

INFECTIOUS DISEASE OUTBREAKS
SITUATION REPORT | Epidemiological week #09-2025



Disease Outbreaks	ARI-Pneumonia	Measles (Suspected)	COVID-19 (Confirmed)	AWD with dehydration	Dengue fever (Suspected)	CCHF (Suspected)	Malaria (Confirmed)
Cumulative cases 2025	377,733	16,083	889	14,403	97	37	1,815
Cumulative deaths 2025 (CFR %)	856 (0.2)	111 (0.7)	3 (0.3)	6 (0.04)	0 (0.0)	<b>2</b> (5.4)	0 (0.0)

(Data from 609 (99.3%) out of 613 sentinel sites)

#### **ARI-Pneumonia**

(01 Jan 2024 – 01 Mar 2025)



\*1,735,083
Total ARI Cases

\*3,855

Total ARI Deaths



Samples tested for influenza



Lab confirmed influenza cases



0.0%

Influenza test positivity ratio

#### Table 1: Summary of the ARI-Pneumonia outbreak in the last eight weeks in Afghanistan (05 Jan - 01 Mar 2025)

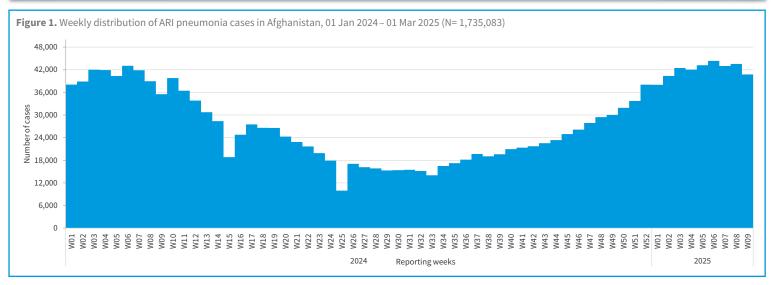
Indicators	W02	W03	W04	W05	W06	W07	W08	W09	Trend lines
Suspected cases	40,359	42,474	42,032	43,197	44,367	42,999	43,538	40,755	1
Suspected deaths	108	96	106	97	89	94	71	96	~~~
CFR (%)	0.3	0.2	0.3	0.2	0.2	0.2	0.2	0.2	~~~

- The epi curve indicates a gradual increase in ARI pneumonia cases since week 34-2024 (Figures 1 & 2). The increase could be explained by the ongoing winter season in the country. However, a slight decrease has been observed during the last 3 weeks.
- During week 09-2025, 40,755 cases of ARI pneumonia and 96 associated deaths (CFR=0.2%) were reported, which shows a 6.4% decrease in the number of ARI pneumonia cases compared to the preceding week.
- Out of the 40,755 cases, 20,296 (49.8%) were females while 27,169 (66.7%) were under five children.
- Since the beginning of 2025, 377,733 cases of ARI pneumonia and 856 associated deaths (CFR=0.2%) were reported. Out of total cases, 236,249 (62.5%) were under five, while 186,944 (49.5%) were females.
- Since the beginning of 2024, the highest cumulative incidence of ARI pneumonia per 10,000 population has been reported in Nuristan (853.3), followed by Balkh (830.0), Bamyan (759.0), and Samangan (731.6) provinces (Figure 3).
- During 2024, a total of 1,357,350 ARI Pneumonia cases (49.4% females and 62.8% under five) and 2,999 associated deaths (CFR of 0.2%; 45.8% females, 83.6% under five) were reported from 34 provinces. Also, 3,776 samples were tested for influenza, out of which 165 were turned positive (positivity rate=4.4%).

<sup>\*</sup>Currently ARI related data (morbidity and mortality) are reported from 613 surveillance sentinel sites across 34 provinces in the country.

\*\*Currently, there are 10 functional influenza surveillance sentinel sites for both ILI and SARI in ten provinces of Afghanistan. At each site, there is

one trained influenza surveillance assistant, collecting specimen and epidemiological data from 4 ILI and 6 SARI cases per week in the ARI season and sending them to the National Influenza Center (NIC) for testing.



