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NATIONAL PUBLIC HEALTH EMERGENCY OPERATION CENTER (PHEOC), ETHIOPIA

COVID-19 PANDEMIC PREPAREDNESS AND RESPONSE IN ETHIOPIA

WEEKLY BULLETIN

WHO Epi-Week- 03 (January 18 – 24, 2021)

BULLETIN Nº: 39

Issue Date: February 3, 2021

I. HIGHLIGHTS

- A total of 32,724 laboratory samples were tested in the WHO-Epi-Week-03.
- The laboratory test positivity rate for the WHO-Epi-Week-03 is 7.87%, which is equivalent to that of the preceding week (7.82%).
- A total of 2,572 new confirmed COVID-19 cases and 36 COVID-19 related deaths were reported during the WHO Epi-Week-03 bringing the total cases and death to 133,767 and 2,066 respectively.
- A total of 81,368 COVID-19 confirmed cases have been at Home Based Isolation and Care so far; 2,062 of these were enrolled in the WHO-Epi-Week-03.
- Out of total of 316,256 contacts of COVID-19 confirmed cases, 1,135 contacts were identified during the WHO Epi-week-03.
- The Ethiopian Institutions of Ombudsman (EIO) provided an award of recognition for Ministry of Health and Ethiopian Public Health Institute for their work in providing accurate, timely and up-to-date information to the public to help contain the spread of the coronavirus.



(Left to right) Dr. Ebba
Abate (Director General,
EPHI), Mr. Cleophas
Torori (Resident
Representative a.i,
UNDP Ethiopia), Dr.
Tegene Regassa (Public
Relation and
Communication
Director, Ministry of
Health) Dr. Endale Haile
(Chief Ombudsman of
Ethiopia)

BACKGROUND

The Ministry of Health (MOH) and Ethiopian Public Health Institute (EPHI) in collaboration with partners have intensified response efforts to prevent the spread and severity of Corona Virus Disease 2019 (COVID-19) in Ethiopia. The national and the regional Public Health Emergency Operations Center (PHEOC) has been activated and laboratory diagnosis capacity has been expanded to other national institutions, subnational and private laboratories.

The national and regional PHEOC are playing a pivotal role in coordinating resources from different responding agencies and coordinating COVID-19 related information through regular EOC meetings and partners' coordination forums. The MOH and EPHI are providing information to the public and stakeholders on a regular and uninterrupted manner using different means of communication modalities.

The WHO and other partners are currently supporting in scaling-up preparedness and response efforts and implementation of related recommendations suggested by the IHR Emergency Committee.

II. EPIDEMIOLOGICAL SITUATION

Global Situation

- Between December 31, 2019 and January 24, 2021, COVID-19 pandemic affected 235 countries/territories causing 97,284,415 cases and 2,106,897 deaths (CFR=2.17%) globally.
- Of the total cases and deaths reported since the beginning of the outbreak, 4,038,078 cases and 95,031 deaths were reported during the WHO Epi-Week-03 of the year 2021.
- The United States of America (USA) reported the highest number of cases (24,604,325) with CFR of 1.67% followed by India (10,654,533) cases) with a CFR of 1.44%.
- In Africa, 57 countries/territories have reported COVID-19 cases.
- As of January 24, 2021, a total of 3,428,049 cases and 84,422 deaths were reported across the continent (CFR=2.46%). Of these 180,467 cases and 6,079 deaths were reported during the WHO-Epi-Week-03.
- In Africa, South Africa reported the highest number of cases (1,404,839) with CFR of 2.89% followed by Morocco (464,844 cases) with a CFR of 1.74%.
- Ethiopia reported the highest number of COVID-19 confirmed cases in East Africa. See the summary dashboard below.

