HIGHLIGHTS

Nepal

- Ministry of Health & Population (MoHP) has issued *Interim guidelines for the provision of essential health and rehabilitation services for people with disabilities in the context of COVID-19* (Nepali language). *(To access original document, click here)*

- Nepal Ayurved Druggist Association (NADA) handed over various Ayurvedic medicines to Ministry of Health and Population (MoHP) for distribution in quarantine centers at different places of Nepal in the presence of Hon. State Minister of Health.

- MoHP has revised *health related arrangements for the persons in quarantine* as per the changing context (Nepali language). *(To access original document, click here)*

- In order to maintain uniformity in waste management and to facilitate the management of COVID-19, *Health Care Waste Management in the context of COVID-19 Emergency, 2020* (Interim Guidance-Nepali language) has been issued by the MoHP. *(To access original document, click here)*

- *Health standards for isolation of COVID-19 cases, 2077 and Directives for amendment to the existing directives on reimbursement to hospitals treating COVID-19 cases, 2077* have been endorsed by Office of the Prime Minister and Council of Ministers (Nepali language) *(To access original document, click here)*

*With technical assistance from WHO*

Regional/Global

- WHO has published an update to the *scientific brief on smoking and COVID-19*, which assesses the available evidence on the risk of smokers being infected by the virus, severity of disease, and deaths among hospitalized COVID-19 patients who smoke. The conclusion remains that smoking appears associated with increased severity of disease and death in hospitalized COVID-19 patients.

- WHO has published new *guidance on infection prevention and control* during healthcare when COVID-19 is suspected or confirmed.
• A new, interactive e-learning course entitled “Controlling the Spread of COVID-19 at Ground Crossings” is now available from the following link: https://extranet.who.int/hslp/training/course/view.php?id=333

• WHO has accepted the recommendation from the Solidarity Trial’s International Steering Committee to discontinue the trial’s hydroxychloroquine and lopinavir/ritonavir treatment arms for COVID-19. (To access original document click here)

NEPAL EPIDEMIOLOGICAL SITUATION

• As of date (week no. 28), Nepal has confirmed 16,166 cases through polymerase chain reaction (RT-PCR) and 99% (16,055) of the total confirmed cases have been detected in the weeks from 20 to 28; While less than 1% of the confirmed cases are symptomatic at diagnosis across all age groups, the proportion of symptomatic persons is progressively increasing beyond 55 years of age.

• Thirty-five deaths have been reported to be temporally associated with COVID-19 PCR positive status - 30 males and 5 females with 21 of them having known comorbid conditions. Although overall case fatality ratio (CFR) across all ages is less than 1%, the CFR progressively increases above 1% beyond 55 years of age.

• All 7 provinces and 77 districts are now affected and in five out of seven provinces where ~71% of the population reside, there are clusters of cases. Around 84% of cases are reported from Province 2, Province 5, Sudurpaschim and Karnali province combined.

• The age sex distribution is highly skewed towards young males, who constitute 86% (13,944/16,166) of the confirmed cases. Of the males, 92% (12,893/13,944) are in 15-54-year age group.

• There are high daily and cumulative incidence rates in western parts of Nepal, especially in Sudurpaschim province.

• The spatial distribution of cases is still clustered within a few municipalities, rather than being widespread across the entire districts.

• While the vast majority of cases are among people who have returned from abroad, there is evidence of some secondary community transmission and it may be increasing.

• As of 7 July 2020, 604 cases of influenza like illness (ILI)) have been tested for COVID-19 and eight cases have tested positive for SARS-CoV-2 (all these positive cases are included in COVID-19 tally).

• The number of SARI cases reported in the Early Warning Alert and Response System (EWARS) during this period is less compared to the same period last year - 56 cases in epidemiological week 26 in 2020 and 157 cases in the same week in 2019.
Figure 1: Confirmed COVID-19 cases in South East Asia Region (Data updated on 7 July 2020)

![Confirmed COVID-19 Cases](image)

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=16166) (Data updated on 7 July 2020)

![Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N=16166) (Data updated on 7 July 2020)](image)

**Note:** The first case developed symptoms on 5 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.

- All data are provisional
- Data updated till 09 Jul 2020 Time 07:00:00

Situation Update #12- Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

7 July 2020
Figure 2B: Epidemic curve of laboratory confirmed COVID-19, by Provinces (N= 16166) (Data updated on 7 July 2020)

Figure 2C: Cumulative case count of laboratory confirmed COVID-19 by province (Data updated on 7 July 2020)

