HIGHLIGHTS*

- Of the total COVID-19 positive cases, 98.6% of cases have recovered; 0.64% (1744) of cases are active; and 48.5% of active cases (846) are in home isolation.
- Of the total COVID-19 deaths, 97% of the deaths occurred in hospital. The most common co-morbidity identified in fatal cases was hypertension (39.9%).
- There are five districts with no active cases, one district with more than 200 active cases. Kathmandu district alone has more than 500 active cases as of 25 January 2021. New cases have been reported from 29 districts.
- Out of the total active cases, 898 (51.5%) patients were admitted to hospital/institutional isolation centers of which 63 (3.6%) patients are in intensive care (ICU) with 17 patients are using ventilator support.
- A total of 185,851 people have received COVID-19 Vaccine, 8 Adverse Events Following Immunization (AEFI) cases discharged after treatment so far.

*Data as of COVID-19 Update, MoHP, 8 February 2021

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 9 February 2021, 07:00:00 hours (Week no. 6), a total 272,055 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR); 20,96,750 RT-PCR tests have been performed nationwide by 82 designated COVID-19 labs functional across the nation of which 47 are public laboratories.
- All 7 provinces in the country are now experiencing transmission via clusters of cases.
- Province-wise test positivity rate in the past week (Week 5) ranged from 0% (Karnali Province) to 13.3% (Gandaki Province) with a national positivity rate averaging 4.6%.
- Overall, the sex-distribution remains skewed towards males, who constitute 65% (176,761/272,055) of the confirmed cases. Amongst males, 82% (144,195/176,761) are in the economically productive age group (15-54 years).
- A total of 85 samples were received for Influenza testing at National Influenza Center, National Public Health Laboratory (NPHL) on EPID-week 5 (1-7 February 2021) of which none of the samples tested positive for Influenza. From 4 January until 7 February 2021, a total of 276 samples have been tested for Influenza and SARS-CoV-2. Two samples have tested positive for SARS-CoV-2 (all these positive cases are included in the COVID-19 database).
Nationally, the second surge began in mid-July of 2020, which peaked by the end of October and is currently showing an apparent downward trend, influenced partly by the significant decrease in the number of tests being done. The total PCR tests done in Nepal on 8 February 2021 was 3333 which is about one fifth of the number tested during the peak in the end of October 2020.
The cumulative case incidence has been increasing in Nepal since the first case confirmed in 23 January 2020. Cases have been largely reported from Bagmati Province followed by Lumbini Province and Province 1.

Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 272055) (Data updated on 9 February 2021 T0 7:00:00)

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.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 272055) (Data updated on 9 February 2021 T0 7:00:00)

Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces
There were 30 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 9% in the past week compared to the previous week. There were 3 deaths reported in the past week, compared to no deaths in the previous week. The test positivity rate in Province 1 remained stable at a low of 1.8% in the past week continuing a decreasing trend. A total of 840 tests were performed in the past week, a 52% decrease from that of the previous week.

There were 17 new cases reported in the past week in Province 2. Weekly new cases are continuously decreasing and fell by 41% in the past week compared to the previous week. There were no deaths reported in the past week, consistent with that in the previous week. The test positivity rate in Province 2 continued a decreasing trend to a low of 2.7% in the past week. A total of 258 tests were performed in the past week, a 3% increase from that of the previous week.
In Bagmati, 583 new cases were reported in the past week. Weekly new cases are steadily decreasing and fell by 40% in the past week compared to the previous week. There were 2 deaths reported in the past week, 86% less compared to the previous week. The test positivity rate in Bagmati continued a decreasing trend to a low of 3.9% in the past week. A total of 18,412 tests were performed in the past week, a 14% decrease from that of the previous week.

