# WHO South-East Asia Region
# Epidemiological Bulletin

**WHO Health Emergencies Programme**
**WHO Regional Office for South-East Asia**
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**Reporting period: 15 to 28 June 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

## India: Shigellosis

**Situation overview as of 29 June 2026** [1]

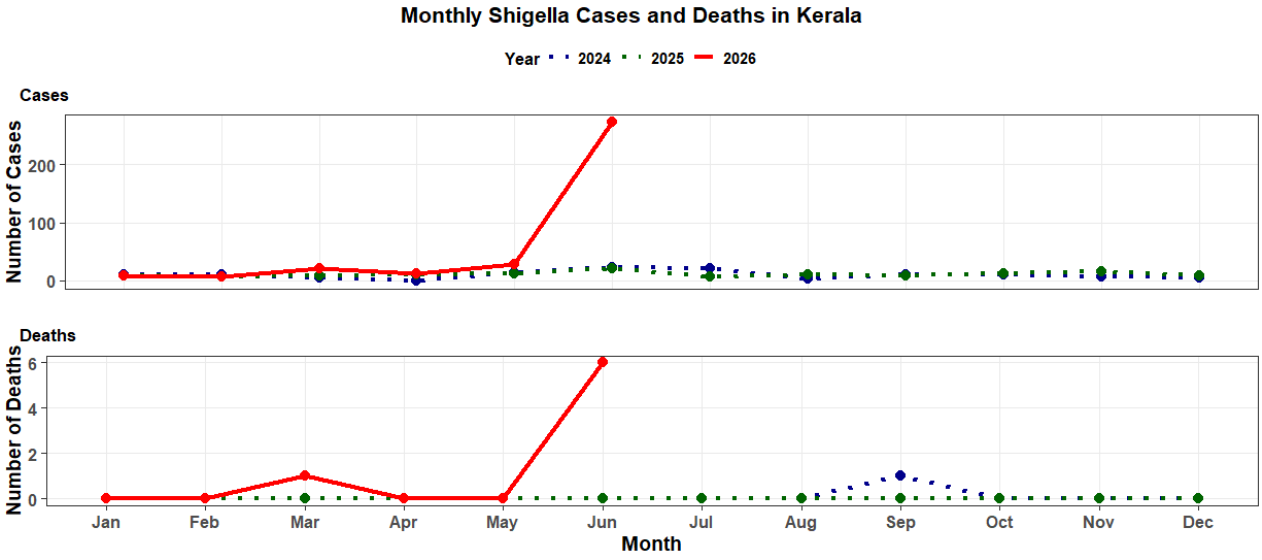
According to the Integrated Disease Surveillance Programme (IDSP) of Kerala

- Cumulatively in 2026 a total of 273 cases have been confirmed and 7 deaths.
- During the month of June, as of 29 June 2026, 197 cases and 6 deaths have been reported.

According to informal sources[2]

- The outbreak remains concentrated in northern Kerala, particularly Kozhikode, Malappuram, and Wayanad districts, which continue to report the highest case numbers.
- Recent case increases suggest continued multi-district community transmission, with sporadic clusters also reported in districts including Kannur, Thrissur, Kollam, and Thiruvananthapuram.

**Figure 1. Monthly Shigella cases and deaths reported in Kerala from 1 January 2024 to 29 June 2026**




[1] https://dhs.kerala.gov.in/en/2026/06/29/29-06-2026/

[2] https://outbreaknewstoday.substack.com/p/india-190-shigella-cases-in-kerala

## Bangladesh: Measles

**Situation overview as of 28 June 2026** [3]

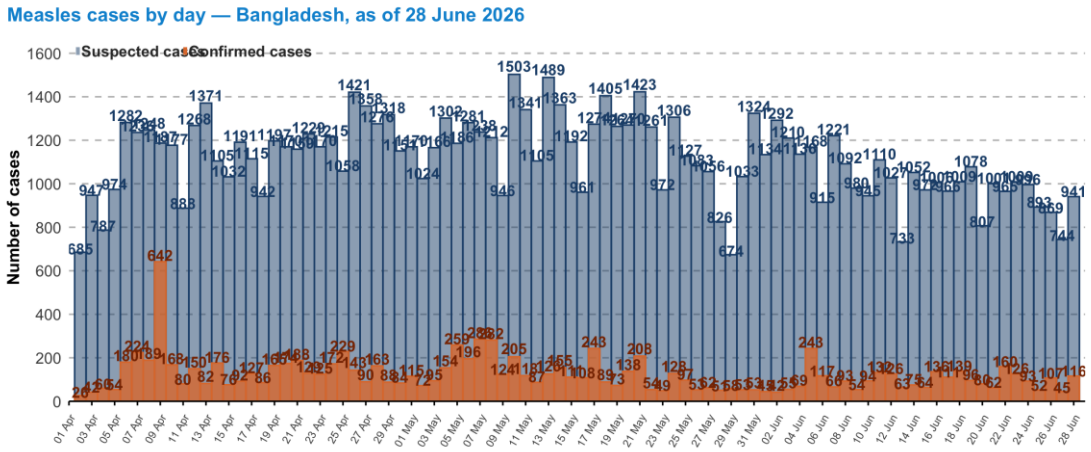
<u>According to the Ministry of Health and Family Welfare of Bangladesh</u>

- Measles cases, deaths and hospitalizations continued to be reported from Bangladesh.
  - In ISO week 26 (22 – 28 June 2026), an average of 917 suspected cases were reported per day, compared with 977 suspected cases per day in ISO week 25(15 – 21 June 2026).
  - In ISO week 26, an average of 4.6 suspected deaths were reported per day, compared with 3.9 suspected deaths per day in ISO week 25.
  - In ISO week 26, an average of 855 admissions were reported per day, compared with 897 admissions per day in ISO week 25.
- Geographically, in ISO week 26, Barishal division reported the highest suspected case incidence, at approximately 8.7 cases per 100 000 population per week, followed by Dhaka division at approximately 5.9 cases per 100 000 population per week.
  - Cumulatively, Sylhet division recorded the highest CFR at 1.5%, followed by Rajshahi at 1.14%.
- Since 15 March 2026:
  - 99 207 suspected measles cases and 11 710 laboratory-confirmed cases have been reported.
  - 619 suspected measles-related deaths (CFR= 0.6%) and 93 confirmed measles-related deaths (CFR= 0.8%) have been recorded.

