

COVID-19, Mpox, and Other Infectious Diseases

Situational Report in the ASEAN Region

— ASEAN BioDiaspora Virtual Center (ABVC)



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COVID-19: Highlights and Situation Overview

Global Update

- **Worldwide**, over 688 million cases and over 6 million deaths have been attributed to COVID-19.
- The **Centers for Disease Control and Prevention (CDC)** updated its interim recommendations for infection prevention and control for healthcare personnel ahead of the national public health emergency expiring on May 11.¹ The main updates pertain to procedures at nursing homes, and the CDC also added an appendix to help health facilities decide when to implement broader source control, given that the CDC is phasing out community transmission levels.¹ It suggests other metrics to monitor local COVID activity and noted that the CDC is in the early stages of developing ones that can be used for multiple respiratory viruses.¹ [\[Full report\]](#)

Regional Update

- **Indonesia:** Government has started its COVID-19 transition from a health emergency by implementing a long-term mitigation plan after bringing COVID-19 infections under control.² After the World Health Organization (WHO) revoked the global health emergency status on May 5, the Indonesian Government implemented a long-term mitigation system integrating prevention and control efforts into routine health programs, namely those related to surveillance and vaccination according to the spokesperson of the country's Ministry of Health, adding that Indonesia was also asked to prepare a long-term national policy for every health intervention, whether it is medicine, vaccination, diagnostic tools, and others.² [\[Full article\]](#)

Vaccine Update

- **Novavax** reported promising findings for Phase 2 clinical trials for three of its vaccines, a flu-COVID combination product, a standalone flu version, and a high-dose COVID candidate.³ The protein-based vaccines include the company's proprietary Matrix M adjuvant.³ In a press release, it said reactogenicity was similar to findings in earlier trials for the vaccines and that they prompted robust immune response.³ [\[Full article\]](#)

Research Update (Published and peer-reviewed studies)

- The study **Predictors of long-term neutralizing antibody titers following COVID-19 vaccination by three vaccine types: the BOOST study** led by University of California San Francisco (UCSF) researchers describes very different antibody responses to the monovalent (single-strain) Pfizer/BioNTech, Moderna, and Johnson & Johnson (J&J) COVID-19 vaccines up to 6 months after receipt.⁴ Researchers observed the neutralizing antibody (nAB) responses of 498 healthy volunteers ranging from 18 to 88 years old who received the Pfizer (287 participants) or Moderna (149) mRNA vaccines, or the J&J (62) adenovirus-vector vaccine during spring 2021.⁴ The study participants provided blood samples for nAB measurement and completed questionnaires before vaccination, as well as 1 and 6 months after the primary vaccine series.⁴ The observations revealed significant differences in the antibody responses generated by the monovalent vaccines up to 6 months after receipt.⁴ One month after COVID-19 vaccination, compared with J&J recipients, nAB levels were 51 times higher among Moderna recipients and 21 times higher among Pfizer recipients.⁴ At 6 months, however, J&J vaccinees produced the same antibody response as that of Moderna and significantly higher concentrations than those of Pfizer.⁴ Specifically, 99.3% of Pfizer, 99.3% of Moderna, and 59.7% of J&J recipients had measurable nABs at 1 month.⁴ By 6 months,



92.2% of Pfizer, 97.9% of Moderna, and 89.5% of J&J vaccinees had nABs. Older age was tied to lower neutralizing antibody levels for Pfizer (-17%) and J&J (-11%) vaccine recipients but not for those given the Moderna vaccine.⁴ A higher baseline body mass index (BMI) was linked to lower antibody concentrations in J&J recipients (-11%) but not in Pfizer or Moderna vaccinees.⁴ Women and nonsmokers had higher nAB levels than men (-30%) and smokers (-240%), respectively.⁴ [\[Full article\]](#)



Cases and Deaths as of 10 May 2023

- As of 10 May 2023 (1PM, GMT+7), worldwide, there were **688,010,088** confirmed cases, including **6,872,306** deaths. Globally, Case Fatality Rate (CFR) was **1.0%**.
- 35,9863,404 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 REGION	Brunei Darussalam	10 Mar 20	03-May-23	288,051	-	225	-	64,053	450,404	445,929	338,987	99.3
	Cambodia	27 Jan 20	09-May-23	138,736	-	3,056	-	841	15,244,858	14,609,937	10,433,215	87.1
	Indonesia	02 Mar 20	10-May-23	6,791,896	1,491	161,505	4	2,490	203,657,535	172,693,321	67,952,274	62.7
	Lao PDR	24 Mar 20	09-May-23	218,091	-	758	-	3,041	5,888,649	5,222,417		69.4
	Malaysia	25 Jan 20	06-May-23	5,079,436	-	37,028	-	15,788	28,125,245	27,536,657	17,056,957	81.1
	Myanmar	23 Mar 20	09-May-23	636,388	-	19,492	-	1,173	34,777,314	27,545,329	2,227,351	50.8
	Philippines	30 Jan 20	09-May-23	4,105,498	-	66,453	-	3,771	78,369,243	73,937,435	21,341,197	64.0
	Singapore	23 Jan 20	07-May-23	2,391,248	-	1,727	-	39,049	5,161,990	5,120,768	4,440,289	90.8
	Thailand	13 Jan 20	08-May-23	4,734,000	-	33,967	-	6,791	57,005,497	53,486,086	32,143,431	74.6
	Vietnam	23 Jan 20	09-May-23	11,580,060	-	43,196	-	11,950	90,450,881	85,848,363	57,452,750	87.4
ASEAN COUNTRIES				35,963,404	1,491	367,407	4	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.

