

Status, Trends and Recommendations

Covid-19: Stakeholders Update – Week 1/2022

A nine pager

WHO has not provided updated data for Week 1 of 2022

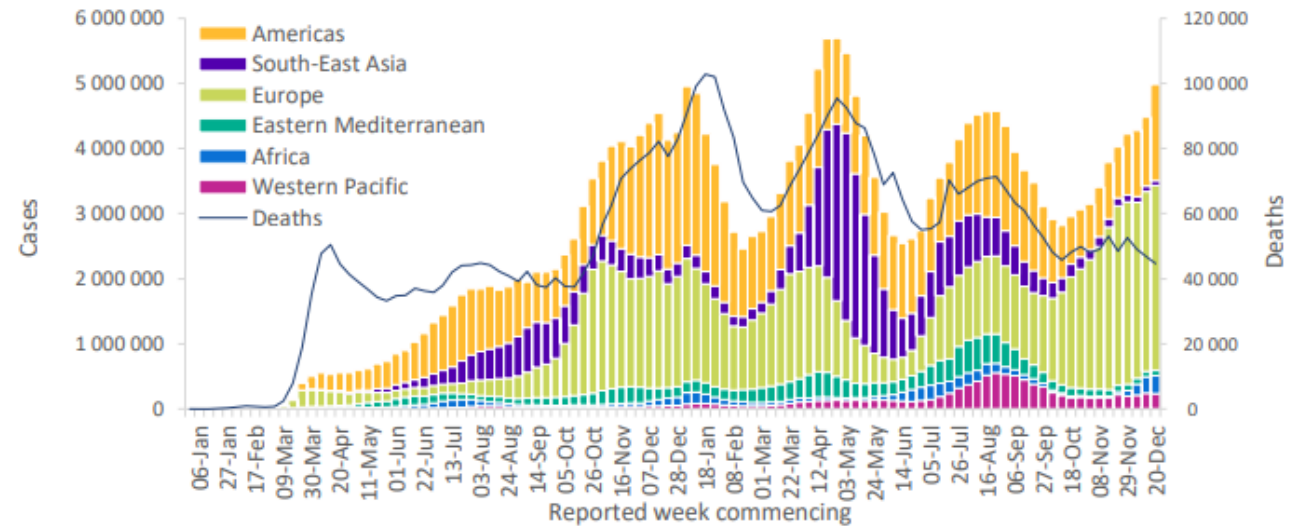
Global epidemiological situation

During the week 20-26 December, following a gradual increase since October, the global number of new cases increased by 11% as compared to the previous week (Table 1); while the number of new deaths remained similar to the number reported during the previous week. This corresponds to just under 5 million new cases and over 44 000 new deaths. As of 26 December, over 278 million cases and just under 5.4 million deaths have been reported globally (Figure 1).

Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 26 December 2021**

WHO Region	New cases in last 7 days (%)	Change in new cases in last 7 days *	Cumulative cases (%)	New deaths in last 7 days (%)	Change in new deaths in last 7 days *	Cumulative deaths (%)
Europe	2 842 375 (57%)	3%	97 359 631 (35%)	23 900 (53%)	-12%	1 650 729 (31%)
Americas	1 476 724 (30%)	39%	101 243 155 (36%)	12 782 (29%)	7%	2 399 735 (44%)
Africa	274 342 (6%)	7%	7 055 628 (3%)	952 (2%)	72%	155 292 (3%)
Western Pacific	238 654 (5%)	0%	11 062 163 (4%)	3 063 (7%)	-3%	153 746 (3%)
Eastern Mediterranean	76 875 (2%)	-3%	17 093 469 (6%)	1 275 (3%)	-7%	314 949 (6%)
South-East Asia	76 123 (2%)	-12%	44 899 674 (16%)	2 708 (6%)	9%	719 486 (13%)
Global	4 985 093 (100%)	11%	278 714 484 (100%)	44 680 (100%)	-4%	5 393 950 (100%)

