

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

WHO Country Office for Nepal

Wednesday 26 August 2020

HIGHLIGHTS

Nepal

- With the addition of four more laboratories, i.e. one in Doti district of Sudurpaschim Province, two in Kathmandu district and one in Chitwan district of Bagmati Province, a total of **44** designated COVID-19 testing laboratories are now functional in the country, of which 33 are government and 11 are private laboratories.
- All seven provinces and 77 districts have been affected by COVID-19 transmission. In the last 14 days, three districts (i.e. Mustang, Mugu and Solukhumbu) did not report any cases of COVID-19.

Regional/Global

- WHO has published updated guidance on [home-based care for patients with suspected or confirmed COVID-19 and the management of their contacts](#). The document provides guidance on the issues to be considered when deciding whether or not to provide care for COVID-19 patients at home. It offers advice for health workers and caregivers, who provide care to COVID-19 patients.
- WHO has published new guidance on the [use of masks for children](#), which serves as an annex to previously issued guidance on the use of masks in the context of COVID-19. The [Q&A on children and the use of masks](#) has recently been updated that provides answers to questions that the public may have.
- The COVID-19 pandemic has affected older people disproportionately, especially those living in long term care facilities. Some countries indicate that more than 40% of COVID-19 related deaths have been linked to long-term care facilities. The WHO Regional Office for the Western Pacific has produced a [communication toolkit for long-term care facilities](#) to support Infection Prevention and Control. This complements a WHO policy brief released last month on [preventing and managing COVID-19 across long-term care services](#).

SITUATION OVERVIEW

NEPAL

(data as of 25 August 2020, 07:00:00 hours)

32,676 confirmed cases

157 deaths

6,10,678 RT-PCR tests

SOUTH-EAST ASIA REGION

(data as of 10am CEST 23 August 2020)

35,33,807 confirmed cases

67,455 deaths

GLOBAL

(data as of 10am CEST 23 August 2020)

2,30,57,288 confirmed cases

8,00,906 deaths

NEPAL EPIDEMIOLOGICAL SITUATION

- As of **25 August 2020, 07:00 hours, (Week no. 35)**, a total of 32,676 COVID-19 cases were confirmed through polymerase chain reaction (RT-PCR) in the country. In the last 14 days, 3,931 cases were reported, which is 14.4 % of total confirmed cases, and these cases were reported from 74 districts in all seven Provinces.
- All seven Provinces and 77 districts in the country have been reported one or more cases of COVID-19 since the beginning of the COVID-19 epidemic in Nepal. Except for Gandaki Province, where transmission is defined as sporadic cases, all six Provinces (i.e. 1, 2, Bagmati, 5, Karnali and Sudurpaschhim); are having transmission as clusters of cases. *With recent spike of confirmed COVID-19 cases, Bagmati Province has moved from sporadic cases to clusters of cases.*
- Although overall doubling time has increased, indicating a slowing down of transmission, Province-2, Bagmati and Province-5 showing significant increase of caseload recently. 61% (20,026/32,676) of total cases were reported from the three Provinces mentioned.
- Overall, the sex-age distribution is highly skewed towards males, which constitute **80% (26,222/32,676)** of the confirmed cases and the males again, **90% (23,475/26,222)** are in the 15-54-year age group. However, sex and age distribution are changing over time in some Provinces, such as Bagmati Province among the COVID-19 cases reported recently.
- A total of 157 deaths (117 males and 40 females) occurred in the country, and all deaths occurred between weeks 20 and 35. Out of the total deaths, 115 persons (73%) had at least one or more known co-morbid conditions. The overall case fatality ratio (CFR) across all ages is less than 1 per cent, and CFR progressively increases with age beyond 55 years in the range of 3% to 34%.
- While less than 1% of the confirmed COVID-19 cases are symptomatic at diagnosis across all age groups, the proportion of symptomatic cases progressively increases with age beyond 55 years in the range of 2% to 9%.
- *Nepal has been able to keep COVID-19 transmission to sporadic or clusters of cases in its first wave of transmission through an effective quarantine or isolation of the returnees from abroad. Currently, there is an increasing trend of infections among individuals without international travel history, at least among the people for whom the travel history is available. In the current context of increasing numbers of cases, and in order to take maximum advantage of the total and partial local lockdowns, case investigation, contact tracing (CICT) and isolation capacity need to be further strengthened. This will require the deployment of additional personnel (including filling vacant positions) to support provincial and palika level surveillance and CICT activities*
- As of 23 August 2020, **628 cases** of Influenza-like illness (ILI) have been tested for COVID-19, of these **15 cases** have been tested positive for SARS-CoV-2 and all these positive cases have been included in COVID-19 database.

- A total of 13 samples were tested for Influenza last week (17-23 August 2020) and all 13 samples were tested negative for Influenza. Among the 13 Negative Influenza samples, five samples tested positive for COVID-19.

