

WEEKLY RESPIRATORY PATHOGENS SURVEILLANCE REPORT

SOUTH AFRICA WEEK 20 2021

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CUMULATIVE DATA FROM



HIGHLIGHTS: WEEK 20

- RSV activity continues in all provinces but 2021 RSV season has not started yet.

- Two new cases of influenza B (Victoria) from Gauteng (one) and KZN (one) were detected in this current reporting week (week20) in addition to eleven cases reported in the previous weeks. To date, influenza cases have been detected from Gauteng, Western Cape, North West and KwaZulu-Natal sentinel surveillance sites. Influenza season has not started.

- From 2 March 2020 to 23 May 2021, a total of 1 391 COVID-19 cases were detected from all surveillance programmes. An increase in number of new positive cases in week20 has been noted in both influenza-like illness (ILI) and pneumonia surveillance programmes compared to previous weeks. Of the 1 017 hospitalised COVID-19 cases reported with available data on outcome, 147 (14%) died.

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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PROGRAMME DESCRIPTIONS

Programme	Influenza-like illness (ILI)	Viral Watch	National syndromic surveillance for pneumonia
Start year	2012	1984	2009
Provinces*	KZ NW WC** MP***	EC FS GP LP MP NC NW WC	GP KZ MP NW WC
Type of site	Primary health care clinics	General practitioners	Public hospitals
Case definition	<p>ILI: An acute respiratory illness with a temperature ($\geq 38^{\circ}\text{C}$) and cough, & onset ≤ 10 days</p> <p>Suspected pertussis Any person with an acute cough illness lasting ≥ 14 days (or cough illness of any duration for children < 1 year), without a more likely diagnosis AND one or more of the following signs or symptoms:</p> <ul style="list-style-type: none"> • paroxysms of coughing, • or inspiratory “whoop”, • or post-tussive vomiting • or apnoea in children < 1 year; <p>OR</p> <p>Any person in whom a clinician suspects pertussis</p> <p>Suspected SARS-CoV-2 Any person presenting with an acute (≤ 14 days) respiratory tract infection or other clinical illness compatible with COVID-19[§]</p>	<p>ILI: An acute respiratory illness with a temperature ($\geq 38^{\circ}\text{C}$) and cough, & onset ≤ 10 days</p> <p>Suspected SARS-CoV-2 Any person presenting with an acute (≤ 14 days) respiratory tract infection or other clinical illness compatible with COVID-19[§]</p>	<p>SRI: Acute (symptom onset ≤ 10 days) or chronic (symptom onset > 10) lower respiratory tract infection</p> <p>Suspected pertussis Any person with an acute cough illness lasting ≥ 14 days (or cough illness of any duration for children < 1 year), without a more likely diagnosis AND one or more of the following signs or symptoms:</p> <ul style="list-style-type: none"> • paroxysms of coughing, • or inspiratory “whoop”, • or post-tussive vomiting • or apnoea in children < 1 year; <p>OR</p> <p>Any person in whom a clinician suspects pertussis.</p> <p>Suspected SARS-CoV-2 Any person admitted with a physician-diagnosis of suspected COVID-19 and not meeting SRI case definition.</p>
Specimens collected	Oropharyngeal & nasopharyngeal swabs	Throat and/or nasal swabs or Nasopharyngeal swabs	Oropharyngeal & nasopharyngeal swabs
Main pathogens tested****	INF RSV BP SARS-CoV-2	INF RSV BP SARS-CoV-2	INF RSV BP SARS-CoV-2

Epidemic Threshold

Thresholds are calculated using the Moving Epidemic Method (MEM), a sequential analysis using the R Language, available from: <http://CRAN.R-project.org/web/package=mem> designed to calculate the duration, start and end of the annual influenza epidemic. MEM uses the 40th, 90th and 97.5th percentiles established from available years of historical data to calculate thresholds of activity. Thresholds of activity for influenza and RSV are defined as follows: Below seasonal threshold, Low activity, Moderate activity, High activity, Very high activity. For influenza, thresholds from outpatient influenza like illness (Viral Watch Programme) are used as an indicator of disease transmission in the community and thresholds from pneumonia surveillance are used as an indicator of impact of disease.

* EC: Eastern Cape; FS: Free State; GP: Gauteng; KZ: KwaZulu-Natal; LP: Limpopo; MP: Mpumalanga; NC: Northern Cape; NW: North West; WC: Western Cape
**Started in 2019

***Started in November 2020

****INF: influenza virus; RSV: respiratory syncytial virus; BP: *Bordetella pertussis*; SARS-CoV-2: severe acute respiratory syndrome coronavirus 2

§Symptoms include ANY of the following respiratory symptoms: cough, sore throat, shortness of breath, anosmia (loss of sense of smell) or dysgeusia (alteration of the sense of taste), with or without other symptoms (which may include fever, weakness, myalgia, or diarrhoea)

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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COMMENTS

Influenza

The influenza 2021 season has not started. The first influenza positive case of 2021 was detected in pneumonia surveillance in week 9 of 2021 (week ending on the 07 March 2021).

ILI programme: In 2021 to date, specimens from 657 patients meeting ILI case definition were received from 4 ILI sites. Influenza B (Victoria) was detected in three (0.5%) patients. (Figure 1 and Table 1).

Viral Watch programme: During the same period, specimens were received from 57 patients from Viral Watch sites in three of the 8 provinces participating in surveillance. Influenza B (Victoria) was detected in one (1.8%) patient. (Figure 5 and Table 4).

Pneumonia surveillance: Since the beginning of 2021, specimens from 2 014 patients with severe respiratory illness (SRI) were received from the 6 sentinel sites. Influenza was detected in six (0.3%) patients, of which one (17%) was influenza A(H3N2) and five (83%) influenza B (Victoria). (Figure 9 and Table 7).

In addition, influenza B (Victoria) was detected in three of 357 (1%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet the pneumonia/ILI surveillance case definitions.

Respiratory syncytial virus

In 2021 to date, RSV transmission has been reported from all surveillance programmes, activity remains below seasonal threshold.

ILI programme: In 2021 to date, 657 specimens were tested and RSV was detected in specimens of 56 (9%) patients.

Viral Watch programme: During the same period, 57 specimens were tested and RSV was detected in specimens of five (9%) patients.

Pneumonia surveillance: Since the beginning of 2021, 2 014 specimens were tested and RSV was detected in specimens of 262 (13%) patients.

In addition, RSV was detected in 19 of 357 (5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet the pneumonia/ILI surveillance case definitions.

SARS-CoV-2 (Severe acute respiratory syndrome coronavirus 2)

Testing for SARS-CoV-2 was initiated in all three surveillance programmes in week 10 (week starting 2 March 2020).

ILI programme: From March 2020 to date, specimens from 1 968 patients were tested and SARS-CoV-2 was detected in 325 (17%) patients.

Viral Watch programme: From March 2020 to date, specimens were tested from 336 patients and SARS-CoV-2 was detected in 45 (13%) patients.

Pneumonia surveillance: From March 2020 to date, specimens from 5 993 patients with severe respiratory illness (SRI) were tested and SARS-CoV-2 was detected in 1 021 (17%) patients.

In addition, SARS-CoV-2 was detected in 81 of 549 (15%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet the pneumonia/ILI surveillance case definitions.

