Situation Update #110 - Coronavirus Disease 2019 (COVID-19)  
WHO Country Office for Nepal  
Reporting Date: 16 May - 22 May 2022 (EPI Week 20)

HIGHLIGHTS  
(Data published in the MoHP Situation Report as of 22 May 2022 and same data published in EDCD Report as of 23 May 2022)

- Of the total RT-PCR confirmed COVID-19 cases, 98.77% (966,975) of cases have recovered, 0.01% (141) are active cases and 1.22% (11,952) are deaths.
- Among the total active cases, 99.3% (140) cases are in home isolation; 0.7% (1) of cases are undergoing hospital/institutional isolation. While 0.7% (1) of active case require ICU admission, none 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 (70) reported this week, 52.9% (37) are from Kathmandu district followed by Lalitpur district 7.1% (5). Majority of the new cases 60.0% (42) have been reported from Kathmandu Valley (Kathmandu, Lalitpur and Bhaktapur), Bagmati Province.

- COVID-19 vaccination coverage status (as of 23 May 2022)

<table>
<thead>
<tr>
<th></th>
<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>5,251,402</td>
<td>10,287,864</td>
<td>3,377,122</td>
<td>324,948</td>
<td>3,113,041</td>
</tr>
<tr>
<td>Second dose</td>
<td>4,392,161</td>
<td>9,134,750</td>
<td></td>
<td>236,393</td>
<td>2,616,075</td>
</tr>
</tbody>
</table>

NEPAL EPIDEMIOLOGICAL SITUATION

- Since 9 May 2021, all 7 provinces in the country are experiencing community transmission.
- Since the start of the COVID-19 pandemic, 78.0% (764,114/979,068) of RT-PCR confirmed cases were reported from three provinces, namely- Province 1, Bagmati Province and Lumbini Province. The Kathmandu valley area (Kathmandu, Bhaktapur, Lalitpur) in Bagmati Province has substantially high case load with 43.7% of national total (427,917/979,068), and 81.2% of the provincial total (427,917/527,140).
- Province-wise RT-PCR test positivity rate in Epi Week 20 ranged from 0.0% (Madhesh and Gandaki province) to 4.3% (Sudurpashchim province), with a national positivity rate at 0.4%. Karnali province did not report any test performed in the last week.
• Nepal reported a 25% increase in the number of new RT-PCR confirmed cases (n=70) in Epi week 20 compared to that in the previous week. Of these total cases reported last week, 74% of the cases have been reported from Province 1, Bagmati, and Lumbini province.
• Nepal did not report any death in Epi week 20 same as that in the previous week.

**National Influenza Surveillance**

• NIC-NPHL reported 1 Diagnostic Influenza sample on EPID-week 20 (16th - 22nd May 2022). The sample tested negative for both Influenza and SARS-CoV-2.
• Out of the total SARS-CoV-2 samples that tested Negative at NPHL on EPID-week 20 (16th - 22nd May 2022), 47 SARS-CoV-2 Negative samples were tested for Influenza. None of the samples tested positive for Influenza.
• This week WARUN (Walter Reed/AFRIMS Research Unit Nepal) has provided result of influenza test done in the EPID-week 17, 18 and 19. A total of 45 samples were tested for both Influenza and SARS-CoV-2. One sample tested positive for Influenza A/H3. All samples tested negative for SARS-CoV-2.
• From January 3rd, 2022, until May 22nd, 2022:
  o A total of 5 samples have tested positive for Influenza (2 Influenza B Positive and 3 Influenza A/H3) from 2187 samples (Sentinel and non-sentinel samples including SARS-CoV-2 Negative SARI and ILI cases).
  o Similarly, 206 samples have tested positive for SARS-CoV-2 from 610 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/)

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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=979,068) (Data reported on 22 May 2022 up to 19:00:00)

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.

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.
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 5 new cases reported in the past week in Province 1. Since a peak in week 3, cases are continuously decreasing. However, cases have increased by 25% 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 Province 1 decreased to 1.0% in the past week. A total of 101 tests were performed in the past week, 58% less 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.
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 22 May 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 10 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 400% 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 remained stable at 0.0% in the past week. A total of 160 tests were performed in the past week, 84% more than that in the previous week.
In Bagmati, 44 new cases were reported in the past week. Since a peak in week 3, cases are continuously decreasing. However, cases have increased by 2% in the past week compared to the previous week. There was no death reported in the past week, compared to 1 death in the previous week. The test positivity rate in Bagmati remained stable at 0.4% in the past week. A total of 15,467 tests were performed in the past week, 15% 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 22 May 2022)

