

INTERNATIONAL OUTBREAKS OF IMPORTANCE

An update on the novel coronavirus disease 2019 (COVID-19) outbreak, South Africa

On 31 December 2019, the World Health Organization (WHO) China country office reported a cluster of pneumonia cases in Wuhan City, Hubei Province of China now known to be caused by a novel virus. Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has been confirmed as the causative virus of coronavirus disease 2019 (COVID-19). Cases have now been identified in over 100 countries including South Africa. On 15 March 2020, President Cyril Ramaphosa declared a national state of disaster in South Africa. Along with this, he announced school closures and travel bans as the number of novel coronavirus (COVID-19) infections continued to rise.

On 5 March 2020, South Africa reported its first imported case of COVID-19. The patient was a 38-year-old male from KwaZulu-Natal who travelled to Italy with his wife. They were part of a group of 10 people. One person travelled directly onward to the United Kingdom and the other 9 group members arrived back in South Africa on March 1, 2020. The patient consulted a private general practitioner on March 3, with symptoms of fever, headache, malaise, a sore throat and a cough. Of 9 members of the travel group who returned to South Africa, 7 individuals were diagnosed with laboratory-confirmed COVID-19. As of 23 March 2020, the number of confirmed cases of SARS-CoV 2 in South Africa had increased to 402, with no reported deaths to date. Here we present preliminary data on the first 100 laboratory-confirmed cases of COVID-19 in South Africa.

The specimen of the first laboratory-confirmed case of SARS-CoV-2 was submitted on the 3 March 2020.

Subsequently, from 6 March numbers of confirmed cases increased rapidly (Figure 1). A majority of cases were from the Gauteng Province (n=54), followed by Western Cape Province (n=25), KwaZulu-Natal Province (n=18), Mpumalanga Province (n=2) and Limpopo Province (n=1) (Figure 2). Overall, a majority of the cases were in the age group 30-39 year, n=30 (Figure 3). Among the first 100 confirmed cases, 68 were male.

The NICD with the National Department of Health continues to enhance surveillance activities for COVID-19. Guideline for case finding, diagnosis management and public health response to the COVID-19 have been published by the NICD on <http://www.nicd.ac.za/diseases-a-z-index/covid-19/>.

Note: While influenza vaccine does not protect against COVID-19, the clinical signs and symptoms of influenza and COVID-19 are similar. If available, influenza vaccination is recommended to decrease the chances of getting influenza during the period of co-circulation of influenza and COVID-19. For this year's influenza vaccination campaign, in light of COVID-19, the Department of Health is prioritising publicly available influenza vaccination as follows: healthcare workers, individuals aged >65 years, pregnant women, people with chronic disease and people living with HIV.

We would like to acknowledge all members of the COVID-19 response team. All contributors are thanked for their inputs.

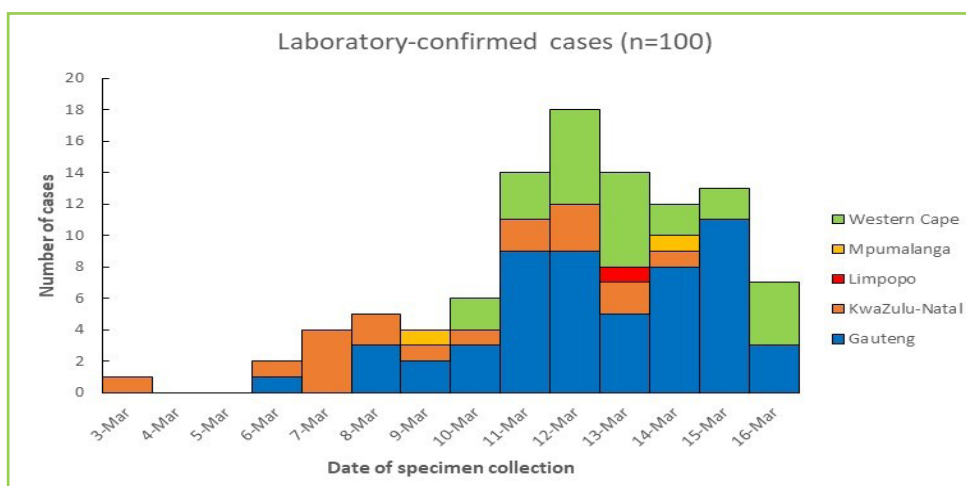


Figure 3. Epidemic curve of COVID-19 laboratory-confirmed cases of COVID-19 by date of specimen collection, 3-16 March 2020, South Africa n=100.

