





# ASPHER Report: COVID-19 Situation Reporting across Europe

## Week of September 12th, 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 WHO weekly epidemiological update on COVID-19 highlights that the global number of weekly cases and deaths continues to decline rapidly.
- The <u>ECDC country overview report</u> also highlights a decreasing trend in cases, falling by 13% compared to the previous week, reaching 9% of the pandemic maximum. A similar decreasing trend was observed for case rates among people aged 65 years and above, reaching 26% of the pandemic maximum. Four countries reported increasing trends in hospital or ICU admissions/occupancy rates.

#### **Selected recent COVID-19 publications**

Puntmann, V. O., Martin, S., Shchendrygina, A., Hoffmann, J., Ka, M. M., Giokoglu, E., Vanchin, B., Holm, N., Karyou, A., Laux, G. S., Arendt, C., De Leuw, P., Zacharowski, K., Khodamoradi, Y., Vehreschild, M. J. G. T., Rohde, G., Zeiher, A. M., Vogl, T. J., Schwenke, C., & Nagel, E. (2022). Long-term cardiac pathology in individuals with mild initial COVID-19 illness. In Nature Medicine. Springer Science and Business Media LLC. https://doi.org/10.1038/s41591-022-02000-0

 Persistent cardiac symptoms in previously well, home-isolated individuals after a bout of mild COVID-19 may, at least in part, relate to mild chronic inflammatory cardiac involvement.

Letourneau, N., Luis, M. A., Kurbatfinski, S., Ferrara, H. J., Pohl, C., Marabotti, F., & Hayden, K. A. (2022). COVID-19 and family violence: A rapid review of literature published up to 1 year after the pandemic declaration. In eClinicalMedicine (Vol. 53, p. 101634). Elsevier BV. https://doi.org/10.1016/j.eclinm.2022.101634

 Restrictions aimed to limit the spread of COVID-19 may have increased the risk factors and incidence of family violence in communities.

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

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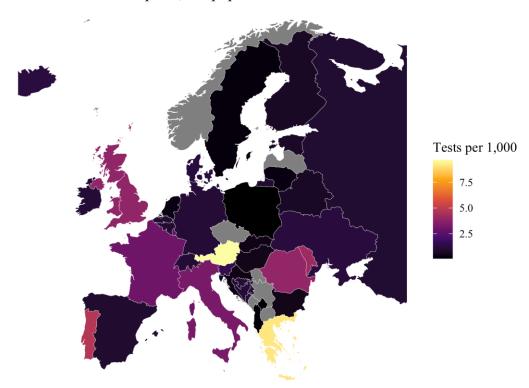
and not as mere opinion. A pandemic is "an epidemic occurring worldwide, or over a very wide area, crossing international boundaries and usually affecting a large number of people". We are still in the midst of the pandemic.

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 ( $\underline{Source: Our\ World\ in\ Data}$ ).

