

COVID-19 and Mpox Situational Report in the ASEAN Region

- ASEAN BioDiaspora Virtual Center (ABVC)

ASSOCIATION OF SOUTHEAST ASIAN NATIONS



ASEAN BIODIASPORA VIRTUAL CENTER (ABVC)





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COVID-19: Highlights and Situation Overview

Global Update

- Worldwide, there have been over 666 million cases and over 6 million deaths attributed to COVID-19.
- **US FDA:** The US FDA approved the first over-the-counter Combined COVID-19 and Flu Test In late February, the US Food and Drug Administration (FDA) granted an Emergency Use Authorization to an at-home diagnostic test that identifies SARS-CoV-2, the virus that causes COVID-19, as well as influenza strains A and B. The test detected 100% of negative and 88.3% of positive COVID-19 samples, 99.3% of negative and 90% of positive influenza A samples, and 99.9% of negative influenza B samples. The single-use test, developed by the company Lucira, uses nasal swabs self-collected by people aged 14 years or older, or collected by an adult for those aged 2 years or older. Patients should report their results to their physician to obtain follow-up care, if needed, and for public health reporting.
- European Congress of Clinical Microbiology & Infectious Diseases (ECCMID 2023): Special early release mentioned that the omicron variant of SARS-CoV-2 is much less likely to lead to long Covid than the variant circulating at the start of the COVID-19 pandemic. The Swiss study found that healthcare workers infected with the original wild-type virus were up to 67% more likely to report symptoms of long Covid than those who hadn't had COVID-19. However, healthcare workers whose first infection was with the omicron variant were no more likely to report long Covid symptoms than those who had never had COVID-19.

Regional Update

• Japan's government will not be requiring the public to wear masks, leaving it to the discretion of the individual, starting March 13 (Monday). The government however said that it continues to recommend the wearing of masks at medical institutions and facilities for the elderly. Restaurants and event venues will have different policies regarding masks and were encouraged to make efforts to provide easy-to-understand explanations by posting notices and making announcements in the venues. The government also urged central and local governments and experts to provide information that will help people make appropriate decisions and ensure that sound knowledge is shared among the public. On May 8 the government plans to downgrade the classification of COVID-19 under the Infectious Diseases Law to "Category V," the same level as seasonal influenza. Patients will then be required to pay their own share of the medical costs for COVID-19, which are currently fully covered by public funds. Expensive therapeutic drugs will remain publicly funded until the end of September adding that the government will continue the free vaccination program for the time being. [Full article]

Vaccine Update

• Cambodia: From the beginning of the sixth dose campaign on January 9, 2023, to provide greater protection for the populace against COVID-18, which is still causing deaths around the world but illnesses in Cambodia, 303,169 people have received the doses.\(^1\) Since the campaign began on June 9, 2022, 1,745,755 doses have been administered for the fifth dose.\(^1\) Since the fourth dose campaign began on January 14, 2022, 5,124,049 doses have been administered.\(^1\) Since the campaign began on October 11, 2021, the third dose has been provided to 10,599,819 people.\(^1\) [Full article]



Research Update (Published and peer-reviewed studies)

