

COVID-19 Weekly Epidemiological Update

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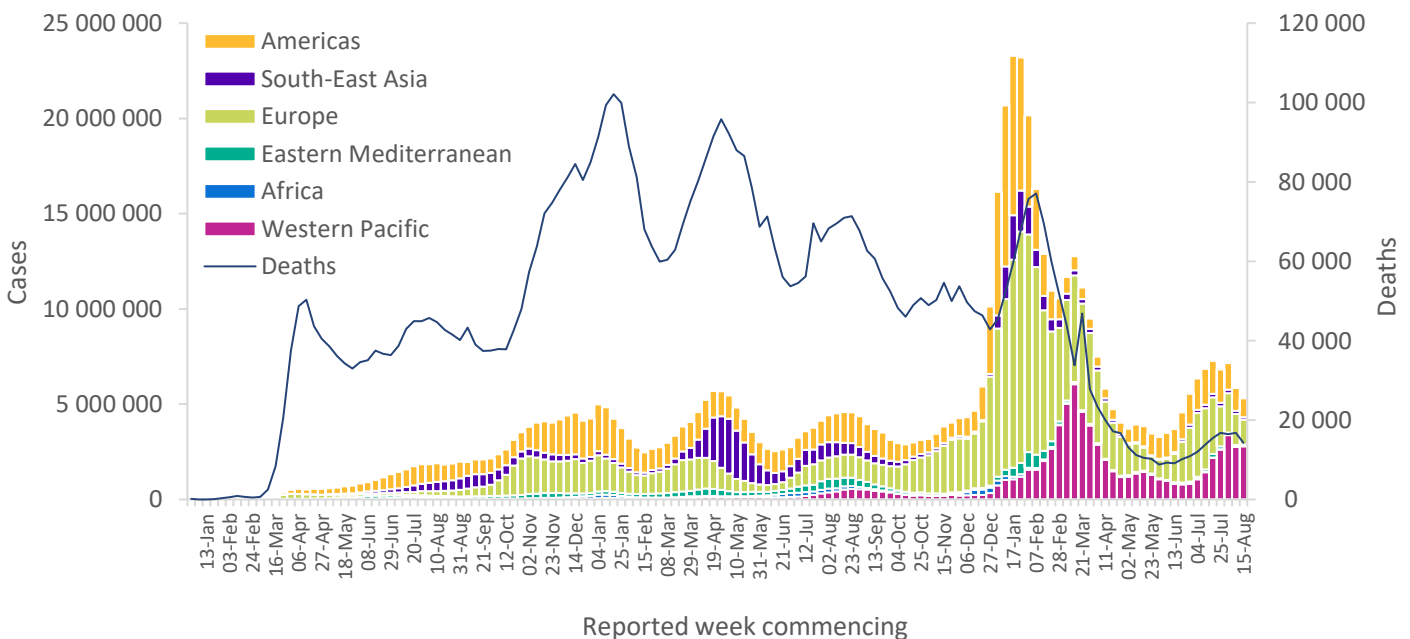
Global overview

Data as of 21 August 2022

Globally, the number of new weekly cases decreased by 9% during the week of 15 to 21 August 2022, as compared to the previous week, with over 5.3 million new cases reported (Figure 1, Table 1). The number of new weekly deaths decreased by 15%, as compared to the previous week, with over 14 000 fatalities reported. As of 21 August 2022, 593 million confirmed cases and 6.4 million deaths have been reported globally.

At the regional level, the number of reported new weekly cases decreased or remained stable across all six regions: the African Region (-25%), the European Region (-20%), the Region of the Americas (-18%), the South-East Asia Region (-17%), the Eastern Mediterranean Region (-13%), and the Western Pacific Region (+2%). The number of new weekly deaths increased in the African Region (+183%) and the Western Pacific Region (+8%), while it decreased or remained stable in the European Region (-30%), the Region of the Americas (-15%), the South-East Asia Region (-11%), and the Eastern Mediterranean Region (+3%).

