COVID-19 EPIDEMIC AND VACCINE SITUATION IN VIET NAM

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CONTENT

I. CURRENT SITUATION OF COVID-19 IN VIET NAM

VIETNAM RECEIVES 4 STAGES OF COVID-19

❖ **State 1 (22/1/ 2020 – 22/6/2020**

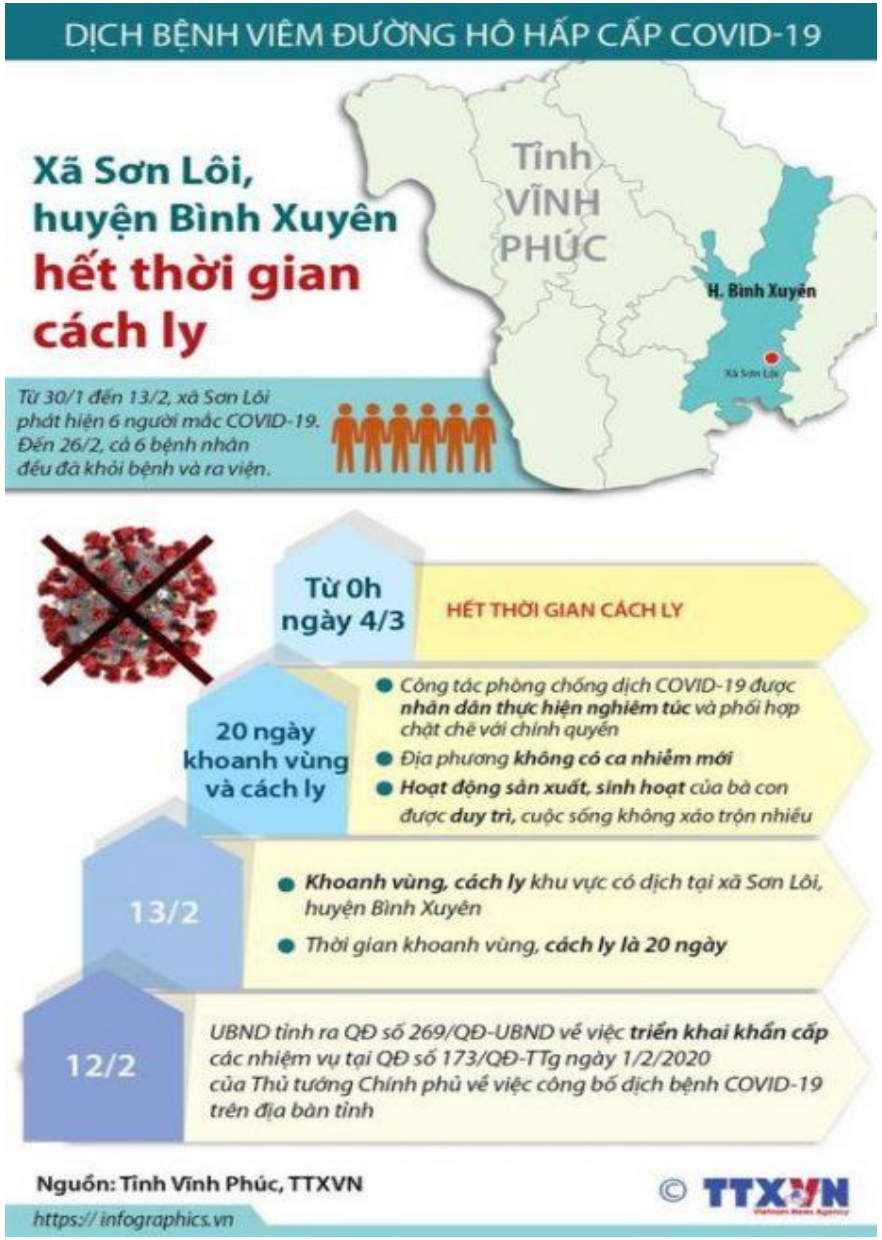
- 415 cases, no deaths, in Vinh Phuc city

❖ **State 2 (23/7/2020- 27/1/2021)**

- 1,136 cases, 35 deaths, cases are concentrated in Da Nang City.

