Highlights

- On 11 March, WHO announced that the outbreak of COVID-19 “can be characterized a pandemic”. This is the first pandemic caused by a coronavirus. This is the first pandemic caused by a coronavirus.

- 16 countries in the Region have reported laboratory-confirmed cases of COVID-19, with occupied Palestine Territory reporting its first cases this week. Most of the cases in the Region reported history of travel to Iran, Italy and China and some with history of travel to France, UK and Egypt.

- As of 12 March 2020 at 18:00 Cairo local time, 11,036 laboratory-confirmed cases of coronavirus disease 2019 (COVID-19), including 441 associated deaths (case–fatality rate: 4.00%) were reported in the WHO Eastern Mediterranean Region (EMR). Most of these cases (10,075 cases) and deaths (429 deaths) were reported from Islamic Republic of Iran.

- A total of 2253 cases have been reported by 11 countries as successfully regained their health after being infected with COVID-19.

- Multidisciplinary teams from WHO and other experts have been deployed to Bahrain, Kuwait, Iraq to support ongoing readiness response efforts.

- Concern continues around silent transmission occurring in Egypt due to reports of cases in other regions with history of travel to Egypt. Extensive investigations are ongoing.
Map 1. Distribution of COVID-19 confirmed cases reported in EMR, 12 March 2020 (7PM Cairo local time)

Surveillance

Table 1. Laboratory-confirmed cases of COVID-19 and associated deaths reported by countries in the EMR as of 12 March 2020 (18:00 Cairo local time)

<table>
<thead>
<tr>
<th>Country</th>
<th>Cases 18:00 - 18:00</th>
<th>Deaths 18:00 - 18:00</th>
<th>Cumulative cases</th>
<th>Cumulative deaths</th>
<th>% Region</th>
<th>Numbers Recovered</th>
<th>Recovery %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>7</td>
<td>0</td>
<td>7</td>
<td>0</td>
<td>0.1</td>
<td>35</td>
<td>17.9</td>
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<tr>
<td>Bahrain</td>
<td>6</td>
<td>195</td>
<td>195</td>
<td>0</td>
<td>1.8</td>
<td>35</td>
<td>17.9</td>
</tr>
<tr>
<td>Djibouti</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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</table>
### WHO strategic objectives

- Interrupt human-to-human transmission, including reducing secondary infections among close contacts and health care workers, prevent transmission amplification events, and prevent further international spread.
- Identify, isolate and care for patients early, including providing optimized care for infected patients.
- Address crucial unknowns regarding clinical severity, extent of transmission and infection, and treatment options.
- Communicate critical risk and event information to all communities and counter misinformation.
- Minimize social and economic impact through multisectoral partnerships.

<table>
<thead>
<tr>
<th>Country</th>
<th>Cases</th>
<th>Deaths</th>
<th>Recoveries</th>
<th>ICU</th>
<th>Mortality Rate</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Egypt</td>
<td>7</td>
<td>67</td>
<td>1</td>
<td>0.6</td>
<td>27</td>
<td>40.3</td>
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<tr>
<td>Iran</td>
<td>1075</td>
<td>75</td>
<td>10075</td>
<td>429</td>
<td>91.3</td>
<td>2134</td>
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<tr>
<td>Iraq</td>
<td>70</td>
<td>7</td>
<td>6</td>
<td>0.6</td>
<td>6</td>
<td>8.6</td>
</tr>
<tr>
<td>Jordan</td>
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<td>0</td>
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<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Kuwait</td>
<td>8</td>
<td>80</td>
<td>0</td>
<td>0.7</td>
<td>2</td>
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<tr>
<td>Lebanon</td>
<td>5</td>
<td>1</td>
<td>66</td>
<td>3</td>
<td>0.6</td>
<td>15</td>
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<tr>
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<td>0</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Morocco</td>
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<td>6</td>
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<td>16.7</td>
</tr>
<tr>
<td>Occupied Palestinian territory</td>
<td>1</td>
<td>31</td>
<td>0</td>
<td>0.3</td>
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<tr>
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<td>19</td>
<td>0</td>
<td>2</td>
<td>0.2</td>
<td>9</td>
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<td>2</td>
<td>10.0</td>
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<td>Qatar</td>
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<td>2.4</td>
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<tr>
<td>Saudi Arabia</td>
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<td>5</td>
<td>11.1</td>
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<td></td>
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<tr>
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<td></td>
<td></td>
<td></td>
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<tr>
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<tr>
<td>Tunisia</td>
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<td>7</td>
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<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>United Arab Emirates</td>
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<td>85</td>
<td>0</td>
<td>0.8</td>
<td>17</td>
<td>20.0</td>
</tr>
<tr>
<td>Yemen</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>1141</td>
<td>76</td>
<td>11036</td>
<td>441</td>
<td>100.0</td>
<td>2253</td>
</tr>
</tbody>
</table>

