COVID-19 and Other Infectious Diseases Situational Report in the ASEAN+3 Region

ASEAN BioDiaspora Virtual Center (ABVC)

as of June 22, 2022
COVID-19: Highlights and Situation Overview

Global Update

- **Worldwide**: there have been over 546 million cases and over 6 million deaths attributed to COVID-19.

- **Paxlovid**: In a recent study posted to the medRxiv* pre-print server, researchers investigated the effectiveness of nirmatrelvir plus ritonavir in preventing hospitalizations among individuals aged 50 or older and vaccinated for coronavirus disease 2019 (COVID-19). Amid an intense Omicron epidemic and high vaccine prevalence among 50 years and older, the current study tested the efficacy of nirmatrelvir plus ritonavir in preventing COVID-19-related hospitalization and death. The hospitalization rate was under 1% (low) among patients diagnosed with COVID-19 as outpatients. The use of nirmatrelvir plus ritonavir further reduced the risk of hospitalization by 45%. In striking contrast to the EPIC-HR study, 35% of the hospitalizations in the nirmatrelvir plus ritonavir arm of the present study occurred within two days of prescription. Note that the EPIC-HR trial comprised only unvaccinated individuals with a median age under 50 and had a 7% hospitalization rate in the placebo arm compared to the current study. Overall, nirmatrelvir plus ritonavir consistently protected hospitalization and death despite varying hospitalization rates across groups. Therefore, the authors emphasized continuous assessment of the clinical efficacy of nirmatrelvir plus ritonavir with other therapeutic options as future SARS-CoV-2 variants continue to emerge.

- **North Korea**: It’s only been a month since North Korea acknowledged having a COVID-19 outbreak, after steadfastly denying any cases for more than two years. But already it may be preparing to declare victory. According to state media, North Korea has avoided the mass deaths many expected in a nation with one of the world’s worst health care systems, little or no access to vaccines, and what outsiders see as a long record of ignoring the suffering of its people. Daily updates from official media make it appear inevitable that the nation will completely defeat a virus that has killed more than 6 million people around the world. According to the official tally, cases are plummeting, and only 18% of the nation of 26 million people reportedly have had symptoms that outsiders strongly suspect were from COVID. However North Korea deals with its description of the pandemic, many signs, at least in public statements, point to a declaration of a stunning success in dealing with a virus that has confounded the richest countries in the world. North Korea is widely believed to be manipulating its true death toll to prevent any harm to Kim. It might also have exaggerated the number of earlier fever cases to boost vigilance against the virus and draw stronger public support for authorities’ anti-virus controls. North Korea has recently reported about 17,000 to 30,000 new fever cases each day, for a total of 4.7 million. It says — to widespread outside disbelief — that only 73 have died.

- **The Africa Centers for Disease Control and Prevention (Africa CDC)** reported on June 21 (Tuesday) that the number of confirmed COVID-19 cases in Africa has reached 11,742,933 with 253,833 reported deaths. According to the Africa CDC, South Africa, Morocco, Tunisia, and Egypt are among the countries with the most cases on the continent. South Africa has recorded the most COVID-19 cases in Africa with 3,986,892 cases, while the northern African country Morocco reported 1,189,656 cases as of Tuesday evening. In terms of the caseload, southern Africa is the most affected region, followed by the northern and eastern parts of the continent, while central Africa is the least affected region in the continent. According to the Africa CDC data, 11,116,774 of the COVID-19 patients across the continent have recovered.
Regional Update

- **Thailand:** The first cat-to-human transmission of COVID-19 was documented in a Prince of Songkla University study and published in the June 6 edition of the US Centers for Disease Control and Prevention's Emerging Infectious Diseases Journal. The report was brought to global attention by the New York Times four days later. The study recounted the case of a father and son in Bangkok developing symptoms and testing positive for COVID-19 on August 4, 2021. Due to a shortage of hospital beds in Bangkok, the two men were taken to a hospital in Songkhla on August 8. The father and son brought their pet cat along on the 20-hour ambulance ride to Songkhla. After the men were admitted to the hospital, the cat was taken to a veterinary hospital for tests. Though the cat appeared healthy, the 32-year-old veterinarian collected nasal and rectal samples, which tested positive for COVID-19. While the vet was swabbing the cat’s nose, the animal sneezed. Though she was wearing gloves and a mask during the swabbing, she did not have a face shield to protect her eyes. On August 13, the veterinarian developed symptoms, including fever and cough, and shortly after she tested positive for COVID-19. Genomic sequencing revealed that the cat's owners, the cat and the veterinarian were all infected with the same version of the Delta variant, which was different from viral samples taken from other patients in Songkhla at the time. PCR testing suggests that the cat had a high viral load at the time of its veterinary exam. None of the veterinarian’s close contacts had COVID-19 at the time, and she had no prior encounters with the pet’s owners, which supports the theory that the cat was behind the vet’s infection. Thai researchers said this was the first documented case of cat-to-human transmission, though it is very rare as cats have a very short viral shedding period of around five days.

