

Current major event

Cutaneous leishmaniasis outbreak in Baluchistan, Pakistan

During the first quarter of 2022, the Federal Ministry of Health in Pakistan reported an increase in the number of cutaneous leishmaniasis cases in Baluchistan province. Overall, 4318 leishmaniasis cases were reported, the majority of which are women and children. A coordinated multisectoral approach should be implemented to contain this upsurge in cases.

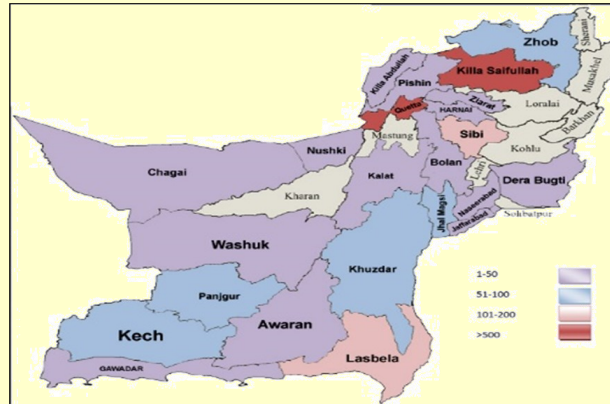
Editorial note

Leishmaniasis is caused by a protozoa parasite from over 20 leishmania species. Over 90 sandfly species are known to transmit leishmania parasites. There are three main forms of the disease: visceral, cutaneous and mucocutaneous leishmaniasis. Leishmania parasites are transmitted through the bites of infected female phlebotomine sandflies, which feed on blood to produce eggs. The epidemiology of leishmaniasis depends on the characteristics of the parasite and sandfly species, the local ecological characteristics of the transmission sites, current and past exposure of the human population to the parasite, and human behaviour. The Eastern Mediterranean Region accounts for 80% of the cutaneous leishmaniasis cases reported worldwide. Visceral leishmaniasis is highly endemic in Iraq, Somalia, Sudan and Yemen.

Leishmaniasis is endemic to Pakistan. The visceral and cutaneous forms have been reported previously. Cutaneous leishmaniasis is reported from all parts of the country, particularly Baluchistan and Khyber Pakhtunkhwa provinces. The number of cases is also on rise in Punjab province. The influx of refugees from Afghanistan along the western border of Pakistan is considered one of the contributing factors responsible for the increasing number of cases in this region.

Since 2011, a steady increase in cutaneous leishmaniasis incidence has been reported reaching outbreak proportion in 2016, with consistent high transmission seasons until 2021. The highest number was reported in 2019 (22 114) followed by 16 865 cases in 2021. Highest number of cases were recorded from Baluchistan and Tribal districts (Ex-FATA), followed by Khyber Pakhtunkhwa, Sindh and Punjab. On average, more than 20 000 cases are reported to public sector health facilities in Baluchistan alone. The real burden of cutaneous leishmaniasis is under reported as a result of weak surveillance systems and suboptimal diagnostic and treatment services.

Reported Leishmaniasis cases in Baluchistan province, Pakistan



Reported Leishmaniasis cases in Baluchistan province, Pakistan, 2011–2021

Year	Reported cases
2011	1824
2012	2875
2013	3344
2014	5204
2015	6834
2016	13 531
2017	17 256
2018	17 375
2019	22 114
2020	12 587
2021	16 865
2022	4318

As of April 2022, an increase in the number of patients seeking care from public and private clinics in Quetta, Zhob, Killasaifullah, Killa Abdullah, Naseerabad, Sherani, Lasbela, Sibi and Kech districts was observed, and many media reports highlighted the worsening situation. Overall 4318 cases have been reported to the Ministry. Women and children are the most affected groups.

The prevention and control of cutaneous leishmaniasis requires a combination of intervention strategies including the strengthening of vector control, disease surveillance, early diagnosis and effective prompt treatment. Risk communication and community engagement is crucial to mobilize and educate the community with effective behavioural change interventions that must always be locally adapted. Partnership and collaboration with various stakeholders and other vector-borne disease control programmes is critical. Vector control work must reduce or interrupt transmission of disease by decreasing the number of sandflies. Control methods include insecticide spray, use of insecticide-treated nets, environmental management and personal protection, and the control of animal reservoir hosts that should be tailored to the local situation.

Update on outbreaks

in the Eastern Mediterranean Region

COVID-19 in 22 EMR countries

Current public health events of concern

Coronavirus disease 2019 (COVID-19): 2019–2022

Country	Cases	Deaths	CFR
Afghanistan	177 827	7671	4.3%
Bahrain	555 560	1471	0.3%
Djibouti	15 588	189	1.2%
Egypt	509 177	24 473	4.8%
Iran (Islamic Republic of)	7 167 646	140 315	2.0%
Iraq	2 320 260	25 173	1.1%
Jordan	1 694 216	14 048	0.8%
Kuwait	629 525	2554	0.4%
Lebanon	1 092 807	10 311	0.9%
Libya	501 738	6419	1.3%
Morocco	1 163 472	16 060	1.4%
occupied Palestinian territory	656 287	5655	0.9%
Oman	388 468	4251	1.1%
Pakistan	1 525 466	30 361	2.0%
Qatar	361 819	677	0.2%
Saudi Arabia	751 076	9048	1.2%
Somalia	26 410	1361	5.2%
Sudan	61 959	4907	7.9%
Syrian Arab Republic	55 706	3144	5.6%
Tunisia	1 035 884	28 323	2.7%
United Arab Emirates	892 170	2302	0.3%
Yemen	11 806	2143	18.2%