

COVID-19 CASES IN THE GAZA STRIP

Monthly Epidemiological Bulletin December 2021 - January 2022

DATA SOURCES: Ministry of Health (MOH-PHIC) daily reports on COVID-19 in Gaza Strip

GENERAL

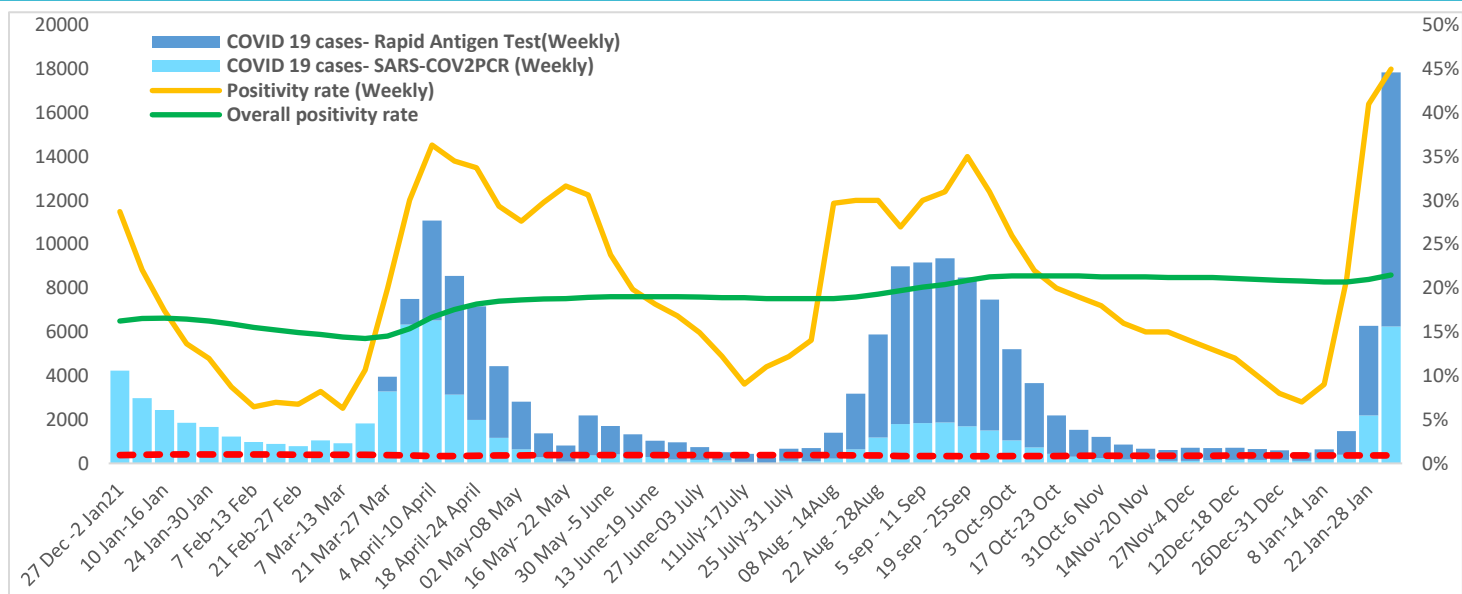


Figure 1: Reported weekly COVID-19 cases, weekly positivity rates, overall positivity rates and overall fatality rate

Reporting Period	Monthly Cases		Cumulative	
	01/12/2021 31/12/2021	01/01/2022 31/01/2022	Cumulative since 23/8/2020	
Total number of samples tested	28,572	50,490	962,236	
Total number of positive cases	3063	15,148	205,577	
Total number of closed cases	188819	191707		
Total number of recovered cases (%closed)	187112(99.1%)	189944(99.1%)		
Total number of reported deaths (%closed)	1707(0.9%)	1763(0.9%)		
Classification of positive cases by severity*	Mild	2991 (97.6%)	15,048 (99.3%)	
	Moderate	20 (0.7%)	51 (0.3%)	
	Severe	35 (1.1)	29 (0.2%)	
	Critical	17 (0.6)	20 (0.1)	
Positivity rates	%	10.7%	30.0%	21.4%

