

Monthly COVID-19 Bulletin

February 2022

Epidemiological Overview Data as of 26 February 2022

In this edition:

- Epidemiological Overview (Morbidity and Mortality)
- <u>Testing</u>
- Vaccination
- Operational Updates on WHO's response per pillars of COVID-19 response

Total cases	Total deaths	Total recovered
188 528	7 008	140 941
Case Fatality Ratio	Total Tests	Total Vaccine Dose

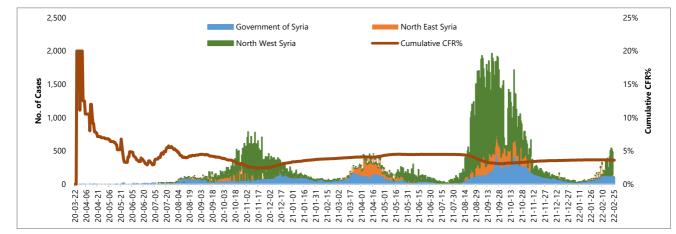
Descriptive analysis of epidemiological data for the Whole of Syria (26 February 2022)

A total of 188 528 confirmed cases of COVID-19 were reported in Syria between 22 March 2020 and 26 February 2022; of which, 95 754 (50.79%) were reported from north-west Syria (NWS), 54 380 (28.84%) from areas of Syria controlled by the government (GoS), and the remaining 38 394 (20.37%) from north-east Syria (NES). During the same period, a total of 7 008 related deaths were reported: of which 3 068 (43.78%) from GoS, 2 388 (34.08%) from NWS, and 1 552 (22.15%) from NES. The overall Case Fatality Rate (CFR) is 3.7%. The CFR was highest in GoS (5.6%), NES (4.0%) and in NWS the CFR was 2.5%. The high CFR rates in GoS is attributed to the testing strategy for only severe and critical cases admitted to hospital for treatment.

The number of confirmed COVID-19 cases reported in February across the Whole of Syria increased by 329% (n=6,573) compared with previous month (n=1,531). The increase was sharper in NWS by 2170% (n=2,679) compared to January (n=118). Cases reported in GoS increased by 164% (n=2,978) compared to January (n=1,124). Moreover, NES reported an increase of new cases by 217% with 916 new cases compared with 289 cases in previous month. The trend in number of cases detected at the WoS is proportional to the trend of lab tests done in the reported month. Despite of the increase of COVID-19 cases in February, the number of deaths has declined which could be related to the lead time between the infection with SARS-COV-2 and outcome of disease.

The uptrend of COVID-19 new case detection was observed in all governorates of Syria except in Hama, where cases decreased by 31.5%; It all coincides with increased circulation of the OMICRON variant in neighboring countries and NWS. The number of reported cases of COVID-19 and its percentage from the national total across all 14 governorates of Syria during the month of February is as follows: Idleb 23.96% (n= 1575), Aleppo 22.96% (n= 1509), Lattakia 13.53% (n= 889), Al-Hasakeh 12.63% (n= 830), Damascus 5.9% (n= 388), Homs 5.36% (n= 352), Tartous 4.08% (n= 268), Rural Damascus 3.24% (n= 213), Dar'a 2.95% (n= 194), As-Sweida 1.95% (n= 128), Ar-Raqqa 1.72% (n= 113), Hama 0.93% (n= 61), Deir-ez-213), Dar'a 2.95% (n= 194), As-Sweida 1.95% (n= 128), Ar-Ragga 1.72% (n= 113), Hama 0.93% (n= 61), Deir-ez-Zor 0.49% (n= 32), Quneitra 0.32% (n= 21).

