Ministry of Public Health

Monitoring Evaluation & Health Information System GD

Diseases Surveillance Department

د عامی روغتیا وزارت

ریاست عمومی نظارت ارزیابی و سیستم معلومات صحی دیبارتمنت سرویلانس امراض

وزارت صحت عامه

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

Epidemiological Report | Week # 30- 2025

30 (20 - 26 July 2025)

Summary:

- Out of 613 functional surveillance sentinel sites, 612 (99.9%) have submitted reports this week.
- A total of 723,740 new consultations were reported among which 261,291 (36.1%) were due to surveillance-targeted diseases, which include 133,729 (51.1%) females. and 125,685 (48.1%) children under five.
- The most frequently reported surveillance-targeted diseases this week were ARI cough & cold with 132,087 cases (18.2%), acute diarrheal diseases with 104,543 cases (14.4%), and pneumonia with 16,762 cases (2.3%).
- A total of 381 deaths were reported this week, of which 64 (16.8%) deaths were due to surveillance-targeted diseases. This includes 38 ARI pneumonia deaths, 13 suspected measles deaths, 6 AWD with dehydration deaths, 3 suspected meningitis deaths, 3 hemorrhagic fever deaths and 1 acute viral hepatitis death.
- During this week, 35 outbreaks were reported: 10 measles outbreaks, 12 scabies outbreaks, 3 chickenpox outbreaks, 2 AWD + dehydration outbreaks, 1 Brucellosis outbreak, 2 dog bite/ suspected rabies outbreaks, 3 pertussis outbreaks, 1 food poisoning outbreak, 1 CCHF outbreak.

Table 1: Top 7 priority infectious diseases cases and deaths out of total consultations in week 30-2025

	Cases			Deaths			Total						
Top 7 Diseases	Male		Female		Male		Female		Cases		Deaths		CFR
	< 5 Y	> 5 Y	< 5 Y	> 5 Y	< 5 Y	> 5 Y	< 5 Y	> 5 Y	Number	%	Number	%	
AWD with Dehydration	1642	1111	1555	1252	3	0	1	0	5560	0.8	4	1.0	0.1
ARI-Pneumonia	5557	2941	4970	3294	13	1	19	5	16762	2.3	38	10.0	0.2
Measles	723	247	606	214	6	0	7	0	1790	0.2	13	3.4	0.7
CCHF	0	31	0	6	0	3	0	0	37	0.0	3	0.8	8.1
Confirmed Malaria	206	924	188	862	0	0	0	0	2180	0.3	0	0.0	0.0
Dengue Fever	0	18	0	17	0	0	0	0	35	0.0	0	0.0	0.0
Covid-19	1	705	2	698	0	0	0	0	1406	0.2	0	0.0	0.0

Figure 1: Surveillance/ NDSR sentinel sites location by type of health facility, 2025

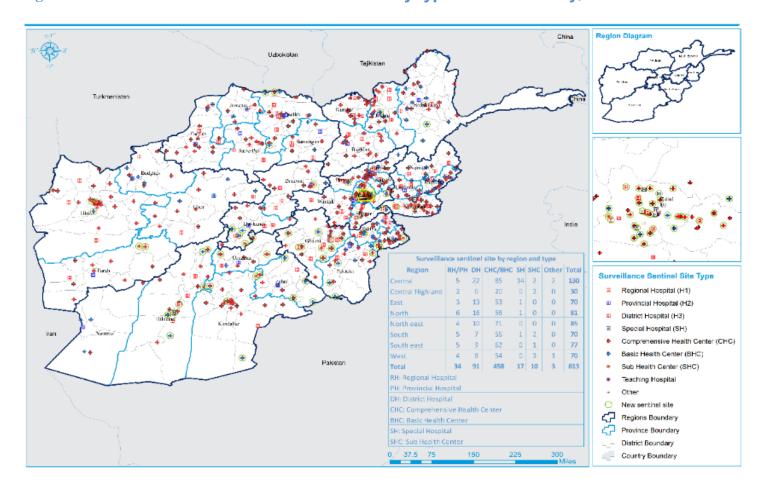


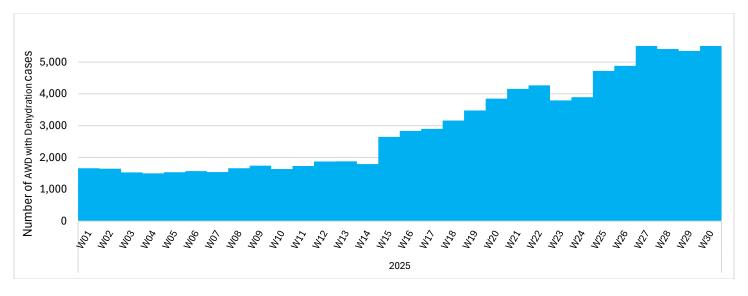
Table 2: Cumulative data on 17 surveillance priority diseases (W01-W30, 2025)