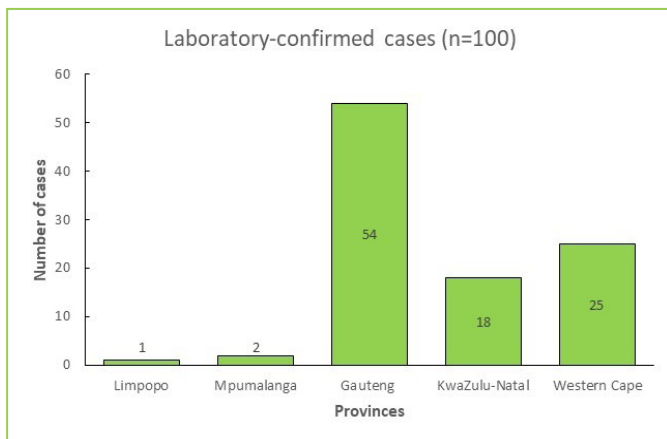


Figure 4. Distribution of COVID-19 laboratory-confirmed cases by province, 3-16 March 2020, South Africa n=100

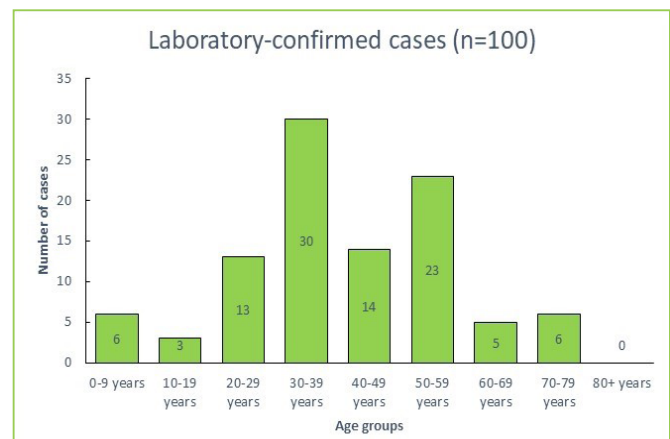


Figure 5. Distribution of COVID-19 laboratory-confirmed cases by age group, 3-16 March 2020, South Africa n=100 .

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An update on Ebola virus disease outbreak, Democratic Republic of Congo

The Ebola virus disease (EVD) outbreak in northeast Democratic Republic of the Congo (DRC) still remains a serious public health concern internationally since the outbreak was declared on 1 August 2018. There have been positive signs that the number of cases is slowly reducing, but it is unclear when it may end. There have been no new cases of EVD reported in the ongoing outbreak in the DRC since 17 February 2020. On 3 March 2020, the only person confirmed to have EVD in the last 21 days was discharged from an Ebola Treatment Centre (ETC) after recovering and testing negative twice for the virus. On 9 March, the last 46 contacts finished their follow-up. These are important milestones in the outbreak.

As of 17 March 2020, a total of 3 444 EVD cases were reported from 29 health zones, including 3 310 confirmed and 134 probable cases, of which 2 264 cases died (overall case fatality ratio 66%). Of the total confirmed and probable cases, 56% (1 931) were female, 28% (975) were children aged less than 18 years, and 5% (171) were healthcare workers. Although there is a reduced trend and spread of the outbreak, there is still a risk of re-emergence of EVD. It is critical to maintain surveillance and response operations until and after the end of

outbreak declaration. The World Health Organization (WHO) continuously monitors changes to the epidemiological situation and context of the outbreak to ensure that support to the response is adapted to the evolving circumstances. The latest risk assessment from WHO concluded that the national and regional risk levels remain high, while global risk levels remain low.

From 9 to 15 March 2020, over 32 000 alerts were reported and investigated. Of these, 2 550 alerts were validated as suspected cases, requiring specialised care and laboratory testing to rule-out EVD. During this same period, 2 760 samples were tested, including 1 565 blood samples from alive suspected cases, 405 swabs from community deaths, and 790 samples from re-tested patients.

More than 249 395 contacts have been registered to date, and none were under surveillance as of 10 March 2020. On average, 91% of contacts were followed daily in the last seven days in health zones with continued operations. An average of 4 781 alerts were reported per day over the last seven days, of which 4 669 (99%) were investigated within 24 hours of reporting. As of 14 March 2020, there are nine operational ETC, and 12 Ebola transit centres located in North Kivu, South Kivu and Ituri provinces. Ebola vaccinations continue