

Situation Update #30 - Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Wednesday 11 November 2020

HIGHLIGHTS

- Hotspots of cases are continuing in the Kathmandu Metropolitan Area, with additional cases found throughout wards and palikas of Kathmandu valley which accounted for over 50% of cases this week.
- Presently, about 30,000 active cases are in home isolation.
- Among critical cases nationally, 404 patients are in intensive care (ICU) with 96 on ventilator support.
- With the addition of a new testing site this week, the Ministry of Health & Population (MoHP) has approved the establishment of 74 RT-PCR testing facilities. Among these facilities, approximately a third are from the private sector. On average 13,000 tests are conducted nationally every day.
- The three re-structured response pillars of the MoHP Incident Command System (ICS) have held extensive internal deliberations and discussion with experts and the Incident Management System of the WHO Country Office to take stock of the situation, outline new strategies, frame action plans and implement interventions in collaboration with the provincial and municipal governments and partners aimed at reduction of severe illness & prevention of deaths from COVID-19 and containment of the transmission of SARS COV-2.

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 11 November 2020, T07:00:00 hours (Week no. 46), a total 199,759 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR). Case have been reported from all 7 provinces and 77 districts at some point in time since the start of the COVID-19 epidemic in Nepal.
- In the last 14 days, 39,360 cases were reported which constitutes 19.7 % of total confirmed cases. Out of 77 districts, only one district i.e. Manang (Gandaki province) did not report any cases in the last 14 days.
- All 7 provinces in the country now have transmission as clusters of cases. After a dip in reporting during the Dashain festival in week 44, cases have again risen to pre-festival levels.

SITUATION OVERVIEW

NEPAL

(Data as of 11 November 2020, 07:00:00 hours)

1,99,759 confirmed cases

1148 deaths

15,64,214 RT-PCR tests (As of 10 November 2020)

SOUTH-EAST ASIA REGION

(Data as of 10am CEST 8 November 2020)

96,41,945 confirmed cases

1,49,326 deaths

GLOBAL

(Data as of 10am CEST 8 November 2020)

46,840,783 confirmed cases

1,204,028 deaths

- A total of 76.5% (152,884/199,759) of 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 a substantially high case load with 45.8% of national total (91,572/199,759), and 85% of the provincial total (91,572/107,787).
- Overall, the gender distribution remains skewed towards males, who constitute 66.5% (132,837/199,759) of the confirmed cases. Amongst the males, 83.2% (110,468/132,837) are in the economically productive age group (15-54 years). However, this skewness is changing in some of the provinces, especially in Bagmati Province where a relatively high proportion of females are infected (38.6% of total cases in the province). Nationally, in the last week, the female proportion in total cases increased by nearly one percentage point.
- As of date, a total 1,148 deaths have been reported. Out of 1,148 deaths, 806 (70.2 %) were males and 342 (29.8%) were females. Amongst the deaths, 759 persons (66.1%) had at least one known co-morbid conditions. All deaths occurred in the country between weeks 20 and 46. Although the overall case fatality ratio (CFR) across all ages is less than 1 per cent, it progressively increases with age beyond 65 years of age, ranging from 3.6% to 9.9%.
- 27 samples were received by the **National Influenza Center in the National Public Health Laboratory (NPHL)** for Influenza testing in the Epidemiological week 45 (2nd to 8th Nov, 2020). From January until 8th November, 2020, a total of 807 samples have been tested for Influenza and SARS-CoV-2. Twenty samples have tested positive for SARS-CoV-2 (all these positive cases are included in COVID-19 database) till date. ILI/SARI data and Influenza laboratory results are regularly updated in the WHO FLUID and FLUNET platforms.

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 8 November 2020 from #Global Weekly Epidemiological Update 13) and cumulative incidence rate (per 100,000)

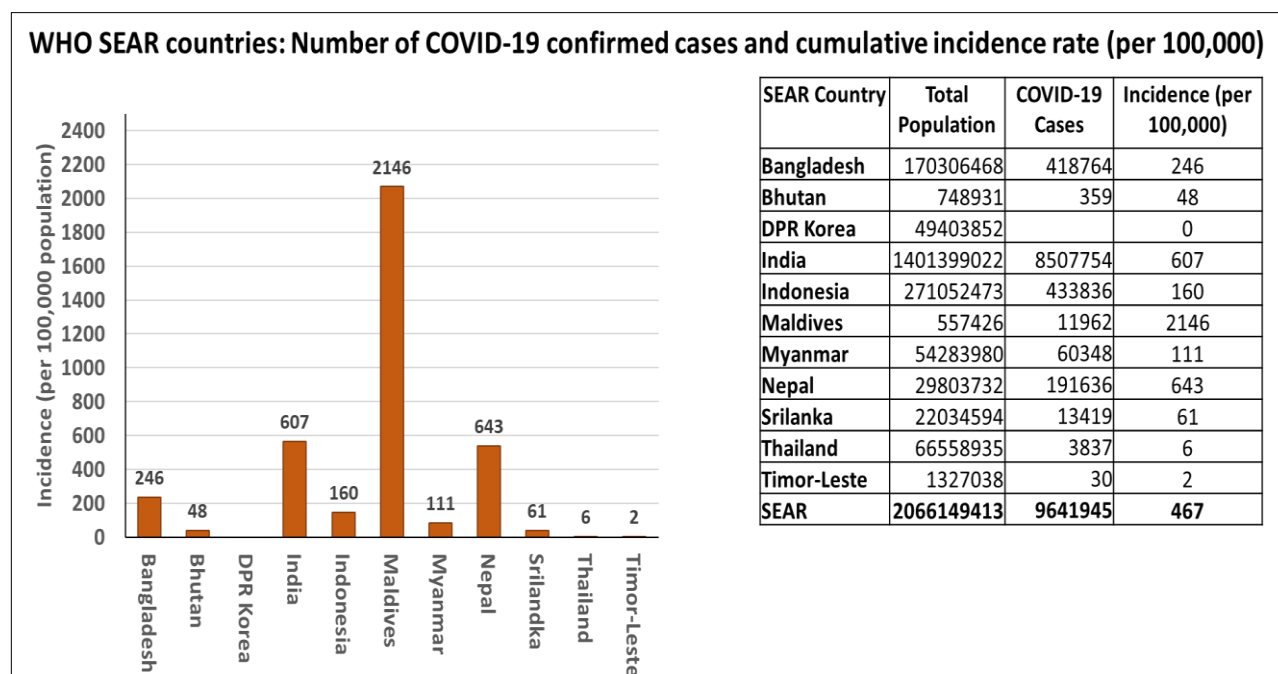


Figure 2 A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 199759) (Data updated on 11 November 2020 T07:00:00)

