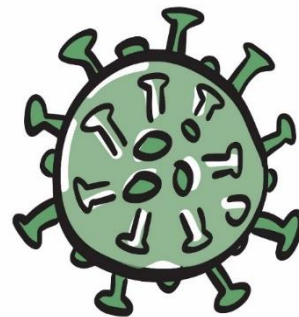


COVID-19

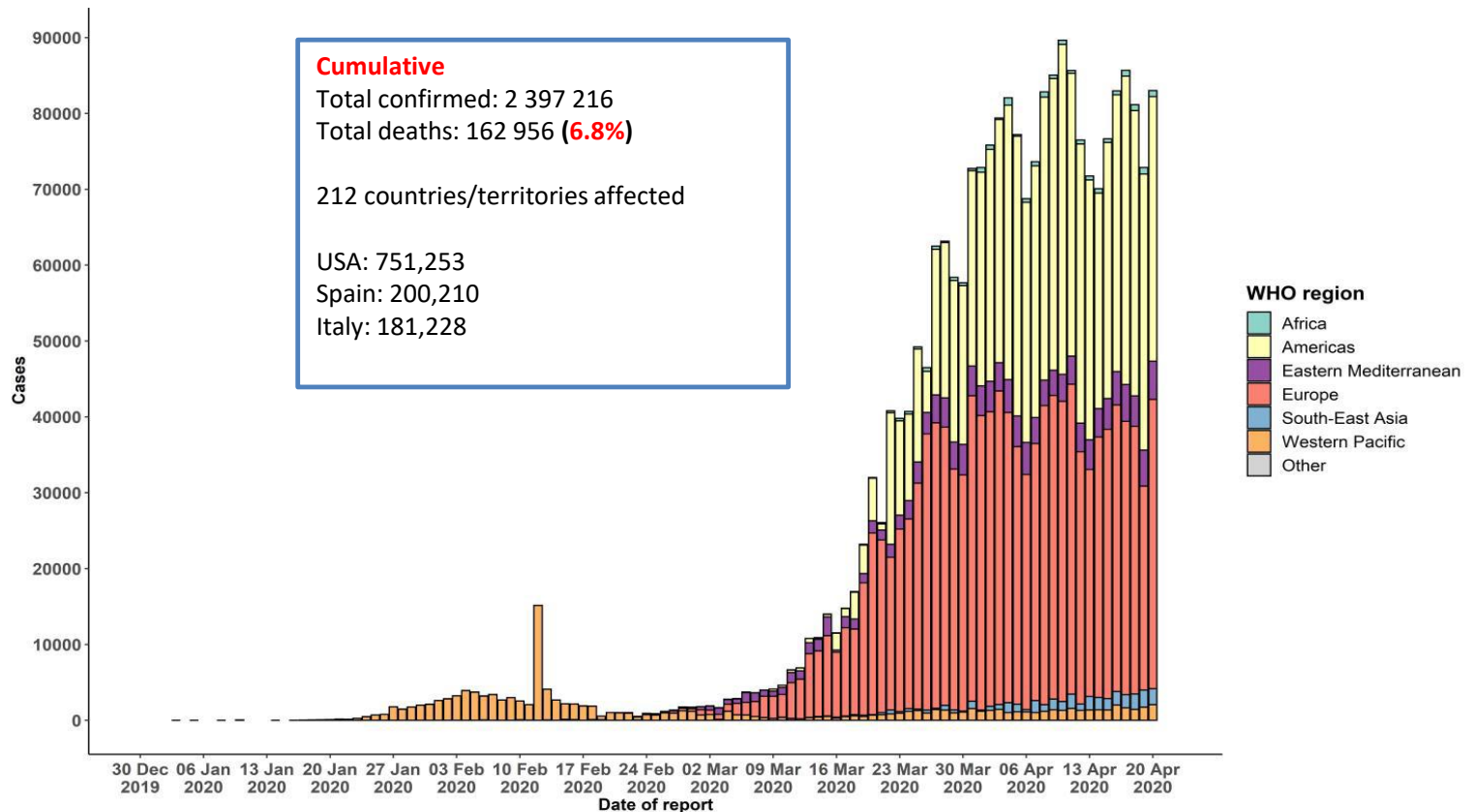
Eastern Mediterranean Region

23 April 2020

