

Coronavirus Disease (COVID-19) Pandemic

CARPHA Situation Report No. 33 - April 14, 2020

Summary

This is an update to the Situation Report published on April 8, 2020, in relation to the outbreak of COVID-19.

To date, there are 6,087 cases in 33 countries/territories (including 24 CARPHA Member States), in the Caribbean Region. The risk of further importation of cases to the rest of the Caribbean remains **Very High**.

The Regional Coordinating Mechanism for Health Security (RCM-HS), is actively working with Heads of Government and regional partners on a collective approach to the COVID-19 response.

Countries are strongly urged to strengthen their health sector response and move to a state of readiness and rapid response.

NEW in this report

- **New confirmed cases in CARICOM Member States**
- **WHO definition for reporting COVID-19 deaths**
- **CARPHA's call for Experts**
- **CariPHLN Update**

Numbers at a Glance*

Clinically diagnosed and laboratory confirmed cases

Globally

1,812,744 cases (495,593 new)

In the Caribbean Region

33 countries, areas, or territories (0 new)
6,087 cases (2,071 new)
450 recovered (184 new)
316 deaths (131 new)

Rest of the World

179 countries, areas, or territories and Other** (1 new)
1,806,657 cases (493,522 new)
461,703 recovered (307,880 new)
113,359 deaths (39,240 new)

**Persons on board the Diamond Princess Cruise Ship harboured in Yokohama, Japan

WHO Risk Assessment

China	Very High
Globally	Very High
Caribbean	Very High

*CARPHA is providing updated reports on cases in CARPHA Member States as information becomes available through local sources. Caribbean numbers presented in this report may not necessarily be reflected in the WHO totals.

Situation Update

Up to 33 countries in the Caribbean region have reported the importation of at least one confirmed case of COVID-19. The risk of further importation of cases to the Caribbean Region remains **Very High**.

The aim for all countries now, is to **stop transmission, prevent the spread of the virus and save lives**. Based on the Draft CARPHA Health Sector Response Guidelines for COVID-19 circulated to Member States, most countries are encouraged to implement actions in keeping with the Initial or Targeted Action in the Response Phase.

The PAHO Director Dr Carissa Etienne and other experts on 14 April, met with Ministers of Health to discuss the current status of the pandemic response in the countries of the Americas, and provide an overview on rapid

tests and other diagnostics, suggested therapeutics including chloroquine, and an update of current social distancing measures along with the evidence required to relax these measures.¹

The World Health Organization will be publishing a six-point criteria technical guidance for countries to use when considering lifting restrictions imposed due to COVID-19 response².

This includes:

1. Transmission of virus is controlled
2. The health system capacities are in place to detect, test, isolate and treat every case and trace every contact
3. Outbreak risks are minimized in special settings, such as, health facilities and nursing homes
4. Preventive measures are in place in workplaces, schools and other places where it's essential for people to go.
5. Importation risks can be managed
6. Communities are fully educated, engaged and empowered to adjust to the "new norm"

Every country should be implementing a comprehensive set of measures with the aim of reaching a steady state of low-level or no transmission of COVID-19 infection.

Caribbean Regional Coordination

CARPHA is leading the regional health response to COVID-19, in keeping with its Intergovernmental Agreement (IGA) mandate from CARICOM and recommendations from the COHSOD-Health Working Group on Regional Coordination for Response Management. As such, CARPHA activated its Incident Management Team-Emergency Response (IMT-ER) on January 21, 2020 and convened the Regional Coordinating Mechanism for Health Security (RCM-HS). Figure 1 depicts a timeline of regional events since the outbreak was detected in December 2019. CARPHA continues to work with its partners and countries, on a harmonized regional response.

¹ PAHO Director to brief Ministers of Health on the latest developments with the COVID-19 pandemic response <https://www.paho.org/en/news/14-4-2020-paho-director-brief-ministers-health-latest-developments-covid-19-pandemic-response> accessed 14 April 2020.

