

ASPHER Report: COVID-19 Situation Reporting across Europe

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Authors: Rok Hrzic^{1,2,3}, Nadav Davidovitch^{3,4*}

¹ Maastricht University, the Netherlands

² ASPHER Young Professional

³ ASPHER COVID-19 Task Force

⁴ Ben-Gurion University of the Negev, Israel

Corresponding Author: nadavd@bgu.ac.il

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 on COVID-19](#) highlights that the global number of weekly cases and deaths declined compared to the previous week.
- The [ECDC country overview report](#) highlights that the overall case notification rate remains high although it had been declining for the past weeks, including for those age above 65. Hospital and ICU admissions have decreased, while hospital and ICU occupancy indicators have remained stable. The increase of case notification rate driven by BA.4/BA.5 for the past weeks has not resulted in sustained increases in hospitalisation or ICU admission across the region.

Selected recent COVID-19 publications

[Gonçalves, J., Torres-Franco, A., Rodríguez, E., Diaz, I., Koritnik, T., da Silva, P. G., ... & García-Encina, P. A. \(2022\). Centralized and decentralized wastewater-based epidemiology to infer COVID-19 transmission—A brief review. *One Health*, 100405.](#)

- A combination of centralized and decentralized WBE should be considered for an affordable, sustainable, and successful WBE implementation in high-, middle- and low-income countries.

[Wester, C. T., Bovil, T., Scheel-Hincke, L. L., Ahrenfeldt, L. J., Möller, S., & Andersen-Ranberg, K. \(2022\). Longitudinal changes in mental health following the COVID-19 lockdown: Results from the Survey of Health, Ageing and Retirement in Europe. *Annals*](#)

- Older people felt less depressed and had fewer sleeping problems during the pandemic as compared to before the pandemic, while the risk of loneliness increased slightly. Stricter policy measures attenuated the otherwise positive impact on mental health.

[Tung, H. H., Chang, T. J., & Lin, M. J. \(2022\). Political ideology predicts preventative behaviors and infections amid COVID-19 in democracies. *Social Science & Medicine*, 308, 115199.](#)

- A more right-leaning attitude was found to be associated with a higher probability of testing positive

both directly and indirectly through conspiracy theory beliefs and physical distancing.

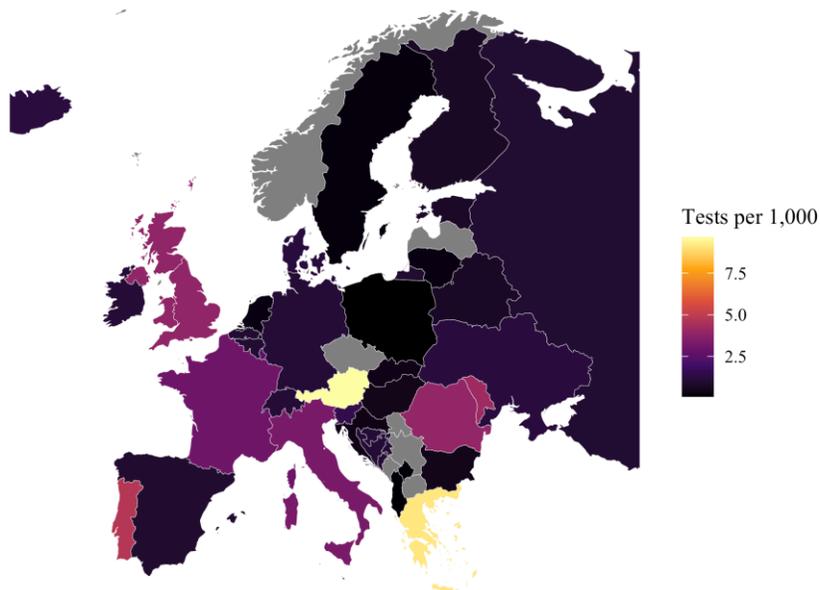
ASPHER is concerned about talk of the ‘end of the pandemic’. *Pandemic* is not defined by politicians, or by journalists. The *pandemic* is defined by the World Health Organisation, under strict decision-making process and not as mere opinion. A pandemic is “an epidemic occurring worldwide, or over a 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.

