

AFGHANISTAN INFECTIOUS DISEASE OUTBREAKS SITUATION REPORT | Epidemiological week #23



Disease Outbreaks	Measles (Jan-Jun 2022)	AWD (Sep 2021-Jun 2022)	Pertussis (Jan-Jun 2022)	CCHF (Jan-Jun 2022)	Monkeypox (Jun 2022)
Cumulative No. of Cases *Sentinel sites data	54,386	6,229	62	78	0
No. of deaths "CFR (%)" 321 (0.60)	8 (0.13)	5 (8.0)	8 (10.2)	0 (0.0)

Measles outbreak (01 Jan to 11 Jun 2022)



6,294 Samples tested

2,734
Lab confirmed cases



Table 1 summary of the measles outbreak in the last eight weeks (13 Mar – 11 Jun 2022)									
Indicators	W-16	W-17	W-18	W-19	W-20	W-21	W-22	W-23	Epi-curve
Suspected cases	3398	2706	2483	2432	1968	1833	2065	1888	
Deaths	23	8	10	8	5	8	7	5	
CFR (%)	0.68	0.30	0.40	0.33	0.25	0.44	0.34	0.26	

- During epidemiological week 23-2022, a total of 1,888 new cases and 5 new deaths were reported (8.6 % and 28.6% decrease in the number of cases and deaths, respectively as compared to the previous week). The trend was increasing until week 15 (2022), however, started to decrease between weeks 15 and 20 and then shows stabilization during the last 3 weeks. (Figure 5).
- During the last week, the number of suspected measles cases have increased by 6.9% in East and 8.2% in North Regions (Table 2).
- The measles outbreak affected the entire country, however, the most affected provinces are Badakhshan (11.6%); Kunduz (10.0%); Nangarhar (9.4%); Kabul (8.5%); Helmand (6.8%); and Takhar (6.3%).
- Out of the total 6,294 samples tested for measles, 2,734 were laboratory confirmed from January-June 2022.
- During the last week, one new district reported suspected

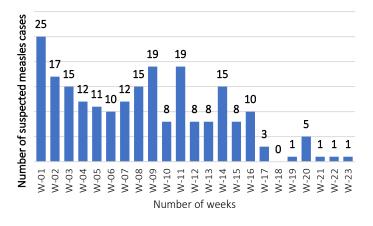


Figure 1. New districts reporting suspected measles cases on weekly bases in Afghanistan January - June 2022 (N=224)

Table 2 num	ber of	suspe	cted 1	neasle	es case	es per	regior	in th	e last 8 weeks 2022
Regions	W-16	W-17	W-18	W-19	W-20	W-21	W-22	W-23	Epi-curve
North East	1307	899	735	627	350	303	502	467	
South	347	271	217	253	237	213	226	182	1
Central East	542	277	305	370	388	350	423	326	
East	392	386	437	462	486	351	364	389	
North	230	304	186	203	179	168	158	171	
West	314	387	399	329	145	239	211	177	
South East	178	114	104	80	116	119	110	112	
Central West	88	68	100	108	67	90	71	64	

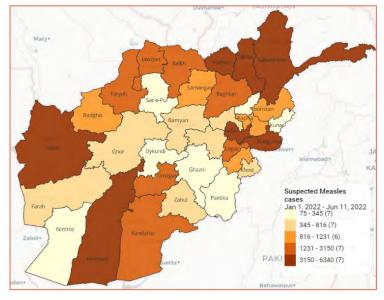


Figure 2. Geographical distribution of suspected measles cases in Afghanistan January - June 2022 (N=54,386)

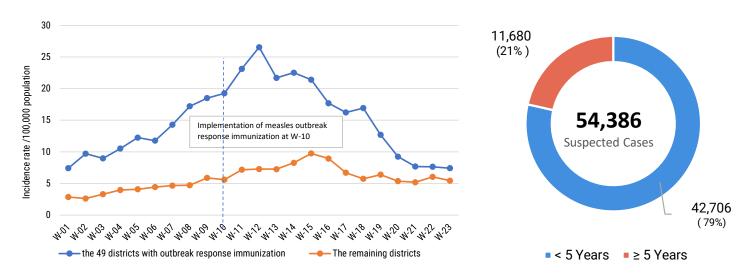


Figure 3.Weekly incidence rate/100,000 population of suspected measles cases in 49 districts where measles campaign was conducted and the remaining districts in Afghanistan, Jan - Jun 2022

Figure 4. Distribution of suspected measles cases by age groups in Afghanistan, Jan - Jun 2022



Figure 5. Weekly distribution of suspected measles cases in Afghanistan, Jan–Jun 2022 (N=54,386)

Response to measles outbreak

- The nationwide measles vaccine campaign is planned in July -August 2022.
- The measles case management TOT was conducted in Kabul for 19 provinces in April 2022.
- The cascading of measles case management training is in progress in West Region, a total of 200 healthcare staff are targeted in Herat, Badghis, Ghor and Farah provinces.
- The training has been cascaded in East Region and targeted 105 healthcare workers in Nangarhar, Laghman, Kunar and Nuristan provinces.