*Note: The data represents the number of cases, deaths, recoveries, ICU cases, and the mortality rate.*
Graph 1: Trend of cases reported in the Eastern Mediterranean Region (30 December 2019 – 09 March 2020)

Preparedness, readiness and response

Regional Level Highlights

- Six national COVID-19 specific preparedness and response plans have been developed (Pakistan, Lebanon, Libya, Syria, Egypt, Jordan) and shared with the Regional Office.
- Business continuity plans are being updated at the Regional Office as well as in some country offices. The Regional Office and most country offices are reviewing workplace infection prevention and control measures to be put in place.
• A surge deployment session was held this week to share information on WHO’s surge policy as well as key tips and tools to support staff to prepare before, during and post deployment.
• Multidisciplinary technical teams from WHO, GOARN partners and other experts have been deployed to Bahrain, Kuwait, and Iraq to support ongoing response efforts. The mission to Iran concluded this week.
• WHO is concerned countries that have not yet reported cases and urge them to enhance their surveillance system and lab capacities WHO has shared interim guidance developed by WHO, IOM and UNHCR on scaling-up COVID-19 outbreak readiness and response operations in humanitarian situations, including camps and camp-like settings, to countries.
• Technical support is being provided to all countries in the areas of surveillance, rapid response, laboratory diagnosis, mass gathering preparedness, points of entry, IHR (2005), logistics and supplies, infection prevention and control, case management and risk communication.
• Globally, the Dubai operation has delivered or dispatched across all 6 WHO regions. Over 1,200 laboratory screening test kits were dispatched to countries across the Region.
• Most countries have been equipped with diagnostic kits for confirmation of cases. To date, 20 countries have the national capacity to test and the other two are connected to international referral networks.
• The Regional Office is collaborating with the Islamic Advisory Group to develop religious messaging to use for risk communication and community engagement in the Region.
• Data reporting continues to be a challenge for many countries in the Region. Case reporting forms are not being submitted from countries and the ones that have been submitted are partially complete.
• The number of countries implementing suspension of schools and universities as part of the preventive measures is increasing to slow down the spread of the virus.
• The number of countries imposing travel restrictions is increasing daily. Surveillance and screening activities have also been enhanced at the points of entry among the travelers with history of travel to the affected countries.
• Major mass gatherings and social events have been cancelled in most of the countries in the region, including Friday prayers in some countries.
• Many countries in the Region have implemented a hotline to call for advising public on measures to take if infection is suspect and to answer key questions.

Highlights of multidisciplinary public health missions to countries

• While cases continue to climb in Iran and plenty of challenges persist, many appropriate steps are being taken and that there continues to be rapid scale-up in the hot spot areas and adjustment of the response. There is strong commitment within the government, the health sector and the society overall to control the outbreak.
• WHO will ensure support to Iran in prioritizing the identification, isolation and treatment of mild cases; further scaling up lab testing capacities; strengthening the epidemiological analysis and monitoring; revising and enforcing Infection Prevention and Control policies and procedures; and strengthening the overall monitoring of the response.
• Kuwait has developed a strong strategy for case detection mainly based on detection of cases at PoE and contact tracing and follow-up. There are trained staff at PoE taking actions for early detection of ill travelers, investigation, and fast track for safe transportation of suspected cases to designated health facilities. Risk
communications processes and systems for COVID-19 are in place, including establishment of a hotline, engagement of media (daily press conferences) and social media, and rapid rumors tracking and response

