by Emergency Operations Center, Department of Disease Control

Thailand situation update on 21 May 2021

1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	165,879,334	290,332	
Deaths	3,445,654		2.07%

2.The Disease Situation in Thailand

Situation	Total Number*
Total number of new cases	3,481
Cases found in quarantine facilities/centers (Imported)	12
Cases found in Prisons	951
Cases infected in Thailand (Local transmission)	1,644
Cases found from active case finding	874
Total number of confirmed cases	123,066
Total recovered and discharged from hospitals Newly recovered and discharged from hospitals	79,504 (64.60%) 2,868
Undergoing treatment	42,827 (34.80%)
Deaths New deaths	735 (0.60%) 32



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Type of Screened People and PUI	Total Number
Total number	
Ports of entry (Airports, ground ports, and seaports)	8,468,642
People renewing their passports at the Immigration Bureau, Chaeng Watthana	557,855
Total number of laboratory tests	2,294,686
People who met the PUI criteria	1,867,110
Returnees in quarantine facilities/centers	81,842
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	1,867,110
Detected from ports of entry	5,414
Sought medical services on their own at hospitals (416,865 cases in private hospitals, and 1,444,743 cases in public hospitals)	1,861,608
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

Remark: *PUI (Patients Under Investigation)

Characteristics of Deaths (678 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (641 deaths)			
Case Fatality Rate (CFR) in each age group						
• 15-39 years old	0.20%	0.02%	0.11%			
• 40-59 years old	2.10%	0.02%	0.80%			
60+ years old	6.50%	2.60%	5.04%			
Percentage of COVID-19 deaths of patients with underlying diseases including obesity, elderly patients, and pregnant patients						
	64%	100%	91%			
Average number of days between the onset of symptoms and the date of receiving treatment (Minimum-Maximum)						
	3.5 (0-19)	1.2 (0-8)	1.8 (0-14)			



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3. Thailand's Implementation

- The Department of Health, Ministry of Public Health revealed that many COVID-19 cases were found in a worker camp. The epidemic was caused by crowded living conditions, sharing common areas such as restrooms, toilets, dining spots, and also from people going to the local market. Anyone at high risk of exposure or those who require monitoring for observation, like those living in houses with people with underlying diseases or the elderly should follow strict disease prevention measures by taking days off of work if possible, not leaving the house if possible, avoiding being close to other people, monitoring their symptoms, and separate personal instruments (e.g., toothbrushes, glasses, towels) from family members.
- The Ministry of Transport opened a COVID-19 Vaccination Center at Bang Sue Central Station. There will be enough capacity to vaccinate 900 people per hour or a maximum target of 10,000 people per day. They will begin testing the system on May 24, 2021. Initially, vaccination will begin with the 1st phase to serve about 60,000 personnel of the Ministry of Transport and it is expected that vaccination in this phase will be completed by June 6, 2021. Then the 2nd phase will begin on June 7, 2021 for three groups of people including 1) organizations and agencies in coordination with the Ministry of Public Health, 2) the general population who registered at service points, and 3) people who registered via online/application.
- Thailand's Centre for COVID-19 Situation Administration (CCSA) announced to extend the enforcement period for the Emergency Decree on Public Administration in Emergency Situations throughout Thailand for another two months until July 31, 2021 to control the COVID-19 epidemic.
- The Office of the Prime Minister revealed that the Prime Minister ordered strict restrictions on preventing the smuggling of undocumented migrant workers into Thailand. Currently, it is still illegal to enter the country through natural, unofficial entry points. Security personnel continuously and rigorously patrol these areas, and are also preparing local quarantine facilities and field hospitals in border provinces. In addition, 14 more field hospitals have been opened to accommodate migrant workers who have crossed borders without official documentation and who have been found to have COVID-19.

4. Risk Assessment of COVID-19 Situation

Fifteen workers at the shuttered construction camp in Laksi district of Bangkok, were found to be infected with the Indian variant of the coronavirus. This COVID-19 variant has been spreading in India since October 2020. This led to the dramatic increase of COVID-19 cases in India, which resulted in the shortage of hospital beds and oxygen and it had a direct effect on patient care which led to a large increase in mortality in India. Information on the COVID-19 outbreak in the UK showed that symptoms of patients with the Indian variant were not different from symptoms of patients with the UK variant (B.1.1.7). These variants of



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COVID-19 have similar transmission capacity and limited information is available on the effectiveness of vaccines against them. Many countries have been reporting COVID-19 cases of the Indian variant, including countries in Europe, Singapore, China, Myanmar and Cambodia, but the severity has not been as high as in India. This may be due to the strict disease prevention and control measures of each country or other factors. In Thailand, although people infected with the Indian variant will be isolated at hospitals, the communities still must conduct continuous surveillance. All provinces that have clusters of COVID-19, especially among laborer groups, people returning from abroad, and people with severe infection who already received two doses of the COVID-19 vaccine, should collect samples to test for variants and limit the spread as soon as possible.