

Situation Update #56- Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Reporting Date: 4 – 10 May 2021

HIGHLIGHTS*

- Of the total COVID-19 positive cases, 76% (306,794) of cases have recovered and 23.1% (93,141) of cases are active.
- 46 districts have reported more than 200 active cases out of which 29 districts have reported more than 500 active cases
- Of the total active cases, 92.8% (86,426) of the active cases are in home isolation; 6,715 (7.2%) cases are undergoing hospital/institutional isolation of which 910 patients require ICU admission, amongst which 295 require ventilator support.
- New cases have been reported from 72 districts in the country. Among these new cases, 30.4% of the new cases are from Kathmandu district and 39.5% from Kathmandu valley
- There have been 2,091,511 people who have received the 1st dose of COVID-19 Vaccine and 368,811 people have received 2nd dose of COVID-19 vaccine.

**Data as of COVID-19 Update, MoHP, 10 May 2021*

SITUATION OVERVIEW

NEPAL

(Data as of 11 May 2021, 07:00:00 hours)

403,794 confirmed cases

3,758 deaths

2,652,130 RT-PCR tests

SOUTH-EAST ASIA REGION

(Data as of 9 May 2021, 10am CET)

25,552,640 confirmed cases

309,197 deaths

GLOBAL

(Data as of 9 May 2021, 10am CET)

157,362,408 confirmed cases

3,277,834 deaths

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 11 May 2021, T07:00:00 hours (week no. 19), a total 403,794 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR); 2,652,130 RT-PCR tests have been performed nationwide by designated functional COVID-19 laboratories.
- All 7 provinces in the country are now experiencing community transmission.
- Province-wise test positivity rate in the past week (week 18) ranged from 37.5% (Sudurpaschim Province) to 58.6% (Karnali Province), with national positivity rate averaging 49.4%.
- Overall, the sex-distribution remains skewed towards males, who constitute 63% (253,988/403,794) of the confirmed cases. Amongst the males, 81% (205,224/253,988) are in the economically productive age group (15-54 years).
- A total of 90 samples have been tested for influenza at National Influenza Center (NIC), NPHL on EPID-week 18 (3 - 9 May 2021). None of the samples tested positive for influenza. From 4 January until 9 May 2021, a total of 720 samples have tested for influenza and SARS-CoV-2. Only 6 Samples have tested positive for SARS-CoV-2.¹

¹ These positive cases are included in the COVID-19 database

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 9 May 2021; # Global Weekly Epidemiological Update 39) and cumulative incidence rate (per 100,000)

