





Global Numbers (Source: JHU)

107,807,456 Confirmed

ZAMBIA COVID-19 SITUATION REPORT NO. 139

Disease Pandemic: COVID-19 Response start date: 30th January, 2020 Outbreak Declared: 18th March, 2020 **Report date**: Friday 12th February 2021 Prepared by: MOH/ZNPHI/WHO Correspondence:ims.covid@znphi.co.zm

This week (8th - 14th Feb) Tases 5,048 Deaths 78 Recoveries 6,467 1. SITUATION UPDATE

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

- In the past 24 hrs, we recorded 1,083 new confirmed cases, 17 deaths and 1,313 recoveries.
- Cumulative number of confirmed COVID-19 cases recorded to date is 67,681 with 931 deaths (CFR=1.38%) and 61,302 recoveries (90.58% recovered).
- Of the total deaths, 481 have been classified as COVID-19 deaths (CFR=0.70%) and 450 as associated deaths. See Annex 1 for definitions
- There are currently **5,448 active cases:** of these, 372 (7%) are hospitalised [with 263 (71%) on Oxygen therapy and 51 (14%) in critical condition]; 5,076 (93%) cases are under community management.

2.369.471 Deaths (2.2% CFR) **60,354,473** Recoveries **Africa Numbers** Source: Africa CDC) 3,715,923 Confirmed 97,299 Deaths (2.6% CFR) **3.256.433 Recoveries**

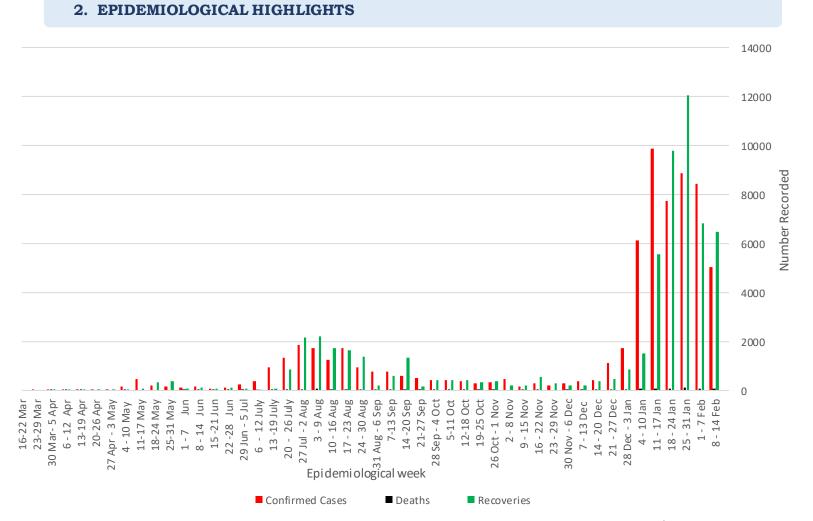


Figure 1: Weekly COVID-19 confirmed cases (N=67,681), deaths (N=931) and recoveries (N=61,302) as of 12^{th} February, 2021







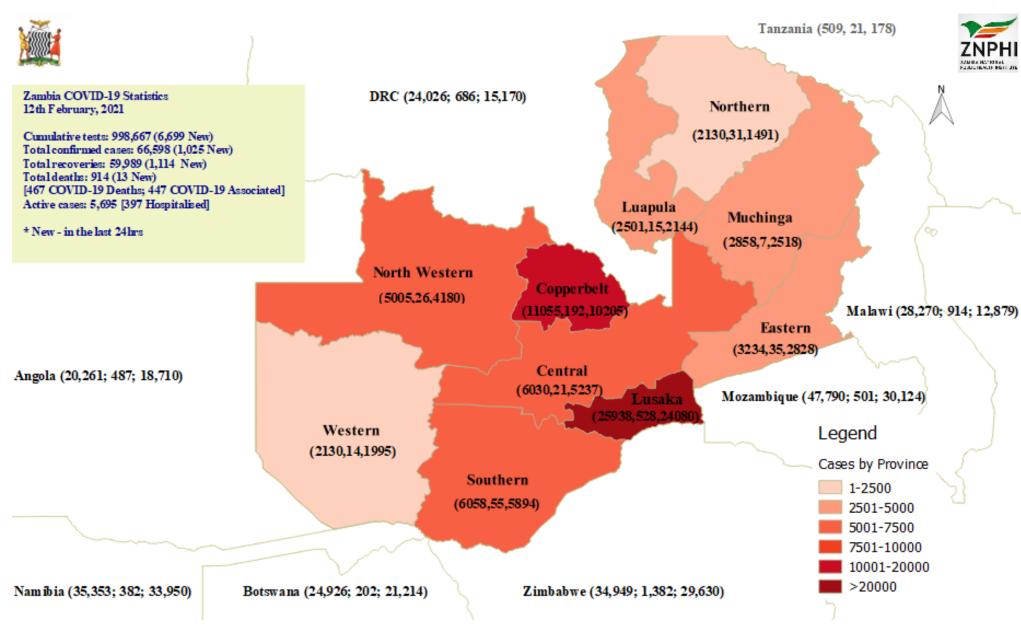


Figure 2: Map showing confirmed COVID-19 cases, deaths and recoveries (in brackets) by province and in neighbouring countries, 12th February, 2021







