WHO South-East Asia Region
Epidemiological Bulletin

WHO Health Emergencies Programme
WHO Regional Office for South-East Asia
8th edition (2026), 22 April 2026
Reporting period: 06 to 19 April 2026

HEALTH EMERGENCIES programme
World Health Organization
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.

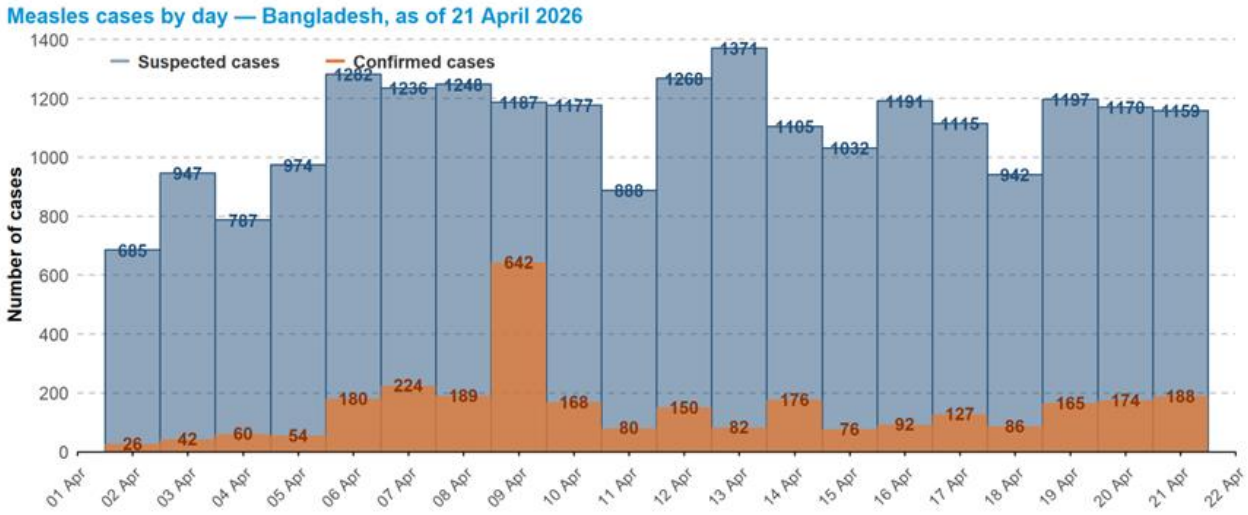
Key events and updates

Bangladesh: Measles

Situation overview as of 20 April 2026 [1] [2] [3] [4]

- Since 15 March 2026 and as of 20 April:
  - 24 776 suspected measles cases and 3 617 laboratory-confirmed cases have been reported.
  - 183 suspected measles-related deaths (CFR= 0.7%) and 37 confirmed measles-related deaths (CFR= 1.0%) have been recorded.
  - 16 172 hospital admissions and 13 258 hospital discharges have also been reported.
  - Geographically, the highest cumulative numbers of suspected cases have been reported from Dhaka Division (10 915 cases), Rajshahi Division (4 784 cases), Chattogram Division (3 228 cases), and Khulna (1 963 cases).
- Since the launch of the measles-rubella (MR) vaccination campaign on 5 April and as of 20 April, a total of 1 595 855 children have been vaccinated, equivalent to 73.2% of the overall campaign target population.
  - In Dhaka division, which has reported the highest cumulative numbers of suspected and laboratory-confirmed measles cases, 666 673 children were vaccinated, representing 60.1% of the division's overall campaign target population.

Figure 1. Daily number of confirmed and suspected measles cases in Bangladesh, 2-21 April 2026



Source: DGHS, Bangladesh

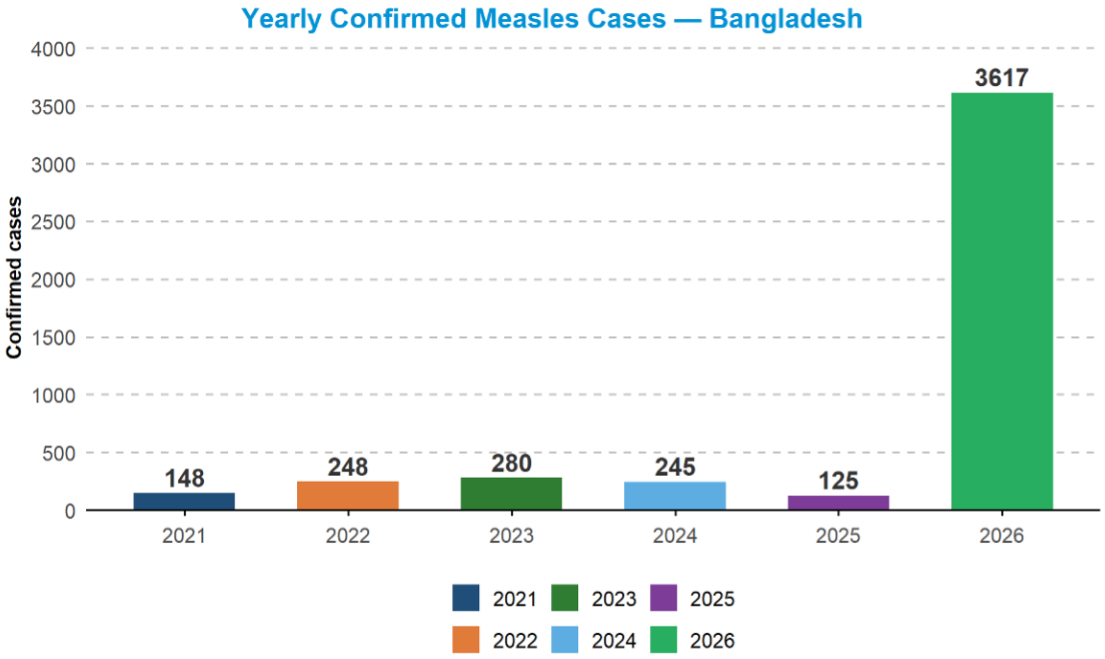
[1] Directorate General of Health Services (Bangladesh). Measles press release (20/04/2026) [Internet] [cited 2026 Apr 21]. Available from: https://tinyurl.com/mry3a2vu

[2] Directorate General of Health Services (Bangladesh). Inauguration of the nationwide measles-rubella vaccination campaign [Internet]; [cited 2026 Apr 21]. Available from: https://tinyurl.com/y7577n9c Measles press release (07/04/2026) [Internet] [cited 2026 Apr 8]. Available from:

[3] UNICEF. Protecting Every Child: Nationwide Measles-Rubella Vaccination Campaign in Bangladesh [Internet]; 2026 Apr 20 [cited 2026 Apr 21]. Available from: https://tinyurl.com/5n8uh8vc

[4] DREF Operation (MDRBD039) [Internet]. Geneva: International Federation of Red Cross and Red Crescent Societies; 2026 Apr 18 [cited 2026 Apr 21]. Available from: https://tinyurl.com/2b7hp5db

Figure 2. Yearly number of confirmed measles cases in Bangladesh, 2021–2026 (as of 20 April)



Source: IFRC, DREF Operation (MDRBD039)

Public Health Response

- The Government of Bangladesh launched a nationwide measles-rubella (MR) vaccination campaign on 20 April 2026 following the rapid rollout of the initial emergency vaccination efforts in the hardest-hit areas.
  - The campaign aims to provide a free MR vaccine dose to all children aged 6–59 months to rapidly reduce outbreak risk among the most vulnerable age group.
  - Delivery is being implemented through routine EPI sites, with additional strategies including evening sessions in cities, outreach to preschools and madrasas, vaccination in hard-to-reach areas and transport hubs, and door-to-door follow-up for missed children.
  - The operational target is to achieve at least 95% vaccination coverage and reach more than 17.8 million children nationwide.
- Vitamin A supplementation is provided to all suspected and confirmed measles cases as an essential component of standard treatment and case management.
- District Rapid Response Teams (RRTs) have been activated.
- Vaccine procurement is fast-tracked by the Ministry of Health.
- Hospital preparedness is enhanced, including strengthening of isolation capacity, and reinforcing infection prevention and control measures.
- Strengthening nationwide surveillance and epidemiological analysis, is also ongoing to improve case detection and reporting. Trainings are being conducted at health facilities to improve case detection and reporting.