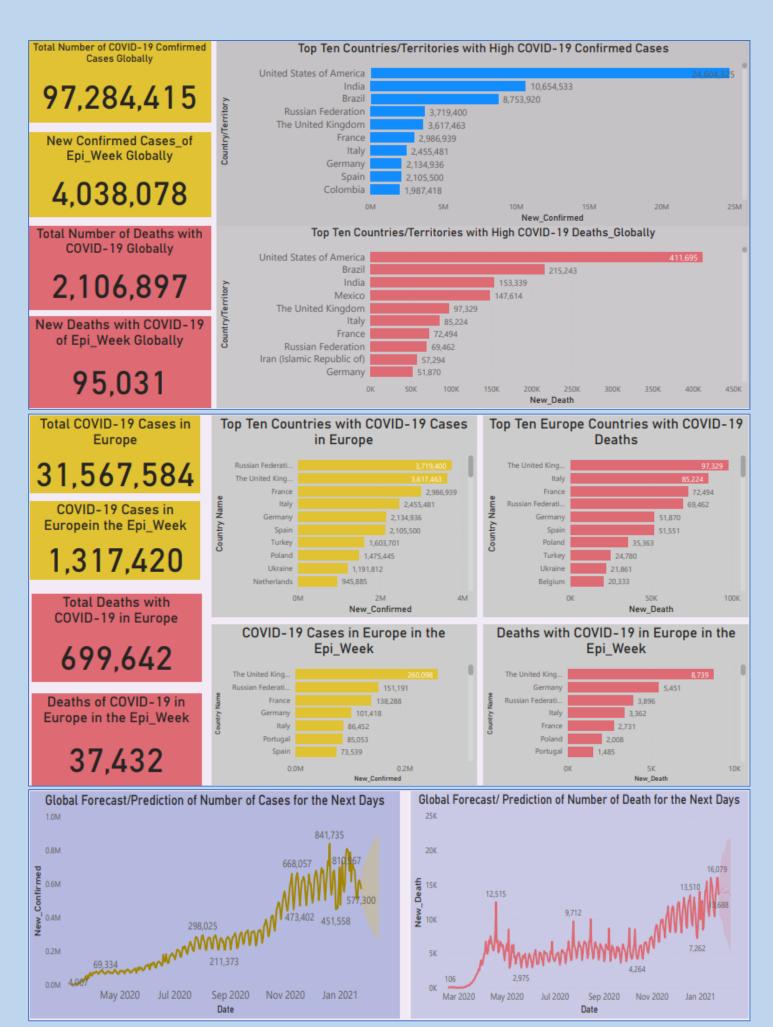


Fig. 1: COVID-19 Global Situation Update as of January 24, 2021 (Source: WHO)

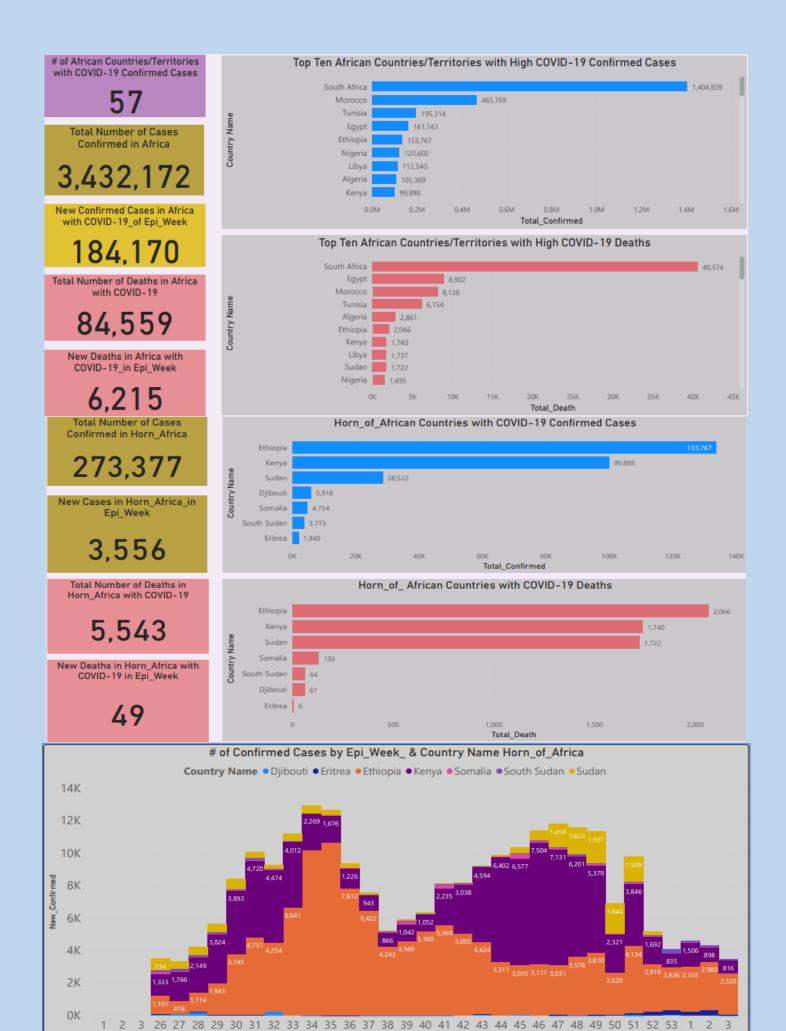


Fig. 2: COVID-19 Situation Update in Africa as of January 24, 2021 (Source: WHO)