- This report provides a comparison of COVID-19 infections in December 2021 and January 2022.
- The Ministry of Health (MOH) announced the first case of the Omicron variant in the Gaza Strip at the beginning of December 2021. However, the source of infection could not be identified. The number of reported cases continued to increase between December and January, reaching the highest weekly number of infections registered in Gaza by the end of January. (figure 1).
- Due to the rapid spread of the Omicron variant, the increase in reported cases in January was accompanied by an increase in positivity rate across all five governorates of the Gaza Strip (Figure 4).
- A significant increase in the number of new cases and the incidence rate of COVID-19 infection per 100,000 population was observed in all five governorates of the Gaza Strip in January (Figures 2 and 3). The governorates of Gaza and Khanunis reported the highest number of new cases respectively, while the highest incidence rate per 100000 population was reported in Khanunis district followed by Gaza governorate.
- A fivefold increase in the number of reported cases was observed, from 3,063 in December 2021 to 15,148 in January 2022.
- The MOH continues to test only test suspected cases and travelers who need COVID-19 test certificates. Despite an increase in cases, during the reporting period, no tests were conducted for those who had been in contact with COVID-19 patients.

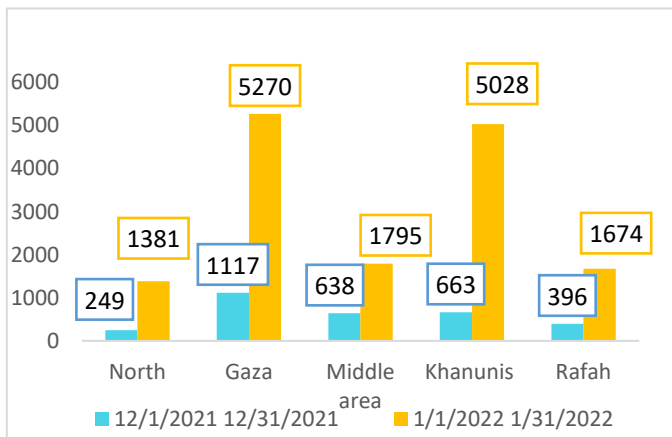


Figure 2: Weekly new COVID-19 cases in the Gaza Strip governorates

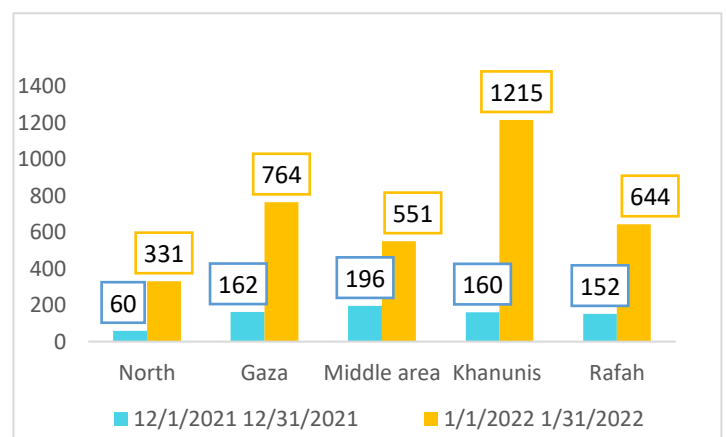


Figure 3: Weekly incidence of COVID-19 cases per 100,000 population in the Gaza Strip governorates

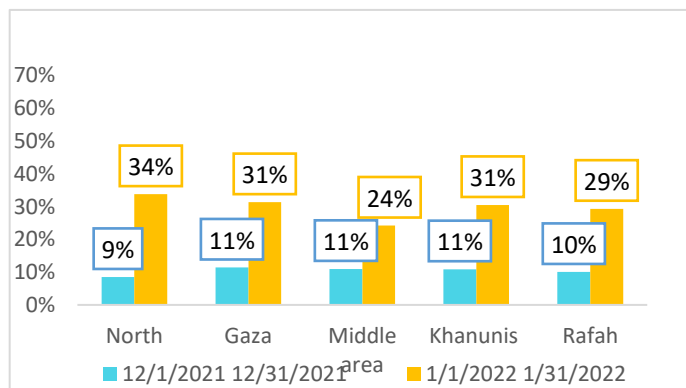


Figure 4: COVID-19 weekly positivity rates, distributed by district

DISTRIBUTION OF COVID-19 CASES BY AGE AND SEX

- A sharp increase in the number of cases reported across all age groups (Figure 5) was observed in January 2022. Since positivity rate is based on a purposive sample (suspected cases and travellers) rather than a random sample, the change in the epidemic curve in the coming months cannot be predicted. Like December, most diagnosed cases in January fell in the 18 to 50 years age group among both males and females (Figure 5).

