

COVID-19 Weekly Epidemiological Update

Edition 114 published 19 October 2022

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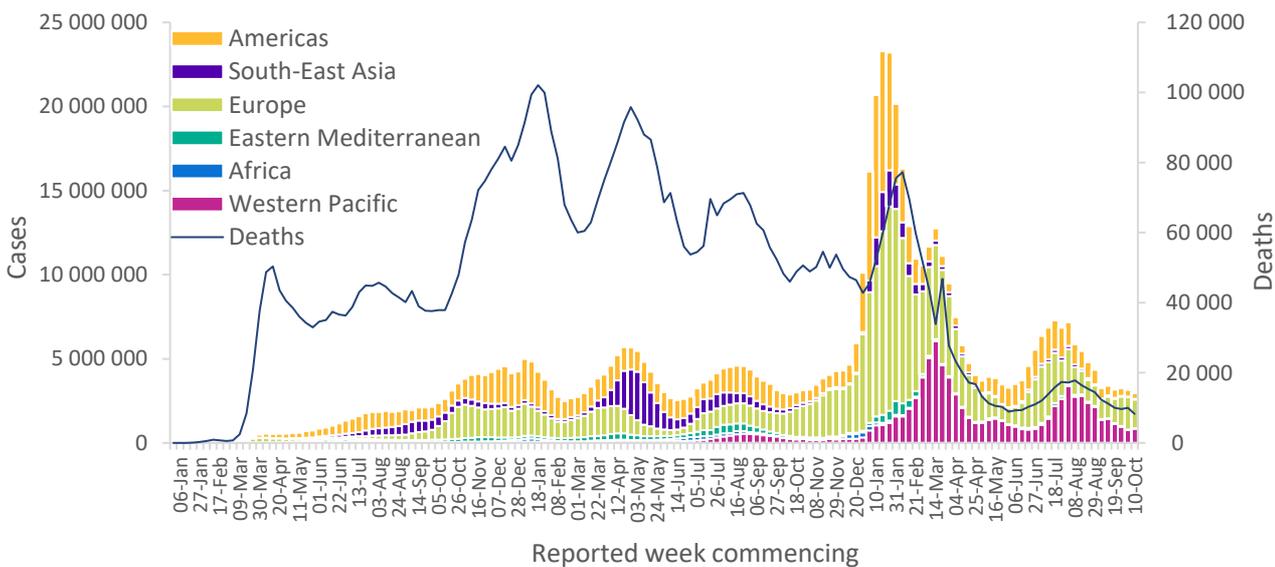
Global overview

Data as of 16 October 2022

Globally, the number of new weekly cases decreased by 6% during the week of 10 to 16 October 2022 as compared to the previous week, with over 2.9 million new cases reported (Figure 1, Table 1). The number of new weekly deaths decreased by 17% as compared to the previous week, with about 8300 fatalities reported. As of 16 October 2022, over 621 million confirmed cases and over 6.5 million deaths have been reported globally.

At the regional level, the number of newly reported weekly cases decreased or remained stable across five of the six WHO regions: the Eastern Mediterranean Region (-17%), the African Region (-15%), the Region of the Americas (-12%), the European Region (-11%) and the South-East Asia Region (-3%); while case numbers increased in the Western Pacific Region (+11%). The number of new weekly deaths decreased or remained stable across five regions: the Eastern Mediterranean Region (-35%), the Region of the Americas (-20%), the European Region (-18%), the Western Pacific Region (-14%) and the South-East Asia Region (similar to the previous week); while the number of deaths increased in the African Region (61 versus 18; +144%).

