Global overview
Data as of 28 August 2022

Globally, the number of new weekly cases decreased by 16% during the week of 22 to 28 August 2022, as compared to the previous week, with over 4.5 million new cases reported (Figure 1, Table 1). The number of new weekly deaths decreased by 13%, as compared to the previous week, with over 13 500 fatalities reported. As of 28 August 2022, over 598 million confirmed cases and over 6.4 million deaths have been reported globally.

At the regional level, the number of newly reported weekly cases decreased across all six regions: the Eastern Mediterranean Region (-37%), the European Region (-20%), the South-East Asia Region (-16%), the Western Pacific Region (-15%), the African Region (-13%) and the Region of the Americas (-13%). The number of new weekly deaths decreased across four of the six regions: the African Region (-64%), the Eastern Mediterranean Region (-35%), the European Region (-30%), and the Region of the Americas (-9%); while it increased in the South-East Asian Region (+15%) and remained stable in the Western Pacific Region (+3%).

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 28 August 2022**

**See Annex 1: Data, table, and figure notes
At the country level, the highest numbers of new weekly cases were reported from Japan (1 258 772 new cases; -15%), the Republic of Korea (743 487 new cases; -16%), the United States of America (576 437 new cases; -10%), the Russian Federation (288 580 new cases; +23%) and Germany (206 860 new cases; -22%). The highest numbers of new weekly deaths were reported from the United States of America (2818 new deaths; -6%), Japan (1990 new deaths; +23%), Brazil (1039 new deaths; -6%), Italy (647 new deaths; -4%) and the Republic of Korea (525 new deaths; +25%).

Current trends in reported COVID-19 cases and deaths should be interpreted with caution as several countries have been progressively changing COVID-19 testing strategies, resulting in lower overall numbers of tests performed and consequently lower numbers of cases detected. Additionally, data from countries are continuously updated by WHO to incorporate changes in reported COVID-19 cases and deaths made by countries retrospectively.

Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 28 August 2022**

<table>
<thead>
<tr>
<th>WHO Region</th>
<th>New cases in last 7 days (%)</th>
<th>Change in new cases in last 7 days *</th>
<th>Cumulative cases (%)</th>
<th>New deaths in last 7 days (%)</th>
<th>Change in new deaths in last 7 days *</th>
<th>Cumulative deaths (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Pacific</td>
<td>2 390 216 (52%)</td>
<td>-15%</td>
<td>83 039 297 (14%)</td>
<td>3 547 (26%)</td>
<td>3%</td>
<td>258 188 (4%)</td>
</tr>
<tr>
<td>Europe</td>
<td>1 117 601 (24%)</td>
<td>-20%</td>
<td>247 381 780 (41%)</td>
<td>3 425 (25%)</td>
<td>-30%</td>
<td>2 074 258 (32%)</td>
</tr>
<tr>
<td>Americas</td>
<td>907 084 (20%)</td>
<td>-13%</td>
<td>175 391 153 (29%)</td>
<td>5 336 (39%)</td>
<td>-9%</td>
<td>2 815 191 (44%)</td>
</tr>
<tr>
<td>South-East Asia</td>
<td>115 936 (3%)</td>
<td>-16%</td>
<td>59 962 802 (10%)</td>
<td>792 (6%)</td>
<td>15%</td>
<td>795 389 (12%)</td>
</tr>
<tr>
<td>Eastern Mediterranean</td>
<td>47 375 (1%)</td>
<td>-37%</td>
<td>22 960 506 (4%)</td>
<td>405 (3%)</td>
<td>-35%</td>
<td>347 299 (5%)</td>
</tr>
<tr>
<td>Africa</td>
<td>10 320 (&lt;1%)</td>
<td>-13%</td>
<td>9 281 437 (2%)</td>
<td>36 (&lt;1%)</td>
<td>-64%</td>
<td>174 281 (3%)</td>
</tr>
<tr>
<td>Global</td>
<td>4 588 532 (100%)</td>
<td>-16%</td>
<td>598 017 739 (100%)</td>
<td>13 541 (100%)</td>
<td>-13%</td>
<td>6 464 619 (100%)</td>
</tr>
</tbody>
</table>

*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior. Data from previous weeks are updated continuously with adjustments received from countries.

