

# Situation Update #52 - Coronavirus Disease 2019 (COVID-19)

## WHO Country Office for Nepal

Reporting Date: 6 – 12 April 2021

### HIGHLIGHTS\*

- Of the total COVID-19 positive cases, 97.7% of cases have recovered and 1.2% (3306) of cases are active.
- Of the total COVID-19 deaths, the most common co-morbidity identified in fatal cases was hypertension (39.9%).
- New cases have been reported from 52 districts.
- There have been 1,844,315 people who have received the 1<sup>st</sup> dose of COVID-19 Vaccine.
- The China manufactured vaccine - Vero Cell-against COVID-19 infection has been administered for frontline workers as well as those involved in trans-Himalayan trade activities in the mountainous region, Nepali students studying in China under scholarship schemes and those preparing to visit China for further studies from 7 April 2021
- Second dose of COVID-19 vaccine will begin from 20 April 2021.

*\*Data as of COVID-19 Update, MoHP, 12 April 2021*

### SITUATION OVERVIEW

#### NEPAL

*(Data as of 13 April 2021, 07:00:00 hours)*

**280,524 confirmed cases**

**3,053 deaths**

**2,317,284 RT-PCR tests**

#### SOUTH-EAST ASIA REGION

*(Data as of 11 April 2021, 10am CET)*

**16,177,826 confirmed cases**

**228,385 deaths**

#### GLOBAL

*(Data as of 11 April 2021, 10am CET)*

**135,057,587 confirmed cases**

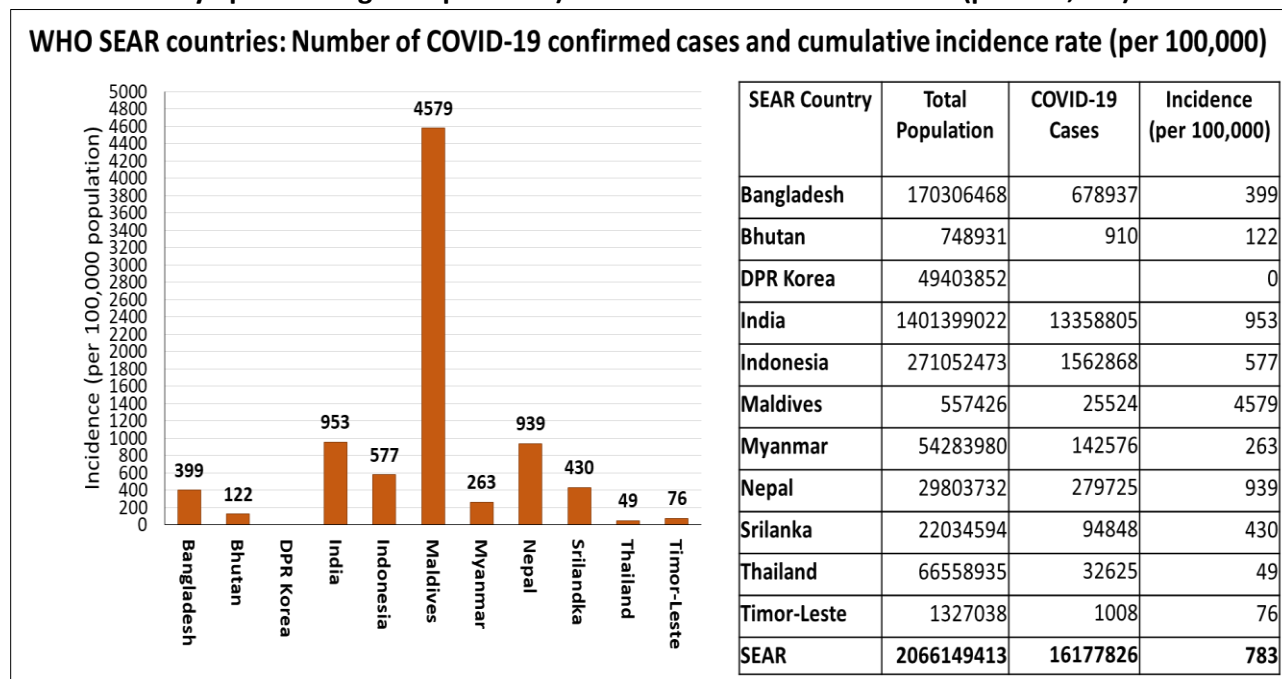
**2,919,932 deaths**

### NEPAL EPIDEMIOLOGICAL SITUATION

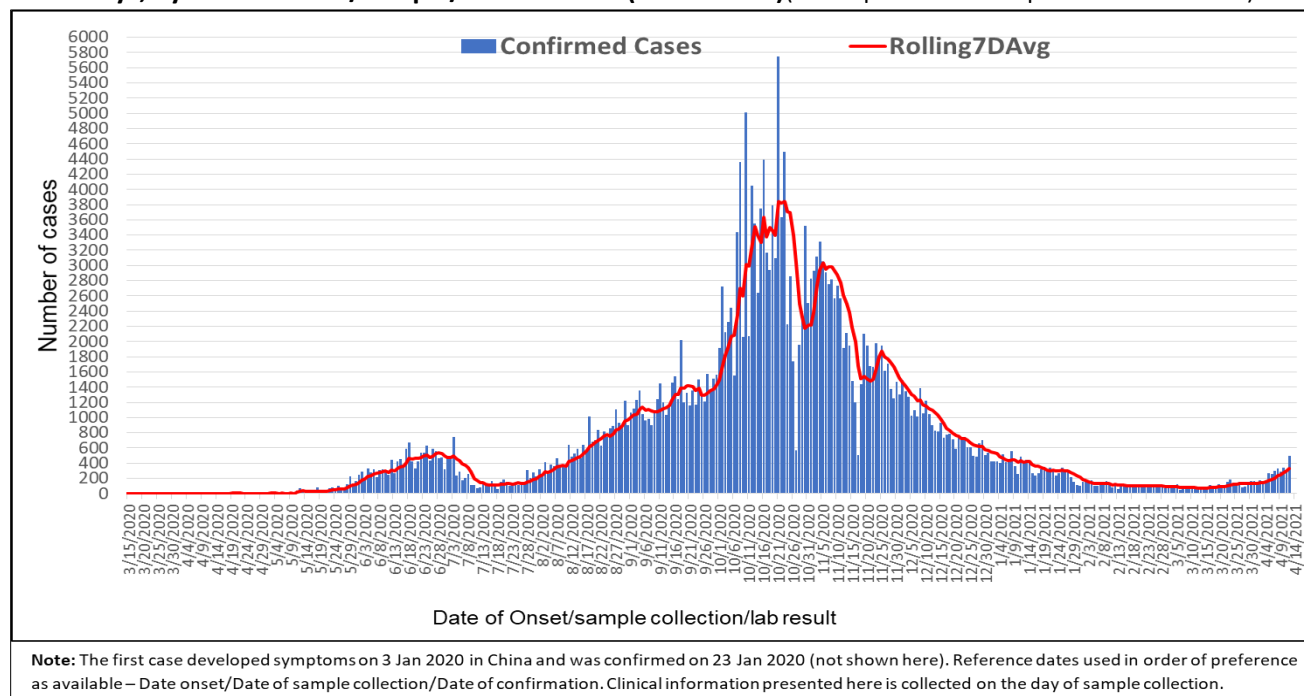
