

COVID-19 Weekly Epidemiological Update

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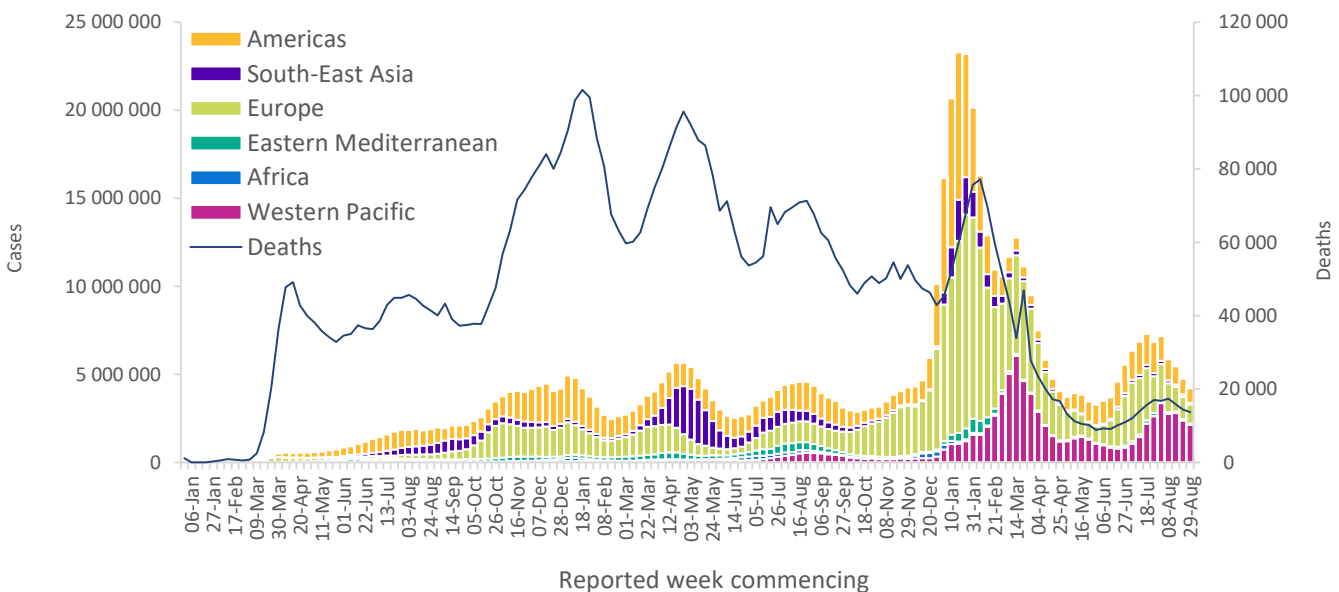
Global overview

Data as of 4 September 2022

Globally, the number of new weekly cases decreased by 12% during the week of 29 August to 4 September 2022, as compared to the previous week, with just under 4.2 million new cases reported (Figure 1, Table 1). The number of new weekly deaths decreased by 5% as compared to the previous week, with over 13 700 reported. Globally, as of 4 September 2022, over 600 million confirmed cases and over 6.4 million deaths have been reported.

At the regional level, the number of newly reported weekly cases decreased across all six regions: the Eastern Mediterranean Region (-29%), the South-East Asia Region (-22%), the European Region (-15%), the African Region (-10%), the Western Pacific Region (-10%) and the Region of the Americas (-9%). The number of new weekly deaths decreased across three of the six regions: the South-East Asia Region (-24%), the European Region (-22%) and the Eastern Mediterranean Region (-12%); while it increased in the African Region (+14%), the Region of the Americas (+6%) and the Western Pacific Region (+5%).

Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 4 September 2022**



**See [Annex 1: Data, table, and figure notes](#)

At the country level, the highest numbers of new weekly cases were reported from Japan (1 164 787 new cases; -7%), the United States of America (586 509 new cases; +2%), the Republic of Korea (585 374 new cases; -21%), the Russian Federation (323 500 new cases; +12%) and China (238 044 new cases; +22%). The highest numbers of new weekly deaths were reported from the United States of America (3558 new deaths; +26%), Japan (2059 new deaths; +3%), Brazil (865 new deaths; -17%), the Russian Federation (628 new deaths; +20%) and the Republic of Korea (524 new deaths; similar to the previous week).

