ASPHER Report: COVID-19 Situation Reporting across Europe

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This is ASPHER's weekly surveillance report. We hope it is complementary to other resources such as ECDC and Our World in Data, where the reader can go for more detailed information. Please give us your feedback: is the presentation helpful to you and your colleagues? What other information would you like to see in it?

Key messages

- The WHO weekly epidemiological update highlights that the global number of new weekly COVID-19 cases declined since the start of October while the number of new weekly deaths remained stable.

- The ECDC country overview report highlights widespread increases were being observed in all indicators, with one third of EU/EEA countries reporting increases in COVID-19 deaths. Forecasts suggest that these trends will continue over the coming two weeks. Of 26 countries reporting data, 14 observed increasing trends of 1–5 weeks' duration in at least one hospital or ICU indicator.

Selected recent COVID-19 publications

Basseal, J., et al. (2022). Key lessons from the COVID-19 public health response in Australia. The Lancet Regional Health - Western Pacific, 100616. https://doi.org/10.1016/j.lanwpc.2022.100616

- The study identified the following key lessons: 1) movement restrictions were effective, but their implementation requires careful consideration of adverse impacts, 2) disease modelling was valuable, but its limitations should be acknowledged, 3) the absence of timely national data requires re-assessment of national surveillance structures, 4) the utility of advanced pathogen genomics and novel vaccine technology was clearly demonstrated, 5) decision-making that is evidence informed and consultative is essential to maintain trust, 6) major system weaknesses in the residential aged-care sector require fixing, 7) adequate infection prevention and control frameworks are critically important, 8) the interests and needs of young people should not be compromised, 9) epidemics should be recognised as a 'standing threat', 10) regional and global solidarity is important.

Thompson, E. J., et al. (2022). Psychological distress, depression, anxiety, and life satisfaction following COVID-19 infection: Evidence from 11 UK longitudinal population studies. The Lancet Psychiatry, 9(11), 894–906. https://doi.org/10.1016/S2215-0366(22)00307-8

- Self-reporting COVID-19 was longitudinally associated with deterioration in mental health and life satisfaction.

ASPHER statement on the pandemic
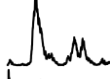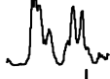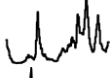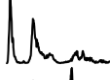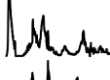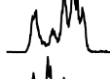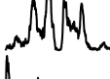
ASPHER is concerned about talk of the 'end of the pandemic'. *Pandemic* is not defined by politicians, or by journalists. The *pandemic* is defined by the World Health Organisation, under strict decision-making process and not as mere opinion. A pandemic is "an epidemic occurring worldwide, or over a very wide area, crossing international boundaries and usually affecting a large number of people". We are still in the midst of the pandemic.

We are concerned with the rapid dismantling of non-pharmaceutical interventions against COVID-19 across Europe. In a recent opinion paper, we advocate for European governments' continued recommendation for the use of face masks in high traffic public areas like public transport. The reality remains that the future evolution of the pandemic is highly uncertain. Primary health care and social care provision across Europe are not yet restored to pre-pandemic levels due to the burden of ever new variants of the virus. Occupational health services are non-existent in many parts of Europe and therefore unable to address mass sickness absence or support workers in key industries suffering burnout. We urge governments to invest in additional measures to support primary care, social care, and occupational health. Protection of our key service workers is a central concern. We will not come out of the pandemic until we seriously address the problem globally. We need global solidarity, commitment to international preparedness and increased global production of vaccines.

ASPHER supports the VACCINE-plus approach to pandemic control; or what we have called 'COVID-DO_IT_ALL'. We recognize the importance of following non-pharmacological interventions as well as achieving a high level of vaccine uptake. Vaccine hesitancy still needs to be understood and addressed especially in Eastern parts of Europe. We need to protect frontline services, protect children, and protect vulnerable people. Current political moves in Europe are adding to the likelihood of increased transmission, creating more pressures on services, more likelihood of additional sickness absence, economic damage, and social disruption. The mindset of the 'pandemic is over' will have the dangerous impact of prolonging it.