- As of 13 April 2021, T07:00:00 hours (week no. 15), a total 280,524 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR); 2,317,284 RT-PCR tests have been performed nationwide by functional designated COVID-19 labs.
- All 7 provinces in the country are now experiencing transmission via clusters of cases.
- Province-wise test positivity rate in the past week (week 14) ranged from 5.4% (Province 1) to 18.6% (Gandaki Province), with national positivity rate averaging 13.1%.
- Overall, the sex-distribution remains skewed towards males, who constitute 65% (181731/280524) of confirmed cases. Amongst the males, 81% (147983/181731) are in the economically productive age group (15-54 years).
- A total of 2 samples were received at National Influenza Center (NIC), NPHL for surveillance of influenza on EPID-week 15 (5-12 April 2021).
  - None of these samples tested positive for Influenza A/H3.
  - From 4 January until 12 April 2021, a total of 407 samples have been tested for Influenza and SARS-CoV-2. Four samples have tested positive for SARS-CoV-2.<sup>1</sup>

<sup>1</sup> These positive cases are included in the COVID-19 database

**Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 11 April 2021; #Global Weekly Epidemiological Update 35) and cumulative incidence rate (per 100,000)**

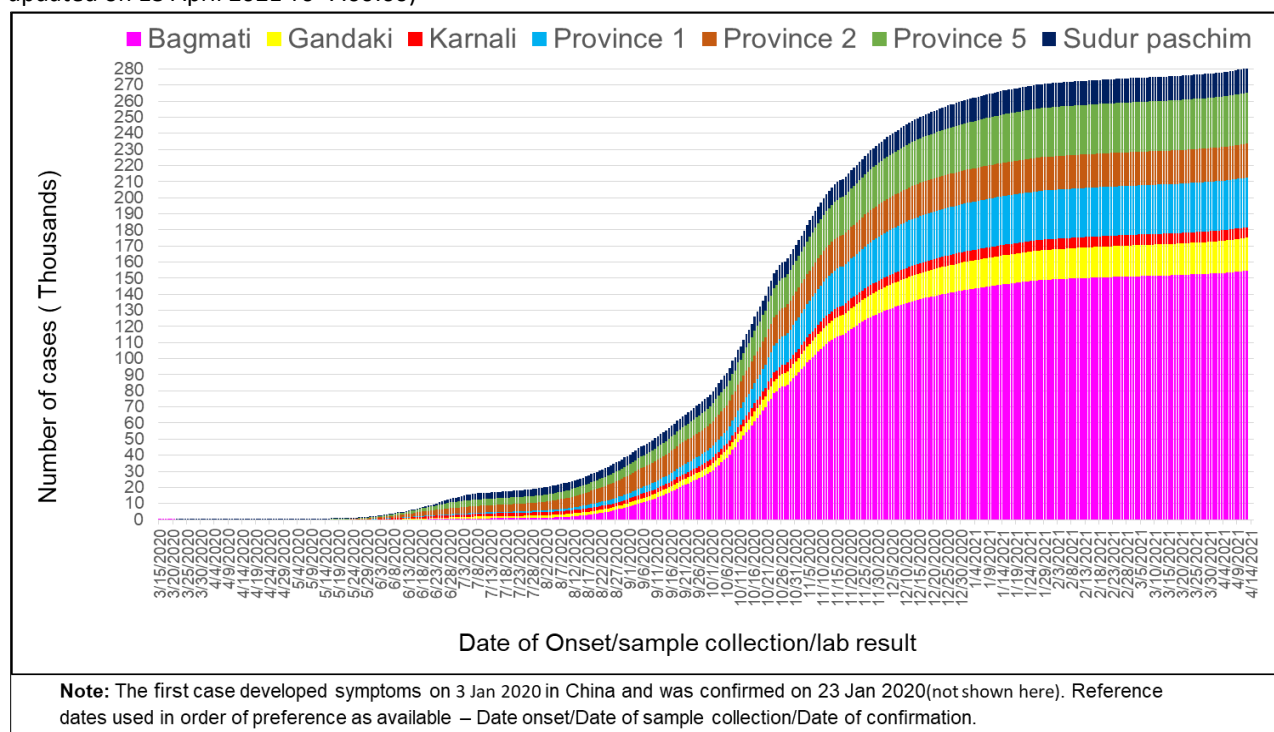


**Figure 2A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 280524)(Data updated on 13 April 2021 TO 7:00:00)**



*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 undertaken. The total PCR tests done in Nepal on 12 April 2021 was 4378 which is about one fourth of the number tested during the peak in the end of October 2020.*

