



# AFGHANISTAN

## INFECTIOUS DISEASE OUTBREAKS

### SITUATION REPORT | Epidemiological week #19

No. 40/ (08-14) May 2022

Disease Outbreak	Measles (Jan - May 2022)	AWD (Sep 2021 - May 2022)	Pertussis (May 2022)
Cumulative Number of Cases	<b>46,632</b>	<b>5,305</b>	<b>38</b>
Number of deaths (CFR %)	<b>296 (0.63)</b>	<b>8 (0.15)</b>	<b>0 (0.0)</b>

### Measles outbreak (01 Jan to 14 May 2022)

**5,153**  
Samples tested

**2,051**  
Lab confirmed cases

**39.8%**  
Test positivity ratio

Table 1 summary of the Measles outbreak in the last eight weeks (13 Mar – 14 May 2022)

Indicators	W-12	W-13	W-14	W-15	W-16	W-17	W-18	W-19	Epi-curve
Suspected cases	3424	3156	3475	3818	3398	2706	2483	2432	
Deaths	22	20	18	24	23	8	10	8	
CFR (%)	0.64	0.63	0.52	0.63	0.68	0.30	0.40	0.33	

- During epidemiological week 19-2022, there have been 2,432 new cases and 8 new deaths reported (2.1% and 20% decreased in the number of cases and deaths, respectively as compared to the previous week). The trend was increasing until week 15 (2022), however, it is decreasing for the last four weeks (Figure 3).
- The number of suspected measles cases have decreased in three out of eight affected regions during the last two weeks while the other five regions show increasing trend (Table 2).
- The measles outbreak affects the entire country, however, the most affected provinces are Badakhshan (11.5%); Kunduz (11.2%); Nangarhar (8.4%); Kabul (8.0%); Helmand (6.8%); and Takhar (6.7%).
- Out of the total 5,153 samples tested for measles, 2,051 were laboratory confirmed from Jan-May 2022.
- During the last week, one new district reported measles outbreak (Figure 1).

Table 2 number of suspected measles cases per region in the last 8 weeks 2022

Regions	W-12	W-13	W-14	W-15	W-16	W-17	W-18	W-19	Epi-curve
North East	1350	1282	1500	1463	1307	899	735	627	
East	432	413	536	500	392	386	437	462	
Central East	363	366	347	497	542	277	305	370	
West	242	226	191	274	314	387	399	329	
South	474	408	284	415	347	271	217	253	
North	319	254	372	385	230	304	186	203	
Central West	130	112	85	109	88	68	100	108	
South East	114	95	160	175	178	114	104	80	

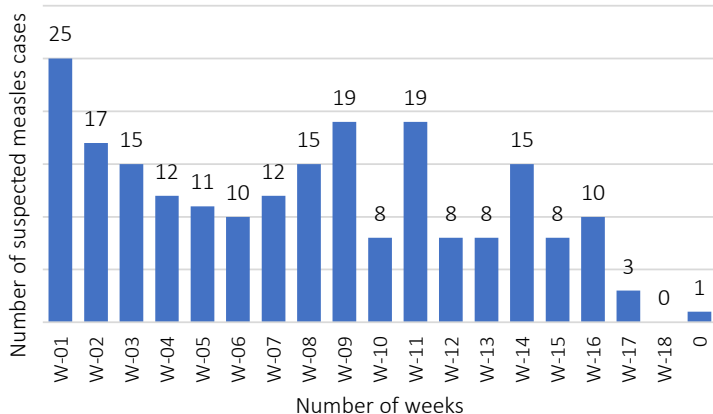


Figure 1. New district reporting suspected measles cases on weekly bases Jan - May 2022 (N=216)