Maldives: Dengue

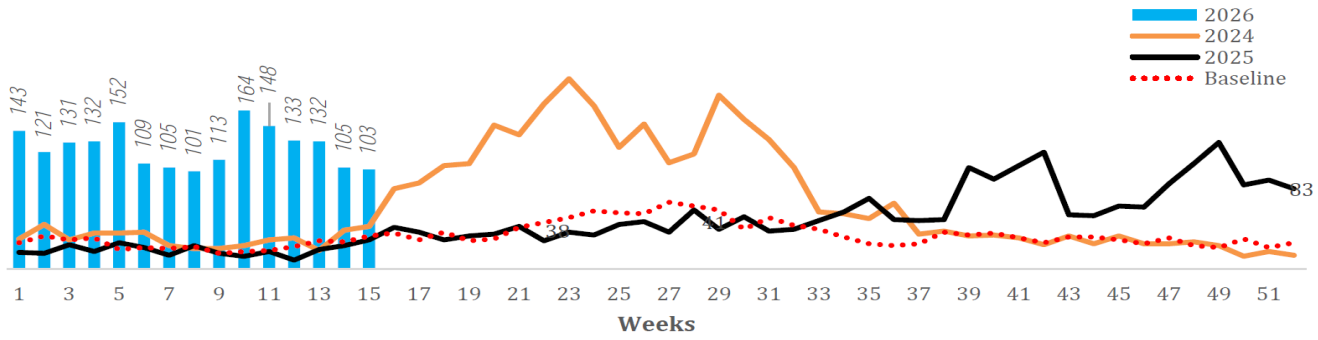
Situation as on 15 April 2026 [5]

- As of 15 April 2026, a total of 1 908 dengue cases and 3 deaths have been reported in the Maldives in 2026. Of these, 349 cases were reported from Male' and 1 559 from the atolls.
- The number of dengue cases has remained consistently above the established baseline since around October 2025 and is higher compared to the same period in previous years.
- An increase in dengue cases has been observed across all Atolls. The Atolls reporting the highest number of cases in 2026 are Greater Male Area (349 cases), Kaafu Atoll (226 cases), Gaafu Dhaalu Atoll (179 cases) and Haa Dhaalu Atoll (176 cases).
- Most dengue cases (71%) are reported among the 5–34 years age group, with an increase observed across all age categories. Both locals and foreigners are affected.
- Of note, while dengue cases occur throughout the year in the Maldives, historically, the peak is during monsoon season (June through August). Dengue cases have increased steadily since June 2025, diverging from historical seasonal patterns.

Public Health Response

- Vector control guidance has been shared with the islands reporting the highest number of cases.
- Cleaning activities were carried out in the islands reporting the highest number of cases.
- Home visits are conducted by Islands reporting the highest numbers
- Awareness messages are being disseminated through all official social media of Health Protection Agency (HPA) of Maldives as well as though media appearances.
- Virtual sessions were conducted on clinical management, strengthen reporting and enhance control measures.
- A high-level stakeholder meeting was conducted at the national level for preparedness and response to the ongoing dengue surge.

Figure 3. National Weekly Dengue Trends in The Maldives, 2024-2026



Source: HPA Maldives

[5] Health Protection Agency (HPA) Maldives

Sri Lanka: Cyclone Ditwah

Situation as of 7 April 2026 [6] [7]

- Since 28 November 2025, more than 2.2 million people have been affected by Cyclone Ditwah, and an estimated 1.2 million people, including nearly 527 000 children, require humanitarian assistance.
- As of 7 April, approximately 152 3625 people remain displaced and 29 safety centres remain operational across affected districts, hosting 2 435 people.
- Many affected families are still unable to return home due to persistent landslide risks and extensive damage to housing and critical infrastructure.
- Since the onset of the emergency,
  - Nutrition support reached 15 069 children under 5 years, and pregnant and lactating women.
  - A total of 1 271 children with severe or moderate acute malnutrition received treatment.
  - More than 5 200 moderately acute malnourished children under 5 were provided with BP5 emergency food.

Public Health Response

- Outreach clinics and severe acute malnutrition (SAM) response are ongoing with Ministry of Health support
- Restoration of essential health infrastructure is ongoing.
- Burnout Management support to frontline workers was scaled up.
- Sector partners are providing Mental health and psychosocial support (MHPSS), Gender-Based Violence (GBV), Water, sanitation and hygiene (WASH), shelter, and health support.
- The Government, with support from UNICEF and partners, continued the delivery and restoration of essential health and nutrition services in cyclone-affected districts.
- The Ministry of Health, in coordinated with four civil society organization (CSO) partners, facilitated access to treatment for severe acute malnutrition in 10 districts, including referral and transport support to tertiary hospitals and outreach clinics.
- Following a needs assessment conducted by the Family Health Bureau of the Ministry of Health and partners, procurement of essential medical supplies and equipment was initiated to help ensure uninterrupted maternal, newborn, child health, and nutrition services in the most affected areas.
- The Ministry of Defence, Disaster Management Division has issued three new circulars consolidating all previous government compensation programmes.
- A Post-Disaster Needs Assessment (PDNA) to estimate damages, losses, and short- and long-term recovery needs, based on the build back better principle, has been undertaken by the Government with support from the UN, the European Union, the World Bank, and the Asian Development Bank.

[6] UNICEF. Sri Lanka Humanitarian Situation Report No.11 (Cyclone DITWAH), 9 April 2026 [Internet]. Colombo: UNICEF Sri Lanka; 2026 Apr 9 [cited 2026 Apr 21]. Available from: https://tinyurl.com/muhv63ez

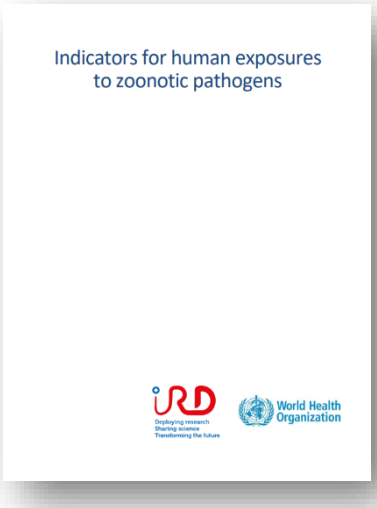
[7] Office of the Resident Coordinator Sri Lanka. Sri Lanka: Cyclone Ditwah - Situation Report No. 11 (as of 3 April 2026) [Internet]. Colombo: Office of the Resident Coordinator Sri Lanka; 2026 Apr 6 [cited 2026 Apr 21]. Available from: https://tinyurl.com/hwywvtfx

New publication: Global public health intelligence report 2024

- This report presents an overview of global public health intelligence (PHI) activities conducted by WHO in 2024 under the International Health Regulations (IHR).
- In 2024, WHO identified hundreds of acute public health events, the majority of which were infectious in nature, with avian influenza emerging as a prominent global threat.
- The findings highlight continued improvements in the timeliness of detection and verification, with increasing alignment to the 7–1–7 target for early warning and response.
- The report underscores the importance of integrated surveillance systems, international collaboration and timely information sharing to support effective preparedness and response.
- The full report is available in the following link: https://iris.who.int/items/c69dbb01-6748-4dc7-b1f3-3ea062709c87

New publication: Indicators for Human Exposures to Zoonotic Pathogens — WHO & PREZODE (2025)

- This report presents a WHO– PREZODE (Preventing Zoonotic Disease Emergence) collaboration to develop and validate standardized indicators that assess the risk of zoonotic disease emergence by modeling pathogen circulation in animals and the intensity of animal-to-human contact.
- The proposed indicators are designed to be actionable, reflecting the impact of prevention strategies along the process of zoonotic pathogen emergence over time. Using expert-driven data from 275 contributors, the indicators were shown to correlate with documented Avian Influenza Virus (AIV) and MERS-CoV infection events.
- Simulations of targeted prevention strategies demonstrated their utility in guiding effective zoonotic disease prevention, estimating a 31% reduction in AIV infections and a 15% reduction in MERS-CoV infections under specific intervention scenarios.
- The report recommends annual expert elicitation studies, expanded geographic surveillance coverage, and a long-term transition to quantitative, data-driven approaches. This initiative provides actionable tools to measure, monitor, and mitigate the emergence of zoonotic diseases globally.
- The full report is available at: https://doi.org/10.2471/B09677