Rolling average of latest COVID-19 death and hospitalization rates in the countries of the WHO-Europe region ([Source: Our World in Data](#)).

| WHO Europe region	Daily newly confirmed COVID-19 deaths/million people	30-day trend in deaths	Weekly hospital admissions/million	30-day trend in weekly hospital admissions
Iceland	13.12		24.40	
Monaco	7.79			
Finland	5.60			
San Marino	4.23			
Sweden	2.24			
Belarus	2.09			
Ukraine	2.05			
Croatia	1.86		127.84	
Andorra	1.81			
Estonia	1.72		144.35	
Germany	1.64		146.16	
Czechia	1.58		129.49	
Greece	1.54		103.76	
Hungary	1.53			
Austria	1.38			
Denmark	1.34		118.72	
Italy	1.31		59.15	
Serbia	1.14			
Lithuania	1.13			

| WHO Europe region	Daily newly confirmed COVID-19 deaths/million people	30-day trend in deaths	Weekly hospital admissions/million	30-day trend in weekly hospital admissions
Luxembourg	1.12		36.24	
Slovakia	1.00			
France	0.98		118.49	
Slovenia	0.88		62.59	
Ireland	0.83		88.89	
Belgium	0.79		64.76	
Bulgaria	0.77			
Russia	0.66		71.19	
Moldova	0.56			
Malta	0.54		13.56	
Spain	0.52		60.58	
Poland	0.48			
Montenegro	0.46			
Georgia	0.42			
North Macedonia	0.41			
Netherlands	0.38		64.45	
Cyprus	0.32			
Armenia	0.31			
Portugal	0.30			
Israel	0.28		16.47	

WHO Europe region	Daily newly confirmed COVID-19 deaths/million people	30-day trend in deaths	Weekly hospital admissions/million	30-day trend in weekly hospital admissions
Romania	0.25			
Bosnia and Herzegovina	0.22			
Switzerland	0.18		37.16	
Albania	0.10			
Kosovo	0.08			
Azerbaijan	0.06			
Turkey	0.04			
United Kingdom	0.04		58.77	
Kyrgyzstan	0.02			
Kazakhstan	0.01			
Tajikistan	0.01			
Uzbekistan	0.01			

The age-standardised all-cause death rates in 2020, 2021 and 2022, and the 2015-2019 average by week and sex in selected countries of the WHO-Europe ([Source: Human Mortality Database](#)).
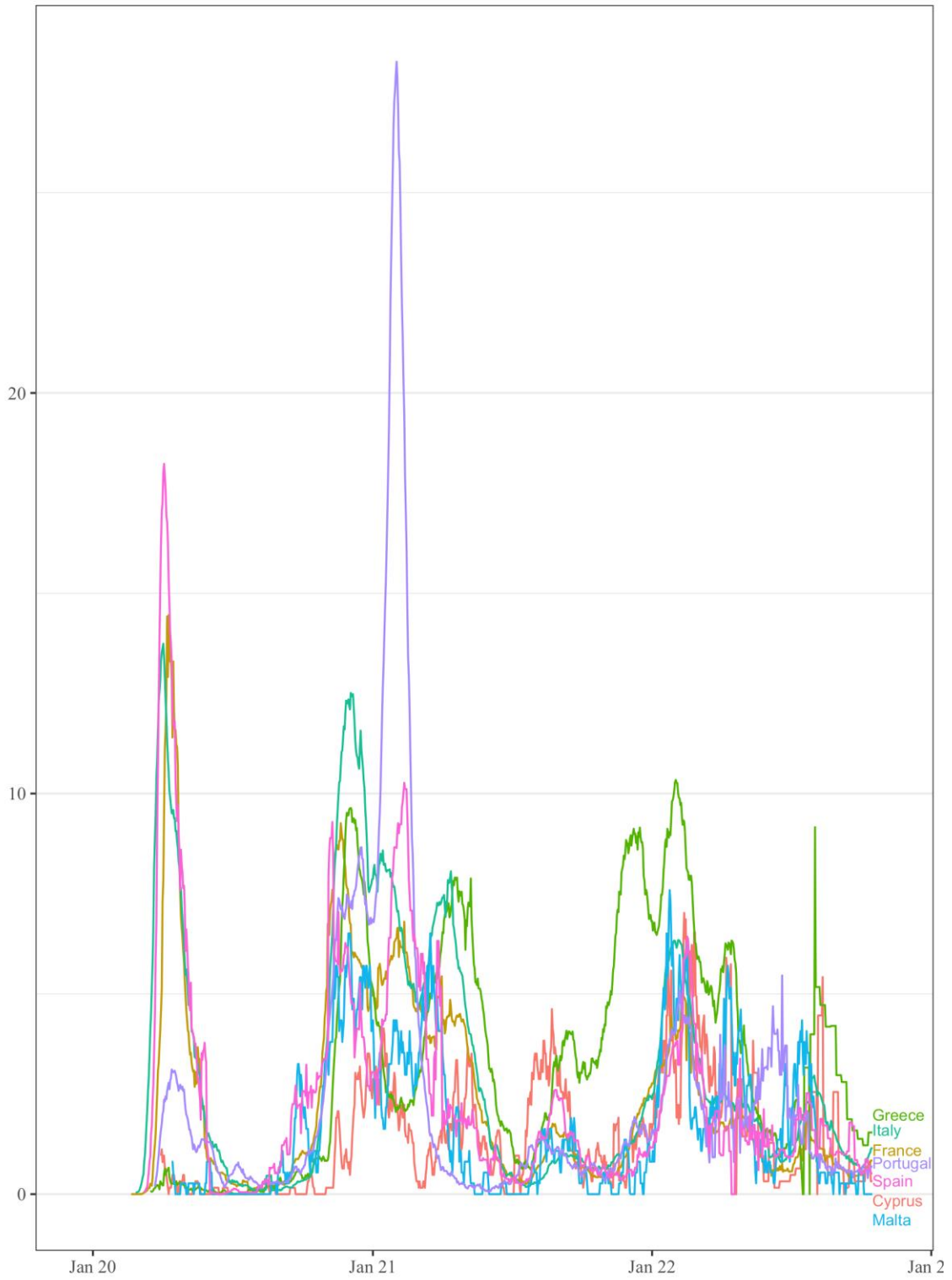
Age-standardised death rate (men)

