COVID-19 Situation, Thailand
6 April 2022

3,781,827 total confirmed cases 25,697 total deaths

Daily average reported from 31 March to 6 April 2022 (compared to the week prior)

- 25,863 new confirmed cases (25,262) ↑ 2%
- 93 deaths (78) ↑ 19%
- 25,245 people recovered (24,148) ↑ 5%
- 140,829 vaccinations (201,857) ↓ 30%

Main messages

| Ongoing widespread community transmission of COVID-19 across Thailand |
| RTG encourages COVID-free settings and booster vaccinations |
| Get vaccinated, maintain universal precautions and stay informed |
Contents COVID-19 Update

- Situation analysis
- Global situation
- National situation
- Provincial situation
- COVID-19 testing
- Vaccination situation
- RTG policy updates
- Explainers

All data from the Royal Thai Government and Ministry of Public Health unless otherwise stated
Situation Analysis

The average number of new laboratory-confirmed (PCR positive) COVID-19 cases reported per day increased by only 2% in the past 7 days compared to the previous week, the same rate as the previous week. Although the daily reported confirmed case numbers appear to have plateaued, case numbers remain very high. In addition, not all probable (ATK positive) cases are subsequently confirmed by PCR testing. The average number of probable (ATK positive) cases reported per day over the last 7 days (18,133) decreased by 16% compared to the week before (21,498) but remains very high (today reported almost 27,000).

Bangkok continues to report the highest daily number of COVID cases. The average number of new COVID-19 cases reported per day for Bangkok in the past week (3,299) has slightly dropped from the previous week and is 2.3% lower than the week prior (3,377).

The average daily number of all currently ‘active’ COVID-19 cases (252,542) over the last seven days increased by 2.4 % compared to the previous week. This is half the previous rate of increase. A greater proportion of patients continue to be monitored in hospitals, community isolation and home isolation. The average number of COVID cases occupying hospital beds per day over the past week (64,519) is 2.2% higher than the average daily number reported for the week prior (63,212). Bed occupancy appears to have plateaued, with average bed occupancy from 8 March to today at 64,268.

An average of 93 daily deaths were reported in the past week compared to 78 for the previous week, a large increase of 19% and following a steadily increasing rise in deaths that has occurred since January.

The average daily number of severe COVID-19 cases over the past seven days (1,838) represents a 10% increase over the average number reported for the previous week (1,665). The average daily number of ventilated COVID-19 cases over the past seven days (749) represents a 15% increase over the average number reported for the week prior (649).

The rise in new COVID-19 case numbers continues to cause a significant increase in the number of severe and ventilated cases in hospitals in Thailand. However, the number of seriously ill COVID-19 cases remains lower than the numbers seen in July and August 2021. However, both severe and ventilated cases have been steadily climbing, with ventilated cases increasing faster and just 33% below their highest ever reported levels of August 2021. On 1 February 2022, ventilated cases were 91% below the August 2021 peak. Despite these increases, there remains capacity in the healthcare system to admit patients.

Although Thailand has not experienced the same degree of an upsurge of COVID-19 cases as seen in some other countries, cases including severe, ventilated and deaths have increased substantially since the beginning of the year.

The policy of not confirming by PCR testing for all probable cases, as well as the widespread use of rapid antigen tests (including those available ‘over the counter’ that may not be reported), continues to make it difficult to accurately monitor the situation. However, of the 3.7 million cases in Thailand reported in the 27 months from January 2020 to today, over 1.5 million (41%) have occurred in the last 3-months from 1 January 2022.

Even with current increases in cases of rising COVID-19, vaccination rates in Thailand continue to significantly reduce levels of severe illness and deaths caused by circulating COVID-19 strains. High vaccination rates also help to reduce the transmission of COVID-19. However, vaccination rates are still low in some provinces and some important risk groups.
Global COVID-19 (total) cases, deaths and vaccinations to date: chart showing cases reported per week

- **490,853,129** confirmed cases
- **872,868** new cases in last 24 hours
- **6,155,344** deaths
- **16,079** new deaths in last 24 hours
- **11,183,087,530** vaccine doses administered
- **5,054,202,300** persons vaccinated with at least one dose
- **4,521,112,460** persons fully vaccinated (to 3 April 2022)

During the week of 28 March to 3 April, the number of **new cases declined** again with a **16% decrease** as compared to the previous week.

The number of new **weekly deaths decreased by 43%** (after the sharp rise of the previous week likely driven by changes in the definition of COVID-19 deaths in some countries and by retrospective adjustments reported in other countries).

