Coronavirus Disease 2019 (COVID-19) Situation Report



WHO Office - Riyadh

Weekly Report No. 271 - Saudi Arabia 30 December, 2021 - 5 January, 2022

	Glo	bal	Eastern Mediterranean Region		
	COVID-19 Cases	COVID-19 Deaths	COVID-19 Cases	COVID-19 Deaths	
Current	293,750,692	5,454,131	17,262,883	316,599	
Last Week	281,808,270	5,411,759	17,122,988	315,400	

Saudi Arabia

	Confirmed Cases	Recovered Cases	Deaths	Active Cases	Critical Cases	PCR Tests		
Total	565,482	543,553	8,886	13,043	109	33,747,107		
in 7 days								
29/12/2021	752	226	1	4,928	49	84,568		
30/12/2021	819	239	2	5,506	54	95,347		
31/12/2021	846	262	1	6,089	61	80,675		
1/1/2022	1,024	298	1	6,814	69	85,705		
2/1/2022	1,746	341	2	8,217	90	105,428		
3/1/2022	2,585	375	2	10,425	96	121,722		
4/1/2022	3,045	424	3	13,043	109	123,733		

Vaccination in Saudi Arabia

Total Doses Administered	Total of 1 Dose	Total of 2 Doses	Total of Booster Doses
52 million	25 million	23.3 million	3.6 million

HIGHLIGHTS

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

• MoH: Medical Isolation period of coronavirus-infected people has been reduced to 7 days if they are fully vaccinated and 10 days for the non-vaccinated effective from Wednesday, Jan. 5.

• MoH: Most of the Omicron infections were reported for those who did neither take the vaccine nor complete their doses of vaccine.

• 95 % of Saudis from the targeted age group completed their doses, while the proportion of the total population of Saudi Arabia who completed their doses reached between 70 - 75%.

• Interior Ministry: The penalty for not wearing a mask is <u>SR1000</u> for an individual and may reach up to a maximum of SR100,000 in case of the repeated violations.

- MoH has ruled out the possibility of imposing stricter lockdown measures as the mutated coronavirus variant of Omicron spreads.
- Ministry of Interior records 4,159 violations against precautionary measures within 24 hours of re-imposition of the measures in various regions of the Kingdom has come into force.

• 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.

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

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)

• 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

IMPORTANT DEVELOPMENTS

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

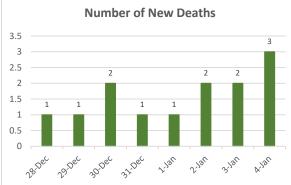
The new vaccine was developed by Novavax and the <u>Coalition for Epidemic Preparedness Innovations</u> (CEPI), and is the originator product for the Covovax[™] vaccine that received WHO emergency use listing on 17 December.

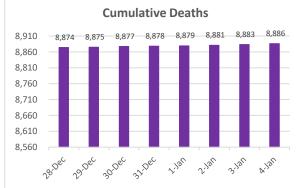
Both vaccines are made using the same technologies. They require two doses and are stable at 2 to 8 °C refrigerated temperatures. The Novavax vaccine (NVX-CoV2373) consists of a recombinant SARS-CoV-2 spike protein nanoparticle administered as a co-formulation with the adjuvant Matrix-M. Protein-based 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