

WHO South-East Asia Region Epidemiological Bulletin

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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

India: Chandipura Virus Disease in Gujarat and Rajasthan

- According to a media report citing Gujarat State Health Department, as of 10 August 2026, Gujarat State has recorded 225 suspected Chandipura virus (CHPV) cases since 30 June 2026, of which 39 are laboratory-confirmed and 25 deaths have occurred among confirmed patients, with all cases being children under 15 years of age¹.
- The Union Ministry of Health and Family Welfare (MoHFW) deployed a National Joint Outbreak Response Team (NJORT) to Gujarat and Rajasthan on 5 August 2026, comprising experts from the National Centre for Disease Control (NCDC), the Indian Council of Medical Research (ICMR), and the Department of Animal Husbandry and Dairying (DAHD) to support outbreak investigation, epidemiological assessment, clinical management, and vector surveillance.²
- The deployment accompanied an expanded scientific investigation involving multiple ICMR institutes (Chennai, Puducherry, Pune and Hyderabad) and the Indian Council of Agricultural Research-National Institute of Veterinary Epidemiology and Disease Informatics (ICAR-NIVEDI), Bengaluru, working with the Gujarat State Health Department across epidemiology, virology, entomology and diagnostics.
- Active surveillance has been intensified for Acute Febrile Illness (AFI) and Acute Encephalitis Syndrome (AES), with community serosurveys underway.²
- Vector investigations continue to examine sandflies alongside possible roles for mosquitoes, ticks, and mites; it remains premature to attribute the outbreak to a specific vector.
- Animal surveillance (~70 samples from cattle, buffalo, and goats) is assessing potential reservoir hosts, and whole-genome sequencing has identified minor genetic variations requiring further comparative study.
- The response reflects a coordinated One Health approach integrating human, animal, and vector surveillance.²

Myanmar: Floods in Ayeyarwady³

- Continuous heavy rainfall caused river water levels to rise, resulting in flooding across Laymyethna Township, Ayeyarwady Region on 31 July 2026. Floodwaters inundated residential areas, agricultural land, roads, and public infrastructure, affecting people's safety, livelihoods, and access to essential services.
- In response, the Myanmar Red Cross Society (MRCS) Ayeyarwady Region activated trained National Disaster Response Team (NDRT) members to conduct a Rapid Needs Assessment using available resources under the MRCS Emergency Management Fund (EMF).
- A rapid assessment found approximately 20,317 people across 16 villages were affected, causing widespread displacement and damage to homes and livelihoods. The flooding has forced many families to seek temporary shelter, while others remain in their communities or are staying with relatives as they continue to monitor the evolving flood situation.
- A total of nine temporary relief camps have been established, currently accommodating 441 households (approximately 1,411 people).
- In addition, around 1,200 houses have been affected by the flooding, highlighting the significant impact on local communities. The assessment also reported six missing persons, underscoring the humanitarian concerns arising from the disaster.

¹ <https://www.thip.media/news/gujarat-records-225-suspected-chandipura-cases-death-toll-rises-to-25/150853/>

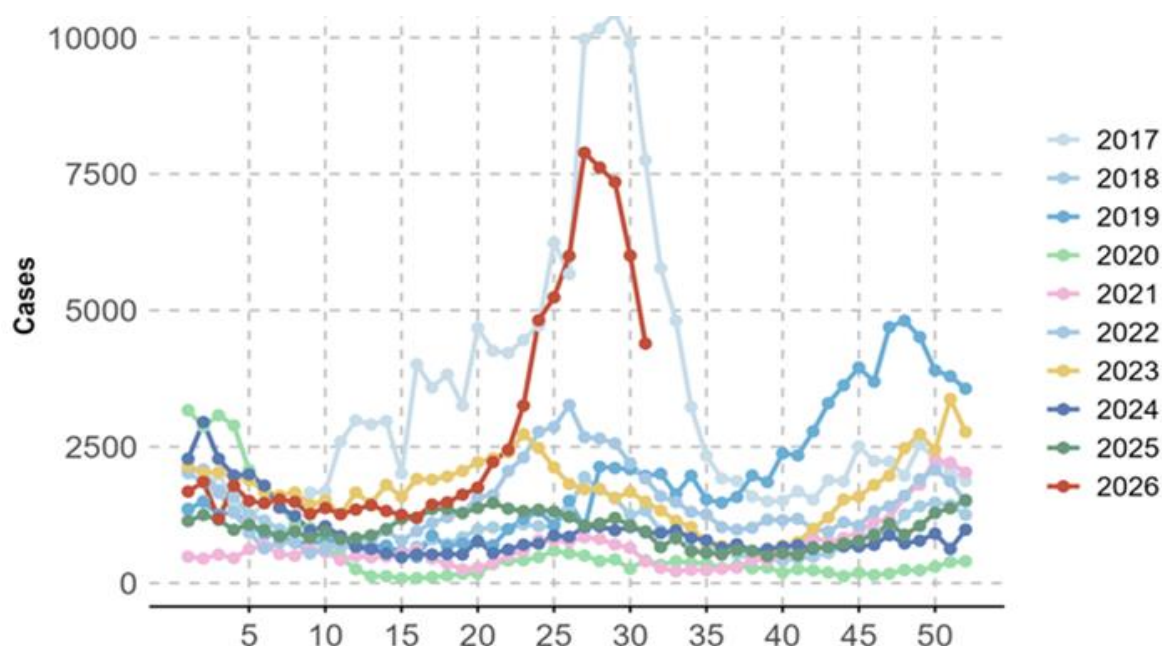
² <https://www.pib.gov.in/PressReleasePage.aspx?PRID=2294690>

³ <https://reliefweb.int/report/myanmar/mmr-flood-07-2026-monsoon-flood-2026-08-05>

Sri Lanka: Dengue⁴

- Sri Lanka has recorded 90 695 cumulative dengue cases and 65 deaths (CFR 0.07%) in 2026 to date.
- Suspected cases declined by 26.9% in week 31, falling from 6 004 to 4 391, continuing a downward trend from the week 27–29.
- The Western Province remains the epicenter of transmission.
- Outside the Western Province, Kandy (8.9%), Galle (5.6%), Matara (4.7%), and Kegalle (3.9%) reported the next-highest case burdens, though all four districts declined week-on-week. Case increases were instead reported in Jaffna, Vavuniya, Mullaitivu, Batticaloa, and Trincomalee.

