

COVID-19 Weekly Testing Summary Week 22 of 2022

This report summarises national laboratory testing for SARS-CoV-2, the virus causing COVID-19, in South Africa. This report is based on data for specimens reported up to 4 June 2022 (Week 22 of 2022).

Highlights:

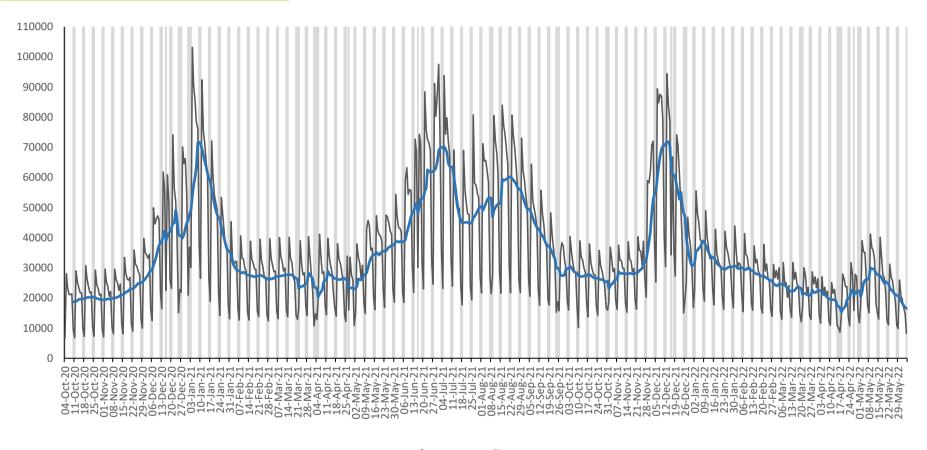
- The number of tests reported in week 22 of 2022 (115,829: 82,185 PCR and 33,644 antigen tests) was 20.9% lower than the number of tests reported in the previous week (n=146,450).
- In week 22, the testing rate was 193 per 100,000 persons; highest in Gauteng (293 per 100,000 persons) and lowest in Limpopo (32 per 100,000 persons).
- In week 22, the percentage testing positive was 11.9%, which was 4.7% lower than the previous week.
- In week 22, compared to the previous week, the percentage testing positive decreased in all provinces, except in Mpumalanga and Limpopo where it was unchanged.
- The percentage testing positive in week 22 was highest in the Western Cape (20.7%) and lowest in KwaZulu-Natal (7.9%). The percentage testing positive was between 10-20% in all other provinces.
- In week 22, the percentage testing positive was highest in the ≥80 years age group (18.9%).

Executive Summary:

- In the period 1 March 2020 through 4 June 2022, 25,106,202 tests for SARS-CoV-2 have been reported nationally: 20,536,704 PCR and 4,569,498 antigen tests.
- The number of tests reported in week 22 of 2022 (n=115,829: 82,185 PCR and 33,644 antigen tests) was 20.9% lower than the number of tests reported in the previous week (n=146,450 in week 21).
- Gauteng reported the largest proportion of tests (40.0%), followed by KwaZulu-Natal (19.8%) and Western Cape (13.3%).
- The overall testing rate decreased from the previous week (244 per 100,000 persons in week 21 to 193 per 100,000 persons in week 22).
- In week 22, testing rates decreased in all provinces and were highest in Gauteng (293 per 100,000 persons) and lowest in Limpopo (32 per 100,000 persons).
- The testing rate in week 22 was highest in the ≥80 years age group (442 per 100,000 persons).
- In week 22, the percentage testing positive was 11.9%, which was 4.7% lower than the previous week (16.6% in week 21 to 11.9% in week 22, P<0.001).
- In the past week, the percentage testing positive decreased by 3.7% in the public sector (13.0% in week 21 to 9.3% in week 22, P<0.001) and by 6.0% in the private sector (19.7% in week 21 to 13.7% in week 22, P<0.001).
- In week 22, compared to the previous week, the percentage testing positive decreased in all provinces, except in Mpumalanga and Limpopo where it was unchanged.

- The percentage testing positive in week 22 was highest in the Western Cape (20.7%) and lowest in KwaZulu-Natal (7.9%). The percentage testing positive was between 10-20% in all other provinces.
- In week 22, health sub-districts showing the highest percentage testing positive were concentrated in the Western Cape (n=15) and Northern Cape (n=5).
- In week 22, the percentage testing positive continued to decreased in all age groups and was highest in the ≥80 years age group (18.9%).
- Antigen tests accounted for 29.0% (33,644/115,829) of tests reported in week 22, however the number of antigen tests is likely underestimated due to under-reporting and delayed reporting of antigen tests.
- In week 22 the public sector accounted for 50.1% (16,856/33,644) of antigen tests reported and a decrease in the number of antigen tests reported was observed in all provinces in the past week.
- The mean turnaround time for PCR tests reported in week 22 was 0.8 days; 1.1 days in the public sector and 0.6 days in the private sector. Turnaround times for public sector PCR tests increased in Mpumalanga and were <2 days in all provinces.
- The mean turnaround time for antigen tests reported in week 22 was 11.1 days in the public sector and 0.1 days in the private sector.

