

Status, Trends and Recommendations

Covid-19: Stakeholders Update – Week 45

A nine pager

Global epidemiological situation

During the week 1 to 7 November 2021, a slight upward trend (1% increase) in new weekly cases was observed, with just over 3.1 million new cases reported (Figure 1). The WHO European Region reported a 7% increase in new weekly cases as compared to the previous week, while other regions reported declines or stable trends (Table 1). Similarly, the European Region reported a 10% increase in new deaths, while other regions reported declining trends. Globally, over 48 000 new deaths were reported, a 4% decrease from the previous week.

As of 7 November, over 249 million confirmed cases and over 5 million deaths have been reported.

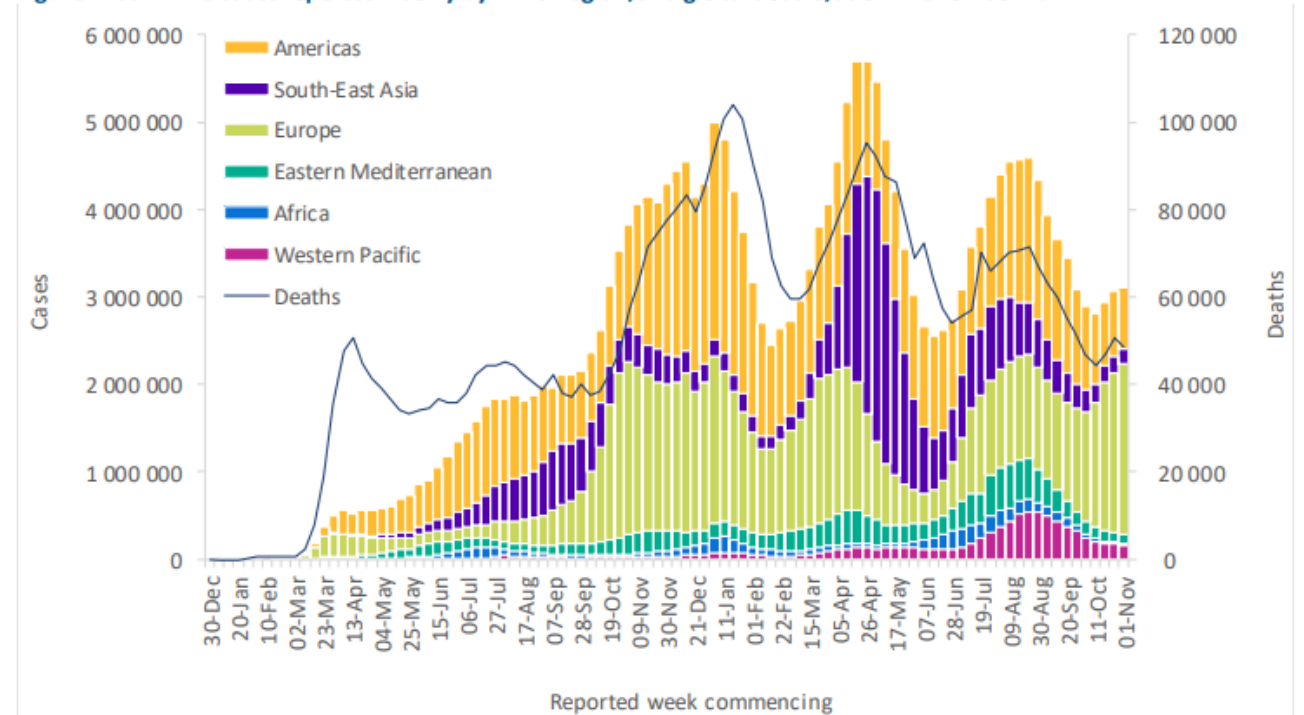
Table 1. Newly reported and cumulative COVID-19 cases and deaths, by WHO Region, as of 7 November 2021**

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	1 949 419 (63%)	7%	78 757 071 (32%)	26 726 (55%)	10%	1 452 069 (29%)
Americas	701 791 (23%)	-5%	94 330 064 (38%)	13 106 (27%)	-14%	2 307 543 (46%)
Western Pacific	162 037 (5%)	-9%	9 583 381 (4%)	2 553 (5%)	-13%	132 180 (3%)
South-East Asia	157 450 (5%)	-13%	44 120 582 (18%)	3 511 (7%)	-29%	696 390 (14%)
Eastern Mediterranean	112 033 (4%)	-2%	16 462 085 (7%)	2 277 (5%)	-2%	303 354 (6%)
Africa	20 456 (1%)	3%	6 171 616 (2%)	530 (1%)	-27%	151 141 (3%)
Global	3 103 186 (100%)	1%	249 425 563 (100%)	48 703 (100%)	-4%	5 042 690 (100%)