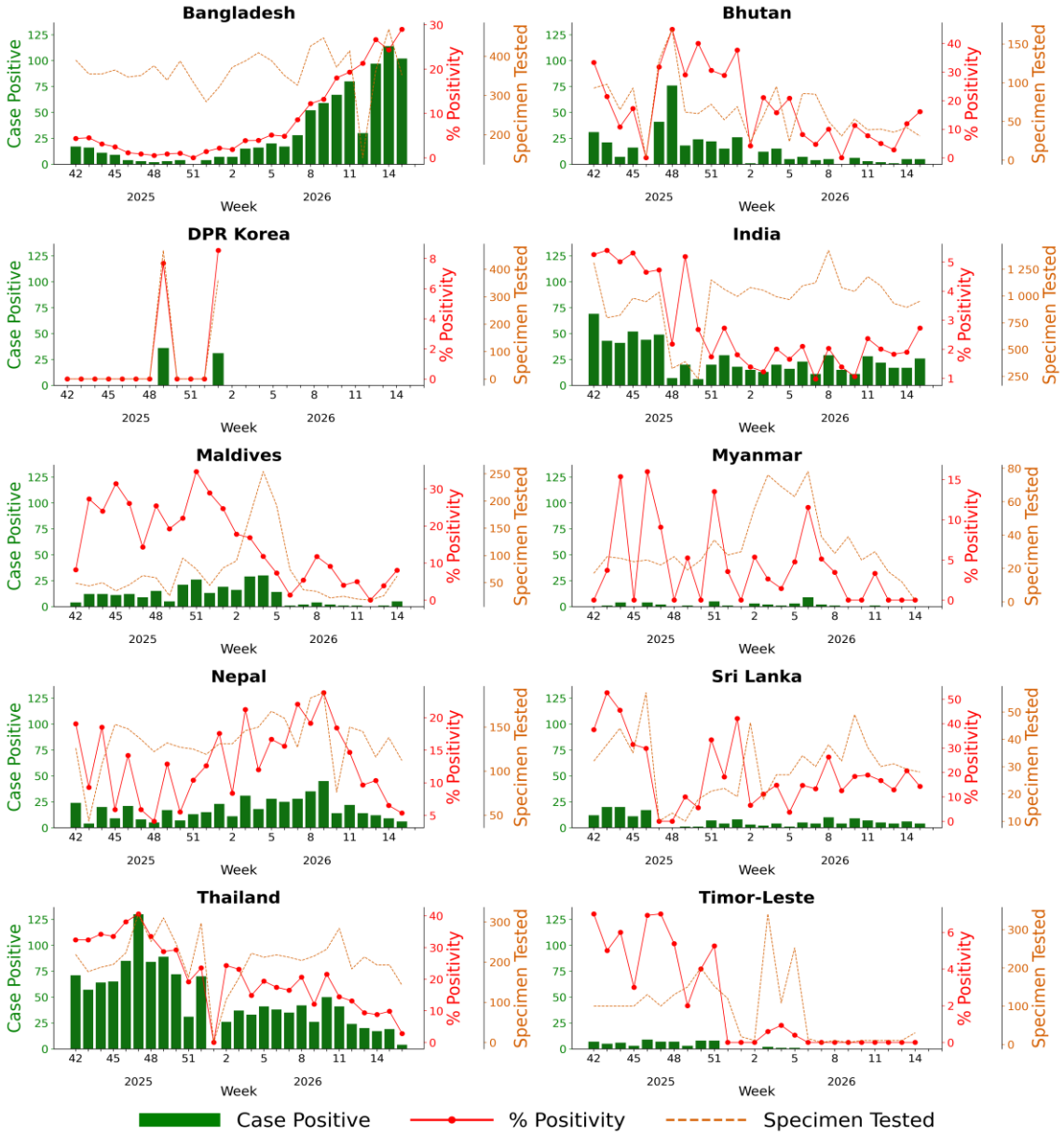
Influenza

Situation in the WHO South-East Asia Region

Situation as of 21 April 2026 [8]

- Figure 4 shows the influenza data from the WHO FluNet platform, accessed on 21 April 2026.
- In the WHO South-East Asia Region during weeks 14–16, there were 339 influenza positive samples, among 3 667 samples tested from eight countries. The overall positivity percentage was 9%.
- Bangladesh reported the highest test positivity percentage in the region with 26% (Table 1).

Figure 4. Weekly trends of specimens tested at National Influenza Centers (NIC), positivity percentage and laboratory confirmed influenza cases in the WHO South-East Asia Region, as of 21 April 2026



Source: Respimart/FluNet

[8] World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 April 21]. Available from: https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs

Influenza A subtypes and B lineages reported in the Region from week 14 to 16 in 2026, as of 21 April 2026 [9]

- Table 1 shows influenza A virus subtypes and B lineages distribution across ten countries in the WHO South-East Asia Region for epidemiological weeks 14 to 16 of 2026, based on data extracted from WHO's RespiMart platforms on 21 April 2026.
  - The last submission was on 13 April 2026 (Week 16).
  - Myanmar and Timor-Leste tested samples less than the WHO recommended minimum of 50 samples per week per country.
- The predominant **influenza A** subtype detected in the region was A (H3), accounting for 70% of all influenza-positive samples.
  - Among countries that reported influenza test positive results (10 or more positive samples), A(H3) was the predominant strain in Bangladesh (100%).
  - The proportion of un-subtyped influenza A was 1% in overall region while it accounted for 40% and 20% of all influenza-positive samples in Maldives and Nepal, respectively.
- The overall proportion of **influenza B** in the region was 20%. Influenza B (Victoria) lineage accounted for 18% of detected viruses in the region.
  - Among countries that reported influenza test positive results (10 or more positive samples), B lineage predominated in India (53%) and Thailand (72%).
  - Influenza B lineage not determined was 2% in SEAR. In Nepal, 33% of influenza B positive samples were influenza B (lineage not determined). Among the countries that had at least 10 influenza positive samples, Sri Lanka had a proportion of 10% as Influenza B lineage not determined.
- Maldives had **less than 10 influenza positive samples** during this period.
- DPR Korea reported **no samples** tested during this period.

Table 1. Distribution of influenza A virus subtypes and B virus lineages in the WHO South-East Asia Region (weeks 14 to 16, 2026), situation as of 21 April 2026*

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 Countries	3 667	339	9%	0%	70%	0%	9%	1%	0%	18%	2%
Bangladesh	821	216	26%	0%	100%	0%	0%	0%	0%	0%	0%
Bhutan	73	10	14%	0%	40%	0%	50%	0%	0%	10%	0%
DPR Korea	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
India	1 845	43	2%	0%	14%	0%	33%	0%	0%	53%	0%
Maldives	62	5	8%	0%	40%	0%	0%	40%	0%	0%	20%
Myanmar	1	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
Nepal	250	15	6%	0%	0%	0%	27%	7%	0%	33%	33%
Sri Lanka	57	10	18%	0%	10%	0%	30%	20%	0%	30%	10%
Thailand	528	40	8%	0%	18%	0%	10%	0%	0%	72%	0%
Timor-Leste	30	0	0%	0%	0%	0%	0%	0%	0%	0%	0%

Notes: * Positivity proportion that less than 0.5 % are shown as 0%.

