This epidemiological bulletin aims to provide the situation of key infectious diseases in the WHO South-East Asia region to inform risk assessment and response by countries. The bulletin uses information from publicly available sources and will be published every two weeks. For feedback or suggestions, please write to seoutbreak@who.int.

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**Key events**

### Nipah Virus Disease in India

Disease Outbreak News on Nipah Virus Infection in India was posted at [https://www.who.int/emergencies/disease-outbreak-news/item/2023-DON490](https://www.who.int/emergencies/disease-outbreak-news/item/2023-DON490).

**Situation overview**

- Between 12 and 15 September 2023, the Ministry of Health and Family Welfare, Government of India reported six laboratory-confirmed Nipah virus (NiV) cases including two deaths, in Kozhikode district, Kerala State.
- Since 15 September, no new cases have been detected.
- The source of infection of the first case was unknown; however, other cases were family and hospital contacts of the first cases.
- The four alive cases were discharged from the hospital 1 on 29 September 2023, after testing negative for Nipah virus twice in five days as per the state government protocol.
- As of 29 September, 568 contacts are still in quarantine and their quarantine will end on 5 October 2023.
- This is the sixth outbreak of NiV infection in India since 2001.

**Public health response**

- Multiple central multi-disciplinary teams were mobilized by the Department of Health and Family Welfare, Department of Health Research and the Department of Animal Husbandry to support the State and District administration in containment and mitigation measures. A total of 19 core committees were created and tasked with various response measures. A control room with a call center was activated.
- Active house-to-house surveillance was carried, with a total of 53,708 houses surveyed as of 27 September 2023. All high-risk contacts were tested. Containment zones were declared in nine villages in Kozhikode district. The government restricted major public events in Kozhikode district until 1 October 2023.
- Laboratory testing of suspected cases as well as environmental and animal samples is being conducted. True Nat testing for detection of Nipah virus was approved by the Indian Council of Medial Research (ICMR) 2.
- Emergency departments have been equipped to handle any suspected cases and respond to emergencies. Isolation rooms and intensive care units (ICU) are being kept ready to treat suspected cases, where required.
- The State Government has initiated the training of healthcare workers on infection prevention and control (IPC). Adequate stocks of Personal Protective Equipment (PPE) have been made available.
- Information, education and communication activities have been initiated through different modalities including regular press releases. Audio and video communication by expert doctors are being conducted. A call center has been established to provide psycho-social support.
- Samples of bats, animal droppings, and half-eaten fruits were collected on 15 September from the village where the first case lived, in a forest which is home to several bat species. All samples tested negative for Nipah virus.

**Additional resources on Nipar virus infection**

- WHO Fact Sheet on Nipah virus infection: [https://www.who.int/news-room/fact-sheets/detail/nipah-virus](https://www.who.int/news-room/fact-sheets/detail/nipah-virus)
- WHO’s work on Nipah virus infection: [https://www.who.int/health-topics/nipah-virus-infection#tab=tab_1](https://www.who.int/health-topics/nipah-virus-infection#tab=tab_1)
- WHO Nipah Research and Development (R&D) Roadmap: [https://www.who.int/publications/m/item/nipah-research-and-development-(r-d)-roadmap](https://www.who.int/publications/m/item/nipah-research-and-development-(r-d)-roadmap)

1. [https://www.prd.kerala.gov.in/ml/node/233241](https://www.prd.kerala.gov.in/ml/node/233241)
2. [https://www.prd.kerala.gov.in/ml/node/232706](https://www.prd.kerala.gov.in/ml/node/232706)
New recommendations on dengue vaccine

- The Meeting of the Strategic Advisory Group of Experts (SAGE) on Immunization took place on 25-29 September 2023. The following advice from the SAGE, WHO issued recommendations for new vaccines for dengue, alongside the recommendations for R21/Matrix-M vaccine for malaria prevention, meningitis vaccine and immunization schedule and product recommendations for COVID-19.
- On the advice of the SAGE, WHO issued the following recommendations for dengue:
  - Dengue poses a significant public health burden in endemic countries and is poised to increase further both in terms of incidence and geographic expansion, due to climate change and urbanization.
  - The live-attenuated quadrivalent dengue vaccine developed by Takeda (TAK-003) has demonstrated efficacy against all four serotypes of the virus in baseline seropositive children (4-16 years) in endemic countries and against serotypes 1 and 2 in baseline seronegative children.
  - SAGE recommended that the vaccine be considered for introduction in settings with high dengue disease burden and high transmission intensity to maximize the public health impact and minimize any potential risk in seronegative persons.
  - SAGE recommended that the vaccine be introduced to children aged 6 to 16 years of age. Within this age range, the vaccine should be introduced about 1-2 years prior to the age-specific peak incidence of dengue-related hospitalizations. The vaccine should be administered in a 2-dose schedule with a 3-month interval between doses.
  - SAGE recommended that vaccine introduction should be accompanied by a well-designed communication strategy and community engagement.
- For more information, WHO news release ³ and the highlights from the Meeting of the SAGE on Immunization of 25-29 September 2023 ⁴.