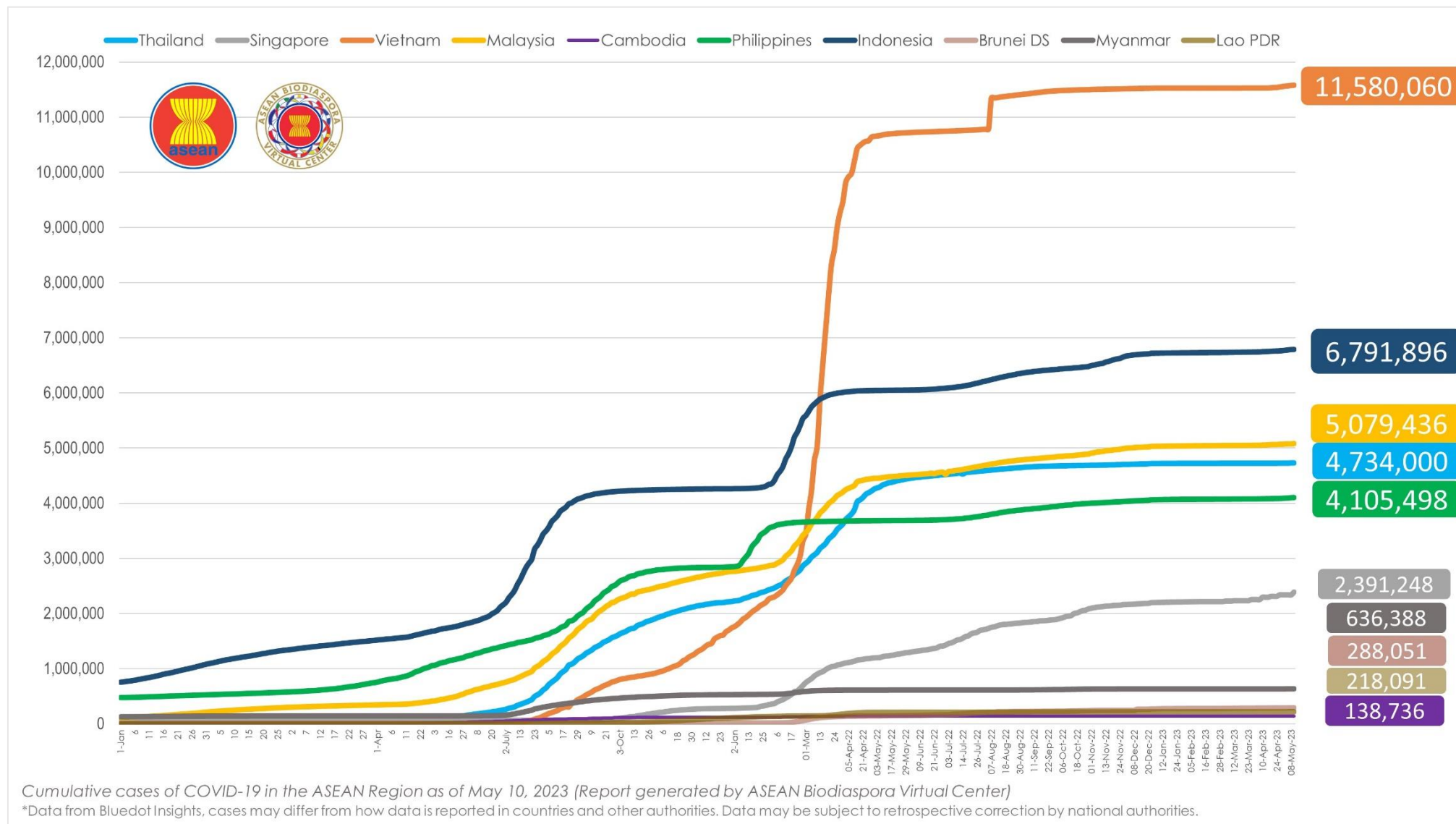
REGION	TOTAL CONFIRMED CASES	NEW CASES	TOTAL DEATHS	NEW DEATHS
ASIA	195,218,135	23,521	1,205,403	23
AFRICA	12,820,353		258,744	
AMERICAS	194,954,613	57	2,985,401	
EUROPE	249,053,583		2,055,351	-
TOTAL	652,046,684	23,578	6,504,899	23

**Data References: [Andra Farm](#), [Worldometer](#), [DOH Philippines](#), and the [WHO](#)



COVID-19 Epi curve among ASEAN Countries:

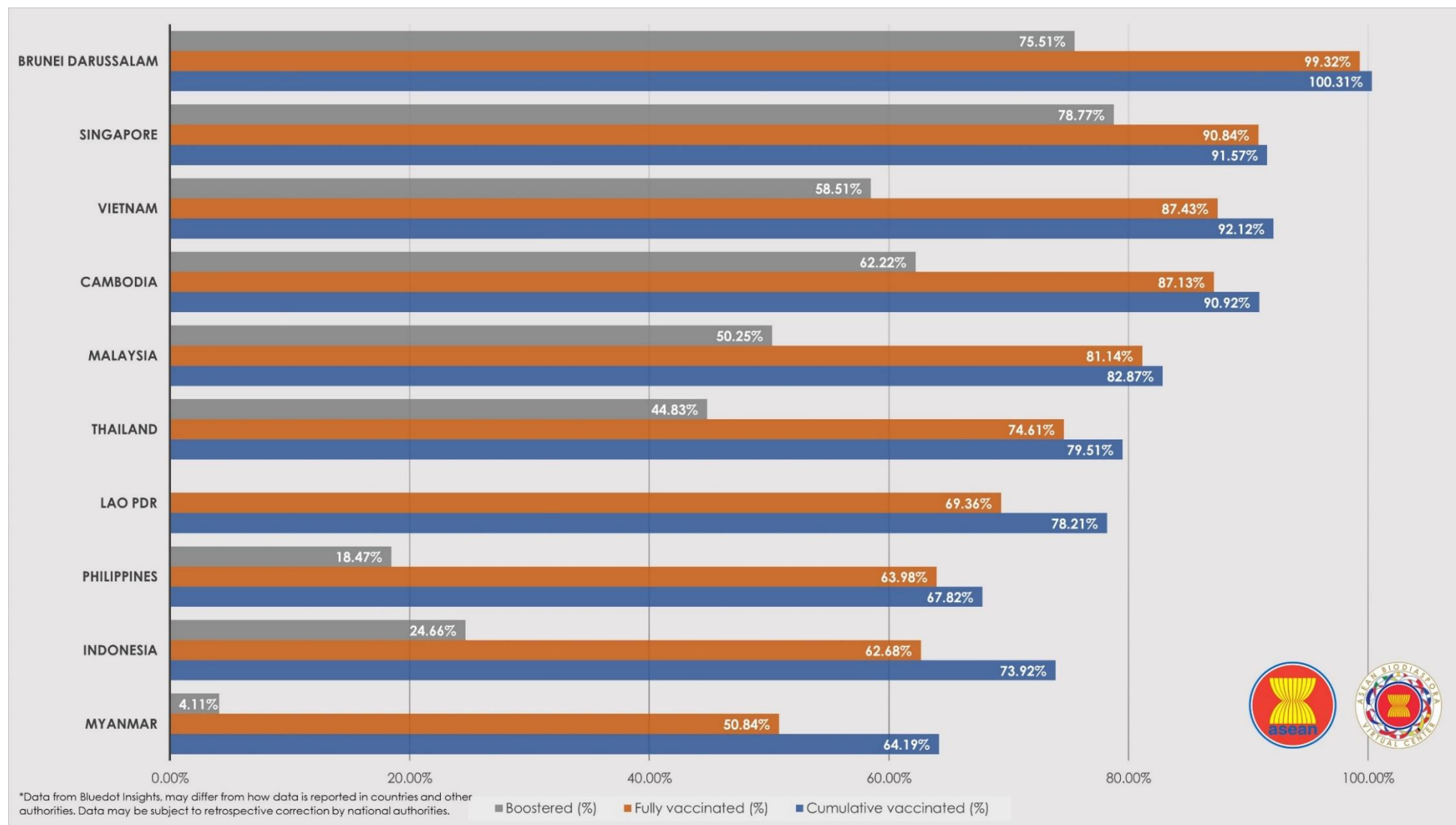
From January 1, 2021 to May 10, 2023





ASEAN COVID-19 Vaccination Status

as of 09 March 2023

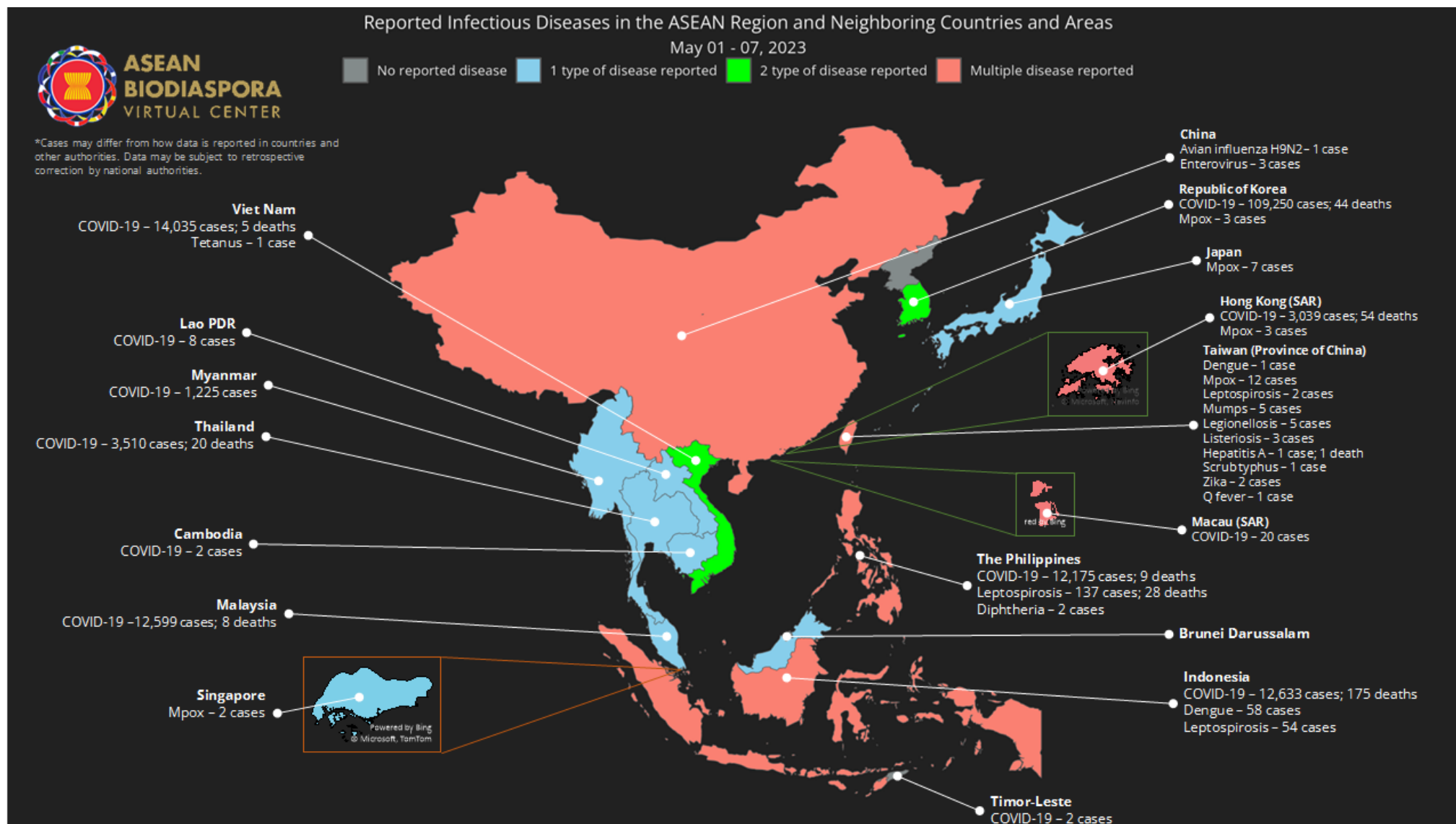


*Last update in COVID-19 vaccination status in ASEAN was on March 9, 2023.



Reported Infectious Diseases in ASEAN Region and Neighboring Countries

From May 1-7, 2023





Reported Infectious Diseases Other than COVID-19, Mpox, Measles, and Dengue

May 1-7, 2023

Infectious Disease Global Updates

Lassa Fever

- **Nigeria:** Increasing trends of Lassa fever cases and deaths have been reported in Nigeria since early 2022. Lassa Fever is endemic in Nigeria with annual peaks typically observed during the dry season (December–April), following the reproduction cycle of the *Mastomys* rats (main reservoir) in the wet season (May – November). Between 01-January-2023 and 30-April-2023: there have been 4,908 reported cases, of which 897 have been lab-confirmed. Among confirmed cases, there have been 152 deaths. Case Fatality Rate (CFR): 17% as per official sources. Of the total confirmed cases; 42 (4.6%) are among healthcare workers.

Marburg Disease

- **Equatorial Guinea:** (Follow up) On 21-Apr-2023, the Equatorial Guinea Ministry of Health and Social Welfare (MINSABS) confirmed a new case and death in Bata (Litoral Province) since the previous notable assessment on 19-Apr-2023. As of 23 April 2023, there were 40 human cases (with 34 deaths) reported, of which 17 (including 12 deaths) were laboratory confirmed. CFR is 85%. Epidemiological/ demographic profile of the confirmed cases: sex distribution: female (10 cases), male (6 cases), unidentified (1 case), 30-44 age group most affected (6 cases), 5 health care workers affected (2 deaths, 1 hospitalization), and 1,427 close contacts.
- **Tanzania:** (Follow up) In a follow-up on the Marburg Virus Disease (MVD) outbreak in Tanzania, an additional case and death have been confirmed from the Bukoba Rural district in Kagera Region, the same location where the outbreak began on 21-March-2023 in northwestern Tanzania. The latest weekly bulletin of outbreaks for the Africa Region from the World Health Organization (WHO) was published on 24-Apr-2023 and reflected information as of 16-Apr-2023. According to this bulletin, nine cases and six deaths have been confirmed. The case fatality rate (CFR) is 66.7%. There has been a total of 212 close contacts identified, of which 206 have completed their monitoring period.

Highly Pathogenic Avian Influenza A (H5N1)

- **Chile:** (Follow up) On 29-March-2023, one laboratory-confirmed case (index case) by the Institute of Public Health of Chile (ISP) was reported. A total of nine contacts were identified among healthcare workers. All contacts tested negative for influenza and concluded the monitoring period on 4-April-2023. However, on 5-April-2023, one of the healthcare workers developed respiratory symptoms. A nasopharyngeal swab was taken and later tested negative for influenza. The monitoring period for this contact was extended for seven additional days and ended on 11-April-2023. Two other human cases have been reported in 2023: January in Bolivar, Ecuador and February in Jiangsu, China. Both cases have had exposure to poultry.

