

ZAMBIA COVID-19 SITUATION REPORT NO. 147

Disease Pandemic: COVID-19

Response start date: 30th January, 2020

Outbreak Declared: 18th March, 2020

Report date: Saturday 20th February 2021

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1. SITUATION UPDATE

This week (15th - 21st Feb) ↑ **Cases 4,457** ↓ **Deaths 65** ↑ **Recoveries 4,073**

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

- In the last 24hrs, we recorded **691 new cases, 14 deaths and 930 recoveries**
- The cumulative number of confirmed COVID-19 cases recorded to date is **73,894 with 1,016 deaths (CFR=1.4%) and 66,943 recoveries (90.6% recovered).**
- Of the total deaths, **546 have been classified as COVID-19 deaths (CFR=0.7%) and 470 as associated deaths.** See Annex 1 for definitions
- There are currently **5,935 active cases:** of these, 317 (5.3%) are hospitalised [with 222 (70.3%) on Oxygen therapy and 35 (11.1%) in critical condition]; 5,618 (94.7%) cases are under community management.

Global Numbers

(Source: JHU)

↑ **110,941,712 Confirmed**
↓ **2,456,923 Deaths (2.2% CFR)**
↑ **62,540,458 Recoveries**

Africa Numbers

(Source: Africa CDC)

↑ **3,809,172 Confirmed**
↓ **100,674 Deaths (2.6% CFR)**
↑ **3,359,930 Recoveries**