Figure 1: Confirmed COVID-19 cases in South East Asia Region ((Data updated on 23 August 2020 from global Weekly Epidemiological Update 2)

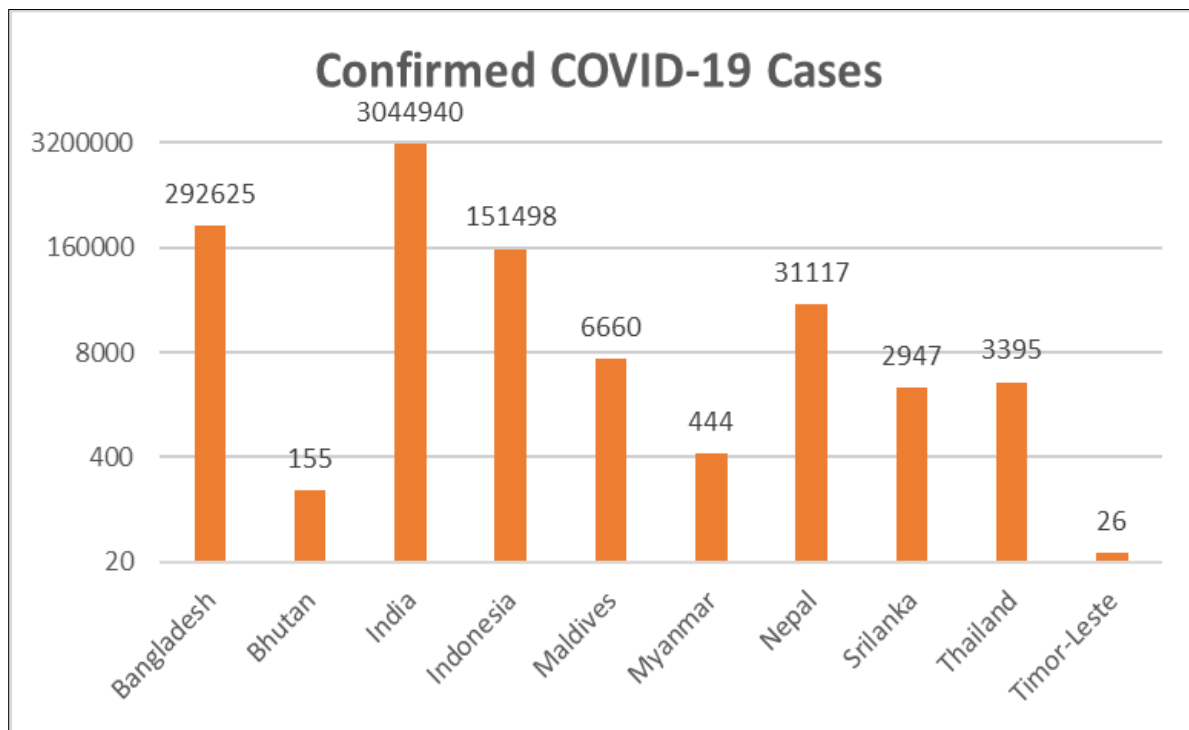


Figure 2 A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 32,676) (Data updated on 25 August 2020 7:00:00)