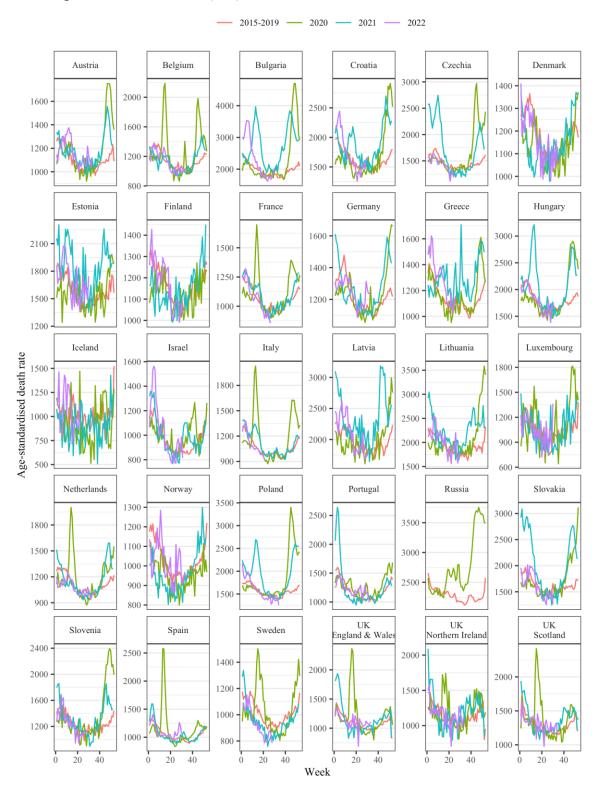
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/millio	30-day trend in weekly nhospital admissions
Georgia	0.93	pr//	1,008.29			-
Slovenia	1.50		774.34		47.89	$\mathcal{M}$
Greece	9.12	$\mathcal{A}$	576.54		92.05	MM
Austria	9.66	JM	465.23			
Serbia	0.92	m	445.94	\		
Germany	1.06	M	359.06	^	37.66	$\mathcal{M}_{\mathcal{M}}$
Luxembourg	2.55	JMW <sub>W</sub>	348.14		1.57	Mr
Russia	0.96	MARY	332.23	June	165.34	
Cyprus	75.00		297.99		25.67	_MW_
Lithuania	0.27	MM	297.49			
France	2.99	, Mu	268.10	/11	37.30	JMM.
Italy	3.26	$\lambda$	264.22		32.80	<u>M</u>
Switzerland	1.05	Mu.	238.68		12.89	Uwh
Portugal	4.74	لسه	217.31			
Moldova	4.17	and .	189.36	m		
Belgium	0.98	, July	183.12	-J. M.	34.53	Um.
Czechia	0.35	$M_{\nu}$	179.72		65.46	$M_{\Lambda}$
Belarus	0.74	$M_{\rm m}$	166.60	~~\r		
Andorra	1.15	h	155.45			

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
Hungary	0.45	$\mathbb{M}_{\mathbb{A}}$	151.54	_///		
Croatia	0.38	m	141.94	_M_	127.84	M
Denmark	1.23	$\mathcal{M}$	132.94		52.61	
Armenia	0.53	M	131.80	$\mathcal{M}$		
Finland	0.72	<b>/**</b>	118.68			
Iceland	1.24	Musik	112.64		24.40	
Israel	2.82	_w	100.77		19.59	MM
Romania	3.92	MA	99.10	_M		
Poland	0.09	M	94.48			
Turkey	1.59		92.06			
Estonia	0.75	M	85.80		53.38	$\mathcal{M}$
Bulgaria	0.45	mll.	71.93	_M_		
United Kingdom	3.85	MM	69.49	بالريد	63.70	Mm./\
Ukraine	1.21	M	67.88			
Netherlands	0.28	Mul	67.87		20.17	MM
Sweden	0.23	M	60.00			
Ireland	1.04	Marker C	59.53	- J	54.53	Mull
Spain	0.92	July	47.01		41.91	Mulu
North Macedonia	0.38	Mund	43.13			•
Albania	0.13	M	41.63	MM		

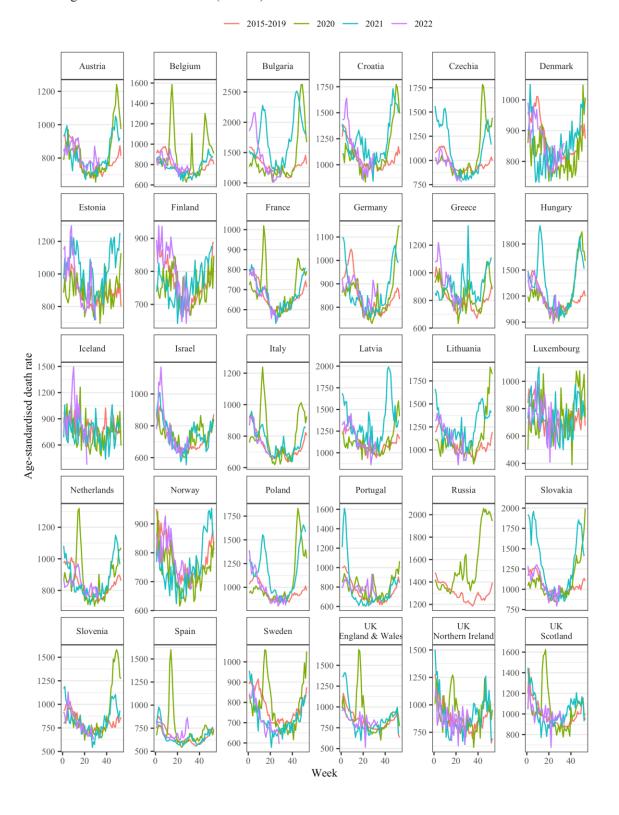
WHO Europe region	Daily new tests/thousand people	30-day trend in tests	Daily newly confirmed COVID-19 cases/million people	30-day trend in cases	Weekly hospital admissions/millio	30-day trend in weekly nhospital admissions
Slovakia	0.39		38.89			1.
Malta	2.73	mrh	35.80	الليب	23.25	Mull
Bosnia and Herzegovina	1.07	MM	33.72	JMM.		
Azerbaijan	0.23	M	33.45			
Kosovo	0.12	$\mathcal{M}$	14.59	سللم		
Kazakhstan	2.08	MM	11.72	ıllı		

