World Health Organization
Afghanistan

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INFECTIOUS DISEASE OUTBREAKS
SITUATION REPORT | Epidemiological week #38-2025

No. 38 (14- 20 Sep 2025)

Disease Outbreaks	AWD with dehydration	Measles (Suspected)	CCHF (Suspected)	Dengue fever (Suspected)	Malaria (Confirmed)	COVID-19 (Confirmed)
Cumulative cases 2025	129,325	89,855	1,274	1,461	53,288	3,653
Cumulative deaths 2025 (CFR %)	64 (0.05)	528 (0.6)	91 (7.1)	0 (0.0)	0 (0.0)	5 (0.1)

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

Acute Watery Diarrhea (AWD) with Dehydration

(29 Dec 2024-20 Sep 2025)

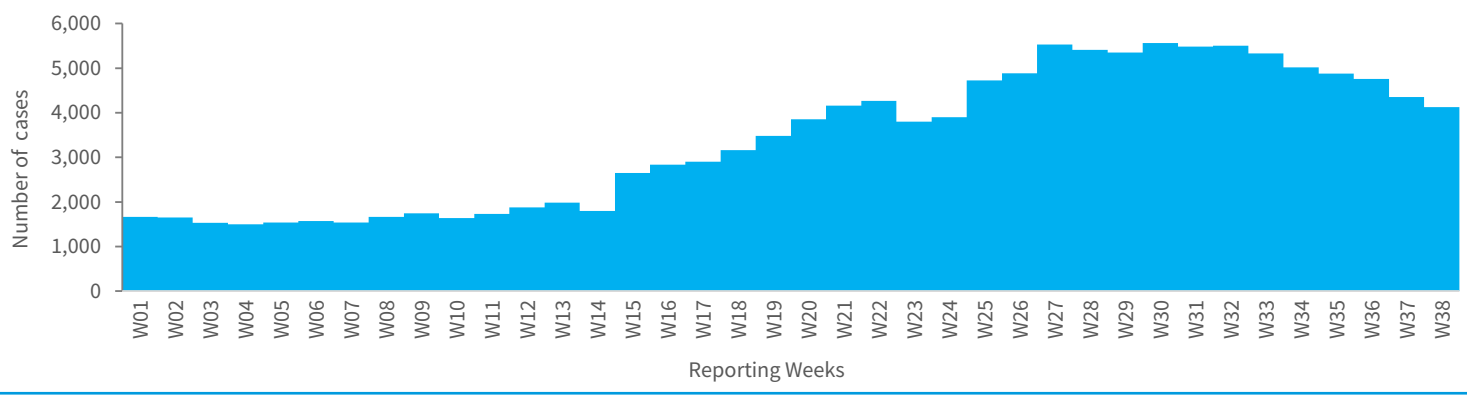
129,325	64	9,199	1,132	12.3%
Total cases	Total deaths	Samples tested (RDTs)	RDT-positive cases	RDT positivity rate

Table 1: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (27 Jul - 20 Sep 2025)

Indicators	W31	W32	W33	W34	W35	W36	W37	W38	Trend line
Number of cases	5,480	5,503	5,331	5,015	4,874	4,760	4,354	4,126	
Number of deaths	4	2	2	5	2	4	2	1	
CFR (%)	0.07	0.04	0.04	0.10	0.04	0.08	0.05	0.02	

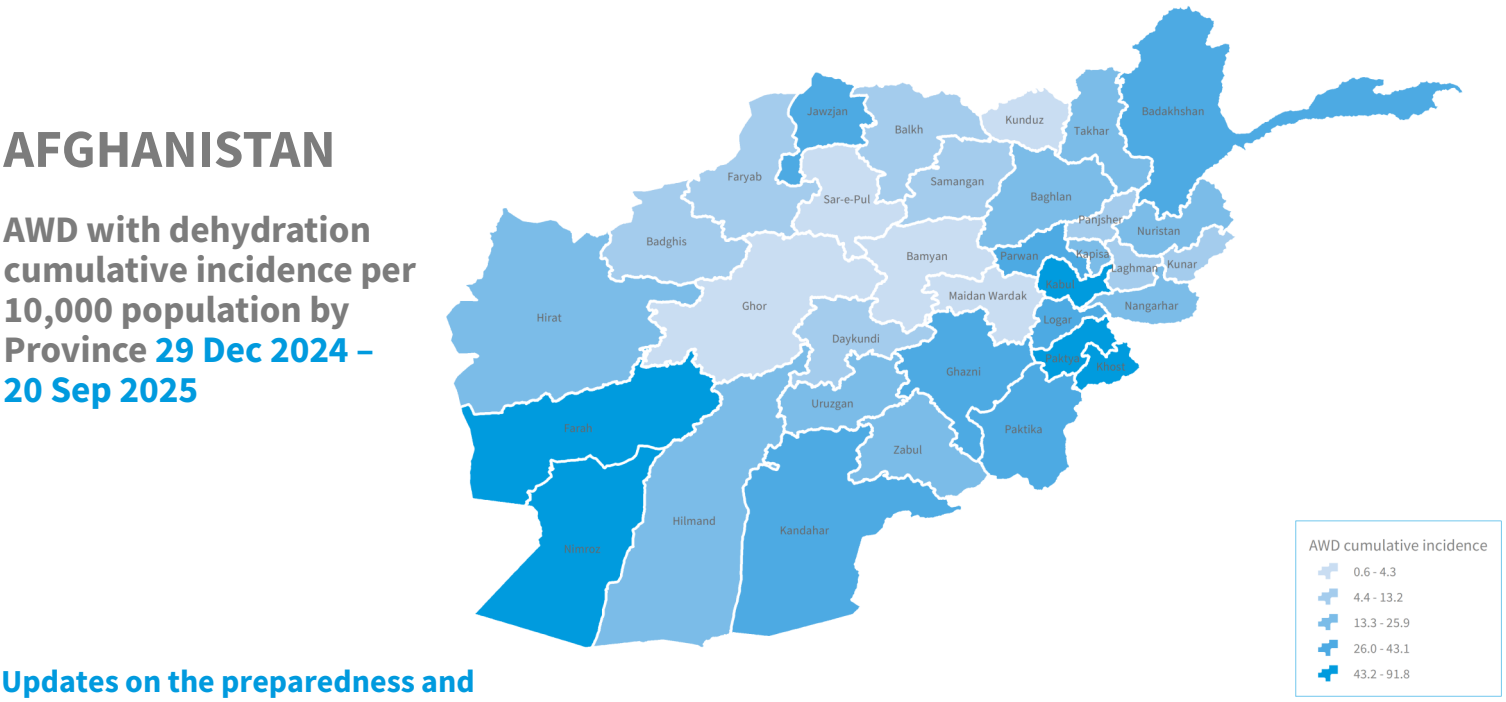
- The epidemiological curve has shown a gradual decreasing trend since week 30-2025 (Figure 1).
- There is an ongoing AWD with a dehydration outbreak in central region (Parwan and Kapisa) with a total of 1,899 suspected cases and 6 deaths (CFR 0.3%).
  - Parwan province: Since its start on 10 July 2025, a total of 1,526 cases have been reported across nine districts. Of the 645 RDTs conducted, 220 were confirmed positive, yielding a positivity rate of 34.1%. Three deaths have been recorded, (CFR 0.2%). The epidemic curve indicates a declining trend since 20 September 2025.
  - Kapisa Province: Since its start on 02 August 2025, a total of 373 cases have been reported across 7 districts. Of the 372 RDTs conducted, 187 were confirmed positive, yielding a positivity rate of 50.3%. Three deaths have been recorded, (CFR 0.8%). The epidemic curve shows fluctuations, with a daily average of 9 for the past 7 days.

