

COVID-19 Situation, Thailand

26 January 2022

Based on data as reported by the CCSA

2,398,944 total confirmed cases

22,076 total deaths

Daily average reported from 20 to 26 January 2022 (compared to week prior)



7,465 new cases (7,275) **↑ 3%**



15 deaths (14) **↑ 7%**



7,744 people recovered (5,318) **↑ 46%**



349,911 vaccinations (365,250) **↓ 4.2%**
(18 to 24 January 2022)

Main messages

| Community transmission of omicron in most provinces |

| RTG encourages COVID-free settings and booster vaccinations |

| Get vaccinated, maintain universal precautions and stay informed |

Contents COVID-19 Update

- [Situation Analysis](#)
- [Global situation](#)
- [National situation](#)
- [Provincial situation](#)
- [COVID-19 amongst overseas arrivals and migrants](#)
- [Vaccination situation](#)
- [RTG policy updates](#)
- [Explainers](#)

All data from the RTG MoPH unless otherwise stated

Situation Analysis

- The average number of new COVID-19 cases reported per day only increased by 3% in the past seven days compared to the previous week. At the national level, the steep rise in cases seen two weeks ago has not been maintained. This is likely due to previously introduced public health and social measures, strong adherence to personal protective measures by members of the public and increasing vaccination rates.
- However, the average number of new COVID-19 cases reported per day for Bangkok in the past week (1,316) is 69% higher than the week prior (777). The reason for this upsurge is not completely clear. However, the transmission of the Omicron variant in Bangkok (and greater Bangkok) started relatively later than other areas, possibly after individuals travelled to Bangkok from previously affected provinces.
- The average daily number of all 'active' COVID-19 cases (78,439) over the last seven days increased by 5% compared to the previous week. This number includes patients in hospitals, as well as those in hospitals, in community isolation and in home isolation. This number, therefore, reflects the overall burden of COVID cases for the healthcare delivery system since even people isolating at home are being actively monitored.
- An average of 15 daily deaths have been reported over the last seven days, a small increase over the average daily number reported for the previous week (14).
- The average daily number of ventilated COVID-19 cases over the past seven days (116) represents a 6% increase over the average number reported for the previous week (109). However, the number of ventilated cases reported today (97) is the lowest reported since 23 April 2021 and is only 8% of the highest number ever reported (1,172) on 15 August 2021.
- The omicron variant has now been reported from every province in Thailand, and community transmission of COVID is still occurring in every part of Thailand. Although Thailand is not experiencing the big upsurge in cases being seen in other countries, this is likely due in large part to the strong adherence of protective measures by members of the public, which need to be maintained.
- COVID-19 vaccination rates in Thailand are very likely to be significantly reduce levels of severe illness and deaths caused by circulating COVID-19 strains. High vaccination rates also help to reduce the transmission of COVID-19. However, vaccination rates are still low in some provinces and in some important risk groups.

Global COVID-19 (total) cases, deaths and vaccinations to date: chart showing cases reported per week (25 January 2022)

352,796,704 confirmed cases

2,158,785 new cases in last 24 hours

In the past week **new cases increased 7.4%**, a decrease from the 20% increase previously

5,542,359 deaths

6,189 new deaths in last 24 hours

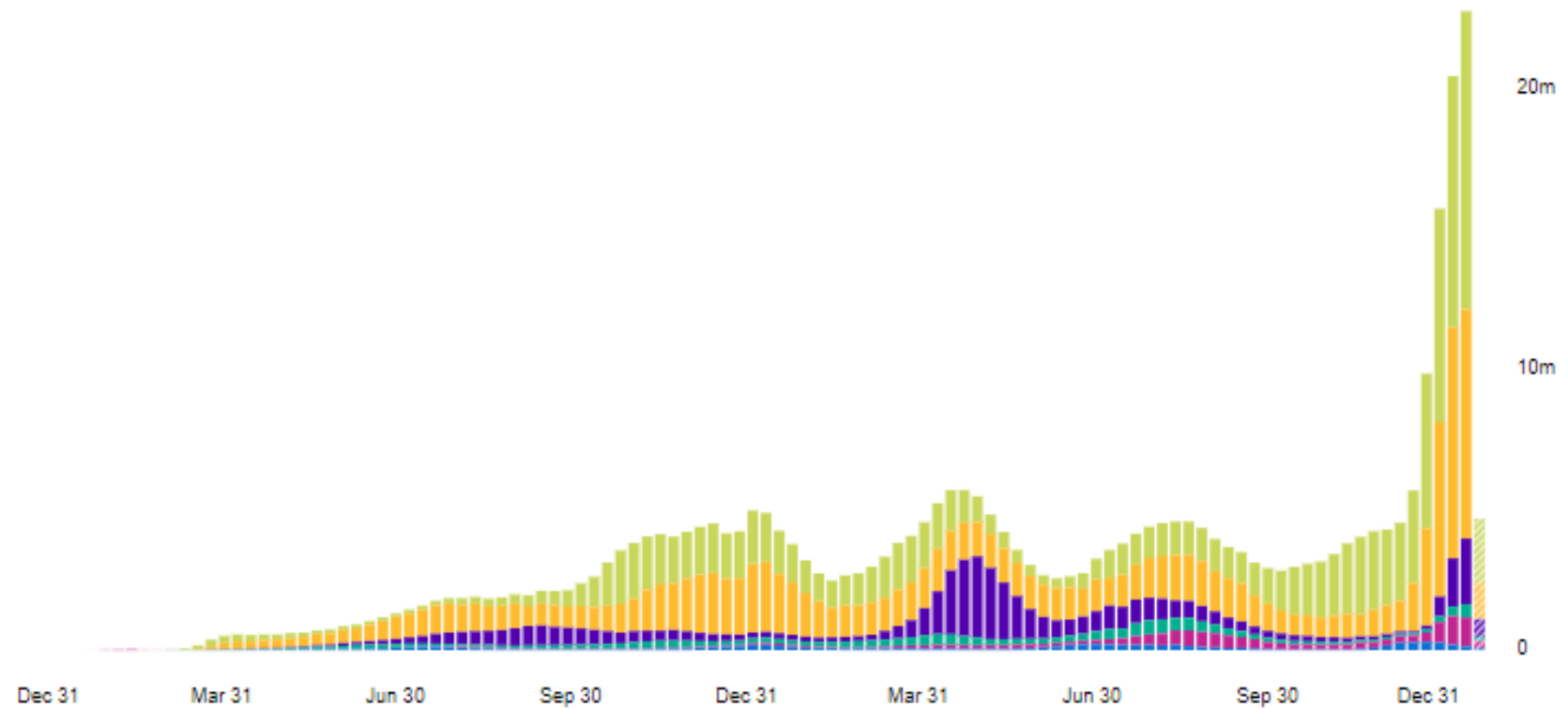
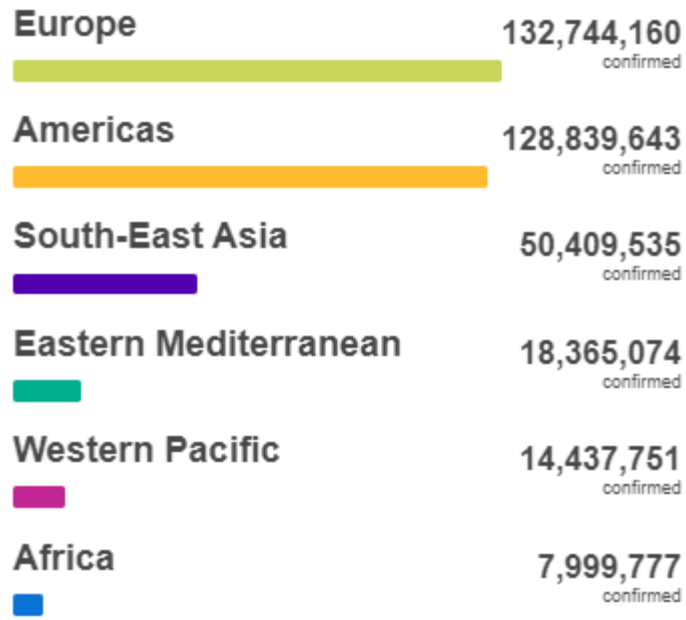
In the last week new **deaths increased 1%** a modest increase from **0.9%** previously