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 16 October 2022**



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

At the country level, the highest numbers of new weekly cases were reported from Germany (583 232 new cases; similar to the previous week), France (337 253 new cases; -12%), China (328 910 new cases; -1%), Italy (288 452 new cases; +3%) and the United States of America (251 280 new cases; -10%). The highest numbers of new weekly deaths were reported from the United States of America (2274 new deaths; -11%), the Russian Federation (702 new deaths; -4%), Italy (478 new deaths; +37%), China (431 new deaths; +5%) and Japan (409 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 16 October 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	1 706 060 (58%)	-11%	258 027 665 (41%)	3 331 (40%)	-18%	2 104 592 (32%)
Western Pacific	853 468 (29%)	11%	91 722 900 (15%)	1 348 (16%)	-14%	274 127 (4%)
Americas	348 092 (12%)	-12%	179 201 630 (29%)	3 208 (39%)	-20%	2 846 800 (43%)
South-East Asia	36 258 (1%)	-3%	60 375 798 (10%)	281 (3%)	<1%	798 215 (12%)
Eastern Mediterranean	14 957 (1%)	-17%	23 122 705 (4%)	65 (1%)	-35%	348 543 (5%)
Africa	4 669 (<1%)	-15%	9 343 862 (2%)	61 (1%)	144%	174 634 (3%)
Global	2 963 504 (100%)	-6%	621 795 324 (100%)	8 294 (100%)	-17%	6 546 924 (100%)

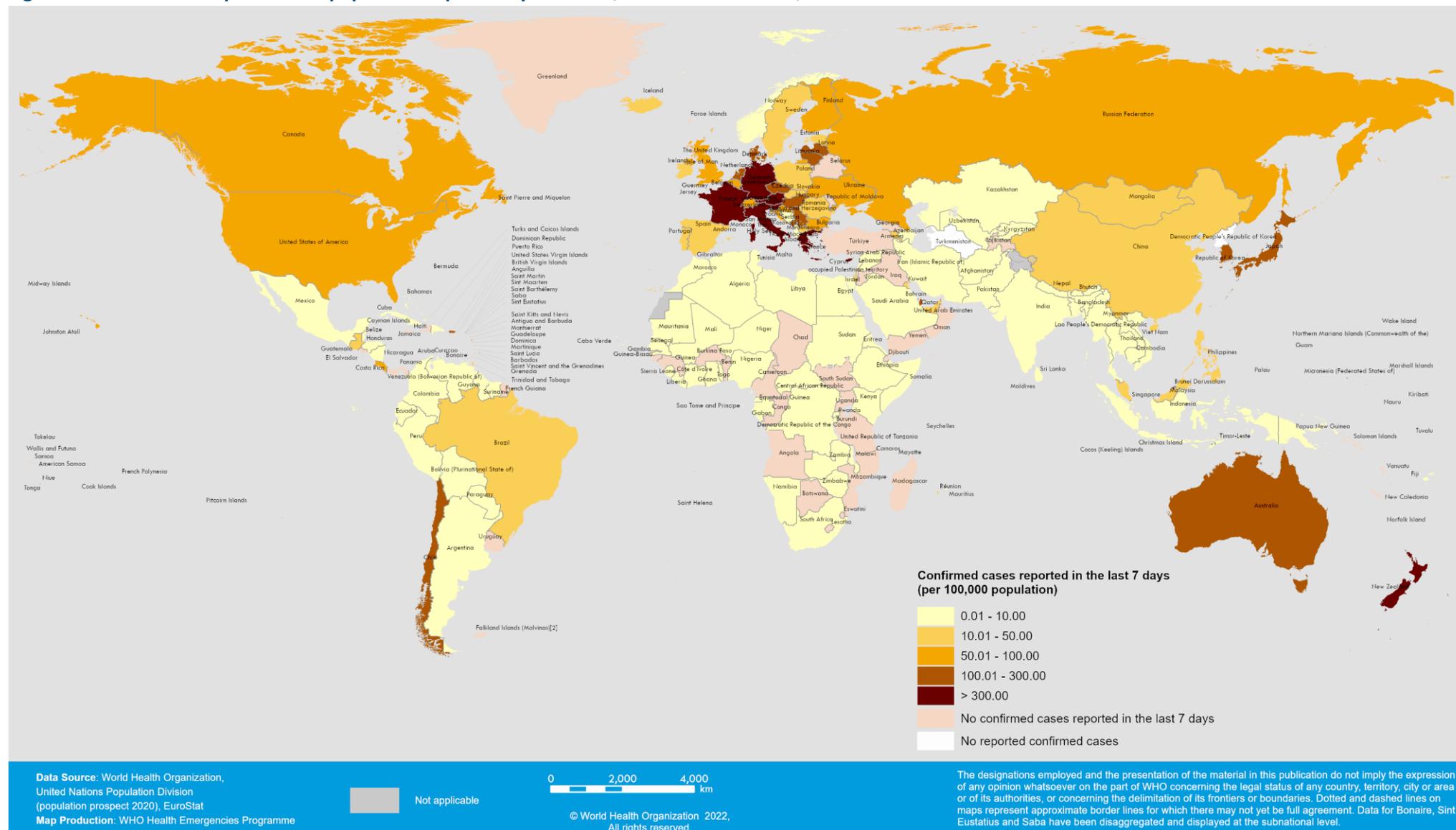
*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior. Data from previous weeks are updated continuously with adjustments received from countries.