[9] World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 April 21]. Available from: https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs

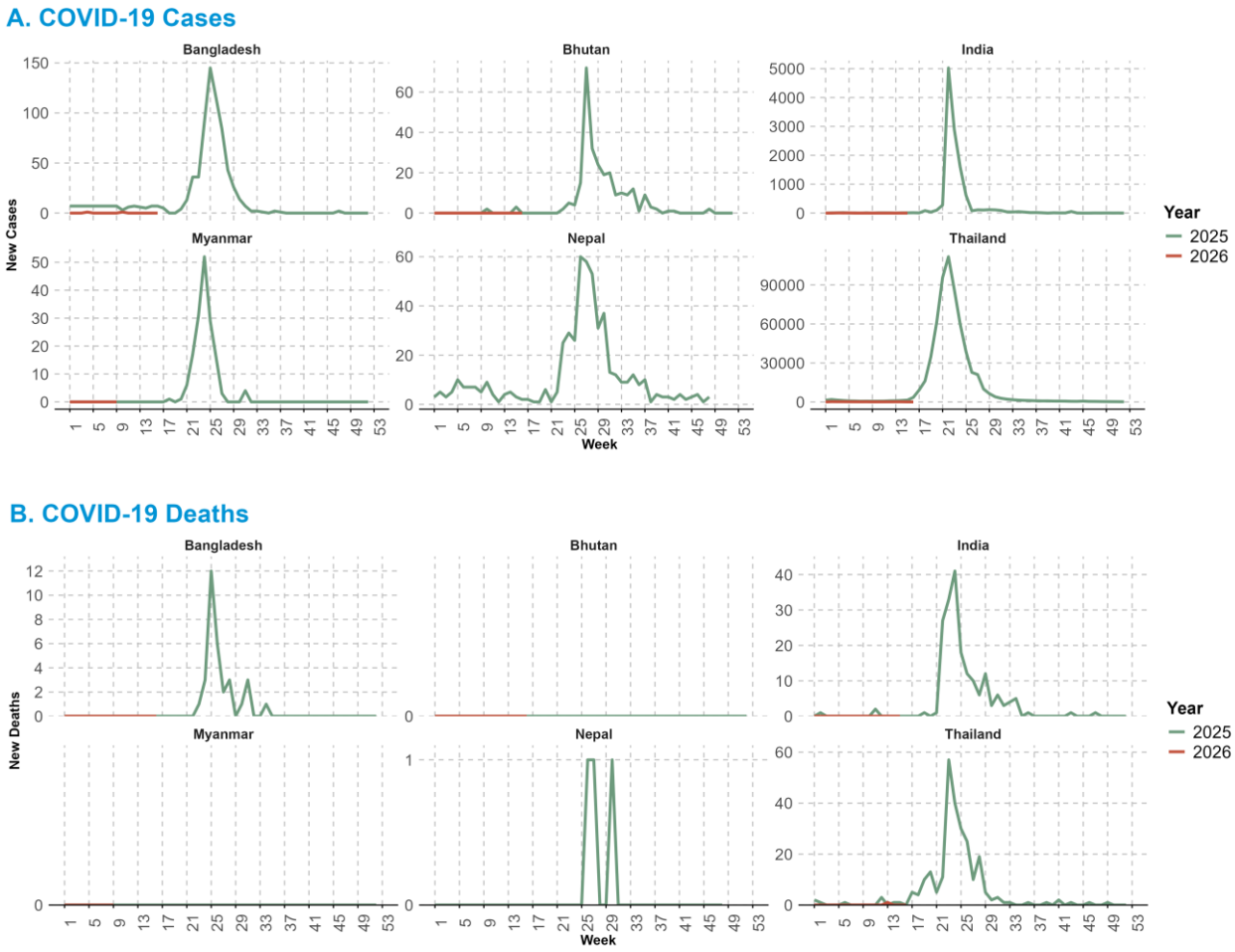
COVID-19

Situation in the WHO South-East Asia Region

Situation as of 21 April 2026

- The weekly number of COVID-19 cases reported on official websites, including Bangladesh[10], Bhutan[11], India[12], Myanmar[13], Nepal[14] and Thailand[15], are presented in Figure 5**.
- Data of the most recent week (week 14) are available from Bangladesh and Thailand.
- Please visit the WHO COVID-19 dashboard for the global situation of COVID-19.

Figure 5. Weekly comparisons of new COVID-19 cases (A) and deaths (B) reported from selected countries since week one of 2025 to week 16 in the WHO South-East Asia Region*

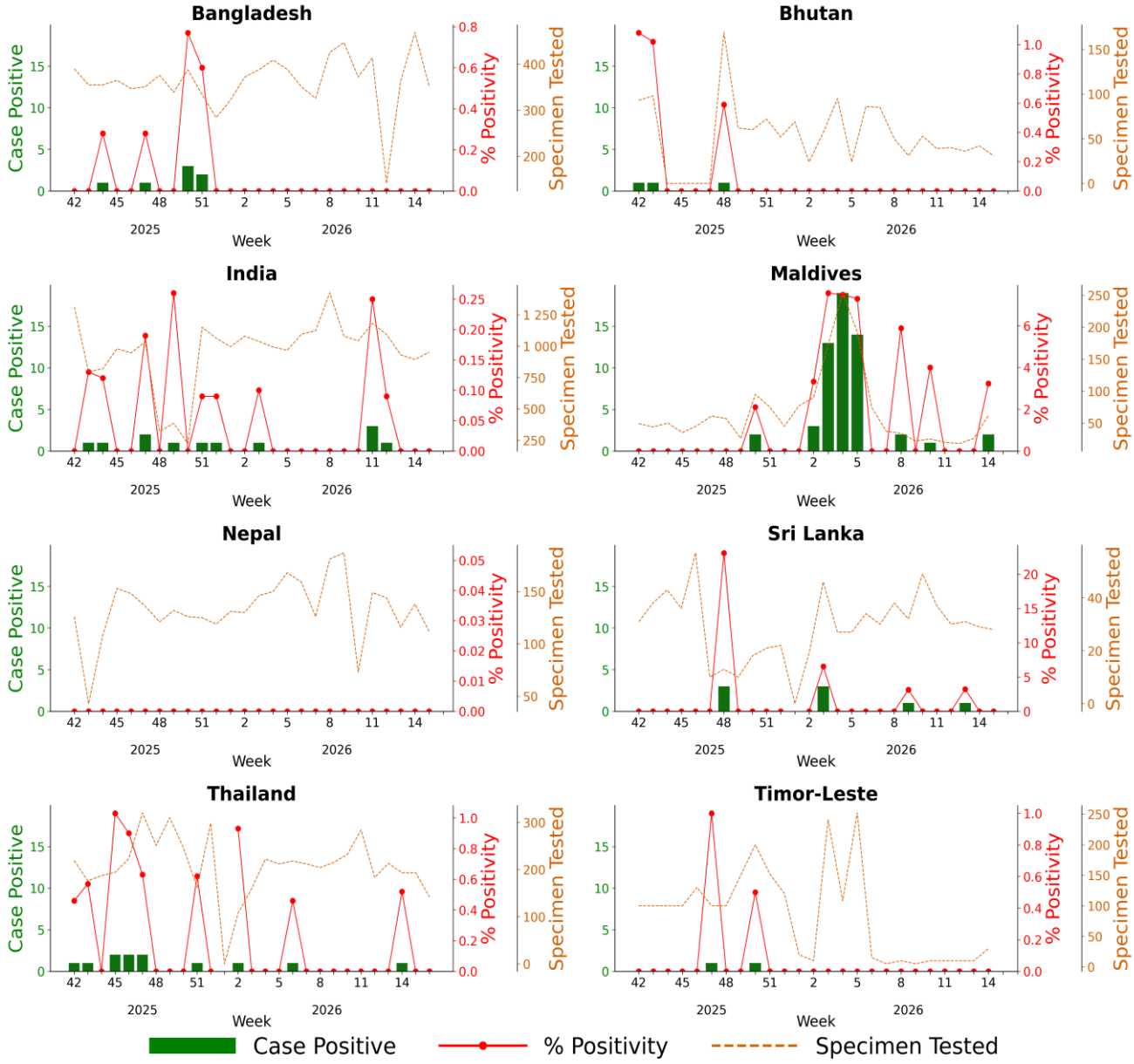


* Nepal data as of week 49 of 2025. India data as of week 6, Myanmar data as of week 9 and Bhutan data as of week 12.
** Bangladesh, Bhutan, India and Myanmar data as of ISO Week. Nepal and Thailand data as of Epidemiological week.

