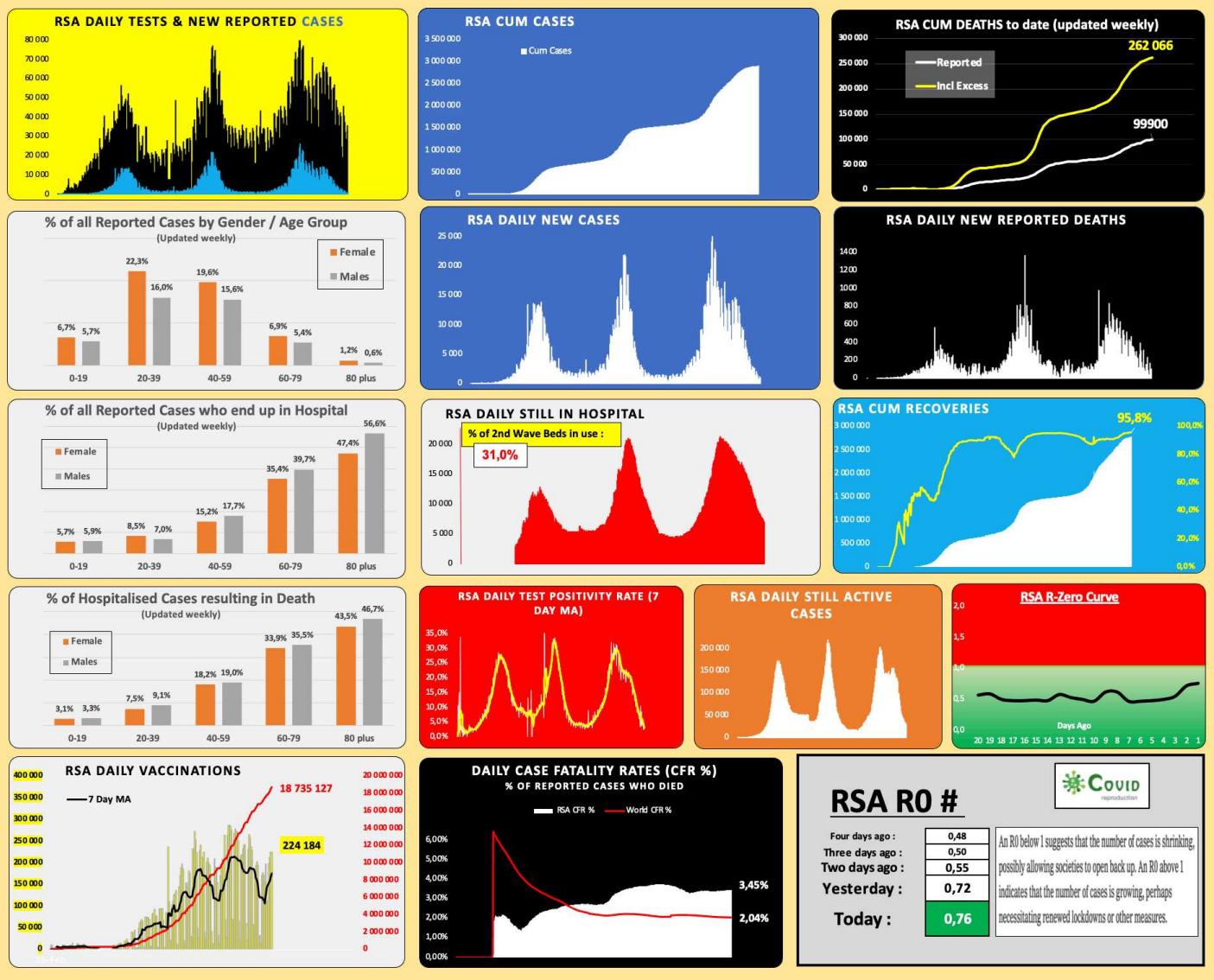


HarryG COVID-19 StatsPack

Page 1

Deteriorating Improving Against Previous Day

Cum Cases		Daily Cases		RSA COVID-19 DASHBOARD as at: 08-Oct-21	Daily Still in Hospital	Case Fatality Rates (CFR): Reported Cases Hospital Cases		Vaccinations:	Time to achieve Govt Target of 41m vaccs			
2 909 757	989	7058	3,45%	21,63%	Daily Avg	82 899	1,34	Yrs				
Still Active +Cases	Cum Cases p mill PoP	Cum Deaths p mill PoP	7 Day MA Vaccs per day	175 681	0,63	Yrs						
29 622	48 595	1676	Total to date:	18 735 127								
Deaths Ages Avg	Ages Median	Deaths Min Age	Deaths Max Age	Cum Tests	Daily Tests							
62,6	57,1	0,2	108	17 898 602	33 904							
Female :	56,7%	51,6%	2,95%	Cum Deaths	0,17%	0,438%						
Male :	43,3%	48,4%	3,61%	Yesterday	Reported Deaths	Incl Excess Deaths						
04-Oct					Projected to end 2021:	Reported Deaths	Incl Excess Deaths					



Data as at: 07 October 2021 Unless otherwise indicated

hgdg 08 October 2021

RSA Provinces detailed daily Data and Trends Jan 2020 to Mch 2022

Page 1.1



Data as at: 07 October 2021

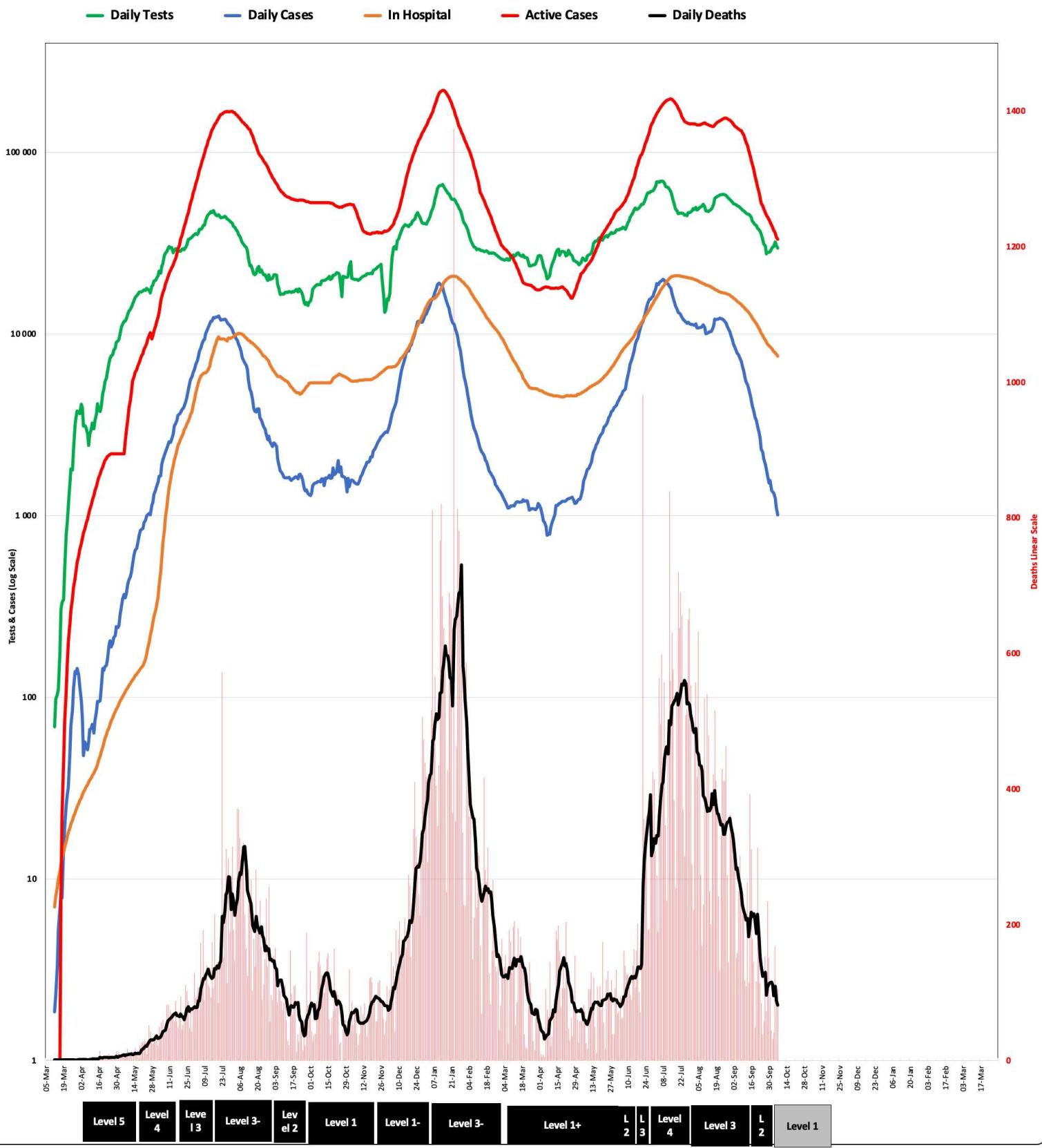
Unless otherwise indicated

hdg

08 October 2021

RSA Daily Testing v Daily Cases v Hospitalisations v Daily Deaths (7Day MA)

