

Situation Update #102 - Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Reporting Date: 21 - 27 March 2022 (EPI Week 12)

HIGHLIGHTS

(Data published in the MoHP Situation Report as of 27 March 2022 and same data published in EDCD Report as of 28 March 2022)

- Of the total RT-PCR confirmed COVID-19 cases, 98.6% (964,823) of cases have recovered, 0.2% (1,558) are active cases and 1.2% (11,951) are deaths.
- Among the total active cases, 97.1% (1,513) cases are in home isolation; 2.9% (58) of cases are undergoing hospital/institutional isolation. While 1.5% (23) of active cases require ICU admission, 8.7% (2) 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 (177) reported this week, 33.9% (60) are from Kathmandu district followed by Kailali district 7.3% (13). Majority of the new cases 37.9% (67) have been reported from Kathmandu Valley (Kathmandu, Lalitpur and Bhaktapur districts), Bagmati Province.
- COVID-19 vaccination coverage status (as of 27 March 2022)

SITUATION OVERVIEW

(Data as of 27 March 2022)

NEPAL

Cumulative confirmed cases

RT-PCR: 978,332

Antigen RDT: 140,113

Cumulative deaths: 11,951

Cumulative tests

RT-PCR: 5,529,353

Antigen RDT: 1,122,027

SOUTH-EAST ASIA REGION

Cumulative cases (%)

56,973,754 (12%)

Cumulative deaths (%)

777,868 (13%)

GLOBAL

Cumulative cases (%)

479,474,989 (100%)

Cumulative deaths (%)

6,122,745 (100%)

Covi-AstraZeneca		Vero Cell		Janssen		Pfizer		Moderna	
First dose	5,098,221	First dose	10,236,932	Single dose	3,233,733	First dose	324,485	First dose	3,072,631
Second dose	4,052,840	Second dose	9,027,125			Second dose	235,155	Second dose	2,383,665

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 27 March 2022, a total of 978,332 COVID-19 cases were confirmed through polymerase chain reaction (RT-PCR); 5,529,353 RT-PCR tests have been performed nationwide by designated functional COVID-19 laboratories. A total of 140,113 cases were confirmed through Antigen RDT; 1,122,027 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 12 ranged from 0.0% (Karnali province) to 7.9% (Sudurpashchim province), with a national positivity rate at 0.8%.
- Overall, the sex-distribution remains skewed towards males, who constitute 59% (575,228/978,332) of the RT-PCR confirmed cases. Amongst the males, 78% (450,454/575,228) are in the economically productive age group (15-54 years).
- A total of 23,507 RT-PCR tests were performed in week 12, 6% more than that in week 11 (22,100). A total of 16,642 Antigen tests were performed in week 12, 36% less than that in week 11 (10,702). A

total of 34,209 tests (PCR plus AgRDT) were performed in week 12, 12% less than that in week 11 (38,742).