2015-2019 — 2020 — 2021 — 2022
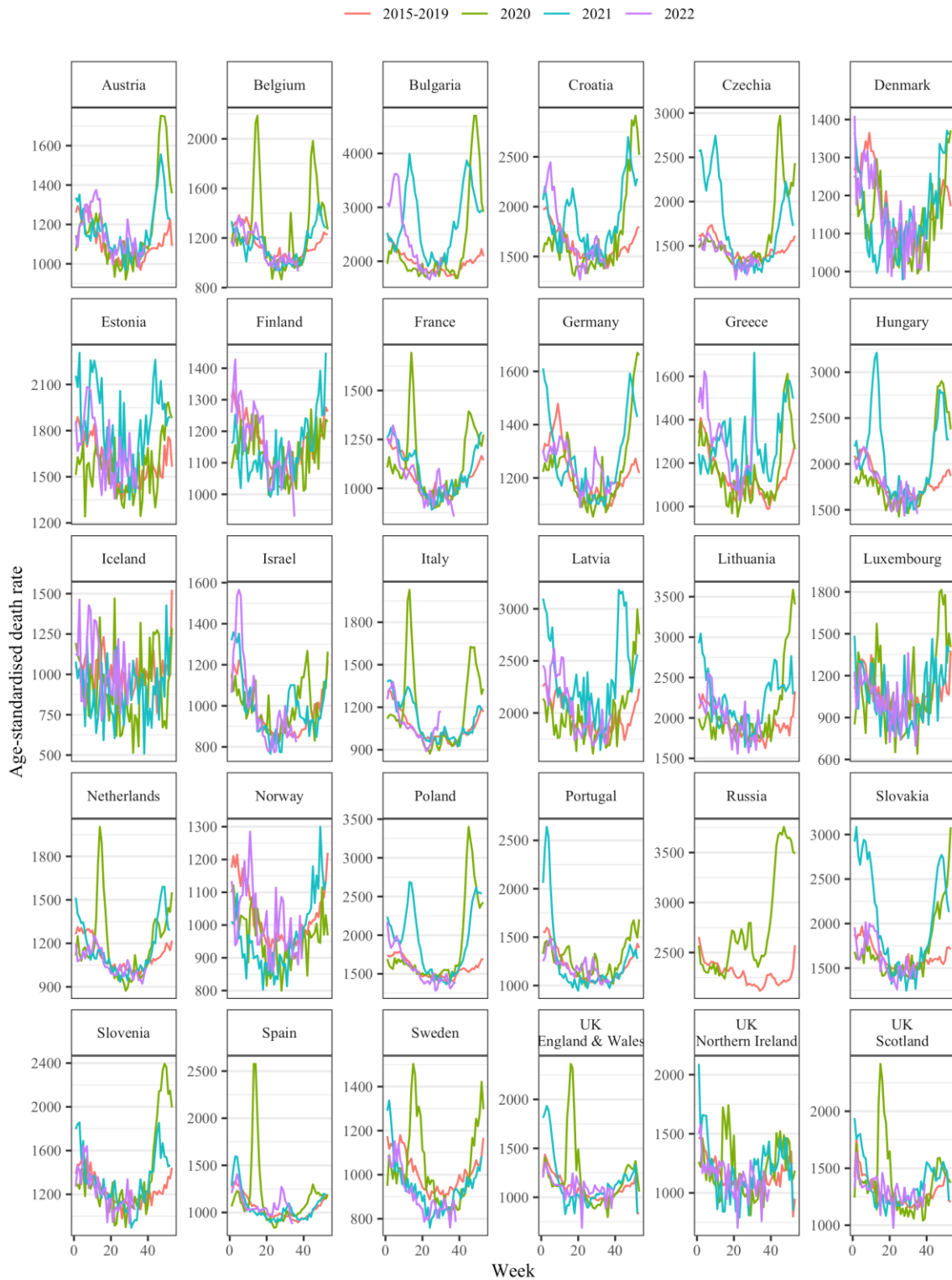
Age-standardised death rate (women)
