

COVID-19 HOSPITAL SURVEILLANCE UPDATE



NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES

Division of the National Health Laboratory Service

SOUTH AFRICA WEEK 18 2021

OVERVIEW

This report summarises data of COVID-19 cases admitted to DATCOV hospital surveillance sites in all provinces. The report is based on data collected from 5 March 2020 to 8 May 2021.

HIGHLIGHTS

- As of 8 May 2021, 264,365 COVID-19 admissions and 54,803 in-hospital deaths were reported from 647 facilities (395 public-sector and 252 private-sector) in all nine provinces of South Africa.
- Since the end of the second wave, increases in admissions in Gauteng, Northern Cape, North West and Free State provinces have been observed.

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METHODS

DATCOV, a hospital surveillance system for COVID-19 admissions, was initiated on the 1 April 2020. A COVID-19 case was defined as a person with a positive reverse transcriptase polymerase chain reaction (RT-PCR) assay for SARS-CoV-2 or a person who had a positive SARS-CoV-2 antigen test who was admitted to hospital. Case fatality ratio (CFR) was calculated for all closed cases, i.e. COVID-19 deaths divided by COVID-19 deaths plus COVID-19 discharges, excluding individuals who are still admitted in hospital. For the calculation of cumulative incidence risks, StatsSA mid-year population estimates for 2020 were utilised.

Achieving the end-of-wave threshold corresponds to having a time period (E.g. a week or two weeks) where the 7 day moving average of cases is sustained at or lower than a small fraction of recent peak incidence. We set the end-of-wave threshold as 15% of the peak incidence or case load, measured in terms of 7-day moving average of case incidence. We specifically use last 7-day average incidence per 1 million capita as reported in Our World in Data; for the purposes of this analysis, using the 7-day running average (either absolute or per capita) would be equivalent.

Data are submitted by public and private hospitals that have agreed to report COVID-19 admissions through DATCOV surveillance in all nine provinces of South Africa. On 15 July 2020, the National Health Council decided that all hospitals should report to DATCOV. As of 8 May 2021, a total of 647 facilities submitted data on hospitalised COVID-19 cases, 395 from public sector and 252 from private sector (Table 1). This reflects 100% coverage of all public and private hospitals that have had COVID-19 admissions. As new hospitals join the surveillance system, they have retrospectively captured all admissions recorded although there may be some backlogs in retrospective data capture.

Table 1. Number of hospitals reporting data on COVID-19 admissions by province and sector, South Africa, 5 March 2020-08 May 2021

Name of province	Public Sector	Private Sector
Eastern Cape	85	18
Free State	35	20
Gauteng	39	91
KwaZulu-Natal	70	46
Limpopo	41	7
Mpumalanga	31	9
North West	17	12
Northern Cape	17	8
Western Cape	60	41
South Africa	395	252

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RESULTS

Epidemiological and geographic trends in admissions

From 5 March 2020 to 8 May 2021, a total of 264,365 COVID-19 admissions were reported from 647 facilities in all nine provinces of South Africa. The weekly numbers of admissions at the peak of the second wave surpassed the numbers during the peak of the first wave in both sectors (Figure 1). Since week 14 2021, numbers of COVID-19 admissions have increased in private sector. Decreases in the most recent week may reflect delays in data submission.

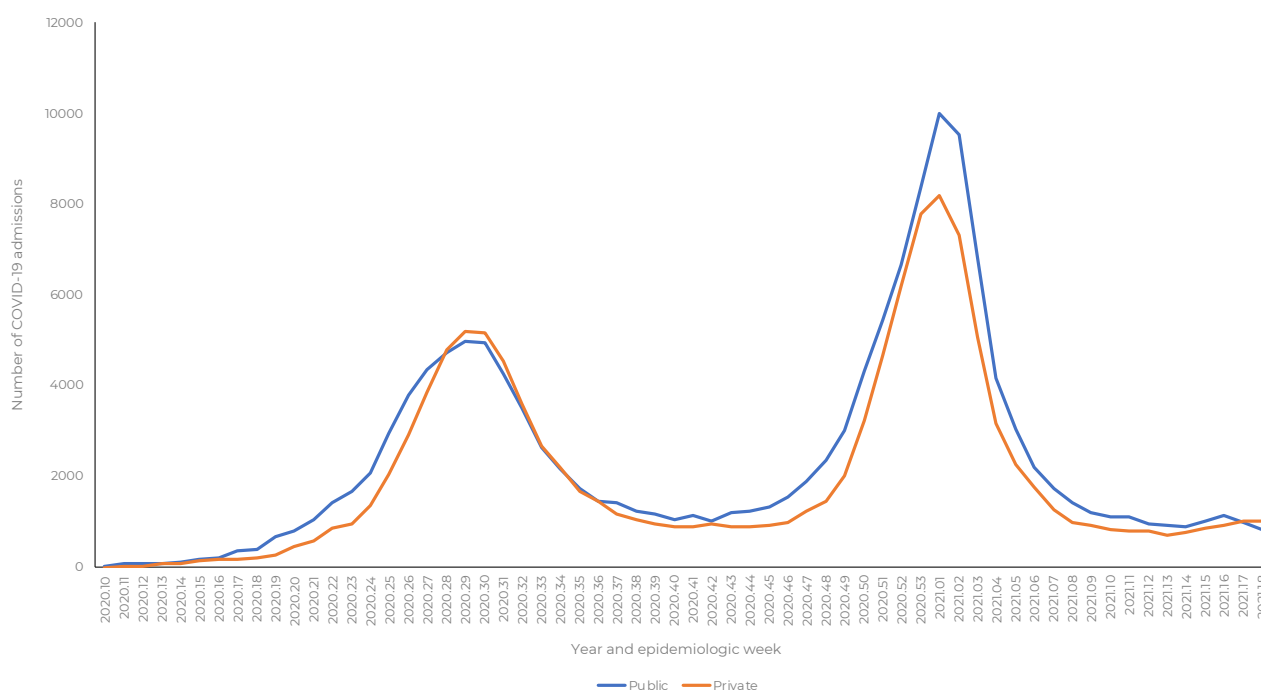


Figure 1. Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, South Africa, 5 March 2020-08 May 2021, n=264,365

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The majority of admissions were recorded in four provinces, Gauteng 68,863 (26%), Western Cape 59,618 (23%), Eastern Cape 31,740 (12%) and KwaZulu-Natal 48,988 (19%) provinces. The weekly numbers of admissions at the peak of the second wave surpassed the numbers during the peak of the first wave in all provinces except Free State (Figure 2). Numbers of COVID-19 admissions have increased in Gauteng, Northern Cape, North West and Free State in the past five weeks. Reductions in the most recent week may be as a result of delayed reporting.

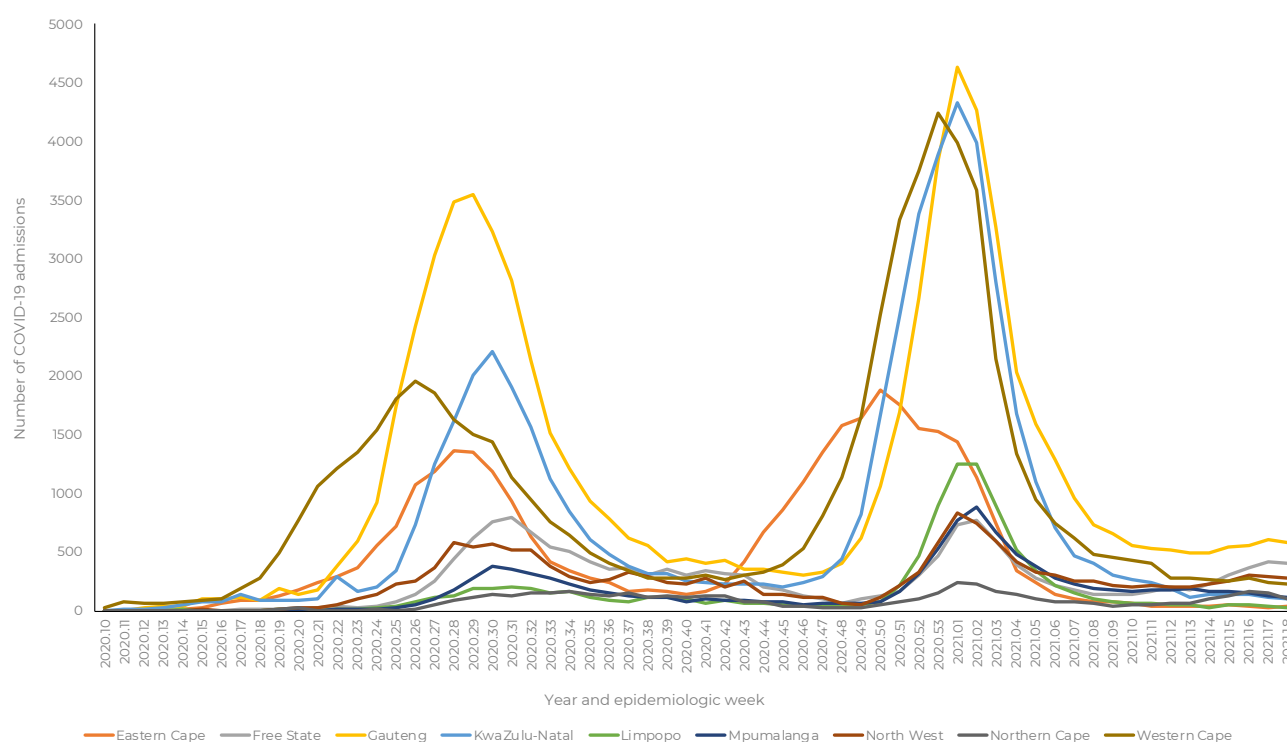


Figure 2. Number of reported COVID-19 admissions, by province and epidemiologic week of diagnosis, South Africa, 5 March 2020-08 May 2021, n=264,365

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EPIDEMIOLOGICAL AND GEOGRAPHIC TRENDS IN IN-HOSPITAL MORTALITY

The weekly numbers of deaths at the peak of the second wave surpassed the numbers during the peak of the first wave in both sectors (Figure 3). The number of deaths has increased in the private sector in the last week.

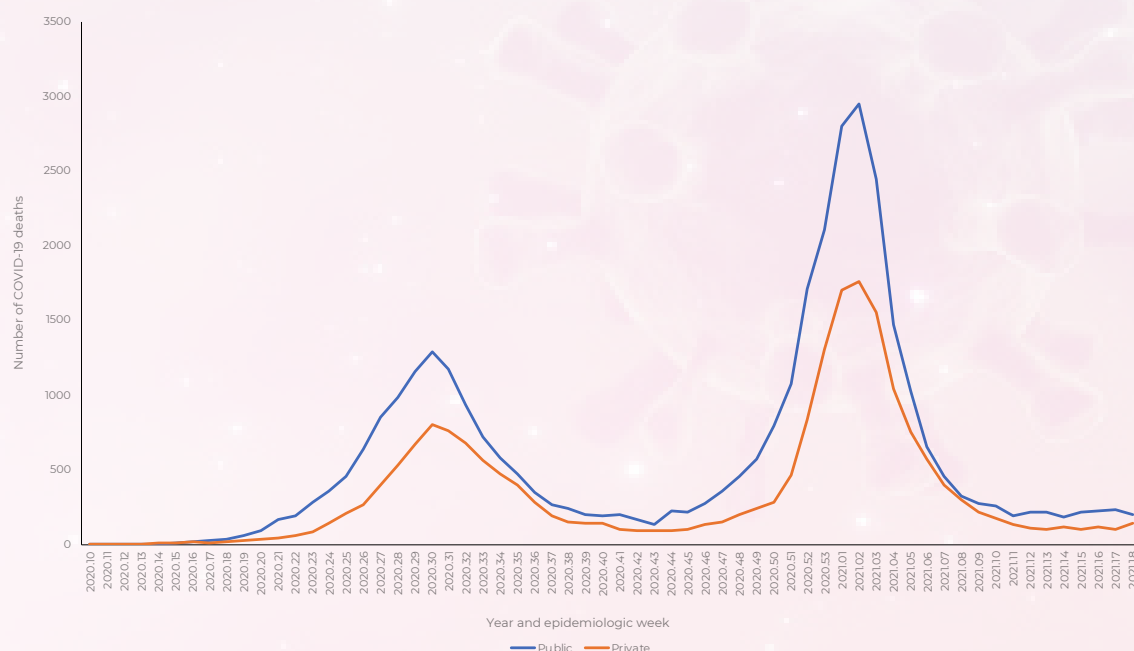


Figure 3. Number of in-hospital COVID-19 in-hospital deaths reported per week by health sector and epidemiologic week, South Africa, 5 March 2020-08 May 2021, n=54,803

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Most deaths were reported in Gauteng 13,487 (25%), Western Cape 10,021 (18.3), Eastern Cape 9,464 (17%) and KwaZulu-Natal 10,906 (20%). The weekly numbers of deaths at the peak of the second wave surpassed the numbers during the peak of the first wave in all provinces except Free State (Figure 4). The numbers of COVID-19 deaths have increased in Gauteng, Northern Cape, North West and Free State in the past four weeks.