Health care providers administer measles vaccine to a child during measles campaign in March 2022 in Kabul, Afghanistan

No. 44/ (05-11) June 2022

Acute Watery Diarrhoea (AWD) Outbreak (12 Sep

Current Week Cumulative Figures 6,229 cases (16.8% < 5 years, 49.8% Female) 397 new cases (16.1 % under 5) 8 deaths (12.5% < 5 years), CFR=0.13% 0 new deaths 22 districts in 6 affected provinces 8 districts "Kandahar (6), Kabul (1), and Ghazni (1) provinces" reporting alert. 703 samples collected

- A total of 264 new AWD cases were reported from Ghazni province during week 23-2022.
- In Kandahar province, 62 new AWD cases were reported during week 23-2022.
- Additionally, 71 new cases were reported from Kabul city which brings the total number of AWD cases to 397 in week 23 (Table 3).
- Cumulatively, Kabul city (4,474 cases, 71.8%) and Sorobi district (887 cases, 14.2 %) are the most affected areas.
- Of the total 6,229 cases, 16.8% (1,045) were children below 5 years, 49.8% (3,105) were females and 63% (3,936) had severe dehydration (Figure 7).
- The first few cases of acute watery diarrhea were reported to the National Disease Surveillance and Response System (NDSR), Ministry of Public Health, and WHO on 12 Sept 2021 from Tapa village of Sorobi district in Kabul province and spread to 22 districts of Kabul, Kapisa, Zabul, Kandahar, Laghman and Ghazni provinces.

Table 3: Summary of Acute Watery Diarrhea cases in Afghanistan, as of 11 Jun 2022

	Weekly	changes	Cumulative number (12 Sep 2021 to 11 Jun 2022)		
Location	# of cases (% change)	# of deaths (% change)	Cases (%)	Deaths (CFR %)	
Kabul ¹	71 (↓22.8)	0 (N/A)	4,474 (71.8)	6 (0.13)	
Sorobi District (Kabul Province)	0 (N/A)	0 (N/A)	887 (14.2)	2 (0.23)	
Kapisa ²	0 (N/A)	0 (N/A)	9 (0.14)	0 (N/A)	
Kandahar ³	62 (↓8.8)	0 (N/A)	293 (5.7)	0 (N/A)	
Zabul ⁴	0 (N/A)	0 (N/A)	205 (3.3)	0 (N/A)	
Laghman ⁵	0 (N/A)	0 (N/A)	35 (0.6)	0 (N/A)	
Ghazni ⁶	264 (N/A)	0 (N/A)	264 (4.2)	0 (N/A)	
Sub Total	397 (†148.1)	0 (N/A)	6,229 (100.0)	8 (0.13)	

Kabul Kabul city (4,474), Bagrami (53), Paghman (25), Dehsabz (20), Shakardara (14), Garabagh (11) and Farza (6) Kapisa² Kohistan (9)

Kandahar³ Spinboldak (156), Kandahar city (128), Dand (29), Panjwayi (20), Daman (6), Zhari (4), Maiwand (4) Arghandab (3), Shahwali-kot (3) and Khakriz (1) Zabul⁴ Shahjoy (158) and Qalat (47) Laghman⁵ Alishing (35), and Ghazni⁶ Giro (264)

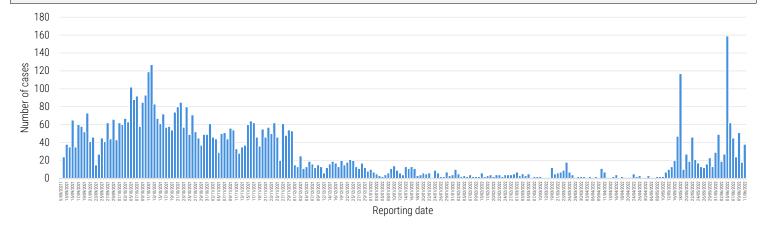
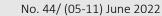
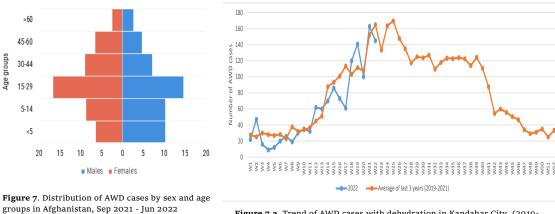


