

ASPHER Report

COVID-19 Situation Reporting across Europe

Week of March 29th 2021

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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 ?

ASPHER celebrates the extraordinary and dramatic falls of deaths from COVID-19 in Israel, Spain, UK and urges all countries to address their internal problems with vaccination programmes and get these sorted.

ASPHER is still gravely concerned about the severe undermining of confidence in all COVID-19 vaccination, brought about through the actions of individual European governments in pausing use of the AstraZeneca vaccine. This is in direct contradiction to the advice of the international health agencies, WHO, ECDC and the European Medicines Agency. This is damaging to all efforts of European countries to combat the virus and reduce it to very low levels so that some return to 'new normality' may be possible. No-one will be free from the virus unless we are all free. (see also https://www.aspher.org/download/677/aspher_az_vaccine_statement_en.pdf)

ASPHER is concerned about the rise of cases in many countries and the necessity for new lockdown implementation in Belgium, France, Austria and Poland amongst others. We are concerned about contradictory policies on lockdown and travel and urge governments to work together with the WHO, ECDC and the European Commission to create a coherent framework for control on international movement. We call on all governments to work together to create a practical strategic approach for suppressing the virus, saving lives, and reopening social and economic life.

ASPHER is concerned that many countries are reducing social restrictions at a time when the incidence of COVID-19 is still very high, much higher than during the first wave, and with the Reproduction number over 1 in many countries. The relaxations are inconsistent between countries and will make international control of spread more difficult.

ASPHER urges countries which have not yet been able to implement effective vaccine programmes to pay particular attention to safeguarding their clinically vulnerable people.

ASPHER expresses its solidarity and support for colleagues in the Czech Republic, Estonia, and Montenegro particularly and calls on neighbouring countries to provide mutual aid when possible. We are concerned to see the rising death rate in Hungary and Poland, the rising number of cases in Croatia, and the reversal of previous improvements in Austria.

More generally ASPHER is concerned about the recognition of an increasing number of new variants of the SARS-COV2 virus. We believe there should be increasing international collaboration and capacity in the surveillance of the variants of the virus, surveillance of the outcomes of vaccination, resistance to infection and timespan of immunity. There needs to be coordinated global effort towards anticipating new variants, and adapting vaccinations to meet mutating changes of the virus. (see also: <https://blogs.bmj.com/bmj/2021/01/28/we-need-an-equitable-and-coordinated-global-approach-to-covid-19-vaccination/>)

The COVID-19 pandemic has entered its second year since the time WHO has declared coronavirus outbreak as a global pandemic on 11th March 2020 (1). From the experiences of initial lockdown, countries have learned to develop strategies to sustain economic stability by imposing strict regulations instead of complete lockdown. Continuing the non-pharmacological interventions alongside of vaccine rollout, some countries have significantly reduced the number of deaths as well as the infection rate. However, some countries are still experiencing a mounting infection rate, which is a major concern.

Since the beginning of the COVID-19 pandemic, the rapid spread of the virus in almost all the countries has resulted in considerable disruption of public health at a global level. The pandemic has cost over two million lives up to date (2,791,953) and the total number of confirmed COVID-19 cases has surpassed 0.1 billion with the highest number in the Americas (55,736,003) followed by Europe (44,561,071), South-East Asia Region (14,827,184), Eastern Mediterranean (7,519,257), Africa (3,074,086), and Western Pacific (1,901,266) according to the WHO statistics (2).

As per WHO weekly epidemiological report, the European Region is contributing 35% of cumulative COVID-19 confirmed cases worldwide. Overall, Europe has seen a rising trend in the number of new cases and in new deaths at 11% and 7% respectively. In Poland, France, and Turkey high incidence of coronavirus is reported at 508.5, 389.5, 221.0 per 100,000 population respectively (3)

The following table shows the incidence of daily new coronavirus confirmed cases and deaths across European countries as reported on 29/03/2021

