





Islamic Republic of Afghanistan Ministry of Public Health Evaluation & Health Information جمهوری اسلامی افغانستان وزارت صحت عامه ریاست عمومی ارزیابی و معلومات صحی د افغانستان اسلامی جمهوریت د عامی روغتیا وزارت د ارزونی او روغتیانی معلوماتو لوی

National Disease Surveillance & Response (NDSR)

26 Aug to 01 Sep 2018

Weekly Epidemiological Report-35th

Summary:

- Out of 571 functional Surveillance sentinel sites, 547(95.7%) have submitted reports this week.
- Out of a total of 482,621 new consultations, 156,791(32.5%) were due to Surveillance targeted diseases.
- Main causes of consultations this week were Acute Diarrheal Diseases, 68,030 cases, 14.1% out of total new consultations, ARI (Cough & Cold, 72,718 cases, 15.1% out of total new consultations and Pneumonia, 10,467 cases, 2.2% out of total new consultations).
- A total of 229 deaths were reported this week, of which 54 were due to Surveillance targeted diseases, which includes 31 Pneumonia deaths, 08 Hemorrhagic fever deaths, 06 Meningitis deaths, 05 Acute Diarrheal Disease deaths, 03 Acute Viral Hepatitis deaths and 01 Pregnancy related death reported from Rabia balkhi sentinel site.
- Total of 58 outbreaks reported this week; of which 53 were CCHF outbreaks reported from Kabul, Herat, Balkh, laghman, Ghazni, Baghlan, Helmand, Kapisa, Kunar and Logar provinces, 02 Measles outbreaks reported from Paktika and Wardak provinces, one Food poisoning outbreak reported from Parwan province, one Dog bite/suspected Rabies outbreak reported from Takhar province and one Chickenpox outbreak reported from Urozgan province.

Figure 1: Surveillance/NDSR Sentinel Sites with GPS location by type of Health Facility

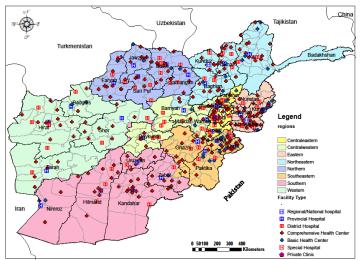


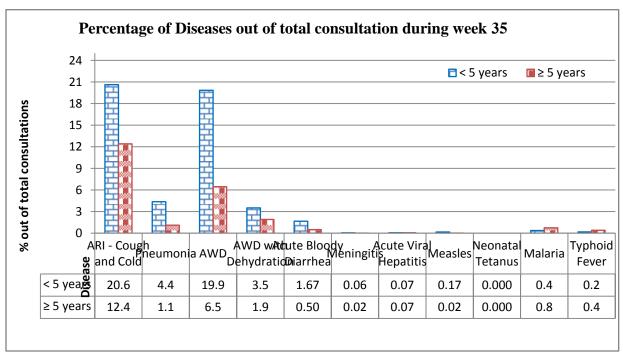
Table 1: Coverage of NDSR Surveillance System

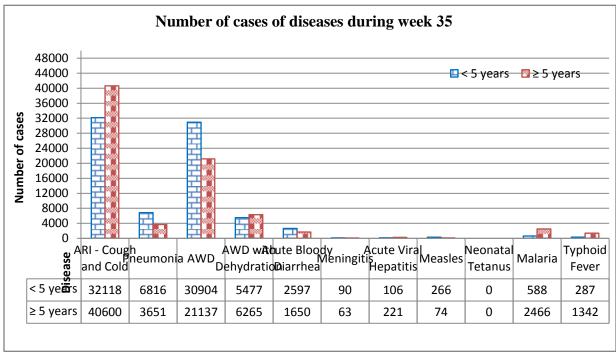
Type of Health Facility	RH/PH	DH	СНС/ВНС	Polyclinic	Private Hospital	Special Hospital	Total
Total Health Facilities (HF)	34	80	1,239	1	293	29	1,676
HF covered by NDSR-Plus	32	74	404	1	45	15	571

Indicator - based Surveillance:

The Indicator-based surveillance component of NDSR reports 15 priority infectious diseases from sentinel sites on weekly bases. The data is compared with previous weeks and corresponding week of previous years and the alert and epidemic threshold is checked to see if disease incidence has crossed these levels and necessary action is initiated.