Poliomyelitis

- **Pakistan:** Wild-type poliovirus has been detected in sewage samples from Peshawar and Hangu districts in Khyber Paktunkhwa province in Pakistan. These environmental samples were collected on April 10, 2023. Since the start of the year, Pakistan has reported one



human case and five environmental samples positive for wild-type poliovirus. According to health officials, the virus present in the samples is genetically linked to the wild-type polio virus found in the environmental samples in Nangarhar, Afghanistan in January 2023. Both Pakistan and Afghanistan will be conducting synchronized vaccination campaigns during the month of May to increase population immunity. (Insights: May 4, 2023 Pakistan)

Infectious Disease in ASEAN Region and Neighboring Countries Updates

Highly Pathogenic Avian Influenza A (H5N1)

- Vietnam.** (Follow up) Additional case details have been released by the Phu Tho Centers for Disease Control and Prevention (CDC) in regard to the single human case of H5N1 influenza reported in Phu Tho, Vietnam on October 17, 2022. The affected child is reported to be from the Dong Thanh commune, Thanh Ba district, Phu Tho province, and developed symptoms, including a cough and fever, following exposure to poultry. She was transferred to the National Children's Hospital from the Phu Tho Obstetrics and Children's Hospital after developing renal and hepatic failure. News media reports on Oct 21, 2022, that the child is in stable condition, and continues to have her condition monitored. Of note, the human H5N1 case which occurred in Vietnam is of an unknown clade, however, due to large-scale outbreaks within poultry in the region the case likely belongs to clade 2.3.4.4b. According to avian influenza surveillance data from March 2022, positive avian samples of both H5N1 and H5N6 were collected from five communes of two districts, including Dong Thanh commune.

Bluedot Intelligence Report (May 8 2023)

Since 2020, Highly Pathogenic Avian Influenza (HPAI) A(H5N1) virus belonging to the 2.3.4.4b clade has spread widely among wild birds and poultry globally. In parallel, an increased number of mammalian spillover events have been reported, along with nine sporadic human cases linked to contaminated poultry and environments. The BlueDot Intelligence team assessed the risk to humans of an H5N1 pandemic and judged that there is currently a low but increasing risk that warrants action.

Leptospirosis

- Indonesia:** The Gunungkidul Health Office noted that in the first quarter of 2023, 54 cases of leptospirosis had been found.⁵ This number exceeds the cases that occurred during 2022. Head of the Gunungkidul Health Service, Dewi Irawaty said, cases of leptospirosis this year are on an increasing trend.⁵ This can be seen from the findings of cases throughout the first four months of 2023.⁵ According to him, there have been 54 cases, two of whom died.⁵ As for the details, there were five cases in January, eight cases in February and 41 cases in March.⁵ "The peak occurred in March. Whereas for April and early May there have been no case findings," said Dewi, Thursday (4/5/2023).⁵ He did not deny that the findings for four months have exceeded the cases in 2022.⁵ This is because last year there were only 31 cases and four deaths.⁵ "This year's cases could still increase," he said.⁵ Dewi said the case of leptospirosis was almost similar to the spread of dengue. This disease spreads most during the rainy season.⁵ Transmission is also closely related to environmental hygiene.⁵ Therefore, he asked the public to maintain the cleanliness of the environment so that it does not become a hiding place for rats, which are often the cause of transmission of this disease.⁵ "If the environment is clean, the emergence of rats can be suppressed so that the potential for transmission can also be reduced," he said.⁵ Dewi added, the potential for transmission was not only in the home environment, but also in rice fields.⁵ He asked farmers when they were on the move to wear personal protective equipment such as both shoes, gloves and long sleeves.⁵ "For prevention, we



will also optimize the role of the One Health Task Force in each Wonoose," he said.⁵ [\[Full article\]](#)

- Philippines:** Health officials in the Philippines reports a 135% increase in leptospirosis cases year to date, according to the latest data from the Epidemiology Bureau.⁶ From January 1 to April 8, 1,152 leptospirosis cases have been reported nationally, up from 490 cases during the same period last year.⁶ 15 of the country's 17 regions have reported increases in cases with the Western Visayas reporting the most with 231, followed by the Cagayan Valley region with 160 cases.⁶ The MIMAROPA region has reported the largest increase as a percentage (1025%) followed by Zamboanga Peninsula (988%).⁶ Officials have reported 113 leptospirosis deaths through April 8 this year, up from 69 reported during the same period in 2022.⁶ In Bacolod City, the Bacolod City Epidemiology Surveillance Unit (BCESU) recorded a total of 32 suspected cases of leptospirosis, with four deaths.⁷ The victims include a 69-year-old male from Brgy. Taculing, a 28-year-old male from Banago, a 16-year-old male from Handumanan, and a 44-year-old male from Villamonte. The total number of cases is 357.1% higher than the cases reported last year.⁷ The barangays with reported suspected Leptospirosis cases are Estefania, Mansilingan, and Bata with 4 cases each; Banago – 3; and Felisa, Villamonte, Vista Alegre and Brgy. 35 with 2 cases each.⁷ All cases have unrecalled history of wading in flood/contaminated water. Most common reason for complications and death is delayed health seeking behavior.⁷ [\[Full article 6, 7\]](#)

Diphtheria

- Philippines:** Cases of diphtheria in the country have increased by 775%, the Department of Health (DOH) has reported.⁸ In its latest disease surveillance report, the DOH said 35 cases were reported from Jan. 1 to April 8 compared to four during the same period last year.⁸ Data from the DOH's Epidemiology Bureau showed that there were 10 deaths due to diphtheria compared to zero last year.⁸ The National Capital Region recorded four diphtheria-related deaths; Bangsamoro Autonomous Region in Muslim Mindanao and Mimaropa, two each, and Zamboanga peninsula and Central Luzon, one each.⁸ Metro Manila reported the highest number of cases with 12 followed by Zamboanga peninsula with 11 and Calabarzon, six.⁸ Metro Manila logged the highest increase in cases from one to 12 or 1,100%.⁹ Calabarzon recorded an increase of 200% or from two to six.⁸ The Centers for Disease Control and Prevention (CDC) issued a travel notice for the Philippines yesterday due to the increased number of diphtheria cases reported in several regions of the country.⁹ Nine deaths have been reported for a case fatality rate of 28%.⁹ CDC says vaccination against diphtheria is essential to protect against disease. If you are traveling to an affected area, you should be up to date with your diphtheria vaccines.⁹ Before travel, discuss the need for a booster dose with your healthcare professional.⁹ Avoid contact with persons with symptoms of diphtheria (fever, sore throat, difficulty swallowing, change in voice, shortness of breath, weakness, or fatigue) and touching wounds of others.⁹ If you feel sick during or after travel, seek medical care immediately.⁹ Tell the clinician about your diphtheria vaccination status and travel exposures.⁹ If you are sick and unvaccinated or not fully vaccinated against diphtheria you are at increased risk of becoming very sick when exposed to diphtheria. It is important to start treatment with antitoxin and antibiotics as soon as possible.⁹ [\[Full article 8, 9\]](#)

Tetanus

- Vietnam:** After 10 days of stepping on a wooden stake, the 39-year-old man stiffened his jaw, his body was stiff like wood, difficult to speak, and could not open his mouth.¹⁰ Previously, the patient thought that the wound was small, bleeding less, and painless, so he bought medicine to treat it at home.¹⁰ 10 days later, the patient suddenly stiffened



his jaw, had difficulty opening his mouth, his whole body was stiff, had to use a straw to eat porridge.¹⁰ On May 1, at Hung Vuong General Hospital, the man was diagnosed with a serious tetanus infection.¹⁰ The hospital consulted with the National Hospital of Tropical Diseases, and was ready for an emergency intubation and prepared a plan for tracheostomy in case of difficulty intubation.¹⁰ Currently, the patient is temporarily out of danger and transferred to the Central Hospital for Tropical Diseases for monitoring.¹⁰ [\[Full article\]](#)