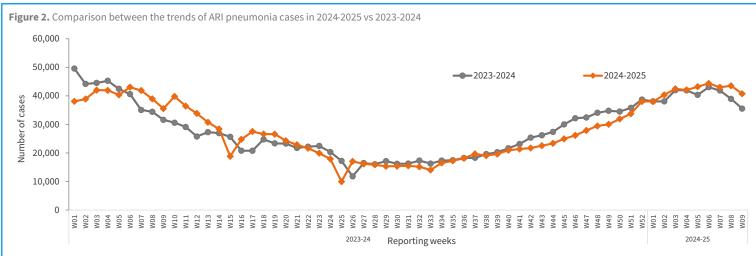
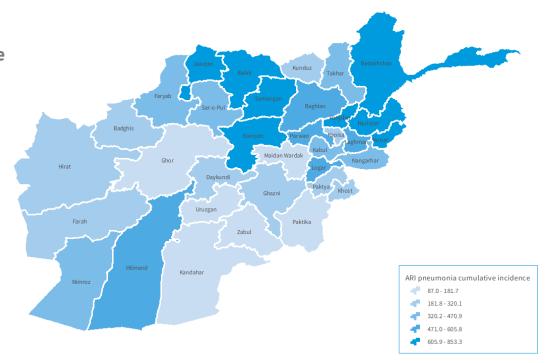


Figure 3. ARI-Pneumonia cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan 2024–01 Mar 2025

ARI pneumonia cumulative incidence per 10,000 population by province

01 Jan 2024-01 Mar 2025



## Updates on the response activities to the ARI outbreak

 Since the beginning of 2025, World Health Organization (WHO) has conducted 3 online awareness campaigns on winterrelated diseases specifically pneumonia through its official social media accounts (<u>Facebook</u> and <u>X</u>) reaching approximately 64,000 individuals.



#### **Measles**

(01 Jan 2024- 01 Mar 2025)











**Test positivity rate** 

39.

Total Cases

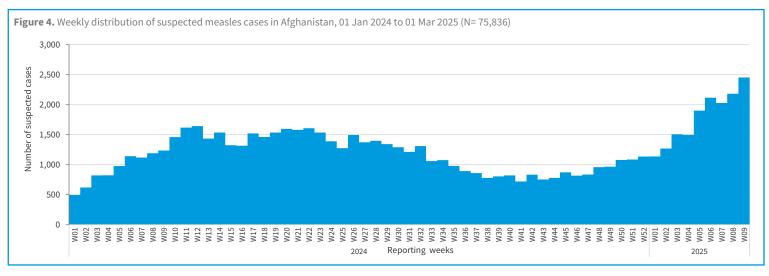
Total Deaths Sample tested

ted Lab confirmed cases

Table 2: Summary of the measles outbreak in the last eight weeks in Afghanistan (05 Jan – 01 Mar 2025)

Indicators	W02	W03	W04	W05	W06	W07	W08	W09	Trend line
Suspected cases	1,269	1,506	1,495	1,901	2,115	2,027	2,182	2,452	
Suspected deaths	7	7	5	15	15	12	21	21	
CFR (%)	0.6	0.5	0.3	0.8	0.7	0.6	1.0	0.9	

