### Ministry of Public Health

# Monitoring Evaluation & Health Information System GD

Diseases Surveillance Department

د عامي روغتيا وزارت

ریاست عمومی نظارت ارزیابی و سیستم معلومات صحی دبیارتمنت سرویلانس امراض

د څارنی ارزونی او روغتیایی معلوماتو د سیستم عمومی ریاست د ناروغیو د سرویلانس دیبارتمنت

National Disease Surveillance & Response (NDSR)

و زارت صحت عامه

NDSR Weekly Epidemiological Report 15<sup>th</sup>

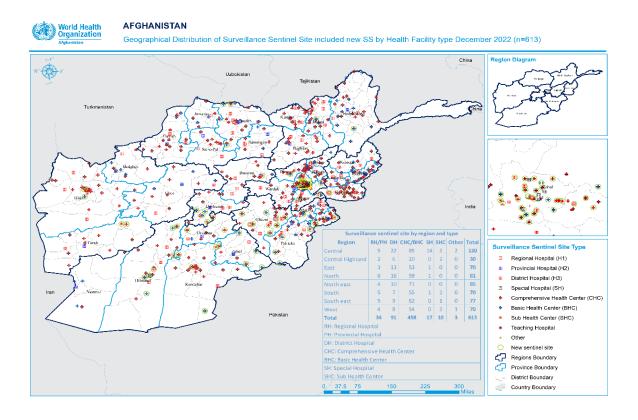
Date: 07 – 13/04 - 2024

### **Summary:**

- Out of 613 functional Surveillance sentinel sites, 605 (98.7%) have submitted reports this week.
- A total of 400,106 new consultations, of which 148,673 (37.2%) were due to Surveillance targeted diseases. That included 77,566 (52.2%) males and 71,107 (47.8%) females. Also, 68,302 (45.9%) people under five years old and 80,371 (54.1%) five years old and over were reported this week.
- The main causes of consultations this week were ARI Cough & Cold (95,523 = 23.9% cases out of total new consultations), Acute Diarrheal Diseases (30,372 = 7.6% cases out of total new consultations), and Pneumonia (18,827= 4.7% cases out of total new consultations).
- A total of 281 deaths were reported this week, of which 62 (22.1%) deaths were due to surveillance-targeted diseases, which include 49 ARI Pneumonia deaths, 06 Suspected Meningitis deaths, 04 suspected Measles deaths and 03 Acute Viral Hepatitis deaths.
- In addition, during this week, **13** outbreaks were reported: **05 clinical Scabies** outbreaks were reported from Herat, Kabul, Kapisa, Laghman and Logar provinces, **05 suspected Measles** outbreaks were reported from Herat, Kabul, Nangarhar and Wardak provinces, **02 Dog bite/suspected Rabies** outbreaks were reported from Kapisa province, **01 Clinical Chickenpox** outbreak was reported form Kunduz province.

Moreover, **281** COVID-19 confirmed cases and **1323** suspected Measles cases (IBS) were reported at the national level.

## Figure1: Surveillance/NDSR Sentinel Sites with GPS location by type of Health Facility, 2024



**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	1,106	2,093	4,698
HF covered by NDSR-Plus	8	26	90	348	111	17	10	3	613

### **Indicator - based Surveillance (IBS):**

The indicator-based surveillance component of the NDSR, reports 17 priority conditions/infectious diseases from sentinel sites on weekly basis. The data is compared with previous weeks and the corresponding weeks of the previous three years, and the alert and epidemic thresholds are checked to see if disease incidence has crossed these levels and necessary action is initiated.

