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WHAT'S NEW

CORONAVIRUS COVID-19 – LATEST UPDATES

ES AND VACCINATIONS

SITUATION UPDATE ON CORONAVIRUS

INFECTIOUS DISEASES AND VACCINATIONS

What's new

Coronavirus COVID-19 – Latest Updates

Situation update on coronavirus

Map application on corona cases

Situation update on coronavirus

Corona map See the confirmed coronavirus case: thl.fi/coronamap

Updated on 7 September at 16:50.

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THL is closely monitoring the development of the epidemic. The situational review page is updated on weekdays and the Corona map daily. Hospital districts report deaths associated with the disease and the number of patients in hospital and intensive care three times a week on Mondays, Wednesdays and Fridays.

The situation in Finland in brief

- Reported cases in total: **8,327** (+ 102*)
- Tested samples in total approximately **745,000** (+ 29,200*)

* The change in the total number of cases reported to the register compared to last Friday is 102 cases. Of these, 101 are recent cases diagnosed during the previous two weeks.

BACK TO MAIN PAGE

Back to Coronavirus COVID-19 – Latest updates main page

WHAT'S NEW

4 Sep 2020

Several coronavirus infections at student parties

1 Sep 2020

Koronavilkku has been downloaded a million times already!

26 Aug 2020

Traffic light model to help in the

* The number of tested samples also describes the change in the total number of tests compared to last Friday. Sample counts may be adjusted retroactively to a more specific figure. Also see below for information on Reporting of data.

- A total of **336** (+ 1^{**}) deaths associated with the disease have been reported.
- The number of people in hospital care in Finland is 16 (+ 2**)
- The number of patients in intensive care in Finland is
 1 (+ 0**)

** The figures indicate the change compared to the situation on Friday 4 September.

- In relation to Finland's total population (5,543,233), the prevalence of cases is **150** cases per 100,000 people.
- During the most recent seven-day monitoring period (29 August - 4 September), **165** new cases were diagnosed. The incidence of new cases in relation to the population was **3.0** cases per 100,000 inhabitants. During the previous monitoring period (22–28 August), the corresponding figures were 141 new cases, with an incidence of 2.5 cases per 100,000 inhabitants.
- During the most recent fourteen-day monitoring period (22 August - 4 September) **306** new cases were diagnosed. The incidence of new cases in relation to the population was **5.5** cases per 100,000 inhabitants.
 During the previous monitoring period (8–21 August), the corresponding figures were 376 new cases, with an incidence of 6.8 cases per 100,000 inhabitants.
 - Reporting delays can affect the numbers stated for the most recent monitoring period. It is therefore not possible to draw any certain conclusions on the increase or decrease of cases on the basis of the most recent monitoring period.
- Virus testing currently has a capacity of nearly **16,000** tests per day.
- An estimated 7,350 people have recovered, which is over 90% of reported cases. The estimate is based on the follow-up of the observed cases over a period of three weeks (21 days). A person is considered to have recovered, when they do not have any follow-up data related to the progress of the illness after 3 weeks have passed from diagnosis. The estimate is updated once a week on Wednesdays, the estimate was last updated on 2 September.

assessment of risks associated with foreign travel

26 Aug 2020

THL and Solita publish Koronavilkku source code - open source to facilitate independent evaluation of the application

25 Aug 2020

A symptomatic child should be tested for coronavirus if they have a new respiratory infection or may have been exposed to the coronavirus

See all news on Coronavirus

On this page

- Information by region
- Coronavirus-related deaths
- Hybrid Strategy indicators
- Reporting of information
- The current status of the epidemic in other countries

Information by region

- Nationally, the number of new infections remains relatively low, but their incidence has increased when compared to the figures at the beginning of July.
- Incidence has changed as follows during the last sevenday monitoring periods (29 August-4 September) compared to the previous seven-day monitoring period (22–28 August):
- Incidence has increased in nine area compared to the previous seven days:
 - The largest number of new cases have been recorded in the hospital districts of Helsinki and Uusimaa, Central Finland, Pirkanmaa, Northern Ostrobothnia and Kainuu.
 - In the other regions, where new cases have been diagnosed, there have only been less than five new cases per region during the most recent monitoring period.
- Incidence decreased or remained the same in around half (12/21) of hospital districts.
- No new cases were diagnosed in nine of these areas during the most recent monitoring period.