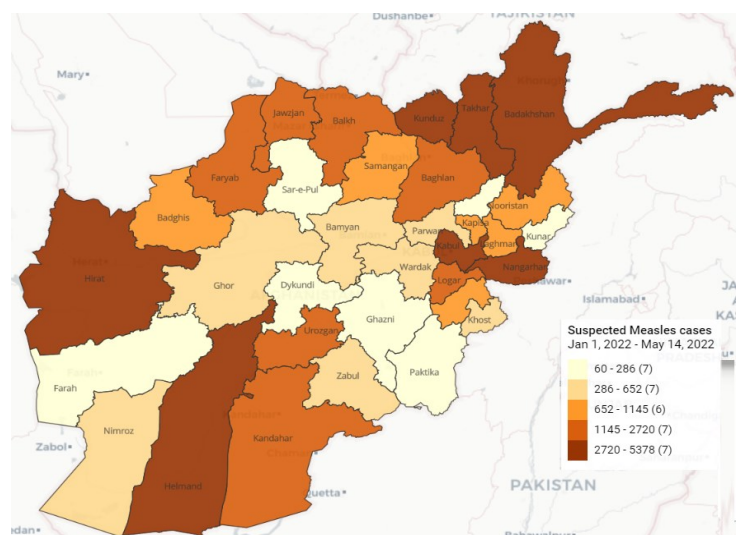
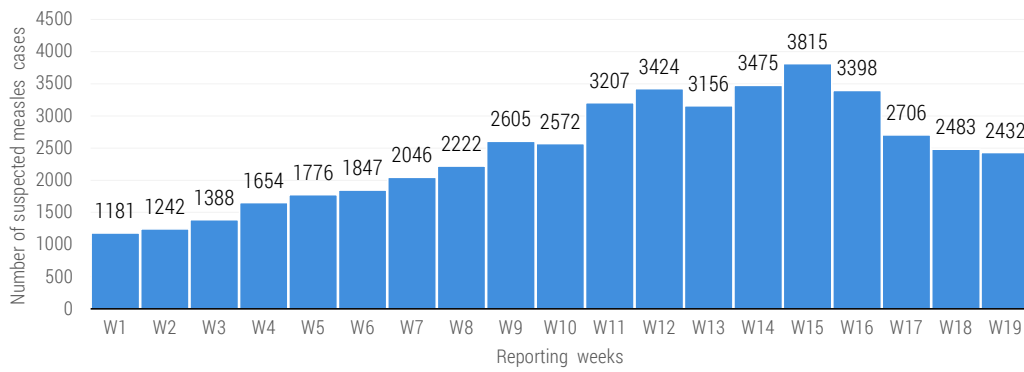
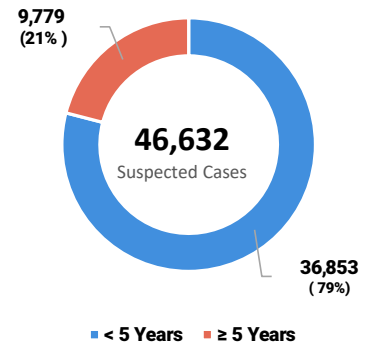


