

COVID-19, Mpox, and Travel Advisories

Situational Report in the ASEAN Region

ASEAN BioDiaspora Virtual Center (ABVC)

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COVID-19: Highlights and Situation Overview

Global Update

- Worldwide, there have been over 642 million cases and over 6 million deaths attributed to COVID-19.
- China will be shifting its COVID-19 restrictions which will be officially announced by the government these coming days. Meanwhile, some communities in Beijing and elsewhere have already allowed close contacts of COVID-19 cases to quarantine at home, while some shopping malls in the capital have reopened since December 1. Some areas in Guangzhou have also resumed dine-in services, and residents are no longer asked to present negative PCR tests to enter. However, areas designated as high risk will remain under lockdown, and individuals are still required to undergo daily tests.

Regional Update

• Indonesia: Budi Gunadi Sadikin, Indonesia's Health Minister, claimed that the government's goal in the health sector has switched from COVID-19 pandemic response to quality enhancement of public health services. As a result, the Health Ministry will allocate a suitable budget for the rehabilitation of health facilities as well as promotional and preventive initiatives. Budi's second priority is to restructure hospitals across the archipelago in order to improve public health services, particularly for lethal diseases with significant expenses like heart disease, stroke, and cancer. The third priority will be to develop the health industry in collaboration with the Industry Ministry. The fourth priority is human resource development. In this regard, the Ministry of Health will collaborate closely with the Ministries of Education, Culture, Research, and Technology, as well as Religious Affairs, to ensure that there are enough specialist doctors. The fifth priority is to strengthen the health-care finance system. People have begun to check their health condition for various ailments two years after the COVID-19 pandemic and throughout the present recovery. [Full Article]

Vaccine Update

• Malaysia: The government of Selangor is considering selling Covid-19 vaccines to other countries. Menteri Besar Amirudin Shari stated that the state administration was also thinking about distributing excess Covid-19 vaccines in its supply to foreign workers who had not yet been immunized. [Full Article]

Research Update (Published and peer-reviewed studies)

• In the study A prospective, randomized, open-label trial of early versus late povidone-iodine gargling in patients with COVID-19, researchers investigated whether gargling with povidone-iodine reduces salivary viral load and infectivity in a large number of COVID-19 patients.\(^1\) A total of 430 adolescent and adult patients with asymptomatic or mild COVID-19 were recruited from three quarantine centers in Osaka, Japan where patients were randomly divided into two groups: the early intervention group and the late intervention group.\(^1\) The early intervention group patients started mouth washing and gargling on day 2 post-saliva sampling and continued until day 6.\(^1\) The late intervention group patients, instead, mouth washed and gargled on days 5 and 6.\(^1\) The saliva samples collected from the patients were tested for both viral load and viral infectivity.\(^1\) The viral clearance rate in saliva samples at day 5 was estimated to be 34% and 21% in the early intervention group and the late intervention group, respectively.\(^1\) These observations indicate that gargling with povidone-iodine for the initial three days is significantly more effective than gargling with water in reducing salivary viral load.\(^1\)



Furthermore, the viral infectivity in saliva samples at day 5 was estimated to be 3% and 9% in the early intervention group and the late intervention group, respectively. These observations indicate that gargling with povidone-iodine is effective in reducing disease transmission. The study findings demonstrate that gargling with povidone-iodine can accelerate salivary SARS-CoV-2 clearance and reduce viral transmission via salivary droplets and aerosols in patients with asymptomatic or mild COVID-19. [Full Text]