[10] Directorate General of Health Services (DGHS), Bangladesh. COVID-19 Dashboard [Internet]. 2026 [cited 2026 Apr 21]. Available from: https://old.dghs.gov.bd/index.php/bd/component/content/article?layout=edit&id=5612
[11] Bhutan, Royal Centre for Disease Control. [Internet]. [cited 2026 Apr 21]. Available from: https://www.rcdc.gov.bt/web/
[12] Ministry of Health and Family Welfare, Government of India. COVID-19 India Dashboard [Internet]. [cited 2026 Apr 21]. Available from: https://covid19dashboard.mohfw.gov.in/
[13] Ministry of Health, Republic of the Union of Myanmar. Ministry of Health official website [Internet]. 2026 [cited 2026 Apr 21]. Available from: https://www.mohs.gov.mm/
[14] Epidemiology and Disease Control Division Nepal. [Internet]. [cited 2026 Apr 21]. Available from: https://edcd.gov.np/newsroom/outbreak
[15] Department of Disease Control, Ministry of Public Health, Thailand. COVID-19 Surveillance Dashboard [Internet]. 2026 [cited 2026 Apr 21]. Available from: https://www.facebook.com/photo/?fbid=1176170881210400&set=a.309744487853048

- Based on data from the integrated influenza-SARS-CoV-2 sentinel surveillance system, Figure 6 summarizes weekly trends of COVID-19 cases in the 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. [16]

Figure 6. The number of COVID-19 positive case, % positivity and specimen tested from integrated influenza-SARS CoV-2 sentinel surveillance systems (as of 21 April 2026)



Source: Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard

[16] Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard. [Internet]. [cited 2026 Apr 21]. Available from: https://app.powerbi.com/view?r=eyJrIjoiNzdjZTVmY2YtNzY2NC00NTM0LTkzY2QtMWM0MzY0Mjg0YTZjIiwidCI6ImY2MTBjMGI3LWJkMjQtNGIzOS04MTBiLTNkYzI4MGFmYjU5MCIsImMiOjh9

mpox

Situation in the WHO South-East Asia Region

Situation as of 19 April 2026

- In week 15 and 16 (06 April to 19 April 2026), no new mpox cases were reported.
- As of 19 April 2026, in the WHO South-East Asia Region, a total of 1 226 laboratory-confirmed mpox cases, including 15 deaths, have been reported since 14 July 2022
- Thirty-four mpox virus (MPXV) clade Ib cases have been reported in the Region to date – 18 from India, 15 from Thailand and one from Nepal. Please see Figure 8 for the trend of MPXV Ib cases detected in the Region and Table 2 for the profile of the cases.
- For information on global epidemiological situation of mpox, please see:
  WHO mpox surveillance dashboard

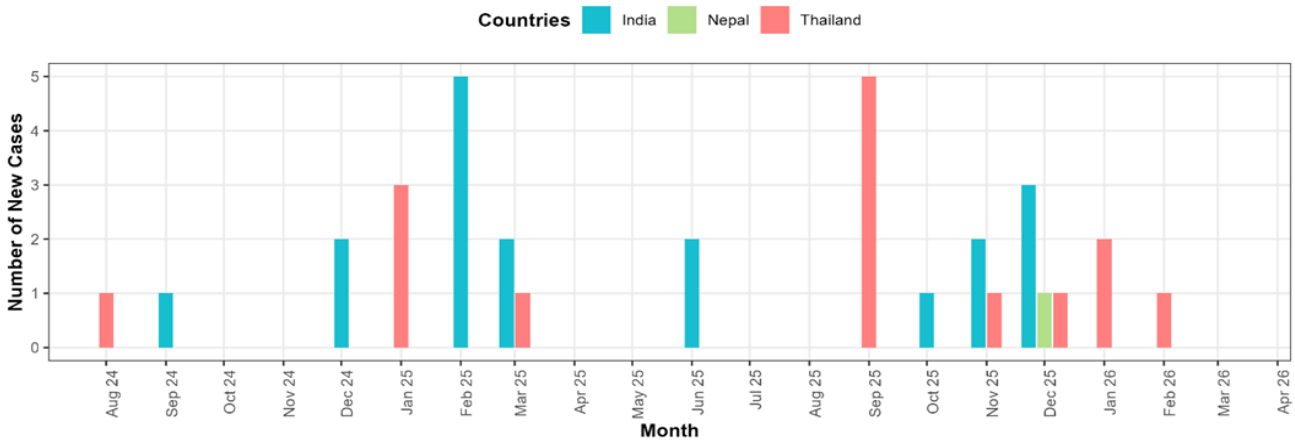
Figure 7. Number of mpox cases reported in WHO South-East Asia Region by date of notification* (Upper, 14 July 2022 – 05 April 2026; lower 1 January 2025 – 19 April 2026).

Notes:

* Cases are plotted per month 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 8. Number of MPXV clade Ib cases reported in WHO South-East Asia Region by month of notification (as of 19 April 2026) *



* 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 cases in India of which the month of notification is missing, the month of diagnosis was used.

Table 2. Profile of the 34 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 19 April 2026)*

	Category	Total (n = 34)
Country		
	India	18 (52.9%)
	Nepal	1 (2.9%)
	Thailand	15 (44.1%)
Recent international travel		
	Yes	30 (88.2%)
	No	4 (11.8%)
Age group (years)		
	18-29	10 (29.4%)
	30-39	15 (44.1%)
	40-49	8 (23.5%)
	50 and over	1 (2.9%)
Gender		
	Male	21 (61.8%)
	Female	13 (38.2%)

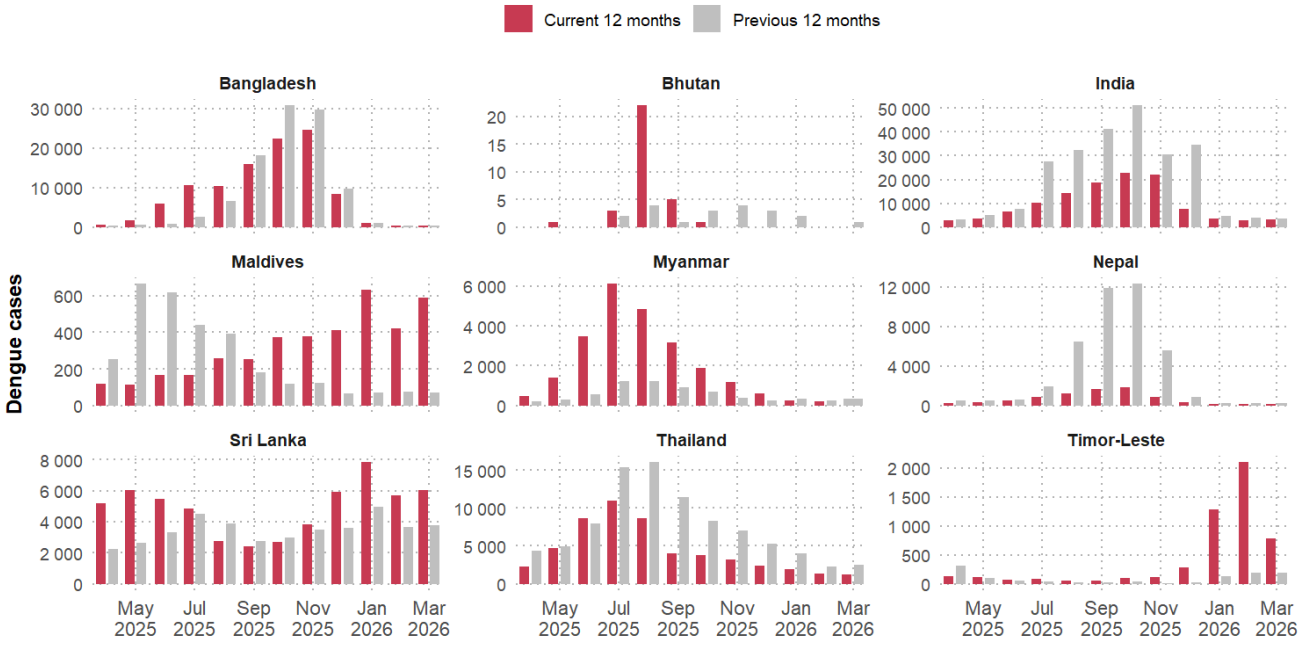
Notes: * One CRF is awaited from Nepal.

