



# PUBLIC HEALTH EMERGENCY OPERATIONS CENTER (PHEOC), ETHIOPIA

# PREPAREDNESS AND RESPONSE DAILY SITUATION REPORT ETHIOPIA

(Data reported as of 25 January 2021)

25 January 2021

ISSUE Nº

363

# **HIGHLIGHTS**

- There were 4,473 samples tested for COVID-19 within the last 24 hours.
- Three-hundred-sixty-five (365) COVID-19 cases detected among the tested people bringing the total confirmed cases to 134,132.
- Seven-hundred-eighty-three (783) cases recovered today which brings the total COVID-19 recovered cases to 120,180 in the country.
- Five (5) new COVID-19 related deaths occurred today bringing the total number of COVID-19 deaths to 2.071.
- There are 125 contacts of confirmed cases identified today.
- A total of 27,093 contacts of confirmed cases have been tested positive so far.
- There are 231 patients in severe condition in the treatment centers

# **COVID-19 NATIONAL UPDATE**

1,609,752
PASSENGERS SCREENED
FOR COVID-19 AT POES

340,054
RUMORS/ALERTS RECEIVED
AND INVESTIGATED

316,381 CONTACTS OF THE CONFIRMED CASES

257,927 SUSPECTED CASES DETECTED

1,924,136
TOTAL LABORATORY TESTS
DONE

134,132 TOTAL CONFIRMED CASE

120,180 TOTAL RECOVERED

2,071 TOTAL DEATH

# **COVID-19 GLOBAL UPDATE**

Access link for WHO COVID-19 monitoring dashboard: Total Number of COVID-19 Comfirmed Top Ten Countries/Territories with High COVID-19 Confirmed Cases Cases Globally United States of America 97,284,415 10,654,533 India Brazil 8,753,920 Russian Federation The United Kinadom 3.617.463 **New Confirmed** France 2,986,939 Cases\_Globally Italy 2,455,481 Germany 2.134.936 577,300 Spain 2,105,500 Colombia 1.987.418 New\_Confirmed Total Number of Deaths with Top Ten Countries/Territories with High COVID-19 Deaths\_Globally COVID-19 Globally United States of America 2,106,897 Brazil 215.243 India 153,339 Mexico 147,614 New Deaths with COVID-19 The United Kingdom 97.329 Italy 85,224 Globally France 72,494 Russian Federation 69.462 Iran (Islamic Republic of) 57,294 13,688 Germany 51.870 150K 200K 250K New Death Total COVID-19 Cases in Top Ten Countries in Europe with COVID-19 Cases COVID-19 Cases in Europe by Europe Country\_Today Russian Federation The United Kingdom The United King. 32,032,536 France France Country Name Italy 2,455,185 New COVID-19 Cases in 2,134,936 Turkey 1,609,990 Europe\_Today Poland 1,475,445 Ukraine 1.191.812 Turkey 166,047 944.042 New\_Confirmed Cumulative\_Confirmed Total Deaths with COVID-19 Deaths in Europe by Country\_Today Top Ten Countries in Europe with COVID-19 Deaths COVID-19 in Europe The United King. 706,238 Italy 85,162 France 72,484 Italy Name Country Name 69.462 349 55,041 New Deaths with 51,870 COVID-19 in Poland 35.363 Turkey Europe\_Today 24,933 Ukraine 21.861 4.364 Cumulative\_Death New Death Global Forecast/Prediction of Number of Cases for the Next Days Global Forecast/ Prediction of Number of Death for the Next Days New\_Confirmed New\_Death 0.6M 15K 86.514 Nov 2020 Sep 2020 Jan 2021 Sep 2020 Jul 2020 Nov 2020 Jan 2021 Date