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

(Data updated on 7 July 2020)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification*</th>
<th>Districts affected (total districts)</th>
<th>Date of most recent case*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>719</td>
<td>0</td>
<td>Cluster of cases</td>
<td>14 (14)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>Province 2</td>
<td>4216</td>
<td>4</td>
<td>Cluster of cases</td>
<td>8 (8)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>Bagmati</td>
<td>670</td>
<td>6</td>
<td>Sporadic cases</td>
<td>13 (13)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>Gandaki</td>
<td>1195</td>
<td>5</td>
<td>Sporadic cases</td>
<td>11 (11)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>Province 5</td>
<td>3995</td>
<td>10</td>
<td>Cluster of cases</td>
<td>12 (12)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>Karnali</td>
<td>1591</td>
<td>4</td>
<td>Cluster of cases</td>
<td>10 (10)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>Sudurpaschhim</td>
<td>3780</td>
<td>6</td>
<td>Cluster of cases</td>
<td>9 (9)</td>
<td>7 July 2020</td>
</tr>
<tr>
<td>National Total</td>
<td>16166</td>
<td>35</td>
<td></td>
<td>77 (77)</td>
<td>7 July 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 3: Distribution of COVID-19 cases by age and sex (N=16166) (Data updated on 7 July 2020)
Details for 34 cases are yet to come

Figure 4: Outcome status of COVID-19 cases in Nepal (Data updated on 7 July 2020)

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases. (N=16166) (Data updated on 7 July 2020)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total confirmed cases</th>
<th>Death (male)</th>
<th>Death (female)</th>
<th>Deaths with any known comorbid condition</th>
<th>Age specific case fatality ratio (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 yrs</td>
<td>360</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.56</td>
</tr>
<tr>
<td>5-14 yrs</td>
<td>669</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0.15</td>
</tr>
<tr>
<td>15-24 yrs</td>
<td>6301</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0.02</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>4760</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>0.13</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>2555</td>
<td>5</td>
<td>1</td>
<td>3</td>
<td>0.23</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>1043</td>
<td>6</td>
<td>1</td>
<td>4</td>
<td>0.67</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>324</td>
<td>6</td>
<td>0</td>
<td>5</td>
<td>1.85</td>
</tr>
<tr>
<td>65-74 yrs</td>
<td>89</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>3.37</td>
</tr>
<tr>
<td>75-84 yrs</td>
<td>27</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>7.41</td>
</tr>
<tr>
<td>85+ yrs</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>Unknown</td>
<td>34</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Grand Total</td>
<td>16166</td>
<td>30</td>
<td>5</td>
<td>21</td>
<td>0.22</td>
</tr>
</tbody>
</table>

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=16,166) 
(Data updated on 7 July 2020)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total confirmed cases</th>
<th>Asymptomatic</th>
<th>Symptomatic (n)</th>
<th>Symptomatic (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 yrs</td>
<td>360</td>
<td>359</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>5-14 yrs</td>
<td>669</td>
<td>667</td>
<td>2</td>
<td>0.3</td>
</tr>
<tr>
<td>15-24 yrs</td>
<td>6301</td>
<td>6293</td>
<td>8</td>
<td>0.1</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>4760</td>
<td>4740</td>
<td>20</td>
<td>0.4</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>2555</td>
<td>2548</td>
<td>7</td>
<td>0.3</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>1043</td>
<td>1041</td>
<td>2</td>
<td>0.2</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>324</td>
<td>320</td>
<td>4</td>
<td>1.2</td>
</tr>
<tr>
<td>65-74 yrs</td>
<td>89</td>
<td>88</td>
<td>1</td>
<td>1.1</td>
</tr>
<tr>
<td>75-84 yrs</td>
<td>27</td>
<td>26</td>
<td>1</td>
<td>3.7</td>
</tr>
<tr>
<td>85+ yrs</td>
<td>4</td>
<td>3</td>
<td>1</td>
<td>25.0</td>
</tr>
<tr>
<td>Unknown</td>
<td>34</td>
<td>34</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Grand Total</td>
<td>16166</td>
<td>16119</td>
<td>47</td>
<td>0.3</td>
</tr>
</tbody>
</table>

Figure 5: Daily number person for quarantine facility in provinces, Nepal

Source: MDPRMRA Situation Report 27 Mar 2020
Ministry of Home Affairs
PREPAREDNESS AND RESPONSE

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

- MoHP has developed a Rapid Action Plan (RAP) which identifies critical activities to respond COVID-19 covering current four months period (under approval process)
- MoHP has initiated a reform process to establish Centre for Disease Control (CDC), Food and Drug Administration (FDA) and Health Accreditation Authority (HAA). The process will also consider other legal reforms to bring different academia, councils and health research centers under a single umbrella act.
- MoHP is assisting the provincial and local governments in case investigation and contact tracing, monitoring and management of quarantine, isolation and treatment sites.
- The government has decided to let short-route public transportation vehicles ply roads by maintaining needful safety precautions from 10 July 2020. By the ‘short distance’, the government meant within Kathmandu valley in the case of Kathmandu, Lalitpur and Bhaktapur as one district and within the given district in the case of other districts.
- Ministry of Home Affairs had shared a circular (6th July) directed to local administrations of all 77 districts and the Nepal Police Headquarters to take action against those not wearing masks outside their homes in order to contain possible spread of COVID-19 which is in line with the provisions of Infectious Disease Act, 2020, BS.