In Gandaki, 181 new cases were reported in the past week. Weekly new cases have fallen considerably since a peak in Week 45 and decreased by 21% in the past week compared to the previous week. There were no deaths reported in the past week, compared to 1 death in the previous week. The test positivity rate in Gandaki decreased to 13.3% in the past week. A total of 913 tests were performed in the past week, 19% decrease from that of the previous week.
Lumbini reported 129 new cases and 4 deaths in the past week. The number of new cases being reported has fallen significantly since a peak in Week 45 and fell by 36% in the past week compared to the previous week while deaths decreased by 69% than that in the previous week. The test positivity rate in Lumbini remained relatively stable at 7.1% in the past week continuing a deceasing trend. A total of 1466 tests were performed in the past week, a 43% decrease from that of the previous week.
In Karnali, 1 new case was reported in the past week. Since cases peaked in week 42, a weekly decrease in new cases has continued and fallen by 88% in the past week compared to the previous week. There were no deaths reported in the past week, which is consistent with that in the previous week. The test positivity rate in Karnali decreased to 0% in the past week. A total of 122 tests were performed in the past week, a 41% decrease from that of the previous week.

In Sudurpashchim, 25 new cases were reported in the past week. Weekly new cases are continuously decreasing and fell by 34% in the past week compared to the previous week. There were no deaths reported in the past week, which is consistent with that in the previous week. The test positivity rate in Sudurpashchim dropped considerably to a low of 3.7% in the past week. A total of 399 tests were performed in the past week, a 19% decrease from that of the previous week.
Cases and deaths have been reported in high numbers from Bagmati Province, mostly from Kathmandu valley area. The overall case fatality ratio (CFR) of Nepal is 0.75%. However, CFR is relatively high in Province 2 with 1.05% and Gandaki Province with 1.16%.
Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces.

(Data updated on 9 February 2021 07:00:00)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases</th>
<th>% of the total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification*</th>
<th>Total confirmed cases in last 14 days</th>
<th>Total deaths in last 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>30495</td>
<td>11.2</td>
<td>231</td>
<td>Cluster of cases</td>
<td>61</td>
<td>2</td>
</tr>
<tr>
<td>Province 2</td>
<td>20837</td>
<td>7.7</td>
<td>218</td>
<td>Cluster of cases</td>
<td>38</td>
<td>0</td>
</tr>
<tr>
<td>Bagmati</td>
<td>149732</td>
<td>55.0</td>
<td>1007</td>
<td>Cluster of cases</td>
<td>1425</td>
<td>13</td>
</tr>
<tr>
<td>Gandaki</td>
<td>18808</td>
<td>6.9</td>
<td>219</td>
<td>Cluster of cases</td>
<td>390</td>
<td>0</td>
</tr>
<tr>
<td>Province 5</td>
<td>30741</td>
<td>11.3</td>
<td>278</td>
<td>Cluster of cases</td>
<td>281</td>
<td>9</td>
</tr>
<tr>
<td>Karnali</td>
<td>6506</td>
<td>2.4</td>
<td>27</td>
<td>Cluster of cases</td>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>14936</td>
<td>5.5</td>
<td>65</td>
<td>Cluster of cases</td>
<td>61</td>
<td>0</td>
</tr>
<tr>
<td>National Total</td>
<td>272055</td>
<td>100</td>
<td>2045</td>
<td>Cluster of cases</td>
<td>2266</td>
<td>24</td>
</tr>
</tbody>
</table>

# - 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

<table>
<thead>
<tr>
<th>Category name</th>
<th>Definition : Countries/territories/areas with:</th>
</tr>
</thead>
<tbody>
<tr>
<td>No (active) cases</td>
<td>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.</td>
</tr>
<tr>
<td>Imported / Sporadic cases</td>
<td>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.</td>
</tr>
<tr>
<td>Clusters of cases</td>
<td>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.</td>
</tr>
<tr>
<td>Community transmission – level 1 (CT1)</td>
<td>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.</td>
</tr>
<tr>
<td>Community transmission – level 2 (CT2)</td>
<td>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.</td>
</tr>
<tr>
<td>Community transmission – level 3 (CT3)</td>
<td>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.</td>
</tr>
<tr>
<td>Community transmission – level 4 (CT4)</td>
<td>Very high incidence of locally acquired, widely dispersed cases in the past 14 days. Very high risk of infection for the general population.</td>
</tr>
</tbody>
</table>
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 COVID-19 confirmed cases (N = 272055) (Data updated on 9 February 2021 T0 7:00:00)

