










AFGHANISTAN

INFECTIOUS DISEASE OUTBREAKS

SITUATION REPORT | Epidemiological week #48-2025

No. 48 (23 - 29 Nov 2025)

Disease Outbreaks	 Dengue fever (Suspected)	 ARI-Pneumonia	 Measles (Suspected)	 COVID-19 (Confirmed)	 AWD with dehydration	 Malaria (Confirmed)	 CCHF (Suspected)
Cumulative cases 2025	5,828	1,300,544	96,554	4,136	158,219	77,303	1,468
Cumulative deaths 2025 (CFR %)	3 (0.05)	2,693 (0.2)	546 (0.6)	5 (0.1)	77 (0.05)	0 (0.0)	101 (6.9)

Data from 607 (99.0%) out of 613 sentinel sites

Dengue Fever

(29 Dec 2024-29 Nov 2025)



5,828
Total Cases



3
Total Deaths

1,795
*Sample tested

1,791 4
By PCR By NS1




1,418
Lab confirmed cases

1,414 4
By PCR By NS1



79.0%
Test positivity ratio

Table 1: Summary of the dengue fever outbreak in the last eight weeks in Afghanistan (05 Oct - 29 Nov 2025)

Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend line
Suspected cases	183	292	310	1056	918	679	476	284	
suspected deaths	0	0	0	0	0	0	3 *	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.6	0.0	

* A delayed reporting was experienced in the number of dengue fever associated deaths during week 47-2025, and the number of the deaths was modified from 0 to 3.

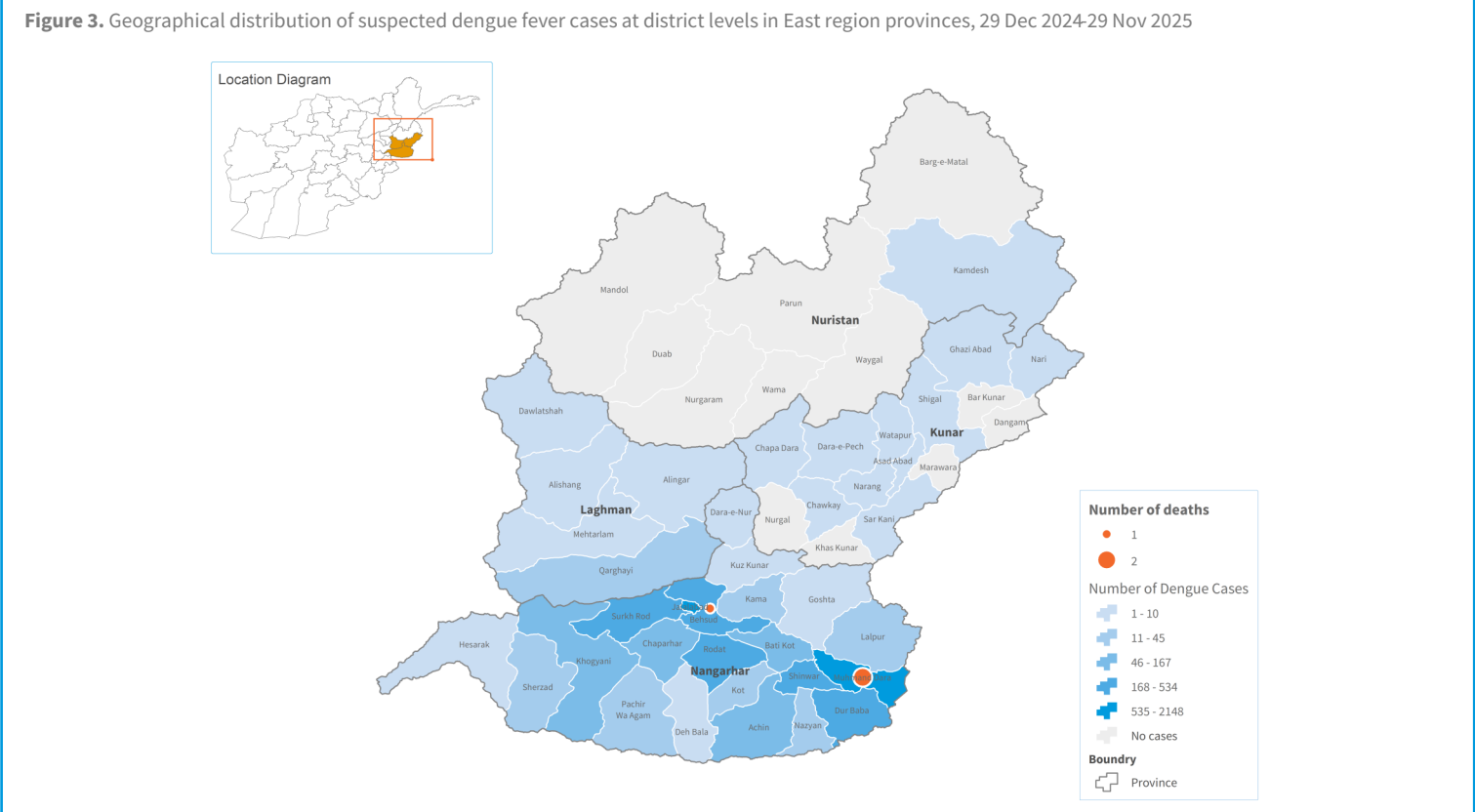
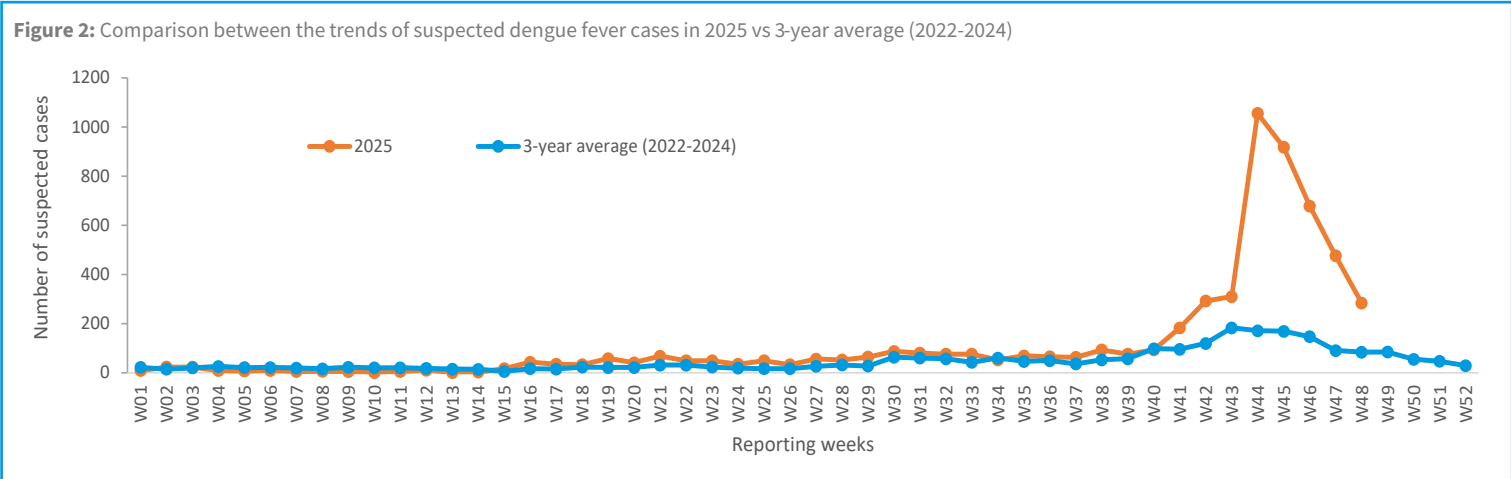
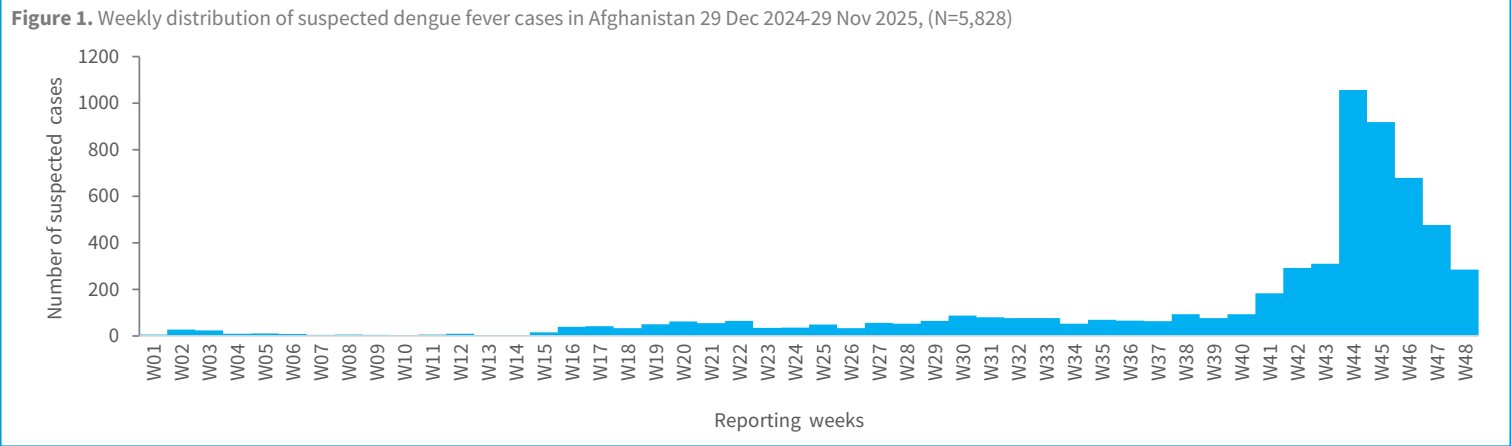
- The epi curve of suspected dengue fever cases shows a consistent decline for the past four weeks after reaching the peak at week 44-2025 with 1,056 suspected cases. The trend of suspected cases is much higher compared to the past three-year average (Figures 1 & 2).
- During week 48-2025, 284 suspected cases of dengue fever with no associated deaths were reported from Nangarhar province, which shows a 40.3% decrease in the number of suspected dengue fever cases compared to the preceding week.
- Out of the total 284 cases, 150 (52.8%) were females, while 278 (97.9%) were over five years old.
- Since the beginning of 2025, 5,828 suspected dengue fever cases, with 3 associated deaths (CFR 0.05%), have been reported from 6 provinces (Nangarhar, Laghman, Kunar, Kabul, Ghazni, and Paktya). Out of total cases, 5,702 (97.8%) were over five years old, while 2,329 (40.0%) were females.
- All 3 deaths were over five-year-old, while 2 (66.7%) were females reported from Nangarhar province.
- Since the beginning of 2025, a total of 1,795 samples have been tested, out of which 1,418 were positive (positivity rate 79.0%). The geographical distribution of suspected dengue fever cases at district levels in the East region provinces is shown in Figure 3.