- The study on Post-COVID-19 syndrome risk factors and further use of health services in East England reported persistent long-COVID symptoms and continued use of health services in early 2021, with a disproportionate burden among overweight women.² The researchers examined primary care records, and in February of 2021 sent an online survey on lingering symptoms and healthcare use infected with the virus in December 2020, before COVID-19 vaccines were widely available.² Of 1,487 survey respondents, 52.1% reported long-COVID symptoms.² A total of 25.4% of participants used more health services after they recovered from their initial infections, of whom 73.2% reported long-COVID symptoms.² Long-COVID patients had significantly higher odds of seeking further health services than those without persistent symptoms.² [Full Text]
- The study Medical Masks Versus N95 Respirators for Preventing COVID-19 Among Health Care Workers suggests that medical masks may offer similar effectiveness as N95 respirators in protecting healthcare workers (HCWs) exposed to COVID-19 patients in certain settings.³ This is the first peer-reviewed randomized clinical trial comparing medical masks versus N95 respirators in preventing COVID-19 among healthcare workers (HCWs).3 The randomized trial tracked COVID-19 infections among 1,009 HCWs directly taking care of COVID-19 patients at 29 hospitals in Canada, Israel, Pakistan, and Egypt from May 2020 to March 2022. HCWs were randomly assigned to wear either medical masks or a fit-tested N95 filtering facepiece respirator (FFR) for 10 weeks.³ COVID-19 infection was confirmed using RT-PCR in 52 of the 497 (10.46%) HCWs in the medical mask group, compared with 47 of 507 (9.27%) in the N95 group.³ Among healthcare workers who provided routine care to patients with COVID-19, the overall estimates rule out a doubling in the hazard of RT-PCR-confirmed COVID-19 for medical masks when compared with the hazard ratio of RT-PCR-confirmed COVID-19 for N95 respirators.³ However, the authors cautioned that HCWs could have been infected outside of the hospital and that the results may not apply to other countries because of differences in treatment effects.3 [Full Text]
- HIV service use decreased after the COVID-19 public health emergency declaration in March 2020.4 This study, HIV Services and Outcomes During the COVID-19 Pandemic — United States, 2019-2021, evaluated HIV service delivery during the pandemic. 4 2019-2021 laboratory data from LabCorp and Quest Diagnostics estimated the number of HIV tests, IQVIA data showed anti-retroviral drug dispensed and NHSS data identified the number of persons who received a diagnosis of HIV infection and the proportion of those persons linked to care within 1 month of diagnosis. 4 Poisson regression models were used to assess trends in service use and outcomes by calculating the estimated quarterly percent change (EQPC) during 2019–2021 and 95% Cls; these models were also used to assess whether changes in the number of HIV tests and number of persons prescribed PrEP from Q1 to Q2 during 2020 differed significantly among age groups.⁴ In 2020, the number of HIV tests and the number of persons prescribed preexposure prophylaxis (PrEP) decreased between the first and second calendar quarters but rebounded by the third quarter.4 The proportion of persons linked to HIV care, the number prescribed antiretroviral therapy, and the proportion with a suppressed viral load among those tested remained stable during the study period.4 [Full Text]
- The National Health and Nutrition Examination Survey (NHANES) collects SARS-CoV-2 serology data among a sample of the general U.S. civilian population and self-reported COVID-19 vaccination and disease history.⁵ This NHANES data can be used to better



quantify asymptomatic SARS-CoV-2 infection prevalence and seropositivity attained through infection without vaccination.⁵ Preliminary NHANES 2021–2022 results showed that a high percentage of U.S. adults have antibodies to SARS-CoV-2, attained through vaccination, infection, or both.⁵ Further analysis in this study, SARS-CoV-2 Serology and Self-Reported Infection Among Adults — National Health and Nutrition Examination Survey, United States, August 2021-May 2022, showed that during August 2021-May 2022, 41.6% of a convenience sample of adults had both anti-spike antibodies (indicating previous infection or vaccination) and anti-nucleocapsid antibodies (indicating previous infection only); 43.7% of these persons were possibly asymptomatically infected.⁵ Prevalence of serologic patterns consistent with vaccination without infection was lower among adults who were younger, Hispanic and non-Hispanic Black or African American adults, and persons with less education.⁵ What are the implications for public health practice? CDC recommends that everyone stay up to date with COVID-19 vaccination. These results can guide ongoing efforts that are needed to achieve equity in primary series vaccination and booster dose coverage.5 [Full Text]