Latest COVID-19 test rates in the countries of the WHO-Europe region ([Source: Our World in Data](#)).

New COVID-19 tests per 1,000 population



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

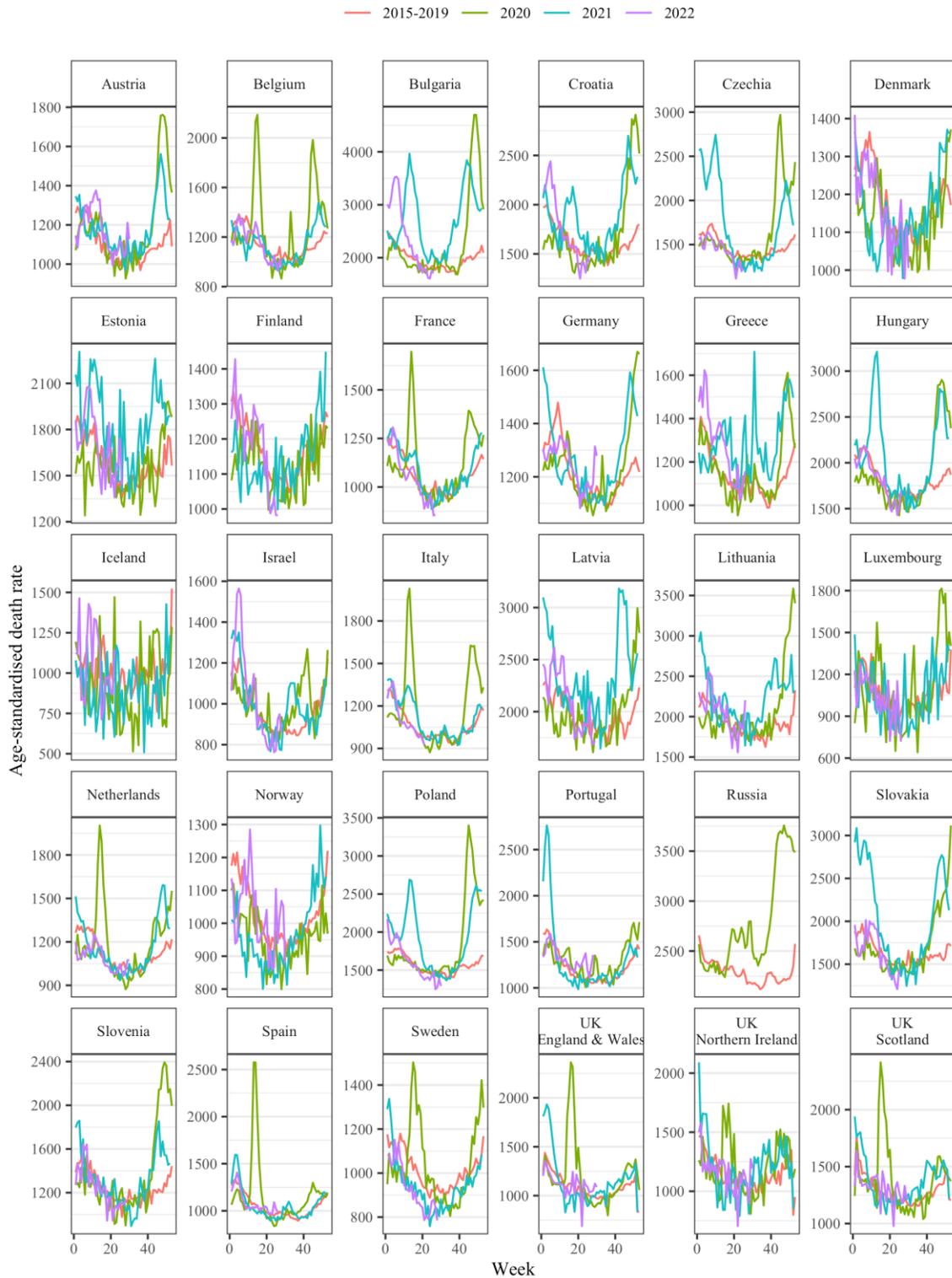
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/million people	30-day trend in weekly hospital admissions
Serbia	0.92		843.64			
Greece	9.12		783.50		183.36	
Slovenia	1.50		723.92		58.32	
Austria	9.66		593.76			
Lithuania	0.27		526.49			
Georgia	0.93		469.02			
Germany	1.06		436.92		54.34	
Moldova	4.17		435.55			
Italy	3.26		428.95		55.06	
Cyprus	75.00		339.60		4.46	
France	2.99		312.06		61.09	
Finland	0.72		298.28			
Switzerland	1.05		280.20		15.07	
Portugal	4.74		253.48			
Russia	0.96		242.66		143.75	
Turkey	1.59		242.28			
Hungary	0.45		239.07			
Romania	3.92		236.71			

WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/million	30-day trend in weekly hospital admissions
Croatia	0.38		224.52		95.14	
Belgium	0.98		223.14		47.11	
Kosovo	0.12		222.05			
Luxembourg	2.55		212.73		1.57	
Denmark	1.23		198.66		71.57	
Albania	0.13		197.67			
Iceland	1.24		175.13		24.40	
North Macedonia	0.38		170.34			
Belarus	0.74		166.60			
Czechia	0.35		161.55		79.44	
Bulgaria	0.45		145.78			
Estonia	0.75		144.50		74.43	
Andorra	1.15		137.37			
Israel	2.82		125.05		31.21	
Poland	0.09		110.91			
Armenia	0.53		97.92			
Bosnia and Herzegovina	1.07		97.79			
Sweden	0.23		94.81			
United Kingdom	3.85		84.85		105.22	
Ireland	1.04		79.79		72.71	

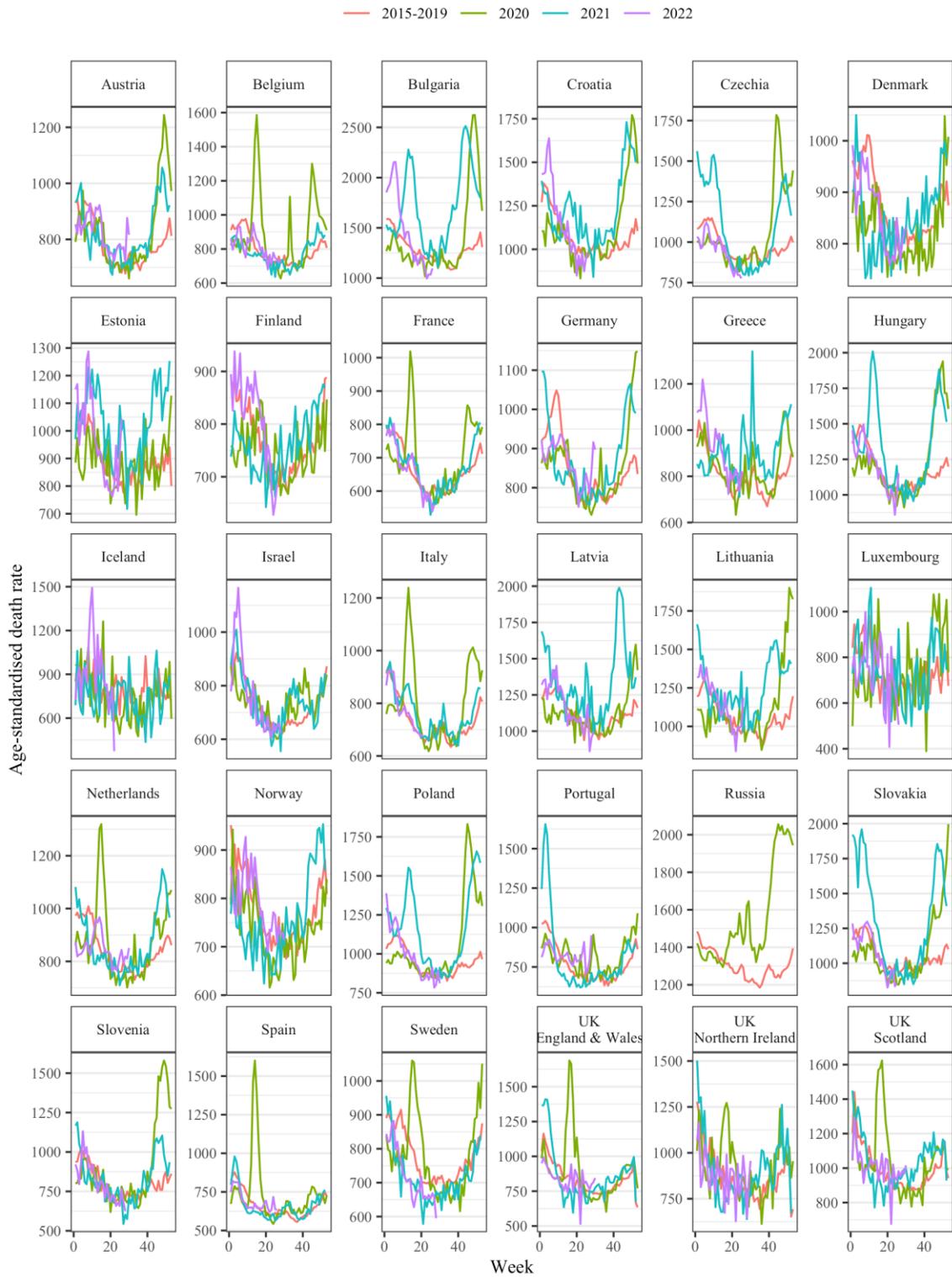
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/million	30-day trend in weekly hospital admissions
Malta	2.73		77.29		27.13	
Netherlands	0.28		72.80		28.45	
Spain	0.92		52.59		60.73	
Azerbaijan	0.23		48.48			
Kazakhstan	2.08		48.42			
Slovakia	0.39		38.89			
Ukraine	1.21		30.18			

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)

