

Current major event

Measles in Afghanistan

In recent time, the number of suspected cases of measles (clinically diagnosed) have increased in Afghanistan. The Disease Early Warning System (DEWS) in Afghanistan reported a total of 7,789 suspected cases of measles including 28 deaths between 01 January to 27 July 2012.

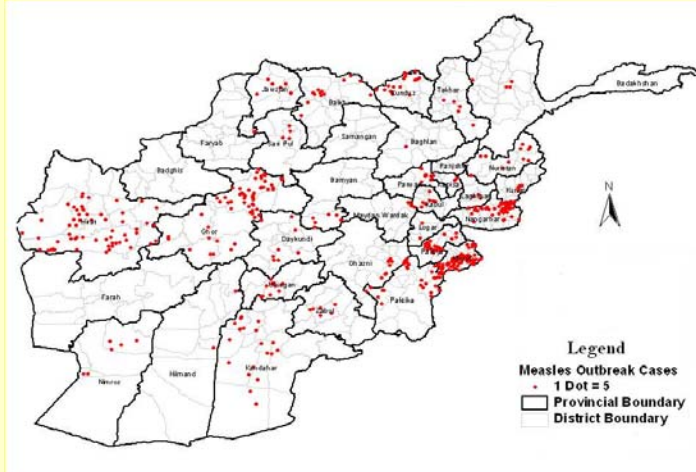
Editorial note

Measles remains one of the major causes of morbidity and mortality in Afghanistan despite improvement in routine immunization, introduction of second dose of measles into national immunization programme, implementation of three rounds of catch-up, follow up of measles vaccination campaigns and strengthening of measles surveillance system. The occurrence of sporadic cases including localized outbreaks of measles are on rise in the country since 2010. In response, Afghanistan is conducting accelerated immunization activities under Child Health Week every year and selective mop-up campaigns in the high risk districts on a regular basis.

In 2012, a total of 7,789 suspected cases of measles (clinically diagnosed) have been reported by the DEWS in the country so far. Some of these cases were laboratory confirmed and few localized outbreaks have been reported in some districts (*Please see the map*).

The Ministry of Public Health of Afghanistan (MOPH) has set the target of reducing child mortality through achieving 95% measles vaccine coverage by the end of 2015. However, insecurity as well as frequent movement of displaced people are hindering the vaccination coverage that need to be achieved to reach the measles elimination goal for Afghanistan. Considering this low immunization coverage as well as high percentage of measles cases in children over 5 years of age, the National Immunization Task Force Committee (NITFC) of Afghanistan has set out two objectives for the Supplementary Immunization Activities (SIAs) for 2012. The first objective is to

Suspected measles cases reported from Afghanistan, 01 January-27 July 2012



Suspected measles cases reported from Afghanistan, 2009-2012

Year	Cases	Deaths	CFR (%)
2009	3616	3	0.08
2010	6420	33	0.51
2011	4856	9	0.18
2012	7789	28	0.35

Source: DEWS, Afghanistan

vaccinate children aged between 9 to 59 months and the second objective is to implement measles (SIAs) in children between 9 to 9 years in order to stop/decrease transmission of measles virus and reduce mortality and morbidity among children

Afghanistan is implementing the Expanded Program on Immunization (EPI) in majority of the districts through contracting out to NGOs while at the provincial level, EPI service is integrated into the public health system under the leadership of the provincial health directorate. An oversight on the activities of the NGOs would be critical. As Afghanistan is moving towards global goal of measles elimination by 2015, strengthening of case-based surveillance with comprehensive reporting, investigation of all fever and rash cases will be important. Carrying out the SIAs in all vulnerable pockets to rapidly reduce the number of susceptible in the population and improve standardized case management to reduce excess deaths will also be critical.

Update on outbreaks

in the Eastern Mediterranean Region

Dengue and CCHF in Pakistan; Measles in Afghanistan and Pakistan

Current public health events of international concern

[cumulative N° of cases (deaths), CFR %]

Avian influenza

China	[43(28), 65.1%]
Egypt	[168 (60), 35.7%]
Indonesia	[190 (158), 83.1 %]
Viet Nam	[123(61), 49.5%]
Cambodia	[21(19), 90.4%]
Bangladesh	[6(0), 0%]
Global total	[607(358), 58.9%]

Measles

Afghanistan	[261 (0), 0%]#
Pakistan	[7995 (115), 1.43%]#

Crimean-congo haemorrhagic fever

Pakistan	[33 (8) 24.2%]#
Afghanistan	[6(1), 16.6%]#

Hand Foot & Mouth Disease (caused by Enterovirus 71)

Cambodia	[78 (54), 69.2%]
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Ebola Haemorrhagic Fever

Uganda	[60 (16), 26%]
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CFR=Case-Fatality Rate; # Suspected cases