Coronavirus Disease 2019 (COVID-19) Situation Report

Weekly Report No. 278 - Saudi Arabia

17-23 February, 2022

World Health Organization
WHO Office - Riyadh

	Global		Eastern Mediterranean Region	
	COVID-19 Cases	COVID-19 Deaths	COVID-19 Cases	COVID-19 Deaths
Current	426,624,859	5,899,578	20,981,889	331,550
Last Week	414,525,183	5,832,333	20,589,856	328,139

Saudi Arabia

	Confirmed Cases	Recovered Cases	Deaths	Active Cases	Critical Cases	PCR Tests
Total	**741,864**	**717,394**	**8,990**	**15,480**	**744**	**40,382,502**
			in 7 days			
16/2/2022	1,569	2,847	1	22,084	962	97,988
17/2/2022	1,376	2,596	3	20,861	933	93,492
18/2/2022	997	1,928	1	19,929	876	75,669
19/2/2022	1,013	2,136	2	18,804	832	77,708
20/2/2023	1,052	2,036	2	17,818	795	83,083
21/2/2023	841	1,922	1	16,736	764	79,711
22/2/2023	627	1,880	3	15,480	744	60,917

Vaccination in Saudi Arabia

Total Doses Administered	Total of 1st Dose	Total of 2nd Dose	Total of Booster Doses
60.5 million	25.9 million	24.1 million	10.5 million

HIGHLIGHTS

- Regions with the highest new infections over the past 7 days: Riyadh followed by Jeddah.
- Dr.Asiri: COVID-19 pandemic is on verge of ending in Saudi Arabia.
- MoH: People can get infected with the seasonal flu and COVID-19 at the same time.
- Ministry of Health spokesman: Large numbers of critical cases are those who did not receive vaccinations or did not complete immunization.
- Ministry of Hajj and Umrah has announced that it has cancelled the Umrah host visa.
- Ministry of Interior records 22,953 violations against precautionary measures nationally in 1 week , Riyadh recorded the highest.
- WHO publishes Contact tracing and quarantine in the context of the Omicron SARS-CoV-2 variant: interim guidance, see link.
- WHO launches Public health surveillance for COVID-19: interim guidance, see link.
- WHO provides Questions and Answers: COVID-19 vaccines and pregnancy, see link.
- WHO publishes Global analysis of health care waste in the context of COVID-19, see link.
- WHO issues end-to-end integration of SARS-CoV-2 and influenza sentinel surveillance: revised interim guidance, see link.
- WHO issues: COVID-19 clinical care pathway (CARE): confirm, assess, respond, evaluate, see link.
- 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.

IMPORTANT LINKS

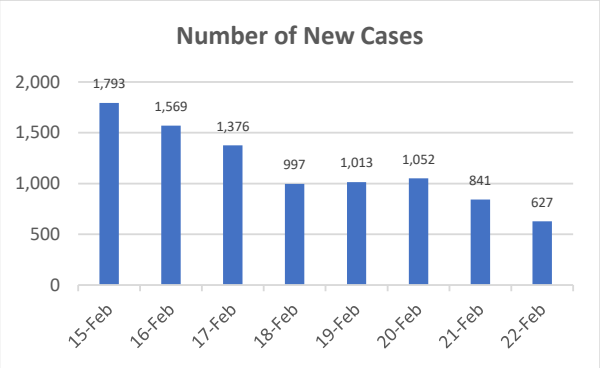
- **MoH COVID-19 updates:** https://twitter.com/saudimoh
- **WHO's COVID-19 global situation reports:** https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports
- **WHO's COVID-19 dashboard**: https://covid19.who.int/
- **MoH COVID-19 dashboard:** https://covid19.my.gov.sa/ar/Pages/default.aspx
- **Contact tracing and quarantine in the context of the Omicron SARS-CoV-2 variant: interim guidance:** https://www.who.int/publications/i/item/WHO-2019-nCoV-Contact-tracing-and-quarantine-Omicron-variant-2022.1
- **Public Health Surveillance for COVID-19: interim guidance:** https://www.who.int/publications/i/item/WHO-2019-nCoV-SurveillanceGuidance-2022.1
- **Questions and Answers: COVID-19 vaccines and pregnancy:** https://www.who.int/publications/i/item/WHO-2019-nCoV-FAQ-Pregnancy-Vaccines-2022.1
- **Global analysis of health care waste in the context of COVID-19:** https://www.who.int/publications/i/item/9789240039612
- **WHO issues end-to-end integration of SARS-CoV-2 and influenza sentinel surveillance: revised interim guidance:** https://www.who.int/publications/i/item/WHO-2019-nCoV-Integrated_sentinel_surveillance-2022.1
- **WHO publishes: COVID-19 clinical care pathway (CARE): confirm, assess, respond, evaluate:** https://www.who.int/publications/i/item/WHO-2019-nCoV-Clinical-CARE_Pathway-Poster_A-2022.1 https://www.who.int/publications/i/item/WHO-2019-nCoV-Clinical-CARE_Pathway-Poster_B-2022.1
- **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