*Percent change in the number of newly confirmed cases/deaths in 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 7 November 2021**

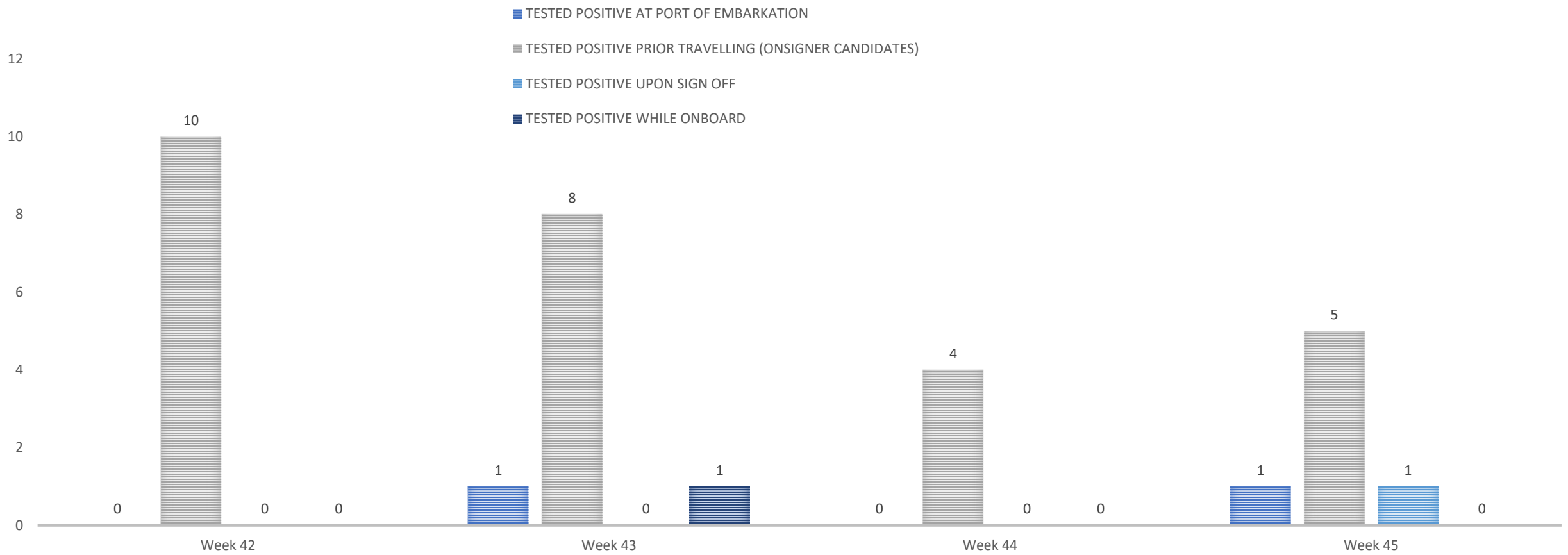


**See Annex 2: Data, table, and figure notes

The regions reporting the highest weekly case incidence rates per 100 000 population were the European Region (208.9 new cases per 100 000 population) and the Region of the Americas (68.6 new cases per 100 000 population); the same two regions reported the highest weekly incidence in deaths, of 2.9 and 1.3 per 100 000 population, respectively.

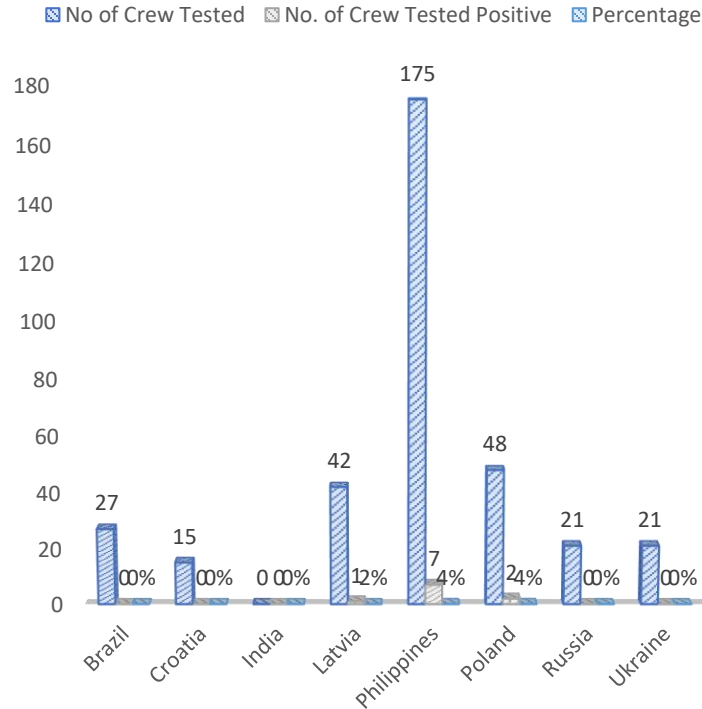
The highest numbers of new cases were reported from the United States of America (510 968 new cases; 3% decrease), the Russian Federation (281 305 new cases; 3% increase), the United Kingdom (252 104 new cases; 12% decrease), Turkey (197 335 new cases; 8% increase), and Germany (169 483 new cases; 29% increase).

