

### HIGHLIGHTS

#### Nepal

- With the addition of three more laboratories, i.e. two in Kathmandu district and one in Kavre district of Bagmati Province, a total of **47** designated COVID-19 laboratories are now functional in the country, of which 34 are government and 13 are private.
- All seven provinces and 77 districts in the country have reported one or more cases of COVID-19 since the beginning of the COVID-19 epidemic in Nepal. In the last 14 days, only two districts, i.e. Mustang and Humla, did not report any cases of COVID-19.

#### Regional/Global

- WHO has issued updated interim [guidance on hotels and other accommodation facilities](#) to help the sector protect the safety of staff and clients. *See also the Q&A's on [Staying at hotels and accommodation establishments and COVID-19](#) and [Working in hotels and COVID-19](#).*
- WHO has also released the guidance for [promoting public health measures on cargo ships and fishing vessels](#). This complements the guidance for employers to implement containment measures at [workplaces](#) and the related [Q&A](#).
- The results of a WHO [survey conducted to assess the impact of the COVID-19 pandemic on up to 25 essential health services in countries](#) show disruptions of essential health services in nearly all countries, and more so in lower-income than higher-income countries. The great majority of disruptions were partial, defined as a change of 5–50% in service provision or use.
- WHO has [published an overview](#) of the structure, methodology and assumptions used by the COVID-19 [Essential Supplies Forecasting Tool \(ESFT\)](#) that has been designed to help governments, partners and other stakeholders to estimate potential requirements for essential supplies to respond to the COVID-19 pandemic. *See also the ESFT [Frequently Asked Questions](#).*

