

Situation Update #54- Coronavirus Disease 2019 (COVID-19)

WHO Country Office for Nepal

Reporting Date: 20 – 26 April 2021

HIGHLIGHTS*

- Of the total COVID-19 positive cases, 91.5% (277,951) of cases have recovered and 7.4% (22,434) of cases are active.
- 16 districts have reported more than 200 active cases; Morang, Parsa, Kathmandu, Bhaktapur, Lalitpur, Kaski, Dang, Banke and Rupandehi have reported more than 500 active cases.
- Of the total active cases, 1899 (8.5%) cases are undergoing hospital/institutional isolation of which 346 patients require ICU admission, amongst which 78 require ventilator support.
- New cases have been reported from 73 districts in the country.
- There have been 2,006,436 people who have received the 1st dose of COVID-19 Vaccine.
- Second dose of COVID-19 vaccine began on 20 April 2021. Among the vaccinated, 353,673 people have received 2nd dose of COVID-19 vaccine.
- Following a massive surge in COVID-19 cases, Kathmandu District Administration Office (DAO) has issued a weeklong prohibitory order starting from April 29 through May 5.

**Data as of COVID-19 Update, MoHP, 26 April 2021*

SITUATION OVERVIEW

NEPAL

(Data as of 27 April 2021, 07:00:00 hours)

303,561 confirmed cases

3,176 deaths

2,417,417 RT-PCR tests

SOUTH-EAST ASIA REGION

(Data as of 25 April 2021, 10am CET)

19,965,648 confirmed cases

254,958 deaths

GLOBAL

(Data as of 25 April 2021, 10am CET)

146,067,511 confirmed cases

3,092,497 deaths

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 27 April 2021, T07:00:00 hours (week no. 17), a total 303,561 COVID-19 cases were confirmed in the country through polymerase chain reaction (RT-PCR); 2,417,417 RT-PCR tests have been performed nationwide by designated functional COVID-19 laboratories.
- All 7 provinces in the country are now experiencing transmission via clusters of cases.
- Province-wise test positivity rate in the past week (week 16) ranged from 20.4% (Bagmati Province) to 65.8% (Karnali Province), with national positivity rate averaging 36.6%.
- Overall, the sex-distribution remains skewed towards males, who constitute 65% (195,720/303,561) of the confirmed cases. Amongst the males, 81% (159,205/195,720) are in the economically productive age group (15-54 years).
- A total of 81 samples have been tested for influenza at National Influenza Center (NIC), National Public Health Laboratory (NPHL) for surveillance of influenza on EPID-week 16 (19 - 26 April 2021). None of the samples tested positive for influenza.

- From 4 January until 26 April 2021, a total of 594 samples have been tested for influenza and SARS-CoV-2. Only 6 Samples have tested positive for SARS-CoV-2.¹

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases (data as of 25 April 2021; #Global Weekly Epidemiological Update 37) and cumulative incidence rate (per 100,000)

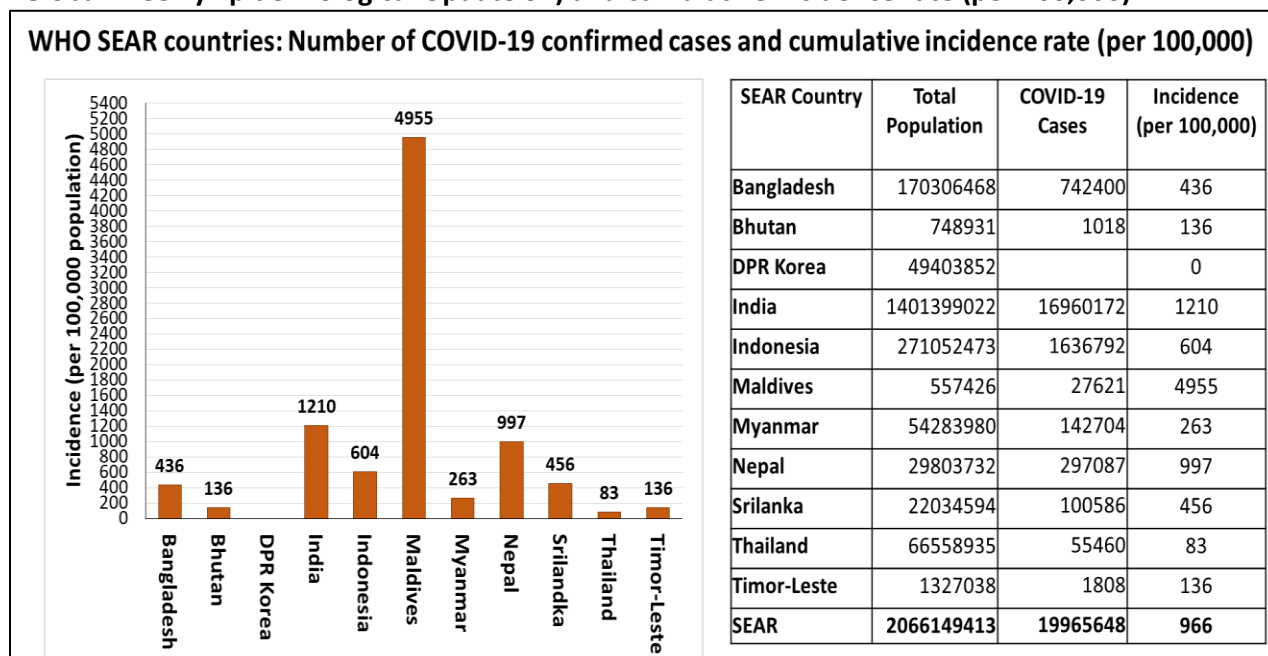
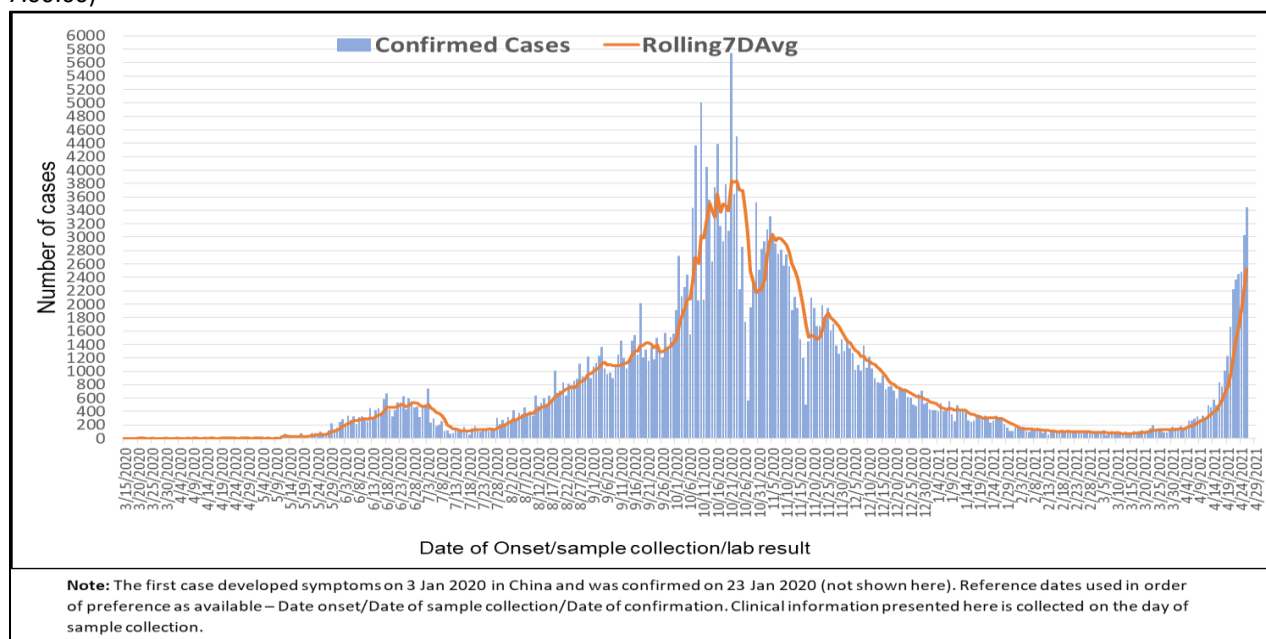