Fig. 1: Summary of global COVID-19 situation as of January 25, 2021

Date

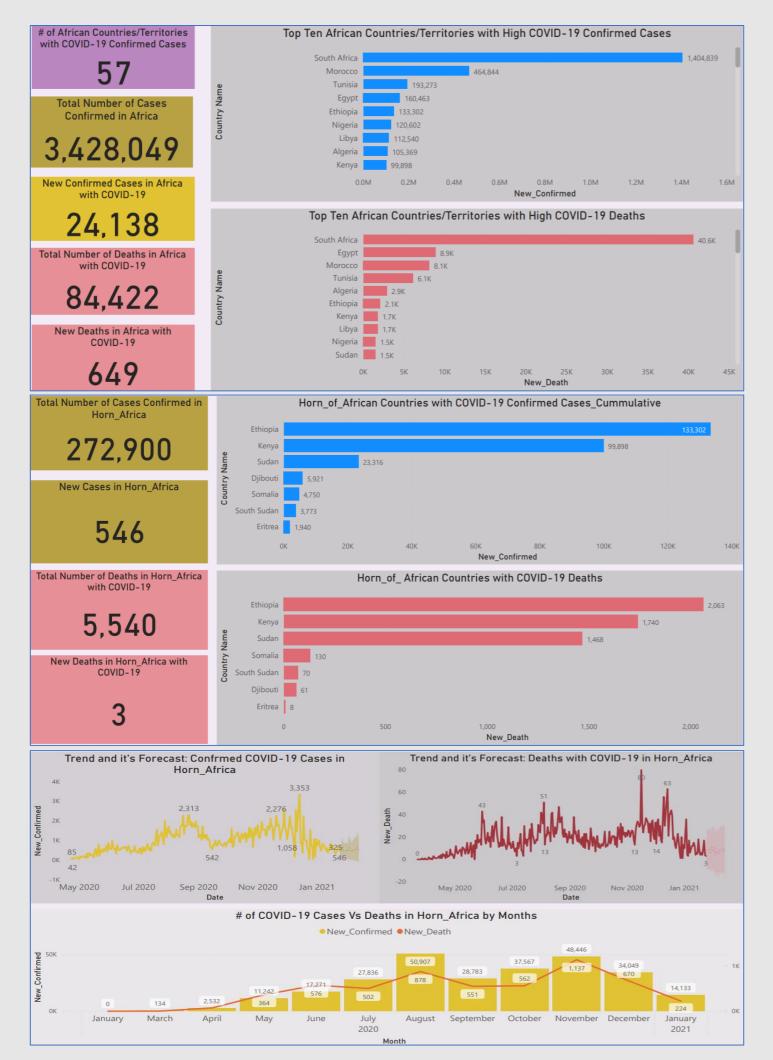


Fig. 2: Summary of COVID-19 situation in Africa as of January 25, 2021

# MAJOR COVID-19 PREPAREDNESS AND RESPONSE EFFORTS IN ETHIOPIA

### **BACKGROUND**

Ethiopia activated its IMS under the national PHEOC. The WHO and other partners are currently supporting in scaling up preparedness efforts and implementation of related recommendations suggested by the IHR Emergency Committee. Different layer so coordination platform revitalized and the PHEOC is working collaboratively with various agency representative, Partners, Embassies, hospitality sector, Industrial parks and others. There is strong communication and updating from other countries through IHR-NFPs. The sub-national level is well engaged in the preparedness and response efforts. Joint regular media briefing sessions are being conducted. The first confirmed case of COVID-19 was detected on 13th March 2020; this was a day after WHO declared COVID-19 as a pandemic.

### **COORDINATION and COLLABORATION:**

- The national PHEOC is functioning 24/7 to coordinate the response efforts. During the night shift, the assigned night duty staffs maintain the critical functions.
- Daily morning briefing of the IMS core staff and agency representatives is being conducted on daily basis.

# **EPIDEMIOLOGY and LABORATORY SURVEILLANCE:**

# Confirmed COVID-19 cases, recovery and death

- Today, 365 cases are newly detected bringing the total number of COVID-19 confirmed cases to 134,132 in the country.
- Today there are 783 newly recovered cases bringing the total number of COVID-19 recovered cases to 120,180.

Table 1: Summary of laboratory tests, new cases and deaths nationally as of January 25, 2021

Regions/City Admin	# Tests conducted	# of New Cases	Test positivity rate	# of New deaths
Addis Ababa	2842	247	8.7%	2
Afar	126	0	0.0%	0
Amhara	40	7	17.5%	1
Benishangul Gumuz	-	-	-	-
Dire Dawa	48	6	12.5%	0
Gambella	-	-	-	-
Harari	16	0	0.0%	0
Oromia	780	91	11.7%	2
Sidama	197	10	5.1%	0
SNNPRS	272	4	1.5%	0
Somali	-	-	-	-
Tigray	-	-	-	-
Total	4473	365	8.2%	5