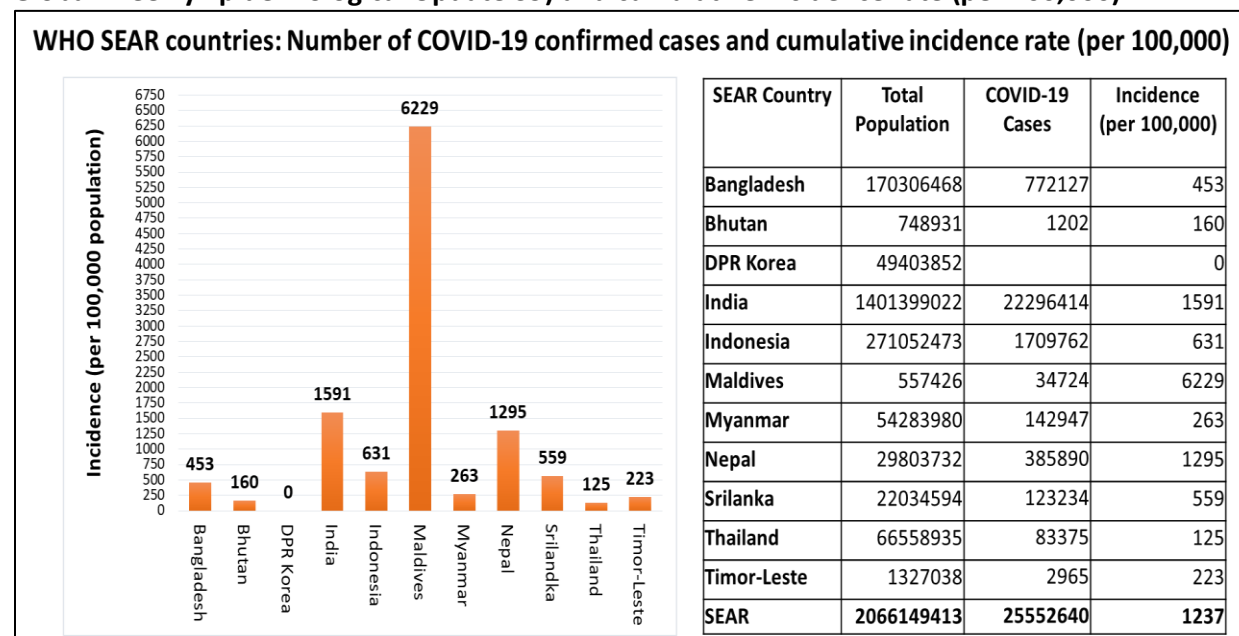
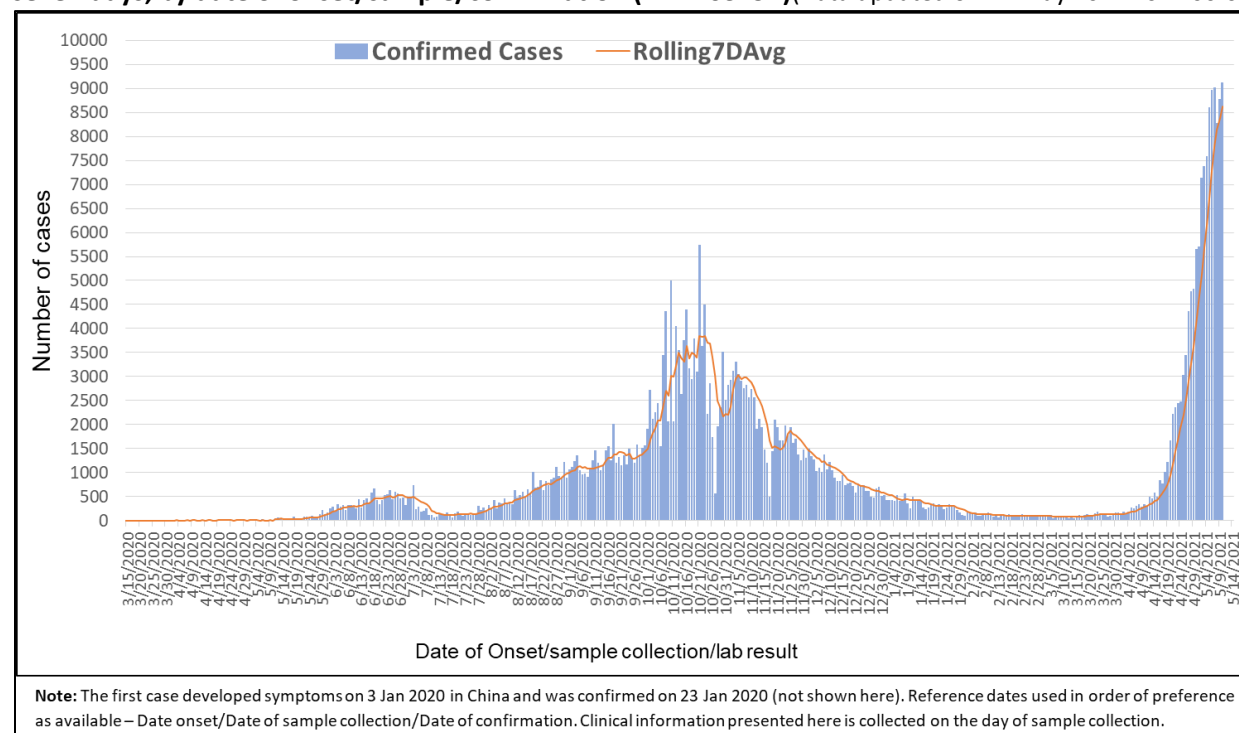
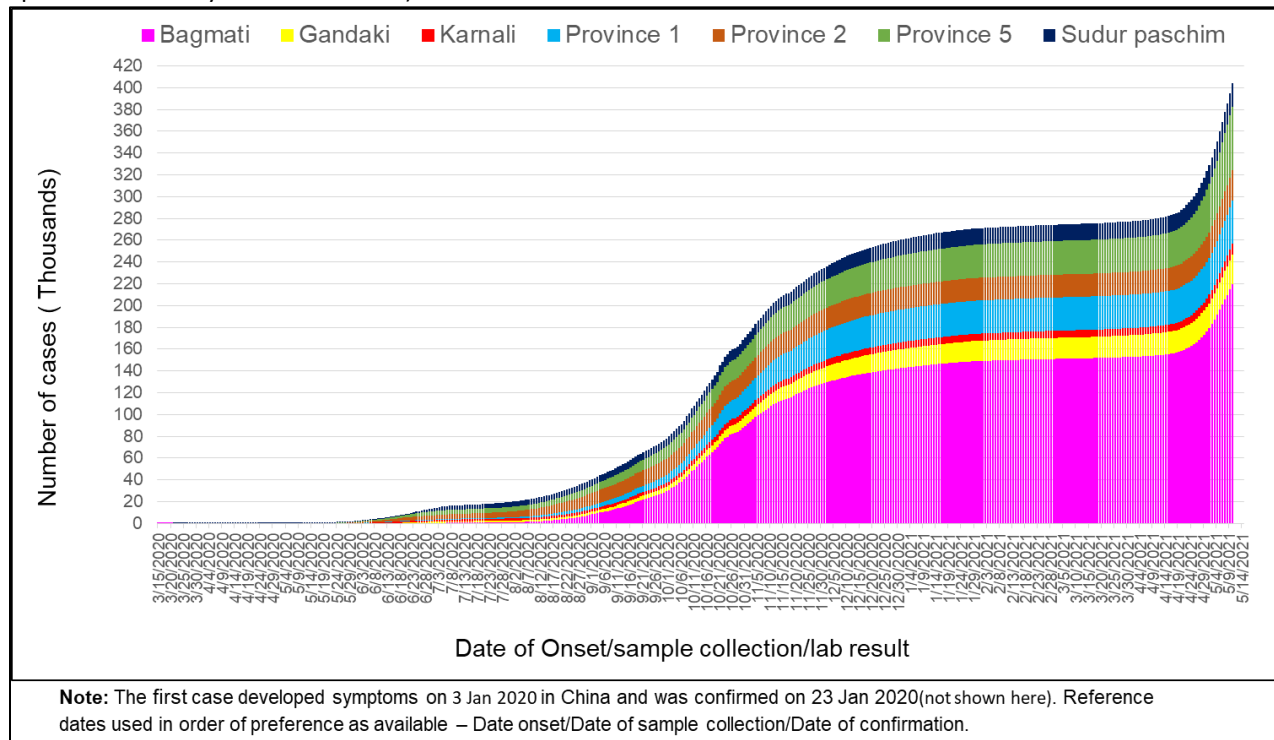


Figure 2A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 403794)(Data updated on 11 May 2021 TO 7:00:00)



At a national level, the second wave of cases between July 2020 and February 2021 was followed by the third wave from the middle of March 2021. The total PCR tests done in Nepal on 10 May 2021 was 18411 which is around 8% less than the number tested during the peak at the end of October 2020.

