

KEY UPDATES:

- ◆ Four major blast incidents in Kabul and Logar provinces increased the number of casualties during August
- ◆ WHO continues to support mass casualty management preparedness and response in high-risk provinces through training medical officers from high-risk districts on stabilization of trauma and basic life support
- ◆ Outbreaks of Crimean-Congo haemorrhagic fever (CCHF), rabies, measles and diarrhoeal diseases continue to be reported as the most common communicable diseases in August 2015

PROGRAMME ACTIVITIES AND ACHIEVEMENTS:

- ◆ 688,317 children under 5 vaccinated against measles in Kandahar, Helmand and Khost provinces with the support of WHO and ECHO
- ◆ Renovation of the isolation ward for viral haemorrhagic fever cases in Herat Regional Hospital was completed in August
- ◆ Health facility functionality and rationalization survey was completed by Health Protection and Research Organization (HPRO) in 14 provinces
- ◆ WHO provided medical and non-medical equipment and supported the renovation of the Logar Provincial Hospital in Pul-e-Alam which was extensively damaged by a blast in early August
- ◆ An assessment mission visited Badakhshan province to improve water and sanitation facilities in high-risk districts for water-borne diseases, including typhoid and cholera. The team also assessed needs for infection control activities in the provincial hospital
- ◆ Enhanced coordination and collaboration for surveillance, standard case management and public awareness campaigns between the Ministry of Public Health, Ministry of Agriculture, Irrigation and Livestock (MAIL), WHO and the Food and Agriculture Organization (FAO) initiated under the leadership of MoPH



Khodadad is getting examined at a WHO-supported mobile clinic in Bamyan's Shiber district



WHO supported the renovation of Herat Provincial Hospital's isolation ward

There has been an 11% increase in acute watery diarrhoea cases and 4.7% increase in pneumonia in 2015



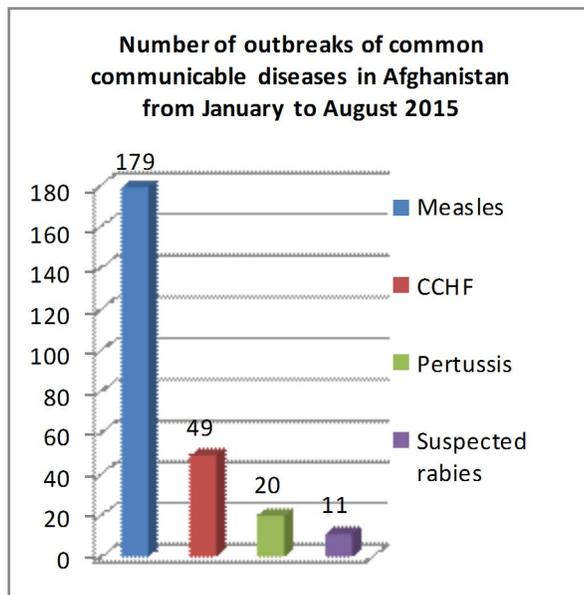
6-month-old Padshah Gul is holding a vaccination card while getting vaccinated at a mobile clinic operating in a camp for internally displaced persons in Kabul

MAJOR PUBLIC HEALTH RISKS AND CHALLENGES:

- ◆ CCHF outbreaks reported from Herat, Badghis, Balkh, Kabul and Nangarhar require a strongly coordinated response from MoPH, the Ministry of Agriculture and health cluster partners
- ◆ Diagnosis of the second cholera case for 2015 from Nangarhar province should be taken seriously—Nangarhar should be prepared for facing cholera outbreaks
- ◆ New confirmed polio cases reported from Nangarhar (2) and Nimroz (1) provinces in August 2015 should be considered as a threat to polio eradication efforts in Afghanistan
- ◆ Continuing blast incidents in and around Kabul and neighboring provinces restricted the movement and work of humanitarian agencies during early August

KEY MESSAGES:

- ◆ Eid al-Adha, "festival of the sacrifice", will be celebrated in September—people will slaughter a large number of animals, mainly sheep and goats, which might increase the risk of the spread of CCHF infection in high-risk districts of Herat and Nangarhar
- ◆ CCHF outbreaks constitute a threat to public health services because of its epidemic potential, its high case fatality ratio (10–40%), its potential for nosocomial outbreaks and the difficulties in treatment and prevention
- ◆ The public needs to be aware of CCHF risks—it is advised that animals are sprayed with Deltamethrin 5% or Alphacypermethrin 5% or Cyfluthrin or Cypermethrin and quarantined for two weeks prior to slaughter



CCHF spreads to humans either by tick-bites, or through contact with viraemic animal tissues during and immediately post-slaughter



An explosion 400 meters away from the provincial hospital in Puli Alam in Logar caused injuries for seven hospital staff and severely damaged the building. WHO supported the renovation of the hospital and provided necessary medical and non-medical supplies.

Programme Update
Emergency Humanitarian Action WHO Afghanistan

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