World Health Organization
Bangladesh

# COVID-19

**14 September 2020**
**Morbidity and Mortality**
**Weekly Update (MMWU) N°29**

https://www.who.int/bangladesh/emergencies/coronavirus-disease-(covid-19)-update/

*Photo Credit: Social Media, Bangladesh*

| Tested | Confirmed Cases | Recovered | Dead | Hotline |
|---|---|---|---|---|
| 1,742,696 | 339,332 | 243,155 | 4,759 | 20.46 million |

| Test/1 million | New Cases | Recovery Rate | IFR% | AR/1 million |
|---|---|---|---|---|
| 10,233 | 1,812 | 71.7% | 1.4 | 1,993 |

| Laboratories | PPE Stock | | PoE Screening | |
|---|---|---|---|---|
| 94 COVID-19 Labs | | 1,026,173 | | 512,486 |
| Last 7 days<br>97,972 Samples | | 3,237,994 | | 37,839 |
| 59.8%<br>Inside Dhaka Tests | | 135,226 | | 7,029 |
| 19.5%<br>Positive Tests | | 1,629,613 | | 371,989 |

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## 1. Coordination

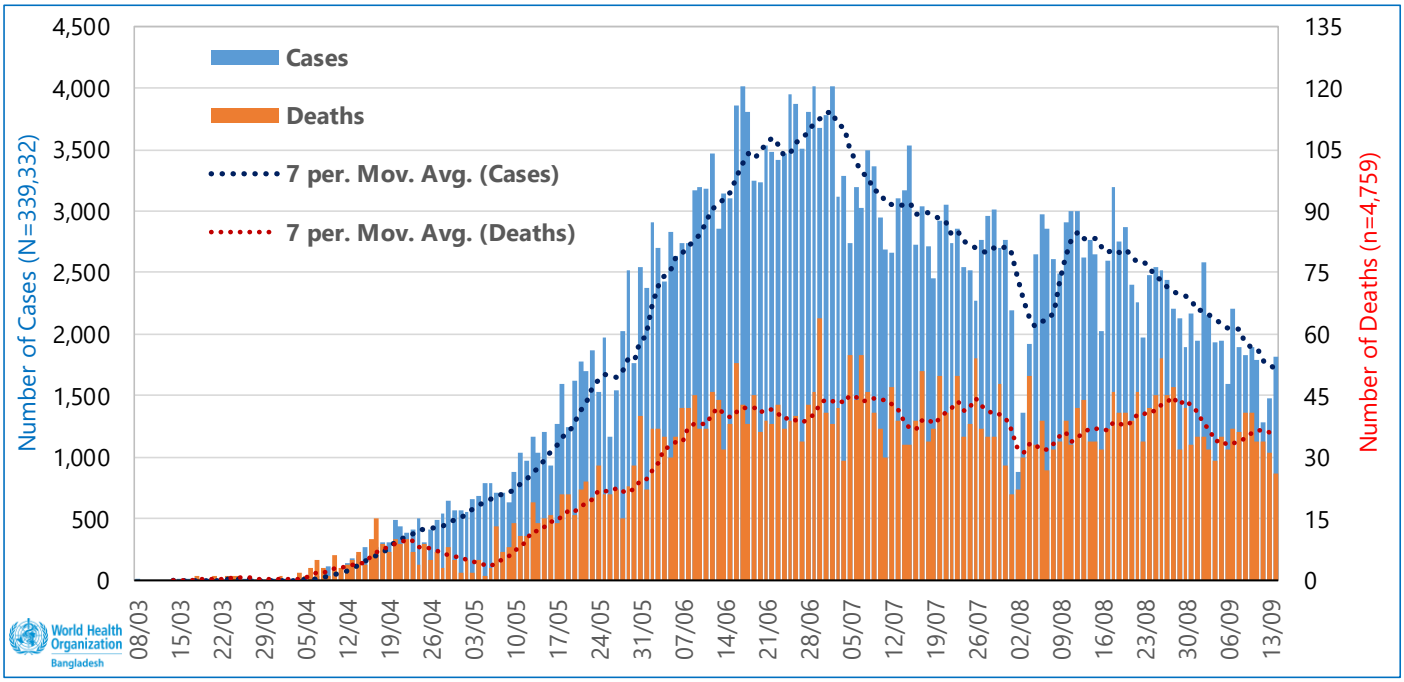
On 11 September 2020, WHO published an interim guidance **'Antigen-detection in the diagnosis of SARS-CoV-2 infection using rapid immunoassays'**. This document offers advice on the potential role of antigen-detecting RDTs (Ag-RDT) in the diagnosis of COVID-19 and the need for careful test selection. Topics in the documents include: General recommendations for the use of SARS-CoV-2 Ag-RDTs, potential use and non-use case scenarios for SARS-CoV-2 antigen detecting RDTs based on minimum performance criteria; roles for antigen detecting RDTs for case management and surveillance for COVID-19, factors influencing test performance and future updates & product specific recommendations. Full document: *https://apps.who.int/iris/rest/bitstreams/1302653/retrieve*

On 11 September 2020, WHO published an updated interim guidance titled '**Diagnostic testing for SARS-CoV-2'**. The document provides interim guidance to laboratories and other stakeholders involved in diagnostics for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It covers the main considerations for specimen collection, nucleic acid amplification testing (NAAT), antigen (Ag), antibody (Ab) detection and quality assurance. Topics in the documents include: Laboratory testing guiding principles, Specimen collection, shipment and storage, Biosafety practices in the laboratory, Testing for SARS-CoV-2 and Reporting of cases and test results. This document will be updated as new information becomes available. Full document: *https://apps.who.int/iris/rest/bitstreams/1302661/retrieve*

## 2. Surveillance and Laboratories

Between 8 March and 14 September 2020, according to the DGHS Press Release <*https://corona.gov.bd/press-release*> there were three hundred thirty-nine thousand three hundred thirty-two (**339,332**) COVID-19 confirmed by rRT-PCR, including four thousand seven hundred fifty-nine (**4,759**) related deaths (**IFR 1.4**%)[1].

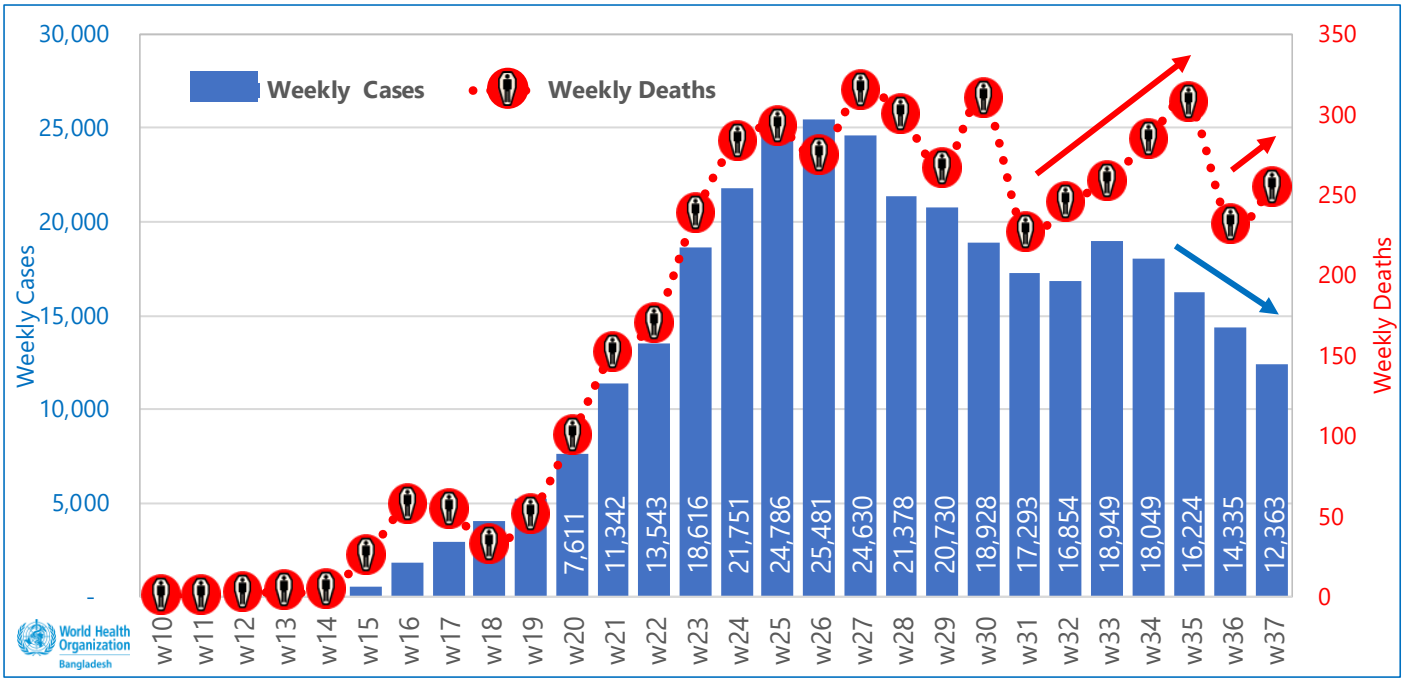
***The figure below is showing daily distribution of reported COVID-19 confirmed cases and deaths, 08 March – 14 September 2020, Bangladesh.***




