

3 out of 4 COVID-19 deaths in patients aged 60 years or above, 5 out of 6 deceased people had other underlying health conditions: Health Ministry

RT-PCR is the gold standard confirmation test for COVID-19 testing, Rapid Antibody Test is for epidemiological and surveillance purposes: Health Ministry

AIIMS is studying power of HCQ in prevention and cure of COVID-19: ICMR

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The number of COVID-19 positive cases stands at 14,378 as on date, while 1,992 people or 13.85% of total cases have recovered. In the last 24 hours, 991 new cases and 43 deaths have been reported. In total, 480 people in the country have died of COVID-19. This was informed by the Joint Secretary, Ministry of Health & Family Welfare, Shri Luv Aggarwal, at the daily media briefing on the actions taken, preparedness and updates on COVID-19, held at National Media Centre, PIB New Delhi today.

The Joint Secretary further informed that the implementation of the action plan is already yielding good results. Kodaggu or Coorg (Karnataka) is a new district along with Mahe (Puducherry) where no fresh cases have been reported during the last 28 days. In addition to previous day's list, 22 districts in 12 states have come up where no positive case has been reported in the last 14 days. These districts are: Lakhisarai, Gopalganj and Bhagalpur in Bihar; Udaipur and Dholpur in Rajasthan; Pulwama in J&K Thoubal in Manipur; Chitradurga in Karnataka; Hoshiarpur in Punjab; Rohtak and Charkhi Dadri in Haryana; Lohit in Arunachal Pradesh; Bhadrak and Puri in Odisha, Karimgunj, Golaghat, Kamrup Rural, Nalbari and South Salmara in Assam; Jalpaiguri and Kalimpong in West Bengal and Vishakhapatnam in Andhra Pradesh. At the same time, three districts - Patna in Bihar, Nadia in West Bengal and Panipat in Haryana have reported positive cases after a gap of 14 days.

Presenting an analysis of the deaths so far, Shri Aggarwal highlighted that the data on deaths reported so far reinforces that elderly people and people with comorbidities are at higher risk. The mortality rate so far has been 3.3%. Further, 14.4% of the deceased were in the age group of 0-45 years, 10.3% in age group of 45 - 60 years, 33.1% in age group of 60 - 75 years and 42.2% above 75 years. This shows that 75.3% of the dead were above 60 years of age. Further, 83% of the deceased had comorbidities, he added. In view of this, he urged that all family members should follow social distancing norms because senior citizens can get infected from other members of the house or family.

The Joint Secretary informed that the National Taskforce of ICMR has issued a guideline on testing strategy to all states, after careful review of the worldwide testing methodology.

- RT-PCR test is the gold standard frontline test for COVID-19. Antibody test cannot replace this test.

- Rapid Antibody Test gives idea about prevalence of disease in a particular area and thus is used for epidemiological studies and surveillance purpose in hotspots. It can also be used in districts which are not hotspots to study emerging trends.
- The data regenerated by surveillance through Rapid testing can be used for contact tracing if any positive case arises in an area.
- So as to make all data of Rapid Antibody Test available for surveillance at state, district and national levels, an order has been issued to register in the portal: covid19cc.nic.in/icmr before conducting rapid antibody test, so that the information can be made available at all levels.
- Testing Strategy has been spelt out for when RTPCR or Rapid Antibody Tests are to be done. Symptomatic individuals with travel history, symptomatic persons having contact with lab confirmed positive persons, symptomatic health care workers, SARI patients with fever, cough and/or shortness of breath and asymptomatic persons who have been in direct contact of high-risk confirmed cases are to be tested once between Day 5 and Day 14 of coming in contact with the confirmed positive person.

The Joint Secretary also explained [the algorithm / strategy being adopted by the nation for COVID-19 testing in hot spot areas](#). In hotspot areas, for persons having had fever, cough or cold for less than 7 days, RT-PCR test is to be done and then on basis of result, positive cases are to be given treatment and negative cases are to be taken as susceptible. In case of having had symptoms for more than 7 days, Rapid Antibody Test is to be done and then if result is positive, person is to be kept in quarantine and contact tracing is to be done, and for negative results, persons are to be monitored for 14 days and if there is any clinical suspicion, then the case is to be monitored at clinical level and PCR test can be done if required.