Table 1

WHO Europe Region	Daily newly confirmed COVID-19 cases rolling 7-day average per million people	Daily newly confirmed COVID-19 deaths rolling 7-day average per million people
San Marino	1,022.87	21.05
Hungary	894.41	25.29
Estonia	842.15	8.83
Poland	735.43	9.69
Czech Republic	659.51	16.36
Andorra	634.18	3.70
Montenegro	632.33	10.92
Serbia	621.62	4.70
Kosovo	601.21	7.39
France	537.46	4.90
North Macedonia	508.24	14.61
Bulgaria	507.74	14.91
Sweden	505.64	1.98
Bosnia and Herzegovina	485.94	21.29
Slovenia	456.90	3.30
Netherlands	446.64	1.62
Belgium	415.37	2.38
Moldova	402.26	9.88
Cyprus	385.40	0.81
Austria	364.44	2.95

Luxembourg	359.67	5.02
Turkey	347.64	1.78
Italy	340.43	7.14
Croatia	338.69	4.35
Ukraine	322.90	6.78
Armenia	314.43	5.59
Monaco	302.14	3.64
Romania	293.95	7.17
Latvia	274.25	4.17
Lithuania	263.70	3.88
Greece	231.97	5.67
Slovakia	231.44	13.06
Switzerland	206.96	1.09
Malta	200.27	4.85
Germany	198.96	1.93
Norway	160.85	0.29
Azerbaijan	145.91	2.07
Albania	142.72	3.52
Spain	128.40	5.06
Belarus	123.53	0.92
Ireland	114.54	2.29
Finland	112.21	0.36
Georgia	101.06	1.97
United Kingdom	76.17	0.94
Kazakhstan	73.21	0.15
Russia	60.39	2.55
Israel	55.47	1.45
Denmark	47.23	0.32
Portugal	41.16	0.83
Iceland	26.79	0.00
Kyrgyzstan	15.35	0.15
Uzbekistan	4.65	0.02
Tajikistan	0.00	0.00

Source: <https://ourworldindata.org/coronavirus>

Scandinavia and Baltic countries:

- In Estonia the rolling 7-day average of daily newly confirmed COVID-19 cases per million people has decreased and deaths increased (842.15, 8.83) (Figure 1,2) compared to the week before (1,110.09, 7.43) (4). Still the numbers are highest in Estonia among these countries (5). The members of the government have extended the restrictions to reduce the spread of infection till 25th April (6).
- The Finland institute for Health and Welfare has proposed a regional targeting vaccination based on the epidemiological situation in regions which reflects on lowering the need for intensive care but may not influence the transmission of infection (7).
- In Lithuania the moving 7-day average of daily newly confirmed COVID-19 cases and deaths are 263.70, 3.88 per million people respectively (5) and the percentage of population fully vaccinated is 5.48% (8).

