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COVID-19: Situation, Response, Lessons Learned (Series#2)

Afghanistan | Bhutan | Guatemala | Italy

Date: August 28, 2020 | Time 1:30PM GMT | 7:15PM NTP | 3:30PM CET | 6:30AM PST



Dr Ziaulhaq Mansoor Ahrari

Herat Institute of Health Sciences

Afghanistan



Dr. Karma Tenzin

Faculty of Postgraduate Medicine, KGUMSB

Bhutan



Dr. Jose Ortiz

University San Carlos of Guatemala

Guatemala



Francesco Nicoli

University of Ferrara

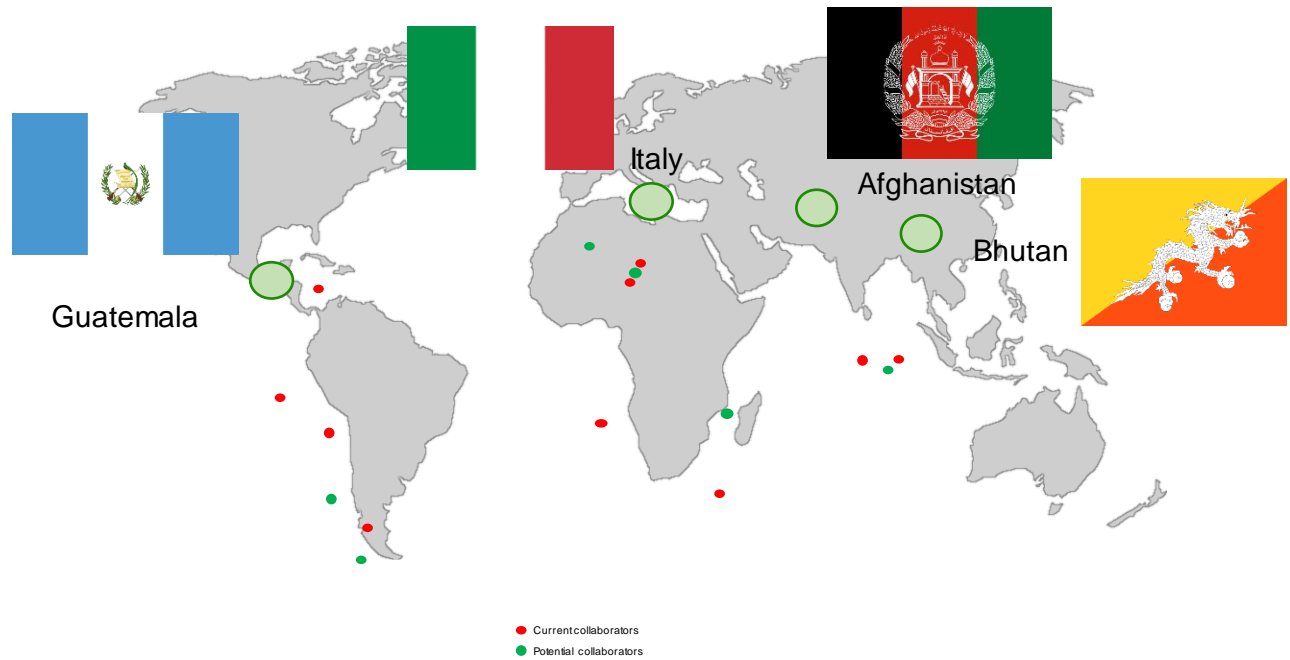
Italy

One Health Knowledge Café





- A collaborative effort of more than 11 individuals representing CIH partners and alumni
- Represents Asia, Africa, Europe, South America and North America
- Brings together the expertise and network of researchers and professionals from various disciplines, countries and expertise to enable cross learning, sharing and network building
- Monthly talks, webinars, online courses, discussions
- Supported by LMU^{CIH} through DAAD/Exceed Program, funded by BMZ



Today's presentation



Countries and Speakers

Country	Country info	Speaker info
Afghanistan 	Central and South Asia 32.9 Million Literacy adult 43% GDP per capita \$ 1,337 0.3 physician per 1,000 population	Dr Ziaulhaq Mansoor Ahrari is a program coordinator at Herat Institute of Health Sciences. He graduated in medicine and has specialty in dermatology. He has worked in different departments such as; Institute of Health Sciences (IHS), Environmental Health , Communicable Diseases Control and Emergency Preparedness and Response
Bhutan 	South Asia 957.4 Thousand Literacy adult 67% GDP per capita \$ 7,938 0.4 physician per 1,000 population	Dr Karma Tenzin is a Assistant Professor and Deputy Dean at Faculty of Postgraduate Medicine, KGUMSB. He is one of the pioneer medical and health educationists in Bhutan. Within a short career, he has established himself as the steadfast academician and researchers
Guatemala 	North America 16.9 Million Literacy adult 81% GDP per capita \$ 7,243 0.4 physician per 1,000 population	Jose Ortiz Dr. Msc is an Administrator of the SARS CoV 2/ COVID-19 Observatory at Guatemala. He is a Physician and Surgeon, Gynecologist and Obstetrician at University San Carlos of Guatemala-USAC. He is also an Epidemiologist at National Institute of Public Health of Mexico.
Italy 	Europe 60.6 million Literacy adult 99% GDP per capita \$ 35,078 4 physicians per 1000 population	Dr. Franceso Nicoli holds a master degree in medicinal Chemistry and a PhD in Medical Research-International Health, with 12-year experience in the field of immunology of infectious diseases.

Objectives

- To share current situation of COVID-19, country response and lessons learned across selected countries
- To review and discuss key lessons learned for the global health community
- To establish a better network to promote learning and collaboration among CIH partners, alumni and beyond



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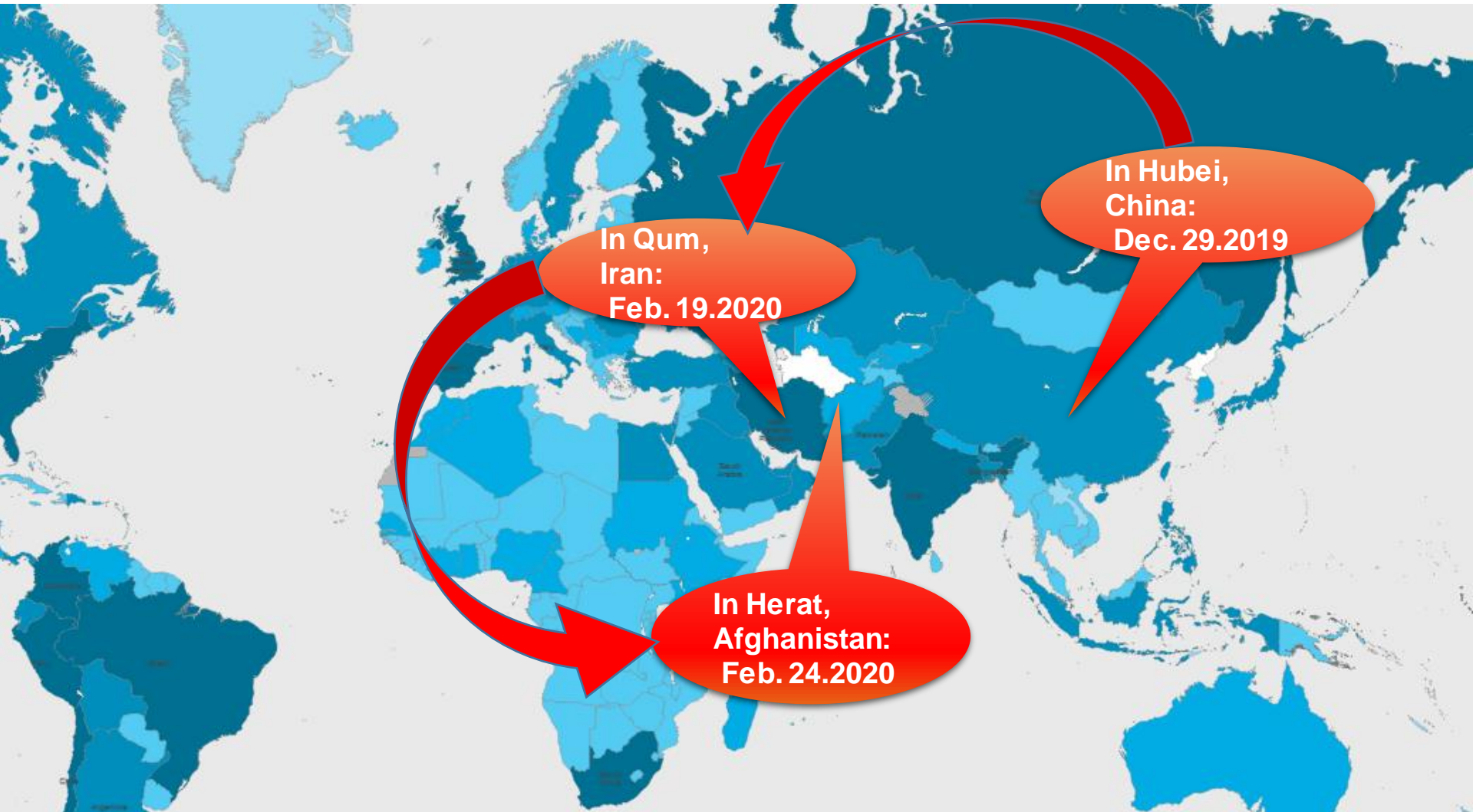
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COVID-19: Situation, Response, Lessons Learned in Herat, Afghanistan

Ziaulhaq Mansoor Ahrari, MD
Institute of Health Sciences, Herat,
Afghanistan

COVID-19 situation: The first confirmed cases



<https://www.thinkglobalhealth.org/article/updated-timeline-coronavirus>

<https://ourworldindata.org/country/afghanistan>

COVID-19 situation...

A comparison among four countries, Aug. 23

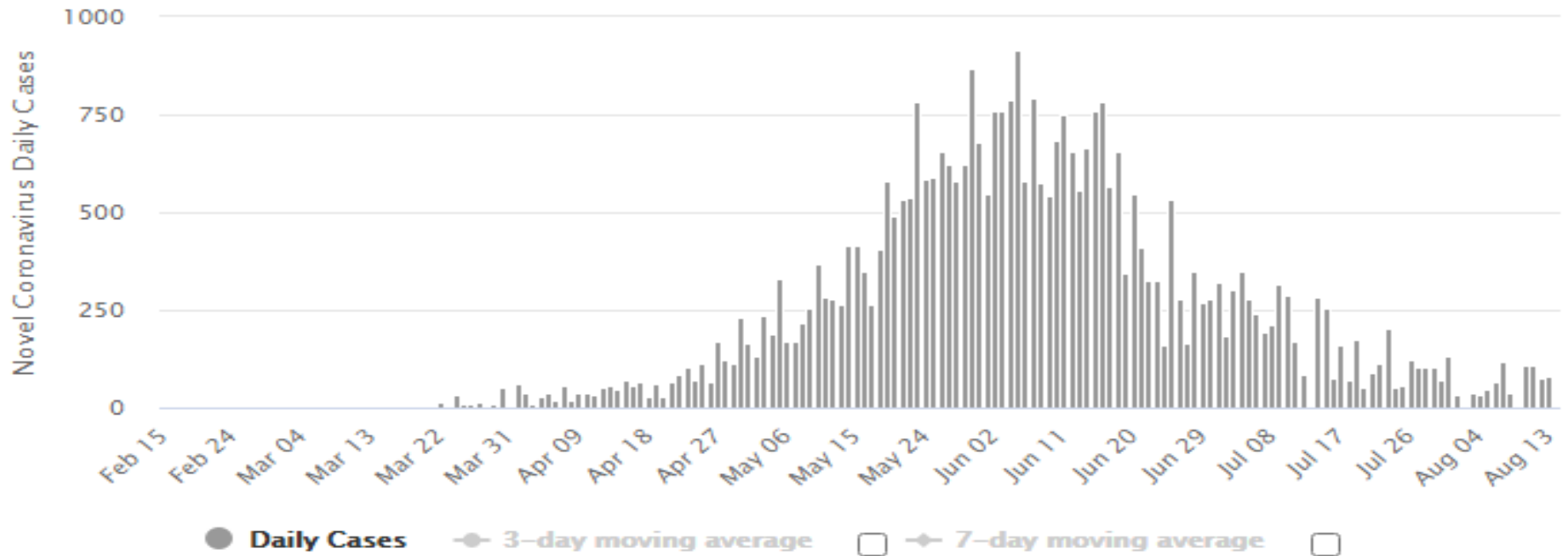
Country	Total Cases	Recovered	Deaths	Deaths /1M pop	Tests /1M pop
Afghanistan	37,953	28,016	1,385	35	2,578
Iran	356,792	307,702	20,502	244	35,787
Pakistan	292,174	275,317	6,231	28	10,903
Italy	258,136	205,203	35,430	586	131,355

COVID-19 situation...