<u>According to UN partners (Inter-Cluster Coordination Group, Bangladesh)</u>[4]

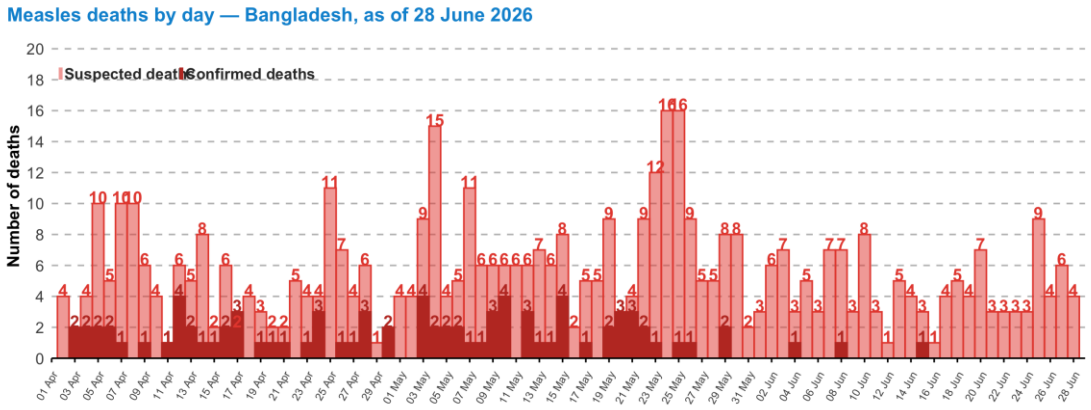
- As of 25 June 2026, in the Rohingya refugee camps in Cox's Bazar and Bhasan Char, 865 suspected measles cases, 105 laboratory-confirmed cases, and 5 deaths have been reported to date.
- A measles-rubella (MR) vaccination campaign combined with vitamin A supplementation has reached 94% of in Cox's Bazar camps and 99% coverage in Bhasan Char.
- Children under five years of age remain the most vulnerable population, consistent with national trends showing this age group accounts for the majority of measles cases.

**Figure 2. Daily number of confirmed and suspected measles cases and deaths in Bangladesh, 2 April-28 June 2026**



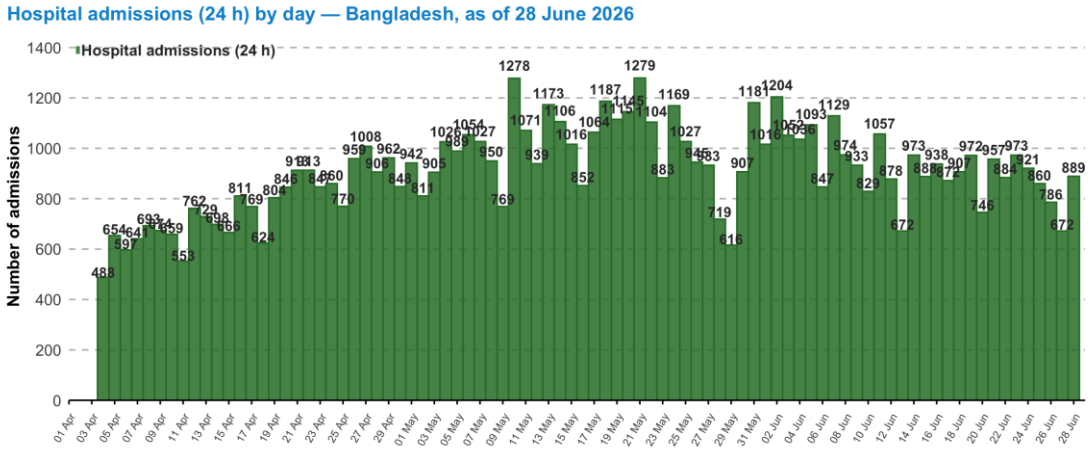

[3] Directorate General of Health Services (Bangladesh). Measles press release (28/06/2026) [Internet] [cited 2026 June 29]. Available from: https://tinyurl.com/4fju26p3

[4] United Nations Resident Coordinator Office in Bangladesh. Bangladesh: Situation Report #5 - Measles Outbreak (25 June 2026) [Internet]. Dhaka: United Nations Resident Coordinator Office in Bangladesh; 2026 Jun 28 [cited 2026 Jun 30]. Available from: https://reliefweb.int/report/bangladesh/bangladesh-situation-report-5-measles-outbreak-25-june-2026



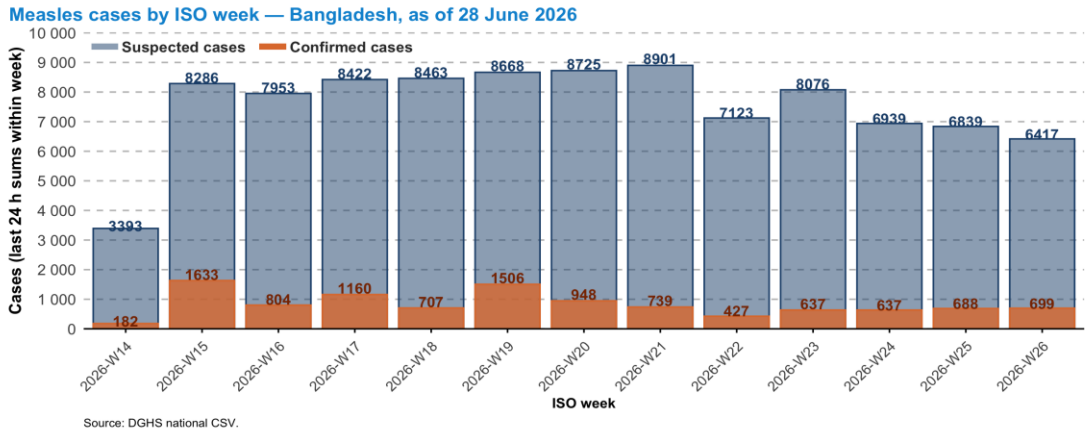

Source: DGHS, Bangladesh

**Figure 3. Daily hospital admissions of suspected measles cases in Bangladesh, 02 April-28 June 2026**



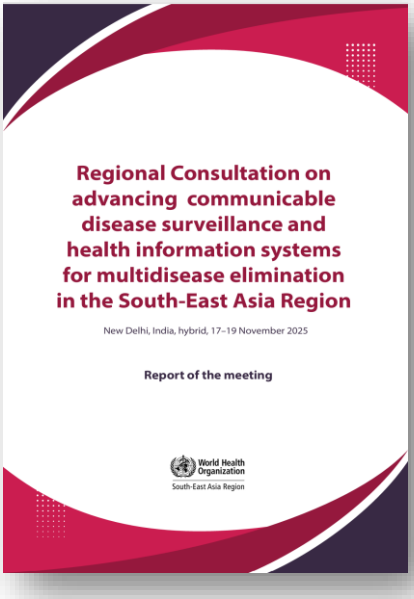

Source: DGHS, Bangladesh

**Figure 4. Weekly number of confirmed and suspected measles cases in Bangladesh (ISO Week)**



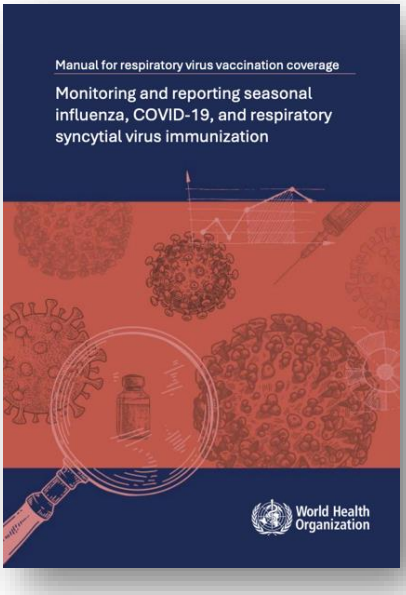

Source: DGHS, Bangladesh

## New publication: Regional Consultation on advancing communicable disease surveillance and health information systems for multi-disease elimination in the South-East Asia Region




