

by Emergency Operations Center, Department of Disease Control

Thailand situation update on 8 July 2021

1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	185,893,922	469,717	
Deaths	4,018,931		2.16%

2.The Disease Situation in Thailand

Situation	Total Number
Total number of new cases	7,058
Cases found in quarantine facilities/centers (Imported)	9
Cases found in prisons	68
Cases infected in Thailand (Local transmission)	5,249
Cases found from active case finding (Local transmission)	1,732
Total number of confirmed cases	308,230
Total recovered and discharged from hospitals Newly recovered and discharged from hospitals	236,149 (76.62%) 4,978
Undergoing treatment	69,619 (22.58%)
Deaths New deaths	2,462 (0.80%) 75

Screening, Testing, and PUI	Total Number
Total number of people screened	
Ports of entry (Airports, ground ports, and seaports)	8,767,967
People renewing their passports at the Immigration Bureau, Chaeng Watthana	614,380
Total number of laboratory tests	2,821,868
People who met the PUI criteria	2,393,014



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Returnees in quarantine facilities/centers	83,120
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	2,393,014
Detected from ports of entry	6,100
Sought medical services on their own at hospitals (610,222 cases in private hospitals, and 1,776,604 cases in public hospitals)	2,375,826
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

Remark: *PUI (Patients Under Investigation)

Characteristics of Deaths (2,462 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (2,368 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%	0.90%				
60+ years old	6.50%	2.60%	7.36%				
Under 1 year old (2 deaths)							
Percentage of COVID-19 deaths that consist of elderly patients, patients with underlying diseases including obesity, or 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)	3.2 (0 - 19)				

3. Thailand Implementations

- The Department of Disease Control suggested practices for COVID-19 infected patients and high-risk close contacts persons who need to travel to their hometown to receive the treatments or quarantine as follows
 - 1. Contact the authorities or the Provincial Public Health Office in the destination province
 - 2. Travel by private car only
 - 3. Wear a medical or cloth mask, carry personal hand sanitizer and trash bags



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- 4. Prepare medicine to relieve respiratory symptoms and the personal prescription medicine for the chronic underlying disease (if any)
- 5. Prepare food and drinking water in order to not making stopovers
- 6. Note all emergency phone numbers for urgent use.
- 35 provinces in Thailand that announced they will accept Covid-19 patients in Bangkok Metropolitan Region to travel back to their hometown or domicile (whose name is in the household registration) to receive treatment includes: 1. Nakhon Ratchasima 2. Sakon Nakhon 3. Lampang 4. Khon Kaen 5. Phitsanulok 6. Sisaket 7. Phetchabun 8. Loei 9. Uttaradit 10. Yasothon 11. Singburi 12. Kalasin 13. Nakhon Phanom 14. Phrae 15. Chaiyaphum 16. Nakhon Si Thammarat 17. Sa Kaeo 18. Roi Et 19. Ubon Ratchathani 20. Nong Khai 21. Prachuap Khiri Khan 22. Maha Sarakham 23. Buriram 24. Surin 25. Nong Bua Lamphu 26. Tak 27. Phayao 28. Amnat Charoen 29. Lop Buri 30. Uthai Thani 31. Chanthaburi 32. Ratchaburi 33. Phatthalung 34. Mukdahan and 35. Udon Thani.
- The National Institute for Emergency Medicine together with the Department of Disease Control and the Department of Medical Services coordinated with the Lifeguard and Rescue Networks in forming the Active Case Finding operation team to find the infected patients who are waiting for a hospital bed at home in Bangkok and get admission into the treatment system according to the level of their symptoms. The monitoring team may be set up to follow the patients' symptoms or they will be sent to the field hospital in Bangkok in the case of severe symptoms, while Busarakam Field Hospital will be responsible for the vulnerable group and elderly with underlying diseases.

4. Risk Assessment of COVID-19 Situation

According to the COVID-19 mortality data in a new wave between April 1 and July 7, 2021, there were 2,293 deaths (1.11 % mortality rate) out of 206,038 confirmed cases, 109 death cases were reported in April, 828 cases in May, 992 cases in June and 364 cases in July. The median age of them is 66 years (half of the deaths aged 56-77 years), of which 1,297 were men (56.6%), while 1,870 (81.6%) are those with a history of having congenital disease and were the close contact of the 1,333 previous confirmed cases (58.1%), and 642 were contacted by relatives or family members (48.2 percent). Therefore, elderly people whose relatives or family members have to travel to work or come back from a high-risk area, are at risk of infection especially those with underlying diseases who are at high risk of developing severe symptoms that may cause death. Both the elderly and their relatives must strictly comply with the self-protection measures of returning from various high-risk areas. keeping social distance of at least 1-2 meters in joint activities, wearing a mask or cloth mask at all times while talking to their relatives or while sharing a public vehicle, washing hands frequently after touching anything that may be contaminated, such as doorknobs and stair railings. All are requested to avoid sharing devices such as mobile phones, computers, glasses, plates, bowls, cutlery and have food in a separated personal plate. If an elderly person in the house has suspected symptoms such as fever, cough, runny nose, sore throat and loss of smell, please seek medical treatment immediately and should not wait until showing severe symptoms such as rapid breathing, shortness of breath, chest pain, and



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inform the medical personnel of the risk history. In addition, all should reserve the queue for vaccination according to the various channels that each province determined because after vaccination is effective in preventing severe symptoms. At the same time, the provinces where vaccination is allocated should prioritize planning for the implementation of vaccination for the elderly and people with underlying diseases.