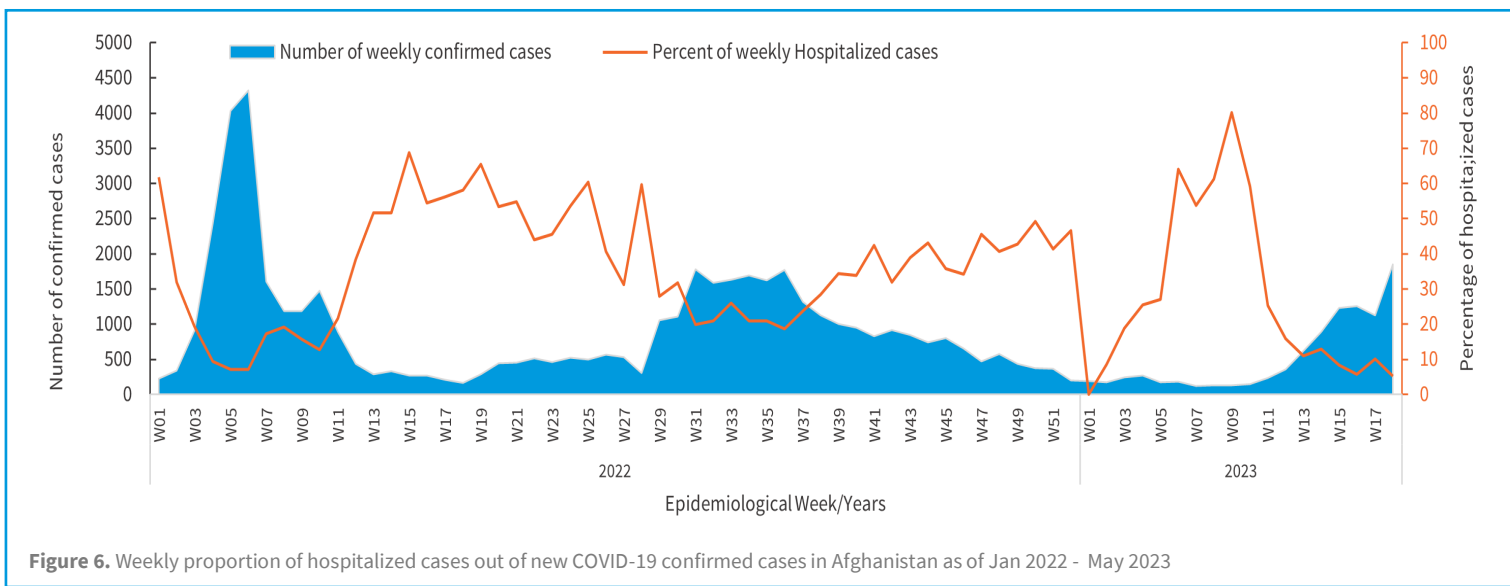
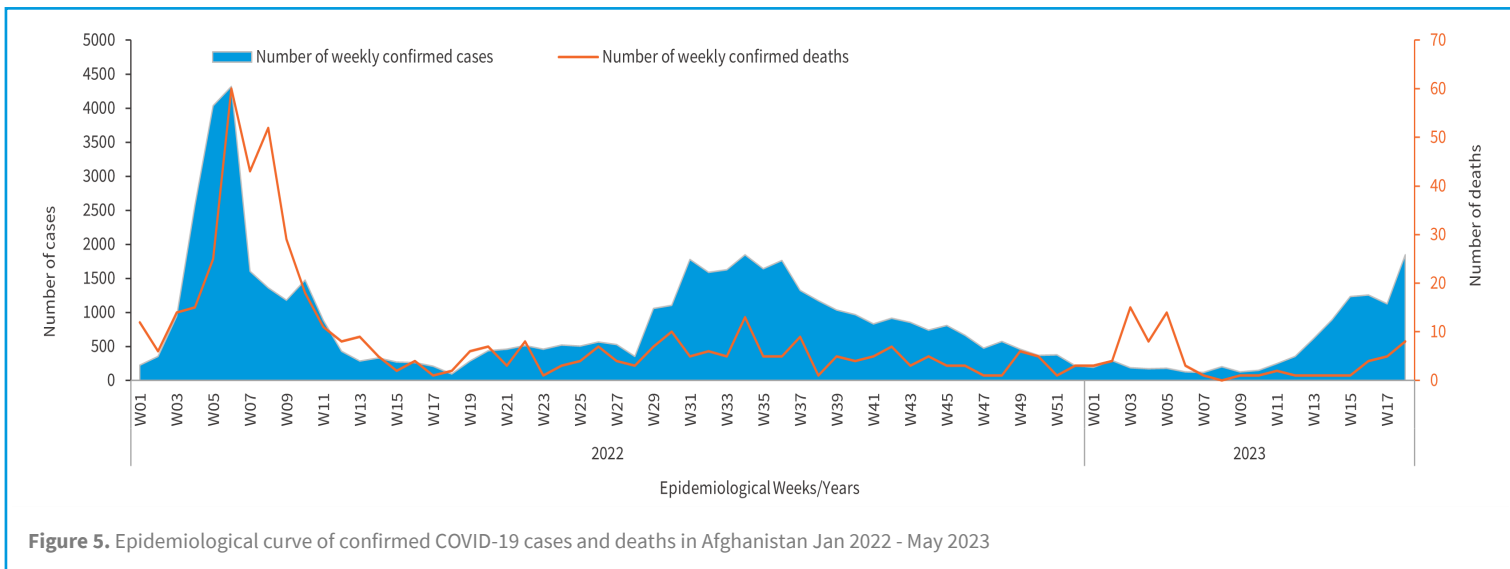


Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (12 Mar - 06 May 2023)

Indicators	W11	W12	W13	W14	W15	W16	W17	W18	Epi-curve
Samples tested (in public Labs)	4,050	2,288	3,435	4,163	4,730	4,001	3,569	5,876	
Confirmed cases	245	353	616	891	1233	1253	1123	1849	
% Change cases	65.5	44.1	74.5	44.6	38.4	1.6	-10.4	64.6	
Percent positivity (%)	6.0	15.4	17.9	21.4	26.1	31.3	31.5	31.5	
Deaths	2	1	1	1	1	4	5	8	
CFR (%)	0.8	0.3	0.2	0.1	0.1	0.3	0.4	0.4	

- The number of confirmed COVID-19 cases is increasing, the epi curve in figure 5 shows increasing trend since week 10-2023.
- Since the beginning of the pandemic in Feb 2020, a total of 836,530 samples have been tested for COVID-19 through public laboratories.
- In week 18-2023, 5,876 samples were tested in public labs, of which 1,849 samples were positive for COVID-19 (test positivity of 31.5%) and 8 new deaths were reported. This represents 64.6% increase in the number of confirmed cases, compared to the previous week.







Suspected Pertussis Outbreaks (Jan 2022 – May 2023)


1,295
Total Cases


15
Total Deaths

Table 4: summary of the suspected pertussis outbreak in the last eight weeks (12 Mar – 06 May 2023)

Indicators	W11	W12	W13	W14	W15	W16	W17	W18	Epi-curve
Suspected cases	10	12	26	13	35	17	34	33	
% Change cases	66.7	20.0	116.7	-50.0	169.2	-51.4	100.0	-2.9	
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 number of pertussis cases started to increase since week 13-2023, and the epi curve shows stabilization in the number of cases during the last two weeks (Figure 9).
- During week 18-2023, a total of 33 new suspected pertussis cases were reported from 4 provinces, Khost (21), Ghazni (5), Zabul (5) and Kapisa (2); this brings the total number of suspected cases to 1,295 from 20 provinces.
- Out of the total 1,295 cases, 928 (71.7%) were children below 5 years and 614 (47.4%) were females.

AFGHANISTAN Geographical Distribution of Suspected Pertussis Cases by Province As of 06 May 2023