2. EPIDEMIOLOGICAL HIGHLIGHTS

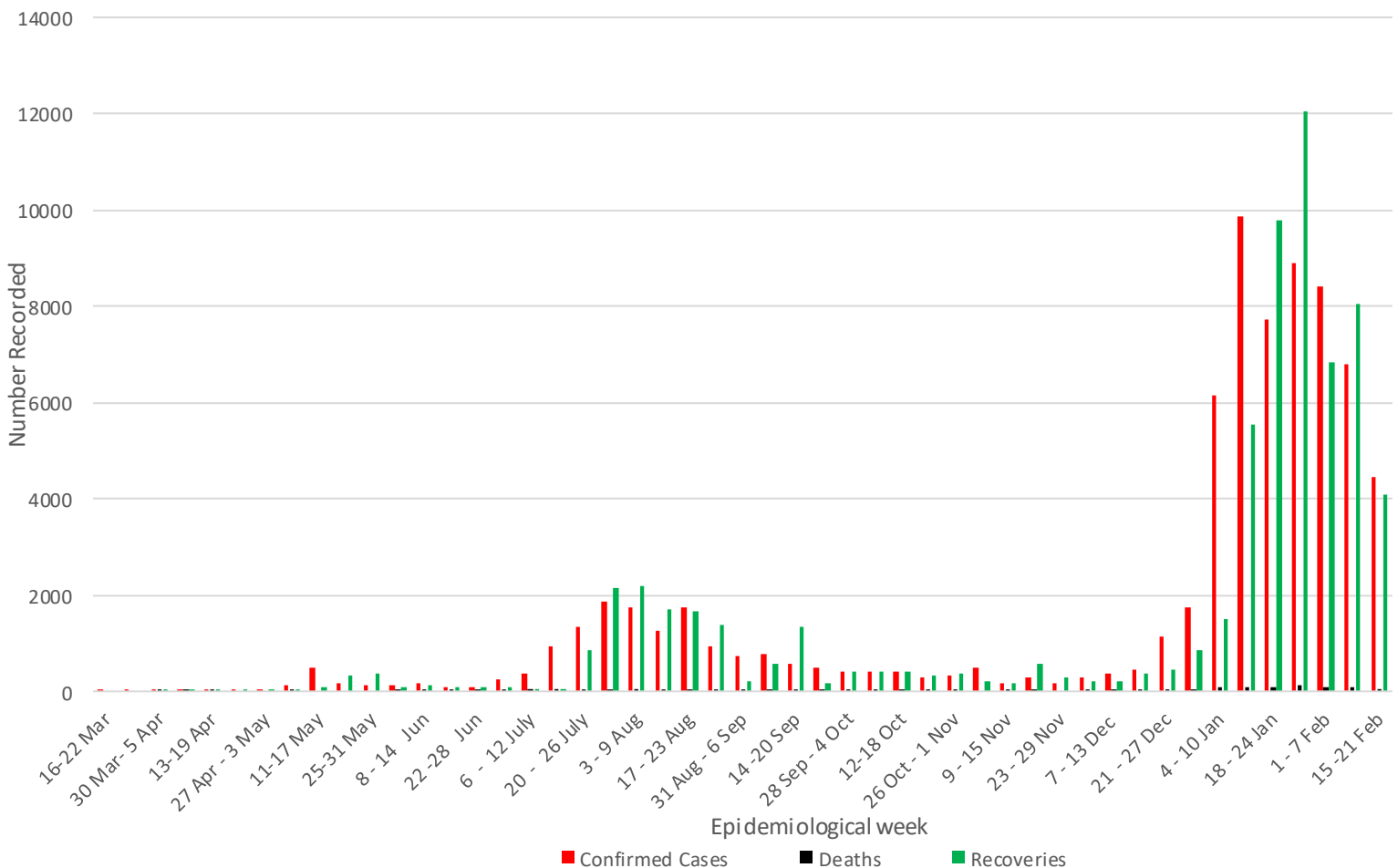


Figure 1: Weekly COVID-19 confirmed cases (N=72,467), deaths (N=991) and recoveries (N=65,051) as of 20th February, 2021