Daily New Cases in Afghanistan

Daily New Cases

Cases per Day
Data as of 0:00 GMT+0



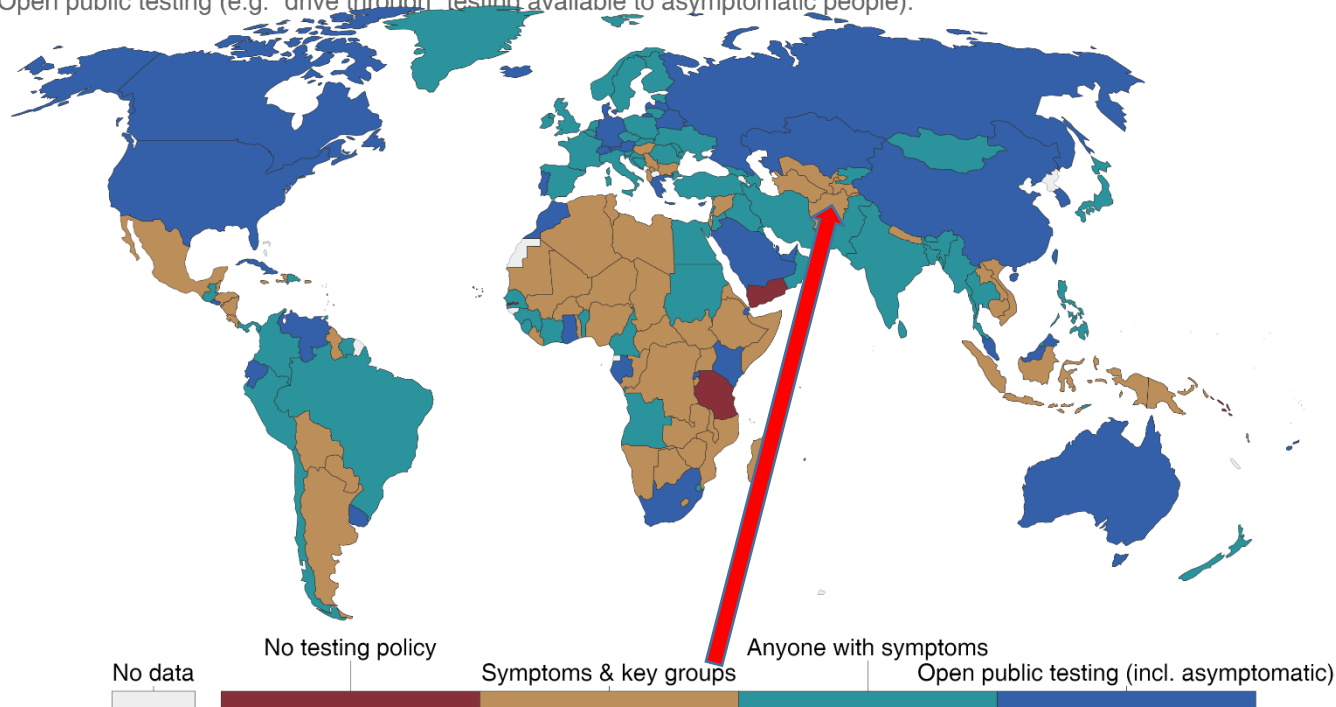
COVID-19 situation...

Testing policy

COVID-19 Testing Policies, Aug 20, 2020

Our World
in Data

- No testing policy.
- Only those who both (a) have symptoms and also (b) meet specific criteria (e.g. key workers, admitted to hospital, came into contact with a known case, returned from overseas).
- Testing of anyone showing COVID-19 symptoms.
- Open public testing (e.g. "drive through" testing available to asymptomatic people).

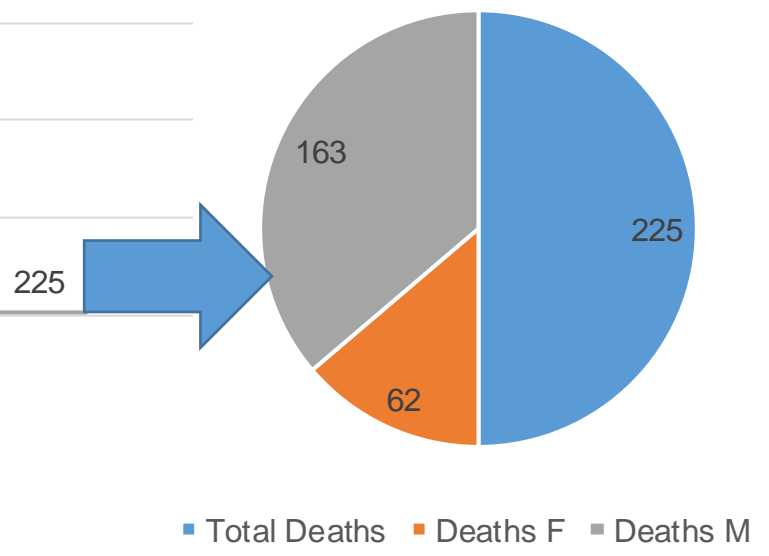
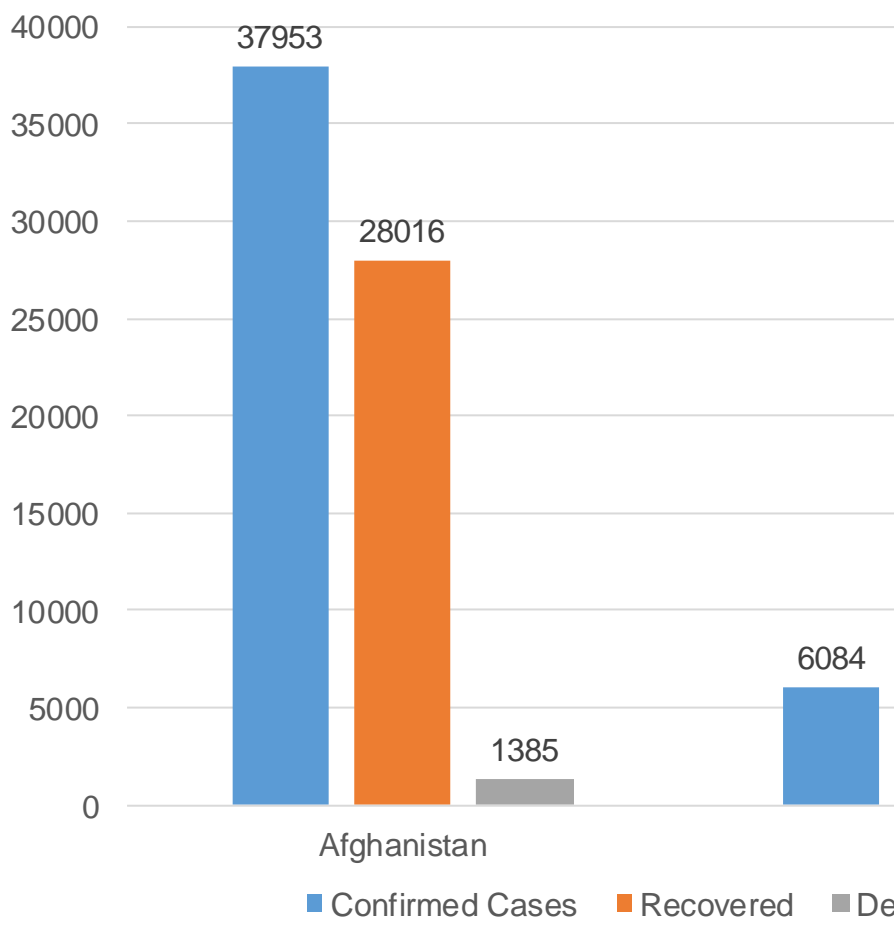


Source: Hale, Webster, Petherick, Phillips, and Kira (2020). Oxford COVID-19 Government Response Tracker – Last updated 20 August, 03:30 (London time)

OurWorldInData.org/coronavirus • CC BY

<https://ourworldindata.org/coronavirus-testing>

COVID-19 situation... Total Confirmed Cases in Afghanistan vs. Herat Province



Key interventions/responses

- In Preparedness level
 - **Emergency committee** (in top level)
 - **EPR Committee** (in Public Health System)
 - Provincial **Center for management** of Covid-19
 - Budget allocation
- In Response level
 - Detecting **the first case** in our province (Herat)
 - **Training**
 - **Hospitals** for suspected and confirmed cases
 - Establishing **Case finding, Contact Tracing, Case Management, Disinfection** and **Screening Teams**
 - Revising the **Testing Protocol**
 - **Call Center**
 - **Quarantine** (social distancing and mobility restriction)
 - **Burying corpses** in caskets with respect to the traditions
 - Most of collective **religious events** and ceremonies were canceled

Key interventions/responses...



First Covid-19 Hospital

Health Education



115



مرکز مدیریت مبارزه با ویروس کرونا (کویید-19) ولایت هرات



این مرکز به شمول روزجمعه، در تمامی روزهای هفته بطور ۲۴ ساعته فعالیت می نماید.
 ایت معلومات، نیت و رسیدگی به شکایات در مورد ویرا ویروس به این شماره در تماس شود.

Testing lab

Border screening

اقدامات پیشگیرانه = تامین سلامتی



تغذیه سالم

رعایت فاصله اجتماعی

شستن دستها

استفاده از ماسک

Call Center in order to direct contact with the community



Lessons Learned

- **Information, Education and Communication** play a great role to prevent **Stigma and Rumors**
- **Parallel activities** should be coordinated
- **People** are really supportive if they are aware of Covid-19
- **Rumors** create problems in the system
- **Procurement** Process (should be simplified in emergency situation like Covid-19)
- **Corruption** deteriorates the health system to control Covid-19.
- **Poverty** is barrier to implement the quarantine.
- **Transparency**
- **Multi sectoral cooperation** is crucial
- **Commitment** of all stakeholders

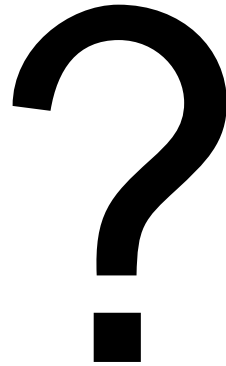
Considerations

- Lack of clear **protocols** and guidelines to manage covid-19 cases
- Early **detection**
- Lack of **expertise** and **equipment**
- **Coordination** from central level is a challenge
- The situation in **PHC level** is worse
- **Security** is a key factor for a better health care services.
- **Global Responsibility** (Covid-19 management)

Points for Q&A session

- How many cases of Covid-19 are really detected?
- How long will this situation with Covid-19 last?
- Will the vaccine bring the situation under control?

Thanks





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COVID-19: Situation, Response, Lessons Learned in Bhutan

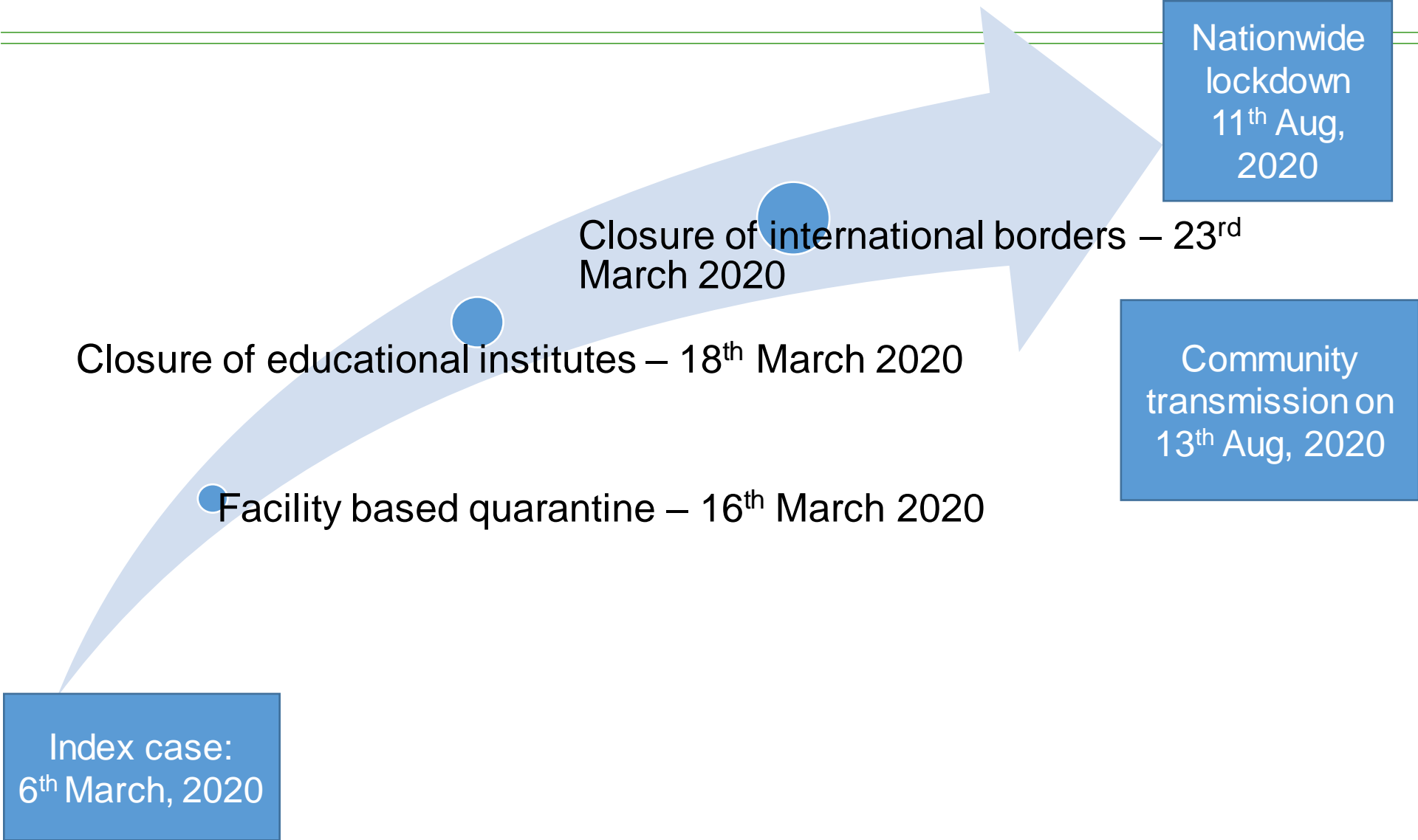
Dr. Karma Tenzin (MBBS, MD, Fellowship in Med. Education)

