

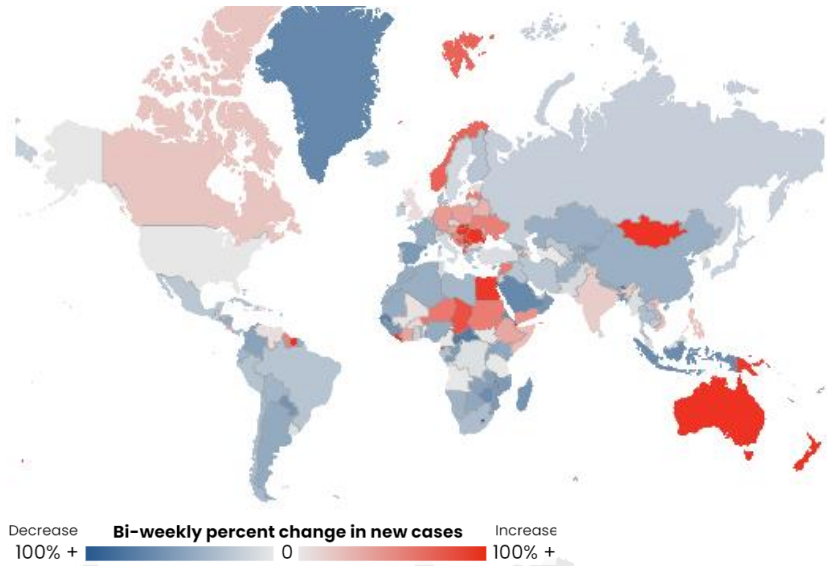
COVID-19 Update: Weeks 35-36



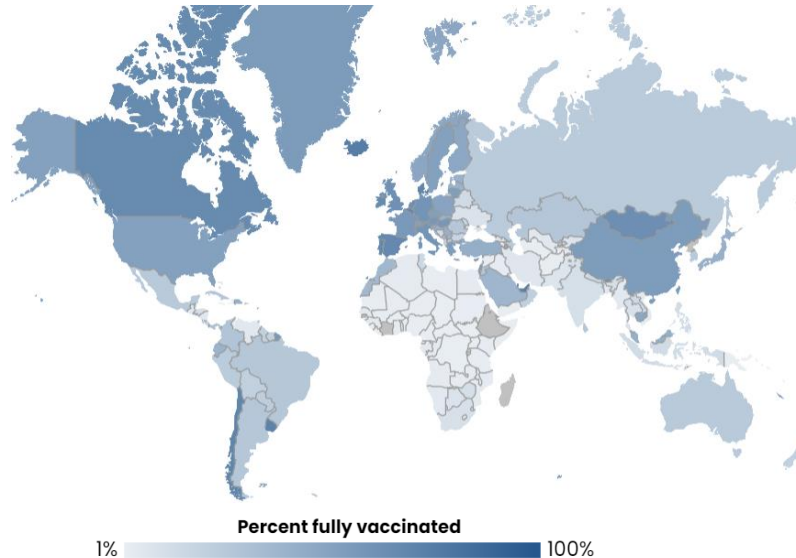
29 August – 11 September 2021

Bi-weekly COVID-19 updates from IFRC focusing on the epidemiological trends and updated evidence are shared through the [Health Help Desk](#). Additional external resources for deeper weekly or monthly subject-area analysis have also been added to the public access page on the Health Help Desk. Internal reports from the IFRC are available on [IFRC Go page for the COVID-19 pandemic](#) (including operational updates, immunization updates and updated figures by IFRC region).

