

COVID-19 Epidemiologic Bulletin

Prepared by Emergency Operation Center (EOC)

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Key Messages

- Confirmed cases in Ethiopia crossed 5500 and more than 65% of the cases reported from the capital city Addis Ababa.
- Ethiopia is on the 13th rank among countries reported high number of COVID-19 cases in Africa.
- The quarantine period for individuals entering the country from abroad reduced from fourteen to seven days as of June 19, 2020.
- Revised guideline on dead body handling, COVID-19 recovery process and discharge criteria finalized and circulated.
- The TASH-laboratory conducted more than 300 COVID-19 tests since its establishment last week.

1. COVID Global and Local Statistical Situation Updates

1.1 Global Status COVID –

Global (June 27, 2020, 19:06 GMT) (Source: Worldometer).

- Total confirmed: 10,005,032
- Total dead: 498,991
- Total recovered: 5,414,852
- Total countries affected: 215

Countries cases distribution

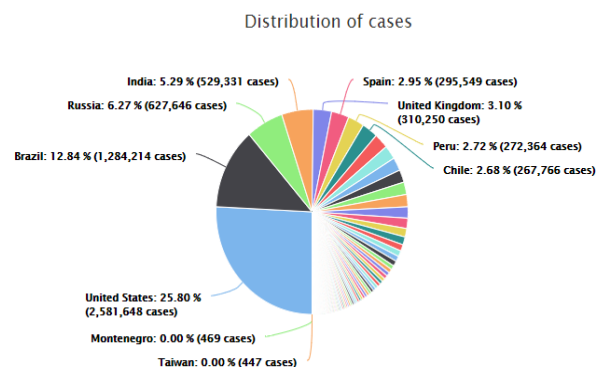


Fig 1; Case distribution by countries (Source: worldometer)

1.2 African Situation

COVID - Regional Africa, (June 27, 2020, 19:06 GMT) (Source: Worldometer)

- Total confirmed: 366,090
- Total dead: 9,438
- Total recovered: 177,365
- Total countries affected: 57

1.3. Ethiopian Status

COVID - National (Ethiopia)- (June 27, 2020, 19:06 GMT) (Source: Worldometer)

- Total confirmed: 5,570
- Total dead: 94
- Total recovered: 2015

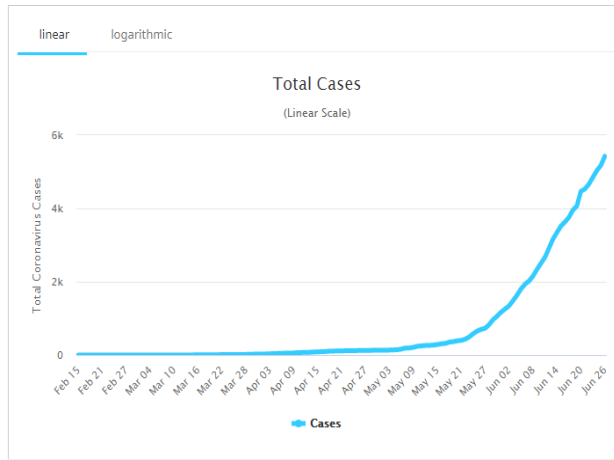


Fig 2: Total cases of COVID 19 Cases in Ethiopia Source: Worldometer

Doubling time

Cases doubling time in days by region as of June 28 () was National 15 days, Addis Abeba 16 days, Afar 67 days , Amara 10 days, Benishangul Gumz 15 days, Dire Dawa 8 days , Gambela 2 days, Harari 18 days, Oromia 16 days, SNNPR 16 days, Somali 17 days and Tigray 15 days.



