

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

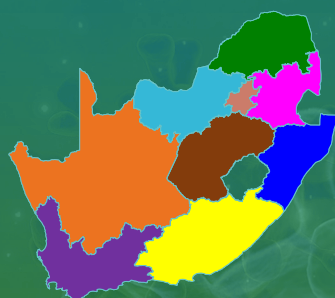


NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES

Division of the National Health Laboratory Service

SOUTH AFRICA WEEK 6 2021

CUMULATIVE DATA FROM



CASES

1 491 807
IN TOTAL

13 133
THIS WEEK

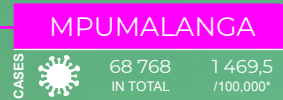
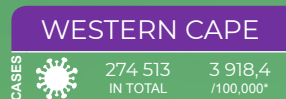


PERSONS

2 502,1
INCIDENCE RISK*

40
MEDIAN AGE

PROVINCES AT A GLANCE



* Incidence risk - cases per 100 000 persons
** based on samples collected/received in current reporting week

SUMMARY

Overview of report

Disease surveillance is a core function of the National Institute for Communicable Diseases (NICD), a division of the National Health Laboratory Service (NHLS). This report summarises data from a national laboratory-based surveillance system that is used to monitor the coronavirus disease 2019 (COVID-19) pandemic in South Africa. This report is based on data collected up to 13 February 2021 (week 6 of 2021). Note: COVID-19 is the name of the disease and SARS-CoV-2 is the name of the virus. Trends in numbers of new cases by province and age group may be affected by changes in testing practice and delays in testing of specimens. The numbers reported may change as more data become available.

Highlights

- As of 13 February 2021, a total of 1 491 807 laboratory-confirmed COVID-19 cases had been detected in South Africa. Of these, 15 672 were cases reported since the last report (week 5 of 2021). There was a 34.8% decrease in number of new cases detected in week 6 of 2021 (13 133) compared to the number of new cases detected in week 5 of 2021 (20 148), possibly related in part to delays in reporting.
- An additional 1 609 deaths were reported since the last report. The overall case-fatality ratio is 3.2% (47 899/1 491 807).
- In the past week, the Gauteng Province reported the highest proportion of the new cases detected (3 914/13 133, 29.8%), followed by the KwaZulu-Natal Province (2 812/13 133, 21.4%), and the Western Cape Province (1 981/13 133, 15.1%).
- In keeping with past four weeks, in the past week, all provinces reported a decrease in weekly incidence risk, compared to the previous week. The decrease in weekly incidence risk ranged from 3.5 cases per 100 000 persons (33.2% decrease) in the Eastern Cape Province to 20.1 cases per 100 000 persons (45.2% decrease) in the KwaZulu-Natal Province.
- In week 6, Northern Cape Province reported the highest weekly incidence risk (32.8 cases per 100 000 persons), followed by the Western Cape Province (28.3 cases per 100 000 persons), the Free State Province (27.9 cases per 100 000 persons), and the Gauteng Province (25.3 cases per 100 000 persons).
- The second wave peaked in week 1 of 2021, all districts have reported decreasing numbers of new cases since week 3 of 2021.

INCIDENCE
RISK FOR
CURRENT WEEK

22,0
CASES PER
100 000
PERSONS

29,8%
OF CASES
REPORTED IN
GAUTENG IN
CURRENT WEEK

IN CURRENT
WEEK, THE
HIGHEST
WEEKLY
INCIDENCE
RISK WAS IN
CASES AGED
80+ YEARS (56,3
CASES PER 100
000 PERSONS)

Methods

Testing for SARS-CoV-2 began on 28 January 2020 at the NICD and after the first case was confirmed in early March 2020, testing was expanded to a larger network of private and NHLS laboratories. Respiratory specimens were submitted from persons under investigation (PUI). Initially, tested individuals were those who had travelled to countries with COVID-19 transmission but the PUI definition was changed over time. Community symptom screening and referral for PCR testing was implemented in April 2020 but the strategy was changed to a more targeted approach in May 2020. Community screening was largely discontinued and testing efforts then focussed on areas identified as hot spots and on investigating clusters. Contacts of cases were traced and tested if symptomatic. In some provinces and in certain circumstances (e.g. closed settings, workplaces), asymptomatic contacts were tested. In recent weeks, testing has been prioritised for healthcare workers and hospitalised patients. Laboratories used any one of several in-house and commercial PCR assays to test for the presence of SARS-CoV-2 RNA. Testing for SARS-CoV-2 using rapid antigen-based tests was implemented during November 2020. We excluded specimens collected outside South Africa. Date of specimen receipt in the laboratory was used when date of specimen collection was missing. A case of COVID-19 was defined as any person, resident in South Africa, with a single positive SARS-CoV-2 PCR or antigen test. For reports published from week 41 of 2020 onwards we used mid-year population estimates from Statistics South Africa for 2020 to calculate the incidence risk (cumulative or weekly incidence), expressed as cases per 100 000 persons. In historical reports published from epidemiologic week 10 (during the start of COVID-19 epidemic in South Africa) to week 40 of 2020, 2019 mid-year population estimates were used. Aggregate data on the number of deaths by province were obtained from the Department of Health. Data on number of tests conducted in the past week as reported in the simultaneously-published COVID-19 weekly testing report was used to calculate tests conducted per 100 000 population. Data on province and district allocation was based on geocoding algorithm using in order of priority (i) completeness of patient data, (ii) submitting doctor's address, (iii) registering doctor's address and as final option, (iv) the guarantor's address data. The geocoding algorithm used the most complete data for assigning data on province and district where adequate information was provided on the lab request form at the time of sample collection. Data on district allocation may lag resulting in number of cases in recent weeks missing district allocation. Prevalence and incidence risk by districts should be interpreted with caution.

We estimated the time-varying (weekly) doubling time of the COVID-19 epidemic for the provinces with sufficient data and from weeks with sufficient number of cases and complete data (week 12 to the week before the current reporting period). The unit of analysis (epidemiological week) was defined from Sunday to the following Saturday. We first estimated the weekly growth rate of the epidemic by fitting a linear regression model to the logarithm of the daily cumulative number of laboratory-confirmed COVID-19 cases. We then estimated the doubling time for each week using the following formula $\log(2)/gr$ (where gr is the estimated weekly growth rate). An increase in the doubling time may suggest a slowing of transmission but this may also be affected by changes in testing strategy or care seeking. Until the week 29 report, new cases were defined as all cases reported since the last report, irrespective of when the sample was collected. Subsequent to the week 29 of 2020 report, new cases are now defined as cases detected in the past epidemiologic week based on date of sample collection or sample receipt. It is therefore possible for numbers reported as new cases for the current reporting week not to tally with total additional cases reported since the last report. This will be the case when there was a delay in reporting of cases.

National and provincial trends of COVID-19 cases in South Africa

As of 13 February 2021, a total of 1 491 807 laboratory-confirmed COVID-19 cases were reported in South Africa (Figures 1 and 2). This is 15 672 more cases than the number reported in the last report (week 5 of 2021 report). The number of new cases detected in week 6 of 2021 (13 133) was lower than the number of new cases detected in week 5 of 2021 (20 148), this represented a 34.8% decrease in the number of new cases compared to the previous week, possibly in part related to delays in reporting. In the past week, the Gauteng Province reported the highest number of new cases (3 914/13 133, 29.8%), followed by the KwaZulu-Natal Province (2 812/13 133, 21.4%), and the Western Cape Province (1 981/13 133, 15.1%) (Table 1). Five provinces, Gauteng (398 506/1 491 807, 26.7%), KwaZulu-Natal (324 754/1 491 807, 21.8%), Western Cape (274 513/1 491 807, 18.4%), Eastern Cape (193 334/1 491 807, 13.0%), and Free State (78 658/1 491 807, 5.3%) continued to report the majority (1 269 765/1 491 807, 85.1%) of total COVID-19 cases in South Africa. In keeping with the data reported in the previous weeks, there was minimal change in percent contribution of cases in the different provinces from week 5 to week 6 of 2021.

The cumulative incidence risk for the country increased from 2 480.1 cases per 100 000 persons in week 5 of 2021 to 2 502.1 cases per 100 000 persons in week 6 of 2021. The cumulative incidence risk varied by province over time (Figure 3). This is partly explained by testing differences by province (Table 1). The Western Cape Province reported

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the highest cumulative incidence risk (3 918.4 cases per 100 000 persons), followed by the Eastern Cape Province (2 871.0 cases per 100 000 persons), the KwaZulu-Natal Province (2 816.2 cases per 100 000 persons), the Free State Province (2 685.6 cases per 100 000 persons), the Gauteng Province (2 573.0 cases per 100 000 persons), and the Northern Cape Province (2 560.7 cases per 100 000 persons). The other provinces continued to report cumulative incidence risk below 2 000 cases per 100 000 persons, with Limpopo Province reporting the lowest cumulative incidence risk (1 037.9 cases per 100 000 persons). The Northern Cape Province reported the highest weekly incidence risk (32.8 cases per 100 000 persons) in week 6 of 2021, followed by the Western Cape Province (28.3 cases per 100 000 persons), the Free State Province (27.9 cases per 100 000 persons), and Gauteng Province (25.3 cases per 100 000 persons). The weekly incidence risk in all the other provinces were below 25 cases per 100 000 persons. In the past week, all provinces reported a decrease in weekly incidence risk compared to the previous week. The decrease in weekly incidence risk ranged from 3.5 cases per 100 000 persons (33.2% decrease) in the Eastern Cape Province to 20.1 cases per 100 000 persons (45.2% decrease) in the KwaZulu-Natal Province (Figure 4). Some of the reductions in week 6 of 2021 weekly incidence risk could be as a result of reporting delays. The second wave seems to have peaked, the weekly number of new cases detected has been declining since week 51 of 2020 in

the Eastern Cape and since week 2 of 2021 in all the other provinces. Among the five provinces reporting the majority of cases in South Africa to date, doubling time of number of cases varied with time. In week 5 of 2021, the estimated doubling time of number of cases increased in all provinces, Gauteng Province (from 244.4 days to 325.4 days, 33.1% increase), the Free State Province (from 187.0 days to 321.2 days, 71.7% increase), Eastern Cape Province (from 618.8 days to 1 210.3 days, 95.6% increase), Western Cape Province (from 281.1 days to 433.7 days, 54.3% increase), and the Kwazulu-Natal Province (from 166.3 days to 287.2, 72.7% increase) (Figure 5).

The case-fatality ratio (CFR) is 3.2% (47 899/1 491 807); an additional 1 609 deaths were reported since the last report. The number of deaths reported in the past week was lower than the number reported in the previous week, 1 609 compared to 2 126. A CFR calculated in this way (number of deaths/number of diagnosed cases) is subject to numerous limitations. Because deaths are delayed in relation to cases, as case numbers decrease rapidly, the crude CFR may increase as a result of a more rapid reduction in the denominator compared to the numerator. The CFR may be an underestimate as deaths in hospital are more likely to be reported than deaths out of hospital. In addition, occurrence and reporting of deaths may be delayed to several weeks after case diagnoses.

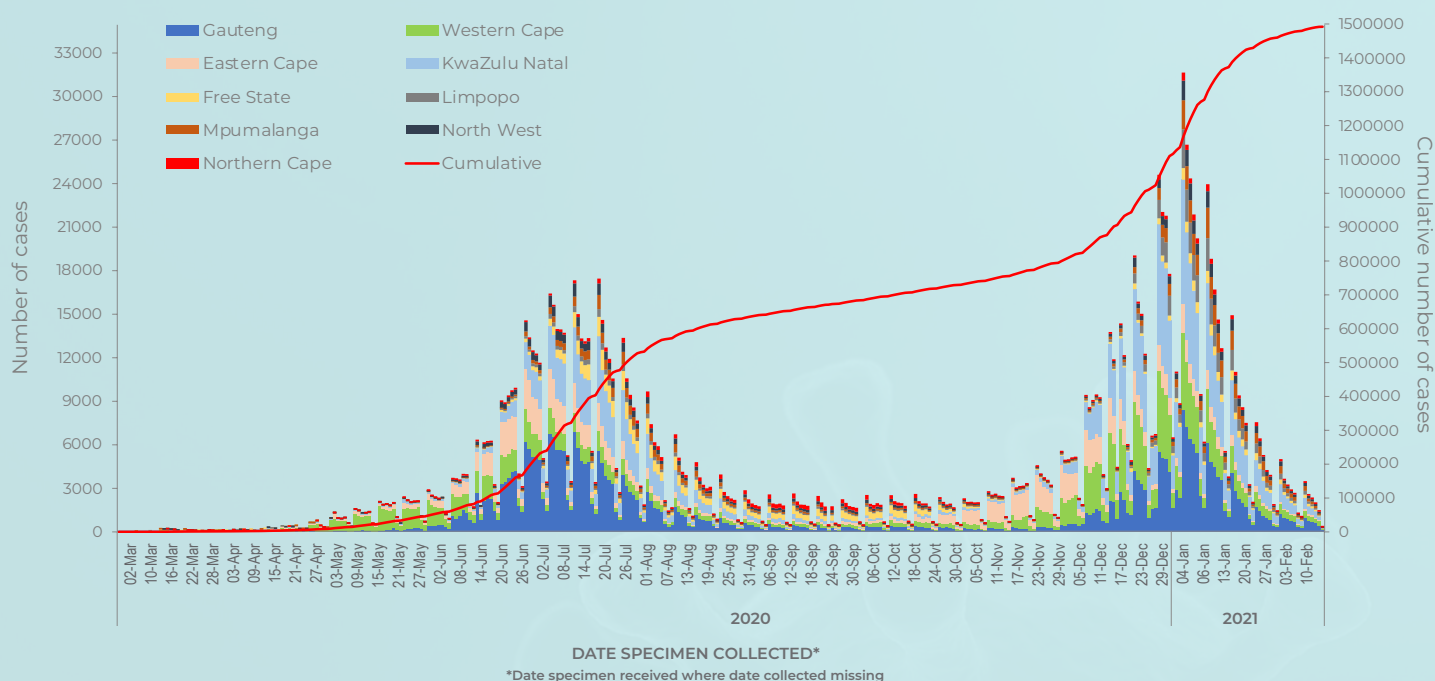


Figure 1. Number and cumulative number of laboratory-confirmed cases of COVID-19 by province and date of specimen collection, South Africa, 3 March 2020 – 13 February 2021 (n=1 491 807)