- Clinical manifestations of SARS-CoV-2 variants have not been systematically compared in children.² This multicenter cohort study, Comparison of Symptoms Associated With SARS-CoV-2 Variants Among Children in Canada, compares symptoms, emergency department (ED) chest radiography, treatments, and outcomes among children with different SARS-CoV-2 variants in 14 Canadian pediatric EDs. Participants included children and adolescents younger than 18 years (hereinafter referred to as children) tested for SARS-CoV-2 infection in an ED between August 4, 2020, and February 22, 2022, with 14 days of follow-up.² Among 7,272 participants presenting to an ED, 1,440 (19.8%) had test results positive for SARS-CoV-2 infection.² Of these, 801 (55.6%) were boys, with a median age of 2.0 (IQR, 0.6-7.0) years.² Children with the Alpha variant reported the fewest core COVID-19 symptoms (195 of 237 [82.3%]), which were most often reported by participants with Omicron variant infection (434 of 468 [92.7%]; difference, 10.5% [95%] CI, 5.1%-15.9%]).² In a multivariable model with the original type as the referent, the Omicron and Delta variants were associated with fever (odds ratios [ORs], 2.00 [95% CI, 1.43-2.80] and 1.93 [95% CI, 1.33-2.78], respectively) and cough (ORs, 1.42 [95% CI, 1.06-1.91] and 1.57 [95% CI, 1.13-2.17], respectively).² Upper respiratory tract symptoms were associated with Delta infection (OR, 1.96 [95% CI, 1.38-2.79]); lower respiratory tract and systemic symptoms were associated with Omicron variant infection (ORs, 1.42 [95% CI, 1.04-1.92] and 1.77 [95% CI, 1.24-2.52], respectively).² Children with Omicron infection most often had chest radiography performed and received treatments; compared with those who had Delta infection, they were more likely to have chest radiography performed (difference, 9.7% [95% CI, 4.7%-14.8%]), to receive intravenous fluids (difference, 5.6% [95% CI, 1.0%-10.2%]) and corticosteroids (difference, 7.9% [95% CI, 3.2%-12.7%]), and to have an ED revisit (difference, 8.8% [95% CI, 3.5%-14.1%]). The proportions of children admitted to the hospital and intensive care unit did not differ between variants.² Omicron and Delta variants were more strongly associated with fever and cough than the original-type virus and the Alpha variant.² Children with Omicron variant infection were more likely to report lower respiratory tract symptoms and systemic manifestations, undergo chest radiography, and receive interventions. No differences were found in undesirable outcomes (ie, hospitalization, intensive care unit admission) across variants.² [Full text]
- People are not always honest about their medical information or adherent to medical recommendations, including the public health measures (PHMs) against COVID-19 (eg., not reporting symptoms, breaking quarantine).3 During the COVID-19 pandemic, parents experienced greater increases in stress compared with nonparents due to additional child-related PHMs (eg, school closings, quarantine rules for children). In this survey study, Parental Nonadherence to Health Policy Recommendations for Prevention of COVID-19 Transmission Among Children, the prevalence of misrepresentations of and nonadherence to COVID-19-related PHMs by parents regarding their children, their reasons, and associations of individual characteristics with these behaviors were examined.3 This study recruited a national, nonprobability sample of US adults through Qualtrics for an online survey about COVID-19 experiences (participation, 1,811 of 2,260 [80.1%]) from December 8 to 23, 2021.3 The survey asked whether parents had ever engaged in 7 types of misrepresentation and nonadherence behaviors regarding COVID-19 PHMs for their children and reasons for these behaviors.³ The final sample consisted of 1,733 US adults and analyses included the 580 parent participants (33.5%) who had children younger than 18 years living with them during the pandemic.³ Among the 580 participants, the mean (SD) age was 35.9 (8.8) years; 403 (70.2%) identified as women compared with 171 (29.5%) men and 6 (1.0%) other or missing.³ In terms of race and ethnicity, 80 participants (13.8%) were Hispanic, 5 (0.9%) non-Hispanic American Indian or Alaskan Native, 14 (2.4%) non-Hispanic Asian, 86 (14.8%) non-Hispanic Black, 389 (67.1%) non-Hispanic White, 5 (0.9%) more than 1 race, and 1 (0.2%) White with no



ethnicity specified.³ One hundred fifty participants (25.9%) reported misrepresentation and/or nonadherence in at least 1 of 7 behaviors; the most common behaviors were not telling someone who was with their child that they thought or knew their child had COVID-19 (63 of 263 [24.0%]) and allowing their child to break quarantine rules (67 of 318 [21.1%]).³ The most common reason was wanting to exercise personal freedom as a parent.³ Additional reasons included wanting their child's life to feel normal and not being able to miss work or other responsibilities to stay home.³ In an exploratory multiple logistic regression, no characteristics (eg, education, religiosity) were associated with misrepresentation or nonadherence.³ [Full text]