Updates on the response to dengue fever outbreak

Since the beginning of 2025, the following activities have been conducted as part of the dengue fever outbreak response:


- A field mission has been conducted on second week of Nov 2025 to the dengue outbreak hotspot areas (Jalalabad city and Momandara district) for epidemiological investigation focusing on potential sources of infection. Key interventions include:
 - Distribution of 10 metric tons of supplies to Nangarhar IDH and Nangarhar Regional Hospital.

- Coordination with partners for vector control activities (fogging of hotspot areas with insecticides)
- Social mobilizers to be deployed to support the RCCE intervention.
- Distribution of 1,150 kits (10 tests per kit) of dengue fever RDTs 6 provinces (Nangarhar, Kunar, Laghman, Nuristan, Kandahar, and Ghazni).
- Training of 31 laboratory technicians, including 4 females, from 8 laboratories on the diagnosis of dengue fever.




ARI-Pneumonia

(29 Dec 2024-29 Nov 2025)




***1,300,544**

Total Cases




2,693

Total Deaths




****3,443**

Samples tested for influenza



****365**

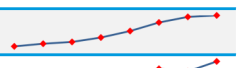


Lab-confirmed influenza cases



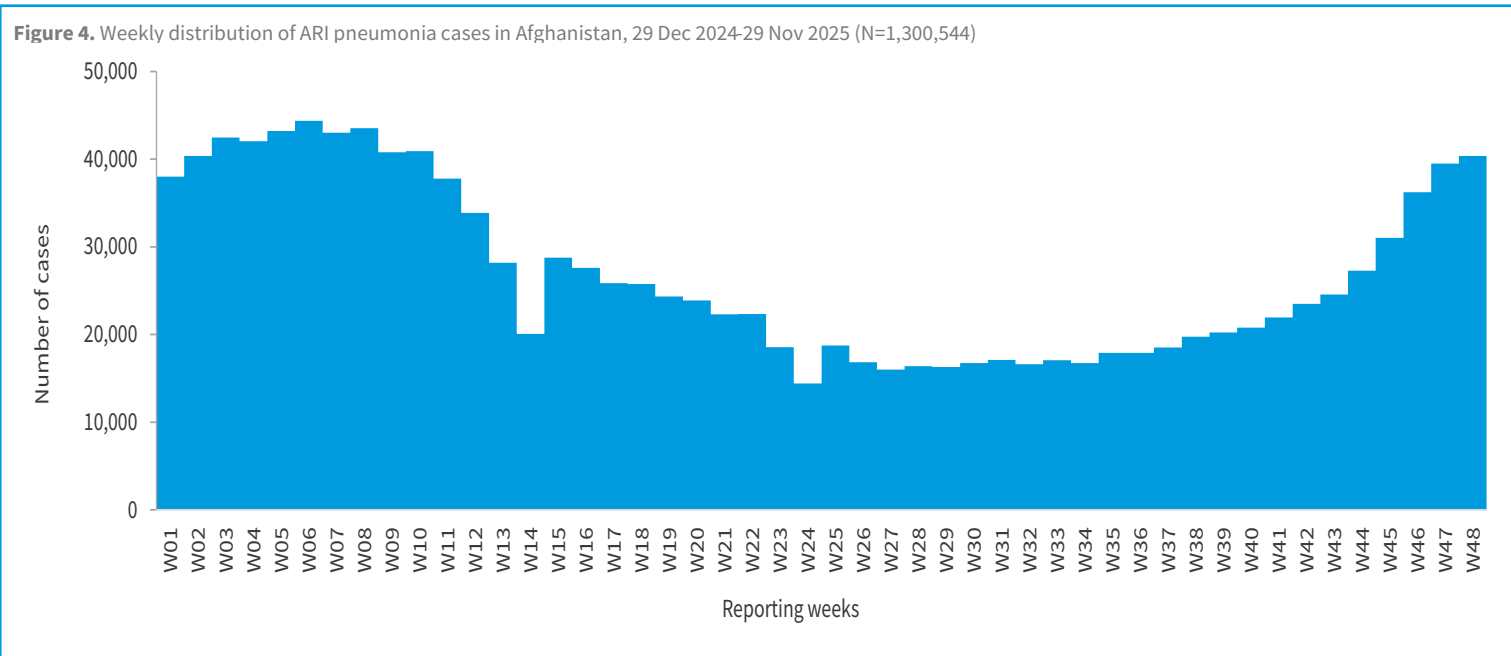
10.6%

Influenza test positivity ratio

Table 2: Summary of the ARI-Pneumonia outbreak in the last eight weeks in Afghanistan (05 Oct - 29 Nov 2025)

Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend lines
Suspected cases	21,957	23,510	24,558	27,288	31,035	36,241	39,488	40,374	
Suspected deaths	30	32	49	51	46	65	61	76	
CFR (%)	0.1	0.1	0.2	0.2	0.1	0.2	0.2	0.2	

- The epi curve indicates a gradual increasing trend in reported cases since week 28-2025; the trend in the last 4 weeks is slightly higher than the 3-year average (2022-2024) (Figures 4 & 5).
- During week 48-2025, 40,374 cases of ARI pneumonia and 76 associated deaths (CFR 0.2%) were reported, which shows a slight increase in the number of ARI pneumonia cases compared to the preceding week.
- Out of the total 40,374 cases, 20,295 (50.3%) were females, while 23,957 (59.3%) were under-five children.
- During the reporting period, 90 samples were collected for influenza, and 50 tested positive (positivity rate 55.6%).
- Since the beginning of 2025, 1,300,544 cases of ARI pneumonia and 2,693 associated deaths (CFR 0.2%) were reported. Out of total cases, 814,656 (62.6%) were under-five children, while 645,615 (49.6%) were females. Also, 3,443 samples have been tested for influenza, out of which 365 were positive (positivity rate 10.6%).
- Since the beginning of 2025, the highest cumulative incidence of ARI pneumonia per 10,000 population has been reported in Samangan (717.3), followed by Bamyán (681.7), Jawzjan (529.2), and Nuristan (497.0) (Figure 6).



