Coronavirus Disease 2019 (COVID-19) Situation Report



WHO Office - Riyadh

Weekly Report No. 275 - Saudi Arabia 27 January - 2 February, 2022

	Glo	bal	Eastern Mediterranean Region				
	COVID-19 Cases	COVID-19 Deaths	COVID-19 Cases	COVID-19 Deaths			
Current	380,321,615	5,680,741	19,172,362	322,060			
Last Week	356,955,803	5,610,291	18,458,629	320,133			

Saudi Arabia

	Confirmed Cases	Recovered Cases	Deaths	Active Cases	Critical Cases	PCR Tests			
Total	695,217	649,334	8,943	36,940	1,002	38,166,414			
in 7 days									
26/1/2022	4,738	4,973	2	39,981	825	163,777			
27/1/2022	4,474	4,445	2	40,008	869	152,429			
28/1/2022	3,913	4,284	2	39,635	878	131,566			
29/1/2022	3,669	4,375	3	38,926	940	129,718			
30/1/2022	4,211	5,162	4	37,971	967	145,645			
31/1/2022	3,861	4,377	1	37,454	981	145,535			
1/2/2022	4,092	4,604	2	36,940	1,002	148,670			

Vaccination in Saudi Arabia

Total Doses Administered	Total of 1 st Dose	Total of 2 nd Dose	Total of Booster Doses
57.9 million	25.6 million	23.7 million	8.5 million

HIGHLIGHTS

• Regions with the highest new infections over the past 7 days: Riyadh followed by Jeddah.

• Transport General Authority: Starting February 1, 2022, receiving a booster dose and the "Immune" vaccinated status in Tawakkalna will be a prerequisite for the use of land, sea, and rail transportation with the exception of groups exempt from taking the vaccine.

• MoH: The Kingdom is heading towards a decrease in daily cases, and this will be followed by the critical cases curve in intensive care.

• Ministry of Interior records 29,164 violations against precautionary measures nationally in 1 week.

• WHO publishes Global analysis of health care waste in the context of COVID-19.

• WHO launches recommendations on mask use by health workers, in light of the Omicron variant of concern: WHO interim guidelines, 22 December 2021, see link.

• WHO issues an updated interim statement on COVID-19 booster doses, see link.

• WHO issues COVID-19 infection prevention and control living guideline: mask use in community settings, see link.

• WHO Updates guidelines on the management of multisystem inflammatory syndrome in children associated with COVID-19 MIS-C

• WHO publishes recommendations on the Co-administration of seasonal inactivated influenza and COVID-19 vaccines, see link.

• WHO publishes Therapeutics and COVID-19: living guideline, see link.

IMPORTANT LINKS

• MoH COVID-19 updates: https://twitter.com/saudimoh

WHO's COVID-19 global situation reports: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports

• WHO's COVID-19 dashboard: https://covid19.who.int/

• MoH COVID-19 dashboard: https://covid19.my.gov.sa/ar/Pages/default.aspx

• Global analysis of health care waste in the context of COVID-19: https://www.who.int/publications/i/item/9789240039612

WHO recommendations on mask use by health workers, in light of the Omicron variant of concern: WHO interim guidelines, 22
December 2021:https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC_Masks-Health_Workers-Omicron_variant-2021.1
WHO interim statement on COVID-19 booster doses:

Interim statement on booster doses for COVID-19 vaccination (who.int)

• WHO issues COVID-19 infection prevention and control living guideline: mask use in community settings:

https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC masks-2021.1

WHO updates guidelines on the management of multisystem inflammatory syndrome in children associated with COVID-19

WHO issues guidelines on the treatment of children with multisystem inflammatory syndrome associated with COVID-19

• WHO recommendations on the co-administration of COVID-19 and influenza vaccines: Coadministration of seasonal inactivated influenza and COVID-19 vaccines (who.int)

• Therapeutics and COVID-19: living guideline:

https://www.who.int/publications/i/item/WHO-2019-nCoV-therapeutics-2022.1

IMPORTANT DEVELOPMENTS

The World Health Organization issued an emergency use listing (EUL) for Nuvaxovid™

The new vaccine was developed by Novavax and the <u>Coalition for Epidemic Preparedness Innovations</u> (CEPI), and is the originator product for the Covovax[™] vaccine that received WHO emergency use listing on 17 December.

Both vaccines are made using the same technologies. They require two doses and are stable at 2 to 8 °C refrigerated temperatures. The Novavax vaccine (NVX-CoV2373) consists of a recombinant SARS-CoV-2 spike protein nanoparticle administered as a co-formulation with the adjuvant Matrix-M. Protein-based vaccines have been used against diseases such as pertussis, human papillomavirus, and hepatitis B. Matrix-M is a novel adjuvant that has been used in studies but has not previously been used in any licensed vaccine .

The efficacy of NVX-CoV2373 has been assessed in three phase 2 and phase 3 trials involving participants aged 18 years or older. In a phase 3 study conducted in the United Kingdom during a period in which the SARS-CoV-2 Alpha variant was predominant, vaccine efficacy (VE) against mild, moderate, or severe COVID-19 was 90% (95% CI: 80–95) from 7 days after the second vaccine dose, with a median follow-up of 56 days after the second dose. VE against mild, moderate, or severe disease in persons less than 65 years of age was 90% (95% CI: 80–95) and in those 65 years and older 89% (95% CI: 20–100). Studies of NVX-CoV2373 have demonstrated an acceptable safety and reactogenicity profile in adults ≥18 years of age, detailed data on the efficacy and safety of this vaccine can be found in the background document on the NVX-CoV2373 vaccine (see WHO website). The data reviewed by WHO support the conclusion that the known benefits of NVX-CoV2373 outweigh the risks that are known or considered possible. Therefore, WHO recommends the use of NVX-CoV2373 in persons aged ≥18 years. As sufficient vaccine supply will not be immediately available to immunize all who could benefit from it, countries are recommended to use the WHO Prioritization Roadmap and the WHO Values Framework as guidance for prioritized vaccine use, based on population subgroup.

The recommended primary vaccine series is two doses given intramuscularly into the deltoid muscle at an interval of 3–4 weeks. The vaccine should not be administered with an interval of less than 3 weeks. WHO is currently assessing the need for and timing of booster doses. Data on the duration of continued protection are currently still missing.







IMPORTANT CONTACTS

- The National Focal Person for COVID-19 is Dr Abdullah Asiri, Assistant Deputy for Preventive Health, MoH, email: AbdullahM.Asiri@moh.gov.sa