



AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #14

No. 35/ (03 - 09) April 2022

The Outbreak	Measles (Jan - Apr 2022)	AWD (Sep 2021- Apr 2022)	Dengue Fever (Sep 2021-Jan 2022)
Cumulative Number of Cases	31,795	5,221	775
Number of deaths (CFR %)	221 (0.70)	8 (0.15)	1 (0.13)

Summary of the measles outbreak (01 Jan to 09 Apr 2022)

4,457
Samples tested

1,605
Lab confirmed cases

36.0%
Test positivity ratio

Table 1 summary of the measles outbreak in the last eight weeks (13 Feb – 09 Apr 2022)

Indicators	W-07	W-08	W-09	W-10	W-11	W-12	W-13	W-14	Epi-curve
Suspected cases	2046	2222	2605	2572	3207	3424	3156	3475	
Deaths	6	17	18	18	21	22	20	18	
CFR (%)	0.29	0.77	0.69	0.70	0.65	0.64	0.63	0.52	

- During epidemiological week 14-2022, 3,475 new cases and 18 new deaths were reported (10% increase in cases and 10% decrease in deaths, as compared to the previous week).
- Since the first week of 2022, the trend of new measles cases reported in most of the provinces has continued to increase sharply. However, the number of suspected measles cases decreased in the south and west regions for three weeks while the decrease in cases in the central west region was reported for two weeks (Table 2).
- The most affected provinces by this outbreak are Kunduz (12.2%), Badakhshan (9.7%), Kabul (8.2%), Helmand (7.8%), Nangarhar (7.3%), and Takhar (6.24%).
- Out of the total 31,795 suspected cases of measles around 80% (25,250) were under 5 years.
- A total of 4,457 samples have been tested out of which 1,605 were lab-confirmed and a total of 221 measles-associated deaths were reported between Jan - Apr 2022.



A child receiving measles vaccine

Table 2 number of measles suspected cases per region in the last 8 weeks

Regions	W-07	W-08	W-09	W-10	W-11	W-12	W-13	W-14	Epi-curve
North East	399	676	917	931	1021	1350	1282	1196	
East	237	217	243	218	334	432	413	536	
North	477	389	416	458	407	319	254	372	
Central East	273	297	314	301	362	363	366	347	
South	385	401	401	372	496	474	408	284	
West	184	155	219	154	373	242	226	191	
South East	60	52	53	59	104	114	95	160	
Central West	31	35	42	79	110	130	112	85	

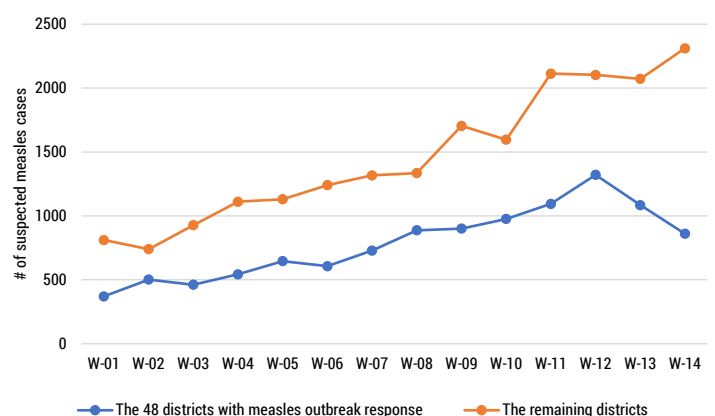


Figure.1 Trend of suspected measles cases in 48 districts where measles vaccine campaign was conducted and all other districts Jan-Apr 2022



Figure 2. Weekly epidemiological curve of suspected measles cases in Afghanistan, Jan– Apr 2022 (N=31,795)

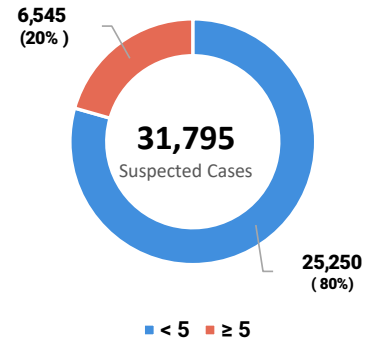


Figure 3. Distribution of suspected measles cases by age groups in Afghanistan, Jan - Apr 2022

