



Viet Nam COVID-19 Situation Report #29

7 February 2021

Report as of 7 February 2021, 18:00

Situation Summary

Highlights of Current Situation Report

- New community outbreaks initiated from Hai Duong and Quang Ninh provinces on 25 Jan after 57 days since the last locally transmitted case reported – **fast and vigorous response ongoing**.
- **From 25 Jan to 7 Feb, 418 locally transmitted cases** have been reported from twelve **(12) cities/ provinces** across the country (with three additional provinces in past 7 days). These include: Hai Duong (309); Quang Ninh (47), Ha Noi (23), Gia Lai (19), Binh Duong (6), Bac Ninh (4), Dien Bien (3), Hoa Binh (2), HCMC (2), Hai Phong (1), Bac Giang (1), and Ha Giang (1). See *Figures 1 and 2* for Epi curve of the current outbreak and case distribution by province.
- So far, **most of the cases are linked with the outbreaks in Hai Duong** (POYUN company in Chi Linh city) **and Quang Ninh** (Van Don international airport). However, **there are cases with unknown or unclear epidemiological links in Hai Duong, Gia Lai and HCMC. Investigation is ongoing**.
- **Majority of the cases either asymptomatic or mild symptoms (99%)**, there are three severe cases that require oxygen supplement.
- **Outbreak in Quang Ninh has basically been brought under control** (according to the statement from Health Minister on 7 Feb at the meeting with Quang Ninh local health authorities). All the cases reported are either linked with Van Don international airport or POYUN company. All cases reported in past 7 days were already in quarantine thus the risk further community spread is minimal.
- **New guidelines on mask wearing in public places were released** by the government. Messages on preventive measures such as wearing of mask and physical distancing have been reinforced using infographics and audio-visual materials. Social media ads (e.g., Facebook) have been re-activated and cover the whole country.
- In the last meeting of the National Steering Committee on 5 Feb, **MOH announced three changes in the outbreak response strategy** which included: i) Pool sampling; ii) Quarantine guidelines for under 5 years old children; and iii) Maintaining the flow of goods in the COVID-19 context.
- The **MOH is considering amending the quarantine period back to a 14-day duration** given the latest scientific evidence on the new variants.

Other ongoing response includes:

- Right after receiving a **notification from Japan on 25 Jan of the case from Viet Nam** –detected upon arrival in Osaka – with the **same variant found in the UK**, the Government has been taking **vigorous actions**. **All public health measures** being implemented this time are one-level higher (i.e. taking no-risk approach).
- Fast and vigorous- whole system activated on 27 night: NSC met, VC meetings with 2 provinces
- Deputy Prime Minister, Chairman of NSC, ordered Hai Duong Province to stay focused to stamp out the outbreak within ten days, emphasizing that **every minute counts**.
- Rapid case investigation with fast, thorough contact tracing (up to F3 & F4 of two index cases)
- Sent national expert teams to Hai Duong, Quang Ninh, Dien Bien, Gia Lai to support local response.
- A series of Government directions released, such as MOH telegrams, Prime Minister's Directive No.05; also at subnational levels.
- Centralized quarantine and community lockdown require 21 days instead of the previous practice of 14 days
- Targeted community lockdown based on outbreak situation and risk assessment
- Reactivated technical teams at central level (contact tracing, information & rapid response, communication) to coordinate and support local response

- Reactivated/ strengthened community COVID teams at all levels
- Enhancing surveillance and testing, even up to F3 contacts in hotspots, test all presented with fever and cough
 - ✓ Mass testing approach is being followed using different strategies including targeted testing of higher risk groups as well as random testing of households and inpatients. Wide testing is aiming at active and early identification of possible cases. Testing capacity may be increased with guidance issued on pooling of lower risk specimens.
 - ✓ Full genome sequencing of the initial cases is was conducted. NIHE reported the result of samples of Hai Duong COVID-19 cases, as SARS-CoV-2 B.1.17 variants. Hospital of Tropical Diseases (HTD) in HCMC also reported the result of a case whole travelled from Hai Duong to HCMC as SARS-CoV-2 B.1.17 variants. Enhancing surveillance and testing – more than 167,000 samples have been collected for testing in the affected provinces. An onsite laboratory in Hai Duong has been established with initial capacity of testing of about 5,000 tests per day and can be increased as needed.
- Established 3 field hospitals in Hai Duong, 1 in Quang Ninh, 1 in Dien Bien, ready to cater for increased number of cases.
- Timely and transparent communication and risk communication activities.