Current trends in reported COVID-19 cases and deaths should be interpreted with caution as several countries have been progressively changing COVID-19 testing strategies, resulting in lower overall numbers of tests performed and consequently lower numbers of cases detected. Additionally, data from countries are continuously updated by WHO to incorporate changes in reported COVID-19 cases and deaths made by countries retrospectively.

Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 4 September 2022**

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 (%)
Western Pacific	2 149 463 (51%)	-10%	85 188 760 (14%)	3 707 (27%)	5%	261 895 (4%)
Europe	1 092 799 (26%)	-15%	246 634 859 (41%)	3 355 (24%)	-22%	2 061 081 (32%)
Americas	821 450 (20%)	-9%	176 211 601 (29%)	5 645 (41%)	6%	2 820 836 (44%)
South-East Asia	90 523 (2%)	-22%	60 053 325 (10%)	602 (4%)	-24%	795 991 (12%)
Eastern Mediterranean	33 697 (1%)	-29%	22 994 621 (4%)	357 (3%)	-12%	347 656 (5%)
Africa	11 420 (<1%)	-10%	9 297 294 (2%)	50 (<1%)	14%	174 344 (3%)
Global	4 199 352 (100%)	-12%	600 381 224 (100%)	13 716 (100%)	-5%	6 461 816 (100%)

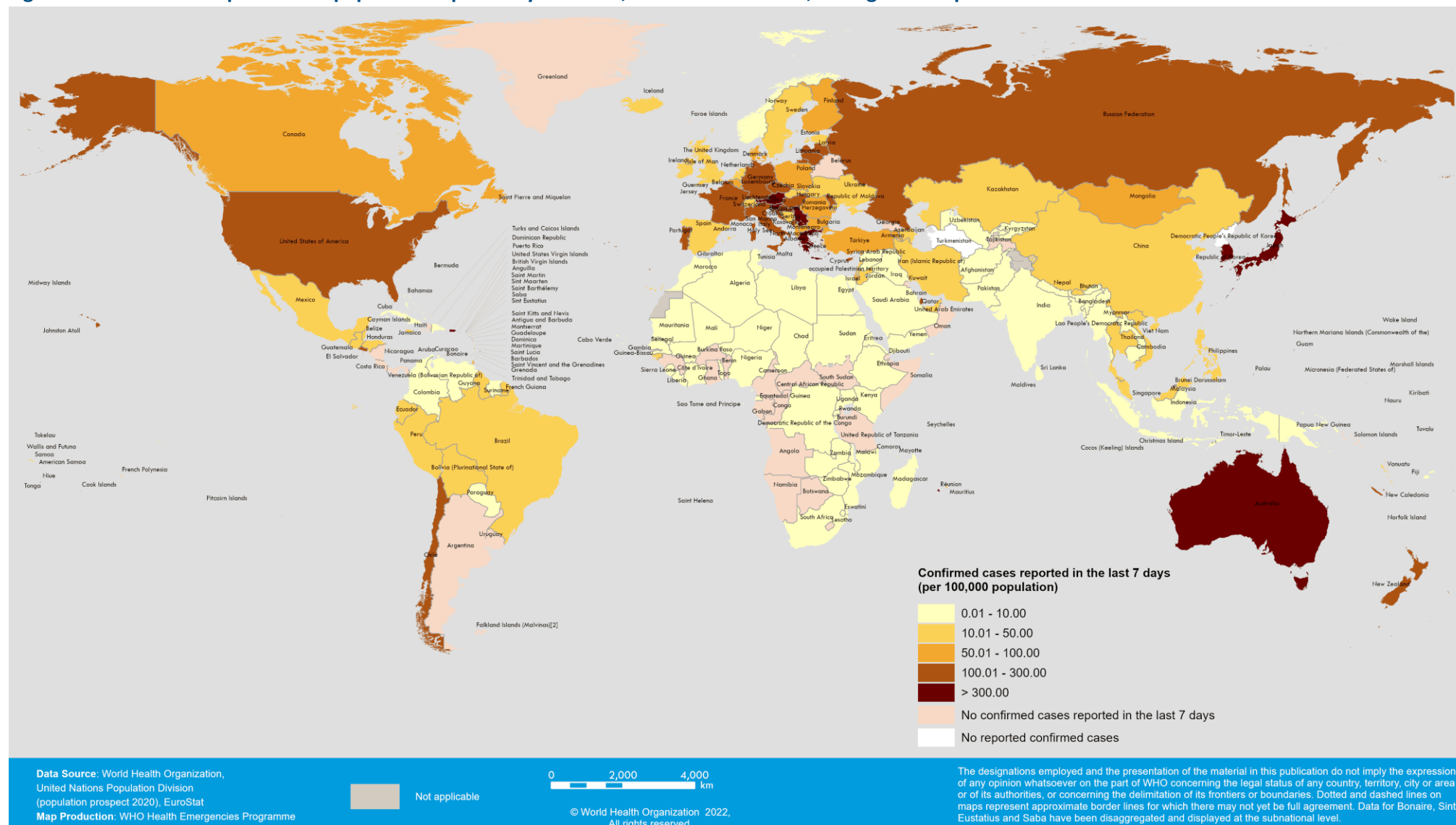
*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior. Data from previous weeks are updated continuously with adjustments received from countries.