Figure 1. Number of New Dengue Cases by Week in Sri Lanka, Week 1 of 2017 to Week 31 of 2026

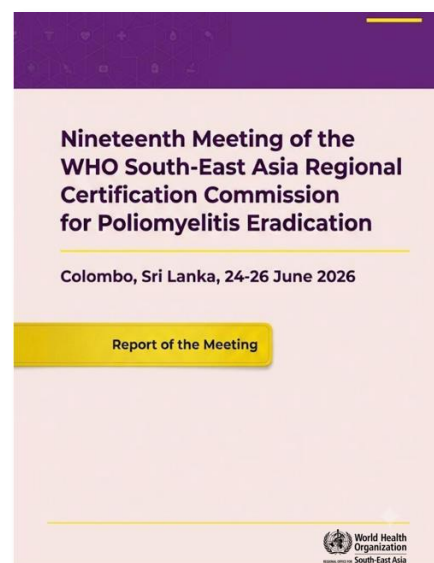


Source: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - [2017 to 2020](#); [2021 to 2025](#); [2026](#)

⁴ <https://www.dengue.health.gov.lk/#latest-update>

New publication: Nineteenth Meeting of the WHO South-East Asia Regional Certification Commission for Poliomyelitis Eradication⁵

- The WHO South-East Asia Regional Certification Commission for Poliomyelitis Eradication (SEA-RCCPE) provides independent oversight of the Region's polio eradication programme.
- At its 19th meeting in June 2026, the Commission reviewed reports from the National Certification Committees for Poliomyelitis Eradication (NCCPEs) of Member States and assessed progress in maintaining wild poliovirus-free status, monitoring vaccine-derived polioviruses, advancing poliovirus laboratory containment, and implementing polio transition activities.
- The Commission concluded that the WHO South-East Asia Region continues to maintain its polio-free status, with no evidence of wild poliovirus (WPV) circulation in the Region.
- The report presents the conclusions and recommendations of the SEA-RCCPE, including actions to support continued maintenance of the Region's polio-free status.



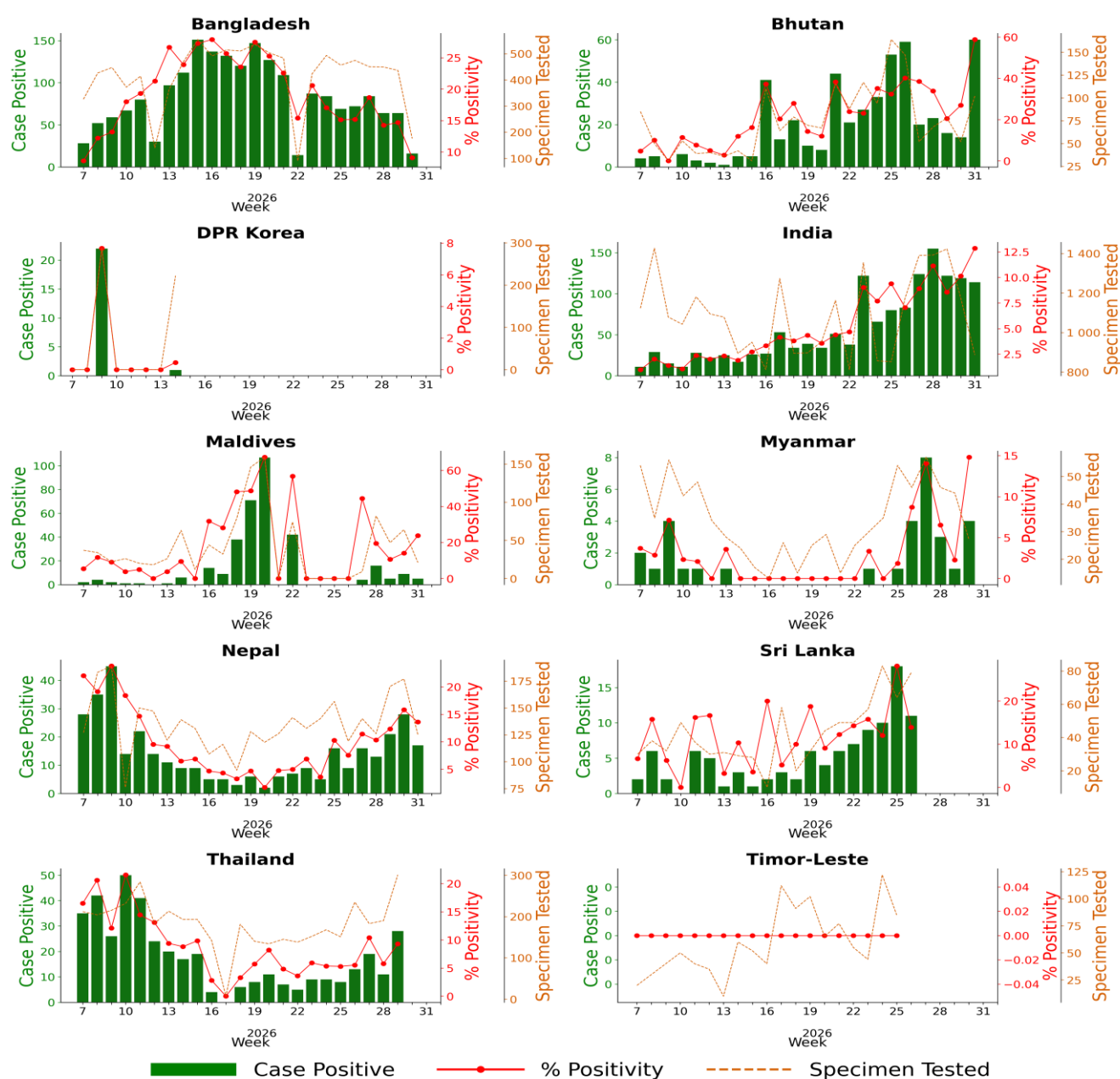
⁵ <https://www.who.int/publications/i/item/sea-hdc-5>

Situation in the WHO South-East Asia Region

Situation as of 10 August 2026⁶

- Figure 3 shows the influenza data from the WHO FluNet platform, accessed on 10 August 2026.
- In the WHO South-East Asia Region, during weeks 30-31, there were 386 influenza positive samples.
- Among 2 804 samples tested from six countries, the overall positivity was 14%.
- Bhutan reported relatively high percentage of test positivity in the region with 48% while Maldives reported 16% (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 10 August 2026



Source: RespiMart/FluNet

⁶ World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 Aug 10]. 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 30 to 31 in 2026, as of 10 August 2026 ⁷