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE PRIMARY HEALTH CARE CLINICS

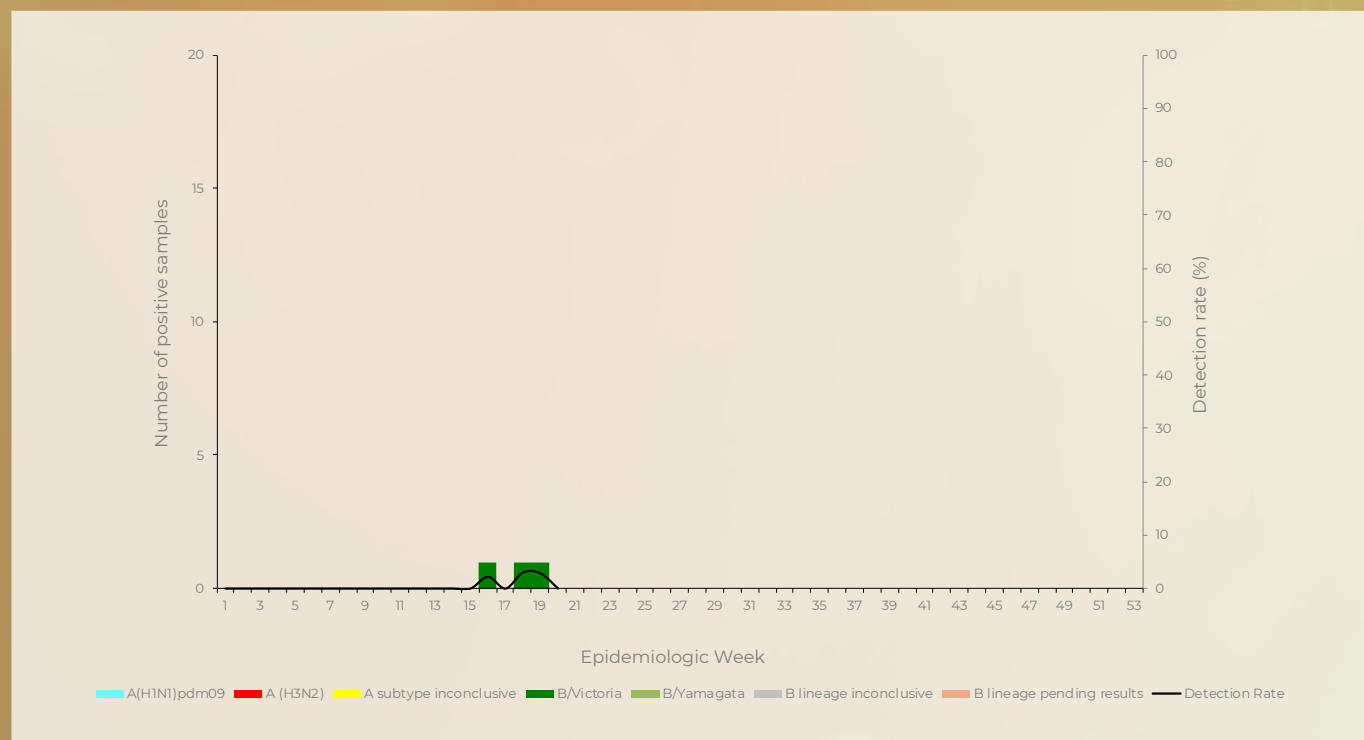


Figure 1. Number of positive samples* by influenza subtype and lineage** and detection rate*** by week

*Specimens from patients with influenza-like illnesses at 5 sentinel sites in 4 provinces

**Influenza B (Victoria) was detected from two of 280 (0.7%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet Influenza-like illness (ILI) case definition. These are not included in the epidemiological curve.

***Only reported for weeks with >10 specimens submitted

Inconclusive: insufficient viral load in sample and unable to characterise further
B lineage pending results: means influenza B results for lineage are pending

Table 1. Cumulative number of influenza subtype and lineage** and total number of samples tested by clinic and province

Clinic (Province)	A(H1N1)pdm09	A(H3N2)	A subtype inconclusive	B/Victoria	B/Yamagata	B lineage inconclusive	Total samples
Agincourt (MP)	0	0	0	0	0	0	99
Eastridge (WC)	0	0	0	0	0	0	117
Edendale Gateway (KZ)	0	0	0	2	0	0	86
Jouberton (NW)	0	0	0	1	0	0	279
Mitchell's Plain (WC)	0	0	0	0	0	0	76
Total:	0	0	0	3	0	0	657

KZ: KwaZulu-Natal; NW: North West; WC: Western Cape; MP: Mpumalanga
Inconclusive: insufficient viral load in sample and unable to characterise further

**Influenza B (Victoria) was detected from two of 280 (0.7%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet Influenza-like illness (ILI) case definition. These are not included in the table.

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE PRIMARY HEALTH CARE CLINICS

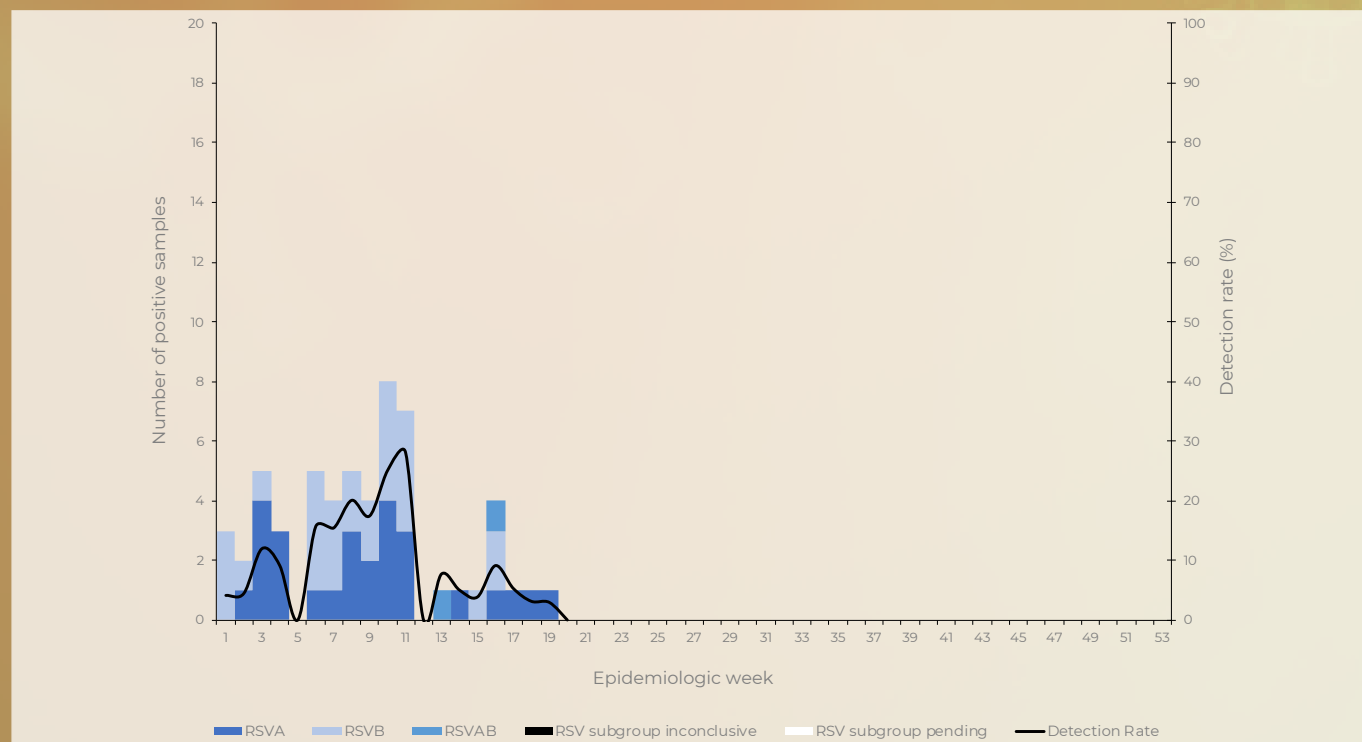


Figure 2. Number of samples testing positive for respiratory syncytial virus** by subgroup and detection rate by week

Inconclusive: insufficient viral load in sample and unable to characterise further
 RSV AB: Both RSV A and B subgroup identified
 RSV subgroup pending: means RSV results for subgroups are pending

**RSV was detected from 14 of 280 (5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet influenza-like illness (ILI) case definition. These are not included in the epidemiological curve.

