WHO South-East Asia Region
Epidemiological Bulletin

WHO Health Emergencies Programme
WHO Regional Office for South-East Asia
17th edition (2025), 27 August 2025
Reporting period: 11 Aug to 24 Aug 2025

HEALTH EMERGENCIES programme
World Health Organization
REGIONAL OFFICE FOR South-East Asia

This epidemiological bulletin aims to provide the situation of key infectious diseases in the WHO South-East Asia Region to inform risk assessments and responses. The bulletin uses information from publicly available sources and will be published every two weeks. For feedback or suggestions, please write to seoutbreak@who.int.

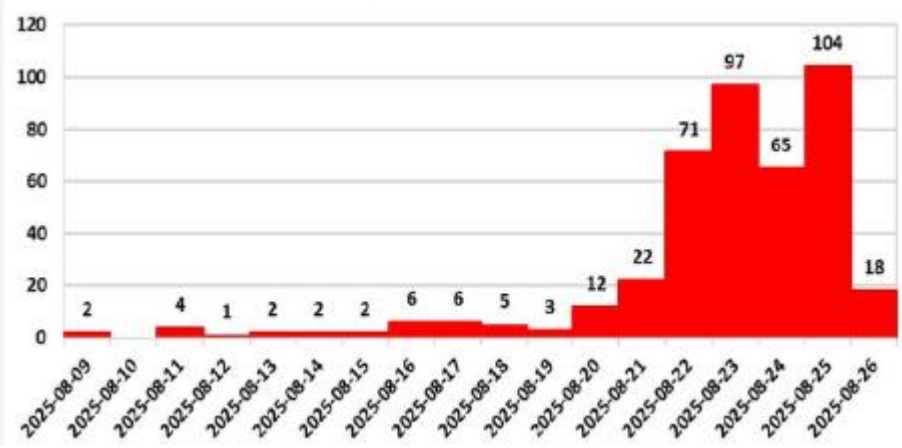
Key events and updates

Nepal: Cholera outbreak

Situation overview as of 26 August 2025

- On 25 August 2025, the Nepal Ministry of Health and Population published a press releasee regarding an outbreak of acute watery diarrhea (AWD) in Birgunj Metropolitan City, Parsa district, Madhesh province in southern Nepal [1].
- According to the Public Health Emergency Operations Center of Madhesh Province [2]:
  - On 22 August, health facilities in Birgunj Metropolitan City reported a sudden increase of AWD cases.
  - As of 18:00 on 26 August, a total of 422 cases of AWD were reported between 9 and 26 August.
  - Of the 422 cases,
    - 20 were confirmed as Vibrio Cholerae by culture, 114 tested positive using cholera rapid diagnostic tests, and 288 remain suspected.
    - age group 15 to 24 years were most affected (112 cases, 27%), while 22 cases (5%) were under age 5.
    - 67% of cases are concentrated in four wards, namely the ward 11, 12, 13 and 14.
    - a total of 199 cases remain under treatment (31 in Intensive Care Unit/High Dependency Unit (ICU/HDU) and 168 in general wards), while 223 patients have been discharged.
    - no fatalities have been reported.

Figure 1. The daily number of AWD cases reported in Birgunj Metropolitan City, Parsa district, Madhesh province from 9 August to 26 August [2]



Response [2] [3] [4]

- District disaster management committee meeting was held in presence of Provincial Minister of the Ministry of Health and Population (MoHP), and action points on risk communication, clinical management, human resource management, logistic and supply management, information management, WASH interventions, and outbreak investigations were discussed.
- Another meeting with Birgunj Metropolitan City in presence of Mayer, Federal MOHP, Epidemiology and Disease Control Division of MOHP, and other stakeholders were held to further discuss above action points.

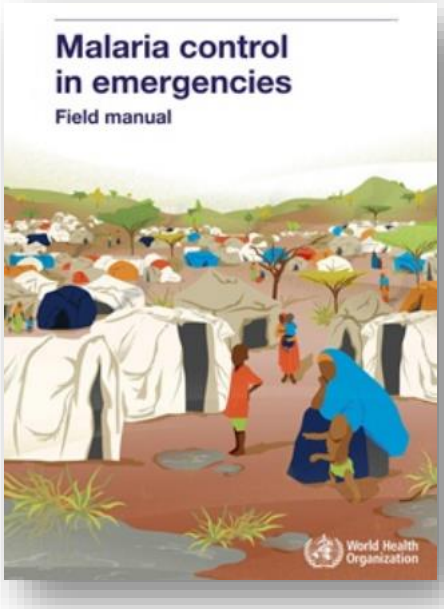
[1] Ministry of Health and Population of Nepal. Press release - 25 August 2025.
[2] Public Health Emergency Operations Center, Madhesh Province SitRep #04
[3] Public Health Emergency Operations Center, Madhesh Province SitRep #03
[4] Public Health Emergency Operations Center, Madhesh Province SitRep #02

- Orientation was provided to the staff and volunteers of Birgunj Metropolitan City in active case finding, risk communication and WASH.
- Federal Health Minister visited Narayani Hospitals and directed on free cholera cases at government hospitals, WASH interventions and outbreak investigations.
- Field epidemiology team was mobilized for case investigation from Madhesh province.
- WASH interventions are ongoing, including deployment of a mobile water quality testing van with chlorine tablets and solutions by the Department of Water Supply and Sewerage Management
- National Health Education, Information and Communication Center (NHEICC) worked with District Health Office and Birgunj Metropolitan City to develop risk communication strategy.

WHO Support

- WHO is supporting the outbreak investigation, information management, coordination and logistics, including the provision of cholera assays. WHO also provides technical assistance on clinical management guidance.
- WHO also facilitated sharing of information with India through the International Health Regulations (IHR) mechanism, given the proximity of the affected area to the border with India.

New publication: WHO Malaria Control in Emergencies: Field Manual (2025) [5]



- Humanitarian emergencies are increasing globally with alarming frequency and duration. These crises often cause health system collapse, leaving vulnerable populations without access to essential medical services. In endemic areas, malaria becomes a deadly threat, especially for displaced communities with little prior exposure and no immunity. Without swift action, outbreaks can escalate rapidly, making preventable cases major causes of illness and death.
- As emergencies grow in scale and complexity, the global response must evolve. To support effective action, the World Health Organization (WHO) developed this field manual to support malaria response in crisis-affected settings. While challenges like disrupted services and displacement complicate malaria control, emergencies also offer opportunities to coordinate efforts across the humanitarian response, leveraging shared infrastructure and resources for greater impact.
- The manual provides practical, evidence-based guidance on prevention, diagnosis and treatment in emergencies and post-crisis settings. Key features include: assessing risk and targeting vulnerable groups; planning and operational solutions; updated protocols for diagnosis, case management and vector control; strategies for integration with other interventions; innovations in research and adaptive approaches; and accessible tools, references and further reading.
- Designed for humanitarian actors, health professionals and policymakers, it is an indispensable tool to reduce malaria's toll, strengthen systems, and build resilience in complex crises.
- Available at https://www.who.int/publications/i/item/9789240112834

[5] World Health Organization. *Malaria control in emergencies: field manual.* Geneva: World Health Organization; 2025. Licence: CC BY-NC-SA 3.0 IGO. Available from: https://www.who.int/publications/i/item/9789240112834