Number of tests



Date of specimen collection

Figure 1. Number of SARS-CoV-2 tests reported by date of specimen collection, South Africa, 4 October 2020 – 4 June 2022. Blue line shows the 7-day moving average of the number of tests reported. Grey bars highlight weekend days and public holidays



Table 1. Weekly number of SARS-CoV-2 tests and positive tests reported, South Africa, 3 January 2021 – 4 June 2022

Week	Week	No. of tests	No. of positive	Percentage testing	
number	beginning	n (%)	tests	positive (%)	
1	03-Jan-21	501386 (2.0)	151074	30.1	
2	10-Jan-21	418301 (1.7)	104825	25.1	
3	17-Jan-21	327534 (1.3)	63283	19.3	
4	24-Jan-21	249623 (1.0)	34652	13.9	
5	31-Jan-21	203797 (0.8)	22380	11.0	
6	07-Feb-21	193340 (0.8)	16476	8.5	
7	14-Feb-21	190714 (0.8)	12192	6.4	
8	21-Feb-21	184731 (0.7)	10390	5.6	
9	28-Feb-21	189731 (0.8)	8695	4.6	
10	07-Mar-21	193454 (0.8)	8341	4.3	
11	14-Mar-21	185527 (0.7)	8156	4.4	
12	21-Mar-21	173275 (0.7)	7356	4.2	
13	28-Mar-21	163975 (0.7)	7063	4.3	
14	04-Apr-21	180875 (0.7)	7292	4.0	
15	11-Apr-21	185350 (0.7)	8847	4.8	
16	18-Apr-21	184922 (0.7)	9471	5.1	
17	25-Apr-21	160025 (0.6)	9183	5.7	
18	02-May-21	193978 (0.8)	13464	6.9	
19	09-May-21	240329 (1.0)	19939	8.3	
20	16-May-21	248497 (1.0)	24212	9.7	
21	23-May-21	262638 (1.0)	29778	11.3	
22	30-May-21	270321 (1.1)	36111	13.4	
23	06-Jun-21	337915 (1.3)	59453	17.6	
24	13-Jun-21	370991 (1.5)	88088	23.7	
25	20-Jun-21	432624 (1.7)	118655	27.4	
26	27-Jun-21	490253 (2.0)	146641	29.9	
27	04-Jul-21	444061 (1.8)	141464	31.9	
28	11-Jul-21	320775 (1.3)	100958	31.5	
29	18-Jul-21	313235 (1.2)	88448	28.2	
30	25-Jul-21	350770 (1.4)	88361	25.2	
31	01-Aug-21	372330 (1.5)	88138	23.7	
32	08-Aug-21	359628 (1.4)	83386	23.2	
33	15-Aug-21	420976 (1.7)	95407	22.7	
34	22-Aug-21	392676 (1.6)	78209	19.9	
35	29-Aug-21	346112 (1.4)	55099	15.9	
36	05-Sep-21	300491 (1.2)	38858	12.9	
37	12-Sep-21	260675 (1.0)	24018	9.2	

	Total	25,106,202 (100.0)	4,306,257	
22	29-May-22	115829 (0.5)	13742	11.9
21	22-May-22	146450 (0.6)	24366	16.6
20	15-May-22	175519 (0.7)	38239	21.8
19	08-May-22	194547 (0.8)	48435	24.9
18	01-May-22	183357 (0.7)	47538	25.9
17	24-Apr-22	155937 (0.6)	33820	21.7
16	17-Apr-22	138541 (0.6)	24130	17.4
15	10-Apr-22	119944 (0.5)	12269	10.2
14	03-Apr-22	138066 (0.5)	10600	7.7
13	27-Mar-22	157470 (0.6)	10255	6.5
12	20-Mar-22	146300 (0.6)	9455	6.5
11	13-Mar-22	163626 (0.7)	9873	6.0
10	06-Mar-22	155485 (0.6)	10680	6.9
9	27-Feb-22	172706 (0.7)	13137	7.6
8	14-Feb-22	180754 (0.7)	16309	9.0
7	13-Feb-22	191222 (0.8)	19090	10.0
6	06-Feb-22	203168 (0.8)	20422	10.1
5	24-Jan-22	210151 (0.8)	22969	10.9
4	23-Jan-22	212566 (0.8)	25816	12.1
3	16-Jan-22	208449 (0.8)	24078	11.6
2	09-Jan-22	234374 (0.9)	35137	15.0
1	02-Jan-22	272539 (1.1)	61132	22.4
52	20-Dec-21	216580 (0.9)	66110	30.5
51	19-Dec-21	337104 (1.3)	117673	34.9
50	12-Dec-21	424498 (1.7)	154922	36.5
49	05-Dec-21	493266 (2.0)	175125	35.5
48	28-Nov-21	381997 (1.5)	98429	25.8
47	21-Nov-21	224596 (0.9)	18976	8.4
46	14-Nov-21	197174 (0.8)	4813	2.4
45	07-Nov-21	196681 (0.8)	2323	1.2
44	31-Oct-21	182933 (0.7)	2106	1.2
43	24-Oct-21	177207 (0.7)	2566	1.4
42	17-Oct-21	185608 (0.7)	3412	1.8
41	10-Oct-21	191773 (0.8)	5044	2.6
40	03-Oct-21	197962 (0.8)	6454	3.3
39	26-Sep-21	207828 (0.8)	9491	4.6
38	19-Sep-21	209091 (0.8)	14012	6.7

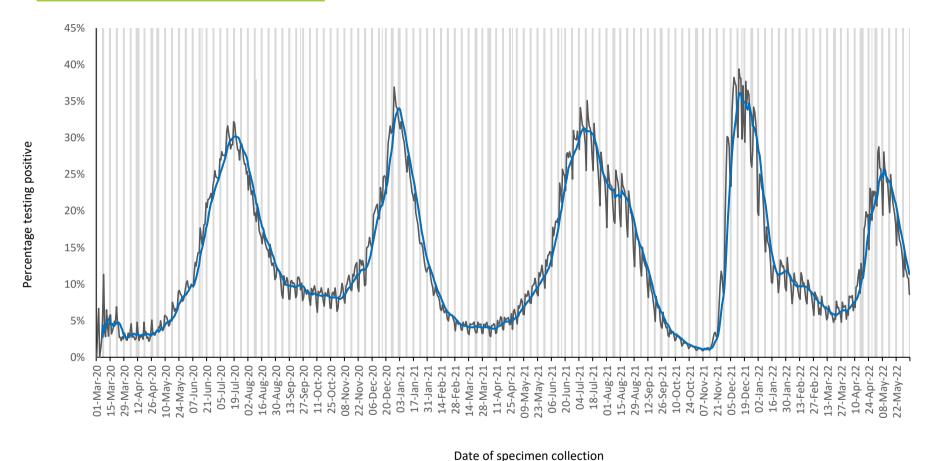


Figure 2. Percentage of tests positive for SARS-CoV-2 by date of specimen collection South Africa 1 March 2020 – 4 June 2022. Blue line shows the 7-day moving average of the percentage testing positive. Grey bars highlight weekend days and public holidays.

