

Situation Update #36 - Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Reporting Date: 16 - 22 December 2020

HIGHLIGHTS

- Number of RT-PCR tests, positivity rate, number of active cases and cases in home isolation are declining in trend over the last one month.
- Of the total cases, 7515 (2.9%) are active cases of which 42.7% continues to be from the Kathmandu district with additional cases throughout wards and palikas of Kathmandu Valley.
- There is only one district (Mugu) with no active cases, five districts with more than 200 active cases and two districts (Kathmandu and Lalitpur) with more than 500 active cases as of 23 December 2020.
- Among 3396 (45.2%) patients admitted at hospital/institutional isolation center, 248 patients are in intensive care (ICU) with 50 on ventilator support. On average, about 9 deaths per day were recorded this week.

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 23 December 2020, T07:00:00 hours (Week no. 52), a total 255,235 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR); 18,84,181 RT-PCR tests have been performed nationwide by 80 designated COVID-19 labs functional across the nation (as of 23 Dec 2020).
- All 7 provinces in the country are now experiencing transmission via clusters of cases.
- Province-wise test positivity rate in Week 51 ranged from 12.0% (Province 1) to 24.3% (Gandaki Province), with national positivity rate averaging 15.6%.
- Overall, the gender distribution remains skewed towards males, who constitute 65% (166,476/255,235) of the confirmed cases.
- A total of forty-six samples were received for Influenza on EPID-week 51 (14 Dec to 20 Dec 2020). None of the samples tested positive for influenza. From January until 20 Dec 2020, a total of 1049 samples have been tested for Influenza and SARS-CoV-2. Twenty-one samples have tested positive for SARS-CoV-2 (which are included in COVID-19 database).

SITUATION OVERVIEW

NEPAL

(Data as of 23 December 2020, 07:00:00 hours)

255,235 confirmed cases
1,798 deaths
18,84,181 RT-PCR tests (as of 22 Dec 2020)

SOUTH-EAST ASIA REGION

(Data as of 10am CEST 20 December 2020)

1,16,10,444 confirmed cases
1,76,826 deaths

GLOBAL

(Data as of 10am CEST 20 December 2020)

7,51,29,306 confirmed cases
16,80,794 deaths

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 20 December 2020 from #Global Weekly Epidemiological Update19) and cumulative incidence rate (per 100,000)

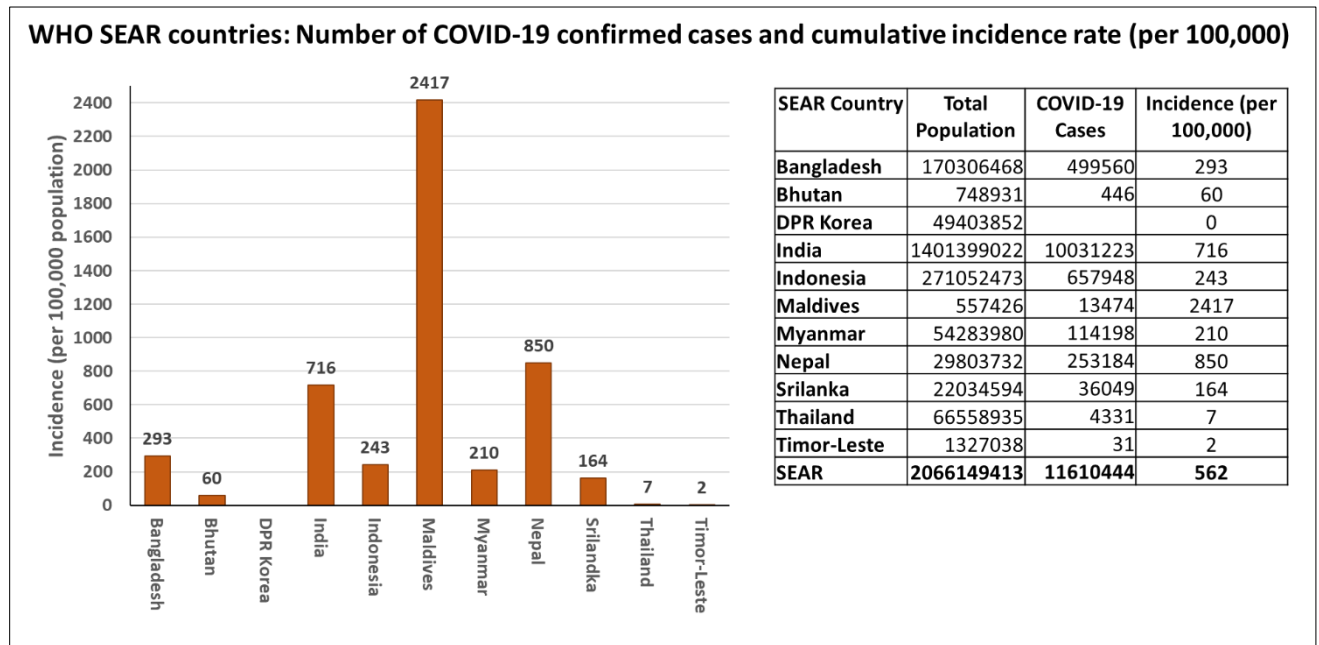
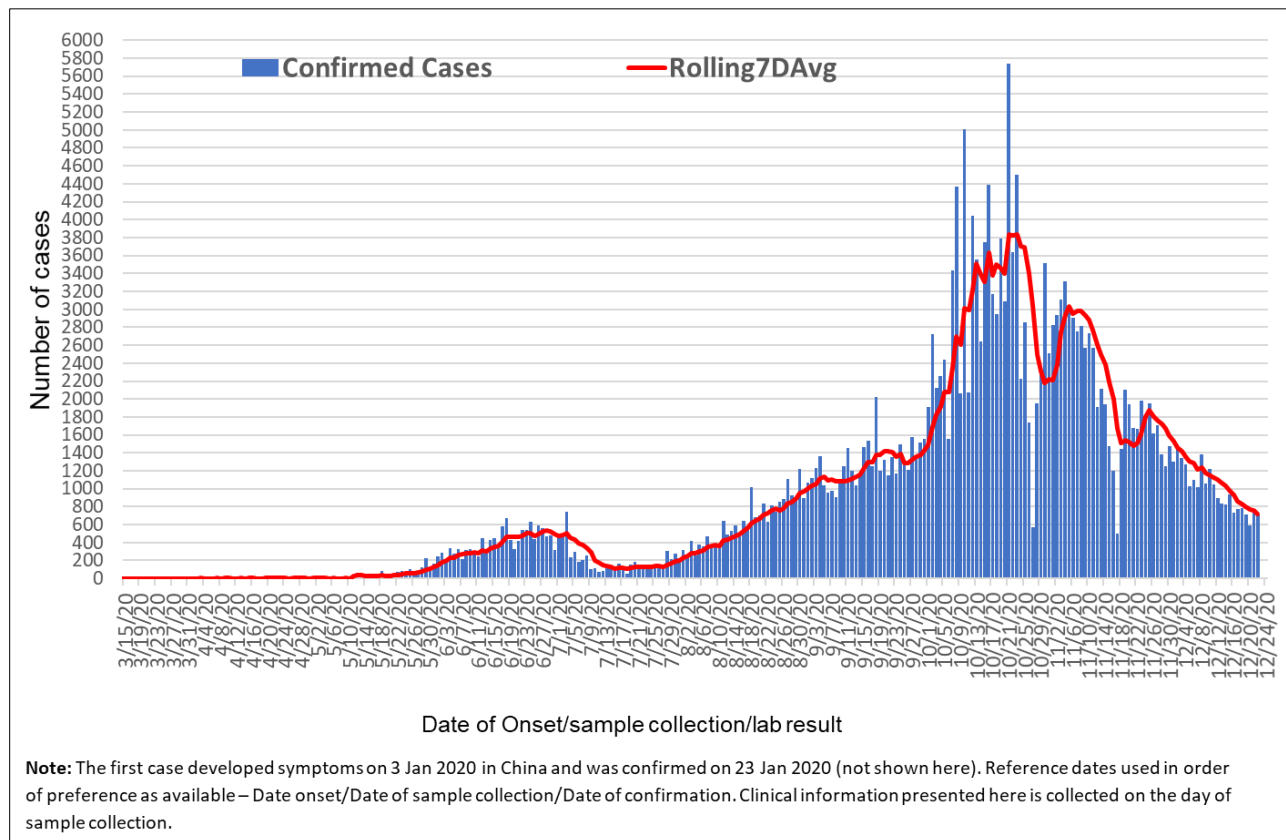