In Gandaki, 2 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. 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 Gandaki remained stable at 0% in the past week. A total of 217 tests were performed in the past week, 128% 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 3 new cases in the past week. Since a peak in week 3, cases are continuously decreasing. However, cases have increased by 50% 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 0.5% in the past week. A total of 394 tests were performed in the past week, 673% more than that in the previous week.
In Karnali, 4 new cases were reported in the past week, same as that in the previous week. Since a peak in week 3, cases are continuously decreasing. However, cases have increased in the past week compared to no new cases in 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 remained stable at 0.0% in the past week with no test performed reported in the past week.
In Sudurpashchim, 2 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 25% 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 4.3% in the past week. A total of 23 tests were performed in the past week, 56% less than that in the previous week.
Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 22 May 2022 up to 19:00:00)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases</th>
<th>Total Confirmed cumulative cases RTPCR Tests</th>
<th>Total Confirmed cumulative cases Antigen RDT test</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</th>
<th>Antigen RDT test</th>
<th>Total confirmed cases in last 14 days RTP-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>127547</td>
<td>29611</td>
<td>157158</td>
<td>14.3</td>
<td>1715</td>
<td>Community transmission</td>
<td>0</td>
<td>9</td>
<td>9</td>
<td>6.7</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Madhesh</td>
<td>53204</td>
<td>1154</td>
<td>54358</td>
<td>4.9</td>
<td>783</td>
<td>Community transmission</td>
<td>0</td>
<td>12</td>
<td>12</td>
<td>9.0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Bagmati</td>
<td>527140</td>
<td>29940</td>
<td>557080</td>
<td>50.7</td>
<td>5164</td>
<td>Community transmission</td>
<td>1</td>
<td>87</td>
<td>88</td>
<td>65.7</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Gandaki</td>
<td>93681</td>
<td>22868</td>
<td>116549</td>
<td>10.6</td>
<td>1419</td>
<td>Community transmission</td>
<td>1</td>
<td>5</td>
<td>6</td>
<td>4.5</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Lumbini</td>
<td>109427</td>
<td>25535</td>
<td>134962</td>
<td>12.3</td>
<td>1864</td>
<td>Community transmission</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td>7.5</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Karnali</td>
<td>23909</td>
<td>5901</td>
<td>29810</td>
<td>2.7</td>
<td>491</td>
<td>Community transmission</td>
<td>1</td>
<td>4</td>
<td>5</td>
<td>3.7</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>44160</td>
<td>5425</td>
<td>49585</td>
<td>4.5</td>
<td>516</td>
<td>Community transmission</td>
<td>0</td>
<td>4</td>
<td>4</td>
<td>3.0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>National Total</td>
<td>979068</td>
<td>120434*</td>
<td>1099502</td>
<td>100</td>
<td>11952</td>
<td>Community transmission</td>
<td>8</td>
<td>126</td>
<td>134</td>
<td>100</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

*Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 15 May 2022, 140,209 but IMU reported 120,434

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=974,036) (Data reported on 22 May 2022 up to 19:00:00)**

![Distribution of RT-PCR positive COVID-19 cases by age and sex](image)

**Note:** Core epidemiological variables under process for 5032 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=979,068)  
(Data reported on 22 May 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>9120</td>
<td>16</td>
<td>23</td>
<td>13</td>
<td>0.43</td>
</tr>
<tr>
<td>5-14</td>
<td>33706</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.06</td>
</tr>
<tr>
<td>15-24</td>
<td>148092</td>
<td>91</td>
<td>96</td>
<td>69</td>
<td>0.13</td>
</tr>
<tr>
<td>25-34</td>
<td>271143</td>
<td>386</td>
<td>264</td>
<td>149</td>
<td>0.24</td>
</tr>
<tr>
<td>35-44</td>
<td>202286</td>
<td>875</td>
<td>450</td>
<td>279</td>
<td>0.66</td>
</tr>
<tr>
<td>45-54</td>
<td>141606</td>
<td>1385</td>
<td>644</td>
<td>565</td>
<td>1.43</td>
</tr>
<tr>
<td>55-64</td>
<td>90095</td>
<td>1682</td>
<td>796</td>
<td>769</td>
<td>2.75</td>
</tr>
<tr>
<td>65-74</td>
<td>48542</td>
<td>1631</td>
<td>885</td>
<td>940</td>
<td>5.18</td>
</tr>
<tr>
<td>75-84</td>
<td>22840</td>
<td>1221</td>
<td>654</td>
<td>762</td>
<td>8.21</td>
</tr>
<tr>
<td>85+</td>
<td>6606</td>
<td>519</td>
<td>288</td>
<td>274</td>
<td>12.22</td>
</tr>
<tr>
<td>Unknown</td>
<td>5032</td>
<td>19</td>
<td>7</td>
<td>11</td>
<td>0.52</td>
</tr>
<tr>
<td>National</td>
<td>979068</td>
<td>7838</td>
<td>4114</td>
<td>3841</td>
<td>1.22</td>
</tr>
</tbody>
</table>