9,620,105,525 vaccine doses administered (23 Jan)

4,023,382,431 people fully vaccinated.

Approximately **51% of the world population** (7.9 billion)

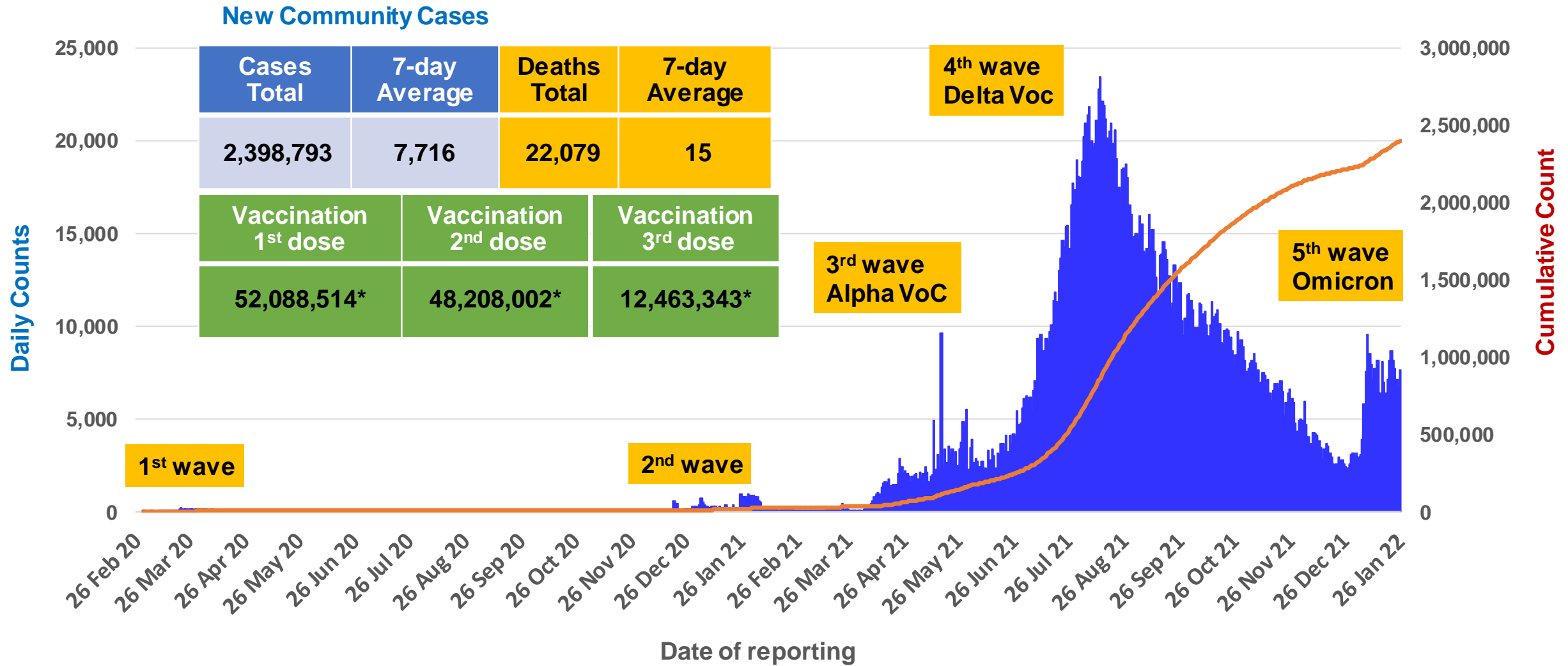
Situation by WHO Region



<https://covid19.who.int/>

National Situation

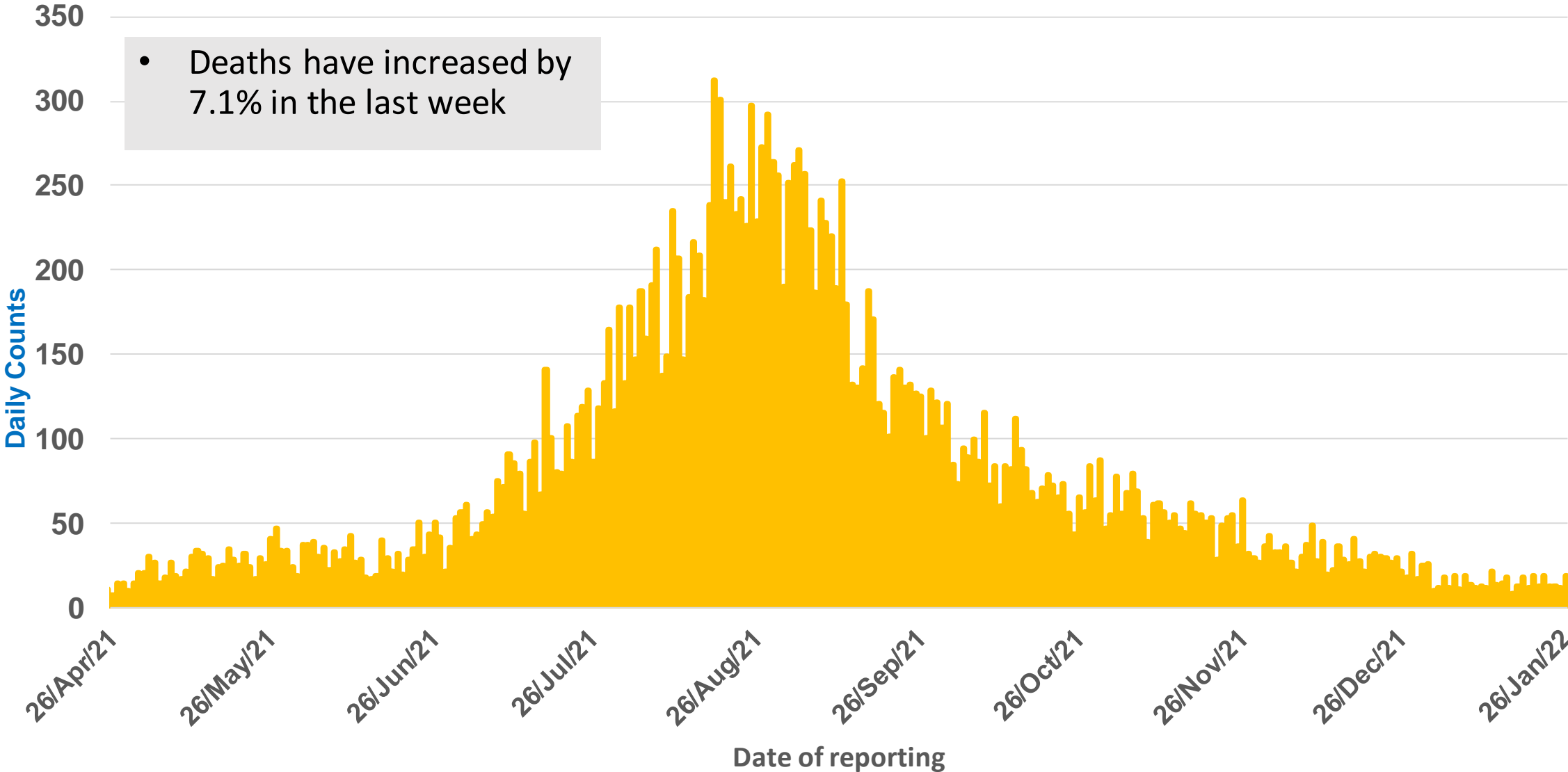
Thailand COVID-19 cases, deaths and vaccinations to date: chart showing cases per day