Figure 1. Weekly distribution of AWD with dehydration cases in Afghanistan 29 Dec 2024–20 Sep 2025 (N=125,199)



- During week 38-2025, a total of 4,126 AWD with dehydration cases, with 1 associated death (CFR 0.02%), were reported from 200 districts. This shows an 5.2% decrease in the number of cases compared to the previous week.
- The new death was under five female, from Baghlan province.
- Out of the 4,126 AWD with dehydration cases, 2,067 (50.1%) were females and 2,271 (55.0%) were under-five children.
- During week 38-2025, no new districts reported alert of AWD with dehydration.
- Since Jan 2025, 129,325 cases of AWD with dehydration, with 64 associated deaths (CFR 0.05%) were reported from 347 districts. Out of total cases, 64,096 (49.6%) were females, while 73,405 (56.8%) were under-five children.
- Since Jan 2025, a total of 9,199 Rapid Diagnostic Tests (RDT) have been conducted among AWD with dehydration cases, of which 1,132 tests turned positive (positivity rate 12.3%).
- Since the beginning of 2025, the highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Paktya (91.8), followed by Nimroz (78.2), Kabul (66.9), Farah (63.0), and Khost (62.0) (Figure 2).

Figure 2. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024-20 Sep 2025



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

Since the beginning of 2025, the following activities have been conducted as part of AWD with dehydration outbreak response activity:

- WHO supplied 425 AWD with dehydration case management kits to all 34 province as part of the response to AWD with dehydration outbreak.
- WHO distributed 30,000 IEC materials on AWD with dehydration to East region and Parwan province to raise awareness on recognizing early symptoms, practicing good hygiene and sanitation, and ensuring safe water and food handling.
- 1,012 kits of Cary Blairs and 1,330 kits of Rapid Diagnostic Test (RDTs) have been distributed to all 34 provinces.
- 873 boxes of PPE (gloves, masks…) have been distributed to NDSR offices of 34 provinces.
- A total of 149 HCWs have been trained in AWD with dehydration case management in Parwan (60 HCWs including 17 females), Kapisa (30 HCWs including 12 females), and East and South regions (59 HCWs including 7 females).
- WHO trained and deployed 20 social mobilizers (including 7 females) to 5 high-risk districts of Parwan province (Chaharikar, Bagram, Jabulseraj, Shinwari, and Said Khail) for RCCE activities as part of the response to AWD with dehydration outbreak. The team reached to 50,328 [including 16,621 (33.0%) females] individuals.

WASH update:

In August 2025, the following WASH response activities were implemented by WASH Cluster partners:

- A total of 29,480 individuals from 6 provinces (Parwan, Paktika, Kapisa, Nimroz, Kabul and Nangarhar) participated in hygiene promotion sessions.
- Distribution of Aqua Tabs, chlorine, and PUR water purification sachets in Baghlan to 6,040 individuals.
- Distribution of hand-washing soap in four provinces (Parwan, Kapisa, Paktika, and Kabul) to 9,528 individuals.
- Construction and rehabilitation of deep boreholes equipped with solar-powered piped systems in Nangarhar and Parwan provinces provided safe drinking water to around 16,963 individuals.

Measles

(29 Dec 2024-20 Sep 2025)

89,855	528	10,882	6,572	60.4%
Total Cases	Total Deaths	Sample tested	Lab confirmed cases	Test positivity rate

Table 2: Summary of the measles outbreak in the last eight weeks in Afghanistan (27 Jul - 20 Sep 2025)

Indicators	W31	W32	W33	W34	W35	W36	W37	W38	Trend line
Suspected cases	1,557	1,405	1,344	1,205	1,040	969	858	861	
Suspected deaths	6	4	6	5	2	1	4	3	
CFR (%)	0.4	0.3	0.4	0.4	0.2	0.1	0.5	0.3	

- The epi curve of suspected measles cases shows a decreasing trend since week 20-2025 (Figure 3). The trend in 2025 is slightly higher than the 3-year average (2022-2024) but follows a similar pattern (Figure 4).
- During week 38-2025, a total of 861 suspected cases and 3 associated deaths (CFR 0.3%) were reported, which shows a stabilization in the number of suspected cases compared to the preceding week.
- Out of the total 861 cases, 414 (48.1%) were females and 676 (78.5%) were under-five children.
- All 3 new deaths were under-five-year-old, while 2 of them were females and reported from 3 provinces: Kandahar, Khost, and Kunduz.
- Since the beginning of 2025, 89,855 suspected measles cases and 528 associated deaths (CFR 0.6%) were reported. Out of total cases, 42,216 (47.0%) were females, while 69,180 (77.0%) were under-five children.