Fig 3. Case doubling times by regions as of June 28, 2020

(Source: <https://ethiopianhealthdata.org/>)

1.4. COVID - TASH:

COVID Screening and Diagnosis updates @ TASH

- Total Thermal Screened (as of 19/06/2020): 554,251
- Total COVID Screened at TASH (this week): 721

- Total COVID Screened at TASH (cumulative): 8554
- Total COVID confirmed at TASH (this week): 2
- Total COVID Confirmed at TASH (Cumulative): 61
- COVID-19 Confirmed TASH staff (this week): 0
- Total COVID-19 Confirmed TASH staff: 29

1.4.1 TASH-COVID-19 Thermal Screening

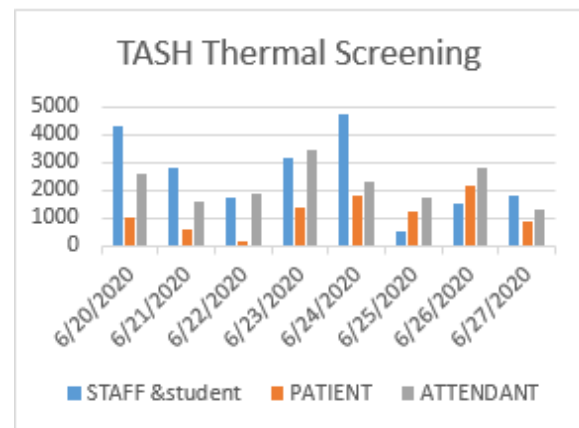


Fig 4: Daily reports of thermal screening this week, Source: TASH-HMIS

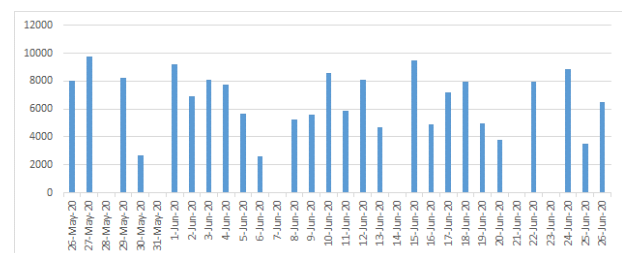


Fig 5: Daily reports of thermal screening TASH (26th May-26th June, 2020) Source: TASH-HMIS

1.4.2. TASH COVID19 Testing

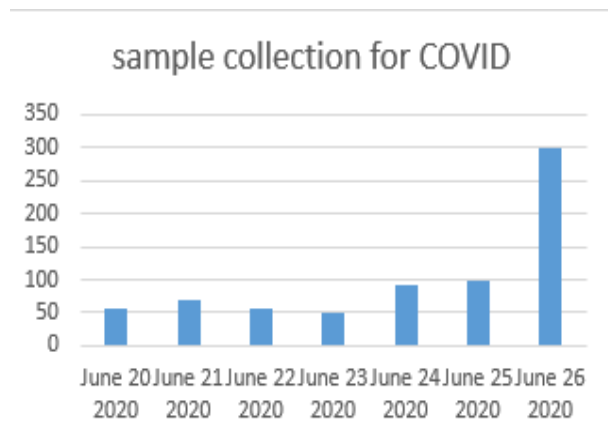


Fig 6: Number of samples collected in TASH (this week) Source: TASH-HMIS.

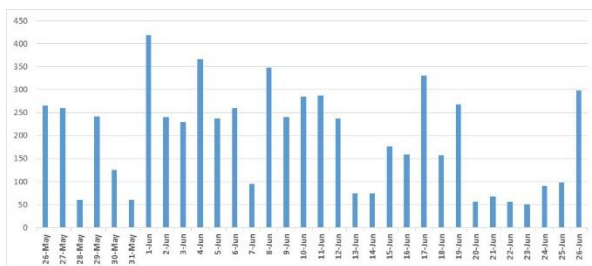


Fig 7: Number of samples collected in TASH (May 26 – Jun 26, 2020) Source: TASH-HMIS.

