

# COVID-19

## WEEKLY BULLETIN



## Global update

The total confirmed cases per week has remained stable at around 2 million for the past three weeks. 1.05 million deaths and 36.3 million confirmed cases have been reported across the globe with majority of the deaths reported from the region of the Americas (55%) and Europe (23%). But the South-East Asia region and Europe accounts for 91% of new cases in the past week as per WHO Epidemiological report. Globally, the highest percentage of new cases have been reported in the 25- 39 year age group as infections spread to the younger population in many countries. 75% of all deaths have been reported in those above 65 years of age. India has crossed 1 lakh deaths.

## Types of Transmission in COVID-19:

### Droplet Transmission:

Respiratory droplets exhaled by an infected person during coughing, sneezing, talking, singing etc, and infecting someone when someone is within 6 feet distance is the main mode of transmission in COVID-19.

### Contact Transmission:

Direct contact with an infected person (e.g. Handshake, hug) or indirectly through contaminated surfaces, also known as fomite transmission. Handwashing by soap is the most effective measure to prevent contact transmission.

### Others:

Transmission through aerosol generating activities in hospital settings have been documented. Recently airborne like transmission in enclosed spaces with poor ventilation like bars, clubs have been observed.

## Global | National | Regional | State

Covid 19 Cases	Confirmed cases	Deaths	Death Rate
World	3,63,61,054	10,56,186	2.90%
India	69,06,151	1,06,490	1.54%
N.E. India	2,63,089	1,333	0.51%
Nagaland	6,888	12	0.17%

As of 9th October 2020

### In the past week:

India: 5,12,088 cases and 6,717 deaths

World: 2.19 million cases and 39,200 deaths

## North Eastern States

State	Total Cases	No of Deaths	Death Rate
Assam	1,91,397	794	0.41 %
Tripura	27,982	311	1.11 %
Manipur	12,679	83	0.65 %
Meghalaya	7,261	60	0.83 %
Sikkim	3,246	51	1.57 %
Arunachal Pradesh	11,479	22	0.19 %
Nagaland	6,888	12	0.17 %
Mizoram	2,157	0	0.00 %
Total	2,63,089	1,333	0.51 %

As of 9th October 2020

# Epidemiology

*The virus, SARS-CoV-2 is spread mainly by the viral load present in the respiratory droplets. The incubation period varies from 2-14 days with an average of 5-6 days. More than 80% of infected people will have very mild to no symptoms at all. Infections mostly spread in closed, crowded and poorly ventilated spaces. Person to person transmission through droplets is the main mode of transmission.*



## Major updates from the week: Summary

- Among the traced contacts, the most affected age group is 21-40 years at 53%. It has been observed in other countries that infection among the young leads to community transmission and infection of high-risk groups. Age appropriate messages are needed to address the young age groups to break the chain of transmission.
- Majority of the traced contacts were government employees (29%) and household contacts (28%). Students constitute 16% of all traced contacts. The hypothesis here is that office goers/self-employed are bringing infection home to their dear ones. SOP for safety in workplaces should be strictly enforced (SOP High risk settings, DHFW, Kohima)
- Recent spread in a convent, prison and church is concerning. All these point towards transmission in closed environments. Another major worry is the opening of clubs, bars, lounges especially in Dimapur. Restaurants should maintain adequate ventilation and all safety measures. Takeaways and home deliveries should always be preferred.
- 570 cases were reported in the past week with a sample positivity rate of 16% (Highest till date).
- Out of 570 cases, there were 360 traced contacts outnumbering security personnel / travelers.
- Till date 12 COVID-19 deaths have been recorded from the state and 11 cases had comorbidities. The youngest mortality was 28 years of age. Hypertension and diabetes were the most commonly associated diseases.
- The median age among the deaths is 48 years of age which is much younger / lesser than the perceived notion that only the old die.
- Dimapur constitutes about 52% of all confirmed cases in the state.
- Fever (84%) and cough (64%) are the most commonly reported symptoms.
- Symptomatic cases have increased to 4%.

### SCIENTIFIC UPDATES FROM AROUND THE WORLD:

#### **Airborne Transmission of COVID-19 under Special circumstances:**

In the past week, Center for Disease Control and Prevention, USA has reported that airborne transmission is observed in some special circumstance and conditions. In enclosed crowded spaces with poor ventilation where people are shouting, singing etc (bars, lounges, clubs), infection is possible beyond 6 feet distance and droplets containing virus can remain suspended in air for longer time and travel beyond 6 feet.

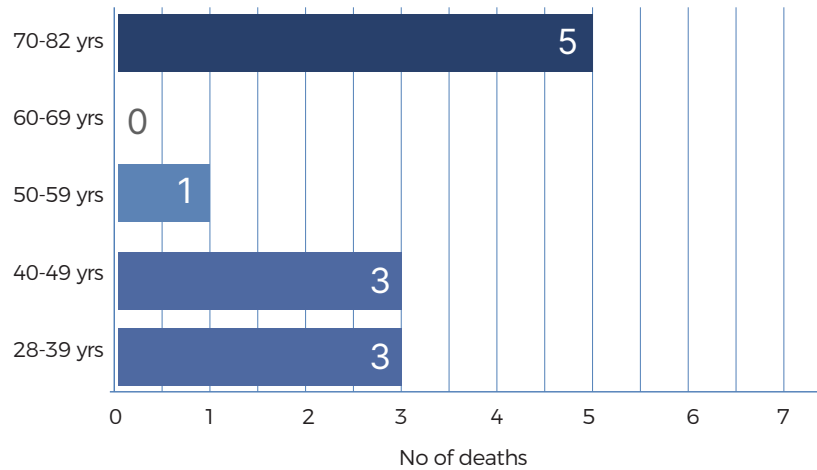
#### **Median age of COVID-19 cases is declining and younger age groups are affected**

more than before in USA and Europe. "Increased prevalence of SARS-COV 2 infection among younger adults likely contributes to community transmission of COVID-19, including to persons at higher risk for severe illness, such as old adults." (CDC, Weekly Report). The need for age appropriate IEC messages is also felt.