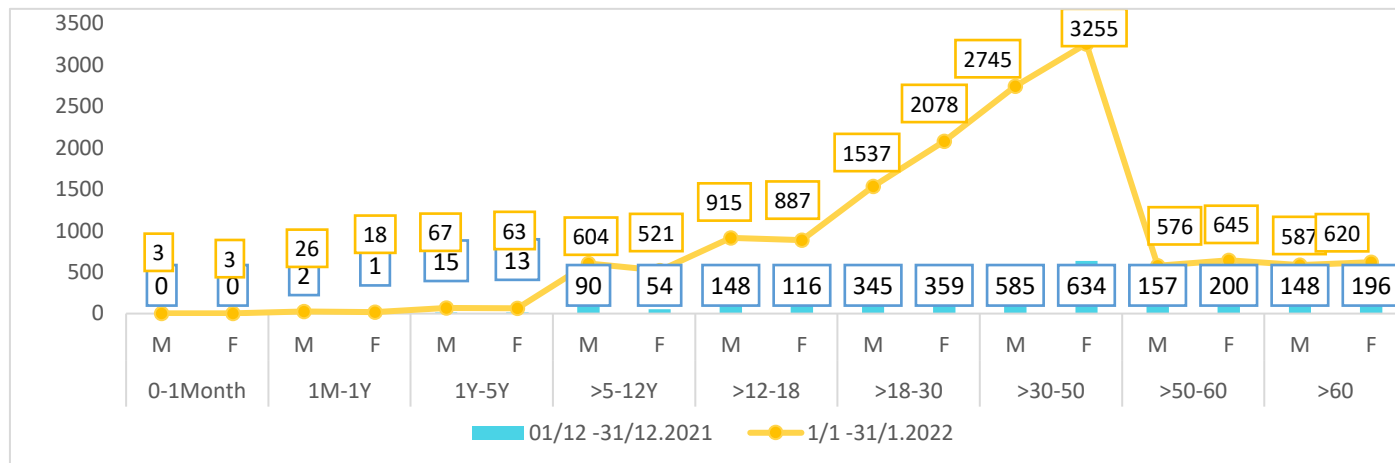


Figure 5: Weekly new COVID-19 case distribution, by age and sex

DISTRIBUTION OF COVID-19 DEATHS

- A total of 1,763 deaths with a cumulative COVID-19 fatality rate of around 0.9% have been reported in the Gaza Strip since the beginning of COVID-19 outbreak until the end of January 2022. Of this, 966 (55%) deaths have been recorded among males and 797 (45%) among females.
- Out of the 797 COVID-19 related deaths among females, 22 were among pregnant women or women who recently gave birth. It is worth mentioning that a total of 34 maternal mortality cases were recorded in 2021.
- Of the 3 maternal mortality cases in 2022, two were diagnosed with COVID-19.
- The number of COVID-19 related deaths between males and females remained largely similar during the reporting period.
- Most deaths were reported among the 90 years and older age groups (Figure 6), in both December 2021 and January 2022.

