





ZAMBIA SITUATION REPORT NO. 34

Disease Outbreak: COVID-19Response start date: 30th January, 2020Outbreak Declared: 18th March, 2020Date of report: 21st April, 2020Prepared by: MOH/ZNPHI/WHOCorrespondence: ims.covid@znphi.co.zm

SITUATION UPDATE

1.1 CURRENT CASE NUMBERS

- ► As of 17:00 hours on Tuesday, 21st April, 2020:
 - There were **5 new confirmed cases of COVID-19, no recoveries and no deaths** recorded in the past 24 hours.
 - The total number of confirmed cases recorded to date is 70, with
 3 deaths (CFR=4.29%) and 35 recoveries (Refer to Annex 1).
 - There are currently 32 active cases; 29 in Lusaka, 2 on the Copperbelt and 1 in Kabwe. All cases (suspected/confirmed) are admitted to designated isolation facilities.

1. EPIDEMIOLOGICAL HIGHLIGHTS

Table 1: COVID-19 Summary surveillance and case management, based on 21st April 2020 report

Parameter Number Cumulative number of high risk persons under observation 9,494 Cumulative number of high risk persons that have completed 14 days observation 2.669 Cumulative number of alerts notified & verified as non-cases 870 Number of suspected cases reported 4 **Cumulative Number of Samples Received** 4,040 **Total Number of Results Processed** 3,715 **Total Number of Confirmed COVID-19 Positive Cases** 70 Total number of currently isolated positive cases 32

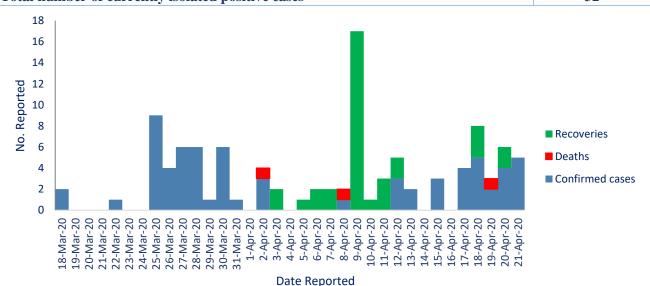


Figure 1: Epi-curve of COVID-19 confirmed cases (N=70), deaths (N=3) and recoveries (N=35) as of 21st April 2020

Zambia Numbers

- **70** Confirmed (5 new)
- **3** Deaths (0 new)
- **35** Recoveries (0 new)

Global Numbers

- (Source: JHU) **2,544,769** confirmed (96,849 new)
- **175,621** deaths (7,121 new)
- **678,479** Recoveries (35,234 new) **New: in the last 24hrs*







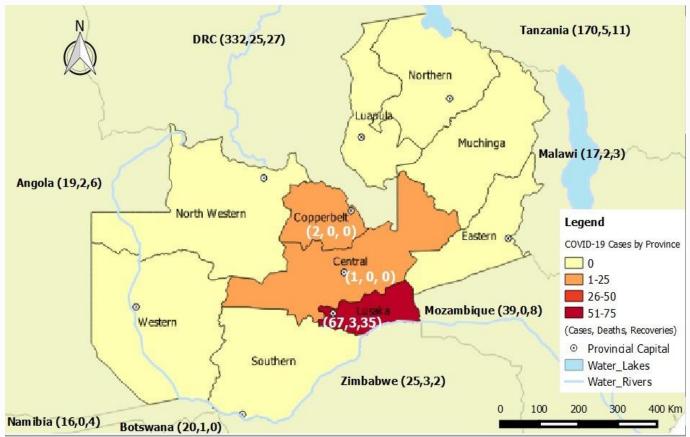


Figure 2: Map of Zambia showing confirmed COVID-19 cases, deaths and recoveries (in brackets) by province, as well as confirmed cases, deaths and recoveries (in brackets) in neighbouring countries as of 21st April 2020

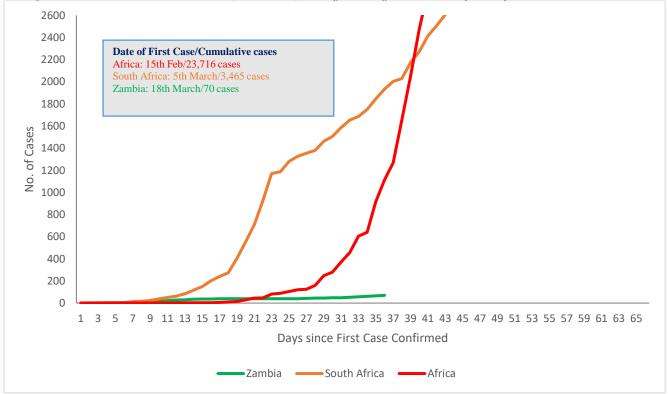


Figure 3: Cumulative trend graph comparing the number of confirmed cases in Zambia, South Africa and the whole Africa recorded during the first 70 days (Sources: MoH Zambia, NICD South Africa, Africa CDC)