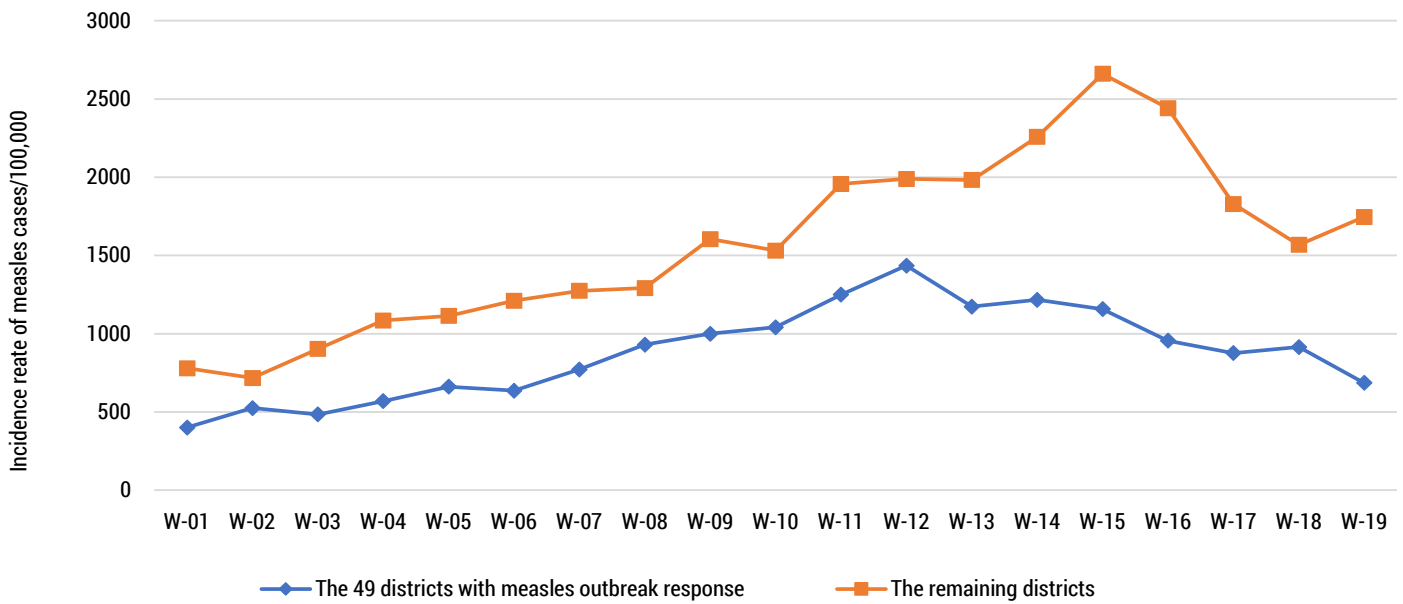
Figure 2. Geographical distribution of suspected measles cases in Afghanistan Jan - May 2022 (N=46,632)



**Figure 3.** Weekly epidemiological curve of suspected measles cases in Afghanistan, Jan– May 2022 (N=46,632)



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



**Figure 5.** Trend of suspected measles cases/100,000 population in districts where measles vaccine campaign was conducted and the remaining districts Jan - May 2022

**Response to measles outbreak**

- The second shipment of measles modules (1,050) arrived in the country and will be distributed according to the pre-designed distribution plan.
- The decision regarding vaccination campaign in 111 high risk district will be taken in the coming few days.
- The nationwide measles vaccine campaign is planned in July - August 2022.
- After the measles case management training was conducted in Kabul (April 2022), the cascade of measles case management training is starting in week 20 in the West Region (Herat province) and will be extended to other regions in the coming weeks.



Health care providers give measles vaccine to a child in Kabul, Afghanistan

**Acute Watery Diarrhea (AWD) Outbreak (12 Sep 2021 to 14 May 2022)**

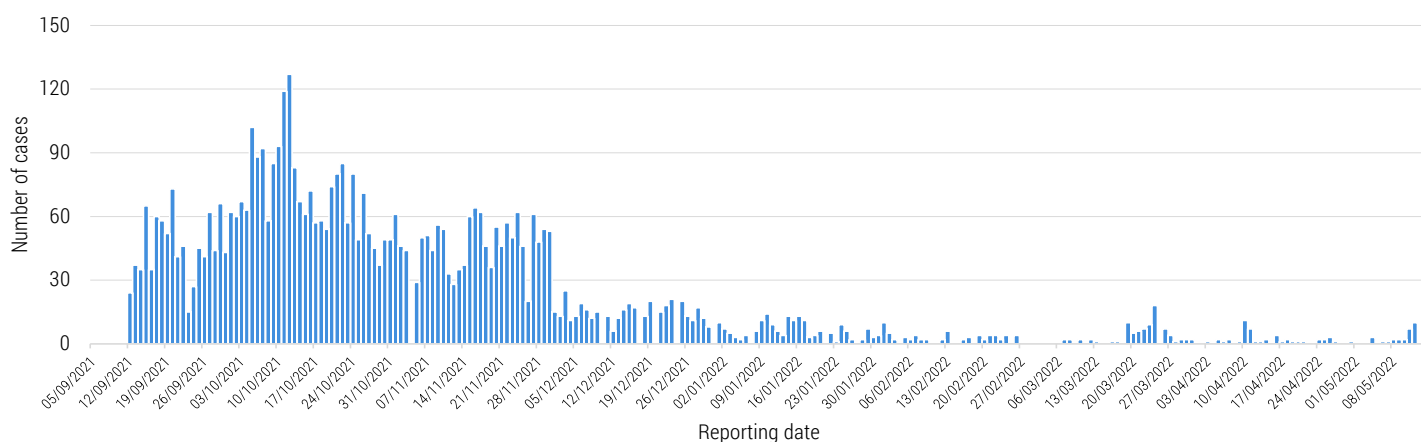
Current Week	Cumulative Figures
36 new cases (all over 5)	5,305 cases (17% <5 years, 49.2% Female)
0 new deaths	8 deaths (12.5% < 5 years), CFR=0.16%
2 districts (Kabul and Kandahar cities) reporting alert.	14 districts in 5 provinces affected
15 samples collected	432 samples collected