- Published on 26 June 2026, the Regional Consultation on Advancing Communicable Disease Surveillance and Health Information Systems for Multi-disease Elimination in the WHO South-East Asia Region was held in New Delhi, India, from 17–19 November 2025.
- The consultation brought together Member States, WHO country offices, and technical partners, marking an important milestone in strengthening regional collaboration and advancing integrated, high-quality, and digitally enabled surveillance systems for timely public health action and sustained disease elimination.
- The meeting facilitated knowledge sharing, peer learning, and strategic dialogue, culminating in the development and refinement of a Regional Strategic Framework for Communicable Disease Surveillance. The report highlights key priorities, including data quality, workforce capacity, laboratory strengthening, governance, collaboration, and system integration, while reinforcing the Region's shared commitment to building resilient and future-ready surveillance systems to support multidisease elimination.
- The document is available at https://www.who.int/publications/i/item/sea-hdc-1

## New publication: Manual for respiratory virus vaccination coverage: Monitoring and reporting seasonal influenza, COVID-19, and respiratory syncytial virus immunization




- This manual provides guidance for countries on monitoring and reporting vaccination coverage for seasonal influenza, COVID-19 and respiratory syncytial virus (RSV) immunization programmes.
- Recognizing the contribution of these programmes to epidemic and pandemic preparedness and response, it outlines practical approaches, indicators, data systems and tools to support the generation of accurate, timely and comparable coverage estimates.
- The document explains the importance of vaccination coverage monitoring for assessing programme performance, identifying inequities in access, evaluating health and economic impact, and informing policy and investment decisions.
- The document is available at https://www.who.int/publications/i/item/9789240118829

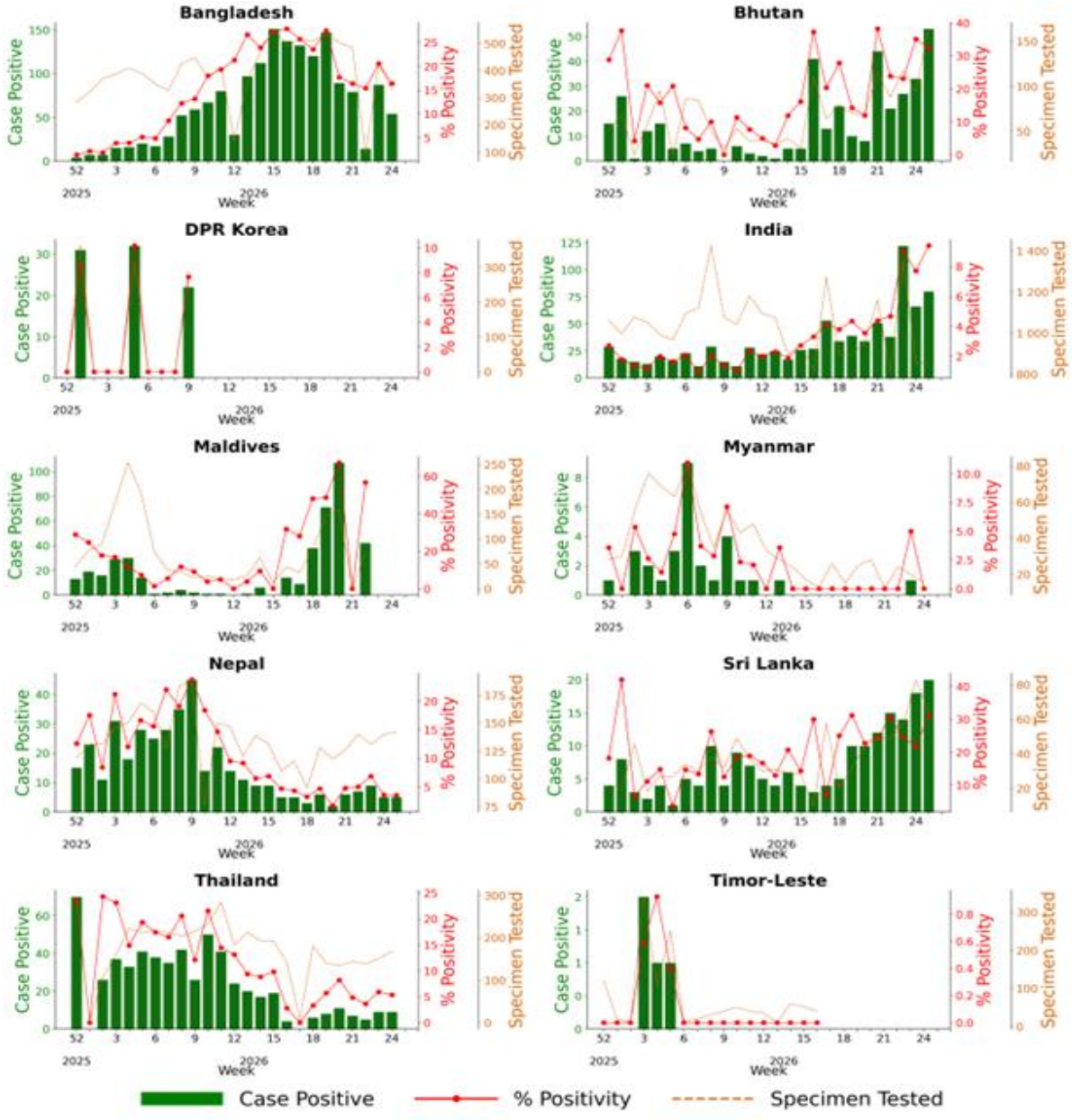
# Influenza

## Situation in the WHO South-East Asia Region

**Situation as of 29 June 2026** [5]

- Figure 4 shows the influenza data from the WHO FluNet platform, accessed on 29 June 2026.
- In the WHO South-East Asia Region during weeks 24–26, there were 343 influenza positive samples, among 2 909 samples tested from seven countries, the overall test positivity percentage was 12%.
- Bhutan and Sri Lanka reported relatively high percentages of test positivity in the region with 33% and 26%, respectively (Table 1).