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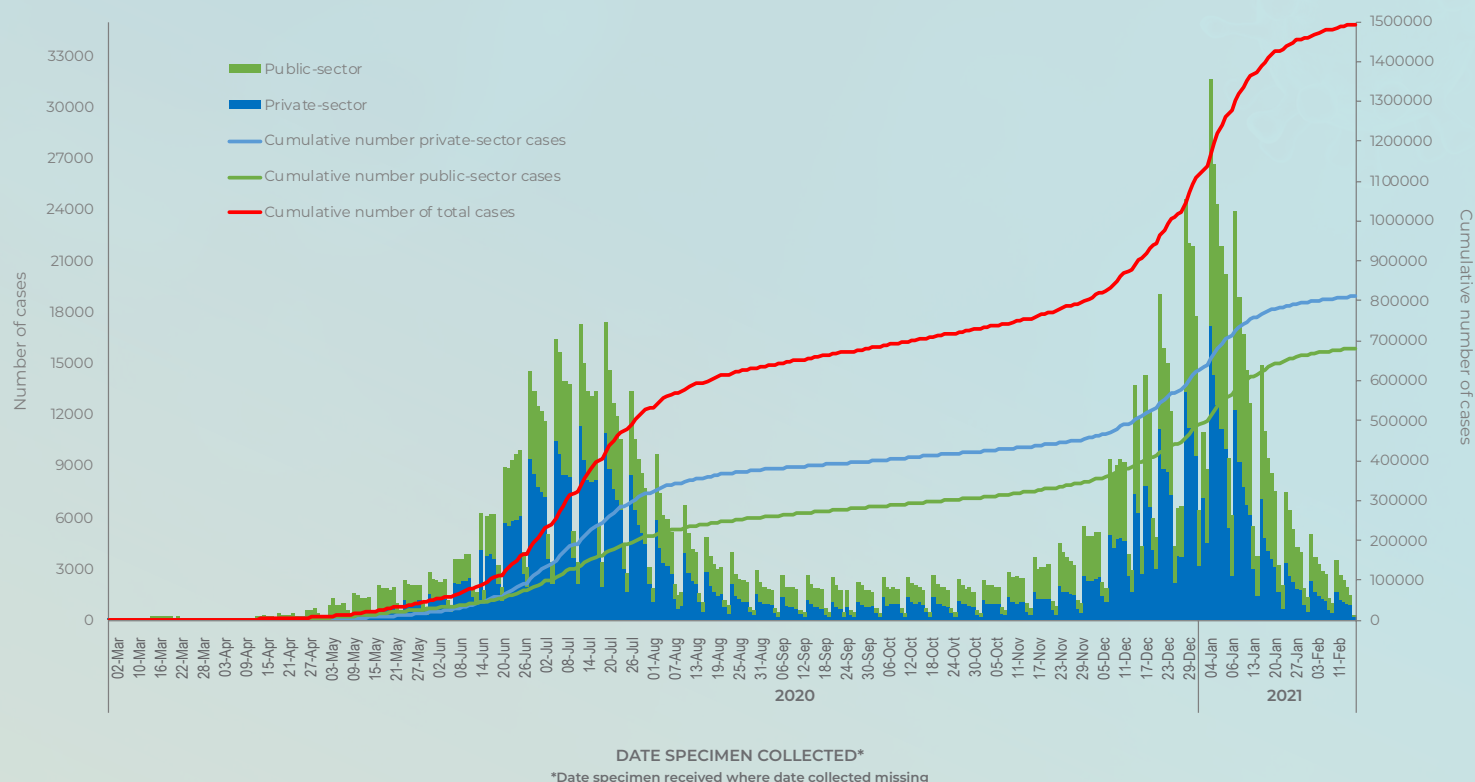


Figure 2. Number and cumulative number of laboratory-confirmed cases of COVID-19, by testing laboratory sector and date of specimen collection, South Africa, 3 March 2020 – 13 February 2021 (n=1 491 807)

Table 1. Number and cumulative/weekly incidence risk of laboratory-confirmed cases of COVID-19 and testing per 100 000 persons by province, South Africa, 3 March 2020 - 13 February 2021 (n=1 491 807)

Province	Cumulative cases (n) (percentage, n/ total cases in South Africa)	New cases ¹ detected in week 6 (7-13 Feb 2021), n (percentage ² , n/total)	Population in mid-2020 ³ , n	Cumulative incidence risk (cases per 100 000 persons)	Incidence risk of new cases detected in week 6 of 2021 (cases/100 000 persons)	Tests ⁴ per 100 000 persons, 7-13 Feb 2021
Eastern Cape	193 334 (13.0)	474 (3.6)	6 734 001	2 871.0	7.0	180.6
Free State	78 658 (5.3)	817 (6.2)	2 928 903	2 685.6	27.9	310.3
Gauteng	398 506 (26.7)	3 914 (29.8)	15 488 137	2 573.0	25.3	387.5
KwaZulu-Natal	324 754 (21.8)	2 812 (21.4)	11 531 628	2 816.2	24.4	374.4
Limpopo	60 741 (4.1)	774 (5.9)	5 852 553	1 037.9	13.2	88.5
Mpumalanga	68 768 (4.6)	1 064 (8.1)	4 679 786	1 469.5	22.7	223.1
North West	59 428 (4.0)	873 (6.6)	4 108 816	1 446.4	21.2	179.2
Northern Cape	33 105 (2.2)	424 (3.2)	1 292 786	2 560.7	32.8	331.5
Western Cape	274 513 (18.4)	1 981 (15.1)	7 005 741	3 918.4	28.3	406.3
Unknown	0	0	0			
Total	1 491 807	13 133	59 622 350	2 502.1	22.0	302.4

¹New cases refer to cases whose samples were collected or received in the current reporting week; ²Percentage=n/total number of new cases (specimen collected or received in current reporting week); ³2020 Mid-year population Statistics South Africa ⁴Data on number of tests conducted sourced from COVID-19 weekly testing report of the same reporting week

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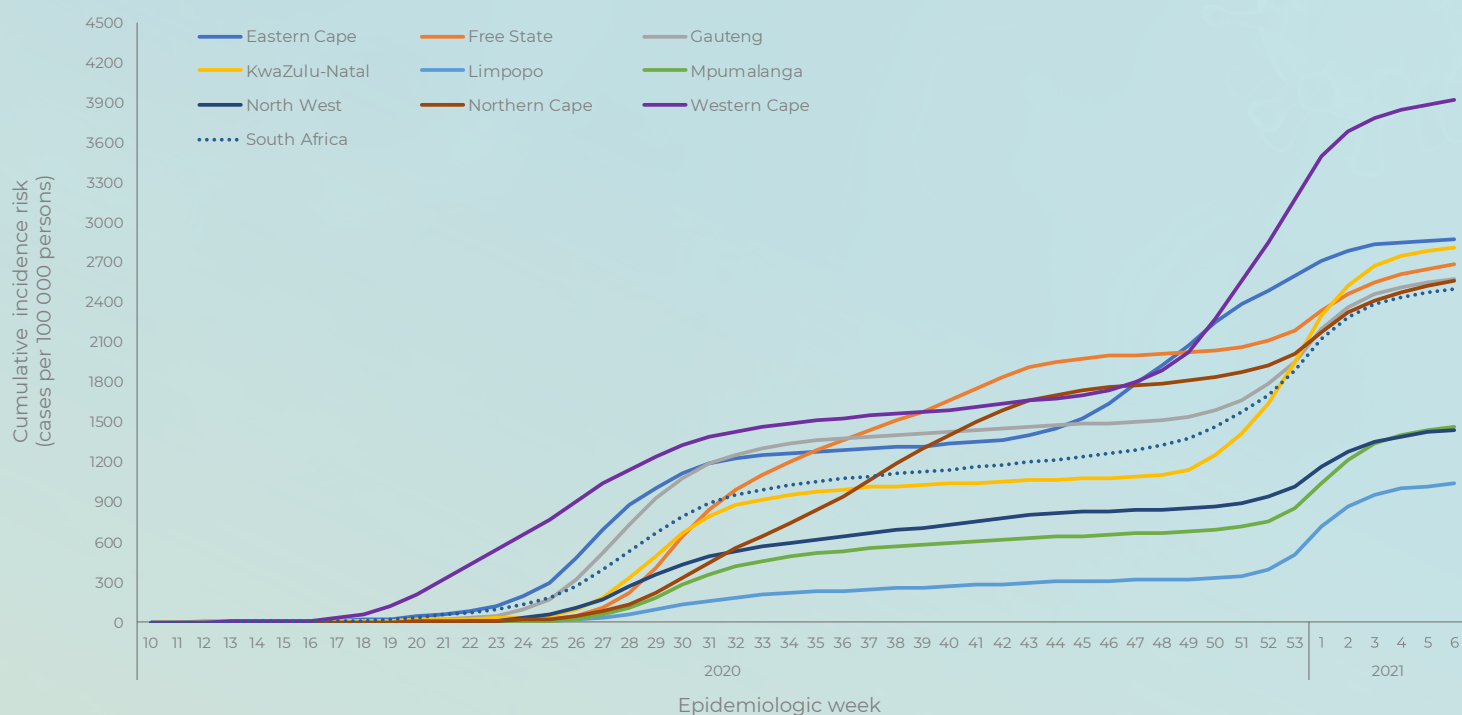


Figure 3. Cumulative incidence risk of laboratory-confirmed cases of COVID-19 by province and epidemiologic week, South Africa, 3 March 2020 – 13 February 2021 (n= 1 491 807)

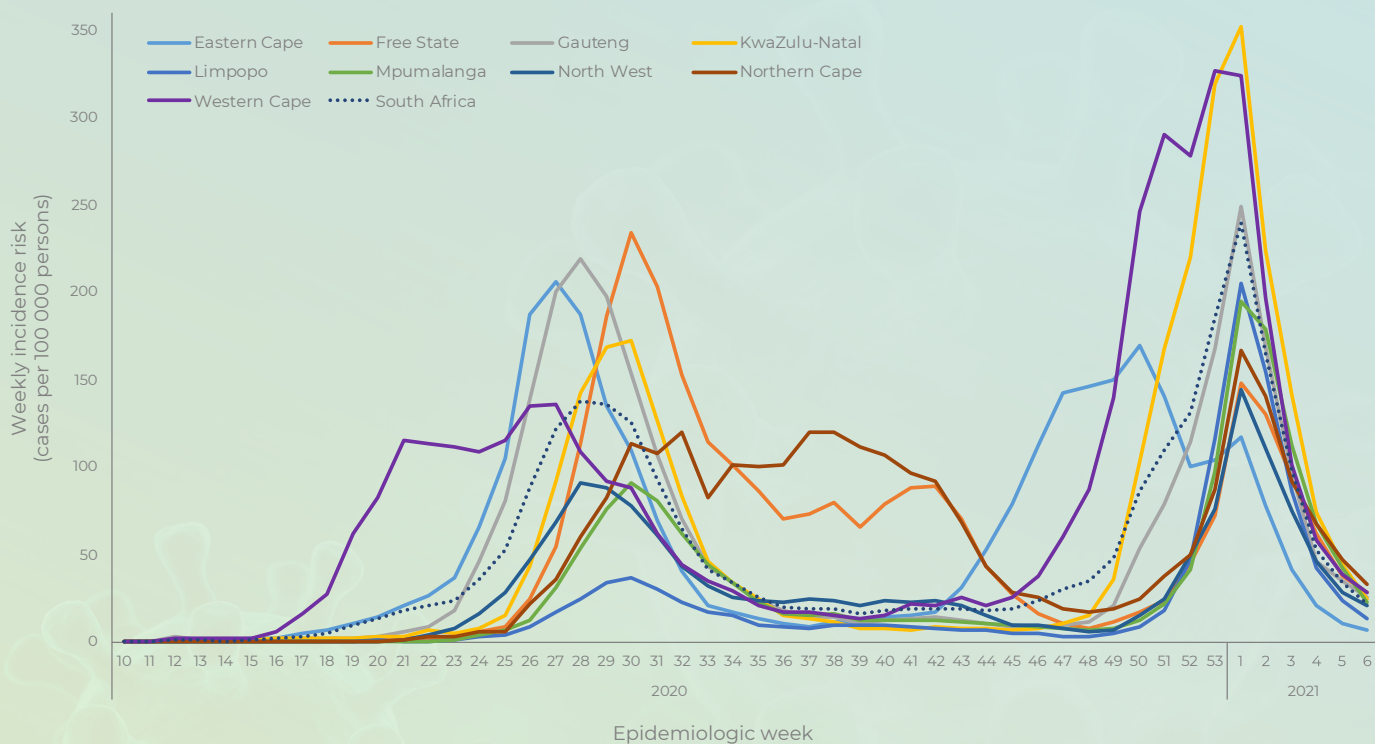


Figure 4. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by province and epidemiologic week, South Africa, 3 March 2020 – 13 February 2021 (n= 1 491 807)

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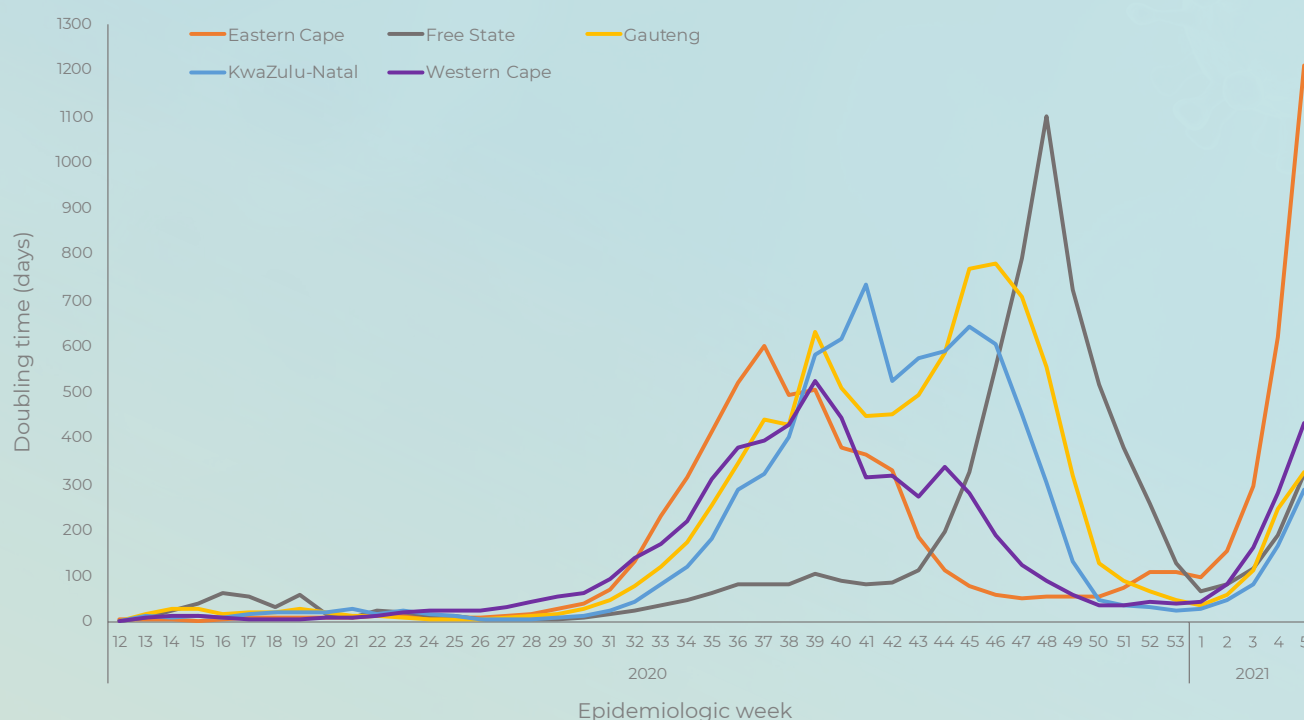


Figure 5. Doubling time of number of laboratory-confirmed cases of COVID-19 by province (for 5 provinces with the majority of cases) and epidemiologic week, South Africa, 23 March-2020 – 6 February 2021 (n= 1 478 587)

Characteristics of COVID-19 cases in South Africa by age and sex

Cases of COVID-19 were reported across all age groups. The median age of COVID-19 cases in South Africa to date was 40 years with an interquartile range (IQR) of 29-53 years. The distribution of cases varied by age, with highest number of all cases to date in the 35-39-year (176 063/1 478 240, 11.9%) and 30-34-year (171 049/1 478 240, 11.6%) age groups (Figure 6). Similarly, among the cases reported in the past week, the highest number of cases was in the 35-39-year-age group (1 411/12 947, 10.9%) followed by the 30-34-year age group (1 302/12 947, 10.1%). The median age for cases reported in week 6 of 2021 was similar (41 years, IQR 29-55), to that of total cases (40 years). The highest cumulative incidence risk remained among cases aged 50-54 years (5 091.3 cases per 100 000 persons), followed by cases aged 55-59 years (5 020.5 cases per 100 000 persons) and ≥80 years (4 896.8 cases per 100 000 persons). The lowest cumulative incidence risk was reported in the younger age-groups, 306.1 cases per 100 000 persons and 380.2 cases per 100 000 persons in the 0-4- and 5-9-year age groups, respectively (Figure 7 and Table 2). The highest weekly incidence risk among cases detected in week 6 of 2021 was reported in cases aged ≥80 years (56.3 cases per 100 000 persons), followed by cases in the 55-59-year-age group (45.9 cases per 100 000 persons), and the lowest weekly incidence

risk was in the 0-4-year age group (3.8 cases per 100 000 persons) (Figure 8 and table 2).

