



**Update: May 5 and 6, 2020**

**UPDATE ON GLOBAL, REGIONAL AND NATIONAL DEVELOPMENTS ON  
COVID-19**

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## Summary

- Worldwide, as of May 06, 12:00 GMT, there were more than 3.5 million (3,752,002) people infected with the corona virus with 1,255,958 recoveries and 259,358 deaths
- The number of new cases in UK is relatively declining in the last three days but the number of new deaths reported within 24 hours has increased. UK is leading in Europe in mortality tally in Europe. This is being blamed on the late initiation of public health control measures
- In Africa, a total of 49,352 confirmed cases, 1,959 deaths, and 16,315 recoveries were reported as of May 6, 6:00 EAT.
- More Gastrointestinal (GI) symptoms are being reported in addition to the common sign and symptoms of the COVID-19.
- Viral shedding from the GI route is longer lasting as confirmed by positive rectal swabs even when nasopharyngeal swabs are negative.
- Organizations such as the WHO, CDC and AU are warning against use of Madagascar's herbal tonic for COVID-19 treatment without study on its safety and efficacy.
- There is a high risk of transmission before and in the first few days after the onset of symptoms of COVID-19, but the risk of transmission decreased with an increase in the number of days.

## Recommendations

- Despite long history of use, traditional medicines in Africa are rarely tested for safety and efficacy. Traditional medicines have to subjected to rigorous clinical trials to ensure safety and efficacy. The risk of interactions with concomitant 'modern' medicines has to be weighted.
- The benefit of GI symptoms in the diagnosis of COVID-19 deserves further evaluation. Also worth evaluating if unique/context-specific presentations and prognostic indicators are present through detailed and structured clinical assessments as well as evaluation of course of illness in a prospective cohort design.
- Asymptomatic children and adults may be shedding infectious virus and could transmit it through the GI route. Need to continue emphasising personal hygiene.

## Update on sign and symptom

- **It's known that some corona viruses, especially Middle East Respiratory Syndrome (MERS), can cause gastrointestinal (GI) symptoms in addition to the common sign and symptoms like fever, cough, fatigue etc... Previous study in China had found that few COVID-19 patients also presented with at least one GI symptoms (nausea, vomiting or diarrhoea) [Jin X, et al. 2020], which has been re-confirmed recently (below).**
- **This recent study was conducted among 95 COVID-19 patients and found that 58 (61.1%) exhibited GI symptoms of which 11 (11.6%) occurred on admission and 47 (49.5%) developed during hospitalization. Diarrhoea (24.2%), anorexia (17.9%) and nausea (17.9%) were the main symptoms. The study also stated that;**
  - **Some of these patients were not having imaging features of COVID-19 pneumonia but only GI symptoms. Faecal samples of 42 patients with GI symptoms were tested for the presence of SARS-CoV-2, of which 22 (52.4%) were positive. However, study reported that the presence of SARS-CoV-2 in faeces does not necessarily indicate more severe GI symptoms.**
  - **SARS- CoV-2 could be detected in the oesophagus, stomach, duodenum and rectum in severe patients.**
  - **There was no significant difference in the clinical outcomes between patients with and without GI symptoms [Lin 2020].**

## Update on Epidemiology (Incidence, mortality, recovery & epidemiologic parameters)

### Global

- As of May 06, 12:00 GMT, the pandemic has affected more than 3.5 million people (3,752,002) with 259,358 deaths.
- The percentage of recoveries is marginally increased to 1,255,958 (83%) while it was continuously 82% the previous week.
- A total of 81,247 new cases were reported in the last 24 hours (Worldometer). The number of new deaths (5,787) is increased as compared to May 5th (4,096 deaths) and May 4th (3,480 deaths) report.
- Persistently, United States of America (USA) is the leading country with a total of 1,239,847 cases (33.04% of the total cases).
- New York continues to be the most affected state with 330,139 cases and 25,204 deaths followed by New Jersey (131,705 cases, 8292 deaths) and Massachusetts (70,271 cases, 4212 deaths).
- Spain (253,682 cases), Italy (213,013 cases), United Kingdom (UK) (194,990 cases) and France (170,551 cases) are the other most affected countries in the world.
- Even though, the number of new cases in the UK is relatively declining in the last three days, the number of new deaths (693 deaths) reported within 24 hours is massively increased compared to the report of the previous (288 deaths). As a result, UK has become the second country with the highest number of deaths after the USA.
- Till now, 72,381 people have died with coronavirus in the USA. The other leading countries: UK (29,427), Italy (29,315), Spain (25,857) and France (25,531). These countries accounted for 70.4 % of the total deaths worldwide.

### Africa

- According to the Africa CDC, a total of 49,352 confirmed cases, 1,959 deaths, and 16,315 recoveries were reported as of May 6, 6:00 EAT.
- The five countries in Africa with the highest cumulative number of cases (proportion of reported cases in Africa) are South Africa (7,572 (15.3%)), Egypt (7,201 (14.6%)), Morocco (5,382 (10.9 %)), Algeria (4,838 (9.8%)), and Nigeria (2,950 (6%)).
- The number of new cases reported in South Africa (352) is slightly reduced compared to the previous day (437 new cases).
- Consistently, Algeria is the leading country with high number of deaths (470) followed by Egypt (452), Morocco (182), South Africa (148) and Nigeria (98). These countries account for over 2/3rd of the total deaths (n=1,350 (69%)) reported in the continent.