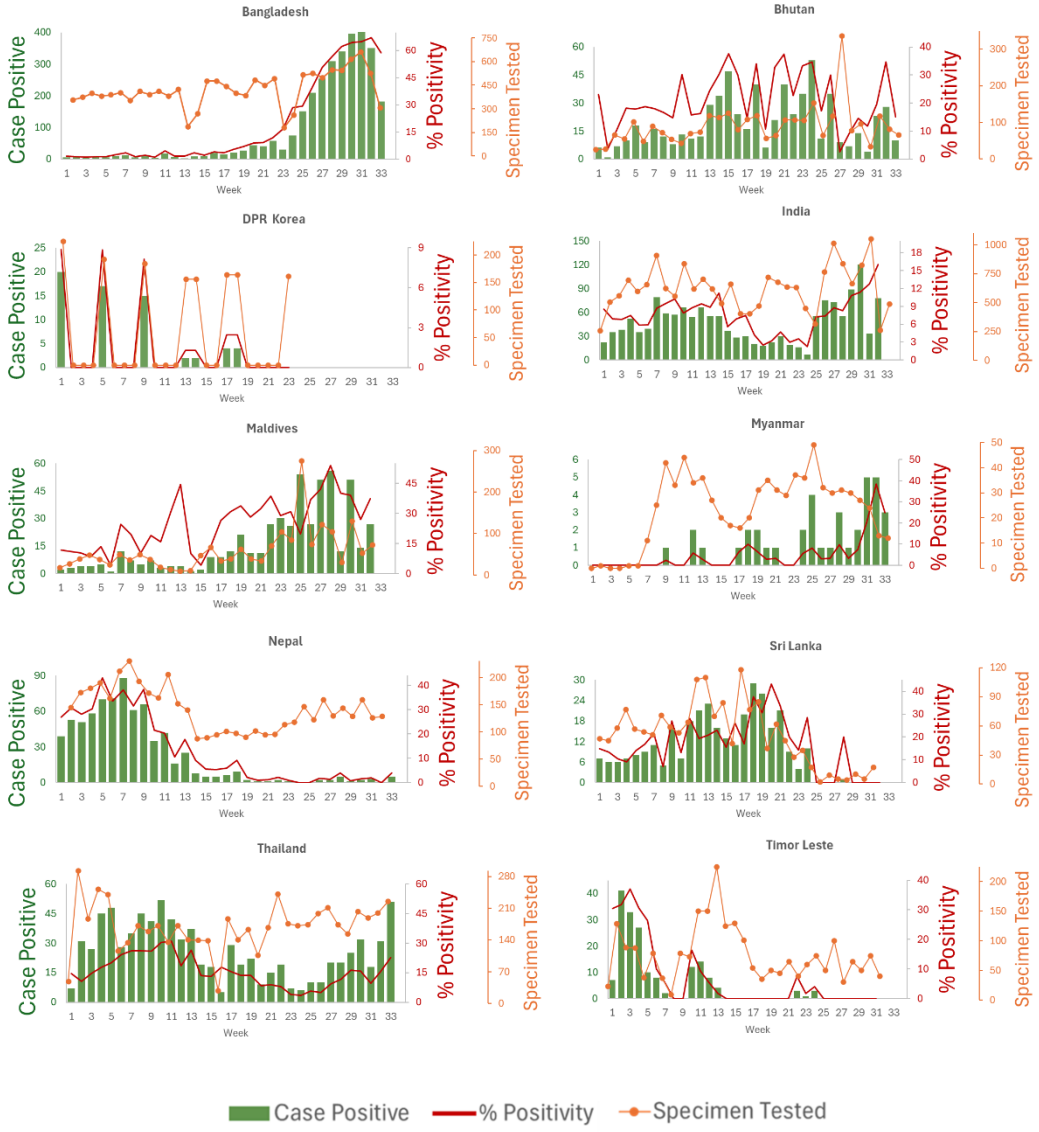
Influenza

Situation in the WHO South-East Asia Region

Situation as of 26 August 2025 [6]

- The influenza sentinel surveillance data from WHO's FluNet and FluID platforms, extracted on 26 August 2025, illustrate weekly trends in laboratory-confirmed influenza cases, test positivity percentage, and the number of specimens tested across countries in the WHO South-East Asia Region.
- Bangladesh (>55%) and Maldives (>30%) continue to show high test positivity. Thailand shows upward trend in the test positivity, reaching close to 30%.
- For DPR Korea, data is not available in the recent weeks.

Figure 4: Weekly trends of specimens tested at National Influenza Centers (NIC) and laboratory confirmed influenza in the WHO South-East Asia Region (2025)



Source: Respimart/FluNet/FluID

[6] WHO. Influenza surveillance outputs [Internet]. Geneva: WHO; 2025 [cited 2025 August 26]. Available from: https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs

Influenza virus subtypes and lineages Week 32-34 2025[7]

- Table 1 shows influenza virus subtype and lineage distribution across ten countries in the WHO South-East Asia Region for epidemiological weeks 32 to 34 of 2025, based on data extracted from WHO's RespiMart platform on 26 August 2025. The last submission was on 20 July 2025.
- A total of 2259 samples were tested across the Region, out of which 770 (34%) were positive for influenza. These were sub-typed, and results are shown in Table 1.
- In the region, overall, influenza A(H3) was the pre-dominantly circulating influenza sub type (50%) followed by Vitoria B lineage (31%).
- Influenza sub-type A(H3) was predominant in Bhutan (97%), India (87%) and Thailand (71%).
- Influenza sub-type A(H3) and A(H1N1)2009pdm co-circulated in Maldives (52% and 40% respectively).
- In the week 32, Bangladesh reported one case of Influenza A(H5N1), an influenzas virus with pandemic potential among subtyped Influenza A viruses .
- Circulation of B (Victoria) lineage in co-circulation with influenza A viruses were reported in Bangladesh (41%) and Thailand (17%). Lineage of all influenza B viruses detected in Nepal were not determined.

Table 1: Distribution of influenza virus subtypes in the WHO South-East Asia Region (weeks 32-34, 2025)

Country	Total Samples Tested	Number of Influenza Positive	Positivity Rate %	A (H1) %	A (H3) %	A (H5) %	A (H1N1)2009 %	A (Unsubtype) %	B (Yamagata) %	B (Victoria) %	B (Lineage not Determined) %
All Country	2,259	770	34%	0%	50%	0%	18%	0%	0%	31%	1%
Bangladesh	832	532	64%	0%	38%	0%	21%	0%	0%	41%	0%
Bhutan	147	38	26%	0%	97%	0%	0%	0%	0%	3%	0%
DPR Korea	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
India	487	78	16%	0%	87%	0%	5%	0%	1%	6%	0%
Maldives	72	27	38%	0%	52%	0%	41%	0%	0%	7%	0%
Myanmar	25	8	32%	0%	50%	0%	50%	0%	0%	0%	0%
Nepal	255	5	2%	0%	0%	0%	0%	0%	0%	0%	100%
Sri Lanka	17	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
Thailand	424	82	19%	0%	71%	0%	12%	0%	0%	17%	0%
Timor-Leste	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%

[7] WHO. Influenza surveillance outputs [Internet]. Geneva: WHO; 2025 [cited 2025 August 26]. Available from: https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs

