Figure 1. Selected Economies: Daily Confirmed Cases

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Figure 1. Selected Economies: Daily Confirmed Cases
(Cont’d)

Sources: Haver Analytics, sourced from John Hopkins University, and AMRO staff calculations.
Figure 2. Selected Economies: Daily Confirmed Deaths
Figure 2. Selected Economies: Daily Confirmed Deaths (Cont’d)

Sources: Haver Analytics, sourced from John Hopkins University; and AMRO staff calculations.
Note: As new data is recorded on business days only, Monday’s data includes weekend data. For ease of comparison, the data here shows the 3-day Saturday-Monday average, which can thus explain non-integer values.
Figure 3. ASEAN+3: Confirmed Cases
(Number of business days after 100th confirmed case; cases in log scale)

Sources: Haver Analytics, sourced from John Hopkins University; and AMRO staff calculations.

Figure 4. ASEAN+3: Confirmed Deaths
(Number of business days after 5th confirmed case; cases in log scale)

Sources: Haver Analytics, sourced from John Hopkins University; and AMRO staff calculations.
Figure 5. Selected ASEAN+3 Economies: Confirmed Cases

Per million population above 55

Per million population below 55

Sources: Haver Analytics, sourced from John Hopkins University; and AMRO staff calculations.
Figure 6. Selected Economies: Confirmed Cases vs. Confirmed Deaths

![Graph showing confirmed cases vs. confirmed deaths for various countries, with logarithmic scales.]

Sources: Haver Analytics, sourced from John Hopkins University; and AMRO staff calculations.
## Table 1. Comparison of Past Epidemics with the COVID-19

<table>
<thead>
<tr>
<th>Virus</th>
<th>Main countries affected</th>
<th>Outbreak dates</th>
<th>Worldwide cases</th>
<th>Deaths</th>
<th>Fatality (in %)*</th>
<th>Mortality per 100,000**</th>
<th>R₰***</th>
<th>Median [max] incubation period (in days)</th>
<th>Human-to-human transmission</th>
<th>Survival on dry surfaces***</th>
</tr>
</thead>
<tbody>
<tr>
<td>SARS coronavirus</td>
<td>China; Hong Kong</td>
<td>2002/03</td>
<td>8,096</td>
<td>774</td>
<td>9.6</td>
<td>0.03</td>
<td>0.4 - 3.5</td>
<td>4-5 [14]</td>
<td>Symptomatic transmission</td>
<td>2 days</td>
</tr>
<tr>
<td>Avian flu H5N1</td>
<td>Egypt; Indonesia</td>
<td>2003-15</td>
<td>846^</td>
<td>449</td>
<td>53.1</td>
<td>0.15</td>
<td>2.0 - 2.7</td>
<td>2-5 [17]</td>
<td>Unusual</td>
<td>1 day</td>
</tr>
<tr>
<td>Swine flu H1N1</td>
<td>Pandemic</td>
<td>2009</td>
<td>n/a (CDC est.: tens of millions)</td>
<td>18,337**</td>
<td>n/a</td>
<td>4.06**</td>
<td>1.4 - 1.6</td>
<td>2 [7]</td>
<td>Asymp. &amp; symp. transmission</td>
<td>12 hrs</td>
</tr>
<tr>
<td>MERS coronavirus</td>
<td>Saudi Arabia; Korea</td>
<td>since 2012^***</td>
<td>2,494</td>
<td>858</td>
<td>34.4</td>
<td>2.42</td>
<td>2.0 - 5.0</td>
<td>5 [14]</td>
<td>Symp. transmission under close contact</td>
<td>n/a (poor survivability)</td>
</tr>
<tr>
<td>Ebola</td>
<td>Sierra Leone; Guinea; Liberia</td>
<td>2013-16</td>
<td>28,616</td>
<td>11,310</td>
<td>39.5</td>
<td>57.00</td>
<td>1.7 - 2.0</td>
<td>8-10 [21]</td>
<td>Symptomatic transmission</td>
<td>4-11 days</td>
</tr>
<tr>
<td>Zika</td>
<td>Brazil; Colombia</td>
<td>2015/16</td>
<td>730,448^</td>
<td>0^</td>
<td>0.0</td>
<td>0.00</td>
<td>3.0 - 6.6</td>
<td>6 [14]</td>
<td>Asymp. &amp; symp. transmission</td>
<td>8 hrs</td>
</tr>
<tr>
<td>COVID-19**</td>
<td>Pandemic</td>
<td>2019/20</td>
<td>1,013,157</td>
<td>52,983</td>
<td>5.2</td>
<td>-</td>
<td>2.0 - 2.5</td>
<td>est. 5-6 [14]</td>
<td>Asymp. &amp; symp. transmission</td>
<td>2-3 days</td>
</tr>
</tbody>
</table>

Notes:
- * Fatality rate refers to the proportion of people diagnosed with a disease who die from that disease over a certain time period.
- ** Mortality rate here refers to the number of deaths per 100,000 citizens for the globally most affected country (by number of cases) during a certain time period.
- *** R₰ estimates the average number of persons who will catch a disease from one contagious person. Estimated ranges obtained from WHO, NCBI, and CDCs.
- ^ Number of cases refers to all reported cases from 2003 to 2015.
- ** Number of deaths is likely an underrepresentation of the actual number as many cases might have never been tested or recognized as H1N1 related.
- ^^^ Main episodes took place between 2014-15.
- ^ Number of cases refers to the Americas in 2015 and 2016. Number of deaths does not take into account fetal loss or stillbirth.
- ^ As of April 22, 2020.
- +++ Estimated survival of virus on dry surfaces at room temperature. Obtained from WHO, Science Daily, Live Science, CIDRAP.