- **Brunei:** The number of new COVID-19 cases surpassed the 700-mark as 751 cases were reported on June 21 while over 99% of the cases detected last week were with the use of antigen rapid tests (ARTs). This was revealed by Dr. Mohd Isham at the weekly press conference for COVID-19 updates on June 21. June 21’s new infections were all detected using ARTs and it brought the number of active cases to 4,129. Despite the recent spike in cases, the minister urged the public to remain calm as over 99% of new infections are in Categories 1 and 2, not requiring hospital treatment, and the number of patients in Categories 4 and 5 remains low. There is one case in Category 5 needing treatment in intensive care unit and one case in Category 4 requiring respiratory assistance and under close monitoring. Dr. Mohd Isham said two COVID-19 patients passed away in the past 24 hours but their deaths are not categorized as death due to the virus.

- **Philippines:** The COVID-19 positivity rate in the National Capital Region (NCR) has already reached 5%, surpassing the World Health Organization’s (WHO) benchmark, independent analytics group Octa Research said on June 22. The WHO earlier recommended a five-percent threshold for COVID-19 positivity rate. From June 15 to 21, Metro Manila’s daily COVID-19 cases averaged at 238 from 135, said David. Meanwhile, the capital region’s one-week growth rate of cases was at 76%, he added. NCR’s average daily attack rate — or the average number of new cases per 100,000 individuals — stood at 1.68, still within the ideal figure of below seven. Metro Manila’s reproduction number, on the other hand, was at two as of June 18, higher than experts’ recommendation of less than one.

- **Singapore:** Ministry of Health (MOH) reported on June 21 (Tuesday) that the country has seen a 23% week-on-week increase in COVID-19 community infections, adding that the increase is largely driven by the increased spread of newer Omicron subvariants BA.4 and BA.5. Singapore MOH reported that about 30% of the COVID-19 cases in the community in the past week were cases with BA.4 and BA.5 subvariants, as compared to 17%, 8%, and 3% for the previous three weeks respectively. According to the MOH, cases with BA.5 alone are estimated to contribute to 25% of all cases this week, and the
surge in BA.4 and BA.5 cases is likely to continue as it has higher transmissibility compared to BA.2. MOH said that the government will continue its genomic surveillance for the circulating subvariants in Singapore, including requiring some infected individuals to take an additional government-funded polymerase chain reaction (PCR) swab for genomic sequencing.

- **Japan**: The Japanese health ministry is stepping up its call on people to remove face masks outdoors in principle during summer, when the risk of heat stroke increases. In May, the government released its view on wearing and removing masks, including in which situations they can be removed. As many people still continue to wear masks outdoors, the ministry has decided to run a TV commercial to make the view widely known, as well as publishing a leaflet. The leaflet says that wearing masks outdoors increases the risk of heat stroke, asking people to remove them during exercise, especially when running.

- **China**'s COVID-19 outbreak is shifting to its south coast, with cases detected in Shenzhen triggering mass testing and a lockdown of some neighborhoods. In Shenzhen, isolation orders were imposed for several residential compounds in the Futian and Luohu districts that border Hong Kong after each reported an asymptomatic infection. The city recorded two local cases on June 21 (Tuesday). Meanwhile, Macau shut schools and non-essential businesses after the government found 36 infections as of the afternoon of June 20 (Monday), however, most casinos remained open. On another note, one hotel and casino resort was locked down by authorities with 700 people inside on Tuesday due to a COVID-19 infection outbreak on the property. The lockdown comes as the Chinese special administrative region carries out two-day mass testing of its more than 600,000 population after dozens of locally transmitted coronavirus cases were discovered over the weekend. Likewise, its neighboring city, Zhuhui on the mainland, locked down the area of the border crossing. In addition, Shanghai reported 9 local cases on June 21 (Tuesday), while Beijing reported 5 cases. Nationwide, China reported 34 new COVID-19 infections on Tuesday. New clusters continue to emerge, prompting heavy-handed action from local officials fearful of spiraling outbreaks. Its borders are increasingly under pressure, with Dandong - just across the river from North Korea - reporting 6 local cases. In the city of Jilin to the northeast, there were 10 new infections among cold-chain workers.

**Vaccine Update**

- **Brunei**: COVID-19 vaccination coverage rate continues to increase with 72.3% of Brunei’s population having received three doses and 5.2% being administered the fourth shot. Some 71.4% of children aged five to 11 received two doses of the vaccine and 48.5% of those aged 12 to 17 have been administered three shots.

- **Indonesia**: The Indonesian Medical Association (IDI) has asked the government and the community to step up booster vaccinations as an anticipatory measure against the increase in COVID-19 cases due to the BA.4 and BA.5 Omicron subvariants. Dr. Agus Dwi Susanto, Sp.P(K), head of the infectious disease assessment division, who also serves as chairman of the Indonesian Society of Respirology (PDPI), noted that the community must be reminded to implement the COVID-19 health protocols. According to data provided by the Ministry of Health, as of June 21, 2022, as many as 201,223,231 Indonesians have received the first vaccine dose, 168,544,951 have received the second dose, and 49,209,513 have received the booster dose.

- **Malaysia**: A total of 1,299,348 children aged five to 11, or 36.6% of the child population in the country have been fully vaccinated under the National COVID-19 Immunisation Programme for Children (PICKids), as of June 20. According to the COVIDNOW portal, a total of 1,737,987 children, or 49% of the group received at least one dose of the vaccine. For adolescents aged 12 to 17, a total of 2,911,081 individuals, or 93.6% of the
group received two doses of vaccine, while 3,001,413 or 96.5% of them received at least one dose of the vaccine. A total of 16,129,557 individuals or 68.6% of the adult population in the country have taken their booster dose, while 23,004,677 or 97.8% have completed two doses and 23,282,208 or 99% have received at least one dose of the vaccine. On June 20, a total of 6,772 doses of COVID-19 vaccine were administered with 538 as the first doses, 5,016 as second doses, and 1,218 booster doses, bringing the cumulative number of vaccine doses dispensed under the National COVID-19 Immunisation Programme (PICK) to 71,151,473.

