

Situation Update #9 - Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

24th June 2020

HIGHLIGHTS

Nepal

- The Ministry of Health and Population (MoHP) has announced the occurrence of 10,096 confirmed cases and 24 deaths from COVID-19 as of 23rd June 2020.
- The MoHP released the [interim guidance on Environmental Cleaning and Disinfection in the context of COVID-19](#) aiming to reduce transmission of COVID-19 from infected person to non-infected person via regularly used convenience materials.

Regional/Global

- The World Health Organization (WHO) Headquarters (HQ) has welcomed the [initial clinical trial results from the United Kingdom which showed dexamethasone can be lifesaving for patients who are critically ill with COVID-19](#). According to preliminary findings shared with WHO, for patients on ventilators, the treatment was shown to reduce mortality by about one third, and for patients who only require oxygen, mortality was cut by about one fifth.
- Based on evidence from the Solidarity Trial, the UK's Recovery trial and a Cochrane review of other evidence on hydroxychloroquine which showed that hydroxychloroquine does not result in the reduction of mortality of hospitalized COVID-19 patients, when compared with standard of care, the hydroxychloroquine arm of the Solidarity Trial, has been stopped.
- WHO-HQ has published an updated guidance on [criteria for releasing COVID-19 patients from isolation](#), which reflect recent findings that patients whose symptoms have resolved may still test positive for the COVID-19 virus for many weeks. Despite this positive test result, these patients are not likely to be infectious and therefore are unlikely to be able to transmit the virus to another person.

SITUATION OVERVIEW

(reported up to 24th June 2020)