**South-East Asia region**
- 5% decrease in new cases (14% week previously)
- 73% increase in new deaths (116% week previously)

These trends should be interpreted with caution as several countries are progressively changing their COVID-19 testing strategies, resulting in lower overall numbers of tests performed and consequently lower numbers of cases detected.

Source: Data - [https://covid19.who.int/](https://covid19.who.int/) - data as of 5 April 2022 (vaccination data to 3 April 2022)

Chart - COVID-19 Weekly Epidemiological Update Edition 86, published 5 April 2022 – chart as of 3 April 2022
National Situation
Thailand COVID-19 cases, deaths and vaccinations to date: chart showing cases per day

New Community Cases

- **Cases Total**: 3,781,827
- **7-day Average**: 25,863
- **Deaths Total**: 25,697
- **7-day Average**: 93

**Vaccination**

- **1st dose**: 55,740,738
- **2nd dose**: 50,421,739
- **3rd dose**: 24,185,357

**Date of reporting**

- **1st wave**
- **2nd wave**
- **3rd wave** Alpha VoC
- **4th wave** Delta VoC
- **5th wave** Omicron VoC

Source MoPH to 06 Apr 2022

COVID-19 Update 06-Apr-22
COVID-19 deaths in Thailand

- Deaths have increased by 19% in the last week
Severe and ventilated COVID-19 cases

Severe and ventilated cases have increased by 10.4% and 15.4% respectively in the past week.

**Severe cases**
- Todays count: 1,845
- 7 days average: 1,838
- 7 days increase: 10.4%*

**Ventilated cases**
- Todays count: 782
- 7 days average: 749
- 7 days increase: 15.4%*

*Compared to the week prior

Source: MoPH

To 06 Apr 2022
COVID-19 hospital bed occupancy (7-day average) and severe cases

- Hospital bed occupancy is stable at around 64,000 per day
- NB – these numbers do not include people in hospitals or those undergoing community of home isolation

Source MOPH: to 06 Apr 2022
Provincial situation
COVID-19 proportion of new cases in Bangkok to all community cases

The average daily number of confirmed cases in Bangkok over the past week has decreased by 2.3% compared to the week prior.

Source MOPH: to 06 Apr 2022
New COVID-19 cases per million population by province

- There is a wide variation in the average rate of new cases ranging from 4 cases per million (Lamphun) to 899 cases per million population (Ang Thong).

- Most provinces with a high rates were in the Central and Southern Regions, though noting also Nong Khai in the North-East.

Source: MoPH
The average rate of deaths per million population over the past week ranged from 0 to 5.6 deaths per million population across the 77 provinces in Thailand.

The average rate of new deaths nationwide is 1.3 cases per million population. 7 provinces reported no new deaths in the past week (up from 5 the previous week).

Samut Songkhram reported the highest weekly average rate of deaths per million population in the past week.
Variation in ‘Test Positivity Rate’ over time*

Nationally test positivity has been increasing from previous weeks and it is now at 30.2%.

Source MOPH: to 06 Apr 2022
The proportion of ATK probable cases compared to the daily PCR confirmed case count is decreasing, but varies a lot from day to day.
People who have received:
1st dose: 55,740,738
2nd dose: 50,421,739
3rd dose: 24,185,357

Source CCSA to 05 Apr 2022
Second dose coverage per million population by province

- As with the previous week the number of provinces reporting higher two-dose vaccination coverage has slightly increased compared to the previous week (30 provinces up from 28 previously).

- The highest rate of vaccination coverage rates were in Bangkok and its surrounding provinces, and industrial and tourism provinces.

- 25 out of 77 provinces had 2nd dose vaccine coverage above 70%.

- The lowest vaccination coverage rates remain in Pattani and Narathiwat in the far south at 45%, followed by Mae Hong Son in the north and Yala in the south (both 53%).
Vaccination coverage: 1st dose, 2nd dose, 3rd and additional booster doses

MoPH to 03 Apr 2022  
*CCSA to 03 Apr 2022

Blue = 1st dose  
Yellow = 2nd dose  
Green = 3rd and also 4th and possibly 5th doses combined

Percent vaccinated

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

All-age group  Health care providers  Village health volunteers  Comorbidities  General Population  > 60 years*  12-17 years  5-11 years*

80 72 80 78 58 53 85 79 84 79 76 73 45 1.2
Vaccination coverage: 1st dose, 2nd dose, 3rd and more doses (Nationally and in those 60 years and older)

MoPH to 03 Apr 2022
*CCSA to 03 Apr 2022
COVID-19 burden on vulnerable population groups
Cumulative COVID-19 Cases reported to date by nationality (31 Mar 2022)

- Cambodia Laos & Myanmar) comprise 5.8% of all reported cases
- Largest group (4.4%) from Myanmar