² WHO Headquarters - coronavirus - COVID-19 daily press briefing 13 April 2020

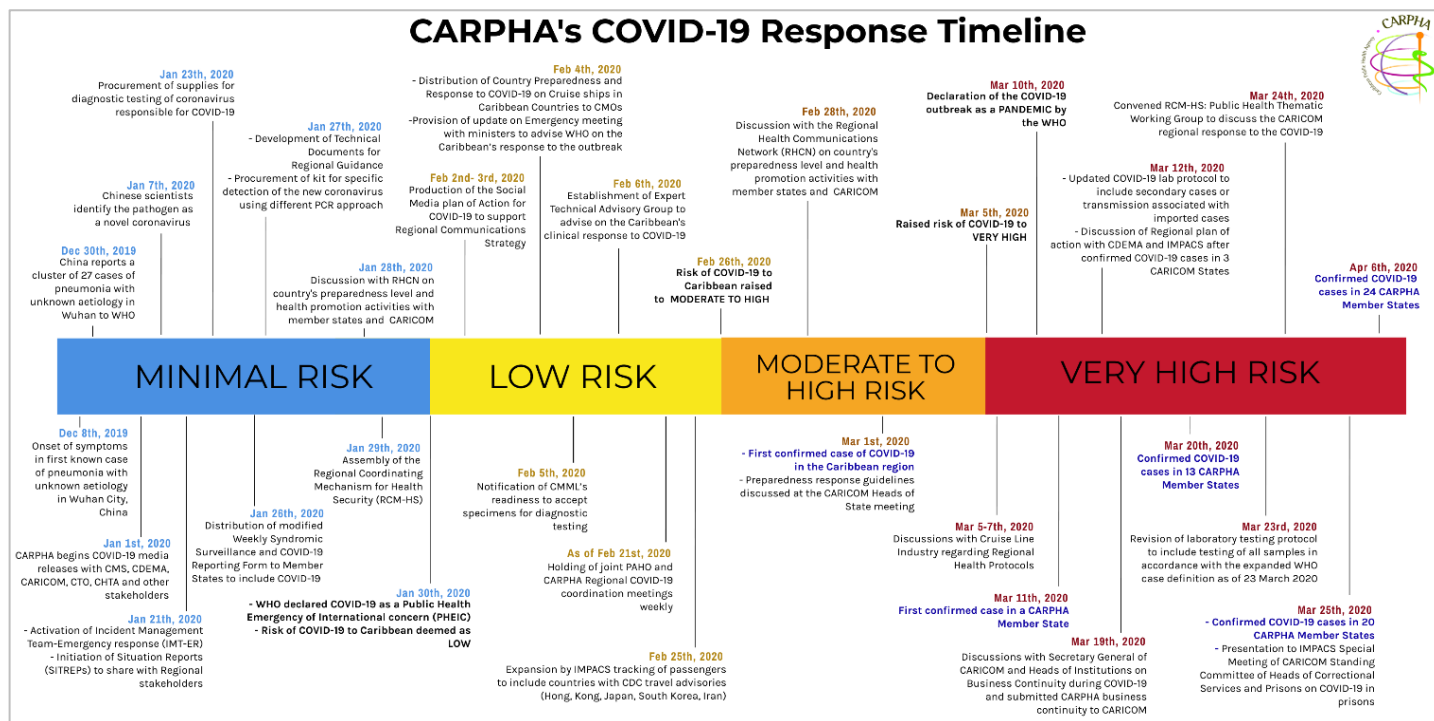


Figure 1: CARPHA COVID-19 Response Timeline (December 2019 – April 2020)

Epidemiological Summary

COVID-19 in the Caribbean

Since the previous report on April 8, 2020, additional cases were confirmed in 29 countries, bringing the region's total confirmed cases to 6,087 in 33 countries/territories; 24 (72%) of these are CARPHA Member States. This new total represents a 52% increase in the numbers of confirmed cases. One hundred and thirty-one (131) additional deaths were also recorded, bringing the total numbers of deaths to 316.

Globally

The data contained in Table 1 below are obtained from data reported by the WHO, supplemented by other sources – (Reference 1 and 2 in Table 1).

