Ministry of Public Health

Monitoring Evaluation & Health Information System GD

Diseases Surveillance Department وزارت صحت عامه

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ریاست عمومی نظارت ارزیابی و سیستم معلومات صحی دیبارتمنت 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 21st

Date: 19 – 25/05/2024

Summary:

- Out of **613** functional Surveillance sentinel sites, **610** (**99.5**%) have submitted reports this week.
- A total of **705,408** new consultations, of which **254,757** (**36.1%**) were due to Surveillance targeted diseases. That included **135,428** (**53.2%**) males and **119,329** (**46.8%**) females. Also, **121,206** (**47.6%**) people under five years old and **133,551** (**52.4%**) people five years old and over were reported this week.
- The main causes of consultations this week were ARI Cough & Cold (149,339 = 21.2% cases out of total new consultations), Acute Diarrheal Diseases (74,460 = 10.6% cases out of total new consultations), and Pneumonia (22,848 = 3.2% cases out of total new consultations).
- A total of 296 deaths were reported this week, of which 58 (19.5%) deaths were due to surveillance-targeted diseases, which include 41 ARI Pneumonia deaths, 06 Suspected Meningitis deaths, 09 suspected Measles deaths, 01 Acute Viral Hepatitis death and 01 Covid-19 death.
- In addition, during this week, **50** outbreaks were reported: **20 clinical Scabies** outbreaks were reported from Baghlan, Dykundi, Herat, Kabul, Logar, Nangahar, Nuristan, Paktia, Panjshir, Samangan and Wardak provinces, **14 suspected Measles** outbreaks were reported from Badakhshan, Ghazni, Ghor, Helmand, Kabul, Kapisa, Kunar, Nuristan, Wardak and Zabul provinces, **07 Suspected Chickenpox** outbreaks were reported from Bamyan, Dykundi, Farah, Herat, Parwan and Kunduz provinces, **03 Malaria-PV** outbreaks were reported from Kapisa and Kunar provinces, **02 AWD** outbreaks were reported from Nangarhar province, **01 Suspected Mumps** outbreak was reported from Bamyan province, **01 Dog bite or suspected Rabies** outbreak was reported form Paktia province, **01 suspected Poisoning** outbreak was reported form Baghlan province and **01 Dengue Fever** outbreak was reported from Kabul province.

Moreover, 335 COVID-19 confirmed cases and 1723 suspected Measles cases (IBS) were reported at the national level.

Figure 1: Surveillance/NDSR Sentinel Sites with GPS location by type of Health Facility, 2024

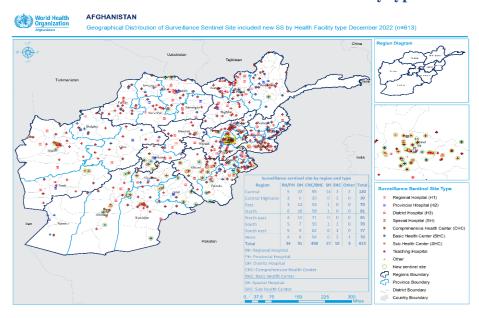


Table 1: Coverage of NDSR Surveillance System

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

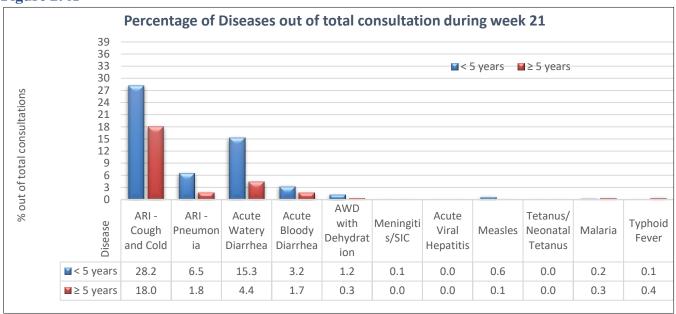
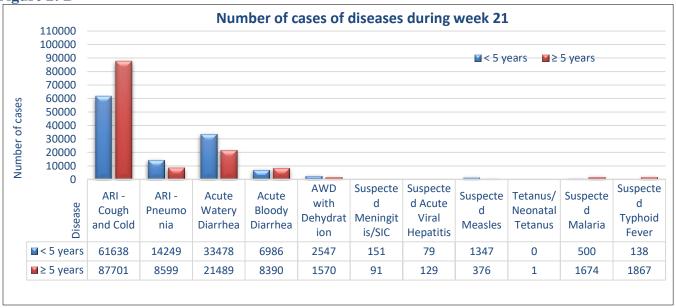