- In Kandahar City a new AWD outbreak (15 cases, 11 females and all over 5 years of age) were reported during week 19.
- Additionally, 21 AWD cases were reported from Kabul city (47.6% females and all over 5 years of age) which brings the total number of cases to 36 in week 19 (Table 3).
- Cumulatively, Kabul city (4,005 cases, 75.5%) and Sorobi district (887 cases, 16.7 %) are the most affected areas as compared to the other five provinces.
- Of the total 5,305 cases, 16.9% (895) were children below 5 years, 49.2% (2,599) were females and 67.3% (3,565) 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 14 districts of Kabul, Kapisa, Zabul, Kandahar, Laghman and Logar provinces.

**Table 3:** Summary of Acute Watery Diarrhea Cases in Afghanistan, as of 14 May 2022

Location	Weekly changes		Cumulative number (12 Sep 2021 to 14 May 2022)	
	# of cases (% change)	# of deaths (% change)	Cases (%)	Deaths (CFR %)
Kabul City	21 (↑100)	0 (N/A)	4,005 ( 75.5 )	6 ( 0.12 )
Sorobi District (Kabul Province)	0 (N/A)	0 (N/A)	887 ( 16.7 )	2 ( 0.04 )
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)
Kandahar city (Kandahar province)	15 (↑100)	0 (N/A)	10 (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)
<b>Total</b>	<b>36 (↑100)</b>	<b>0 (N/A)</b>	<b>5,305 ( 100.0 )</b>	<b>8 ( 0.15 )</b>

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



**Figure 6.** Epidemiological curve of the AWD cases in Afghanistan Sep 2021-May 2022 (N=5,305)

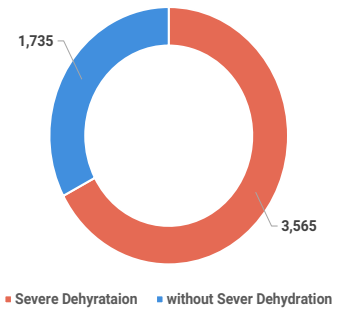
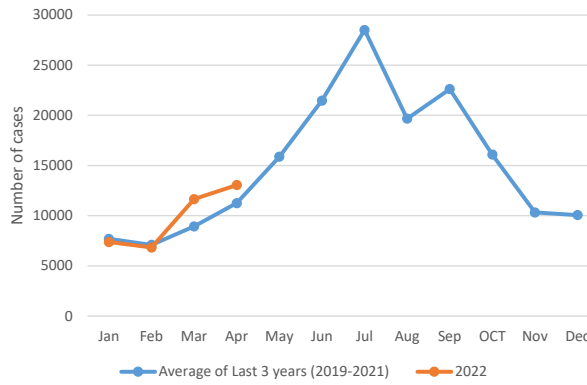
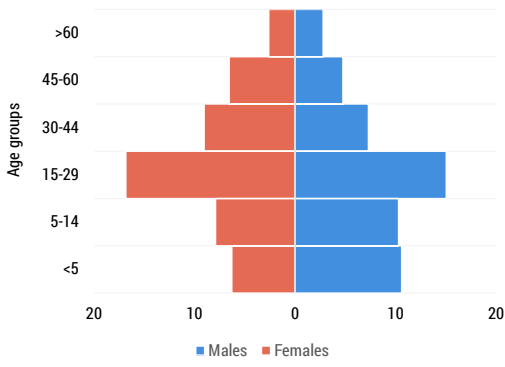


