Ministry of Public Health

Monitoring Evaluation & Health Information System GD

Diseases Surveillance Department

ریاست عمومی نظارت ارزیابی و سیستم معلومات صحی

وزارت صحت عامه

د څارنی ارزونی او رو غتیایی معلوماتو د سیستم عمومی ریاست

دیپارتمنت سرویلانس امراض

د ناروغیو د سرویلانس دیپارتمنت

Epidemiological Report | Week # 31-2025

31 (27 July – 02 August

د عامي روغتيا وزارت

Summary:

- Out of 613 functional surveillance sentinel sites, 612 (99.9%) have submitted reports this week.
- A total of **748,319** new consultations were reported, among which **262,945** (**35.1%**) were due to surveillance-targeted diseases, which include **135,023** (**51.4%**) **females** and **126,017** (**47.9%**) children under five.
- The most frequently reported surveillance-targeted diseases this week were ARI cough & cold with 133,510 cases (17.8%), acute diarrheal diseases with 104,349 cases (13.9%), and pneumonia with 17.114 cases (2.3%).
- A total of 433 deaths were reported this week, of which 55 (12.8%) deaths were due to surveillance-targeted diseases. This includes 35 ARI pneumonia deaths, 6 suspected measles deaths, 5 AWD with dehydration deaths, 6 suspected meningitis deaths, 2 hemorrhagic fever deaths, and 1 acute viral hepatitis death.
- During this week, 31 outbreaks were reported: 9 measles outbreaks, 8 scabies outbreaks, 5 chickenpox outbreaks, 1 AWD + dehydration outbreak, 2 impetigo outbreaks, 3 dog bite/suspected rabies outbreaks, 1 anthrax outbreak, 1 botulism outbreak, and 1 confirmed malaria outbreak.

Table 1: Top 7 priority infectious diseases cases and deaths out of total consultations in week 31-2025

	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	1619	1111	1469	1281	3	0	1	0	5480	0.7	4	0.9	0.1
ARI-Pneumonia	5699	2966	5053	3396	14	3	16	2	17114	2.3	35	8.1	0.2
Measles	605	219	528	205	1	0	5	0	1557	0.2	6	1.4	0.4
CCHF	0	16	0	13	0	0	0	2	29	0.0	2	0.5	6.9
Confirmed Malaria	194	1083	177	950	0	0	0	0	2404	0.3	0	0.0	0.0
Dengue Fever	0	21	0	15	0	0	0	0	36	0.0	0	0.0	0.0
Covid-19	1	632	2	658	0	0	0	0	1293	0.2	0	0.0	0.0

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

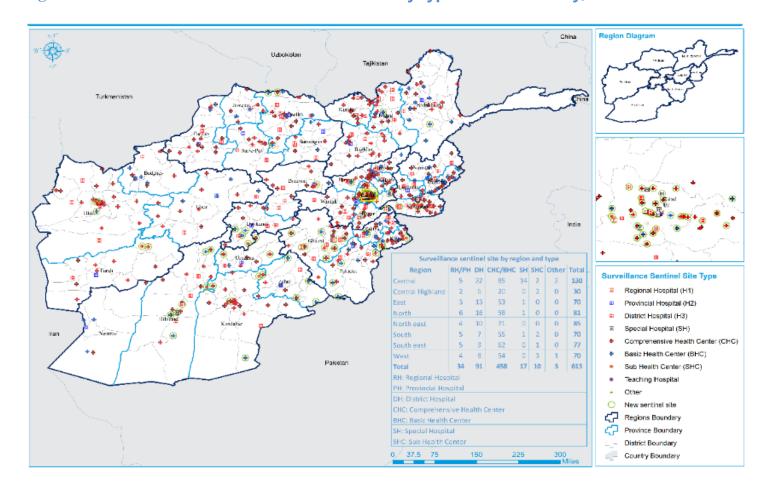


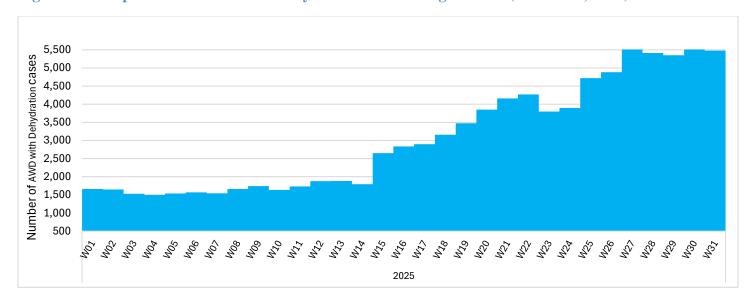
Table 2: Cumulative data on 17 surveillance priority diseases (W01-W31, 2025)