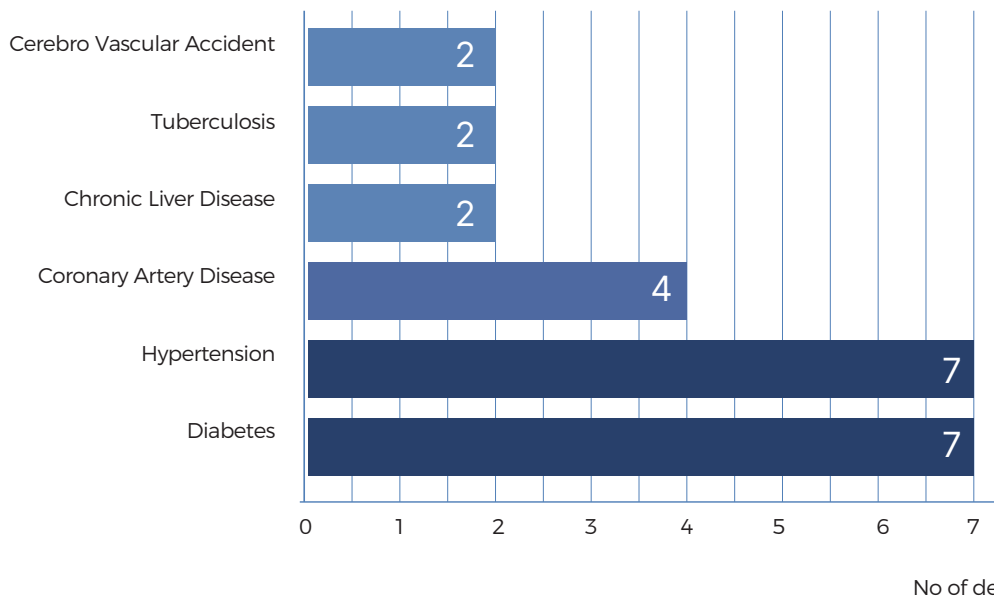
# COVID DEATHS

## COVID-19 DEATHS BY AGE GROUP

- Total Deaths: 12
- Median Age: 48 yrs
- Range: 28 - 82 yrs



## COMORBIDITIES ASSOCIATED WITH COVID-19 DEATHS



All COVID-19 deaths are certified by the state death committee as per ICMR and WHO ICD 10 guideline.

Multiple comorbidities are associated with a single patient.

Deaths with comorbidities 11/12 (92%)

District wise deaths:

- Dimapur (10)
- Kohima (1)
- Mon (1)

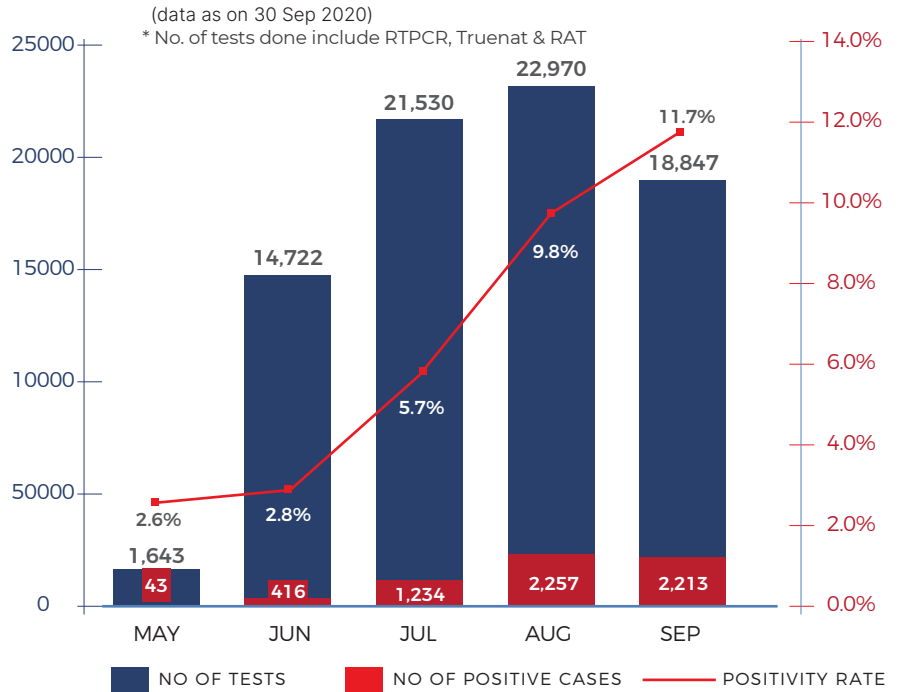
**Most common comorbidities: Hypertension and Diabetes Mellitus**