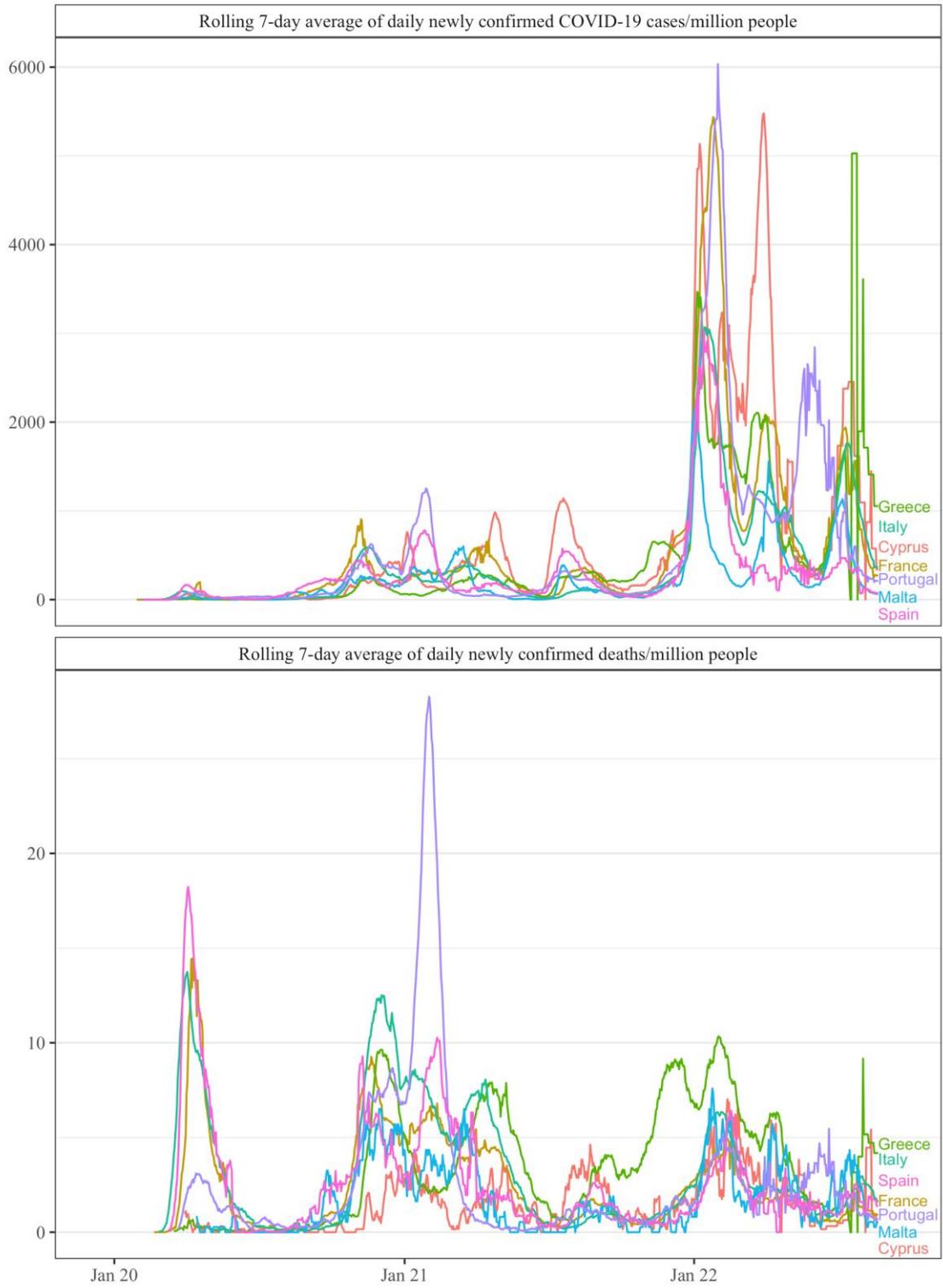


Age-standardised death rate (women)