Figure 2 A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 255235) (Data updated on 23 December 2020 07:00:00)



Nationally, the second surge began in mid-July and which peaked by end October and is currently showing an apparent downward trend which may be influenced partly by the significant decrease in the number of tests being done. The total PCR tests done in Nepal on 22nd December was 7,000 which is about one third the number tested during the peak in end October.

Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 255235) (Data updated on 23 December 2020 07:00:00)

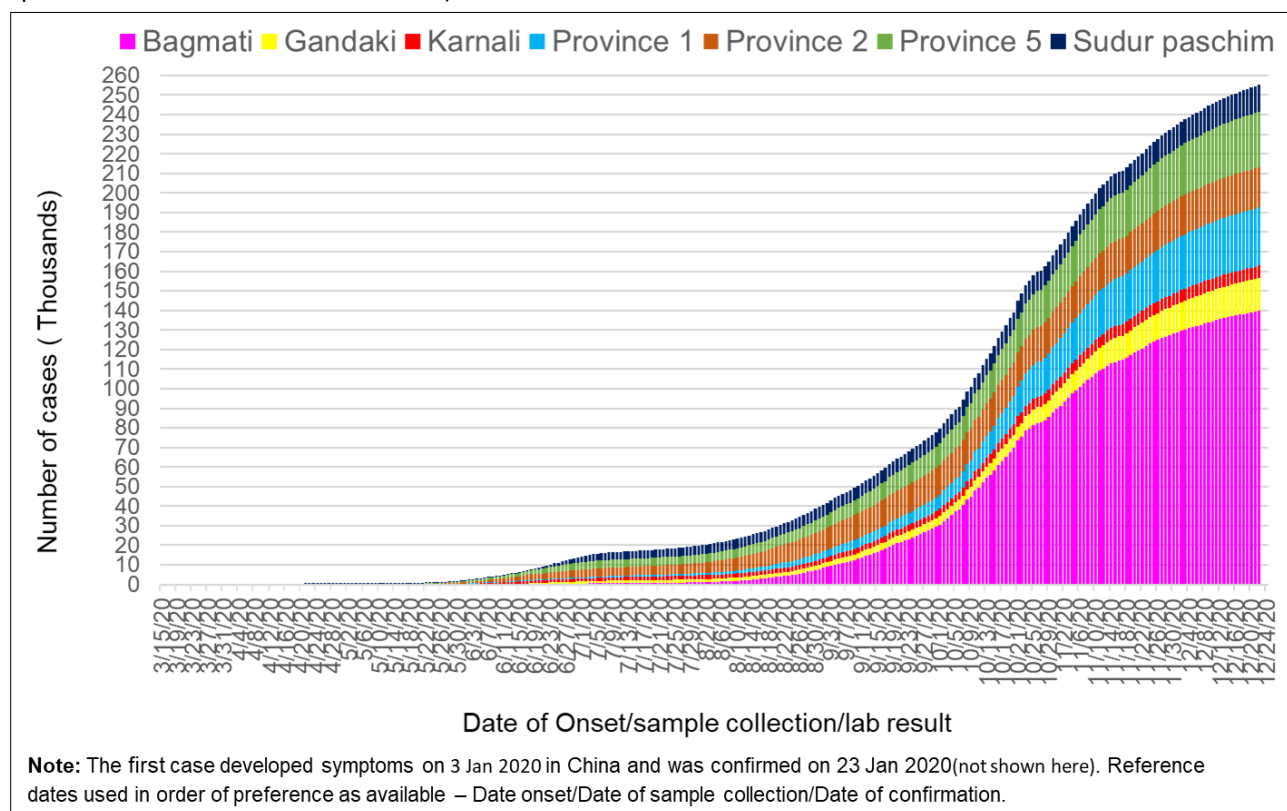
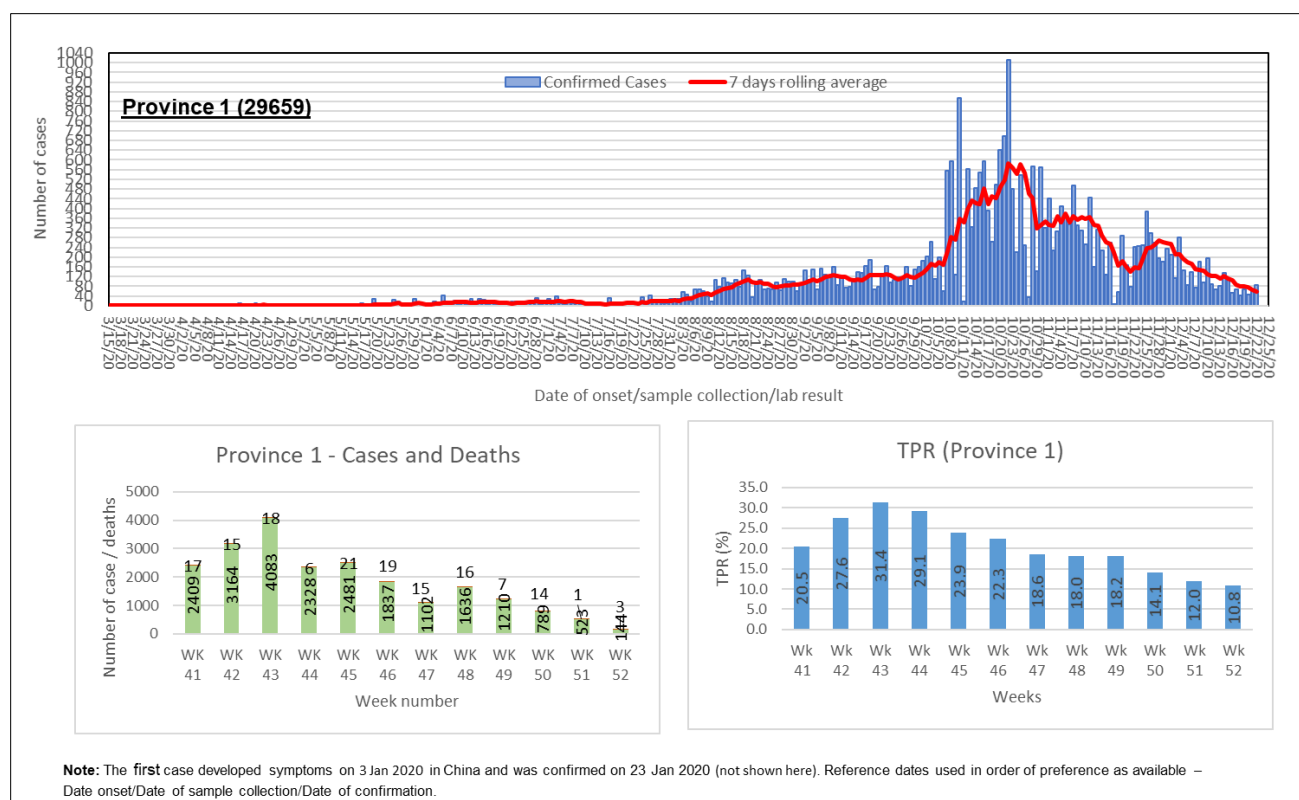
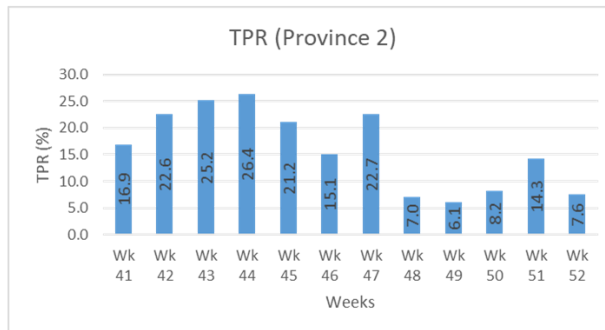
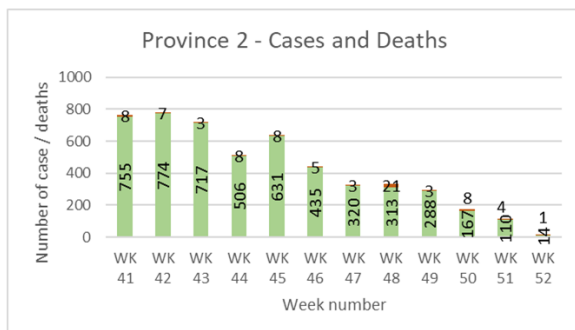
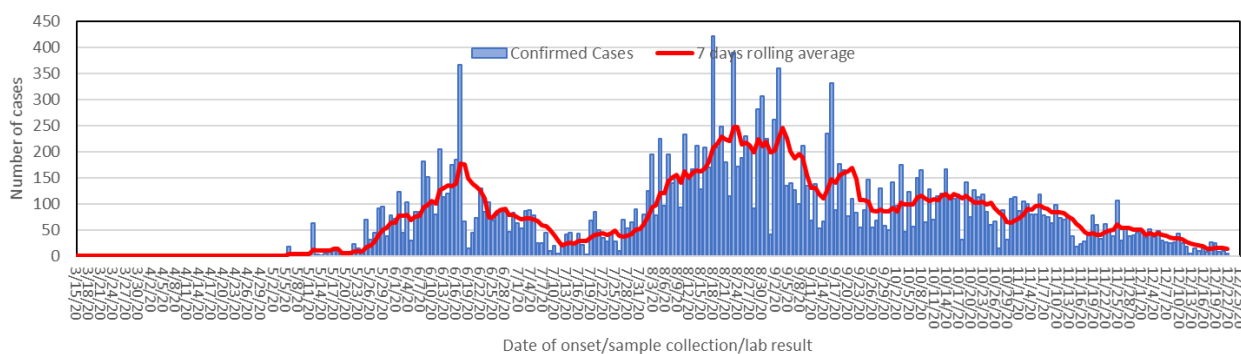


Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 255235) (Data updated on 23 December 2020 07:00:00)

Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces

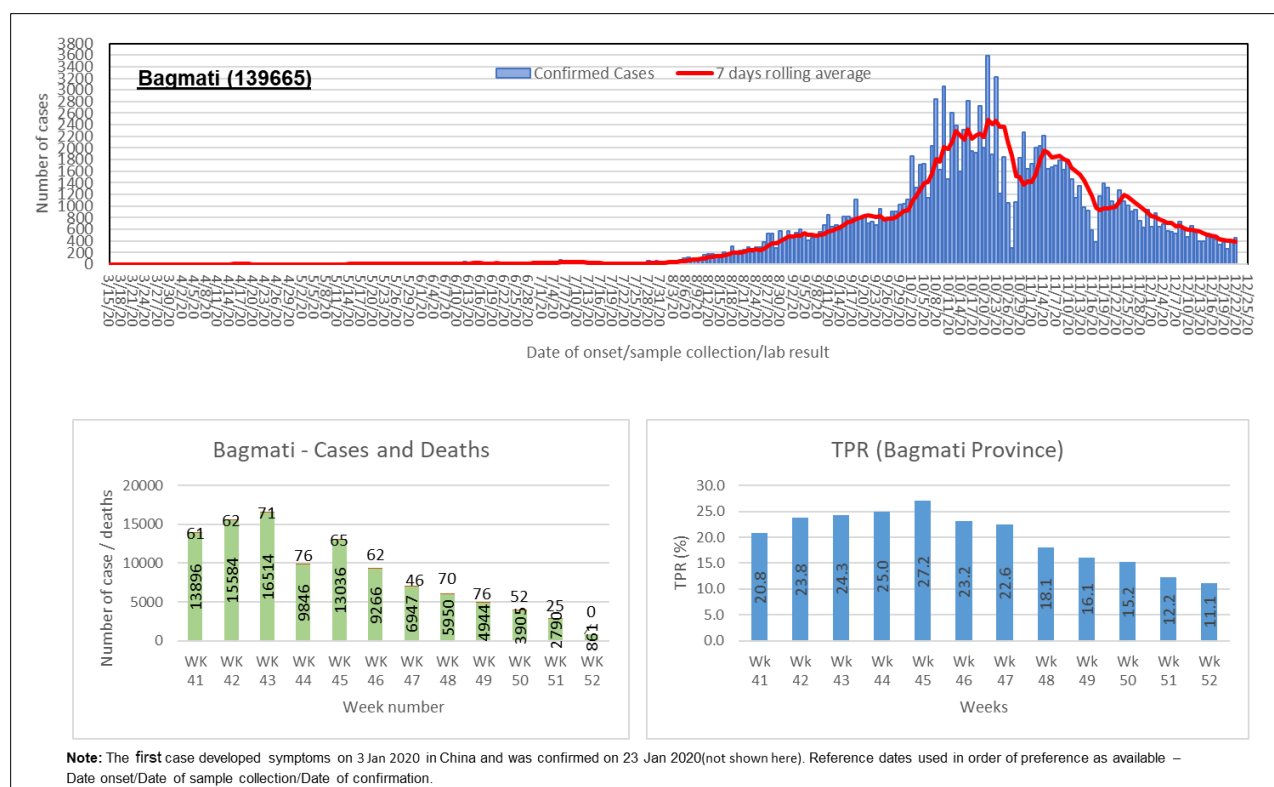


There were 523 new cases reported in the past week in Province 1. Since a peak in October, weekly new cases have continued to decrease and fell by 34% in the past week compared to the previous week. There was one death reported in the past week, more than 90% less than that of the previous week. The test positivity rate in Province 1 decreased further to 12.0% in the past week.