❖ **Stage 3 (28/1/2021-26/4/2021)**

- 1,301 cases, no deaths.
- The case is concentrated in Hai Duong (pointed case is a Vietnamese female worker (+) in Japan on January 27).



I.CURRENT SITUATION OF COVID-19 IN VIET NAM

❖ **<u>Stage 4</u> (from April 27, 2021 to present)**

- 1,633,603 cases in 63/63 provinces and cities; including 30,731 deaths in 51 provinces and cities. Patients are mainly 18-49 years old (61.1%). Most of the deaths were over 50 years old (84%).
- Multiple sources of infection and have penetrated deeply into the community.
- Occurs in industrial zones, factories, high population density areas... causing the number of cases to increase rapidly.

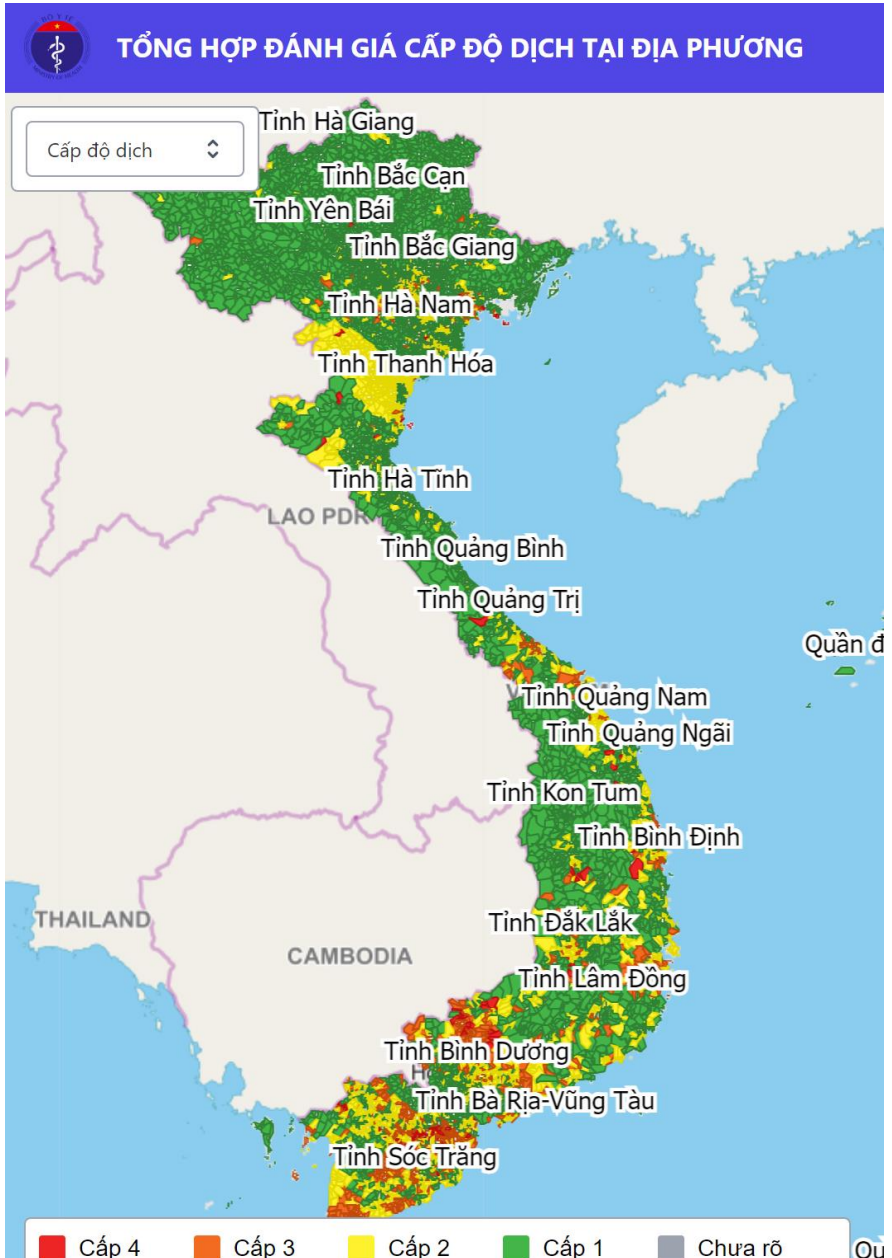
❖Statistics on the situation of COVID-19 epidemic until January 31, 2022