Updates on the response activities to the ARI outbreak

- During week 48-2025, 110 HCWs including 32 females were trained on ARI/VPD case management in Notheast (30, including 9 females), West (50, including 23 females), and Southeast (30, all males) regions. This brings the total number of HCWs trained in ARI/VPD to 268 including 41 females in all regions across the country.
- Since the beginning of 2025, the following activities have been conducted as part of response to the ARI pneumonia outbreak:
 - A total of 305 pneumonia kits have been distributed to 34 provinces across the country.
 - 30 influenza assistants, including 8 females, trained on sample collection, storage, and shipment across the country.

Figure 5. Comparison between the trends of ARI pneumonia cases in 2025 vs 3-year average (2022-2024)

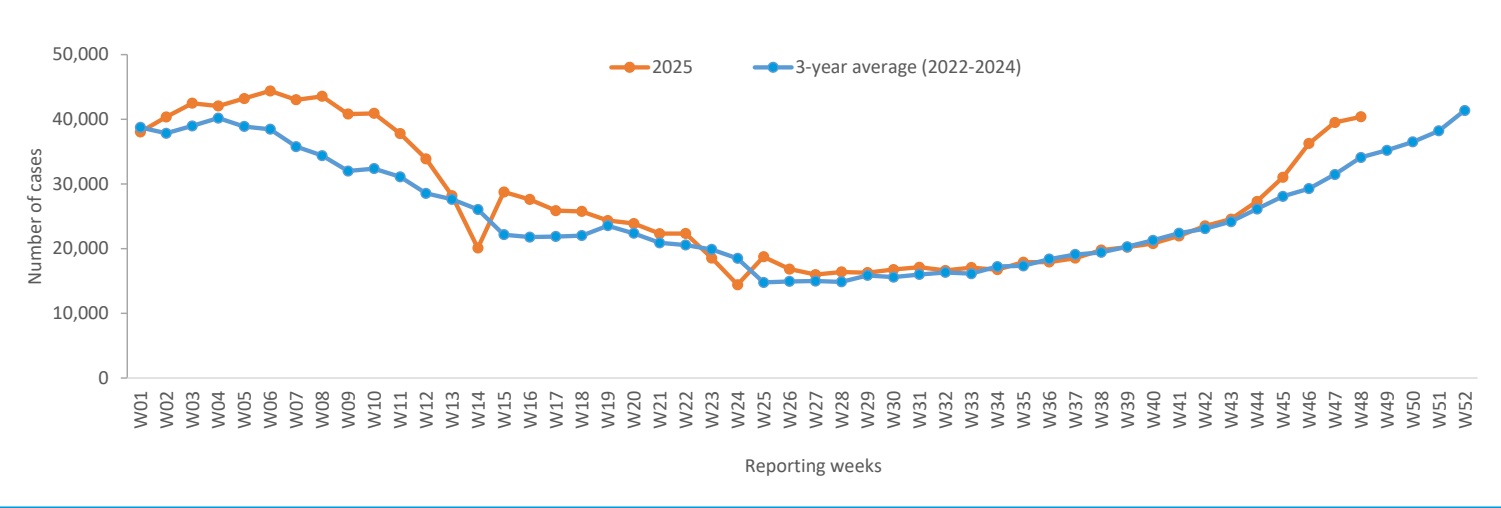
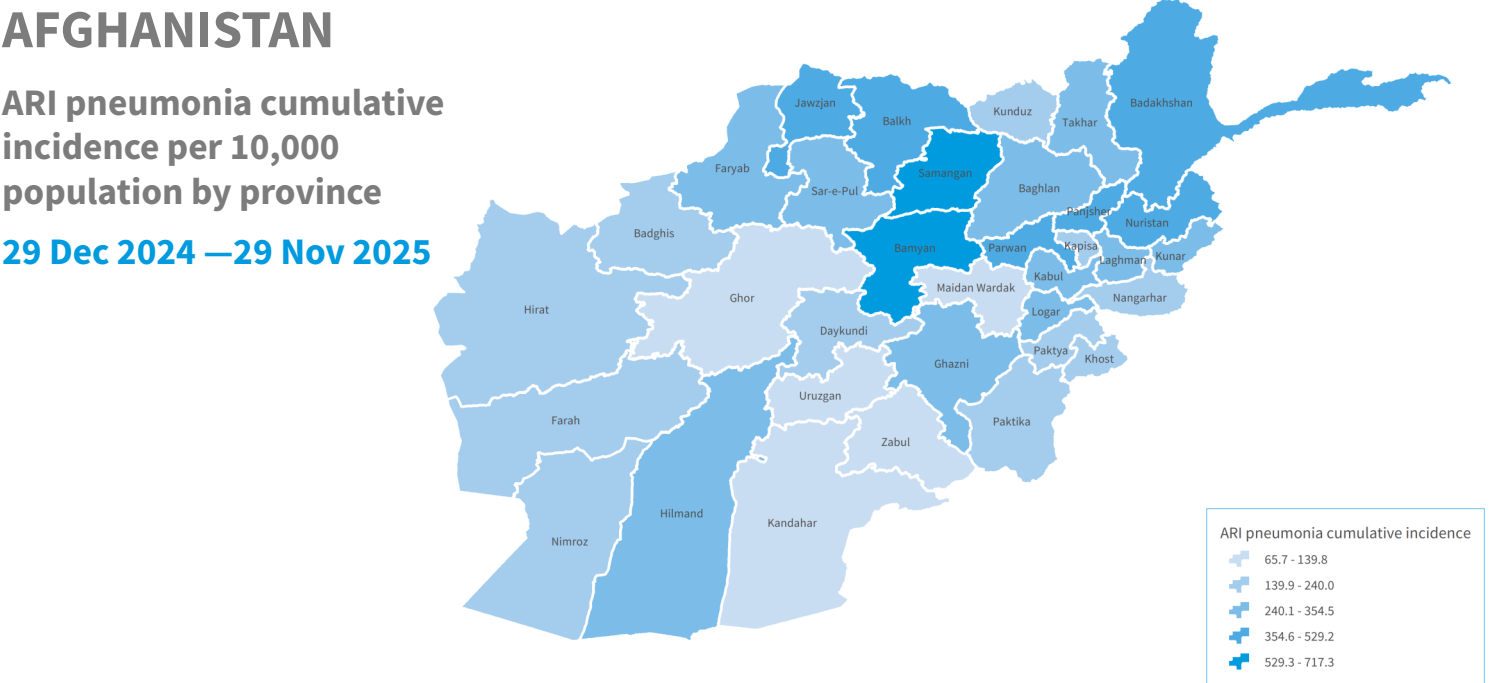



Figure 6. ARI-Pneumonia cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024-29 Nov 2025




Measles

(29 Dec 2024-29 Nov 2025)




96,554

Total Cases




546

Total Deaths




11,829

Sample tested



7,103




Lab confirmed cases



60.0%

Test positivity rate

Table 3: Summary of the measles outbreak in the last eight weeks in Afghanistan (05 Oct - 29 Nov 2025)

Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend line
Suspected cases	734	831	709	638	591	539	514	482	
Suspected deaths	1	1	0	1	2	4	2	3	
CFR (%)	0.1	0.1	0.0	0.2	0.3	0.7	0.4	0.6	

• The epi curve of suspected measles cases shows a significant decline since week 42-2025, which could be linked to the recently concluded nationwide measles immunization campaign (Figure 7). Since the beginning of 2025, the reported trend has been significantly higher compared to the previous three years. However, over the past six weeks, it has declined and is now following a similar, or even lower, trajectory (Figure 8).