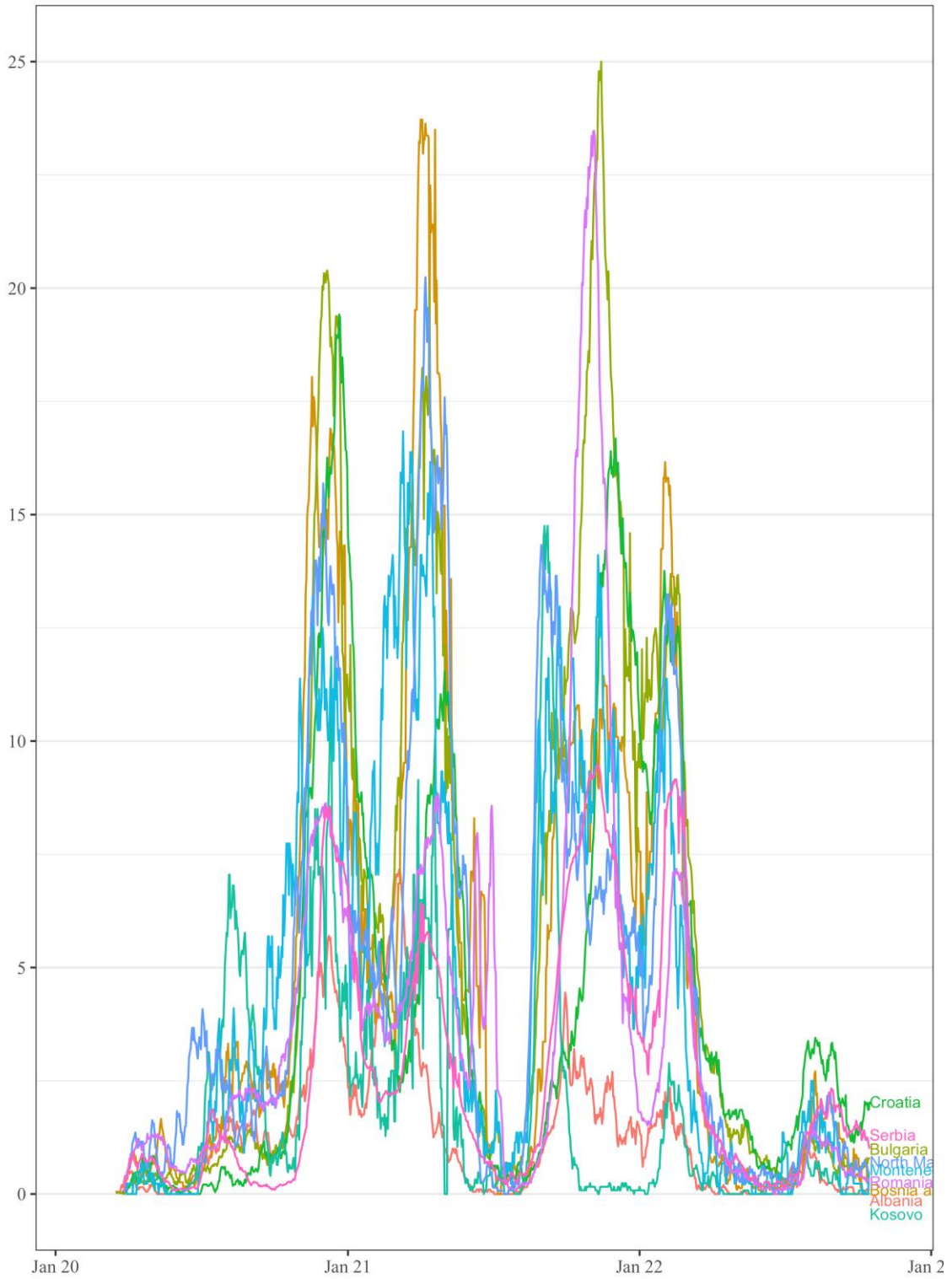
2015-2019 — 2020 — 2021 — 2022
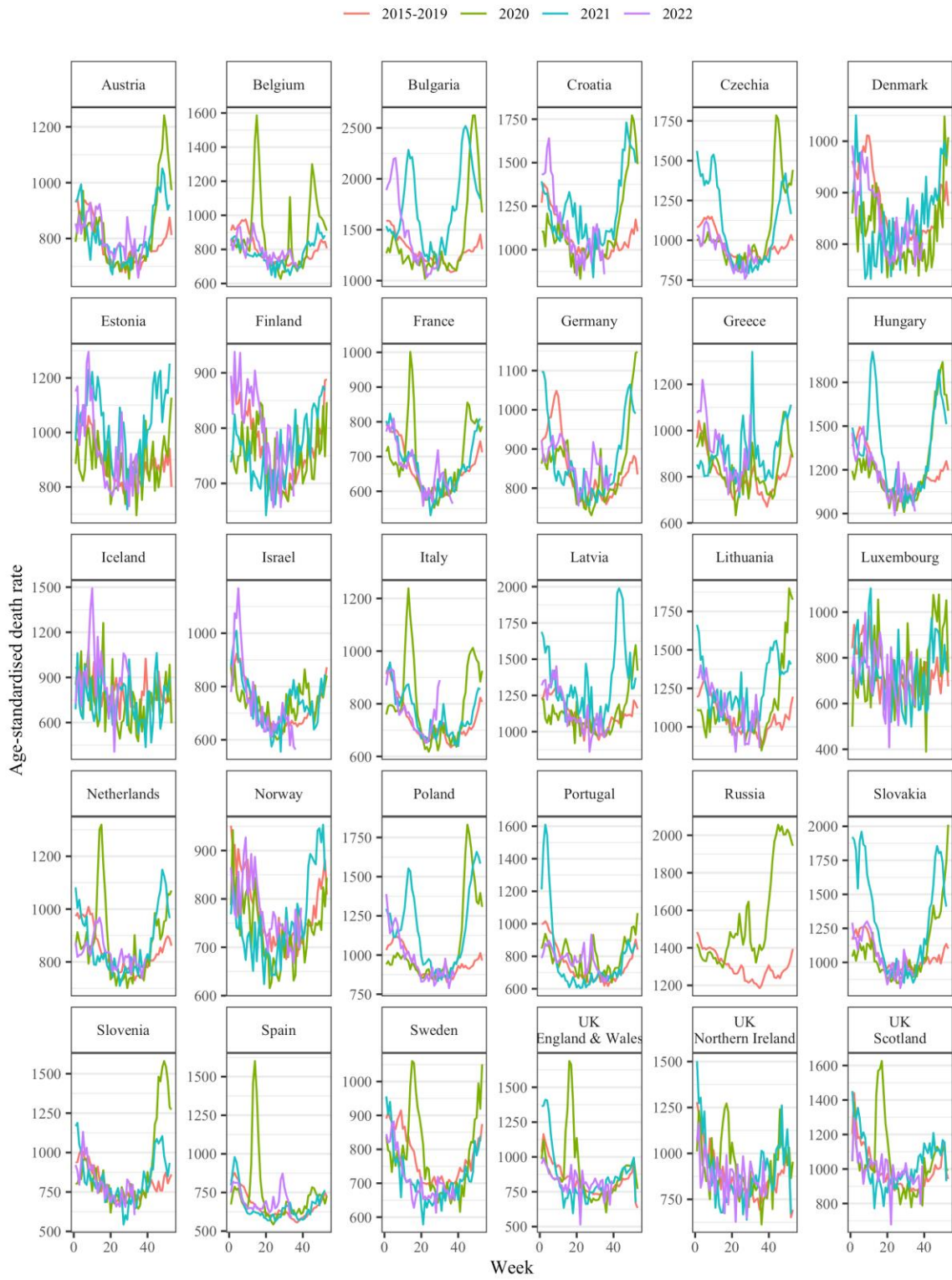
Rolling 7-day average of daily confirmed COVID-19 death rates (per million) in sub-regions of Europe ([Source: Our World in Data](#)).