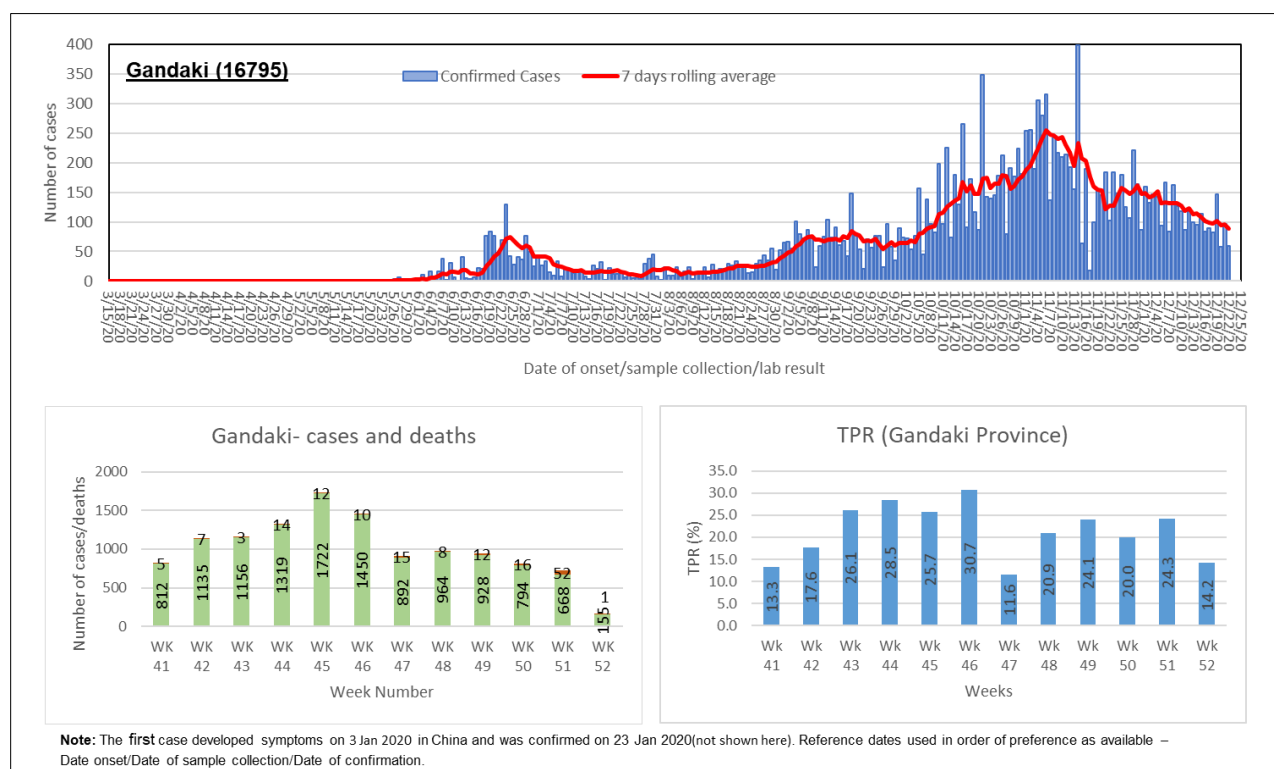


Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020(not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.

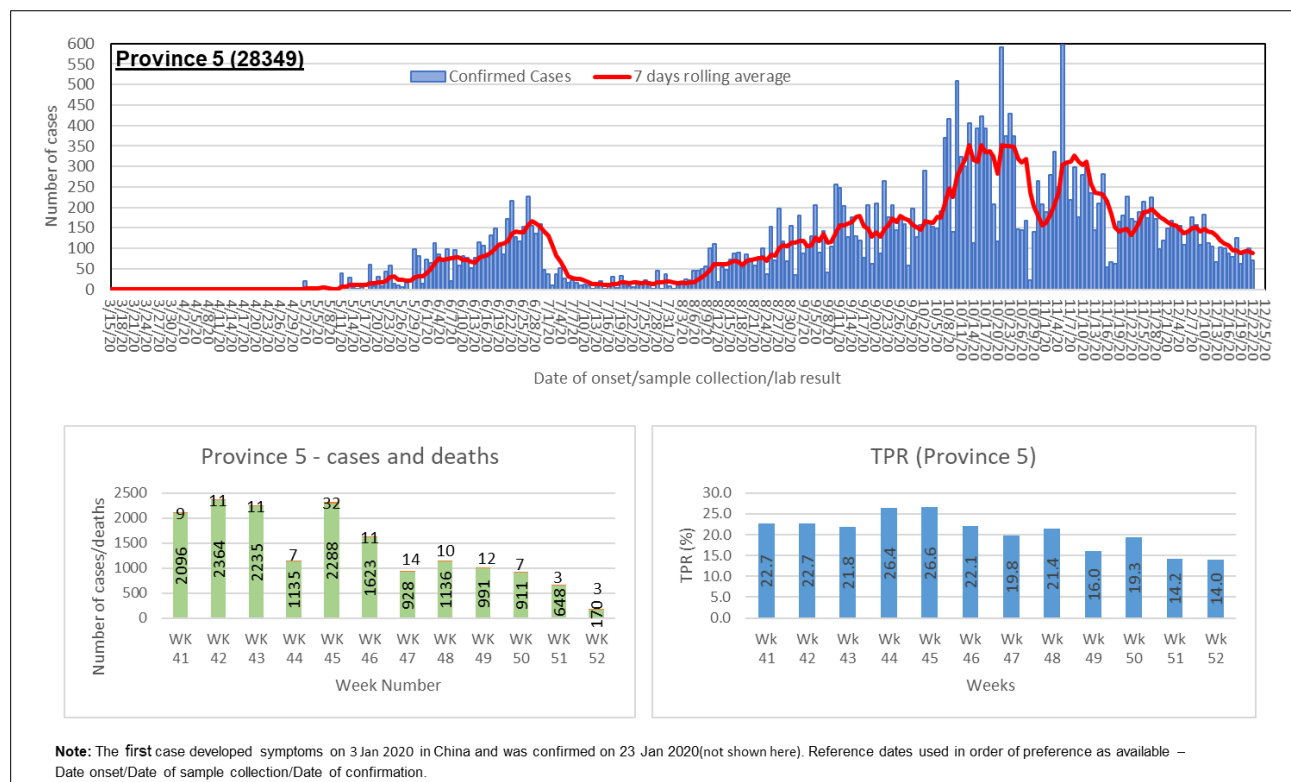
There were 110 new cases reported in the past week in Province 2. Weekly new cases are continuously decreasing and fell by 34% in the past week compared to the previous week. There were 4 deaths reported in the past week, 50% less compared to the previous week. The test positivity rate in Province 2 has continued an increasing trend to 14.3% from a low of 8.2% in the previous week.