Table 2. Cumulative number of respiratory syncytial virus subgroups** identified and total number of samples tested by clinic and province

Clinic (Province)	RSVA	RSVB	RSVAB	RSV subgroup inconclusive	RSV subgroup pending*	Total samples
Agincourt (MP)	11	7	1	0	0	99
Eastridge (WC)	11	0	1	0	0	117
Edendale Gateway (KZ)	1	5	0	0	0	86
Jouberton (NW)	2	15	0	0	0	279
Mitchell's Plain (WC)	2	0	0	0	0	76
Total	27	27	2	0	0	657

KZ: KwaZulu-Natal; NW: North West; WC: Western Cape; MP: Mpumalanga
 Inconclusive: insufficient viral load in sample and unable to characterise further
 RSV AB: Both RSV A and B subgroup identified
 *RSV results for subgroups are pending

**RSV was detected from 14 of 280 (5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet influenza-like illness (ILI) case definition. These are not included in the table.

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE PRIMARY HEALTH CARE CLINICS

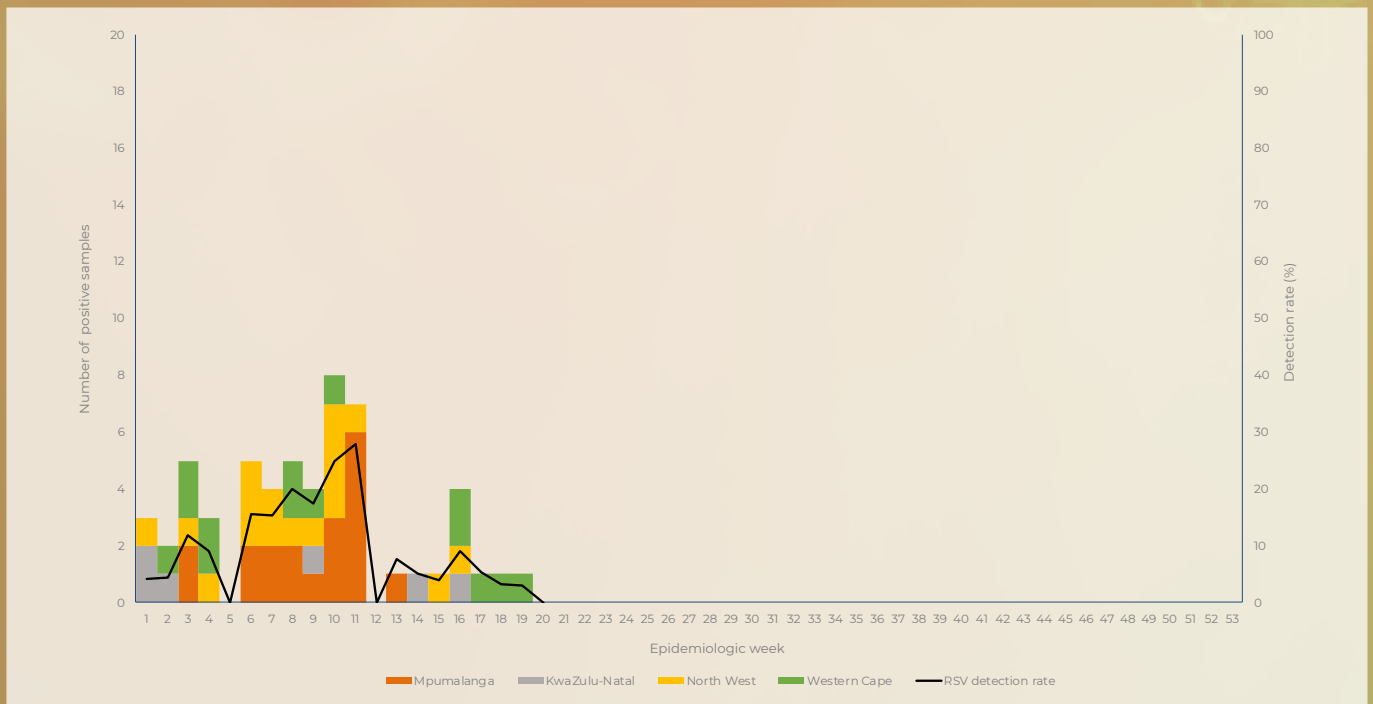


Figure 3. Number of samples testing positive for respiratory syncytial virus* by province and detection rate by week

*RSV was detected from 14 of 280 (5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet influenza-like illness (ILI) case definition. These are not included in the epidemiological curve.

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE PRIMARY HEALTH CARE CLINICS