The study finding of Comparison of Symptoms Associated With SARS-CoV-2 Variants **Among Children in Canada** suggested that fever and cough were more common among Canadian children infected with the SARS-CoV-2 Delta and Omicron variants than the original, wild-type virus and the Alpha variant, but rates of hospitalization and intensive care unit (ICU) admission stayed the same over time. 5 The Pediatric Emergency Research Canada COVID Study Group assessed symptoms among 1,440 COVID-19 patients younger than 18 years seen at 14 emergency departments from August 4, 2020, to February 22, 2022. Whole-genome sequencing was conducted for 26.9% of patients, identifying Alpha (40.7%), Delta (45.6%), and Omicron (11.9%), in addition to one Beta and six Gamma cases.⁵ Children with Alpha infections reported the fewest COVID-19 symptoms while Omicron patients reported the most.⁵ Relative to the wild-type virus, Omicron and Delta were more strongly tied to and cough.⁵ Upper respiratory tract symptoms were most common with Delta, while lower respiratory tract and systemic symptoms were tied to Omicron. 5 Compared with Delta patients, Omicron patients were more likely to undergo chest radiography, receive intravenous fluids or corticosteroids, and return to the ED.5 The proportions of patients hospitalized or admitted to an ICU did not differ among variants.⁵ [Full text]

Travel Update

• The US Centers for Disease Control and Prevention (CDC) has published on March 10 (Friday) a Notice and Order under Section 361 on the Recission of the Requirements for Negative Pre-Departure COVID-19 Test Result or Documentation of Recovery from COVID-19 for Aircraft Passengers Travelling to the United States from the People's Republic of China. Travelers departing from China, Hong Kong, Macau and a few designated airports located elsewhere will no longer have to submit to a pre-flight test to get a negative result or show documentation of recent recovery from COVID-19 to board a flight to the U.S. The CDC said that it now has more confidence that things have gotten better in China, adding that the currently available epidemiologic data through global data sets and modeling results indicate that the COVID-19 surge experienced by the PRC has returned to a baseline measure. [Full report]

COVID-19 Cases and Deaths as of 05 March 2023

- As of 12 March 2023 (1PM, GMT+7), worldwide, there were **666,336,607** confirmed cases, including **6,789,391** deaths. Globally, Case Fatality Rate (CFR) was **1.2%.**
- 35,622,859 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	13-Mar-23	279,661	758	225	-	64,053	450,404	445,929	338,987	99.3
REGION	Cambodia	27 Jan 20	13-Mar-23	138,720	1	3,056	-	841	15,244,858	14,609,937	10,433,215	87.1
	Indonesia	02 Mar 20	13-Mar-23	6,739,067	223	160,948	3	2,490	203,657,535	172,693,321	67,952,274	62.7
	Lao PDR	24 Mar 20	13-Mar-23	218,023	3	758	-	3,041	5,888,649	5,222,417		69.4
	Malaysia	25 Jan 20	13-Mar-23	5,045,192	223	36,967	-	15,788	28,125,245	27,536,657	17,056,957	81.1
	Myanmar	23 Mar 20	13-Mar-23	633,955	1	19,490	-	1,173	34,777,314	27,545,329	2,227,351	50.8
	Philippines	30 Jan 20	13-Mar-23	4,077,904	156	66,210	8	3,771	78,369,243	73,937,435	21,341,197	64.0
	Singapore	23 Jan 20	13-Mar-23	2,234,996	244	1,722	-	39,049	5,161,990	5,120,768	4,440,289	90.8
	Thailand	13 Jan 20	13-Mar-23	4,728,304	122	33,924	6	6,791	57,005,497	53,486,086	32,143,431	74.6
	Vietnam	23 Jan 20	13-Mar-23	11,527,037	4	43,186	-	11,950	90,450,881	85,848,363	57,452,750	87.4
		ASEAN CO	OUNTRIES	35,622,859	1,735	366,486	17	148,946	519,131,616	466,446,242	213,386,451	