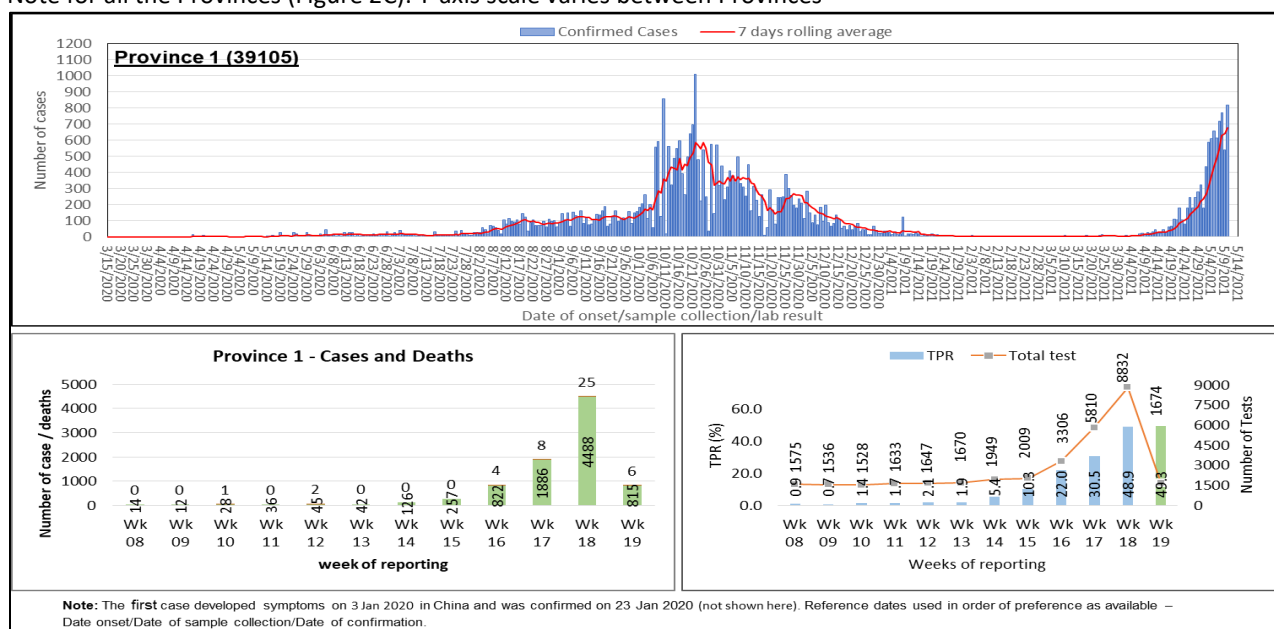
Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 403794)(Data updated on 11 May 2021 TO 7:00:00)



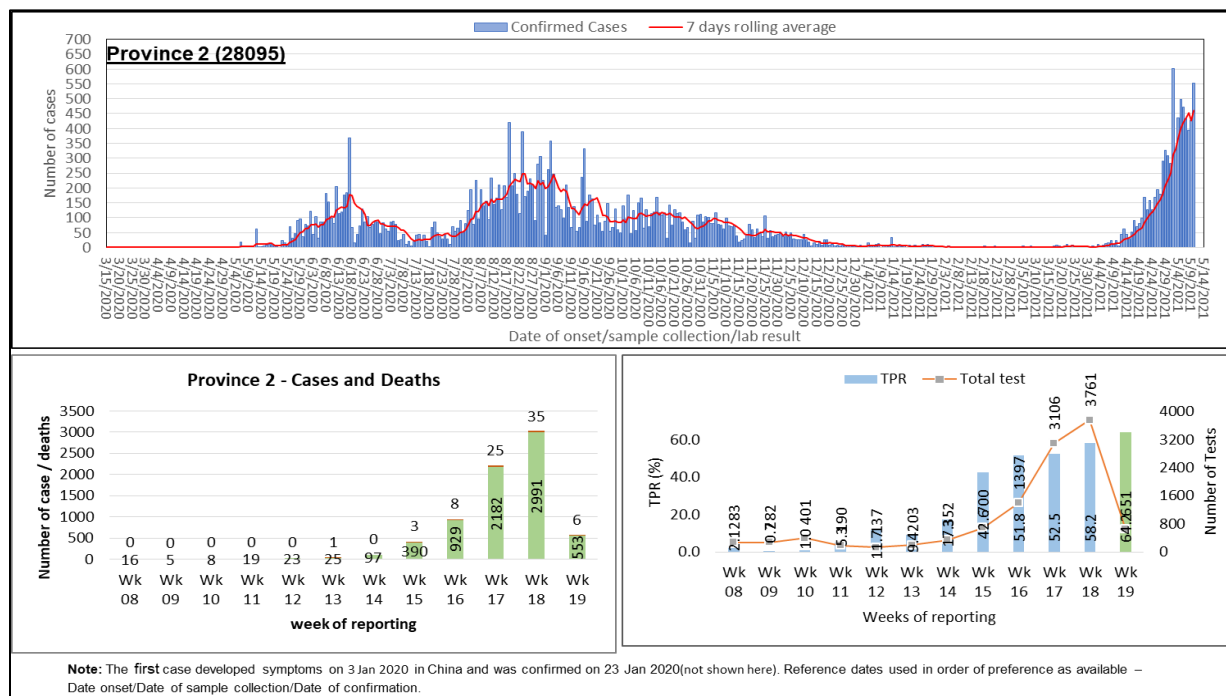
The cumulative case incidence has been increasing in Nepal since the first case was confirmed in 23 January 2020. Cases have largely been reported from Bagmati Province followed by Lumbini Province and Province 1.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 403794)(Data updated on 11 May 2021 TO 7:00:00)