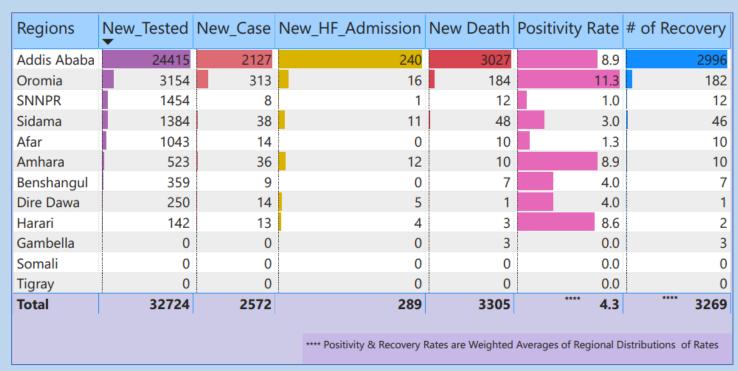
Epi_Week

2021

National COVID-19 situation:

- Two-thousand-five-hundred-seventy-two (2,572) newly confirmed COVID-19 cases (11% decrease compared to that of Epi-Week-02) and 36 COVID-19 related deaths (an equivalent increase compared to that of Epi-Week-02) were reported during the WHO Epi-Week-03.
- As of January 24, 2021, a total of 133,767 confirmed COVID-19 cases and 2,066 deaths were recorded in the country.
- For detail, see the summary dashboard below.

Table 1: Summary of National COVID-19 situation in the WHO-Epi-Week-03 of 2021



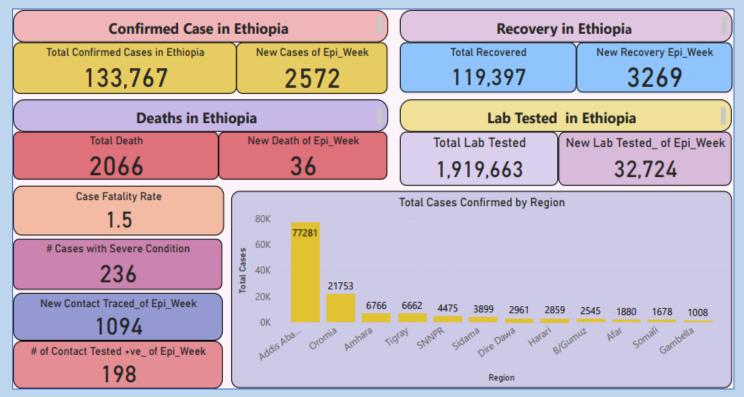


Fig. 3: Weekly summary of the COVID-19 situation in Ethiopia as of January 24, 2021, Ethiopia

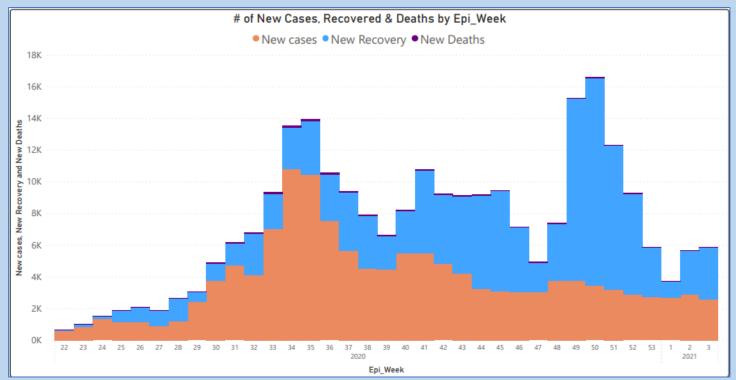


Fig. 4: COVID-19 confirmed cases, recovery and death by WHO Epi-Week as of January 24, 2021, Ethiopia

Epi-Surveillance and Laboratory Related Activities

There is ongoing travelers' health screening at point of entries (POEs), follow-up of international travelers, rumor collection, verification, investigation and information provision via toll free call center, active case detection by house to house search, contact listing, tracing and follow-up of persons who had contact with confirmed cases. There is also laboratory investigation of suspected cases, contacts of confirmed cases, SARI/pneumonia cases and community members.

