

# Coronavirus Disease 2019 (COVID-19) Situation Report



## Weekly Report No. 259 - Saudi Arabia

7-13 July, 2021

	Global		Eastern Mediterranean Region	
	COVID-19 Cases	COVID-19 Deaths	COVID-19 Cases	COVID-19 Deaths
<b>Current</b>	238,521,855	4,863,818	16,031,234	294,840
<b>Last Week</b>	235,673,032	4,814,651	15,895,754	291,879

### Saudi Arabia

	Confirmed Cases	Recovered Cases	Deaths	Active Cases	Critical Cases	PCR Tests
<b>Total</b>	<b>547,761</b>	<b>536,768</b>	<b>8,753</b>	<b>2,240</b>	<b>111</b>	<b>29,538,635</b>
<b>in 7 days</b>						
6/10/2021	47	46	4	2,220	147	51,683
7/10/2021	48	41	3	2,224	138	51,178
8/10/2021	35	51	4	2,204	141	38,343
9/10/2021	59	41	2	2,220	139	41,093
10/10/2021	58	52	3	2,223	132	48,355
11/10/2021	55	52	3	2,229	122	53,795
12/10/2021	57	44	2	2,240	111	53,930

### Vaccination in KSA

Total of Doses Administered	Total of 1 Dose	Total of 2 Doses
44.3 million	23.8 million	20.5 million

### HIGHLIGHTS

- Regions with the highest new infections over the past 7 days: Riyadh followed by Eastern Region.
- Minister of Islamic Affairs has instructed the branches of the ministry in all regions to restart in-person Holy Qur'an memorization circles in mosques and women's Qur'an learning centres.
- MoH: The immunity of the first dose would continue only for 90 days in the Tawakkalna App new update reduced from 180 days before. 2 doses of the coronavirus vaccine is not mandatory for patients to enter hospitals and medical facilities.
- The first phase of the self-registration of the biometrics of Hajj and Umrah pilgrims has been already started in 5 countries beginning with Kuwait.
- An urgent directive to education departments that students who have not received 2 doses of the vaccine should continue their education remotely.
- King Fahd Causeway witnessed 230,000 passengers crossing to and from Saudi Arabia and Bahrain following the decision to allow citizens under the age of 18 to travel to Bahrain.
- Starting Oct. 10, only those who have received 2 doses of the vaccine will have access to private and public facilities and public transportation.
- Ministry of Interior records 23,185 violations against precautionary measures nationally in 1 week. The highest number was recorded in the Riyadh Region whereas the smallest number was in Najran.
- WHO has developed a clinical case definition of post COVID-19 condition by Delphi methodology that includes 12 domains, see link.
- WHO publishes COVID-19 disease in children and adolescents: Scientific brief, 29 September 2021, see link
- WHO's Scientific Brief on Neurology and COVID-19 highlights the relationship between neurology and COVID-19, see link
- WHO publishes the updated living guideline for therapeutics and COVI-19, see link.
- WHO publishes technical specifications and implementation guidance for digital documentation of COVID-19 vaccination status, see link.
- WHO publishes holding gatherings during the COVID-19 pandemic: WHO policy brief, see link.
- WHO publishes conditional recommendation on the use of a combination of neutralizing monoclonal antibodies, 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>
- **A clinical case definition of post COVID-19 condition by a Delphi consensus:** [https://www.who.int/publications/i/item/WHO-2019-nCoV-Post\\_COVID-19\\_condition-Clinical\\_case\\_definition-2021.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-Post_COVID-19_condition-Clinical_case_definition-2021.1)
- **COVID-19 disease in children and adolescents: Scientific brief, 29 September 2021:** [https://www.who.int/publications/i/item/WHO-2019-nCoV-Sci\\_Brief-Children\\_and\\_adolescents-2021.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-Sci_Brief-Children_and_adolescents-2021.1)
- **Neurology and COVID-19: Scientific brief, 29 September:** <https://www.who.int/publications/i/item/WHO-2019-nCoV-Sci-Brief-Neurology-2021.1>
- **WHO living guideline on COVID-19 therapeutics:** <https://www.who.int/publications/i/item/WHO-2019-nCoV-therapeutics-2021.3>
- **Digital Documentation of COVID-19 Certificates: Vaccination Status:** [https://www.who.int/publications/i/item/WHO-2019-nCoV-Digital\\_certificates-vaccination-technical\\_briefing-2021.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-Digital_certificates-vaccination-technical_briefing-2021.1)
- **Holding gatherings during the COVID-19 pandemic: WHO policy brief:** <https://www.who.int/publications/i/item/holding-gatherings-during-the-covid-19-pandemic-who-policy-brief-2-august-2021>
- **Guidance on use of combination of monoclonal antibodies for non-severe and for severe/critically ill COVID-19 patients:** <https://app.magicapp.org/#/guideline/nBK01E/rec/jOp0R7>

## IMPORTANT DEVELOPMENTS

### WHO Therapeutics and COVID-19: Living Guideline recommendations for the use of monoclonal antibodies for treatment:

Earlier versions of the living WHO guideline, provided recommendations for the use (or non-use) of corticosteroids, remdesivir, hydroxychloroquine, lopinavir/ritonavir, ivermectin, and IL-6 receptor blockers. This update does not include changes to these earlier recommendations.

