

COVID-19 Weekly Epidemiological Update

Edition 109 published 14 September 2022

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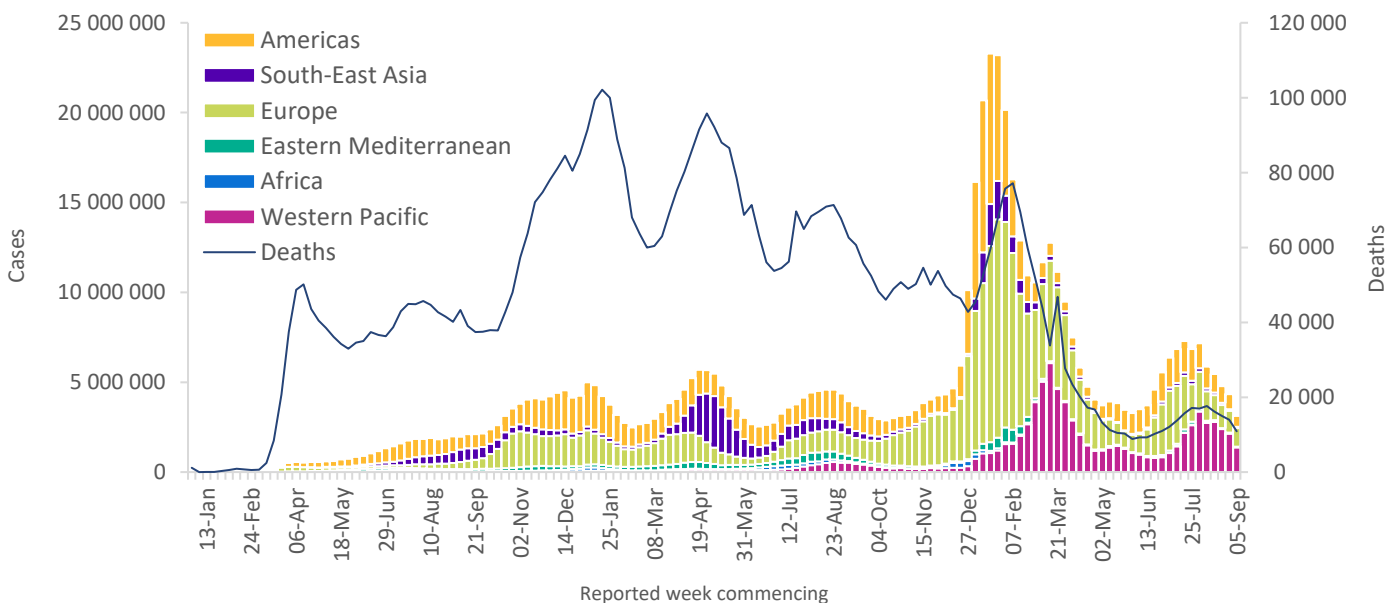
Global overview

Data as of 11 September 2022

Globally, the number of new weekly cases decreased by 28% during the week of 5 to 11 September 2022, as compared to the previous week, with over 3.1 million new cases reported (Figure 1, Table 1). The number of new weekly deaths decreased by 22% as compared to the previous week, with just under 11 000 fatalities reported. As of 11 September 2022, over 605 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 WHO regions: the Western Pacific Region (-36%), the African Region (-33%), the Region of the Americas (-27%), the South-East Asia Region (-20%), the Eastern Mediterranean Region (-19%) and the European Region (-15%). The number of new weekly deaths decreased across five of the six regions: the European Region (-31%), the South-East Asia Region (-25%), the Region of the Americas (-22%), the Western Pacific Region (-11%), the Eastern Mediterranean Region (-10%); while it increased in the African Region (+10%).

