

Situation Update #109 - Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Reporting Date: 09 May - 15 May 2022 (EPI Week 19)

HIGHLIGHTS

(Data published in the MoHP Situation Report as of 15 May 2022 and same data published in EDCD Report as of 16 May 2022)

- Of the total RT-PCR confirmed COVID-19 cases, 98.76% (966,904) of cases have recovered, 0.02% (142) are active cases and 1.22% (11,952) are deaths.
- All active cases (142) are in home isolation.
- None of the districts reported more than 500 active cases.
- Among the new RT-PCR confirmed cases (56) reported this week, 57.1% (32) are from Kathmandu district followed by Lalitpur district 10.7% (6). Majority of the new cases 67.9% (38) have been reported from Kathmandu Valley (Kathmandu, Lalitpur and Bhaktapur), Bagmati Province.

- COVID-19 vaccination coverage status (as of 17 May 2022)**

SITUATION OVERVIEW

(Data as of 15 May 2022)

NEPAL

Cumulative confirmed cases

RT-PCR: 978,998

Antigen RDT: 140,207

Cumulative deaths: 11,952

Cumulative tests

RT-PCR: 5,669,140

Antigen RDT: 1,180,970

SOUTH-EAST ASIA REGION

Cumulative cases (%)

58,017,061 (11%)

Cumulative deaths (%)

787,618 (13%)

GLOBAL

Cumulative cases (%)

519,226,379 (100%)

Cumulative deaths (%)

6,267,581 (100%)

Covi-AstraZeneca		Vero Cell		Janssen		Pfizer		Moderna	
First dose	5,246,531	First dose	10,287,596	Single dose	3,374,179	First dose	324,841	First dose	3,112,962
Second dose	4,378,833	Second dose	9,136,059			Second dose	236,135	Second dose	2,613,311

NEPAL EPIDEMIOLOGICAL SITUATION

- Since 9 May 2021, all 7 provinces in the country are experiencing community transmission.
- Since the start of the COVID-19 pandemic, 78.0% (764,062/978,998) of RT-PCR confirmed cases were reported from three provinces, namely - Province 1, Bagmati Province and Lumbini Province. The Kathmandu valley area (Kathmandu, Bhaktapur, Lalitpur) in Bagmati Province has substantially high case load with 43.7% of national total (427,875/978,998), and 81.2% of the provincial total (427,875/527,096).
- Province-wise RT-PCR test positivity rate in Epi Week 19 ranged from 0.0% (Madhesh, Gandaki and Lumbini province) to 3.8% (Sudurpashchim province), with a national positivity rate at 0.4%. Karnali province did not report any test performed in the last week.
- Nepal reported a 51% decrease in the number of new RT-PCR confirmed cases (n=56) in Epi week 19 compared to that in the previous week. Of these total cases reported last week, 88% of the cases have been reported from Province 1, Bagmati, and Lumbini province.
- Nepal did not report any death in Epi week 19, compared to 1 death in the previous week.