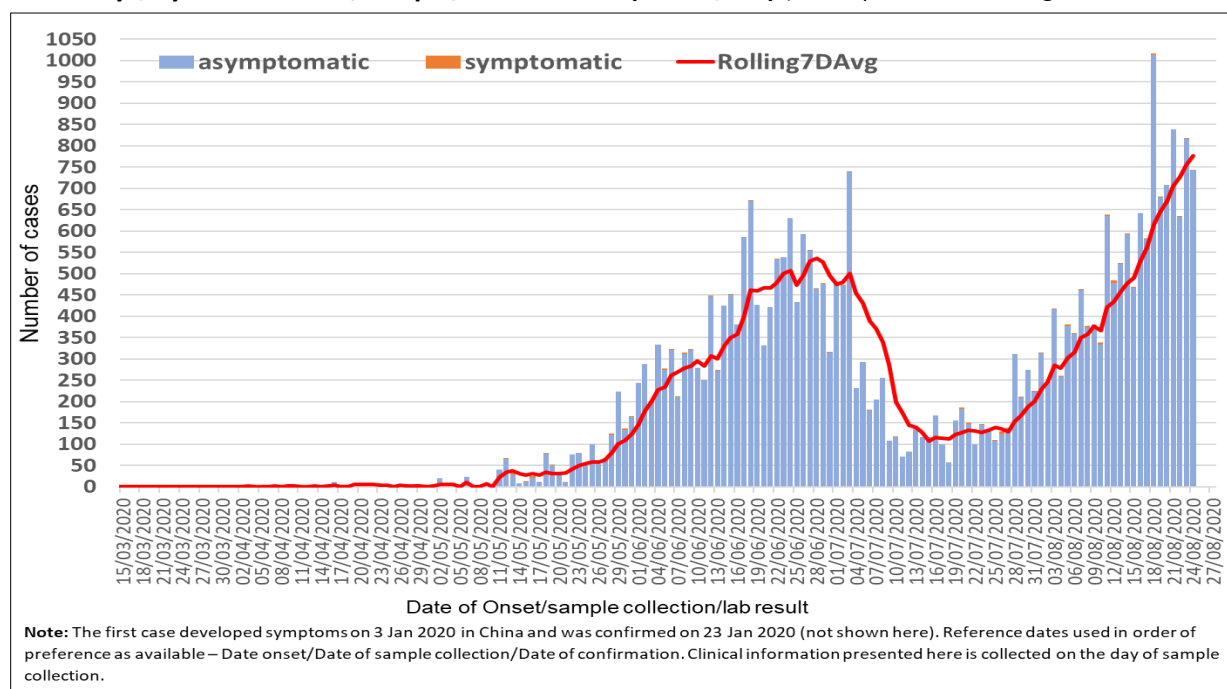
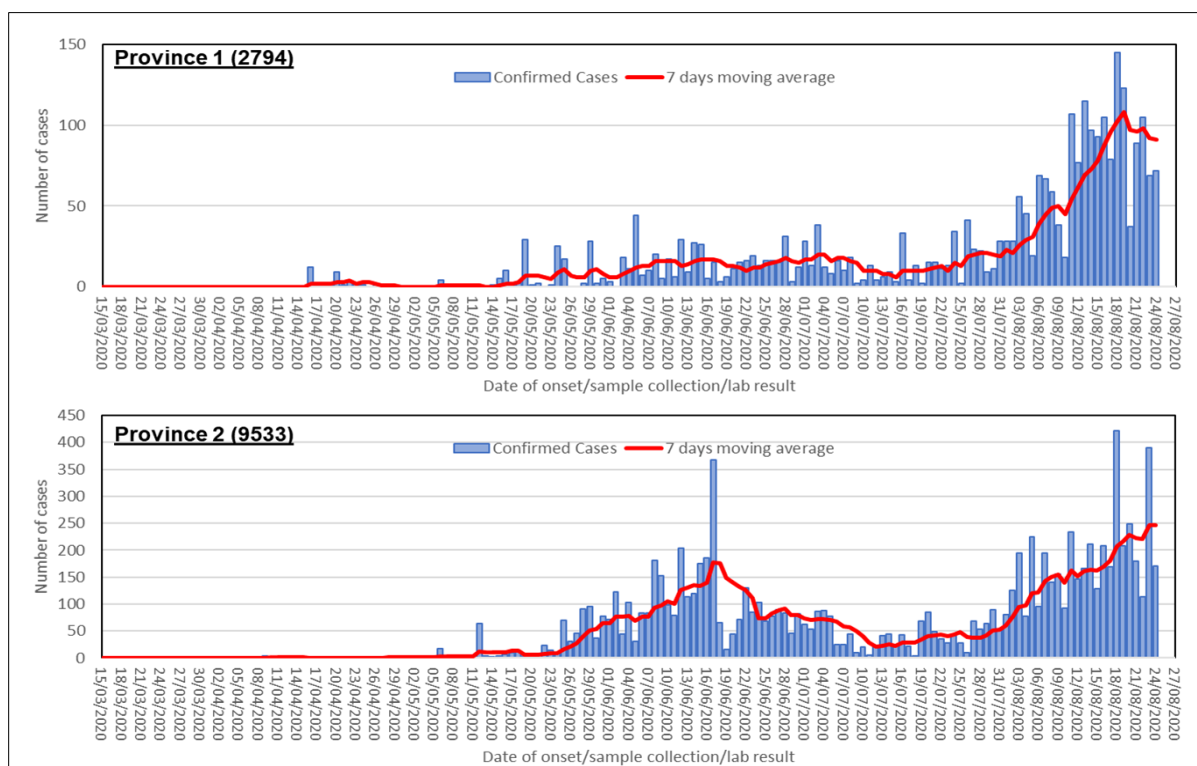
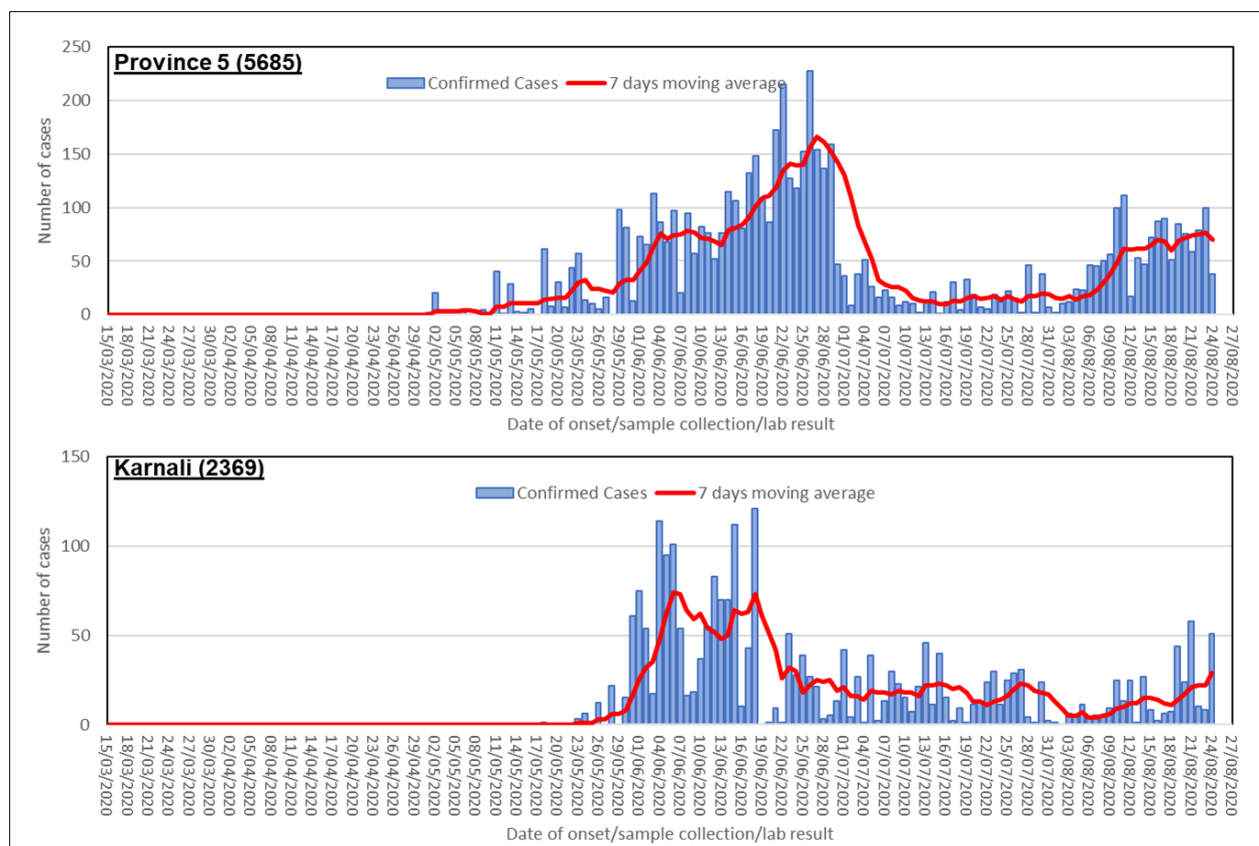