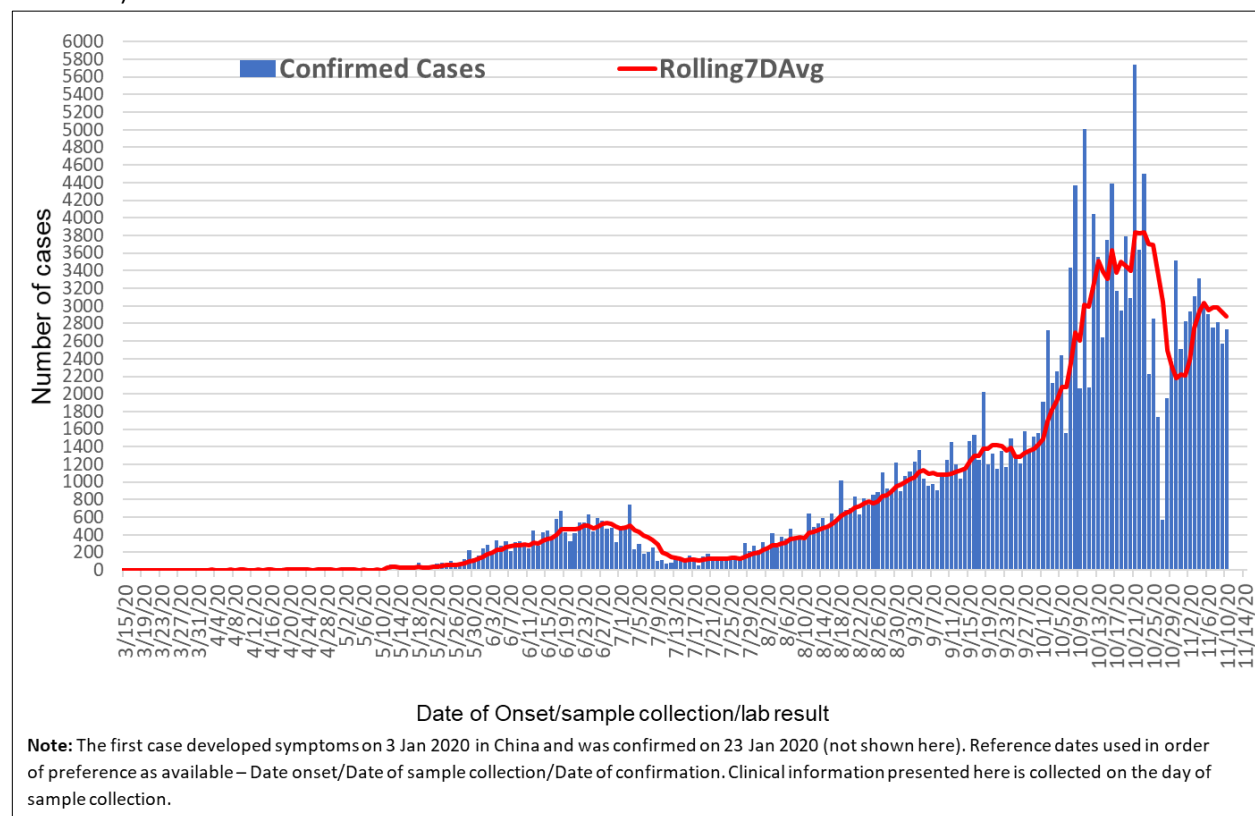
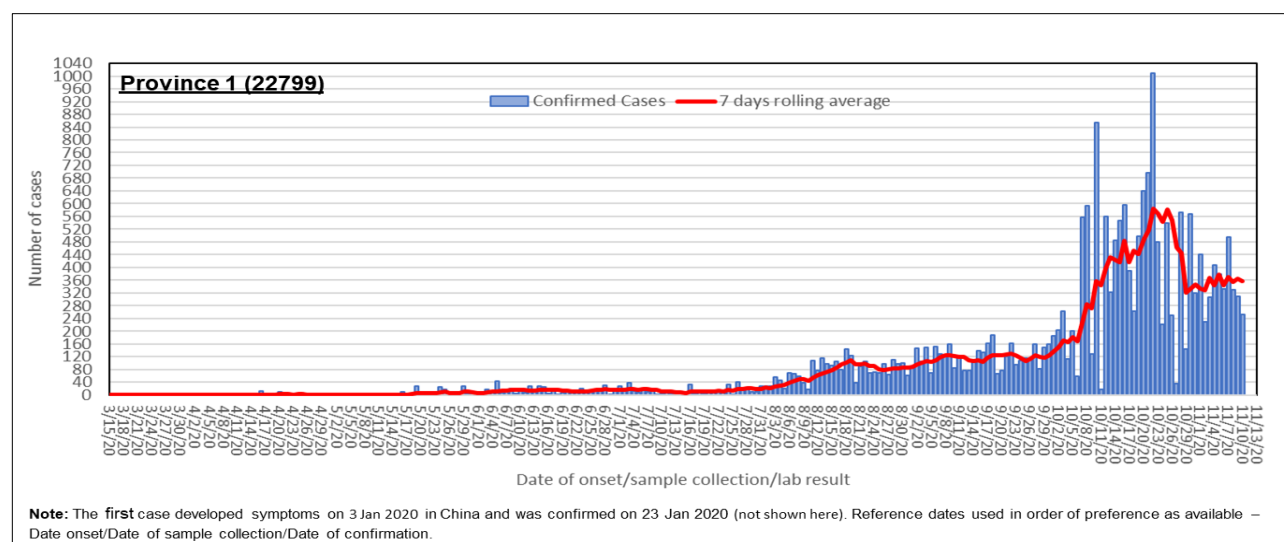
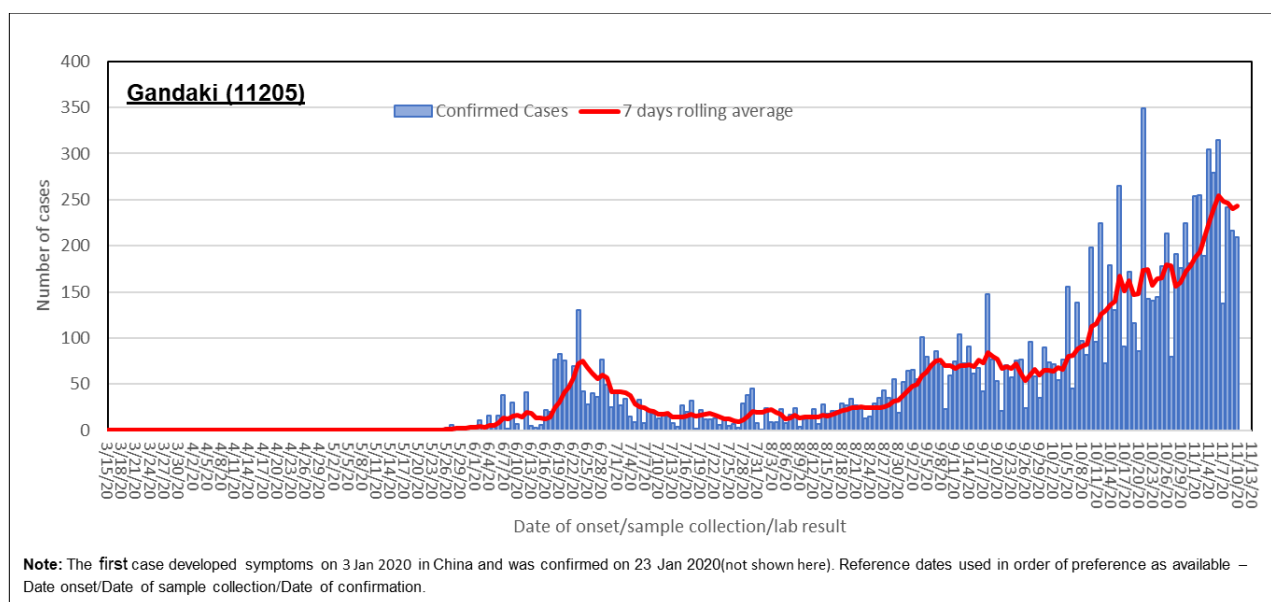
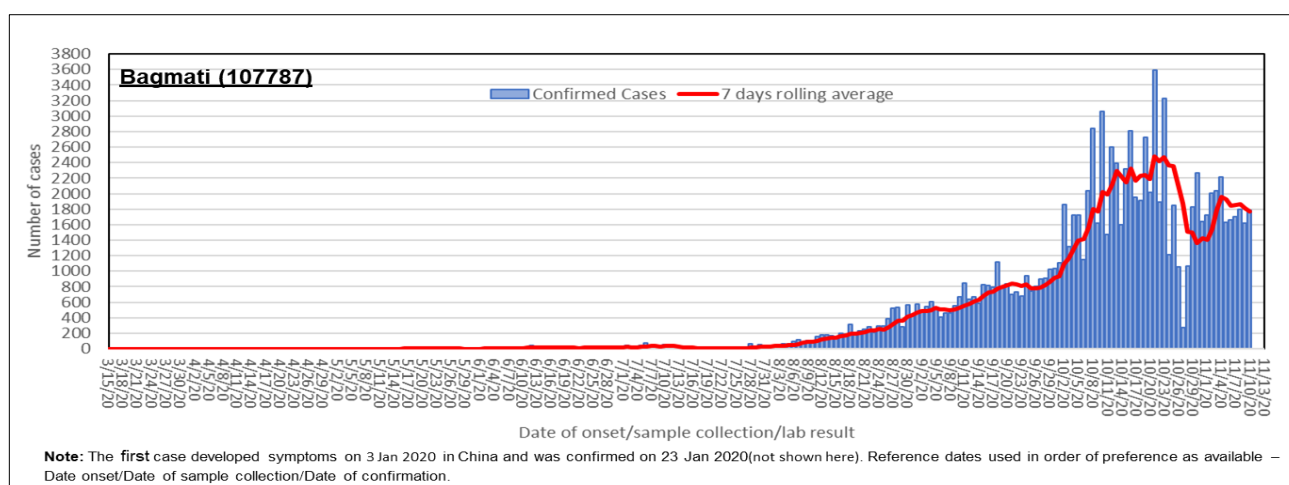
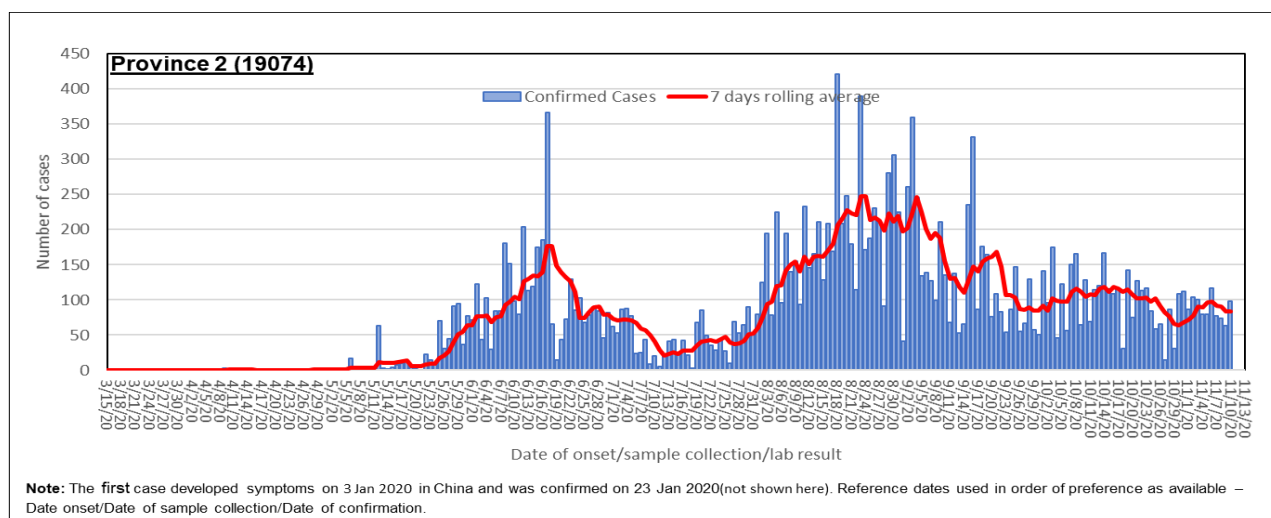


