Ministry of Public Health

Monitoring Evaluation & Health Information System GD

وزارت صحت عامه

Diseases Surveillance Department

د عامی روغتیا وزارت

ریاست عمومی نظارت ارزیابی و سیستم معلومات صحی دیپارتمنت سرویلانس امراض د څارنی ارزونی او روغتیایی معلوماتو د سیستم عمومی ریاست د ناروغیو د سرویلانس دیبارتمنت

National Disease Surveillance & Response (NDSR)

NDSR Weekly Epidemiological Report 52nd

Date: 26/12/2021-01/Jan/2022

Summary:

- Out of 519 functional Surveillance sentinel sites, 493 (95 %) have submitted reports this week.
- A total of 484,391 new consultations, 200,162 (41.3%) were due to Surveillance targeted diseases. That included 105,894 males (52.9%) and 94,268 females (47.1%). Also, 93,539 (46.7%) under five years old and 106,623 (53.3%) five years old and over, reported this week.
- The main causes of consultations this week were ARI Cough & Cold, 134,573 cases (27.8%) out of total new consultations, Acute Diarrheal Diseases 32,359 cases (6.7%) out of total new consultations and Pneumonia, 27,974 cases (5.8%) out of total new consultations.
- A total of 202 deaths were reported this week, of which 61 were due to Surveillance targeted diseases, which includes 07 COVID-19 deaths, 48 Pneumonia deaths, 05 suspected measles deaths and 01 suspected meningitis/severely ill child death.
- A total of **1,019** Measles suspected cases with 06 deaths were reported in this week.
- During this week, **68** AWD new cases epi-linked with Kabul province AWD outbreak were reported.
- Also, 22 Dengue fever new suspected cases epi-linked with Nangarhar province outbreak were reported.
- In addition, during this week 11 outbreaks were reported (10 Measles outbreaks were reported from Kapisa, Badghis, Herat, Urozgan, Zabul, Kandahar, Sar-e-pul and Wardak provinces. One CCHF outbreak was reported from Sar-e-Pul province).
- Moreover, **205** COVID-19 confirmed cases reported at national level.

Figure 1: Surveillance/NDSR Sentinel Sites with GPS location by type of Health Facility, 2021

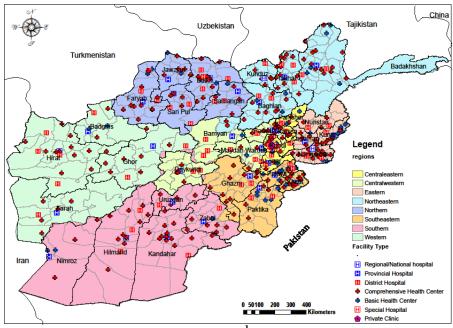


Table 1: Coverage of NDSR Surveillance System

Type of Health Facility	RH	РН	DH	СНС	внс	NH/ Special Hospital	SHC	Other	Total
Total Health Facilities (HF)	8	27	91	437	900	36	1106	2093	4,698
HF covered by NDSR-Plus	6	25	80	310	80	13	1	4	519

Indicator - based Surveillance (IBS):

The Indicator-based surveillance component of NDSR report 17 priority conditions/infectious diseases from sentinel sites on weekly bases. The data is compared with previous weeks and the corresponding weeks 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: A

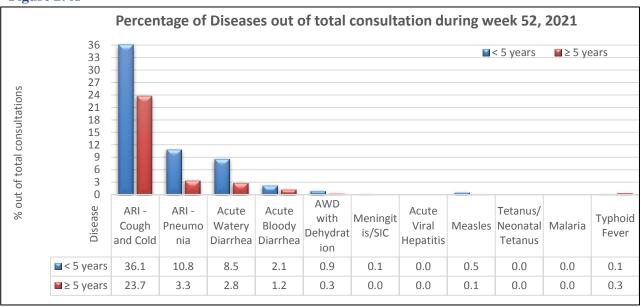


Figure 2: B

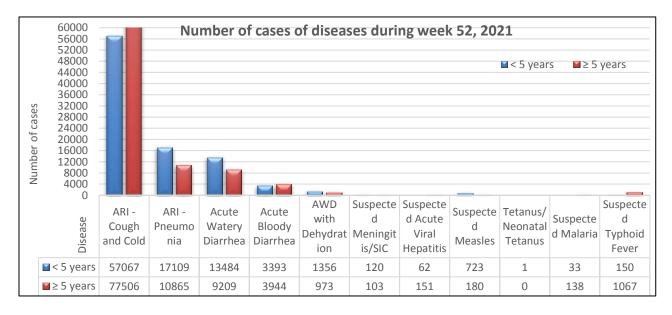


Table 2: Cases and deaths due to VPDs by age group during week 52nd, 2021

D.		Cases			CED/100			
Diseases	<5 years	≥5 years	Total	<5 years	≥5 years	Total	CFR/100	
Suspected Measles cases	723	180	903	05	0	05	0.55	