▶ **Age and sex distribution:** Below is the age and sex distribution of confirmed cases and deaths;

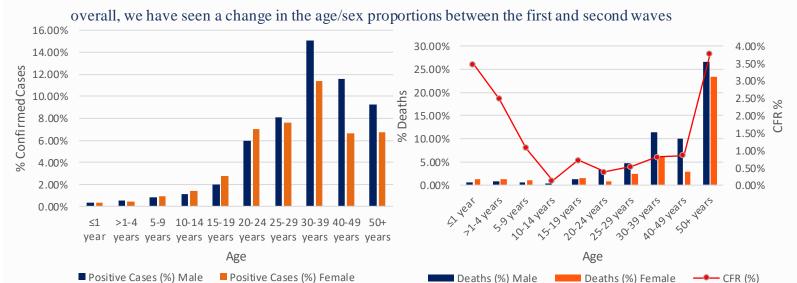


Figure 3: Age and sex distribution of (a) confirmed cases (b) deaths

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
1,769,262; confirmed cases; 52,995 deaths; and 1,599,408
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 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.
- A COVID-19 contingency plan outlining the country's
 COVID-19 preparedness and response activities is available and continues to be regularly updated as the

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.

outbreak evolves.







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

3.2 SURVEILLANCE

Active surveillance is ongoing in healthcare facilities, at community level, through contact tracing and at points of entry.

Table 1: Breakdown of confirmed COVID-19 cases reported in the last 24hrs

| PROVINCE | NUMBERS BY DISTRICT | | PROVINCIAL RECOVERIES |
|---------------|--|-----------|--------------------------|
| | CASES | DEATHS | |
| CENTRAL | Chibombo 11, Kabwe 93, Kapiri Mposhi 71, Mumbwa 1, Serenje 1 TOTAL: 177] | 0 | 271 |
| COPPERBELT | Chilila bombwe 11, Chingola 1, Kitwe 21, Luanshya 2, Mufulira 1, Ndola 53 [TOTAL: 89] | 9 | 230 |
| EASTERN | Chadiza 1, Chasefu 2, Chipangali 38, Chipata 11, Kasenengwa 4, Katete 2, Lumezi 3, Lundazi 1, Lusangazi 1, Mambwe 5, Petauke 3, Sinda 2, Vubwi 2 [TOTAL: 75] | 1 | 82 |
| LUAPULA | Chifunabuli 3, Samfya 3 [TOTAL: 6] | 0 | 135 |
| LUSAKA | Luangwa 1, Lusaka 358 [TOTAL: 359] | 4 | 208 |
| MUCHINGA | Chinsali 39, Mafinga 3, Mpika 18, Shiwan'gandu 4 [TOTAL: 64] | 1 | 80 |
| NORTHERN | Kaputa 4, Kasama 22, Lupososhi 1, Luwingu 10, Mbala 5, Mporokoso 34, Mpulungu 10, Mungwi 10, Nsama 1, Senga Hill 10 [TOTAL: 107] | 1 | 72 |
| NORTH-WESTERN | Chavuma 3, Ikelenge 2, Kalumbila 2, Kasempa 34, Manyinga 5, Mufumbwe 5, Mwinilunga 1, Solwezi 84 [TOTAL: 136] | 1 | 126 |
| SOUTHERN | Gwembe 1, Kalomo 10, Kazungula6, Mazabuka 26, Monze 2, Pemba 1 [TOTAL:46] | 0 | 83 |
| WESTERN | Kalabo 2, Kaoma 2, Limulunga 3, Mongu 9, Mwandi 1, Senanga 5, Sesheke 1, Shangombo 1 [TOTAL: 24] | 0 | 26 |
| TOTAL | 1,083 New Cases | 17 Deaths | 1,313 Recoveries |