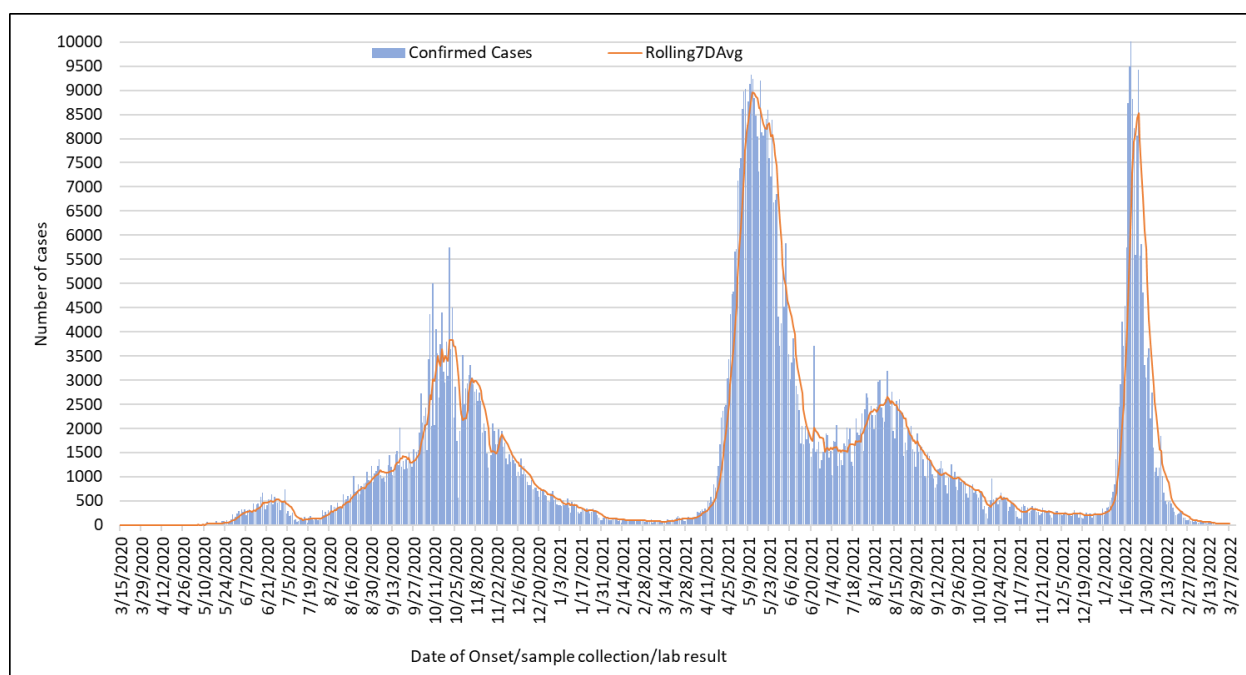
National Influenza Surveillance

- NIC-NPHL reported 2 Diagnostic and Surveillance Influenza samples tested at NIC-NPHL on EPID-week 12 (21st -27th March 2022). None of the samples tested positive for Influenza. Two samples that tested Negative for Influenza were tested for SARS-CoV-2. None of those samples tested positive for SARS-CoV-2.
- Out of the total SARS-CoV-2 samples that tested Negative at NPHL on EPID- week 12 (21st -27th March 2022), 36 SARS-CoV-2 Negative samples have been tested for Influenza. None of the samples tested positive for Influenza.
- From January 3rd2022 until March 27th2022:
 - A total of 4 samples have been tested positive for Influenza (2 Influenza B Positive and 2 Influenza A/H3) from 1475 samples (Sentinel and non-sentinel samples including SARS-CoV-2 negative SARI and ILI cases).
 - Similarly, 203 samples have been tested positive for SARS-CoV-2 from 396 Influenza negative 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/>

¹ These positive cases are included in the COVID-19 database.

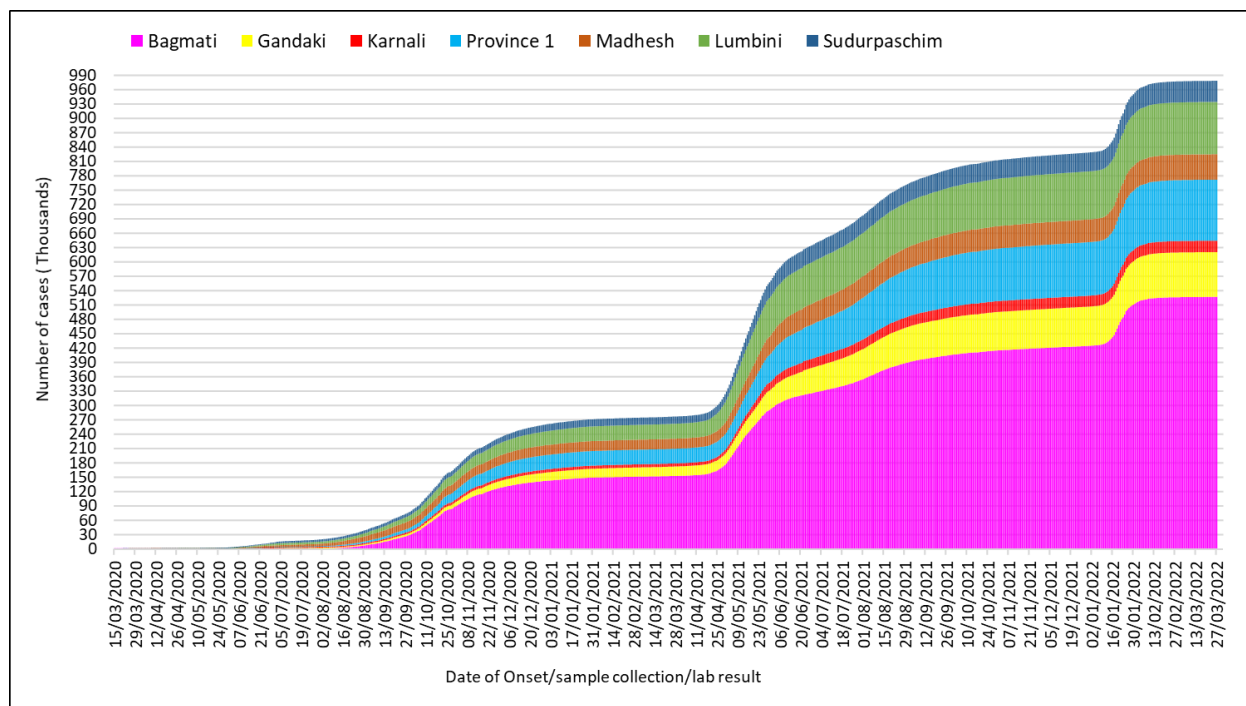
Figure 1: RT-PCR confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N=978,332) (Data reported on 27 March 2022 up to 19:00:00)



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, a third wave of cases soared up exceeding the highest number of single day cases reported in the past surges towards the end of January 2022, however the trend has been decreasing since then.

