

ZAMBIA SITUATION REPORT NO. 112

Disease Outbreak: COVID-19

Response start date: 30th January, 2020

Outbreak Declared: 18th March, 2020

Report date: Saturday 16th January 2021

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1. SITUATION UPDATE *This week (11th - 17th Jan)* ↑ **Cases 8,346** ↓ **Deaths 68** ↑ **Recoveries 4,508**

1.1 CURRENT CASE NUMBERS (as of 09:00 hours CAT)

- In the past 24 hrs, there were **1,796 new confirmed cases, 10 deaths and 1,001 recoveries**.
- Cumulative number of confirmed COVID-19 cases recorded to date is **36,074 with 537 deaths (CFR=1.49%) and 25,106 recoveries (69.60% recovered)**.
- Of the 537 total deaths among the confirmed cases, **203 have been classified as COVID-19 deaths (CFR=0.56%) and 331 as associated deaths; 3 deaths are pending classification**. See Annex 1 for definitions
- There are currently **10,431 active cases**: of these, 312 are hospitalised (with 202 on Oxygen therapy and 15 in critical condition); 10,119 patients are under community management.

Global Numbers

(Source: JHU)

↑ **93,993,064 Confirmed**

↓ **2,012,048 Deaths**

↑ **51,807,916 Recoveries**

Africa Numbers

(Source: Africa CDC)