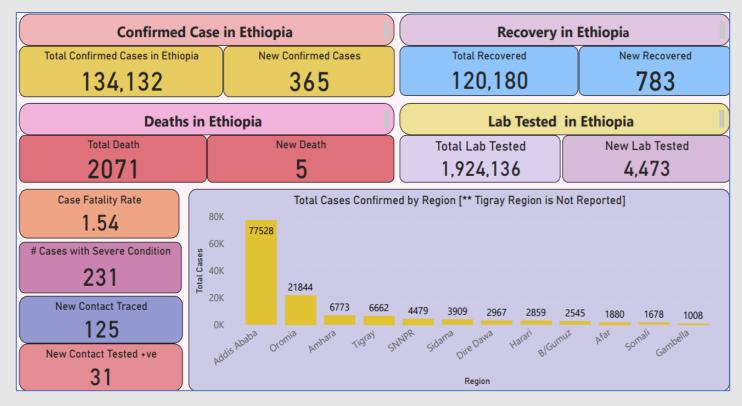


Fig. 3: Summary of COVID-19 situation in Ethiopia as of January 25, 2021

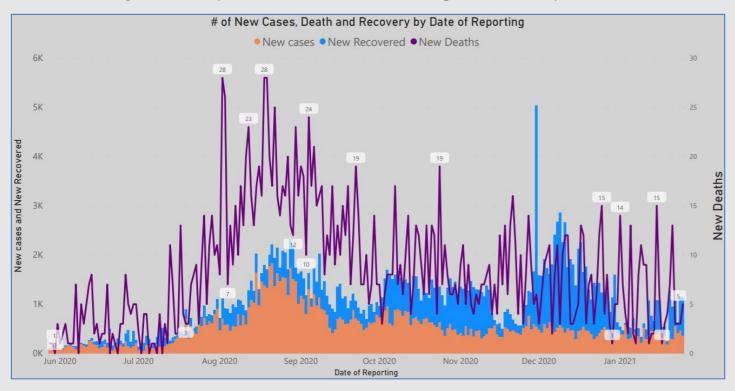


Fig. 4: Trend of COVID-19 confirmed cases, death and recovery by date of reporting until January 25, 2021

# **Laboratory test:**

- 4,473 laboratory samples were tested for COVID-19 in the last 24 hours; 365 (8.17%) positives and 4,108 (91.83%) negatives were detected.
- As of January 25, 2021, 1,924,136 samples have been tested for COVID-19 by laboratories in the country.

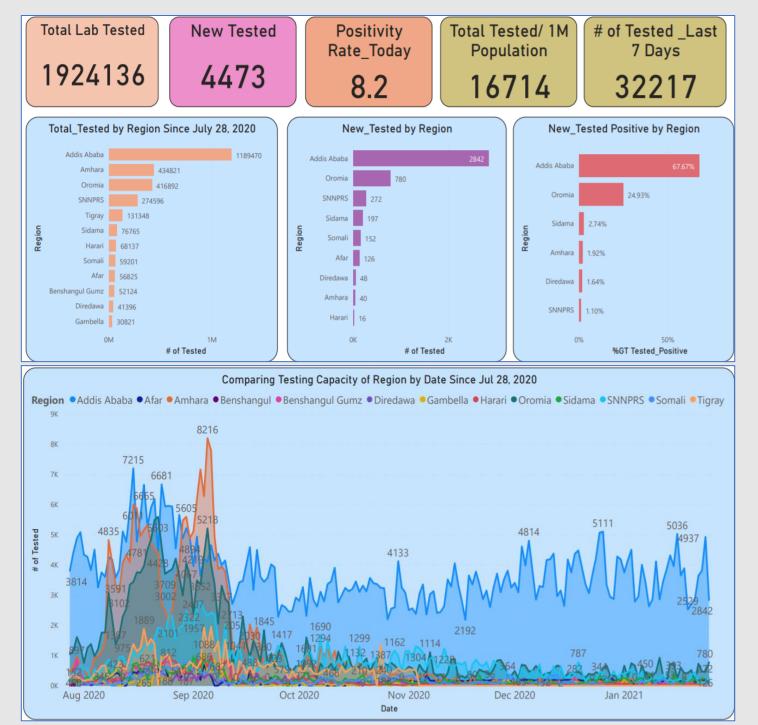


Fig. 5: Summary of Laboratory testing related activity as of January 25, 2021

# Contact tracing and follow-up:

- As of January 25, 2021:
  - o A total of 316,381 contacts of confirmed cases have been identified. Of these 125 contacts are identified today.
  - o 288,444 (89.90%) have completed 14 days follow-up, while 1,244 contacts are still on follow-up.
  - Only 716 (0.23%) contacts developed COVID-19 suggestive symptoms. Of these, 566 (79.05%) were tested positive.
  - Overall, 27,093 (8.56%) of the contacts (symptomatic plus asymptomatic) were tested positive, which are among the currently existing confirmed positive cases.