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 11 September 2022**



**See [Annex 1: Data, table, and figure notes](#)

At the country level, the highest numbers of new weekly cases were reported from Japan (537 181 new cases; -54%), the Republic of Korea (435 695 new cases; -26%), the United States of America (430 048 new cases; -26%), the Russian Federation (337 187 new cases; +4%) and China (263 288 new cases; +11%). The highest numbers of new weekly deaths were reported from the United States of America (2306 new deaths; -21%), Japan (1681 new deaths; -18%), the Russian Federation (637 new deaths; +1%), Brazil (551 new deaths; -36%) and the Philippines (440 new deaths; +28%).

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 previous weeks are continuously updated to retrospectively incorporate changes in reported COVID-19 cases and deaths made by countries.

Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 11 September 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 (%)
Western Pacific	1 374 533 (44%)	-36%	86 563 513 (14%)	3 289 (30%)	-11%	265 184 (4%)
Europe	1 037 111 (33%)	-15%	249 801 915 (41%)	2 817 (26%)	-31%	2 083 723 (32%)
Americas	610 303 (19%)	-27%	176 886 543 (29%)	3 998 (37%)	-22%	2 825 662 (44%)
South-East Asia	72 601 (2%)	-20%	60 125 926 (10%)	453 (4%)	-25%	796 444 (12%)
Eastern Mediterranean	27 586 (1%)	-19%	23 022 557 (4%)	321 (3%)	-10%	347 977 (5%)
Africa	8 841 (<1%)	-33%	9 308 479 (2%)	57 (1%)	10%	174 404 (3%)
Global	3 130 975 (100%)	-28%	605 709 697 (100%)	10 935 (100%)	-22%	6 493 407 (100%)

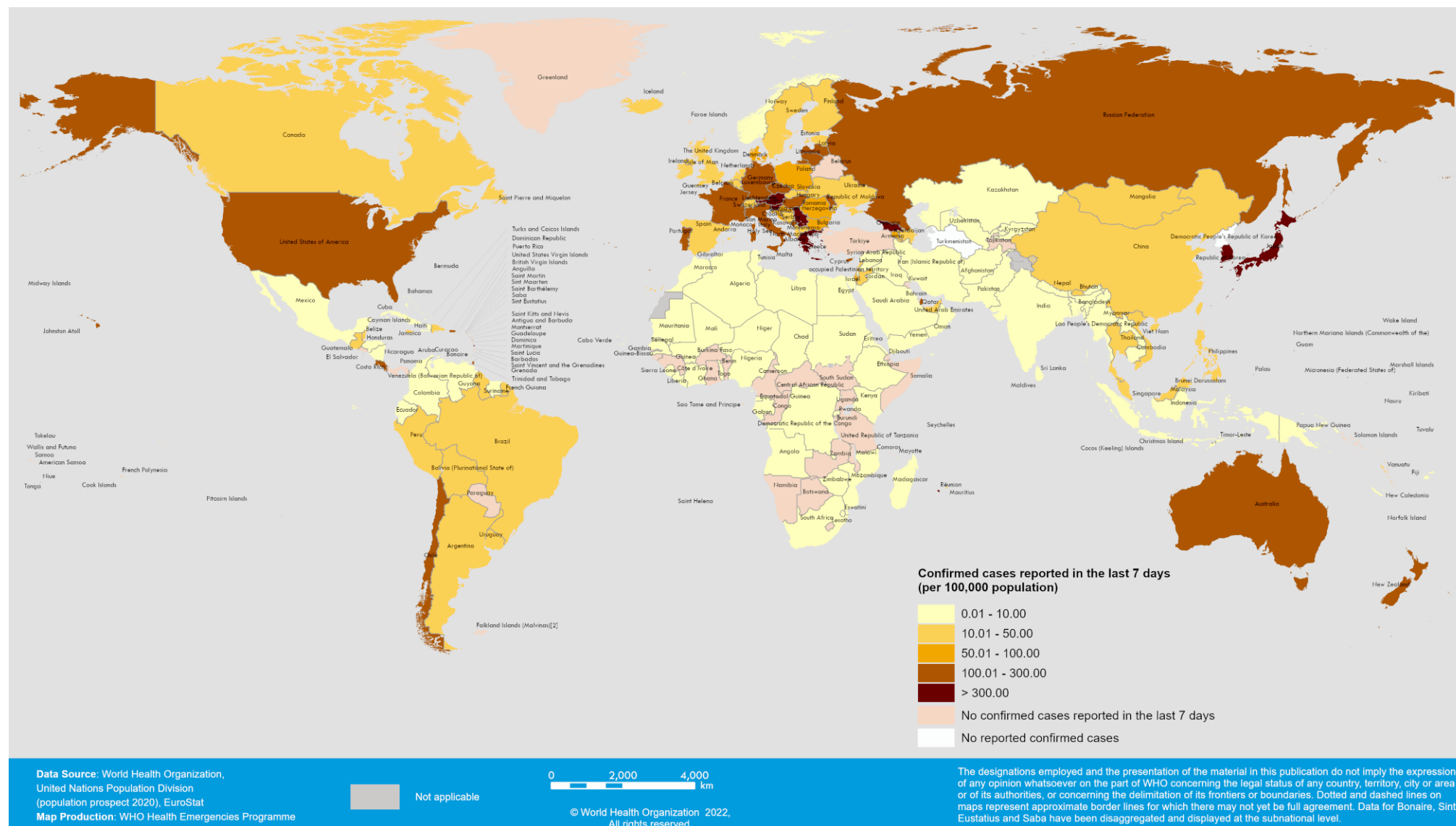
*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior. Data from previous weeks are updated continuously with adjustments received from countries.