# COVID TESTS, POSITIVE CASES & POSITIVITY RATE

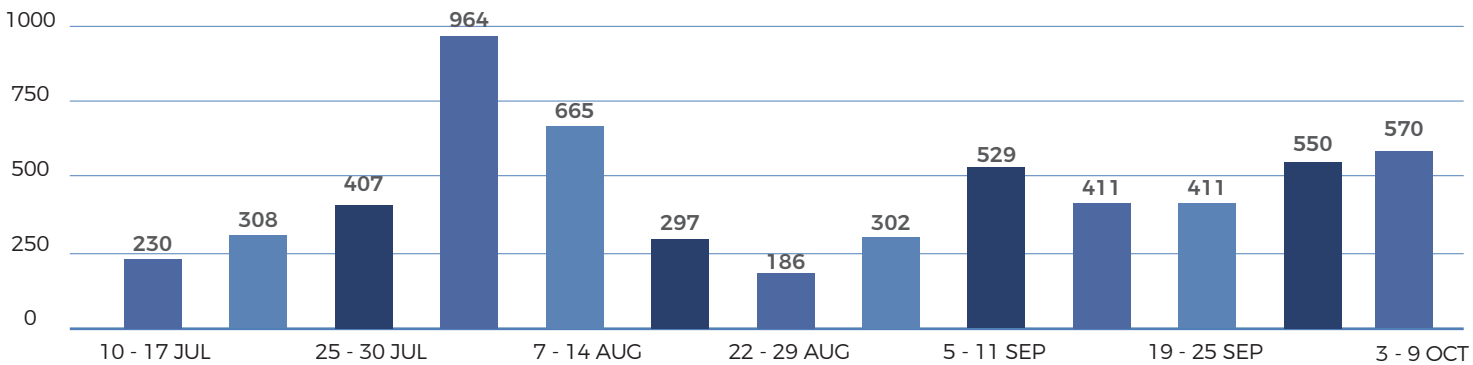
In Nagaland, the positivity rate has constantly increased in the past few months.

September has recorded almost equal no of cases as August even with fewer testing.

The drop in testing rate is partly to do with revision in discharge policy and testing of returnees/travellers, where rational testing based on current scientific evidences has been adopted (as prescribed by ICMR).



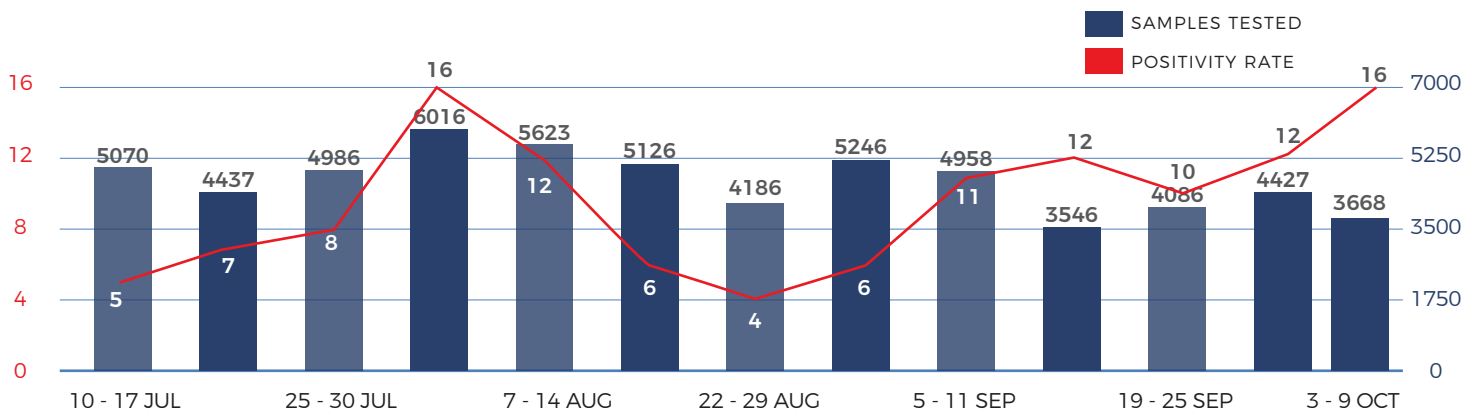
## WEEKLY DATA OF CONFIRMED CASES



570 cases reported in the past week are:

- Traced contacts (360)
- Armed forces (153)
- Returnees/ travellers (40)
- Frontline workers (17)

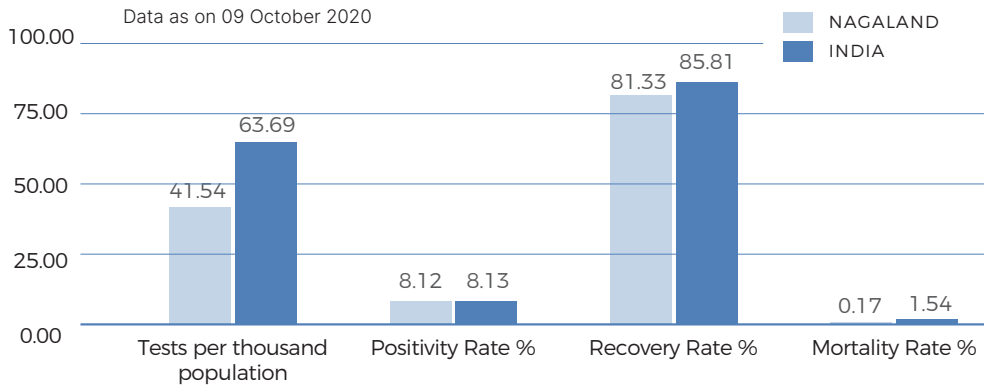
## WEEKLY DATA ON SAMPLE TESTING & SAMPLE POSITIVITY RATE



- The positivity rate for the past week is 16% which is the highest as of date.
- In Nagaland, 97% of all tests have been done by RT-PCR (BSL-2/3 and Truenat combined).

