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 سروپلانس دبیار تمنت

National Disease Surveillance & Response (NDSR)

NDSR Weekly Epidemiological Report 22nd

Date: 26 /05 - 01/06/2024

Summary:

- Out of **613** functional Surveillance sentinel sites, **607** (**99%**) have submitted reports this week.
- A total of **726,082** new consultations, of which **262,234** (**36.1%**) were due to Surveillance targeted diseases. That included **138,355** (**52.8%**) males and **123,879** (**47.2%**) females. Also, **125,432** (**47.8%**) people under five years old and **136,802** (**52.2%**) people five years old and over were reported this week.
- The main causes of consultations this week were ARI Cough & Cold (148,586 = 20.5% cases out of total new consultations), Acute Diarrheal Diseases (83,324 = 11.5% cases out of total new consultations), and Pneumonia (21,672= 3% cases out of total new consultations).
- A total of 368 deaths were reported this week, of which 81 (22%) deaths were due to surveillance-targeted diseases, which include 62 ARI Pneumonia deaths, 08 Suspected Meningitis deaths, 06 suspected Measles deaths, 01 Acute Viral Hepatitis death, 01 Covid-19 death, 01 Acute Watery Diarrhea with Dehydration death, 01 Suspected Hemorrhagic Fever death and 01 Neonatal Tetanus death.
- In addition, during this week, **51** outbreaks were reported: **17 suspected Measles** outbreaks were reported from Farah, Ghazni, Helmand, Kabul, Kunduz, Laghman, Logar, Parwan, Panjshir, Takhar, Urozgan and Wardak provinces, **16 clinical Scabies** outbreaks were reported from Bamyan, Ghazni, Herat, Kapisa, Khost, Nangarhar, Panjshir, Parwan, Samangan, Wardak and Zabul provinces, **06 Suspected Chickenpox** outbreaks were reported from Bamyan, Kabul, Laghman, Parwan and Takhar provinces, **04 Malaria-PV** outbreaks were reported from Kapisa, Kunar, Nuristan and Nangarhar provinces, **04 AWD** outbreaks were reported from Kabul, Nangarhar and Nuristan provinces, **03 Dog bite or suspected Rabies** outbreaks were reported form Kandahar, Khost and Paktia provinces and **01 Food Poisoning** outbreak was reported form Nangarhar province.

Moreover, **271** COVID-19 confirmed cases and **1780** 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

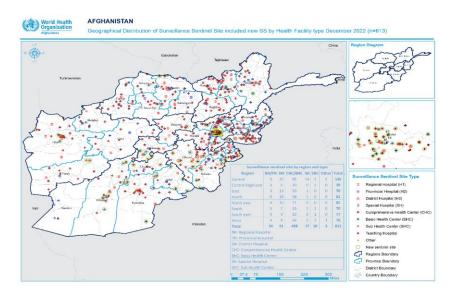


Table 1: Coverage of NDSR Surveillance System

| 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

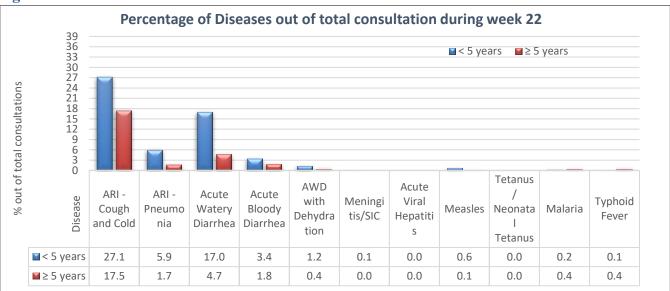
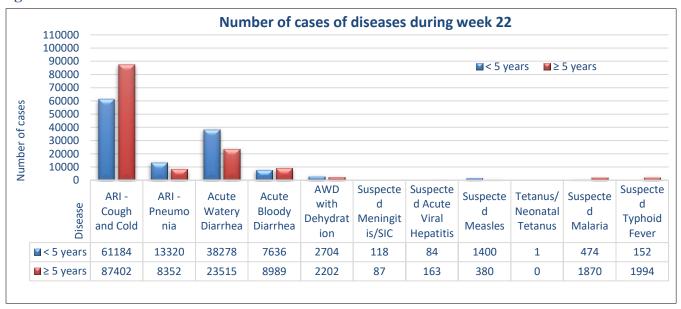