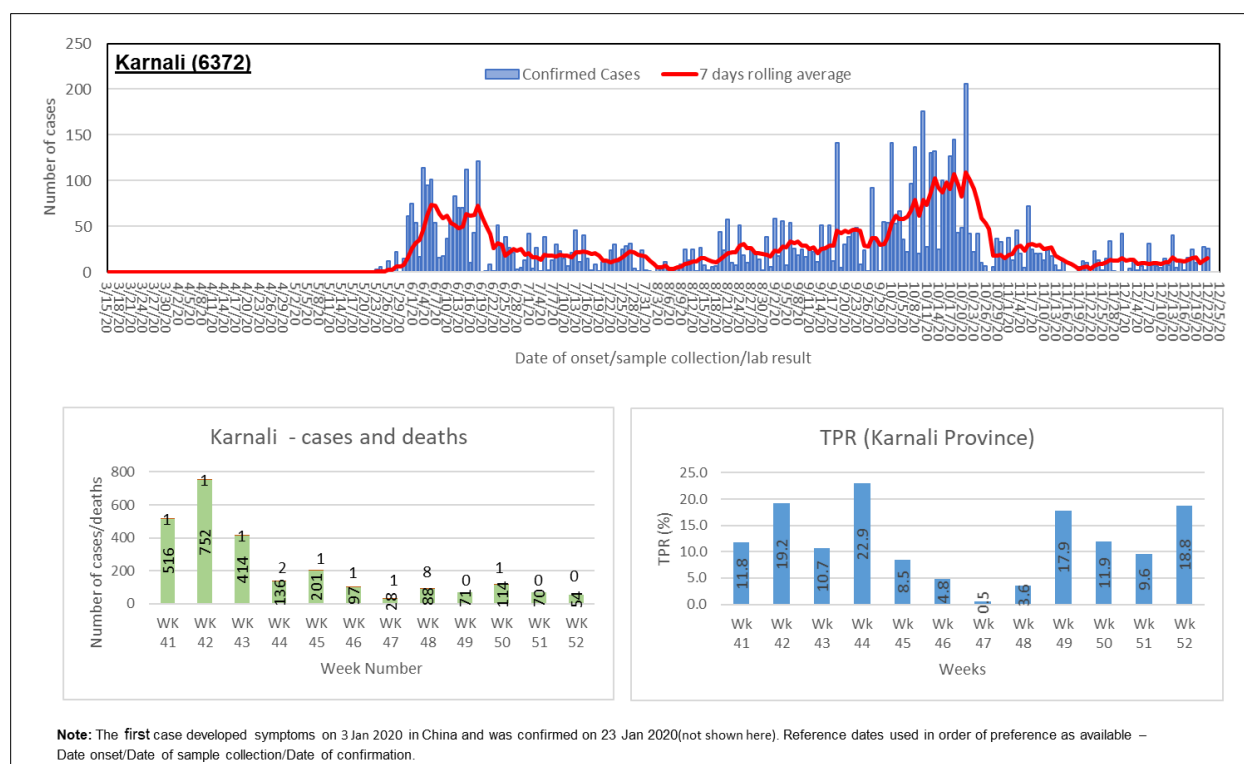
In Bagmati, 2790 new cases were reported in the past week. Weekly new cases are steadily decreasing and fell by 29% in the past week compared to the previous week. There were 25 deaths reported in the past week, a 52% decrease from the previous week which continues a decreasing trend. The test positivity rate in Bagmati has shown a decreasing trend to a low of 12.2% in the past week.



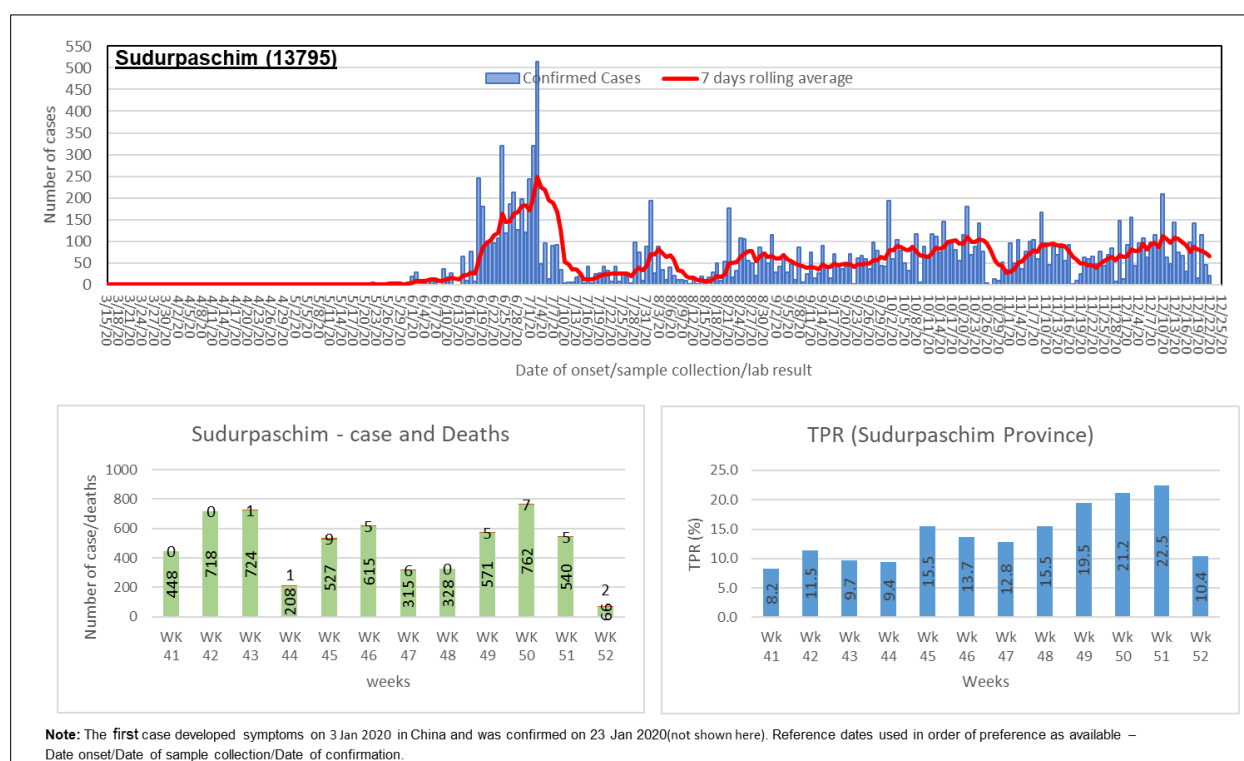
Gandaki reported 668 new cases and 52 deaths in the past week. The number of new cases being reported has fallen considerably since a peak in Week 45 when there were 1,722 new cases. The number of new cases fell by 16% compared to the previous week while new deaths increased three times than that in the previous week. The test positivity rate in Gandaki increased to 24.3% in the past week from a low of 20.0% in the previous week. These indicate the need for a higher level of rapid containment in this province.