- **Philippines**: Health Secretary Francis Duque III approved the administration of Pfizer booster shots for children ages 12-17 years old. Booster administration will start once the guidelines are released.

- **Singapore**: Ministry of Health announced that five new Joint Testing and Vaccination Centers (JTVCs) will begin operations on June 23 (Thursday). These centers will offer the Pfizer-BioNTech/Comirnaty and Moderna/Spikevax COVID-19 vaccines while Novavax’s Nuvaxovid COVID-19 vaccine will be available at the joint testing and vaccination center at the former Bishan Park Secondary School, which was the first such center to begin operations. Individuals aged 12 years and above may walk into any of the JTVCs to receive their vaccination and booster adding that the center will accept bookings made via the national appointment system and walk-ins for vaccination until July 18. The Ministry of Health and the Expert Committee on COVID-19 Vaccination will study the safety and effectiveness of the Pfizer-BioNTech and Moderna COVID-19 vaccines in children under the age of five for approval.

- **Thailand**: As of June 21, 2022, the total number of COVID-19 vaccine doses administered nationwide is 139,174,365 with 2,269 people given the first COVID-19 vaccine shot, 4,806 people for the second shot, and 17,135 given the booster on June 21.

**Travel Advisories** (new update/s)

- **Thailand** is lifting a pre-arrival registration requirement for foreign visitors that was seen as onerous and a drag on the recovery for its ailing tourism industry. The government’s COVID-19 center also says that an outdoor mask mandate would be dropped as of July 1 except in crowded venues. Registering for the “Thailand Pass” required online copies of vaccination documents, insurance policies and other documents to be submitted, after which visitors would receive a QR code for use during travel. The requirement had already been dropped for Thais and will be dropped for foreign visitors on July 1. Arriving foreigners must still show proof they have been vaccinated or provide negative COVID-19 test results, the Center for COVID-19 Situation Administration announced. But a requirement to hold an insurance policy has been dropped.

- **Japan**: Three regional airports, Sendai, Hiroshima and Takamatsu airports, will reopen for international flights in the month of July.

- **South Korea**: The country is set to resume visa-free travel for Hong Kong residents starting on July 1. Holders of both Hong Kong SAR and the British National Overseas (BNO) passports can enter the country without a visa for short-term trips such as tourism, business meetings, and family visits. However, travellers will still need to apply for the Korea Electronic Travel Authorization (K-ETA) and obtain approval at least 72 hours before boarding a plane or ship bound for the country. Applicants will also need to provide a valid passport, an email address, a headshot image, and pay a 10,000 won (HK$60) fee in order to apply for the K-ETA, which is valid for multiple trips within two years from the approval date. Currently, a pre-departure negative COVID-19 test is required for all travellers over 6 years old regardless of vaccination status. Travellers should provide a rapid antigen test (RAT) at a clinic or hospital within 24 hours or a polymerase chain reaction (PCR) test within two days ahead of departure but these requirements will be dropped starting July 1.
### Cases and Deaths as of 22 June 2022

- As of 22 June 2022 (2PM, GMT+8), worldwide, there were 546,744,313 confirmed cases, including 6,351,953 deaths. Globally, Case Fatality Rate (CFR) was 0.12.
- 64,335,255 confirmed cases of COVID-19 have been reported in the ASEAN +3 countries including 32,040,316 cases in the ASEAN region and 32,294,939 cases in the PLUS THREE countries, with CFR of 0.7.