Figure 2: B



Seasonal Diseases:

Figure 3: A

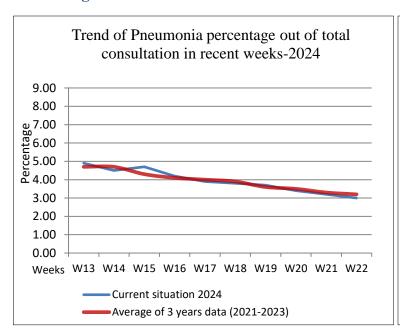


Figure 3: B

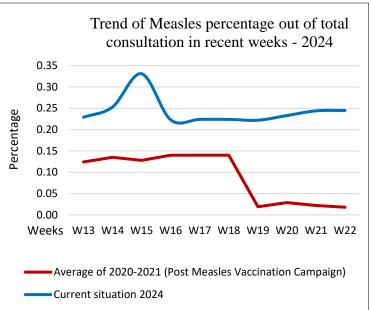


Figure 3: C

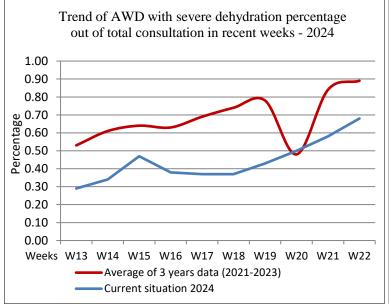


Figure 3: D

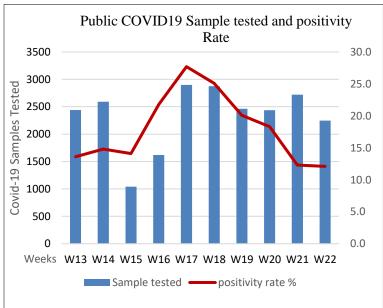


Table 3: Outbreaks in Week 22nd 2024:

AFGHANISTAN | INFECTIOUS DISEASE OUTBREAKS REPORT | Epidemiological week #22-2024

| | | Province | District | Village | Total Cases | Total Deaths | Vaccination | |
|--------------------------|----------|----------|-----------------|--------------------------------|-------------|--------------|---------------------------------|-----------------------|
| Event / Diseases Name | Reported | | | | | | coverage, If VPD Related Field | |
| Name | date | | | | | | HF reported coverage | Estimated Coverage |
| | 28/5/24 | Farah | Farah Center | Qala Muzika (Farqa) | 11 | 0 | 90% | 80% |
| | 27/5/24 | Ghazni | Deyak | Ramak | 14 | 0 | 80% | 25% |
| | 28/5/24 | | Gellan | Sapidar | 18 | 0 | 45% | 0% |
| | 30/5/24 | | Center | Tawhid Abad | 14 | 0 | 80% | 45% |
| | 01/6/24 | Helmand | Garamsir | Shamalan | 7 | 0 | 80% | 15% |
| | 26/5/24 | V ab1 | 2 | Dahan E Nal | 5 | 0 | 80% | 52% |
| | 26/5/24 | Kabul | 12 | Qala E Jabar | 9 | 0 | 73% | 43% |
| | 26/5/24 | Kunduz | Kunduz | Rustaq Abad | 6 | 0 | 51% | 42% |
| Suspected Measles | 26/5/24 | Laghman | Mehterla m | Deh Malakh | 16 | 0 | 82% | 72% |
| | 26/5/24 | Logar | M. Agha | Abbazak | 7 | 0 | 80% | 40% |
| | 26/5/24 | Parwan | Charikar | Dehmeskin Balla | 10 | 0 | 80% | 75% |
| | 27/5/24 | Panjshir | Hisa Awal | Bergman | 6 | 0 | 80% | 65% |
| | 27/5/24 | Takhar | Taloqan | Eshanha-E- Hilal | 12 | 0 | 50% | 10% |
| | 28/5/24 | | Taloqan | Gulistan Abad | 7 | 0 | 60% | 20% |
| | 26/5/24 | Urozgan | Tarin-Kot | Khorma | 15 | 0 | 80% | 40% |
| | 28/5/24 | Wardak | Said Abad | Dag Bagharay | 15 | 0 | 70% | 55% |
| | 29/5/24 | waruak | Nerkh | Shamsher Chenzaye | 21 | 0 | 77% | 59% |
| | 28/5/24 | Bamyan | Saighan | Qarkhawal | 35 | 0 | NA | NA |
| Clinical Scabies | 29/5/24 | Ghazni | Center | Qalai Amir Mohammad Khan | 29 | 0 | NA | NA |
| | 25/5/24 | Hanst | Injil | Jalil Abad | 151 | 0 | NA | NA |
| | 01/6/24 | Herat | City | Koja Robat | 20 | 0 | NA | NA |
| | 26/5/24 | | Center | Ali Khail And Qurotak | 16 | 0 | NA | NA |
| | 28/5/24 | Kapisa | Nijrab | Bagh Khana | 38 | 0 | NA | NA |
| | 30/5/24 | | Nijrab | Vihar | 22 | 0 | NA | NA |