Figure 6. Daily distribution of AWD cases in Afghanistan Sep 2021-Jun 2022 (N=6,229)



2,293 (37%)



3,936 (63%) Severe Dehyrataion without Severe Dehydration

Figure 7.a. Trend of AWD cases with dehydration in Kandahar City, (2019-

Figure 7.b. AWD cases with severe dehydration in Afghanistan, Sep 2021-Jun 2022

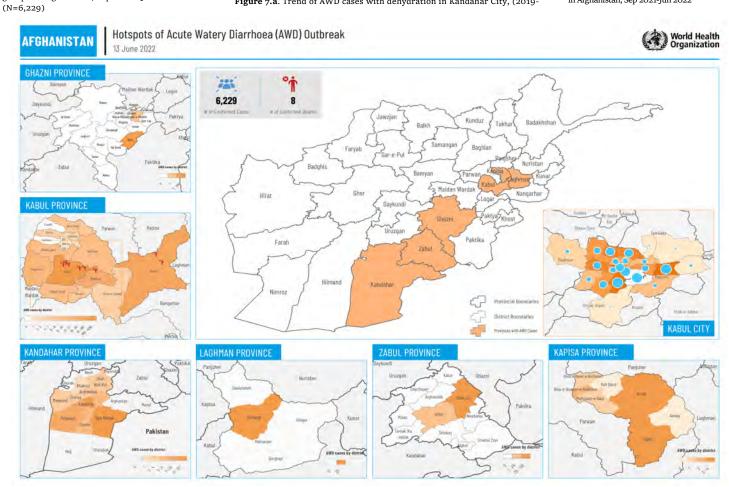


Figure 8. Hotspot areas of AWD cases in Afghanistan, Sep 2021– Jun 2022 (N=6,229)

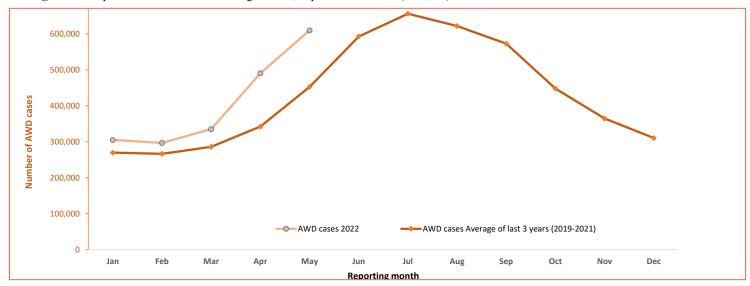


Figure 9. National trend of AWD cases (HMIS data) in Afghanistan, (2019-2021 and 2022)

Response to the AWD outbreak



Figure 9. On the job training for testing AWD samples at Kandahar Regional Reference Laboratory (KRRL), Jun 2022



Figure 10. WHO mission visited water source in Baledy village of Dand district where three AWD cases have been reported in Jun 2022

Response to AWD outbreak

Leadership and Coordination

- National task force committee has been established in MoPH to lead overall AWD response at national and subnational levels.
- Establishment of taskforce meeting twice/week in Kandahar province.
- To enhance coordination, preparedness, and response to the AWD outbreak, joint work between WHO, UNICEF, MSF, IOM, Save the Children, Health-WASH clusters, and MOPH has taken place in outbreak affected areas.

Surveillance

- Active case findings are in place at outbreak affected areas, surveillance support teams (SSTs) are deployed for linelisting.
- Regular sample collection is conducted for AWD with severe dehydration cases by SSTs team.

Case Management

- Establishment of one CTC in Mirwais regional hospital in Kandahar province.
- 50 Oral rehydration Therapy (ORT) corners in Kandahar and 47 in Zabul are equipped, functional and providing services.
- 25 CTUs at Comprehensive Health Centers (CHCs) in Zabul and Kandahar are functional and provided AWD case management health services.

 35 medical staff at different level are trained on AWD case management and updated case management guidelines are distributed among the partners.