↑ **3,207,639 Confirmed**

↓ **77,684 Deaths**

↑ **2,617,110 Recoveries**

2. EPIDEMIOLOGICAL HIGHLIGHTS (By Epi-week)

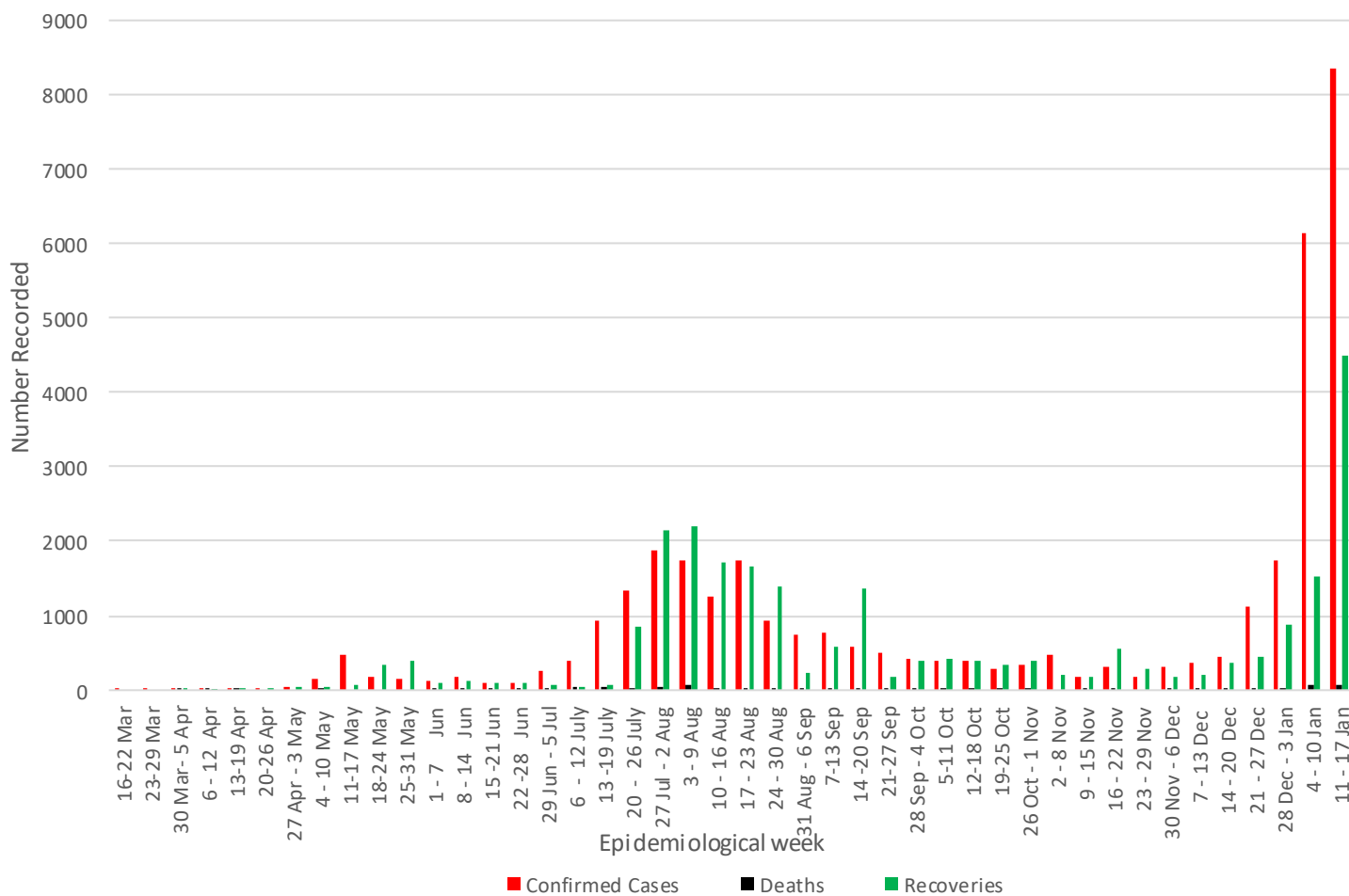


Figure 1: Weekly COVID-19 confirmed cases (N=36,074), deaths (N=537) and recoveries (N=25,106) as of 16th January 2021

- **Age distribution:** Below is a graph showing the age distribution of confirmed cases by month, between March and December 2020

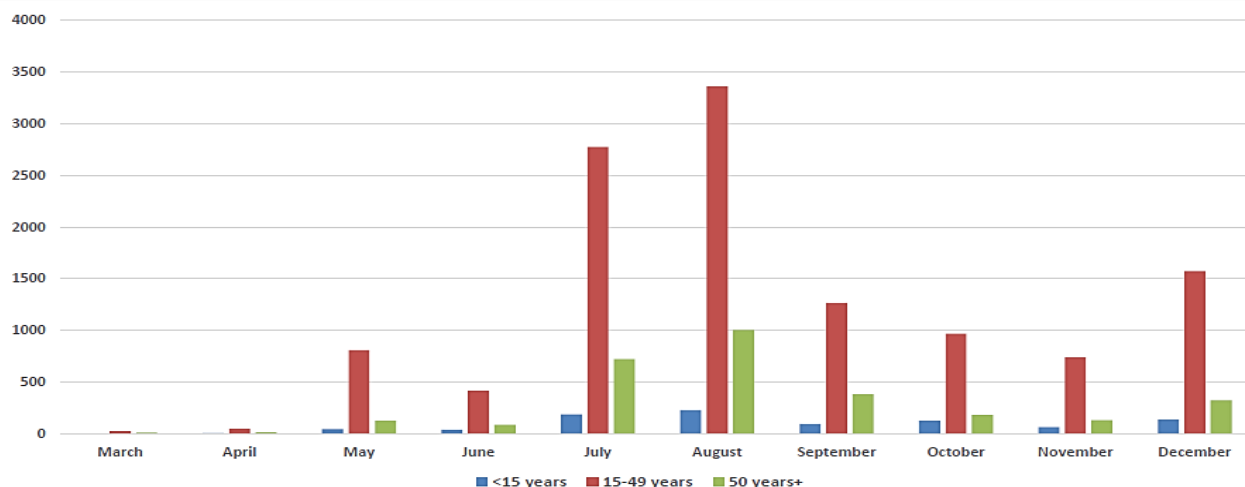


Figure 4: Age distribution of confirmed cases (March – December, 2020)

3. ACTIONS TO DATE

3.1 CO-ORDINATION

➤ Regional/Continental level:

- Zambia hosts the Southern Africa Regional Collaborating Centre of the Africa CDC and has been coordinating the response at regional level. To date, **Southern Africa has recorded 1,493,136 confirmed cases; 39,416 deaths; and 1,192,158 recoveries.** Zambia continues to participate in AU meetings to ensure continued regional and continental trade and strategies to stop transmission of COVID-19.