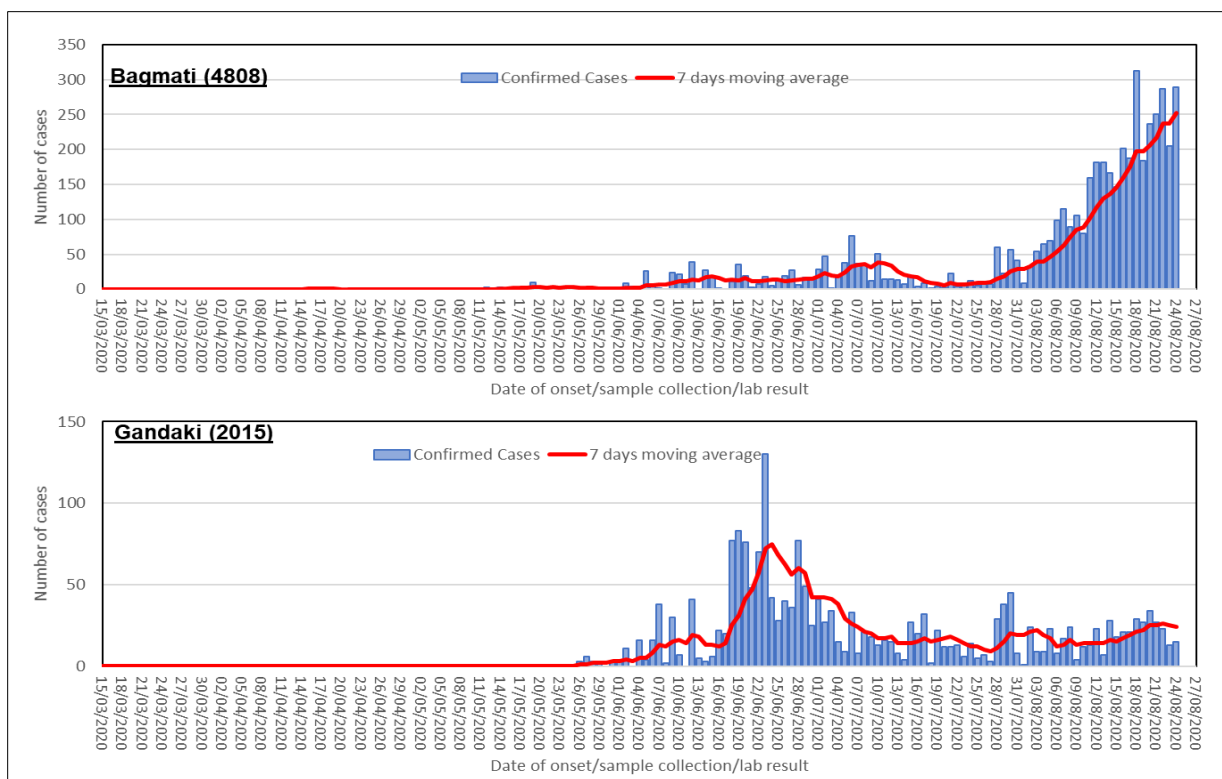
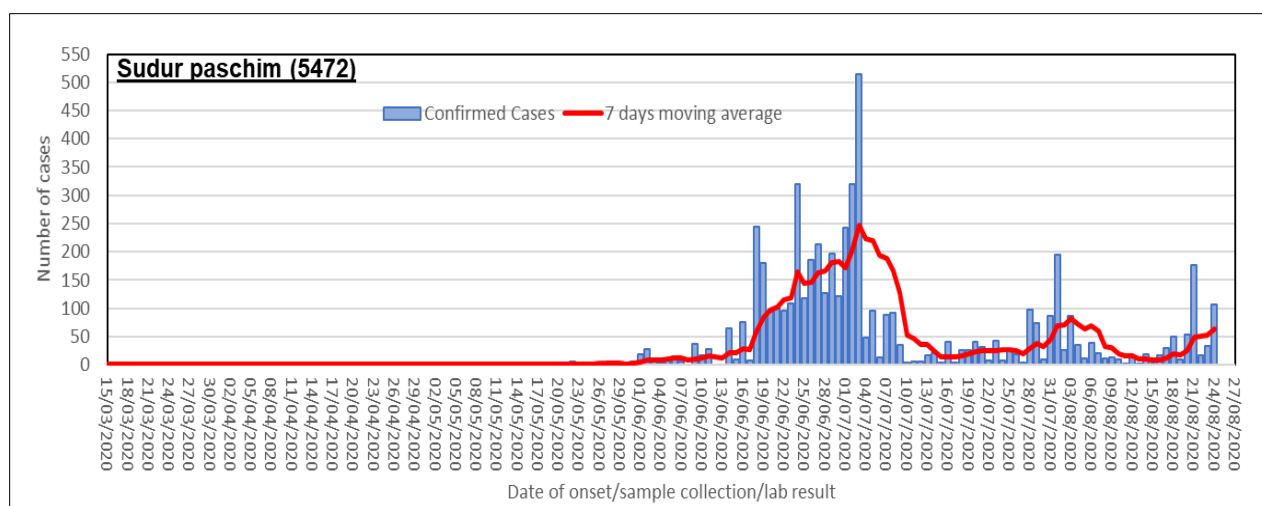


