WHO South-East Asia Region
Epidemiological Bulletin

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HEALTH EMERGENCIES programme
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South-East Asia Region

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

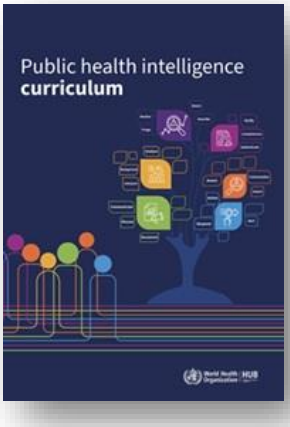
New publications: Public health intelligence competency framework[1] and public health intelligence curriculum[2]

Rapid identification of and response to health threats are critical for global health security. Recent major public health events have underscored the need to define essential public health intelligence (PHI) competencies to mitigate the effects of such events and support countries in meeting health-regulation mandates. To address this need, the World Health Organization, in collaboration with global partners, has developed two complementary resources: the Public Health Intelligence Competency Framework and the Public Health Intelligence Curriculum. Together, these publications aim to standardize and strengthen core elements of PHI practice and training across countries and sectors.

Public Health Intelligence Competency Framework

The Framework was created to define the essential competencies required for individuals and institutions engaged in PHI activities. Its development was informed by a comprehensive landscape assessment, including literature reviews, job analyses, expert consultations and stakeholder surveys. This process identified key gaps in existing PHI training resources and helped shape the structure of the Framework. The Framework is organized into four technical domains—**detect, verify, analyse and assess**—with each domain outlining core PHI competencies, accompanied by a **functional domain** focused on collaborative information exchange. The Framework is applicable across human health, One Health, humanitarian and multisectoral settings and is intended to support countries in building the workforce capabilities needed for timely detection, early warning and informed public-health response.

Public Health Intelligence Curriculum



The Curriculum was created as a companion to the Framework. Both documents underwent an iterative development process of research, drafting and review. This included a landscape analysis of existing PHI training materials, stakeholder consultations, a review of job listings, and an examination of relevant frameworks, curricula and literature. The Curriculum translates the competencies into practical learning pathways through modular, competency-based training design. It is intended for use in academic programmes, in-service training and workforce development, and is adaptable to different institutional, geographical and resource contexts. The Curriculum and Framework are also designed to complement related resources such as the Competencies for One Health Field Epidemiology (COHFE) Framework[3] and the Global Competency Framework for Universal Health Coverage.[4]

[1] World Health Organization. Available from: https://www.who.int/publications/i/item/9789240115408
[2] World Health Organization. Available from: https://www.who.int/publications/i/item/9789240115385
[3] World Health Organization. Available from: https://www.who.int/publications/i/item/9789240080058
[4] World Health Organization. Available from: https://www.who.int/publications/i/item/9789240091214

New publication: Strategic plan for coronavirus disease threat management: advancing integration, sustainability, and equity, 2025–2030 [5]

The WHO strategic plan for coronavirus disease threat management sets out the global framework for the sustained, integrated and evidence-based management of coronavirus disease threats including coronavirus disease (COVID-19), Middle East respiratory syndrome coronavirus (MERS), and potential novel coronavirus diseases of public health importance, covering the 2025-2030 period. It emphasizes the long-term, routine management of coronavirus diseases, embedded within national health care and health emergency systems and aligned with broader respiratory and other infectious disease management strategies.

The plan guides and supports Member States and partners in developing and implementing sustainable, comprehensive approaches to coronavirus disease threat management and in integrating these approaches within broader respiratory and other infectious disease prevention and control programmes. It consolidates existing WHO technical guidance to inform national policies, programme design and implementation, and systems strengthening across all levels of the health system.

The WHO strategic plan for coronavirus disease threat management builds on and supersedes previous WHO strategic preparedness and response plans for COVID-19 and MERS, consolidating lessons learned into a unified, forward-looking approach. It is intended for Member States, partners and other stakeholders involved in coronavirus and other respiratory disease threat management.

Related links:

1. Strategic plan for coronavirus disease threat management: at a glance
2. Standing recommendations for COVID-19 issued by the Director-General of the World Health Organization (WHO) in accordance with the International Health Regulations (2005) (IHR)
3. Novel coronavirus disease 2019 (COVID-19)
4. Middle East respiratory syndrome coronavirus (MERS-CoV)

[5] World Health Organization. Available from: https://www.who.int/publications/i/item/9789240117662

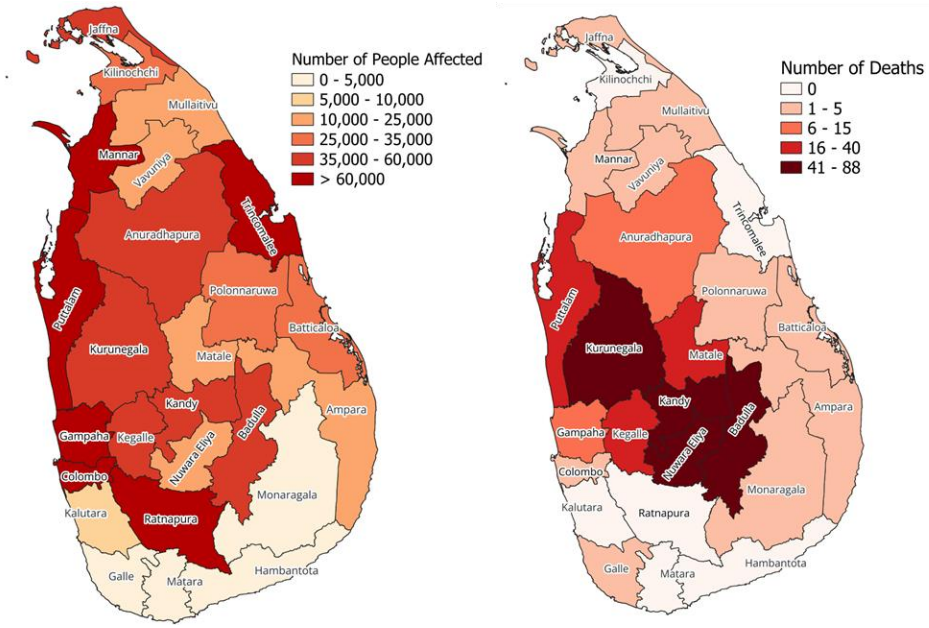
Sri Lanka: Tropical cyclone

Situation update as of 2 December 2025

According to Disaster Management Centre (DMC) on 02 December 2025 [6]

- As of 2 December 2025, the Disaster Management Centre (DMC) of Sri Lanka reported that Cyclone Ditwah had caused a severe nationwide disaster, affecting 1 466 615 people from 407 594 families across 25 districts.
- The cyclone resulted in 410 confirmed deaths, with 336 individuals still missing.
- Widespread displacement forced 233 015 people from 64 483 families into 1 441 active shelters.
- The storm also damaged housing infrastructure extensively, with 565 homes fully destroyed and 20 271 partially damaged.
- This data reflects the extensive humanitarian and structural impact across nearly the entire country, underscoring the scale of the crisis and the ongoing need for coordinated relief and recovery efforts.
- As of 2 December 2025, the district most severely impacted by Cyclone Ditwah recorded the highest death toll in Kandy (88), Badulla (83), Nuwara Eliya (75), Kurunegalaa (52), Puttalam (27), and Matale (24).

