





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 latest WHO weekly epidemiological update highlighted that despite global reductions in COVID-19 cases and deaths, there were increases in weekly cases in the Americas (14%) and the African region (12%) and a very large increase in weekly deaths in the African region (84%).
- The <u>ECDC country overview report</u> highlights that transmission of COVID-19 continues to decline, which may be an artefact of reduced testing. Four countries reported increases in transmission in those aged 65 and over. The agency recommends close monitoring the disease burden in older age groups and the overall transmission.
- The ECDC has classified Omicron lineages BA.4 and BA.5 as variants of concern. As of May 8th, 37% of Portuguese cases were BA.5 infections. The observed growth advantage for BA.4 and BA.5 is likely due to their ability to evade immune protection induced by prior infection and/or vaccination, particularly if this has waned over time. In vitro studies indicate that BA.4 and BA.5 can escape immune protection induced by infection with BA.1. Unvaccinated individuals are unlikely to be protected against symptomatic infection with BA.4 or BA.5. Based on the limited data currently available, no significant increase in infection severity compared to the circulating lineages BA.1 and BA.2 is expected.
- UC Merced provides a <u>dashboard</u> overviewing global COVID-10 sewage surveillance efforts.

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 <u>recent opinion paper</u>, 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 <u>international preparedness</u> and <u>increased global production of vaccines</u>.

ASPHER supports the <u>VACCINE-plus approach</u> to pandemic control; or what we have called <u>'COVID-DO_IT_ALL'</u>. We recognize the importance of following <u>non-pharmacological interventions</u> 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 test, case, and hospitalization rates in the countries of the WHO-Europe region (Source: Our World in Data).

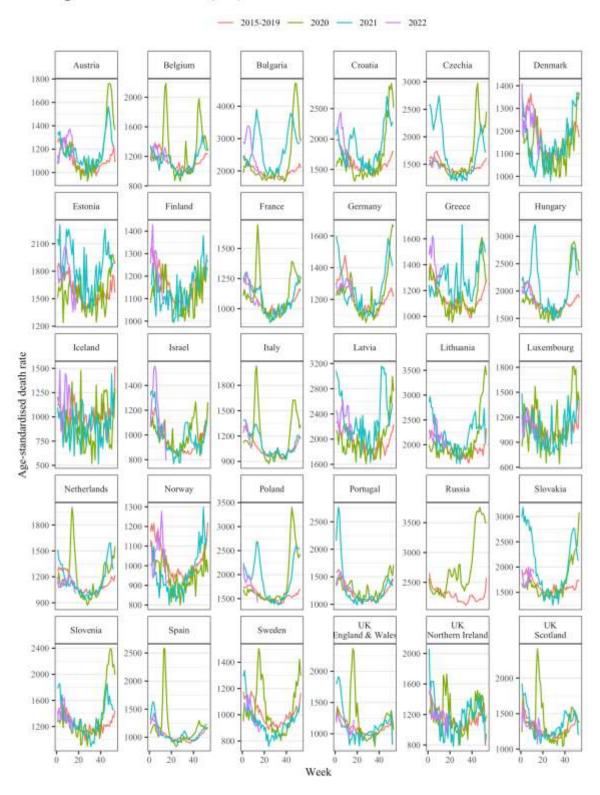
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/million	30-day trend in weekly nhospital admissions
Portugal	4.69	الس	2,019.78	المد	-	-
Andorra	1.18	had	810.74	بلسه		
Luxembourg	2.16	MM	680.06	السد	14.18	$\mathbb{M}_{\mathbb{L}}$
Germany	1.82	البهر	658.22		38.42	MM
Italy	4.17	المه	577.26	الس	66.11	M
Austria	19.82	_hM\	468.14			
France	2.88	Mul	449.59	السد	72.59	LM/M
Finland	1.34	<i>\\</i> \\\	437.02			
Greece	8.00		425.32		86.06	ΜM
Cyprus	75.00	_,	386.16		33.48	JAM.
Ireland	1.08	بالسلمد	375.23	بلد	70.11	M
Spain	1.38	huh	367.79	الس	142.99	M_{NL}