**See [Annex 1: Data, table, and figure notes](#)

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

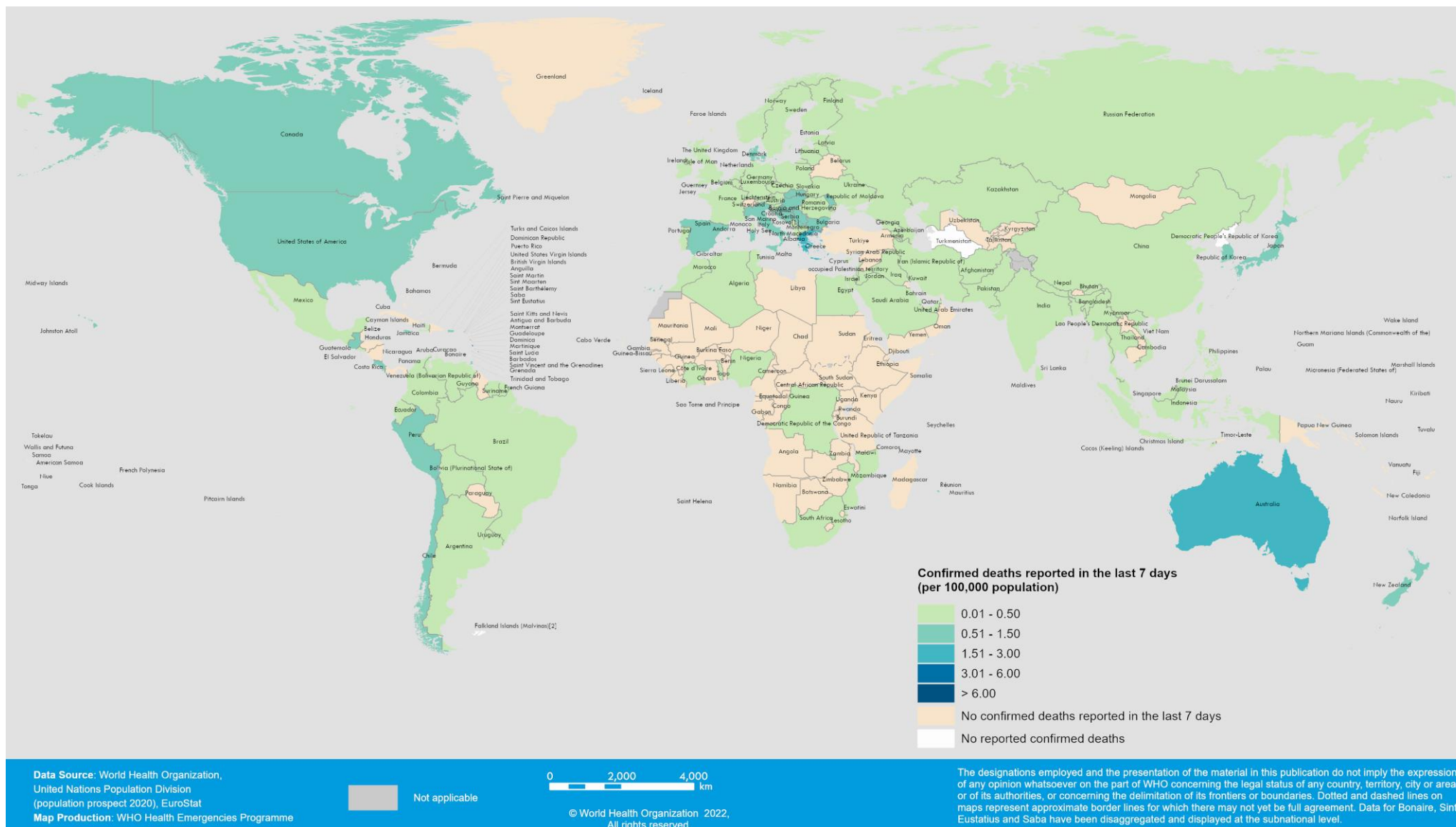
- [WHO COVID-19 Dashboard](#)
- [WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update](#)
- [WHO COVID-19 detailed surveillance data dashboard](#)