Seasonal Diseases:

Figure 3: A

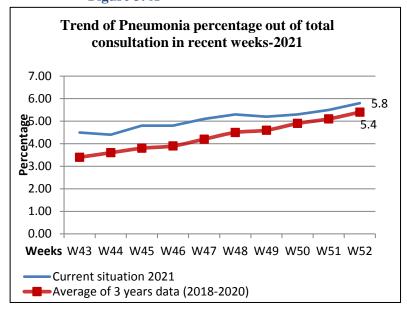


Figure 3: B

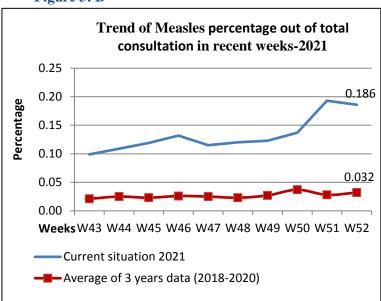


Figure 3: C

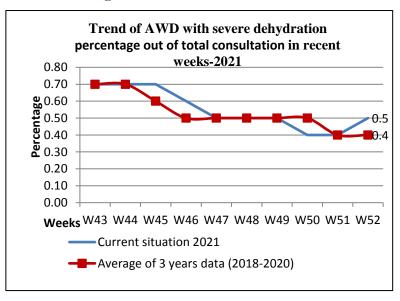


Figure 3: D

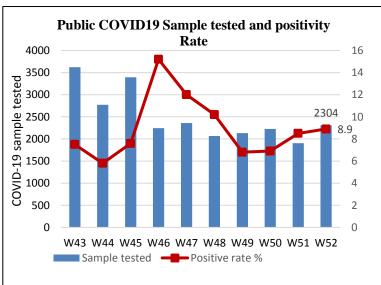


Table 3: Part of Outbreaks:

Follow up of AWD Outbreak (Kabul)												
Reported D	ate Provin	ce	District	Vi	llage	<5 Cases	≥5 Case	Tota	1 Tota	l R	ecom	mendation /Action taken
26/12/ 2021 Kabul		ıl	Kabul districts	Kabul		11	57	68	0	In thi linked outbre surveing going for all done confineduca	In this week, 68 AWD new of linked with Kabul province outbreak reported, Ac surveillance and the case investing going on, case management for all the cases. Sample colled done and shipped to Cl confirmation. In addition, education was conducted investigation team.	
	Follow up of Dengue fever outbreak (Nangarhar)											
Reported dat	ed Provi	nce	Distric	t	Village		<5 Cases	≥5 Cases	Total Cases	Total deaths	Rec	commendation/Action taken
26/12/2021	Nanga	rhar	Mohman	dara	Different villages of Mohmanda ra district of Nangarhar province		1	21	22	0	all stakeholders at the loprovincial and national levels blood serum specimens have collected and shipped CPHL for confirmation.	
Suspected	l Measles o	ıtbrea	ks (Kapi	sa, Ba	adghis, He	erat, U	rozgan	, , Zabul	, Kandal	ar, Sar -	e- pul	and Wardak provinces)
Reported dated	Province	District		,	Village	<5 case s	≥5 cases	Total cases	Deaths	Vaccin covera		Recommendation/Action taken
27/12/2021	Kapisa	Mah	ımudraqi	Ва	lochkhil	2	4	6	0	809	%	In this week, 10 suspected Measles outbreaks were
29/12/2021	D 11:		Bala orghab	b Moricha		22	9	31	0	0		reported from Kapisa, Badghis, Herat, Urozgan,
29/12/2021	Badghis		Rala		Juy khoja		0	18	0	0		Zabul, Kandahar, Sar–e-pul and Wardak provinces.
27/12/2021	Herat		Injil		B0land Shahi		4	8	0	0		The outbreaks were investigated, case
26/12/2021	Urozgan	Та	Tarinkot		aklingah	7	6	13	0	809	%	management was done for all the outbreaks and cases.
26/12/2021	Zabul	Qalat		Sayed Jan		12	1	13	0	429	%	Also, health education
27/12/2021	Kandahar	Ar	ghistan	Spinkala		3	3	6	01	609	%	sessions were conducted. Vaccination of children in
28/12/2021		Ar	ghistan	I	Babezo	4	2	6	0	609	%	the surrounding villages of the affected villages is
30/12/2021	Sar -e- Pul	Saı	ncharak	Z	Dara amchin	0	1	1	0	N/	A	going on. Follow up reports will be
28/12/2021	Wardak	Narkh		Ahengarran		4	4	8	0	53%	6.	shared

	Suspected CCHF cases (Sar e Pul province)											
Reported dated	Province	District	Village	Total cases	Total deaths	Age	Occupation	Recommendation/Action take				
30/12/2021	Sar -e- pul	Sanchar ak	Dara Zamchin	01	0	30 Y	Worker	During this week 01 suspected CCHF case was reported from Sar-e-Pul province. Case management was done, health education session was conducted and the information was shared with the related departments and animal health as well to take the control and preventive measures. Also Blood specimen collected by the investigation team and sent to CPHL for Lab confirmation.				

