

by Emergency Operations Center, Department of Disease Control

Thailand situation update on 2 September 2021

1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	219,352,945	733,249	
Deaths	4,546,685		2.07%

2. The Disease Situation in Thailand

Situation	Total Number
Total number of new cases	14,956
Cases found in quarantine facilities/centers (Imported)	17
Cases found in prisons	356
Cases infected in Thailand (Local transmission)	12,364
Cases found from active case finding (Local transmission)	2,222
Total number of confirmed cases	1,234,487
Total recovered and discharged from hospitals Newly recovered and discharged from hospitals	1,031,278 (83.54%) 17,936
Undergoing treatment	163,680 (15.48%)
Deaths New deaths	12,103 (0.98%) 262



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Screening, Testing, and PUI	Total Number
Total number of people screened	
Ports of entry (Airports, ground ports, and seaports)	9,041,501
People renewing their passports at the Immigration Bureau, Chaeng Watthana	662,117
Total number of laboratory tests	3,428,512
People who met the PUI criteria	2,998,924
Returnees in quarantine facilities/centers	83,854
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	2,998,924
Detected from ports of entry	6,158
 Sought medical services on their own at hospitals (857,454 cases in private hospitals, and 2,135,224 cases in public hospitals) 	2,992,678
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

Remark: *PUI (Patients Under Investigation)

Characteristics of Deaths (12,103 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (12,009 deaths)			
Case Fatality Rate (CFR) in each age group						
• 15 - 39 years old	0.20%	0.02%	0.13%			
• 40 - 59 years old	2.10%	0.02%	1.02%			
60+ years old	6.50%	2.60%	7.60%			
<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%	89%			



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3. Thailand Implementations

- The steering committee on developing Thailand into the international health hub planned to open 4 additional provinces which are Bangkok, Chiang Mai, Pattaya, Hua Hin as the government has announced to support the opening of the country. The additional pilot tourism areas are Chiang Khan in Loei province, Nong Khai provinces, Kood island, Chang island in Trat province. and Koh Samet in Rayong Province. The model of bubble and seal routes will be implemented while the Tourism Authority of Thailand was assigned to include this in the strategic plan to open the tourist area which will be proposed to the Cabinet soon. Being a hub of vaccine manufacturing, Health Promotion and herbal products also included in the plan.
- Phuket province considered using screening measures for traveling to Phuket and taking measures to stop the movement of people in a concrete way, also reducing unnecessary activities. They focus on proactive examination for target groups. There are also guidelines to manage patients in each group as follows 1. Green groups do home Isolation within the area that is designated by local or community, organizational quarantine, or factory quarantine 2. Yellow groups or a risk group will be treated at field hospitals in the area and 3. The Red group will be hospitalized. In addition, the booster injection of Astrazeneca 3rd dose is accelerate and expected to be completed by September 2021
- The Center for COVID-19 Situation Administration has clarified new measures to control COVID-19 to safely restore the economy in 29 dark red zone provinces. Entrepreneurs, shops and service users are asked for cooperation with to follow the Covid Free Setting guidelines by vaccinating 2 injections or regularly do ATK screening. This is not mandatory until the vaccination and ATK testing kits are thoroughly accessible.

4. Risk Assessment of COVID-19 Situation

From the COVID-19 cases record from 1 April - 2 September 2021, the total death toll of COVID-19 infected patients is 12,009 people out of 1,043,287 cases who had finished treatment (1.15% mortality rate) with 109 death cases in April, 828 in May, 992 in June, 2,834 in July, 6,732 in August, and 514 cases during 1 - 2 September. It was found that the median age of the deceased was 66 years (half of the deaths aged between 55 and 77 years old) with 6,570 of the total deaths (54.7%) being male, 9,253 (77.0%) had underlying disease or obesity, 5,567 (46.3%) were the high-risk close-contact person of previous confirmed cases with 2,108 (37.9%) of them got infected from family members and 314 (5.6%) from colleagues. There is a high risk of infection for the elderly who have relatives or family members working outside, especially those with underlying diseases. It can increase the risk of developing severe symptoms and it may cause death. Therefore, the risk should



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be reduced by self-protection measures. Although, you are living together in the same house with both the elderly and family members who still travel to the workplace. You should keep distance at least 1-2 meters for doing various activities together such as do not eat together, wear masks all the time while talking with your family members or sharing a vehicle, always wash your hands after touching items that may be contaminated such as doorknobs, stair railings, refrigerators, remote controls, and avoid sharing devices like mobile phones, computers, glasses, dishes, spoons and fork. If the elderly in the house have suspected symptoms such as fever, cough, runny nose, sore throat and anosmia, they should consult a doctor immediately for testing before showing severe symptoms such as rapid breathing, shortness of breath and chest pain. The risk history should be informed to the doctor or health personnel. In addition, reservations for vaccination appointments should be made in various channels that each province has arranged since the completed vaccination is effective to prevent severe symptoms and death more than 90%. At the same time, vaccination for the elderly and people with underlying diseases should be prioritized by each province to cover as much as possible to reduce deaths.