Avian Influenza A (H9N2)

- **People's Republic of China:** The World Health Organization (WHO) confirmed three new H9N2 avian influenza cases in China in the last week of April.¹¹ All cases involved children who were either living in or somehow had connections to Hunan province.¹¹ WHO noted two variant H1N1 influenza cases in young Chinese females.¹¹ According to an article published by the University of Minnesota, one of the H9N2 patients is a 10-year-old girl from Hunan province who fell ill in October 2022.¹¹ The second is a two-year-old boy, also from Hunan province.¹¹ The boy's symptoms began on February 5.¹¹ According to the report, he had been exposed to backyard poultry before he became ill.¹¹ The third case of H9N2 influenza was confirmed in a three-year-old girl from Jiangxi province.¹¹ Her symptoms began on January 31.¹¹ It is believed that she also had exposure to backyard poultry in Hunan province.¹¹ [\[Full article\]](#)

Enterovirus

- **People's Republic of China:** One new confirmed case of enterovirus infection complicated by severe disease in China, a 1-year-old boy in eastern China, was confirmed to be infected with Iraqi virus type 21 complicated by severe encephalitis on May 1 after a notification test; another new case of enterovirus type 71.¹² The mild case is a 1-year-old girl from the north.¹² Luo Yijun, deputy director of the CDC, said that enteroviruses will enter the epidemic period starting next week.¹² This year, there have been 3 severe cases of enteroviruses, all of which are different types.¹² Although the symptoms are similar, repeated infections or multiple types of simultaneous infections may occur.¹² Parents should pay more attention to whether their children have severe symptoms.¹² According to the statistics of the CDC, last week (April 23 to April 29), there were 10,066 outpatient and emergency visits to enterovirus in China, an increase of 26.0% from the 7,988 visits in the previous week, and it was close to the prevalence threshold of 11,000 visits and higher than the same period since 2017.¹² Recent laboratory monitoring has shown that different types of enteroviruses such as enterovirus 71, enterovirus D68, and keshaqi A are active in the community, and the risk of epidemic transmission has increased.¹² Lin Yongqing, an epidemic prevention physician of the CDC, said that one new severe case of enterovirus was a 1-year-old boy.¹² On April 17, due to symptoms such as convulsions, slow reaction, and cyanosis of the lips, he went to the hospital for treatment on the same day and was admitted to the pediatric intensive care unit for treatment.¹² The next day, he developed typical enterovirus symptoms such as fever, rash on the limbs, and blisters in the throat.¹² After a notification test, he was confirmed to be infected with Iraqi virus type 21 complicated by severe illness on May 1.¹² Fortunately, after 5 days in the hospital, the symptoms were relieved, and he regained his vitality, and he has returned home to recuperate.¹² Another new mild case of enterovirus type 71 was a 1-year-old girl in the north.¹² She developed symptoms such as mild fever and throat blisters in late April.¹² This year, a total of 3 severe cases of enterovirus infection complicated by enterovirus D68, Keshaqi A6, and Iraq virus 21 were accumulated; another 8 mild cases of enterovirus 71 were accumulated.¹² Lin Yongqing appealed that the girl in the east was not sent to the nursery center, but the adults at home did not show relevant symptoms.¹² He said that adults may not have obvious symptoms after infection, and they may carry the virus home and infect young

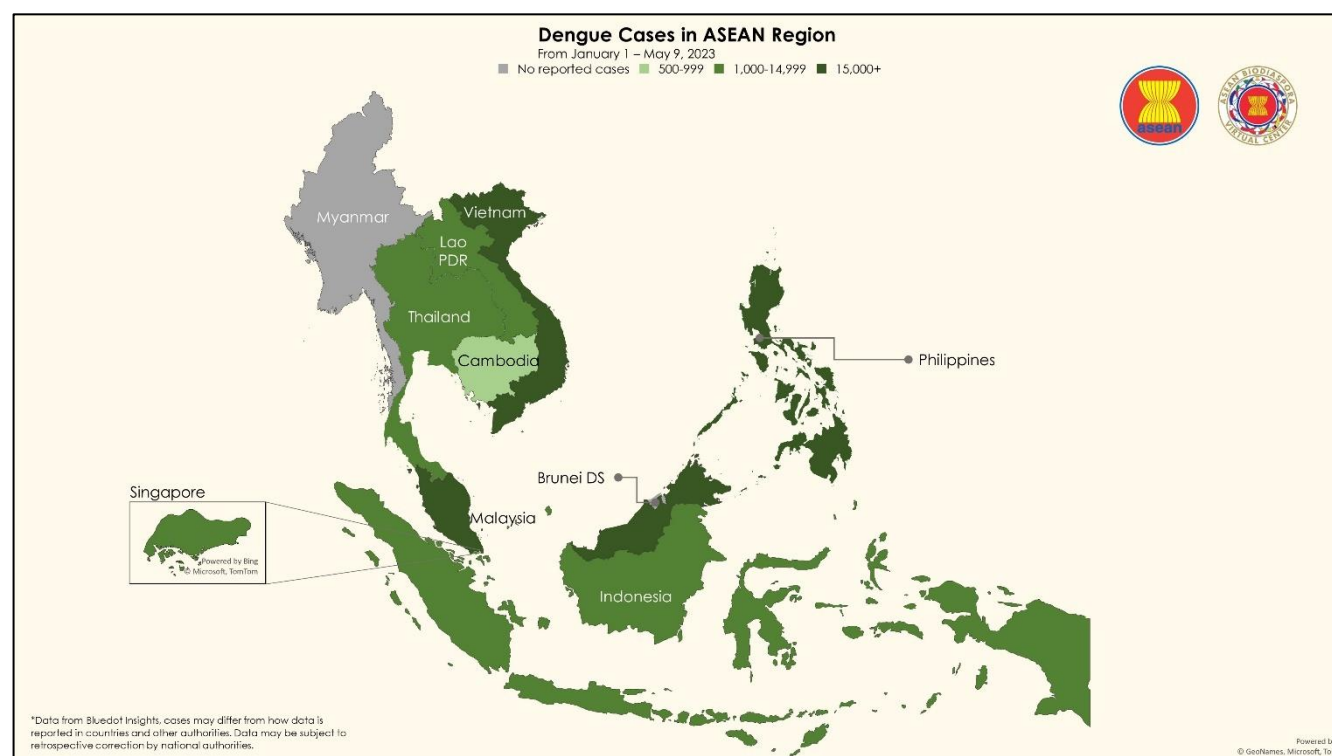


children; therefore, parents are reminded to wash their hands and change clothes after returning home, so that children are less likely to be infected.¹² And those under the age of 5 are a high-risk group for severe illness. Special attention should be paid to hygiene habits, and if there are signs of severe illness, they should go to a large hospital for medical treatment as soon as possible.¹² Luo Yijun said that because enteroviruses are in multi-type epidemics, it is still impossible to see which virus will be the main virus during the epidemic period.¹² But because the viruses are competing with each other, the chances of a pandemic are lower, but it's still too early to tell.¹² [[Full article](#)]



Dengue Cases in ASEAN Region

From January 1 to May 9, 2023



Dengue cases in ASEAN region

Country	Dengue Cases	New Cases since the previous report	Deaths	Case Fatality Rate (CFR)
Brunei Darussalam	-	-	-	-
Cambodia	750	0	2	0.27%
Indonesia	3,941	84	24	0.61%
Lao PDR	1,146	0	0	0.00%
Malaysia	35,202	0	22	0.06%
Myanmar	-	-	-	-
Philippines	31,459	0	99	0.31%
Singapore	2,724	0	0	0.00%
Thailand	3,855	0	1	0.03%
Vietnam	20,537	0	0	0.00%
Total	99,614	84	148	0.15%

*Data from Bluedot Insights, cases may differ from how data is reported in countries and other authorities. Data may be subject to retrospective correction by national authorities.