	Cases					Deaths			Total				
Surveillance Indicators	Male Femal			male	ale Male l			emale Case		es Deat		ths	CFR
	< 5 Y	> 5 Y	< 5 Y	> 5 Y	< 5 Y	> 5 Y	< 5 Y	> 5 Y	Number	%	Number	%	
AWD with Dehydration	28,807	19,543	25,732	21,299	25	2	17	2	95,381	0.5	46	0.4	0.05
Acute Bloody Diarrhea	91,663	106,085	83,057	110,899	1	2	1	1	391,704	1.9	5	0.0	0.00
AFP	271	168	184	96	0	0	1	0	719	0.0	1	0.0	0.14
Acute Viral Hepatitis	1,768	2,284	1,599	2,281	14	17	10	13	7,932	0.0	54	0.4	0.68
Acute Watery Diarrhea	442,748	262,436	411,234	284,846	5	0	3	0	1,401,264	6.6	8	0.1	0.00
ARI-C&C	986,859	1,331,499	949,946	1,575,433	0	0	0	0	4,843,737	22.9	0	0.0	0.00
Probable Diphtheria	0	1	0	1	0	0	0	0	2	0.0	0	0.0	0.00
CCHF	0	608	2	249	0	41	0	27	859	0.0	68	0.5	7.92
Confirmed Malaria	2,481	12,332	2,388	10,282	0	0	0	0	27,483	0.1	0	0.0	0.00
Measles	33,840	9,641	29,460	9,232	235	8	253	7	82,173	0.4	503	3.9	0.61
Covid-19	141	23,415	195	23,264	0	3	0	10	47,015	0.2	13	0.1	0.03
Pertussis	273	54	227	50	0	0	0	0	604	0.0	0	0.0	0.00
ARI-Pneumonia	297,088	152,600	267,177	173,683	854	197	758	172	890,548	4.2	1,981	15.5	0.22
Meningitis	1,477	1,307	1,370	1,449	70	24	51	25	5,603	0.0	170	1.3	3.03
Dengue Fever	0	205	0	144	0	0	0	0	349	0.0	0	0.0	0.00
Neonatal Tetanus	6	4	2	1	1	1	0	0	13	0.0	2	0.0	0.00
Typhoid Fever	1,594	22,030	1,509	28,022	0	0	0	0	53,155	0.3	0	0.0	0.00
NDSR targeted diseases/Deaths	1,889,016	1,944,212	1,774,082	2,241,231	1,205	295	1,094	257	7,848,541	37.1	2,851	22	0.04
Total of new clients/ death	3,317,707	5,749,963	3,201,083	8,885,396	4,275	3,056	3,065	2,405	21,154,149	100	12,801	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 31st week of 2025, a total of 5,480 cases and 4 deaths have been reported (CFR=0.1%)
- Out of the total cases, 3,088 (56.4%) were under-five children, and 2,750 (50.2%) were females.
- Since the beginning of 2025, a total of 95,381 AWD + dehydration cases and 46 deaths (CFR=0.05%) have been reported. Of these cases 47,031 (49.3%) are females and 54,539 (57.2%) are children under five.

