

# COVID-19 CASES IN THE GAZA STRIP

Monthly epidemiological bulletin from (16/08 TO 15/09 2021) AND (16/09 TO 15/10 2021)

DATA SOURCES: MINISTRY OF HEALTH (MOH- PHIC) DAILY REPORTS ON COVID-19 IN GAZA STRIP

## GENERAL

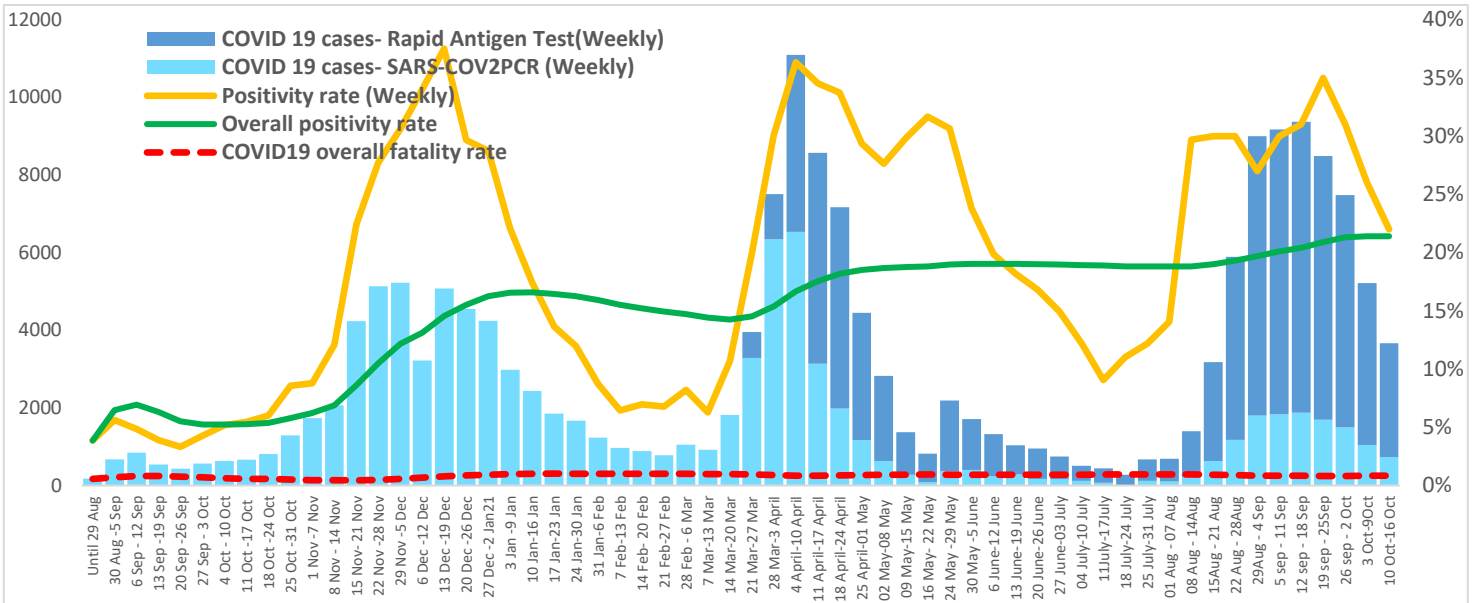


Figure 1: Reported weekly COVID-19 cases, weekly positivity rates, overall positivity rates and overall fatality rate

Reporting Period	Weekly cases (Biweekly for this report)		Cumulative
	16/08/2021 15/09/2021	16/09/2021 15/10/2021	accumulative since 23/8/2020
Total No. of samples tested	114910	91819	839398
Total No. of positive cases	33387	27247	179637
Total No. of closed cases	131211	169899	
Total No. recovered cases (%closed)	129966 (99.05%)	168393(99.1%)	
Total No. reported deaths (%closed)	1245 (0.95%)	1506(0.89%)	
Classification of positive cases by severity*	<b>Mild</b>	32,883	27,016
	<b>Moderate</b>	193	86
	<b>Severe</b>	195	106
	<b>Critical</b>	116	39
Positivity rates (Monthly)	<b>Total</b>	29.05%	29.67%
	- contacts	24.6%	12.3%
	- suspect	30.2%	30.1%
	-surveillance	13.2%	9.9%

\* The reported classification of positive cases by severity reflects the status at first day of admission to the last day of the reporting week. This classification may change over time according to progression of COVID-19 infection among patients.