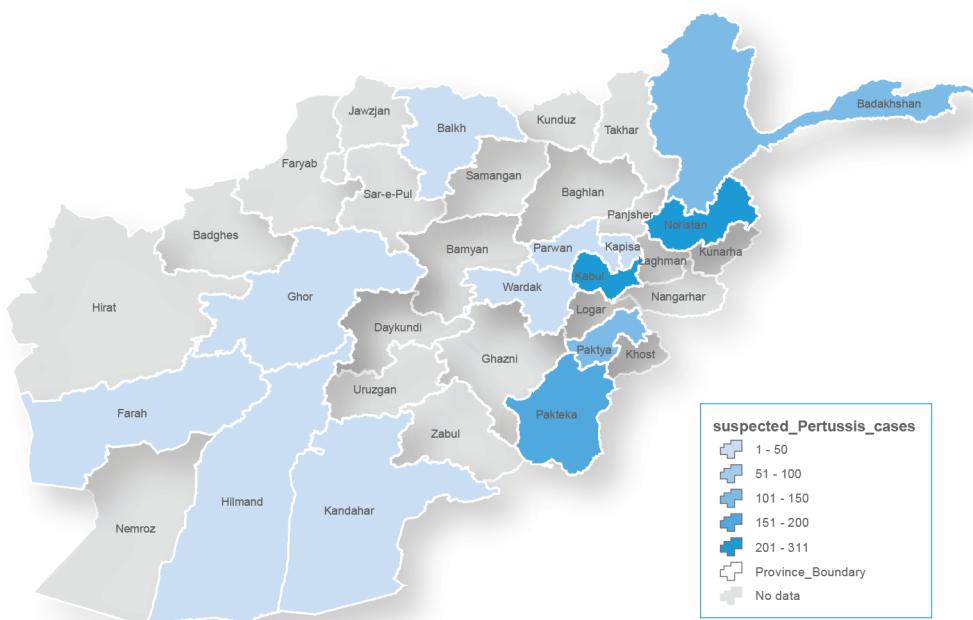


Figure 8. Geographical distribution of suspected pertussis cases in Afghanistan Jan 2022 - May 2023 (N=1,295)

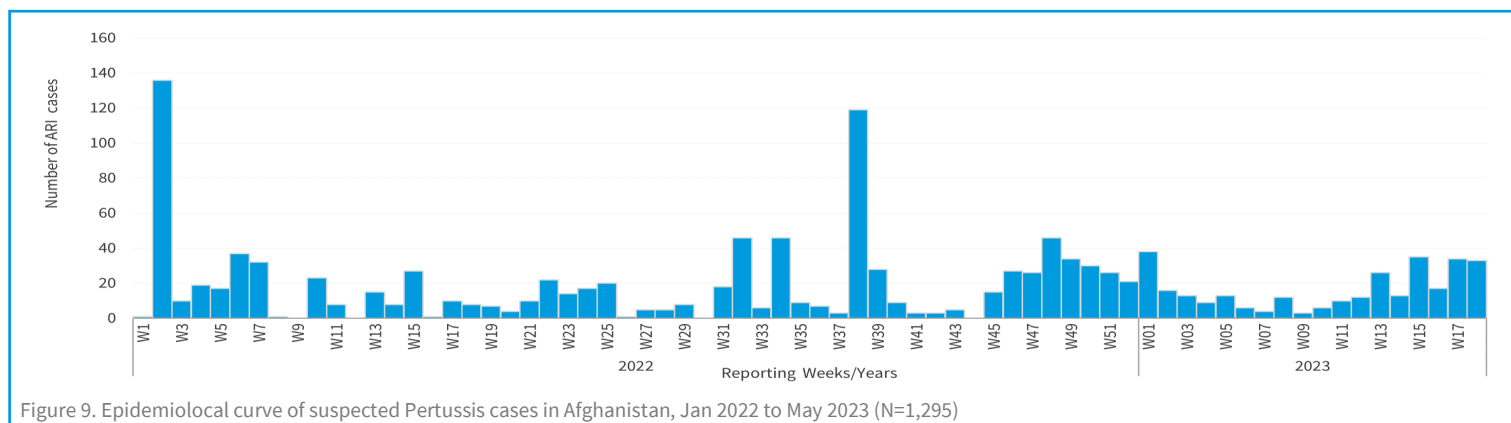


Figure 9. Epidemiological curve of suspected Pertussis cases in Afghanistan, Jan 2022 to May 2023 (N=1,295)

Measles Outbreak (01 Jan 2022 to 06 May 2023)

89,964
Total Cases

423
Total Deaths

12,231
Sample tested

7,070
Lab confirmed cases

57.8%
Test positivity ratio

Table 5: summary of the suspected measles outbreak in the last eight weeks (12 Mar – 06 May 2023)

Indicators	W11	W12	W13	W14	W15	W16	W17	W18	Epi-curve
Suspected cases	786	685	709	721	649	550	611	564	
% Change cases	-12.4	-12.8	3.5	1.7	-10.0	-15.3	11.1	-7.7	
Suspected deaths	5	1	2	3	0	1	0	1	
CFR (%)	0.6	0.1	0.3	0.4	0.0	0.2	0.0	0.2	

- The number of measles cases are decreasing, the epi curve shows a gradual reduction in the number of suspected measles cases since week 11-2023 (Figure 11).
- During epidemiological week 18-2023, a total of 564 suspected cases and 1 new death were reported which indicates 7.7% decrease in the number of cases, compared to the last week.
- Out of the total 89,964 cases, 68,882 (76.6%) were children under 5 years of age and 43,650 (48.5%) were females.

