



Viet Nam Coronavirus Disease 2019 (COVID-19) Situation Report #27

24 January 2021 Report as of 24 January 2021



Viet Nam COVID-19 Situation Report #27

24 January 2021 Report as of 24 January 2021, 18:00

Situation Summary

Highlights of Current Situation Report

- It has been 54 days after the last locally transmitted case reported from the HCMC related cluster. All lockdowns lifted in the affected areas in HCMC since 16 Dec 2020.
- More than 10,000 samples tested negative for the second time from all government officials and support staff who are involved in the 13th National Party Congress which commences on Monday 25 Jan. As per the government policy, all involved personnel would have to undertake two SARS-CoV-2 tests (first test is within 7 days and second test is 1-2 days before the Congress's commencement).
- 21 Jan- the second Viet Nam produced COVID-19 vaccine (COVIVAC) by Institute of Vaccine and Medical Biologicals (IVAC) has entered a human-clinical trial, nearly two months ahead of schedule. The first vaccine (NanoCovax) trial is ongoing.
- o Monitoring incoming travellers and early detection of illegal immigrants through unofficial/open passes along the border are of priority as the Vietnamese New Year (Tet) is approaching.
- Update from past 7 days:
 - From the last report (14 Jan), from 15 24 Jan 2021¹, 17 new laboratory-confirmed cases of COVID-19 have been reported (23% decrease compared to last week), all were imported cases, and without any additional deaths. These included 13 Vietnamese and four foreigners.
 - During the week, number of RT-PCR conducted daily was approximately 3,300 RT-PCR tests, bringing total number of tests conducted to 1,473,697 since the beginning of the outbreak.
- As of 24 Jan 2021, Viet Nam has reported a total of **1,548 laboratory confirmed cases** of COVID-19, including 37 health care workers (HCWs), from 46 out of 63 cities/ provinces in country, including **35 deaths** (CFR ~ 2.3%) (see *Figure 1*). All the 35 death cases were related to the community outbreak in Da Nang (31 from Da Nang, 3 from Quang Nam and 1 from Quang Tri); most of them had long-term chronic diseases and comorbidities.
 - Of the 1,548 cases, 887 cases (57%) are imported. About 90.4% are Vietnamese (see Figure 2).
 - The ages of cases range from 2 months to 100 years old. About 61% of all cases are in the 30-69 years old group, 4% above 70 years old, and the remaining 35% under 30 years old. The proportion of male vs female is around 54% vs 46%. (See *Table 1*).
 - 159 clusters have been recorded including from households, schools, workplaces, bus/train stations and all clusters have been brought under control.
- 1,411 cases (91.1%) have recovered. Three patients are in severe condition and one in critical condition (case #1536, a 79-yro-female who returned from the U.S. on 13 Jan, and having comorbidities including DM-2, hypertension, heart failure). Among those, 31 cases have tested negative at least once.
- Numbers of quarantine:
 - A total of approximately 20,500 people are currently placed under quarantine.
 - Cumulatively: from beginning of the outbreak to date, a total of 10,661,675 people have been placed under quarantine. Of those 216,257 were quarantined in HCFs; 4,677,267 were centralized quarantined; and 5,768,151 were under self-/home quarantine.

¹ Starting from 15 Jan, the country Sitrep is switched to epi week interval (Mon-Sun)





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Previously reported:

- The country re-affirms to accelerate active measures to achieve dual objectives of economic development and disease control and moving toward a "safe coexistence with COVID-19", especially for the upcoming 13th National Communist Party Congress and Tet holidays.
- **13** Jan in preparation for the **upcoming 13th National Party Congress**, the Prime Minister issued an official letter requesting ministries and localities to i) review possible scenarios for COVID-19 prevention and control; ii) assign officials to temporarily replace the members of Provincial Steering Committee for COVID-19 prevention and control those will be attending the Party Congress.
- 9 Jan considering the ongoing reported new variants of SARS-CoV-2, the Office of the Government issued a
 letter No. 208/ VPCP-QHQT emphasizing the Prime Minister's direction on maximum restriction of rescue
 flights to Viet Nam. In case of real necessity, five Ministries including Ministry of Health. Ministry of Foreign
 Affairs, Ministry of Defence, Ministry of Public Security and Ministry of Transportation to report to Prime
 Minister for a final approval.
- Viet Nam is among more than 40 countries that have entered the clinical trials in human for COVID-19 vaccines. On 14 Jan, the Military Medical Academy started giving dose 2 of Nano Covax vaccine (25 mcg) to three volunteers of group 1 upon 28 days after dose 1 was given. Meanwhile 10 other volunteers had received dose 1 (75 mcg). Phase 2 of the clinical trial is scheduled in mid-February 2021 with two doses.
- The **full genome sequencing** results conducted by NIHE on **three SARS-CoV-2 positive patients (cases #1483, #1484 and #1485, reported on 2 Jan) who came from South Africa on 31 Dec via flight QR976 revealed new variant from South Africa.** All the three cases remained asymptomatic and under treatment at National Hospital of Tropical Diseases (NHTD #2).
- 2 Jan 2021 MOH/ PI HCM reported a detection of the UK variant (VOC 202012/01) of SARS-COV-2 in a 45-yro-female (case #1435), a resident of Tra Vinh province who returned to Viet Nam from the UK on 22 Dec via flight VN50. All the 305 passengers from this flight were quarantined upon the arrival in Tra Vinh (147 people), Vinh Long (137 people), Can Tho (17 people) and HCMC (4 people). Six people were tested positive: cases #1429, #1430; #1431 and #1432 (in Vinh Long) and cases #1434 and #1435 (in Tra Vinh). Full genome sequencing of case #1435 revealed variant VOC 202012/01 that was reported from the UK. The patient had mild symptoms with fever and sore throat and was tested positive on 24 Dec by PI HCM. She had a history of hypertension for 10 years. She is being treated at the TB and Lung Disease hospital of Tra Vinh province with symptoms gradually subsided from 24 Dec till now.

Other key updates

- 21 Jan Launching ceremony of the first phase of clinical trials of the second locally manufactured COVID-19 vaccine COVIVAC (by IVAC company) at the Hanoi Medical University (HMU). The first phase will be implemented at HMU with 120 volunteers to be recruited and divided into 5 groups. Three groups will receive a dose without adjuvants of 1, 3, and 10 mcg respectively; one group will receive a dose of 1mcg with adjuvants, and one group will receive placebo. Each volunteer will receive two doses of 28 days apart. It is expected that the first volunteer will receive trial vaccine in early Feb.
- o **19 Jan** The NSC issued a guidance on handover, management upon the completion of centralized quarantine. It guides local authorities on how to minimize the risk of infection during travel from the quarantine facility to home and guide people to self-monitor their health situation for additional 14 days at home/residence.
- o 15 Jan Deputy Prime Minister Vu Duc Dam directed at the NSC meeting that the policy of less than 14-day quarantine for incoming foreigners is no longer applied. Those coming from countries/territories that have reported new SARS-CoV-2 variants must be quarantined for more than 14 days; no quarantine fees at centralized facilities managed by Ministry of Defence for Vietnamese people who enter the country via ground crossings.
- 8 Jan Viet Nan has submitted the COVID-19 Vaccine Request Form to GAVI and COVAX Facility with the signatures from Ministry of Health and Ministry of Finance for targeted population groups.





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- 5 Jan the Prime Minister issued the Directive No.01/CT-TTg on strengthening prevention and control of COVID-19 which emphasized border control activities particularly through unofficial/ open passes along the border AND a temporary suspension of incoming flights from the countries/ territories that have reported new SARS-CoV-2 variants, starting with the U.K. and South Africa for now.
- O 31 Dec 2020 National Steering Committee established five supervision teams to assess immigration, quarantine and monitoring operations for technical experts/ their family members and repatriated Vietnamese citizens entering the county in Ha Giang, Lao Cai, Quang Ninh, Da Nang, Khanh Hoa, Dong Thap, Can Tho, Dak Lak and Gia Lai. These teams will be led by leaders of MOH (Ministers and Vice Ministers) and Departments (GDPM, VAMS); members are representatives from concerned institutes, departments and hospitals; field visits to be conducted between 4 22 Jan 2021 >>> ongoing.
- Continue to review and adjust NPIs to suit the current outbreak situation and changing travel/ trade opening-up policies including the latest outbreak event in HCMC, i.e. as of 1st December, all commercial flights have been temporarily suspended. See NPI Table and Annex 2 for more details on key public health interventions along the outbreak timeline.
- Technical guidelines on surveillance, contact tracing, quarantine, infection prevention and control (IPC) case management continued to be reviewed and updated/ revised as needed. Dissemination workshops and training are provided to further equip and build on technical capacity for relevant staff, to be ready to respond to the current situation and any resurgence of cases in community should it happen. Latest updates include:
 - The technical guidance on contact tracing has been official approved by MOH. A ToT training for MOH and 4 regional institutes was conducted on 1-2 December, cascade training for subnational level will be conducted by 4 Regional Institutes in coming weeks.
 - Revision of technical guidelines on quarantine at centralized facilities and home/ self-quarantine is ongoing.

