HIGHLIGHTS

Nepal

- Ministry of Health and Population has announced the occurrence of 772 confirmed cases and 4 deaths from COVID-19 as of 26th May 2020.
- MOHP has endorsed a guidance on health related standards for quarantine sites and people within quarantine sites and an interim guidance on Reproductive Maternal, Newborn and Child Health services in COVID-19 Pandemic this week.

Regional/Global

- The 73rd World Health Assembly ended this week with a global commitment to the COVID-19 response. The delegates adopted a landmark resolution to bring the world together to fight the COVID-19 pandemic.
- WHO and partners have produced a guidance on laboratory biosafety related to the testing of clinical specimens and guidance on repatriation of COVID-19 human remains by air.

SITUATION OVERVIEW
(reported up to 26th May 2020)

NEPAL
772 confirmed
4 deaths
155 recovered
54,697 RT-PCR tests

SOUTH-EAST ASIA REGION
210,273 confirmed cases
6140 deaths

GLOBAL
5,404,512 confirmed cases
343,514 deaths
In Nepal, 772 people have tested positive by RT-PCR for COVID-19, 4 deaths related to COVID-19 have occurred and 155 people have been discharged. 98% (758/772) of the confirmed cases are asymptomatic at the time of sample collection or diagnosis. A sharp increase in confirmed cases from 110 to 772 from week 19 to week 21 is noted. This increase is largely driven by repeated large influxes of Nepali workers returning from a neighboring country across the southern border. Males constitute 89% of the confirmed cases and of them 92% are in the age group of 15-54 years, indicating that the rapid increase in confirmed cases is driven by the migrant workers returning to Nepal. While there is an imminent risk for further spread across the country, it does not appear that there is widespread community transmission of SARS-CoV-2 within Nepal yet, as the returnees have been kept in isolation centers if they test positive or in quarantine centers otherwise. An aggressive testing approach has been adopted by the government under which “hot spots”, returnees, conservancy workers, front line workers including health and security personnel, relief workers/volunteers, retail shopkeepers, truck drivers, etc. are tested irrespective of presence of symptoms.

Information is emerging that the living conditions in many of the quarantine sites are not meeting minimum standards of distancing, WASH, hygiene, etc. With the continuing high inflow of returnees, the situation is rapidly becoming more serious.

Figure 1A: Epidemic curve of laboratory confirmed COVID-19, by date of onset/sample collection/confirmation (N= 772) (Data updated till 26th May 2020)

Note: The first case was developed symptoms on 31 Dec 2019 in China and was confirmed on 23 Jan 2020. 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.

Note: Asymptomatic/symptomatic at the time of sample collection or diagnosis.
Figure 1B: Cumulative case count by province (Data updated till 26th May 2020)

![Graph showing cumulative case count by province](image)

Table 1: Provinces with reported lab-confirmed COVID-19 cases & deaths. (Data updated till 26/05/2020)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification*</th>
<th>No of districts affected</th>
<th>Date of last case #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>87</td>
<td>-</td>
<td>Cluster of cases</td>
<td>7</td>
<td>23 May 2020</td>
</tr>
<tr>
<td>Province 2</td>
<td>282</td>
<td>1</td>
<td>Cluster of cases</td>
<td>8</td>
<td>26 May 2020</td>
</tr>
<tr>
<td>Bagmati</td>
<td>40</td>
<td>1</td>
<td>Sporadic cases</td>
<td>11</td>
<td>25 May 2020</td>
</tr>
<tr>
<td>Gandaki</td>
<td>5</td>
<td>-</td>
<td>Sporadic cases</td>
<td>3</td>
<td>21 May 2020</td>
</tr>
<tr>
<td>Province 5</td>
<td>321</td>
<td>2</td>
<td>Cluster of cases</td>
<td>8</td>
<td>25 May 2020</td>
</tr>
<tr>
<td>Karnali</td>
<td>23</td>
<td>-</td>
<td>Sporadic cases</td>
<td>2</td>
<td>26 May 2020</td>
</tr>
<tr>
<td>Sudurpaschhim</td>
<td>14</td>
<td>-</td>
<td>Sporadic cases</td>
<td>4</td>
<td>23 May 2020</td>
</tr>
<tr>
<td>National Total</td>
<td>772</td>
<td>4</td>
<td></td>
<td>43</td>
<td>26 May 2020</td>
</tr>
</tbody>
</table>

# Date of last case is the date of onset or date of sample collection or date of lab report based on information available.
* Case classification is based on [WHO transmission classification](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/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 2: Municipalities (by domicile) with reported laboratory confirmed COVID-19 cases
(Data updated till 26th May 2020)

<table>
<thead>
<tr>
<th>Province</th>
<th>Total confirmed cases</th>
<th>Total district affected</th>
<th>Date of last case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>87</td>
<td>7</td>
<td>23-May-2020</td>
</tr>
<tr>
<td>Province 2</td>
<td>202</td>
<td>8</td>
<td>26-May-2020</td>
</tr>
<tr>
<td>Bagnati</td>
<td>40</td>
<td>11</td>
<td>25-May-2020</td>
</tr>
<tr>
<td>Gandaki</td>
<td>5</td>
<td>3</td>
<td>21-May-2020</td>
</tr>
<tr>
<td>Province 5</td>
<td>321</td>
<td>8</td>
<td>25-May-2020</td>
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<tr>
<td>Karnali</td>
<td>23</td>
<td>2</td>
<td>26-May-2020</td>
</tr>
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<td>Sudurpaschim</td>
<td>14</td>
<td>4</td>
<td>23-May-2020</td>
</tr>
<tr>
<td>National</td>
<td>772</td>
<td>43</td>
<td>26-May-2020</td>
</tr>
</tbody>
</table>

