

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

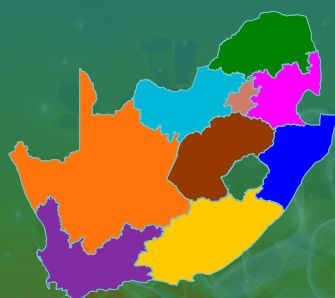
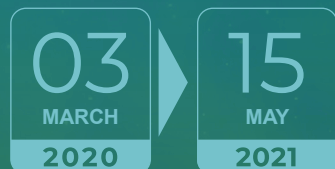


NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES

Division of the National Health Laboratory Service

SOUTH AFRICA WEEK 19 2021

CUMULATIVE DATA FROM



CASES

1 613 728
IN TOTAL

15 708
THIS WEEK**

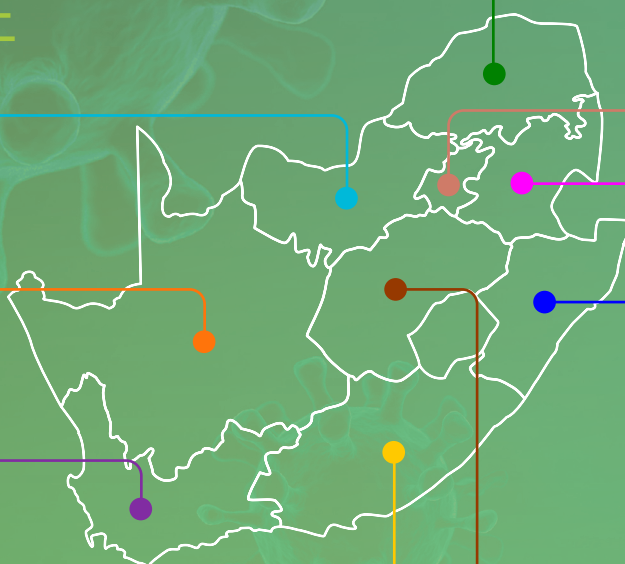


PERSONS

2 706,6
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 15 May 2021 (week 19 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 15 May 2021, a total of 1 613 728 laboratory-confirmed COVID-19 cases had been detected in South Africa. Of these, 17 133 were cases reported since the last report (week 18 of 2021). There was a 22.8% increase in the number of new cases detected in week 19 of 2021 (15 708) compared to the number of new cases detected in week 18 of 2021 (12 792).
- An additional 475 deaths were reported since the last report. The overall case-fatality ratio is 3.4% (55 210/1 613 728).
- In the past week, the Gauteng Province reported the highest proportion of the new cases detected (5 931/15 708, 37.8%), followed by the Free State Province (2 437/15 708, 15.5%), and the Northern Cape Province (2 202/15 708, 14.0%).
- In the past week, all the provinces reported an increase in weekly incidence risk, except the KwaZulu-Natal, Limpopo, and Free State provinces which reported a decrease in weekly incidence risk, compared to the previous week. The increase in weekly incidence risk ranged from 0.9 cases per 100 000 persons (5.4% increase) in the Mpumalanga Province to 25.8 cases per 100 000 persons (17.9% increase) in the Northern Cape Province. Some of the reduction in weekly incidence in the past week maybe due to delayed reporting.
- In the past week, the Northern Cape Province reported the highest weekly incidence risk (170.3 cases per 100 000 persons), followed by the Free State Province (83.2 cases per 100 000 persons), the North West Province (41.4 cases per 100 000 persons), and the Gauteng Province (38.3).
- In the past week, the Northern Cape Province reported weekly incidence higher than that reported in both first and second wave peaks, and two districts (Frances Baard and Pixley ka Seme) reported weekly incidence risk higher than the first and second wave peaks.

INCIDENCE
RISK FOR
CURRENT WEEK

26,3
CASES PER
100 000
PERSONS

37,8%
OF CASES
REPORTED IN
GAUTENG IN
CURRENT WEEK

IN CURRENT
WEEK, THE
HIGHEST
WEEKLY
INCIDENCE RISK
WAS IN CASES
AGED 50-54
YEARS (97,8
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 15 May 2021, a total of 1 613 728 laboratory-confirmed COVID-19 cases were reported in South Africa (Figures 1 and 2). This is 17 133 more cases than the number reported in the last report (week 18 of 2021 report). The number of new cases detected in week 19 of 2021 (15 708) was higher than the number of new cases detected in week 18 of 2021 (12 792), this represented a 22.8% increase in the number of new cases compared to the previous week. In the past week, the Gauteng Province reported the highest number of new cases (5 931/15 708, 37.8%), followed by the Free State Province (2 437/15 708, 15.5%), and the Northern Cape Province (2 202/15 708, 14.0%) (Table 1). Five provinces, Gauteng (434 597/1 613 728, 26.9%), KwaZulu-Natal (338 029/1 613 728, 20.9%), Western Cape (289 789/1 613 728, 18.0%), Eastern Cape (196 592/1 613 728, 12.2%), and Free State (94 623/1 613 728, 5.9%) continued to report the majority (1 353 630/1 613 728, 83.9%) 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 18 to week 19 of 2021.

The cumulative incidence risk for the country increased from 2 680.2 cases per 100 000 persons in week 18 of 2021 to 2 706.6 cases per 100 000 persons in week 19 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

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

reported the highest cumulative incidence risk (4 136.5 cases per 100 000 persons), followed by the Northern Cape Province (3 453.3 cases per 100 000 persons), the Free State Province (3 230.7 cases per 100 000 persons), the KwaZulu-Natal Province (2 931.3 cases per 100 000 persons), the Eastern Cape Province (2 919.4 cases per 100 000 persons), and the Gauteng Province (2 806.0 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 (1 101.2 cases per 100 000 persons).

Since February 2021, the Northern Cape Province continued to report the highest weekly incidence risk (170.3 cases per 100 000 persons) in week 19 of 2021, followed by the Free State Province (83.2 cases per 100 000 persons), the North West Province (41.4 cases per 100 000 persons), and the Gauteng Province (38.3 cases per 100 000 persons). In the past week, all the provinces reported an increase in weekly incidence risk, except the KwaZulu-Natal (0.1 cases per 100 000 persons, 2.1% decrease), the Limpopo (0.3 cases per 100 000 persons, 6.2% decrease), and the Free State (1.7 cases per 100 000 persons, 2.0% decrease) provinces which reported a decrease in weekly incidence risk, compared to the previous week. The increase in weekly incidence risk ranged from 0.9 cases per 100 000 persons (5.4% increase) in the Mpumalanga Province to 25.8 cases per 100 000 persons (17.9% increase) in the Northern Cape Province (Figure 4). From week 18 of 2021 to date, the Northern Cape Province reported weekly incidence risk higher than that reported in the first and second wave peaks

(current peak 170.3 vs 120.0 and 167.0 cases per 100 000 persons in wave 1 and wave 2 respectively). Some of the reductions in weekly incidence risk in the past week maybe due to delayed reporting.

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 18 of 2021, the estimated doubling time of number of cases decreased in all provinces. The estimated doubling time decreased in the Eastern Cape Province (from 5 914.2 days to 5 105.6 days, 13.7% decrease), the KwaZulu-Natal Province (from 3 252.5 days to 2 295.4 days, 29.4% decrease), the Western Cape Province (from 1 357.9 days to 965.4 days, 28.9% decrease), the Gauteng Province (from 718.1 days to 455.9 days, 36.5% decrease), and the Free State Province (from 206.8 days to 156.7 days, 24.2% decrease) (Figure 5).

The case-fatality ratio (CFR) was 3.4% (55 210/1 613 728); an additional 475 deaths were reported since the last report. The number of deaths reported in the past week was higher than the number reported in the previous week, 475 deaths compared to 318 deaths. 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.

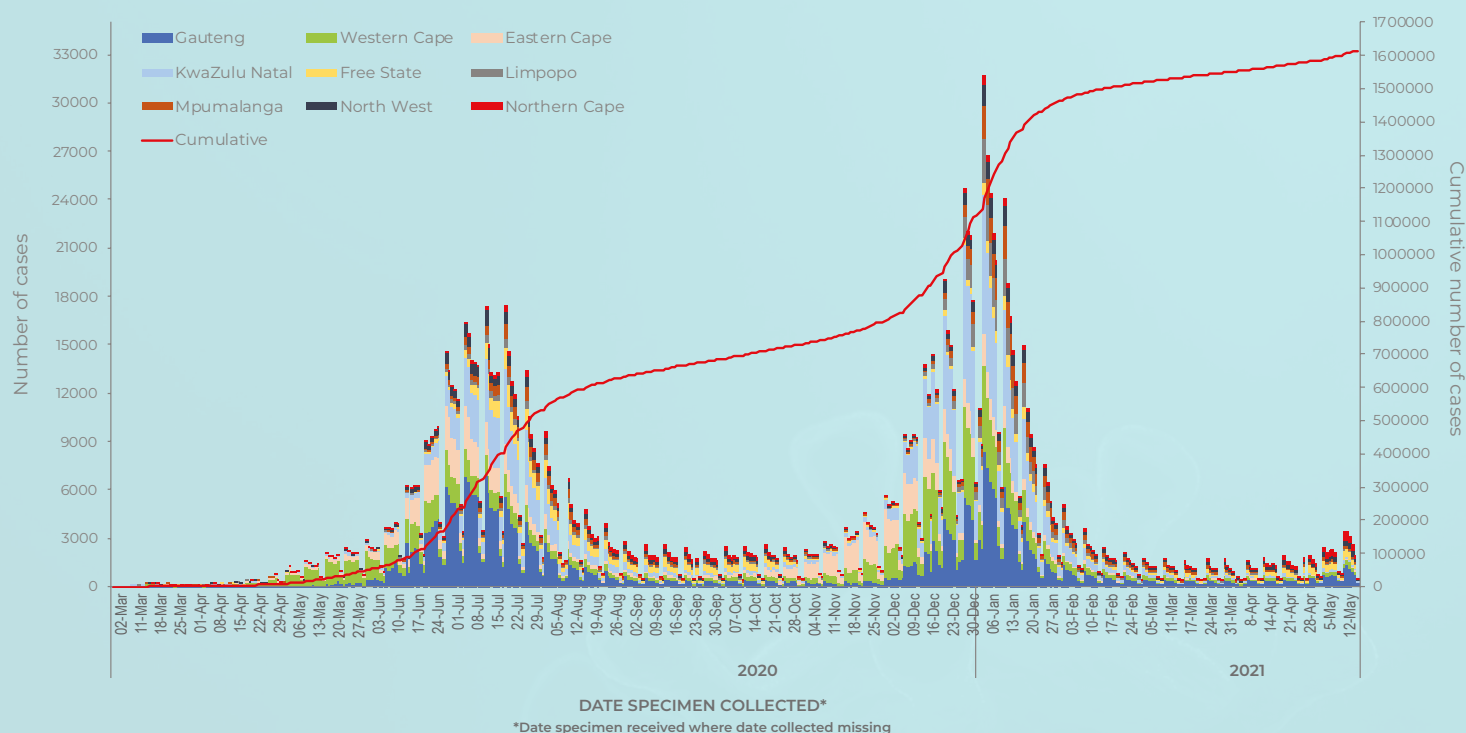


Figure 1. Number and cumulative number of laboratory-confirmed cases of COVID-19 by province and date of specimen collection, South Africa, 3 March 2020 –15 May 2021 (n=1 613 728)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

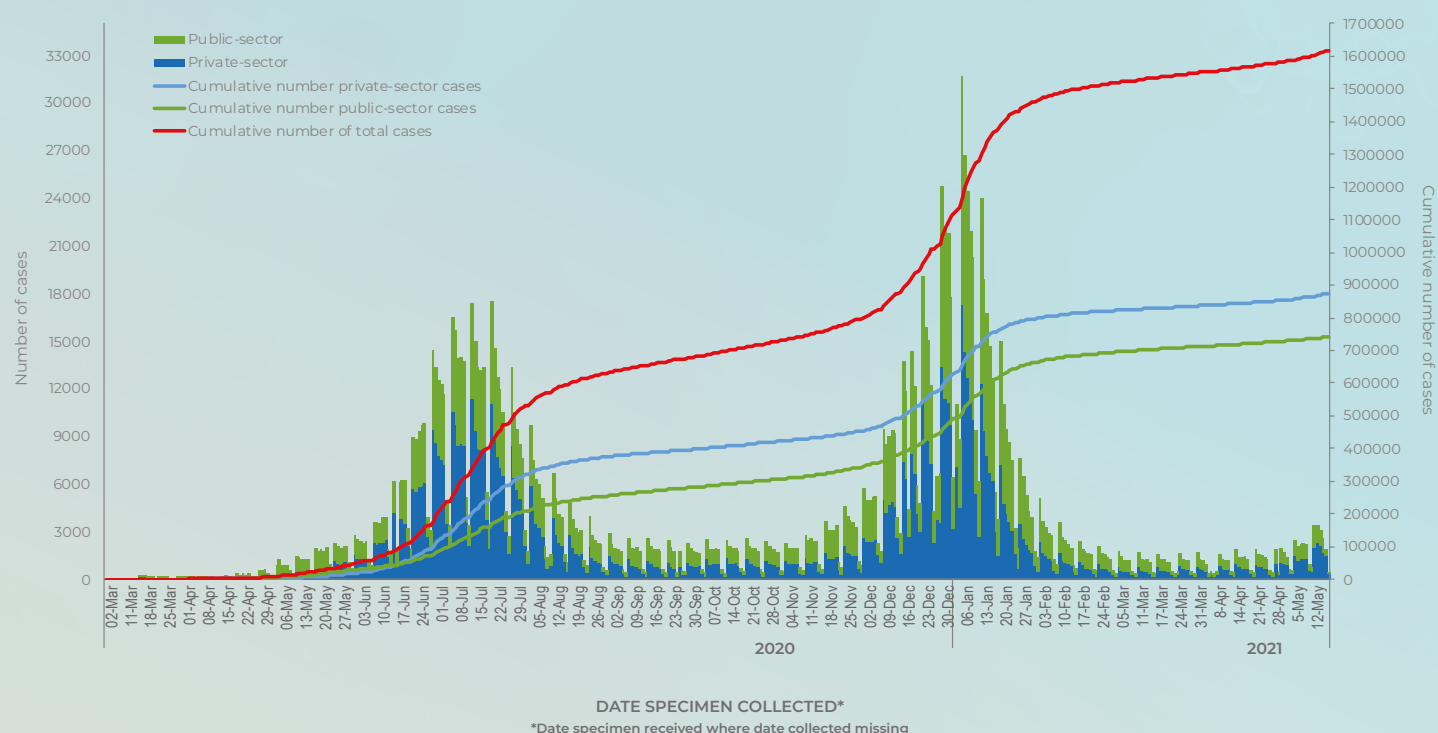


Figure 2. Number and cumulative number of laboratory-confirmed cases of COVID-19, by testing laboratory sector and date of specimen collection, South Africa, 3 March 2020 –15 May 2021 (n=1 613 728)

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 –15 May 2021 (n=1 613 728)