Figure 1

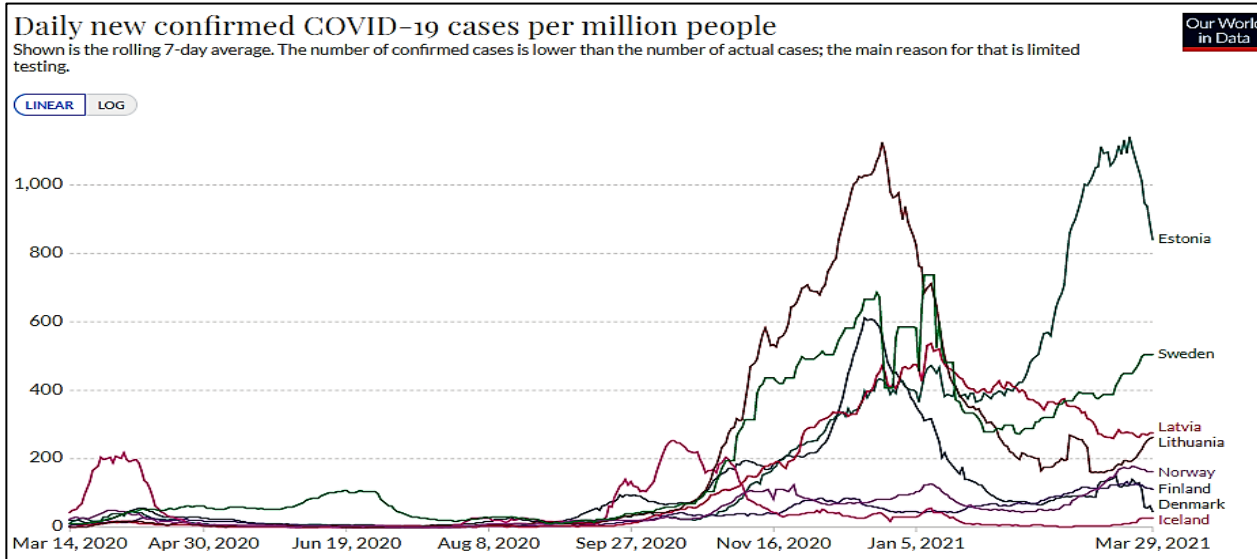
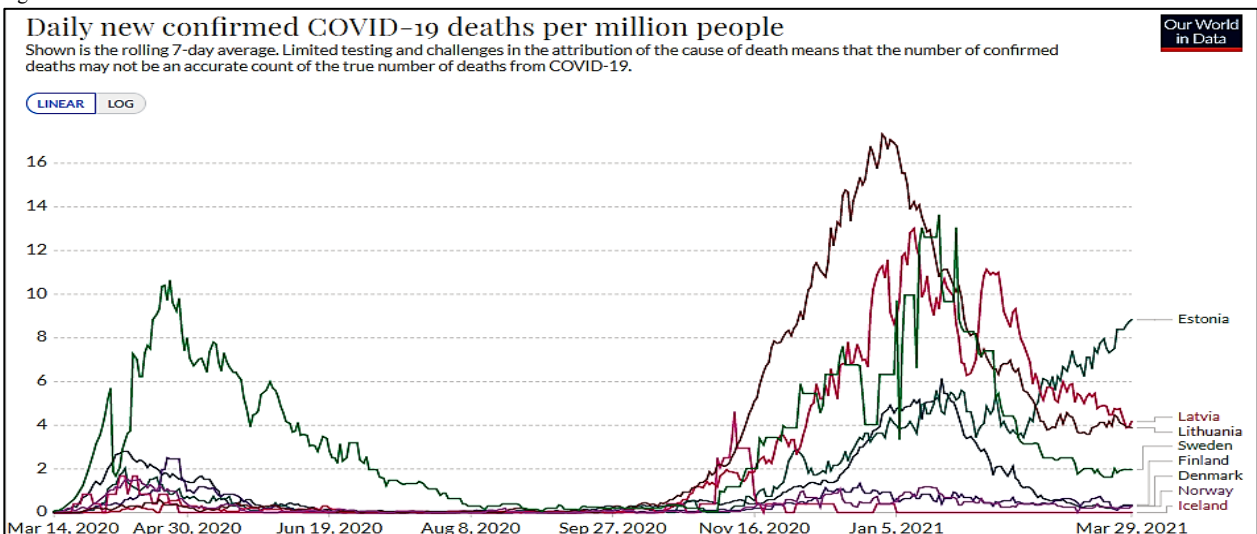


Figure 2



Source: <https://ourworldindata.org/coronavirus-> (Figure 1,2)

Central Europe:

- Hungary is the highest vaccinator in the European Union. It has given a first dose of vaccine to 21.6% of its population, which is just above Malta (21.5%) according to vaccine tracking by ECDC (9). Hungary also ranked high with its daily newly confirmed COVID-19 deaths: 7-day rolling average at 25.29 per million people (table 1).
- In Czechia the number of people hospitalized are 7,580 and the number of patients requiring high-intensity care are 1,717 as on 30th March (10). The rolling 7-day average of daily newly confirmed COVID-19 cases and deaths per million people are showing a downtrend (659.51, 16.36) compared to the week before (865.93, 19.09) (4).
- In Switzerland, as on 30th March, the total hospital and ICU occupancy by COVID-19 patients are 4.10%, 17.40% respectively (12). The number of new infections started to rise gradually since late February and the vaccine rollout is not up to expectations, hence the government has postponed the decision to further relax restrictions (11).
- In Poland, on 27th March, new measures have been introduced—kindergartens, hairdressing salons will be closed until 9th April. There are 31,811 COVID-19 patients in hospitals, 500 more than the day before. 3,143 under respirators, 50 more than on Wednesday (31st March). These numbers are going up rapidly. The hospitals capacity is saturated also the health work force and the government has started shifting the patients to other hospitals in Poland (R. Otok, Ł. Balwicki’s personal communication)