- During week 48-2025, a total of 482 suspected cases with 3 associated deaths were reported (CFR 0.6%), which shows a 6.2% decrease in the number of suspected cases compared to the preceding week.
- All three newly reported deaths occurred among under-five male children, reported from three provinces (Helmand, Kabul, and Zabul).
- Out of the total 482 cases, 228 (47.3%) were females, and 381 (79.0%) were under-five children.
- Since the beginning of 2025, 96,554 suspected measles cases and 546 associated deaths (CFR 0.6%) were reported. Out of total cases, 45,354 (47.0%) were females, while 74,337 (77.0%) were children under five.
- Since the beginning of 2025, the highest cumulative incidence of suspected measles cases per 10,000 population has been reported from Helmand (68.7), followed by Badakhshan (49.8), Jawzjan (49.0), Urozgan (46.9), and Balkh (33.4) (Figure 9).

Figure 7. Weekly distribution of suspected measles cases in Afghanistan, 29 Dec 2024-29 Nov 2025 (N= 96,554)

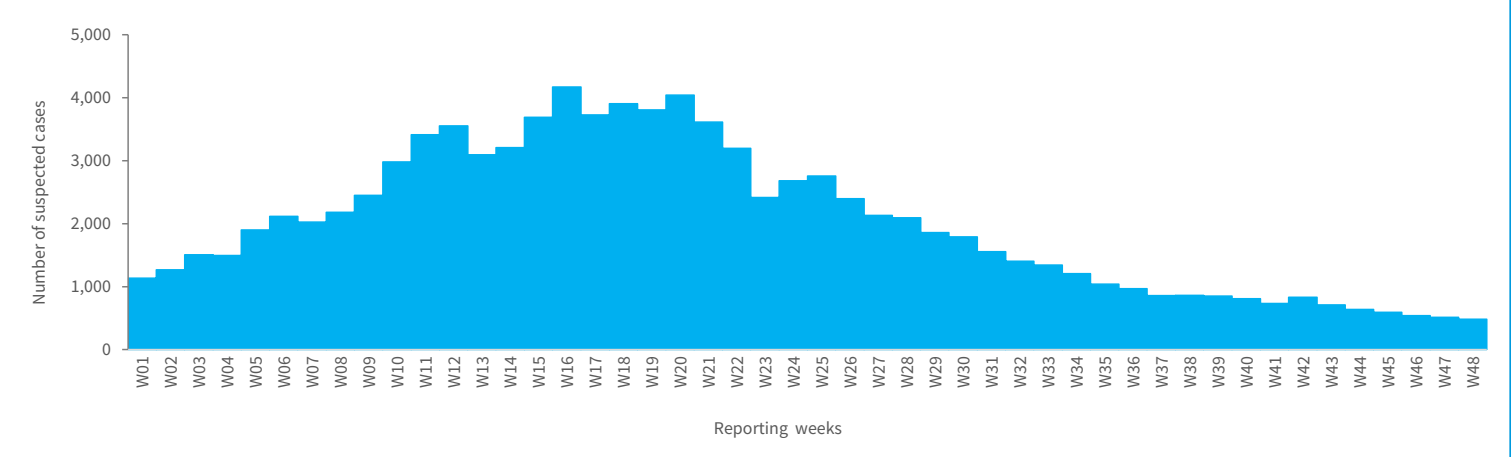


Figure 8. Comparison between the trends of suspected measles cases in 2025 vs 3-year average (2022-2024) and the endemic level

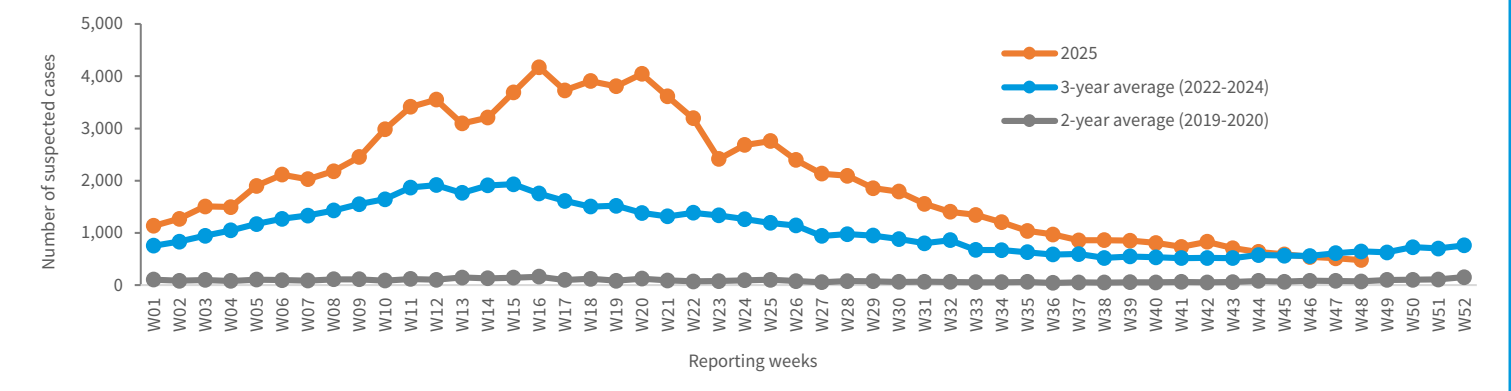
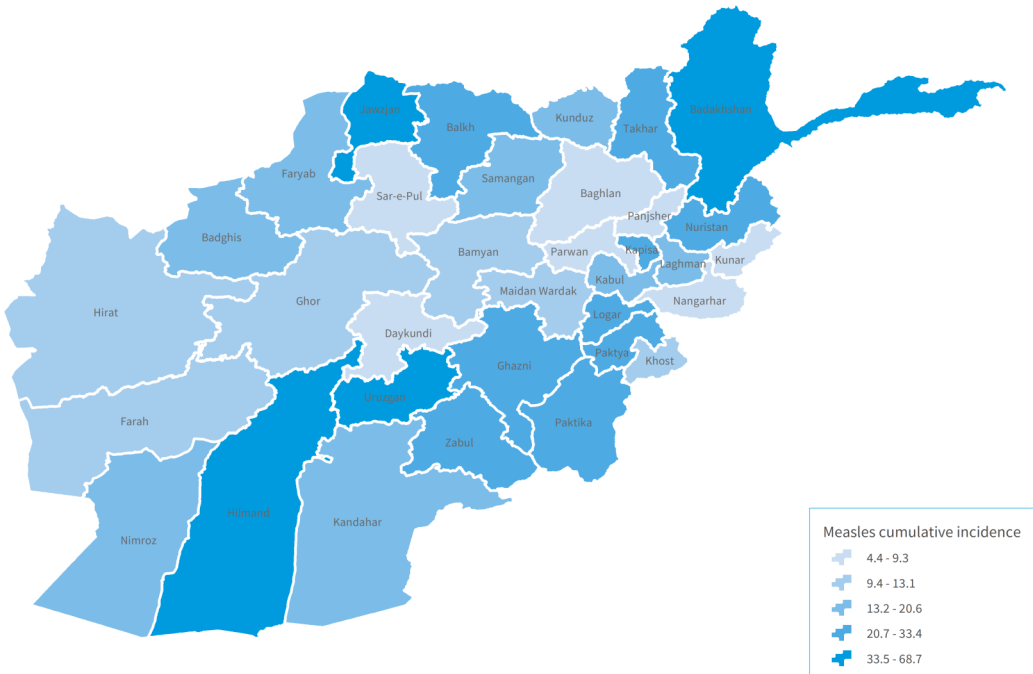


Figure 9. Suspected measles cumulative incidence per 10,000 population by province in Afghanistan 29 Dec 2024-29 Nov 2025