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 11,952 deaths have been reported. Out of the total deaths, 7,838 (65.6%) were male and 4,114 (34.4%) were female. Amongst the deaths, 3,841 persons (32.1%) had at least one known comorbidity. The age specific case fatality ratio (CFR) progressively increases with age, ranging from 0.06% to 12.22%. 
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 56,85,502 RT-PCR tests were performed nationwide by 106 designated COVID-19 labs functional across the nation (as of 22nd May 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 6 designated COVID-19 laboratories participated in the NQAP this week. The result of 3 participating laboratories was 100% concordant and the result of rest 3 laboratories are awaited.
- Technical support provided to NPHL in uploading the result of genome sequencing of 14 SARS-CoV-2 sample in GISAID platform (Global Initiative in Sharing All Influenza Data).

**Technical Expertise and Training**

- Continued routine work from the team of Technical Expertise and Training²
- WHO provided support to National Health Training Center (NHTC) for organizing a two-day orientation on "Users training on Biomedical Equipment" at Shahid Gangalal National Heart Center. The orientation was conducted on 19th and 20th May 2022, with the objective to enable users to effectively operate and properly handle the respiratory devices such as BiPAP/CPAP, HFNC, Oxygen concentrator, ventilator and oxygen cylinder, which are used for management of COVID-19 cases. A total of 16 healthcare workers attended the orientation, which included two anesthesiologists, three medical officers, and 11 senior staff nurses from Shahid Gangalal National Heart Center.

² 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.

**Photo Courtesy:** WHO Nepal/S.Rana

Users training on Biomedical Equipment - hands on session of HFNC device

Situation Update #109 - Corona virus Disease 2019 (COVID-19)
WHO Country Office for Nepal
Friday 27 May 2022
**Operational Support and Logistics**

- Continued routine work from the team of Operation Support and Logistics³

**Risk Communication and Community Engagement**

- Episode 71 of Science in 5 (Vaccines and children) was translated, dubbed, and published via the following links:
  i. Nepali: Facebook [link](#); OneDrive [link](#); YouTube [link](#)
  ii. Maithili: Facebook [link](#); OneDrive [link](#); YouTube [link](#)

- The feature story (WHO: An unwavering voice for vaccine equity), originally published in the [WHO Results Report 2020-2021](#), was shared via Facebook (link [here](#)), Twitter (link [here](#)), and website (link [here](#)). The piece describes how Nepal made significant progress in its COVID-19 vaccination campaign, with valiant efforts to reach remote areas, ensuring that no one is left behind.

- WHO and MoHP press briefings on COVID-19 are being shared via Facebook and Twitter.

- The following documents were uploaded on ReliefWeb (link [here](#)):
  i. Weekly COVID-19 EPI Dashboard, and

- IEC materials on the following topics were shared via WHO, Country Office for Nepal, social media:
  i. Reducing risk for noncommunicable diseases and COVID-19,
  ii. Importance of a healthy lifestyle and COVID-19,
  iii. Safety and efficacy of COVID-19 vaccines,
  iv. Preventive measures for COVID-19, especially during celebrations.

- Support provided to adapt the theme/slogan for World No Tobacco Day 2022 into Nepali and shared with NHEICC for approval.

- Support provided in drafting and finalization of talking points for Spokesperson of Ministry of Health and Population (MoHP) for the weekly COVID-19 Media briefing. The key messages included in the MoHP briefing on 18 May 2022 are: COVID-19 updates, Vaccination coverage and Key message on PHSM and strengthening surveillance and message on symptoms, causes, risk factor and prevention of Hypertension.

**What are the health clusters partners doing?**

- Continued routine work from the team of Partner Coordination and Donor Relation⁴

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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.

⁴ The routine works include coordinating with all the divisions, units, centers of Ministry of Health and Population (MoHP) and Department of Health Services (DoHS), and the health partners for effective conduction of Health Cluster Coordination meeting. Furthermore, the works included the documentation and distribution of meeting minutes, health partner’s support updates in the 3Ws (Who, What, Where) and thematic mapping, updates of WHO’s support in the UNRCO 3W sheet, participate in multi-sectoral and emergency and disaster preparedness and response platforms and activities and the humanitarian country team operational meetings. Moreover, necessary support for effective coordination of Health Emergency Operation Centre (HEOC) with different stakeholders is provided.
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 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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