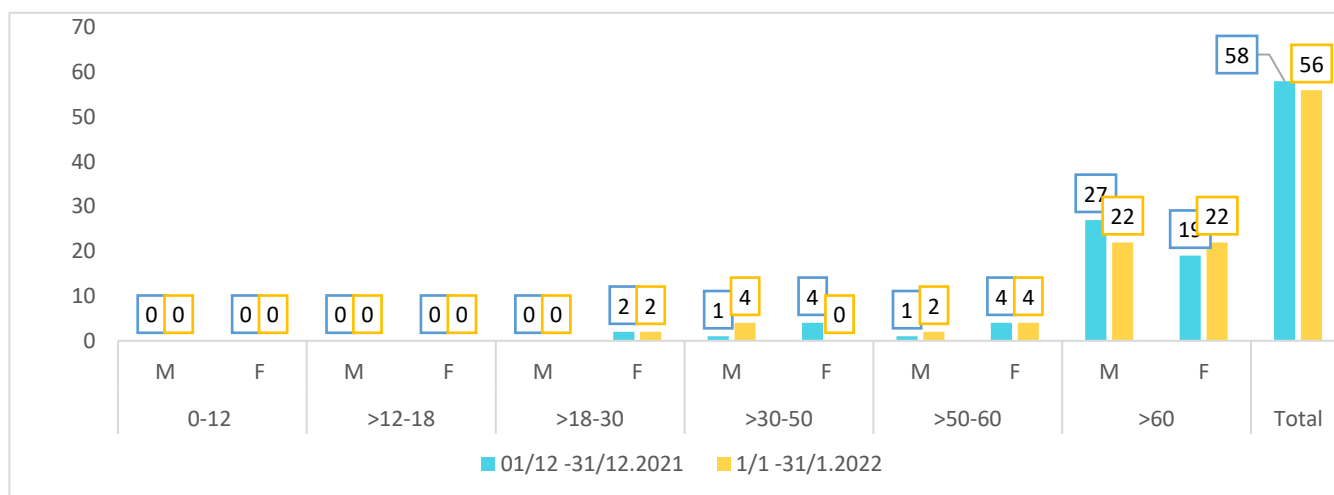


Figure 6: Distribution of COVID-19 deaths, by age groups and gender

DISTRIBUTION OF COVID-19 CASES BY SEVERITY

- Despite a sharp increase in the number of cases reported in January 2022 compared to December 2021, almost all cases were mild (99.3%) (Table 1), with a significant decrease in the proportion of critical and severe cases.
- The cumulative number of critical and severe cases admitted to hospitals decreased from 42 to 55 (Figure 7).

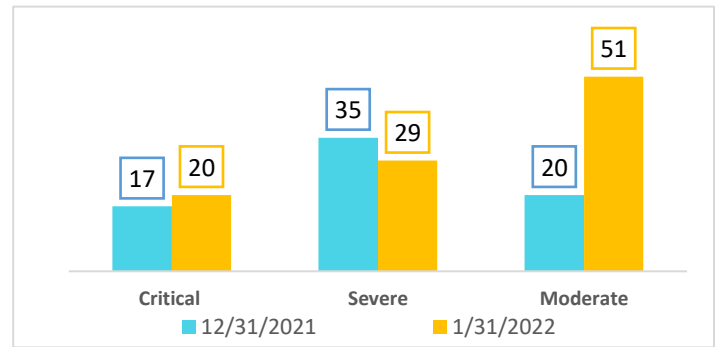


Figure 7: Classification of cumulative COVID-19 patients hospitalized, by severity

HEALTH SYSTEM CAPACITY (COVID-19 MANAGEMENT)

- The MOH has allocated 310 beds (45 for ICU cases, 150 for high dependency, and 115 for mild and moderate cases) to manage COVID 19 cases.
- The total bed occupancy rate increased from 16% in December to 25% in January, while ICU beds occupancy rate decreased from 20% to 19% (Figure 8).

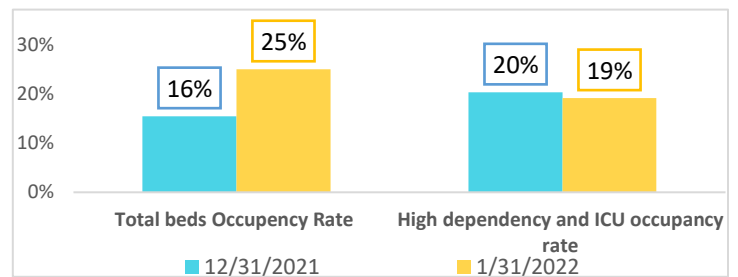


Figure 8: COVID-19 bed occupancy rate, classified by type of bed

COVID-19 INFECTION AMONG HEALTH WORKERS

- A sharp increase in number of infections among health work was observed during the reporting period, with 106 cases in December 2021 to 963 cases in January 2022. The highest increase was among men working as administrators (more than eight folds).
- The increase in infection among health workers could be linked to a lack of adherence to infection prevention and control (IPC) guidelines.