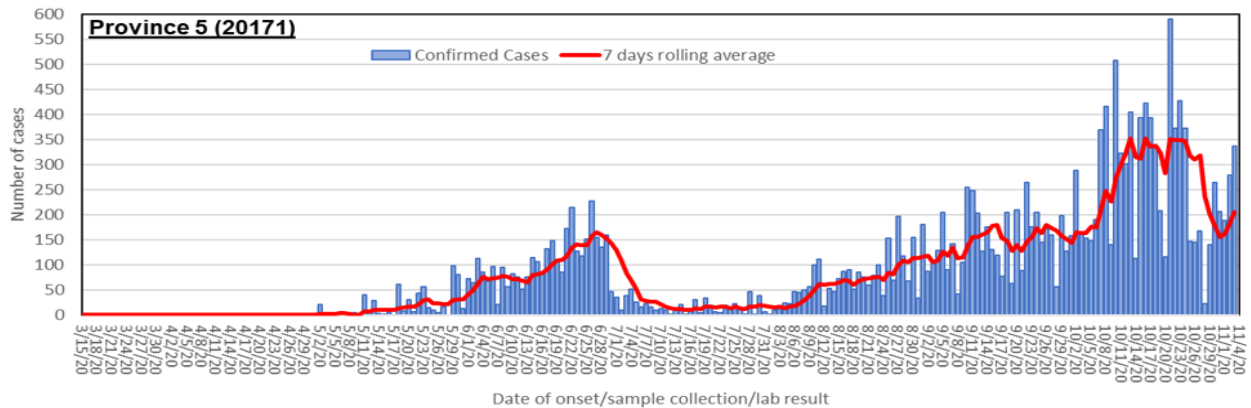
Figure 2B: Lab confirmed COVID-19 cases and a 7-day rolling average of cases by date of onset/sample/confirmation by Provinces (N = 199759) (Data updated on 11 November 2020 T07:00:00)