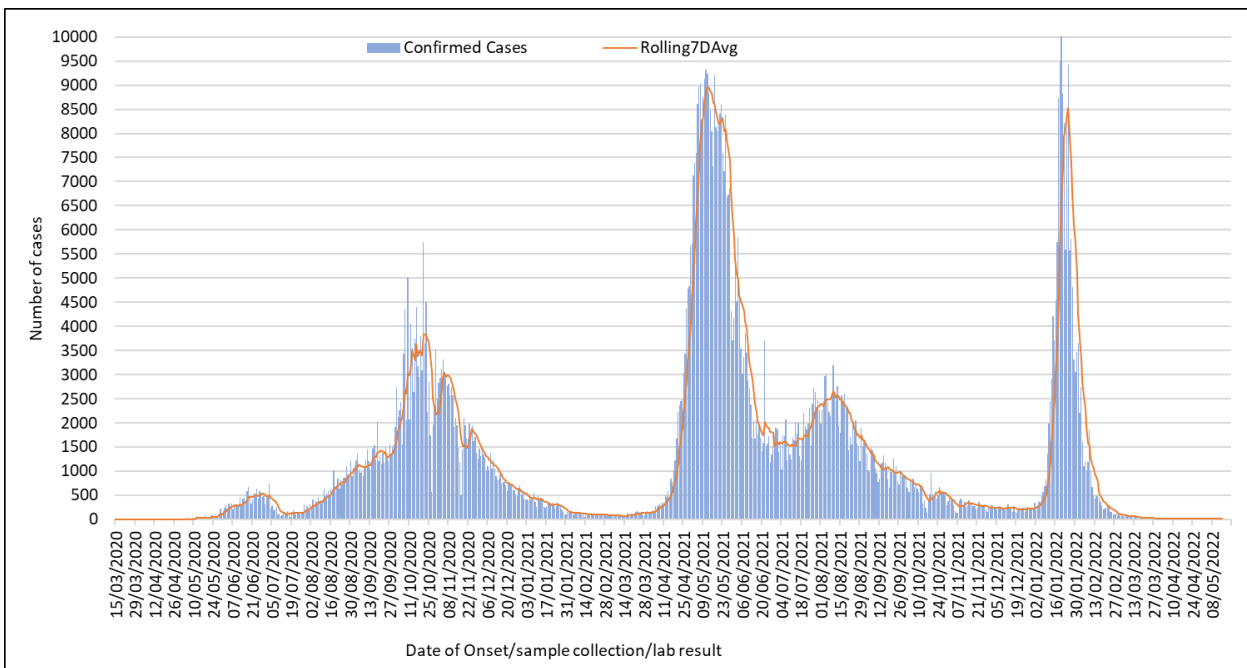
National Influenza Surveillance

- NIC-NPHL reported no Diagnostic Influenza sample on EPID-week 19 (9th - 15th May 2022).
- Out of the total SARS-CoV-2 samples that tested Negative at NPHL on EPID - week 19 (9th - 15th May 2022), 40 SARS-CoV-2 Negative samples were tested for Influenza. The result is awaited.
- From January 3rd, 2022, until May 15th, 2022:
 - A total of 4 samples have been tested positive for Influenza (2 Influenza B Positive and 2 Influenza A/H3) from 2049 samples (Sentinel and non-sentinel samples including SARS-CoV-2 Negative SARI and ILI cases).
 - Similarly, 206 samples have been tested positive for SARS-CoV-2 from 559 Influenza Negative samples (Sentinel/non-sentinel ILI/SARI samples)¹.

WHO SEAR countries: Number of COVID-19 confirmed cases and cumulative incidence rate (per 100,000). Link Here- <https://worldhealthorg.shinyapps.io/covid/>

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

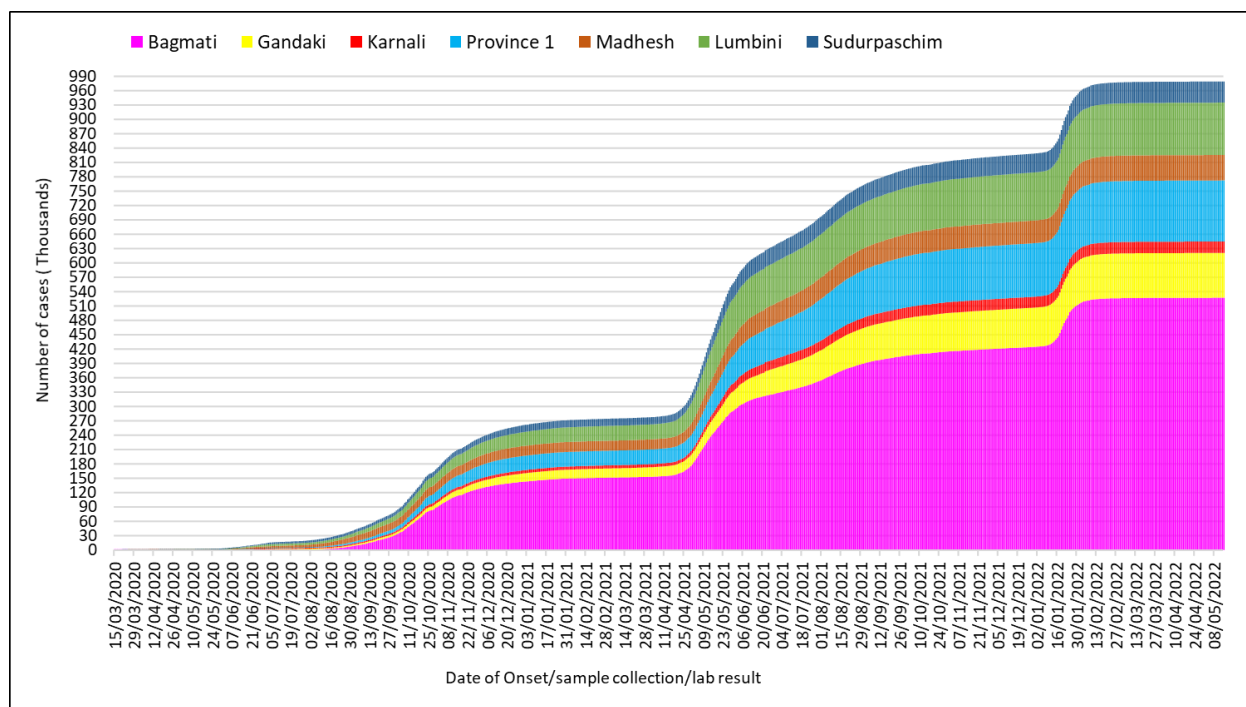
Figure 1: RT-PCR confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N=978,998) (Data reported on 15 May 2022 up to 19:00:00)



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. Clinical information **presented here is collected on the day of sample collection.**

At national level, the first wave of cases between July 2020 and February 2021 was followed by the second wave from the middle of March 2021. Since the middle of December 2021, a third wave of cases soared up exceeding the highest number of single day cases reported in the past surges towards the end of January 2022, however the trend has been decreasing since then.