	Cases				Deaths			Total					
Surveillance Indicators	Male Fem			male	nale Male			Female		Cases		ths	CFR
	< 5 Y	> 5 Y	< 5 Y	> 5 Y	< 5 Y	> 5 Y	< 5 Y	> 5 Y	Number	%	Number	%	
AWD with Dehydration	27,206	18,434	24,287	20,014	22	2	16	2	89,941	0.4	42	0.3	0.05
Acute Bloody Diarrhea	87,247	100,980	79,085	105,607	1	1	1	1	372,919	1.8	4	0.0	0.00
AFP	263	158	176	94	0	0	1	0	691	0.0	1	0.0	0.14
Acute Viral Hepatitis	1,707	2,225	1,542	2,222	14	17	10	12	7,696	0.0	53	0.4	0.69
Acute Watery Diarrhea	417,847	246,973	388,004	268,167	5	0	3	0	1,320,991	6.5	8	0.1	0.00
ARI-C&C	959,410	1,296,217	923,640	1,530,802	0	0	0	0	4,710,069	23.1	0	0.0	0.00
Probable Diphtheria	0	1	0	1	0	0	0	0	2	0.0	0	0.0	0.00
ССНБ	0	592	2	236	0	41	0	25	830	0.0	66	0.5	7.95
Confirmed Malaria	2,287	11,252	2,211	9,331	0	0	0	0	25,081	0.1	0	0.0	0.00
Measles	33,239	9,422	28,941	9,027	234	8	248	7	80,629	0.4	497	4.0	0.62
Covid-19	140	22,780	193	22,604	0	3	0	10	45,717	0.2	13	0.1	0.03
Pertussis	261	50	219	38	0	0	0	0	568	0.0	0	0.0	0.00
ARI-Pneumonia	291,452	149,639	262,137	170,296	840	194	742	170	873,524	4.3	1,946	15.7	0.22
Meningitis	1,429	1,269	1,333	1,403	68	24	49	23	5,434	0.0	164	1.3	3.02
Dengue Fever	0	184	0	129	0	0	0	0	313	0.0	0	0.0	0.00
Neonatal Tetanus	5	4	2	1	1	1	0	0	12	0.0	2	0.0	0.00
Typhoid Fever	1,540	21,135	1,440	26,848	0	0	0	0	50,963	0.2	0	0.0	0.00
NDSR targeted diseases/Deaths	1,824,033	1,881,315	1,713,212	2,166,820	1,185	291	1,070	250	7,585,380	37.2	2,796	23	0.04
Total of new clients/ death	3,193,285	5,549,153	3,092,724	8,569,609	4,147	2,944	2,961	2,316	20,404,771	100	12,368	100	0.06

Epidemic situation of AWD with dehydration:

- The epi-curve of AWD with dehydration illustrates a gradual increase since week 11-2025.
- During 30th week of 2025, a total of 5,560 cases and 4 deaths have been reported (CFR=0.1%)
- Out of the total cases, 3,197 (57.5%) were under-five children, and 2,807 (49.3%) were females.
- Since the beginning of 2025, a total of 89,941 AWD + dehydration cases and 42 deaths (CFR=0.05%) have been reported. Of these cases 44,301 (49.2%) are females and 51,493 (57.2%) are children under five.

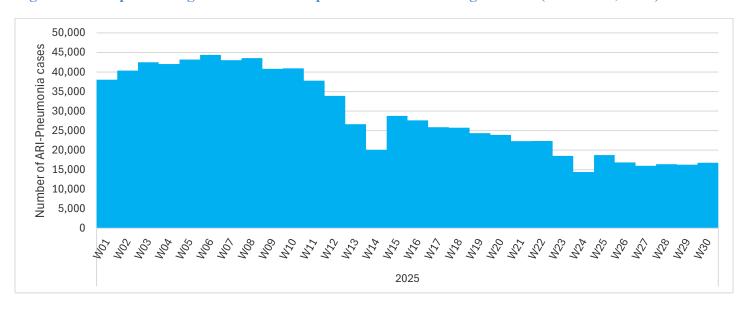
Figure 2: The epi-curve of AWD with dehydration cases in Afghanistan (W01-W30, 2025)