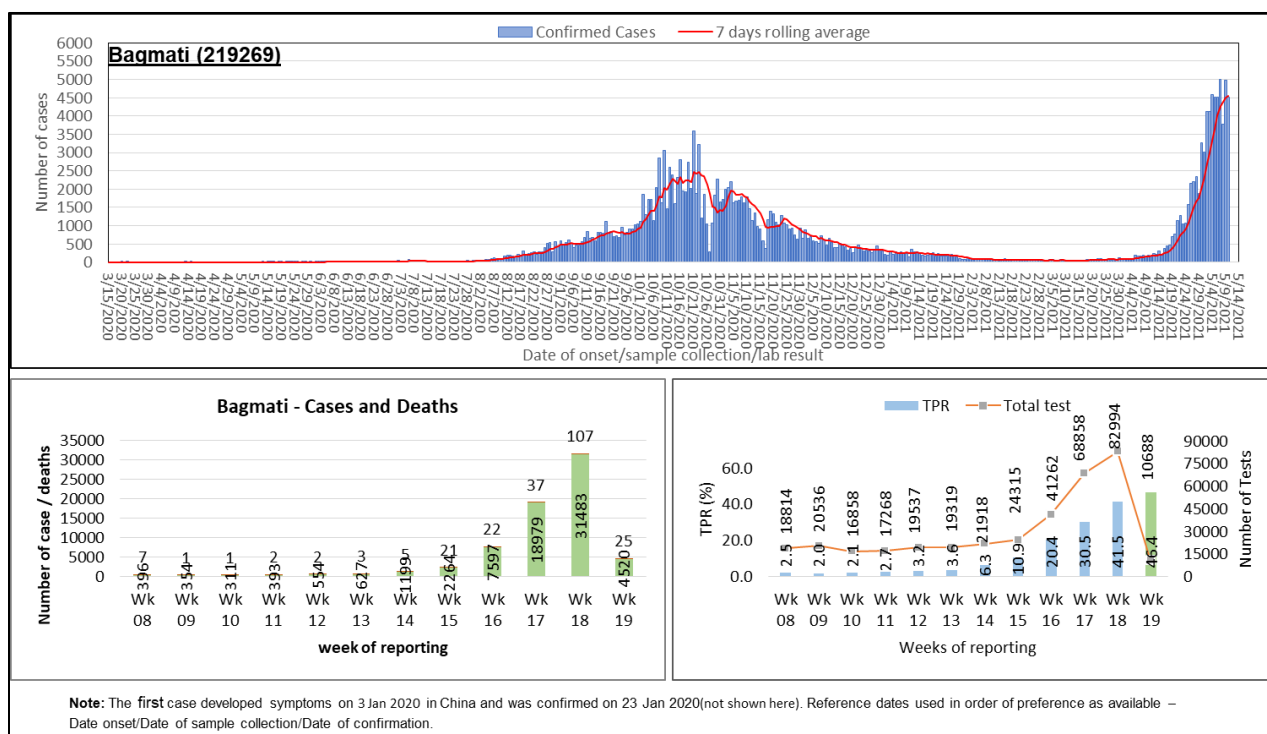
Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces



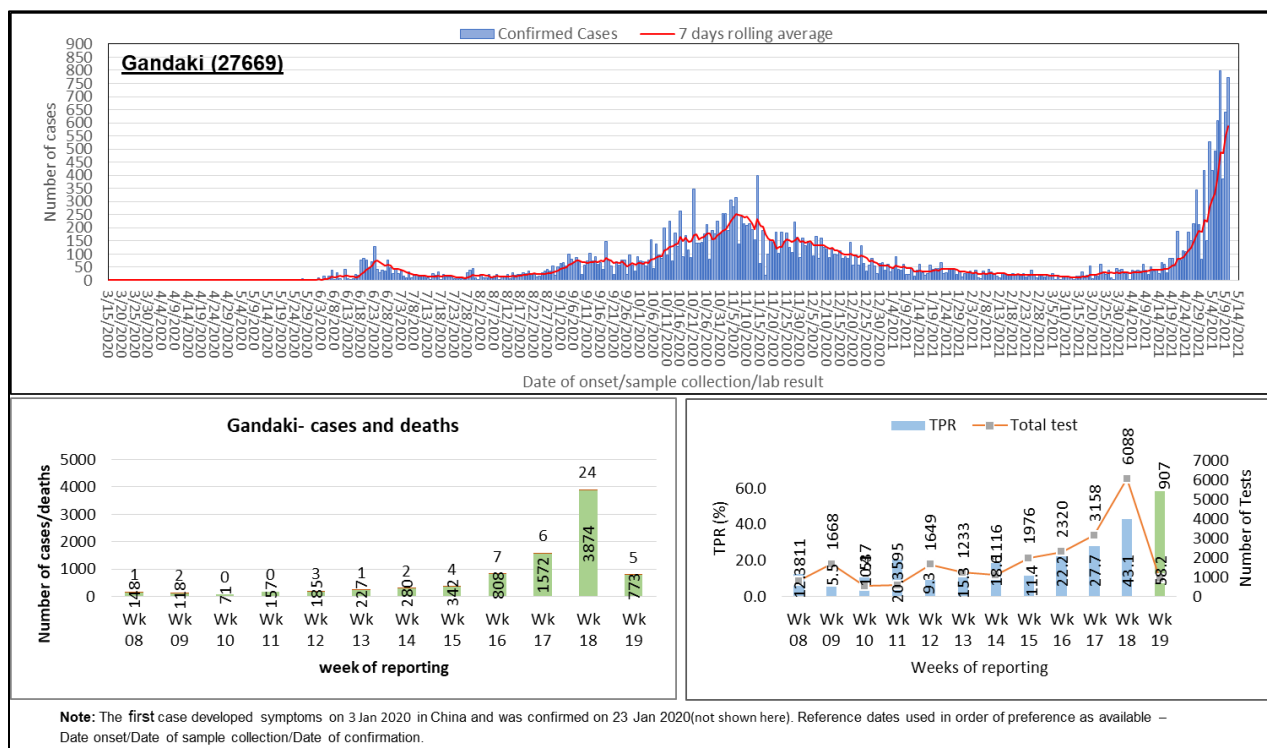
There were 4488 new cases reported in the past week in Province 1. Since week 10, new cases are continuously increasing. The cases have increased by 138% in the past week compared to the previous week. There were 25 deaths reported in the past week, 213% more than that of the previous week. The test positivity rate in Province 1 increased to 48.9% in the past week. A total of 8832 tests were performed in the past week which is 52% more than that of the previous week.