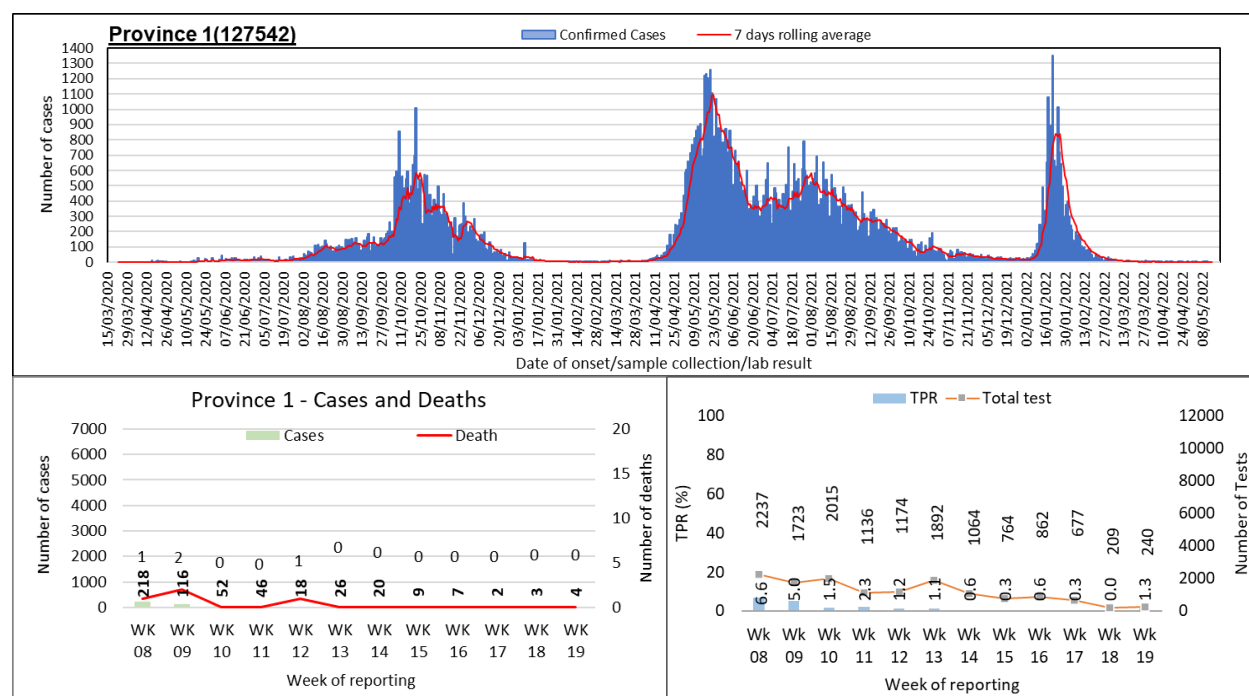
Figure 2: Cumulative case count of RT-PCR confirmed COVID-19 cases (N=978,998) by province (Data reported on 15 May 2022 up to 19:00:00)



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.

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

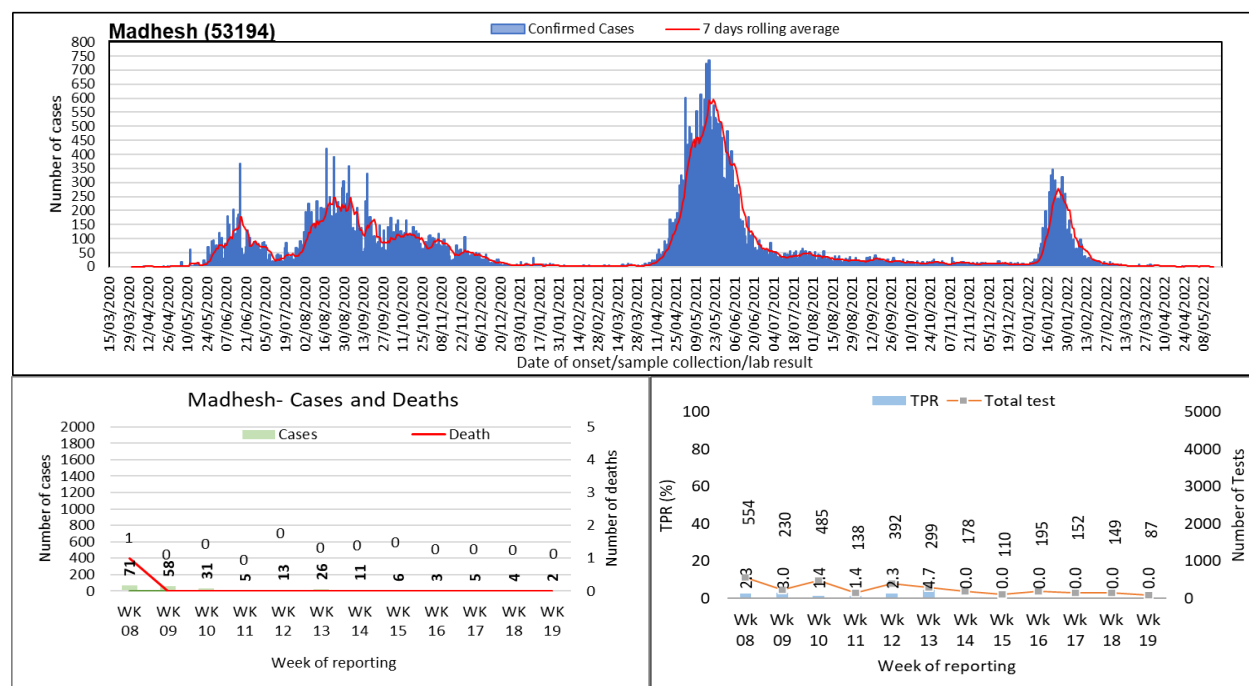
Figure 3A1: RT- PCR confirmed COVID-19 cases in Province 1: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 15 May 2022)



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.

There were 4 new cases reported in the past week in Province 1. Since a peak in week 3, cases are continuously decreasing. However, cases have increased by 33% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Province 1 increased to 1.3% in the past week. A total of 240 tests were performed in the past week, 15% more than that in the previous week.