**Figure 5. 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 29 June 2026**




Source: Respimart/FluNet

[5] World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 June 29]. 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 24 to 26 in 2026, as of 29 June 2026** [6]

- Table 1 shows influenza A virus subtypes and B lineages distribution across ten countries in the WHO South-East Asia Region for weeks 24 to 26 of 2026, based on data extracted from WHO's RespiMart platforms on 29 June 2026. The last submission was on 15 June 2026 (Week 25).
- Maldives, DPR Korea and Timor Leste reported "no samples tested" during this period. One country in the region tested samples less than the WHO recommended minimum number (50 samples per week at the national level) for this two week period spanning from 23-25 weeks. The overall positivity percentage for the region was 12%. This test positivity percentage was the same as the value observed during the two-week period reported in the previous bulletin.
- The highest test positivity percentages were reported by Bhutan (33%; up from 28%) and Sri Lanka (26%; up from 23%). Compared with the previous reporting period, influenza test positivity increased by 18% in Bhutan and by 13% in Sri Lanka during the current reporting period.
- At the regional level, influenza A and influenza B accounted for 83% and 17% of all influenza-positive samples, respectively. In the previous reporting period, the corresponding distribution was 85% for influenza A and 15% for influenza B.
- The predominant Influenza A subtype detected in the region was A (H1N1)pdm09, accounting for 61% of all influenza-positive samples.
  - Among countries that reported influenza test positive results (10 or more positive samples), A(H3) was the predominant sub-type only in Bangladesh (100%). Among all positive samples for Influenza, the sub-type A (H1N1) pdm09 was pre dominant in Bhutan (97%); India(79%) and Thailand (78%).
  - In Nepal 50%, and Sri Lanka 16% of samples that tested positive for influenza A were not subtyped.
- Influenza B (Victoria lineage) accounted for 14% of all influenza –positive samples in the region, compared with 10% in the previous reporting period. This represents a 40% relative increase compared with the preceding two-week reporting period.
  - Among countries that reported influenza test positive results (10 or more positive samples), B lineage predominated in Sri Lanka (74%). Sri Lanka also reported the highest proportion of influenza B (Victoria lineage) among all influenza-positive samples (45%) in the region.
  - Among the samples that tested positive for Influenza, the proportion of influenza B (Lineage not Determined) was 10% in Nepal and 29 % in Sri Lanka.

**Table 1. Distribution of influenza A virus subtypes and B virus lineages in the WHO South-East Asia Region* (weeks 24 to 26, 2026), situation as of 29 June 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 | 2 909 | 343 | 12% | 0% | 19% | 0% | 61% | 3% | 0% | 14% | 3% |
| Bangladesh | 330 | 54 | 16% | 0% | 100% | 0% | 0% | 0% | 0% | 0% | 0% |
| Bhutan | 258 | 86 | 33% | 0% | 3% | 0% | 97% | 0% | 0% | 0% | 0% |
| DPR Korea | 0 | 0 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| India | 1 709 | 146 | 8% | 0% | 3% | 0% | 79% | 0% | 0% | 18% | 0% |
| Maldives | 0 | 0 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Myanmar | 15 | 0 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| Nepal | 282 | 10 | 4% | 0% | 0% | 0% | 20% | 50% | 0% | 20% | 10% |
| Sri Lanka | 147 | 38 | 26% | 0% | 8% | 0% | 3% | 16% | 0% | 45% | 29% |
| Thailand | 168 | 9 | 5% | 0% | 0% | 0% | 78% | 0% | 0% | 22% | 0% |
| Timor-Leste | 0 | 0 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |

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

[6] World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 Jun 29]. Available from: https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs

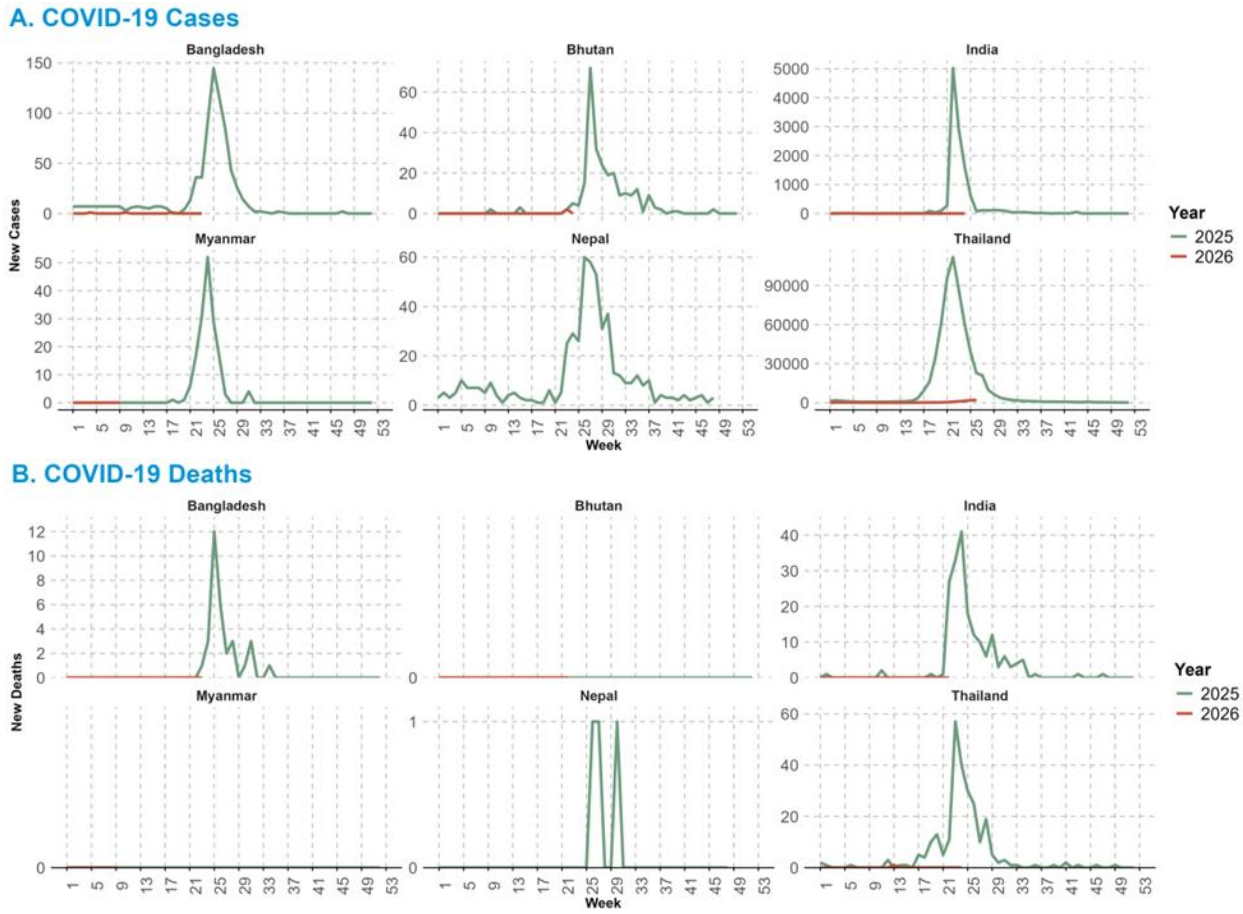
# COVID-19

## Situation in the WHO South-East Asia Region

### Situation as of 29 June 2026

- The weekly number of COVID-19 cases reported on official websites, including Bangladesh[7], Bhutan[8], India[9], Myanmar[10], Nepal[11] and Thailand[12], are presented in Figure 5 **.
- Data of the most recent week (week 26) are available from Thailand.
- Please visit the WHO COVID-19 dashboard for the global situation of COVID-19.