Source MOPH: to 31 Mar 2022
Policy Update
The MoPH’s Guidelines for COVID-19 Vaccine Administration (18 years and above)

<table>
<thead>
<tr>
<th>3rd dose booster</th>
<th>Dose 1</th>
<th>Dose 2</th>
<th>Interval</th>
<th>Dose 3</th>
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<tr>
<td>SV/SP</td>
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<td>AZ</td>
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<tr>
<td>SV/SP</td>
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<td>&gt;3 months</td>
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<tr>
<td>SV/SP</td>
<td>Pf</td>
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<td>AZ</td>
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<table>
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<th>4th dose booster</th>
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<th>Interval</th>
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<tr>
<td>SV/SP</td>
<td>SV/SP</td>
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<td>&gt;4 months</td>
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Note: A half-dose of Pfizer vaccine can be administered as a booster dose, depending on the clinician’s discretion and the vaccine recipient’s choice.
- AZ can be an option for recipients of AZ+AZ who do not wish to receive mRNA vaccines (>6 months interval)
- Moderna can be considered as booster doses in any regimen above.
- Individuals with a history of COVID-19 infection should get the vaccine 3 months after infection.

SV=Sinovac
SP=Sinopharm
AZ=AstraZeneca
Pf=Pfizer

Source: MoPH’s press briefing 21 March 2022
<table>
<thead>
<tr>
<th>Age Group</th>
<th>Vaccine</th>
<th>Dosage</th>
<th>Interval</th>
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<tbody>
<tr>
<td>5-6 yrs.</td>
<td>Pfizer x 2 doses</td>
<td>orange cap (10 micrograms/ 0.2 ml.)</td>
<td>8 weeks</td>
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<tr>
<td>6-11 yrs.</td>
<td>Pfizer x 2 doses</td>
<td>orange cap (10 micrograms/ 0.2 ml.)</td>
<td>8 weeks</td>
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<tr>
<td></td>
<td>Sinovac - Pfizer</td>
<td>Dose 1: Sinovac 0.5 ml./ dose</td>
<td>4 weeks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dose 2: orange cap Pfizer (10 micrograms/ 0.2 ml.)</td>
<td>4 weeks</td>
</tr>
<tr>
<td>6 – 17 yrs.</td>
<td>Sinovac x 2 doses</td>
<td>0.5 ml./ dose</td>
<td>4 weeks*</td>
</tr>
<tr>
<td>12 -17 yrs.</td>
<td>Pfizer x 2 doses</td>
<td>purple cap (30 micrograms/ 0.3 ml.)</td>
<td>3-4 weeks</td>
</tr>
<tr>
<td></td>
<td>Sinovac – Pfizer</td>
<td>Dose 1: Sinovac 0.5 ml./ dose</td>
<td>4 weeks**</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dose 2: purple cap Pfizer (30 micrograms/ 0.3 ml.)</td>
<td>4 weeks**</td>
</tr>
</tbody>
</table>

* They should receive a booster dose with Pfizer (4 months interval after the 2nd dose)
** They should receive a booster dose with Pfizer or Moderna (4-6 months interval after the 2nd dose)

Source: MoPH’s press briefing 21 Mar 2022
Entry Schemes into Thailand
(Revised measures effective from 1 April 2022)

**ELIGIBILITY**

Fully vaccinated* travelers from all countries / territories

*Only vaccines registered by the Food and Drug Administration of Thailand or approved by the Ministry of Public Health or the WHO. Must be fully vaccinated at least 14 days prior to departure

**REQUIRED DOCUMENTS**

1. Passport
2. Certificate of Vaccination
   - Ages 18 and above must be fully vaccinated
   - Ages below 18:
     - Traveling accompanied by parents/legal guardian
     - Full vaccination not required
   - Traveling unaccompanied
     - Ages below 12 must be fully vaccinated
     - Ages 12 - 17 must receive one dose of vaccination
3. Paid SHA Extra / AQ Hotel booking confirmation for 1 day including the fee for 1 RT-PCR test, 1 ATK self-test kit and airport transfer
4. Insurance with minimum coverage of USD 20,000 for medical expenses (not required for Thai nationals and foreign nationals who have Thai social security / confirmation letters from employer in Thailand)

**REGISTRATION**

1. Register free on Thailand Pass (processing time is 3 to 7 days)
2. Travel from port of arrival to your hotel via sealed-route (transportation arranged by hotel)
3. Undergo a RT-PCR test and wait for test result at your hotel
4. Take an ATK self-test on Day 5-7 and report the test result as instructed by the Ministry of Public Health

**REMARK**

Pre-departure RT-PCR test for entry into Thailand is no longer required. However, travelers are advised to verify airline policies and entry requirements of transiting countries.