- Table 1 shows influenza A virus subtypes and B lineages distribution across ten countries in the WHO South-East Asia Region for weeks 30 to 31 of 2026, based on data extracted from WHO's RespiMart platform on 10 August 2026. The last submission was on 27 July 2026 (Week 31).
- DPR Korea, Maldives, Sri Lanka, Thailand, and Timor-Leste reported "no samples tested" during this period. Two countries in the region tested samples less than the WHO recommended minimum (50 samples per week at the national level) for this 2-week period spanning weeks 30-31.
- The overall positivity percentage for the region was 14%. This was a 27% increase 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 (48%; up from 27%) and Maldives (16%; unchanged from 16%). Compared with the previous reporting period, influenza test positivity increased by 78% in Bhutan while it was unchanged by 0% in Maldives.
- At the regional level, influenza A and influenza B accounted for 86% and 14% of all influenza-positive samples, respectively. In the previous reporting period, the corresponding distribution was 86% for influenza A and 14% for influenza B.
- The predominant Influenza A subtype detected in the region was A (H1N1)pdm09, accounting for 74% of all influenza-positive samples.
 - Among countries that reported ≥ 10 positive samples, A(H3) was the predominant subtype in Bangladesh (100%).
 - The subtype A(H1N1)pdm09 was predominant in Bhutan (99%) and India (82%).
 - In Nepal (47%), positive samples were influenza A not subtyped.
- Influenza B (Victoria lineage) accounted for 13% of all influenza-positive samples in the region, compared with 14% in the previous reporting period - a 7% relative reduction compared with the preceding period.
 - Among countries that reported ≥ 10 positive samples, B lineage predominated in Maldives (86%).
 - The proportion of influenza B (Lineage not Determined) was reported in Nepal (4%).

Table 1. Distribution of influenza A virus subtypes and B virus lineages in the WHO South-East Asia Region* (weeks 30 to 31, 2026), situation as of 10 August 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	2 804	386	14%	0%	7%	0%	74%	5%	0%	13%	1%
Bangladesh	176	16	9%	0%	100%	0%	0%	0%	0%	0%	0%
Bhutan	154	74	48%	0%	0%	0%	99%	0%	0%	1%	0%
DPR Korea	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
India	2 060	233	11%	0%	2%	0%	82%	0%	0%	16%	0%
Maldives	85	14	16%	0%	7%	0%	7%	0%	0%	86%	0%
Myanmar	27	4	15%	0%	100%	0%	0%	0%	0%	0%	0%
Nepal	302	45	15%	0%	4%	0%	42%	47%	0%	2%	4%
Sri Lanka	0	0	0%	0%	0%	0%	0%	0%	0%	0%	0%
Thailand	0	0	0%	0%	0%	0%	0%	0%	0%	0%	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%.

⁷ World Health Organization. Influenza surveillance outputs [Internet]. 2026 [cited 2026 Aug 10]. Available from: <https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs>

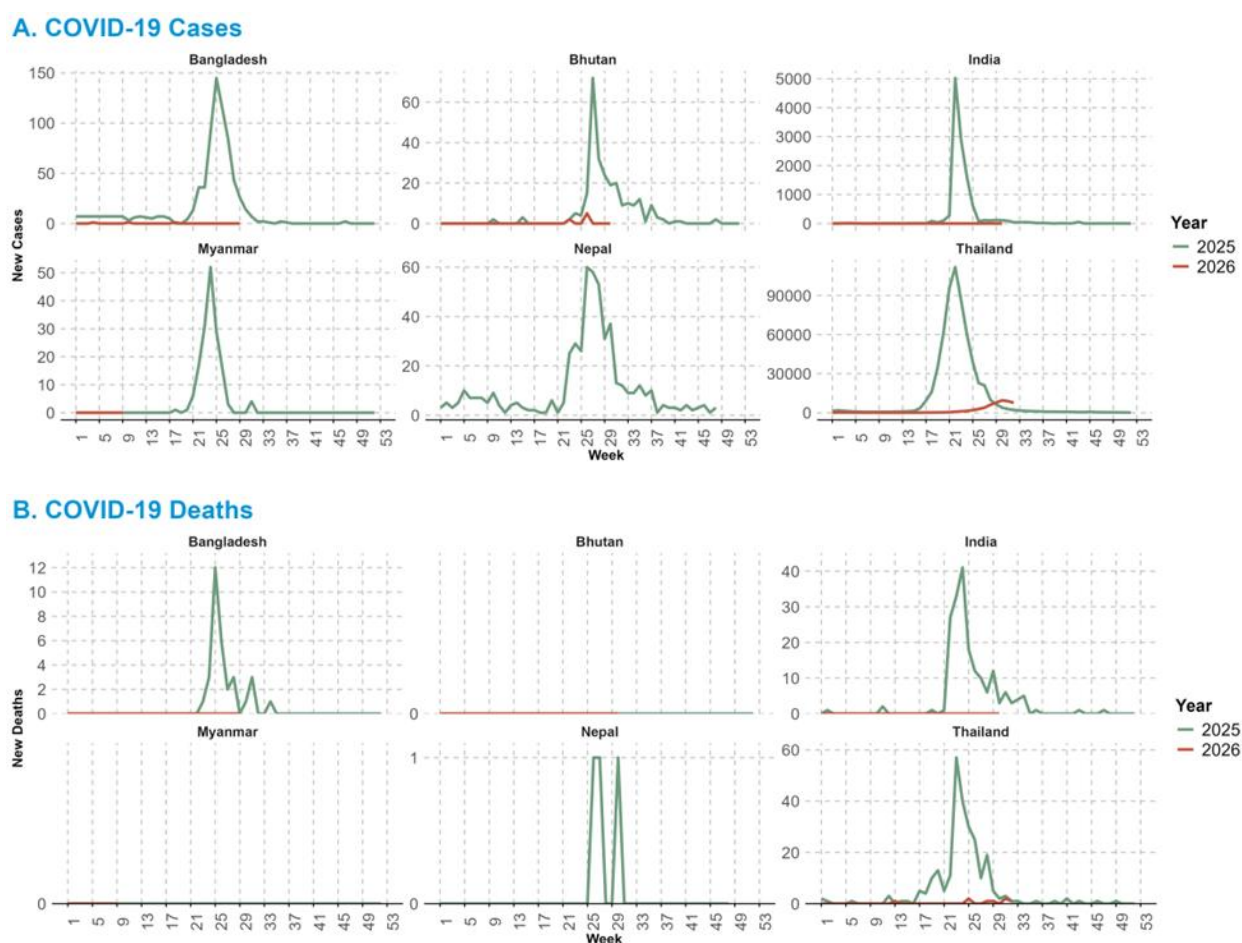
COVID-19

Situation in the WHO South-East Asia Region

Situation as of 10 August 2026

- The weekly number of COVID-19 cases reported on official websites, including Bangladesh⁸, Bhutan⁹, India¹⁰, Myanmar¹¹, Nepal¹² and Thailand¹³, are presented in Figure 4**.
- Data of the most recent week (week 32) 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 32 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 28 of 2026.