^{*}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	08-Mar-23	209,417	-	7,896	-	550	11,606,705	10,894,509		26.5
PACIFIC	Australia	25-Jan-20	08-Mar-23	11,385,534	-	19,470	-	44,388	22,236,871	21,655,312	19,762,423	82.7
REGION	Bangladesh	08-Mar-20	09-Mar-23	2,037,836	42	29,445	-	1,250	150,629,515	131,182,263	65,897,152	76.6
	Bhutan	05-Mar-20	09-Mar-23	62,623	7	21		8,206	699,116	677,669	634,641	86.6
	People's Republic of China*		09-Mar-23	13,503,322	9,627	37,130	0	82,117	1,339,608,531	1,304,575,996	214,031,616	89.7
	Cook Islands	17-Feb-22	07-Mar-23	7,031	-	2	-	32,874	15,084	14,715	10,209	86.4
	Fiji	18-Mar-20	03-Mar-23	68,897	-	883	-	7,742	711,686	640,712	170,632	68.9
	French Polynesia	12-Mar-20	08-Mar-23	78,055	-	649	-	27,948	190,765	186,059	112,237	60.8
	Guam	15-Mar-20	08-Mar-23	61,006	-	419	-	36,466	158,611	144,042		85.5
	India	30-Jan-20	09-Mar-23	44,688,879	379	530,775	1	3,271	1,027,279,394	951,464,506	224,093,416	67.1

Japan	16-Jan-20	19-Oct-22	21,858,528	-	46,014	-	17,312	104,612,252	103,222,040	169,610,887	83.3
Kiribati	25-Jan-22	09-Mar-23	5,013	1	18	-	4,263	96,184	73,888	23,419	56.3
Maldives	07-Mar-20	07-Mar-23	185,738	-	311		34,982	399,151	385,081	167,187	73.5
Marshall Islands	26-Oct-20	09-Mar-23	15,649	31	17	-	26,618	43,310	34,694		44.6
Micronesia	11-Jan-21	02-Mar-23	23,948	-	61	-	21,041	84,729	71,253		69.6
Mongolia	10-Mar-20	09-Mar-23	1,007,899	3	2,179	-	31,251	2,272,965	2,175,617	1,044,337	64.0
Nepal	24-Jan-20	09-Mar-23	1,001,151	4	12,020	-	3,499	27,678,479	24,159,118	8,951,403	79.1
New Caledonia	17-Mar-20	28-Feb-23	79,881	-	314	-	27,756	192,229	184,660	101,849	63.7
New Zealand	28-Feb-20	06-Mar-23	2,228,291	-	3,922	-	45,318	4,300,097	4,138,926	3,523,903	79.8
Niue	03-Sep-21	08-Mar-23	792	-	-	-	36,565	1,636	1,634	1,224	83.
Northern Mariana Islands	28-Mar-20	03-Mar-23	13,666	-	41	-	23,885	46,567	43,873		84.
Pakistan	26-Feb-20	09-Mar-23	1,577,280	50	30,644	-	728	154,665,740	131,368,973	49,551,181	55.
Palau	31-May-21	09-Mar-23	5,991	2	9	-	33,269	20,750	18,497		85.
Papua New Guinea	21-Mar-20	08-Mar-23	46,825	-	670	-	534	369,998	310,717	32,384	3.
Samoa	18-Nov-20	22-Feb-23	16,607	-	29	-	8,426	191,171	177,741	79,360	79.
Solomon Islands	03-Oct-20	24-Nov-22	24,575	-	153	-	3,669	343,821	254,352	27,783	35.
Republic of Korea**	20-Jan-20	09-Mar-23	30,594,342	10,890	34,061	16	59,166	44,867,046	44,448,105	41,325,954	85.
Sri Lanka	27-Jan-20	08-Mar-23	672,037	-	16,830	-	3,082	17,143,761	14,752,827	8,220,002	67.
Timor Leste	21-Mar-20	09-Mar-23	23,419	1	138	-	1,811	878,845	790,466	315,249	58.
Tonga	05-Nov-21	09-Mar-23	16,810	3	13	-	16,087	91,949	77,464	38,331	72.
Türkiye	10-Mar-20	12-Dec-22	17,041,315	-	101,487	-	20,426	57,941,051	53,176,961	41,425,329	62.
Vanuatu	11-Nov-20	06-Jan-23	12,014	-	14	-	4,006	144,824	131,697	16,996	40.
Wallis et Futuna	17-Oct-20	31-Dec-22	3,427	-	7	-	21,385	7,150	6,803	3,766	58.
		ASIA PACIFIC	148,557,798	21,040	875,642	17	689,891	2,969,529,983	2,801,441,170	849,172,870	