Figure 7. Distribution of AWD cases by sex and age groups in Afghanistan, Sep 2021 - May 2022 (N=5,305)

Figure 7.a. National trend of AWD cases with dehydration in Afghanistan, (2019-2021 and 2022)

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

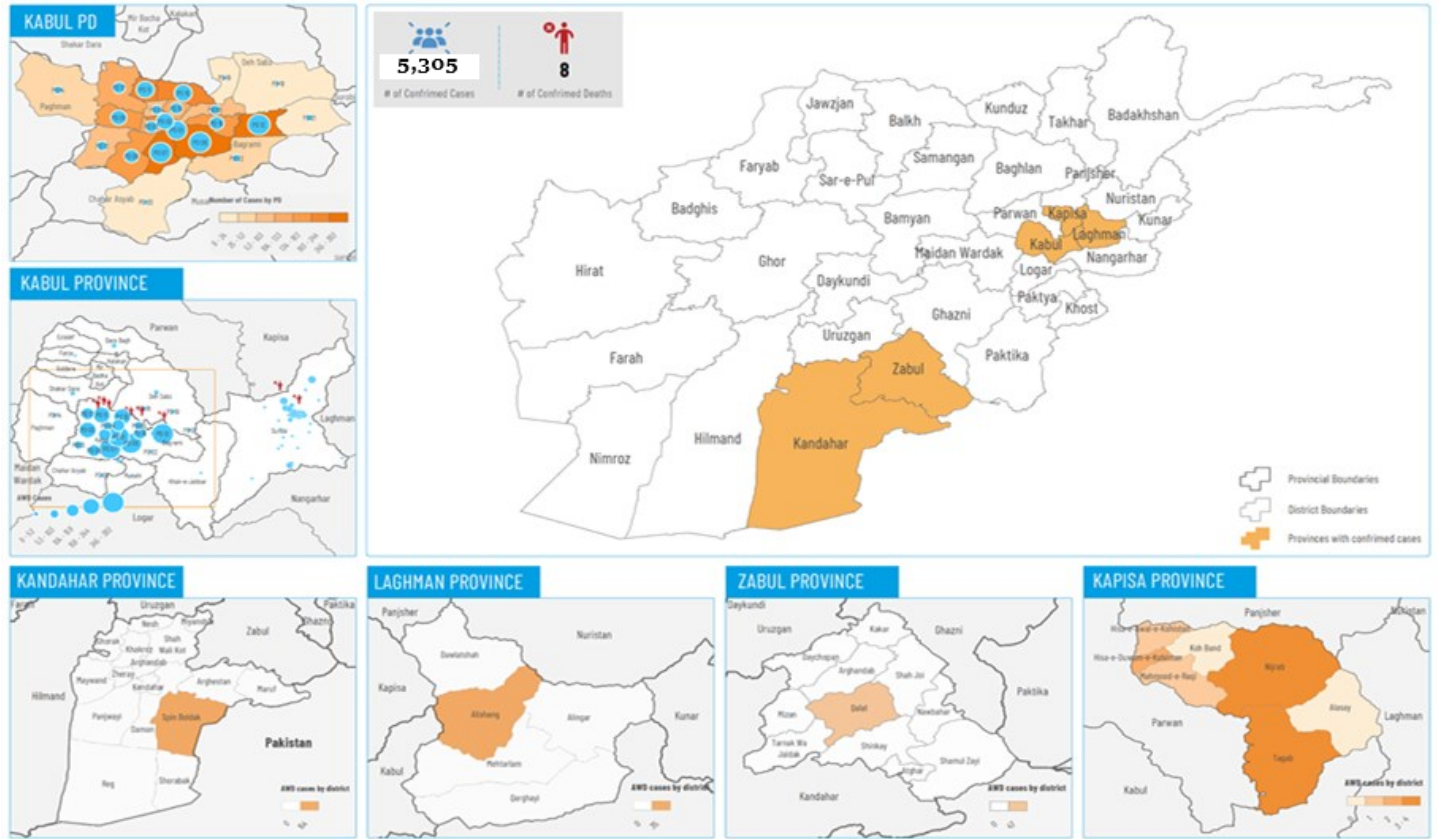


Figure 8. Hotspot of areas of AWD cases in Afghanistan, Sep 2021– May 2022 (N=5,300)