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

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

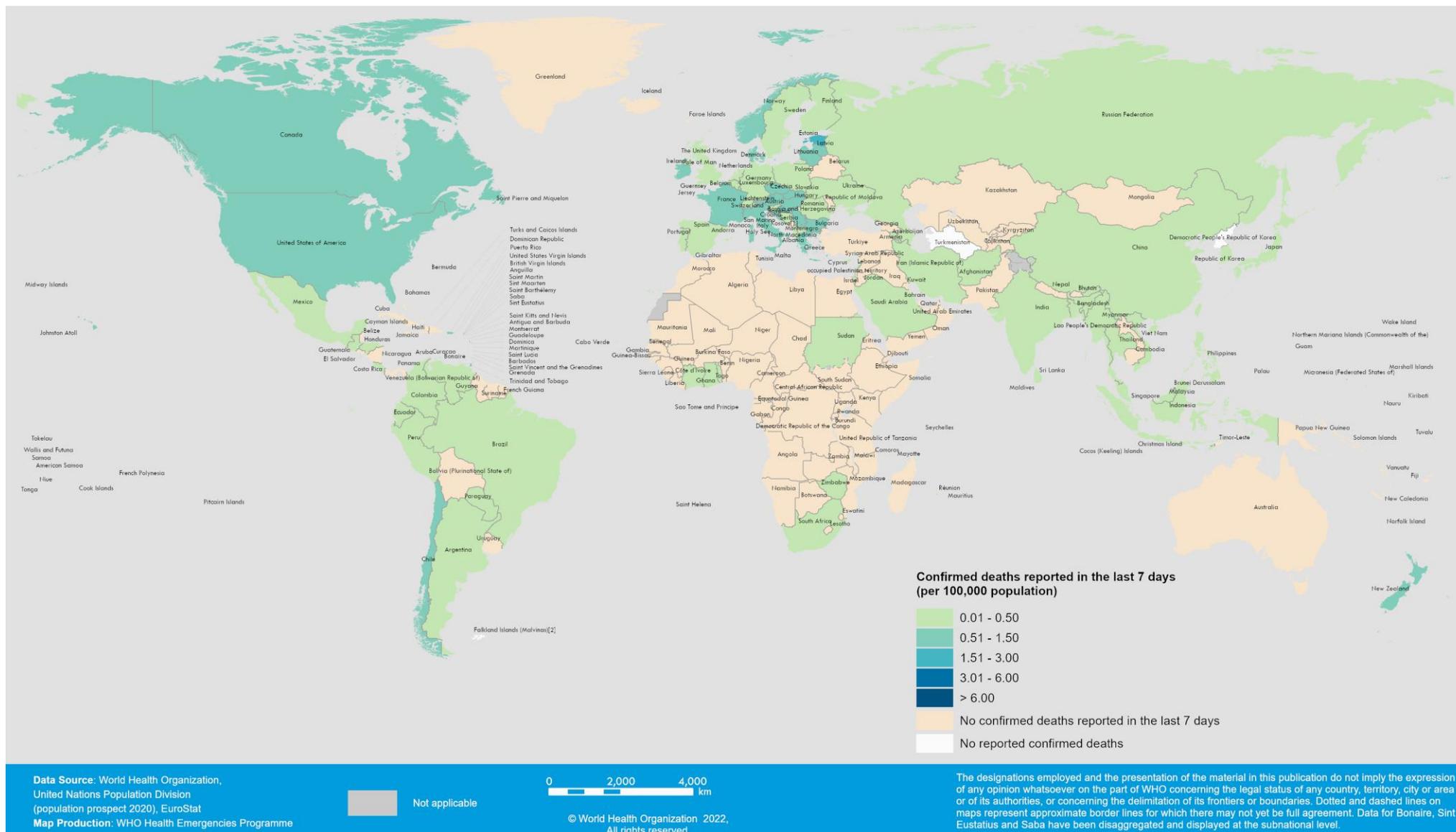
- [WHO COVID-19 Dashboard](#)
- [WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update](#)
- [WHO COVID-19 detailed surveillance data dashboard](#)
- [WHO COVID-19 policy briefs](#)