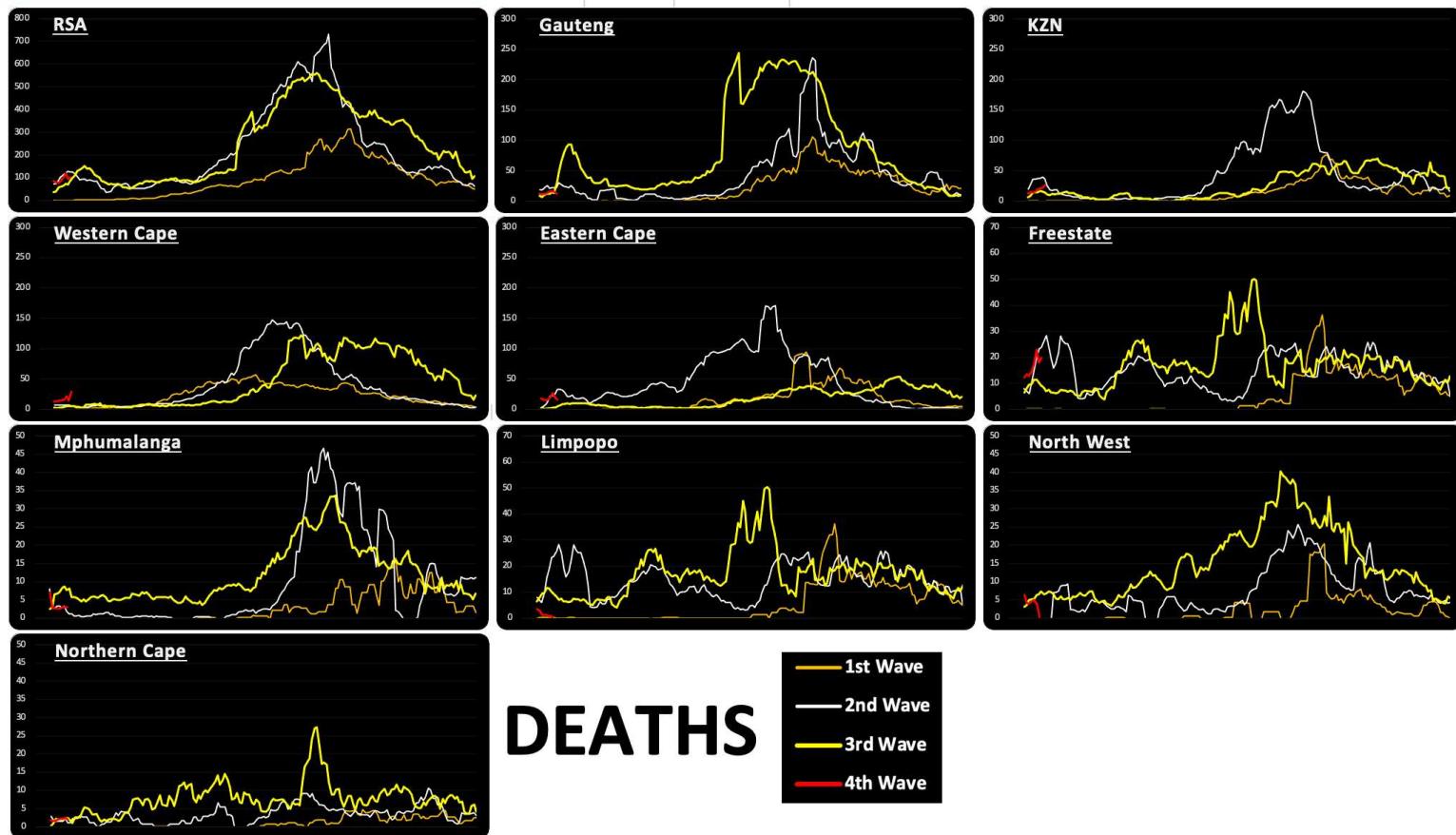
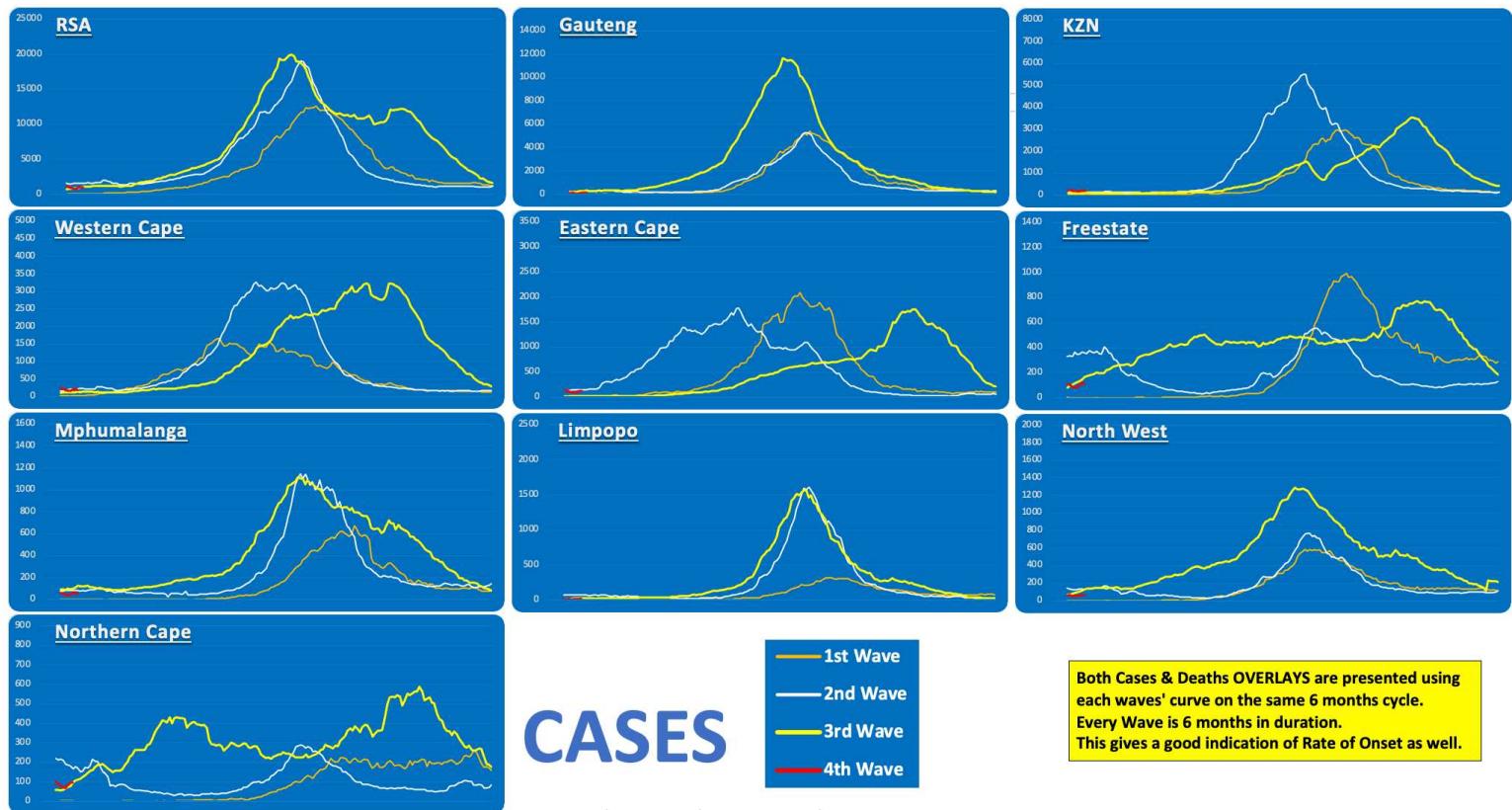
Page 2