Figure 2. COVID-19 cases per 100 000 population reported by countries, territories and areas, 5 - 11 September 2022*



**See [Annex 1: Data, table, and figure notes](#)

Figure 3. COVID-19 deaths per 100 000 population reported by countries, territories and areas, 5 - 11 September 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 12 August to 12 September 2022, 123 400 SARS-CoV-2 sequences were shared through GISAID. Among these, 122 374 sequences were the Omicron variant of concern (VOC), accounting for 99.2% of sequences reported globally in the past 30 days.

A comparison of sequences submitted to GISAID in epidemiological week 35 (29 August to 4 September 2022) and week 34 (22 to 28 August 2022) shows that BA.5 Omicron descendent lineages continue to be dominant globally, with an increase in weekly prevalence from 82.4% to 90.0%. The prevalence of BA.4 descendent lineages (including BA.4.6) decreased from 8.0% in week 34 to 6.1% in week 35. The prevalence of BA.2 descendent lineages (BA.2.X) increased in week 35 compared to week 34 (2.3% in week 34 and 3.2% in week 35). BA.2.75 is an Omicron descendent lineage under monitoring that continues to show low prevalence globally (1.0% and 2.2% in weeks 34 and 35 respectively).

WHO continues to monitor SARS-CoV-2 variants, including descendent lineages of VOCs, to track changes in prevalence and viral characteristics. The current trends describing the circulation of Omicron descendent lineages should be interpreted with due consideration of the limitations of the COVID-19 surveillance systems. These include differences in sequencing capacity and sampling strategies between countries, changes in sampling strategies over time, 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](#)
- [VIEW-hub: repository for the most relevant and recent vaccine data](#)