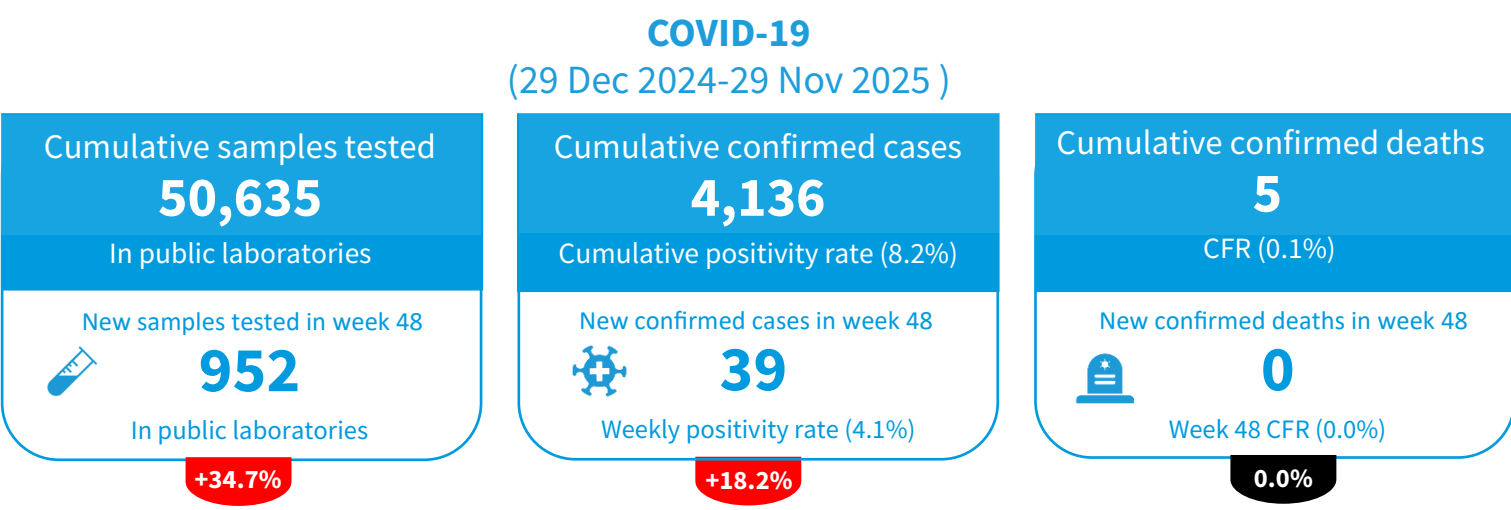
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Suspected measles cumulative incidence per 10,000 population by province 29 Dec 2024 – 29 Nov 2025






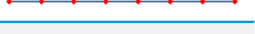
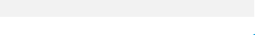
Updates on the preparedness and response to the measles outbreak

- Since the beginning of 2025:
 - Nationwide measles immunization campaign in 2 phases, reaching over 16.7 million children aged 6 months to 10 years across 34 provinces.
 - Vaccination of an additional 27,061 children aged 9-59 months against measles have been conducted as part of outbreak response immunization at hotspot areas.
 - Distribution of 345 measles case management kits to all WHO regional sub-offices.
 - Training of 257 HCWs (including 62 females) on 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).



Key: ● Increasing ● Decreasing ● No change

Table 4: Summary of COVID-19 indicators in the last 8 weeks in Afghanistan (05 Oct - 29 Nov 2025)

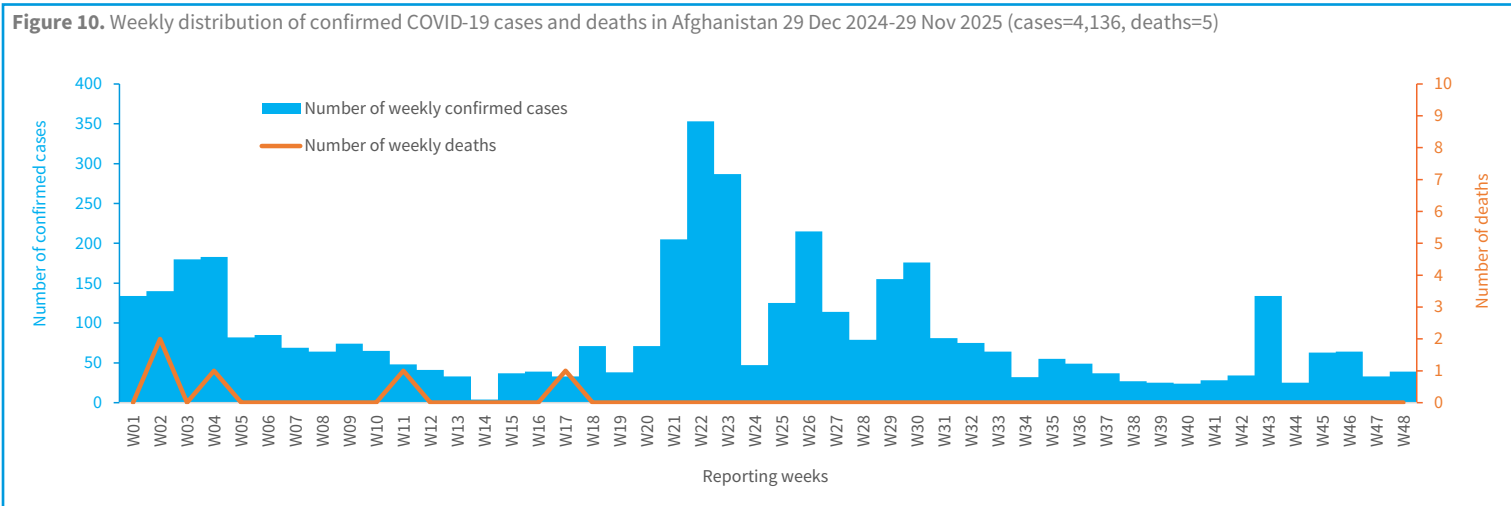
Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend line
Samples tested (in public Labs)	793	602	736	581	972	1,146	707 *	952	
Confirmed cases	28	34	134	25	63	64	33	39	
Percent positivity (%)	3.5	5.6	18.2	4.3	6.5	5.6	4.7	4.1	
Deaths	0	0	0	0	0	0	0	0	
CFR (%)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

*A delayed reporting was experienced during week 47-2025 and the number of samples tested was modified from 705 to 707.

- The epidemiological curve of confirmed COVID-19 cases indicates stabilization at lower level with sudden increase of cases only on week 43, which then followed by considerable decline in the number of confirmed cases over the past three weeks (Figure 10).
- During week 48-2025, a total of 952 samples were tested in public labs, of which 39 were positive for COVID-19 (positivity rate 4.1%), with no reported deaths (Table 4). This represents an 18.2% increase compared to the preceding week.
- Since the beginning of 2025, 4,136 confirmed cases of COVID-19 and 5 associated deaths (CFR 0.1%) were reported. Out of the total cases, 1,959 (47.4%) were females.


Updates on the response activities to the COVID-19 outbreak

- Since the beginning of 2025, the following response measures have been taken for the COVID-19 outbreak:
 - Organization of a series of online awareness campaigns on influenza and COVID-19 via WHO’s official social media channels, [Facebook](#) and [X](#) and access of more than 35,800 individuals through both platforms.
 - Distribution of 6,209 COVID-19 Rapid Diagnostic Test (RDT) kits.
 - Distribution of 850 kits of Viral Transport Medium (VTM).




Acute Watery Diarrhea (AWD) with Dehydration


(29 Dec 2024-29 Nov 2025)




158,219
Total cases




77
Total deaths



11,812
Samples tested (RDTs)