**Figure 6. Weekly comparisons of new COVID-19 cases (A) and deaths (B) reported from selected countries from week one of 2025 to week 26 in the WHO South-East Asia Region***

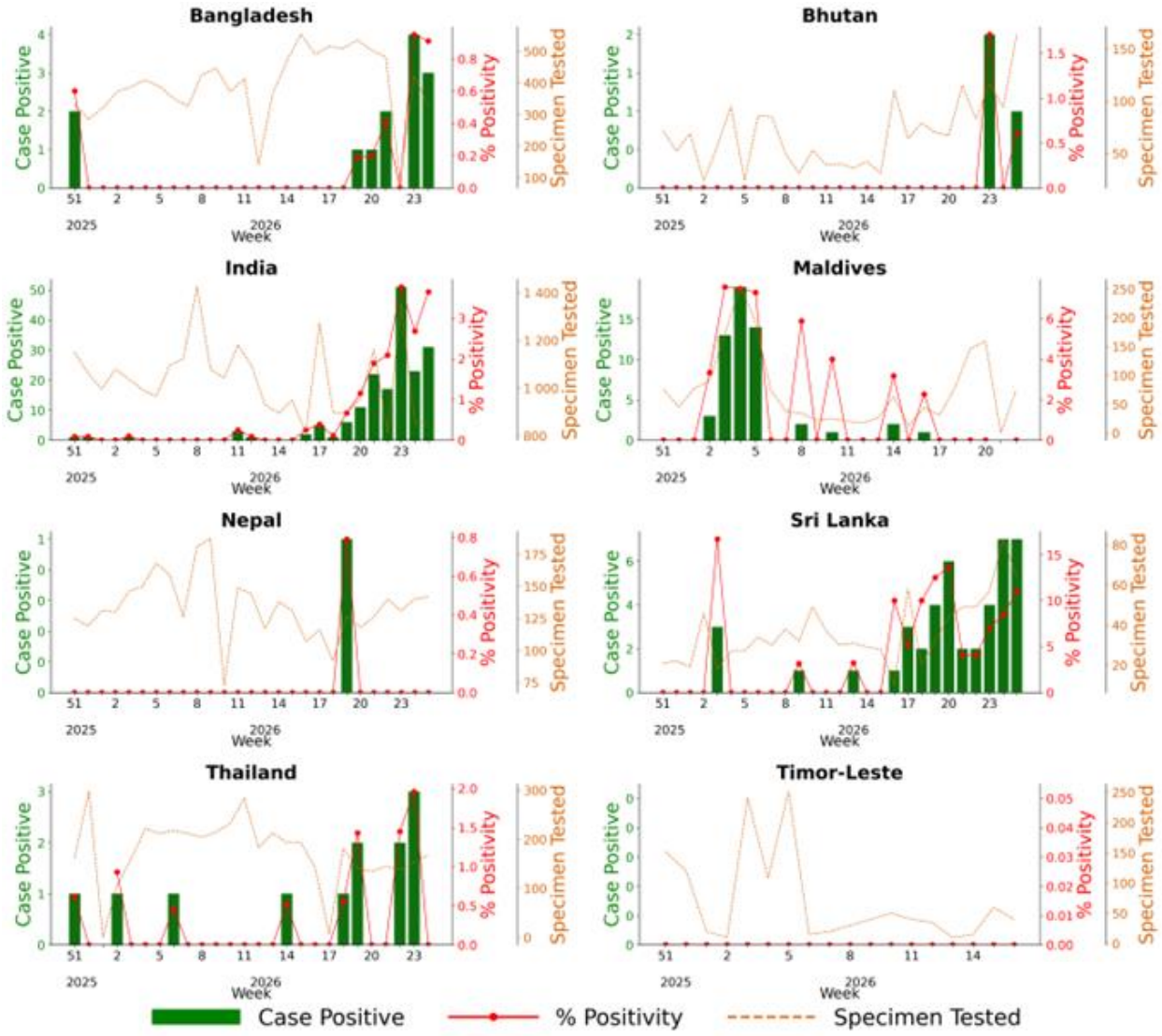



* Nepal data as of week 49 of 2025. India data as of week 6, Myanmar data as of week 9 and Bangladesh and Bhutan data as of week 20.
** Bangladesh, Bhutan, India and Myanmar data as of ISO Week. Nepal and Thailand data as of Epidemiological week.

[7] Directorate General of Health Services (DGHS), Bangladesh. COVID-19 Dashboard [Internet]. 2026 [cited 2026 Jun 30]. Available from: https://old.dghs.gov.bd/index.php/bd/component/content/article?layout=edit&id=5612
[8] Bhutan, Royal Centre for Disease Control. [Internet]. [cited 2026 Jun 30]. Available from: https://www.rcdc.gov.bt/web/
[9] Ministry of Health and Family Welfare, Government of India. COVID-19 India Dashboard [Internet]. [cited 2026 Jun 30]. Available from: https://covid19dashboard.mohfw.gov.in/
[10] Ministry of Health, Republic of the Union of Myanmar. Ministry of Health official website [Internet]. 2026 [cited 2026 Jun 30]. Available from: https://www.mohs.gov.mm/
[11] Epidemiology and Disease Control Division Nepal. [Internet]. [cited 2026 Jun 30]. Available from: https://edcd.gov.np/newsroom/outbreak
[12] Department of Disease Control, Ministry of Public Health, Thailand. COVID-19 Surveillance Dashboard [Internet]. 2026 [cited 2026 Jun 30]. 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.[13]

**Figure 7. The number of COVID-19 positive case, % positivity and specimen tested from integrated influenza-SARS CoV-2 sentinel surveillance systems (as of 29 June 2026).**




[13] Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard. [Internet]. [cited 2026 Jun 29]. Available from: **Dashboard**