Dengue

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

- In March 2026, Sri Lanka reported 6 016 cases, India with 3 085 cases and Thailand with 1 229 cases (Figure 9). Data of March were not available yet for Myanmar.
- While Timor-Leste recorded a large number of dengue cases in January and February 2026, in March, 780 cases was reported, 63% decrease compared to February 2026 (2 105 cases). This is 4.1 times higher compared to March 2025 (192 cases).
- Maldives is experiencing a surge in dengue cases, with 591 cases reported in March 2026—41% higher than February 2026 (420 cases) and approximately 8.6 times higher than March 2025 (69 cases).

Figure 9. Monthly reported dengue cases by country, April 2025 – March 2026



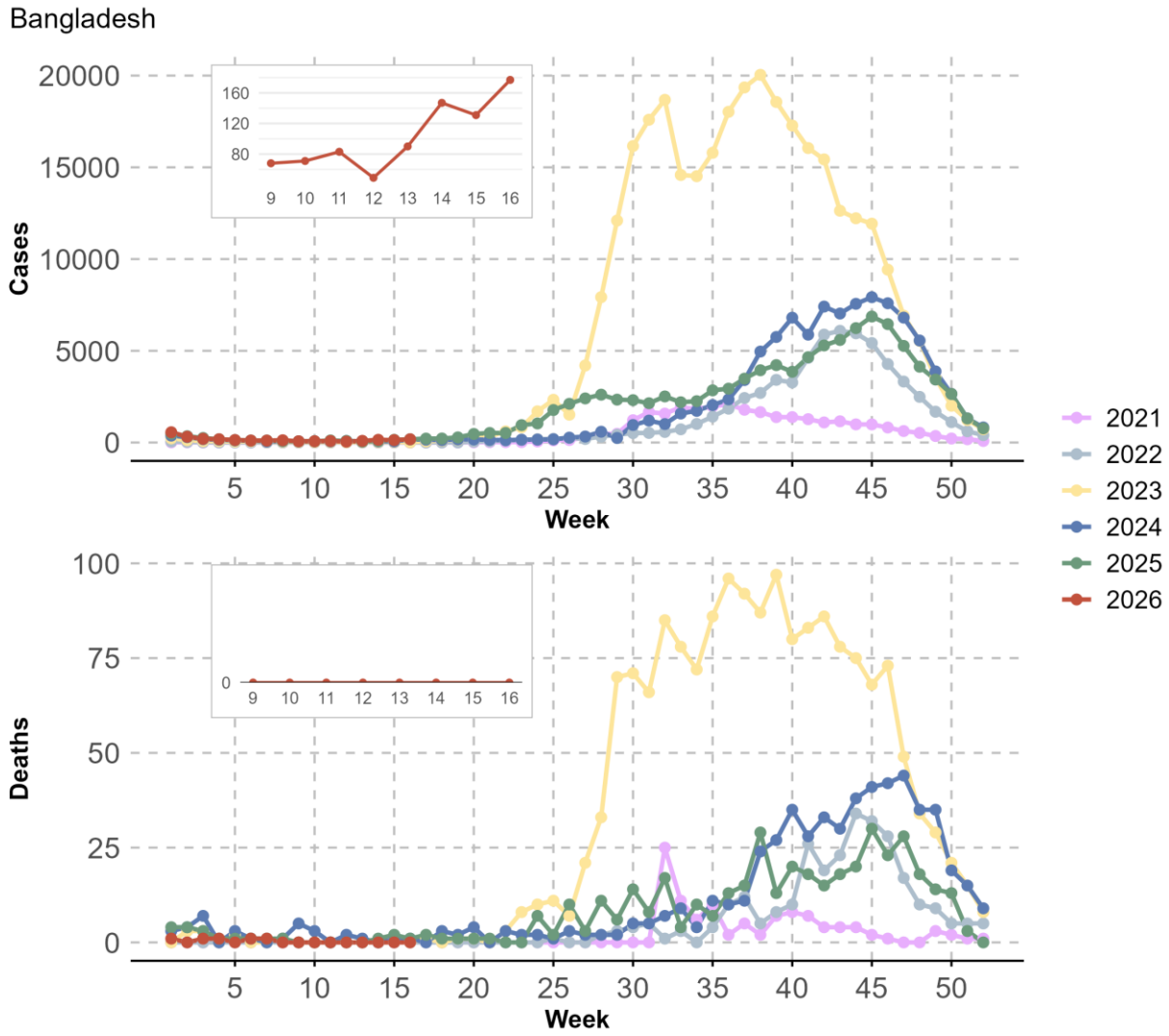
Notes:
Bangladesh, Bhutan, Indonesia, Myanmar, Thailand and Timor-Leste show confirmed cases.
Bangladesh reports only hospitalized cases.
The majority of Myanmar cases are hospitalized cases.

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

Bangladesh [18]

- In Bangladesh, during week 16 of 2026, a total of 177 suspected dengue cases were reported, representing a 35% increase compared with the 131 cases reported in Week 15. The week 16 caseload in 2026 is comparable to the same week in 2025, when 176 cases were reported.
- During week 16, no new dengue deaths were reported in Bangladesh.

Figure 10. Number of new dengue cases and deaths by week in Bangladesh from week 1 of 2021 to week 16 of 2026.

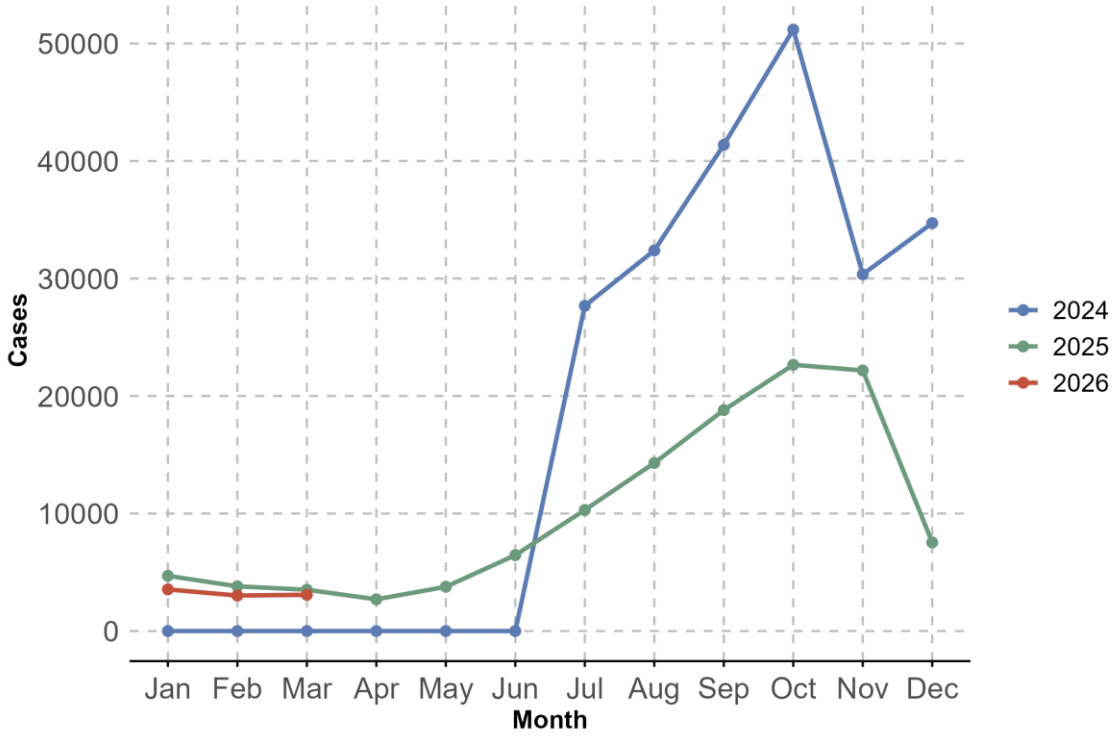


[18] Directorate General of Health Services (DGHS), Bangladesh. Daily Dengue Status Report [Internet]. 2026. Available from: https://old.dghs.gov.bd/index.php/bd/home/5200-daily-dengue-status-report

India

- During March 2026, a total of 3 085 cases of dengue were reported in India, a 2% increase compared to February 2026 (n = 3 019).
- In 2026, as of 31 March, a total of 9 648 cases of dengue have been reported compared to 12 023 cases during the same period in 2025.

