Situation Update #156 - Coronavirus Disease 2019 (COVID-19)
WHO Country Office for Nepal

Reporting Date: 3 - 9 April 2023 (Epi Week 14)

HIGHLIGHTS
(Data published in the MoHP Situation Report as of 9 April 2023 and same data published in EDCD Report as of 10 April 2023)

- Of the total RT-PCR confirmed COVID-19 cases, 98.8% (989,384) of cases have recovered, 0.01% (396) are active cases, and 1.19% (12,020) are deaths.
- Among the new RT-PCR confirmed cases (379) reported this week, 49.9% (189 cases) are from Kathmandu district followed by Lalitpur district with 15% (57 cases). Majority of the new cases 70.4% (267) have been reported from Kathmandu Valley (Kathmandu, Lalitpur, and Bhaktapur) in Bagmati Province.

COVID-19 vaccination coverage status (as of 4 April 2023)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>First dose</th>
<th>Second dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Covi-AstraZeneca</td>
<td>5,586,600</td>
<td>4,837,409</td>
</tr>
<tr>
<td>Vero Cell</td>
<td>10,398,573</td>
<td>9,268,004</td>
</tr>
<tr>
<td>Janssen</td>
<td>3,546,120</td>
<td></td>
</tr>
<tr>
<td>Pfizer</td>
<td>5,013,034</td>
<td>3,842,462</td>
</tr>
<tr>
<td>Moderna</td>
<td>3,228,669</td>
<td>2,830,970</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, a total of 78.2% (783,452/1,001,800) of RT-PCR confirmed cases were reported from three provinces, namely - Koshi, Bagmati, and Lumbini Provinces. The Kathmandu valley area (Kathmandu, Bhaktapur, Lalitpur) in Bagmati Province has substantially high case load with 44.1% of national total (442,215/1,001,800) and 81.4% of the provincial total (442,215/543,343).
- Province-wise, RT-PCR test positivity rate in Epi week 14 ranged from 0.0% (Madhesh and Lumbini Provinces) to 37.5% (Gandaki Province) with a national positivity rate at 15.0%. Karnali Province did not report any RT-PCR test performed in the last week.
- Nepal reported 91% increase in the number of new RT-PCR confirmed cases (n=379) in Epi week 14 compared to that in the previous week. Of these total cases reported last week, 88% of the cases have been reported from Koshi, Lumbini, and Bagmati Provinces.

National Influenza Surveillance

- National Influenza Center (NIC) – National Public Health Laboratory (NPHL) reported 25 Diagnostic Influenza samples on Epi week 14 (3-9 April 2023). Two samples tested Influenza A positive (to be subtyped) and 1 sample tested Influenza B positive. Seven samples were tested SARS-CoV-2 positive.
- NIC-NPHL received 36 Influenza samples from sentinel hospitals on Epi week 14.
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- One sample tested Influenza A Positive (to be subtyped) and 1 sample tested Influenza B Positive.
- Sixteen samples tested SARS-CoV-2 Positive.

- Provincial Public Health Laboratories (PPHLs) reported testing of 107 samples for Influenza-SARS-CoV-2 using Multiplex kit on Epi week 14.
  - Three samples tested Influenza A positive (to be subtyped) and 1 sample tested Influenza B positive. Seventeen samples tested SARS-CoV-2 positive.
  - A total of 1411 samples have been tested by PPHLs from 2 Jan – 9 Apr 2023.

From 2 January 2023 until 9 April 2023:
- A total of 436 samples tested positive for Influenza (75 Influenza B, 316 Influenza A/H3N2, 35 Influenza A(H1N1) pdm09 and 10 Influenza A (to be subtyped)) from 2881 samples (sentinel and non-sentinel SARI and ILI samples).
- Similarly, 79 samples tested positive for SARS-CoV-2 from dual testing of Influenza and SARS-CoV-2 among 2610 samples received from sentinel sites and non-sentinel SARI and ILI 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= 1001800)(Data reported on 9 April 2023 up to 19:00:00)

![Graph showing RT-PCR confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation.](image)

**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. Another wave of cases steadily soared up towards the middle of May 2022 following an overall declining trend since the middle of August 2022. Since the end of March 2023, cases are soaring up following an increasing trend.

Figure 2: Cumulative case count of RT-PCR confirmed COVID-19 (N= 1001800)(Data reported on 9 April 2023 up to 19:00:00)

![Graph showing cumulative case count of RT-PCR confirmed COVID-19 cases.](image)

**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 confirmed on 23 January 2020. Cases have been largely reported from Bagmati Province followed by Koshi Province 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 9 April 2023)