Reporting Province	New Cases	Total Confirmed Cases	New Deaths	Total Deaths	New Recoveries	Total Recoveries	Transmission Classification	Days since last confirmed case reported
Lusaka	5	67	0	3	0	35	26 Imported 41 Local	0
Copperbelt	0	2	0	0	0	0	2 Imported	24
Central	0	1	0	0	0	0	1 Local	3
Southern	0	0	0	0	0	0	N/A	N/A
Eastern	0	0	0	0	0	0	N/A	N/A
Western	0	0	0	0	0	0	N/A	N/A
Northern	0	0	0	0	0	0	N/A	N/A
N/Western	0	0	0	0	0	0	N/A	N/A
Luapula	0	0	0	0	0	0	N/A	N/A
Muchinga	0	0	0	0	0	0	N/A	N/A
Total	5	70	0	3	0	35	28 Imported; 42 Local	

Table 2: Summary of COVID-19 cases recorded country-wide as of 21st April 2020

Age and Sex distribution: Of confirmed cases 62% are male and 38% are female. The most affected age group remains those aged between 15-30 years old, with 35% of the confirmed cases falling in this age bracket, followed by the 31-44 age group (24%) and 45-60 age group (22%).

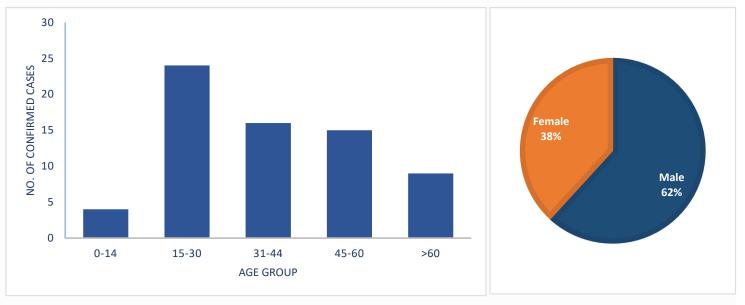


Figure 4: Age and Sex distribution of confirmed cases, as of 20th April 2020







> ACTIONS TO DATE

2.1 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 3,525 confirmed cases of COVID-19 including 70 deaths and 969 recoveries. Zambia continues to participate in AU meetings to ensure continued regional and continental trade and strategies to stop transmission of COVID-19.
- Policy 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. The measures include wearing of a mask while out in public; continued screening of travellers into Zambia; redirection of all international flights to land and depart from KKIA only; suspension of non-essential travel to countries with confirmed COVID-19 cases; restriction of public gatherings; restaurants to operate only on take away and delivery basis; and closure of all bars, nightclubs, cinemas, gyms and casinos. Following continued disregard of quarantine directives, travellers into Zambia will now be isolated at designated facilities at own cost while awaiting test results.
 - Meetings of the Committee of Ministers, Committee of Permanent Secretaries, and the National Epidemic Preparedness, Prevention Control and Management Committee (NEPPC&MC) have been convened since the declaration of the outbreak
 - Press briefings are held daily on the evolving outbreak situation in Zambia.
- **Technical level:** The ZNPHI continues to provide leadership and partner collaboration on the response.
 - The IMS continues to meet at the ZNPHI (with a Zoom link provided to ensure social distancing) on Tuesdays and Thursdays. (Refer to Annex 2 for structure)
 - Technical co-ordinating meetings are being held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNPH
 - All the response pillars under the IMS have an Incident Coordinator whose responsibility it is to map the partners and resources for the respective units to ensure no duplication of efforts and resources. Public Health Specialists in each of the sub-districts in Lusaka serve as Incident Commanders and coordinate daily activities of field teams.