Province	Cumulative cases (n) (percentage, n/total cases in South Africa)	New cases ¹ detected in week 19 (9-15 May 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 19 of 2021 (cases/100 000 persons)	Tests ⁴ per 100 000 persons, 9-15 May 2021
Eastern Cape	196 592 (12.2)	299 (1.9)	6 734 001	2 919.4	4.4	182.2
Free State	94 623 (5.9)	2 437 (15.5)	2 928 903	3 230.7	83.2	555.2
Gauteng	434 597 (26.9)	5 931 (37.8)	15 488 137	2 806.0	38.3	534.2
KwaZulu-Natal	338 029 (20.9)	608 (3.9)	11 531 628	2 931.3	5.3	290.1
Limpopo	64 449 (4.0)	228 (1.5)	5 852 553	1 101.2	3.9	79.5
Mpumalanga	79 950 (5.0)	798 (5.1)	4 679 786	1 708.4	17.1	203.3
North West	71 055 (4.4)	1 702 (10.8)	4 108 816	1 729.3	41.4	312.0
Northern Cape	44 644 (2.8)	2 202 (14.0)	1 292 786	3 453.3	170.3	813.7
Western Cape	289 789 (18.0)	1 503 (9.6)	7 005 741	4 136.5	21.5	498.5
Unknown	0					
Total	1 613 728	15 708	59 622 350	2 706.6	26.3	364.2

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

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

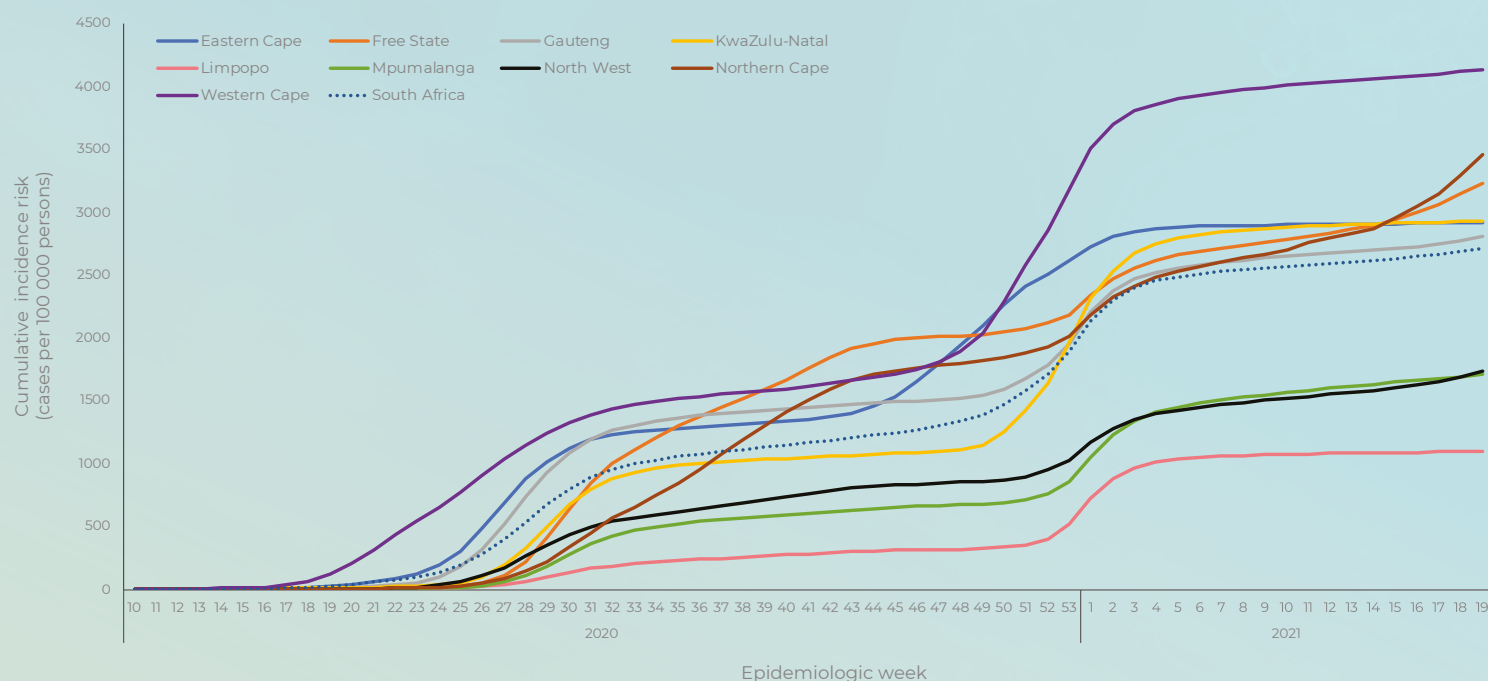


Figure 3. Cumulative incidence risk of laboratory-confirmed cases of COVID-19 by province and epidemiologic week, South Africa, 3 March 2020 –15 May 2021 (n= 1 613 728)

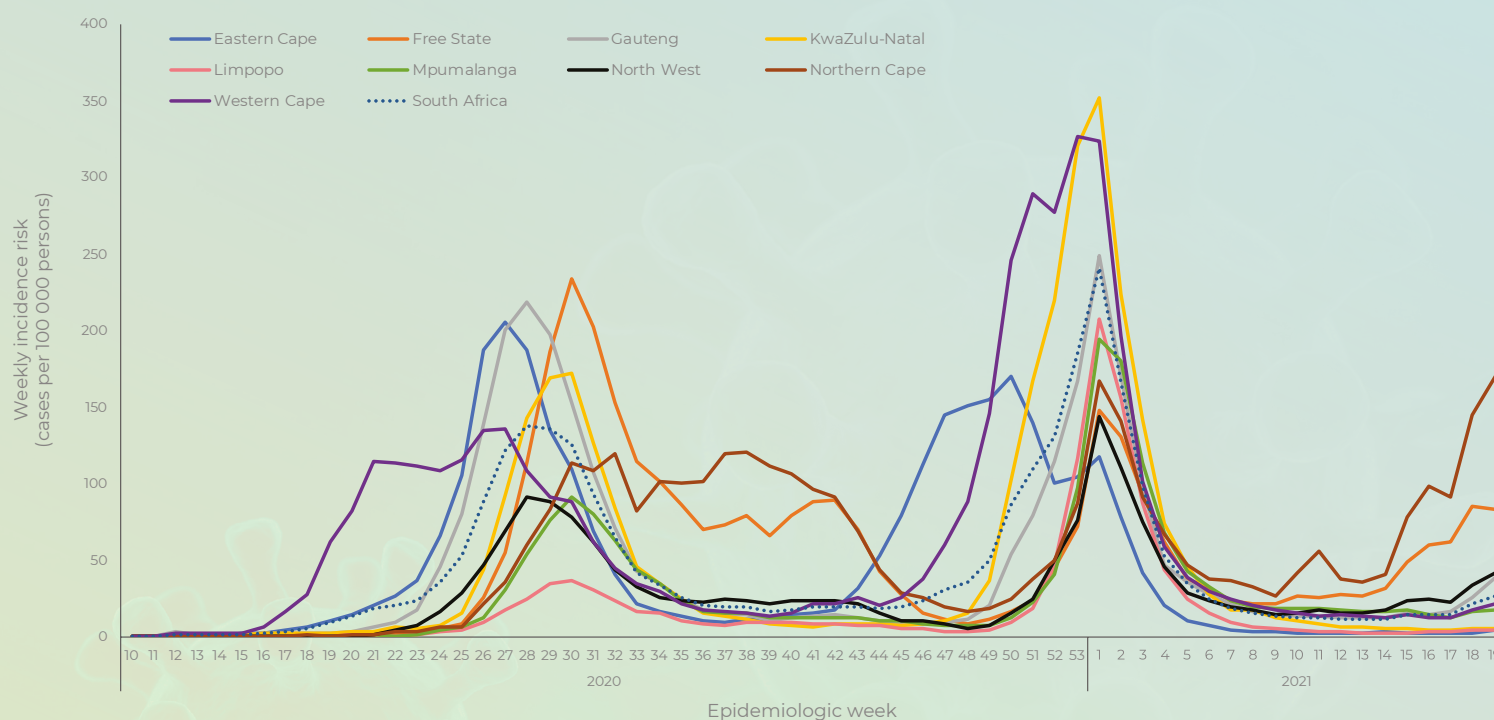


Figure 4. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by province and epidemiologic week, South Africa, 3 March 2020 –15 May 2021 (n=1 613 728)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

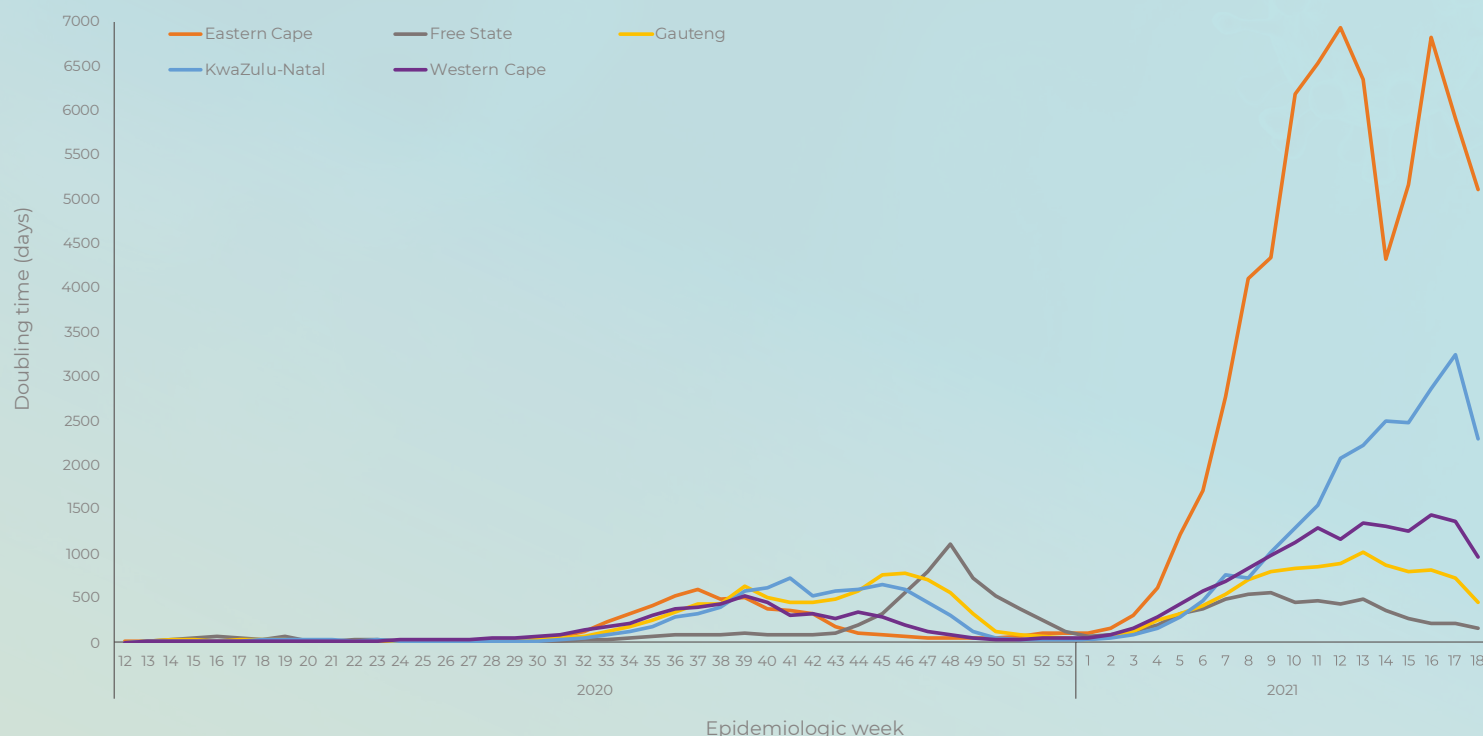


Figure 5. Doubling time of number of laboratory-confirmed cases of COVID-19 by province (for 5 provinces with the majority of cases) and epidemiologic week, South Africa, 23 March-2020 –8 May 2021 (n= 1 597 933)

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 (188 027/1 598 530, 11.8%) and 30-34-year (182 605/1 598 530, 11.4%) age groups (Figure 6). Similarly, among the cases reported in the past week, the highest number of cases was in the 50-54-year (2 515/15 593, 16.1%) and the 35-39-year (1 462/15 593, 9.4%) age groups. The median age for cases reported in week 19 of 2021 was similar (41 years, IQR 29-52), to that of total cases (40 years). The highest cumulative incidence risk remained among cases aged 50-54 years (5 527.1 cases per 100 000 persons), followed by cases aged 55-59 years (5 428.5 cases per 100 000 persons) and cases ≥ 80 years (5 377.0 cases per 100 000 persons). The lowest cumulative incidence risk was reported in the younger age-groups, 336.1 cases per 100 000 persons and 420.5 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 19 of 2021 was reported in the 50-54-year age group (97.8 cases per 100 000 persons), followed by cases ≥ 80 years (68.3 cases per 100 000 persons), and the lowest weekly incidence risk

was in the 0-4-year age group (2.6 cases per 100 000 persons) (Figure 8 and Table 2).

To date, the majority of COVID-19 cases reported were female 57.7% (921 588/1 596 280). This trend continued in the past week where 55.4% (8 636/15 576) of cases were female. The cumulative incidence risk has remained consistently higher among females (2 995.6 cases per 100 000 persons) than among males (2 296.8 cases per 100 000 persons) (Figure 9). The peak cumulative incidence risk was in the 50-54-year-age group (5 770.2 cases per 100 000 persons) for females, and in the ≥ 80 -year-age group (5 603.8 cases per 100 000 persons) for males (Figure 10). In week 19 of 2021, the highest weekly incidence risk was in the 50-54-year age group (97.4 cases per 100 000 persons) and (97.6 cases per 100 000 persons) for both females and males, respectively. 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.