Figure 2B: Lab confirmed COVID-19 cases and a 7-day rolling average of cases by date of onset/sample/confirmation by Provinces (Data updated on 25 August 2020 7:00:00)







Note for all the Provinces (Figure 2 B):

- The first case developed symptoms on 3 January 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.
- **Y-axis scale varies between Provinces.**

Figure 2C: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 32,676) (Data updated on 25 August 2020 7:00:00)

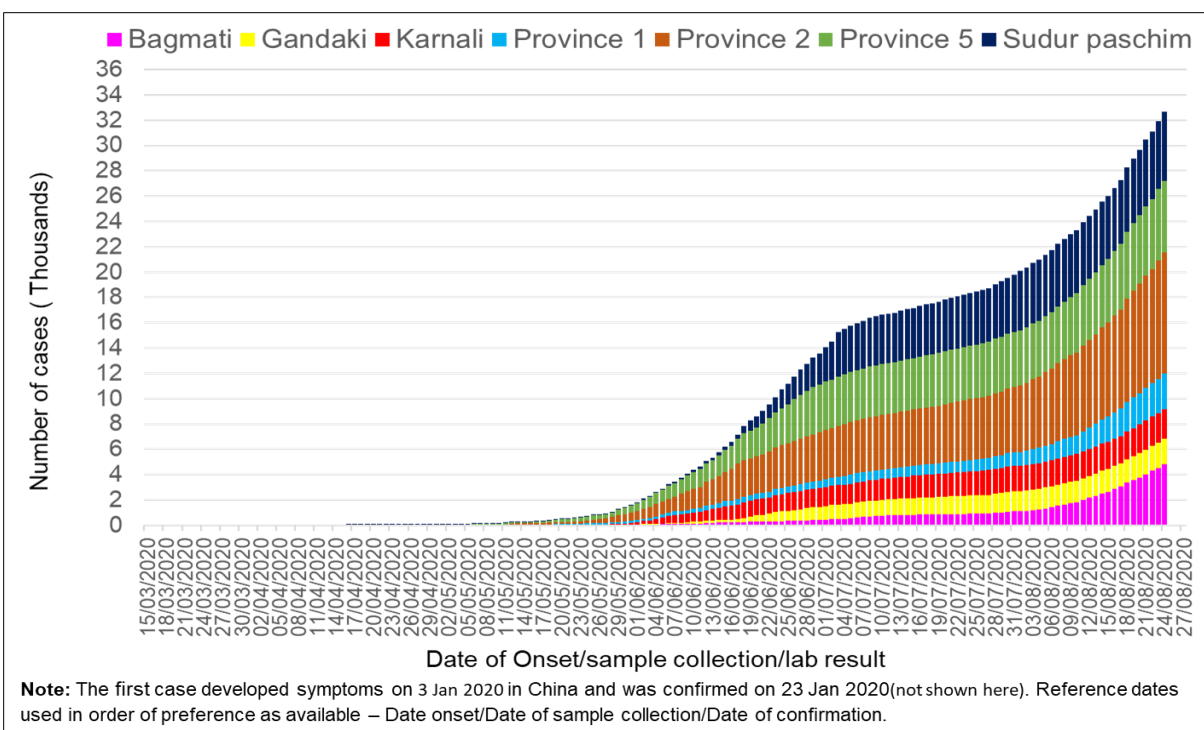


Figure 3: Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and districts shaded by current transmission status (N = 32,676) (Data updated on 25 August 2020 7:00:00)