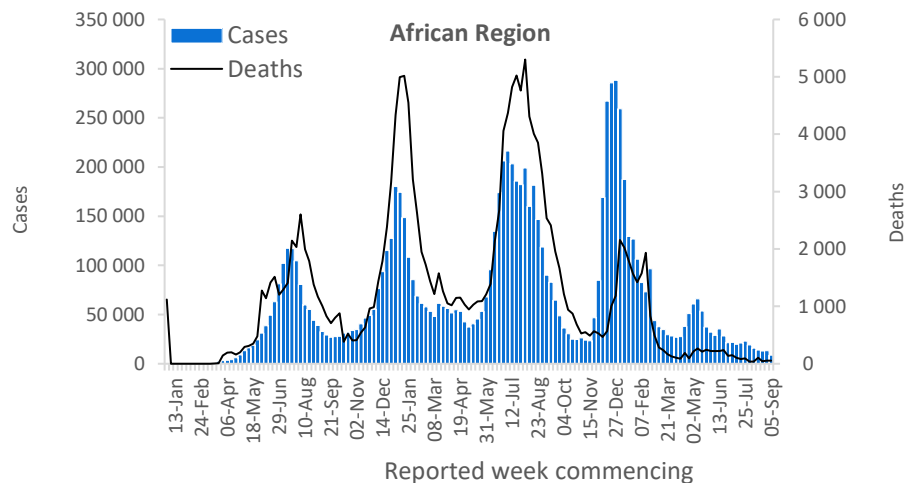
WHO regional overviews:

Epidemiological week 5 - 11 September 2022**

African Region

The African Region reported over 8800 new weekly cases, a 33% decrease as compared to the previous week. Nine (18%) countries reported increases in the number of new cases of 20% or greater, with some of the greatest proportional increases seen in Mali (629 vs 262 new cases; +140%), Liberia (31 vs 15 new cases; +107%) and Zimbabwe (115 vs 56 new cases; +105%). The highest numbers of new cases were reported from Réunion (4661 new cases; 520.6 new cases per 100 000 population; -34%), South Africa (1792 new cases; 3.0 new cases per 100 000; +41%) and Mali (629 new cases; 3.1 new cases per 100 000; +140%).

The number of new weekly deaths in the Region increased by 10% as compared to the previous week, with 57 deaths reported. The highest numbers of new deaths were reported from South Africa (21 new deaths; <1 new death per 100 000 population; -13%), the Democratic Republic of the Congo (17 new deaths; <1 new death per 100 000; +325%) and Nigeria (six new deaths; <1 new death per 100 000; no deaths reported during the previous week).

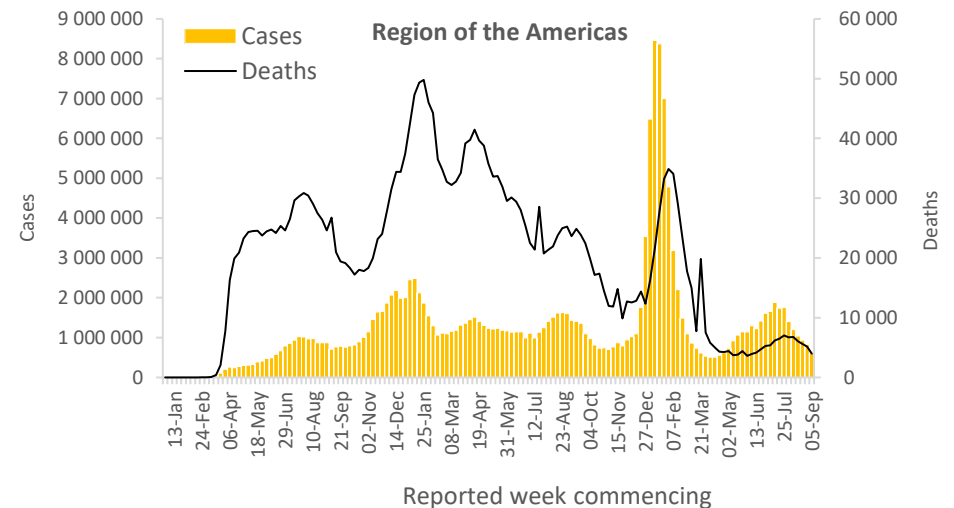


Updates from the [African Region](#)

Region of the Americas

The Region of the Americas reported over 610 000 new cases, a 27% 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 some of the greatest proportional increases observed in Montserrat (86 vs 64 new cases; +34%), Venezuela (Bolivarian Republic of) (890 vs 665 new cases; +34%) and Aruba (122 vs 98 new cases; +24%). The highest numbers of new cases were reported from the United States of America (430 048 new cases; 129.9 new cases per 100 000; -26%), Brazil (60 594 new cases; 28.5 new cases per 100 000; -31%) and Chile (32 268 new cases; 168.8 new cases per 100 000; -19%).