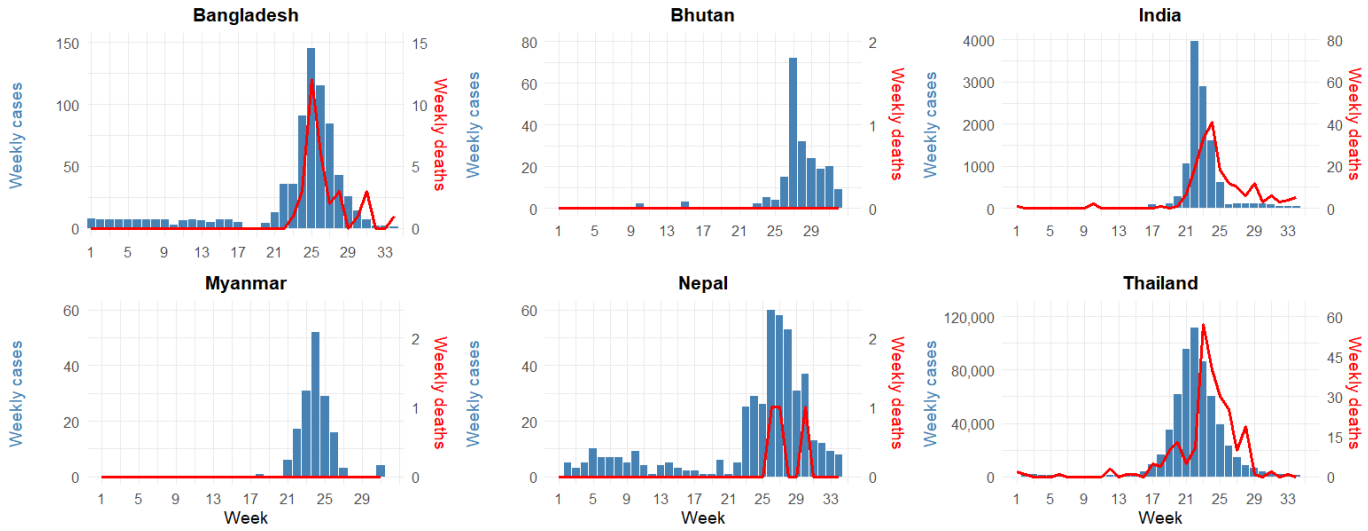
COVID-19

Situation in the WHO South-East Asia Region

As of 24 August 2025

- Some countries in the Region recorded a surge of COVID-19 cases, including Bangladesh, Bhutan, India, Myanmar, Nepal and Thailand, starting from week 17 to week 20 depending on country (Figure 1). However, the weekly case numbers declined in all these countries.
- Data of the most recent week (week 34) are not available from Bhutan and Myanmar.
- In week 34 (18 to 24 August 2025), Bangladesh reported a total of one case and one death [8], India reported a total of 48 cases and 5 deaths [9], Nepal reported a total of 8 cases [10] while Thailand reported a total of 1 153 cases [11].
- In week 32 (04 to 10 August 2025), Bhutan reported a total of 9 cases [12]
- Please visit the WHO COVID-19 dashboard for the global situation of COVID-19.

Figure 1. Weekly number of new COVID-19 cases and deaths reported from selected countries since week one of 2025 in the WHO South-East Asia Region (as of week 34)*



* Bhutan data as of week 32 and Myanmar data as of week 31.

[8] Directorate General of Health Services (DGHS), Bangladesh. COVID-19 Dashboard [Internet]. Dhaka: Ministry of Health and Family Welfare; 2025 [cited 2025 August 25]. Available from: https://old.dghs.gov.bd/index.php/bd/component/content/article?layout=edit&id=5612

[9] Ministry of Health and Family Welfare, Government of India. COVID-19 India Dashboard [Internet]. New Delhi: MoHFW; 2025 [cited 2025 August 25]. Available from: https://covid19dashboard.mohfw.gov.in/

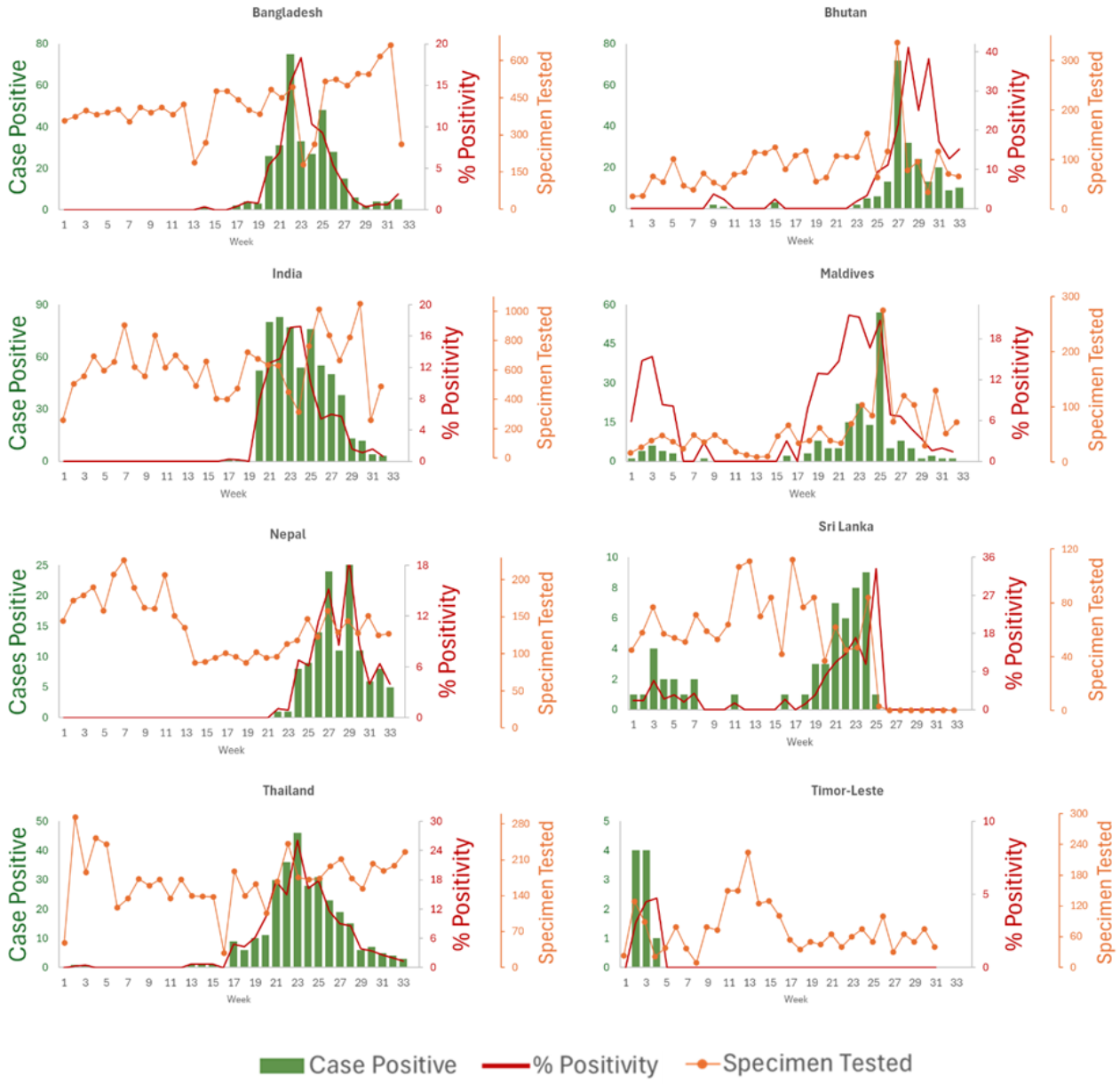
[10] Epidemiology and Disease Control Division Nepal. Available from: https://edcd.gov.np/newsroom/outbreak;

[11] Department of Disease Control, Ministry of Public Health, Thailand. COVID-19 Surveillance Dashboard [Internet]. Nonthaburi: DDC, MoPH; 2025 [cited 2025 August 25]. Available from: https://www.facebook.com/photo/?fbid=1176170881210400&set=a.309744487853048

[12] Bhutan, Royal Centre for Disease Control https://www.rcdc.gov.bt/web/

- Based on data from the integrated influenza-SARS-CoV-2 sentinel surveillance system[13], Figure 2 summarizes weekly trends of eight countries—Bangladesh, Bhutan, India, Maldives, Nepal, Sri Lanka, Thailand, and Timor-Leste—highlighting number of positive COVID-19 cases, the percentage positivity and the number of specimens tested.
  - Test positivity has shown decline starting around week 24 (Bangladesh and Thailand), week 25 (India), week 26 (Maldives, Sri Lanka) and week 29 (Bhutan), and week 30 (Nepal).

Figure 2. COVID-19 update from the integrated influenza-SARS-CoV-2 sentinel surveillance system.