OSM MANNING - WHEN TESTED POSITIVE PER WEEK

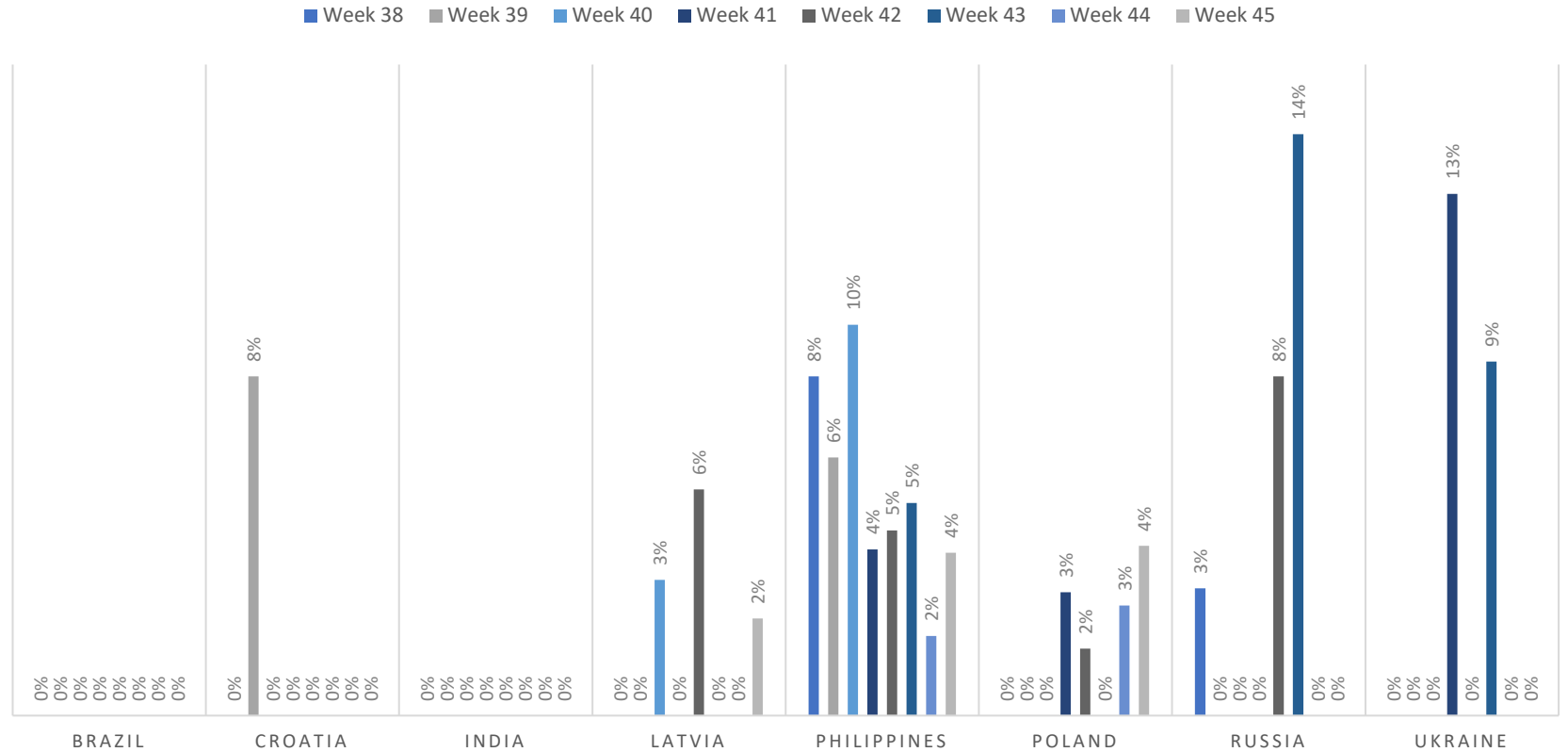


Comment: In week 45 we have a slight increase of total figures compared to the week before. Of these 7 cases seen during this week 6 have occurred prior boarding (the ones before climbing up the gangway or even before travelling) what regarding virus avoidance onboard has been the goal. Then 1 occurred upon sign off.

