

WHO CORONAVIRUS DISEASE 2019 (COVID-19) SITUATION REPORT-105

SITUATION IN NUMBERS

Total (new) cases in
last 24 hours

Globally

3 435 894 cases (86 108)

239 604 deaths (976)

Western Pacific Region

152 773 cases (1329)

6258 deaths (29)

European Region

1 544 145 cases (25250)

143 987 deaths (1320)

South-East Asia Region

67 673 cases (3626)

2463 deaths (88)

Eastern Mediterranean Region

206 299 cases (5690)

7971 deaths (100)

Region of the Americas

1 433 756 cases (49115)

77 827 deaths (-582)

African Region

30 536 cases (1098)

1085 deaths (21)



People are asked to sanitize at the entrance
of NADRA Office—*The News*

Global News

- EU emerges from lockdown as global virus cases top 3.6m.
- Russia reports 10,102 new coronavirus cases.
- Britain outpaces Italy with Europe's highest official coronavirus death toll.
- New Zealanders have written to say isolation is hard but it is the right thing to do: PM Ardern.
- More than 282,000 lost jobs in Spain during April.
- India coronavirus: Country records highest spike in Covid-19 cases.
- Coronavirus: US to borrow record \$3tn as spending soars.
- 3bn people don't have access to soap and water, says UN.

Global Response

- Dubai's Expo 2020 postponed to Oct 1, 2021.
- WHO urges countries to investigate early Covid-19 cases.
- Afghanistan distributes free bread as prices soar amid coronavirus.
- France accuses Apple of refusing help with StopCovid app.
- India embarks on 'massive' coronavirus repatriation.
- Britain's new car sales crashed in April to hit the lowest level since 1946.
- Global leaders promise \$8 bln to fight COVID-19, EU says.
- Careem cuts workforce by 31% as Covid-19 pulls business down.