Figure 3. Weekly distribution of suspected measles cases in Afghanistan, 29 Dec 2024-20 Sep 2025 (N= 89,855)

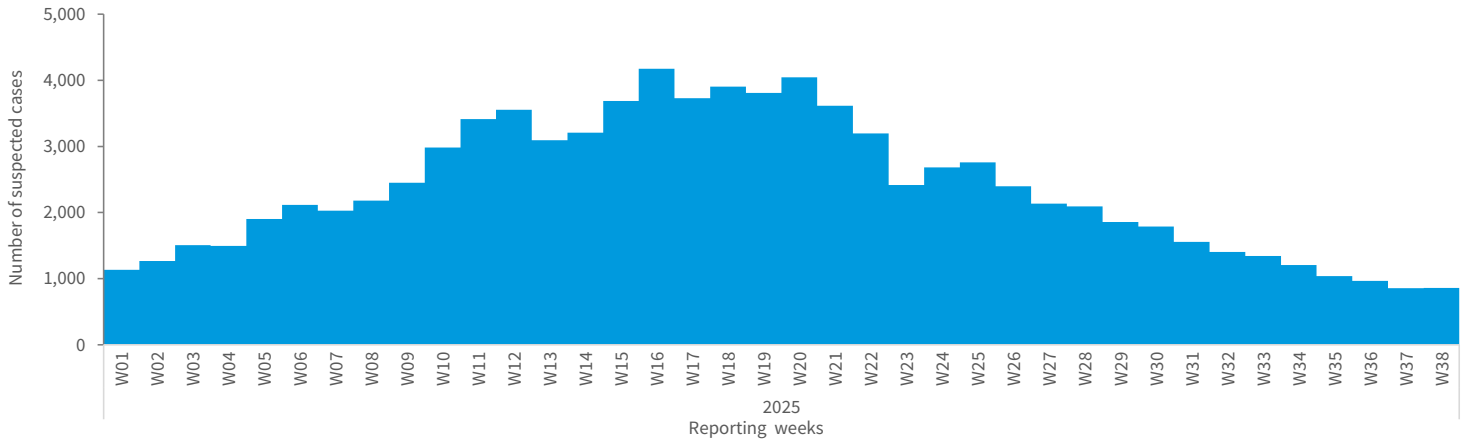
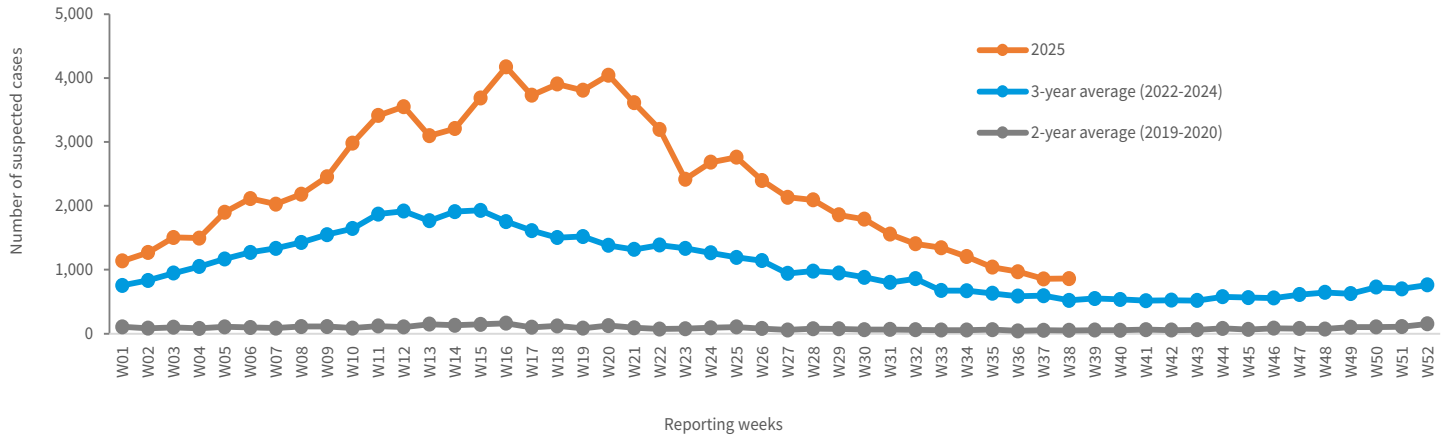


Figure 4. Comparison between the trends of suspected measles cases in 2025 vs 3-year average (2022-2024) and the endemic level



- Since the beginning of 2025, the highest cumulative incidence of suspected measles cases per 10,000 population has been reported from Helmand (79.8), followed by Badakhshan (56.8), Jawzjan (47.2), Nuristan (43.2), and Urozgan (42.4) (Figure 5).

Figure 5. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 29 Dec 2024-20 Sep 2025

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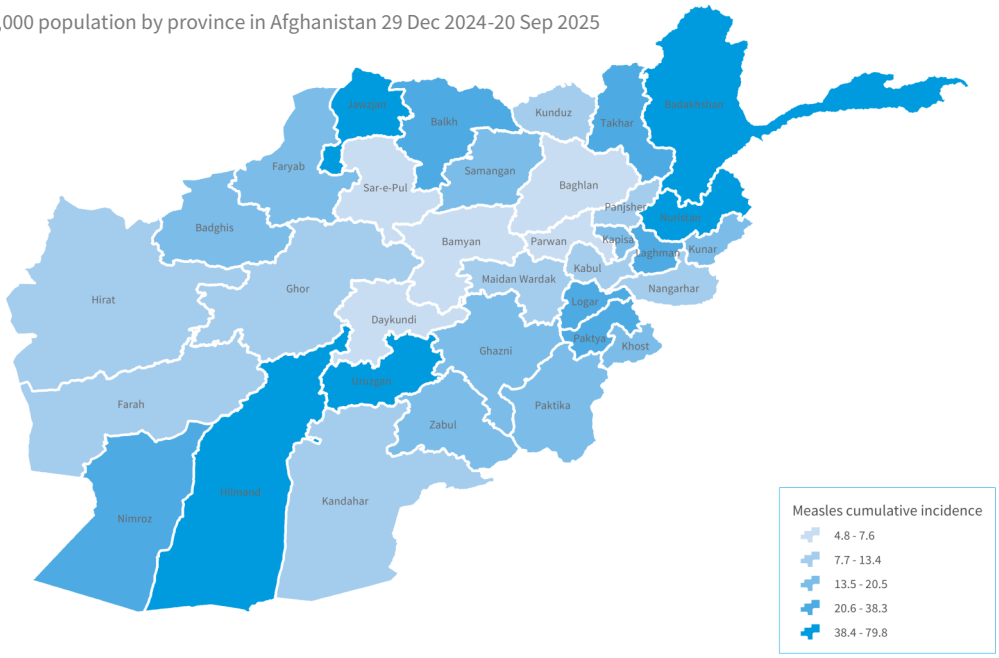
Suspected measles cumulative incidence per 10,000 population by province 29 Dec 2024 – 20 Sep 2025



Updates on the preparedness and response to the measles outbreak

- During week 38-2025, a total of 126 children aged 9-59 months were vaccinated against measles as part of the outbreak response in 4 provinces (Urozgan, Zabul, Paktya, and Laghman). This brings the number of children aged 9-59 months vaccinated against measles as part of outbreak response immunization activities to 26,506 across the country since the beginning of 2025.
- Since the beginning of 2025, the following activities have been conducted to address the measles outbreak:
  - A total of 345 measles case management kits have been distributed to 8 WHO's regional sub-offices across the country.
  - A total of 257 Health Care Workers (HCWs) including 62 females have been trained in measles case management from 7 regions: Central (68, including 10 females), West (40, including 20 females), North (30, including 9 females), East (30, including 9 females), South (29, all males), Northeast (30, including 9 females), and Southeast region (30, including 5 females).
  - An online measles awareness campaign has been conducted through the World Health Organization (WHO) official social media accounts (Facebook and X), reaching approximately 20,573 individuals.

