

S. Korea tests new virus steps as infections reach new high

January 26 2022, by Kim Tong-Hyung



Health workers wearing protective gears stand to help visitors at a temporary screening clinic for the coronavirus near the Seoul City Hall in Seoul, South Korea, Wednesday, Jan. 26, 2022. Credit: AP Photo/Lee Jin-man

South Korea on Wednesday began enforcing new COVID-19 response

measures, including reduced quarantine periods and expanded rapid testing, as its new cases jumped nearly 50% in a day.

The 13,012 confirmed new cases were 4,400 more than the previous single-day high of 8,571. It underscores the speed of transmissions driven by the highly contagious omicron variant, which became the country's dominant strain just last week.

South Korean officials say their early analysis suggests omicron spreads more than twice as fast as the delta variant, which spiked the country's hospitalizations and fatalities during a devastating winter surge, but is also significantly less likely to cause serious illness or death.

South Korea also has a high vaccination rate. More than 85% of South Korea's more than 51 million people have been fully vaccinated and more than 50% of the population have received booster shots.

Still, there are concerns that a sudden explosion in infections could possibly overwhelm hospitals and cause disruption at workplaces and essential services by constantly placing huge numbers of people under quarantine.

Starting Wednesday, the quarantine period for those who [test](#) positive after being fully vaccinated was reduced from 10 to seven days. Fully vaccinated people who come in close contact with those infected will no longer be quarantined, but they have to report their daily condition to [health officials](#) before being tested within six or seven days.



People queue in line for the coronavirus test while maintaining social distancing at a temporary screening clinic for the coronavirus near the display of the Seoul logo in Seoul, South Korea, Wednesday, Jan. 26, 2022. Credit: AP Photo/Lee Jin-man

Officials were also planning to treat most mild cases at home and reshape a testing regime that had been centered around PCR tests, which will now be saved mostly for people in their 60s and older or those with pre-existing conditions. Most people will be asked to first use rapid antigen test kits available at public health offices, testing stations and pharmacies and get PCR when those tests are positive.

The new policy was enforced at three cities near Seoul and southern South Jeolla province on Wednesday, and officials plan to expand the

changes nationwide in early February.

Despite the benefits of faster results, officials have previously been reluctant to depend on rapid testing as they are known to be less accurate than PCR tests, which require large numbers of health professionals administering nasal and throat swabs and high-tech laboratory machines analyzing samples.

Some experts have raised concern over the government's decision to use rapid testing as a major tool against the virus, saying such tests aren't sensitive enough to detect infections at an early stage before people start exhibiting clear symptoms. Transmissions could dramatically worsen if people continue to venture out in public after testing false negative, they say.

The Korean Society of Laboratory Medicine, a doctors' group, issued a statement criticizing the new testing policy, saying that the government should take steps to expand the country's capacities for PCR tests instead.

Son Youngraee, a senior Health Ministry official, said it's inevitable that the country narrows its focus toward reducing serious illnesses and deaths among high-risk groups. He acknowledged the new approach may result in "disadvantages in the diagnosis and infection prevention of low-risk groups."

"Our current goal is to manage the spread of the virus at a certain level, so that it doesn't explode and create an excessively huge peak, and minimize serious cases and fatalities," Son said during a briefing. "We want to avoid the experience of foreign countries, where hospital systems collapsed or overwhelmed and led to damages in the treatment of non-COVID-19 patients."

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