On September 1, 2022, bivalent COVID-19 mRNA vaccines, composed of components from the SARS-CoV-2 ancestral and Omicron BA.4/BA.5 strains, were recommended by the Advisory Committee on Immunization Practices (ACIP) to address reduced effectiveness of COVID-19 monovalent vaccines during SARS-CoV-2 Omicron variant predominance.⁶ Initial recommendations included persons aged ≥12 years (Pfizer-BioNTech) and ≥18 years (Moderna) who had completed at least a primary series of any FDA authorized or approved monovalent vaccine ≥2 months earlier.⁶ On October 12, 2022, the recommendation was expanded to include children aged 5-11 years.⁶ At the time of recommendation, immunogenicity data were available from clinical trials of bivalent vaccines composed of ancestral and Omicron BA.1 strains; however, no clinical efficacy data were available. In this study, Effectiveness of Bivalent mRNA Vaccines in Preventing Symptomatic SARS-CoV-2 Infection — Increasing Community Access to Testing Program, United States, September-November 2022, data from the Increasing Community Access to Testing (ICATT) national SARS-CoV-2 testing program showed that bivalent boosters provided significant additional protection against symptomatic SARS-CoV-2 infection in persons who had previously received 2, 3, or 4 monovalent vaccine doses.⁶ Due to waning immunity of monovalent doses, the benefit of the bivalent booster increased with time since receipt of the most recent monovalent vaccine dose. [Full Text]

Travel Update

• **Philippines:** Beginning Friday, December 2, all international travelers going for the Philippines must furnish arrival and health information via a new website. Travelers can obtain an electronic arrival card via the new "eTravel" platform, which can be accessed at etravel.gov.ph. It takes the place of the One Health Pass platform. All international and Filipino visitors, including newborns and minors, must register separately 72 hours before their arrival in the Philippines. Beginning Monday, December 5, the One Health Pass and the paper arrival card will be phased out. Currently, the One Health Pass website directs visitors to the eTravel platform.

ASEAN Travel Advisories (new update/s)

as of 02 December 2022

ASEAN Country	Published	Foreign travelers allowed	COVID-19 vaccination requirement	Required COVID-19 testing for fully vaccinated	Required COVID-19 testing for NOT fully vaccinated	Quarantine upon arrival	Health insurance requiremen	Arrival health declaration/ registration/ t documents
Brunei Darussalam	November 29, 21022	Yes	No	No	No	No	No	No
Cambodia	October 6, 2022	Yes	No	No	No	No	No	No
Indonesia	September 14, 2022	Yes	Yes – fully vaccinated* certificate for 18 years old and above.	No, but may be subject to RT-PCR upon arrival	Foreign travelers who are not fully vaccinated may not be allowed to enter Indonesia or may be subjected to RT-PCR test upon arrival	No	No	Traveler is required to download and register at PeduliLindungi app before departure.
Laos	October 25, 2022	Yes	Yes – fully vaccinated* certificate.	No	Yes-Negative rapid antigen test within 48 hours before departure.	No	No	No
Malaysia	August 2, 2022	Yes	No	No	No	No	No	No
Myanmar	December 1, 2022	Yes	Yes – fully vaccinated* certificate for 12 years old and above.	Yes – printed negative COVID-19 antigen test result for 12 years old and above taken within 48 hours before arrival.	Foreign travelers who are not fully vaccinated are not allowed to enter or transit Myanmar.	No	Required obtain <u>Myanmar</u> <u>Insurance</u>	to No
Philippines	December 1,2022	Yes	Yes – fully vaccinated* with booster dose certificate for 15 years old and above.	No	Yes – COVID-19 rapid antigen test taken at most 24 hours before departure or subject to a rapid test upon arrival.	No	No	Traveler is required to download and register at E-arrival card at most 3 days before departure for those without visa.
Singapore	September 27, 2022	Yes	Yes – fully vaccinated* certificate vaccination	No	Yes – Negative COVID-19 test within 48 hours before departure for	No	No	Traveler is required to download and register at SG Arrival Card app before departure.

			status on the		travelers born on or			
			HealthHub app		before December			
			or		31, 2009.			
			<u>TraceTogether</u>					
			app or					
			acceptance					
			letter issued by					
			the <u>Safe Travel</u>					
			Office (STO) or					
			SGAC					
			acknowledgm					
			ent email.					
Thailand	October 1, 2022	Yes	No	No	No	No	No	No
Vietnam	May 16, 2022	Yes	No	No	No	No	No	No

- Reference: IATA Travel Centre
- *Fully vaccinated at least 14 or 15 days from 2nd dose for two-dose vaccine or 14 or 15 days from a single dose vaccine upon arrival.