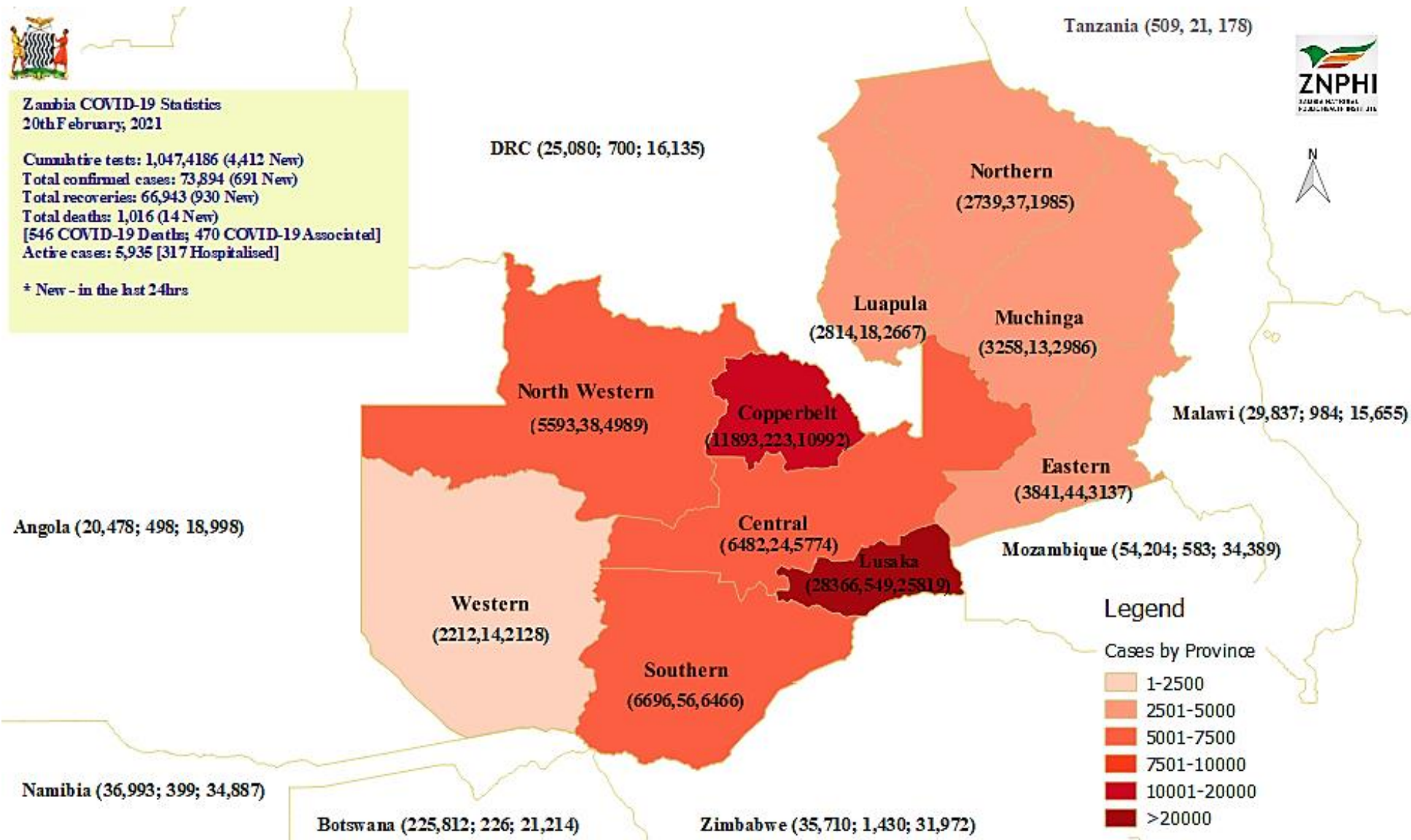


Figure 2: Map showing confirmed COVID-19 cases, deaths and recoveries (in brackets) by province and in neighbouring countries, 20th February, 2021

- **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

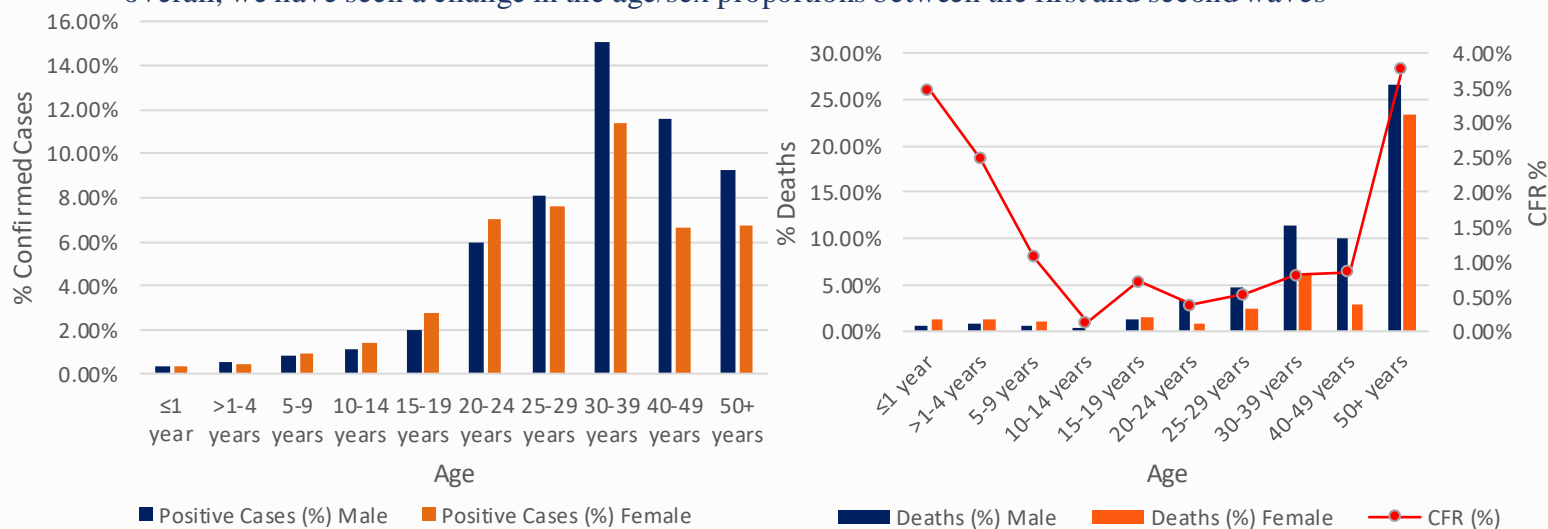


Figure 3: Age and sex distribution of (a) confirmed cases (b) deaths

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 1,804,111 confirmed cases; 54,910 deaths; and 1,646,064 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 outbreak evolves.