In the reported week (epidemiological week 37), in comparison to the previous epidemiological week, the number of new weekly COVID-19 cases **decreased** by **13.8%** (**12,363** in week 36 and **14,335** in the previous week) while, the number of COVID-19 new weekly deaths **increased** by **10.8%** (254 and **231** respectively), leading the IFR a little **increase** from **1.38%** in epidemiological week 36 to **1.4%** in the current week but the Case Fatality Ratio (CFR) **decreased** from **1.98** last week to **1.93** in the current week.

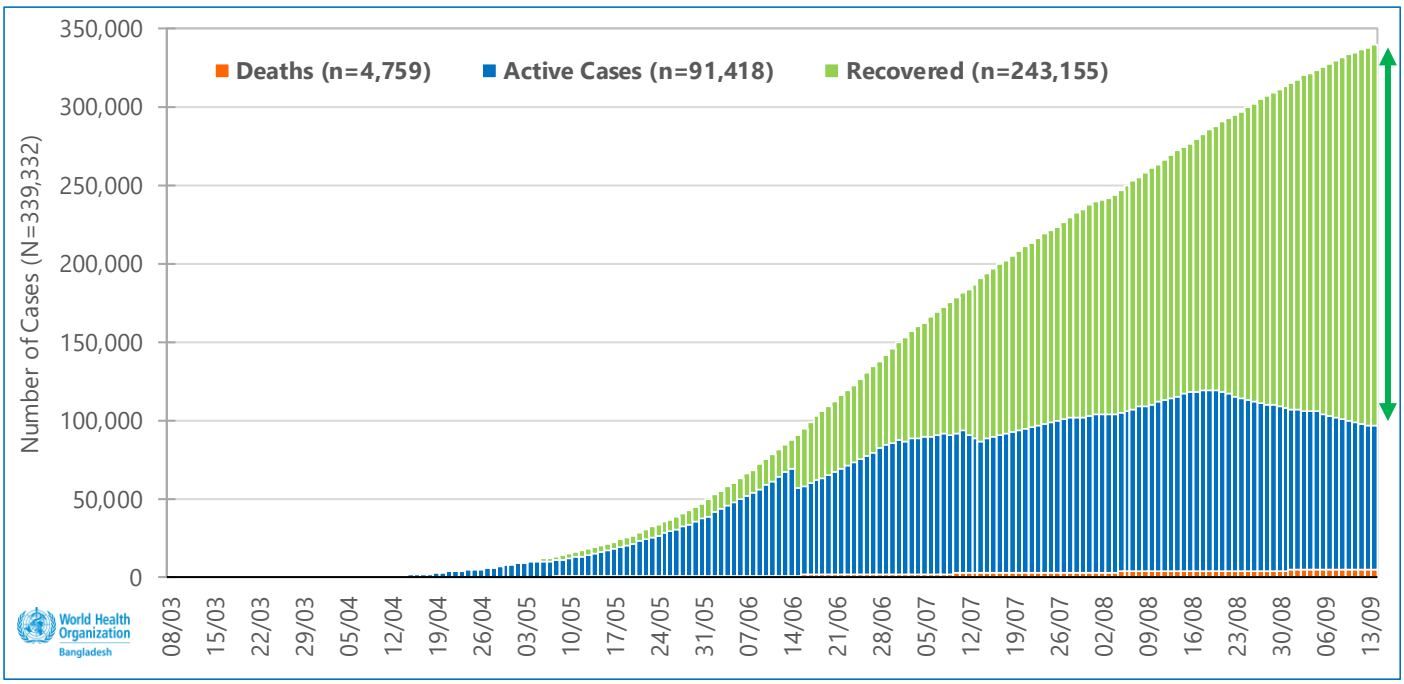
[1] IFR refers to 'Infection Fatality Ratio' which can describe the true severity of a disease https://www.who.int/news-room/commentaries/detail/estimating-mortality-from-covid-19

***The figure below is showing the weekly distribution of reported confirmed COVID-19 cases and deaths, 08 March – 14 September 2020, Bangladesh.***




Out of the total **339,332** COVID-19 cases registered as of 14 September 2020, **71.7%** (243,155) recovered, **1.4**% (4,759) **died** and **26.9**% (91,418) are **active cases**.

***The figure below is showing active vs recovered confirmed COVID-19 cases outcomes per epidemiological week, 08 March – 14 September 2020, Bangladesh.***