### SITUATION OVERVIEW

#### NEPAL

*(data as of 1 September 2020, 07:00:00 hours)*

**40,527 confirmed cases**

**239 deaths**

**6,93,472 RT-PCR tests** *(data as of 31 August 2020)*

#### SOUTH-EAST ASIA REGION

*(data as of 10am CEST 30 August 2020)*

**40,73,148 confirmed cases**

**75,276 deaths**

#### GLOBAL

*(data as of 10am CEST 30 August 2020)*

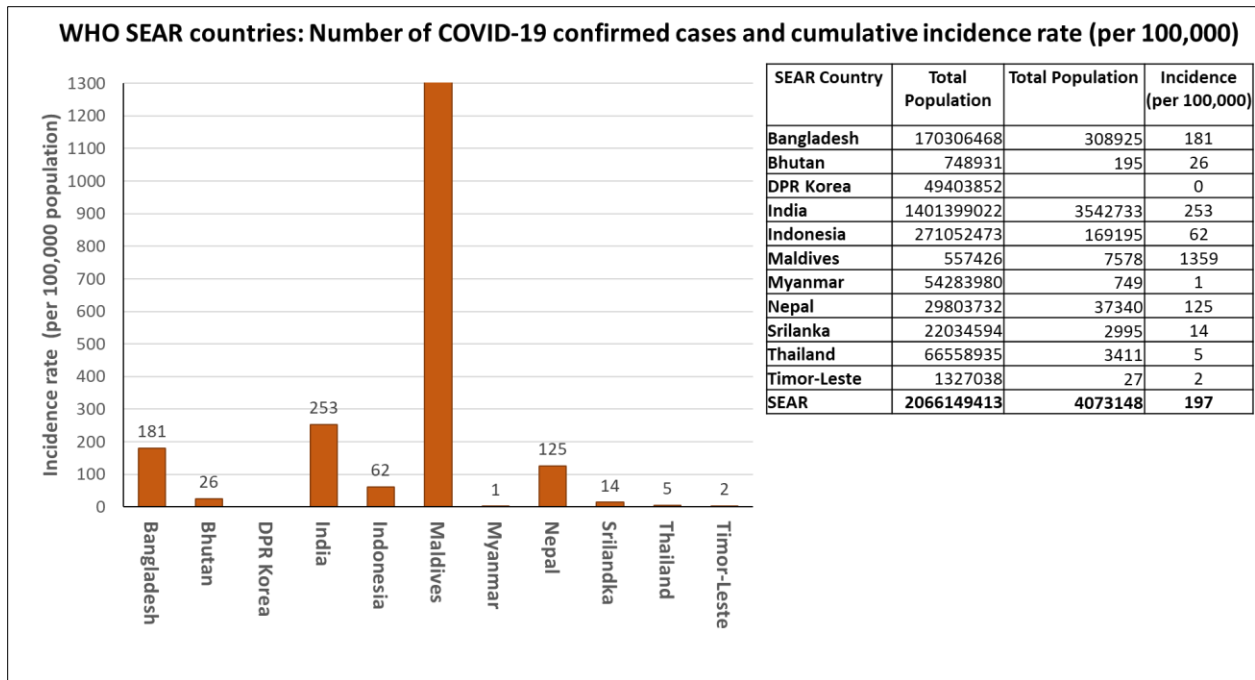
**2,48,54,140 confirmed cases**

**8,38,924 deaths**

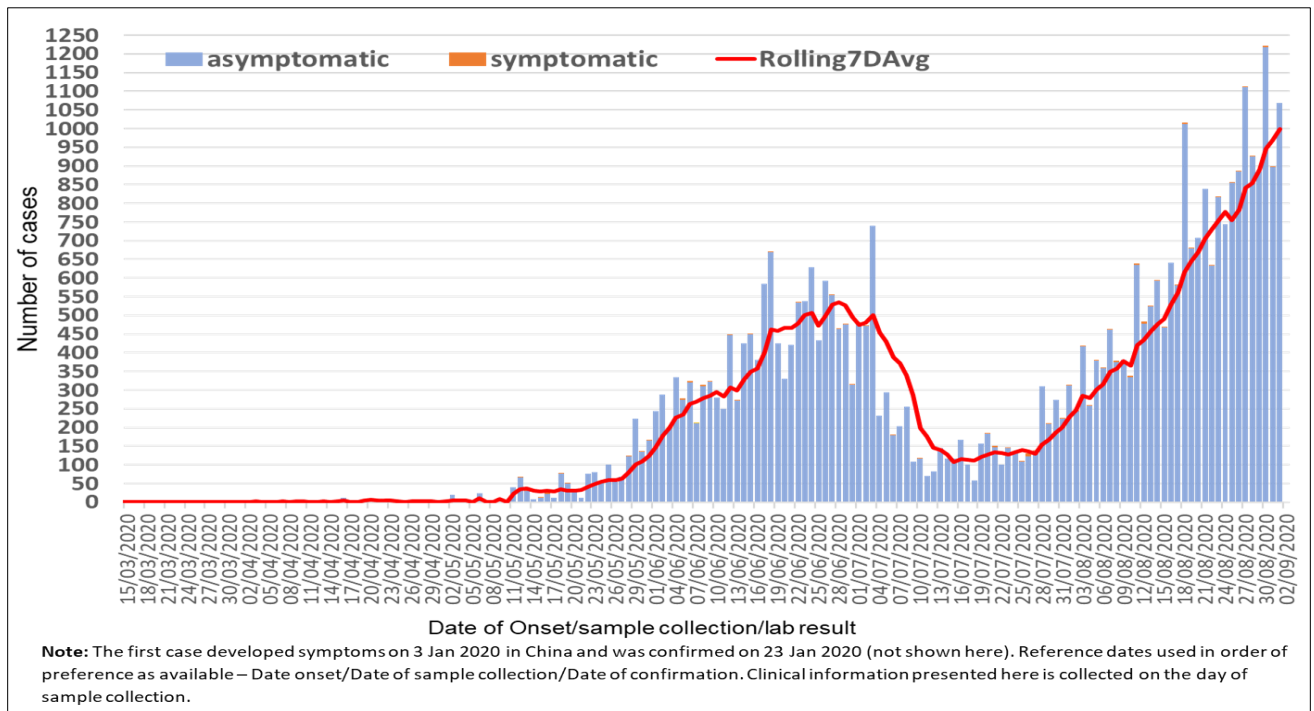
## NEPAL EPIDEMIOLOGICAL SITUATION

- As of **2 September 2020, 07:00 hours, (Week no. 36)**, a total of 40,527 cases were confirmed as COVID-19 through polymerase chain reaction (RT-PCR) test in the country. In the last 14 days, 12,272 cases were reported, which is 30.3 % of total confirmed COVID-19 cases.
- Except in Gandaki province, where transmission is as sporadic cases, the other six provinces, i.e. 1, 2, Bagmati, 5, Karnali and Sudurpaschim, have transmission in clusters of cases.
- Although overall doubling time has increased, indicating a slowing down of transmission, Province-2, Bagmati and Province-5 have shown a significant increase of caseload recently. **65%** (26,161/40,527) of the total cases were reported from these three provinces.
- Overall, the gender distribution remains skewed towards males, who constitute **78% (31,598/40,527)** of the confirmed cases. Amongst the males **89% (27,987/31,598)** are in the economically productive age group (15-54-years). However, this skewed sex and age distribution is changing in some of the provinces, especially in Bagmati where we find an increasing proportion of females getting infected.
- A total of 239 persons have died of COVID-19 and details are available for 238 (176 male and 62 female). All the deaths have occurred between weeks 20 and 36. At least one or more known co-morbid conditions were present in 166 persons (70%). The overall case fatality ratio (CFR) across all ages is less than 1 per cent, and CFR progressively increases beyond 55 years of age (range 3% to 21%).
- 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 beyond 55 years of age in the range of 2% to 7%.
- *Nepal has been able to keep COVID-19 transmission largely to sporadic or clustered cases during the initial phase through quarantine or isolation of returnees. 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 to take maximum advantage of the total and partial local lockdowns, case investigation and contact tracing (CICT) and isolation capacity need to be further increased. This will require the deployment of additional personnel, including filling vacant positions, to support provincial and Palika level surveillance and CICT activities.*
- As of 30 August 2020, a total of **639 cases** of influenza-like illness (ILI) have been tested for COVID-19 and **15 cases** have been tested positive for SARS-CoV-2. All the positive cases are included in COVID-19 database.
- No samples were received for Influenza on week 35 (i.e. 24-30 August 2020)