<table>
<thead>
<tr>
<th>Age Group</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 yrs</td>
<td>2674</td>
<td>2</td>
<td>4</td>
<td>2</td>
<td>0.22</td>
</tr>
<tr>
<td>5-14 yrs</td>
<td>9101</td>
<td>3</td>
<td>2</td>
<td>5</td>
<td>0.05</td>
</tr>
<tr>
<td>15-24 yrs</td>
<td>44150</td>
<td>22</td>
<td>25</td>
<td>32</td>
<td>0.11</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>79228</td>
<td>59</td>
<td>34</td>
<td>45</td>
<td>0.12</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>57841</td>
<td>114</td>
<td>56</td>
<td>89</td>
<td>0.29</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>37314</td>
<td>200</td>
<td>70</td>
<td>162</td>
<td>0.72</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>21148</td>
<td>287</td>
<td>104</td>
<td>262</td>
<td>1.85</td>
</tr>
<tr>
<td>65-74 yrs</td>
<td>11745</td>
<td>376</td>
<td>150</td>
<td>378</td>
<td>4.48</td>
</tr>
<tr>
<td>75-84 yrs</td>
<td>5397</td>
<td>258</td>
<td>126</td>
<td>272</td>
<td>7.12</td>
</tr>
<tr>
<td>85+ yrs</td>
<td>1460</td>
<td>109</td>
<td>40</td>
<td>104</td>
<td>10.21</td>
</tr>
<tr>
<td>Unknown</td>
<td>1997</td>
<td>4</td>
<td>0</td>
<td>3</td>
<td>0.2</td>
</tr>
<tr>
<td>National</td>
<td>272055</td>
<td>1434</td>
<td>611</td>
<td>1354</td>
<td>0.75</td>
</tr>
</tbody>
</table>

A total of 2,045 deaths have been reported. Out of the total deaths, 1,434 (70.0%) were males and 611 (30.0%) were females. Amongst the deaths, 1,354 persons (66.2%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1 per cent, it progressively increases with age beyond 65 years of age, ranging from 4.5% to 10.2%.
PREPAREDNESS AND RESPONSE

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

• First phase of vaccination campaign has been completed across the country.
  o Nepal has completed first phase of COVID-19 vaccination on the 11th day of first phase (27 January - 6 February 2021).
  o Altogether 185,000 people were targeted for vaccination, which includes:
    ▪ Health care workers,
    ▪ Waste collectors,
    ▪ Ambulance drivers,
    ▪ Security personnel mobilized for dead body management,
    ▪ Female community health volunteers (FCHV),
    ▪ Points of entry staff,
    ▪ Elderly people in home care,
    ▪ Prisoners and security personnel.
  o As per the information received from immunization centers only 5 in 1000 had some minor reaction after the vaccination and only 4 in 100,000 people reported moderate reaction after the vaccination which was well managed by health workers.

• The second phase of the vaccination campaign will start soon targeting frontline public servants and social workers. While awaiting the second round of the vaccination campaign, in an effort to continue the vaccination momentum, government has allocated four immunization centers in Kathmandu valley to vaccinate frontline workers from the UN and diplomatic missions as well as journalists during 8 – 12 February 2021.

What is the WHO Country Office for Nepal doing?

• In collaboration with the government of Nepal and other partners, WHO Country Office for Nepal supported the first phase of vaccination campaign against COVID-19 (Pictures below).
**Laboratory Capacity**

- WHO Nepal has been providing technical support to NPHL for screening the UK variant for COVID-19 positive samples and has also supported communication, shipment and receipt of the samples from the following hospitals:
  - Narayani Hospital, Province 2
  - Provincial Public Health Laboratory-2, Province 2
  - Bheri Hospital, Lumbini Province
  - Seti Provincial Hospital, Sudurpashchim Province
  - Dadeldhura Hospital, Sudurpashchim Province
  - Baitadi Hospital, Sudurpashchim Province
  - Bajhang Hospital, Sudurpashchim Province and
  - Kamalbazar Municipality PCR lab, Sudurpashchim Province

- WHO Nepal has initiated the procurement of ‘Multiplex Real Time RT PCR assay for detection of SARS-COV-2 variants under research-only use provision’ after the in-principle approval from SEARO and HQ lab focal points.