Data as at: 07 October 2021

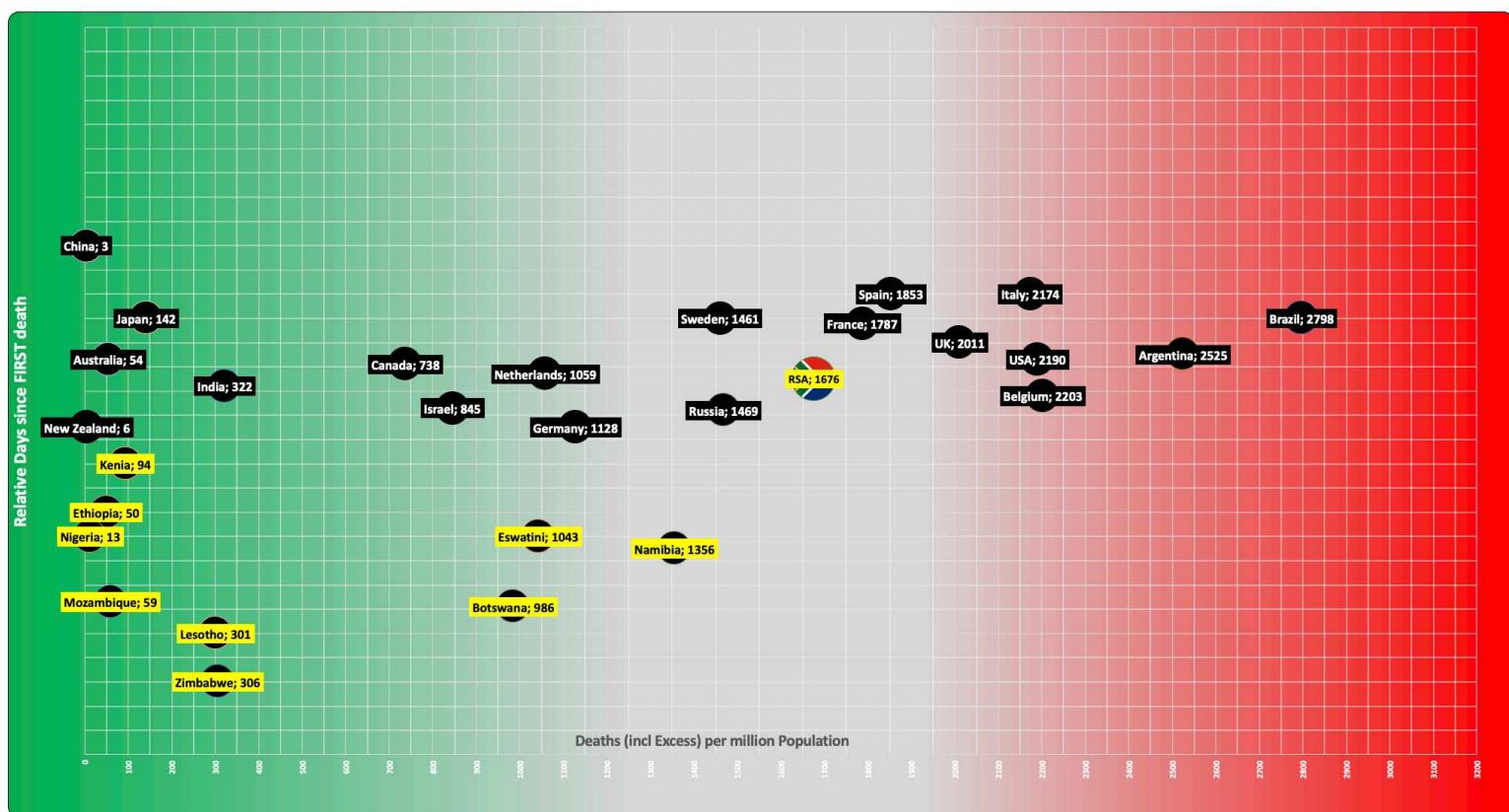
Unless otherwise indicated

hdg 08 October 2021

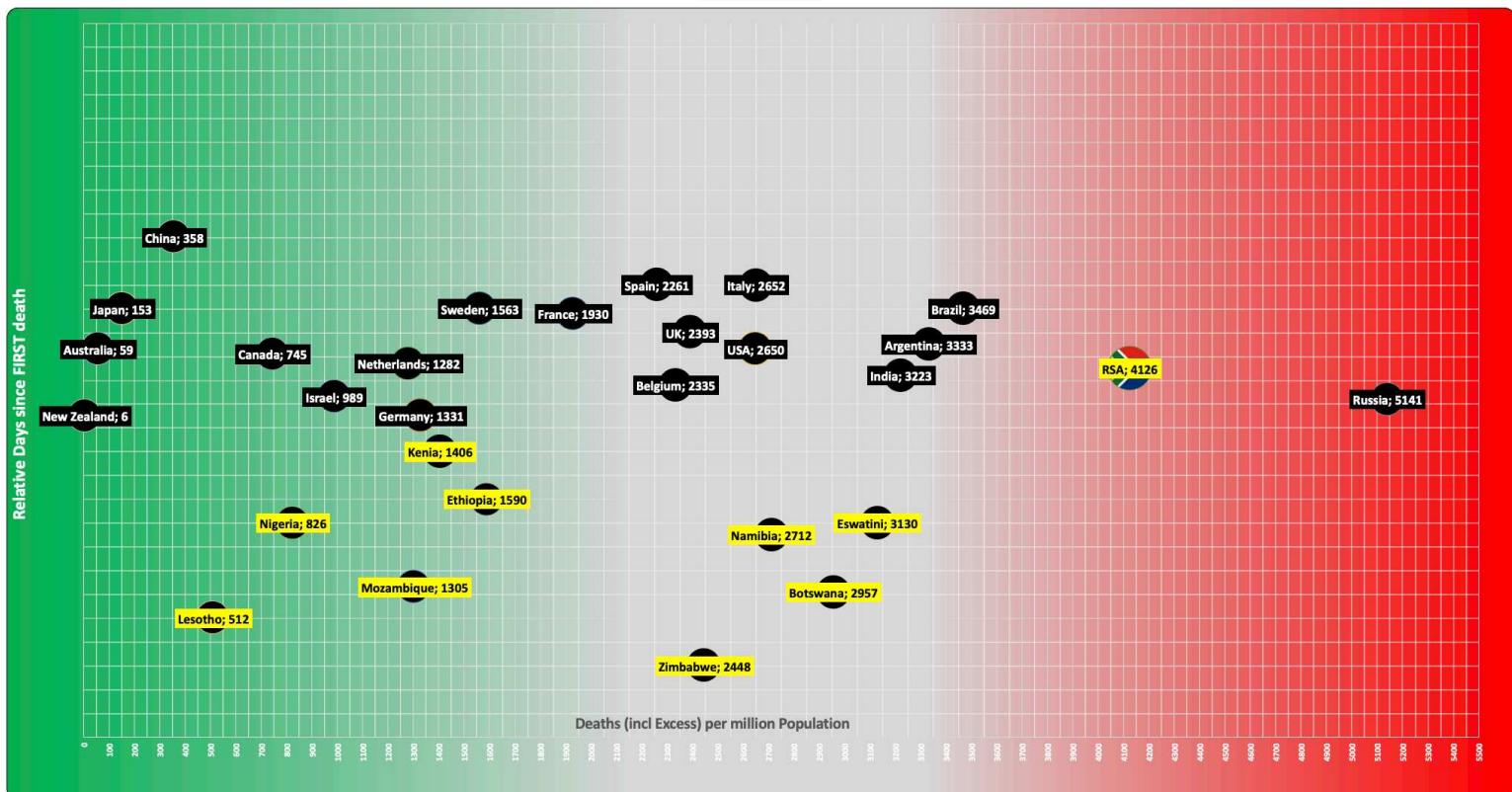


Selected Countries' **REPORTED DEATHS** per mill PoP

Page 2.2

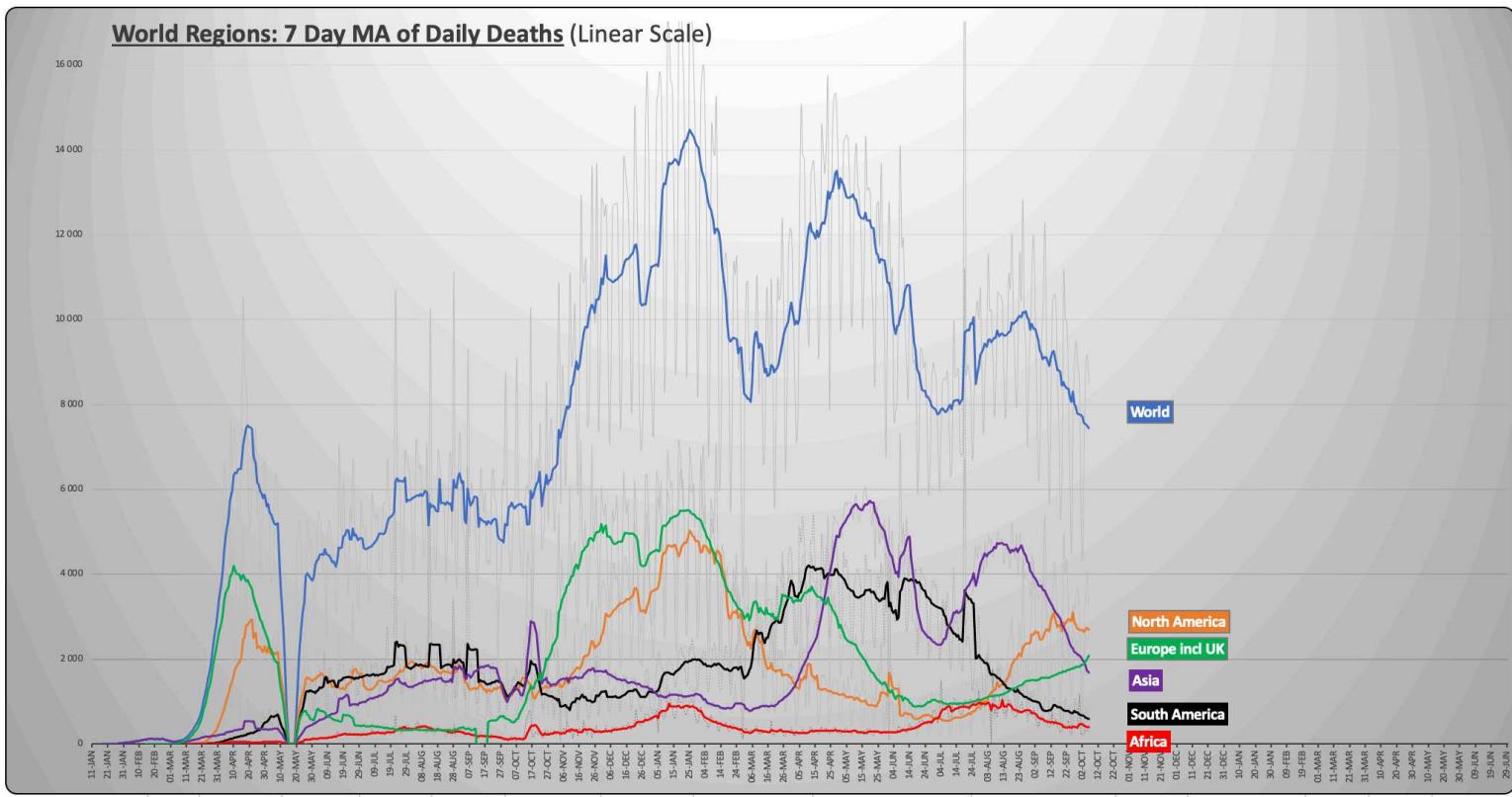
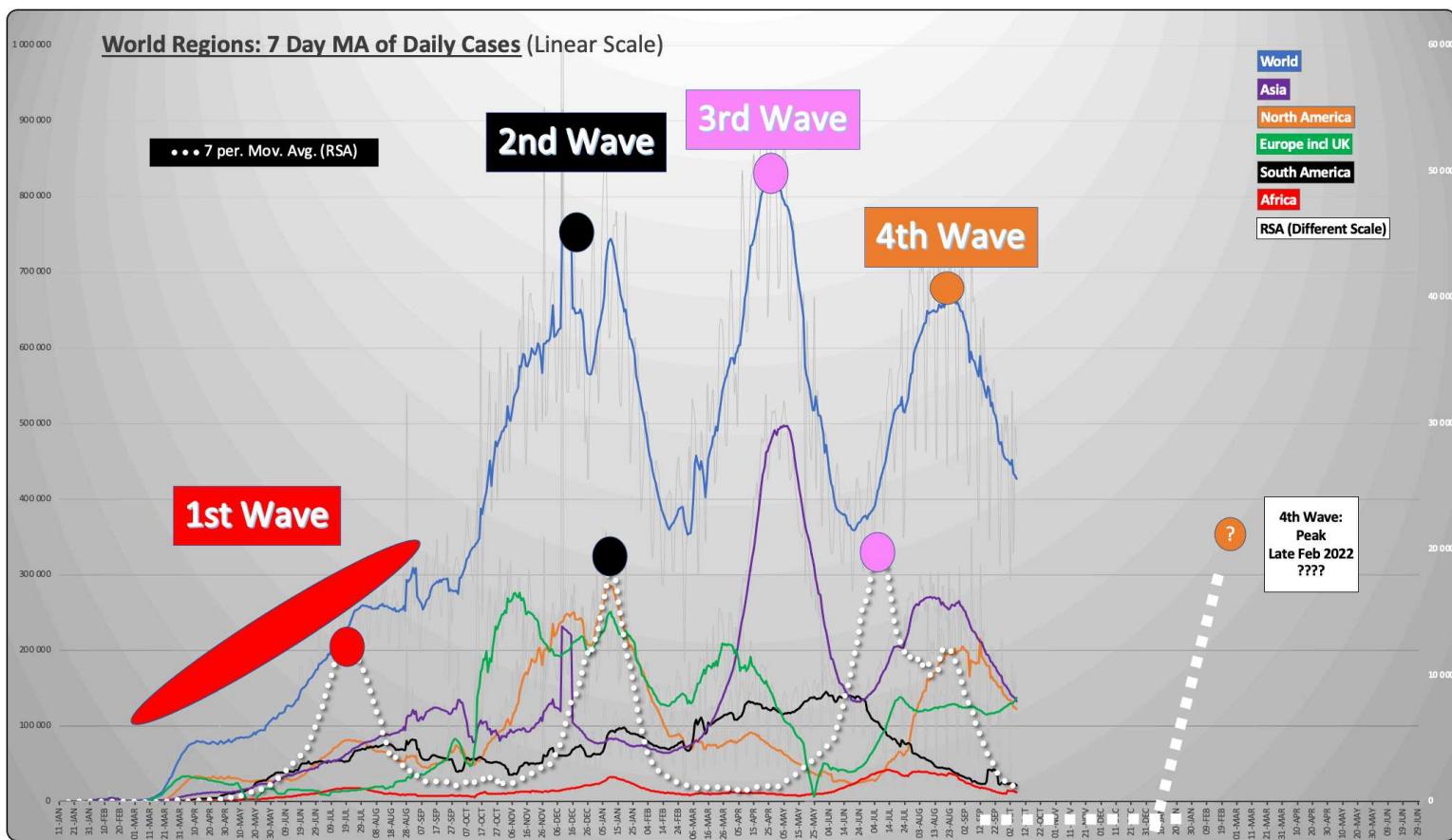


Selected Countries' Deaths incl EXCESS DEATHS per mill PoP (where data available)



7 Day Moving Average of Daily Reported Deaths & Cases by World Region

Page 3.0



Data as at: 08 October 2021 Unless otherwise indicated

hdg 08 October 2021

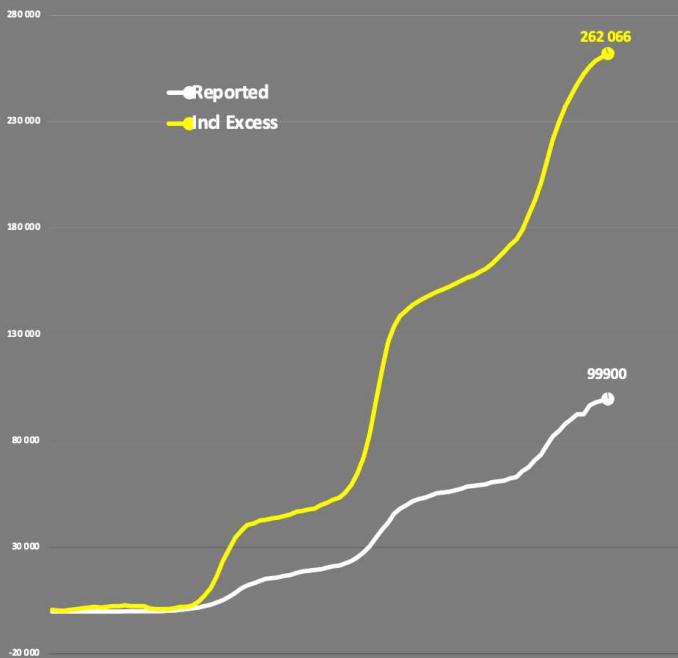
RSA Cum & Projected Deaths (Reported & Incl Excess)

As at : 11 September 2021

Page 4

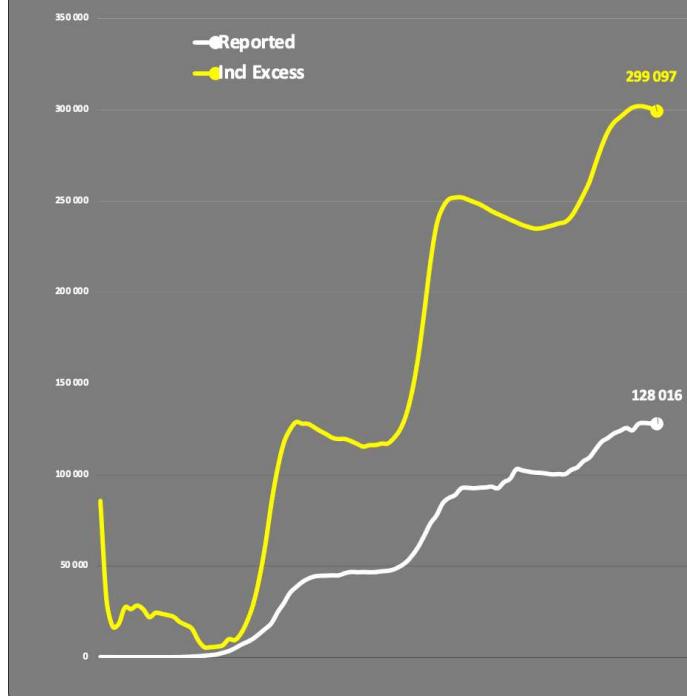
RSA CUM DEATHS (updated weekly)

Assuming 90% of Excess Deaths are Covid related.