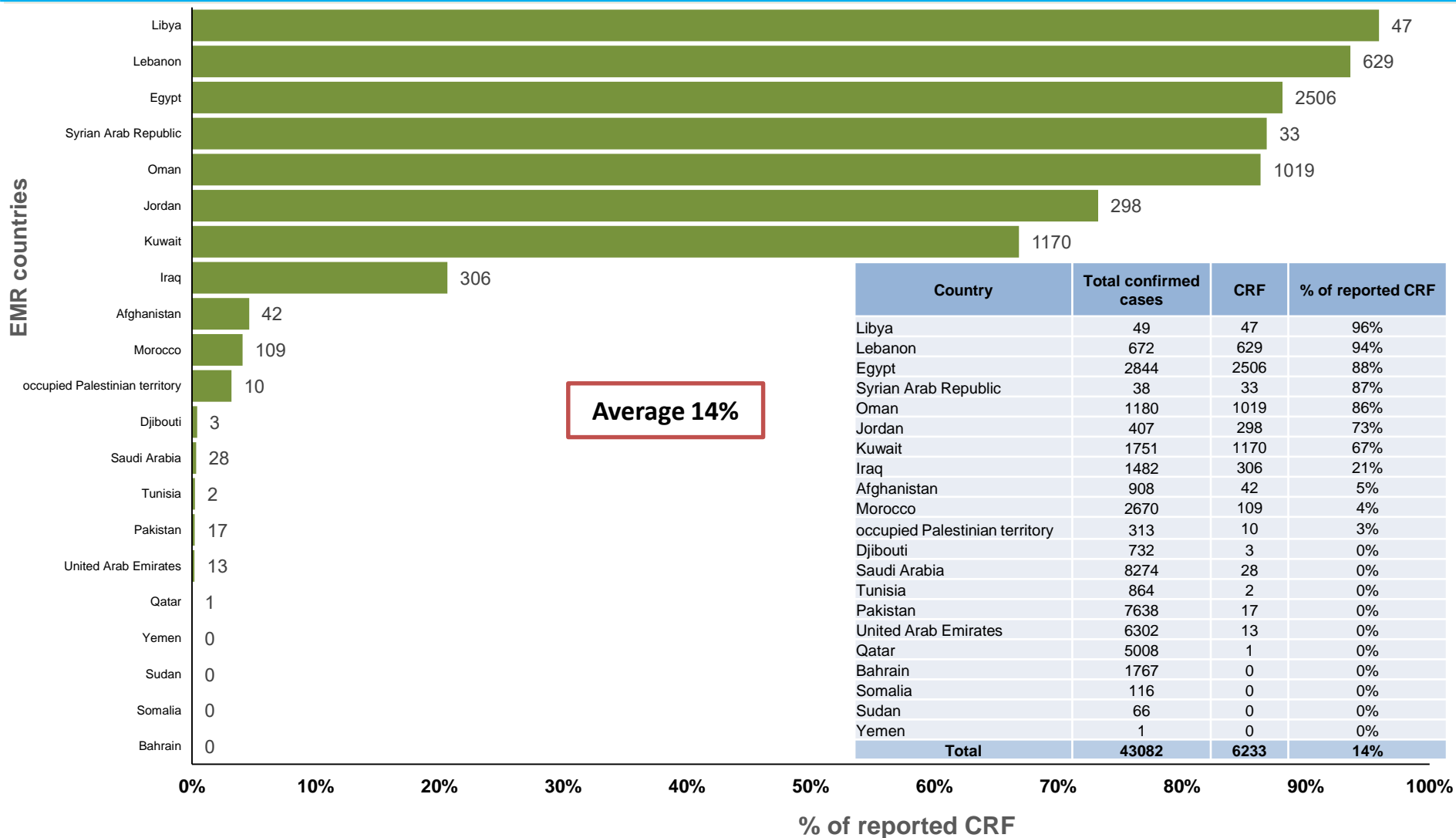


Global update of COVID-19 outbreak

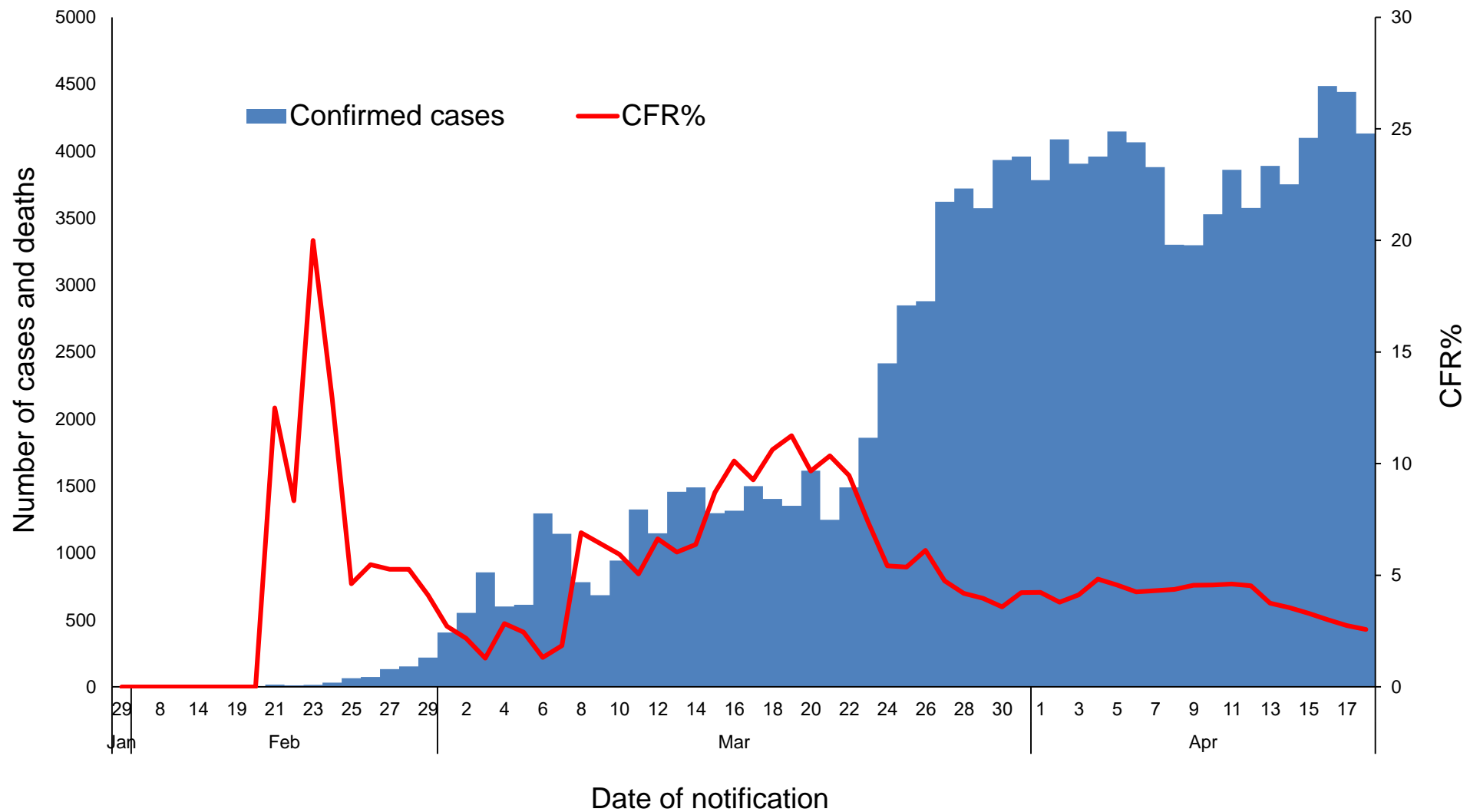
21 April 2020 (6:00 pm)



Proportion of COVID-19 cases with case report form (CRF) entered in EMFLU, EMR, excluding IR Iran, until 18 April 2020