As of April 14, 2020, the WHO reported 1,812,734 cases of patients with COVID-19. Outside of China, 212 countries, areas or territories have confirmed at least one case among travellers exposed while abroad and/or person-to-person contact. One new country in the Eastern Mediterranean Region (Yemen) reported its first confirmed case of COVID-19 since the last Situation Report on April 8, 2020. See Table 2 below for more details on cases, deaths and recoveries. The number of cases recovered since our last report was not available.

Note. Cases reported between 13 and 19 February 2020 include both laboratory-confirmed and clinically diagnosed cases for the Hubei province. All other dates shown only include laboratory-confirmed cases.

Table 1: Countries or Territories with reported cases of COVID-19, 14 April 2020

Region	Country/Territory	Cases	# new cases since last report	Deaths	Recovered	% of cases still active [‡]
Region of the Americas						
Caribbean	Dominican Republic	3,167	1,211	177	152	89.6
	Rest of the Caribbean [*]	981	201	57	Not available	Not available
	Puerto Rico	903	330	45	Not available	Not available
	Cuba	726	330	21	121	80.4
	Martinique	157	6	8	Not available	Not available
	Guadeloupe	143	4	8	Not available	Not available
Americas	Rest of the Region ^{**}	638,909	225,488	25,235	64,013	86.0
Other Regions	Western Pacific Region ^{**}	122,805	8,138	4,161	93,140	20.8
	European Region ^{**}	913,349	227,011	77,419	246,344	64.6
	South-East Asia Region ^{**}	17,385	7,568	797	3,157	77.3
	Eastern Mediterranean Region ^{**}	102,710	21,700	5,234	52,355	43.9
	African Region ^{**}	10,787	3,617	501	2,055	75.7
Other	International conveyance (Diamond Princess Cruise Ship)	712	0	12	639	8.6
	Total	1,812,734	495,604	113,675	462,061	68.2

[‡] Active cases = Total cases – (Number of cases recovered + Number of deaths)

^{**} For full details on all countries' data visit Sources listed below. Numbers are updated throughout the day and may vary from what is listed at time of publishing.

Sources: (1) WHO Situation Dashboard Accessed at 8:15am 14 April 2020. Available from: <https://who.sprinklr.com/>

(2) Johns Hopkins University's Centre for Science and Engineering Accessed at 8:15am. 14 April 2020. Available from:

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

N.B. The WHO notes that due to a retrospective data consolidation exercise, some numbers may not reflect the exact difference between the previous numbers reported and the numbers reported today.

Epidemiological Updates

Definition for reporting COVID-19 Deaths

“WHO has published a definition for reporting COVID deaths: *a COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g., trauma). There should be no period of complete recovery between the illness and death.*”³

Clinical presentation of COVID-19

The following are the more common signs and symptoms of COVID-19 present at illness onset⁴. These signs and symptoms can vary from person to person:

<p>Most common</p> <ul style="list-style-type: none"> • Fever (83–99%) • Cough (59–82%) • Fatigue (44–70%) • Anorexia (40–84%) • Shortness of breath (31–40%) • Sputum production (28–33%) • Myalgias (11–35%) 	<p>Atypical</p> <ul style="list-style-type: none"> • Older adults and persons with medical comorbidities may have delayed presentation of fever and respiratory symptoms.
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It must be noted that **some patients may present with gastrointestinal symptoms such as diarrhoea and nausea prior to developing fever and lower respiratory tract signs and symptoms.** Researchers and doctors from Germany, China, Italy, South Korea and USA have reported that patients may also have a loss of smell (anosmia/hyposmia) and altered sense of taste dysgeusia.

Illness severity⁵

Based on information published so far, the majority (81%) of cases have a mild form of illness, the remaining 19%, have a more severe form of illness, including 5% who are considered critical.

CARPHA’s Mission

CARPHA’s aim is to work with regional and international health partners to respond to this public health threat and provide timely advice and assistance to Member States and stakeholders.

Governance

CARPHA’s Incident Management Team – Emergency Response (IMT-ER) is leading the health response in keeping with CARPHA’s mandate from the Intergovernmental Agreement (IGA). The IMT-ER produces Situation Reports three times weekly. As of March 31, 2020, CARPHA’s IMT-ER meets three times weekly to discuss CARPHA’s COVID-19 response and schedules are adjusted and guided by COVID-19 Incident Action Plan.