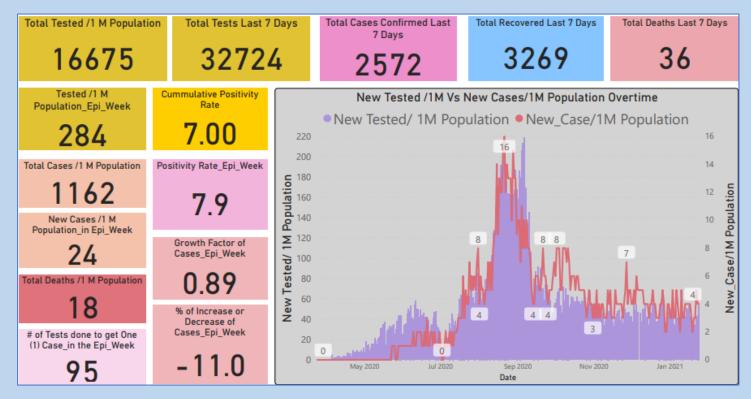


Fig. 5: Summary of COVID-19 confirmed cases in Ethiopia as of January 24, 2021.

Contact tracing and follow-up:

- As of January 24, 2021:
 - A total of 316,256 contacts of confirmed cases have been identified. Of these, 3,134 contacts were identified in the WHO-Epi-Week-03.
 - Of total contacts, 288,331 (91.17%) have completed 14 days follow-up, while 1,263 contacts are still on follow-up.
 - o 716 (0.23%) contacts have developed COVID-19 suggestive symptoms. Of these symptomatic contacts, 571 (79.75%) have tested positive.
- Overall, 27,062 (8.55%) of the contacts (symptomatic plus asymptomatic) have been tested positive.
- Contacts of the confirmed cases contributed for the 20.23% of the total cases.

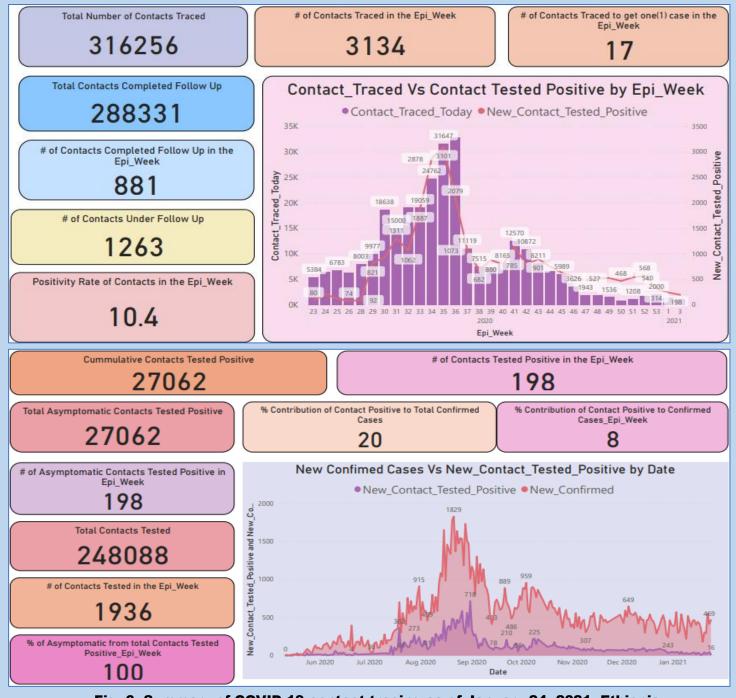


Fig. 6: Summary of COVID-19 contact tracing as of January 24, 2021, Ethiopia.

Rumors collection and verification from all sources

- As of January 24, 2021:
 - 340,022 rumors/alerts have been received and investigated. Of these, 4,060 rumors were reported in the WHO-Epi-Week-03.
 - o 257,918 (75.85%) of the rumors/alerts have fulfilled the suspected case definition.