1.4.3. TASH-Outpatient Visit

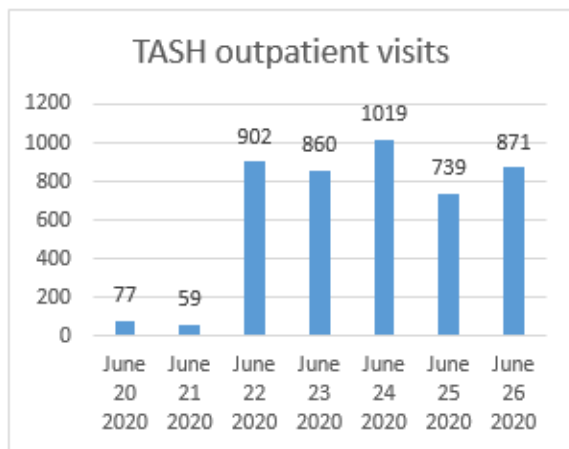


Fig 8: Non-COVID-19 outpatient visit in TASH (this week) Source: TASH-HMIS.

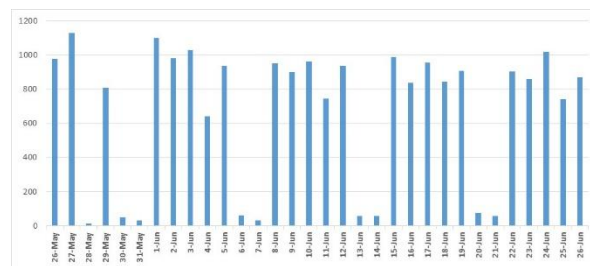


Fig 9: Non-COVID-19 outpatient visit in TASH (26th May- 26th June, 2020) Source: TASH-HMIS.

1.4.4. TASH-Emergency and Inpatient Visit

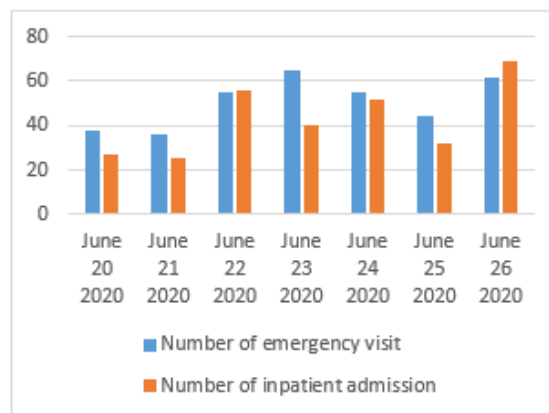


Fig 10: Non-COVID-19 emergency and inpatient visit in TASH (this week) Source: TASH-HMIS.

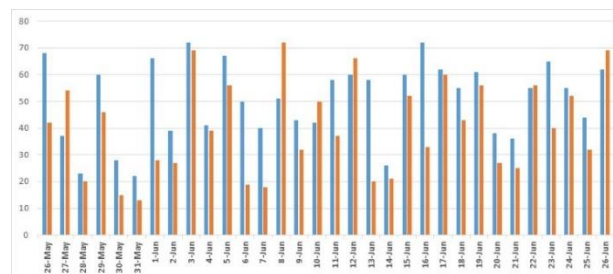


Fig 11: Non-COVID-19 emergency and inpatient visit in TASH (26thMay-26th June, 2020) Source: TASH-HMIS.

1.4.6 TASH-Maternal and Newborn Health

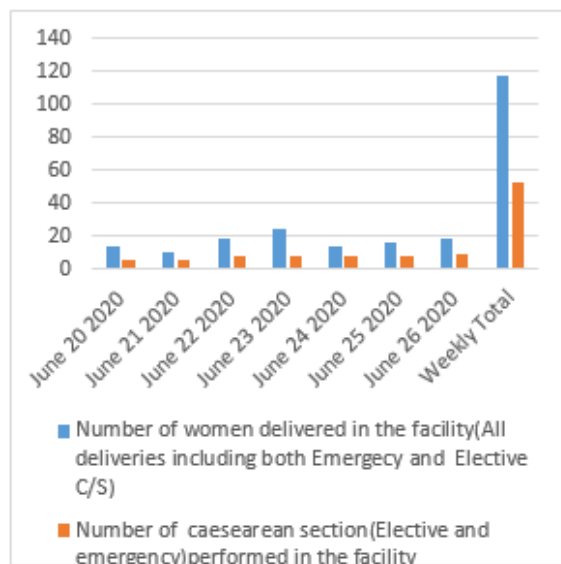


Fig 12: Non-COVID-19 Women deliveries at TASH (Source: TASH-HMIS).