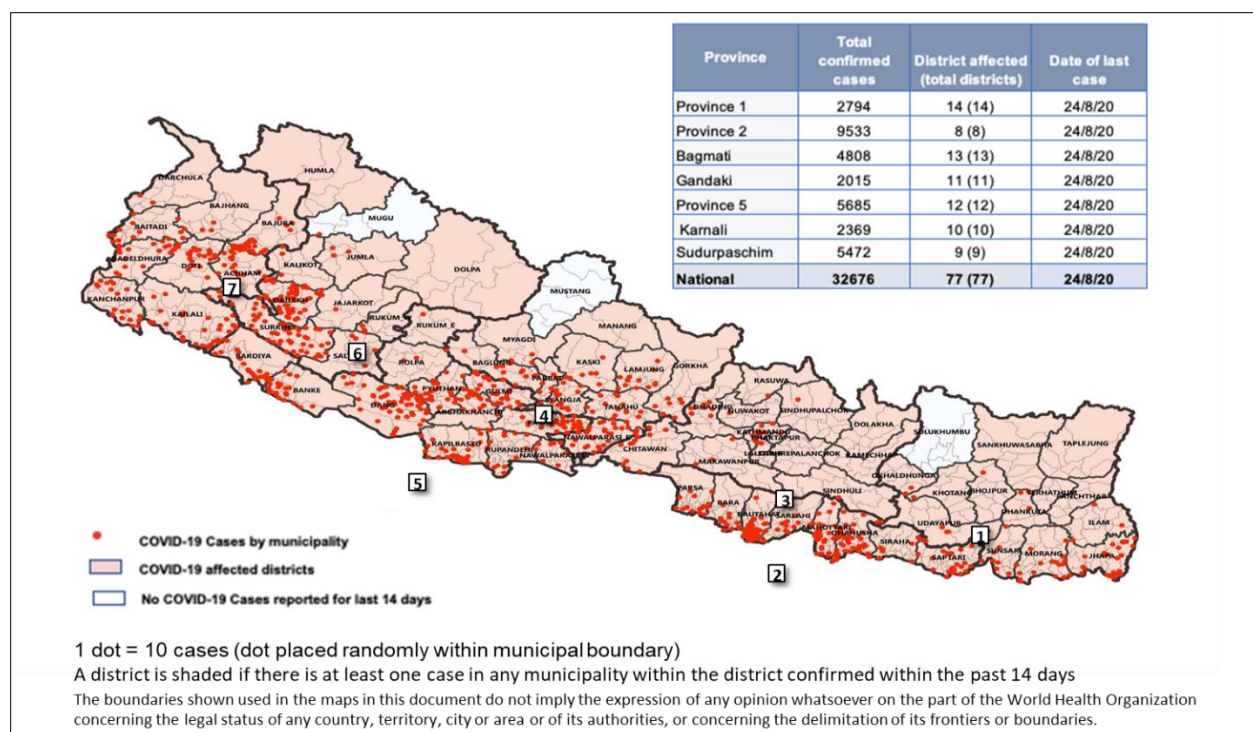


Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces. (N = 32,676) (Data updated on 25 August 2020 7:00:00)

Reporting Province	Total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Districts affected (total districts)	Date of most recent case [#]
Province 1	2,794	21	Cluster of cases	14 (14)	24 August 2020
Province 2	9,533	62	Cluster of cases	8 (8)	24 August 2020
Bagmati	4,808	35	Cluster of cases	13 (13)	24 August 2020
Gandaki	2,015	8	Sporadic cases	11 (11)	24 August 2020
Province 5	5,685	20	Cluster of cases	12 (12)	24 August 2020
Karnali	2,369	4	Cluster of cases	10 (10)	24 August 2020
Sudurpaschim	5,472	7	Cluster of cases	9 (9)	24 August 2020
National Total	32,676	157	Cluster of cases	77 (77)	24 August 2020

[#] Date of the 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[#]

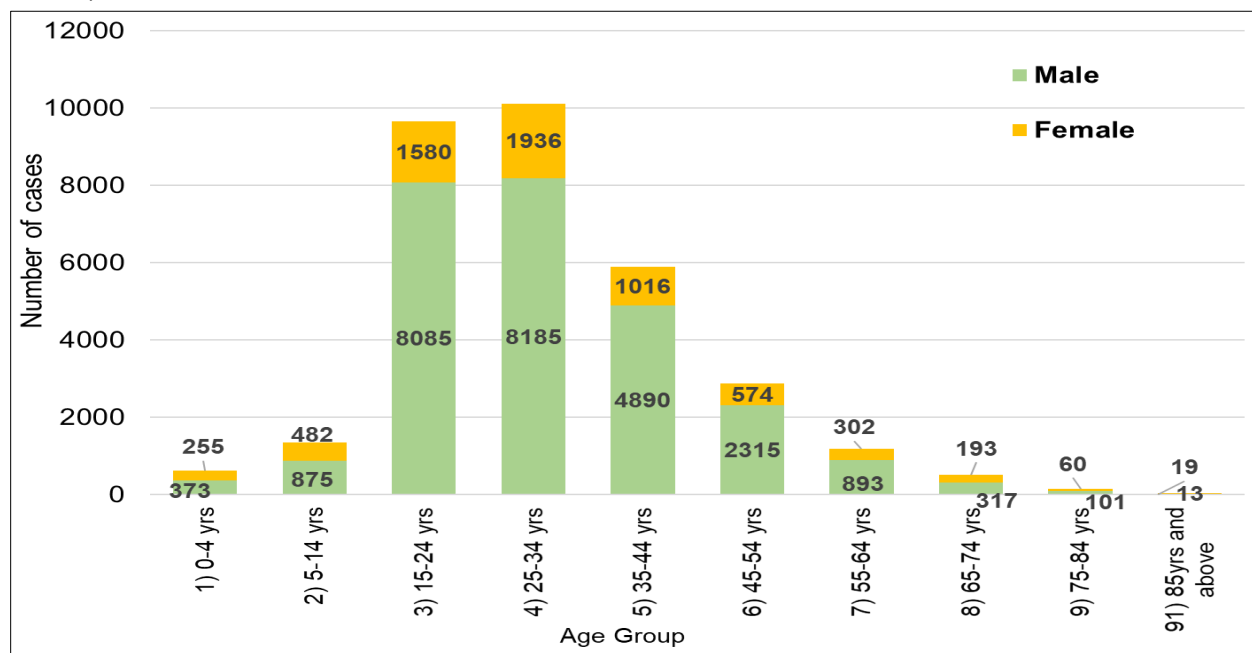
Cluster of cases- provinces experiencing cases, clustered in time, geographic location and/or by common exposures

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 4: Distribution of COVID-19 cases by age and sex (N = 32,464) (Data updated on 25 August 2020 7:00:00)