Figure 2A: Laboratory confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N = 303561)(Data updated on 27 April 2021 TO 7:00:00)

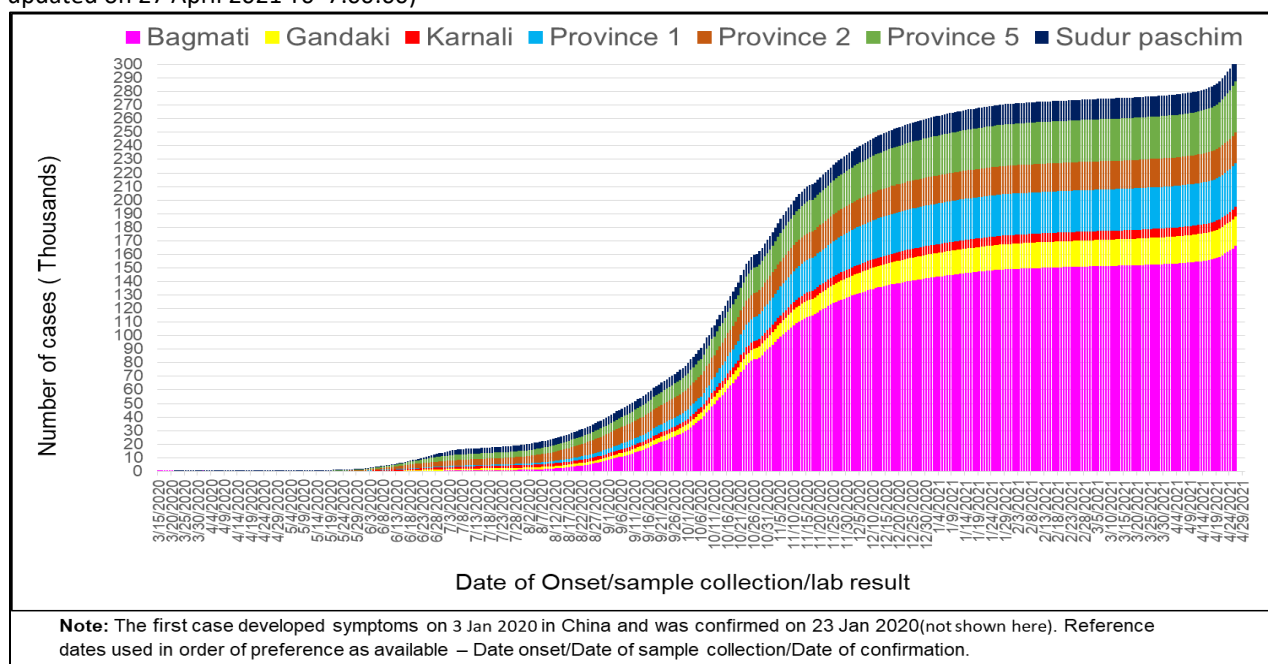


Nationally, the second surge began in mid-July of 2020, which peaked by the end of October and is currently showing an apparent downward trend, influenced partly by the significant decrease

¹ These positive cases are included in the COVID-19 database

in the number of tests being done. The total PCR tests done in Nepal on 26 April 2021 was 13293 which is more than half of the number tested during the peak in the end of October 2020.

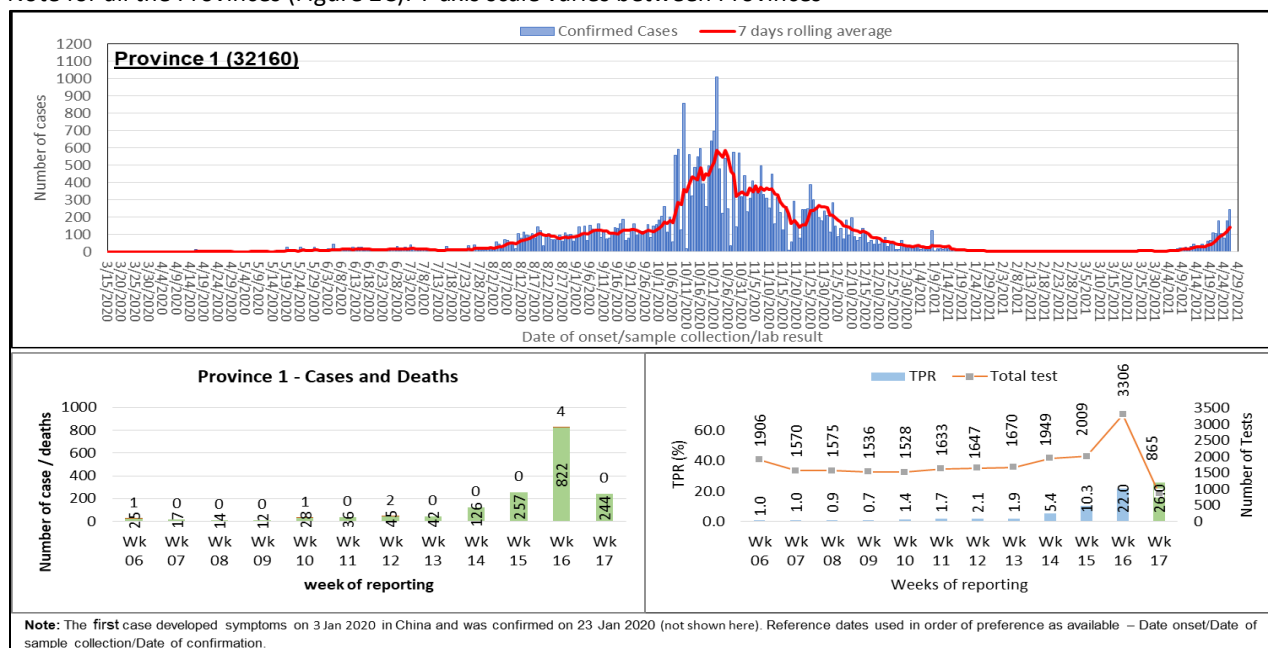
Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 303561)(Data updated on 27 April 2021 T0 7:00:00)