❖Total cases: 2,275,727 infections

❖2,019,633 patients were declared cured.

❖Number of deaths: 37,777

❖ **Number of cases of infection with the Omicron variant: 185 cases (31/1/2022) .**



II. SOLUTIONS AND RESULTS OF COVID-19 PREVENTION

1.1. Leadership and direction

- The Government direct the implementation of the "dual goal" of developing the economy, ensuring social security and being ready for epidemic prevention and control.
- National Steering Committee;
- From October 11, 2021 to present: implementing "safe adaptation, flexibility, effective control of the COVID-19 epidemic", 5 K principles + vaccines + drugs + information technology + people's awareness .

- **2.2. Professional and technical activities**

(1) Tracing and isolating: (2) Testing: (3) Treatment:

(4) Vaccination: (5) Research, application and technology transfer

In addition, other 6 more solutions

III. VACCINE STRATEGY

- The goal of the Vaccine Strategy is **to vaccinate the population free of charge** every year to achieve herd immunity throughout the country.
- The vaccine strategy focuses on main contents: import, technology transfer, research for domestic production and development of vaccines.
- Vietnam aims to receive 150 million doses of Covid-19 vaccine in 2021 to immunize about 70% of the population to achieve herd immunity.

III. VACCINE STRATEGY

3.1. Licensing of vaccines: 9 vaccines against COVID-19 have been licensed: AstraZeneca's COVID-19 vaccine. Sputnik V vaccine, Vero Cell Vaccine , Pfizer/BioNtech's Comirnaty vaccine, Moderna Vaccine, Janssen Vaccine, Hayat-Vax Vaccine , Abdala Vaccine Vaccine

3.2. Funding sources to buy vaccines - Vaccine Fund:

- The total resources for purchasing COVID-19 vaccines have been approved about **VND 26,800 billion (apr. 1.2 billion US$)**
- Up to now, the Government and localities have arranged about 18,100 billion VND to buy vaccines.

3.3. Vaccine Fund: Total mobilized VND 8,809.55 billion

Spending from the Fund is 7,672.2 billion VND, of which: spending on vaccines, 6,667.6 billion VND;

Spending to support research and testing of vaccines 8.8 billion VND).

The path to finding a vaccine:

1.THROUGH THE COVAX MECHANISM.

2.VACCINE DIPLOMACY

3.Research, technology transfer, and clinical trials of vaccines in the country

2. Vaccine diplomacy: An important strategy to help Vietnam achieve herd immunity.

- In the first half of 2021, Vietnam is still one of the countries with low vaccination rates due to good disease control, so it is not prioritized for vaccine distribution.
- However, when the 4th outbreak spread and caused great consequences to all aspects of social life, Vietnam did not hesitate to speak frankly about the vaccine issue with friends and partners, and are heard by the world.

