

Unofficial Translation

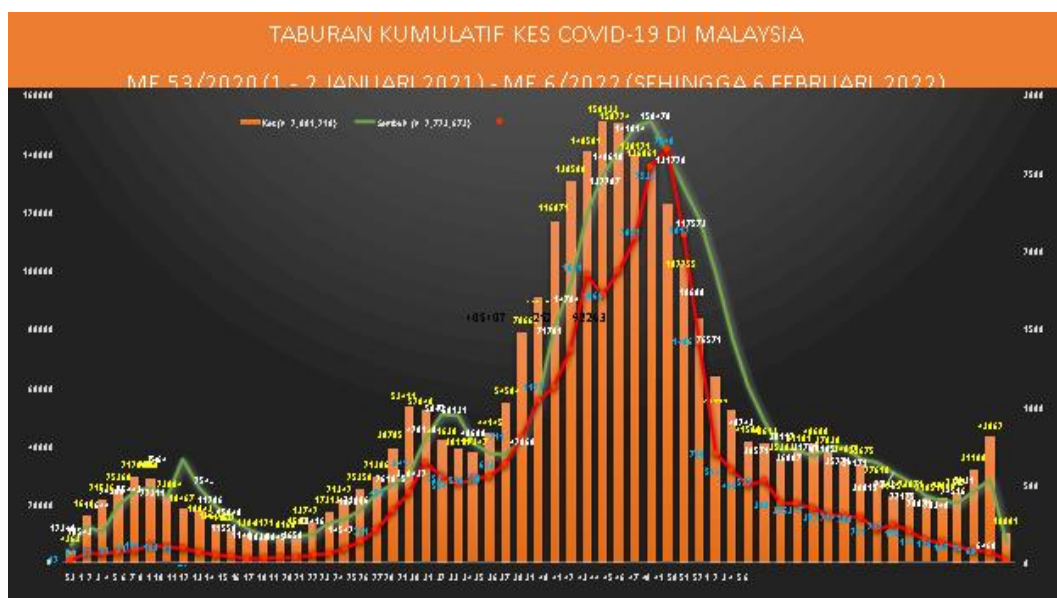
MEDIA STATEMENT

MINISTRY OF HEALTH

The Ministry of Health Malaysia (MOH) has previously informed that the emergence of the Omicron variant will lead to an increase in daily cases of COVID-19 in the country. Starting Sunday, February 6th, 2022, Malaysia will again record several positive cases exceeding 10,000 thousand cases.

Cases:

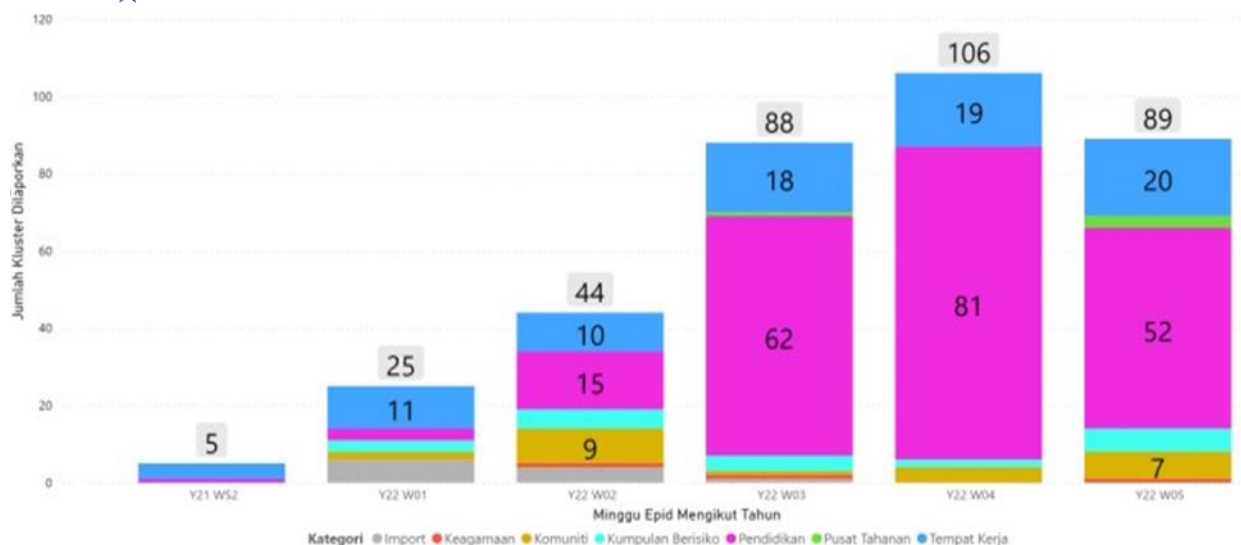
- On 6 Feb 2022, Malaysia reported 10,089 new COVID cases- 19, making the total number of 2,914,220 COVID-19 cases since the onset of this pandemic. **The last time our country reported 5 figure cases was on October 2, 2021, which was four months ago.**
- There was a significant increase in new cases daily in February this year. A total of 5,566 new COVID-19 cases were reported as of Feb. 1; 5,736 cases as of 2 Feb 2022; 5,720 cases as of Feb. 3; 7,234 cases as of Feb. 4; 9,117 cases on Feb 5 and 10,089 cases on Feb 6.
- Today, the number of COVID-19 positive cases reported is as much as **11,034 cases**.
- This increase is not unexpected. This situation is caused by the transmission of Omicron variants that are more easily spread. Increased cases are also witnessed in other countries around the world.
- The total number of cases in Epid Week 4 (23 - 29 Jan 2022) was 31,980 cases; while in Epid Week 5 (30 Jan - 5 Feb 2022) there were 43,062 cases - an increase of 34.7%.



