Press Release

The updates on COVID-19 in Korea as of 22 April

Date 2020-04-22 20:00 Update 2020-04-22 20:00 Division Division of Risk assessment and International cooperati Tel 043-719-7556 408

Updates on COVID-19 in Republic of Korea

22 April, 2020

○As of 0:00, 22 April 2020, a total of 10,694 cases (including 1,017 imported cases) have been confirmed, of which 8,277 cases (77.4%) have been discharged from isolation. Newly confirmed cases are 11 in total.

[Table 1. Total confirmed and suspected cases]

Period (since 3 Jan)	Total	Tested positive				Being tested	Tested negative
		Confirmed	Discharged from isolation	Under isolation	Deceased		
As of 0:00 21 April (Tues)	571,014	10,683	8,213	2,233	237	12,721	547,610
As of 0:00 22 April (Wed)	577,959	10,694	8,277	2,179	238	12,121	555,144
Difference	(+)6,945	(+)11	(+)64	(-)54	(+)1	(-)600	(+)7,534

[Table 2. Imported cases in Korea (as of 0:00, 22 April 2020)]

	Total	Region/Country						Where confirmed		Nationality	
		China	Asia ex-China	Europe	Americas	Africa	Australia	Point of Entry	Community	Korean	Other
New	6	0	2	2	2	0	0	2	4	6	0
Total	1,017	16 (1.6%)	111 (10.9%)	442 (43.5%)	444 (43.7%)	3 (0.3%)	1 (0.1%)	423 (41.6%)	594 (58.4%)	932 (91.6%)	85 (8.4%)

** Figures may change based on findings from ongoing local epidemiological investigation efforts.*

○Epidemiological links have been found for 80.9% of the total cases; 9.6% are either under investigation or sporadic cases. More details on the epidemiological links within each province or city are shown in Table 3.

○From investigation of contacts linked to Busan Medical Center in Yeonje-gu, Busan City, 1 additional case (a staff of Dongin High School in Dongnae-gu, Busan City) was confirmed. In total, 3 cases have been confirmed since 18 April.

○From Yecheon-gun, Gyeongbuk Province, 1 additional case was confirmed during contact investigation. In total, 38 cases (including 3 in Andong and 1 in Mungyeong) have been confirmed since 9 April.

○KCDC conducted analysis of 25 COVID-19 patients to find out if COVID-19 virus can be detected even after patient recovery and antibody production.
- In all 25 patients, neutralizing antibodies were found.
- In 12 (48%) patients, even though the neutralizing antibodies were formed, their respiratory samples tested positive for COVID-19 from PCR testing. Based on this finding, at the moment, KCDC presumes that in some patients the viruses are not completely removed and some still remains in patient's body even after neutralizing antibodies are produced.

○KCDC asked everyone to actively participate in and follow the current Social Distancing campaign/policy effective until 5 May.
- KCDC recommended that any facility that makes it easy for people to come in close contact with other people in an enclosed space should refrain from operating as much as possible. Such facilities that have to remain in operation should comply with infection prevention/control guidelines including checking for fever or respiratory symptoms and keeping a log of all users, requiring everyone to wear facemasks and keep distance from each other, and disinfecting and ventilating the space.
- KCDC stressed that reducing contact with other people as much as possible and maintaining personal hygiene are highly important to preventing COVID-19.
- People who cannot avoid visiting an enclosed/crowded place should keep at least 2 meters of distance from others, wear a facemask, and maintain hand hygiene by washing hands or using hand sanitizers.
- KCDC also stressed that people who have suspected COVID-19 symptoms should not go to work or leave home and should go to a screening center to be tested.

○KCDC stated that even during COVID-19 outbreak, children and the elderly should receive immunization under safe environment with infection prevention measures in place.

- It is important to prepare for potential outbreaks of other infectious diseases such as chickenpox, mumps, and measles due to school reopening, increase in outdoor activities, and/or increase in international exchange once the COVID-19 outbreak ends.
- Also, pneumococcal infection and its complications can be fatal for the elderly.
- Therefore, it is important to make appointments in advance to receive vaccination on recommended immunization schedule.