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.

- Technical co-ordinating meetings are held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNPPI
- The Incident Management System (IMS) continues to meet at ZNPPI (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 4, Serenje 1 [TOTAL: 5]	1	85
COPPERBELT	Chilila bombwe 7, Chingola 17, Kitwe 47, Masaiti 6, Mufulira 2, Ndola 84 [TOTAL: 163]	6	112
EASTERN	Chadiza 5, Chipata 28, Kasenengwa 4, Katete 12, Lumezi 10, Petauke 4, Sinda 1, Vubwi 4 [Total: 68]	1	36
LUAPULA	Chembe 1, Chifunabuli 1, Ka wambwa 1, Mansa 19, Nchelenge 2 [Total: 24]	0	68
LUSAKA	Chilanga 12, Luangwa 2, Lusaka 235, Rufunsa 4 [TOTAL: 253]	2	256
MUCHINGA	Chinsali 8, Isoka 1, Ma finga 4, Mpika 17, Nakonde 11, Shiwan'gandu 4 [TOTAL: 45]	1	76
NORTHERN	Chilubi 5, Kaputa 2, Kasama 7, Luwingu 9, Mbala 8, Mpulungu 4, Senga Hill 16 [Total: 51]	0	77
NORTH-WESTERN	Cha vuma 3, Ka lumbila 3, Ka sempa 8, Solwezi 21 [Total: 35]	3	118
SOUTHERN	Gwembe 3, Kalomo 4, Kazungula 6, Livingstone 7, Mazabuka 6, Monze 10, Namwala 2, Pemba 1, Sia vonga 1, Sia vonga 6, Sina zongwe 1 [TOTAL: 47]	0	90
WESTERN	- [TOTAL: -]	0	12
TOTAL	691 New Cases	14 Deaths	930 Recoveries

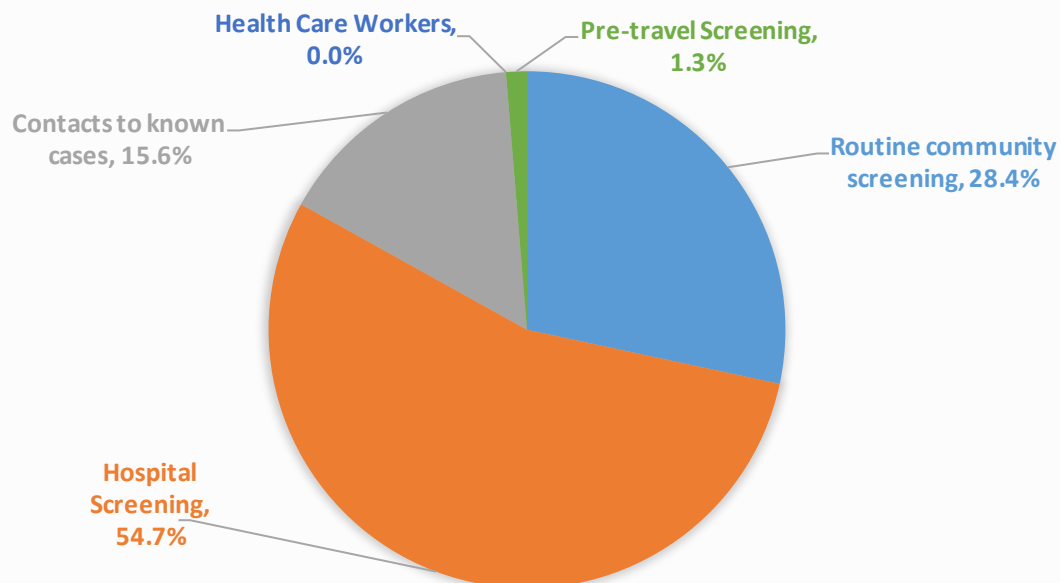


Figure 4: Categorisation of confirmed cases reported in the last 24hrs

3.4 CLINICAL CASE MANAGEMENT

- There are currently 317 COVID-19 patients hospitalised in facilities around the country; of these, 222 are on Oxygen therapy and 35 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 [here](#).