NEPAL

10,096 confirmed cases

24 deaths

2,338 recovered

1,93,194 RT-PCR tests

SOUTH-EAST ASIA REGION

6,20,115 confirmed cases

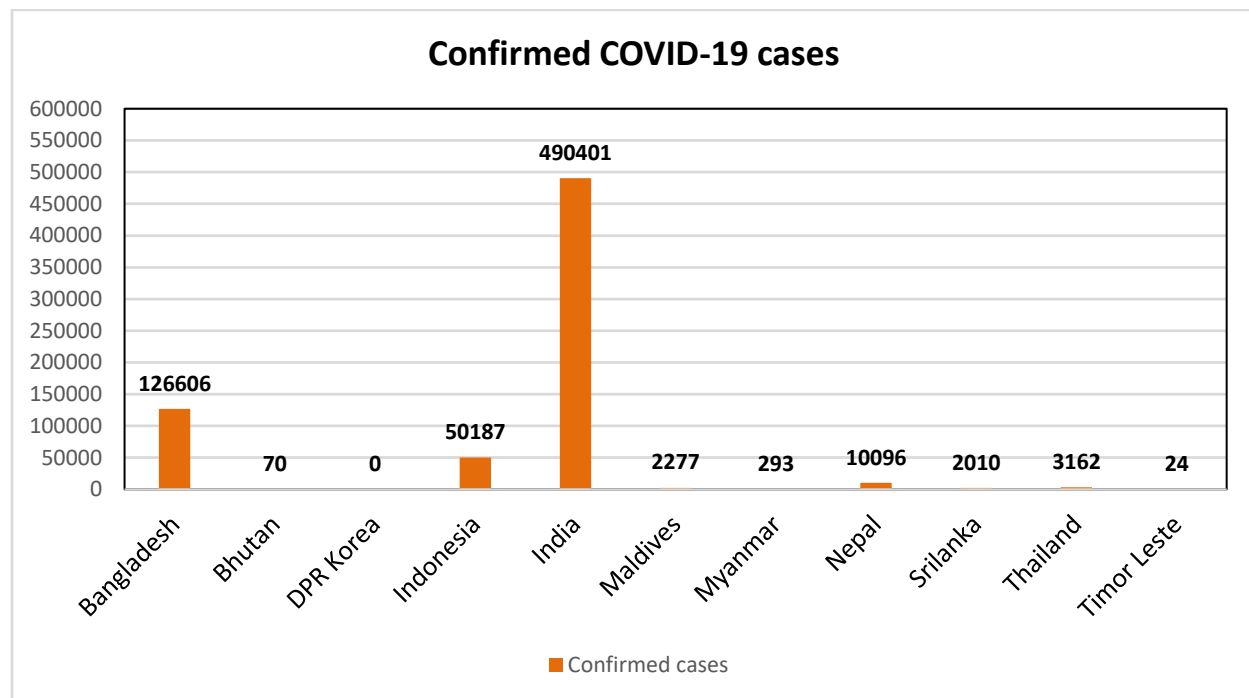
18,119 deaths

GLOBAL

8,993,659 confirmed cases

469,587 deaths

Figure 1: Confirmed COVID-19 cases in South East Asia Region (data as of 24/06/2020)



NEPAL EPIDEMIOLOGICAL SITUATION

In Nepal, 10,096 people have tested positive by RT-PCR for COVID-19 which is 5.2 % of those tested and only 0.4 % of these cases have been symptomatic at the time of diagnosis across all age groups. However, the proportion of symptomatic persons increases sharply from age ≥ 60 year age population ranging from 2% to 4% depending on the age group. 24 deaths related to COVID-19 have occurred. Although overall case fatality ratio (CFR) across all ages is 0.24%, the CFR is highest in the ≥ 60 - year age population ranging from 3% - 7%. 76 of 77 districts have been affected by COVID-19. The majority of cases (84%) were reported from Province 2, Province 5, Karnali Province and Sudurpaschhim Province. Sudurpaschim province has witnessed a 3-fold increase in the number of COVID-19 cases over the last week. Most of the cases continue to be young males which reflects the high level of testing among recently arrived migrant workers from India. The number of ground crossings returnees has substantially come down, however now flights bring between 1500 and 2500 Nepali migrant workers back each day from Gulf countries and other countries. The returning migrant workers and their accompanying family members have been placed at quarantine centers and those testing positive have been isolated in border municipalities and districts thus effectively reducing further geographic transmission. There are indications of some limited secondary community transmission, but it is not widespread. Suboptimal infection control protocols in some overcrowded quarantine centers remain a matter of concern. There is also a large backlog of untested samples taken from people who have returned from India due to under capacity of PCR testing.

Figure 2A: Epidemic curve of laboratory confirmed COVID-19, by date of onset/sample collection/confirmation (N= 10096) (Data updated till 23rd June 2020)