Assistant Professor and Dy. Dean, Academic Affairs

Head, Centre for Research in Respiratory and Neurosciences

Faculty of Postgraduate Medicine, KGUMSB, Bhutan

COVID-19 situation



COVID-19 situation



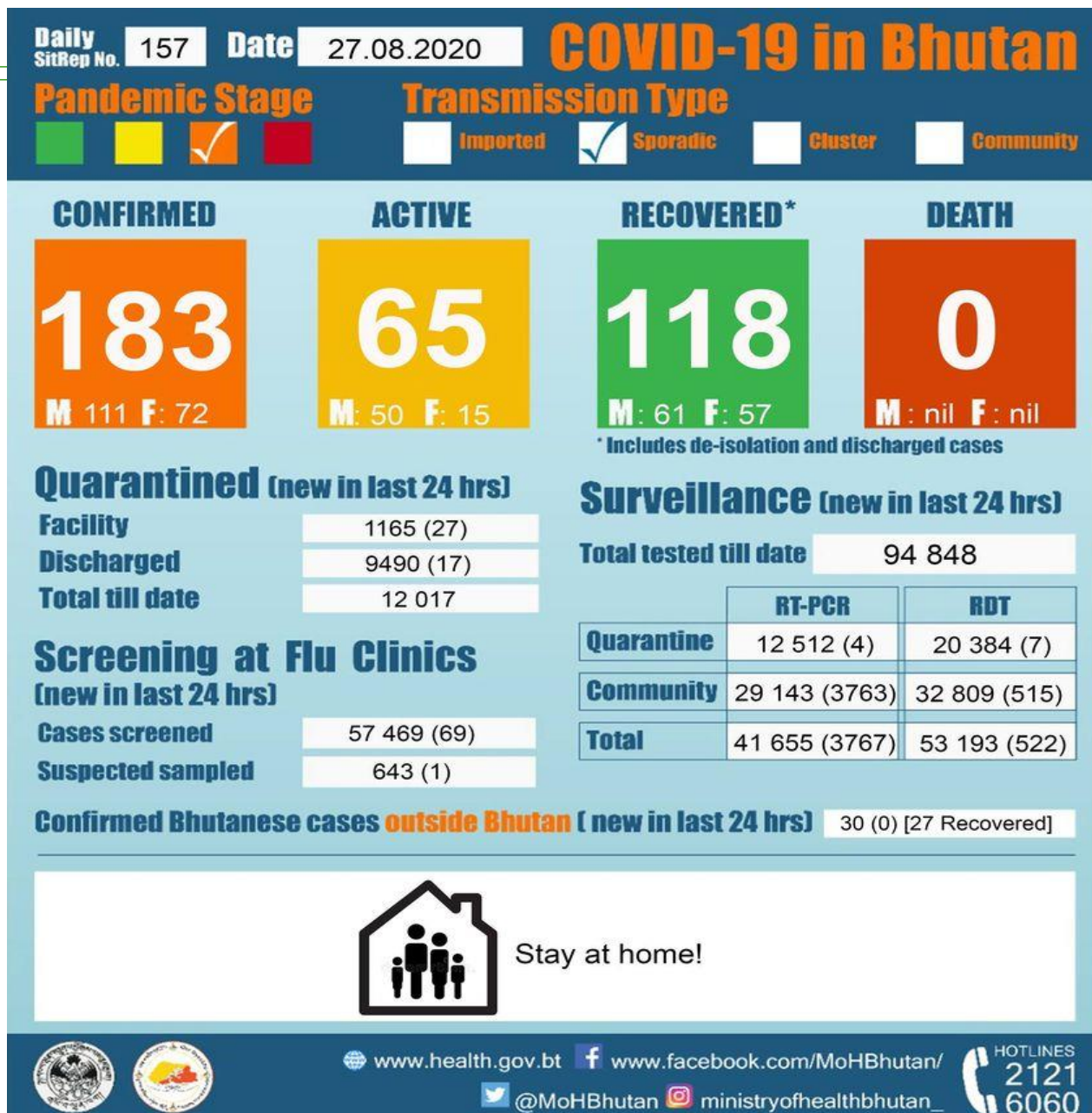
COVID-19 situation



COVID-19 situation



COVID-19 situation



Key interventions/responses

Urgent Notice

August 11, 2020

Time: 3:15am

Following report of a COVID-19 positive case in Gelephu, who has come in close contact with people in Thimphu, Gelephu and those along the way, the government announces national lockdown starting today.

No movement of people and vehicles within or beyond Dzongkhags will be allowed unless authorised.

Prime Minister will come on [BBS live at 7AM](#) to share the details. The government will share all information with the public as and when it becomes available. Please follow the updates and instructions closely.

PMO, Bhutan

Key interventions/responses



Prime Minister's Office - PMO, Bhutan
August 13 · 🌐

Phuentsholing is now declared as the red zone. The entire nation is in a lockdown but additional restrictions and surveillance will be enforced in the district starting today. Among others, all essential movements out of the district will have to undergo stringent COVID-19 screening at the Rinchenchending checkpoint first.

Lockdown update

PMO, Bhutan

Community

- Invite your friends to like
- 125,346 people like this
- 141,029 people follow this page
- Diki Wangmo and 345 others have checked in

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Key interventions/responses

Announcement

For Thimphu residents with travel history from Phuntsholing on or after 1st August 2020 till date, the Ministry of Health is pleased to announce that there are 10 COVID-19 Testing Station identified in 7 Super Zones where samples will be collected starting tomorrow (21 August 2020). Kindly, take your COVID-19 Movement Pass and get yourself tested on the specified time mentioned on your movement pass. And for those whose super zones are not listed below, our surveillance team will call you anytime for the test, keep your phones near you.

SL.No	Super Zone	Zone	COVID-19 Testing Station
1	Changbangdu	Changbangdu	Bhutan Football Federation Ground, Changjiji
		Changjiji	
2	Changzamtok	Changgidaphu	Druk School
		Lower Changzamtok	
		Upper Changzamtok	
3	YHS	Yangchenphu Area	RSTA Bus Counter, Lungtenzampa
4	Core	Norzin Tag	HISC
		Norzin Wog	Taryana Center
			Kelki HSS
5	Motithang	Changgangkha	
		Upper Motithang	Jigme Namgyel School
		Lower Motithang (Kawang Damisa)	
6	Zilukha	Kawajangsa	ECB Head Office
		Zilukha	Zilukha School
7	Hejo Samtenling	Hejo Village	
		Langiophakha	Bebena Sports Complex
		Lower Samtenling	
		Upper Samtenling	



Key interventions/responses

Hotlines for Eastern Dzongkhags COVID19

Control Rooms (CRs):

1. Lhuntse Dzongkhag 1225
2. Mongar Dzongkhag 1239
3. Pemagatshel Dzongkhag 1241
4. Samdrupjongkhar Dzongkhag 1192
5. Trashigang Dzongkhag 1198
6. Trashiyangtse Dzongkhag 1247
7. Jomotshangkha Drungkhag 1210
8. Nganglam Drungkhag 1195
9. Samdrupcholing Drungkhag 1191
10. Eastern COVID19 Coordination Office (ECCO), Dewathang 4141

ACCESS TO CONTRACEPTIVE

To prevent unintended pregnancies and complications due to it, the government ensures that appropriate contraceptives will be made available. For those living in Thimphu, you can access them by calling these numbers:

Dechencholing BHU	17625418
Kuzuchen BHU	77808678
Hongtsho BHU	17707858
Chamgang BHU	17692952
Chamgang RBP BHU	17733331
Genekha BHU	77246057
Changjiji Sattelite Clinic	17600150
Motithang Sattelite Clinic	17609951
Hejo Sattelite Clinic	17696680
RBP Head Quarter BHU	17698813
Lingzhi BHU	17852054
Soe BHU	17767323
Barshong BHU	17308585

For Geowgs not covered under the above list, please contact your nearest Basic Health Units. For other Dzongkhgas, please refer to Essential Health Services' Focal's numbers.

FOR MORE INFORMATION :  HOTLINES : 2121 6060

www.health.gov.bt www.facebook.com/MoHBhutan/ [@MoHBhutan](https://twitter.com/MoHBhutan) [ministryofhealthbhutan...](https://www.instagram.com/ministryofhealthbhutan...)



112 and 2121-
hotlines for health
services

1023- hotline for
COVID enquires

6060 – Hotline for Senior
citizen related health services

Key interventions/responses



APPEAL



When the emergency vehicles are deployed to deliver essential items or to pick up the patients for emergency medical services, the general public are requested not to keep the emergency vehicles waiting which delays the services for other fellow citizens as there are limited numbers of emergency vehicles.

We seek cooperation from all the general public at this point of time.

Ministry of Health, Bhutan

ONE DESIGNATED MEMBER FROM A HOUSEHOLD WILL BE ALLOWED TO COME OUTSIDE THE HOUSE TO AVAIL ESSENTIAL HOUSEHOLD SERVICES. HOWEVER, THE FOLLOWING PREVENTIVE MEASURES MUST BE STRICTLY FOLLOWED:



	Wearing a face mask properly
	Maintaining physical distance
	Washing your hands with soap and water immediately upon returning home

It's "Our Gyenkhru" to protect ourselves, our families and our communities from COVID-19.

Stay Home, Stay Safe.



FOR MORE INFORMATION :

HOTLINES : 2121 6060



www.health.gov.bt www.facebook.com/MoHBhutan/ [@MoHBhutan](https://twitter.com/MoHBhutan) [ministryofhealthbhutan_](https://www.instagram.com/ministryofhealthbhutan_)

Shop Smart, Shop Safe!

Plan ahead	Dont shop when you are sick	One person per family	Touch only what you want to take
Take only what you need	Maintain physical distance	Use e-transaction (mbob, e-Teeru, mpay etc...) as far as possible	Pack your bags yourself
Always wash your hands with soap and water when you reach home	Always wash your re-useable bags after use	Always show patience and gratitude	

FOR MORE INFORMATION :

HOTLINES : 2121 6060

www.health.gov.bt www.facebook.com/MoHBhutan/ [@MoHBhutan](https://twitter.com/MoHBhutan) [ministryofhealthbhutan_](https://www.instagram.com/ministryofhealthbhutan_)





Lessons Learned

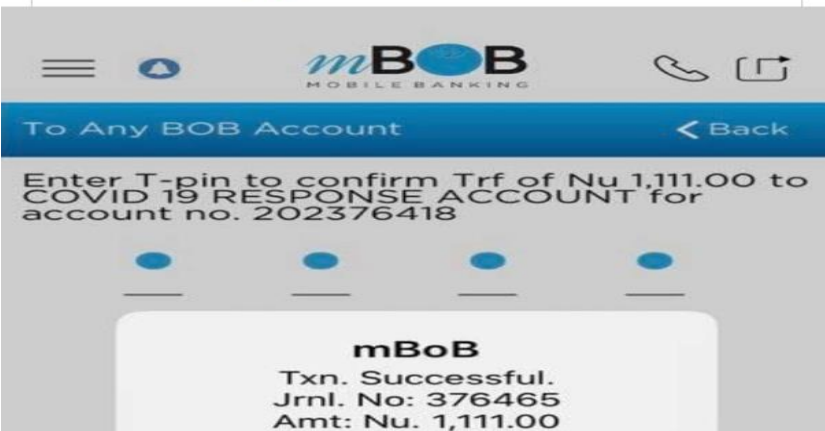
- *Smallness is an advantage and Bhutanese are empathic by nature*
 1. Volunteerism/Collectivism – Taxis transport COVID-19 samples
 2. Desuups : volunteering fully in all areas of life to support community
 3. Free quarantine : 21 days of free facility based quarantine
 4. Young people : Volunteered to work at Mini-Dry Port, Pling.
 5. Citizen Initiative : Citizen's giving back, Bhutan initiative
 6. Her Majesty, the Queen of Bhutan ; Baking and distributing refreshments for volunteers all around the Capital and nearby
 7. His majesty, the King : Touring the country 3 times since March 2020 on foot and meeting people
 8. King's project : To feed the stray dogs through out the country
 9. King's relief fund : distress families

