





ZAMBIA COVID-19 SITUATION REPORT NO. 146

Disease Pandemic: COVID-19 Report date: Friday 19th February 2021 Response start date: 30th January, 2020 Outbreak Declared: 18th March, 2020 Prepared by: MOH/ZNPHI/WHO

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This week (15th - 21st Feb) 🕯 Cases 3,766 🕈 Deaths 51 🕈 Recoveries 3,143 **1. SITUATION UPDATE**

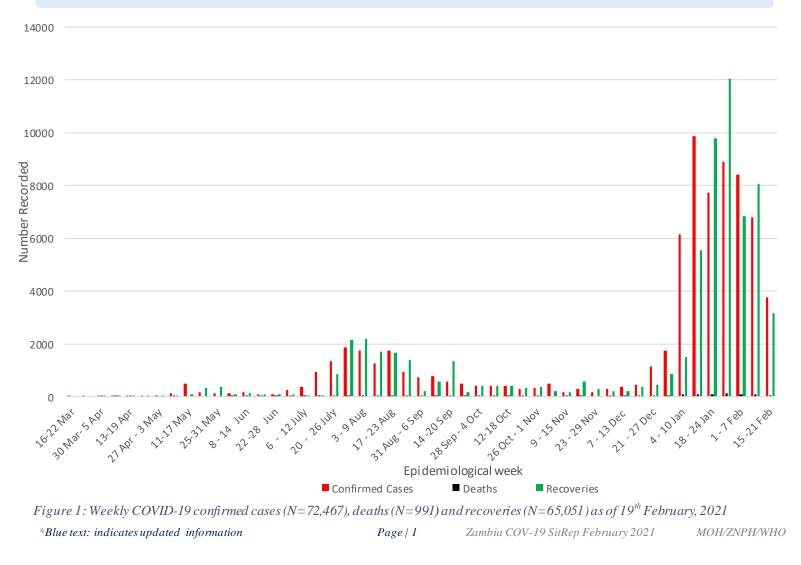
1.1 CURRENT CASE NUMBERS (as of 09:00 hours CAT)

- In the last 24hrs, we recorded 736 new cases, 11 deaths and 962 recoveries \geq
- The cumulative number of confirmed COVID-19 cases recorded to date is 73,203 with 1,002 deaths (CFR=1.4%) and 66,013 recoveries (90.2% recovered).
 - Of the total deaths, 532 have been classified as COVID-19 deaths (CFR=0.7%) and 470 as associated deaths. See Annex 1 for definitions
- > There are currently 6,188 active cases: of these, 304 (4.9%) are hospitalised [with 219 (72.0%) on Oxygen therapy and 44 (14.5%) in critical condition]; 5,884 (95.1%) cases are under community management.

∱ ∱	Global Numbers (Source: JHU) 110,547,030 Confirmed 2,447,615 Deaths (2.2% CFR 62,261,377 Recoveries
∱ †	Africa Numbers Source: Africa CDC) 3,796,354 Confirmed 100,294 Deaths (2.6% CFR)