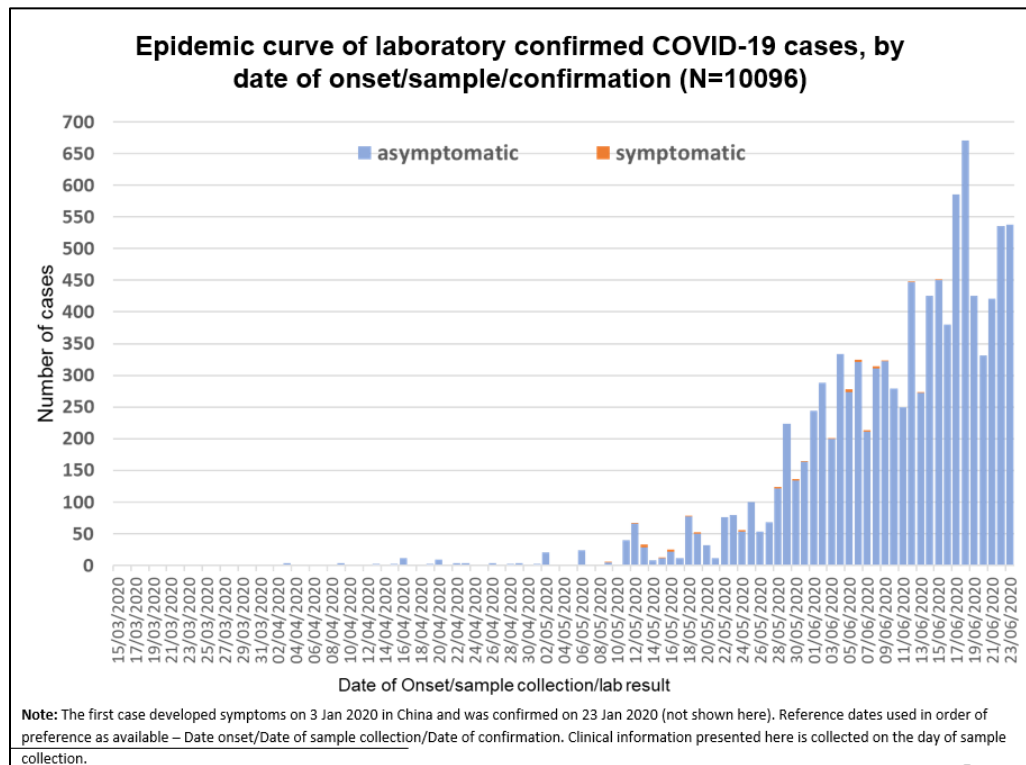


Figure 2B: Cumulative case count of laboratory confirmed COVID-19 by province (Data updated till 23rd June 2020)

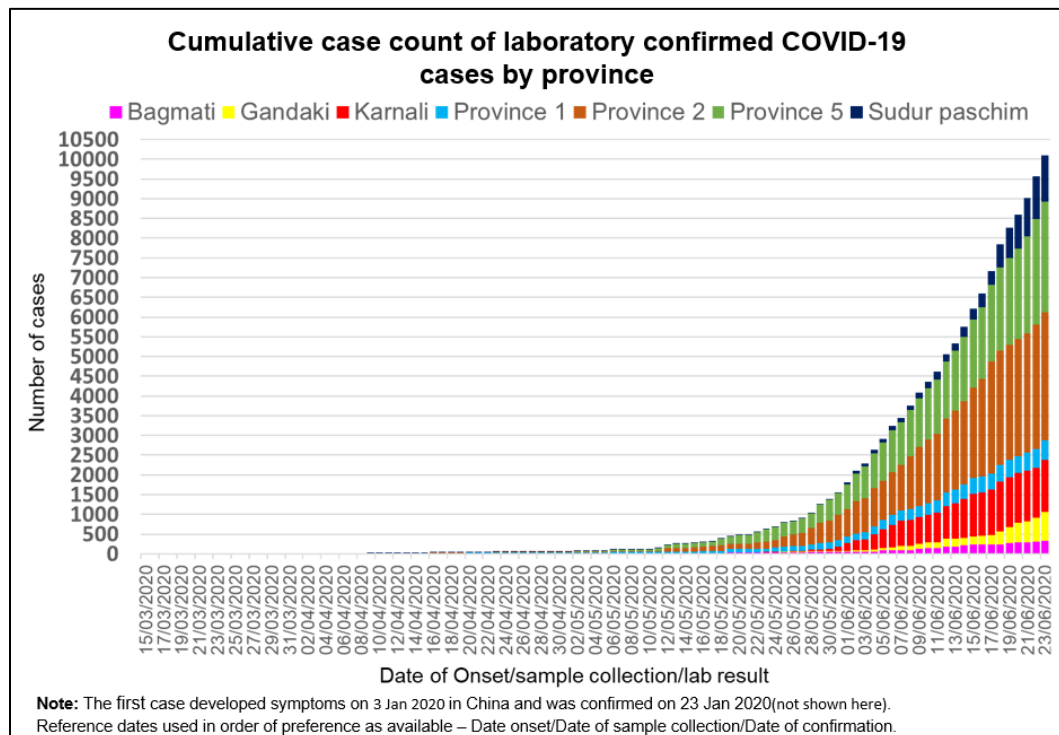


Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces.