Figure 1. Whole of Syria weekly reported COVID-19 cases up to 26 February 2022

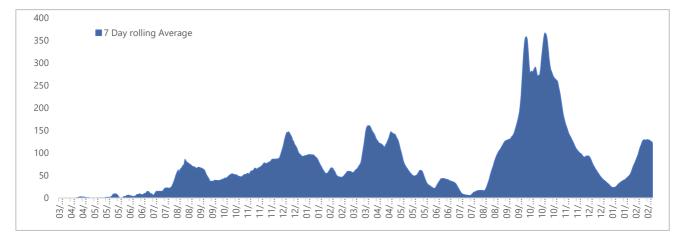


Descriptive analysis per region

Government of Syria

COVID-19 cases in GoS areas showed an increase during February, the 7-day moving average of new cases was 122 in February 2022 compared with 53 average cases in January 2022. The upgrade of COVID-19 cases is in line with Regional OMICRON circulation in EMR countries and NWS areas.

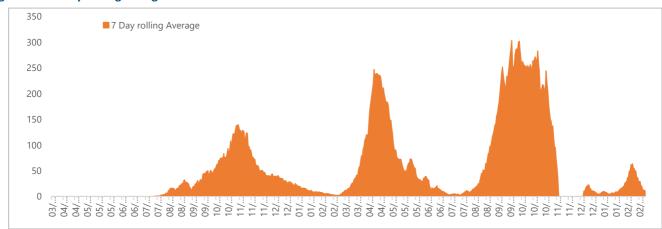
Figure, 2 The 7-days rolling average of COVID-19 cases in GoS



North-east Syria

There has been an increase of COVID-19 in NES since the beginning of 2022, the cases peaked on 12 February with 7days moving average of 63 cases. the trend in number of cases in NES is proportional to the trend of lab tests due to irregular lab supplies limited capacity. The current 7-days moving average dropped to 12 new cases by the end of February 2022.



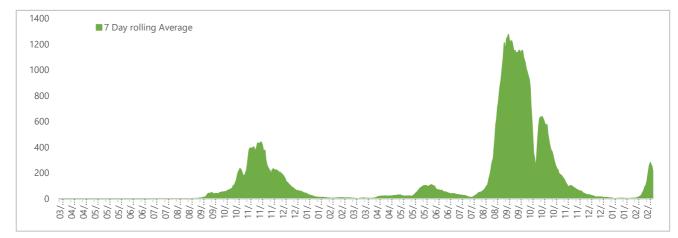


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North-west Syria

The number of confirmed cases in NWS increased remarkably in February 2022, the 7-day moving average of new cases jumped from 3 in January to 254 cases in February 2022. The sharp surge of COVID-19 in NWS is attributed to Omicron, as Omicron variant was confirmed in NWS. Out of 18 samples tested for whole genomic sequencing (Week 3,4 and 5) 12 samples confirmed the "Omicron variant" (66%).

Figure 3: The 7-day rolling average of COVID-19 cases in NES



Deaths

In February, the number of newly reported deaths associated with COVID-19 (n=131) was down by 17.1% compared to January 2022 (n= 158). The cumulative mortality rate has increased to 32.4 deaths per 100 000 cases. The highest number of COVID-19 associated deaths reported in February was in GoS (n=79) where deaths accounted for 60.3% of the total deaths in WoS. A total of 25 deaths (19.1%) was reported in NWS, and 27 deaths (20.6%) reported in NES. the cumulative case fatality rate is 3.7%. CFR remained highest in Deir Ez-Zor 8.9%, Damascus 8.68%, and As-Swieda 7.9%. The high CFR is attributed to the current testing strategy, basically testing severe COVID-19 cases admitted to hospitals; mild and moderate cases are not tested as per the current strategy.



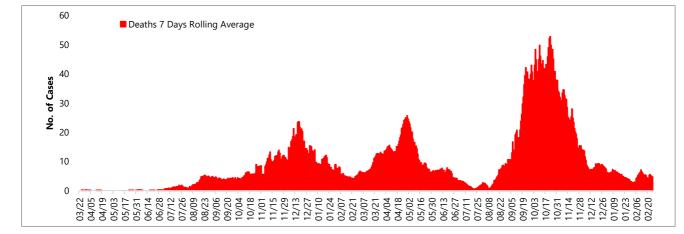


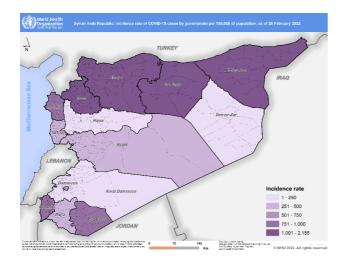
Table 1. Number of deaths increase/decrease since last month