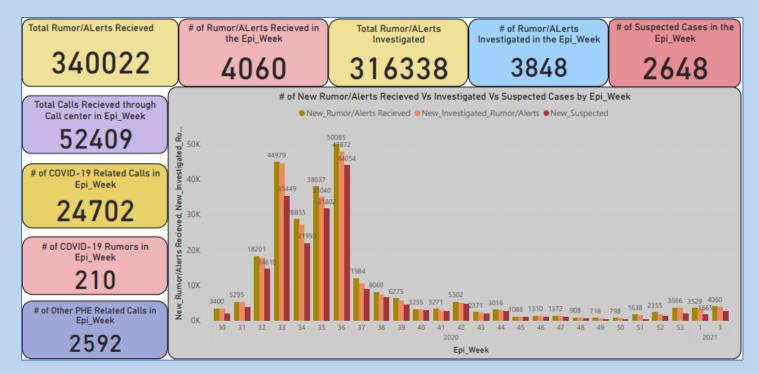


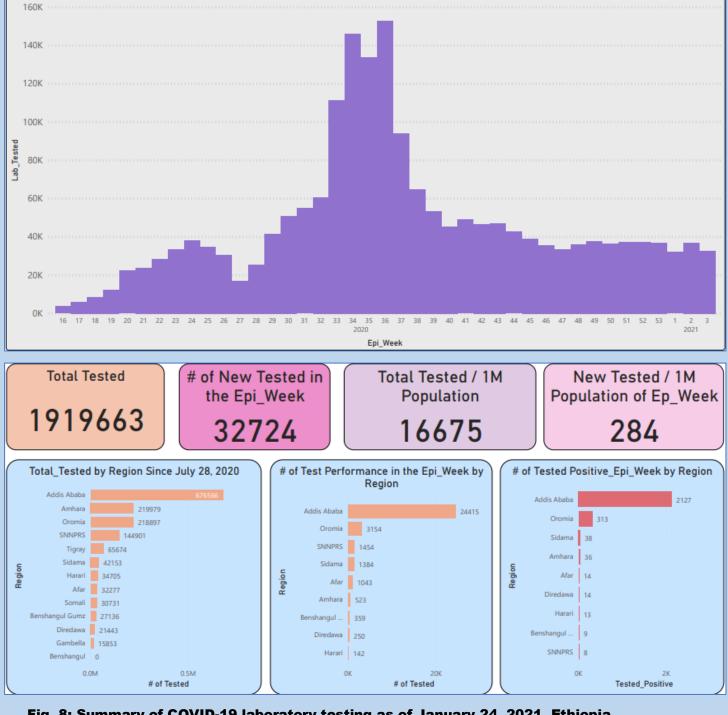
Fig. 7: Summary of COVID-19 rumor/alert investigation as of January 24, 2021, Ethiopia.

Point of entry and Quarantine related activities

- Since the start of the outbreak, 1,605,775 passengers have been screened at the Point of Entries and of these 584,012 (36.36%) were screened at Bole International Airport (BIA).
- Of the total passengers screened, 25,512 were screened for COVID-19 in the Epi-Week-03.

Laboratory related activities

- As of 24 January 2021, a total of 1,919,663 samples have been tested for COVID-19 by laboratories across
 the country.
- 32,724 laboratory tests were processed during the WHO Epi-Week-03.
- The laboratory test positivity rate for the WHO-Epi-Week-03 is 7.87%, which is equivalent to that of the preceding week (7.82%).
- The overall positivity rate for the laboratory test since the occurrence of the disease in the country is 6.97%.



COVID-19 Tested by Epi_Week

Fig. 8: Summary of COVID-19 laboratory testing as of January 24, 2021, Ethiopia.

Coordination and Leadership

- The national PHEOC is collaboratively working with stakeholders: government agencies, partner organizations, UN agencies, embassies, hospitals, Industrial parks and others.
- Morning briefing of IMS is being conducted every day by core IMS staffs and key partners' representatives.
- Biweekly virtual (zoom) meeting is being conducted with technical working group members, which comprises members from subnational level focal, key partners and stakeholders.
- Weekly leadership and strategic virtual meeting, chaired by the H.E MOH Minster, is being conducted to oversee and guide the response efforts.

• The Ethiopian Institutions of Ombudsman (EIO) provided an award of recognition for Ministry of Health and Ethiopian Public Health Institute for their work in providing accurate, timely and up-to-date information to the public to help contain the spread of the coronavirus. Dr. Ebba Abate (Director General, EPHI) and Dr. Tegene Regassa (Public Relation and Communication Director, Ministry of Health) received the award on behalf of EPHI and FMOH respectively. Access to information encompasses the core principles of democratic governance: participation, transparency and accountability and enable people to influence national and local government policy and practice. The UNDP Ethiopia is among the recipients of the EIO access to information award for its support to advance Access to Information (ATI) in Ethiopia.

IV. Case Management and Facility Readiness

- There were total of 3,269 newly recovered COVID-19 cases during the WHO Epi-Week-03, bringing the total number of recovered cases to 119,397.
- As of January 24, 2021:
 - 22,454 (91 in the Epi-Week-03) initially suspected cases are discharged after laboratory test became negative.
- Among the currently existing COVID-19 cases, there are 236 patients in severe clinical condition.