Figure 3

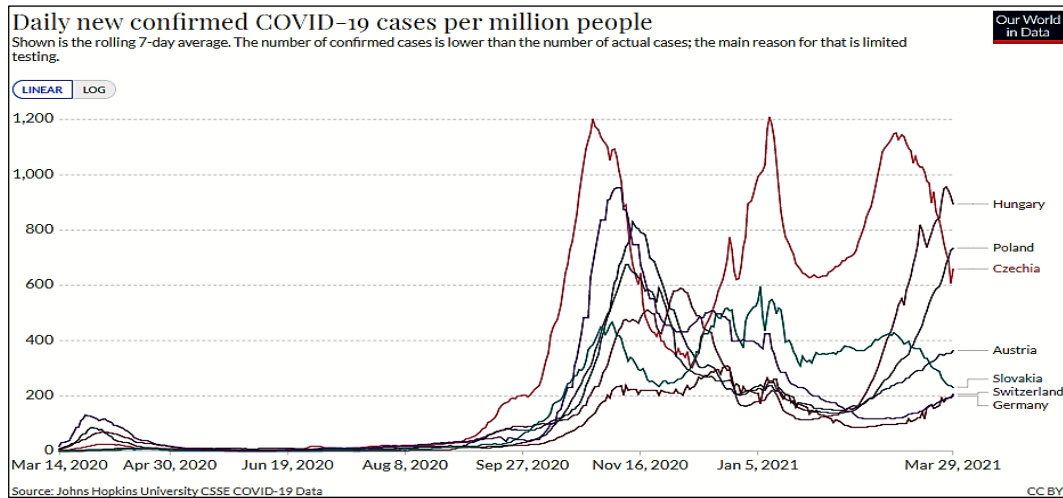
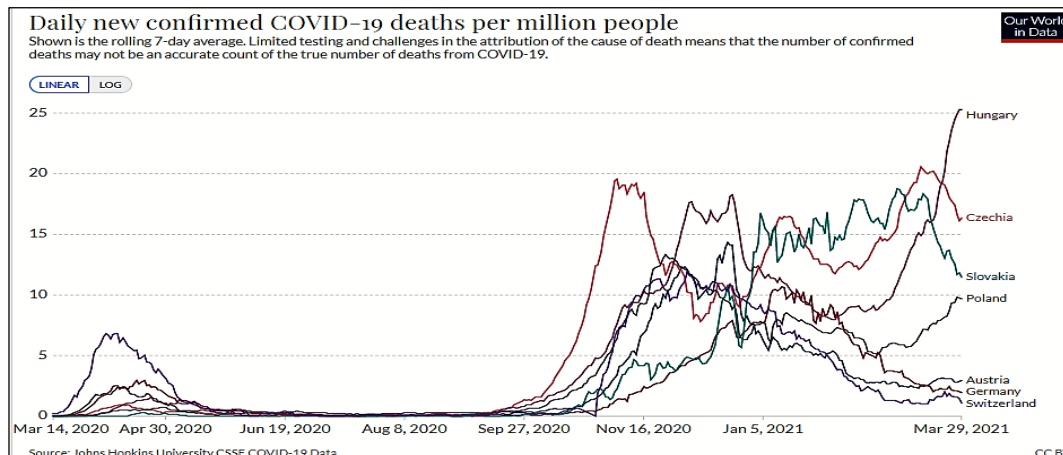