Details for 212 cases are yet to come

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases (N = 32,676) (Data updated on 25 August 2020 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	628	0	1	0	0.16
5-14 yrs	1357	2	0	2	0.15
15-24 yrs	9665	2	3	3	0.05
25-34 yrs	10121	9	3	7	0.12
35-44 yrs	5906	14	4	8	0.3
45-54 yrs	2889	24	9	23	1.14
55-64 yrs	1195	28	3	26	2.59
65-74 yrs	510	22	11	29	6.47
75-84 yrs	161	10	1	11	6.83
85+ yrs	32	6	5	6	34.38
Unknown	212	0	0	0	0
National	32676	117	40	115	0.48

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 = 32,676) (Data updated on 25 August 2020 7:00:00)

Age Group	Total confirmed cases	Asymptomatic	Symptomatic (n)	Symptomatic (%)
0-4 yrs	628	626	2	0.3
5-14 yrs	1357	1355	2	0.1
15-24 yrs	9665	9654	11	0.1
25-34 yrs	10121	10094	27	0.3
35-44 yrs	5906	5886	20	0.3
45-54 yrs	2889	2870	19	0.7
55-64 yrs	1195	1173	22	1.8
65-74 yrs	510	486	24	4.7
75-84 yrs	161	155	6	3.7
85+ yrs	32	29	3	9.4
Unknown	212	212	0	0.0
National	32676	32540	136	0.4

PREPAREDNESS AND RESPONSE

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

- The high-level meeting of the Secretary of the MoHP and all the provincial secretaries was convened this week to discuss priorities, issues/challenges facing and coordinated response at all levels, in all seven Provinces, in the context of changing epidemiology of COVID-19 epidemic.
- The COVID Crisis Management Center (CCMC) set up a prototype of a health desk at Point of Entry and at Point of Exit to demonstrate the proposed organization of an efficient screening of people entering/leaving Nepal. The demonstration was observed by high level officials and partner agencies. The prototype is ready to be rolled out at existing border crossings. WHO has provided technical and logistical support.
- MoHP has decided to revoke the decision of classifying designated COVID-19 hospitals as level 1, 2 & 3. Now all designated hospitals (District, Provincial and Federal) will be called as COVID-19 hospitals without a distinction of “levels”.
- MoHP has requested medical colleges and private hospitals to dedicate 30%, resp 20% of their capacity to the treatment of COVID-19 cases, Blocks/wards with COVID-19 cases must be separated from areas where non- COVID-19 cases are treated.
- Expansion of PCR testing laboratories to 44 and inclusion of Gene Xpert for COVID-19 diagnosis in selected labs. BPKIHS started Xpert Xpress SARs-CoV-2 testing since 24 August

2020; Hence, 3 out of 9 designated laboratories (i.e. Narayani Hospital, Lumbini Hospital and BPKIHS for Xpert Xpress SARs-CoV-2 testing) are now fully functional.

- MoHP has decided to reimburse all the COVID-19 designated hospitals, the costs incurred for COVID-19 case management at the rate of Rs 3,500 per case per day for mild cases, Rs 7,000 per case per day for moderate cases and Rs 15,000 per case per day for severe case.
- The Government of Nepal, (Cabinet of Ministers' meeting held on 20 August 2020, made a number of policy decisions related to COVID-19 management. The major ones are:
 - The government decided to manage asymptomatic and mild cases at home isolation and isolation centres if required; and not to be hospitalized.
 - The government decided to set up isolation centres with the capacity of 6,000 beds in the Kathmandu valley. Likewise, additional isolation beds will be established at the sub-national levels in all seven in collaboration with all seven Provincial Governments.
 - The Ministry of Culture, Tourism and Civil Aviation (MoCTCA) is to operate and manage regular and chartered flights for international destinations in the following way:
 1. The government decided to resume regular flights from the countries where PCR tests for COVID-19 are accessible, effective from 1 September 2020.
 2. Regular flights will be allowed only from the countries & cities (Malaysia, South Korea, Thailand, Japan, Hongkong, Australia, USA, Canada & European countries) where RT-PCR test are readily available; and this is restricted to certain groups of people only:
 - i) Nepalese who have received permission to come to Nepal; ii) foreign nationals who work for diplomatic missions in Nepal; iii) Personnel working for UN Agencies; iv) representatives and employee of Development Partners in Nepal.
 3. Passengers are not allowed to be brought through regular flights from other countries (e.g. Saudi Arabia, Kuwait, Qatar or others); where the RT-PCR tests are not readily available. People who are working in such countries and in other countries, where regular flights are permitted can travel through chartered flights after getting a recommendation from the Nepalese Diplomatic Mission of that country.
 4. The Ministry of Culture, Tourism and Civil Aviation (MoCTCA) will publish a schedule of regular international flights by 1 September 2020 (Nepali date: 16 Bhadra 2077) in line with above no.1)
 5. Passengers travelling to Nepal will be required to be in possession of: i) certificate of negative RT-PCR test; ii) printed copy of completion of an online form, with the Barcode of Central COVID-19 Management Committee (CCMC); and iii) hotel booking confirmation for at least 7 days to stay in quarantine in the pre-confirmed hotel.
 6. Passengers, who travel to Nepal with the certificate of negative RT-PCR test, after the entry health screening at the Point of Entry (PoE) in Tribhuvan International Airport, will be allowed to go home after a written commitment that they confirm to stay in home quarantine for two weeks.
 7. The cost for hotel accommodation for those travelers, who plan to stay in hotel quarantine for a period of 7-days upon their arrival, should be pre-paid to the respective airline to directly pay to the hotel where the passenger accommodation is pre-confirmed for a period of 7-days.