➤ National Level:

- The government continues to enforce the measures and interventions to control the spread of COVID-19 countrywide as outlined in the Statutory instruments **SI21 and SI22 of 2020 on COVID-19 and presidential directives** issued in March 2020.
- A **COVID-19 contingency plan** outlining the country's COVID-19 preparedness and response activities was finalised and continues to be regularly updated as the outbreak evolves.
- An eight pronged strategy has been implemented in response to the outbreak: **Surveillance and case finding; Case management; Infection prevention and control; Risk Technical level:** The ZNPPI continues to

BACKGROUND

The WHO was alerted of an increase in the number of pneumonia cases of unknown cause detected in Wuhan City, Hubei Province, China. The disease now called Coronavirus Disease 2019 (COVID-19) is caused by a new coronavirus named SARS-CoV-2. The WHO declared the outbreak a PHEIC on 30th January and further declared COVID-19 a pandemic on 12th March. Zambia recorded its first two cases of COVID-19 on 18th March 2020. The first 28 cases in Zambia all had a history of travel to Europe or Asia. Three weeks into the outbreak, cases were noted among people without history of travel but in contact with confirmed cases. By mid-June 2020, cases had been reported in all ten provinces, with Western province being the last to confirm cases of COVID-19. Generalised local person-person transmission is now established throughout the country.

provide leadership and partner collaboration on the response through the Public Health Emergency Operation Centre (PHEOC).

- Technical co-ordinating meetings are being held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNPFI
- The Incident Management System (IMS) continues to meet at ZNPFI (with a Zoom link provided to ensure social distancing) on Tuesdays and Thursdays. The IMS structure is available at **Annex 2**

3.2 SURVEILLANCE

- **Newly reported COVID-19 cases:** surveillance continues to identify new cases around the country. See table 1 below for a breakdown of statistics reported within the last 24hrs.

Table 1: Breakdown of confirmed COVID-19 cases reported on 16th January 2021

PROVINCE	NUMBERS BY DISTRICT		PROVINCIAL RECOVERIES
	CASES	DEATHS	
CENTRAL	Kapiri Mposhi 556, Kabwe 51, Chibombo 17, Chisamba 6, Mkushi 2, Mumbwa 1 [TOTAL: 633]	0	166
COPPERBELT	Ndola 141, Chingola 29, Masaiti 14, Kalulushi 12, Luanshya 12, Chililabombwe 10, Kitwe 4, [TOTAL: 222]	3 (Facility)	0
EASTERN	Chipata 38, Katete 7, Nyimba 7, Petauke 6, Sinda 4, Mambwe 2 [TOTAL: 64]	0	30
LUAPULA	Mansa 33, Mwense 10, Nchelenge 10, Chipili 4, Kawambwa 1, Mwansabombwe 1 [TOTAL: 59]	0	32
LUSAKA	Lusaka 339 [TOTAL: 339]	7 (6 Facility, 1 BID)	348
MUCHINGA	Mpika 16, Chama 9, Nakonde 6, Isoka 2, Mafinga 1 [TOTAL: 34]	0	5
NORTHERN	Kasama 21, Luwingu 5, Mbala 5, Chilubi 4, Mporokoso 3 [TOTAL: 38]	0	5
NORTH-WESTERN	Solwezi 162, Kasempa 41, Chavuma 6, Mufumbwe 4 [TOTAL: 213]	0	75
SOUTHERN	Livingstone 80, Chikankata 53, Mazabuka 20, Kalomo 12, Siavonga 4, Kazungula 1, Pemba 1 [TOTAL: 171]	0	333
WESTERN	Mongu 11, Kalabo 4, Mwandia 3, Sesheke 3, Luampa 1, Sioma 1 [TOTAL: 23]	0	7
TOTAL	1,796 New Cases	10 Deaths	1,001 Recoveries