To date, the majority of COVID-19 cases reported were female 57.8% (853 631/1 475 701). This trend continued in the past week where 57.4% (7 452/12 982) of cases were female. The cumulative incidence risk has remained consistently higher among females (2 775.6 cases per 100 000 persons) than among males (2 118.4 cases per 100 000 persons) (Figure 9). The peak cumulative incidence risk was in the 50-54-year-age group (5 333.8 cases per 100 000 persons) for females, and in the ≥80-year-age group (5 084.0 cases per 100 000 persons) for males (Figure 10). In week 6 of 2021, the highest weekly incidence risk for both females and males was in the ≥80-year-age group (53.2 cases per 100 000 persons), and (62.3 cases per 100 000 persons), respectively, this is similar to the previous three weeks. The higher prevalence and incidence risk among females compared to males could be explained by the fact that females are likely to be more represented in occupations, which put them in close proximity to others and thus exposing them to a higher risk of infection (e.g. teaching and health). This may also be partly explained by varying testing practices by age and sex (data not shown) and by different health seeking behaviour.

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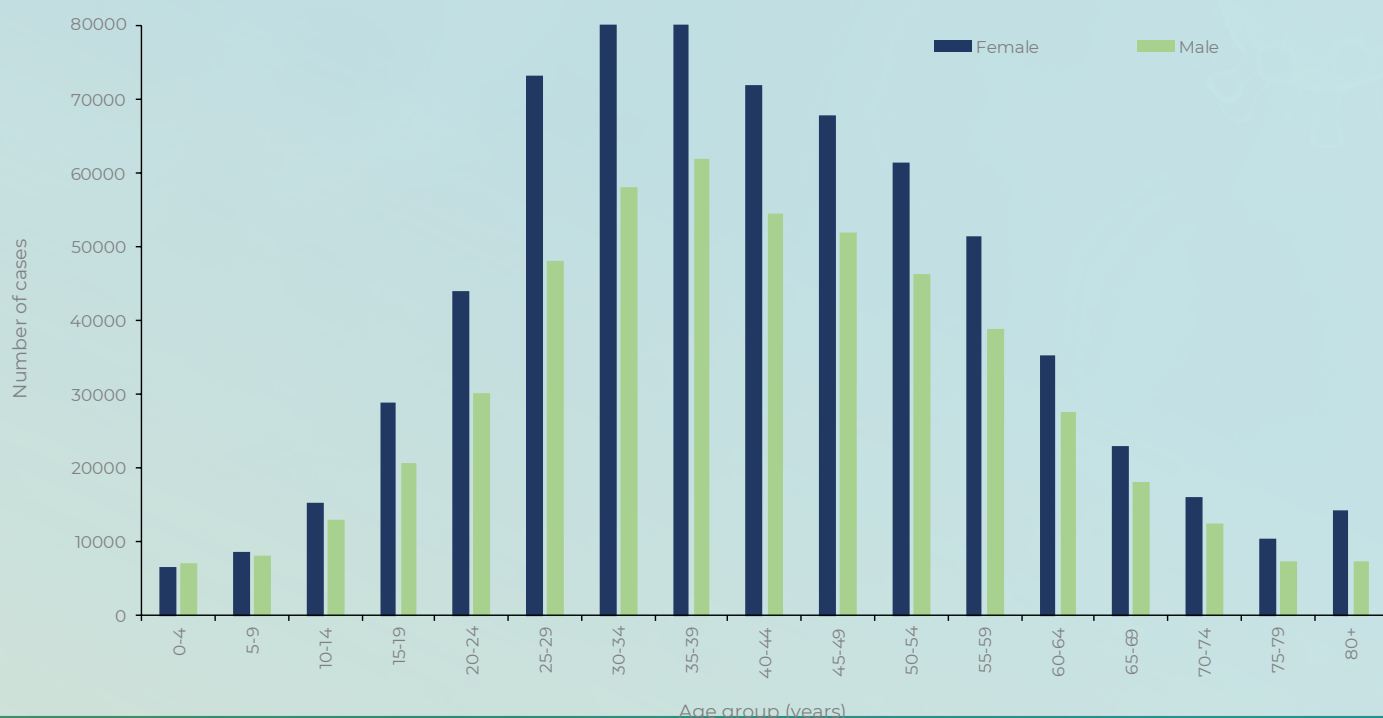


Figure 6. Number of laboratory-confirmed cases of COVID-19 by age group and sex, South Africa, 3 March 2020 – 13 February 2021 (n = 1 463 445, sex/age missing for 28 362)

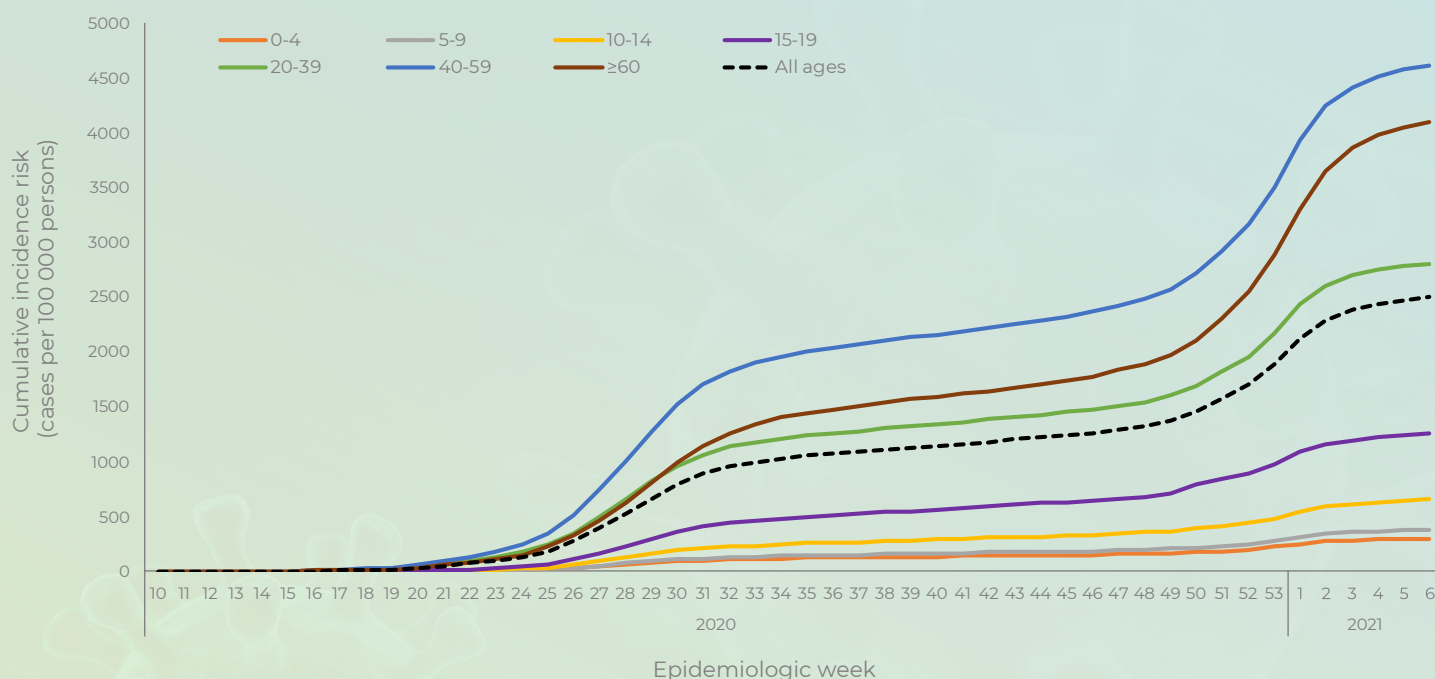


Figure 7. Cumulative incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, South Africa, 3 March 2020- 13 Feb 2021 (n= 1 478 240, 13 567 missing age)

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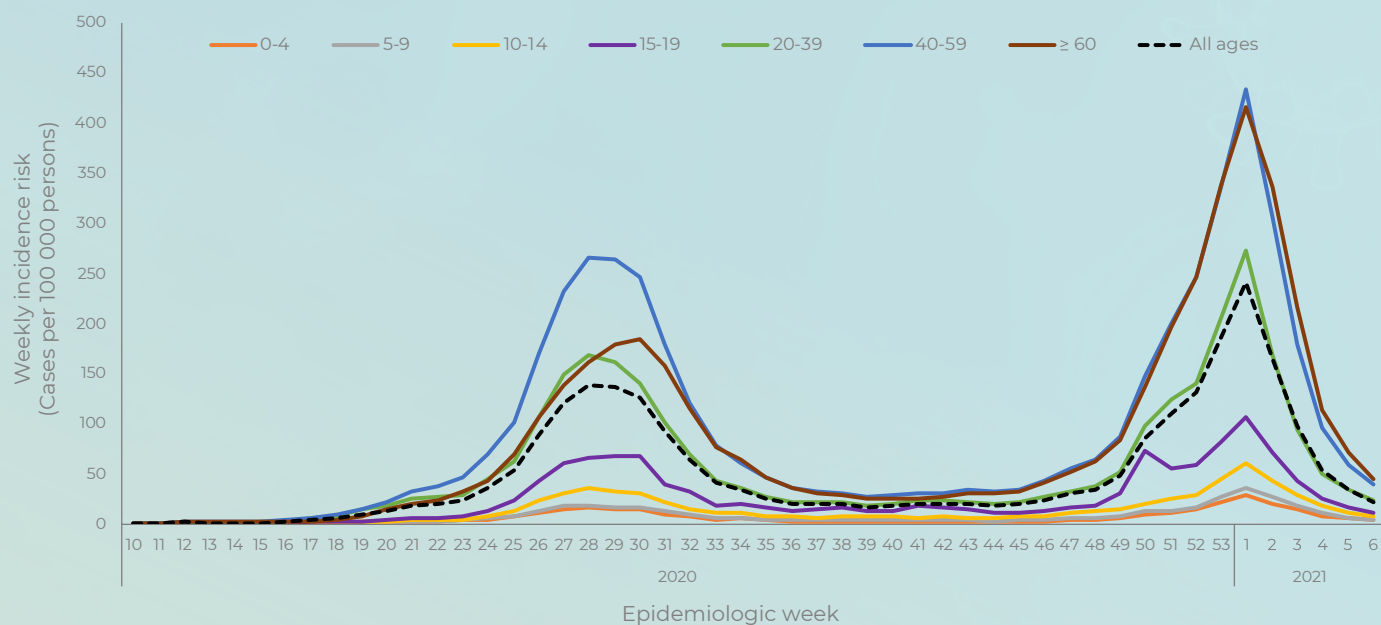


Figure 8. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, South Africa, 3 March 2020 -13 February 2021 (n= 1 478 240, 13 567 missing age)

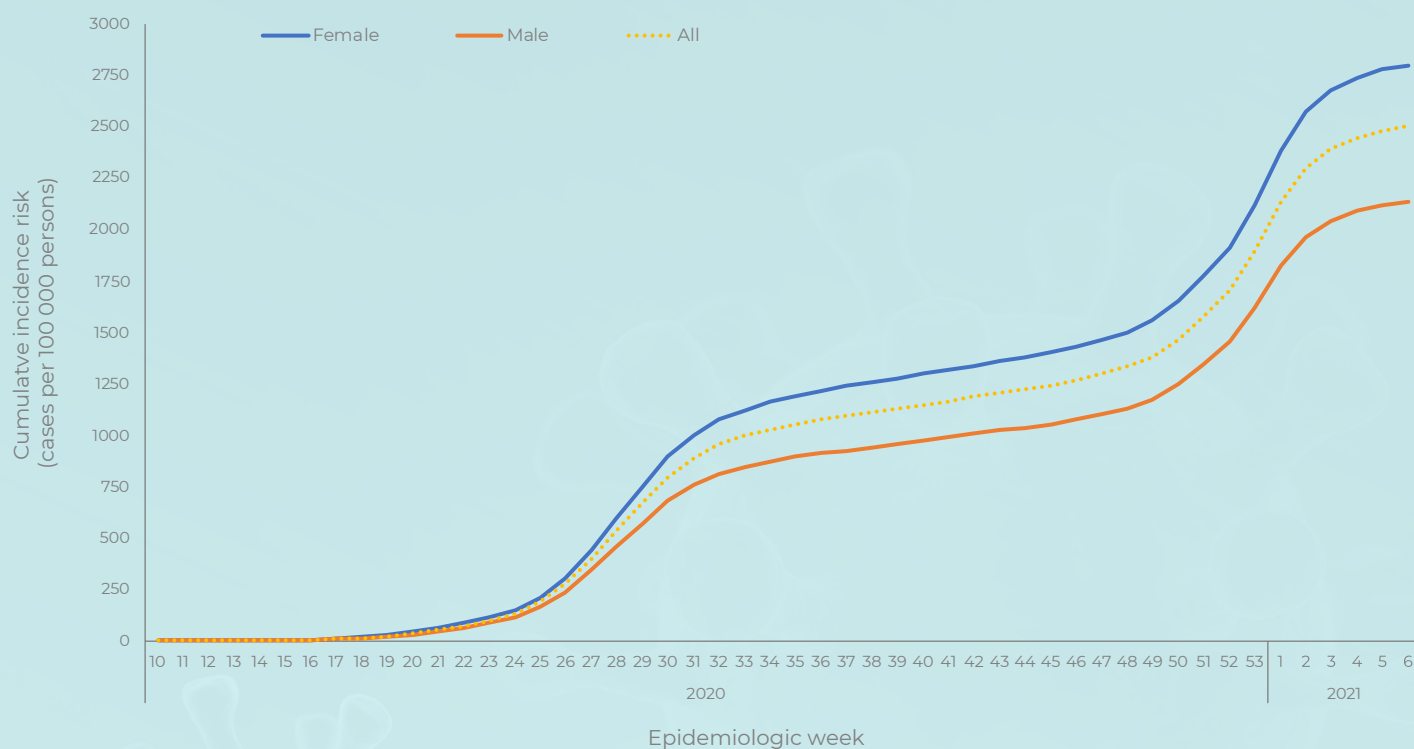


Figure 9. Cumulative incidence risk by sex and epidemiologic week, South Africa, 3 March 2020 -13 February 2021 (n= 1 475 701, sex missing for 16 106)