There were 27 new cases reported in the past week in Koshi province. Cases have increased by 200% in the past week compared to that in the previous week. There was no death reported in the past week, same as in the previous week. The test positivity rate in Koshi province increased to 21.7% in the past week. A total of 60 tests were performed in the past week, 71% more than that in the previous week.
There were 2 new cases reported in the past week in Madhesh province. Cases have increased in the past week compared to none in the previous week. There was no death reported in the past week, same as in the previous week. The test positivity rate in Madhesh province retained at 0.0% in the past week. A total of 6 tests were performed in the past week, 90% less 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 9 April 2023)
In Bagmati Province, 295 new cases were reported in the past week. Cases have increased by 83% in the past week compared to that in the previous week. There was no death reported in the past week, same as in the previous week. The test positivity rate in Bagmati increased to 14.5% in the past week. A total of 2367 tests were performed in the past week, 10% 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 9 April 2023)

In Gandaki Province, 22 new cases were reported in the past week. Cases have increased by 22% in the past week compared to that in the previous week. There was no death reported in the past week, same as in the previous week. The test positivity rate in Gandaki Province increased to 37.5% in the past week. A total of 24 tests were performed in the past week, 35% 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 9 April 2023)

Lumbini Province reported 10 new cases in the past week. Cases have increased by 233% in the past week compared to that in the previous week. There was no death reported in the past week, same as in the previous week. There was 1 test performed reported in the past 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 9 April 2023)
In Karnali Province, 2 new cases were reported in the past week, same as in the previous week. There was no death reported in the past week, same as in the previous week. There was no test performed reported in the past week.

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 9 April 2023)

In Sudurpaschim Province, 21 new cases were reported in the past week. Cases have increased by 200% in the past week compared to that in the previous week. There was no death reported in the past week, same as in the previous week. The test positivity rate in Sudurpaschim Province increased to 19.1% in the past week. A total of 68 tests were performed in the past week, 45% more than that in the previous week.
Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by Provinces (Data reported on 9 April 2023 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>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>129599</td>
<td>30326</td>
<td>159925</td>
<td>1722</td>
<td>Community transmission</td>
<td>4</td>
<td>36</td>
<td>40</td>
<td>4.9</td>
<td>0</td>
</tr>
<tr>
<td>Madhesh</td>
<td>53910</td>
<td>1179</td>
<td>55089</td>
<td>783</td>
<td>Community transmission</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>0.2</td>
<td>0</td>
</tr>
<tr>
<td>Bagmati</td>
<td>543343</td>
<td>32904</td>
<td>576247</td>
<td>5203</td>
<td>Community transmission</td>
<td>94</td>
<td>456</td>
<td>550</td>
<td>67.9</td>
<td>0</td>
</tr>
<tr>
<td>Gandaki</td>
<td>95432</td>
<td>24694</td>
<td>120126</td>
<td>1428</td>
<td>Community transmission</td>
<td>15</td>
<td>40</td>
<td>55</td>
<td>6.8</td>
<td>0</td>
</tr>
<tr>
<td>Lumbini</td>
<td>110510</td>
<td>28194</td>
<td>138704</td>
<td>1874</td>
<td>Community transmission</td>
<td>22</td>
<td>13</td>
<td>35</td>
<td>4.3</td>
<td>0</td>
</tr>
<tr>
<td>Karnali</td>
<td>24022</td>
<td>6356</td>
<td>30378</td>
<td>492</td>
<td>Community transmission</td>
<td>19</td>
<td>2</td>
<td>21</td>
<td>2.6</td>
<td>0</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>44984</td>
<td>6272</td>
<td>51256</td>
<td>518</td>
<td>Community transmission</td>
<td>79</td>
<td>28</td>
<td>107</td>
<td>13.2</td>
<td>0</td>
</tr>
<tr>
<td>National Total</td>
<td>1001800</td>
<td>129925*</td>
<td>1131725</td>
<td>12020</td>
<td>Community transmission</td>
<td>233</td>
<td>577</td>
<td>810</td>
<td>100</td>
<td>0</td>
</tr>
</tbody>
</table>

*Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 9 April 152600, IMU reported 129925.

Notes:
1. The source for the 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 entries and manual errors such as city names in place of districts, district names 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.
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= 1001800) (Data reported on 9 April 2023 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>9327</td>
<td>16</td>
<td>23</td>
<td>13</td>
<td>0.42</td>
</tr>
<tr>
<td>5-14</td>
<td>34199</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.06</td>
</tr>
<tr>
<td>15-24</td>
<td>151522</td>
<td>92</td>
<td>96</td>
<td>70</td>
<td>0.12</td>
</tr>
<tr>
<td>25-34</td>
<td>277867</td>
<td>387</td>
<td>265</td>
<td>151</td>
<td>0.23</td>
</tr>
<tr>
<td>35-44</td>
<td>206493</td>
<td>875</td>
<td>452</td>
<td>281</td>
<td>0.64</td>
</tr>
<tr>
<td>45-54</td>
<td>144466</td>
<td>1396</td>
<td>645</td>
<td>574</td>
<td>1.41</td>
</tr>
<tr>
<td>55-64</td>
<td>92216</td>
<td>1691</td>
<td>803</td>
<td>783</td>
<td>2.7</td>
</tr>
<tr>
<td>65-74</td>
<td>49970</td>
<td>1640</td>
<td>893</td>
<td>957</td>
<td>5.07</td>
</tr>
<tr>
<td>75-84</td>
<td>23624</td>
<td>1228</td>
<td>659</td>
<td>773</td>
<td>7.99</td>
</tr>
<tr>
<td>85+</td>
<td>6879</td>
<td>524</td>
<td>289</td>
<td>279</td>
<td>11.82</td>
</tr>
<tr>
<td>Unknown</td>
<td>5237</td>
<td>19</td>
<td>7</td>
<td>11</td>
<td>0.5</td>
</tr>
<tr>
<td>National</td>
<td>1001800</td>
<td>7881</td>
<td>4139</td>
<td>3902</td>
<td>1.20</td>
</tr>
</tbody>
</table>