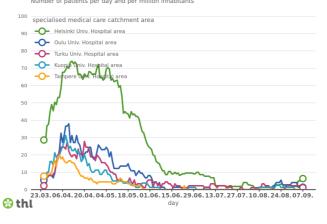
People hospitalised due to coronavirus and deaths associated with the disease

Catchment area	Inpatient care	In intensive care	Hospitalised, total number	Deaths (cumulative)
Helsinki University Hospital catchment area*	14	0	14	276
Kuopio University Hospital catchment area	0	0	0	25
Oulu University Hospital catchment area	0	1	1	13

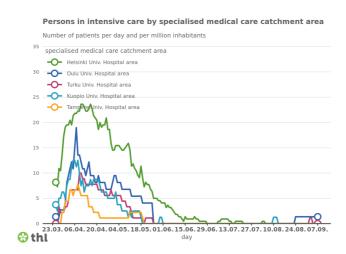
Nationwide total	15	1	16	336
Turku University Hospital catchment area + Åland	1	0	1	19
Tampere University Hospital catchment area	0	0	0	3

The table shows the number of patients that have been hospitalised due to COVID-19 and the number of deaths associated with the disease by catchment area. The figures are based on information reported by the hospital districts. The patient situation is reported by catchment area to ensure patient privacy. Turku University Hospital catchment area also includes data for Åland. Information has been updated on 7 September.

Persons in hospital care by specialised medical care catchment area Number of patients per day and per million inhabitants



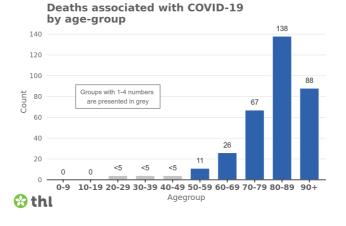
The graph shows the number of people in hospital care due to having contracted COVID-19 in relation to a million residents by catchment area. Graph updated on 7 September.



The graph shows the number of people in intensive care due to having contracted COVID-19 in relation to a million residents by catchment area. The graph is updated on business days. Graph updated on 7 September.

Coronavirus-related deaths

• Thus far, the National Infectious Diseases Register has accumulated information on 336 fatalities and more detailed information is available on these. Of them, 48 percent were men and 52 percent were women. The median age of the deceased is 84.



The graph shows the age distribution of the deceased whose deaths were related to COVID-19. The protection of privacy has been taken into account in the breakdown of age groups. For example, if there are 1–4 cases, the number is reported in the statistic as <5, and is shown in the graph with a light grey of a standard size. No further information will be given on these cases. Data source Infectious Diseases Register. The information is updated once a week on Wednesdays. The information has been updated on 2 September.

- More detailed information on where the deceased had been treated immediately prior to their death has been collected from hospital districts on all 335 individuals:
 - Of the deceased, 20 per cent were in specialised medical care, 35 per cent in primary health care

units, 44 per cent in social welfare 24-hour units and 1 per cent at home or elsewhere.

- The majority (over 90 percent) of the deceased persons for whom more detailed health information is available had one or more long-term illnesses.
- The coronavirus epidemic has not increased total mortality in Finland. Deaths of working-age people are very rare, and no deaths of children and young people have been diagnosed in Finland.