7 008	5	
Total COVID-19 related deaths reported to date	26-day average number of deaths (February 2022)	
5	Approximately no change	
31-day average number of deaths (January 2022)	Change in 30-day average since last month	

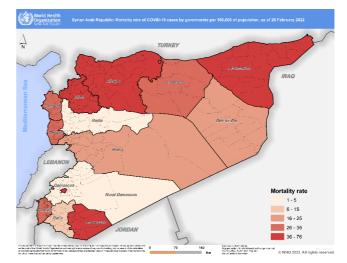
Table 2. Newly reported and cumulative cases of COVID-19 and associated deaths, by region, up to 26 Feb 2022

Area	New cases in February 2022(%)	Change in new cases Last month*	Cumulative cases (%)	New deaths in February	Change in new deaths with last Month *	Cumulative deaths (%)
Government of Syria	2,978 (45.31%)	164.9%	54,380 (28.84%)	79 (60.31%)	-14.1%	3,068 (43.78%)
North-east Syria	916 (13.94%)	217.0%	38,394 (20.37%)	27 (20.61%)	35.0%	1,552 (22.15%)
North-west Syria	2,679 (40.76%)	2170.3%	95,754 (50.79%)	25 (19.08%)	-45.7%	2,388 (34.08%)
Whole of Syria	6,573	329.3%	188,528 (100.0%)	131	-17.1%	7,008 (100.0%)

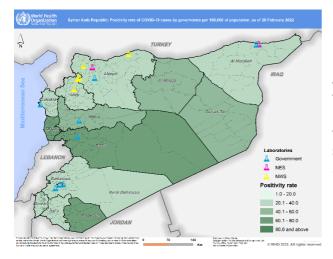
Map 1: Total number of COVID-19 cases per 100 000 of the population reported in each governorate, as of 26 Feb 2022



Map 2: COVID-19 related deaths per 100 000of the population reported in each governorate, as of 26 Feb. 2022



Map 3: COVID-19 Laboratory Positivity Rate by governorate, as of 26 Feb. 2022



At the WoS level, Syria had a low incidence levels of community transmission with 30.4 cases/100,000 population/month during February. However, the incidence rates are underestimated due to low tested numbers. The cumulative incidence rate since the start of the outbreak in WoS is 871/100 000 (as of 26 February 2022).

Testing

The testing strategy is still focusing on hospitalized patients at GoS and NES due to interruption in PCR laboratory supplies. Compared with January 2022 there was improve in testing capacity due to the introducing of Ag-RDTs for testing mild and moderate cases. However, the use of Ag-RDTs is available in only 88 health centers.

Omicron has not yet been confirmed in GoS due to lack of sequencing capacity and obstacles in shipping the samples to WHO collaborating laboratories. To improve the early detection of cases MoH is currently testing mild and moderate cases in 88 centers with Ag-RDTs. As of 26 February, a total of 7 820 tests were performed at MoH/PHCs, MoE/school health directorate centers and NGOs medical points.

The percentage of samples testing positive for COVID-19 has increased by 36% in February 2022 compared to January, the number of PCR tests conducted in February 2022 was 18 669 compared to 11 878 in January, 605 903 is the total number of PCR tests conducted in WoS up to 26 February 2022.

Table 3. Positivity Rate increase/decrease since last month

18 669	35.2%	
Number of tests conducted in February 2022	Testing positivity rate in February 2022	
11.6 % Previous average positivity rate	23.6% increase in average positivity rate since last month	

COVID-19 Vaccinations

Vaccination activities continue across Syria at both fixed health facilities and through mobile medical teams in rural areas.

477 574 new doses were administered across Syria during February 2022, and 247 431 personnel took their first dose during the same period.

The Vaccination campaigns are ongoing with all currently available vaccines provided through COVAX and Bilateral donations.

The near target aimed by the MOH is to reach 20% of the population by end of Q1 2022.

One million vaccination cards and 1 million consent forms were printed and delivered to MoH.

