

AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS
SITUATION REPORT | Epidemiological week #08-2023



Disease Outbreaks	AWD (May 22 - Feb 23)	ARI (Oct 22 - Feb 23)	COVID-19 (Feb 20 - Feb 23)	Pertussis (Jun 22 - Feb 23)	Measles (Jan 22 - Feb 23)	Dengue fever (Jan 22 - Feb 23)
Cumulative Cases (Data from 587 (95.8%) out of 613 surveillance sentinel sites)	261,897	4,165,962	209,107	1,104	82,983	1,330
Death (CFR %)	94 (0.04)	1,337 (0.03)	7,897 (3.8)	15 (1.4)	406 (0.5)	2 (0.15)

Acute Watery Diarrhea (AWD) with Dehydration Outbreak (01 May 2022 to 25 Feb 2023)

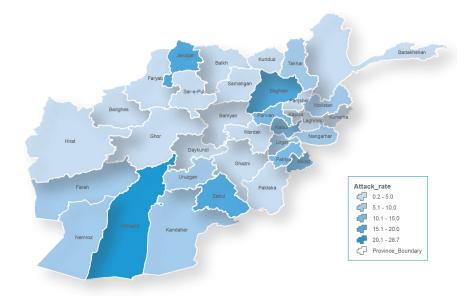
Table 1: summary of the AWD with Dehydration outbreak in the last eight weeks (01 Jan 2022 – 25 Feb 2023)

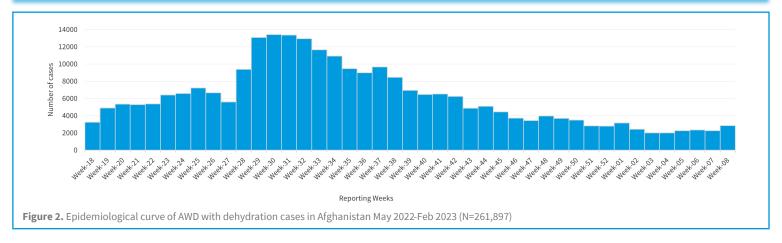
Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Epi-curve
Suspected cases	3,160	2,427	2,022	2,012	2,266	2,339	2,263	2,839	
Deaths	0	2	1	0	1	1	1	1	
CFR (%)	0.00	0.08	0.05	0.00	0.04	0.04	0.04	0.04	
% Change cases	13.3	-23.2	-16.7	-0.5	12.6	3.2	-3.2	25.5	1

- During week 08-2023, a total of 2,839 new AWD cases with dehydration and 1 new death were reported which shows 25.5% increase in the number of cases and stabilization of deaths, compared to the previous week.
- The newly reported death was male under 5 years of age from Jawzjan province.
- Out of 261,897 cases, 144,884 (55.3%) were children below 5 years and 130,757 (49.9%) were females.
- A total of 2,649 samples were tested for AWD.
- The first few cases of AWD with dehydration were reported to the National Disease Surveillance
- and Response System (NDSR), MoPH and WHO on 04 May 2022 from Kandahar city of Kandahar province and spread to 176 districts in all 34 provinces (Figure 1).
- •The epi curve shows gradual decline in the number of AWD with dehydration cases from week-32 2022 to week-7 2022, this decline could be explained by seasonal change towards winter and partially impact of response to AWD outbreak with improved WASH activities in the affected provinces. However, an increase has been observed during week 08, which needs to be closely monitored (Figure 2).

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AWD with dehydration attack rate per 1,000 population by province
As of 25 Feb 2023





Response to the AWD Outbreak

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.
- During last week 10 NDSR focal points from 3 provinces (Kabul, Wardak and Parwan) were trained on esurveillance.
- •A total of 1,018 community health worker (CHWs) and medical officers have been trained in the event based surveillance (EBS) procedure in 6 provinces.
- •Supervisory visits have been conducted in different provinces to strengthen early detection and timely response to AWD outbreaks.

Case Management

•Since the beginning of the outbreak in May 2022, a total of 1,681 Healthcare workers (HCWs) have been trained on AWD case management in 34 provinces.