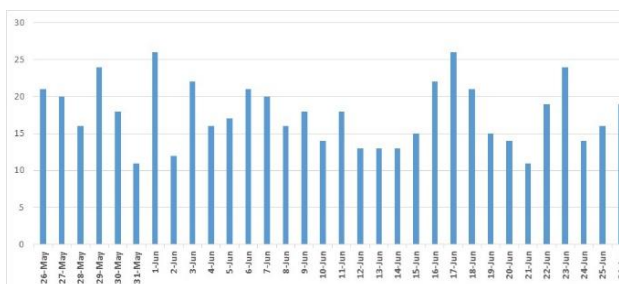


Fig 13: Non-COVID-19 Women deliveries, TASH (May 26 – June 26, 2020).
Source: TASH-HMIS.

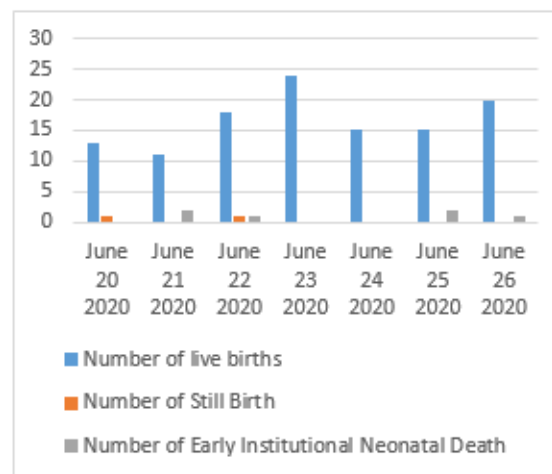


Fig 14: Live births and Early Neonatal Death in TASH (Source: TASH-HMIS).

1.4.7 TASH-Surgery Performance

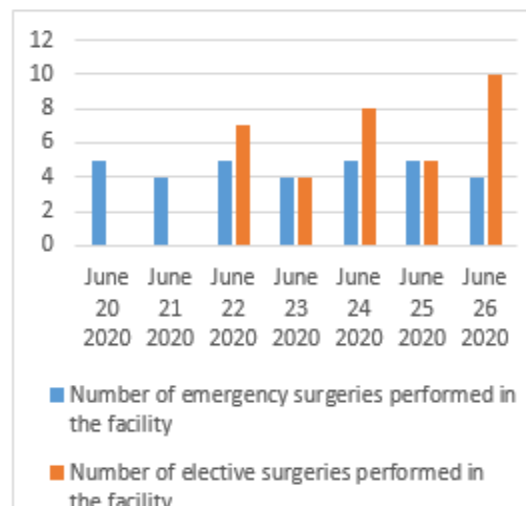


Fig 15: Non-COVID-19 emergency and elective surgeries performed in TASH (this week)
Source: TASH-HMIS

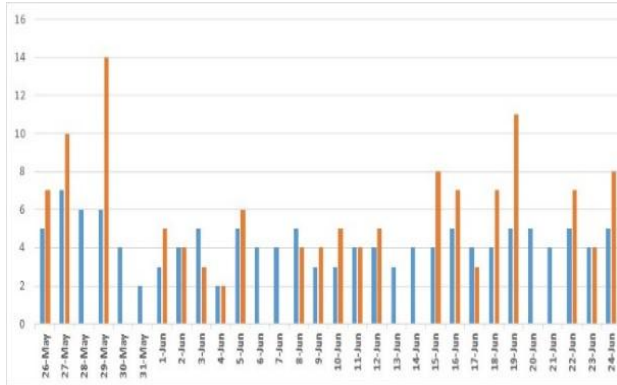


Fig 16: Non-COVID-19 emergency and elective surgeries performed in TASH (26th May-26th June, 2020) Source: TASH-HMIS.