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

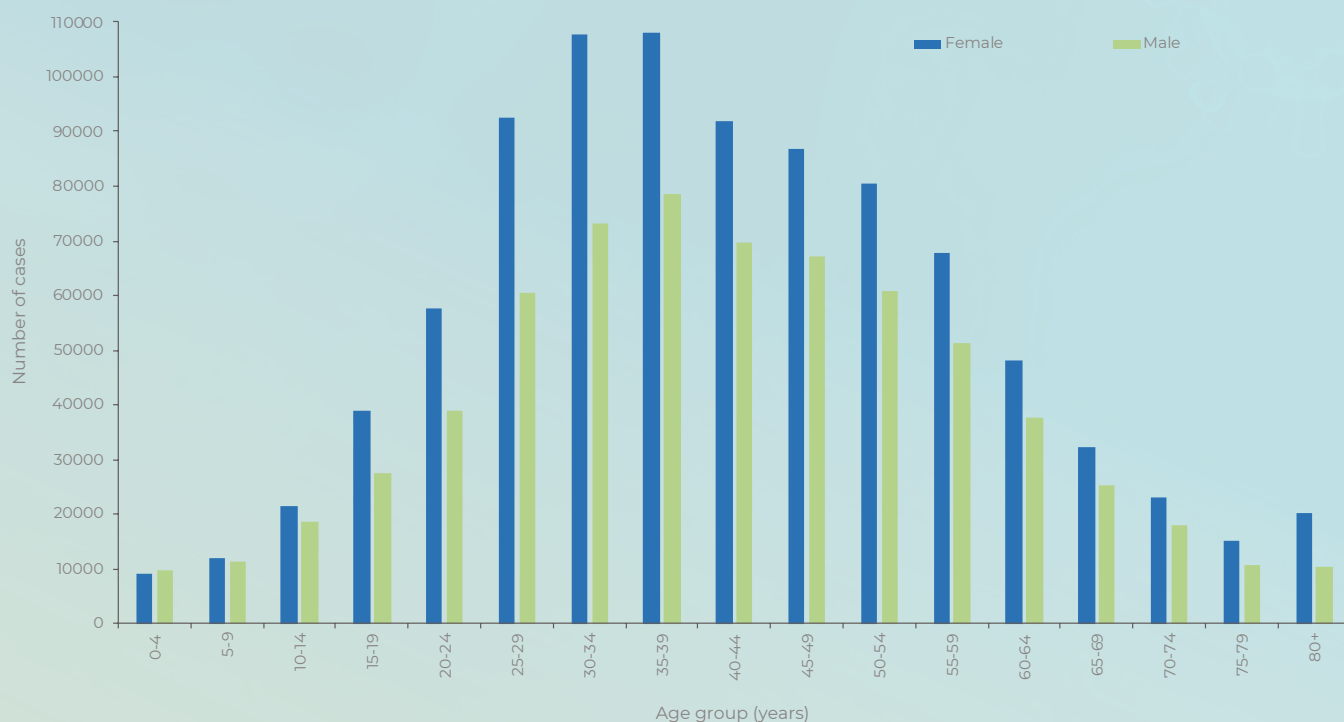


Figure 6. Number of laboratory-confirmed cases of COVID-19 by age group and sex, South Africa, 3 March 2020 –15 May 2021 (n = 1 582 515, sex/age missing for 31 213)

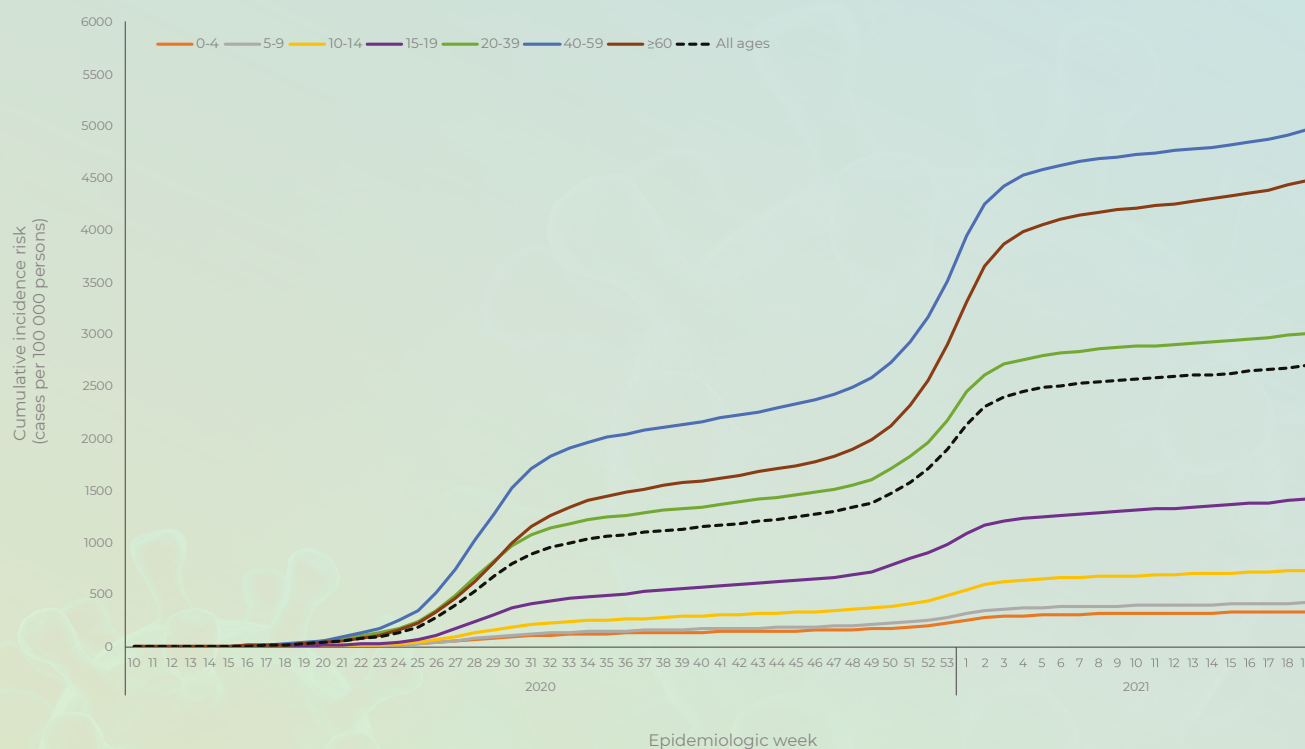


Figure 7. Cumulative incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, South Africa, 3 March 2020–15 May 2021 (n= 1 598 530, 15 198 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

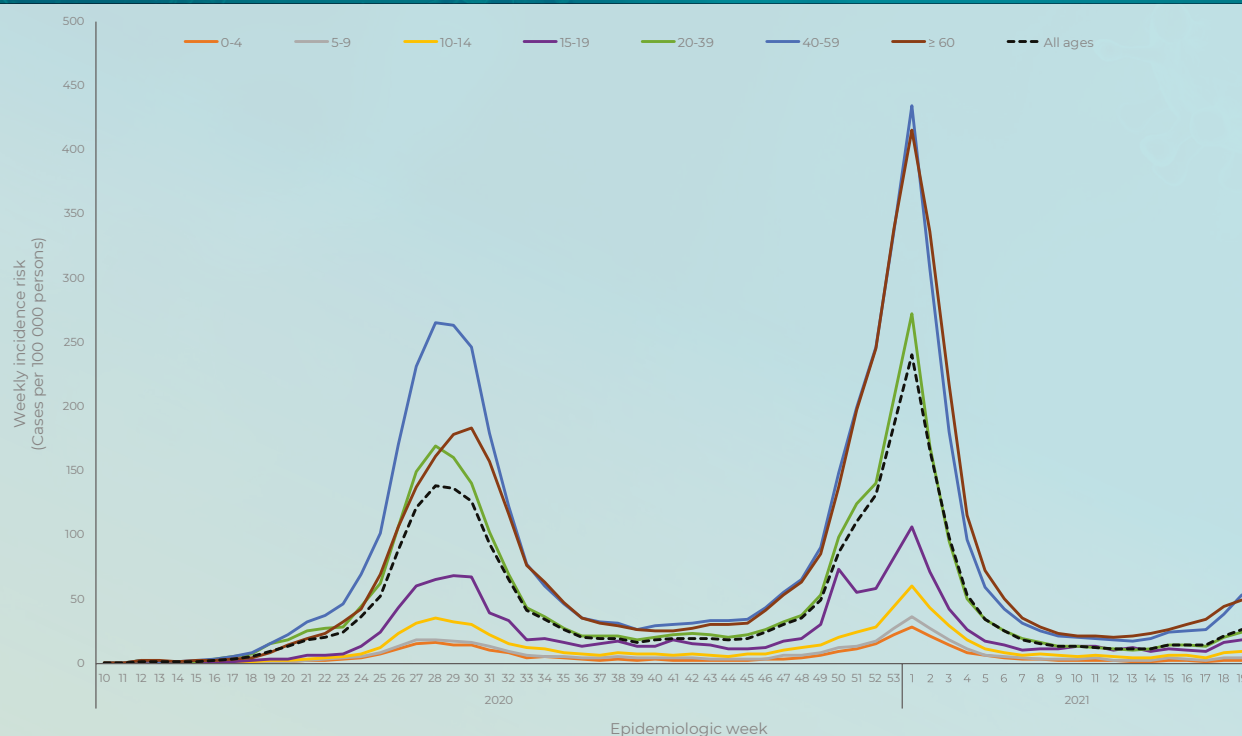


Figure 8. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, South Africa, 3 March 2020 -15 May 2021 (n= 1 598 530, 15 198 missing age)

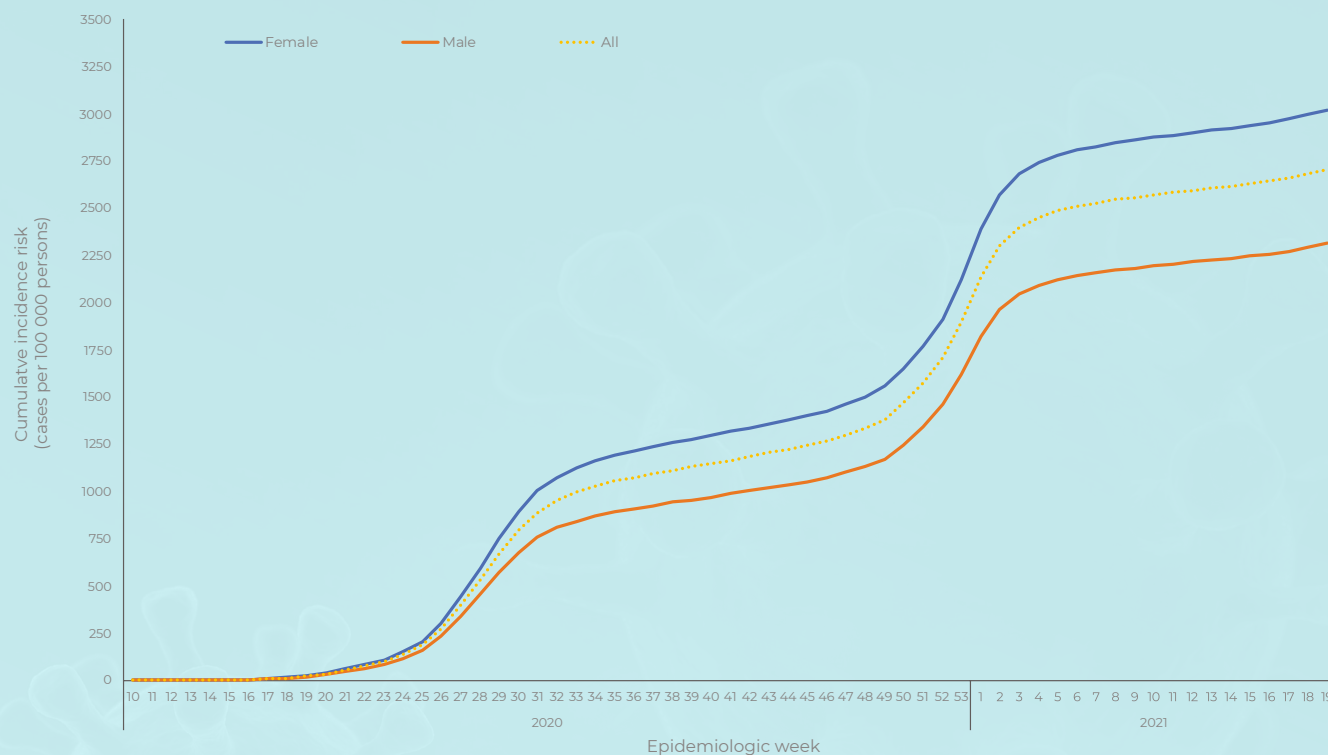


Figure 9. Cumulative incidence risk by sex and epidemiologic week, South Africa, 3 March 2020 -15 May 2021 (n= 1 596 280, sex missing for 17 448)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

Table 2. Number of laboratory-confirmed cases of COVID-19 and cumulative/weekly incidence risk by age group, South Africa, 3 March 2020 –15 May 2021, n= 1 598 530, 15 198 missing age)

Age group (years)	Cumulative cases (n) (percentage, n/ total cases in South Africa)	New cases ¹ detected in week 19 (9-15 May 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 19 of 2021 (cases/100 000 persons)
0-4	19 301 (1.2)	147 (0.9)	5 743 450	336.1	2.6
5-9	24 036 (1.5)	225 (1.4)	5 715 952	420.5	3.9
10-14	41 122 (2.6)	515 (3.3)	5 591 553	735.4	9.2
15-19	67 702 (4.2)	881 (5.6)	4 774 579	1 418.0	18.5
20-24	97 618 (6.1)	961 (6.2)	4 823 367	2 023.9	19.9
25-29	154 694 (9.7)	1 177 (7.5)	5 420 754	2 853.7	21.7
30-34	182 605 (11.4)	1 312 (8.4)	5 641 750	3 236.7	23.3
35-39	188 027 (11.8)	1 462 (9.4)	4 798 293	3 918.6	30.5
40-44	162 830 (10.2)	1 259 (8.1)	3 733 942	4 360.8	33.7
45-49	155 236 (9.7)	1 347 (8.6)	3 169 648	4 897.6	42.5
50-54	142 116 (8.9)	2 515 (16.1)	2 571 263	5 527.1	97.8
55-59	120 041 (7.5)	1 114 (7.1)	2 211 309	5 428.5	50.4
60-64	86 542 (5.4)	813 (5.2)	1 796 316	4 817.7	45.3
65-69	58 232 (3.6)	668 (4.3)	1 408 665	4 133.8	47.4
70-74	41 448 (2.6)	509 (3.3)	1 007 174	4 115.3	50.5
75-79	25 940 (1.6)	294 (1.9)	637 062	4 071.8	46.1
≥80	31 040 (1.9)	394 (2.5)	577 273	5 377.0	68.3
Unknown	15 198	115			
Total	1 613 728	15 708	59 622 350	2 706.6	26.3

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

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

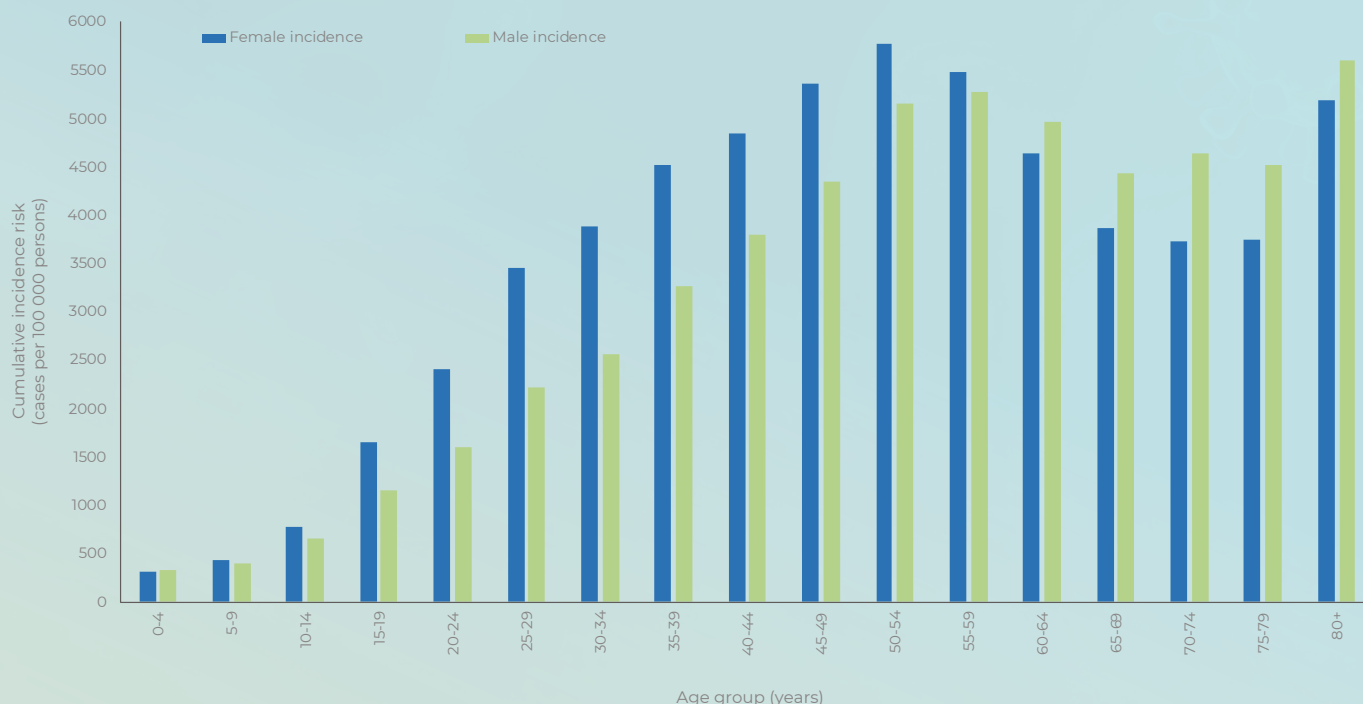


Figure 10. Cumulative risk by age group and sex, South Africa, 3 March 2020 –15 May 2021 (n=1 582 515, sex/age missing for 31 213)

Provincial trends of COVID-19 cases

Following the decline in the number of new cases since week 2 of 2021, from week 10 of 2021 to date several provinces have reported an increase in weekly incidence risk which varied by province and week. In week 18, all provinces reported an increase in weekly incidence. Whereas in week 19 all provinces accept the KwaZulu-Natal, Limpopo, and Free State provinces reported an increase in weekly incidence risk. Changes in trends by district and age group for each province are presented below.