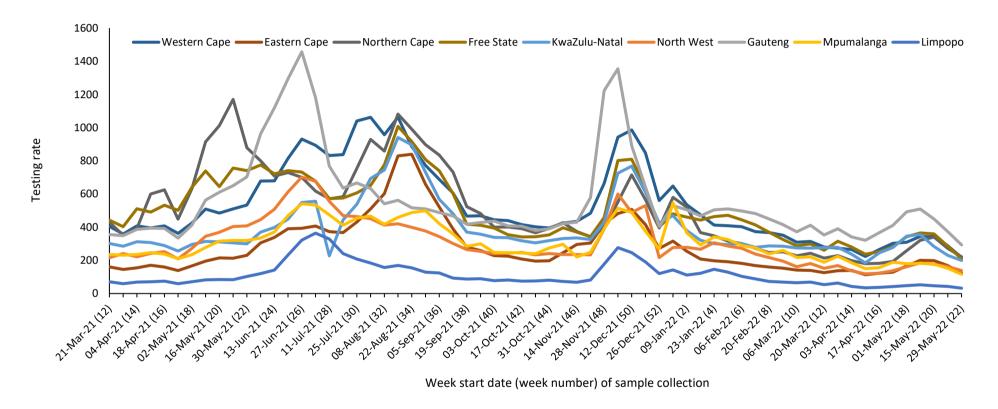


Figure 3. Testing rate per 100000 persons by province and week of specimen collection, South Africa, 21 March 2021 – 4 June 2022



Table 2. Weekly number of tests and positive tests reported by province South Africa 15 May – 4 June 2022

		15-	21 May 2022	2 22-28 May 2022 29 May - 4 Jun 2022		2022	Change in percentage positive		
Province	Population ^a	No. of tests	No. positive tests (%)	No. of tests	No. positive tests (%)	No. of tests	No. positive tests (%)	Testing rate per 100000	from previous week ^b
Western Cape	7113776	24327	8053 (33.1)	20519	5992 (29.2)	15439	3197 (20.7)	217	-8.5%
Eastern Cape	6676590	13233	3207 (24.2)	11251	2166 (19.3)	8140	1242 (15.3)	122	-4.0%
Northern Cape	1303047	4428	1492 (33.7)	3537	843 (23.8)	2883	519 (18.0)	221	-5.8%
Free State	2932441	10557	2492 (23.6)	8376	1424 (17.0)	6135	789 (12.9)	209	-4.1%
KwaZulu-Natal	11513575	32674	5926 (18.1)	26506	3437 (13.0)	22959	1815 (7.9)	199	-5.1%
North West	4122854	7265	1348 (18.6)	6700	993 (14.8)	5703	594 (10.4)	138	-4.4%
Gauteng	15810388	70973	13936 (19.6)	59025	8260 (14.0)	46376	4687 (10.1)	293	-3.9%
Mpumalanga	4743584	8391	1300 (15.5)	7198	869 (12.1)	5509	633 (11.5)	116	-0.6%
Limpopo	5926724	2801	337 (12.0)	2544	274 (10.8)	1908	204 (10.7)	32	-0.1%
Unknown		870	148 (17.0)	794	108 (13.6)	777	62 (8.0)		
Total	60142978	175519	38239 (21.8)	146450	24366 (16.6)	115829	13742 (11.9)	193	-4.7%

^a 2021 Mid-year population Statistics SA

^b Current week compared to previous week

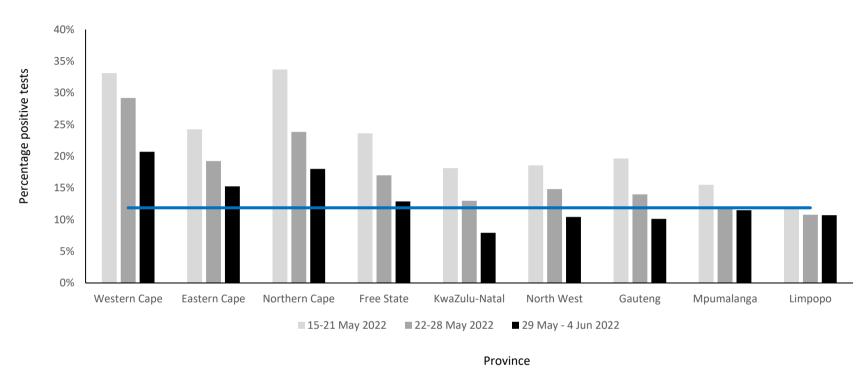


Figure 4. Weekly percentage testing positive by province, South Africa,29 May – 4 Jun 2022. The horizontal blue line shows the national mean for week 22, beginning 29 May 2022