TEST TYPE	NO OF TESTS	PERCENTAGE
BSL-2-3	52,955	62%
Truenat	29,542	35%
RAT	2,280	3%
Total	84,777	100%

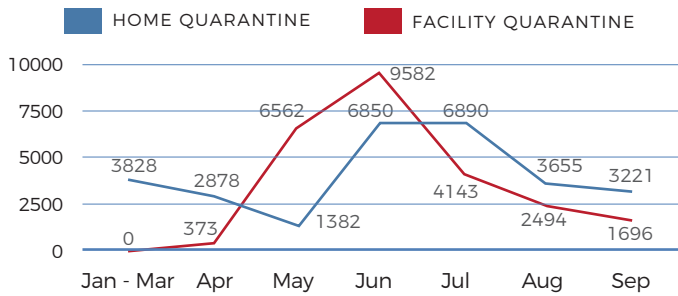
# TESTING, POSITIVITY, RECOVERY AND MORTALITY RATES



Testing per thousand is lower than that of the national average but testing rate in Kohima and Dimapur is higher than the national average at 87 and 86 respectively.

## PERSONS UNDER QUARANTINE

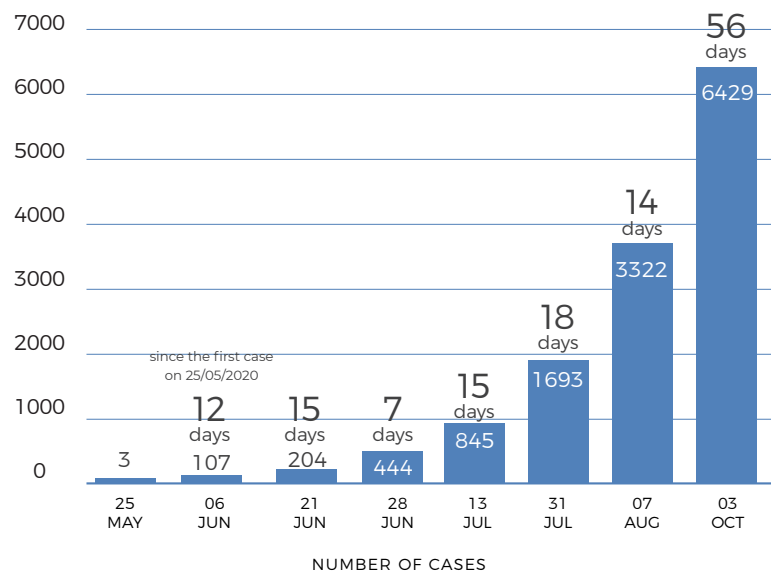
Monthly data of total no of persons put under Quarantine



22,772 quarantine violation alerts have been received through digital monitoring (NCOVID App) as reported by PHQ, Kohima. Citizens should strictly comply to the quarantine norm of 14 days for everyone's safety as responsible citizens.

24,181 people have been put under facility quarantine and 28,441 people under home quarantine respectively.

## DOUBLING TIME OF CASES



Doubling time has increased to 56 days (3rd October 2020). Last doubling time was 14 days on 7th August 2020.

## BED OCCUPANCY RATE IN COVID HOSPITALS AND COVID CARE CENTERS (CCC)

DISTRICT	COVID HOSPITAL		COVID CARE CENTERS		HOME ISOLATION Total cases till date
	Total admissions till date	Bed occupancy Rate	Total admissions till date	Current Occupancy Rate	
Dimapur	583	26 %	1,252	67 %	232
Kiphire	1	0 %	11	0 %	0
Kohima	254	9 %	1,660	21 %	249
Longleng	0	0 %	7	10 %	0
Mokokchung	1	0 %	58	42 %	0
Mon	6	1 %	374	60 %	13
Peren	43	8 %	250	38 %	3
Phek	31	4 %	7	12 %	0
Tuensang	40	3 %	111	131 %	1
Wokha	5	1 %	26	0 %	0
Zunheboto	81	6 %	104	0 %	0
<b>TOTAL</b>	<b>1,045</b>	<b>7 %</b>	<b>3,860</b>	<b>35 %</b>	<b>498</b>

Bed occupancy rate is calculated with ALOS of 14 days. Military and paramilitary facilities are not included

**7.2% of total confirmed cases have been put in home isolation till date.**

# ACTIVE CASES

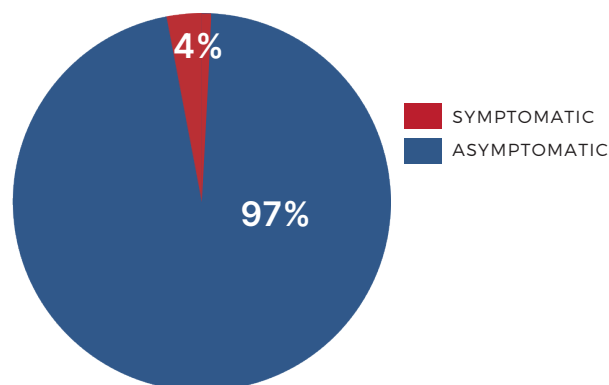
## DISTRIBUTION OF CURRENT ACTIVE CASES IN FACILITIES & HOME

	Covid Hospital	Covid Care Center	Home Isolation	Military Establishments	Total
Total	49	672	154	334	1209
%	4%	56%	13%	28%	100%

## CLINICAL STATUS OF ACTIVE CASES

Symptomatic cases have increased to 4% (from 3 % last week).

