

Status, Trends and Recommendations

Covid-19: Stakeholders Update – Week 08/2022

A nine pager

Global epidemiological situation

Globally, during the week of 14 through 20 February 2022, the number of new COVID-19 cases decreased by 21% as compared to the previous week. In addition, the number of new deaths showed a decreasing trend (-8%) when compared to the previous week (Figure 1). Across the six WHO regions, over 12 million new cases and over 67 000 new deaths were reported (Table 1). As of 20 February 2022, over 422 million confirmed cases and over 5.8 million deaths have been reported globally.

At the regional level, the Western Pacific Region reported a 29% increase in the number of new weekly cases, while all other regions reported decreases: the Eastern Mediterranean Region (-34%), the Region of the Americas (-29%), the European Region (-26%), the African Region (-22%) and the South-East Asia Region (-17%).

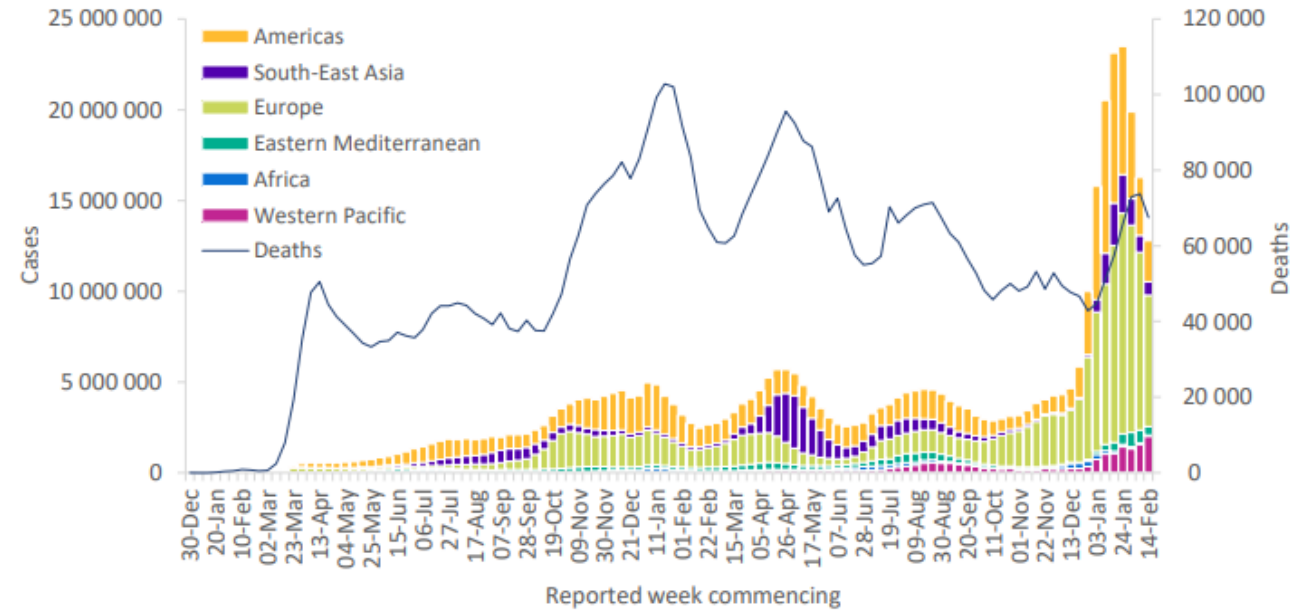
Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 20 February 2022**

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	7 224 687 (56%)	-26%	171 887 349 (41%)	24 772 (37%)	-5%	1 843 169 (31%)
Americas	2 265 214 (18%)	-29%	145 283 655 (34%)	28 945 (43%)	-9%	2 600 596 (44%)
Western Pacific	2 020 878 (16%)	29%	20 880 285 (5%)	3 749 (6%)	21%	176 613 (3%)
South-East Asia	762 899 (6%)	-17%	55 041 156 (13%)	5 001 (7%)	-37%	757 525 (13%)
Eastern Mediterranean	466 795 (4%)	-34%	20 815 884 (5%)	3 139 (5%)	-4%	329 934 (6%)
Africa	53 489 (0%)	-22%	8 279 661 (2%)	1 913 (3%)	20%	168 916 (3%)
Global	12 793 962 (100%)	-21%	422 188 754 (100%)	67 519 (100%)	-8%	5 876 766 (100%)