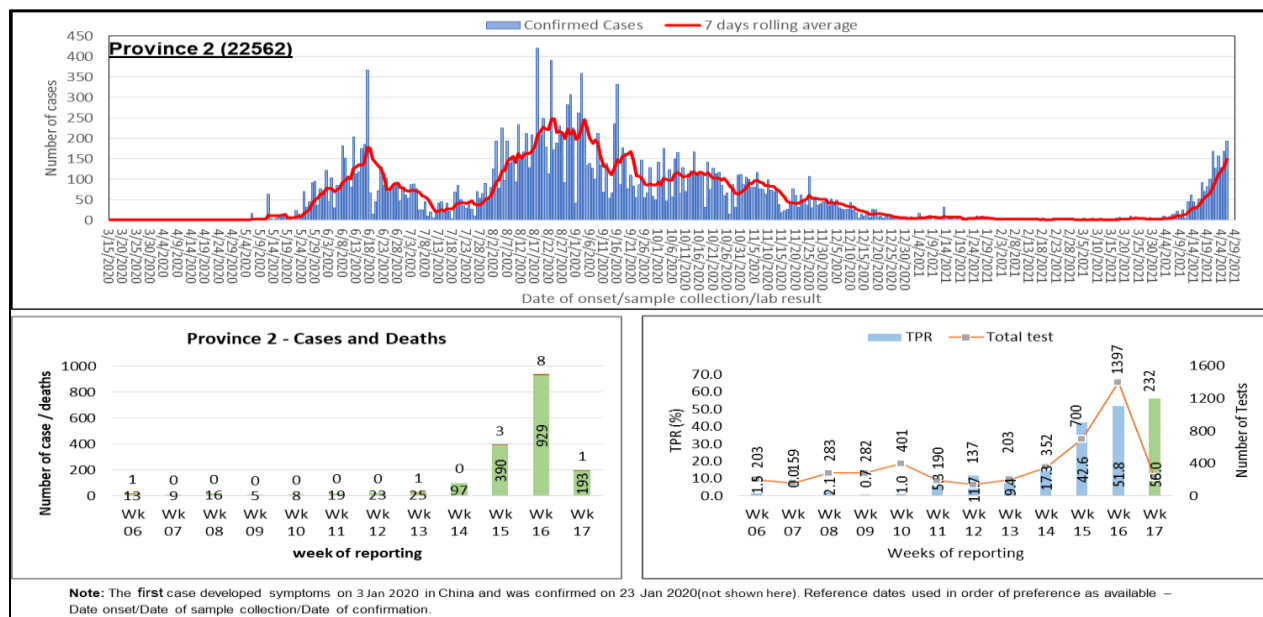
The cumulative case incidence has been increasing in Nepal since the first case was confirmed in 23 January 2020. Cases have been largely reported from Bagmati Province followed by Lumbini Province and Province 1.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 303561)(Data updated on 27 April 2021 T0 7:00:00)

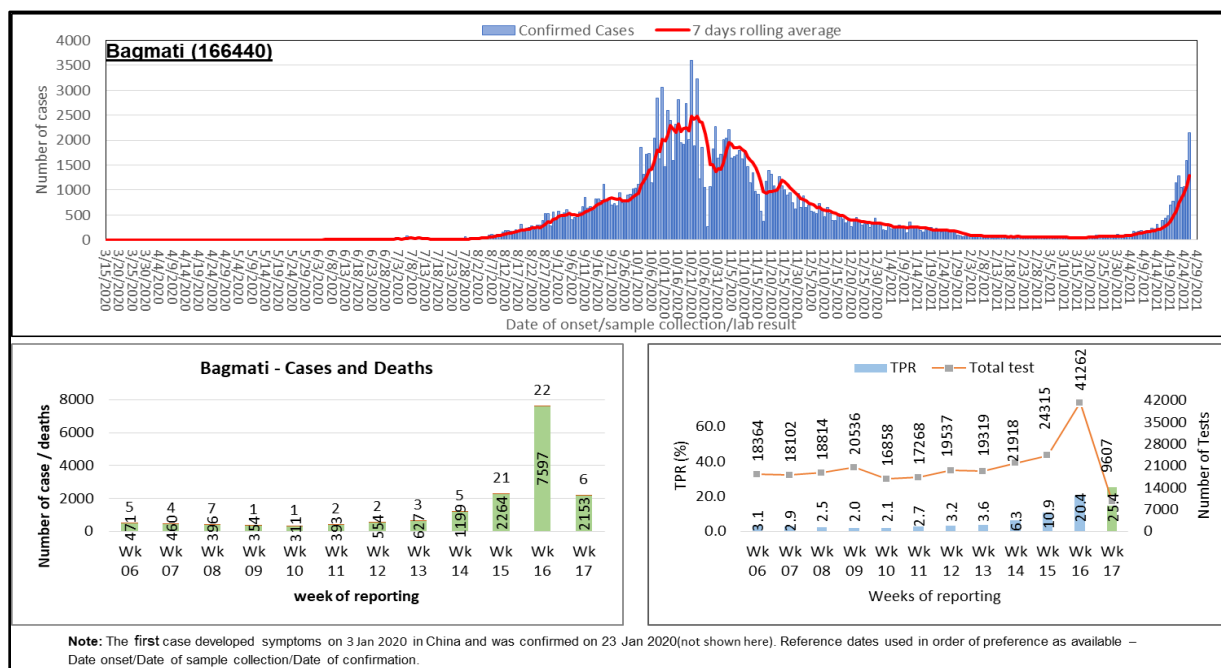
Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces



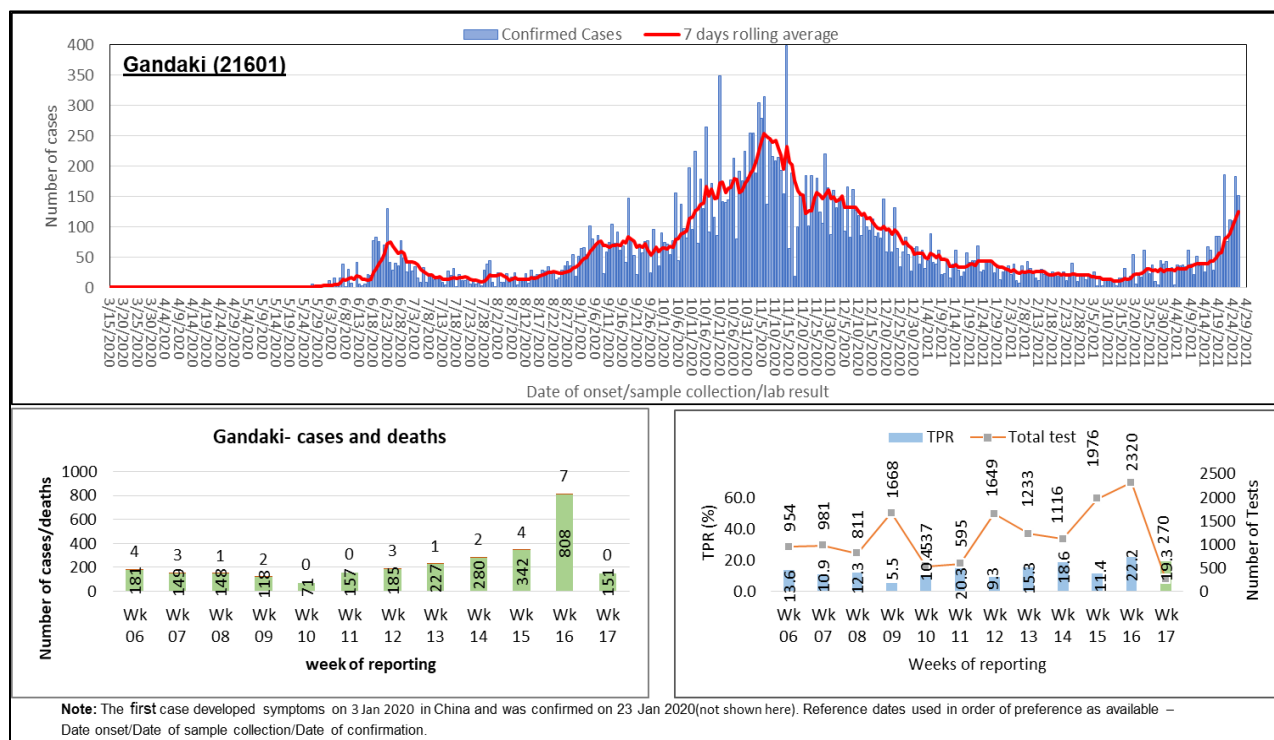
There were 822 new cases reported in the past week in Province 1. Since week 10, new cases are continuously increasing. The cases have increased by 220% in the past week compared to the previous week. There were 4 deaths reported in the past week, an increase from no deaths in the previous week. The test positivity rate in Province 1 increased to 22.0% in the past week. A total of 3306 tests were performed in the past week, 65% more than that of the previous week.



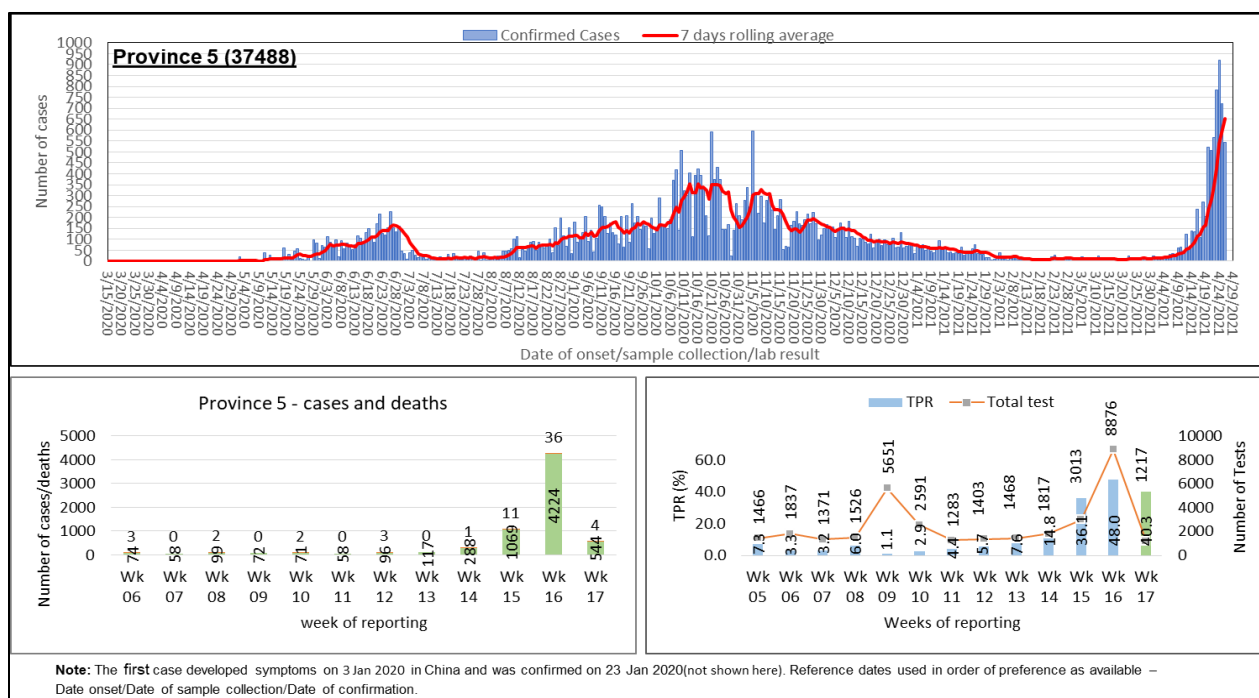
There were 929 new cases reported in the past week in Province 2. Since week 11, new cases are steadily increasing. The cases have increased by 138% in the past week compared to the previous week. There were 8 deaths reported in the past week, 167% more than that of the previous week. The test positivity rate in Province 2 increased to 51.8% in the past week. A total of 1397 tests were performed in the past week, 100% more than that of the previous week.