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Table 2. Number of laboratory-confirmed cases of COVID-19 and cumulative/weekly incidence risk by age group, South Africa, 3 March 2020 – 13 February 2021, n= 1 478 240, 13 567 missing age)

Age group (years)	Cumulative cases (n) (percentage, n/ total cases in South Africa)	New cases ¹ detected in week 6 (7-13 Feb 2021), n (percentage ² , n/total)	Population in mid-2020 ³ , n	Cumulative incidence risk (cases per 100 000 persons)	Incidence risk of new cases detected in week 6 of 2021 (cases/100 000 persons)
0-4	17 583 (1.2)	217 (1.7)	5 743 450	306.1	3.8
5-9	21 734 (1.5)	237 (1.8)	5 715 952	380.2	4.1
10-14	36 663 (2.5)	370 (2.9)	5 591 553	655.7	6.6
15-19	59 978 (4.1)	555 (4.3)	4 774 579	1 256.2	11.6
20-24	89 446 (6.1)	791 (6.1)	4 823 367	1 854.4	16.4
25-29	144 660 (9.8)	1 147 (8.9)	5 420 754	2 668.6	21.2
30-34	171 049 (11.6)	1 302 (10.1)	5 641 750	3 031.8	23.1
35-39	176 063 (11.9)	1 411 (10.9)	4 798 293	3 669.3	29.4
40-44	152 412 (10.3)	1 196 (9.2)	3 733 942	4 081.8	32.0
45-49	144 700 (9.8)	1 162 (9.0)	3 169 648	4 565.2	36.7
50-54	130 911 (8.9)	1 122 (8.7)	2 571 263	5 091.3	43.6
55-59	111 018 (7.5)	1 014 (7.8)	2 211 309	5 020.5	45.9
60-64	79 578 (5.4)	788 (6.1)	1 796 316	4 430.1	43.9
65-69	53 105 (3.6)	604 (4.7)	1 408 665	3 769.9	42.9
70-74	37 550 (2.5)	446 (3.4)	1 007 174	3 728.3	44.3
75-79	23 522 (1.6)	260 (2.0)	637 062	3 692.3	40.8
≥80	28 268 (1.9)	325 (2.5)	577 273	4 896.8	56.3
Unknown	13 567	186			
Total	1 491 807	13 133	59 622 350	2 502.1	22.0

¹New cases refer to cases whose samples were collected or received in the current reporting week; ²Percentage=n/total number of new cases (specimen collected or received in current reporting week); ³2020 Mid-year population Statistics South Africa

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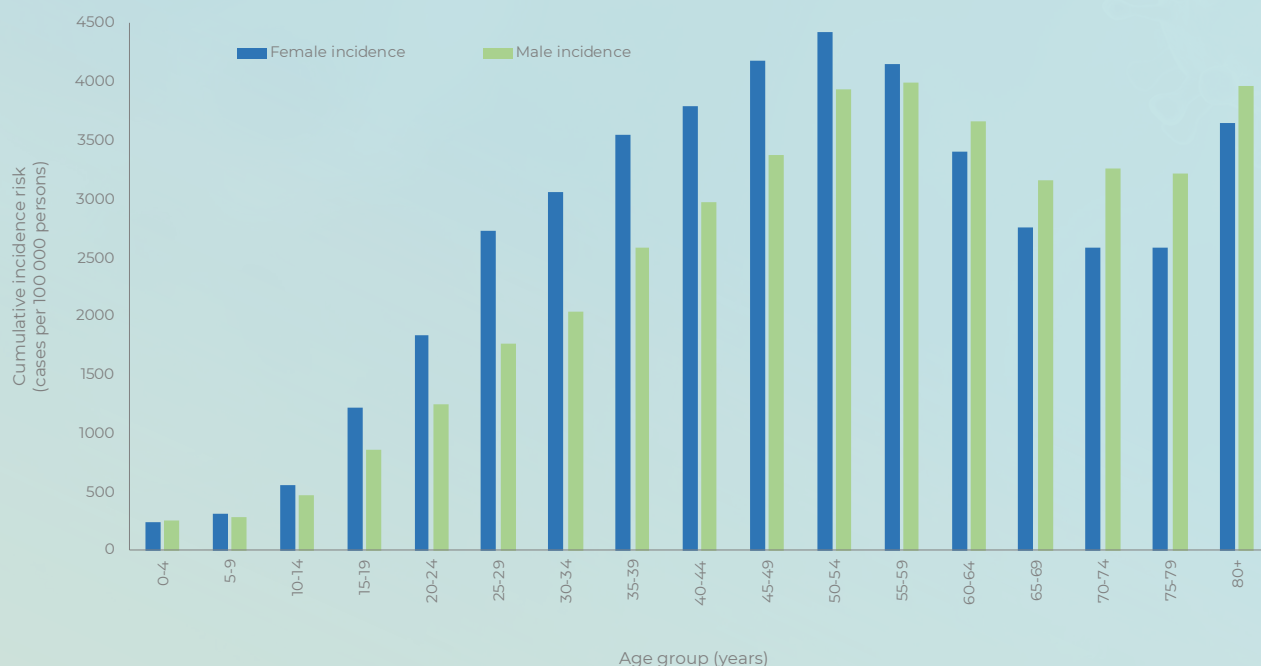


Figure 10. Cumulative incidence risk by age group and sex, South Africa, 3 March 2020 – 13 February 2021 (n= 1 463 445, sex/age missing for 28 362)

Provincial trends of COVID-19 cases

All provinces have been reporting a decline in number of new cases since week 2 of 2021. Trends by district and age group for each province are presented below.

Eastern Cape Province

Of the 193 334 cases reported from the Eastern Cape Province, 171 510 (88.7%) cases had allocation by district. The Nelson Mandela Bay Metro (47 152/171 510, 27.5%) followed by the Buffalo City Metro (31 088/171 510, 18.1%) contributed the majority of cases from the Eastern Cape. In week 6 of 2021, the Joe Gqabi (11.6 cases per 100 000 persons) district reported the highest weekly incidence risk, and other districts reported incidence risk below 10 cases per 100 000 persons (Figure 11). All districts reported a declining trend in numbers since week 2 of 2021.

The majority of cases from the Eastern Cape Province were in the 40-59-year old age group (69 535/191 308, 36.3%), followed by the 20-39-year age group (65 665/191

308, 34.3%) and by the ≥ 60 year age group (34 174/191 308, 17.9%). In the past week, the ≥ 60 -year age group (16.6 cases per 100 000 persons), followed by 40-59-year age group (13.3 cases per 100 000 persons) reported the highest weekly incidence risk. The weekly incidence risk in all other age groups was below 10 cases per 100 000 persons. In the past 5 weeks, all age groups reported a decrease in weekly incidence risk (Figure 12).

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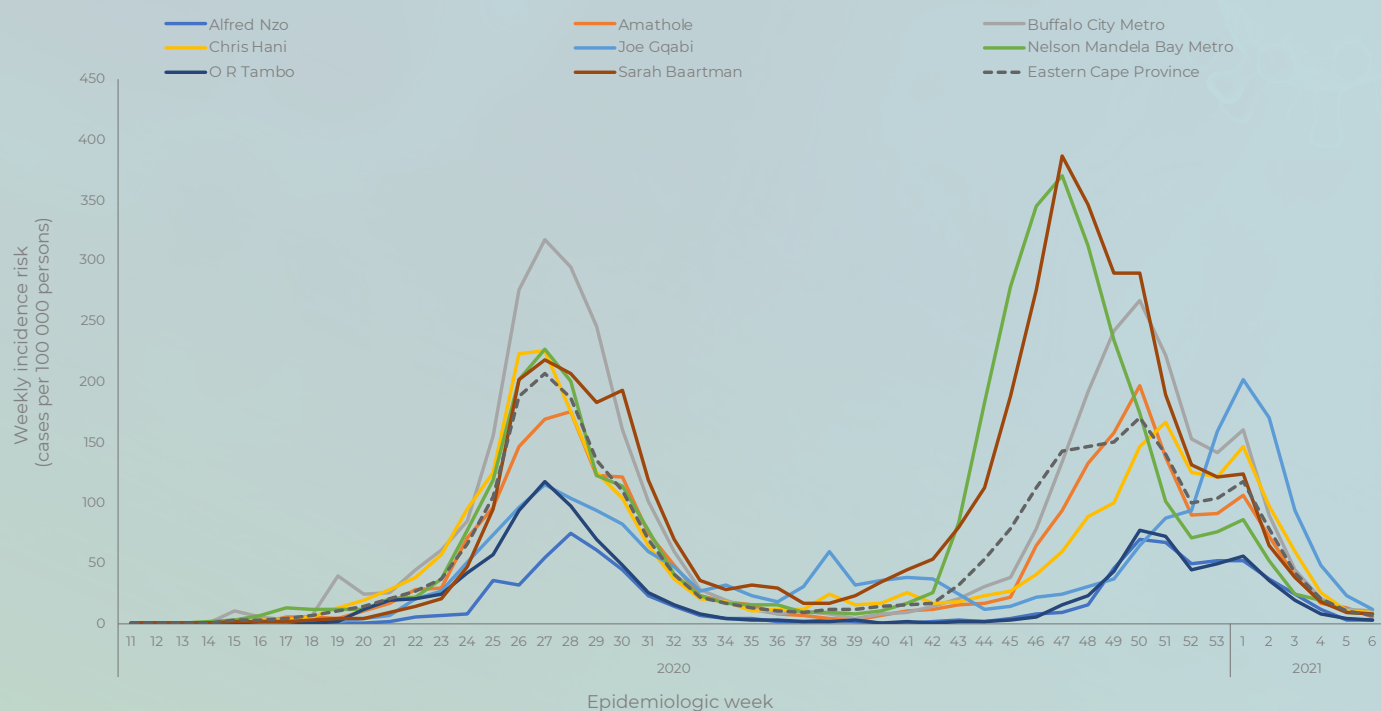


Figure 11. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Eastern Cape Province, 3 March 2020 - 13 February 2021 (n= 171 510, 21 824 missing district)

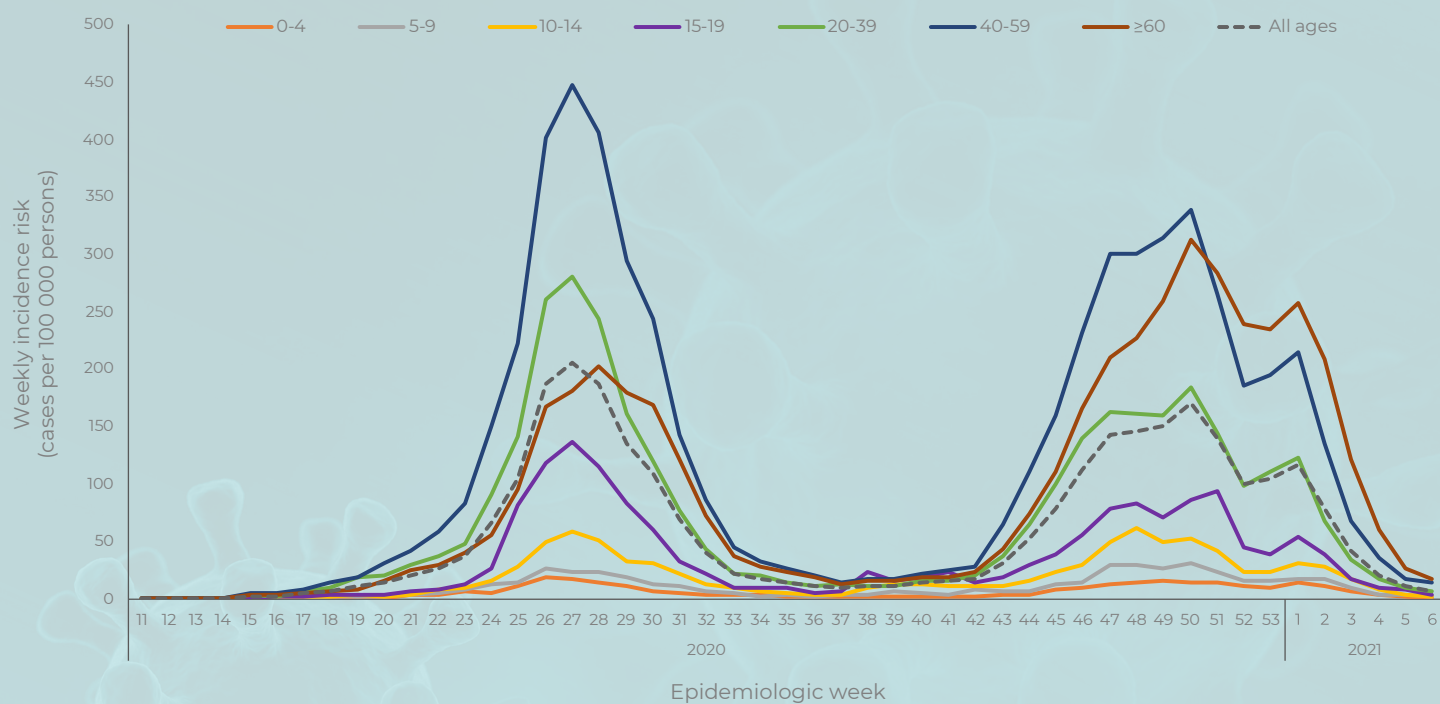


Figure 12. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Eastern Cape Province, 3 March 2020 – 13 February 2021 (n= 191 308, 2 026 missing age)

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Western Cape Province

Of the 274 513 cases reported from the Western Cape Province, 256 710 (93.5%) cases had allocation by district. The City of Cape Town District (169 660/256 710, 66.1%) followed by the Cape Winelands District (31 598/256 710, 12.3%), and the Garden Route District (28 895/256 710, 11.3%) contributed the majority of cases, all other districts contributed <10% each. In the past week, the West Coast (38.4 cases per 100 000 persons) followed by the Cape Winelands (33.3 cases per 100 000 persons) districts reported the highest weekly incidence risk (Figure 13). The second wave peaked in week 53 of 2020, however timing of the peaks varied by district, with all the districts reporting the highest weekly incidence risks from week 50 of 2020 to week 2 of 2021, higher than the peaks in the first wave. All the districts have been reporting a decrease in numbers since week 2 of 2021.

The majority of cases from the Western Cape Province were in the 20-39-year old age group (108 574/273 571, 39.7%), followed by the 40-59-year age group (102 449/273 571, 37.4%). In the past week, the ≥60-year age group (58.6 cases per 100 000 persons), followed by 40-59-year age group (43.9 cases per 100 000 persons), and 20-39-year age group (29.1 cases per 100 000 persons) reported the highest weekly incidence risk. The weekly incidence risk in all other age groups was below 15 cases per 100 000 persons. In the past four weeks, all age groups reported a decrease in weekly incidence risk (Figure 14).