- The epidemiological curve of suspected measles cases shows a gradual increase since week 43-2024 (Figure 4). The trend in 2024-25 is higher than that reported in 2023-24 (Figure 5).
- During week 09-2025, a total of 2,452 suspected cases and 21 associated deaths (CFR=0.9%) were reported which shows a 12.4% increase in the number of suspected cases compared to the preceding week. Out of the total cases, 1,113 (45.4%) were females and 2,042 (83.3%) were under-five children.
- Out of all 21 new deaths, 20 (95.2%) were under five children while 14 (66.7%) of them were females. The deaths were reported from 8 provinces: Herat (8), Helmand (4), Jawzjan (3), Kabul (2), Badakhshan (1), Baghlan (1), Urozgan (1), and Zabul (1).
- Since the beginning of 2025, 16,083 cases of suspected measles and 111 associated deaths (CFR=0.7%) were reported. Out of total cases, 7,509 (46.7%) were females, while 13,274 (82.5%) were under five.
- Since the beginning of 2024, Balkh has reported the highest cumulative incidence of suspected measles cases per 10,000 population (49.4), followed by Urozgan (41.9), Helmand (40.5), and Jawzjan (37.6) (Figure 6).
- During 2024, a total of 59,753 suspected measles cases (45.5% female and 80.0% under five) and 289 deaths (CFR=0.5%; 44.6% female and 95.2% under five) were reported.



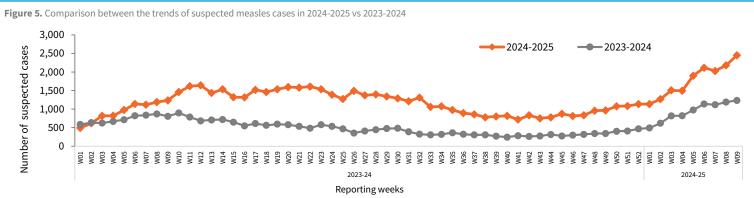


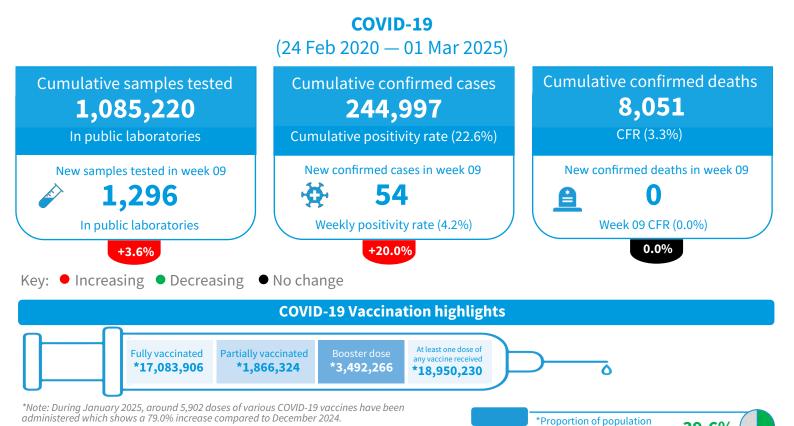


Figure 6. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 01 Jan 2024-01 Mar 2025



### Updates on the preparedness and response to the measles outbreak

• During week 09-2025, a total of 899 children aged 9-59 months were vaccinated against measles as part of outbreak response in 9 provinces (Kabul, Helmand, Urozgan, Zabul, Paktya, Paktika, Nangarhar, Kunar and Ghor). This brings the number of children aged 9-59 months vaccinated against measles as part of outbreak response immunization activities to 41,577 across the country since the beginning of 2024.