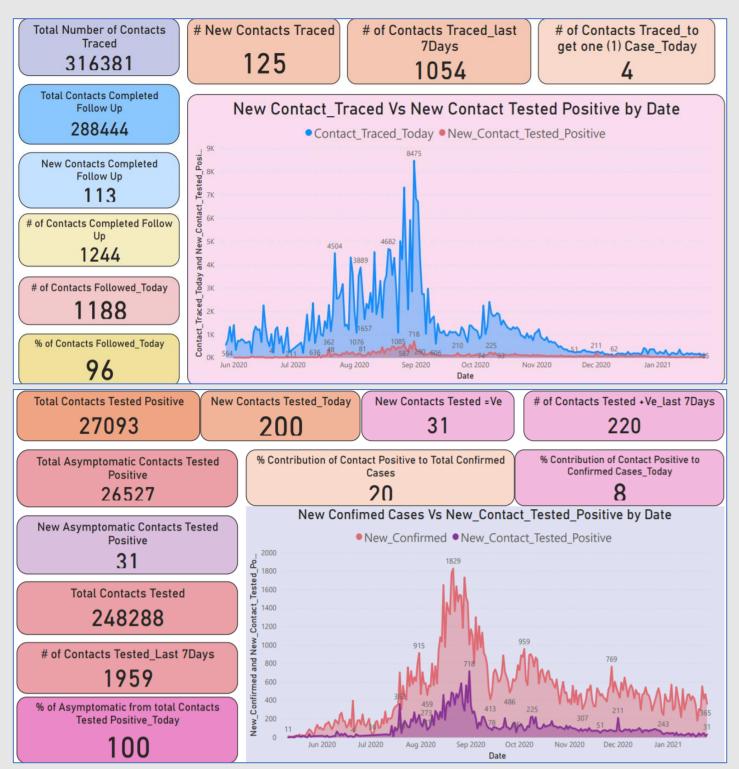


Fig. 6: Summary of COVID-19 cases contact tracing update in Ethiopia as of January 25, 2021

#### Rumors collection and verification from all sources

- As of January 25, 2021:
  - o 340,054 rumors/alerts have been received and investigated. Of these, 32 rumors are reported today.
  - 257,927 (75.84%) of the rumors/alerts have fulfilled the suspected case definition. Of these, 9 are reported today.
  - 6,122 calls were received and responded via toll-free call centers on January 25, 2021. Of these, 2,681 (43.79 %) calls were COVID-19 related calls and 23 rumors were received.

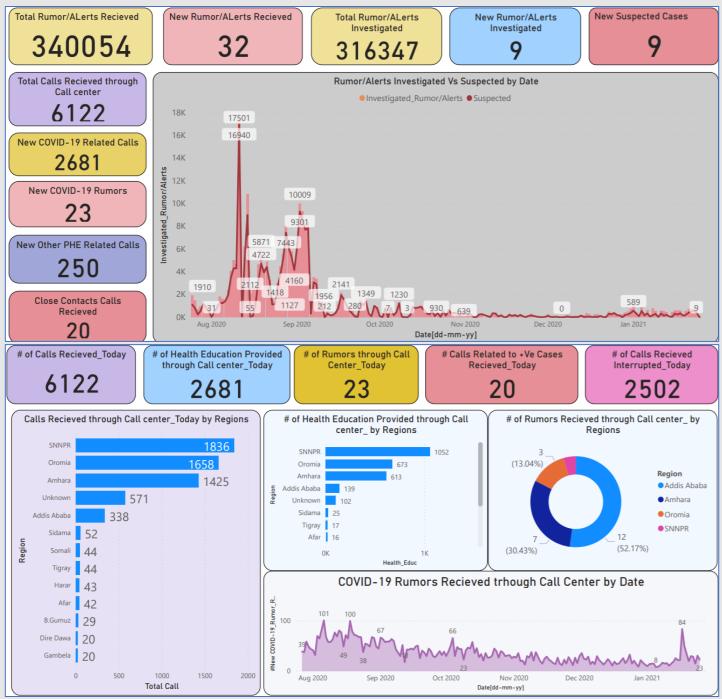


Fig. 7: Summary of rumors collection and verification as of January 25, 2021

# **PASSENGERS SCREENING:**

- 1,609,752 travelers have arrived into the country and screened for COVID-19 since January 24, 2020. Among these 585,047 (36.34%) arrived via Bole International Airport while 1,024,705 (63.65%) entered though other port of entries.
- In the last 24 hours, 1,035 passengers have arrived via Bole International Airport and 2,942 people through other point of entries.
- A total of 72 alerts are detected during passengers screening so far.
- Follow-up of the quarantine implementation ongoing for passengers coming from abroad and returnees from different countries.
- Health screening for arriving international passengers and returnees are ongoing.