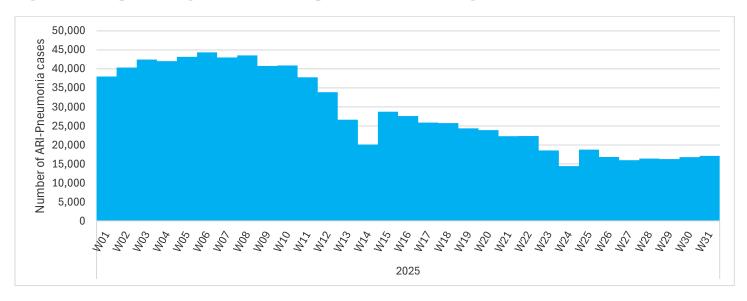
Figure 2: The epi-curve of AWD with dehydration cases in Afghanistan (W01-W31, 2025)



Epidemic situation of ARI pneumonia:

- The epi-curve of ARI pneumonia illustrates a notable decrease since week 09-2025.
- During the 31st week of 2025, a total of 17,114 cases and 35 deaths have been reported (CFR=0.2%)
- Out of the total cases, 10,752 (62.8%) were under-five children, and 8,449 (49.3%) were females.
- Since the beginning of 2025, a total of 890,548 ARI pneumonia cases and 1,981 deaths (CFR=0.22%) have been reported. Of these cases 440,860 (49.5%) are females and 564,265 (63.4%) are children under five.

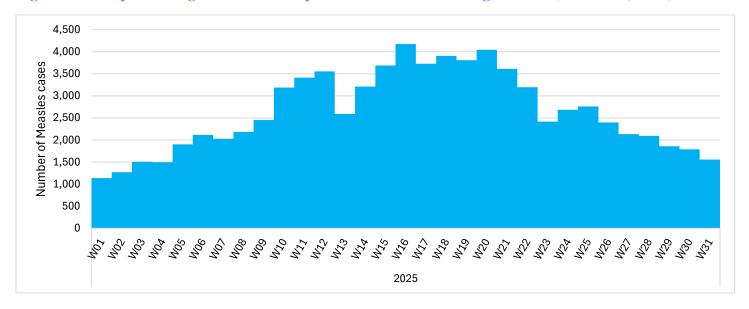
Figure 3: The epidemiological curve of ARI pneumonia cases in Afghanistan (W01-W31, 2025)



Epidemic situation of measles:

- The epi-curve of measles illustrates a notable decrease since week 20-2025.
- During the 31st week of 2025, a total of 1,557 cases and 6 deaths have been reported (CFR=0.4%)
- Out of the total cases, 1,133 (72.7%) were under-five children, and 733 (47.1%) were females.
- Since the beginning of 2025, a total of 82,173 measles cases and 503 deaths (CFR=0.6%) have been reported. Of these cases 38,692 (47.1%) are females and 63,300 (77.1%) are children under five.

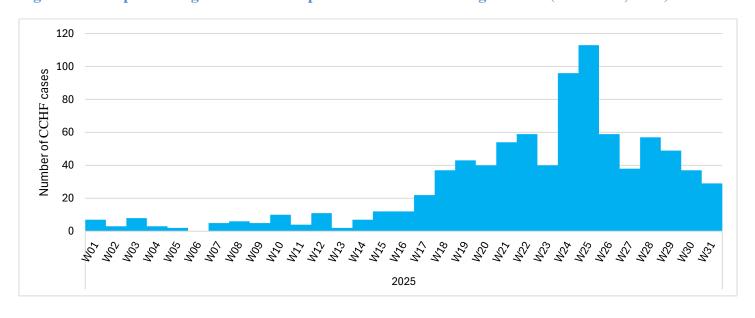
Figure 4: The epidemiological curve of suspected measles cases in Afghanistan (W01-W31, 2025)



Epidemic situation of CCHF:

- The epi-curve of suspected CCHF cases has shown a gradual decrease since week 25-2025.
- During week 31st 2025, a total of 29 cases and 2 deaths have been reported (CFR=6.9%)
- Out of the total cases, none of them children under five, and 13 of them (44.8%) were female.
- Since the beginning of 2025, a total of 859 suspected CCHF cases and 68 deaths (CFR=7.9%) have been reported. Of these cases 251 (29.2%) are females and 2 (0.2%) are children under five.