Crimean Congo Hemorrhagic Fever (CCHF)

(29 Dec 2024-20 Sep 2025)

1,274 Total cases

91 Total deaths

983 Samples tested

332 Lab-confirmed CCHF cases

33.8% test positivity rate

Table 3: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (27 Jul - 20 Sep 2025)

Indicators	W31	W32	W33	W34	W35	W36	W37	W38	Trend line
Suspected cases	41	39	32	41	54	51	44	40	
Suspected deaths	2	3	4	6	3	0	1	1	
CFR (%)	4.9	7.7	12.5	14.6	5.6	0.0	2.3	2.5	

- The epi-curve of suspected CCHF cases shows a decreasing trend since its highest peak in week 25-2025 (Figures 6 & 7).
- During week 38-2025, 40 new suspected CCHF cases with one associated death (CFR 2.5%) were reported (Table 3).
- The newly reported death is a male, over five years of age, from Kandahar province.
- All newly reported cases were among individuals aged over five years, of whom 6 (15.0%) were females.
- Since the beginning of 2025, a total of 1,274 suspected CCHF cases, with 91 associated deaths (CFR 7.1%), were reported. Most of the reported cases (1,269, 99.6%) were aged over five years, and 400 (31.4%) were females. A total of 983 samples were tested, of which 332 were positive, yielding a positivity rate of 33.8%.
- Since the beginning of 2025, the highest cumulative incidence of suspected CCHF per 100,000 population is reported from Kabul (8.7), followed by Kapisa (8.7), Balkh (6.4), Kandahar (5.4), and Kunduz (4.9) (Figure 8).

Figure 6: Weekly distribution of suspected CCHF cases in Afghanistan 29 Dec 2024-20 Sep 2025, (N=1,274)

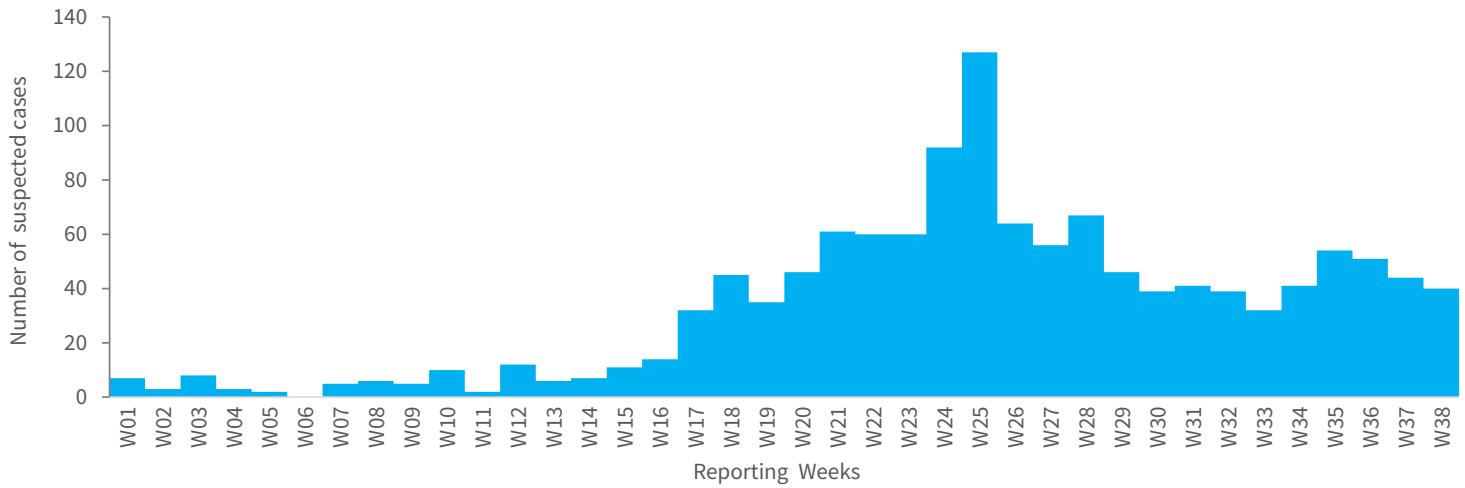
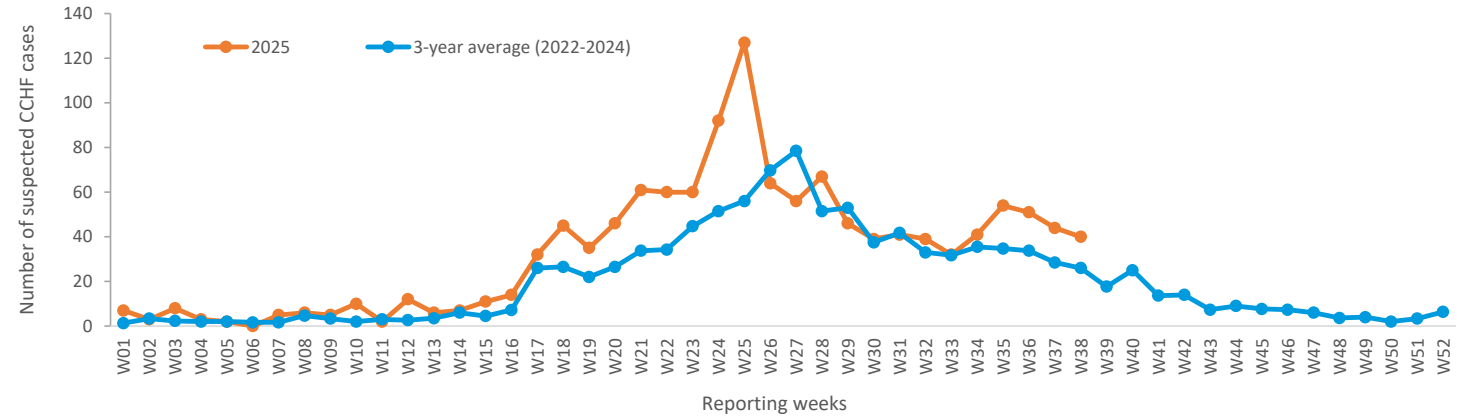