1,601
RDT-positive cases

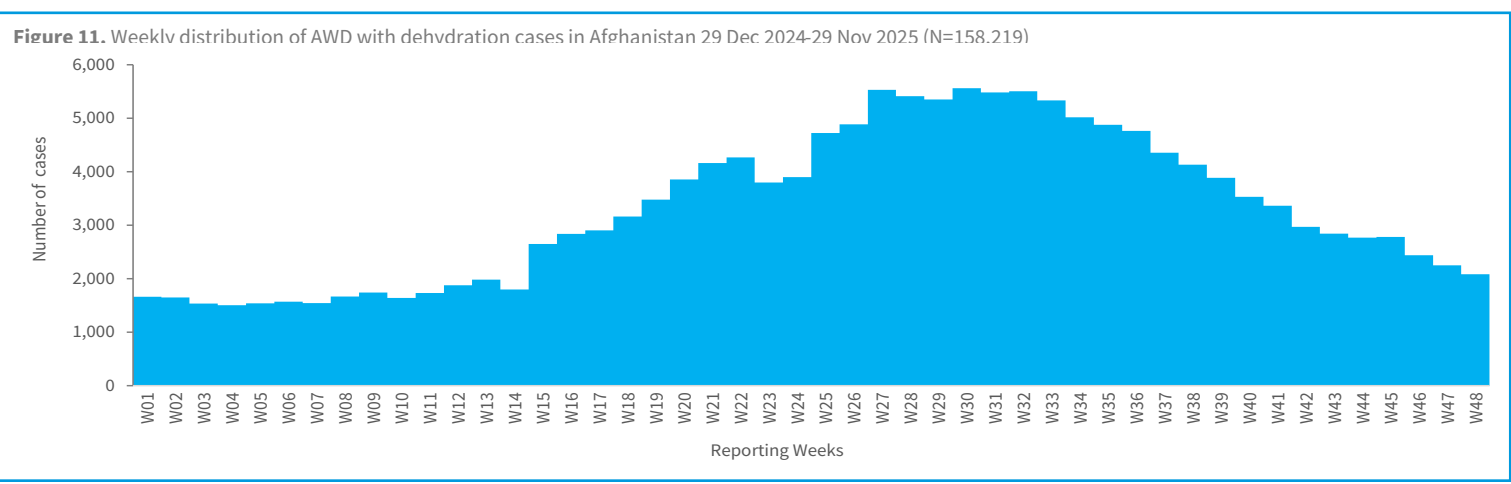


13.6%
RDT positivity rate

Table 5: Summary of the AWD with dehydration outbreak in the last eight weeks in Afghanistan (05 Oct - 29 Nov 2025)

Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend line
Number of cases	3,362	2,966	2,839	2,764	2,780	2,438	2,247	2,083	
Number of deaths	1	1	4	1	1	0	2	1	
CFR (%)	0.03	0.03	0.14	0.04	0.04	0.00	0.09	0.05	

- The epidemiological curve has shown a gradual decreasing trend since week 30-2025 (Figure 11).
- During week 48-2025, a total of 2,083 AWD with dehydration cases, with 1 associated death, were reported from 127 districts. This shows a 7.3% decrease in the number of cases compared to the previous week.
- Out of the 2,083 AWD with dehydration cases, 1,013 (48.6%) were females and 1,343 (64.5%) were under-five children.
- The newly reported death was male under-five child, from Baghlan province.
- During week 48-2025, no new districts reported alert of AWD with dehydration.
- Since Jan 2025, 158,219 cases of AWD with dehydration, with 77 associated deaths (CFR 0.05%), were reported from 353 districts. Out of total cases, 78,272 (49.5%) were females, while 90,875 (57.4%) were children under five.
- Since Jan 2025, a total of 11,812 Rapid Diagnostic Tests (RDT) have been conducted among AWD with dehydration cas- es, of which 1,601 tests turned positive (positivity rate 13.6%).



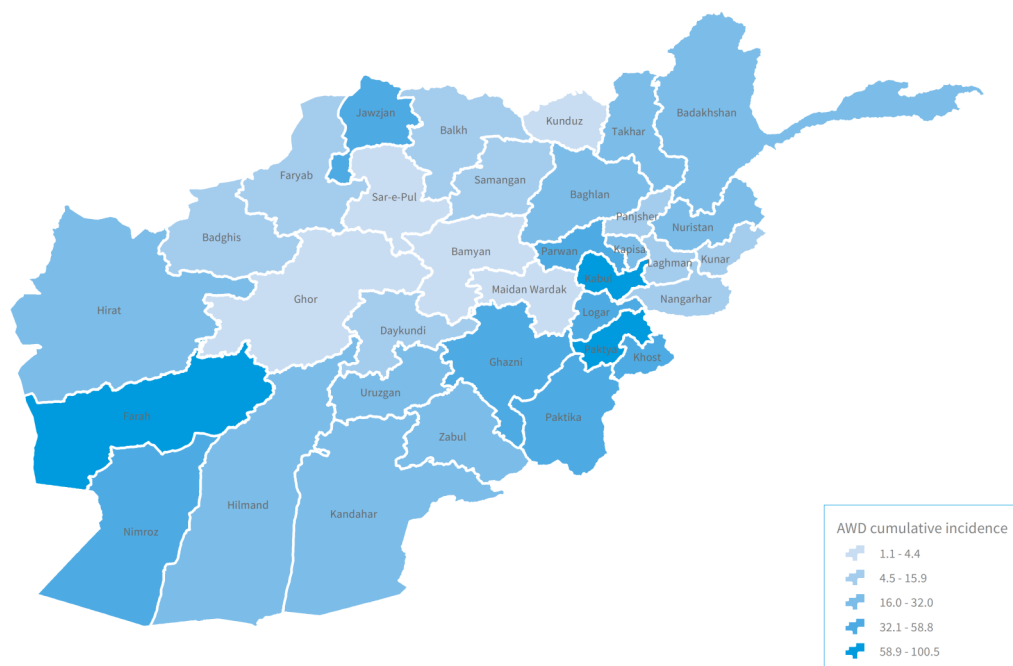


- Since the beginning of 2025, the highest cumulative incidence of AWD with dehydration per 10,000 population was reported from Kabul (100.5), followed by Paktya (86.3), Farah (77.8), Nimroz (58.8), and Paktika (55.6) (Figure 12).
- There is an ongoing AWD with dehydration outbreak in the Northeast (Badakhshan, Kunduz, Baghlan, and Takhar) and East (Nangarhar, Laghman, Kunar, and Nuristan) regions.
 - Northeast region: Since its start on 11 Aug 2025, a total of 602 cases have been reported from the Northeast region. Of the 601 RDTs conducted, 159 were confirmed positive, yielding a positivity rate of 26.5%. Four deaths have been recorded (CFR 0.7%). The epidemic curve indicates a declining trend since week 40-2025.
 - East region: Since its start on 06 Aug 2025, a total of 1,832 cases have been reported from the East region. Of the 1,571 RDTs conducted, 161 were confirmed positive, yielding a positivity rate of 10.2%. Four deaths have been reported (CFR 0.2%). The epidemic curve indicates a declining trend since week 41-2025.

Figure 12. AWD with dehydration cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024-29 Nov 2025

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**AWD with dehydration
cumulative incidence per
10,000 population by
Province 29 Dec 2024 –
29 Nov 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:
 - Distribution of 425 AWD with dehydration case management kits.
 - Distribution of 30,000 IEC materials mainly to the East and Central regions to raise awareness on recognizing early symptoms, practicing good hygiene and sanitation, and ensuring safe water and food handling practices.
 - Delivery of Cary Blair kits (1,012) and rapid diagnostic tests (RDTs) (1,330).
 - Distribution of 873 sets of PPEs.
 - Training of 179 HCWs, including 46 females, in 4 regions: Northeast region (30, including 10 females), Central region (90 HCWs, including 29 females), and East and South regions (59 HCWs, including 7 females).
 - Training of 114 SST members, including 12 females, in surveillance support activities.
 - Training of 89 surveillance focal points, including 2 females, in surveillance functions.
 - Online awareness campaigns of AWD with dehydration through official social media channels ([Facebook](#) and [X](#)) of WHO, reaching over 60,000 individuals over both platforms.
 - Risk Communication and Community Engagement (RCCE) campaigns conducted by trained social mobilizers in earthquake-affected areas of Kunar and Nangarhar provinces (30, including 15 females), among returnee communities of Herat province (30, including 14 females), and in 5 high-risk districts of Parwan province for AWD with dehydration outbreaks (20, including 7 females) reaching 114,217 individuals, of whom 45,075 (39.5%) were females. Also, 15,000 IEC materials were distributed across 207 villages of Kunar and Nangarhar provinces.

WASH update


In Oct 2025, the following WASH response activities were implemented by WASH cluster partners:

- Hygiene promotion sessions for 26,289 individuals from 3 provinces (Kabul, Kapisa, and Parwan).
- Distribution of Family Hygiene Kits to 5,037 individuals in Nimroz and Kapisa.


- Distribution of hand-washing soap to 24,500 individuals in 3 provinces (Parwan, Kapisa, and Kabul).
- Construction and rehabilitation of deep boreholes equipped with solar-powered piped systems in Nangarhar province benefitting around 5,693 individuals.