Update from past 7 days:

- From the last report (31 Jan), from 1 – 7 Feb 2021, 182 new laboratory-confirmed cases of COVID-19 have been reported (decrease 32.8% compared to last week); of those 97.8% were locally transmitted cases, and without any additional deaths. There were four imported cases during the week.
- During the week, number of RT-PCR conducted daily was approximately 20,000 tests, bringing total number of tests conducted to 1,668,228 since the beginning of the outbreak.
- As of 7 Feb 2021, Viet Nam has reported a total of **2,001 laboratory confirmed cases** of COVID-19, including 37 health care workers (HCWs), from 47 out of 63 cities/ provinces in country, including **35 deaths** (PFC \approx 1.7%) (see *Figure 4*). All the 35 death cases were related to the community outbreak in Da Nang (31 from Da Nang, 3 from Quang Nam and 1 from Quang Tri); most of them had long-term chronic diseases and comorbidities.
 - Of the 2,001 cases, 922 cases (46.1%) are imported. About 92% are Vietnamese (see *Figure 3*).
 - The ages of cases range from 2 months to 100 years old. About 59.8% of all cases are in the 30-69 years old group, 3.4% above 70 years old, and the remaining 36.8% under 30 years old. The proportion of male vs female is around 52% vs 48%. (See *Table 1*).
 - 179 clusters have been recorded including from households, schools, workplaces, bus/train stations and 21 clusters are currently active which are relate to the ongoing community outbreaks in 12 cities/ provinces.
- **Government direction and guidance:**
 - 7 Feb: MOH issued guidelines for transportation of goods in the COVID-19 outbreak context in which drivers are requested to make the list of contact people, to apply preventive measures such as wearing face mask, hand hygiene; and their sample will be collected and tested 2 times (before and after traveling to outbreak areas) for SARS-CoV-2.
 - 7 Feb: MOH issued guidelines for quarantine of children under 15 years old. Children under 5 yo to be quarantined at home with strict supervision from adults, children 5-15 yo to be centralized quarantined for first 7 days, and require three negative tests with SARS-CoV-2 to be continued with home-quarantine up to 14 days.
 - 6 Feb –MOH issued a decision to guide face mask wearing in public places
 - 5 Feb - the Office of Government issued an urgent letter to all provincial/city people's committee and MOH on application of travel restriction in some provinces requesting implementation of appropriate prevention and response measures based on risk assessment; all lockdown and social distancing measures to be operated with appropriate scale to avoid negative impact on people' life and business continuation; and application of centralized and home quarantine based on the MOH's guidelines.

○ **Key NPIs**

- Community lockdown and social distancing: Lockdown residence areas of the reported COVID-19 cases in Ha Noi, Gia Lai, HCMC, Dien Bien, Ha Giang, Bac Ninh and Binh Duong.
- Travel restriction:
 - ✓ From 12:00 6 Feb: buses can re-operate in Quang Ninh province, except those going to and from Dong Trieu and Van Dong districts, and Hai Duong province.
 - ✓ As 5 Feb: 12 provinces/cities of Ha Giang, Hai Phong, Thai Binh, HCMC, Thua Thien Hue, Nghe An, Thanh Hoa, Nghe An, Ha Tinh, Quang Nam, Can Tho and An Giang applied centralized quarantine for 21 days and health declaration for people coming from outbreak areas (as information from MOH), even all people from Hai Duong and Quang Ninh. Six provinces Dien Bien, Phu Tho, Yen Bai, Ha Nam, Thai Nguyen and Nam Dinh applied home quarantine and/or health declaration for people coming from outbreak areas.
- School closure: As 2 Feb, 28 provinces closes school for Tet holiday (a week earlier than plan)
- Suspension mass gatherings and festival national wide