to 26 Jan 2022,
*to 24 Jan 2022
source MoPH

New **Cumulative**

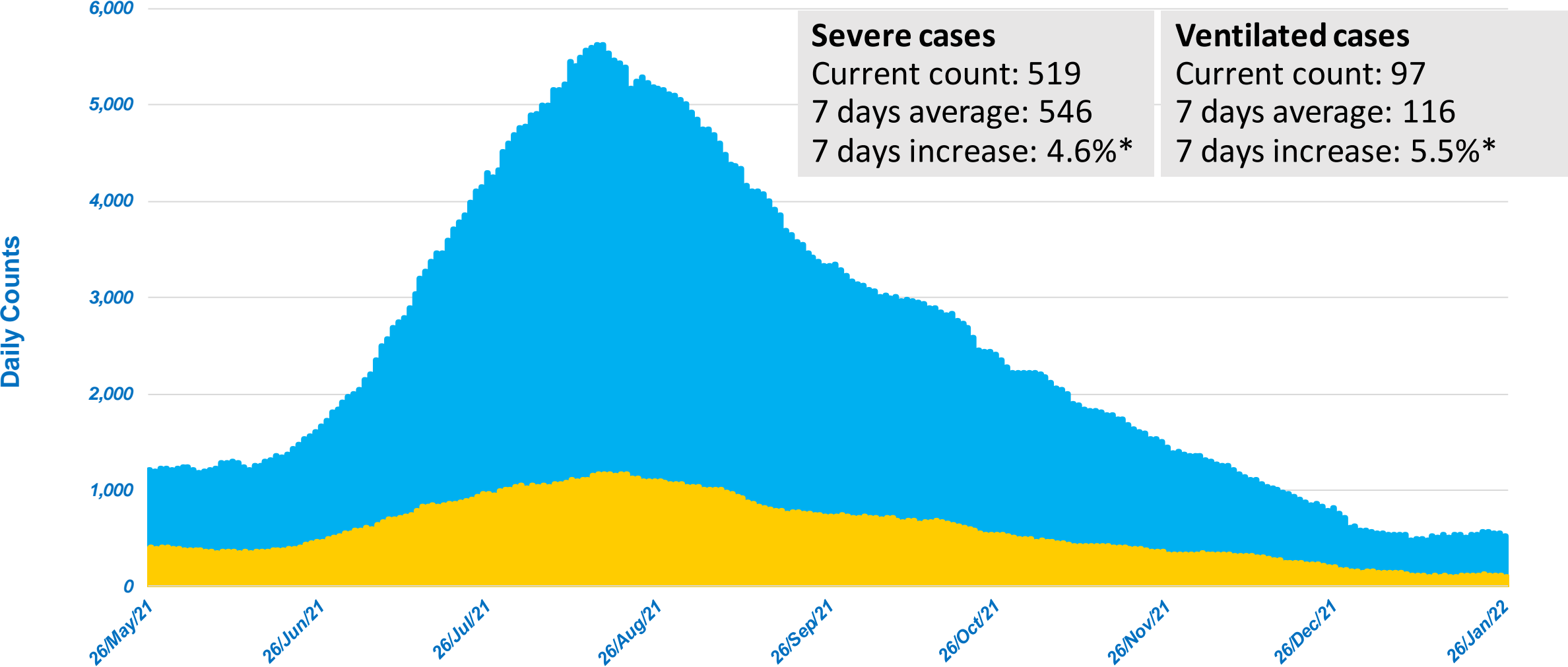
Daily reported COVID-19 deaths in Thailand since April 2021



to 26 Jan 2022
Source MoPH

[Back to Contents](#)

Daily severe & ventilated Covid-19 cases (bed occupancy)



to 26 Jan 2022
Source MoPH

* Compared to the week prior

■ Severe cases ■ Ventilated cases

[Back to Contents](#)