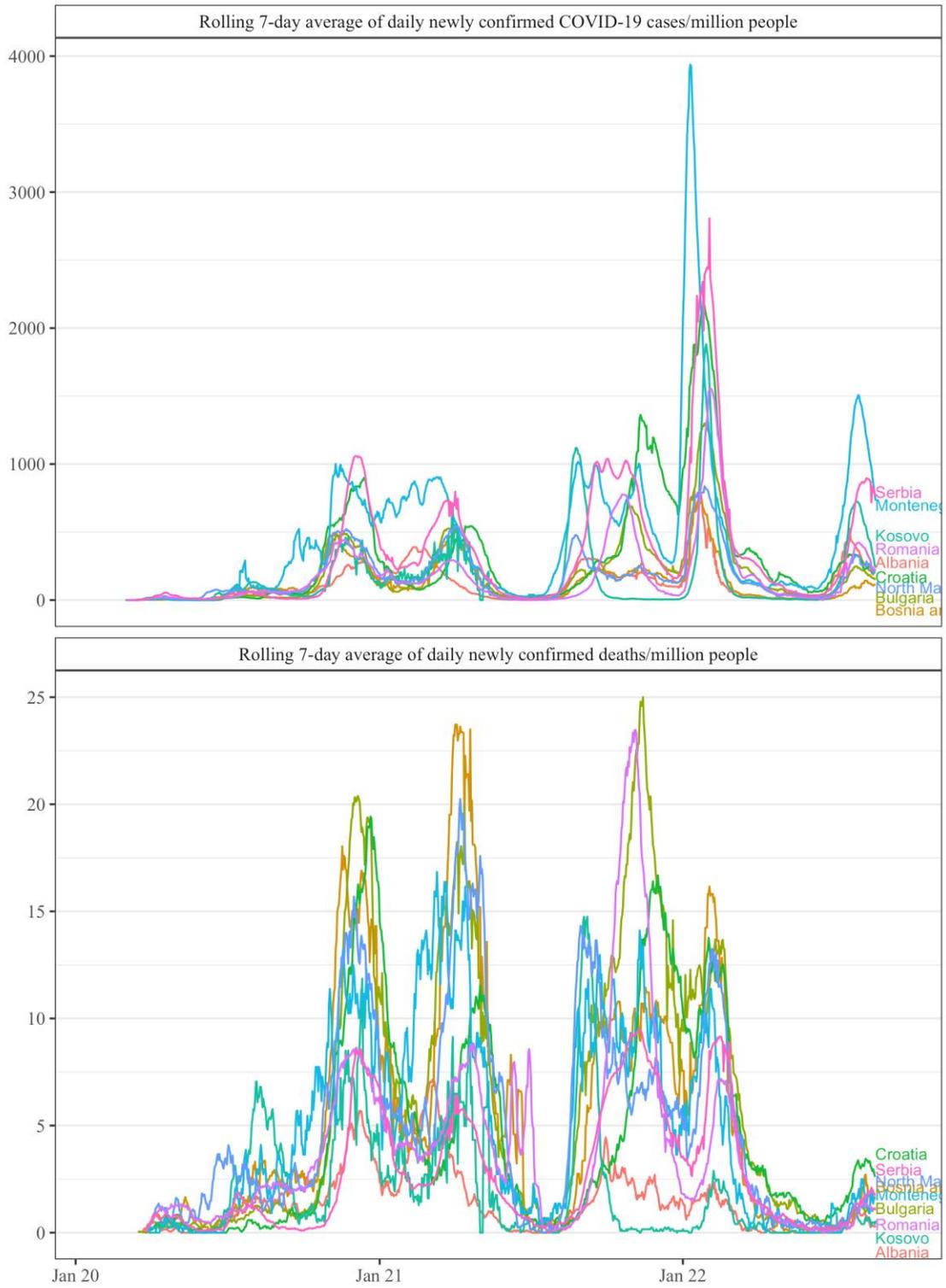


Rolling 7-day average of daily new confirmed COVID-19 cases and daily new confirmed COVID-19 deaths in sub-regions of Europe (Source: Our World in Data).