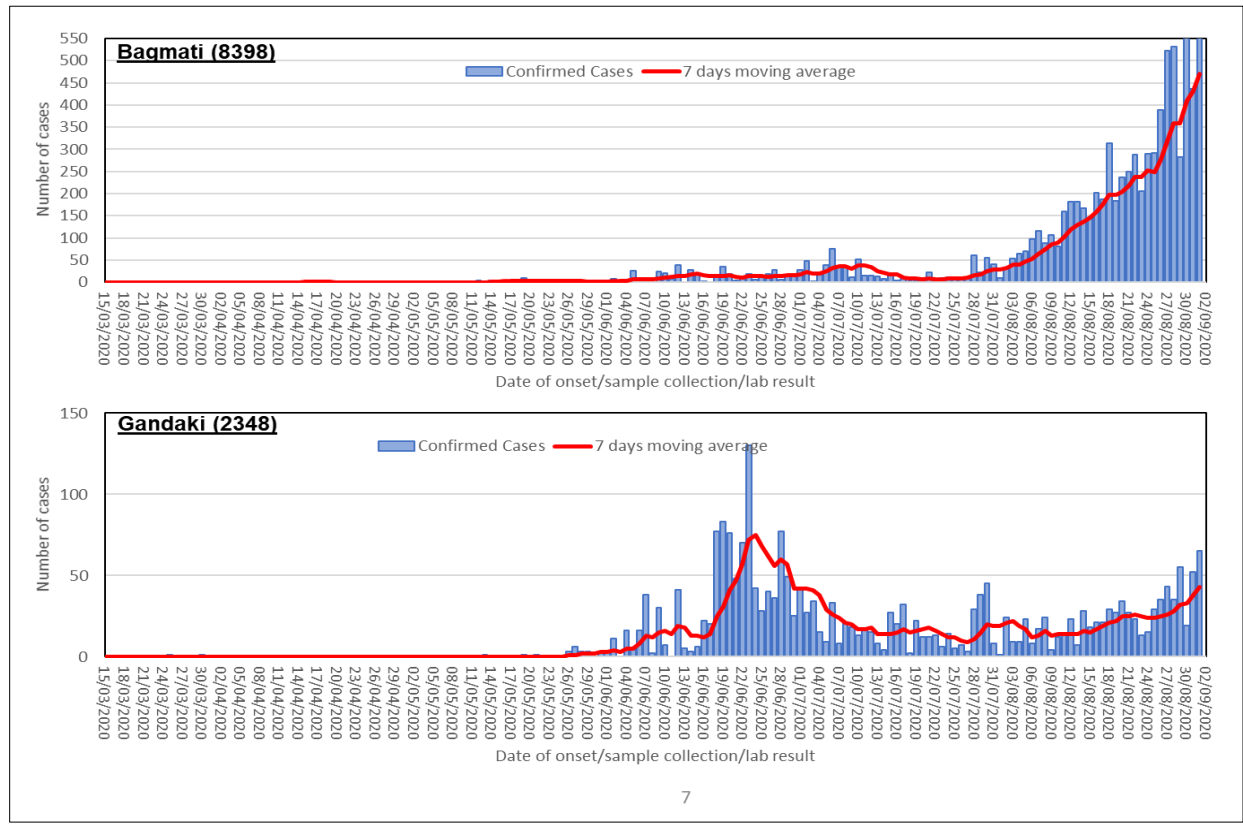
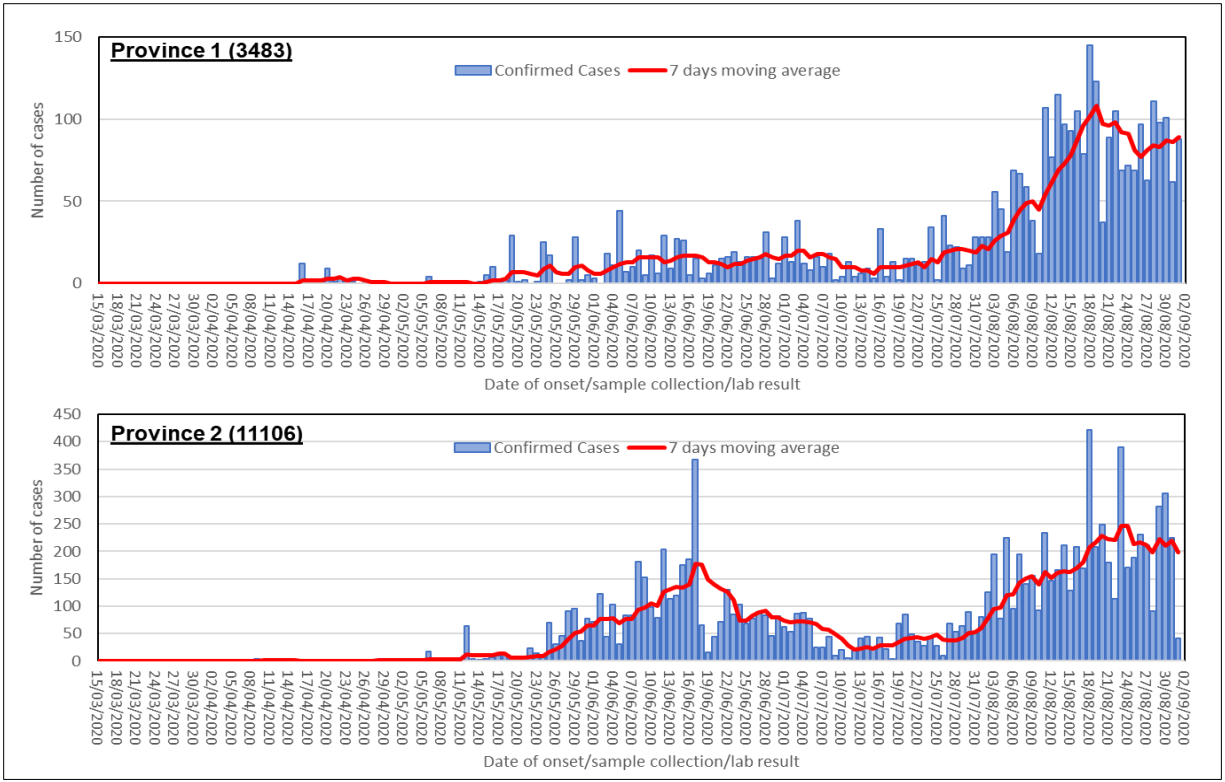
**Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 30 August 2020 from #Global Weekly Epidemiological Update 3) and cumulative incidence rate (per 100,000)**