- Most cases are also **asymptomatic or mildly symptomatic**, in clinical **categories 1 and 2**.
- Of the total cases in Epid Week 5, a total of **42,727 (99.2%) were categories 1 & 2**; and **only 335 (0.8%) were categories 3 to 5**.
- However, as the total number of cases increased, the number of cases by category also increased; namely an increase of 35% for category 1 & 2 cases in Epid Week 5 compared to Epid Week 4, and a 17% increase for category 3 - 5 cases.
- At Week Epid 5, the number of deaths due to COVID-19 was 68 cases, a decrease of 8.1% compared to Week Epid 4. While the number of ICU cases was 91 cases, a decrease of 17% over the previous week.

CLUSTER

- At Epid Week 5, there were 89 new COVID-19 clusters identified with 353 active clusters. Of these 89 new clusters:
 - o 52 (58.4%) education clusters;
 - o 20 (22.5%) workplace clusters;
 - o 7 (7.9%) community clusters;
 - o 6 (6.7%) clusters among high-risk groups;
 - o 3 (3.4%) detention center clusters; and
 - o 1 (1.1%) religious cluster.
- There **was a decrease in the number of clusters reported in Epid Week 5 of 16%** compared to 106 clusters reported in the previous week (Epid Week 4 of 2022).
- The **cluster categories** that show an increase in Epid Week 5 of 2022 are:
 - o Workplace Clusters
 - 5.3% increase from Epid Week 4 to 20 clusters in Epid Week 5
 - o Community Clusters
 - 75% increase from 4 clusters in Epid Week 4 to 7 clusters in Week 5.
 - o Risk Group Clusters
 - 200% increase from 2 clusters in Epid Week 4 to 6 clusters in Epid Week 5.
 - o Detention Center Cluster
 - Three (3) clusters were reported in Week Epid 5 compared to no clusters in Week Epid 4.
 - o Religious Activity Clusters
 - One (1) cluster was reported in Week Epid 5 compared to no cluster in Week Epid 4.
- Meanwhile, the Education Cluster showed a decrease of 35.8% in Epid Week 5, from 81 clusters in Epid Week 4 to 52 clusters in Epid Week 5.



Graph 2: Cluster Trends reported following the Epidemiology Week and 2022 category to the fifth Epidemiology Week (ME 5/2022)

USE OF BEDS IN HOSPITALS

- A **total of 3,233 beds were used** out of 9,776 provided, with a **utilization rate of 33%**. This is an increase of 4% over the previous week.
- While the **ICU bed utilization rate was 14%** or 116 out of 850 beds provided, a **decrease of 1%**.
- Currently, the utilization rate of COVID-19 beds in health facilities remains at a **NON-BURDENING** level.
- As of 6 February 2022, MOH is ready with:
 - o 120 Hospital COVID-19
 - 9 Full COVID1-9 Hospital
 - 111 Hybrid COVID-19 HOSPITAL
 - o 43 PKRC COVID-19 Low-Risk Quarantine & Treatment Centers with a capacity of 10,810 beds.
- To ensure a high level of preparedness in the face of this latest wave, MOH has also reactivated the National COVID-19 Rapid Response Task Force (RRTF).
 - o RRTF is a special committee that will implement rapid preliminary action in controlling transmission in a state or area including adding beds and modifying non-COVID-19 beds, building field hospitals, and outsourcing patients to private hospitals.
 - o This RRTF will be co-chaired by the **Deputy Director-General of Health (Public Health)** and the **Deputy Director-General of Health (Medical)**, who will report directly to the Honorable Minister of Health.