who are **fully vaccinated**\*Proportion of population

who at least received one dose

\*Proportion of population who

received various booster doses

39.6%

44.0%

8.1%

<sup>\*</sup> The denominator is 43,100,596 based on OCHA estimation 2024

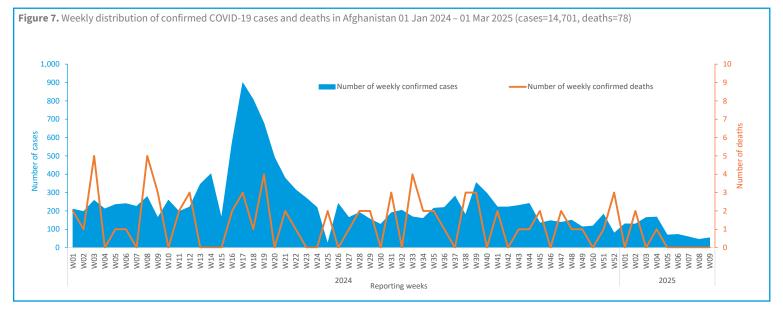


### Table 3: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (05 Jan – 01 Mar 2025)

W02	W03	W04	W05	W06	W07	W08	W09	Trend line
2,191	2,333	1,948	1,638	1,609	1,456	1,251 *	1,296	-
129	164	167	69	72	59	45 *	54	-
5.9	7.0	8.6	4.2	4.5	4.1	3.6	4.2	-
2	0	1	0	0	0	0	0	<b>\</b>
1.6	0.0	0.6	0.0	0.0	0.0	0.0	0.0	\
	2,191 129 5.9	2,191 2,333 129 164 5.9 7.0 2 0	2,191     2,333     1,948       129     164     167       5.9     7.0     8.6       2     0     1	2,191     2,333     1,948     1,638       129     164     167     69       5.9     7.0     8.6     4.2       2     0     1     0	2,191     2,333     1,948     1,638     1,609       129     164     167     69     72       5.9     7.0     8.6     4.2     4.5       2     0     1     0     0	2,191     2,333     1,948     1,638     1,609     1,456       129     164     167     69     72     59       5.9     7.0     8.6     4.2     4.5     4.1       2     0     1     0     0     0	2,191     2,333     1,948     1,638     1,609     1,456     1,251*       129     164     167     69     72     59     45*       5.9     7.0     8.6     4.2     4.5     4.1     3.6       2     0     1     0     0     0     0	2,191     2,333     1,948     1,638     1,609     1,456     1,251*     1,296       129     164     167     69     72     59     45*     54       5.9     7.0     8.6     4.2     4.5     4.1     3.6     4.2       2     0     1     0     0     0     0     0

<sup>\*</sup>A delayed reporting was experienced during weeks 08-2025 and the number of tested samples and confirmed cases were modified from 1,090 to 1,251 and from 43 to 45, 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 7).
- During week 09-2025, a total of 1,296 samples were tested in public labs, of which 54 were positive for COVID-19 (positivity rate 4.2%) while no associated death was reported. The number of positive cases shows a 20.0% increase compared to the preceding week (Table 3).
- Since the beginning of 2025, 889 confirmed cases of COVID-19 and 3 associated deaths (CFR=0.3%) were reported. Out of total cases, 410 (46.1%) were females.
- During 2024, a total of 13,812 COVID-19 confirmed cases and 75 deaths (CFR=0.5%) have been reported. Out of the total cases, 7,411 (53.7%) were females while females represented almost 3 quarters of deaths (55 73.3%). Also, 124,469 samples were collected and 13,812 were reported positive (positivity rate=11.1%).



## Acute Watery Diarrhea (AWD) with Dehydration

(01 Jan 2024-01 Mar 2025)



Total AWD with dehydration cases



Total AWD with dehydration deaths



Samples tested for AWD with dehydration (RDTs)



RDT-positive cases for AWD with dehydration



RDT positivity rate for AWD with dehydration

## Table 4: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (05 Jan – 01 Mar 2025)

Indicators	W02	W03	W04	W05	W06	W07	W08	W09	Trend line
Number of cases	1,650	1,532	1,501	1,539	1,571	1,541	1,664	1,742	-
Number of deaths	0	0	1	1	1	2	0	1	
CFR (%)	0.00	0.00	0.07	0.06	0.06	0.13	0.00	0.06	