Eastern Cape Province

Of the 196 592 cases reported from the Eastern Cape Province, 174 453 (88.7%) cases had allocation by district. In the past week, all the districts reported an increase in weekly incidence risk, except the OR Tambo District (0.3 cases per 100 000 persons, 40.0% reduction) which reported a decrease in weekly incidence risk, while Alfred Nzo District showed no change in weekly

incidence risk, compared to the previous week (Figure 11). The increase ranged from 0.3 cases per 100 000 persons (50.0% increase) in the Amathole District to 6.2 cases per 100 000 persons (133.9% increase) in the Nelson Mandela Bay Metro.

In the past week, all the age groups reported an increase in weekly incidence risk, compared to the previous week (Figure 12). The increase ranged from 0.4 cases per 100 000 persons (150.0% increase) in the 0-4-year to 2.9 cases per 100 000 persons (129.5% increase) in the 20-39-year age groups.

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

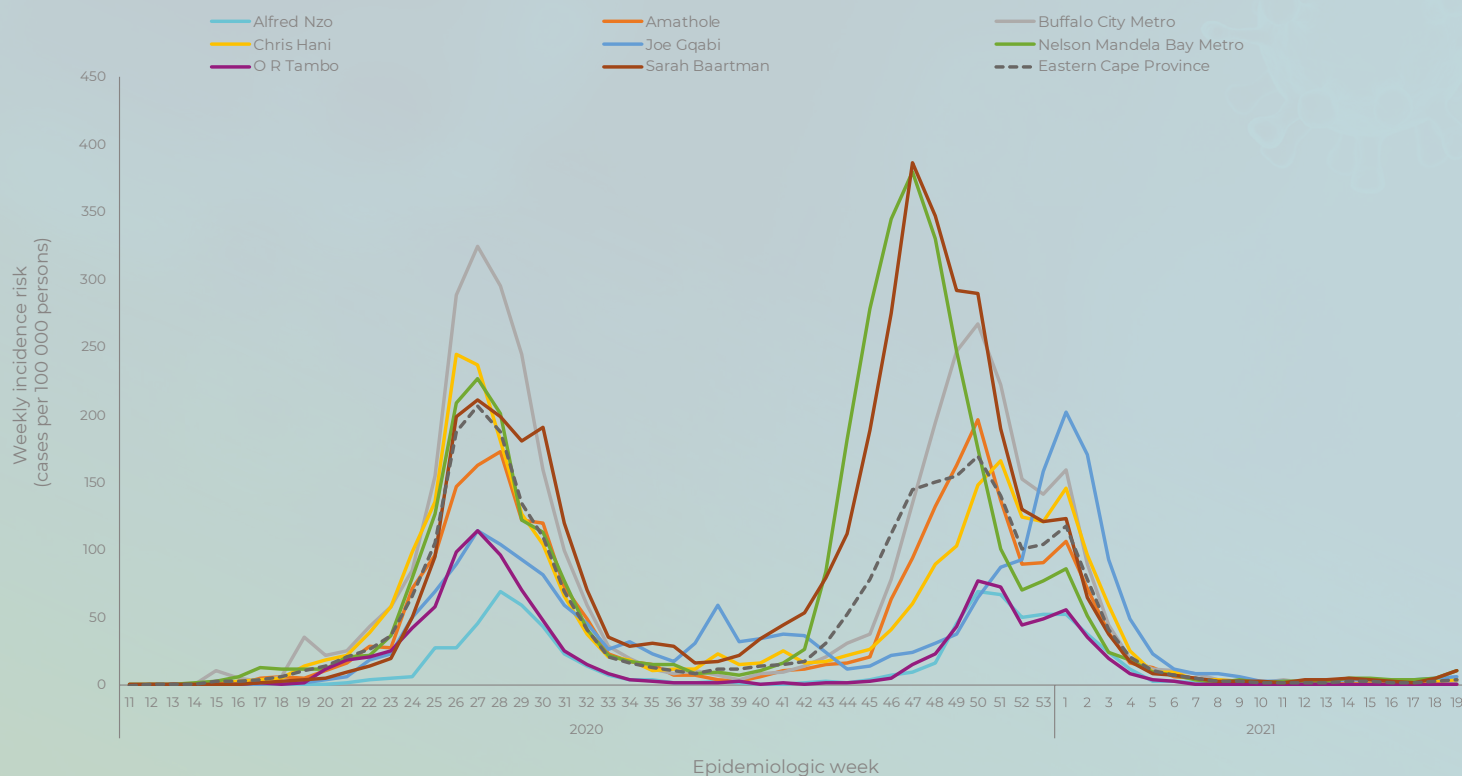


Figure 11. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Eastern Cape Province, 3 March 2020 –15 May 2021 (n=174 453, 22 139 missing district)

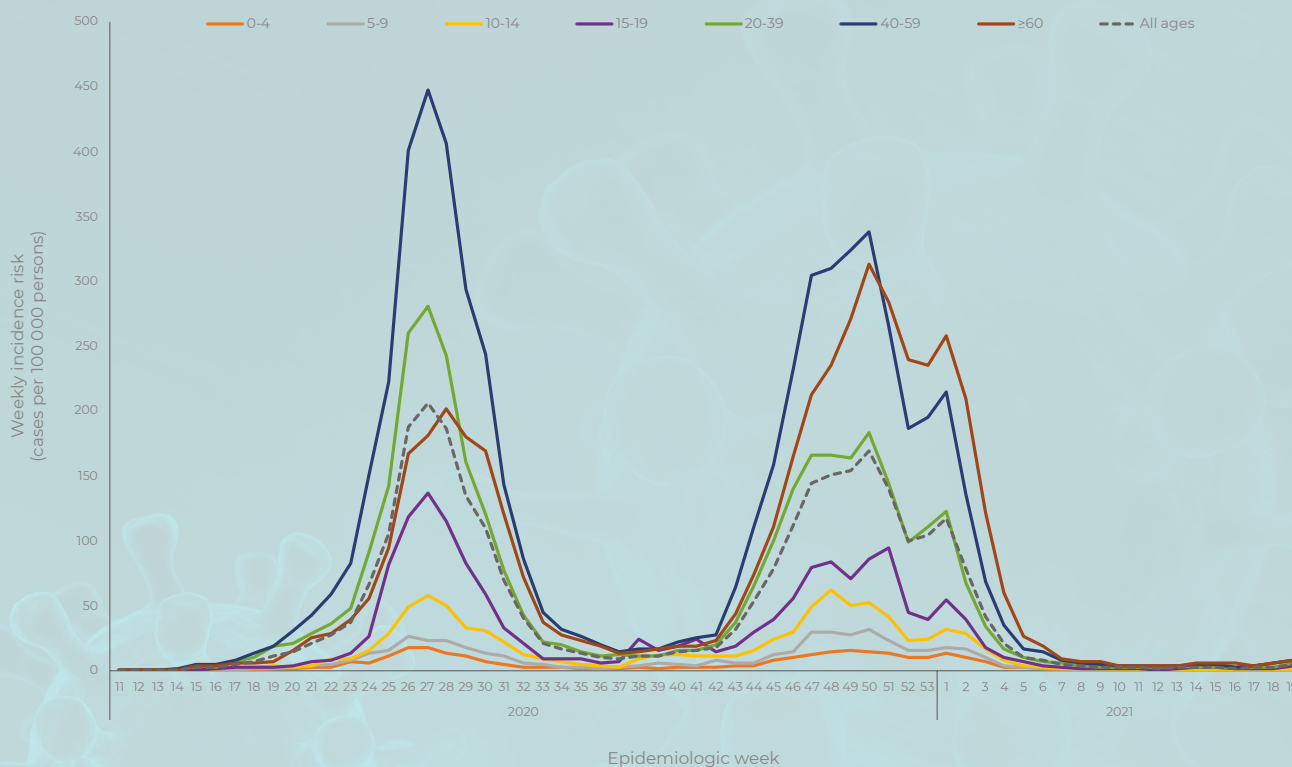


Figure 12. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Eastern Cape Province, 3 March 2020 –15 May 2021 (n=194 526, 2 066 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

Western Cape Province

Of the 289 789 cases reported from the Western Cape Province, 272 580 (94.1%) cases had allocation by district. In week 19 of 2021, all the districts reported an increase in weekly incidence risk, except the Garden Route District which reported a decrease in weekly incidence risk, while Overberg District showed no change in weekly incidence risk, compared to the previous week (Figure 13). The increase ranged from 1.3 cases per 100

000 persons (6.2% increase) in the Central Karoo to 10.4 cases per 100 000 persons (47.5% increase) in the West Coast districts.

In the past week, all the age groups reported an increase in weekly incidence risk, except the 0-4 and 15-19-year age groups which reported a decrease in weekly incidence risk, compared to the previous week (Figure 14). The increase ranged from 0.2 cases per 100 000 persons (1.1% increase) in the 20-39-year to 13.7 cases per 100 000 persons (51.9% increase) in the 40-59-year age groups.

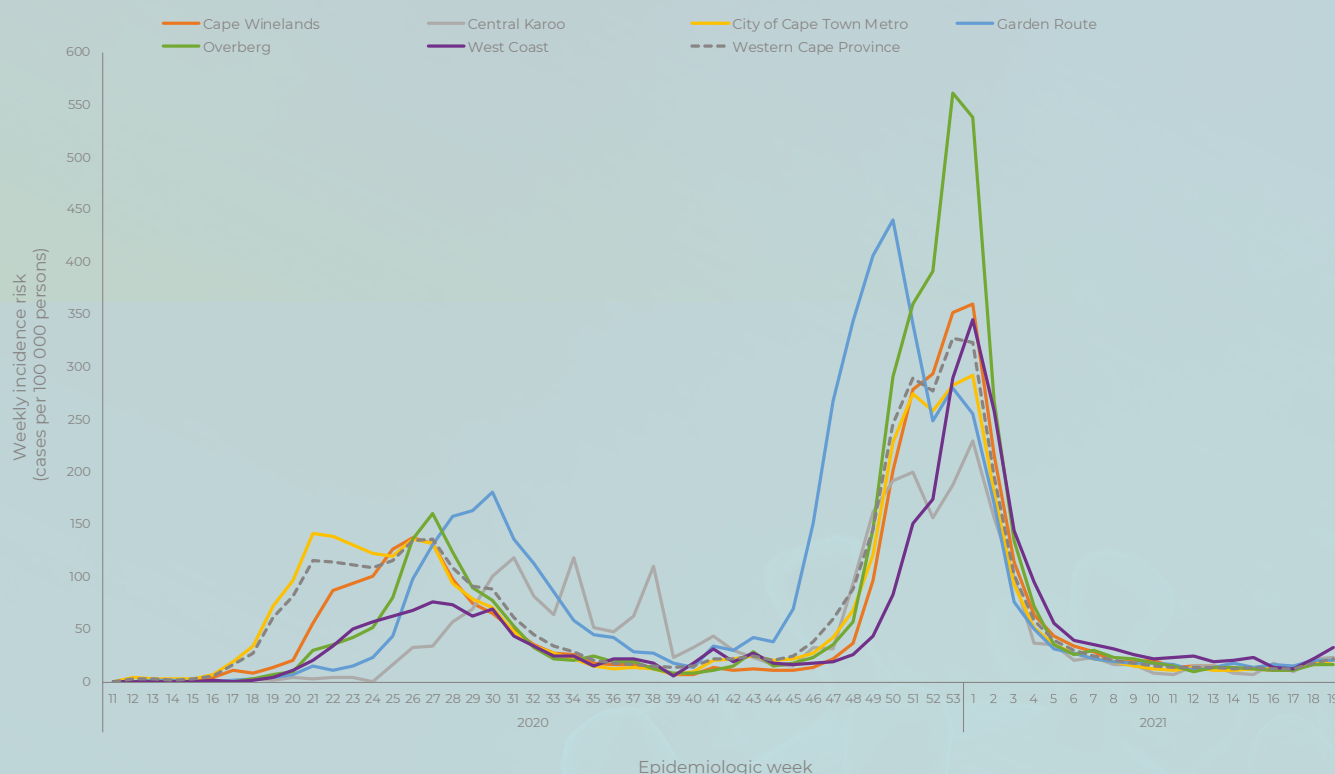


Figure 13. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Western Cape Province, 3 March 2020 –15 May 2021 (n=272 580, 17 209 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