| | | 1 | | | | | | |
|---------------------------------|---------|-----------|----------------------------|-------------------------------------|-----|---|----|----|
| | 31/5/24 | Khost | Gorbaz | Marmandai | 22 | 0 | NA | NA |
| 23/5/24 | | Nangarhar | Agam | Pacheer Mala Sahib Madrasa | 88 | 0 | NA | NA |
| | 29/5/24 | rvangamar | Rodat | Alataqva Madrasa | 73 | 0 | NA | NA |
| | 26/5/24 | Panjshir | Hisa Awal | Dashrewat | 13 | 0 | NA | NA |
| | 26/5/24 | Parwan | Bagram | Niazi | 59 | 0 | NA | NA |
| | 26/5/24 | Samangan | Aybak | Childrens Orphanage | 19 | 0 | NA | NA |
| | 28/5/24 | Wardak | Markaz | Mala Kaka | 23 | 0 | NA | NA |
| | 31/5/24 | w aruak | Nerkh | Totarak | 49 | 0 | NA | NA |
| | 27/5/24 | Zabul | Qalat | Tarnak Privat School | 51 | 0 | NA | NA |
| | 26/5/24 | Bamyan | Panjab | Dahan Qalacha, | 31 | 0 | NA | NA |
| | 26/5/24 | Baniyan | Yakawlan g | Qafqul | 23 | 0 | NA | NA |
| Clinical Chickenpox | 26/5/24 | Kabul | 15 | Qasaba | 8 | 0 | NA | NA |
| | 29/5/24 | Laghman | Qarghaee | Durga Saloozi | 25 | 0 | NA | NA |
| | 26/5/24 | Parwan | Bagram | Dahane Maidan | 15 | 0 | NA | NA |
| | 26/5/24 | Takhar | Taloqan | Budala Qolbars | 6 | 0 | NA | NA |
| | 27/5/24 | Kapisa | Alasay | CHC Alasay | 10 | 0 | NA | NA |
| Malaria-PV | 26/5/24 | Kunar | Watapoor | Watapoor BHC Catchment Area | 238 | 0 | NA | NA |
| | 23/5/24 | Nuristan | Noragram | Nangraj BHC | 168 | 0 | NA | NA |
| | 23/5/24 | Nangarhar | Nazian | Nazian CHC | 93 | 0 | NA | NA |
| | 26/5/24 | Kabul | 22 | Qala E Mosam | 1 | 0 | NA | NA |
| Lab Confirm AWD | 29/5/24 | NI 1 | Sorkhroad | Dorkhe Camp | 1 | 0 | NA | NA |
| | 26/5/24 | Nangarhar | Jalalabad | 1st Zone Speena Mani | 2 | 0 | NA | NA |
| Dog bite or Suspected Rabies | 29/5/24 | Nuristan | 22 | Mamo | 1 | 0 | NA | NA |
| | 22/5/24 | Kandahar | Maiwand | Maiwand CHC (743) | 9 | 0 | NA | NA |
| | 28/5/24 | Khost | Ismail Khil Mandozai | Haider Khel Daago | 5 | 0 | NA | NA |
| | 01/6/24 | Paktia | Zurmat | Alamkhil | 8 | 0 | NA | NA |
| Food Poisoning | 29/5/24 | Nangarhar | Rodat | Darul Emanutaqva Madrasa Baro | 66 | 0 | NA | NA |

Figure 4: Suspected Measles, Clinical Scabies, Clinical Chickenpox, Malaria-PV, Lab Confirm AWD, Dog bite/suspected Rabies, Food Poisoning, COVID-19 cases, and deaths during the week 22nd 2024.