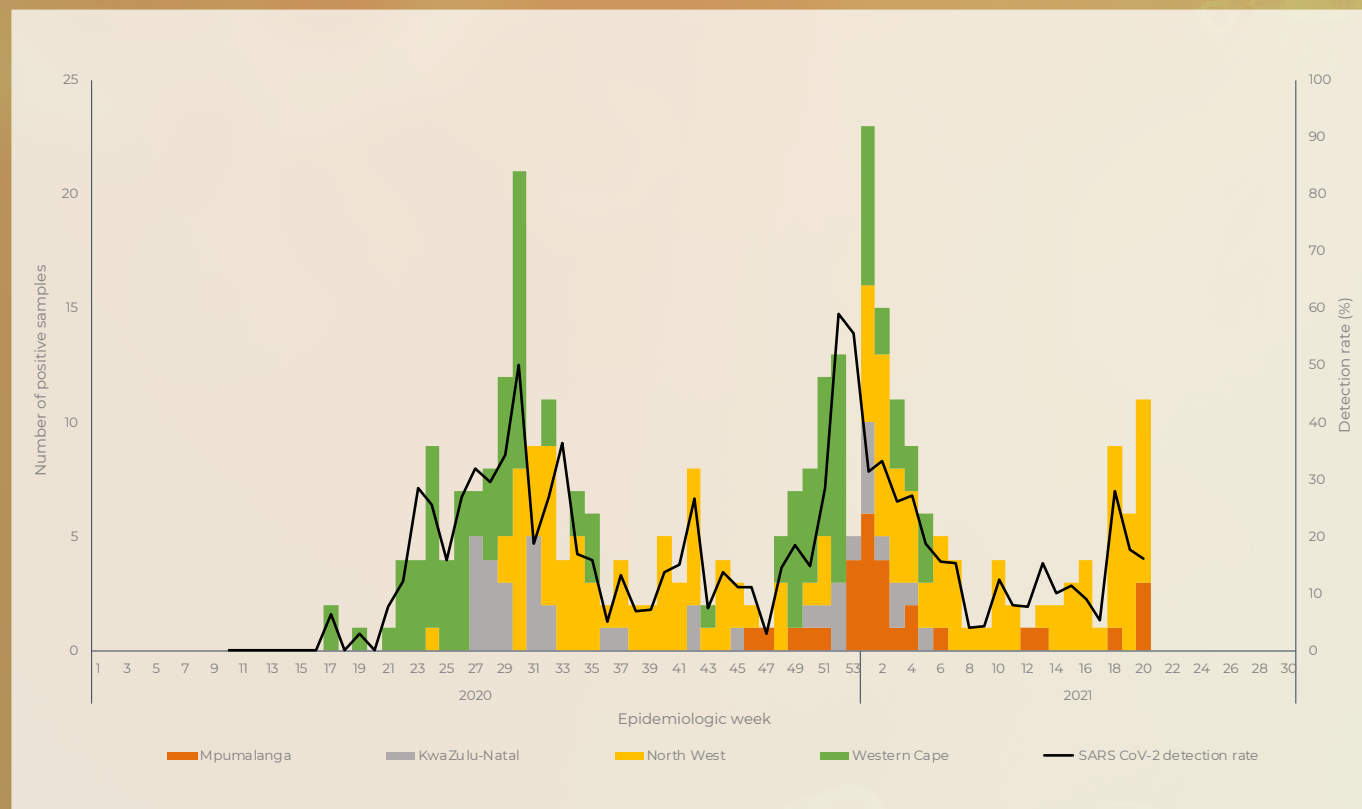


Figure 4. Number of samples testing positive for SARS-CoV-2*^p by province and detection rate by week

*Specimens from patients with influenza-like illnesses at 5 sentinel sites in 4 provinces

^pSARS-CoV-2 was detected in 60 of 410 (14.6%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet influenza-like illness (ILI) case definition. These are not included in the epidemiological curve.

Table 3. Cumulative number of SARS-CoV-2** identified and total number of samples tested by clinic and province

Clinic (Province)	SARS-CoV-2 positive	Total samples tested
Agincourt (MP)	29	129
Eastridge (WC)	47	605
Edendale Gateway (KZ)	39	227
Jouberton (NW)	145	602
Mitchell's Plain (WC)	65	405
Total:	325	1968

KZ: KwaZulu-Natal; NW: North West; WCP: Western Cape; MP: Mpumalanga (started enrolling on the 10th November 2020)

**SARS-CoV-2 was detected in 60 of 410 (14.6%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet influenza-like illness (ILI) case definition. These are not included in the table.

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE VIRAL WATCH

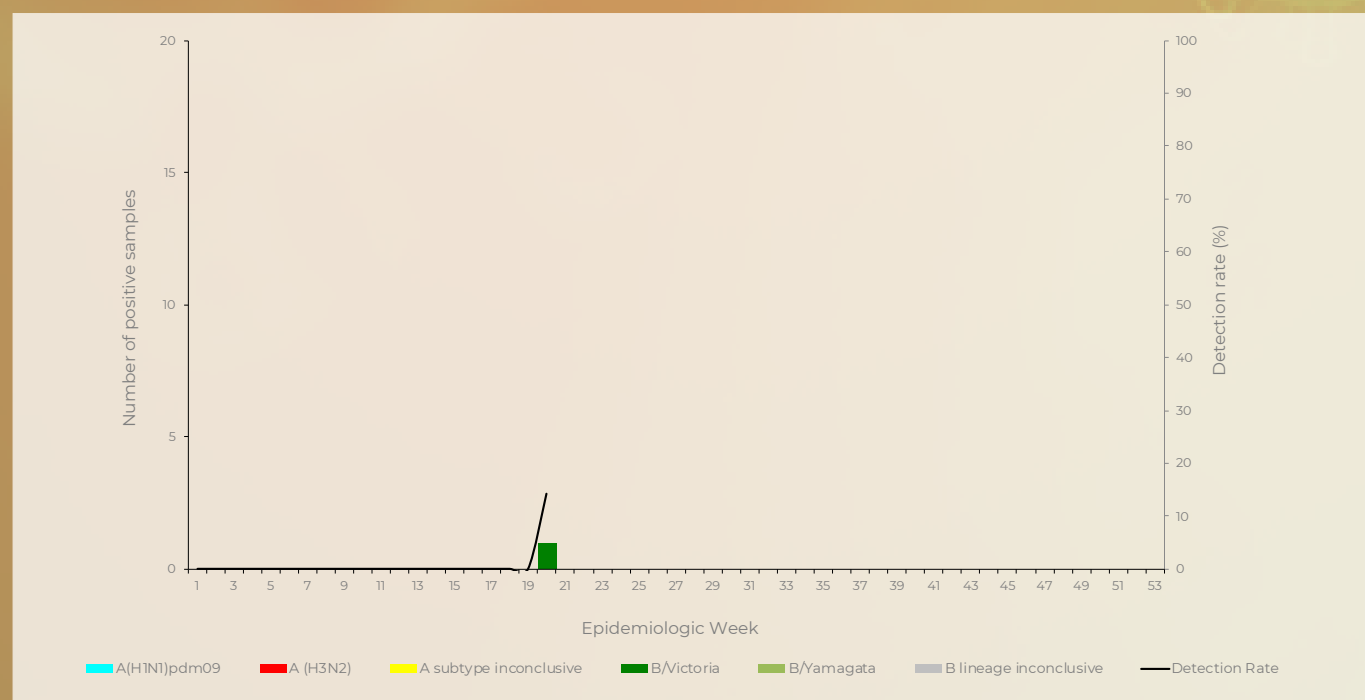


Figure 5. Number of positive samples* by influenza subtype and lineage and detection rate** by week

*Specimens from patients with Influenza-like illnesses at 92 sentinel sites in 8 provinces

** Only reported for weeks with >10 specimens submitted.

Inconclusive: insufficient viral load in sample and unable to characterise further

Table 4. Cumulative number of influenza subtype and lineage and total number of samples tested by province

Province	A(H1N1) pdm09	A(H3N2)	A subtype inconclusive	B/Victoria	B/Yamagata	B lineage inconclusive	Total samples
Eastern Cape	0	0	0	0	0	0	0
Free State	0	0	0	0	0	0	0
Gauteng	0	0	0	1	0	0	48
Limpopo	0	0	0	0	0	0	0
Mpumalanga	0	0	0	0	0	0	1
North West	0	0	0	0	0	0	0
Northern Cape	0	0	0	0	0	0	0
Western Cape	0	0	0	0	0	0	8
Total:	0	0	0	1	0	0	57

Inconclusive: insufficient viral load in sample and unable to characterise further

From 04 January 2021 to date, no patients were tested for influenza at the time of entry into South Africa following travel abroad.

Patients known to have acquired influenza abroad are not included in the table or epidemiological curve.