- ASEAN region reported **84** new dengue cases in Indonesia since previous report. The region reported **99,614** total cases and **148** total deaths in 2023 with **0.15%** CFR.



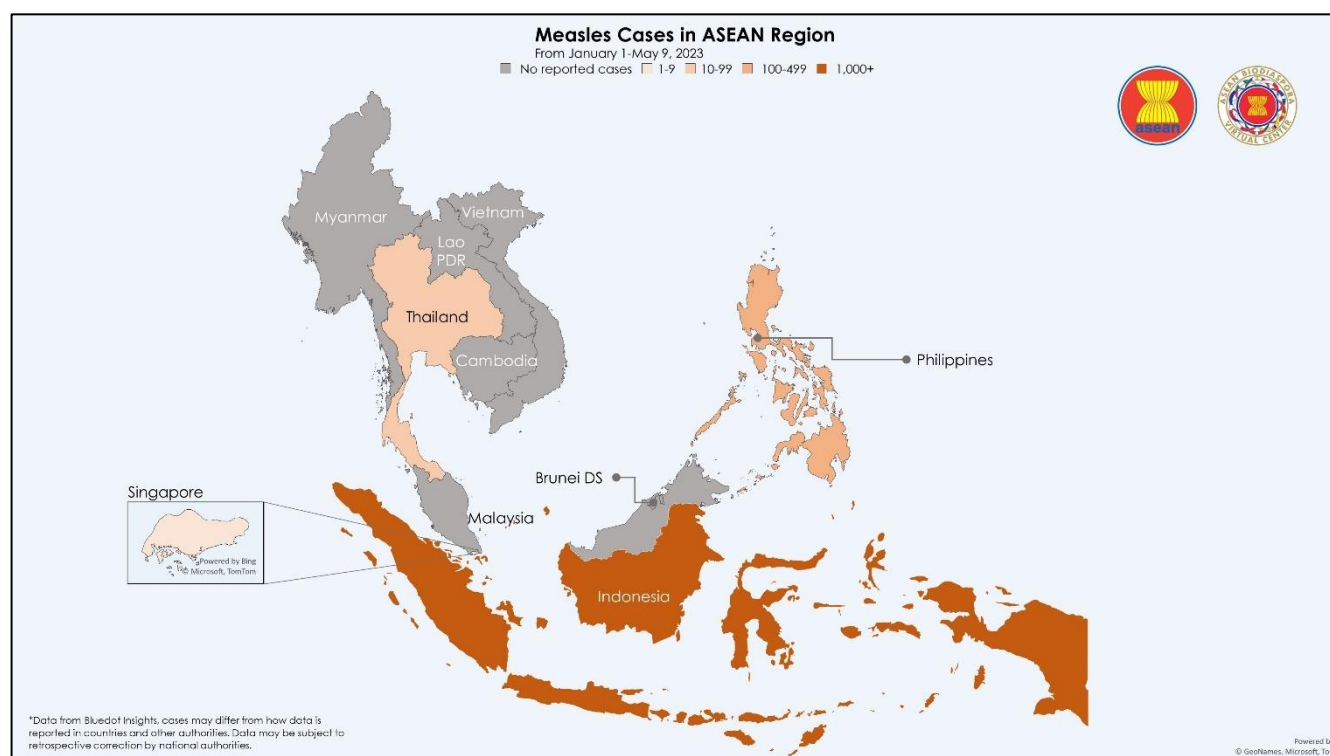
Dengue

- Indonesia:** "As of May 4 2023, there have been 58 recorded cases of DHF, therefore the public needs to be prepared," said Head of the HSS District Health Office, Siti Zainab in Kandangan, May 7.¹³ Zainab said the HSS District Health Office had issued a Circular Letter (SE) regarding preparedness for potential increases in DHF, as well as the HSS Regent's SE regarding efforts to deal with DHF.¹³ Zainab also asked the community to eradicate mosquito nests (PSN) by draining, closing and burying (3M) plus recycling or utilizing goods, as well as using mosquito repellents.¹³ In addition, the community should also activate the one house one larva monitoring program (jumantik) to monitor mosquito larvae at home, as well as assess potential risk factors for DHF in the surrounding environment.¹³ Head of Public Health and Health Information Systems (Kemas and SIK) of the HSS District Health Office, Daru Priyanto, added that there were no fatalities from the 58 cases of dengue fever in the district.¹³ "There have been no reports of deaths due to dengue, and the number of dengue cases in HSS Regency has increased by the fifth month of this year," said Daru.¹³ [\[Full article\]](#)
- Malaysia:** The number of dengue fever cases in Melaka increased by 103.8% to 322 cases from Jan 1 to April 29, compared to 158 cases in the corresponding period last year.¹⁴ Health, Human Resources and Unity Committee chairman Ngwe Hee Sem said of the total, Melaka Tengah recorded the highest number of dengue fever cases at 241, followed by Jasin (52 cases) and Alor Gajah (29 cases).¹⁴ He added a total of 89 cases were reported in January, February (61 cases), March (85 cases) and April (87 cases).¹⁴ "A total of 19 dengue fever cases were recorded in Melaka during the the 17th Epidemiological week (ME) from April 23 to 29, an increase of three cases compared to 16 cases in the previous week.¹⁴ "Of the total, 14 cases were recorded in Melaka Tengah, Jasin (three cases) and Alor Gajah (two cases)," he told reporters.¹⁴ "Fourteen dengue hotspot localities were identified, with two recorded in Melaka Tengah and one each in Jasin and Alor Gajah," he said.¹⁴ The hotspots are Taman Perkota and Jalan Sekolah, Kampung Padang Temu in Melaka Tengah, while Taman Merlimau Baru (Jasin), and Batu 21 ½ Kampung SolokDekat (Alor Gajah).¹⁴ Ngwe said the state health department will collaborate with local authorities in the three districts to conduct joint programmes to increase awareness and curb the breeding of Aedes mosquitoes, especially in residential and industrial areas.¹⁴ [\[Full article\]](#)
- Vietnam:** From April 29 to May 5, Hanoi recorded 5 cases of dengue fever (an increase of 2 cases compared to the previous week).¹⁵ Accumulated from the beginning of 2023 until now, the city has had 232 cases of dengue fever (an increase of 10 times compared to the same period last year) but no deaths.¹⁵ Patients were distributed in 27/30 districts, towns; 138/579 communes, wards, and townships.¹⁵ [\[Full article\]](#)