3,346,404 Recoveries

2. EPIDEMIOLOGICAL HIGHLIGHTS







World Health Organization

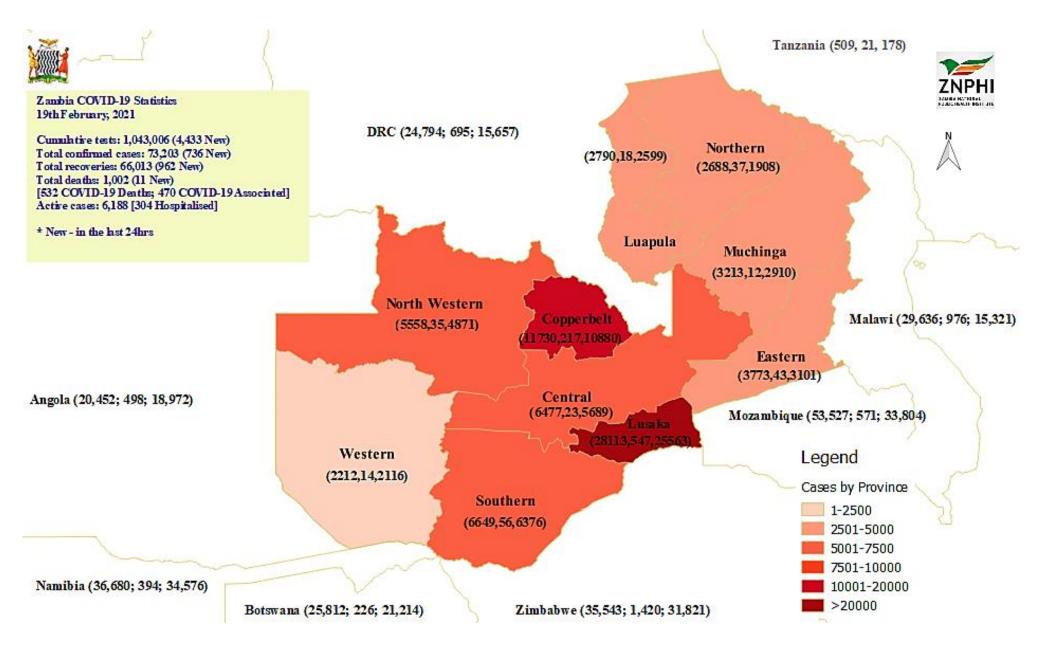


Figure 2: Map showing confirmed COVID-19 cases, deaths and recoveries (in brackets) by province and in neighbouring countries, 19th February, 2021







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

overall, we have seen a change in the age/sex proportions between the first and second waves

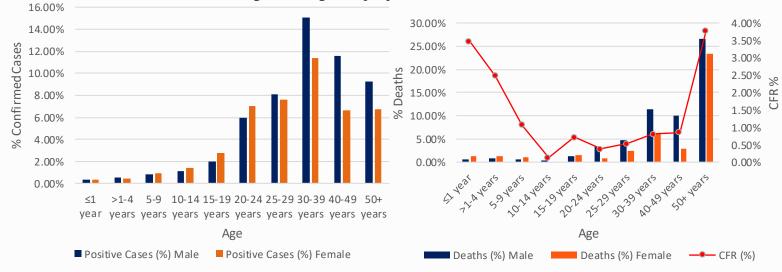


Figure 3: Age and sex distribution of (a) confirmed cases (b) deaths

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 1,800,047 confirmed cases; 54,709 deaths; and 1,639,844 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

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.

COVID-19 preparedness and response activities is available and continues to be regularly updated as the 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.

PROVINCE	NUMBERS BY DISTRICT		PROVINCIAL RECOVERIES
	CASES	DEATHS	
CENTRAL	Itezhi-Tezhi 1, Kapiri Mposhi 1, Ngabwe 1[TOTAL:3]	1	112
COPPERBELT	Chililabombwe 1, Chingola 1, Kalulushi 1, Kitwe 33, Luanshya 2, Mufulira 7, Ndola 73 [TOTAL: 118]	2	171
EASTERN	Chadiza2, Chipata 4, Katete 5, Nyimba 60, Petauke 2, Sinda 1, Vubwi 1 [Total: 75]	1	69
LUAPULA	Chembe4, Chienge 3, Mansa 8, Nchelenge 8 [Total: 23]	0	62
LUSAKA	Chirundu 2, Lusaka 268 [TOTAL: 270]	3	228
MUCHINGA	Chama 2, Chinsali 20, Isoka 2, Mpika 17, Nakonde 6, Shiwan'gandu 5 [TOTAL: 52]	2	33
NORTHERN	Chilubi 4, Kaputa 2, Kasama 29, Lunte 2, Luwingu 3, Mbala 4, Mporokoso 4, Mpulungu 12, Mungwi 3, Senga Hill 5 [TOTAL:68]	1	53
NORTH-WESTERN	Kabompo 2, Kalumbila 8, Kasempa 5, Mushindamo 4, Mwinilunga 3, Solwezi 59, Zambezi 1 [TOTAL:82]	1	135
SOUTHERN	Chikankata 1, Choma 1, Gwembe 2, Kalomo 8, Kazungula 4, Livingstone 8, Mazabuka 5, Monze 2, Namwala 1, Pemba 1, Sinazongwe 1[TOTAL: 34]	0	84
WESTERN	Kaoma 1, Luampa 1, Mongu 5, Senanga 2, Sesheke 2 [TOTAL:11]	0	15
TOTAL	736 New Cases	11 Deaths	962 Recoveries