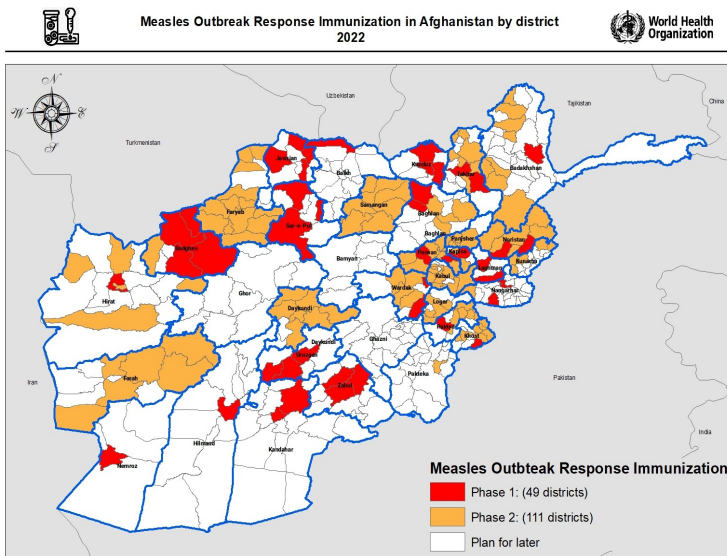


Figure 4. Measle outbreak response immunization in Afghanistan 2022

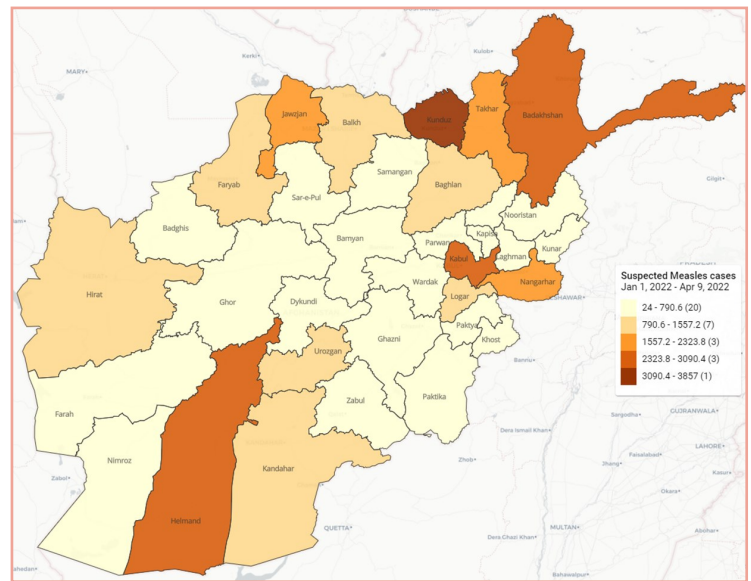


Figure 5. Geographical distribution of suspected measles cases in Afghanistan Jan - Apr 2022 (N=31,795)

Response to measles outbreak

- Phase one of Measles outbreak response immunization was conducted between 12-18 Mar 2022 in 48 high-risk districts in 24 provinces. During this campaign, more than 1.2 million children aged 6-59 were vaccinated, and around half of them were girls (50.2%).
- The WHO Afghanistan country office closely follows up the trend of suspected measles cases in 48 high risk districts where the first phase of the measles vaccine campaign was conducted. The Primary findings from the surveillance data indicate a reduction in the measles cases in these 48 districts (Figure 1).
- Phase two of the measles vaccine campaign is planned for 111 high-risk districts in 27 provinces in the second quarter of 2022. Around 3.5 million children will be targeted in this phase.
- A TOT for Measles case management will be conducted next week at the national level and it will be cascaded to the provincial level for training the staff in health facilities.