Lessons Learned

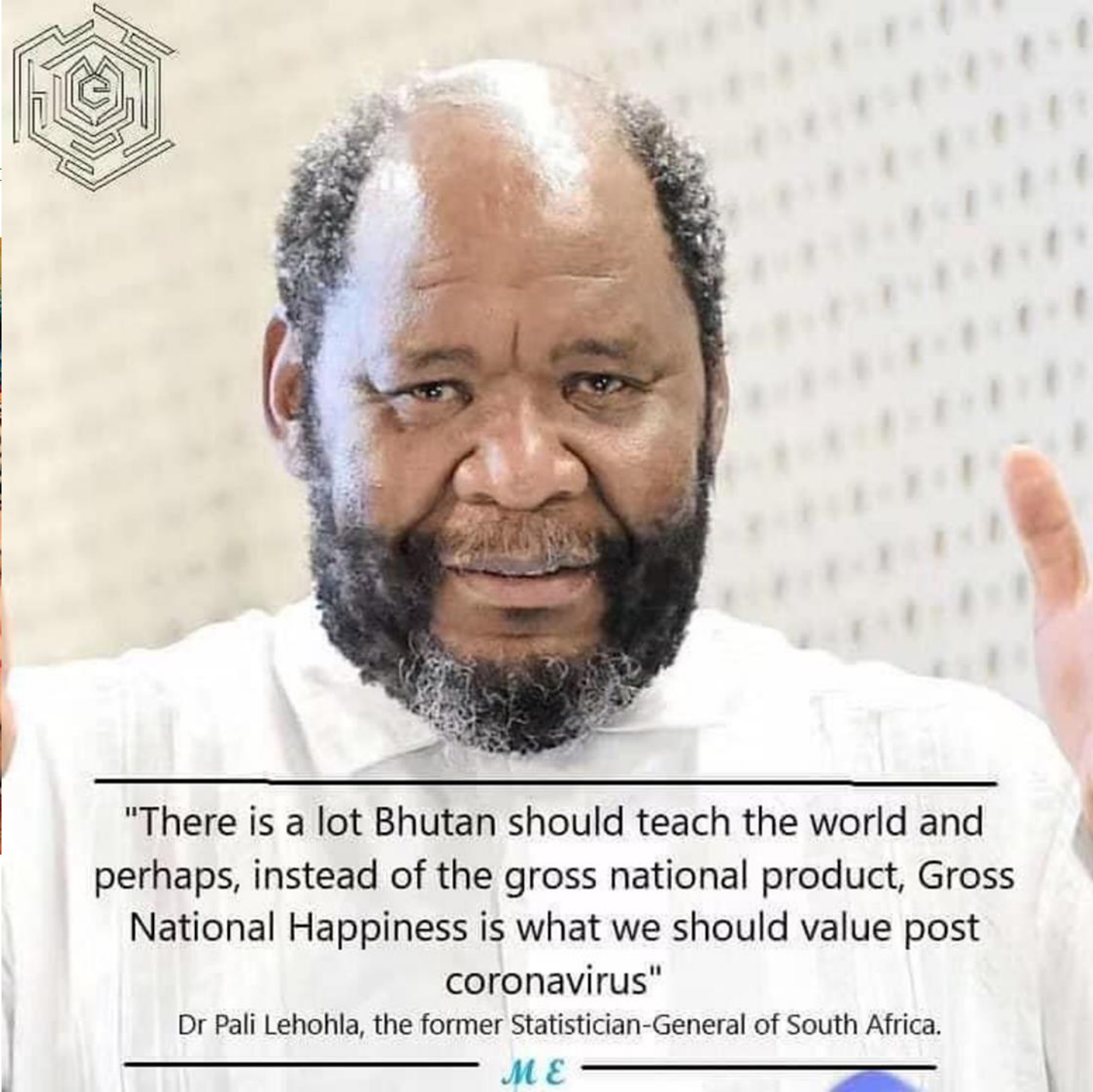


B-Mobile LTE 6:13 AM 98%
Minjur Dorji ▶ Citizens Giving Back Bhutan 🙏🙏🙏
9 h · 🌐

Small drop of water from me & my family laa. Thank you Mr. [Rinchen Wangdi](#), Director, GNHC for letting me know 🙏



- Urgent need for a medical school
- Convenient marriage political masters and medical fraternity
- Time to revisit the concept of disease, diagnosis and treatment



"There is a lot Bhutan should teach the world and perhaps, instead of the gross national product, Gross National Happiness is what we should value post coronavirus"

Dr Pali Lehohla, the former Statistician-General of South Africa.





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COVID-19: Situation, Response, Lessons Learned in Guatemala



José Ortíz Dr. Msc.

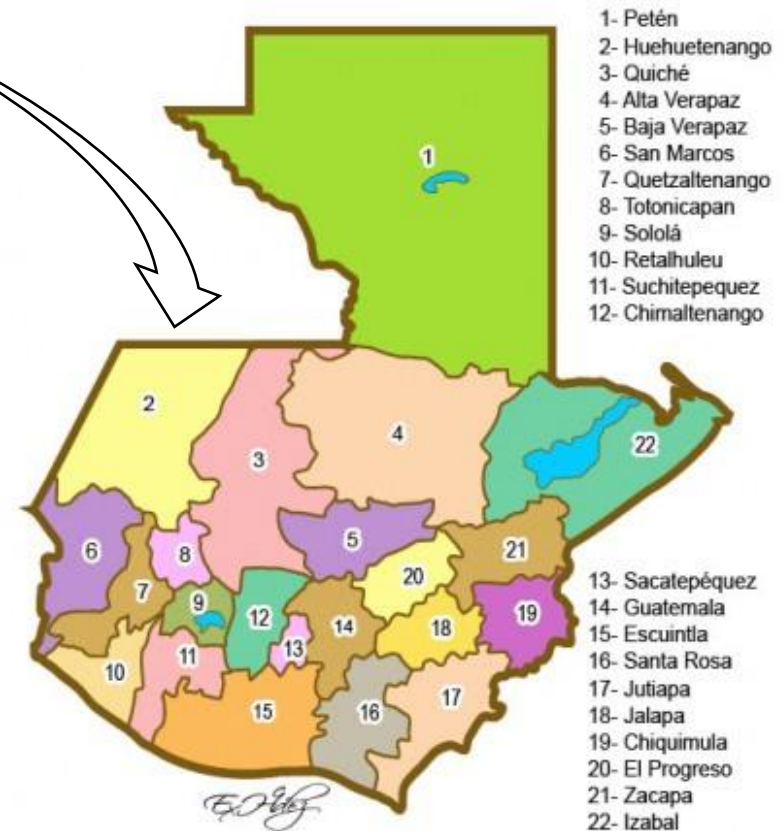
Pandemia Observatory SarsCov-2/Covid-19

Guatemala, Central America

Geographic Situation



Guatemala



General Demographic Profile



Total Population and Large Age Groups



Guatemala Pandemic Status as of August 27, 2020

Active Cases	9,350
Accumulated Cases Recorded	71,856
Recovered Cases	59,641
Deceased Cases	2,685
Cumulative incidence per 100,000 hab.	426.32
Mortality rate per 100,000 hab.	15.9
Lethality	3.70%

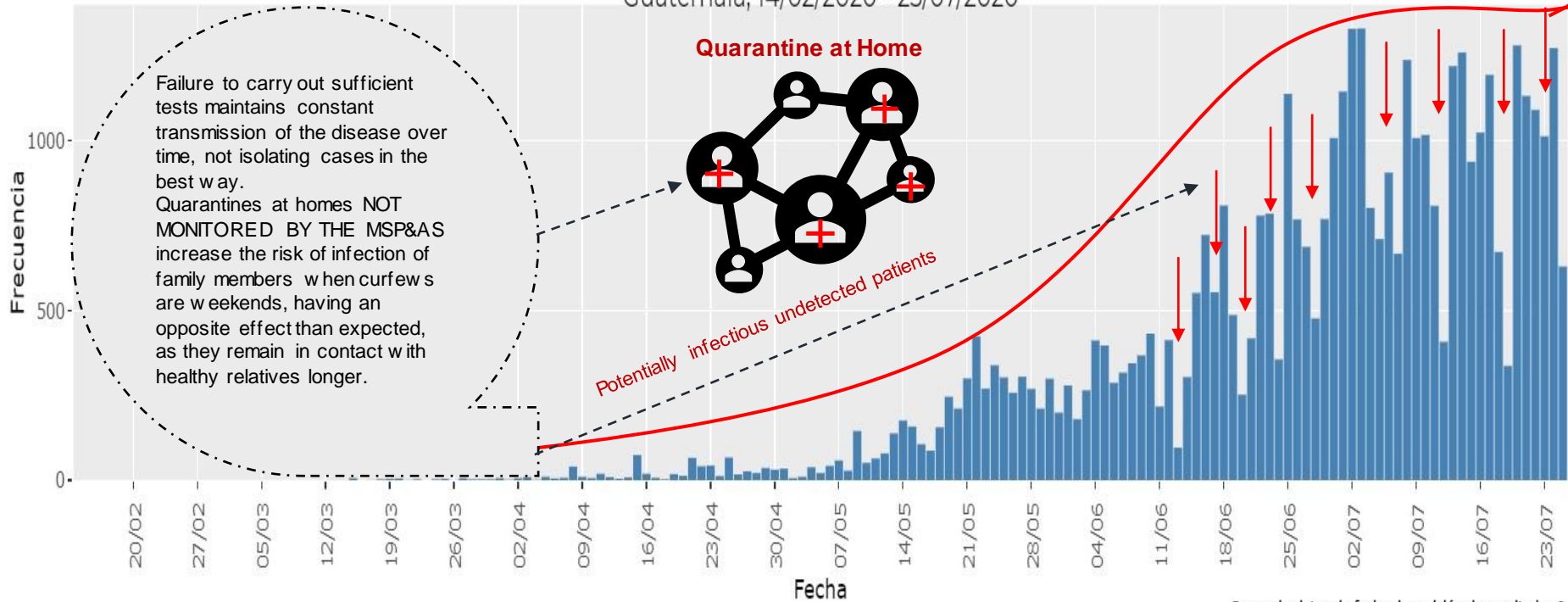
Insufficient Number of Tests For Covid-19

Cuadro de datos

Sars-Cov2/Covid-19 Observatory, Guatemala

José Ortiz Dr. Administrador

Casos confirmados (n=45,053) por fecha de emisión de resultado de laboratorio
Guatemala, 14/02/2020 - 25/07/2020



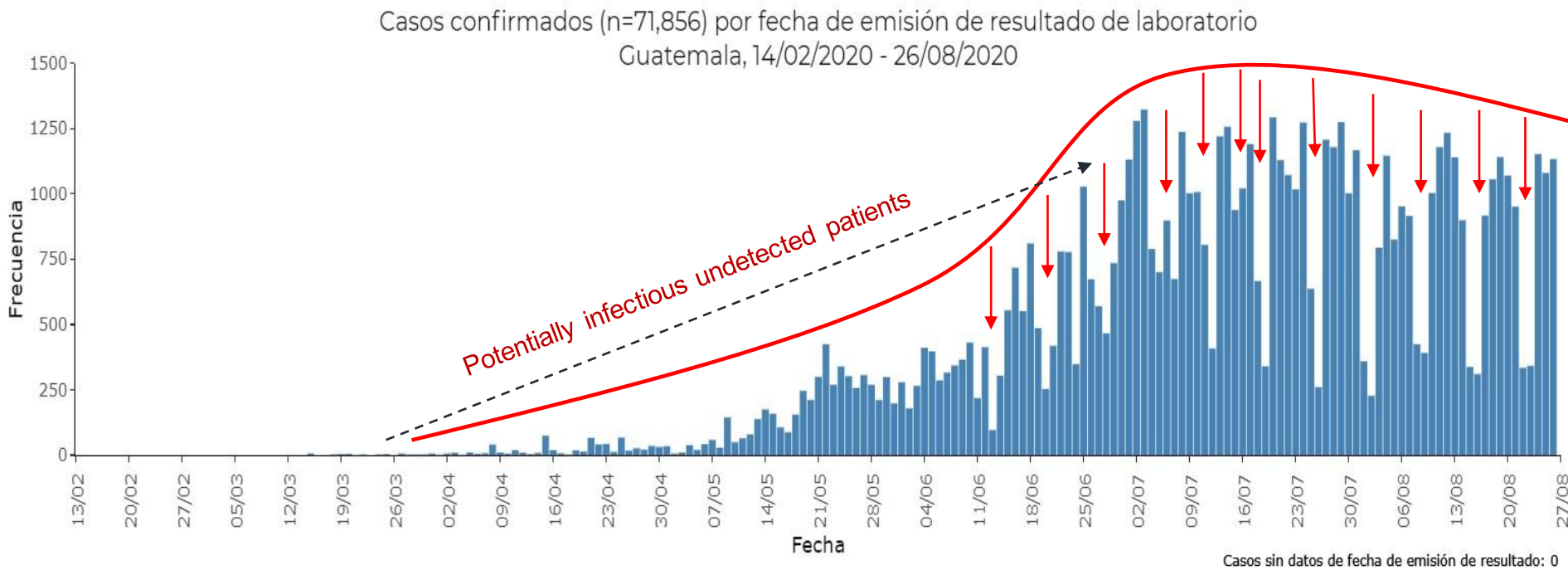
Sustained Transmission of SarsCov-2 / Covid-19 Disease

Casos confirmados por fecha de emisión de resultados

Casos confirmados por fecha de inicio de síntomas

Casos confirmados por fecha de toma de muestra

Cuadro de datos



Search of the Ideal Number of Sars-Cov-2/Covid-19 Tests:

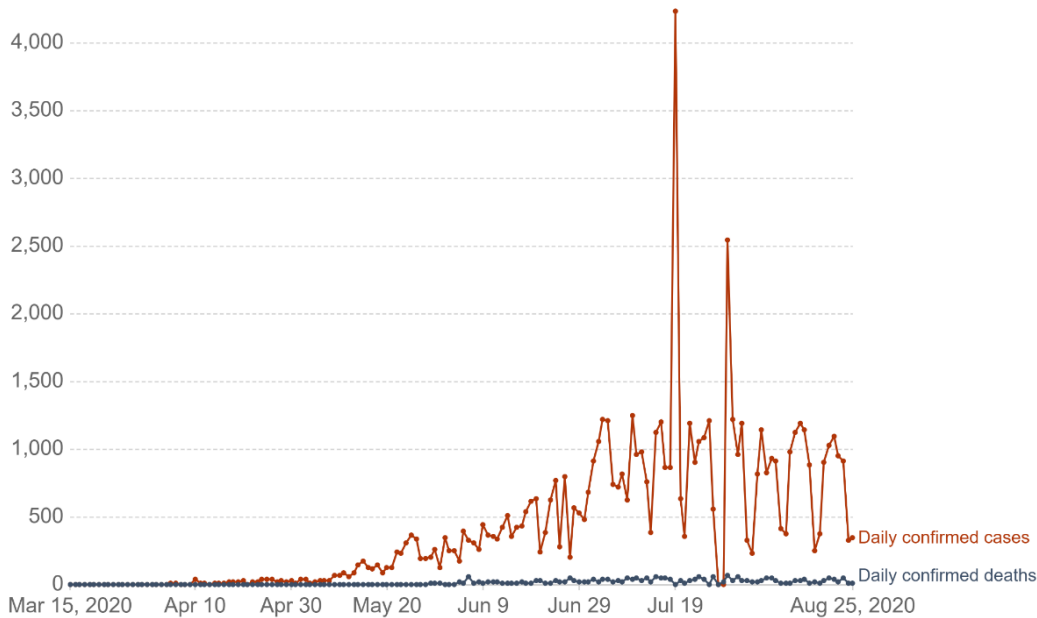
	Escenario 1	Escenario 2	Escenario 3
	No Interventions	Total Hospitalizations with the mortality rate of 1.6 x 100,000 per week	Total Hospitalizations with the mortality rate of 0.2 x 100,000 per week
<i>First Wave</i>			
	6,323,004	3,303,769	948,182
<i>Daily Testing</i>			
	35,128	18,354	5,268
<i>Second Wave</i>	5,510,046	2,878,999	826,273
<i>Third Wave</i>			
	4,335,774	2,265,442	650,182
Total	16,203,952	8,466,565	2,429,904

¿Can the Republic of Guatemala replicate the Model of China developed in its Municipalities and Provinces?

Daily confirmed COVID-19 cases and deaths, Guatemala

The confirmed counts shown here are lower than the total counts. The main reason for this is limited testing and challenges in the attribution of the cause of death.

Our World
in Data

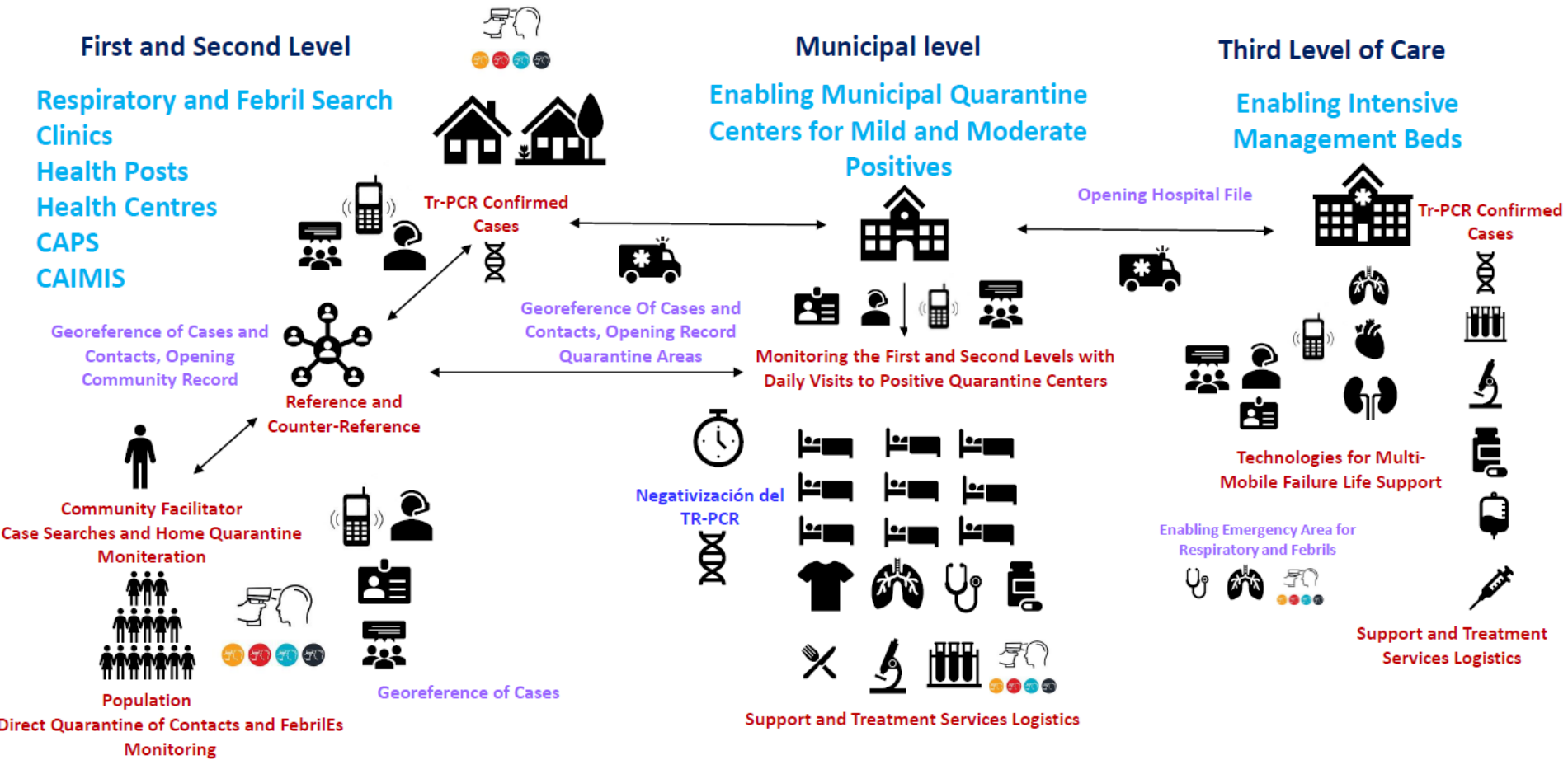


Source: European CDC – Situation Update Worldwide – Last updated 25 August, 10:34 (London time) OurWorldInData.org/coronavirus • CC BY

1. Much of the world community is not yet prepared, mentally and materially, to implement the measures that have been used to contain COVID-19 in China.
2. These are the only measures that are currently proven to disrupt or minimize human transmission chains.
3. Fundamental to these measures is extremely proactive surveillance to detect cases immediately, very rapid diagnosis and immediate isolation of cases, rigorous monitoring and quarantine of close contacts, and an exceptionally high degree of understanding and acceptance of these measures by the population.
4. The time that can be earned by fully applying these measures, even if it is only days or weeks, can be invaluable in ultimately reducing diseases and deaths by COVID-19. This is evident in the large increase in knowledge, approaches and even tools that have taken place in just 7 weeks since this virus was discovered through the rapid scientific work that has been done in China.

Proposed Model Of Health Care For Guatemala Municipal Quarantine Centers

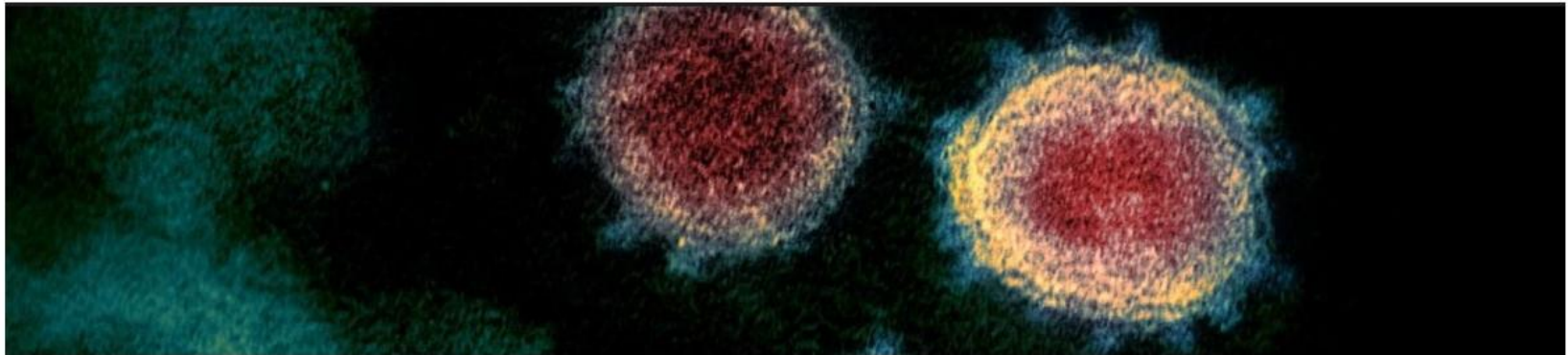
Proposed Model for Guatemala For Sars-Cov-2/Covid-19 Care



Observatory General Aspects

Sars-Cov-2 / Covid-19 Pandemic Observatory, Guatemala

[Start in Wuhan, China](#) [SarsCov-2 Structure](#) [Immune Responses](#) ∨ [Sars-Cov-2 / Covid-19 Transmission Surfaces](#)
[Physiology of Sneezing, New !!](#) [Visualization of droplets of oral fluid, New !!](#) [Pathophysiology of ARDS New !!](#) ∨
[Covid-19 mild or moderate, New !!](#) [Clinical manifestations](#) ∨ [SARS-CoV-2 infection in children, New !!](#) [Treatment](#) ∨
[Anesthesia](#) ∨ [New EPP !!](#) ∨ [Social distancing](#) [Mathematical Models](#) [Scenarios in Guatemala New !!](#)
[New World Viewpoint !!](#) [MMR Vaccine May Protect Against Worst Symptoms of COVID-19](#)
[Inhibition of Bruton tyrosine kinase in patients with severe COVID-19, New !!](#) [Contact](#)



The COVID-19 Vaccine Development Outlook

José Ortiz Dr. Msc.

Administrator of the SarsCov2 / Covid-19 Observatory, Guatemala

[Download Article:](#)

EDITOR

José Ortiz Dr. Msc.

Physician and Surgeon, USAC Gynecologist and
Obstetrician, USAC

Epidemiologist, National Institute of Public Health of
Mexico

• Area of Concentration: Demographic Methods and

Observatory General Aspects

The image shows a Twitter profile for Jose Ortiz (@JoseOrt18352877), a doctor and epidemiologist. The profile includes a bio, location (Guatemala), and a link to his website. A tweet from 21 days ago discusses the development of COVID-19 vaccines, mentioning the Rusa SPUTNIKV and adenovirus vectors. The tweet includes a diagram illustrating the vaccine mechanism, showing the adenovirus vector entering a cell and producing antigens that trigger an immune response.

Jose Ortiz
799 Tweets

Jose Ortiz
@JoseOrt18352877
Médico y Cirujano
Ginecólogo y Obstetra
Epidemiólogo
Administrador del Observatorio Pandemia Sars-Cov-2/COVID-19
📍 Guatemala, Centro America sarscov2gt.wordpress.com
📅 Fecha de nacimiento: 5 de diciembre de 1961 📅 Se unió en marzo de 2020
255 Siguiendo 89 Seguidores

Tweet fijado
Jose Ortiz @JoseOrt18352877 · 21 ago.
@DrGiammattei @prensa_libre @el_Periodico @Guatevision_tv @nomadagt @QuiqueGodoy
Resumen y puesta al día sobre el desarrollo de Vacunas Contra el SarsCov2/Covid-19, incluyendo la nueva vacuna Rusa SPUTNIKV de Doble Vector Viral de Adenovirus.
sarscov2gt.wordpress.com/2020/08/21/la-...

Diagram Description:
A diagram illustrating the mechanism of a COVID-19 vaccine. It shows an adenovirus vector (1) entering a cell and producing antigens (2). The antigens are then presented to the immune system, triggering a response. The diagram includes text explaining that the adenovirus vector is used to transport genetic material from another virus, and that the vaccine is based on an adenovirus vector which normally causes acute respiratory and infections. It also notes that the vaccine is based on another adenovirus vector which is not the body's natural response and provides a summary of the process.