COVID-19 Cases and Deaths as of 02 December 2022

- As of 02 December 2022 (2PM, GMT+8), worldwide, there were **642,027,275** confirmed cases, including **6,634,458** deaths. Globally, Case Fatality Rate (CFR) was **1.2%**.
- 35,319,313 confirmed cases of COVID-19 have been reported in the ASEAN Region.
- The Case Fatality Rate in the **ASEAN** Region is range between **0.1 to 3.1%**.

COVID-19 cases in ASEAN region

REGION	COUNTRY	FIRST CONFIRMED CASE(S)	LATEST REPORT ON CONFIRMED CASE(S)	TOTAL CONFIRMED CASES	NEW CASES	TOTAL DEATHS	NEW DEATHS	CUMULATIVE CASES/ 100,000	CUMULATIVE VACCINATED	CUMULATIVE FULLY VACCINATED	CUMULATIVE BOOSTERED	FULLY VACCINATED/ 100
ASEAN	Brunei Darussalam	10 Mar 20	01-Dec-22	241,044	-	225	-	55,632	450,404	445,929	338,987	99.32
REGION	Cambodia	27 Jan 20	01-Dec-22	138,106	7	3,056	-	838	15,226,312	14,590,810	10,358,897	87.02
	Indonesia	02 Mar 20	01-Dec-22	6,669,821	4,977	159,884	54	2,465	204,419,394	171,229,637	65,483,431	62.15
	Lao PDR	24 Mar 20	01-Dec-22	216,744	51	758	-	3,023	5,888,649	5,222,417		69.36
	Malaysia	25 Jan 20	01-Dec-22	4,994,543	2,375	36,695	11	15,632	28,115,175	27,525,970	16,852,398	81.11
	Myanmar	23 Mar 20	01-Dec-22	633,261	44	19,488	-	1,172	34,777,314	27,545,329	2,227,351	50.84
	Philippines	30 Jan 20	01-Dec-22	4,037,547	1,270	64,658	17	3,734	78,196,194	73,738,568	20,946,059	63.81
	Singapore	23 Jan 20	01-Dec-22	2,164,514	1,370	1,703	-	37,950	5,173,107	5,130,595	4,440,289	91.02
	Thailand	13 Jan 20	01-Dec-22	4,707,244	-	33,180	-	6,761	57,005,497	53,486,086	32,143,431	74.6
	Vietnam	23 Jan 20	01-Dec-22	11,516,489	581	43,176	1	11,939	90,156,999	84,690,714	56,988,856	86.25
	ASEAN COUNTRIES			35,319,313	10,675	362,823	83	139,146	519,409,045	463,606,055	209,779,699	

^{*}There have been no tests reported in the last 14 days in the ASEAN Region.

COVID-19 cases in Asia-Pacific region

REGION	COUNTRY/ TERRITORY	FIRST CONFIRMED CASE(S)	LATEST REPORT ON CONFIRMED CASE(S)	TOTAL CONFIRMED CASES	NEW CASES	TOTAL DEATHS	NEW DEATHS	CUMULATIVE CASES/ 100,000	CUMULATIVE VACCINATED	CUMULATIVE FULLY VACCINATED	CUMULATIVE BOOSTERED	FULLY VACCINATED/ 100
ASIA-	Afghanistan	24-Feb-20	01-Dec-22	206,073	166	7,834	1	542	11,292,816	10,587,076		25.74
PACIFIC	Australia	25-Jan-20	30-Nov-22	10,646,942	1	16,090	-	41,509	22,236,640	21,655,294	19,514,697	82.73
REGION	Bangladesh	08-Mar-20	01-Dec-22	2,036,597	12	29,433	-	1,249	148,048,673	125,109,629	58,882,275	73.08
	Bhutan	05-Mar-20	30-Nov-22	62,503	1	21	-	8,191	699,116	677,669	634,641	86.61
	People's Republic of China*		01-Dec-22	10,781,884	29,938	30,388	0	64,015	1,333,988,048	1,300,777,163	209,837,491	88.9
	Cook Islands	17-Feb-22	14-Sep-22	6,389	1	1	-	29,872	15,084	14,708	10,206	86.36
	Fiji	18-Mar-20	25-Nov-22	68,375	1	878	-	7,683	711,256	639,933	169,174	68.83
	French Polynesia	12-Mar-20	30-Nov-22	76,899	-	649	-	27,534	190,765	186,059	112,237	60.75
	Guam	15-Mar-20	28-Nov-22	59,330	-	409	-	35,465	157,888	143,346		85.08
	India	30-Jan-20	01-Dec-22	44,672,638	291	530,622	2	3,269	1,027,045,950	950,765,492	221,380,673	67.09