A child receiving measles vaccine

Acute Watery Diarrhea (AWD) Outbreak (12 Sep 2021 to 09 Apr 2022)

Current Week	Cumulative Figures
7 new cases (all over 5)	5,221 cases (17.2% <5 years, 49.1% Female)
0 new deaths	8 deaths (12.5% < 5 years), CFR=0.16%
1 district (Kabul city) reporting alert.	13 districts in 5 provinces affected
7 samples were collected	407 samples collected

- During epidemiological week 14, the number of new AWD cases remained the same as compared to week 13 (7 new cases with no deaths were reported) (Table 3).
- Cumulatively, Kabul city (3,956 cases, 75.8%) and Sorobi district (867 cases, 16.6 %) are the most affected areas as compared to the other five provinces.
- Of the total 5,221 cases, 17.1% (892) were children below 5 years, 49.1% (2,563) were females and 68% (3,539) 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 13 districts of Kabul, Kapisa, Zabul, Kandahar, Laghman and Logar provinces.

- The main drivers of the epidemic are limited access to safe water, poor sanitation and hygiene practices, and a high level of malnutrition in Afghanistan.

Table 3: Summary of Acute Watery Diarrhea Cases in Afghanistan, as of 09 Apr 2022

Location	Weekly changes		Cumulative number (12 Sep 2021 to 09 Apr 2022)	
	# of cases (% change)	# of deaths (% change)	Cases (%)	Deaths (CFR %)
Kabul City	7 (• 0.0)	0 (N/A)	3956 (75.8)	6 (0.2)
Sorobi District (Kabul Province)	0 (N/A)	0 (N/A)	867 (16.6)	2 (0.2)
Other Districts (Kabul Province)*	0 (N/A)	0 (N/A)	153 (2.9)	0 (N/A)
Kohistan District (Kapisa Province)	0 (N/A)	0 (N/A)	9 (0.2)	0 (N/A)
Spinboldak District (Kandahar Province)	0 (N/A)	0 (N/A)	154 (2.9)	0 (N/A)
Qalat City (Zabul Province)	0 (N/A)	0 (N/A)	47 (0.9)	0 (N/A)
Alishang District (Laghman Province)	0 (N/A)	0 (N/A)	35 (0.7)	0 (N/A)
Total	7 (• 0.0)	0 (N/A)	5221 (100.0)	8 (0.2)

*These districts are: Farza, Dehsabz, Bagrami, Paghman, Shakardara and Qarabagh

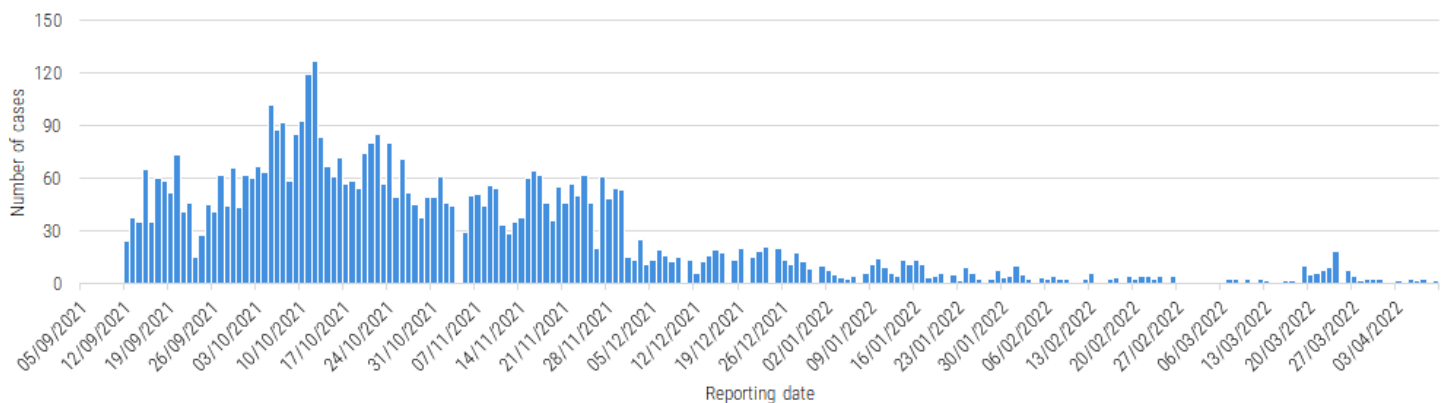


Figure 6. Epidemiological curve of the AWD cases in Afghanistan Sep 2021-Apr 2022 (N=5,221)