The new recommendation is regarding the use of a combination of neutralizing monoclonal antibodies, casirivimab and imdevimab in the treatment of non-severe patients at highest risk of hospitalization, and those with severe infection and are critically ill.

**For patients with non-severe COVID-19**, WHO suggests treatment with casirivimab and imdevimab, conditional to those who are at highest risk of hospitalization:

- \* Whereas casirivimab and imdevimab achieves a substantial reduction in the relative risk of hospitalization, the absolute benefit will be trivial or unimportant in absolute terms for all but those at highest risk for which the intervention should be reserved.

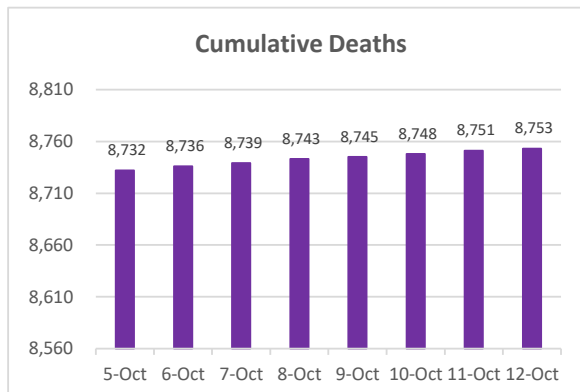
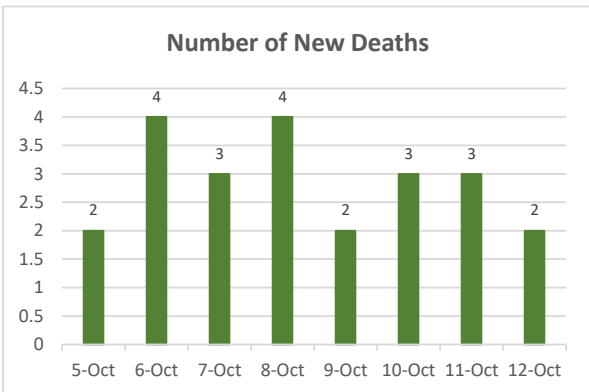
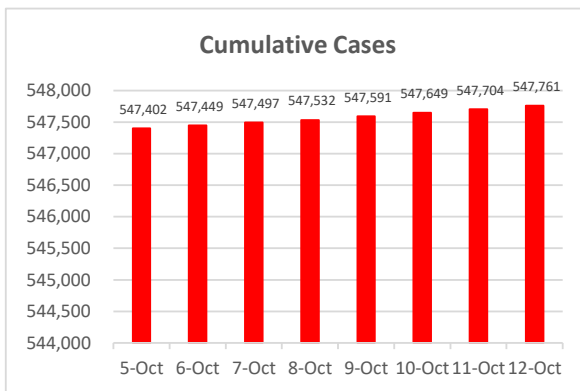
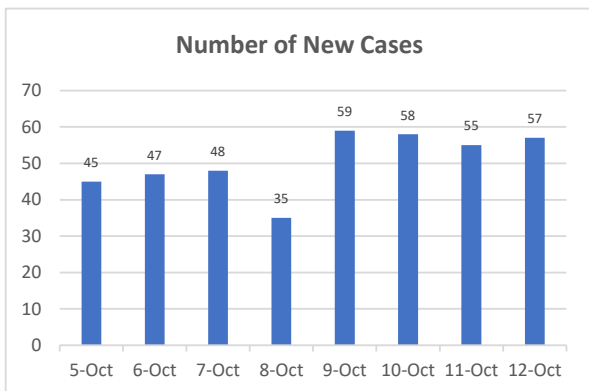
- \* A risk beyond 10% of being hospitalized for COVID-19 represents the threshold at which most people would want to be treated with casirivimab and imdevimab.

- \* In the absence of credible tools to predict risk for hospitalization, typical characteristics of people at highest risk include lack of vaccination, older people, or those with immunodeficiencies and/or chronic diseases (e.g. diabetes).

**For patients with severe or critical COVID-19**, WHO recommends treatment with casirivimab and imdevimab, under the condition that the patient has seronegative status:

- \* Clinicians will need to identify these patients by credible tests available at the point of care.

- \* Treatment with casirivimab and imdevimab is in addition to the current standard of care, which includes corticosteroids and IL-6 receptor blockers.



## 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