Figure 11. Number of new cases of dengue by month in India from January 2024 to March 2026



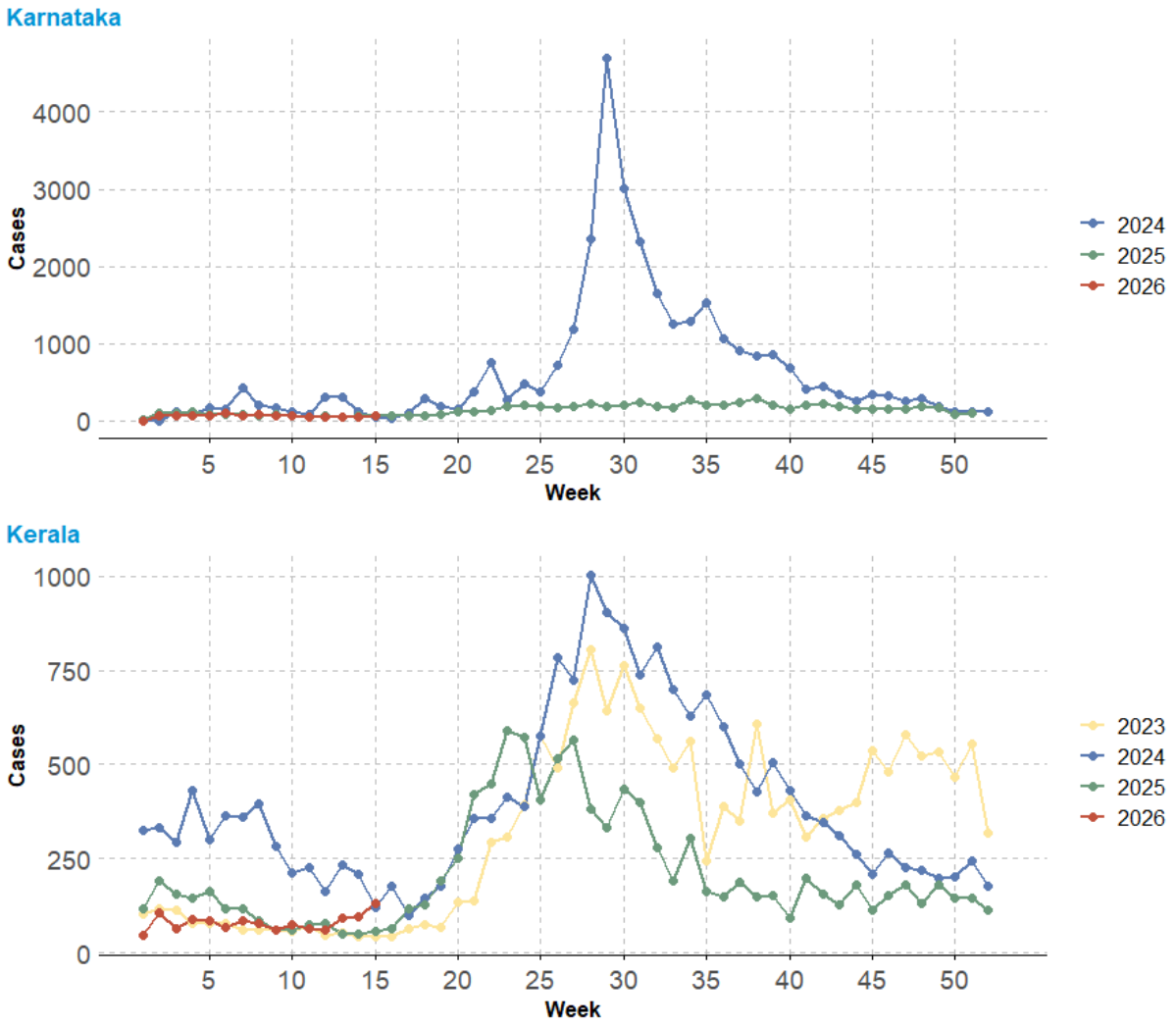
Kerala[19]

- In 2025, cases increased steadily from week 17, but case numbers have declined since week 27. In 2026, the trend has remained consistently low since the start of the year.
-

Karnataka[20]

- In Karnataka, during week 15, a total of 133 cases were reported, representing a 39% increase compared to 96 cases reported in week 14.

Figure 12. Weekly number of new dengue cases in Karnataka and Kerala states from week 1 of 2024 to week 15 of 2026



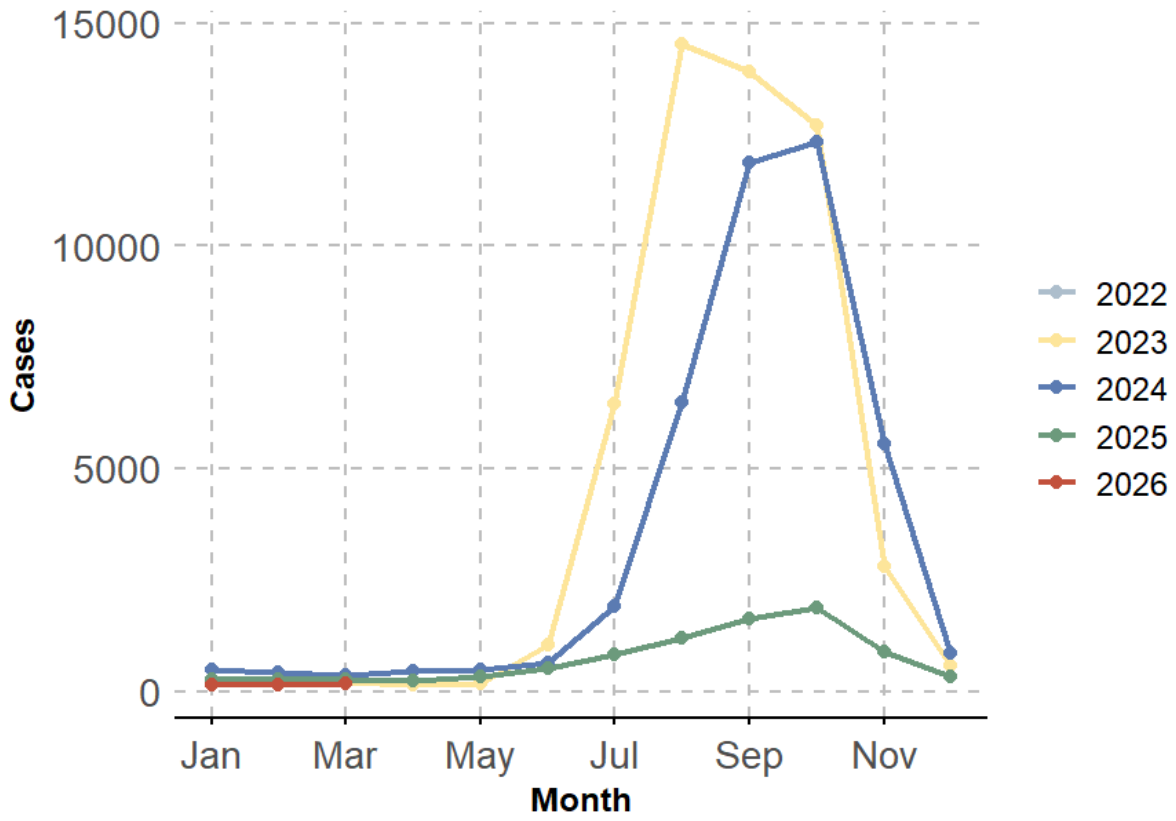
[19] Department of Health and Family Welfare, Government of Kerala. Health Dashboard – Integrated Disease Surveillance Programme (IDSP) [Internet]. 2026. Available from: https://dashboard.kerala.gov.in/

[20] Department of Health and Family Welfare, Government of Karnataka. PRISM H Disease Surveillance Dashboard [Internet]. 2026. Available from: https://hfwcom.karnataka.gov.in/info-4/Weekly%20Infectious%20Disease%20Report/en

Nepal

- In March 2026, a total of 174 dengue cases were reported in Nepal, a 12% increase compared to February 2026 (n = 156).