AFGHANISTAN Suspected measles attack per 1,000 population of by province As of 06 May 2023

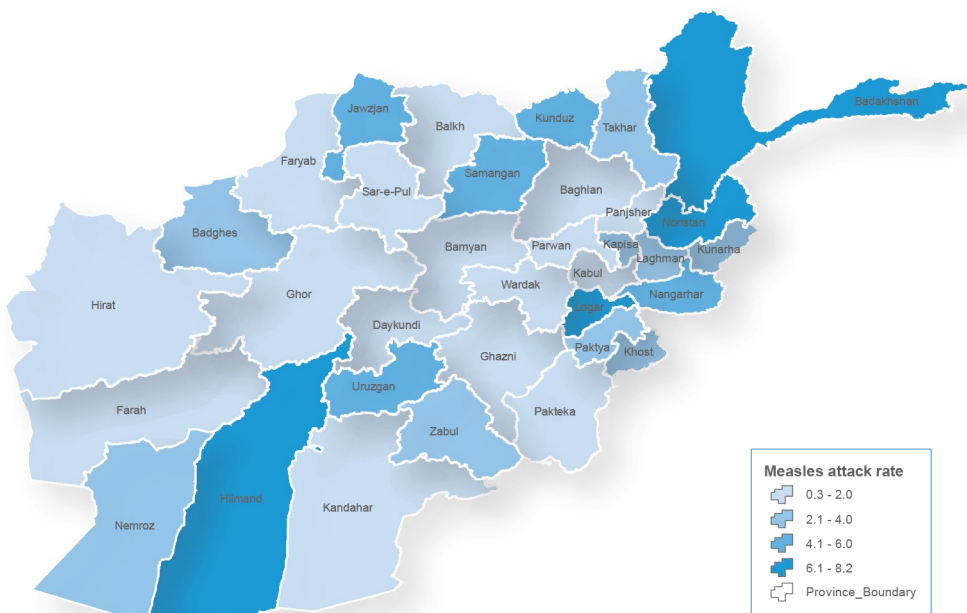


Figure 10. Suspected measles attack rate per 1,000 population of by province in Afghanistan Jan 2022 - Apr 2023 (N=89,964)

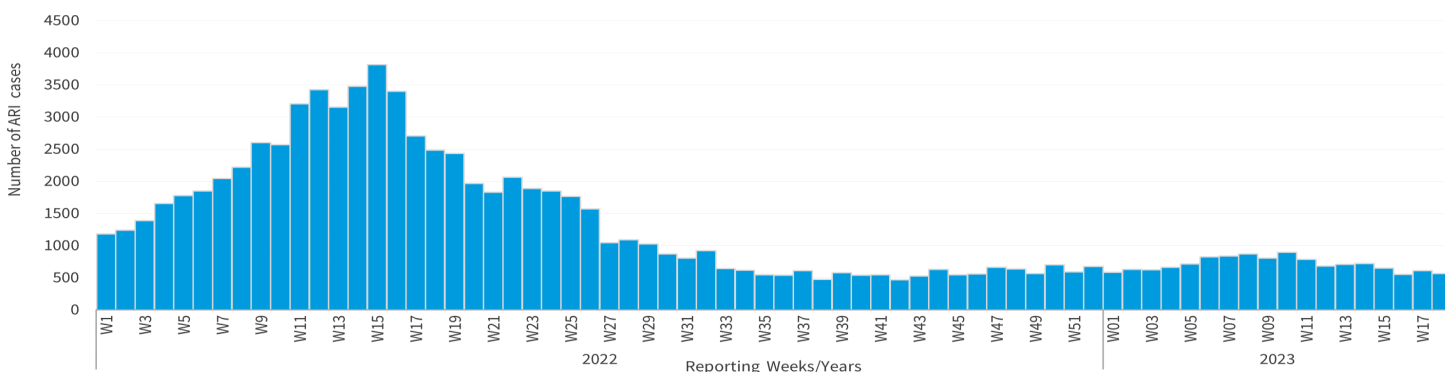
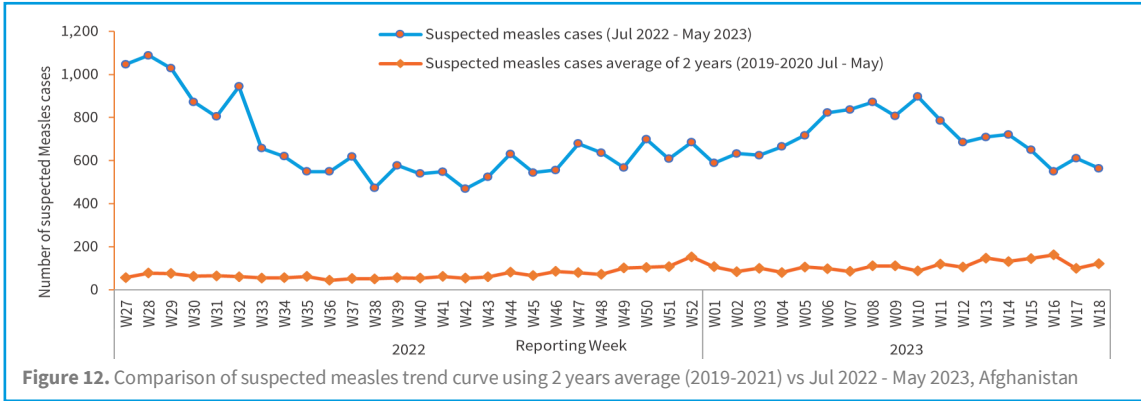


