WHO South-East Asia Region

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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.

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Key events and updates

Maldives: Measles situation update

Situation as of 13 July 2026

According to Health Protection Agency, Maldives [1]

- As of 13 July 2026, Maldives reported 144 laboratory-confirmed measles cases, with 141 cases reported between May and July 2026 and three cases reported between January–April 2026.
- A total of 1 427 contacts have been identified, of which 515 remain under active monitoring, including 34 high-risk contacts. A total of 828 individuals have been tested.
- The outbreak is concentrated in the Greater Malé Area (141 cases), with one case each reported from Addu City, Alif Alif (AA) Atoll, Himandhoo Island, and Ozen Reserve Bolifushi Resort.
- Four cases were classified as imported, with travel history linked to Trivandrum (Thiruvananthapuram) and Bangalore (Bengaluru) in India, and Bangladesh.
- Epidemiological investigations identified several transmission clusters, including one family (5 cases), Hulhumalé Hospital (7 cases), Villa High School (24 cases), Villa College (2 cases), and Abdulla Fouad Abdul Ghafoor (ADK) Hospital (4 cases). Cases ranged in age from 3 months to 51 years, with the majority occurring among young adults aged 15–29 years.
- Among confirmed cases, 61 had received two doses of a measles-containing vaccine, 22 had received one dose, three were unvaccinated, and one had received three doses. Vaccination status was unknown or pending confirmation for the remaining cases.

Public Health Response

- As of 13 July 2026, 6 986 individuals have been vaccinated through ORI, including 4 782 in the Greater Malé Area and 2 204 in the atolls.
- Surveillance activities include active investigation of all confirmed cases, contact tracing, and daily follow-up of contacts throughout the 21-day monitoring period, with close monitoring of cases aged below one year. Enhanced surveillance is in place, with all suspected cases being sampled and investigated, alongside daily coordination with healthcare facilities to ensure timely case detection, notification, and reporting.
- Epidemiological data are continuously monitored and analyzed to guide response measures.
- Laboratory capacity remains operational through ongoing testing and continuous monitoring of laboratory capacity and supplies.
- Outbreak Response Immunization (ORI) activities continue, including vaccination of contacts and other at-risk populations.
- Clinical management of measles cases has been strengthened through capacity-building sessions for clinical staff.
- Risk communication activities include public awareness campaigns and dissemination of technical guidance to healthcare facilities, schools, workplaces, and the general public.
- Orientation sessions have also been conducted for Ministry of Health staff, healthcare professionals, hospital managers, and public health personnel.
- Coordination continues with United Nations agencies, response partners, and national stakeholders to support implementation of the outbreak response.

[1] HPA Maldives/WHO Maldives Country Office internal situation update

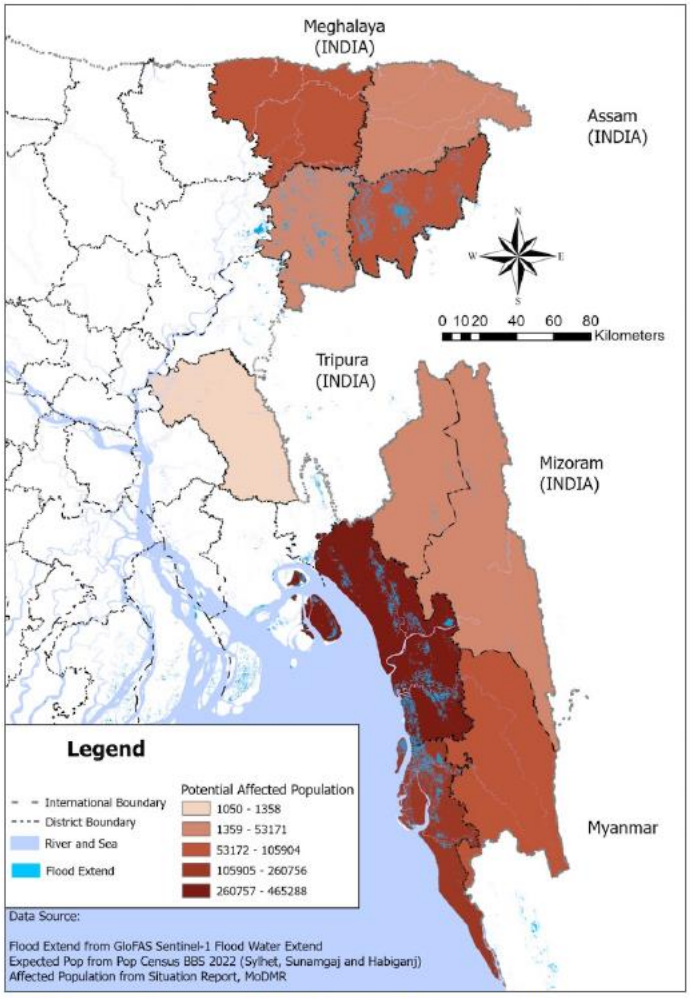
Bangladesh: Floods

Situation as on 14 July 2026

According to United Nations Bangladesh Situation report [2]

- Heavy to very heavy rainfall associated with the active southwest monsoon since 5 July 2026 has triggered widespread flash floods, waterlogging and landslides across southeastern and northeastern Bangladesh, particularly affecting Chattogram, Bandarban, Cox's Bazar, Khagrachhari and Rangamati.
- As of 12 July, an estimated 1.11 million people across 10 districts have been affected, including nearly 14 000 persons with disabilities, with 51 deaths reported.
- Approximately 38 422 people remain displaced in 1 047 evacuation shelters.
- Flooding has damaged roads, bridges and rail links, significantly restricting humanitarian access, while continued heavy rainfall forecast until 17 July may further worsen flooding and landslide risks.
- Water, sanitation and hygiene services have been disrupted in 27 upazilas, with more than 12 360 latrines and 3 583 water points damaged or contaminated, increasing the risk of waterborne diseases.
- Preliminary assessments indicate nearly 29 741 houses have been damaged in Chattogram and Bandarban, although access constraints continue to delay comprehensive damage assessments.