1.4.8 TASH-Non-COVID-Deaths

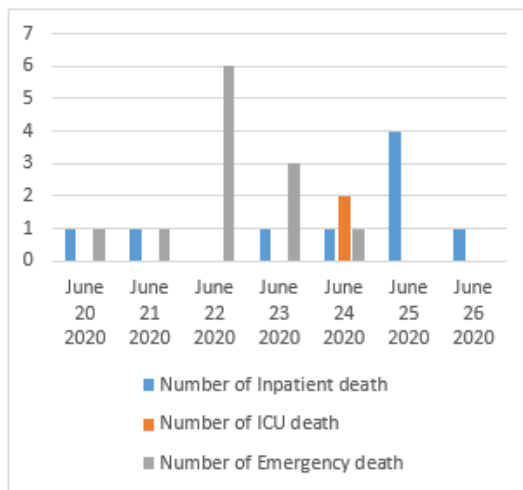


Fig 17: Non-COVID-19 inpatient, emergency and ICU deaths in TASH (this week) Source: TASH-HMIS.

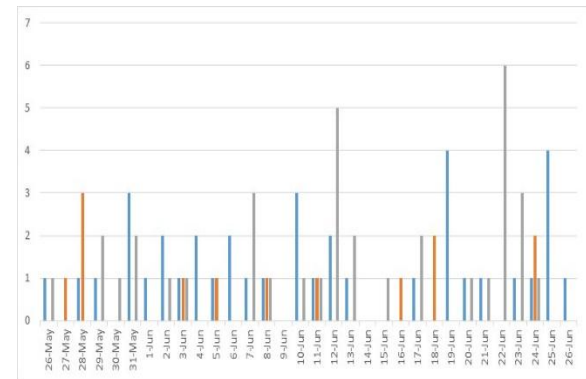


Fig 18: Non-COVID-19 inpatient, emergency and ICU deaths in TASH (May 26th -26th June, 2020) Source: TASH-HMIS

1.4.9 TASH-Inpatient Discharges

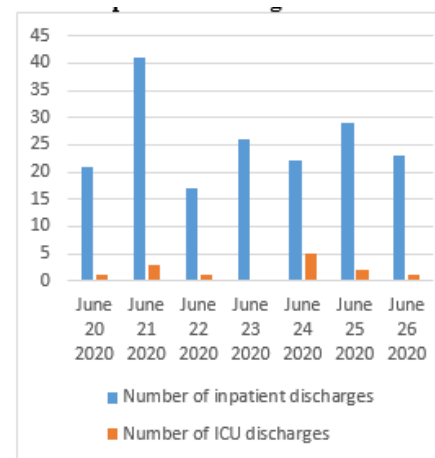


Fig 19: Non-COVID-19 inpatient discharge in TASH (this `week) Source: TASH-HMIS.

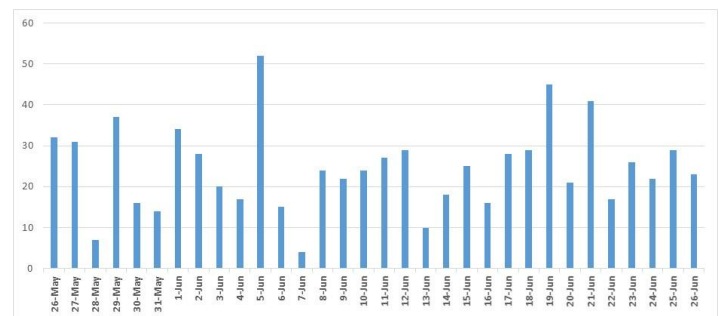


Fig 20: Non-COVID-19 inpatient discharge in TASH (May 26 - 26th June, 2020) Source: TASH-HMIS.