2 critical cases are currently on ventilator.



## DISTRICT DISTRIBUTION OF ACTIVE CASES AND SAMPLING

(as on 09 October 2020)

District	Active Cases	Samples Tested	Tests per thousand population	Positivity Rate
Dimapur	799	34,162	87	10.7 %
Kiphire	0	717	9	2.1 %
Kohima	279	24,009	86	9.0 %
Longleng	2	962	18	1.2 %
Mokokchung	12	2,908	15	1.9 %
Mon	82	9,483	37	4.2 %
Peren	12	4,230	43	7.5 %
Phek	1	2,266	13	1.6 %
Tuensang	22	3,173	16	3.4 %
Wokha	0	1,125	7	2.3 %
Zunheboto	0	1,742	12	7.1 %
NAGALAND	1,209	84,777	42	8.1 %

## How do we stay safe during the pandemic?

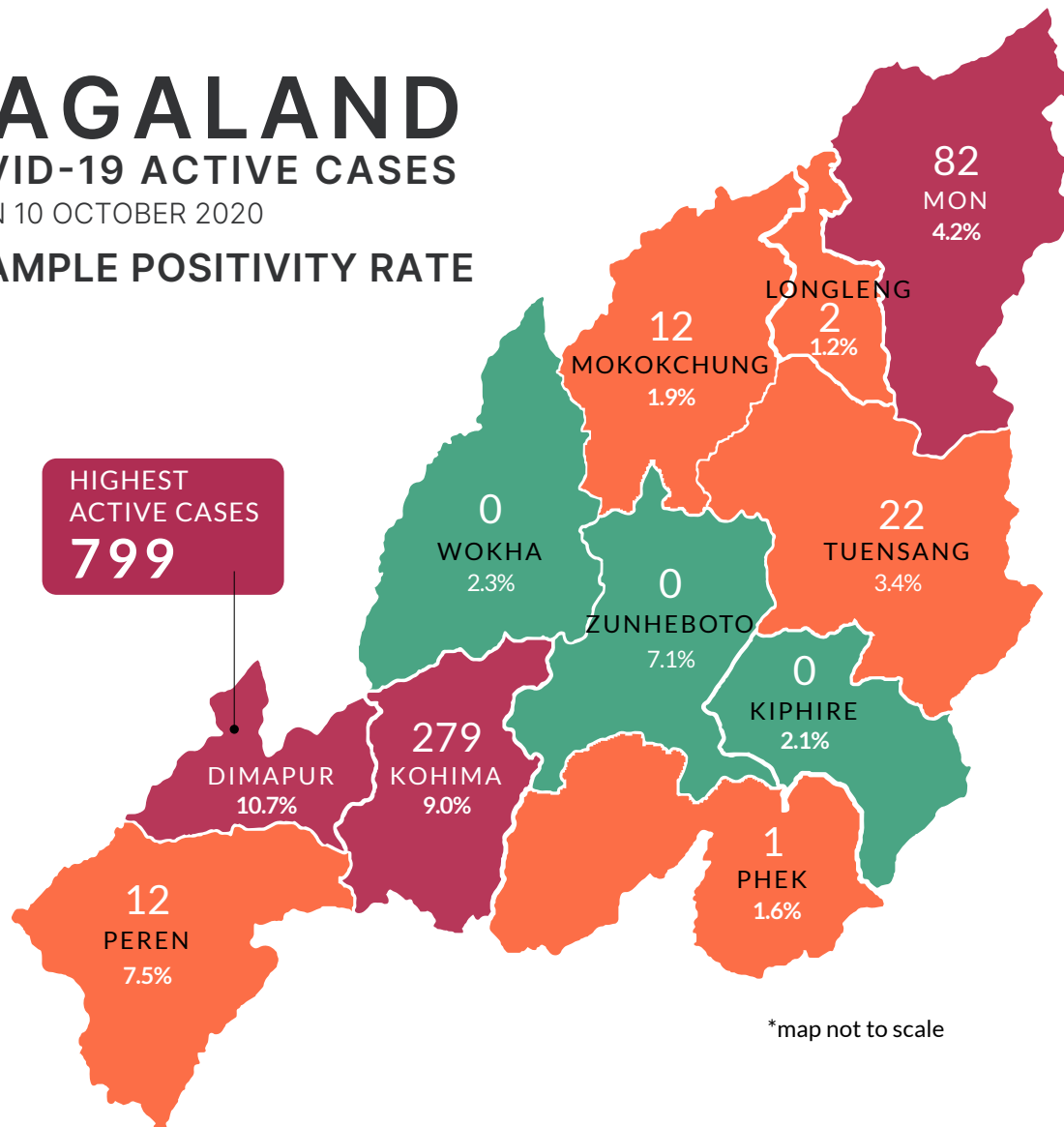
The main mode of transmission is from Person to person. Everyone should strictly follow the 3 W's (Wash Hands, Watch Distance and Wear Mask) and AVOID the 3 C's (Crowded places, Close Contact Setting and Confined settings). This is the only proven preventive measure till date.