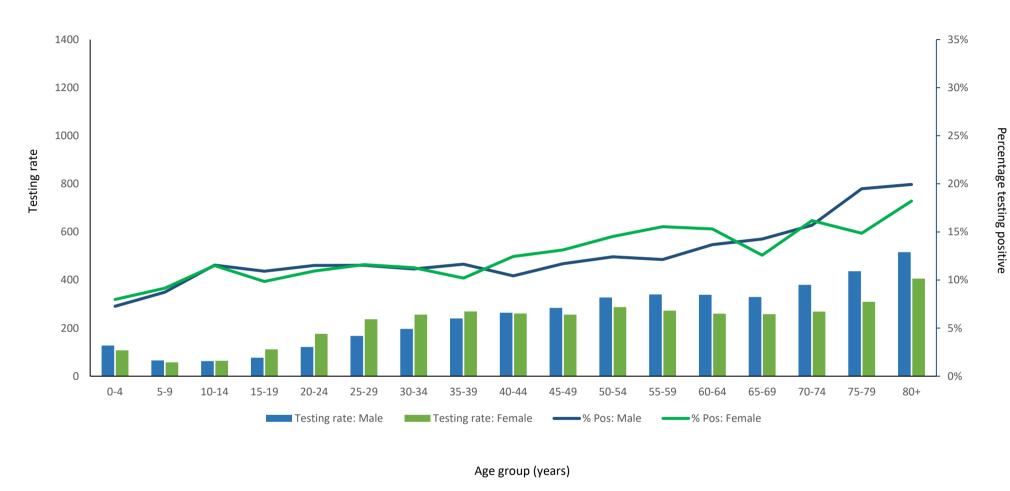
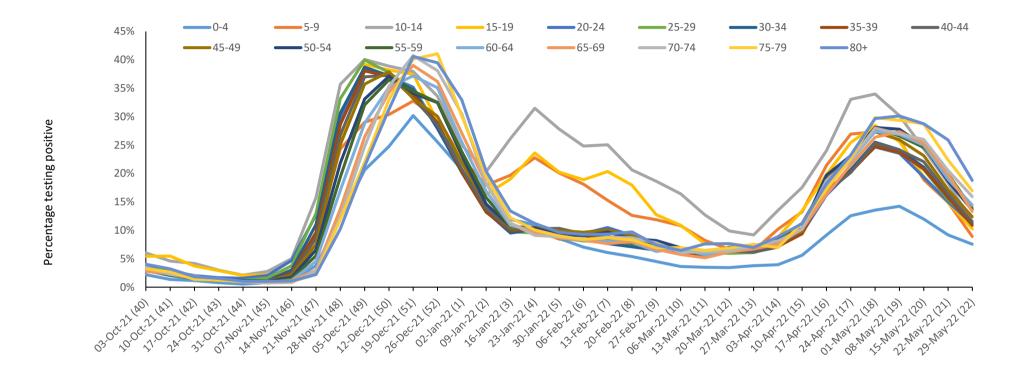


Figure 5. Testing rates per 100000 persons and percentage testing positive by age group and sex, South Africa, week 22, 29 May – 4 June 2022



Week start date (week number) of sample collection

Figure 6. Percentage testing positive by age group and week of specimen collection, South Africa, 3 October 2021 – 4 June 2022



Table 3. Health sub-districts with the highest proportion testing positive based on public and private sector data for the week of 29 May - 4 June 2022

Health district or sub-district	Province	PTP (95% CI)	Previous week
Cape Agulhas	Western Cape	0.456 (0.321-0.592)	0.667 (0.554-0.781)
Randfontein	Gauteng	0.360 (0.319-0.402)	0.516 (0.484-0.548)
Hantam	Northern Cape	0.302 (0.174-0.430)	0.484 (0.388-0.581)
CT Northern	Western Cape	0.291 (0.265-0.316)	0.348 (0.324-0.373)
Nama Khoi	Northern Cape	0.291 (0.244-0.337)	0.222 (0.183-0.261)
Witzenberg	Western Cape	0.284 (0.175-0.394)	0.286 (0.203-0.369)
Tsantsabane	Northern Cape	0.284 (0.163-0.405)	0.360 (0.214-0.506)
Saldanha Bay	Western Cape	0.282 (0.229-0.335)	0.395 (0.347-0.442)
Knysna	Western Cape	0.273 (0.176-0.369)	0.311 (0.213-0.408)
George	Western Cape	0.269 (0.232-0.307)	0.403 (0.364-0.442)
Swartland	Western Cape	0.262 (0.141-0.384)	0.257 (0.162-0.351)
Drakenstein	Western Cape	0.257 (0.219-0.296)	0.317 (0.283-0.352)
Breede Valley	Western Cape	0.257 (0.211-0.303)	0.281 (0.236-0.325)
Phokwane	Northern Cape	0.246 (0.097-0.394)	•••
Mossel Bay	Western Cape	0.241 (0.196-0.286)	0.332 (0.290-0.374)
Overstrand	Western Cape	0.240 (0.185-0.295)	0.316 (0.268-0.365)
Nkonkobe	Eastern Cape	0.237 (0.123-0.352)	0.123 (0.030-0.216)
Karoo Hoogland	Northern Cape	0.230 (0.104-0.355)	0.227 (0.113-0.342)
Setsoto	Free State	0.228 (0.096-0.360)	0.112 (0.027-0.197)
Bitou	Western Cape	0.227 (0.131-0.324)	0.314 (0.211-0.418)
Matzikama	Western Cape	0.225 (0.153-0.298)	0.254 (0.187-0.320)
Makana	Eastern Cape	0.225 (0.133-0.316)	0.184 (0.121-0.247)
Kou-Kamma	Eastern Cape	0.224 (0.106-0.342)	0.119 (0.036-0.203)
Oudtshoorn	Western Cape	0.221 (0.142-0.300)	0.306 (0.236-0.377)
Theewaterskloof	Western Cape	0.220 (0.118-0.322)	0.230 (0.147-0.313)

95% CI: 95% confidence interval; PTP: adjusted positive test proportion; Elements marked in red have current week proportions testing positive that are higher than and CIs that do not overlap with the previous week proportions and CIs. Elements marked in blue have current week proportions testing positive that are lower than and CIs that do not overlap with the previous week proportions and CIs