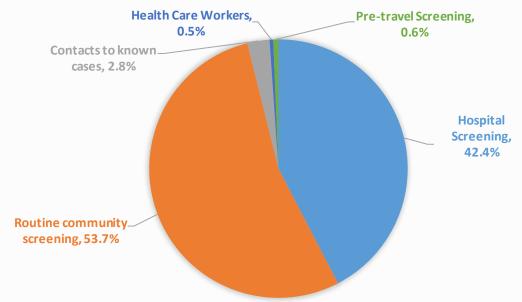


Figure 4: Categorisation of confirmed cases reported in the last 24hrs







3.4 CLINICAL CASE MANAGEMENT

- ➤ There are currently 372 COVID-19 patients hospitalised in facilities around the country; of these, 263 are on Oxygen therapy and 51 are in critical condition
- The community management model and admission/discharge criteria for persons who test positive for COVID-19 available at **Annex 3.**
- The revised guidelines for the home management of COVID-19 cases can be accessed <u>here</u>.

 Table 2: National distribution of hospitalised COVID-19 patients by province 12th February 2021

| PROVINCE | TOTAL#OF PATIENTS | ON OXYGEN | CRITICAL |
|---------------|----------------------|-----------|----------|
| CENTRAL | 13 | 5 | 1 |
| COPPERBELT | 94 | 68 | 10 |
| EASTERN | 22 | 8 | 0 |
| LUAPULA | 11 | 8 | 0 |
| LUSAKA | 154 | 137 | 34 |
| MUCHINGA | 10 | 2 | 0 |
| NORTHERN | 23 | 7 | 3 |
| NORTH-WESTERN | 24 | 13 | 3 |
| SOUTHERN | 16 | 11 | 0 |
| WESTERN | 5 | 4 | 0 |
| TOTAL | 372 | 263 | 51 |

3.5 LABORATORY AND SAMPLE MANAGEMENT

 Below is a chart showing the number of tests conducted by province vs. the number of confirmed cases and percentage positivity

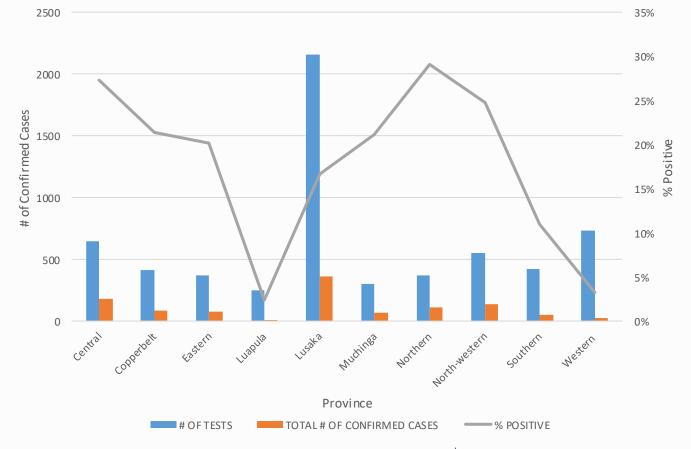


Figure 5: Number of tests by Province vs # of confirmed cases reported (12th February 2021)







- 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. See **Annex 4** for a list of the currently **designated laboratories**
- In January 2021, the testing strategy was revised from mass testing to a more targeted approach. The revised strategy can be found here.
- Previous week analysis (1st 7th February): 61,555 tests were conducted (compared to 75,320 tests the previous week), out of which 13.67% tested positive for SARS-CoV-2 (compared to 11.79% the previous week).
- Current week analysis (8th 14th February): In the last 24 hrs, 6,217 tests were conducted (17.42% positivity); so far this week, 31,500 tests have been conducted (16.01% positivity).
- To date, a total of **1,004,884 tests** have been conducted, with a cumulative **67,681 confirmed positive** (**6.74% positivity rate**) for SARS-CoV-2. The testing coverage is **59,111 per 1,000,000 population**

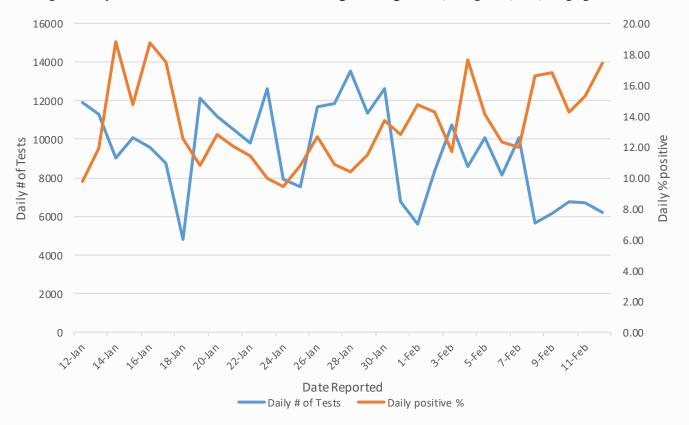


Figure 6: Daily number of tests vs % of positive results recorded (past month)