**See [Annex 1: Data, table, and figure notes](#)

For the latest data and other updates on COVID-19, please see:

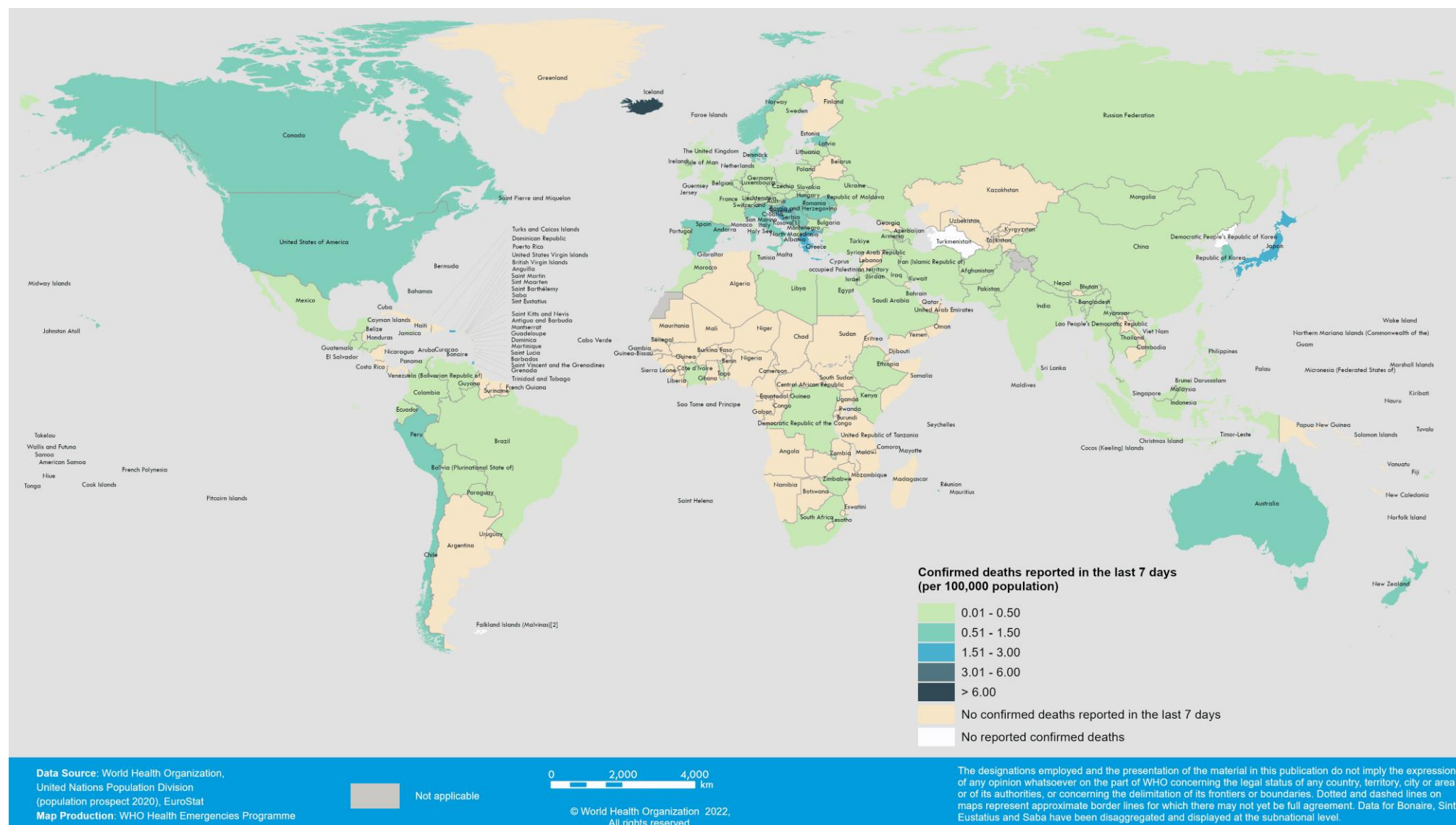
- [WHO COVID-19 Dashboard](#)
- [WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update](#)
- [WHO COVID-19 detailed surveillance data dashboard](#)