Figure 2: B



Seasonal Diseases:

Figure 3: A

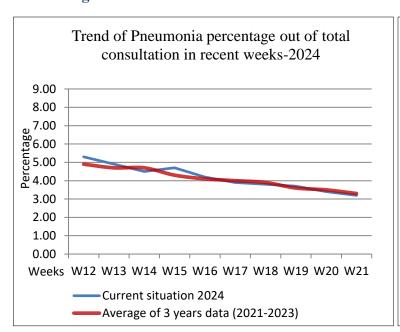


Figure 3: B

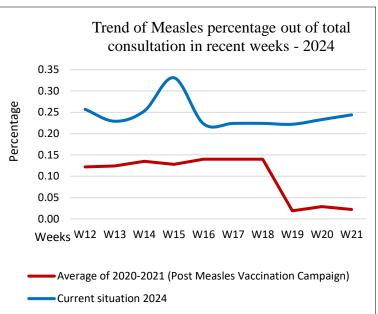


Figure 3: C

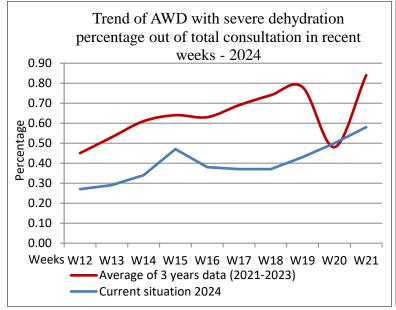


Figure 3: D

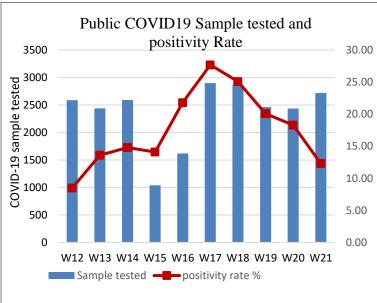


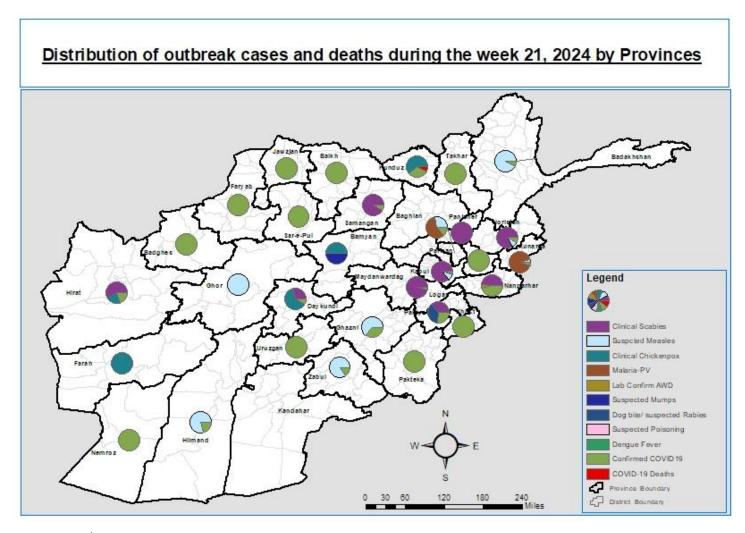
Table 3: Outbreaks in Week 21st 2024:

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AFGHANISTAN INFECTIOUS DISEASE OUTBREAKS REPORT Epidemiological week #21-2024									
Event / Diseases	Reported	Province		Village	Total Cases	eaths	Vaccination coverage, If VPD		
Name	date		District			Total Deaths	Related HF reported coverage	Field Estimated Coverage	
	23/5/24	Baghlan	Burka	Folol	9	0	NA	NA	
	18/5/24	Dedma di	Patoo	Qarabian	16	0	NA	NA	
	21/5/24	Dykundi	Patoo	Biri Valley	18	0	NA	NA	
	20/5/24		Karukh	Malomeh	43	0	NA	NA	
	22/5/24	Herat	Zenda Jan	Chahak	21	0	NA	NA	
	18/5/24		Bagrami	Zoor Kalay	9	0	NA	NA	
Clinical Scabies	19/5/24		Khak E Jabar	Babar	26	0	NA	NA	
	20/5/24	Kabul	Paghma n	Deh Arbab	12	0	NA	NA	
	21/5/24		Khak E Jabar	Bar Malang	17	0	NA	NA	
	22/5/24		Shakard ara	Boya Zaar	28	0	NA	NA	
	21/5/24	Logar	Puli Alam	Qalai Khwaja Akbar	10	0	NA	NA	
	23/5/24		Puli Alam	Hostel	15	0	NA	NA	
	18/5/24	Nangarhar	Agam	Agam Center High School	75	0	NA	NA	
	19/5/24	Nuristan	Want Waygal e	Arans	65	0	NA	NA	
	21/5/24		Anaba	Deh Sorkh	22	0	NA	NA	
	22/5/24	Panjshir	Hisa Awal	Madrasa Omar Ibnel khitab Kamarak	36	0	NA	NA	
	18/5/24	Samangan	Khuran Va Sarbagh	Baba Qamber	49	0	NA	NA	
	21/5/24	Parwan	Charikar	Dehmeskin	49	0	NA	NA	
	18/5/24	XX7 1 1	Markaz	Kot-E-Ashrow	19	0	NA	NA	
	21/5/24	Wardak	Said Abad	Mala Khil Tangy	24	0	NA	NA	
Suspected Massles	22/5/24	Badakhshan	Keshm	Jim Darah	33	0	30%	0%	
Suspected Measles	19/5/24	Ghazni	Center	Rawza	11	0	100%	70%	

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	22/5/24		Giru	Ahad Kala	11	0	80%	50%
	21/5/24	Ghor	Morgha b	Jandak	7	0	75%	56%
	21/5/24	Helmand	Marjah	Basir Bazar	12	0	85%	10%
	19/5/24	Kabul	Bagrami	Charkh Aab	10	0	76%	18%
	22/5/24	Kapisa	Tagab	Meia Khail Khan Doda	10	0	73%	40%
	21/5/24	Kunar	Sarkani	Tango Camp Village	7	1	67%	43%
	18/5/24	Nuristan	Wama	Panesha Archano	7	0	80%	20%
	18/5/24		Chak	Kaka Khil	7	0	78%	67%
	19/5/24	Wardak	Chak	Hazar Bagh	9	0	73%	63%
	20/5/24		Said Abad	Mahro	17	0	69%	46%
	18/5/24	Zabul	Shah- Joy	Sarizo	7	0	97%	31%
	19/5/24		Qalat	Maghlizai	21	0	90%	40%
Clinical Chickenpox	18/5/24	Bamyan	Waras	Somak	21	0	NA	NA
	20/5/24	- Dykundi	Kitty	Kisaw Valley	26	0	NA	NA
	20/5/24		Patoo	Sahoor Valley	49	0	NA	NA
	21/5/24	Farah	Sheep Koh	Ahsanul Aolom Religious School (Kin Village)	9	0	NA	NA
	22/5/24	Herat	Koshk- E-Robat Sangi	Khajeh Golbid	23	0	NA	NA
	18/5/24	Parwan	Bagram	Qala e Nasru	19	0	NA	NA
	18/5/24	Kunduz	Kunduz	Sari Dawrah	8	0	NA	NA
	20/5/24	- Kapisa	Nijrab	Nijrab DH	8	0	NA	NA
Malaria-PV	21/5/24		Nijrab	Tagab DH	9	0	NA	NA
watata ia-r v	19/5/24	Kunar	Shigal	Difrrent Village Of Shigal CHC Catchment Area	159	0	NA	NA
	21/5/24		Khiwa	Tangi Gorig	1	0	NA	NA
Lab Confirm AWD	22/5/24	Nangarhar	Sorkhro ad	Bakhtan	7	0	NA	NA
Suspected Mumps	18/5/24	Bamyan	Waras	Shinia Taght	22	0	NA	NA
Dog bite or Suspected Rabies	17/5/24	Paktia	Zurmat	Khuni Bagh Village,	7	0	NA	NA
Suspected Poisoning	23/5/24	Baghlan	Burka	Qomandan Jamil	5	0	NA	NA
Dengue Fever	18/5/24	Kabul	Musahi &	Chino Ghondai & Ghaziabad	2	0	NA	NA