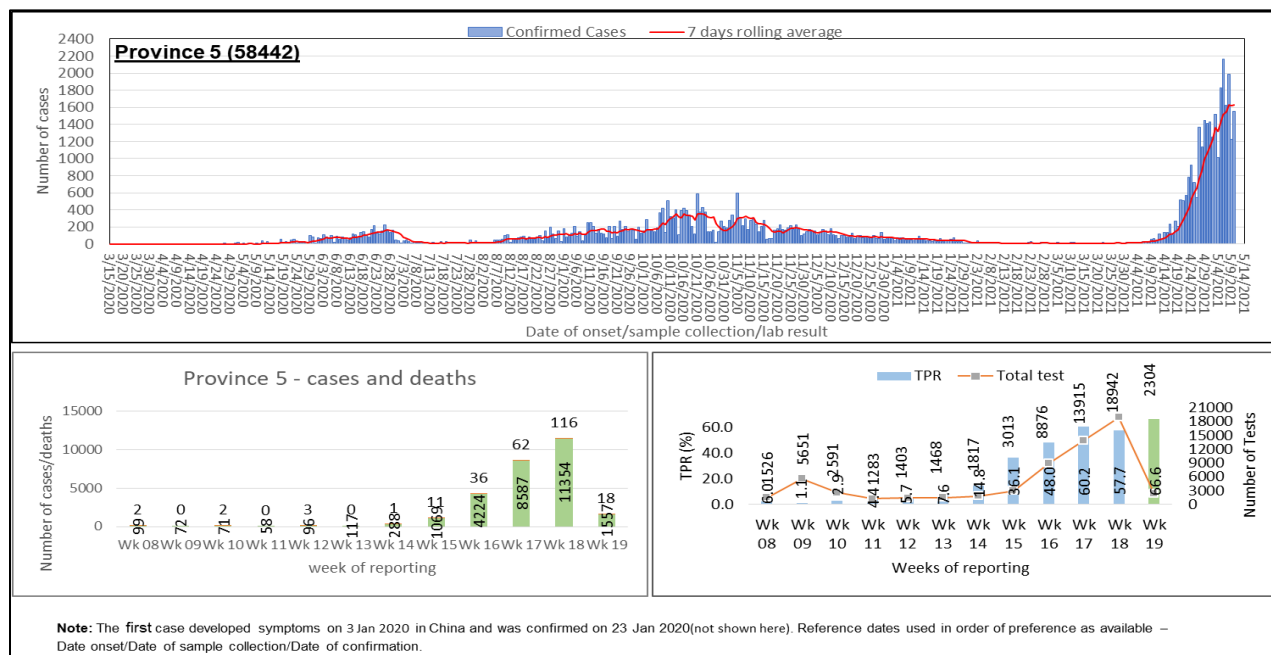
There were 2991 new cases reported in the past week in Province 2. Since week 11, new cases are steadily increasing. The cases have increased by 37% in the past week compared to the previous week. There were 35 deaths reported in the past week, 40% more than that of the previous week. The test positivity rate in Province 2 increased to 58.2% in the past week. A total of 3761 tests were performed in the past week, 21% more than that of the previous week.



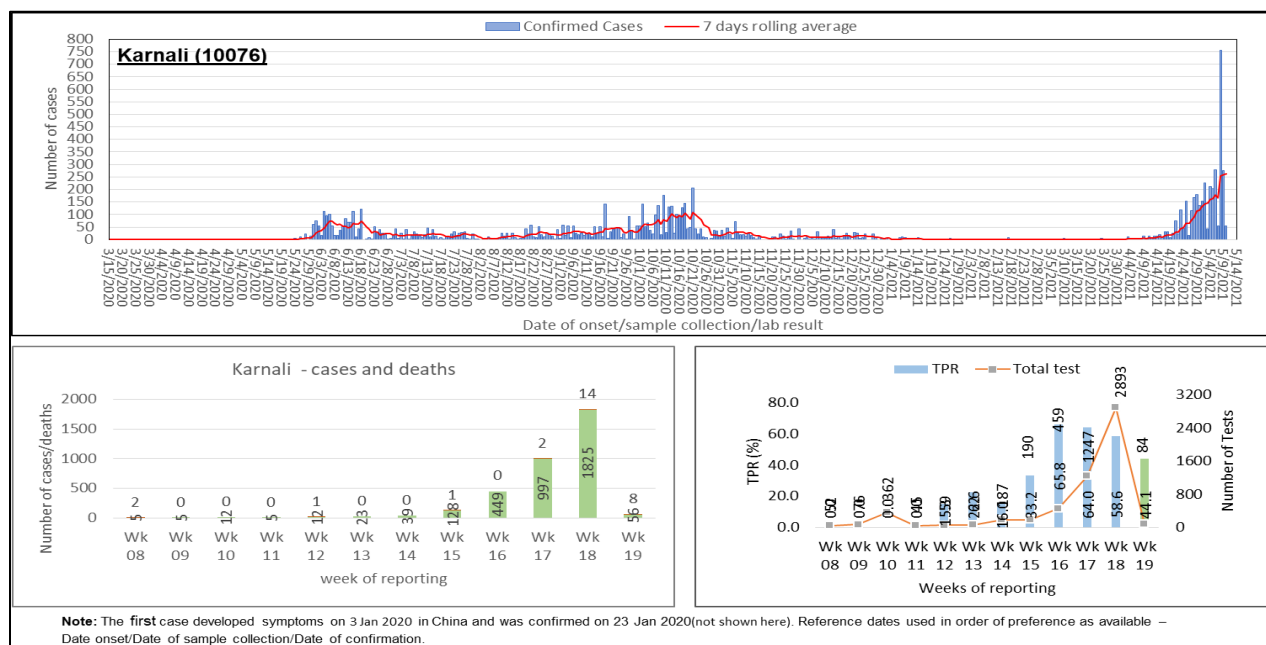
In Bagmati, 31483 new cases were reported in the past week. Since week 11, new cases are continuously increasing. The cases have increased by 66% in the past week compared to the previous week. There were 107 deaths reported in the past week, 189% more than that of the previous week. The test positivity rate in Bagmati increased to 41.5% in the past week. A total of 82994 tests were performed in the past week, 21% more than that of the previous week.