Laboratory and Supplies

•Since the beginning of the outbreak, a total 34 AWD investigation and 34 RDT kits were supplied to all 34 provinces.

•Overall, since the beginning of the outbreak between May 2022- Jan 2023, more than 500 AWD case management kits and more than 1,000 investigation kits (Cary Blairs & RDTs) were distributed to all outbreak affected areas

WASH and RCCE

During the last two weeks (16-26 February 2023), the following activities were carried out as WASH responses:

- •More than 14,800 Hygiene kits were distributed in 6 provinces reaching in total 89,509 individuals this brings the total number of hygiene kits to 37,838 in 9 provinces.
- •Clean waters were provided to more than 150,000 people by chlorination of 2,000 wells in 4 outbreak affected provinces.
- •Sanitation and hygiene facilities were provided to more than 22,000 individuals by installation of emergency latrines and rehabilitations in 6 outbreak affected provinces.
- •Hygiene and water treatment promotion sessions were provided to more than 144,800 people in 6 outbreak affected province.
- •Safe Drinking water supply system rehabilitations in Kandahar and Zabul provinces supported more than 111,000 individuals.
- •Household water treatment promotion in 3 provinces reaching 2,709 individuals.



Acute Respiratory Infection (ARI) (01 Oct 2022 to 25 Feb 2023)







samples tested



Influenza



Influenza test positivity ratio

Table 2: summary of the acute respiratory infection outbreak in the last eight weeks (01 Jan 2022 – 25 Feb 2023)

Indicators	W-01	W-02	W-03	W-04	W-05	W-06	W-07	W-08	Epi-curve
Suspected cases	247,244	213,476	225,249	231,087	219,397	216,354	192,490	200,545	1
Deaths	78	100	128	112	83	65	68	72	
CFR (%)	0.03	0.05	0.06	0.05	0.04	0.03	0.04	0.04	
% Change cases	5.0	-13.7	5.5	2.6	-5.1	-1.4	-11.0	4.2	

- Case definition of ARI: Acute onset of cough, cold, coryza (runny nose), pharyngitis, laryngitis, bronchitis, or bronchiolitis with or without fever, Influenza-Like Illness (ILI), and pneumonia including severe acute respiratory illness (SARI) and suspected COVID-19.
- During week 08-2023, a total of 200,545 new ARI cases and 72 new deaths were reported which indicates, 4.2% and 5.9% increase in the number of cases and deaths, respectively, compared to the previous week.
- Since Oct 2022, out of the total 4,165,962 ARI cases, representing 12.7% of the total population of Afghanistan, 1,877,818 (45.1%) were children below 5 years of age and 2,163,417 (51.9%) were females.
- The epi curve shows the gradual increase in the weekly number of ARI until epi-week 1-2023 which might be due to multiple factors such as seasonal changes, relatively harsh winter, poor socio-economic condition and susceptibility to the infectious pathogen. Despite the increase observed during week 08, there is an overall stabilization in the number of reported cases since week 2-2023 (Figure 3).

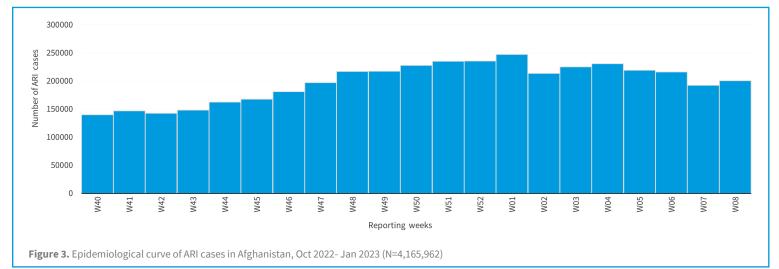




Figure 4 shows gradual increase in the number of ARI cases in 2022 compared to the average of the last three years. This increase in 2022 could be explained by multiple factors such as lack of immunity to some pathogens due to stopping preventive measures after 3 years of COVID-19, increased access to the health services, and expansion of NDSR sentinel sites.