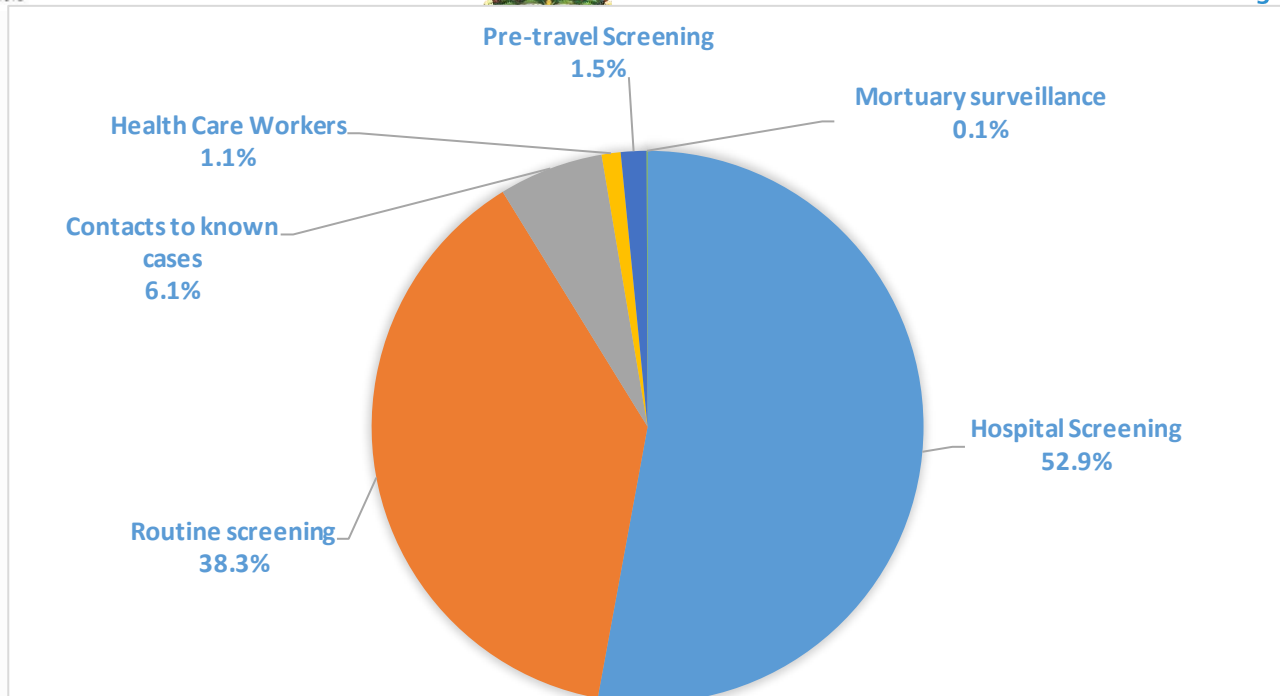


Figure 5: Categorisation of confirmed cases reported 16th January 2021

3.4 CASE MANAGEMENT

- There are currently 312 COVID-19 patients hospitalised in facilities around the country; of these, 202 are on Oxygen therapy and 15 are in critical condition
- A total of ten deaths were recorded in the last 24hrs: of these, nine (9) were facility deaths and 1 BID (Lusaka). The breakdown of the facility deaths is provided in Table 2 below.

Table 2: National distribution of hospitalised COVID-19 patients by province – 16th January 2021

PROVINCE	FACILITY	TOTAL # OF PATIENTS	# OF PATIENTS ON OXYGEN	# OF CRITICAL PATIENTS	DEATHS
Central	Kabwe General Hospital	6	1	0	0
Copperbelt	Ndola Teaching Hospital	24	18	2	3
	Kitwe Teaching Hospital	9	4	0	
Eastern	Chipata General Hospital	14	4	0	0
	Mambwe	2	0	0	0
	Petauke	2	1	0	0
Luapula	Mansa General Hospital	6	4	0	0
	Milenge	0	0	0	0
Lusaka	Levy Mwanawasa	115	96	9	5
	UTH	46	39	0	1
	Rufunsa	5	0	0	0
	Chongwe	2	0	0	0
	Chirundu	4	1	0	0
	Kafue	1	0	0	0

PROVINCE	FACILITY	TOTAL # OF PATIENTS	# OF PATIENTS ON OXYGEN	# OF CRITICAL PATIENTS	DEATHS
Muchinga	Chinsali General	1	1	0	0
Northern	Mbala	1	0	0	0
	Kasama	2	1	0	0
North-western	Kalumbila	10	3	0	0
	Chavuma	3	0	0	0
	Solwezi	11	2	0	0
Southern	Livingstone	12	8	0	0
	Choma	3	1	0	0
	Monze	3	3	0	0
	Maamba	0	0	0	0
	Macha	2	1	0	0
	Siaavonga	2	2	0	0
	Kalomo	2	1	0	0
	Namwala	2	0	0	0
	Mazabuka	4	1	0	0
	Chikankata	1	0	0	0
	Zimba	1	1	0	0
Western	Mongu	10	6	3	0
	Kaoma	5	2	0	0
	Yeta	1	1	1	0
TOTAL		312	202	15	9

- Below is the community management model and admission/discharge criteria for persons who test positive for COVID-19:

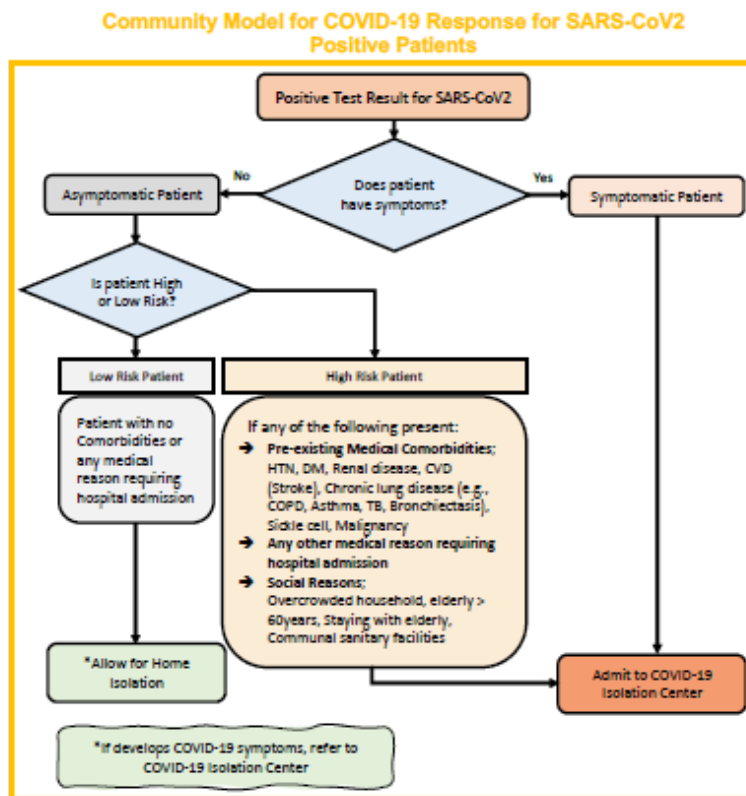


Figure 6: Community management model for COVID-19 patients

SETTING	Hospital/Facility Care	Patients with Medical Conditions requiring continued Care beyond COVID-19 Recovery	Home Care
ADMISSION	<ul style="list-style-type: none"> Any symptoms for COVID-19 Asymptomatic High-Risk patients Presence of other Medical conditions Where Home Isolation is not feasible 	<ul style="list-style-type: none"> As medically indicated 	<ul style="list-style-type: none"> Asymptomatic No comorbidity If home Isolation feasible
DISCHARGE / DEISOLATION	<ul style="list-style-type: none"> Asymptomatic for at least 3 days plus 1 negative PCR at day 7 or beyond AND 14 days since first Positive PCR 	<ul style="list-style-type: none"> Two negative PCR Tests at least 24 hours apart 	<ul style="list-style-type: none"> 1 negative PCR at day 7 or beyond AND 14 days since first Positive PCR

Figure 7: Admission and Discharge criteria for COVID-19 patients

3.5 LABORATORY AND SAMPLE MANAGEMENT

- Zambia is utilising a number of testing platforms to run COVID-19 diagnostics, including real-time Polymerase Chain Reaction (RT-PCR), Gene Xpert, Hologic Panther, RDT, and Roche Cobas 6800. Laboratory facilities are available in all 10 provinces. Table 2 lists the currently **designated laboratories**

Table 3: National Laboratory Diagnostic Capacity for COVID-19 by province

PROVINCE	INSTITUTION	TESTING PLATFORM(S)
Central	Kabwe General Hospital	Gene Xpert
	TDRS, Ndola	RT-PCR
Copperbelt	Arthur Davison Children's Hospital	Cobas 6800
Eastern	Chipata General Hospital	Gene Xpert
Luapula	Mansa General Hospital	Gene Xpert
	ZNS Luamfumu	Gene Xpert
Lusaka	UTH, Levy (Virology, ACOE, PCOE), Lusaka	RT-PCR; Gene Xpert; Cobas 6800; Panther; RDT
	UNZA – SVM, Lusaka	RT-PCR
	CIDRZ, Lusaka	RT-PCR
	CHAZ, Lusaka	RT PCR
	Lancet	RT PCR
	Mtendere Mission Hospital, Chirundu	Gene Xpert
	MedLand Hospital, Lusaka	RT PCR
	Victoria Hospital	RT PCR
	Zambia Air Force Hospital, Lusaka	Gene Xpert
	ZNPHRL, Lusaka	RT PCR
Muchinga	Chinsali General Hospital	Gene Xpert & PCR
Northern	Kasama General Hospital	Gene Xpert
North-western	Solwezi General Hospital, Solwezi	Panther
	Kansanshi Mine Hospital (Mary Begg), Solwezi	Gene Xpert
Southern	Macha Research Trust	RT-PCR
	Livingstone Teaching Hospital	Gene Xpert
Western	Lewanika General Hospital	Gene Xpert