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 21 August 2022**



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

At the country level, the highest numbers of new weekly cases were reported from Japan (1 476 374 new cases; +6%), the Republic of Korea (884 373 new cases; +2%), the United States of America (612 378 new cases; -13%), Germany (240 998 new cases; -19%), and the Russian Federation (235 385 new cases; +39%). The highest number of new weekly deaths were reported from the United States of America (2714 new deaths; -13%), Japan (1624 new deaths; -1%), Brazil (1105 new deaths; -26%), Italy (677 new deaths; -26%), and Australia (490 new deaths; -9%).

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

Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 21 August 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	2 796 888 (53%)	2%	80 644 476 (14%)	3 424 (24%)	8%	254 637 (4%)
Europe	1 305 837 (25%)	-20%	246 166 703 (41%)	4 055 (28%)	-30%	2 069 166 (32%)
Americas	979 882 (18%)	-18%	174 395 054 (29%)	5 421 (38%)	-15%	2 808 962 (44%)
South-East Asia	137 350 (3%)	-17%	59 846 866 (10%)	686 (5%)	-11%	794 597 (12%)
Eastern Mediterranean	75 095 (1%)	-13%	22 913 131 (4%)	625 (4%)	3%	346 894 (5%)
Africa	11 192 (<1%)	-25%	9 269 272 (2%)	99 (1%)	183%	174 235 (3%)
Global	5 306 244 (100%)	-9%	593 236 266 (100%)	14 310 (100%)	-15%	6 448 504 (100%)

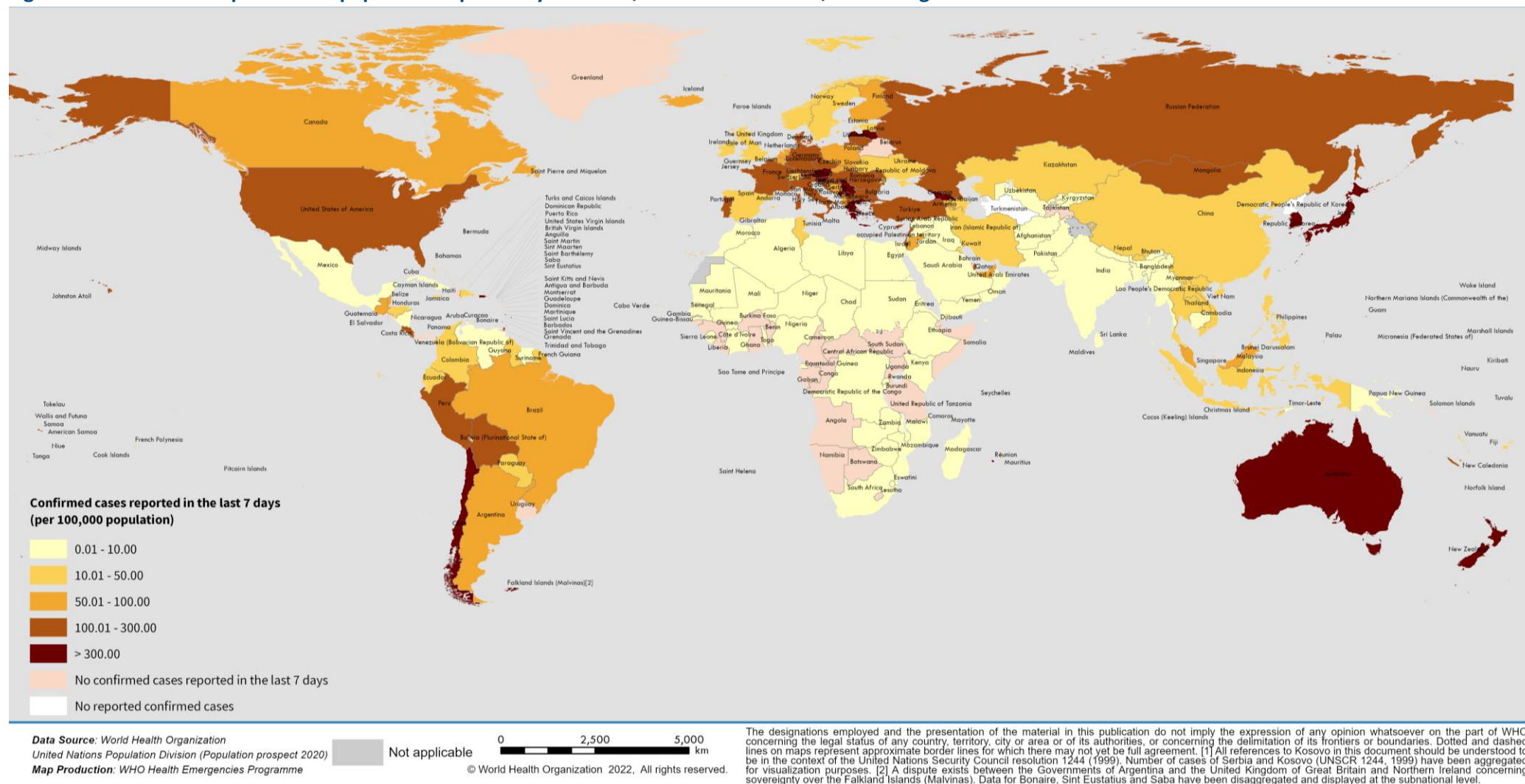
*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior. Data from previous weeks are updated continuously with adjustments received from countries.