Japan	16-Jan-20	19-Oct-22	21,858,528	-	46,014	-	17,312	104,397,231	102,995,575	141,861,650	83.09
Kiribati	25-Jan-22	25-Jul-22	3,430	-	13	-	2,917	96,184	73,888	23,419	56.3
Maldives	07-Mar-20	29-Nov-22	185,618	-	311	-	34,959	399,146	385,076	167,176	73.52
Marshall Islands	26-Oct-20	26-Nov-22	15,541	-	17	-	26,434	42,920	34,305		44.13
Micronesia	11-Jan-21	31-Oct-22	22,203	-	55	-	19,508	83,413	69,701		68.12
Mongolia	10-Mar-20	01-Dec-22	992,767	133	2,179	-	30,782	2,272,965	2,175,617	1,044,337	64.02
Nepal	24-Jan-20	01-Dec-22	1,000,894	5	12,019	-	3,499	27,398,529	23,857,858	8,674,375	78.1
New Caledonia	17-Mar-20	29-Nov-22	76,051	-	314	-	26,425	191,660	184,116	93,983	63.5
New Zealand	28-Feb-20	28-Nov-22	1,945,117	-	3,297	-	39,559	4,298,557	4,135,113	3,409,421	79.75
Niue	03-Sep-21	30-Nov-22	147	-	-	-	6,787	1,255	1,227	1,153	62.86
Northern Mariana Islands	28-Mar-20	01-Nov-22	13,212	-	41	-	23,091	46,279	43,743		84.36
Pakistan	26-Feb-20	01-Dec-22	1,575,226	40	30,632	1	727	139,628,133	132,278,468	48,517,567	56.09
Palau	31-May-21	29-Nov-22	5,785	-	7	-	32,125	20,693	18,441		85.64
Papua New Guinea	21-Mar-20	30-Nov-22	45,917	-	668	-	523	364,090	303,884	30,383	3
Samoa	18-Nov-20	25-Nov-22	15,967	-	29	-	8,101	191,130	177,651	78,912	79.88
Solomon Islands	03-Oct-20	24-Nov-22	24,575	-	153	-	3,669	343,821	254,352	27,783	35.12
Republic of Korea**	20-Jan-20	01-Dec-22	27,193,146	52,955	30,605	53	52,589	45,130,732	44,701,029	41,306,973	86.27
Sri Lanka	27-Jan-20	01-Dec-22	671,687	5	16,805	2	3,081	17,143,761	14,752,827	8,220,002	67.57
Timor Leste	21-Mar-20	01-Dec-22	23,343	5	138	-	1,805	872,617	779,475	291,233	58.11
Tonga	05-Nov-21	06-Sep-22	16,182	-	12	-	15,486	91,949	77,464	38,331	72.49
Türkiye	10-Mar-20	23-Nov-22	17,004,130	-	101,395	-	20,381	57,941,051	53,176,961	41,425,329	62.31
Vanuatu	11-Nov-20	02-Nov-22	11,952	-	14	-	3,986	144,824	131,697	16,996	40.31
Wallis et Futuna	17-Oct-20	28-Jul-22	761	-	7	-	4,749	7,136	6,794	3,742	58.59
		ASIA PACIFIC	141,319,809	83,550	861,050	59	597,822	2,945,494,312	2,791,171,631	805,774,159	

^{*}Includes cases from Hong Kong (SAR), Macau (SAR), and Taiwan (Province of China)