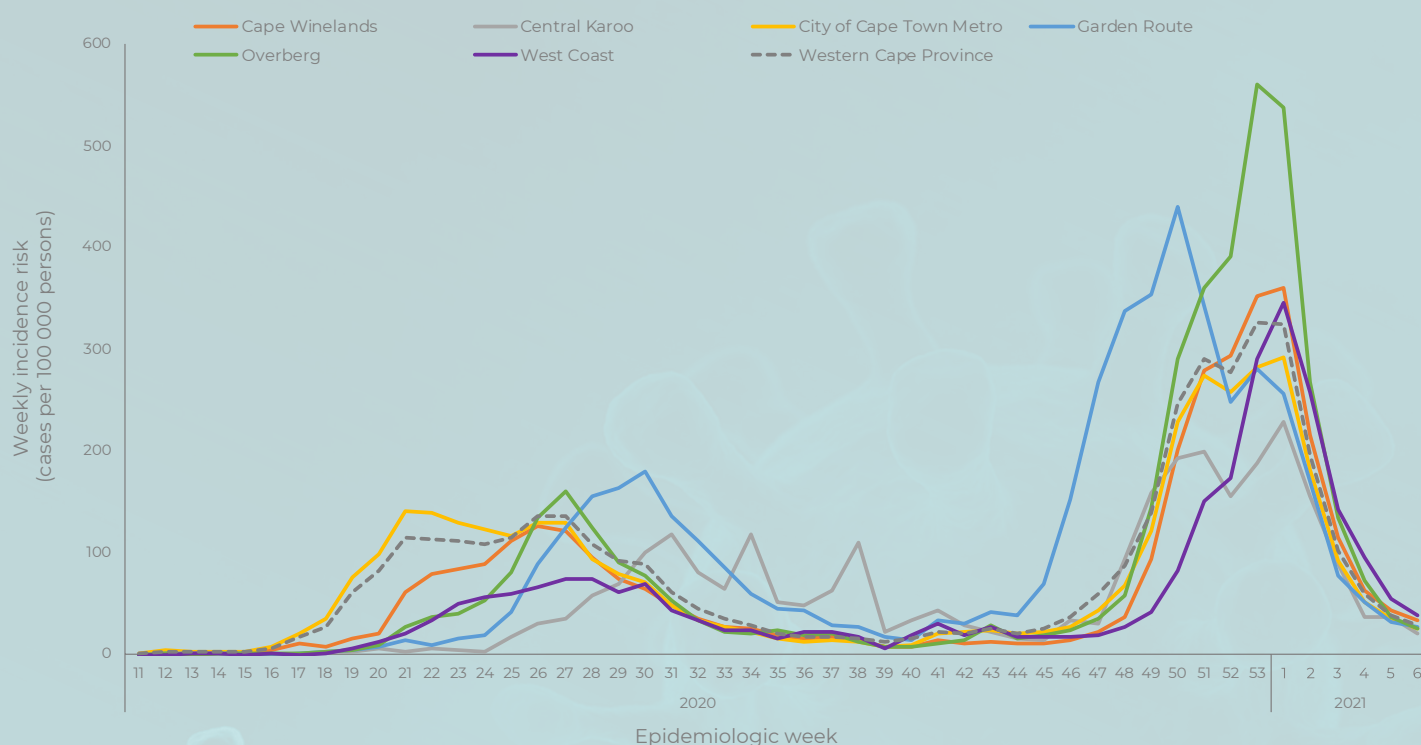


Figure 13. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Western Cape Province, 3 March 2020 – 13 February 2021 (n= 256 710, 17 803 missing district)

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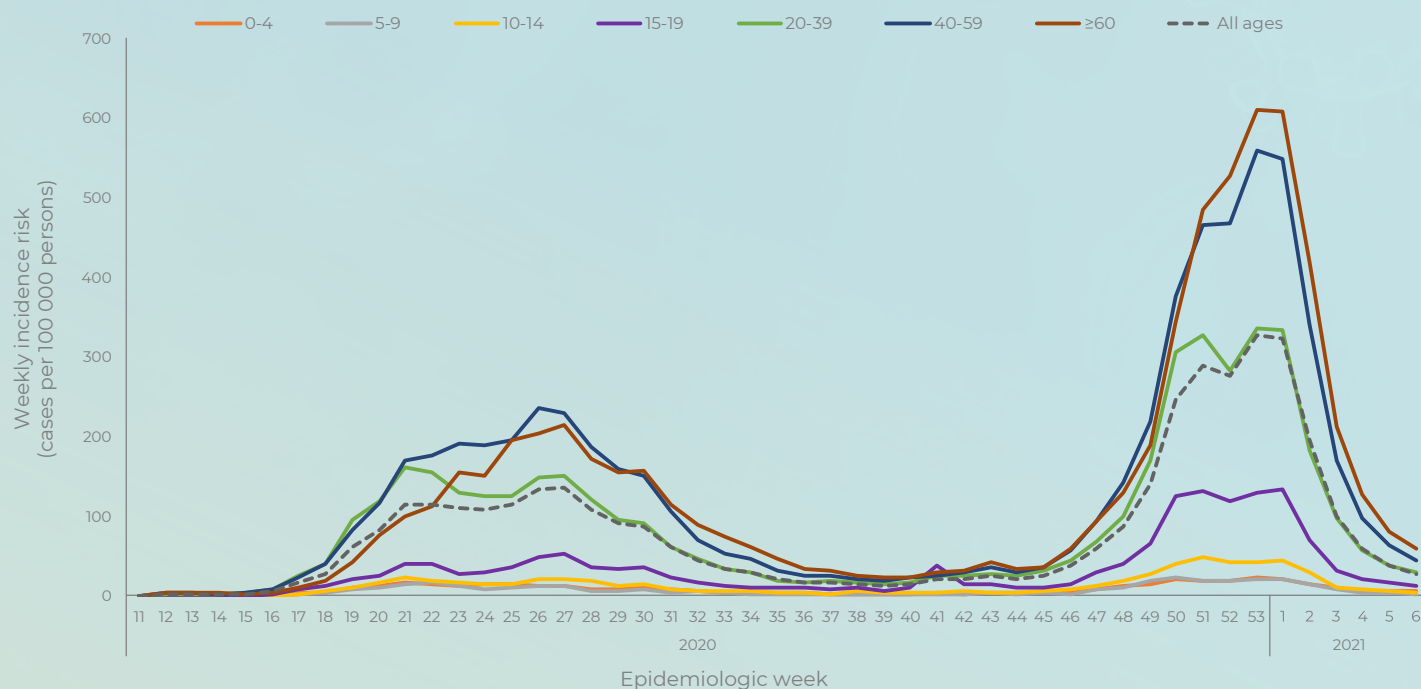


Figure 14. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Western Cape Province, 3 March 2020 - 13 February 2021 (n=273 571, 942 missing age)

Gauteng Province

Of the 398 506 cases reported from the Gauteng Province, 347 187 (87.1%) had allocation by district. The City of Johannesburg Metro (132 324/347 187, 38.1%), followed by the City of Tshwane Metro (94 123/347 187, 27.1%), and the Ekurhuleni Metro (72 848/347 187, 21.0%) contributed the majority of cases, all other districts contributed below 10% each. In week 6 of 2021, the Sedibeng (28.4 cases per 100 000 persons) followed by the West Rand (27.4 cases per 100 000 persons) district reported the highest weekly incidence risk. From week 2 of 2021, numbers reported from all districts have been decreasing (Figure 15).

The majority of cases from Gauteng Province were in the 20-39-year-age group (168 043/394 072, 42.6%), followed by 40-59-year-age group (144 506/394 072, 36.7%). Similar to the previous four weeks, in the past week, all age groups reported a decrease in weekly incidence risk, compared to the previous week (Figure 16).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

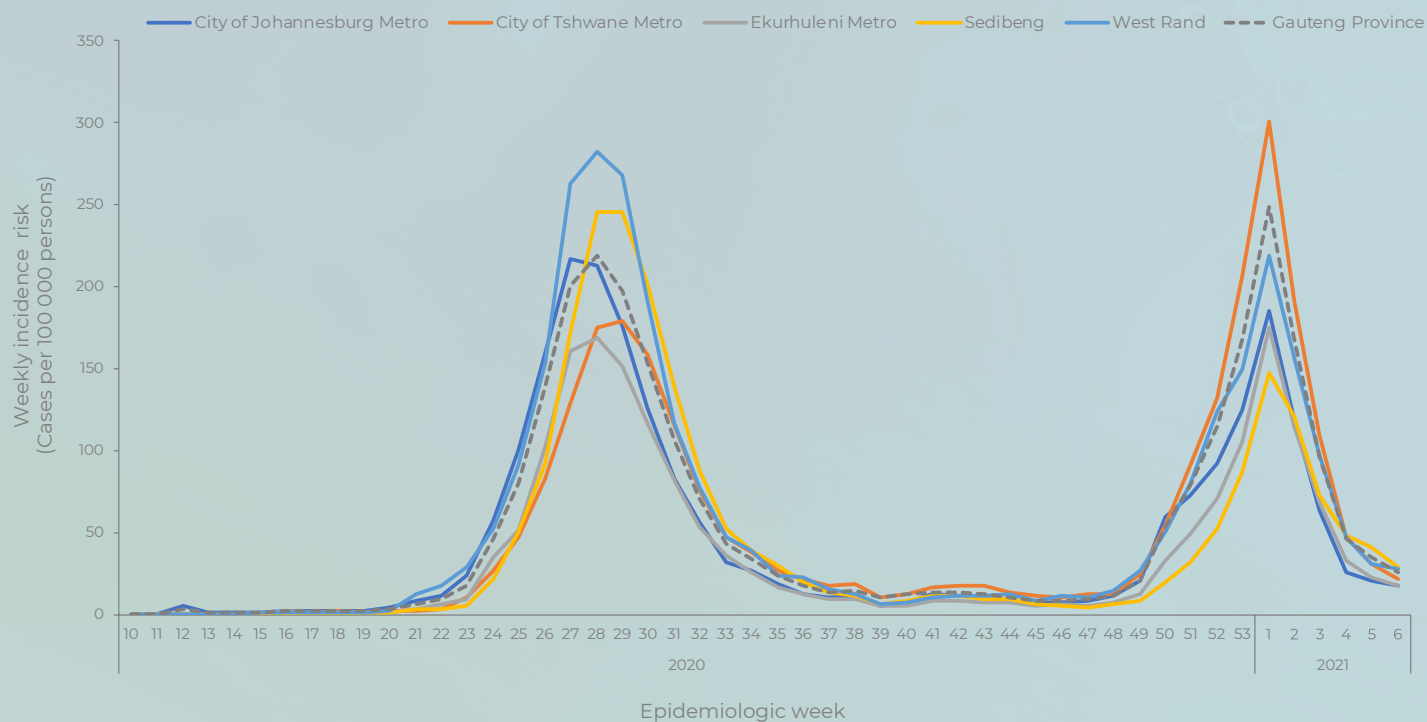


Figure 15. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Gauteng Province, 3 March 2020 –13 February 2021 (n= 347 187, 51 319 missing district)

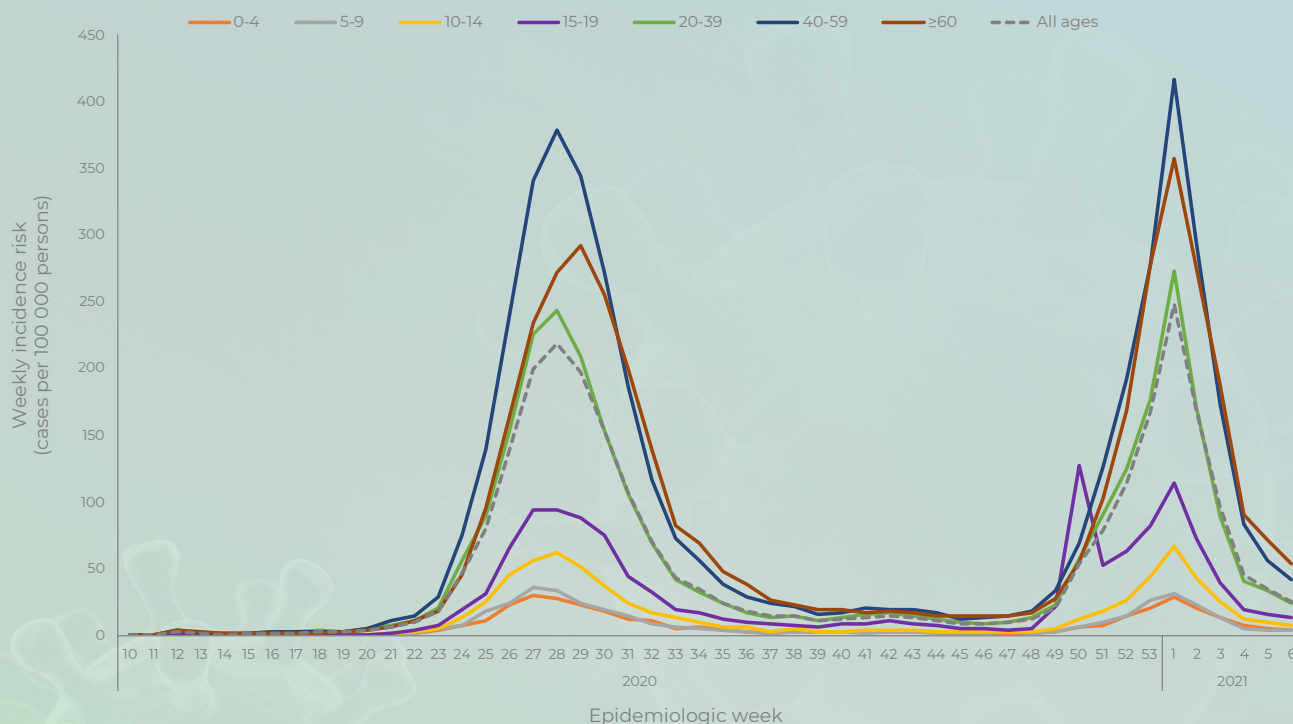


Figure 16. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Gauteng Province, 3 March 2020 -13 February 2021 (n= 394 072, 4 434 missing age).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

KwaZulu-Natal Province

Of the 324 754 cases reported from KwaZulu-Natal Province, 243 922 (75.1%) had allocation by district. The eThekweni Metro (122 365/243 922, 50.2%) followed by uMgungundlovu Metro (25 951/243 922, 10.6%) contributed the majority of cases. In week 6 of 2021, uMgungundlovu Metro (20.9 cases per 100 000 persons), followed by eThekweni Metro (20.0 cases per 100 000 persons) reported the highest weekly incidence risk. In

the past five weeks, all districts reported a decrease in weekly incidence risk (Figure 17). The decrease in week 6 of 2021 incidence is possibly due to reporting delays. The majority of cases from KwaZulu-Natal Province were in the 20-39-year-age group (123 111/321 418, 38.3%), followed by 40-59-year-age group (110 683/321 418, 34.4%). From week 2 of 2021 to date, all age groups reported a decrease in weekly incidence risk (Figure 18).

