HIGHLIGHTS
(Data published in the MoHP Situation Report as of 13 March 2022 and same data published in EDCD Report as of 14 March 2022)

- Of the total RT-PCR confirmed COVID-19 cases, 98.3% (961,070) of cases have recovered, 0.5% (4,917) are active cases and 1.2% (11,950) are deaths.
- Among the total active cases, 98.0% (4,819) cases are in home isolation; 2.0% (98) of cases are undergoing hospital/institutional isolation. While 0.8% (41) of active cases require ICU admission, 14.6% (6) of the ICU admitted patients require ventilator support.
- None of the districts reported more than 500 active cases.
- Among the new RT-PCR confirmed cases (436) reported this week, 31.9% (139) are from Kathmandu district followed by Lalitpur district 7.6% (33). Majority of the new cases 41.5% (181) have been reported from Kathmandu Valley (Kathmandu, Lalitpur and Bhaktapur districts), Bagmati Province.
- COVID-19 vaccination coverage status (as of 13 March 2022)

<table>
<thead>
<tr>
<th>Covi-AstraZeneca</th>
<th>Vero Cell</th>
<th>Janssen</th>
<th>Pfizer</th>
<th>Moderna</th>
</tr>
</thead>
<tbody>
<tr>
<td>First dose</td>
<td>5,047,743</td>
<td>First dose</td>
<td>10,190,999</td>
<td>Single dose</td>
</tr>
<tr>
<td>Second dose</td>
<td>3,942,020</td>
<td>Second dose</td>
<td>8,946,446</td>
<td></td>
</tr>
</tbody>
</table>

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 13 March 2022, a total of 977,937 COVID-19 cases were confirmed through polymerase chain reaction (RT-PCR); 5,483,746 RT-PCR tests have been performed nationwide by designated functional COVID-19 laboratories. A total of 139,942 cases were confirmed through Antigen RDT; 1,094,683 Antigen RDT have been performed nationwide.
- Since 9 May 2021, all 7 provinces in the country are experiencing community transmission.
- Province-wise RT-PCR test positivity rate in Epi Week 10 ranged from 1.0% (Bagmati province) to 6.3% (Sudurpashchim province), with a national positivity rate at 1.2%. Karnali province did not report any PCR test conducted in the past week.
- Overall, the sex-distribution remains skewed towards males, who constitute 59% (575,000/977,937) of the RT-PCR confirmed cases. Amongst the males, 78% (450,291/575,000) are in the economically productive age group (15-54 years).
- A total of 37,671 RT-PCR tests were performed in week 10, 27% more than that in week 9 (29,684). A total of 17,771 Antigen tests were performed in week 10, 4% more than that in week 9 (17,041). A
Situation Update #100 – Corona virus Disease 2019 (COVID-19)  
WHO Country Office for Nepal  
Friday 18 March 2022

A total of 55,442 tests (PCR plus AgRDT) were performed in week 10, 19% more than that in week 9 (46,725).

**National Influenza Surveillance**

- No diagnostic/surveillance samples were received at NIC-NPHL on EPID-week 10 (7th -13th March 2022).
- Out of the total SARS-CoV-2 samples that tested Negative at NPHL on week 10 (7th -13th March 2022), 93 SARS-CoV-2 samples have been tested for Influenza. None of the samples tested positive for Influenza.
- From January 3rd, 2022 until March 13th, 2022:
  - A total of 4 samples have been tested positive for Influenza (2 Influenza B Positive and 2 Influenza A/H3) from 1292 samples (Sentinel and non-sentinel samples including SARS-CoV-2 negative SARI and ILI cases).
  - Similarly, 198 samples have been tested positive for SARS-CoV-2 from 364 samples (Sentinel/non-sentinel ILI/SARI samples)¹.

**WHO SEAR countries: Number of COVID-19 confirmed cases and cumulative incidence rate (per 100,000). Link Here - [https://worldhealthorg.shinyapps.io/covid/](https://worldhealthorg.shinyapps.io/covid/)

¹ These positive cases are included in the COVID-19 database.
Figure 1: RT-PCR confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N=977,937) (Data reported on 13 March 2022 up to 19:00:00)

**Note:** The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation. Clinical information presented here is collected on the day of sample collection.