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

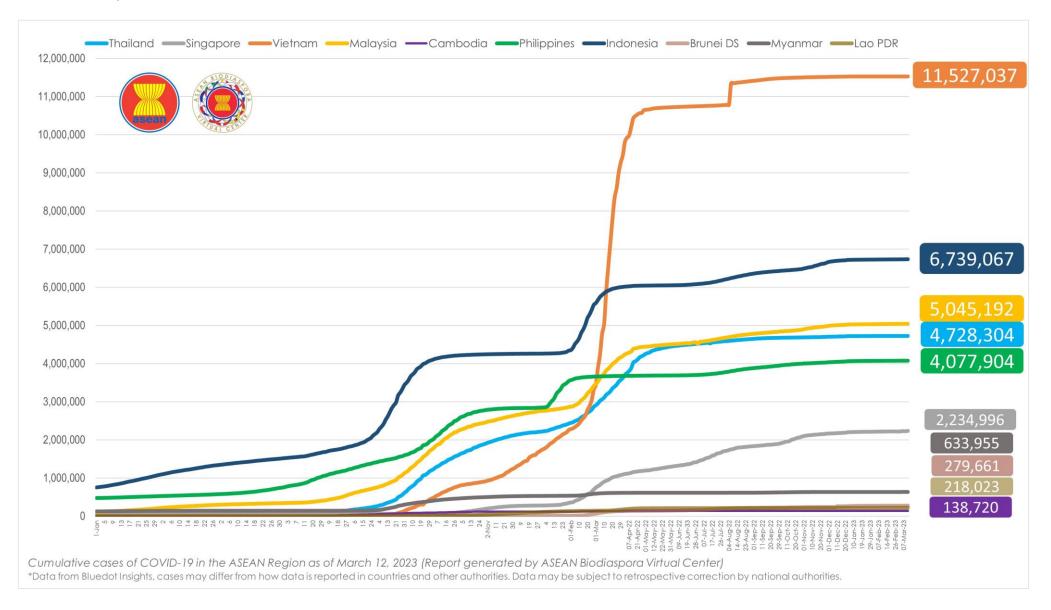
• 482,155,950 confirmed cases of COVID-19 have been reported in other 4 regions (other than ASEAN and Asia-Pacific countries):

REGION	TOTAL CONFIRMED CASES	NEW CASES	TOTAL DEATHS	NEW DEATHS	CUMULATIVE CASES/ 100,000	CUMULATIVE VACCINATED	CUMULATIVE FULLY VACCINATED	CUMULATIVE BOOSTERED
AFRICA	13,057,668	80	259,541	-	248,964	484,058,451	398,811,838	66,003,692
AMERICAS	193,947,099	8,660	2,969,774	78	1,243,252	835,447,892	731,893,384	495,237,137
EUROPE	252,412,212	25,421	2,077,977	109	2,116,302	569,620,774	541,040,894	383,756,585
MIDDLE EAST	22,738,971	986	239,971	1	216,792	144,725,560	130,012,483	60,203,464
TOTAL	482,155,950	35,147	5,547,263	188	3,825,310	2,033,852,677	1,801,758,599	1,005,200,878