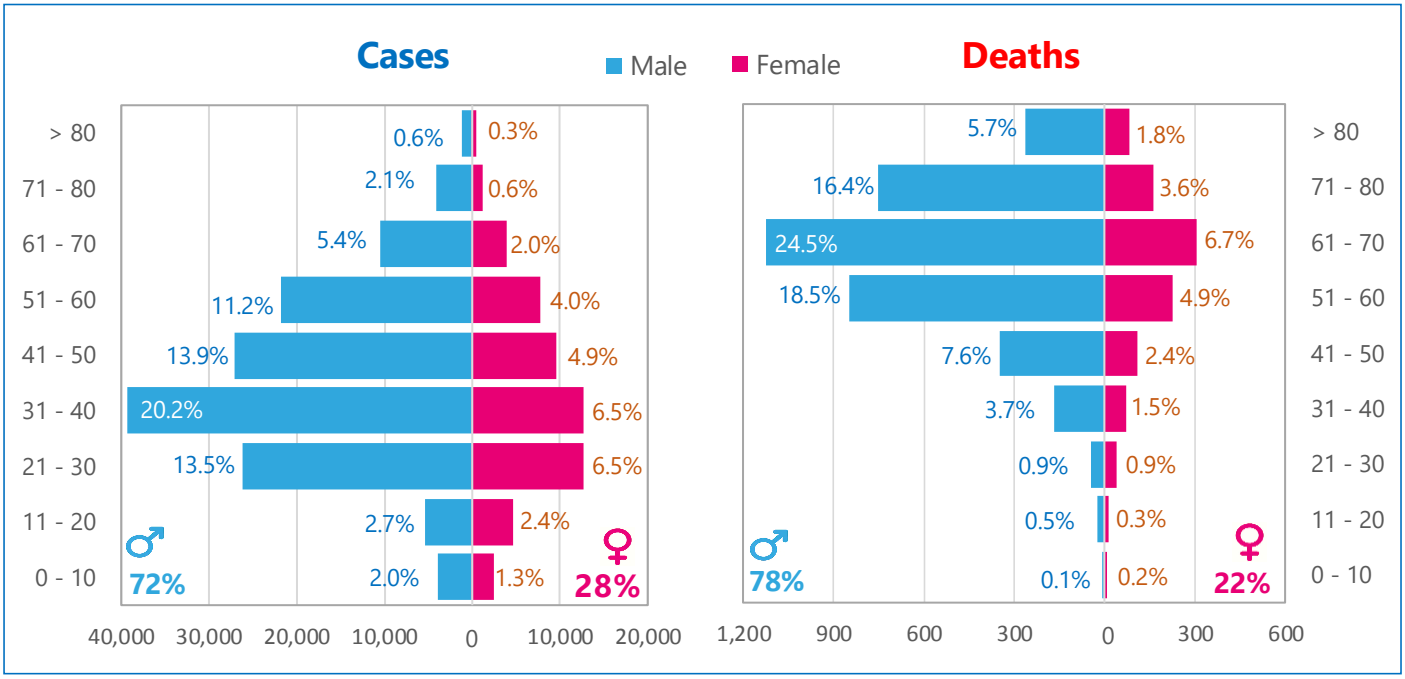



In the epidemiological week 37, the number of COVID-19 **active cases** decreased by **7.3%**, in comparison to the previous week (**92,148** and **99,407** respectively) and at the same time, the number of **recovered** COVID-19 cases is as as the previous week at **19,368**.

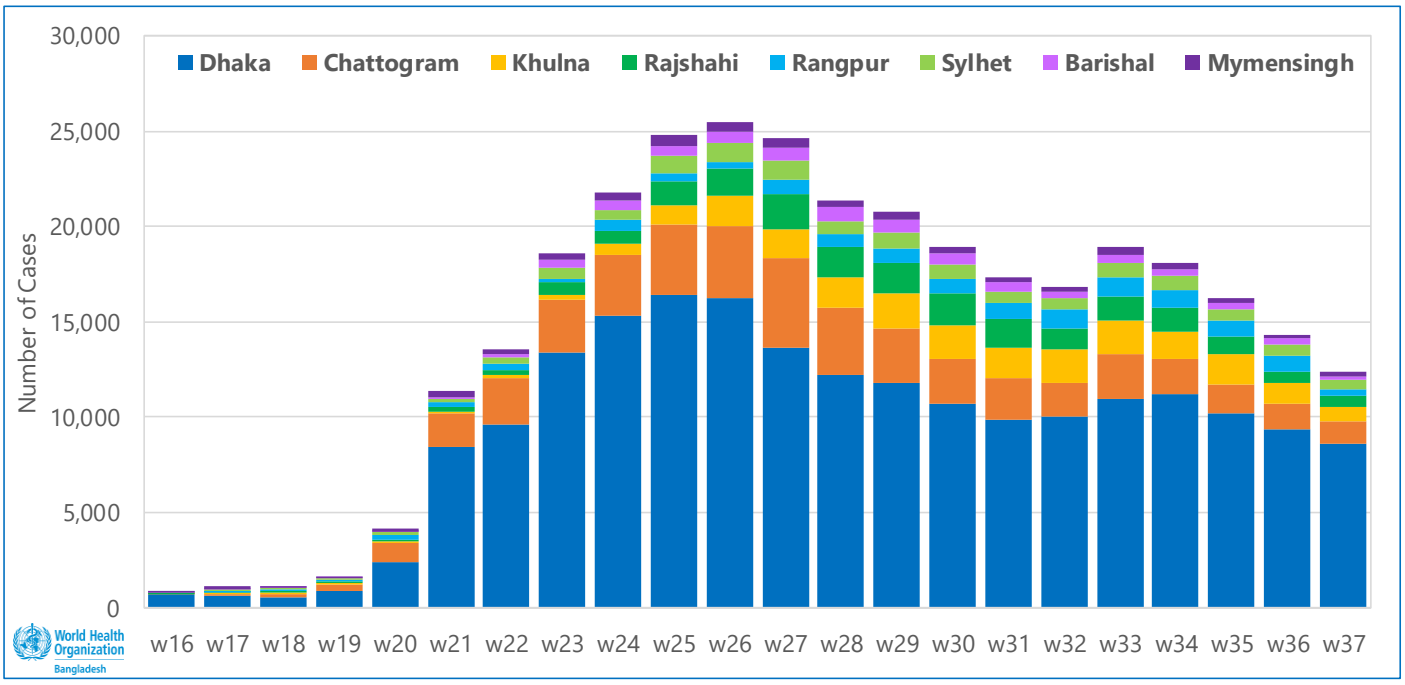
As of 14 September 2020, **26.7%** cases were confirmed in people between 31 and 40 years old, **20.0%** - in the age group of 21 to 30, **18.9%** - 41 to 50 years and **15.2%** in the age group between 51 and 60 years old. The highest death rate

(**31.2%**) was reported in the age group of 61 to 70 years old, **27.4%** in the older age group of 71 and above and **23.4%** - in the age group between 51 and 60 years. Male represented **72%** and **78%** of the of total reported confirmed COVID-19 cases and deaths respectively.

***The figure below is showing age-sex distribution of the reported confirmed COVID-19 cases and deaths, 14 September 2020, Bangladesh.***