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 26 December 2021**



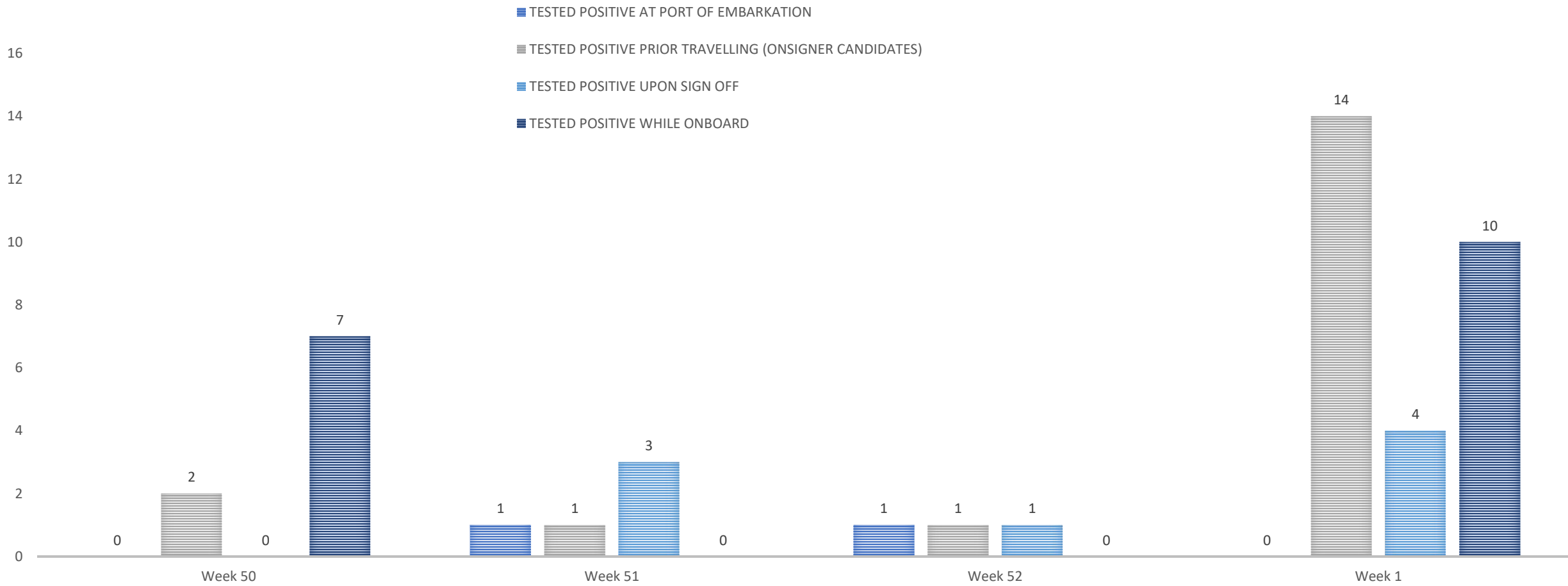
The South-East Asia Region continued to report a decrease in new cases as compared to the previous week (12%) while in the European, Eastern Mediterranean, and Western Pacific Regions, the number of new cases was similar to those reported during the previous week.

The African Region reported the highest increase in the number of new deaths (72%), followed by the South-East Asia Region (9%) and the Region of the Americas (7%). The European and Eastern Mediterranean Region reported decreases of 12% and 7% respectively, in the incidence of deaths, while in the Western Pacific Region, the incidence was similar to the previous weeks.

The European Region continued to report the highest incidence of weekly cases (304.6 new cases per 100 000 population), followed by the Region of the Americas (144.4 new cases per 100 000 population). Both regions also reported the highest weekly incidence in deaths of 2.6 and 1.2 per 100 000 population, respectively, while all other regions reported <1 new death per 100 000.

The highest numbers of new cases were reported from the United States of America (1 185 653 new cases; 34% increase), the United Kingdom (611 864 new cases; 20% increase), France (504 642 new cases; 41% increase); Italy (257 579 new cases; 62% increase) and Germany (197 845 new cases; 30% decrease).