Epidemic situation of ARI pneumonia:

- The epi-curve of ARI pneumonia illustrates a notable decrease since week 09-2025.
- During the 30th week of 2025, a total of 16,762 cases and 38 deaths have been reported (CFR=0.2%)
- Out of the total cases, 10,527 (62.8%) were under-five children, and 8,264 (49.3%) were females.
- Since the beginning of 2025, a total of 873,524 ARI pneumonia cases and 1,946 deaths (CFR=0.22%) have been reported. Of these cases 432,433 (49.5%) are females and 553,589 (63.4%) are children under five.

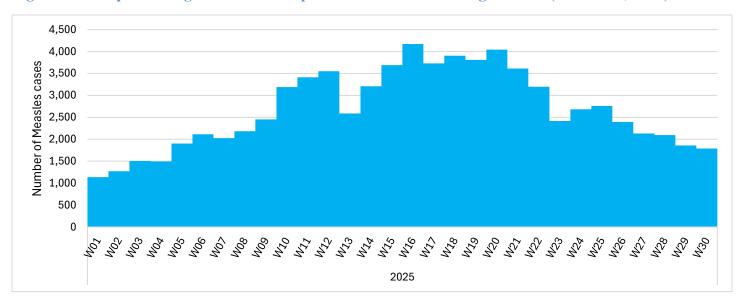
Figure 3: The epidemiological curve of ARI pneumonia cases in Afghanistan (W01-W30, 2025)



Epidemic situation of measles:

- The epi-curve of measles illustrates a notable decrease since week 20-2025.
- During the 30th week of 2025, a total of 1,790 cases and 13 deaths have been reported (CFR=0.7%)
- Out of the total cases, 1,329 (74.2%) were under-five children, and 820 (45.8%) were females.
- Since the beginning of 2025, a total of 80,629 measles cases and 497 deaths (CFR=0.6%) have been reported. Of these cases 37,968 (47.1%) are females and 62,180 (77.1%) are children under five.

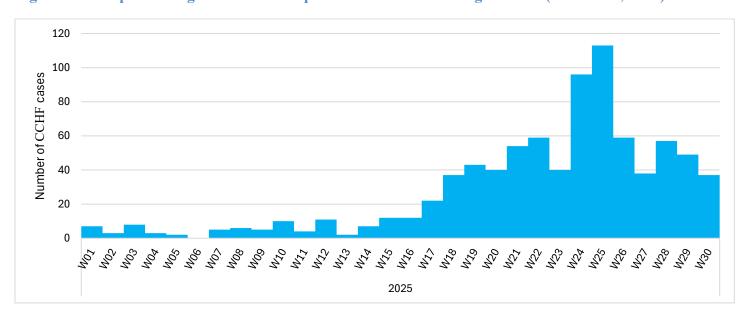
Figure 4: The epidemiological curve of suspected measles cases in Afghanistan (W01-W30, 2025)



Epidemic situation of CCHF:

- The epi-curve of suspected CCHF cases has shown a gradual decrease since week 25-2025.
- During week 30th 2025, a total of 37 cases and 3 deaths have been reported (CFR=8.1%)
- Out of the total cases, none of them children under five, and 6 of them (16.2%) were female.
- Since the beginning of 2025, a total of 830 suspected CCHF cases and 66 deaths (CFR=7.9%) have been reported. Of these cases 238 (28.6%) are females and 2 (0.2%) are children under five.

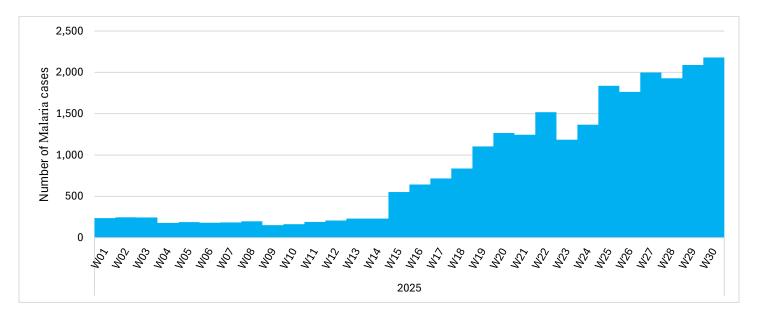
Figure 5: The epidemiological curve of suspected CCHF cases in Afghanistan (W01-W30, 2025)



Epidemic situation of malaria:

- The epi-curve of confirmed malaria illustrates a considerable increase since week 15-2025
- During 30th week of 2025, a total of 2,180 cases and zero deaths have been reported (CFR=0.0%)
- Out of the total cases, 394 (18.1%) were children under-five, and 1,050 (48.2%) were females.
- Since the beginning of 2025, a total of 25,081 confirmed malaria cases and zero deaths have been reported. Of these cases 11,542 (46.0%) are females and 4,498 (17.9%) are children under five.