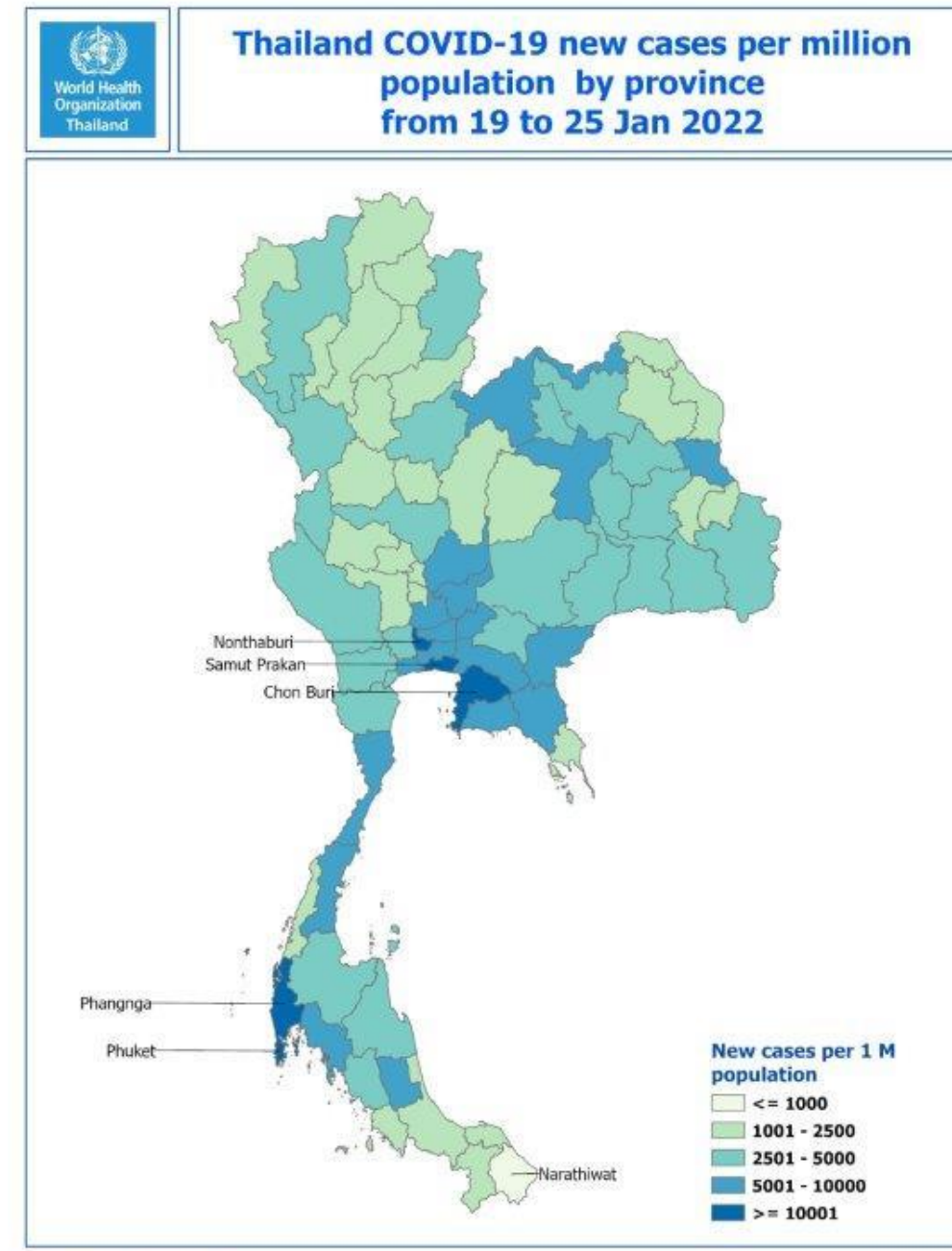


Provincial situation

Map of new cases per million population by province; 19th – 25th January 2022

- There is widespread, ongoing transmission across Thailand, with COVID-19 cases being reported in all 77 provinces
- Similarly to the previous week, the highest rates of new COVID-19 cases continue to be found in the tourist destinations of Phuket and Phangnga in the south and Chonburi in the east, together with Nonthaburi and Samut Prakan
- Medium and higher levels of cases per capita continue to be reported across a geographically wider range of provinces
- Provinces reporting lower cases per capita are in the north, north-central and north-eastern areas.
- The lowest rate of new COVID-19 cases has been reported in the far southern province of Narathiwat

Source MoPH



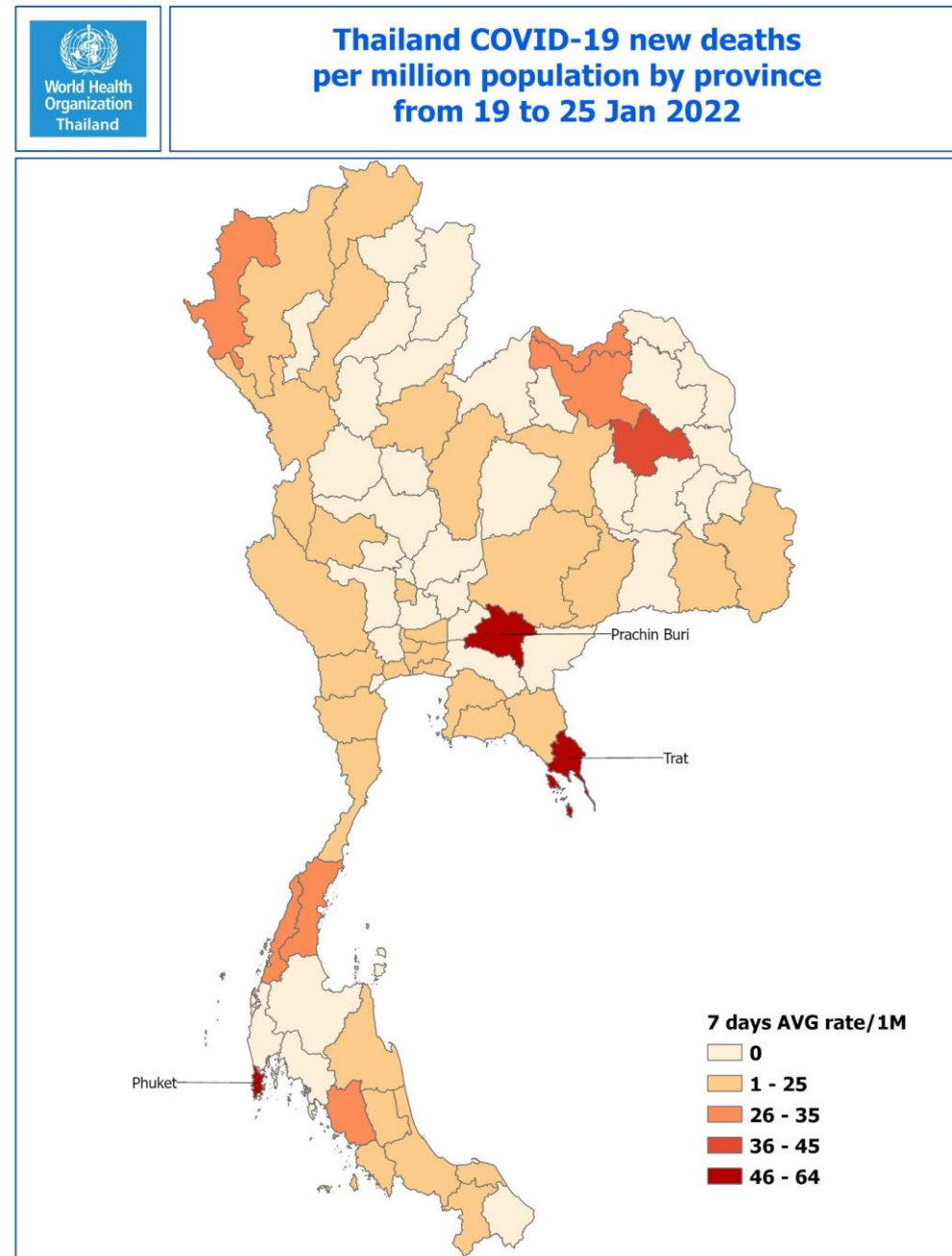
Date of Map: 25 Jan 2022
Data Source: Ministry of Public Health
Date of Data: 25 Jan 2022
WHO Thailand Country Office, IMST COVID-19 Response