*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior

**See [Annex 2: Data, table, and figure notes](#)

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 20 February 2022**



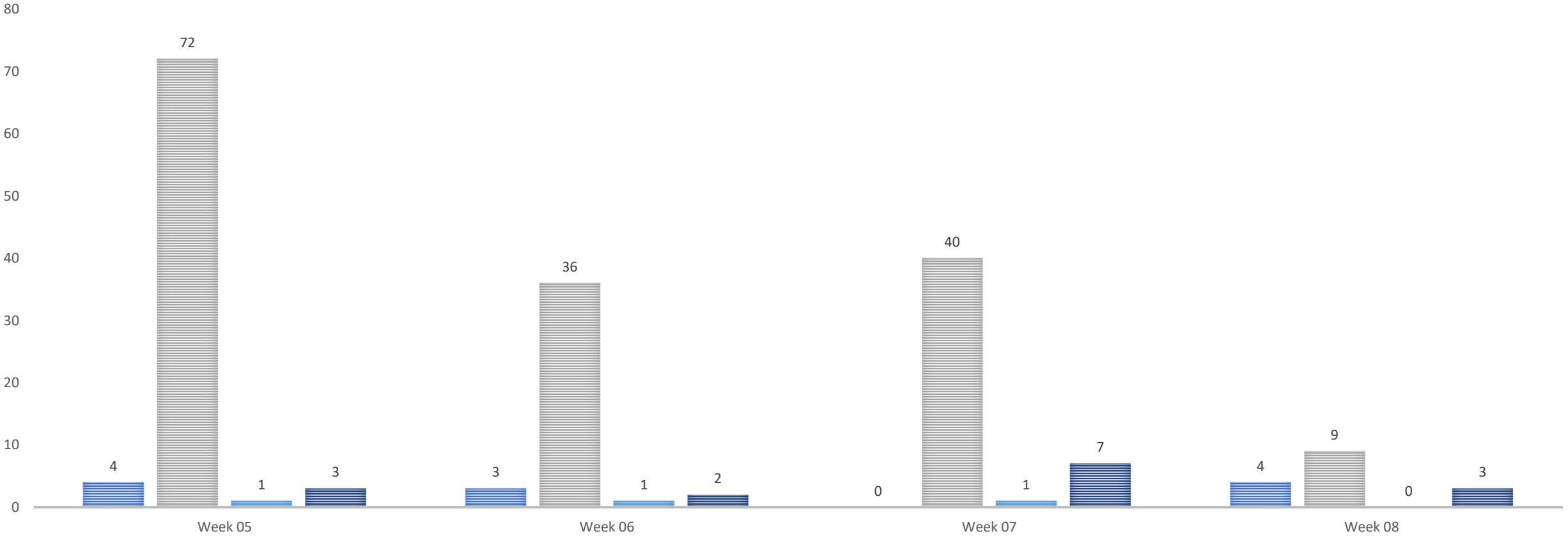
The number of new weekly deaths increased in the Western Pacific (+21%) and African (+20%) Regions and decreased in the South-East Asia (-37%), the Regions of Americas (-9%), the European Region (-5%) and the Eastern Mediterranean Region (-4%).

The highest numbers of new cases were reported from the Russian Federation (1 236 910 new cases; -7%), Germany (1 218 465 new cases; -8%), Brazil (773 353 new cases; -23%), the United States of America (746 129 new cases; -39%), and the Republic of Korea (612 195 new cases; +80%).

The highest number of new deaths were reported from the United States of America (14 723 new deaths; -6%), Brazil (5877 new deaths; -11%), the Russian Federation (5252 new deaths; +8%), India (3238 new deaths; -51%), and Mexico (2221 new deaths; +8%).

OSM MANNING - WHEN TESTED POSITIVE PER WEEK

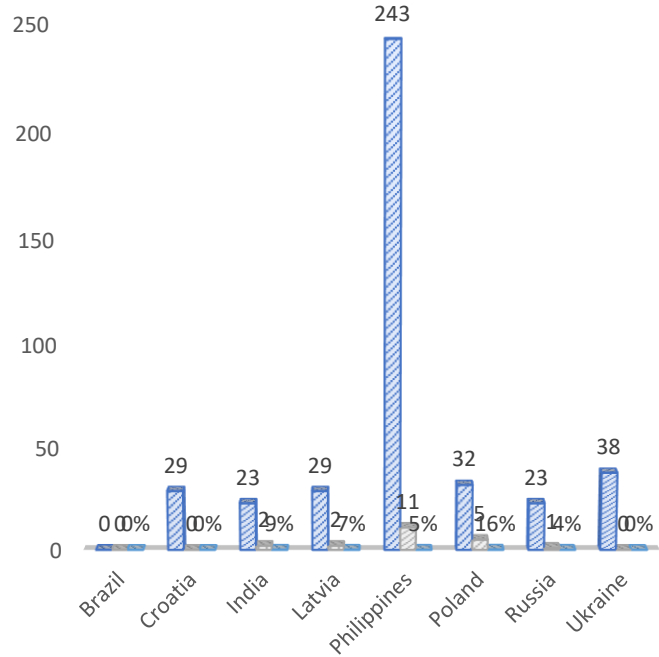
■ TESTED POSITIVE AT PORT OF EMBARKATION ■ TESTED POSITIVE PRIOR TRAVELLING (ONSIGNER CANDIDATES) ■ TESTED POSITIVE UPON SIGN OFF ■ TESTED POSITIVE WHILE ONBOARD



