

Situation Update #45- Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Reporting Date: 16 - 22 February 2021

HIGHLIGHTS*

- Of the total COVID-19 positive cases, 98.7% of cases have recovered; 0.56% (1529) of cases are active; and 34.9% of active cases (534) 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 seven districts with no active cases and one district with more than 200 active cases. Kathmandu district alone has more than 500 active cases as of 22 February 2021. New cases have been reported from 26 districts.
- Out of the total active cases, 995 (65.1%) patients were admitted to hospital/institutional isolation centers of which 43 (2.8%) patients are in intensive care (ICU) with 11 patients using ventilator support.

**Data as of COVID-19 Update, MoHP, 22 February 2021*

SITUATION OVERVIEW

NEPAL

(Data as of 23 February 2021, 07:00:00 hours)

273,556 confirmed cases

2,061 deaths

2,143,315 RT-PCR tests

SOUTH-EAST ASIA REGION

(Data as of 21 February 2021, 10am CET)

13,345,590 confirmed cases

204,796 deaths

GLOBAL

(Data as of 21 February 2021, 10am CET)

110,763,898 confirmed cases

2,455,331 deaths

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 23 February 2021, T07:00:00 hours (week no. 8), a total 273,556 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR); 2,143,315 RT-PCR tests have been performed nationwide by 83 designated COVID-19 labs functional across the nation of which 48 laboratories are public.
- All 7 provinces in the country are now experiencing transmission via clusters of cases.
- Province-wise test positivity rate in the past week (week 7) ranged from 0% (Province 2) to 13.5% (Gandaki Province), with national positivity rate averaging 4.3%.
- Overall, the sex-distribution remains skewed towards males, who constitute 65% (176,668/273,556) of the confirmed cases. Amongst the males, 82% (144,856/177,668) are in the economically productive age group (15-54 years).
- A total of 5 samples were received for influenza testing at National Influenza Center, National Public Health Laboratory (NPHL) on EPID-week 7 (15 - 21 February 2021) of which none of the samples tested positive for influenza. From 4 January 2021 until 21 February 2021, a total of 331 samples have been tested for influenza and SARS-CoV-2. Three samples have tested positive for SARS-CoV-2 (all these positive cases are included in the COVID-19 database).

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 21 February 2021 from #Global Weekly Epidemiological Update 28) and cumulative incidence rate (per 100,000)