Table 2: National distribution of hospitalised COVID-19 patients by province – 20th February 2021

PROVINCE	TOTAL # OF PATIENTS	ON OXYGEN	CRITICAL
CENTRAL	11	9	0
COPPERBELT	81	52	2
EASTERN	11	8	1
LUAPULA	15	13	0
LUSAKA	134	101	22
MUCHINGA	7	4	4
NORTHERN	15	5	0
NORTH-WESTERN	28	19	5
SOUTHERN	12	8	1
WESTERN	3	3	0
TOTAL	317	222 (70%)	35 (11%)

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

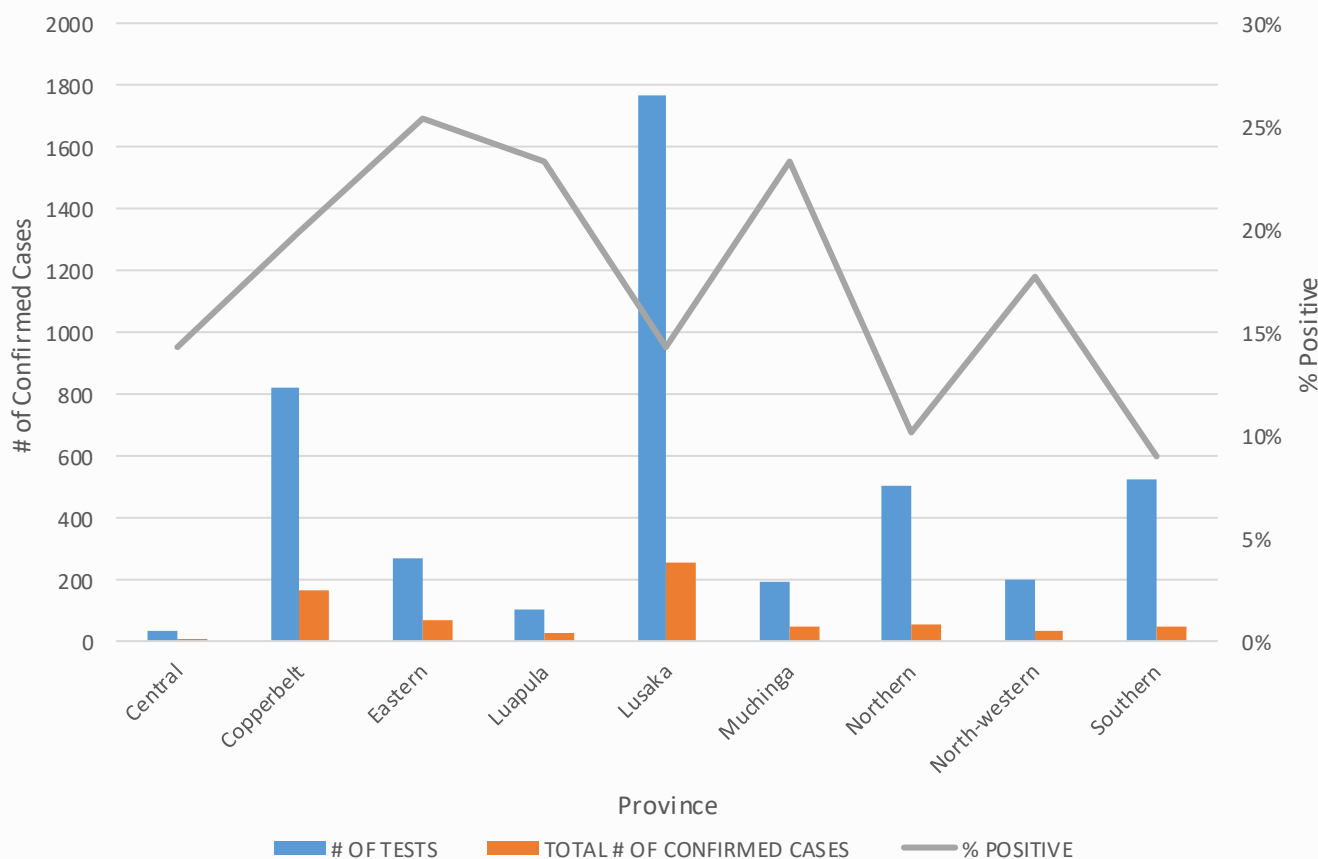


Figure 5: Number of tests by Province vs # of confirmed cases reported (20th February 2021)

