





# ASPHER Report: COVID-19 Situation Reporting across Europe

# Week of June 13th, 2022

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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 new weekly cases and confirmed deaths have continued the declining trend globally. At the regional level, the numbers of new weekly cases increased in the Eastern Mediterranean Region (+19%) and South-East Asia Region (+1%), while they decreased in the other four WHO regions. The number of new weekly deaths increased in the Western Pacific Region (+7%), while decreasing trends were observed in the other five regions.
- The ECDC country overview report highlights that seven reported an increasing trend in hospital or ICU admissions/occupancy compared with the previous week. Increasing trends in the COVID-19 death rate were observed in three countries Estonia (two weeks), Ireland (one week) and Portugal (one week). In Portugal, BA.5 has become the dominant SARS-CoV-2 variant and the increasing proportions of BA.5 have been accompanied by a surge in COVID-19 cases. The growth advantage reported for BA.4 and BA.5 suggest that these variants will become dominant throughout the EU/EEA, probably resulting in an increase in COVID-19 cases in coming weeks.
- The <a href="IHME COVID-19">IHME COVID-19</a> modelling briefing for the <a href="EU">EU</a> concludes that transmission should continue to decline until late August or early September and then begin to increase again in some countries. The highlight though that the BA.5 surge in Portugal is substantial and could possibly spread more widely in the EU, leading some countries to have a third Omicron wave. Second, the IHME do not model in the reference scenario the emergence of a new variant with immune escape, which could emerge at any time.

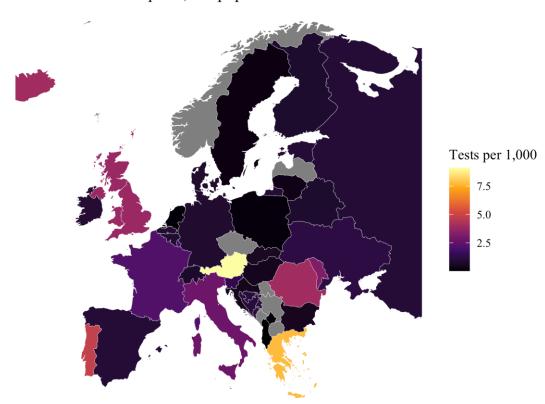
ASPHER is concerned about talk of the 'end of the pandemic'. *Pandemic* is not defined by politicians, or by journalists. The *pandemic* is defined by the World Health Organisation, under strict decision-making process and not as mere opinion. A pandemic is "an epidemic occurring worldwide, or over a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

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





Rolling average of latest COVID-19 test, case, and hospitalization rates in the countries of the WHO-Europe region ( $\underline{Source: Our\ World\ in\ Data}$ ).

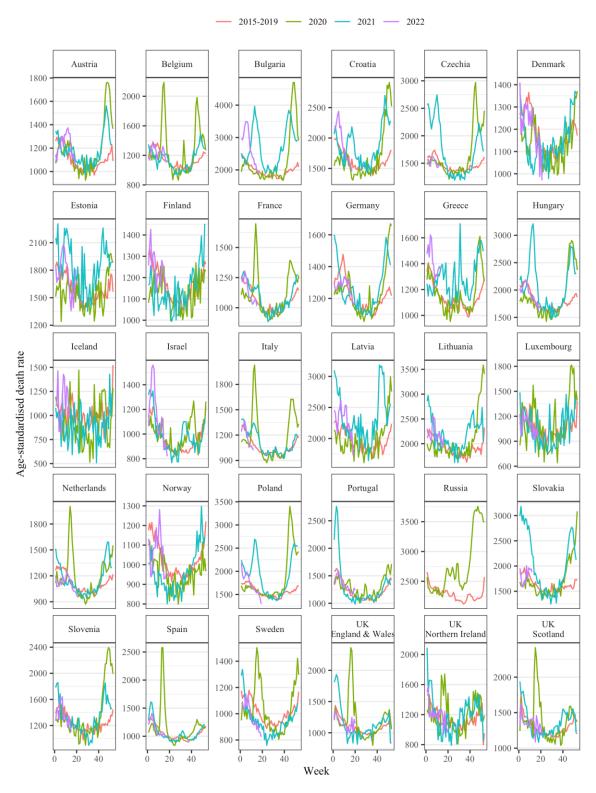
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/millio	30-day trend in weekly nhospital admissions
Portugal	4.80	لمسر	1,960.11	4.	-	-
Luxembourg	1.92	MM	759.28		3.15	Mux
Germany	0.84	MM	722.65		42.65	$\mathcal{M}$
Andorra	1.18	h	609.44	m		
Israel	2.05	_wh	593.58		42.73	M
France	2.15	Mul	573.32		53.35	\mu\h
Iceland	3.98	men	512.87		200.66	
Greece	7.73		410.92		56.19	MΜ
Austria	9.10	Jul	381.63			
Italy	2.75	M	380.41		30.66	M/A
Cyprus	75.00		351.88		20.09	,/// <u>//</u> /
Malta	2.13	mrh	311.40		27.13	Mul
Switzerland	0.74	الهسر	272.32		10.21	Uhr
Finland	0.75	<b>₩₩</b>	241.05			
Spain	0.97	MM	240.17	la	113.53	1
Belgium	0.87	Mund	229.48		36.54	Uhm
Denmark	0.80	$\mathcal{M}_{\mathcal{L}}$	155.14		41.28	
United Kingdom	3.80	JMM	154.97	السد	53.13	$\mathcal{M}_{m}$
Slovenia	1.38		144.94		15.65	$\mathcal{M}$