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)

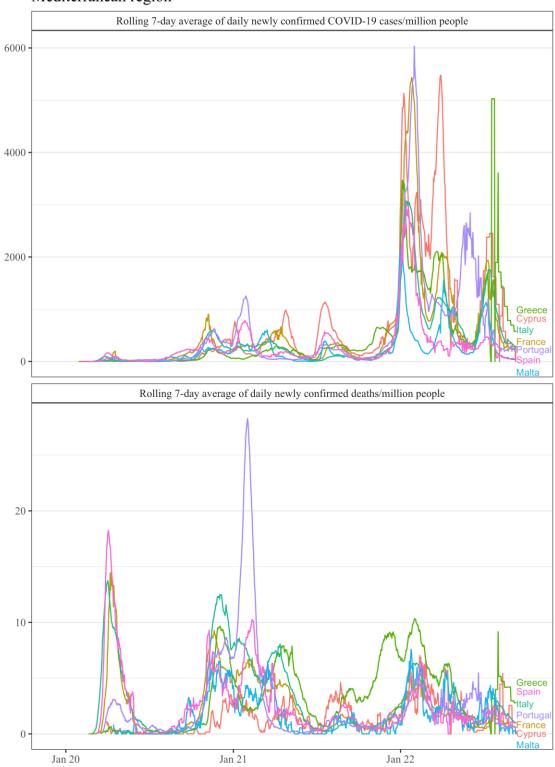


#### Age-standardised death rate (women)

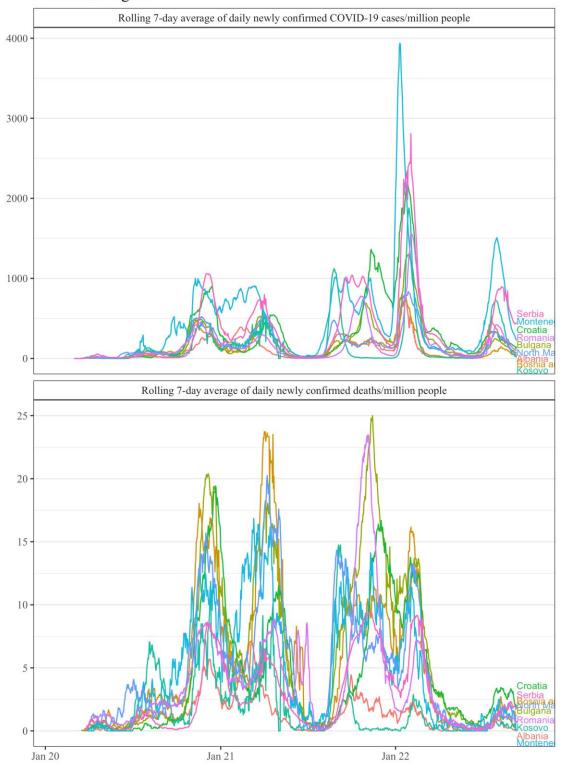


Rolling 7-day average of daily new confirmed COVID-19 cases and daily new confirmed COVID-19 deaths in sub-regions of Europe (Source: Our World in Data).