Figure 1. The distribution number of people affected and deaths in Sri Lanka, situation as 2 December 20025, at 10.00 AM Sri Lanka Standard Time (SLST) [5]



Source: DMC Sri Lanka

[6] Disaster Management Centre (DMC), Sri Lanka Situation Report. Available from: https://www.dmc.gov.lk/index.php?option=com_dmcreports&view=reports&report_type_id=1&Itemid=273&lang=en

Thailand: Heavy rain (flash floods)

Situation update as of 2 December 2025

- Southern Thailand is facing a major public health crisis following widespread flooding that has affected nearly 3 million people and damaged over 1.15 million houses across 12 provinces, including Songkhla, Nakhon Si Thammarat, and Yala[7] [8]
- Between 25 November to 1 December, Southern Thailand showed a high level of precipitation with average 50 mm/day.
- According to the Ministry of Public Health (MOPH), an estimated 140–170 deaths have been reported, most of them occurring in Hat Yai, Songkhla Province [9] [10].
- The MOPH has activated Public Health Emergency Operation Centres (PHEOCs) in all affected provinces to coordinate the emergency response and has mobilized the Special Environmental-health Response Team (SEhRT) to support flood-relief operations, sanitation, and waste management9 [11] [12] .
- Authorities have also warned the public about post-flood hazards, including infections, injuries, and encounters with venomous animals[9].
- Recovery priorities now focus on restoring hospital infrastructure, reestablishing cold-chain systems for vaccines, strengthening disease surveillance, and providing clean water and mental health support to prevent a secondary health crisis[11] [12].

[7] https://reliefweb.int/disaster/fl-2025-000209-tha
[8] https://www.gdacs.org/report.aspx?eventtype=FL&eventid=1103621
[9] https://pr.moph.go.th//online/index/news/331845
[10] https://thailand.prd.go.th/en/content/category/detail/id/48/iid/449319
[11] https://pr.moph.go.th/online/index/news/331279
[12] https://anamai.moph.go.th/th/news-anamai/43548

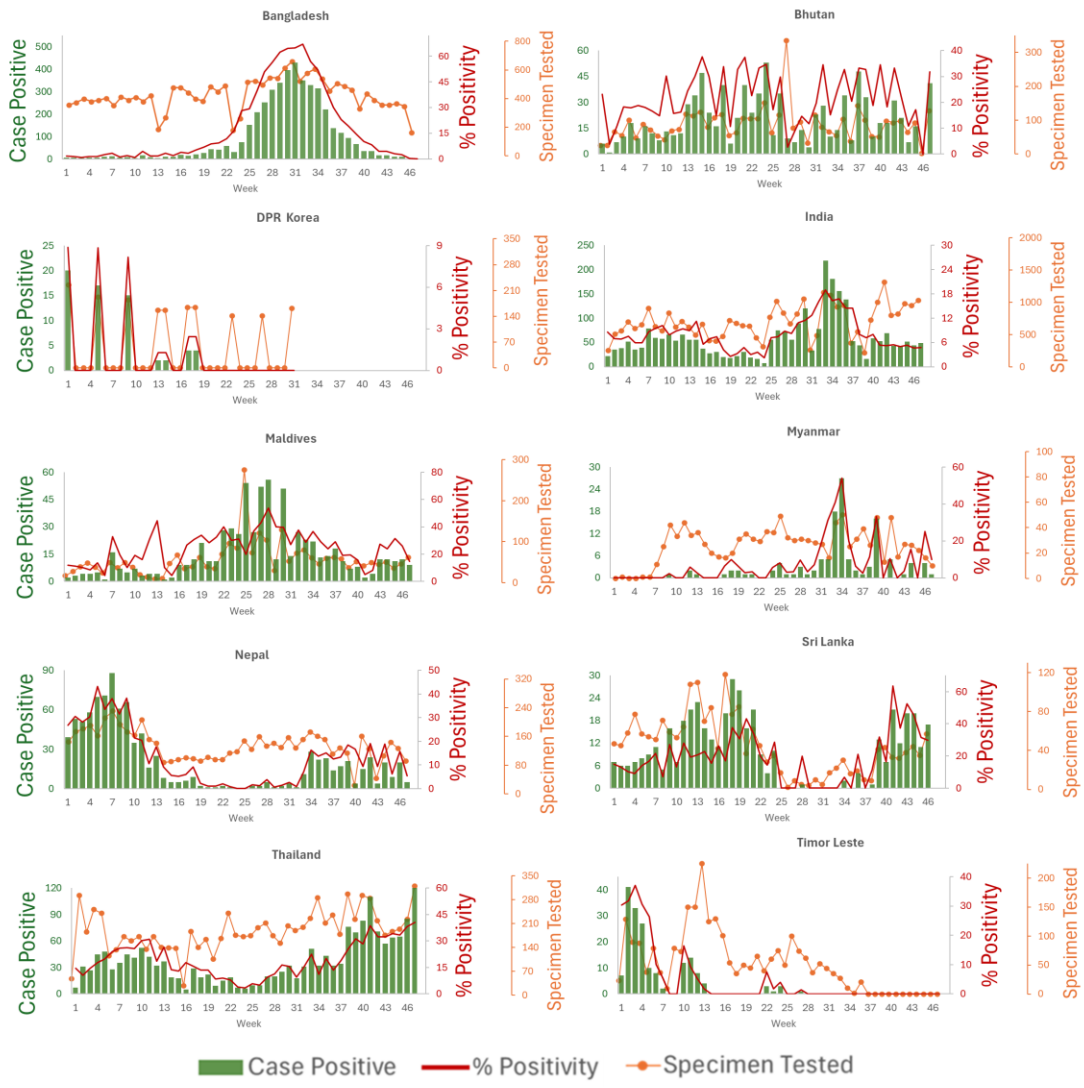
Influenza

Situation in the WHO South-East Asia Region

Situation as of 2 December 2025 [13]

- Figure 2 shows the influenza data from the WHO FluNet of the RespiMart platform, extracted on 2 December 2025.
- In the SEA Region during weeks 46–48, there were 418 lab-confirmed influenza cases among 3 568 samples tested (test positivity proportion at 12%). Thailand (40%), Bhutan (31%), and Sri Lanka (30%) show a high-test positivity proportion during weeks 46 to 48.
- Democratic People's Republic of Korea and Timor Leste did not submit samples during the week 46 to 48.

Figure 2. Weekly trends of specimens tested at National Influenza Centers (NIC) and laboratory confirmed influenza in the WHO South-East Asia Region (2025), situation as 2 December 2025



Source: Respimart/FluNet

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

Situation of Influenza virus types, Virus A subtypes and Virus B lineages during the Week 46-48 2025, as on 2 December 2025[14]

- Table 1 shows influenza virus A subtype and B lineage distribution across ten countries in the WHO South-East Asia Region for epidemiological weeks 46 to 48 of 2025, based on data extracted from WHO's RespiMart platforms on 2 Dec 2025. The last submission was on 16 Nov 2025 (Week 47).
- A total of 3 568 samples were tested across the region, out of which 418 (12%) were positive for influenza. These were subtyped and their lineages determined, and results are shown in Table 1.
- A(H3) was the predominant in the overall Region (71%), and in Bhutan (93%), Thailand (82%) and Maldives (71%).
- B(Victoria) lineage represented 21% of influenza virus detected overall in the region, with higher percentages in India (55%). Thailand also detected 12% of this lineage among 215 laboratory confirmed influenza cases
- In Sri Lanka and Nepal (41% and 12% respectively), positive samples for Influenza A were not subtyped.
- In week 46-48, DPR Korea and Timor-Leste had no submission; Myanmar had few influenza positive samples (n=5).