Figure 4

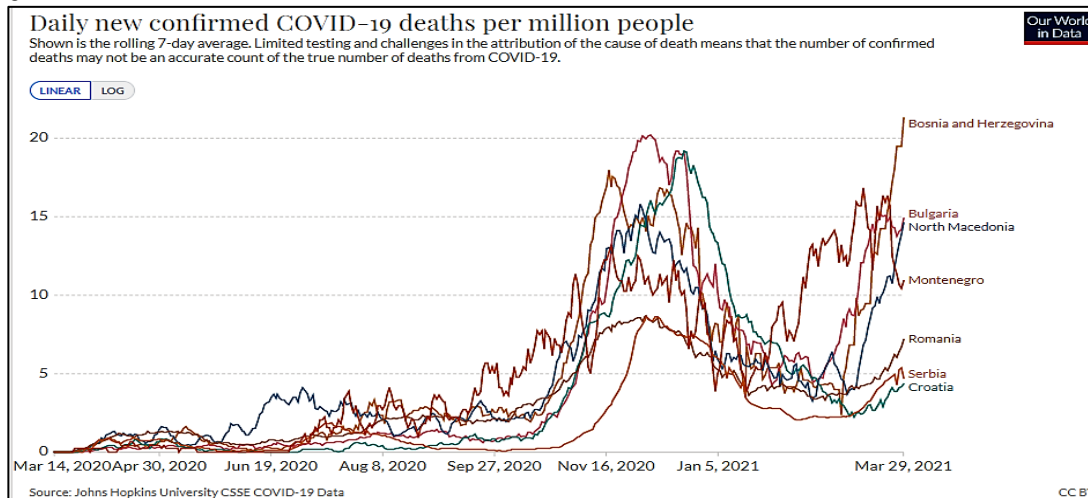


Source : [https://ourworldindata.org/coronavirus- \(Figure 3,4\)](https://ourworldindata.org/coronavirus- (Figure 3,4))

South-East Europe:

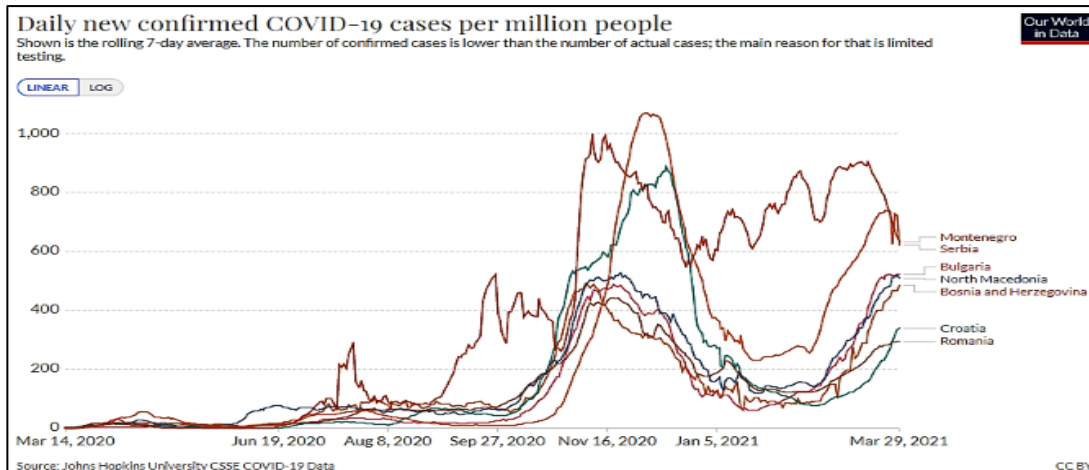
- Cases are climbing steeply in all the Balkan countries, catching up with Montenegro which is now plateauing.
- In Croatia, the moving 7-day average of daily newly confirmed COVID-19 deaths are low at 4.35 per million people compared to other countries (figure 6) in the South East Europe region. A new testing method has been introduced on 31st March by the Andrija Štampar Teaching Institute of Public Health – “drive in” diagnostic test for diagnosing coronavirus with an aim of ensuring enhanced safety for people as well as the health care professional and to accelerate the quantity of tests, diagnostics (13).
- All 28 districts in Bulgaria are in COVID-19 “red zones” for two successive weeks (14). There appears to be a contradictory relaxation of measures with effect from 1st April (15), given the high rates.
- In Serbia, a total of 595,489 cases were confirmed to date (30th March) since the beginning of the pandemic and the total number of deaths are 5,270 with death rate 0.88% (16). The proportion of population fully vaccinated is 13.17% (8).
- In Romania, the rolling 7-day average of daily newly confirmed COVID-19 cases are 293.95 per million people which is low compared to other regions in South-East Europe. Whereas the figures for the deaths were low in Croatia at 4.35 (Figure 5). The 7-day average of intensive care admission before 31st March was 1,384, a 3.8% increase compared to the week before (17).