Figure 2. COVID-19 cases per 100 000 population reported by countries, territories and areas, 29 August - 4 September 2022*



**See [Annex 1: Data, table, and figure notes](#)

Figure 3. COVID-19 deaths per 100 000 population reported by countries, territories and areas, 29 August - 4 September 2022**



**See [Annex 1: Data, table, and figure notes](#)

Special Focus: Update on SARS-CoV-2 variants of interest and variants of concern

Geographic spread and prevalence of VOCs

Globally, from 5 August to 5 September 2022, 118 028 SARS-CoV-2 sequences were shared through GISAID. Among these, 117 317 sequences were the Omicron variant of concern (VOC), accounting for 99.4% of sequences reported globally in the past 30 days.

A comparison of sequences submitted to GISAID in epidemiological week 34 (22 to 28 August 2022) and week 33 (15 to 21 August 2022) shows that BA.5 Omicron descendent lineages continue to be dominant globally, with an increase in weekly prevalence from 84.8% to 86.8%. The prevalence of BA.4 descendent lineages decreased from 6.8% in week 33 to 4.2% in week 34 including BA.4.6 descendent lineage, which decreased from 3.5% to 2% within the same time period. The prevalence of BA.2 descendent lineages (BA.2.X) remained stable in week 34 compared to week 33 (2.6% in week 33 and 2.5% in week 34). BA.2.75, an Omicron descendent lineage under monitoring, still shows a relatively low (0.9% and 1.2% in weeks 33 and 34 respectively) prevalence globally, but a number of countries have observed recent increasing trends.

WHO continues to monitor all lineages, including descendent lineages of VOCs, to track any increase in prevalence and change in viral characteristics. The current trends describing the circulation of Omicron descendent lineages should be interpreted with due consideration of the limitations of the SARS-CoV-2 surveillance systems. These include differences in sequencing capacity and sampling strategies between countries, changes in sampling strategies, reductions in tests conducted and sequences shared by countries around the world and delays in uploading sequence data to GISAID.

For more information on the assessment of SARS-CoV-2 variants and the WHO classification refer to Annex 2.

Additional resources

- [Tracking SARS-CoV-2 Variants](#)
- [COVID-19 new variants: Knowledge gaps and research](#)
- [Genomic sequencing of SARS-CoV-2: a guide to implementation for maximum impact on public health](#)
- [Considerations for implementing and adjusting public health and social measures in the context of COVID-19](#)
- [VIEW-hub: repository for the most relevant and recent vaccine data](#)

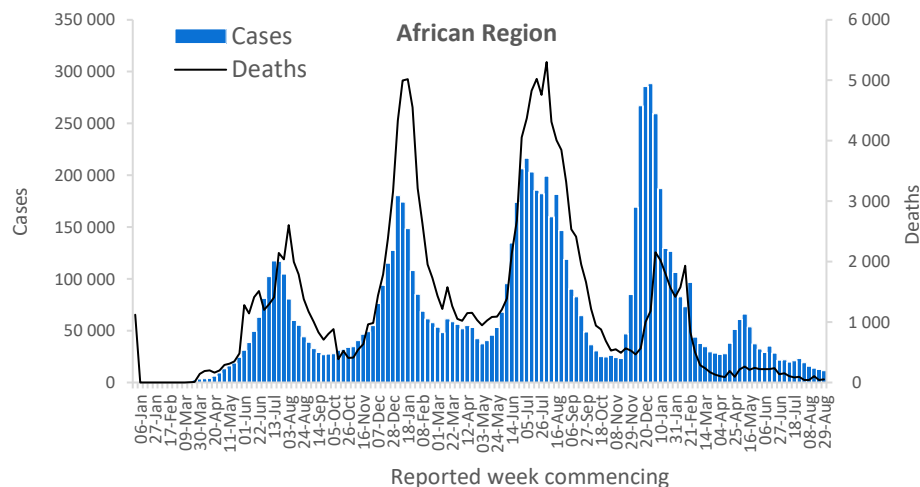
WHO regional overviews:

Epidemiological week 29 August - 4 September 2022**

African Region

The African Region reported over 11 000 new weekly cases, a 10% decrease compared to the previous week. Eight (16%) countries reported increases in the number of new cases of 20% or greater, with some of the greatest proportional increases seen in Mali (262 vs 55 new cases; +376%), Chad (47 vs 33 new cases; +42%) and Côte d'Ivoire (202 vs 166 new cases; +22%). The highest numbers of new cases were reported from Réunion (7014 new cases; 783.4 new cases per 100 000 population; +23%), South Africa (1275 new cases; 2.1 new cases per 100 000; -14%) and Nigeria (460 new cases; <1 new case per 100 000; -7%).

The number of new weekly deaths in the Region increased by 14% as compared to the previous week, with 50 deaths reported. The highest numbers of new deaths were reported from South Africa (24 new deaths; <1 new death per 100 000 population; +33%), Réunion (13 new deaths; 1.5 new deaths per 100 000; +117%), and the Democratic Republic of the Congo (four new deaths; <1 new death per 100 000; -20%).

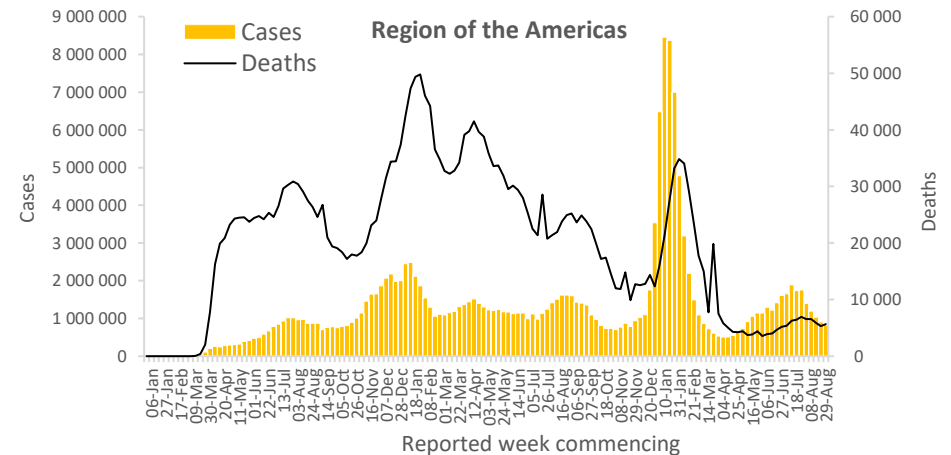


Updates from the [African Region](#)

Region of the Americas

The Region of the Americas reported over 821 000 new cases, a 9% decrease as compared to the previous week. Four of 56 (7%) countries for which data are available reported increases in the number of new cases of 20% or greater, with the greatest proportional increases observed in Sint Eustatius (15 vs eight new cases; +88%), United States Virgin Islands (264 vs 181 new cases; +46%) and Mexico (22 111 vs 17 325 new cases; +28%). The highest numbers of new cases were reported from the United States of America (586 509 new cases; 177.2 new cases per 100 000; +2%), Brazil (87 236 new cases; 41.0 new cases per 100 000; -17%) and Chile (40 080 new cases; 209.7 new cases per 100 000; -27%).

The number of new weekly deaths reported in the Region increased by 6% as compared to the previous week, with over 5600 deaths reported. The highest numbers of new deaths were reported from the United States of America (3558 new deaths; 1.1 new deaths per 100 000; +26%), Brazil (865 new deaths; <1 new death per 100 000; -17%) and Canada (288 new deaths; <1 new death per 100 000; -1%).