Laboratory:

- In light of the new virus variants reported from the UK and South Africa, the MOH has instructed NIHE and PI HCM to actively conduct full genome sequencing on the positive samples in those who returned from the UK.
- As of 26 Nov, there are 140 laboratories capable of testing for COVID-19 by RT-PCR. The maximum daily capacity in the country remains at 51,000 tests. Of these laboratories 91 are designated by MOH as confirmatory laboratories.
- Plans are underway to further expand laboratory testing to include use of GeneXpert machines within the lung hospital system. An operational plan is being developed; plans to use 14,000 GeneXpert COVID-19 cartridges across 42-46 lung hospitals.
- Since the 21 Sept, a SARS-CoV-2 testing strategy for COVID-19 (Decision No.4042/QD-BYT) has been in place. The testing strategy states RT-PCR as the test for confirmation of COVID-19. Antigen tests may be considered for confirmation, but only if quality reaches standards as recommended by WHO and US-CDC. The strategy clarifies that serological testing can be used for investigation of cases and for sero-prevalence studies, but not for standalone patient testing and clinical decision making.
- Discussions remain ongoing over the possible order of antigen antigen RDT's through the Supply Portal, under coordination of GDPM.
- The WHO supported COVID-19 EQA for sub-national laboratories remains ongoing, involving 106 laboratories.

Communication:

- Communications to the public have focused on providing updates on outbreak situation and government actions, including stories on the ground, promoting protective measures and countering rumours and misinformation. Messaging on protective measures has been repackaged as "5K": (1) facemask; (2) hygiene; (3) safe distance; (4) gathering; (5) health declaration.
- WHO works with the Ministry of Health and UNICEF in building the country's communication preparedness
 for potential COVID-19 vaccine introduction. A national action plan on communicating COVID-19 vaccine is
 being developed. Activities will cover ensuring equitable access and uptake, managing expectations,
 communicating uncertainties and managing reputational risk, whilst maintaining high levels of trust in
 vaccination and other protective behaviours against COVID-19.





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- The MOH, with support from WHO, has started communication activities supporting the "safe coexistence with COVID-19" initiative. To further support this, a long-term online campaign titled, "Normalize the new normal", was jointly launched by United Nations organizations and other international organizations in November 2020. This is part of the activities of, UN+2 COVID-19 RCCE subgroup, the country's INGO risk communication and community engagement working group. WHO serves as the technical lead and coordinator of this group.

Clinical management and IPC

- 6 Nov- VAMS held a COVID-19 review meeting with all relevant partners, health sectors, central and
 provincial hospitals to discuss lessons learned and experiences in response to COVID-19 in HCFs, and
 recommendations in coming time to better prepare for and response to COVID-19 in HCFs.
- VAMS with support of WHO is developing a handbook on COVID-19 response in HCFs to strengthen surge capacity and to support hospitals to meet requirements on criteria for safe hospitals from COVID-19.
- 14 Dec MOH/VAMS issued an updated national guideline on IPC for COVID-19 in HCFs replacing the current guideline No. 468.