<table>
<thead>
<tr>
<th>REGION</th>
<th>COUNTRY</th>
<th>FIRST CONFIRMED CASE(S)</th>
<th>LATEST REPORT ON CONFIRMED CASE(S)</th>
<th>TOTAL CONFIRMED CASES</th>
<th>NEW CASES</th>
<th>TOTAL DEATHS</th>
<th>NEW DEATHS</th>
<th>CASE FATALITY RATE</th>
<th>CUMULATIVE CASES/ 100,000</th>
<th>NUMBER OF TESTS LAST 14 DAYS/100,000</th>
<th>CUMULATIVE VACCINATED</th>
<th>CUMULATIVE FULLY VACCINATED</th>
<th>CUMULATIVE BOOSTERED</th>
<th>FULLY VACCINATED / 100</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASEAN REGION</td>
<td>Brunei</td>
<td>10 Mar 20</td>
<td>21-Jun-22</td>
<td>158,524</td>
<td>752</td>
<td>225</td>
<td>-</td>
<td>0.1%</td>
<td>36,587</td>
<td>444,293</td>
<td>426,764</td>
<td>301,719</td>
<td>96.7</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cambodia</td>
<td>27 Jan 20</td>
<td>21-Jun-22</td>
<td>136,262</td>
<td>3,056</td>
<td>-</td>
<td>2.2%</td>
<td>827</td>
<td>24</td>
<td>15,054,217</td>
<td>14,341,016</td>
<td>9,300,664</td>
<td>84.6</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Indonesia</td>
<td>02 Mar 20</td>
<td>21-Jun-22</td>
<td>6,070,933</td>
<td>1,678</td>
<td>156,700</td>
<td>5</td>
<td>2.6%</td>
<td>2,243</td>
<td>201,000,560</td>
<td>168,251,795</td>
<td>48,269,992</td>
<td>60.9</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lao PDR</td>
<td>24 Mar 20</td>
<td>21-Jun-22</td>
<td>210,214</td>
<td>6</td>
<td>757</td>
<td>-</td>
<td>0.4%</td>
<td>2,932</td>
<td>5,817,695</td>
<td>5,076,787</td>
<td>68.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Malaysia</td>
<td>25 Jan 20</td>
<td>21-Jun-22</td>
<td>4,544,626</td>
<td>1,921</td>
<td>35,737</td>
<td>2</td>
<td>0.8%</td>
<td>14,224</td>
<td>28,021,608</td>
<td>27,215,106</td>
<td>16,129,557</td>
<td>83.0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Myanmar</td>
<td>23 Mar 20</td>
<td>21-Jun-22</td>
<td>613,508</td>
<td>14</td>
<td>19,434</td>
<td>-</td>
<td>3.2%</td>
<td>1,135</td>
<td>33,004,742</td>
<td>27,027,467</td>
<td>2,227,351</td>
<td>49.3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Philippines</td>
<td>30 Jan 20</td>
<td>21-Jun-22</td>
<td>3,697,200</td>
<td>407</td>
<td>60,467</td>
<td>-</td>
<td>1.6%</td>
<td>3,420</td>
<td>74,959,001</td>
<td>70,251,531</td>
<td>14,469,760</td>
<td>63.3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Singapore</td>
<td>23 Jan 20</td>
<td>21-Jun-22</td>
<td>1,367,598</td>
<td>3,220</td>
<td>1,405</td>
<td>2</td>
<td>0.1%</td>
<td>23,978</td>
<td>5,018,137</td>
<td>4,993,291</td>
<td>4,159,781</td>
<td>91.6</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Thailand</td>
<td>13 Jan 20</td>
<td>21-Jun-22</td>
<td>4,502,542</td>
<td>1,714</td>
<td>30,509</td>
<td>21</td>
<td>0.7%</td>
<td>6,467</td>
<td>56,648,221</td>
<td>52,763,120</td>
<td>28,864,766</td>
<td>75.4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Vietnam</td>
<td>23 Jan 20</td>
<td>21-Jun-22</td>
<td>10,738,909</td>
<td>748</td>
<td>43,083</td>
<td>-</td>
<td>0.4%</td>
<td>11,133</td>
<td>85,545,084</td>
<td>79,786,295</td>
<td>60,505,120</td>
<td>81.3</td>
<td></td>
</tr>
<tr>
<td>ASEAN COUNTRIES</td>
<td>32,040,316</td>
<td>10,460</td>
<td>351,373</td>
<td>30</td>
<td>1.1%</td>
<td>305,133,558</td>
<td>450,133,172</td>
<td>184,228,710</td>
<td>804,821,764</td>
<td>55,495,015</td>
<td>320,482,789</td>
<td>81.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ASEAN PLUS THREE</td>
<td>32,294,939</td>
<td>82,458</td>
<td>75,448</td>
<td>145</td>
<td>0.2%</td>
<td>1,468,090,794</td>
<td>1,430,258,389</td>
<td>916,263,661</td>
<td>1,973,604,507</td>
<td>1,880,391,861</td>
<td>1,100,492,371</td>
<td>85.2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| PLUS THREE COUNTRIES | 32,294,939 | 82,458 | 75,448 | 145 | 0.2% | 1,468,090,794 | 1,430,258,389 | 916,263,661 | 1,973,604,507 | 1,880,391,861 | 1,100,492,371 |

- 482,409,058 confirmed cases of COVID-19 have been reported in 5 continents (other than ASEAN +3 countries):
COVID-19 Epi curve among ASEAN Countries:
From January 1, 2021 to June 21, 2022

Cumulative cases of COVID-19 in the ASEAN Region as of June 21, 2022 (Report generated by ASEAN Biodiaspora Virtual Center)
COVID-19 Vaccination Status
as of 21 June 2022

*Note: No updated data were provided by Bluedot for the cumulative booster administered by Lao PDR.
# COVID-19 Outlook Assessment