Bi-weekly percent change in new cases

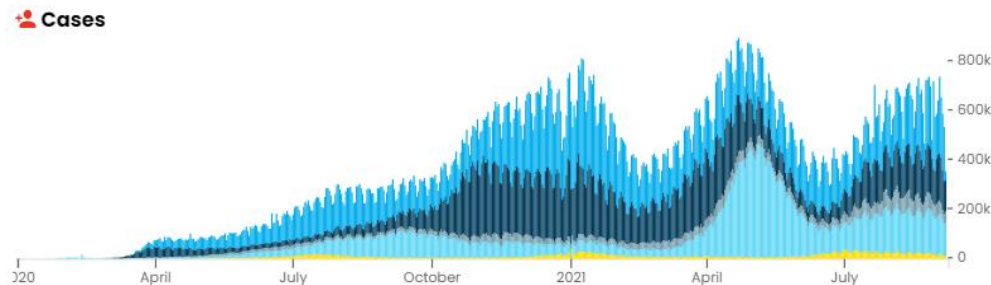


Percentage of population fully vaccinated



- **Global COVID-19 incidence for cases and deaths remained relatively stable over the last two weeks.**
- **Only 1.9% of those living in low-income countries have had at least one dose of the COVID-19 vaccine**
- An estimated 42% of the global population has received at least one dose of the COVID-19 vaccine, with an estimated 30% fully vaccinated.
- 84% of vaccines distributed have been administered in middle-high and high-income countries.

Situation update & Risk Assessment



For the past two weeks, the global incidence of COVID-19 has remained relatively stable. Many countries however continue to report increasing trends in cases or deaths. The recent surge has been largely linked to the more transmissible Delta variant of COVID-19 which is more transmissible and spread rapidly throughout the world. However, this will not be the last variant of concern and continued diligence and equitable vaccine distribution is essential to diminishing future waves. The Americas Region was the only region to report an increase in cases (by 19%) compared to the previous week, while the Americas and Europe region both reported an increase in deaths. Countries reporting the highest number of new COVID-19 cases in the past 2 weeks are the US, India, the UK, Iran, Turkey, the Philippines, Malaysia, Russia and Brazil.

Emerging Evidence Review

Secondary Impacts

- In a report released by the [Global Fund](#), COVID-19 has had a significant impact on the reduction of access to care for long-term treatment for patients with HIV and TB treatment. Since 2019 people reached by HIV prevention and treatment services has reduced by 11%, while HIV testing has dropped by 22%.

Vaccine Equity

- The [forecasted number of vaccines](#) available through the [COVAX facility](#) before the end of the year has been reduced by 25% from previous forecasts with 1.2 billion doses made available to 92 countries by 2022. This means that the goal of distributing 2 billion doses by the end of 2021 will not happen until the first quarter of 2022.

Vaccine Safety and Efficacy

- Recent study published in [Lancet Infectious Diseases](#) from Kings College London found that among those who became infected with COVID-19 post vaccination (about 0.2% of those included), vaccination reduced symptoms of long-covid by 49% and reduced the risk of hospitalization by 73%
- In a recent [pre-print study](#), researchers found some who were infected previously with SARS-CoV-2 and received the full vaccination dose of mRNA vaccine mounted an exceptionally strong immune response that was very effective against variants of concern, in addition to other variants of the SARS virus. The study still needs to undergo peer review, but appears to corroborate previous studies published in [Nature](#) and [Science](#) earlier in the year.

Long-COVID

- A recent study published in the [Lancet](#) found that vaccination cut the risk of long-covid symptoms by 50% among those who were vaccinated but reported breakthrough infection, but only around 5% of those individuals still reported persistent symptoms six weeks after COVID-19 infection. Additionally, the study from the UK found that hospitalizations were reduced by 73% and acute symptoms reduced by 31% for those who received 2 doses of the vaccine compared to those who became infected and were not vaccinated.
- A [pre-print study](#) of the long-term effects of COVID-19 on adolescents has found that among the children in England who were part of the study, ages 11–17-year-olds found that 2-14% of children reporting having symptoms 15 weeks after their initial diagnosis with a positive SARS-CoV-2 test. While still a public health concern, the proportion is lower than previously thought, and appears to be lower than many studies have found in adults.
- In a cohort study following patients discharged from hospitalization for COVID-19 in Wuhan, China for one year, researchers found that reported symptoms reduced from 68% of former patients reporting symptoms after 6 months to 49% of former patients reporting symptoms after 12 months. Most patients appear to return to good health following hospitalization and recovery from COVID-19, however the cohort reported overall poorer health status than the non-hospitalized control group ([Lancet](#)).