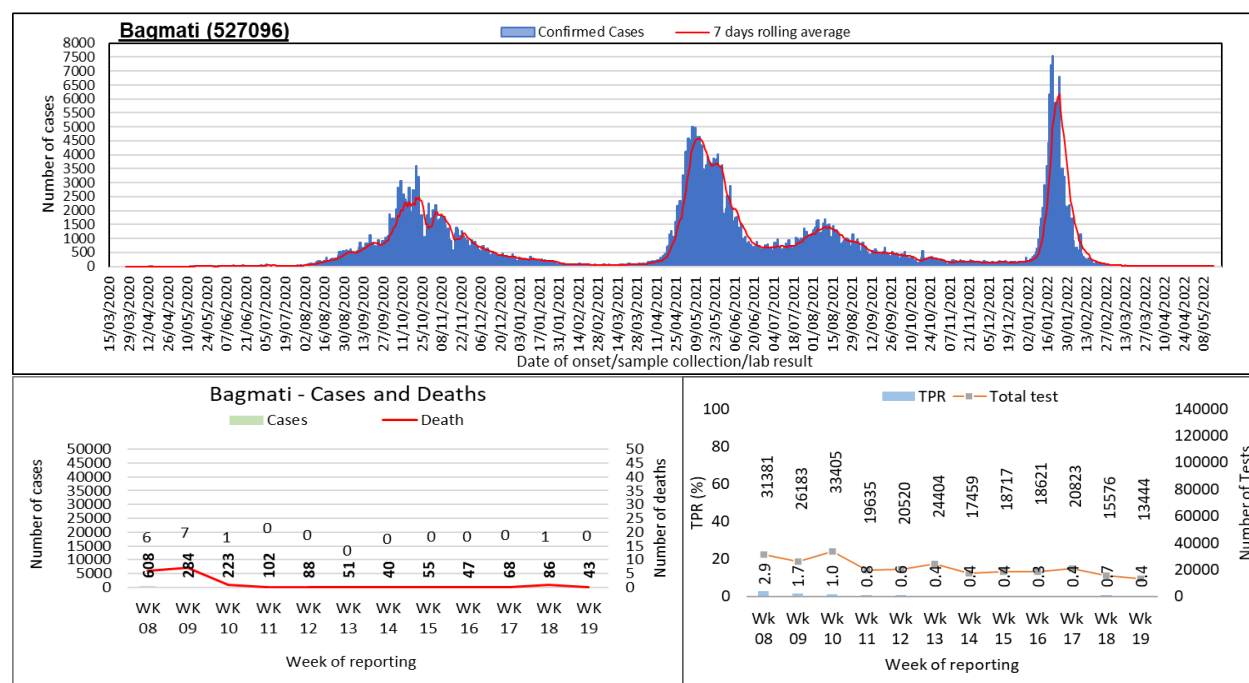
Figure 3A2: RT- PCR confirmed COVID-19 cases in Madhesh Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 15 May 2022)



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.

There were 2 new cases reported in the past week in Madhesh province. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 50% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Madhesh remained at 0.0% in the past week. A total of 87 tests were performed in the past week, 42% less than that in the previous week.

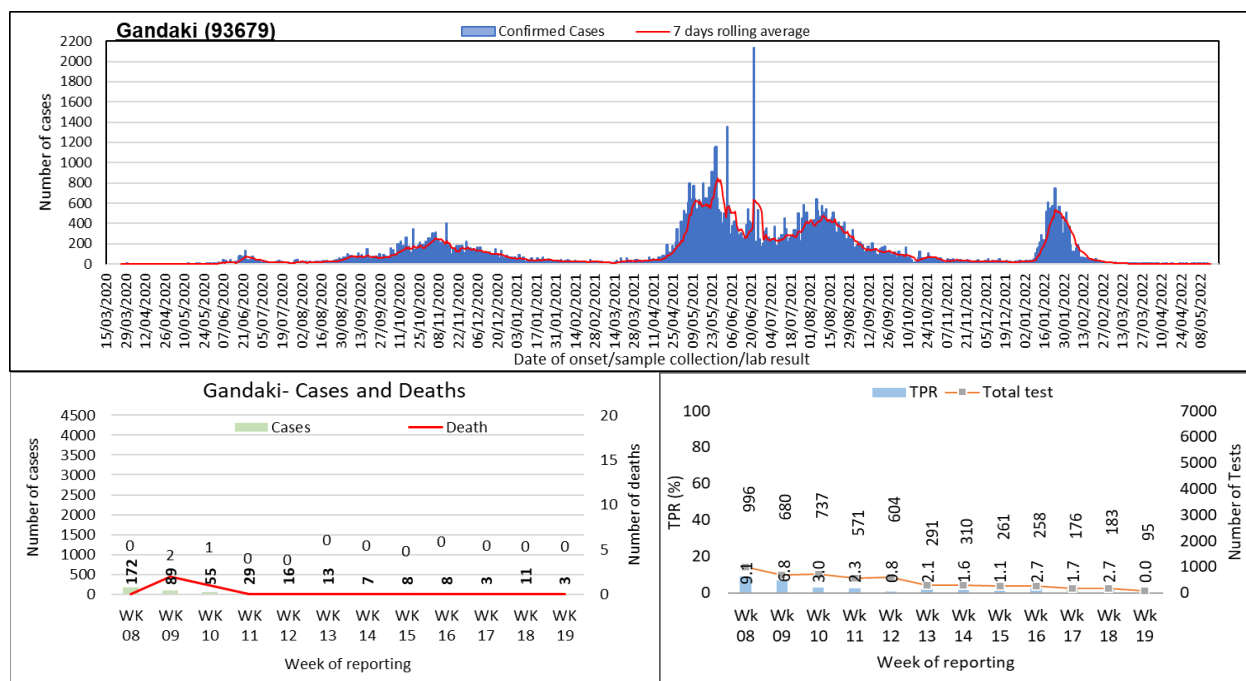
Figure 3A3: RT- PCR confirmed COVID-19 cases in Bagmati Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 15 May 2022)



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.