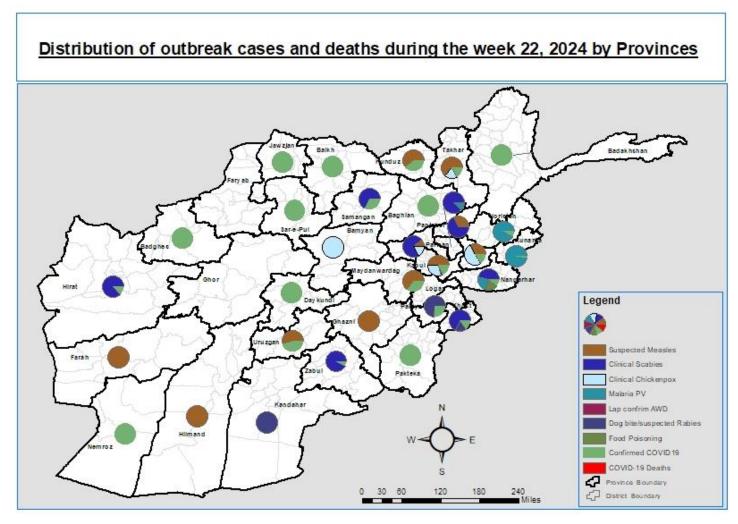


Table 4: Updated cumulative outbreak reports during 2024 (31 Dec 2023 to 01 June 2024)

| Disease/Event | Disease/Event | Lab-Confirm | Total Cases | Total Deaths |
|----------------------------|---------------|-------------|--------------------|---------------------|
| Scabies | 266 | 0 | 9744 | 0 |
| Measles | 252 | 60 | 3011 | 24 |
| Suspected Chickenpox | 176 | 2 | 3016 | 0 |
| Dog bites/Suspected Rabies | 48 | 0 | 378 | 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 | 9 | 0 | 143 | 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 | 8 | 8 | 18 | 0 |
| Confirmed Malaria | 10 | 10 | 1127 | 0 |
| Grand Total | 822 | 90 | 19070 | 41 |

Laboratory surveillance:

A total of **4300** specimens were collected and shipped to CPHL and other regional laboratories. Out of which **10** specimens were confirmed for Acute Viral Hepatitis, **125** specimens were confirmed for Measles (Follow-up by the CPHL is going on).

Influenza Surveillance activities:

In Epidemiological Week 22nd 2024, we have received reports from all ten influenza sites (Kabul, Kandahar, Balkh, Herat, Bamyan, Baghlan, Nangarhar, Kapisa, Paktia, and Badakhshan) provinces. Out of all new hospital admissions, 626 (12,2%) Severe Acute Respiratory Infections cases were reported, and 349 (55%) were under 5 years old. The proportion of SARI cases decreased compared to weeks 21–2024. 27 SARI-associated deaths were reported this week. At the 10 Influenza sentinel sites, the top sites with the highest proportion of SARI cases were Kabul (44%), Paktya (36%), and Badakhshan (25%). During this week, our field staff collected 30 SARI and 20 ILI specimens, which were then shipped to the NIC in Kabul.

COVID-19 Surveillance activities:

This week, **2247** specimens were tested for the suspected COVID-19. Out of which **271** specimens were confirmed for COVID-19 by RT-PCR.

- The COVID-19 case positivity rate was 12.1% this week, which decreased 0.2% compared to the previous week.
- Out of **271 confirmed** cases, **643** contacts out of **189** 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 **34,530** 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 (0.7%) 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 (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 1973 (IBS+EBS) suspected Measles cases with 06 (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.