Comment: In week 8 we have now a decrease of total figures compared to the week before. From 48 cases last week we are now down to 16 seen during this week. Of these 16 cases 13 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 3 persons were tested positive while being onboard however these cases and also the “upon sign off” cases are in meantime impossible to trace. Generally the extremely high transmissibility of Omicron makes it even more necessary to keep protection measures and particularly proper (!) mask wearing during travelling.

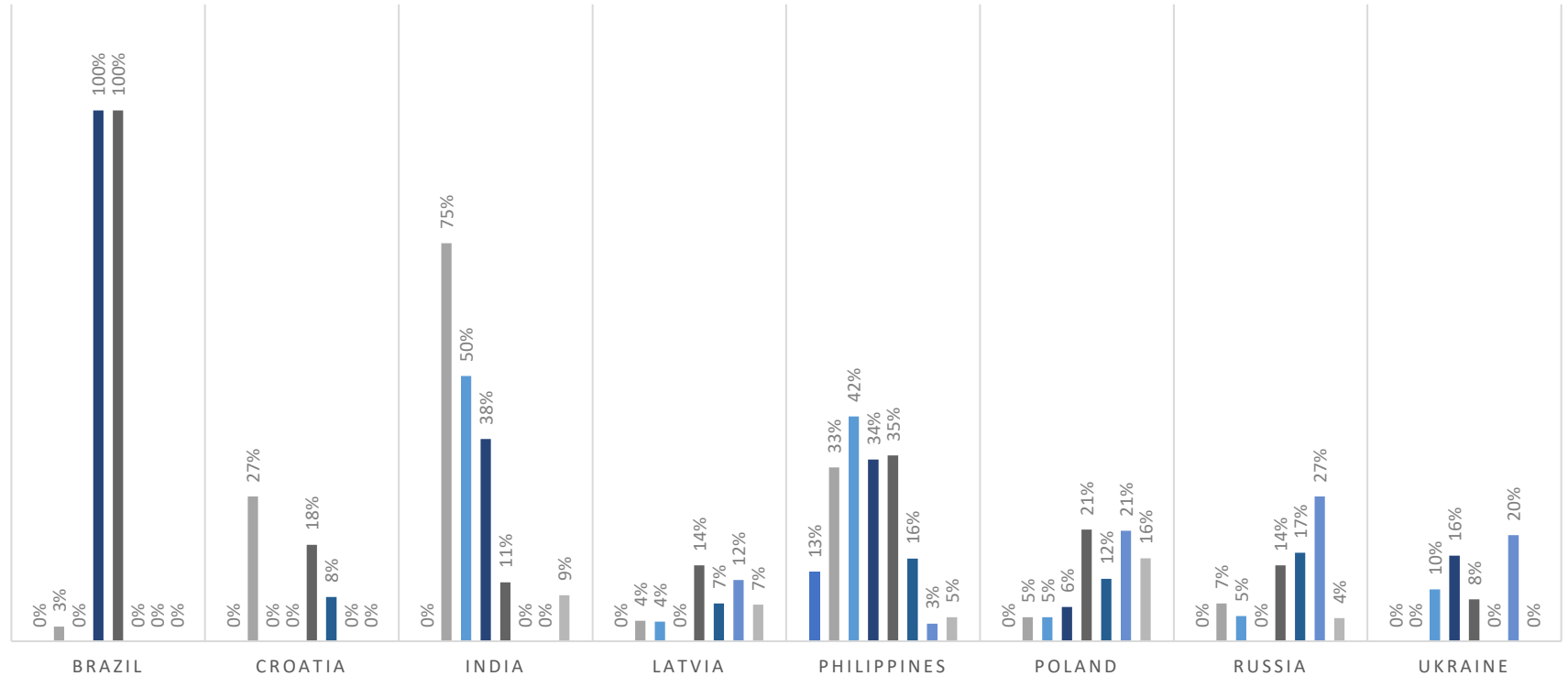
PCR-TEST POSITIVITY RATE BY NATIONALITY

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



PCR-TEST POSITIVITY RATE BY NATIONALITY PER WEEK

■ Week 01
 ■ Week 02
 ■ Week 03
 ■ Week 04
 ■ Week 05
 ■ Week 06
 ■ Week 07
 ■ Week 08