# NAGALAND

## COVID-19 ACTIVE CASES

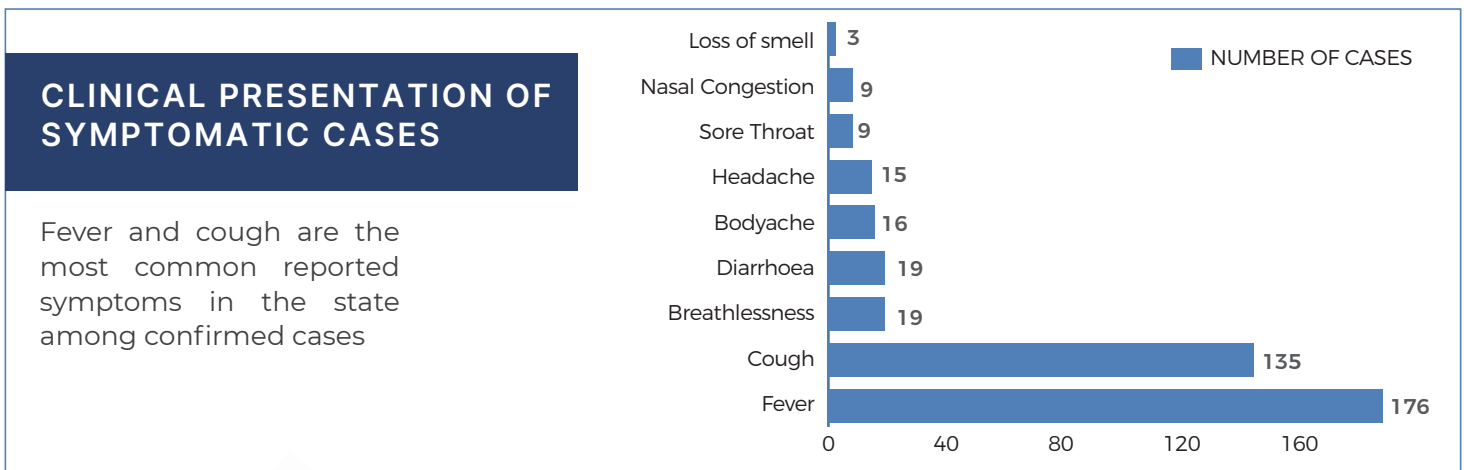
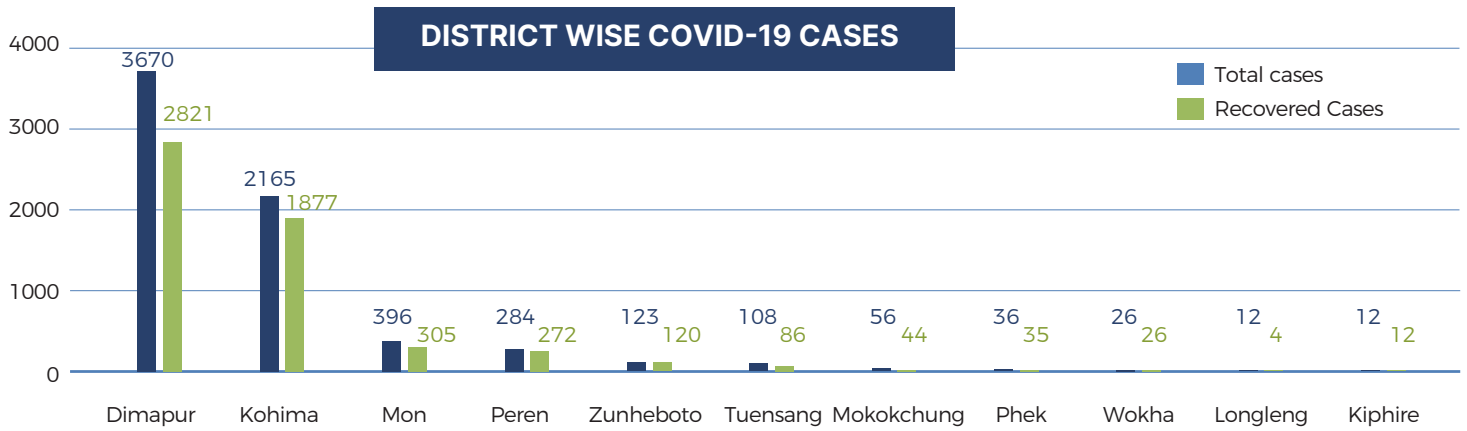
AS ON 10 OCTOBER 2020