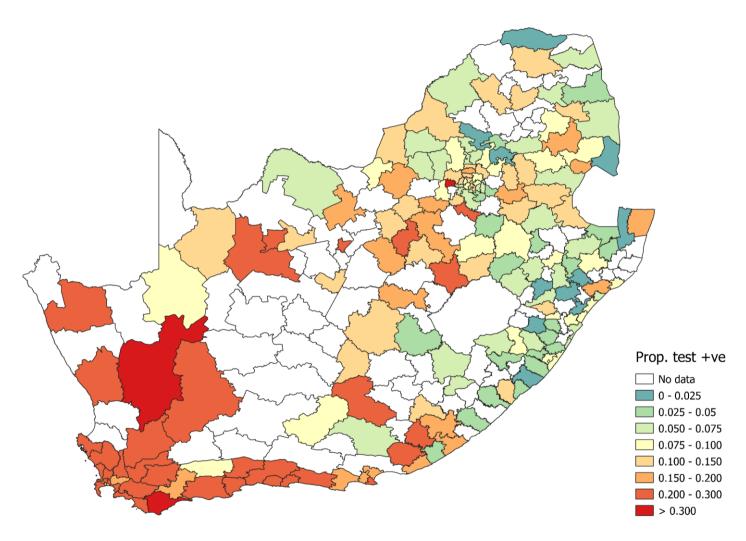


Figure 7. Proportion testing positive by health sub-district in South Africa for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

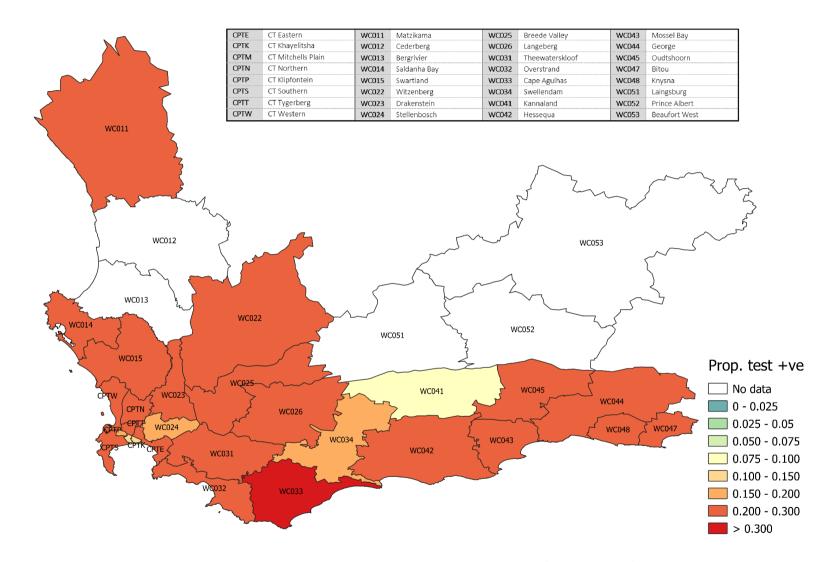


Figure 8. Proportion testing positive by health sub-district in the Western Cape Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%

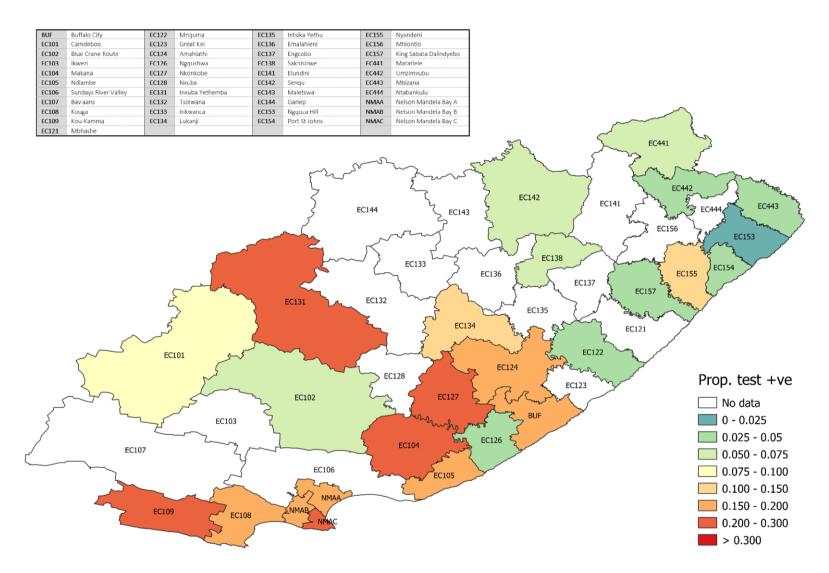


Figure 9. Proportion testing positive by health sub-district in the Eastern Cape Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

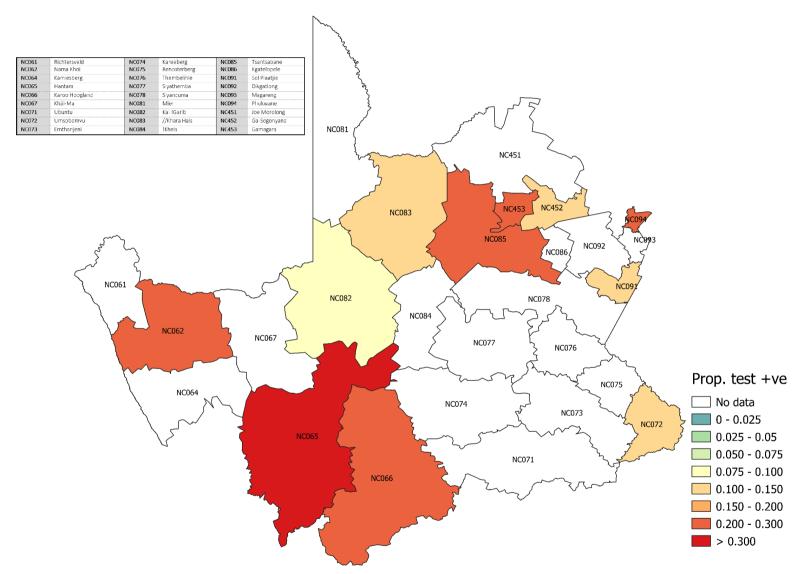


Figure 10. Proportion testing positive by health sub-district in Northern Cape Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