WHO Europe region	Daily new tests/thousance 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
Ireland	0.90	Marel L	130.42	٠٠,	59.33	Myh
Netherlands	0.12	MM	128.87		16.60	₩Ņ
Estonia	0.98	~~M	90.44		52.63	$\mathcal{M}$
Croatia	0.42	m	63.00	_M_	35.18	MM
Lithuania	0.34	~~M	53.69			
Serbia	0.92	mm	37.03	_M_		
Slovakia	0.55		36.02			
Czechia	0.37	M	27.96		7.55	$\mathcal{M}_{\mathcal{M}}$
Hungary	0.45	$M_{\sim}$	24.41			
Russia	0.96	ma	23.04	ha	55.65	
North Macedonia	0.46	MINN	22.50	_MM		
Sweden	0.23	$\mathcal{M}$	21.99	_nl		
Bulgaria	0.47	www.	20.67	_MM_		
Albania	0.03	$\mathcal{M}$	17.55	_MM_		
Romania	3.96	MARY	16.07			
Turkey	1.58	JNN	12.69	_M_		
Moldova	3.17	للمهر	8.27	M		
Poland	0.15	$M_{n_{n}}$	5.32			
Kosovo	0.16	$\mathcal{M}$	4.25	للس		
Bosnia and Herzegovina	1.07	MM.	3.94	Ju Mu		

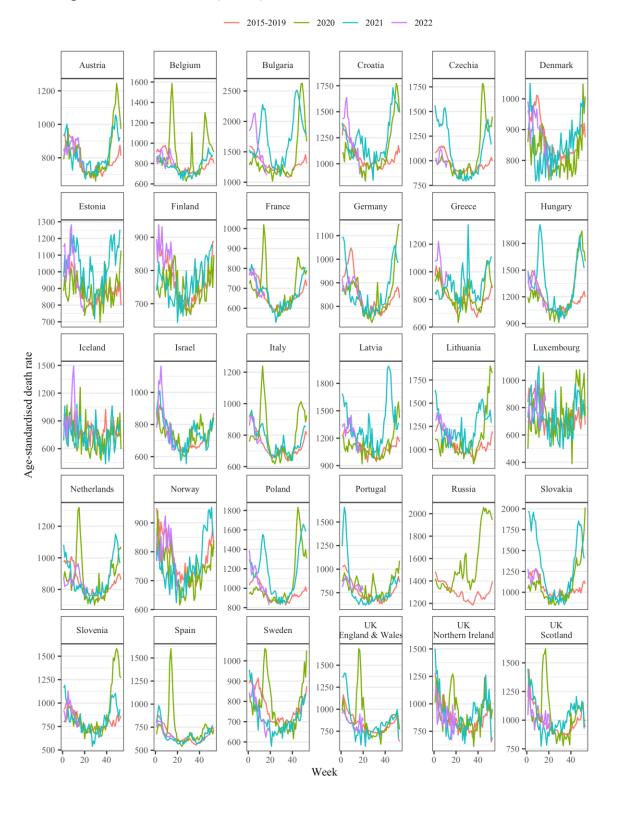
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/millio	30-day trend in weekly nhospital admissions
Armenia	0.49	my	1.83	M		
Kazakhstan	2.10	/I/MA	0.53	July 1		
Azerbaijan	0.24	M	0.00	ML		
Belarus	0.75	$\mathcal{M}$	0.00			
Georgia	0.88	, pr 1/14	0.00			
Ukraine	1.21	M	0.00	M		