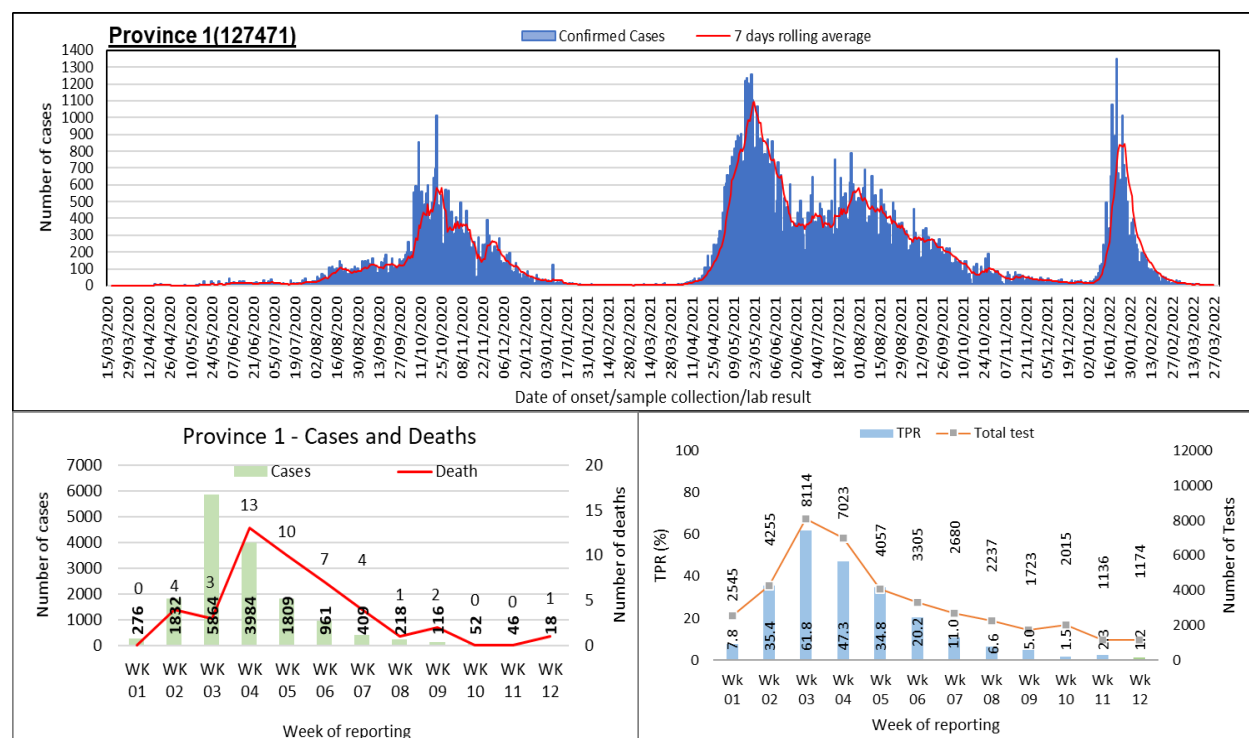
Figure 2: Cumulative case count of RT-PCR confirmed COVID-19 cases (N=978,155) by province (Data reported on 27 March 2022 up to 19:00:00)



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.

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.

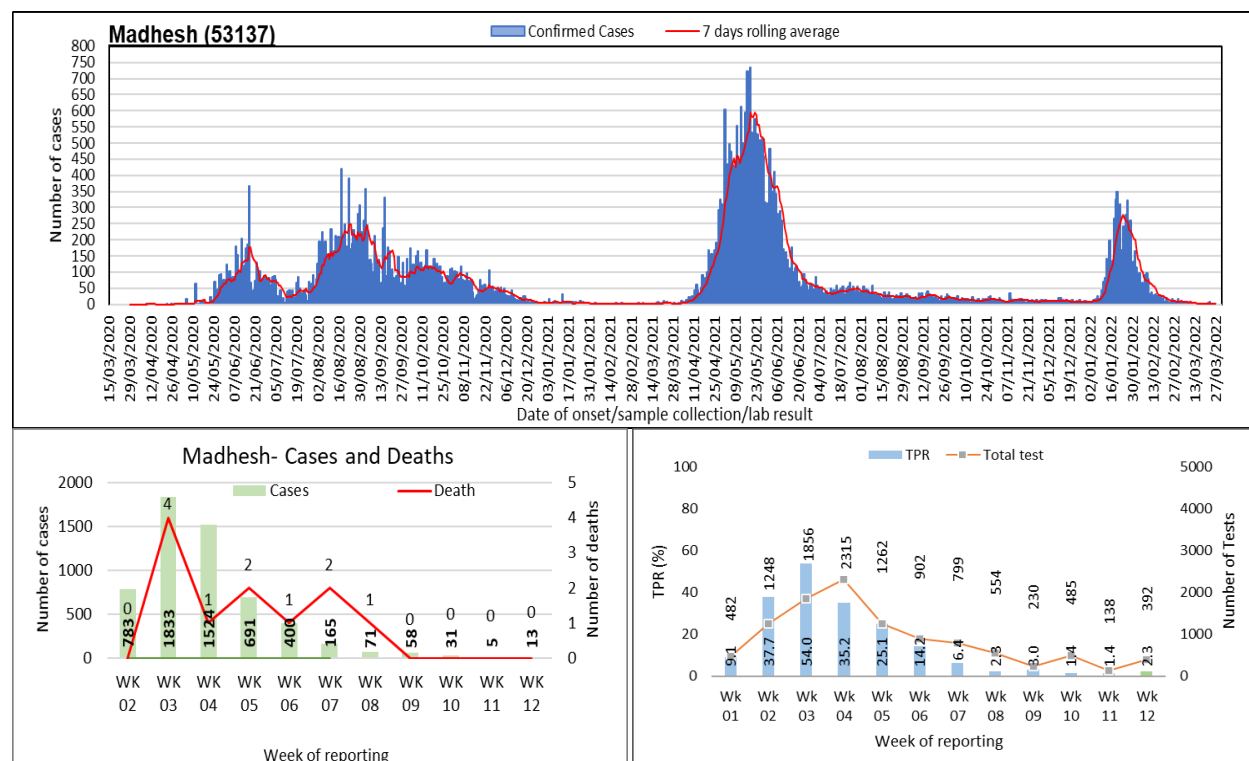
Figure 3A1: RT- PCR confirmed COVID-19 cases in Province 1: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 March 2022)



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.

There were 18 new cases reported in the past week in Province 1. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 61% in the past week compared to the previous week. There was 1 death reported in the past week, increased from no death in the previous week. The test positivity rate in Province 1 increased to 1.2% in the past week. A total of 1174 tests were performed in the past week, 3% more than that in the previous week.