Source: WHO Integrated Influenza and Other Respiratory Viruses, 26 August 2025

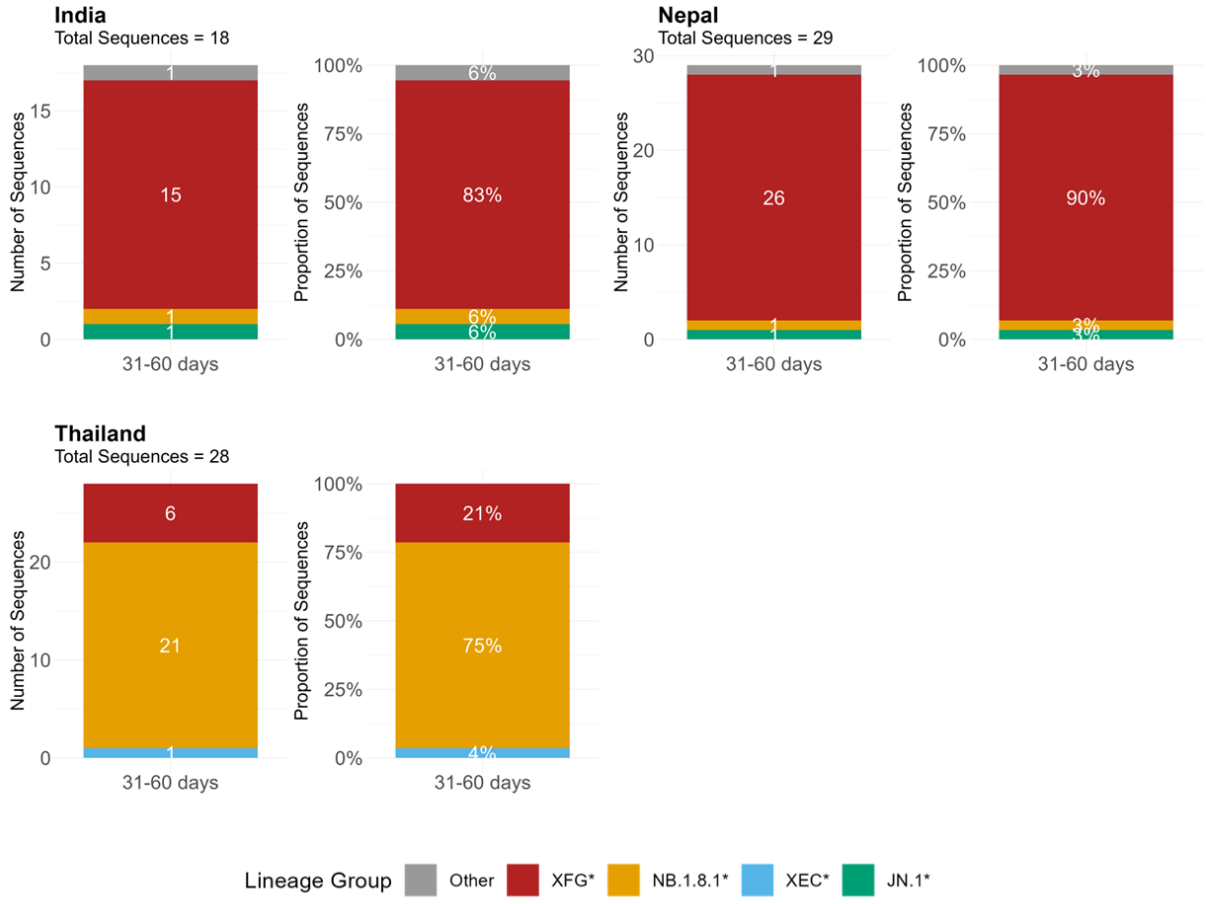
[13] WHO Integrated Influenza and Other Respiratory Viruses, 26 August 2025

SARS-CoV-2 variants in the South-East Asia Region

In the last 60 days:

- India reported 18 sequences into the GISAID with XFG* being dominant at 83% (15 sequences)
- Nepal submitted 29 sequences, with XFG* being predominant at 90%.
- Thailand reported 28 sequences to GISAID, with NB.1.8.1* accounting for 75% (21 sequences), followed by, XFG* at 21% (6 sequences), and XEC* at 4% (1 sequences).

Figure 3. Number and proportion of genomic sequences submitted - last 30 days and 31-60 days from India, Nepal and Thailand



Note: GISAID dataset accessed on 27 August 2025. The last submission was on 22 July 2025.

- As of 01 June 2025, WHO is tracking following SARS-CoV-2 variants and their sub-lineages: [14]
  - One variant of interest (VOIs): JN.1
  - Six variants under monitoring (VUMs): KP.3; KP.3.1.1; XEC, LP.8.1 NB.1.8.1, and XFG
- Initial risk evaluation of NB.1.8.1 and XFG were conducted and published [15] [16]. Considering the available evidence, the additional public health risk posed by both variants is evaluated as low at the global level. Current data do not indicate that these variants lead to more severe illness or deaths than other variants in circulation.
- Information on the status of the global SARS-CoV-2 variants can be found from the WHO COVID-19 dashboard.

[14] Tracking SARS-CoV-2 variants. Geneva: WHO; [date unknown, accessed 17 June 2025].
[15] WHO TAG-VE Risk Evaluation for SARS-CoV-2 Variant Under Monitoring: NB.1.8.1
[16] WHO TAG-VE Risk Evaluation for SARS-CoV-2 Variant Under Monitoring: XFG

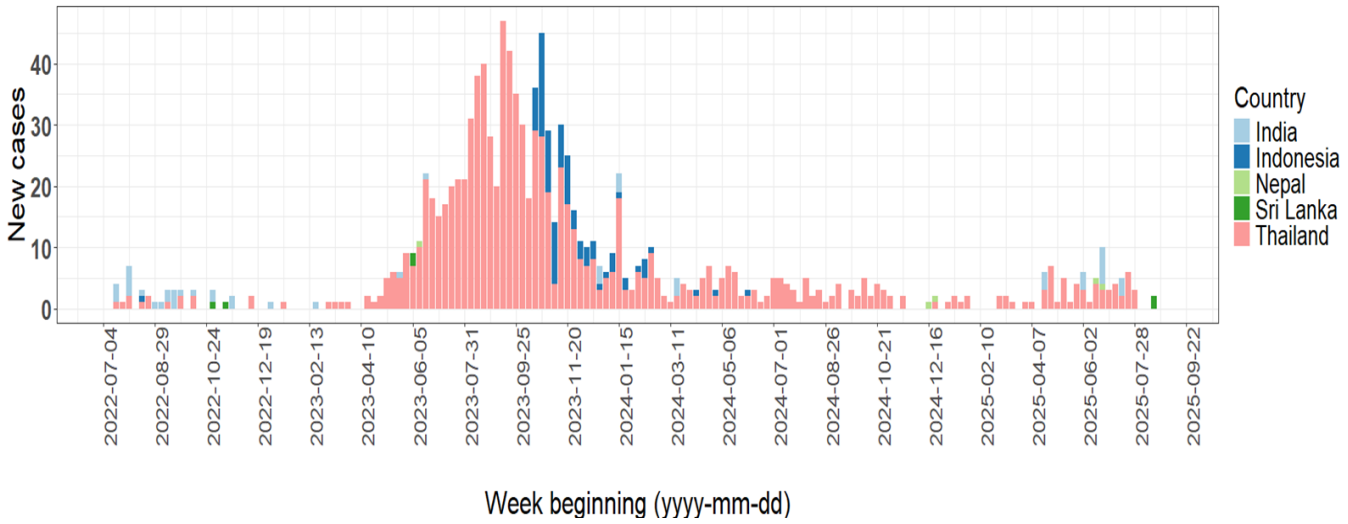
Mpox

Situation in the WHO South-East Asia Region

Situation as of 24 August 2025

- From 11 to 24 August 2025, one new mpox case was reported from Sri Lanka.
- In the WHO South-East Asia Region, a cumulative total of 1 074 laboratory-confirmed mpox cases, including 14 deaths, have been reported between 14 July 2022 and 24 August 2025 (Figure 5).