In Bagmati, 43 new cases were reported in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 50% in the past week compared to the previous week. There was no death reported in the past week, compared to 1 death in the previous week. The test positivity rate in Bagmati decreased to 0.4% in the past week. A total of 13,444 tests were performed in the past week, 14% less than that in the previous week.

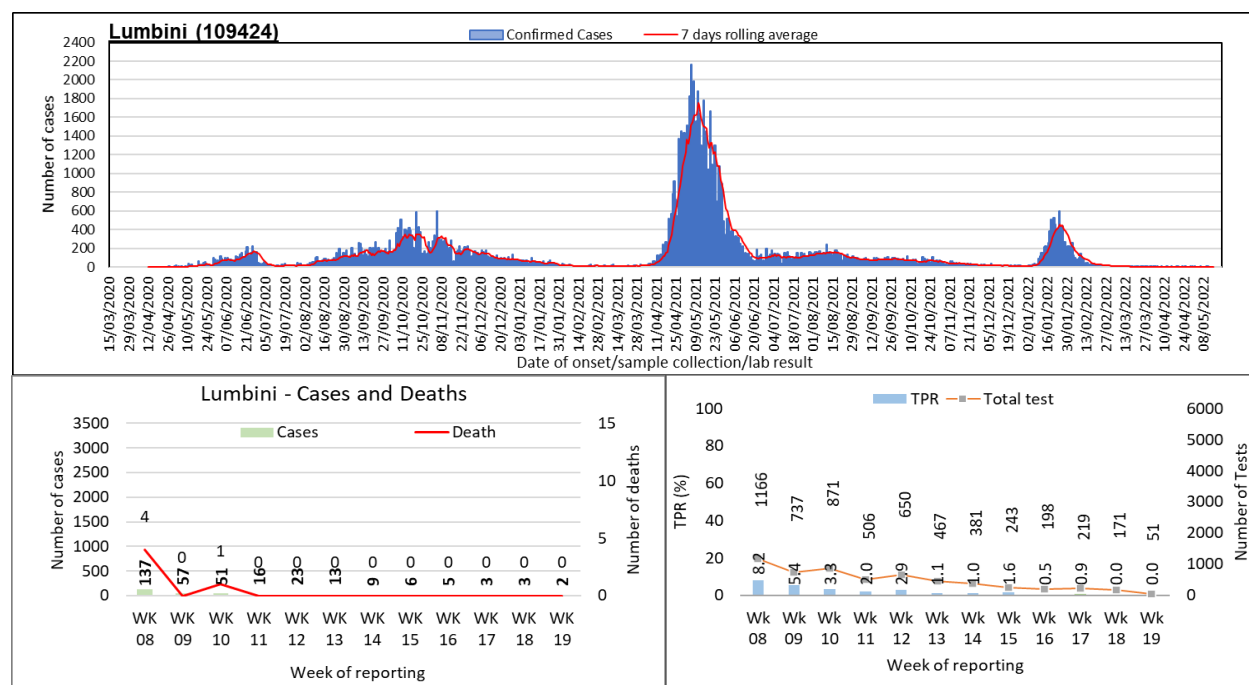
Figure 3A4: RT- PCR confirmed COVID-19 cases in Gandaki Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 08 May 2022)



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.

In Gandaki, 3 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. Cases have decreased by 73% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Gandaki decreased to 0% in the past week. A total of 95 tests were performed in the past week, 48% less than that in the previous week.

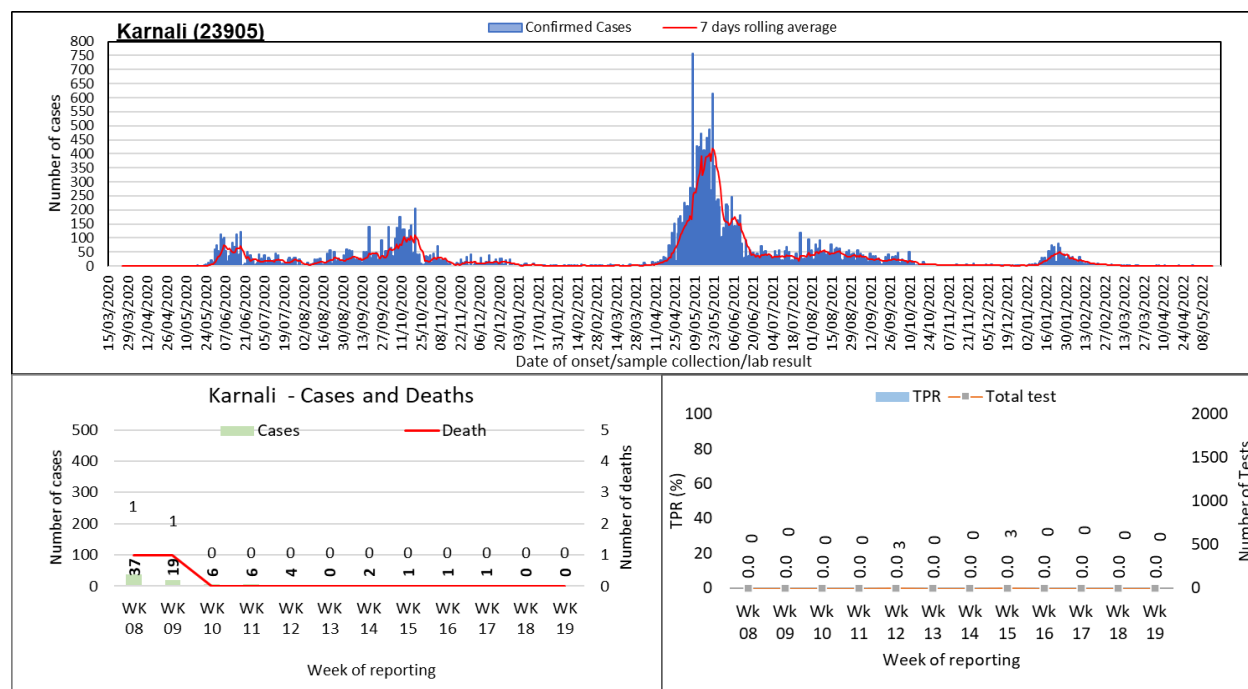
Figure 3A5: RT- PCR confirmed COVID-19 cases in Lumbini Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 15 May 2022)