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 hands-on support every day.
- WHO-Nepal has provided technical support for the development of ‘Dry Swab and direct PCR Protocol’ to validate the use of dry swab in sample collection (status- ongoing)
- The WHO country office for Nepal has supported the joint collaboration of the National Tuberculosis Control Center (NTCC) and the National Public Health Laboratory (NPHL) by providing technical support in the development of following documents:
  - Protocol for kit verification and quality control of Xpert® Xpress SARS-CoV-2 testing using GeneXpert Dx System in Nepal (English language)
  - Both documents have been endorsed by the government
- National Quality Assessment (NQAS) of 20 designated laboratories for COVID-19 testing has been technically supported by WHO. NPHL performed the quality assessment with 5 positive and 5 negatives samples from the 20 different designated labs across the country. Assessment for the remaining designated laboratories in underway.
• The national consultant from WHO along with the NPHL director visited Tribhuvan University Teaching Hospital (TUTH) for providing technical expertise in the verification of the whole plate positive issue of SARS-COV-2. This was later verified as the issue of data reporting, where all negative results were reported on the first day while all positive results were reported on the next day showing 100% positive results.

• In addition to a national consultant, an international consultant has been recruited by WHO to provide (remote) technical support to NPHL, including with the preparation, updating and reviewing of SOPs.

• Following the completion of the Rapid Assessments on IPC, Curative care, Health Care Waste Management and Water, Sanitation and Hygiene (WASH) of all Level2 COVID-19 designated hospitals across the country, WHO supported the Curative Services Division (CSD) (through virtual meetings) to guide all provinces with the development of action plans to address the shortcomings as identified in the Rapid Assessments, These relate mainly to readiness of infrastructure and HR, Health Care Waste Management systems, and availability of critical care equipment. Action Plans are now being developed by all provinces.

• WHO and UNICEF are supporting the MoHP with development (currently in draft) of a booklet for families supporting home quarantine.

• In collaboration with the WFP Engineering team, WHO is providing on-going support on the revised lay-out of a model temporary health facility (similar to Level 1 COVID-19 hospitals). The work also includes the identification of the list of services to be provided, facility staffing and HR, and PPE needs.

• WHO provides day-to-day technical support on national forecasting and quantification of COVID-19 logistics need.

• The National Health Education Information Communication Center (NHEICC), UNICEF and WHO are collaborating to develop new communication products for the MoHP.

• WHO is supporting the National Health Training Center (NHTC) to accelerate the adaptation and uptake of WHO training packages.

• Positive feedback has been received from key academe on the “Coursera” course on Contact Tracing which WHO Nepal translated and made available to a global audience. Link here

• The production of “explainer videos” continues. This week the following videos were released in the online media space of Nepal with WHO presence: (1) community transmission-Link here, (2) Can COVID-19 transmit through sexual activity? -Link here, (3) Does alcohol consumption kill corona virus inside the body?- Link here

• WHO Nepal’s Facebook page continues to be updated at least once a day and content in Nepali and English language is being posted. The page is being widely quoted and shared and also attracting unique users.
What are partners doing?

- Partners continue to support MoHP in the COVID-19 response and are now following the one door policy of the MoHP when requesting support and/or collaboration. All such requests now need to be channeled through the Health Coordination division of the MoHP.

- Logistic Supplies were donated by China Railway 14th Bureau Group Company Limited, Nepal Red Cross Society (NRCS) to support the Government of Nepal for COVID-19 response.

- Partners in Mental Health (Center for Mental Health and Counselling (CMC) Nepal; Transcultural Psychosocial Organization (TPO) Nepal; KOSHISH Nepal; United Mission to Nepal; CHHAHARI Nepal for Mental Health; Unity in Health; KOPILA) are providing mental health and psychosocial support in all 7 provinces and more than 50 districts of Nepal.

- Risk Communication and Community Engagement program on mental health “Jiwan Rakchhya” (translated as Life Protection) broadcasted through more than 300 radio stations in the country. Radio is reported to have at least a 67.3% penetration in the country with a significant bias in the semi-urban and rural areas. (data from national survey by SHARECAST INITIATIVE with technical support from UNICEF as of 7 April 2020)

- Tele-mental health services is being provided by Psychiatrist Association of Nepal, CMC Nepal, TPO Nepal and KOSHISH Nepal and other academic institutions from help lines to more than 1,500 people; psychosocial first aid was provided to more than 7000 people and more than 300 quarantine centers were visited in the last two weeks.
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](#).
- Nepal’s COVID-19 regular updates and resources are available [here](#).
- For COVID-19 updates from 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 WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#)

CONTACT DETAILS

**WHO Representative**

Dr Jos Vandelaer  
WHO Representative to Federal Democratic Republic of Nepal  
WHO Country Office for Nepal  
Email: vandelaerjo@who.int

**WHO Incident Manager**

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

**Health Cluster Co-lead**

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

**Communication/Media Focal Point**

Mr. Sujan G. Amatya  
Communications Officer  
WHO Country Office for Nepal  
Email: samatyag@who.int