(Data updated till 23/06/2020)

Reporting Province	Total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Districts affected (total districts)	Date of most recent case [#]
Province 1	487	0	Cluster of cases	14 (14)	23 June 2020
Province 2	3251	3	Cluster of cases	8 (8)	23 June 2020
Bagmati	322	4	Sporadic cases	12 (13)	23 June 2020
Gandaki	731	1	Sporadic cases	11 (11)	23 June 2020
Province 5	2803	8	Cluster of cases	12 (12)	23 June 2020
Karnali	1327	4	Cluster of cases	10 (10)	23 June 2020
Sudurpaschhim	1175	4	Cluster of cases	9 (9)	23 June 2020
National Total	10096	24		76 (77)	23 June 2020

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

* Case classification is based on [WHO transmission classification](#)

No cases- provinces with no cases

Sporadic cases- provinces with one or more cases, imported or locally detected[#]

Cluster of cases- provinces experiencing cases, clustered in time, geographic location and/or by common exposures

Community transmission- experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:

- Large numbers of cases not linkable to transmission chains
- Large numbers of cases from sentinel lab surveillance
- Multiple unrelated clusters in several areas of the country/territory/area

Figure 3: Municipalities (by domicile) with reported laboratory confirmed COVID-19 cases

(Data updated till 23rd June 2020)

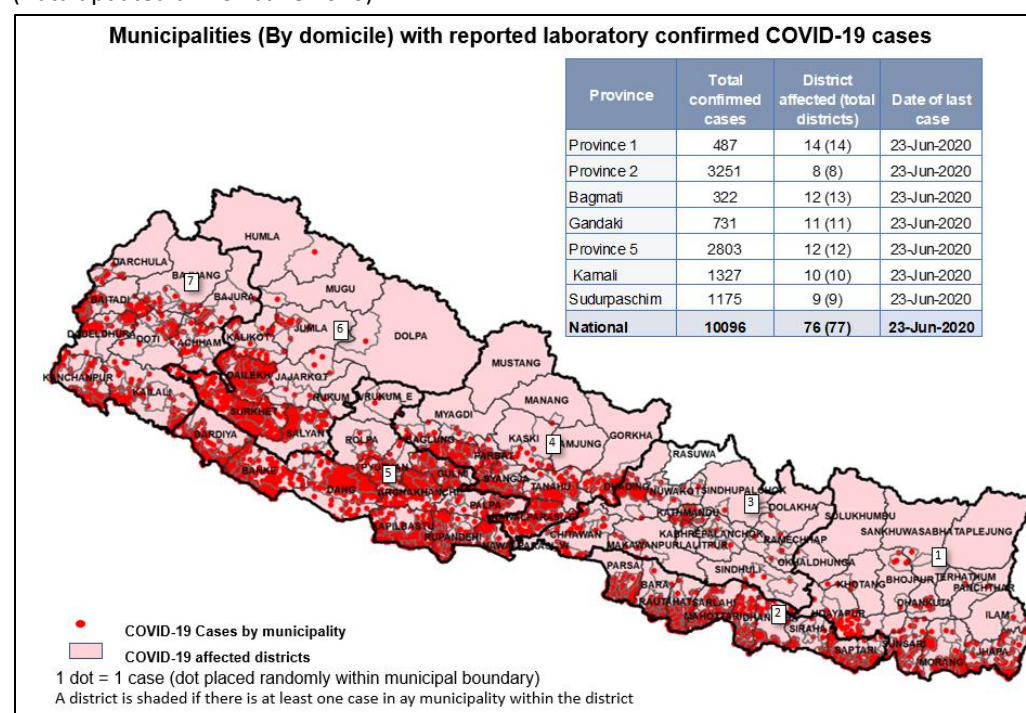


Figure 4: Distribution of COVID-19 cases by age and sex (N=10065) (Data updated till 23rd June 2020)