Figure 5. Number of mpox cases reported in WHO South-East Asia Region by date of notification* (14 July 2022 – 24 August 2025)

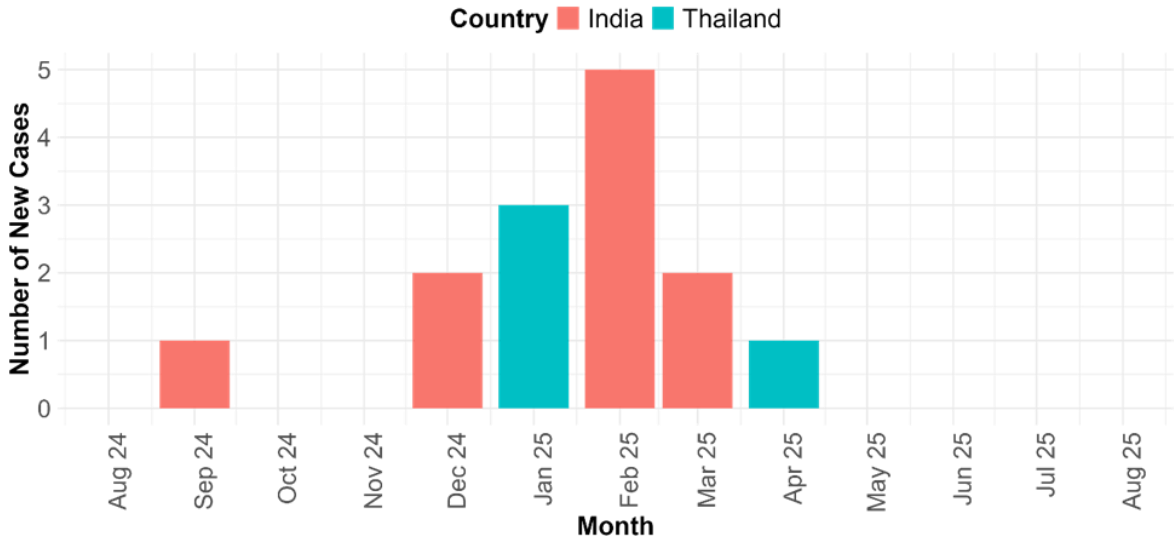


* Cases are plotted as per the week of notification (based on the date on which the case was notified to the public health authority). For 16 cases in India of which the date of notification is missing, the date of diagnosis was used. Following the reassignment of Indonesia from the WHO South-East Asia Region to the WHO Western Pacific Region, data received after 27 May 2025 will no longer be reflected in the graph.

- As of 24 August 2025, 15 cases of monkeypox virus (MPXV) clade Ib infection have been reported in the Region. The monthly trend is shown in Figure 6.
- The profiles of MPXV clade Ib cases are summarized in Table 2. Of those 15 cases:
  - Ten cases were reported in India and five cases in Thailand.
  - Nine cases were male, and six cases were female.
  - Fourteen out of 15 cases reported recent international travel history.
    - twelve cases travelled from the United Arab Emirates
    - one case travelled from the Democratic Republic of Congo
    - one case travelled from Oman

- For information on global epidemiological situation of mpox, please see:
  WHO mpox surveillance dashboard

Figure 6. Number of MPXV clade Ib cases reported in WHO South-East Asia Region by month of notification (as of 24 August 2025) *



* Cases are plotted as per the month of notification (based on the date on which the case was notified to the public health authority). For 10 cases in India of which the month of notification is missing, the month of diagnosis was used.

Table 2. Profile of the 15 confirmed MPXV clade Ib cases reported in the WHO South-East Asia Region, for which case-based information is available since August 2024 (as of 24 August 2025)

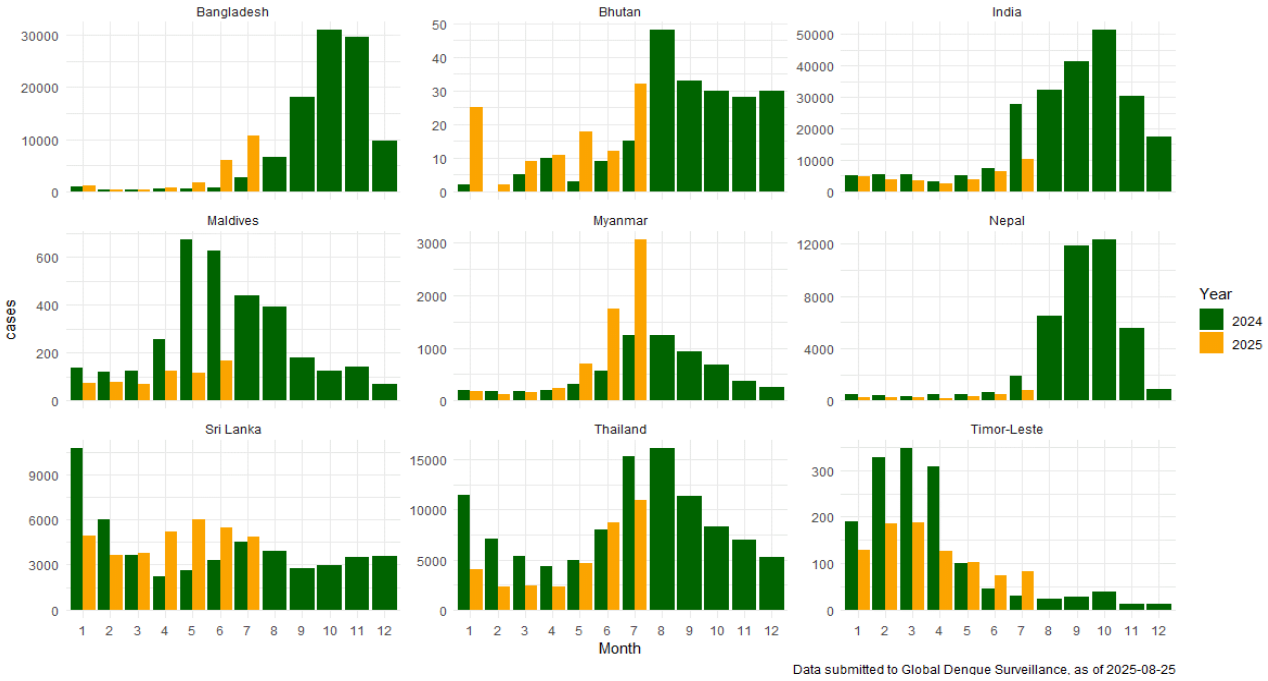
	Total (N=15)
Country	
India	10 (67%)
Thailand	5 (33%)
Recent International Travel	
No	1 (7%)
Yes	14 (93%)
Age Group	
Less than 18	0 (0%)
18-29	3 (20%)
30-39	8 (53%)
40-49	3 (20%)
50 and over	1 (7%)
Gender	
Female	6 (40%)
Male	9 (60%)

Dengue

Situation in the WHO South-East Asia Region [17]

- In July 2025, Thailand reported 10 987 cases, followed by Bangladesh with 10684 and India with 10 302 cases. Data for July were not available for Maldives. (Figure 7)

Figure 7. Reported dengue cases by country, January 2024 – July 2025



Note:

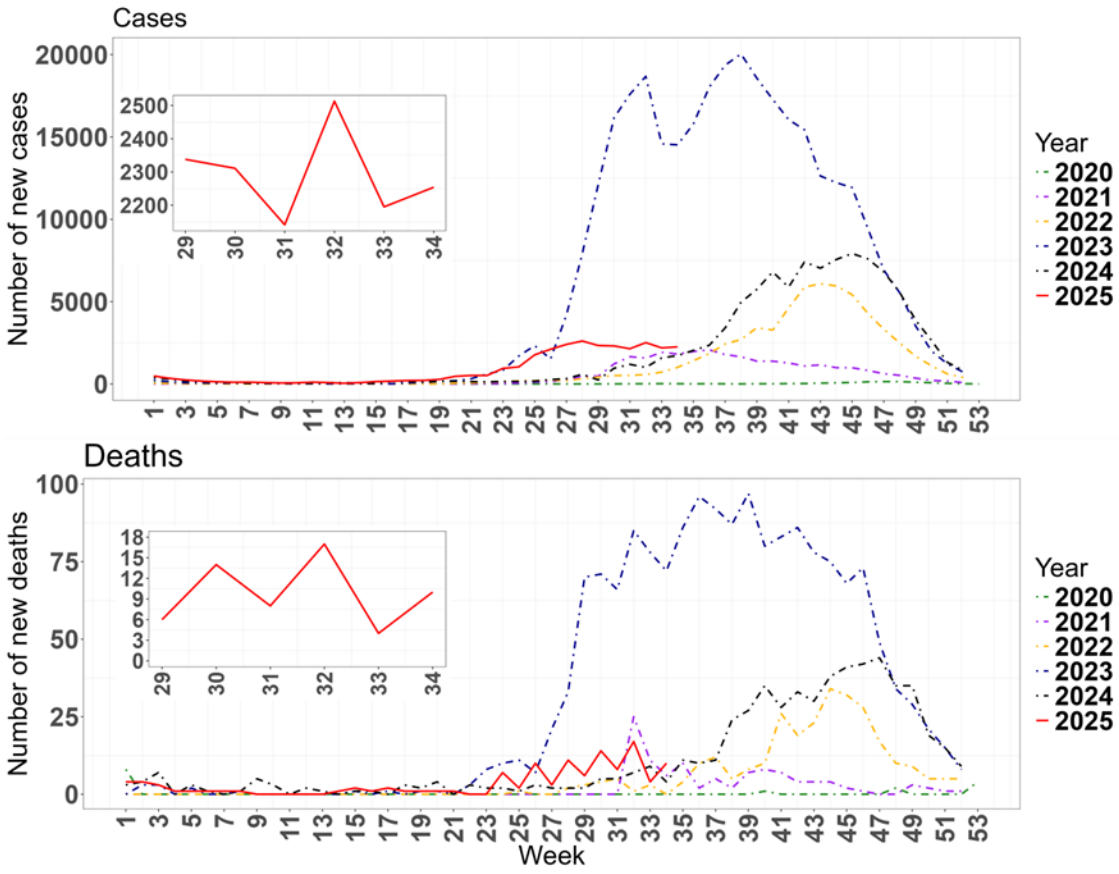
- Bangladesh, Bhutan, Myanmar, Thailand and Timor-Leste show the number of confirmed cases.
- Bangladesh reports only hospitalized cases. The majority of Myanmar cases are hospitalized cases.

[17] World Health Organization. Global dengue surveillance. https://worldhealthorg.shinyapps.io/dengue_global/

Bangladesh [18] [19]

- During week 34 (18 to 24 August 2025), a total of 2 254 new dengue cases were reported in Bangladesh, a 2.7% increase compared to 2 195 cases reported during week 33 of 2025 (11 to 17 August 2025).
- During week 34, 10 new dengue deaths were reported in Bangladesh, a 150% increase compared to 4 deaths reported during week 33 of 2025.
- In 2025, as of week 34, a total of 29 321 dengue cases and 118 dengue-related deaths have been reported. This is 260% of the number of cases (n= 11 278) and 134% of the number of deaths (n=88) reported till week 34 in 2024.

Figure 7. Number of new dengue cases and deaths by week in Bangladesh from week 1 of 2020 to week 34 of 2025



[18] Directorate General of Health Services (DGHS), Bangladesh. Daily Dengue Status Report [Internet]. Dhaka: DGHS; 2025 [cited 2025 August 25]. Available from: https://old.dghs.gov.bd/index.php/bd/home/5200-daily-dengue-status-report

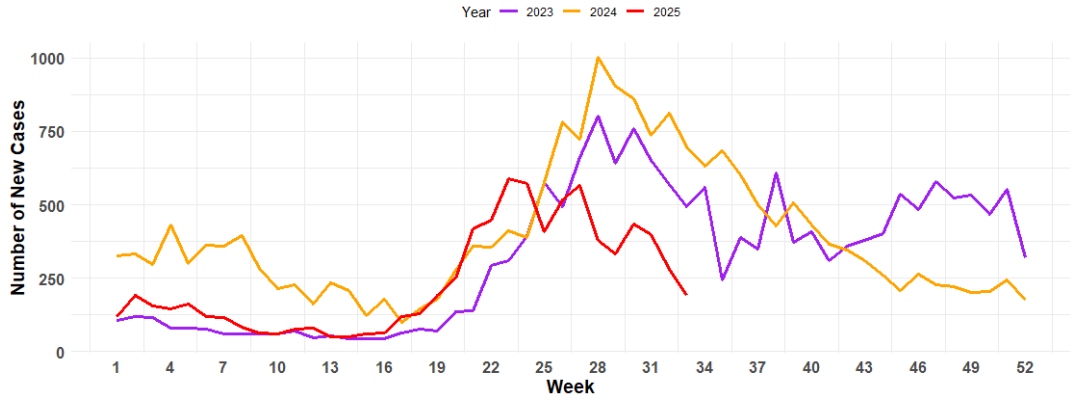
[19] Directorate General of Health Services (DGHS), Bangladesh. Dengue Dynamic Dashboard [Internet]. Dhaka: DGHS; 2025 [cited 2025 August 25]. Available from: https://dashboard.dghs.gov.bd/pages/heoc_dengue_v1.php

India

Kerala[20]

- In Kerala, dengue cases in 2024 started higher early in the year, with fluctuations until week 20, followed by a sharp rise that peaked at around 1,000 new cases in week 28 before steadily declining.
- In 2025, cases began lower than 2024 but increased steadily from week 17, surpassing 2024 levels briefly between weeks 23–25, before stabilizing at moderate levels.
- A total of 20 550 dengue cases were reported in the entirety of 2024.

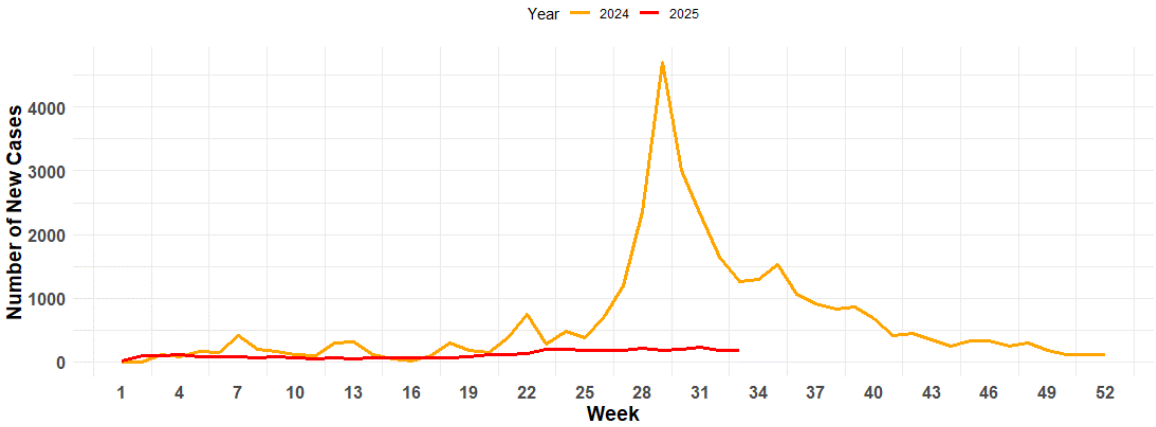
Figure 8. Number of new weekly dengue cases in Kerala state from week 1 of 2023 to week 33 of 2025.