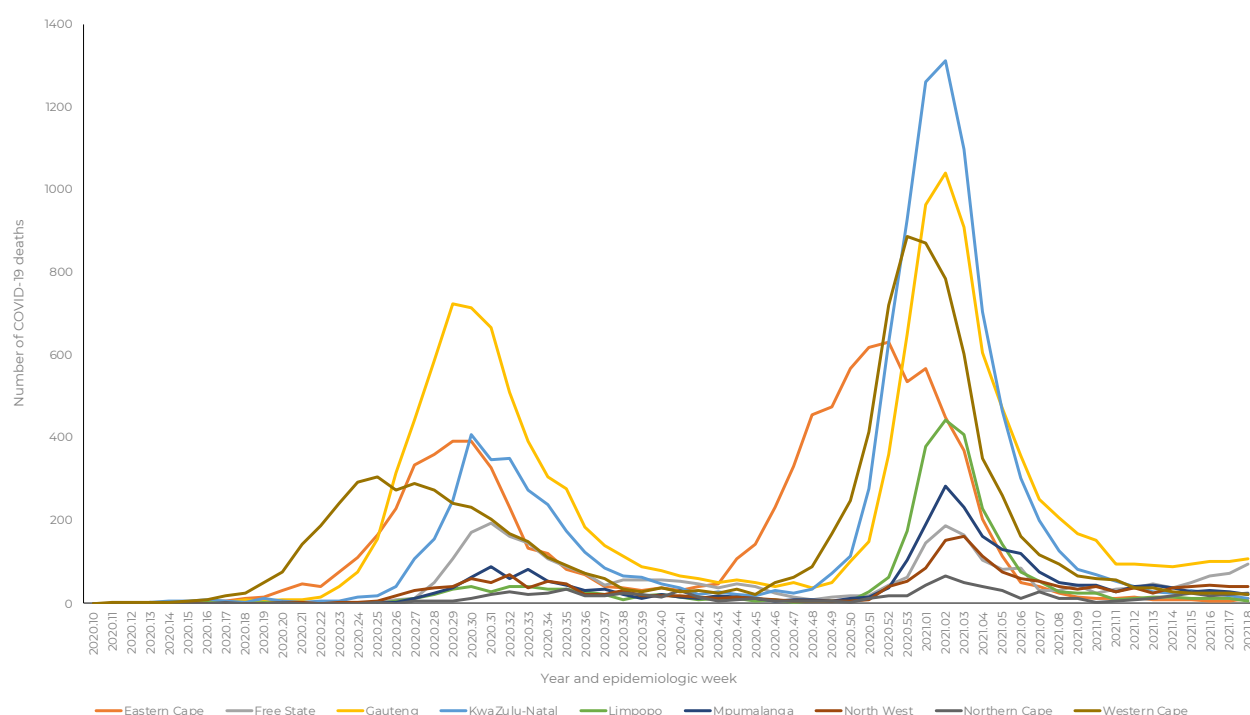


Figure 4. Number of reported COVID-19 in-hospital deaths, by province and epidemiologic week of death, South Africa, 5 March 2020-08 May 2021, n=54,803

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The cumulative incidence risks of COVID-19 admissions and in-hospital deaths were highest in Western Cape, Eastern Cape and Free State provinces (Table 2).

Table 2. Number and cumulative incidence risk of COVID-19 hospitalisations and in-hospital deaths per 100,000 persons by province, South Africa, 5 March 2020-08 May 2021

Province	Provincial Pop-ulation mid 2020*	Cumulative admissions	Cumulative Admissions / 100,000	Cumulative deaths	Cumulative deaths / 100,000
Eastern Cape	6734001	31740	471.3	9464	140.5
Free State	2928903	15713	536.5	3108	106.1
Gauteng	15488137	68,863	444.6	13487	87.1
KwaZulu-Natal	11531628	48988	424.8	10904	94.6
Limpopo	5852553	9492	162.2	2633	45.0
Mpumalanga	4679786	10218	218.3	2464	52.7
North West	4108816	14,923	363.2	1894	46.1
Northern Cape	1292786	4,810	372.1	826	63.9
Western Cape	7005741	59,618	851.0	10020	143.0
South Africa	59622350	264,365	443.4	54,800	91.9

*StatsSA mid-year population estimates 2020

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PROVINCIAL TRENDS

The number of COVID-19 admissions decreased in all provinces from week 17 to week 18 of 2021 except in Eastern Cape. The highest proportion of new admissions were in Gauteng, Free State and North West (Table 3). Decreases in the most recent week may in part reflect delays in data submission. There were 18 of 52 (35%) districts across the country, Alfred Nzo, Amathole, Chris Hani, Joe Gqabi, Nelson Mandela Metro (Eastern Cape), Fezile Dabi, Mangaung Metro and Xhariep (Free State), City of Johannesburg Metro, West Rand (Gauteng), iLembe, Ugu and uMzinyathi (KwaZulu-Natal), Mopani (Limpopo), Nkangala (Mpumalanga), Dr. Kenneth Kaunda (North West), John Taolo Gaetsewe (Northern Cape) and Garden Route (Western Cape) that reported increased admissions over the previous 14 days (Appendix 1).

Table 3. Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by province, South Africa

Province	Hospital admissions		Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100,000 persons
	Week 17	Week 18*			
Eastern Cape	30	34	13	1.8	0.5
Free State	420	404	-4	21.8	13.8
Gauteng	609	576	-5	31.0	3.7
KwaZulu-Natal	117	99	-15	5.3	0.9
Limpopo	42	26	-38	1.4	0.4
Mpumalanga	127	110	-13	5.9	2.4
North West	285	279	-2	15.0	6.8
Northern Cape	146	106	-27	5.7	8.2
Western Cape	244	222	-9	12.0	3.2
South Africa	2,020	1,856	-8	100.0	3.1

* Reporting of new admissions in the most recent week may be delayed

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EASTERN CAPE

In both waves there were higher numbers of admissions in the public sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in both sectors. Since the end of the second wave the numbers of COVID-19 admissions have remained low in both sectors (Figure 5).

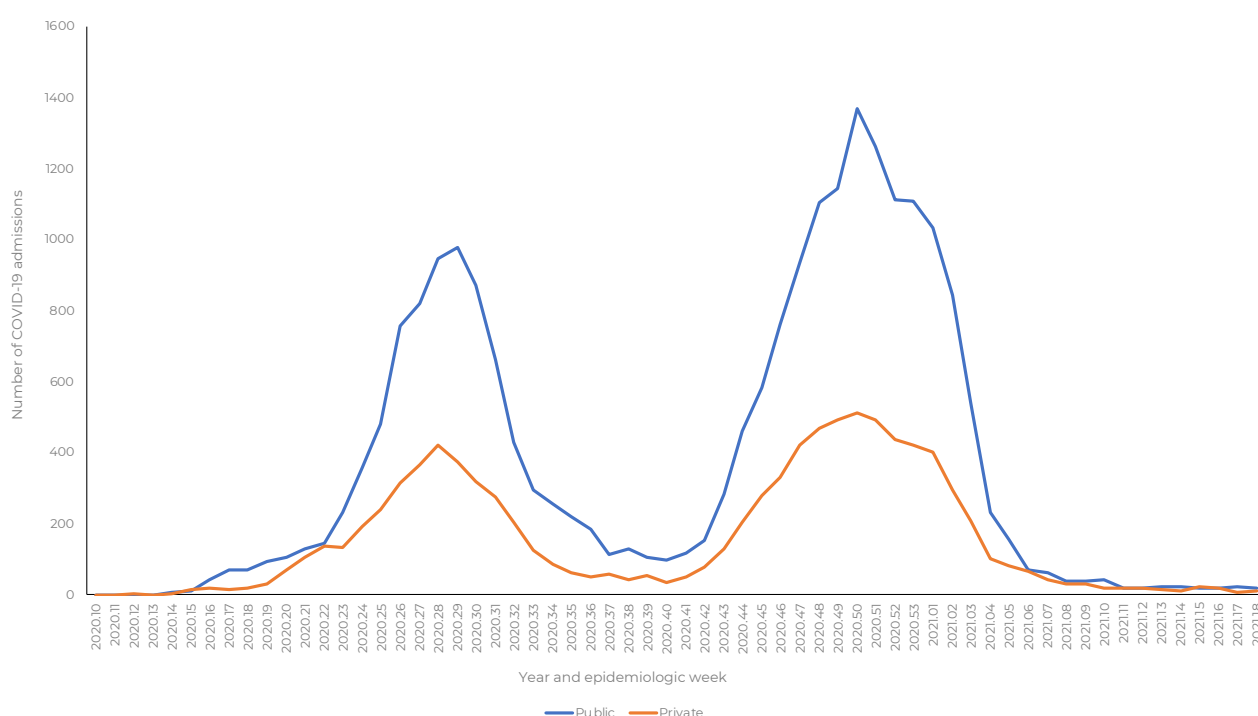


Figure 5: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Eastern Cape, 5 March 2020-08 May 2021, n=31,755

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The weekly admissions at the peak of the second wave exceeded the numbers of admissions at the peak of the first wave in all districts (Figure 6). Since the end of the second wave, the numbers of COVID-19 admissions have remained low in all districts.

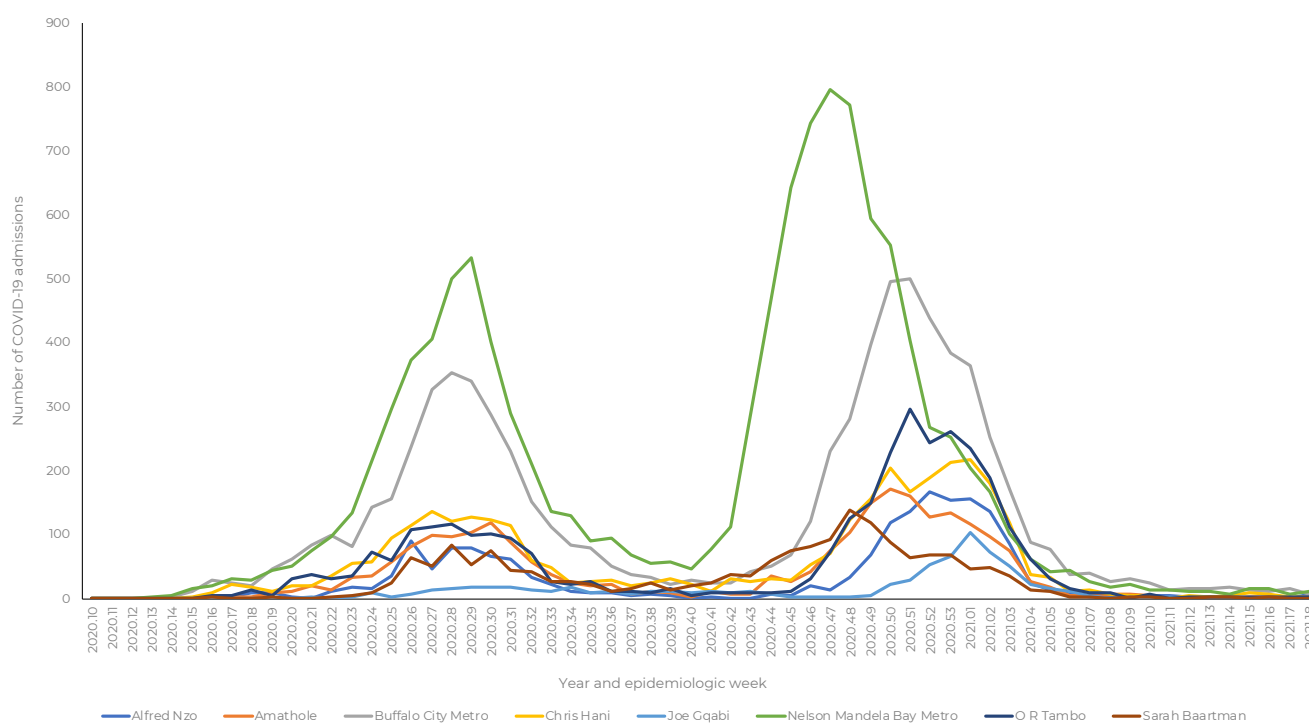


Figure 6. Number of reported COVID-19 admissions, by district and epidemiologic week, Eastern Cape, 5 March 2020-08 May 2021, n=31,755

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All districts showed an increase in COVID-19 admission between week 17 and week 18 2021 except Buffalo City Metro and Sarah Baartman. The highest proportion of new admissions and the highest incidence risk of new admissions was in Nelson Mandela Bay (Table 4).

Table 4: Number and percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Eastern Cape

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Alfred Nzo	1798	1	7	600	20.6	2.5
Amathole	2364	0	1	100	2.9	0.4
Buffalo City Metro	7396	15	7	-53	20.6	2.6
Chris Hani	3321	2	3	50	8.8	1.2
Joe Gqabi	711	1	2	100	5.9	1.7
Nelson Mandela Bay	11152	7	11	57	32.4	2.7
O R Tambo	3255	3	3	0	8.8	0.6
Sarah Baartman	1743	1	0	-100	0.0	0.0

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The weekly deaths at the peak of the second wave exceeded the numbers of deaths at the peak of the first wave in all districts (Figure 7). Since the end of the second wave, the numbers of COVID-19 deaths have remained low in all districts.

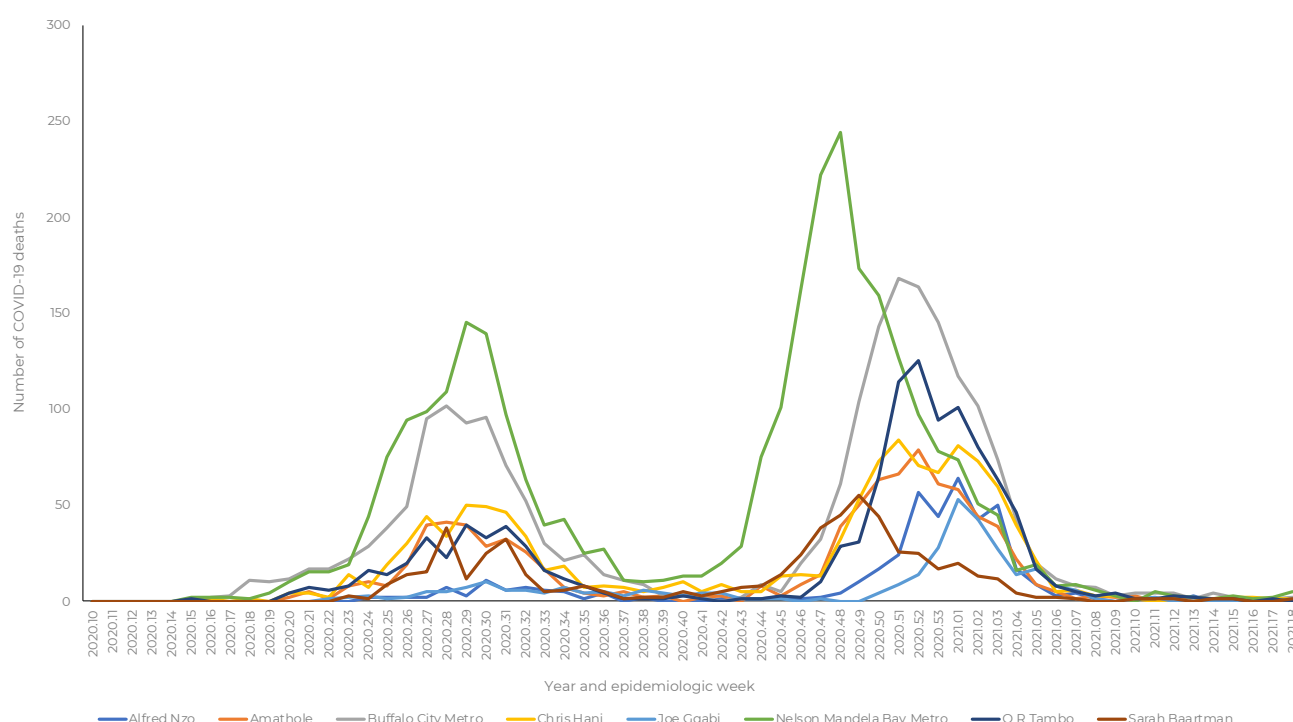


Figure 7. Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Eastern Cape, 5 March 2020–08 May 2021, n=9,464

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WESTERN CAPE

In both waves there were higher numbers of admissions in the public sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 8). Since the end of the second wave the numbers of COVID-19 admissions have remained low in both sectors.