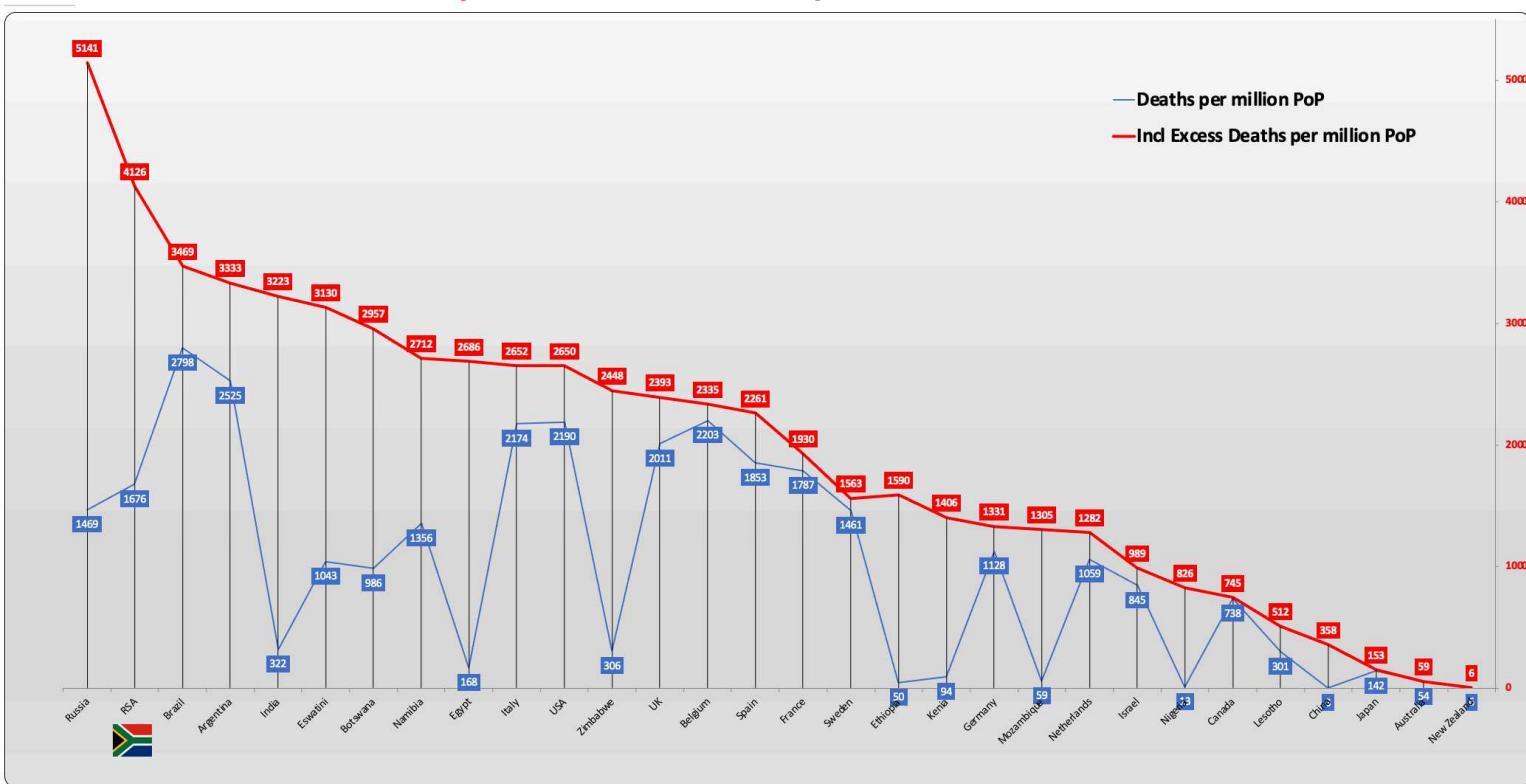


RSA COVID DEATHS PROJECTED TO end 2021

Assuming 90% of Excess Deaths are Covid related.



Selected Countries' Current Reported & Excess Deaths per million PoP



Data as at: 11 September 2021

Unless otherwise indicated

hdg 08 October 2021

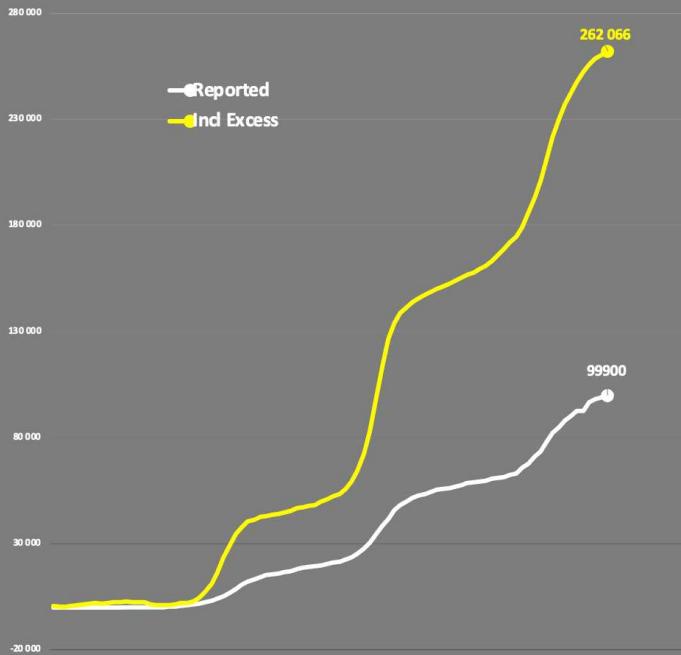
RSA Cum & Projected Deaths (Reported & Incl Excess)

As at : 02 October 2021

Page 4

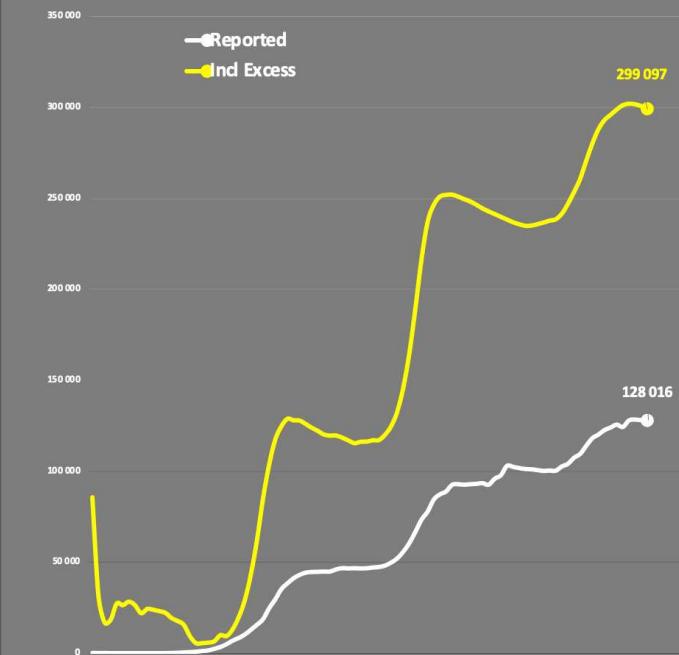
RSA CUM DEATHS (updated weekly)

Assuming 90% of Excess Deaths are Covid related.

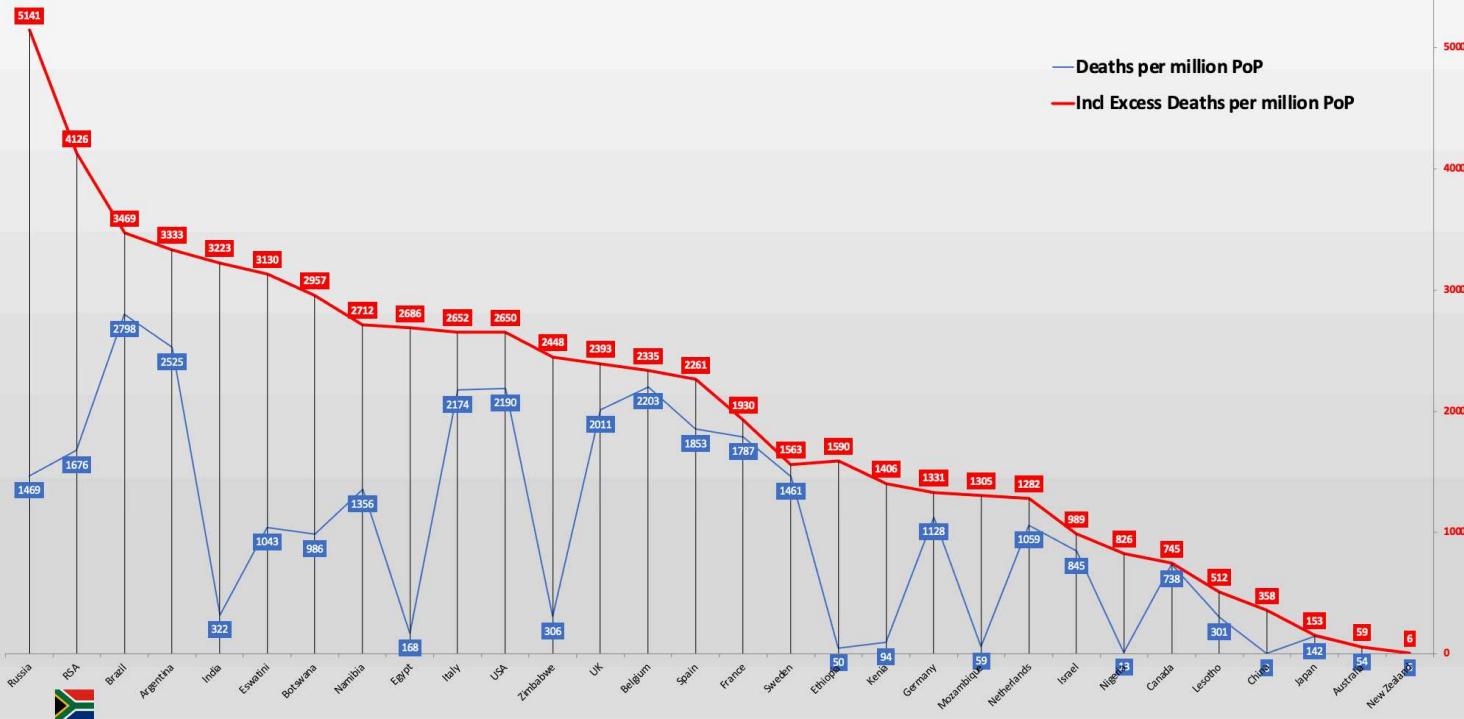


RSA COVID DEATHS PROJECTED TO end 2021

Assuming 90% of Excess Deaths are Covid related.