Figure 2: NDSR targeted diseases



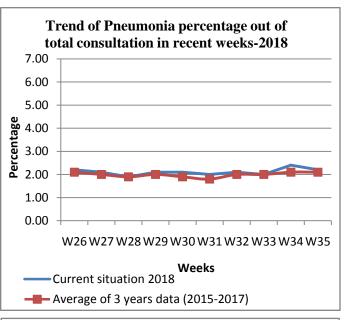


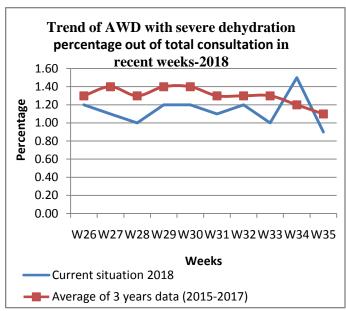
Vaccine Preventable Diseases (VPDs):

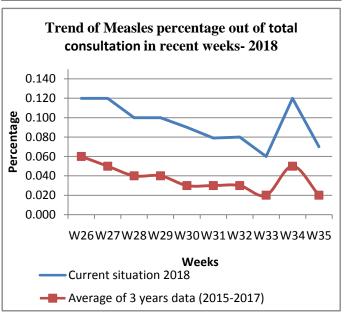
Table 2: Cases and deaths due to VPDs by age group during week 35th, 2018

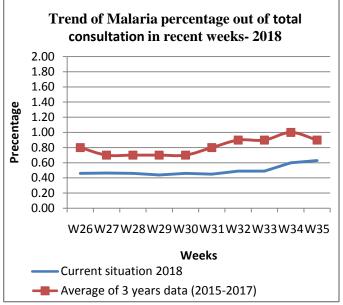
Diseases		Cases			CFR/100		
Diseases	<5 years	≥5 years	Total	<5 years	≥ 5 years	Total	
Measles	266	74	340	0	0	0	0.00
Pertussis	6	0	6	0	0	0	0.00

Seasonal Diseases:









During week 35th total of 58 outbreaks detected, investigated and responded by NDSR teams and the related stakeholders. The details are as below:

CCHF Outbreaks										
Reported dated	Province	District	Village	Total cases	Total deaths	Age	Occupation	Recommendation/Acti on take		
27 Aug 2018	Kabul	Distract 2	Pole atral	1	1	27 Y	Shopkeeper	On take		
27 Aug 2018	Balkh	Tajqurghan	Guzarkhana	1	0	78 Y	Jobless	During this week the		
27 Aug 2018	Kabul	District 1	Barchi	1	1	68 Y	Jobless	CCHF cases are		
27 Aug 2018	Kapisa	HesaAwal	Khamzargar	1	0	18 Y	Farmer	significantly increased		
27 114g 2010	rapisa	11csur i wur	ShahrakHaje	-	· ·	10 1	T diffici	compared to the		
27 Aug 2018	Kabul	District 6	Nabi	1	0	45 Y	Jobless	previous week and the		
27 Aug 2018	Kabul	District 5	Khoshhal Khan	1	0	25 Y	Student	same week of last year.		
29 Aug 2018	Kabul	Paghman	Arghandi	1	0	25 Y	Jobless	_		
29 Aug 2018	Ghazni	Qarabagh	Langar	1	0	32 Y	Butcher	Majority of the cases		
29 Aug 2018	Kabul	District 7	Chliston	1	0	27 Y	Jobless	were reported from		
29 Aug 2018	Kabul	District 7	Chliston	1	0	17 Y	Student	Heart and Kabul		
29 Aug 2018	Kabul	District 12	ArzanQeemat	1	0	20 Y	Student	provinces, had direct		
29 Aug 2018	Kabul	District 12	ArzanQeemat	1	0	23 Y	Doctor	contact with infected		
		Barakibar			-			animals or were		
29 Aug 2018	Logar	ak	Barakibarak	1	0	18 Y	Butcher	involved in sacrifice		
29 Aug								processes during Eid-e-		
2018	Kabul	District 12	Sari kutal	1	0	30 Y	Butcher	Qurban days, case		
29 Aug 2018	Kabul	District 13	Barchi	1	0	22 Y	Jobless	management was done		
29Aug 2018	Kabul	District 13	Barchi	1	1	26 Y	Butcher	for all the cases.		
29Aug 2018	Balkh	Mazar city	Ziruddin	1	0	50 Y	Shopkeeper			
		Manom						The Case Fatality rate		
29 Aug 2018	Kunar	Gul	Pish dara	1	0	20 Y	Farmer	(CFR) of CCHF cases in this week was 13.2 %		
			Qala Zaman					(per 100)		
30Aug 2018	Kabul	District 16	khan	1	0	40 Y	Housewife	(per 100)		
30Aug 2018	Hemand	0	0	1	0	50 Y	Jobless	_		
30 Aug 2018	Kabul	District 4	Karta-e Parwan	1	0	30 Y	Jobless	_		
20 4 2010	77.1.1	Mir	Б.1			50 X/	Y 11			
30 Aug 2018	Kabul	bachakut	Duko	1	1	53 Y	Jobless	4		
30 Aug 2018	Kabul	Bagrami	But khak	1	1	25 Y	Butcher	4		
30 Aug 2018	Kabul	District 7	Chilston	1	0	41 Y	Worker	_		
30 Aug 2018	Kabul	District 6	Sharak haji nabi	1	0	23 Y	Housewife	_		
30 Aug 2018	Kabul	District 17	Kutalkhirkhana	1	0	40 Y	Jobless	4		
30 Aug 2018	Balkh	Nahreshahi	Langar khana	1	1	18 Y	Architect	4		
30 Aug 2018	Kabul	District 8	Kart-e- naw	1	0	60 Y	Jobless	4		
20 4 2019	Dalablass	Talawbarf	A =1£	1	0	10 V	C4			
30 Aug 2018	Balghlan	ak Qraikhi	Ashraf	1	0	19 Y 50 Y	Student	4		
31 Aug 2018 1 September	Laghman	Qraikiii	Zadrani	1	U	30 1	Jobless	4		
2018	Kabul	District 9	Hudkhil	1	0	27 Y	Student			
1 Sep 2018	Laghman	Alingar	BdiulAziar	1	0	16 Y	Student	1		
1 Sep 2010	Lagillian	7 1111501	Qala Amir	1	J J	10 1	Student	-		
1 Sep 2018	Ghazni	District 2	Mohammad Khan	1	0	28 Y	Pharmacist			
26Aug 2018	Hirat	Zenda jan	Shakiban	1	0	30 Y	Housewife			
26 Aug 2018	Hirat	City	Area 5	1	0	30 Y	Shopkeeper			
							Shopkeeper			
28 Aug 2018	Hirat	City	Area 4	1	0	30 Y	Farmer			
28 Aug 2018	Hirat	City	Area 6	1	0	20 Y	Mechanic			

				Food	poisoni	ng outbr	eaks	prevenuoi	i or further !	spicau.
25 Aug 2018	Takhar	Taluqan city	Malika Khutaya n	N	Ά	0		treated, veducation Relevant the previous	vaccination was provid programs a	are requested to implement d control measures for
Reported dated	Province	District	Village	Total	cases	Total	deaths	Recommendation/Action take		
						Rabies				
27 Aug 2018	Urozgan	Tarinkot	Shahma nsor	cases 5	cases 7	cases 12	0	The outbreak was investigated; cases were treated and health education session conducted in the affected area. The active surveillance has been established for investigation of further cases, awareness sessions are needed in the schools for prevention of further spread.		
Reported dated	Province	District	Village	<5	≥5	Total	Total deaths	Recommendation/Action take		
				Chi	ickenpo	x outbrea	aks			
26 Aug 2018	Wardak	Chak-e- wardak	UNKN OWN	7	8	15	0	40%	Plan	with the relevant departments and programs for action and control.
31 Aug 2018	Paktika	Sharana	Sharana	6	1	7	0	40%	Plan	This year we had more cases and outbreaks of Measles compared to previous year, surveillance department shared this information
Reported dated	Province	District	Village	<5 cases	≥5 cases	Total cases	Total deaths	coverag e %	Vaccina tion	Recommendation/Acti on take
D 1	D	D'aria	37'11			utbreak		l	<u> </u>	D 1 (* /A (*
25 Aug 2018	Hirat	Shindand	Cent		1	0	19 Y	C	ooker	
25 Aug 2018	Hirat	Shindand	Cent	er	1	0	30 Y	Fa	armer	
25 Aug 2018	Hirat	Shindand	Cent		1	0	18 Y		ısewife	
25 Aug 2018 25 Aug 2018	Hirat Hirat	Shindand Shindand	Cent Cent		1	0	17 Y 25 Y		udent 'orker	
25 Aug 2018	Hirat	Shindand	Cent		1	0	30 Y		eacher	
31 Aug 2018	Hirat	Shindand	Cent		1	0	40 Y		ısewife	
30 Aug 2018	Hirat	City	Qolo		1	0	30 Y	Pha	rmacist	
30 Aug 2018	Hirat	City	Area		1	0	60 Y		orker	
29 Aug 2018 30 Aug 2018	Hirat Hirat	City Injil	Doqh a	_	1	0	45 Y 45 Y		sewife sewife	
29 Aug 2018	Hirat	City	Area 3 th Farqa		1	0	30 Y		pkeeper	
28 Aug 2018	Hirat	City	Area 11 th		1	0	24 Y		ısewife	
28 Aug2018	Hirat	Ghoryan	Cent		1	1	30 Y		ısewife	
28 Aug 2018	Hirat	karukh	Qalash		1	0	40 Y		ıtcher	
28 Aug 2018	Hirat	City	Soltan	Апа	1	0	30 Y		pkeeper armer	