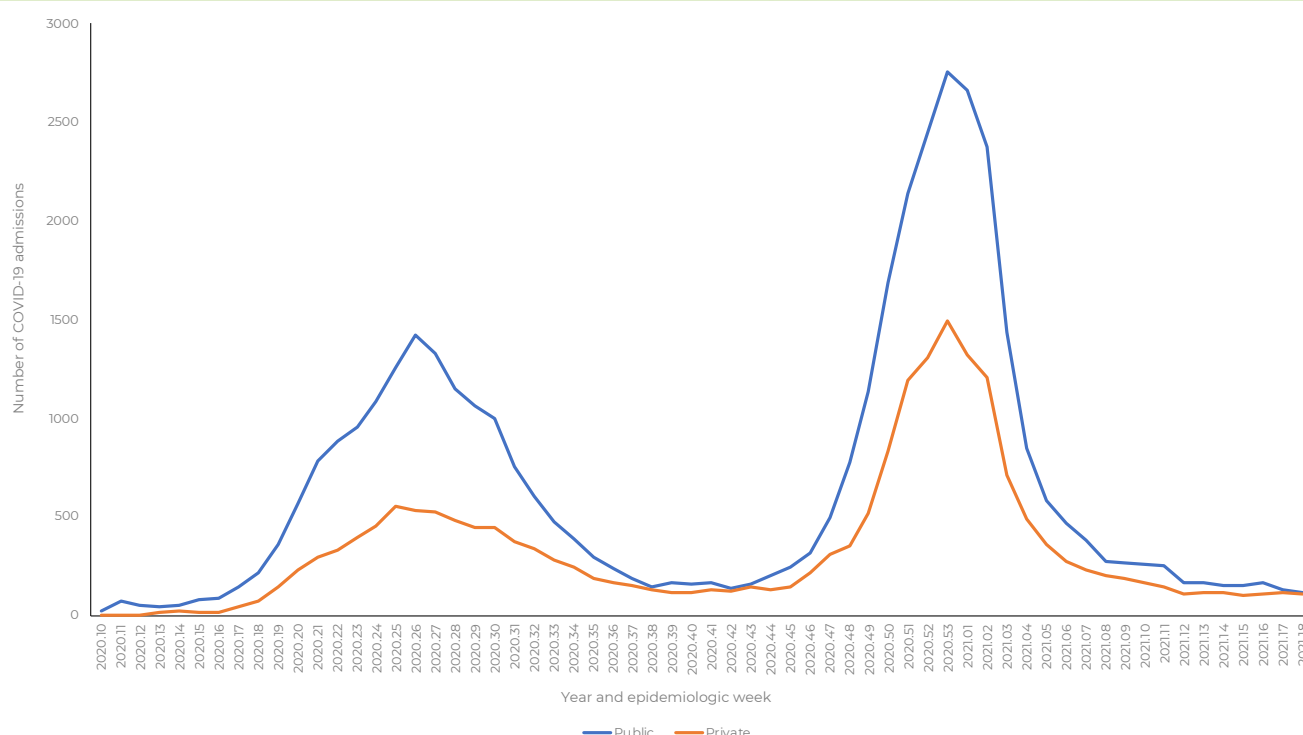


Figure 8: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Western Cape, 5 March 2020-08 May 2021, n=59,702

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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in all districts (Figure 9). Since the end of the second wave, the numbers of COVID-19 admissions have remained low in all districts.

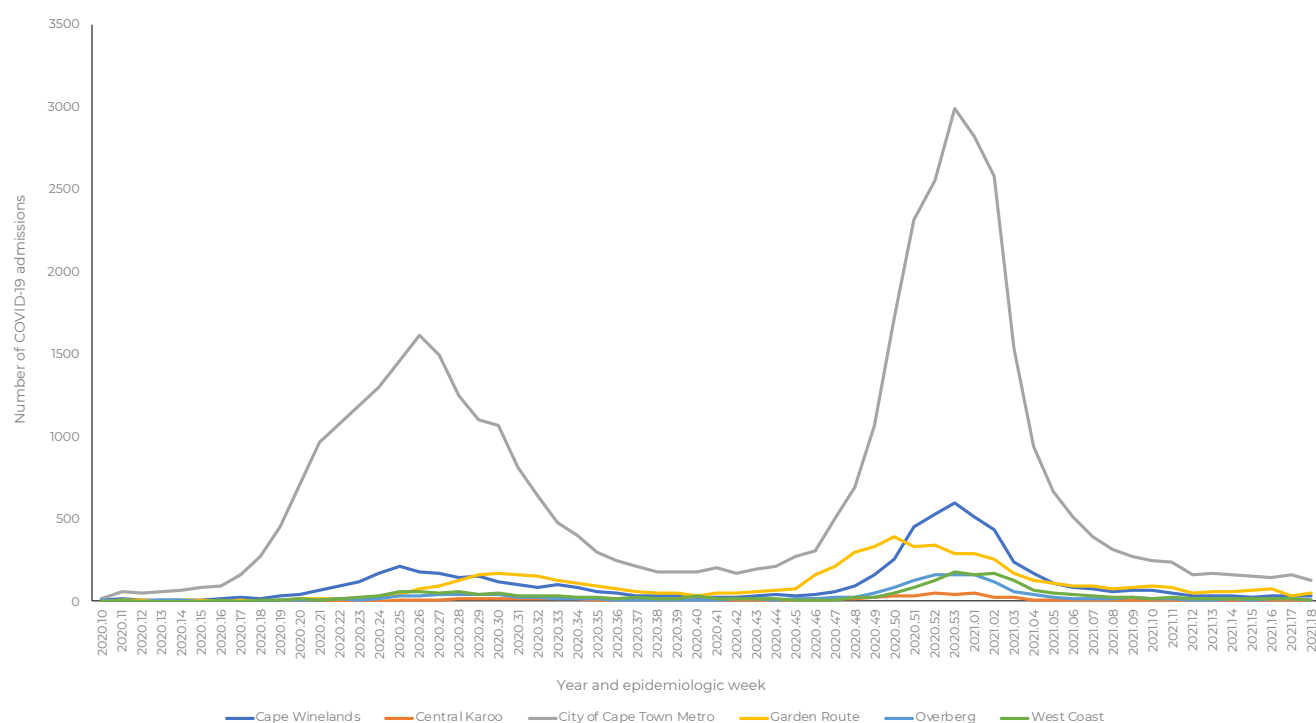


Figure 9: Number of reported COVID-19 admissions, by district and epidemiologic week, Western Cape, 5 March 2020-08 May 2021, n=59,702

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Three districts showed an increase in COVID-19 admission between week 17 and week 18 2021, Garden Route, Central Karoo and Cape Winelands. The highest proportion of new admissions was in City of Cape Town Metro (Table 5).

Table 5: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Western Cape

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Cape Winelands	6513	30	31	3	14.0	1.5
Central Karoo	546	3	4	33	1.8	2.4
City of Cape Town Metro	42833	158	128	-19	57.7	1.3
Garden Route	6113	33	45	36	20.3	3.3
Overberg	1607	10	5	-50	2.3	0.8
West Coast	2006	10	9	-10	4.1	0.9

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Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in all districts (Figure 10). Since the end of the second wave, the numbers of COVID-19 deaths has remained low in all districts.

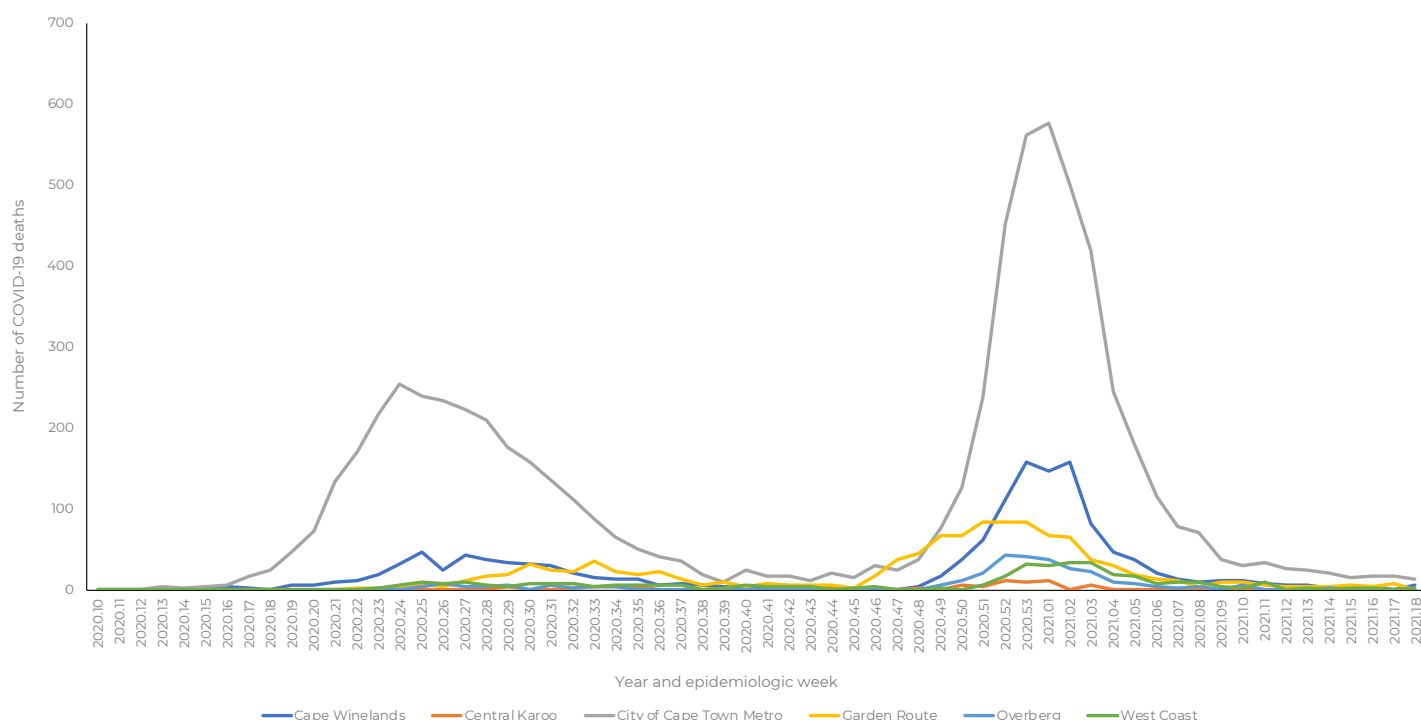


Figure 10: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Western Cape, 5 March 2020-08 May 2021, n=10,021

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KWAZULU-NATAL

In both waves there were higher numbers of admissions in the private sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 11). Since the end of the second wave, the numbers of COVID-19 admissions have been low in both sectors.

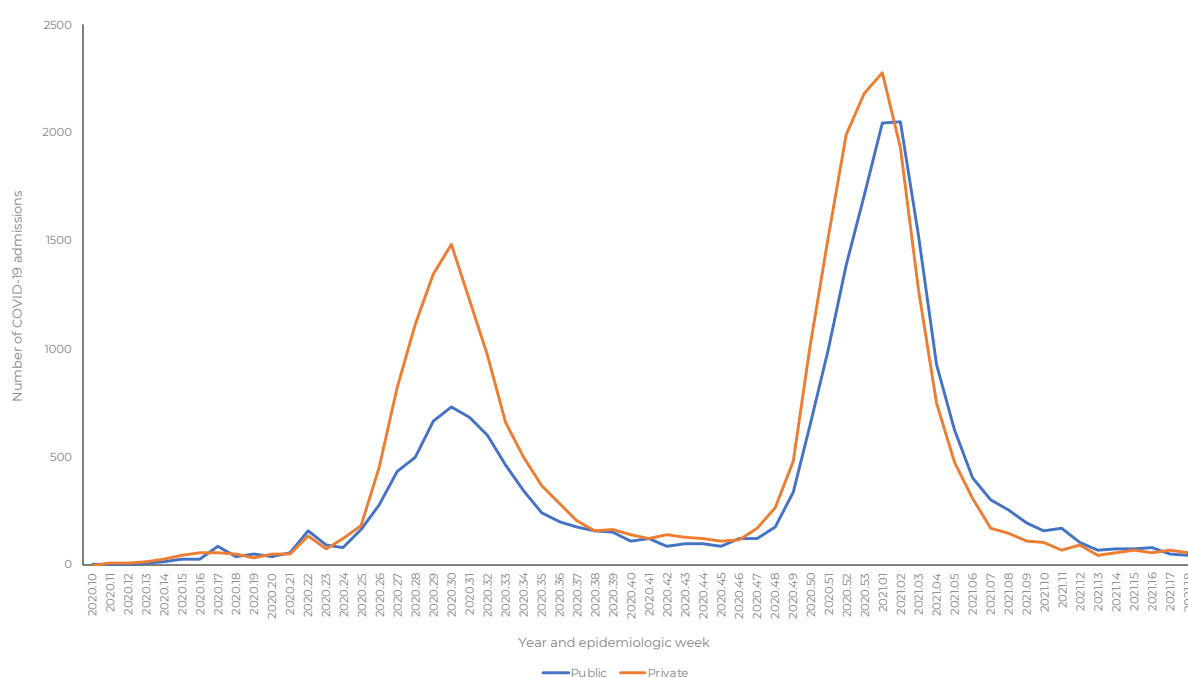


Figure 11: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, KwaZulu-Natal, 5 March 2020-08 May 2021, n= 48,988

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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in all districts except Amajuba (Figure 12). Since the end of the second wave, the numbers of COVID-19 admissions have remained low in all districts.