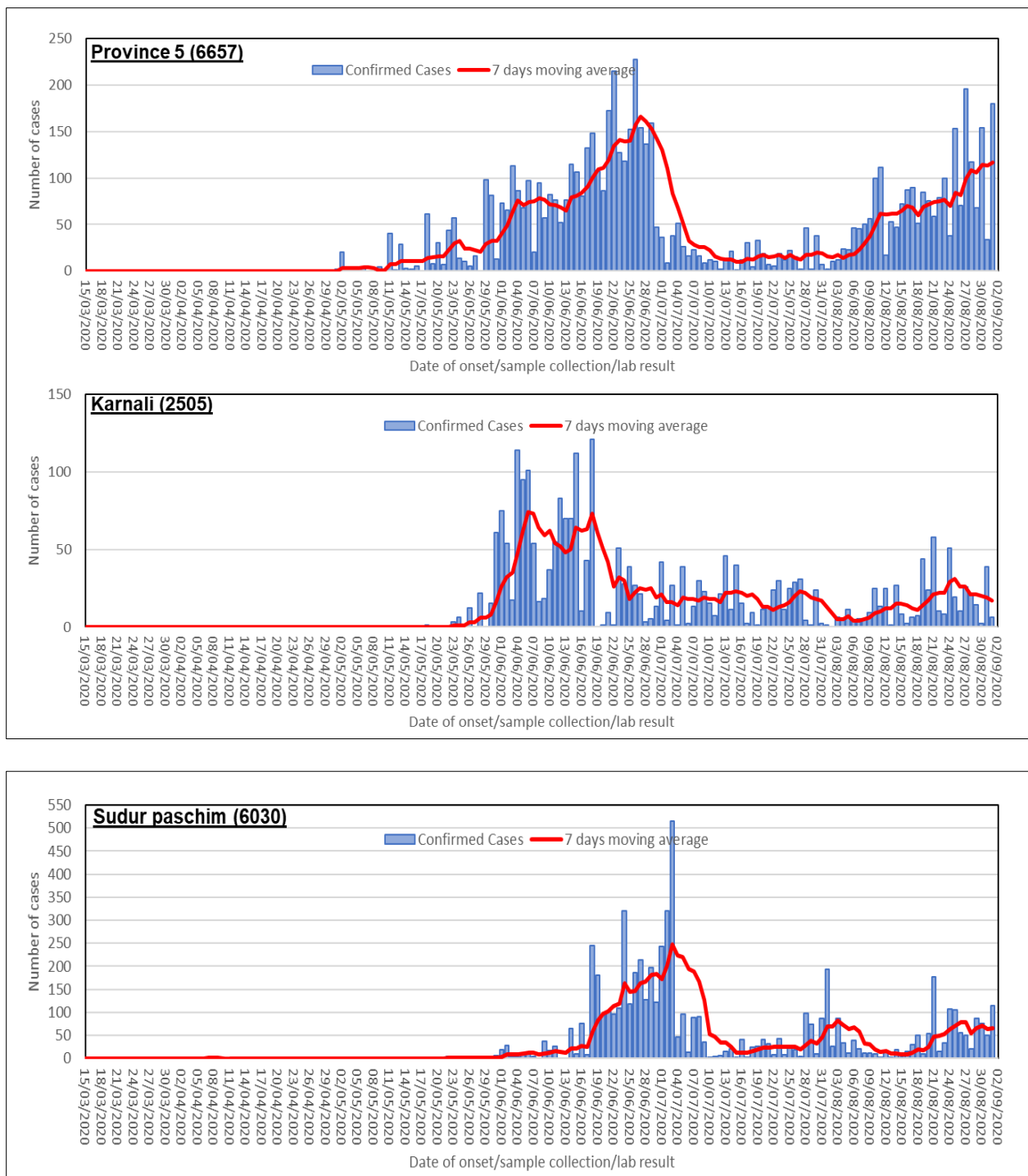


**Figure 2 A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 40,527) (Data updated on 2 September 2020 T0 7:00:00)**