Figure 1. Map of Bangladesh showing population affected by floods and landslides



Public Health Response

- The Government activated the National Disaster Response Coordination Centre, established district coordination mechanisms, and mobilized emergency rescue, evacuation and relief operations with support from the military, Bangladesh Red Crescent Society and other agencies.
- The Ministry of Health deployed 516 medical teams across 50 affected upazilas, activated health emergency control rooms, and strengthened district-level coordination to maintain essential health services.
- Health authorities and WHO are supporting disease surveillance, health information management, risk communication, and preparedness for diarrhoeal diseases, dengue, measles and other water and vector-borne diseases, while planning catch-up immunization for children who missed routine vaccinations.
- WASH partners have distributed 1.89 million water purification tablets, deployed mobile water treatment plants, supplied hygiene kits and safe drinking water, while humanitarian partners continue scaling up food, shelter, protection and WASH assistance despite significant access challenges.

[2] https://reliefweb.int/report/bangladesh/bangladesh-situation-report-1-flash-flood-and-landslides-13-july-2026

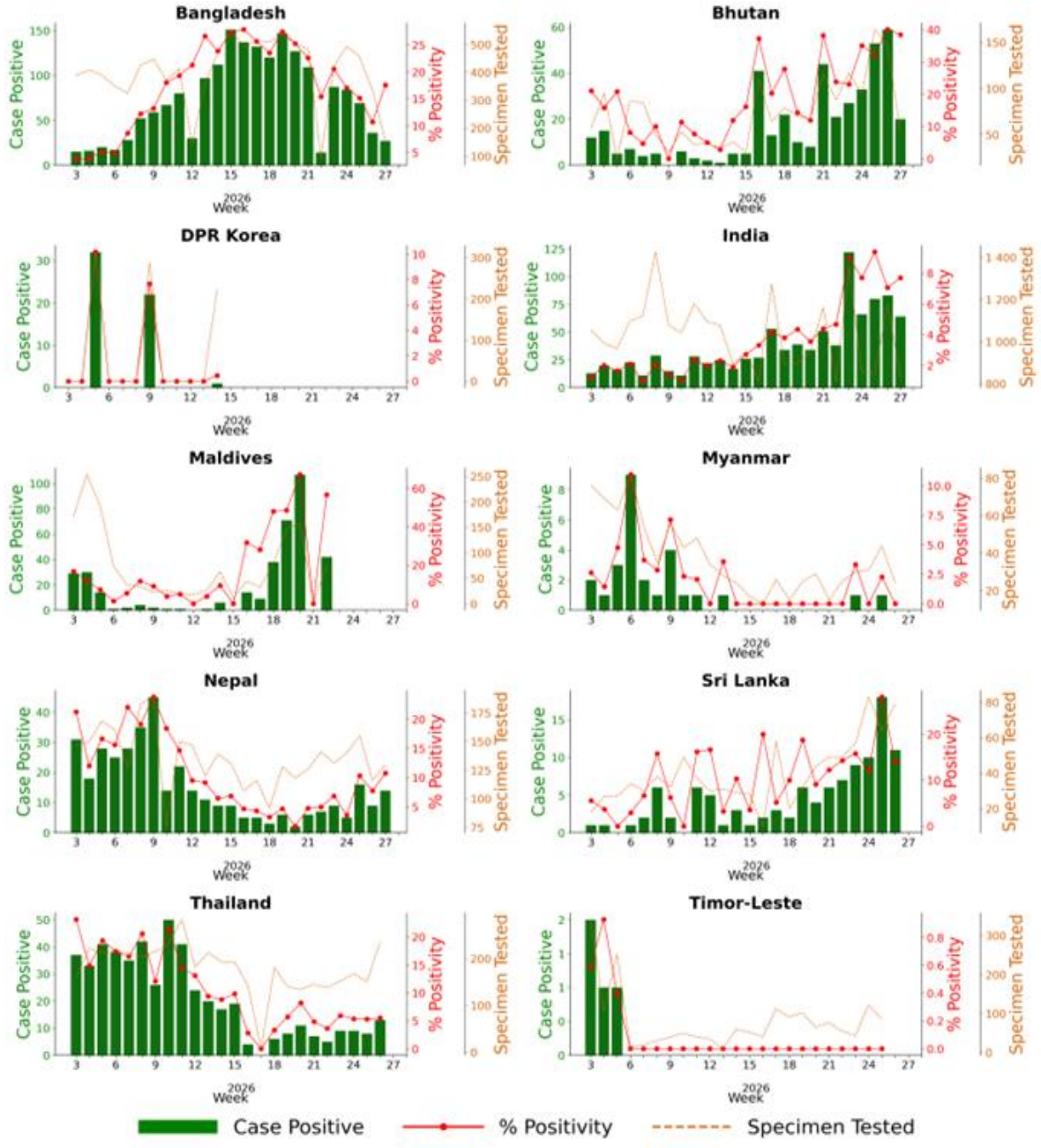
Influenza

Situation in the WHO South-East Asia Region

Situation as of 13 July 2026 [3]

- Figure 2 shows the influenza data from the WHO FluNet platform, accessed on 13 July 2026.
- In the WHO South-East Asia Region during weeks 26 to 28, there were 309 influenza positive samples, among 3 125 samples tested from seven countries, the overall positivity was 10%.
- Bhutan reported high test positivity in the region with 40% (Table 1).