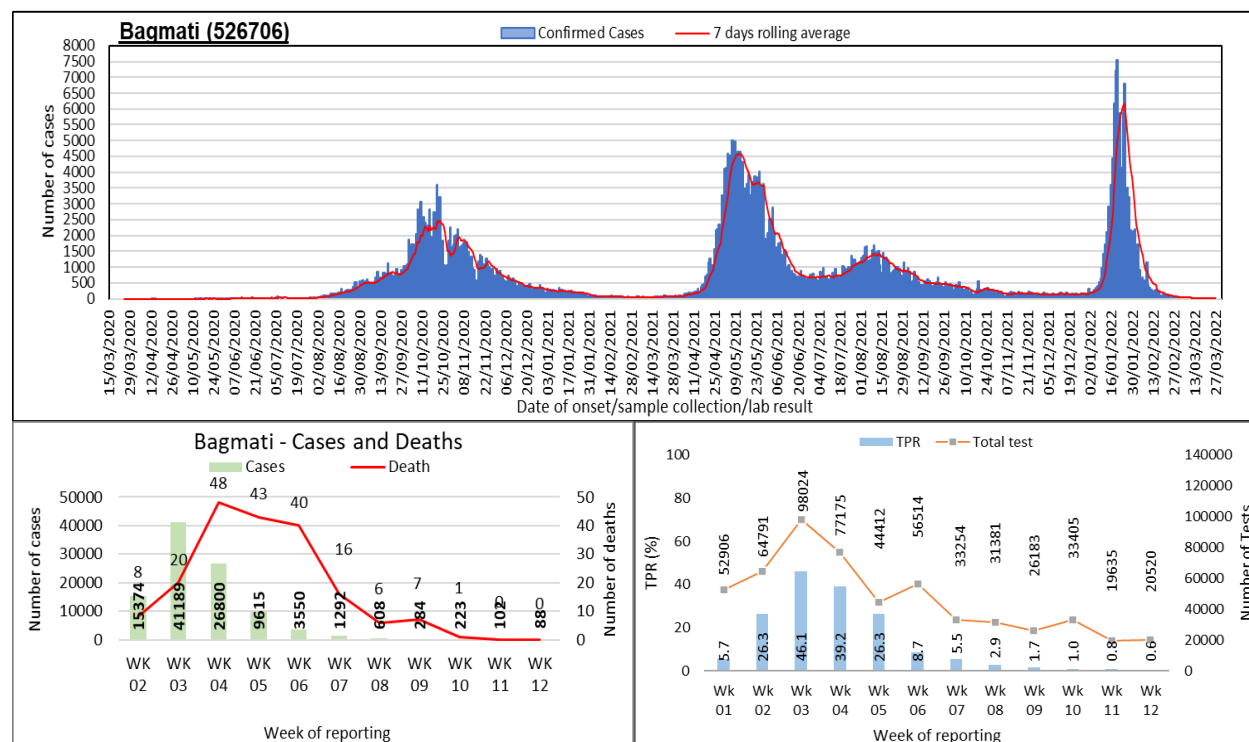
Figure 3A2: RT- PCR confirmed COVID-19 cases in Madhesh Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 March 2022)



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.

There were 13 new cases reported in the past week in Madhesh province. Since a peak in week 3, cases are continuously decreasing. However, cases have increased by 160% 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 increased to 2.3% in the past week. A total of 392 tests were performed in the past week, 184% more than that in the previous week.

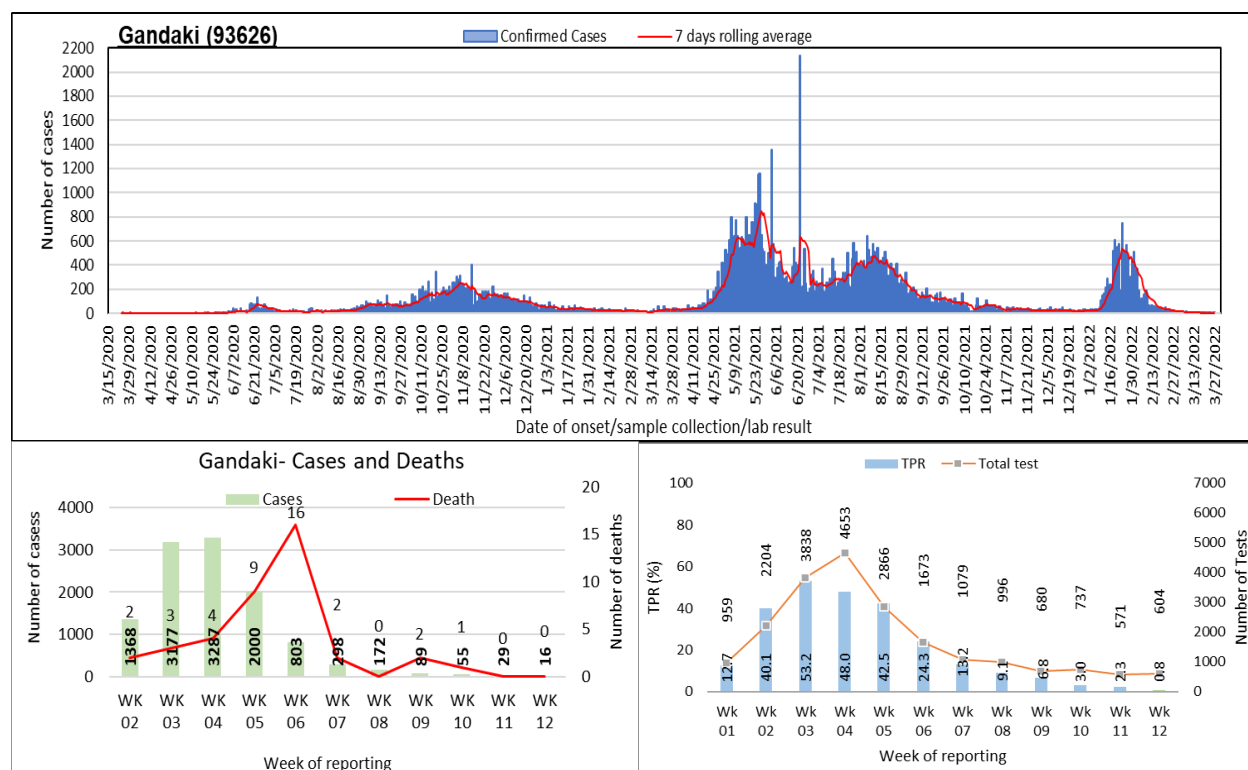
Figure 3A3: RT- PCR confirmed COVID-19 cases in Bagmati Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 March 2022)



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, 88 new cases were reported in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 14% 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 Bagmati decreased to 0.6% in the past week. A total of 20,520 tests were performed in the past week, 5% more than that in the previous week.