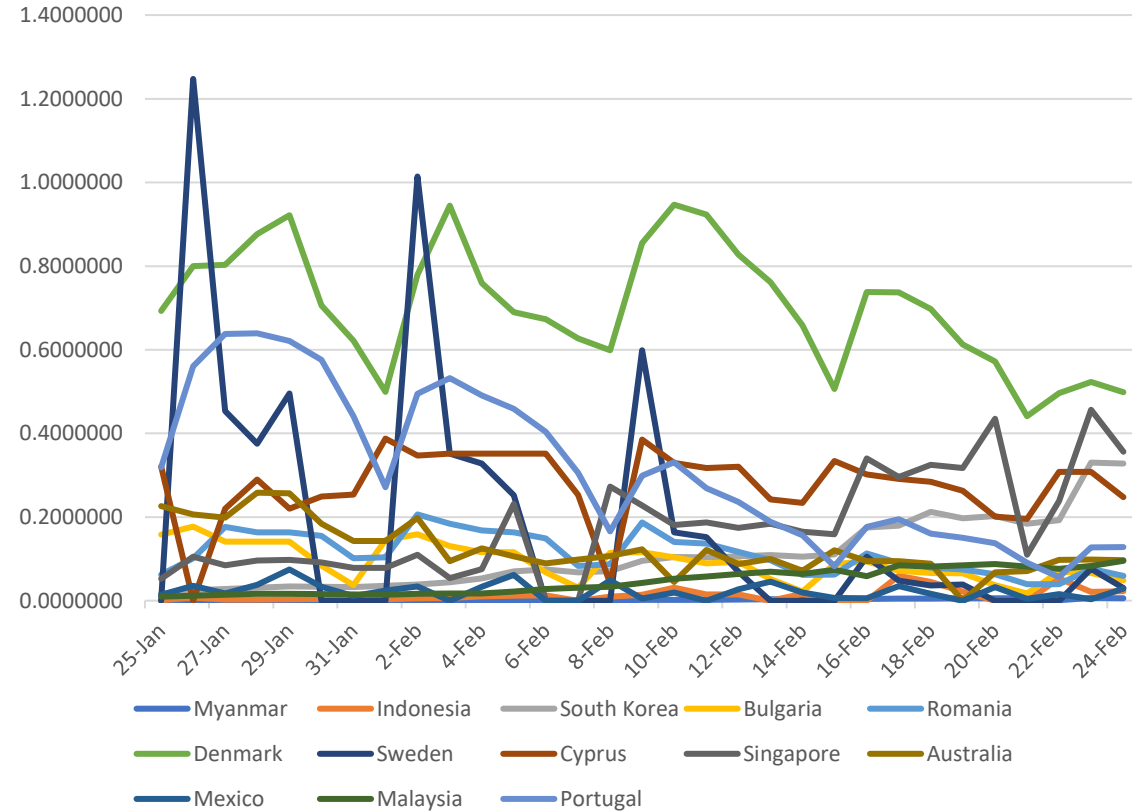
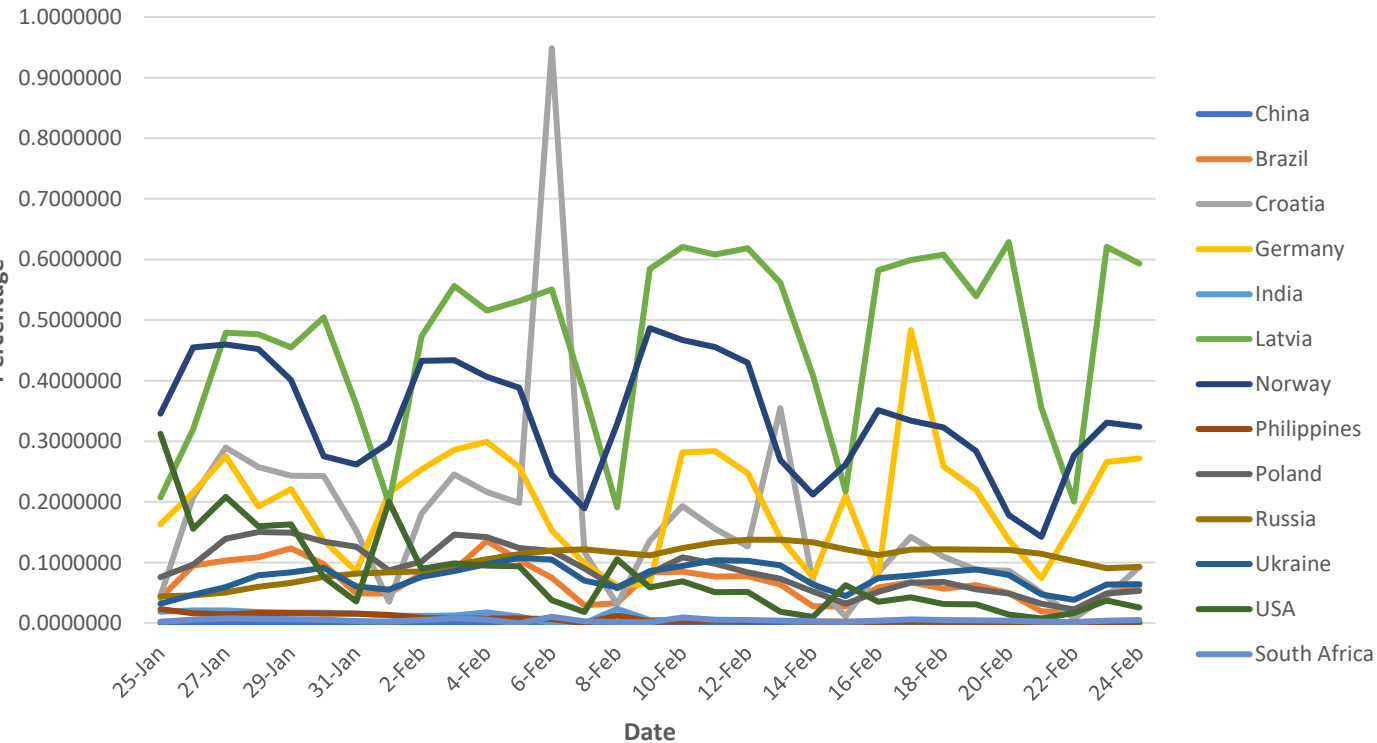