#### **Quarantined Passengers and Returnees Related Activities:**

- Based on Directive 30/2020 there is no Institutional Quarantine at the national level because all international passengers who pass through the point of entries should bring negative valid RT-RCR test result.
- The total number of population quarantined since March 23 to October 3, 20202 was 69,383.

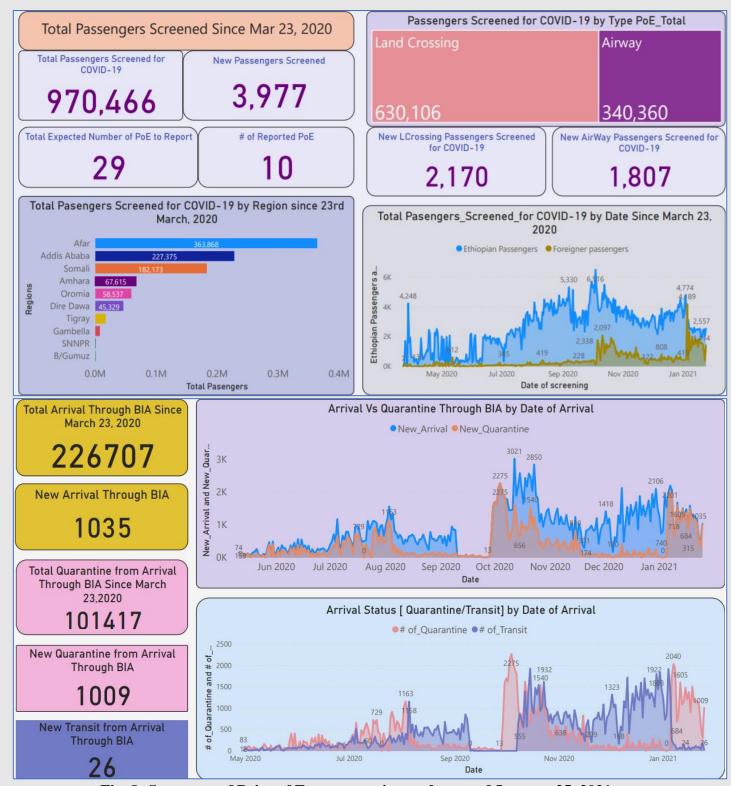


Fig. 8: Summary of Point of Entry screening update as of January 25, 2021

# **CASE MANAGEMENT AND INFECTION PREVENTION AND CONTROL (IPC):**

- Today there are 783 newly recovered cases bringing the total number of COVID-19 recovered cases to 120,180.
- There are 231 patients in severe condition and all the other patients are on medical care in stable condition.
- Today 8 suspected cases are admitted.
- Two initially suspected cases were discharged after laboratory test became negative today.
- There are no suspected cases on admission waiting for laboratory test results

#### **Home Based Isolation and Care:**

- Since Home Based Isolation and Care (HBIC) is started in Ethiopia:
  - o A total 82,179 (811 new) COVID-19 confirmed cases are followed in the HBIC.
  - o 76,730 (735 new) of them have recovered in the HBIC.
  - o 5,808 cases are currently on HBIC.
  - o 11 COVID-19 related deaths have occurred in the HBIC.
  - o 724 (0 new) cases have been transferred from treatment centers to HBIC.
  - o 354 (0 new) cases have been transferred from HBIC to treatment centers.

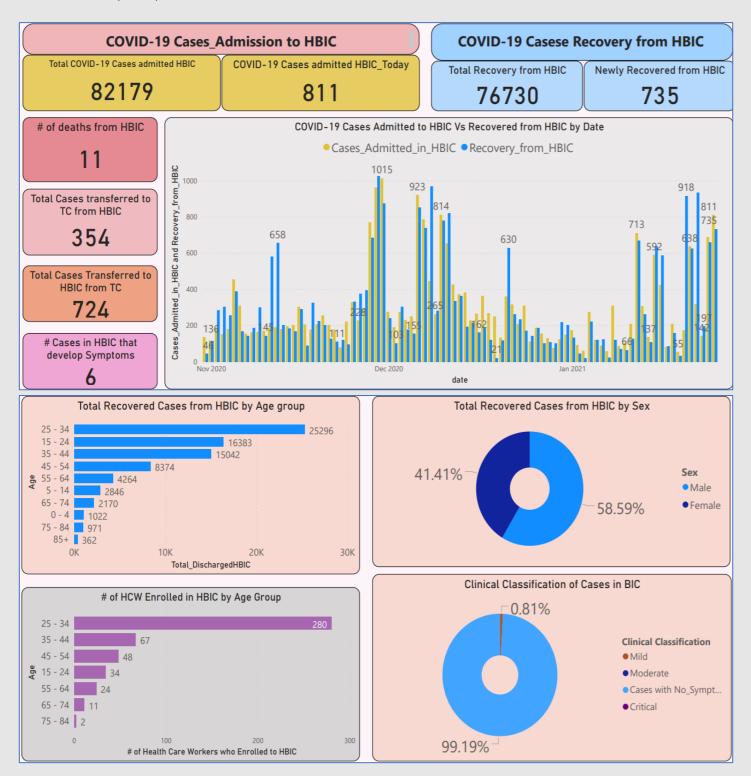


Fig. 9: Summary of update on Home Based Isolation and Care as of January 25, 2021