Figure 2. COVID-19 cases per 100 000 population reported by countries, territories and areas, 10 - 16 October 2022*



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

Figure 3. COVID-19 deaths per 100 000 population reported by countries, territories and areas, 10 - 16 October 2022**



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

Special Focus: Update on SARS-CoV-2 variants of interest and variants of concern

Globally, from 17 September to 17 October 2022, 98 731 SARS-CoV-2 sequences were shared through GISAID. Among these, 98 386 sequences were the Omicron variant of concern (VOC), accounting for 99.7% of sequences reported globally in the past 30 days.

During epidemiological week 39 (26 September to 2 October 2022), Omicron BA.5 descendent lineages continued to be dominant, accounting for 78.9% of sequences submitted to GISAID; followed by BA.4 descendent lineages (including BA.4.6), which accounted for 6.7%; and BA.2 descendent lineages (including BA.2.75), which accounted for 3.9% of sequences.

WHO continues to monitor emerging subvariants and recombinants for potential signs of immune escape or increase in disease severityⁱ. As of 17 October 2022, XBB, a BA.2.10.1 and BA.2.75 recombinant with 14 additional mutations in the BA.2 spike protein, has been reported by 26 countries. Available preliminary laboratory-based evidence suggests that XBB is the most antibody-evasive SARS-CoV-2 variant identified to date. As of 17 October, there have been 233 XBB sequences and 609 sequences of the XBB.1 variant (XBB with additional substitution in spike at the G252V locus) reported on GISAID. While the recombinant shows signs of higher growth advantage as compared to other Omicron descendent variants, there is no evidence yet of any change in disease severity.

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](#)

ⁱ [WHO tracking SARS-CoV-2 variants](#)

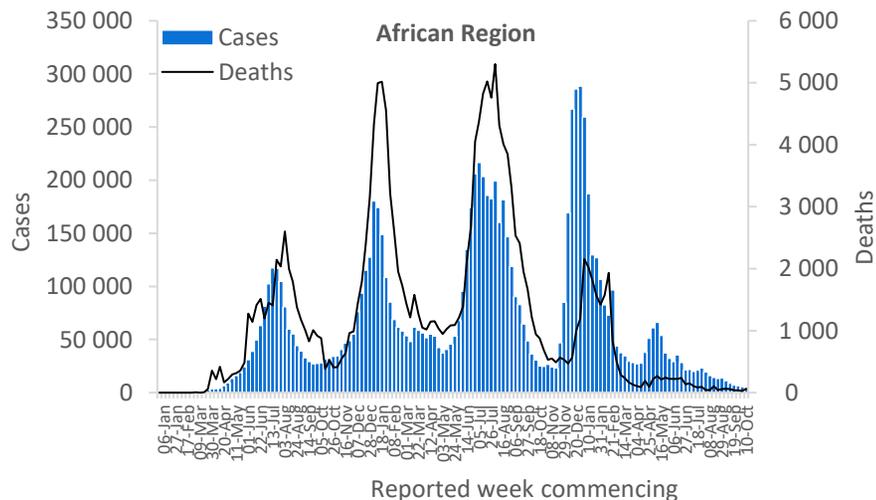
WHO regional overviews:

Epidemiological week 10 – 16 October 2022**

African Region

The African Region reported over 4600 new weekly cases, a 15% decrease as compared to the previous week. Nine (18%) countries reported increases in the number of new cases of 20% or greater, with the greatest proportional increases seen in Zambia (69 vs six new cases; +1050%), Sao Tome and Principe (16 vs six new cases; +167%) and Equatorial Guinea (71 vs 30 new cases; +137%). The highest numbers of new cases were reported from South Africa (2570 new cases; 4.3 new cases per 100 000 population; +27%), Réunion (336 new cases; 37.5 new cases per 100 000; -6%) and Zimbabwe (238 new cases; 1.6 new cases per 100 000; +72%).

The number of new weekly deaths in the Region increased by 144% as compared to the previous week, with 61 deaths reported. The highest numbers of new deaths were reported from South Africa (52 new deaths; <1 new death per 100 000 population; +478%), Réunion (two new deaths; <1 new death per 100 000; +100%) and Zimbabwe (two new deaths; <1 new death per 100 000; equal to the previous week).

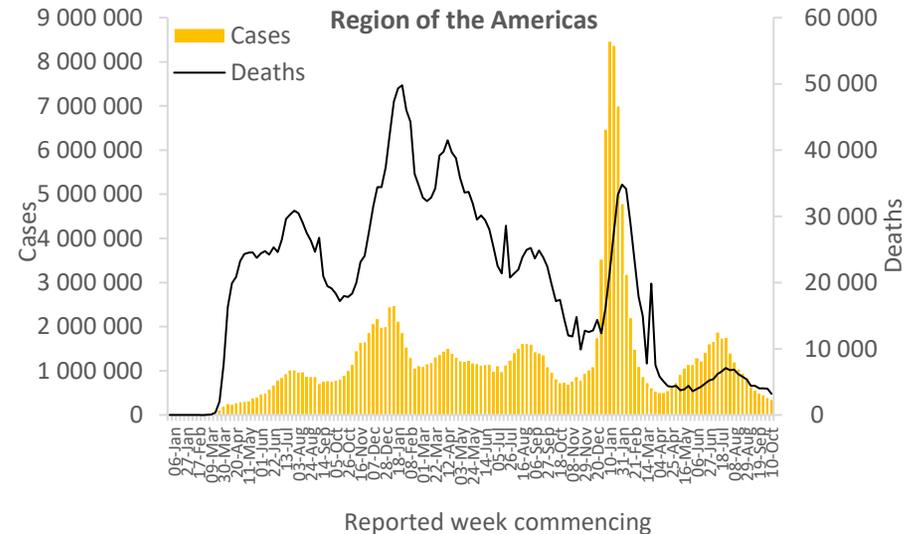


Updates from the [African Region](#)

Region of the Americas

The Region of the Americas reported over 348 000 new cases, a 12% decrease as compared to the previous week. Eight (14%) of the 56 countries for which data are available reported an increase in the number of new cases of 20% or greater, with some of the greatest proportional increases seen in Barbados (405 vs 29 new cases; +1297%), Venezuela (Bolivarian Republic of) (261 vs 129 new cases; +102%) and Guyana (38 vs 21 new cases; +81%). The highest numbers of new cases were reported from the United States of America (251 280 new cases; 75.9 new cases per 100 000; -10%), Brazil (31 325 new cases; 14.7 new cases per 100 000; -26%) and Chile (25 025 new cases; 130.9 new cases per 100 000; +17%).