Positivity Rate:

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. Latvia had 3 positive cases out of 29 tested which equals to 7%.

Covid-19: Newinfection ratio

New infections in % of population

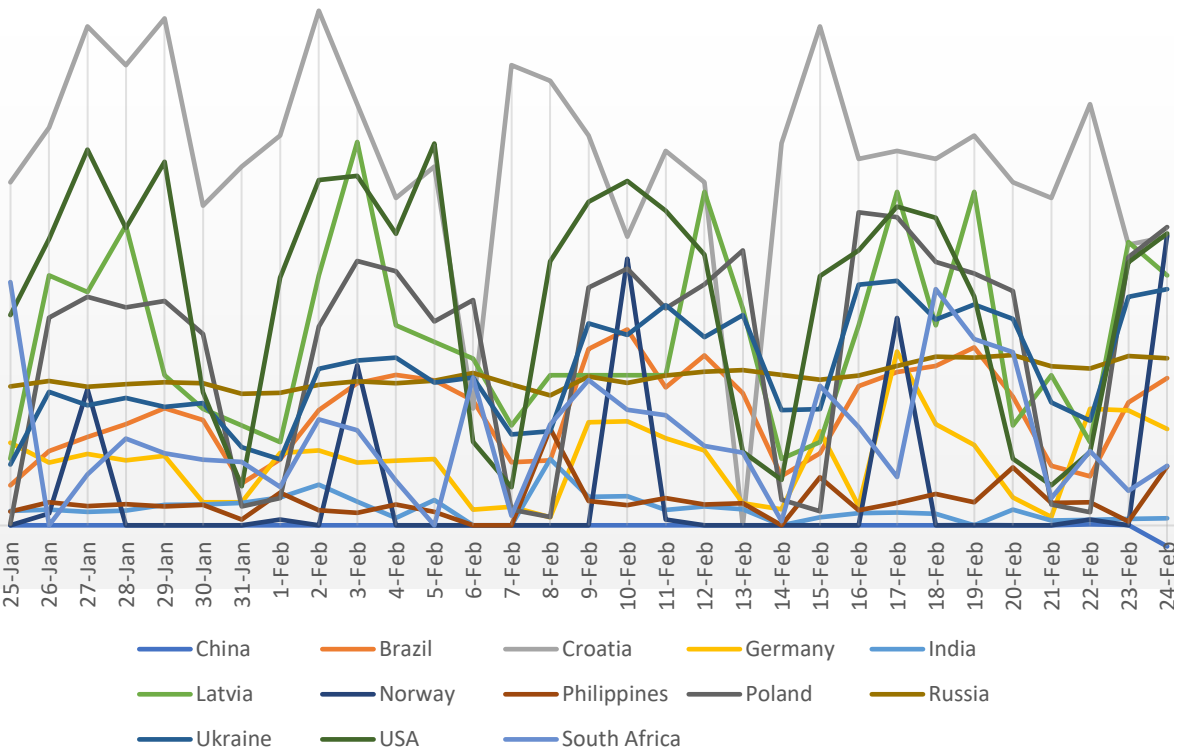


Looking at the home countries of our seafarers we want to give an overview about trends and threats. In order to have a comparable base the number of daily new infections has been put in relation to the number of inhabitants – resulting in a percentage figure. It has to be considered that infection figures 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 Latvia, Norway and Germany are showing high infection figures but we have now also extremely high figures at Denmark and Singapore as well as South Korea.

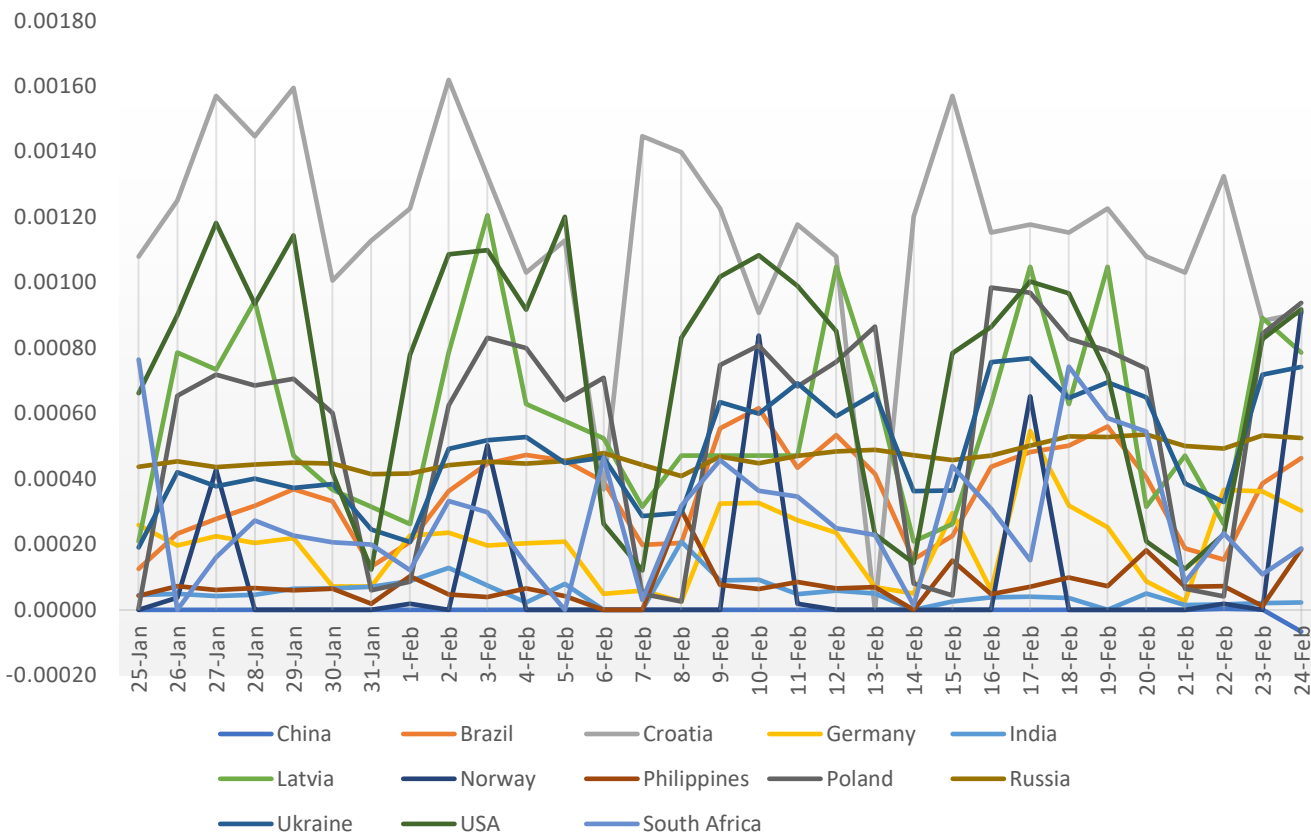
Sources: [Wikipedia](#) [The New York Times](#) [JHU CSSE COVID-19 Data](#) [Europäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](#)