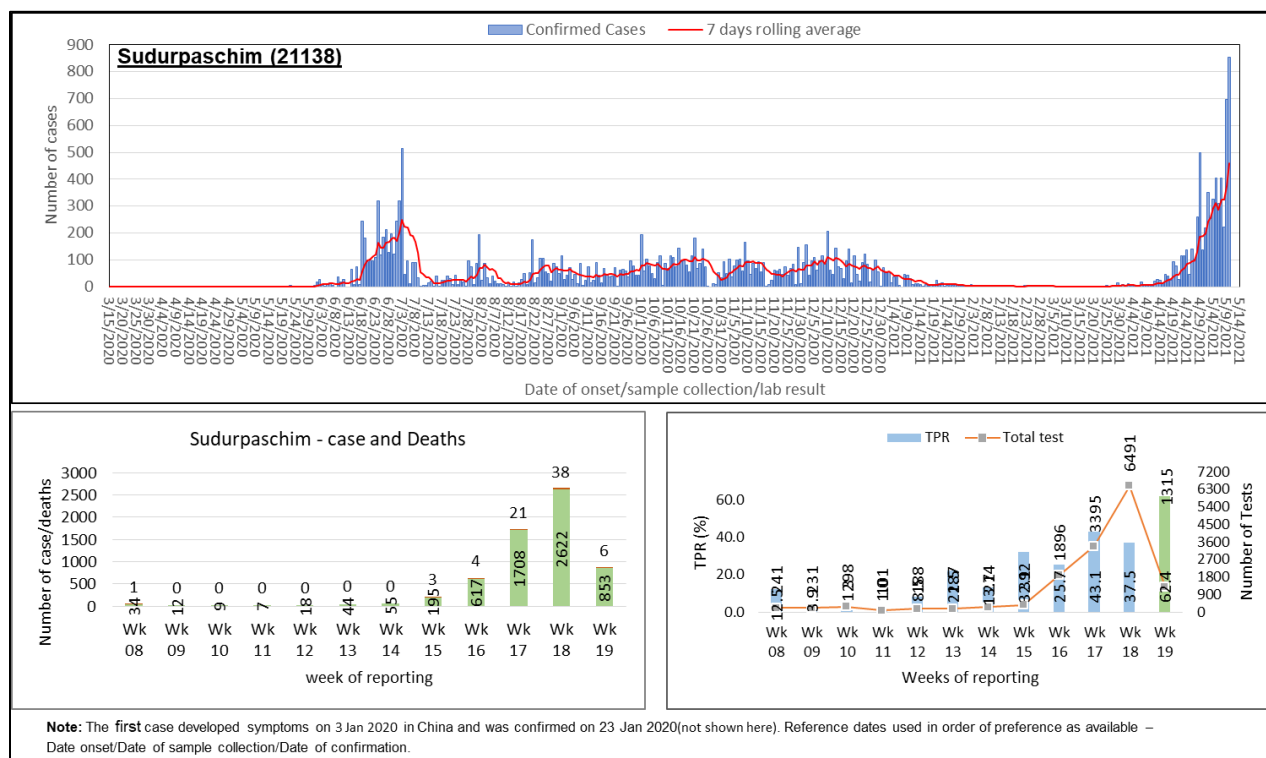
In Gandaki, 3874 new cases were reported in the past week. Since week 11, new cases are continuously increasing. The cases have increased by 146% in the past week compared to the previous week. There were 24 deaths reported in the past week, 300% more than that of the previous week. The test positivity rate in Gandaki increased to 43.1% in the past week. A total of 6088 tests were performed in the past week, 93% more than that of the previous week.



Lumbini reported 11354 new cases in the past week. Since week 12, new cases are considerably increasing. The cases have increased by 32% in the past week compared to the previous week. There were 116 deaths reported in the past week, 87% more than that of the previous week. The test positivity rate in Lumbini decreased to 57.7% in the past week. A total of 18942 tests were performed in the past week, 36% more than that of the previous week.