Lumbini reported 648 new cases and 3 deaths in the past week. The number of new cases being reported has fallen significantly since a peak in Week 45 when there were 2,288 new cases. The number of new cases fell by 29% from the previous week and new deaths decreased by 60% compared to the previous week. The test positivity rate in Lumbini has shown a relatively stable trend with a low of 14.2% in the past week.

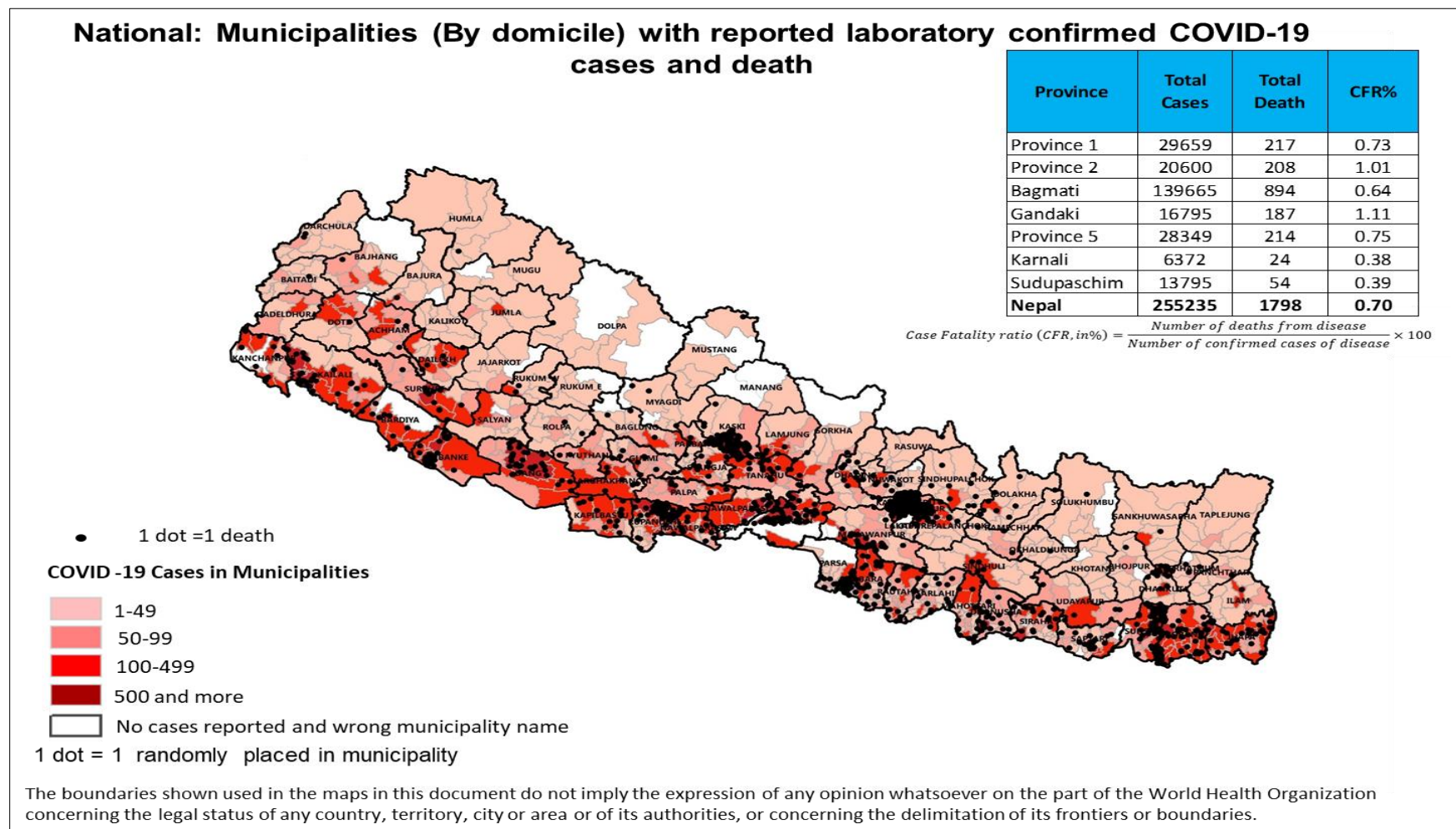


In Karnali, 70 new cases were reported in the past week. Since cases peaked in week 42, weekly decreases in new cases have decreased by 39% in the past week compared to the previous week. There was no death reported in the past week, the number of weekly deaths has remained relatively stable since late October. The test positivity rate in Karnali has shown a decreasing trend with a low of 9.6% in the past week.



In Sudurpaschim, 540 new cases were reported in the past week. Weekly new cases have continued to decrease, and it decreased further by 29% in the past week compared to the previous week. There were 5 deaths reported in the past week, a 29% decrease from the previous week continuing a relatively stable trend of the number of weekly deaths since November. The test positivity rate in Sudurpaschim has shown an increasing trend to a high of 22.5% in the past week.

Figure 3: National -Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 255235) (Data updated on 23 December 2020 07:00:00)



Notes: Out of 77 districts, only one district, Manang (Gandaki Province) did not report any cases in the last 14 days. Deaths have been reported in high numbers from Bagmati Province, mostly from Kathmandu valley area. The overall case fatality ratio of Nepal is 0.70%. However, the case fatality ratio is relatively high in Province 2 with 1.01% and Gandaki Province with 1.11%.

Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces.
(N = 255235) (Data updated on 23 December 2020 07:00:00)

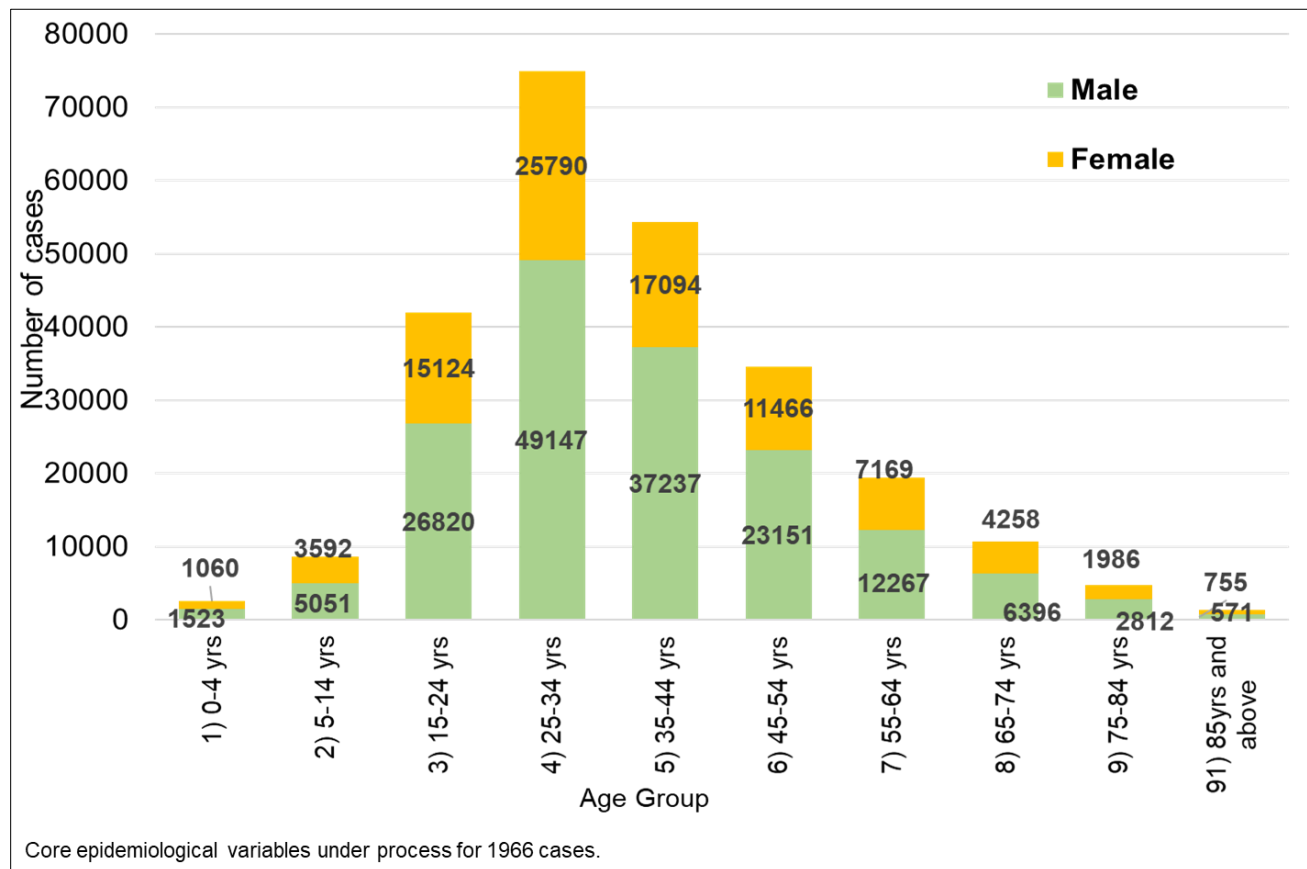
Reporting Province	Total confirmed cumulative cases	% of the total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Total confirmed cases in last 14 days	Total deaths in last 14 days
Province 1	29659	11.6	217	Cluster of cases	1197	13
Province 2	20600	8.1	208	Cluster of cases	240	7
Bagmati	139665	54.7	894	Cluster of cases	6301	55
Gandaki	16975	6.6	187	Cluster of cases	1395	66
Province 5	28349	11.1	214	Cluster of cases	1837	10
Karnali	6372	2.5	24	Cluster of cases	199	0
Sudurpashchim	13795	5.4	54	Cluster of cases	1155	10
National Total	255235	100	1798	Cluster of cases	11859	161

- Date of last case is the date of onset or date of sample collection or date of lab report based on information available.

*Revised [WHO transmission classification](#)

Category name	Definition: Countries/territories/areas with:
No (active) cases	No new cases detected for at least 28 days (two times the maximum incubation period), in the presence of a robust (where COVID-19 surveillance is not robust, a lack of identified cases should not be interpreted as an absence of transmission) surveillance system. This implies a near-zero risk of infection for the general population.
Imported / Sporadic cases	Cases detected in the past 14 days are all imported, sporadic (e.g. laboratory acquired or zoonotic) or are all linked to imported/sporadic cases, and there are no clear signals of further locally acquired transmission. This implies minimal risk of infection for the general population.
Clusters of cases	Cases detected in the past 14 days are predominantly limited to well- defined clusters that are not directly linked to imported cases, but which are all linked by time, geographic location and common exposures. It is assumed that there are a number of unidentified cases in the area. This implies a low risk of infection to others in the wider community if exposure to these clusters is avoided.
Community transmission – level 1 (CT1)	Low incidence of locally acquired, widely dispersed cases detected in the past 14 days, with many of the cases not linked to specific clusters; transmission may be focused in certain population sub-groups. Low risk of infection for the general population.
Community transmission – level 2 (CT2)	Moderate incidence of locally acquired, widely dispersed cases detected in the past 14 days; transmission less focused in certain population sub- groups. Moderate risk of infection for the general population.
Community transmission – level 3 (CT3)	High incidence of locally acquired, widely dispersed cases in the past 14 days; transmission widespread and not focused in population sub-groups. High risk of infection for the general population.
Community transmission – level 4 (CT4)	Very high incidence of locally acquired, widely dispersed cases in the past 14 days. Very high risk of infection for the general population.

Figure 4: Distribution of COVID-19 cases by age and sex (N = 253269) (Data updated on 23 December 2020 07:00:00)



Notes: Overall, the gender distribution remains skewed towards males. The incidence of cases are 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 COVID-19 confirmed cases (N = 255235) (Data updated on 23 December 2020 07:00:00)

Age Group	Total confirmed cases	Death (male)	Death (female)	Deaths with any known comorbid condition	Age specific case fatality ratio (%)
0-4 yrs	2583	2	4	2	0.23
5-14 yrs	8643	3	2	5	0.06
15-24 yrs	41944	19	25	29	0.1
25-34 yrs	74937	56	32	42	0.12
35-44 yrs	54331	100	47	73	0.27
45-54 yrs	34617	175	66	145	0.7
55-64 yrs	19436	254	90	234	1.77
65-74 yrs	10654	328	129	329	4.29
75-84 yrs	4798	224	108	240	6.92
85+ yrs	1326	93	38	91	9.88
Unknown	1966	3	0	2	0.15
National	255235	1257	541	1192	0.7

$$\text{Case Fatality ratio (CFR, in\%)} = \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \times 100$$
 COVID-19 positive lab result is temporally associated with death; causal association under investigation.

Notes: A total of 1,798 deaths have been reported and all deaths occurred in the country between weeks 20 and 52. Out of total deaths, 1,257 (69.9%) were males and 541 (30.1%) were females. Amongst the deaths, 1,192 persons (66.3%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1 per cent, the rate progressively increases with age beyond 65 years of age, ranging from 4.3% to 9.9%.