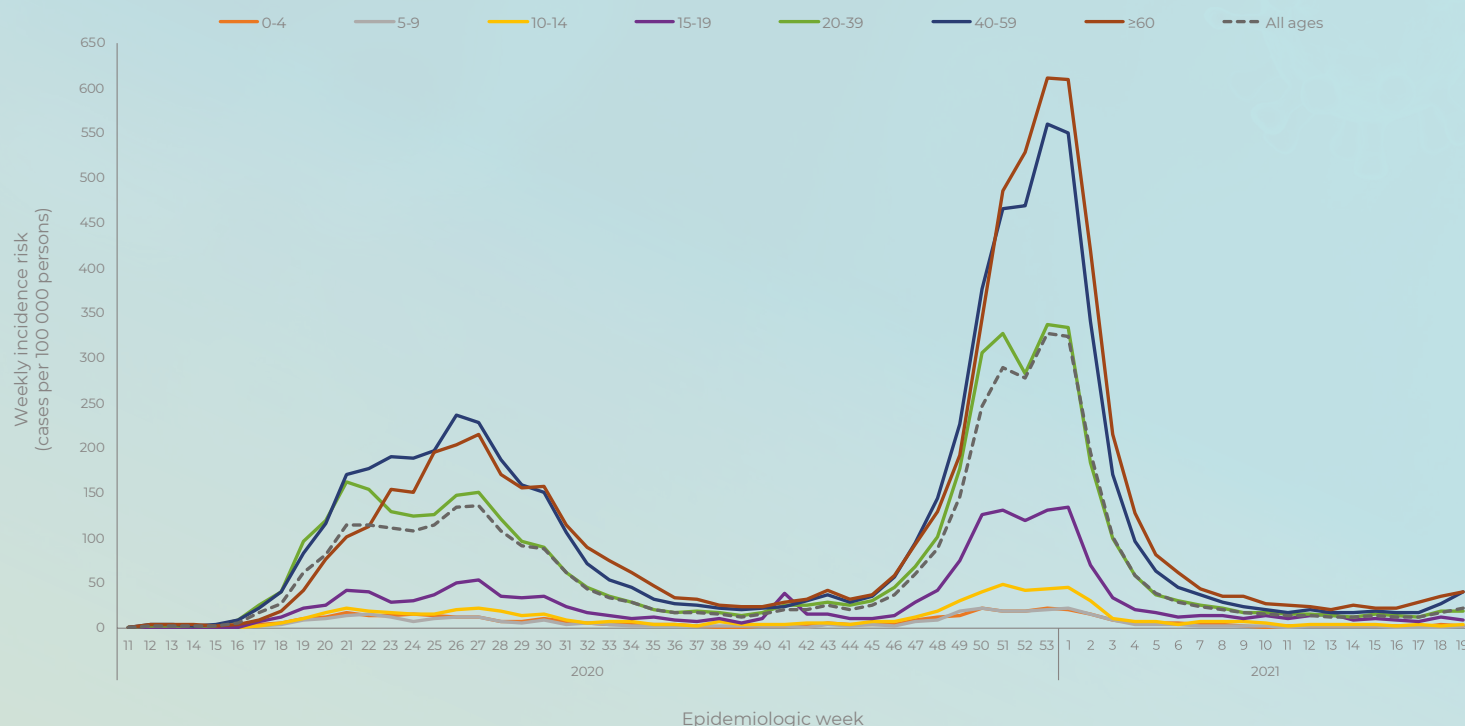


Figure 14. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Western Cape Province, 3 March 2020 –15 May 2021 (n=288 803, 986 missing age)

Gauteng Province

Of the 434 597 cases reported from the Gauteng Province, 372 846 (85.8%) had allocation by district. In the past week, all the districts reported an increase in weekly incidence risk, compared to the previous week (Figure 15). The increase ranged from 7.6 cases per 100 000 persons (14.4% increase) in the Sedibeng District to 16.6 cases per 100 000 persons (64.4% increase) in the City of Tshwane Metro.

In the past week, all the age groups reported an increase in weekly incidence risk, compared to the previous week (Figure 16). The increase ranged from 0.6 cases per 100 000 persons (9.7% increase) in the 5-9-year to 30.7 cases per 100 000 persons (71.8% increase) in the 40-59-year age groups.

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

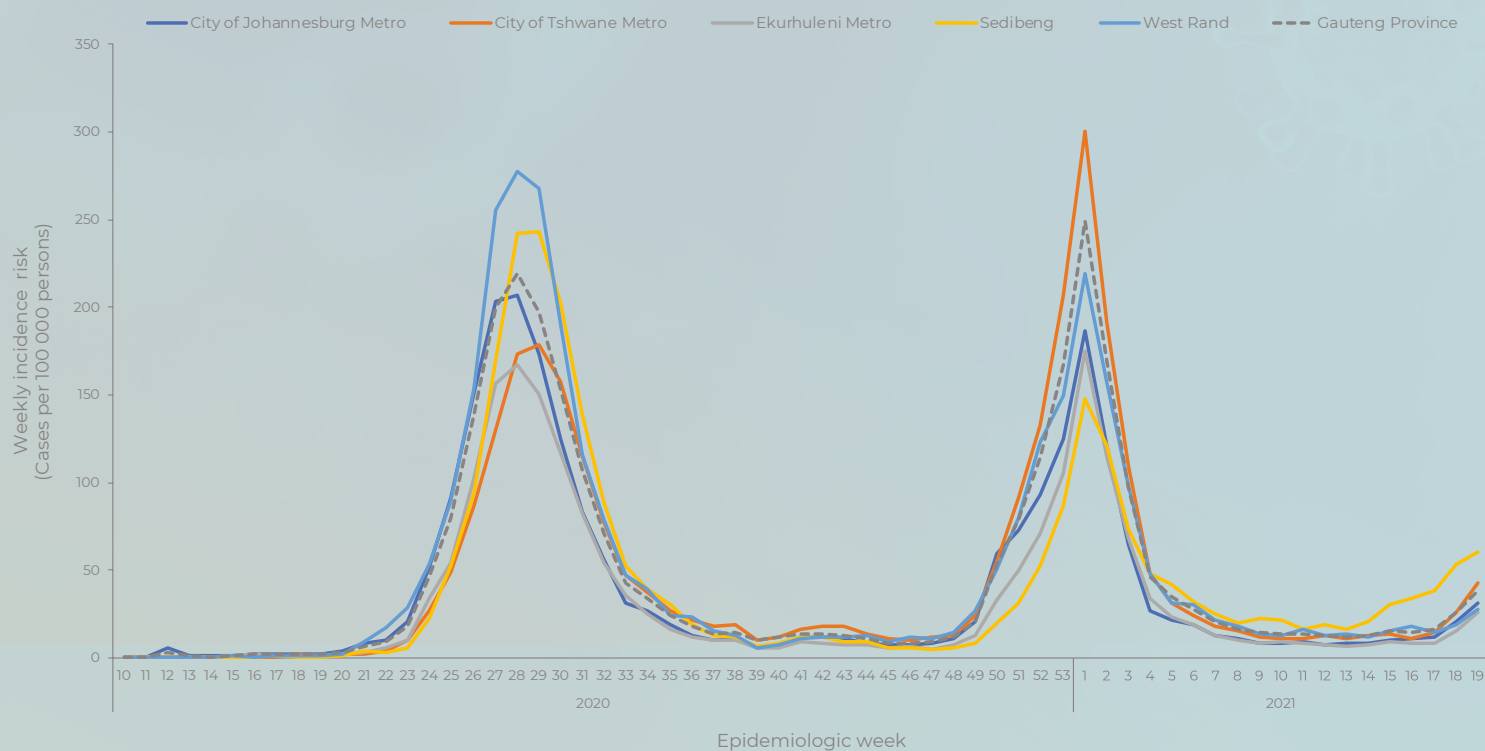


Figure 15. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Gauteng Province, 3 March 2020 –15 May 2021 (n=372 846, 61 751 missing district)

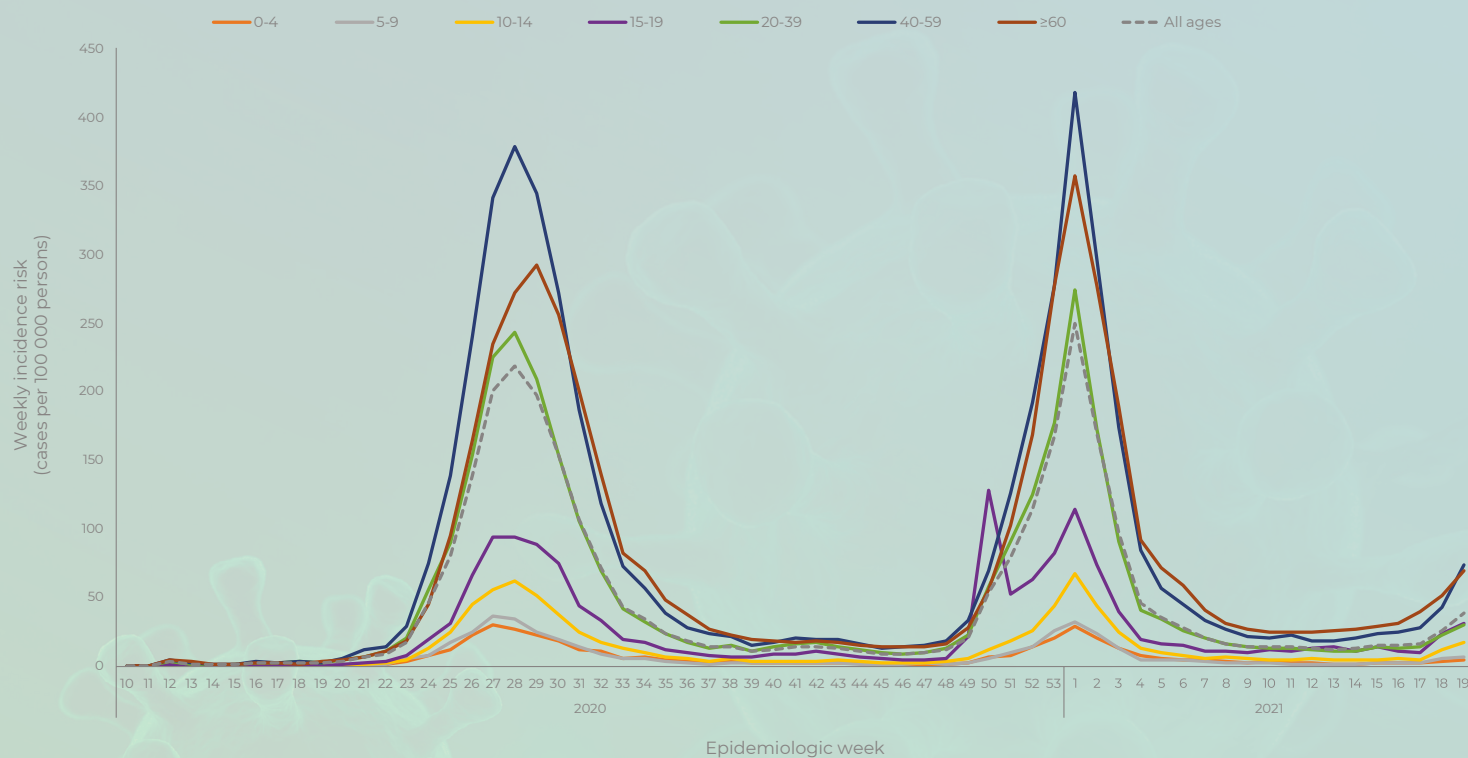


Figure 16. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Gauteng Province, 3 March 2020 -15 May 2021 (n=429 600, 4 997 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

KwaZulu-Natal Province

Of the 338 029 cases reported from the KwaZulu-Natal Province, 252 405 (74.7%) had allocation by district. In the past week, four districts reported an increase in weekly incidence risk (Harry Gwala, King Cetshwayo, iLembe, and uMzinyathi), compared to the previous week (Figure 17). The increase ranged from 0.2 cases per 100 000 persons (20.0% increase) in the Harry Gwala to 1.9 cases per 100 000 persons (105.9% increase) in the King Cetshwayo districts.

In week 19 of 2021, the 20-39-year (0.1 cases per 100 000 persons, 1.9% increase), the 40-59-year (0.8 cases per 100 000 persons, 8.2% increase), and the ≥ 60 -year (1.3 cases per 100 000 persons, 12.6% increase) age groups reported an increase in weekly incidence risk, compared to the previous week (Figure 18).

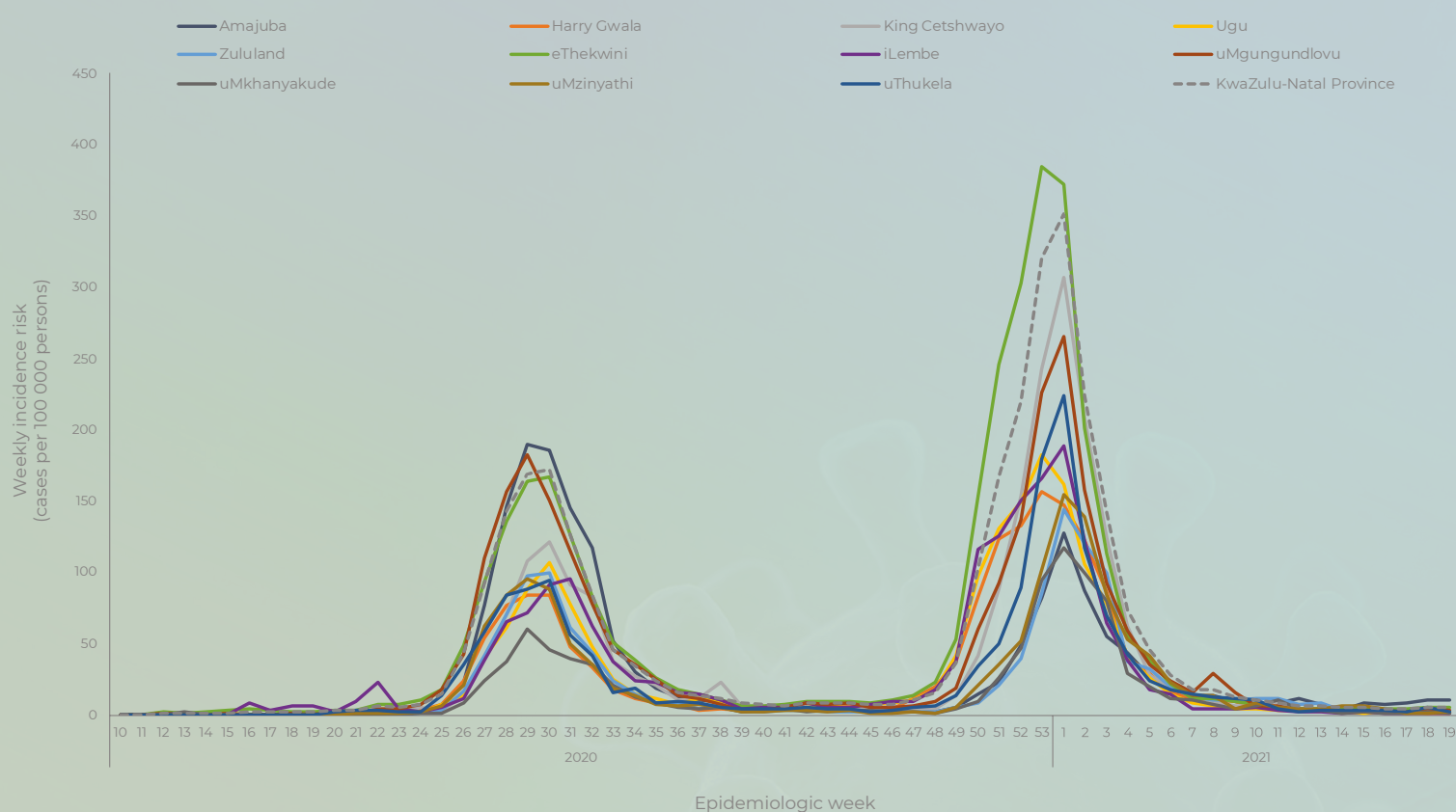


Figure 17. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, KwaZulu-Natal Province, 3 March 2020 –15 May 2021 (n=252 405, 85 624 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