Figure 11. Epidemiological curve of suspected measles cases in Afghanistan, Jan 2022 to Apr 2023 (N=89,964)



The weekly number of suspected measles cases indicates an increase since week 1-2023, followed by a decline observed since week 11, compared to the average of last 2 years.

Response to Measles outbreak

- Since January 2023, a total of 6,856 children aged 9-59 months have been vaccinated for measles as response to outbreak by the implementing partners (NGOs) in different province.
- The national measles immunization campaign was conducted during November – December 2022; immunizing 5.3 million children aged 9-59 months in 329 planned districts of 34 provinces across the country (almost 99% admin coverage).
- Since December 2021, around 11 million children (aged between 6 months to 14 years) have been vaccinated through 5 different measles outbreak response and national immunization campaigns in 34 provinces.
- A total of 593 measles case management kits have been supplied to 28 provinces in 7 regions across the country to support case management.

Dengue Fever Outbreak (01 Jun 2022 to 06 May 2023)

1,516*
Total Cases

3
Total Deaths

474
Sample tested

383
Lab confirmed cases

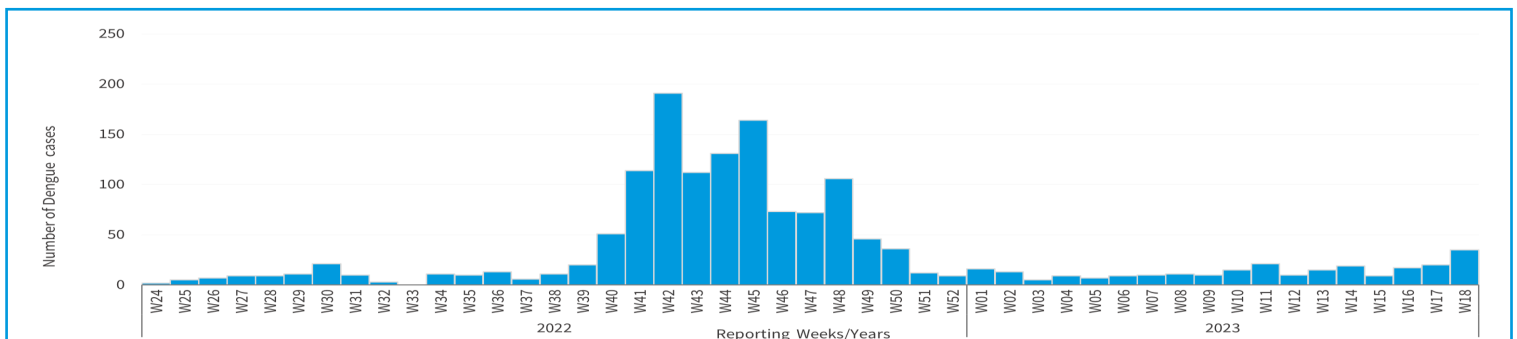
80.8%
Test positivity ratio

*Note: Delayed data entry occurred between week 1-17-2023, and resulted changes in the cumulative figures.