Response to Acute Respiratory Infection outbreak

- •The provincial NDSR team through provincial EPR committee is leading the outbreak response activities.
- •Surveillance is conducted by the SSTs and case management is done by the BPHS and EPHS implementing partners. Samples are collected and shipped to CPHL/NIC for testing.
- •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, 33 medical officers and 30 nurses from 8 provinces (Parwan, Bamyan, Daykundi, Wardak, Logar, Kapisa, Panjsher) in 2 regions (Central and Central -west)) were trained on ARI case management. This brings the total number of ARI trained health care workers (HCWs) to 250.
- •As part of preparedness and response activities to infectious disease outbreaks during the winter season, required supplies has been prepositioned in all 34 provinces across the country.

COVID-19 (24 Feb 2020 — 25 Feb 2023)

Cumulative samples tested
799,199
In public laboratories only

17.2%

New samples tested in week 08

2,556
In public laboratories only

Cumulative confirmed cases
209,107

Cumulative percent positivity (26.1%)

6.6%

New confirmed cases in week 08

129

In public laboratories only



Key: ● Increasing ● Decreasing ● No change

COVID-19 Vaccination highlights



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

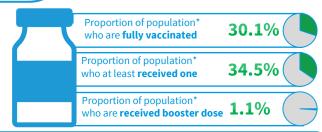


Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (28 Dec 2022 - 25 Feb 2023)

Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Epi-curve
Samples tested (in public Labs)	1,891	1,954	2,365	1,901	2,163	1,960	2,180	2,556	
Confirmed cases	194	174	240	267	178	181	121	129	
Percent positivity (%)	10.26	8.90	10.15	14.05	8.23	9.2	5.6	5.0	
Confirmed deaths	3.0	3.0	15.0	8.0	14.0	3.0	1.0	0.0	
CFR (%)	1.5	1.7	6.3	3.0	7.9	1.7	0.8	0.0	

- Since the beginning of the pandemic in Feb 2020, a total of 799,199 samples have been tested for COVID-19 through public laboratories.
- In week 08-2023, 2,556 samples were tested in public labs, of which 129 samples were positive for COVID-19 (test positivity of 5.0%) with no new deaths were reported. This represents 6.6% increase and 100% decrease in the number of cases and deaths, respectively, compared to the previous week.

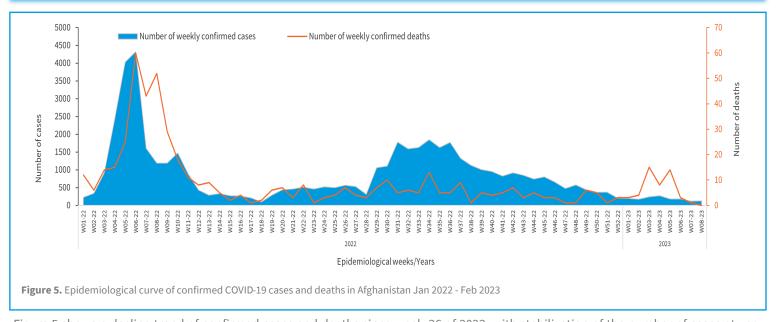
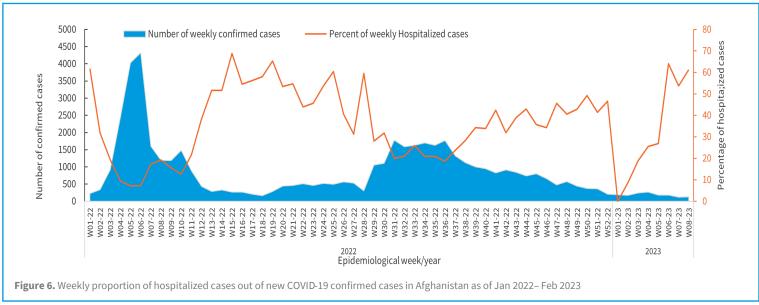
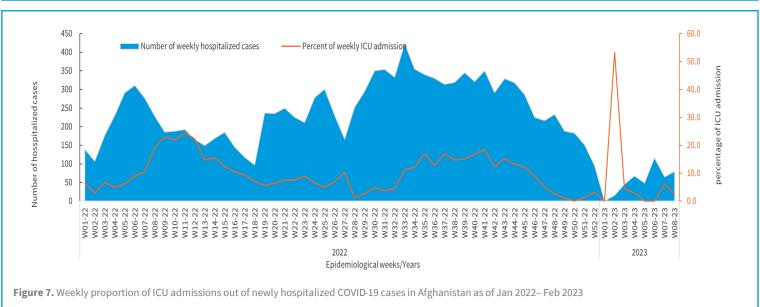