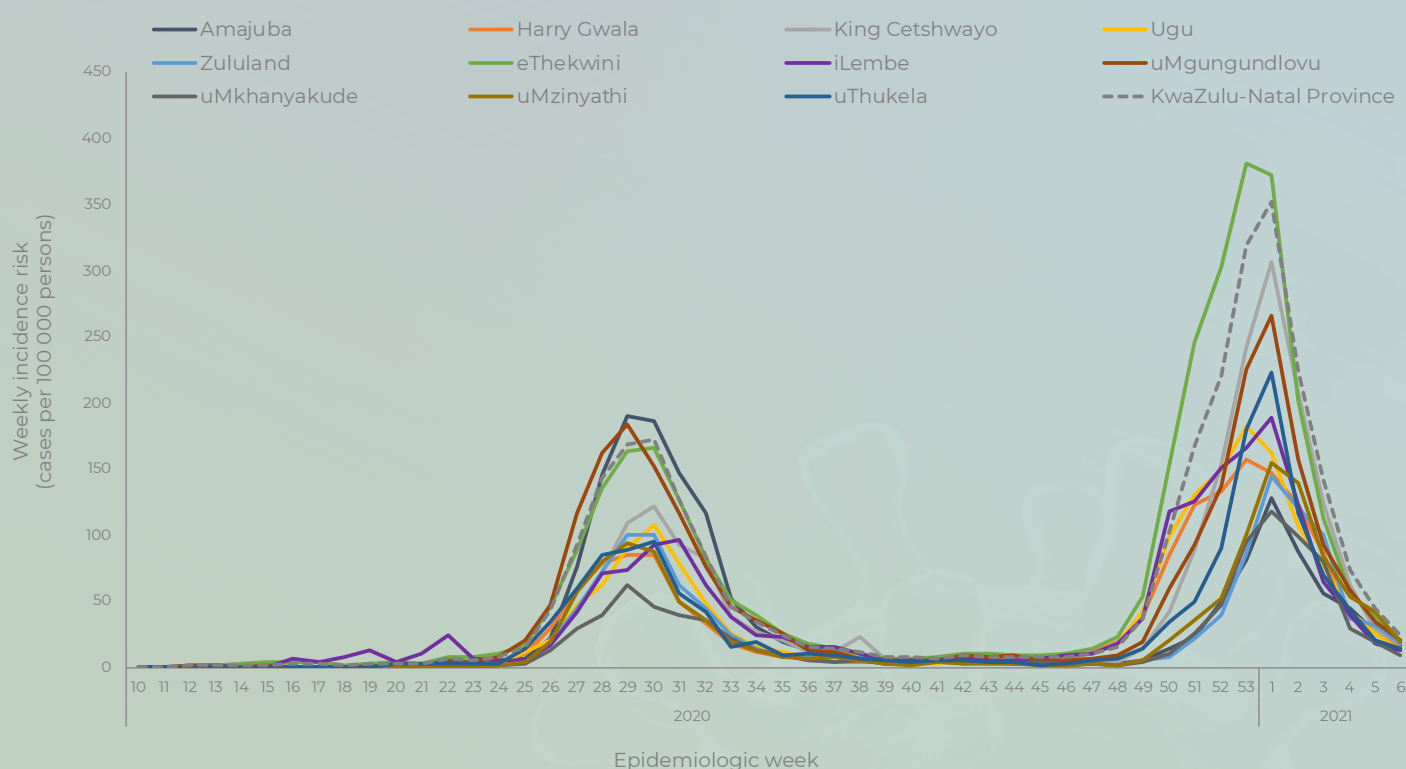


Figure 17. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, KwaZulu-Natal Province, 3 March 2020 - 13 February 2021 (n= 243 922, 80 832 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

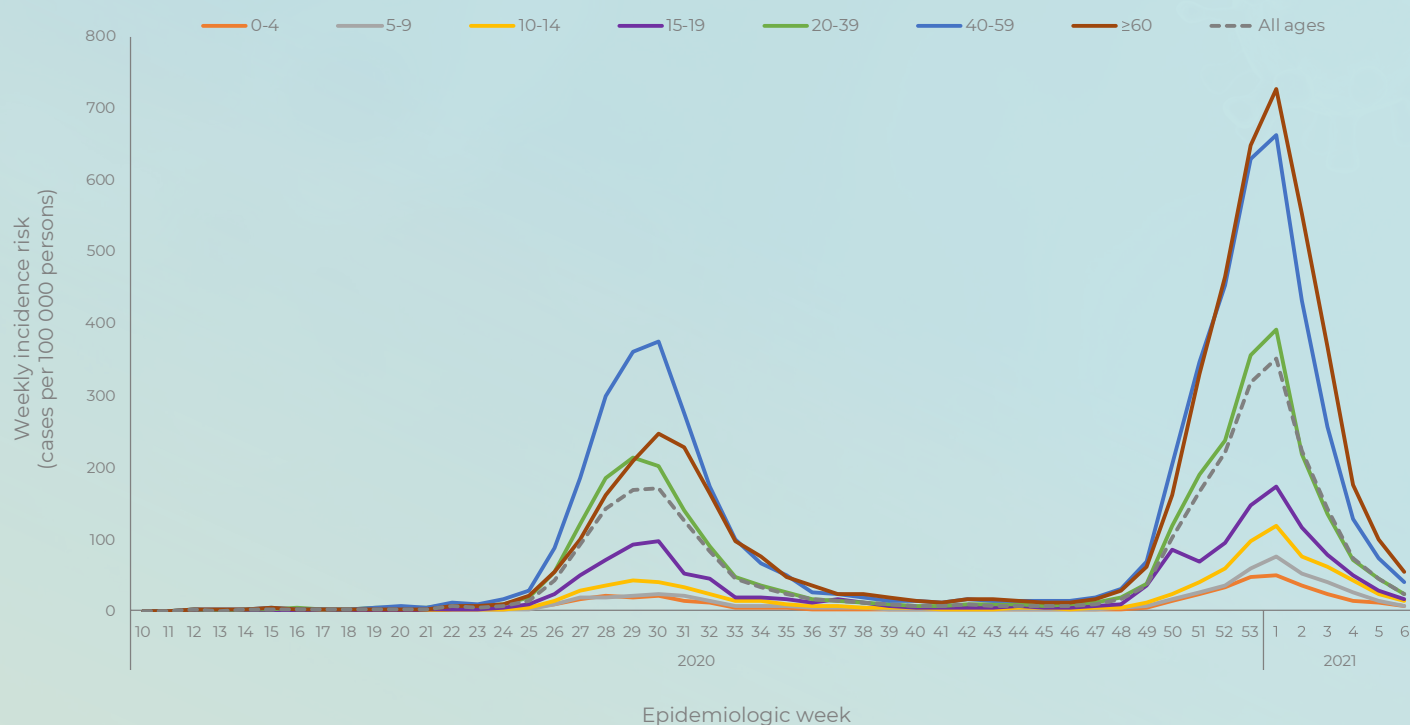


Figure 18. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, KwaZulu-Natal Province, 3 March 2020 – 13 February 2021 (n= 321 418, 3 336 missing age)

Free State Province

Of the 78 658 cases reported from the Free State Province, 71 536 (90.9%) had allocation by district. The Mangaung Metro (26 772/71 536, 37.4%) and Lejweleputswa (16 988/71 536, 23.8%) district contributed the majority of cases. In week 6, the Thabo Mofutsanyane District (31.4 cases per 100 000 persons), followed by the Mangaung Metro (26.9 cases per 100 000 persons) reported the highest weekly incidence risk. The second wave in Free State peaked in week 2 of 2021, with districts reaching second wave peaks at different times. However, in the

past four weeks, all districts reported a decreasing trend in number of new cases (Figure 19).

The majority of cases from the Free State Province were in the 20-39-year-age group (29 686/78 316, 37.9%), followed by 40-59-year-age group (28 057/78 316, 35.8%). In the past week, all age groups reported a decrease in weekly incidence risk (Figure 20).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

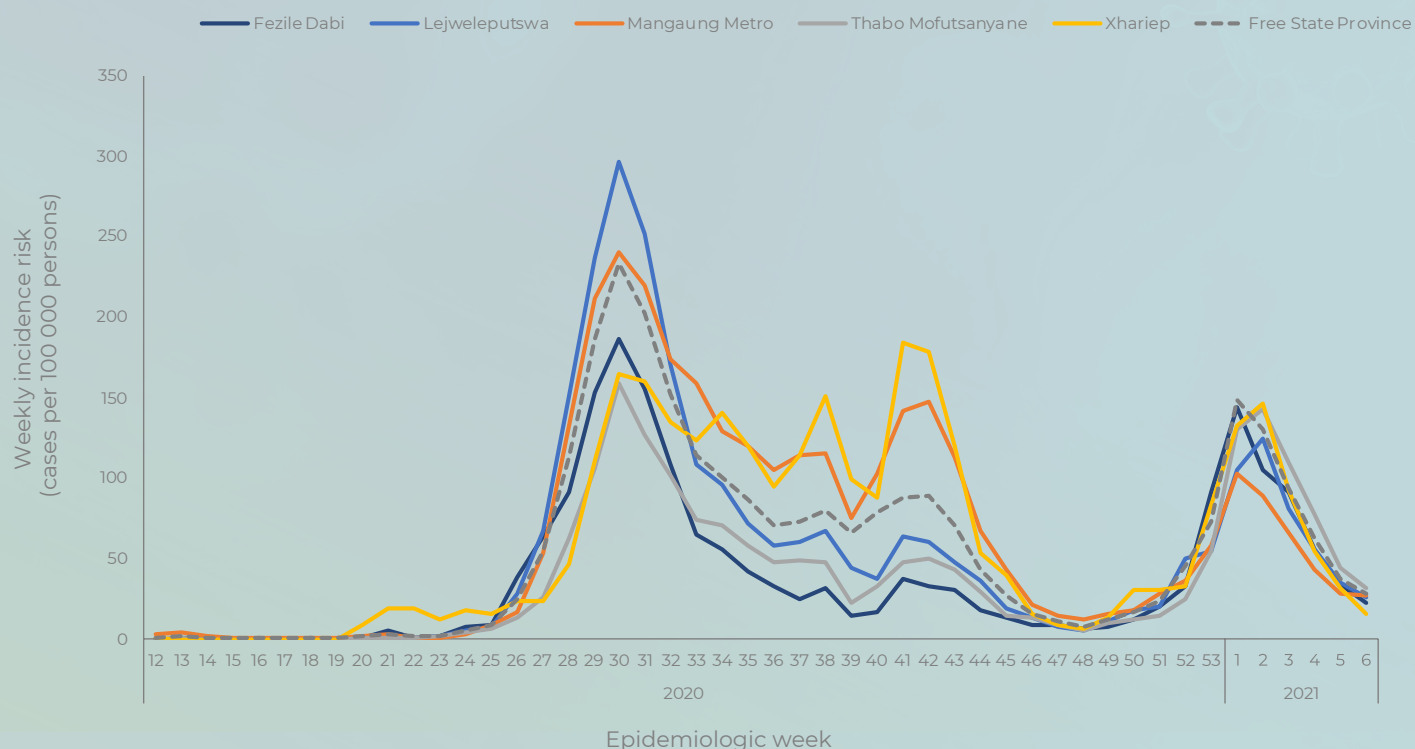


Figure 19. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Free State Province, 3 March 2020 – 13 February 2021 (n= 71 536, 7 122 missing district)

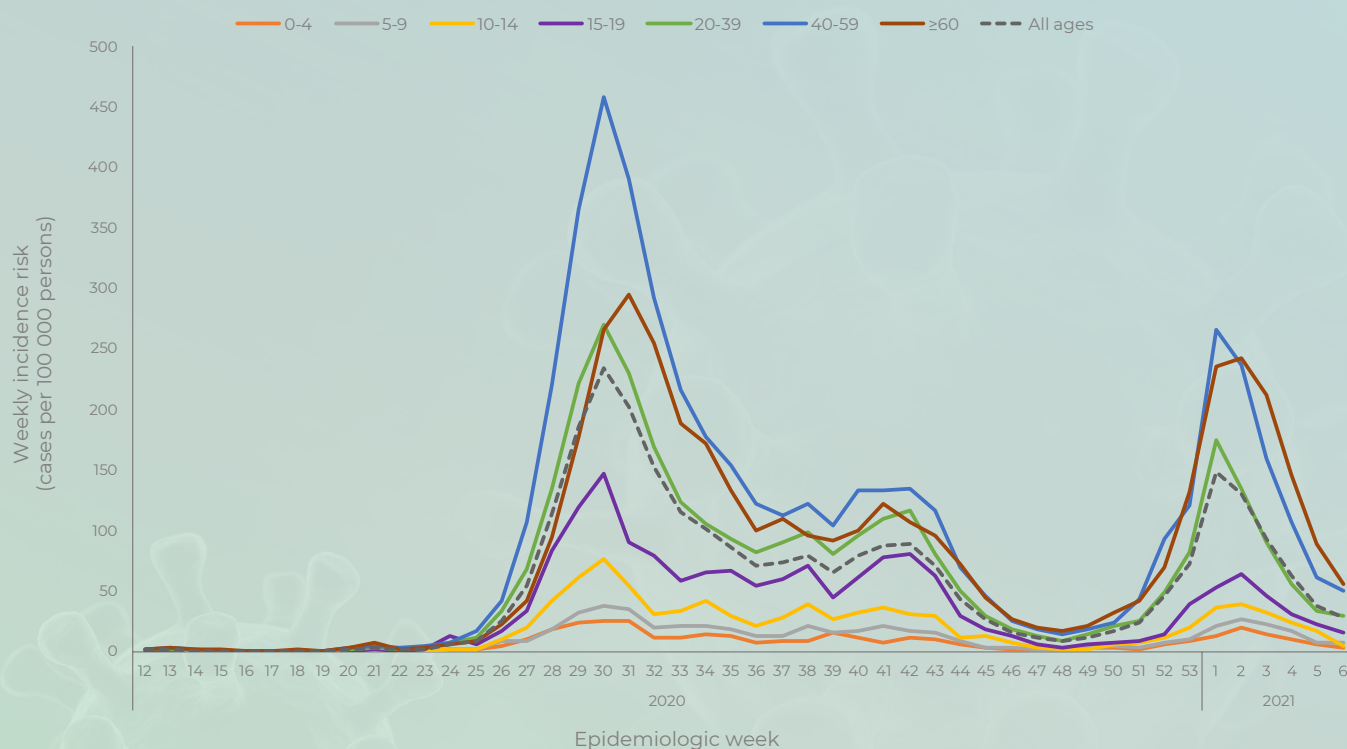


Figure 20. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Free State Province, 3 March 2020 - 13 February 2021 (n= 78 316, 342 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

Limpopo Province

Of the 60 741 cases reported from the Limpopo Province, 53 122 (87.5%) had allocation by district. The Capricorn (16 698/53 122, 31.4%), followed by the Vhembe (10 920/53 122, 20.6%) districts contributed the majority of cases, all other districts contributed below 20% each. In week 6 of 2021, the Waterberg (16.7 cases per 100 000 persons), followed by the Mopani (12.7 cases per 100 000 persons) districts reported the highest weekly incidence risk. The second wave in Limpopo peaked in week 1 of 2021 with all districts reporting decreasing numbers since week 2

of 2021 (Figure 21).

The majority of cases from Limpopo Province were in the 40-59-year-age group (24 041/60 403, 39.8%), followed by 20-39-year-age group (22 894/60 403, 37.9%). From week 2 to date, all age groups reported a decrease in weekly incidence risk (Figure 22).