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

COVID-19 positive lab result is temporally associated with death; causal association under investigation.
A total of 12,020 deaths have been reported. Out of the total deaths, 7,881 (65.6%) were male and 4,139 (34.4%) were female. Amongst the deaths, 3,902 persons (32.5%) had at least one known comorbidity. The age specific case fatality ratio (CFR) progressively increases with age, ranging from 0.06% to 11.8%.

**PREPAREDNESS AND RESPONSE**

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

- From 3 November 2022 onwards, the Government of Nepal has started administrating second dose COVID-19 booster vaccination for people aged 55 and above and the vulnerable population group (immune-deficiency/chronic patients, pregnant women, and health workers).

What is the WHO Country Office for Nepal doing?

**Laboratory Diagnosis**

- WHO Nepal has been providing support to the NPHL in continued routine work.
- WHO Nepal also provided technical support to NPHL in uploading the result of genome sequencing of 24 SARS-CoV-2 samples performed on 31 March in GISAID platform.

**Technical Expertise and Training**

- Continued routine work from the team of Technical Expertise and Training.\(^2\)
- WHO Nepal attended the first steering committee meeting on ‘National Infection Prevention and Control (IPC)’ on 9 April 2023 at Department of Health Services (DoHS). This meeting was chaired by Director General of DoHS, Dr Dipendra Raman Singh. This meeting formalized National IPC steering, annual work plan of IPC activities, and initiated discussions on the development of the implementation manual for the IPC guidelines. 14 members, which included NPHL, Nursing and Social Security Division (NSSD), Curative Services Division (CSD), Management Division, Epidemiology and Disease Control Division (EDCD), National Health Training Center (NHTC), National Health Education Information and Communication Center (NHEICC), Quality Standard and Regulation Division, and invitee members from WHO, were present. This activity is an annual plan of NSSD for this fiscal year and supported by WHO.

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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. To perform these activities, the team coordinates and discuss with relevant government authorities and partners for effective planning and conducting the various activities.
Operational Support and Logistics
• Continued routine work from the team of Operation Support and Logistics.\(^3\)

Risk Communication and Community Engagement
• The MoHP and WHO marked *World Health Day* with a program featuring presentations and talks focused on the theme - Health For All - which was shared via Facebook (link [here](#)) and Twitter (link [here](#)). Public health achievements were celebrated, while commitments were made to support Nepal as it works towards its path to ensure everyone, everywhere in the country has equal and equitable access to health and health services. The live feed of the event was also shared via Facebook (link [here](#)) and Twitter (link [here](#)). A *Walk The Talk* event, with WHO Health Champion for Nepal, Dr Rita Thapa, was also organized to commemorate the occasion, and was shared via Facebook (link [here](#)), Twitter (link [here](#)), and Instagram (link [here](#)).

\(^3\) 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.
• The news of the district level review meeting on COVID-19 vaccination and routine immunization was shared via website (link here).
• The following IEC materials on World Health Day was shared via the following links:
  o Campaign video in Nepali: Facebook (link here); Twitter (link here)
  o Congratulatory message from Hon’ble Prime Minster: Facebook (link here); Twitter (link here); Instagram (link here)
  o Congratulatory message from Hon’ble Secretary, MoHP: Facebook (link here); Twitter (link here)
  o Congratulatory message from UN Resident Coordinator in Nepal: Facebook (link here); Twitter (link here)
  o Global Public Health Milestone: Facebook (link here); Twitter (link here)
  o Quote cards from WHO Representative to Nepal: Facebook (link here), Twitter (link here); Instagram (link here)
  o Walk the Talk event: Facebook (link here); Twitter (link here); and Instagram (link here)
• IEC materials on the following topics were shared via social media:
  o Update on Omicron XBB.1.16,
  o Preventive measures of COVID-19,
  o Importance of COVID-19 vaccines and boosters,
  o Physical activity and COVID-19
The Weekly COVID-19 EPI Dashboard was uploaded on ReliefWeb (link here) and WHO, Country Office for Nepal, website (link here).
The Weekly WHO Nepal COVID-19 Situation Update was uploaded on ReliefWeb (link here) and WHO, Country Office for Nepal, website (link here).
The Focused COVID-19 and Health Media Monitoring was uploaded on ReliefWeb (link here).
WHO press briefings on COVID-19 are being shared via social media.

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 clusters 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.
- COVID-19 consultation is being provided continuously by specialist teams through tele-medicine services.

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

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.
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