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)

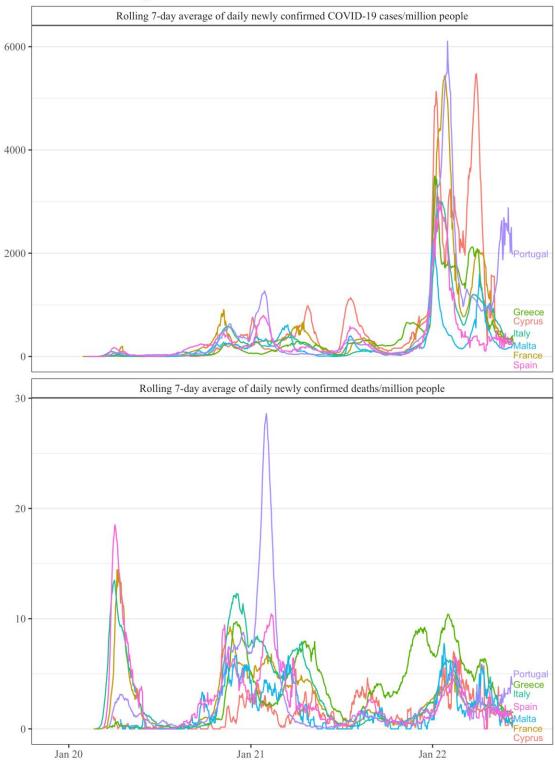


#### Age-standardised death rate (women)

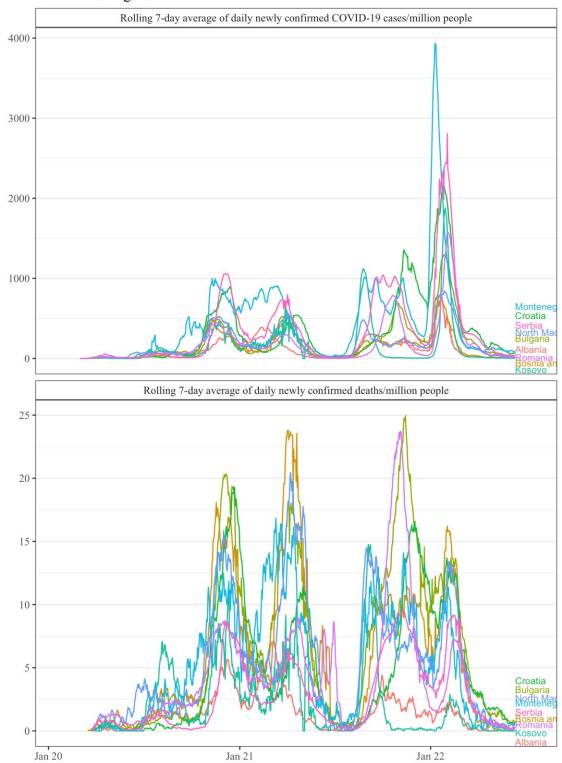


Rolling 7-day average of daily new confirmed COVID-19 cases and daily new confirmed COVID-19 deaths in sub-regions of Europe (Source: Our World in Data).