Recent/Upcoming Events and Priorities

- **12-13 Jan** National IHR(2005) implementation self-assessment workshop for 2020 using SPAR tool was conducted in Lang Son. COVID-19 response was strongly reflected during the assessment across all capacity areas.
- 9 Jan 2021 WCO team with support from a Laboratory expert from WPRO provided a scientific update on the new SARS-CoV-2 variants and their public health implications at the technical meeting jointly organized by the Viet Nam Association of Preventive Medicine (VAPM) and the Office of the Government upon their request. Based on the outcome from this expert consultation meeting, VAPM will provide additional advice to the Government and the National Steering Committee on necessary public health measures in light of the recent virus mutations.
- WHO continues dialogues with the Government of Viet Nam and provides support for making balanced decisions in the current situation. TA is being provided across technical areas, including:
 - o Providing latest updates on the new variant of SARS-CoV-2 from the U.K. and South Africa and encourage enhancing surveillance and conducting full genome sequencing to detect possible importation of new variants.
 - Supporting ongoing discussion on COVID-19 vaccine development and vaccine deployment and distribution
 plans, effective communication in response to the current situation and in preparation for a possible wider
 community transmission and adjusting the ongoing activities considering the latest community cluster in HCMC
 and cases detected among the illegal immigrants.
 - Continue facilitating after-action reviews (AAR) and intra-action reviews (IAR), including ongoing AARs in the Northern region (Quang Ninh, Ha Loi); AAR in Central region (Da Nang, Quang Nam, Quang Ngai) was conducted on 19-20 Jan in Nha Trang; and ongoing AAR in Central Highlands.
 - Supporting GDPM to conduct training workshops on mask wearing in public places, risk communication and risk assessment (in Jan 2021); and other training on contact tracing, PoE, etc.

National Transmission Assessment

Stage 1 – Imported transmission: it has been 54 days since the last locally transmitted case was reported. To date, no signals of ongoing locally acquired transmission have been observed. Lockdown in all the affected areas had been lifted. In the past 10 days, a total of 17 laboratory confirmed cases were reported, all were imported. In the coming weeks, further decrease in imported cases is anticipated given that the Government is making further restrictions to rescue flights between now and the Vietnamese New Year (Tet) and in the event of the upcoming 13th National Party Congress. However, since more Vietnamese citizens are trying to come back for Tet, especially through illegal routes, it is possible that sporadic community cases would be reported if such incidents were not timely detected. In addition, cases might also be reported as a result of non-adherence to testing/ quarantine procedures.

Assessment done by WHO Viet Nam with concurrence from the Ministry of Health of Viet Nam.





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Epidemiology

Epi Update COVID-19	36,8 NAT Tests past 7 (+59.6% 1,473,6 Cumulative NAT	7 days 7-day) 697		% 7-day) ,548	Deaths pa	% 7-day)	ICU A	ICU Admissions 1 dmissions past 7days (+1 case 7-day) 58 (TBC) ative ICU Admissions
	Imported Cases in p	0% ast 28 (107)	Cases in pasi with n	O t 28 days o link (0)	Activ	O e Clusters		O Active clusters with >3 generations
Health Service Provision COVID-19	Most of national hospital staff Health care workers trained in COVID19 Case Management		Care worker eported past week		17 s admitting 19 patients past week	ICU be CO p (out of a 3,50	eds for VID-19 atients approx. 0 beds nwide)	Non-ICU Hospital beds for COVID-19 patients (Two field hospitals in Da Nang dissolved)

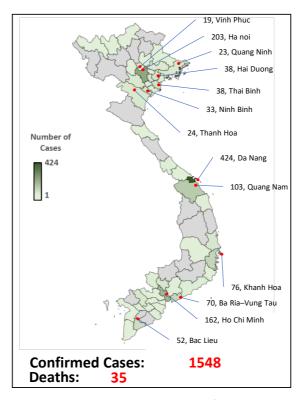


Figure 1. Distribution of cumulative COVID-19 laboratory confirmed cases by place of detection, Viet Nam





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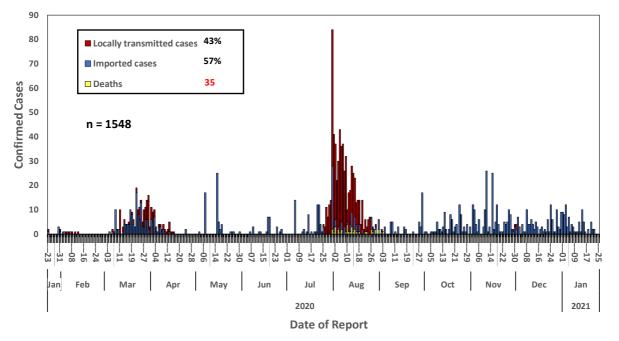