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE VIRAL WATCH



Figure 6. ILI surveillance (Viral Watch) percentage influenza detections and epidemic thresholds*

*Thresholds based on 2010-2019 data

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE VIRAL WATCH

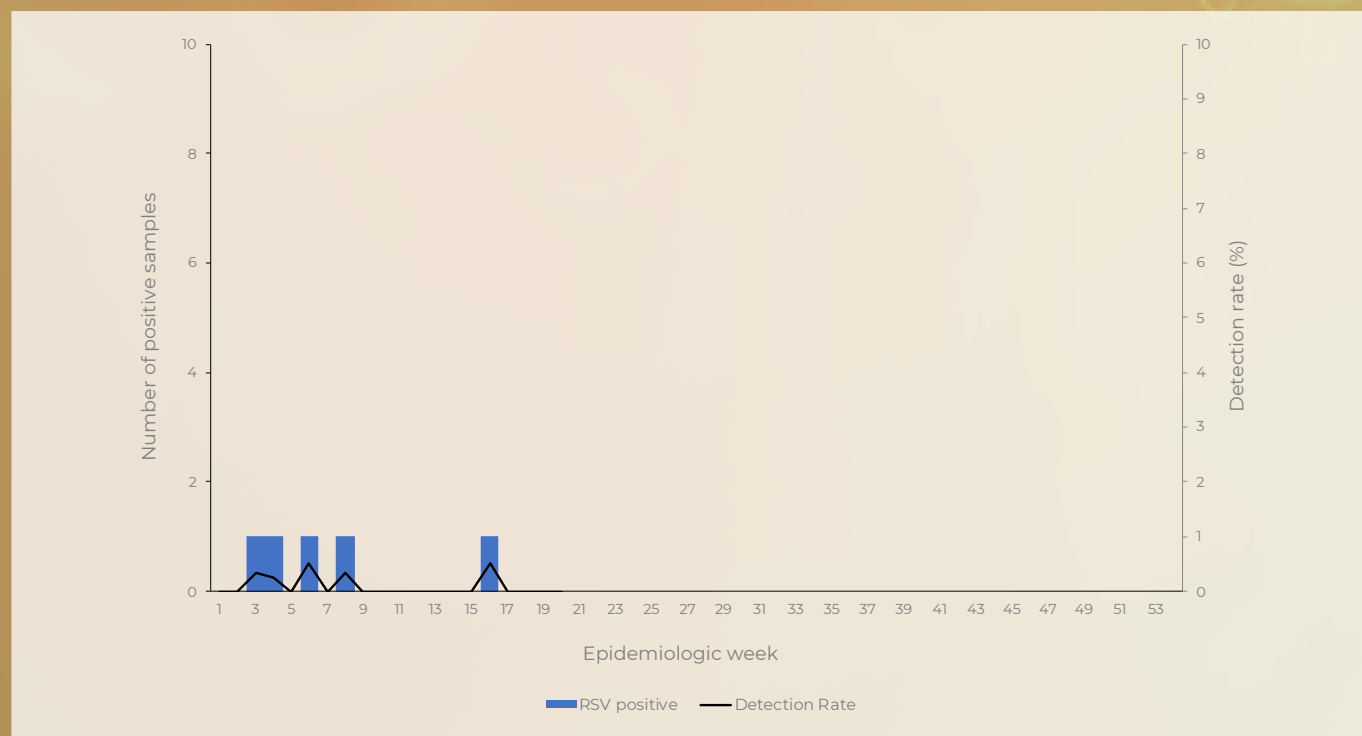


Figure 7. Number of samples testing positive for RSV*, and detection rate by week

*Specimens from patients with Influenza-like illnesses at 92 sentinel sites in 8 provinces

Table 5. Cumulative number of RSV positive cases identified and total number of samples tested by province

Province	RSV positive	Total samples tested
Eastern Cape	0	0
Free State	0	0
Gauteng	4	48
Limpopo	0	0
Mpumalanga	0	1
North West	0	0
Northern Cape	0	0
Western Cape	1	8
Total:	5	57

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INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE VIRAL WATCH

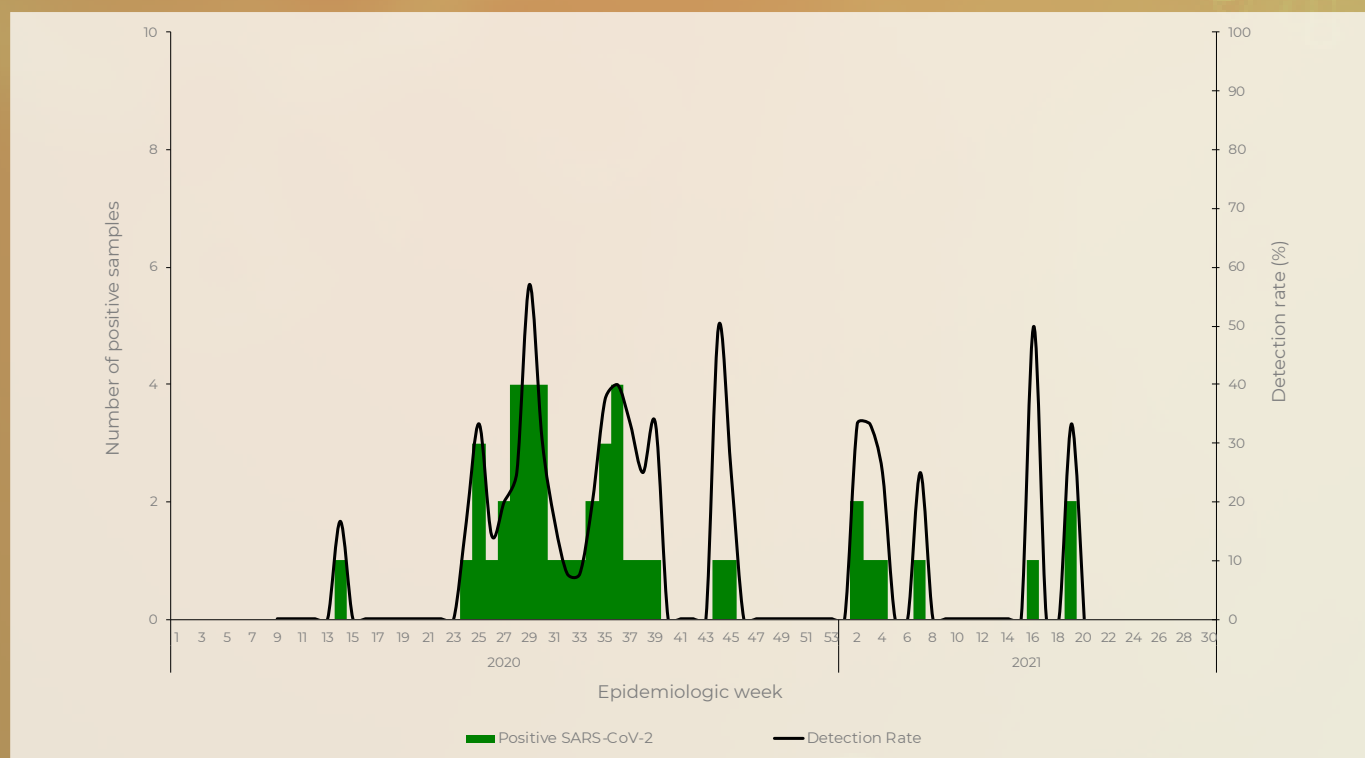


Figure 8. Number of samples testing positive for SARS-CoV-2*, and detection rate by week

*Specimens from patients with Influenza-like illnesses at 92 sentinel sites in 8 provinces

Table 6. Cumulative number of SARS-CoV-2 identified and total number of samples tested by province