** Bangladesh, Bhutan, India and Myanmar data are presented by ISO Week. Nepal and Thailand data are presented by Epidemiological week.

⁸ Directorate General of Health Services (DGHS), Bangladesh. COVID-19 Dashboard [Internet]. 2026 [cited 2026 Aug 10]. Available from: <https://old.dghs.gov.bd/index.php/bd/component/content/article?layout=edit&id=5612>

⁹ Bhutan, Royal Centre for Disease Control. [Internet]. [cited 2026 Aug 10]. Available from: <https://www.rcdc.gov.bt/web/>

¹⁰ Ministry of Health and Family Welfare, Government of India. COVID-19 India Dashboard [Internet]. [cited 2026 Aug 10]. Available from: <https://covid19dashboard.mohfw.gov.in/>

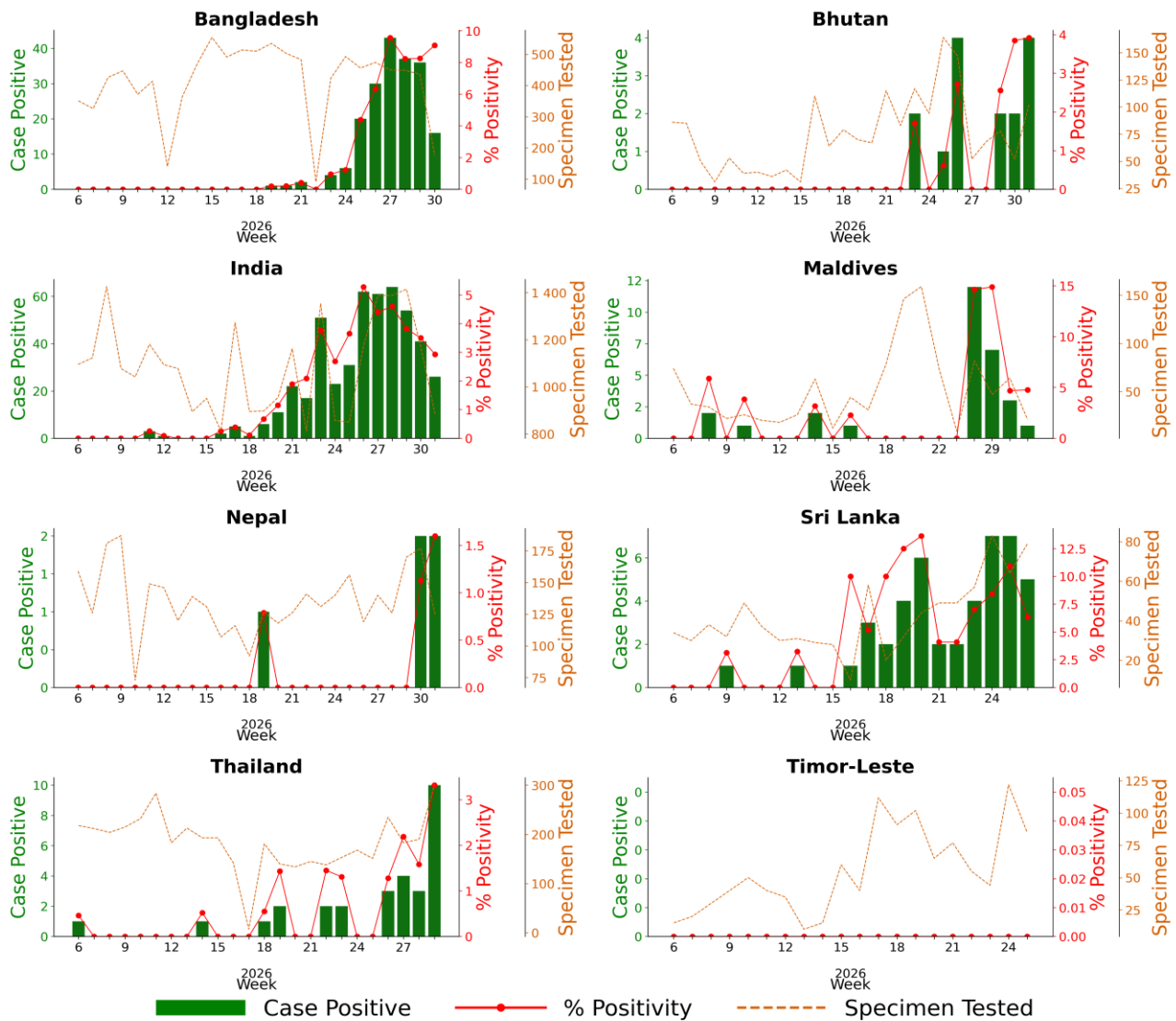
¹¹ Ministry of Health, Republic of the Union of Myanmar. Ministry of Health official website [Internet]. 2026 [cited 2026 Aug 10]. Available from: <https://www.mohs.gov.mm/>

¹² Epidemiology and Disease Control Division Nepal. [Internet]. [cited 2026 Aug 10]. Available from: <https://edcd.gov.np/newsroom/outbreak>

¹³ Department of Disease Control, Ministry of Public Health, Thailand. COVID-19 Surveillance Dashboard [Internet]. 2026 [cited 2026 Aug 10]. 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 5 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.¹⁴

Figure 4. The number of COVID-19 positive case, % positivity and specimen tested from integrated influenza-SARS CoV-2 sentinel surveillance systems (as of 10 August 2026).