**as of 20 June 2022**

<table>
<thead>
<tr>
<th>ASEAN MEMBER STATE</th>
<th>Requirement</th>
<th>% of High risk population fully vaccinated</th>
<th>Population vaccinated/day (7-day average)</th>
<th>% of Total population fully vaccinated / boosterd</th>
<th>Population vaccinated/day (7-day average)</th>
<th>Case levels are generally low (a 7-day rolling average number of daily new cases that is &lt;10 cases per 100,000, with each day’s past-14-day test positivity is consistently &lt;5%).</th>
<th>Government Policy on containment and health (strictness and comprehensiveness in COVID-19 related government policies)</th>
<th>Containment and health index score - Oxford COVID-19 Government Response Tracker (OxCGRT)</th>
<th>Change over the past 30 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brunei</td>
<td>At least 80% of the high-risk population has been vaccinated with at least one dose of a COVID-19 vaccine.</td>
<td>0%/day</td>
<td>≥90.0/68.3</td>
<td>Unknown</td>
<td>110.75</td>
<td>Unknown</td>
<td>60.7/100</td>
<td>0.0</td>
<td>0%/day</td>
</tr>
<tr>
<td>Cambodia</td>
<td>At least 65% of the total population has a level of immunity to COVID-19; either recovered from COVID-19 or have been vaccinated with at least one dose of a COVID-19 vaccine.</td>
<td>0%/day</td>
<td>≥90.0/54.9</td>
<td>Unknown</td>
<td>0.00</td>
<td>Unknown</td>
<td>23.8/100</td>
<td>+1.2</td>
<td>0%/day</td>
</tr>
<tr>
<td>Indonesia</td>
<td></td>
<td>0%/day</td>
<td>64.4/17.5</td>
<td>Unknown</td>
<td>0.40</td>
<td>Unknown</td>
<td>61.3/100</td>
<td>0.0</td>
<td>0%/day</td>
</tr>
<tr>
<td>Lao PDR</td>
<td></td>
<td>0%/day</td>
<td>75.1/ND</td>
<td>Unknown</td>
<td>0.09</td>
<td>15.1</td>
<td>56.3/100</td>
<td>0.0</td>
<td>0%/day</td>
</tr>
<tr>
<td>Malaysia</td>
<td></td>
<td>0%/day</td>
<td>83.5/49.2</td>
<td>0.03%/day</td>
<td>6.40</td>
<td>4.8</td>
<td>56.3/100</td>
<td>+3.6</td>
<td>0%/day</td>
</tr>
<tr>
<td>Myanmar</td>
<td></td>
<td>0%/day</td>
<td>51.1/4.1</td>
<td>Unknown</td>
<td>0.01</td>
<td>0.1</td>
<td>63.7/100</td>
<td>-1.8</td>
<td>0%/day</td>
</tr>
<tr>
<td>Philippines</td>
<td></td>
<td>0%/day</td>
<td>68.0/13.0</td>
<td>Unknown</td>
<td>0.40</td>
<td>1.0</td>
<td>56.5/100</td>
<td>0.0</td>
<td>0%/day</td>
</tr>
<tr>
<td>Singapore</td>
<td></td>
<td>0%/day</td>
<td>88.6/76.3</td>
<td>0.01%/day</td>
<td>64.64</td>
<td>Unknown</td>
<td>58.9/100</td>
<td>0.0</td>
<td>0%/day</td>
</tr>
<tr>
<td>Thailand</td>
<td></td>
<td>0%/day</td>
<td>76.6/41.2</td>
<td>0.02%/day</td>
<td>2.91</td>
<td>31.0</td>
<td>44.0/100</td>
<td>-12.2</td>
<td>0%/day</td>
</tr>
<tr>
<td>Vietnam</td>
<td></td>
<td>0.08%/day</td>
<td>86.0/61.5</td>
<td>0.08%/day</td>
<td>0.86</td>
<td>100</td>
<td>43.5/100</td>
<td>0.0</td>
<td>0.08%/day</td>
</tr>
</tbody>
</table>
Infectious Diseases Other than COVID-19 in ASEAN+3 Countries
June 15-21, 2022

Infectious Disease Updates

Dengue

- **Taiwan**: 21 June 2022. There are a total of 4 cases of dengue fever in the country this year, all of which are imported from Indonesia and Vietnam. Among them, Taoyuan City confirmed the first case of dengue fever on the 20th. The case is a Vietnamese passenger who entered from Taoyuan Airport on the 17th and was tested due to fever, and the result of the dengue virus test was positive.

Chikungunya

- **Indonesia**: 17 June 2022. Over the past five weeks, chikungunya has been reported to have spread in 20 villages in five sub-districts in Bima City, West Nusa Tenggara. Of the 20 sub-districts, 343 Chikungunya cases were recorded. Most of the infected residents experience symptoms of stiffness in the joints. Syarifuddin, Head of Disease Control of the Bima City Health Service said 75 people were still sick. They have difficulty standing because the joints are painful and stiff. He assured that no chikungunya patients had been referred to the Bima City Regional General Hospital. All patients underwent treatment from the health center medical team in their respective homes. According to Syarifuddin, the spread of this infectious disease is due to slum environmental conditions.

Japanese Encephalitis

- **Taiwan**: 20 June 2022. This year's first case of Japanese encephalitis in a man in his 50s in Tainan was hospitalized with fever and lower extremity weakness. His symptoms did not improve with antipyretics. He was admitted to the emergency room on the 9th, tested negative for new coronary pneumonia, and had convulsions and coma on the 10th and was admitted to intensive care In the ward, Japanese encephalitis was suspected on the 15th and sent for examination. The results were released on the 18th. The follow-up completed the epidemic investigation and the diagnosis was confirmed today. Currently, he is still hospitalized. Luo Yijun, deputy director of the CDC, pointed out that the main activities of the case were at home and in the farmland. One of the farmlands had a pig house 500 meters away, and there was an abandoned fish farm behind the pig house. A large number of vector mosquitoes were collected, and it was judged that the possibility of infection was high. The case's home and surrounding pig farms shall take measures to clean up the environment and hang mosquito traps, and at the same time strengthen health education and publicity to the local people. In Taiwan, the Japanese encephalitis epidemic season is from May to October every year, and the epidemic peak is from June to July. The Centers for Disease Control and Prevention stated that the main vector mosquitoes in Taiwan are house mosquitoes. They often breed in paddy fields, ponds, and irrigation ditches. The peak blood-sucking time is at dusk and dawn. Most people infected with Japanese encephalitis have no obvious symptoms, and a few have headache, fever or aseptic meningitis. In severe cases, there may be changes in consciousness, inability to distinguish between time and place, general weakness, damage to cranial nerve function, and paralysis, etc., even coma or death.