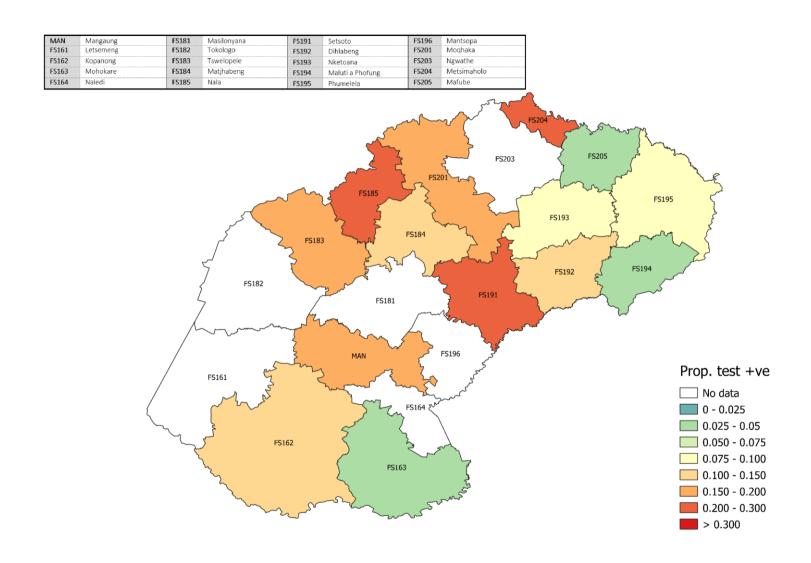


Figure 11. Proportion testing positive by health sub-district in Free State Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

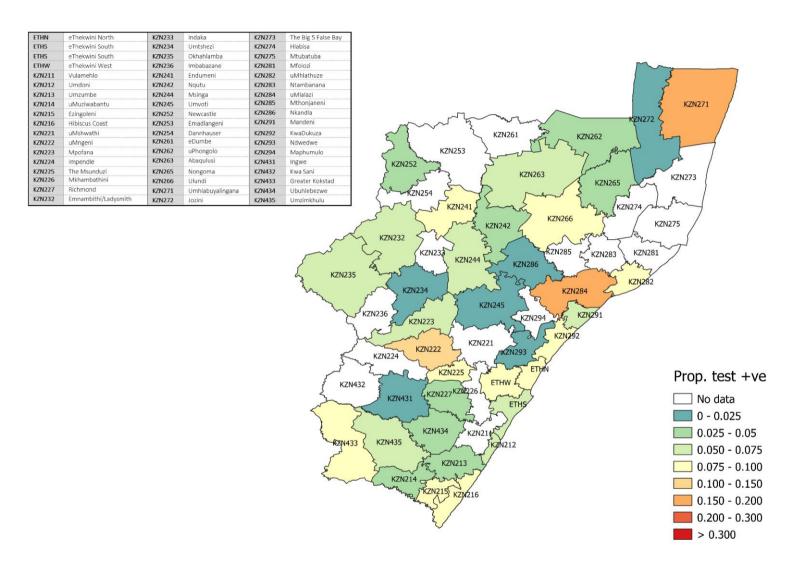


Figure 12. Proportion testing positive by health sub-district in KwaZulu-Natal Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

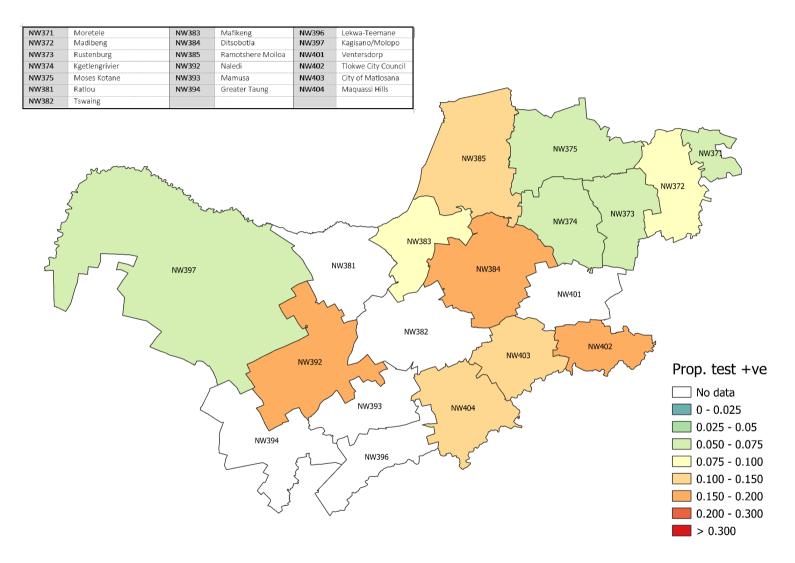


Figure 13. Proportion testing positive by health sub-district in North West Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

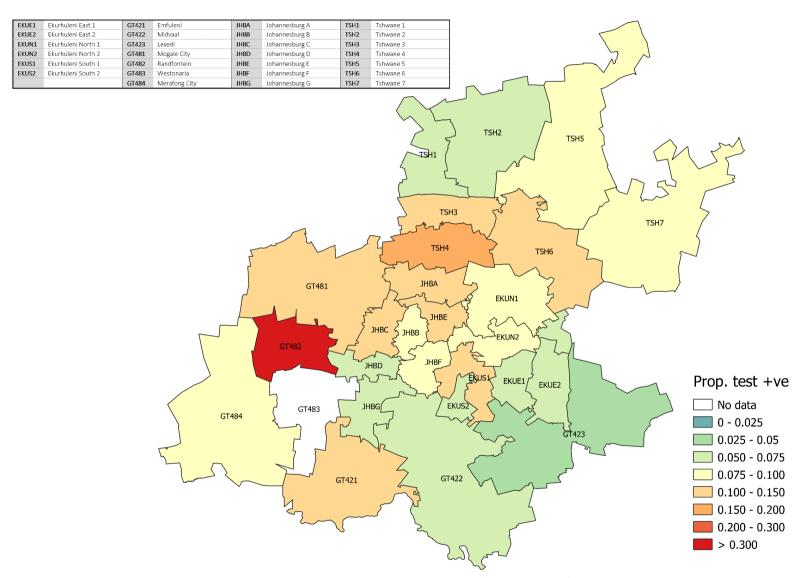


Figure 14. Proportion testing positive by health sub-district in Gauteng Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