Pilot vaccination initiative was conducted in 3 open gardens in Damascus city for one day, resulted in vaccinating 377 people using different types of vaccines. Moreover, vaccination activity went on at one of the churches in Damascus vaccinating 218 individuals. The initiative is to be replicated at other sites as well by MOH.

1 760 400 does of Sinovac has been delivered through COVAX on 20 February 2022.

The MoH started vaccination using the Soberana vaccine (bilateral donation from Cuba).

The Draft COVID-19 deployment support CDS (short course) was submitted to GAVI for endorsement to support the COVID-19 vaccination operation and communication activities.

The Ministry of Health will work on preparing for the CDS (long course) for submission by mid-March 2022.

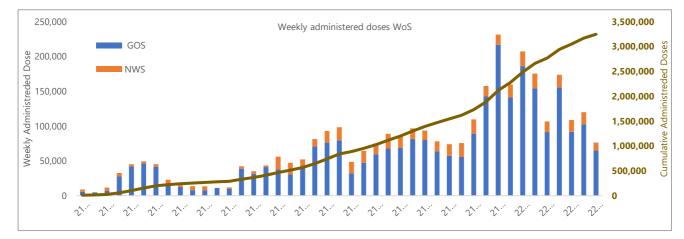
	Type of Allocation	Manufacturer of vaccine	Quantity
	COVAX	AZ Covishield	203,000
		AZ/AZD1222	1,318,340
GOS		Sinovac	3,116,400
GOS		Janssen	3,458,400
		Total	8,096,140
	Bilateral	AZ/AZD1222	368,640

Table 4: Overall delivered vaccines since April 2021 till 26 February 2022:

		Sinopharm	1,995,000
		Sputnik light	250,000
		Sputnik V	100,000
		Soberana	20,000
		Total	2,733,640
	GOS ⁻	10,829,780	
COV	COVAX	AZ Covishield	53,800
		AZ/AZD1222	307,200
NWS	NWS	Sinovac	823,200
		Janssen	832,800
		Total	2,017,000
WOS Total		12,846,780	

As per the above table, vaccines received from bilateral agreements represent 21.3% of the total vaccines received, and the rest 78.7% were delivered through COVAX.



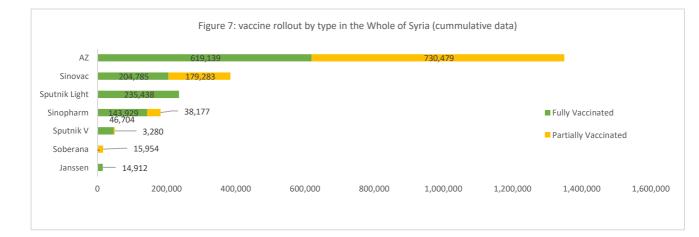


There is a 27% reduction in the average weekly administered doses of vaccine during February compared to January 2022.

Vaccination coverage:

- 10.9% of the total population received at least one dose of the vaccine, and only 6.2% are fully vaccinated.
- A total of 3,246,637 doses of different vaccines was administered. The total number of vaccinated people 2,232,080.





Vaccination coverage per region:

Government of Syria

2,739,349	
Vaccines Administered	
1,901,864	1,087,835
People who received at least one dose	People who are fully vaccinated*
11.7 %	6.7%
Percentage of the population that has received at least one	Percentage of the population that has been fully vaccinated*
dose	
1.3%	1.4%
Percentage point increase from last month	Percentage point increase from last month

North-west Syria

507,288	
Vaccines Administered	
330,216	177,072
People who received at least one dose	People who are fully vaccinated*
7.7%	4.1%
Percentage of the population that has received at least one	Percentage of the population that has been fully vaccinated*
dose	
0.9%	0.6%
Percentage point increase from last month	Percentage point increase from last month

Whole of Syria:

3,246,637			
Vaccines Administered			
2,232,080	1,264,907		
People who received at least one dose	People who are fully vaccinated*		
10.9%	6.2%		
Percentage of the population that has received at least one	Percentage of the population that has been fully vaccinated*		
dose			
1.2%	1.2%		
Percentage increase from last month	Percentage increase from last month		