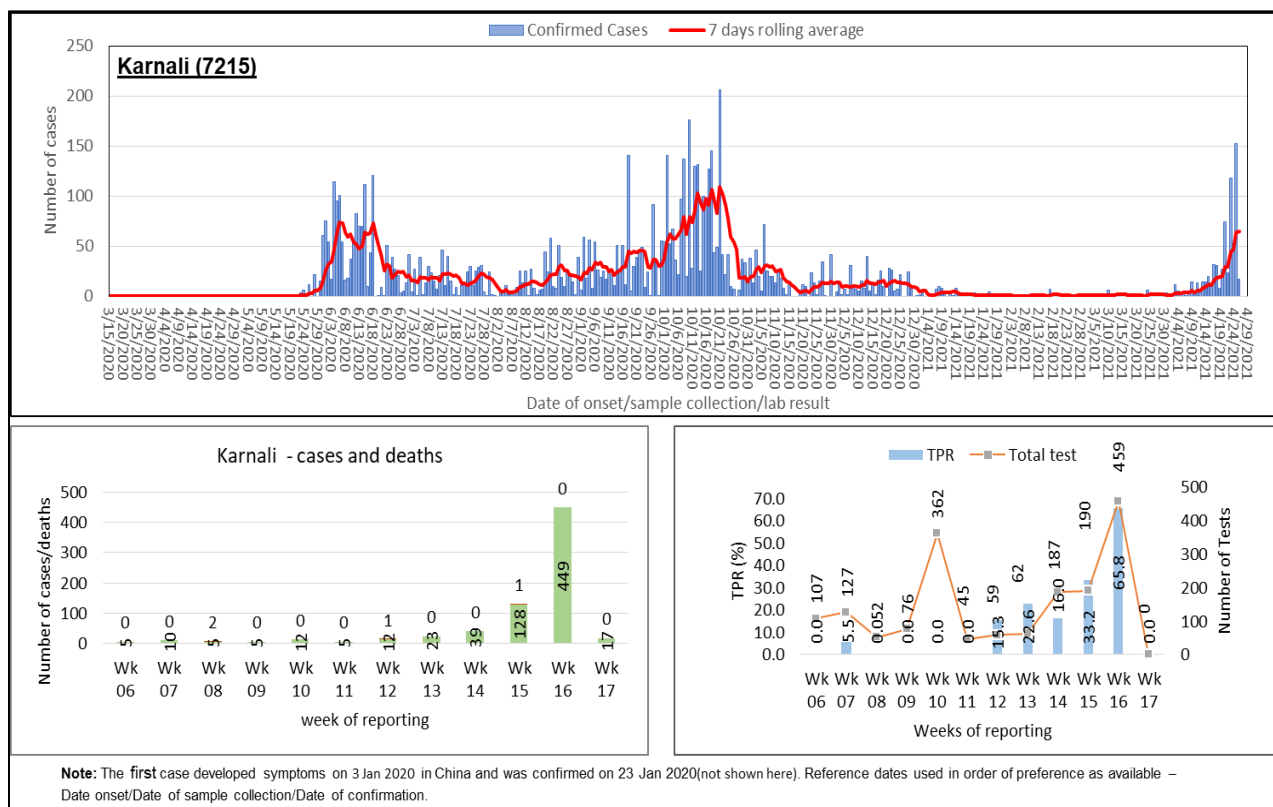
In Bagmati, 7597 new cases were reported in the past week. Since week 11, new cases are continuously increasing. The cases have increased by 236% in the past week compared to the previous week. There were 22 deaths reported in the past week, 5% more than that of the previous week. The test positivity rate in Bagmati increased to 20.4% in the past week. A total of 41262 tests were performed in the past week, 70% more than that of the previous week.



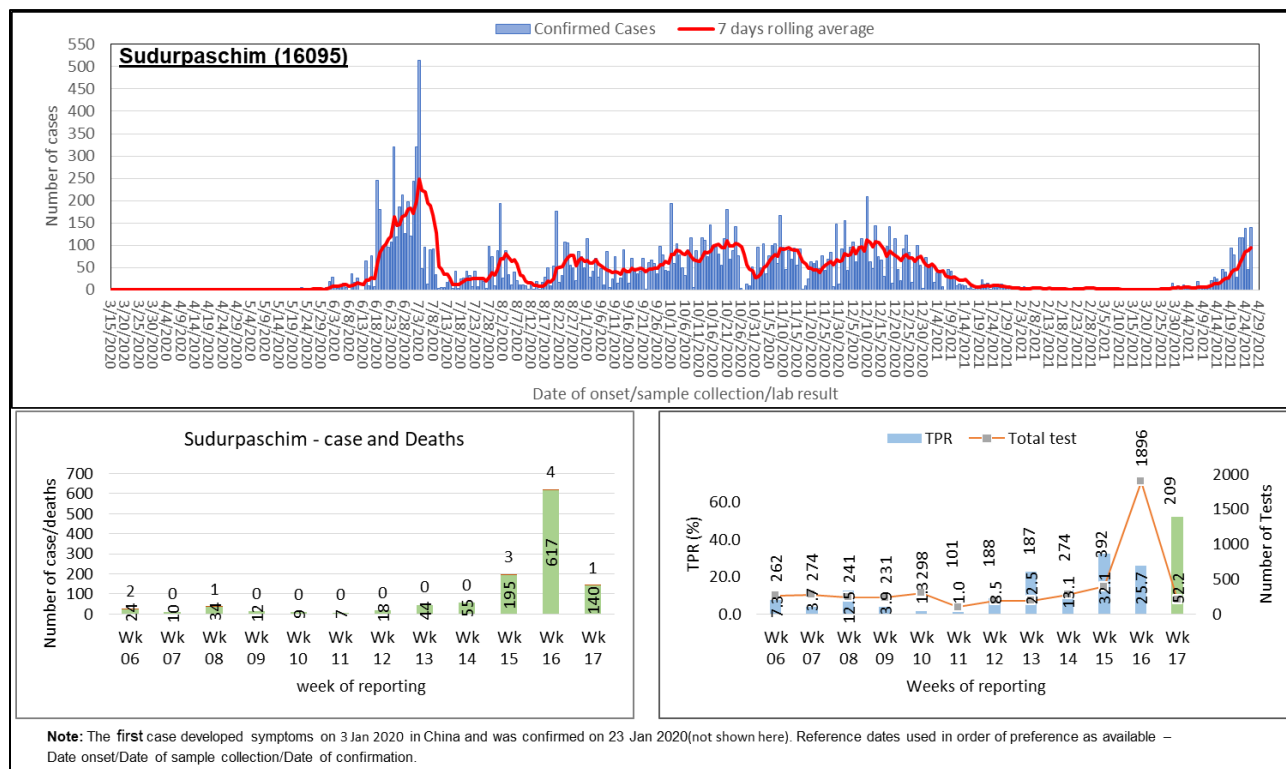
In Gandaki, 808 new cases were reported in the past week. Since week 11, new cases are continuously increasing. The cases have increased by 136% in the past week compared to the previous week. There were 7 deaths reported in the past week, which is 75% more than that of the previous week. The test positivity rate in Gandaki has increased to 22.2% in the past week. A total of 2320 tests were performed in the past week, which is 17% more than that of the previous week.



Lumbini reported 4224 new cases in the past week. Since week 12, new cases are considerably increasing. The cases have increased by 295% in the past week compared to the previous week. There were 36 deaths reported in the past week, which is 227% more than that of the previous week. The test positivity rate in Lumbini increased to 48.0% in the past week. A total of 8876 tests were performed in the past week, which is 195% more than that of the previous week.