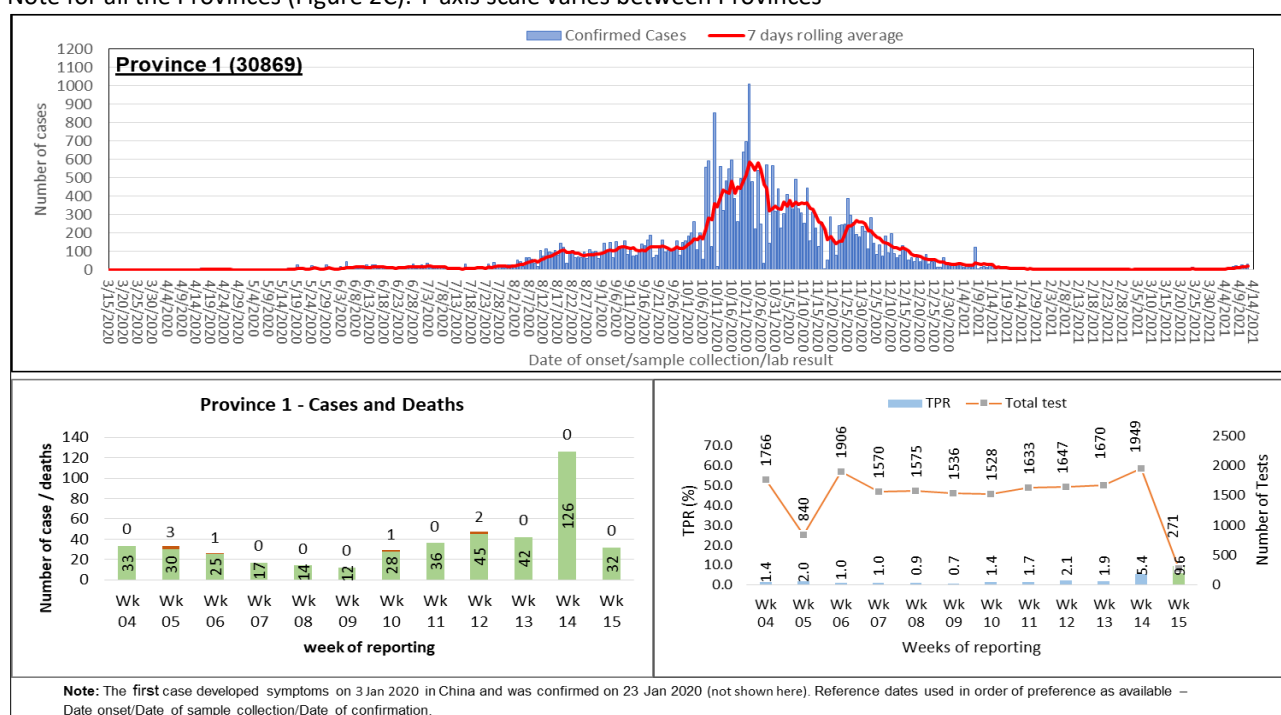
**Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 280524)**(Data updated on 13 April 2021 T0 7:00:00)



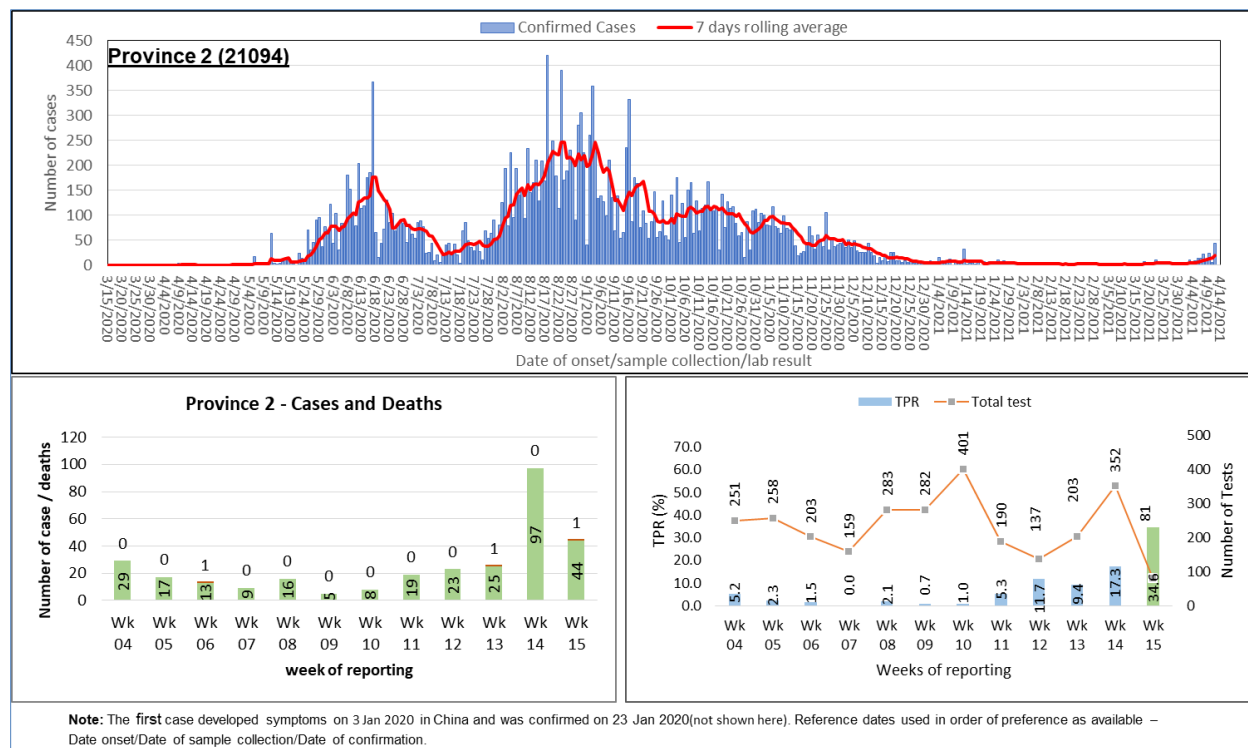
*The cumulative case incidence has been increasing in Nepal since the first case was confirmed in 23 January 2020. Cases have been largely reported from Bagmati Province followed by Lumbini Province and Province 1.*

**Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 280524)**(Data updated on 13 April 2021 T0 7:00:00)

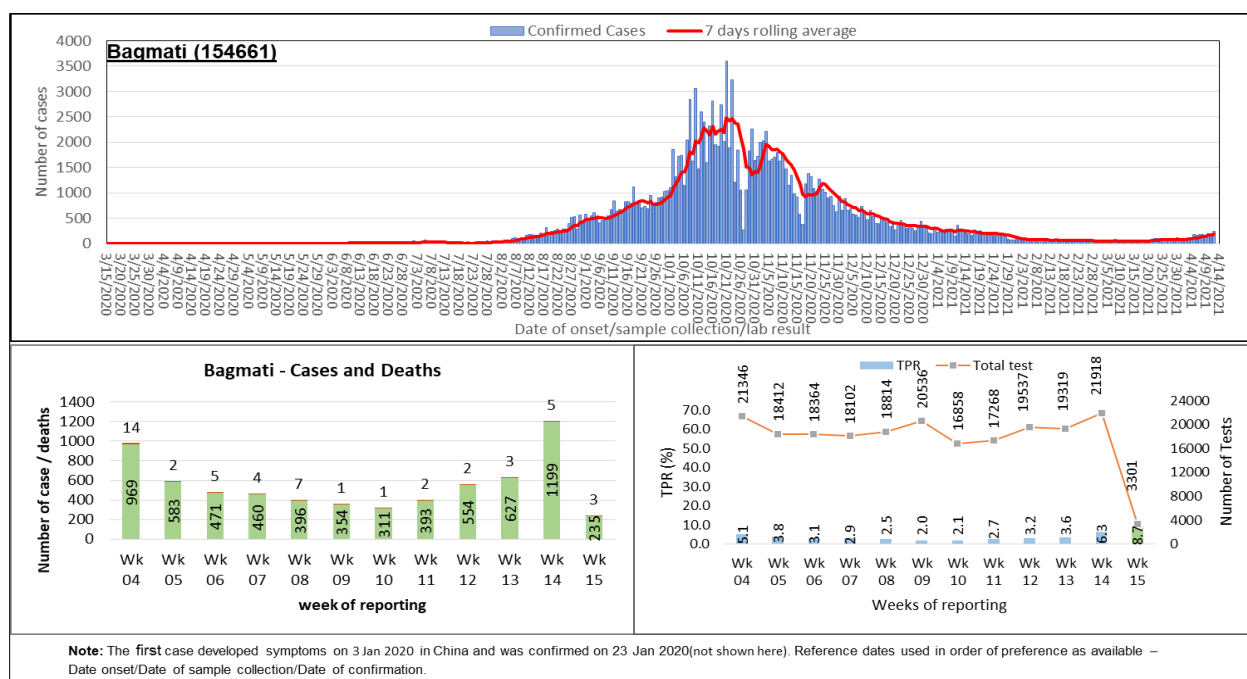
Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces



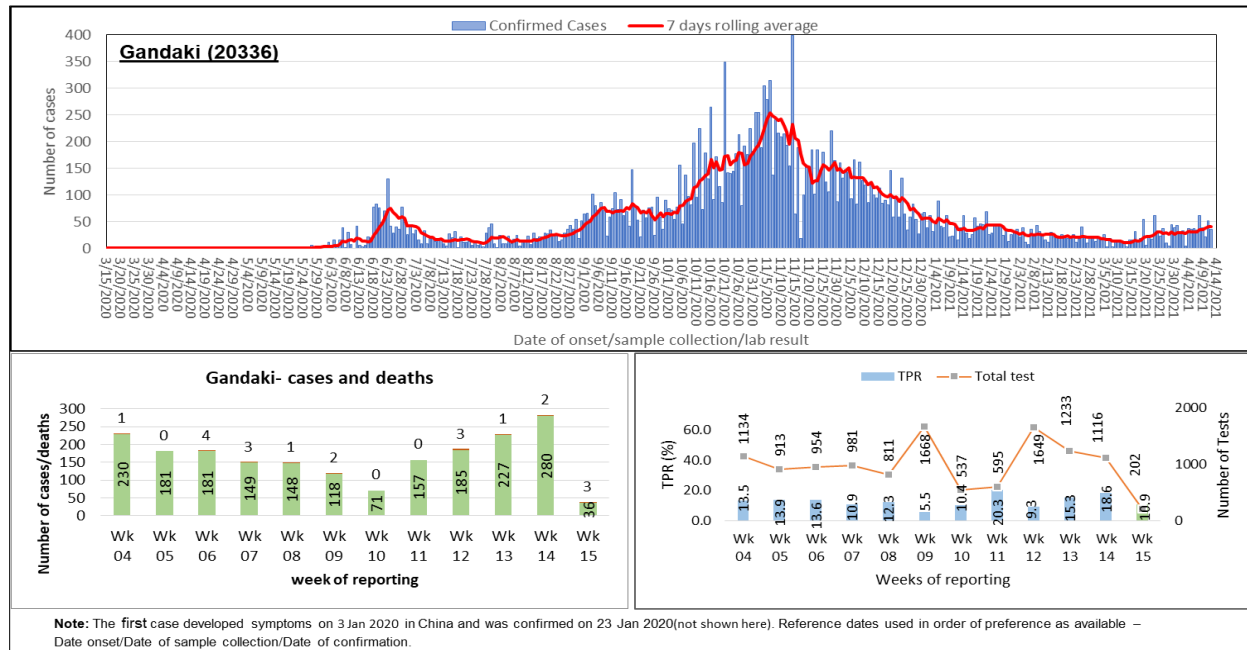
There were 126 new cases reported in the past week in Province 1. Weekly new cases were decreasing but the cases increased by three times in the past week compared to the previous week. There were no deaths reported in the past week, consistent with the previous week. The test positivity rate in Province 1 increased to 5.4% in the past week. A total of 1949 tests were performed in the past week, 17% more than that of the previous week.



There were 97 new cases reported in the past week in Province 2. Weekly new cases were continuously decreasing but cases then increased by four times 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 increased to 17.3% in the past week. A total of 352 tests were performed in the past week, 73% more than that of the previous week.