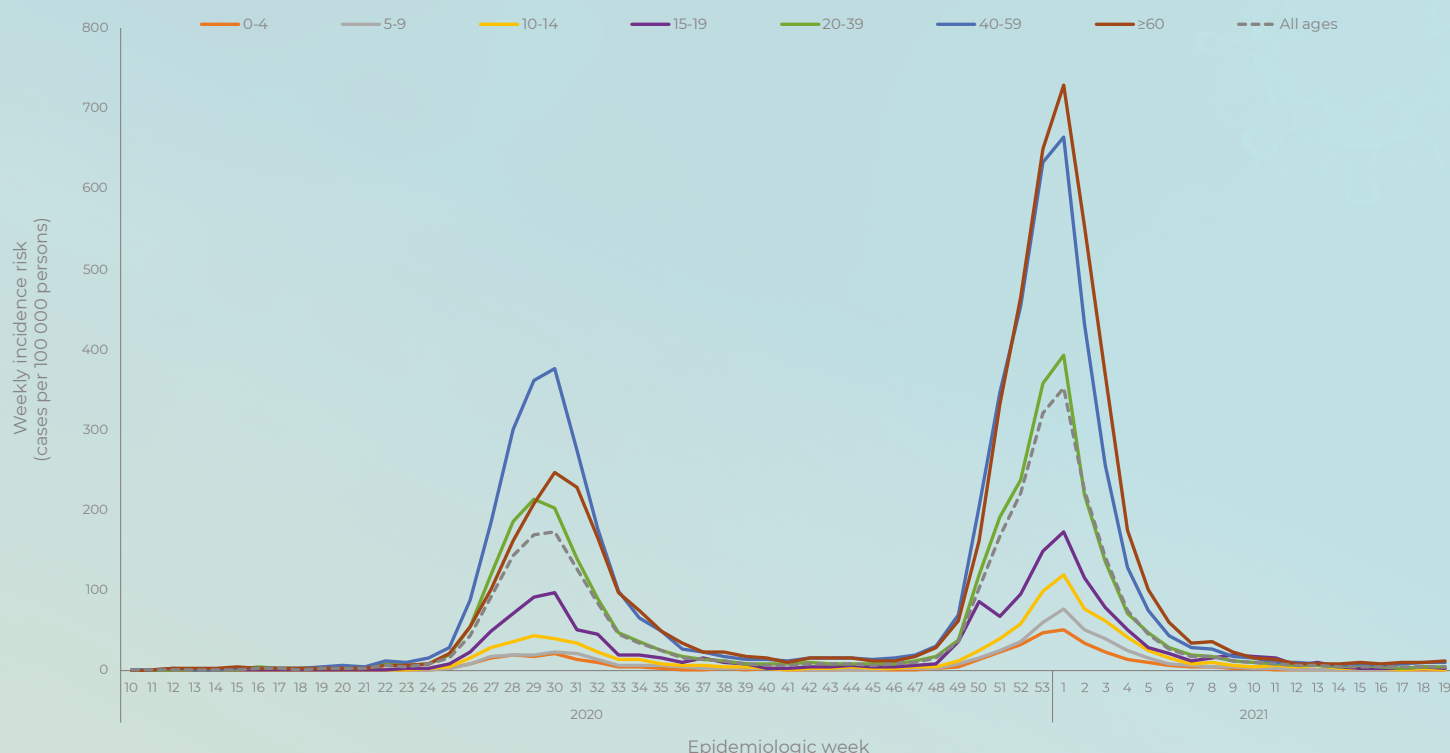


Figure 18. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, KwaZulu-Natal Province, 3 March 2020 –15 May 2021 (n=334 461, 3 568 missing age)

Free State Province

Of the 94 623 cases reported from the Free State Province, 86 527 (91.4%) had allocation by district. In the past week, the Fezile Dabi (14.9 cases per 100 000 persons, 30.3% increase) and the Xhariep (26.3 cases per 100 000 persons, 22.7% increase) districts reported an increase in weekly incidence risk, and other districts reported a decrease in weekly incidence risk, compared to the previous week (Figure 19). Some of the reduction in weekly incidence risk in the past week maybe due to delayed reporting.

In the past week, the 10-14-year (2.4 cases per 100 000 persons, 7.9% increase), 40-59-year (2.6 cases per 100 000 persons, 1.7% increase), and the 15-19-year (7.2 cases per 100 000 persons, 13.3% increase) reported an increase in weekly incidence risks, compared to the previous week (Figure 20).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

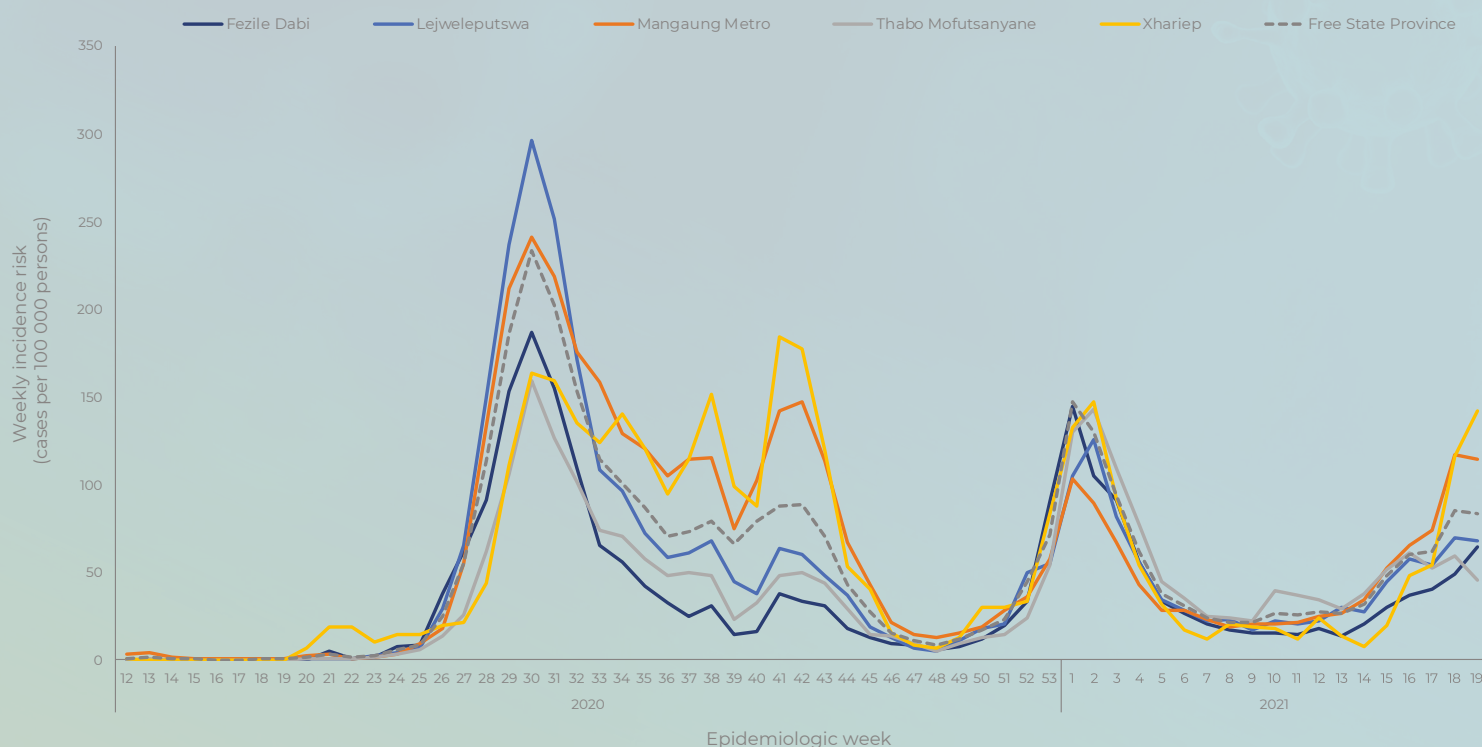


Figure 19. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Free State Province, 3 March 2020–15 May 2021 (n=86 527, 8096 missing district)

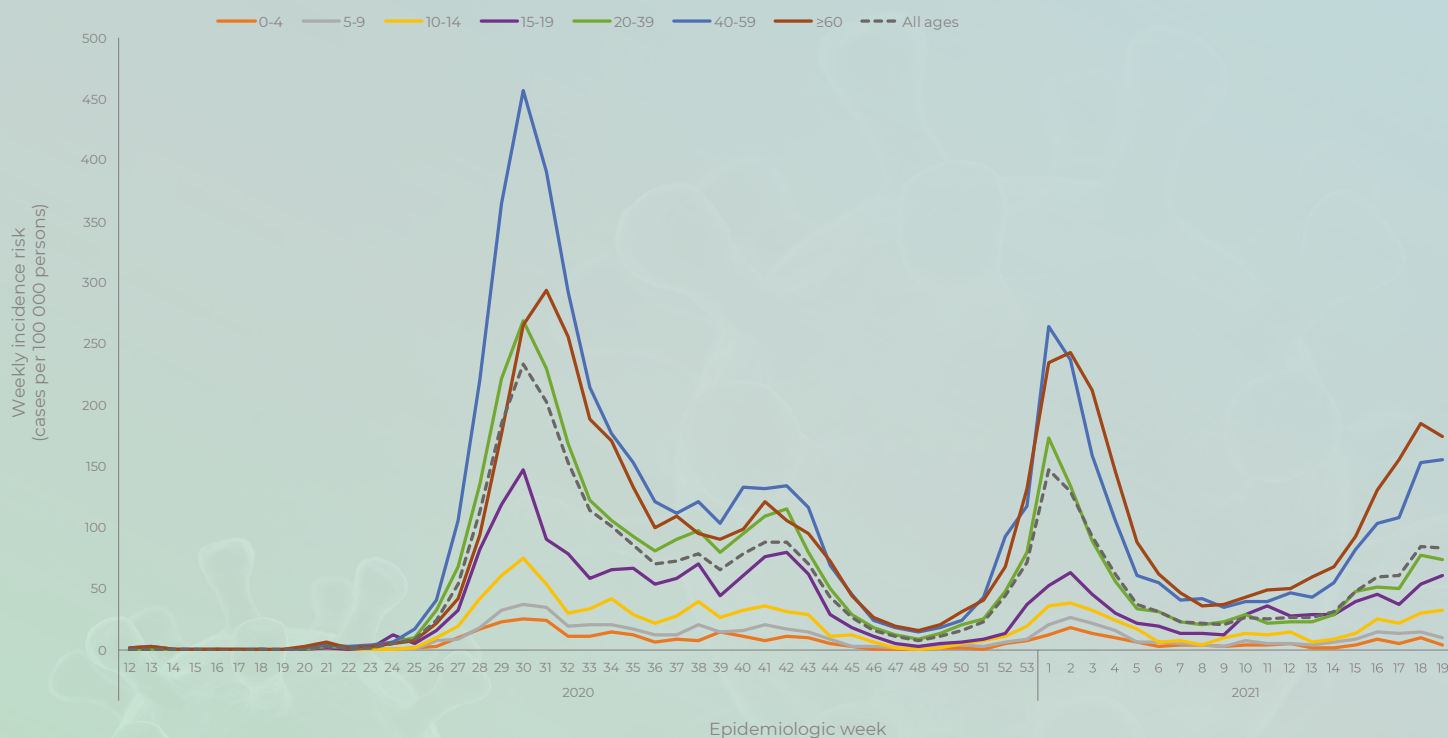


Figure 20. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Free State Province, 3 March 2020–15 May 2021 (n=94 217, 406 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

Limpopo Province

Of the 64 449 cases reported from the Limpopo Province, 56 052 (87.0%) had allocation by district. In the past week, the Waterberg District (0.8 cases per 100 000 persons, 8.2% increase) reported an increase in weekly incidence risk, and other districts reported a decrease in weekly incidence risk, compared to the previous week (Figure 21).

In the past week, the 0-4-year (0.3 cases per 100 000 persons, 200.0% increase), 15-19-year (0.6 cases per 100 000 persons, 25.0% increase), and the 20-39-year (1.6 cases per 100 000 persons, 50.9% increase) age groups reported an increase in weekly incidence risk, compared to the previous week (Figure 22).

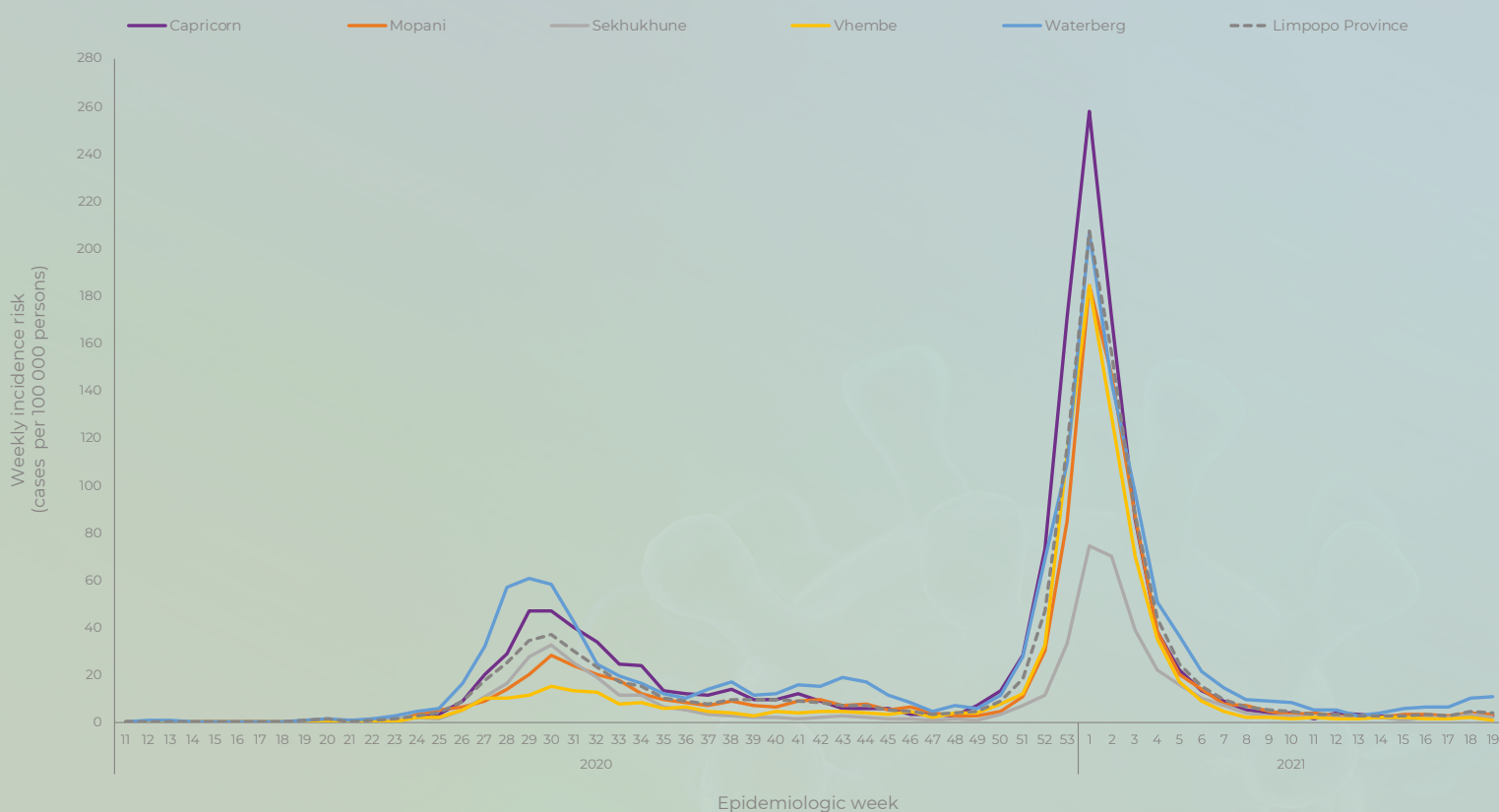


Figure 21. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Limpopo Province, 3 March 2020 –15 May 2021 (n=56 052, 8 397 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