○ **Case management:**

- 1,472 cases (73.6%) have recovered. Three patients are in severe condition (in the current outbreak) and one in critical condition (imported cases previously reported) and under invasive mechanical ventilator (case #1536, a 79-yro-female who returned from the U.S. on 13 Jan, and having comorbidities including DM-2, hypertension, heart failure; being treated at Da Nang Lung hospital). Central treatment committee, including leading clinical experts conducted 2 virtual consultation meetings to provide support on treatment strategy for the critical patient.
- The remaining patients are being treated at Chi Linh DHC (172), Hospital of medical technology of Hai Duong (113); NHTD #2 (44); Field hospital #2 in Hai Duong (24); TB and Lung hospital in Gia Lai (18); Viet Nam – Sweden hospital of Uong Bi/ Quang Ninh (17); Ba Ria – Vung Tau general hospital (15); Cu Chi field hospital (14); Lung hospital in Da Nang (11); Cam Ranh regional general hospital (9); other hospitals have one to seven patients. Majority of the patients are asymptomatic (86%) and about 12.6% have mild symptoms.
- Two index cases (#1552 and #1553) are being treated at (NHTD #2). Case #1553 has a comorbidity (DM type 1) and has developed pneumonia with 20% lung damaged shown on chest X-ray; he is under oxygen supplement in ER and being closely monitored. Case #1552 also developed pneumonia and is being monitored at ER. As of 7 Feb, both cases have improved.
- Case # 1652, a two-month-old girl (case #1565's daughter), is the youngest patient in the current community outbreak related to Chi Linh/ Hai Duong outbreak spot.
- Other health sector response:
 - ✓ Two more field hospitals established: hospital # 3 in Hai Duong with max 300 beds. Total COVID-19 patient beds in Hai Duong is now 900 beds, with maximum capacity of 1200 beds.
 - ✓ Dien Bien has completed establishment of a field hospital of 300 beds, 30 ICU beds with sufficient medical equipment, including an ECMO system located in Health Center of Dien Bien Phu city with support from Bach Mai hospital.
 - ✓ The field hospital in Gia Lai is being established with support from Cho Ray hospital
 - ✓ MoH has mobilized clinical experts from Bach Mai, Da Nang, and Cho Ray hospitals to support for Gia Lai and Dien Bien
 - ✓ Sub-commitment on treatment of MoH has regularly hold VC to discuss on treatment and clinical management to field hospitals

○ **Numbers of quarantine:**

- A total of approximately 89,782 people are currently placed under quarantine. Of those 529 were quarantined in HCFs; 19,878 were centralized quarantined; and 69,374 were under self-/home quarantine.
- Cumulatively: from beginning of the outbreak to date, a total of 11 million people have been placed under quarantine.

○ **Risk communication**

- The public is provided with timely updates on the outbreak response using multi-media platforms, enhancing public participation and engagement. Public messaging of the Central Government urges local governments to remain vigilant and accelerate their responses.
- 6 Feb – The MOH guidance on mask wearing was officially issued by the government. Messages on preventive measures such as wearing of mask and physical distancing have been reinforced using infographics and audio-visual materials. Social media ads (e.g., Facebook) have been re-activated and cover the whole country.
- WHO continues to provide strategic communication support to MOH as needed. Some of the new materials focused on advice related to travelling and celebrating safely during the Tet holiday.
- Media monitoring and social listening continue and results feed into developing and reinforcing key messages: These are some highlights from the social listening:
 - ✓ Most people have welcomed the news that Viet Nam is among the first countries to receive COVID vaccines from COVAX.
 - ✓ There is a need to clarify messaging on travel restrictions for the Tet holiday as Viet Nam records more COVID cases and provinces apply travel restrictions.
 - ✓ Many people have stopped gathering in public places after new clusters were detected.