1.4.10 TASH Chronic Disease Clinic Performance

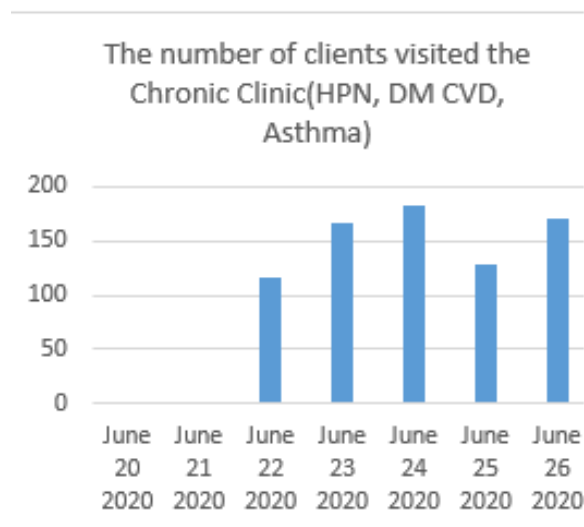


Fig 21. Non-COVID-19 clients visited the Chronic Clinic (HPN, DM CVD, Asthma) in TASH (this week) Source: TASH-HMIS.

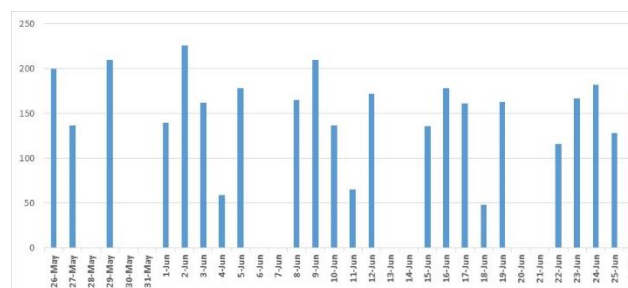


Fig 22: Non-COVID-19 client visited the Chronic Clinic (HPN, DM CVD, Asthma) in TASH (May 26th -26th June, 2020) Source: TASH-HMIS.

2. CHS/TASH COVID Preparedness and Response Updates

Incident Management

- Regular updates presented to the EOC by Dr Hanna who head of the Isolation wards.
- Incident management duty rotation going well, incidents managed more efficient.
- Rotations schedule of residents and senior staff for Isolation ward is updated and a new TOR for the Isolation ward management developed.
- Some of the machines in the ICU were not fully functioning due to shortage of ICU monitor accessories. The management together with biomedical team working to address the situation.
- Preparation for launching the Isolation/COVID OR is almost final. A task force was assigned to supervise and report functions to the daily EOC briefings.
- Incident management session of nurse planned to be conducted the coming week
- Investigation of a possible super spreader event in the Pediatric ward being conducted

Infection Prevention and Control

- The TASH management with the EOC/IPC team are exploring local options such as working with local PPE manufacturers to address challenges related to access to PPE.
- The IPC assessments were conducted between June 21st and 22nd. Hand hygiene practice was very low. Physical distancing was 61% while respiratory hygiene and masking was 90%. Regular IPC monitoring to be conducted on weekly bases.
- Gate number 4 (the one in front of immigration) is now open since the beginning of the week (only for staff).
- The Thermal screening at the gates is now conducted by newly recruited and trained staff in contract basis.

Case Management

- Flow chart of individuals affected by COVID-19 in the pediatric unit presented by the unit.

- Results disclosure guideline is finalized and orientation will be given next week for those involved.
- A revised protocol for COVID surgeries is under development by the COVID-surgery task force.
- CPR resuscitation guideline for COVID is under development by the emergency team.

Communications

- A number of new information such as revised guidelines, and new scientific updates were shared to staff via e-mail and the TASH Telegram platform.
- The EOC bulletin is back to its weekly schedule and three more members joined the EOC Bulletin development team (Dr Selamenesh (Pediatrics), Dr Benyam (Psychiatry) and Dr Sofanit (Gyne/Obs))
- Write-up of commentaries initiated across the 12 EOC teams to inform and guide the response efforts with current evidence.
- The ten top daily COVID publications shared on daily bases through the Telegram channel.
- The weekly Zoom Friday lunch meetings have been successful in broadening the communication horizon.