Selected Countries' Current Reported & Excess Deaths per million PoP



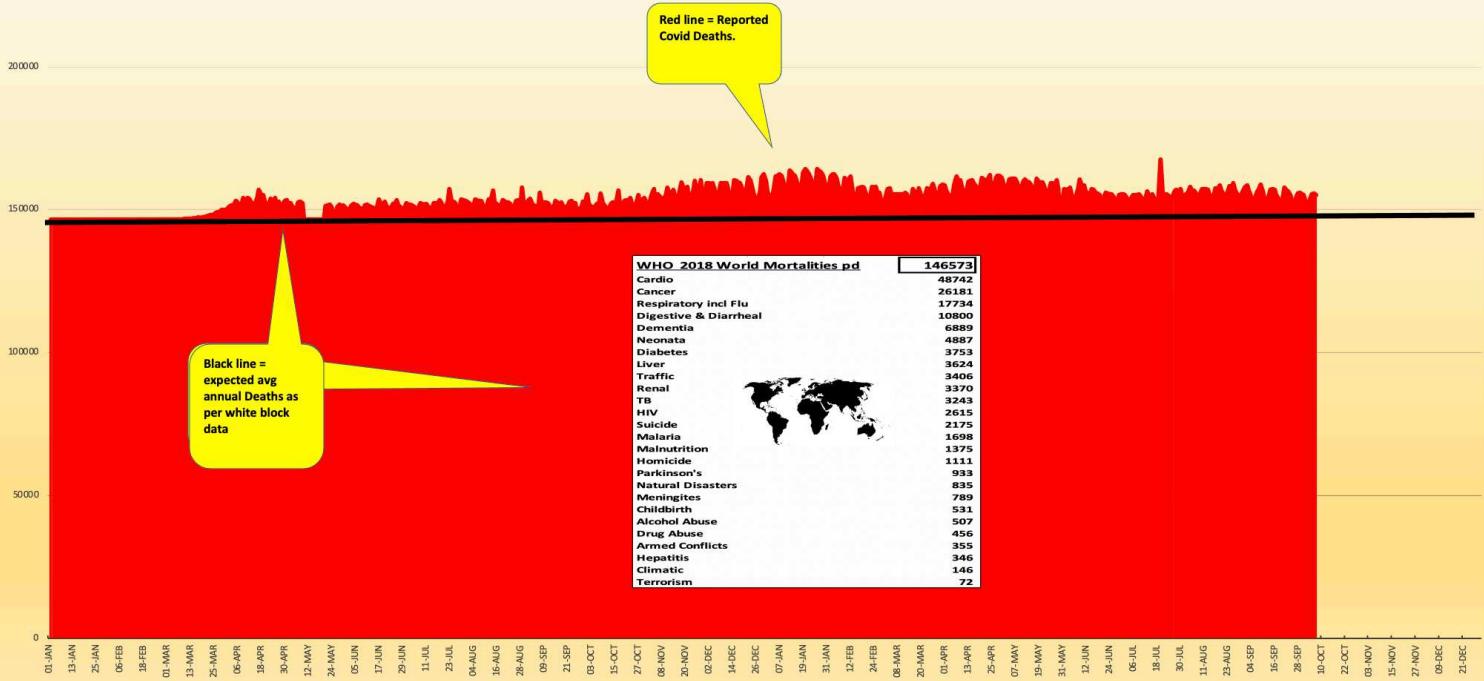
Data as at: 02 October 2021 Unless otherwise indicated

hdg 08 October 2021

25:00:00

Avg "normal" DAILY WORLD Mortalities v COVID Reported Daily Deaths (Linear Scales)

Page 4.1



The two graphs WORLD (above) and RSA (below) attempt to put the number of Covid Deaths into some sort of perspective graphically.

The big RED blocks below the black lines are TOTAL Daily Avg Deaths from ALL causes.

The RED area/lines on top of the red blocks are the INCREMENTAL Actual Daily Deaths due to Covid as officially reported.

The BLUE line in the bottom RSA graph shows the SAMRC Excess Deaths weekly numbers.

Avg "normal" DAILY RSA Mortalities v COVID Daily Deaths (Linear Scales)

20:00

5000

4500

4000

3500

3000

2500

2000

1500

1000

500

0

15:00

10:00

5:00

0:00

Avg Daily Covid Deaths since 1st Death 2020 to date: 142

Highest Daily Covid Deaths 2020 to date: 1374

Latest Daily Covid Deaths 2020 to date: 104

Weekly Excess Deaths

Blue line = Weekly Excess Deaths (see Pg 5)

Red line = Reported daily Covid Deaths.

Black line = expected avg daily Deaths as per white block data

	StatsSA_2017_RSA_Mortalities_per_day
Natural Causes	543
Unnatural Causes	140
Cardio	96
Respiratory incl Flu	88
TB	79
Diabetes	69
Cancers	61
HIV	59
Hypertensive	55
Other viral	48

Data as at:

07 October 2021

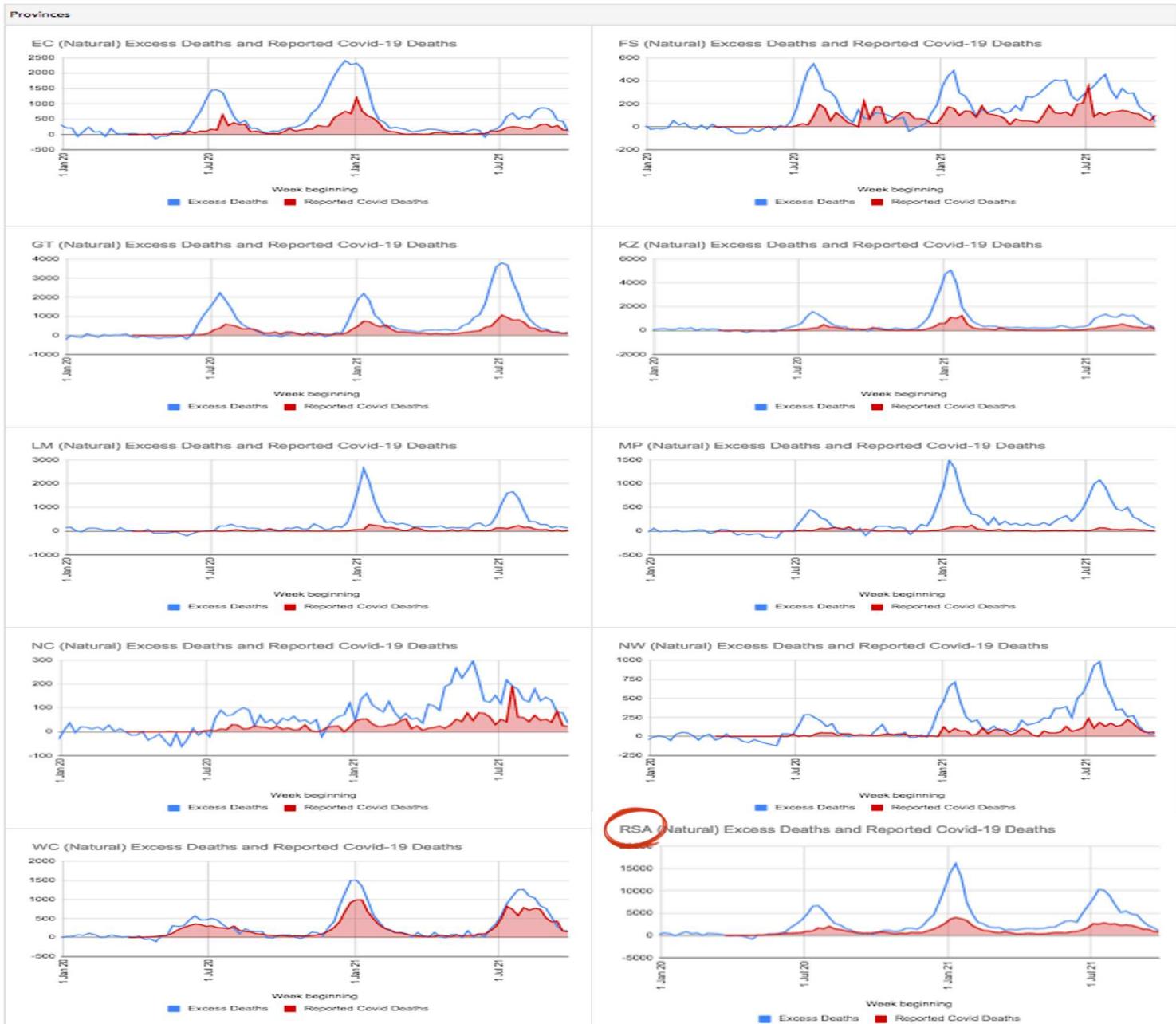
Unless otherwise indicated

hdg 08 October 2021

RSA Excess Deaths as per SA Medical Research Council

As at : 02 October 2021

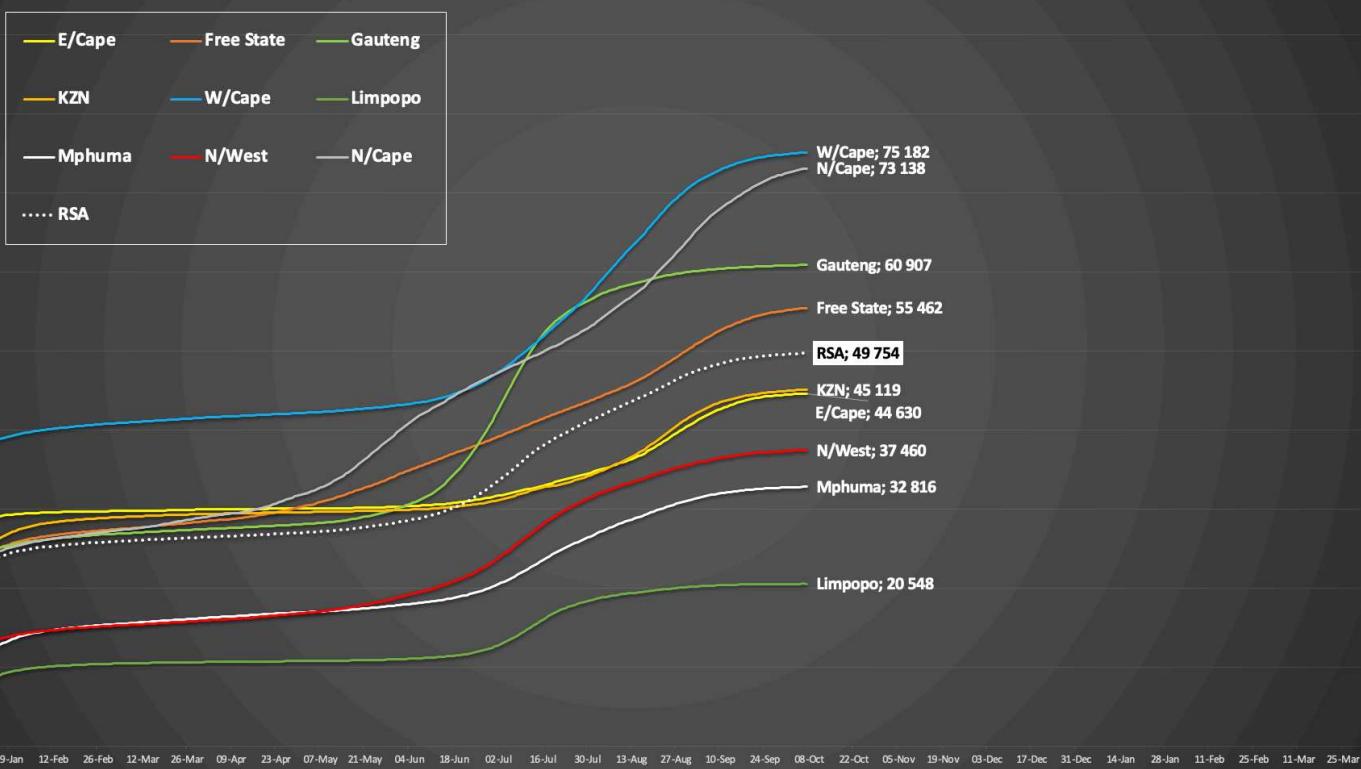
Page 4.2



The red lines are weekly Covid deaths as reported by Dept of Health.
The blue lines are total Natural Deaths as reported by Dept of Home Affairs.
The differences are the socalled "Excess Deaths" which can largely be ascribed to Covid, either directly (home/rural deaths) and/or indirectly (limited access to hospitals).