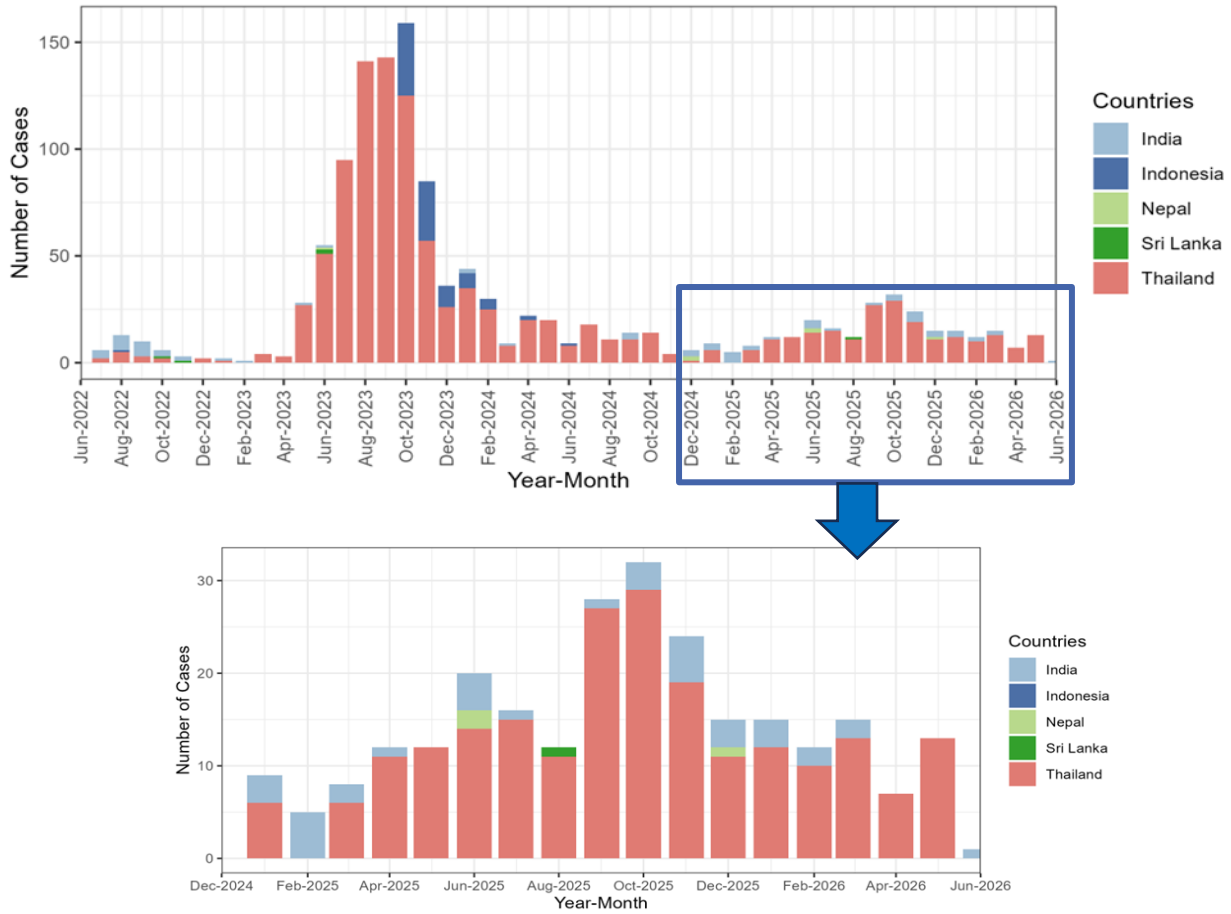
# mpox

## Situation in the WHO South-East Asia Region

### Situation as of 29 June 2026

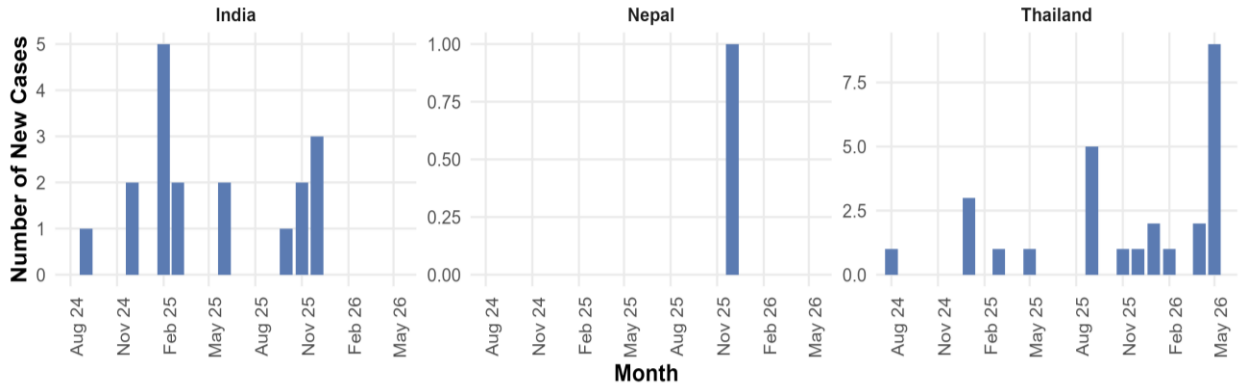
- In weeks 25 and 26 (15 June to 28 June 2026), one new mpox were reported from India.
- As of 29 June, 2026, in the WHO South-East Asia Region, a total of 1 249 laboratory-confirmed mpox cases, including 16 deaths, have been reported since 14 July 2022.
- Forty-six mpox virus (MPXV) clade Ib cases have been reported in the Region to date – 18 from India, 27 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 8. Number of mpox cases reported in WHO South-East Asia Region by date of notification* (Upper, 14 July 2022 – 29 June 2026; lower 1 January 2025 – 29 June 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 9. Number of MPXV clade Ib cases reported in WHO South-East Asia Region by month of notification (as of 29 June 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 46 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 29 June 2026)*.**

| | Category | Total (n = 46) |
|---|---|---|
| **Country** | | |
| | India | 18 (39.1%) |
| | Nepal | 1 (2.2%) |
| | Thailand | 27 (58.7%) |
| **Recent international travel** | | |
| | Yes | 32 (69.6%) |
| | No | 14 (30.4%) |
| **Age group (years)** | | |
| | 18-29 | 13 (28.3%) |
| | 30-39 | 22 (47.8%) |
| | 40-49 | 10 (21.7%) |
| | 50 and over | 1 (2.2%) |
| **Gender** | | |
| | Male | 33 (71.7%) |
| | Female | 13 (28.3%) |

Notes: * One CRF is awaited from Nepal.

# Dengue

## Situation in the WHO South-East Asia Region [14]

- In May 2026, Sri Lanka reported 8 602 cases, India reported 3 747 cases and Thailand reported 1 782 cases (Figure 9). Data of May were not available yet for Myanmar.
- Timor-Leste recorded 126 cases in May 2026, 38% decrease compared to April 2026 (203 cases), and 14% higher than May 2025 (111 cases).