At national level, the first wave of cases between July 2020 and February 2021 was followed by the second wave from the middle of March 2021. Since the middle of December 2021, cases were continuously soaring exceeding the highest number of single day cases reported in the past surges, however the trend has been continuously decreasing.
Figure 2: Cumulative case count of RT-PCR confirmed COVID-19 cases by province (N=977,937) (Data reported on 13 March 2022 up to 19:00:00)

The cumulative case incidence has been increasing in Nepal since the first case was confirmed on 23 January 2020. Cases have been largely reported from Bagmati Province followed by Province 1 and Lumbini Province.

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available - Date onset/Date of sample collection/Date of confirmation.
There were 52 new cases reported in the past week in Province 1. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 55% in the past week compared to the previous week. There was no death reported in the past week, 100% less than that in the previous week. The test positivity rate in Province 1 decreased to 1.5% in the past week. A total of 2015 tests were performed in the past week, 17% more than that in the previous week.
Figure 3A2: RT-PCR confirmed COVID-19 cases in Madhesh Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 13 March 2022)

There were 31 new cases reported in the past week in Madhesh province. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 47% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Madhesh Province decreased to 1.4% in the past week. A total of 485 tests were performed in the past week, 111% more than that in the previous week.
Figure 3A3: RT-PCR confirmed COVID-19 cases in Bagmati Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 13 March 2022)

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.

In Bagmati, 223 new cases were reported in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 21% in the past week compared to the previous week. There was 1 death reported in the past week, 86% less than that in the previous week. The test positivity rate in Bagmati decreased to 1.0% in the past week. A total of 33,405 tests were performed in the past week, 28% more than that in the previous week.
In Gandaki, 55 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. Cases have decreased by 38% in the past week compared to the previous week. There was 1 death reported in the past week, 50% less than that in the previous week. The test positivity rate in Gandaki decreased to 3.0% in the past week. A total of 737 tests were performed in the past week, 8% more than that in the previous week.

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.
Lumbini reported 51 new cases in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 11% in the past week compared to the previous week. There was 1 death reported in the past week, an increase from no death in the previous week. The test positivity rate in Lumbini decreased to 3.3% in the past week. A total of 871 tests were performed in the past week, 18% more than that in the previous week.
In Karnali, 6 new cases were reported in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 68% in the past week compared to the previous week. There was no death reported in the past week, 100% less than that in the previous week. The test positivity rate in Karnali remain 0.0% in the past week with no test performed reported in the past week.
In Sudurpaschim, 18 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. Cases have increased by 38% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Sudurpaschim increased to 6.3% in the past week. A total of 158 tests were performed in the past week, 21% more than that in the previous week.
**Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by provinces.** (Data reported on 13 March 2022 up to 19:00:00)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases RTPCR Tests</th>
<th>Total confirmed cumulative cases Antigen RDT test</th>
<th>Total confirmed cumulative cases</th>
<th>% of total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification</th>
<th>Total confirmed cases in last 14 days Antigen RDT test</th>
<th>Total confirmed cases in last 14 days RT-PCR test</th>
<th>Total confirmed cases in last 14 days</th>
<th>% of total confirmed cumulative cases in last 14 days</th>
<th>Total Deaths in last 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>127407</td>
<td>29602</td>
<td>157009</td>
<td>14.3</td>
<td>1714</td>
<td>Community transmission</td>
<td>24</td>
<td>168</td>
<td>192</td>
<td>11.8</td>
<td>2</td>
</tr>
<tr>
<td>Madhesh</td>
<td>53119</td>
<td>1148</td>
<td>54267</td>
<td>4.9</td>
<td>783</td>
<td>Community transmission</td>
<td>2</td>
<td>89</td>
<td>91</td>
<td>5.6</td>
<td>0</td>
</tr>
<tr>
<td>Bagmati</td>
<td>526516</td>
<td>29923</td>
<td>556439</td>
<td>50.7</td>
<td>5163</td>
<td>Community transmission</td>
<td>126</td>
<td>507</td>
<td>633</td>
<td>38.9</td>
<td>8</td>
</tr>
<tr>
<td>Gandaki</td>
<td>93581</td>
<td>22843</td>
<td>116424</td>
<td>10.6</td>
<td>1419</td>
<td>Community transmission</td>
<td>35</td>
<td>144</td>
<td>179</td>
<td>11.0</td>
<td>3</td>
</tr>
<tr>
<td>Lumbini</td>
<td>109344</td>
<td>25444</td>
<td>134788</td>
<td>12.3</td>
<td>1864</td>
<td>Community transmission</td>
<td>103</td>
<td>108</td>
<td>211</td>
<td>13.0</td>
<td>1</td>
</tr>
<tr>
<td>Karnali</td>
<td>23890</td>
<td>5822</td>
<td>29712</td>
<td>2.7</td>
<td>491</td>
<td>Community transmission</td>
<td>228</td>
<td>25</td>
<td>253</td>
<td>15.6</td>
<td>1</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>44080</td>
<td>5419</td>
<td>49499</td>
<td>4.5</td>
<td>516</td>
<td>Community transmission</td>
<td>36</td>
<td>31</td>
<td>67</td>
<td>4.1</td>
<td>0</td>
</tr>
<tr>
<td>National Total</td>
<td>977937</td>
<td>120201*</td>
<td>1098138</td>
<td>100</td>
<td>11950</td>
<td>Community transmission</td>
<td>554</td>
<td>1072</td>
<td>1626</td>
<td>100</td>
<td>15</td>
</tr>
</tbody>
</table>

*Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 13 March 2022, 139942 but IMU reported 120201*

Notes:
1. The source for case data used in this update is from RT-PCR test positivity reported by laboratories from various locations across Nepal, as shared by HEOC Sitrep; and IMU/IHIMS.
2. Case data is screened and cleaned by our data team for double entry, wrong entry and manual errors such as cities name in place of districts, district name in place of province etc.
3. Whereas the test positivity rate is calculated based on the test positivity reported in Sitrep for RT-PCR which may or may not be scrutinized or cleaned the same way and mark the cases on location of the laboratories rather then their place of residence.
Figure 4: Distribution of RT-PCR positive COVID-19 cases by age and sex (N=972,917) (Data reported on 13 March 2022 up to 19:00:00)

Overall, the sex-distribution remains skewed towards males. The incidence of cases is higher in the economically productive age group (15-54 years) for both males and females.

Note: Core epidemiological variables under process for 5020 cases.
Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths in RT-PCR confirmed COVID-19 cases (N=977,937) (Data reported on 13 March 2022 up to 19:00:00)

<table>
<thead>
<tr>
<th>Age Group (Years)</th>
<th>Total confirmed cases</th>
<th>Death (male)</th>
<th>Death (female)</th>
<th>Deaths with any known comorbid condition</th>
<th>Age specific case fatality ratio (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>9110</td>
<td>16</td>
<td>23</td>
<td>13</td>
<td>0.43</td>
</tr>
<tr>
<td>5-14</td>
<td>33660</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.06</td>
</tr>
<tr>
<td>15-24</td>
<td>147962</td>
<td>91</td>
<td>96</td>
<td>69</td>
<td>0.13</td>
</tr>
<tr>
<td>25-34</td>
<td>270832</td>
<td>386</td>
<td>264</td>
<td>149</td>
<td>0.24</td>
</tr>
<tr>
<td>35-44</td>
<td>202075</td>
<td>875</td>
<td>450</td>
<td>279</td>
<td>0.66</td>
</tr>
<tr>
<td>45-54</td>
<td>141467</td>
<td>1385</td>
<td>643</td>
<td>564</td>
<td>1.43</td>
</tr>
<tr>
<td>55-64</td>
<td>89953</td>
<td>1682</td>
<td>796</td>
<td>769</td>
<td>2.75</td>
</tr>
<tr>
<td>65-74</td>
<td>48440</td>
<td>1631</td>
<td>884</td>
<td>940</td>
<td>5.19</td>
</tr>
<tr>
<td>75-84</td>
<td>22816</td>
<td>1221</td>
<td>654</td>
<td>762</td>
<td>8.22</td>
</tr>
<tr>
<td>85+</td>
<td>6602</td>
<td>519</td>
<td>288</td>
<td>274</td>
<td>12.22</td>
</tr>
<tr>
<td>Unknown</td>
<td>5020</td>
<td>19</td>
<td>7</td>
<td>11</td>
<td>0.52</td>
</tr>
<tr>
<td>National</td>
<td>977937</td>
<td>7838</td>
<td>4112</td>
<td>3840</td>
<td>1.22</td>
</tr>
</tbody>
</table>