Covid-19: Fatality ratio I

Daily fatality development in % of inhabitants - overview



Daily fatality development in % of inhabitants - focus



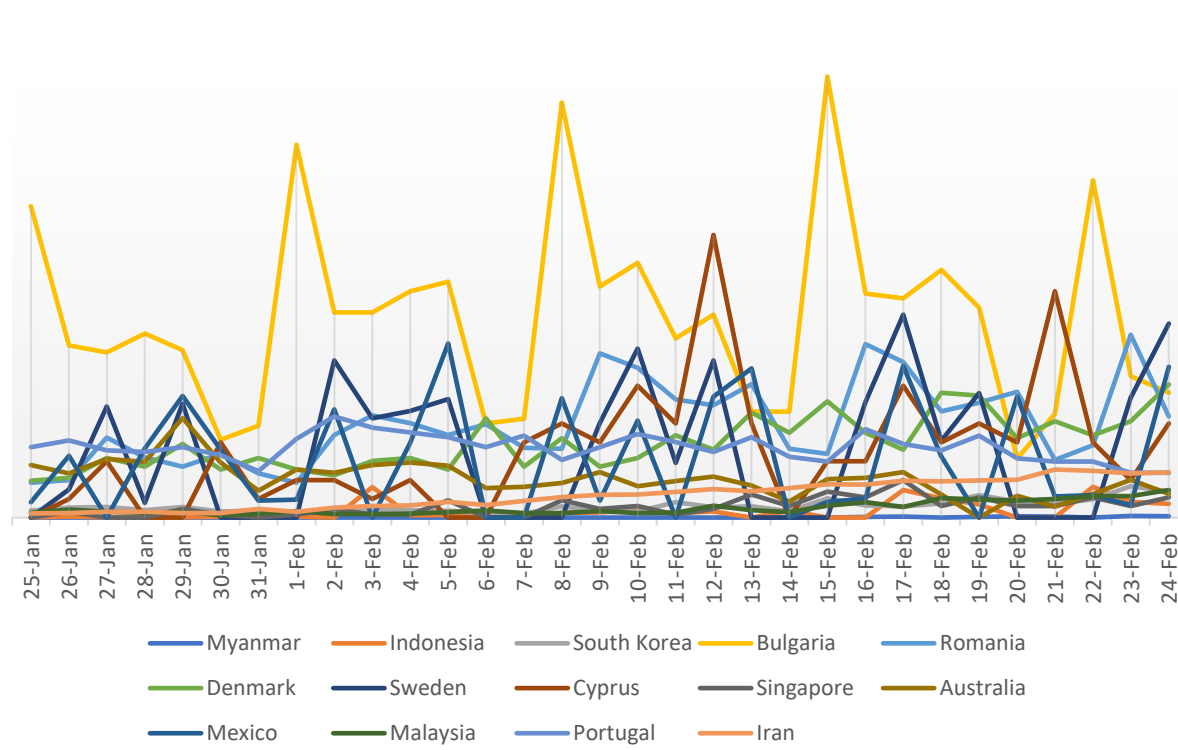
We are observing that the level of new infections is not any longer a suitable “fever thermometer” for the situation of this pandemic – at least not as the only one. This particularly is the case in countries with a high percentage of vaccinated inhabitants. In most of these countries people have been 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: [WikipediaThe New York Times](https://www.nytimes.com/2020/01/29/health/coronavirus.html), [JHU CSSE COVID-19 Data](https://www.jhu.edu/2020/01/29/covid19-data/), [Europäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](https://www.ecdc.europa.eu/en/prevention-and-control-of-diseases)