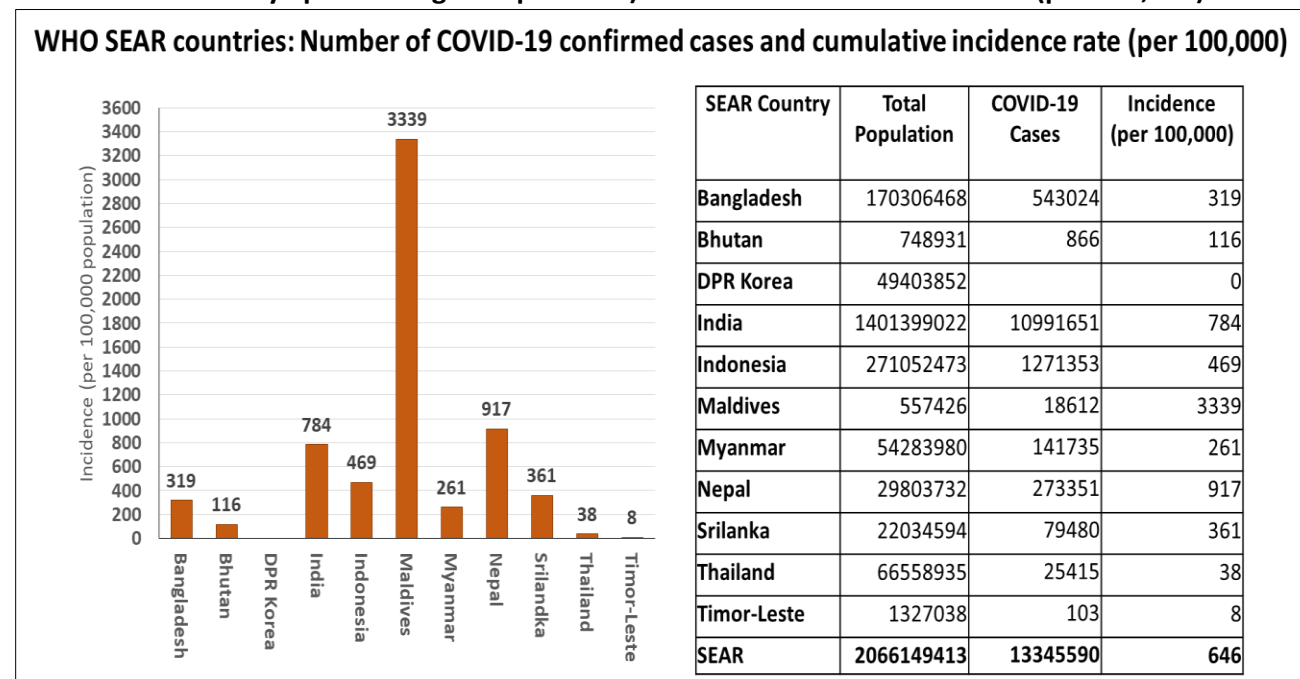
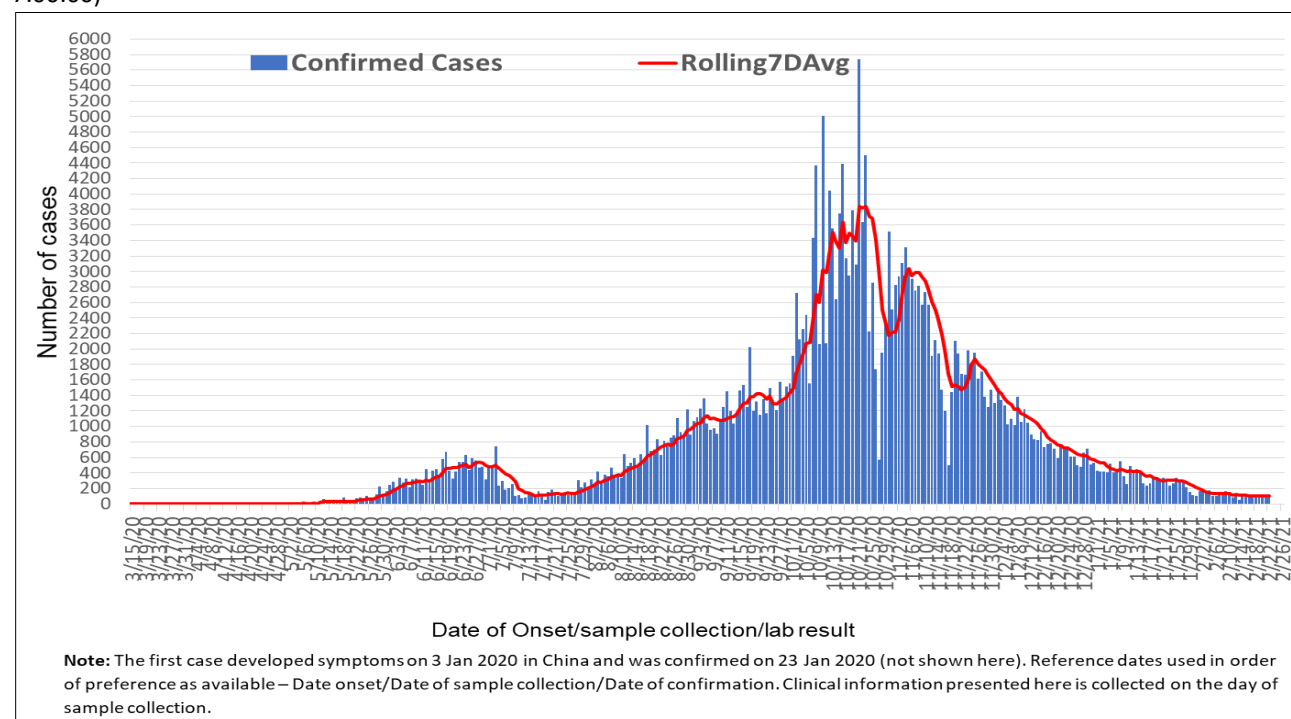
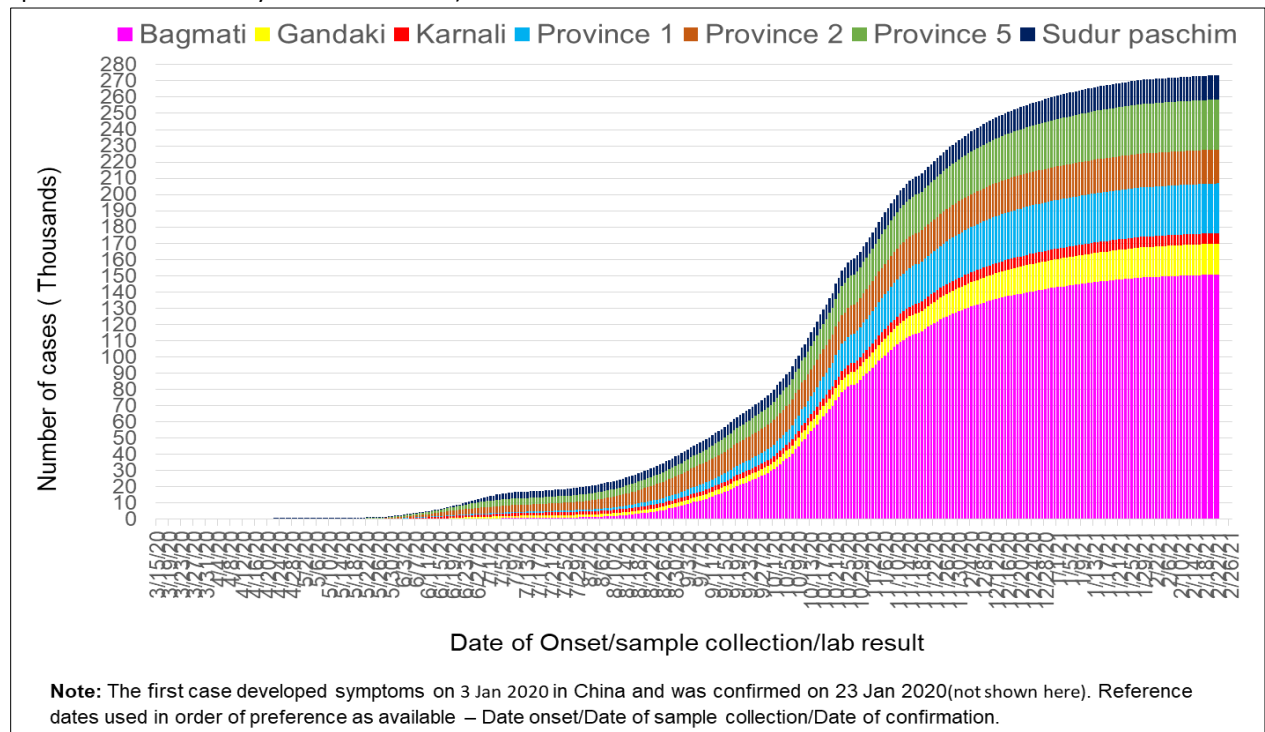


Figure 2 A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 273556)(Data updated on 23 February 2021 TO 7:00:00)



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 23 February 2021 was 3681 which is about one fourth of the number tested during the peak at the end of October 2020.

