

9 June 2021 – As of 08 June 2021 (11:59 PM), the Eastern Mediterranean Region has reported 10 353 336 confirmed COVID-19 cases and 206 573 deaths.

While the total number of cases has declined over the past 6 weeks and the number of deaths stabilized, 9 countries reported an increase in cases last week, compared to the previous week. These include Somalia, Sudan and Afghanistan, who reported the highest increase in cases. Eleven countries reported an increase in deaths last week, with the highest numbers reported from Sudan, Afghanistan and Morocco.

Variants of concern (VOC) continue to circulate across the Region. To date, 17 countries have officially reported the detection of the VOC Alpha, 10 countries have reported the VOC Beta, 3 countries have officially reported the detection of the VOC Gamma, and 6 countries have reported the VOC Delta (B.1.617.2).

In countries where cases of COVID-19 are increasing, we currently have no data to support that this increase is a result of new variants. We are carefully monitoring the situation and encouraging all countries to conduct genomic sequencing analysis so that we can identify new variants and monitor their changes over time.

14 countries in the Region now have local capacity to conduct genomic sequencing in order to detect SARS CoV-2 variants of concern. The other 8 countries receive WHO support to sequence abroad. Two regional reference laboratories are currently supporting other countries in genomic sequencing analysis.

We can take some relief in the fact that there has been a progressive decline in the number of cases and deaths compared to this time last year. But we are certainly not out of the woods yet. Especially when we consider our vaccine coverage; less than 10% of the population across the Region has received at least one dose of the vaccine and in half of the countries, coverage is less than 5%. Once again, we call for vigilance in responding to the pandemic through strong public health and social measures, and other critical interventions.

While we see many countries in other Region, including in Europe, start to ease lockdowns and

relax social restrictions, we should remember that the epidemiology and vaccine coverage in our Region are different, and it is still too early to relax public health and social measures.

We continue to monitor the situation carefully, especially as we enter summer, when holiday travel and gatherings are expected to increase and may contribute to new spikes in cases and deaths.

As more people plan holiday travel over the coming months, there are questions around whether vaccinations should be required as a condition for international travellers. At present, WHO does not support proof of vaccination against COVID-19, whether by national authorities, or by transport operations, as a condition for exiting or entering a country.

And while vaccines are an essential tool in our fight against the virus, they are not the only way to end the pandemic. Preventive measures such as mask use, physical distancing, and other measures remain essential, and we know they work in saving lives and protecting others, even against new variants. These are the measures that we should all adhere to, until enough people are vaccinated to ensure population immunity.

Vaccines that are being rolled out across the Region are also effective against new variants, although vaccine hesitancy is a key challenge preventing us from reaching our goal of vaccinating 30% of the population in all countries by the end of the year. Despite the rumours and conspiracy theories circulating, we know that vaccines are safe and prevent severe infection, hospitalization and death. Ensuring the quality, safety and efficacy of vaccines is one of WHO's highest priorities. This applies to all 6 vaccines that have now received WHO emergency use listing.

But we also need to remember that being vaccinated does not mean that we can throw caution to the wind and put ourselves and others at risk: relaxing public health interventions should be done cautiously and with careful attention paid to those who remain unvaccinated.

There are currently no data on the immunogenicity or efficacy of a 'mix and match' regimen. COVID-19 vaccines that have been approved for emergency use by WHO have only been assessed as single product regimens and we cannot therefore support combination vaccinations until more evidence becomes available

There has been much public attention, and some misinformation, around a disease called mucormycosis, or black fungus. Black fungus is a very rare disease that does not occur through transmission from person to person. It is a disease that affects only people with severely weakened immunity. It is caused by exposure to the fungus in the environment, when spores can be inhaled that then infect the lungs, sinuses, and extend into the brain or eyes.

While there is no direct link between COVID-19 and mucormycosis, symptoms are appearing in some COVID-19 patients due to very low immunity, poorly controlled diabetes, and misuse of corticosteroids. If you have underlying conditions like uncontrolled diabetes and malignancies that put you at risk for more severe COVID-19 and black fungus, it is important to seek the advice of a health care professional.

Controlling the pandemic across the Region has been challenging due to a number of reasons: the emergence of new variants, COVID-19 fatigue, and the failure of many people to adhere to the public health and social measures. But one of the biggest challenges has been the continuous spread of rumours and misinformation. We urge all people, including the media, to verify any information through reputable sources such as WHO, before spreading information that can be at best confusing, and at worst deadly. Once again, we call on you, our colleagues and partners in the media, to report the most up-to-date and evidence-based information. Your role in defeating the virus is vital. We will continue to do our part and we count on you to do the same.

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