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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/millio	30-day trend in weekly nhospital admissions
Belgium	1.61	بالسر	307.53	بليد	61.30	Uhm
Iceland	2.09	Merce	306.02		200.66	كمليا
Slovenia	2.74		246.51		46.94	MM
Israel	4.82	Jul.	230.55		20.02	m
Malta	2.56	mnh	177.43	المس	69.75	J. W.
Switzerland	1.18	المسر	176.73	المد	10.44	MM
United Kingdom	3.56	Jul .	130.14	السد	84.61	W.J.
Croatia	0.84	MM	128.06	Jul.	88.20	M
Estonia	1.54	~~MAN	121.17	الب	98.49	\mathcal{M}
Denmark	1.14	M	114.15		43.87	J.J
Hungary	0.45	MA	100.06			
Slovakia	0.92		72.22	$\mathbb{A}_{\mathcal{A}_{-}}$		
Netherlands	0.11	Muni	71.16		18.46	MM
Serbia	1.13	my	65.01	_w/		
Lithuania	0.57	MAN	56.30			
Bulgaria	0.84	الكبيد	43.54	_w/		
Czechia	0.63	M	37.52	<u> </u>	17.90	$\mathbb{A}^{\mathbb{A}}$
North Macedonia	0.51	MINN	36.29	MM		
Russia	0.86	hur	30.63	ha	99.46	
Romania	3.96	M	27.63	Lul.		-

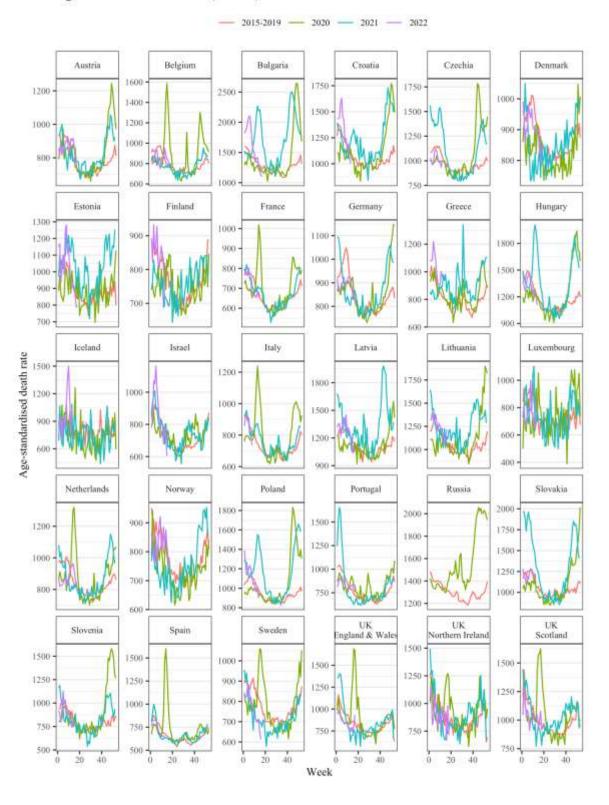
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/millio	30-day trend in weekly nhospital admissions
Sweden	0.29	M	25.36	_n_		
Turkey	1.53	أنملهم	17.48	ML		
Albania	0.08	M	13.53	\mathcal{M}		
Poland	0.23	$M_{n_{n}}$	10.26	ML		
Bosnia and Herzegovina	1.07	M_{N}	9.67	JMM.		
Kosovo	0.33	M	7.62	للند		
Armenia	0.48	Mynn	1.01	M		
Azerbaijan	0.16	M	0.59	LUN		
Kazakhstan	2.10	MAN	0.58	Jhu.		
Belarus	0.75	MAN	0.00			
Georgia	0.88	إالهم	0.00	_~~		
Moldova	3.17	كالمهر	0.00	M		
Ukraine	1.21	W	0.00			