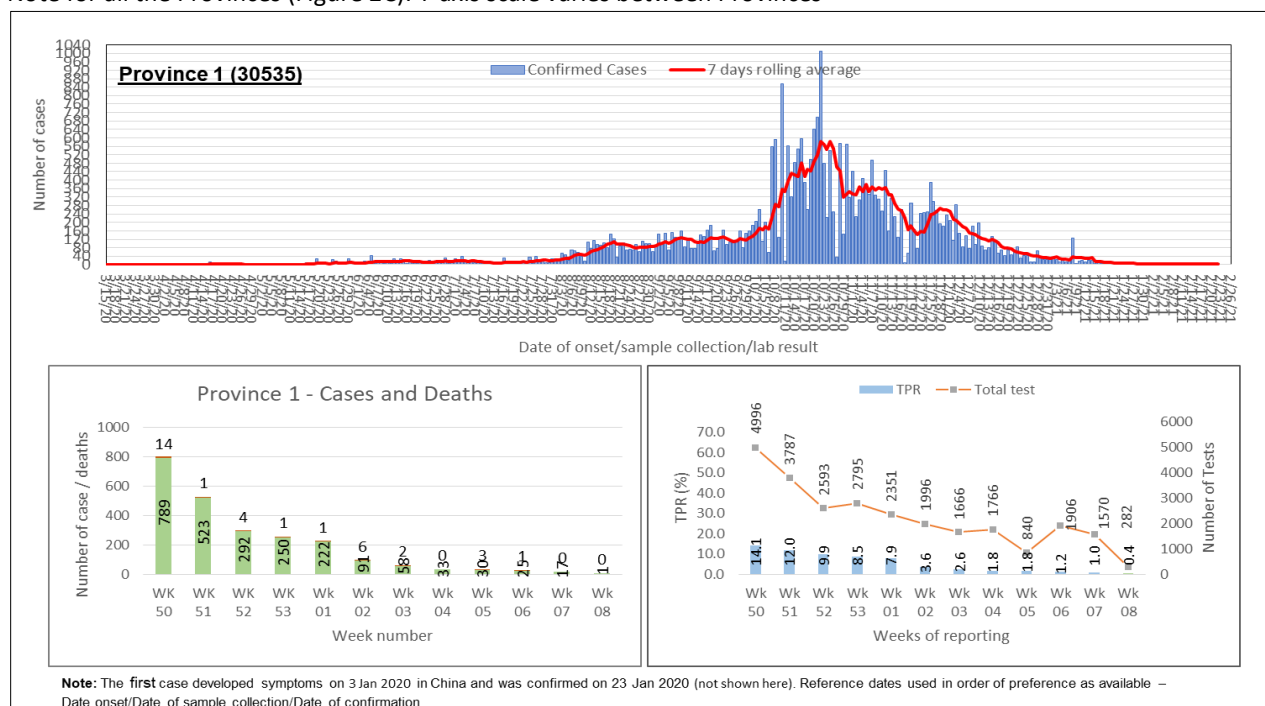
Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 273556)(Data updated on 23 February 2021 TO 7:00:00)



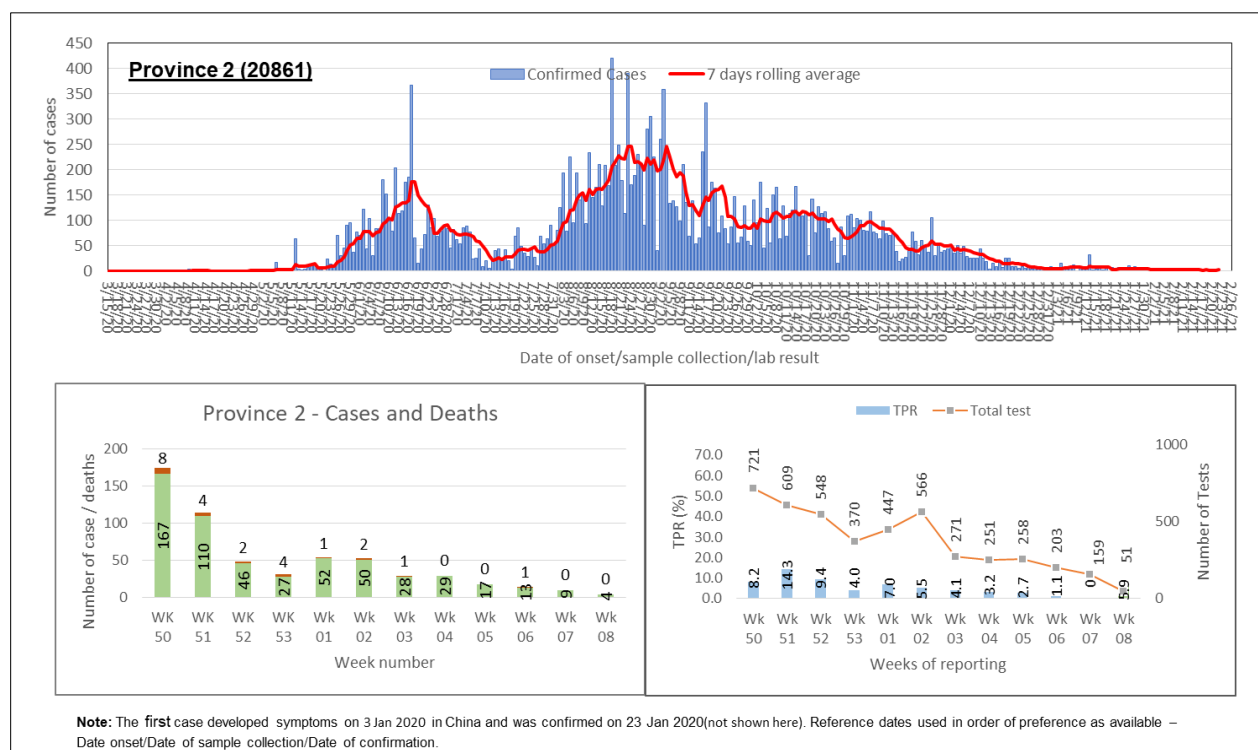
The cumulative case incidence has been increasing in Nepal since the first case confirmed in 23 January 2020. Cases have been largely reported from Bagmati Province followed by Lumbini Province and Province 1.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 273556)(Data updated on 23 February 2021 TO 7:00:00)