³ WHO Situation Report – 82. Accessed 14 April 2020. Available from: https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200226-sitrep-37-covid-19.pdf?sfvrsn=6126c0a4_6

⁴ Centers for Disease Control and Prevention. Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19). Revisions made on March 30, 2020.

⁵ Centers for Disease Control and Prevention. Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19). Revisions made on March 30, 2020.



L-R: Dr Laura Lee Boodram, Ms Angela Hinds and Dr Stephanie Fletcher-Lartey of CARPHA's SDPC Department having an informal catchup while maintaining their 'social distance' during COVID-19 pandemic.

CARPHA's IMT-ER in their meeting on April 9, 2020, provided the following updates:

- Rapid Response Teams have been assembled and additional surge capacity is being sourced to support teams to be deployed to support Member States.
- Financial and material resources to support the deployment of RRTs have been identified.
- CARPHA Workplace Protocol has been updated to reflect the commencement of temperature checks on all three campuses and staff have been provided with PPE.

Operations

Data submitted officially by Member States to CARPHA Surveillance System, official media releases from Ministry of Health or other official country sources available in the public domain, have been used to inform the assessment of the current situation in the Caribbean Region.

As of April 14, 2020, there have been 813 cases confirmed from CMS, the majority reported on March 21, 2020 (Figure 2).

Fig.2 Daily count of confirmed cases - CARPHA Member States

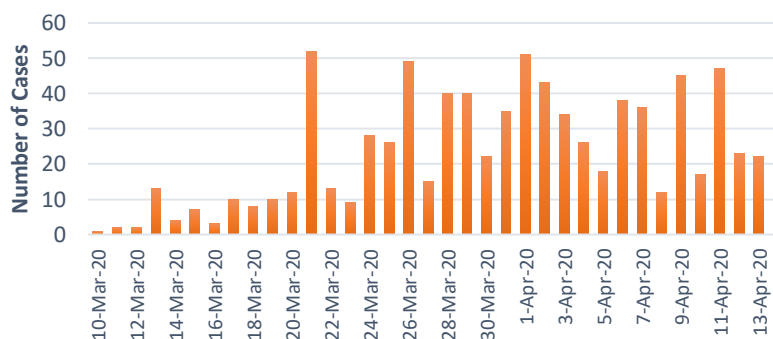
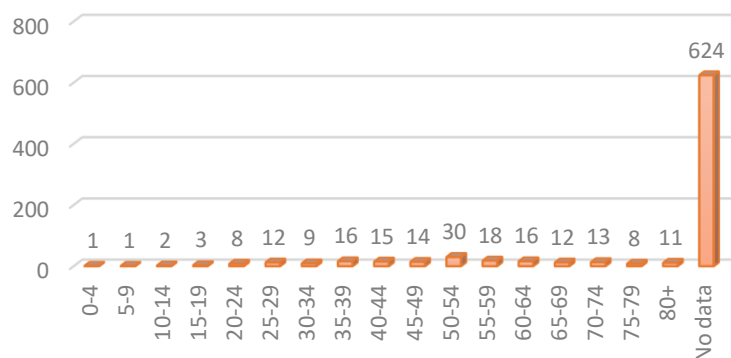
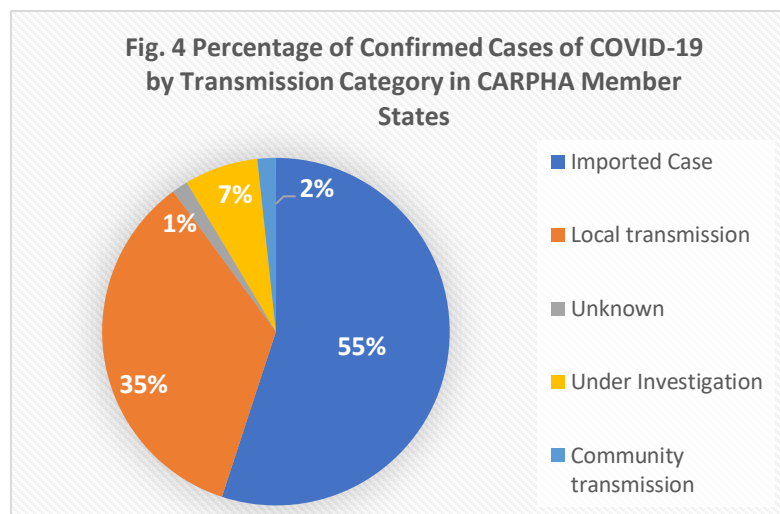