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

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

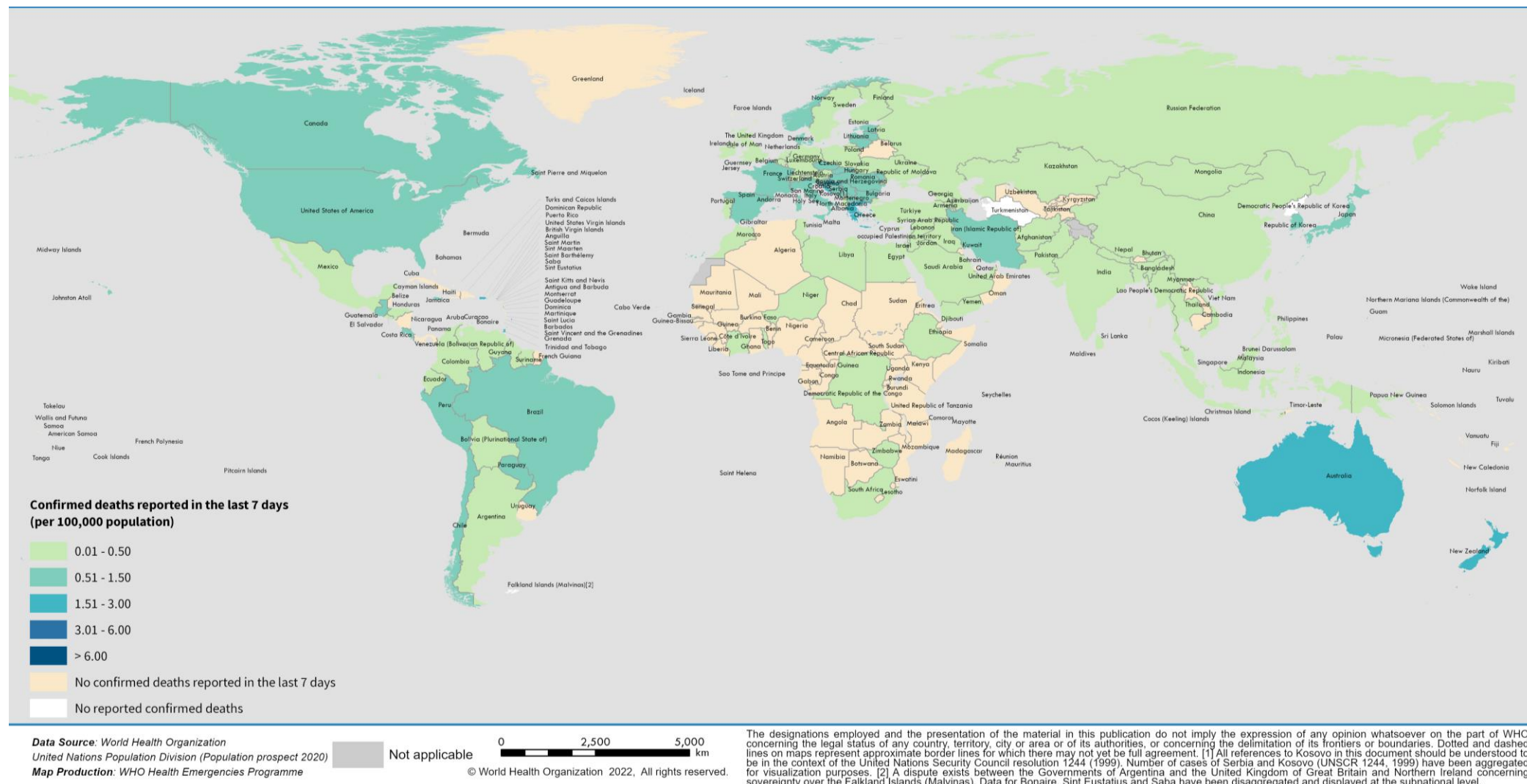
- [WHO COVID-19 Dashboard](#)
- [WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update](#)
- [WHO COVID-19 detailed surveillance data dashboard](#)