Figure 5



Source : <https://ourworldindata.org/coronavirus-> (Figure 5.6)

Figure 6



Mediterranean Countries:

- Portugal has significantly lowered its COVID-19 infection rate and death rate in recent weeks which was on the surge of growing number of infections in late January (18). The national incidence is 70.0/100,000 inhabitants according to the daily situation report on 30th March (19).
- In France, the rolling 7-day average of daily newly confirmed COVID-19 cases are high at 537.46 per million people followed by Cyprus (585.40), Italy (340.43), Greece (231.97), Spain (128.40), Israel (55.47) and Portugal (41.16) (figure 7). The percentage of population fully vaccinated is 4.04% (9). The lockdown measures taken previously in 19 territories (départements) are enlarged to all of France (except overseas territories with specific rules depending of epidemiological situation). From next Monday (5th April) and for 4 weeks, it is forbidden to move to another region. Schools are closed next week (with online classes) followed by 2 weeks of Easter vacation for all schools in France (rather than the usual practice of staggering the weeks of school break between different zones of France) then it will be reopened gradually. Measures are in place to enhance teleworking. An agenda to speed up vaccination has been presented: vaccination of persons over 60 will begin 16th of April, over 50, from 16th of May and mid-June it will be open to the entire adult population (L. Chambaud, personal communication).
- In Israel, the study results from the Ministry of Health's central virology laboratory found that the British variant is the most common cause for coronavirus in the country. The study also found an uncommon Israeli variant which has no clinical or epidemiological significance and no apparent influence on effectiveness of vaccine (20). The number of new cases has dropped from about 8,000 per day to less than 500 per day and the number of serious cases hospitalised has dropped from over a 1,000 to 385. The number of deaths per day has dropped to below 10 and on some days, to zero as on 1st April (Manfred S. Green, personal communication). Israel is in second position next to Gibraltar with highest percentage of population fully vaccinated at 53.63% (9).

