## by Emergency Operations Center, Department of Disease Control

### Thailand situation update on 6 June 2021

### 1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	173,742,426	391,331	
Deaths	3,736,974		2.15%

### 2. The Disease Situation in Thailand

Situation	Total Number*	
Total number of new cases	2,671	
Cases found in quarantine facilities/centers (Imported)	83	
Cases found in Prison	604	
Cases infected in Thailand (Local transmission)	1,095	
Cases found from active case finding	889	
Total number of confirmed cases	177,467	
<ul> <li>Total recovered and discharged from hospitals</li> <li>Newly recovered and discharged from hospitals</li> </ul>	126,517 (71.29%) 2,242	
Undergoing treatment	49,714 (28.71%)	
<ul> <li>Deaths</li> <li>New deaths</li> </ul>	1,236 (0.70%) 23	



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Type of Screened People and PUI	Total Number
Total number	
Ports of entry (Airports, ground ports, and seaports)	8,569,637
<ul> <li>People renewing their passports at the Immigration Bureau, Chaeng Watthana</li> </ul>	575,833
Total number of laboratory tests	2,484,857
People who met the PUI criteria	2,056,702
Returnees in quarantine facilities/centers	82,421
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	2,056,702
Detected from ports of entry	5,676
<ul> <li>Sought medical services on their own at hospitals (348,548 cases in private hospitals, and 1,293,158 cases in public hospitals)</li> </ul>	2,050,938
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

## Remark: \*PUI (Patients Under Investigation)

Characteristics of Deaths (1,236 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (1,142 deaths)			
Case Fatality Rate (CFR) in each age group						
• 20-39 years old	0.20%	0.02%	0.12%			
• 40-59 years old	2.10%	0.02%	1.00%			
• 60+ years old	6.50%	2.60%	7.37%			
Percentage of COVID-19 deaths of patients with underlying diseases including obesity, elderly patients, and pregnant patients						
	64%	100%	90%			
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 - 19)			



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#### 3. Thailand Inplementations

- The National Drug System Development Board announces that the green chiretta (Andrographis paniculata) herbal drug, extract and powder forms, has been included in the National List of Essential Herbal Medicines (No. 2), B.E. 2564 (2021) for treatment of COVID-19 patients with mild symptoms. The medicine, in a finished product with andrographolide quantity control, can be used only by licensed medical practitioners. The announcement is effective on 3 June 2021.
- The Department of Health elevates the 4 COVID-19 main measures including "prevention, environmental health, auxiliary measures for medium and large factories and measures when an infected person is found" to support the factory-type establishments in prevention of the COVID-19 spreading. The department has joined hands with the Ministry of Labor, the Industry Council, and the Ministry of Interior, on the risk prevention by communicating the prevention guideline "Good Factory Practice (GFP)" to all factories as a guide for self-assessment via the "Thai Stop COVID Plus" platform.

### 4. Risk Assessment of COVID-19 Situation

From the risk history analysis of the coronavirus 2019 infected cases during the past 1 month (6 May 6 to 6 June 2021), it was found that the daily number of cases from local transmission was relatively stable. The number of infected people with a history of commuting or traveling, or visiting household members or friends has started to decline. This indicates a decreasing trend among them. However, the number of cases from workplaces has been increasing including workers in business establishments, factories, construction camps, merchants in markets and shopping malls including those general workers who meet a lot of people such as public transportation drivers, cargo trucks, security guards, etc. This indicates continuous disease spreading in the workplace and among the public service workers. Regarding the measures to prevent the outbreaks in the establishments, all should consider the "Bubble and Seal' measure to reduce the risk of disease spreading into the communities. Advice on accelerating the screening of infected people among workers to rapidly isolate the cases and bring them into the treatment and care system. In addition, the establishments' owners should also cooperate with the COVID-19 vaccination roll-out plan in the at risk of severe illness people and people in the outbreak areas to generate community immunity. Moreover, efforts to reduce the risk of COVID-19 spreading should be carried out by avoiding gathering of employees in workplaces as much as possible such as lapse time working, refrain from getting together for talking or eating and reduce congestion at canthines. If it is necessary to be in close proximity, for example, being at work or taking a company transport bus, all must follow strict preventive measures against the infection. A screening system is in place to isolate those who have fever or respiratory symptoms before entering the workplace including a requirement for employees to report if they suspect that they are the high-risk contacts with confirmed COVID-19 patients, without having to wait for symptoms to occur.