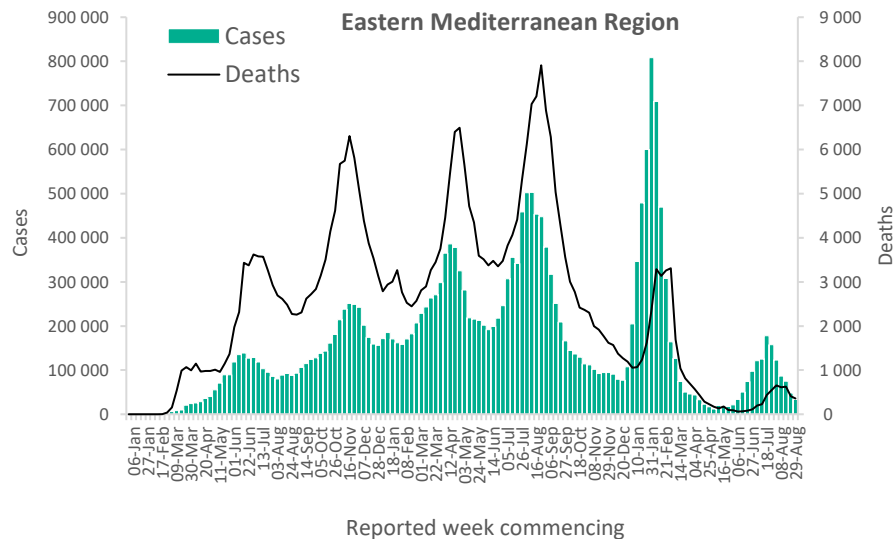


Updates from the [Region of the Americas](#)

Eastern Mediterranean Region

The Eastern Mediterranean Region reported over 33 000 new cases, a 29% decrease as compared to the previous week. No countries in the Region reported an increase in the number of new cases of 20% or greater compared to the previous week. The highest numbers of new cases were reported from the Islamic Republic of Iran (11 351 new cases; 13.5 new cases per 100 000; -27%), Jordan (3946 new cases; 38.7 new cases per 100 000; -18%) and Qatar (3944 new cases; 136.9 new cases per 100 000; +2%).

The number of new weekly deaths decreased in the Region by 12% as compared to the previous week, with over 350 new deaths reported. The highest numbers of new deaths were reported from the Islamic Republic of Iran (282 new deaths; <1 new death per 100 000; +1%), Lebanon (17 new deaths; <1 new death per 100 000; -15%), and Pakistan (17 new deaths; <1 new death per 100 000; -19%).

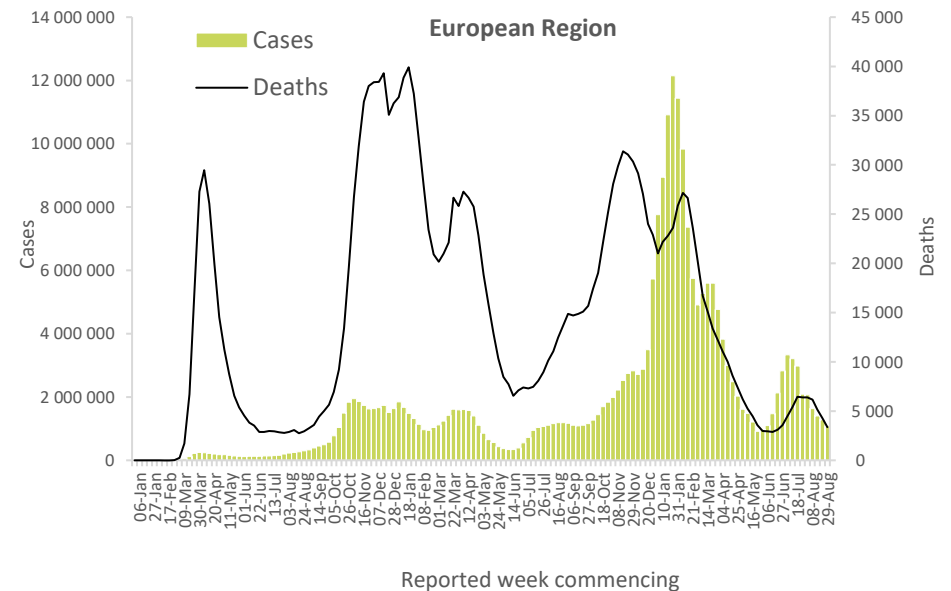


Updates from the [Eastern Mediterranean Region](#)

European Region

The European Region reported just under 1.1 million new cases, a 15% decrease as compared to the previous week. Two (3%) countries reported increases in new cases of 20% or greater, with the highest proportional increases observed in Gibraltar (20 vs 15 new cases; +33%) and Ukraine (11 437 vs 9113 new cases; +26%). The highest numbers of new cases were reported from the Russian Federation (323 500 new cases; 221.7 new cases per 100 000; +12%), Germany (183 715 new cases; 220.9 new cases per 100 000; -19%) and Italy (136 211 new cases; 228.4 new cases per 100 000; -14%).