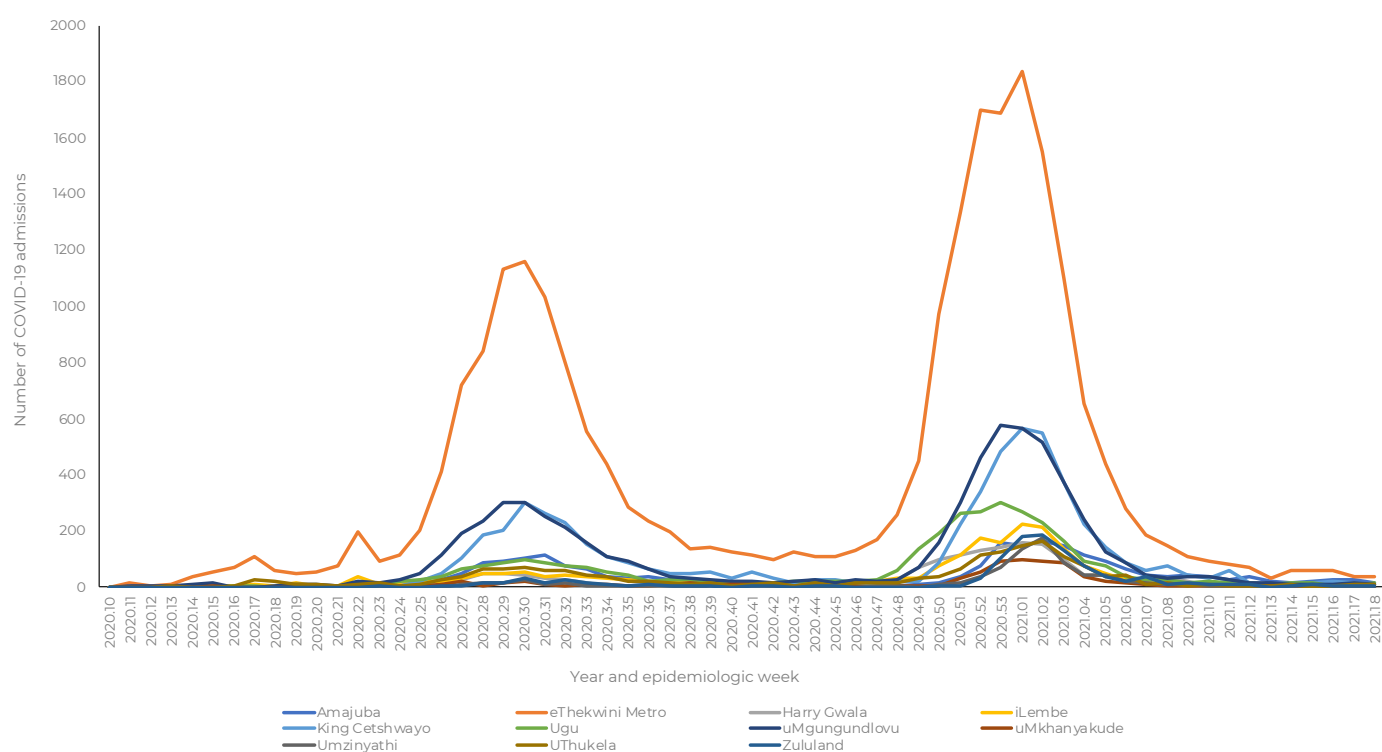


Figure 12: Number of reported COVID-19 admissions, by district and epidemiologic week, KwaZulu-Natal, 5 March 2020-08 May 2021, n= 48,988

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All districts showed a decrease in COVID-19 admission between week 17 and week 18 2021 except iLembe and Ugu. The highest proportion of new admissions was in eThekweni Metro (Table 6).

Table 6: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, KwaZulu-Natal

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Amajuba	2256	24	18	-25	18.2	3.2
eThekweni Metro	23415	39	35	-10	35.4	0.9
Harry Gwala	1561	2	0	-100	0.0	0.0
iLembe	2077	1	2	100	2.0	0.3
King Cetshwayo	5651	15	9	-40	9.1	0.9
Ugu	3287	7	13	86	13.1	1.6
uMgungundlovu	6238	15	11	-27	11.1	1.0
uMkhanyakude	798	1	0	-100	0.0	0.0
Umzinyathi	825	0	0	0	0.0	0.0
UThukela	1807	8	8	0	8.1	1.1
Zululand	1073	5	3	-40	3.0	0.3

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Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in all districts (Figure 13). Since the end of the second wave, the numbers of COVID-19 deaths has remained low in all districts.

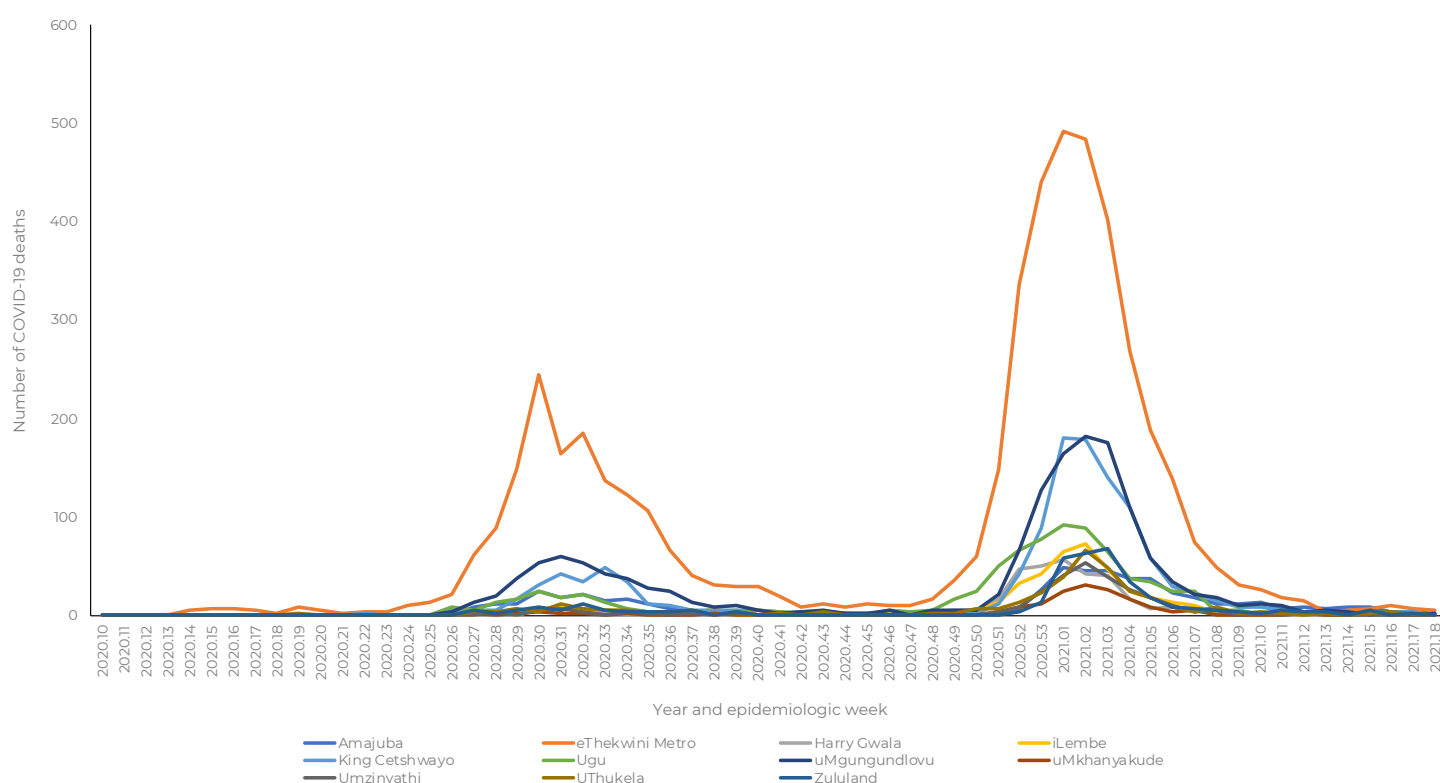
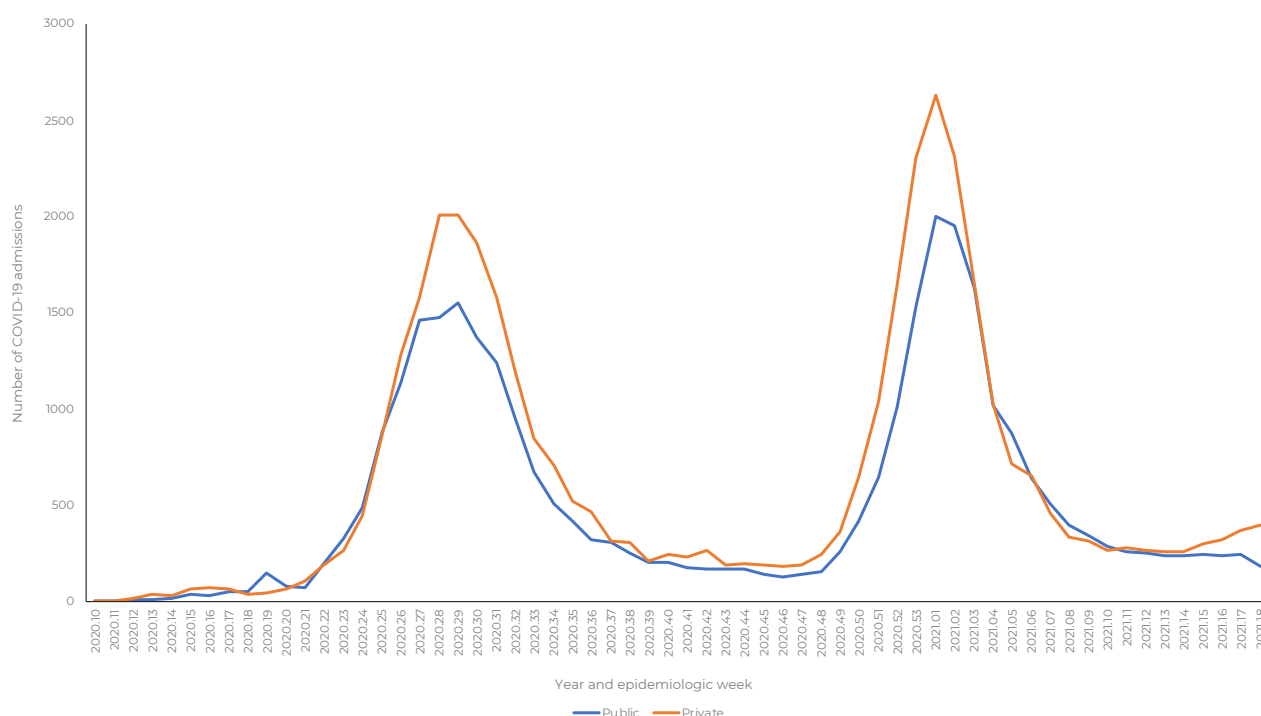


Figure 13: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, KwaZulu-Natal, 5 March 2020-08 May 2021, n= 10,906

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In both waves there were higher numbers of admissions in the private sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in the private and public sectors (Figure 14). There has been an increase in admission in private sector in the past three weeks.



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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in City of Johannesburg Metro, City of Tshwane Metro and West Rand (Figure 15). There have been increases in admissions in Sedibeng, the City of Johannesburg Metro and West Rand for the past two weeks.

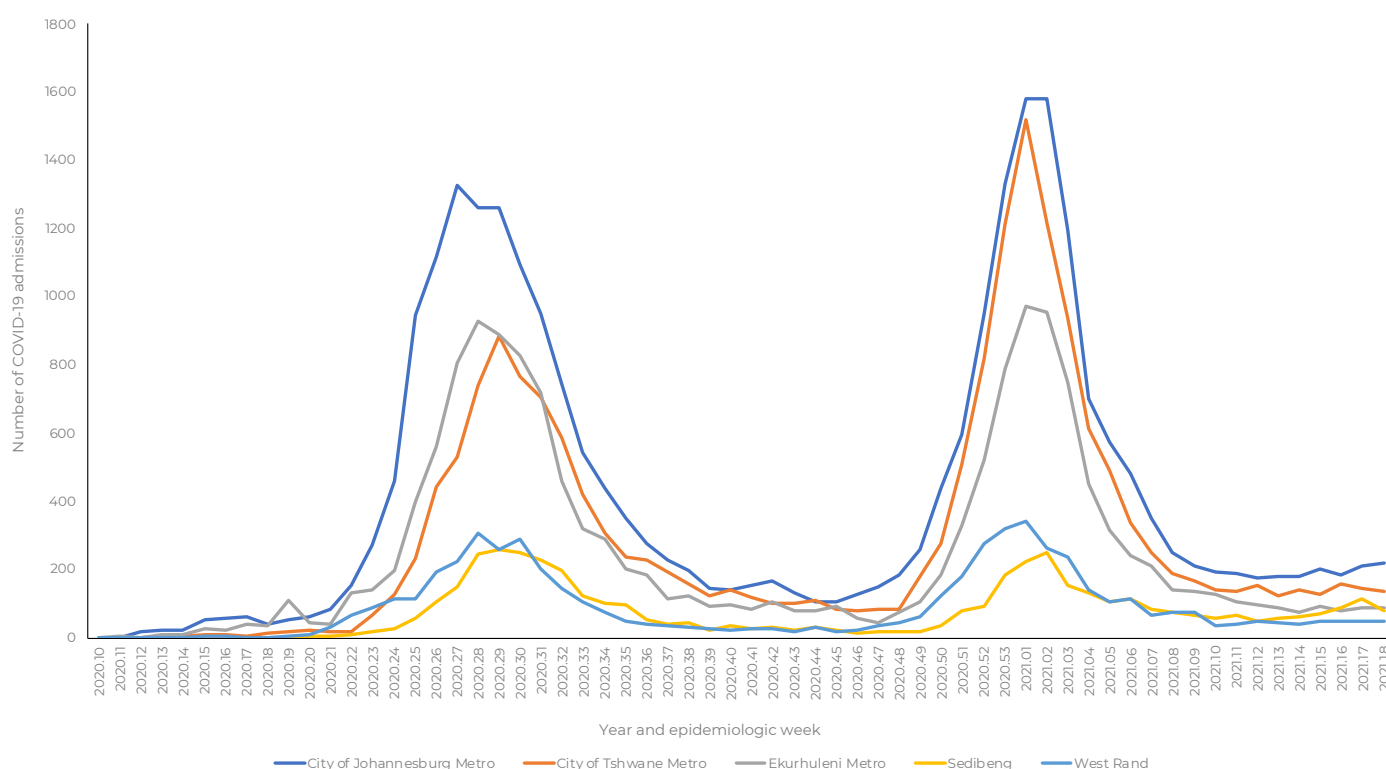


Figure 15: Number of reported COVID-19 admissions, by district and epidemiologic week, Gauteng, 5 March 2020-8 May 2021, n=68,863

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All districts showed decrease in COVID-19 admission between week 17 and week 18 2021 except City of Johannesburg Metro and West Rand. The highest proportion of new admissions were in City of Johannesburg and City of Tshwane Metros (Table 7).