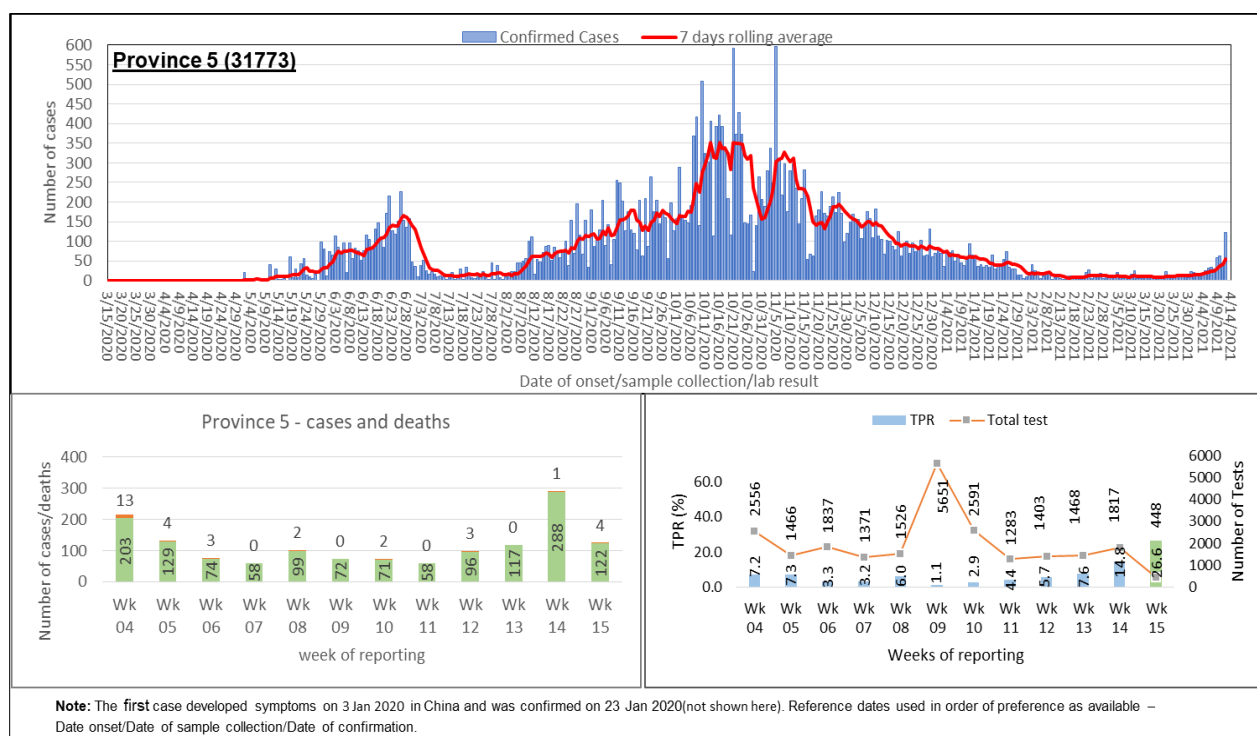


*In Bagmati, 1199 new cases were reported in the past week. Weekly new cases were steadily decreasing. However, cases increased by 91% in the past week compared to the previous week. There were 5 deaths reported in the past week, a 67% increase from that of the previous week. The test positivity rate in Bagmati increased to 6.3% in the past week. A total of 21918 tests were performed in the past week, 13% more than that of the previous week.*

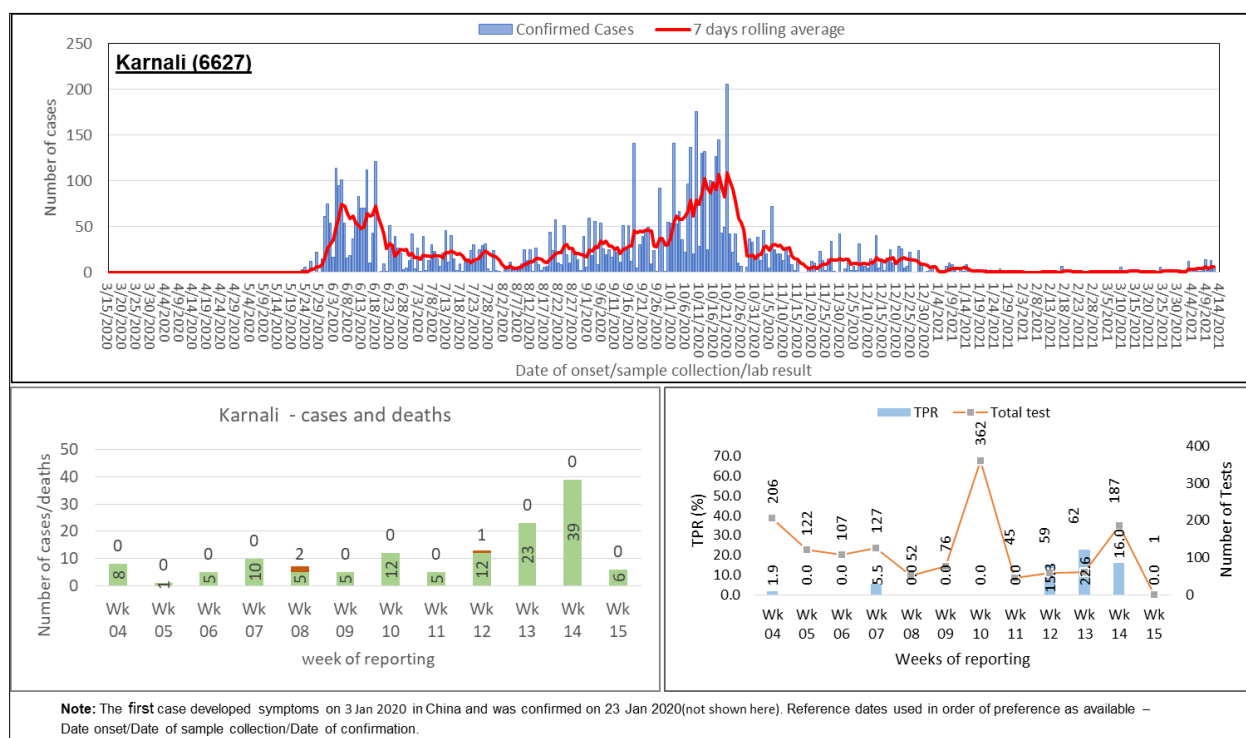


*In Gandaki, 280 new cases were reported in the past week. Weekly new cases have fallen considerably. However, cases have increased by 23% in the past week compared to the previous week. There were 2 deaths reported in the past week, twice that of the previous week. The test positivity rate in Gandaki increased to 18.6% in the past week. A total of 1116 tests were performed in the past week, 9% less than that of the previous week.*