Population Density as a Tool to Prioritize Municipalities in the SarsCov-2 / Covid-19 Screening in Guatemala

Population Density as a Determinant to Prioritize SarsCov-2 / Covid-19 Screening

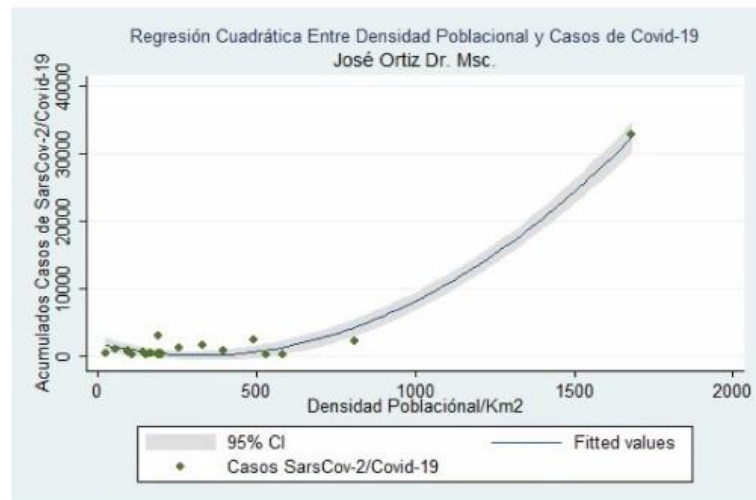
Author: *José Ortiz Dr. Msc.*

Administrator of the SarsCov2 / Covid-19 Observatory

Editorial

In the absence of an active and accurate Epidemiological Surveillance System, the epidemiologist must seek alternatives to prioritize the screening of the 346 municipalities that the Republic of Guatemala has.

Exploring the data from the Covid-19 Data Board of the Ministry of Public Health and Social Assistance - MSPAS- and Population Density Data of the National Institute of Statistics -INE- for the year 2020, the information could be explored, achieving a Modeling of Quadratic Regression, obtaining the following results, See Graph No. 1



Graph No. 1

Relevant Publications and Editorials

- [The COVID-19 Vaccine Development Outlook](#) August 21, 2020
- [Population Density as a Tool to Prioritize Municipalities in the SarsCov-2 / Covid-19 Screening in Guatemala](#) August 9, 2020
- [Population Density as a Determinant to Prioritize SarsCov-2 / Covid-19 Screening](#) August 2, 2020
- [Reopening In A Country With A Ministry Of Health Without Guidance And Leadership And Quarantines With No Effect On The Flattening Of The Curve](#) July 26, 2020
- [Guatemala With Resilience and De-escalation Without Meaning](#) July 22, 2020
- [Future Scenarios of the SarsCov-2 / Covid-19 Pandemic in Guatemala](#) July 14, 2020
- [The FDA advises consumers not to use hand sanitizer products that have been manufactured by Eskbiochem](#) June 27, 2020
- [Respiratory transmission of SARS-CoV-2 in the hospital](#) June 25, 2020
- [Counseling on the use of immunodiagnostic tests at the point of care for COVID-19](#) June 11, 2020
- [RAPID TESTS FOR SARSCOV-2 / COVID-19 NOT VALIDATED AS A RISK TO MEASURE THE MAGNITUDE OF THE PANDEMIC WITH FALSE NEGATIVE RESULTS](#) June 10, 2020
- [Waiting for Certainty in Covid-19 Antibody Testing: At What Cost?](#) June 6, 2020
- [Guatemala As A Bad Imitator Of Interventions In The SarsCov-2 / Covid-19 Pandemic](#) June 4, 2020

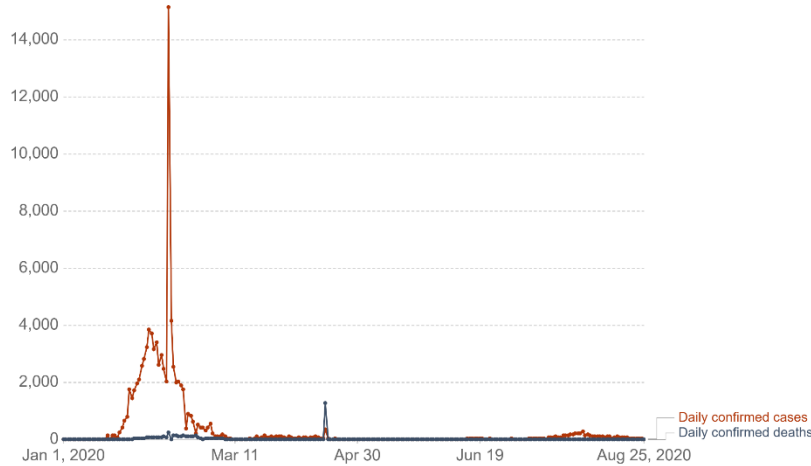
Relevant Publications and Editorials

- [LONG CONFINEMENTS WITHOUT TESTING MAY NOT CONTAIN THE SARS-COV-2 / COVID-19 EPIDEMIC IN GUATEMALA](#) May 23, 2020
- [Coronavirus \(COVID-19\) Update: FDA Authorizes First Antigen Test to Help Rapid Detection of the Virus That Causes COVID-19 in Patients](#) May 21, 2020
- [Municipalities and MSP & AS without regulating the Waste Management of houses and hotels during the Covid-19 Pandemic](#) May 17, 2020
- [Does the transmission of Covid-19 occur through cash and coins?](#) May 17, 2020
- [Evidence-Based Reflections for Reopening Schools](#) May 12, 2020
- [Living and Working in the Epicenter of the SarsCov2 / Covid-19 Pandemic, Guatemala](#) May 3, 2020
- [Immunosuppressed states: a clinical-therapeutic staging proposal](#) April 25, 2020
- [Is there a difference in the spread of Sars-Cov-2 / Covid-19, depending on the language?](#) April 20, 2020
- [What do the countries that best responded to the pandemic have in common? Women leaders](#) April 15, 2020
- [Guatemala, A Quarantine That Started Backwards](#) April 12, 2020
- [Covid-19 Pandemic and Health](#) April 12, 2020
- [Can the Republic of Guatemala Adapt the China Model developed in its Municipalities and Provinces to Address Sars-Cov-2 / Covid-19?](#) April 10, 2020
- [Estimation of the Pandemic Impact in Guatemala Sars-Cov-2 / Covid-19](#) April 4, 2020
- [Editorial](#) March 22, 2020

World Successful Experiences In The Approaching The Sars-Cov-2/Covid-19 Pandemic

Daily confirmed COVID-19 cases and deaths, China

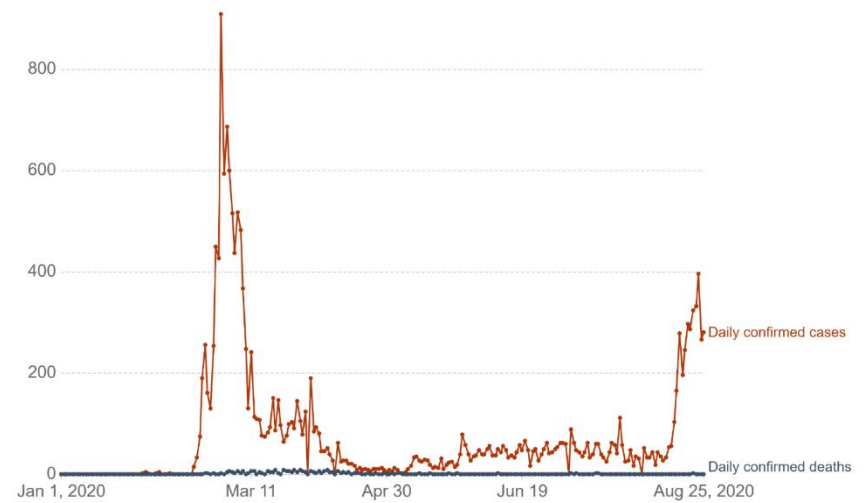
The confirmed counts shown here are lower than the total counts. The main reason for this is limited testing and challenges in the attribution of the cause of death.



Source: European CDC – Situation Update Worldwide – Last updated 25 August, 10:34 (London time) OurWorldInData.org/coronavirus • CC BY

Daily confirmed COVID-19 cases and deaths, South Korea

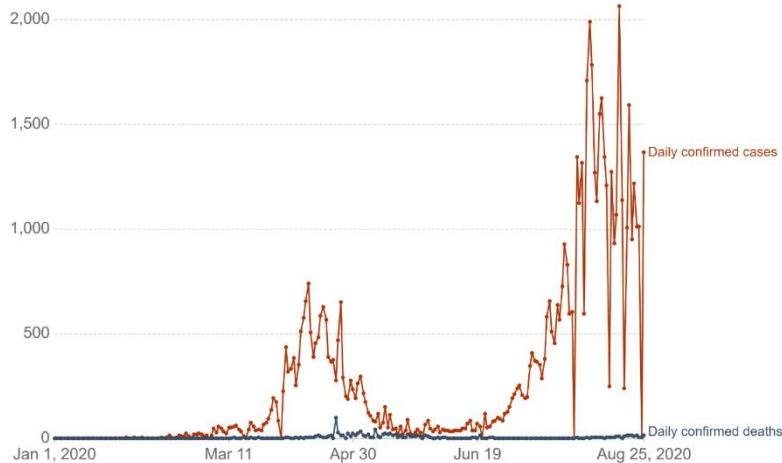
The confirmed counts shown here are lower than the total counts. The main reason for this is limited testing and challenges in the attribution of the cause of death.



Source: European CDC – Situation Update Worldwide – Last updated 25 August, 10:34 (London time) OurWorldInData.org/coronavirus • CC BY

Daily confirmed COVID-19 cases and deaths, Japan

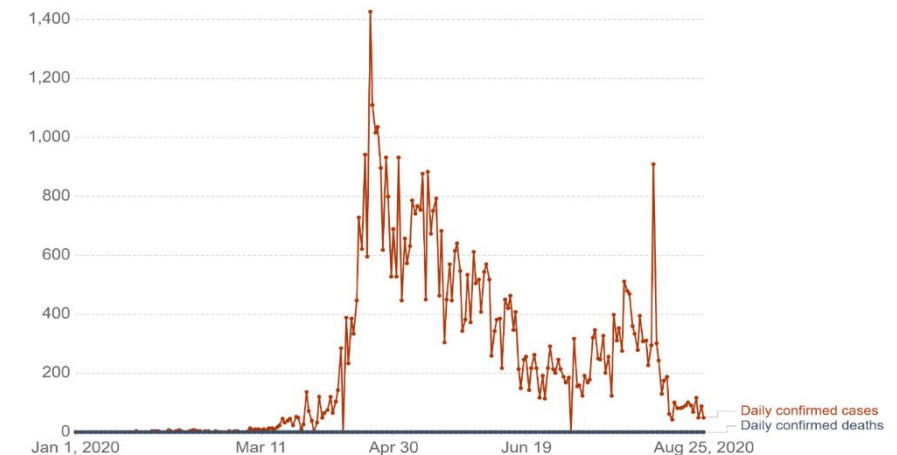
The confirmed counts shown here are lower than the total counts. The main reason for this is limited testing and challenges in the attribution of the cause of death.



Source: European CDC – Situation Update Worldwide – Last updated 25 August, 10:34 (London time) OurWorldInData.org/coronavirus • CC BY

Daily confirmed COVID-19 cases and deaths, Singapore

The confirmed counts shown here are lower than the total counts. The main reason for this is limited testing and challenges in the attribution of the cause of death.



Source: European CDC – Situation Update Worldwide – Last updated 25 August, 10:34 (London time) OurWorldInData.org/coronavirus • CC BY

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[Web Page: https://sarscov2gt.wordpress.com/](https://sarscov2gt.wordpress.com/)

[Twitter Count: https://twitter.com/JoseOrt18352877](https://twitter.com/JoseOrt18352877)

Atitlan Lake



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COVID-19: Situation, Response, Lessons Learned in Italy

Francesco Nicoli
University of Ferrara
Italy



Italy

- Regionally based national health service
- Care and quality may vary by region
- Free of charge universal coverage at the point of service

2017 population

60.6M

2017 per capita GDP

\$35,079

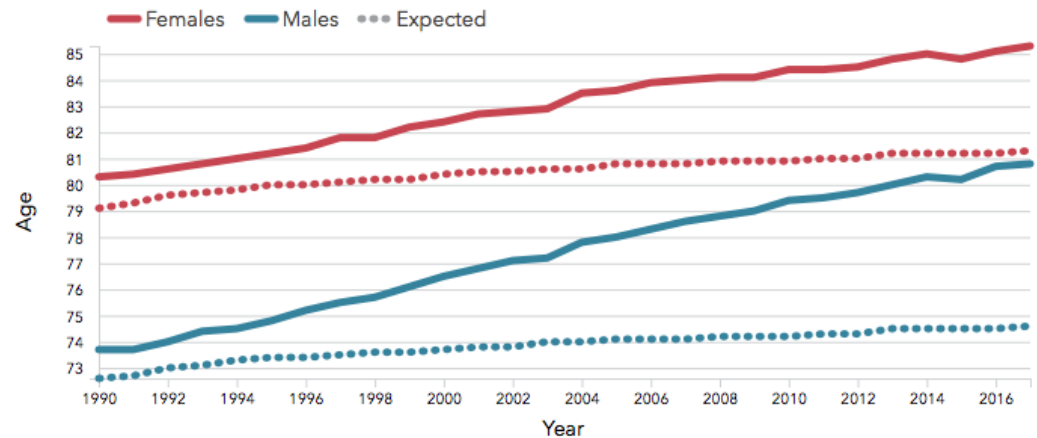
2017 fertility rate

1.3

2017 educational attainment (years)

12.6

How long do people live?