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⁴ https://www.who.int/publications/m/item/highlights-from-the-meeting-of-the-strategic-advisory-group-ofexperts-(sage)-on-immunization25-29-september-2023
COVID-19

Status as of 1 October 2023

- The WHO South-East Asia Region has recorded a cumulative total of 61,205,635 COVID-19 cases, including 806,783 deaths. In the WHO South-East Asia Region, from 25 to 1 October 2023, 598 new cases and two new deaths are reported, a decrease of 15.2% and 33.3%, respectively, as compared to the previous week.

- Between 25 to 1 October 2023, India (313 new cases, -13.8%), Thailand (190 new cases, -18.8%), Bangladesh (63 new cases, -8.7%), Myanmar (27 new cases, -3.6%), Nepal (three new cases, -57.1%) and Sri Lanka (two new cases, -50.0%) reported a decrease in the number of new cases compared to the previous week. Bhutan has not reported a new case during the same period. Data were not available from Indonesia, Maldives, and Timor-Leste for this period.

- For the same period, only India and Thailand reported one new COVID-19 death each. The remaining countries reported no new death. Data from Indonesia, Maldives and Timor-Leste were not available for this period.

- Globally, 770,875,433 COVID-19 cases, including 6,959,316 deaths have been cumulatively reported, as of 27 September 2023. From 18 to 24 September 2023, 37,316 new cases and 170 new deaths were reported, a decrease of 54.9% and 33.9%, respectively, as compared to the previous week.

- Please refer to the WHO SEARO COVID-19 dashboard for further information of COVID-19 in WHO South-East Asia Region.

Table 1. COVID-19 cases, deaths, and the weekly change in countries in the WHO South-East Asia Region in the week from 25 to 1 October 2023

<table>
<thead>
<tr>
<th>Country</th>
<th>Cumulative cases</th>
<th>New cases (last 7 days)</th>
<th>% change in new cases</th>
<th>New cases per 1M pop</th>
<th>Cumulative deaths</th>
<th>New deaths (last 7 days)</th>
<th>% change in new deaths</th>
<th>New deaths per 1M pop</th>
</tr>
</thead>
<tbody>
<tr>
<td>India</td>
<td>44,906,838</td>
<td>313</td>
<td>-13.8</td>
<td>0.2</td>
<td>552,932</td>
<td>1</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Thailand</td>
<td>4,757,473</td>
<td>190</td>
<td>-18.8</td>
<td>2.7</td>
<td>34,474</td>
<td>1</td>
<td>-50.0</td>
<td>0</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>2,040,734</td>
<td>63</td>
<td>-8.7</td>
<td>0.4</td>
<td>29,477</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Myanmar</td>
<td>641,260</td>
<td>27</td>
<td>-3.6</td>
<td>0.5</td>
<td>19,494</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Nepal</td>
<td>1,003,441</td>
<td>3</td>
<td>-57.1</td>
<td>0.1</td>
<td>12,031</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>672,589</td>
<td>2</td>
<td>-50.0</td>
<td>0.1</td>
<td>16,682</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Bhutan</td>
<td>62,697</td>
<td>0</td>
<td>0.0</td>
<td>0.0</td>
<td>21</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>Indonesia</td>
<td>6,813,429</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>161,918</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Maldives</td>
<td>186,604</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>316</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>23,460</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>138</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>SEAR total</td>
<td>61,205,635</td>
<td>596</td>
<td>-15.2</td>
<td>NA</td>
<td>806,783</td>
<td>2</td>
<td>-33.3</td>
<td>NA</td>
</tr>
</tbody>
</table>

Percent change in the number of newly confirmed cases/deaths in past seven days, compared to previous week. NA = data not available. Thailand data were for the period from 24 to 30 September 2023 in comparison to the preceding week. DPR Korea has not reported confirmed COVID-19 cases.