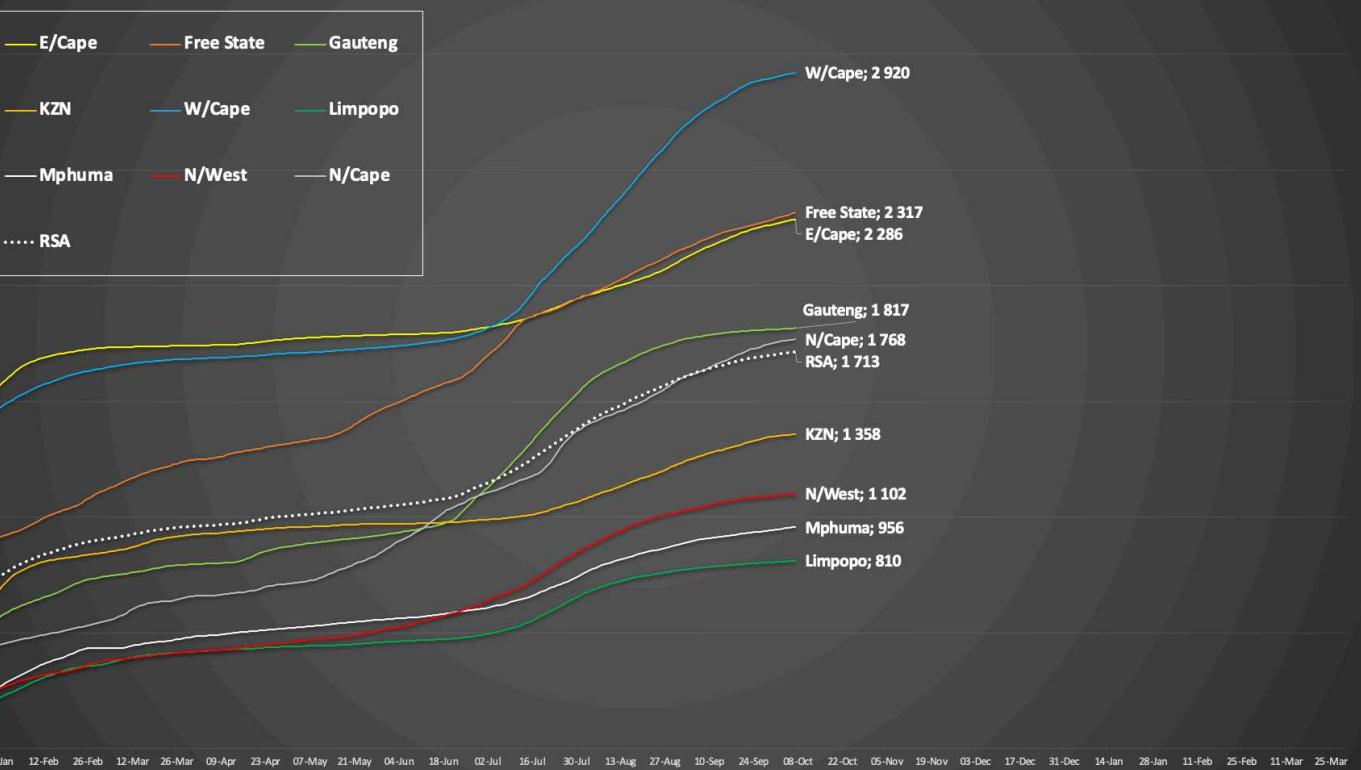
Reported CUM CASES per mill PoP

Jan to end Mch 2022 7 Day MA



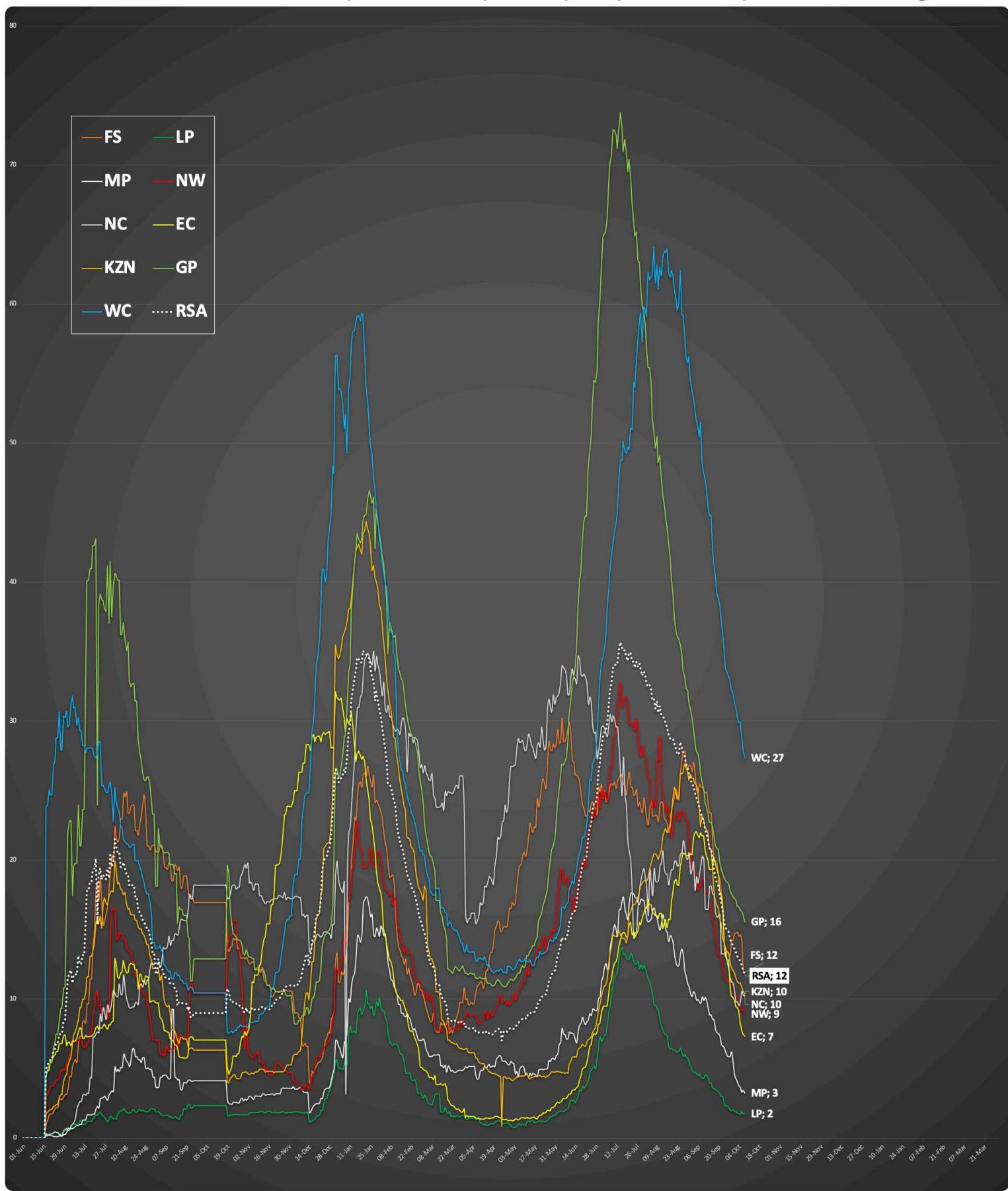
Reported CUM DEATHS per mill PoP

Jan to end Mch 2022 7 Day MA



RSA & Provinces Comparative Daily in Hospital per 100k Population

Page 5.1



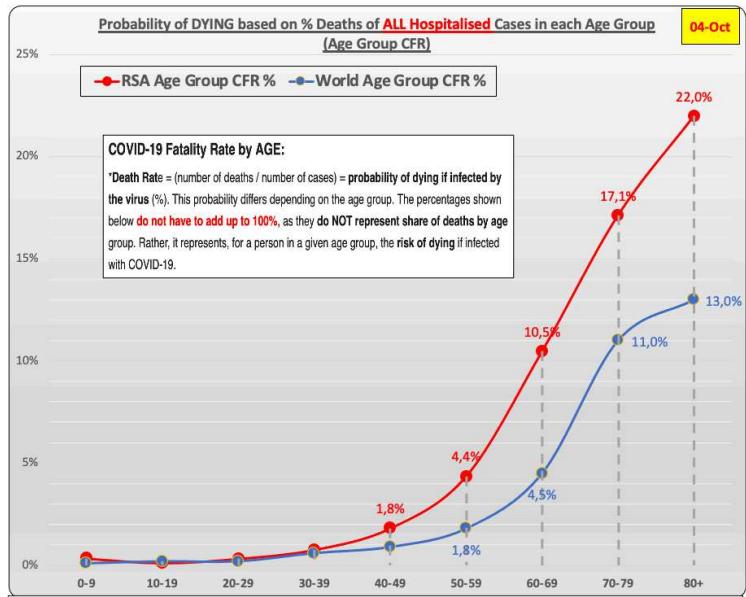
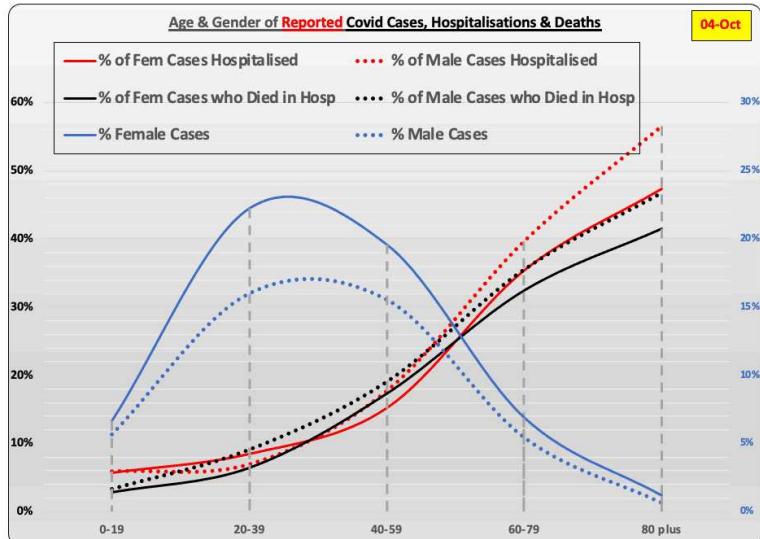
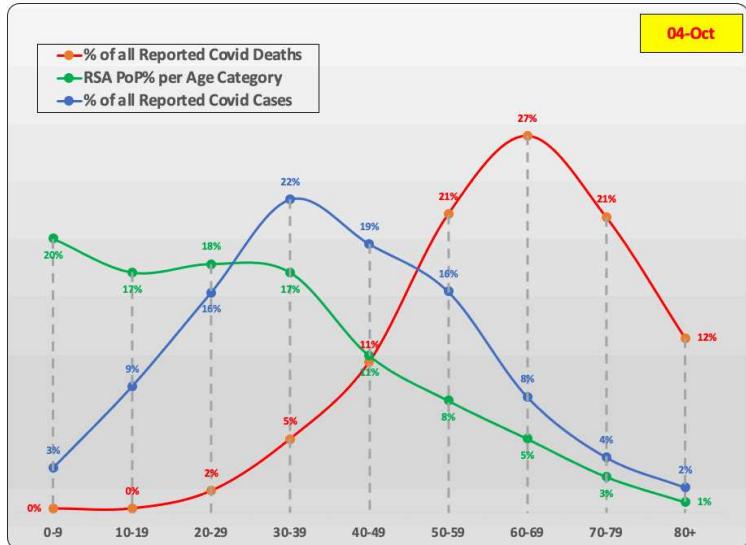
Data as at:

07 October 2021

hdg 08 October 2021

RSA Age & Gender Stats

Page 6



COVID - 19 STATISTICS IN SOUTH AFRICA

Comorbid conditions amongst admissions with at least one comorbidity reported

21 July 2020

Figures are from the NICD Sentinel Hospital Surveillance Report

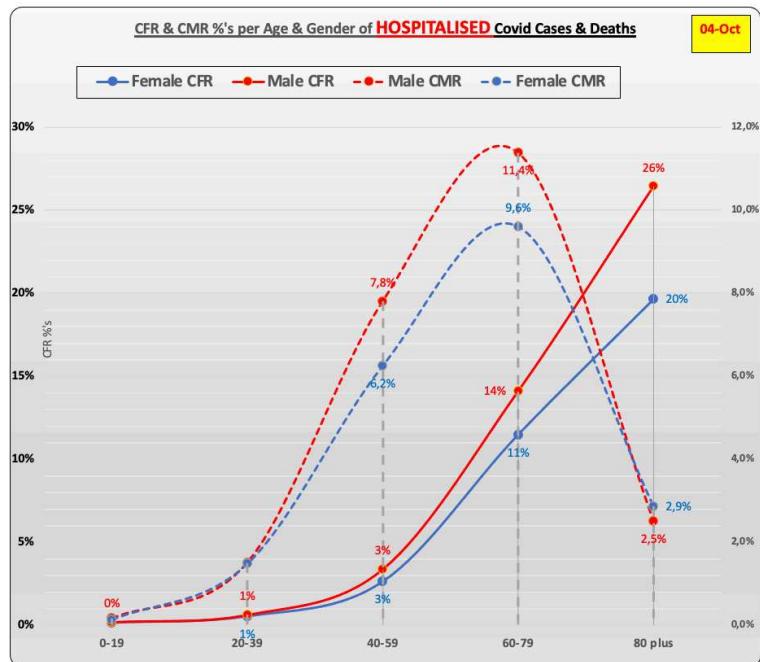
Based on 277 774 in-hospital outcomes (discharges and deaths) from 5 March 2020 - 10 July 2021

Comorbid disease*	Cases	Deaths	Case Fatality Rate
Hypertension	76 029	24 722	32.5%
Diabetes	51 874	17 728	34.2%
Chronic cardiac disease	5 026	1 904	37.9%
Chronic pulmonary disease/Asthma	12 610	3 225	25.6%
Chronic kidney disease	4 707	2 100	44.6%
Cancer	1 311	503	38.4%
HIV	15 990	3 961	24.8%
Previous TB	3 335	853	25.6%
Current TB	1 142	287	25.1%
Current and previous TB	1 470	342	23.3%
Obesity	11 137	3 381	30.4%

*Some people may have reported more than one comorbid condition, so one person could have been included in multiple categories.

twitter: @sugan2503

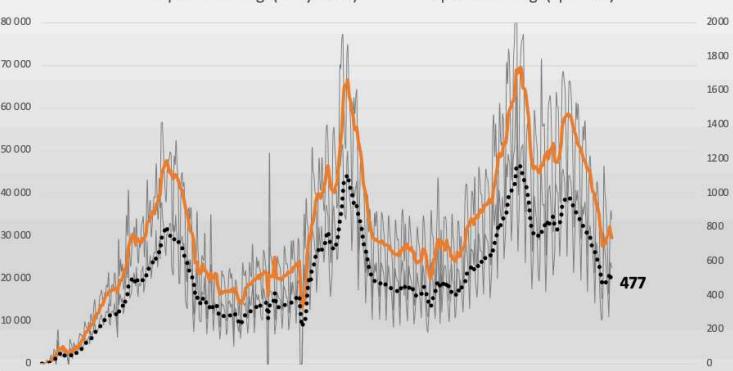
Data as at: As indicated per graph



hdg 08 October 2021

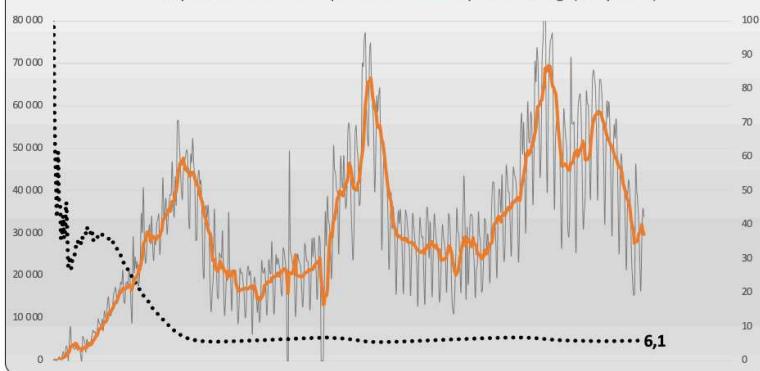
RSA: Daily Tests per million PoP

— 7 per. Mov. Avg. (Daily Tests) ······ 7 per. Mov. Avg. (TpmPoP)



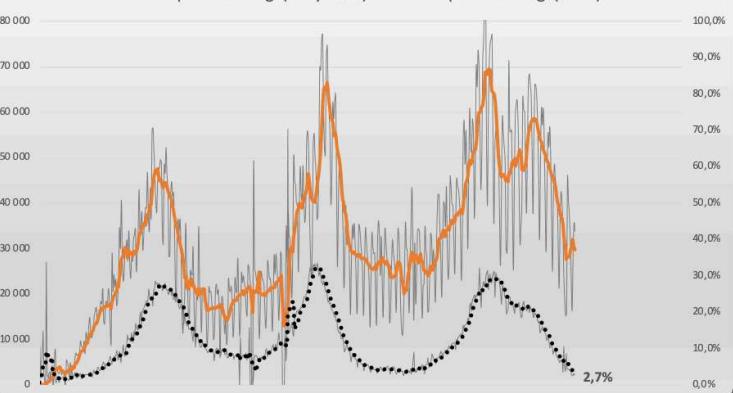
RSA: Daily Tests per +Case

— Daily Tests ······ Tests per Case — 7 per. Mov. Avg. (Daily Tests)



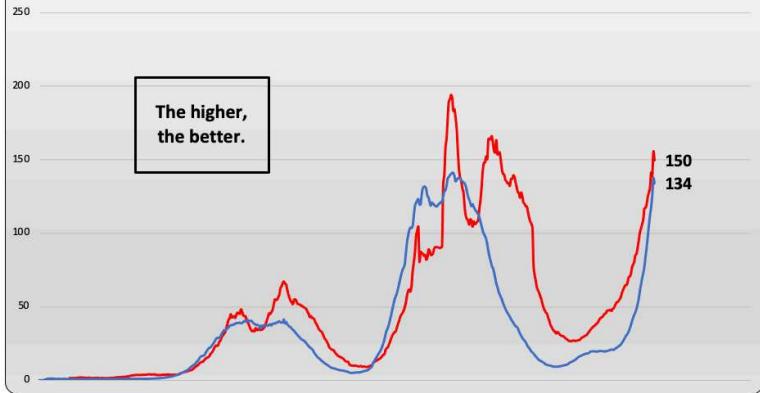
RSA: Daily Tests Positivity %

— 7 per. Mov. Avg. (Daily Tests) ······ 7 per. Mov. Avg. (DT+R)

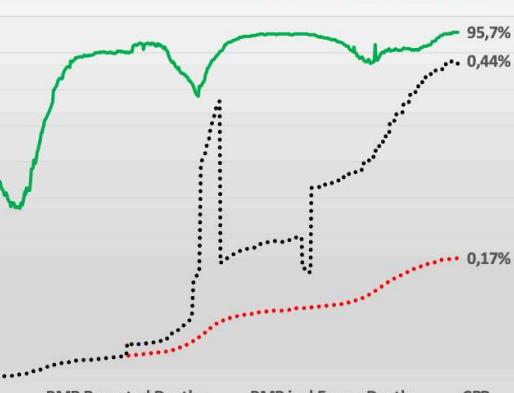


RSA Doubling Times in Days

— Deaths — Cases

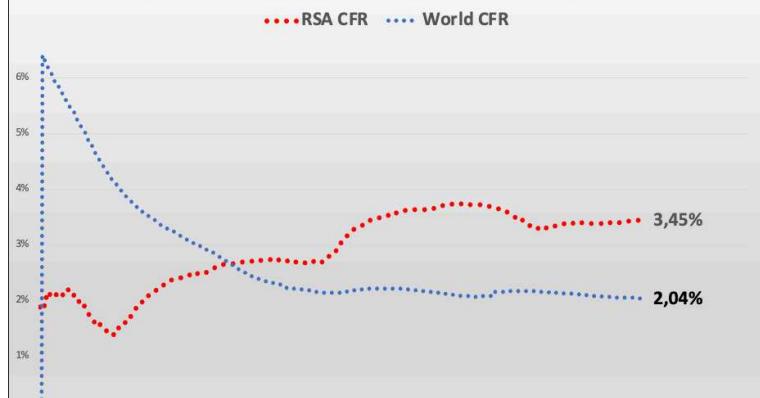


RSA: Case Recovery Rate (CRR) & PoP Covid Mortality Rate



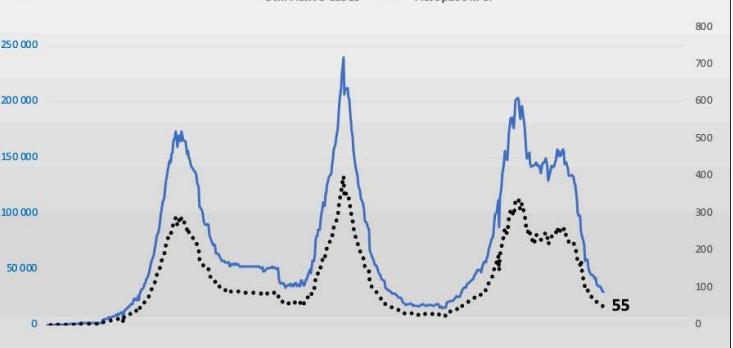
Covid Reported Deaths as % of Reported Cases (CFR)

····· RSA CFR ······ World CFR



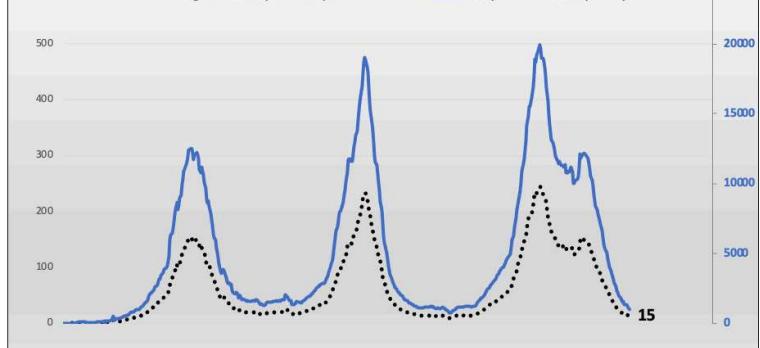
RSA: Still Active Reported Cases per 100k PoP

— Still Active Cases ······ ActCp100kPoP



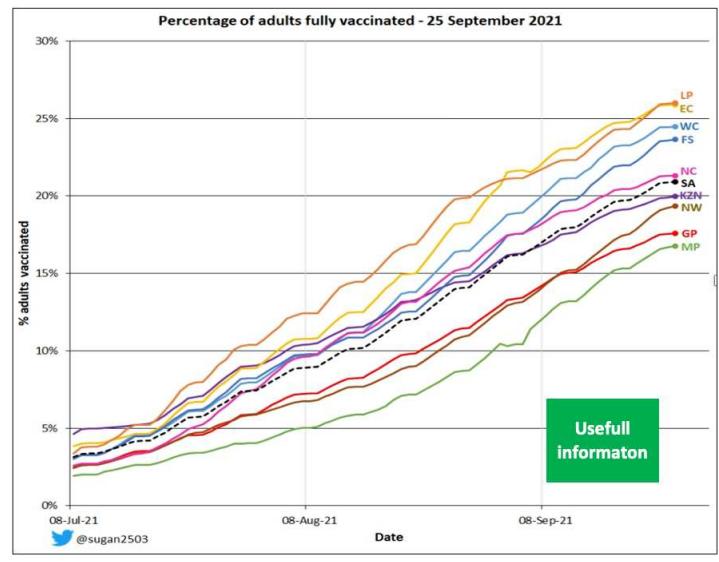
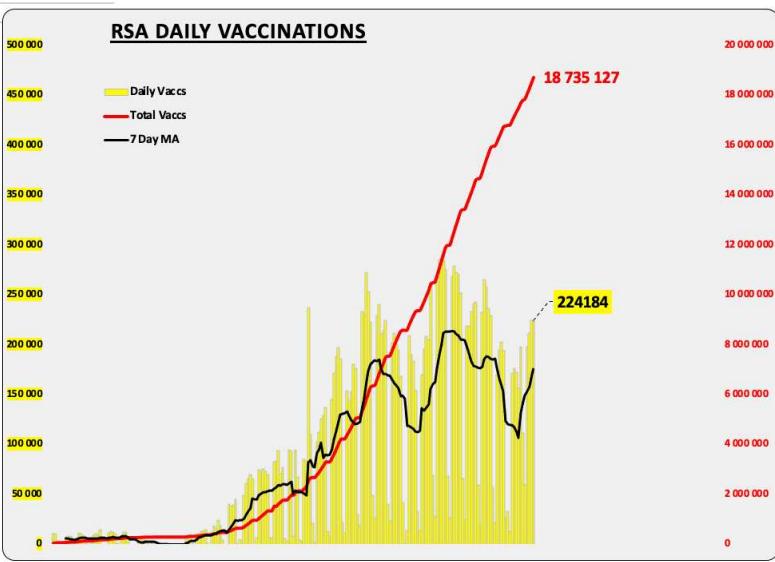
RSA: Avg New Reported Cases per week per 100k PoP