PCR-TEST POSITIVITY RATE BY NATIONALITY



PCR-TEST POSITIVITY RATE BY NATIONALITY PER WEEK

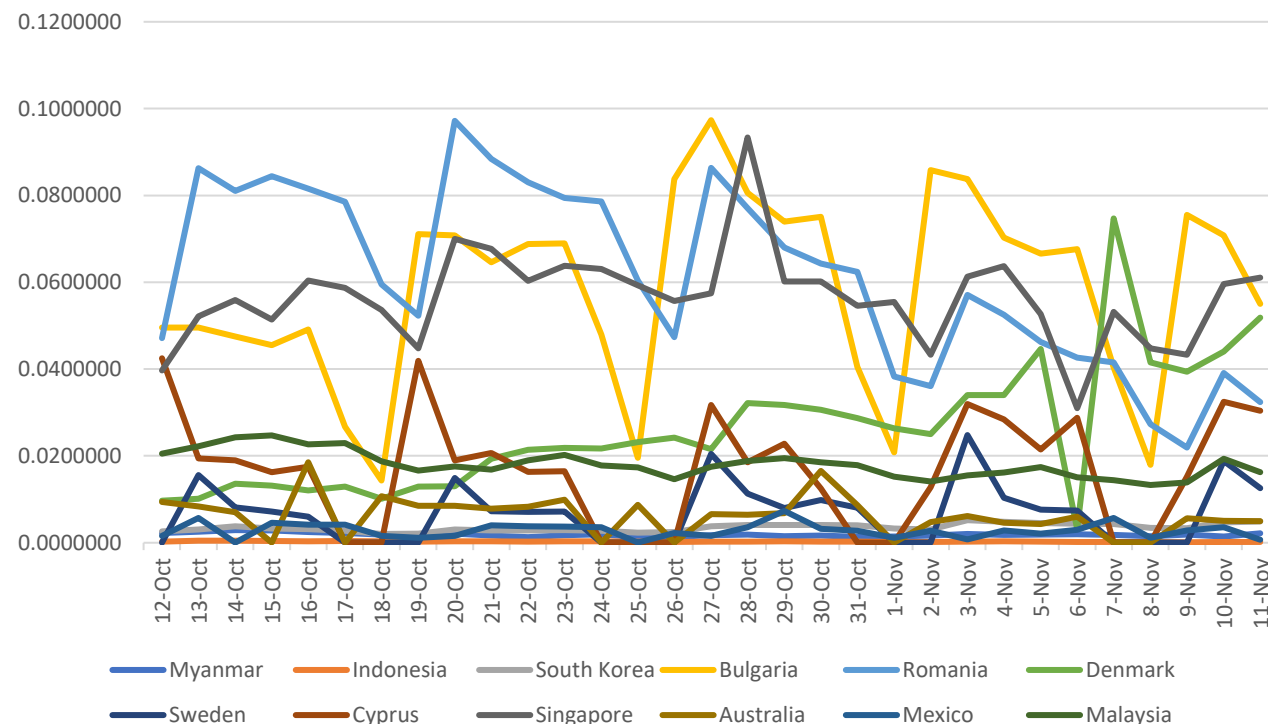
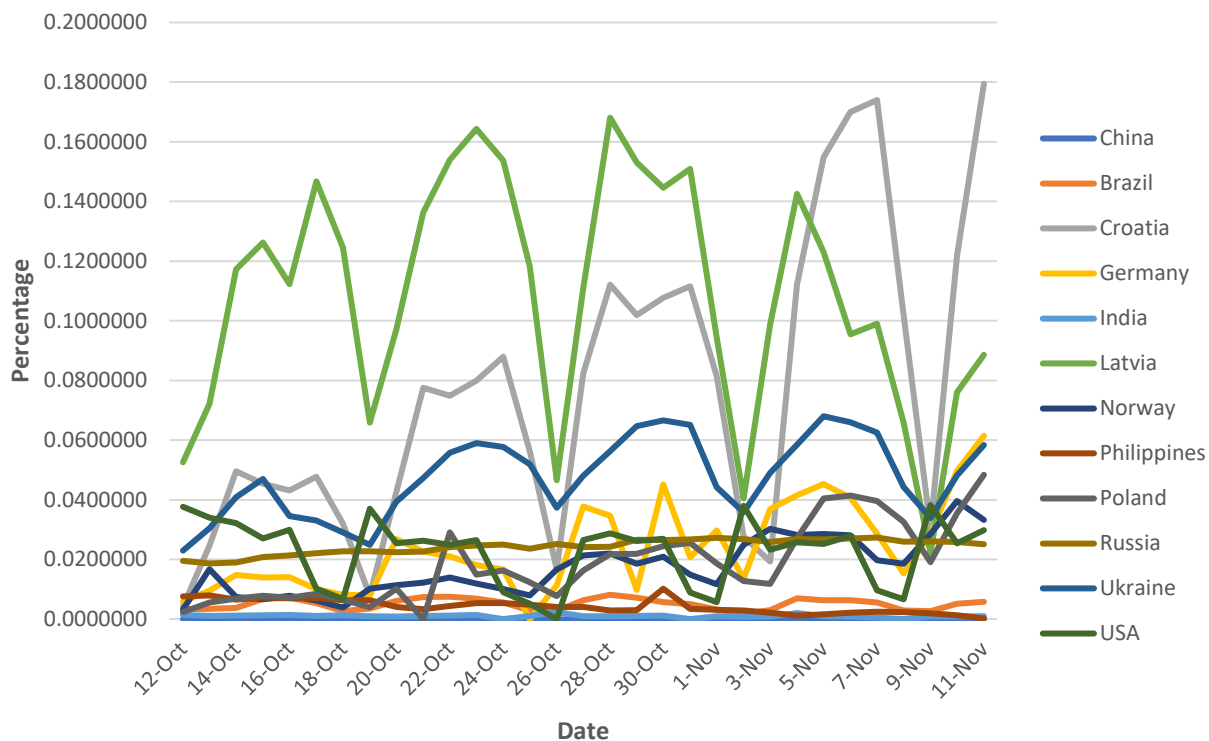