Note for all the Provinces (Figure 2 B):

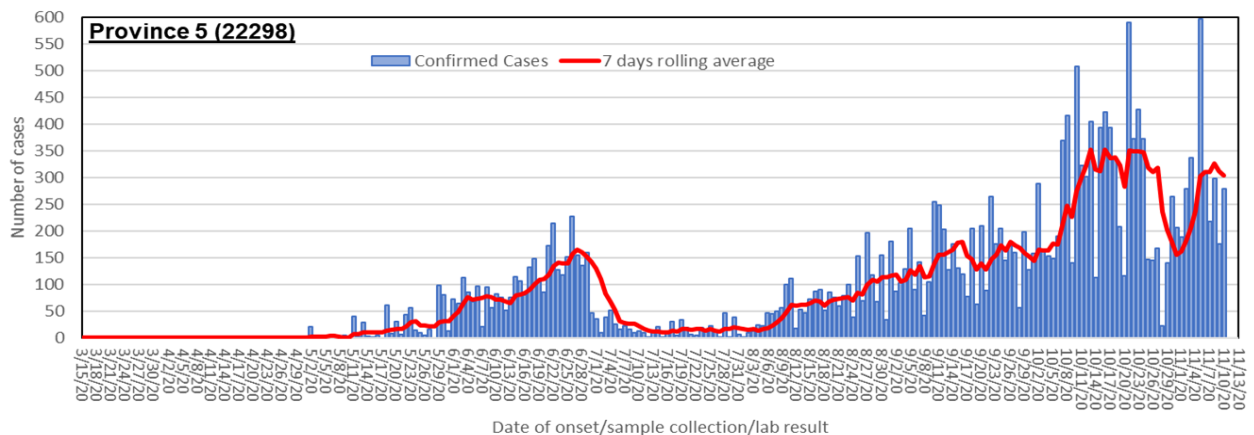
- Y-axis scale varies between Provinces.



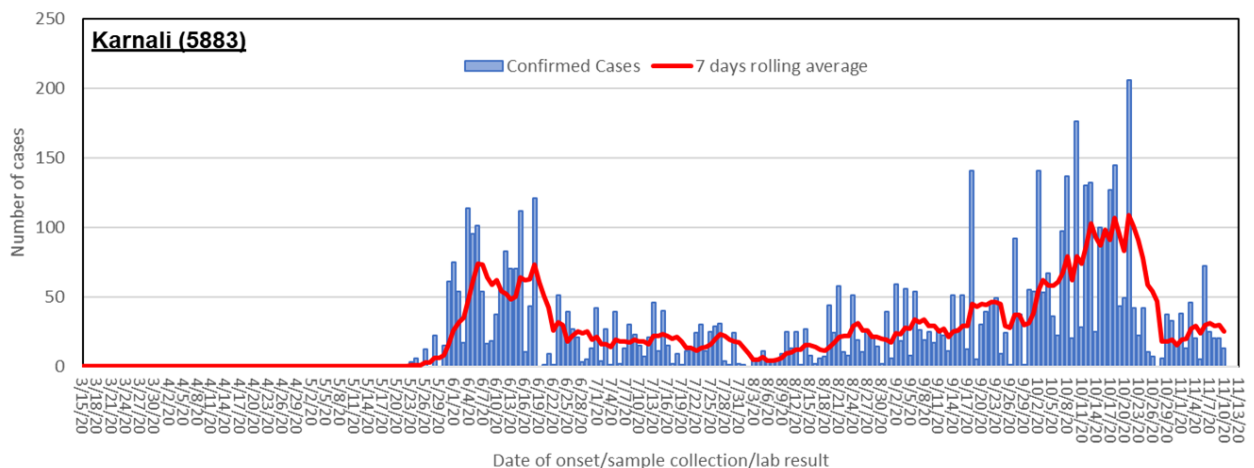




Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020(not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.



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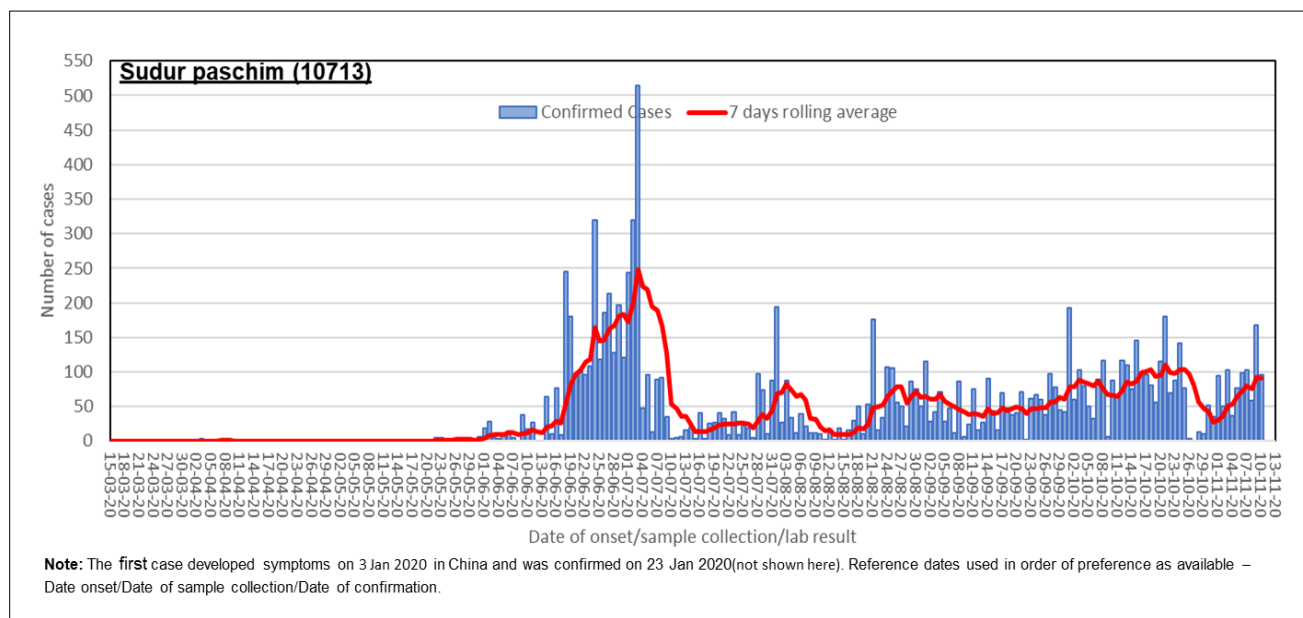


