Situation Update #111 - Coronavirus Disease 2019 (COVID-19)
WHO Country Office for Nepal

Reporting Date: 23 May - 29 May 2022 (EPI Week 21)

HIGHLIGHTS
(Data published in the MoHP Situation Report as of 29 May 2022 and same data published in EDCD Report as of 30 May 2022)

- Of the total RT-PCR confirmed COVID-19 cases, 98.77% (967,065) of cases have recovered, 0.01% (110) are active cases and 1.22% (11,952) are deaths.
- All the active cases (110) are in home isolation.
- None of the districts reported more than 500 active cases.
- Among the new RT-PCR confirmed cases (59) reported this week, 55.9% (33) are from Kathmandu district. Majority of the new cases 59.3% (35) have been reported from Kathmandu Valley (Kathmandu, Lalitpur and Bhaktapur), Bagmati Province.

- COVID-19 vaccination coverage status (as of 30 May 2022)

### 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% (764,161/979,127) 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 (427,952/979,127), and 81.2% of the provincial total (427,952/527,179).
- Province-wise RT-PCR test positivity rate in Epi Week 21 ranged from 0.0% (Madhesh and Lumbini province) to 3.4% (Gandaki province), with a national positivity rate at 0.4%. Karnali and Sudurpashchim province did not report any test performed in the last week.
- Nepal reported a 16% decrease in the number of new RT-PCR confirmed cases (n=59) in Epi week 21 compared to that in the previous week. Of these total cases reported last week, 80% of the cases have been reported from Province 1, Bagmati, and Lumbini province.
- Nepal did not report any death in Epi week 21 same as that in the previous week.

<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>5,259,339</td>
<td>1,029,411</td>
<td>3,382,994</td>
<td>326,579</td>
</tr>
<tr>
<td>Second dose</td>
<td>4,340,571</td>
<td>9,148,741</td>
<td></td>
<td>240,536</td>
</tr>
</tbody>
</table>

SITUATION OVERVIEW
(Data as of 29 May 2022)

### NEPAL

Cumulative confirmed cases
- RT-PCR: 979,127
- Antigen RDT: 140,234

Cumulative deaths: 11,952

Cumulative tests
- RT-PCR: 5,699,370
- Antigen RDT: 1,193,697

### SOUTH-EAST ASIA REGION

Cumulative cases (%)
- 58,122,050 (11%)

Cumulative deaths (%)
- 788,614 (13%)

### GLOBAL

Cumulative cases (%)
- 5,266,547,320 (100%)

Cumulative deaths (%
- 6,287,975 (100%)
National Influenza Surveillance

- The teams of WHO and NPHL visited Provincial Public Health Laboratory (Province 1) and Koshi Hospital to attend “Implementation meeting of Integrated Influenza SARS CoV-2 Sentinel Surveillance in Nepal” on 26 and 27 May 2022 at Biratnagar, Nepal. WHO facilitated in conducting the meeting. Representatives from Provincial Health Directorate, Biratnagar Metropolitan Office and Koshi Hospital participated in the meeting.

- NIC-NPHL reported 1 Diagnostic Influenza sample on EPID-week 21 (23 - 29 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 EPID-week 21 (23 - 29 May 2022), 74 SARS-CoV-2 Negative samples were tested for Influenza. None of the samples tested positive for Influenza.

- From January 3rd 2022 until May 29th, 2022:
  - A total of 5 samples have tested positive for Influenza (2 Influenza B Positive and 3 Influenza A/H3) from 2262 samples (Sentinel and non-sentinel samples including SARS-CoV-2 Negative SARI and ILI cases).
  - Similarly, 206 samples have tested positive for SARS-CoV-2 from 611 Influenza Negative samples (Sentinel/non-sentinel ILI/SARI samples).

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=979,127) (Data reported on 29 May 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.
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.
There were 6 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 20% 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 increased to 1.6% in the past week. A total of 128 tests were performed in the past week, 27% 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.
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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 29 May 2022)

There were 4 new cases reported in the past week in Madhesh province. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 60% 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 131 tests were performed in the past week, 18% 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.
In Bagmati, 39 new cases were reported 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 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 13,327 tests were performed in the past week, 14% less than that in the previous week.
In Gandaki, 5 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 150% 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 increased to 3.4% in the past week. A total of 147 tests were performed in the past week, 32% less than that in the previous week.
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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 29 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.

Lumbini reported 2 new cases 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 Lumbini decreased to 0.0% in the past week. A total of 135 tests were performed in the past week, 66% less than that in the previous week.
In Karnali, 3 new cases were reported in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased 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 Karnali remained stable at 0.0% in the past week with no test performed reported in the past week.
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Figure 3A7: RT-PCR confirmed COVID-19 cases in Sudurpaschim Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 29 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.