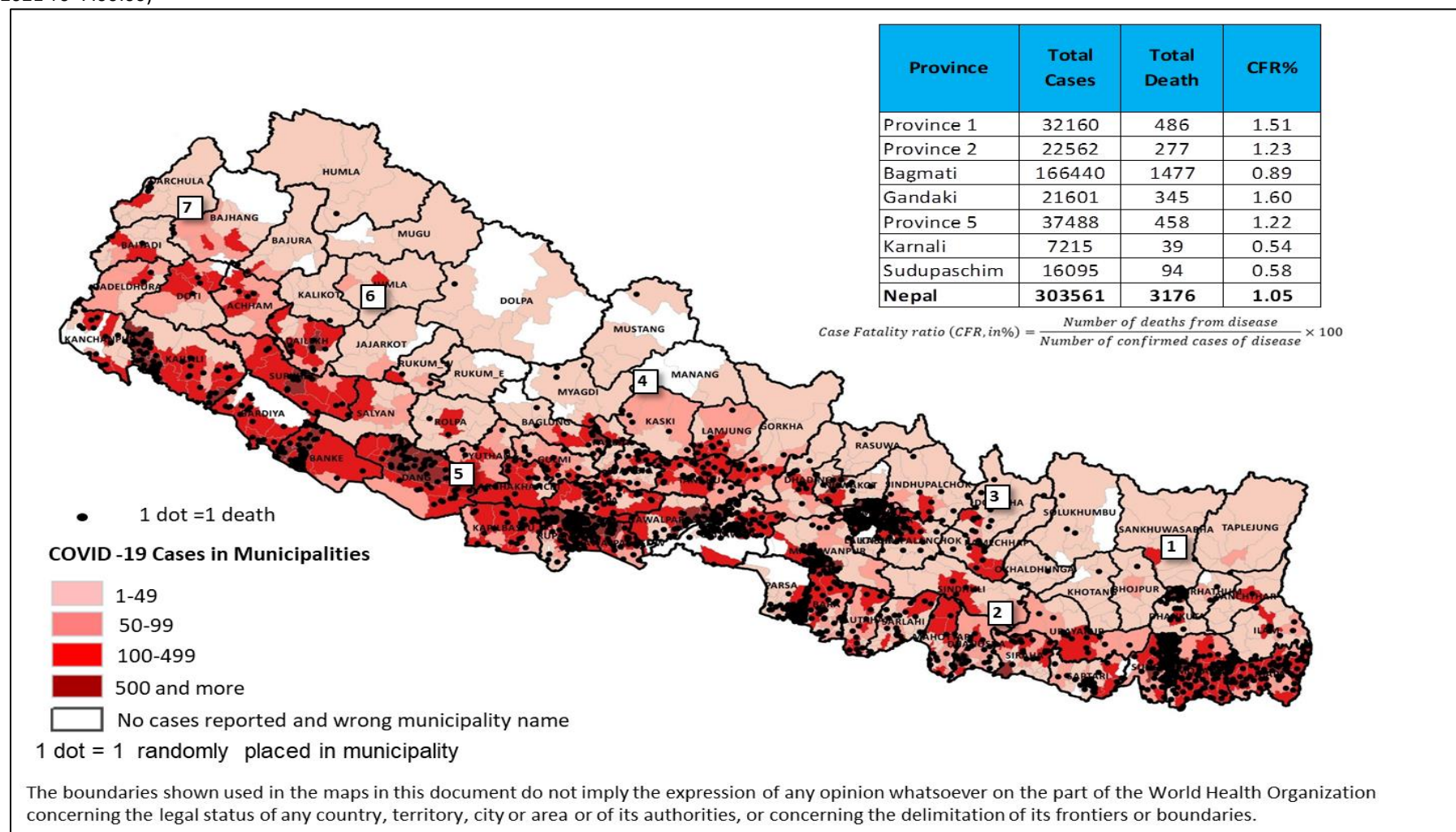


In Karnali, 449 new cases were reported in the past week. Since week 12, new cases are continuously increasing. The cases have increased by 251% in the past week compared to the previous week. There was 1 death reported in the past week, which is an increase from no deaths in the previous week. The test positivity rate in Karnali increased to 33.2% in the past week. A total of 190 tests were performed in the past week, 142% more than that of the previous week.



In Sudurpashchim, 617 new cases were reported in the past week. Since week 12, new cases are continuously increasing. The cases have increased by 216% in the past week compared to the previous week. There were 4 deaths reported in the past week, which is 33% increase from that of the previous week. The test positivity rate in Sudurpashchim decreased to 25.7% in the past week. A total of 1896 tests were performed in the past week, which is 384% more than that in the previous week.

Figure 3: National -Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 303561)(Data updated on 27 April 2021 TO 7:00:00)



Cases and deaths have been reported in high numbers from Bagmati Province, mostly from Kathmandu valley area. The overall case fatality ratio (CFR) of Nepal is 1.1%. However, the CFR is relatively high in Province 1 with 1.5% and Gandaki Province with 1.6%.

Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces.
(N = 303561)(Data updated on 27 April 2021 T0 7:00:00)

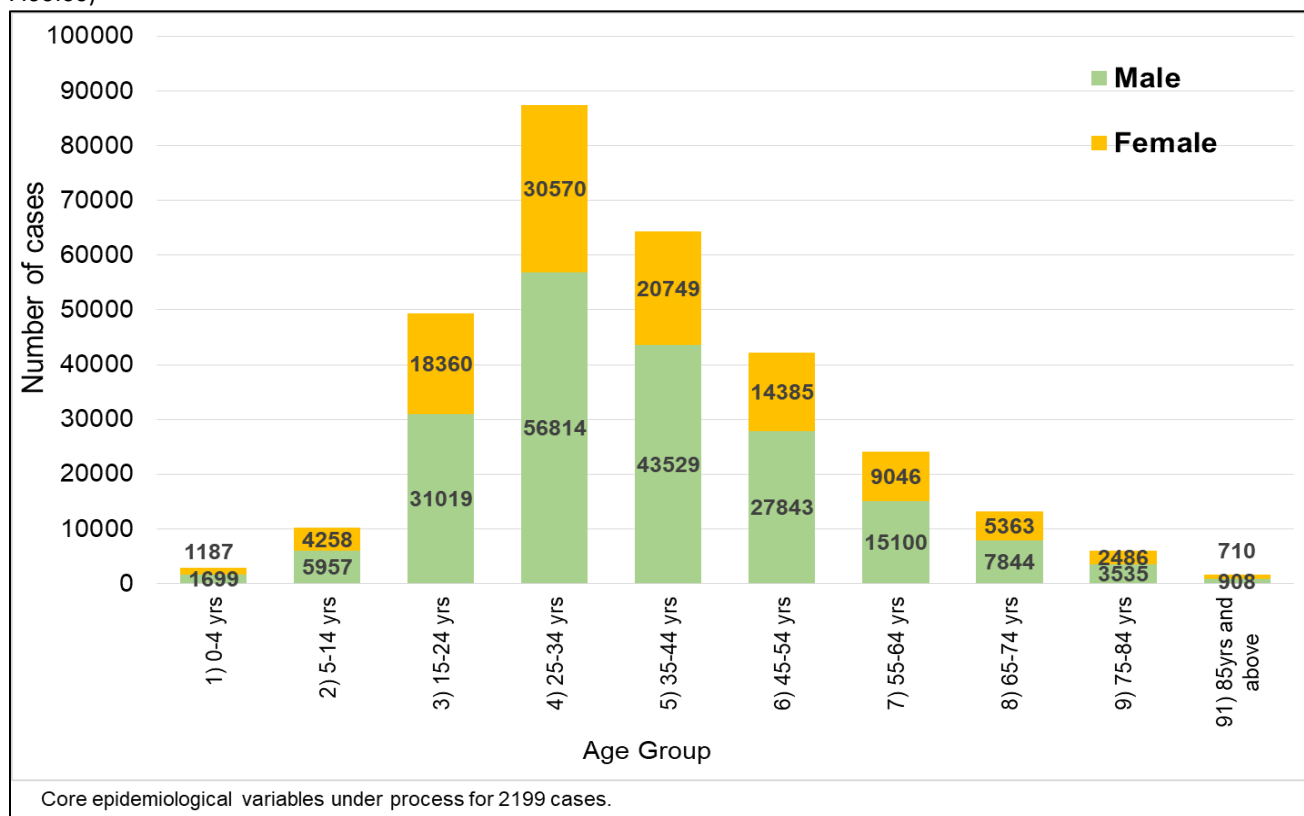
Reporting Province	Total confirmed cumulative cases	% of the total confirmed cumulative cases	Total cumulative deaths	Transmission classification*	Total confirmed cases in last 14 days	Total deaths in last 14 days
Province 1	32160	10.6	486	Cluster of cases	1291	4
Province 2	22562	7.4	277	Cluster of cases	1468	11
Bagmati	166440	54.8	1477	Cluster of cases	11779	46
Gandaki	21601	7.1	345	Cluster of cases	1265	8
Province 5	37488	12.3	458	Cluster of cases	5715	47
Karnali	7215	2.4	39	Cluster of cases	588	1
Sudurpashchim	16095	5.3	94	Cluster of cases	931	6
National Total	303561	100	3176	Cluster of cases	23037	123