5 Data as of 6:32 pm CEST, 27 September 2023, link: https://covid19.who.int/
6 Starting from the week of 7 August 2023, the Region of the Americas has stopped sharing the COVID-19 cases and deaths updates. For more information regarding COVID-19 in the Americas, please access the link: https://www.paho.org/en/topics/influenza-and-other-respiratory-viruses.
Figure 1. Weekly number of new COVID-19 cases reported during the previous eight weeks (7 August to 1 October 2023) in the WHO South-East Asia Region

Figure 2. Weekly number of SARS-CoV-2 positive samples and test positivity from integrated influenza-SARS-CoV-2 sentinel surveillance systems in the previous seven weeks (7 August to 24 September 2023) in selected counties* (as of 1 October 2023)

* Countries routinely conducting SARS-COV-2 testing of the samples collected through influenza sentinel surveillance sites (Bangladesh, Bhutan, Indonesia, Nepal and Timor-Leste).
Figure 3. Number of weekly new COVID-19 cases per 100 000 population in the previous eight weeks (7 August to 1 October 2023) in countries in the WHO South-East Asia Region *

*DPR Korea has reported no confirmed COVID-19 case. Indonesia data as of 13 September 2023.
SARS-CoV-2 variants in the South-East Asia Region

- As of 30 September 2023, the sequence data submitted to GISAID in the last 60 days by date of collection are as follows (Figures 4a and 4b). Only a small number of sequences has been submitted from the Region and therefore the data should be interpreted with caution.
  - In Bhutan, one sequence of XBB.1.16* was submitted.
  - In India, XBB.2.3* continues to account for the highest percentage of sequences submitted (60.7%, n=102) followed by XBB.1.16* (31.5%, n=53). Six sequences of EG.5* (3.6%) were submitted.
  - In Thailand, XBB.1.16* continued to account for the majority of sequences submitted (41.0%, n=86), followed by XBB.2.3* (19.0%, n=40) and XBB.1.9.1* (15.2%, n=32). A total of 17 sequences of EG.5* (8.1%) were submitted.
  - Other countries have not submitted sequences recently to GISAID.

- For more information SARS-CoV-2 variants, please see the global epidemiological update 7 and updated risk evaluation of EG.5 8.

Figure 4a. Number of Omicron sub-lineage sequences submitted to GISAID within the past 30 and 31-60 days as of 30 September 2023 by date of collection (countries with recent submissions) 4

Figure 4b. Proportion of Omicron sub-lineage sequences submitted to GISAID within the past 30 and 31-60 days as of 30 September 2023 by date of collection (countries with recent submissions) 4

*indicates the sub-lineage of each variant.

† The date next to the country name indicates the latest date of sample collection for sequence submitted to GISAID.
XBB* excludes XBB.1.16*, XBB.1.5*, XBB.1.9.1, XBB.1.9.2 and XBB.2.3*
EG.5* is a sub-lineage of XBB.1.9.2


7https://www.who.int/publications/m/item/covid-19-epidemiological-update---29-september-2023
8 https://www.who.int/docs/default-source/coronaviruse/eg5-risk-evaluation.pdf?sfvrsn=6e9690e0_6
**mmpox**

Status as of 1 October 2023

- In the WHO South-East Asia Region, a total of 418 laboratory-confirmed mmpox cases, including two deaths, have been verified since 14 July 2022 (Figure 5). Table 2 summarizes the basic epidemiological profile of the reported mmpox cases in the Region.

**Figure 5. Number of mmpox cases reported in WHO South-East Asia Region by date of notification**

* Notification - The date on which the case is notified to the public health authority.

**Table 2. Profile of the 418 confirmed mmpox cases reported in WHO South-East Asia Region since July 2022 (as of 1 October 2023)**

<table>
<thead>
<tr>
<th>Country</th>
<th>India</th>
<th>Indonesia</th>
<th>Nepal</th>
<th>Sri Lanka</th>
<th>Thailand</th>
<th>385 (92.1%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td>Male</td>
<td></td>
<td></td>
<td></td>
<td>393 (94.0%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Female</td>
<td></td>
<td></td>
<td></td>
<td>24 (5.7%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transgender</td>
<td></td>
<td></td>
<td></td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Age group</td>
<td></td>
<td>Less than 18</td>
<td></td>
<td></td>
<td></td>
<td>2 (0.5%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>18-29</td>
<td></td>
<td></td>
<td></td>
<td>126 (30.1%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>30-39</td>
<td></td>
<td></td>
<td></td>
<td>189 (45.2%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40-49</td>
<td></td>
<td></td>
<td></td>
<td>83 (19.9%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>50 and over</td>
<td></td>
<td></td>
<td></td>
<td>18 (4.3%)</td>
</tr>
<tr>
<td>Sexual orientation</td>
<td></td>
<td>Heterosexual</td>
<td></td>
<td></td>
<td></td>
<td>37 (8.9%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Men who have sex with men (MSM)</td>
<td></td>
<td></td>
<td></td>
<td>333 (79.7%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Bisexual</td>
<td></td>
<td></td>
<td></td>
<td>5 (1.2%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td>3 (0.7%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unknown</td>
<td></td>
<td></td>
<td></td>
<td>40 (9.6%)</td>
</tr>
</tbody>
</table>