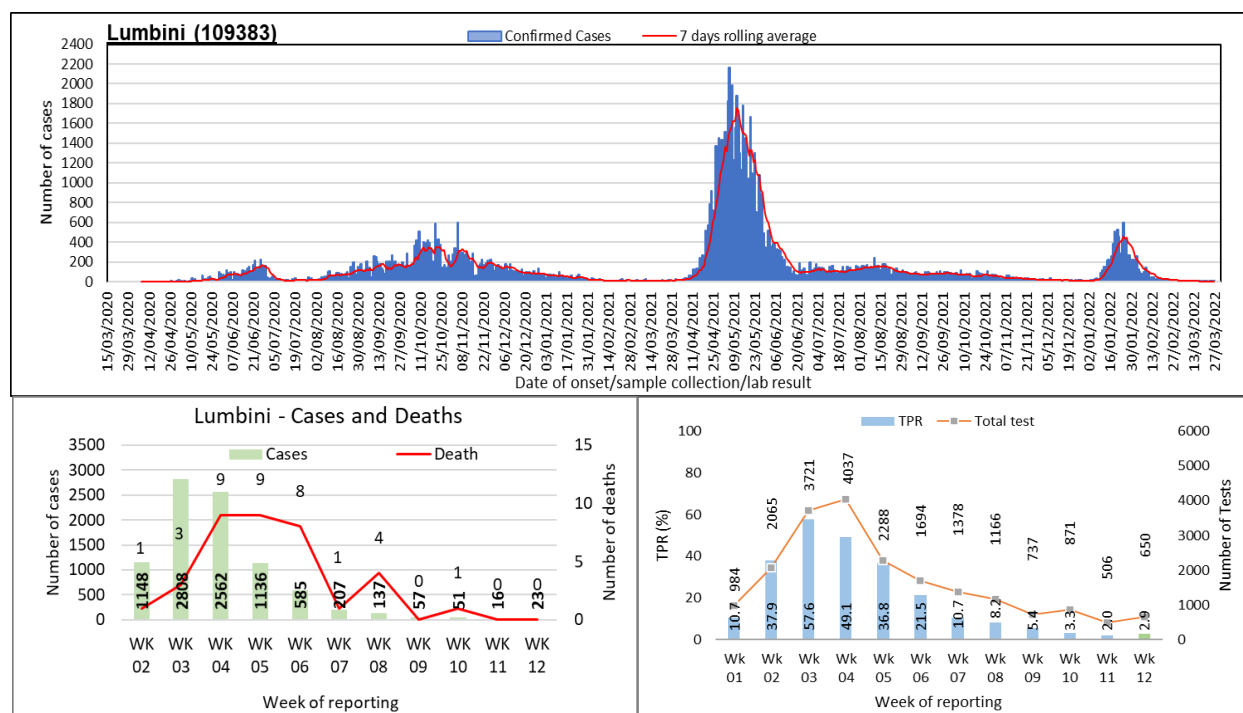
Figure 3A4: RT- PCR confirmed COVID-19 cases in Gandaki Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 March 2022)



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 Gandaki, 16 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. Cases have decreased by 45% 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 Gandaki decreased to 0.8% in the past week. A total of 604 tests were performed in the past week, 6% more than that in the previous week.

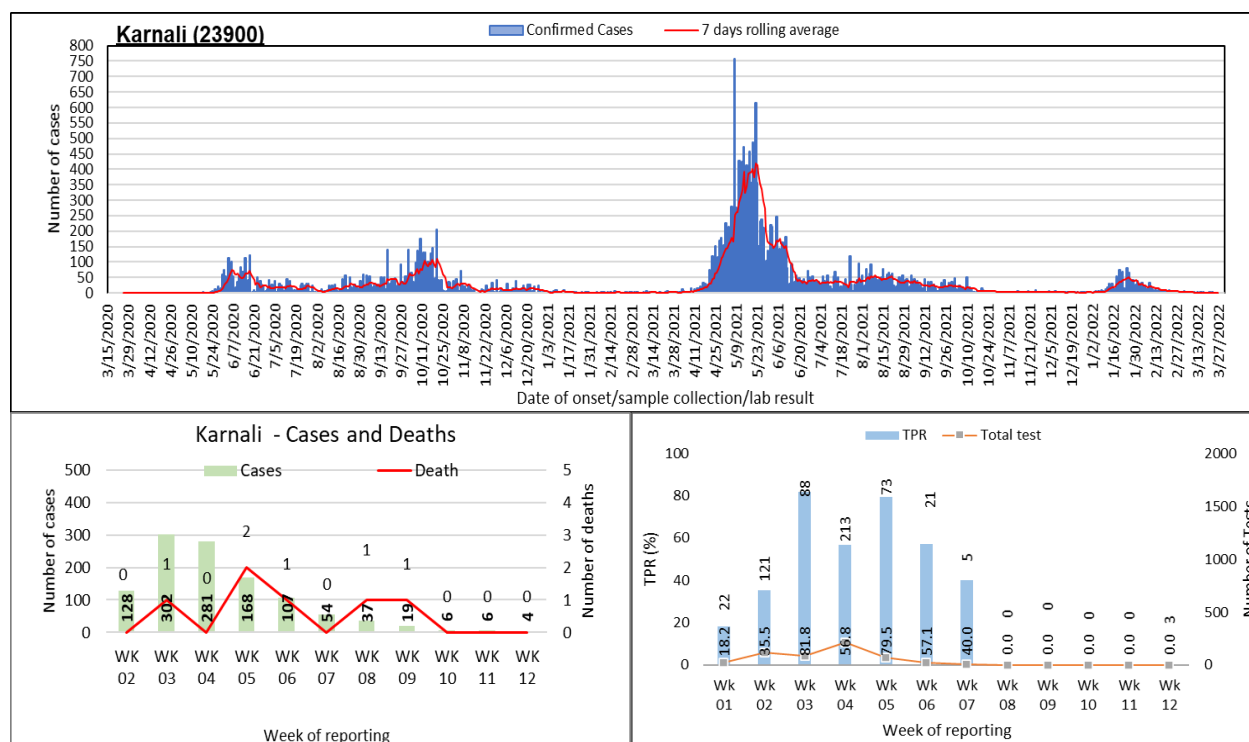
Figure 3A5: RT- PCR confirmed COVID-19 cases in Lumbini Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 March 2022)