Karnataka[21]

- In Karnataka, dengue cases in 2024 peaked sharply at over 4 500 in week 29 before declining but staying elevated until week 40. In 2025, case numbers have remained low and stable with no major spikes.
- A total of 32 789 dengue cases were reported throughout 2024.

Figure 9. Number of new dengue cases by week in Karnataka state from week 1 of 2024 to week 33 of 2025



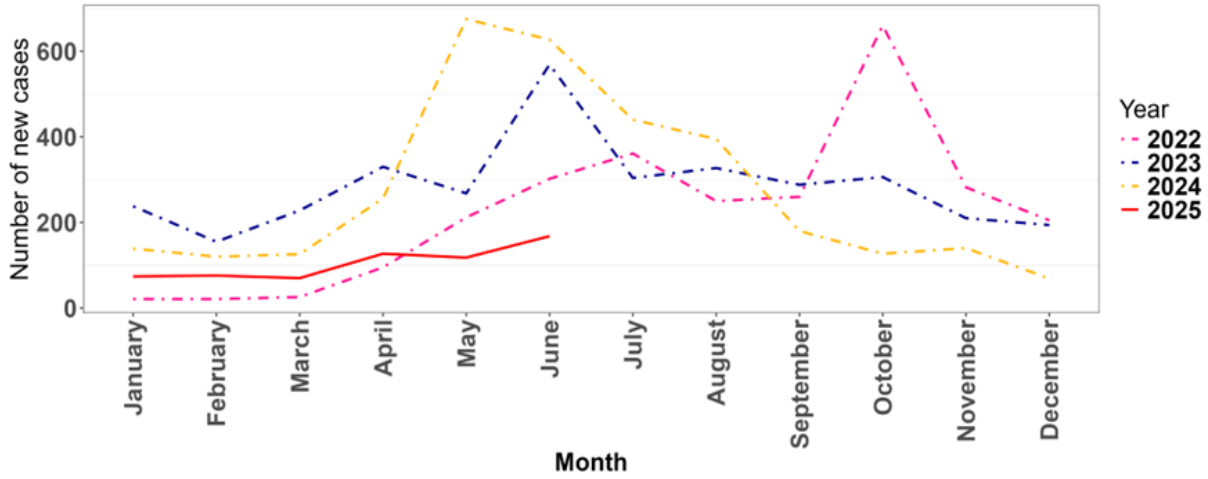
[20] Department of Health and Family Welfare, Government of Kerala. Health Dashboard – Integrated Disease Surveillance Programme (IDSP) [Internet]. Thiruvananthapuram: DHS Kerala; 2025 [cited 2025 August 25]. Available from: https://dashboard.kerala.gov.in/

[21] Department of Health and Family Welfare, Government of Karnataka. PRISM-H Disease Surveillance Dashboard [Internet]. Bengaluru: DHFW-GoK; 2023 [cited 2025 August 25]. Available from: https://hfwcom.karnataka.gov.in/info-4/Weekly%20Infectious%20Disease%20Report/en

Maldives[22]

- No update has yet been made publicly available for July 2025. During June 2025, a total of 168 cases of dengue were reported in the Maldives, a 42.4% decrease compared to May 2025 (n=118).
- In 2025, as of 30 June, a total of 633 cases of dengue have been reported compared to 1 943 cases reported during the same period in 2024. A total of 3 294 cases were reported throughout 2024.

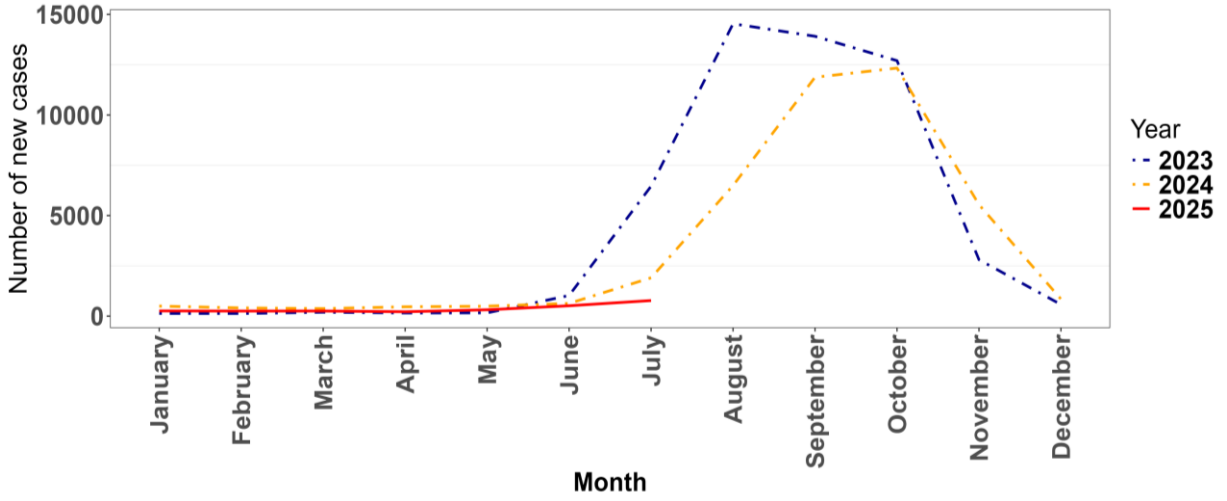
Figure 10. Number of new cases of dengue by month in Maldives from January 2022 to June 2025



Nepal [23]

- During July 2025, a total of 774 dengue cases were reported in Nepal, a 50.3% increase compared to June 2025 (n = 515).
- In 2025, as of 31 July, a total of 2 587 cases of dengue have been reported compared to 4 777 cases during the same period in 2024. A total of 41 865 dengue cases and 15 deaths were reported throughout 2024.

Figure 11. Number of new cases of dengue by month in Nepal from January 2023 to July 2025



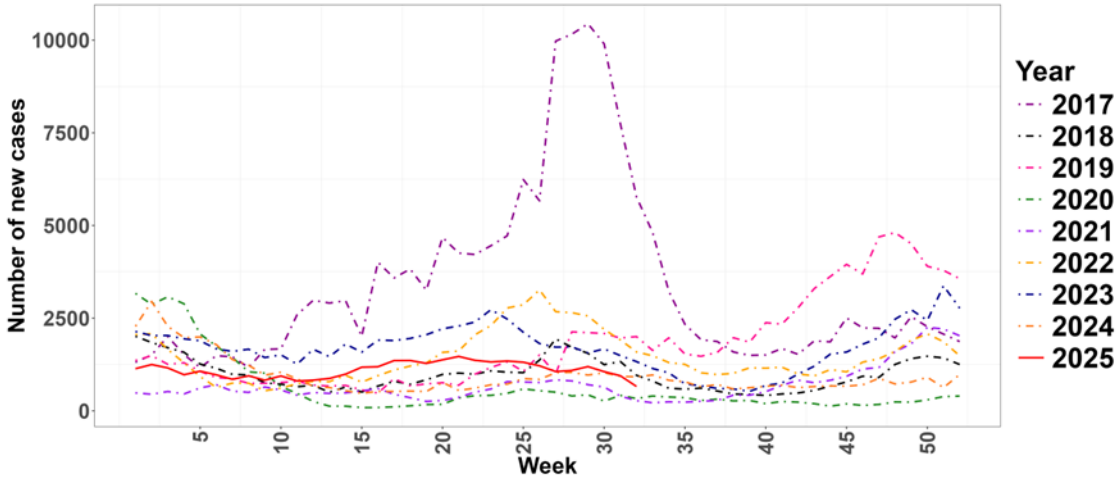
[22] World Health Organization. Global dengue surveillance. https://worldhealthorg.shinyapps.io/dengue_global/

[23] Epidemiology and Disease Control Division (EDCD), Ministry of Health and Population, Nepal. Dengue situation update: [Internet]. Kathmandu: EDCD; 2024 [cited 2025 Jun 17]. Available from: https://edcd.gov.np/news/20241203dengue-situation-update

Sri Lanka [24]

- During week 32 (04 to 10 August 2025), a total of 659 new dengue cases were reported in Sri Lanka, a 30.5% decrease compared to 948 cases reported during week 31 (28 July to 03 August 2025).
- From week one to week 32 in 2025, a total of 35 403 cases were reported compared to 34 150 cases and 61 216 cases during the same period in 2024 and 2023, respectively.