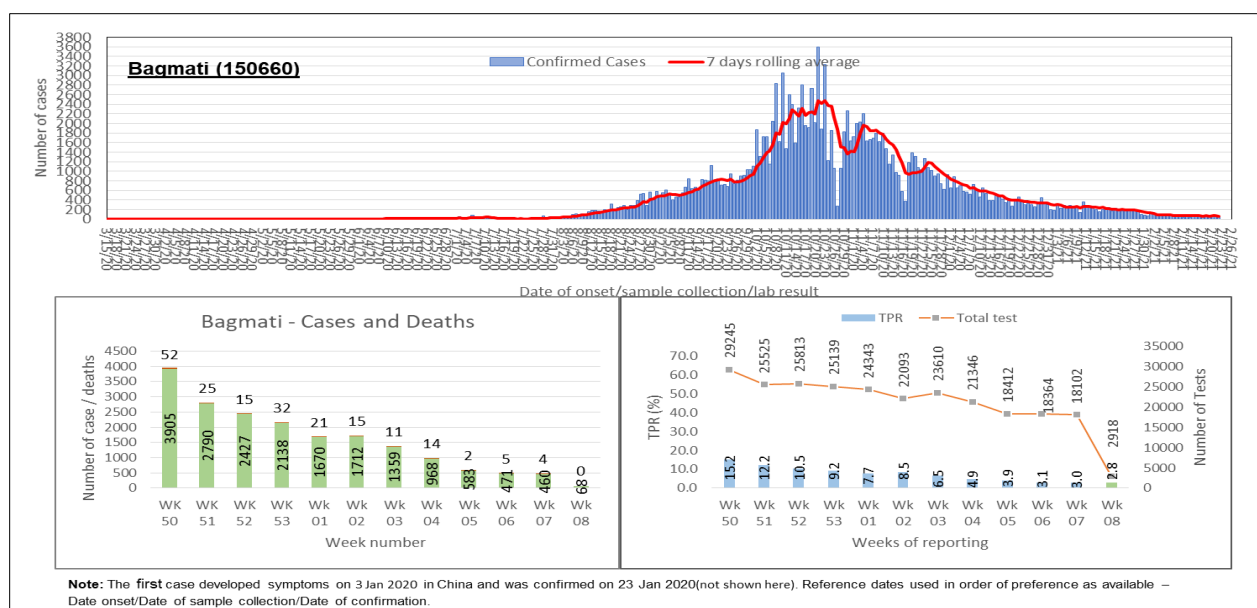
Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces



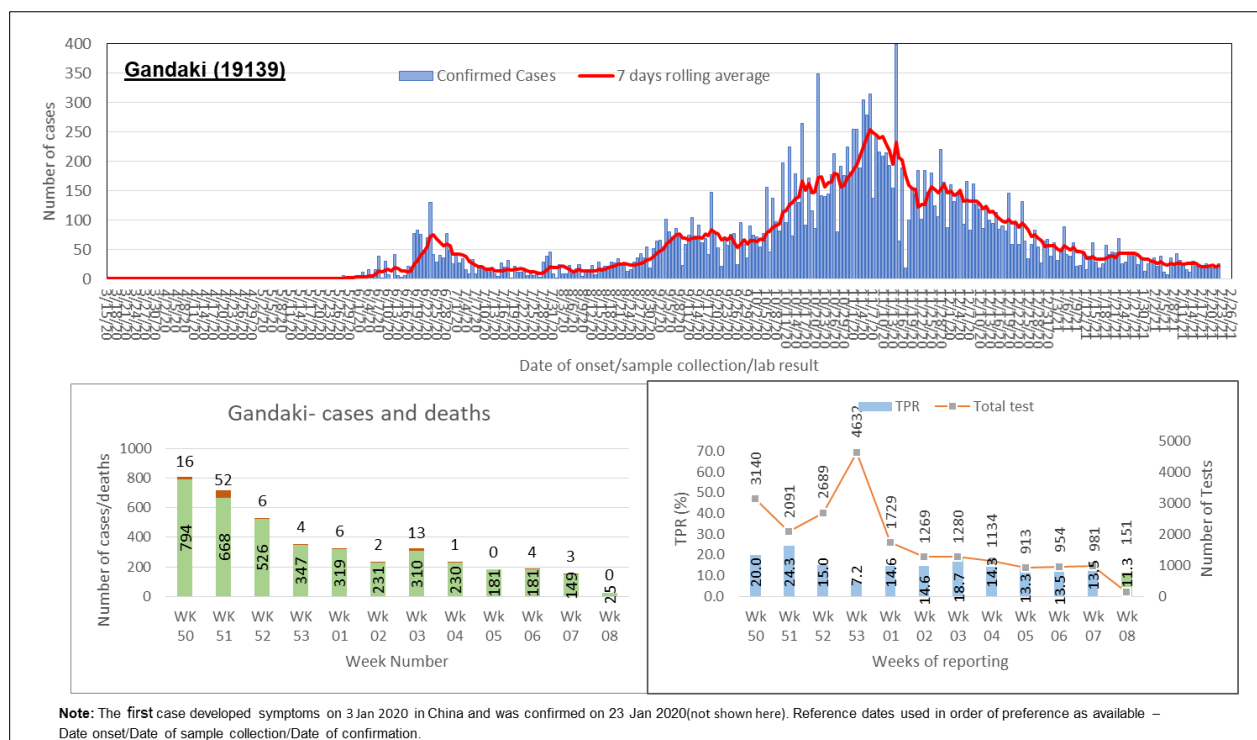
There were 17 new cases reported in the past week in Province 1. Since a peak in October, weekly new cases have continued to decrease and fell by 32% in the past week compared to the previous week. There were no deaths reported in the past week, a decline from 1 death in the previous week. The test positivity rate in Province 1 decreased to a low of 1.0% in the past week continuing a decreasing trend. A total of 1570 tests were performed in the past week, an 18% decrease from that of the previous week.



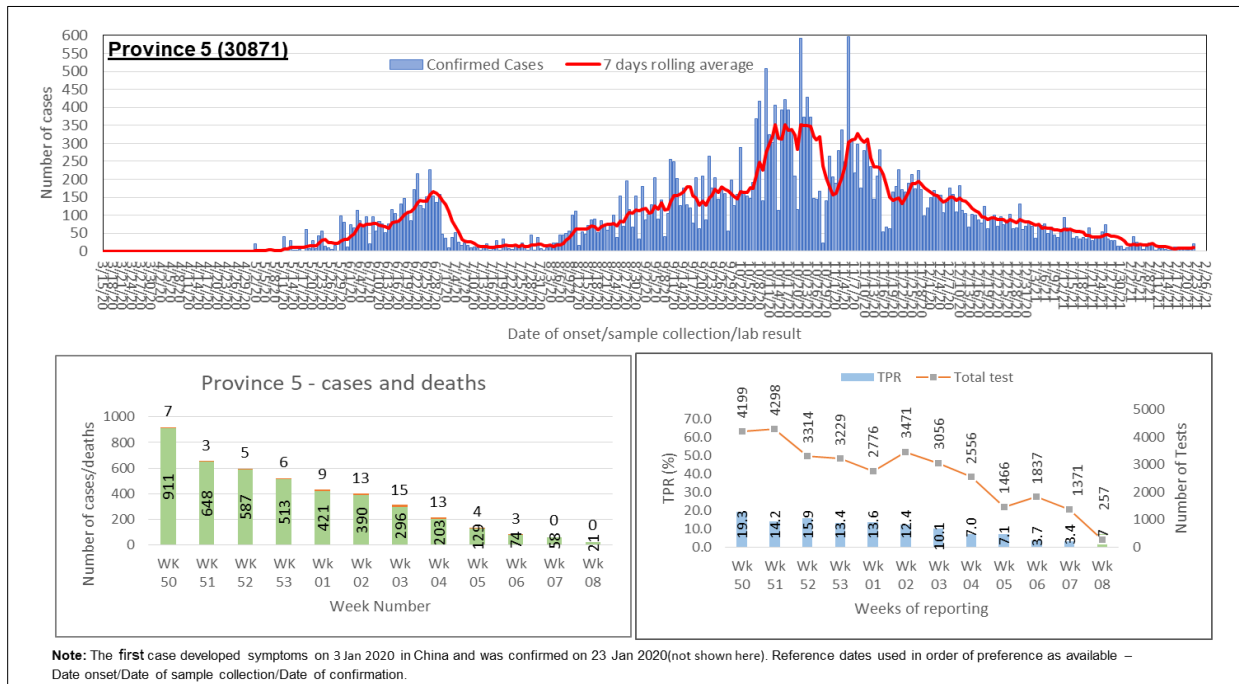
There were 9 new cases reported in the past week in Province 2. Weekly new cases are continuously decreasing and fell by 31% in the past week compared to the previous week. There were no deaths reported in the past week, a decline from 1 death in the previous week. The test positivity rate in Province 2 continued a decreasing trend to 0% in the past week. A total of 159 tests were performed in the past week, a 22% decrease from that of the previous week.