For more information on the global situation of mmpox outbreak, please visit the global dashboard.
Dengue

**Bangladesh**

- During September 2023, a total of 79,598 cases (defined as dengue NS1 or anti-dengue virus IgM positive and hospitalized) including 396 deaths have been reported. This is the highest number of monthly cases and deaths, compared with the available historical data from 2019 to 2023 (Figure 6).

- A total of 18,563 cases of dengue were reported in Bangladesh during week 39 (25 September to 1 October 2023), a 7.4% decrease compared to the number of cases reported during week 38 (18 to 24 September 2023) (n=20,041). The number of new deaths increased by 11.5% (n=97 in week 39 compared to n=87 in week 38) (Figure 6).

- A total of 206,288 dengue cases including 1,006 deaths have been cumulatively reported between 1 January and 1 October 2023 with a case fatality rate (CFR) of 0.49%. Of these:
  - The majority (59.1%, n=120,184) were reported outside Dhaka City; however, the last seven days (24 to 30 September), 72.6% (n=13,570) were reported outside Dhaka City and 27.4% (n=5,119) in Dhaka City.
  - 60.8% of the cases (n=125,353) were male; however, females accounted for 56.5% (n=568) of the deaths. The overall CFR was higher in females compared to males (0.70% vs 0.35%). Mortality also differed by age with those aged over 60 years having the highest CFR (1.76%) followed by those aged 41 to 60 years (0.78%), 21 to 40 years (0.37%) and 20 years and younger (0.28%).

Figure 6. Number of new cases of, and deaths from dengue by month in Bangladesh from January 2019 to 30 September 2023


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10 [https://old.dghs.gov.bd/images/docs/vpr/20231001_dengue_all.pdf](https://old.dghs.gov.bd/images/docs/vpr/20231001_dengue_all.pdf)
11 [https://www.who.int/bangladesh/emergencies/dengue-update-2023](https://www.who.int/bangladesh/emergencies/dengue-update-2023)
Maldives

- Between January and August 2023, a total of 2,357 cases of dengue have been reported in Maldives compared to 1,288 cases reported during the same period in 2022.
- A total of 323 new cases of dengue were reported in August 2023, a 19.1% increase compared to July 2023 (n=271) and 1.3 times higher than the number reported during August 2022 (n=250) (Figure 7).

Figure 7. Number of new cases of dengue by month in Maldives from January 2022 to May 2023

Nepal

- Between 1 January and 27 September 2023, 32,897 cases of dengue including 20 confirmed deaths (CFR=0.06%) have been reported from 76 districts in Nepal.
- The highest cumulative number of cases and case incidence have been reported from Sunsari district, Koshi province (16,036 cases (48.7% of the total), 1,804.4 cases per 100,000). The second highest number of cumulative cases has been reported from Jhapa district, Koshi province (3,538 cases (10.7% of the total), 389.6 cases per 100,000) and the second highest incidence of cases from Dhading district, Bagmati province (3,050 cases (9.3% of the total), 867.4 per 100,000 population).
- A total of 1,365 cases of dengue were reported in Nepal during week 38 (17 to 23 September 2023) via the Early Warning Reporting System (EWARS), a 3.7% decrease compared to week 37 (10 to 16 September, n= 1,418) (Figure 8).

Figure 8. Number of new cases of dengue by week reported by the Early Warning Reporting System (EWARS) in Nepal from January 2018 to 23 September 2023


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Sri Lanka

- As of 8 September, a total of 62,783 cases of dengue have been reported in Sri Lanka in 2023, 1.1 times higher than the 55,462 cases reported until the end of week 36 in 2022 (11 September).
- In 2023, a total of 838 cases of dengue were reported in Sri Lanka in week 36 (2 to 8 September 2023), a 15.0% increase compared to week 35 (26 August to 1 September August, n=1,166) (Figure 9).