Figure 2C: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 199759) (Data updated on 11 November 2020 T07:00:00)

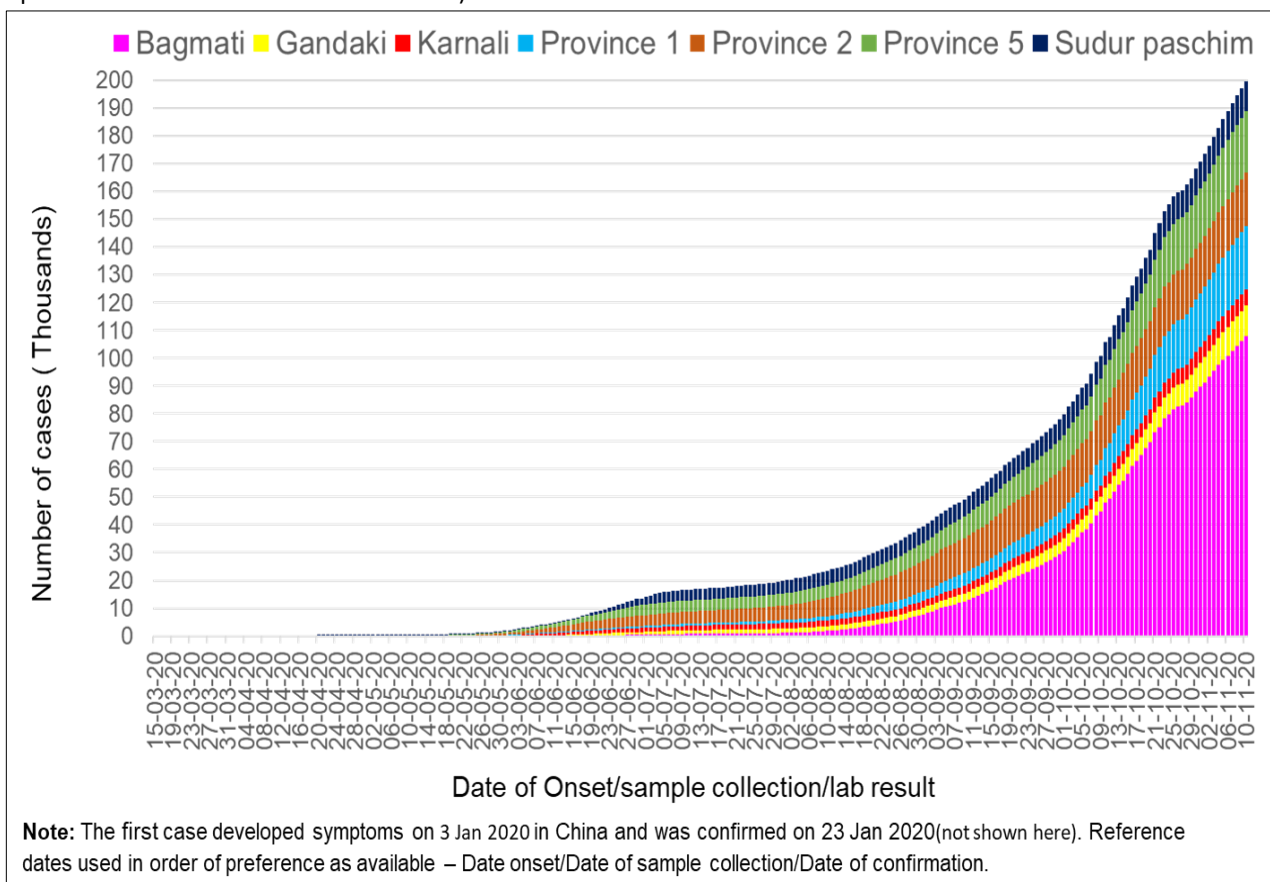


Figure 3: Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 199759) (Data updated on 11 November 2020 T07:00:00)