^{**}Republic of Korea – South Korea

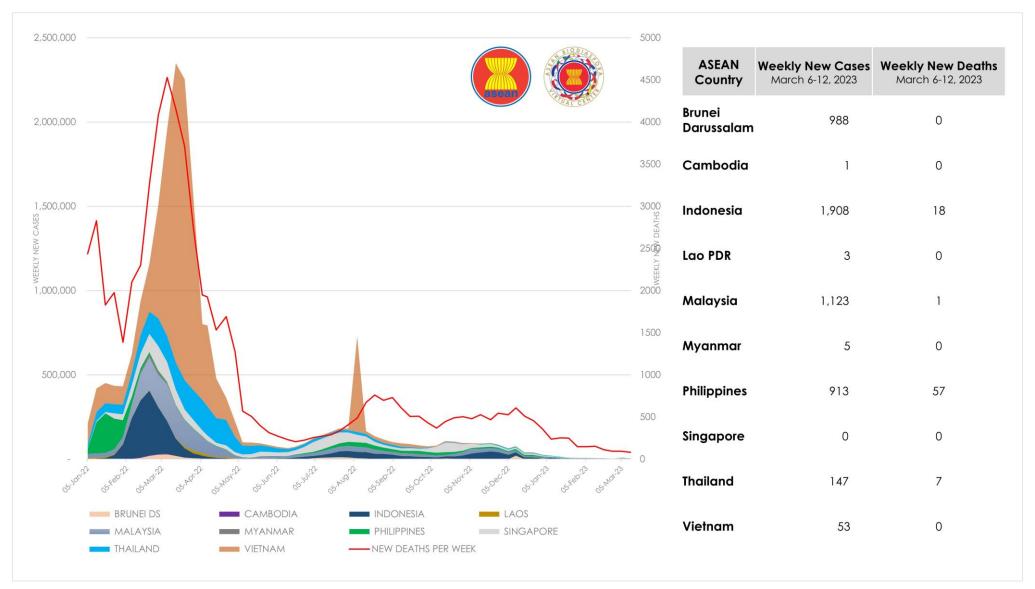
COVID-19 Epi curve among ASEAN Countries:

From January 1, 2022 to March 12, 2023



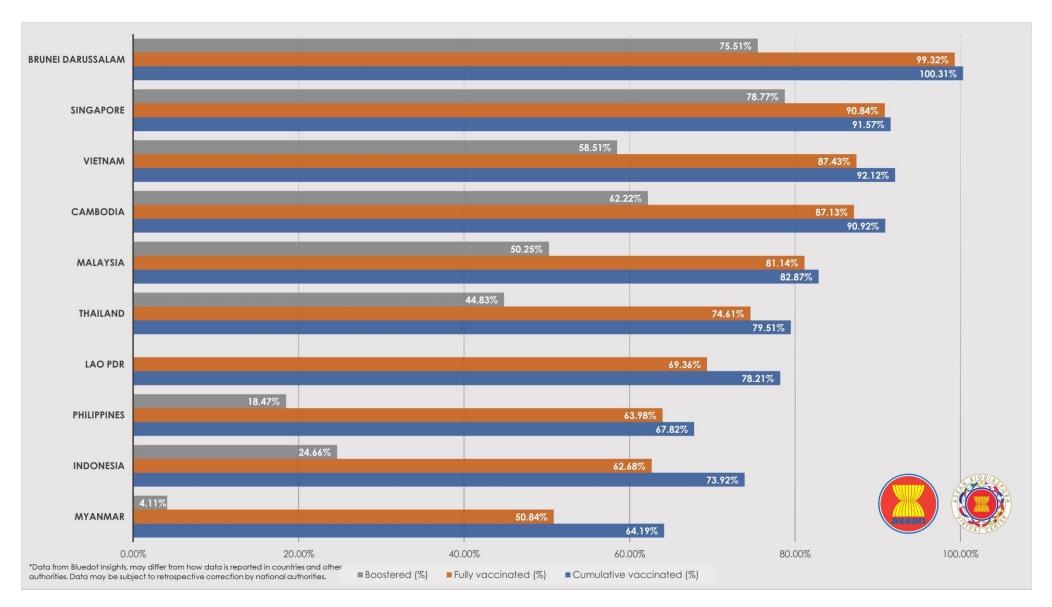
ASEAN Weekly COVID-19 New Cases and New Deaths