**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 2 September 2020 TO 7:00:00)**

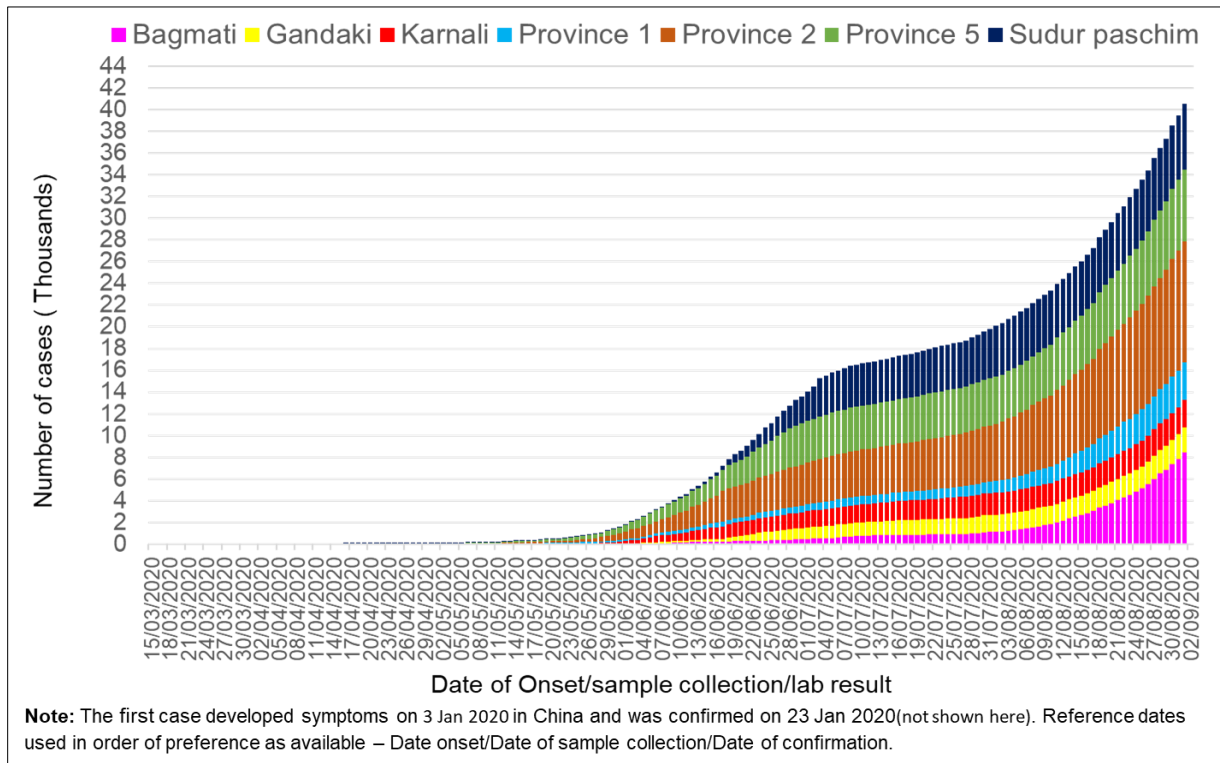




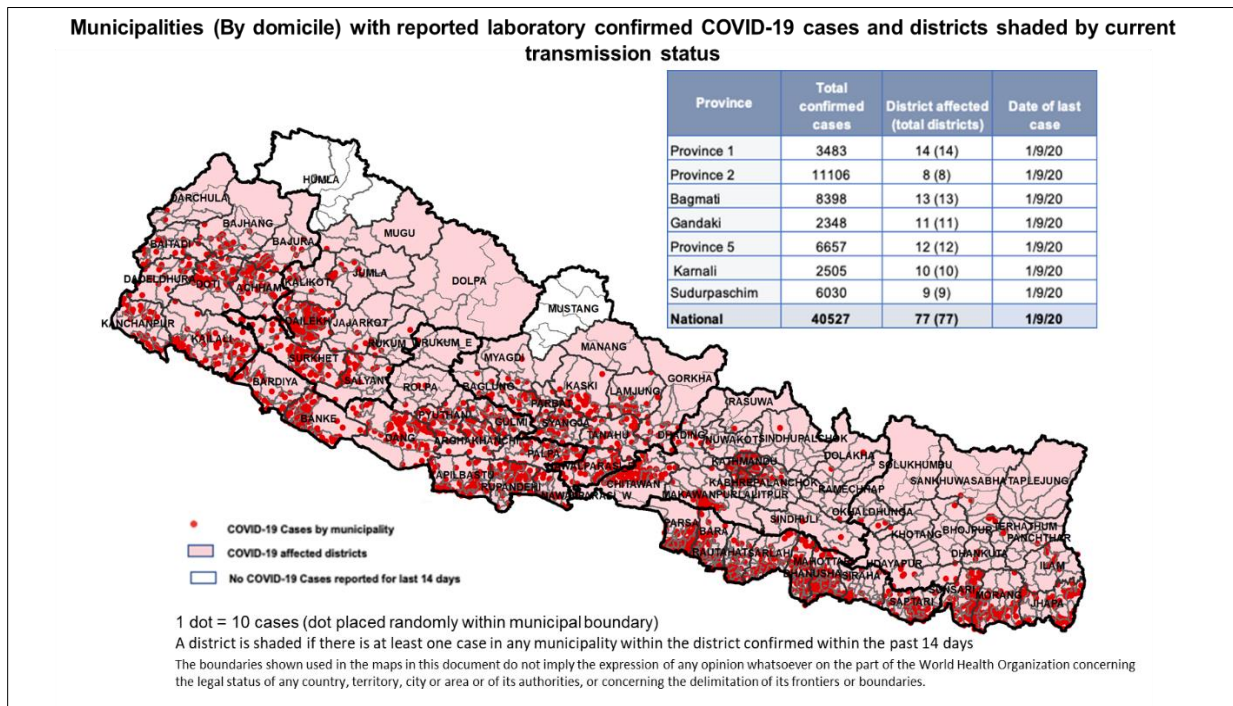
**Note for all the Provinces (Figure 2 B):**