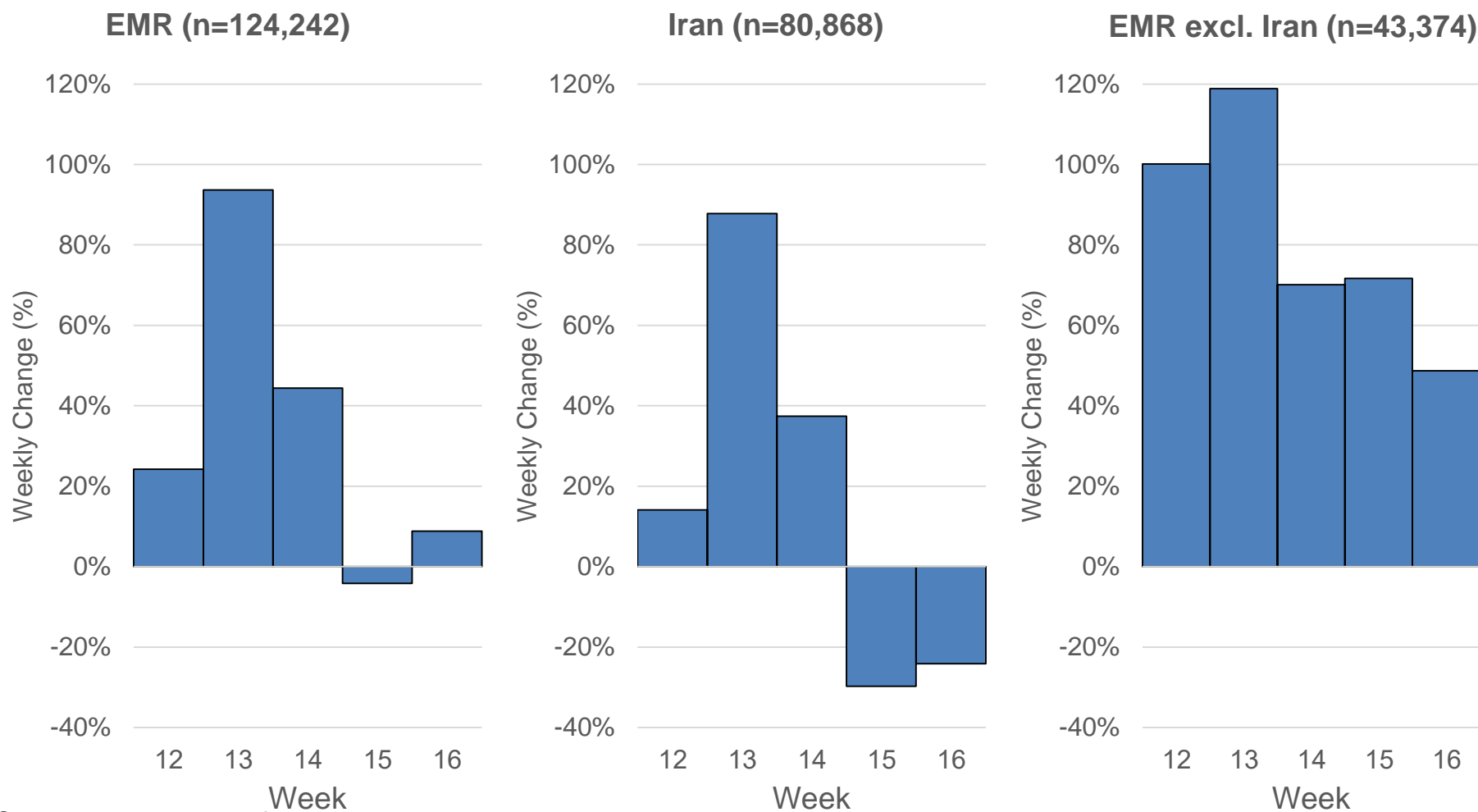


Daily distribution of COVID-19 cases deaths in EMR countries 29 January – 18 April 2020 (n = 124,242)