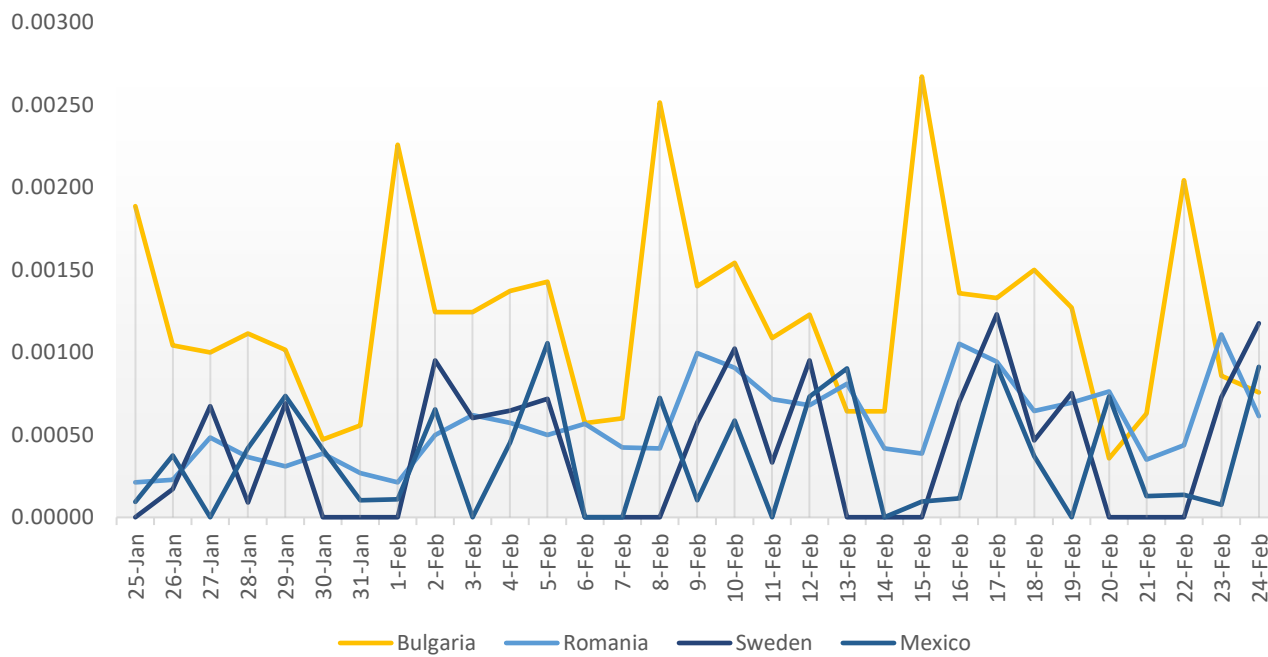
Covid-19: Fatality ratio II

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: Updated Guidelines on Booster Shots

PRIMARY DOSE SERIES	 CDC GUIDELINES		LOCAL GUIDELINES e.g. PHILIPPINES 	
	INTERVAL	BOOSTER	INTERVAL	BOOSTER
PFIZER-BIONTECH "COMIRNATY"	5 months (3 months for moderate or severely immunocompromised people)	Pfizer Moderna	3 months	Pfizer Astrazeneca, Moderna, Sputnik Light
MODERNA "SPIKEVAX"		Moderna Pfizer		Moderna Astrazeneca, Pfizer, Sputnik Light*
ASTRAZENECA "VAXZEVRIA" "COVISHIELD"		Astrazeneca Pfizer, Moderna, Sputnik Light*		
SINOVAC "CORONAVAC"		Sinovac Astrazeneca Pfizer, Moderna, Sputnik Light*		
SINOPHARM*		Sinopharm* Astrazeneca Pfizer, Moderna		
GAMALEYA SPUTNIK V*		Astrazeneca Pfizer, Moderna		
GAMALEYA SPUTNIK LIGHT*		Astrazeneca Pfizer, Moderna		
JOHNSON & JOHNSON'S JANSSEN	2 months	Pfizer Moderna		2 months



Recommendations as to the relative risks and benefits of homologous versus heterologous primary and booster doses will be reviewed as additional data become available.

*Except for pregnant & lactating women
Booster in **bold** pertain to homologous shots

Covid-19: How to protect crew member and vessel

Recommendations

In case of significant Covid-19 activity –particularly with Omicron- in specific home countries of on- signing seafarers while at same time knowing that PCR testing in many cases (and rapid testing even less) cannot find the virus we strongly recommend presently to suspend crew changes from India and Philippines for now. If this suspension is not possible we recommend following procedure to be kept at least:

	Not or only incompletely vaccinated	Fully vaccinated and/or even boosted crew and joining a vessel with preferably fully vaccinated and/or even boosted 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 3 days and 5 days
5. First PCR testing at beginning of the quarantine	Day 1 of quarantine	Not necessarily
6. "Quarantine Completion-PCR" testing earliest at	8th day of quarantine	3rd to 5th day of quarantine
7. Transfer and leaving of quarantine earliest when result of last PCR test is received and negative	Fully applicable	Fully applicable
8. Strict quarantine for 3 days at port of embarkation	Fully applicable	Fully applicable
9. PCR test at port of embarkation - boarding the vessel	Fully applicable	Fully applicable
10. Strict usage of covid-19 PPE for transfers, flights and for any other occasion contact potentially can occur with third parties	Fully applicable	Fully applicable

Due to extremely high risk of „meeting“ Omicron here is the present version of standing recommendations. Particularly the 3 days of quarantine at port of embarkation are highly recommended – catching the travel „souvenirs“ before it is too late! Too late is it once we have it onboard.....