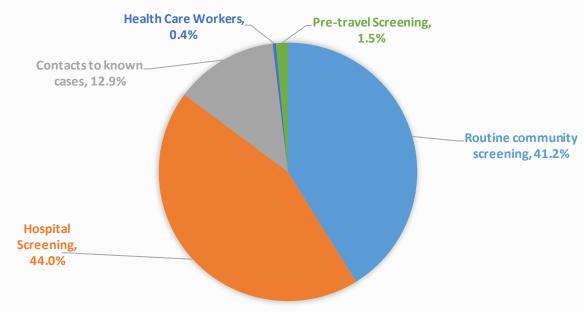


Figure 4: Categorisation of confirmed cases reported in the last 24hrs







3.4 CLINICAL CASE MANAGEMENT

- There are currently 304 COVID-19 patients hospitalised in facilities around the country; of these, 219 are on Oxygen therapy and 44 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 -18^{th} February 2021

PROVINCE	TOTAL # OF PATIENTS	ON OXYGEN	CRITICAL
CENTRAL	7	4	0
COPPERBELT	86	62	8
EASTERN	11	7	0
LUAPULA	5	5	2
LUSAKA	131	103	23
MUCHINGA	6	3	3
NORTHERN	15	6	2
NORTH-WESTERN	28	18	5
SOUTHERN	12	8	1
WESTERN	3	3	0
TOTAL	304	219 (72%)	44 (15%)

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

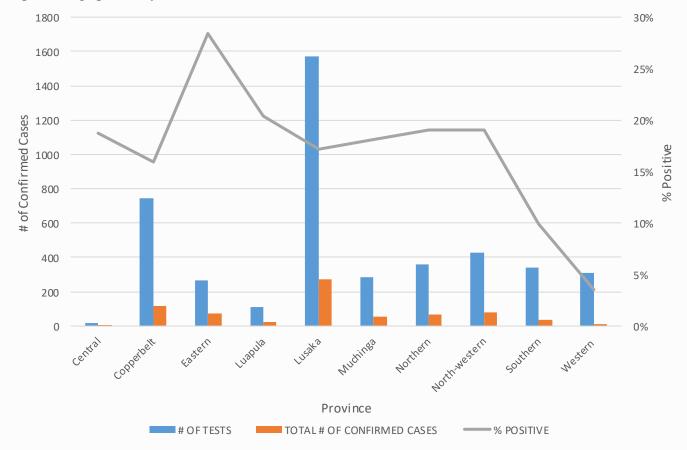


Figure 5: Number of tests by Province vs # of confirmed cases reported (19th February 2021)*Blue text: indicates updated informationPage / 5Zambia COV-19 SitRep February 2021







- 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 <u>here</u>.
- Previous week analysis (8th 14th February): 44,978 tests were conducted (15.13% tested positive for SARS-CoV-2) compared to 61,555 tests the previous week (13.67% positivity).
- Current week analysis (15th 21st February): In the last 24 hrs, 4,433 tests were conducted (16.6% positivity); this brings the tests conducted so far this week to 24,644 (15.3% positivity).
- To date, a total of **1,043,006 tests** have been conducted, with a cumulative **73,203 confirmed positive**

(7.0% positivity rate) for SARS-CoV-2. The testing coverage is 61,353 per 1,000,000 population

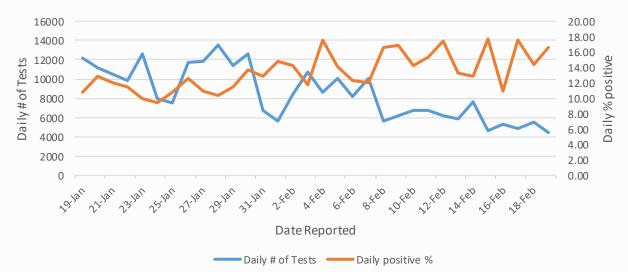


Figure 6: Daily number of tests vs % of positive results recorded (past month)

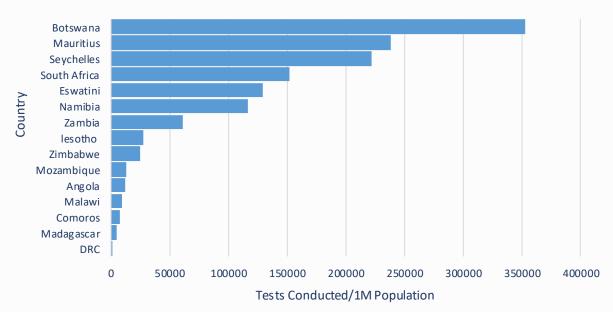


Figure 7: Tests per1M populations of countries in the SADC region (February data; Source: Africa CDC)







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

<u>1. Suspect case</u>:

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 actiology 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

<u>2. Probable case</u>: 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.