Leptospirosis

- **Indonesia**: 19 June 2022. Four residents in Gunungkidul Regency, DI Yogyakarta, died from contracting leptospirosis and the number cases infected with leptospirosis this year
until mid-June 2022 was 22. This number is the highest in the last five years. Data from the Gunungkidul Health Service, from 2018-2021, in a year the range occurred at most last year with 17 cases and four deaths. Head of the Gunungkidul Health Service, Dewi Irawaty, said the trend of leptospirosis cases had increased. According to him, as long as it rains, this disease will continue to occur. This is due to the phenomenon of wet drought. Those who work in the agricultural sector, are the most the affected population, particularly the farmers. But there may also be transmission in the market and at home. Response includes observing pests in the field and releasing the Tyto Alba owl which serves to reduce the rat population in the fields.

HFMD

- **Malaysia:** 19 June 2022. JOHOR BARU: A total of 6,987 cases of hand, foot, and mouth disease (HFMD) were reported in Johor as of Saturday (June 18). There is a sharp increase from only 104 such cases during the same period last year. There were currently only five active HFMD outbreaks across Johor compared with 28 reported in the previous epidemiological week. “Of the five active outbreaks, two cases are in Johor Baru, two in Kota Tinggi and one in Batu Pahat. “As of Saturday, the disease had spread to 100 locations in Johor, including nurseries (42), residential areas (22), tabika (13), kindergartens (nine), preschools (seven), primary schools (three), daycare centres (two) and with the remaining two outbreaks occurring in other areas,” State health and unity committee chairman Ling Tian Soon, said during the state assembly sitting here on Sunday (June 19). “Apart from investigating each HFMD case and close contacts to reduce the spread of the disease, we are also increasing advocacy and awareness to the public. “This includes conducting briefing sessions with preschools, kindergartens, and childcare centre operators either physically or virtually,” he said. Ling added that 6,048 cases or 86.6% involved children aged six and below, 816 (11.7%) were children aged between seven and 12, and the remaining cases involved children aged 13 and above. According to Ling, one of the causes contributing to the increase in HFMD cases this year was the easing of Covid-19 standard operating procedures. However, he said the matter is still under control in Johor.

- **Vietnam:** 20 June 2022. For hand, foot and mouth disease, the total cumulative number of hand, foot and mouth disease cases from the beginning of 2022 to now is 6,767 cases, down 30% compared to the same period in 2021 (9,673 cases). The disease also showed signs of increasing from week 14, increasing at week 17 and flat until week 24. Currently, no strain EV71 (strain causing serious complications) has been detected.

Rabies

- **Indonesia:** 19 June 2022. KBRN, Negara: In the last few months, there have been four cases of death due to suspect rabies in Jembrana Regency, Bali. The latest case is the death of a resident of the Persidi Petapan neighborhood, Tegalcangkring Village, Mendoyo District, last Friday (17/6/2022). The victim had a history of dog bites on the hands. However, they chose not to seek treatment or receive treatment with VAR (anti-rabies vaccine). “Symptoms of the cause of death point to rabies,” he said. Since May, along with the increase in cases of rabies and dog bites in Jembrana, the district’s VAR stock has run out. 15 June 2022. Another case was a 7-year-old boy in Panji Village, Sukasada District, Buleleng Regency, Bali Province, who died allegedly due to rabies. The incident was not reported to the health facility and the boy did not receive the anti-rabies vaccine (VAR). The president director of the Buleleng General Hospital, Dr. Putu Arya Nugraha, said the victim was rushed to the Buleleng Hospital, Wednesday (15/6/2022) almost dying. Complaints experienced by the patient lead to symptoms of rabies: not being able to swallow, choking when drinking water, pain in the calf of the right leg to the buttocks, fear of air and light. The victim had a history of being bitten by a dog two months ago and the wound was only cleaned with soap and water. “It was not reported or taken for treatment. He became symptomatic about two days ago.
**Monkeypox**

- **Singapore:** 21 June 2022. The Singapore Ministry of Health (MOH) has confirmed the country’s first case of monkeypox in Singapore. The MOH reports that this is an imported case and the patient is a British male flight attendant who flew in and out of Singapore between June 15 and 17, and again on June 19. The patient is reported to be in stable condition and is receiving treatment at the National Centre for Infectious Diseases. The MOH states that 13 close contacts have been identified and have been placed in quarantine for 21 days since their last contact with the patient. Contact tracing is ongoing for the affected flights and for the establishments which the patient visited during his stay in Singapore.