Table 1. Distribution of influenza virus subtypes in the WHO South-East Asia Region (weeks 46-48, 2025), situation as 2 December 2025*

Country	Total Samples Tested	Number of Influenza Positive	Positivity Rate %	A (H1) %	A (H3) %	A (H5) %	A (H1N1)pdm09 %	A (Unsubtype) %	B (Yamagata) %	B (Victoria) %	B (Lineage not Determined) %
All Country	3,568	418	12%	0%	71%	0%	5%	2%	0%	21%	1%
Bangladesh	511	1	0%	0%	0%	0%	0%	0%	0%	100%	0%
Bhutan	132	41	31%	0%	93%	0%	5%	0%	0%	2%	0%
DPR Korea	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
India	1,974	93	5%	0%	39%	0%	6%	0%	0%	55%	0%
Maldives	107	21	20%	0%	71%	0%	0%	0%	0%	29%	0%
Myanmar	26	5	19%	0%	100%	0%	0%	0%	0%	0%	0%
Nepal	218	25	12%	0%	64%	0%	4%	12%	0%	8%	12%
Sri Lanka	57	17	30%	0%	47%	0%	0%	41%	0%	0%	12%
Thailand	543	215	40%	0%	82%	0%	6%	0%	0%	12%	0%
Timor-Leste	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%

* Positivity proportion that less than 0.5 % were considered as zero

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

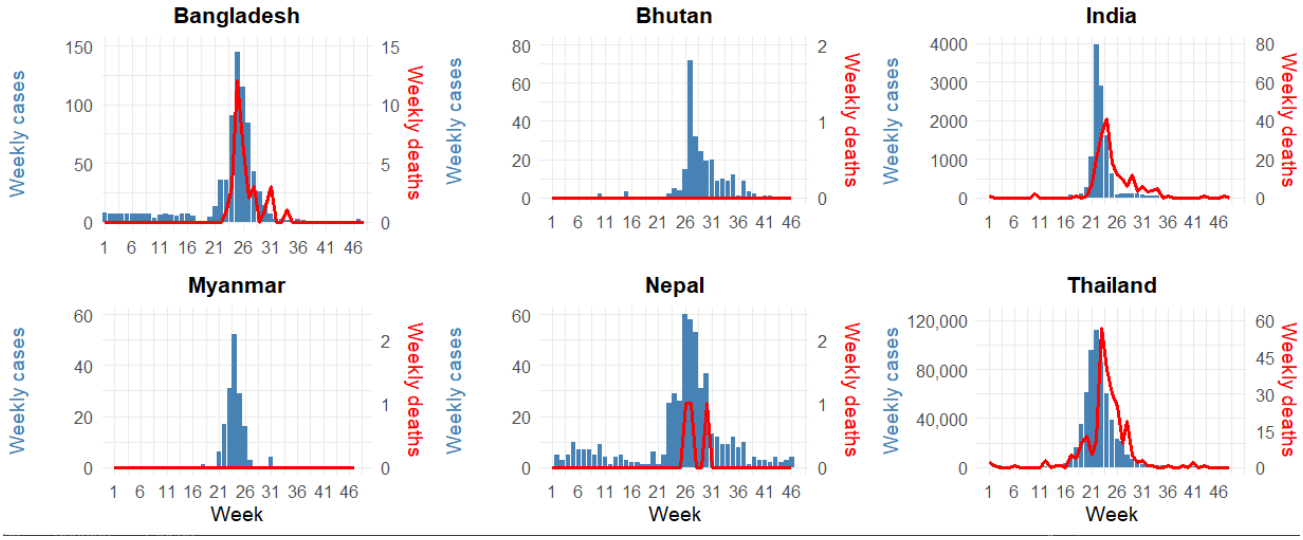
COVID-19

Situation in the WHO South-East Asia Region

Situation as of 30 November 2025

- The weekly number of COVID-19 cases reported on official websites, including Bangladesh[15], Bhutan[16], India[17], Myanmar[18], Nepal[19] and Thailand[20], are presented in Figure 5.
- Data of the most recent week (week 48) are not available from Bhutan and Myanmar.
- Please visit the WHO COVID-19 dashboard for the global situation of COVID-19.

Figure 3. Weekly number of new COVID-19 cases and deaths reported from selected countries since week one to week 48 of 2025 in the WHO South-East Asia Region *



* Bhutan and Nepal data are as of week 46.

Based on data from the integrated influenza-SARS-CoV-2 sentinel surveillance system, Figure 6 summarizes weekly trends of eight countries—Bangladesh, Bhutan, India, Maldives, Nepal, Sri Lanka, Thailand and Timor-Leste - including the number of positive COVID-19 cases, the percentage positivity and the number of specimens tested. [21]

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

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

[17] Ministry of Health and Family Welfare, Government of India. COVID-19 India Dashboard [Internet]. New Delhi: Available from: https://covid19dashboard.mohfw.gov.in/