<u>3. Confirmed case:</u> 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

<u>6. COVID-19 Unclassified Death</u>: 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

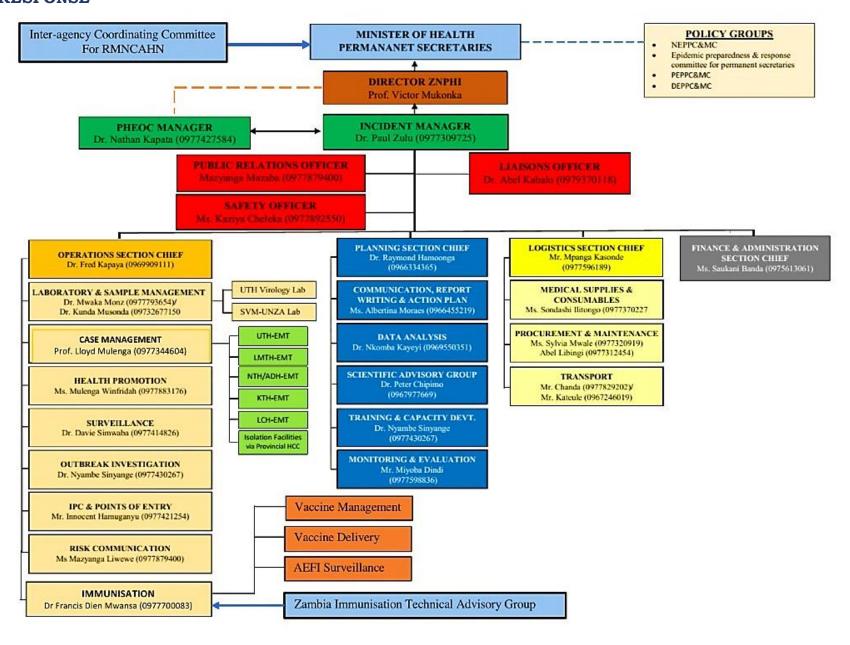
7. Contact: a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case: a. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes; b. Direct physical contact 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



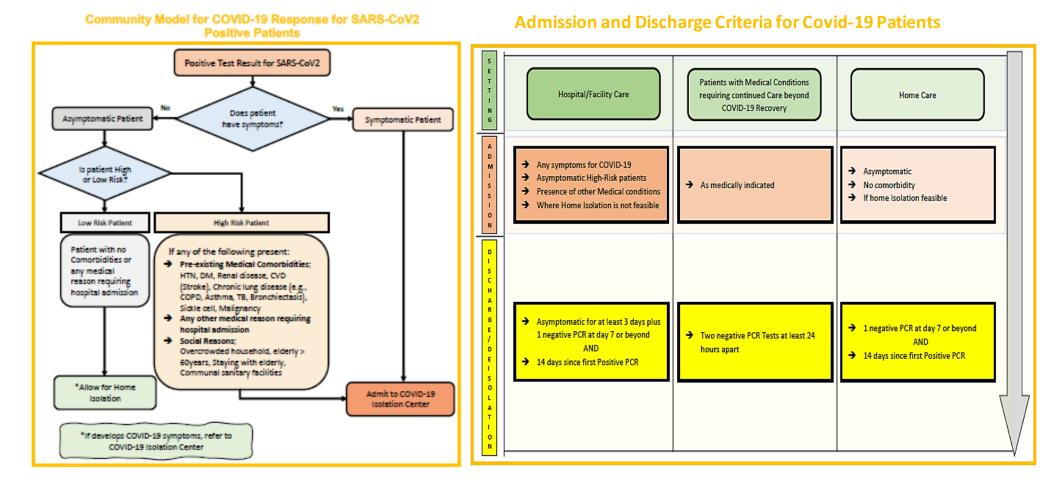
*Blue text: indicates updated information







ANNEX 3: CASE MANAGEMENT MODELS









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