- This report compares between two months: the period from 16 August to 15 September 2021, to the period from 16 September to 15 October 2021. Figure 1 illustrates the epidemiological curve starting from August 2020, presenting the characteristics of three COVID19 waves. The latest wave happened during the last reporting periods.
- Ministry of Health (MOH) has stopped random testing in areas with high previous infection rates or high vaccination coverage since June 2021. Focusing on testing suspected cases, and a small number of contacts and travelers who need COVID-19 free certificate.
- MOH has increased the use of rapid test for suspected cases while SARS-COV2-PCR is currently used mainly for unconfirmed cases and for travelers.
- The number of conducted tests decreased in parallel with decrease in number of suspected cases and the overall decrease in number of cases. The total number of conducted tests (both COVID-19 Antigen Rapid test and SARS-COV2-PCR test) decreased from **114910** between 16 August-15 Sep. 2021, to **91819** between 16 Sep-15 Oct.
- There was a decrease in number of newly reported cases between 16 August-15 Sep where they were **33387 cases compared to 27247** between 16 Sep-15 Oct.
- Decrease in new reported cases and in incidence rate of COVID-19 infection per 100,000 population in four districts was noticed during the second period, while there was an increase in those figures in Middle -area (Figures 2 and 3).

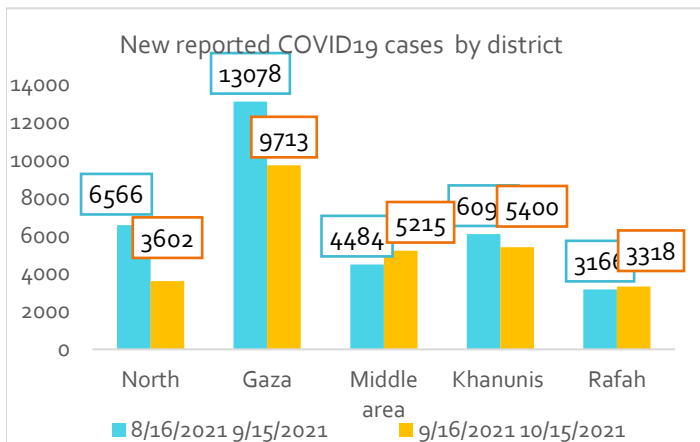


Figure 2: Newly reported weekly number of COVID-19 cases in the Gaza Strip districts

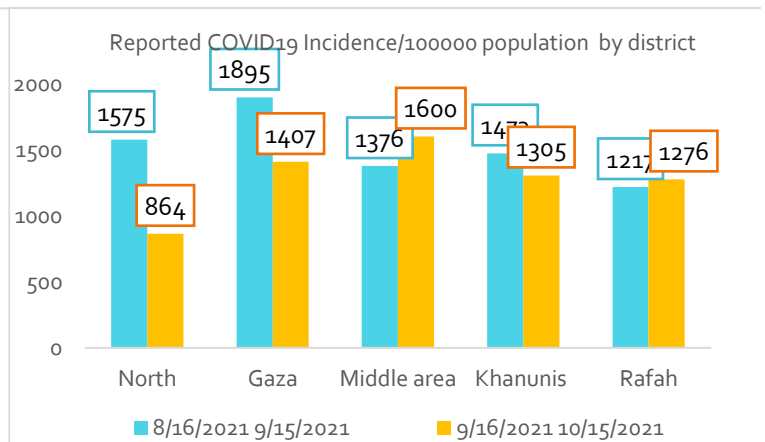


Figure 3: Incidence of weekly COVID-19 reported cases per 100,000 population in the Gaza Strip districts

## POSITIVITY RATES

- Increase in total positivity rate from 29 in first period to 29.7 in the second period (Table on page 1).
- The positivity rate was nearly the same during two periods in three districts while there is decrease in two districts (figure 4).
- Comparing between the two periods, positivity rates decreased among all targeted categories (contact, suspected, and surveillance) (Table on page 1).