## & SAMPLE POSITIVITY RATE

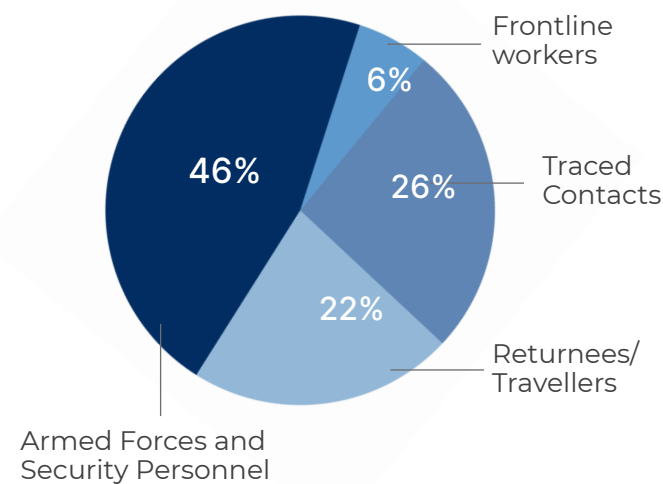


CURRENT ACTIVE CASES **1209**

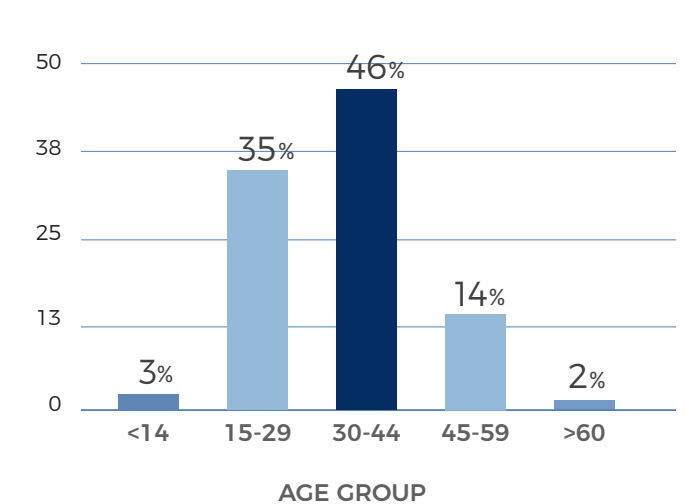
# CATEGORIZATION OF TOTAL CONFIRMED CASES



### GENERAL CATEGORIZATION OF CASES



### AGE DISTRIBUTION OF COVID-19 CASES



### DESCRIPTIVE EPIDEMIOLOGY

Median Age	32 years
Range (Age)	1 month - 93 years
Cases with comorbidity	0.31 % (19/6318)

Most common category of confirmed cases	Armed forces/security personnel 48%
Cases with Pregnancy	1% (13/1161)



# CONTACT TRACING

A total of 25,191 contacts have been traced by surveillance teams including 10,144 primary contacts.

## DISTRIBUTION OF POSITIVE TRACED CONTACTS BY AGE-GROUP & OCCUPATION

Among the traced contacts, **the most affected age group is 31-40 years** at 27% (481/1809) followed by 21-30 years at 26% (478/1809).

**Majority of the traced contacts were government employees** 29% (527/1809) **and household contacts** 28% (504/1809). Students constitutes 16% (291/1809).

Positivity rate among office goers and household contacts continue to stay stable or increase.

The hypothesis here is that office goers/ self-employed are bringing infection home to their dear ones.

**Recent spread in a convent, prison and church is concerning. All these point towards transmission in closed environments.**

To remedy this, we should restrict the office attendance to 50% and mass gatherings/ events with strict adherence to 3Ws till we can come out safely.

Age Group	Cases	Percentage
0.1 - 10 yrs	139	7
11 - 20 yrs	215	12
21 - 30 yrs	478	26
31 - 40 yrs	481	27
41 - 50 yrs	273	15
51 - 60 yrs	155	9
61 - 93 yrs	68	4
<b>TOTAL</b>	<b>1809</b>	<b>100%</b>

Occupation	Cases	Percentage
Govt. Employees	527	29
Household contacts	504	28
Students	291	16
Self Employed	269	15
Unemployed	58	3
Prison Contacts	88	5
Convent Contacts	19	1
Church Contacts	10	0.5
Migrant Workers	43	2
<b>TOTAL</b>	<b>1809</b>	<b>100%</b>

# SAFETY GUIDE DURING THE PANDEMIC

KEEP YOURSELF AND YOUR FAMILY SAFE DURING THIS PANDEMIC.

Till a vaccine is available, this guide is your best defence against the COVID-19 virus.

## KNOW HOW THE VIRUS SPREADS!

THE VIRUS SPREADS MAINLY FROM PERSON TO PERSON:

- **Between people who are in close contact** within 6 feet (2 arm's length approximately)
- Virus spread **through respiratory droplets** produced when an infected person coughs, sneezes, talks, sings etc. These droplets land on the mouth, nose, face of persons nearby and may be inhaled into the lungs causing disease.
- **Our hands are prone to touch infected people and infected surfaces.** When we touch our face (mouth, nose, eyes) the virus can be inhaled into our lungs.
- **Even asymptomatic patients spread the virus** if standard precautions are NOT taken.

LET US LEARN TO LIVE WITH COVID-19 SAFELY.

LET US BE RESPONSIBLE CITIZENS.

## THE GOLDEN RULE

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Assume **EVERYONE** is a **POTENTIAL CARRIER** of the virus (including you).

All **TRAVELLERS** and **CONTACTS UNDER QUARANTINE** should strictly observe the quarantine norms for everyone's safety.