COMPARISON WITH OTHER COUNTRIES

Singapore reported over 13,208 new cases of COVID-19 infection on 4 Feb 2022, 3 times more than the previous day. On February 5, **Korea** reported 38,670 daily COVID-19 cases, **Indonesia** 33,729 cases, **Thailand** 10,879 cases, **the Philippines** 7,469 cases, **Australia** 22,985 cases, and **Japan** 102,275 cases.

VACCINATION

- The Ministry of Health Malaysia (MOH) would like to inform that until 6 February 2022, a total of:
 - **25,720,902 or 78.8%** of the Malaysian population **aged 12 years and above** have received a **complete dose of COVID-19 vaccine**;
 - **33,599 or 1%** of children **aged 5 to under 12 years** have received **the first dose of COVID-19 vaccine**; and
 - **12,361,663 or 52.8%** of the Malaysian population **aged 18 years and above** have received a **booster dose of COVID-19 vaccine**.
- Booster doses **protect against COVID infection-19 especially severe complications**. Daily data showed **individuals who had not been vaccinated were 9 times more likely to be infected** and **62 times more likely to die from COVID-19** than individuals who had completed the vaccine or had taken a booster dose (**Figure 1**).
- MOH strongly encourages Malaysians to get a booster dose as soon as possible to protect themselves, their families, and the country, especially with the sharp increase in cases related to the Omicron variant.



Figure 1: Infection and mortality rates per 100,000 population by vaccination status.

- The risk of severe infections is also higher among the elderly. Of the 32,034 deaths as of Feb 6, 2022, a total of 18,362 or 57.32% involved senior citizens. To date, there are **approximately 32% or 1 million seniors who have not yet taken a booster dose.**
- Accordingly, the MOH requests that individuals aged 60 years and above immediately obtain a booster dose and can come by walk-in at any Vaccination Center (PPV) nearby.
- MOH would like to inform once again, all residents aged 60 years and above or recipients of a full dose of Sinovac vaccine aged 18 years and above need to take a booster dose injection to maintain complete vaccination status before 1 March 2022.

CLINICAL CARE FOR COVID-19 CASES

The public is advised to:

- a) Undergo COVID-19 test immediately if symptomatic; upload the results either positive or negative to MySejahtera.
- b) Individuals who are positive for COVID-19 **category 1 (no symptoms) and 2A (mild symptoms)**, and **are not at high risk** (60 years and under and do not have any comorbidities) **DOES NOT NEED TO ATTEND the COVID-19 Assessment Center (CAC).**

a. Patients need to perform daily self-monitoring through the Health Assessment Tool (HAT) in the MySejahtera application. SMS or calls from the Automated Voice Recording (robocall) service will be sent if you do not conduct self-monitoring through MySejahtera;

- c) Individuals who need to attend the nearest CAC for assessment of the severity of the infection will be notified via MySejahtera or contacted by the CAC via SMS or phone call (full list of locations, telephone numbers, and operating hours can be found at [https:// covid- 19.moh.gov .my/hotline](https://covid-19.moh.gov.my/hotline));
- d) Individuals who are positive for COVID-19 **category 2B (moderate symptoms and above)** or who are in the group as below, are required to attend the nearest CAC or hospital for further examination without waiting for a phone call from PKD/CAC:

- a. aged 60 and over,
- b. has comorbidities,
- c. worsening symptoms,
- d. did not take the vaccine or did not complete the vaccine;

e) The isolation period (isolation) for COVID-19 positive individuals who are asymptomatic and have completed vaccination is seven (7) days, while the isolation period for COVID-19 positive individuals, symptomatic and incomplete vaccination or no vaccination is for 10 days.

f) Meanwhile for individuals **identified as close contact to COVID-19 positive cases**, the quarantine period will be as follows:

- a. 5 days for individuals who have received a booster dose;

- b. 7 days for individuals who have received a complete vaccination;
- c. 10 days for individuals who have not been fully vaccinated or have not been vaccinated.

g) For ALL individuals identified as close contact to a positive case (including those who have not been vaccinated):

a. If no symptoms are present, there is no need to attend a CAC and no need to perform a COVID-19 detection test

i. Close contact will be given a digital HSO and only need to undergo quarantine at the residence.

b. If there are symptoms, it is necessary to do a self-test. If positive and in category 2A, continue to be isolated at the place of residence without having to attend the CAC.

i. Test results must be reported in the MySejahtera application.

ii. Perform daily self-monitoring using the Health Assessment Tool (HAT) available in the MySejahtera application.