From January 1, 2022 to March 12, 2023



ASEAN COVID-19 Vaccination Status

as of 12 March 2023



ASEAN COVID-19 Outlook Assessment

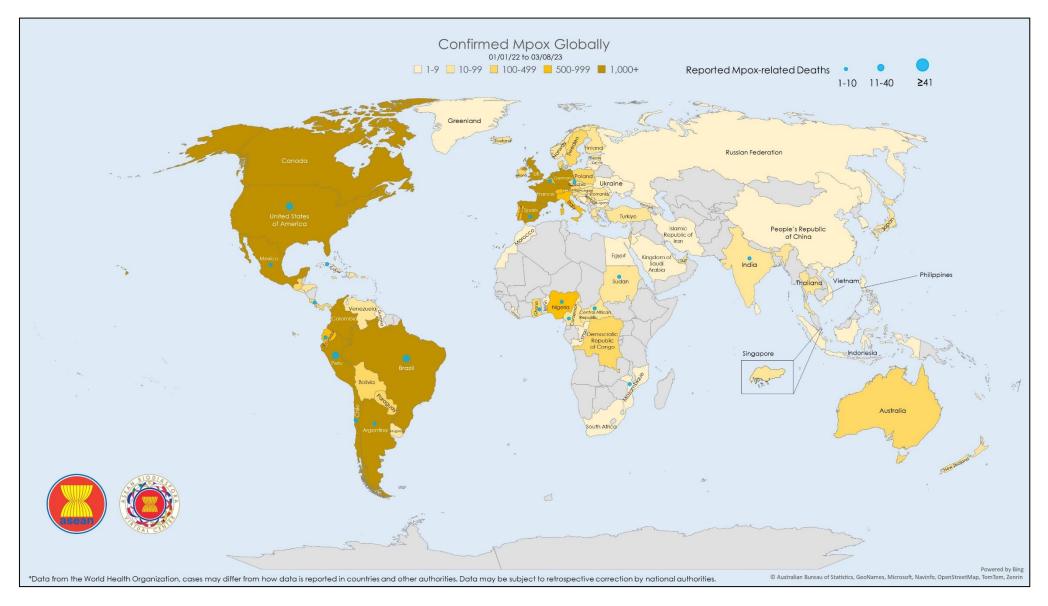
as of 10 March 2023

ASEAN MEMBER STATE	immunity to COVID-19; eith 19 or have been vaccinate	population has a level of ner 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 fu	% of Total population fully vaccinated / boosted		Containment and health index score - Oxford COVID-19 Government Response Tracker (OxCGRT)
Brunei Darussalam	≥90.0	75.5	31.75	31.0/100
Cambodia	≥90.0	62.2	0.00	31.5/100
Indonesia	66.1	24.7	0.09	54.2/100
Lao PDR	77.3	ND	0.01	61.6/100
Malaysia	84.5	50.3	0.53	51.8/100
Myanmar	52.1	4.1	0.01	69.1/100
Philippines	71.6	18.5	0.12	55.4/100
Singapore	≥90.0	78.8	21.45	58.9/100
Thailand	77.7	44.8	0.03	31.5/100
Vietnam	≥90.0	58.5	0.01	43.5/100