The Health Ministry showcased how Kasargod district in Kerala successfully contained COVID-19, The district faced many challenges such as due to foreign travel, geography and large number of expatriates, but the district addressed the challenges well. Out of 168 cases, 113 cases have recovered. With special focus on clinical management, not even one person died. Remaining 55 active cases too are being monitored actively. Speaking about the strategic approach, the Joint Secretary informed that the State Administration appointed a special officer to coordinate and monitor effective Coordination between line departments at field and secretariat levels. Tracking of home quarantine using geo spatial tracking, #BreakTheChain campaign for promoting social distancing, use of drones and incident commanders are some of the steps adopted for cluster containment. More than 17,300 contacts were traced and quarantined, aggressive and quick testing was done, COVID Care Centres and ICU facilities were set up. Social welfare initiatives were undertaken to ensure that poor and needy did not face any troubles, free food was given, regular health check-ups were conducted. One major intervention of the district's COVID-19 management was that all primary and secondary contacts and high-risk cases were quarantined in isolation centres. Noting that very positive and encouraging results have been obtained when people returned after being cured of COVID-19, Shri Aggarwal reiterated that we have to work together in fighting this battle, in a whole-of-society whole-of-government approach. Check out the presentation given by the Joint Secretary [here](#).

Shri Aggarwal also informed that:

- [The Union Health Minister held a video conference yesterday with Lt. Governor of Delhi, Health Minister of Delhi, Medical Superintendents and health officials of various hospitals in Central government and Delhi government](#). He urged hospitals to attend to critical non-COVID-19 patients with equal compassion. Further, he said that hospitals should maintain sufficient bloodstock for transfusion by promoting voluntary blood donors. Mobile blood collection services too are to be utilised with the help of Indian Red Cross Society.
- Out of a total of 14,378 positive cases in India, 4,291 cases (about 29.8%) belong to a single source – the Nizamuddin Markaz cluster. 23 states and UTs have reported cases related to this cluster.

Informing that states and UTs are actively implementing lockdown measures and that situation of essential goods and services is satisfactory, the representative of the Home Affairs Ministry stated:

- [The Home Ministry has decided to extend the period of providing certain consular services to foreign nationals, presently stranded in India](#). Regular visa, e-visa or stay stipulation, of such foreign nationals who have been stranded in India because of spread of COVID-19 in many parts of the world and also due to travel restrictions imposed by the Indian authorities and whose visas have expired or would be expiring during the period from 01.02.2020 (Midnight) to 03.05.2020 (Midnight), would be extended till midnight of 03.05.2020 on 'GRATIS' basis, after making online application by the foreigner. Exit to such foreign nationals, if requested by them during this period, will also be granted to them up to 14

days beyond 03.05.2020 i.e. 17.05.2020 without levy of overstay penalty.

- Both Centre and all states have started control rooms and helpline numbers for addressing citizen's problems. All states have started State and District Emergency Centres. The details are available on the website of the Ministry.
- [The Ministry of Labour & Employment has started 20 Control rooms for addressing grievances of labourers.](#)
- MHA control room is providing 24/7 services. The new toll-free numbers 1930 and 1944 also are being used to resolve citizens' grievances. Besides, single emergency response no. 112 is operational in 29 states and UTs. Any aggrieved person can call this number for police, fire-brigade or ambulance related assistance. This service can also be accessed through 112 mobile app. The single emergency no. 112 uses location-based tracking and provides highly prompt services to citizens; pregnant women, elderly and Divyang citizens have used this service extensively to receive assistance during the nation-wide lockdown. COVID-19 related queries are also being addressed over this helpline number.

Replying to a media query, Dr. Gangakhedkar, the representative of ICMR informed that around 480 patients will get enrolled in an 8-week observational study on efficacy of HCQ. ICMR has launched another study on side-effects of HCQ on health care workers, using data of some health care workers who had started taking HCQ. He informed that AIIMS is conducting studies on assessing both prophylactic and therapeutic impact of HCQ on COVID-19 - i.e. the ability of the drug for both prevention and healing.

Responding to a question on the efficacy of remdesivir in treatment of COVID-19, Dr. Gangakhedkar said that studies show that in 68% of COVID-2019 patients, use of remdesivir reduces oxygen demand. However, while the manufacturer Gilead Sciences says that it is likely to be beneficial, data on the interim analysis being done by them is not yet available. He added that if we come to know in coming weeks that remdesivir is beneficial in treating COVID-19, it will either go into patent pooling or otherwise if it becomes available, India too can start doing its trials. Besides, WHO Solidarity Trial, in which India too is participating, has an arm on remdesivir.

LIVE tweets by [@PIB_India](#) from the media briefing can be found on [this thread](#).

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