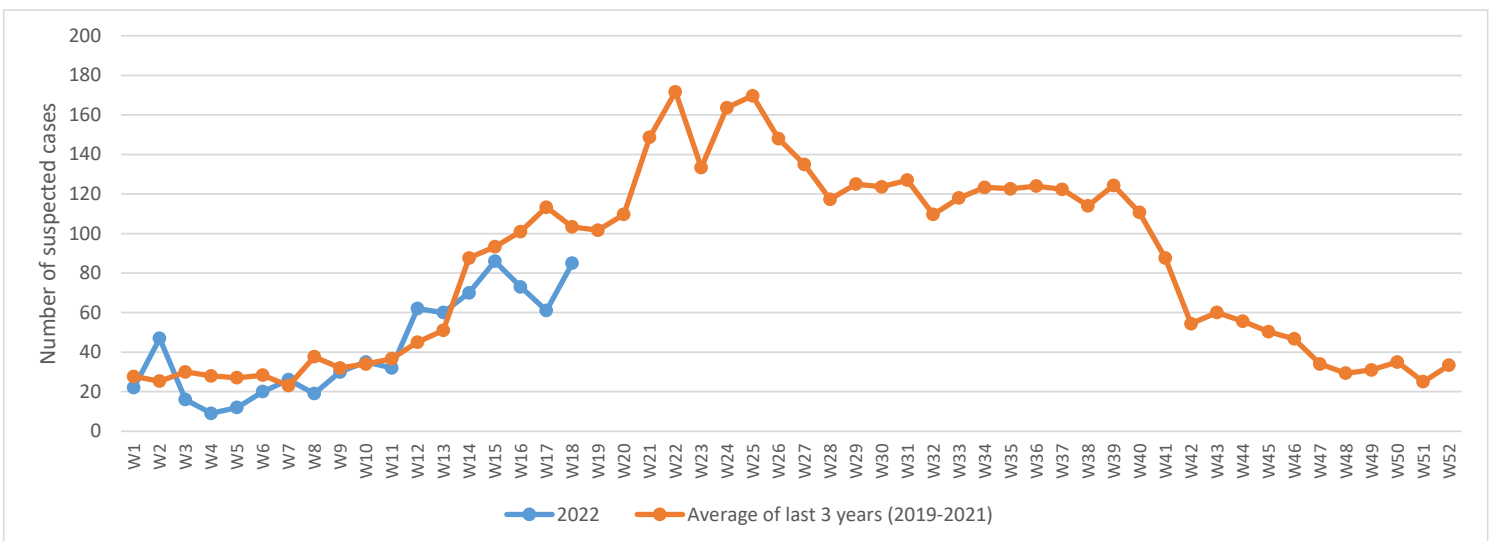


Figure 9. The average number of AWD cases in the last three years (2019-2021) and 2022 in Kandahar city



## Response to the AWD outbreak



The WHO and MOPH joint team conducting AWD outbreak investigation and response in Kandahar city (May 2022)

### Response to AWD outbreak in Kandahar city

- The local health authorities are working closely with the WHO, UNICEF, IOM and Save the Children to coordinate and enhance AWD outbreak response.
- The AWD outbreak investigation is ongoing in Kandahar city to find epidemiological link between the AWD cases. Samples taken from the AWD cases are being tested. Essential supplies for sample collection and clinical management have already been sent to Kandahar.
- 240 beds have already been identified for case management in Mirwais (100) and Aynomina Hospitals (140) in Kandahar.
- Water, sanitation and hygiene (WASH) activities include chlorination and distribution of hygiene kits are ongoing. Risk communication and community engagement (RCCE) activities are ongoing, including public messaging on prevention measures.
- AWD case management materials are available at the sites and national mapping of partners' stocks are completed (Figure 10)