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

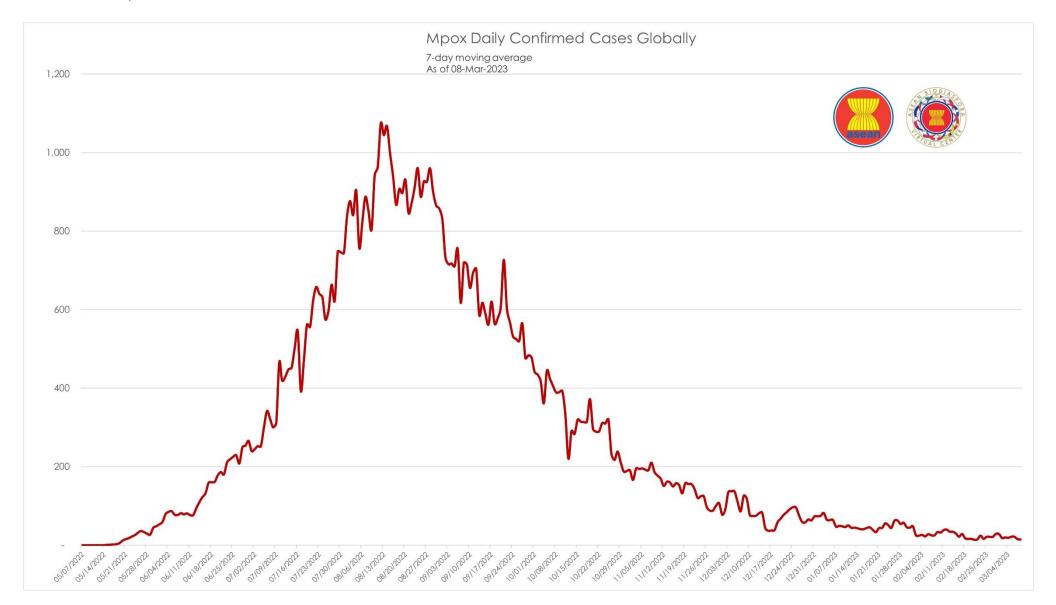
Mpox (Monkeypox) Cases Reported Globally

as of March 8, 2023



Mpox Daily Trend Globally

as of March 8, 2023





Mpox: Highlights and Situation Overview

- As of 12 March 2023 (1PM, GMT+7), worldwide, there were **86,391** confirmed cases, including **111** deaths. Globally, Case Fatality Rate (CFR) was **0.13%**.
- 43 confirmed cases in the ASEAN region, with CFR of 0%.
- **86,348 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	21	-	-	0.00%
Thailand	15	-	-	0.00%
Vietnam	2	-	-	0.00%
ASEAN Total	43	-	-	0.00%

Mpox cases in Asia-Pacific region

Country/Territory	Total Cases	New Cases	Deaths	Case Fatality Rate (CFR)
Australia	144	-	-	0.00%
India	22	-	1	5.00%
Japan	31	-	-	0.00%
New Caledonia	1	-	-	0.00%
New Zealand	41	-	-	0.00%
People's Republic of China*	10	-	-	0.00%
Republic of Korea*	4	-	-	0.00%
Sri Lanka	2	-	-	0.00%
Asia-Pacific Total	255	-	1	0.39%

^{*}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	30,030	-	38	0.13%
Brazil	10,862	-	15	0.14%
Spain	7,543	-	3	0.04%
France	4,128	-	-	0.00%
Colombia	4,085	-	-	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	1,446	-	18	1.24%
AMERICAS	58,749	-	86	0.15%
ASEAN	43	-	-	0.00%
ASIA PACIFIC	255	-	1	0.39%
EUROPE	25,578	-	6	0.02%
MIDDLE EAST	320	-	-	0.00%
TOTAL	86,391	-	111	0.13%

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