Fig. 3 Reported Confirmed Cases of COVID-19 by age group in CARPHA Member States

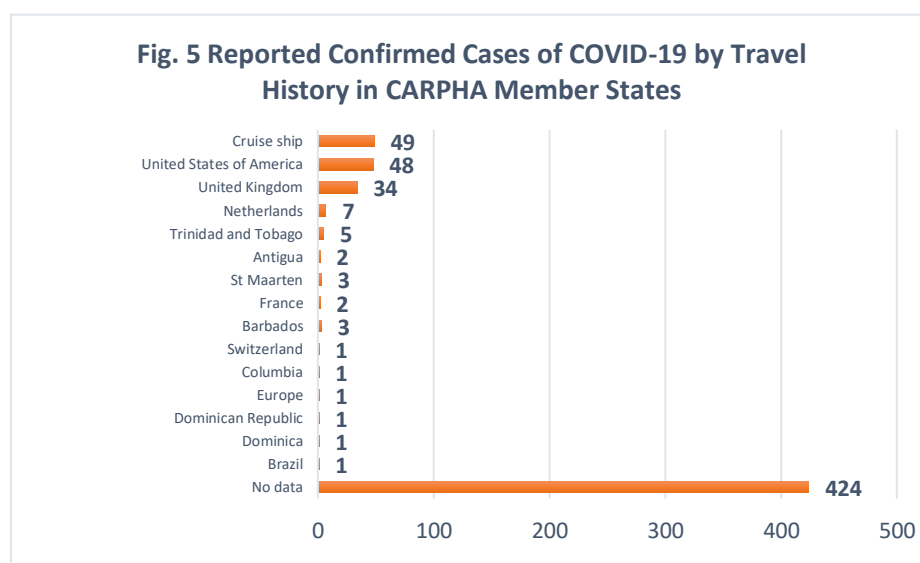


For the cases for which data was available, the majority were aged 50 years and over. There was no age provided for most cases (Figure 3).



Among cases for whom a source of infection was reported, 55% were imported; and 35% appeared to be close contacts (local transmission) of a known imported case (Figure 4).

The source was not identified for the vast majority of imported cases reported. Data available identified cruise ships, the United States of America and the United Kingdom as the top three locations where cases reportedly acquired their illness (Figure 5).



Country line listing and surveillance data

CARPHA has a mandate to carry out surveillance of infectious diseases in the Region. Since the start of the outbreak, only few countries have submitted their line listings for COVID-19 cases. Member States are being reminded to send anonymous line listings of confirmed cases of COVID-19 to CARPHA by emailing carpha-epidemiology@carpha.org. A summary of COVID-19 surveillance received from Member States is presented in Table 2⁵.

Table 2: CARPHA Surveillance received from Member States, as of April 14, 2020

Reporting Source		Airport		Seaport		Overall Total	
		No.	Cum.	No.	Cum.	No.	Cum.
Travellers with exposure or travel history		285	2284	0	9	285	3393
Symptomatic travellers seen at Health facilities		0	30	0	0	0	30
Travellers quarantined by public health authority		*	715	*	0	*	715
Travellers self-quarantined at home		*	2265	*	0	*	2265
No. of travellers completing 14-day isolation/quarantine		252	371	0	0	252	371
No. of travellers tested during the reporting period		182	410	0	0	182	422
Outcome of tests	Positive	38	66	0	4	38	70
	Probable	0	0	0	0	0	0
	Negative	138	270	0	8	138	278

⁹ To date eight Member States reported data for EPI-Week 13. * Not reported. No. refers to the number of persons reported in EW-X; Cum. refers to the number of persons to date, i.e. EW 1-X.