Weekly change in COVID-19 cases in EMR countries

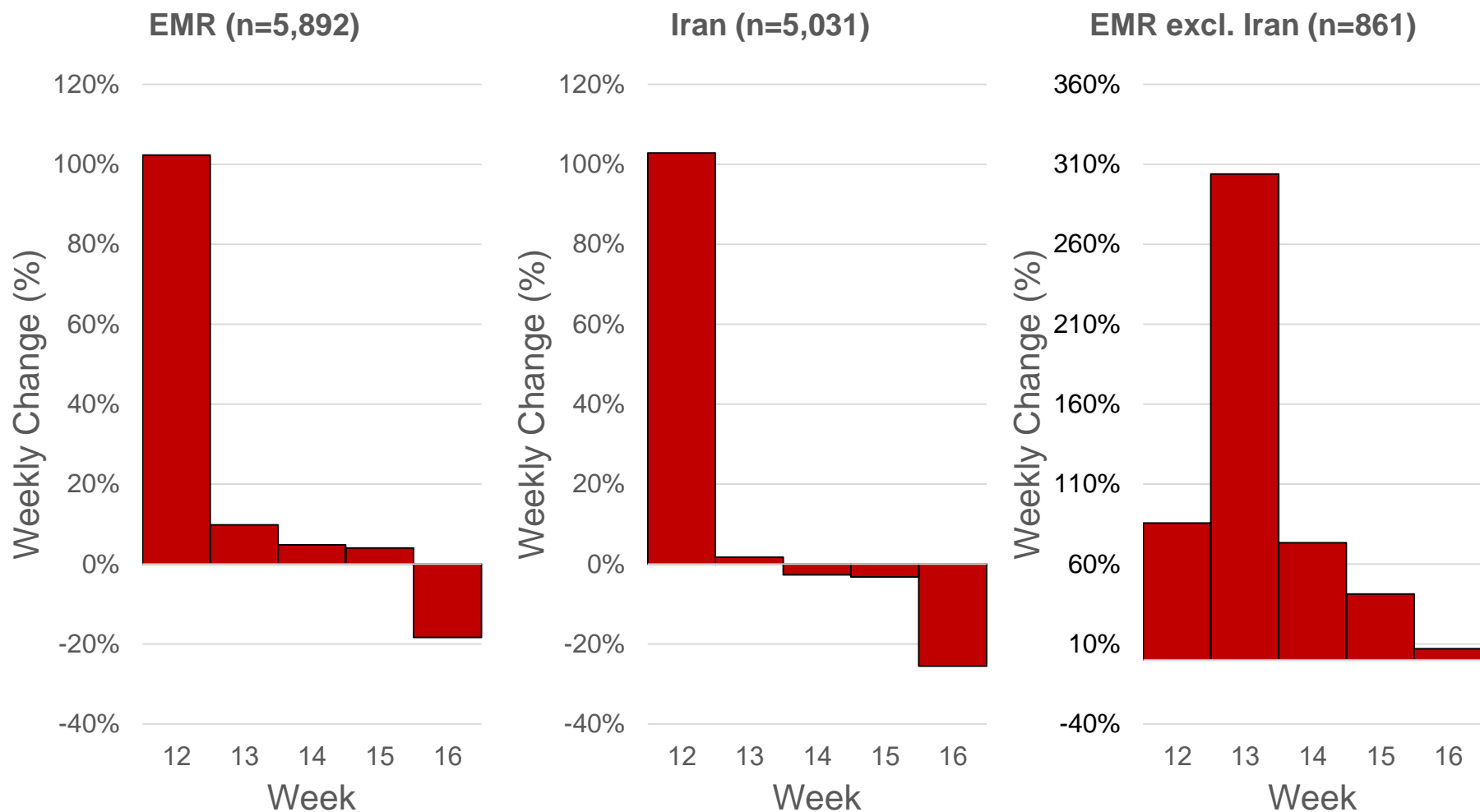
28 January – 18 April 2020



Source: aggregate reporting

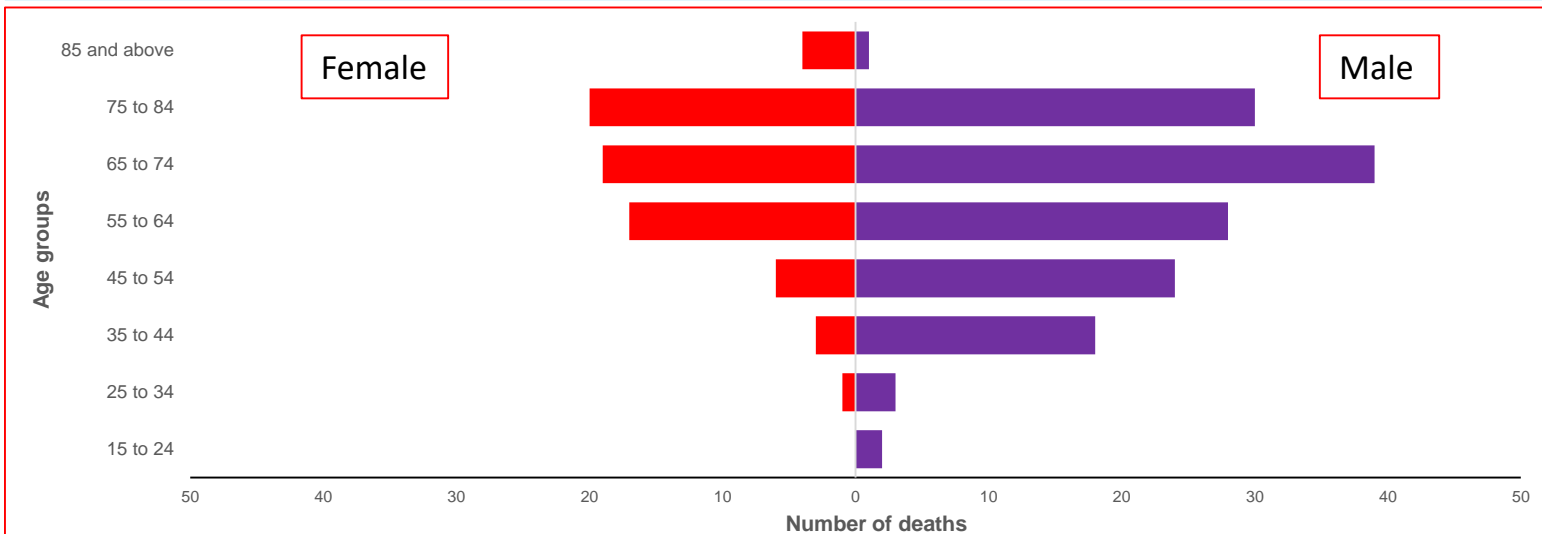
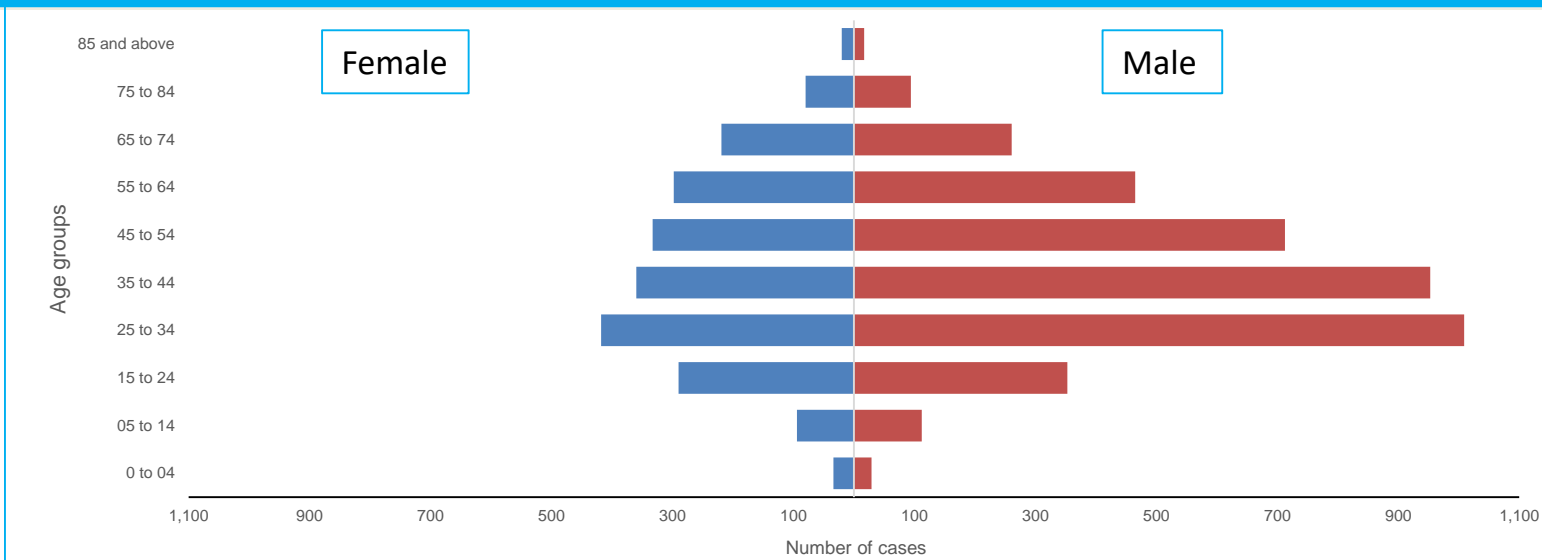
Weekly change in COVID-19 deaths in EMR countries

28 January – 18 April 2020



Source: aggregate reporting

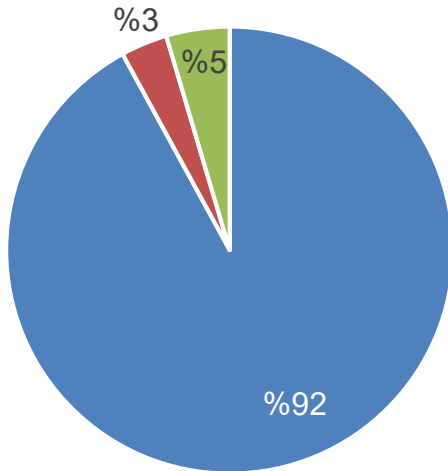
Age and sex distribution of COVID-19 cases and deaths reported in EMR CRF 28 January – 18 April, 2020