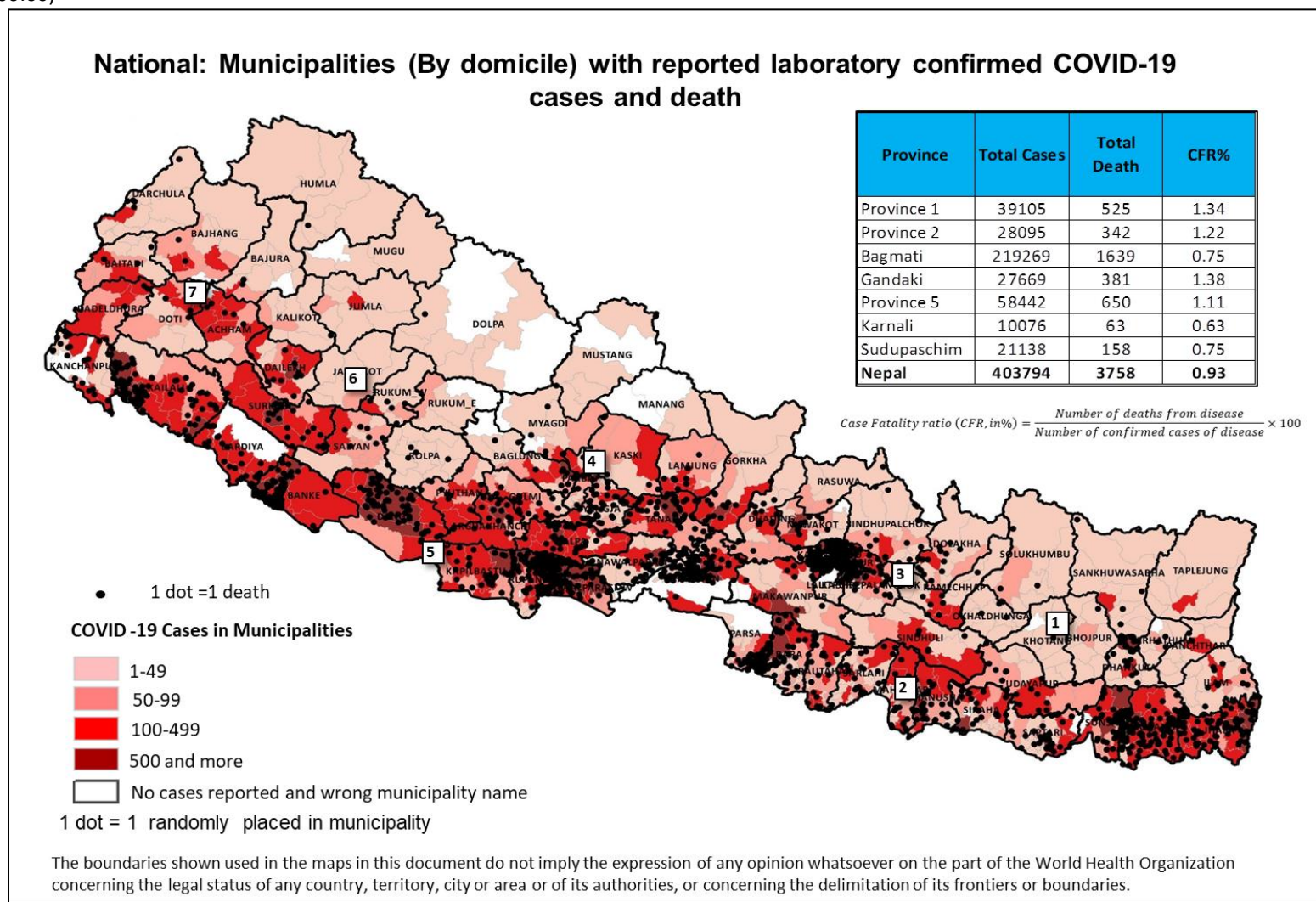


In Karnali, 1825 new cases were reported in the past week. Since week 12, new cases are continuously increasing. The cases have increased by 83% in the past week compared to the previous week. There were 14 deaths reported in the past week, 600% more than that of the previous week. The test positivity rate in Karnali decreased to 58.6% in the past week. A total of 2893 tests were performed in the past week, 13% more than that of the previous week.



In Sudurpaschim, 2622 new cases were reported in the past week. Since week 12, new cases are continuously increasing. The cases have increased by 54% in the past week compared to the previous week. There were 38 deaths reported in the past week, 81% more than that of the previous week. The test positivity rate in Sudurpaschim decreased to 37.5% in the past week. A total of 6491 tests were performed in the past week, 91% more than that of the previous week.

Figure 3: National -Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 403794)(Data updated on 11 May 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 of Nepal is 1.0%. However, the CFR is relatively high in Province 1 with 1.3% and Gandaki Province with 1.4%.

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

(N = 403794)(Data updated on 11 May 2021 TO 7:00:00)

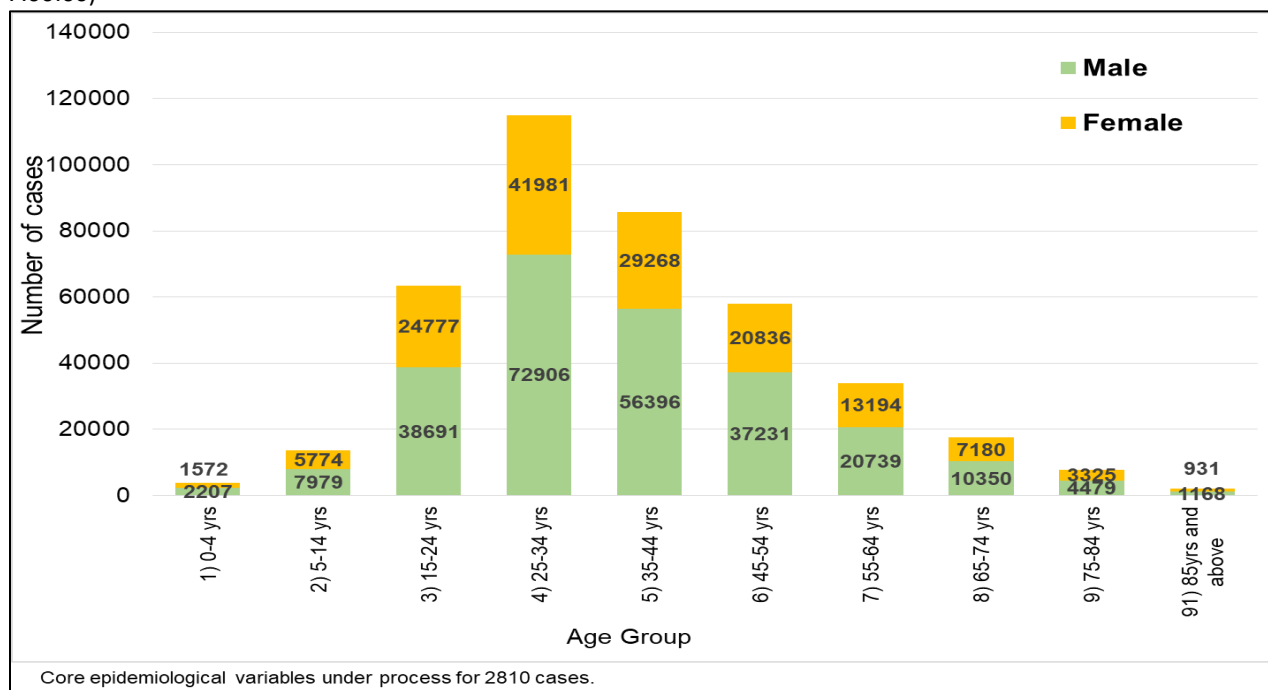
Reporting Province	Total confirmed cumulative cases	% of the total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Total confirmed cases in last 14 days	Total deaths in last 14 days
Province 1	39105	9.7	525	Community transmission	6945	39
Province 2	28095	7.0	342	Community transmission	5533	65
Bagmati	219269	54.3	1639	Community transmission	52829	162
Gandaki	27669	6.9	381	Community transmission	6068	36
Province 5	58442	14.5	650	Community transmission	20954	192
Karnali	10076	2.5	63	Community transmission	2861	24
Sudurpashchim	21138	5.2	158	Community transmission	5043	64
National Total	403794	100	3758	Community transmission	100233	582

- 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 = 400984)(Data updated on 11 May 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 = 403794)(Data updated on 11 May 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	3779	8	10	6	0.48
5-14 yrs	13753	6	4	6	0.07
15-24 yrs	63468	31	36	35	0.11
25-34 yrs	114887	111	59	55	0.15
35-44 yrs	85664	239	113	117	0.41
45-54 yrs	58067	404	167	241	0.98
55-64 yrs	33933	532	198	364	2.15
65-74 yrs	17530	624	289	488	5.21
75-84 yrs	7804	448	221	385	8.57
85+ yrs	2099	174	76	137	11.91
Unknown	2810	5	3	6	0.28
National	403794	2582	1176	1840	0.93

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 3,362 deaths have been reported. Out of the total deaths, 2,324 (69.1%) were males and 1038 (30.9%) were females. Amongst the deaths, 1,720 persons (51.2%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1%, the CFR progressively increases with age beyond 65 years of age, ranging from 5.8% to 13.2%.