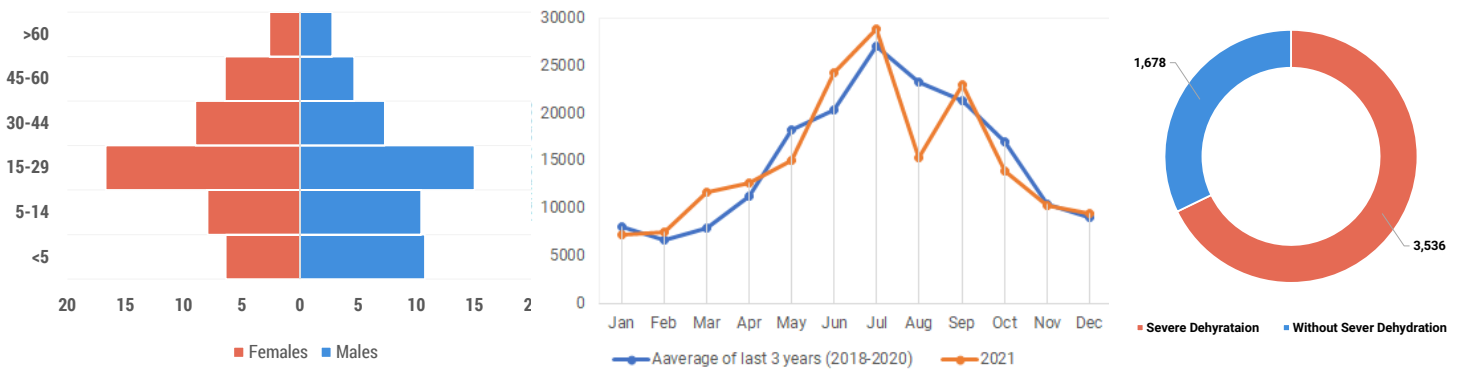


Figure 7. Distribution of AWD cases by sex and age groups in Afghanistan, Sep 2021 - Apr 2022 (N=5,221)

Figure 7.a. National trend of AWD cases with dehydration in Afghanistan, (2018-2021)