**Severe Fever with Thrombocytopenia Syndrome**

- **Japan:** 19 June 2022. Cases of the tick-borne infectious disease severe fever thrombocytopenia syndrome (SFTS) are gradually increasing in number. This year [2022], there are 6 more than the 40 people at the beginning of June last year [2021], which was said to be the highest number ever. What used to be centered in western Japan is now expanding to eastern Japan. Last year [2021], it was confirmed for the first time in Aichi and Shizuoka prefectures. SFTS is a type of viral hemorrhagic fever that was first reported in China in 2011, and was first confirmed in Yamaguchi prefecture in 2013 in Japan. It is a relatively new infectious disease. This infectious disease has symptoms such as fever, vomiting, and bleeding, and is a life-threatening disease when it becomes severe. Summer is the “season” of ticks, and local governments are calling attention to tick infections. They are urging prevention, such as not getting into the grass as much as possible, not exposing the skin, and not placing jackets or towels on the grass. There are many other diseases transmitted by ticks, such as tick-borne encephalitis, Lyme disease, and Japanese spotted fever. However, the virus did not come into existence recently, and it must have been in ticks for a long time. It must have been “discovered” because it began to infect humans. The reason people have started to get infected is probably not because the number of people entering the mountains has increased. Many people with tick infections had not entered the mountains recently. It is possible that ticks have come down to where people live. The carriers are wild animals entering populated areas. These are wild boars, deer, raccoons, raccoon dogs, weasels, and many other wild animals descending from the mountains to less remote areas. Antibodies to the SFTS virus have been found in them. The number of these wild animals has increased explosively in recent years, expanding their habitat from mountains to less remote areas. They are also appearing not only in the satoyama [border zone or area between mountain foothills and arable flat land] of farming and mountain villages of Okuyama, but also in urban areas in considerable numbers. Wild animals drop ticks which are then picked up by rats. From there, it is possible that they infect feral cats and then spread to free-range domestic cats. In addition to domestic cats, there are cases of infection in domestic dogs. And from dogs and cats the ticks go to humans., who may spread ticks, and the virus widely.
Special Report: Monkeypox cases reported in non-endemic areas

Global update

- **US CDC:** 16 June 2022. The Centers for Disease Control and Prevention released new guidance Tuesday about how to identify monkeypox during this outbreak, based on the symptoms doctors have observed so far. Some recent infections have presented differently than past cases in Africa, where monkeypox is endemic in 11 countries. Traditionally, people with monkeypox have developed a fever, swollen lymph nodes, headaches and muscle aches, followed by a rash that starts on their face or in their mouth then spreads to other parts of their body — particularly the hands and feet. But in many recent U.S. cases, patients first experienced a rash in the mouth or around the genitals or anus. And instead of widespread rashes, some patients saw scattered or localized lesions in areas other than the face, hands or feet. In some cases, flu-like symptoms developed after the rash, but other people didn't have those symptoms at all. The rash also seems to progress differently than in past cases. Monkeypox lesions usually start flat then become raised, after which they progress to fluid-blisters, followed by pus-filled blisters that scab and fall off. But the CDC said Tuesday that among recent patients, lesions have appeared at different stages within the same area of the body. Fluid- and pus-filled blisters, for instance, may exist side by side. Some U.S. patients have reported pain in or around the anus and rectum, rectal bleeding, proctitis (painful inflammation of the rectum lining) or the feeling of needing a bowel movement even though the bowels are empty. None of those symptoms were commonly associated with monkeypox before.

- **The World Health Organization (WHO)** said Tuesday that it has also identified a unique pattern of symptoms among recent cases outside of Africa, including rashes limited to certain areas of the body like the genitals or mouth. "It’s now clear that there is an unusual situation, meaning even the virus is behaving unusually from how it used to behave in the past," WHO Director-General Tedros Adhanom Ghebreyesus said at a briefing. Tedros warned last week that the window to contain the global outbreak may be narrowing, noting that the "risk of monkeypox becoming established in nonendemic countries is real."

- **France:** Public Health France reports that the first female case of monkeypox has been confirmed in the country as of June 21, 2022. No details about the female case have been provided, however health authorities state that the mode of transmission is under investigation. Of the 277 monkeypox cases confirmed up until June 21, 2022, 276 are male between the ages of 19 and 71. Monkeypox is a neglected tropical disease endemic to western and central African countries. It is considered to spread primarily through animal contact in endemic regions but can also spread between people through direct contact with skin lesions and/or exposure to infectious respiratory droplets. This event is noteworthy as the vast majority of cases in the current outbreak in non-endemic countries have occurred among men who have sex with men (MSM) networks, most likely acquired through close intimate contact. BlueDot continues to monitor for signs of changes in the most likely route of exposure and transmission risk.

ASEAN+3 Region Preparedness Against Monkeypox

- **Philippines:** The Philippines remains monkeypox free but health officials are on heightened alert and are monitoring the country’s borders to prevent a possible outbreak from happening in the country. The Department of Health (DOH) has issued public statements that Philippine hospitals are ready for monkeypox cases, and is working on the allocation of isolation facilities amid the threat of the virus. DOH Field
Implementation and Coordination Team and the One Hospital Command Center are working on the specific designation of isolation facilities as part of a contingency plan in case monkeypox is detected in people entering the country’s borders.

- **Vietnam**: Soldiers of Vietnam’s Level-2 Field Hospital Rotation 4 have recently provided training and updated knowledge on the epidemiological situation, diagnosis, treatment of prevention of monkeypox for Level-1 field hospitals in the United Nations Mission in South Sudan (UNMISS), according to the Vietnam Department of Peacekeeping Operations.

- **Thailand**: Vaccine preparations are needed to deal with monkeypox but there’s no need yet for any mass vaccination, said Dr. Thiravat Hemachudha, head of the Emerging Diseases Science Centre at Chulalongkorn University. Even though there is no direct monkeypox vaccine, health officials say studies have found that smallpox vaccines are effective in both preventing and reducing monkeypox infections. Thailand stopped providing the smallpox vaccine in the early 1980s due to the disease being eradicated, resulting in people today over the age of 40 still having immunity from such shots. The immunity is lifelong but its level of efficacy is reduced as people age or because of chronic diseases. Dr. Thiravat said the country’s herd immunity to smallpox today is 60%.