Map of new deaths per million population by province 19th to 25th January 2022

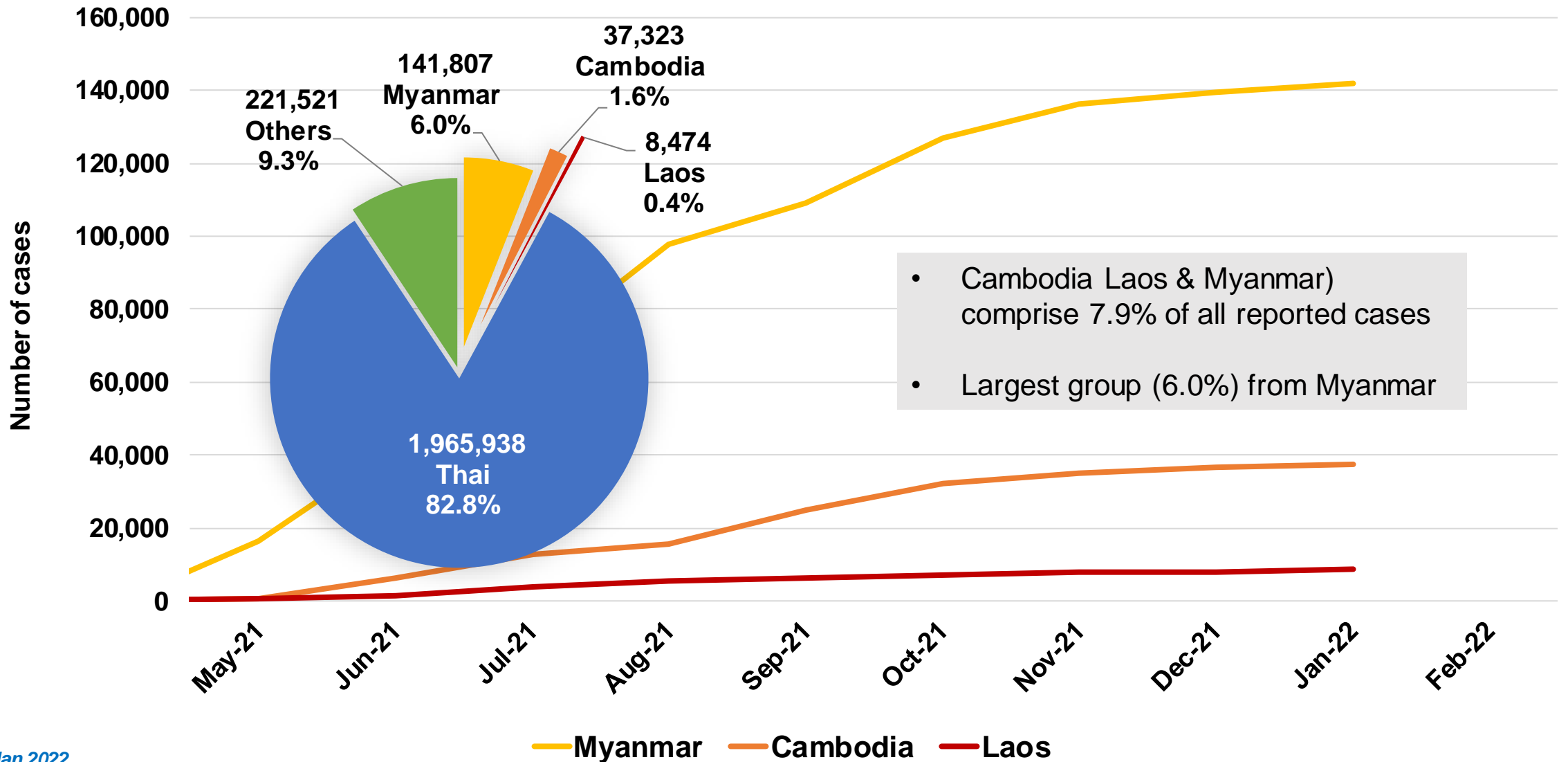
- The distribution of new deaths per capita by province is similar to the previous week.
- Phuket in the south has the greatest number of new deaths per capita, together with Trat, Prachinburi in the east and Kalasin in the northeast, all reporting between 46-64 average deaths per million population over the week
- Lower rates of deaths are being reported across northern, central, eastern and southern provinces

Source MoPH



COVID-19 burden on vulnerable population groups

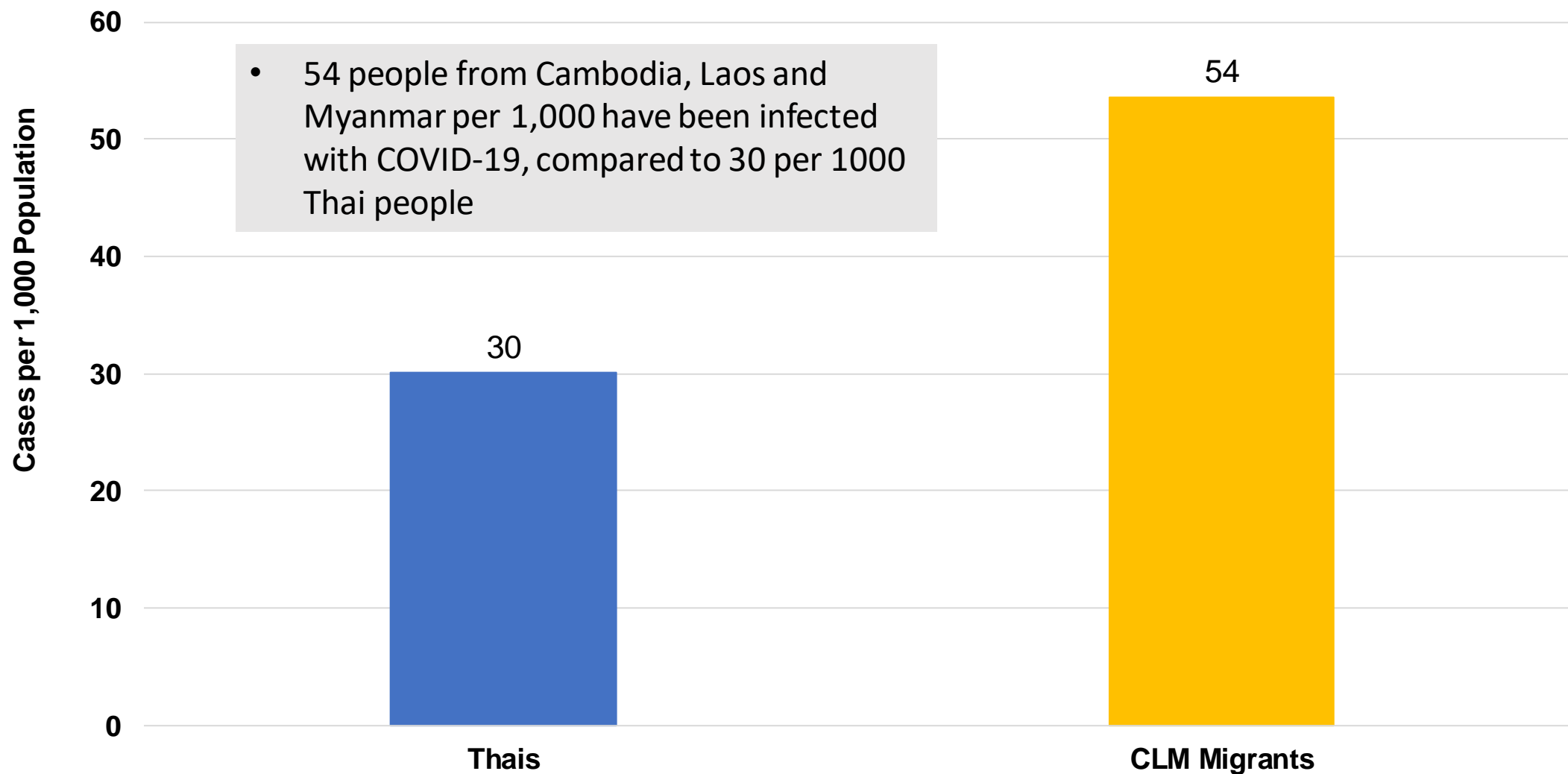
Cumulative COVID-19 Cases reported to date by nationality (25 Jan 2022)