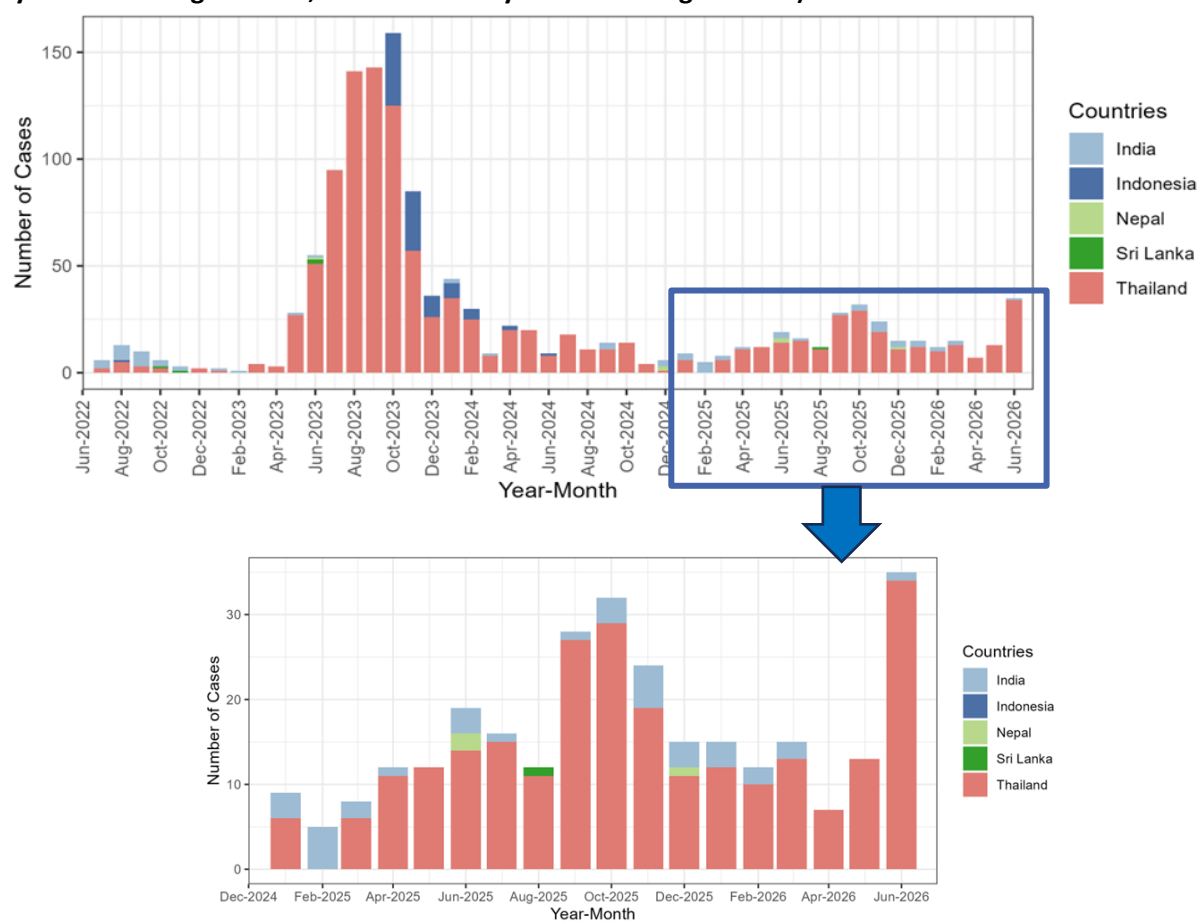
¹⁴ Integrated Influenza and Other Respiratory Viruses Surveillance Output Dashboard. [Internet]. [cited 2026 Aug 10]. Available from: [Dashboard](#)

Situation in the WHO South-East Asia Region

Situation as of 10 August 2026

- In week 31 and 32 (27 July to 09 August 2026), no new mpox were reported.
- As of 10 August 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 6).
- 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 7 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 – 10 August 2026; lower 1 January 2025 – 10 August 2026).

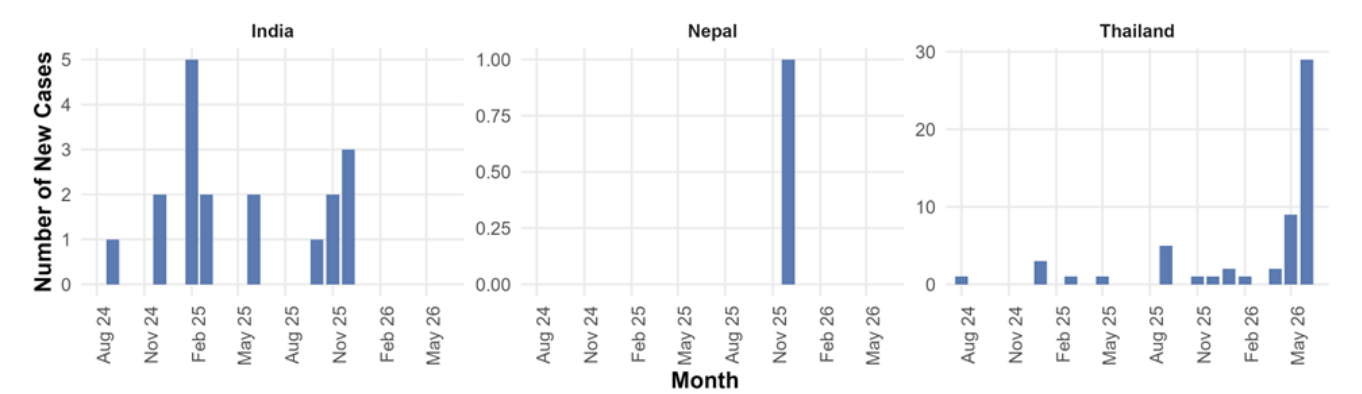


Notes:

* 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 10 August 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 10 August 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.