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

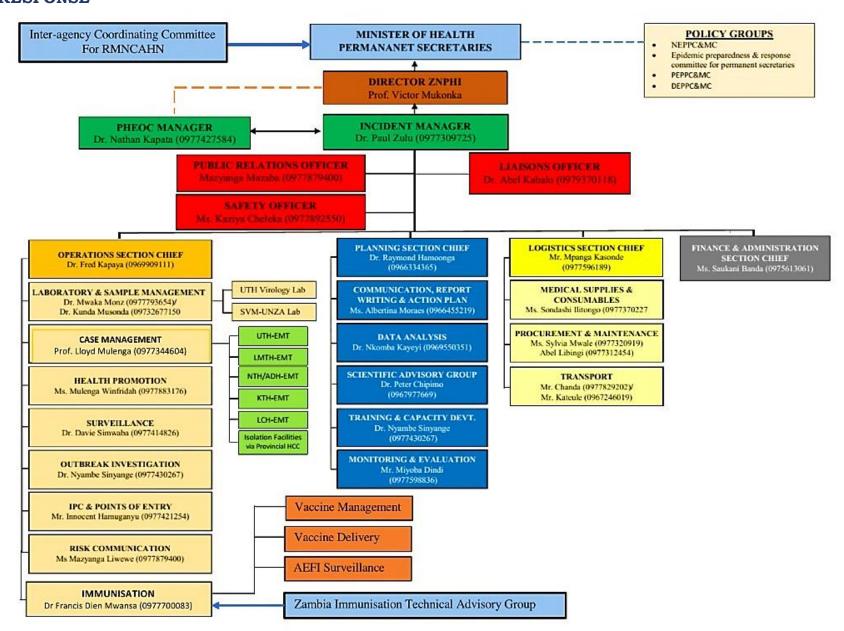
- C. Patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND requiring hospitalization AND with no other aetiology that fully explains the clinical presentation
- **2. Probable case:** A suspect case for whom testing 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.
- <u>4. COVID-19 Death</u>: 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







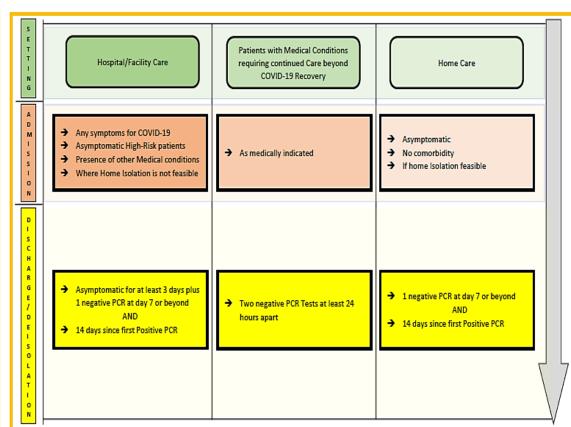


ANNEX 3: CASE MANAGEMENT MODELS

Community Model for COVID-19 Response for SARS-CoV2 Positive Patients

Positive Test Result for SARS-CoV2 Does patient Symptomatic Patient Asymptomatic Patient have symptoms? Is patient High or Low Risk? Low Risk Patient High Risk Patient Patient with no If any of the following present: Comorbidities or Pre-existing Medical Comorbidities; any medical HTN, DM, Renal disease, CVD reason requiring (Stroke), Chronic lung disease (e.g., hospital admission COPD, Asthma, TB, Bronchiectasis), Sickle cell, Malignancy → Any other medical reason requiring hospital admission Social Reasons; Overcrowded household, elderly > 60years, Staying with elderly, Communal sanitary facilities *Allow for Home Admit to COVID-19 Isolation Isolation Center "If develops COVID-19 symptoms, refer to COVID-19 Isolation Center

Admission and Discharge Criteria for Covid-19 Patients









ANNEX 4: LIST OF DESIGNATED COVID-19 DIAGNOSTIC LABORATORIES

| PROVINCE | INSTITUTION | TESTING PLATFORM(S) |
|---------------|--|--|
| Central | Kabwe General Hospital | Gene Xpert |
| | TDRC, 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 |
| | Solwezi General Hospital, Solwezi | Panther |
| North-western | Kansanshi Mine Hospital (Mary Begg), Solwezi | Gene Xpert |
| | Macha Research Trust | RT-PCR |
| Southern | Livingstone Teaching Hospital | Gene Xpert |
| Western | Lewanika General Hospital | Gene Xpert |