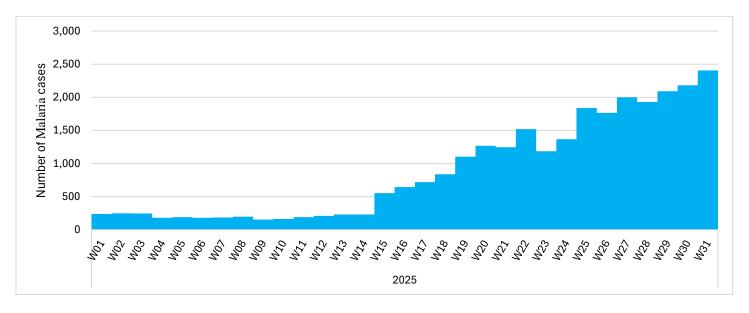
Figure 5: The epidemiological curve of suspected CCHF cases in Afghanistan (W01-W31, 2025)



Epidemic situation of malaria:

- The epi-curve of confirmed malaria illustrates a considerable increase since week 15-2025
- During 31st week of 2025, a total of 2,404 cases and zero deaths have been reported (CFR=0.0%)
- Out of the total cases, 371(15.4%) were children under-five, and 1,127 (46.8%) were females.
- Since the beginning of 2025, a total of 27,483 confirmed malaria cases and zero deaths have been reported. Of these cases 12,670 (46.1%) are females and 4,869 (17.7%) are children under five.

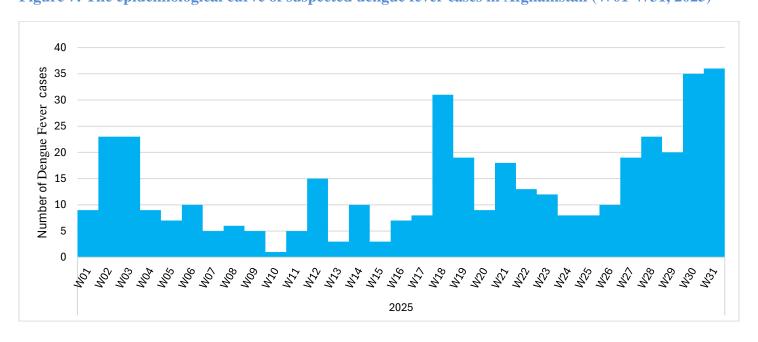
Figure 6: The epidemiological curve of confirmed malaria cases in Afghanistan (W01-W31, 2025)



Epidemic situation of dengue fever:

- The epi-curve of suspected dengue fever illustrates stabilization at low level since the beginning of 2025.
- During 31st week of 2025, a total of 36 cases and 0 deaths have been reported (CFR=0.0%)
- Out of the total cases, none of them children under five and 15 (41.7%) cases were females.
- Since the beginning of 2025, a total of 349 suspected dengue fever cases and zero deaths have been reported. Of these cases 144 (41.3%) are females and none of them children under five.

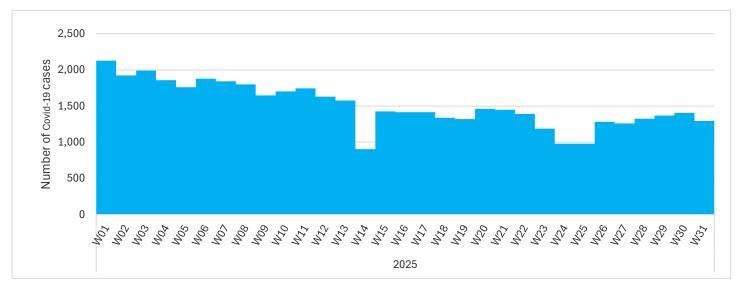
Figure 7: The epidemiological curve of suspected dengue fever cases in Afghanistan (W01-W31, 2025)



Epidemic situation of COVID-19

- The epi-curve of suspected COVID-19 illustrates a gradual decrease from weeks 1-2025.
- During 31st week of 2025, a total of 1,293 cases and 0 death have been reported (CFR=0.0%)
- Out of the total cases, 3 (0.2%) were under-five children, and 660 (51%) were females.
- Since the beginning of 2025, a total of 47,015 suspected COVID-19 cases and 13 deaths (CFR=0.03%) have been reported. Of these cases 23,459 (49.9%) are females and 336 (0.7%) are children under five.