- WHO is supporting enhancement of COVID-19 surveillance capacities in Kuwait, ensuring standardized systems for regular monitoring and proper implementation of Infection Prevention and Control measures, and, improvement of data management capacities.
- Bahrain has strong national Infection Prevention and Control coordination with appropriate governance, availability and dissemination of guidelines on Infection Prevention and Control measures, enough stockpiles of protective equipment for health staff, and hospital Infection Prevention and Control preparedness plans.
- WHO will support Bahrain in enhancing COVID-19 surveillance capacities and improvement of data management capacities.

Country Level Highlights

- WHO coordinates the preparation of an inter-agency COVID-19 response plan for the occupied Palestinian territory with a list of priority actions for the next three months. A meeting of operational Health Cluster partners took place on 11 March to finalise the plan. The MOH have been accelerating their preparedness and have implemented effective measures to ensure early detection and case management of any suspected COVID-19 case.
- Djibouti has conducted a simulation exercise to test the detection and isolation system in place and scale up preparedness measures.
- Saudi Arabia has reopened Mecca’s Grand Mosque after a thorough disinfection of the area.
- Qatar, Jordan and Lebanon have enrolled in early investigation studies and are implementing the protocols accordingly with the use of Go.Data. for visualization of transmission chains.
- In Jordan, WHO is supporting the ministry of health to strengthen preparedness and response measures including awareness raising, updating of national COVID-19 preparedness and response plan. National Rapid Response Teams (RRT) for detection and investigation have been activated.
- Lebanon has trained 10 nurses who will support the MOPH Call Center. Lebanon has also trained 86 members of the Red Cross, local NGOs, and hotline responders on triage and psychosocial support of callers reaching out to their call centers, and on transportation of suspected cases.
- In Pakistan, the first ever BSL-3 mobile laboratory with state-of-the-art equipment arrived at Taftan border to conduct tests for COVID-19 at point of entry. 154 health care providers including 34 medical officers have been deployed at the newly identified quarantine facility established at Pakistan council of Scientific and Industrial Research (PCSIR), Quetta, Balochistan.
- Yemen currently has no confirmed cases of COVID-19, but WHO is scaling up preparedness and response efforts, in the event a case is confirmed. WHO supported establishing a quarantine facility at Sana’a airport and have assessed and designated a hospital with isolation capacity. Case management training and table-top simulation exercises are being conducted in in Aden

Recommendations and advice to countries

- Ensure contingency plans are in place for surge mobilization, including for human resources and supplies
- Reinforce information sharing with WHO regarding identified cases through IHR channels
• Recognize the criticality of timely sharing of fully completed case forms via NFPs to improve global understanding of COVID-19.
• Enhance surveillance at points of entry, health facilities, and within the community to identify suspected cases as early as possible
• Conduct risk assessments for all mass gatherings planned in the Region.
• Conduct rapid mapping exercise for the existing preparedness and response capacities and identify key gaps to be prioritized.
• Establish proper coordination mechanisms to coordinate preparedness and response activities with government institutions and partners and assign roles and responsibilities to address key gaps.
• Invest more in preparedness and response to this outbreak, and prioritize improvement of infection prevention and control practices, protection of health workers, individuals at risk, and communicating better the risks of transmission to the public.
• Augment the knowledge and skills among frontline health workers on investigation and management of COVID-19 outbreaks.

Recommendations and advice for the public

Standard recommendations to reduce exposure to and transmission of a range of illnesses include:

• Maintaining basic hand and respiratory hygiene, including proper cough and sneezing protocol
• Maintaining safe food practices, including avoiding eating or drinking uncooked animal products
• Avoiding close contact, when possible, with anyone showing symptoms of respiratory illness such as coughing and sneezing.

More information here

Useful links

• Technical guidance
• Protect yourself and others
• Myth busters
• Travel health
• Videos
• Questions and answers

For further information, contact emrgonCoV@who.int