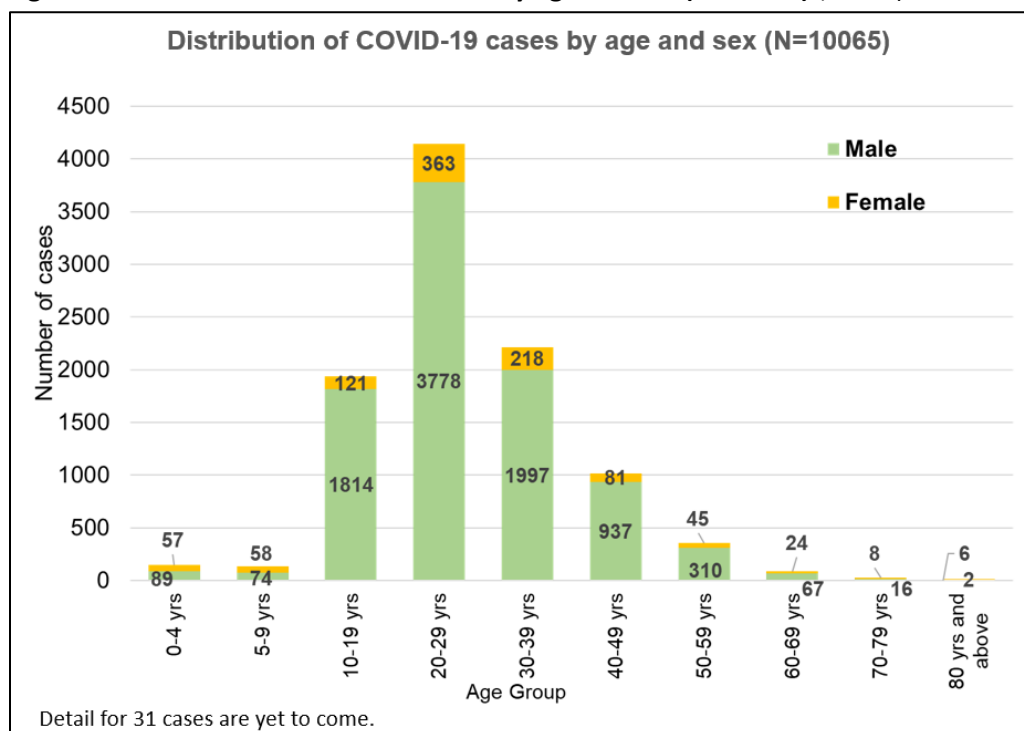


Figure 5: Outcome status of COVID-19 cases in Nepal (data updated till 23rd June 2020)