- CARPHA submitted its Business Continuity Plan and telework deliverables for all CARPHA employees, in preparation for the possibility of national shutdowns at all three campuses.
- CARPHA has disseminated a Health Sector Response Plan to Member States to guide their national response efforts where necessary. Further copies of the document are available upon request.
- Various technical guidelines have been developed including algorithms to assist CARPHA Member States (CMS) to triage and manage suspected cases within their borders and in clinical settings. These are summarised at the end of this document and can be accessed from CARPHA website at <http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus>.

Laboratory

- **As of April 13, 2020, CARPHA has received 1,812 samples from 14 CMS, 263 (14.5%) of which have tested positive since the start of the outbreak.**
- **On April 9th, CariPHLN Bulletin #2** was distributed which provided updates on COVID-19. This bulletin highlighted the CariPHLN regional response to COVID-19, guidance on GeneXpert SARS-CoV-2 kits and virtual training sessions available for medical and hospital laboratories. The next virtual training session is scheduled for Thursday 16th April 2020 (11.00 – 13.00 hrs.)
- **Laboratory Updates No. 9 and 10** were circulated to all stakeholders on April 4, 2020. Update 9 included updates to case definitions and update 10 included the testing algorithm. **Revised Requirements for**

Sampling of Suspected Cases: Following recent consultations with PAHO/WHO clinical advisors and based on scientific guidance received, CARPHA has increased the time period during which samples can be taken from suspected cases of COVID-19. Samples can be taken **from as early as day 0 to as much as ten (10) days following the onset of symptoms.**

- Effective Wednesday April 1, 2020, the CARPHA Medical Microbiology Laboratory (CMML) temporarily suspended the molecular detection of Influenza A and B viruses for more efficient use of available resources for COVID-19 testing.
- CARPHA through the Caribbean Public Health Laboratory Network (CariPHLN), launched a virtual training package for medical and hospital laboratories with current information on newly available diagnostic platforms for detection of SARS-CoV-2; applicable laboratory biosafety and biosecurity guidance for handling and processing suspect/confirmed COVID-19 patient samples and to exchange learning from others in the Network that already have capacity for the detection of SARS-CoV-2.
- CARPHA Medical Microbiology Laboratory (CMML) has modified the testing protocols in keeping with the Pandemic Response Phase of the COVID-19 emergency.
- Effective Monday March 23, 2020, CMML will test ALL samples for COVID-19 from CARPHA Member States that fit the WHO definition of suspected or probable cases. Please also note that Influenza A and B tests will be only performed upon specific request specified on the Laboratory Investigation Form.
- Effective March 16 and until further notice, the algorithm for laboratory investigation of respiratory diseases no longer includes non-influenza viruses.
- Effective March 2, 2020, only Nasopharyngeal and Oropharyngeal swabs (paired) are being accepted for testing at CMML. Neither urine nor serum will be further required.
- The Turnaround time (TAT) of PCR results, a quality indicator of laboratory performance is on average to date 20 h 59 m. This is currently faster than the set TAT for COVID-19 PCR tests (24-48 h).
- On March 23, 2020, U.S. Food and Drug Administration (FDA) approved molecular test kits from Cepheid for diagnostic use with GeneXpert Systems. Countries in the region may already use these systems to test for conditions such as tuberculosis. CARPHA noted that the kit could be used by countries which may only require 2-4 test per hour once there is appropriate validation of performance in-country; CARPHA is willing to assist countries in their verification processes.

Communication and Information

- Members of CARPHA's staff attended PAHO's virtual Media conference held on April 14, 2020.
- On April 9, 2020 Dr. Joy St. John joined the Pan American Health Organization (PAHO) and the Caribbean Disaster Emergency Management Agency (CDEMA) to discuss COVID-19: Current Status/Future Trends. The webinar was hosted by the Caribbean Broadcasting Union (CBU).
- April 7, 2020 - Dr. St. John was a guest on the Caribbean Broadcasting Cooperation "*Morning Barbados*" to discuss the coronavirus disease (COVID-19).
- April 5, 2020 - Dr. Joy St. John participated in an online podcast - Joint Yardie Skeptics, Freethinking Island Air Me Now (Jamaica) on COVID-19