PREPAREDNESS AND RESPONSE

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

- Ministry of Health and Population has received 100,000 antigen test kits which will be utilized to strengthen case investigation and contact tracing, monitor trends of disease incidence in the community, detect early cases in the areas of widespread transmission, and respond to a suspected outbreak of COVID-19 in remote settings. This testing kit has been distributed to Gandaki Province, Province 1 and Sudurpaschim Province.

What is the WHO Country Office for Nepal doing?

Laboratory Capacity

- WHO Nepal has been supporting 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 8 designated COVID-19 labs participated in the NQAP this week. All participating laboratories were satisfactory with result $\geq 90\%$ concordance.
- The Country Office for Nepal received Proficiency Testing (PT) materials of SARS-COV-2 from the Royal College of Pathologists of Australia Program (RCPAQAP) and has supported NPHL for dispatching the Proficiency Testing (PT) panel materials to the 24 participating laboratories. Technical support was provided to NPHL for testing the PT materials.

- WHO Nepal has provided support for technical capacity building at National Influenza Center (NIC) for reviving the virus isolation facilities and preparation of quality manual as part of the quality improvement activities through the consultants.
- Technical support was also provided for the following activities from WHO -Nepal
 - Organized a weekly virtual meeting targeting active participation from 25 designated COVID-19 laboratories in the country. This week, WHO facilitated a 'Virtual Meeting on Proficiency Testing for participating laboratories in external quality assurance program'. Participants were provided with instructions for undergoing Proficiency Testing. They discussed their challenges and the WHO consultant and NPHL resource person provided recommendations to address the challenges.
 - Validated RIBO-prep (Amplisens) nucleic acid extraction kit, REVERTA-L RT reagent kit and Wonfo Antigen kit (on going).
 - Verified and prepared Proficiency Testing Reports of 54 COVID-19 labs.

Technical Planning and Operations

- WHO Nepal has supported the MoHP, Management Division to complete a rapid assessment of oxygen source, availability and bed capacity in 18 hospitals (both COVID-19 and non COVID specialized hospitals that are treating COVID-19 patients) of which 13 were government and 5 were medical colleges. The findings have been presented to Health Emergency Operations Center (HEOC).
- An inter ministry meeting was held on 18 December to present the drafted Comprehensive IPC guidance document to ministry directors for their inputs. WHO was in attendance and is providing technical inputs into the development of this document.
- WHO has supported the MoHP to develop a repatriation of COVID-19 human remains guidance document. This will be presented to the ICS-HEOC on 23 December.
- WHO & UNICEF have agreed on the budget and the indicators for the joint, UNICEF, WHO, Nepal Red Cross Society (NRCCS) program; strengthening Community based surveillance, contact tracing, vulnerability assessment and IPC measures in Provinces 2, 3, & 5 respectively.

Points of Entry (PoE)

- WHO Nepal Operations Support Logistics (OSL) team in close coordination with Epidemiology and Disease Control Division (EDCD) has supported the following activities:
 - Establishment of Points of Entry (PoEs) setup at Siraha and Rautahat districts of Provinces 2 has been completed.
 - Points of Entry (PoE) setup at Birgunj district of Province 2 will be finalized in few days.
 - Ongoing support for construction of health screening desk at the domestic airport and the point of arrival at the International terminal of Tribhuvan International Airport (TIA) and is planned to be completed by 25 December, 2020.



Completed Point of Entry establishment at Siraha district, Province 2. Picture Credit: WHO Nepal

Risk Communication and Community Engagement

- WHO Media monitoring output was shared every day with MoHP spokesperson, HEOC officials, as well as EDPs and other partners
- The following documents were translated (from 16 -22 December 2020):

SN	NAME OF THE DOCUMENT	TYPE
1	Evidence Brief_Dec 18	Evidence Brief
2	Considerations for implementing a risk-based approach to international travel in the context of COVID-19	Summary
3	COVID-19 diagnostic testing in the context of international travel	Summary
4	Safe management of the dead in COVID-19 context	Guidelines

- Science in 5 videos translated, dubbed, and published:

Episodes	Titles	Language	Link
Episode 15	Vaccine distribution- How will the vaccines reach everyone? What are the challenges with distributing the COVID-19 vaccine?	Nepali	Link
		Maithali	Link
Episode 16	How vaccines work with our body to protect us?	Maithali	Link

- Through the ‘Volunteers for Action (V4Action) against COVID-19,’ an initiative of UNDP, UNICEF, UNRCO, UNV and the WHO, youths from across Nepal were invited to a webinar - ‘Let’s Talk About Mental Health of Youth’, where they presented their questions regarding mental health to experts. The webinar was designed to give practical skills and tips to seek help, reach out to family and friends, and address the mental health issues in a responsible

way. Dr. Kedar Marahatta, National Professional Officer for Mental Health-WHO Nepal, was one of the experts.

- A training session on Tips to Write Professional Email was given by the Communications Officer, Mr. Sujan Govinda Amatya, for Unlocking Skills - a series of trainings, targeted towards the youth, to strengthen their professional capacities to work in the development sector/ecosystem during the COVID-19 pandemic – from December 17-18, 2020. This is a joint initiative of the UN Agencies in Nepal targeted to university and college students aged 15-24 from across the country.

Field operation and Logistics

- WHO Nepal has handed over 100,000 rapid antigen diagnostic kit for SARS-COV-2 to the Department of Health Services, Ministry of Health and Population. It was handed in presence of Director General of Department of Health Services (DoHS) by the WHO Representative to Nepal. This rapid antigen test will further support Government of Nepal for overall COVID-19 testing capacity offering advantages such as a short turnaround time for test results.

What are the health cluster partners doing?

- Cluster coordination meeting for health sector response is ongoing at the Federal and Provincial levels for coherent action at all levels.
- Health Cluster partners including sub-clusters are providing response support to continue COVID-19 & Non-COVID-19 essential/continuation of health services throughout the country.
- Health partners are also monitoring the continuity of essential health services (EHS) since the outset of the pandemic. It was reported that the basic and essential services including routine immunization and maternal new-born health services are functioning at most of the static and outreach sites. During the reporting period, a total of 154,748 women and children utilized EHS, including 24,906 women who were reached with antenatal care (ANC) services; 14,157 women delivered in health facilities; and 115,685 children were immunized (49 per cent boys and 51 per cent girls). All essential health services are functional and being delivered from 1400 health facilities (100%) in both Karnali and Sudurpaschim Province to date.
- Health partners trained a total of 2,239 health workers and 6,834 female community health volunteers on case management and continuity of essential health services across the country through a mobile application-based virtual training. Health partners have also supported Ministry of Social Development, Karnali in organizing the first batch of Critical Care Trainings (ICU management and Infection Prevention and Control) for district level medical doctors and nurses on 22 Dec 2020. The objective of the training is to enhance the capacity of the staff to operate the ventilators and ICU case management in the context of COVID-19.

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 regarding coronavirus disease 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](#)
- Global coronavirus disease situation dashboard can be found [here](#)
- Visit the WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#)

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