Figure 7. Comparison between the trends of suspected CCHF cases in 2025 vs 3-year average (2022-2024)



Updates on the response to the CCHF outbreak

Since the beginning of 2025, the following activities have been conducted as part of outbreak preparedness activities:

- A total of 27 packs of vial ceftriaxone 250mg (10 vials per pack), 100 vials of Vancomycin 500mg, and 80 packs of ribavirin injections (10 ampoules per pack) have been distributed to 5 WHO regional sub-offices (Herat, Nangarhar, Balkh, Kunduz, and Kandahar).
- Online awareness campaigns on Crimean-Congo Hemorrhagic Fever (CCHF) have been conducted by WHO through its official social media channels (Facebook and X), reaching over 35,967 in X and 1,762 Facebook users to date. The campaigns focused on increasing public awareness and promoting preventive measures against CCHF.
- Distribution of 13,700 IEC materials on CCHF (5,900 brochures and 7,800 posters) to all sub-offices across the country.
- Training of 66 HCWs (7 females) on CCHF case management.
- Training of 31 laboratory technicians, including 4 females, from 8 laboratories on the diagnosis of CCHF, dengue fever, and mpox.

Figure 8. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 29 Dec 2024-20 Sep 2025

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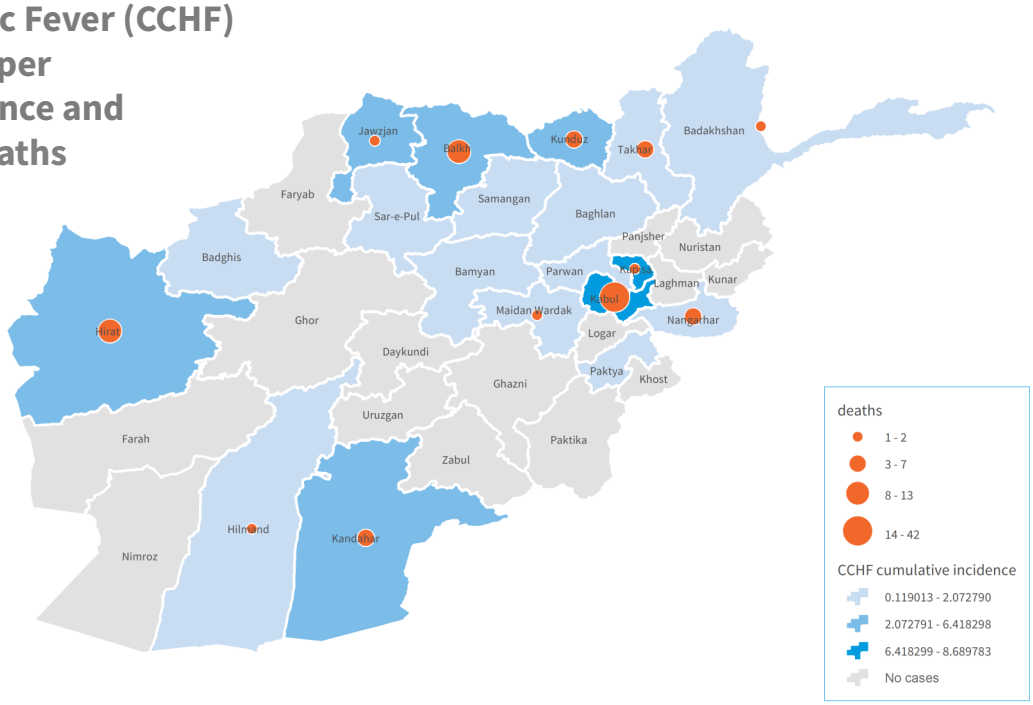
Crimean-Congo Hemorrhagic Fever (CCHF) Cases cumulative incidence per 100,000 population by province and provincial distribution of deaths

29 Dec 2024-20 Sep 2025



Dengue Fever

(29 Dec 2024-20 Sep 2025)

1,461 Total Cases

0 Total Deaths

221 *Sample tested

217 By PCR | 4 By NS1

26 Lab confirmed cases

22 By PCR | 4 By NS1

11.8% Test positivity ratio

Table 4: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (27 Jul - 20 Sep 2025)

Indicators	W31	W32	W33	W34	W35	W36	W37	W38	Trend line
Suspected cases	80	76	76	52	69	65	63	93	
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 has recorded an increase this week that requires close monitoring (Figures 9 & 10).
- During week 38-2025, 93 suspected cases of dengue fever with no associated deaths were reported from 2 provinces [Nangarhar (92) and Laghman (1)], which shows a 47.6% increase in the number of cases compared to the preceding week.
- Out of the total 93 cases, 28 (30.1%) were females, while 90 (96.8%) were over five years old.
- Since the beginning of 2025, 1,461 suspected dengue fever cases, with no associated deaths, were reported from 6 provinces (Nangarhar, Laghman, Kunar, Kabul, Ghazni, and Paktya). Out of total cases, 1,408 (96.4%) were over five years old, while 605 (41.4%) were females.
- Since the beginning of 2025, a total of 221 samples have been tested, out of which 26 were positive (positivity rate 11.8%). The geographical distribution of suspected dengue fever cases at district levels in the East region provinces is shown in Figure 11.

**Note: Dengue fever laboratory data were 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 https://cdn.who.int/media/docs/default-source/outbreak-toolkit/dengue--outbreak-toolbox_20220921.pdf?sfvrsn=29de0271_2*

Figure 9. Weekly distribution of suspected dengue fever cases in Afghanistan 29 Dec 2024-20 Sep 2025, (N=1,461)