to 25 Jan 2022

[Back to Contents](#)

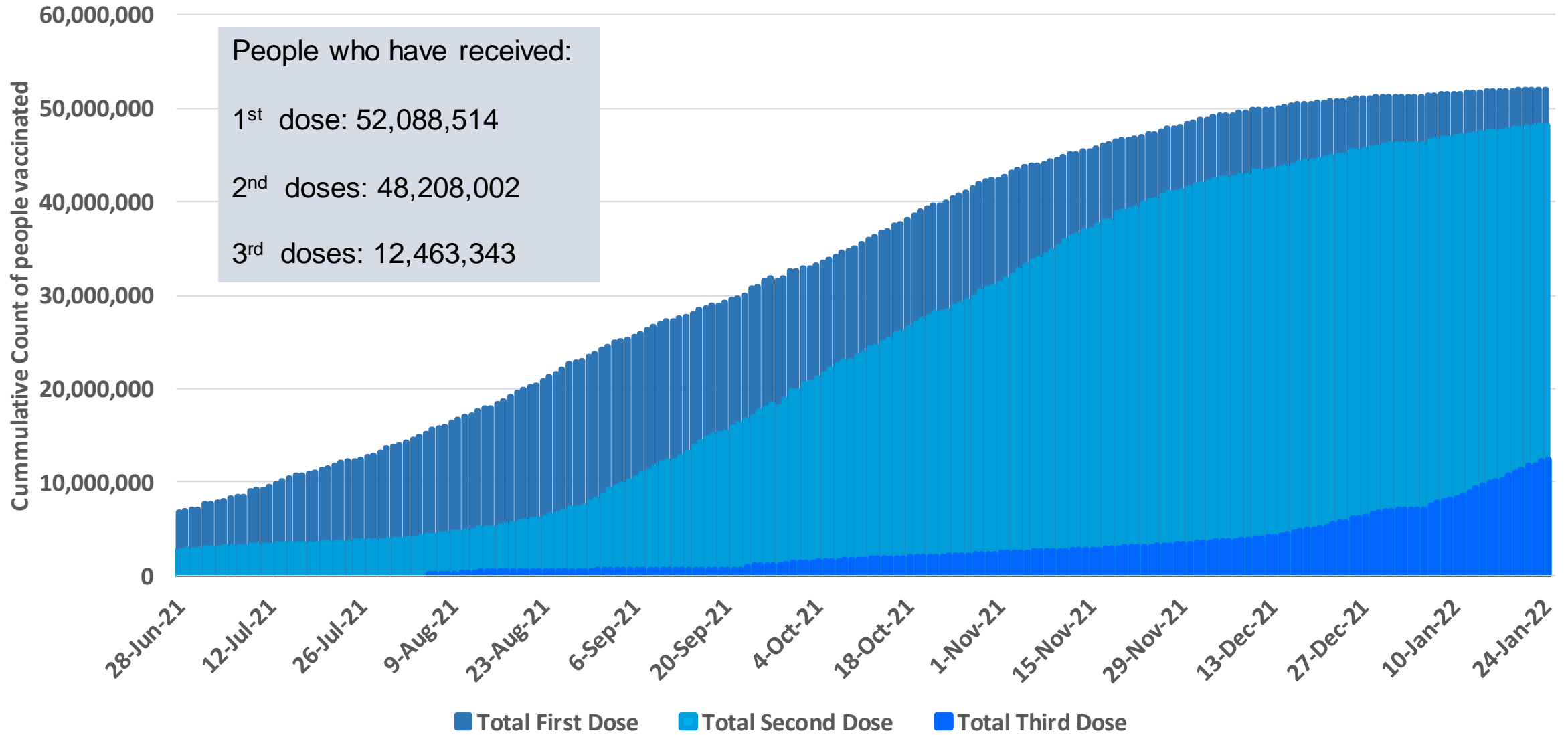
Cases per 1,000 population in Thailand from CLM Migrants (Cambodia, Laos and Myanmar)



- 54 people from Cambodia, Laos and Myanmar per 1,000 have been infected with COVID-19, compared to 30 per 1000 Thai people