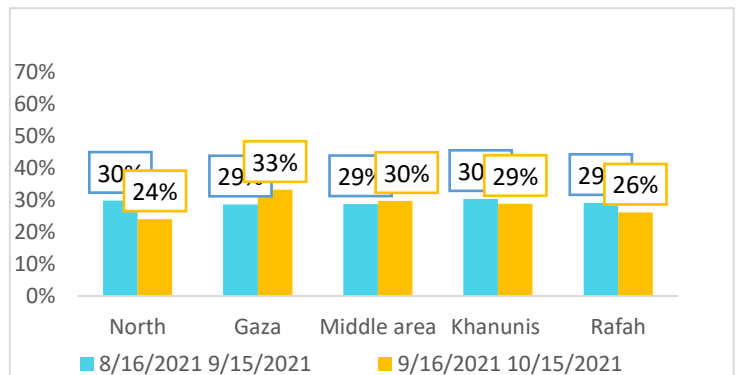


Figure 4: COVID-19 weekly positivity rates distributed by districts

## DISTRIBUTION OF COVID-19 CASES AMONG AGE GROUPS AND GENDER

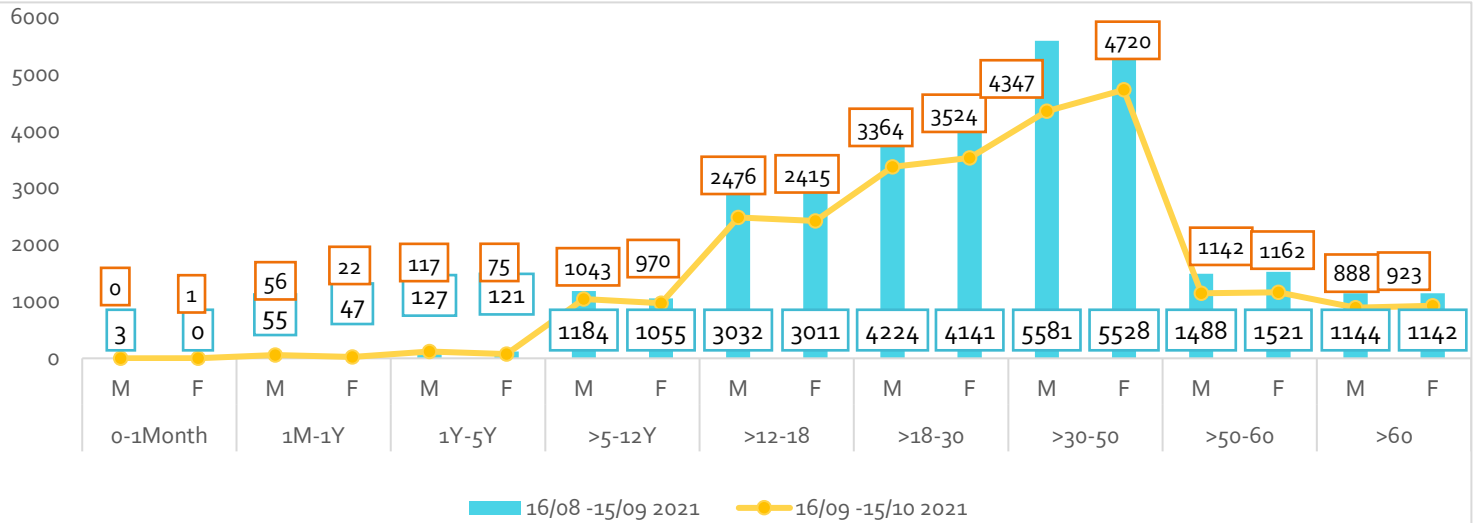


Figure 5: Weekly newly reported COVID-19 cases distributed by age groups and gender

- Figure 5 shows a decrease in the reported number of cases among all age groups between 16-Sep-15 -Oct. 2021 compared to the period between 16-Aug-15 -Sep 2021.
- Highest reported number of COVID-19 cases was among males and females between the ages of 18 to 50 with highest reported infection were among the age group from 30-50 years.

## DISTRIBUTION OF COVID-19 DEATHS

- Despite the decrease in new cases reported in second period, there was an increase in number of COVID-19 deaths reported between 16-Sep-15 -Oct. 2021; where there are 129 excess deaths between the two periods: 133 vs 262, respectively. COVID 19 deaths increase from 60 to 133 among males, and from 73 to 129 among females. Increasing in deaths number might be attributed to the increase in critical cases during the first reporting period resulting in higher deaths at the second reporting period.
- The majority of reported COVID-19 deaths were among males and females aged 60 years and older, with noticed increase in deaths in younger age groups (18-60) (Figure 6).
- Since the beginning of COVID-19 outbreak in the Gaza Strip until 15 Sep, the total number of reported deaths was 1506 with an accumulative COVID-19 fatality rate around 0.9%. Out of the 1506 COVID19 reported deaths, 715 (57%) were males and 530 (43%) were females.
- 9 cases of female deaths during second period were pregnant or just gave birth. *Its worth to mention that there are 18 female covid deaths were belong to pregnant or just give birth women.*