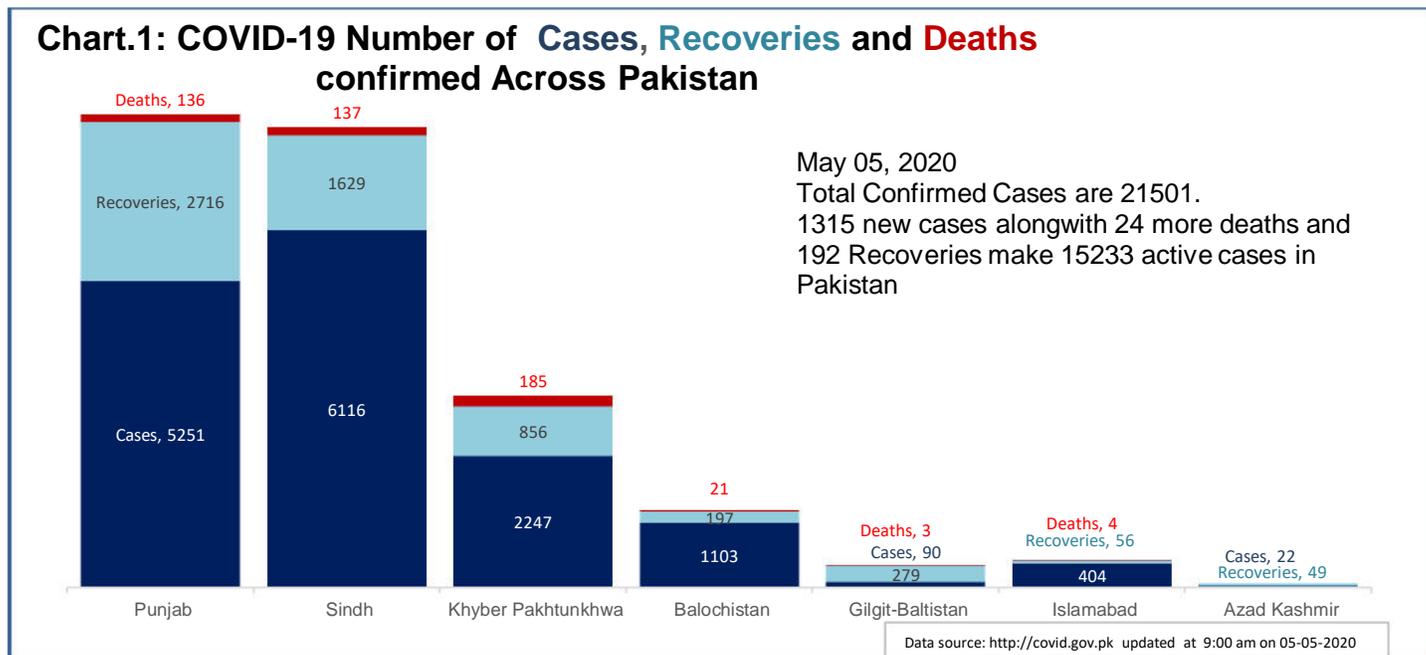
Local News

- Easing lockdown gradually: Imran Khan.
- Twenty-two more deaths from novel coronavirus took the toll to 486.
- 3 quarantine centres in the works at Taftan, Chaman and Torkham borders.
- Federal cabinet to discuss situation resulting from coronavirus outbreak.
- More people want govts to focus on saving lives before economy, survey finds.
- Centre regrets Sindh's refusal to use Tiger Force services.
- 105 passengers repatriated from UAE to Pakistan test positive for Covid-19.

Local Response

- Coronavirus: Supreme Court orders making unified policy
- Balochistan govt. extends lockdown for 15 more days.
- Pakistan seeks \$1.87 bn debt relief from G20 countries.
- Sindh govt. establishes field isolation centre for asymptomatic patients in Hyderabad.
- SC dismayed at closure of businesses by provincial govts.
- 17,000 healthcare providers sign up for Tiger Force.

During the last 24 hours, 1315 new cases have been confirmed by different laboratories, bringing the national tally to 21501. Twelve deaths from Punjab, seven from Sindh and five from KP have been reported in the last 24 hours. There are a total 486 deaths and 5782 recoveries across the country, see Chart.1.