Reported dated	Province	District	Village	Total cases	Total deaths	Recommendation/Action take
30 Aug 2018	Parwan	Charikar	Parcha 12	6	0	Food Poisonings are the 6 th common causes of outbreaks in 2018 in the country, all the said outbreaks are detected and diagnosed clinically, there is no proper lab facility to confirm the real cause of the these outbreaks, we recommend the strong public health lab to confirm the poisoning outbreaks.

Figure 3: Outbreaks investigated during the week 35th,2018

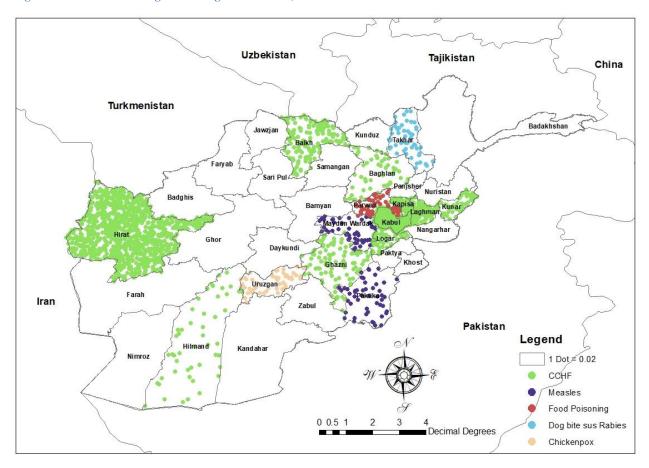


Table 2: Updates on the outbreaks reported during 2018 (31 Dec 2107 to 01 Sep 2018)

Disease/event	No. of outbreaks	No. of lab-confirmed Outbreaks	No. of cases	No. of deaths
CCHF	330	77	359	42
Measles	206	134	2743	19
Chickenpox	23	1	378	0
Dog bites/Suspected Rabies	20	1	166	2
Pertussis	19	1	142	0

Grand Total	629	217	5225	66
Diphtheria	1	0	3	1
Mumps	1	0	5	0
Meningitis	1	1	3	1
Fly Bite	1	0	5	0
Water poisoning	1	0	221	0
Human Immunodeficiency Virus	1	0	1	0
Petrol poisoning	1	0	3	1
Leishmaniasis	2	1	47	0
Acute Viral Hepatitis	2	1	14	0
Gas (CO) Poisoning	3	0	47	0
Mass psychogenic Illness	5	0	246	0
Scabies	5	0	421	0
Food poisoning	7	0	421	0

Laboratory surveillance:

In this week a total of 141 different specimens/samples were received by CPHL, out of which 14 specimens were positive and 17 specimens were negative for Measles, one specimen was positive for Rubella and one specimen was negative for H1N1while the rest are under process. (Follow up by the CPHL is going on).

Influenza Surveillance activity

In Epidemiologic week 35, 2018, we have received Epidemiological reports from 9 out of 9 sentinel sites. Out of all new hospital admission, 131(3%) Sever Acute Respiratory Infections cases were reported and 74% of them were among under 5 years old. The proportion of SARI cases was increased than week 34. No SARI associated death was reported in this week.

In EPI week 35 our National Influenza Center (NIC) received 31 SARI and 18 ILI specimens. No new case of influenza virus was detected by NIC in this week.

Recommendations:

The increase in the outbreaks and cases/deaths due to CCHF is the cause of concern; this should be analyzed further in different levels and appropriate actions to be taken by the concerned departments.