\[
\text{Case Fatality ratio (CFR, in\%)} = \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \times 100
\]

**Note:** COVID-19 positive lab result is temporally associated with death; causal association under investigation.

A total of 11,950 deaths have been reported. Out of the total deaths, 7,838 (65.6%) were male and 4,112 (34.4%) were female. Amongst the deaths, 3,840 persons (32.1%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1%, it progressively increases with age beyond 65 years of age, ranging from 5.2% to 12.2%.
PREPAREDNESS AND RESPONSE

What are the Government of Nepal (GoN) & the Ministry of Health & Population (MoHP) doing?

- COVID-19 vaccination campaign is going simultaneously in all provinces of the country
- Government of Nepal (Council Ministries) issued a travel advisory on 10.03.2022 (here) for the prevention of COVID-19 infection and the information for all concerned:
  - Passengers entering Nepal from aboard by air or land must submit a certificate of full vaccination against COVID-19. Passengers who fail to submit such certificate will have to submit the certificate with negative report of COVID-19 test (RTPCR, True NAAT, Gene Xpert) within 72 hours of starting the journey.
  - For the passengers going to other countries by air route from Nepal, the concerned airlines have to inform their passengers about the health protocol related to COVID-19 of the designation country. The health-related documents to be submitted by the passengers departing from Nepal will be as per the health-related criteria of the destination country as prescribed by the concerned airlines.
  - Previously issued departmental notices regarding COVID-19 have been revoked.
- As per the decision of the Ministry of Health and Population of the Government of Nepal dated March 07, 2022, all the concerned health institutions and hospitals are requested not to make PCR tests mandatory for those who have not shown any symptoms of COVID-19 infection and have been fully vaccinated.

What is the WHO Country Office for Nepal doing?

Laboratory Diagnosis

- A total of 54,83,746 RT-PCR tests were performed nationwide by 105 designated COVID-19 labs functional across the nation (as of 13th March 2022).
- Supported the National Public Health Laboratory (NPHL) in monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 10 designated COVID-19 laboratories participated in the NQAP this week. The result of all participating laboratories was >90% concordant.
- Technical support provided to NPHL in sample preparation for sixth round of SARS-CoV-2 real-time PCR assay proficiency testing of designated COVID-19 laboratories.
- Technical support provided in conducting gene sequencing of 12 SARS-CoV-2 samples at NPHL.
- Technical support provided in uploading data of gene sequencing of SARS-CoV-2 at Public Health England and NPHL in Global Initiative on Sharing Avian Influenza Data (GSAID) platform.
- Facilitated NPHL in distributing Miseq sequencing reagent to Tribhuvan University - one of the members of genomic consortium through NPHL.
- Facilitated NPHL in selecting SARS-CoV-2 samples for gene sequencing to be done at Tribhuvan University.
- Facilitated NPHL in coordinating with designated COVID-19 laboratories and collecting the poster templates for the upcoming conference program on "COVID-19 Laboratory Experience Sharing."
Technical Expertise and Training

- Continued routine work from the team of Technical Expertise and Training

Operational Support and Logistics

- Continued routine work from the team of Operation Support and Logistics
- The team facilitated to order Oseltamivir 30mg capsule and received 5410 capsules from SEARO stockpiles. These capsules were handed over to Epidemiology and Disease Control Division (EDCD). Out of these, 500 capsules were supplied to Makwanpur district in response to H5N1 outbreaks.
- The team also facilitated to dispatch 20 culture media and 20 rapid diagnostics kits (RDT) for the support of diarrheal outbreak at Ilam district
- The team supported receiving the items of WHO Personal Development Kit (PDK) and skill lab dispatched from SEARO-New Delhi. A handover of the skills lab items to COVID-19 Unified Central Hospital (Bir Hospital) is being planned.
- The team supported the management of events conducted at Nagarkot (WHE Strategic Planning Review) and Nepalgunj (IHR-2005 Preparation of State Party Self-Assessment Annual Report).