	Chahar			
	Asyab			

Figure 4: Clinical Scabies, Suspected Measles, Clinical Chickenpox, Malaria-PV, Lab Confirm AWD, Suspected Mumps, Dog bite/suspected Rabies, Suspected Poisoning, Dengue Fever, COVID-19 cases, and deaths during



the week 21st 2024.

Table 4: Updated cumulative outbreak reports during 2024 (31 Dec 2023 to 25 May 2024)

Disease/Event	Disease/Event	Lab-Confirm	Total Cases	Total Deaths
Scabies	250	0	9044	0
Measles	235	60	2818	24
Suspected Chickenpox	170	2	2908	0
Dog bites/Suspected Rabies	45	0	356	0
Pertussis	4	0	55	0
Mumps	15	0	428	0
Impetigo	2	0	79	0
Leishmaniasis	3	2	326	0
Pink Eye	3	0	29	0

ARI/Pneumonia	8	0	300	10
Food Poisoning	8	0	77	0
Dengue Fever	2	1	40	0
Typhoid Fever	4	0	96	0
CCHF	2	2	5	2
ARI cough and cold	1	0	55	0
Neonatal Tetanus	2	2	4	1
COVID-19	4	3	213	4
Anthrax	3	0	3	0
Acute Watery Diarrhea	4	4	13	0
Confirmed Malaria	6	6	618	0
Grand Total	771	82	17467	41

Laboratory surveillance:

A total of **4042** specimens were collected and shipped to CPHL and other regional laboratories. Out of which **10** specimens were confirmed for Acute Viral Hepatitis, **106** specimens were confirmed for Measles (Follow-up by the CPHL is going on).

Influenza Surveillance activities:

In epidemiological week 21st 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, 618 (13.3%) Severe Acute Respiratory Infections cases were reported and 57% were under 5 years old. The proportion of SARI cases decreased compared to week 20th 2024. 23 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 (44.0%), Paktya (38.0%), and Badakhshan (24.0%) provinces. During this Epi-week, our field staff shipped 30 SARI and 20 ILI specimens to the National Influenza Center (NIC).

COVID-19 Surveillance activities:

This week, **2720** specimens were tested for the suspected COVID-19. Out of which **335** specimens were confirmed for COVID-19 by RT-PCR.

- The COVID-19 case positivity rate was 12.3% this week, which decreased 6.0% compared to the previous week.
- Out of **335 confirmed** cases, **714** contacts out of **212** 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 **51,118** passengers have been screened for COVID-19 at the four points of entry in (Kandahar, Herat, Nangarhar and Nimroz) provinces.

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 (0.9%) compared to the previous week.
- Pneumonia cases are on the decreasing trend (0.2%) compared to the previous week.
- Diarrheal diseases are on the increasing trend (1.2%) 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 1892 (IBS+EBS) suspected Measles cases with 10 (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.