Figure 2. COVID-19 cases per 100 000 population reported by countries, territories and areas, 15 - 21 August 2022*



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

Figure 3. COVID-19 deaths per 100 000 population reported by countries, territories and areas, 15 - 21 August 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 22 July to 22 August 2022, 162 215 SARS-CoV-2 sequences were shared through GISAID. Among these, 160 716 sequences were the Omicron Variant of Concern (VOC), accounting for 99% of sequences reported globally in the past 30 days.

A comparison of sequences submitted to GISAID in epidemiological week 32 (7 to 13 August 2022) and week 31 (31 July to 6 August 2022) shows that BA.5 Omicron descendent lineages continue to be dominant globally, with an increase in weekly prevalence from 71% to 74%. There is increasing diversity within BA.5 descendent lineages, with additional mutations in the spike and non-spike regions and a rise in prevalence among some lineages. Notably, BA.5.1 (22.3% in week 32 as compared to 18.6% in week 31), BA.5.2 (20.3% in week 32 as compared to 16.8% in week 31) are rising in prevalence, while BA.5.2.1 remained stable (21% in weeks 32 and 31).

The prevalence of BA.2 descendent lineages (BA.2.X) and BA.4 descendent lineages (BA.4.X) has been on a continuous decline for several weeks. As of week 32, the prevalence of BA.2.X and BA.4.X is 5.6% and 6.1%, respectively.

Additional Omicron descendent lineages (e.g., BF.7 alias for BA.5.2.1.7) account for 14% of prevalence as of week 32, a rise from 11% of prevalence as of week 31. These lineages have been assigned Pango lineage names BC, BD, BF and BG.

WHO continues to monitor all lineages, including descendent lineages of VOCs, to track any increase in prevalence and change in viral characteristics. The current trends describing the circulation of Omicron descendent lineages should be interpreted with due consideration of the limitations of the SARS-CoV-2 surveillance systems. These include differences in sequencing capacity and sampling strategies between countries, changes in sampling strategies, and reductions in tests conducted and sequences shared by countries around the world.

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](#)
- [Considerations for implementing and adjusting public health and social measures in the context of COVID-19](#)
- [VIEW-hub: repository for the most relevant and recent vaccine data](#)