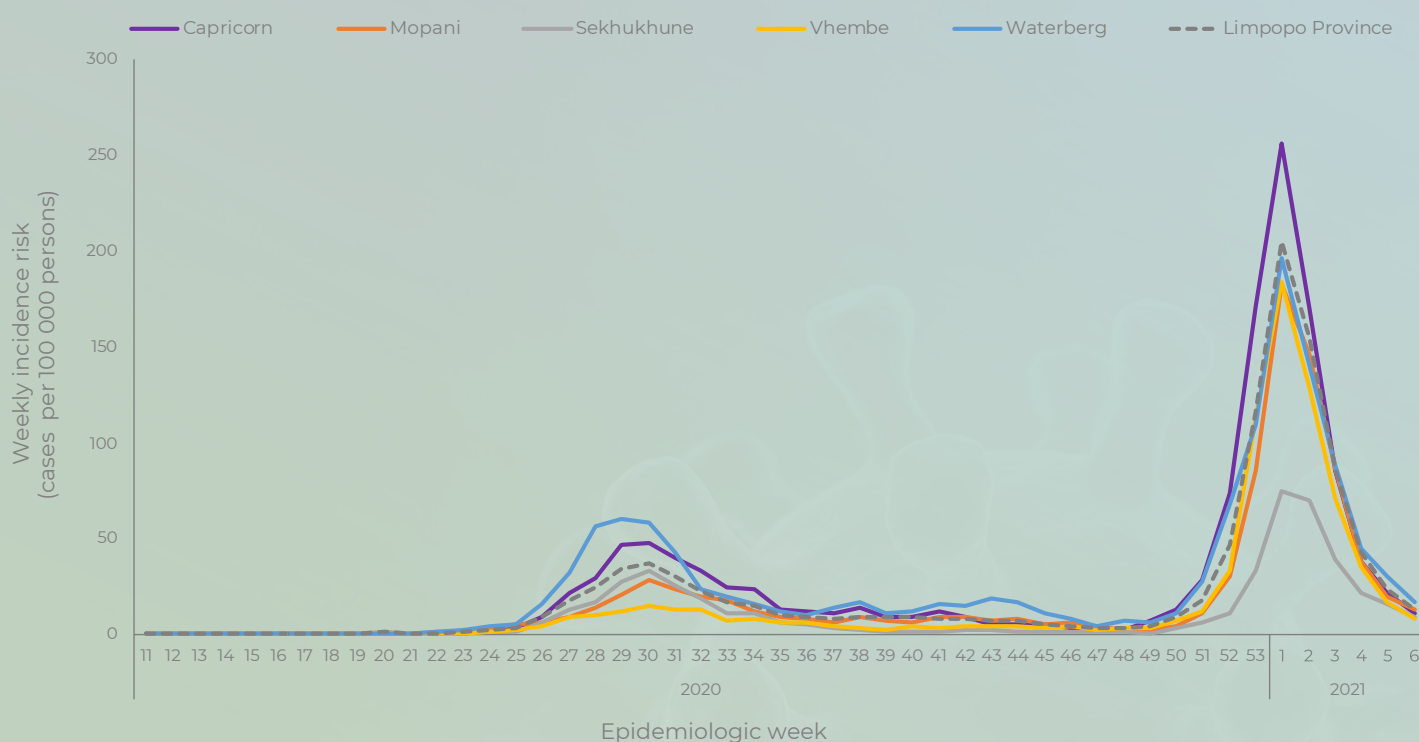


Figure 21. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Limpopo Province, 3 March 2020 – 13 February 2021 (n= 53 122, 7 619 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

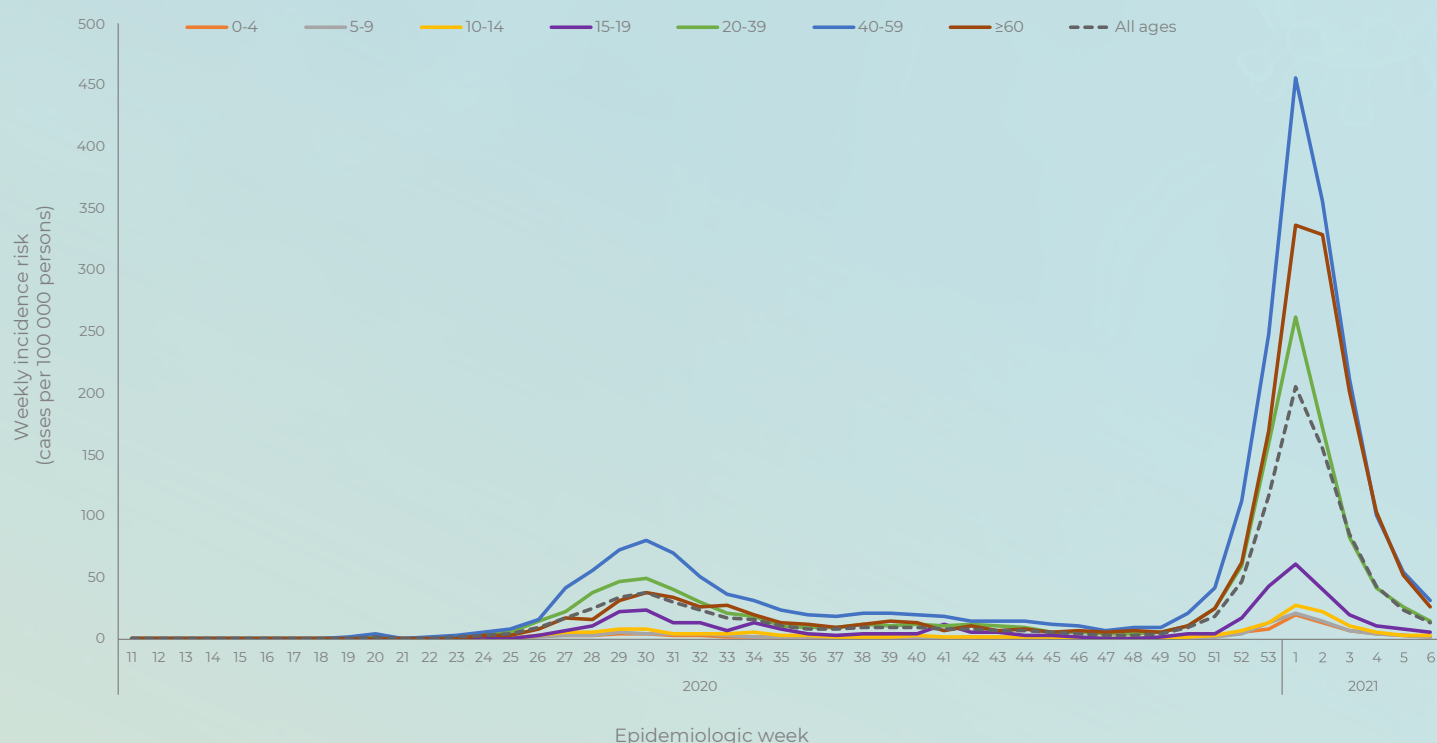


Figure 22. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Limpopo Province, 3 March 2020 – 13 February 2021 (n= 60 403, 338 missing age)

Mpumalanga Province

Of the 68 768 cases reported from the Mpumalanga Province, 56 009 (81.4%) had allocation by district. All the districts contributed similar number of cases, Ehlanzeni (22 114/56 009, 39.5%), Nkangala (18 380/56 009, 32.8%) and the Gert Sibande (15 515/56 009, 27.7%) districts. In week 6 of 2021, the Gert Sibande district (22.5 cases per 100 000 persons) reported the highest weekly incidence risk. The second wave in Mpumalanga peaked in week 1 of 2021, with all districts reporting decreasing numbers since week 3 of 2021 (Figure 24).

The majority of cases from Mpumalanga Province were in the 20-39 year-age group (28 216/67 561, 41.8%), followed by 40-59-year-age group (24 274/67 561, 35.9%). In the past week, all age groups reported a decrease in weekly incidence risk as well as the previous week (Figure 23).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

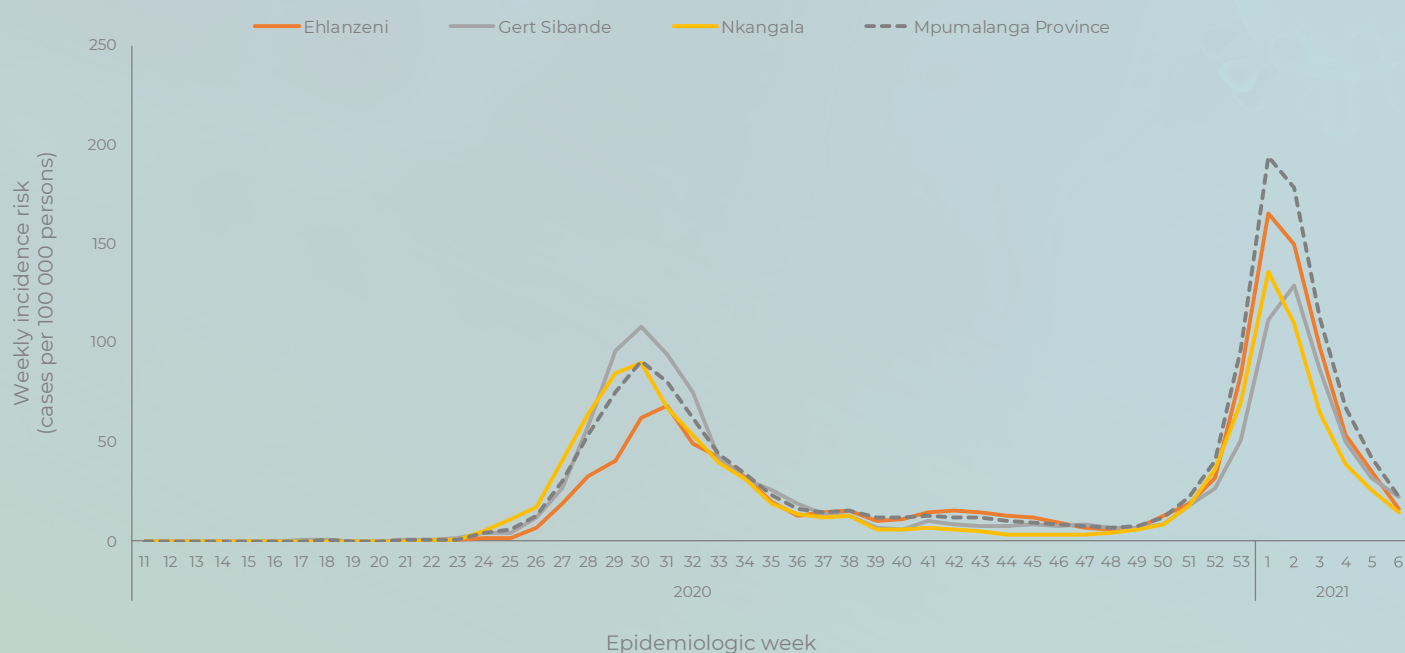


Figure 23. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Mpumalanga Province, 3 March 2020 -13 February 2021 (n= 56 009, 12 759 missing district)

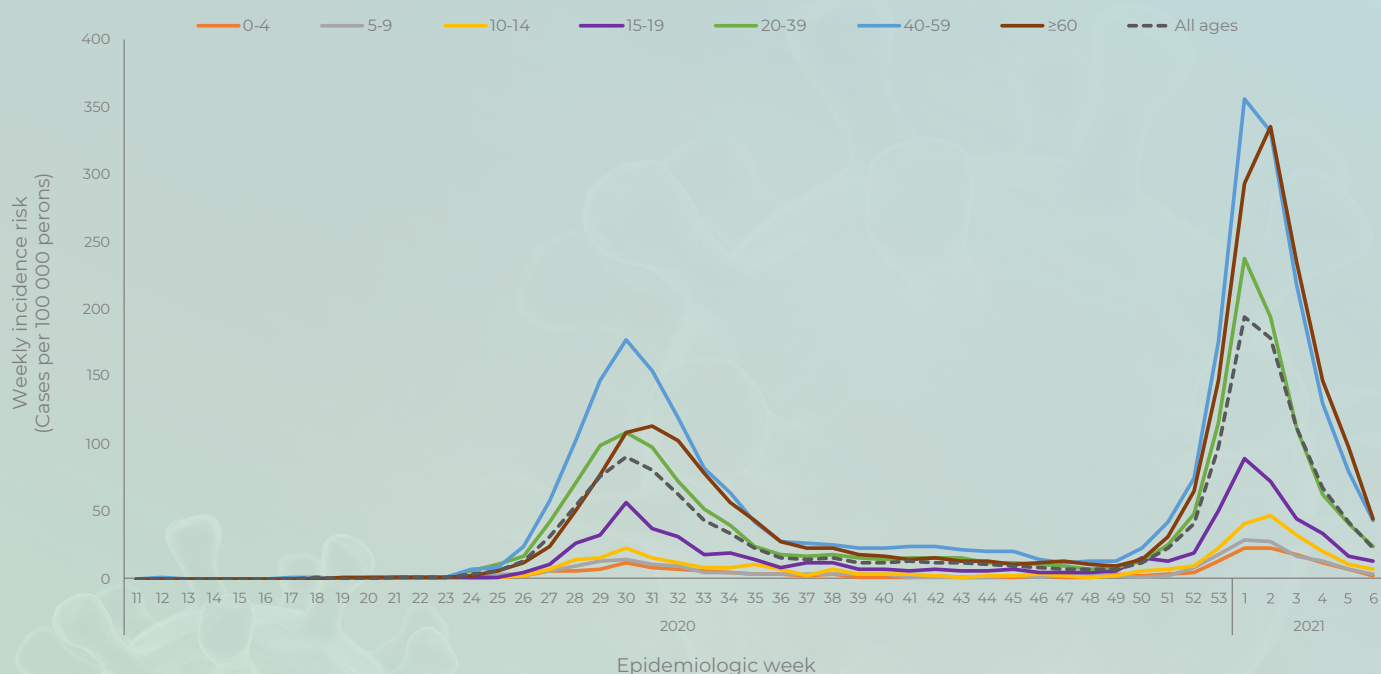


Figure 24. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group and epidemiologic week, Mpumalanga Province, 3 March 2020 -13 February 2021 (n= 67 561, 1 207 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

North West Province

Of the 59 428 cases reported from the North West Province, 49 047 (82.5%) had allocation by district. The Bojanala Platinum District (24 709/49 047, 50.4%), followed by the Dr Kenneth Kaunda District (12 027/49 047, 24.5%) contributed the majority of cases, all other districts contributed below 20% each. In week 6, Dr Kenneth Kaunda (24.9 cases per 100 000 persons) district reported the highest weekly incidence risk. The second wave in North West peaked in week 1 of 2021, all districts reported a decline in number of new cases since week 2 of 2021 (Figure 25).

The majority of cases from North West Province were in the 40-59-year-age group (24 255/58 777, 41.3%), followed by 20-39-year-age group (22 282/58 777, 37.9%). In the past week, three age groups 5-9-year-age group, 15-19-year-age group, and 10-14-year-age group reported an increase in weekly incidence risk, compared to the previous week (Figure 26).