- The epi-curve shows a decreasing trend since week 31-2024, which could be linked to the end of the summer season (Figure 8). However, a slight increase has been observed during the past two weeks.
- During week 09-2025, 1,742 AWD with dehydration cases with one associated death (CFR = 0.06) were reported from 115 districts, which shows a slight increase in the number of cases compared to the previous week.
- The new death was under five female reported from Kabul province.
- Out of the 1,742 AWD with dehydration cases, 850 (48.8%) were females and 1,042 (59.8%) were under-five children.
- During week 09-2025, no new district reported alert of AWD with dehydration.
- Since Jan 2025, 14,403 cases of AWD with dehydration with 6 associated deaths (CFR = 0.04%) were reported. Out of total cases, 8,529 (59.2%) were under five, while 6,987 (48.5%) were females.
- Since Jan 2025, 711 Rapid Diagnostic Tests (RDT) have been conducted on AWD with dehydration cases, of which 34 tests turned positive (positivity rate 4.8%).
- Since the beginning of 2024, the highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Paktya (154.4) followed by Nimroz (151.6), Logar (107.3), and Kabul (96.1) (Figure 9).
- During 2024, a total of 175,262 AWD with dehydration cases (49.4% females and 55.5% under five) and 88 associated deaths (CFR=0.05%; 42.0% female and 90.9% under five) were reported from 353 districts. Also, 10,189 Rapid Diagnostic Tests (RDTs) have been conducted on AWD with dehydration cases, of which 1,457 tests turned positive (positivity rate 14.3%).

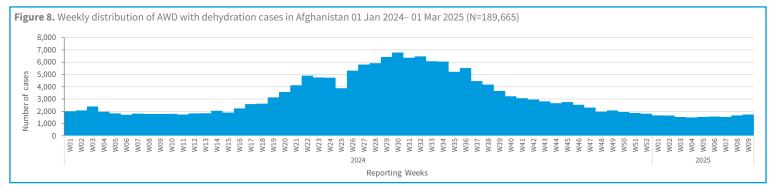
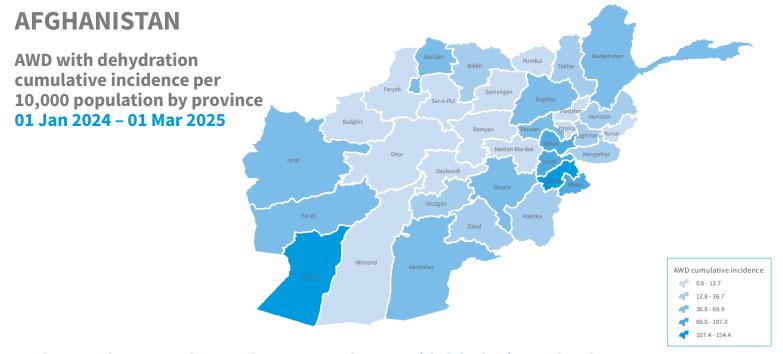


Figure 9. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan 2024 - 01 Mar 2025



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

- During week 09-2025, a total of 44 National Disease Surveillance and Response (NDSR) staffs including 2 females were trained on surveillance data management, analysis and visualization from 34 provinces.
- During week 09-2025, a total of 26 Surveillance Support Team (SST) members including 1 female were trained on surveillance functions and rapid response from Kabul, Kunar, Laghman, Nangarhar, Kunduz and Kandahar provinces.

#### **WASH update:**

There are no WASH updates since 01 Sep 2024.



## **Dengue Fever**

(01 Jan 2024 - 01 Mar 2025)





\*2,411
Sample tested

1,432 979
By PCR By NS1

645
Lab confirmed cases
503 142
By PCR By NS1

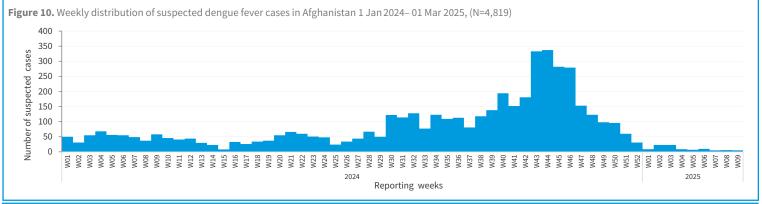


Note: Dengue fever laboratory data was reviewed, utilizing the confirmed case definition from WHO. This definition is characterized by confirmation through PCR, positive virus culture, DENV NS1 antigen detection, seroconversion of IgG in paired sera, or a significant increase (fourfold) in IgG titer in paired sera. The focus was placed on cases confirmed by PCR and DENV NS1 antigen detection, excluding cases that were only positive for IgM or IgG based on a single sample <a href="https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue-outbreak-toolkox">https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue-outbreak-toolkox</a> 20220921.pdf?sfvrsn=29de0271 2