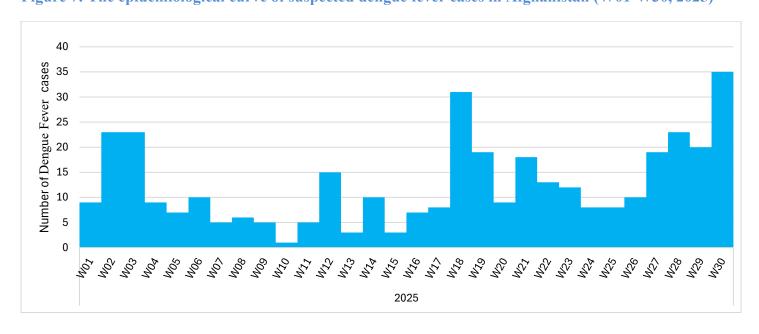
Figure 6: The epidemiological curve of confirmed malaria cases in Afghanistan (W01-W30, 2025)



Epidemic situation of dengue fever:

- The epi-curve of suspected dengue fever illustrates stabilization at low level since the beginning of 2025.
- During 30th week of 2025, a total of 35 cases and 0 deaths have been reported (CFR=0.0%)
- Out of the total cases, none of them children under five and 17 (48.6%) cases were females.
- Since the beginning of 2025, a total of 313 suspected dengue fever cases and zero deaths have been reported. Of these cases 129 (41.2%) are females and none of them children under five.

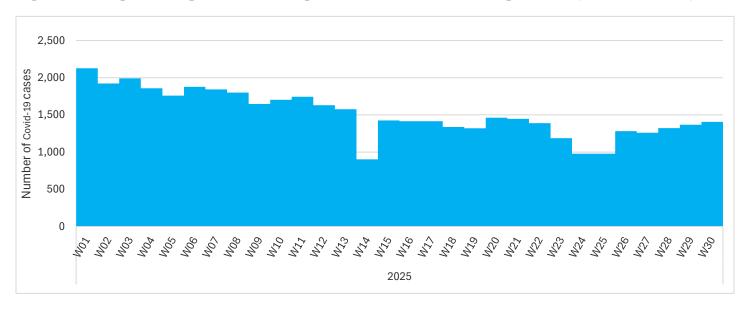
Figure 7: The epidemiological curve of suspected dengue fever cases in Afghanistan (W01-W30, 2025)



Epidemic situation of COVID-19

- The epi-curve of suspected COVID-19 illustrates a gradual decrease from weeks 1-2025.
- During 30th week of 2025, a total of 1,406 cases and 0 death have been reported (CFR=0.0%)
- Out of the total cases, 3 (0.2%) were under-five children, and 700 (49.8%) were females.
- Since the beginning of 2025, a total of 45,717 suspected COVID-19 cases and 13 deaths (CFR=0.03%) have been reported. Of these cases 22,797 (49.8%) are females and 333 (0.7%) are children under five.

Figure 8: The epidemiological curve of suspected COVID-19 cases in Afghanistan (W01-W30, 2025)



Influenza surveillance activities:

- ➤ In Epidemiological week 30 2025, reports received from all ten influenza sites. Out of all new hospital admissions, 568 (11%) Severe Acute Respiratory Infections cases were reported, and 365 (64.2%) were under 5 years old and 268 (47.1%) were female.
- The proportion of SARI cases was the same compared to the previous week, and 26 SARI-associated deaths were reported this week: 20 (76.9%) children under five and 17 (65.3%) were females.
- ➤ The highest proportions of SARI cases among the sentinel sites were reported from Bamyan (27.8%), Kabul (23%), and Balkh (17%).
- ➤ During this week, field staff collected and shipped 50 specimens (30 SARI and 20 ILI) to the NIC. Among these tested samples, 3 lab-confirmed COVID-19 cases, no lab-confirmed cases of Influenza, and no new influenza virus subtypes were identified.