Risk Communication and Community Engagement

- Continued support to Health Coordination Division, Ministry of Health, and Population (MoHP) for the National Briefing on COVID-19 held twice a week. Apart from COVID-19, this week's briefing shared information about the ongoing multi-drug administration campaign for Lymphatic Filariasis, messages about Zika, Chikungunya, and Dengue Virus.
- Continued support to NHEICC and Radio Nepal for review of a daily audio program focused on COVID-19. The program will be on air until end of March 2022.
- Episode 67 of Science in 5 (Understanding immunity) was translated, dubbed, and published via the following links: Nepali: Facebook [link]; OneDrive [link]; YouTube [link]
- Episode 24 of Science in 5 podcast in Nepali language was released on Soundcloud (link here). The topic of the episode was the effects of air pollution on COVID-19 patients.
- The MoHP press briefings on COVID-19 were shared via Facebook and Twitter.
- The following documents were uploaded on ReliefWeb (link here):
  - Daily Focused COVID-19 Media Monitoring,
  - Weekly COVID-19 EPI Dashboard, and
- IEC materials on the following topics were shared via WHO, Country Office for Nepal, social media:

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2 The routine works of the technical expertise and training team are included technical support to the Ministry of Health and Population and its department for developing different guidelines/manuals, conducting health programs and conducting capacity building activities. In order to perform these activities, the team coordinates and discuss with relevant government authorities and partners for effective planning and conducting the various activities.

3 The routine works of the operation support and logistics team included technical support to the Management Division of the Department of Health Services for the forecasting, quantification, procurement, and distribution plan of COVID-19 commodities. The other routine activities included daily operational support to the WHO country office and seven provincial health emergency operation centers, including fleet and travel management and the procurement of required logistics and supplies.
- Safety and efficacy of COVID-19 vaccines,
- Mental health and COVID-19,
- Pregnancy, maternal health, and COVID-19,
- Safety and importance of COVID-19 vaccines,
- Harmful use of alcohol and tobacco during COVID-19,
- Mental health and COVID-19,
- Safe celebrations of festivals during COVID-19,
- OpenWHO courses on COVID-19,
- Preventive measures against COVID-19 to note while traveling.

What are the health clusters partners doing?
- UNICEF and WHO are providing overall support for COVID-19 vaccination campaign in close coordination with health partners and donors.
- All members of the Health Cluster are advocating swift supply of COVID-19 vaccines to Nepal through available channels.
- All members of the Health Cluster are supporting the COVID-19 vaccination campaign of Nepal.
- Health partners are continuing their technical, operational, and logistics support for COVID-19 responses to health-related offices and institutions throughout the country.
WHO’s STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE- link here
RECOMMENDATION AND ADVICE FOR THE PUBLIC
  - Protect yourself
  - Questions and answers
  - Travel advice
  - EPI-WIN: tailored information for individuals, organizations and communities

USEFUL LINKS
  ▪ MoHP COVID-19 official portal is available here.
  ▪ Nepal COVID-19 regular updates and resources are available here.
  ▪ For COVID-19 updates from the WHO South-East Asia Region Office, please visit here.
  ▪ For information about coronavirus disease (COVID-19) Pandemic from WHO, please visit here.
  ▪ Please visit this site for all technical guidance from WHO.
  ▪ Online courses on COVID-19 from WHO can be found here.
  ▪ WHO Coronavirus (COVID-19) Dashboard can be found here.
  ▪ Visit the WHO Nepal Facebook page and webpage on COVID-19 here.

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