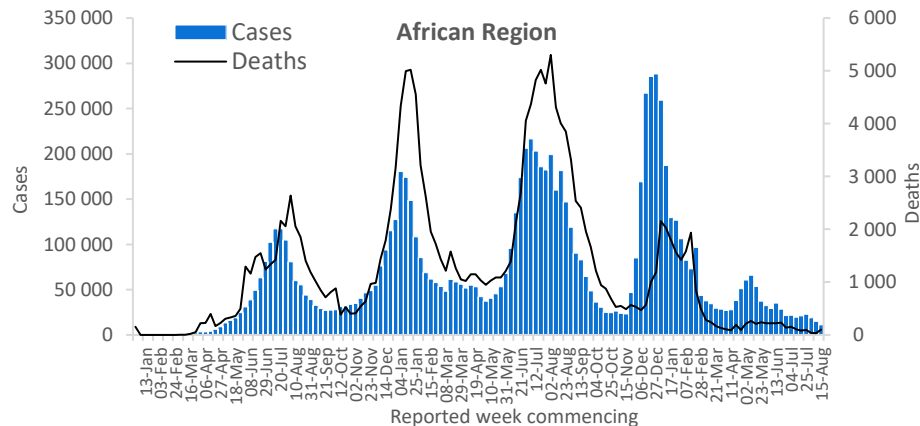
WHO regional overviews:

Epidemiological week 15 - 21 August 2022**

African Region

The African Region reported just over 11 000 new cases, a 25% decrease as compared to the previous week. Seven (14%) countries reported increases in the number of new cases of 20% or greater, with the greatest proportional increases seen in Niger (55 vs 18 new cases; +206%), Chad (14 vs five new cases; +180%), and Mali (15 vs eight new cases; +88%). The highest numbers of new cases were reported from Réunion (5093 new cases; 568.9 new cases per 100 000 population; +11%), South Africa (1566 new cases; 2.6 new cases per 100 000; +21%), and Burundi (973 new cases; 8.2 new cases per 100 000; +29%).

The number of new weekly deaths in the Region increased by 183% (predominantly due to batch reporting from South Africa) as compared to the previous week, with 99 deaths reported. The highest numbers of new deaths were reported from South Africa[#] (84 new deaths; <1 new death per 100 000 population), Zimbabwe (four new deaths; <1 new death per 100 000; same figure at the previous week), and the Democratic Republic of the Congo[#] (three new deaths; <1 new death per 100 000 population).

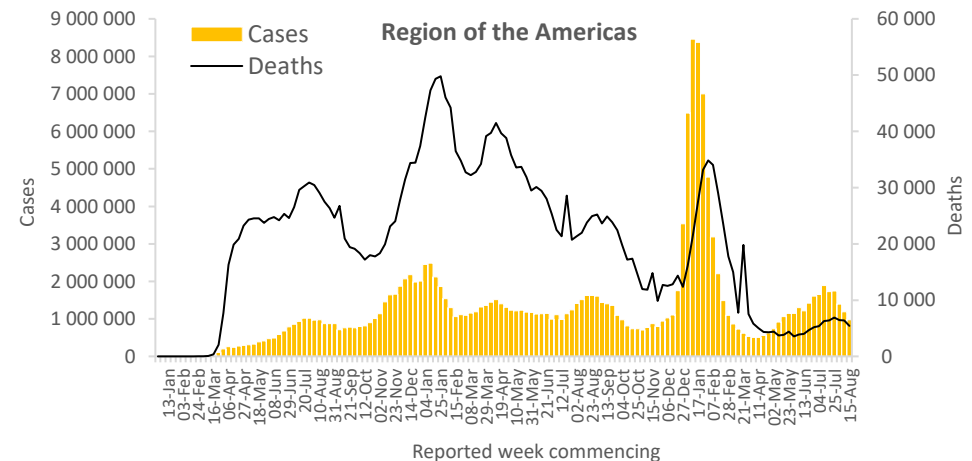


Updates from the [African Region](#)

Region of the Americas

The Region of the Americas reported over 979 000 new cases, an 18% decrease as compared to the previous week. Eight of 56 (14%) countries for which data are available reported increases in the number of new cases of 20% or greater, with the greatest proportional increases observed in Grenada (266 vs 73 new cases; +264%), Suriname (19 vs six new cases; +217%), and Antigua and Barbuda (75 vs 33 new cases; +127%). The highest numbers of new cases were reported from the United States of America (612 378 new cases; 185.0 new cases per 100 000; -13%), Brazil (116 106 new cases; 54.6 new cases per 100 000; a -24%), and Chile (62 880 new cases; 328.9 new cases per 100 000; -13%).