Figure 12. Number of new dengue cases by week in Sri Lanka from week 1 of 2017 to week 32 of 2025.



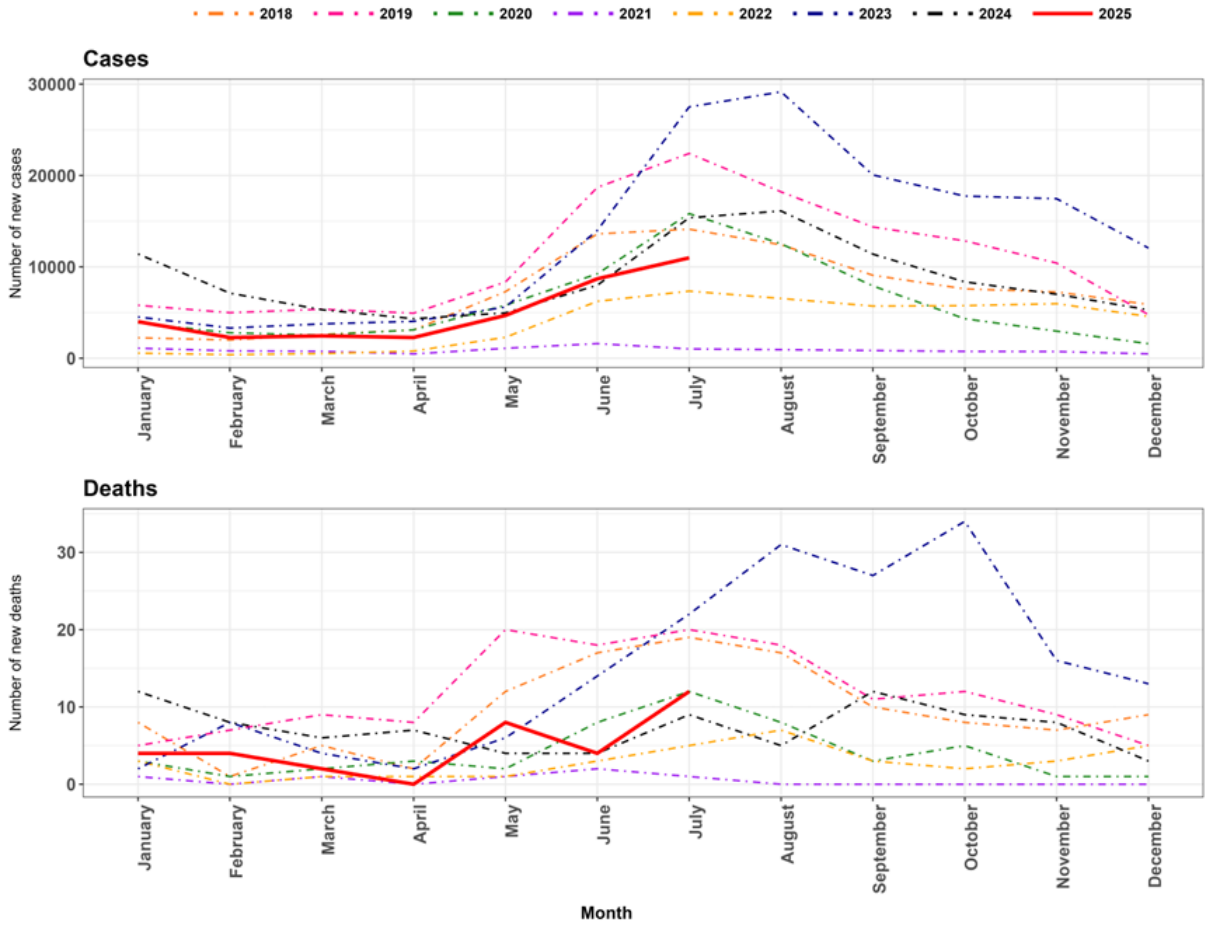
Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - 2017 to 2020; 2021 to 2025

[24] National Dengue Control Unit (NDCU), Ministry of Health, Sri Lanka. National Dengue Control Unit [Internet]. Colombo: MoH; 2025 [cited 2025 August 25]. Available from: https://www.dengue.health.gov.lk/web/index.php/en/

Thailand [25]

- During July 2025, a total of 10 987 cases of dengue were reported in Thailand, a 26% increase compared to June 2025 (n=8 697).
- During July 2025, 12 dengue deaths were reported, a 200% increase compared to June 2025 (n=4).
- In 2025, as of 31 July, a total of 35 359 dengue cases and 34 dengue-related deaths have been reported. This is 63% of the number of cases (n=56 509) and 68% of the number of deaths (n=50) reported during the same period in 2024.

Figure 13. Number of new cases of dengue by month in Thailand from January 2018 to July 2025.



[25] World Health Organization. Global dengue surveillance. https://worldhealthorg.shinyapps.io/dengue_global/

Annex

WHO resources on mpox

All current WHO interim technical guidance can be accessed on this page of the WHO website. WHO evidence-based guidance has been and will continue to be updated in line with the evolving situation and updated scientific evidence. The selected publications are listed below for easier reference, along with other relevant resources.

- **IHR Emergency Committee, Temporary Recommendations and Standing Recommendations**
  - Fourth meeting of the International Health Regulations (2005) Emergency Committee regarding the upsurge of mpox 2024 – Temporary recommendations (9 June 2025)
  - Standing recommendations for mpox issued by the Director-General of the World Health Organization (WHO) in accordance with the International Health Regulations (2005) (IHR)

- **Strategic planning**
  - Mpox global strategic preparedness and response plan (17 April 2025)
  - Mpox global strategic preparedness and response plan (26 August 2024, updated on 6 September 2024)
  - Strategic framework for enhancing prevention and control of mpox (2024-2027) (May 2024)

- **General information on mpox**
  - Mpox fact sheet
  - Mpox (monkeypox) health topic page
  - Mpox (monkeypox) Q&A
  - Monkeypox outbreak page (2022)

- **Epidemiological situation**
  - Dashboard: https://worldhealthorg.shinyapps.io/mpx_global/
  - Multi-country outbreak of mpox. External situation report #56 (31 July 2025)
  - Genomic epidemiology of monkeypox virus (Nextstrain)

- **Technical documents**
  - Surveillance, case investigation and contact tracing for mpox: interim guidance (27 November 2024)
  - Considerations for wastewater and environmental surveillance for monkeypox virus: interim guidance (25 November 2024)
  - Technical Brief (interim) and Priority Actions: Enhancing Readiness for mpox in WHO South-East Asia Region (13 September 2024)
  - Diagnostic testing for the monkeypox virus (MPXV): interim guidance (10 May 2024)
  - Risk communication and community engagement readiness and response toolkit: mpox (23 April 2024)
  - Clinical characterization of mpox including monitoring the use of therapeutic interventions: statistical analysis plan (13 October 2023)
  - Smallpox and mpox (orthopoxviruses): WHO position paper (August 2024)
  - SAGE on mpox vaccines (page 16)
  - Vaccines and immunization for monkeypox: Interim guidance, 16 November 2022
  - Annexes to the Vaccines and immunization for monkeypox interim guidance
  - Background document for the SAGE October 2022 session on monkeypox vaccines

- **Data collection tools**
  - Case report form: Word, Case investigation form: PDF

- **Mass gathering**
  - Public health advice for gatherings during the current monkeypox outbreak
  - Interim advice for public health authorities on summer events during the monkeypox outbreak in Europe, 2022
  - Catalogue of resources on mpox mass and large gathering event preparedness