Figure 2. 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 13 July 2026



Source: Respimart/FluNet

[3] World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 Jul 13]. 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 26 to 28 in 2026, as of 13 July 2026 [4]

- Table 1 shows influenza A virus subtypes and B lineages distribution across ten countries in the WHO South-East Asia Region for weeks 26 to 28 of 2026, based on data extracted from WHO's RespiMart platforms on 13 July 2026. The last submission was on 29 June 2026 (Week 27).
- 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 2-weeks period spanning from 26-28 weeks.
- The overall positivity percentage for the region was 10%. This was a 9% reduction in the overall test positivity percentage relative to the value (11%) observed during the period reported in the previous bulletin.
- The highest test positivity percentages were reported by Bhutan (40%; up from 33%) and Sri Lanka (14%; down from 19%). Compared with the previous reporting period, influenza test positivity increased by 21% in Bhutan while it decreased by 26% in Sri Lanka.
- At the regional level, influenza A and influenza B accounted for 89% and 11% of all influenza-positive samples, respectively. In the previous reporting period, the corresponding distribution was 87% for influenza A and 13% for influenza B.
- The predominant Influenza A subtype detected in the region was A (H1N1)pdm09, accounting for 69% of all influenza-positive samples.
    - Among countries that reported ≥10 positive samples, A(H3) was the predominant subtype in Bangladesh (97%).
    - The subtype A(H1N1)pdm09 was predominant in Bhutan (100%), India (79%), and Thailand (85%).
    - In Nepal (74%), positive samples were influenza A not subtyped.
- Influenza B (Victoria lineage) accounted for 11% of all influenza-positive samples in the region, compared with 13% in the previous reporting period — a 15% relative reduction compared with the preceding period.
    - Among countries that reported ≥10 positive samples, B lineage predominated in Sri Lanka (64%).

Table 1. Distribution of influenza A virus subtypes and B virus lineages in the WHO South-East Asia Region* (weeks 26 to 28, 2026), situation as of 13 July 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	3 125	309	10%	0%	15%	0%	69%	6%	0%	11%	0%
Bangladesh	337	36	11%	0%	97%	0%	3%	0%	0%	0%	0%
Bhutan	199	79	40%	0%	0%	0%	100%	0%	0%	0%	0%
DPR Korea	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
India	2 005	147	7%	0%	5%	0%	79%	0%	0%	16%	0%
Maldives	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
Myanmar	24	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
Nepal	246	23	9%	0%	0%	0%	22%	74%	0%	4%	0%
Sri Lanka	79	11	14%	0%	36%	0%	0%	0%	0%	64%	0%
Thailand	235	13	6%	0%	8%	0%	85%	0%	0%	8%	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%

[4] World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 Jul 13]. Available from: https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs

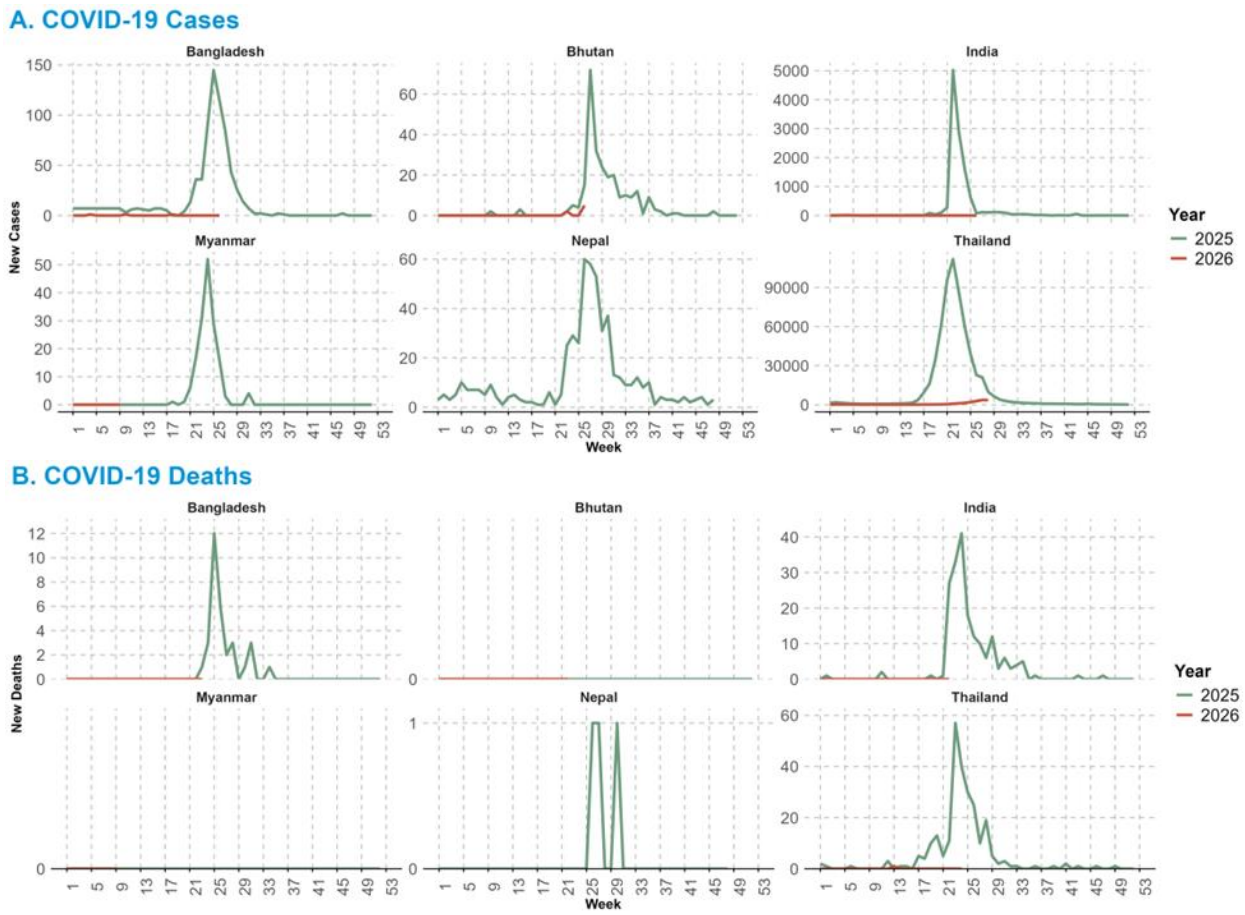
COVID-19

Situation in the WHO South-East Asia Region

Situation as of 12 July 2026

- The weekly number of COVID-19 cases reported on official websites, including Bangladesh[5], Bhutan[6], India[7], Myanmar[8], Nepal[9] and Thailand[10], are presented in Figure 6**.
- Data of the most recent week (week 28) are available from Thailand.
- Please visit the WHO COVID-19 dashboard for the global situation of COVID-19.