HEALTH CLINIC PREPARATION FOR THE INCREASE OF COVID-19 CASES:

a) All health clinics are ready to accept increased patient's attendance. As of February 7, 2022, there are **370 CACs in Health Clinics and in the community that is operating to evaluate COVID-19 positive patients.**

b) CAC functions to:

i. Identify patients who meet the criteria for monitoring at home.

ii. Assess and monitor patients progress throughout the isolation period.

iii. Identify and coordinate patients who need to be referred to COVID-19 Quarantine and Treatment Center (PKRC)/ hospital

iv. Carry out evaluation and release (release order) to positive cases that have expired during the isolation period.

c) The District Health Office (PKD) will always identify suitable Health Clinics and public halls to increase the number of CACs to accommodate the increase in COVID-19 cases if there is a need.

d) In addition, MOH would like to call on private health facilities to act as private CACs.

COVID-19 TREATMENT:

- MOH is in the process of developing the COVID-19 Clinical Care Pathway to initiate the latest antiviral drugs that will be given to high-risk COVID-19 patients at an earlier stage when they have mild symptoms to prevent the infection from getting worse.

- This antiviral treatment will cover patients at the Health Clinic, COVID-19 Assessment Center, PKRC, and also hospitals for patients admitted to the ward. Treatment will begin once a supply of antiviral drugs is available.

CONCLUSION AND RECOMMENDATION:

The increase in COVID-19 cases is currently not affecting the national health system, although the country is now facing the threat of Omicron variant that are more easily spread. This is largely contributed by the achievement of complete vaccination coverage for the high population.

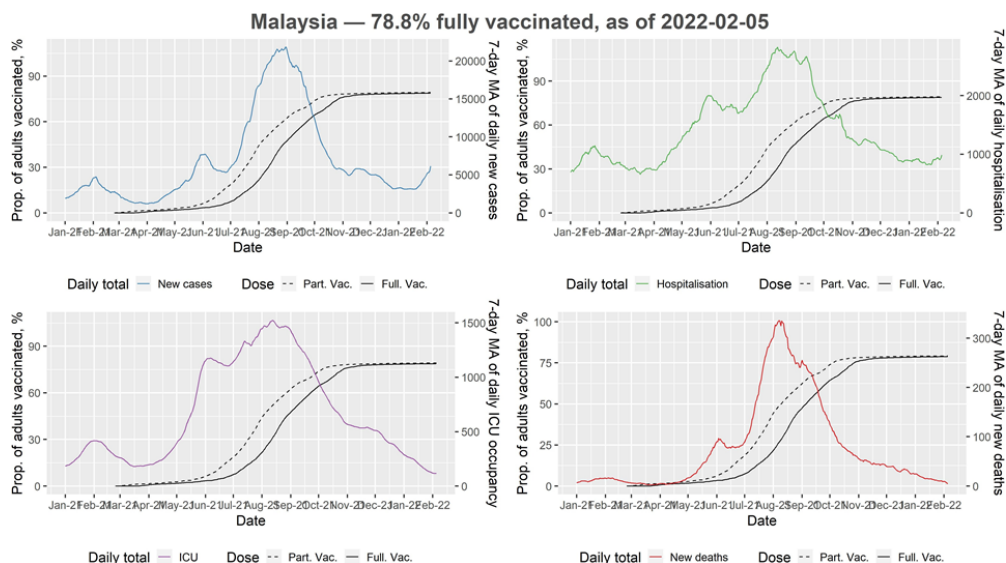


Figure: Number of confirmed COVID-19 cases, daily hospitalization, ICU occupancy, and new deaths per day against the proportion of adults vaccinated.

Therefore, the MOH would like to recommend to any eligible population, especially the elderly and individuals with comorbidities, to obtain a booster dose. For those who have not yet received a complete vaccination, you can go to the nearest PPV to receive the primary dose vaccine. To parents who have not yet registered their children between the ages of 5 and under 12 to receive the children's vaccine, we encourage them to immediately register them to receive the COVID-19 vaccine.

Meanwhile, the Government also welcomes and encourages employers to continue the practice of working from home (work from home) or implement a rotation system of attendance to the office in our efforts to create a safe environment in the workplace.

In addition, the MOH also recommends that the public activate MySejahtera Trace in the MySejahtera application to track close contacts. Premises owners are also asked to improve entry controls customers by checking the risk and vaccination status in the customer's MySejahtera application.

We have managed to stabilize this COVID-19 pandemic situation after the Delta wave struck and Insha'Allah (God Willing) , we can also fight the Omicron variant. Do continue to follow the SOP, practice 3W, avoid 3S, and practice TRIIS (Test, Report, Isolate, Inform, Seek/Get treatment).

Protect Yourself, Protect All.

KHAIRY JAMALUDDIN
Minister of Health Malaysia
7 February 2022

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