Table 3: The Afghanistan NIC lab result of influenza specimens in Week 30, 2025

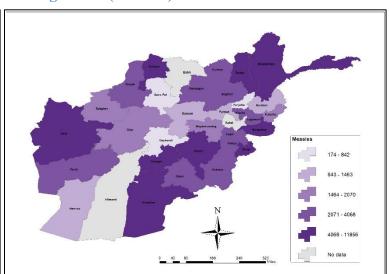
Influenza site	Specimen	Lab	Lab confirmed influenza subtype details						
Influenza site	Tested	Confirmed	Flu A (H1N1pdm09)	Flu A (H3)	Flu B (Victoria)	Flu B (Yamagata)	rate (%)		
Baghlan	5	2	0	0	0	0	40%		
Balkh	5	0	0	0	0	0	0%		
Bamyan	5	0	0	0	0	0	0%		
Herat	5	0	0	0	0	0	0%		
Kabul	5	0	0	0	0	0	0%		
Kandahar	5	0	0	0	0	0	0%		
Kapisa	5	1	0	0	0	0	20%		
Nangarhar	5	0	0	0	0	0	0%		
Paktia	5	0	0	0	0	0	0%		
Badakhshan	5	0	0	0	0	0	0%		
Total	50	3	0	0	0	0	6%		

Figar 9: Geographical distribution of major infectious diseases cumulative cases by province in

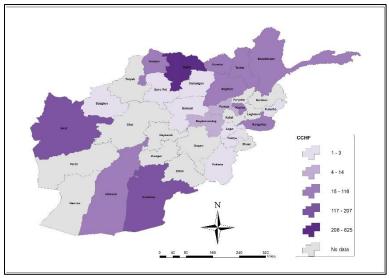
Afghanistan, from 29 Dec 2024-26 July 2025

Figar 9: A (Pneumonia)

Figar 9: B (Measles)



0Figar 9: C (CCHF)



Figar 9: D (Malaria)

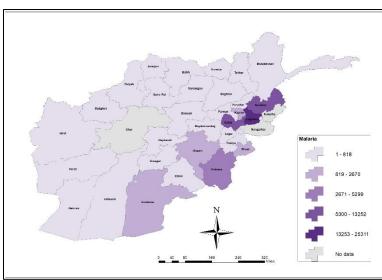


Table 4: Afghanistan infectious disease outbreaks report | Epidemiological Week # 30-2025

Table 1. Trigitalistan	i infectious disease outbreaks report Epidemiological week		EK # 3U-2U23						
					ases	Deaths		nation e, If VPD	
Event / Diseases Name	Reported date	PPAVIDA	District	Village	Total Cases	Total De	HF reported coverage	Field Estimate d Coverage	
	21/7/2025	Ghazni	Waghaz	Kaboloo	16	0	73%	5%	
	22/7/2025	Ghor	Shahrak	Ghudoq and Pajia	10	0	95%	65%	
	23/7/2025	Jawzjan	Sheberghaan	Charpaikal	14	0	63%	32%	
	19/7/2025	Kabul	Shakar_Dara h	Chahar Khil Kariz Mir	7	0	59%	23%	
	19/7/2025	Kabul	Kabul	Shahrak Refah Sare Kotal	6	0	67%	48%	
Measles	19/7/2025	Khost	Khost (Matoon)	Sarankot	6	0	80%	62%	
	22/7/2025	Khost	Tanay	Dakhi	9	0	88%	71%	
	26/7/2025	Nimroz	Zaranj	Haji Musa Village	8	0	3%	0%	
	21/7/2025	Takhar	Taloqan	2nd street of Qadam	5	0	89%	80%	
	19/7/2025	Urozgan	Deh Rawood	Qalacha	9	0	84%	72%	
	21/7/2025	Kunduz	Hazrat Imam Sahib	Puli Hamam	12	0	89%	65%	
Pertussis	20/7/2025	Paktika	Torwo	Markazi	13	0	92%	58%	
	20/7/2025	Wardak	Said_Abad	Parsha	4	0	95%	82%	
Scabies			*	Bamyan (2), Ghor (nd Wardak (1) provin	, -		· //	\ //	
Chickenpox		3 Chickenpox outbreaks were reported Bamyan (2) and Samangan (1) provinces (Total number							
AWD + Dehydration	2 AWD + Dehydration outbreaks were reported from Parwan provinces (Total number of cases = 4 and 1 death)								
Dog bite/Suspected Rabies	2 Dog bite	2 Dog bite outbreaks were reported form Helmand (1) and Kabul (1) provinces (Total number of cases = 20)							
Food Poisoning	1 Food poisoning outbreak was reported from Sar-e-pul province (Total number of cases =4)								
CCHF	1 CCHF ou	tbreak was re	ported from Far	yab province (Total 1	numb	er of o	cases = 2)		
Brucellosis	1 Brucellos	is outbreak w	as reported from	Samangan province	(Tota	al nur	mber of case	s = 24)	