	Expected		Observed	
	1990	2017	1990	2017
Females	79.1	81.3	80.3	85.3
Males	72.6	74.6	73.7	80.8

Life expectancy, 1990-2017

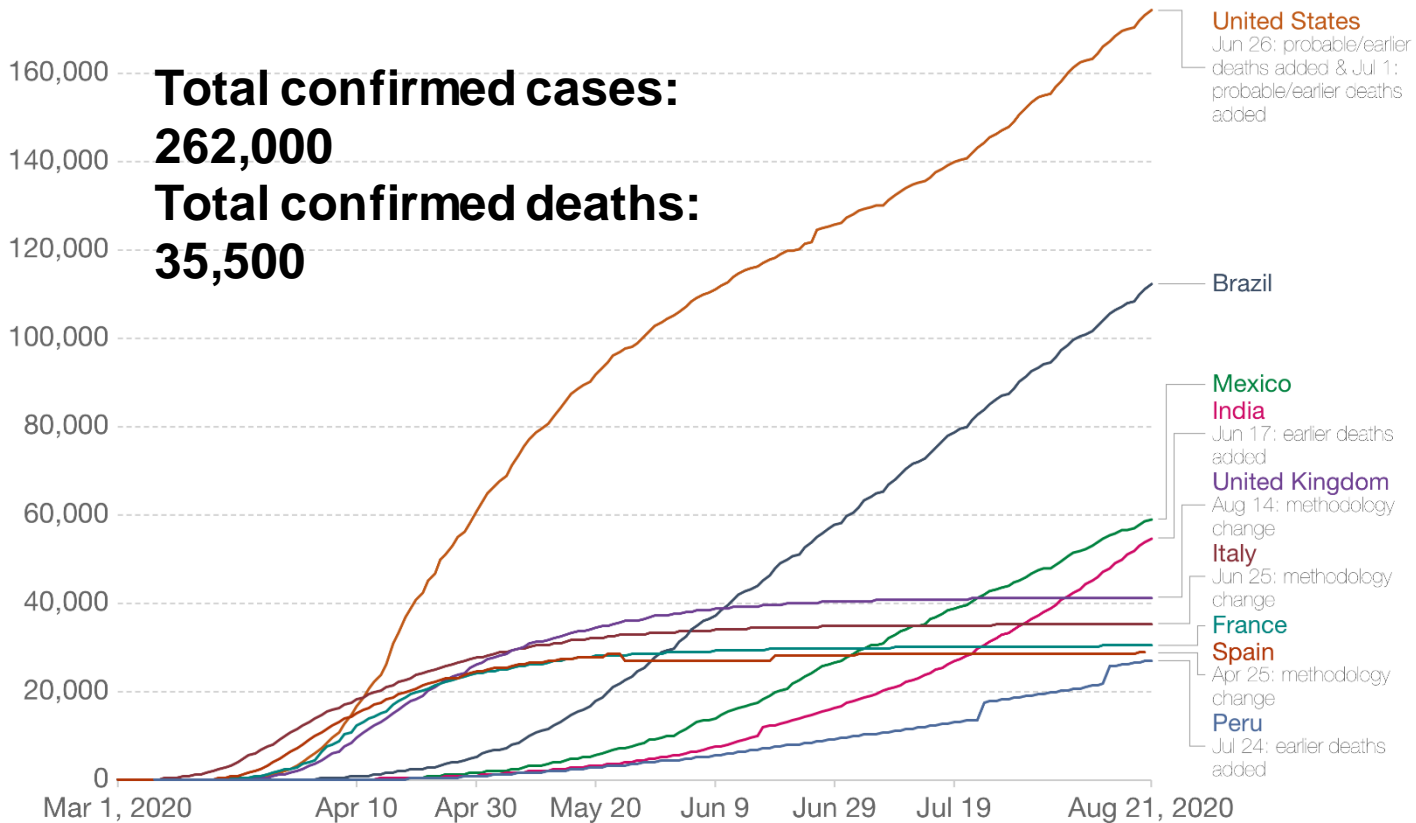
<http://www.healthdata.org/italy>

COVID-19 situation

Cumulative confirmed COVID-19 deaths

Limited testing and challenges in the attribution of the cause of death means that the number of confirmed deaths may not be an accurate count of the true number of deaths from COVID-19.

Our World
in Data



Source: European CDC – Situation Update Worldwide – Last updated 21 August, 11:34 (London time)

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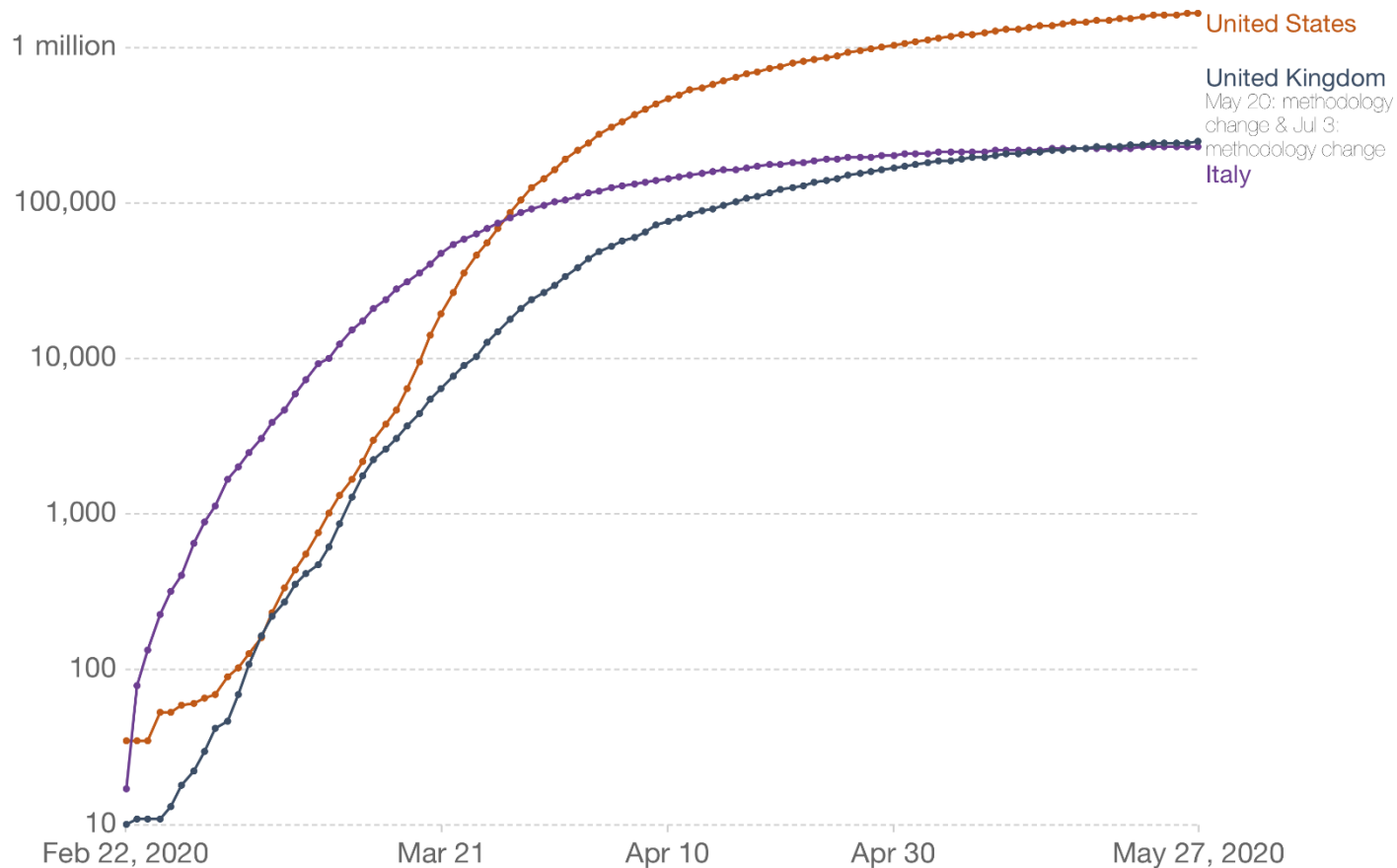
Rank: 17th by total cases | 6th by number of deaths | 7th (5th if excluding small countries) by deaths per 1 million population

COVID-19 situation: Why some many deaths?

Cumulative confirmed COVID-19 cases

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.

Our World
in Data



Source: European CDC – Situation Update Worldwide – Last updated 26 August, 10:04 (London time)

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- **Timing**

- **Population distribution**

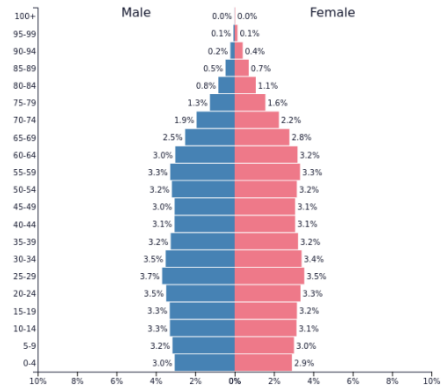
Population pyramids of the 3 countries with highest number of cases

Italy

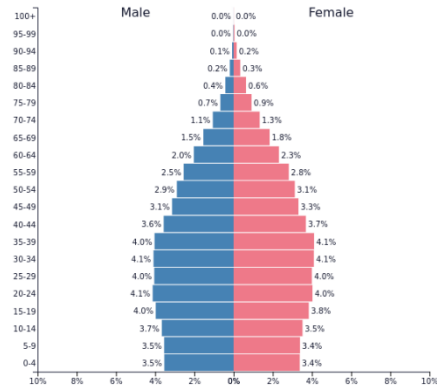
USA

Brazil

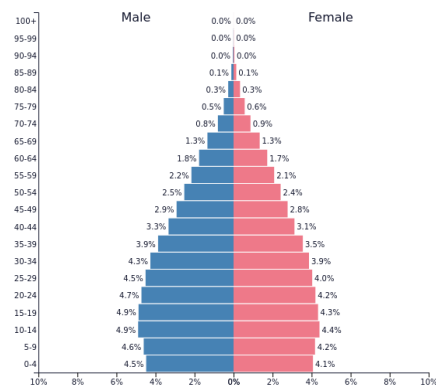
India



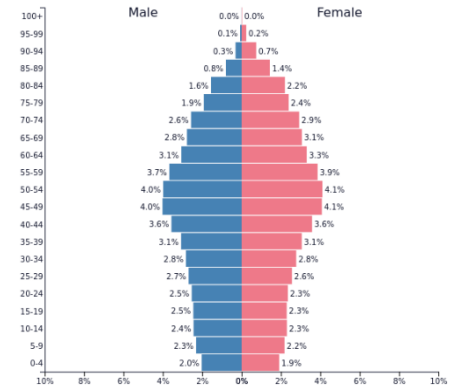
United States of America - 2019
Population: 329,064,916



Brazil - 2019
Population: 211,049,518



India - 2019
Population: 1,366,417,755



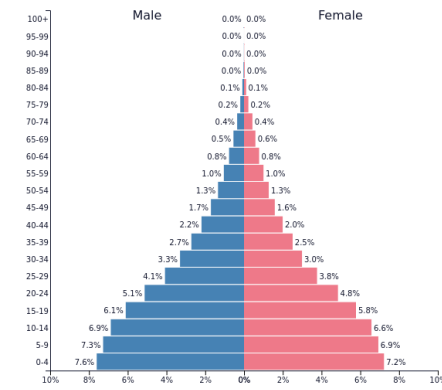
Italy - 2019
Population: 60,550,092

Afghanistan

Guatemala

Bhutan

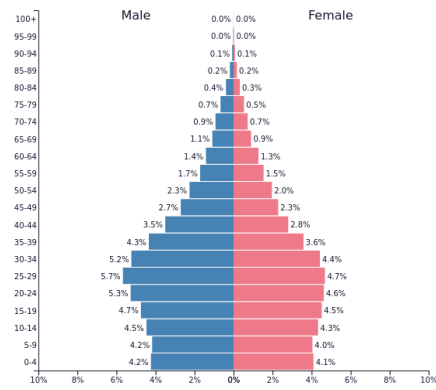
World



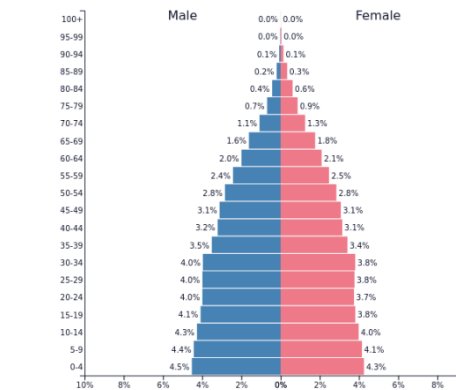
Afghanistan - 2019
Population: 38,041,757