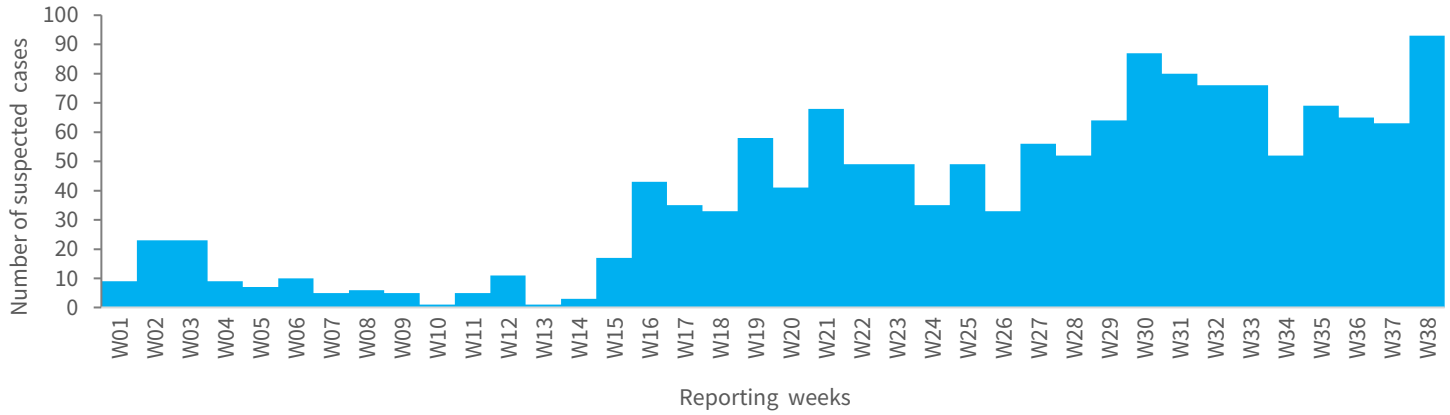


Figure 10. Comparison between the trends of suspected dengue fever cases in 2025 vs 3-year average (2022-2024)

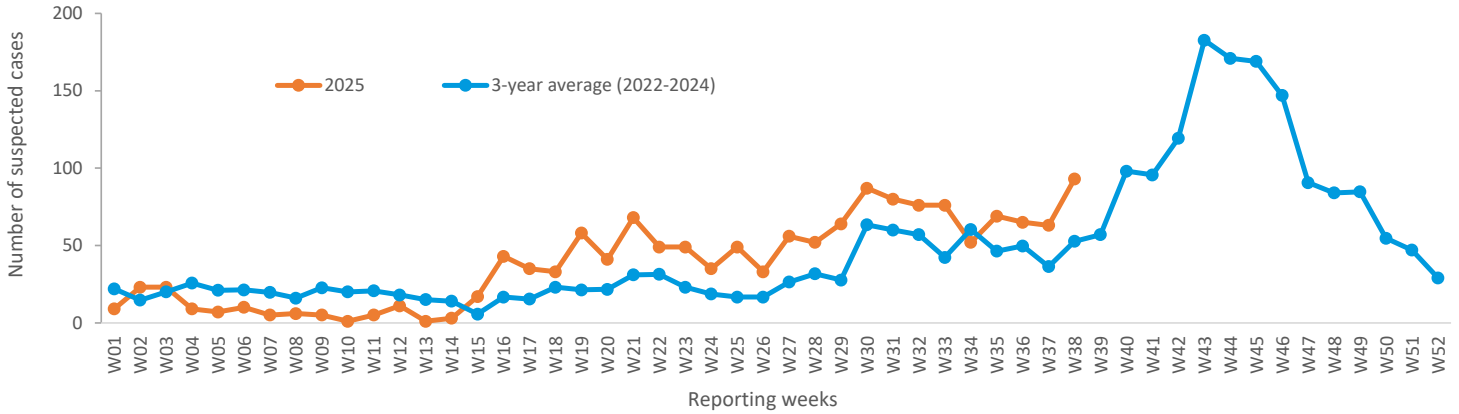
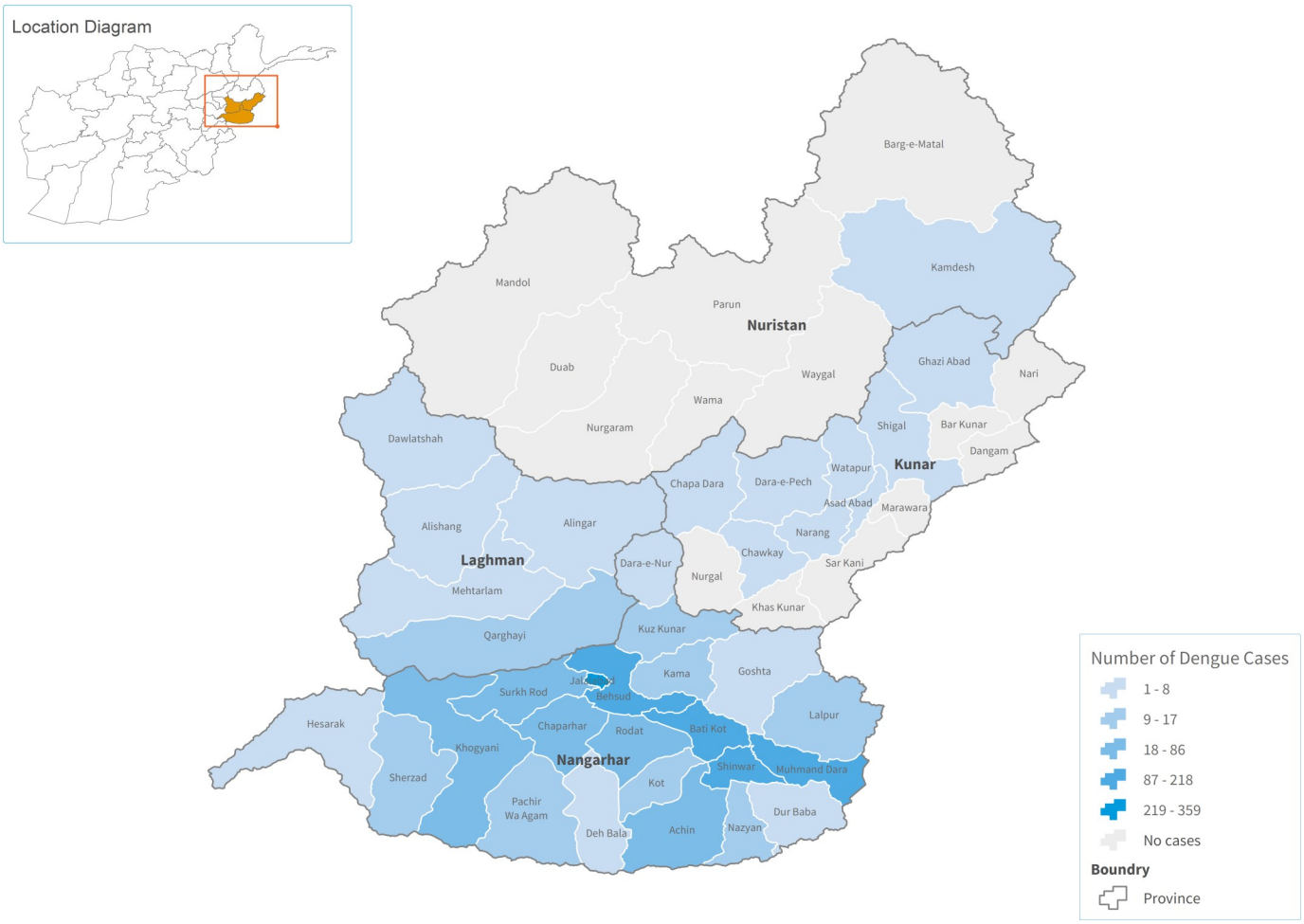