# LOGISTICS, ADMINISTRATION AND RELATED ACTIVITIES:

• There is ongoing distribution of PPE, Viral Transport Media (VTM), swabs, pharmaceuticals and other medical supplies to isolation and treatment centers.

# **RISK COMMUNICATION AND COMMUITY ENGAGEMENT (RCCE):**

- Media monitoring and daily update on COVID -19 dashboard is done.
- Daily Press release through mass Media is done.
- Routine follow up and technical support provided for all regional RCC team
- Daily Key messages on COVID-19 shared on social media.





# **HEALTH EVIDENCE SUMMARY AND COVID-19 UPDATES:**

#### **Public Health Advice:**

- For any individual confirmed to have COVID-19 and who is candidate for Home Based Isolation and Care:
  - o Properly isolate from other family members.
  - o Take full responsibility in prevention of transmission
  - o Strictly adhere to the National Directive of Home-Based Isolation& Care.
  - o Provide reliable information during regular follow up either by phone or home visit.
  - Report to nearest health facilities/follow up team in case of any emergency, appearance of new symptoms or worsening of existing symptoms.
- The numbers of COVID-19 cases are increasing rapidly due to the presence of community transmission. Anyone of us can be the next person to acquire COVID-19, but we can prevent it if we act now. Therefore, let us support one another in this pandemic reminding others of the recommended preventions could save their lives.
- Considering the increase in transmission of COVID-19, the EPHI would like to advise the public to strictly adhere to all precautionary measures. Accordingly, we should:
  - Maintain physical distancing.
  - Wash our hands with water and soap frequently.
  - Avoid mass gatherings.
  - O Cover our mouth and nose with face/cloth mask when going outdoors.

# National/Regional Official websites, social media pages and toll-free hotline for COVID-19 information

MOH/EPHI/Region	Facebook page or Twitter/telegram/YouTube Channel	Toll-free hotline	Email address
Ethiopian Public Health Institute Main Website	https://www.ephi.gov.et/	8335	ephieoc@gmail.com
Ethiopian Public Health Institute COVID-19 Website	https://covid19.ephi.gov.et/		
Ethiopian Public Health Institute Facebook Page	https://www.facebook.com/ephipage/		
Ethiopian Public Health Institute Twitter Page	https://twitter.com/EPHIEthiopia		
Ethiopian Public Health Institute Telegram Channel	https://t.me/EthPHI		
Ethiopian Public Health Institute YouTube Channel	https://www.youtube.com/channel/UCvvTze Y-IJiQfEFBULH9Mkw		
Ministry of Health, Ethiopia Website	www.moh.gov.et	952	
Ministry of Health, Ethiopia Facebook Page	https://www.facebook.com/EthiopiaFMoH/		
Afar Regional Health Bureau	https://www.facebook.com/afarrhb.org/	6220	afarpheoc@gmail.com
Amhara Regional Health Bureau	https://www.facebook.com/Amhara- Healthbureau-682065755146948/	6981	aphieoc@gmail.com
Benishangul Gumuz Regional Health Bureau	https://www.facebook.com/Benishangul-Gumuz-Health-Bureau-1676282159265517/	6016	bgpheoc@gmail.com
Gambela Regional Health Bureau	https://fb.me/gambellaregionhealthbureau	6184	gambellapheoc@gmail.c
Harari Regional Health Bureau	https://www.facebook.com/Harari-Regional-Health-Bureau-1464182130355007/	6864	hrhbpheoc@gmail.com
Oromia Regional Health Bureau	https://www.facebook.com/OromiaHealth/	6955	oromiapheoc@gmail.co m
Somali Regional Health Bureau	https://www.facebook.com/srhbdotcom/	6599	somalipheoc@gmail.com
SNNP Regional Health Bureau	https://www.facebook.com/snnprhealthburea u/?ref=br_rs	6929	snnppheoc@gmail.com
Tigray Regional Health Bureau	https://www.facebook.com/tigrayrhb/	6244	tigraypheoc@gmail.com
Sidama PHEM			sidamapheoc@gmail.co m
Dire Dawa city Administration Health Bureau	https://www.facebook.com/Dire-Dawa-Administration-Health-Bureau-1371606266279524/	6407	ddpheoc@gmail.com
Addis Ababa City Administration Health Bureau	https://www.facebook.com/aahb.gov.et/	6406	aapheoc@gmail.com
Ethiopian COVID-19 monitoring platform	https://www.covid19.et/		