Table 7: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Gauteng

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
City of Johannesburg Metro	25741	212	219	3	38.0	0.6
City of Tshwane Metro	17762	144	138	-4	24.0	0.6
Ekurhuleni Metro	15390	90	90	0	15.6	0.4
Sedibeng	4513	115	80	-30	13.9	1.5
West Rand	5457	48	49	2	8.5	0.9

Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in City of Tshwane Metro, Ekurhuleni Metro and West Rand (Figure 16). The numbers of COVID-19 deaths have increased in City of Johannesburg.

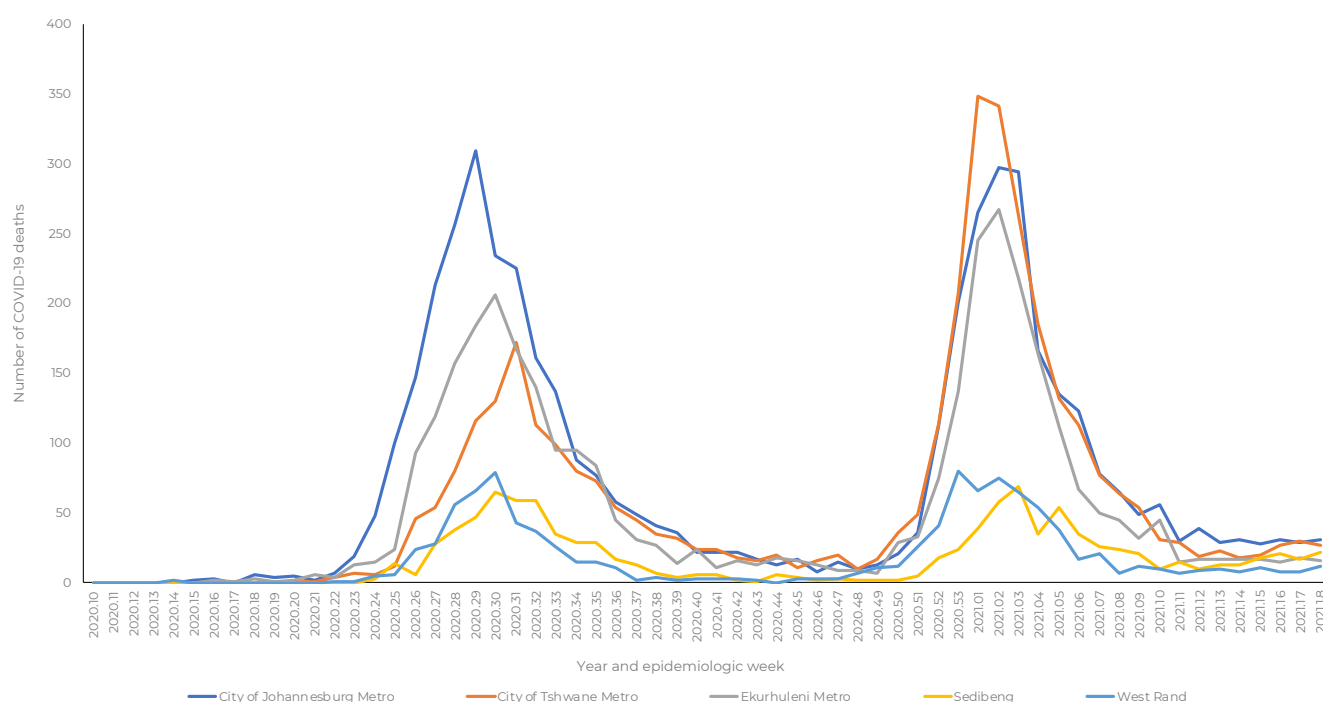


Figure 16: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Gauteng, 5 March 2020-08 May 2021, n=13,487

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LIMPOPO

In the first wave there were roughly equal numbers of admissions in both sectors, but in the second wave there were higher numbers of admissions in the public sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 17). Since the end of the second wave, the numbers of COVID-19 admissions have remained low in both sectors.

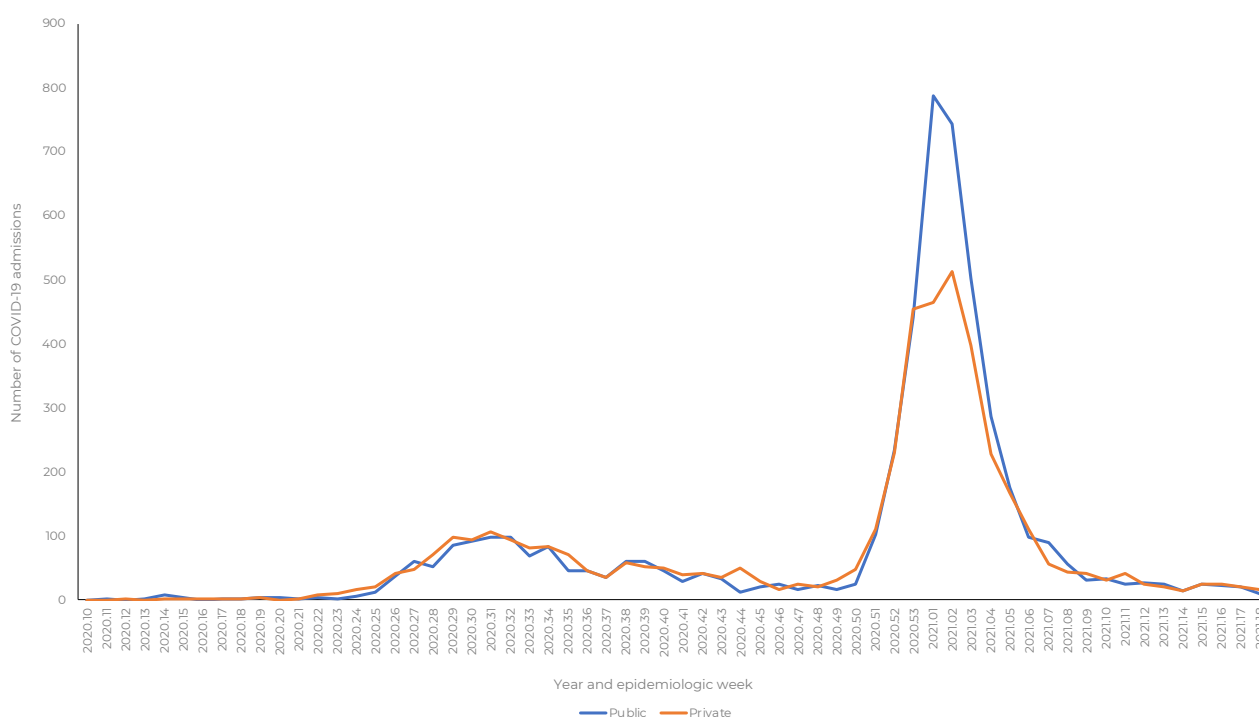


Figure 17: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Limpopo, 5 March 2020-08 May 2021, n= 9,494

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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in all districts (Figure 18). Since the end of the second wave, the numbers of COVID-19 admissions have remained low in all districts.

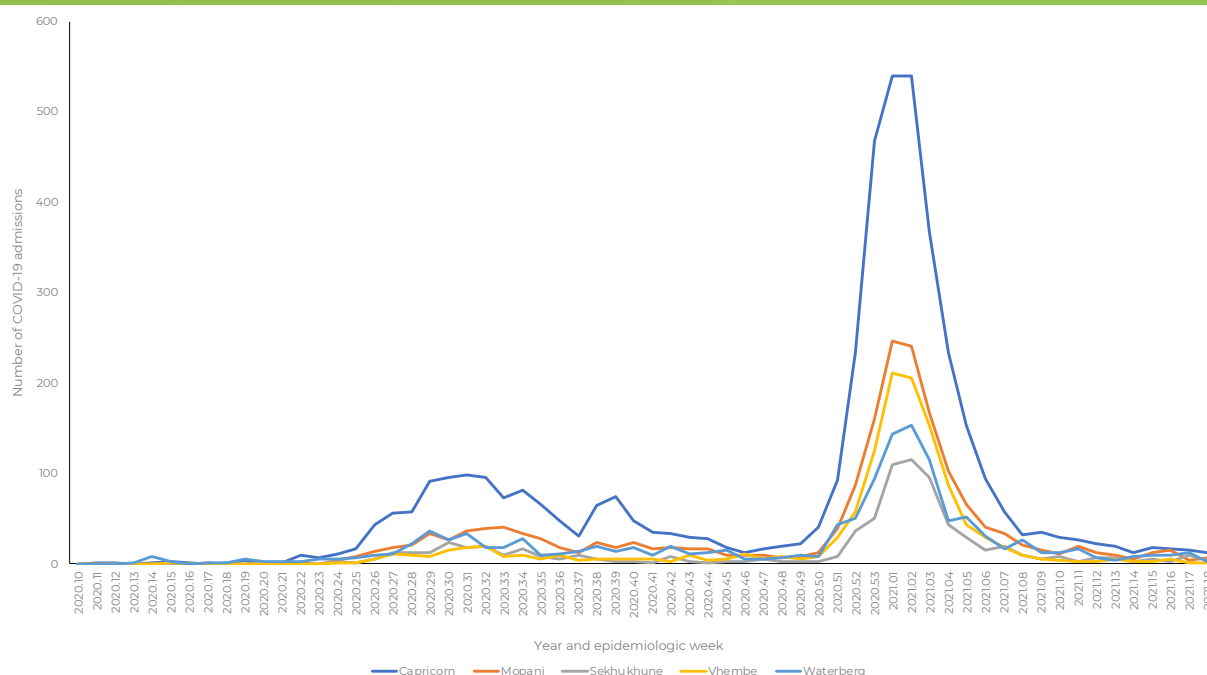


Figure 18: Number of reported COVID-19 admissions, by district and epidemiologic week, Limpopo, 5 March 2020-08 May 2021, n= 9,494

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All districts showed decrease in COVID-19 admission between week 17 and week 18 of 2021 except Mopani. The highest proportion of new admissions was in Capricorn (Table 8).

Table 8: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Limpopo

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Capricorn	4352	15	12	-20	46.2	3.5
Mopani	1844	4	7	75	26.9	2.3
Sekhukhune	782	9	4	-56	15.4	1.3
Vhembe	1210	1	1	0	3.8	0.3
Waterberg	1304	13	2	-85	7.7	1.0

Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in all districts (Figure 19). Since the end of the second wave, the numbers of COVID-19 deaths have remained low in all districts.

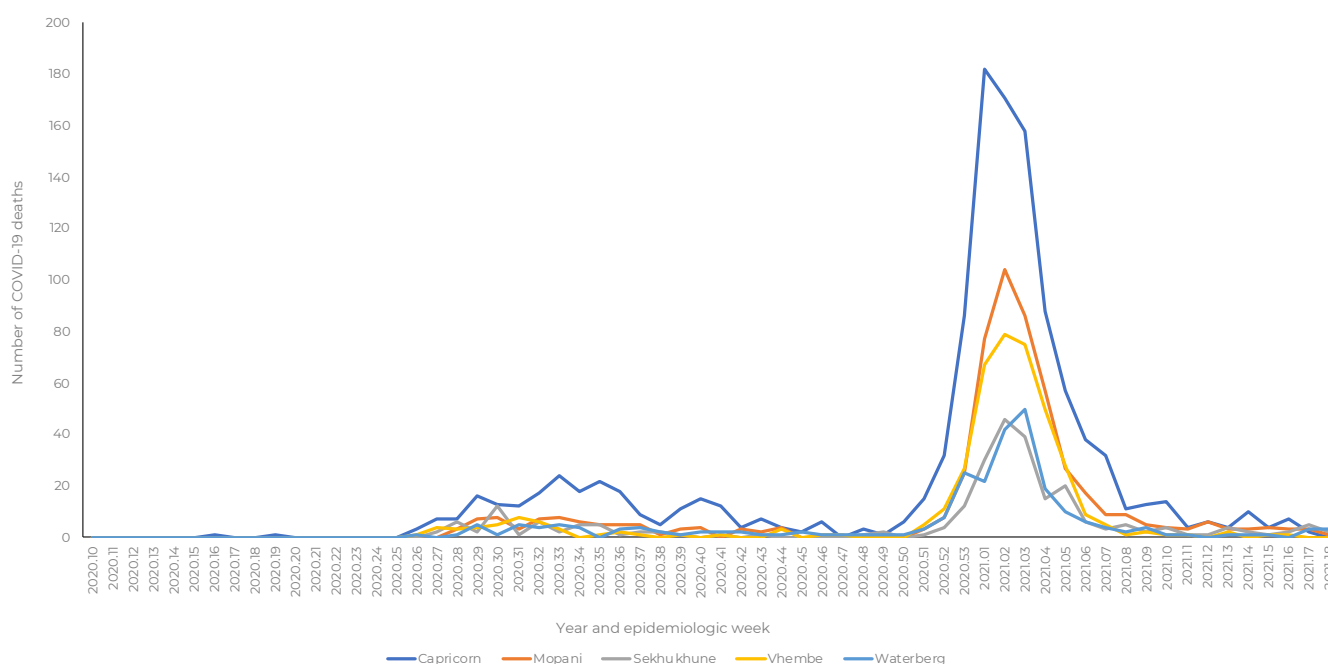


Figure 19: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Limpopo, 5 March 2020-08 May 2021, n=2,633

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FREE STATE

In the first wave there were roughly equal numbers of admissions in both sectors, but in the second wave there were higher numbers of admissions in the public sector (Figure 20). Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in the public sector. The numbers of COVID-19 have increased in both sectors over the past nine weeks.