[Table 3: Regional distribution and epidemiological links of the confirmed cases]

Region	Confirmed cases									Other major clusters
	Total	Imported cases	Clusters					Other*	New cases	
			Sub-total	Shin-cheonji	Other clusters	Contacts of confirmed cases	Imported cases			
Seoul	628	247	357	8	262	18	69	24	2	Guro-gu call center (98), Dong-an Church-PC Cafe (20), Manmin Central Church (41), etc.
Busan	134	21	84	12	53	18	1	29	2	Onchun Church (39), Suyeong-gu Kindergarten (5), etc.
Daegu	6,836	17	6,098	4,510	661	923	4	721	1	Second Mi-Ju Hospital (196), Hansarang Convalescent Hospital (127), Daesil Convalescent Hospital (100), Fatima Hospital (37), etc.
Incheon	92	41	47	2	34	5	6	4	0	Guro-gu call center (20), etc.
Gwangju	30	14	16	9	0	1	6	0	0	
Daejeon	40	10	21	2	11	8	0	9	1	Korea Forest Engineer Institute (3), etc.
Ulsan	43	12	24	16	1	4	3	7	0	
Sejong	46	3	42	1	38	3	0	1	0	Ministry of Oceans and Fisheries (30), gym facilities (8)
Gyeonggi	658	152	465	29	319	55	62	41	0	Grace River Church in Seongnam (72), Guro-gu call center-Bucheon SaengMyeongSu Church (48), Uijeongbu St. Mary's Hospital (50), etc.
Gangwon	53	14	32	17	15	0	0	7	0	Apartments in Wonju City (3), Uijeongbu St. Mary's Hospital (10), etc.
Chung-buk	45	5	32	6	18	6	2	8	0	Goesan-gun Jangyeon-myeon (11)
Chung-nam	141	11	120	0	118	1	1	10	0	Gym facilities in Cheonan (103), research center in Seosan (9), etc.
Jeonbuk	17	8	4	1	3	0	0	5	0	
Jeonnam	15	7	7	1	3	2	1	1	0	Manmin Central Church (2)
Gyeong-buk	1,363	10	1,218	566	460	192	0	135	2	Cheongdo Daenam Hospital (120), Bonghwa Pureun Nursing Home (68), pilgrimage to Israel (49), Gyeongsan Seo Convalescent Hospital (66), Yecheon-gun (38), etc.
Gyeong-nam	117	14	85	32	46	6	1	18	1	Geochang Church (10), Geochang Woongyang-myeon (8), Wings Tower (10), etc.
Jeju	13	8	1	0	0	0	1	4	0	
Airport	423	423	0	0	0	0	0	0	2	
Total	10,694	1,017 (9.5)	8,653 (80.9)	5,212 (48.7)	2,042 (19.1)	1,242 (11.6)	157 (1.5)	1,024 (9.6)	11	

* Not classified into a cluster or under investigation
※ The interim classification is based on the reporting location, which may change depending on further epidemiological investigation.

[Figure 1: Distribution of confirmed cases based on location reported]

* Refer to attachment

[Table 4: Age distribution of severe cases]

Age group	Total	Severe	(%)	Very severe	(%)
Total	52	19	(100.0)	33	(100.0)
80 or above	9	5	(26.3)	4	(12.1)
70-79	22	5	(26.3)	17	(51.5)
60-69	14	6	(31.6)	8	(24.2)
50-59	3	1	(5.3)	2	(6.1)
40-49	2	0	(0.0)	2	(6.1)
30-39	0	0	(0.0)	0	(0.0)
20-29	2	2	(10.5)	0	(0.0)
10-19	0	0	(0.0)	0	(0.0)
0-9	0	0	(0.0)	0	(0.0)

[Table 5: Distribution of cases that retested positive]

Age group	Total	(%)
Total	207	(100.0)
80 or above	19	(9.2)
70-79	9	(4.3)
60-69	22	(10.6)
50-59	35	(16.9)
40-49	28	(13.5)
30-39	33	(15.9)
20-29	48	(23.2)
10-19	8	(3.9)
0-9	5	(2.4)

[Figure 2: New cases (for last 2 weeks) by chain of transmission]

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