The number of new weekly deaths reported in the Region decreased by 15% as compared to the previous week, with over 5400 deaths reported. The highest numbers of new deaths were reported from the United States of America (2714 new deaths; <1 new death per 100 000; -13%), Brazil (1105 new deaths; <1 new death per 100 000; -26%), and Peru (378 new deaths; 1.1 new deaths per 100 000; +10%).

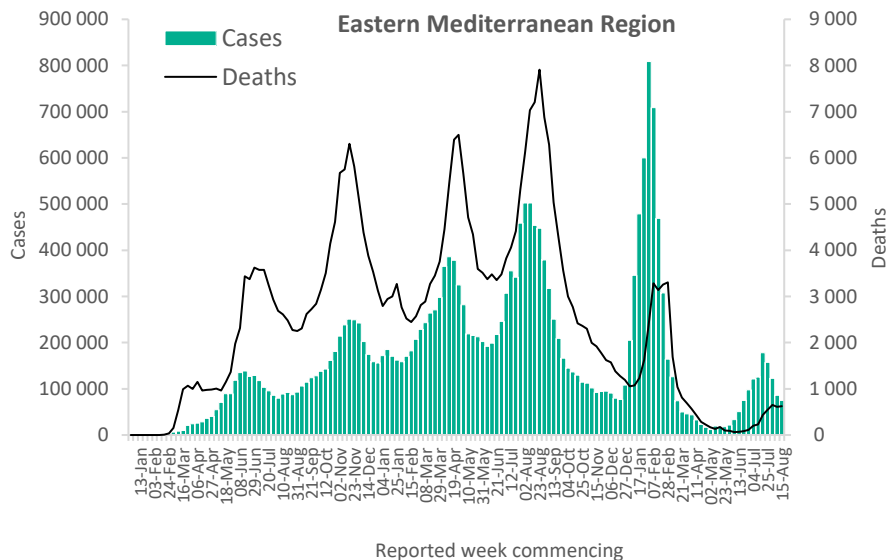


Updates from the [Region of the Americas](#)

Eastern Mediterranean Region

The Eastern Mediterranean Region reported a decrease in cases for the fourth consecutive week, with over 75 000 new cases reported, a 13% decrease as compared to the previous week. Two (9%) countries reported increases in the number of new cases of 20% or greater: Iraq (3035 vs 541 new cases; +461%) and Yemen (12 vs eight new cases; +50%). The highest numbers of new cases were reported from the Islamic Republic of Iran (34 475 new cases; 41.0 new cases per 100 000; +2%), Lebanon (7620 new cases; 111.6 new cases per 100 000; -27%), and Jordan (5939 new cases; 58.2 new cases per 100 000; +8%).

The number of new weekly deaths remained similar to the previous week, with over 600 new deaths reported. The highest numbers of new deaths were reported from the Islamic Republic of Iran (471 new deaths; <1 new death per 100 000; +2%), Tunisia (56 new deaths; <1 new death per 100 000; +17%), Lebanon (27 new deaths; <1 new death per 100 000; +4%), and Pakistan (27 new deaths; <1 new death per 100 000; +50%).