The number of new weekly deaths reported in the Region decreased by 22% as compared to the previous week, with just under 4000 new deaths reported. The highest numbers of new deaths were reported from the United States of America (2306 new deaths; <1 new death per 100 000; -21%), Brazil (551 new deaths; <1 new death per 100 000; -36%) and Peru (255 new deaths; <1 new death per 100 000; +9%).

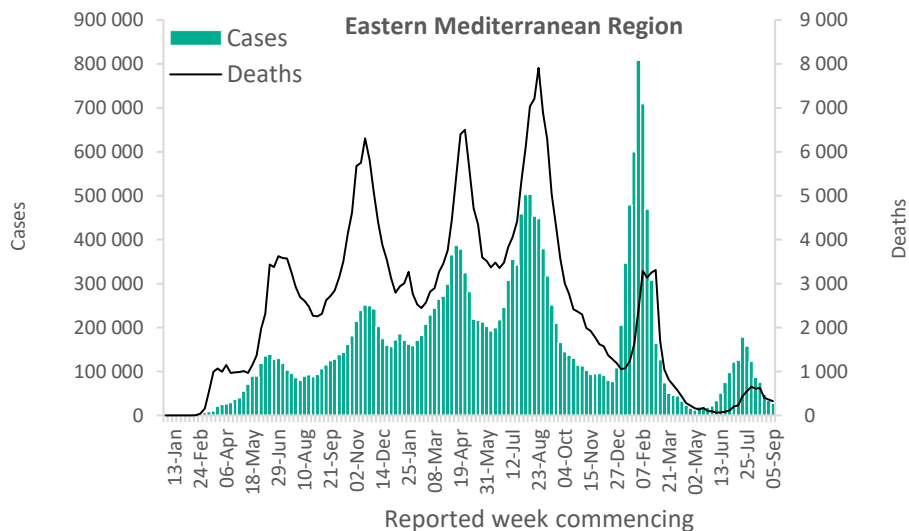


Updates from the [Region of the Americas](#)

Eastern Mediterranean Region

The Eastern Mediterranean Region reported over 27 000 new cases, a 19% decrease as compared to the previous week. Three (14%) countries reported increases in new cases of 20% or greater, with the highest proportional increases observed in Yemen (six vs one new cases; +500%), Sudan (23 vs 14 new cases; +64%) and Tunisia (962 vs 695 new cases; +38%). The highest numbers of new cases were reported from the Islamic Republic of Iran (7800 new cases; 9.3 new cases per 100 000; -31%), Qatar (4247 new cases; 147.4 new cases per 100 000; +8%) and Jordan (3372 new cases; 33.0 new cases per 100 000; -15%).

The number of new weekly deaths decreased in the Region by 10% as compared to the previous week, with over 300 new deaths reported. The highest numbers of new deaths were reported from the Islamic Republic of Iran (260 new deaths; <1 new death per 100 000; -8%), Saudi Arabia (13 new deaths; <1 new death per 100 000; similar to the previous week's figures) and Pakistan (11 new deaths; <1 new death per 100 000; -35%).