### AWD Response at National level:

- Response/investigation for alerts raised through partners in Kabul, Kapisa and Sorobi is ongoing.
- To enhance coordination, preparedness and response to the AWD outbreak, a joint WHO, UNICEF, WASH cluster and MOPH mission was conducted to Sorobi district during week 19. The mission recommended supply of logistics to the Sorobi CTC and a WASH as-

essment will be conducted to provide clean drinking water to residents.

- Training for the regional lab focal points for diagnosis of AWD by culture method is planned for the next week.
- A total of 196 central community kits, 23 central medical kits, 4 logistic kits and 27 investigation kits which are enough for around 25,000 cases across the country for the next season.
- The WHO also prepared almost 100 beds for treatment of the AWD cases across the country.

### Essential medical supplies

- A total of 200 AWD kits were provided by the WHO to the health facilities and AWD management centres. They are sufficient for 20,000 cases and 283 kits are in pipeline

### WASH

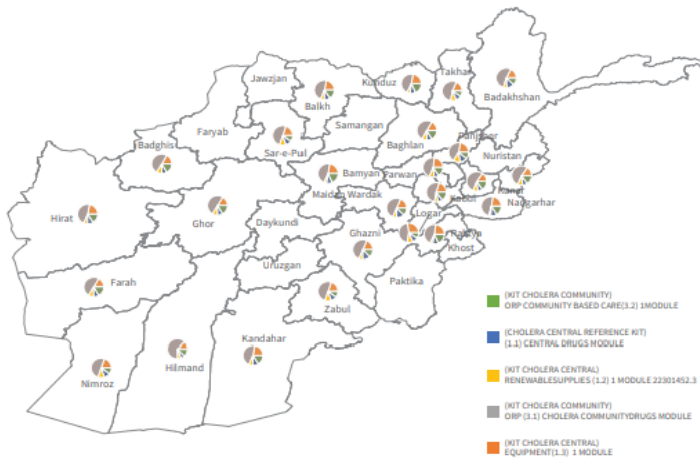
- Around 13,000 wells were shock-chlorinated across 24 provinces for 3 million people, regular chlorination in hotspots.
- Half-million people assisted per month with hygiene kits.



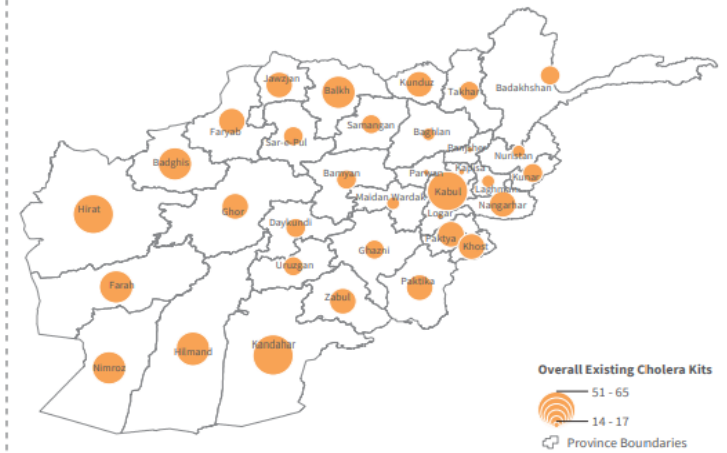
**AFGHANISTAN**  
WHO Geographical Distribution of Cholera Kits (MAY 2022)