Other key updates (in past 7 days)

- **Through COVAX, Viet Nam will receive COVID-19 vaccine** (AstraZeneca vaccine manufactured by SK Bioscience) from minimum 4,886,400 doses to maximum 8,253,600 doses, of which 25-35% of the doses will be provided in the first quarter and the remaining doses will be provide in the second quarter of **2021**. WHO Viet Nam is working with MOH to develop the detailed National Vaccination Plan following WHO's priority criteria.
- **First COVID-19 vaccine approved for use in urgent situation in Viet Nam** - the Coronavirus vaccine developed by AstraZeneca and the University of Oxford. Astra Zeneca pledged to supply 30 million doses for Viet Nam which is expected to be available in the first quarter of this year.
- **30 Jan** – NIHE officially released the full genome sequencing result of case #1422, reported on 24 Dec 2020, who was confirmed to have been infected with the new mutated variant from South Africa. This case is a technical expert from South Africa coming to Viet Nam and was quarantined upon arrival.
- Full genome sequencing for initial cases of the current community outbreaks is still being conducted by both NIHE and NHTD, results are not available yet.
- **21 Jan** – Launching ceremony of the first phase of clinical trials of the second locally manufactured COVID-19 vaccine COVIVAC (by IVAC company) at the Hanoi Medical University (HMU). The first phase will be implemented at HMU with 120 volunteers to be recruited and divided into 5 groups. Three groups will receive a dose without adjuvants of 1, 3, and 10 mcg respectively; one group will receive a dose of 1mcg with adjuvants, and one group will receive placebo. Each volunteer will receive two doses of 28 days apart. It is expected that the first volunteer will receive trial vaccine in early Feb.
- **19 Jan** – The NSC issued a guidance on handover, management upon the completion of centralized quarantine. It guides local authorities on how to minimize the risk of infection during travel from the quarantine facility to home and guide people to self-monitor their health situation for additional 14 days at home/ residence.
- **15 Jan** – Deputy Prime Minister Vu Duc Dam directed at the NSC meeting that the policy of less than 14-day quarantine for incoming foreigners is no longer applied. Those coming from countries/territories that have reported new SARS-CoV-2 variants must be quarantined for more than 14 days; no quarantine fees at centralized facilities managed by Ministry of Defence for Vietnamese people who enter the country via ground crossings.

Upcoming Events and Priorities

- WHO continues supporting MOH in various technical areas, providing technical advice and scientific updates especially with relates to the mutated variants; supporting ongoing efforts on COVID-19 vaccine development and vaccine deployment and distribution plans, effective communication (e.g. reinforcement of preventive measures communications through social media such as reactivation of Facebook ads, produced social media cards on laboratory testing)
- A daily rapid report continues to be shared with WCO and RO
- This weekly external report follows the normal pattern of epidemiological week (i.e. from Mon to Sun)
- Working with VAMS to compile provincial request for PPE
- The WHE/WCO team has communicated with MOH for possible laboratory test kits support for equivalent of approximately 200,000 RT-PCR tests and exploring possibility of support for specimen collection kits.

National and subnational transmission Assessment

National level*

Stage 2 – Localized community transmission: the recent community outbreaks emerged after 57 days since the last locally transmitted case was reported. Between 25 Jan and 7 Feb, 418 cases have been reported from 12 cities/ provinces. So far, even though majority of cases were linked to the two initial outbreak spots in Hai Duong and Quang Ninh, there are cases with unknow or unclear epidemiological links especially in Hai Duong, HCMC and Gia Lai. To date, there are no clear signals of large-scale community transmission. However, the situation is being closely investigated and monitored, especially where no epi links have been identified among the cases. Yet it requires further information to conclude no further community transmission. Targeted lockdowns are being implemented in all affected communes/ areas. School closures, suspension of nonessential activities/ mass gatherings, social distancing are being applied based on local situation assessment. Given the vigorous response actions, fast and thorough contact tracings and mass testing being conducted in country, it is anticipated that more community cases will be reported in coming days. Meanwhile imported cases continue to be reported including among repatriated citizens coming back for Tet holidays. Risk of cases detected among illegal immigrants remains; also as resulted from non-adherence to testing/ quarantine procedures.