# **Global Official Sources of COVID-19 Updates and Evidence:**

Source	Link	
WHO Coronavirus (COVID-19) dashboard	https://covid19.who.int/	
Africa CDC Dashboard, COVID-19 Surveillance	https://au.int/en/covid19	
Dashboard		
WHO COVID-19 daily situation reports	https://www.who.int/emergencies/diseases/novel-coronavirus-	
	2019/situation-reports	
WHO Academy mobile learning app for health	https://play.google.com/store/apps/details?id=org.who.WHOA	
Ongoing and completed COVID-19 studies listed on	https://clinicaltrials.gov/ct2/who_table	
the World Health Organization's International Clinical		
Trials Registry Platform (WHO ICTRP)		

# **Web-Search Summary: COVID-19 Related Health Evidence:**

Articles/Comment/	Summary
Correspondence/ Editorials Evolution of antibody immunity to SARS-CoV-2	• Severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2) has infected 78 million individuals and is responsible for over 1.7 million deaths to date.
https://doi.org/10.1038/s41586-021- 03207-w	Infection is associated with development of variable levels of antibodies with neutralizing activity that can protect against infection in animal models 1,2.
	Antibody levels decrease with time, but the nature and quality of the memory B cells that would be called upon to produce antibodies upon re-infection has not been examined. Here we report on the humoral memory response in a cohort
	of 87 individuals assessed at 1.3 and 6.2 months after infection.  • We find that IgM, and IgG anti-SARS-CoV-2 spike protein receptor binding
	domain (RBD) antibody titres decrease significantly with IgA being less affected. Concurrently, neutralizing activity in plasma decreases by fivefold in pseudotype virus assays. In contrast, the number of RBD-specific memory B cells is unchanged. Memory B cells display clonal turnover after 6.2 months, and the antibodies they average have greater corrected by memory attacks.
	and the antibodies they express have greater somatic hypermutation, increased potency and resistance to RBD mutations, indicative of continued evolution of the humoral response.
	• Analysis of intestinal biopsies obtained from asymptomatic individuals 4 months after the onset of coronavirus disease-2019 (COVID-19), using
	immunofluorescence, or polymerase chain reaction, revealed persistence of SARS-CoV-2 nucleic acids and immunoreactivity in the small bowel of 7 out of 14 volunteers. We conclude that the memory B cell response to SARS-CoV-2 evolves between 1.3 and 6.2 months after infection in a manner that is
	consistent with antigen persistence.
Early High-Titer Plasma Therapy to Prevent Severe Covid-19 in Older Adults	Therapies to interrupt the progression of early coronavirus disease 2019     (Covid-19) remain elusive. Among them, convalescent plasma administered to hospitalized patients has been unsuccessful, perhaps because antibodies
https://www.nejm.org/doi/10.1056/ NEJMoa2033700	<ul> <li>should be administered earlier in the course of illness.</li> <li>We conducted a randomized, double-blind, placebo-controlled trial of convalescent plasma with high IgG titers against severe acute respiratory</li> </ul>
	syndrome coronavirus 2 (SARS-CoV-2) in older adult patients within 72 hours after the onset of mild Covid-19 symptoms. The primary end point was severe respiratory disease, defined as a respiratory rate of 30 breaths per
	minute or more, an oxygen saturation of less than 93% while the patient was breathing ambient air, or both. The trial was stopped early at 76% of its projected sample size because cases of Covid-19 in the trial region decreased
	considerably and steady enrollment of trial patients became virtually impossible.
	• A total of 160 patients underwent randomization. In the intention-to-treat population, severe respiratory disease developed in 13 of 80 patients (16%) who received convalescent plasma and 25 of 80 patients (31%) who received
	placebo (relative risk, 0.52; 95% confidence interval [CI], 0.29 to 0.94; P=0.03), with a relative risk reduction of 48%. A modified intention-to-treat
	analysis that excluded 6 patients who had a primary end-point event before infusion of convalescent plasma or placebo showed a larger effect size (relative risk, 0.40; 95% CI, 0.20 to 0.81). No solicited adverse events were
	<ul> <li>observed.</li> <li>Early administration of high-titer convalescent plasma against SARS-CoV-2 to mildly ill infected older adults reduced the progression of Covid-19.</li> </ul>
Circuits between infected macrophages and T cells in SARS-	• Some patients infected with Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) develop severe pneumonia and the acute respiratory distress
CoV-2 pneumonia https://doi.org/10.1038/s41586-020- 03148-w	syndrome (ARDS)1. Distinct clinical features in these patients have led to speculation that the immune response to virus in the SARS-CoV-2-infected alveolus differs from other types of pneumonia2. We collected bronchoalveolar
	lavage fluid samples from 88 patients with SARS-CoV-2-induced respiratory failure and 211 patients with known or suspected pneumonia from other pathogens and subjected them to flow cytometry and bulk transcriptomic profiling. We performed single-cell RNA-seq on 10 bronchoalveolar lavage
	fluid samples collected from patients with severe COVID-19 within 48 hours of intubation. In the majority of patients with SARS-CoV-2 infection, the