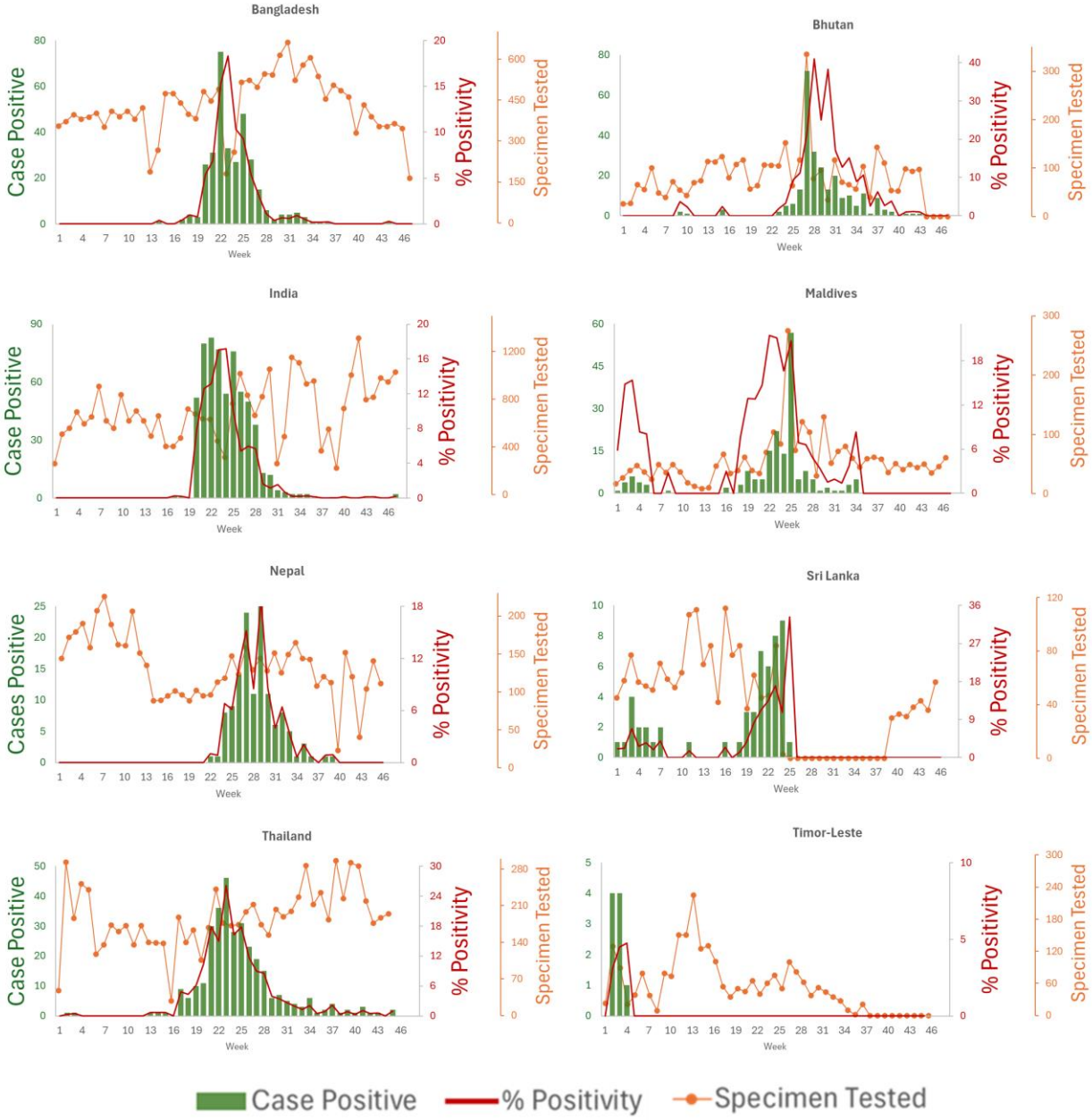
[18] Ministry of Health, Republic of the Union of Myanmar. Ministry of Health official website [Internet]. Nay Pyi Taw: MoH; 2025 Available from: https://www.mohs.gov.mm/

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

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

[21] Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard. Available from: https://app.powerbi.com/view?r=eyJrIjoiNzdjZTVmY2YtNzY2NC00NTM0LTkzY2QtMWM0MzY0Mjg0YTZjIiwidCI6ImY2MTBjMGI3LWJkMjQtNGIzOS04MTBiLTNkYzI4MGFmYjU5MCIsImMiOjh9

Figure 4. The number of COVID-19 positive case, % positivity and specimen tested from integrated influenza-SARS CoV-2 sentinel surveillance systems (as on 2 December 2025)



Source: Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard

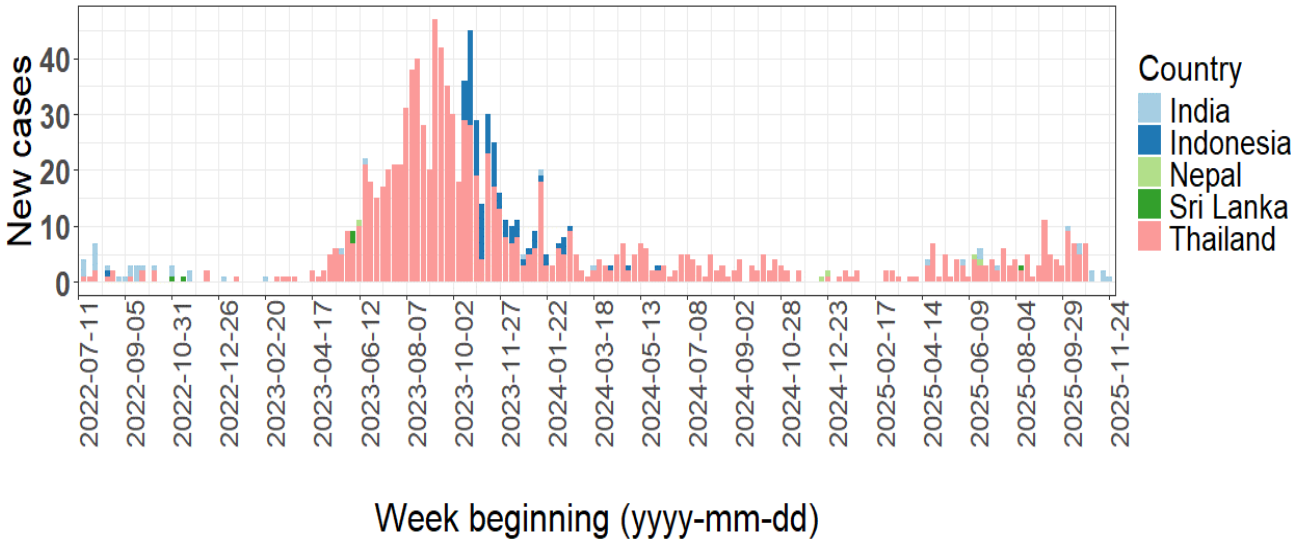
Mpox

Situation in the WHO South-East Asia Region

Situation as of 30 November 2025

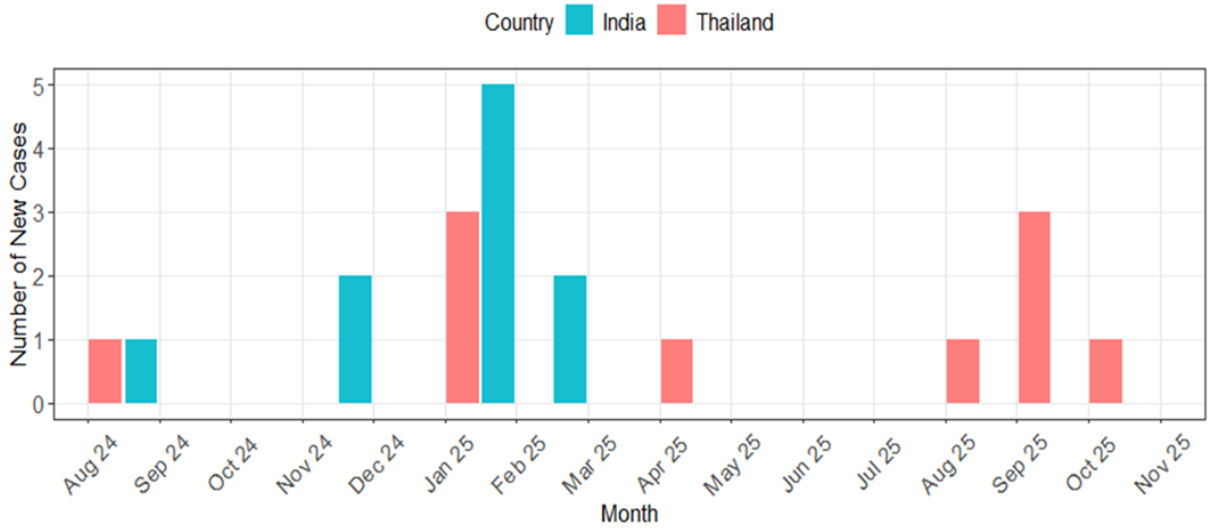
- In week 47 and 48 (17 to 30 November 2025), three new mpox case were reported from India.
- As of 30 November 2025, in the WHO South-East Asia Region, a total of 1 148 laboratory-confirmed mpox cases including 14 deaths, have been reported since 14 July 2022 (Figure 7).
- Twenty cases with mpox virus (MPVX) clade Ib were reported in the Region to date – ten from India and ten from Thailand. Please see Figure 8 for the trend of MPVX Ib cases detected in the Region.
- For information on global epidemiological situation of mpox, please see: WHO mpox surveillance dashboard