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.

Lumbini reported 2 new cases in the past week. Since a peak in week 3, cases are continuously decreasing. Cases have decreased by 33% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Lumbini remained at 0.0% in the past week. A total of 51 tests were performed in the past week, 70% less than that in the previous week.

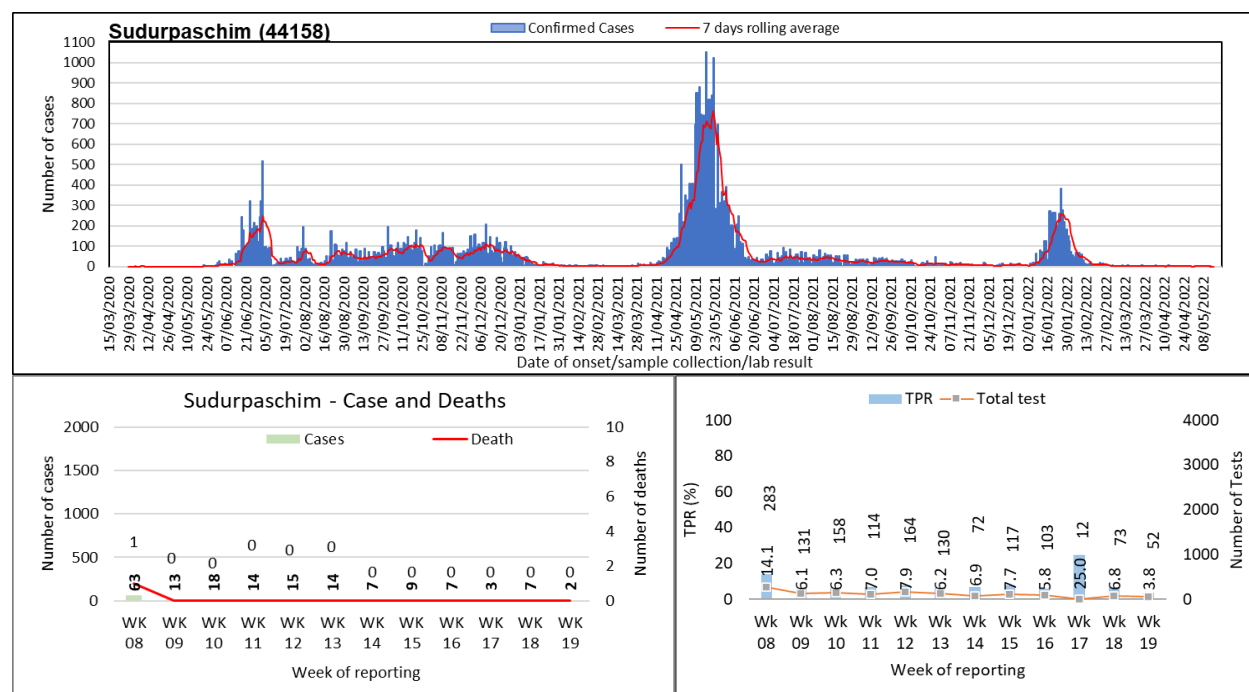
Figure 3A6: RT- PCR confirmed COVID-19 cases in Karnali Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 15 May 2022)



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.

In Karnali, no new case was reported in the past week, same as that in the previous week. Since a peak in week 3, cases are continuously decreasing. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Karnali remained at 0.0% in the past week with no test performed reported in the past week.

Figure 3A7: RT- PCR confirmed COVID-19 cases in Sudurpaschim Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 15 May 2022)



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.

In Sudurpashchim, 2 new cases were reported in the past week. Since a peak in week 4, cases are in a decreasing trend. Cases have decreased by 71% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Sudurpashchim decreased to 3.8% in the past week. A total of 52 tests were performed in the past week, 29% less than that in the previous week.

Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 15 May 2022 up to 19:00:00)