**Figure 10. Monthly reported dengue cases by country, June 2025 – May 2026**

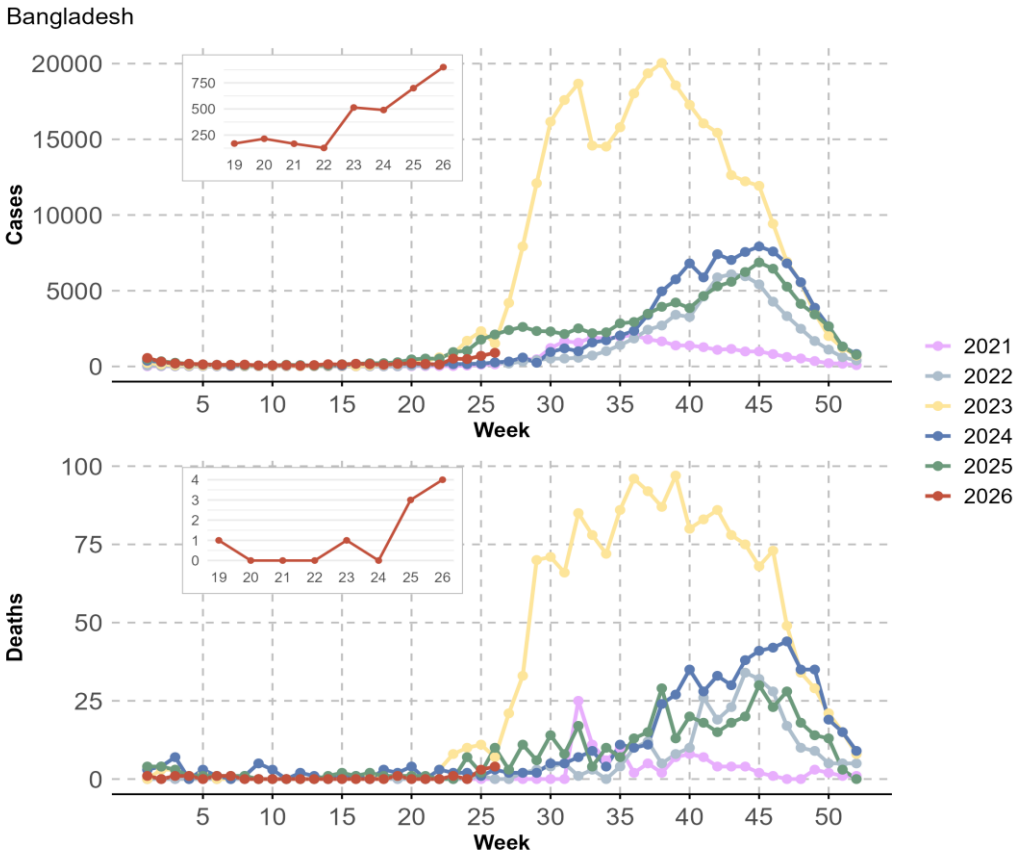

Notes:
Bangladesh, Bhutan, Indonesia, Myanmar, Thailand and Timor-Leste show confirmed cases.
Bangladesh reports only hospitalized cases.
The majority of Myanmar cases are hospitalized cases.

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

## Bangladesh [15]

- In Bangladesh, during Week 26 of 2026, a total of 900 suspected dengue cases were reported, representing a 29% increase compared with the 699 cases reported in Week 25. Compared with the same week in 2025, when 2 109 cases were reported, the Week 26 caseload in 2026 was 57% lower.
- During week 26, four new dengue deaths were reported in Bangladesh, representing a 33.3% increase compared to three deaths reported in Week 25.

**Figure 11. Number of new dengue cases and deaths by week in Bangladesh from week 1 of 2021 to week 26 of 2026.**




[15] 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 May 2026, a total of 3 747 cases of dengue were reported in India, a 28% increase compared to April 2026 (n = 2 918).
- In 2026, as of May 2026, a total of 16 313 cases of dengue have been reported compared to 18 489 cases during the same period in 2025.

**Figure 12. Number of new cases of dengue by month in India from January 2024 to May 2026**

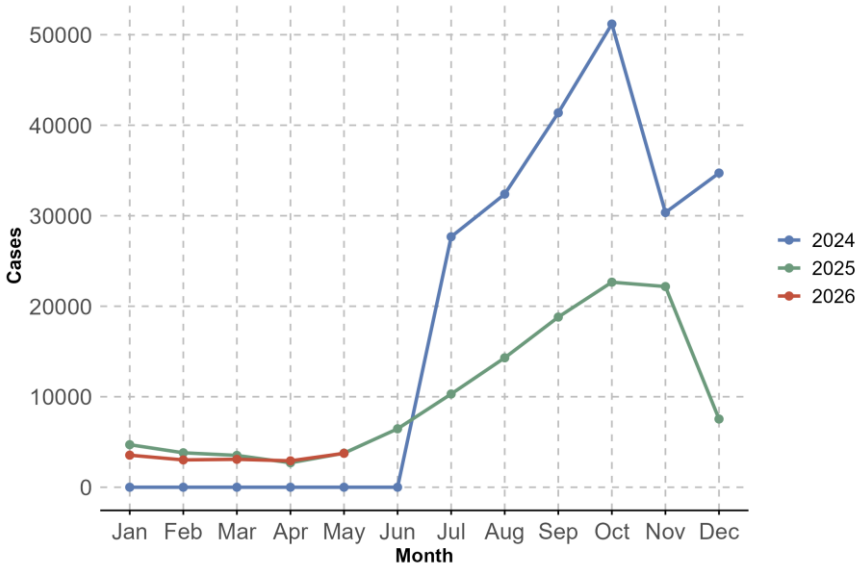
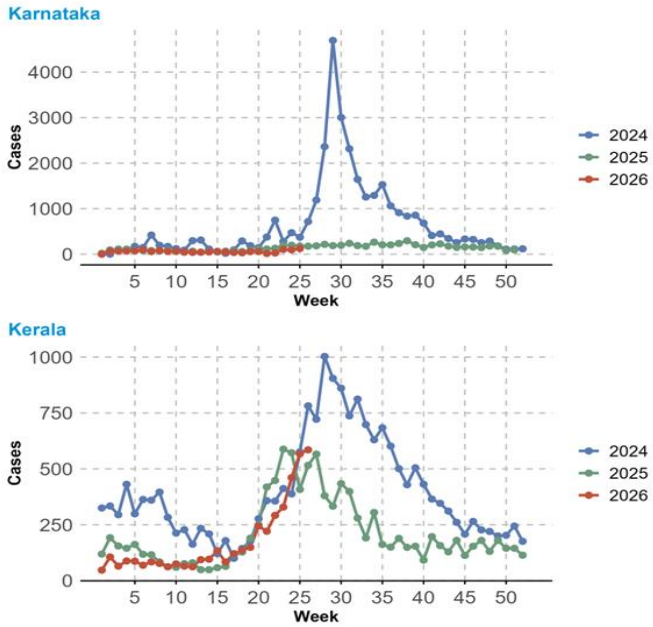



**Figure 13. Weekly number of new dengue cases in Karnataka and Kerala states from week 1 of 2024 to week 26 of 2026**

### Karnataka[16]

- In Karnataka, during week 25, a total of 124 cases were reported, representing a 29% increase compared to 96 cases reported in week 24.




### Kerala[17]

- In 2025, cases increased steadily from week 17, but case numbers have declined since week 27. In 2026, the trend remained consistently low since the start of the year.
  But from week 16, it is again showing some increasing trend.

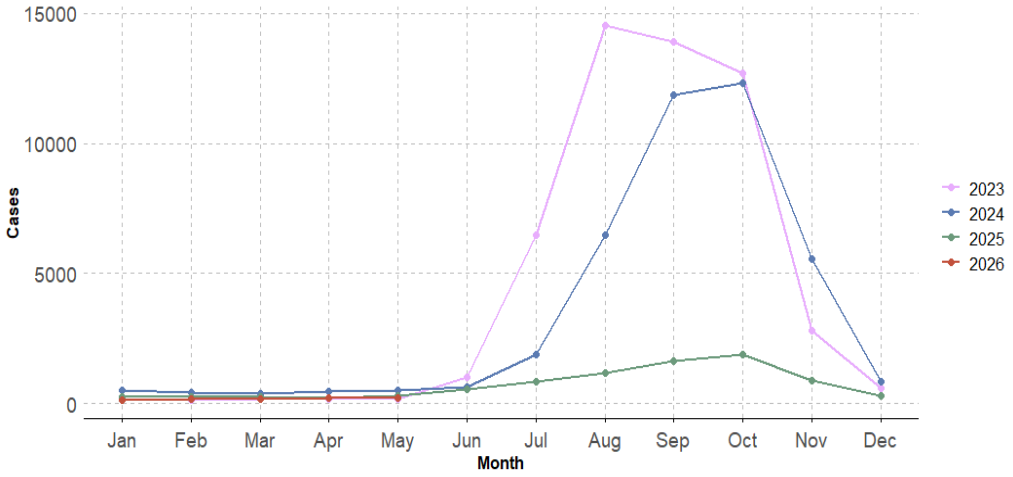
[16] Department of Health and Family Welfare, Government of Karnataka. PRISM H Disease Surveillance Dashboard [Internet]. 2026. Available from: Karnataka

[17] Department of Health and Family Welfare, Government of Kerala. Health Dashboard – Integrated Disease Surveillance Programme (IDSP) [Internet]. 2026. Available from: Kerala

## Nepal

- In May 2026, a total of 216 dengue cases were reported in Nepal, a 0.5% decrease compared to April 2026 (n = 217).