Figure 3: Epidemiological characteristics of laboratory confirmed COVID-19 cases
(data updated till 26th May 2020)

Distribution of COVID-19 cases by age and sex (N=772)
Figure 4: Comorbidity and recovery status of COVID-19 cases in Nepal (data updated till 26th May 2020)

Co-morbidity of COVID-19 cases in Nepal (N=772)

Some cases are with more than one comorbidity. Recent cases are currently under investigation.

Clinical status/outcome status of COVID-19 cases in Nepal (N=164)

Current clinical status is under investigation for 608 cases.
PREPAREDNESS AND RESPONSE

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

- MoHP is fully engaged in case investigation and contact tracing, monitoring of quarantine sites and assisting the provincial governments in the response for COVID-19 with its teams fully mobilized in different parts of the country.
- Epidemiology and Disease Control Division, with the support from WHO conducted a one-day virtual training to MoHP, MoSD/PHD and WHO field staffs from all the provinces on case investigation, contact tracing and data entry in Go. Data.
- MoHP has established RT-PCR testing facility in one more center this week, bringing the total of laboratories with RT-PCR testing capacity for COVID-19 to 20, with centers covering all seven provinces.
- Research on COVID-19 is being advanced with formal discussion between all three levels of the WHO and the National Health Research Council for participation in the SOLIDARITY trial.
- Several arrangements are being fast tracked for procuring /obtaining and suppling the medical logistics needed for response in collaboration with development partners and other governments.
- Ongoing strengthening of public communication and strategic information management to reduce misinformation and enhance data driven planning and deployment of response actions.

What is WHO Country Office for Nepal doing?

- Since the start of the COVID-19 response in March, WHO staff have been embedded in most MOHP units, centers and teams to provide daily hands-on support. This support is ongoing.
- WHO, co-leads together with MOHP, the Health Cluster, with weekly virtual meetings in which all provinces and partners participate. Given the current huge influx of Nepali returnees from the neighboring country, the health cluster is continuing to coordinate efforts in mobilizing resources to complement Government’s response in providing RT-PCR test reagents, PPE supplies, support in training and mobilization of Case Investigation and Contact Tracing Teams (CICTT) and exploring ways to support the health needs in the quarantine settings.
- EDCD teams and WHO field staff (SMO, FMO) are supporting provinces and local levels in conducting case investigation and contact tracing and enhanced surveillance.
- WHO is providing ongoing support on a daily basis to EDCD in epidemiological analysis of COVID cases and contacts and data management and entry in the Go.Data
- WHO supported the Ministry of Social Development-Province 1, to establish a Provincial Health Emergency Operation Centre (PHEOC), which will continue working as center for COVID 19 response in Province 1.
- Ongoing work to establish an online data management platform for the NPHL and the provincial laboratories related to COVID-19 testing; and support for efficient and quality testing through the development of a national laboratory manual.
- Support to NHRC to advance in-country research on COVID-19 including participation in the WHO SOLIDARITY trial.
- WHO is providing regular technical support to Management Division, Department of Health Services, MoHP for COVID-19 commodities forecasting and distribution plan.
- Coordination with Risk Communication and Community Engagement (RCCE) stakeholders is ongoing in validation and dissemination of developed products to create messages for targeted audiences such as people with mental health disabilities, differently abled people and Nepali citizens working in foreign countries.
WHO is providing ongoing support to Epidemiology and Disease Control Division and National Health Education, Information and Communication Center to capture the Frequently Asked Questions (FAQ) through the COVID-19 call center and address the queries on contact tracing, quarantine and isolation.

WHO, along with other UN agencies is supporting social media campaigns utilizing the national influencers on hand washing and respecting government lockdown.

WHO supported MoHP to finalize the guidelines on safe management of dead bodies of COVID-19 patients.

What are partners doing?

- Partners are continuing to support COVID-19 response through one door mechanism. Bodhisattvas in Action (B.I.A.) Foundation, Lumbini Healthcare Pvt. Ltd and International Nepali Artists' Society had delivered 650 PPE sets, 12,000 surgical masks, 1,100 KN95 masks, 10,000 gloves and 10 thermal guns to MoHP this week.
- Health cluster and WASH cluster are working together in coordinating addressing WASH needs of the health and quarantine facilities.
- Over 200 online volunteers were mobilized nationwide to fight rumors and share correct information

WHO’s STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE

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

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

RECOMMENDATION AND ADVICE FOR THE PUBLIC

- **Protect yourself**
- **Questions and answers**
- **Travel advice**
- **EPI-WIN:** tailored information for individuals, organizations and communities
USEFUL LINKS

- MoHP’s COVID-19 official portal is available here.
- Regular updates Nepal’s COVID-19 updates and resources are available 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.
- For global WHO situation report, please visit this site.
- Global coronavirus disease situation dashboard can be found here.
- For COVID-19 updates from WHO South East Asia Region Office, please visit here.
- Visit WHO Nepal Facebook page and webpage on COVID-19 here.

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