Home Based Isolation and Care (HBIC):

- So far, 81,368 COVID-19 confirmed cases have been on HBIC. Of them 75,994 (89.63%), have recovered and 11 (0.014%) died.
- Of these, 2,062 cases have been enrolled to HBIC, 3,060 cases have recovered and one died in the WHO-Epi-Week-03.
- As of January 24, 2021, there are 5,733 cases on HBIC.
- So far, 724 (71 of them in the Epi-Week-03) of the cases have been transferred from treatment centers to HBIC after improvement.
- So far, 465 (57 of them in Epi-Week-03) of the cases have been transferred from HBIC to treatment centers for better care.

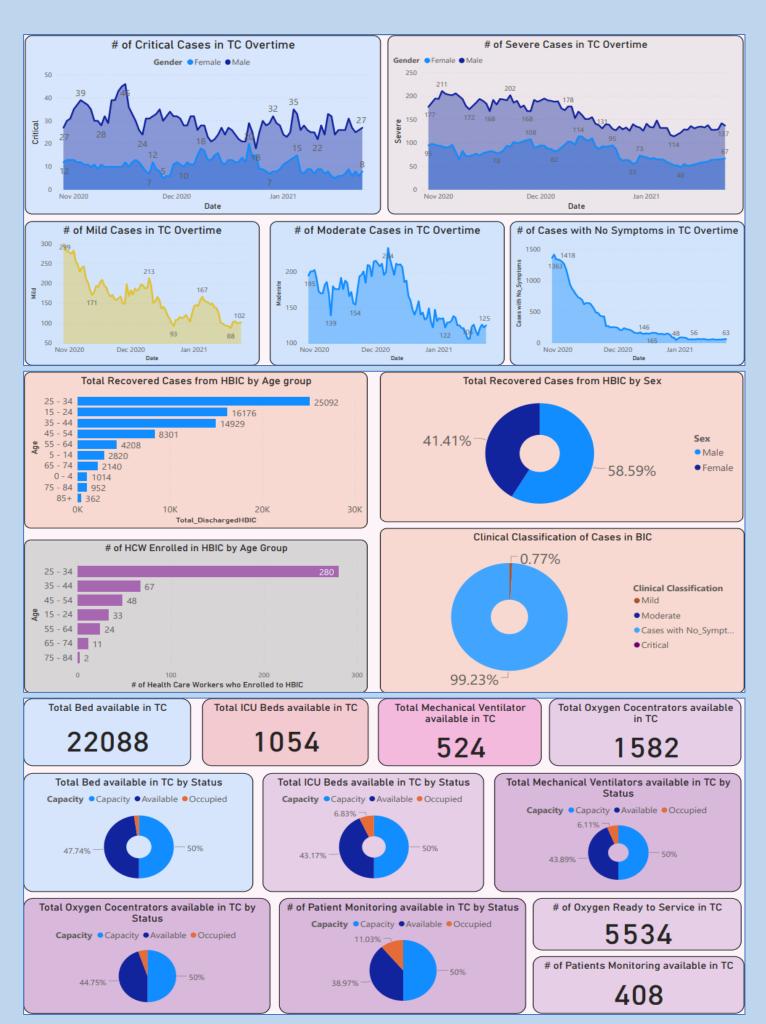


Fig. 11: Summary of COVID-19 case management and facility readiness in Ethiopia, as of January 24, 2021.

V. Risk Communication and Community Engagement (RCCE)

- Daily press statement is being given on COVID-19 situation on daily basis through Mass Media.
- Two Mobile SMS Messages were developed and shared to all mobile users on Correct & Consistent use of face mask to protect themselves and their families from the infection of COVID-19.
- Communication approaches for urban and rural community context on 'No mask No Services' initiative was
 prepared and the advocacy message to be delivered by the Ministry of Health for the national launching of
 'No Mask No Services' was developed and shared to Ministry of health.
- COVID-19 related key messages and updates shared on social media.





VI. Logistic and Supplies

- There is ongoing distribution of PPE, Viral Transport Media (VTM), swabs, pharmaceuticals and other medical supplies to isolation and treatment centers.
- Weekly stock status analysis report (Stock on hand, procurement, stock on pipeline, distribution update) was performed by incorporating the regional stock reports and laboratory commodity procurement was followed and monitored.

VII. Challenges and Way Forward

Challenges

- Happenings of super spreading events-Mass gatherings with poor physical distancing and facemask use which exacerbates the spread of COVID-19.
- Weak public adherence to the public health and social preventive measures.
- Increasing number of cases being detected in the community.
- Decreased leadership engagement and reluctant sub-national structure to sustain the pandemic response coordination.
- Low stock status of personal protective equipment is still a problem.