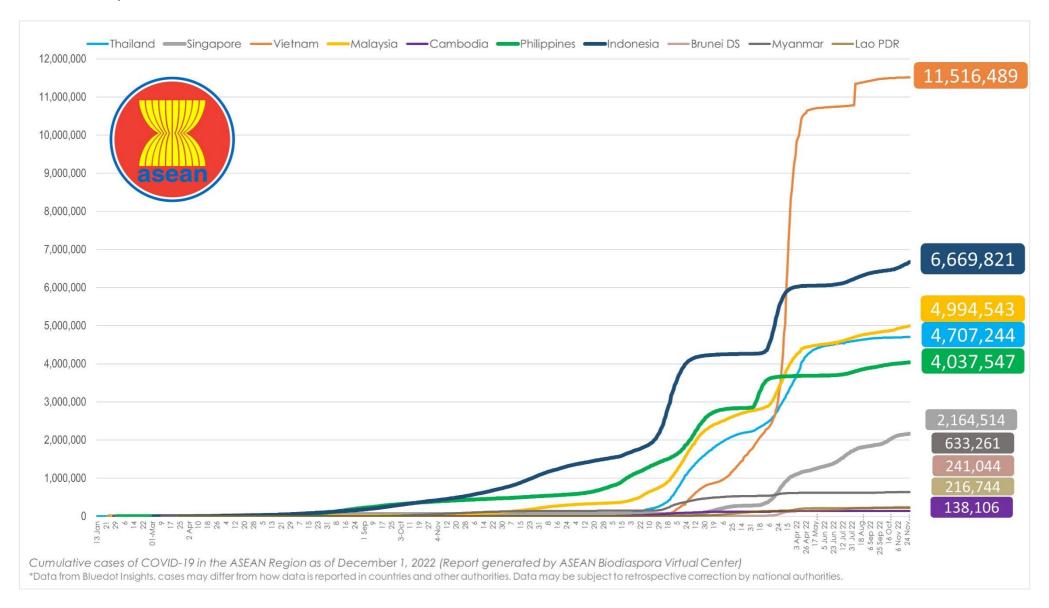
• 465,388,153 confirmed cases of COVID-19 have been reported in other 4 regions (other than ASEAN and Asia-Pacific countries):

REGION	TOTAL CONFIRMED CASES	NEW CASES	TOTAL DEATHS	NEW DEATHS	CUMULATIVE CASES/ 100,000	CUMULATIVE VACCINATED	CUMULATIVE FULLY VACCINATED	CUMULATIVE BOOSTERED
AFRICA	12,969,235	606	259,043	-	245,238	451,976,129	364,582,511	58,399,201
AMERICAS	185,341,940	33,063	2,905,841	179	1,214,024	830,973,940	730,730,606	497,393,901
EUROPE	244,482,955	147,889	2,020,223	594	2,064,003	568,343,874	539,828,836	374,444,725
MIDDLE EAST	22,594,023	1,517	238,615	3	214,253	144,371,039	129,700,373	59,689,210
TOTAL	465,388,153	183,075	5,423,722	776	3,737,518	1,995,664,982	1,764,842,326	989,927,037

^{**} Republic of Korea – South Korea

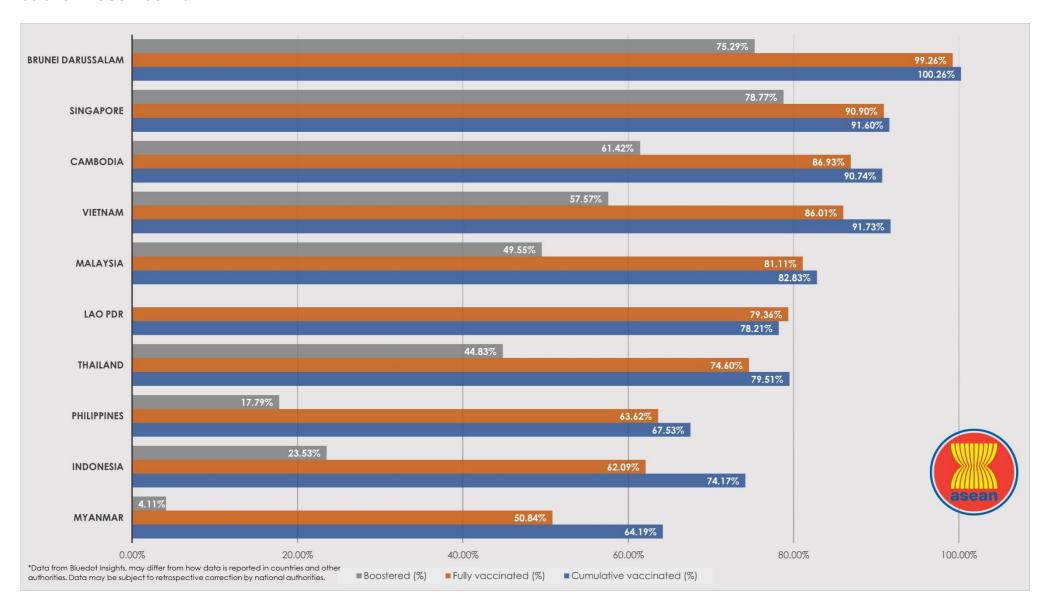
COVID-19 Epi curve among ASEAN Countries