Confirmed Malaria

(29 Dec 2024-29 Nov 2025)






77,303
Total Malaria
Cases



0 (0.0)
Total malaria
deaths (CFR %)

Table 6: Summary of the malaria outbreak in the last eight weeks in Afghanistan (05 Oct - 29 Nov 2025)

Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend line
Confirmed cases	3,307	3,145	2,687	2,274	1,754	1,503	913	634	
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 downward trend since week 38-2025. The trend in 2025 is slightly higher than the 3-year average (2022-2024) since week 25-2025, however, it lies below the average for the last two weeks (Figures 13 & 14).
- During week 48-2025, 634 confirmed cases with no associated deaths were reported from 18 provinces, which shows a 30.6% decrease in the number of cases compared to the previous week.
- Out of the 634 cases, 314 (49.5%) were females, and 132 (20.8%) were under-five children.
- Since the beginning of 2025, 77,303 confirmed malaria cases with no associated deaths have been reported. Out of total cases, 36,058 (46.6%) were females, and 13,994 (18.1%) were children under five.
- Since the beginning of 2025, the highest cumulative incidence of malaria per 10,000 population was reported from Nuriestan (187.9), followed by Kunar (154.6), Laghman (148.7), and Nangarhar (75.7) (Figure 15).

Figure 13. Weekly distribution of malaria cases in Afghanistan 29 Dec 2024-29 Nov 2025 (N=77,303)

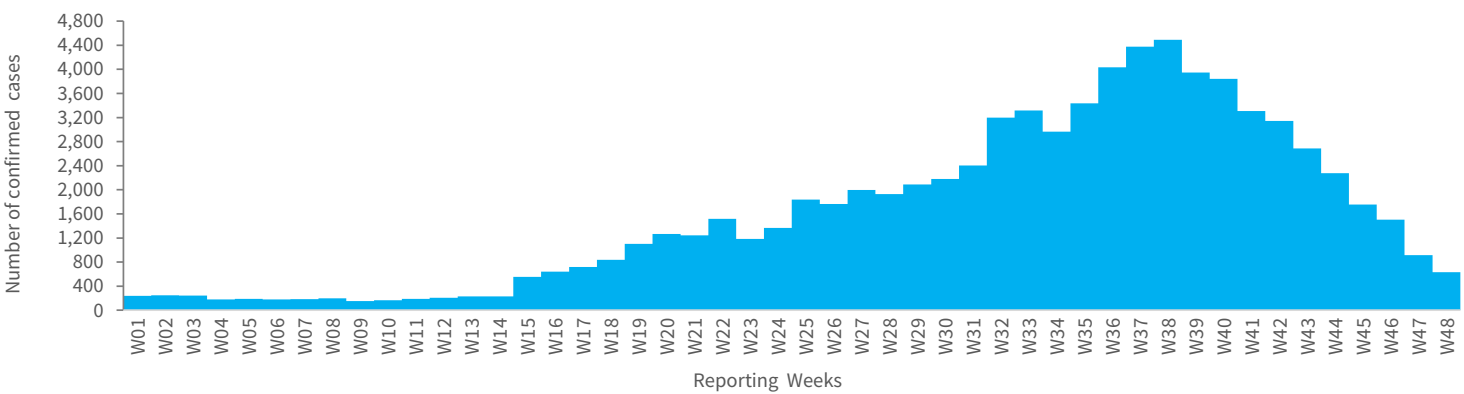


Figure 14. Comparison between the trends of malaria cases in 2025 vs 3-year average (2022-2024)

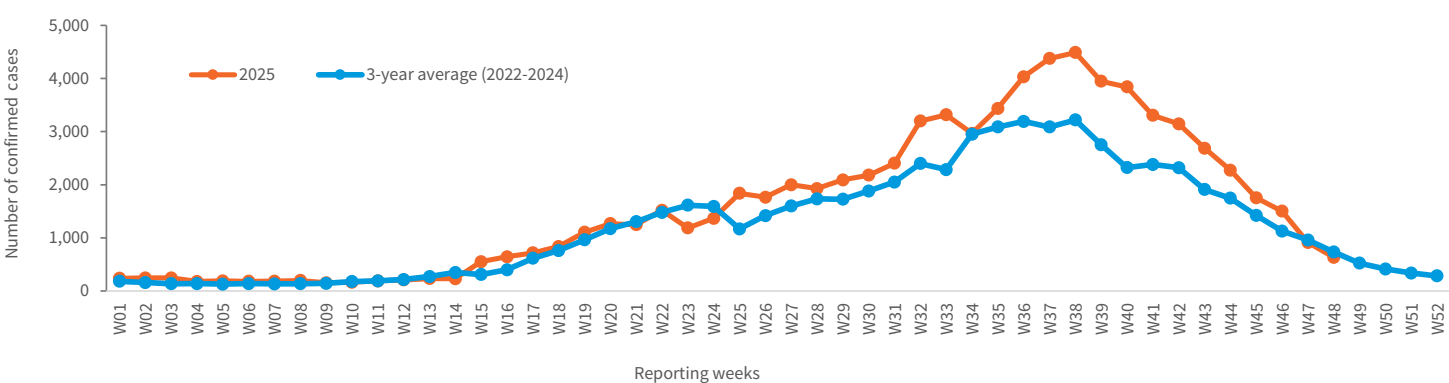
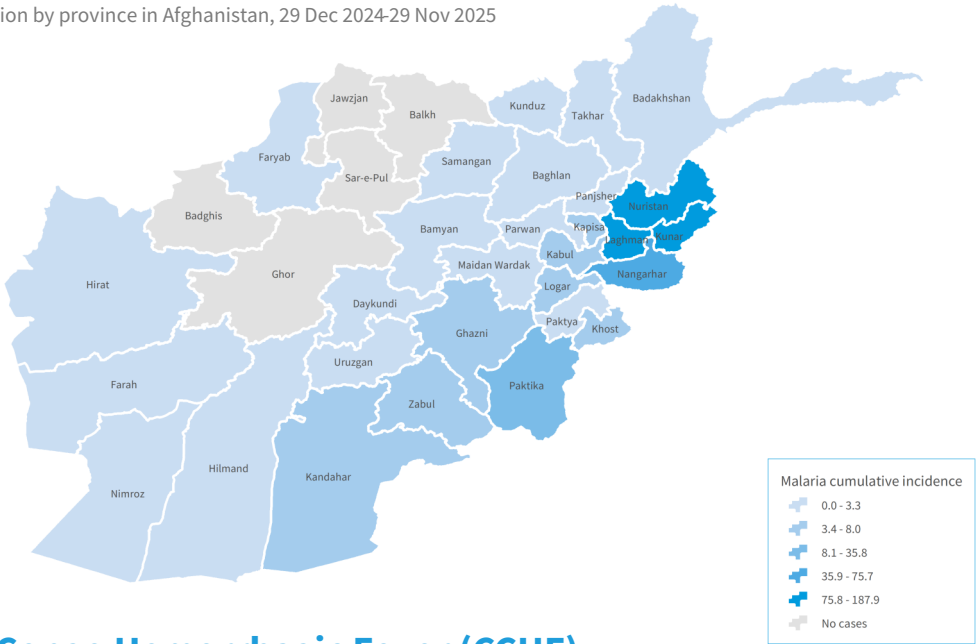


Figure 15. Malaria cumulative incidence per 10,000 population by province in Afghanistan, 29 Dec 2024-29 Nov 2025

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Confirmed malaria cumulative
Incidence per 10,000
population by province
29 Dec 2024 – 29 Nov 2025



Crimean Congo Hemorrhagic Fever (CCHF)

(29 Dec 2024-29 Nov 2025)

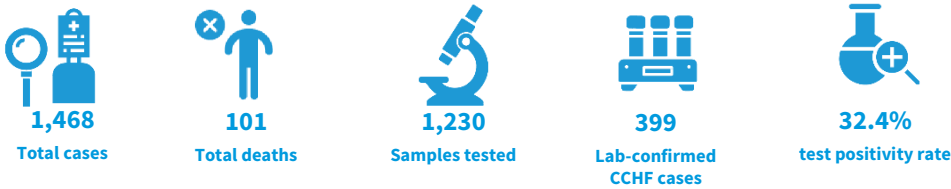


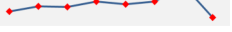


Table 7: Summary of the CCHF outbreak in the last eight weeks in Afghanistan (05 Oct - 29 Nov 2025)

Indicators	W41	W42	W43	W44	W45	W46	W47	W48	Trend line
Suspected cases	37	20	21	14	17	14	7	9	
Suspected deaths	1	1	1	1	1	1	1	0	
CFR (%)	2.7	5.0	4.8	7.1	5.9	7.1	14.3	0.0	

- The epi-curve of suspected CCHF cases shows a decreasing trend since its highest peak in week 25-2025 (Figures 16 & 17).
- During week 48-2025, 9 new suspected CCHF cases with no associated deaths were reported compared to 7 cases and 1 death in the previous week (Table 7).
- Since the beginning of 2025, a total of 1,468 suspected CCHF cases, with 101 associated deaths (CFR 6.9%), were reported. Most of the cases (1,463, 99.7%) were aged over five years, and 455 (31.0%) were females. A total of 1,230 samples were tested, of which 399 were positive, yielding a positivity rate of 32.4%.
- Since the beginning of 2025, the highest cumulative incidence of suspected CCHF per 100,000 population is reported from Kabul (11.8), followed by Kapisa (9.3), Kunduz (7.9), Jawzjan (6.5), and Balkh (6.3) (Figure 18).