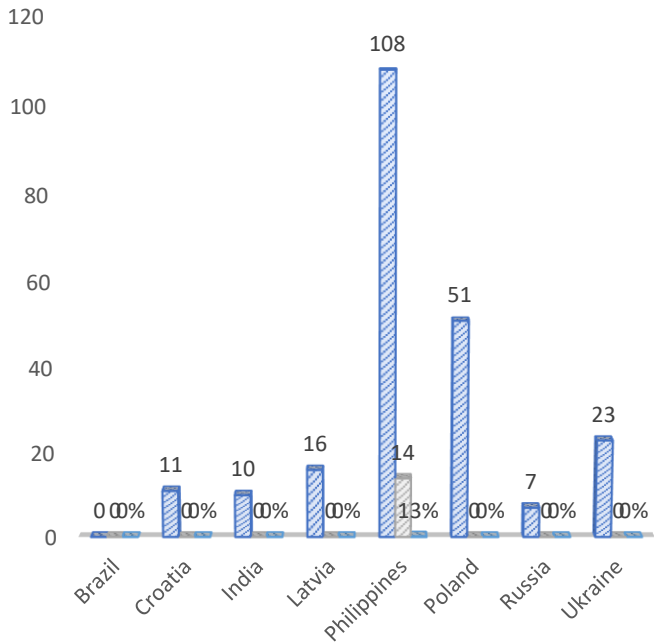
OSM MANNING - WHEN TESTED POSITIVE PER WEEK



Comment: In week 1 we have a steep increase of total figures compared to the week before. Of the 28 cases seen during this week 14 have occurred prior boarding (the ones before climbing up the gangway or even before travelling) what regarding virus avoidance onboard has been the goal. Then there were 4 cases tested positive upon sign off. 10 persons were tested positive while being onboard however these cases and also the “upon sign off” cases occurred where OSM provides the manning only (no DOC holder) hence for these seafarers OSM has no influence on procedures and instructions onboard. Anyway OSM is getting in contact with owners for rendering support also for these colleagues.