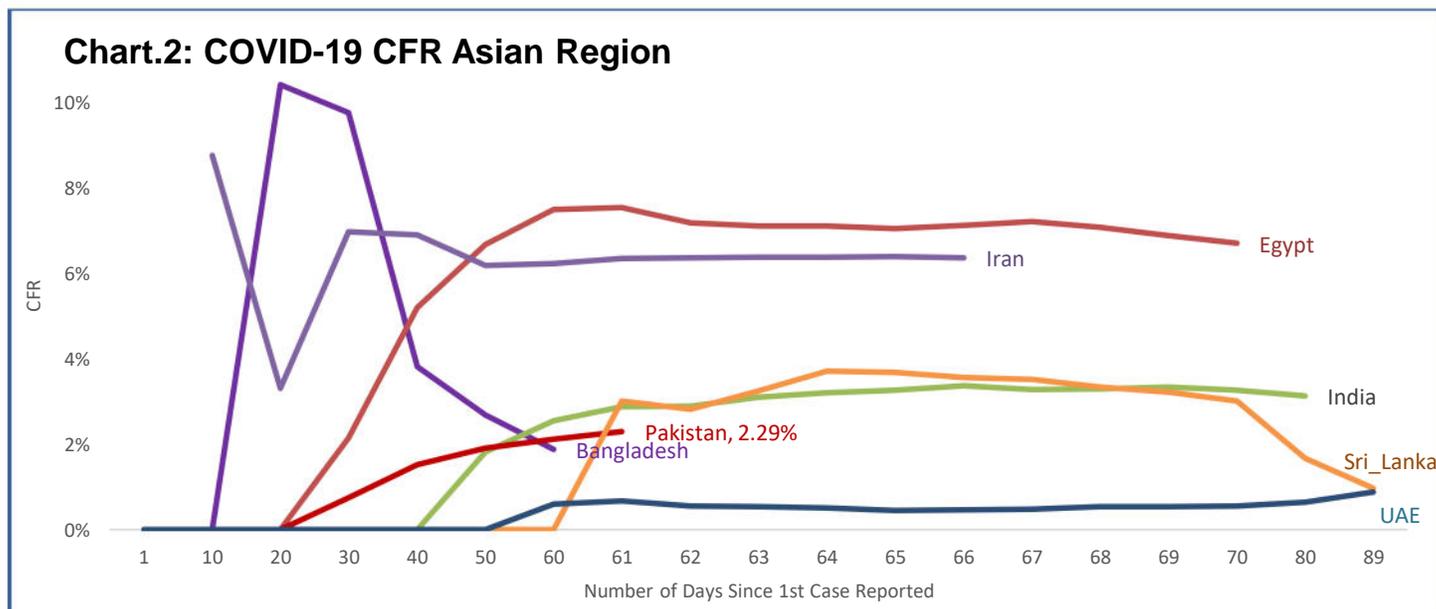
The Case Fatality Rate (CFR¹) is used to describe the situation pertaining to the severity of COVID-19. It changes over time and varies between countries which do not necessarily reflect real differences in the risk of dying from COVID-19. Instead, it may reflect differences in the extent of testing, or the stage a country is in its trajectory through the outbreak. WHO reasons it as “the standard of care has evolved over the course of the outbreak”. The gradual increase of human immunity may also result in decreasing CFR which also varies over regions and communities, courtesy to demographic, social and climatic conditions. Since the pandemic has crossed its initial phase in almost all countries, so the time-lag bias in diagnosing and reporting cases that might have underestimated CFR is now over. Therefore, COVID-19 CFR can be utilized to compare the severity of a disease in different regions/countries, provided other factors remained same. We Look at the trajectory of COVID-19 CFR starting since first case reported for different countries, see Chart.2, 3 and 4.²

In selected Asian countries no deaths were reported in first 20 days since the first case reported, except for Iran, a high hit country, and Bangladesh. Iran had the first cases

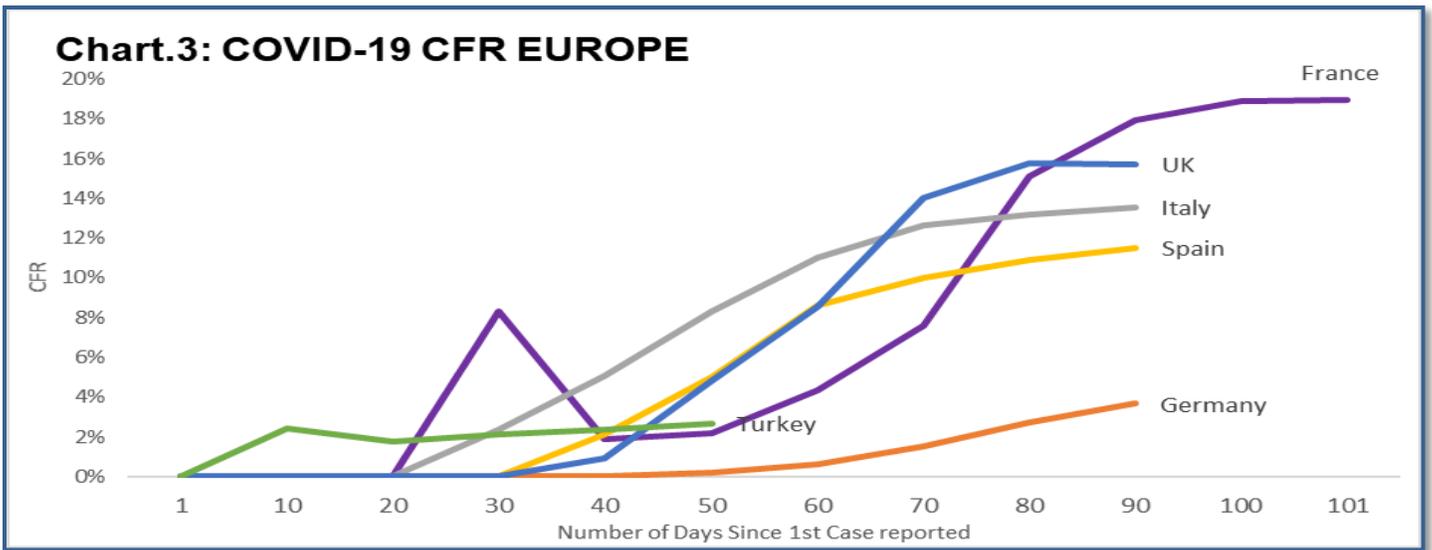
¹ Ratio of Number of deaths from certain disease to Total Number of people diagnosed with this disease