Figure 3. Weekly comparisons of new COVID-19 cases (A) and deaths (B) reported from selected countries from week one of 2025 to week 28 in 2026 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. Bangladesh data as of week 20 and Bhutan data as of week 26 of 2026.
** Bangladesh, Bhutan, India and Myanmar data as of ISO Week. Nepal and Thailand data as of Epidemiological week.

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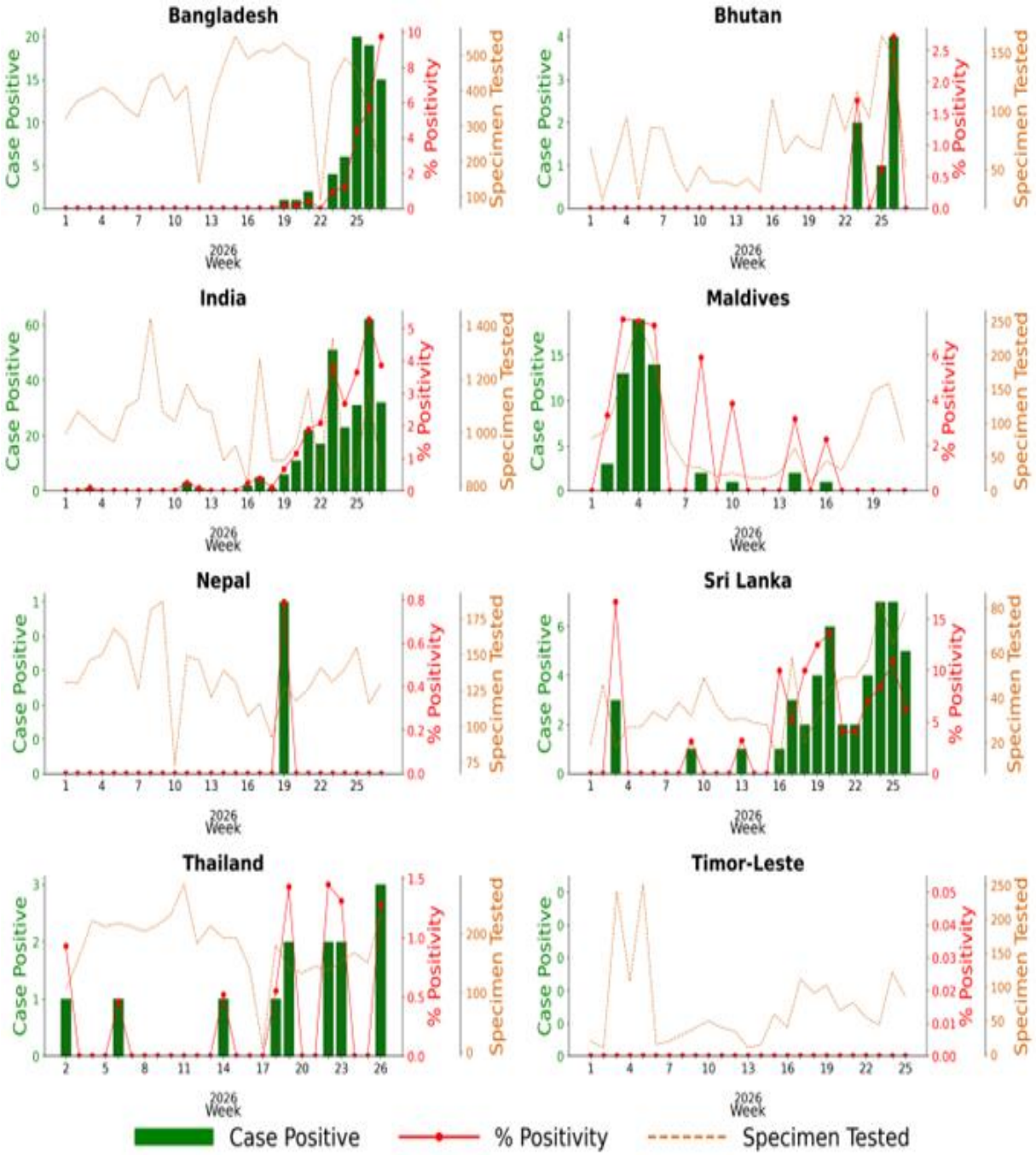
[5] Directorate General of Health Services (DGHS), Bangladesh. COVID-19 Dashboard [Internet]. 2026 [cited 2026 Jul 13]. Available from: https://old.dghs.gov.bd/index.php/bd/component/content/article?layout=edit&id=5612
[6] Bhutan, Royal Centre for Disease Control. [Internet]. [cited 2026 Jul 13]. Available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

Figure 4. The number of COVID-19 positive case, % positivity and specimen tested from integrated influenza-SARS CoV-2 sentinel surveillance systems (as of 13 July 2026).



[11] Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard. [Internet]. [cited 2026 Jul 13]. Available from: Dashboard