Figure 5 shows a decline trend of confirmed cases and deaths since week-36 of 2022, with stabilization of the number of cases at very low level during the past 6 weeks. This pattern could be explained by reduction in the number of samples tested (suspected patients are not testing), closure of some COVID-19 hospitals, reduced susceptibility of general population to COVID-19 and impact of nation-wide vaccination campaigns.







Suspected Pertussis Outbreaks (Jan 2022 — Feb 2023)





Table 4: summary of the suspected pertussis outbreak in the last eight weeks (01 Jan 2022 – 25 Feb 2023)

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Indicators	W01	W02	W03	W04	W05	W06	W07	W08	Epi-curve
Suspected cases	38	16	13	9	13	6	4	12	1
Deaths	0	0	0	0	0	0	0	0	• • • • • • • • • • • • • • • • • • • •
CFR (%)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	• • • • • • • • • • • • • • • • • • • •
% Change cases	81.0	-57.9	-18.8	-30.8	44.4	-53.8	-33.3	200.0	
	•				•	•		•	

- During week 08-2023, a total of 12 new suspected pertussis cases were reported from 4 provinces (Paktya (5), Nooristan (4), Zabul (2) and Kapisa (1), this brings the total number of suspected cases to 1,104 from 20 provinces.
- Out of the total 1,104 cases, 773 (70.0%) were children below 5 years and 523 (47.4%) were females.

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Geographical Distribution of Suspected Pertussis Cases by Province

As of 25 Feb 2023

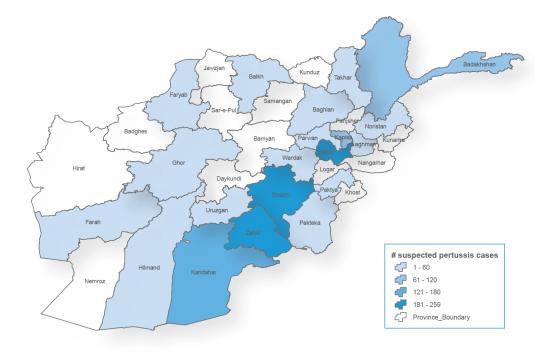
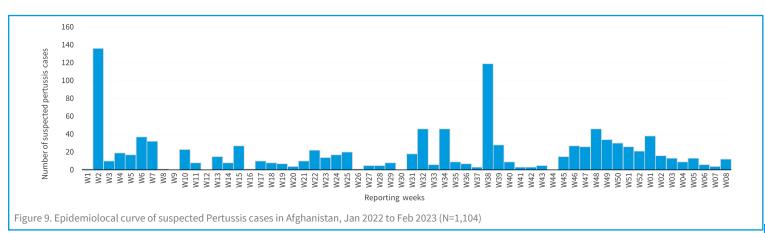


Figure 8. Geographical distribution of suspected pertussis cases in Afghanistan Jan 2022 - Feb 2023 (N=1,104)





Measles Outbreak (01 Jan 2022 to 25 Feb 2023)











Table 5: summary of the suspected measles outbreak in the last eight weeks (01 Jan 2022 – 25 Feb 2023)