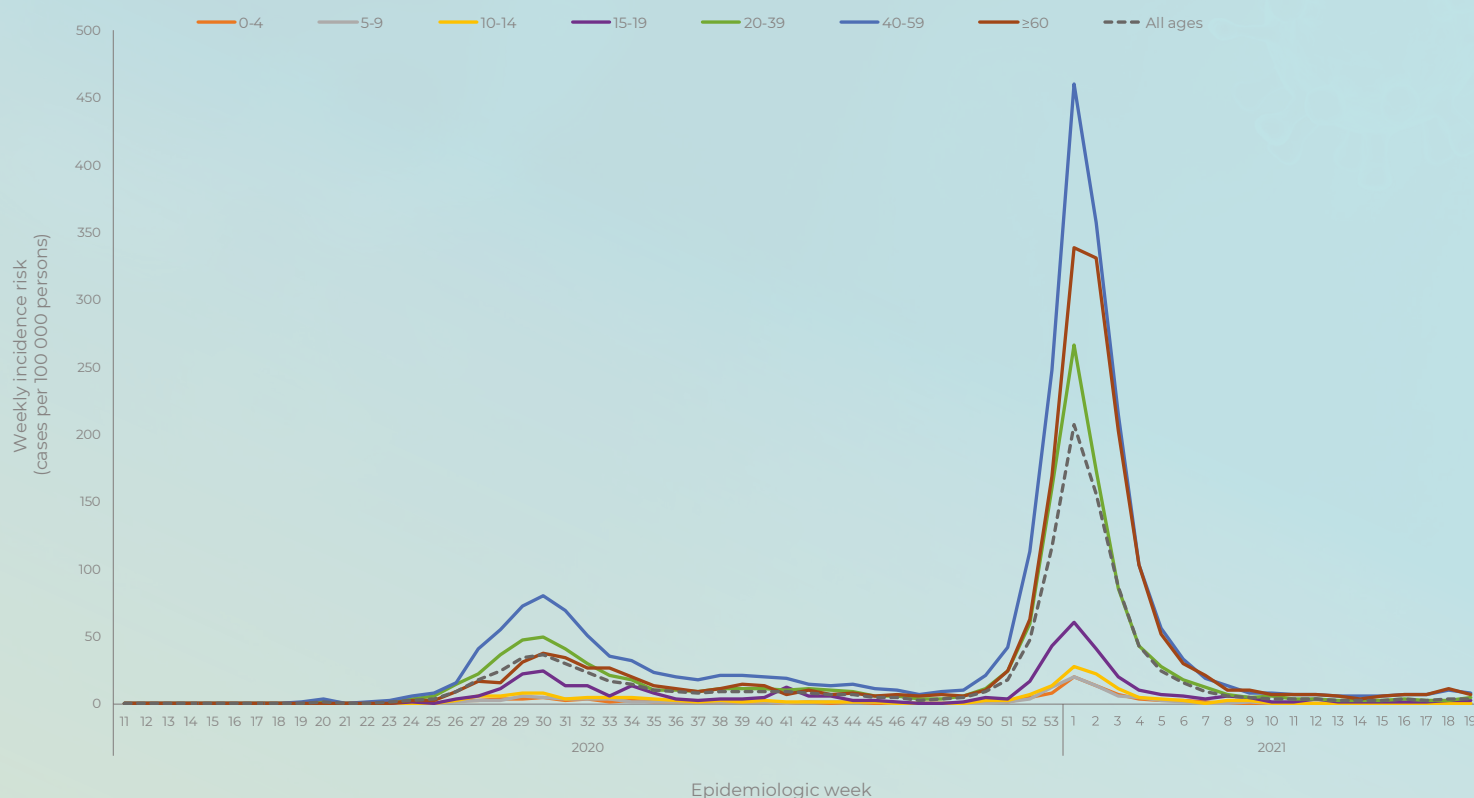


Figure 22. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Limpopo Province, 3 March 2020 –15 May 2021 (n=64 081, 368 missing age)

Mpumalanga Province

Of the 79 950 cases reported from the Mpumalanga Province, 63 973 (80.0%) had allocation by district. In the past week, all the districts reported an increase in weekly incidence risk, except the Gert Sibande District (3.0 cases per 100 000 persons, 11.5% decrease) which reported a decrease in weekly incidence risk, compared to the previous week (Figure 24). The increase ranged from 1.8 cases per 100 000 persons (33.7% increase) in

the Ehlanzeni to 4.9 cases per 100 000 persons (51.6% increase) in the Nkangala districts.

In the past week, the 5-9-year (0.4 cases per 100 000 persons, 22.2% increase), the 15-19-year (1.8 cases per 100 000 persons, 20.0% increase), and the 40-59-year (7.5 cases per 100 000 persons, 24.5% increase) age groups reported an increase in weekly incidence risk, compared to the previous week (Figure 23).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

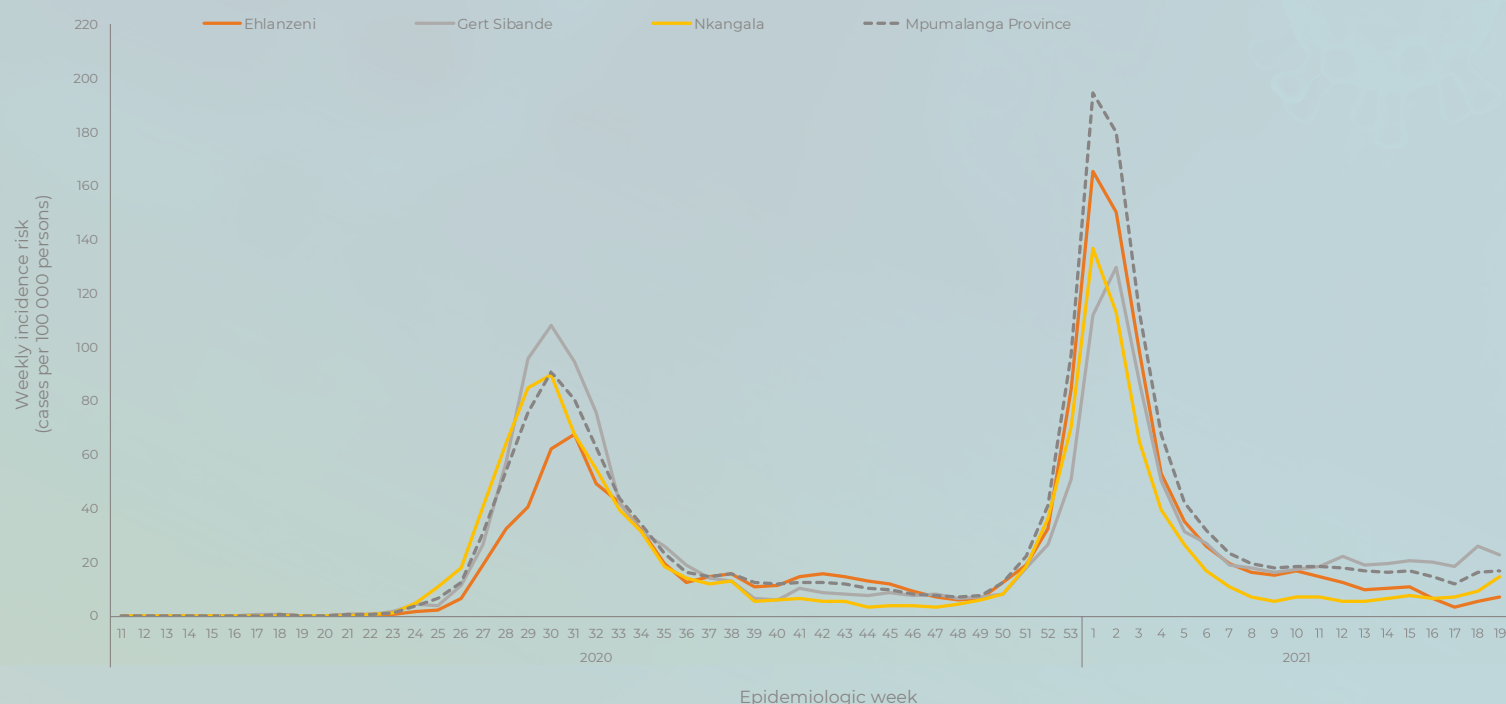


Figure 23. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Mpumalanga Province, 3 March 2020 -15 May 2021 (n=63 973, 15 977 missing district)

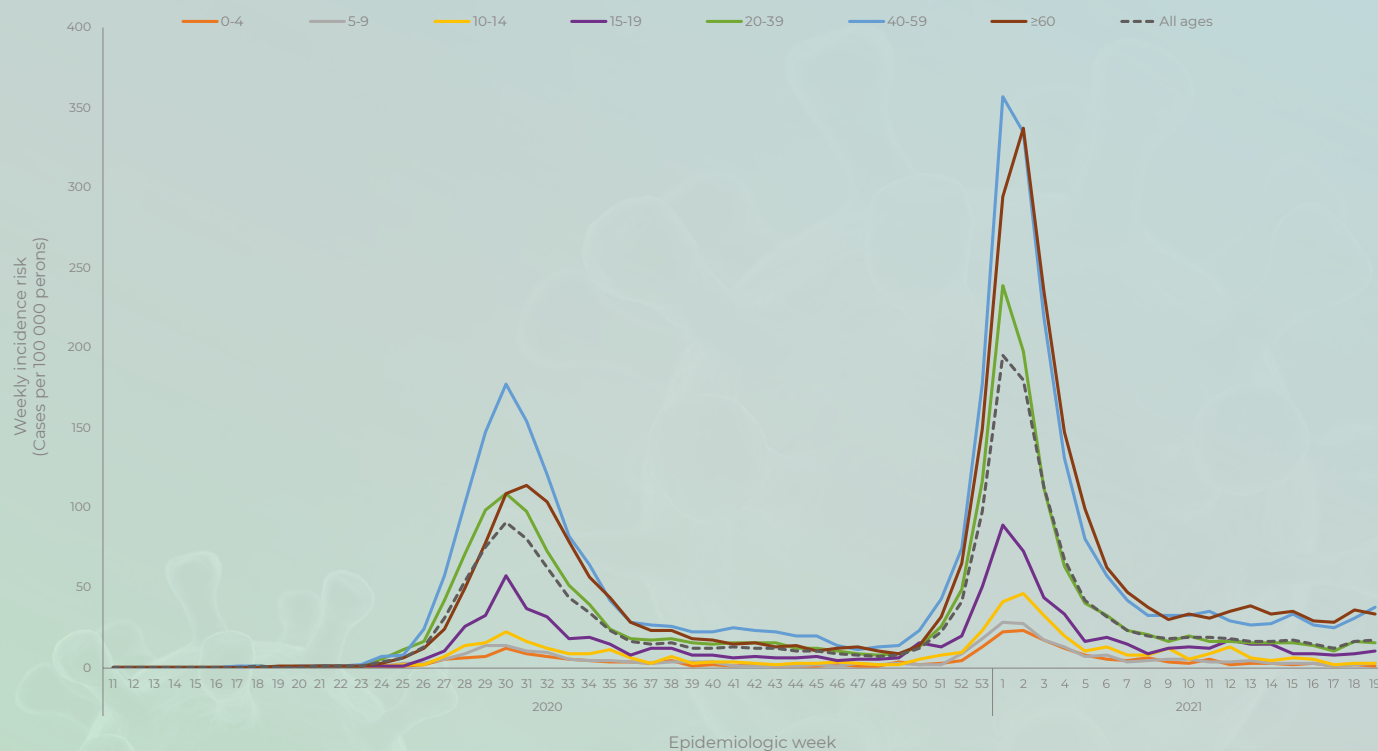


Figure 24. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group and epidemiologic week, Mpumalanga Province, 3 March 2020 -15 May 2021 (n=78 356, 1 594 missing age)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

North West Province

Of the 71 055 cases reported from the North West Province, 57 776 (81.3%) had allocation by district. In the past week, all the districts reported an increase in weekly incidence risk, except the Dr Ruth Segomotsi District (3.6 cases per 100 000 persons, 13.8% increase) which reported a decrease in weekly incidence risk, compared to the previous week (Figure 25). The increase ranged from 5.7 cases per 100 000 persons (49.8% increase) in

the Bojanala to 17.3 cases per 100 000 persons (38.4% increase) in the Dr Kenneth Kaunda districts.

In the past week, all the age groups reported an increase in weekly incidence risk, compared to the previous week (Figure 26). The increase ranged from 1.2 cases per 100 000 persons (71.4% increase) in the 0-4-year to 18.9 cases per 100 000 persons (31.2% increase) in the 40-59-year age groups.