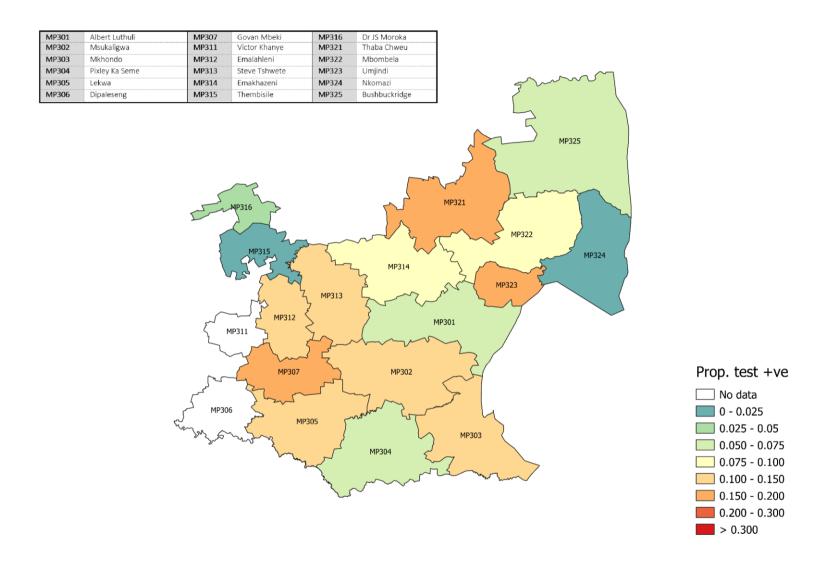


Figure 15. Proportion testing positive by health sub-district in Mpumalanga Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

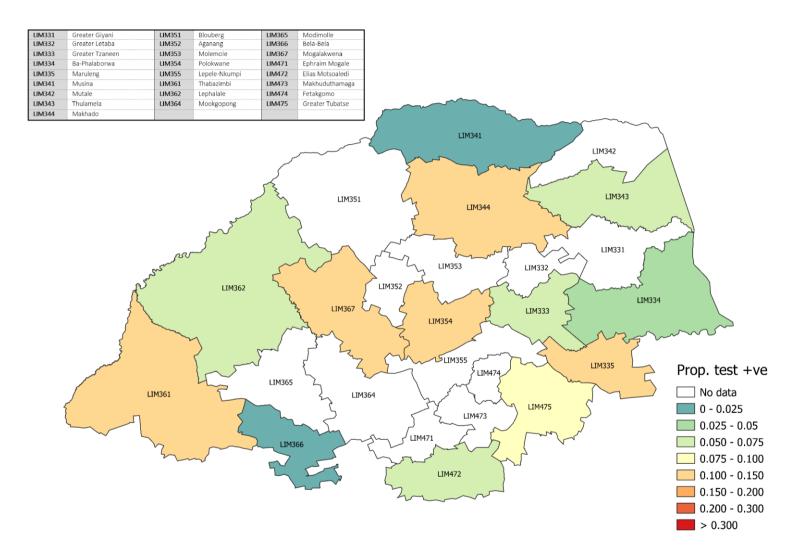


Figure 16. Proportion testing positive by health sub-district in Limpopo Province for the week of 29 May – 4 June 2022. Areas shaded white represent districts in which either (i) no tests were reported (ii) all tests were negative or (iii) the confidence interval exceeded 30%.

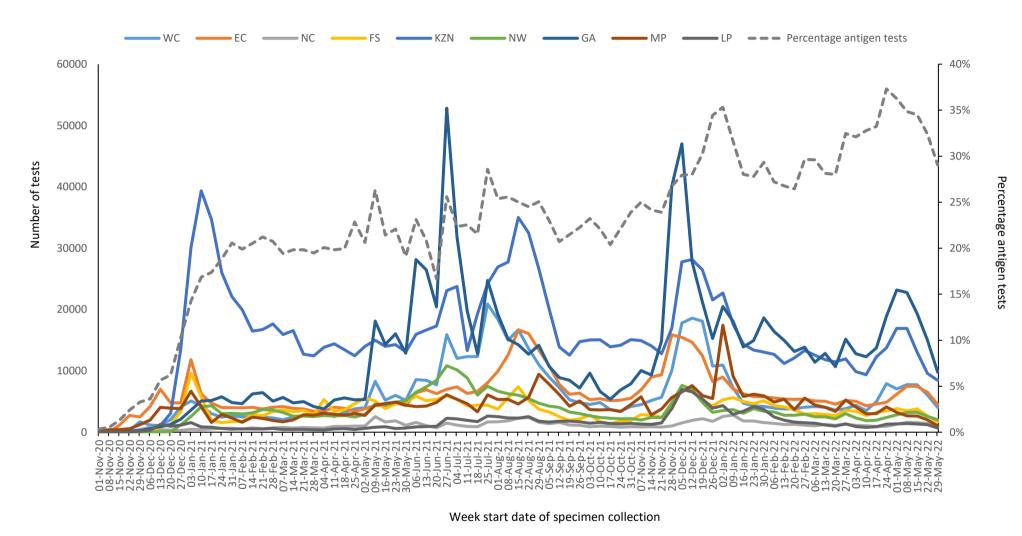


Figure 17. Number of antigen tests by province and overall percentage antigen tests, South Africa, 1 November 2020 – 4 June 2022. WC Western Cape; EC Eastern Cape; FS Free State; KZN KwaZulu-Natal; GA Gauteng; NC Northern Cape; NW North West; MP Mpumalanga; LP Limpopo

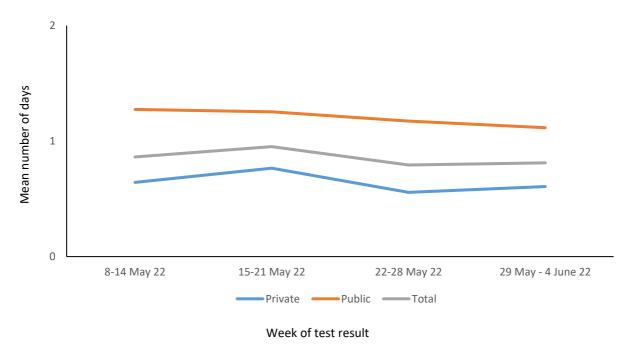


Figure 18. Mean number of days between date of specimen collection and date of test result for PCR tests by week of test result, South Africa, 8 May – 4 June 2022.