Figure 13. Number of new cases of dengue by month in Nepal from January 2023 to March 2026

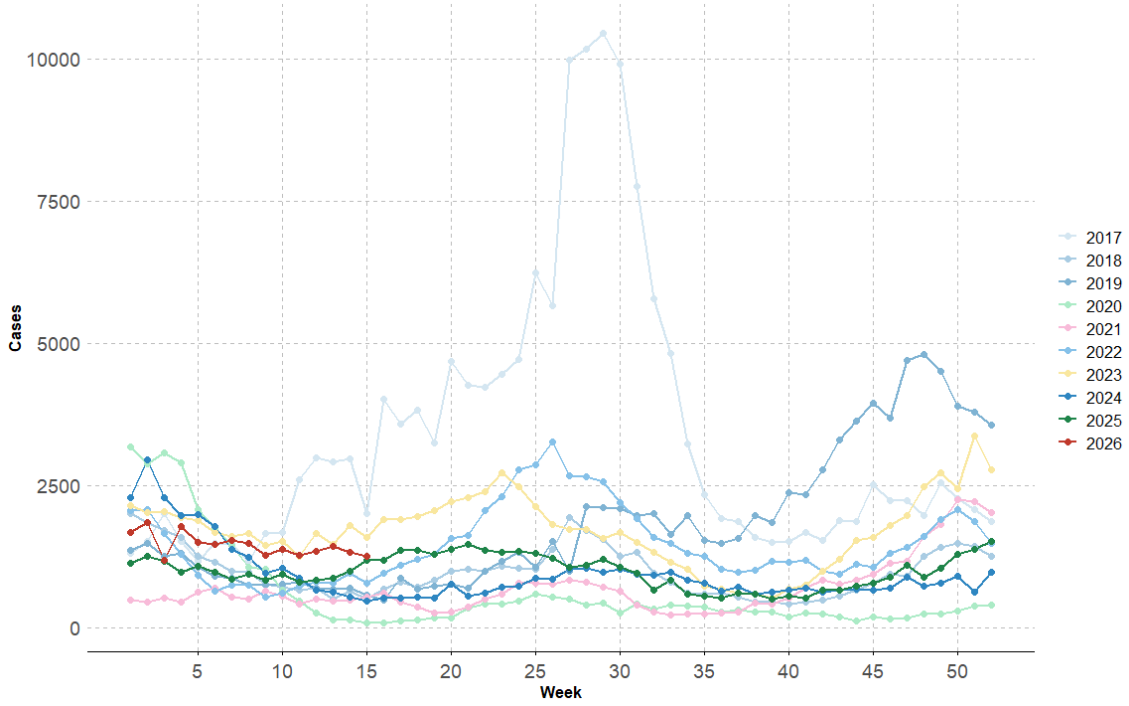


Source: WHO Global dengue surveillance

Sri Lanka [21]

- In Sri Lanka, 1,250 suspected dengue cases were reported in week 15 of 2026, a 5% decrease from week 14 (1,322 cases) and broadly comparable to the same week in 2025 (1,178 cases).
- The Western Province accounted for 54% of total cases, with the Colombo Municipal Council (CMC) contributing 5.4%, the rest of Colombo District 20.6%.

Figure 14. Number of new dengue cases by week in Sri Lanka from week 1 of 2017 to week 15 of 2026.



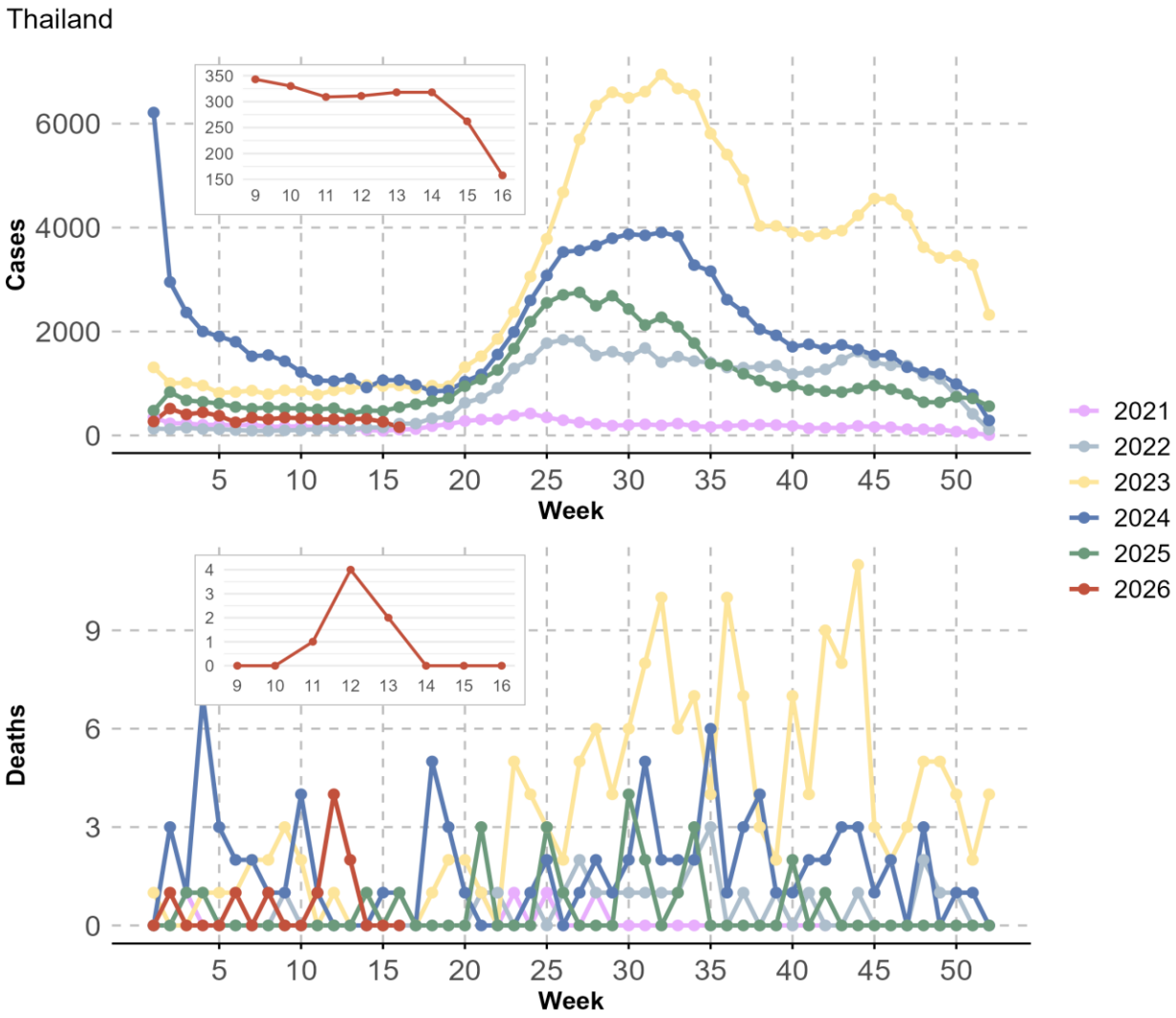
Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - 2017 to 2020; 2021 to 2025

[21] National Dengue Control Unit (NDCU), Ministry of Health, Sri Lanka. National Dengue Control Unit [Internet]. 2025 [cited 2026 Apr 21]. Available from: https://www.dengue.health.gov.lk/web/index.php/en/ ; Sri Lanka weekly Dengue update.

Thailand

- In Thailand, during week 16 of 2026, a total of 158 suspected dengue cases were reported, representing a 40% decrease compared with the 262 cases reported in week 15. Compared with the same week in 2025, when 544 cases were reported, the week 16 caseload in 2026 was 71% lower.

Figure 15. Number of new cases of dengue by week, 2024 - 2026



Source: WHO Global dengue surveillance