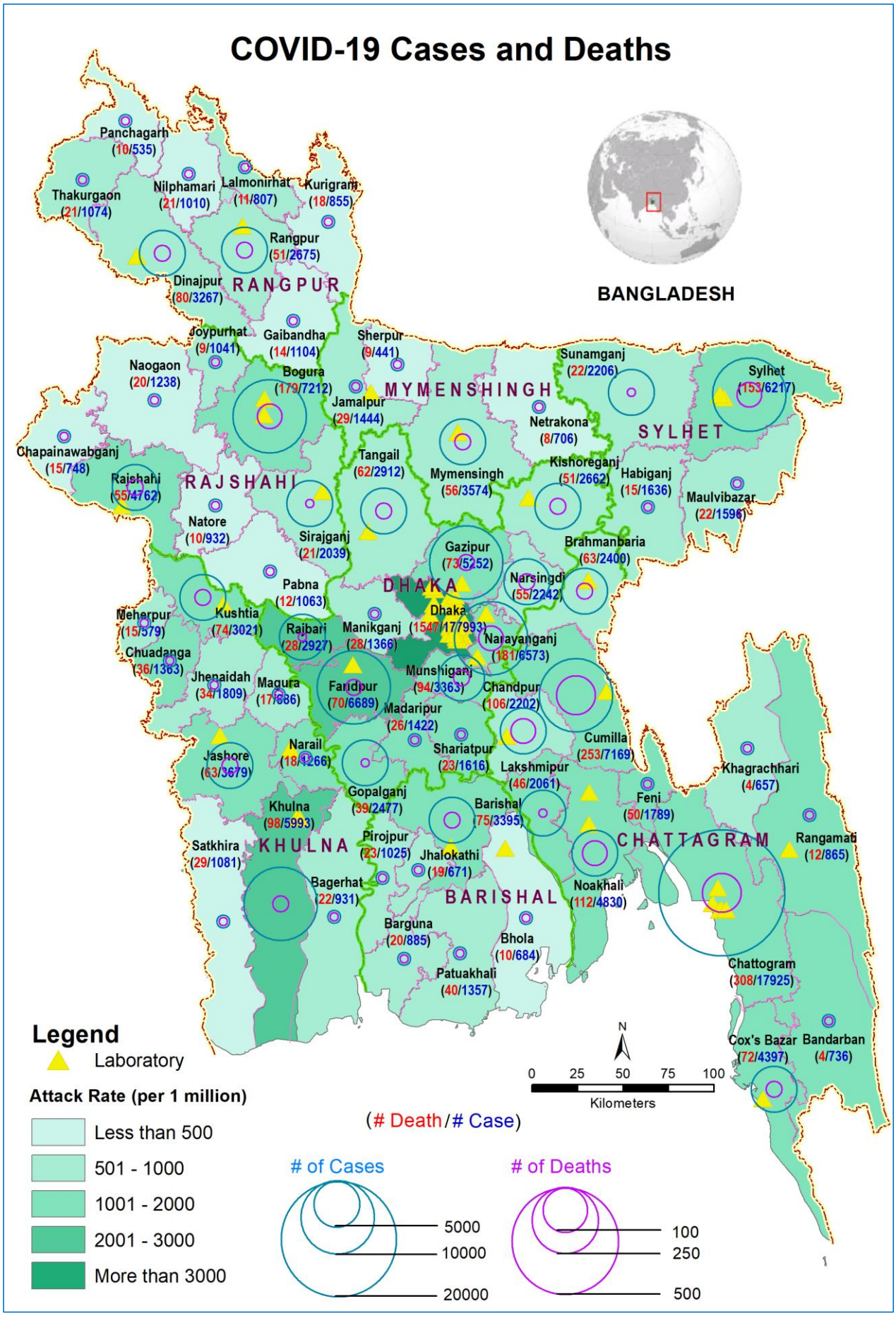



***The figure below is showing the weekly reported confirmed COVID-19 cases, 13 April – 14 September 2020, Bangladesh.***



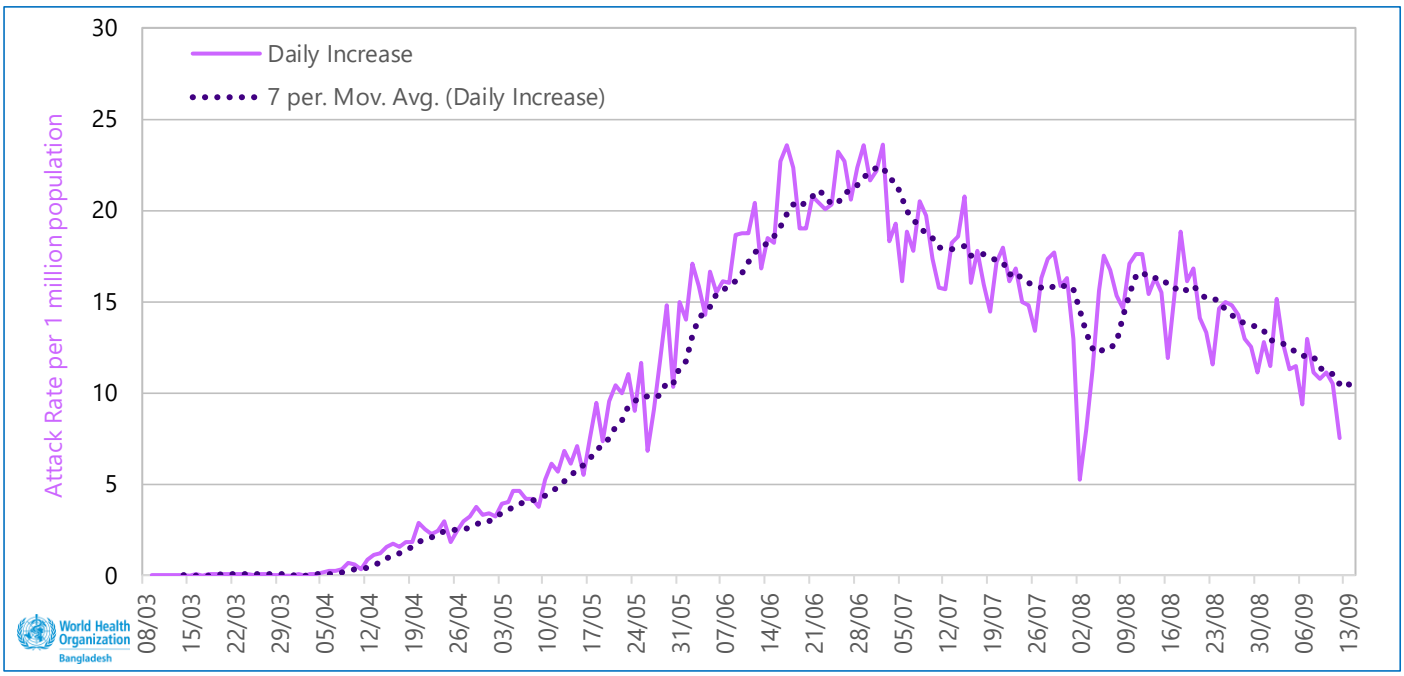

As of 14 September 2020, **62.7%** of reported cases were from **Dhaka** division, **13.8**% from **Chattogram**, **Khulna 6.3**%, **Rajshahi 5.8**%, **Sylhet** and **Rangpur 3.5**%, **Barishal 2.5**% and the lowest **1.9**% from - **Mymensingh** division. While, **48.3**% of reported death were from **Dhaka** division, **21.5**% from **Chattogram**, **Khulna 8.4**%, **Rajshahi 6.7**%, **Rangpur 4.7**%, **Sylhet 4.5**%, **Barishal 3.9**% and the lowest **2.1**% from - **Mymensingh** division.

***The map below is showing the geographical distribution of reported confirmed COVID-19 cases, deaths and Attack Rate (AR), 08 March – 14 September 2020, Bangladesh***



On 14 September 2020, Bangladesh overall attack rate (**AR)** is **1,993** per 1 million and **100% (64**/64) of districts with the total population of 170,306,468 people have reported confirmed COVID-19 cases. In the reported week (epidemiological week 37), COVID-19 weekly **AR** increased by **3.8%** in comparison to the previous week (**1982** and **1,909** respectively).

***The figure below is showing the daily increase in COVID-19 overall attack rate (AR) per 1,000,000, 08 March – 14 September 2020, Bangladesh.***




According to the available data as on 14 September 2020, the highest AR continues to be observed in the **Dhaka** division **Dhaka (5,049/1,000,000)**. Within the Dhaka division, **Dhaka city** has the highest AR (20,824/1,000,000) followed by **Faridpur** (2,957), **Rajbari** (2,358), **Munshiganj** (1,968), **Narayanganj** (1,886), **Gopalganj** (1,787), **Gazipur** (1,305), **Shariatpur** (1,183), **Madaripur** (1,032), **Narsingdi** (852), **Manikganj** (829), **Dhaka (District)** (816), **Kishoreganj** (773) and the lowest AR **683** was reported from **Tangail** district.

The 2nd highest COVID-19 AR is reported from **Chattogram** division (**1,340**/1,000,000). Within the division, **Chattogram** district reported the highest AR (1,991/1,000,000) followed by **Cox's Bazar** (1,624), **Bandarban** (1,603), **Noakhali** (1,314), **Rangamati** (1,228), **Cumilla** (1,126), **Feni** (1,053), **Lakshmipur** (1,008), **Khagrachhari** (905), **Chandpur** (771) and the lowest AR **715** was reported from **Brahmanbaria** district.

The 3rd highest AR in the country was reported from **Khulna** division (**1,111**/1,000,00) while the highest AR district is **Khulna** (**2,186**/1,000,000) followed by **Narail** (1,484), **Kushtia** (1,312), **Jashore** (1,126), **Chuadanga** (1,021), **Jhenaidah** (864), **Magura** (816), **Meherpur** (747), **Bagerhat** (533) and the lowest **460** in **Satkhira** district.