Sub-national level*

City/ province	No. of cases reported, as of 7 Feb 2021	Transmission Stage Assessment	Notes
Hai Duong	309	2	Mostly related to POYUN company (79%). Unknown/ unclear epi links cases in other 5 clusters. Source of infection for index case (#1552) still under investigation.
Quang Ninh	47	2	Basically, under control. All cases linked with POYUN company or Van Don airport. Source of infection for index case (#1553) remains unknown.
Ha Noi	23	1	All three clusters with known epi links. Transmission within 3 generations.
Gia Lai	19	1	One case with unknow epi links. Investigation ongoing.
Binh Duong	6	1	All cases linked with Hai Duong
Bac Ninh	4	1	No new cases reported in past 7 days
Dien Bien	3	1	No new cases reported in past 2 days
Hoa Binh	2	1	No new cases reported in past 7 days
HCMC	2	1	Unknown epi links in Tan Son Nhat airport staff case. More cases being detected related to this airport cluster. Investigation ongoing.
Hai Phong	1	1	No new cases reported in past 7 days
Bac Giang	1	1	No new cases reported in past 7 days
Ha Giang	1	1	No new cases reported in past 7 days
TOTAL	418		



***WHO Transmission Assessment criteria**

- **Stage 0 – No transmission:** No clear signals of transmission for at least 28 days.
- **Stage 1 – Imported transmission:** Recent transmission is imported from another sub-national or international area or is linked to such importation within 3 generations; no clear signals of locally acquired transmission.
- **Stage 2 – Localized community transmission:** recent locally acquired and localized to place(s), and there are no clear signals of large-scale community transmission.
- **Stage 3 – Large-scale community transmission:** recent transmission is locally acquired and not specific to place(s) or population sub-group(s). The risk of infection for most people in this area is high

Assessment done by WHO Viet Nam with concurrence from the Ministry of Health of Viet Nam.

Epidemiology

Epi Update COVID-19

Tests	Cases	Deaths	ICU Admissions
138,577	182	0	0
NAT Tests past 7 days (+247.7% 7-day)	New cases past 7days (-32.8% 7-day)	Deaths past 7days (-% 7-day)	ICU Admissions past 7days (+0 case 7-day)
1,668,228	2,001	35	58 (TBC)
Cumulative NAT Tests	Cumulative Cases	Cumulative Deaths	Cumulative ICU Admissions

14.2%	487	21	0
Imported Cases in past 28 days (69)	Cases in past 28 days with no link (68)	Active Clusters	Active clusters with >3 generations

Health Service Provision COVID-19

Most of national hospital staff	0	182	251	0
Health care workers trained in COVID19 Case Management	Healthcare worker cases reported past week	Hospitals admitting COVID-19 patients past week	ICU beds for COVID-19 patients (out of approx. 3,500 beds nationwide)	Non-ICU Hospital beds for COVID-19 patients (Six field hospitals established: 3 in Hai Duong, 1 each in Quang Ninh, Dien Bien, Gia Lai)