The number of new weekly deaths decreased by 20% in the Region as compared to the previous week, with over 3200 new deaths reported. The highest numbers of new deaths were reported from the United States of America (2274 new deaths; <1 new death per 100 000; -11%), Brazil (341 new deaths; <1 new death per 100 000; -56%) and Canada (226 new deaths; <1 new death per 100 000; +18%).

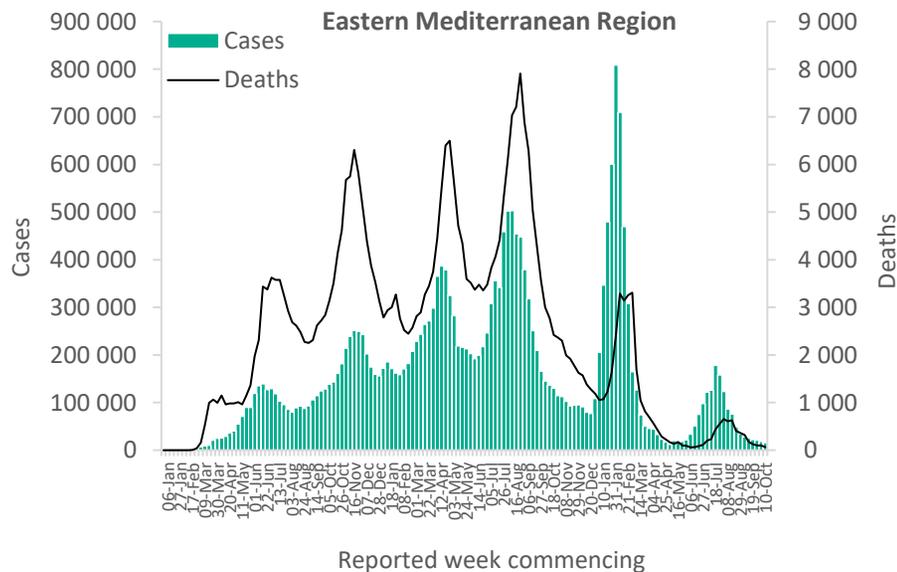


Updates from the [Region of the Americas](#)

Eastern Mediterranean Region

The Eastern Mediterranean Region reported just under 15 000 new cases, a 17% decrease as compared to the previous week. Three (13%) countries reported an increase in new cases of 20% or greater, with the highest proportional increases observed in Sudan (40 vs five new cases; +700%), Pakistan (347 vs 210 new cases; +65%) and Saudi Arabia (1102 vs 915 new cases; +20%). The highest numbers of new cases were reported from Qatar (4579 new cases; 158.9 new cases per 100 000; -11%), the Islamic Republic of Iran (2649 new cases; 3.2 new cases per 100 000; -22%) and the United Arab Emirates (2044 new cases; 20.7 new cases per 100 000; -20%).

The number of new weekly deaths in the Region decreased by 35% as compared to the previous week, with 65 new deaths reported. The highest numbers of new deaths were reported from the Islamic Republic of Iran (38 new deaths; <1 new death per 100 000; -39%), Saudi Arabia (14 new deaths; <1 new death per 100 000; +17%), and Afghanistan (seven new deaths; <1 new death per 100 000; +40%).