Training

- Two College wide COVID Webinars were conducted this week as follows.
- Molecular mechanisms of COVID infection (by Prof Ephrem Engidawork)
- Peripheral Nervous System complication of COVID-19 and Management principles (by Dr Monica Povedano & Dr Hanna Demissie)
- All webinar recordings are shared on the telegram channel

Laboratory Services

- The COVID-19 laboratory testing in TASH now fully functional and running smoothly with regular daily progress updates presented to the EOC.

3. Important COVID Updates & Resources

- Knowledge about optimal respiratory support for [#COVID19](#) patients is still evolving:
<https://thelancet.com/action/showPdf?pii=S2213-2600%2820%2930279-4...>
- The different phases and many unresolved issues reviewed here by [@LancetRespirMed](#)

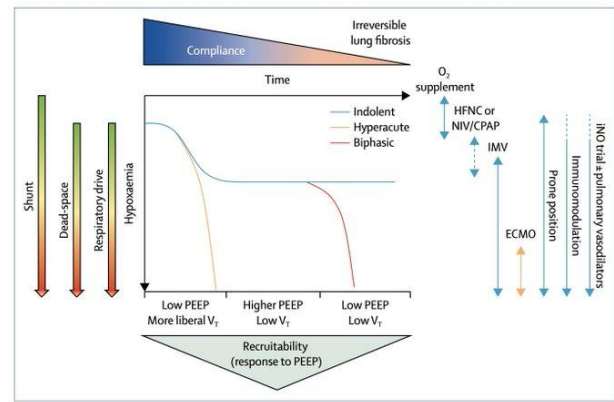


Figure: Pathophysiological trajectory in COVID-19 and proposed implications for respiratory support

- Children and [#COVID19](#): the largest report to date, for 582 kids, from 25 European countries: 8% ICU, CFR 0.7%, age < 1 year 5 X risk for ICU Just published [@LancetChildAdol](#)
[https://thelancet.com/journals/lanchi/article/PIIS2352-4642\(20\)30177-2/fulltext...](https://thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30177-2/fulltext...)

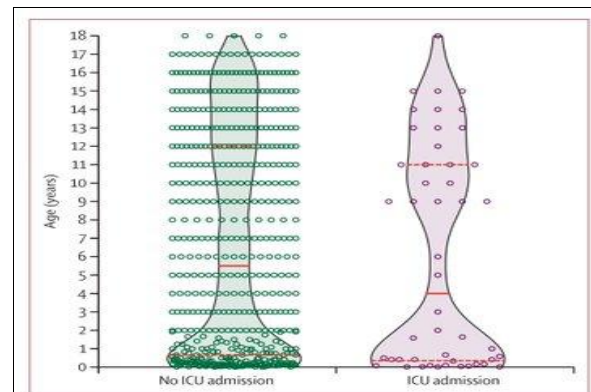


Figure 2: Violin plots showing the age distribution of patients by requirement of ICU support



4. List of Essential COVID Contacts

- **EPHI/FMOH:** Tel. 011276 5340; Email: ephieoc@gmail.com; phemdatacenter@gmail.com
- **EPHI COVID Notification and Information Centre:**
Toll Free numbers: 8335 or 982 or 444
- **CHS CED:** Dr Dawit Wondimagegn; Email: dawit.wondimagegn@gmail.com
- **TASH Clinical Services Director:**
Dr. Yirgu G/Hiwot; Email: yirgug@yahoo.com
- **TASH Emergency Directors/ Coordinators:**
Dr. Hywot Engida/ Sr.Aster mulugeta; Email: hywetengeda@gmail.com; Tel.0911656551/0911061837
- **TASH COVID Isolation Leader:**
Dr Wondwosen Amogne; Email: wonamogne@yahoo.com Tel 0911406179
- **Hospital COVID Isolation and Hospital Head Nurse**
Sr. Aselefech Negao: Tel 0911183277
- **Hospital IPC Leads:**
Tewodros Asmare/ Feyissa Regassa; Tel. 0913151452; 0941334837
- **TASH EOC:**
Dr Adamu Addissie/Abdulnasir Abagero; Tel. 0911404954; 0911806475
Email: tacheoc@gmail.com; tash.eoc@aau.edu.et