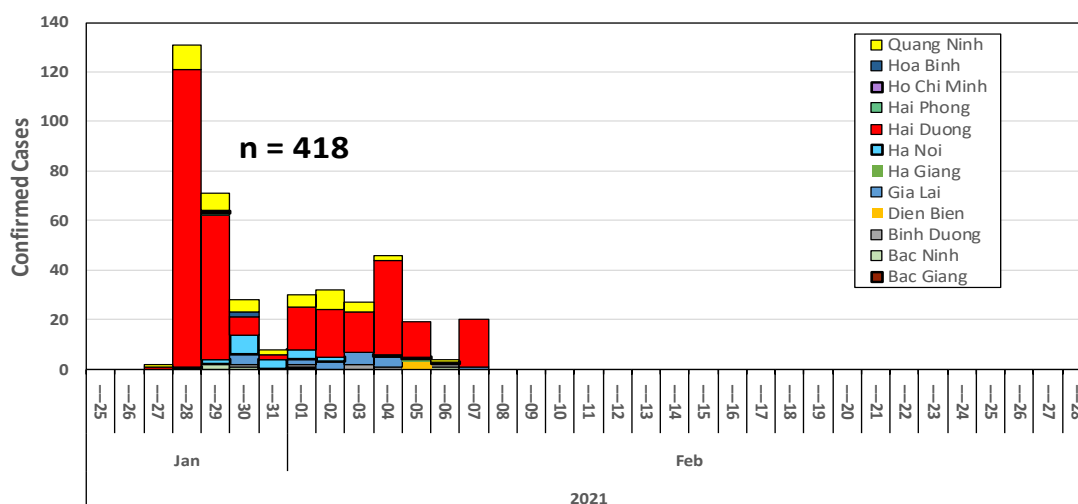


Figure 1. Epidemic curve of COVID-19 laboratory confirmed cases by date of reporting, current outbreak, Viet Nam, as of 7 Feb 2021

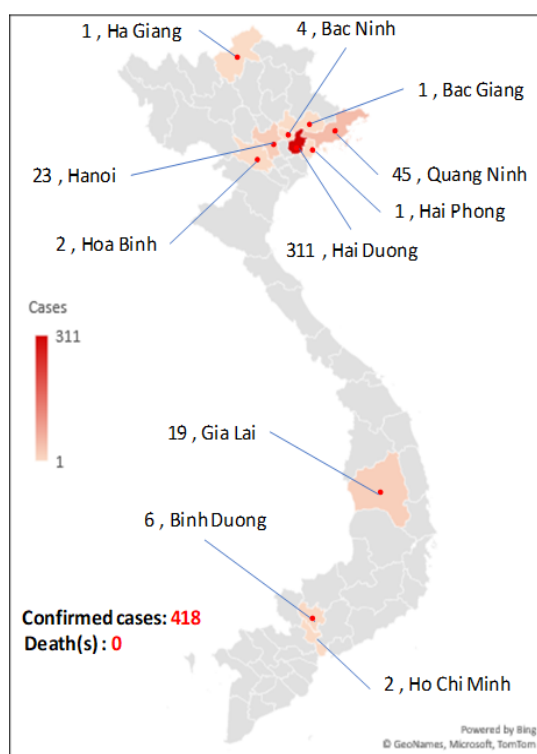


Figure 2. Distribution of COVID-19 laboratory confirmed cases by place of detection, current outbreak, Viet Nam, as of 7 Feb 2021