From January 1, 2021 to December 1, 2022



COVID-19 Vaccination Status in ASEAN

as of 01 December 2022



ASEAN COVID-19 Outlook Assessment

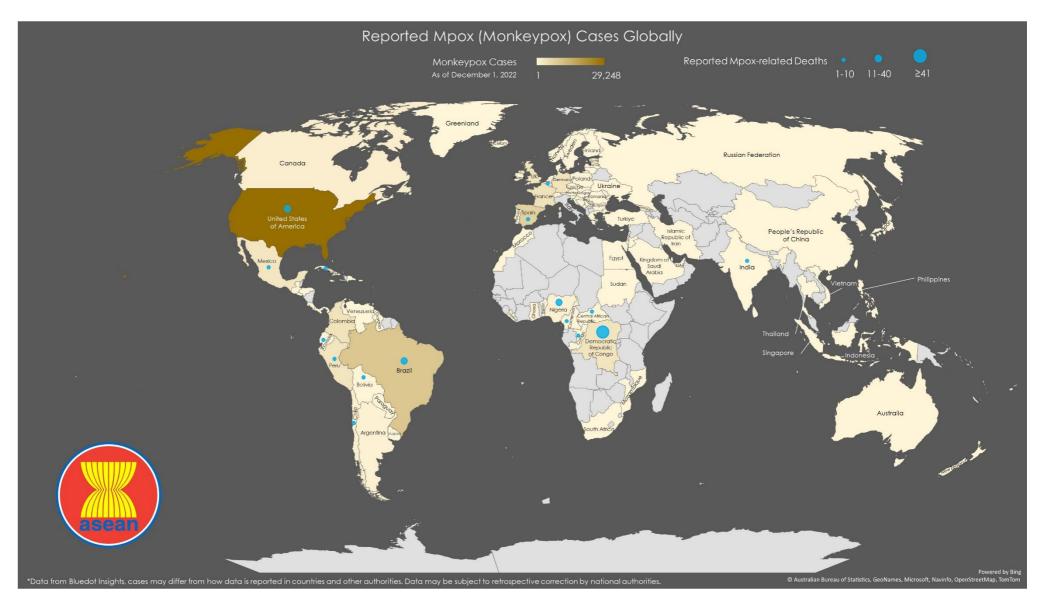
as of 29 November 2022

ASEAN MEMBER STATE	immunity to COVID-19; eit 19 or have been vaccinat	population has a level of her recovered from COVID- ed with at least one dose of 19 vaccine.	Case levels are generally low (a 7-day rolling average number of daily new cases that is <10 cases per 100,000, with each day's past-14-day test positivity is consistently <5%).	Government Policy on containment and health (strictness and comprehensiveness in COVID-19 related government policies)	
	% of Total population fully vaccinated / boostered	Population vaccinated/ day (7-day average)	Daily cases/ 100,000	Containment and health index score - Oxford COVID-19 Government Response Tracker (OxCGRT)	
Brunei Darussalam	≥90.0/75.3	Unknown	0.00	31.0/100	
Cambodia	≥90.0/61.4	Unknown	0.010	31.5/100	
Indonesia	65.5/23.5	Unknown	2.34	54.2/100	
Lao PDR	77.3/ND	Unknown	0.19	61.6/100	
Malaysia	84.5/49.5	0%/day	8.81	51.8/100	
Myanmar	52.1/4.1	Unknown	0.10	69.1/100	
Philippines	71.2/17.8	Unknown	1.14	55.4/100	
Singapore	≥90.0/78.8	Unknown	39.95	58.9/100	
Thailand	77.7/44.8	0.01%/day	0.65	31.5/100	
Vietnam	≥90.0/57.6	Unknown	0.42	43.5/100	

All of the countries have achieved the Population vaccinated/ day (7-day average) except Vietnam.