Caribbean Response to Covid 19

- April 4, 2020 – Dr. Joy St. John joined CARICOM and the University of the West Indies in *The Caribbean Response to COVID-19: A conversation with representatives of regional players*. The session was hosted by Ambassador Curtis Ward for CaribNation TV and The Ward Post. <https://bit.ly/2z1B3PZ>
- CARPHA hosted a virtual regional media briefing on Wednesday April 1, 2020, to discuss CARPHA's testing for COVID-19 and protocols for dissemination of results. A recording of this briefing can be found at <https://youtu.be/fJVNPgLRxJE>
- CARPHA Communications Unit continues to produce social media products for various audiences and has maintained an active social media presence on Facebook, Instagram and Twitter.
- The latest media release, infographics and other relevant guidelines are available on CARPHA's website. Available from : <http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus>.



Logistics and Planning

- CARPHA is expanding its Human Resource skills bank to facilitate, as the need arises, the rapid recruitment and deployment of short-term emergency response consultants to CARPHA and its Member States ([see CARPHA – Call for Experts: COVID-19 Flyer](#)). Interested applicants are invited to submit an expression of interest and CV by email to HRM@CARPHA.ORG along with the completed [Emergency Response Deployment – Skills List document accessible](#) on CARPHA website.
- The Regional Security System (RSS) continues to facilitate transportation of samples from Member States to CARPHA. Samples from Member States and reagents are routinely processed through the Trinidad and Tobago Customs Department without delay. Negotiations are in progress to extend approval for the RSS to continue to deliver samples to Trinidad.
- Several Member States have implemented various measures to limit importation of the disease, including screening at ports of entry. Details can be obtained from the Ministries of Health of each Member State.

Stakeholder Engagement

CARPHA is working closely with various stakeholders for a coordinated regional response, and as such has engaged with stakeholders in multiple ways, including the following:

- April 14, 2020: Dr. St. John participated in a meeting of the Steering Committee for the WHO Solidarity Clinical Trial.
- April 14, 2020: Dr St John and Dr Indar participated in the Weekly CDEMA meeting

CARPHA continues its ongoing communications and meetings with the Council for Human and Social Development, CARICOM, Chief Medical Officers, Caribbean Disaster Emergency Management Agency, PAHO regional representatives, private organizations, public associations, regional agencies and organizations to revise

and advise on regional health response, guidelines and coordination to COVID-19 for proactive actions for developing situation in the Caribbean. *A full list of CARPHA actions to date are available.*

Way Forward

CARPHA is reminding Member States to **ramp up their disease surveillance efforts for acute respiratory infections/severe acute respiratory infections both at the primary and secondary care levels, as a matter of urgency.** This is to include widening their surveillance focus to be able to detect any cases that have not travelled, which can be an early indication of local transmission.

The WHO Director General has asked that individuals and countries refrain from using therapeutics that have not been demonstrated to be effective in the treatment of COVID-19. Various trials are underway to test drugs for use in treating COVID-19 cases. Discussions are underway in the region to determine participation in the WHO SOLIDRITY trial.

CARPHA is working with technical experts across the Region to provide up-to-date guidance and technical advice to CMS. New guidelines have been prepared for the management of COVID-19 cases on airlines and guidance for Hotel Workers. CARPHA remains committed to providing support and guidance to Member States on how to strengthen their health systems response should there be person-to-person transmission in the Caribbean.

CARPHA continues to work through the Regional Coordination Mechanism for Health Security and the various regional coordination efforts to engage and support Member States, regional and international partners for the health security of the region.

CARPHA recognises there is need for accurate information in this time of uncertainties. CARPHA documents can be accessed as a reliable source of information from our [website](#). Available on the website are **Technical Documents, Media Releases and Communications Material.**

External Online Training Resources

- [Infection Prevention and Control \(IPC\) for Novel Coronavirus \(COVID-19\)](#). OpenWHO
- [A general introduction to emerging respiratory viruses, including novel coronaviruses](#) (available in French, Simplified Chinese, and Spanish as well). OpenWHO
- [Health and safety briefing for respiratory diseases - ePROTECT](#). OpenWHO
- [ECDC Micro Learning platform](#) – A suite of short (<2 hours) courses on the control of COVID-19

References

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