PREPAREDNESS AND RESPONSE

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

- Ministry of Health and Population has issued standards to determine oxygen need and use for COVID-19 patients. This standard will guide estimated oxygen requirements by hospitals based on moderate, severe, and critical cases. Link [Here](#)
- Government of Nepal has decided to operate Bir Hospital's new surgical ward as a COVID-19 hospital. The plan is to expand 500 beds in the hospital. The decision for management of the COVID-19 is to be done by the central team.

What is the WHO Country Office for Nepal doing?

Laboratory Capacity

- WHO Nepal has been providing support to National Public Health Laboratory (NPHL) in monitoring the quality standards of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 3 designated COVID-19 laboratories participated in the NQAP this week. The result of the participating laboratories was satisfactory $\geq 90\%$.
- WHO Nepal has also been providing technical support to NPHL in the following activities:
 - Validation of new lot of Nanjing extraction kit with the result of 100% sensitivity and 100% specificity.
 - Sample preparation, extraction and packaging for shipment of samples for gene sequencing to be sent to India.
- WHO Nepal Consultant along with the director of NPHL visited HAMS hospital, Dhumbarahi for monitoring of the molecular lab and providing onsite feedback.

Technical Planning and Operations

- WHO Nepal supported MoHP in conducting advocacy campaigns in all 7 Provinces within the country, from 25 April – 9 May 2021. During this past 2 weeks of advocacy campaigns, multiple meetings with various stakeholders and authorities were held and technical support was provided for the following activities:
 - COVID-19 preparedness,
 - COVID-19 case management and establishment of referral mechanism,
 - Oxygen management,
 - Ambulance management,
 - Establishment of isolation centers with monitoring teams,
 - Health desk and Holding centers at PoE,

- Establishment of call center,
- Laboratory testing facilities and CICT.

Point of Entry

- WHO Nepal has handed over 45 units of reflector jackets for health staff deployed at the Point of Entry (POE) at the Tribhuvan International Airport (TIA), Kathmandu.
- The Civil Aviation Authority of Nepal (CAAN) has extended the suspension of international flights until midnight on 31 May (Link [Here](#)). Two flights per week will be permitted between Nepal and India under the Air Travel Bubble Arrangement effective until on 31 May, subject to certain conditions. CAAN also announced that all domestic flights will be suspended until midnight on 31 May.
- On 26 April, the Government of Nepal announced a lockdown of Kathmandu as a public health measure to help slow the spread of COVID-19. All lock down restrictions went into effect at 0600 hours on 29 April and have been extended until midnight 27 May 2021.

Risk Communication and Community Engagement

- Science in 5 videos translated, dubbed, and published (4 - 10 May 2021):

Episodes	Titles	Language	Links
36	Safe care at home? कोभिड-१९ को घरमा सुरक्षित स्याहार	Maithili	Link
36	Safe care at home? कोभिड - १९ के घरमे सुरक्षित स्याहार	Nepali	Link

- The interview between WHO Representative to Nepal, Dr. Rajesh Sambhajirao Pandav, and Online Khabar was posted via the following links:
 - Interview in Nepali: [Facebook](#) | [Twitter](#)
 - Interview in English: [Facebook](#) | [Twitter](#)
- Infographics on the following topics were shared via WCO Nepal social media:
 - For health care providers: 5 Steps for Managing patients with COVID-19 at home (English): [Facebook](#)
 - For the public: 5 steps for managing patients with COVID-19 at home (English): [Facebook](#) | [Twitter](#)
 - How to care for COVID-19 patients with mild symptoms at home: information for the (English): [Facebook](#) | [Twitter](#)
 - Precautions to take while visiting the elderly (Nepali): [Facebook](#)
 - Precautions to take during medical appointments (Nepali): [Facebook](#)
 - Precautions to take during shopping (Nepali): [Facebook](#) | [Twitter](#)
 - Myth-busters on hand hygiene (English):
 - Facebook: [Link 1](#) | [Link 2](#) | [Link 3](#) | [Link 4](#) | [Link 5](#) | [Link 6](#) | [Link 7](#)
 - Twitter: [Link 1](#) | [Link 2](#) | [Link 3](#)
 - Alcohol handrub does not cause chronic disease (English): [Twitter](#)
 - Precautionary messages for the youth (English):
 - Facebook: [Link 1](#) | [Link 2](#)
 - Twitter: [Link 1](#) | [Link 2](#)

Field Operation and Logistics

- WHO Nepal handed over 65 KVA generator to the Provincial Hospital, Surkhet as a part of hub hospital capacity enhancement on 5 May 2021.
- WHO Nepal has also prepared and allocated isolation kits for the WHO staff members deployed in the provinces/field.

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 as and when on required basis.
- MOHP re-convened the weekly coordination meeting (every Tuesday) with COVID hospitals and PHDOs from 20 April 2021.
- Health partners are providing their support to government for the continuation of COVID and non-COVID responses throughout the country. The support provided through Ministry of Health and Population (MOHP) especially with 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 the 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 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](#)

Situation Update #56 – Corona virus Disease 2019 (COVID-19)
WHO Country Office for Nepal
Sunday 16 May 2021

- [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](#)

CONTACT DETAILS

WHO Representative

Dr. Rajesh Sambhajirao Pandav
WHO Representative to the
Government of Nepal
Email: pandavr@who.int

Health Cluster Co-lead

Saira Khan
Pillar Lead – Partner Coordination
WHO Country Office for Nepal
COVID-19 Response IMS
Email: khansai@who.int

WHO Incident Manager

Dr Reuben Samuel
Senior Health Emergency Officer,
WHO Health Emergencies Program
(WHE)
WHO, SEARO
Email: samuelt@who.int

Communication/Media Focal Point

Tsering Dolkar Gurung
Media, Communication and Public
Information Officer
WHO Country Office for Nepal
Email: gurungt@who.int