### Ethiopia

- According to the Ministry of Health report, additional 2,429 laboratory tests were performed in the last 48 hours and twenty two of them confirmed to be positive for COVID-19.
- All of the additional cases are Ethiopians and their age ranges from 8 to 75 years and majority (17/22) of these cases are males.
- Fifteen of the additional cases have travel history; of this, nine of them came from Djibouti and the other six from Somalia. All of these cases were staying in Afar and Somali regional mandatory quarantine center respectively.
- Out of the other seven cases who don't have travel history, six of them were reported from Addis Ababa and one from Batu, Oromia region. Of this, four of them have contact history with confirmed COVID-19 case while the other two are still under investigation and one of these cases were reported as having risky job.

- The ministry of health also reported that additional eighteen people (17 from Addis Ababa, 1 from Amhara region) recovered from the disease raising the total number of recoveries to 93. It's also reported that one additional case who is a 75 years female patient was died on May 5th, 2020 making the number of deaths 4.
- As of May 06, 6:00 PM EAT, a total of 26,517 laboratory tests were conducted and 162 confirmed cases, 4 deaths and 92 recoveries were reported in the country.
- Currently, there are 63 active cases and all of these cases are receiving medical care in the designated treatment centre.

### Update on Diagnosis

- According to FIND diagnostics, as of 6th May 2020 [2:00pm, EAT], there are 265 molecular assay tests commercialized and 44 tests under development for COVID-19. There are also 262 immunoassay tests commercialized and 46 tests under development (FIND, 2020).
- Another study found change in the ability to smell or taste is a strong predictor for a COVID-19 positive test result indicating this information is highly valuable at a time in which testing resources remain highly constrained and important decisions must be made regarding testing resource allocation (Roland et al., 2020).

### Update on Treatment

- Madagascar's president is promoting an herbal tonic for treating COVID-19 patients. The tonic, known as COVID-Organics, was tested on fewer than 20 people over three weeks, a presidential aide told the BBC - which is not in line with WHO guidelines on clinical trials. Organizations such as WHO, CDC and AU are warning against its use without study on its safety and efficacy. Despite these reservations, it was reported that African countries such as Guinea-Bissau, Equatorial Guinea and Liberia, have ordered COVID-Organics, which is produced from the artemisia plant, the source of an ingredient used in a malaria treatment, and other Malagasy plants (BBC News, 2020).

### Update on Public Health Control Measures

- A study in Taiwan analysed the transmission pattern of SARS-COV-2 using data from 100 confirmed cases and their 2761 close contacts. Secondary attack rate was calculated to estimate the difference in the risk of transmission among different groups or circumstances. (Cheng H-Y, 2020)
- There is a high risk of transmission before and in the first few days after the onset of symptoms, but the risk of transmission decreased with an increase in the number of days. This is also consistent with the laboratory findings of viral shedding patterns of SARS-COV-2, which starts before and increases around the onset of symptoms (Cheng H-Y et.al, 2020, Adhikari SP, 2020).
- This signifies a unique focus of control measures to non-symptomatic and pre or early symptomatic patients. With this regard, the contribution of symptom-based screening and dealing mainly with symptomatic patients can only help prevent the lower risk of transmission in the post symptomatic period (Cheng H-Y et.al, 2020).
- In the unlikely scenario where, universal testing will be employed anytime soon, public health interventions which help minimise the risk of transmission should be strengthened. Physical and social distancing, proactive contact tracing and quarantine and more importantly strict use of mask by the majority of the population should be in effect (Steinbrook R, 2020, Cheng H-Y et.al, 2020).
- Assuming a significant rise in the number of cases and contacts (if we come to prioritizing between contacts to be identified and isolated), the study advises a focus on contacts of the index case before and nearly after the onset of symptoms. The short period of infectiousness (which drops sharply after one-week) also suggests isolating symptomatic patients in health facilities beyond one-week, counting from the day of onset, may not help reduce the risk of transmission in a population (Cheng H-Y et.al, 2020).

## Update on personal protective equipment

### Facemask use

- The UK's Royal Society Data Evaluation and Learning for Viral Epidemics has come to the conclusion that face masks, including homemade cloth masks, can contribute to reducing viral transmission if correctly used. The analysis, reportedly, suggests that their use could reduce onward transmission by asymptomatic and pre-symptomatic wearers if widely used in situations where physical distancing is not possible or predictable, contrasting to the standard use of masks for the protection of wearers. However, other experts are raising their concerns over this report claiming there is no evidence to support this conclusion (Davies, 2020).
- One article indicated that airborne transmission must be considered plausible due to the rapid spread of the virus. The authors address Heating, Ventilation and Air Conditioning Systems as major source for indoor and environmental contamination which can explain the swift viral spread. It was indicated upon considering the airborne transmission for COVID-19, critical measures including widespread recommendation for mask use, the use of more PPE for health care workers and structural changes in hospital facilities regarding ventilation systems need to be taken to guarantee effective control of the pandemic (Correia et al., 2020).

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