**Figure 9. Number of new cases of dengue by week in Sri Lanka from January 2018 to 8 September 2023 (week 36)**

Sources: Epidemiology Unit and National Dengue Control Unit, Ministry of Health.
As of 27 September, a total of 102,202 dengue cases (inclusive of dengue fever (76.3%, n=77,949), dengue haemorrhagic fever (22.9%, n=23,433) and dengue haemorrhagic fever shock syndrome (0.8%, n=820) and 98 dengue deaths (inclusive of dengue fever (11.2%, n=11), dengue haemorrhagic fever (27.6%, n=27) and dengue haemorrhagic fever shock syndrome (61.2%, n=60)) (CFR=0.1%) were reported in Thailand in 2023. Between 2018 and 2023, this is the second highest number of cumulative cases reported from January to September after 2019 (n=103,117).

Between 1 and 27 September, a total of 11,985 cases of dengue were reported, 1.6 times higher than the mean number of cases reported in September between 2018 and 2022 (n=7,584.2). However, note that the data are incomplete for September 2023 and are subject to retrospective adjustments (Figure 10).

Between 1 and 27 September, a total of 13 deaths due to dengue, 2.4 times higher than the mean number of deaths reported in September between 2018 and 2022 (n=5.4) were reported (Figure 10).

Of the 102,202 cases reported until 27 September in 2023, 50.9% (n=52,012) were male. Those aged five to 14 years comprised the higher percentage of cases (n=36,113, 35.3%) followed by those aged 15 to 24 years (n=23,079, 22.6%).

Figure 10. Number of new dengue cases and deaths by month in Thailand from January 2018 to 28 September 2023.


Influenza

Situation of influenza in WHO South-East Asia Region
Status as of 1 October 2023

- From the week starting on 26 June 2023, in the WHO South-East Asia Region, an increase in transmission of seasonal influenza has been observed. The percentage of specimens positive for influenza increased from 23% to 38% in the region during the period from 7 August to 1 October 2023. The most frequently circulating strains overall in the WHO SE Asia region were influenza A/H3, A/H1N1pdm09 and influenza B Victoria (Figure 11).

- The increases were primarily driven by Bangladesh and Thailand.

- In Bangladesh, from the week starting on 7 August to the week starting on 18 September 2023, the percentage of specimens positive for influenza ranged from 46% (n=227) to 29% (n=54) (Figure 12). The transmission was primarily driven by influenza subtype B Victoria followed by influenza A/H3 and A/H1N1 pdm09 (Figure 12).

- In Thailand, the percentage of specimens positive for influenza increased from 20% (in the week starting on 7 August) to 38% (in the week starting on 25 September). The most frequently circulating strains was the subtype A/H1N1 pdm09 followed by A/H3 and a significant number of un-subtyped influenza B (Figure 13).

- From the week starting on 7 August to the week starting on 18 September 2023, the proportion of respiratory samples collected at influenza sentinel surveillance systems in these countries that tested positive for COVID-19 varied from 2.0% to 1.2% (Figure 2).

- Data sources and information on influenza, including updates of integrated surveillance of SARS-CoV-2 using influenza sentinel surveillance systems, are available at WHO SEARO Influenza dashboard.

Figure 11. Number of specimens positive for influenza by subtypes and the influenza test positivity in WHO South-East Asia Region (as of 1 October 2023)
Figure 12. Number of specimens positive for influenza by subtypes and the influenza test positivity in Bangladesh 2023 (as of 1 October 2023)

Figure 13. Number of specimens positive for influenza by subtypes and the influenza test positivity in Thailand 2023 (as of 1 October 2023)
Global situation of influenza  
Status as of 1 October 2023

- Globally, influenza detections remained low as per data reported until 10 September 2023 with activity in many countries in the southern hemisphere now decreasing after having peaked in previous weeks.
  - The global situation of low detection continued. The percentage of specimens positive for influenza changed from 2.7% (n=3 466 /129 413) in the week 29 (the week starting on 17 July 2023) to 3.2% (n=2 021/63 863) in the week 36 (the week starting on 4 September 2023) (Figure 14).

- The WHO GISRS laboratories tested 63 863 specimens during the period from 4 to 10 September 2023 (Week 36). Total 2 021 specimens were positive for influenza viruses, of which 1 454 (72%) were typed as influenza A and 567 (22%) as influenza B.
  - Of the sub-typed influenza, A viruses, 382 (26%) were influenza A/H1N1pdm09 and 794 (55%) were influenza A/H3N2. Of the type B viruses for which lineage was determined, 315 (56%) belonged to the B/Victoria lineage and 325 (57%) were unsub-typed.

Figure 14. Number of specimens positive for influenza by subtypes and the influenza test positivity globally (as of 10 September 2023)