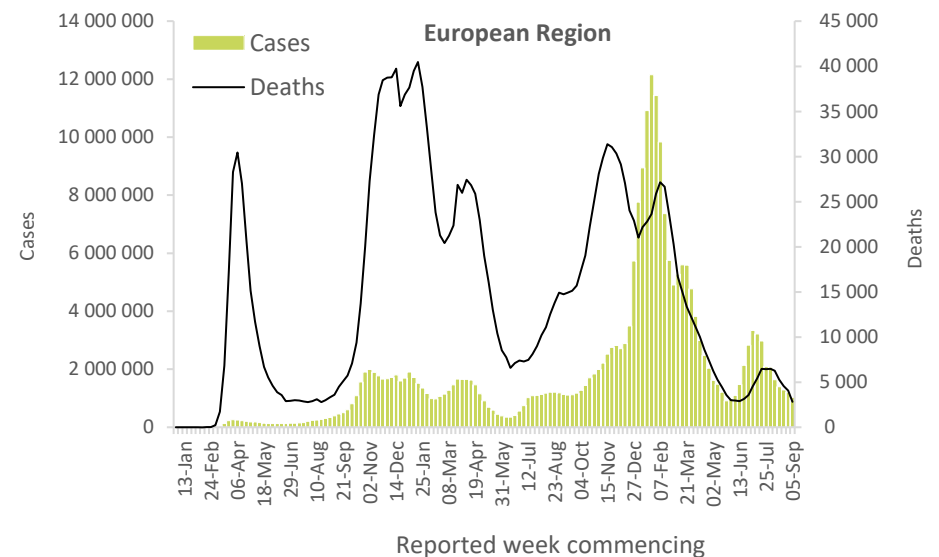


Updates from the [Eastern Mediterranean Region](#)

European Region

The European Region reported over 1 million new cases, a 15% decrease as compared to the previous week. Four (7%) countries reported increases in new cases of 20% or greater, with the highest proportional increases observed in Ukraine (16 155 vs 11 437 new cases; +41%), Slovenia (11 076 vs 8872 new cases; +25%) and Poland (25 133 vs 20 247 new cases; +24%). The highest numbers of new cases were reported from the Russian Federation (337 187 new cases; 231.1 new cases per 100 000; similar to the previous week's figures), Germany (183 874 new cases; 221.1 new cases per 100 000; -9%) and Italy (110 644 new cases; 185.5 new cases per 100 000; -19%).

Over 2800 new weekly deaths were reported in the Region, a 31% decrease as compared to the previous week. The highest numbers of new deaths were reported from the Russian Federation (637 new deaths; <1 new death per 100 000; similar to the previous week), Italy (373 new deaths; <1 new death per 100 000; -25%) and Spain (326 new deaths; <1 new death per 100 000; -7%).

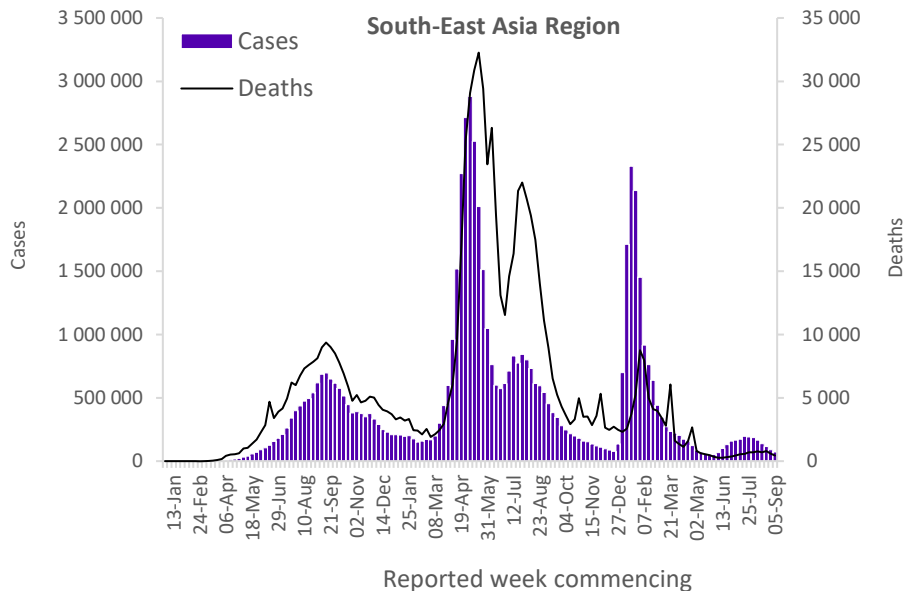


Updates from the [European Region](#)