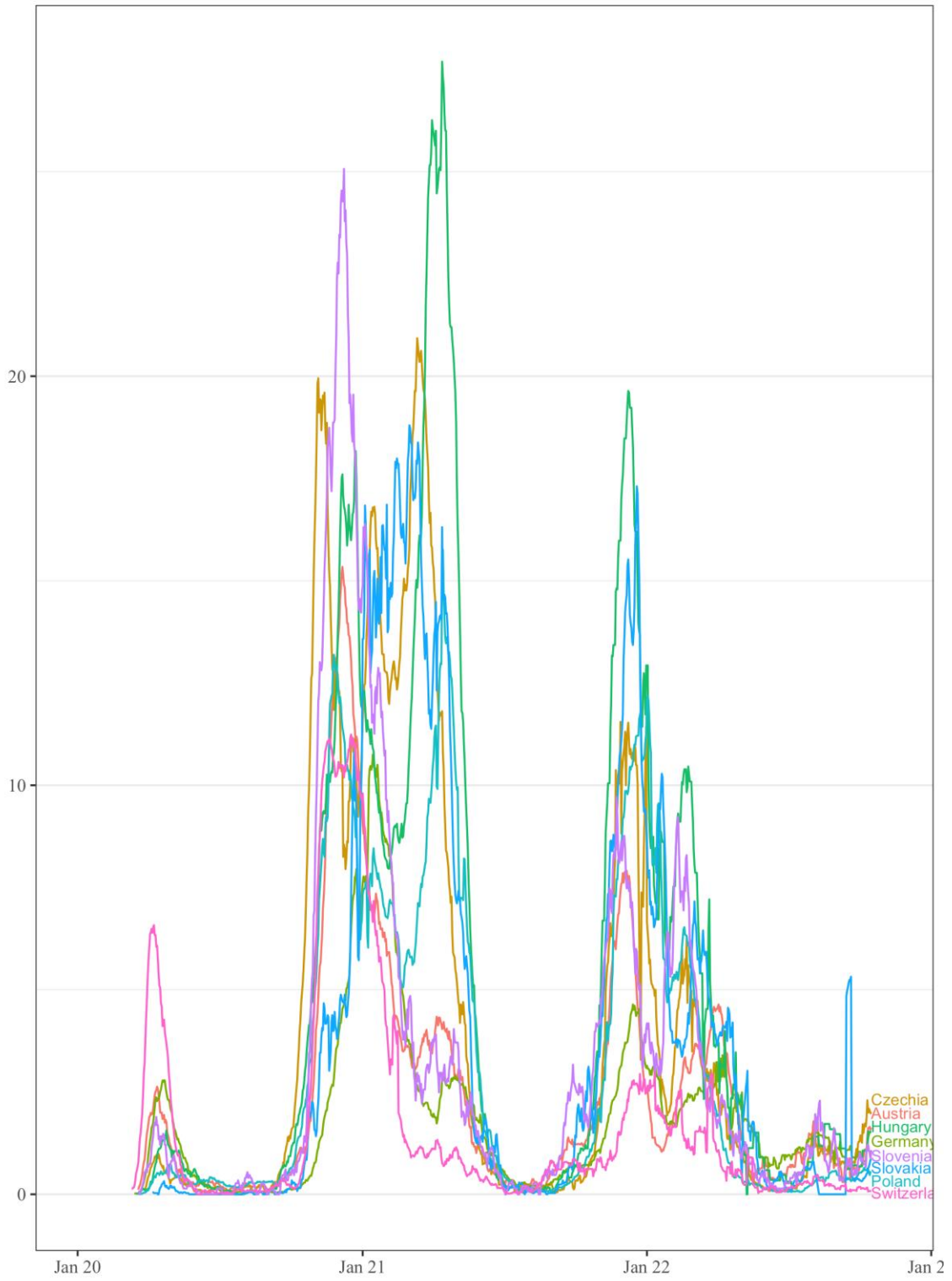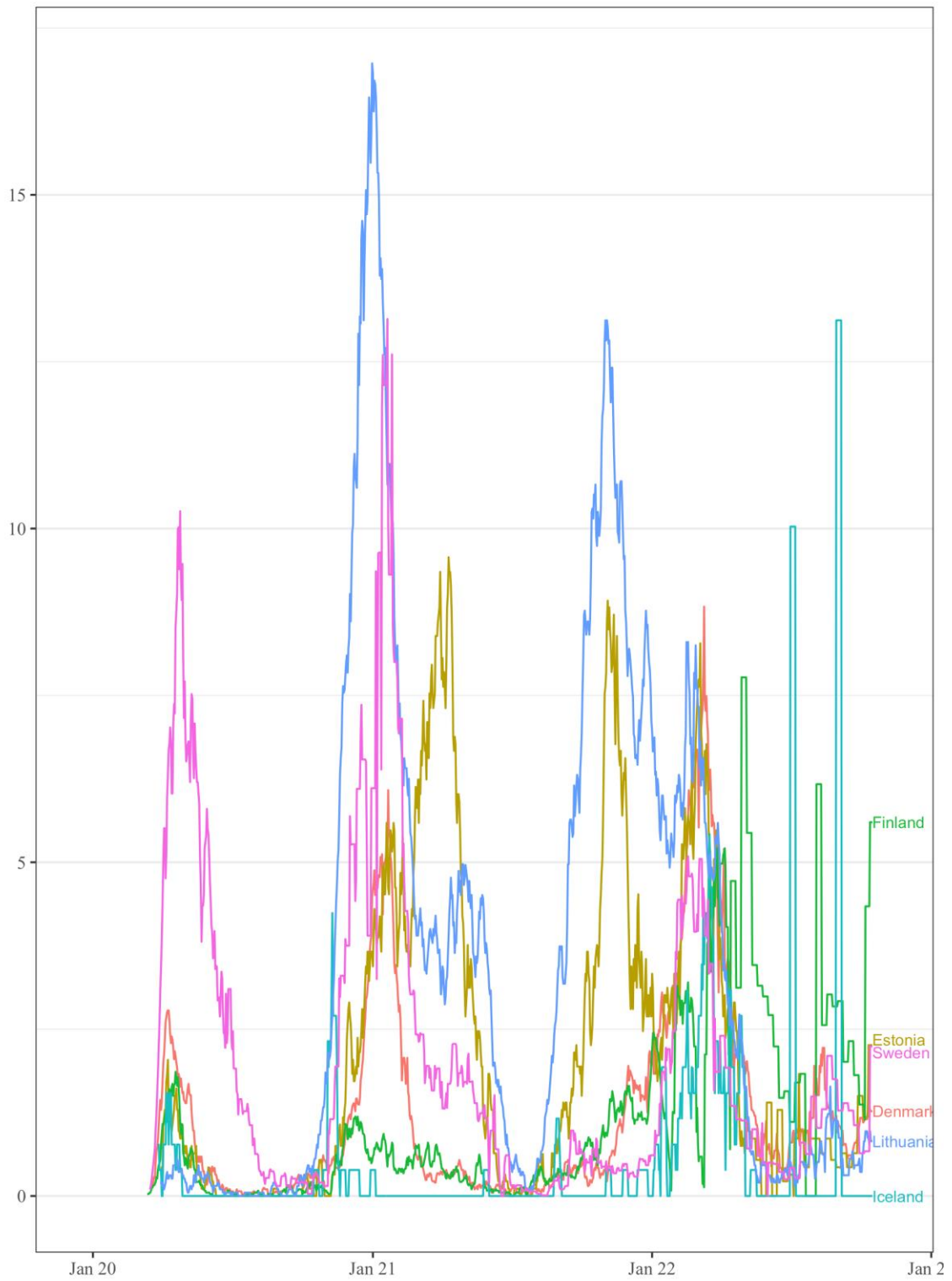COVID-19 death rate in the Mediterranean region