2.2 SURVEILLANCE

Surveillance is being actively conducted around the country at community level, health facilities, points of entry (POEs), and sentinel sites. Efforts for rapid detection of any cases of COVID-19 in Lusaka, Kabwe and Kafue continue including testing, contact tracing, monitoring of persons under quarantine and adherence, verification and follow up of alerts and timely transport of cases to isolation facilities. Sub-district teams continue to carry out quarantine adherence monitoring, follow up of confirmed cases, contact tracing, follow up and verification of alerts, and risk communication

- Case finding: All of the 5 new confirmed cases are health workers from the Levy Mwanawasa isolation facility. This brings the total number of health workers infected to eight (8). The profile of the cases reported is as follows: 23-year-old male; 47-year-old female; 28-year-old female; 25-year-old female; and 32-year-old female. They have been admitted at the Courtyard isolation facility.
- Contact Tracing: Investigations to trace and screen all contacts remain in effect. Rapid response teams in Kabwe, Kafue and Lusaka continue to conduct mass screening and contact tracing. Surveillance teams also continue to actively follow up contacts of confirmed cases and community alerts.

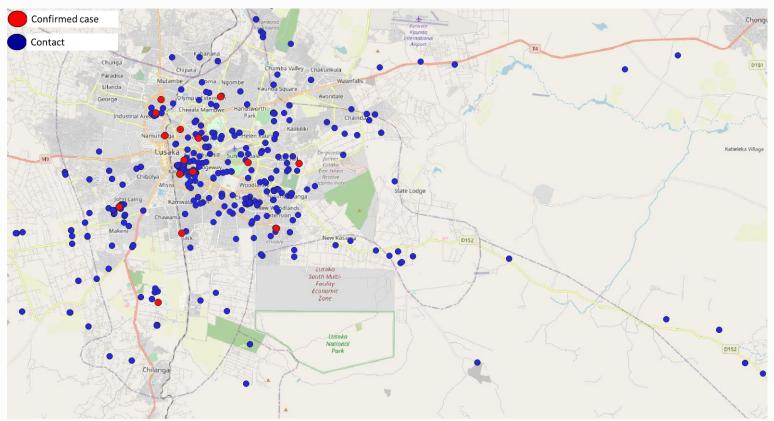


Figure 5: Distribution of confirmed cases and traced contacts in Lusaka, last updated 20th April 202







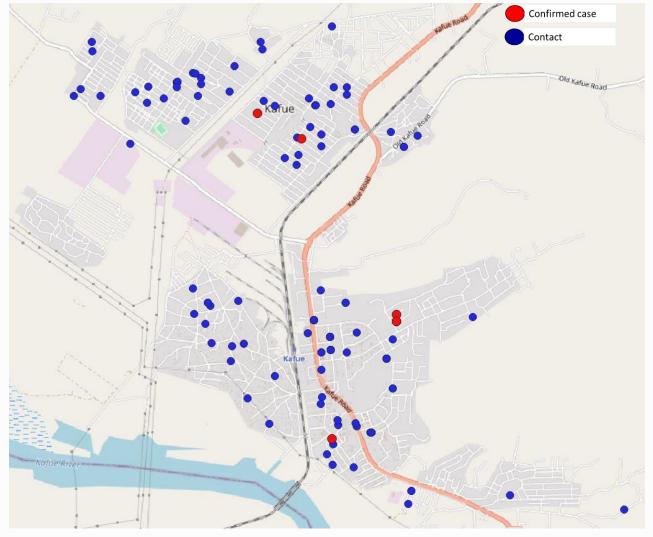


Figure 6: Distribution of confirmed cases and traced contacts in Kafue, last updated 20th April 2020

- Points of Entry: Active screening continues in all PoEs. Trucks entering the borders carrying essential commodities proceed to their destination under secure escort, at which point the drivers are placed under quarantine pending test results
- Laboratory: There are currently 3 designated laboratories for COVID-19 diagnostics, namely the University Teaching Hospital Virology Lab (UTHVL) (WHO-certified National Influenza Centre), the School of Veterinary Medicine (SVM), UNZA and the Tropical Diseases Research Centre (TDRC) on the Copperbelt. A sample referral system is in place for samples being collected in other provinces. Zambia is utilising Polymerase Chain Reaction (PCR) testing for COVID-19 diagnosis. Some rapid diagnostic testing (RDT) has been conducted using a total antibody test (IgM and IgG). The RDT has an 86.43% sensitivity and 99.57% specificity. However, preliminary data has shown that there is a higher likelihood of false positives and false negatives within the first 3-5 days of infection; sensitivity does







increase by day 8. Therefore, results from the RDT results have to undergo confirmatory testing with PCR.