- 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 (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, 4,412 tests were conducted (15.7% positivity); this brings the tests conducted so far this week to 29,056 (15.3% positivity).
- To date, a total of **1,047,418 tests** have been conducted, with a cumulative **73,894 confirmed positive (7.1% positivity rate)** for SARS-CoV-2. The testing coverage is **61,613 per 1,000,000 population**

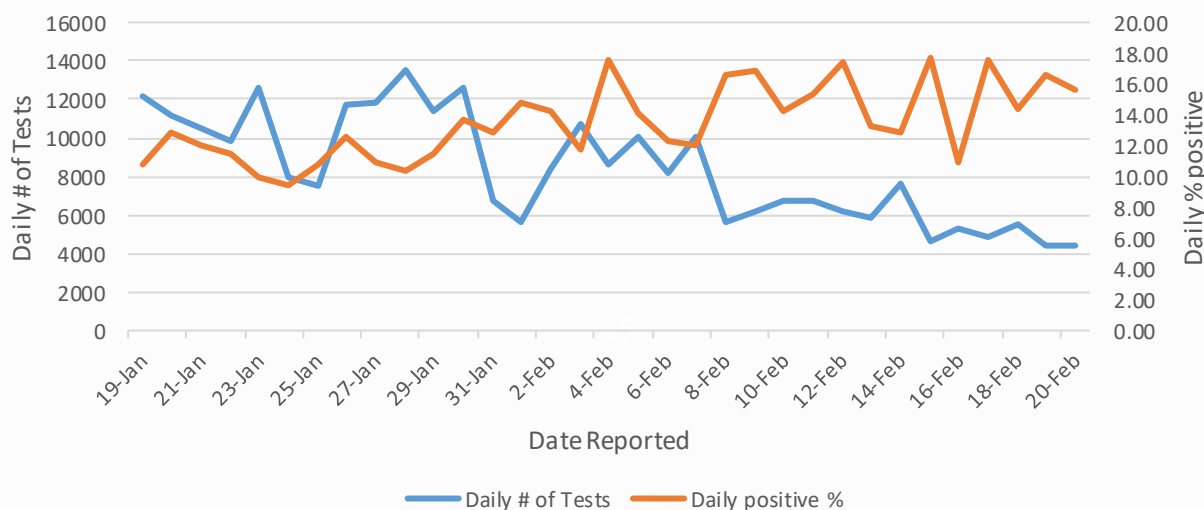


Figure 6: Daily number of tests vs % of positive results recorded (past month)