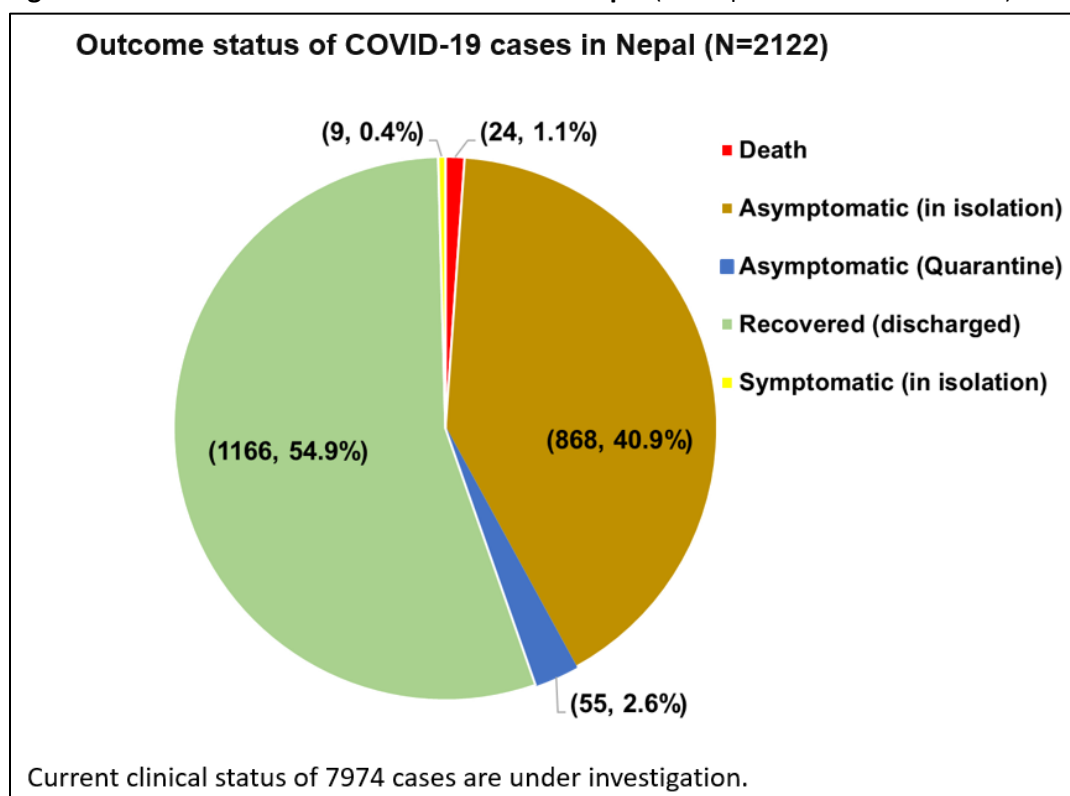


Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases. (N=10096) (data updated till 23rd June 2020)

Age-specific case fatality ratio and comorbidity of deaths* in COVID-19 confirmed cases (N=10096)

Age Group	Total confirmed cases	Death (male)	Death (female)	Deaths with any known comorbid condition	Age specific case fatality ratio (%)
0-4 yrs	146	0	1	0	0.68
5-9 yrs	132	1	0	0	0.76
10-19 yrs	1935	1	0	1	0.05
20-29 yrs	4141	2	1	1	0.07
30-39 yrs	2215	3	0	1	0.14
40-49 yrs	1018	4	2	3	0.59
50-59 yrs	355	4	0	3	1.13
60-69 yrs	91	3	0	3	3.3
70-79 yrs	24	2	0	2	8.33
80+ yrs	8	0	0	0	0
Unknown	31	0	0	0	0
Grand Total	10096	20	4	14	0.24

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

* Source: <https://covid19.mohp.gov.np/#/>

Table 3: Distribution symptomatic/asymptomatic COVID-19 cases at presentation (N=10,096) (data updated till 23rd June 2020)

Distribution symptomatic/asymptomatic COVID-19 cases at presentation (N=10096)

Age Group	Total confirmed cases	Asymptomatic	Symptomatic (n)	Symptomatic (%)
0-4 yrs	146	145	1	0.7
5-9 yrs	132	131	1	0.8
10-19 yrs	1935	1930	5	0.3
20-29 yrs	4141	4127	14	0.3
30-39 yrs	2215	2203	12	0.5
40-49 yrs	1018	1015	3	0.3
50-59 yrs	355	352	3	0.8
60-69 yrs	91	89	2	2.2
70-79 yrs	24	23	1	4.2
80+ yrs	8	8	0	0.0
Unknown	31	31	0	0.0
Grand Total	10096	10054	42	0.4

PREPAREDNESS AND RESPONSE

What are Government of Nepal (GoN) and MoHP doing?

- MoHP is fully engaged in assisting the provincial and local governments in case investigation and contact tracing, monitoring and management of quarantine, isolation and treatment sites.
- MoHP is also engaged in developing, endorsing and disseminating country contextualized technical guidelines, Standard Operating Protocols, Training and Information material in all other critical aspects of the response to COVID-19.
- MoHP has released a [guideline regarding allowing private laboratories to perform molecular testing \(PCR\) for COVID-19](#) and [interim guidance for the operation of nutrition rehabilitation in the context of COVID-19](#) this week.

What is WHO Country Office for Nepal doing?