W-01	W-02	W-03	W-04	W-05	W-06	W-07	W-08	Epi-curve
588	633	625	665	717	822	837	869	
3	2	0	3	3	1	3	2	
0.51	0.32	0.00	0.45	0.42	0.12	0.36	0.23	
-14.2	7.7	-1.3	6.4	7.8	14.6	1.8	3.8	
	3 0.51	3 2 0.51 0.32	3 2 0 0.51 0.32 0.00	3 2 0 3 0.51 0.32 0.00 0.45	3 2 0 3 3 0.51 0.32 0.00 0.45 0.42	3 2 0 3 3 1 0.51 0.32 0.00 0.45 0.42 0.12	3 2 0 3 3 1 3 0.51 0.32 0.00 0.45 0.42 0.12 0.36	3 2 0 3 3 1 3 2 0.51 0.32 0.00 0.45 0.42 0.12 0.36 0.23

- During epidemiological week 08-2023, a total of 869 new cases and 2 new deaths were reported which indicates 3.8% increase in the number of cases compared to last week.
- The 2 newly reported deaths were both under 5 years from Kunar and Samangan provinces.
- Out of the total 82,983 cases, 63,881 (77.0%) were children under 5 years of age and 40,400 (48.7%) were females.

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Suspected measles attack per 1,000 population of by province
As of 25 Feb 2023

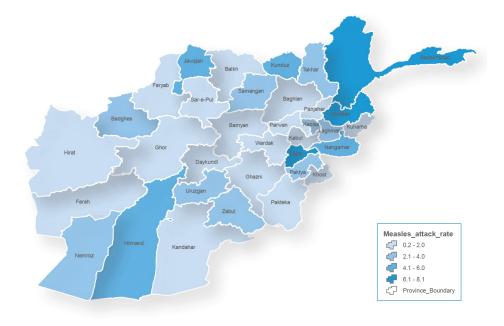


Figure 10. Suspected measles attack rate per 1,000 population of by province in Afghanistan Jan 2022– Feb 2023 (N=82,983)

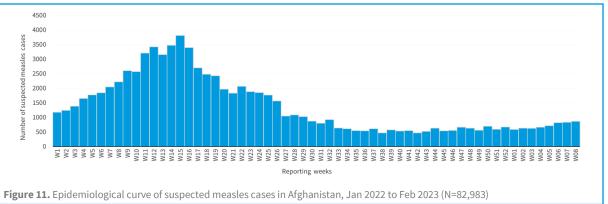
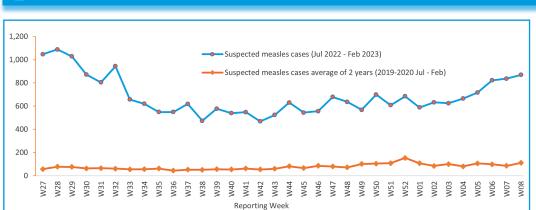


Figure 11 shows increasing trend of suspected weekly measles cases, reached to the peak at epi-week 15- 2022 and followed by decreasing pattern till epi-week-35 2022. Since epi-week 1-2023, the weekly number suspected measles cases has been increasing which could be explained lower immunity of children due to the harsh winter season.



The weekly number of suspected measles cases indicates decreasing trend between weeks 27-35, 2022, followed by stabilization up to week 1 -2023, laying above the average of last 2-years (2019-2020). Since epi-week 1-2023, an increase has been observed in the trend of suspected measles cases which could be explained by the lower immunity among the children due to harsh winter season.

Figure 12. Comparison of suspected measles trend curve using 2 years average (2019-2021) vs Jul 2022-Feb 2023, Afghanistan

Response to Measles outbreak

- Since Jan 2023, more than 3,000 children aged 9-59 months were vaccinated for measles as part of outbreak response immunization by the implementing partners in different provinces.
- The national measles immunization campaign was conducted during 26 Nov-12 Dec-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 18 Feb 2023)



Total Cases









Table 6: summary of the Dengue fever outbreak in the last eight weeks (01 Jan 2022 – 25 Feb 2023)