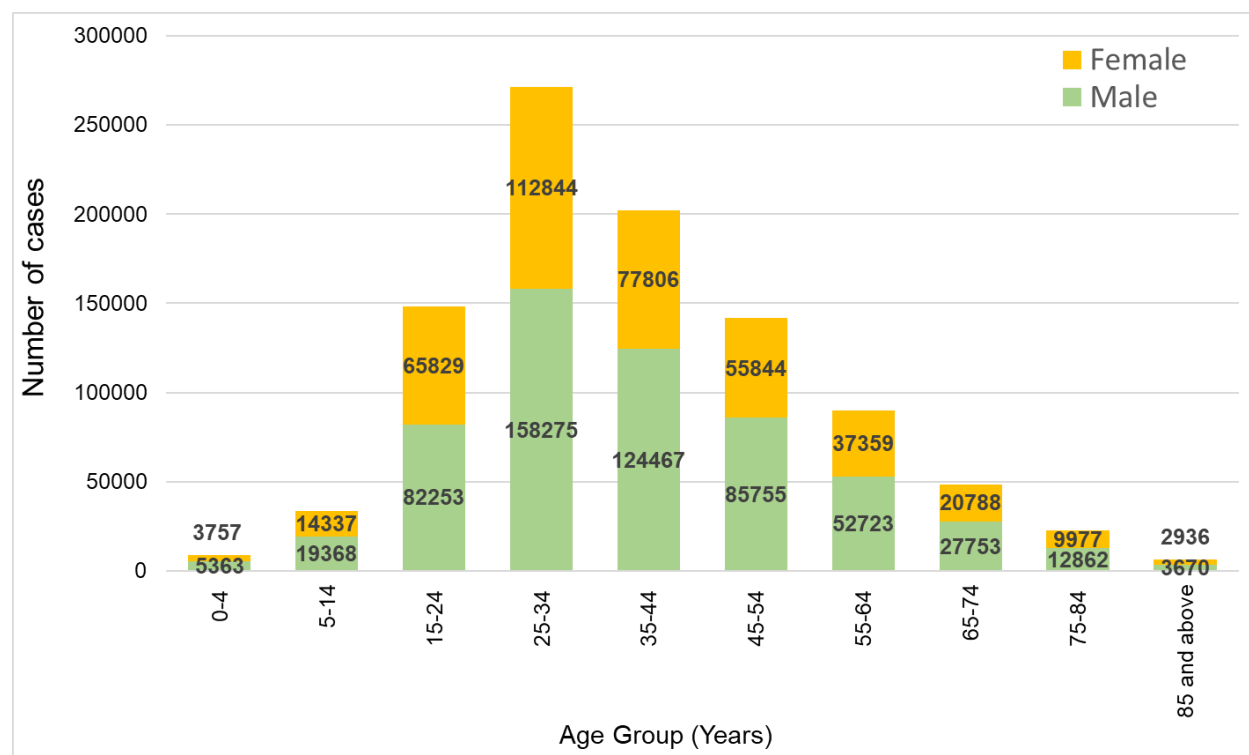
Reporting Province	Total confirmed cumulative cases RT-PCR Tests	Total Confirmed cumulative cases Antigen RDT test	Total confirmed cumulative cases	% of total confirmed cumulative cases	Total cumulative deaths	Transmission classification	Total confirmed cases in last 14 days Antigen RDT test	Total confirmed cases in last 14 days RT-PCR test	Total confirmed cases in last 14 days	% of total confirmed cumulative cases in last 14 days	Total Deaths in last 14 days
Province 1	127542	29611	157153	14.3	1715	Community transmission	0	7	7	4.0	0
Madhesh	53194	1154	54348	4.9	783	Community transmission	0	6	6	3.4	0
Bagmati	527096	29940	557036	50.7	5164	Community transmission	1	129	130	73.4	1
Gandaki	93679	22867	116546	10.6	1419	Community transmission	0	14	14	7.9	0
Lumbini	109424	25535	134959	12.3	1864	Community transmission	1	5	6	3.4	0
Karnali	23905	5901	29806	2.7	491	Community transmission	5	0	5	2.8	0
Sudurpashchim	44158	5425	49583	4.5	516	Community transmission	0	9	9	5.1	0
National Total	978998	120433*	1099431	100	11952	Community transmission	7	170	177	100	1

Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 15 May 2022, **140,207 but IMU reported **120,433***

Notes:

1. The source for case data used in this update is from RT-PCR test positivity reported by laboratories from various locations across Nepal, as shared by HEOC Sitrep; and IMU/IHIMS.
2. Case data is screened and cleaned by our data team for double entry, wrong entry and manual errors such as cities name in place of districts, district name in place of province etc.
3. Whereas the test positivity rate is calculated based on the test positivity reported in Sitrep for RT-PCR which may or may not be scrutinized or cleaned the same way and mark the cases on location of the laboratories rather than their place of residence.

Figure 4: Distribution of RT-PCR positive COVID-19 cases by age and sex (N=973,966) (Data reported on 15 May 2022 up to 19:00:00)



Note: Core epidemiological variables under process for 5032 cases.

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 RT-PCR confirmed COVID-19 cases (N=978,998) (Data reported on 15 May 2022 up to 19:00:00)

Age Group (Years)	Total confirmed cases	Death (male)	Death (female)	Deaths with any known comorbid condition	Age specific case fatality ratio (%)
0-4	9120	16	23	13	0.43
5-14	33705	13	7	10	0.06
15-24	148082	91	96	69	0.13
25-34	271119	386	264	149	0.24
35-44	202273	875	450	279	0.66
45-54	141599	1385	644	565	1.43
55-64	90082	1682	796	769	2.75
65-74	48541	1631	885	940	5.18
75-84	22839	1221	654	762	8.21
85+	6606	519	288	274	12.22
Unknown	5032	19	7	11	0.52
National	978998	7838	4114	3841	1.22

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

Note: COVID-19 positive lab result is temporally associated with death; causal association under

A total of 11,952 deaths have been reported. Out of the total deaths, 7,838 (65.6%) were male and 4,114 (34.4%) were female. Amongst the deaths, 3,841 persons (32.1%) had at least one known comorbidity. The age specific Case Fatality Ratio (CFR) progressively increases with age, ranging from 0.06% to 12.22%.