of intubation. In the majority of patients with SARS-CoV-2 infection, the

Guide	alveolar space was persistently enriched in T cells and monocytes. Bulk and single-cell transcriptomic profiling suggested that SARS-CoV-2 infects alveolar macrophages, which in turn respond by producing T cell chemoattractants. These T cells produce interferon-gamma to induce inflammatory cytokine release from alveolar macrophages and further promote T cell activation. Collectively, our results suggest that SARS-CoV-2 causes a slowly unfolding, spatially limited alveolitis in which alveolar macrophages harboring SARS-CoV-2 and T cells form a positive feedback loop that drives persistent alveolar inflammation.
Considerations for quarantine of	https://www.who.int/publications/i/item/considerations-for-quarantine-of-
individuals in the context of containment for coronavirus	individuals-in-the-context-of-containment-for-coronavirus-disease-(covid-19)
disease (COVID-19)	
Home care for patients with	https://www.who.int/publications/i/item/home-care-for-patients-with-suspected-
suspected or confirmed COVID-19	novel-coronavirus-(ncov)-infection-presenting-with-mild-symptoms-and-
and management of their contacts	management-of-contacts
Global COVID-19 Clinical	https://www.who.int/publications/i/item/WHO-2019-nCoV-Clinical_CRF-2020.4
Platform: Rapid core case report form (CRF)	
Global COVID-19 Clinical	https://www.who.int/publications/i/item/WHO-2019-nCoV-Pregnancy_CRF-
Platform: Pregnancy Case Report	2020.5
Form (CRF)	
Interim Considerations for Health	https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-
Departments for SARS-CoV-2	shelters/testing.html
Testing in Homeless Shelters and	
Encampments	
WHO COVID-19 Preparedness	https://www.who.int/publications/m/item/who-covid-19-preparedness-and-
and Response Progress Report – 1	response-progress-report1-february-to-30-june-2020
February to 30 June 2020	
Reagent calculator for portal	https://www.who.int/publications/m/item/reagent-calculator-for-portal
Water, sanitation, hygiene, and	https://www.who.int/publications/i/item/water-sanitation-hygiene-and-waste-
waste management for SARS-	management-for-the-covid-19-virus-interim-guidance
CoV-2, the virus that causes	
COVID-19 (Interim guidance)	
Considerations for implementing	https://www.who.int/publications/i/item/WHO-2019-nCoV-neglected-tropical-
mass treatment, active case-	diseases-2020-1
finding and population-based	
surveys for neglected tropical	
diseases in the context of the	
COVID-19 pandemic	
Safe Eid al Adha practices in the	https://www.who.int/publications/i/item/safe-eid-al-adha-practices-in-the-context-
context of COVID-19: Interim	of-covid-19-interim-guidance
guidance	
Detention Center COVID19	FmoH, july-2020
Prevention and Management	I mori, jury 2020
Interim Guide	
(Volume 1)	
NATIONAL COMPREHENSIVE	http://www.moh.gov.et/ejcc/sites/default/files/2020-
COVID-19 MANAGEMENT	04/COVID% 2019% 20Handbook% 20for% 20health% 20professionals% 20FMOH
HANDBOOK (EFMoH)	%202020.pdf
Resources and Guidance (CDC)	https://www.cdc.gov/coronavirus/2019-ncov/php/open-america/contact-tracing-
(020)	resources.html





The above presented Quick Reader (QR) code takes you to a portal that you can access updates and all COVID-19 related information available (https://www.ephi.gov.et/index.php/public-health-emergency/novel-corona-virus-update)

#### DISCLAIMER

Figures presented in this situation report are pulled from official releases of the World Health Organization, Other sources from the web, as well as report compiled by the National Incidence Response Team

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