Figure 11. Geographical distribution of suspected dengue fever cases at district levels in East region provinces, 29 Dec 2024-20 Sep 2025



Updates on the response to dengue fever outbreak

- Since the beginning of 2025, a total of 350 kits (10 tests per kit) of dengue fever RDTs have been distributed to 6 provinces (Nangarhar, Kunar, Laghman, Nuristan, Kandahar, and Ghazni).

Confirmed Malaria

(29 Dec 2024-20 Sep 2025)

53,288
Total Malaria Cases

0 (0.0)
Total malaria deaths (CFR %)

Table 5: Summary of the malaria outbreak in the last eight weeks in Afghanistan (27 Jul - 20 Sep 2025)

Indicators	W31	W32	W33	W34	W35	W36	W37	W38	Trend line
Confirmed cases	2,404	3,200	3,316	2,966	3,436	4,032	4,376	4,480	
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 confirmed malaria cases shows a gradual increase since week 15-2025, with a sharp rise observed over the past four weeks. The trend in 2025 is slightly higher than the 3-year average (2022-2024) since week 25-2025 (Figures 12 & 13).
- During week 38-2025, 4,480 confirmed cases with no associated deaths were reported from 20 provinces, which shows a slight increase in the number of cases compared to the previous week.
- Out of the 4,480 cases, 2,138 (47.7%) were females and 841 (18.8%) were under-five children.
- Since the beginning of 2025, 53,288 confirmed malaria cases with no associated deaths have been reported. Out of total cases, 24,731 (46.4%) were females and 9,360 (17.6%) were under-five children.
- Since the beginning of 2025, the highest cumulative incidence of malaria per 10,000 population was reported from Nuristan (191.7), followed by Kunar (186.7), Laghman (117.5), and Nangarhar (81.1) (Figure 14).

Figure 12. Weekly distribution of malaria cases in Afghanistan 29 Dec 2024-20 Sep 2025 (N=53,288)

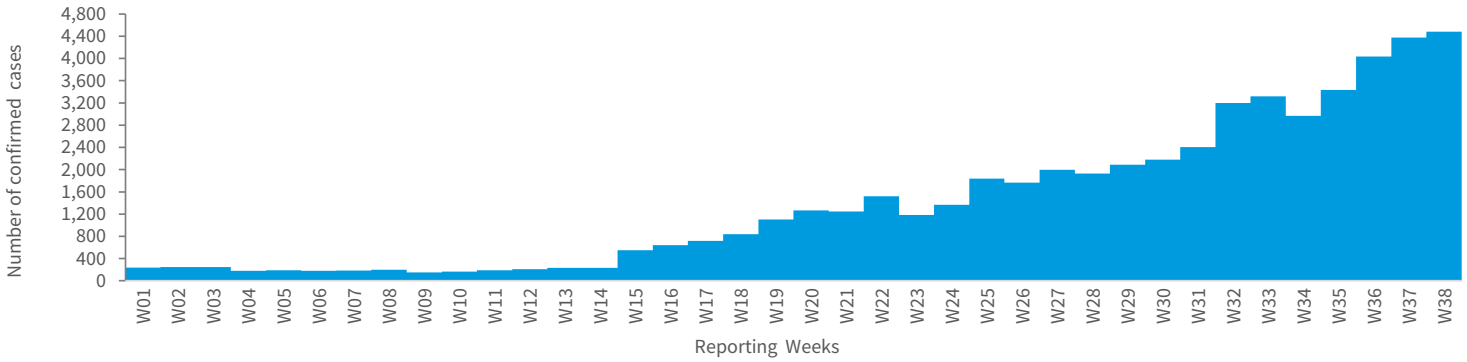


Figure 13. Comparison between the trends of malaria cases in 2025 vs 3-year average (2022-2024)

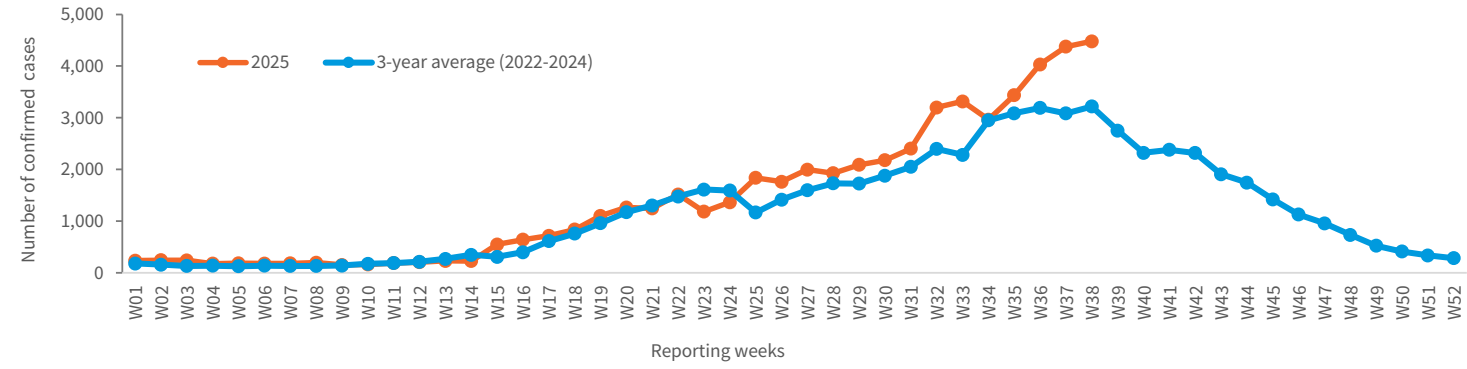


Figure 14. Malaria cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024-20 Sep 2025