As of 11 May 2022

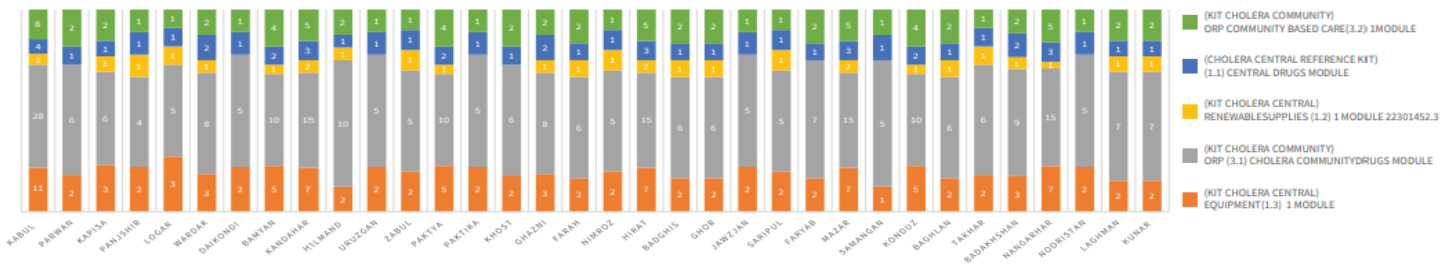
Provinces with Existing Cholera Kits by Type



Provinces with Total Existing Cholera Kits



Provinces with Existing Cholera Kits by Type



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the World Health Organization.  
Creation date: 11 May 2022 Sources: World Health Organization, ACHD. Feedback: nasseyry@who.int

**Figure 10** WHO geographical distribution of AWD kits by province in Afghanistan (May 2022)



**Figure 11.** Training for the regional lab focal points for diagnosis of AWD by culture method (May 2022)



**Sporadic cases of other infectious diseases**

**Crimean–Congo hemorrhagic fever (CCHF) (Apr-May 2022)**

Diseases	Cases					Deaths					Province	Samples collected	Samples positive	Response
	Under 5	Over 5	Male	Female	Total	Under 5	Over 5	Male	Female	Total				
CCHF	0	17	11	6	17	0	1	0	0	1	Balkh (5), Nangarhar (2), Kabul (2), Kandahar (2), Faryab (1), Badghis (1), Samangan (1), Parwan (1), Ghazni (1) and Baghlan (1)	Yes	5	The patients were provided with the required case management /treatment. Severe cases were admitted to the Infectious Diseases Hospital (IDH) in Kabul

- A total of 17 suspected CCHF cases were reported from nine provinces including, Balkh (5), Nangarhar (2), Kabul (2), Kandahar (2), Faryab (1), Badghis (1), Samangan (1), Parwan (1), Ghazni (1) and Baghlan (1) provinces.
- Around two-thirds of the cases (11) were females and all of them were over five years of age.
- Out of 17 cases, 5 cases (29.4%) were lab confirmed.
- One suspected CCHF associated death was reported from Ferozkhjir district of Samangan province (a 22 years old male and the laboratory result is still pending).
- The cases are managed in the health facilities and procurement of Ribavirin is under process.

**Pertussis (Apr-May 2022)**

Diseases	Cases					Deaths					Province	Samples collected	Samples positive	Response
	Under 5	Over 5	Male	Female	Total	Under 5	Over 5	Male	Female	Total				
Pertussis	24	14	15	23	38	0	0	0	0	0	Ghazni (14), Paktika (8), Jawzjan (8), Kapisa Zabul (6) and Kapisa (2)	Yes	14	The WHO is working with MOPH to plan Penta vaccination campaign in the outbreak-affected areas. Technical discussion on the type of vaccination campaign (localized or ring) and the targeted age group is going on. The Penta vaccine arrival is expected in the second week of May despite the global shortage.

- In April and May 2022, a total of 38 suspected cases of pertussis were reported from Ghazni (14), Paktika (8), Jawzjan (8), Zabul (6) and Kapisa (2) provinces.
- Out of total (38) reported cases 24 (63.2%) cases were under five years of age and 23 (60.0%) cases were females.
- WHO is working with MOPH to plan Penta vaccination
- Case management of pertussis is conducted in the health facilities.

Note: MOPH is the source of epidemiological data

Contact us for further information:

Mohamed Moustafa Tahon, MD, PhD : Epidemiologist, WHO-CO, (tahonm@who.int)

Mohammad Akbar Paiman MD, MSc Epi: Surveillance Officer WHO-CO (paimanm@who.int)