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

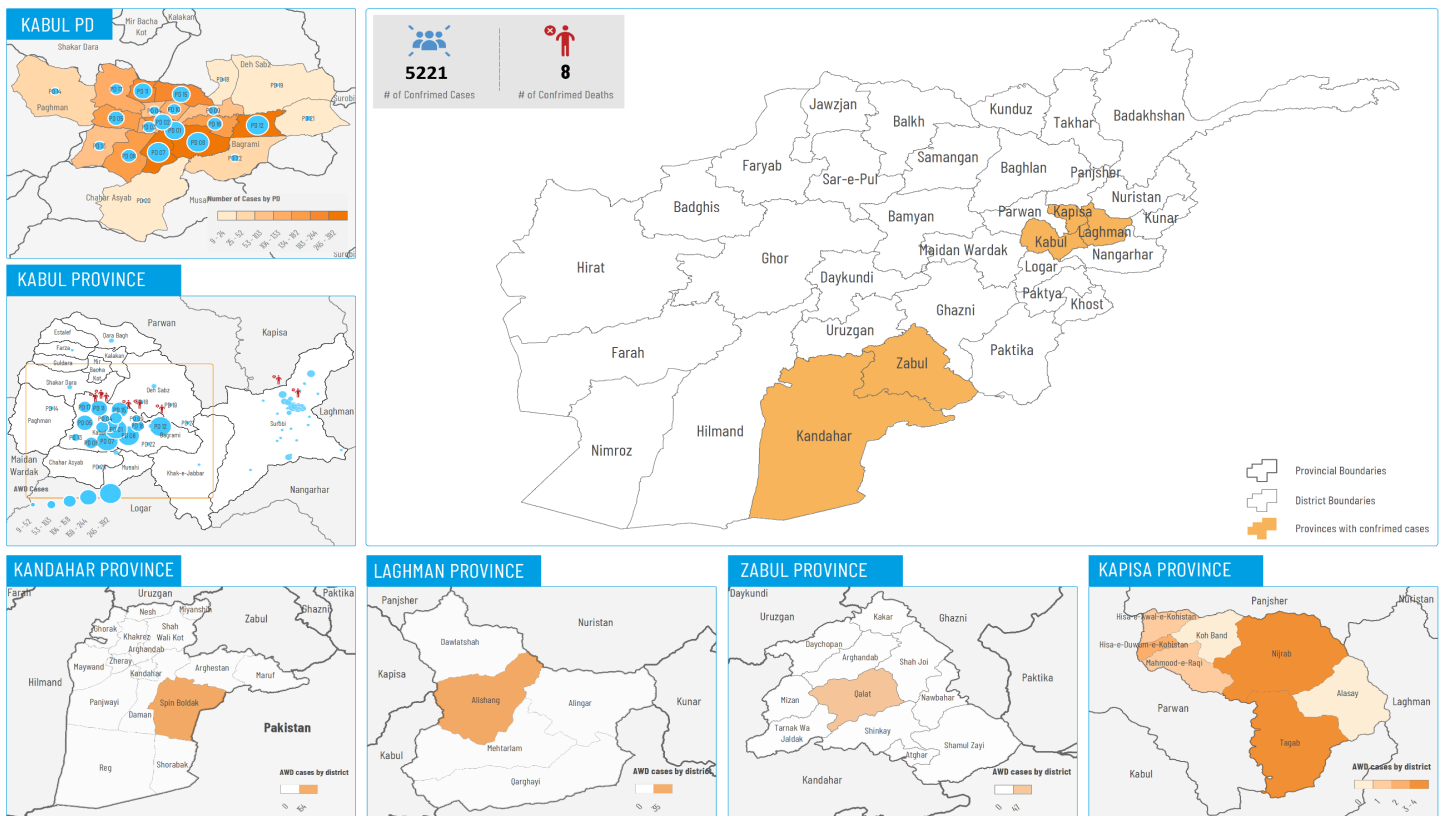


Figure 8. Hotspot of areas of AWD cases in Afghanistan, Sep 2021– Apr 2022 (N=5,221)

Response to the AWD outbreak

Surveillance and Laboratory

- 407 samples were collected for AWD cases (WHO)
- Both RDT and culture diagnostic facilities are available in Kabul province and supply has been done all over the country.

Essential medical supplies

- Supplies and equipment were provided for the laboratory testing and case management of more than 15,000 cases (WHO).
- SEHATMANDI project of WHO provided community-based kits and case management supplies to all WHO sub-offices.
- Cholera supplies were sent to the flood-affected areas in Far-yab province.
- Nine AWD Kits were distributed to IDH, Sorobi DH, and Spinboldak DH

Integrated Capacity Building

- Integrated Emergency Response Team (IERT) training took place in Kabul on 7-8 Mar – with a focus on lifesaving Health, WASH, Nutrition, and Social Behaviour Change services (MoPH, UNICEF, WHO, NGOs).

Joint WHO and UNICEF Visit to Sorobi District

- A joint WHO & UNICEF mission was conducted to Sorobi district on 3rd Apr 2022 to investigate the outbreak of AWD and monitor the response activities and measures to control the spread of infection.
- During the visit time, no suspected cholera cases were admitted in the Sorobi district hospital.
- The hospital renovation and water supply activities supported by WHO were undertaken in the hospital and in response to the current outbreak of AWD.
- UNICEF social mobilizers are working in remote villages, raising awareness, distributing soap and hygiene kits for the community through DACAAR.
- WHO supplied 2 cholera kits on 1st April 2022.
- A number of samples have been collected and sent to CPHL and they are still in the process
- A supportive supervision visit was also conducted by the MoPH surveillance team and they provided 100 Cary Blair media, 60 RTDs, and some IPC materials to the Sorobi DH.