In Sudurpashchim, no new case was reported in the past week. Since a peak in week 4, cases are in a decreasing trend. Cases have decreased by 100% 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 decreased to 0.0% in the past week with no test performed reported in the past week.
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Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 29 May 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>127553</td>
<td>29611</td>
<td>157164</td>
<td>14.3</td>
<td>1715</td>
<td>Community transmission</td>
<td>0</td>
<td>11</td>
<td>11</td>
<td>8.4</td>
<td>0</td>
</tr>
<tr>
<td>Madhesh</td>
<td>53208</td>
<td>1154</td>
<td>54362</td>
<td>4.9</td>
<td>783</td>
<td>Community transmission</td>
<td>0</td>
<td>14</td>
<td>14</td>
<td>10.7</td>
<td>0</td>
</tr>
<tr>
<td>Bagmati</td>
<td>527179</td>
<td>29940</td>
<td>557119</td>
<td>50.7</td>
<td>5164</td>
<td>Community transmission</td>
<td>0</td>
<td>83</td>
<td>83</td>
<td>63.4</td>
<td>0</td>
</tr>
<tr>
<td>Gandaki</td>
<td>93686</td>
<td>22869</td>
<td>116555</td>
<td>10.6</td>
<td>1419</td>
<td>Community transmission</td>
<td>2</td>
<td>7</td>
<td>9</td>
<td>6.9</td>
<td>0</td>
</tr>
<tr>
<td>Lumbini</td>
<td>109429</td>
<td>25535</td>
<td>134964</td>
<td>12.3</td>
<td>1864</td>
<td>Community transmission</td>
<td>0</td>
<td>5</td>
<td>5</td>
<td>3.8</td>
<td>0</td>
</tr>
<tr>
<td>Karnali</td>
<td>23912</td>
<td>5901</td>
<td>29813</td>
<td>2.7</td>
<td>491</td>
<td>Community transmission</td>
<td>0</td>
<td>7</td>
<td>7</td>
<td>5.3</td>
<td>0</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>2</td>
<td>2</td>
<td>1.5</td>
<td>0</td>
</tr>
<tr>
<td>National Total</td>
<td>979127</td>
<td>120435*</td>
<td>1099562</td>
<td>100</td>
<td>11952</td>
<td>Community transmission</td>
<td>2</td>
<td>129</td>
<td>131</td>
<td>100</td>
<td>0</td>
</tr>
</tbody>
</table>

*Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 15 May 2022, 140,234 but IMU reported 120,435

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=974,095) (Data reported on 29 May 2022 up to 19:00:00)

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=979,127) (Data reported on 29 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>9121</td>
<td>16</td>
<td>23</td>
<td>13</td>
<td>0.43</td>
</tr>
<tr>
<td>5-14</td>
<td>33709</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.06</td>
</tr>
<tr>
<td>15-24</td>
<td>148095</td>
<td>91</td>
<td>96</td>
<td>69</td>
<td>0.13</td>
</tr>
<tr>
<td>25-34</td>
<td>271166</td>
<td>386</td>
<td>264</td>
<td>149</td>
<td>0.24</td>
</tr>
<tr>
<td>35-44</td>
<td>202299</td>
<td>875</td>
<td>450</td>
<td>279</td>
<td>0.65</td>
</tr>
<tr>
<td>45-54</td>
<td>141610</td>
<td>1385</td>
<td>644</td>
<td>565</td>
<td>1.43</td>
</tr>
<tr>
<td>55-64</td>
<td>90102</td>
<td>1682</td>
<td>796</td>
<td>769</td>
<td>2.75</td>
</tr>
<tr>
<td>65-74</td>
<td>48546</td>
<td>1631</td>
<td>885</td>
<td>940</td>
<td>5.18</td>
</tr>
<tr>
<td>75-84</td>
<td>22841</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>979127</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 0.05% 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 56,99,370 RT-PCR tests were performed nationwide by 106 designated COVID-19 labs functional across the nation (as of 29th 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 4 designated COVID-19 laboratories participated in the NQAP this week. The result of all participating laboratories was 100% concordant.

**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

**Risk Communication and Community Engagement**

- Episode 30 of *Science in 5* podcast in Nepali language was released on Soundcloud (link [here](#)). The topic of the episode was COVID-19 vaccines for children. 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](#) (English); link [here](#) (Nepali)).
- The web story – *COVID-19 laboratories across Nepal share best practices for strengthening future pandemic response* – was published on the website for WHO, Country Office for Nepal (link [here](#)). The story describes how more than 80 COVID-19 laboratories participated in a 'poster walk' to discuss best practices, strengths, and challenges for creating a stronger response to COVID-19 and other health emergencies. The update was also shared via Facebook (link [here](#)) and Twitter (link [here](#)).
- The impact story from Nepal – *Building laboratory Capacity for Diagnostic Testing and Sequencing of COVID-19 in Nepal* – published in WHO’s *Reports from the Ground*, was shared via Facebook (link [here](#)) and Twitter (link [here](#)). The story highlights how Nepal rapidly expanded its capacity to detect known and unknown emerging pathogens.

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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.

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.
On the occasion of the 75th World Health Assembly, and 3rd Global Walk The Talk, a short video on the Walk The Talk held in Nepal was shared via Facebook (link here) and Twitter (link here). The event promotes physical activity and ways to conduct public events safely with COVID-19 preventive measures.

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. Noncommunicable Diseases and COVID-19,
ii. COVID-19 preventive measures during natural disasters,

Regular support to the Health Coordination Division, Spokesperson of Ministry of Health and Population (MoHP) for the weekly National briefing. This week's briefing held on 25 May 2022 included information about COVID-19 case and vaccination updates, Obstetric Fistula and free treatment (surgical cure) services provided by government of Nepal, information on monkeypox, updates about 75th World Health Assembly and Nepal's participation, and message on monsoon preparedness.

What are the health clusters partners doing?

- Continued routine work from the team of Partner Coordination and Donor Relation
- 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.
- A team of Health Emergency Operation Centre (HEOC) conducted a Focus Group Discussion to assess the performance of Health Cluster Coordination Meetings conducted till date for health sector coordination of COVID-19 response.

Focus Group Discussion Conducted by Health Cluster
Photo Courtesy: WHO Nepal/T. Bhatta
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

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