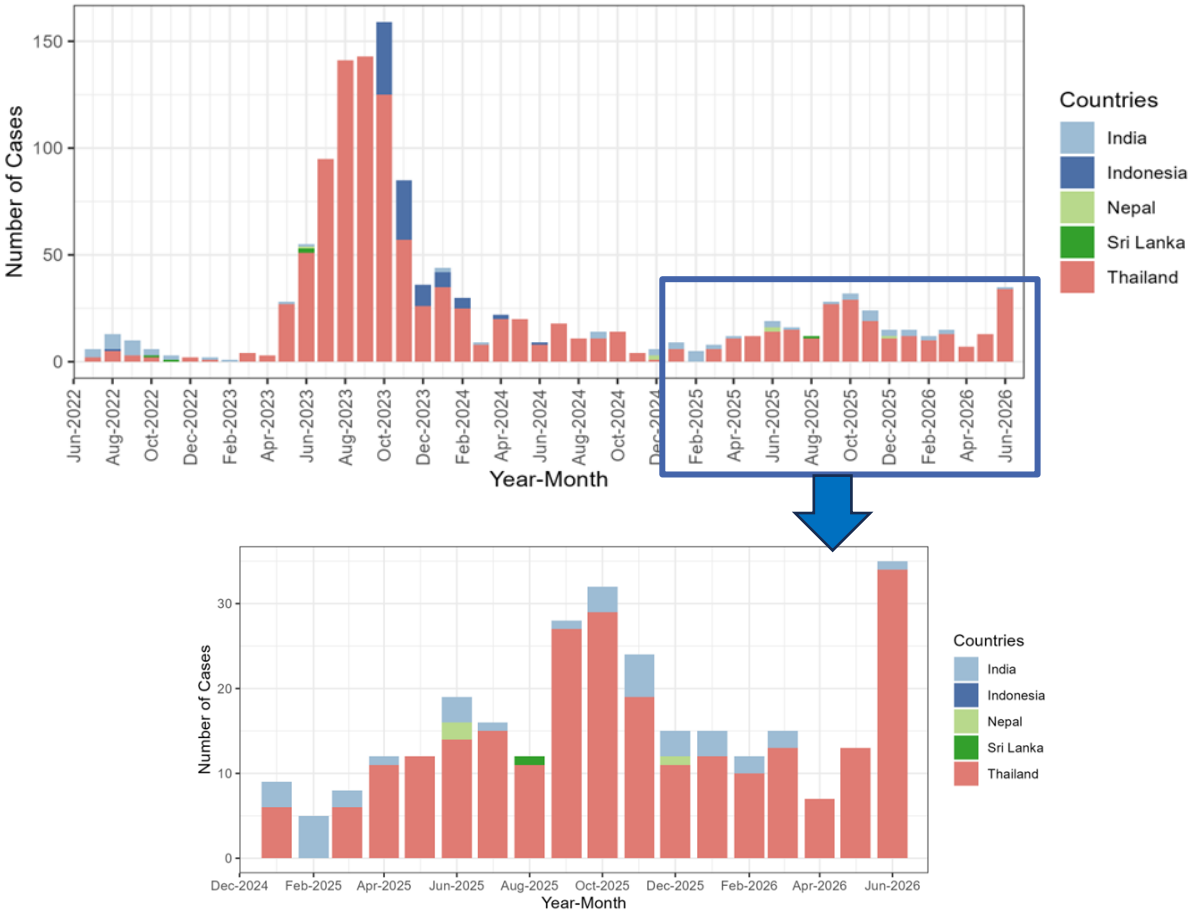
mpox

Situation in the WHO South-East Asia Region

Situation as of 13 July 2026

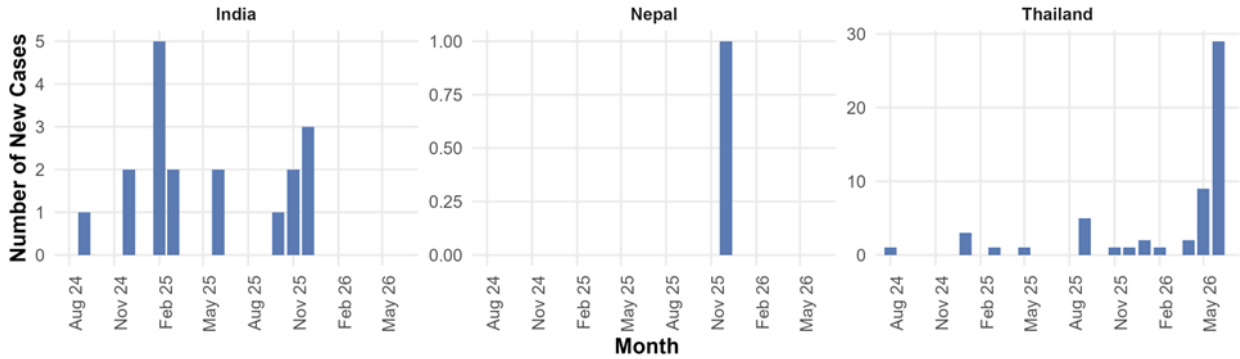
- In weeks 27 and 28 (29 June to 12 July 2026), five cases from Thailand were reported.
- As of 13 July 2026, in the WHO South-East Asia Region, a total of 1 282 laboratory-confirmed mpox cases, including 16 deaths, have been reported since 14 July 2022 (Figure 5).
- Thailand reported a total of 29 mpox virus (MPXV) clade Ib cases in the month of June with no travel history.
- Seventy-Five mpox virus (MPXV) clade Ib cases have been reported in the Region to date – 56 from Thailand, 18 from India and one from Nepal. Please see Figure 6 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 5. Number of mpox cases reported in WHO South-East Asia Region by date of notification* (Upper, 14 July 2022 – 13 July 2026; lower 1 January 2025 – 13 July 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 6. Number of MPXV clade Ib cases reported in WHO South-East Asia Region by month of notification (as of 13 July 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 13 July 2026)*.

	Category	Total (n = 75)
Country		
	India	18 (24.0%)
	Nepal	1 (1.3%)
	Thailand	56 (74.7%)
Recent international travel		
	Yes	32 (42.7%)
	No	43 (57.3%)
Age group (years)		
	18-29	23 (30.7%)
	30-39	33 (44.0%)
	40-49	18 (24.0%)
	50 and over	1 (1.3%)
Gender		
	Male	61 (81.3%)
	Female	14 (18.7%)