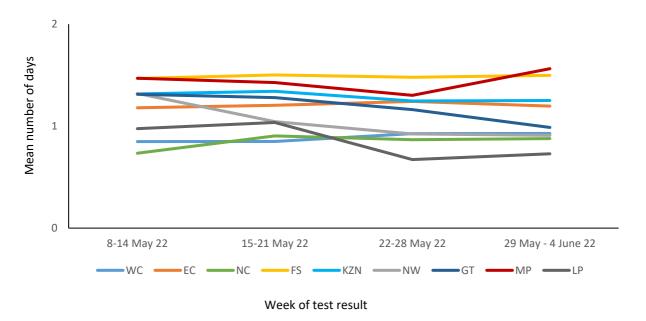


Figure 19. Mean number of days between date of specimen collection and date of test result for PCR tests in the public sector by week of test result and province, South Africa, 8 May – 4 June 2022. WC Western Cape; EC Eastern Cape; FS Free State; KZN KwaZulu-Natal; GT Gauteng; NC Northern Cape; NW North West; MP Mpumalanga; LP Limpopo

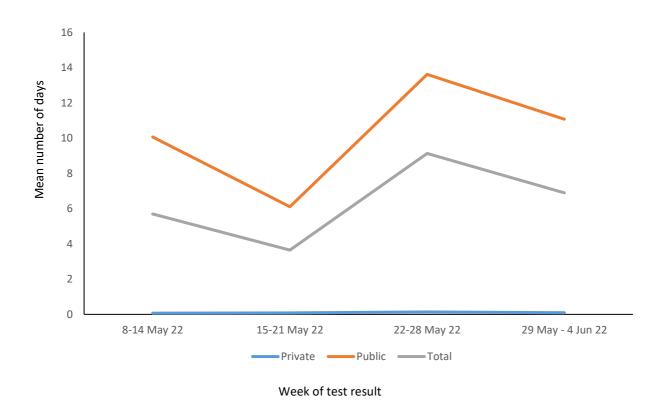


Figure 20. Mean number of days between date of specimen collection and date of test result for antigen tests by week of test result, South Africa, 8 May – 4 June 2022.

Methods

Testing for SARS-CoV-2 began on 28 January 2020 at the NICD and after the first case was confirmed on 5th March 2020, testing was expanded to a larger network of private and NHLS laboratories. Laboratory testing was conducted for people meeting the case definition for persons under investigation (PUI). This definition was updated several times over the reporting period but at different times included (i) symptomatic individuals seeking testing, (ii) hospitalised individuals for whom testing was done, (iii) individuals in high-risk occupations, (iv) individuals in outbreak settings, and (v) individuals identified through community screening and testing (CST) programmes which were implemented in April 2020 and was discontinued from the week beginning 17th May. CST was implemented differently in different provinces, and ranged from mass screening approaches (including asymptomatic individuals) to screening of individuals in contact with a confirmed case to targeted testing of clusters of cases. Respiratory specimens were submitted to testing laboratories. Testing was performed using reverse transcriptase real-time PCR, which detects SARS-CoV-2 viral genetic material. 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 towards the end of October 2020. Results of reported rapid antigen-based tests are included in this report, however data are incomplete and efforts are ongoing to improve data completeness.

Test results were automatically fed into a data warehouse after result authorisation. We excluded specimens collected outside South Africa and duplicate entries of the same test for an individual. From week 49 of 2020 onwards, test data were reported from the Notifiable Medical Conditions Surveillance System (NMCSS). Date of specimen receipt in the laboratory was used when date of specimen collection was missing. Proportion testing positive (PTP) was calculated as the number of positive tests/total number of tests and presented as percentage by multiplying with 100. Testing rates were calculated using mid-year population estimates from Statistics South Africa and expressed as tests per 100,000 (2019 estimates were used from week 10 – 40 of 2020, 2020 estimates were used from week 41 2021 to week 1 of 2022 and 2021 estimates were used from week 2 of 2022 and onwards). Laboratory turnaround times were calculated as the mean number of days between specimen collection and reporting of the result. Categorical variables were compared using the chisquared test, with a P-value<0.05 considered statistically significant.

Health district and sub-district (in the metros) level results were mapped based on geo-locatable public (approximately 99% of public sector facilities in the country) and private (approximately 77% of private testing facilities) sector testing facilities. Estimates of overall prevalence were derived using regression techniques. Estimates were adjusted to produce district-specific positive test prevalences based on the national average age and sex profile of testing for that week. This adjustment allows more accurate comparison of the proportion testing positive across districts. Districts with fewer than 20 tests reported during the week have been excluded from the analysis.

Limitations

- A backlog in testing of samples by laboratories affects the reported number of tests. As a result, numbers tested during this period may change in subsequent reports.
- If higher-priority specimens were tested preferentially this would likely result in an inflated proportion testing positive.
- Different and changing testing strategies (targeted vs. mass testing, PCR vs. antigen-based tests
 or prioritisation of severe or at-risk cases during epidemic waves) used by different provinces
 makes percentage testing positive and number of reported tests difficult to interpret and
 compare.

- Health district and sub-district level were mapped based on the testing facility and not place of residence.
- Patient admission status was categorised based on the reported patient facility and may not reflect whether the patient was actually admitted to hospital.
- Antigen tests may be underestimated as they are used in a number of different settings and results may not be reported.