PREPAREDNESS AND RESPONSE

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

- COVID-19 vaccination campaign is going simultaneously in all provinces of the country

What is the WHO Country Office for Nepal doing?

Laboratory Diagnosis

- A total of 56,69,140 RT-PCR tests were performed nationwide by 106 designated COVID-19 labs functional across the nation (as of 15th May 2022).
- Supported 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 all the participating laboratories was 100% concordant.
- Technical support provided to NPHL in conducting genome sequencing of 14 SARS-CoV-2 positive samples.

Technical Expertise and Training

- Continued routine work from the team of Technical Expertise and Training²

- WHO provided support to National Health Training Center (NHTC) for organizing a workshop to collect feedback and suggestions from stakeholders and experts on the draft version of Learning Resources Package (LRP) on “infection prevention and control and health care waste management”. The workshop was conducted on 10 May 2022 with participants from NHTC, Nursing and Social Security Division, Curative



Workshop on finalization of learning resources package (LRP) of infection prevention and control and health care waste management

Photo Courtesy: WHO Nepal/S.Paudel

Service Division, National Public Health Laboratory, Management Division, Family Welfare Division, WHO, GIZ, Infection Control Society of Nepal, UNDP and clinical experts and IPC focal person from some hospitals (National Trauma Center, Patan Hospital, Tribhuvan University Teaching Hospital, Grandy International Hospital etc.). Feedbacks and suggestions received during the workshop are in the process of being incorporated into the document.

² The routine works of the technical expertise and training team included technical support to the Ministry of Health and Population and its department for developing different guidelines/manuals, conducting health programs and conducting capacity building activities. In order to perform these activities, the team coordinates and discuss with relevant government authorities and partners for effective planning and conducting the various activities.

Operational Support and Logistics

- Continued routine work from the team of Operation Support and Logistics³
- Personal Protective Equipment, mainly laboratory gowns, sent from WHO HQ, have been received.
- Handed over medical logistics items to the Point of Entry, Health Desk at Gautam Buddha International Airport, Bhairahawa, Lumbini Province on 15 May 2022.

Risk Communication and Community Engagement

- Continued support to the Ministry of Health and Population (MoHP) for the weekly COVID-19 Media briefing. The title of the program has been changed to "Swasthya tatha Janasankhya Mantralaya ko Pratekshya Prasaran (Live Broadcast from MoHP). This week's briefing held on 11 May 2022 discussed the COVID-19 updates, message on PHSM in the context of upcoming local level election, appeal to health offices to strengthen surveillance at Point of Entries, Vaccination coverage update and importance of vaccination. Similarly, the briefing also provided updates on vector-borne diseases such as Zika, Chikungunya and Dengue. The program is live telecasted from Nepal Television every Wednesday at 4:15 PM.
- Provided support to NHEICC in reviewing and finalizing IEC materials developed for World Hypertension Day 2022.
- The web story - *Engaging with Parliamentarians for Strengthening Risk Communication and Community Engagement* - was published on the WHO, Country Office for Nepal, website (link [here](#)).
- WHO and MoHP press briefings on COVID-19 are being shared via Facebook and Twitter.
- The following documents were uploaded on *ReliefWeb* (link [here](#)):
 - i. *Weekly COVID-19 EPI Dashboard*, and
 - ii. The latest *Weekly WHO Nepal COVID-19 Situation Update*.
- IEC materials on the following topics were shared via WHO, Country Office for Nepal, social media:
 - i. COVID-19 preventive measures to implement during festivals,
 - ii. Importance of following public health measures even after COVID-19 vaccinations,
 - iii. Infectious diseases (such as dengue) and COVID-19,
 - iv. Reducing risk for noncommunicable diseases and COVID-19,
 - v. Importance of a healthy lifestyle and COVID-19,
 - vi. Mental health and COVID-19,
 - vii. Hand hygiene and COVID-19,
 - viii. COVID-19 vaccinations and pregnancy,
 - ix. Development of COVID-19 vaccines,
 - x. Safety and efficacy of COVID-19 vaccines.

³ The routine works of the operation support and logistics team included technical support to the Management Division of the Department of Health Services for the forecasting, quantification, procurement, and distribution plan of COVID-19 commodities. The other routine activities included daily operational support to the WHO country office and seven provincial health emergency operation centers, including fleet and travel management and the procurement of required logistics and supplies.

What are the health clusters partners doing?

- Continued routine work from the team of Partner Coordination and Donor Relation⁴
- UNICEF and WHO are providing overall support for COVID-19 vaccination campaign in close coordination with health partners and donors.
- All members of the Health Cluster are supporting the COVID-19 vaccination campaign of Nepal.
- Health partners are continuing their technical, operational, and logistics support for COVID-19 responses to health-related offices and institutions throughout the country.

⁴ The routine works include coordinating with all the divisions, units, centers of Ministry of Health and Population (MoHP) and Department of Health Services (DoHS), and the health partners for effective conduction of Health Cluster Coordination meeting. Furthermore, the works included the documentation and distribution of meeting minutes, health partner's support updates in the 3Ws (Who, What, Where) and thematic mapping, updates of WHO's support in the UNRCO 3W sheet, participate in multi-sectoral and emergency and disaster preparedness and response platforms and activities and the humanitarian country team operational meetings. Moreover, necessary support for effective coordination of Health Emergency Operation Centre (HEOC) with different stakeholders is provided.

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 about coronavirus disease (COVID-19) Pandemic 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](#)
- WHO Coronavirus (COVID-19) Dashboard can be found [here](#)
- Visit the WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#)

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