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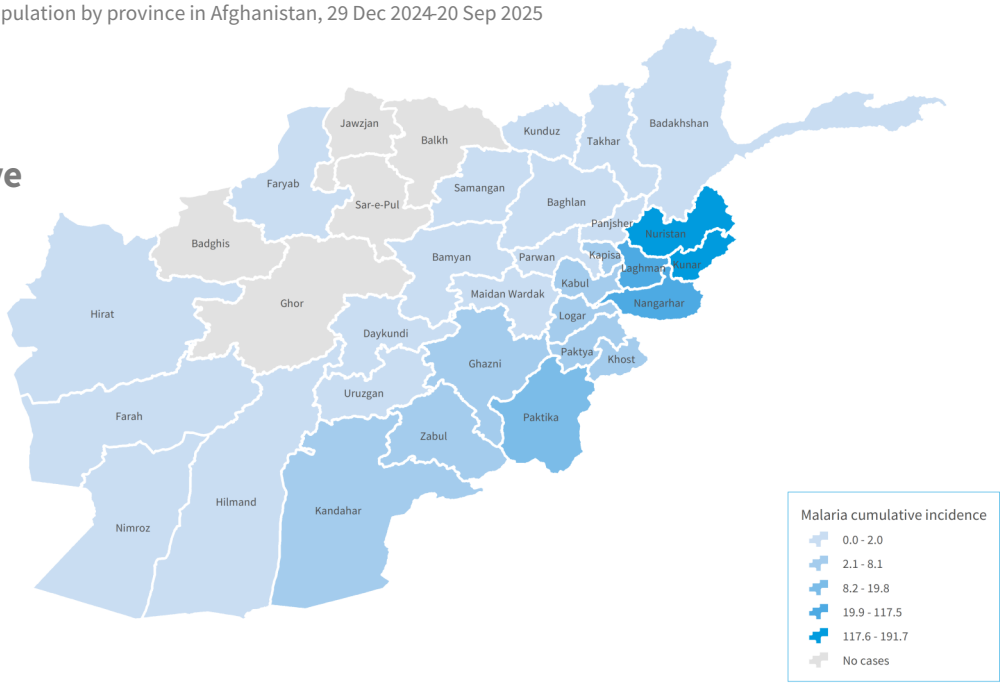
Confirmed malaria cumulative Incidence per 10,000 population by province

29 Dec 2024 – 20 Sep 2025



COVID-19

(29 Dec 2024-20 Sep 2025)

Cumulative samples tested
42,975
In public laboratories

New samples tested in week 38
386
In public laboratories
-16.6%

Cumulative confirmed cases
3,653
Cumulative positivity rate (8.5%)

New confirmed cases in week 38
21
Weekly positivity rate (5.4%)
-43.2%

Cumulative confirmed deaths
5
CFR (0.1%)

New confirmed deaths in week 38
0
Week 38 CFR (0.0%)
0.0%

Key: Increasing Decreasing No change

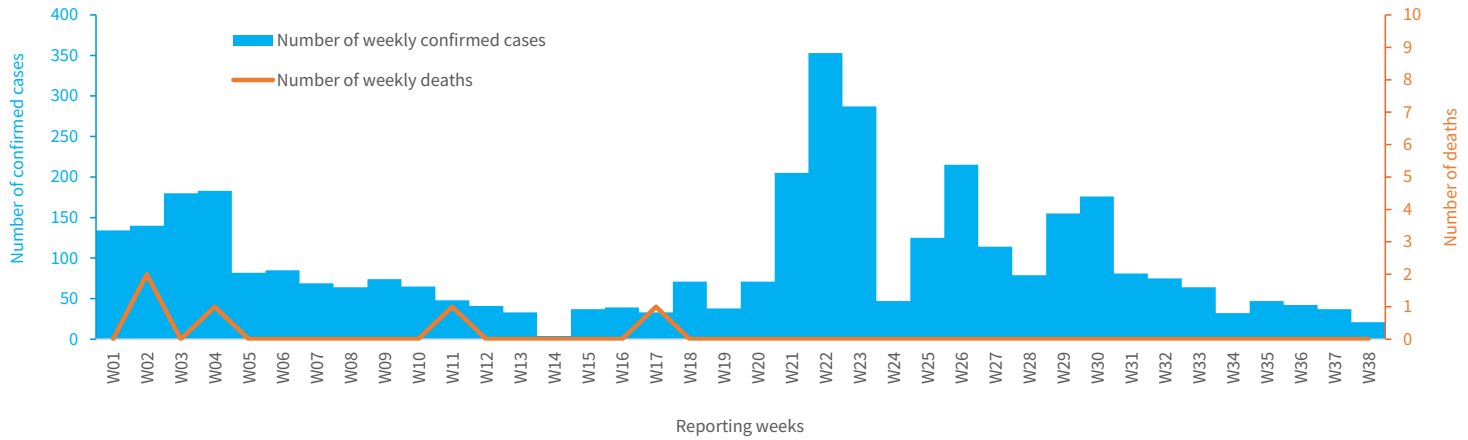
Table 6: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (27 Jul - 20 Sep 2025)

Indicators	W31	W32	W33	W34	W35	W36	W37	W38	Trend line
Samples tested (in public Labs)	669	551	535	525	690	511	463 *	386	
Confirmed cases	81	75	64	32	47	42	37 *	21	
Percent positivity (%)	12.1	13.6	12.0	6.1	6.8	8.2	8.0	5.4	
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	

**A delayed reporting was experienced during week 37-2025, and the number of samples tested and confirmed cases were modified from 437 to 463 and from 34 to 37, respectively.*

- The epidemiological curve of confirmed COVID-19 cases indicates a decreasing trend since week 23-2025 (Figure 15).
- During week 38-2025, a total of 386 samples were tested in public labs, of which 21 were positive for COVID-19 (positivity rate 5.4%), with no reported deaths (Table 6). This represents a 43.2% decrease in the number of confirmed cases compared to the previous week.
- Since the beginning of 2025, 3,653 confirmed cases of COVID-19 and 5 associated deaths (CFR 0.1%) were reported. Out of the total cases, 1,764 (48.3%) were females.

Figure 15. Weekly distribution of confirmed COVID-19 cases and deaths in Afghanistan 29 Dec 2024-20 Sep 2025 (cases=3,653, deaths=5)



Updates on the response activities to the COVID-19 outbreak

Since the beginning of 2025:

- A total of 5,955 kits of Covid-19 Rapid Diagnostic Test (RDT) have been distributed to all 34 provinces.
- 850 kits of Viral Transport Medium (VTM) have been distributed to all 34 provinces.
- WHO has carried out an awareness campaign on COVID-19 prevention through WHO's official social media platforms (Facebook and X), reaching over 100,000 individuals.

Note: MOPH is the source of epidemiological data

Case definition & alert/outbreak thresholds

Contact us for further information:

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