Over 3300 new weekly deaths were reported in the Region, a 22% decrease as compared to the previous week. The highest numbers of new deaths were reported from the Russian Federation (628 new deaths; <1 new death per 100 000; +20%), Italy (496 new deaths; <1 new death per 100 000; -23%) and Spain (350 new deaths; <1 new death per 100 000; +7%).

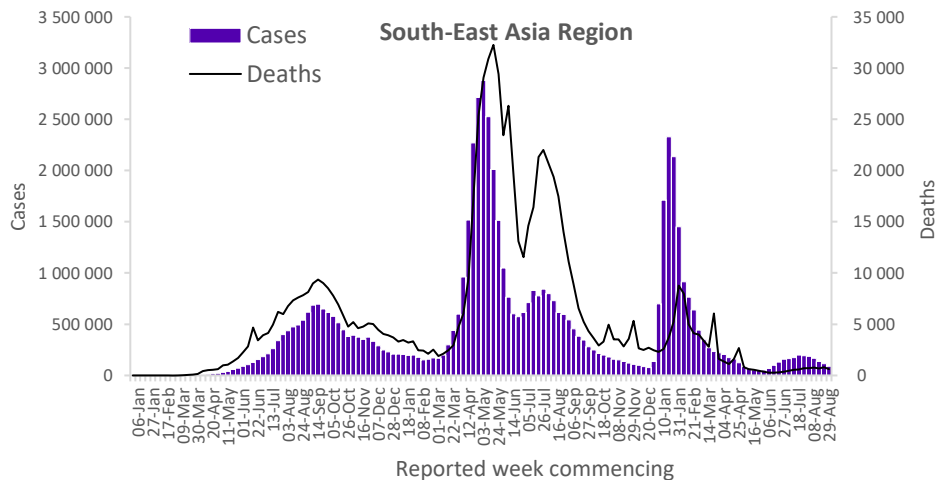


Updates from the [European Region](#)

South-East Asia Region

The South-East Asia Region reported over 90 000 new cases, a 22% decrease as compared to the previous week. One of the 10 countries (10%) in the Region for which data are available showed an increase in the number of new cases of 20% or greater: Myanmar (597 vs 308 new cases; +94%). The highest numbers of new cases were reported from India (48 403 new cases; 3.5 new cases per 100 000; -30%), Indonesia (26 238 new cases; 9.6 new cases per 100 000; -15%) and Thailand (12 130 new cases; 17.4 new cases per 100 000; -1%).

The Region reported just over 600 deaths, a 24% decrease compared to the previous week. The highest numbers of new deaths were reported from India (237 new deaths; <1 new death per 100 000; -44%), Thailand (178 new deaths; <1 new death per 100 000; -9%) and Indonesia (147 new deaths; <1 new death per 100 000; +20%).