Hospital (Province)	SARS-CoV-2 positive	Total samples
Eastern Cape	1	4
Free State	1	14
Gauteng	32	208
Limpopo	0	2
Mpumalanga	1	6
North West	0	0
Northern Cape	0	2
Western Cape	10	100
Total:	45	336

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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NATIONAL SYNDROMIC SURVEILLANCE FOR PNEUMONIA

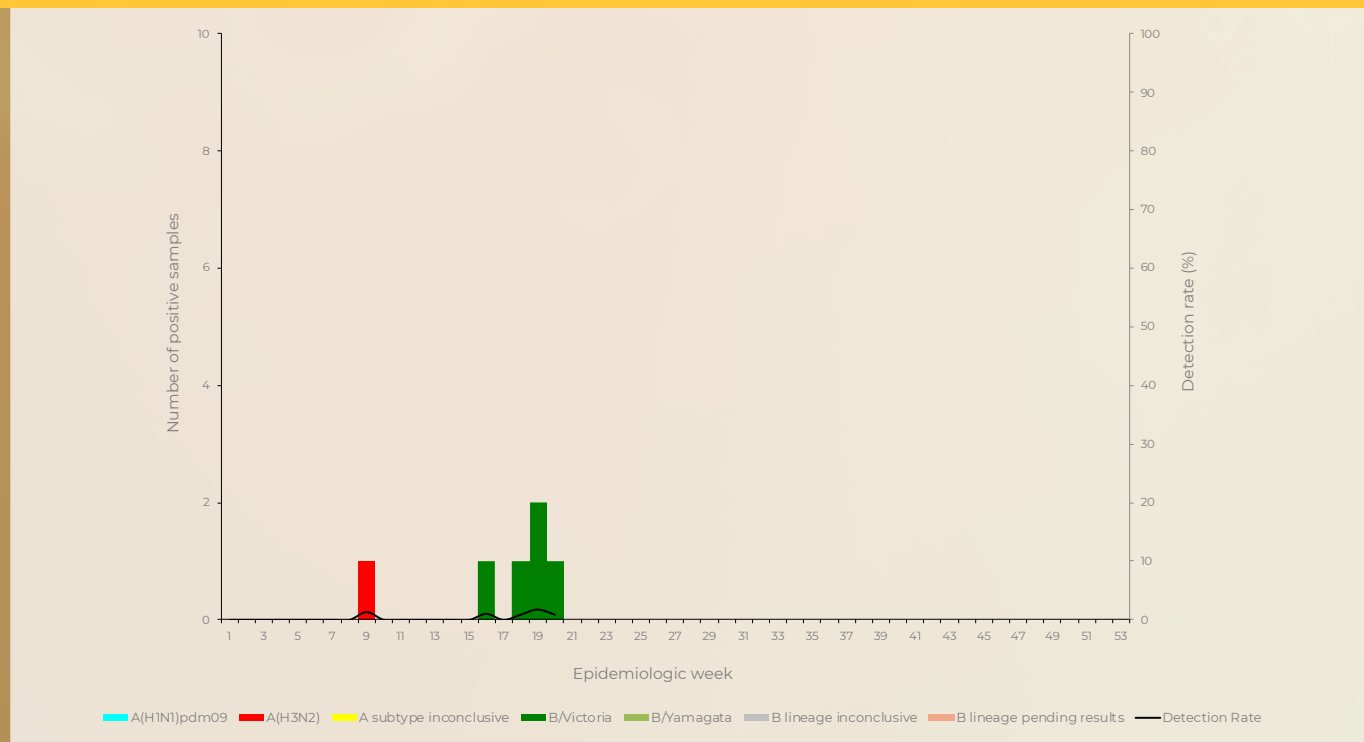


Figure 9. Number of positive samples* by influenza subtype and lineage** and detection rate*** by week

*Specimens from patients hospitalised with pneumonia at 7 sentinel sites in 5 provinces

**Influenza B(Victoria) was detected from one of 77 (1.3%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the epidemiological curve.

***Only reported for weeks with >10 specimens submitted

Inconclusive: insufficient viral load in sample and unable to characterise further

B lineage pending results: means influenza B results for lineage are pending

Table 7. Cumulative number of identified influenza subtype and lineage** and total number of samples tested by hospital

Province	A(H1N1)pdm09	A(H3N2)	A subtype inconclusive	B/Victoria	B/Yamagata	B lineage inconclusive	Total samples
Edendale (KZ)	0	0	0	2	0	0	271
Helen Joseph-Rahima Moosa (GP)	0	0	0	3	0	0	583
Klerksdorp-Tshepong (NW)	0	0	0	0	0	0	313
Mapulaneng-Matikwana (MP)	0	0	0	0	0	0	263
Red Cross (WC)	0	0	0	0	0	0	286
Mitchell's Plain (WC)	0	1	0	0	0	0	220
Tintswalo (MP)	0	0	0	0	0	0	78
Total:	0	1	0	5	0	0	2 014

GP: Gauteng; KZ: KwaZulu-Natal; NW: North West; MP: Mpumalanga (Tintswalo started enrolling on the 10th Feb 2021); WC: Western Cape
Inconclusive: insufficient viral load in sample and unable to characterise further

**Influenza B(Victoria) was detected from one of 77 (1.3%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the table.

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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NATIONAL SYNDROMIC SURVEILLANCE FOR PNEUMONIA



Figure 10. National syndromic surveillance for pneumonia percentage influenza detections and epidemic thresholds*

*Thresholds based on 2010-2019 data

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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NATIONAL SYNDROMIC SURVEILLANCE FOR PNEUMONIA