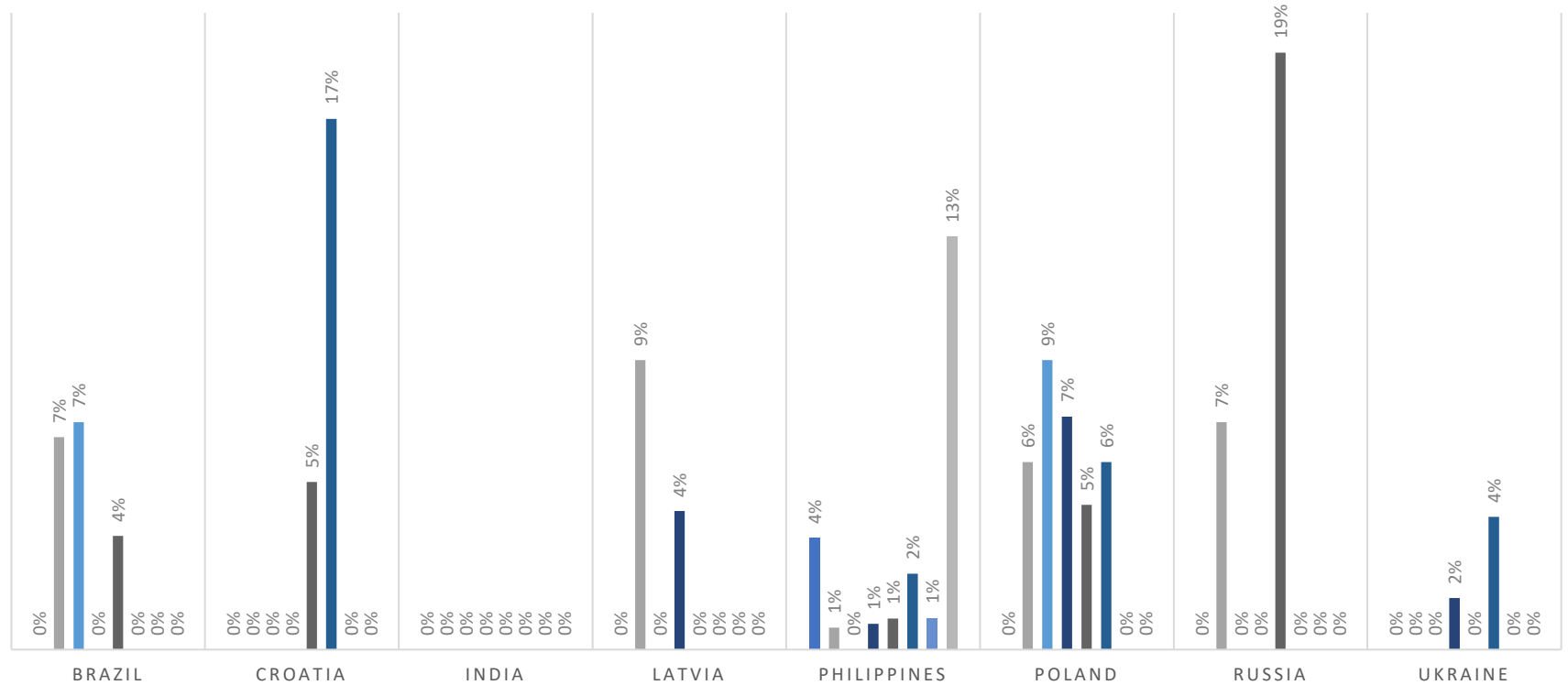
PCR-TEST POSITIVITY RATE BY NATIONALITY

■ No of Crew Tested
 ■ No. of Crew Tested Positive
 ■ Percentage



PCR-TEST POSITIVITY RATE BY NATIONALITY PER WEEK

■ Week 46
 ■ Week 47
 ■ Week 48
 ■ Week 49
 ■ Week 50
 ■ Week 51
 ■ Week 52
 ■ Week 1

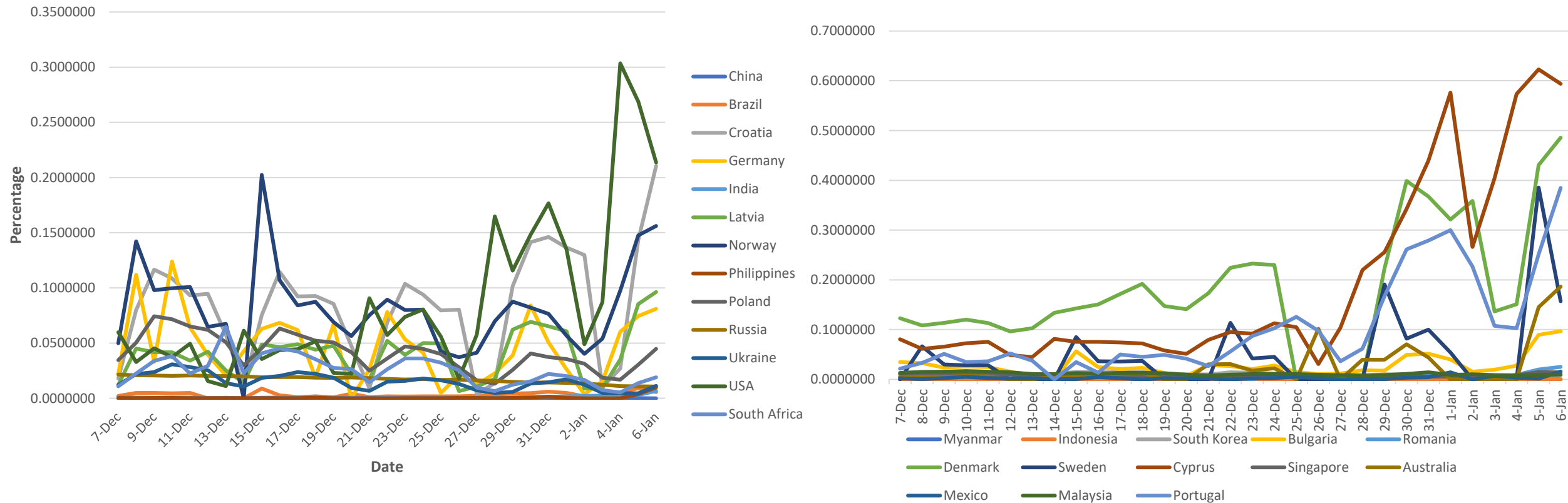


Positivity Rate:

For the respective week we have calculated the whole number of tested OSM seafarers and compared it with the number of positive results. If there was a multiple testing of a person, it was counted as one with respective outcome. We have pictured it by showing the different local percentages. E.g. Philippines had 14 positive cases out of 108 tested which equals to 13%.