² Data Source for Graph 2, 3 and 4 is <https://www.ecdc.europa.eu/en/publications-data/download-todays-data-geographic-distribution-covid-19-cases-worldwide>

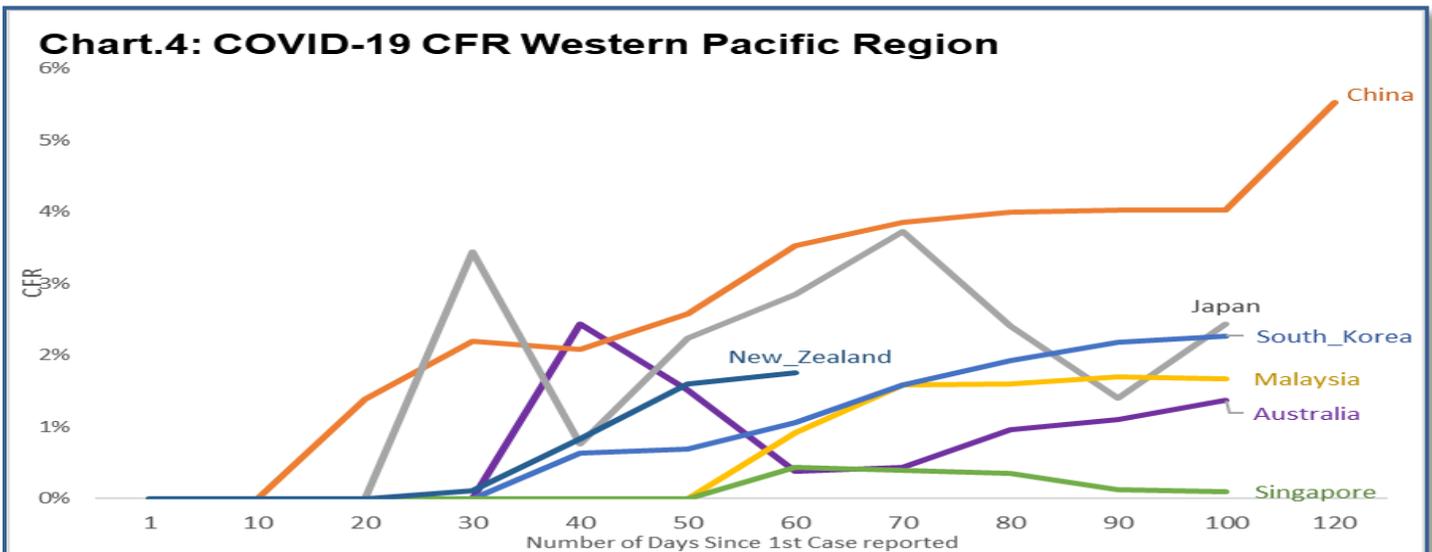
reported with its death on same day making an outlier of 100% which later declines and now at day 66 Iran reports CFR equals to 6.37%. Bangladesh had first casualty at day 10 with CFR spiking to 10.42% up till day 20, however, by adequate measures their CFR for COVID-19 drops and now at day 60 it is at 1.87%. Pakistan and Egypt reported first death at day 20 since the first case but the CFR in Egypt is reported to be 6.70% after day 70 while Pakistan is moving much lower with CFR equals 2.29% after day 60. This lower CFR may be due to the possible reasons of better immunity and social distancing measures or may be due to lesser diagnostic and testing facilities. India has first death case on day 44 and now at day 80 it has CFR of 3.13%. In Sri Lanka no death reported until after two months of COVID-19 outbreak, where in UAE no death reported in early fifty days. Current CFR of Sri Lanka is 0.97% and that of UAE is 0.88%, see Chart.2. The countries of this region have the COVID-19 CFR lesser than the European region but greater than the western Pacific region. The query remains is it due to climatic features or are the western Pacific region countries better prepared for epidemics from their previous experience?