WHO Syria operational updates by other pillars

Pillar One: Coordination

- The key findings of WHO EMRO mission to Damascus (12-18 February) included some of COVID-19 related objectives related to enhancement of COVID-19 data collection, specifically on WHO and health sector response; laboratory support; case management; RCCE.
- The developed health sector referral pathway enabled better and timely service provision by those health sector partners engaged in COVID-19 response.
- One of the key directions of joint health sector work as part of inter-agency consultations on development of UNHCR multi-year strategy was COVID-19, specifically case management and RCCE.
- An initiative is launched across the health sector to replicate and roll out WHO pilot COVID-19 vaccination drive in parks.
- As part of COVID-19, preparedness WHO took a lead in development of ToRs for WCO Occupational Safety and Health (OSH) Committee. This will be expanded as well to UNCT level.
- Developed overview of capacity building events supported by health sector for first quarter of 2022 is reflected of all COVID-19 subjects.

- Developed health sector preparedness operational plan, North-West Syria, Syria hub, considers related COVID-19 priorities and actions.
- Discussed with WHO technical team ways to enhance reflection of WHO provided COVID-19 response.
- COVID-19 was a standing agenda items of 2 national health sector coordination meetings in Damascus.
- COVID-19 vaccination issues and challenges in NES have been discussed during the Sub-national Health Sector Coordination meeting (27 February) attended by the Department of Health of Hassakeh Governorate and Damascus-based health sector partners.
- COVID-19 situation update for NES has been circulated among health partners in NES and presented during the Al-Hol health sector coordination meeting and Sub-national health sector coordination meeting.
- Establishment of COVID-19 treatment facilities in formal camps in NES have been discussed with OCHA SHF team and the local NGO taking over the isolation areas in Roj, Tal-Samen and Areesha camps.

Pillar Two: Risk communication and community engagement

- To address issues related to COVID-19 vaccine hesitancy, specifically within the health workforce, WHO prepared a set of questions and answers on COVID-19 vaccines to be shared with national health partners and UN agencies.
- On 12 February, a vaccination campaign was conducted at three major parks in Damascus to increase the vaccination uptake and be in direct contact with people to better understand their fears and concerns around the COVID-19 vaccines. While the number of vaccinated people on that day reached 370 people, the testimonials gathered will contribute to better understanding the knowledge, attitudes and perceptions of the Syrian community.
- To make the COVID-19 vaccines more accessible to people and engage with different target audiences, WHO shared a concept note with the Ministry of Health on expanding the pilot project of vaccination in parks to include all the Syrian governorates.
- On 2 February, the updated National Deployment of Vaccination Plan (NDVP) was finalized in cooperation with the Ministry of Health and UNICEF and submitted to the country platform, highlighting activities carried out in 2021 as well as focusing on future plans and lessons learnt.
- To ensure that people have access to credible information, WHO continued to propagate for vaccination on its social media platforms with messages reminding them that the threat of contracting COVID-19 is still ongoing. In addition, this information was shared with the Ministry of Health for wider dissemination across different channels.

Pillar Three: surveillance

- MoH-EPI, NITAG, and communicable disease representatives participated in the regional consultative meeting on Seasonal Influenza Vaccination Programmes and Policies in the Eastern Mediterranean Region. The situation of seasonal influenza vaccination policies and programs implementation in the region; and the roadmap on seasonal influenza vaccination (2022-2026) was presented. In addition, the existing opportunities to scale up and expand the seasonal influenza vaccination programs/policies - at the national level - as part of the adult vaccination programs in EMRO was discussed.
- WHO, MOH and CPHL (National influenza center) focal points participated in the regional consultative meeting on the Integration of Influenza and other Respiratory Viruses with Epidemic and Pandemic Potential in EMRO. The team presented Syria best practices regarding the integrated surveillance for influenza and SARS-COV-2 in addition to the support requested from EMRO for the implementation of the EMR operational plan for the integration of influenza and Other Respiratory Viruses in sentinel surveillance.
- A meeting conducted with director of communicable disease to review and update the reporting template of COVID-19 suspected case and update the paper template based on latest WHO guidance to include the vaccination status and re-infection status. The template was updated accordingly, and in process of obtaining the ministers' approval for endorsement and dissemination.