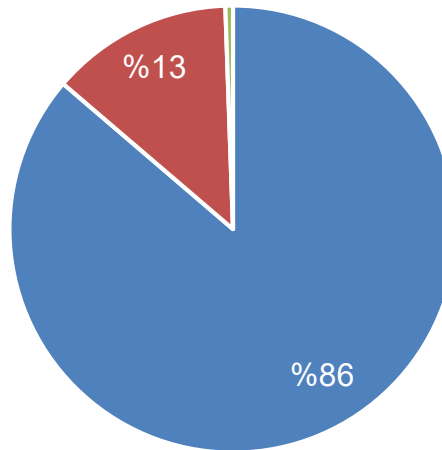
Outcomes by Number of Comorbidities

28 January – 18 April, 2020

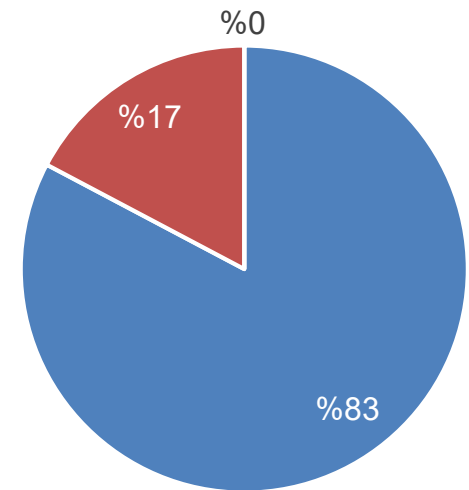
0 Comorbidity
(n=4,122)



1 Comorbidity
(n=364)



>1 Comorbidity
(n=168)