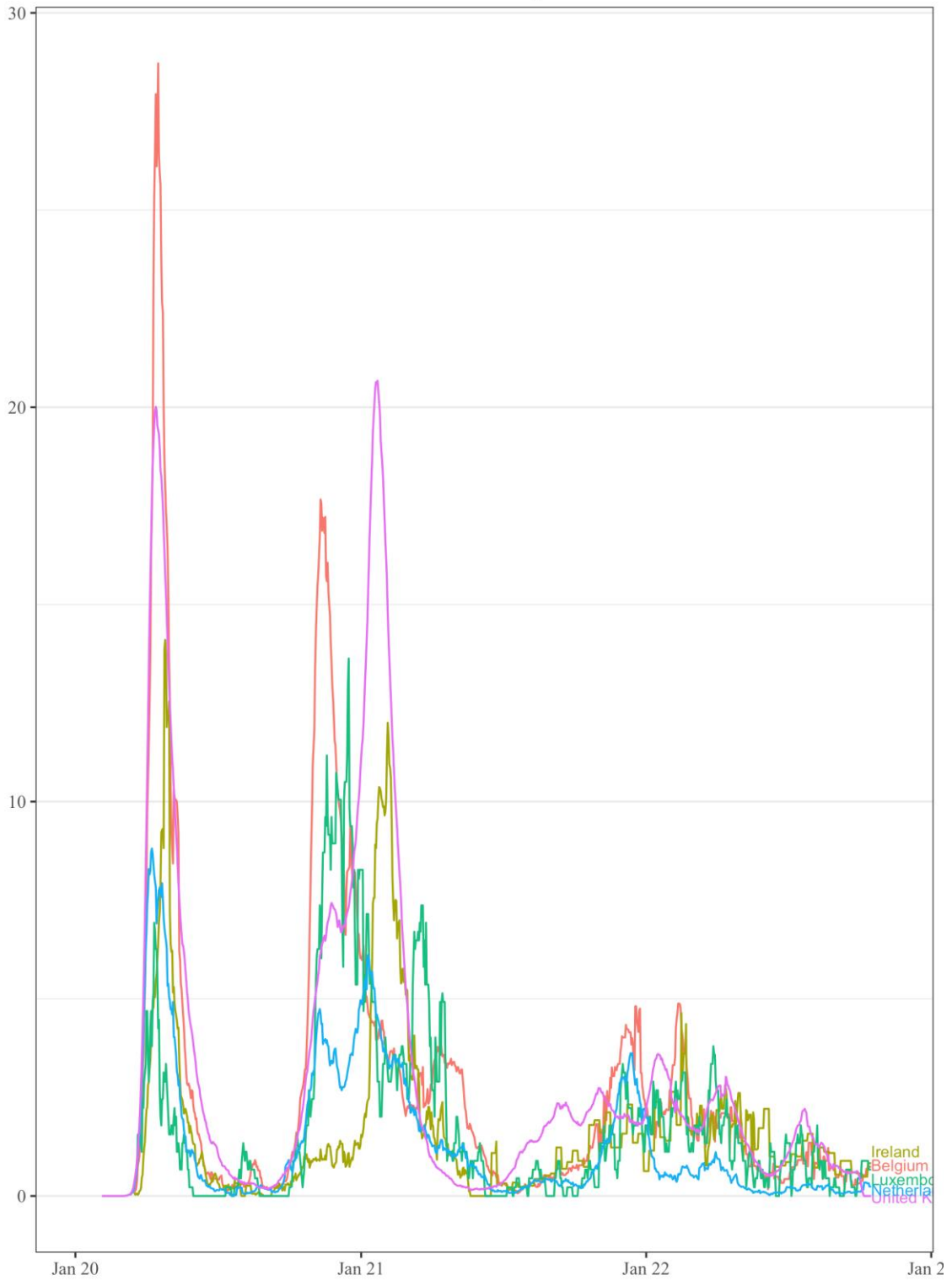COVID-19 death rate in the South-East region

COVID-19 death rate in Central Europe

COVID-19 death rate in Baltics and Nordic Countries

COVID-19 death rate in North-Western Europe

COVID-19 death rate in Central Asia

Russia
Ukraine
Kazakhs
Georgia
Kyrgyzst
Uzbekist
Tajikistan