Figure 5. Number of mpox cases reported in WHO South-East Asia Region by date of notification* (14 July 2022 – 30 November 2025)



* Cases are plotted per week of notification - the date on which the case is notified to the public health authority.
** Where the date of notification is missing, this has been replaced with the date of diagnosis. Following the reassignment of Indonesia from the WHO South-East Asia Region to the WHO Western Pacific Region, data of Indonesia after 27 May 2025 will no longer be reflected in the graph.

Figure 6. Number of MPXV clade Ib cases reported in WHO South-East Asia Region by month of notification (as of 30 November 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 20 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 30 November 2025)

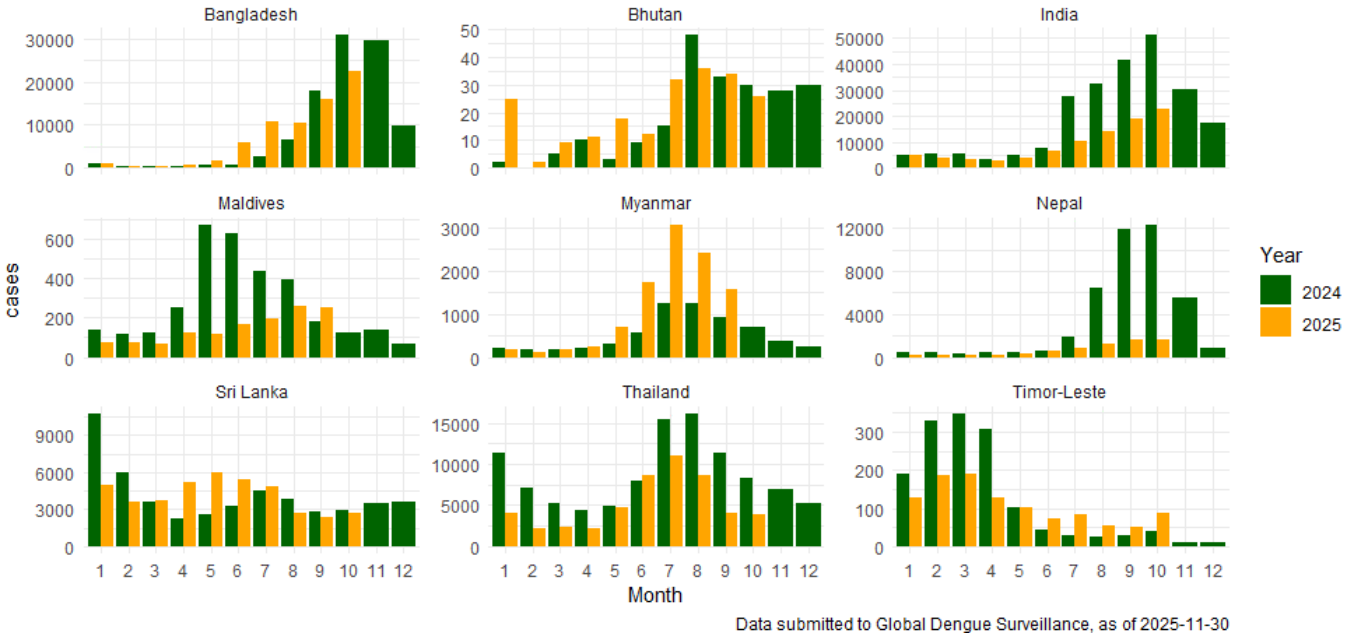
	Total (N=20)
Country	
India	10 (50%)
Thailand	10 (50%)
Travel	
No	1 (5%)
Yes	19 (95%)
Unknown	0 (0%)
Age Group	
Less than 18	0 (0%)
18-29	6 (30%)
30-39	10 (50%)
40-49	3 (15%)
50 and over	1 (5%)
Gender	
Female	7 (35%)
Male	13 (65%)

Dengue

Situation in the WHO South-East Asia Region [22]

- In October 2025, India reported 22 659 cases, followed by Bangladesh with 22 520 cases. Data for October were not available for Maldives and Myanmar. (Figure 9)

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

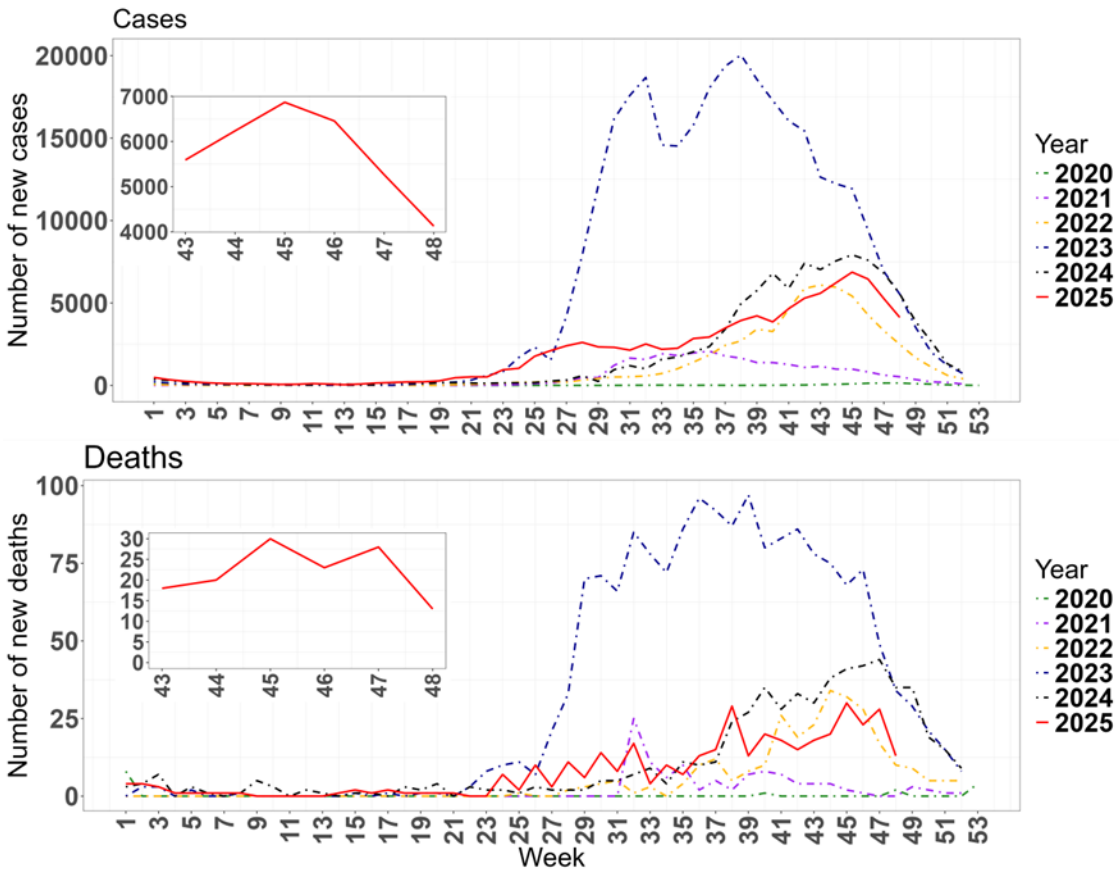


[22] World Health Organization. Global dengue surveillance. https://worldhealthorg.shinyapps.io/dengue_global/