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Indicators	W-01	W-02	W-03	W-04	W-05	W-06	W-07	W-08	Epi-curve
Suspected cases	9	12	3	8	6	7	9	10	-
Deaths	0	0	0	0	0	0	0	0	• • • • • • • • • • • • • • • • • • • •
CFR (%)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	• • • • • • • • • • • • • • • • • • • •
% Change cases	0.0	33.3	-75.0	166.7	-25.0	16.7	28.6	11.1	

- A total of 10 suspected dengue fever cases with no new deaths have been reported during week 08-2023, all cases were reported from Nangarhar province, which brings the total number of cases and deaths to 1,330 and 2, respectively.
- Out of 1,330 reported cases, 324 (24.4%) were females and 1,316 (98.8%) were over 5 years of age.

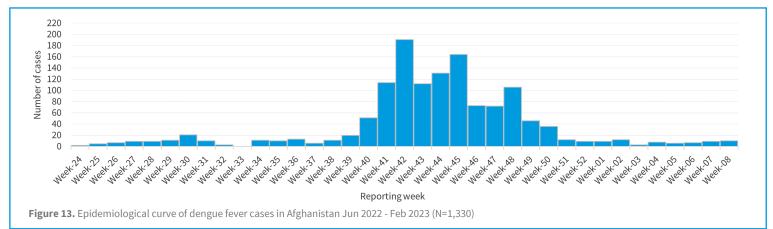


Figure 13 shows stabilization at low level in the number of suspected dengue cases during the last 9 weeks, which could be explained by the lower activity of the vector during the winter season.



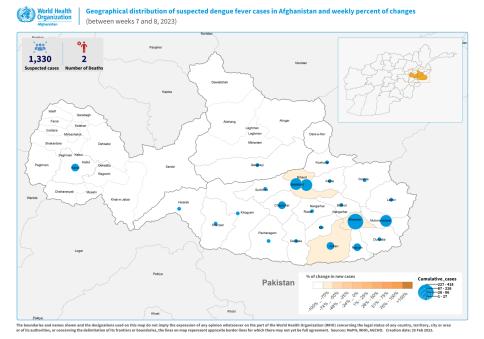


Figure 14. Hotspot areas of dengue fever cases and percent change of new cases in Afghanistan, Jun 2022 - Feb 2023

Response to the dengue fever outbreak

- •A task force committee meeting on dengue outbreak preparedness and response was conducted in Nangarhar province. The committee coordinated dengue fever outbreak response activities with the active participation of PPHD, WHO, NDSR, vector control program, BPHS and EPHS implementers in the outbreak affected areas.
- Since July 2022 a total of 9 PCR kits has been delivered to the Nangarhar reference lab (RL) to support the case 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) monitoring 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.
- •In the last two weeks, 3 kits of dengue ELISA have been supplied to central public health, 2 kits supplied to infectious disease hospital (IDH) and 4 kits supplied to Nangarhar reference laboratory for confirmation of dengue fever.

CCHF highlights

- Between Jan 2022-Feb 2023, a total of 395 suspected CCHF cases were reported from 26 provinces, out of which 304 cases (76.9%) were males and all were over five years of age. From the reported cases, 103 (26.1%) were lab confirmed using PCR.
- Between Jan-2022-Feb 2023, a total 22 CCHF associated deaths were reported from 10 provinces including the 9 deaths from 5 northern provinces, Balkh (4), Samangan (1), Jawzjan (1), Faryab (1) and Takhar (2).
- No new CCHF cases or associated deaths have been reported in the last 8 weeks.
- The CCHF cases are managed in the health facilities according to the national guidelines.
- 2,000 double bags and 500 doses ribavirin needed for the treatment of CCHF were procured and distributed to all regions.
- A total of 91 healthcare workers (in 33 provinces) were trained on CCHF case management protocol in the country.
- During the week 5, 2 kits of CCHF ELISA have been supplied to central public health, 2 kits supplied to infectious disease hospital (IDH) and 1 kit supplied to Nangarhar reference laboratory for confirmation of CCHF cases.

Note: MOPH is the source of epidemiological data

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