Indicators on the effectiveness of Finland's hybrid strategy

- The effectiveness of Finland's hybrid strategy in combating the coronavirus epidemic is monitored using epidemiological, medical, and functional indicators.
- The monitoring report by the Situational Picture and Modelling Working Group appointed by the Ministry of Social Affairs and Health is published once a week on the THL website:
 - Monitoring of the coronavirus (in Finnish)
 - Situation assessment report, 2 September, 2020 (pdf, 775 kt, in Finnish)

Reporting of information

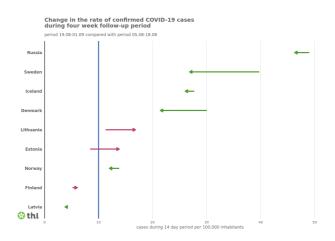
- Hospital districts report the numbers for patients in hospital care and deaths associated with the disease.
- New cases are reported to the National Infectious Diseases Register according to the date the sample was taken.
 - The reported new cases can be spread over several days due to reporting delays. Delays can be related to, for example, the recording of samples and data transfer.
 - The National Infectious Diseases Register automatically combines physician's reports and laboratory reports concerning the same person into a single case. As data is combined, daily case numbers may change and become more specific,
 - Information may also change regionally, if more background information is available on persons and the cases are then recorded in another area.
 - All confirmed COVID-19 cases are reported to the National Infectious Diseases Register regardless of where the cases are treated.
 - The National Infectious Diseases Register (NIDR) retrieves information on deaths from the Population Information System on all cases

recorded in the NIDR. It is estimated that COVID-19 has been involved in the chain of events leading to the death, if the patient has died within one month of testing positive. The estimated total number of deaths associated with the disease recorded in the National Infectious Diseases Register may differ from the numbers reported by hospital districts.

- Tested samples are reported according to their date of analysis.
 - Laboratories report the number of tested samples to the Finnish Institute for Health and Welfare by hospital district. Data on sample numbers may also change when these are checked and specified retrospectively.

The current status of the epidemic in other countries

- Globally, the incidence of new cases is currently highest on the American continents.
- In Europe, most new cases relative to the population have been reported in Spain, France, Malta, Romania and the Balkans.
- In Finland's neighbouring areas, incidence rates have risen the most in Lithuania and Estonia.
- A total of more than 124,000 cases of coronavirus and over 7,000 deaths associated with the disease have been reported in the Nordic countries.
- Number of cases in different countries (WHO)
- Coronavirus disease (COVID-19) outbreak (WHO)
- Numbers of cases in European countries (WHO)
- A summary of cases diagnosed in Europe on the ECDC website.
- COVID-19 (ECDC)



The graph shows the incidence of diagnosed COVID-19 cases in the Nordic countries, Baltic states and Russia for the two

previous 14-day monitoring periods. The direction and colour of the arrow indicate a decrease (Green) or an increase (Red) in incidence. If the incidence has remained the same, it is shown in the graph with a green arrowhead. At the blue vertical line, the incidence is 10/100,000. The Government has decided on restriction-free travel to the Schengen area countries whose two-week incidence is less than 8/100,000 for the entire population. The graph's cases have been listed according to their reporting date based on publicly available information the European Centre for Disease Prevention and Control (ECDC). The graph is updated once a week on Wednesdays for the situation update. Graph updated on 2 September.

See also

- THL corona map
- More information on the corona map.
- THL symptoms map
- More information on the Symptoms Map

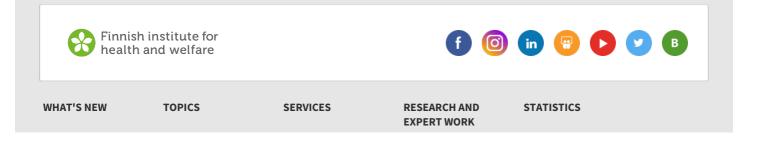
Research

- THL is researching the spread of the coronavirus epidemic in the population and regionally. For more information on studies, see below:
 - Weekly report on the serological population study of the coronavirus epidemic
 - Monitoring of coronavirus at wastewater treatment plants

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Administrative sector of the Ministry of Social Affairs and Health

THL studies population health and welfare, effectiveness of health and welfare policies and services, environmental health as well as social problems.