- The national influenza committee meeting conducted, where following points were discussed and consulted:
 - > The update of influenza surveillance data for 2021 (end year), and January 2022.
 - > The current testing strategy for the integrated surveillance of influenza and SARS-COV-2.
 - Review the sentinel hospitals and recommend new hospital (the pediatric hospital in Damascus) to represent children under 15 years in the sentinel influenza surveillance
 - > Review and identify the roles and responsibilities of focal points at the sentinel hospitals.
 - Define reporting mechanism and sharing data between the sentinel hospitals, DoH, MoH central, and influenza labs.
 - Discuss the challenges and needs of National Influenza Center (NIC) and governorate laboratories (n=2)
 - Review the reporting template of SARI cases taking into consideration the integration approach of COVID-19 and influenza surveillance.

Pillar Four: Points of entry, international travel, and transport

- WHO is collaborating with UNHCR to support the establishment and equipping of five additional medical points in Jisr Al Qamar and Dabousiya in Homs, Areeda in Tartous, Kasab in Lattakia, in Nasib in Daraa PoEs.
- The IHR implementation priorities including strengthening PoEs through conducting training workshops, establishment of Emergency Operation Centers, developing preparedness and contingency plans and conducting capacity assessment were discussed and agreed with IHR National Focal Point.
- IHR Self-Assessment Annual Reporting (e-SPAR) has been completed by Syria IHR National Focal Point. This is
 a web-based platform proposed to support State Parties of the International Health Regulations (IHR) to fulfil
 their obligation to report annually to the World Health Assembly (WHA) on the implementation of capacity
 requirements under these Regulations and to encourage the transparency and mutual accountability between
 States Parties towards global public health security, under the WHO IHR Monitoring and Evaluation
 Framework.

Pillar Five: Laboratories and diagnostics

- In the process of establishing COVID-19 sequencing at the central public health laboratory, the first batch of sequencing minion machines are in the process of shipping and expected to arrive in Syria within the first week of March. To this end, a capacity building training on sequencing for national staff was conducted in mid-February.
- WHO received 16 biosafety cabinets class 2 of which 5 cabinets with the related spare parts will be delivered directly to the new emerging diseases laboratories (under rehabilitation with WHO support) in the governorates of Al Hassakeh, Deir-ez-Zor and Lattakia.

Pillar Six: Infection prevention and control

- A joint WCO, MOH and EMRO teleconference on WHO IPC Global Survey Validation on minimum requirements for national IPC programs was facilitated and participated.
- EMRO/WCO IPC teams met online on 24 Feb, to update on the latest WHO guidelines on mask use; Regional survey for IPC in the context of COVID-19; Regional surveillance of COVID-19 infected HCWs; developing and endorsing the national IPC guidelines by 7 countries including Syria; and establishing an active national IPC programme. Coordination meetings with MOH counterparts are ongoing to agree on the needs for IPC technical support at national level and way forward.
- To booster safe health care delivery, WCO donated 341,379 IPC/PPEs supplies to health partners in Damascus (MoH Emergency Department, MoE central warehouse), Aleppo (Cardio Hospital), Al-Hasakah (DOH, Qamishli hub), Tartous (School Health Directorate, DoSA, DOH, COVID-19 lab).

Pillar Seven: Case management, clinical operations, and therapeutics

• In line with WHO support to strengthen the capacity of hospitals responding to COVID-19 pandemic and to fill the shortage of oxygen supplements in the public hospitals designated to treat COVID-19 patients, WHO has finalized the installation of the third Oxygen generator 25m3/h in AI Basel hospital in Tartous (where 170 beds

are designated to receive COVID-19 patients). Furthermore, the number of delivered oxygen cylinders (40 L) to MOH has reached 985 cylinders, including the delivery of 60 Oxygen Cylinder to hospitals in Al Hassakeh.