Covid-19: Newinfection ratio

Newinfections in % of population

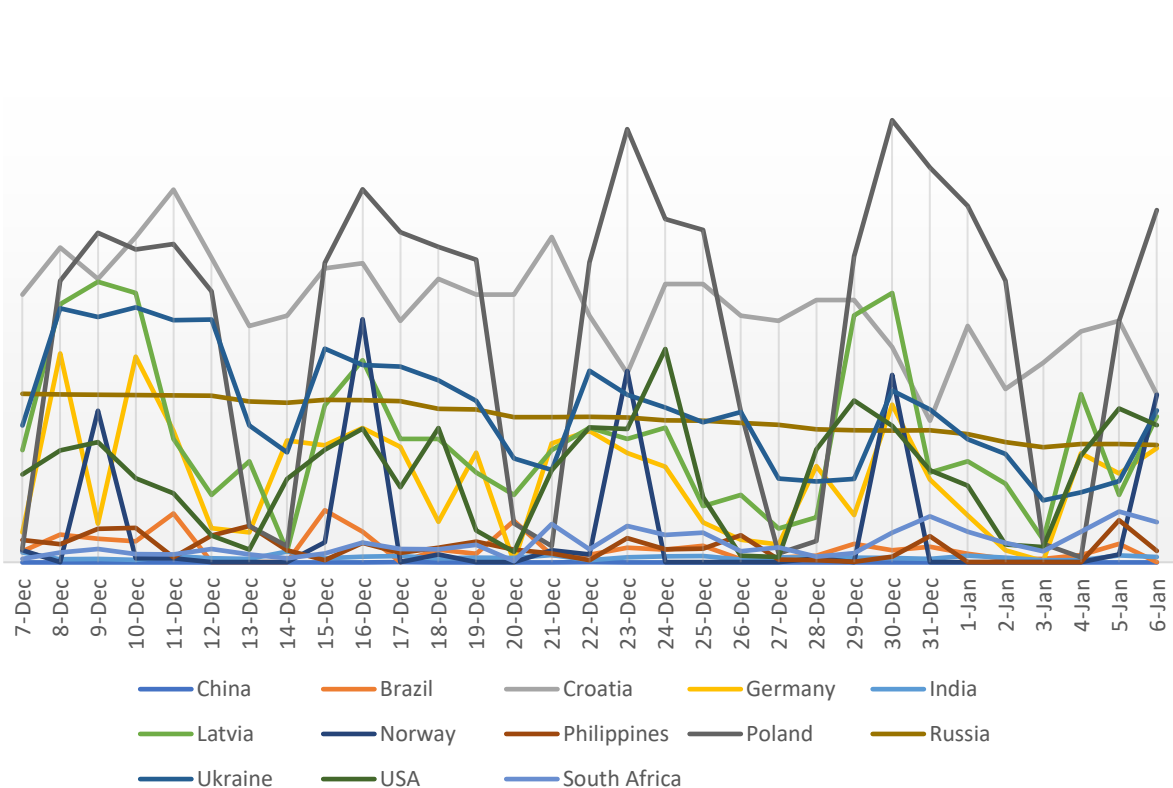


Looking at the home countries of our seafarers we want to give an overview about trends and threats. In order to have a comparable base the number of daily newinfections has been put in relation to the number of inhabitants – resulting in a percentage figure. It has to be considered that infection figures are also increasing in case a country decides to go for a higher testing frequency due to the extremely high dark figure of infections without symptoms. We see in the graphs the following trend: Particularly Croatia, Germany, USA, Latvia and Norway are showing extremely high infection figures but we have now also extremely high figures at Denmark, Portugal and Cyprus. It is noteworthy that a delayed reporting due to Christmas/new year season may create wrong peaks.