- Since the start of the COVID-19 response in March, WHO staff have been embedded in most MOHP units, centers and teams to provide hands- on support on a daily basis. This support is ongoing.
- As the number of cases continue to increase, the Health Cluster conducts health cluster meetings twice every week, one meeting discusses with the provincial teams issues and challenges faced at the provincial level. The second meeting brings together all health partners to enhance partners' coordination for coherent support towards the COVID-19 response. Senior government officials chair these meetings while WHO, co-chairs them.
- An updated training package for case investigation and contact tracing will be rolled out this week though virtual training across the country. WHO had earlier supported EDCC and National Health Training Centre, in collaboration with Dhulikhel Hospital to develop this package, that is suited to a Nepali context.
- WHO Nepal field teams from three programmes - Emergencies, Immunization Preventable Diseases and Health Systems have been mobilized since the start of the crisis to support COVID-19 as well as continuing routine services in their existing areas of support.
- WHO is providing ongoing support on a daily basis to EDCC in epidemiological analysis of COVID-19 cases and contacts and data management and entry in the Go.Data
- WHO is providing ongoing support to Epidemiology and Disease Control Division and National Health Education, Information and Communication Center to capture the Frequently Asked Questions (FAQ) through the COVID-19 call center and address the queries on contact tracing, quarantine and isolation. Support for lab investigation and data management is also being provided to the National Public Health Laboratory.
- WHO is working with:
 - the EDCC to develop a protocol to conduct a nation-wide sero-survey for COVID-19;
 - the Incident Command System of the MoHP to streamline the information management and decision-support system for response operations in collaboration with KfW and other development partners;
 - the Nepal Health Research Council to implement the WHO Solidarity trail in Nepal;
 - the National Health Education, Information and Communication Center (NHEICC) to develop the guidance documents on Food Safety and on the Use of Masks in the COVID-19 context.

What are partners doing?

- All partners in health continue to support COVID-19 response in Nepal and the government appreciated all the support provided by the partners using the one door mechanism.
- WHO, as the co-lead of the health cluster is coordinating with health partners and aligning partners' support towards key ASKs from the MoHP.
- This week, GIZ presented their detail support for COVID-19 response.
- GIZ in collaboration with WHO enhanced the real-time surveillance through EWARS for COVID-19 and new daily reporting module was developed including enhanced case Investigation and Contact Tracing for COVID-19 through customized WHO standard tool using go.data.
- GIZ provided RT-PCR tests and PPEs and supported health care waste management in 13 hub hospitals.
- The reproductive cluster rolled out the interim RMNCAH guidelines and around 40 facilitators were orientated at the federal level. The provincial and local level orientations are on-going. Cause of maternal death investigation is on-going, information received from 34 sites and a small task team is preparing for its analysis and recommendation. Based on the monitoring of the life-saving MNH and FP commodities report, the RH cluster partners are supporting procurement, transportation of some commodities such as misoprostol and Emergency RH kits.

WHO's STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE

The overarching goal is to control the pandemic by slowing down the transmission and reducing mortality associated with COVID-19. The global strategic objectives are as follows:

- **Mobilize** all sectors and communities to ensure that every sector of government and society takes ownership of and participates in the response and in preventing cases through hand hygiene, respiratory etiquette and individual-level physical distancing.
- **Control** sporadic cases & clusters and prevent community transmission by rapidly finding and isolating all cases, providing them with appropriate care, and tracing, quarantining, and supporting all contacts.
- **Suppress** community transmission through context-appropriate infection prevention and control measures, population level physical distancing measures, and appropriate and proportionate restrictions on non-essential domestic and international travel.
- **Reduce** mortality by providing appropriate clinical care for those affected by COVID-19, ensuring continuity of essential health & social services; protecting frontline workers & vulnerable populations.
- **Develop** safe and effective vaccines and therapeutics that can be delivered at scale and that are accessible based on need.

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's COVID-19 official portal is available [here](#).
- Nepal's COVID-19 regular updates and resources are available [here](#).
- For COVID-19 updates from 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 WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#).

CONTACT DETAILS

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