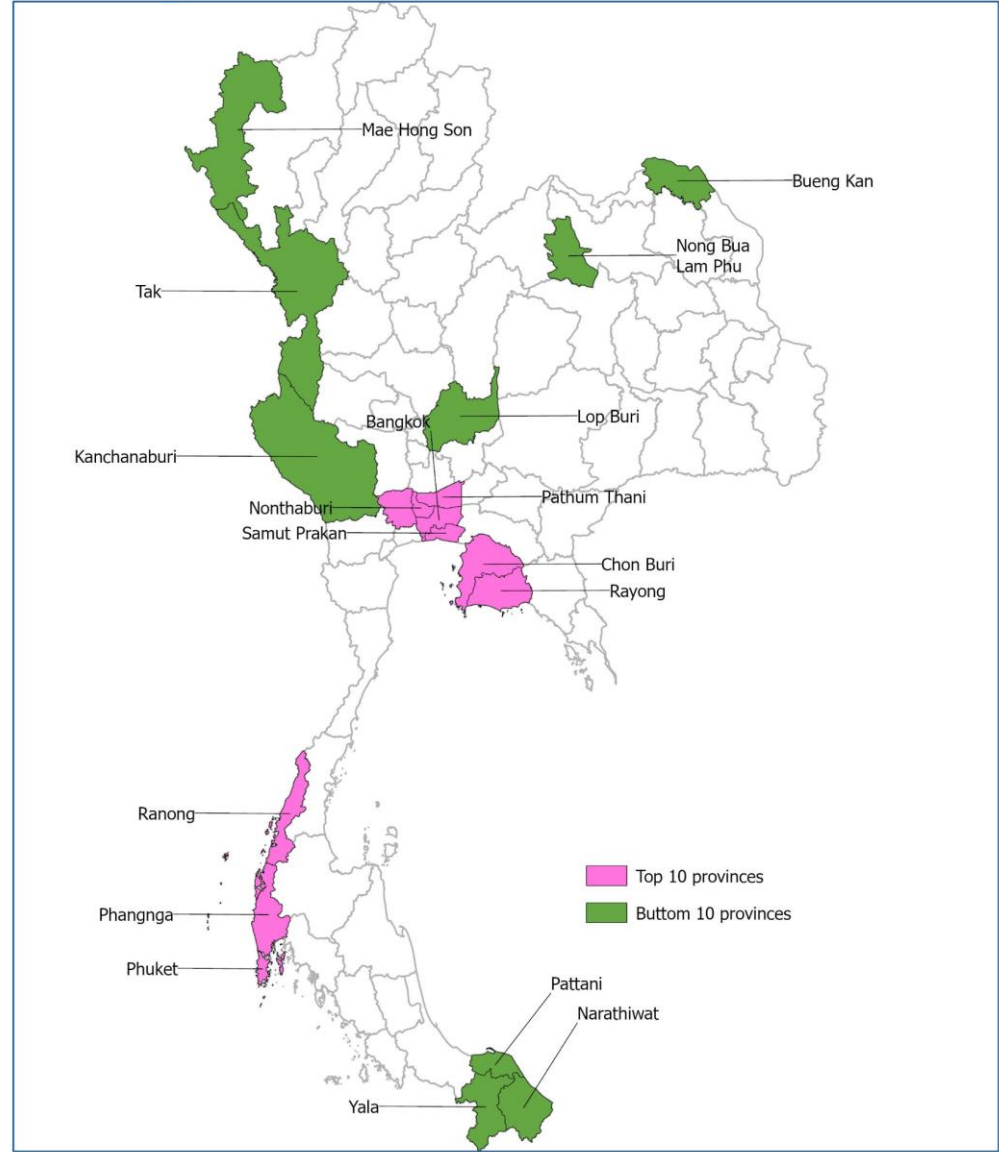
Vaccination

National COVID-19 Vaccination Coverage



Map showing the proportion of people who received 2 vaccine doses in the 10 provinces with the highest coverage and the 10 provinces with the lowest vaccination coverage - as of the 23rd January 2022

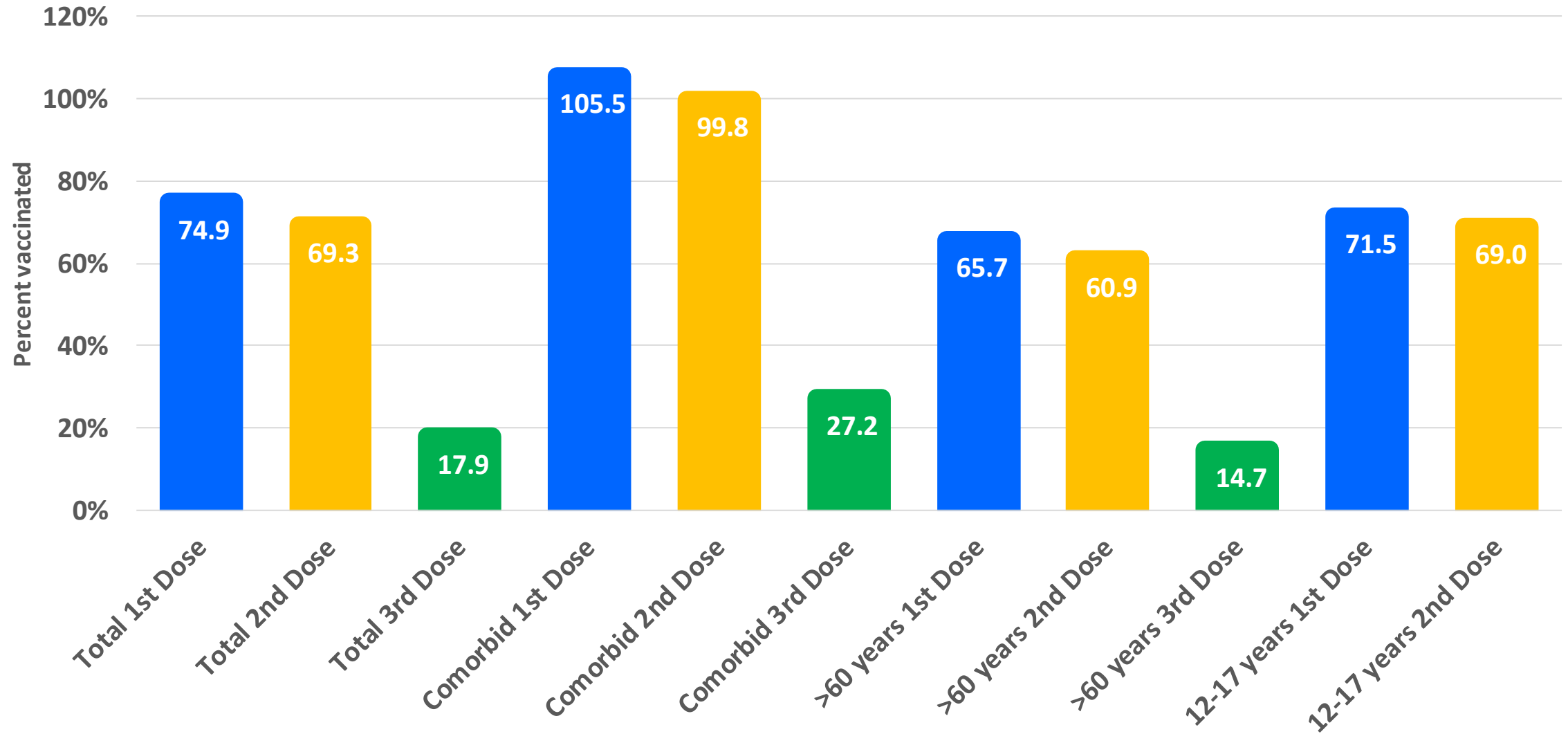
- The distribution of the provinces with the highest 2-dose vaccination coverage per capita remains similar to the previous week, except with the exclusion of Chiang Mai for this week, whereas provinces with the lowest 2-dose vaccination coverage per capita have changed somewhat from previous weeks.
- The highest rates of two-dose vaccination coverage to the 23rd January is found in south-central and southern provinces in the Bangkok Metropolitan Area, Chonburi and Rayong, the southern provinces of Ranong and the tourist destination and 'Sandbox' province of Phuket
- The lowest two-dose vaccination rates are in the rural north/central-western provinces bordering Myanmar, two provinces in the east, including Bueng Kan bordering Laos, and in the three southern-most provinces bordering Malaysia.