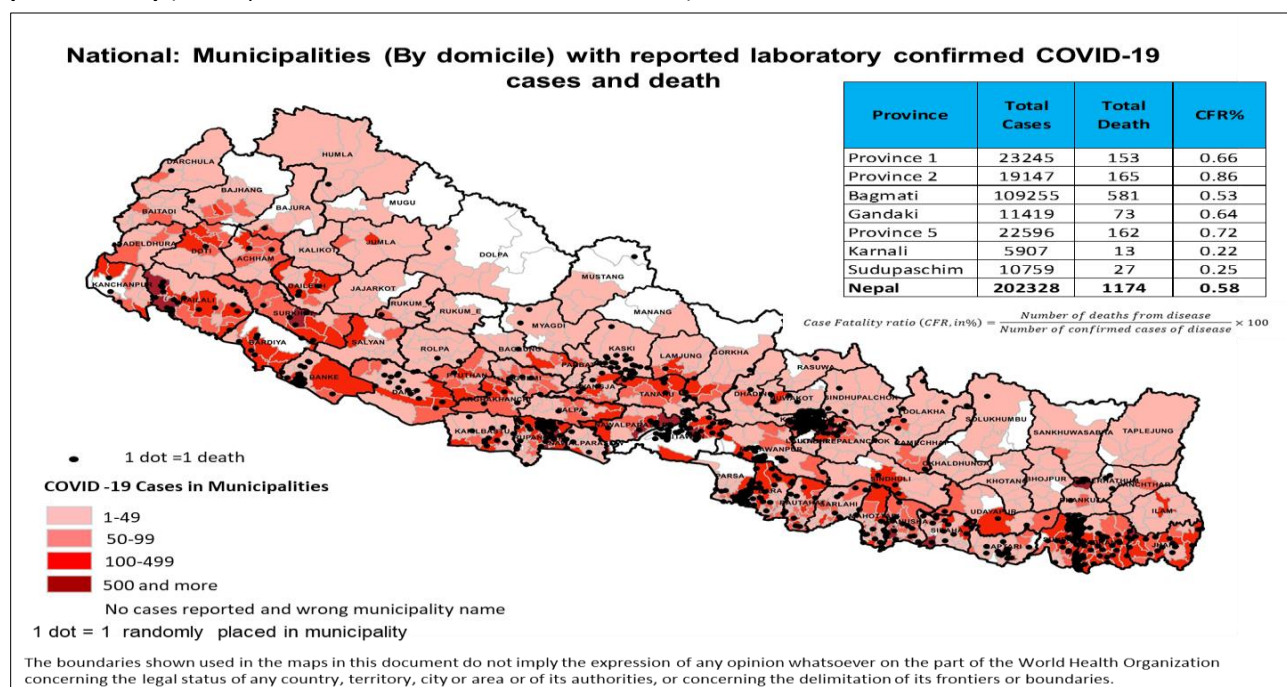


Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces. (N = 199759) (Data updated on 11 November 2020 T07:00:00)

Transmission classification based on [WHO definitions](#)

Reporting Province	Total confirmed cumulative cases	% of the total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Districts affected (total districts)	Date of most recent case [#]
Province 1	22799	11.4	151	Cluster of cases	14 (14)	10 November 2020
Province 2	19074	9.5	164	Cluster of cases	8 (8)	10 November 2020
Bagmati	107787	54.0	565	Cluster of cases	13 (13)	10 November 2020
Gandaki	11205	5.6	73	Cluster of cases	11 (11)	10 November 2020
Province 5	22298	11.2	157	Cluster of cases	12 (12)	10 November 2020
Karnali	5883	2.9	12	Cluster of cases	10 (10)	10 November 2020
Sudurpaschhim	10713	5.4	26	Cluster of cases	9 (9)	10 November 2020
National Total	179613	100	1148	Cluster of cases	77 (77)	10 November 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[#]

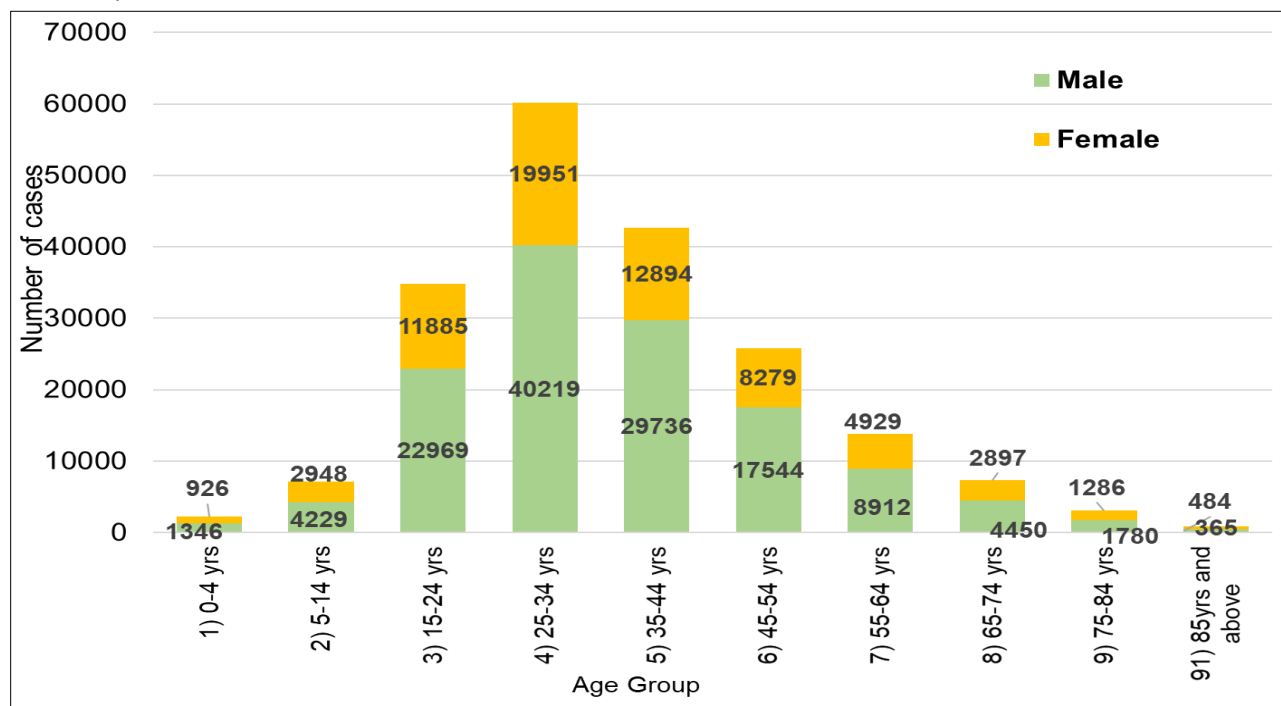
Cluster of cases - provinces experiencing cases, clustered in time, geographic location and by common exposures

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 = 198029) (Data updated on 11 November 2020 T07:00:00)



Core epidemiological variables under process for 1730 cases.

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases (N = 199759) (Data updated on 11 November 2020 T07:00:00)

Age Group	Total confirmed cases	Death (male)	Death (female)	Deaths with any known comorbid condition	Age specific case fatality ratio (%)
0-4 yrs	2272	2	4	2	0.26
5-14 yrs	7177	3	2	5	0.07
15-24 yrs	34854	15	17	21	0.09
25-34 yrs	60170	40	18	28	0.1
35-44 yrs	42630	74	35	57	0.26
45-54 yrs	25823	122	48	102	0.66
55-64 yrs	13841	166	64	155	1.66
65-74 yrs	7347	187	78	196	3.61
75-84 yrs	3066	130	57	137	6.1
85+ yrs	849	65	19	55	9.89
Unknown	1730	2	0	1	0.12
National	199759	806	342	759	0.57

$$\text{Case Fatality ratio (CFR, in\%)} = \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \times 100$$
 COVID-19 positive lab result is temporally associated with death; causal association under investigation.

