WHO is determined to ensure that countries have the advanced capacity to manage public health emergencies including critically ill patients. Country-specific and easy-to-use treatment protocols and best practices (including capacity-building) for the management of critically ill patients can improve case management and empower health workers to improve health in the community. In turn, such system strengthening efforts can reduce morbidity and mortality among the affected population when emergencies strike.



Afghanistan faces ongoing outbreaks of multiple diseases such as Crimean-Congo haemorrhagic fever (CCHF), dengue fever and acute respiratory infections (ARIs). Along with natural disasters and other emergencies, these outbreaks present a huge challenge to the country's fragmented health system. In response, the WHO Regional Office for the Eastern Mediterranean coordinated a comprehensive 2-month country support mission to Afghanistan from 9 June to 8 August 2023.

Three expert working groups joined the Afghanistan mission to conduct complementary activities at the central and provincial levels. The mission supported investigations,

assessments and national capacities in 2 areas: outbreak management and response; and intensive care unit (ICU) and integrated ARI management, including oxygen management.

On outbreak management and response, a full-day intensive workshop on CCHF and dengue fever was conducted. This took a training of trainers format, to allow for expansion at the provincial level. Comprehensive yet easy-to-follow national clinical/case management algorithms and treatment protocols for both CCHF and dengue were also developed – work done in close coordination with Afghanistan's Ministry of Public Health.

Next, a CCHF-focused investigative mission to the North region of the country took place. This identified several gaps in capacities, epidemiological data, case management including care of the critically ill, and oxygen distribution. Based on these findings, an operational tool for ICUs was adapted for use in Afghanistan to support ICU and ARI management, and an integrated ARI treatment protocol was developed. This was followed by in-person training for 98 doctors and senior nurses, plus an online training to expand the coverage to 292 more health workers.

The workshop, trainings, assessments and protocols were well received by attendees and health authorities. Together, they have helped to support and expand the cadre of health workers involved in disease outbreak case management, ICUs, and oxygen management in Afghanistan.



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