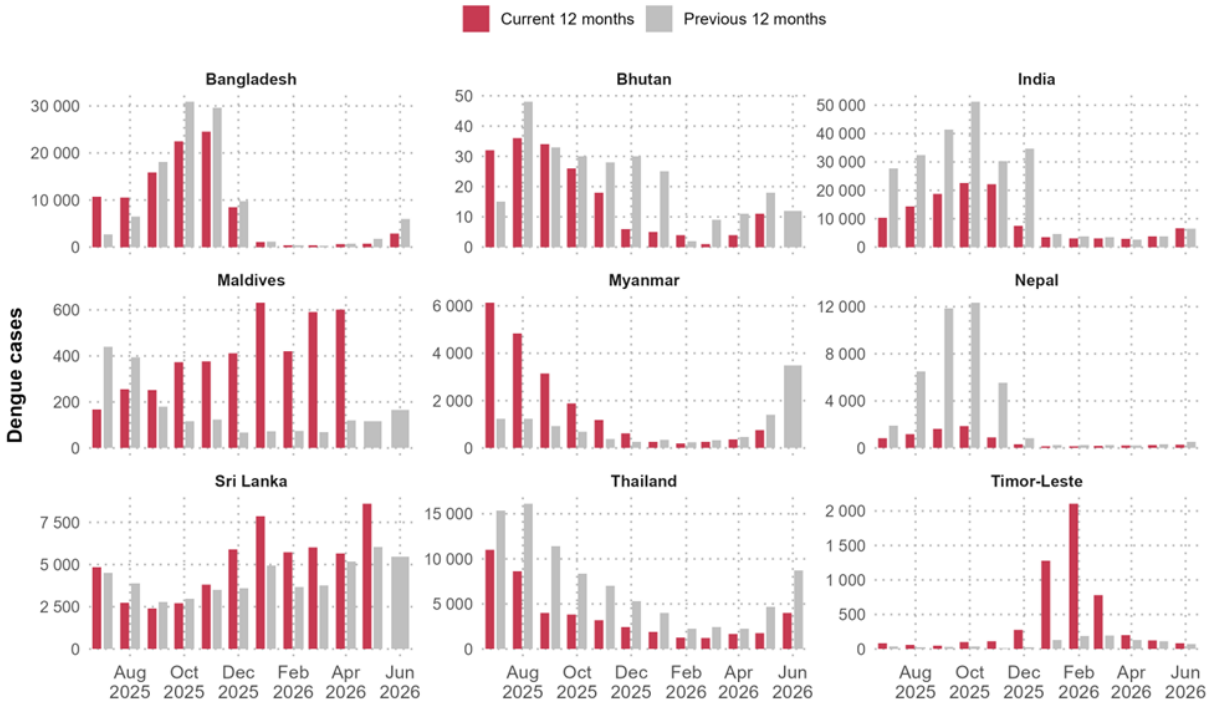
Notes: * One CRF is awaited from Nepal.

Dengue

Situation in the WHO South-East Asia Region [12]

- In June 2026, India reported 6 625 cases, Thailand reported 3 992 cases and Bangladesh reported 2 907 cases (Figure 10). Data of June were not available yet for Bhutan, Maldives, Myanmar and Sri Lanka.
- Timor-Leste recorded 84 cases in June 2026, 33% decrease compared to May 2026 (126 cases), and 14% higher than June 2025 (74 cases).

Figure 7. Monthly reported dengue cases by country, July 2025 – June 2026



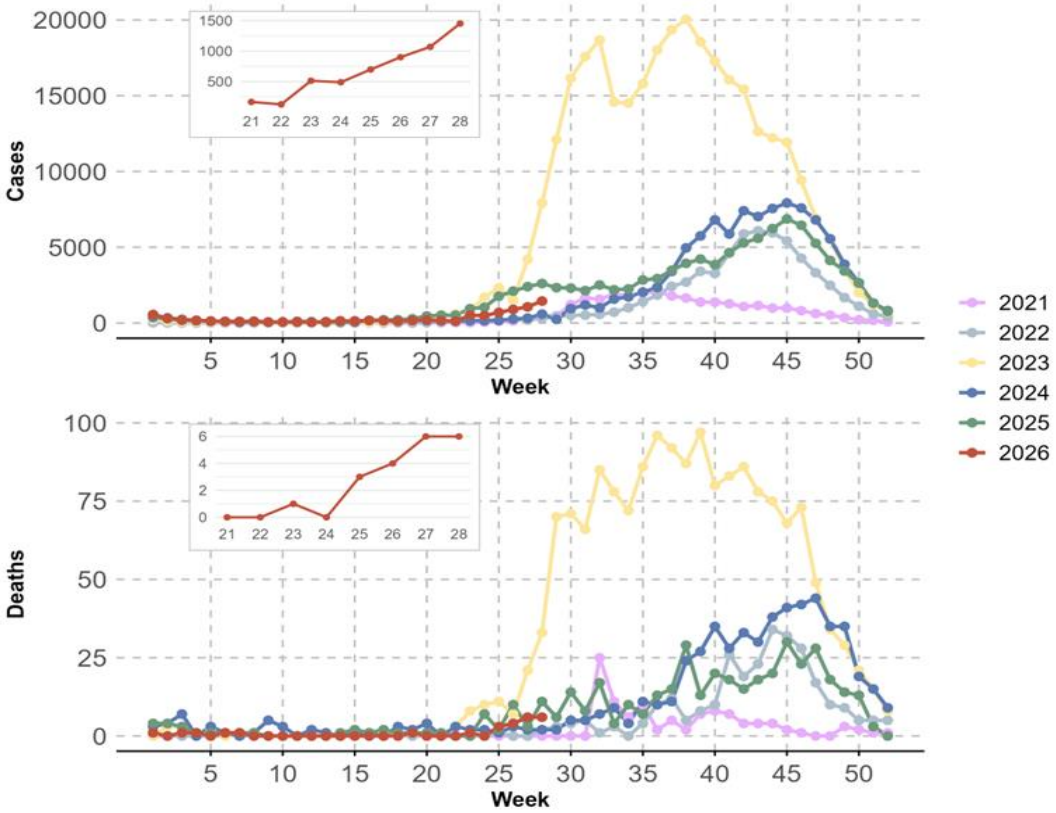
Notes:
Bangladesh, Bhutan, Indonesia, Myanmar, Thailand and Timor-Leste show confirmed cases.
Bangladesh reports only hospitalized cases.
The majority of Myanmar cases are hospitalized cases.

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

Bangladesh [13]

- In Bangladesh, during Week 28 of 2026, a total of 1 452 suspected dengue cases were reported, representing a 36% increase compared with the 1 071 cases reported in Week 27. Compared with the same week in 2025, when 2 609 cases were reported, the Week 28 caseload in 2026 was 44% lower.
- During week 28, six new dengue deaths were reported in Bangladesh, compared to six dengue deaths reported in Week 27.