- Technical support has also been provided for validation of CWB10 RNA/DNA Extraction Kit by WHO Nepal. The validation results are awaited.

**Technical Expertise and Training**

- WHO Nepal participated in a meeting (5 February 2021) on ‘Vulnerability assessment at community level’ along with Nepal Red Cross Society (NRCS) & UNICEF; a joint project
implemented by NRCS. WHO Nepal will be supporting activities on Vulnerability Assessment and Mapping, Contact Tracing and Community-based Surveillance, and Infection Prevention and Control (IPC).

**Risk Communication and Community Engagement**

- The following documents were translated this week:

<table>
<thead>
<tr>
<th>SN</th>
<th>TRANSLATION DOCUMENT</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Laboratory biosafety guidance related to coronavirus disease (COVID-19): Interim guidance, 28 January 2021</td>
<td>Summary</td>
</tr>
<tr>
<td>2</td>
<td>Contact tracing in the context of COVID-19 Interim Guidance</td>
<td>Summary</td>
</tr>
<tr>
<td>3</td>
<td>Evidence Brief February 5</td>
<td>Evidence Brief</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Episodes</th>
<th>Titles</th>
<th>Language</th>
<th>Links</th>
</tr>
</thead>
<tbody>
<tr>
<td>23</td>
<td>I am vaccinated, what next?</td>
<td>Nepali</td>
<td>Link</td>
</tr>
</tbody>
</table>

- Messages on vaccines, given by WHO Representative to Nepal, was dubbed in Maithili (yet to be published).

- A webinar was held from WHO Nepal’s Conference Hall on 5 February 2021 on ‘Science behind COVID-19 for audio content producers’ by Ministry of Health and Population with technical support from WHO Nepal to sensitize Nepali Audio Producers on the Science and importance of Risk Communication and Community Engagement on COVID-19. Three speakers from MoHP, WHO and UNICEF delivered their presentations on a variety of topics related to COVID-19, vaccine, and communicating scientific messages in an understandable language to the general public. The event was very interactive and well appreciated with attendance of about 100 audio content producers from all the 7 Provinces of the country.
**Field Operation and Logistics**

- WHO Nepal assisted the Provincial Health Emergency Operation Center (PHEOC) at Bagmati Province to relocate to its newly constructed permanent building from a temporary building within the premises of Ministry of Social Development (MoSD). Moreover, necessary amenities as requested were also provided to the PHEOC to make it fully operational.

- On request from the Ministry of Health and Population, WHO Nepal handed over 15 laptops and a server to be used by Information Management Unit personnel. The ICT equipment supports operation of the Information Management Unit at the MoHP.

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

- Weekly Health Cluster Coordination meeting (every Thursday) for health sector response are ongoing at the Federal level for coordinated COVID-19 response support to MOHP. Provincial Health Directorate Offices are organizing the Provincial Level Health Cluster Coordination meeting fortnightly every other Tuesday.

- Health partners, including RH sub-cluster and Mental health sub-cluster, are supporting the continuation of COVID and non-COVID response throughout the country to ensure continuity of services in the COVID-19 context.

- Health cluster partners are continuing their support to Epidemiology and Disease Control Division (EDCD), National Public Health Laboratory (NPHL), National Health Training Centre (NHTC), National Health Education Information Communication Centre (NHEICCC), Family Welfare Division (FWD), Management Division (MD) at the Department of Health Services for COVID and NON-COVID responses including COVID vaccination campaign.

- Support to MOHP especially at the Health Coordination Division; Policy, Planning and Monitoring Division; Health Emergency Operation Centre (HEOC) ongoing to support DOHS and Provinces for the ongoing COVID-19 Pandemic, continuity of services and COVID vaccination campaign.

- Health Cluster Coordination Team is planning to share identified gaps from bilateral discussions with donors for their support.

**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 corona virus 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 corona virus disease situation dashboard can be found [here](#).
- Visit the WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#).
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