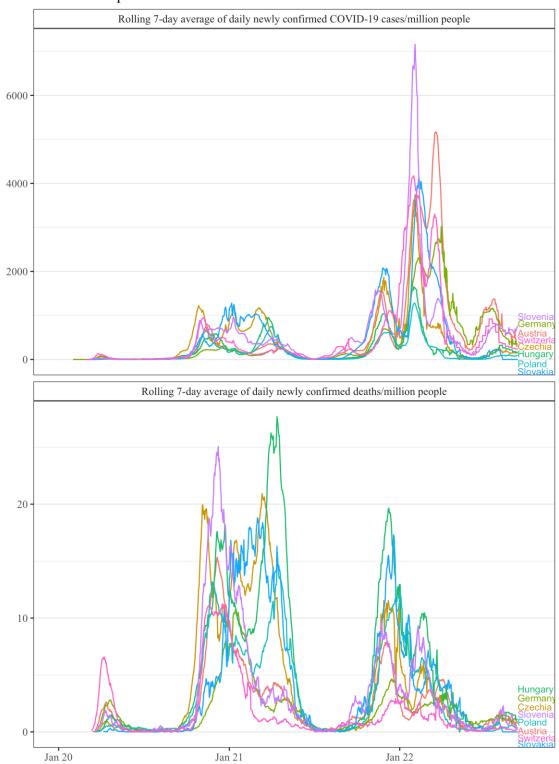
### Mediterranean region



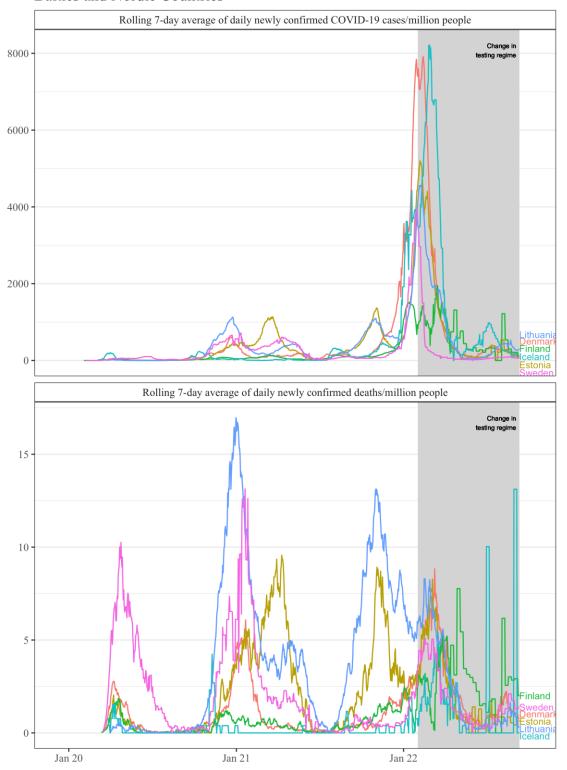
# South-East region



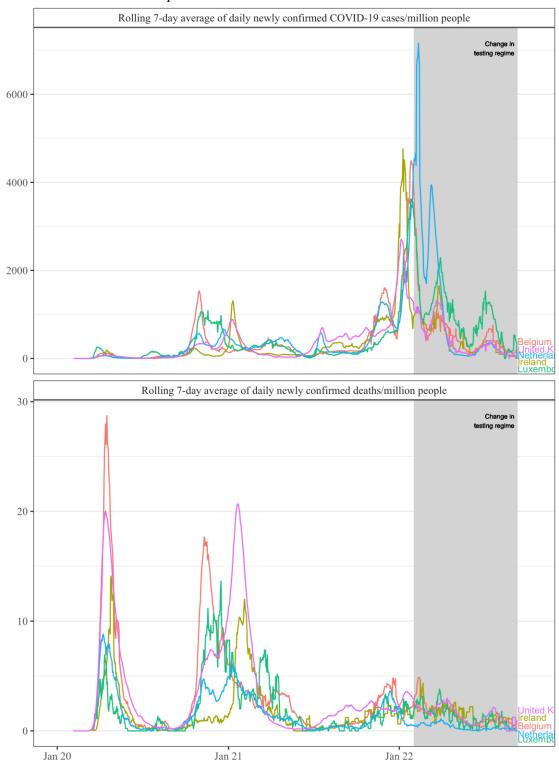
## Central Europe



### **Baltics and Nordic Countries**



## North-Western Europe



### Central Asia