Positivity Rate:

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. Philippines had 7 positive case out of 175 tested which equals to 4%.

Covid-19: Newinfection ratio

Newinfections in% of population

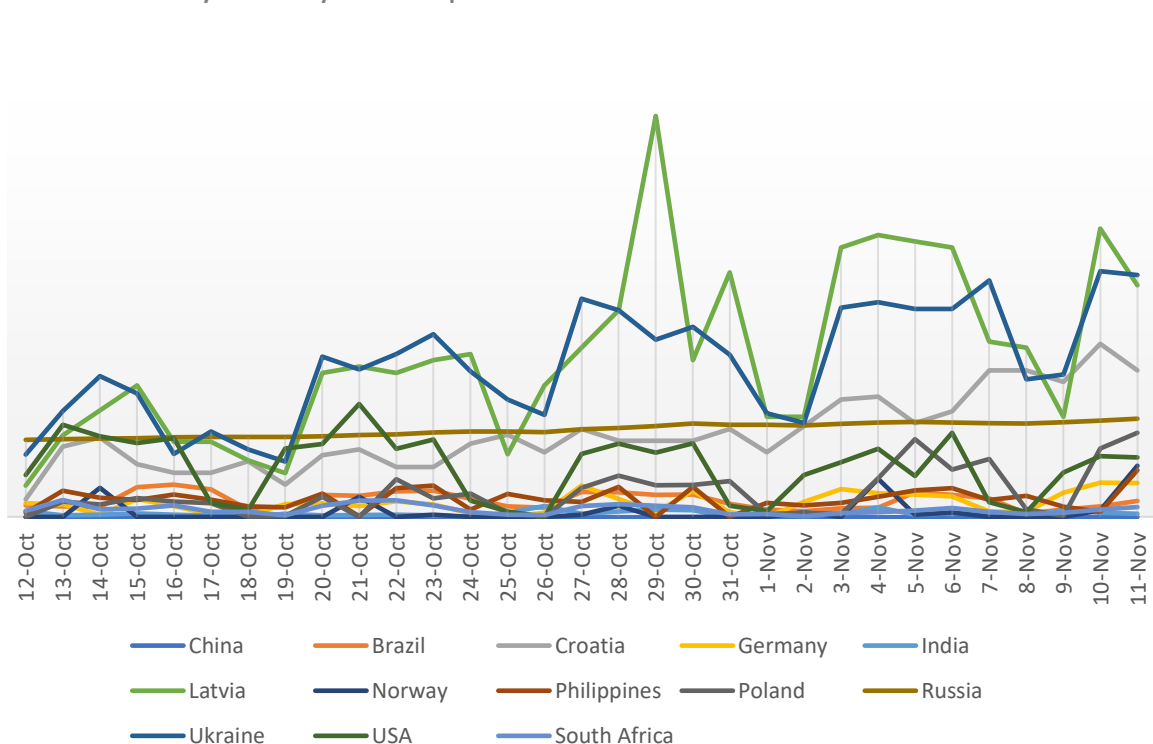


Looking at the home countries of our seafarers we want to give an overview about trends and threats. In order to have a comparable base the number of daily newinfections has been put in relation to the number of inhabitants – resulting in a percentage figure. It has to be considered that infection figures 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 Croatia and Latvia but also Ukraine are showing an increase of infection figures but we have also very high figures at Romania, Bulgaria and Singapore.