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.

Lumbini reported 23 new cases in the past week. Since a peak in week 3, cases are continuously decreasing. However, cases have increased by 44% 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 Lumbini increased to 2.9% in the past week. A total of 650 tests were performed in the past week, 28% more than that in the previous week.

Figure 3A6: RT- PCR confirmed COVID-19 cases in Karnali Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 March 2022)

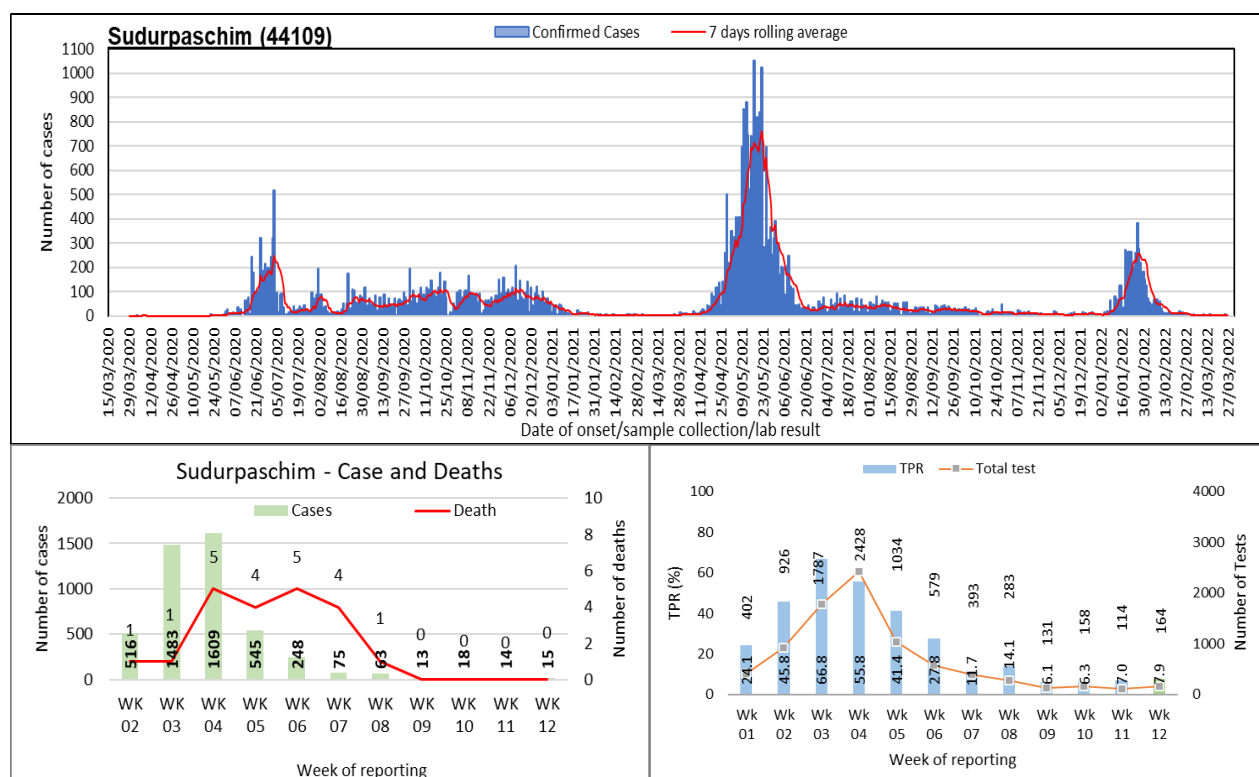


Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here).
Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.

In Karnali, 4 new cases² were reported in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 33% 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 Karnali remain 0.0% in the past week with 3 tests performed reported in the past week.

² The positive cases were reported either through self testing or were conducted at other provinces

Figure 3A7: RT- PCR confirmed COVID-19 cases in Sudurpashchim Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 27 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 Sudurpashchim, 15 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. However, cases have increased by 7% 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 Sudurpashchim increased to 7.9% in the past week. A total of 164 tests were performed in the past week, 44% more than that in the previous week.

Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 27 March 2022 up to 19:00:00)

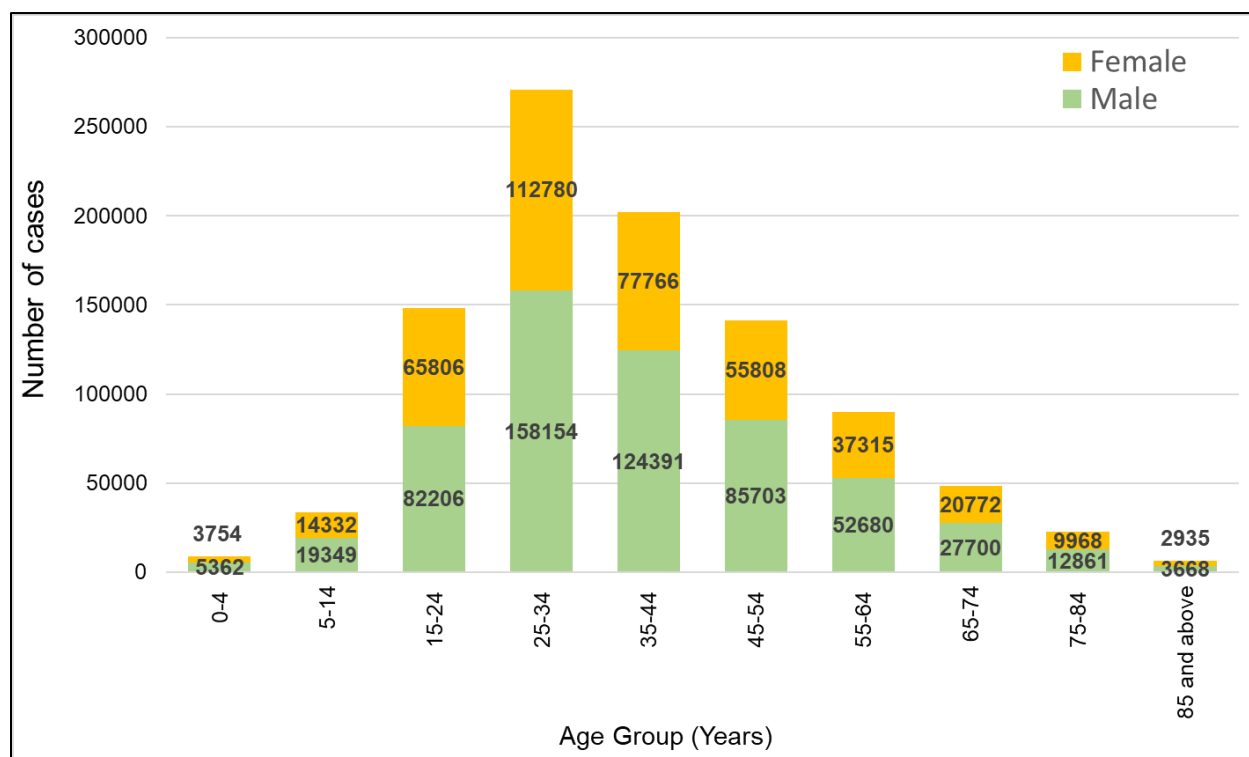
Reporting Province	Total confirmed cumulative cases RTPCR Tests	Total Confirmed cumulative cases Antigen RDT test	Total confirmed cumulative cases	% of total confirmed cumulative cases	Total cumulative deaths	Transmission classification	Total confirmed cases in last 14 days Antigen RDT test	Total confirmed cases in last 14 days RT-PCR test	Total confirmed cases in last 14 days	% of total confirmed cumulative cases in last 14 days	Total Deaths in last 14 days
Province 1	127471	29609	157080	14.3	1715	Community transmission	7	64	71	12.8	1
Madhesh	53137	1150	54287	4.9	783	Community transmission	2	18	20	3.6	0
Bagmati	526706	29931	556637	50.7	5163	Community transmission	8	190	198	35.8	0
Gandaki	93626	22855	116481	10.6	1419	Community transmission	12	45	57	10.3	0
Lumbini	109383	25515	134898	12.3	1864	Community transmission	71	39	110	19.9	0
Karnali	23900	5877	29777	2.7	491	Community transmission	55	10	65	11.8	0
Sudurpashchim	44109	5422	49531	4.5	516	Community transmission	3	29	32	5.8	0
National Total	978332	120359*	1098691	100	11951	Community transmission	158	395	553	100	1

Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 27 March 2022, **140113 but IMU reported **120359***

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 than their place of residence.

Figure 4: Distribution of RT-PCR positive COVID-19 cases by age and sex (N=973,134) (Data reported on 27 March 2022 up to 19:00:00)



Note: Core epidemiological variables under process for 5022 cases.

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.

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths in RT-PCR confirmed COVID-19 cases (N=978,332) (Data reported on 20 March 2022 up to 19:00:00)

Age Group (Years)	Total confirmed cases	Death (male)	Death (female)	Deaths with any known comorbid condition	Age specific case fatality ratio (%)
0-4	9116	16	23	13	0.43
5-14	33681	13	7	10	0.06
15-24	148012	91	96	69	0.13
25-34	270934	386	264	149	0.24
35-44	202157	875	450	279	0.66
45-54	141511	1385	643	564	1.43
55-64	89995	1682	796	769	2.75
65-74	48472	1631	885	940	5.19
75-84	22829	1221	654	762	8.21
85+	6603	519	288	274	12.22
Unknown	5022	19	7	11	0.52
National	978332	7838	4113	3840	1.22

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

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

A total of 11,951 deaths have been reported. Out of the total deaths, 7,838 (65.6%) were male and 4,113 (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

What is the WHO Country Office for Nepal doing?