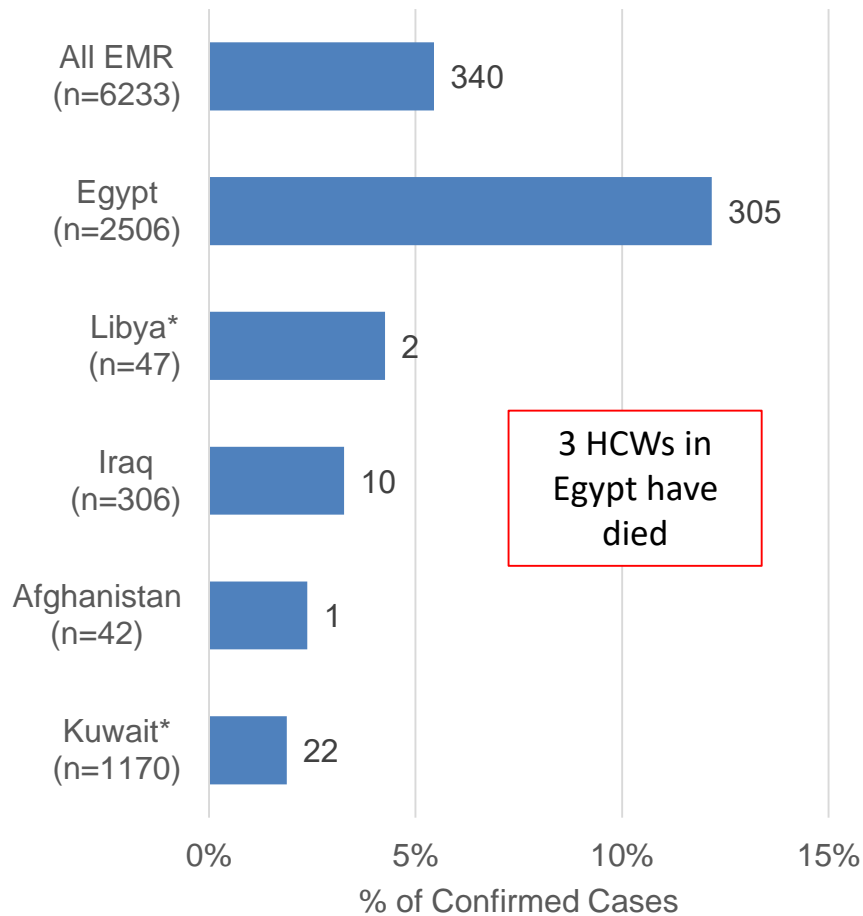


■ Admitted ■ Died ■ Discharged

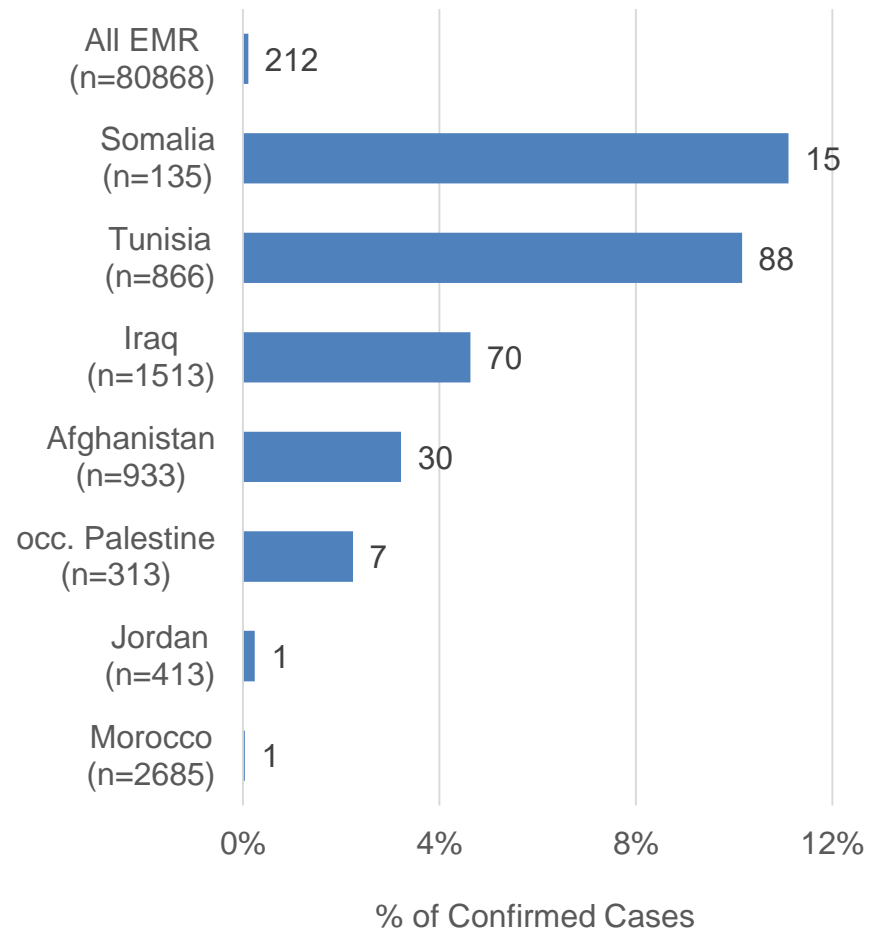
Source = EMFLU

Distribution of HCW among COVID-19 cases in EMR, 28 January – 18 April, 2020

EMFLU



Aggregate Reports



* Includes 1 health laboratory worker

Regional Summary for the data analysis

- Number of reported cases and deaths continue to drop in Iran for 2nd and 3rd week in a row, respectively
- Excluding Iran, there's a 49% increase in number of new cases reported this week
 - Somalia (↑ 714%), Djibouti (↑ 301%) and Sudan (↑ 422%) had largest spike in cases
 - Iraq (↓ 56%), Lebanon (↓ 47%) and Jordan (↓ 45%) had largest drop in cases
- Prevalence of multiple comorbidities among COVID cases is 3%, consistent with findings from Africa (10% in Europe)
- CVD is most common comorbidity among ages 45+ and chronic lung disease is most common comorbidity among children <14 years
- Egypt, Somalia and Tunisia report 10–12% of their COVID cases among HCWs

Transition: guided by public health principles, economic and societal considerations

1. Evidence COVID-19 **transmission is controlled.**
2. **Sufficient public health and medical capacities** are in place
3. **Outbreak risks** in special settings are **minimized**
4. **Importation risks** can be **managed.**
5. **Communities** are aware, participate and **engaged** in the transition.



Maintaining Essential Health Services During COVID-19

● Problem

- Overwhelmed health system
- Reduced health workforce
- Increased direct & indirect mortality, e.g. Ebola

● Central component of national COVID-19 strategy plan



1. Purpose-designed governance and coordination



2. Context-relevant essential services



3. Service delivery settings and platforms and
4. Effective patient flow (screening, triage and targeted referral)



5. Re-distribute health workforce capacity



6. Maintain availability of essential medication, equipment and supplies