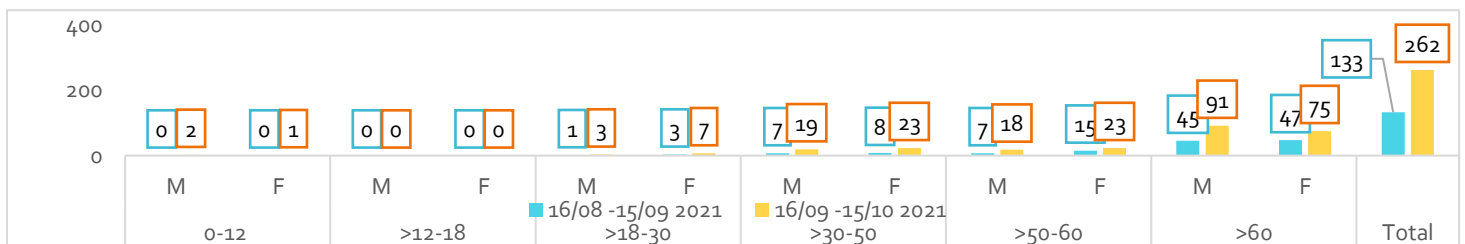


Figure 6: Distribution of reported COVID-19 deaths by age groups and gender

## DISTRIBUTION OF COVID-19 CASES BY SEVERITY

- Cumulative number of critical and severe cases admitted to hospitals decreased from 248 in the first period to 136 cases in the second period (Figure 7).
- The moderate admitted cases also decreased from 93 in first period to 74 in second period (Figure 7.)

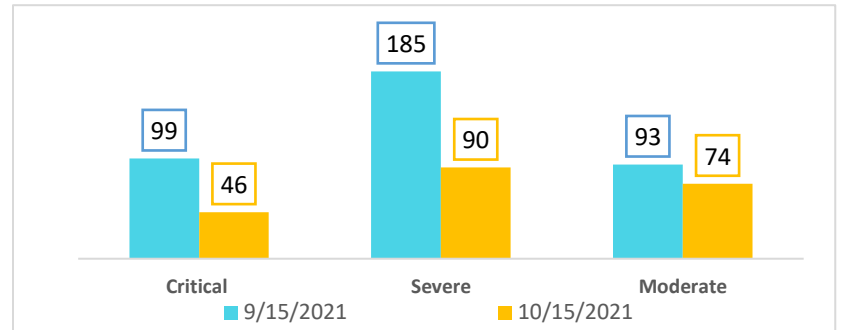
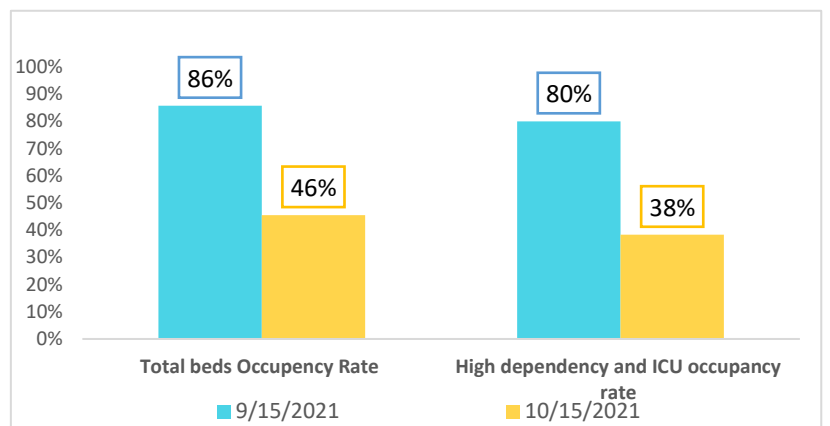


Figure 7: Classification of cumulative hospital admitted COVID-19 patients by severity

## HEALTH SYSTEM CAPACITY (COVID-19 MANAGEMENT)

- During the report period; the MOH has allocated 555 beds for COVID-19 patients (105 ICU, 270 High dependency and 180 for mild and moderate cases).
- Between 15 Oct 2021 to 15 Sep 2021, total COVID-19 bed occupancy rates decreased from 86% to 46% (Figure 8).
- The occupancy rate at high dependency and ICU units decreased from 80% on Sep 15, 2021 to 38% on Oct. 15, 2021 (Figure 8).