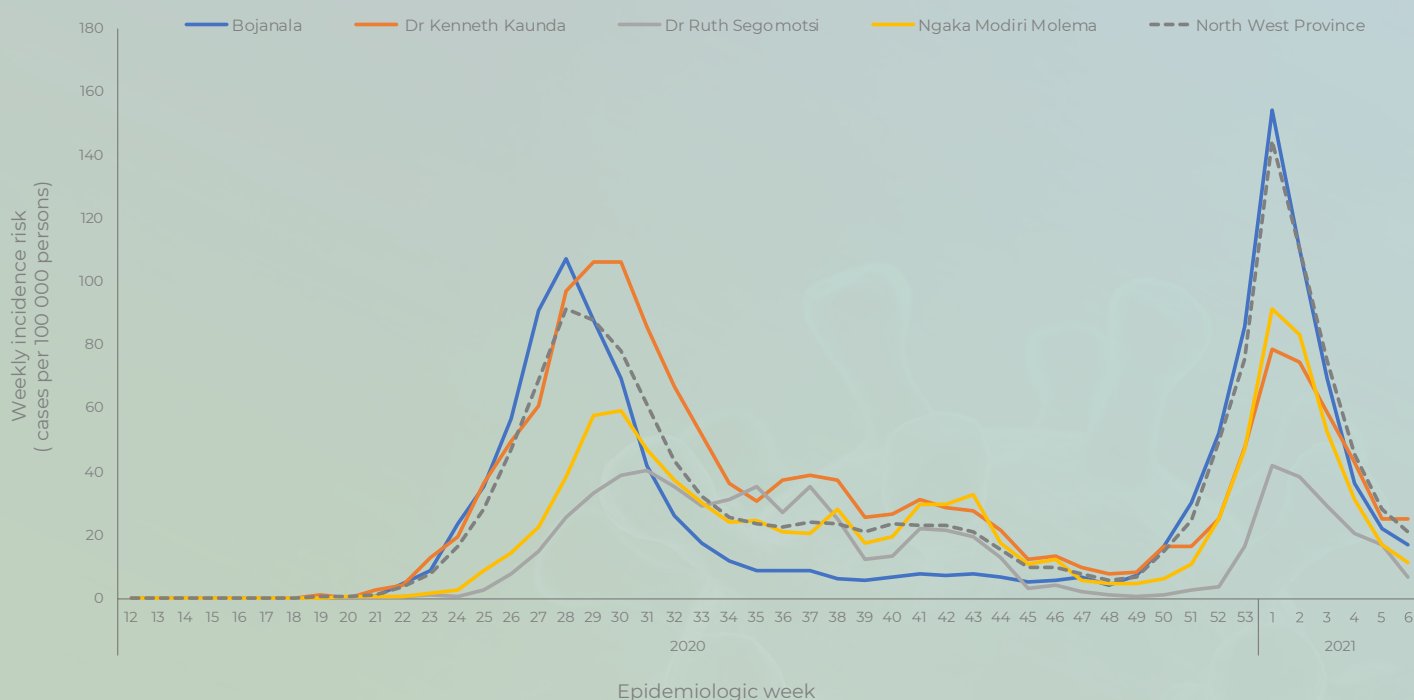


Figure 25. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, North West Province, 3 March 2020 -13 February 2021 (n= 49 047, 10 381 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

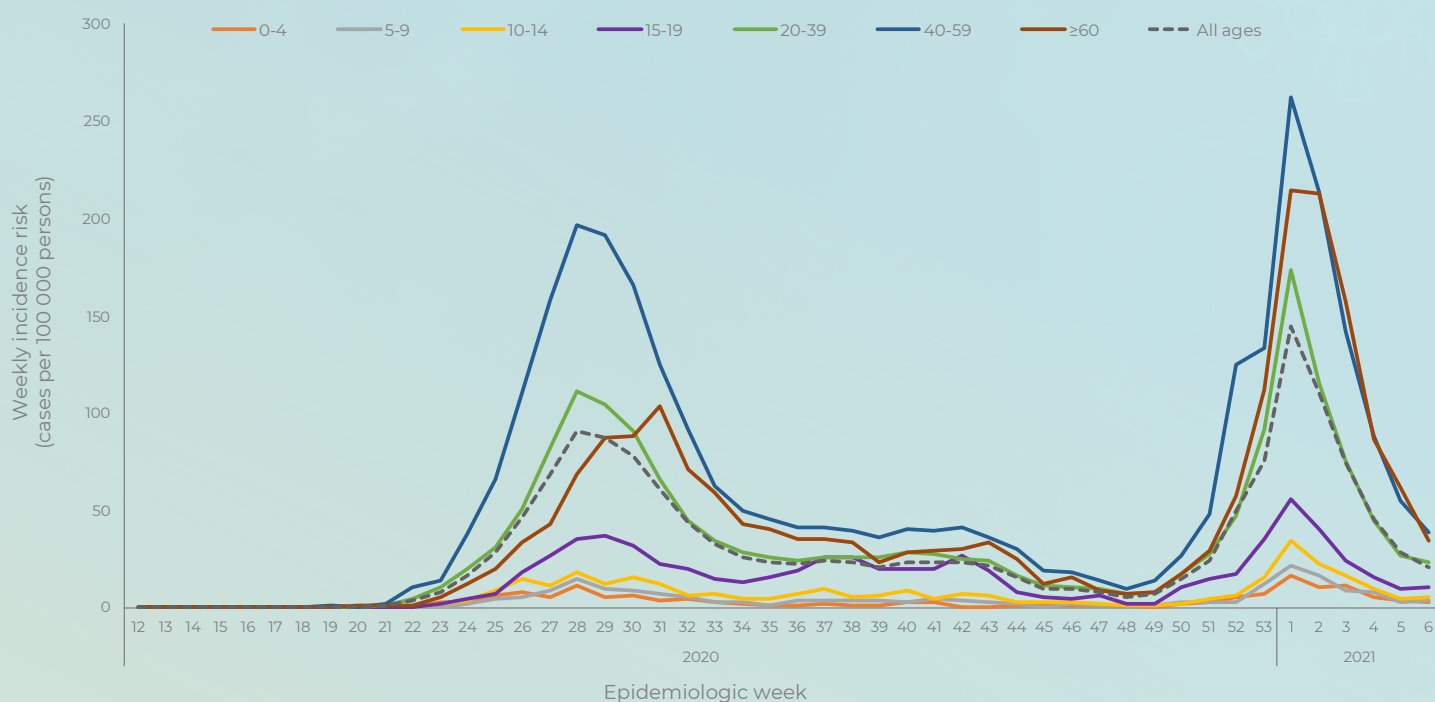


Figure 26. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, North West Province, 3 March 2020 –13 February 2021 (n= 58 777, 651 missing age)

Northern Cape Province

Of the 33 105 cases reported from the Northern Cape Province, 27 668 (83.6%) had allocation by district. The Frances Baard (9 658/27 668, 34.9%), followed by the Pixley ka Seme (7 003/27 668, 25.3%) districts contributed the majority of cases, all other districts contributed below 20% each. In week 6, the Namakwa (48.4 cases per 100 000 persons) and Pixley ka Seme (30.3 cases per 100 000 persons) districts reported the highest weekly incidence risk. The second wave in Northern Cape peaked in week 1 of 2021 and since week 2 of 2021 all districts reported a decrease in number of new cases reported (Figure 27).

The majority of cases from Northern Cape Province were in the 20-39-year-age group (12 747/32 814, 38.8), followed by 40-59-year-age group (11 241/32 814, 34.3%). In the past week, the 0-4-year-age group reported an increase in weekly incidence risk, 0.8 cases per 100 000 persons (20.0% increase) compared to previous week (Figure 28).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 6 2021

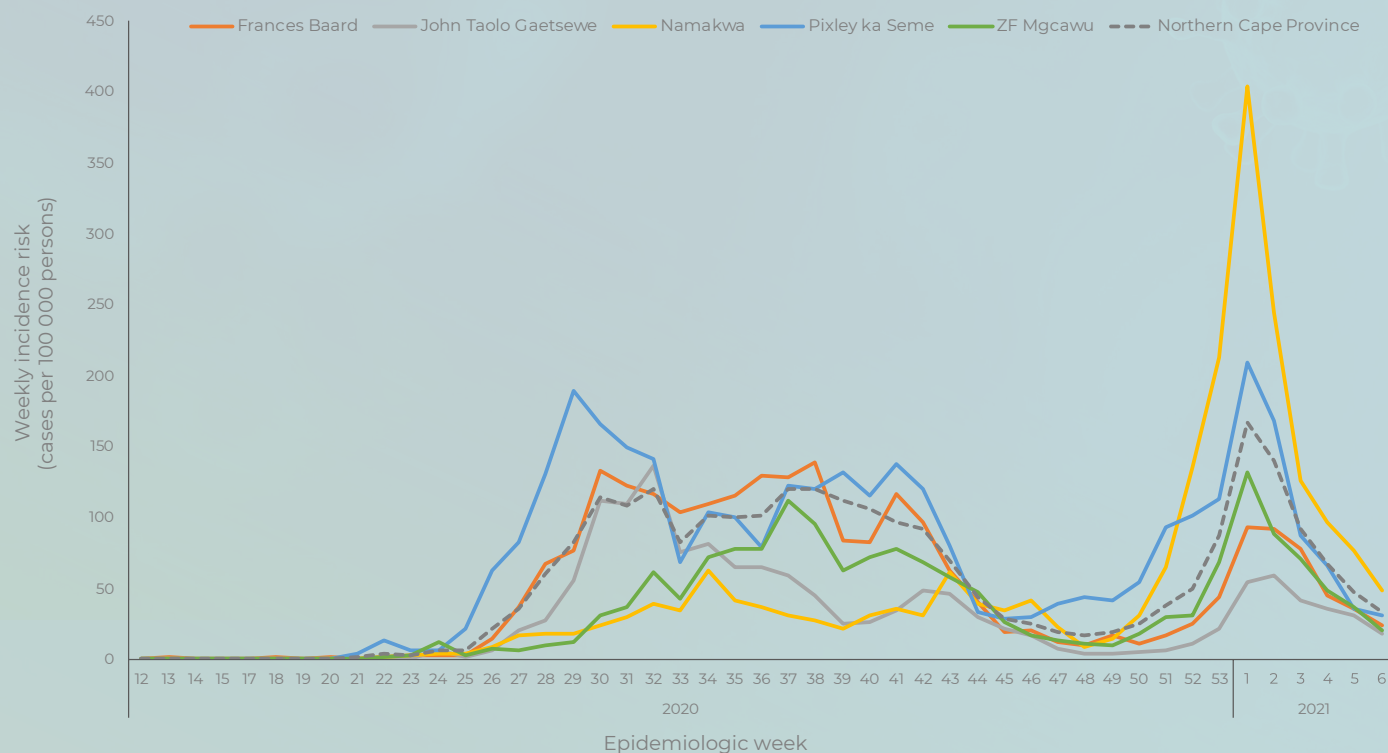


Figure 27. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Northern Cape Province, 3 March 2020 - 13 February 2021 (n= 27 668, 5 437 missing district)

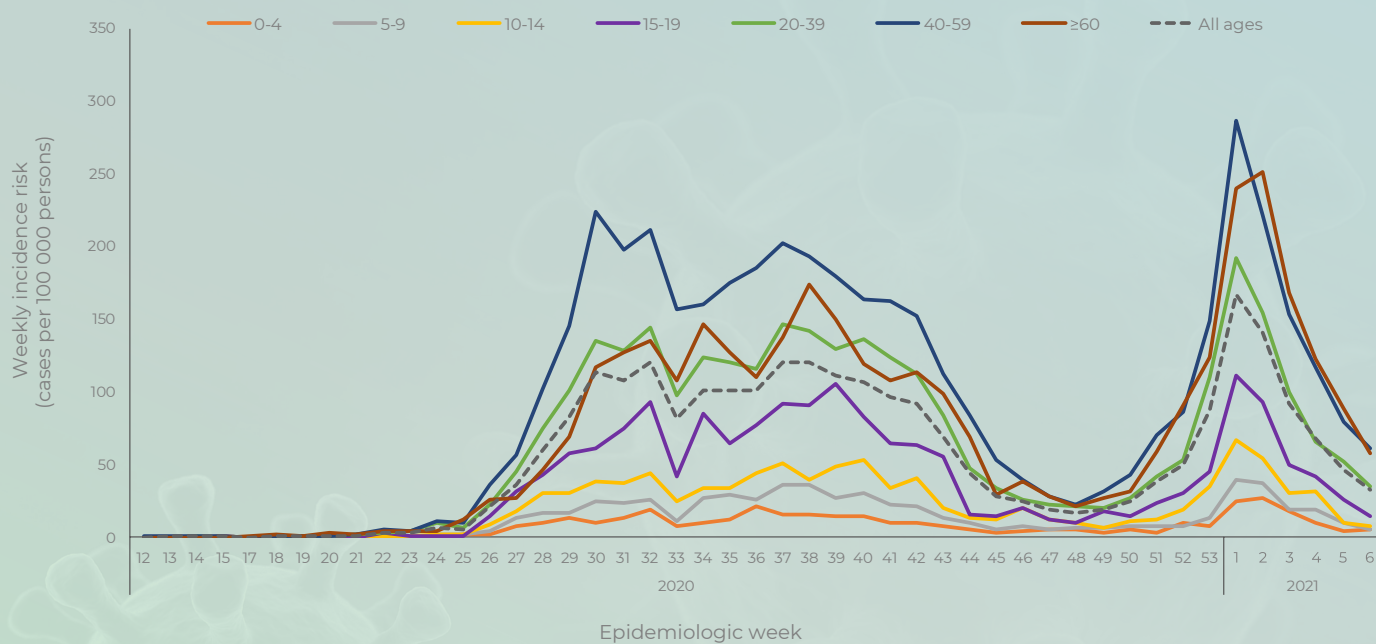


Figure 28. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Northern Cape Province, 3 March 2020 - 13 February 2021 (n= 32 814, 291 missing age)

Limitations

This report is based on laboratory-based surveillance of laboratory-confirmed cases. The number of reported cases is heavily dependent on testing practices. Although trends over time and comparisons by geographic area are presented in this report, changes in testing practices over time or differences by region may partially explain the results. The crude CFR reported here is subject to numerous limitations: it is likely to be an underestimation as reporting of deaths may be delayed and deaths which occurred outside health facilities may be missed. Differences in health-seeking behaviour by age group and sex could also contribute to observed differences in case numbers between groups. The reported doubling time estimates are affected by the number of tests conducted; if fewer tests are performed, this will also increase the doubling time estimate. Delays in reporting may result in incomplete data for recent weeks, leading to an apparent reduction in number of cases.

Conclusions

To date, 1 491 807 cases, including 47 899 deaths have been reported. The second wave, increase in cases initially reported from the Eastern Cape Province in week 43, peaked in week 1 of 2021, with all provinces reporting a decrease in numbers of new cases and incidence risk reported since week 2 of 2021. All districts of South Africa reported a decrease in number of new cases since week 3 of 2021 to date. Demographic trends have remained unchanged this reporting period, children aged <10 years had the lowest incidence risk and individuals aged 40-59 years had the highest incidence. The decreasing trends in numbers of new cases in recent weeks may be in part as a result of delay in reporting or changes in testing practices in the different provinces. In addition, number of confirmed cases diagnosed on antigen tests maybe underestimated as they are used in a number of different settings and results may not be fully reported yet.