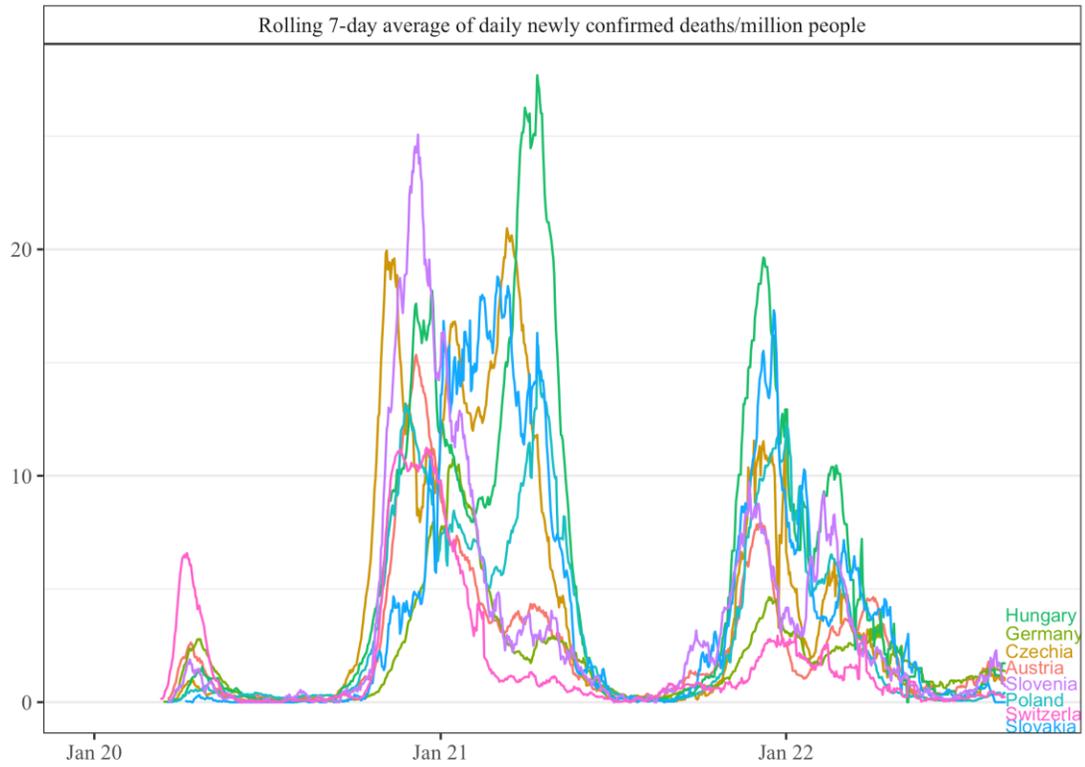