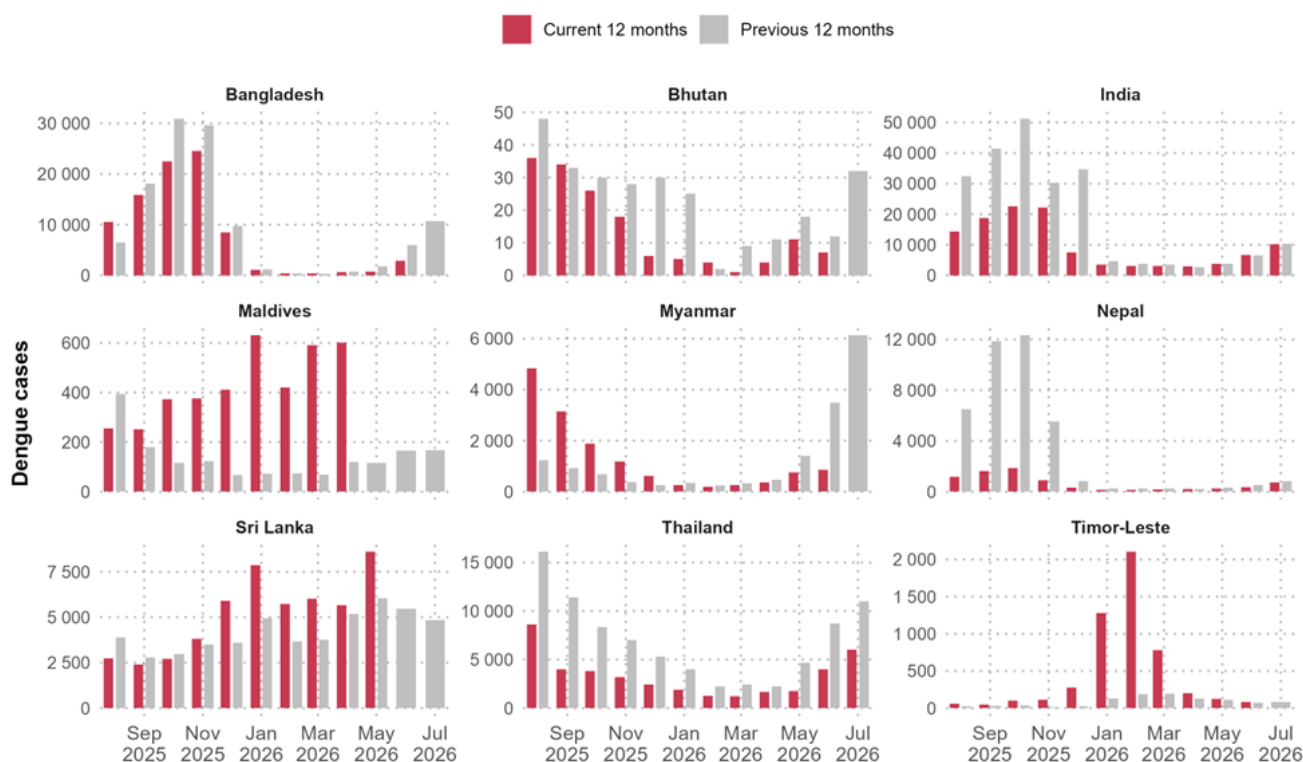
Dengue

Situation in the WHO South-East Asia Region ¹⁵

Situation as of 10 August 2026

- In July 2026, India reported 10 122 cases, Thailand reported 6 004 cases and Nepal reported 732 cases (Figure 8). Data of July were not available yet for Bangladesh, Bhutan, Maldives, Myanmar, Sri Lanka and Timor-Leste.

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



Notes:

Bangladesh, Bhutan, Indonesia, Myanmar, Thailand and Timor-Leste show confirmed cases.

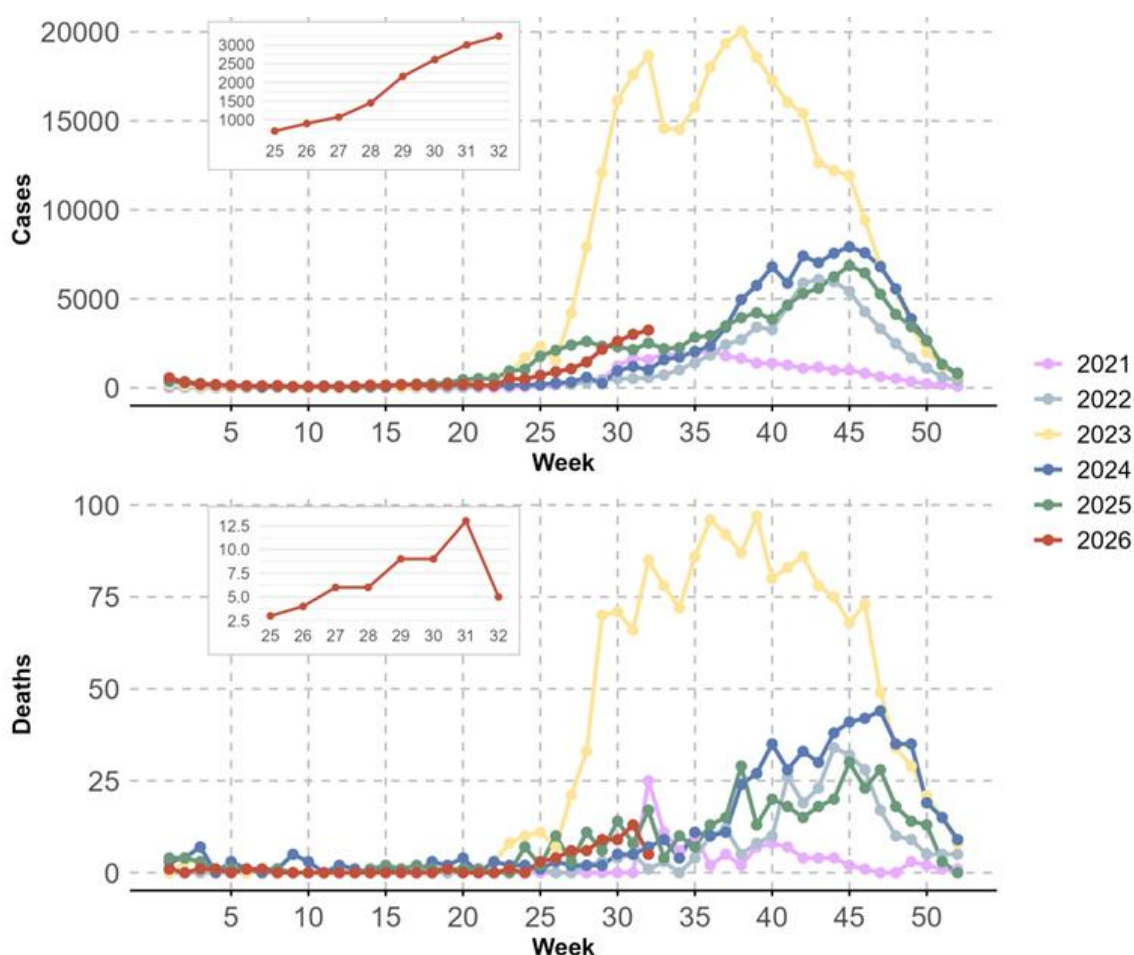
Bangladesh reports only hospitalized cases.

The majority of Myanmar cases are hospitalized cases.

¹⁵ World Health Organization. Global dengue surveillance [Internet]. Available from: https://worldhealthorg.shinyapps.io/dengue_global/

- In Bangladesh, during Week 32 of 2026, a total of 3 241 suspected dengue cases were reported, representing a 8% increase compared with the 3 006 cases reported in Week 31. Compared with the same week in 2025, when 2 513 cases were reported, the Week 32 caseload in 2026 was 29% higher.
- During week 32, five new dengue deaths were reported in Bangladesh, representing a 61.5% decrease compared to thirteen dengue deaths reported in Week 31.