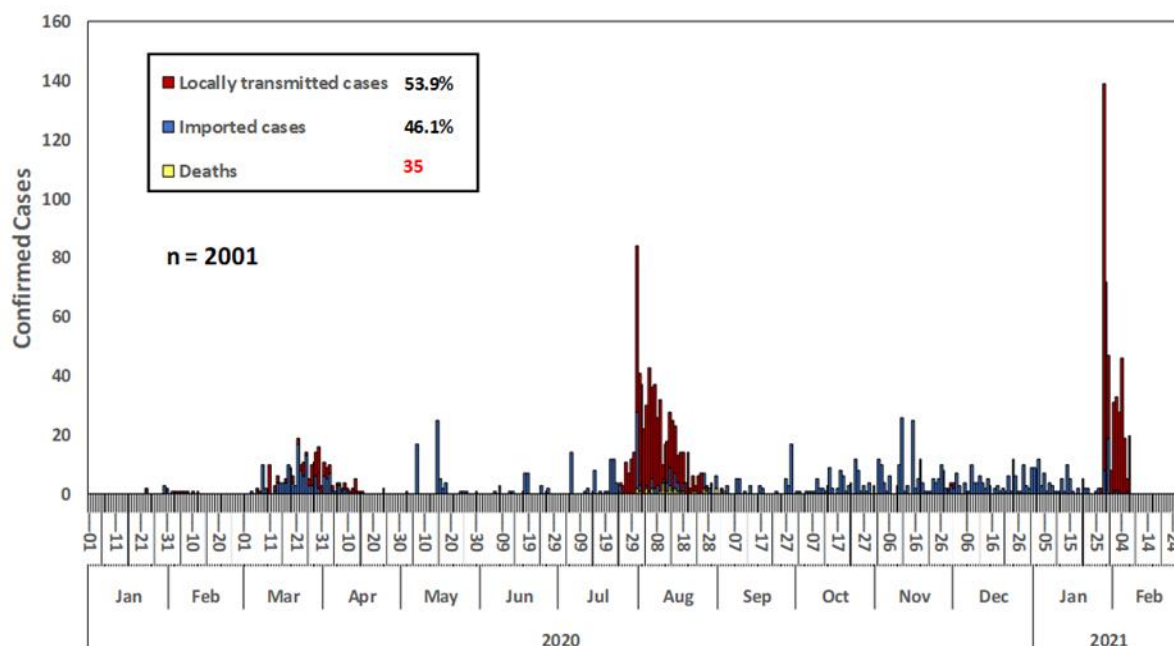


Figure 3. Epidemic curve of COVID-19 laboratory confirmed cases, Viet Nam, by date of reporting

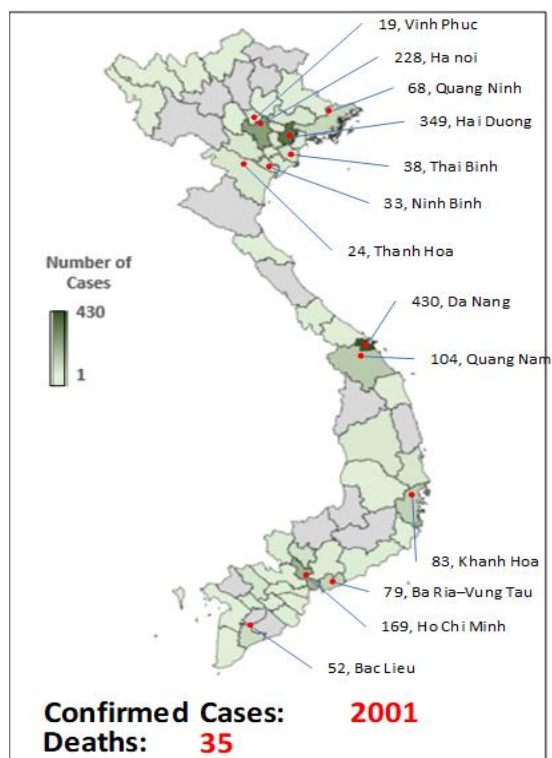


Figure 4. Distribution of cumulative COVID-19 laboratory confirmed cases by place of detection, Viet Nam

Age Group	Female		Male	
	Cases	Deaths	Cases	Deaths
0-9	37 (8)	0 (0)	38 (8)	0 (0)
10-19	52 (9)	0 (0)	55 (9)	0 (0)
20-29	247 (26)	2 (0)	308 (33)	0 (0)
30-39	249 (27)	1 (0)	281 (19)	1 (0)
40-49	135 (8)	1 (0)	134 (10)	0 (0)
50-59	114 (10)	5 (0)	124 (10)	3 (0)
60-69	89 (1)	6 (0)	70 (2)	6 (0)
70-79	28 (2)	2 (0)	18 (0)	1 (0)
80-89	10 (0)	5 (0)	7 (0)	1 (0)
90+	1 (0)	0 (0)	4 (0)	1 (0)
Total	962 (91)	22 (0)	1039 (91)	13 (0)