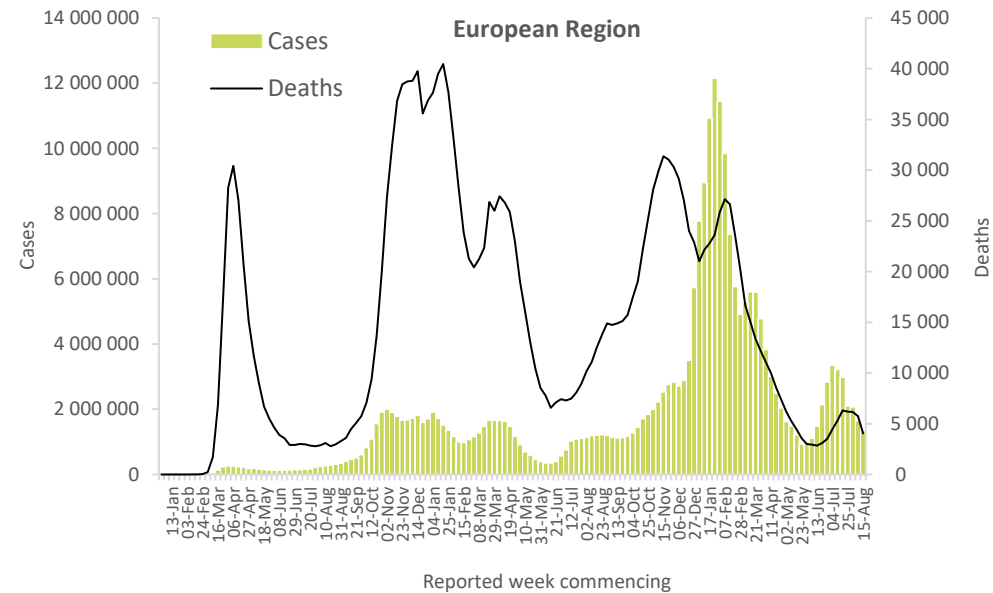


Updates from the [Eastern Mediterranean Region](#)

European Region

The European Region reported over 1.3 million new cases, a 20% decrease as compared to the previous week. Three (5%) countries in the Region reported increases in new cases of 20% or greater, with some of the highest proportional increases observed in Ukraine (5439 vs 3893 new cases; +40%), and Jersey (197 vs 143 new cases; +38%). The highest numbers of new cases were reported from Germany (240 998 new cases; 289.8 new cases per 100 000; -19%), the Russian Federation (235 385 new cases; 161.3 new cases per 100 000; +39%), and Italy (150 922 new cases; 253.0 new cases per 100 000; -22%).

Over 4000 new weekly deaths were reported in the Region, a 30% decrease as compared to the previous week. The highest numbers of new deaths were reported from Italy (677 new deaths; 1.1 new deaths per 100 000; -26%), Spain (461 new deaths; 1 new death per 100 000; -20%), and the Russian Federation (435 new deaths; <1 new death per 100 000; +13%).

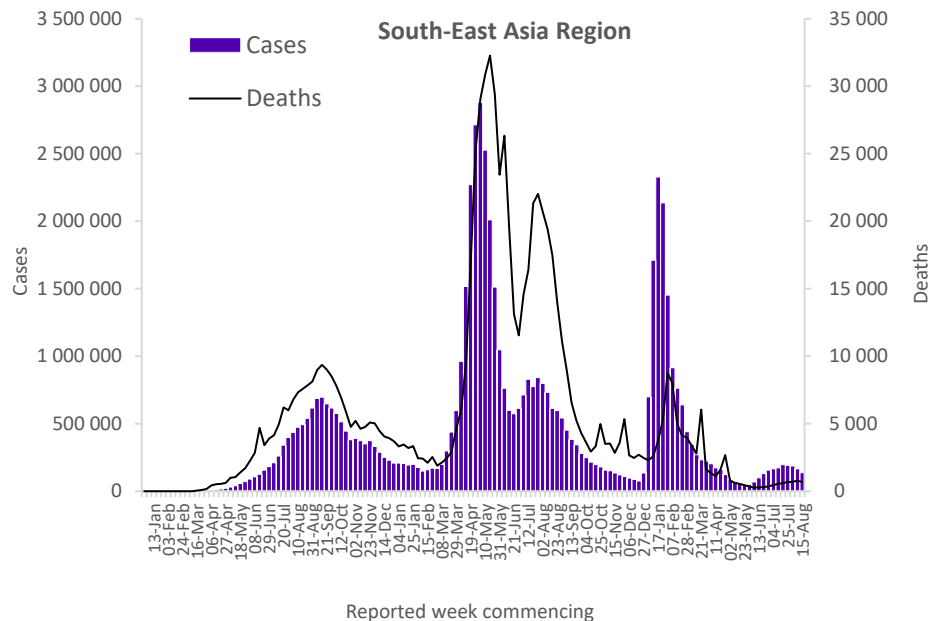


Updates from the [European Region](#)

South-East Asia Region

The South-East Asia Region reported over 137 000 new cases, a 17% decrease as compared to the previous week. One of the 10 countries (10%) for which data are available showed an increase in the number of new cases of 20% or greater: Myanmar (265 vs 191 new cases; +39%). The highest numbers of new cases were reported from India (85 965 new cases; 6.2 new cases per 100 000; -20%), Indonesia (32 783 new cases; 12.0 new cases per 100 000; -13%), and Thailand (13 755 new cases; 19.7 new cases per 100 000; -7%).