## COVID-19 INFECTION AMONG HEALTH CARE WORKERS

- There is a slightly decrease in number of newly reported cases among health worker. Despite this decreasing in new cases, the number of infected health worker still considered high especially that the most health care workers are vaccinated. The total number of newly reported COVID-19 cases among health workers decreased from 477 on Sep 15, 2021, to 441 on 15, Oct. 2021. Figure 9 shows the distribution of cases by sex and profession.

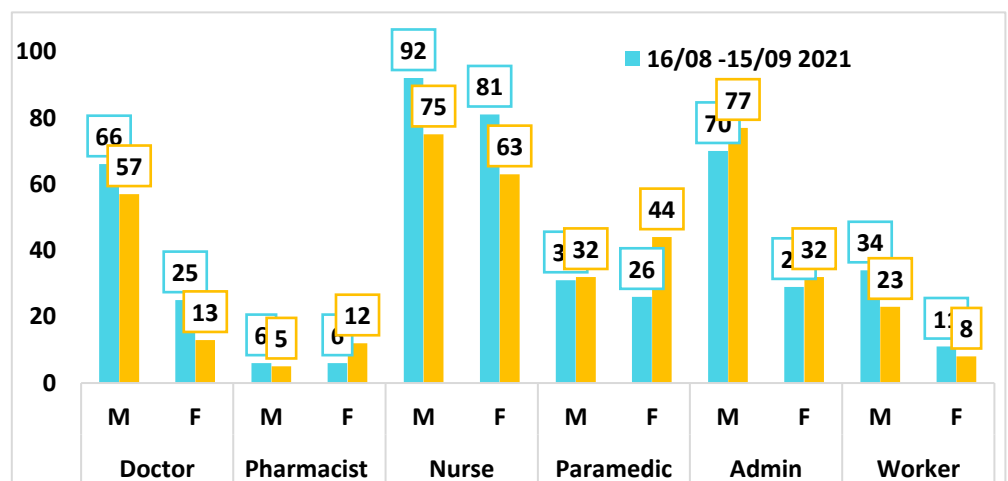


Figure 9: newly reported COVID-19 cases among health workforce distributed by gender and profession

## COVID19 VACCINATION

- MOH in Gaza Strip received 768590 doses of COVID-19 vaccine until 15<sup>th</sup> Oct,2021. Table (2). Out of them 376896 was used and 391694 doses remained at MOH stock
- MoH still focuses on awareness campaigns through the social media and direct communication with people in public markets or mosques in order to encourage them to get vaccinated.
- Until Sep 15<sup>th</sup>, 368755 received their first vaccination dose and 91005 received their second vaccination dose. Until Oct15, 463730 received their first vaccination dose and 191779 received their second vaccination dose and 3838 received their third dose.
- Compared to 249085 persons who received their first vaccination dose with average 8035 per day during 16-Aug to 15 Sep, 98600 received their first vaccination dose with average 3180 per day during 16-Sep to 15 Oct.

TYPE OF VACCINE	QUANTITY
AstraZeneca	58000
Pfizer	248040
Sputnik V	60700
Sputnik light	181850
Sino-Pharm	20000
Moderna	200000
<b>TOTAL</b>	<b>768590</b>

*Table2: Types of delivered vaccines*

## CONCLUSIONS AND RECOMMENDATIONS

- MOH succeeded to manage the peak phase of third COVID10 wave with accepted figures in recovered and mortality rate. There are decreased in most epidemiological figures in second period in compared with first period.
- MoH started to give third dose of vaccine after six months of second dose in order to ensure the effectiveness of community vaccination.
- Need to monitor adherence to guidelines during vaccination to prevent infections. MOH need to intensify its effort to secure enough supply of vaccine.
- Strengthening of Risk Communication and Community Engagement (RCCE) efforts to raise awareness about the need to get the vaccine, even if being infected to decrease the risk of re-infection.
- Special attention to vulnerable population infected with COVID-19, such as elderly and patients with co-morbidities and pregnant women. Timely hospital admission for these patients and proper management should be enforced to prevent complications.
- Increasing COVID-19 testing capacity is critical to break transmission chains at community level.
- Further enforcement of IPC measures should be implemented in all hospitals and PHC facilities to avoid further increase in COVID-19 infections among health workforce.
- Regular updating of COVID-19 cases management protocol based on emerging evidence, with activation of multidisciplinary team for cases management could save lives.
- Good preparedness in human resource and medications is needed for the next wave which expected to start with beginning of December in order to save life of vulnerable patients.