Bangladesh [23]

- During week 48 of 2025 (24 November 2025 to 30 November 2025), a total of 4 128 new dengue cases were reported in Bangladesh, a 21.6% decrease compared to 5 267 cases reported during week 47 of 2025 (17 to 23 November 2025).
- During week 48 a total of 13 new dengue deaths were reported in Bangladesh, a 53.6% decrease compared to 28 deaths reported during week 47.
- In 2025, as of week 48, a total of 95 081 dengue cases and 380 dengue-related deaths have been reported. This is 103% of the number of cases (n= 92 351) and 76% of the number of deaths (n = 497) reported till week 48 in 2024.

Figure 8. Number of new dengue cases and deaths by week in Bangladesh from week 1 of 2020 to week 48 of 2025

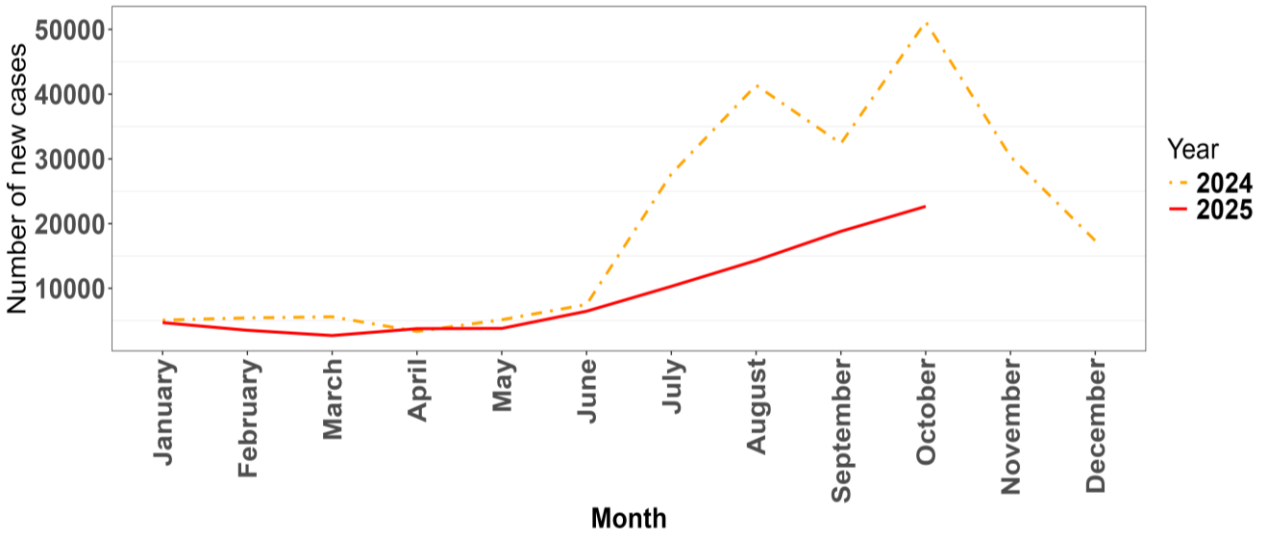


[23] Directorate General of Health Services (DGHS), Bangladesh. Daily Dengue Status Report [Internet]. Dhaka: DGHS; 2025 Available from: https://old.dghs.gov.bd/index.php/bd/home/5200-daily-dengue-status-report

India

- During October 2025, a total of 22 659 cases of dengue were reported in India, a 21% increase compared to September 2025 (n = 18 803).
- In 2025, as of 31 October, a total of 91 015 cases of dengue have been reported compared to 184 712 cases during the same period in 2024. A total of 232 425 dengue cases were reported throughout 2024.

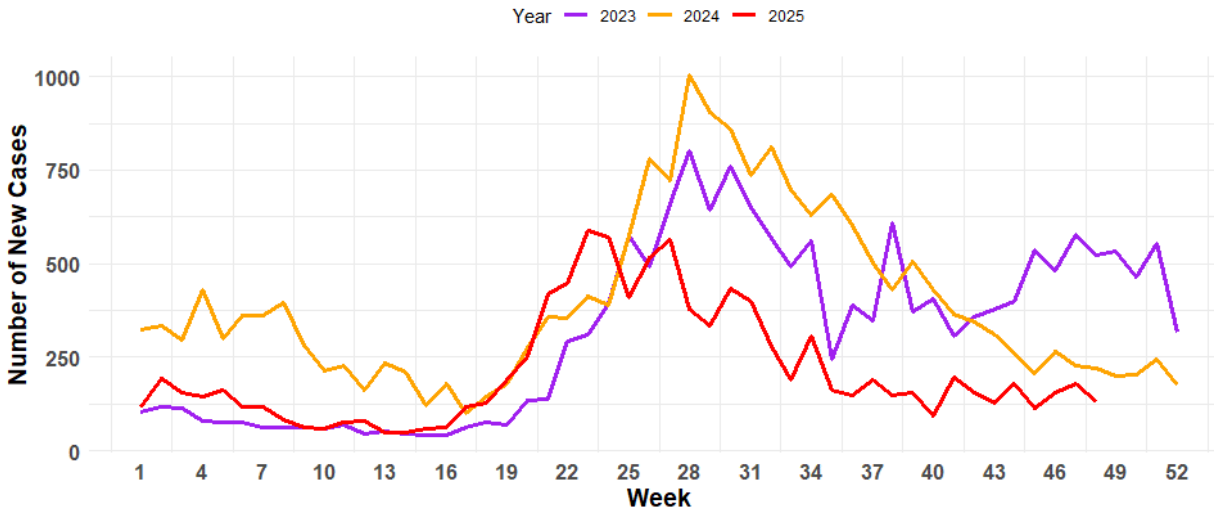
Figure 9. Number of new cases of dengue by month in India from January 2024 to October 2025



Kerala[24]

- In 2025, cases increased steadily from week 17, but the case number has declined since week 27.