Measles Cases in ASEAN Region

From January 1 to May 9, 2023



Measles cases in ASEAN region

Country	Measles Cases	New Cases since the previous report	Deaths	Case Fatality Rate (CFR)
Brunei Darussalam	-	-	-	-
Cambodia	-	-	-	-
Indonesia	2,161	0	17	0.79%
Lao PDR	-	-	-	-
Malaysia	-	-	-	-
Myanmar	-	-	-	-
Philippines	308	0	-	0.00%
Singapore	5	1	-	0.00%
Thailand	73	0	-	0.00%
Vietnam	-	-	-	-
Total	2,547	1	17	0.67%

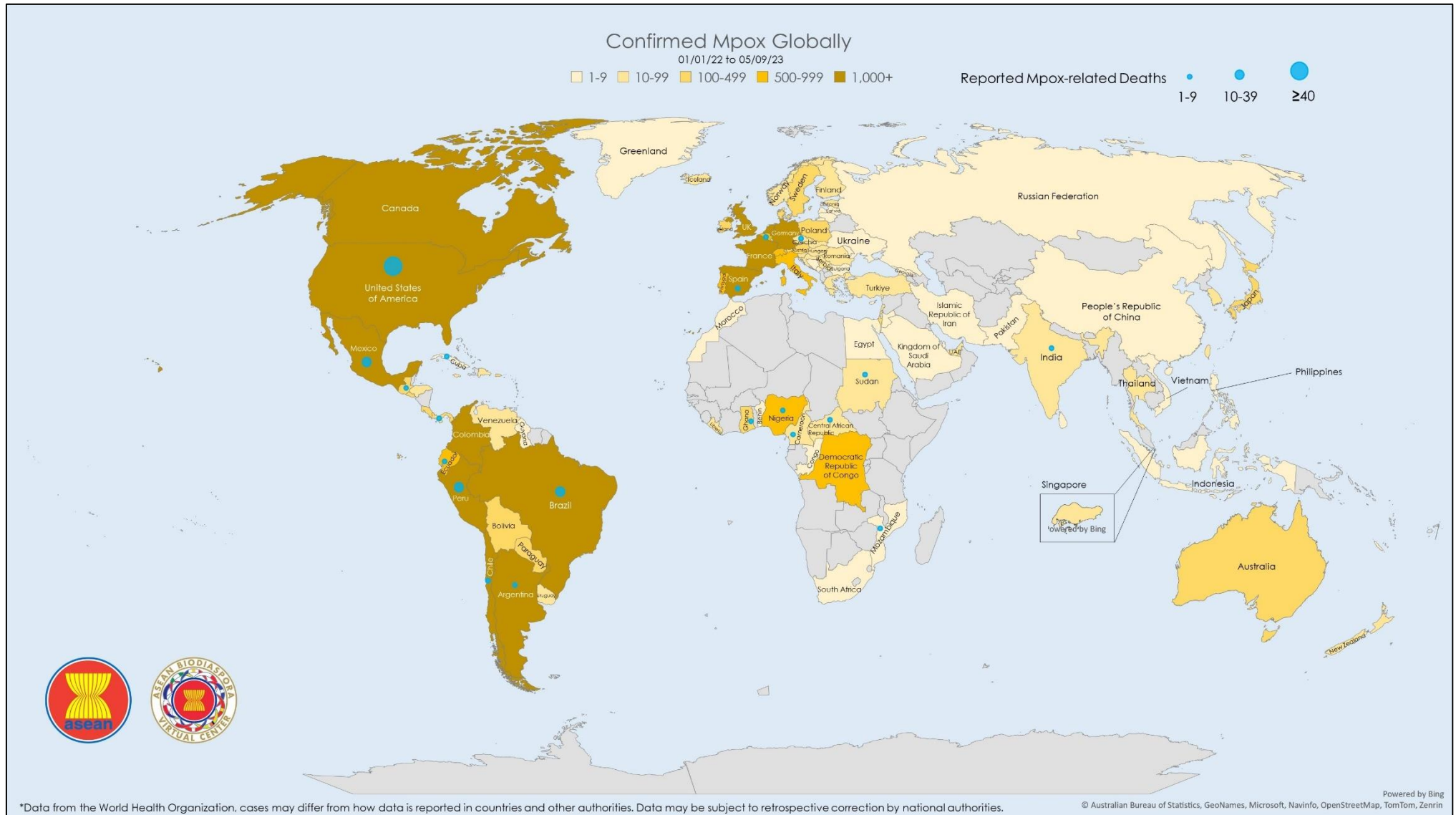
*Data from Bluedot Insights, cases may differ from how data is reported in countries and other authorities. Data may be subject to retrospective correction by national authorities.

- ASEAN region reported **1** new measles case in Singapore since the previous report. The region reported **2,547** total cases and **17** total deaths in 2023 with **0.67%** CFR.