- Date of last case is the date of onset or date of sample collection or date of lab report based on information available.

*Revised [WHO transmission classification](#)

Category name	Definition : Countries/territories/areas with:
No (active) cases	No new cases detected for at least 28 days (two times the maximum incubation period), in the presence of a robust (where COVID-19 surveillance is not robust, a lack of identified cases should not be interpreted as an absence of transmission) surveillance system. This implies a near-zero risk of infection for the general population.
Imported / Sporadic cases	Cases detected in the past 14 days are all imported, sporadic (e.g. laboratory acquired or zoonotic) or are all linked to imported/sporadic cases, and there are no clear signals of further locally acquired transmission. This implies minimal risk of infection for the general population.
Clusters of cases	Cases detected in the past 14 days are predominantly limited to well- defined clusters that are not directly linked to imported cases, but which are all linked by time, geographic location and common exposures. It is assumed that there are a number of unidentified cases in the area. This implies a low risk of infection to others in the wider community if exposure to these clusters is avoided.
Community transmission – level 1 (CT1)	Low incidence of locally acquired, widely dispersed cases detected in the past 14 days, with many of the cases not linked to specific clusters; transmission may be focused in certain population sub-groups. Low risk of infection for the general population.
Community transmission – level 2 (CT2)	Moderate incidence of locally acquired, widely dispersed cases detected in the past 14 days; transmission less focused in certain population sub- groups. Moderate risk of infection for the general population.
Community transmission – level 3 (CT3)	High incidence of locally acquired, widely dispersed cases in the past 14 days; transmission widespread and not focused in population sub-groups. High risk of infection for the general population.
Community transmission – level 4 (CT4)	Very high incidence of locally acquired, widely dispersed cases in the past 14 days. Very high risk of infection for the general population.

Figure 4: Distribution of COVID-19 cases by age and sex (N = 301362)(Data updated on 27 April 2021 T0 7:00:00)



Overall, the sex-distribution remains skewed towards males. The incidence of cases is higher in the economically productive age group (15-54 years) for both males and females.

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases (N = 303561)(Data updated on 27 April 2021 T0 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	2886	8	8	5	0.55
5-14 yrs	10215	6	4	6	0.1
15-24 yrs	49379	28	32	33	0.12
25-34 yrs	87384	88	44	50	0.15
35-44 yrs	64278	176	76	98	0.39
45-54 yrs	42228	316	123	208	1.04
55-64 yrs	24146	434	163	323	2.47
65-74 yrs	13207	562	257	457	6.2
75-84 yrs	6021	416	202	364	10.26
85+ yrs	1618	158	68	125	13.97
Unknown	2199	4	3	6	0.32
National	303561	2196	980	1675	1.05

$$\text{Case Fatality ratio (CFR, in\%)} = \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \times 100$$

COVID-19 positive lab result is temporally associated with death; causal association under investigation.

A total of 3,176 deaths have been reported. Out of the total deaths, 2,196 (69.1%) were males and 980 (30.9%) were females. Amongst the deaths, 1,675 persons (52.7%) had at least one known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1%, CFR progressively increases with age beyond 65 years of age, ranging from 6.2% to 14.0%.

PREPAREDNESS AND RESPONSE

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

- The First Priority Second Dose using COVISHIELD vaccine started from 20 April 2021. COVISHIELD vaccine is being provided to frontline staff which includes health care workers. The first dose of COVID-19 vaccine was provided to this targeted group three month back. A total of 353,673 people were vaccinated after a 7 day campaign for the 2nd dose of COVISHIELD.
- Moreover, MoHP has decided to extend COVID-19 vaccination campaign using Verocell in selected immunization sessions of the Kathmandu valley. As of 26 April 2021, a total of 199,741 people were vaccinated.
- Due to rise in number of COVID-19 cases and deaths due to COVID-19, MoHP has deployed senior officials (Chief Specialists; Director General and Directors, Department of Health Services) to the each province. These visits from senior officials have been made to support, coordinate and facilitate the COVID-19 response on the ground. The team will work with Ministry of Social Development (MoSD) officials, Chief District Officers and Health Officers to guide the field operations.
 - Province 1: Dr Roshan Pokhrel, Chief Specialist, MoHP and Dr Pawan Jung Raymajhi, MoHP
 - Province 2: Mr Mohammad Daud, Director, National Health Training Center and Mr Bhim Prasad Sapkota, Sr. Public Health Administrator, MoHP
 - Gandaki Province: Dr Guna Raj Lohani, Chief, Policy Planning and Monitoring Division (PPMD), MoHP and Dr Madan Upadhyay, Director, Curative Service Division
 - Gandaki: Dr Guna Raj Lohani Chief, PPMD, MoHP and Dr Prakash Shah, MoHP
 - Lumbini Province: Mr Mahendra Shrestha, Chief Specialist, MoHP and Dr Roshan Neupane, MoHP
 - Karnali Province: Dr Dipendra Raman Singh, Director General/DoHS and Mr Keshav Pandit, MoHP
 - Sudurpashchim Province: Dr Dipendra Raman Singh, DG, DoHS and Ms Rita Joshi, MoHP

What is the WHO Country Office for Nepal doing?