Laboratory Diagnosis

- A total of 55,29,353 RT-PCR tests were performed nationwide by 105 designated COVID-19 labs functional across the nation (as of 27th 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 12 designated COVID-19 laboratories participated in the NQAP this week. The result of all the participating laboratories was 100% concordant.
- Technical and financial support provided to NPHL for conducting “Coordination and Review on Public Health Laboratory Programs” meeting on 21st and 22nd March, 2022 at Dhulikhel. The aim of the meeting was to review the public health programs from laboratory perspective and to identify the challenges and gaps for successful implementation of activities with updating status of NPHL. A total of 60 people representing NPHL, EDCC, PPHLs, NTCC, NCASC, Sentinel sites and WHO were participated in the meeting.
- Facilitated NPHL in coordinating with designated COVID-19 laboratories. Continued collecting and editing the poster templates for the upcoming conference program on "COVID-19 Laboratory Experience Sharing".
- Technical support provided to NPHL in uploading gene sequencing data in Global Initiative on Sharing All Influenza Data (GISAD) platform.

Technical Expertise and Training

- Continued routine work from the team of Technical Expertise and Training³
- World Health Organization, Country Office for Nepal with financial support of ECHO



Handover ceremony of Skill Lab Equipment at Bir Hospital

Photo Courtesy: WHO Nepal/A. Maharjan

³ The routine works of the technical expertise and training team 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.

(European Civil Protection and Humanitarian Aid Operations); handed over the Skill Lab equipment to National Health Training Center and Bir Hospital. The skill lab equipment is the stepping-stone in establishing a “National Simulation Lab”. This is the first simulation lab in the country which will help in polishing the skills of healthcare workers in controlled and supervised environment. The initiative will enhance the capacity of NHTC and thus benefit the end users, that is, People of Nepal. This is a prominent step in strengthening the pre-hospital care.

Operational Support and Logistics

- Continued routine work from the team of Operation Support and Logistics⁴

Risk Communication and Community Engagement

- Ministry of Health and Population with support from WHO Country Office for Nepal conducted an interaction program with parliamentarians of Madhesh Province on 26 March 2022 on the importance of risk communication and community engagement. The chief guest of the program was Rt. Hon'ble Chairperson of the National Assembly, Mr. Ganesh Prasad Timilsina. Senior officials from MoHP and Department of Health Services along with WHO experts conducted sessions on the science behind public, health and social measures, Post COVID-19 condition, role of elected officials in promoting vaccination, among other topics.



- WHO continued to provide regular support
- for the production of the MoHP media briefing on COVID-19 which is held twice a week.
- Episode 69 of *Science in 5 (COVID-19: Tracking Variants)* was translated, dubbed, and published via the following links:

- Maithili: Facebook [link](#); OneDrive [link](#); YouTube [link](#)

A glimpse of the interaction program with parliamentarians of Madhesh Province on 26 March 2022 on the importance of risk communication and community engagement.

Photo Courtesy: WHO Nepal/A. Maharjan

⁴ 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.

- Episode 26 of *Science in 5* podcast in Nepali language was released on Soundcloud (link [here](#)). The topic of the episode was health concerns one might face after a COVID-19 infection. The news was shared via Facebook (link [here](#)) and Twitter [link [here](#) (English); link [here](#) (Nepali)]. The teaser was also shared via Facebook (link [here](#)) and Twitter (link [here](#)).
- The news of Nepal achieving over 80% vaccination coverage (in targeted population above 12 years of age) was shared via Facebook (link [here](#)) and Twitter (link [here](#)).
- The news of the handover of the equipment for the National Simulation Lab, being established at COVID-19 Unified Central Hospital in collaboration with the National Health Training Center, was shared via Facebook (link [here](#)) and Twitter (link [here](#)). The lab is the first of its kind in the country and will provide a setup for health care workers of Nepal to practice clinical skills before real-life application.
- On the occasion of *World Tuberculosis Day*, IEC materials were shared which highlighted the need to strengthen related services which were affected by COVID-19. Related quote cards of WHO Representative to Nepal was shared via Facebook [English (link [here](#)); Nepali (link [here](#))] and Twitter [English (link [here](#)); Nepali (link [here](#))].
- The MoHP press briefings on COVID-19 are being shared via Facebook and Twitter.
- The following documents were uploaded on *ReliefWeb* (link [here](#)):
 - ii. *Daily Focused COVID-19 Media Monitoring*,
 - iii. *Weekly COVID-19 EPI Dashboard*, and
 - iv. The latest *Weekly WHO Nepal COVID-19 Situation Update*.
- IEC materials on the following topics were shared via WHO, Country Office for Nepal, social media:
 - v. *Omicron*,
 - vi. *Safety and efficacy of COVID-19 vaccines*,
 - vii. *COVID-19 variants*,
 - viii. *Courses on health emergencies in OpenWHO*,
 - ix. *Use of risk communication during health emergencies*,
 - x. *Importance of a healthy lifestyle and COVID-19*,
 - xi. *Reducing risk for noncommunicable diseases and COVID-19*,
 - xii. *Safe celebrations of festivals during COVID-19*.

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](#)

CONTACT DETAILS

WHO Representative

Dr Rajesh Sambhajirao Pandav
WHO Representative to the
Government of Nepal
Email: pandavr@who.int

Health Cluster Co-lead

Dr Sunoor Verma
Pillar Lead – Partner Coordination
WHO Country Office for Nepal
COVID-19 Response IMS
Email: sverma@who.int

WHO Incident Manager

Dr Allison Gocotano
Team Leader - WHO Health Emergencies
Program (WHE)
WHO Country Office for Nepal
Email: gocotanoa@who.int

Communication/Media Focal Point

Ms Tsering Dolkar Gurung
Media, Communication and Public
Information Officer
WHO Country Office for Nepal
Email: gurungt@who.int