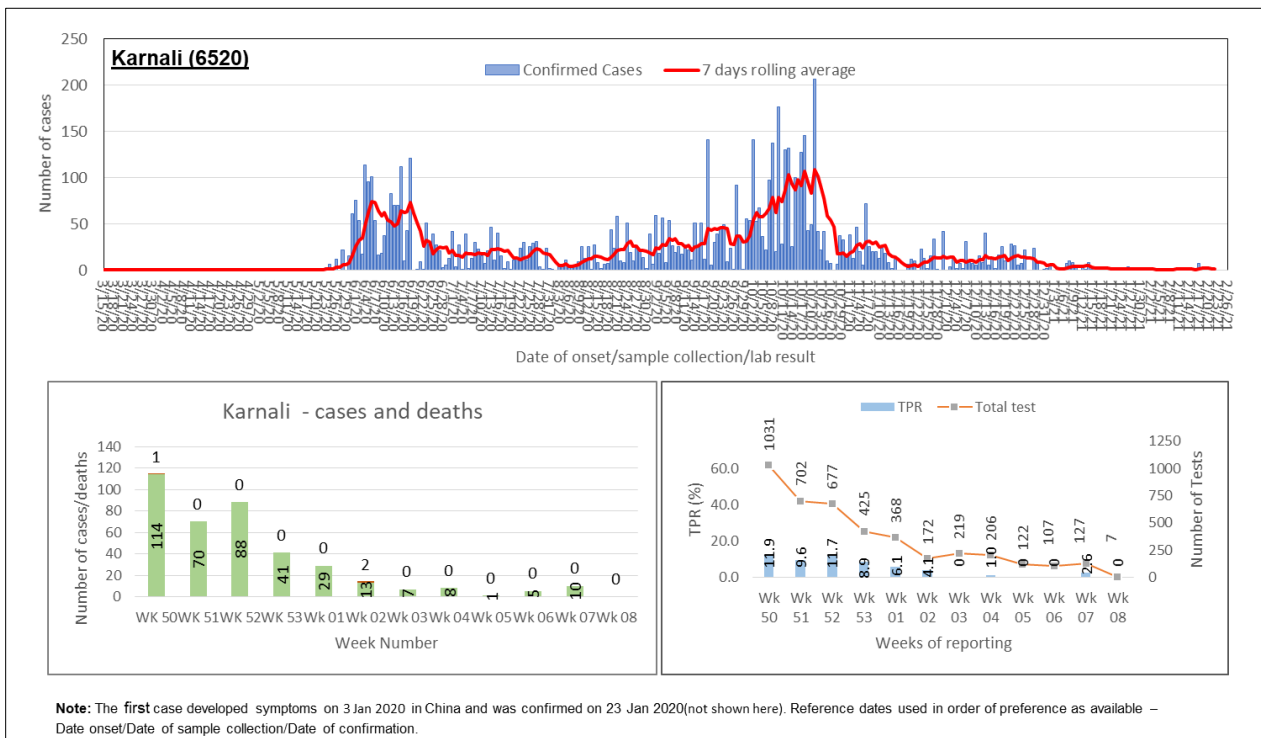
In Bagmati, 460 new cases were reported in the past week. Weekly new cases are steadily decreasing and fell by 2% in the past week compared to the previous week. There were 4 deaths reported in the past week, a 33% less compared to that in the previous week. The test positivity rate in Bagmati remained relatively stable at a 3.0% in the past week. A total of 18102 tests were performed in the past week, 1% decrease from that of the previous week.