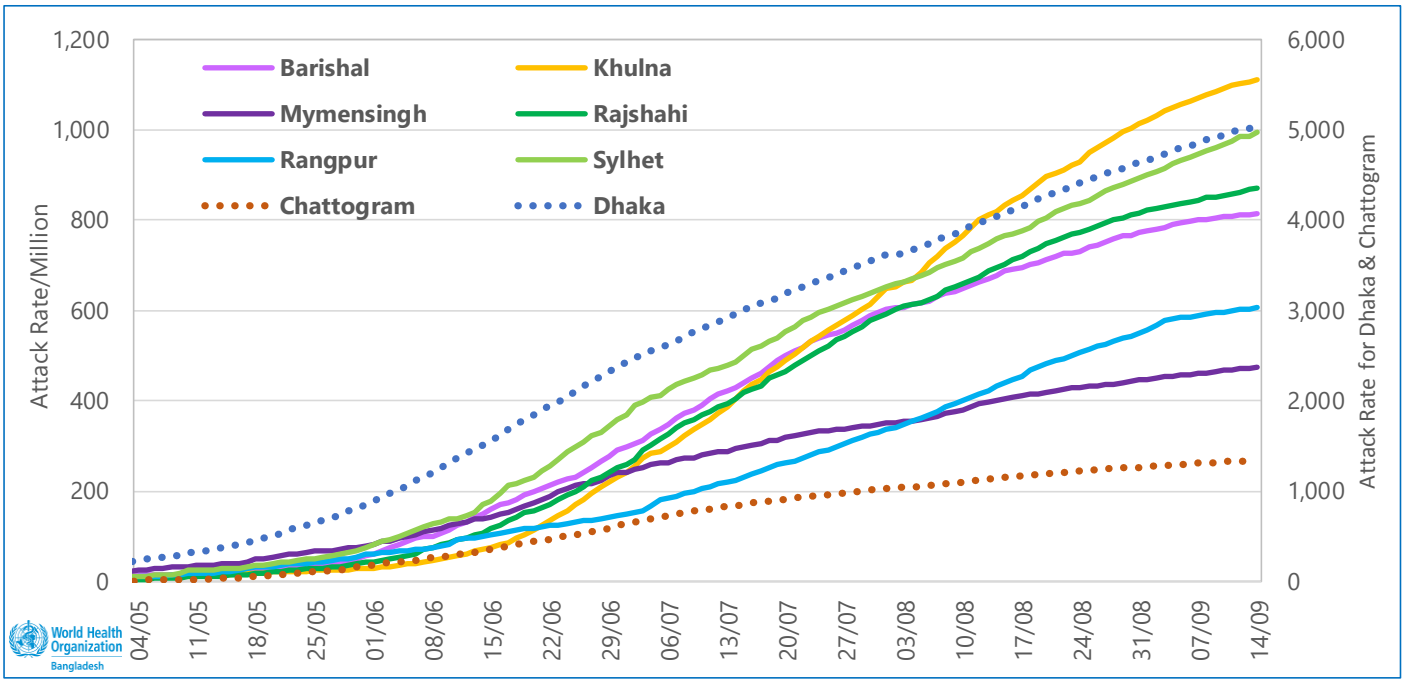
**Sylhet** division has taken the fourth highest in the overall AR with (**995**/1,000,000) with the highest AR in **Sylhet** district (**1,531**/1,000,000) followed by **Sunamganj** (756), **Maulvibazar** (703) and the lowest 662 in **Habiganj** district.

**Rajshahi** division has overall AR 871/1,000,000 with the highest AR in **Bogura** district (**1,794**/1,000,000), followed by **Rajshahi** (1,552), **Joypurhat** (964), **Sirajganj** (557), **Natore** (478), **Naogaon** (403), **Chapainawabganj** (371) and **Pabna** district is the lowest at **356**/1,000,000.
In **Barishal** division the overall AR is **814**/1,000,000 with the highest AR in **Barishal** district (**1,235**/1,000,000), while **Barguna** (838), **Jhalokathi** (831), **Pirojpur** (779), **Patuakhali** (747) and the lowest AR **326** was reported from in **Bhola** district.

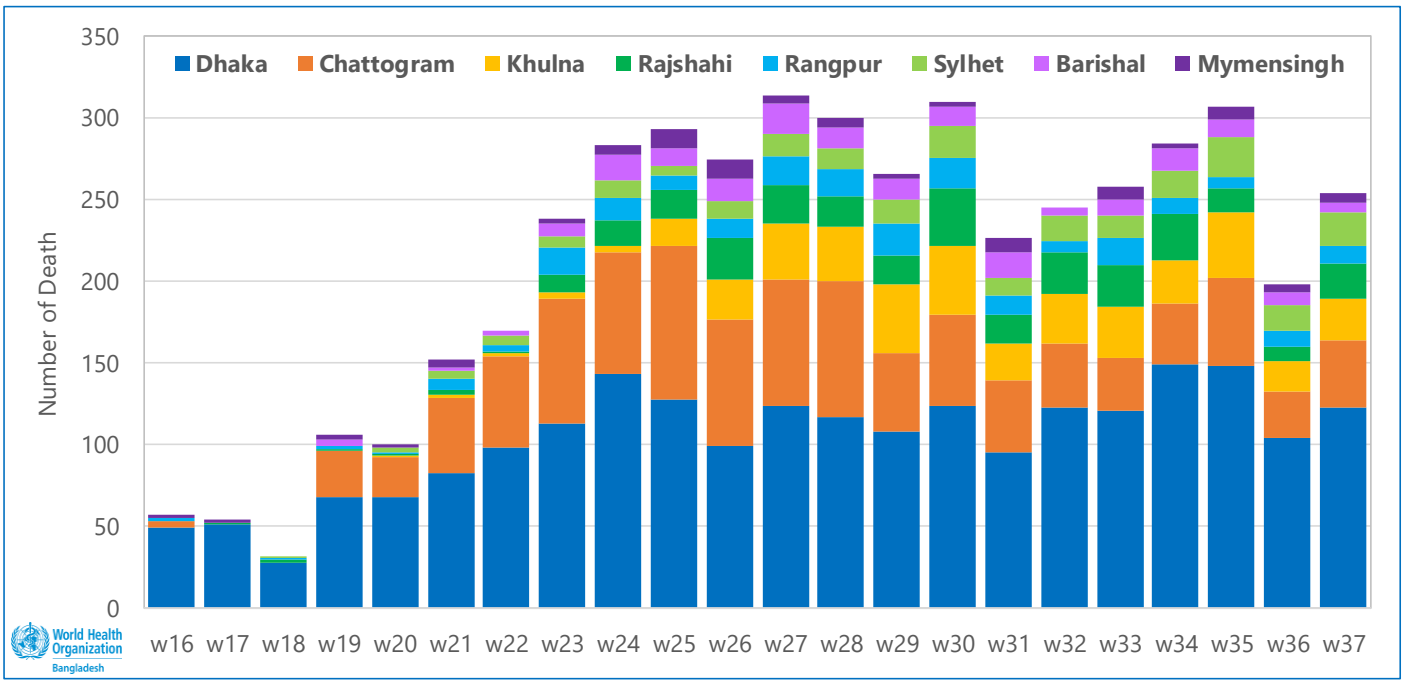
In **Rangpur** division the overall AR is **607**/1,000,000 with the highest AR in **Dinajpur** district (924/1,000,000), while **Rangpur** (785), **Thakurgaon** (653), **Lalmonirhat** (543), **Nilphamari** (466), **Panchagarh** (458), **Gaibandha** (392) and the lowest AR **349** was reported from **Kurigram** district.

The lowest AR is reported from **Mymensingh** division (**474**/1,000,000). **Mymensingh** district having the highest AR of **592**/1,000,000 followed by **Jamalpur** (533), **Sherpur** (275) and the lowest **268** in **Netrakona** district.