3.Research, technology transfer, and clinical trials of vaccines

2 types of vaccines are researched and developed by Vietnam

- **Vaccine Nano Covax:**
- **Vaccine COVIVAC:**

Vaccine COVID-19 Sputnik V- processing and packaging in Vietnam

2 vaccines are technology transferred from abroad

- Vaccine VBC-COV19-154: developing a vaccine based on mRNA technology.
- Recombinant vaccines SARS-CoV-2 Spike Protein: Japanese company Shionogi has signed an agreement to transfer technology to produce COVID-19 vaccines with two Vietnamese companies

4. How to receive and store vaccines?

Cold chain system outside the Ministry of Health

- The MOH has granted certification for 3 cold storages down to -86°C, 51 cold storages from 2-8°C of the VNVC Immunization System (belonging to Vietnam Vaccine Joint Stock Company
- VNVC will use 6 specialized refrigerated trucks to transport vaccines from the airport to general warehouses and to transport vaccines between centers

Cold chain system of the MOH

- Cold chain system equipped at more than 11,000 commune/ward medical stations, over 700 districts in 63 provinces
- In the past 3 years, the Expanded Immunization Project has provided 3 cold rooms to store vaccines, 2 refrigerated trucks to transport vaccines, 420 refrigerators to store vaccines, 120 freezers and 16,000 cold boxes
- On 2020 and 2021 approx.1000 refrigerators funded by the Global Alliance for Vaccines (GAVI)
- Vietnam has relatively enough vaccines as well as provided with a cold chain system to receive, store and distribute to routes for vaccination

5. How to access vaccines for the people?

Covid-19 vaccination campaign

- Thís is the largest scale in the history of vaccination in Vietnam
- The campaign has been closely coordinated by the Ministries of Health, National Defense, Public Security, Information and Communication and Transport.
- Vaccine storage and transportation system under the management of the Ministry of Health and the Ministry of National Defense,
- The campaign is to apply information technology in vaccination management
- **Media campaign 'Vaccination - Keep the faith‘**

6. VACCINATION RESULTS The total number of vaccine doses administered was >180 mill. doses, of which the 1st dose was >79 million doses, and the 2nd dose was 74 million doses, the 3rd dose (additional/booster injection and 3 basic dose) is 28 million doses.

- The group of aged 18 and over had the rate of vaccination against COVID-19 with doses 1, 2, and 3, respectively, of nearly 100%, 95.7% and 22.3%.
- Children from 12 to 17 years old received the first dose at 95.2% and the second injection rate was 86%.
- With the goal of 70% of the population over 18 years of age receiving 2 injections, Vietnam has completed it.

CONCLUSION

- Assessment of the epidemic situation in Vietnam: has been basically controlled nationwide, but the epidemic is still complicated, with the number of new infections.
- The epidemic prevention and control work was implemented promptly and effectively, especially when the epidemic prevention and control strategy was changed to "Safe adaptation, flexibility, effective control of the COVID-19 epidemic", achieving positive results.
- Diplomatic strategy has been effective, vaccine research has made significant progress
- The vaccination strategy is unanimously adopted by the people
- The group of aged 18 and over had the rate of vaccination against COVID-19 with doses 1, 2, and 3, respectively, of nearly 100%, 95.7% and 22.3%. Children from 12 to 17 years old received the first dose at 95.2% and the second injection rate was 86%.
- Socializing vaccines, drugs to treat COVID-19 to respond to Omicron: the Government has proposed more effective solutions for epidemic prevention and control in the near future, including the socialization of vaccines and therapeutic drugs to treat COVID-19.

Points of gap and limitations

- Forecasting is sometimes not close to reality.
- The private health system has not been mobilized to participate in the fight against the epidemic.
- Regarding equipment for COVID-19 epidemic prevention and control,, vehicles for monitoring and investigation such as cars and motorbikes were reported to be lacking the most, accounting for the majority of 77.2%.
- Most of the medical equipment, drugs, biological products, vaccines etc. have to be imported, leading to untimely, passive and high costs.
- The number of preventive health workers is short in both quantity and quality.
- Communication work is not well prepared, timely information is not available, there are times of passiveness and confusion, especially during the early period of the epidemic
- The application of information technology has revealed many limitations and is not effective


Thank
you!