In selected European countries, death toll starts after twenty days of the first case reported. Overall CFR in Europe is much higher than the selected Asian countries. Germany and Turkey are exceptional where CFR is 3.66% and 2.66% respectively. In Germany, the first death was reported after forty days of the first case reported, while Turkey is now at day 50 since 1st reported case. France remains the highest CFR reporting country in the region with its current CFR equals to 18.96%, see Chart.3.



Just like Asia and Europe first death reported after twenty days since first case reported. In Japan, first death is reported after 20 days since the first case reported, the CFR in Japan nose dived around 40th day but somewhat volatile pattern noted after that however, gradually it reduces and after 100th day it is 2.44%. China even after 120 days after the 1st case reported record CFR equals to 5.52% indicating high severity of the disease. New-Zealand and South Korea reported first death around day 30 of the first reported case. New-Zealand is at day 60 now with 1.76% CFR while South Korea is at day 100 with 2.27% CFR. Malaysia and Singapore first death were reported after fifty and sixty days and at 100th day their recorded CFR is 1.67% and 0.09%, respectively. In Australia, the CFR drops nose down after forty days since first case reported but then rises to 1.37% at 100th day, see Chart.4.



The CFR analysis of distinct countries indicates that Pakistan has comparatively low CFR but exact reason remains oblivious, so in order to recover from COVID-19 Pakistan needs to adopt precautions actively.

Pakistan: Between the devil and the deep blue sea

The covid-19 crisis has disclosed many dark chapters of our country and the readers i.e. the general public is horrified. The horrors include weak healthcare system, the crumbling economy, the un-parallel course of action of the centre and the Sindh government in talking the pandemic, and now the new chapter of locust attack which probably can lead to famine if not handled properly.

We have now somewhat familiarity with the government efforts of handling the current pandemic i.e. cases are surging every day including that of health workers, the PPE's are of one month supply while the pandemic dark shadow may last for months if not years, testing kits are of very limited supply and the number of tests per day has been decreased as the government has adopted TTQ i.e. Test, Track and Quarantine approach, which may lead to under reporting of the cases in the country, health workers organizes strikes for saving them first, only then they will be able to help others, and the illiteracy of people about the safety measure add fuel to the fire.

With all the fore-mentioned difficulties the government is tangled between saving lives and livelihoods. The economy is in halt and the complications due to which; millions are currently unemployed, businesses are sinking, fiscal deficit is haunting the economy with revenue targets revised by FBR, hot money is leaving the country, and in addition to the above economic issues, corruption stays put as Dawn newspaper reported RS 3.67bn irregularities in Zakat and Bait ul Maal funds and the recent Wheat and Sugar scandal losses to the economy are not confidential to anyone, anymore.

In response to the above technicalities government has announced RS1.2tr relief package to save the sinking ship of the economy and its efforts to protect the most vulnerable part of the society i.e. poor who receive RS 12,000 under Ehsaas Program and the approach has been appreciated by the WHO.