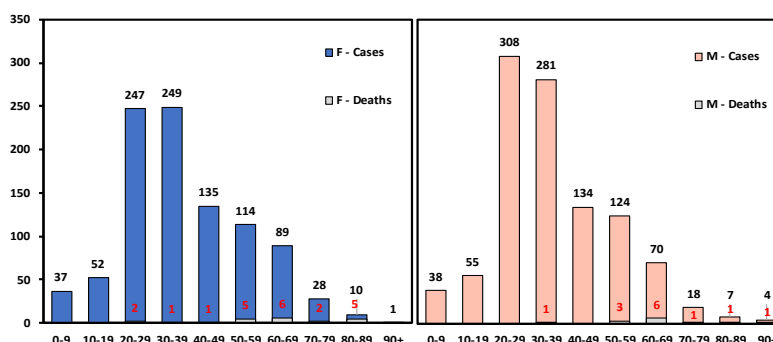


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex

Strategic Approach – no updates

National and Provincial Public Health Response

In January 2020, the Government of Viet Nam rapidly issued the first National Response Plan and assembled the National Steering Committee (NSC) to implement this plan. The NSC is central to the command and control governance of the COVID-19 response. The Committee is chaired by Deputy Prime Minister Vu Duc Dam with high-level representation from 14 Ministries and sectors, the National Assembly, media, and information technology companies, and oversees four sub-committees in technical and logistic areas. The plan outlines clear roles and responsibilities of each sector and levels of authority – central, provincial, district, and commune. The rapid mobilization of financial and human resources allowed the Prime Minister and Deputy Prime Minister to lead a whole-of-society approach, based on the Prime Minister’s Directive No. 05/CT-TTg, toward combating COVID-19, with the principle of “protecting people’s health first.” The Government’s commitment had remained the same, even one-level higher given the critical time (Tet is approaching, ongoing 13th National Party Congress, national efforts to achieve dual objectives of disease control and economic development) in the response to the current community outbreaks, started in Hai Duong and Quang Ninh.

Strategic Approach to COVID-19 Prevention, Detection and Control

Viet Nam has successfully and rapidly implemented necessary COVID-19 prevention, detection, and control activities under the strong leadership of the Government and effective multi-sectoral coordination and collaboration. There have been persistent and strict applications of key outbreak response measures: early detection – testing and treatment – contact tracing – isolation/quarantine, along with strategic risk communications. This was evident during the first phase of the outbreak response and once again reconfirmed in the response to the latest resurgence of cases in the community related to Da Nang and HCMC events, and for the ongoing community outbreaks that is affecting at 9 cities/ provinces as of 31 Jan 2021). For years, WHO has been supporting Viet Nam in building and strengthening the capacities for managing disease outbreaks and public health emergencies, as required by the International Health Regulations (IHR) (2005). Guided by the APSED III, Viet Nam has made significant progress in enhancing capacity in the required technical areas and all the years of investment are reflected in the country’s ongoing response to COVID-19.



Best Practice/Lessons Learned - unchanged

The Response Enabling Factors and Adjustments to the Response

- Strong government leadership with effective multi-sectoral collaboration and coordination and successful mobilization of national resources using a whole-of-society approach
- Early activation of a strong response system, including surveillance and risk assessment, laboratory, clinical management and IPC, and risk communication, which enabled Viet Nam's successful control of COVID-19.
- WHO supports long-term country investment to strengthen the health emergency response after previous epidemics, and is providing technical support in necessary areas, including the continuation of essential public health services.

Non-Pharmaceutical Interventions (NPI)

Narrative Non-Pharmaceutical Interventions

Viet Nam instituted a gradual roll-out of comprehensive NPIs based on the evolving context/evidence, thus they did not come as a “shock” to the public. Such interventions were implemented along with strong economic relief efforts, thereby minimizing the economic impact to businesses and households, especially vulnerable populations, during these uncertain times. As the global situation of COVID-19 has continued to evolve with complexity, the country borders have basically remained close except for specific circumstances. This whole-of-society approach is being one more time well reflected in the ongoing response to community outbreaks across the country under a strong leadership and guidance of GoV, NSC and MOH. (**Latest updates** – see also Key updates section on pages 1 to 3).