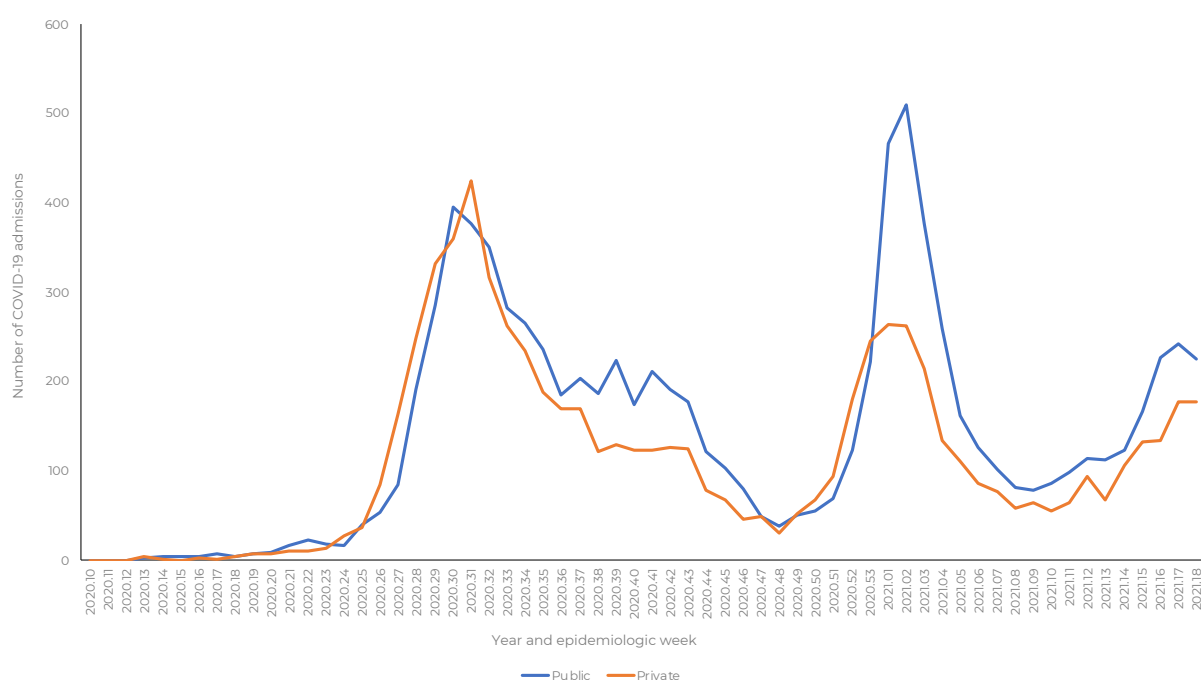


Figure 20: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Free State, 5 March 2020-08 May 2021, n=15,731

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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in Fezile Dabi, Thabo Mofutsanyane and Xhariep (Figure 21). Admissions have increased in all districts in the past nine weeks, particularly Mangaung Metro, Thabo Mofutsanyana, Lejweleputswa and Fezile Dabi.

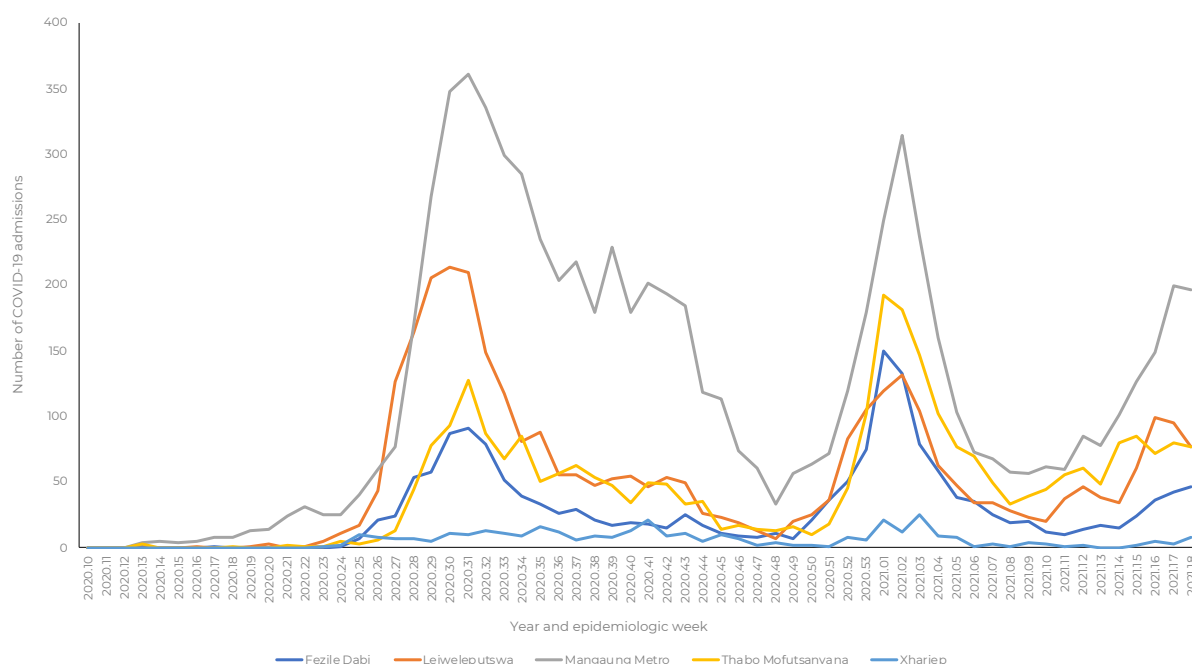


Figure 21: Number of reported COVID-19 admissions, by district and epidemiologic week, Free State, 5 March 2020-08 May 2021, n= 15,731

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All districts showed decrease in COVID-19 admission between week 17 and week 18 2021 except, Fezile Dabi and Xhariep. The highest proportion of new admissions were in Mangaung Metro and Lejweleputswa (Table 9).

Table 9: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Free State

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Fezile Dabi	1735	42	46	10	11.4	2.2
Lejweleputswa	3298	95	77	-19	19.1	2.9
Mangaung Metro	7498	200	196	-2	48.5	5.6
Thabo Mofutsanyana	2828	80	77	-4	19.1	2.5
Xhariep	354	3	8	167	2.0	1.5

Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in Thabo Mofutsanyana, Fezile Dabi and Xhariep (Figure 22). The numbers of COVID-19 deaths have increased in four districts over the last six weeks, Mangaung Metro, Thabo Mofutsanyane, Lejweleputswa and Fezile Dabi.

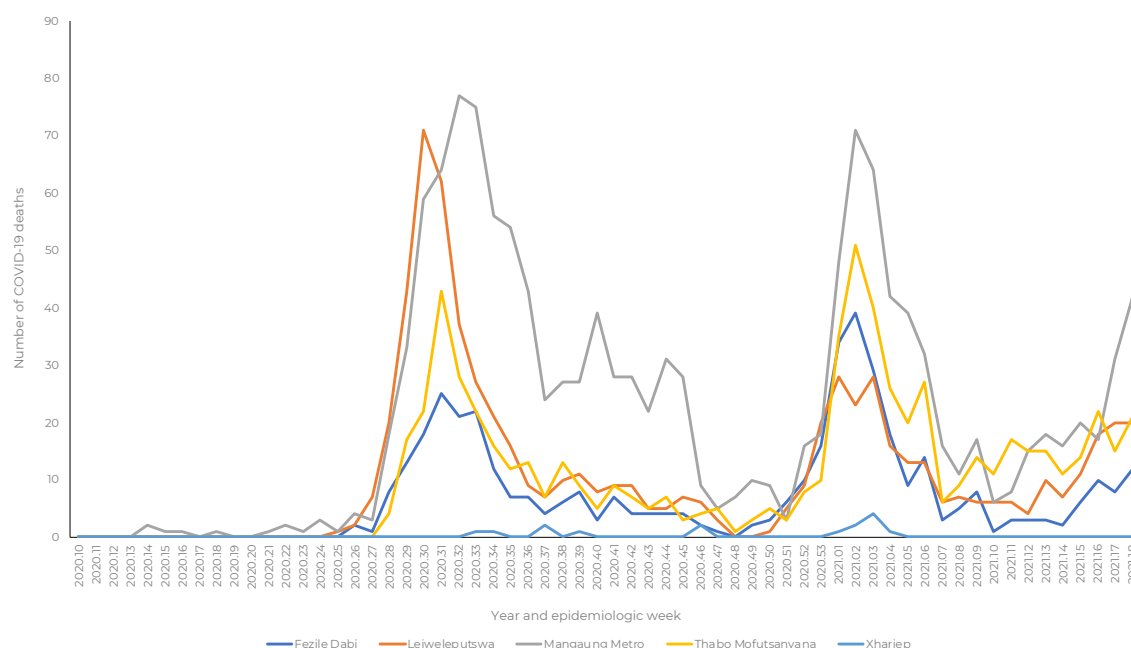


Figure 22: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Free State, 5 March 2020-08 May 2021, n=3,108

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MPUMALANGA

In the first wave there were higher numbers of admissions in the private sector, but in the second wave there were higher numbers of admissions in the public sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 23). Since the end of the second wave, the numbers of COVID-19 admissions have decreased in both sectors.

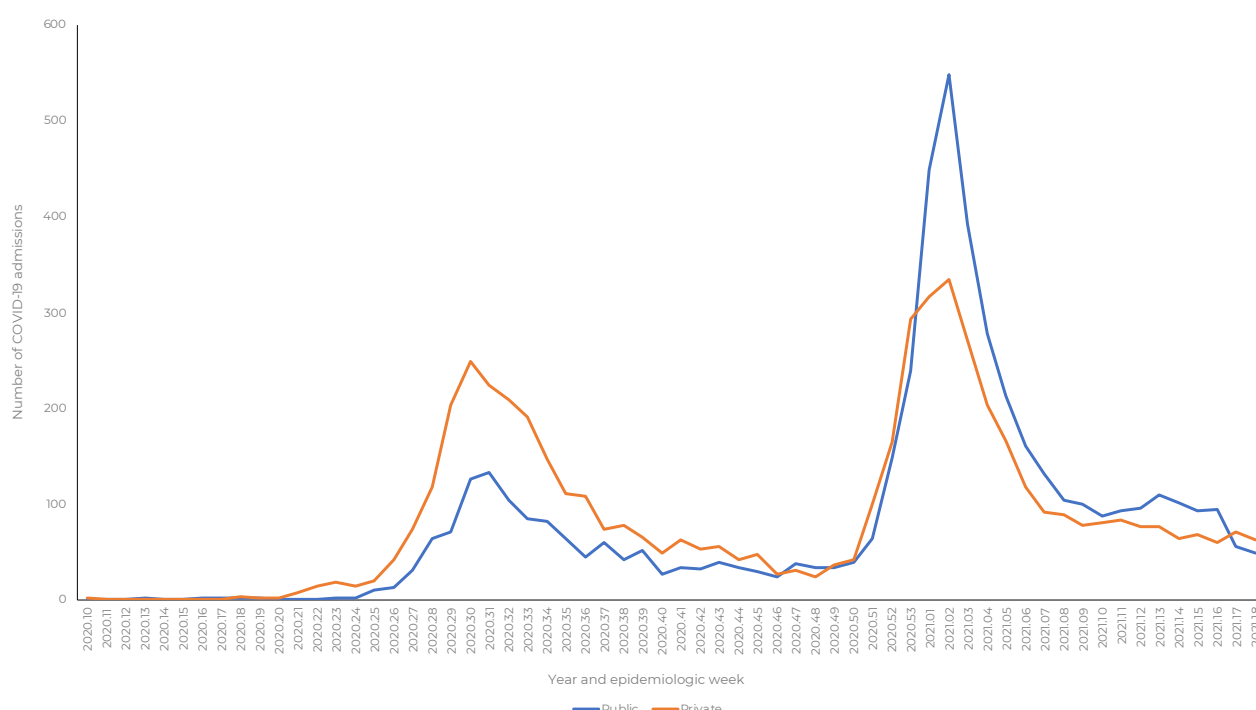


Figure 23: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Mpumalanga, 5 March 2020-08 May 2021, n = 10,238

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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in all districts (Figure 24). Since the end of the second wave, the numbers of COVID-19 admissions have decreased in all districts except for Gert Sibande district.

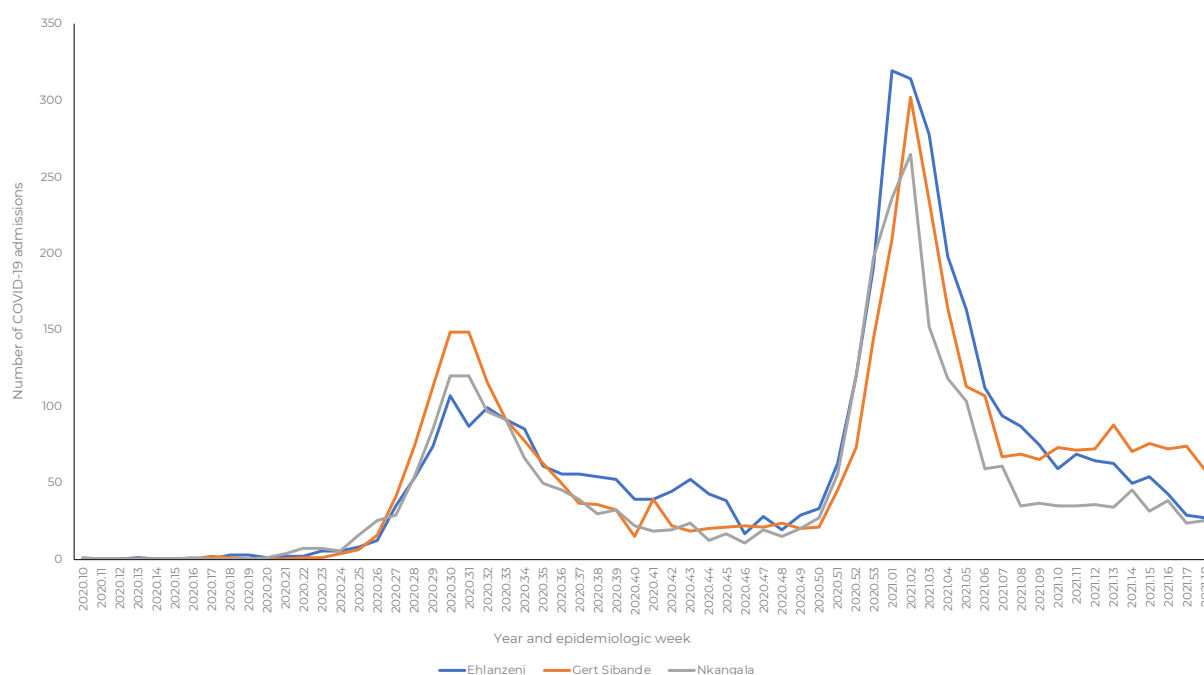


Figure 24: Number of reported COVID-19 admissions, by district and epidemiologic week, Mpumalanga, 5 March 2020-08 May 2021, n=10,238

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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All districts showed a decrease in COVID-19 admission between week 17 and week 18 2021 except, Nkangala. The highest proportion of new admissions were in Gert Sibande (Table 10).