Figure 10: Geographical distribution of outbreaks and related deaths by province

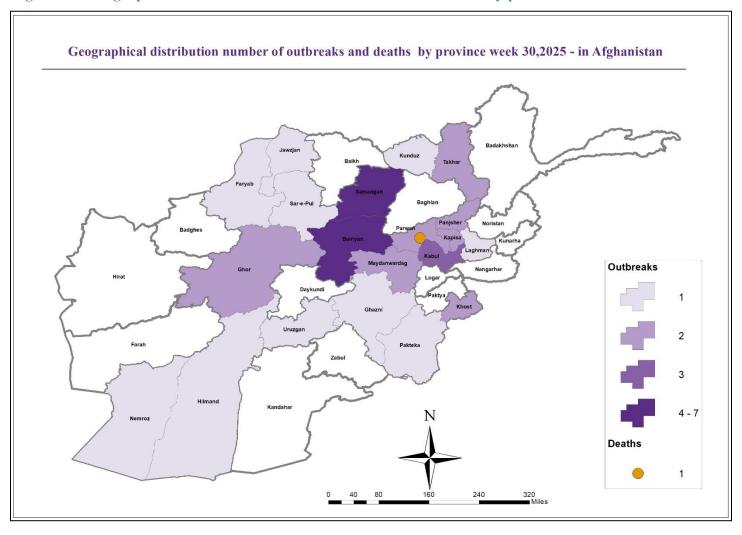


Table 5: Summary of diseases outbreaks during 2025 (29 Dec 2024 to 26 July 2025)

Disease/Event	Disease/Event	Lab-Confirm	Total Cases	Total Deaths
Measles	515	219	5157	92
Chickenpox	135	29	2199	0
Scabies	326	0	12394	0
Dog bite/Suspected Rabies	56	0	388	13
ARI-Pneumonia	6	3	213	4
Viral Hepatitis	5	1	77	0
Pertussis	16	4	179	0
Anthrax	7	0	8	0
Tinea Capitis	1	0	16	0
ARI-Cough and Cold	1	0	48	0
Food Poisoning	15	0	185	6
Typhoid Fever	4	0	64	2
Mumps	2	0	50	0
CCHF	27	17	75	8
Leishmaniasis	4	1	205	0

Botulism	2	0	4	0
Dysentery	1	0	36	0
AWD with Dehydration	9	6	108	1
Acute Bloody Diarrhea	1	0	42	0
Malaria	8	4	1095	0
Rubella	1	1	6	0
COVID-19	5	3	143	0
Brucellosis	6	0	126	0
Impetigo	2	0	66	0
Probable Diphtheria	1	0	2	0
Grand Total	1156	288	22886	126

Table 6: Laboratory information from RRL, CPHL, NIDH and provincial labs in Week # 30-2025

Lab Specimen	Specimen Tested	Specimen Confirmed	Positivity rate (%)
Measles	264	126	47.7
COVID-19	111	20	18.0
Chickenpox	51	28	54.9
CCHF	71	15	21.1
Hepatitis	27	18	66.7
Dengue Fever	23	3	13.0
SARI	27	2	7.4
ILI	18	1	5.6
Pertussis	9	5	0.0
Brucellosis	2	1	0.0
Water Sample (AWD)	2	0	0.0
ARI/Pneumonia	0	0	0.0
Typhoid	0	0	0.0
Total	605	219	36.2

Challenges and recommendations:

- Increasing the number of scabies outbreaks as a public health challenge due to the unimproved lifestyle of the community, such as poor hygiene and sanitation practices.
- Increasing the number of chickenpox outbreaks due to the unavailability of the Varicella Zoster vaccine, and it is recommended to provide its vaccine through the national EPI.
- Increasing the number of dog-bite clusters, and it is recommended to provide its control measure through the Zoonotic Committee at the national level.
- Although the number of CCHF cases has decreased over the past four weeks, it is still recommended to maintain and strengthen control measures at the national level to prevent further transmission
- 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 1,880 (IBS+EBS) suspected measles cases with 13 (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.