- In the last 24 hours, 479 PCR tests were conducted; five (5) of which were positive. A total of 4,040 samples have been received to date; of these, 3,715 results have been processed with 70 confirmed positive for SARS-CoV-2. Summary of tests conducted to date is available in Annex1
- The standard turn-around time for the PCR test is 24 hours, but can take up to 36-48 hours where repeat or confirmatory testing is required
- Testing of community alerts, suspects under quarantine, contacts of confirmed cases as well as retesting of confirmed cases is ongoing.
- **Criteria for testing:** individuals who meet the case definition or individuals who have had contact/been exposed to a confirmed positive case and/or are symptomatic. Testing is being expanded in all communities with confirmed cases.

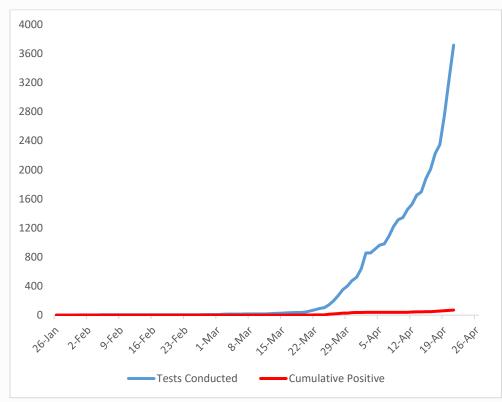


Figure 7: Graph showing cumulative number of PCR tests conducted vs confirmed cases as of 21st April 2020

Case Management: All symptomatic cases (suspected, probable and confirmed) are admitted to the designated isolation facilities. *Patients are only considered recovered once they record two negative retest results within a 24hour period*. Refer to Annex 1 for detailed summary. Additionally, all health workers are required to undergo 14-day quarantine following their shift at the isolation facilities before







they return to their communities. There are currently **32 active COVID-19 cases** being managed at various facilities.

- Levy Mwanawasa Hospital: In the last 24 hours, the facility had no new admissions of confirmed cases. There are currently 21 patients admitted at the facility (all confirmed positive). All patients are stable.
- **Courtyard facility**: In the last 24 hours, the facility had 5 new admissions of confirmed cases. There are currently 8 patients admitted at the facility (all confirmed positive). All patients are stable
- Masaiti District Hospital: In the last 24 hours, the facility had no new admissions of confirmed cases; no recoveries were recorded. There are 2 confirmed positive cases still admitted; all patients are in a stable condition.
- Kabwe Mother, New-born and Children's Hospital: In the last 24 hours, the facility had no new admissions; there is currently 1 confirmed case admitted.
- **COVID-19 Screening Facilities:** Dedicated screening structures have been set up at the UTH and Levy Mwanawasa, away from the areas of routine service delivery.
- **Isolation facilities** have also been set up in all high risk districts across the ten provinces; a detailed list is available at Annex 4

3. GAPS AND CHALLENGES

- Surveillance and outbreak investigation: non-adherence to self-quarantine and socio-distancing
- Risk Communication: continued myths and misconceptions in the community including fear regarding tainted swabs and perception that COVID-19 only affects affluent populations
- > **POEs:** highly porous borders

4. PRIORITY ACTIONS AND RECOMMENDATIONS

- Laboratory: PCR testing of persons identified through serological screening of high risk communities in Kafue; commissioning of new freezers for COVID 19 samples
- Surveillance and outbreak investigation: Mass screening and contact screening in Kafue, Lusaka and Kabwe; continued active case finding, monitoring of quarantined persons and responding to community alerts country wide.
- RCCE: Intensified activities in affected provinces and sustained preparedness in other provinces; continued radio/television discussion programmes and announcements; continued review of IEC materials as the outbreak evolves
- > **POEs:** continued active screening at all POEs







5. CONCLUSION

In the last 24 hours, Zambia recorded 5 new confirmed cases of COVID-19, all among health workers at the frontline. The government has directed that IPC measures in health facilities must be reinforced in order to protect frontline health workers. These include reorientation of all staff in IPC practices, designated senior members of staff assigned to enforce IPC compliance, increased stock of PPE to guarantee availability for all staff, and additional manpower assigned to ensure disinfection of all surfaces.