- In the past week (4th to 10th January), **74,169 tests** were conducted (compared to **60,242 tests** the previous week), out of which **8.29%** tested positive for SARS-CoV-2 (compared to 2.90% the previous week).
- In the last 24hrs, **9,577 tests** were conducted, out of which **1,796 samples** tested positive for SARS-CoV-2 (18.75% positive).
- To date, a total of **758,819 tests** have been conducted, with a cumulative **36,074 confirmed positive (4.75% positivity rate)** for SARS-CoV-2. The testing coverage is **44,636 per 1,000,000 population**

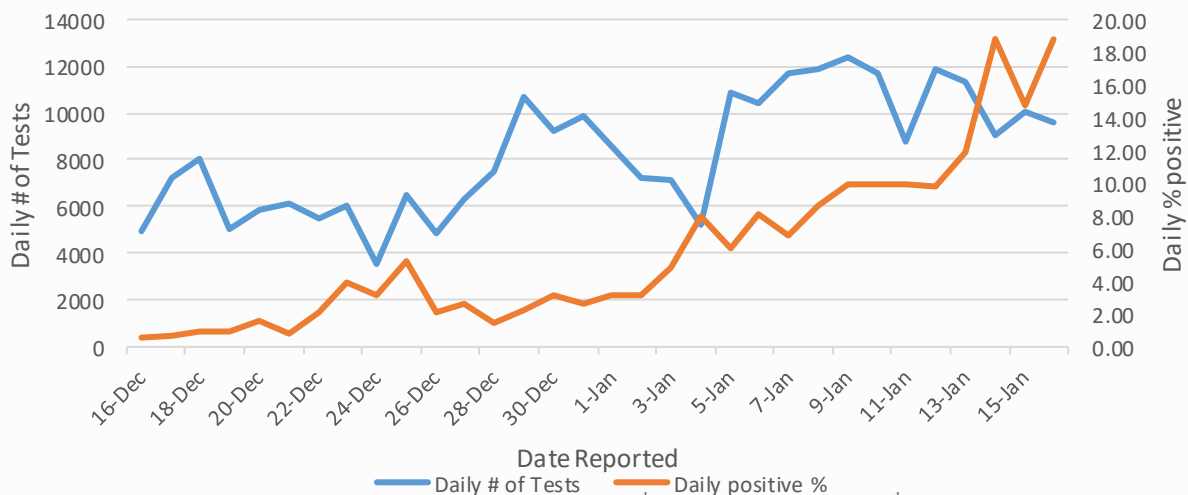


Figure 6: Daily number of tests vs % of positive results recorded (15th December 2020 to 16th January, 2021

ANNEX 1: CORONAVIRUS DISEASE 2019 (COVID-19) CASE DEFINITIONS

1. Suspect case:

A. Patient with acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND with no other aetiology that fully explains the clinical presentation AND a history of travel to or residence in a country/area or territory reporting local transmission of COVID-19 during the 14 days prior to symptom onset,

OR

B. Patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case in the last 14 days prior to symptom onset,

OR

C. Patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND requiring hospitalization AND with no other aetiology that fully explains the clinical presentation

2. Probable case: A suspect case for whom testing for COVID-19 is inconclusive or is tested positive using a pan-coronavirus assay and without laboratory evidence of other respiratory pathogens.