Table 10: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Mpumalanga

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Ehlanzeni	3804	29	27	-7	24.5	1.3
Gert Sibande	3545	74	58	-22	52.7	4.2
Nkangala	2869	24	25	4	22.7	1.4

Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in all districts with numbers now decreasing (Figure 25). The numbers of COVID-19 deaths have decreased in all districts in the past week

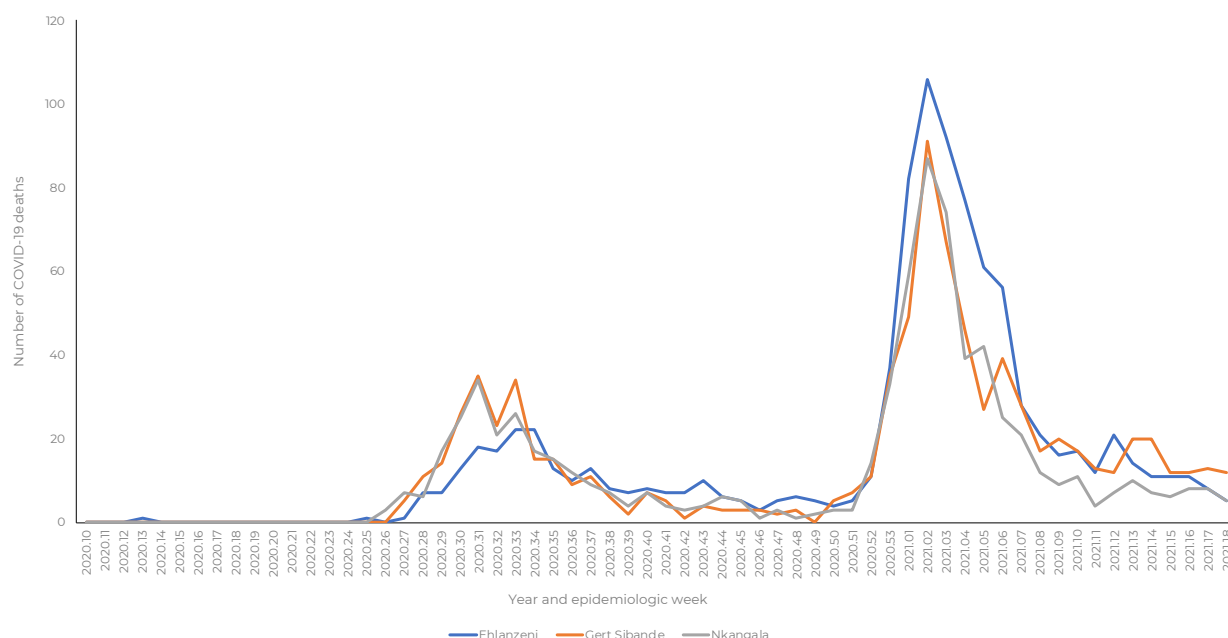


Figure 25: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Mpumalanga, 5 March 2020-08 May 2021, n=2,464

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NORTH WEST

In both waves there were higher numbers of admissions in the public sector. Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 26). The numbers of COVID-19 admissions have increased in both sectors over the past nine weeks.

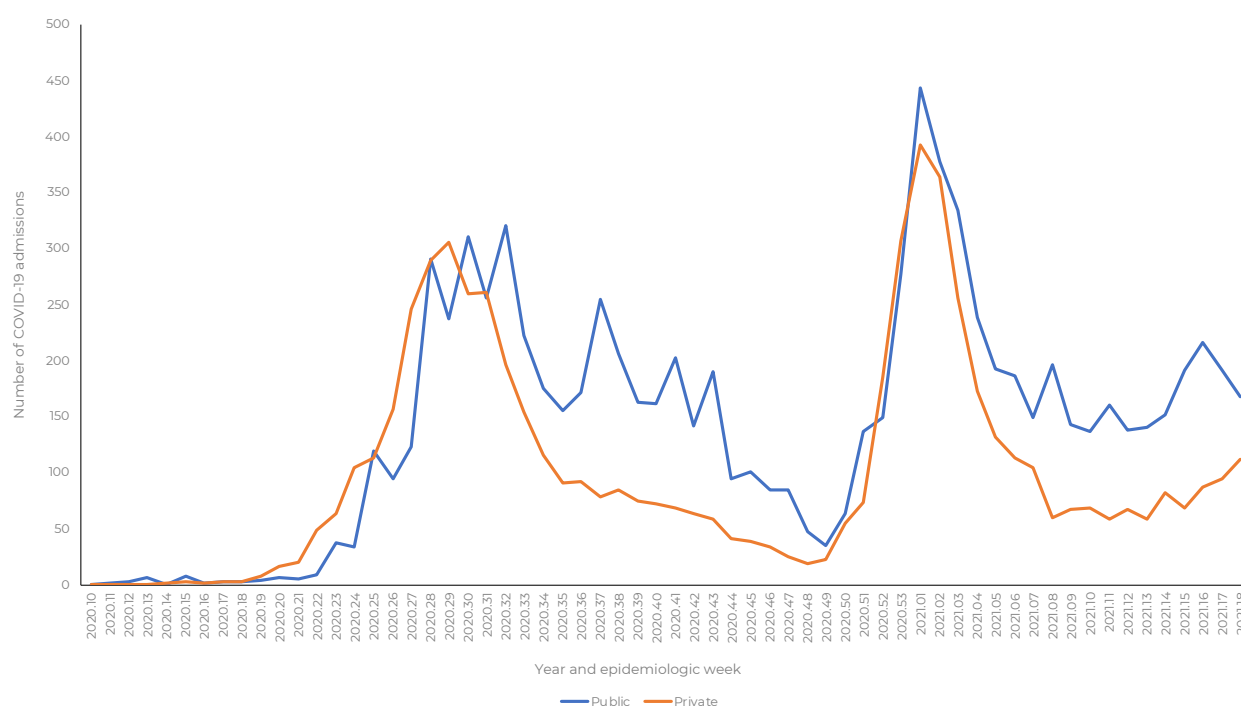


Figure 26: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, North West, 5 March 2020-08 May 2021, n=14,946

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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Weekly admissions at the peak of the second wave exceeded the weekly numbers of admissions at the peak of the first wave in all districts except Dr Kenneth Kaunda (Figure 27). Since the end of the second wave, the numbers of COVID-19 admissions have remained low in all districts but has increased in Dr Kenneth Kaunda district for nine weeks.

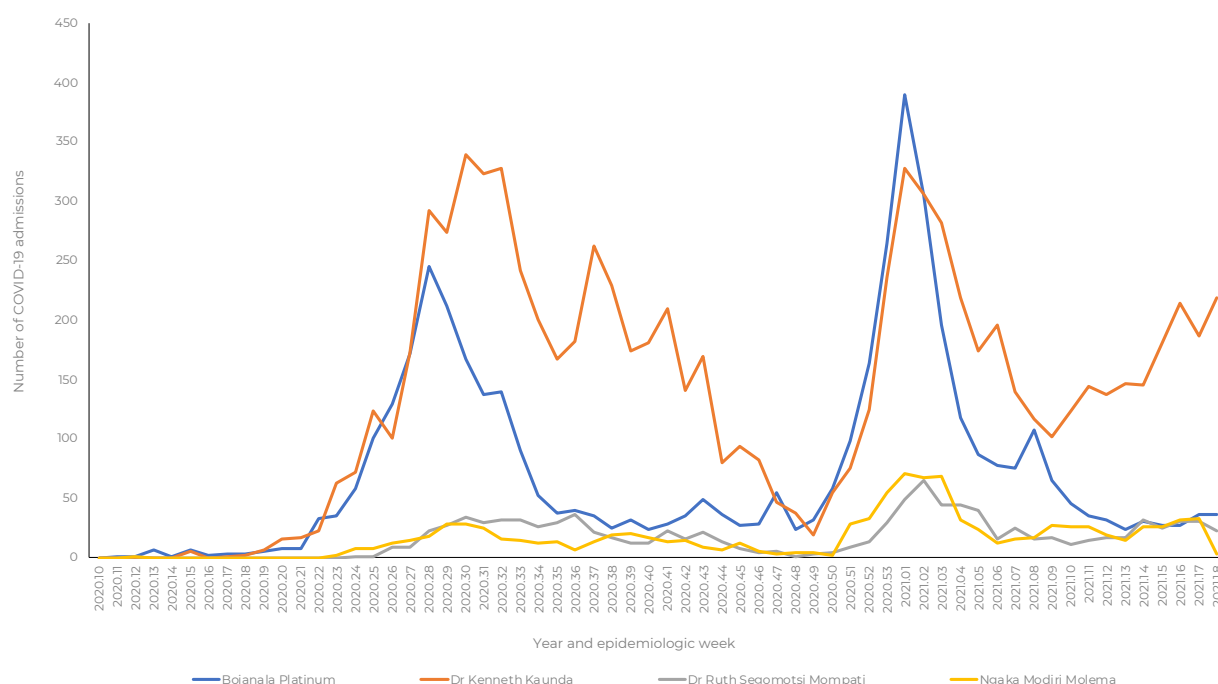


Figure 27: Number of reported COVID-19 admissions, by district and epidemiologic week, North West, 5 March 2020-08 May 2021, n=14,946

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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All districts showed a decrease in COVID-19 admission between week 17 and week 18 2021 except Dr Kenneth Kaunda. The highest proportion of new admissions were in Dr Kenneth Kaunda (Table 11).

Table 11: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, North West

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Bojanala Platinum	4407	36	36	0	12.9	0.7
Dr Kenneth Kaunda	8509	186	218	17	78.1	9.8
Dr Ruth Segomotsi Mompoti	1008	30	22	-27	7.9	1.7
Ngaka Modiri Molema	999	33	3	-91	1.1	0.1

Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in all districts (Figure 28). The numbers of COVID-19 deaths have increased in Dr Kenneth Kaunda district in the past four weeks.

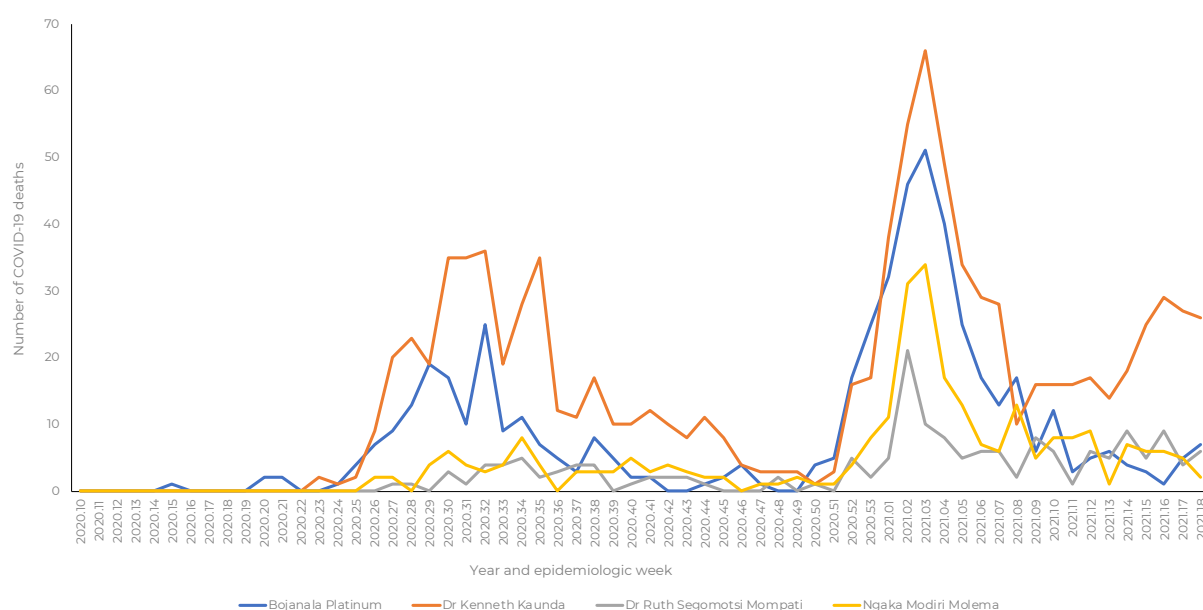


Figure 28: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, North West, 5 March 2020-08 May 2021, n=1,894

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NORTHERN CAPE

In both waves there were roughly equal numbers of admissions in both sectors. Weekly admissions at the peak of the second wave exceeding the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 29). In the past nine weeks, the numbers of COVID-19 admissions have increased in both sectors.

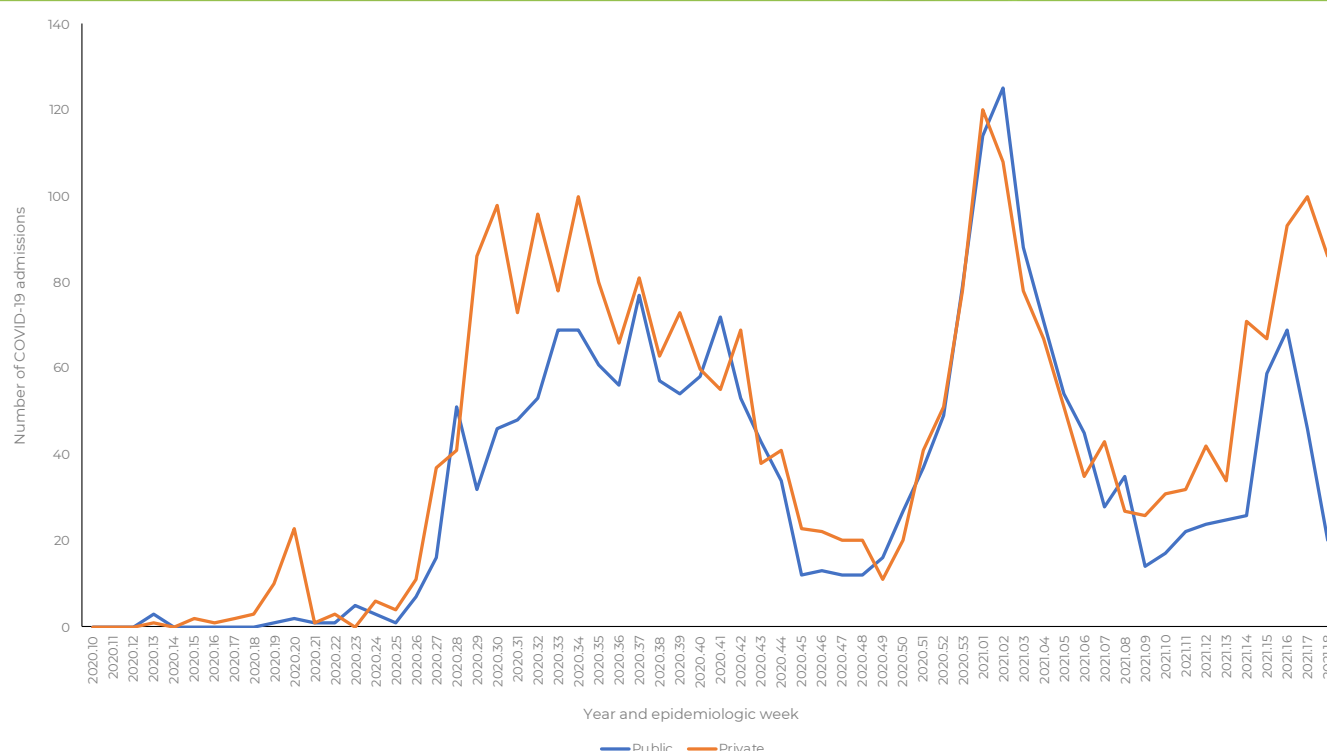


Figure 29: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Northern Cape, 5 March 2020-08 May 2021, n=4,811

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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Weekly admissions at the peak of the second wave exceeded the weekly number of admissions during the peak of the first wave in Pixley ka Seme, Namakwa and ZF Mgcawu districts (Figure 30). In the past seven weeks the number of admissions have increased particularly in Frances Baard and ZF Mgcawu districts.