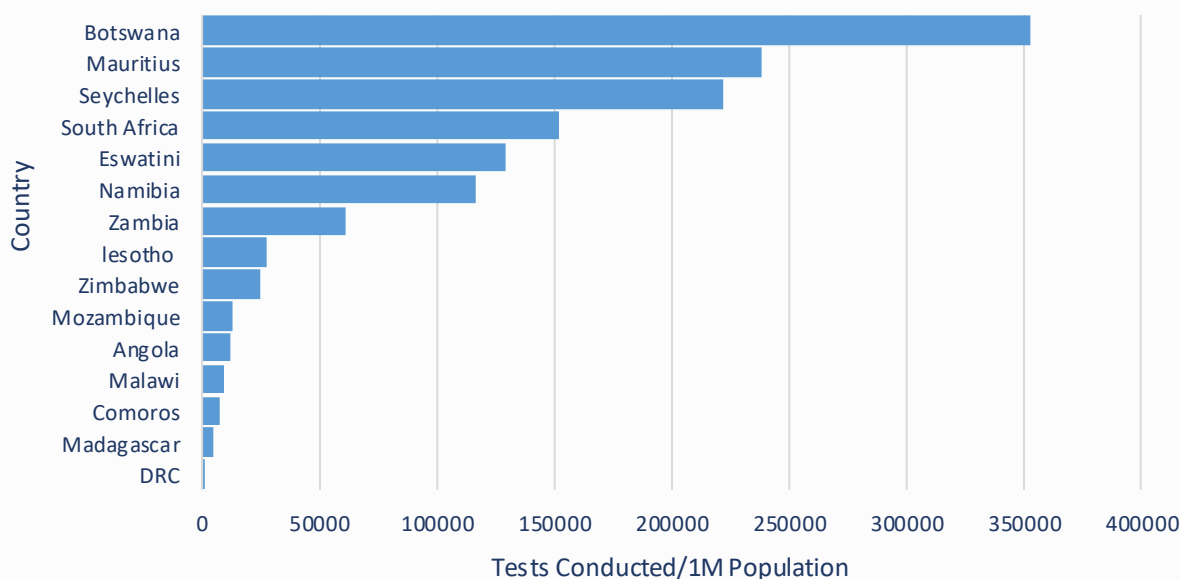


Figure 7: Tests per 1M populations of countries in the SADC region (February data; Source: Africa CDC)

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.

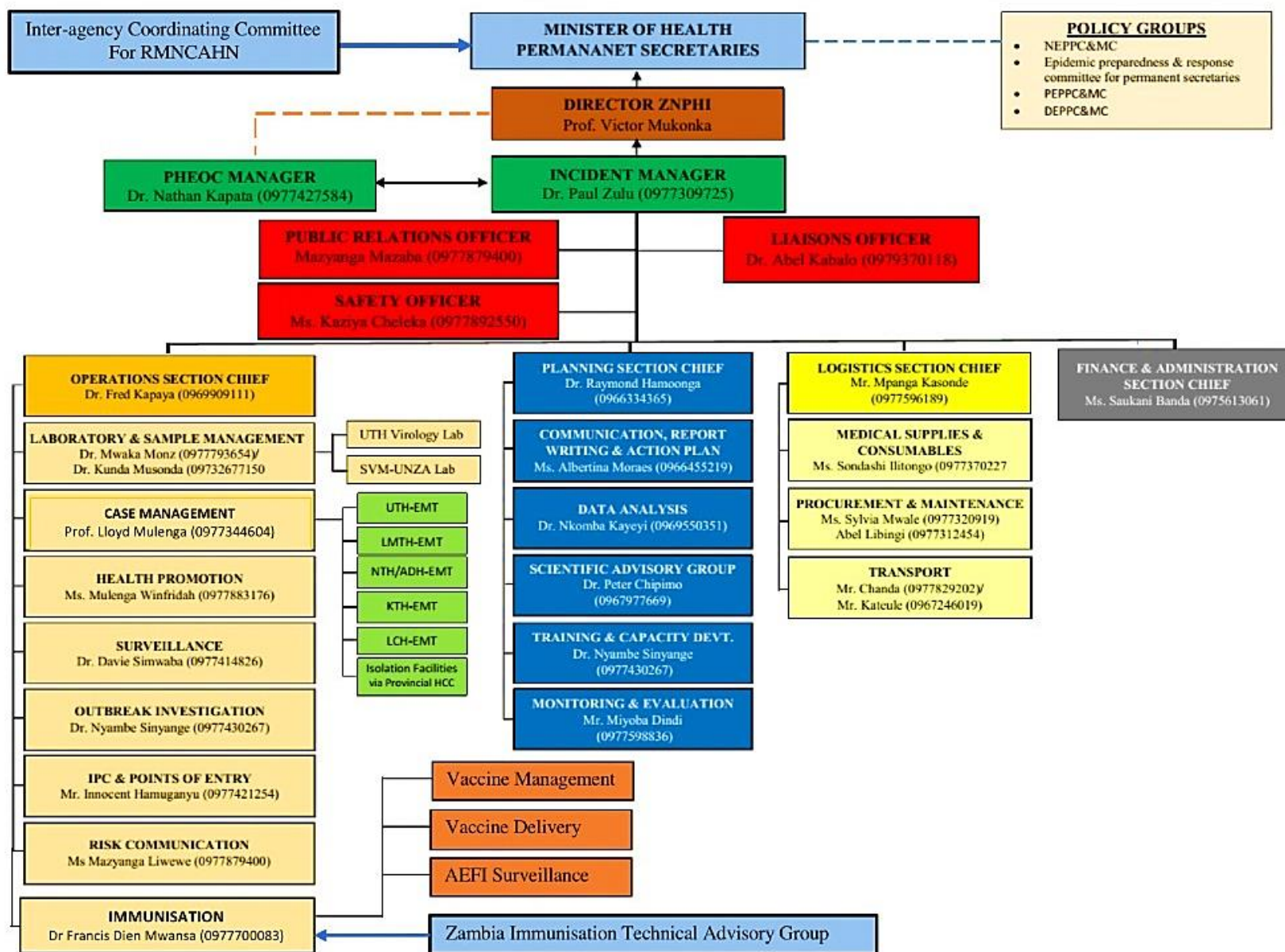
4. COVID-19 Death: COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period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