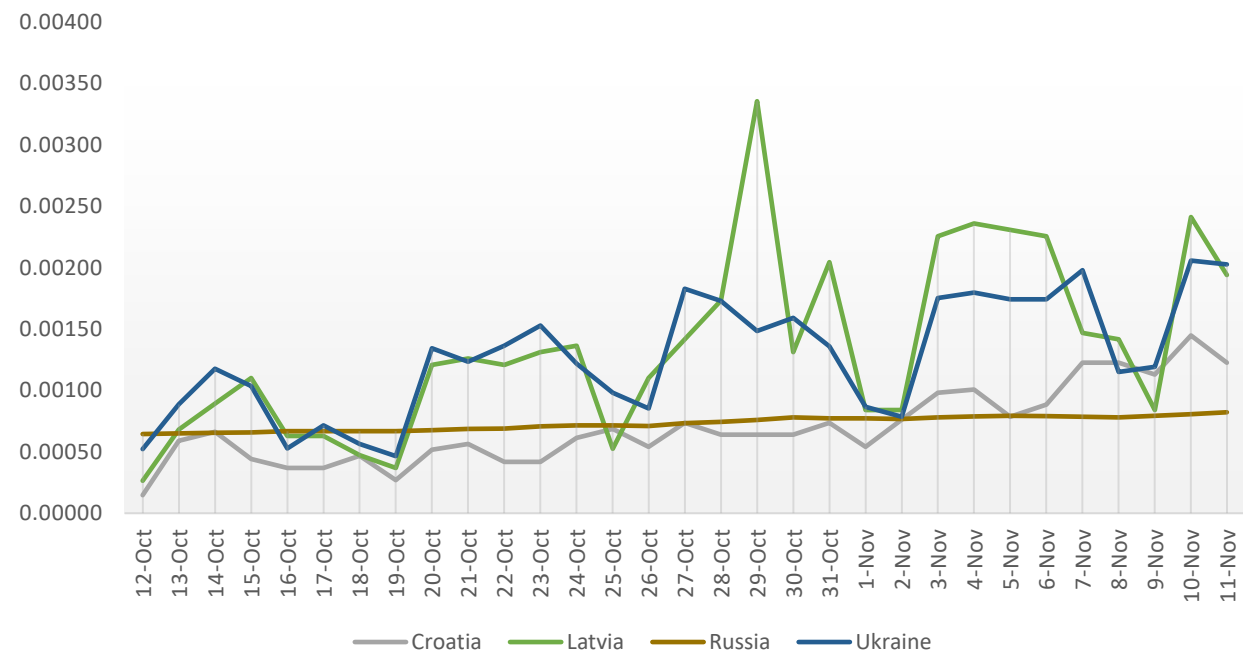
Sources: [Wikipedia](#) [The New York Times](#) [JHU CSSE COVID-19 Data](#) [Europäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](#)

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

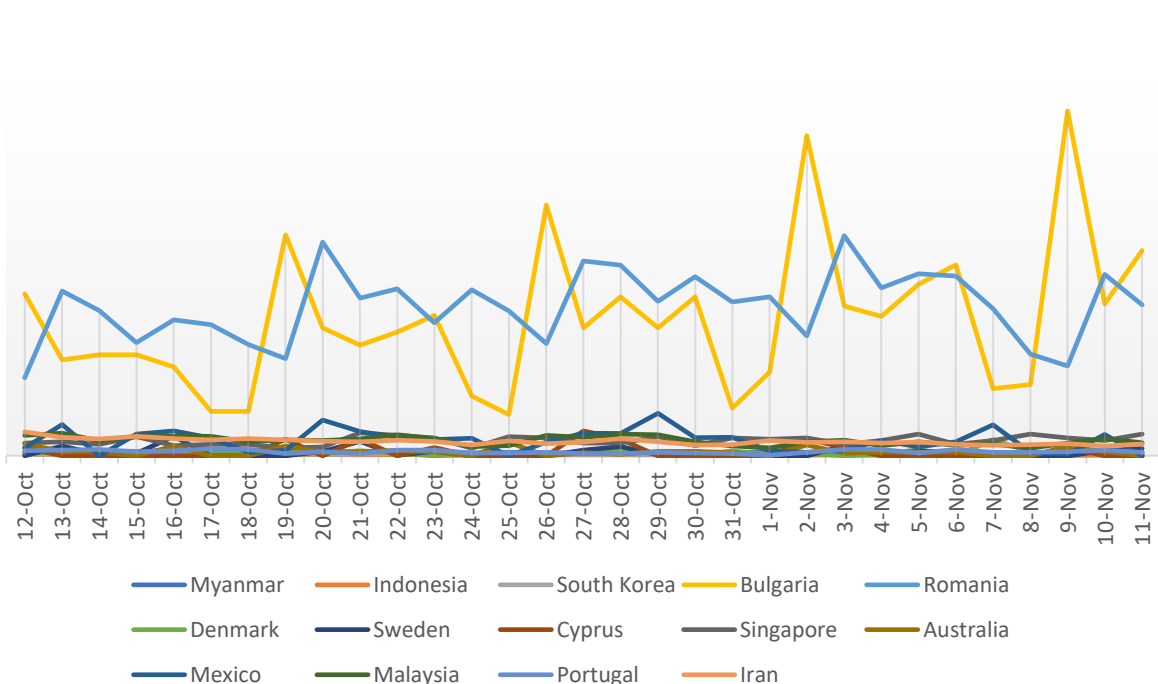
Sources: [Wikipedia](#) [The New York Times](#) [JHU CSSE COVID-19](#) [DataEuropäisches Zentrum für die Prävention und die Kontrolle von Krankheiten](#)