ANNEX 1: EPIDEMIOLOGICAL DATA AS OF 17:00HRS ON 21st APRIL 2020^{*}

Total Cases	I	Daily Total			ve since outb	reak declared	
Suspected cases		4					
Confirmed cases		5		70			
Recovered		0		35			
Diagnostics and Laboratory Testing							
Samples received**		325			4040		
Samples with results processed		479			3715		
COVID-19 positive		5		70			
COVID-19 negative		474			3645		
Samples with results pending		325		-			
Statistics By Health Facility	Kabwe MNC	Levy	Masaiti	Courtyard	Daily Total	Cumulative since outbreak declared	
Admissions/Discharges		1					
Confirmed Case Admissions	0	0	0	5	5	70	
Currently Admitted	1	21	2	8	32	-	
Recoveries	0	0	0	0	0	35	
Transferred in	0	0	0	0	0	7	
Transferred out	0	0	0	0	0	7	
Deaths		1	L	L	L	L	
		-					
Deaths among suspected cases	0	0	0	0	0	0	

*Reported figures may vary due to continual data cleaning and verification as part of quality assurance

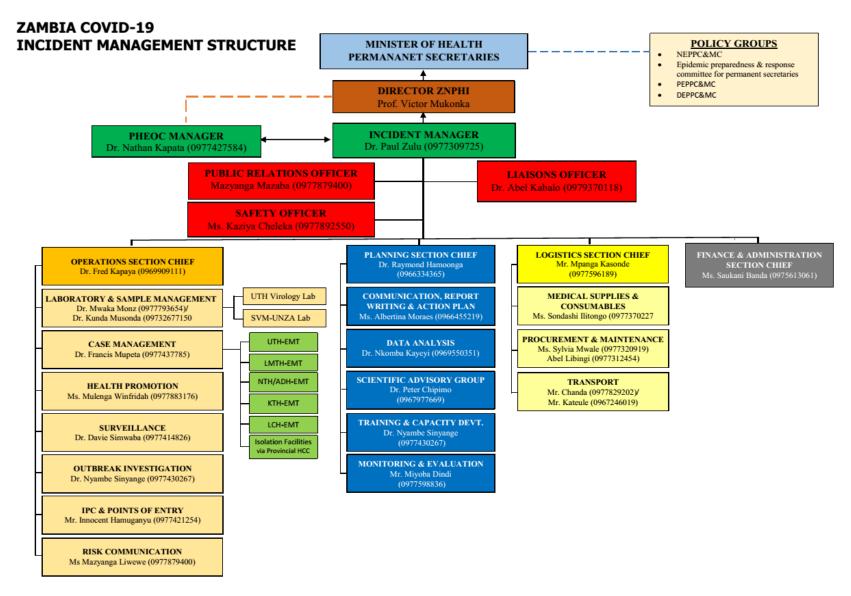
**Includes samples for re-test of confirmed positive cases







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









ANNEX 3: CORONAVIRUS DISEASE 2019 (COVID-19) CASE DEFINITIONS

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 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

<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.

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

<u>4. Person Under Investigation</u>: a suspected case, irrespective of admission status, with either history of travel to an area with local transmission or worked in/attended a health care facility treating COVID-19 infections or admission to a facility for severe pneumonia of unknown aetiology

5. 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 4: LIST OF DESIGNATED ISOLATION FACILITIES FOR THE COVID-19 OUTBREAK RESPONSE

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

	Chinsali	Nambuluma RHC
	Mafinga	Mulekatembo
Western	Senanga	Litambya RHC
	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	
	luano	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 Ngabwe	Itezhi tezhi Basic School/Uphill Scholl and and Itezhi Tezhi Boarding School Iwonde primary school
Copperbelt	Chililabomb we	Council Hall
	Chingola	Kalilo Health Centre
	Kalulushi	Kalulushi Urban Health Centre
	Kitwe	Garnerton Clinic
	Luanshya	Chibolya Clinic
	Lufwanyama	Shimukunami Rural Health Centre
	Masaiti	Masaiti District Hospital
	Mpongwe	Bwembelelo Health Post
	Mufulira	Mutundu RHC
	Ndola	Itawa clinic
	Mushidamo	Kichikwe RHC







North- western	Solwezi	SGH/Solwezi College of Nursing
	Kalumbila	Nkulumazhiba Health Facility
	Mwinilunga	Farmers Training College
	Ikelenge	Sachibondu Mission RHC
	Ikelenge	Mukangala RHC (Secondary site)
	Kasempa	Mukinge Mission
	Mufumbwe	Mufumbwe Day Secondary Sch
	Manyinga	Loloma Mission Hospital
	Kabompo	Government Guest House
	Zambezi	Chilenga Health Facility
	Chavuma	Chavuma District Hospital
Northern	Chilubi	Chaba RHC Chilubi RHC
	Kaputa	Kaputa RHC Kalaba RHC Kapepula HP

Kasama	Lukupa 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