Lab and Supplies

- Rapid Diagnostic Test (RDT) are used in outbreaks affected areas (Kabul and Kandahar provinces). Cultures for collected samples are processed in Kandahar Regional Reference Laboratory (KRRL) and Central Public Health Laboratory (CPHL).
- 167 different kind of AWD response kits are supplied to HFs and management centres.
- 19 investigation, 41 community and 4 ORP AWD kits are prepositioned in Kandahar and Zabul provinces.
- 70 AWD specific beds (50 in Zabul) and (20 in Kandahar) were dispatched to Zabul and Kandahar provinces.

WASH and RCCE

- In Kandahar City, chlorinating 1.5 million liters of water supplying to households through trucking before reaching to households.
- In Zabul province, Shahjoy District, 2,957 people are getting safe drinking water via trucking for immediate AWD response.
- In Kandahar City, joint UNICEF-WFP response started on sludge and solid waste management (food for work for 7,000 unskilled labors cleaning 14 districts).
- Target population in high-risk districts are engaged through Community Base Health Care (CBHC) program and reached with key preventive messages on AWD.

No. 44/ (05-11) June 2022

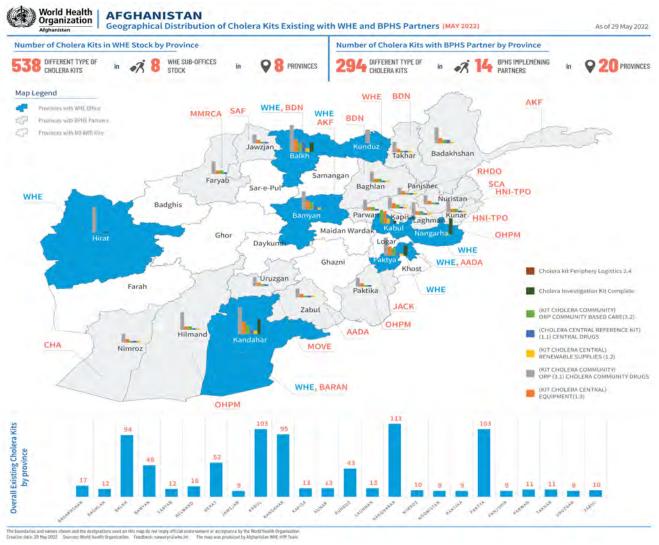


Figure 11. Distribution of AWD kits to partners by the WHO in Afghanistan (29 May 2022)



Figure 12. Humanitarian coordination meeting for AWD response in Kandahar Afghanistan, Jun 2022

Other infectious diseases outbreaks (Jan-Jun 2022)

CCHF Highlight:

- A total of 78 suspected CCHF cases were reported from 21 provinces.
- Out of 78 cases, 75.6% (59) of the cases were males and all were over five years of age.
- Out of 78 cases, 24 cases (30%) were lab confirmed.
- Eight CCHF associated deaths were reported from Herat (3), Kapisa (2), Nangarhar (2) and Kabul (1) provinces.
- The cases are managed in the health facilities according to the national guidelines including the administration of ribavirin.

Pertussis Highlight:

- A total of 62 suspected cases of pertussis were reported from eight provinces.
- Out of 62 cases, 58% (36) of the cases were females and 54.8 % (34) were under five years of age.
- Five suspected Pertussis associated deaths were reported from Badakhshan (4) and Urozgan (1) provinces.
- Suspected cases are provided with case management services at health facilities.

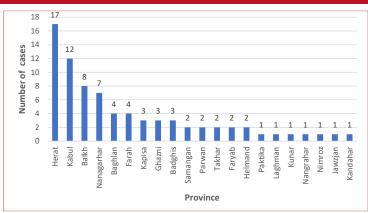


Figure 13. Distribution of suspected CCHF cases by province in Afghanistan (Jan-Jun 2022)

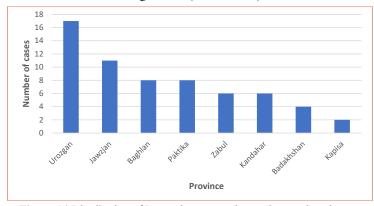


Figure 14.Distribution of Pertussis suspected cases by province in Afghanistan (Jan-Jun 2022)

Monkeypox Highlight:

- A total of 15 suspected Monkeypox cases were reported during May 2022 from Kabul (11), Herat (2) and Nimroz (2) provinces.
- All suspected cases were males and one case (6.6%) was under five years of age.
- The reported cases were clinically rejected as being Monkeypox and diagnosed as being Chickenpox and Infected Scabies
- WHO is supporting Central Public Health Laboratory (CPHL) with the provision of PCR kits and reagents needed for the laboratory confirmation of Monkeypox, next week.

Note: MOPH is the source of epidemiological data