- Over 15 190 treatments of life-saving medicines and medical kits were delivered to health partners in Al Hassakeh, Damascus, Lattakia and Tartous. In addition, 20 Patient Monitors, 63 Surgical Suction Aspirators devices and 8 Pulse oximeters have been delivered to the isolation hospitals in Damascus. These deliveries are part of WHO's continuous efforts to enhance the capacity of the public health facilities for timely and appropriate response to COVID-19 cases.
- Seventy-five health workers from the directorate of emergency and ambulances services in Damascus received training on First Aid and Basic Life Support as well as Basic Trauma Life Support.
- One hundred twenty-five health workers (doctors, nurses, and anaesthesia technicians) from Damascus and Lattakia DoHs, working in the ICU and emergency departments received training on the management of ICU patients.

Pillar Eight: Logistics and operations

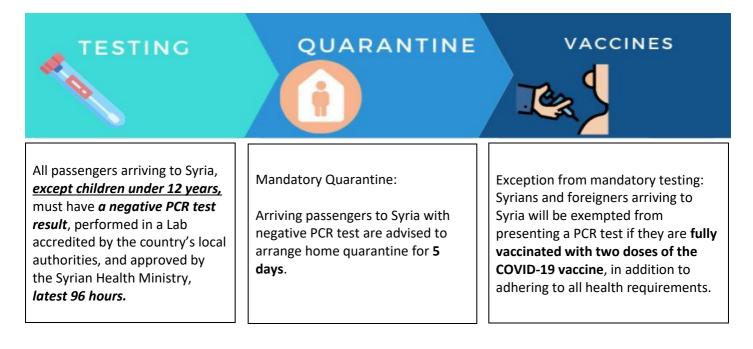
- During the reporting period, WHO has provided approximately 46.39 tons of medical and lab supplies, kits, and equipment to 11 governorates. They were distributed to the ministry of health DOHs in different governorates, MOHE and MOE-affiliated health facilities, NOGs, INGOs, and SARC.
- One crossline shipment (one road convoy with one truck in total) has been delivered to northeast Syria in February 2022 with a total weight (5 981 kgs). It included different types of medicines- RDT COVID-19, Ag (SD Biosensor - STANDARD Q), Labs supplies and consumables, and PPE's enough to cover 485 223 treatment courses.
- Twenty ambulances have arrived at Lattakia port, and they are under the process of clearance and registration. The estimated date to finalize the handing over process is 20 March 2022. The ambulances will be distributed as follows: three for Al Qamishli National Hospital, two for Al Hassakeh DOH, ten for SARC, three for MOHE and three for Aleppo children hospital.

Pillar Nine: Marinating essential health services and Systems

Two one-day workshops conducted by MOH in February 2022 to review the quantitative and qualitative impact of COVID-19 on Essential Health Services (EHSs) and documenting the best practices and lessons learnt of COVID-19 response. Directorates of Health in fourteen governorates discussed the impact of COVID-19 response and other factors, such as interrupted supply chain on provision of essential health services at Primary Health care Level. Considering the decreasing trend of EHSs, specifically EPI and reproductive health among the most affected, a comprehensive report has been developed containing recommendations on disseminating the national guide for continuity of EHSs as well as raising awareness of community and continue to train on IPCs.

SYRIA COVID-19

Travel Updates & Requirements (as of Jan 2022, Source MOH)



Technical guidance and other resources

- WHO Syria Site
- WHO technical guidance
- WHO COVID-19 Dashboard
- WHO Weekly Operational Updates on COVID-19
- WHO COVID-19 case definitions
- <u>COVID-19 Supply Chain Inter-Agency Coordination Cell Weekly Situational Update</u>
- <u>Research and Development</u>
- <u>OpenWHO courses on COVID-19</u> in official UN languages and in <u>additional national languages</u>
- WHO Academy COVID-19 mobile learning app
- <u>The Strategic Preparedness and Response Plan (SPRP)</u> outlining the support the international community can provide to all countries to prepare and respond to the virus

Recommendations and advice for the public:

- Protect yourself
- <u>Questions and answers</u>
- Travel advice
- EPI-WIN: tailored information for individuals, organizations, and communities

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