Laboratory Capacity

- WHO Nepal has been providing support to the National Public Health Laboratory (NPHL) in monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 8 designated COVID-19 laboratories participated in the NQAP this week. The result of all participating laboratories was satisfactory $\geq 90\%$.
- WHO Nepal also provided technical support to NPHL for screening of S-gene in SARS-CoV2 positive samples received from Bheri Hospital.
 - NPHL received 331 positive samples from the Bheri, of which 6 samples were not processed due to insufficient sample quantity.
 - Only 298 of the 325 samples showed positive result.
 - Of the 298 positive samples, 262 samples were positive for S positive and 36 reported S negative.
- WHO Nepal also supported meetings conducted by NPHL with designated COVID-19 laboratories to update the laboratory status and address the issues and challenges of those laboratories.
 - Virtual Meeting was held with staffs from NPHL and laboratory focal persons from Lumbini Province, Karnali Province and Sudurpashchim Province on 25 April 2021.
 - Likewise, a virtual meeting was held with staffs from NPHL and laboratory focal persons from Province 1 & Province 2 on 26 April 2021.

Technical Planning and Operations

- WHO Nepal has provided technical support to MoHP in following activities:
 - Epidemiology and Disease Control Division, DoHS for the development of Clinical Management Pocketbook, 2nd edition. This has been submitted to MoHP for endorsement.
 - Assessment and estimation of medical supportive devices for preparation and response to the second wave of COVID 19 in Nepal.
 - Health Emergency Operation Center (HEOC) for the installation of Telemedicine center. The Tele-medicine equipment has been installed in all provinces including Central telemedicine centre (TUTH). A virtual meeting was conducted on 26 April 2021 with Telemedicine focal persons of all sites by HEOC, MoHP and the WHO representative. The meeting was focused on the modalities of regularly using the telemedicine services and engaging the necessary human resources to make it functional and standard operating procedure.
 - Development of Infection Prevention and Control (IPC) guidelines related to respiratory devices and submitted to MoHP.
 - Development of guidelines related to oxygen cylinder handling and safety measures and submitted to MoHP.
 - Mapping of oxygen manufacturer and oxygen demand forecast and submitted to MoHP.

- WHO Nepal has been supporting senior level Officials of MoHP for COVID-19 response activities at provincial, district and local level by deploying human resources from central level to provincial level.
- WHO Nepal is also providing financial and technical support to the Nursing and Social Security Division (NSSD) for a 5 day clinical skills training program on “Development of pool of Trainers for IPC” for nurses. The training began on 18 April 2021 at National Health Training Center, Kathmandu and ended on 22 April 2021. A total of 16 nurses were trained from different hospitals and from the Nursing and Social Security Division (NSSD).

Risk Communication and Community Engagement

- Following documents were translated (20 - 26 April 2021):

SN	NAME OF THE DOCUMENT	TYPE
1	Order for Prevention and Control of COVID-19 by the Government of Nepal	Notice
2	Vaccine Type Agnostic Talking Points On Vaccine Efficacy	FAQs

- Science in 5 videos translated, dubbed, and published:

Episodes	Titles	Language	Link
34	Vaccines, variants & mass gatherings कोभिड - १९ खोपसभ, संस्करणस आ बृहत जमघटसभ	Maithili	Link
34	Vaccines, variants & mass gatherings कोभिड - १९ खोप, भाइरसका स्वरूप तथा सामूहिक भेलाहरू	Nepali	Link

- Infographics on precautionary measures to adopt during festival season continued to be shared on WCO Nepal social media. The infographic pack can be downloaded via Facebook [here](#).
- IEC materials on COVID-19 vaccines and prevention measures targeted towards vulnerable groups continued to be shared on WCO Nepal social media.
- IEC materials on World Immunization Week, highlighting the importance of vaccines, were shared on WCO Nepal social media.

Field Operation and Logistics

- WHO Nepal received 150 WANTAI ELISA Diagnostic kits for total antibody to SARS-CoV-2. The kits were purchased from WHO global procurement system on 26 April 2021 from China. The diagnostic kits were then handed over to NPHL on the same day. The kits will be used for sample testing purpose for the second round seroprevalence study.

What are the health cluster partners doing?

- Weekly Health Cluster Coordination meeting (every Thursday) for health sector response is ongoing at the Federal level for coordinated COVID-19 response support to MoHP. Provincial Health Directorate Offices are organizing the Provincial Level Health Cluster Coordination meeting as and when on required basis.

- MOHP has decided to re-convene the weekly coordination meeting (every Tuesday) with COVID hospitals and Provincial Health Directorate Officers from 20 April 2021 onwards.
- Health partners are providing their support to government for the continuation of COVID and non-COVID responses throughout the country. The support provided through Ministry of Health and Population (MOHP) especially with Health Emergency Operation Centre (HEOC), Health Coordination Division (HCD), Policy, Planning & Monitoring Division (PP&MD), Epidemiology and Diseases Control Division (EDCD), National Public Health Laboratory (NPHL), National Health Training Centre (NHTC), National Health Education Information Communication Centre (NHEICC), Family Welfare Division (FWD), Management Division (MD), Hub hospital networks; Ministry of Social Development (MOSD) especially with Provincial Health Directorate Offices, District Public/Health Offices, and municipalities.
- WHO and UNICEF are providing support for the COVID-19 vaccination campaign in close coordination with External Development Partners (EDPs) which includes:
 - Micro planning including financing for the procurement of vaccination;
 - Training/orientations – to health personnel at various levels, local governments;
 - Provision of Logistics support – vehicle, cold chain boxes, delivery of vaccines, transportation of beneficiaries to the vaccination site;
 - Information Technology-registration, information communication, data management, IMU app etc;
 - Risk communication and community engagement – production and dissemination of messages, public awareness campaigns and
 - Continuation of Technical Assistance.

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 corona virus 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 corona virus disease situation dashboard can be found [here](#)
- Visit the WHO Nepal [Facebook page](#) and webpage on COVID-19 [here](#)

CONTACT DETAILS

WHO Representative

Dr. Rajesh Sambhajirao Pandav
WHO Representative to the
Government of Nepal
Email: pandavr@who.int

Health Cluster Co-lead

Saira Khan
Pillar Lead – Partner Coordination
WHO Country Office for Nepal
COVID-19 Response IMS
Email: khansai@who.int

WHO Incident Manager

Dr Reuben Samuel
Senior Health Emergency Officer,
WHO Health Emergencies Program
(WHE)
WHO, SEARO
Email: samuelsr@who.int

Communication/Media Focal Point

Tsering Dolkar Gurung
Media, Communication and Public
Information Officer
WHO Country Office for Nepal
Email: gurungt@who.int