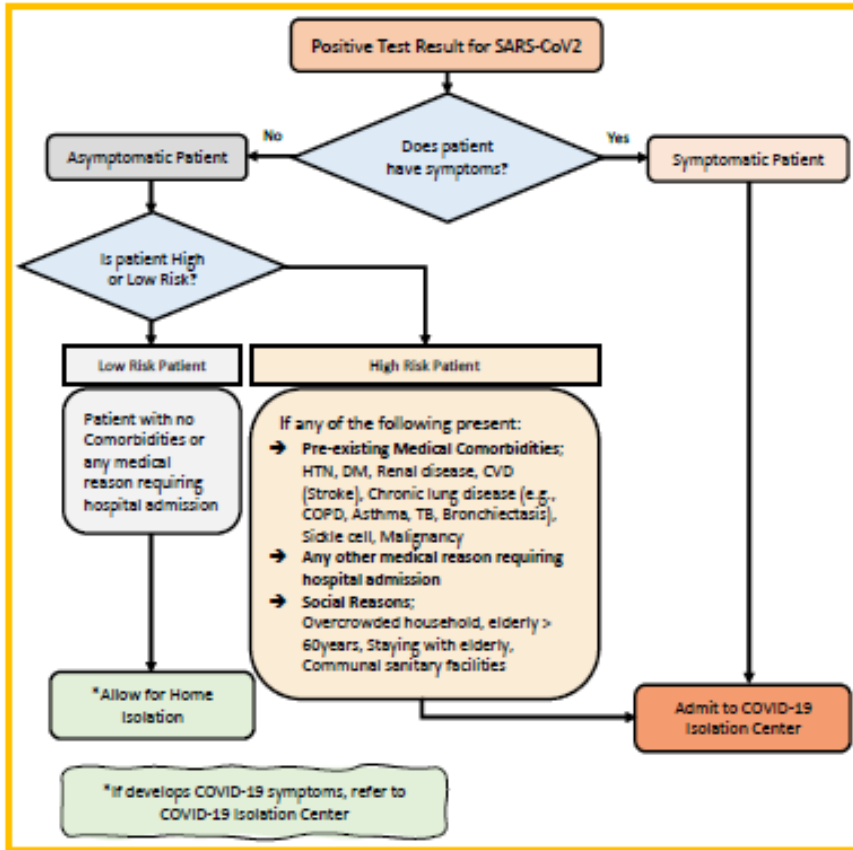
7. Contact: a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case: a. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes; b. Direct physical contact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

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



Admission and Discharge Criteria for Covid-19 Patients

S E T T I N G	Hospital/Facility Care	Patients with Medical Conditions requiring continued Care beyond COVID-19 Recovery	Home Care
A D M I S S I O N	<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
D I S C H A R G E / D E I S O L A T I O N	<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

ANNEX 4: LIST OF DESIGNATED COVID-19 DIAGNOSTIC LABORATORIES

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