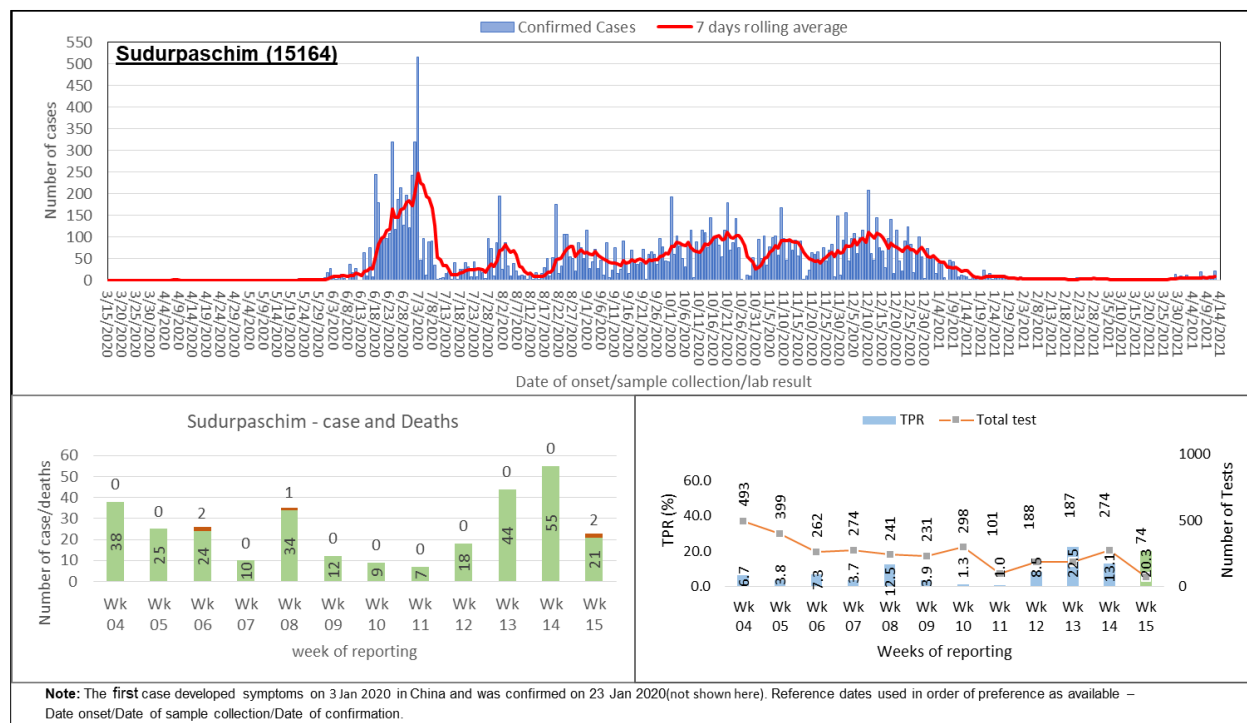




Lumbini reported 288 new cases in the past week. The number of new cases being reported has significantly decreased. However, cases have doubled in the past week compared to the previous week. There was 1 death reported in the past week, an increase from no deaths in the previous week. The test positivity rate in Lumbini increased to 14.8% in the past week. A total of 1817 tests were performed in the past week, 24% more than that of the previous week.

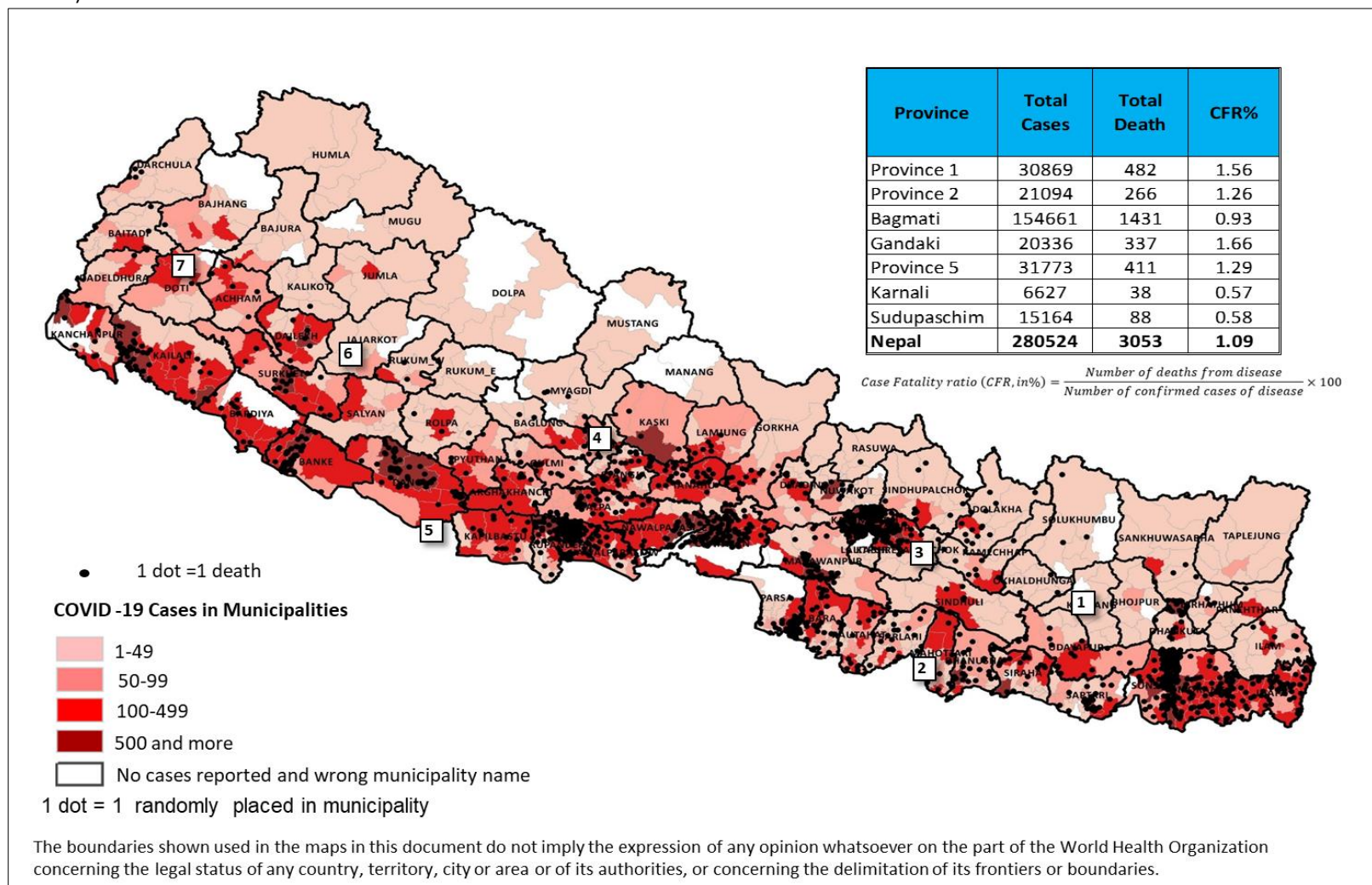


In Karnali, 39 new cases were reported in the past week. Weekly new cases were continuously decreasing but cases increased by 70% in the past week compared to the previous week. There were no deaths reported in the past week, consistent with the previous week. The test positivity rate in Karnali decreased to 16.0% in the past week. A total of 187 tests were performed in the past week, three times more than that of the previous week.