**Figure 14. Number of new cases of dengue by month in Nepal from January 2023 to May 2026**

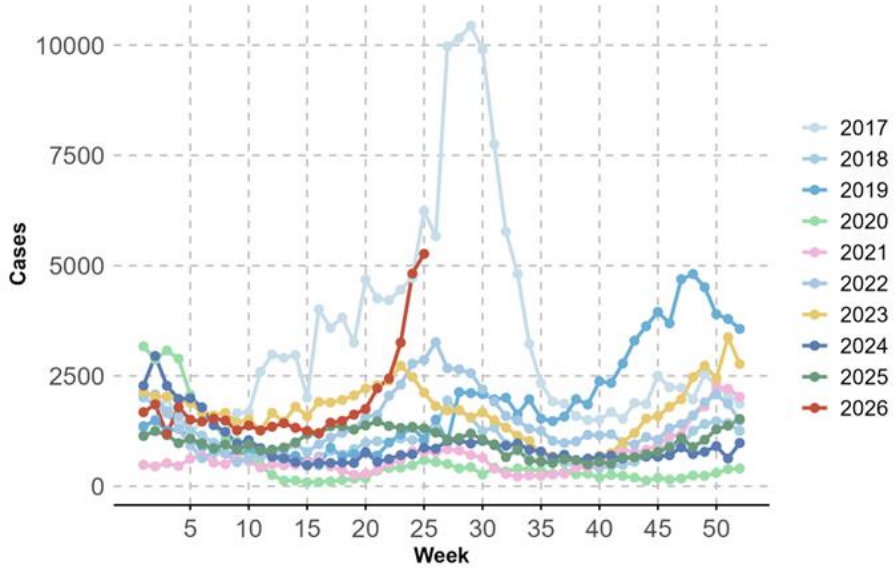



Source: WHO Global dengue surveillance

## Sri Lanka [18]

- In Sri Lanka, during Week 25 of 2026, a total of 5 267 suspected dengue cases were reported, representing a 9% increase compared with the 4 819 cases reported in Week 24. Compared with the same week in 2025, when 1 312 cases were reported, the Week 25 caseload in 2026 was 3 times higher.
- The Western Province accounted for 57.1% of total cases, with the Colombo Municipal Council (CMC) contributing 3.7%, the rest of Colombo District 20.9%.

**Figure 15. Number of new dengue cases by week in Sri Lanka from week 1 of 2017 to week 25 of 2026**



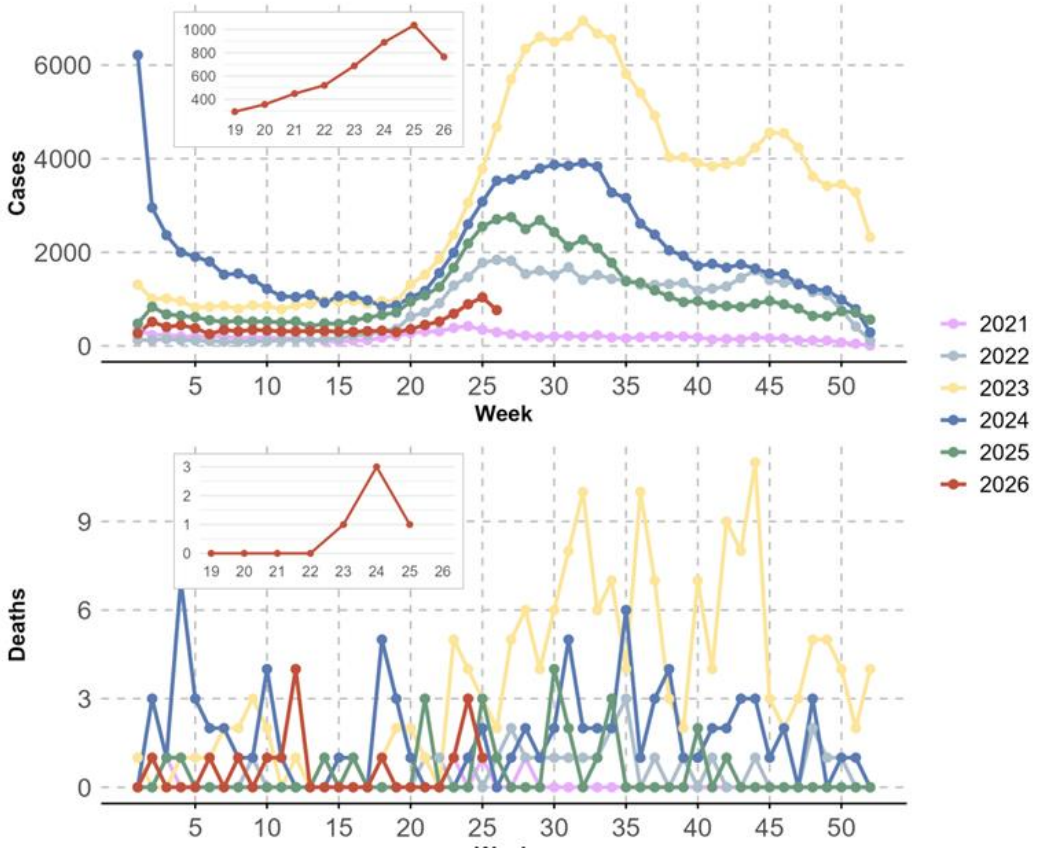

Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - 2017 to 2020; 2021 to 2025; 2026

[18] National Dengue Control Unit (NDCU), Ministry of Health, Sri Lanka. National Dengue Control Unit [Internet]. 2026 [cited 2026 June 29]. Available from: https://www.dengue.health.gov.lk/web/index.php/en/; Sri Lanka weekly Dengue update.

## Thailand

- In Thailand, during Week 26 of 2026, a total of 765 suspected dengue cases were reported, representing a 26% decrease compared with the 1 037 cases reported in Week 25. Compared with the same week in 2025, when 2 705 cases were reported, the Week 26 caseload in 2026 was 72% lower.

**Figure 16. Number of new cases of dengue by week in Thailand, from week one of 2021 to week 26 of 2026.**




Source: WHO Global dengue surveillance