Way Forward

- Intensify risk communication and community engagement activities.
- Strengthened collaboration and coordination with key stakeholders and partners.
- Advocate and strengthen Home Based Isolation and Care (HBIC).
- Conduct intensive testing of high-risk population group and contacts of confirmed cases for COVID-19.
- Enhance technical support, coordination and timely and accurate information sharing at all levels.
- Enhance active surveillance for COVID-19 such as house-to-house case search and detection in the community.
- Intensification of a capacity building trainings and orientation including through virtual/online platforms.
- Strengthen and sustain essential health services other than COVID-19.

VIII. COVID-19 Related News:

- Here are 7 of the biggest coronavirus vaccine myths busted by experts: https://www.cnbc.com/2021/01/21/coronavirus-vaccine-myths-busted-by-experts.html
- PCR, antigen and antibody: Five things to know about coronavirus tests: https://horizon-magazine.eu/article/pcr-antigen-and-antibody-five-things-know-about-coronavirus-tests.html

- 'Demographic crisis': Poland population shrinking under pandemic: https://www.aljazeera.com/news/2021/1/26/demographic-crisis-poland-population-shrinking-under-pandemic
- US confirms first case of Brazil COVID-19 variant: https://www.aljazeera.com/news/2021/1/26/us-confirms-first-case-brazil-covid-19-variant
- Researchers succeed in taking first 3D photo of coronavirus: https://www.dw.com/en/researchers-succeed-in-taking-first-3d-photo-of-coronavirus/a-56290365
- COVID-19: Ice cream tests positive for coronavirus in China: https://news.sky.com/story/covid-19-ice-cream-tests-positive-for-coronavirus-in-china-12188761

IX. Public Health Policy Recommendation

Advice for the Public:

- For any individual confirmed to have COVID-19 and who is candidate for Home Based Isolation and Care:
 - o Properly isolate from other family members.
 - Take full responsibility in prevention of transmission
 - Strictly adhere to the National Directive of Home-Based Isolation& Care.
 - Provide reliable information during regular follow up either by phone or home visit.
 - Report to nearest health facilities/follow up team in case of any emergency, appearance of new symptoms or worsening of existing symptoms.
- It is important to be informed of the situation and act appropriately to protect yourself and your family.
 - Wash hands frequently
 - Don't touch your mouth, nose or eye by unwashed hands
 - o Keep physical distancing; avoid mass gathering and shaking hands.
- For most people, COVID-19 infection will cause mild illness however, it can make some people very ill and, in some people, it can be fatal.
- Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease.
- If anybody had contact with a COVID-19 confirmed patient, he/she should call 8335 or 952 or report to regional toll-free lines or to the nearby health facilities.

National/Regional official websites, social media pages and toll-free hotline for COVID-19 information

MOH/EPHI/Region	Facebook page	Toll-free hotline
Ethiopian Public Health Institute Main Website	https://www.ephi.gov.et/	8335/952
Ethiopian Public Health Institute COVID-19 Website	https://covid19.ephi.gov.et/	
Ethiopian Public Health Institute Facebook Page	https://www.facebook.com/ephipage/	

Ethiopian Public Health Institute	https://twitter.com/EPHIEthiopia	
Twitter Page Ethiopian Public Health Institute	https://t.me/EthPHI	
Telegram Channel	The state of the s	
Ethiopian Public Health Institute	https://www.youtube.com/channel/UCvvTzeY-	
YouTube Channel	IJiQfEFBULH9Mkw	
Ministry of Health, Ethiopia Website	www.moh.gov.et	952
Ministry of Health, Ethiopia	https://www.facebook.com/EthiopiaFMoH/	
Facebook Page		
Afar Regional Health Bureau	https://www.facebook.com/afarrhb.org/	6220
Amhara Regional Health	https://www.facebook.com/Amhara-Healthbureau-	6981
Bureau	682065755146948/	
Benishangul Gumuz Regional	https://www.facebook.com/Benishangul-Gumuz-Health-	6016
Health Bureau	Bureau-1676282159265517/	
Gambela Regional Health	https://fb.me/gambellaregionhealthbureau	6184
Bureau		
Harari Regional Health Bureau	https://www.facebook.com/Harari-Regional-Health-	6864
	Bureau-1464182130355007/	
Oromia Regional Health Bureau	https://www.facebook.com/OromiaHealth/	6955
Somali Regional Health Bureau	https://www.facebook.com/srhbdotcom/	6599
SNNP Regional Health Bureau	https://www.facebook.com/snnprhealthbureau/?ref=br_rs	6929
Tigray Regional Health Bureau	https://www.facebook.com/tigrayrhb/	6244
Dire Dawa city Administration	https://www.facebook.com/Dire-Dawa-Administration-	6407
Health Bureau	Health-Bureau-1371606266279524/	
Addis Ababa City Administration	https://www.facebook.com/aahb.gov.et/	6406
Health Bureau		