***The figure below is showing the progression of Arrack Rate (per million) by divisions, 08 March – 14 September 2020, Bangladesh.***

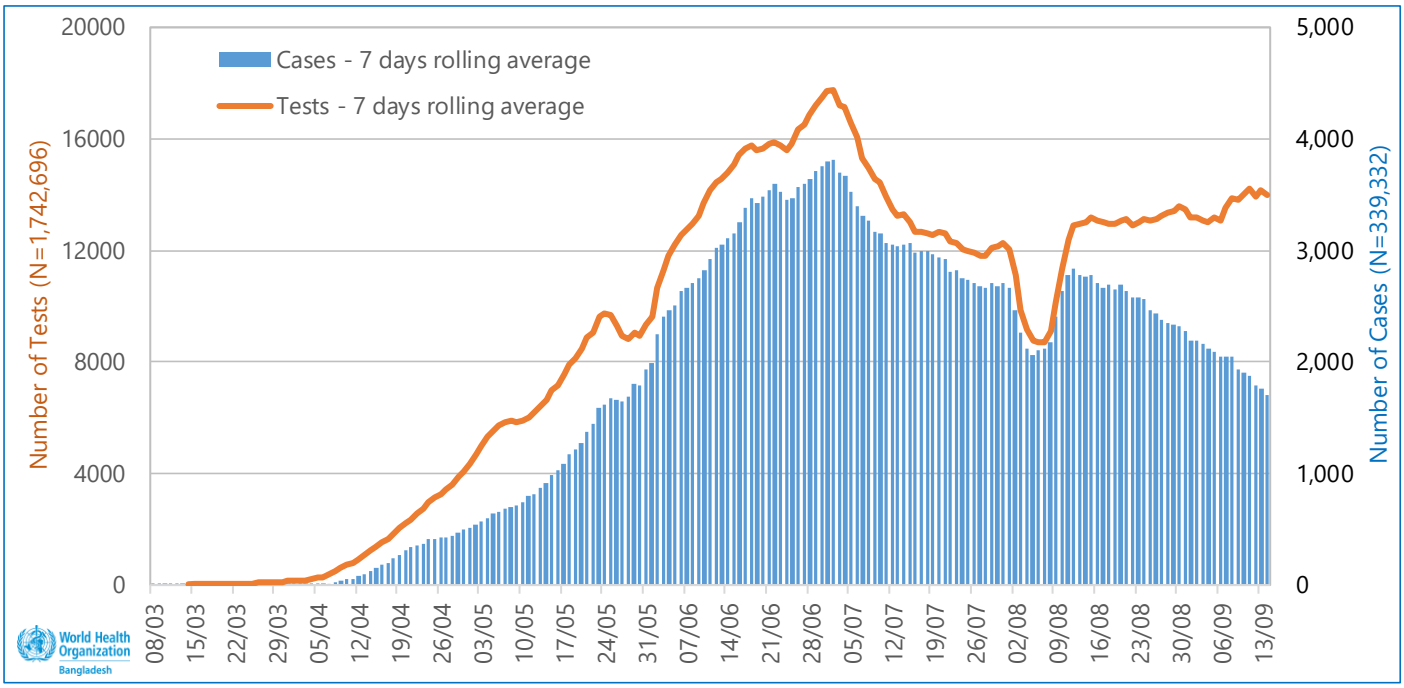



***The figure below is showing the weekly reported confirmed COVID-19 deaths, 13 April – 14 September 2020, Bangladesh.***




As of 14 September 2020, according to the DGHS Press Release **1,742,696** COVID-19 tests with the overall positivity rate of **19.47%** (**12.75%** in last 24 hours) were conducted in Bangladesh by **94** laboratories: **54** laboratories **(57.4%)** in Dhaka city and **40** laboratories (**42.6%**) outside Dhaka. Narail District Hospital, a government institution has started testing this week. **59.8% (1,041,818**/1,742,696) of all samples were tested by laboratories in the Dhaka city.

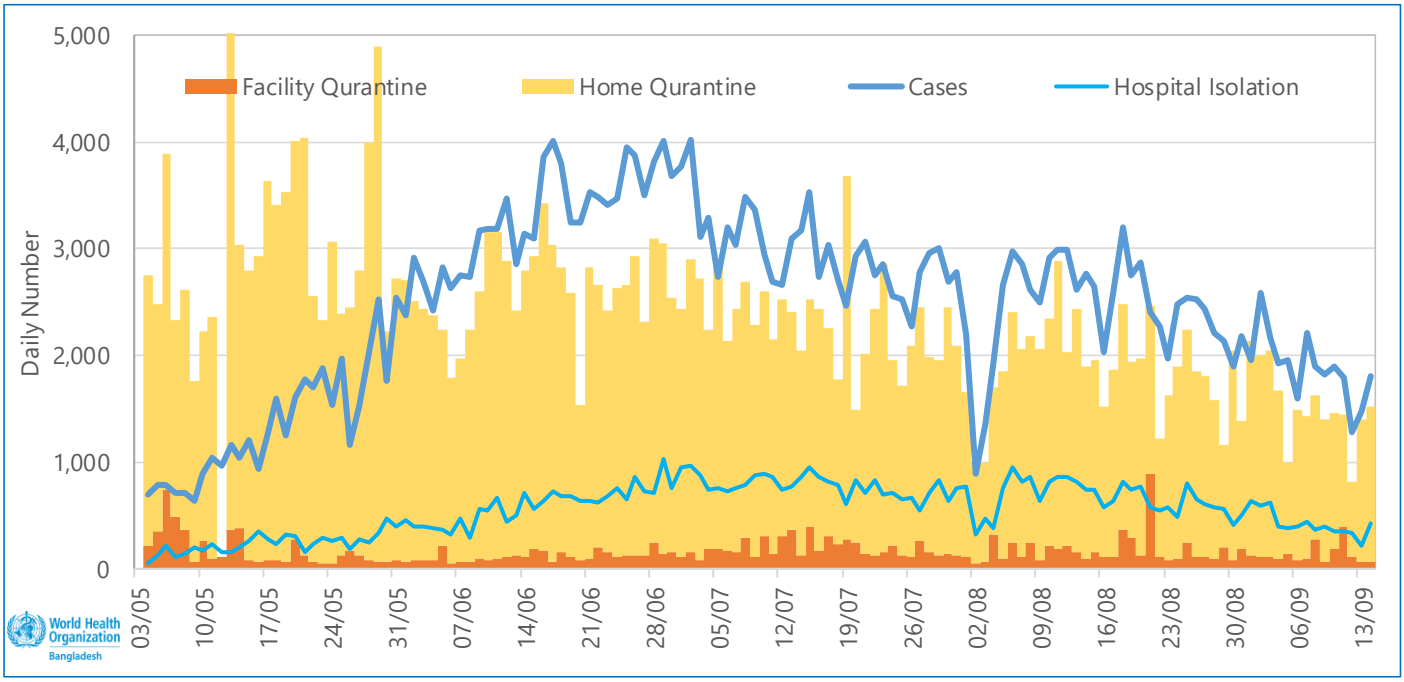
***The graph below is showing the comparison between the average number of samples tested and average number of confirmed COVID-19 cases, 08 March – 14 September 2020, Bangladesh.***