- 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 = 40,527) (Data updated on 02 Sept 2020 TO 7:00:00)**



**Figure 3: Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and districts shaded by current transmission status (N = 40,527) (Data updated on 2 September 2020 TO 7:00:00)**



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

(N = 40,527) (Data updated on 2 September 2020 TO 7:00:00)

Transmission classification based on [WHO definitions](#)

| Reporting Province    | Total confirmed cumulative cases | Total cumulative deaths | Transmission classification* | Districts affected (total districts) | Date of most recent case <sup>#</sup> |
|-----------------------|----------------------------------|-------------------------|------------------------------|--------------------------------------|---------------------------------------|
| Province 1            | 3,483                            | 30                      | Cluster of cases             | 14 (14)                              | 1 September 2020                      |
| Province 2            | 11,106                           | 89                      | Cluster of cases             | 8 (8)                                | 1 September 2020                      |
| Bagmati               | 8,398                            | 61                      | Cluster of cases             | 13 (13)                              | 1 September 2020                      |
| Gandaki               | 2,348                            | 13                      | Sporadic cases               | 11 (11)                              | 1 September 2020                      |
| Province 5            | 6,657                            | 31                      | Cluster of cases             | 12 (12)                              | 1 September 2020                      |
| Karnali               | 2,505                            | 4                       | Cluster of cases             | 10 (10)                              | 1 September 2020                      |
| Sudurpaschhim         | 6,030                            | 9                       | Cluster of cases             | 9 (9)                                | 1 September 2020                      |
| <b>National Total</b> | <b>40,527</b>                    | <b>237<sup>1</sup></b>  | <b>Cluster of cases</b>      | <b>77 (77)</b>                       | <b>1 September 2020</b>               |

1-1 death detail address is under process

<sup>#</sup> 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<sup>#</sup>

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

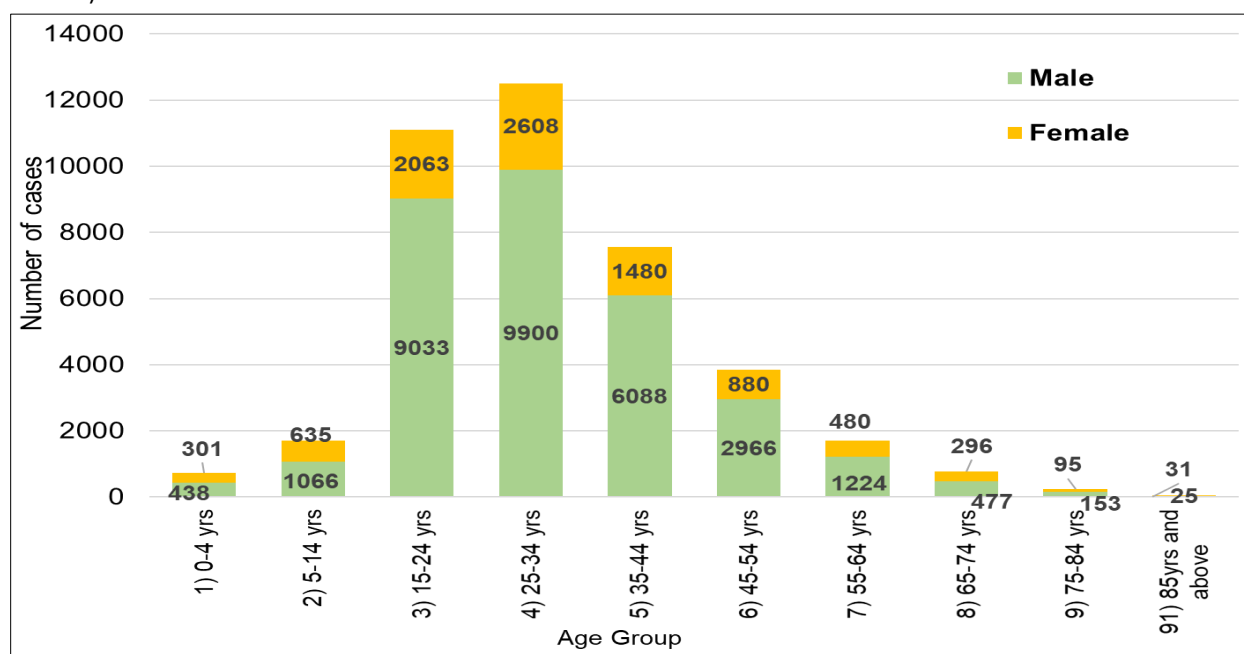
**Community transmission**- experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to: - Large numbers of cases not linkable to transmission chains