Covid-19: Fatality ratio II

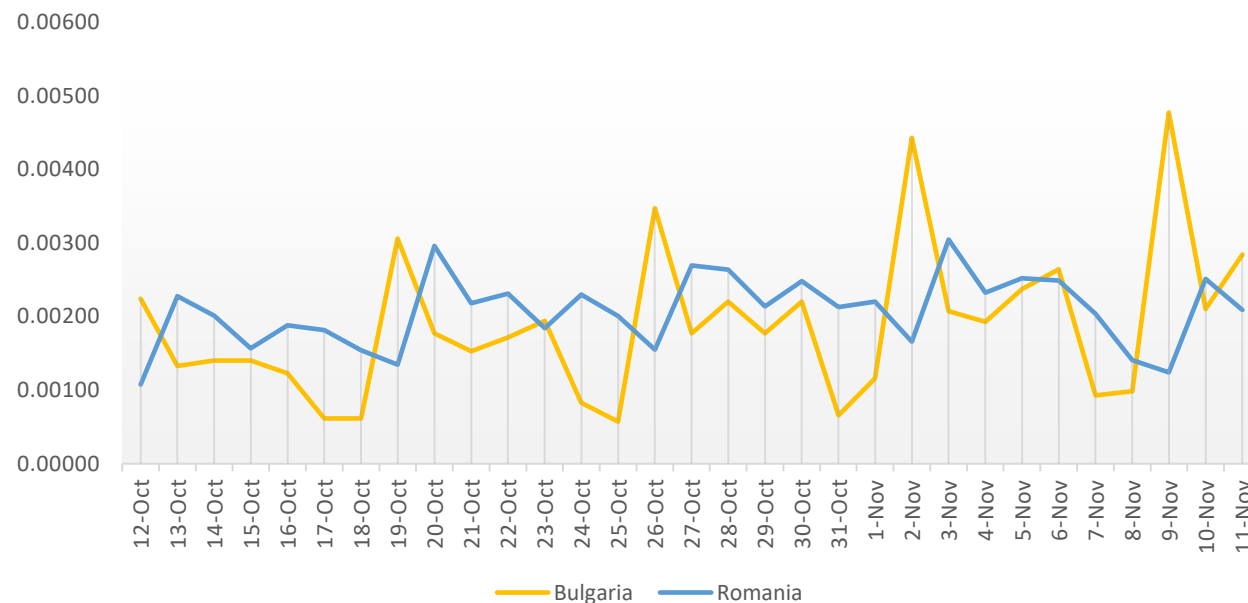
this needs to be seen as a sign that -beside the most obvious reason that not vaccinated people are affected- the vaccination level is not sufficient any more due to expiry of immunization triggers or/and (much more important!) the influence of new virus strains.

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: New variants and the vaccines – update

New variants:

- If viruses are replicating (and that is how they are surviving) they are also producing some few variants - the so called mutations
- These variants are always a potential threat for immunity which is caused by either vaccination or by recovery of sickness
- Generally an increase of infections at same time means also an opportunity for the virus to develop and to create more variants