Figure 2. Epidemic curve of COVID-19 laboratory confirmed cases, Viet Nam, by date of reporting

	Fem	nale	Male			
Age Group	Cases	Deaths	Cases	Deaths		
0-9	23 (0)	0 (0)	26 (0)	0 (0)		
10-19	39 (3)	0 (0)	43 (0)	0 (0)		
20-29	173 (0)	2 (0)	230 (3)	0 (0)		
30-39	137 (0)	1 (0)	230 (0)	1 (0)		
40-49	116 (0)	1 (0)	114 (0)	0 (0)		
50-59	99 (0)	5 (0)	110 (3)	3 (0)		
60-69	83 (0)	6 (0)	61 (1)	6 (0)		
70-79	25 (1)	2 (0)	18 (0)	1 (0)		
80-89	10 (0)	5 (0)	6 (0)	1 (0)		
90+	1 (0)	0 (0)	4 (0)	1 (0)		
Total	706 (4)	22 (0)	842 (7)	13 (0)		

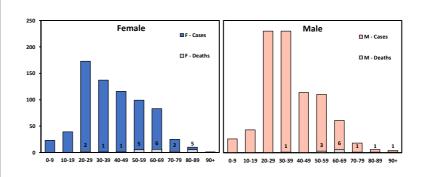


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex

Strategic Approach -

National and Provincial Public Health Response

In January 2020, the Government of Viet Nam rapidly issued the first National Response Plan and assembled the National Steering Committee (NSC) to implement this plan. The NSC is central to the command and control governance of the COVID-19 response. The Committee is chaired by Deputy Prime Minister Vu Duc Dam with high-level representation from 14 Ministries and sectors, the National Assembly, media, and information technology companies,





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and oversees four sub-committees in technical and logistic areas. The plan outlines clear roles and responsibilities of each sector and levels of authority - central, provincial, district, and commune. The rapid mobilization of financial and human resources allowed the Prime Minister and Deputy Prime Minister to lead a whole-of-society approach, based on the Prime Minister's Directive No. 05/CT-TTg, toward combating COVID-19, with the principle of "protecting people's health first." The Government's commitment had remained the same in the response to the latest community outbreaks in Da Nang and HCMC.

Strategic Approach to COVID-19 Prevention, Detection and Control

Viet Nam has successfully and rapidly implemented necessary COVID-19 prevention, detection, and control activities under the strong leadership of the Government and effective multi-sectoral coordination and collaboration. There have been persistent and strict applications of key outbreak response measures: early detection – testing and treatment – contact tracing – isolation/quarantine, along with strategic risk communications. This was evident during the first phase of the outbreak response and once again reconfirmed in the response to the latest resurgence of cases in the community related to Da Nang and HCMC events. For years, WHO has been supporting Viet Nam in building and strengthening the capacities for managing disease outbreaks and public health emergencies, as required by the International Health Regulations (IHR) (2005). Guided by the APSED III, Viet Nam has made significant progress in enhancing capacity in the required technical areas and all the years of investment are reflected in the country's ongoing response to COVID-19.

Best Practice/Lessons Learned

The Response Enabling Factors and Adjustments to the Response

- Strong government leadership with effective multi-sectoral collaboration and coordination and successful mobilization of national resources using a whole-of-society approach
- Early activation of a strong response system, including surveillance and risk assessment, laboratory, clinical management and IPC, and risk communication, which enabled Viet Nam's successful control of COVID-19.
- WHO supports long-term country investment to strengthen the health emergency response after previous epidemics, and is providing technical support in necessary areas, including the continuation of essential public health services.

Non-Pharmaceutical Interventions (NPI)

Narrative Non-Pharmaceutical Interventions

Viet Nam instituted a gradual roll-out of comprehensive NPIs based on the evolving context/evidence, thus they did not come as a "shock" to the public. Such interventions were implemented along with strong economic relief efforts, thereby minimizing the economic impact to businesses and households, especially vulnerable populations, during these uncertain times. As the global situation of COVID-19 has continued to evolve with complexity, the country borders have basically remained close except for specific circumstances.

Latest updates – see Other Key Updates section on page 2

For previous updates in 2020, please refer to earlier Sitreps