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# INFECTIOUS DISEASES AND VACCINATIONS

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INFECTIOUS DISEASES AND VACCINATIONS

What's new

Coronavirus COVID-19 – Latest Updates

**Situation update on coronavirus**

Map application on corona cases

The COVID-19 epidemic: regional situation, recommendations and restrictions

Statistics on deaths related to COVID-19

## Situation update on coronavirus

[Suomeksi](#) / [På svenska](#)



### Corona map

See the confirmed coronavirus cases [thl.fi/coronamap](https://thl.fi/coronamap)

The corona map is updated daily at noon. The map has information on daily numbers of confirmed cases and tested samples as well as cumulative numbers of confirmed cases and deaths. The map also shows the incidence of the disease, and the number of cases and tests by hospital district and municipality.

**Updated on Thu, 31 December at 14:30.**

### Finland's situation in brief

- Reported cases in total: **36,107** (+249\*)
- Tested samples in total approx. **2,466,500** (+6,700\*)
- A total of **561** (+5\*) deaths associated with the disease have been reported.
- Number of patients in hospital district hospitals: **80** (-3\*)

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31 Dec 2020

[Fewer people were tested for coronavirus during Christmas week – Number of reported cases fell](#)

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[Coronavirus test recommended for](#)

- Number of patients in city and healthcare center hospitals: **92** (-6\*)
- The number of people in intensive care: **27** (-3\*)  
\*The information was updated on Thursday 31 December and shows the change compared to yesterday. On [the corona map](#), information about confirmed cases and tested specimens is updated every day. Case and sample volumes may be adjusted retrospectively as more information becomes available. Also see below for information on [Reporting of data](#).
- Information on the regional epidemic situation by hospital district:  
[Regional restrictions and recommendations](#)
- Laboratories have a testing capacity of more than **26,000** samples per day. In addition, the introduction of antigen tests in some areas will further increase the capacity.
- An estimated 29,000 people have recovered, which is about 80% 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 30 December.

## Coronavirus vaccines

Number of vaccination doses administered: **1767\***

\*There are still problems in data transfer that are being fixed. The number of vaccinated persons will be specified retroactively.

Week	Vaccine doses received	Vaccine doses to be received
52/2020	approx. 10,000	
53/2020	approx. 40,000	
1/2021		approx. 50,000
2/2021		approx. 50,000

*The number of doses is based on the vaccination register. The information was updated on 31 December.*

[travellers arriving from the UK on or after 7 December, regardless of whether they have symptoms or not](#)

21 Dec 2020


[THL's study: Majority of people who have had a coronavirus infection retain antibodies for over six months](#)

20 Dec 2020

[THL recommends that passenger air traffic from the United Kingdom to Finland be interrupted for two weeks](#)

17 Dec 2020

[Alarming increase in infections among older adults](#)

[See all news on Coronavirus](#) 

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## 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).

## Information by region

The regional incidence will be monitored in the situation review for 14-day monitoring periods. A comparison of 14 day monitoring periods will reflect changes in incidence and the status of the epidemic over a longer period of time.

Regional incidence has changed as follows during the last **14 days** (15–28 December) compared to the previous 14-day monitoring period (1 December – 14 December):

- Incidence has increased in 4/21 regions compared to the previous 14 days.
- The largest number of new cases have been recorded in the hospital districts of Helsinki and Uusimaa, Southwest Finland, Pirkanmaa, Central Finland, North Ostrobothnia and Päijät-Häme.
- In the other regions where new cases have been diagnosed, there have been under a hundred new cases per region during the latest 14-day monitoring period.
- Incidence decreased or remained the same in 17/21 hospital districts.
- New cases were diagnosed in all regions during the most recent 14-day monitoring period.

For more information on the regional epidemic situation by hospital district:

[Regional restrictions and recommendations](#)

## People hospitalised due to coronavirus and deaths associated with the disease

Catchment area	In specialised health care	In healthcare center hospitals	In intensive care	Hospitalised, total number	Deaths (cumulative)
Helsinki University Hospital catchment area	43	46	17	106	386
Kuopio University Hospital catchment area	9	4	5	18	68
Oulu University Hospital catchment area	3	6	2	11	29
Tampere University Hospital catchment area	16	23	1	40	38
Turku University Hospital catchment area + Åland	9	13	2	24	40
<b>Nationwide total</b>	<b>80</b>	<b>92</b>	<b>27</b>	<b>199</b>	<b>561</b>

*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 31 December.*



*The graph shows the number of people in hospital care and intensive care in Finland. The figures are based on information reported by the hospital districts. The information was updated on 31 December. As of week 50, more comprehensive information on COVID-19 patients in city and health center hospitals has also been reported to THL.*

## About intensive care

- A national office for the coordination of intensive care headed by the Kuopio University Hospital (KUS) maintains the national [situational picture on intensive care \(in Finnish\)](#).
- Monthly reports provide more information on intensive care capacity, treatment periods, age and gender distribution and on the previous health status of patients.  
[Situation update on intensive care on 2/12/2020 \(Office coordinating intensive care, in Finnish, PDF 715 kt\)](#)

## Coronavirus-related deaths

- [The corona map](#) has information on deaths related to COVID-19 according to the date of death, and on the age distribution of the deceased.
- More detailed information on where the deceased had been treated immediately prior to their death has been collected from hospital districts on all 561 individuals: Of the deceased, 23 per cent were in specialised medical care, 41 per cent in primary health care units, 35 per cent in social welfare 24-hour units and 1 per cent at home or elsewhere.
- Until Thursday 31 December, the National Infectious Diseases Register has accumulated information on 537 fatalities and more detailed information is available on these. Of them, 50 percent were men and 50 percent were women. The median age of the deceased is 84.
- The majority (over 95 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 overall mortality in Finland. Deaths among working-age people are very rare and no deaths related to coronavirus disease in children and adolescents have been reported in Finland.

## The current status of the epidemic in other countries

- We update the current status of the epidemic in other countries once a week on Wednesday. You can look at the global situation daily from the links below.
- Globally, the incidence of new cases is currently highest on the American continents and in Europe. A high number of cases is also still being reported in Russia.
- In Finland's neighbouring areas, incidence rates have risen in several countries, mostly in Denmark, Lithuania and Sweden.
- [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. 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 30 December.*

## Reporting of information

- Hospital districts report the numbers for patients in hospital care and deaths associated with the disease.
  - The hospital districts report the number of patients hospitalised for coronavirus in their area to THL, regardless of where the patient is being treated. The number of patients in hospital district hospitals has been comprehensively reported throughout the epidemic. On the other hand, information reported by the hospital districts on the number of patients in city and healthcare center hospitals has been partly incomplete. Patients receiving intensive care have been recorded separately throughout the epidemic.
- 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 a person with a positive COVID-19 test result has died within one month after the initial sample collection. 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.

- More information: [Statistics on deaths related to COVID-19](#)

**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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Finnish institute for health and welfare



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THL studies population health and welfare, effectiveness of health  
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