Figure 8. Number of new dengue cases and deaths by week in Bangladesh from week 1 of 2021 to week 28 of 2026.



[13] 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 June 2026, a total of 6 625 cases of dengue were reported in India, a 77% increase compared to May 2026 (n = 3 747).
- In 2026, as June 2026, a total of 22 938 cases of dengue have been reported compared to 24 948 cases during the same period in 2025.

Figure 9. Number of new cases of dengue by month in India from January 2024 to June 2026

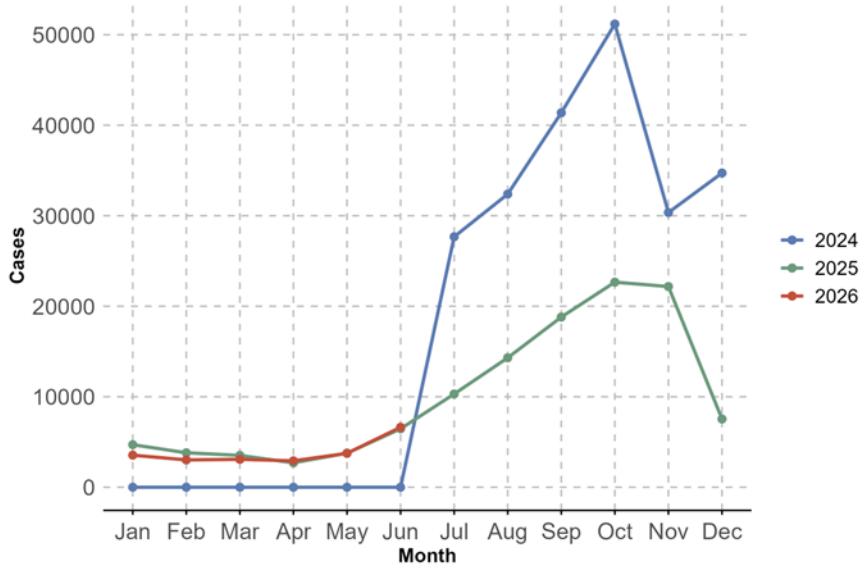
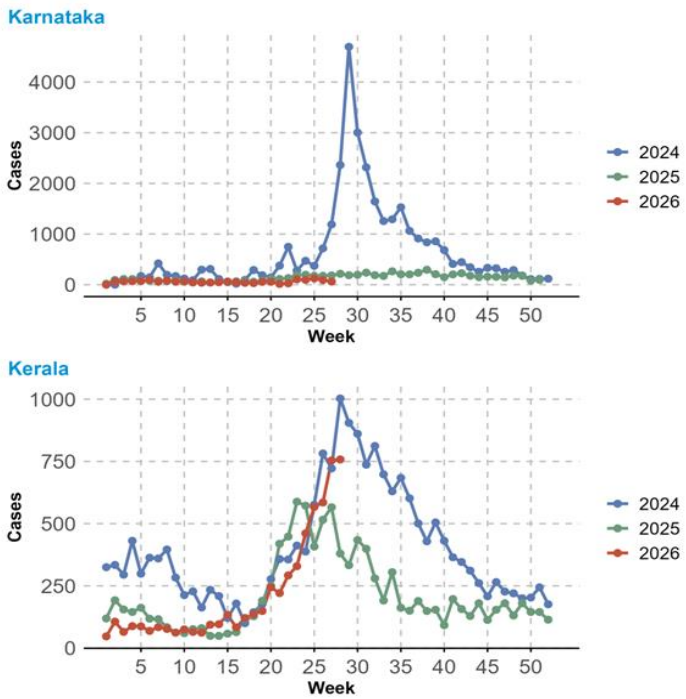


Figure 10. Weekly number of new dengue cases in Karnataka and Kerala states from week 1 of 2024 to week 28 of 2026



Karnataka[14]

- In Karnataka, during week 27, a total of 62 cases were reported, representing a 33% decrease compared to 93 cases reported in week 26.

Kerala[15]

- 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.

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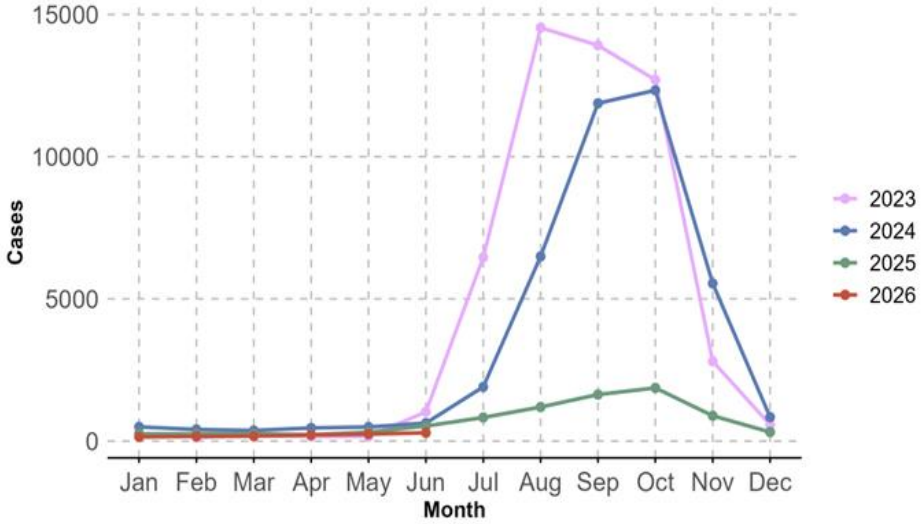
[14] Department of Health and Family Welfare, Government of Karnataka. PRISM H Disease Surveillance Dashboard [Internet]. 2026. Available from: Karnataka

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

Nepal

- In June 2026, a total of 292 dengue cases were reported in Nepal, a 18.2% increase compared to May 2026 (n = 247).