Figure 2: A

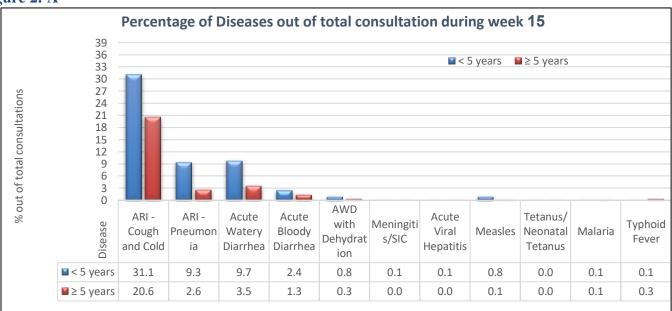


Figure 2: B

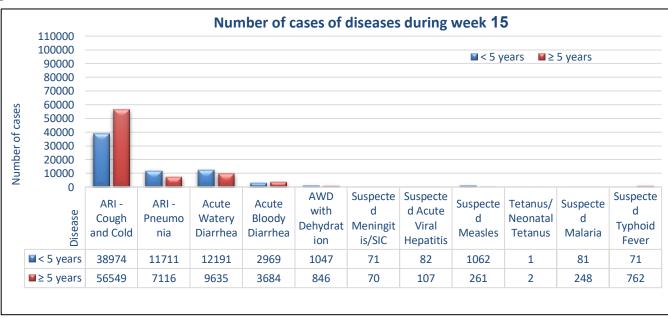


Figure 3: A

Trend of Pneumonia percentage out of total consultation in recent weeks-2024

9.00
8.00
7.00
6.00
9.00
1.00
0.00
Weeks W06 W07 W08 W09 W10 W11 W12 W13 W14 W15

Average of 3 years data (2021-2023)

Current situation 2024

Figure 3: B

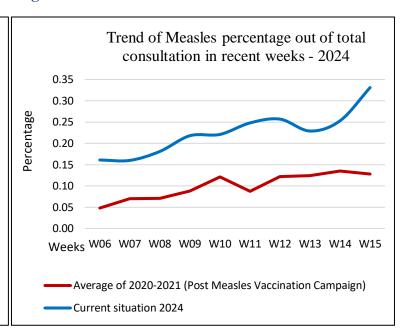


Figure 3: C

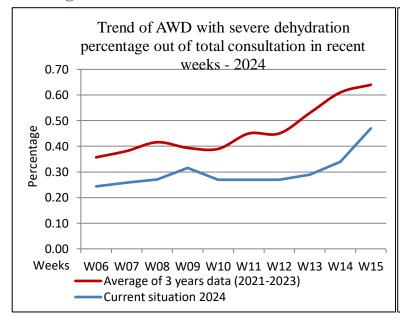


Figure 3: D

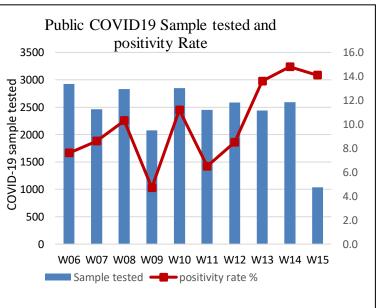


Table 3: Outbreaks in Week 15th 2024:

Rabies

Clinical Chickenpox

AFGHANISTAN | INFECTIOUS DISEASE OUTBREAKS REPORT | Epidemiological week # 15-2024 Vaccination **Total Deaths Total Cases** coverage, If VPD **Event / Diseases** Reporte Related **Province District** Village Field Name d date HF Estimated reported Coverage coverage NA NA 07/4/24 Gheshlaq Jan 19 Herat Gulran Qala E Ahmad NA NA 12 0 07/4/24 Kabul Bagrami Khan NA NA **Clinical Scabies** 0 08/4/24 Kapisa Center Magala 14 NA NA 06/4/24 Farmankhil 100 0 Laghman Qarghaee NA NA 0 07/4/24 Logar Puli Alam Dawodkhil 15 06/4/24 Gulran Chah Akram 12 0 0% 0% Herat 07/4/24 Guzara **Doctor Hashem** 18 0 100% 100% 3 0 06/4/24 Kabul Deh Mazang 5 72% 63% **Suspected Measles** 4th Area Zix 07/4/24 Nangarhar Zone of 9 0 67% Jalalabad 100% Jalalabad 06/4/24 Wardak Chak Shah Post 10 0 60% 65% 09/4/24 Nijrab Sabat Shirwani 9 0 N/A N/A Dog bite/Suspected

**Figure 4:** Clinical Scabies, Suspected Measles, Dog bite/suspected Rabies, Clinical Chickenpox, COVID-19 Cases, and deaths during the week 15<sup>th</sup> 2024.