However, with the mention of some of the dark shadows from the pandemic's Pandora's Box another very serious problem the country is facing is the missing of the unity between the centre and the Sindh government as both have chosen separate routes on combating the virus. The centre has implemented partial lockdown then smart lockdown while Sindh is under complete lockdown. The centre has reduced testing per day because of TTQ and the Sindh government thinks its a plot against it because Sindh is testing the residence to its full capacity and it may report more cases compared to other federating units etc.

Moreover, with un-kindness of nature another serious problem is hovering over the somewhat safe zone sector of the economy i.e. agriculture as swarms of locust are migrating from Iran which puts 21 districts i.e. 38% of an area in Pakistan at risk of damaged crops specifically wheat, gram and potato according to FAO report entitled 'Desert locust situation in Pakistan'. The report also highlights the economic losses of RS 205bn at 15% damage level. In addition to that the whole country can be at risk as the locust attack duration may extends to up to two years.

In a nutshell, as there is a custom in Pakistan, when the red lights are lit and the alarms are rung only then the authorities take action. During this period of hardships Pakistan is between the devil (crumbling economy) and the deep blue sea (surging virus cases, disunity and now locust attack) and it needs a coordinating approach and immediate response towards all the problems to deal with the spears of the devils and the depth of the sea.

(Written by: Muhammad Irshad Khan, an Alumnus at Economics and Econometrics Department, PIDE)



Performers wearing protective face shields perform at the Erawan Shrine, in Bangkok, Thailand—Reuters

Frequently Asked Questions

1. Should newborn vaccination programmes continue as planned during the COVID-19 pandemic?

Yes, Given that institutional deliveries should be maintained in most situations, newborn vaccination (e.g. BCG, OPV, Hepatitis B) should remain a priority and vaccines given according to national immunization schedules.

2. Is adult vaccination recommended during the COVID-19 pandemic?

Countries with existing pneumococcal, influenza, or pertussis vaccination programmes for older adults and individuals with high-risk conditions should maintain those programs while implementing measures to avoid the spread of COVID19, especially for those at higher risk of severe disease such as older adults, Preventing respiratory illness and hospitalization from pneumococcus, influenza, and pertussis through vaccination will allow respiratory medical equipment, medications, and health care workers to be more available to support patients with COVID-19, While there is currently limited information on whether COVID-19 is associated with an increased risk of pneumococcal infection, pneumococcal vaccination can prevent both primary and secondary bacterial infections and the unnecessary use of antibacterial medications (antibiotics).

3. Are there ways to organize the immunization service site to minimize the risk of COVID-19 virus transmission?

Yes. There are a range of simple steps that can be taken to protect vaccines and caretakers from COVID-19 exposure, such as limiting the number of individuals present at an immunization visit and holding smaller sessions at more frequent intervals, Strategies to avoid crowded waiting rooms could include:

- Organising scheduled times for immunization appointments;
- Bundling immunization activities with other essential preventive health services, as appropriate for age, to limit the number of visits made to the health centre by vaccines and their caregivers;
- Use of outdoor spaces, if possible, and adherence to physical distancing at the health care facility or site;
- Establishing immunization sessions exclusively for vaccination of older persons and those with pre-existing medical conditions (such as high blood pressure, heart disease, respiratory illness, or diabetes).

Whenever possible, immunization services and waiting areas should be separated from curative services (i.e., separate times of the day or separate spaces depending on the facility).

Source: World Health Organization

COVID-19: Timeline of a Pandemic (March 11, 2020 — March 12, 2020)

March 11 — WHO Director-General Tedros Adhanom Ghebreyesus declares the global COVID-19 outbreak a pandemic. “We are deeply concerned both by the alarming levels of spread and severity and by the alarming levels of inaction,” he says, adding that “we have called every day for countries to take urgent and aggressive action.” The decision has been made based on input from experts both internally and externally.