#### Table 5: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (05 Jan – 01 Mar 2025)

Indicators	W02	W03	W04	W05	W06	W07	W08	W09	Trend line
Suspected cases	23	23	9	7	10	5	6	5	- John
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 epi curve of suspected dengue fever cases shows stabilization at low level since the beginning of 2025 (Figure 10).
- The trend in 2024-25 is higher than that reported in 2023-24; however, in the recent 10 weeks, the cases have been reported at lower level (Figure 11).
- During week 09-2025, 5 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province. Out of total cases, all were over five, while 2 (40.0%) were females.
- Since the beginning of 2025, 97 suspected dengue fever cases, with no associated deaths reported. Out of total cases, 95 (97.9%) were over five, while 50 (51.5%) were females.
- Since the beginning of 2024, a total of 2,411 samples (1,432 PCR and 979 NS1) have been tested, out of which 645 (503 by PCR and 142 by NS1) were positive (total positivity rate 26.8%). Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan is shown in Figure 12.
- During 2024, a total of 4,722 suspected cases of dengue fever (44.4% female and 1.8% under five) with 2 associated deaths (CFR of 0.04%; both over five males) were reported.



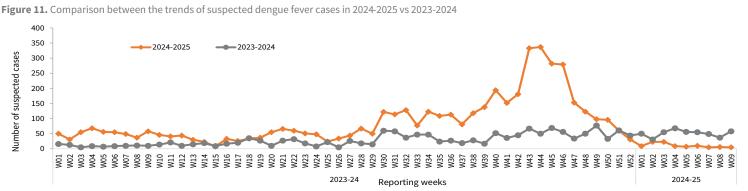
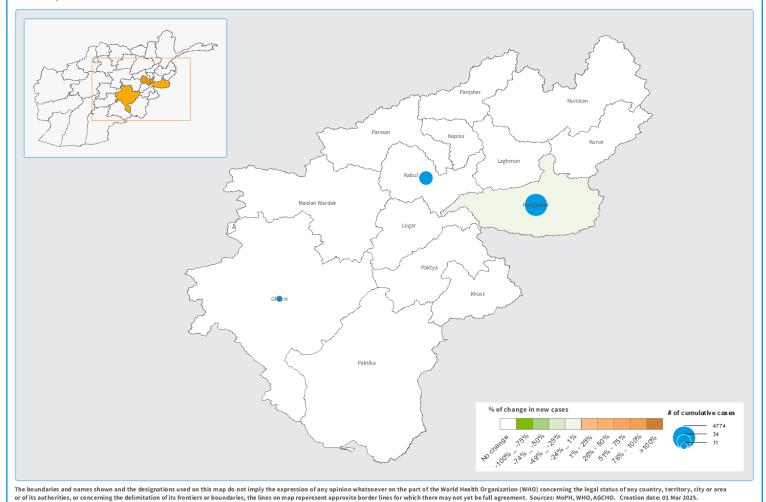




Figure 12. Geographical distribution of suspected dengue fever cases and percent change of new cases in Afghanistan, 01 Jan 2024–01 Mar 2025



World Health Geographical distribution of suspected dengue fever cases in Nangarhar, Ghazni and Kabul provinces and weekly Organization percent of changes. (hetwoon weeks 00 and 00 2005) percent of changes (between weeks 08 and 09, 2025)



## **Crimean Congo Hemorrhagic Fever (CCHF)**

(01 Jan 2024 - 01 Mar 2025)