## 3. Point of Entry (PoE) and Quarantine

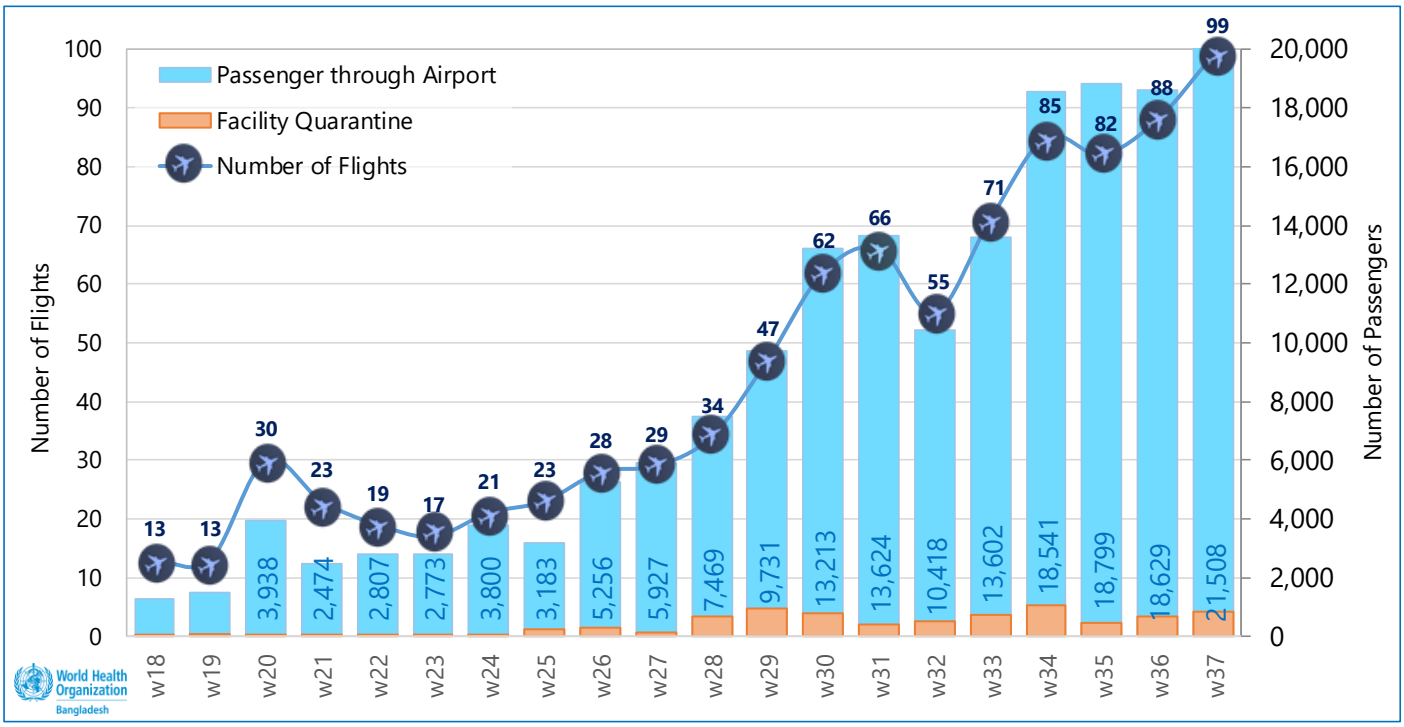
According to DGHS, as of 09 September 2020, the current institutional quarantine capacity in the country is represented by **629** centres across the 64 districts, which can receive **31,991** persons. A total of **32,420** individuals were placed in quarantine facilities and of them **27,620** (85.2%) have been already released. Over the same period, total of **77,209** individuals were isolated in designated health facilitates and of them **59,362** (**76.9%**) have been released.

***The figure below is showing the number of individuals were in quarantine and hospital isolation, 03 May – 14 September 2020, Bangladesh.***



In the reported week (epidemiological week 37), the number of international flights has increased by **12.5%**, in comparison to the previous week (**99** and **88** respectively) while the number of passengers increased by **15.5%** (**21,508** and **18,629** respectively). In the reported week **843** individuals were sent to Institutional Quarantine after passenger screening at the Hazrat Shahjalal International Airport (HSIA).

***The figure below is showing the weekly incoming international flights and number arrived of passengers, 27 April – 14 September 2020, Bangladesh.***




A regular meeting of the Crisis Management Team (CMT) of Hazrat Shahjalal Int'l Airport (HSIA) held on 09 September 2020. Director HSIA presided over the meeting while participants were from the Airport Authority, Civil Aviation Authority, Airlines Authority, Ministry of Expatriates' Welfare and Overseas Employment, Armed Police Battalion, Fire Department, CDC-DGHS, IOM and WHO. Two SOPs were published by CDC-DGHS titled 'SOP for the screening of COVID-19 at the Points of Entries (PoEs)' and 'SOP for suspected COVID-19 case in the Aircraft'. The SOPs were inaugurated by the Director HSIA and training on the SOPs are on going.

## 4. Case Management and Infection Prevention & Control

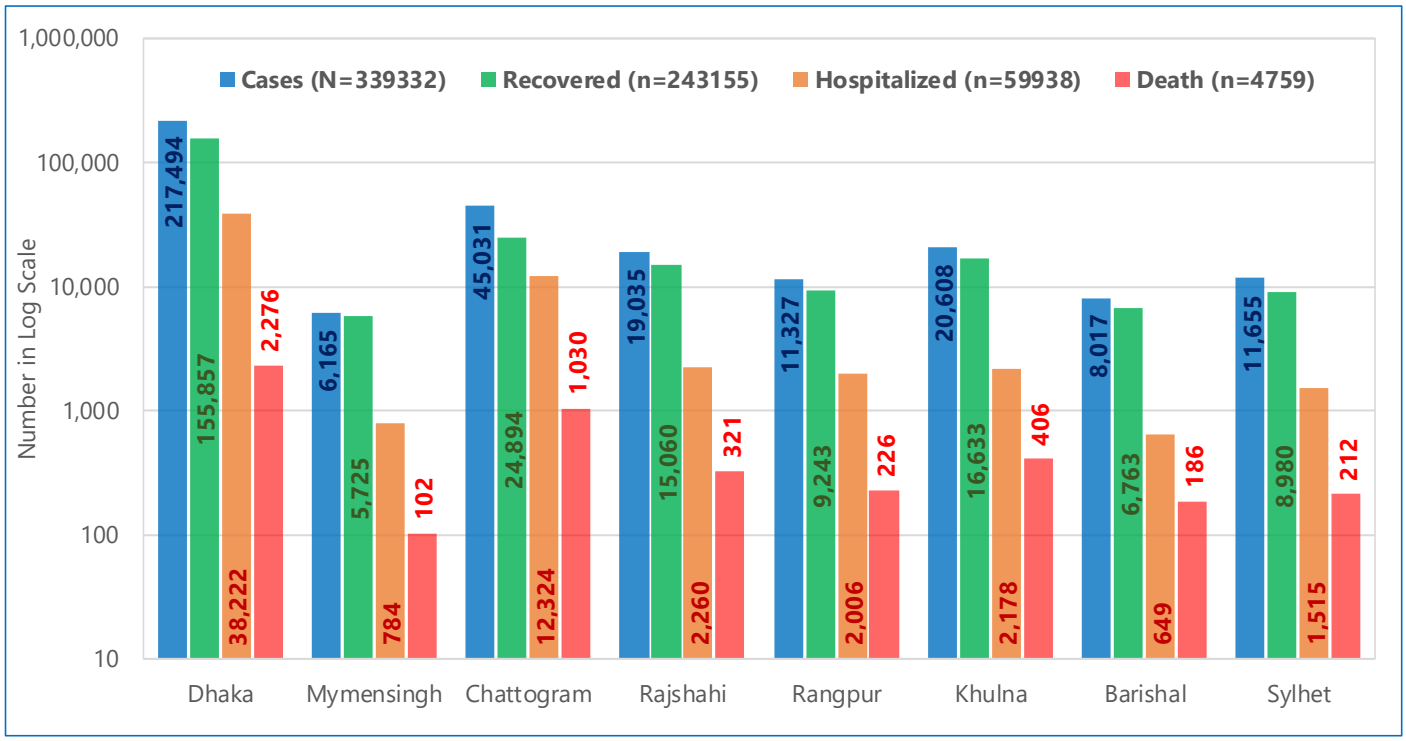
WHO IPC and case management team has been joined by an international expert of IPC and case management and was introduced with case management lead of government counterpart on 13 September. The international expert is going to visit and review the status of IPC and case management in some hospital and will provide advocacy for improvement.