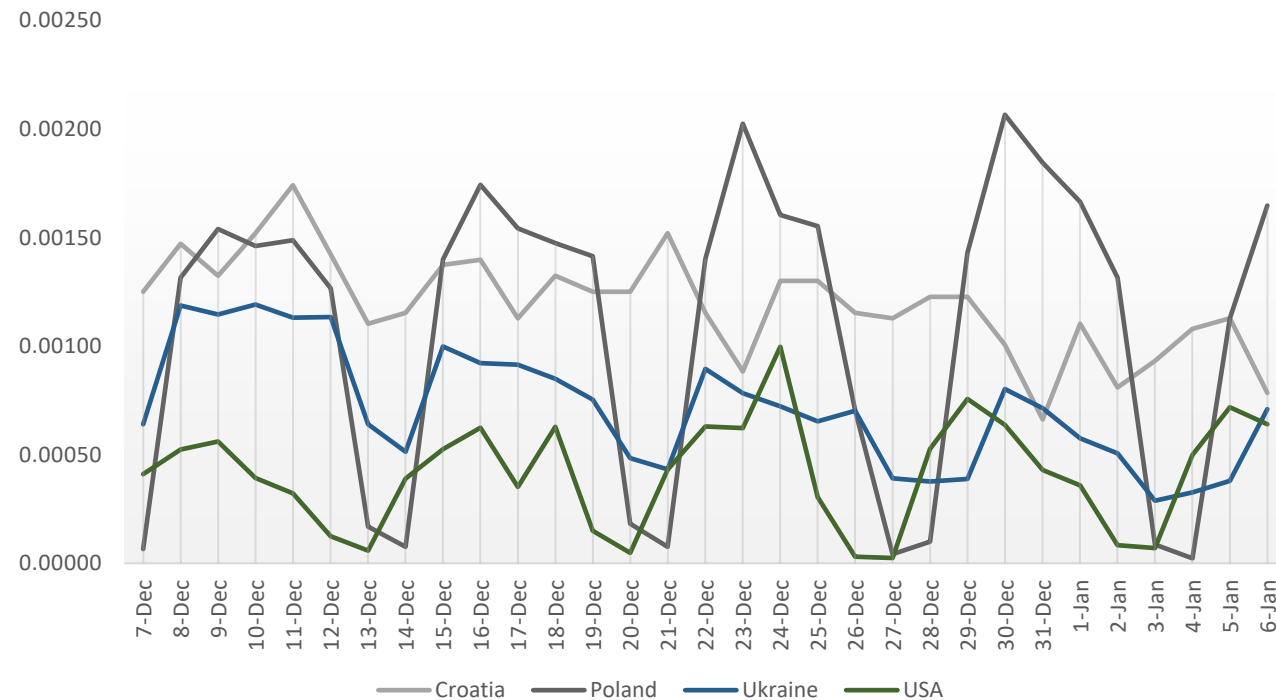
Sources: [Wikipedia](#)[The New York Times](#)[JHU CSSE COVID-19 Data](#)[Europäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](#)

Covid-19: Fatality ratio I

Daily fatality development in % of inhabitants - overview



Daily fatality development in % of inhabitants - focus



We are observing that the level of new infections is not any longer a suitable “fever thermometer” for the situation of this pandemic – at least not as the only one. This particularly is the case in countries with a high percentage of vaccinated inhabitants. In most of these countries people have been vaccinated already who are the most vulnerable, like the ones having health issues or elderly people. In turn if infections are occurring then it will more affect people who –in average- are younger and/or less sick. Accordingly infections there (only in the mentioned countries of high vaccination ratios!) are leading less likely to hospitalization or even fatalities. Consequently if an increasing number of fatalities has to be noted then most likely