In Sudurpashchim, 55 new cases were reported in the past week. Weekly new cases were continuously decreasing but cases increased by 25% in the past week compared to the previous week. There were no deaths reported in the past week, consistent with the previous week. The test positivity rate in Sudurpashchim decreased to 13.1% in the past week. A total of 274 tests were performed in the past week, 47% more than that in the previous week.

**Figure 3: National -Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 280524)**(Data updated on 13 April 2021 TO 7:00:00)



Cases and deaths have been reported in high numbers from Bagmati Province, mostly from the Kathmandu valley area. The overall case fatality ratio (CFR) of Nepal is 1.1%. However, the CFR is relatively high in Province 1 with 1.6% and Gandaki Province with 1.7%.



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

**(N = 280524)**(Data updated on 13 April 2021 T0 7:00:00)

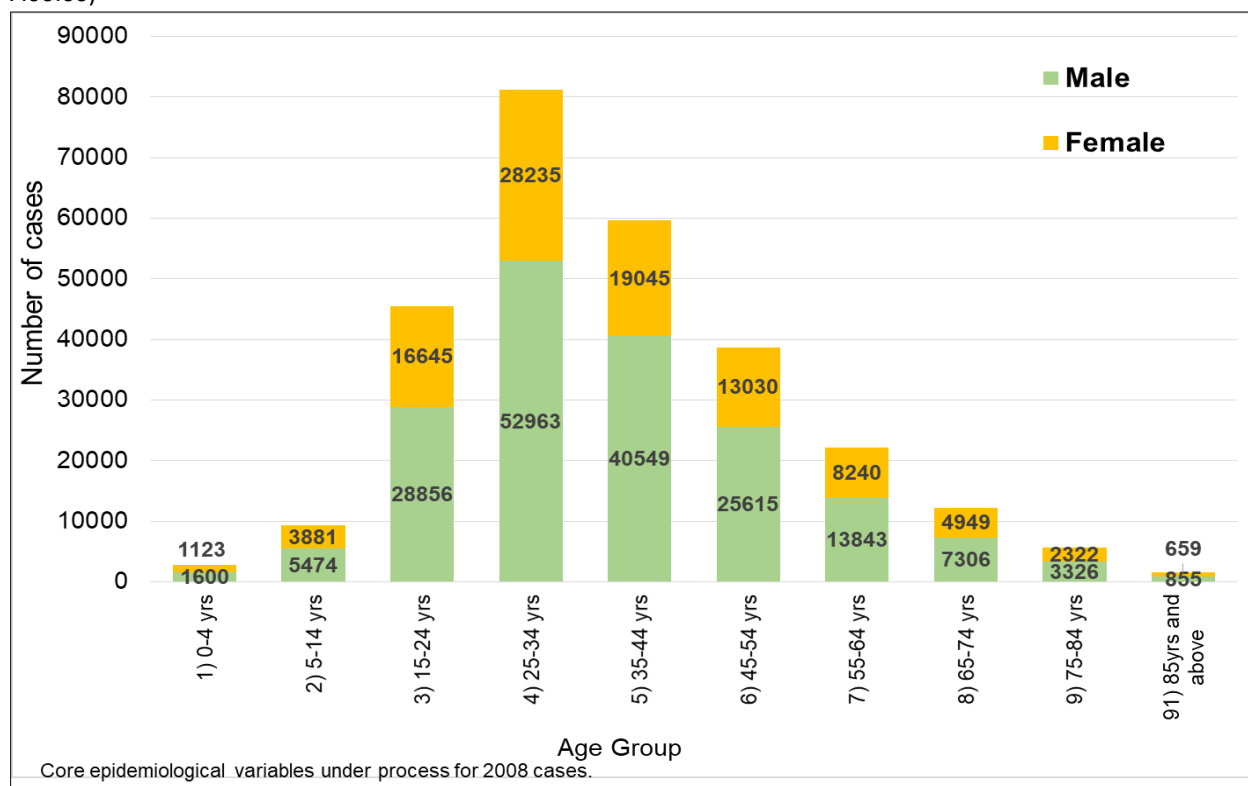
Reporting Province	Total confirmed cumulative cases	% of the total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Total confirmed cases in last 14 days	Total deaths in last 14 days
Province 1	30869	11.0	482	Cluster of cases	196	0
Province 2	21094	7.5	266	Cluster of cases	160	2
Bagmati	154661	55.1	1431	Cluster of cases	2000	11
Gandaki	20336	7.2	337	Cluster of cases	499	6
Province 5	31773	11.3	411	Cluster of cases	516	5
Karnali	6627	2.4	38	Cluster of cases	67	0
Sudurpashchim	15164	5.4	88	Cluster of cases	106	2
<b>National Total</b>	<b>280524</b>	<b>100</b>	<b>3053</b>	<b>Cluster of cases</b>	<b>3544</b>	<b>26</b>

# - 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 = 278516)**(Data updated on 13 April 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 = 280524)**(Data updated on 13 April 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	2723	8	8	5	0.59
5-14 yrs	9355	4	4	5	0.09
15-24 yrs	45501	30	28	35	0.13
25-34 yrs	81198	82	46	50	0.16
35-44 yrs	59594	158	72	103	0.39
45-54 yrs	38645	304	110	192	1.07
55-64 yrs	22083	417	158	306	2.6
65-74 yrs	12255	550	246	457	6.5
75-84 yrs	5648	406	196	346	10.66
85+ yrs	1514	159	63	122	14.66
Unknown	2008	2	2	3	0.2
<b>National</b>	<b>280524</b>	<b>2120</b>	<b>933</b>	<b>1624</b>	<b>1.09</b>

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

COVID-19 positive lab result is temporally associated with death; causal association under investigation.