8. If any of the airlines onboard passengers to Nepal who do not have certificate of negative RT-PCR test; passenger with not having pre-confirmed hotel booking for minimum of 7-days; and passengers who do not fulfill the other conditions decided and enforced by CCMC including completion of online form; such airlines will face with the serious legal actions according to prevailing legal provisions of the MoCTCA, Government of Nepal.
- The local administrations in the three Kathmandu Valley districts have decided to extend the curfew with another week in the Kathmandu Valley until 2 September 2020.

What is the WHO Country Office for Nepal doing?

- WHO Representative, WHO Incident Manager and Pillar Lead – Epidemiology & Health Information of the WHO Incident Management System for COVID-19 response participated in the experts group meeting convened by the MoHP and chaired by the Hon. Minister of Health to deliberate on the current COVID-19 situation and interventions in Nepal and provided evidence-based views and advice on the epidemiologic scenario and response.
- WHO-Nepal has provided **technical assistance to National Public Health Laboratory (NPHL)** by supporting the following activities:
 - Validation of My lab PCR kit and SD Biosensor Extraction Kit has been completed.
 - As part of the technical assistance to the National Quality Assurance Program (NQAP), samples from 6 laboratories were received and checked by NPHL this week. All had a satisfactory result.
- WHO supported development of a web portal (mewellnepal.org.np) to help health care providers in taking care of their mental health. This website has been launched and currently functioning.
- Guidance documents developed with WCO support:
 - Infection Prevention and Control (IPC) pocketbook updated and pending approval.
 - Pocketbook on COVID-19 case management, to be finalized next week.
- Training on critical care for targeted government health personnel, who have been working in all COVID-19 designated hospitals, will be rolled out from next week. The training will be implemented in cooperation with the MoHP Nepal Health Training Centre (NHTC).
- The process for establishment and operationalization of the Provincial Health Emergency Operations Centre (PHEOC) in Province-5 is in progress; and it is expected to start functioning well by mid-September 2020.
- The Government of Province-1 has allocated a 600-meter square of space to Epidemiology and Disease Control Division (EDCD) as per their request for the installation of Point of Entry (PoE) health desk.
- WHO continued with providing short summaries, to the Secretary of Health, of the recently updated and released WHO technical guidance documents, which are also translated into Nepali language.
- Daily sharing of '*WHE Communications*' with media monitoring and media interactions-based recommendations for strengthening communication tools of the MoHP Spokesperson and HEOC officials.

- Publications with mention of WHO:

SN	TITLE (NEPALI)	URL	PUBLICATION	DATE	LANGUAGE	REMARKS
1	डब्लुएचओका नेपालस्थित कार्यालय प्रतिनिधि भन्छन्(परिस्थिति अझै नराम्रो हुनेवाला छ	Link	Sajha Post	25 August	Nepali	Dr Jos Vandelaer Quoted
2	Dr Jos Vandelaer Interview at MoHP Press Briefing (Video)	Link	Shared via MoHP Facebook Page	25 August	Nepali Voice-over	Dr Jos Vandelaer Interview at MoHP Press Brief
3	Health workers under attack as lack of COVID-19 awareness is fuelling stigma	Link	The Kathmandu Post	23 August	English	UNCT Campaign against stigma and discrimination mentioned
4	WHO Representative To Nepal Warns Of Spike Of COVID-19 Cases	Link	Sanchar Karmi	26 August	English	Dr Jos Vandelaer Interview at MoHP Press Brief Quoted
5	WHO Representative To Nepal Warns Of Spike Of COVID-19 Cases	Link	Nepal24Hours	26 August	English	Dr Jos Vandelaer Interview at MoHP Press Brief Quoted

- Continued with ongoing technical support for **national COVID-19 logistics** forecasting, quantification, costing, procurement plan and distribution plan. The additional activities undertaken, in this week, are as following:
 - Support for the development of the Health Desk to be established at Point of Entry (PoE) for entry and exit screening.
 - A layout of the facility has been finalized and shared with Incident Manager for review and endorsement.
 - Reviewed the manual of 31 Oxygen concentrators, which were received recently and provided with the advice for maintenance requirement, specifically cleaning and changing filters requirements.



#1: Nepali Army personnel demonstrating the process of setting up a tent, which is part of a health desk facility, within the premises of the COVID-19 Crisis Management Center, Kathmandu, Bagmati Province. The facilities will be set up at various Points of Entry (PoE) and Points of Exit to screen people for potential COVID-19 infection during their entry/exit into/from Nepal.

Photo Credit: WHO Nepal/A. Maharjan

#2: WHO officials visiting the COVID-19 Crisis Management Center, Kathmandu, Bagmati Province, to observe a demonstration of the process of setting up the health desks at various Points of Entry (PoE) to screen people during entry to, as well as, exit from Nepal for potential COVID-19 infection.



Photo Credit: WHO Nepal/A. Maharjan

What are the health cluster partners doing?

- Regular Health Cluster Coordination (HCC) for COVID-19 and monsoon response at the Federal level, and weekly health sector coordination meetings with the Provincial Health Directorates including COVID-19 designated hospitals, were organized. Both the coordination

meetings helped delivering coordinated response to COVID-19 pandemic as well as response to monsoon incidents by health sector partners at all levels.

- WASH and Education clusters supported for the development of guidelines for cleaning and disinfection of schools after re-opening in the context of COVID-19. – yet to be endorsed by Ministry of Education.
- Health partners, including reproductive health sub-cluster, mental health sub-cluster continued supporting the COVID-19 and non-COVID emergency response, throughout the country, to ensure continuity of services in the context of COVID-19 pandemic.

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 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 the WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#).

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