- 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 = 40,239)** (Data updated on 02 Sept 2020 TO

7:00:00)



Details for 288 cases are yet to come

**Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths\* in COVID-19 confirmed cases (N = 40,527)** (Data updated on 02 Sept 2020 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         | 739                   | 0            | 2              | 0  | 0.27                                 |
| 5-14 yrs        | 1701                  | 2            | 1              | 3  | 0.18                                 |
| 15-24 yrs       | 11096                 | 3            | 4              | 4  | 0.06                                 |
| 25-34 yrs       | 12508                 | 11           | 5              | 9  | 0.13                                 |
| 35-44 yrs       | 7568                  | 22           | 4              | 9  | 0.34                                 |
| 45-54 yrs       | 3846                  | 37           | 13             | 35                                       | 1.3                                  |
| 55-64 yrs       | 1704                  | 41           | 7              | 36                                       | 2.82                                 |
| 65-74 yrs       | 773                   | 34           | 20             | 47                                       | 6.99                                 |
| 75-84 yrs       | 248                   | 19           | 1              | 16                                       | 8.06                                 |
| 85+ yrs         | 56                    | 7            | 5              | 7  | 21.43                                |
| Unknown         | 288                   | 0            | 0              | 0  | 0                                    |
| <b>National</b> | <b>40527</b>          | <b>176</b>   | <b>62</b>      | <b>166</b>                               | <b>0.59</b>                          |

*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 = 40,527)** (Data updated on 02 Sept 2020 TO 7:00:00)

| Age Group       | Total confirmed cases | Asymptomatic | Symptomatic (n) | Symptomatic (%) |
|-----------------|-----------------------|--------------|-----------------|-----------------|
| 0-4 yrs         | 739                   | 737          | 2               | 0.3             |
| 5-14 yrs        | 1701                  | 1699         | 2               | 0.1             |
| 15-24 yrs       | 11096                 | 11083        | 13              | 0.1             |
| 25-34 yrs       | 12508                 | 12480        | 28              | 0.2             |
| 35-44 yrs       | 7568                  | 7545         | 23              | 0.3             |
| 45-54 yrs       | 3846                  | 3822         | 24              | 0.6             |
| 55-64 yrs       | 1704                  | 1679         | 25              | 1.5             |
| 65-74 yrs       | 773                   | 738          | 35              | 4.5             |
| 75-84 yrs       | 248                   | 240          | 8               | 3.2             |
| 85+ yrs         | 56                    | 52           | 4               | 7.1             |
| Unknown         | 288                   | 288          | 0               | 0.0             |
| <b>National</b> | <b>40527</b>          | <b>40363</b> | <b>164</b>      | <b>0.4</b>      |



## PREPAREDNESS AND RESPONSE

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

- A high-level meeting of the Honorable Minister of Health and Population and the Honorable Ministers of the Ministry of Social Development (MoSD) of all seven provinces, was convened this week to discuss on prevention and containment activities of COVID-19 and effective measures for its control.
- MOHP has decided to conduct the next coordination meeting:
  - Between the Health Minister and the Ministers of MoSDs from all provinces every Wednesday for strengthening health sector response to COVID-19 and monsoon.
  - With media every Friday to share updates and disseminate the Ministry's decisions.
- Additional decisions made by the MoHP are as follows:
  - The cost to the patients of RT-PCR tests in private labs or for non-medically indicated cases has decreased from NPR 5,500 to NPR 4,400 (all costs inclusive). For medically indicated cases and cases identified by contact tracing, tested in government facilities, the test remains free of charge.
  - Quality, Standards and Regulation Division of MoHP to monitor the laboratory quality.
  - Use of hotels as isolation centres has been permitted, with the Department of Health Services (DoHS) to identify and coordinate with the hotels in the Kathmandu valley and the Ministries of Social Development to identify and coordinate with hotels in respective provinces. Hotels to be reimbursed at the rate of NPR 2,000 per case per day for isolation; self-pay for hotel isolation is also allowed. DoHS is preparing the guidelines for hotel isolation.
- MoSDs of the Provinces are to coordinate with all hospitals within their province except medical colleges to manage COVID-19 cases.
- Spinal Injury Rehabilitation Center, Lalitpur and KDC General Hospital, Kathmandu included as isolation centres.
- District Administration Offices (DAO) have extended Prohibitory Order in Kathmandu Valley for another week from Wednesday 2<sup>nd</sup> September midnight to Wednesday 9<sup>th</sup> September 2020 midnight to control the spread of COVID-19. Link [Here](#)