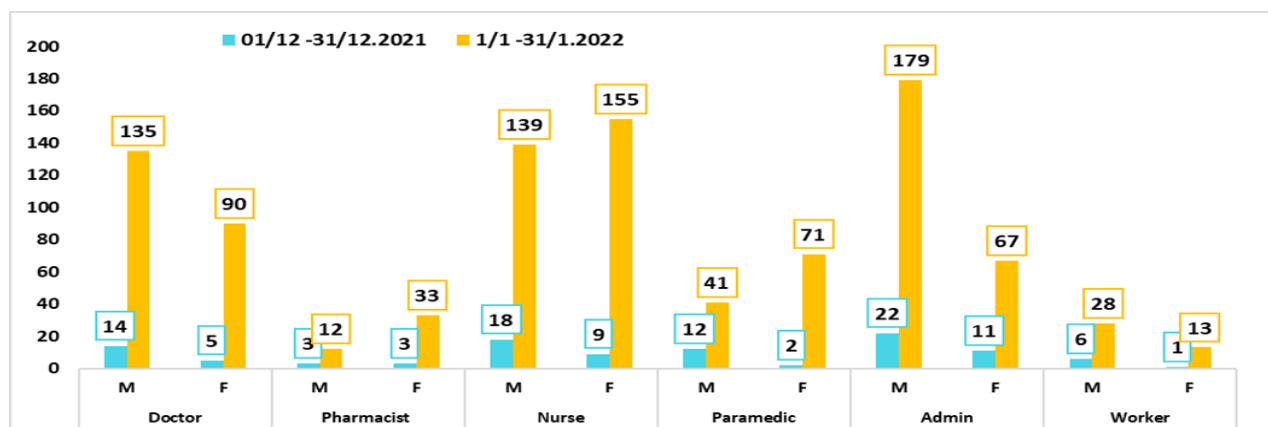


Figure 9: New COVID-19 cases reported among health workers, distributed by gender and profession

COVID-19 VACCINATION

- In January 2022, the MOH received 35,1200 doses of COVID-19 vaccines, bringing the total number of doses received since the beginning of the pandemic to 1,957,960 (Table 2).
- By the end of December 2021, a total of 545,090 people had received the first dose, 294,581 had received the second dose, and 28,351 the third.
- By the end of January 2022, a total of 587,795 people had received the first dose, 31,276 had received the second dose, and 46,918 the third. As of 1 February, 933,636 does remained available.

Type of vaccine	Quantity received	Remaining quantity
AstraZeneca	58000	0
Pfizer	1256210	788198
Sputnik V	60700	0
Sputnik light	211850	0
Sino-Pharm	20000	1063
Moderna	351200	144375
Total	1957960	933636

Table2: Types of vaccines delivered

CONCLUSIONS AND RECOMMENDATIONS

- Since the beginning of 2022, a sharp increase in COVID-19 cases, bed occupancy rate, and infection among health workers has been observed. This marks the peak of the fourth wave in the Gaza Strip.
- Despite a decrease in the percentage of severe and critical cases, there is a need to strengthen adherence to infection prevention and control among the community in general and health workers in particular.
- Continued engagement of communities, general public, and the private sector is needed to scale-up efforts to test, isolate, and provide care for confirmed cases (whether at home or in a medical facility) and identify, trace, quarantine, and support contacts of infected persons.
- Given the increase in hospitalization due to COVID-19, it is essential to maintain an optimum level of staff training, medicines stocks, and supplies to ensure quality of health care for patients.
- Particular attention should be paid to vulnerable populations infected with COVID-19, such as the elderly, patients with co-morbidities, and pregnant women. Timely hospital admission and management should be enhanced to prevent complications among patients.
- There is a need to review and strengthen COVID-19 case management protocols based on emerging evidence.
- Continuous tracking of the epidemiological map is needed to enhance insights into the transmission of cases.