3. Confirmed case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

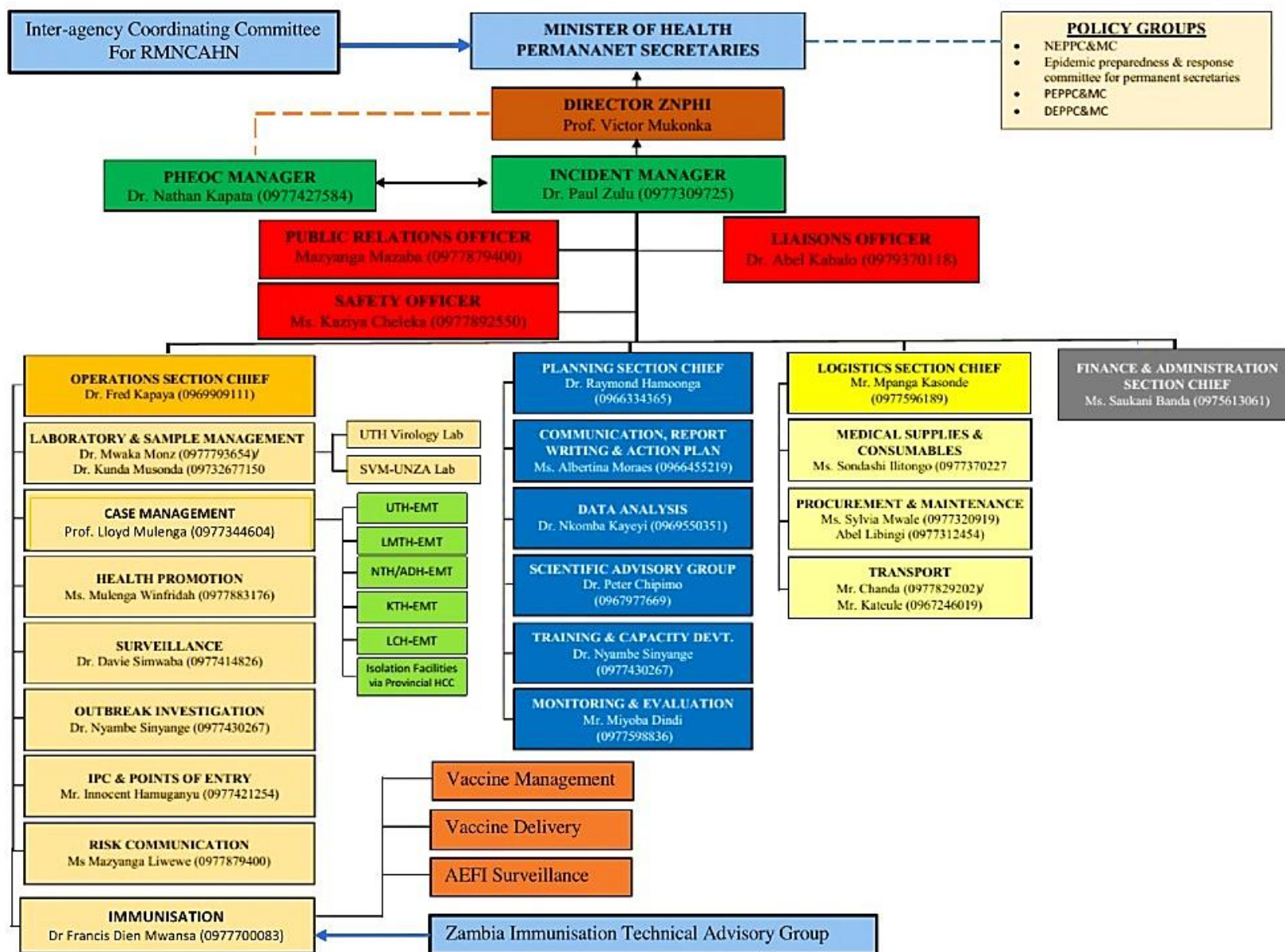
4. COVID-19 Death: COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery between the illness and death.

5. COVID-19 Associated Death: a death of an individual in whom COVID-19 has been detected but it is not the primary cause of death

6. COVID-19 Unclassified Death: a death of an individual in whom COVID-19 has been detected but the cause of death is yet to be classified as either a COVID-19 death or associated death following expert review

7. Contact: a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case: a. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes; b. Direct physical contact with a probable or confirmed case; c. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment; OR d. Other situations as indicated by local risk assessments.