Figure 7

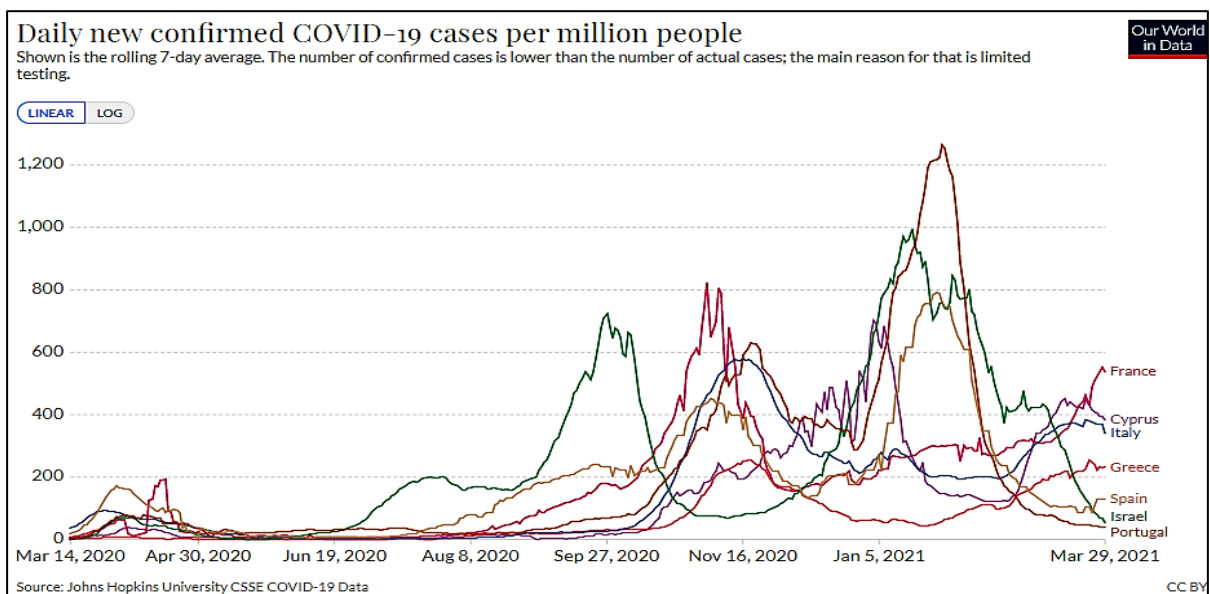
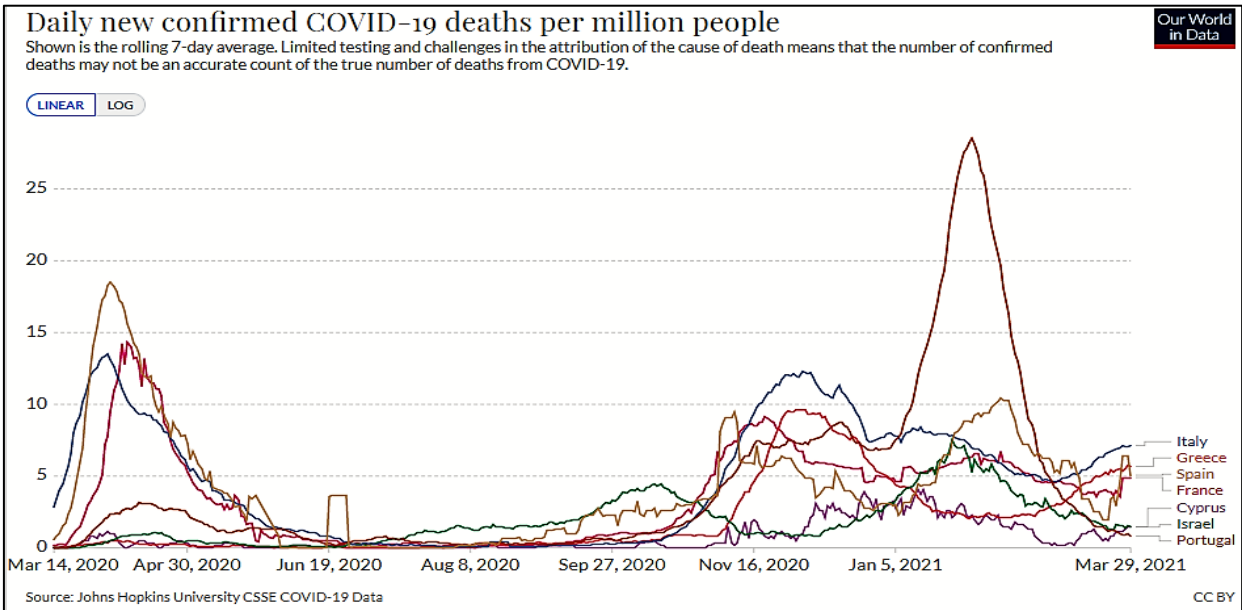


Figure 8
Source: <https://ourworldindata.org/coronavirus-> (Figure 7,8)



Northwestern Europe:

- In the Netherlands, approximately 1.7 million people have been inoculated with the first dose of vaccine and 700 thousand people received the second dose according to the weekly update on COVID-19 vaccination (from 21 to 28th March) (21). The impact of vaccine is reflected positively by reducing the number of positive tests among people who are vaccinated than who are not. The first change is noted among residents of nursing homes and disability care homes (22).
- The moving 7-day average of daily newly confirmed COVID-19 cases and deaths in the United Kingdom are low compared to other countries in Northwestern Europe at 76.17, 0.94 per million people respectively (Figures 9,10). In England and Wales, weekly registered COVID-19 deaths (mentioned COVID-19 as cause of death on death certificate) have reduced to 963 in the week ending 19th March which is a reduction of 538 compared to the week before (23).
- In Belgium, the figures for daily newly confirmed COVID-19 deaths rolling 7-day average are 2.38 per million people (table 1). Belgium has fully vaccinated 4.52% of the total population (24).