PREPAREDNESS AND RESPONSE

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

- Government reversed its recent decision and has now decided to again provide free treatment and testing through public hospitals and laboratories respectively. And those who can afford to pay can also avail of services at a charge from private hospitals and laboratories.
- The Ministry has adopted a policy to use antigen-based testing for community or public health interventions and PCR testing for symptomatic cases.
- Surveillance, Case Investigation & Contact Tracing (CICT) and Testing pillar of the MoHP-ICS has been revitalizing CICT starting from Kathmandu valley, which will be further expanded to high-burden areas gradually. Moreover, the team has developed a strategy to mobilize Tole (a sub-division of a municipal ward consisting of about 50 households) Facilitators Team (TFT) in all wards of municipalities as a part of community engagement in responding COVID-19. The concept has been discussed with more than 10 municipalities (Mayor, Deputy Mayor and ward chairs) and has received enthusiastic attention and willingness. Active surveillance to detect cases and their close contacts, follow-up of home isolated cases through a dedicated call centers in each of the three districts of the Kathmandu valley would be undertaken soon.
- The MoHP-ICS Case Management pillar has completed one round of monitoring of hospitals in Kathmandu valley and found that 1,628 beds, 279 Intensive Care Units (ICU), 122 High Dependency Units (HDUs) and 147 Ventilators were dedicated for COVID-19 cases. Among them 40% beds and 25% ICUs were unoccupied and available for use of new patients.
- The MoHP-ICS Information & Logistics Management and Communication pillar has ramped up the identification of dedicated focal points for the management of the HEOC Information Management Unit software at all levels – administrative and institutional and has undertaken extensive training of the focal points on the use of this software designed for comprehensive management of COVID-19 related information. The commodities required to manage the cases projections as per the current Rapid Action Plan (Nov 2020 – Feb 2021) of the MoHP are in the process of expedited procurement. Sensitization to enable the provincial parliamentarians and the elected leaders of the municipalities to communicate effectively on COVID-19 is also being implemented. Sensitization training of parliamentarians at four provinces has been completed and the remaining three provinces as well as the national parliament would be completed after the Tihar holidays.
- A total of **15,64,214** RT-PCR tests have been performed nationwide by **74** designated COVID-19 labs functional across the nation (*as of 10th Nov 2020*). The latest additions to the designated COVID-19 labs this week are as listed below:
 1. Modern Diagnostic Center Nepal Pvt. Ltd, Kathmandu, Bagmati Province
 2. Manmohan Memorial Teaching Hospital, Kathmandu, Bagmati Province
 3. Kantipur Molecular and Genetic COVID-19 Laboratory, Kathmandu, Bagmati Province
 4. B-sure Path Lab and Diagnostic Center, Biratnagar
 5. Alka Hospital, Lalitpur, Bagmati Province

What is the WHO Country Office for Nepal doing?

- The sero-surveillance study samples reception at NPHL is now complete. The testing of the samples is now underway using the SARS-CoV-2 total antibody ELISA (Beijing Wantai Biological) kit supplied free of cost by WHO.
 - WHO-Nepal is supporting NPHL for completing this study through additional staff (lab technologist, lab technician, data/admin assistant); technical support to NPHL for SARS-CoV-2 serological testing quality assurance and data analysis.
- WHO Nepal has provided technical assistance through WHO consultants to NPHL for:
 - Validation of newly established designated COVID-19 laboratories. **Kantipur Hospital Private Ltd** and **Siddhi Poly Path Lab** underwent validation this week and passed the process. The laboratories shared their 10 positive and 10 negative samples which were validated at NPHL. WHO consultants supported in the validation process, report preparation and dissemination.
 - Standardization of Respiratory Syncytial Virus (RSV) real time PCR at NPHL.
- Technical support from WHO Nepal has been provided for the following activities:
 - National Health Training Center (NHTC) for implementation of a 3 days training program (4-6 November) for creating a pool of trainers with focus on Infection Prevention and Control (IPC) & Critical Care Management. A total of 16 professionals from Province 1, Province 2, Bagmati, Province 5 and Sudurpaschim province were trained.



Training program for creating a pool of trainers conducted at NHTC (4-6 November, 2020)

Picture Credits: Dr Shital / WHO Nepal

- A 3 days training program on IPC & Critical Care Management being held at Janakpur, Province 2 from 10-12 November 2020 is being supported.
- After rapid IPC assessment of the MoHP-ICS pillars “war room” at MoHP, blue prints and advice on IPC measures to be implemented have been shared to MoHP.
- The Nursing & Social Security Division (NSSD) was supported to develop a concept note for the development of a comprehensive multisectoral IPC manual that was submitted to the Director General, Department of Health Services for approval.
- WHO Nepal has provided support for assessment of the temporary Health Desk at the Point of Entry at the Tribhuvan International Airport (TIA) along with the screening point

at the Domestic Airport as requested by Epidemiology and Disease Control Division (EDCD). Quotations for these requests are ongoing.

- WHO Media monitoring output shared every day with **MoHP spokesperson, HEOC officials**, as well as **EDPs and other partners**.
- WHO Nepal in close coordination with MoHP is supporting pan-Nepal Parliamentarians orientation on Risk Communication and Community Engagement (RCCE) for COVID-19 throughout all provinces. To date, the program has been conducted in Province 2, Gandaki Province, Karnali Province and Sudurpaschim Provinces with more than 50% participation in each province. About 200+ Video Message clips on COVID-19 by multiple representatives (Health Director, Province Speaker) were recorded.



Pan-Nepal briefing of Parliamentarians on the importance of Risk Communication and COVID-19 at Gandaki Province (5 November); Left - Dr Sunoor Verma from WHO Nepal leading a session on RCCE on COVID-19. (Picture Credit- Mr Ajay Maharjan/ WHO Nepal)



Pan-Nepal briefing of Parliamentarians on the importance of Risk Communication and COVID-19 at Karnali Province (8 November); Left - Dr Dipendra Gautam from WHO Nepal leading a session on the Science behind COVID-19. (Picture Credit- Mr Ajay Maharjan/ WHO Nepal)



Pan-Nepal briefing of Parliamentarians on the importance of Risk Communication and COVID-19 at Sudurpaschim Province (10 November); Left - Dr Dipendra Gautam from WHO Nepal leading a session on Science behind COVID-19; Right - Honorable Chairman of National Assembly, Mr Ganesh Prasad Timilsina with opening remarks during the event. Picture Credit- Mr Ajay Maharjan/ WHO Nepal