ANNEX 2: NATIONAL LEVEL INCIDENT MANAGEMENT SYSTEM FOR THE COVID-19 PREPAREDNESS RESPONSE



ANNEX 3: LIST OF DESIGNATED ISOLATION FACILITIES FOR THE COVID-19 OUTBREAK RESPONSE

PROVINCE	DISTRICT	ISOLATION FACILITY
Eastern	Chipata	Walera HP and Chipata District Hospital
	Chadiza	Sadzu RHC and Chilenga HP
	Lundazi	Lundazi New Hospital Male Ward
	Mambwe	Agriculture Field Training Centre and ADRA shade in Nsefu
	Petauke	Zuze Health Post
	Katete	Katete Livestock Market
	Nyimba	Chininkhu Health Post
	Sinda	Ukasimbe Health Post and Chinzule HP
	Vubwi	Chigwe Health Post
	Kasenengwa	Kanzutu Health Post
	Lumezi	Lumezi Hospital, Mwasemphangwe Zonal and Mwanya RHC
	Chasefu	Kanyanga Mission Hospital
	Chipangali	Mkanda RHC and Chinunda RHC
	Lusangazi	Ukwimi Trades
Southern	Livingstone	Mosi Oa Tunya Health centre
	Zimba	Zimba Basic school
	Siavonga	Kabbila Health Post
	Pemba	Pemba Main Clinic
	Kalomo	Mawaya Clinic
	Monze	Mulumbwa Health Post
	Mazabuka	Research clinic
	Chikankata	Nansenga Rural Health centre
	Namwala	Nchole Health Post
	Choma	Njase Clinic
	Gweembe	Munyumbwe HAHC
	Kazungula	Kazungula hospital admin block
	Sinazongwe	Sinazongwe rural health centre
Lusaka	Chilanga	Tubalange Mini Hospital, Mount Makulu Health Post

	Chirundu	Lumbembe Clinic
	Kafue	Shikoswe Clinic
	Luangwa	Kavalamanja RHC, Chitpoe RHC, Kasinsa RHC, Mandombe RHC
	Lusaka	Levy Mwanawasa, UTH, Tubalange Mini Hospital, Chawama SD, Matero SD, Chilenje SD, Kanyama SD, Chipata SD, Victoria Hospital, Bauleni
	Rufunsa	Rufunsa RHC, Chinyunyu RHC
Muchinga	Isoka	Lualizi and Kafwimbi RHC
	Lavushimanda	Red Rhino school, Muwele Market .
	Nakonde	Nakonde Hospital and Nakonde Urban Clinic.
	Chama	FTC
	Shiwang'andu	Lwanya RHC
	Mpika	Chibansa RHC
	Kanchibiya	Kopa Primary school, LuchembeKanchibiya resettlement scheme, Chalabesa RHC.
	Chinsali	Nambuluma RHC
	Mafinga	Mulekatembo
	Western	Senanga
Shangombo		Shangombo Secondary School
		Shangombo RHC
Kaoma		Kaoma Trades
		Kaoma Youth Resource Centre
Luampa		Kahumbu Primary School
Lukulu		Lukulu Old Hospital

	Mitete	Lukulu Old Hospital
	Kalabo	Wenela RHC
	Nalolo	Muoyo RHC
	Sioma	Old Nangwesh Refugee Camp
	Mulobezi	Mulobezi HAHC
	Mwandi	Situlu Health Post
	Sesheke	Mulimambango
	Sikongo	Sikongo RHC
	Limulunga	Nan'oko Health Post
	Mongu	Mongu D Hospital, Mweeke HP
	Nkeyema	Nkeyema Zonal Health Centre
Central	Chitambo	Muchinka RHC
	Mkushi	Kasalamkanga RHC
	Serenje	Serenje Boma School
	Iuano	Old Mkushi Health Centre
	Kapiri	Tazara dry port
	Kabwe	Old Mukobeko clinic
	Chibombo	Twalumba RHC
	Chisamba	Malombe RHC
	Shibuyunji	Sichobo Rural Health Centre
	Mumbwa	Mumbwa Urban Clinic
	Itezhi tezhi	Itezhi tezhi Basic School/Uphill Scholl and and Itezhi Tezhi Boarding School
	Ngabwe	Iwonde primary school

Copperbelt	Chililabombwe	Council Hall
	Chingola	Kalilo Health Centre
	Kalulushi	Kalulushi Urban Health Centre
	Kitwe	Gamerton Clinic
	Luanshya	Chibolya Clinic
	Lufwanyama	Shimukunami Rural Health Centre
	Masaiti	Masaiti District Hospital
	Mpongwe	Bwembelelo Health Post
	Mufulira	Mutundu RHC
	Ndola	Itawa clinic
	Northern	Chilubi
Kaputa		Kaputa RHC Kalaba RHC Kapepula HP
Kasama		Lukupura Rural Centre
Lunte		Chitoshi RHC Mukupa Koama RHC Mulenga Mapesa HP
Lupososhi		Chungu RHC Nsombo RHC
Luwingu		Ipusikilo RHC
Mbala		Chulungoma Urban Clinic Kaluluzi Health Post
Mporokoso		Township Clinic Chiwala RHC
Mpulungu		Mpulungu Urban Clinic
Mungwi		Mungwi Baptist HC, Kayambi RHC
Nsama		NsumbuRHC
Senga		Nsumbu RHC, Mwiluzi HP, Sumbi HP