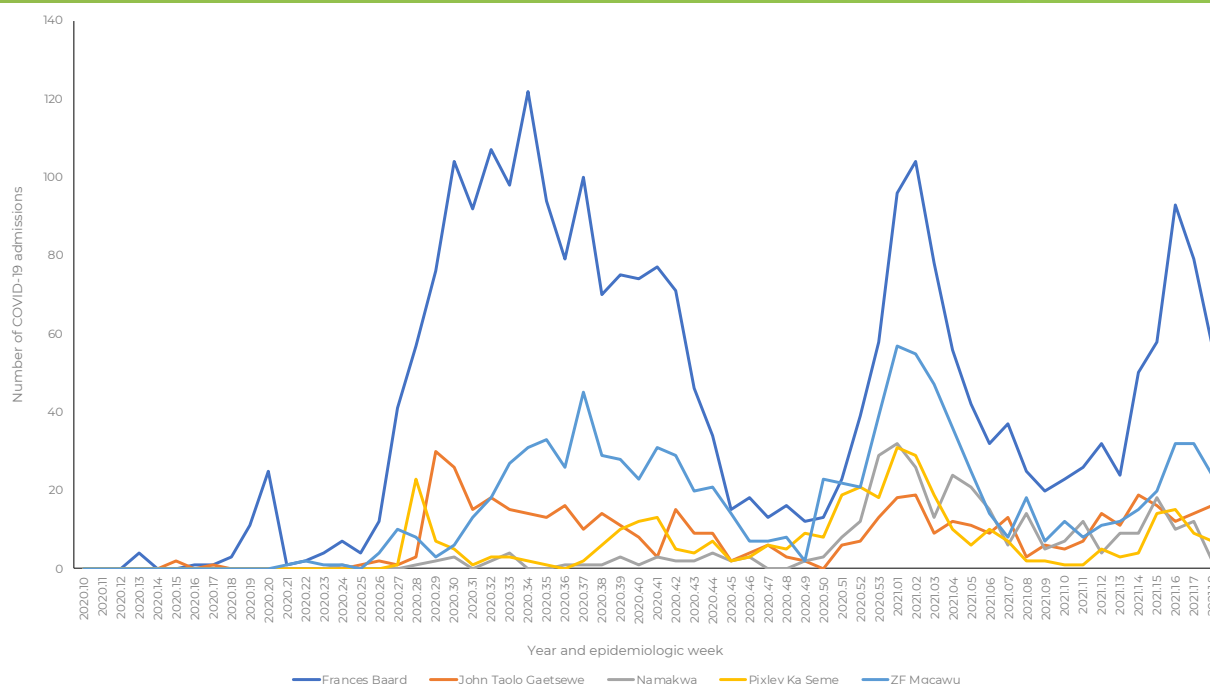


Figure 30: Number of reported COVID-19 admissions, by district and epidemiologic week, Northern Cape, 5 March 2020-08 May 2021, n=4,811

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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All districts showed a decrease in COVID-19 admission between week 17 and week 18 2021 except John Taolo Gaetsewe. The highest proportion of new admissions were in Frances Baard district (Table 12).

Table 12: Percentage change in COVID-19 admissions, epidemiologic week 17 to week 18 of 2021, by district, Northern Cape

District	Cumulative hospital admissions	Admissions Week 17	Admissions Week 18	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Frances Baard	2631	79	57	-28	53.8	13.0
John Taolo Gaetsewe	493	14	16	14	15.1	5.6
Namakwa	329	12	2	-83	1.9	1.6
Pixley Ka Seme	371	9	7	-22	6.6	3.1
ZF Mgcawu	986	32	24	-25	22.6	8.1

Weekly deaths at the peak of the second wave exceeded the weekly numbers of deaths at the peak of the first wave in Pixley ka Seme, Namakwa and ZF Mgcawu districts (Figure 31). The numbers of COVID-19 deaths have increased in Frances Baard and ZF Mgcawu districts.

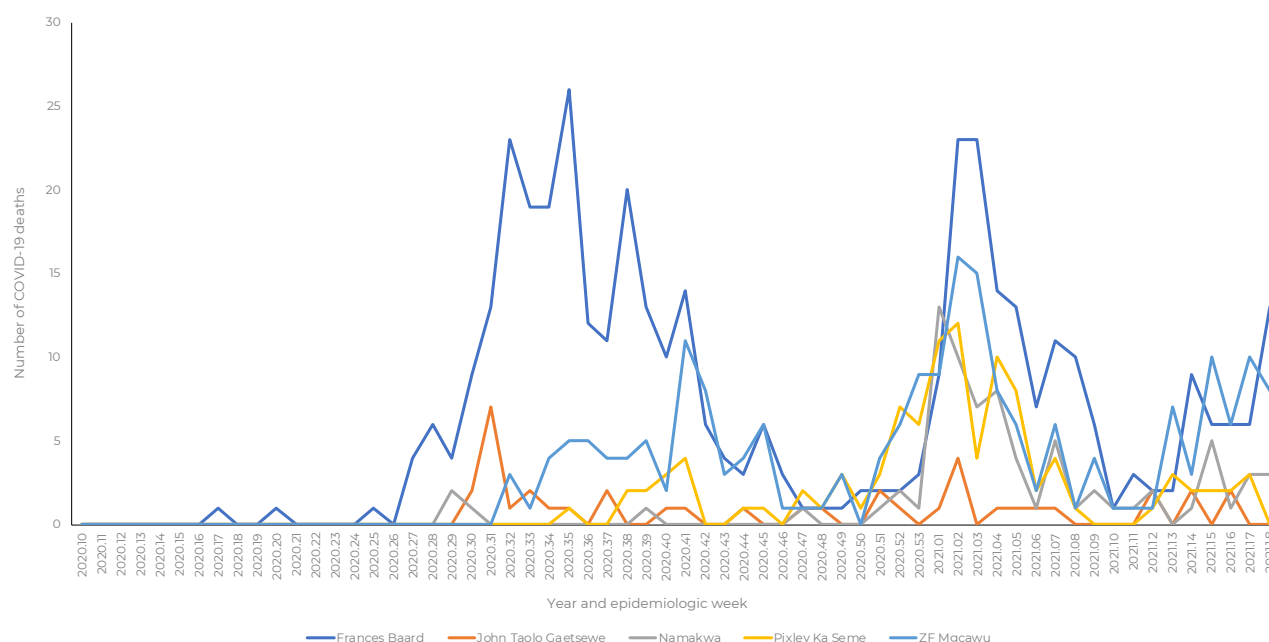


Figure 31: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Northern Cape, 5 March 2020-08 May 2021, n=826

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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LIMITATIONS

DATCOV now includes reporting from all hospitals with COVID-19 admissions but many hospitals are yet to reach complete submission of historic data. Data quality in a surveillance system is dependent on the information submitted by healthcare institutions. It is not possible for the NICD to verify or check the quality of all these data, however, the NICD has built-in data quality checks. Delays in reporting of admissions and deaths may affect the numbers reported in the most recent week. The National Department of Health have recruited data capturers to support hospitals to improve data submission.

As hospitals reached capacity, admission criteria may change and therefore influence trends and inferences about the progression of the epidemic. DATCOV only reports hospital-based admissions and deaths and therefore does not include deaths occurring outside hospitals. DATCOV now has a module to record out-of-hospital deaths.

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ACKNOWLEDGEMENTS

All public and private sector hospitals submitting data to DATCOV

Private hospital groups submitting data to DATCOV:

- Netcare
- Life Healthcare
- Mediclinic Southern Africa
- National Hospital Network (NHN)
- Clinix Health Group
- Lenmed
- Joint Medical Holdings (JMH)

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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APPENDIX

Table 13: Percentage average change in hospital admissions over 14 days, by district, South Africa, 2 January 2020-08 May 2021

Province	District	Total admissions	Incidence (per 100k)	New admissions	New admissions incidence (per 100k)	% average change (14 days)
Eastern Cape	Alfred Nzo	1798	216.04	7	0.84	600.00
	Amathole	2364	295.79	2	0.25	100.00
	Buffalo City Metro	7396	923.49	7	0.87	-53.33
	Chris Hani	3321	456.40	3	0.41	50.00
	Joe Gqabi	711	206.11	2	0.58	100.00
	Nelson Mandela Bay Metro	11154	919.49	11	0.91	57.14
	O R Tambo	3258	212.64	7	0.46	-12.50
	Sarah Baartman	1745	360.67	0	0.00	-100.00
Free State	Fezile Dabi	1740	341.09	46	9.02	2.22
	Lejweleputswa	3329	509.33	84	12.85	-30.58
	Mangaung Metro	7531	864.72	219	25.15	0.46
	Thabo Mofutsanyana	2835	370.68	83	10.85	-12.63
	Xhariep	355	274.25	9	6.95	200.00
Gauteng	City of Johannesburg Metro	25751	438.95	230	3.92	3.60
	City of Tshwane Metro	17785	476.92	146	3.92	-15.12
	Ekurhuleni Metro	15394	386.57	90	2.26	-15.09
	Sedibeng	4522	473.25	84	8.79	-30.58
	West Rand	5457	571.57	49	5.13	2.08
KwaZulu-Natal	Amajuba	2258	395.78	19	3.33	-24.00
	eThekweni Metro	23415	588.14	36	0.90	-20.00
	Harry Gwala	1562	303.88	0	0.00	-100.00
	iLembe	2077	299.05	2	0.29	100.00
	King Cetshwayo	5651	582.17	9	0.93	-43.75
	Ugu	3288	410.12	13	1.62	44.44
	uMgungundlovu	6238	542.70	11	0.96	-26.67

COVID-19 HOSPITAL SURVEILLANCE UPDATE

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Province	District	Total admissions	Incidence (per 100k)	New admissions	New admissions incidence (per 100k)	% average change (14 days)
	uMkhanyakude	798	116.17	0	0.00	-100.00
	Umzinyathi	825	145.36	0	0.00	100.00
	UThukela	1807	253.00	8	1.12	0.00
	Zululand	1073	121.82	3	0.34	-40.00
Limpopo	Capricorn	4354	332.89	12	0.92	-29.41
	Mopani	1845	155.71	7	0.59	75.00
	Sekhukhune	782	65.70	4	0.34	-55.56
	Vhembe	1212	84.92	1	0.07	0.00
	Waterberg	1305	175.83	3	0.40	-82.35
Mpumalanga	Ehlanzeni	3807	208.18	28	1.53	-12.50
	Gert Sibande	3553	286.03	64	5.15	-25.58
	Nkangala	2871	178.45	29	1.80	11.54
North West	Bojanala Platinum	4407	228.56	37	1.92	0.00
	Dr Kenneth Kaunda	8529	1069.18	235	29.46	18.69
	Dr Ruth Segomotsi Mompoti	1010	213.49	23	4.86	-28.13
	Ngaka Modiri Molema	999	109.80	3	0.33	-90.91
Northern Cape	Frances Baard	2641	636.52	62	14.94	-25.30
	John Taolo Gaetsewe	502	184.91	25	9.21	56.25
	Namakwa	330	285.44	2	1.73	-84.62
	Pixley Ka Seme	371	175.93	7	3.32	-22.22
	ZF Mgcawu	990	353.70	27	9.65	-22.86
Western Cape	Cape Winelands	6527	693.43	35	3.72	-22.22
	Central Karoo	546	726.90	6	7.99	0.00
	City of Cape Town Metro	42911	931.84	163	3.54	-32.08
	Garden Route	6151	986.28	66	10.58	34.69
	Overberg	1610	536.83	7	2.33	-41.67
	West Coast	2011	436.40	11	2.39	-35.29

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APPENDIX

Table 14: Number of reported COVID-19 admissions and in-hospital deaths by age and gender, South Africa, 5 March 2020-08 May 2021

Age (years)	ADMISSIONS				DEATHS			
	Female	Male	Unknown	Total	Female	Male	Unknown	Total
0-4	1777	2154	10	3941	66	65	2	133
5-9	495	610	3	1108	9	13	0	22
10-14	830	802	0	1632	26	22	0	48
15-19	2590	1383	3	3976	73	68	0	141
20-24	4477	2244	5	6726	174	127	0	301
25-29	7538	3400	8	10946	384	230	2	616
30-34	10302	5959	4	16265	674	496	0	1170
35-39	11426	8127	15	19568	928	816	3	1747
40-44	10998	9529	5	20532	1181	1196	1	2378
45-49	12651	11644	13	24308	1735	1783	4	3522
50-54	14805	13072	2	27879	2390	2404	1	4795
55-59	16296	13983	7	30286	3457	3242	1	6700
60-64	14592	13032	16	27640	3946	3987	4	7937
65-69	12063	10511	10	22584	3956	3624	2	7582
70-74	9698	8460	11	18169	3349	3194	4	6547
75-79	6886	5484	6	12376	2501	2254	1	4756
80-84	5008	3464	5	8477	1958	1476	3	3437
85-89	2564	1605	1	4170	1032	757	0	1789
90-94	1156	543	1	1700	543	273	0	816
>=95	394	220	0	614	172	82	0	254
Unknown	776	655	37	1468	51	61	0	112
Total	147322	116881	162	264365	28605	26170	28	54803