While only eight countries in Africa have reported cases of COVID-19, there is concern that weak surveillance systems are not identifying existing cases, says Ryan, during a press conference. “We believe there may be an element of under-diagnosis in some countries and we are chasing that and trying to activate surveillance on the whole continent,” he says.

After the first case of COVID-19 was detected in DRC this week, WHO is redirecting some of its Ebola response capacity toward the potential isolation and treatment of cases, Ryan says. Last week, the last Ebola patient was discharged from a treatment center. Responders say that resources are still needed to ensure there is not a resurgence of the virus.

The U.K. announces up to \$192.4 million (£150 million) in aid funding from the nation's budget to “mitigate the impact of coronavirus on the world’s most vulnerable countries.”

Turkey, Côte d’Ivoire, Cuba, Guyana, Honduras, Saint Vincent and the Grenadines confirm first cases of COVID-19.

In places such as Iran, North Korea, and Syria, sanctions are hindering the response to the outbreak, impacting countries’ ability to purchase test kits, medicines, equipment, and other necessary items.

March 12 — The Pacific confirms its first case of COVID-19. The patient is Maina Sage, a French Polynesian politician who recently returned from Paris.

The Asian Development Bank asks its staff at its Manila headquarters to work from home temporarily after a visitor tested positive for COVID-19. But bank operations continue. ADB announces \$200 million will be made available to companies in the supply chain critical in combating the COVID-19 outbreak. The money will be made available through its Supply Chain Finance Program. A diplomat from the Philippines tests positive for COVID-19, marking the first case at the United Nations headquarters in New York City.

Trinidad and Tobago, Ghana, and Gabon confirm first cases of COVID-19.

Source: <https://www.devex.com/>

Experts' View

From the public health point of view, perhaps the most important one is that the best service a government can give its citizens – and to the rest of the world – is to never ignore, dismiss, or hide the extent of an infectious disease outbreak, because it has the potential of becoming an epidemic or even a pandemic that will spread throughout most countries in the world. **(Cesar Chelala, THE NEWS)**

Policymakers must recognise that home is not safe for everyone and the pandemic that requires everyone to stay home is not the best option for some. Therefore, essential services — helplines, shelter homes, medical facilities and police — must be remain functional, work in a coordinated manner by identifying existing services and adjusting SOPs to cater to women survivors. **(Benazir Jatoi, EXPRESS TRIBUNE)**

The first measure the government should consider taking is to reduce the GST to 0% on all digital transactions for the next 12 months.**(Uzair.M. Younus, DAWN)**

Experts' Opinion

Covid-19 has wreaked havoc on the world's economy. According to the latest IMF estimates, the global economy will shrink by three percent this year and the global economic output will tumble by about \$9 trillion over two years. **(Syed Mujahid Hussain, THE NEWS)**

There's the slow and incremental process of coming out of lockdown. Even individuals who have kept their jobs and full salaries may make longer-term changes to their spending, as it will be some time before they feel comfortable visiting crowded malls and dining out in restaurants again. **(BloomBerg Report)**

COVID-19 has brought mighty capitalism to its knees in a David and Goliath way that its Stalinist and Islamist foes never even dreamt about. But worry not, the beast is still sturdy and will be back bellowing on its feet soon. **(Dr. Niaz Murtaza, DAWN)**

World Health Organization

Coronavirus disease (COVID-19) advice for the public: Myth Buster

While several drug trials are ongoing, there is currently no proof that hydroxychloroquine or any other drug can cure or prevent COVID-19.

The misuse of hydroxychloroquine can cause serious side effects and illness and even lead to death.

WHO is coordinating efforts to develop and evaluate medicines to treat COVID-19.