**See Annex 1: Data, table, and figure notes

For the latest data and other updates on COVID-19, please see:

- WHO COVID-19 Dashboard
- WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update
- WHO COVID-19 detailed surveillance data dashboard
Figure 2. COVID-19 cases per 100,000 population reported by countries, territories and areas, 22 - 28 August 2022*

**See Annex 1: Data, table, and figure notes**
Figure 3. COVID-19 deaths per 100,000 population reported by countries, territories and areas, 22 - 28 August 2022**

**See Annex 1: Data, table, and figure notes**
Special Focus: Update on SARS-CoV-2 variants of interest and variants of concern

Geographic spread and prevalence of VOCs

Globally, from 29 July to 29 August 2022, 138 779 SARS-CoV-2 sequences were shared through GISAID. Among these, 138 236 sequences were the Omicron variant of concern (VOC), accounting for 99.6% of sequences reported globally in the past 30 days.

A comparison of sequences submitted to GISAID in epidemiological week 33 (14 to 20 August 2022) and week 32 (7 to 13 August 2022) shows that BA.5 Omicron descendent lineages continue to be dominant globally, with an increase in weekly prevalence from 72.4% to 78.2%. The prevalence of BA.2 descendent lineages (BA.2.X) remained stable in week 33 compared to week 32 (2.7% in both weeks). BA.2.75, an Omicron descendent lineage under monitoring, still shows a relatively low prevalence globally, but a number of countries have observed recent increasing trends.

WHO continues to monitor all lineages, including descendent lineages of VOCs, to track any increase in prevalence and change in viral characteristics. The current trends describing the circulation of Omicron descendent lineages should be interpreted with due consideration of the limitations of the SARS-CoV-2 surveillance systems. These include differences in sequencing capacity and sampling strategies between countries, changes in sampling strategies, reductions in tests conducted and sequences shared by countries around the world and delays in uploading sequence data to GISAID.

For more information on the assessment of SARS-CoV-2 variants and the WHO classification refer to Annex 2.

Additional resources
- Tracking SARS-CoV-2 Variants
- COVID-19 new variants: Knowledge gaps and research
- Genomic sequencing of SARS-CoV-2: a guide to implementation for maximum impact on public health
- Considerations for implementing and adjusting public health and social measures in the context of COVID-19
- VIEW-hub: repository for the most relevant and recent vaccine data
WHO regional overviews:
Epidemiological week 22 - 28 August 2022**

African Region

The African Region reported over 10 000 new weekly cases, a 13% decrease compared to the previous week. Six (12%) countries reported increases in the number of new cases of 20% or greater, with some of the greatest proportional increases seen in Mali (55 vs 15 new cases; +267%), Chad (33 vs 14 new cases; +136%) and Niger (127 vs 55 new cases; +131%). The highest numbers of new cases were reported from Réunion (5711 new cases; 637.9 new cases per 100 000 population; +12%), South Africa (1480 new cases; 2.5 new cases per 100 000; -5%) and Nigeria (495 new cases; <1 new case per 100 000; +26%).

The number of new weekly deaths in the Region decreased by 64% as compared to the previous week, with 36 deaths reported. The highest numbers of new deaths were reported from South Africa (18 new deaths; <1 new death per 100 000 population; -79%), Réunion (six new deaths; <1 new death per 100 000; +200%) and the Democratic Republic of the Congo (four new deaths; <1 new death per 100 000; +33%).

Updates from the African Region

Region of the Americas

The Region of the Americas reported over 907 000 new cases, a 13% decrease as compared to the previous week. Five of 56 (9%) countries for which data are available reported increases in the number of new cases of 20% or greater, with the greatest proportional increases observed in Honduras (3948 vs 2130 new cases; +85%), Saint Barthélemy (32 vs 23 new cases; +39%) and Ecuador (6288 vs 4644 new cases; +35%). The highest numbers of new cases were reported from the United States of America (576 437 new cases; 174.1 new cases per 100 000; -10%), Brazil (104 672 new cases; 49.2 new cases per 100 000; -10%) and Chile (54 867 new cases; 287.0 new cases per 100 000; -13%).