- **South Korea** on June 22 (Wednesday) said the first two suspected cases of the monkeypox virus have been reported in the country. One of the suspect cases is a foreign national who reportedly showed potential symptoms on June 19 (Sunday), entered the country on June 20 (Monday), and is currently under treatment in an isolation bed at a hospital in the city of Busan. Another suspect case is a Korean citizen who showed symptoms while entering the country from Germany on June 21 (Tuesday afternoon, and has been admitted to Incheon Medical Center for treatment. According to Korea Disease Control and Prevention Agency (KDCA), diagnostic tests and epidemiological investigations on the monkeypox are being conducted and the health authority will swiftly hold a briefing to announce measures and response plans once the results are out. Earlier in June, South Korea designated monkeypox as a second-degree infectious disease according to its four-tier system, with 22 other contagious diseases including COVID-19, cholera, and chickenpox included in the same category.

**Countries reporting confirmed case/s of Monkeypox**

- **Iceland**: According to Iceland’s Directorate of Health, a third case of monkeypox has been confirmed in the country. Health officials state that the patient was diagnosed with monkeypox on June 11, 2022, and is described as a middle-aged man from the capital area. The patient is reported to be in good condition and is at home in isolation. Health officials state that the patient had recent travel to Europe, however, the country in Europe was not specified. The first cases reported in Iceland on June 9, 2022, were also described as middle-aged men with recent travel to Europe. Both of those previous patients were reported to be in good condition as well. Monkeypox is a neglected tropical disease endemic to western and central African countries. It is considered to spread primarily through animal contact in endemic regions but can also spread between people through direct contact with skin lesions and/or exposure to infectious respiratory droplets. This event is noteworthy not only because of the number of cases reported in a short timeframe across multiple countries but also because some cases in the current outbreak have been associated with travel to non-endemic countries reporting cases.

- **Luxembourg**: According to Luxembourg’s Ministry of Health, the first case of monkeypox has been confirmed in the country. Health officials state that the patient is receiving treatment at the National Service for Infectious Diseases in Luxembourg Hospital Centre (CHL). Health officials state that the patient is in good condition and that contact tracing
of the patient’s close contacts has begun. No further information has been released regarding the affected individual. Monkeypox is a neglected tropical disease endemic to western and central African countries. It is considered to spread primarily through animal contact in endemic regions but can also spread between people through direct contact with skin lesions and/or exposure to infectious respiratory droplets. This event is noteworthy not only because of the number of cases reported in a short timeframe across multiple countries but also because some cases in the current outbreak have been associated with travel to non-endemic countries reporting cases.

- **Chile**: The Chilean Ministry of Health confirmed the first case of monkeypox in Chile on June 18, 2022. The affected individual is a young man from the Metropolitan Region who experienced symptoms of monkeypox after returning from a recent trip to Europe. While the report added that the individual is in good condition, symptom and treatment details were not provided. There is no evidence that Chile currently has access to smallpox vaccines for a preventive control strategy. However, the WHO is currently working with manufacturers to provide greater access to the vaccine. Chile is implementing close contact tracing, case isolation, and educating the population about monkeypox to limit the potential for disease spread. Monkeypox is a neglected tropical disease endemic to western and central African countries. It is considered to spread primarily through animal contact in endemic regions but can also spread between people through direct contact with skin lesions and/or exposure to infectious respiratory droplets. This event is noteworthy not only because of the number of cases reported in a short timeframe across multiple countries but also because some cases in the current outbreak have been associated with travel to non-endemic countries reporting cases.

- **Serbia**: According to the Serbian Ministry of Health, the country has confirmed its first monkeypox case. Health officials noted that the case is a man with recent travel to Germany, and the diagnosis was confirmed by the Institute for Virology, Vaccines and Serums (Torlak). The individual has mild symptoms and is receiving treatment. In addition, outbreak control methods such as contact tracing of the case’s close contacts have begun to control the spread of infection. Monkeypox is a neglected tropical disease endemic to western and central African countries. It is considered to spread primarily through animal contact in endemic regions but can also spread between people through direct contact with skin lesions and/or exposure to infectious respiratory droplets. This event is noteworthy not only because of the number of cases reported in a short timeframe across multiple countries but also because some cases in the current outbreak have been associated with travel to non-endemic countries reporting cases.

- **Georgia**: According to Georgia's National Center for Disease Control and Public Health, the first case of monkeypox has been laboratory confirmed in the country. According to officials, the case was detected among a man who had recently returned from Europe, but details regarding his travel destination(s) have not been released. The affected individual is reported to have had a mild form of the virus and after receiving treatment has been discharged from a medical institution. Authorities conducted contact tracing for all known contacts but no suspected cases based on clinical signs have been identified. No further information has been released regarding the affected individual. Monkeypox is a neglected tropical disease endemic to western and central African countries. It is considered to spread primarily through animal contact in endemic regions but can also spread between people through direct contact with skin lesions and/or exposure to infectious respiratory droplets. This event is noteworthy not only because of the number of cases reported in a short timeframe across multiple countries but also because some cases in the current outbreak have been associated with travel to non-endemic countries reporting cases.
Monkeys in Endemic Areas

As of June 21, 2022

Data Source: Bluedot Insights
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