Table 4: Updates on the outbreaks reported during 2021 (27 Dec 2020 to 01, Jan, 2022

Disease/Event	Count of Disease/ Event	Sum of Lab Confirm	Sum of total Cases	Sum of Total Deaths	
Measles	147	62	1712	63	
CCHF	87	21	87	5	
Dog bites/Suspected Rabies	13	0	84	0	
Acute Watery Diarrhea	3	2	4660	8	
Pertussis	7	0	64	1	
Scabies	5	0	131	0	
Diphtheria	3	0	6	1	
ARI	1	0	11	0	
Acute Influenza	1	1	5	0	
COVID 19	1	1	105997	5173	
Food poisoning	2	0	26	0	
Polio Myelitis	1	0	2	0	
Unknown Poisoning	1	0	12	3	
Malaria	1	0	13	0	
Mass psychogenic Illness	1	0	16	0	
Tick bite	1	0	9	0	
Dengue fever	1	1	827	0	
Gas (CO) Poisoning	1	0	18	0	
Chickenpox	1	0	9	0	
Leishmaniasis	1	0	29	0	
Grand Total	279	88	113718	5254	

Turkmenistan wzian akhar Badakhshan Kunduz Balkh Samangan Sar-e-Pul Baghlan Noristan Parwan Kunarha Nangarhar Kabul myan Maydanwardag Ghor Paktva Hirat Daykundi Ghazni Khost Legend Farah Uruzgan Pakteka Zabul AWD Iran Dengue Fever Hilmand suspected CCHF Nemroz Suspected Measles India Covid19- All Confirmed Case COVID-19 - Deaths 37.5 75 150 300 Miles

Figure 4: Distributions of COVID-19, Dengue, AWD, Measles and CCHF cases and deaths during week 52nd

Laboratory surveillance:

A total of **6,606** specimens were collected and shipped to CPHL, regional and private labs. Out of which **205** specimens were confirmed for COVID-19, **122** samples were confirmed for Measles in this week. (Follow up by the CPHL is going on).

Influenza Surveillance activities:

In Epidemiological week 52nd 2021, we have received Epidemiological reports from 09 out of 09 sentinel sites. (Kabul, Kapisa, Balkh, Herat, Kandahar, Bamyan, Baghlan, Nangarhar, and Paktya). Out of all new hospital admissions, 256 (5.4%) Severe Acute Respiratory Infections cases were reported and 61 were under 5 years old. The proportion of SARI cases were decreased as compared to week 51st 2021. Eight SARI associated deaths were reported this week. At the 9 provincial levels, the top sentinel sites with the highest proportion of SARI cases were Kabul (35%), Bamyan (16%) and Kapisa (15%). In this epidemiological week, our field staff shipped 67 SARI and 44 ILI specimens to the National Influenza Center (NIC).

COVID-19 Surveillance activities:

In this week, **6,054** specimens were tested for suspected COVID-19. Out of which **205** samples were confirmed for COVID-19 by rtPCR. The cases have been managed either in the isolation wards or in home quarantine.

- COVID-19 cases were increased **25** % compared to last week, (and 0.7% lab samples positivity rate increased as compared to last week at national level).
- Bed occupancy rate (BOR) at the national level was **24.2%**, which decreased 0.5% compared to last week
- Out of **371** contacts of **133** confirmed cases that were mostly family members with an average of 03 Contacts per one case, and will be continued until 14 days of their last contact with the confirmed cases. Also, surveillance screening teams screened all the passengers in the points of entry for fever, and health education was conducted for them, about **69,727** passengers have been screened for COVID-19 in the points of entry of four provinces (Herat, Kandahar, Nangarhar and Nimroz provinces).

Challenges:

- Suspected Measles cases and outbreaks are in the increasing trend (1,019 measles cases and 06 deaths were reported in this week).
- No lab capacity for the confirmation of the new COVID-19 variate (Omicron) in the country
- Shortage of lab samples collection consumables and testing kits in majority of the provinces for COVID-19, Influenza and other epidemic prone diseases.

Recommendations:

- Vaccination coverage for measles and other vaccine preventable diseases need to be improved
- CPHL should be supported for the confirmation of the new COVID-19 variate (Omicron)
- RRTs should be functional again, to support the outbreak investigation and response for COVID-19, AWD, Measles and Dengue fever outbreaks and other health emergencies.
- Regular supply for lab sample collection and testing kits for epidemic prone diseases including COVID-19 are needed and lab testing capacity needs to be strengthened and expanded to all the provinces.
 - **EPI**: As the system detected **1,019** suspected Measles cases, with **06** deaths due to measles reported in this week, further prevention and control measures should be conducted by the EPI team.
- The findings should be analyzed further in different levels and appropriate actions to be taken by the concerned departments.