**Total CCHF** cases



**Total CCHF** deaths



Samples tested for CCHE



Lab-confirmed **CCHF** cases



**CCHF** test positivity rate

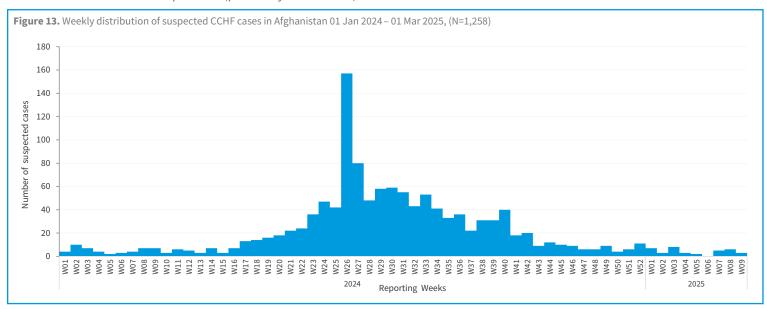
## **Table 6:** Summary of the CCHF outbreak in the last eight weeks in Afghanistan (05 Jan – 01 Mar 2025)

Indicators	W02	W03	W04	W05	W06	W07	W08	W09	Trend line
Suspected cases	3	8	3	2	0	7	6	3	~~~
Suspected deaths	0	0	0	0	0	1	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	14.3	0.0	0.0	

- The epi-curve of suspected CCHF cases shows stabilization at low level since the beginning the of 2025 (Figures 13 & 14).
- During week 09-2025, 3 new suspected CCHF cases with no deaths were reported compared to 6 cases in the previous week (Table 6). All the 3 new cases were over five, while 2 were females.
- Since the beginning of 2025, a total of 37 suspected CCHF cases, with 2 associated deaths (CFR=5.4%) were reported. All the reported cases were over five, while 16 (43.2%) were females. Also, 17 samples have been tested, 2 of them turned out positive (positivity rate = 11.8%).



- Since the beginning of 2024, the highest cumulative incidence of suspected CCHF per 100,000 population in 2024 is reported from Balkh (10.0) followed by Kabul (8.5), Jawzjan (7.3), and Kapisa (7.0) provinces (Figure 15).
- During 2024, a total of 1,221 suspected cases of CCHF (31.6% female and 99.5% over five) with 95 associated deaths (CFR of 7.8%; 27.4% female and 98.9% over five) were reported. Also, 844 samples of suspected CCHF cases have been tested, out of which 271 turned positive (positivity rate 32.1%).



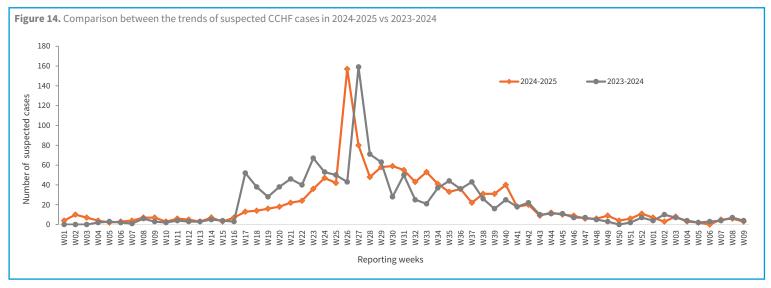
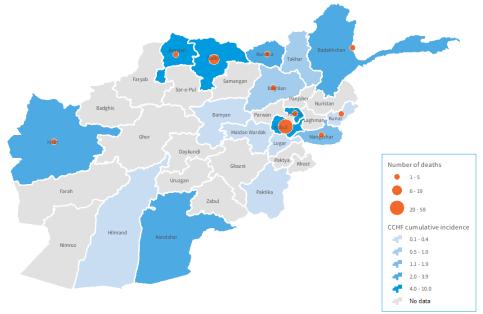


Figure 15. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 01 Jan 2024 – 01 Mar 2025

Crimean-Congo Hemorrhagic Fever (CCHF) cases cumulative incidence per 100,000 population by province and provincial distribution of deaths 01 Jan 2024 - 01 Mar 2025





#### Updates on the response to the CCHF outbreak

- During week 09-2025, a total of 66 Health-care Workers (HCWs) including 7 females were trained on CCHF case management from 34 provinces.
- During week 09-2025, 31 Lab technician including 4 females from 6 Regional Reference Laboratories (RRLs), Infectious Disease Hospital (IDH), and Central Public Health Laboratory (CPHL) were trained on the diagnosis of CCHF, Dengue fever, and Mpox.