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)

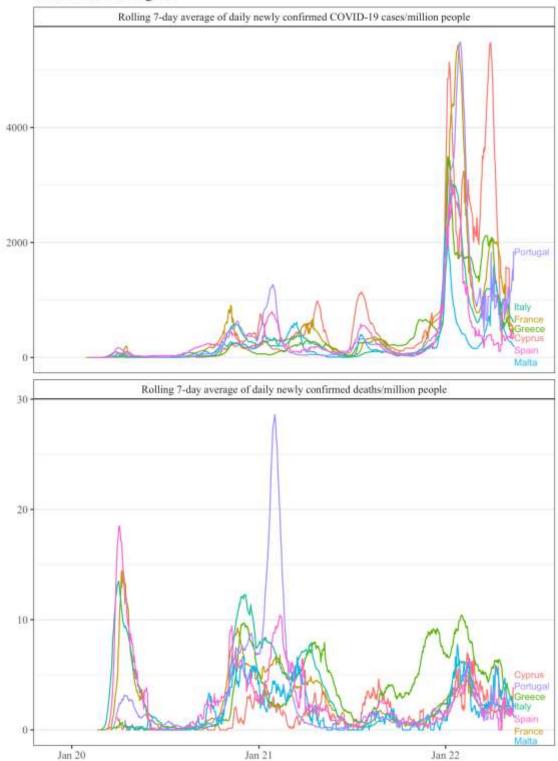


Age-standardised death rate (women)

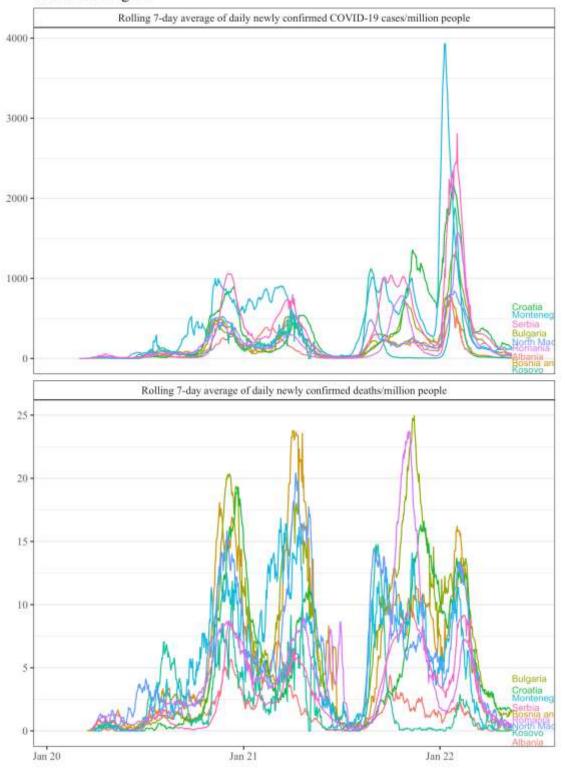


Rolling 7-day average of daily new confirmed COVID-19 cases and daily new confirmed COVID-19 deaths in sub-regions of Europe (Source: Our World in Data).