Health Evidence summary

Articles/Comment/ Correspondence/ Editorials	Summary
Evolution of antibody immunity to SARS-CoV-2 https://doi.org/10.1038/s41586-021-03207-w	 This paper reports humoral memory response in a cohort of 87 individuals assessed at 1.3 and 6.2 months after infection. IgM, and IgG anti-SARS-CoV-2 spike protein receptor binding domain (RBD) antibody titers decrease significantly with IgA being less affected. Concurrently, neutralizing activity in plasma decreases by fivefold in pseudotype virus assays. In contrast, the number of RBD-specific memory B cells is unchanged. Memory B cells display clonal turnover after 6.2 months, and the antibodies they express have greater somatic hypermutation, increased potency and resistance to RBD mutations, indicative of continued evolution of the humoral response. Memory B cell response to SARS-CoV-2 evolves between 1.3 and 6.2 months after infection in a manner that is consistent with antigen persistence.
Early High-Titer Plasma Therapy to Prevent Severe Covid-19 in Older Adults https://www.nejm.org/doi/10.1056/NEJMoa2033700	 A randomized, double-blind, placebo-controlled trial of convalescent plasma with high IgG titers against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in older adult patients within 72 hours after the onset of mild Covid-19 symptoms was conducted. The trial was stopped early at 76% of its projected sample size because cases of Covid-19 in the trial region decreased considerably and steady enrollment of trial patients became virtually impossible.

	Early administration of high-titer convalescent plasma against SARS-CoV-2 to mildly ill infected older adults reduced the progression of Covid-19.
Circuits between infected macrophages and T cells in SARS-CoV-2 pneumonia https://doi.org/10.1038/s41586-020-03148-w	 Bronchoalveolar lavage fluid samples were collected from 88 patients with SARS-CoV-2-induced respiratory failure and 211 patients with known or suspected pneumonia from other pathogens and subjected them to flow cytometry and bulk transcriptomic profiling. Single-cell RNA-seq was performed on 10 bronchoalveolar lavage fluid samples collected from patients with severe COVID-19 within 48 hours of intubation. SARS-CoV-2 causes a slowly unfolding, spatially limited alveolitis in which alveolar macrophages harboring SARS-CoV-2 and T cells form a positive feedback loop that drives persistent alveolar inflammation.
Risk of adverse outcome of COVID-19 among patients in secure psychiatric services: observational cohort study https://doi.org/10.1192/bjo.2020.169	 Patients in secure forensic psychiatric services represent a high-risk group for adverse outcomes in the event of SARS-COV-2 infection. Population-based guidance on self-isolation and other precautions based on chronological age may not be sufficient. There is an urgent need for better physical health research and treatment in this group

COVID-19 updates and sources of evidence:

Source	Link
WHO Coronavirus (COVID-19) dashboard	https://covid19.who.int/
Africa CDC Dashboard, COVID-19	https://au.int/en/covid19
Surveillance Dashboard	
WHO COVID-19 daily situation reports	https://www.who.int/emergencies/diseases/novel-
	coronavirus-2019/situation-reports
WHO Academy mobile learning app for health	Android-
workers, COVID-19 information	https://play.google.com/store/apps/details?id=org.who.WH
	OA Apple- https://apps.apple.com/us/app/who-
	academy/id1506019873





The above presented Quick Reader (QR) code takes you to a portal that you can access updates and all COVID-19 related information available (https://www.ephi.gov.et/index.php/public-health-emergency/novel-corona-virus-update)

DISCLAIMER

This weekly bulletin is produced based on figures pulled from official releases of the World Health Organization and activities and reports of all the sections under the Incident management System.

This Weekly Bulletin series of publications is published by the Ethiopian public health Institute (EPHI), public health emergency operation center (PHEOC). The aim of this bulletin is to inform decision makers within the institute and FMOH, UN agencies and NGOs about COVID-19 preparedness and response activities. All interested health and other professionals can get this bulletin at the Institute website; www.ephi.gov.et

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