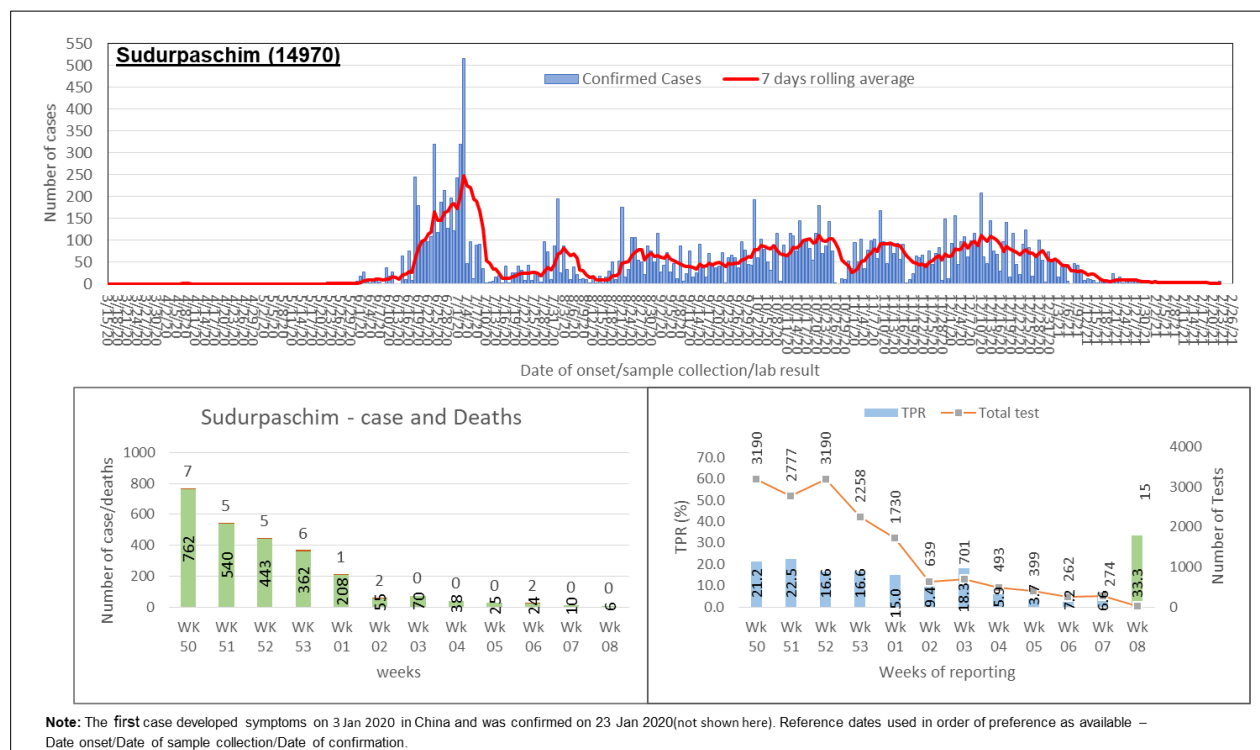
In Gandaki, 149 new cases were reported in the past week. Weekly new cases have fallen considerably since a peak in week 45 and fell by an 18% in the past week compared to the previous week. There were 3 deaths reported in the past week, consistent with the previous week. The test positivity rate in Gandaki remained stable at a 13.5% in the past week. A total of 981 tests were performed in the past week, a 3% increase from that of the previous week.



Lumbini reported 58 new cases in the past week. The number of new cases being reported has fallen significantly since a peak in Week 45 and fell by a 22% in the past week compared to the previous week. There were no deaths reported in the past week, a decline from 3 deaths in the previous week. The test positivity rate in Lumbini decreased to a 3.4% in the past week continuing a decreasing trend. A total of 1371 tests were performed in the past week, a 25% decrease from that of the previous week.

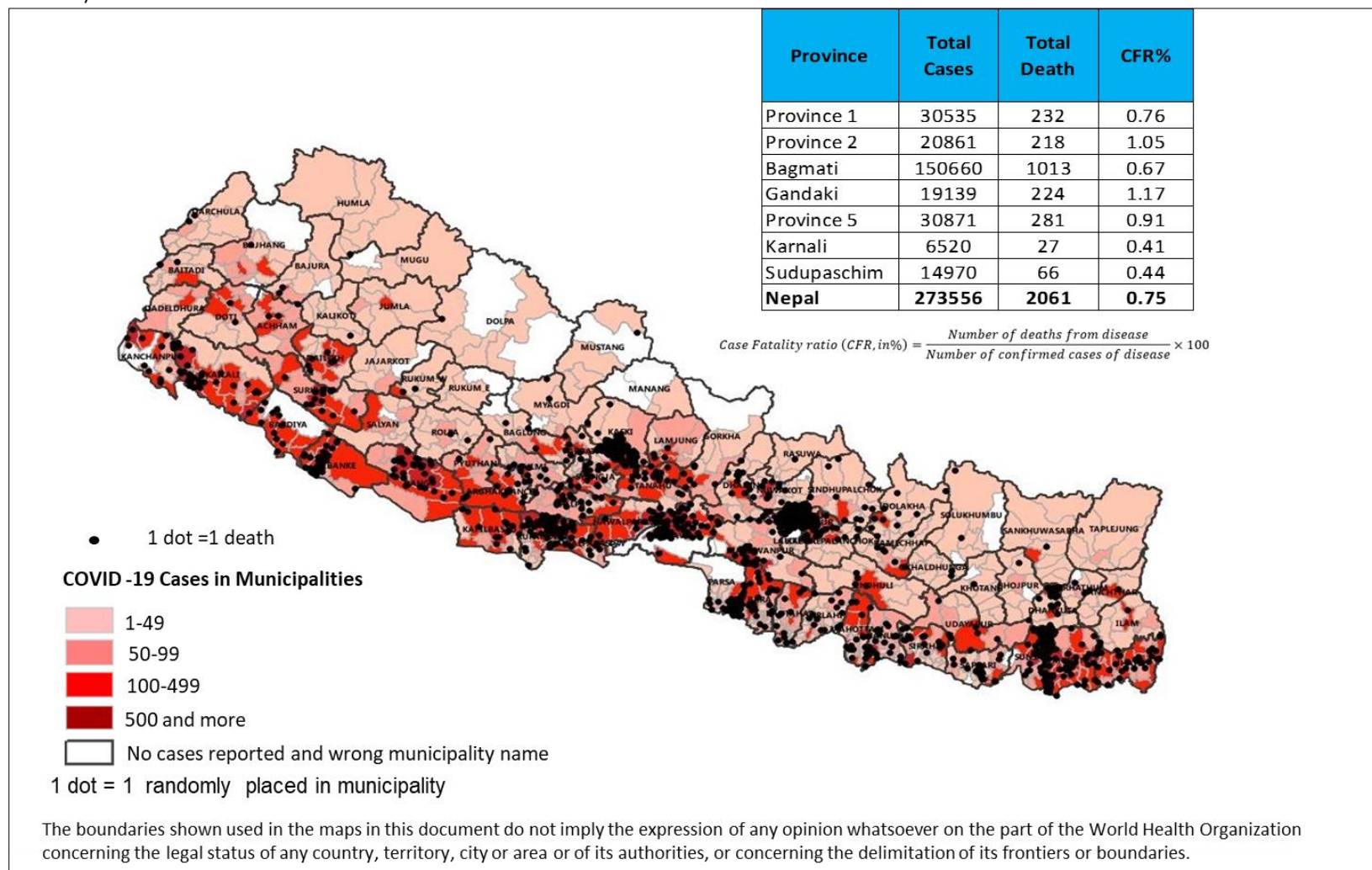


In Karnali, 10 new cases were reported in the past week. Since cases peaked in the week 42, weekly decrease in new cases have continued but increased by two-fold in the past week compared to the previous week. There were no deaths reported in the past week, which is consistent with the previous week. The test positivity rate in Karnali increased to 2.6% in the past week. A total of 127 tests were performed in the past week, a 19% increase from that of the previous week.