Mpox (Monkeypox) Cases Reported Globally

as of December 1, 2022





Mpox (Monkeypox): Highlights and Situation Overview

- As of 01 December 2022 (2PM, GMT+8), worldwide, there were **86,389** confirmed cases, including **206** deaths. Globally, Case Fatality Rate (CFR) was **0.24%**.
- 40 confirmed cases in the ASEAN region, with CFR of 0%.
- **86,349 confirmed cases** of Mpox have been reported in other **5 regions** (other than ASEAN region):

Mpox cases in ASEAN region

Country	Total Cases	New Cases	Deaths	Case Fatality Rate (CFR)
Indonesia	1	-	-	0.00%
Philippines	4	-	-	0.00%
Singapore	19	-	-	0.00%
Thailand	12	-	-	0.00%
Vietnam	4	-	-	0.00%
ASEAN Total	40	-	-	0.00%

Mpox cases in Asia-Pacific region

Country/Territory	Total Cases	New Cases	Deaths	Case Fatality Rate (CFR)
Australia	143	-	-	0.00%
Hong Kong (SAR)	1	-	-	0.00%
India	20	-	1	5.00%
Japan	7	-	-	0.00%
New Caledonia	1	-	-	0.00%
New Zealand	36	-	-	0.00%
People's Republic of China*	9	-	-	0.00%
Republic of Korea*	4	-	-	0.00%
Sri Lanka	2	-	-	0.00%
Asia-Pacific Total	223	-	1	0.45%

^{*}People's Republic of China – including Hong Kong (SAR), Macao (SAR), and Taiwan (Province of China)

Top 5 countries with most mpox cases globally

Country	Total Cases	New Cases	Deaths	Case Fatality Rate (CFR)
United States of America	29,248	-	14	0.05%
Brazil	9,998	93	13	0.13%
Spain	7,405	-	3	0.03%
France	4,107	-	-	0.00%
Colombia	3,803	-	-	0.00%



Mpox cases per region

REGION	TOTAL CONFIRMED CASES SINCE JANUARY 1, 2022	NEW CASES SINCE THE PREVIOUS REPORT	TOTAL DEATHS	CASE FATALITY RATE
AFRICA	5,079	283	160	3.15%
AMERICAS	54,780	175	40	0.07%
ASEAN	40	-	-	0.00%
ASIA PACIFIC	223	-	1	0.45%
EUROPE	25,948	30	4	0.02%
MIDDLE EAST	319	-	-	0.00%
TOTAL	86,389	488	206	0.24%

Global Update

• WHO: According to the World Health Organization (WHO), 52% of persons with confirmed monkeypox (mpox) are HIV-positive.8 This was announced by the organization on Thursday in a statement commemorating World AIDS Day 2022.8 This year's World AIDS Day, held on December 1, has the subject 'Equalise to End AIDS: Equal Access to Treatment and Prevention Services.8' According to the WHO, HIV remains a severe public health concern, with 5.9 million individuals who are aware they have the illness not receiving treatment.8 [Full Article]

Vaccine Update

- **US CDC:** According to the most recent Centers for Disease Control and Prevention (CDC) study, consumer demand for Mpox immunizations is dropping.⁷ According to CDC data as of November 29, 2022, both the first and second doses of the two-dose Bavarian Nordic JYNNEOS vaccine are no longer in high demand.⁷ Since May 2022, 1,118,639 JYNNEOS vaccine doses have been delivered in 57 different states in the United States.⁷ Data reporting jurisdictions to the CDC.⁷
- Africa: Mpox vaccines, on the other hand, are just getting started in Africa.⁷ On November 29, 2022, the Republic of Korea stated that it would give the first batch of Mpox vaccine to Africa via the Africa Centres for Disease Control and Prevention.⁷ Africa has yet to get Mpox vaccinations, which remain a severe public health danger in countries where the virus is endemic.⁷



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