The Region reported just under 700 deaths, an 11% decrease as compared to the previous week. The highest numbers of new deaths were reported from India (295 new deaths; <1 new death per 100 000; -15%), Thailand (199 new deaths; <1 new death per 100 000; -14%), and Indonesia (151 new deaths; <1 new death per 100 000; +15%).

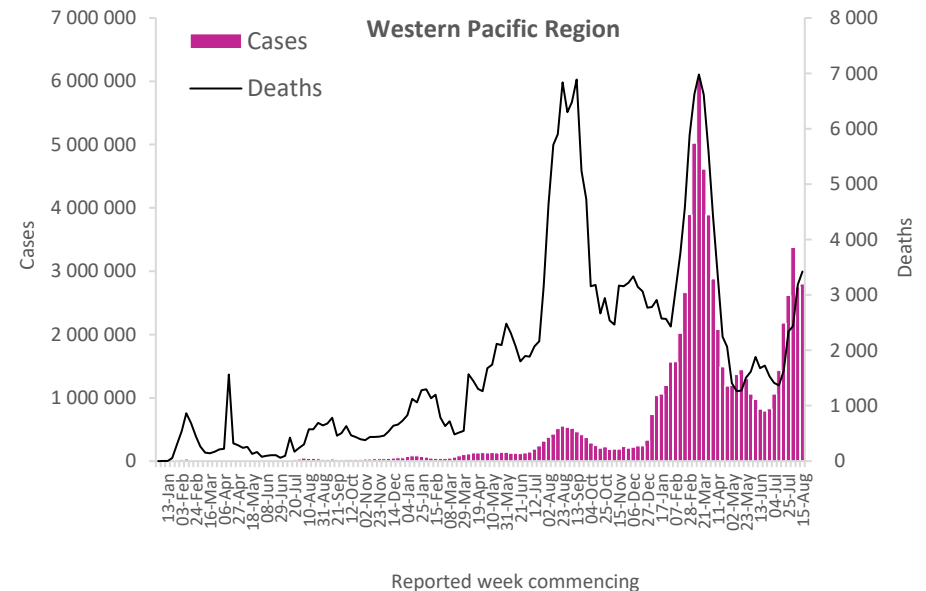


Updates from the [South-East Asia Region](#)

Western Pacific Region

The Western Pacific Region reported a similar case count as the previous week, with over 2.7 million new cases reported. Six (18%) countries reported increases in new cases of 20% or greater, with the largest proportional increases observed in Vanuatu (36 vs three new case; +1100%), Marshall Islands (9086 vs 758 new cases; +1099%), and Palau (33 vs seven new cases, +371%). The highest numbers of new cases were reported from Japan (1 476 374 new cases; 1167.3 new cases per 100 000; +6%), the Republic of Korea (884 373 new cases; 1725.0 new cases per 100 000; +2%), and China (172 424 new cases; 11.7 new cases per 100 000; +3%).

The Region reported over 3400 new weekly deaths, an 8% increase as compared to the previous week. The highest numbers of new deaths were reported from Japan (1624 new deaths; 1.3 new deaths per 100 000; -1%), Australia (490 new deaths; 1.9 new deaths per 100 000; -9%), and the Philippines (441 new deaths; <1 new death per 100 000; +305%).



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 of an outbreak of COVID-19 reported in the Democratic People’s Republic of Korea continue through official media since 12 May 2022; however, at present, no confirmed cases or deaths have been reported to WHO.

For some countries, it was not possible to calculate the weekly percentage change in the number of cases and / or deaths due to either batch reporting or no reporting during the last week.

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.