- The news of “Pan-Nepal Series on the strategic role of parliamentarians on Risk Communication and Community Engagement in the context of COVID-19” was featured in the following publications:

SN	TITLE	URL	PUBLICATION	DATE	LANGUAGE
1	जनता सबै कुरा जान्दछन् : कोरोनाबारे सही सूचनामात्रै प्रवाह गरौं	Link	Hamro Patro	5-Nov	Nepali
2	‘जनप्रतिनिधिको भूमिका महत्त्वपूर्ण’	Link	Gorkhapatra	6-Nov	Nepali
3	कोभिड-१९ बाट सुरक्षित रहेर जीवनपद्धति चलाउनुको विकल्प छैन: राष्ट्रिय सभा अध्यक्ष तिमिल्सिना	Link	Farak Dhar	8-Nov	Nepali
4	जनप्रतिनिधिले जनतामा सही सन्देश प्रवाह गर्नुपर्छ : अध्यक्ष तिमिल्सिना	Link	Gorkhapatra	8-Nov	Nepali
5	‘जनप्रतिनिधिले जनतामा सही सन्देश प्रवाह गर्नु पर्छ’ : अध्यक्ष तिमिल्सिना	Link	Kendra Bindu	8-Nov	Nepali
6	कोभिड-१९ बाट सुरक्षित रहेर जीवनपद्धति चलाउनुको विकल्प छैन: राष्ट्रिय सभा अध्यक्ष तिमिल्सिना	Link	Kha.bar	8-Nov	Nepali

SN	TITLE	URL	PUBLICATION	DATE	LANGUAGE
7	कोभिड-१९ बाट सुरक्षित रहेर जीवनपद्धति चलाउनुको विकल्प छैन: राष्ट्रिय सभा अध्यक्ष तिमिल्सिना	Link	Khabar Network	8-Nov	Nepali
8	जनप्रतिनिधिले जनतामा सही सन्देश प्रवाह गर्नुपर्छ : अध्यक्ष तिमिल्सिना	Link	NepalJapan.com	8-Nov	Nepali
9	जनप्रतिनिधिले जनतामा सही सन्देश प्रवाह गर्नुपर्छ : अध्यक्ष तिमिल्सिना	Link	Prasashan	8-Nov	Nepali
10	जनप्रतिनिधिले जनतामा सही सन्देश प्रवाह गर्नुपर्छ : अध्यक्ष तिमिल्सिना	Link	Ratopati	8-Nov	Nepali
11	'Elected representatives should disseminate factual information'	Link	Republica	8-Nov	English
12	जनप्रतिनिधिले जनतामा सही सन्देश प्रवाह गर्नुपर्छ : अध्यक्ष तिमिल्सिना	Link	Saugat Khabar	8-Nov	Nepali
13	People's representatives urged to raise awareness	Link	The Himalayan Times	8-Nov	English

- The following documents were translated (4-10 November 2020):

SN	TRANSLATED DOCUMENTS	TYPE
1	Position Paper: Surveillance, CICT & Testing	Document
2	Calibrating public health and social measures in the context of COVID-19	Summary
3	Weekly Evidence Brief_6 November 2020	Document
4	Prevention, identification and management of health worker infection in the context of COVID-19	Summary
5	Harmonized health service capacity assessments in the context of the COVID-19 pandemic	Summary
6	Considerations for implementing and adjusting public health and social measures in the context of COVID-19	Summary
7	Schools and other educational institutions transmission investigation protocol for coronavirus disease 2019	Summary
8	“कोरोना रोकथाममा, समूह टोलटोलमा” कोभिड सहजीकरण समूह	Document
9	Critical preparedness, readiness and response actions for COVID-19	Summary
10	Readiness for influenza during the COVID-19 pandemic	Summary

- Science in COVID-19 - 5 videos translated, dubbed, and published:
 - I. Episode 7 (Nepali); November 4: [Link](#)
 - II. Episode 8 (Nepali); November 5: [Link](#)
 - III. Episode 9 (Nepali); November 6: [Link](#)
 - IV. Episode 7 (Maithili); November 9: [Link](#)
 - V. Episode 8 (Maithili); November 10: [Link](#)
- Ongoing COVID-19 messages for video content production in line with Strategic Communication plan to support MoHP from political leaders and eminent social influencers for preventive measures for celebration of upcoming National festivals (Tihar and Chhath).
- WHO Nepal has handed over emergency health logistics items (Personal Protective Equipment, Biomedical equipment and Biomedical accessories) to the MoHP. The total amount of these logistic items is worth about USD 330,000.
- WHO Nepal has received 45 ELISA Kits from WHO Headquarters which has been handed over to the National Public Health Laboratory (NPHL) for testing the sero-surveillance study samples.
- Upon request from MoHP, WHO Nepal is supporting to refurbish MoHP Incident Command System War Room

What are the health cluster partners doing?

- Cluster coordination meetings for health sector response are ongoing at the Federal and Provincial levels for coherent actions at all levels.
- Health partners, including Reproductive Health (RH) sub-cluster, Mental health sub-cluster are supporting the continuation of COVID and non-COVID response throughout the country to ensure continuity of services in the COVID-19 context.
- Cluster Partners have handed over 131 oxygen concentrators; 50 pulse oximeters; 515,000 face shields; 28 ventilators; 10,000 antigen test kits; 9,457 PPE; 45 ELISA kits; 15,000 protective goggles; 700,000 medical masks; 15,000 N95 masks; 62 venturi masks; 50,000 examination gloves; 15,000 isolation gowns; and 62 nasal oxygen cannulas to the MOHP to support COVID-19 response.
- Cluster Partners have been regularly monitoring the continuity of essential health services (EHS) since the outset of the pandemic. EHS including routine immunization and maternal new-born health services are reported to be functioning at most of the static and outreach sites. During the reporting period, eight new health facilities from Lumbini province were assessed, where 985 beneficiaries utilized maternal and child health services. To date, a total of 403 health facilities across all provinces (183 in Province 2; 14 in Bagmati; 36 in Gandaki; 88 in Lumbini; and 82 across Karnali and Sudurpaschim provinces) have been assessed for continuity of EHS functionality.

- Partners are providing their support to mental health sub-cluster for the organization of on-line mental health wellbeing sessions targeting children, adolescents and parents/caregivers. As of now, trained mental health workers conducted 1,172 sessions and reached a total of 24,433 people (7215 girls, 6,797 boys and 10421 parents/caregivers). Furthermore, in partnership with NHTC, an online training manual on mental health has also been developed and rolled out through Child Workers in Nepal Concerned Centre (CWIN). The purpose of this training is to support coping with the stress caused by the 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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