Nijrab

Khanabad

10

6

Shaka Khail

Goram Aab

0

0

N/A

N/A

N/A

N/A

Kapisa

Kunduz

07/4/24

08/4/24

# Distribution of outbreak cases and deaths during the week 15, 2024 by Provinces

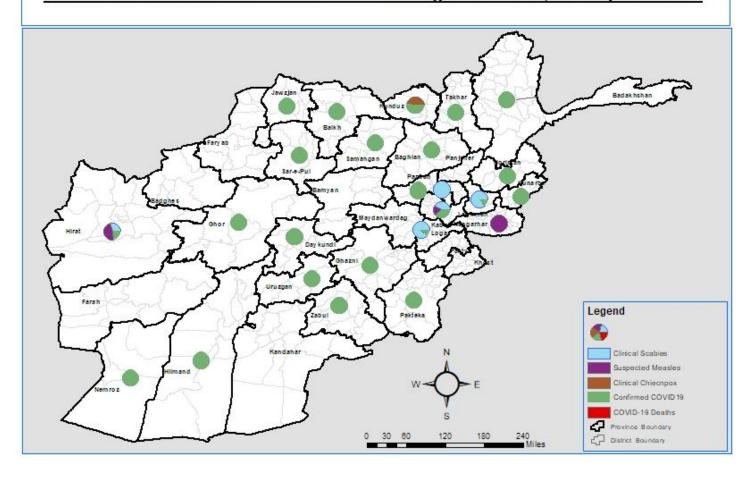


Table 4: Updated cumulative outbreak reports during 2024 (31 Dec 2023 to 13 April 2024)

Disease/Event	Disease/Event	Lab Confirm	Total Cases	<b>Total Deaths</b>
Scabies	173	0	5880	0
Measles	159	54	1908	23
Suspected Chickenpox	136	1	2341	0
Dog bites/Suspected Rabies	36	0	289	0
Pertussis	4	0	55	0
Mumps	14	0	406	0
Impetigo	2	0	79	0
Leishmaniasis	3	2	326	0
Pink Eye	3	0	29	0
ARI/Pneumonia	6	0	250	10
Food Poisoning	6	0	65	0
Dengue Fever	1	1	38	0
Typhoid Fever	1	0	10	0
CCHF	1	1	2	1

ARI cough and cold	1	0	55	0
Neonatal Tetanus	1	1	1	0
COVID-19	1	1	7	0
Anthrax	1	0	1	0
<b>Grand Total</b>	549	61	11742	34

## **Laboratory surveillance:**

A total of **1808** specimens were collected and shipped to CPHL and other regional laboratories. Out of which **03** specimens were confirmed for Acute Viral Hepatitis, **97** specimens were confirmed for Measles, and **07** specimens were confirmed for Malaria (Follow-up by the CPHL is going on).

### **Influenza Surveillance activities:**

In Epidemiological week 15<sup>th</sup> 2024, we have received reports from 10 out of 10 sentinel sites (Kabul, Kandahar, Balkh, Herat, Bamyan, Baghlan, Nangarhar, Kapisa, Paktia and Badakhshan). Out of all new hospital admissions, 560 (14.4%) Severe Acute Respiratory Infections cases were reported and 58% were under 5 years old. The proportion of SARI cases was decreased compared to week 14<sup>th</sup> 2024. 17 SARI-associated deaths were reported this week. At the 10 provincial levels, the top sentinel sites with the highest proportion of SARI cases were Kabul (39.0%), Paktya (37.0%), and Kapisa (34.3%) provinces. During this Epi-week, our field staff shipped 24 SARI and 16 ILI specimens to the National Influenza Center (NIC).

#### **COVID-19 Surveillance activities:**

This week, **1040** specimens were tested for suspected COVID-19. Out of which **281** specimens were confirmed for COVID-19 by RT-PCR.

- The COVID-19 case positivity rate was 27.0% this week, which increased 12.2% compared to the previous week.
- Out of **281 confirmed** cases, **448** contacts out of **122** were traced that were mostly family members, with an average of 4 contacts per case, and will be continued until 14 days after their last contact with the confirmed cases. Also, surveillance screening teams screened all the passengers at the points of entry for fever. In addition, health education was conducted for them. About **9,401** passengers have been screened for COVID-19 at the points of entry in three provinces (Kandahar, Herat and Nangarhar).

#### **Challenges:**

- Measles cases are still a public health concern in the country.
- Scabies cases are on increasing trend as a public health challenge due to unimproved lifestyle of the community.
- Chickenpox cases are on increasing trend, and it is recommended to provide its vaccine through the national EPI.
- Dog-bite cases are on increasing trend, and it is recommended to provide its control measure through the Zoonotic committee in national level.
- ARI cough and cold cases are on the decreasing trend (1.6%) compared to the previous week.
- Pneumonia cases are on a same trend compared to the previous week.
- Diarrheal diseases are on the increasing trend (0.9%) compared to the previous week.
- COVID-19 preventive and control measures should be strengthened.
- Vaccine preventable diseases (especially Measles and Pertussis vaccination and preventive measures) should be strengthened.
- The measles response strategy should be reviewed to respond to the current measles epidemic situation.

- EPI: As the surveillance system detected 1377 (IBS+EBS) suspected Measles cases with 04 (IBS+EBS) deaths at the national level, further prevention and control measures should be conducted by the EPI team.
- The findings should be analyzed further at different levels, and appropriate actions should be taken by the concerned department.