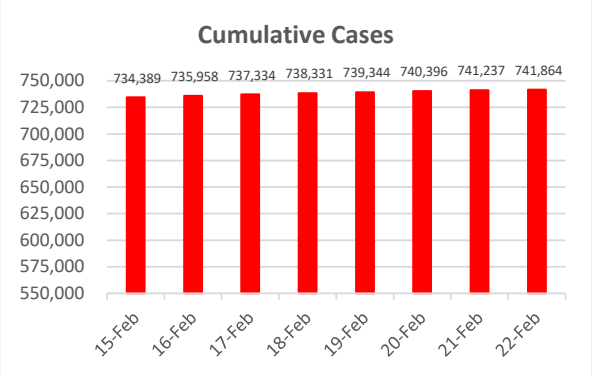
IMPORTANT DEVELOPMENTS

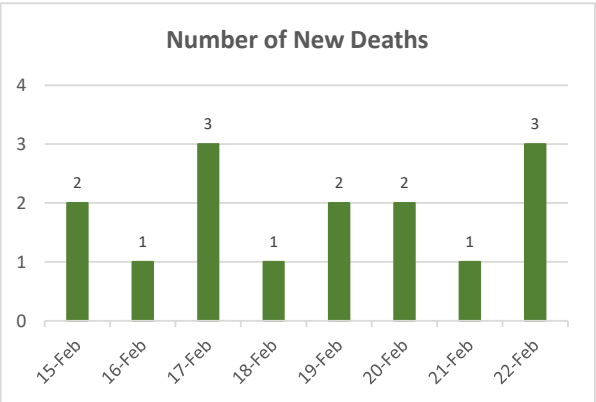
The World Health Organization issued an emergency use listing (EUL) for Nuvaxovid™

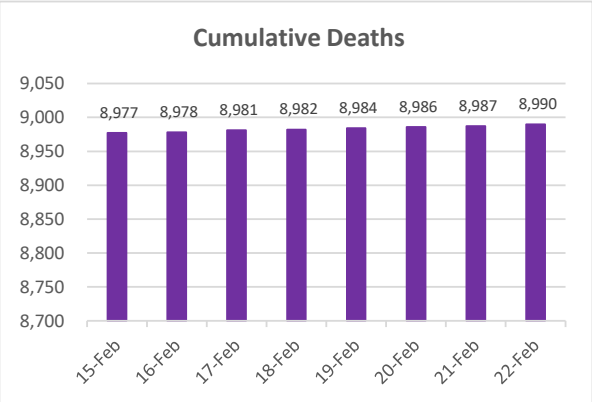
The new vaccine was developed by Novavax and the Coalition for Epidemic Preparedness Innovations (CEPI), and is the originator product for the Covovax™ vaccine that received WHO emergency use listing on 17 December.
Both vaccines are made using the same technologies. They require two doses and are stable 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