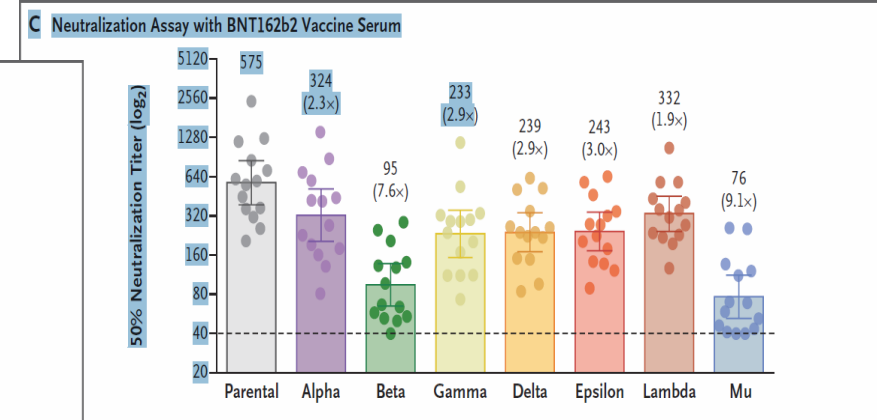
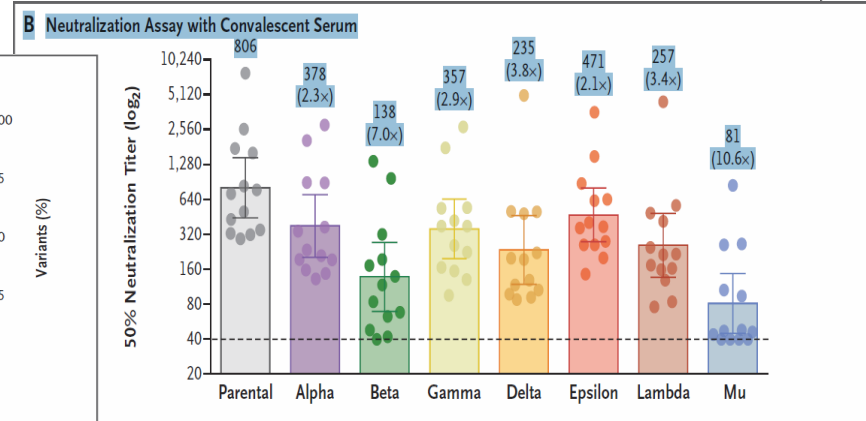
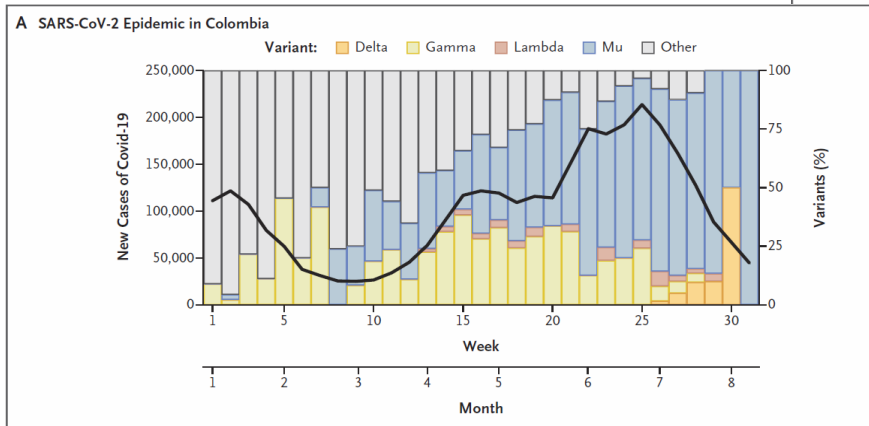
Findings of research new variant Mu B.1.621:

- Mu variant is 10.6 times as resistant against neutralization when people have recovered from first Covid-19 virus
- Mu variant is 9.1 times as resistant against neutralization when people have been vaccinated with BioNTech/Pfizer
- Mu variant still is 2 times as resistant against neutralization when people have recovered from very resistant beta Covid-19 virus
- Mu variant still is 1.5 times as resistant compared also to beta variant against neutralization when people have been vaccinated with BioNTech/Pfizer

Conclusions:

- New variants are becoming more and more resistant against immunization created by earlier variants and respective vaccinations
- Vaccinations at the one hand are lowering down the development speed of new variants and at the other hand are protecting against severe sicknesses and fatalities if not even against infections itself

We need to hasten and catch up with the vaccination. More vaccinated people, less development of variants. And always, take care of yourself because your immune system needs your support!



<https://www.nejm.org/doi/pdf/10.1056/NEJM2114706?articleTools=true>

Covid-19: How to protect crew member and vessel

Recommendations

In case of significant Covid-19 activity in specific home countries of on- signing seafarers and at same time knowing that PCR testing in many cases cannot find the virus we strongly recommend following procedure to be kept at least:

	Not or only incompletely vaccinated	Fully vaccinated (with 2 weeks after 2nd dose of Covid vaccine - if J&J/Sputnik Light then 2 respectively 4 weeks after one jab) and joining a vessel with fully vaccinated 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 5 days and 7 days
5. First PCR testing at beginning of the quarantine	Day 1 of quarantine	Day 1 of quarantine
6. Second PCR testing earliest at	8th day of quarantine	5th day of quarantine
7. Transfer and leaving of quarantine earliest when result of second PCR test is received and negative	Fully applicable	Fully applicable
8. PCR test at country of boarding the vessel	Fully applicable	Fully applicable
9. Strict usage of covid-19 PPE for transfers, flights and for any other occasion potentially contact can occur with third parties	Fully applicable	Fully applicable