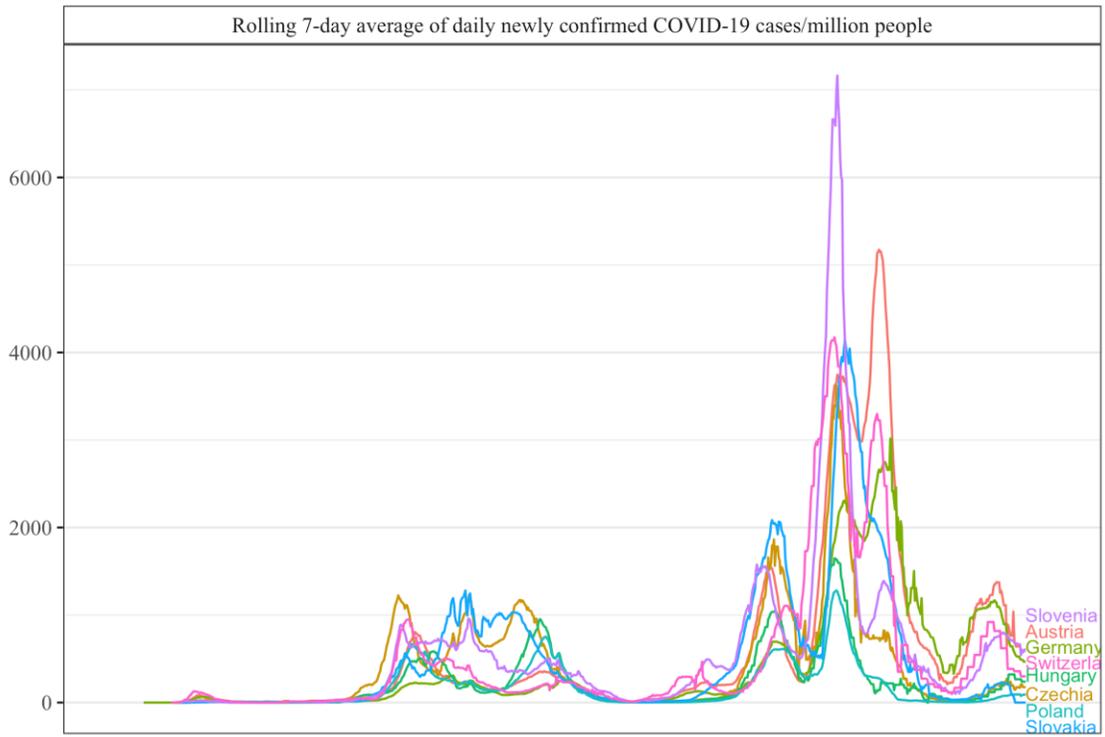
Mediterranean region