The number of new weekly deaths reported in the Region decreased by 9% as compared to the previous week, with over 5300 deaths reported. The highest numbers of new deaths were reported from the United States of America (2818 new deaths; <1 new death per 100 000; -6%), Brazil (1039 new deaths; <1 new death per 100 000; -6%) and Canada (292 new deaths; <1 new death per 100 000; similar to the previous week).

Updates from the Region of the Americas
Eastern Mediterranean Region

The Eastern Mediterranean Region reported over 47,000 new cases, a 37% decrease as compared to the previous week. One (5%) country reported an increase in the number of new cases of 20% or greater: the occupied Palestinian territory (3355 vs 937 new cases; +258%). The highest numbers of new cases were reported from the Islamic Republic of Iran (15,605 new cases; 18.6 new cases per 100,000; -55%), Jordan (4832 new cases; 47.4 new cases per 100,000; -19%) and Lebanon (4469 new cases; 65.5 new cases per 100,000; -41%).

The number of new weekly deaths decreased in the Region by 35% compared to the previous week, with over 4,000 new deaths reported. The highest numbers of new deaths were reported from the Islamic Republic of Iran (280 new deaths; <1 new death per 100,000; -41%), Tunisia (24 new deaths; <1 new death per 100,000; -57%) and Pakistan (21 new deaths; <1 new death per 100,000; -22%).

Updates from the Eastern Mediterranean Region

European Region

The European Region reported over 1.1 million new cases, a 20% decrease as compared to the previous week. Two (3%) countries in the Region reported increases in new cases of 20% or greater, with the highest proportional increases observed in Ukraine (9113 vs 5439 new cases; +68%) and the Russian Federation (288,580 vs 235,385 new cases; +23%). The highest numbers of new cases were reported from the Russian Federation (288,580 new cases; 197.7 new cases per 100,000; +23%), Germany (206,860 new cases; 248.7 new cases per 100,000; -22%) and Italy (157,864 new cases; 264.7 new cases per 100,000; +5%).

Over 3,400 new weekly deaths were reported in the Region, a 30% decrease as compared to the previous week. The highest numbers of new deaths were reported from Italy (647 new deaths; 1.1 new deaths per 100,000; -4%), the Russian Federation (523 new deaths; <1 new death per 100,000; +20%) and Spain (326 new deaths; <1 new death per 100,000; -29%).

Updates from the European Region
South-East Asia Region

The South-East Asia Region reported under 116,000 new cases, a 16% decrease as compared to the previous week. Three of the 10 countries (30%) for which data are available showed an increase in the number of new cases of 20% or greater: Bhutan (178 vs 119 new cases; +50%), Timor-Leste (44 vs 33 new cases; +33%) and Bangladesh (1347 vs 1100 new cases; +22%). The highest numbers of new cases were reported from India (68,703 new cases; 5.0 new cases per 100,000; -20%), Indonesia (30,747 new cases; 11.2 new cases per 100,000; -6%) and Thailand (12,232 new cases; 17.5 new cases per 100,000; -11%).

The Region reported just under 800 deaths, a 15% increase compared to the previous week. The highest numbers of new deaths were reported from India (422 new deaths; <1 new death per 100,000; +43%), Thailand (195 new deaths; <1 new death per 100,000; -2%) and Indonesia (123 new deaths; <1 new deaths per 100,000; -19%).

Updates from the South-East Asia Region

Western Pacific Region

The Western Pacific Region reported just under 2.4 million new cases, a 15% decrease compared to the previous week. Two (6%) countries reported increases in new cases of 20% or greater, with the largest proportional increases observed in Palau (69 vs 33 new cases; +109%) and Tonga (1100 vs 730 new cases, +51%). The highest numbers of new cases were reported from Japan (1,258,772 new cases; 995.3 new cases per 100,000; -15%), the Republic of Korea (743,487 new cases; 1450.2 new cases per 100,000; -16%) and China (194,464 new cases; 13.2 new cases per 100,000; +13%).

The Region reported a similar number of deaths as the previous week, with over 3500 new weekly deaths reported. The highest numbers of new deaths were reported from Japan (1990 new deaths; 1.6 new deaths per 100,000; +23%), the Republic of Korea (525 new deaths; 1.0 new death per 100,000; +25%) and Australia (419 new deaths; 1.6 new deaths per 100,000; -14%).