Figure 8: The epidemiological curve of suspected COVID-19 cases in Afghanistan (W01-W31, 2025)



Influenza surveillance activities:

- ➤ In Epidemiological Week 31 of 2025, reports received from all ten influenza sites. Out of all new hospital admissions, 613 (12.1%) Severe Acute Respiratory Infections cases were reported, and 365 (59.5%) were under 5 years old and 312 (50.8%) were female.
- ➤ The proportion of SARI cases increased (1.1%) compared to the previous week, and 30 SARI-associated deaths were reported this week: 28 (93.3%) under five and 17 (56.6%) females.
- At all influenza sentinel sites, the highest proportion of SARI cases were reported from Bamyan (27.2%), Kabul (25%), and Balkh (19%).
- ➤ During this week, our field staff in the country collected and shipped 50 specimens (30 SARI and 20 ILI) to the NIC. Out of all these tested specimens, no lab-confirmed case was reported for influenza, and there was no new influenza virus subtype.

Table 3: The Afghanistan NIC lab result of influenza specimens in Week 31, 2025

Influenza site	Specimen	Lab	Lab	Positivity			
Influenza site	Tested	Confirmed	Flu A (H1N1pdm09)	Flu A (H3)	Flu B (Victoria)	Flu B (Yamagata)	rate (%)
Baghlan	5	0	0	0	0	0	0%
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	0	0	0	0	0	0%
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	0	0	0	0	0	0%

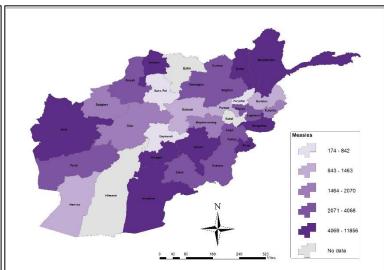
Figar 9: Geographical distribution of major infectious diseases cumulative cases by province in

Afghanistan, from 29 Dec 2024-02 August 2025

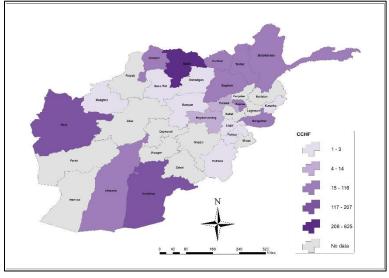
Figar 9: A (Pneumonia)

Bargers Barger

Figar 9: B (Measles)



0Figar 9: C (CCHF)



Figar 9: D (Malaria)

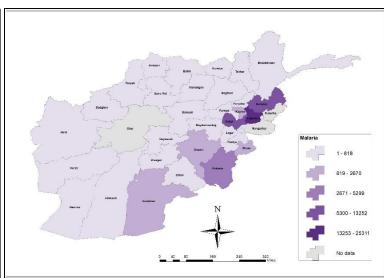


Table 4: Afghanistan infectious disease outbreaks report | Epidemiological Week # 31-2025

Table 4. Algianistan	i infectious disease outbreaks report Epidenhological vveek #			ΠJ	31-4043				
					ases	aths	Vaccination coverage, If VPD		
Event / Diseases Name	Reported date	Province	Province District	Village	Total Cases	Total Deaths	HF reported coverage	Field Estimate d Coverage	
	30/7/2025	Daykundi	Nilee	New Noorak	7	0	100%	90%	
	28/7/2025	Herat	Karukh	Akhond Zada	10	0	90%	50%	
	26/7/2025	Khost	Khost (Matoon)	Mardikhil	8	0	80%	58%	
	26/7/2025	Kunduz	Kunduz	Telabka	9	0	75%	45%	
Measles	27/7/2025	Kunduz	Chahar Darah	Tajik Abad	6	0	95%	50%	
	28/7/2025	Kunduz	Qalaye Zaal	Qazaq Shakh	15	0	54%	43%	
	27/7/2025	Logar	Puli Alam	Qalai Zardad	10	0	80%	55%	
	28/7/2025	Urozgan	Tereen Kot	Absa Ali	10	0	71%	60%	
	30/7/2025	Urozgan	Deh_Rawod	Sang Sorakh	11	0	75%	71%	
Scabies	Paktya (1) a	8 Scabies outbreaks were reported from Balkh (1), Kapisa (1), Nangarhar (3), Nuristan (1), Paktya (1) and Sar-e-pul (1) provinces (Total number of cases = 478)							
Chickenpox			were reported for of cases = 82)	orm Badakshan (1), (Ghor (1), H	erat (2) and	Panjshir (1)	
Dog bite/Suspected Rabies		3 Dog bite/ Suspected Rabies outbreaks were reported form Kandahar (1), Laghman (1) and Nangarhar (1) provinces (Total number of cases = 32)							
Impetigo	2 Impetigo	outbreaks we	re reported from	Badakhshan province	ce (To	otal nu	umber of cas	ses = 64)	
AWD + Dehydration	1 AWD + Dehydration outbreak was reported from Parwan province (Total number of cases = 2)								
Anthrax	1 Anthrax o	1 Anthrax outbreak was reported from Takhar province (Total number of cases= 1)							
Botulism	1 Botulism	outbreak was	reported from B	Salkh province (Tota	l num	ber o	f cases 9 and	d 2 death)	
Confirmed Malaria	1 Confirme 121)	d Malaria out	break was report	ted from Nangarhar	provii	nce (T	Total number	r of cases =	