Date of Map: 26 Jan 2022
 Data Source: Ministry of Public Health
 Date of Data: 23 Jan 2022
 WHO Thailand Country Office, IMST COVID-19 Response



Vaccination coverage among high risk groups & adolescents (1st dose, 2nd doses, 3rd doses)



To 24 Jan 2022

Source: MoPH

Policy Update

Recommendations for COVID-19 booster dose

***For those who have received the same type of vaccine as primary doses.**

1 st and 2 nd dose	3 rd dose	Interval
Sinovac – Sinovac Sinopharm – Sinopharm	AstraZeneca/ Pfizer/Moderna	At least 4 weeks after 2 nd dose
AstraZeneca – AstraZeneca	Pfizer/Moderna	At least 3 months after 2 nd dose
Pfizer – Pfizer Moderna – Moderna	Pfizer/Moderna	At least 6 months after 2 nd dose

***For those who have received different types of vaccine as primary doses.**

1 st and 2 nd dose	3 rd dose	Interval
Sinovac/Sinopharm – AstraZeneca	AstraZeneca/ Pfizer/Moderna	At least 3 months after 2 nd dose
Sinovac/Sinopharm – Pfizer	Pfizer/Moderna	At least 3 months after 2 nd dose
AstraZeneca – Pfizer	Pfizer/Moderna	At least 6 months after 2 nd dose

#Booster dose vaccine management by the MOPH in January 2022

1. People whose booster dose is due
 1. People who received Sinovac + AZ in August-October 2021 are to mainly receive AZ as a booster dose.
 2. People who received 2 doses of AZ vaccines in August-October 2021 are to mainly receive Pfizer as a booster dose.
 3. People who received 2 doses of Sinovac or Sinopharm vaccines with at least 4-week interval are to mainly receive AZ as a booster dose.
2. Booster dose vaccination in previously infected people
 1. AZ will be the booster dose for partially vaccinated people or people who were fully vaccinated for less than 2 weeks before infection.

**Department of Disease Control, 17 Dec 2021*

#CCSA 14 January 2022

Thailand Entry Requirements

Entry measures enforceable from January 11, 2022 onwards

Sandbox

- Remain in the Sandbox area for 7 days before traveling to other areas.
- Current Sandbox areas include Phuket, Krabi, Phang-nga and Surat Thani (Samui, Tao, Pha-ngun islands)

Conditions

1. Passport
2. Proof of vaccination
3. Accommodation proof (SHA Extra+/AQ 7 days + 2 RT PCR tests + transportation)
4. Insurance coverage of at least 50,000 USD (not for Thais)
5. RT PCR result 72 hours prior to departure (except children aged below 6)
6. Visa (if needed)

Alternative Quarantine

- Quarantine 7 days for fully vaccinated people.
- Quarantine 10 days for **partial/unvaccinated** people.
- **Quarantine 14 days for illegal crossing travelers.**

Conditions

1. Passport
2. Proof of vaccination (for people who need to quarantine for 7 or 10 days)
3. Accommodation proof (AQ 7/10 days + 2 RT PCR tests + transportation)
4. Insurance coverage of at least 50,000 USD (not for Thais)
5. RT PCR result 72 hours prior to departure (except children aged below 6)
6. Visa (if needed)

Notes:

- SHA is a certificate given by the Tourism Authority of Thailand (TAT) to hotels and services that meet pandemic-level safety and health standards. SHA Extra+ are additional measures that includes at least 70% of staff are fully vaccinated and the hotel has a partnership with certified hospitals able to provide PCR testing
- AQ is Alternative Quarantine in government approved hotels providing COVID-19 level safety and health standards
- The second RT-PCR test is required for Day 5-6 for all travelers.
- **Close monitoring and tracking is necessary via Mor Chana application**



EXPLAINER: COVID-19 Risks in 5-11 year olds

Are young children at risk from COVID-19?

Yes. As with adults, children infected with the Omicron strain of the COVID-19 virus may not be particularly unwell with few or no symptoms. However, children can still get sick from COVID-19 either from the Omicron or other strains of the virus. Countries experiencing widespread Omicron COVID-19 outbreaks have recently been reporting high rates of hospital admissions in the 5-11 age group.

COVID-19 vaccines have proven to be safe and effective at preventing severe disease and death in adults, and more recently, in those aged 11 years old and above. With increasing vaccination coverage in those age groups, attention is now turning towards vaccinating younger ages, those from 5 to 11. Do these younger age children need to be vaccinated? And is it safe to do so? This is the first of a two-part explainer looking at COVID-19 risks and vaccination in children aged 5-11 years.

The average time interval between cases in a chain of transmission (called the serial interval) is 33% shorter with Omicron compared to Delta, and the likelihood of being infected (called the secondary attack rate) is twice that compared to Delta. Omicron has also shown increased immune evasion resulting in more re-infections in those who have previously had COVID-19 (5.4 times higher than Delta) and breakthrough infections in those that have been vaccinated. This means Omicron is being more easily transmitted, to more people, more quickly, particularly in confined unventilated spaces such as within homes (Omicron having three times (2.9) greater transmission risk within households compared to Delta). Such is the speed of spread of Omicron that modelling predictions suggest 40% of some populations may become infected with Omicron in the next few months. This includes children.

Children in the 5-11 age group are being infected with COVID-19. In the UK, from the middle of December when Omicron was surging, the fastest increase in hospitalisations occurred in those aged 5. The majority experienced mild symptoms, though 12% (12.7%) required oxygen. In New York at the beginning of January, the second-largest increase in cases, increasing by 465%, was in those aged 5-11 years, the largest increase being those aged 12-18 with an increase of 940%. During the same period, over half of the children (54%) admitted to hospitals in New York had no underlying health conditions. Two-thirds (64%) were symptomatic though nearly half (47%) were not admitted primarily because of COVID-19. In case reports from South Africa, the UK, the USA and Canada hospital admission including for

these younger age groups, are reporting COVID-19 as an incidental infection, i.e. COVID-19 is present though not the main cause for admission. This demonstrates that children are at risk of infection from COVID-19, that it can be serious, requiring oxygen to support breathing and that COVID-19 may exacerbate existing chronic or acute conditions.

In Thailand, the Omicron variant has been reported from all 77 provinces. While adult, and increasingly 11-17 year-olds, vaccination coverage is high at the national level, a significant minority of the population remain unvaccinated, and there are large differences in vaccination coverage across provinces, even before vaccinating the 5-11-year-olds. Because Omicron is often asymptomatic, people may be unaware of their infection. This means that COVID-19 continues to pose significant health risks for older people and those with chronic underlying health conditions of all ages. This is made worse by the increased transmissibility of Omicron and the multi-generational high-density family living that occurs in Thailand. So even though most children may not appear to be unwell if they are infected with Omicron, they may transmit to those that are more vulnerable, including family members. Some children will also be more severely affected, requiring hospitalisation either directly for COVID-19 or indirectly through the worsening of pre-existing health conditions. As with adults and adolescents, children are at risk to themselves from COVID-19 and a risk to others if they spread COVID-19.

Next week will look at vaccination of 5-11-year-olds.



Click on the image to hear Dr Tedros Adhanom Ghebreyesus WHO Director-General, discuss why we should still be concerned about COVID-19.

USEFUL LINKS

- The Thailand COVID19 situation report is available in Thai and English, please [visit](#)
- For regular updates on WHO's response in Thailand, please [visit](#)
- For global figures and technical advice from WHO, please [visit](#)

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