····· Avg New Cases per Week per 100k PoP — 7 day MA New Cases per day



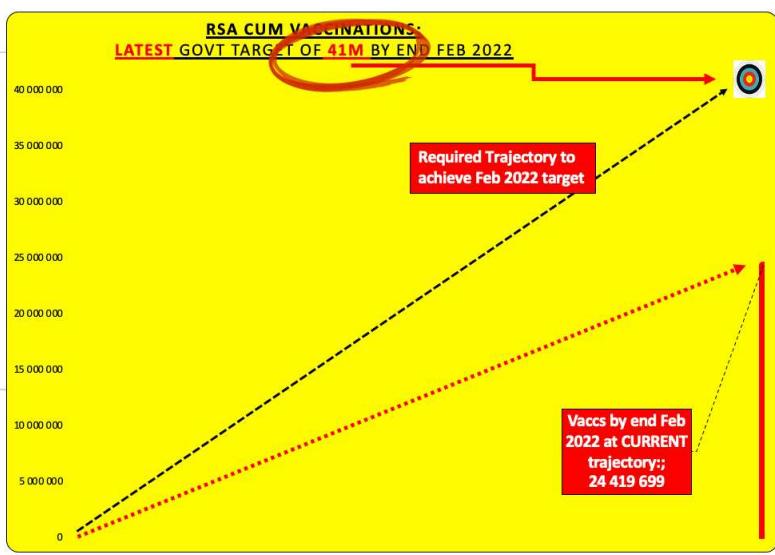
Vaccination Data

RSA DAILY VACCINATIONS



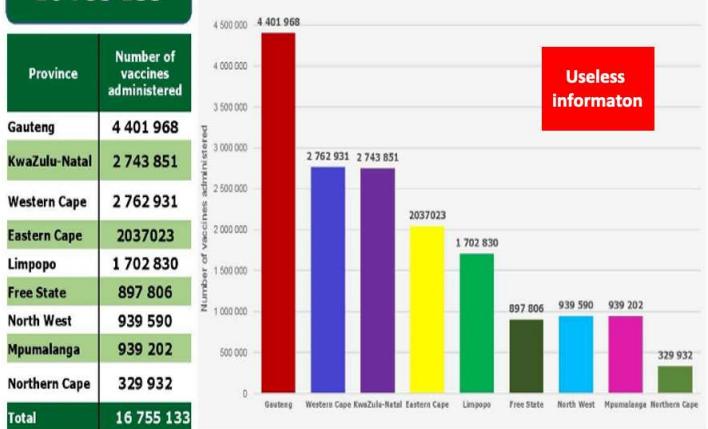
RSA CUM VACCINATIONS:

LATEST GOVT TARGET OF 41M BY END FEB 2022



National: Vaccination Status Report as at 23 September 2021

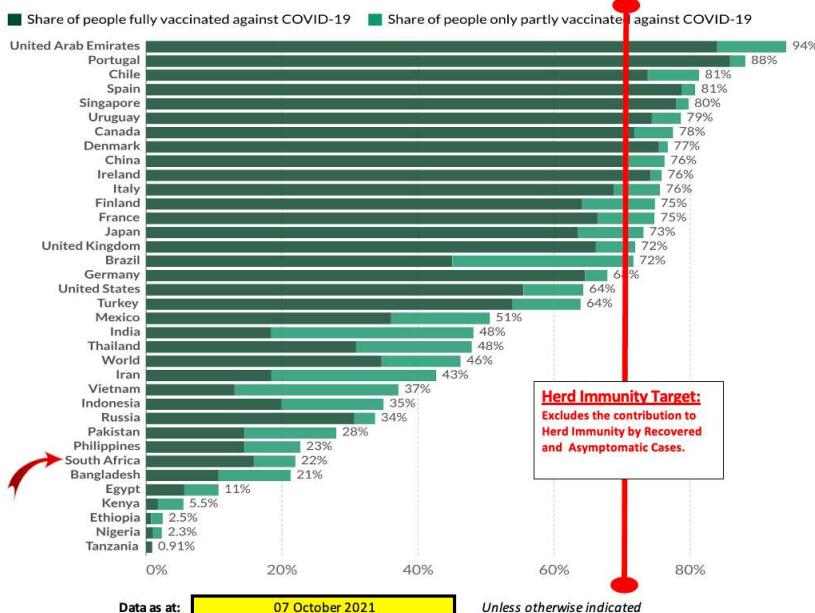
16 755 133



Share of people vaccinated against COVID-19, Oct 7, 2021

Alternative definitions of a full vaccination, e.g. having been infected with SARS-CoV-2 and having 1 dose of a 2-dose protocol, are ignored to maximize comparability between countries.

Our World in Data



How long will it take for RSA to achieve Herd Immunity Target at current rate of Vaccination?

Total Vacs to date:

18 735 127

Avg Vacs per day: 82 899

Fully Vaccsed : 479 768

Phase 1 : Health Care Workers

Single & Double Doses : 18 255 359

Phase 2 plus

Herd Immunity Target : 40 400 000 approx 67% of RSA adult PoP

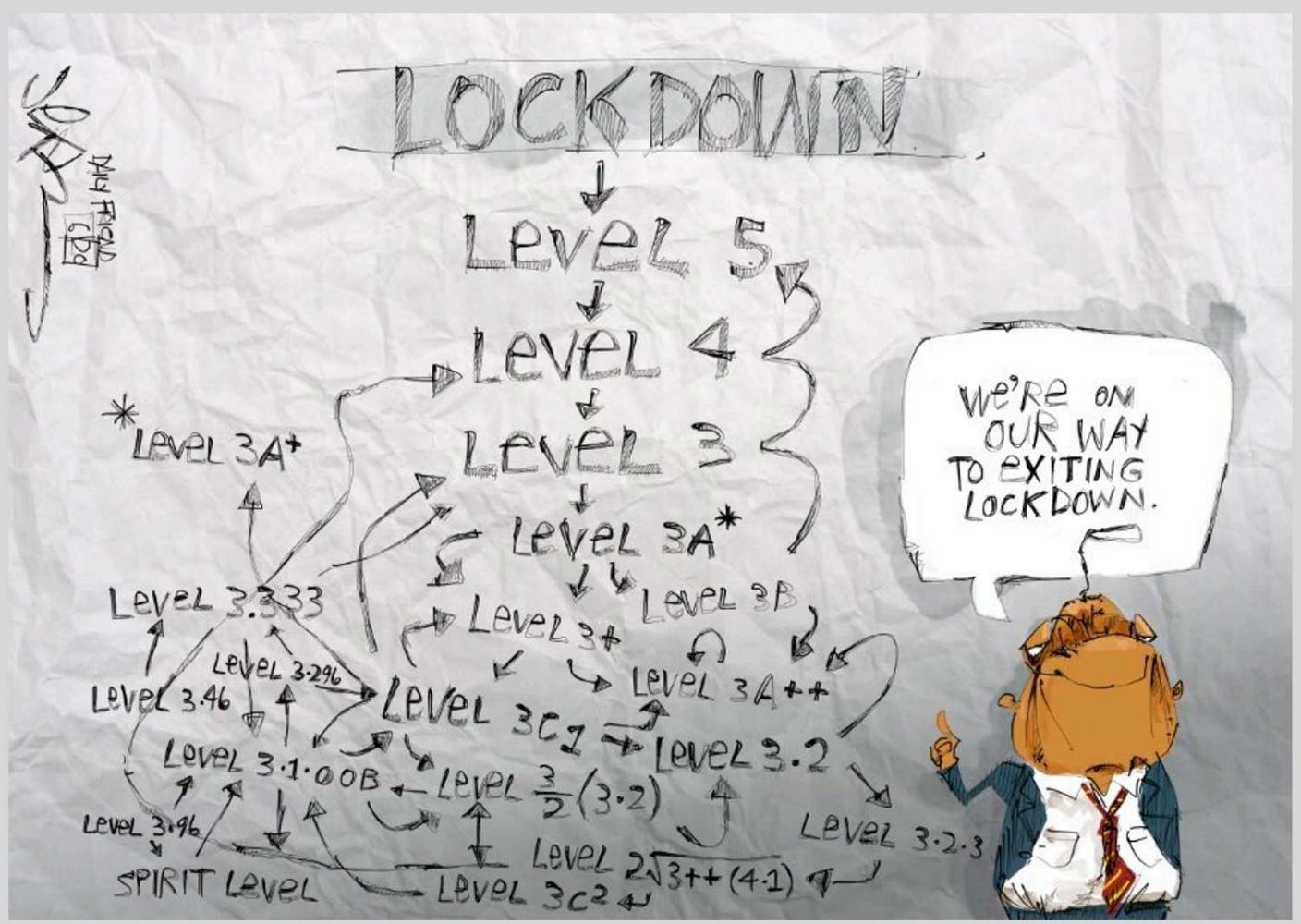
Revised up by Govt from 41m to 40,4m on 7 May 2021

Time to achieve Herd Immunity at CURRENT daily rate of Vaccinations since start of Vacs Program	1,34	Years
Time to achieve Herd Immunity at daily rate of Vaccinations over the past 7 DAYS	0,63	Years

Excludes the contribution to Herd Immunity by Recovered and Asymptomatic Cases.

hdg 08 October 2021

A smile is the best vaccine....



Please read.....!!



IVERMECTIN

Most of you are probably aware of the Ivermectin debate that has been raging for many months.....

The issue has become highly politicised and mired in Conspiracy Theories, this is unfortunate because it obscures the relative merits of the debate.

I'm not competent to comment on the merits / demerits of various meds, I only draw graphs....but I have been following the Ivermectin debate with interest.

My commonsense conclusions are as follows:

- 1) If you want to use Ivermectin do so **only in consultation** with a trusted medical practitioner. Ignore Facebook, Farmer Brown, your mates at the golf club / gym. Be especially careful about advice and theories from politically aligned organisations.
- 2) If you want to get hold of Ivermectin get a prescription from your doctor and buy the stuff from a registered pharmacy.
Do not use black market vendors or online purchasing. Don't buy from vets & agricultural co-ops !!!
- 3) If you are using Ivermectin, or have used it recently, make sure your family knows about it in order for you or them to be able to disclose this to the doctor / hospital should you be hospitalised with Covid.

THIS IS VERY IMPORTANT BECAUSE, REGARDLESS OF THE EFFICACY OF THE STUFF (IF ANY), IVERMECTIN DOES APPEAR TO MASK CERTAIN MEDICAL TEST RESULTS ie BLOOD TESTS, LIVER & RENAL FUNCTION TESTS.

THIS MAY RESULT IN DISTORTED DIAGNOSTIC DATA.