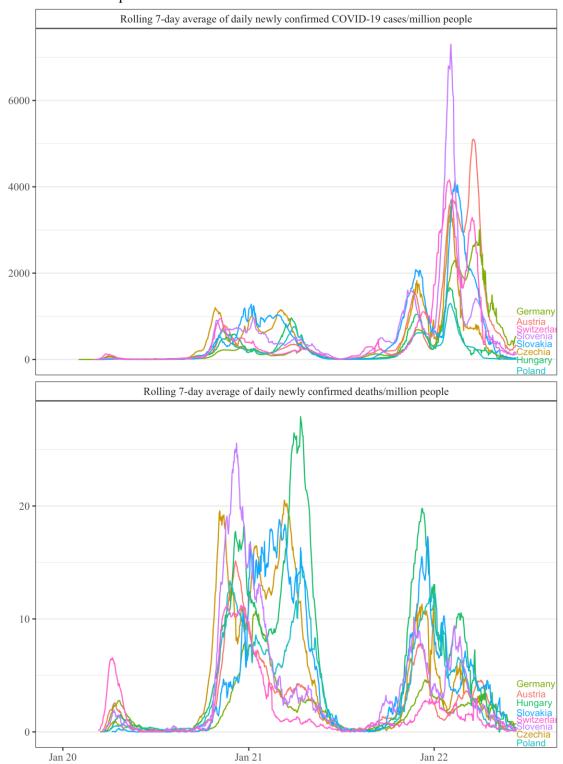
### Mediterranean region



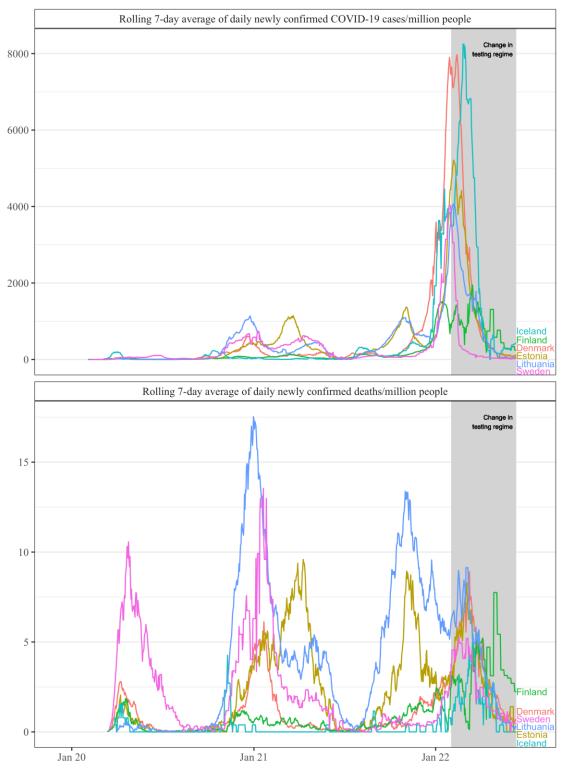
# South-East region



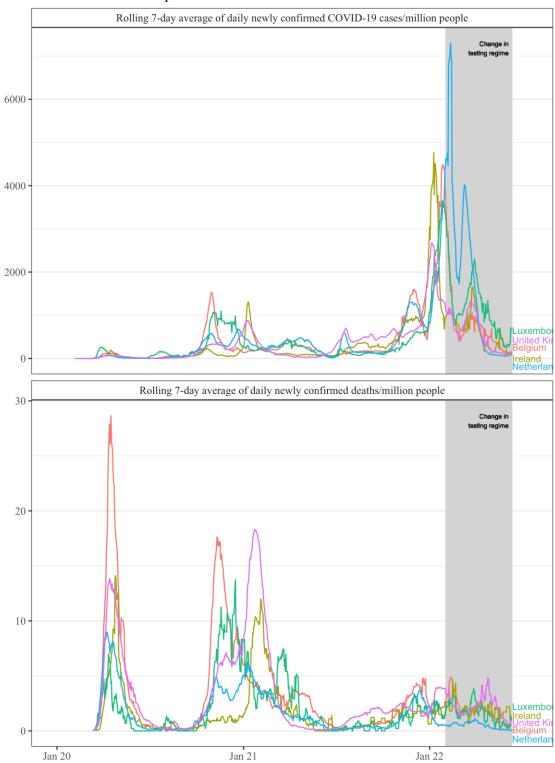
## Central Europe



### **Baltics and Nordic Countries**



## North-Western Europe



## Central Asia