#### Malaria

(01 Jan 2024—01 Mar 2025)



83,119
Total confirmed
Malaria Cases

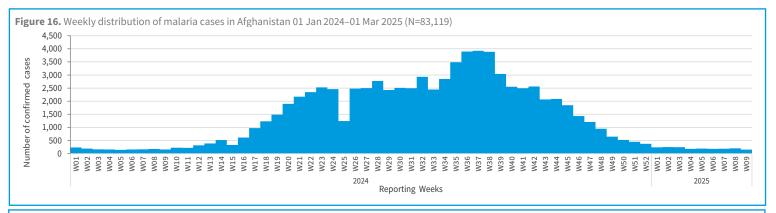
\*2 (0.002)

Total malaria deaths (CFR %)

Table 7: Summary of the malaria outbreak in the last eight weeks in Afghanistan (05 Jan – 01 Mar 2025)

Indicators	W02	W03	W04	W05	W06	W07	W08	W09	Trend line
Confirmed cases	247	245	180	189	181	184	198	153	-
Confirmed 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 epi curve of malaria cases shows a declining trend since week 38-2024, after its peak during week 37-2024. The trend of malaria cases in 2024-25 closely follows the trend observed in 2023-24 (Figures 16 & 17).
- During week 09-2025, 153 cases with no associated deaths were reported from 12 provinces compared to 198 cases in the previous week. Out of the total cases, 67 (43.8%) were females and 35 (22.9%) were under-five children.
- Since the beginning of 2025, 1,815 confirmed malaria cases have been reported. Out of total 1,815 cases, 825 (45.5%) were female and 249 (13.7%) were under five children.
- Since the beginning of 2024, the highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (427.0) followed by Kunar (304.6), Laghman (194.0), and Nangarhar (106.8) (Figure 18).
- During 2024, a total of 81,304 malaria cases (47.0% female and 20.8% under-five) with 2 associated deaths (both under-five males) with CFR=0.002% were reported from 33 provinces.



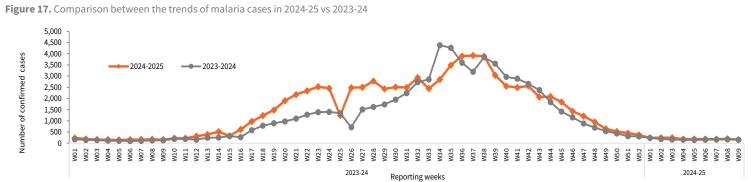
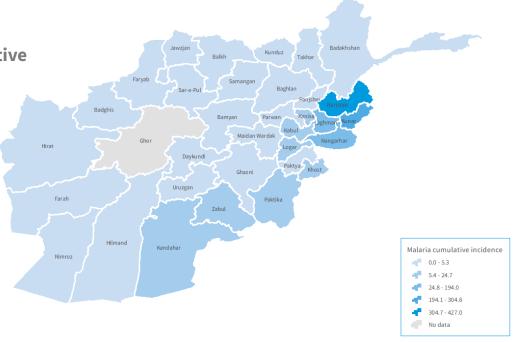




Figure 18. Malaria cumulative incidence per 10,000 population by province in Afghanistan, 01 Jan 2024 - 01 Mar 2025

Confirmed malaria cumulative Incidence per 10,000 population by province 01 Jan 2024 – 01 Mar 2025



Note: MOPH is the source of epidemiological data Case definition & alert/outbreak thresholds

#### **Contact us for further information:**

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