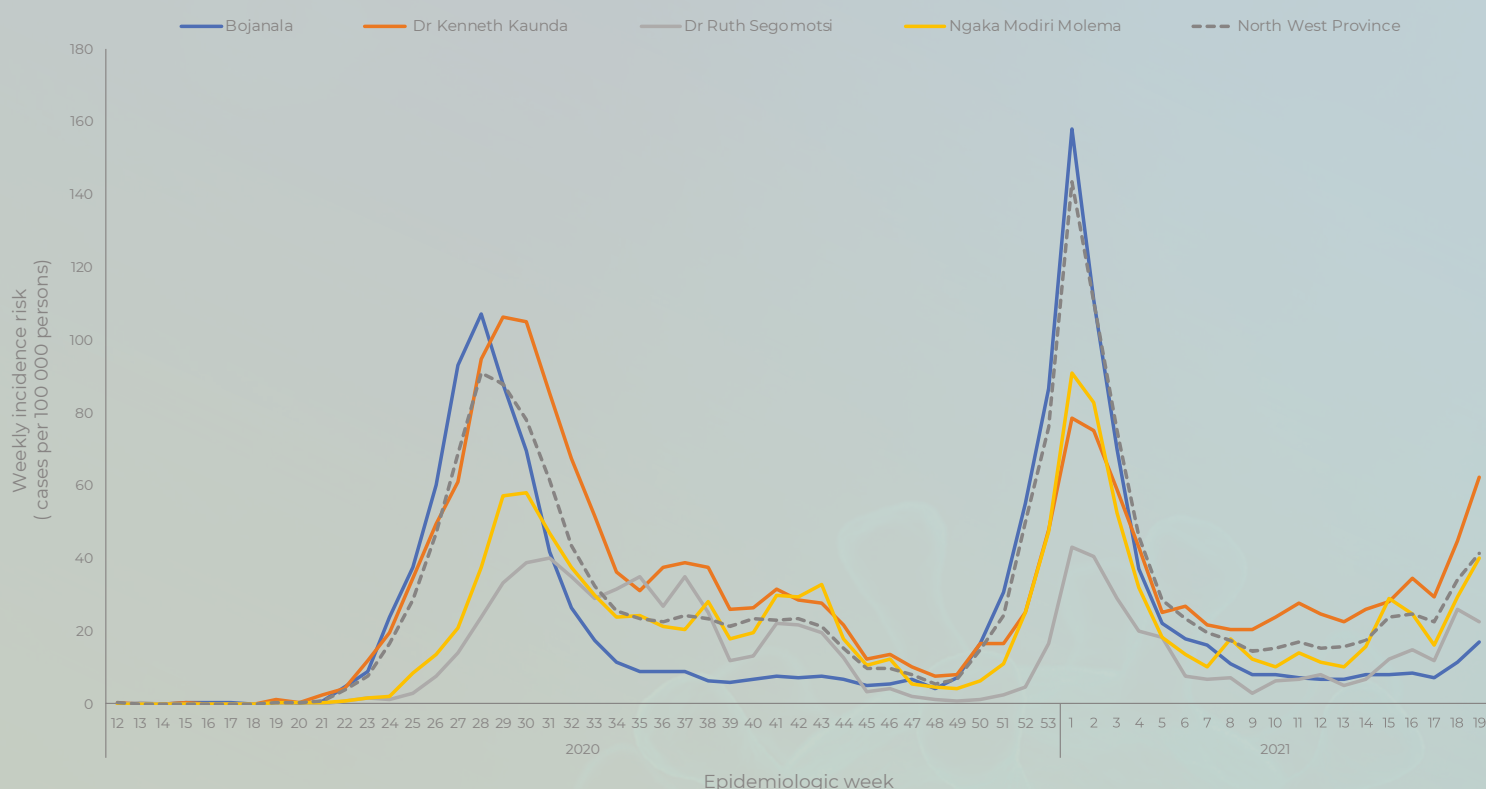


Figure 25. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, North West Province, 3 March 2020 -15 May 2021 (n=57 776, 13 279 missing district)

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

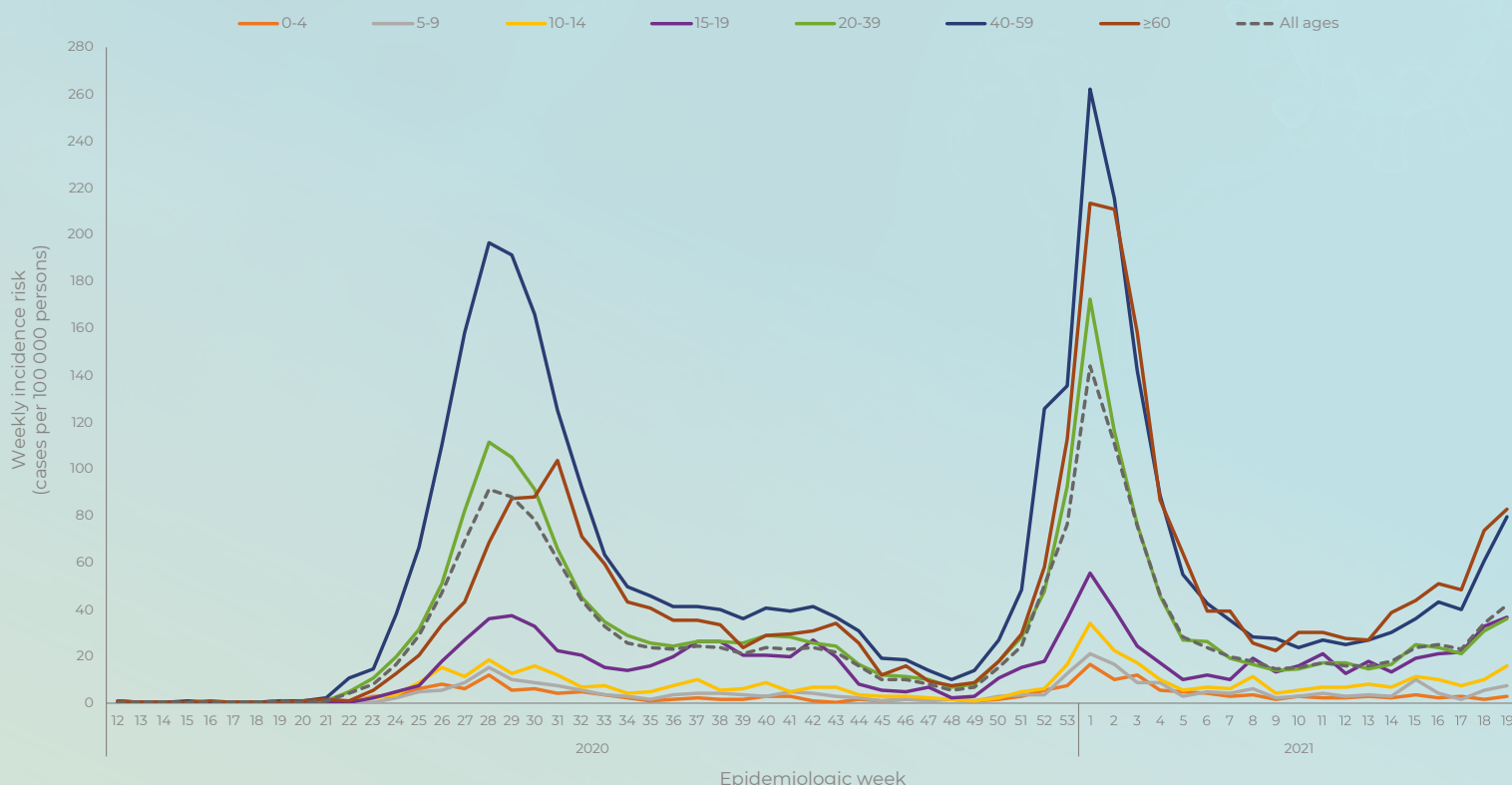


Figure 26. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, North West Province, 3 March 2020 –15 May 2021 (n=70 202, 853 missing age)

Northern Cape Province

Of the 44 644 cases reported from the Northern Cape Province, 37 668 (84.4%) had allocation by district. In the past week, all the districts reported an increase in weekly incidence risk, except Frances Baard District (6.5 cases per 100 000 persons, 3.1% decrease) which reported a decrease in weekly incidence risk, compared to the previous week (Figure 27). The increase ranged from 6.9 cases per 100 000 persons (15.7% increase) in the Namakwa to 133.2 cases per 100 000 persons (75.7% increase) in the Pixley ka Seme districts. The Pixley Ka Seme (current peak 309.2 vs 188.7 and 208.6, wave 1 and wave 2, respectively) and Frances Baard (current peak 208.5 vs 139.8 and 92.8, wave 1 and wave 2, respectively) districts reported weekly incidence risk higher than that reported in the peak of both the first and second wave.

In the past week, all the age groups reported an increase in weekly incidence risk, except the 5-9-year age groups (3.2 cases per 100 000 persons, 7.5% decrease) which reported a decrease in weekly incidence risk, compared to the previous week (Figure 28). The increase ranged from 3.2 cases per 100 000 persons (25.0% increase) in the 0-4-year to 82.6 cases per 100 000 persons (33.9% increase) in the 40-49-year age groups. The week 19 incidence risk in the 40-49-year age group (36.1 cases per 100 000 persons) exceeded the weekly incidence risk of this age group at the peak of wave 1 (224 cases per 100 000 persons) and wave 2 (286 cases per 100 000).

COVID-19 WEEKLY EPIDEMIOLOGY BRIEF

WEEK 19 2021

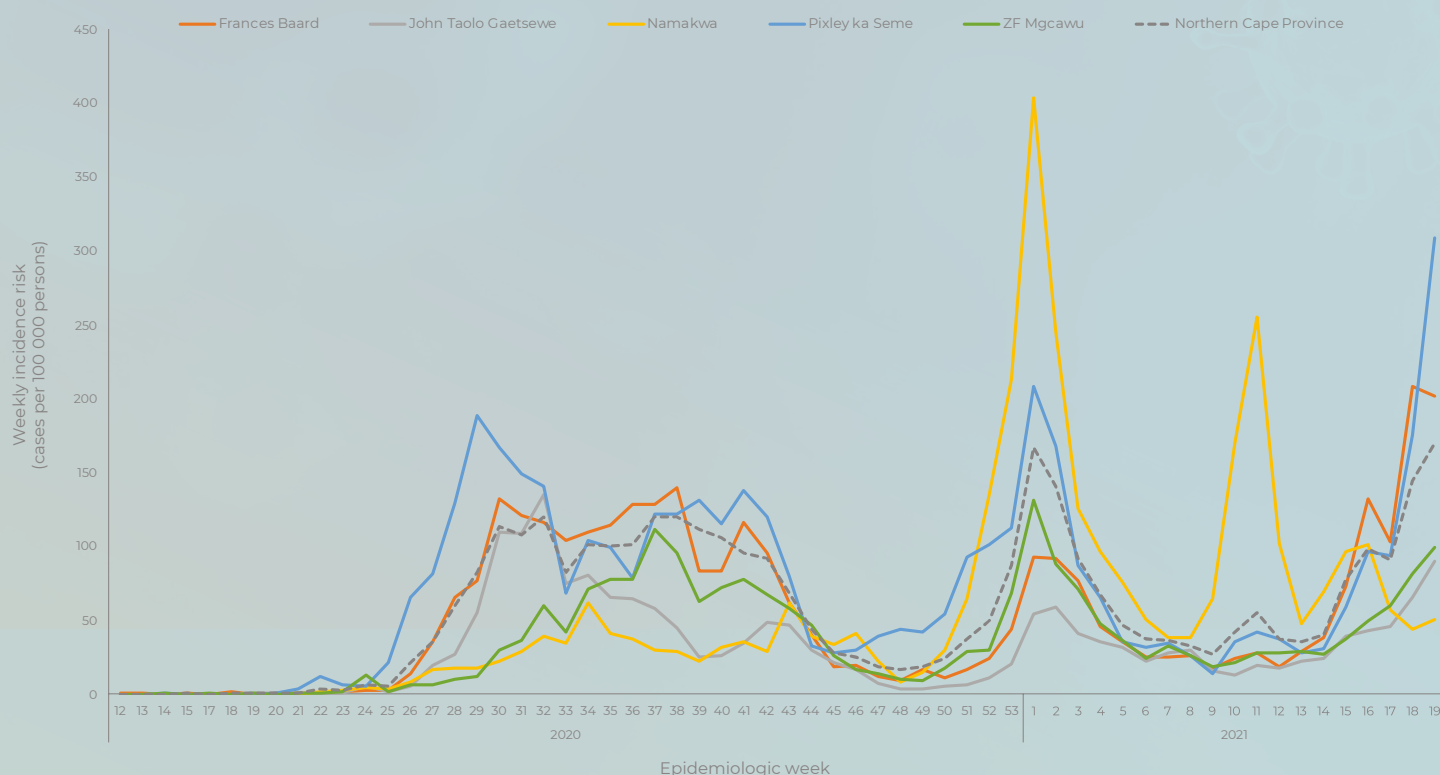


Figure 27. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by district and epidemiologic week, Northern Cape Province, 3 March 2020 -15 May 2021 (n=37 668, 6 976 missing district)

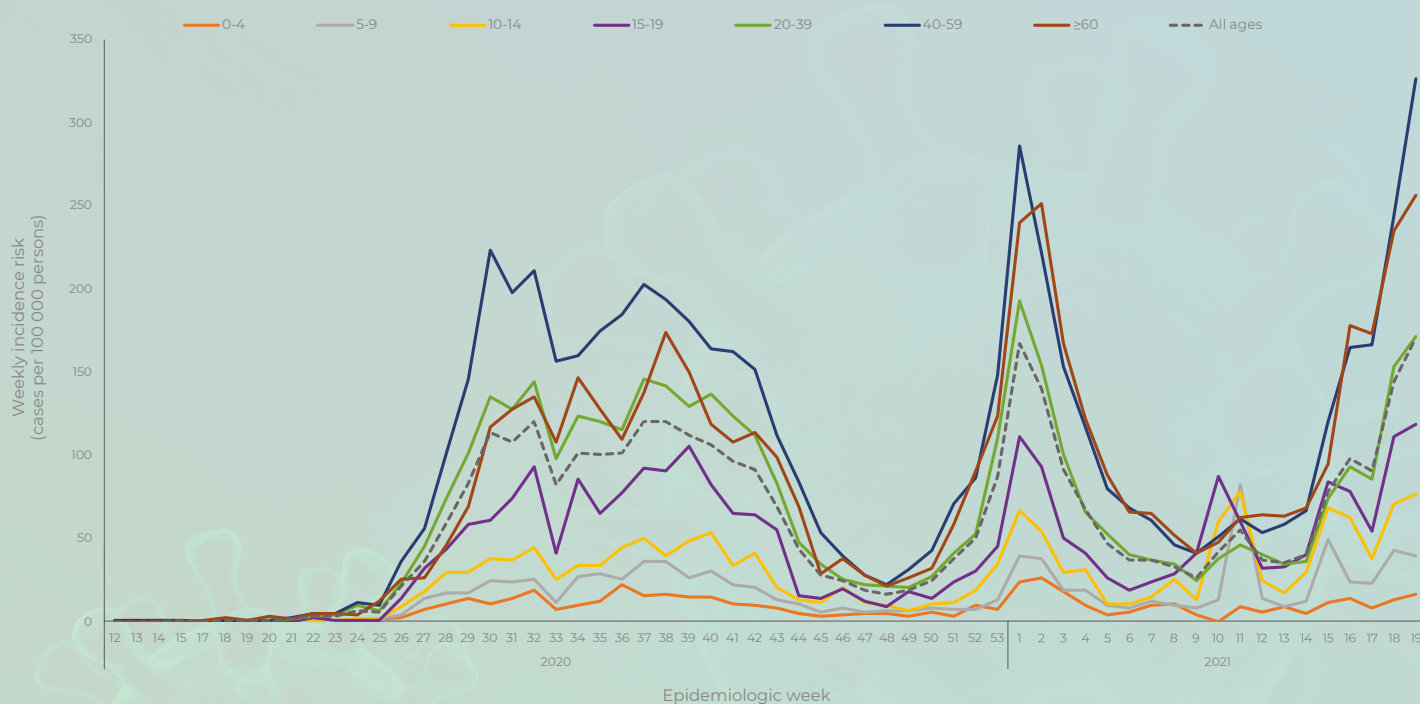


Figure 28. Weekly incidence risk of laboratory-confirmed cases of COVID-19 by age group in years and epidemiologic week, Northern Cape Province, 3 March 2020 -15 May 2021 (n=44 284, 360 missing age)

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, 1 613 728 cases, including 55 210 deaths have been reported. Following the decline in number of new cases after the second wave peak, the sporadic increases in number of new cases and weekly incidence risk reported across several provinces from week 10 of 2021 reflects increasing community transmission as well as localised outbreaks/clusters and congregation/movement of people. Some of the reduction shown by other provinces in the past week maybe due to delayed reporting. Demographic trends have remained unchanged in this reporting period, children aged <10 years had the lowest incidence risk and individuals aged 40-59 years had the highest incidence. Ongoing monitoring of case numbers is important in order to identify changes in trends to inform public health response. 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.