Figure 16: Weekly distribution of suspected CCHF cases in Afghanistan 29 Dec 2024-29 Nov 2025, (N=1,468)

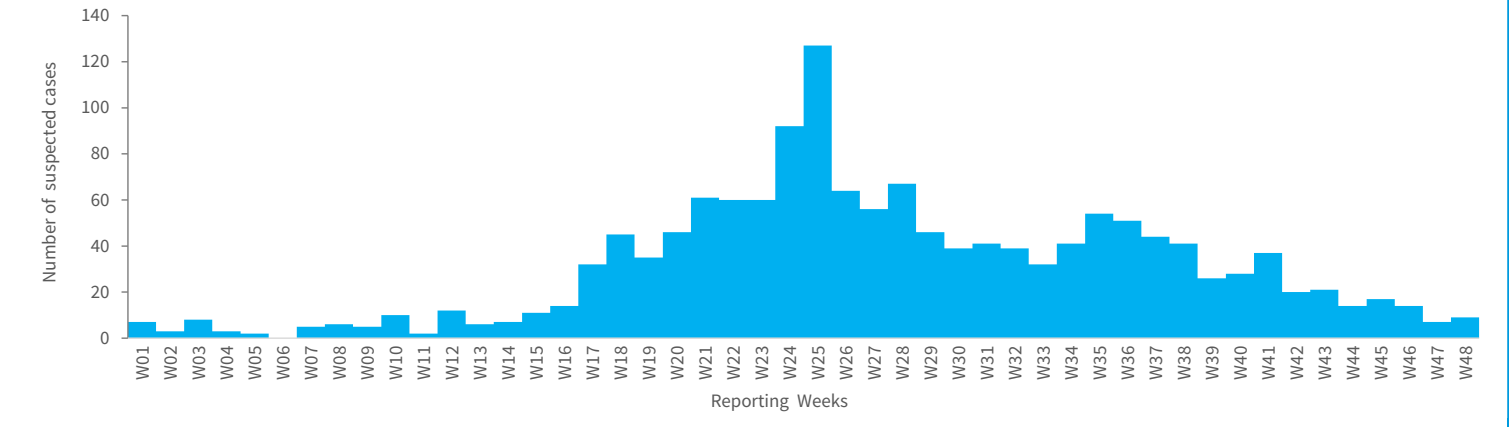


Figure 17. Comparison between the trends of suspected CCHF cases in 2025 vs 3-year average (2022-2024)

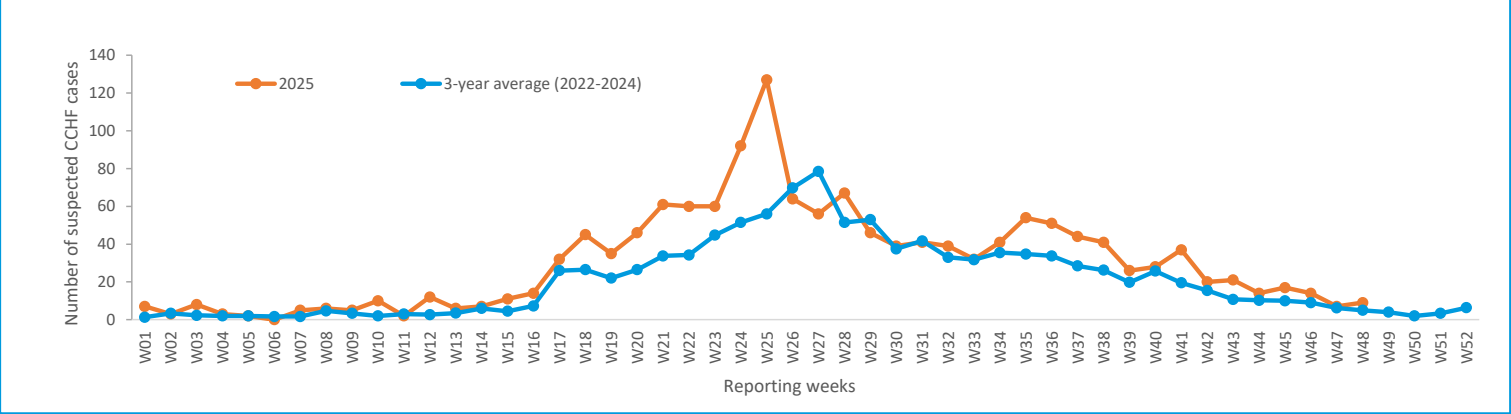


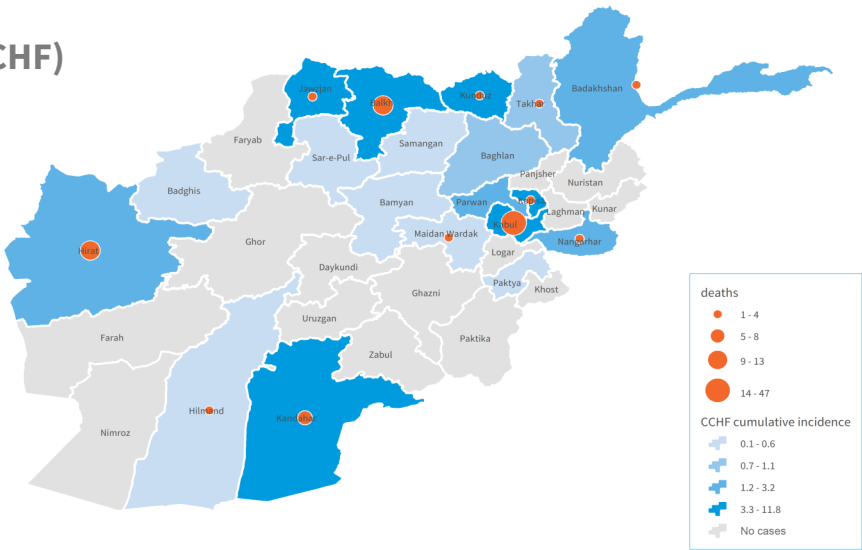
Figure 18. Cumulative incidence of Crimean-Congo Hemorrhagic Fever (CCHF) cases per 100,000 population by province and provincial distribution of deaths in Afghanistan, 29 Dec 2024-29 Nov 2025

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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 2024-29 Nov 2025



Updates on the response to the CCHF outbreak

- During week 48-2025, 66 HCWs including 11 females were trained on CCHF case management in Central region. This brings the total number of HCWs trained on CCHF’s case management to 132 including 18 females.
- Since the beginning of 2025, the following activities have been conducted as part of outbreak preparedness activities:
 - Distribution 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) to 5 WHO regional sub-offices (Herat, Nangarhar, Balkh, Kunduz, and Kandahar).
 - Distribution of 13,700 IEC materials on CCHF (5,900 brochures and 7,800 posters) to all sub-offices across the country.
 - Training of 31 laboratory technicians, including 4 females, from 8 laboratories on the diagnosis of CCHF.
 - Online awareness campaigns on Crimean-Congo Hemorrhagic Fever (CCHF) by WHO through its official social media channels ([Facebook](#) and [X](#)), reaching more than 37,000 individuals over both platforms. The campaigns focused on increasing public awareness and promoting preventive measures against CCHF.

Note: MOPH is the source of epidemiological data

[Case definition & alert/outbreak thresholds](#)

Contact us for further information:

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