Table 6: summary of the Dengue fever outbreak in the last eight weeks (12 Mar – 06 May 2023)

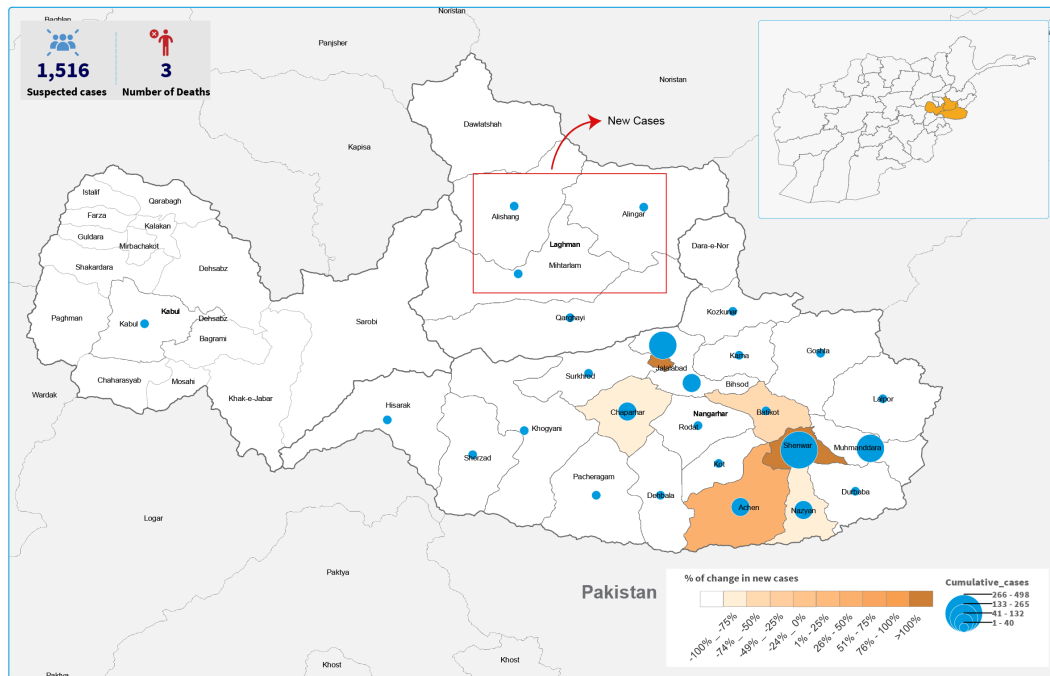
Indicators	W11	W12	W13	W14	W15	W16	W17	W18	Epi-curve
Suspected cases	21	10	15	19	9	17	20	35	
% Change cases	40.0	-52.4	50.0	26.7	-52.6	88.9	17.6	75.0	
Deaths	0	0	0	1	0	0	0	0	
CFR (%)	0.0	0.0	0.0	5.3	0.0	0.0	0.0	0.0	

- The number of suspected dengue cases are increasing, the epi curve shows a gradual increase during the last 3 weeks, the situation needs to be closely monitored given the start of the season for vector breeding in Nangarhar province (Figure 13).
- A total of 35 suspected dengue fever cases with no new deaths have been reported during week 18-2023, all cases were reported from Nangarhar and Laghman province, which brings the total number of cases and deaths to 1,516 and 3 deaths respectively.
- Out of 1,516 reported cases, 429 (28.3%) were females and 1,495 (98.6%) were over 5 years of age.





Geographical distribution of suspected dengue fever cases in Afghanistan and weekly percent of changes (between weeks 17 and 18, 2023)



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 May 2023.

Figure 14. Hotspot areas of dengue fever cases and percent change of new cases in Afghanistan, Jun 2022 - May 2023

Response to the dengue fever outbreak

- Since the beginning of April 2023, 200 health care workers (HCWs) were trained on dengue case management in Nangarhar province.
- Since July 2022 a total of 9 PCR kits (sufficient for testing 720 samples) have been delivered to the Nangarhar regional reference lab (RRL) and 4 dengue ELISA kits (sufficient for testing 320 samples) to central public health laboratory (CPHL), infectious disease hospital (IDH) and Nangarhar regional reference lab (RRL) to support the confirmation of diagnosis among suspected dengue cases.
- Overall, 1,000 Kgs of larvicides have been released and distributed to Nangarhar sub-office to support dengue fever vector control activities.
- Surveillance support and entomology teams in addition to surveillance activities (case detection, reporting and sample collection) monitor the outbreak situation.
- Health education sessions were conducted in two villages of hotspot areas (Jalalabad city and Shinwar district) for increasing public awareness regarding source reduction activities as well as how to protect themselves from being infected.

Note: MOPH is the source of epidemiological data

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