In Sudurpashchim, 10 new cases were reported in the past week. Weekly new cases are continuously decreasing and fell by 58% in the past week compared to the previous week. There were no deaths reported in the past week, a decline from 2 deaths in the previous week. The test positivity rate in Sudurpashchim decreased to 6.6% in the past week. A total of 274 tests were performed in the past week, a 5% increase from that of the previous week.

Figure 3: National -Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 273556)(Data updated on 23 February 2021 TO 7:00:00)



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 the CFR is relatively high in Province 2 with 1.05% and Gandaki Province with 1.17%.

Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces.

(N = 273556)(Data updated on 23 February 2021 TO 7:00:00)

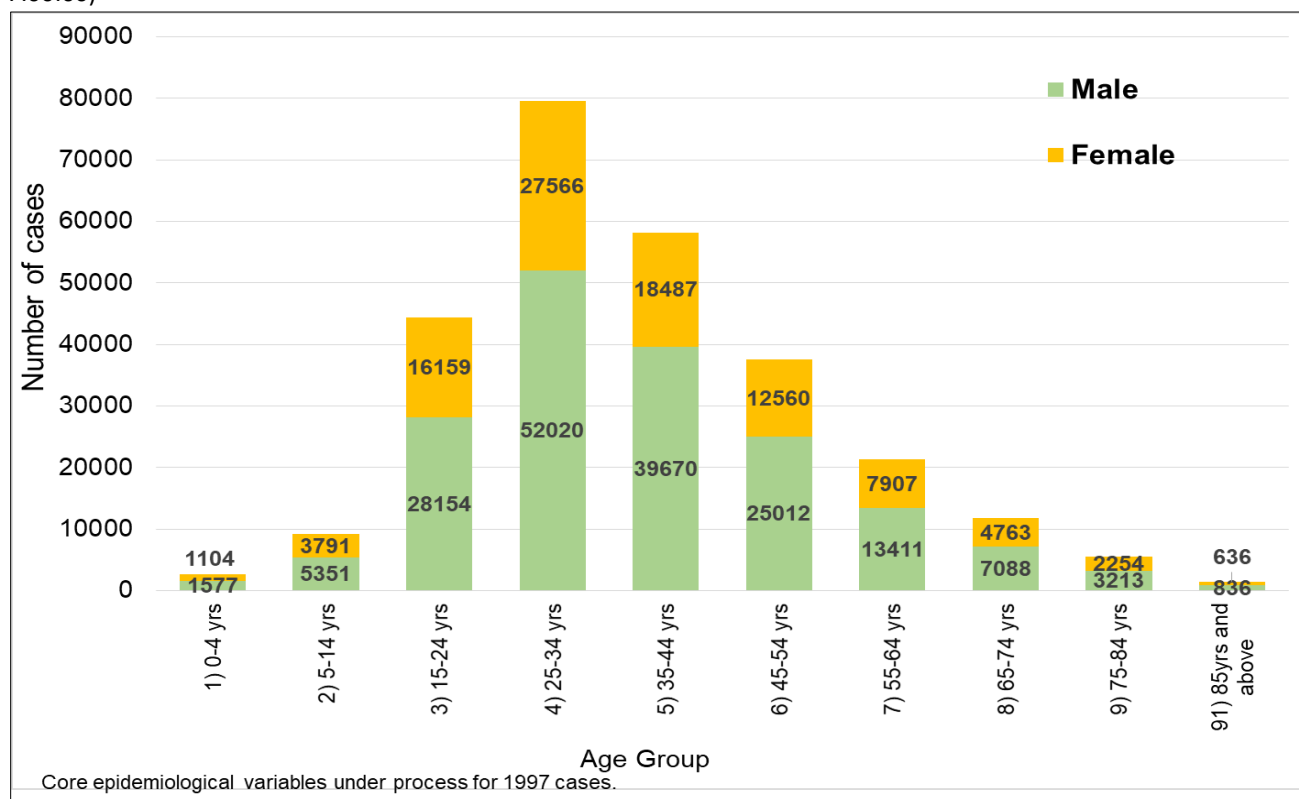
Reporting Province	Total confirmed cumulative cases	% of the total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Total confirmed cases in last 14 days	Total deaths in last 14 days
Province 1	30535	11.2	232	Cluster of cases	40	1
Province 2	20861	7.6	218	Cluster of cases	24	1
Bagmati	150660	55.1	1013	Cluster of cases	928	9
Gandaki	19139	7.0	224	Cluster of cases	331	7
Province 5	30871	11.3	281	Cluster of cases	130	3
Karnali	6520	2.4	27	Cluster of cases	14	0
Sudurpashchim	14970	5.5	66	Cluster of cases	34	2
National Total	273556	100	2061	Cluster of cases	1501	23

- 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 = 271559)(Data updated on 23 February 2021 TO 7:00:00)



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 = 273556)(Data updated on 23 February 2021 TO 7:00:00)

Age Group	Total confirmed cases	Death (male)	Death (female)	Deaths with any known comorbid condition	Age specific case fatality ratio (%)
0-4 yrs	2681	2	4	2	0.22
5-14 yrs	9142	3	2	5	0.05
15-24 yrs	44313	22	25	32	0.11
25-34 yrs	79586	60	34	46	0.12
35-44 yrs	58157	114	57	90	0.29
45-54 yrs	37572	200	70	162	0.72
55-64 yrs	21318	289	104	264	1.84
65-74 yrs	11851	380	153	385	4.5
75-84 yrs	5467	262	129	277	7.15
85+ yrs	1472	109	40	104	10.12
Unknown	1997	2	0	1	0.1
National	273556	1443	618	1368	0.75

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 2,061 deaths have been reported. Out of the total deaths, 1,443 (70.0%) were males and 618 (30.0%) were females. Amongst the deaths, 1,368 persons (66.4%) 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 10.1%.