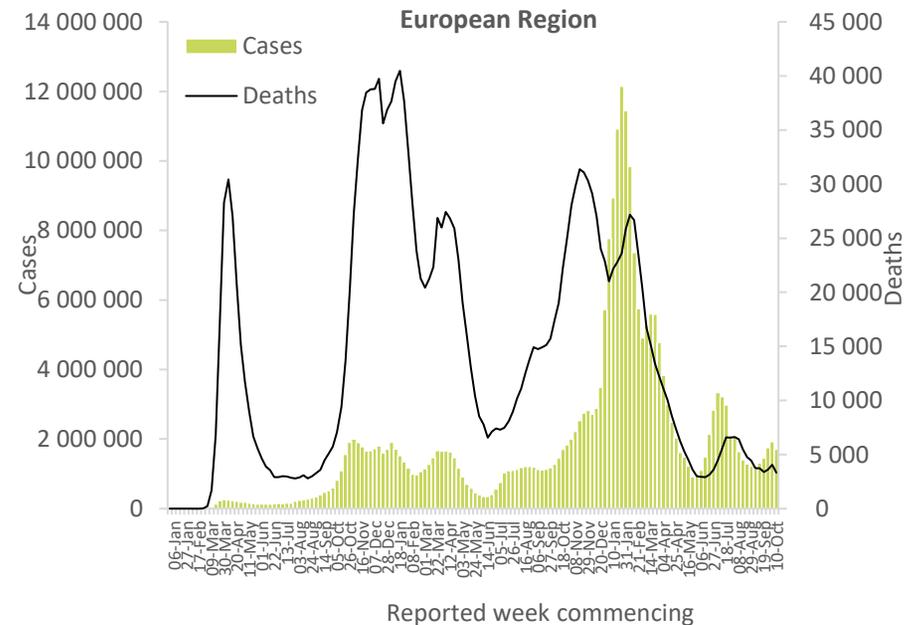


Updates from the [Eastern Mediterranean Region](#)

European Region

In the European Region, the number of new weekly cases decreased by 11% as compared to the previous week, with over 1.7 million new cases reported. Three (5%) countries reported increases in new cases of 20% or greater, with the highest proportional increases observed in Kosovo^[1] (30 vs 14 new cases; +114%), Andorra (91 vs 48 new cases; +90%) and Guernsey (291 vs 236 new cases; +23%). The highest numbers of new cases were reported from Germany (583 232 new cases; 701.3 new cases per 100 000; similar to the previous week), France (337 253 new cases; 518.5 new cases per 100 000; -12%) and Italy (288 452 new cases; 483.6 new cases per 100 000; +3%).

Over 3300 new weekly deaths were reported in the Region, an 18% decrease as compared to the previous week. The highest numbers of new deaths were reported from the Russian Federation (702 new deaths; <1 new death per 100 000; -4%), Italy (478 new deaths; <1 new death per 100 000; +37%) and France (366 new deaths; <1 new death per 100 000; +15%).

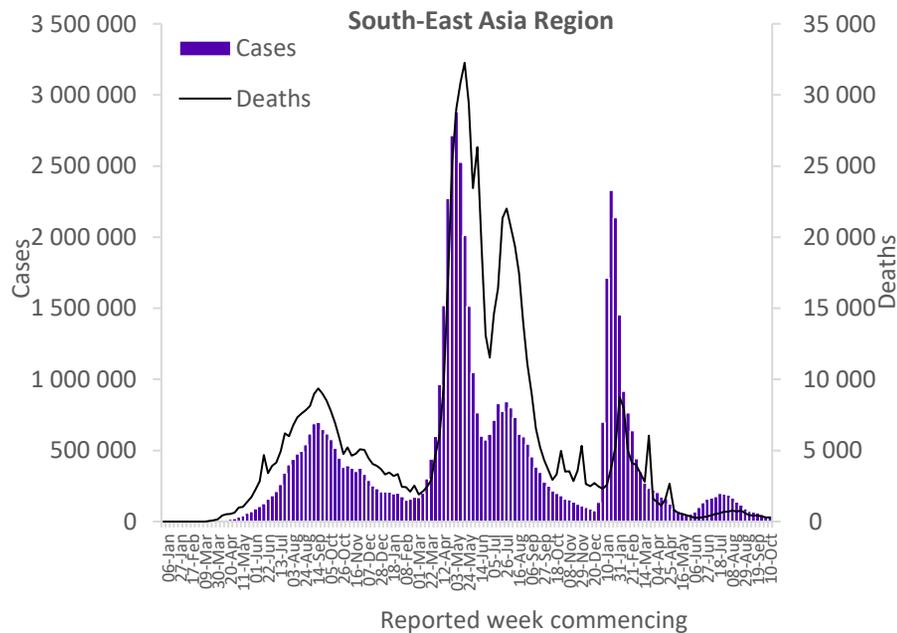


Updates from the [European Region](#)