South-East Asia Region

The South-East Asia Region reported over 72 000 new cases, a 20% decrease as compared to the previous week. Three of the 10 countries (30%) in the Region for which data are available showed an increase in the number of new cases of 20% or greater: Myanmar (1293 vs 597 new cases; +117%), Bangladesh (2126 vs 1444 new cases; +47%) and Timor-Leste (33 vs 25; +32%). The highest numbers of new cases were reported from India (38 824 new cases; 2.8 new cases per 100 000; -20%), Indonesia (19 950 new cases; 7.3 new cases per 100 000; -24%) and Thailand (9004 new cases; 12.9 new cases per 100 000; -26%).

The Region reported over 400 deaths, a 25% decrease as compared to the previous week. The highest numbers of new deaths were reported from India (159 new deaths; <1 new death per 100 000; -33%), Thailand (139 new deaths; <1 new death per 100 000; -22%) and Indonesia (123 new deaths; <1 new death per 100 000; -16%).

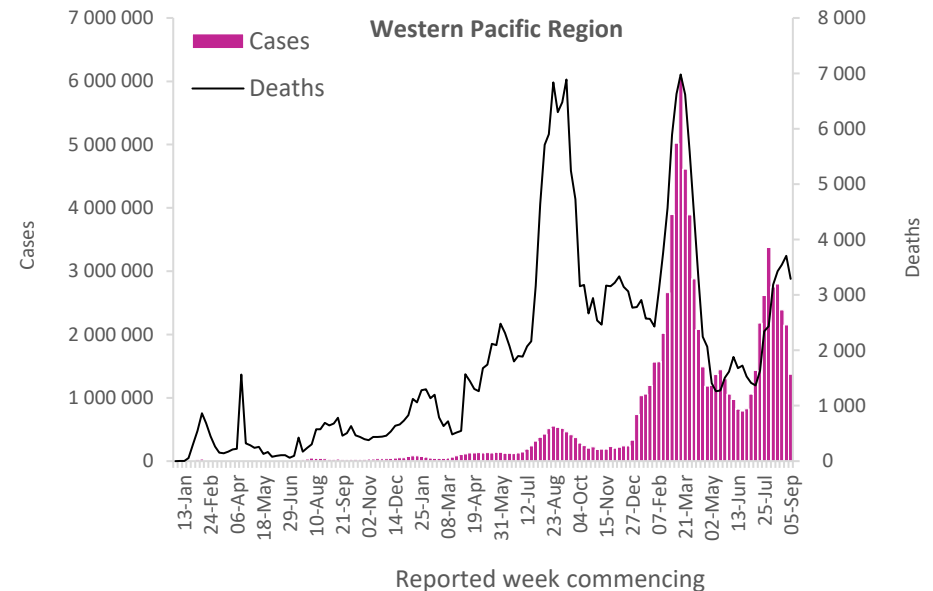


Updates from the [South-East Asia Region](#)

Western Pacific Region

The Western Pacific Region reported just over 1.3 million new cases, a 36% decrease as compared to the previous week. Two (6%) countries reported increases in new cases of 20% or greater, with the largest proportional increases observed in Papua New Guinea (20 vs 15 new cases; +33%) and Viet Nam (20 467 vs 15 906 new cases; +29%). The highest numbers of new cases were reported from Japan (537 181 new cases; 424.7 new cases per 100 000; -54%), the Republic of Korea (435 695 new cases; 849.8 new cases per 100 000; -26%) and China (263 288 new cases; 17.9 new cases per 100 000; +11%).

The Region reported an 11% decrease in new weekly deaths as compared to the previous week, with over 3200 deaths reported. The highest numbers of new deaths were reported from Japan (1681 new deaths; 1.3 new deaths per 100 000; -18%), the Philippines (440 new deaths; <1 new death per 100 000; +28%) and Australia (407 new deaths; 1.6 new deaths per 100 000; +11%).



Updates from the [Western Pacific Region](#)

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.

^[2] A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).

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.