# FOLLOW THE 3W's

	WHY	WHEN	HOW
WASH HANDS	<p>Washing hands with SOAP and WATER is the best way to get rid of germs/virus.</p> <p>Apart from COVID-19, many diseases like diarrhoea, other respiratory illness can be prevented.</p> <p>Soap destroys the outer fatty layer of the virus and kills it.</p> <p>An alcohol-based sanitizer can be used in situations where hand washing is not feasible.</p>	<ul style="list-style-type: none"> <li>▪ Before/after food</li> <li>▪ Before/after preparing food</li> <li>▪ Before/after caring for patient</li> <li>▪ After using the toilet</li> <li>▪ After returning home from outside</li> <li>▪ Before/after putting on mask</li> <li>▪ After touching pets/ animals</li> <li>▪ After touching garbage</li> <li>▪ Anytime hands are dirty</li> <li>▪ Before/after marketing</li> </ul>	<p>Wash hands with soap and water for at least 20-40 seconds and dry with a clean tissue or air dry.</p> <p>Place hand washing stations with running water at points of entry to schools, offices, markets, churches, homes etc</p> <p>Always carry an alcohol based hand sanitizer.</p>
WEAR MASK	<p>The main mode of transmission is through droplets from an infected person. A mask will prevent infected droplets to spread to others during talking, coughing, sneezing etc.</p> <p>A mask protects you and people around you.</p> <p>Wearing mask is a social responsibility.</p>	<ul style="list-style-type: none"> <li>▪ Every time you're in a public place with other people around (day or night)</li> <li>▪ In any close contact settings (market places, offices, trainings, schools, churches, banks, unavoidable social gatherings etc.)</li> <li>▪ Wear at home if anyone is sick in the household, or in quarantine /isolation.</li> </ul>	<p>Mask should be worn correctly and should be clean</p> <p>Do not remove mask while talking, coughing, sneezing etc.</p> <p>Mask is effective only when used in combination with handwashing or hand sanitizers</p>
WATCH DISTANCE	<p>If a person is infected and you are within 6 feet distance, droplets from the infected person may get you infected.</p> <p>The main mode of transmission is from person to person through droplets.</p>	<p>Anytime you are outside your own household.</p>	<p>Keep 6 feet distance or two arms length distance away from others.</p>

## IMPORTANT!

ANYONE WITH COVID-19 LIKE SYMPTOMS LIKE FEVER, COUGH AND DIFFICULTY IN BREATHING SHOULD ISOLATE THEMSELVES IMMEDIATELY AND CONTACT THE STATE HELPLINE 1800-345-0019.

# AVOID THE 3C's

## CROWDED PLACES

### WHY

The chances of someone carrying the virus in a crowd is much higher and it is difficult to maintain physical distancing in such settings.

Most cases are asymptomatic carriers and transmit COVID-19 unaware.

**Anyone in a crowd is a potential carrier of the virus.**

### HOW

**Avoid big crowded markets.** Buy essential items from smaller colony markets/ standalone shops.

Postpone weddings, birthday **celebrations, social events** if possible, for the coming years. If unavoidable, limit number of guests as per sop with strict safety measures

**Funerals** should be observed with limited visitors and strict safety measures. **Ensure there is no mixture of people from different places.** Staggering of visitors can be planned.

Young people should strictly avoid **parties and gatherings** (indoors or outdoors) as these are super spreader events.

## CLOSE CONTACT SETTINGS

### WHY

If you're **within 6 feet of an infected person for 15 minutes** or more you are a high-risk contact.

The more the people, the higher are the chances of infection.

### HOW

Maintain 6 feet distance and use mask in any close contact setting

Trainings/meetings should be held on digital platforms. If physical gatherings are unavoidable, strictly follow the 3Ws. Group photo sessions after trainings without social distancing and masks should be avoided strictly.

Safety measures should not be compromised among circle of friends, relatives or family.

## CONFINED OR ENCLOSED SPACES

### WHY

**Closed spaces/ indoors with poor ventilation** are the main places where infections happen. In Nagaland, offices and same household (both confined spaces) are where maximum infections have taken place.

Virus linger longer in the air in closed spaces. A study in Japan found that **the spread of COVID-19 is 20 times more in a closed environment than open spaces.**

Closed spaces like bars and clubs with poor ventilation and where people are talking, singing and shouting without masks are ideal conditions for virus spread. In such conditions, virus remains suspended in the air for longer periods of time and beyond 6 feet- similar to airborne transmission.

### HOW

Keep windows, doors open for natural ventilation when possible at offices & other enclosed spaces

Wear masks at all times

Physical distancing should be ensured in workplaces.

Stay home if you have fever, cold, runny nose/ any covid-19 like symptoms.

Handwashing points / hand sanitizers should be available for frequent use.

SOP for High Risk settings (Directorate of Health & Family Welfare, Nagaland) should be enforced strictly.

If you develop any signs and symptoms of  
**COUGH, FEVER OR DIFFICULTY IN BREATHING**

Call the State Health Helpline Number immediately: **1800-345-0019**

**THE PUBLIC IS THE FIRST LINE OF DEFENSE!  
ADHERE TO GOVERNMENT ADVISORIES AND STAY UPDATED.**

## AVOID the 3 C's



**CROWDED PLACES**



**CLOSE-CONTACT  
SETTINGS**



**CONFINED OR  
ENCLOSED SPACES**

## FOLLOW the 3 W's



**WEAR MASK**




**WASH HANDS**




**WATCH DISTANCE**


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 [www.nagahealth.nagaland.gov.in](http://www.nagahealth.nagaland.gov.in)

 @MyGovNagaland

 [www.covid19.nagaland.gov.in](http://www.covid19.nagaland.gov.in)

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 [www.nsdma.nagaland.gov.in](http://www.nsdma.nagaland.gov.in)

 Coronaga



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