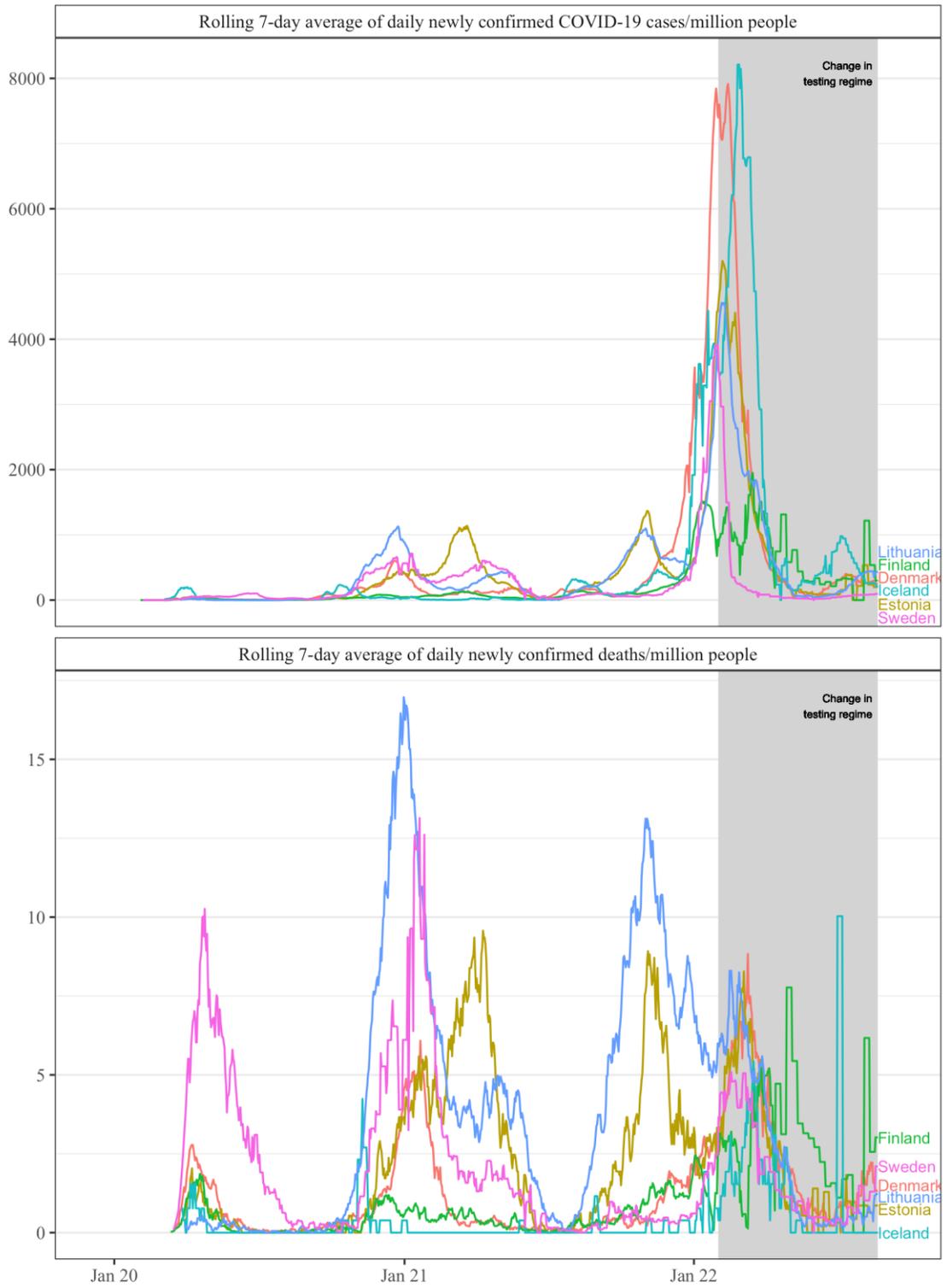
South-East region



Central Europe



Baltics and Nordic Countries



North-Western Europe