For further inquiries, please contact the Department of Consular Affairs (DCA) Tel. (66) 02-572-8442 (24 hours) or Email: testgo@consular.go.th
Please refer to the FAQs at www.consular.mfa.go.th and tp.consular.go.th for additional information.

**ALTERNATIVE QUARANTINE**

- 5 days quarantine for both fully vaccinated travelers and unvaccinated travelers

**REQUIRED DOCUMENTS FOR REGISTRATION**

1. Passport
2. Certificate of Vaccination
   - Ages 18 and above must be fully vaccinated
   - Ages below 18:
     - Traveling accompanied by parents/legal guardian
     - Full vaccination not required
     - Traveling unaccompanied
     - Ages below 12 must be fully vaccinated
     - Ages 12 - 17 must receive one dose of vaccination
3. Paid SHA Extra / AQ Hotel booking confirmation for 5 days and the fee for 1 RT-PCR test*, 1 ATK self-test kit and airport transfer
4. Insurance with minimum coverage of USD 20,000 for medical expenses (not required for Thai nationals and foreign nationals who have Thai social security / confirmation letters from employer in Thailand)

*RT-PCR test will be conducted on day 4-5

**REMARK**

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The SARS-CoV-2 virus continues to evolve. With such intense transmission worldwide, further variants will emerge, including recombinants. A recombinant virus occurs when two or more versions of the same virus share genetic material. This has occurred, resulting in variants of public health interest emerging from the recombination of sub-lineages BA.1 and BA.2 of the Omicron variant of the SARS-CoV-2 virus, resulting in the so-named XE variant, and the XD variant resulting from the Delta and Omicron variants. Recombination is common among coronaviruses and is regarded as an expected mutational event.

WHO is tracking recombinant variants, both XD and XE. XD (Delta-Omicron) is being tracked as a ‘variant under monitoring’ by WHO. Available evidence does not suggest that it is more transmissible, and its spread is very limited to date.

The XE recombinant (BA.1-BA.2) is being tracked as part of the Omicron variant. This recombinant was first detected in the United Kingdom on 19 January 2022, and a few hundred cases have been reported and confirmed since. Early estimates based on limited preliminary data suggest that XE has a community growth rate advantage of about 10% compared to BA.2. However, this requires further confirmation.

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WHO continues to closely monitor and assess the public health risk associated with recombinant variants, alongside other SARS-CoV-2 variants, and will provide updates as further evidence becomes available.

WHO continues to emphasize the importance of testing and surveillance so that we can track the virus, its spread and its evolution. This information and analyses remain critical to effectively end the acute phase of the pandemic.

EXPLAINER:
SARS-CoV-2 recombination and safe Songkran celebration

Q: Can I celebrate Songkran this year?
A: Yes. But there is still ongoing widespread community transmission of COVID-19, so the Royal Thai Government is prohibiting water splashing and other activities in which crowds gather in confined spaces, and is asking that people observe traditional festivities of paying respects to the family and Buddha. It is important that everyone is vaccinated and maintains distancing, mask-wearing, hand-washing and avoids unventilated crowded spaces.

New Normal Songkran

This year, for the first time in two years, the Royal Thai Government is allowing festivities to celebrate Songkran Thai New Year, if held under the universal prevention and COVID-free setting guidelines. Everyone who plans to celebrate Songkran is recommended to get their COVID-19 vaccine or a booster dose if they have not done so and conduct an ATK test before and after joining others in celebration.

With the aim to reduce crowding and maintain physical distancing, the government has prohibited water splashing, powder smearing, and foam parties and has asked the public to focus on the traditional activities involving paying respect to the elderly and the Buddha.

At present, a large proportion of COVID-19 cases are occurring in Bangkok and the surrounding provinces. For this reason, there is good cause to be concerned about what could potentially happen when younger, possibly infected people travel home to spend Songkran with their families, including their elderly relatives.

Therefore, we must all double down on applying the basic preventive measures that we know will break chains of transmission and flatten the curve, including wearing masks, avoiding crowded and poorly ventilated places, places, maintaining physical distancing, washing hands regularly and practising respiratory hygiene, i.e. coughing into a folded elbow or into a tissue, which should be disposed of safely.
USEFUL LINKS

- The Thailand COVID19 situation report is available in Thai and English, please visit.
- For regular updates on WHO’s response in Thailand, please visit.
- For global figures and technical advice from WHO, please visit.

World Health Organization Country Office for Thailand
4th Fl., Permanent Secretary Bldg.3 Ministry of Public Health, Nonthaburi, Thailand, 11000. sethawebmaster@who.int

[Images of COVID-19 safety guidelines and activities for Songkran]