Guatemala - 2019
Population: 17,581,476



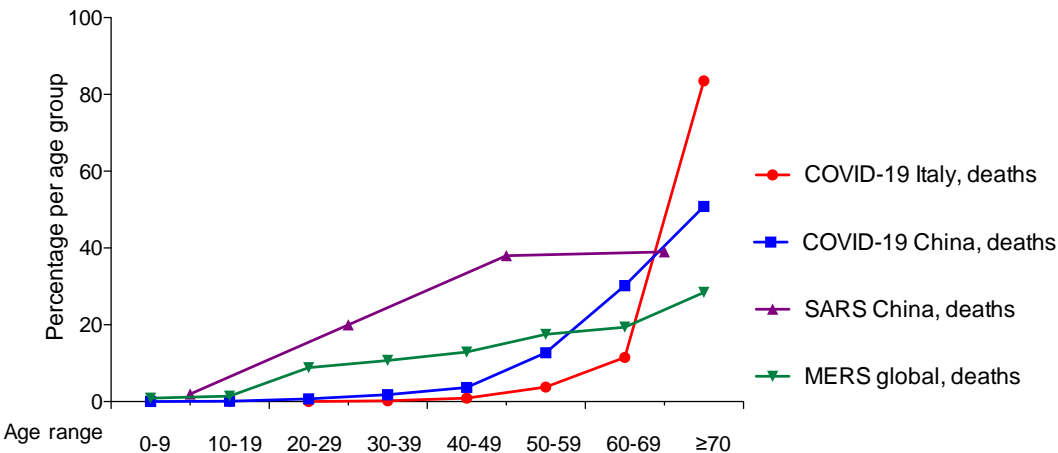
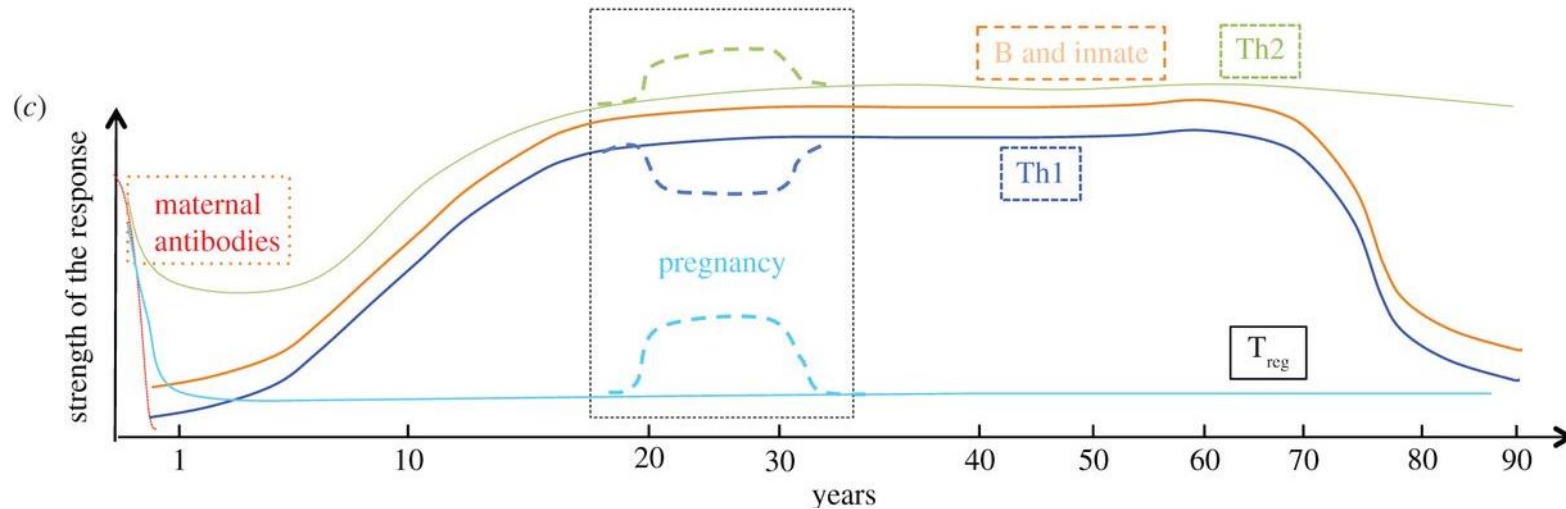
Bhutan - 2019
Population: 763,094



WORLD - 2019
Population: 7,713,468,205

COVID-19 situation: the elderly, a fragile segment of the population

Loss of immune responses with age (in particular vs new infections)



- Emerging infections particularly severe for old subjects
- >80% of deaths in Italy in 70+

COVID-19 situation: where was the infection acquired

TABELLA 6 - DISTRIBUZIONE DEI LUOGHI DI ESPOSIZIONE DEI CASI DIAGNOSTICATI DAL 25/05/2020 AL 23/06/2020 (DATO DISPONIBILE PER 969/8.394 CASI).

Luogo di esposizione	Casi	
	N	%
RSA/Casa di Riposo/Comunità disabili retirement home	340	35,1
Ambito familiare family	238	24,6
Ospedale/Ambulatorio hospital	64	6,6
Lavoro* workplace	38	3,9
Nave/Crociera	8	0,8
Comunità religiosa	1	0,1
Altro	280	28,9
Totale	969	

* Per Lavoro si intende qualunque luogo diverso dagli altri ambiti riportati

Key interventions/responses

Late Feb

- measures on sporting events, prisons, exams, tourism

Early
March

- schools closed (whole country)
- stronger measures on most-affected regions

Mid March

- closure of all commercial activities (whole Italy), with exception of grocery stores and pharmacies

Mid/Late
March

- ban on: accessing parks and carrying out recreational activities. Closure of the food and drink administration establishments

Key interventions/responses

Late March

- ban on moving between municipalities

April

- restrictive measures extended until May 3. However, the opening of stationery shops, bookshops and clothing stores for children and babies will be allowed

May

- gradual re-opening of activities and travels

Early June

- travelling between regions is allowed

Key interventions/responses



Schools closure + School holidays

Commercial activities closure

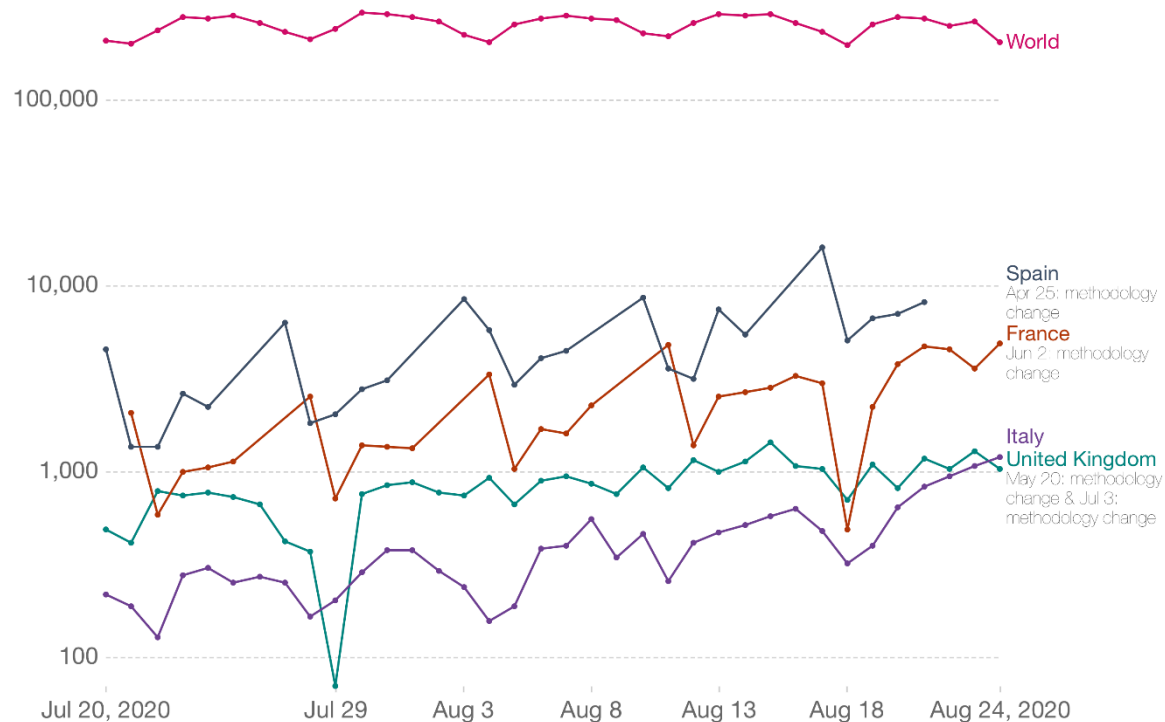
Ban on movements

Key interventions/responses

Daily new confirmed COVID-19 cases

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.

Our World in Data



Source: European CDC – Situation Update Worldwide – Last updated 24 August, 10:04 (London time)

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Masks and social distancing in restaurants and close environments

Masks outside in the late afternoon and night
Dancing clubs closed

Lessons Learned (1)

Total number of cases



Post-lockdown hotspots



With current measures, active case findings and previous experience:

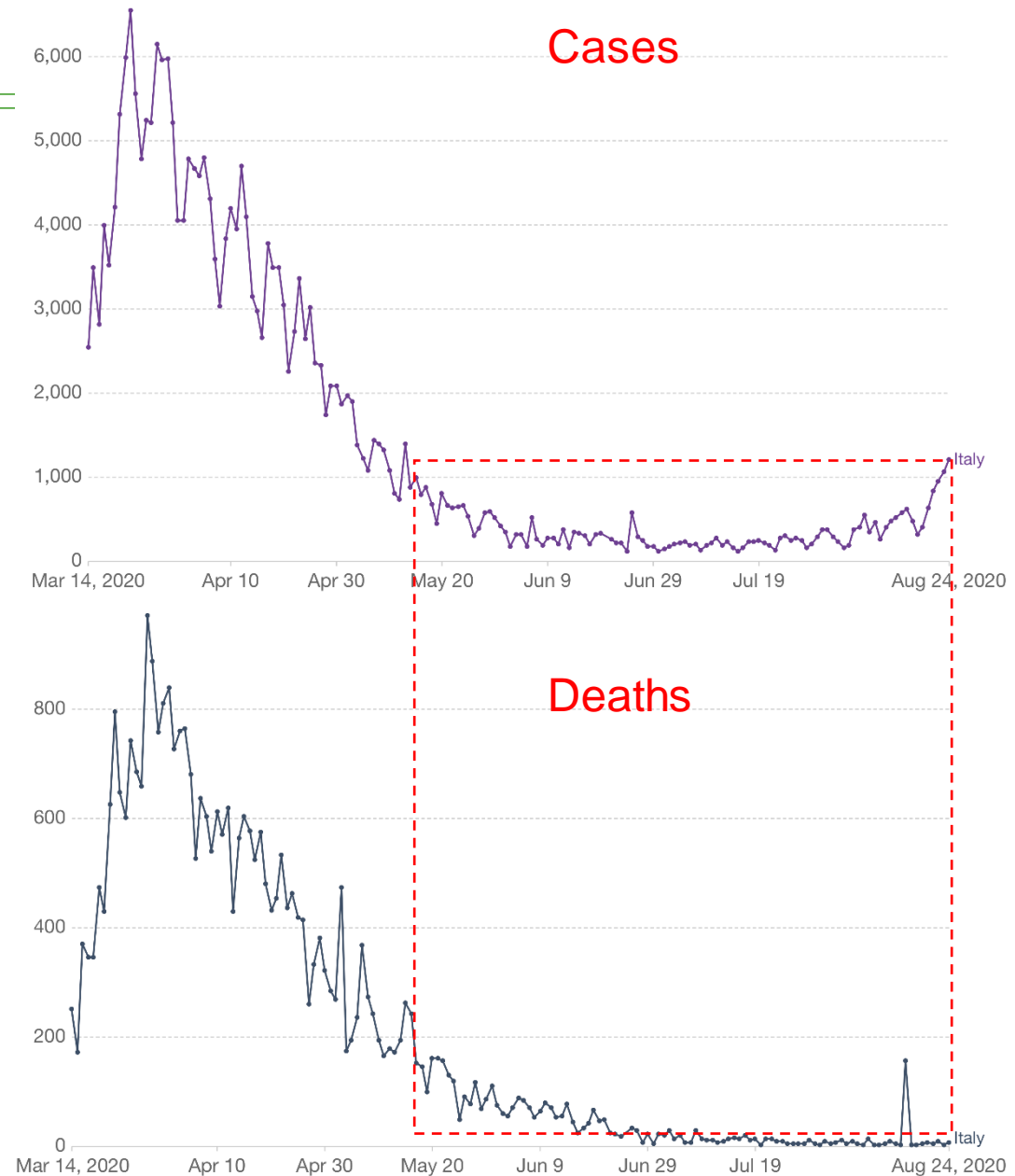
- Slow increase (not exponential as in Feb/May)
- Different geographic distribution (isolation of outbreaks)

Lessons Learned (2)

Example of August 24th: same number of cases as in mid May, far less number of deaths:

- Better organization of diagnostics (more case finding)
- Better organization of hospitals/ICU → better care

Politicians said: no more cuts on health!



Considerations

- High percentages of old citizens → more severe consequences after COVID-19 pandemics
- The elderly are more at risk of death due to emerging infections, and retirements houses are places of infection spread → special focus on this population when preparing pandemic preparedness plans



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