Figure 10. Weekly number of new dengue cases in Kerala state from week 1 of 2023 to week 48 of 2025

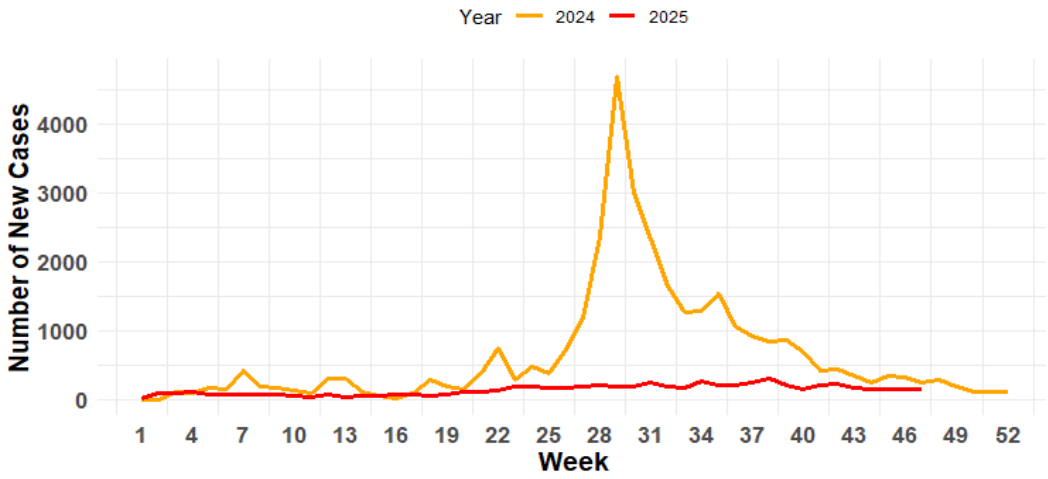


[24] Department of Health and Family Welfare, Government of Kerala. Health Dashboard – Integrated Disease Surveillance Programme (IDSP) [Internet]. Thiruvananthapuram: DHS Kerala; 2025 Available from: https://dashboard.kerala.gov.in/

Karnataka[25]

- In Karnataka, in 2024, dengue cases peaked at over 4 500 in week 29, while in 2025, case number remains low as of week 43.

Figure 11. Weekly number of new dengue cases in Karnataka state from week 1 of 2024 to week 48 of 2025

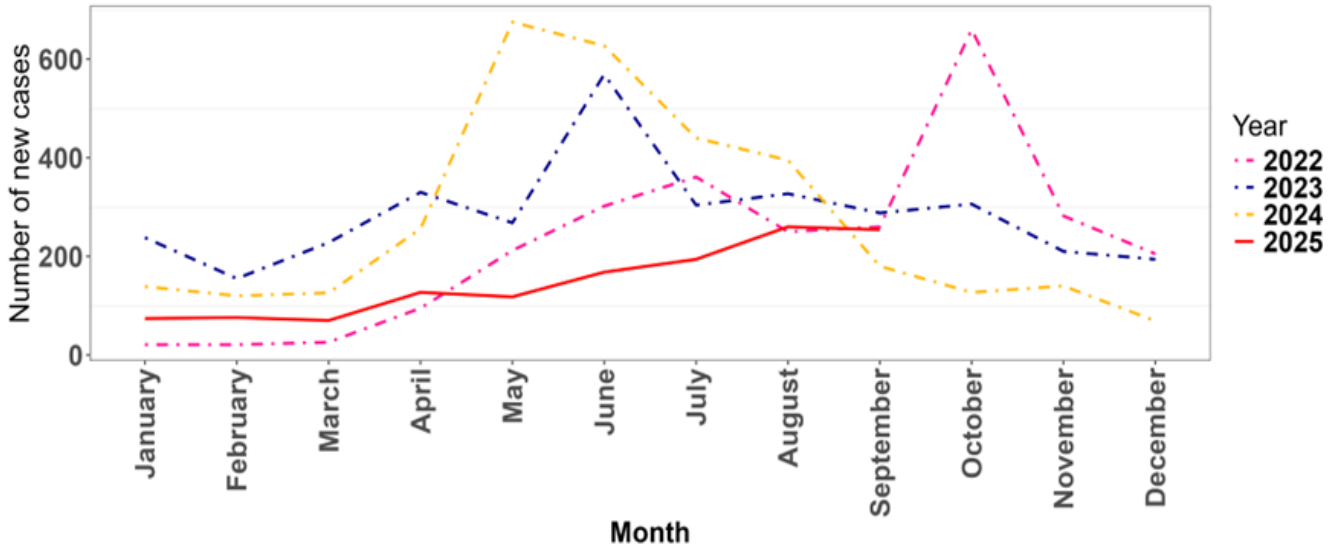


[25] Department of Health and Family Welfare, Government of Karnataka. PRISM-H Disease Surveillance Dashboard [Internet]. Bengaluru: DHFW-GoK; 2023 Available from: https://hfwcom.karnataka.gov.in/info-4/Weekly%20Infectious%20Disease%20Report/en

Maldives [26]

- No update has yet been made publicly available for October 2025. During September 2025, a total of 254 cases of dengue were reported in the Maldives, a 2.3% decrease compared to August 2025 (n=260).

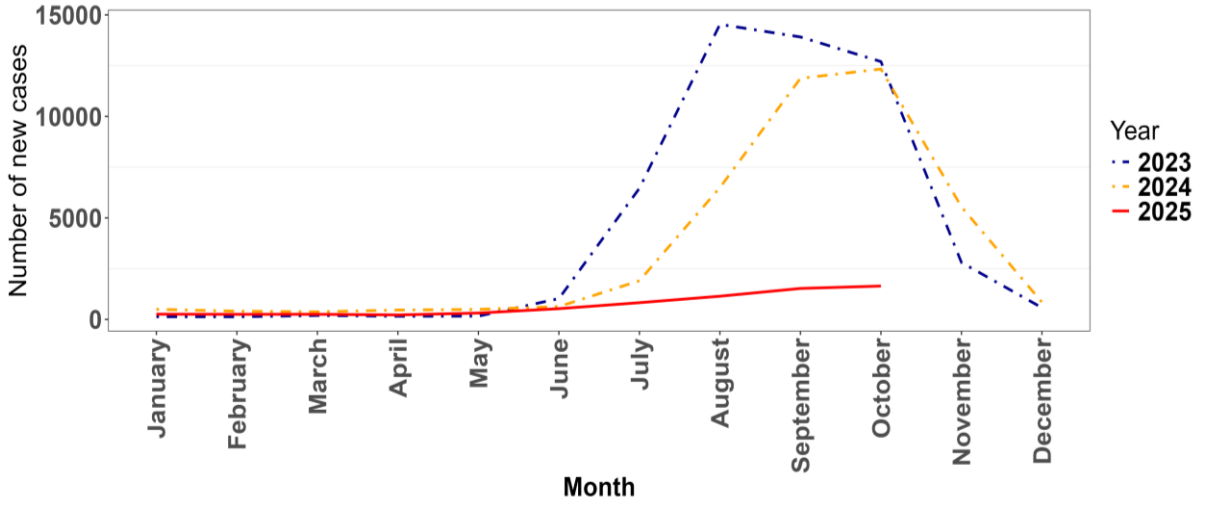
Figure 12. Number of new cases of dengue by month in Maldives from January 2022 to September 2025



Nepal [27]

- During October 2025, a total of 1 644 dengue cases were reported in Nepal, a 7.7% increase compared to September 2025 (n = 1 526).
- In 2025, as of 31 October, a total of 6 967 cases of dengue have been reported compared to 35 477 cases during the same period in 2024. A total of 41 865 dengue cases and 15 deaths were reported throughout 2024.