Figure 11. Number of new cases of dengue by month in Nepal from January 2023 to June 2026

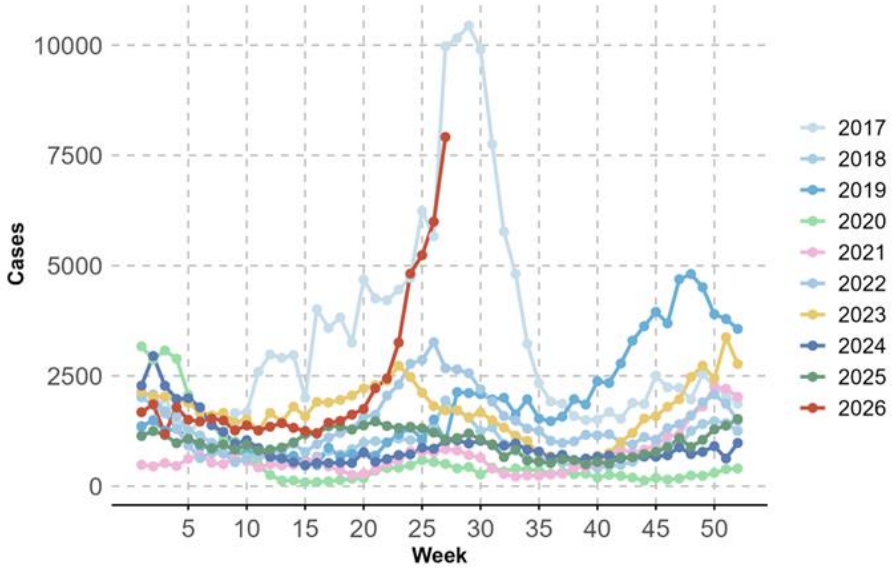


Source: WHO Global dengue surveillance

Sri Lanka [16]

- In Sri Lanka during Week 27 of 2026, a total of 7 916 suspected dengue cases were reported, representing a 32% increase compared with the 5 998 cases reported in Week 26. Compared with the same week in 2025, when 1 061 cases were reported, the Week 27 caseload in 2026 was 6.5 times higher.
- The Western Province accounted for 53.4% of total cases, with the Colombo Municipal Council (CMC) contributing 2.9%, the rest of Colombo District 18.3%.

Figure 12. Number of new dengue cases by week in Sri Lanka from week 1 of 2017 to week 27 of 2026



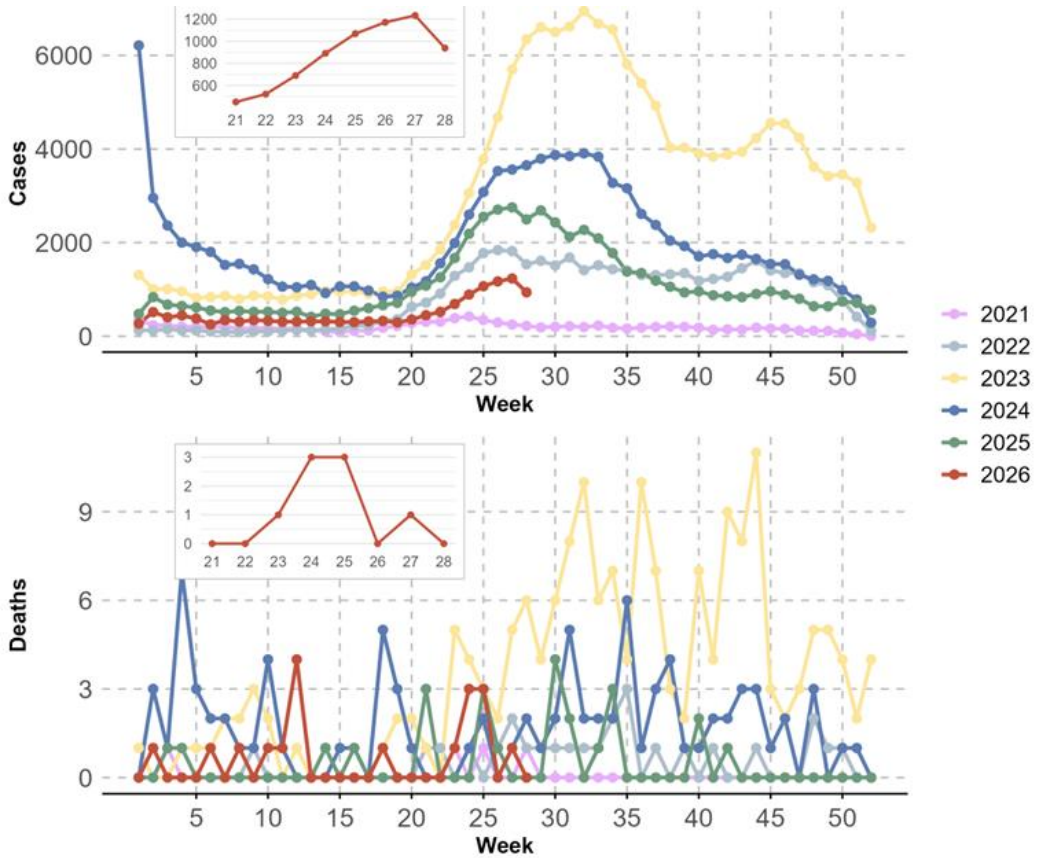
Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - 2017 to 2020; 2021 to 2025; 2026

[16] National Dengue Control Unit (NDCU), Ministry of Health, Sri Lanka. National Dengue Control Unit [Internet]. 2026 [cited 2026 July 13]. Available from: https://www.dengue.health.gov.lk/web/index.php/en/; Sri Lanka weekly Dengue update.

Thailand

- In Thailand, during Week 28 of 2026, a total of 938 suspected dengue cases were reported, representing a 24% decrease compared with the 1 233 cases reported in Week 27. Compared with the same week in 2025, when 2 496 cases were reported, the Week 28 caseload in 2026 was 62% lower.

Figure 13. Number of new cases of dengue by week in Thailand, from week one of 2021 to week 28 of 2026.



Source: WHO Global dengue surveillance