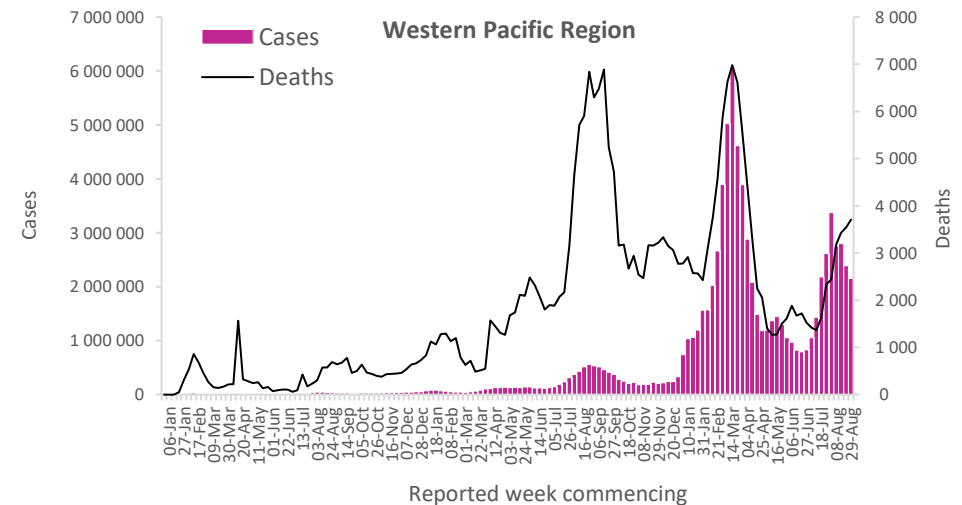


Updates from the [South-East Asia Region](#)

Western Pacific Region

The Western Pacific Region reported just over 2.1 million new cases, a 10% decrease compared to the previous week. However, three (9%) countries reported increases in new cases of 20% or greater, with some of the largest proportional increases observed in Vanuatu (83 vs 10 new cases; +730%) and Micronesia (Federated States of) (1486 vs 182 new cases; +716%). The highest numbers of new cases were reported from Japan (1 164 787 new cases; 921.0 new cases per 100 000; -7%), the Republic of Korea (585 374 new cases; 1141.8 new cases per 100 000; -21%) and China (238 044 new cases; 16.2 new cases per 100 000; +22%).

The Region reported a 5% increase in new weekly deaths compared to the previous week, with over 3700 deaths reported. The highest numbers of new deaths were reported from Japan (2059 new deaths; 1.6 new deaths per 100 000; +3%), the Republic of Korea (524 new deaths; 1.0 new deaths per 100 000; similar to the previous week) and Australia (366 new deaths; 1.4 new deaths per 100 000; -13%).



Updates from the [Western Pacific Region](#)

Annex 1. Data, table, and figure notes

Data presented are based on official laboratory-confirmed COVID-19 cases and deaths reported to WHO by country/territories/areas, largely based upon WHO [case definitions](#) and [surveillance guidance](#). While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change, and caution must be taken when interpreting these data as several factors influence the counts presented, with variable underestimation of true case and death incidences, and variable delays to reflecting these data at the global level. Case detection, inclusion criteria, testing strategies, reporting practices, and data cut-off and lag times differ between countries/territories/areas. A small number of countries/territories/areas report combined probable and laboratory-confirmed cases. Differences are to be expected between information products published by WHO, national public health authorities, and other sources.

A record of historic data adjustment made is available upon request by emailing epi-data-support@who.int. Please specify the countries of interest, time period, and purpose of the request/intended usage. Prior situation reports will not be edited; see covid19.who.int for the most up-to-date data. COVID-19 confirmed cases and deaths reported in the last seven days by countries, territories, and areas, and WHO Region (reported in previous issues) are now available at: <https://covid19.who.int/table>.

‘Countries’ may refer to countries, territories, areas or other jurisdictions of similar status. The designations employed, and the presentation of these materials do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. Countries, territories, and areas are arranged under the administering WHO region. The mention of specific companies or of certain manufacturers’ products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions except, the names of proprietary products are distinguished by initial capital letters.

^[1] All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999). In the map, the number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes.

^[2] A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).

Updates on the COVID-19 outbreak in the Democratic People’s Republic of Korea is not included in this report as the number of laboratory-confirmed COVID-19 cases is not reported.

Annex 2. SARS-CoV-2 variants assessment and classification

WHO, in collaboration with national authorities, institutions and researchers, routinely assesses if variants of SARS-CoV-2 alter transmission or disease characteristics, or impact the effectiveness of vaccines, therapeutics, diagnostics or public health and social measures (PHSM) applied to control disease spread. Potential variants of concern (VOCs), variants of interest (VOIs) or variants under monitoring (VUMs) are regularly assessed based on the risk posed to global public health.

The classifications of variants will be revised as needed to reflect the continuous evolution of circulating variants and their changing epidemiology. Criteria for variant classification, and the lists of currently circulating and previously circulating VOCs, VOIs and VUMs, are available on the [WHO Tracking SARS-CoV-2 variants website](#). National authorities may choose to designate other variants and are strongly encouraged to investigate and report newly emerging variants and their impact.