PREPAREDNESS AND RESPONSE

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

- COVID-19 immunization campaign has remained the central focus of the Government of Nepal and the Ministry of Health and Population (MoHP).
- As of 22 February 2021, in the ongoing first phase- second priority COVID-19 vaccination campaign (14-20 February 2021, ongoing), a total of 239,579 beneficiaries were vaccinated. Since the start of the first phase vaccination campaign for the first priority targeted population (including health care workers) a total of 428,924 beneficiaries have been vaccinated.
- Nepal received 1 million doses of COVISHIELD from Serum Institute of India (SII) on 21 February 2020, which is the 1st installment from SII. Nepal released 80% of the contract with SII to procure 2 million doses of COVISHIELD.
- In the presence of Health Secretary of MoHP, Health Specialists, MoHP division chiefs, Family Welfare division director, Child Health and Immunization section chief, Provincial Health Coordinators, Ministry of Social Development Chiefs, Directors of Health Officers, and health experts, a meeting was held on 22 February 2021 for COVID-19 immunization campaign progress review. The following decisions were made during the review meeting:
 - 1) A decision was made to thank all health workers who took part in the first phase of COVID-19 vaccination
 - 2) Vaccination centers during the second phase of the campaign were identified to operate with the following:
 - a) Ambulances will be kept on standby.
 - b) Adrenaline and other lifesaving kits to be kept compulsory in each vaccination site, for the management of Adverse Effect Following Immunization (AEFI),
 - 3) The National Lymphatic Filariasis mass drug administration campaign may coincide with the dates for conducting the second phase of COVID-19 vaccination campaign in some districts. Therefore, Epidemiology and Disease Control Division (EDCD) will provide a new timeline of dates to MOHP ICS for conducting this Lymphatic Filariasis mass drug campaign.
 - 4) Provinces and districts seeking vaccine carriers and boxes in support of COVID-19 vaccination campaign should request these items from departments as soon as possible.

What is the WHO Country Office for Nepal doing?

- In collaboration with the government of Nepal and other partners, WHO Country Office for Nepal is supporting ongoing second phase- first priority of the vaccination campaign which started on 14 February 2021 across the country (Pictures below).



Left: A man taking vaccine during COVID-19 pandemic at Bir Hospital, Kathmandu, Province Bagmati Pradesh.

Below: A collage image of people holding vaccination card after getting COVID-19 vaccine at Bir Hospital, Kathmandu, Province Bagmati Pradesh.

Picture Credit – WHO Nepal/A. Maharjan



Laboratory Capacity

- WHO Nepal has been providing support to the National Public Health Laboratory (NPHL) in monitoring quality standards of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 5 designated COVID-19 labs participated in the NQAP this week. One of the participating laboratories resulted with concordance $\leq 80\%$, and was communicated to the respective lab with recommendations for quality improvement. The other four participating laboratories were satisfactory with a result of $\geq 90\%$ concordance.
- WHO Nepal has been facilitating the validation of designated COVID-19 laboratories at the request of the new laboratories performing COVID-19 laboratory tests. These laboratories share their 10 positives and 10 negative samples which are then validated at NPHL.
 - Baitadi Hospital PCR laboratory and Bajhang Hospital PCR laboratory underwent validation this week but did not pass the validation process.
 - Both these laboratories have been advised to share another 10 positive samples to undergo the validation process again.
 - The WHO consultant supported the validation, report preparation, and dissemination.
- WHO Nepal also provided technical support for validation of TEBSUN (Dry bath incubator with heated lid)-LAMP with an unsatisfactory result.
- Technical support has also been provided to NPHL by WHO, for facilitating and organizing a virtual meeting with key focal persons of the National Influenza Surveillance Network (NISN).
 - The meeting was held on 19 February 2021 to restructure the influenza surveillance network along with expansion of influenza surveillance sites at Provincial level laboratories. The meeting also sought to integrate the COVID-19 testing into the influenza surveillance system.
 - The virtual session was joined by EDCCD director, key focal person from Patan Academy of Health Sciences (PAHS) and Walter Reed/AFRIMS Research Unit Nepal (WARUN) along with expertise from WHO CO Nepal.

Technical Expertise and Training

- Discussion and agreement have been made to support Health Emergency Operation Center (HEOC) regarding a joint review of the oxygen status in health facilities at Provincial level in the country. An assessment of oxygen status and critical care equipment is scheduled to begin from 24 February 2021 targeting 16 hospitals with ICU facilities at Province 1 and 2. This is a continuation of the assessment conducted at major hospitals at Kathmandu Valley on December 2020.

Risk Communication and Community Engagement

- The following documents were translated this week (16-22 February 2021):

SN	TRANSLATION DOCUMENT	Type
1	COVID-19 Global Risk Communication and Community Engagement Strategy	Guidelines
2	Adverse Effects Following Immunization (AEFI) Messages	Messages
3	10 Steps to Community Readiness_Full Guidelines	Guidelines
4	Acceptance and demand for COVID-19 vaccines: Interim guidance	Summary
5	Data for action: achieving high uptake of COVID-19 vaccines: Interim Guidance	Summary
6	Conducting community engagement for COVID-19 vaccines Interim Guidance	Summary
7	Mental health and psychosocial support aspects of the COVID-19 response Interim Guidance WHO	Summary
8	COVID-19 vaccination: supply and logistics guidance	Summary
9	Evidence Brief_Feb. 19	Evidence Brief
10	Operational considerations to expedite genomic sequencing component of GISRS surveillance of SARS-CoV-2	Summary

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

Episodes	Titles	Language	Links
24	Vaccine myths vs science खोपसम्बन्धी मिथ्या कुरा र विज्ञान	Maithili	Link
25	Vaccines explained कोभिड-१९ खोपके व्याख्या	Maithili	Link
25	Vaccines explained कोभिड-१९ खोपके व्याख्या	Nepali	Link

- The video (*Understanding Vaccines*) developed by HQ was translated and dubbed in Nepali. Nepali subtitles were also added. Video was shared via WCO Nepal Facebook page here.
- Videos of frontline health workers getting vaccinated, and their positive responses following vaccination, continued to be shared via WCO Nepal social media.

What are the health cluster partners doing?

- Weekly Health Cluster Coordination meeting (every Thursday) for health sector response is 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 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 (NHEICC), Family Welfare Division (FWD) and Management Division (MD) at the Department of Health Services for COVID and NON-COVID responses including COVID vaccination campaign.

- WHO Nepal and UNICEF Nepal are providing support for COVID-19 vaccination campaign in close coordination with External Development Partners (EDPs) at various vaccination sites for continuation of first phase- second priority beneficiaries.

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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