Figure 13. Number of new cases of dengue by month in Nepal from January 2023 to October 2025

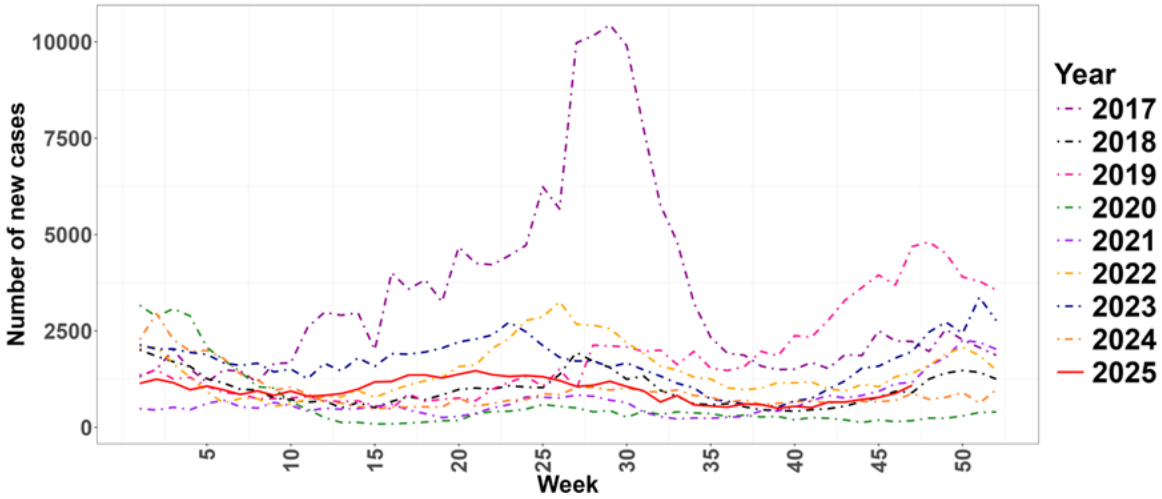


[26] World Health Organization. Global dengue surveillance. https://worldhealthorg.shinyapps.io/dengue_global/
[27] World Health Organization. Global dengue surveillance. https://worldhealthorg.shinyapps.io/dengue_global/

Sri Lanka [28]

- During week 47 (16 to 23 November 2025), a total of 1 091 new dengue cases were reported in Sri Lanka, a 23.6% increase compared to 883 cases reported during week 46 (09 to 15 November 2025).
- From week one to week 47 in 2025, a total of 45 422 cases were reported compared to 44 862 281 cases and 73 868 cases during the same period in 2024 and 2023, respectively.

Figure 14. Number of new dengue cases by week in Sri Lanka from week 1 of 2017 to week 47 of 2025.



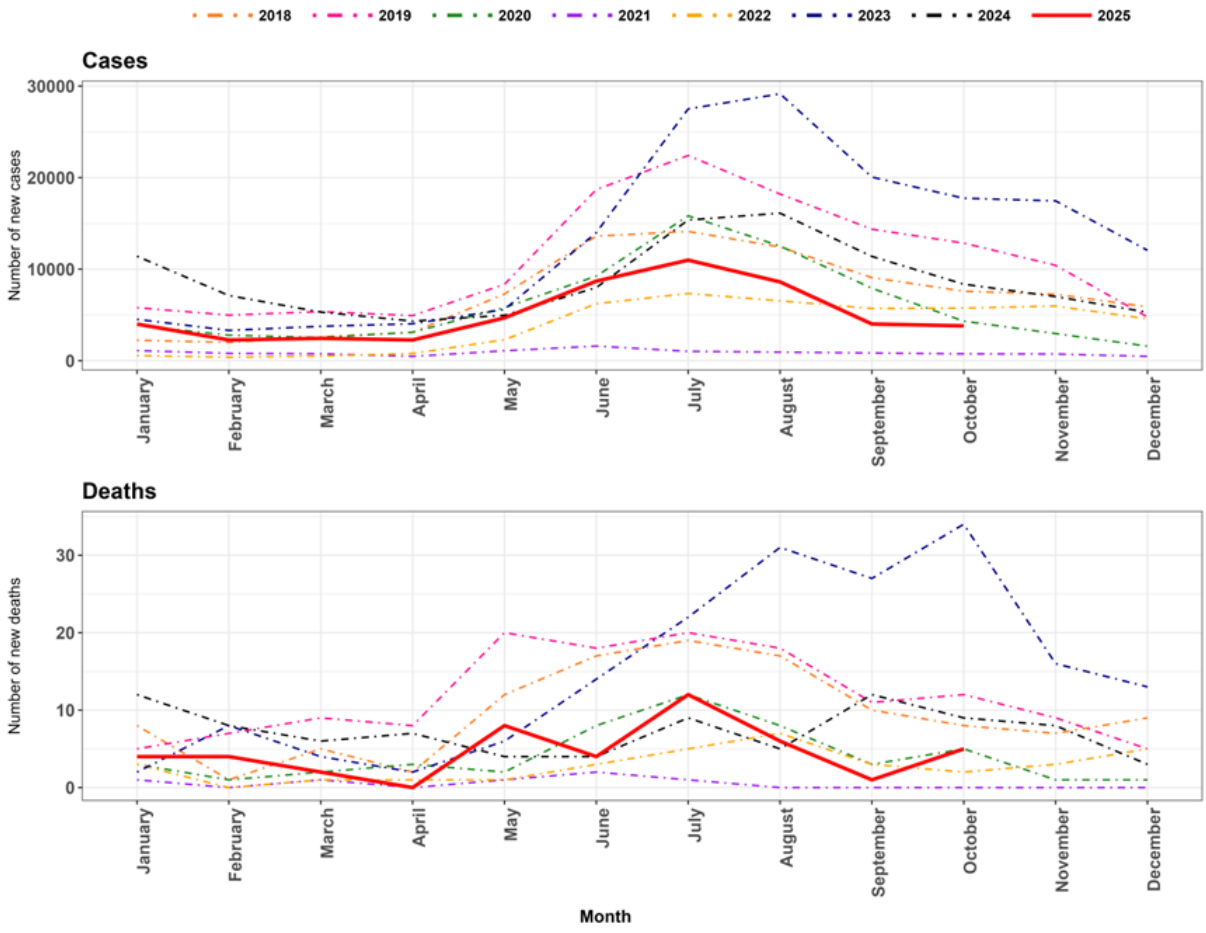
Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - 2017 to 2020; 2021 to 2025

[28] National Dengue Control Unit (NDCU), Ministry of Health, Sri Lanka. National Dengue Control Unit [Internet]. Colombo: MoH; 2025 [cited 2025 December 02]. Available from: https://www.dengue.health.gov.lk/web/index.php/en/

Thailand [29]

- During October 2025, a total of 3 814 cases of dengue were reported in Thailand, a 5% decrease compared to September 2025 (n=4 012).
- During October 2025, five dengue death was reported, a 400% increase compared to September 2025 (n=1).
- In 2025, as of 31 October, a total of 51 795 dengue cases and 46 dengue-related deaths have been reported. This is 56% of the number of cases (n=92 382) and 61% of the number of deaths (n=76) reported during the same period in 2024.

Figure 15. Number of new cases of dengue by month in Thailand from January 2018 to October 2025.



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