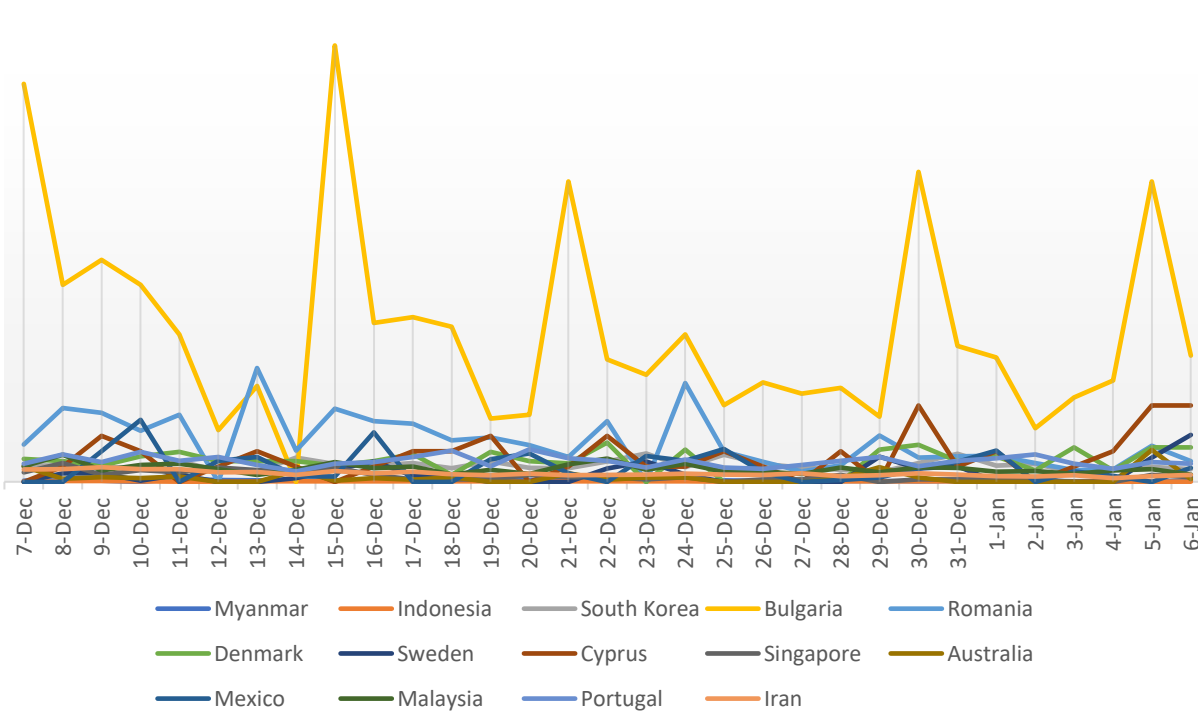
Sources: [Wikipedia](#)[The New York Times](#)[JHU CSSE COVID-19](#)[DataEuropäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](#)

Covid-19: Fatality ratio II

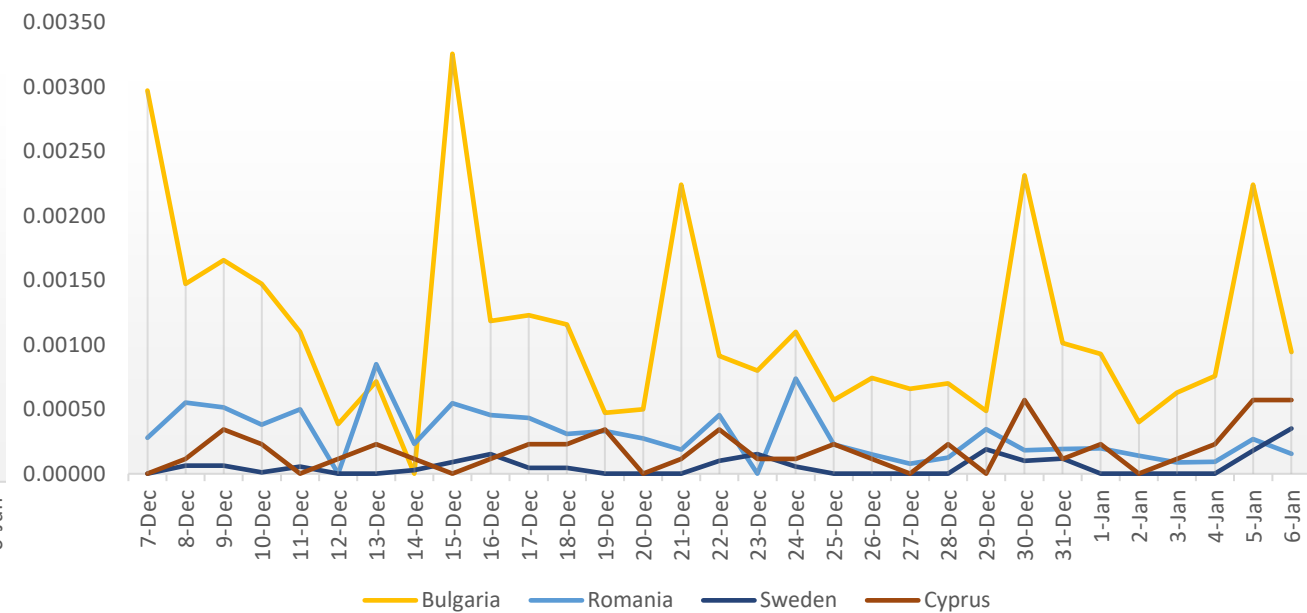
this needs to be seen as a sign that -beside the most obvious reason that not vaccinated people are affected- the vaccination level is not sufficient any more due to expiry of immunization triggers or/and (much more important!) the influence of new virus strains.