*A total of 3,053 deaths have been reported. Out of the total deaths, 2,120 (69.4%) were males and 933 (30.6%) were females. Amongst the deaths, 1,624 persons (53.2%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1 %, CFR progressively increases with age beyond 65 years of age, ranging from 6.5% to 14.7%.*

## **PREPAREDNESS AND RESPONSE**

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

- COVID-19 vaccine (Vero Cell) received from the Government of China is being provided to the people between ages 40 – 59 years. This also includes provision of the vaccine to earlier planned target groups including:
  - People from essential services,
  - Students who are studying in China and
  - People who trade in between countries and others who plan to visit China due to personal and business reasons along with people from different occupational groups.
- After completion of 6 days session (7 -12 April) at 23 immunization centers 42,203 people have received the 1<sup>st</sup> dose of the Vero Cell vaccine .
- The second dose of COVISHIELD will be provided to the frontliners which includes health care workers during 20 – 24 April 2021.

### **What is the WHO Country Office for Nepal doing?**

#### ***Laboratory Capacity***

- WHO Nepal has been providing support to 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 the 2 participating laboratories was satisfactory with ≥90% concordance and the remaining 2 laboratories had the result <80% concordance.
- WHO Nepal also provided technical support to NPHL in the following activities:
  - Screening of S-gene in SARS-CoV2 positive samples received from 10 laboratories of Kathmandu valley. The samples from 7 laboratories have been screened and reported to NPHL. Of the 124 samples, 63 samples reported S gene negative. In the other 3 laboratories, the samples are in process of screening and are awaiting results.
  - Validation of Truenat Molbio (Testing for Beta CoV-2 & SARS-CoV-2). The process is ongoing and are awaiting results.

#### ***Technical Planning and Operations***

- WHO has been supporting HEOC to establish a telemedicine center at major hospitals located at all 7 provinces with the establishment of Tribhuvan University Teaching Hospital (TUTH) as a center for telemedicine. Since mid- March 2021, tele-medicine equipment has been installed in Narayani hospital and B.P. Koirala Institute of Health Sciences (BPKIHS), TUTH, Patan hospital, Karnali Academy of Health Sciences and Bheri Hospital. The equipment has

been dispatched to Seti Provincial Hospital & Pokhara Academy of Health Sciences and are soon to be installed.

- WHO staff participated in a preparatory meeting with National Health Training Center (NHTC), Nursing Security Service Division (NSSD), Clinical Training Skill (CTS) Trainers held on 12 April 2021 for “Development of Pool of IPC Trainers”. A discussion on the training package with its content division among trainers was done whereby contents of the training were also shared accordingly.

### ***Risk Communication and Community Engagement***

- Science in 5 videos translated, dubbed, and published (6-12 April 2021):

Episodes	Titles	Language	Link
32	Equity in vaccines, treatment and tests   कोभिड - १९ खोपसभ, ईलाज आ जाँचमे समता	Maithili	<a href="#">Link</a>
32	Equity in vaccines, treatment and tests   कोभिड - १९ खोप, उपचार र परीक्षणहरूमा समानता	Nepali	<a href="#">Link</a>

- The following IEC materials were shared on the occasion of the World Health Day 2021 on WCO Nepal social media:
  - Interview by Dr. Rajesh Sambhajirao Pandav, WHO Representative to Nepal, and Swasthya Khabar was shared via social media (Facebook [link](#); Twitter [link](#)).
  - A flyer, promoting the public health discussion on the themes of World Health Day 2021 on Nepal Television, was developed and shared via social media (Facebook [link](#) | Twitter [link](#)). The discussion aired on Nepal Television on the occasion of World Health Day 2021.
  - The following panel members were engaged in the public health discussion:
    - Dr. Dipendra Raman Singh, Director General, Department of Health Services;
    - Dr. Rajesh Sambhajirao Pandav, World Health Organization (WHO) Representative to Nepal; and
    - Dr. Sangeeta Mishra, Director, Paropakar Maternity and Women's Hospital.
  - Dr. Rajesh Sambhajirao Pandav, WHO Representative to Nepal, and Hon. Minister of Health and Population, Mr. Hridayesh Tripathi, attended SEARO's virtual World Health Day 2021 events. Images from the events were shared on social media (Facebook [link](#) | Twitter [link](#)). A quote card was also shared by SEARO with a message from the Hon. Minister (Facebook [link](#) | Twitter [link](#)). A video message, delivered by Hon. Minister during the event, was also shared on Facebook ([link here](#)).
- A video on Mild to Moderate COVID-19 Vaccine Side Effects (developed by WHO HQ) was dubbed in Nepali language with Nepali subtitles, and shared via social media (Facebook [link](#) | Twitter [link](#)).
- Infographics on precautionary measures to adopt during festival season were shared on WCO Nepal social media. An infographics pack can be downloaded via Facebook [here](#).
- IEC materials on COVID-19 vaccines and prevention measures were shared on 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 Provincial Level Health Cluster Coordination meetings as and when on required basis.
- Health partners are providing their support to the government for the continuation of COVID and non-COVID response throughout the country. The support has been provided through Ministry of Health and Population (MOHP) especially from Health Emergency Operation Centre (HEOC), Health Coordination Division (HCD), Policy, Planning & Monitoring Division (PP&MD), Epidemiology and Diseases Control Division (EDCD), National Public Health Laboratory (NPHL), National Health Training Centre (NHTC), National Health Education Information Communication Centre (NHEICC), Family Welfare Division (FWD), Management Division (MD), Hub hospital networks; Ministry of Social Development (MOSD) especially with Provincial Health Directorate Offices, District Public/Health Offices, and municipalities.
- WHO and UNICEF are providing support for COVID-19 vaccination campaign in close coordination with External Development Partners (EDPs) which includes:
  - Micro planning including financing for the procurement of vaccination;
  - Training/orientations – to health personnel at various levels, local governments;
  - Provision of Logistics support – vehicle, cold chain boxes, delivery of vaccines, transportation of beneficiaries to the vaccination site;
  - Information Technology - registration, information communication, data management, IMU app etc;
  - Risk communication and community engagement – production and dissemination of messages, public awareness campaigns etc; public awareness campaign and
  - Continuation of Technical Assistance.

## 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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