South-East Asia Region

The South-East Asia Region reported over 36 000 new cases, a 3% decrease as compared to the previous week. Two (20%) countries in the Region for which data are available showed an increase in the number of new cases of 20% or greater: Nepal (265 cases vs 97 new cases; +173%) and the Maldives (69 cases vs 43 new cases; +60%). The highest numbers of new cases were reported from India (16 815 new cases; 1.2 new cases per 100 000; -4%), Indonesia (11 920 new cases; 4.4 new cases per 100 000; +15%) and Bangladesh (2720 new cases; 1.7 new cases per 100 000; -23%).

The Region reported 281 deaths, similar to the previous week. The highest numbers of new deaths were reported from Indonesia (108 new deaths; <1 new death per 100 000; +48%), India (96 new deaths; <1 new death per 100 000; -24%) and Thailand (53 new deaths; <1 new death per 100 000; -9%).

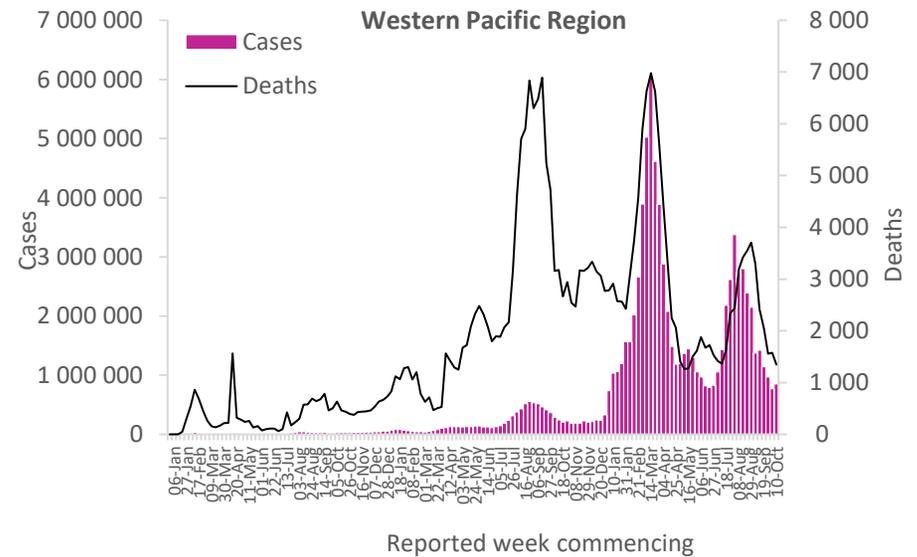


Updates from the [South-East Asia Region](#)

Western Pacific Region

The Western Pacific Region reported over 853 000 new cases, an 11% increase as compared to the previous week. Five (15%) countries reported increases in new cases of 20% or greater, with some of the largest proportional increases observed in Singapore (57 482 vs 36 985 new cases; +55%), Viet Nam (6912 vs 5333 new cases; +30%) and Brunei Darussalam (2749 vs 2168 new cases; +27%). The highest numbers of new cases were reported from China (328 910 new cases; 22.4 new cases per 100 000; -1%), Japan (218 276 new cases; 172.6 new cases per 100 000; +5%) and the Republic of Korea (149 676 new cases; 291.9 new cases per 100 000; -1%).

The Region reported a 14% decrease in new weekly deaths as compared to the previous week, with over 1300 deaths reported. The highest numbers of new deaths were reported from China (431 new deaths; <1 new death per 100 000; +5%), Japan (409 new deaths; <1 new death per 100 000; -28%) and the Philippines (246 new deaths; <1 new death per 100 000; -29%).



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.

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, and delays in uploading sequence data to GISAID.