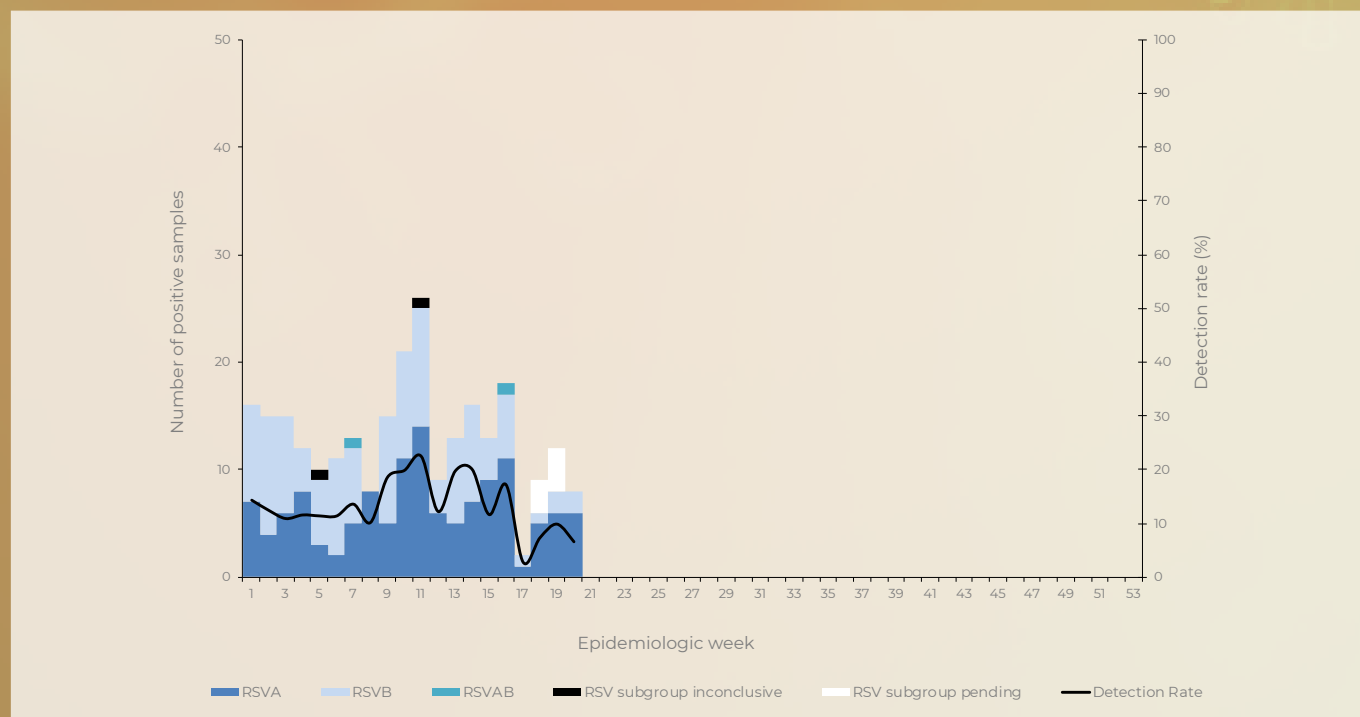


Figure 11. Number of samples testing positive for respiratory syncytial virus* by subgroup and detection rate by week

Inconclusive: insufficient viral load in sample and unable to characterise further

RSV AB: Both RSV A and B subgroup identified

RSV subgroup pending: means RSV results for subgroups are pending

*RSV was detected in five of 77 (6.5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the epidemiological curve.

Table 8: Cumulative number of respiratory syncytial virus** subgroups identified and total number of samples tested by hospital

Hospital (Province)	RSVA	RSVB	RSVAB	RSV subgroup inconclusive	RSV subgroup pending*	Total samples
Edendale (KZ)	4	22	0	0	1	271
Helen Joseph-Rahima Moosa (GP)	32	40	0	0	1	583
Klerksdorp-Tshepong (NW)	8	39	0	2	0	313
Mapulaneng-Matikwana (MP)	20	6	1	0	1	263
Red Cross (WC)	40	9	0	0	3	286
Mitchell's Plain (WC)	15	3	1	0	1	220
Tintswalo (MP)	10	3	0	0	0	78
Total:	129	122	2	2	7	2 014

GP: Gauteng; KZ: KwaZulu-Natal; NW: North West; MP: Mpumalanga (Tintswalo started enrolling on the 10th Feb 2021); WC: Western Cape

Inconclusive: insufficient viral load in sample and unable to characterise further

RSV AB: Both RSV A and B subgroup identified

*RSV results for subgroups are pending

**RSV was detected in five of 77 (6.5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the table.

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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NATIONAL SYNDROMIC SURVEILLANCE FOR PNEUMONIA

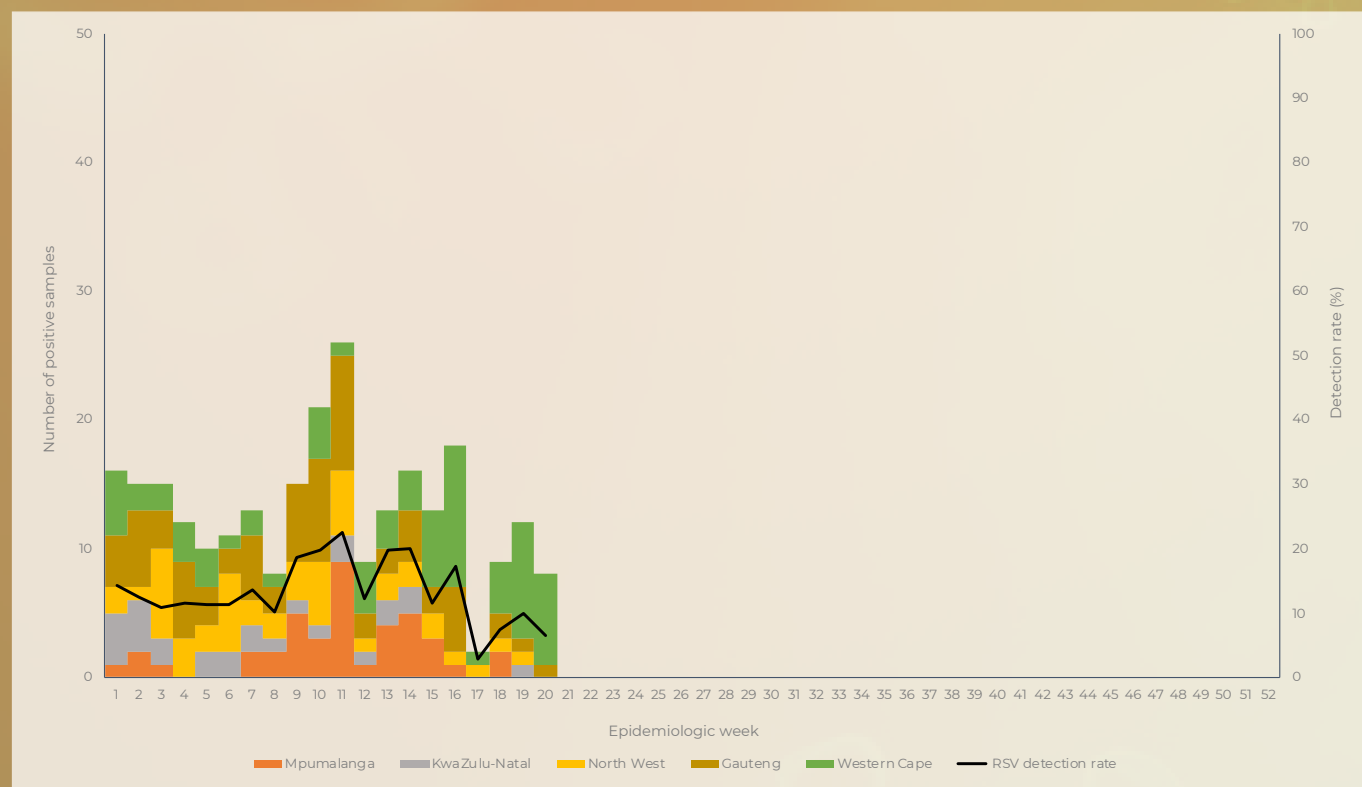


Figure 12. Number of samples testing positive for respiratory syncytial virus* by province and detection rate by week

*RSV was detected in five of 77 (6.5%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the epidemiological curve..