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

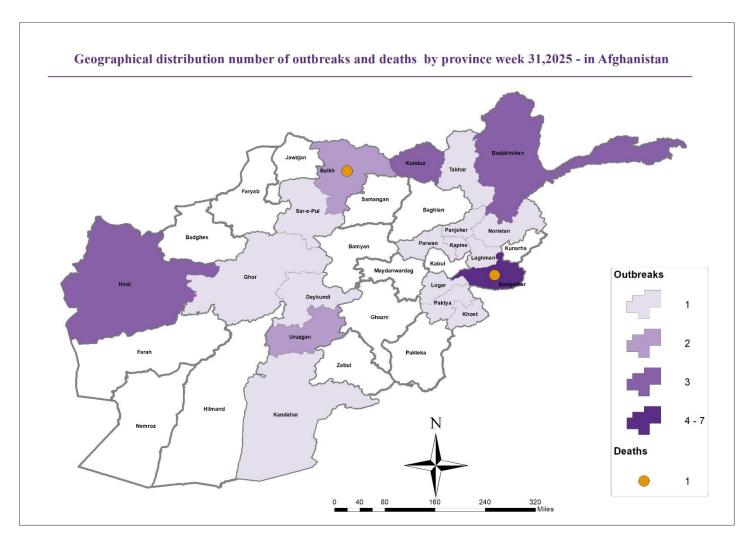


Table 5: Summary of diseases outbreaks during 2025 (29 Dec 2024 to 2 August 2025)

Disease/Event	Disease/Event	Lab-Confirm	Total Cases	Total Deaths
Measles	524	223	5243	92
Chickenpox	140	29	2281	0
Scabies	334	0	12873	0
Dog bite/Suspected Rabies	59	0	420	14
ARI-Pneumonia	6	3	213	4
Viral Hepatitis	5	1	77	0
Pertussis	16	4	179	0
Anthrax	8	0	9	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	3	0	14	1
Dysentery	1	0	36	0
AWD with Dehydration	10	7	110	1
Acute Bloody Diarrhea	1	0	42	0
Malaria	9	5	1216	0
Rubella	1	1	6	0
COVID-19	5	3	143	0
Brucellosis	6	0	126	0
Impetigo	4	0	130	0
Probable Diphtheria	1	0	2	0
Grand Total	1187	294	23763	128

Table 6: Laboratory information from RRL, CPHL, NIDH and provincial labs in Week # 31-2025

Lab Specimen	Specimen Tested	Specimen Confirmed	Positivity rate (%)
Measles	243	133	54.7
COVID-19	99	10	10.1
Chickenpox	50	11	22.0
CCHF	39	3	7.7
SARI	33	0	0.0
Dengue Fever	27	6	22.2
Hepatitis A+E(VAE)	27	7	25.9
ILI	22	0	0.0
Pertussis	4	0	0.0
Brucellosis	0	0	0.0
ARI/Pneumonia	0	0	0.0
Typhoid	0	0	0.0
M Pox	0	0	0.0
Total	544	170	31.3

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 1,643 (IBS+EBS) suspected measles cases with 6 (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.