Variants of Concern or of Interest & Implications

- In a [pre-print study](#) based in China, those infected with the Delta variant of SARS-CoV-2 were found to have a higher viral load and higher risk of pre-symptomatic spread than non VOC. The study estimates the mean latent period (the time between being exposed and becoming infected) to be around 4 days, with the incubation period estimated to be around 5.8 days. The researchers also found an estimated just under 74% of infections occurred prior to the onset of symptoms. The study also found an increased risk of transmission of the virus if the index case in a cluster was not fully vaccinated compared to if they had received the full vaccine regimen.

Summary impacts of Variants of Concern designated by WHO (referenced from [WHO Situation Report #55](#))

Name/ Label	Alpha Detected in 194 countries	Beta Detected in 141 countries	Gama Detected in 92 countries	Delta Detected in 177 countries
Transmissibility	Increased transmissibility and secondary attack rate	Increased transmissibility	Increased transmissibility	Increased transmissibility and secondary attack rate.
Disease Severity	Increased risk of hospitalization, possible increased risk of severity and mortality	Not confirmed, possible increased risk of in-hospital mortality	Not confirmed, possible increased risk of hospitalization	Increased risk of hospitalization
Risk of reinfection	Neutralizing activity retained, risk of reinfection remains similar	Reduction in neutralizing activity reported; T cell response elicited by D614G virus remains effective	Moderate reduction in neutralizing activity reported	Reduction in neutralizing activity reported

Practical Tools/ implications for COVID-19 preparedness & Response strategies

- A recent real-world study by Yale and Stanford in Bangladesh, found that a free mask distribution and education campaign along with modelling by officials led to a 42% increase in mask wearing and 5% reduction of symptomatic cases among those who received cloth masks and 12% reduction of symptomatic cases in villages who received surgical masks. This is compared to 13% increased wearing of face coverings in control villages. The impact was even greater among those 60 years and older with a 35% reduction of symptomatic cases in intervention areas. Prior to peer review and publication, the full study has been made to the public on [Innovations for poverty Action](#).
- A recent study found that jail decarceration policies in the United States as a part of other anticontagion policies (such as restricted nursing home visitations, school closures, and mask mandates) can play a role in preventing large outbreaks in prisons which spillover into surrounding communities. Reducing incarceration populations by 80% were associated with an estimated 2% reduction in daily COVID-19 growth rates ([JAMA](#)).

- A study from Saudi Arabia published in [PLOS ONE](#) found that while easing lockdown measures in the country negatively impacted epidemic growth, the amount that they impacted other social and economic may be considered greater than the impact on public health in some contexts (an estimated >378 thousand USD per life saved during the study period).

Surveillance

- A cross-sectional study published in [NEJM](#) from the US has revealed that, as with several other countries, there was a delay in the reporting of COVID-19 cases and deaths in Nursing homes at the beginning of the pandemic, with the impact being much more severe than originally noted, potentially having a greater impact on local outbreaks. Additionally, an estimated 43.2% of all COVID-19 cases and 39.6% of all COVID-19 deaths in nursing homes were not reported up from state to federal databases.

References

Internal

[IFRC Go COVID-19 response](#)

- Dashboards and operational reports
- Monthly vaccine updates and highlights

[IFRC Health Help Desk](#)

- Webinars
- Operational Guidance related to the health response to COVID-19

External

[ALNAP COVID-19 Response Portal](#)

[British Medical Journal Coronavirus Hub](#)

[Centers for Disease Control \(CDC\) Morbidity and Mortality Weekly Report \(MMWR\)- COVID-19 Reports](#)

[Johns Hopkins Center for Health Security](#)

- Particularly the [COVID-19 Updates](#) (weekly)

[Journal for American Medical Association COVID-19 focus](#) (JAMA)

[Nature SARS-COV-2 Review](#)

[New England Journal of Medicine COVID-19 page](#) (NEJM)

[Our World in Data](#)

[Prevent Epidemics In-Depth Science Reviews](#)

[UNDP Vaccine Affordability](#)

[WHO COVID-19 Dashboards](#)

[WHO Epidemiological Situation Reports](#)