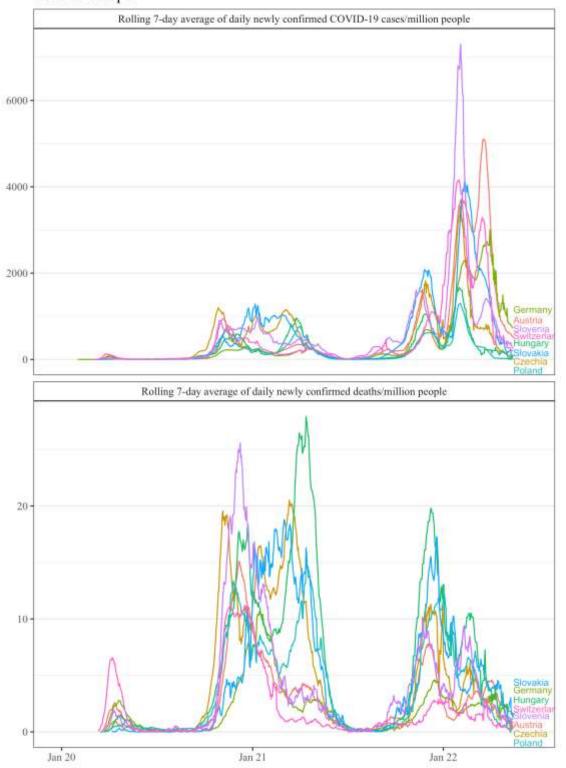
Mediterranean region



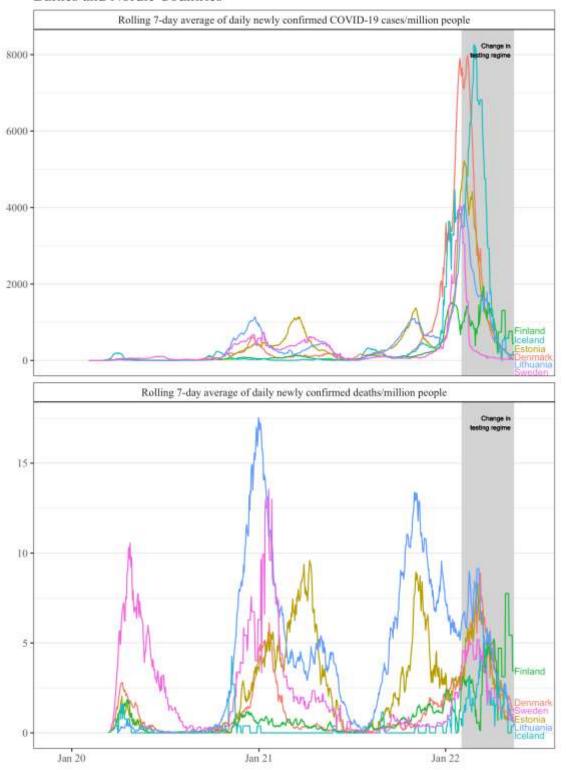
South-East region



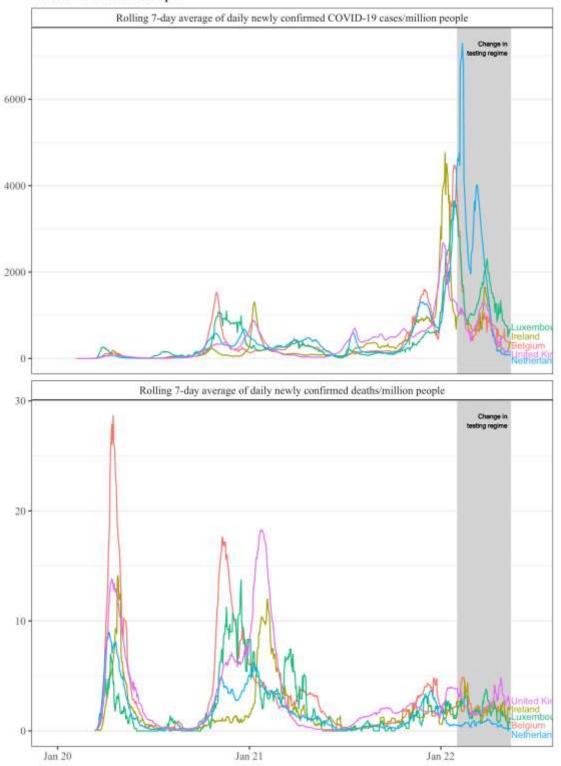
Central Europe



Baltics and Nordic Countries



North-Western Europe



Central Asia