Figure 9

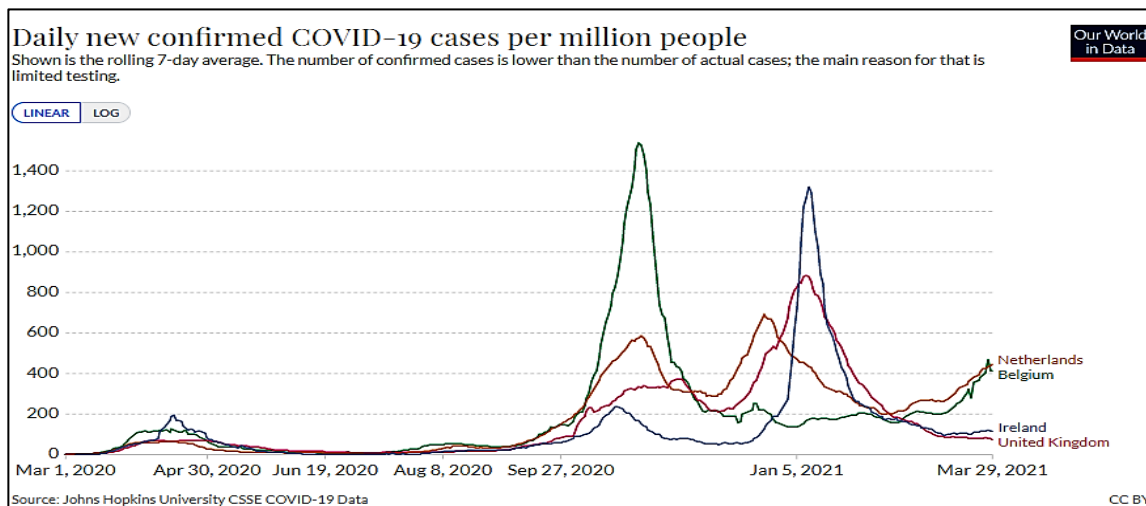
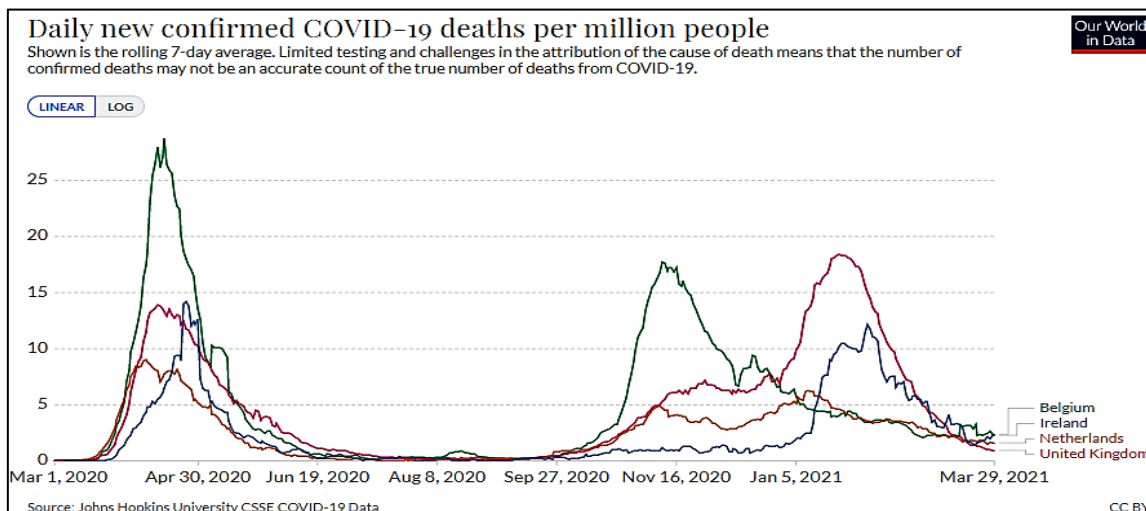


Figure 10

Source: <https://ourworldindata.org/coronavirus-> (Figure 9,10)



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