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

- WHO-Nepal has provided **technical assistance to the National Public Health Laboratory (NPHL)** by supporting the following activities:
  - Organizing a virtual meeting on 'Contamination Identification and Troubleshooting in a molecular laboratory'.
  - Submission of the 'Interim report on COVID-19 laboratory quality assessment in Nepal' to NPHL by WHO laboratory team.
  - The samples/specimens of Influenza from the National Public Health Laboratory (NPHL) were sent to National Institute of Infectious Diseases (NIID) Influenza Virus Research Center of Tokyo for Genome analysis on *28 August 2020*.

- A total of 48 Family tents, of 24 Square meters from the WHO preparedness stock, were delivered to Ministry of Home Affairs (MoHA) on *26 August 2020*, to support the families affected by landslide as this was requested by MOHA.
- WCO Nepal, presented a session on **COVID-19 Waste management during home isolation**, via Webinar (Link [Here](#)) organized by GUTHI, NGO on *24 August 2020*. The program was chaired by Municipality Association of Nepal (MUAN) and co-chaired by Chief, Environmental Health and Health Care Waste Management Section, Management Division of MoHP. A total of 140 participants attended this webinar.
- WHO Media monitoring product continued to be shared every day with MoHP spokesperson and HEOC officials.
- Dissemination of WHO explainer videos on contact tracing and the videos with WHO Representative on counteracting rumours, misinformation and concerns, were shared through the following channels:
  - [MoHP COVID-19 portal](#)
  - [MoHP Mobile App- Hamro Swasthya](#)
  - [Online specialized health platform- Swasthya Khabar](#)
  - UN Communications Group
  - UN Risk Communication and Community Engagement Group
  - National media outlets
  - External Development Partners
  - Partner health institutions/organizations/hospitals
- Video shooting has been ongoing with the WHO Representative and MoHP officials on rumours, misinformation and concerns in English and Nepali language respectively.



Explainer Video in Nepali in the making, addressing the concern - **Can COVID-19 be transmitted from running water?** with a MoHP official at UN premises. *(Photo Credit- WHO Nepal/S. Thapaliya)*

- Continued sharing of the summary of WHO guidance documents which are contextualized and translated into Nepali, to Health Secretary by the WHO Representative.
- Interviews of Dr. Jos Vandelaer, WHO Representative, published last week are as below:

| SN | TITLE (NEPALI)  | URL                  | PUBLICATION                   | DATE      | LANGUAGE          | REMARKS   |
|----|---|----------------------|-------------------------------|-----------|-------------------|---|
| 1. | Dr Jos Vandelaer's 2nd Interview at MoHP Press Briefing | <a href="#">Link</a> | Shared via MoHP Facebook Page | 26 August | Nepali Voice-over | Dr. Jos Vandelaer Interview at MoHP Press Brief       |
| 2. | WHO predicts a surge in coronavirus deaths              | <a href="#">Link</a> | The Himalayan Times           | 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 this week, are as following:
  - Prepared technical report for maintenance of 31 Oxygen concentrators as received by WHO country office from WHO HQ before handover to the MoHP.
  - Work in progress on the national level forecasting and quantification of COVID-19 commodities in need for the next four months' period, in participation and collaboration with the Management Division of DoHS/MoHP.

#### What are the health cluster partners doing?

- With most of the HEOC staff in quarantine and isolation, WHO has facilitated the MOHP to continue the virtual health cluster coordination (HCC) meeting from an alternate location.
- Regular health sector coordination for COVID-19 and monsoon response are ongoing at the Federal level, and weekly health sector coordination meetings are continuing, which is assisting in harmonizing the response to COVID-19 pandemic at all levels.
- Health partners, including the Reproductive Health sub-cluster and the mental health sub-cluster continued supporting the COVID-19 response and non-COVID response throughout the country to ensure continuity of services in the context of COVID-19 epidemic.

**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](#)

## CONTACT DETAILS

### **WHO Representative**

Dr Jos Vandelaer  
 WHO Representative to the Federal  
 Democratic Republic of Nepal  
 WHO County Office for Nepal  
 Email: [vandelaerjo@who.int](mailto:vandelaerjo@who.int)

### **Health Cluster Co-lead**

Dr Lungten Z. Wangchuk  
 Scientist; Team Lead - CDS  
 WHO Country Office for Nepal  
 Email: [wangchukl@who.int](mailto:wangchukl@who.int)

### **WHO Incident Manager**

Dr Reuben Samuel  
 Team Leader - WHO Health Emergencies  
 Programme (WHE)  
 WHO Country Office for Nepal  
 Email: [samuelr@who.int](mailto:samuelr@who.int)

### **Communication/Media Focal Point**

Mr Sujan G. Amatya  
 Communications Officer  
 WHO Country Office for Nepal  
 Email: [samatya@who.int](mailto:samatya@who.int)