The final report on health facilities assessment conducted by different partners has been officially endorsed by Director hospital, Directorate General of Health Services (DGHS) on 13 September. The details findings were presented, and it was emphasized that all partners should work in coordinated way in supporting government to meet the priority need in tackling COVID-19.

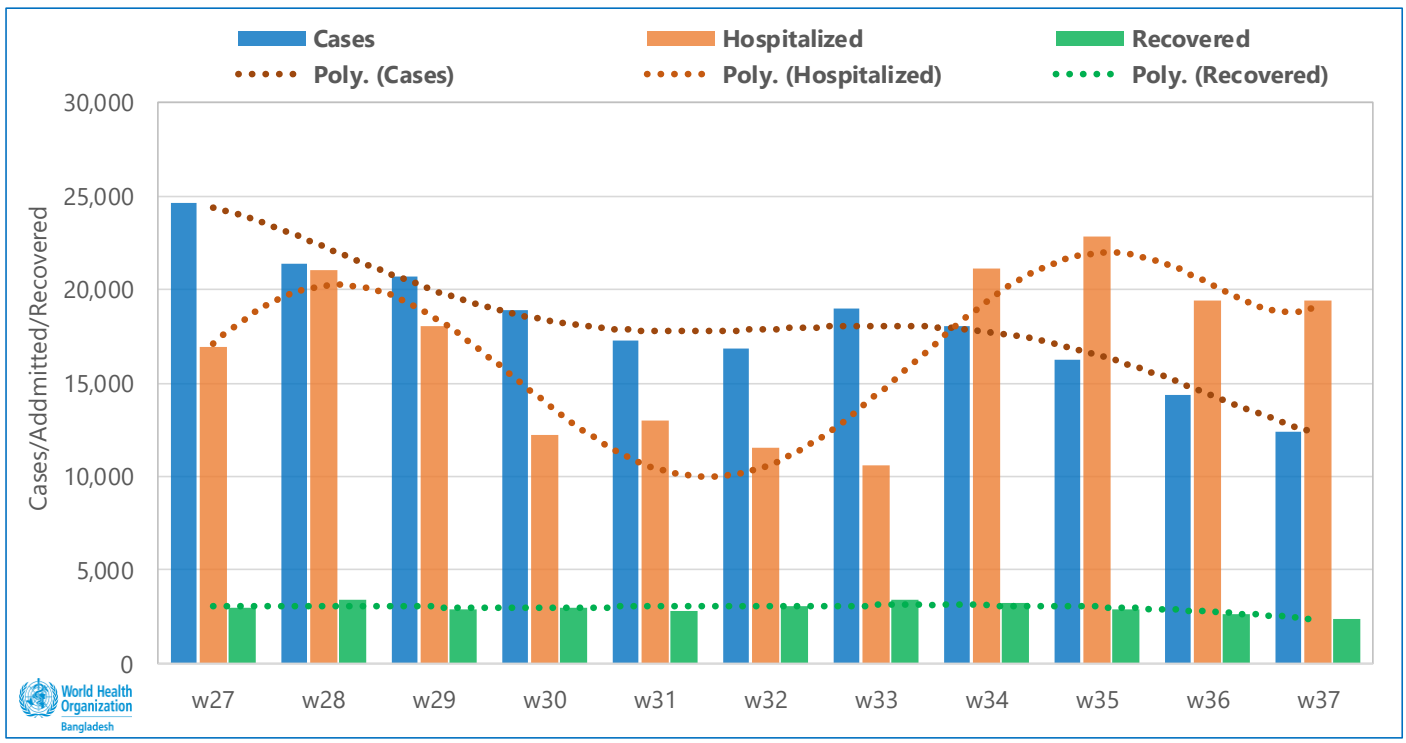
From DGHS, a request for **500** ICU ventilator, **100** BIPAP and **1500** units of High Flow Nasal Cannula is under active consideration by WHO. WHO has informed, director hospital for availability of dexamethasone tablet and injection available in Global stockpile (Dubai) for critical patients. WHO has already provided **200** oxygen concentrators in **17** district hospitals. WHO has started facilities orientation on infection prevention programme for health managers of DGHS and other facilities in Dhaka city. A consultation is in progress for development of training manual for IPC, triage for community health care provider (CHCP) with the support of WHO.

According to DGHS, as of 07 September 2020, there are **14,275** general beds of which **43%** (6,107) in Dhaka city and **547** ICU of which **56%** (307) in Dhaka city dedicated for COVID-19 treatment. Presently **22.4**% general beds and **54**% ICU all over the country are occupied.

***The figure below is showing geographical comparison of Cases, Hospitalized cases, Recovered cases and Deaths, 08 March – 14 September 2020, Bangladesh.***




***The figure below is showing temporal comparison of Cases, Hospitalized cases and Recovered cases, 08 March – 14 September 2020, Bangladesh.***



## 5. Risk Communication and Public Awareness

Risk Communication and Community Engagement (RCCE) partners under DGHS and UNICEF's coordination continue the scaled up dissemination of information and communication materials on protection measures as well as various other areas impacted by COVID-19 such as mental health, noncommunicable diseases, gender based violence etc. At sub-national level intensive work is conducted with the support of large variety of organizations, including NGO network partners from START network and Bangladesh Community Radio Association (BCRA).

In addition to the dissemination of information through a large variety of channels, RCCE partners are strengthening the monitoring and evaluation mechanisms in order to have a proper understanding of the efficiency and efficacy of the public information campaigns. In this regards, several surveys are planned or currently implemented, either online through social media or various partners platforms, either offline conducted by volunteers or SMS based evaluations.

RCCE pillar continues the close collaboration with Community Support Teams (CST), an initiative of humanitarian and development partners rolled out at field level aimed to slow COVID-19 spread in the community. CSTs activities have been expanded in Dhaka North City Corporation, with the prospect of further expanding the services in other areas. CSTs are working with communities for informing and increasing population awareness of the COVID-19 in order to increase compliance with quarantine/isolation of confirmed cases and persons with symptoms. Furthermore CSTs are intensively working to reduce burden on the healthcare system by supporting home-based treatment and management of mild to moderate cases through telemedicine and medication support of low income households.

## 6. Useful links for more information

- WHO Bangladesh COVID-19 Situation Reports: *https://www.who.int/bangladesh/emergencies/coronavirus-disease-(covid-19)-update/coronavirus-disease-(covid-2019)-bangladesh-situation-reports*
- COVID-19 Situation in the WHO South-East Asia Region: *https://experience.arcgis.com/experience/56d2642cb379485ebf78371e744b8c6a*
- WHO global Weekly Epidemiological Update and Weekly Operational Update: *https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports*
- WHO Bangladesh awareness and risk communication materials in Bengali: *https://www.who.int/bangladesh/emergencies/coronavirus-disease-(covid-19)-update*
- COVID-19 WHO Online *Training modules: https://openwho.org/channels/covid-19*
- COVID-19 updates from the Directorate General of Health Services, Ministry of Health and Family Welfare, Government of The People's Republic of Bangladesh: *https://dghs.gov.bd/index.php/en/component/content/article?id=5393*
- Institute of Epidemiology, Disease Control and Research (IEDCR): *https://iedcr.gov.bd/covid-19/covid-19-situation-updates*

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