Mpox (Monkeypox) Cases Reported Globally

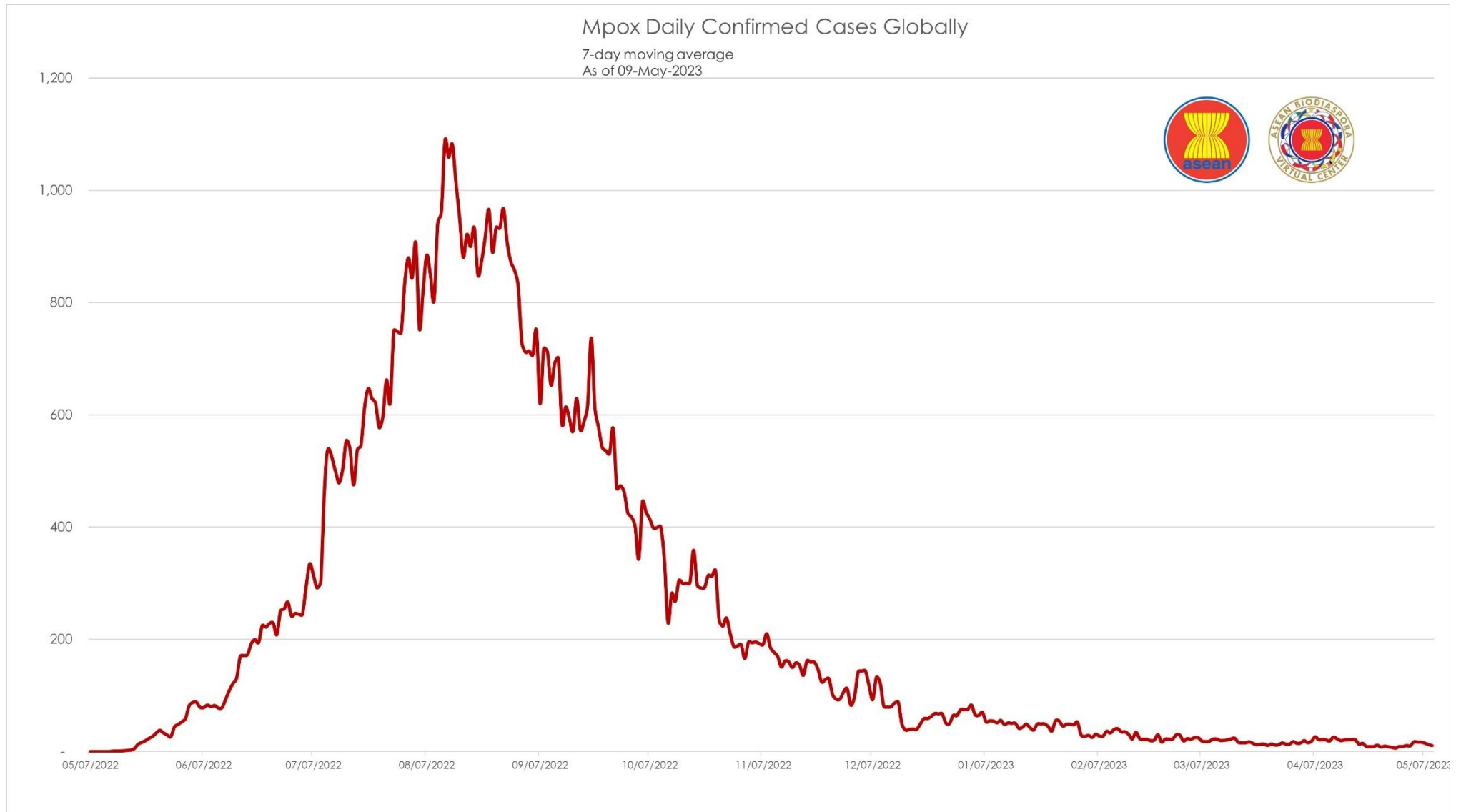
as of May 9, 2023





Mpox Daily Trend Globally

as of May 9, 2023





Mpox: Highlights and Situation Overview

- As of 09 May 2023 (1PM, GMT+7), worldwide, there were **87,375** confirmed cases, including **140** deaths. Globally, Case Fatality Rate (CFR) was **0.16%**.
- 53 confirmed cases** in the ASEAN region, with CFR of **0%**.
- 87,322 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	25	2	-	0.00%
Thailand	21	-	-	0.00%
Vietnam	2	-	-	0.00%
ASEAN Total	53	2	-	0.00%

Mpox cases in Asia-Pacific region

Country/Territory	Total Cases	New Cases	Deaths	Case Fatality Rate (CFR)
Australia	145	1	-	0.00%
India	22	-	1	4.55%
Japan	127	-	-	0.00%
New Caledonia	1	-	-	0.00%
New Zealand	41	-	-	0.00%
People's Republic of China*	71	-	-	0.00%
Republic of Korea	60	11	-	0.00%
Sri Lanka	2	-	-	0.00%
Asia-Pacific Total	469	12	1	0.21%

*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	30,154	-	42	0.14%
Brazil	10,920	5	16	0.15%
Spain	7,551	3	3	0.04%
France	4,146	2	-	0.00%
Colombia	4,090	-	-	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	1,619	-	19	1.17%
AMERICAS	59,293	53	114	0.19%
ASEAN	53	2	-	0.00%
ASIA PACIFIC	457	-	1	0.21%
EUROPE	25,616	6	6	0.02%
MIDDLE EAST	325	2	-	0.00%
TOTAL	87,375	63	140	0.16%

Global Update

- Hong Kong** health authorities are investigating a new monkeypox case involving a 34-year-old man who is a close contact of the city's fifth confirmed infection.¹⁶ The Centre for Health Protection said the man was epidemiologically linked to the other patient, 59, who was confirmed to have contracted the rare disease caused by the monkeypox virus last April 28.¹⁶ The latest patient was in good health before becoming infected, the centre said.¹⁶ He was admitted to Alice Ho Miu Ling Nethersole Hospital in Tai Po for precautionary quarantine on Sunday, when he also developed a rash on his body. The centre's public health laboratory services branch confirmed the man tested positive for the virus on May 1.¹⁶ He was in a stable condition.¹⁶ The man, who had not been vaccinated against the disease, had been in Taiwan from April 9 to 15.¹⁶ Two of his household members would be quarantined and given post-exposure vaccinations, the centre said, adding that they remained asymptomatic.¹⁶ Epidemiological investigations were ongoing.¹⁶ The centre said it would report the case to the World Health Organization.¹⁶ The 59-year-old man's case was the city's fifth confirmed monkeypox infection.¹⁶ The man has a chronic illness and was admitted to Princess Margaret Hospital in Kwai Chung.¹⁶ He was reported as being in a stable condition.¹⁶ Investigation found the patient, who had travelled to mainland China's Guangdong province multiple times from April 2 to 19, had high-risk exposure during the incubation period.¹⁶ Hong Kong's third, fourth and fifth cases were all recorded last month.¹⁶ One instance involved a man, 25, who had visited South Korea and Japan while the other infected patient, 34, was his close contact who was earlier confirmed to have the virus.¹⁶ The city had its first confirmed case of the virus last September when a man, 30, returned from visiting the Philippines.¹⁶ [\[Full article\]](#)
- Taiwan (Province of China):** The Department of Disease Control (hereinafter referred to as the CDC) announced on May 2, 2023 that 12 local cases of monkeypox were added last week in China, distributed in Taipei City, New Taipei City, Taoyuan City, and Taichung City, with Taoyuan City having the most cases.¹⁷ Among the cases, 11 were of local nationality and 1 was of foreign nationality. They were all men, aged between their 20s and 40s.¹⁷ The onset date is between April 10 and April 23 today (2023).¹⁷ Due to symptoms such as fever, swollen lymph glands, blisters, and pustules appearing in the body one after another, after evaluation by the doctor, a test report was taken and reported.¹⁷ It was diagnosed from April 26 to May 1.¹⁷ After the epidemic investigation, 24 high-risk contacts were listed, and they have undergone health education and self-health monitoring for 21 days.¹⁷ The Centers for Disease Control and Prevention pointed out that Mpox is listed as a second-class legal infectious disease since June 23, 2022.¹⁷ As of today, a total of 64 cases (55 local cases and 9 imported cases) have been diagnosed, of which 30 cases have recovered,



10 cases are still hospitalized, and 24 cases are under home independent health management.¹⁷ According to statistics from the CDC, as of May 1, a total of 20,936 Mpox vaccination services have been completed, including 82 post-exposure prophylaxis (PEP) vaccinations and 20,854 pre-exposure prophylaxis (PrEP) vaccinations; A total of 20,471 people were vaccinated among high-risk actors.¹⁷ In order to increase the coverage of the vaccine as soon as possible to enhance herd immunity, the second phase of monkeypox vaccine will be vaccinated before mid-May.¹⁷ Those who have completed the registration of vaccination willingness should go to the provided hospital website link as soon as possible to complete the appointment registration, and go to the hospital to get vaccinated according to the registration time to protect yourself and others.¹⁷ In addition, the emergency purchase of 20,000 bottles of vaccine (approximately 60,000 doses) is expected to arrive in mid-May, and discussions will be held with the health bureaus of counties and cities this week to provide people who meet the vaccination requirements and those who can be vaccinated.¹⁷ [\[Full article\]](#)



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