FACT:
There are currently no drugs licensed for the treatment or prevention of COVID-19



#Coronavirus

#COVID19

27 April 2020



All Govt. guidelines flouted, security measures overlooked
in the mosques—*DAWN*



Cricketer Shahid Afridi (C) distributes dry food rations to family members of policemen, who died in service, during a government-imposed nationwide lockdown as a preventive measure against the COVID-19 coronavirus—*Getty Images*



Journalists break their fast in a demonstration to mark the World Press Freedom Day during a government-imposed nationwide lockdown as a preventive measure against the COVID-19 coronavirus, in Islamabad—*Getty Images*



Residents of Rawalpindi continued to crowd markets and violate social distancing guidelines in shops despite the lockdown—*DAWN*



(COMBO) This combination of pictures created on April 1, 2020 shows medical staffers on the frontline treating patients of the COVID-19 coronavirus pandemic, posing for a picture while on break at al-Hakim General Hospital in Iraq's central shrine city of Najaf—(Photos by Haidar HAMDANI / AFP) (AFP / Haidar Hamdani)

COVID-19 READS

- 1. Poverty kills people: after coronavirus we can no longer ignore it**
<https://www.theguardian.com/commentisfree/2020/may/05/poverty-kills-people-coronavirus-life-expectancy-britain>
- 2. British-style lockdowns are not working in Africa**
<https://www.aljazeera.com/indepth/opinion/british-style-lockdowns-working-africa-200501101858972.html>
- 3. Italian economist worrying about post-pandemic economy**
<https://www.shine.cn/opinion/2004307325/>
- 4. COVID-19 and Europe's new battle of ideas**
<https://www.shine.cn/opinion/2004297201/>
- 5. Public opinion is no obstacle to lifting lockdown**
<https://www.telegraph.co.uk/news/2020/05/05/public-opinion-no-obstacle-lifting-lockdown/>
- 6. Stronger tech cooperation vital for swifter victory over virus**
<https://www.shine.cn/opinion/2004256959/>
- 7. What is coronavirus, how did it start and how big could it get?**
<https://www.telegraph.co.uk/news/2020/05/05/what-coronavirus-covid-19-world-pandemic/>
- 8. Coronavirus pandemic has prompted a shift to online learning, raising questions about how we value education**
<https://www.scmp.com/comment/opinion/article/3082700/coronavirus-pandemic-has-prompted-shift-online-learning-raising>
- 9. COVID-19 reveals countries' differing capacity**
<https://www.globaltimes.cn/content/1186435.shtml>
- 10. Covid-19 pandemic taking precedence over global conflicts**
<https://www.beijingnews.net/news/264923327/covid-19-pandemic-taking-precedence-over-global-conflicts#>
- 11. Covid-19's Race and Class Warfare**
<https://www.nytimes.com/2020/05/03/opinion/coronavirus-race-class.html>
- 12. In a Crisis, True Leaders Stand Out**
<https://www.nytimes.com/2020/04/30/opinion/coronavirus-leadership.html>

13. We the People, in Order to Defeat the Coronavirus

<https://www.nytimes.com/2020/05/01/opinion/coronavirus-civil-liberties.html>

14. End of capitalism?

<https://www.dawn.com/news/1554658/end-of-capitalism>

15. Mental health: Pakistan's Achilles heel during Covid-19

<https://www.dawn.com/news/1553941/mental-health-pakistans-achilles-heel-during-covid-19>

16. Covid-19 — A wakeup call for higher education

<https://www.dawn.com/news/1554232/covid-19-a-wakeup-call-for-higher-education>

17. Coronavirus eats into Singapore's already struggling hawker trade

<https://www.aljazeera.com/news/2020/05/coronavirus-eats-singapores-struggling-hawker-trade-200504090429208.html>

18. COVID-19: A double emergency

<https://www.unicef.org/coronavirus/covid-19-double-emergency>

19. Bad breath behind that coronavirus mask? 10 reasons—and remedies—for your halitosis

<https://edition.cnn.com/2020/05/05/health/mask-coronavirus-bad-breath-10-causes-remedies/index.html>

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