Figure 8. Number of new dengue cases and deaths by week in Bangladesh from week 1 of 2021 to week 32 of 2026



¹⁶ 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>

- During July 2026, a total of 10 122 cases of dengue were reported in India, a 53% increase compared to June 2026 (n = 6 625).
- In 2026, as of July 2026, a total of 33 060 cases of dengue have been reported compared to 35 250 cases during the same period in 2025.

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

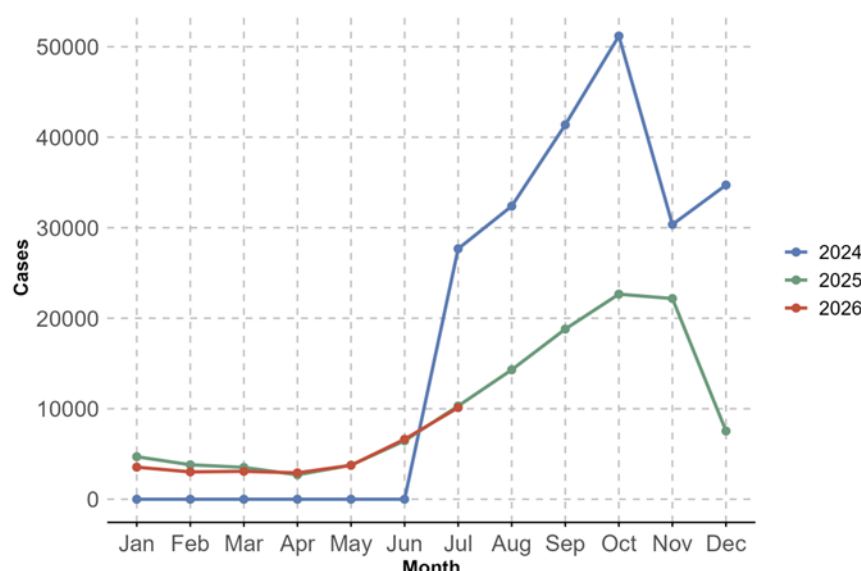
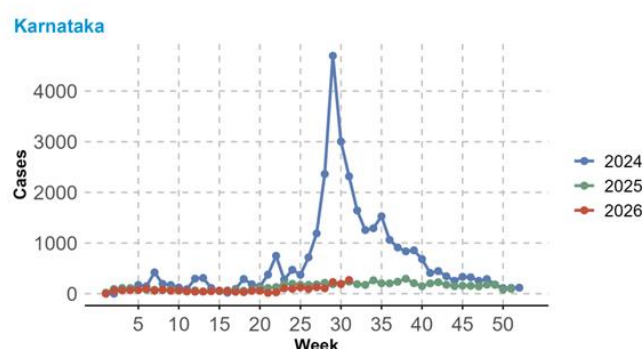


Figure 10. Weekly number of new dengue cases in Karnataka and Kerala states from week 1 of 2024 to week 32 of 2026

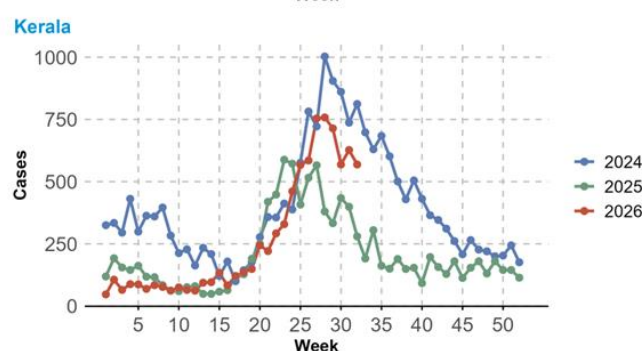
Karnataka¹⁷

- In Karnataka, during week 31, a total of 270 cases were reported, representing a 44% increase compared to 188 cases reported in week 30.



Kerala¹⁸

- In 2025, cases increased steadily from week 17, but case numbers have declined since week 27.
- In 2026, again cases increased steadily from week 16 but starting to decline from week 29.



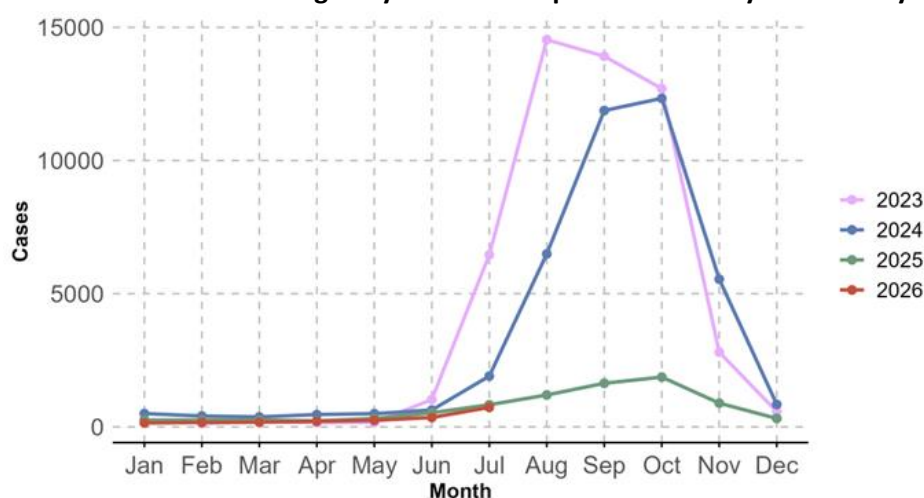
¹⁷ Department of Health and Family Welfare, Government of Karnataka. PRISM H Disease Surveillance Dashboard [Internet]. 2026. Available from: [Karnataka](#)

¹⁸ Department of Health and Family Welfare, Government of Kerala. Health Dashboard – Integrated Disease Surveillance Programme (IDSP) [Internet]. 2026. Available from: [Kerala](#)

Nepal

- In July 2026, a total of 732 dengue cases were reported in Nepal, a 109% increase compared to June 2026 (n = 351).