Hence presently it looks like the sickness is affecting less elderly and “vulnerable” people but is turning towards the not vaccinated ones and is more and more finding its victims in this circle. This change is not visible while looking at the numbers of new infections only. The threat of Covid-19 then is recognizable only in numbers of hospitalization and fatalities. The worldwide rate of hospitalization is not available but the one of fatalities is. Hence for time being we will picture new infections and fatalities – both calculated in percentage of inhabitants in order to have a comparable base even between countries of completely different population size.

Daily fatality development in % of inhabitants - overview



Daily fatality development in % of inhabitants - focus



Sources: [Wikipedia](#) [The New York Times](#) [JHU CSSE COVID-19 Data](#) [Europäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](#)

Covid-19: Omicron variant research spots – preliminary as these are early assessments!

New study from South Africa
<https://www.medrxiv.org/content/10.1101/2021.12.21.21268116v1>

Likelihood for admittance to hospital 80% less compared to former variants

New study from South Africa
<https://www.medrxiv.org/content/10.1101/2021.12.21.21268116v1>

Patients hospitalised facing the same risks as with other variants

New study from Great Britain
<https://amp.theguardian.com/world/2022/jan/02/new-studies-reinforce-belief-that-omicron-is-less-likely-to-damage-lungs>

Rapid tests (LTF) might be more accurate when samples are taken from throat instead of nose swabs

New study from England
<https://www.imperial.ac.uk/news/232882/some-reduction-hospitalisation-omicron-delta-englandearly/>

Mean stay at hospital from Delta 0.32 days to 0.22 days for Omicron

New study from Scotland
<https://www.research.ed.ac.uk/en/publications/severity-of-omicron-variant-of-concern-and-vaccine-effectiveness->

Third vaccination or a booster provides substantial add. Protection (57% lower risk) against sympt. Omicron

New study from Great Britain
<https://amp.theguardian.com/world/2022/jan/02/new-studies-reinforce-belief-that-omicron-is-less-likely-to-damage-lungs>

Covid variant is more likely to infect the throat than the lungs

New study from South Africa
<https://www.medrxiv.org/content/10.1101/2021.12.21.21268116v1>

Transmissibility increased: At SA within 4 weeks Delta almost completely has been replaced

“The early indications are that it’s good news, but that’s not a signal to drop our guard, because if you’re clinically vulnerable, the consequences are still not great – there are deaths from Omicron. Not everyone can rip their masks off and party.”

<https://amp.theguardian.com/world/2022/jan/02/new-studies-reinforce-belief-that-omicron-is-less-likely-to-damage-lungs>

Prof James Stewart

Covid-19: How to protect crew member and vessel

Recommendations

In case of significant Covid-19 activity in specific home countries of on- signing seafarers and at same time knowing that PCR testing in many cases cannot find the virus we strongly recommend following procedure to be kept at least:

	Not or only incompletely vaccinated	Fully vaccinated (with 2 weeks after 2nd dose of Covid vaccine - if J&J/Sputnik Light then 2 respectively 4 weeks after one jab) and joining a vessel with fully vaccinated crew
1. Self isolation of the seafarer at home for 10 days	Fully applicable	None
2. Transfer of the seafarer by usage of a single passenger car	Fully applicable	None
3. Company facilitated quarantine location realized in a hotel with complete separation of the person including meals served at the room	Fully applicable	Fully applicable
4. Quarantine for a timespan	Between 8 days and 14 days	Between 5 days and 7 days
5. First PCR testing at beginning of the quarantine	Day 1 of quarantine	Day 1 of quarantine
6. Second PCR testing earliest at	8th day of quarantine	5th day of quarantine
7. Transfer and leaving of quarantine earliest when result of second PCR test is received and negative	Fully applicable	Fully applicable
8. PCR test at country of boarding the vessel	Fully applicable	Fully applicable
9. Strict usage of covid-19 PPE for transfers, flights and for any other occasion potentially contact can occur with third parties	Fully applicable	Fully applicable