Updates from the Western Pacific Region
Summary of Monthly Operational Update

The Monthly Operational Update is a report provided by the COVID-19 Strategic Preparedness and Response Plan (SPRP) monitoring and evaluation team which aims to update on the ongoing global progress against the COVID-19 SPRP 2021 framework. In this edition, highlights of country-level actions and WHO support to countries include:

- WHO/Europe supports Kazakhstan’s national laboratory working group to develop national laboratory policy and strategic plans to address COVID-19 lessons learned
- Liberia’s Grand Bassa county hits 71% COVID-19 vaccination coverage against its total population
- Nepal launches the COVID-19 vaccination campaign for children
- Social listening leads to more impactful communication and a stronger COVID-19 response in Fiji
- Building emergency care capacities through training: scaling up Afghanistan’s delivery of essential health services and health system resilience during the pandemic and beyond
- The Bahamas receives the first pediatric COVID-19 vaccines through the COVAX Facility
- Palau establishes its national emergency medical team
- Increasing COVID-19 vaccination coverage in Togo in 2021 through community dialogue and traditional leaders
- Téchne’s International Multidisciplinary Summer School on “Systemic Design for Health”: responding to needs identified during the COVID-19 pandemic and beyond
- Building a community of learning for women leaders in health emergencies among WHO staff and Member States
- Leveraging lessons learned and systems from previous epidemics, Uganda builds up its response capacities to scale up COVID-19 testing and surveillance while maintaining essential health services
- WHO develops a method to deliver actionable infodemic insights and recommendations as part of the COVID-19 pandemic response
- Leaving no one behind: How OpenWHO.org ensures equity in health information delivery for people living with disabilities
- WHO’s COVID-19 Response Funding in 2022: Delivering science, solutions and solidarity to end the acute phase of the pandemic
- Updated WHO guidance and publications
Annex 1. Data, table, and figure notes

Data presented are based on official laboratory-confirmed COVID-19 cases and deaths reported to WHO by country/territories/areas, largely based upon WHO case definitions and surveillance guidance. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change, and caution must be taken when interpreting these data as several factors influence the counts presented, with variable underestimation of true case and death incidences, and variable delays to reflecting these data at the global level. Case detection, inclusion criteria, testing strategies, reporting practices, and data cut-off and lag times differ between countries/territories/areas. A small number of countries/territories/areas report combined probable and laboratory-confirmed cases. Differences are to be expected between information products published by WHO, national public health authorities, and other sources.

A record of historic data adjustment made is available upon request by emailing epi-data-support@who.int. Please specify the countries of interest, time period, and purpose of the request/intended usage. Prior situation reports will not be edited; see covid19.who.int for the most up-to-date data. COVID-19 confirmed cases and deaths reported in the last seven days by countries, territories, and areas, and WHO Region (reported in previous issues) are now available at: https://covid19.who.int/table.

‘Countries’ may refer to countries, territories, areas or other jurisdictions of similar status. The designations employed, and the presentation of these materials do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. Countries, territories, and areas are arranged under the administering WHO region. The mention of specific companies or of certain manufacturers’ products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions except, the names of proprietary products are distinguished by initial capital letters.

[1] All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999). In the map, the number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes.


Updates on the COVID-19 outbreak in the Democratic People’s Republic of Korea is not included in this report as the number of laboratory-confirmed COVID-19 cases is not reported.
Annex 2. SARS-CoV-2 variants assessment and classification

WHO, in collaboration with national authorities, institutions and researchers, routinely assesses if variants of SARS-CoV-2 alter transmission or disease characteristics, or impact the effectiveness of vaccines, therapeutics, diagnostics or public health and social measures (PHSM) applied to control disease spread. Potential variants of concern (VOCs), variants of interest (VOIs) or variants under monitoring (VUMs) are regularly assessed based on the risk posed to global public health.

The classifications of variants will be revised as needed to reflect the continuous evolution of circulating variants and their changing epidemiology. Criteria for variant classification, and the lists of currently circulating and previously circulating VOCs, VOIs and VUMs, are available on the WHO Tracking SARS-CoV-2 variants website. National authorities may choose to designate other variants and are strongly encouraged to investigate and report newly emerging variants and their impact.