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NATIONAL SYNDROMIC SURVEILLANCE FOR PNEUMONIA

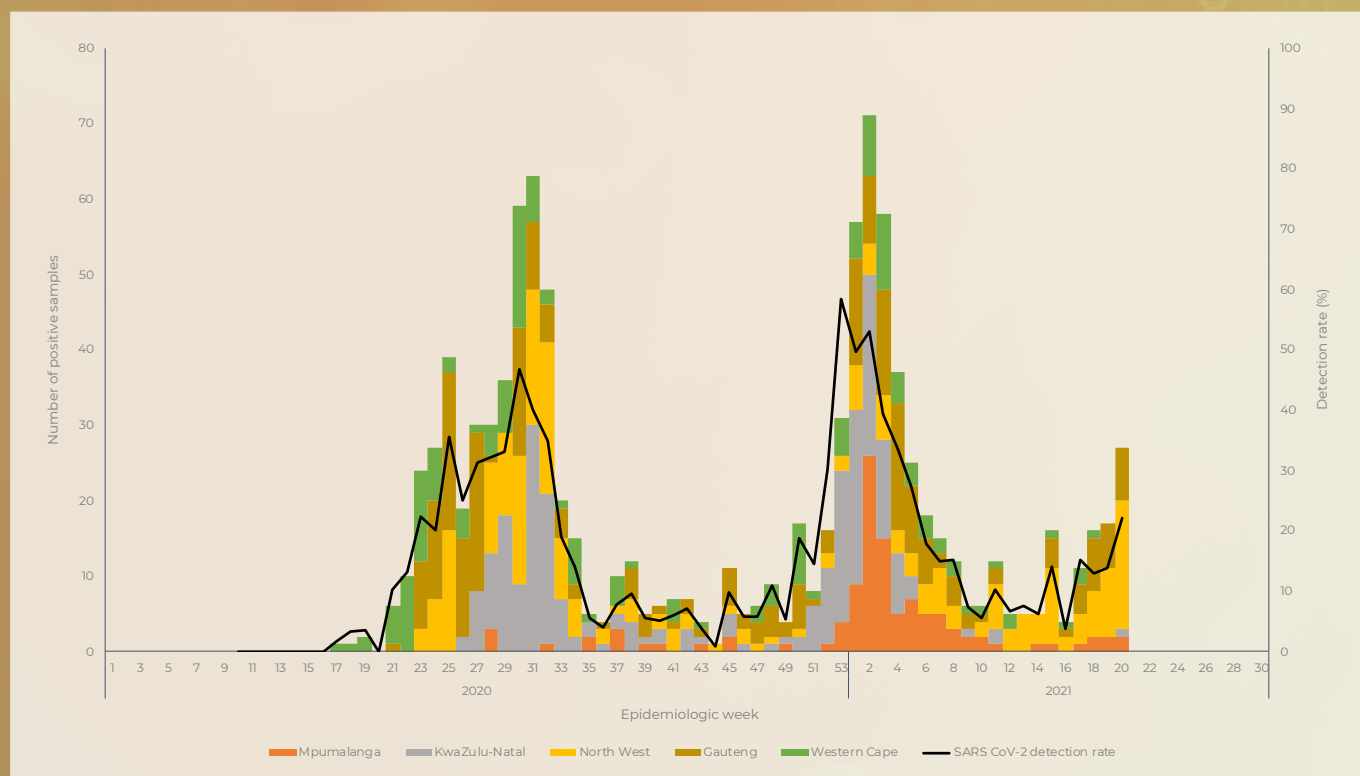


Figure 13. Number of samples testing positive for SARS-CoV-2** by province and detection rate by week

*Specimens from patients hospitalised with pneumonia at 7 sentinel sites in 5 provinces

**SARS-CoV-2 was detected in 21 of 139 (15%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the epidemiological curve.

Table 9. Cumulative number of identified SARS-CoV-2** and total number of samples tested by hospital

Hospital (Province)	SARS-CoV-2 positive	Total samples tested
Edendale (KZ)	241	1093
Helen Joseph-Rahima Moosa (GP)	264	1 421
Klerksdorp-Tshepong (NW)	244	905
Mapulaneng-Matikwana (MP)	98	565
Red Cross (WC)	43	1 244
Mitchell's Plain (WC)	120	687
Tintswalo (MP)	11	78
Total:	1 021	5 993

GP: Gauteng; KZ: KwaZulu-Natal; NW: North West; MP: Mpumalanga (Tintswalo started enrolling on the 10th Feb 2021); WC: Western Cape

**SARS-CoV-2 was detected in 21 of 135 (15%) specimens from patients who met suspected SARS-CoV-2 case definition but did not meet pneumonia (SRI) case definition. These are not included in the table.

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

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SUMMARY OF LABORATORY CONFIRMED SARS-COV-2 CASES

Table 10. Characteristics of laboratory-confirmed cases of COVID-19, enrolled in influenza-like illness (ILI) and pneumonia surveillance programmes, South Africa, 02 March 2020 – 23 May 2021

Characteristic	Influenza-like illness (ILI), public-sector, n=325 (%)	Pneumonia, n=1 021 (%)
Age group		
0-9	34/325 (10)	69/1021 (7)
10-19	25/325 (8)	7/1021 (1)
20-39	142/325 (44)	179/1021 (18)
40-59	98/325 (30)	367/1021 (36)
60-79	24/325 (7)	363/1021 (35)
≥80	2/325 (1)	36/1021 (3)
Sex-female	191/325 (59)	631/1021 (62)
Province*		
Gauteng	N/A	264/1021 (26)
KwaZulu-Natal	39/325 (12)	241/1021 (23)
Mpumalanga**	29/325 (9)	109/1021 (11)
North West	145/325 (45)	244/1021 (24)
Western Cape	112/325 (34)	163/1021 (16)
Race		
Black	227/325 (70)	858/1017 (84)
Coloured	92/325 (28)	116/1017 (12)
Asian/Indian	1/325 (<1)	23/1017 (2)
Other	5/325 (1)	20/1017 (2)
Presentation		
Fever	313/325 (96)	547/1017 (54)
Cough	322/325 (99)	983/1017 (97)
Shortness of breath	102/325 (31)	804/1017 (79)
Chest pain	137/325 (42)	430/1017 (42)
Diarrhoea	33/325 (10)	67/1017 (7)

INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS AND SARS-CoV-2 SURVEILLANCE REPORT

WEEK 20 2021

REPORTING PERIOD 2 MARCH 2020 TO 23 MAY 2021

Characteristic	Influenza-like illness (ILI), public-sector, n=325 (%)	Pneumonia, n=1 021 (%)
Underlying conditions		
Hypertension	12/325 (4)	124/1017 (12)
Cardiac	0/325 (0)	8/1017 (1)
Lung disease	0/325 (0)	1/1017 (<1)
Diabetes	7/325 (2)	215/1017 (21)
Cancer	0/325 (0)	6/1017 (1)
Tuberculosis	1/325 (<1)	28/1017 (3)
HIV-infection	46/325 (14)	213/1017 (21)
Other ***	8/325 (2)	82/1017 (8)
Management		
Oxygen therapy	2/325 (1)	743/1017 (73)
ICU admission	N/A	25/1017 (2)
Ventilation	N/A	28/1017 (3)
Outcome***		
Died	0/325 (0)	147/1017 (14)

*ILI surveillance not conducted in Gauteng province

**Mpumalanga (ILI site started enrolling on the 10th November 2020 and an additional SARI site started enrolling on the 10th February 2021)

***Chronic lung, liver and kidney disease, organ transplant, pregnancy, malnutrition, obesity, tracheostomy, prematurity, seizure, stroke, anaemia, asplenia, burns, Systemic lupus erythematosus, seizures

****Outcome includes patients who are still hospitalised, have been discharged or referred, and those who died

Note: Children may be over-represented amongst hospitalised patients due to the inclusion of a large paediatric hospital in Cape Town.

Of the 147 patients who died, 15 were in the 20-39 year age group, 43 in the 40-59 year age group, and 89 were ≥60 years; 94/147 (64%) were female. All except six were known to have underlying medical conditions.