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

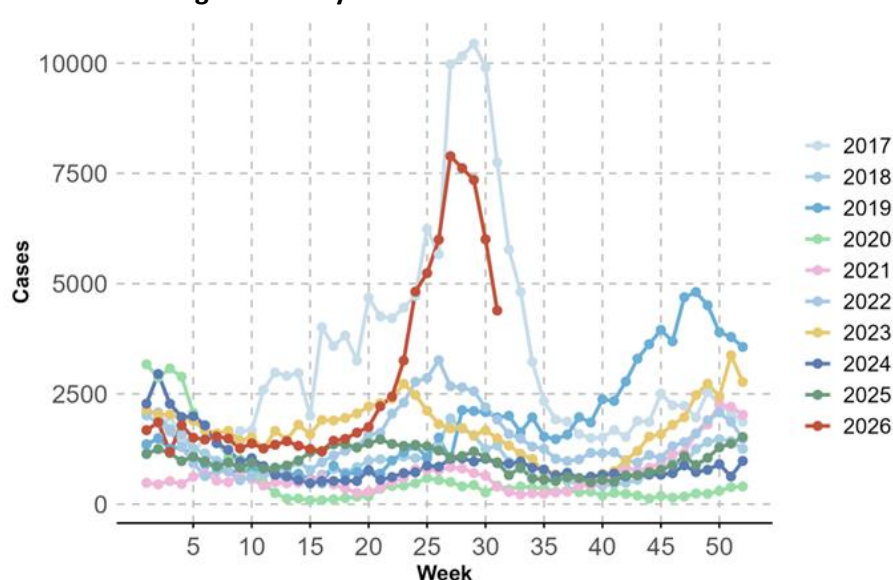


Source: [WHO Global dengue surveillance](#)

Sri Lanka¹⁹

- In during Week 31 of 2026, a total of 4 391 suspected dengue cases were reported, representing a 27% decrease compared with the 6 004 cases reported in Week 30. Compared with the same week in 2025, when 948 cases were reported, the Week 31 caseload in 2026 was 3.6 times higher.
- The Western Province accounted for 52.5% of total cases, with the Colombo Municipal Council (CMC) contributing with 3.8% of cases, and the rest of Colombo District with 19%.

Figure 12. Number of new dengue cases by week in Sri Lanka from week 1 of 2017 to week 31 of 2026

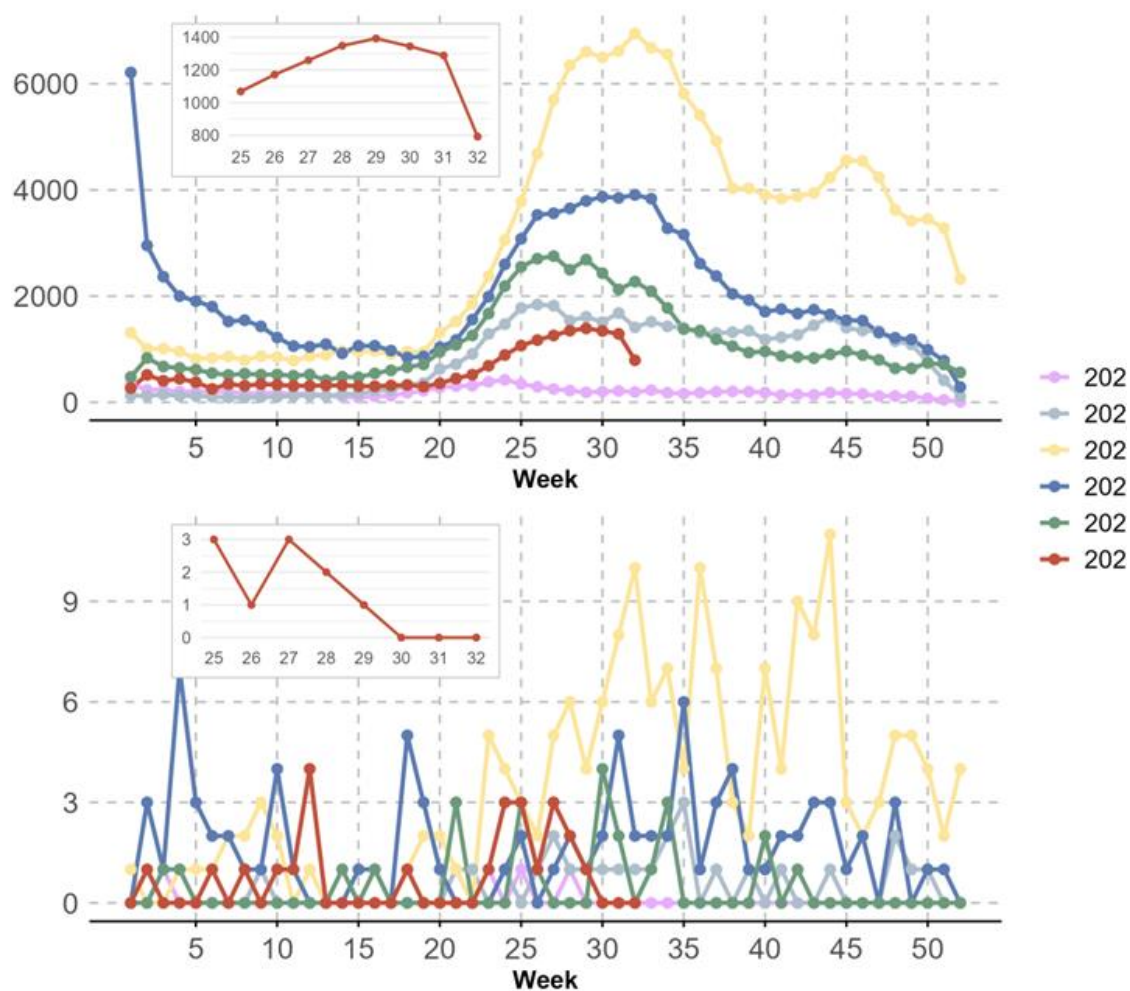


Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health - [2017 to 2020](#); [2021 to 2025](#); [2026](#)

¹⁹ National Dengue Control Unit (NDCU), Ministry of Health, Sri Lanka. National Dengue Control Unit [Internet]. 2026 [cited 2026 Aug 30]. Available from: <https://www.dengue.health.gov.lk/web/index.php/en/>; Sri Lanka weekly Dengue update.

- In Thailand, during Week 32 of 2026, a total of 792 suspected dengue cases were reported, representing a 39% decrease compared with the 1 288 cases reported in Week 31. Compared with the same week in 2025, when 2 273 cases were reported, the Week 32 caseload in 2026 was 65% lower.

Figure 13. Number of new cases of dengue by week in Thailand, from week one of 2021 to week 32 of 2026.



Source: [WHO Global dengue surveillance](https://www.who.int/dengue-surveillance)