Case management

- AWD cases are managed in health facilities in the affected areas support the CTCs in infectious diseases hospital (IDH) and in Sorobi district hospital (DH) is going on by the WHO.
- Case management guidelines were developed and printed and will be sent to the CTCs.

Preparedness

- A total of 196 central community kits, 23 central medical kits, 4 logistic kits and 27 investigation kits which are enough for around 25000 cases across the country for the next season.
- The WHO also prepared almost 100 beds for treatment of the AWD cases across the country.

WASH

- Around 13,000 wells shock-chlorinated across 24 provinces for 3 million people, regular chlorination in hotspots.
- 20% urban population re-supplied from water network with dosing pump since Nov. focusing on Kabul UWASS network. (DACAAR, ICRC, UNICEF, COAR etc.)
- AWD/Cholera materials updated/translated in local languages.
- Half-million people assisted per month with hygiene kits.
- Stockpile replenishment on track with 90,000 hygiene kits and 200 million Aquatabs expected by May 2022. (MoPH, WHO, UNICEF, DACAAR, NRC, PU-AMI, SC, SI etc.)



A joint WHO and UNICEF team visited the drinking water source in Sorobi district



A joint WHO and UNICEF team visited Sorobi district

Dengue Fever Outbreak (20 Sep 2021 to 08 Jan 2022)

Current Week

- 0 new cases
- 0 new deaths
- 0 districts reporting alerts
- 0 samples collected

Cumulative Figures

- 775 cases (1.2% <5 years, 39.1% Females)
- 1 death (0% < 5 years), CFR=0.13%
- 16 districts in 1 province affected
- 332 samples collected

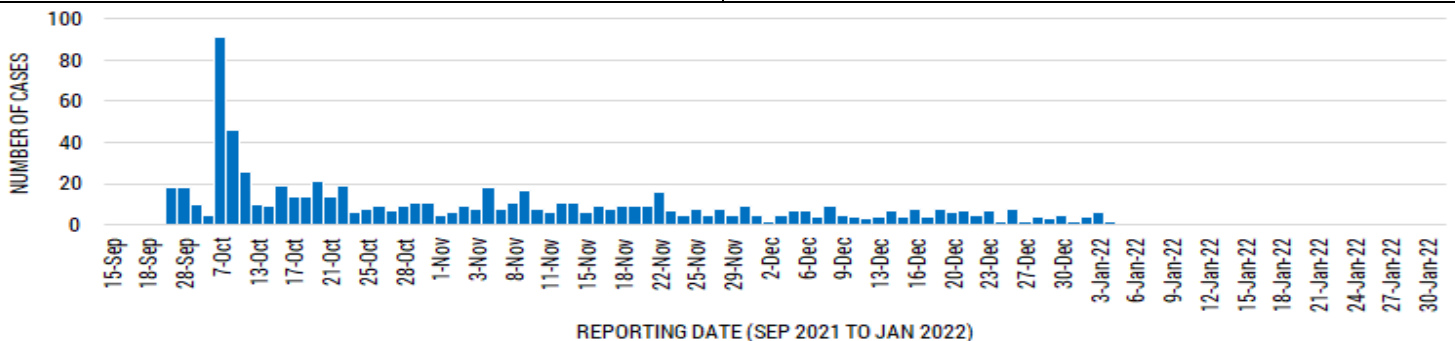


Figure 9. epidemiological curve of dengue fever in Nangarhar province, Afghanistan, Sep 2021 – Jan 2022 (N=775)

- No dengue fever case was reported in the last 13 weeks.

Note: Ministry of Public Health, Afghanistan is the source of epidemiological data.

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