

## Coronavirus Disease (COVID-19) Pandemic

### CARPHA Situation Report No. 37 - April 24, 2020

#### Summary

This is an update to the Situation Report published on April 22, 2020, in relation to the outbreak of COVID-19.

To date, there are 9,891 cases in 33 countries/territories (including 1174 cases in 24 CARPHA Member States), in the Caribbean Region. The risk of further importation of cases to the rest of the Caribbean remains **Very High**.

The Regional Coordinating Mechanism for Health Security (RCM-HS), is actively working with Heads of Government and regional partners on a collective approach to the COVID-19 response.

*Countries are strongly urged to strengthen their health sector response and move to a state of readiness and rapid response.*

#### NEW in this report

- [Surveillance and Epidemiology in 24 Member States](#)
- [Link to CARPHA Testing Process for COVID-19 Video](#)

#### Numbers at a Glance\*

*Clinically diagnosed and laboratory confirmed cases*

##### Globally

2,626,349 cases (155,186 new)

##### In the Caribbean Region

33 countries, areas, or territories (0 new)  
9,891 cases (793 new)  
1,658 recovered (357 new)  
459 deaths (15 new)

##### Rest of the World

179 countries, areas, or territories and Other\*\* (0 new)  
2,616,458 cases (154,393 new)  
747,213 recovered (53,190 new)  
181,481 deaths (12,919 new)

\*\*Persons on board the Diamond Princess Cruise Ship harboured in Yokohama, Japan

#### WHO Risk Assessment

China	Very High
Globally	Very High
Caribbean	Very High

\*CARPHA is providing updated reports on cases in CARPHA Member States as information becomes available through local sources. Caribbean numbers presented in this report may not necessarily be reflected in the WHO totals.

#### Situation Update

Up to 33 countries in the Caribbean region have reported the importation of at least one confirmed case of COVID-19. The risk of further importation of cases to the Caribbean Region remains **Very High**.

The aim for all countries now, is to **stop transmission, prevent the spread of the virus and save lives**. Based on the Draft CARPHA Health Sector Response Guidelines for COVID-19 circulated to Member States, most countries are encouraged to implement actions in keeping with the Initial or Targeted Action in the Response Phase.

## Overview of COVID-19 Cases

### COVID-19 in the Caribbean

*Since the previous report on April 22, 2020, no new countries reported their first confirmed case of COVID-19 within the Caribbean region. Additional cases, however, were confirmed in 17 countries, bringing the region's total confirmed cases to 9,891 in 33 countries/territories; 24 (72%) of these are CARPHA Member States with 1174 cases to date. This new total represents an 8% increase in the numbers of confirmed cases. Thirteen (13) additional deaths were also recorded, bringing the total numbers of deaths to 459.*

### COVID-19 Globally

The data contained in Table 1 below are obtained from data reported by the WHO, supplemented by other sources – (Reference 1 and 2 in Table 1).

As of April 24, 2020, the WHO reported 2,626,321 cases of patients with COVID-19. Outside of China, 212 countries, areas or territories have confirmed at least one case among travellers exposed while abroad and/or person-to-person contact. No new countries have reported their first confirmed case of COVID-19 since the last Situation Report on April 22, 2020. See Table 2 below for more details on cases, deaths and recoveries. The number of cases recovered since our last report was not available.

**Table 1: Countries or Territories with reported cases of COVID-19, April 24, 2020**

Region	Country/Territory	Cases	# new cases	Deaths	Recovered	% of cases still active <sup>¥</sup>
<b>Region of the Americas</b>						
<b>Caribbean</b>	Dominican Republic	5,543	499	265	674	83.1
	Puerto Rico	1,416	118	48	0	96.6
	Rest of the Caribbean*	1,351	70	75	460	60.4
	Cuba	1,235	98	43	365	67.0
	Martinique	170	7	14	77	46.5
	Guadeloupe	148	0	12	82	36.5
<b>Americas</b>	Rest of the Region**	985,647	69,427	50,126	142,526	80.5
<b>Other Regions</b>	Western Pacific Region**	139,782	3,511	5,869	99,355	24.7
	European Region**	1,284,216	64,730	116,523	411,656	58.9
	South-East Asia Region**	38,572	4,660	1,554	8,762	73.3
	Eastern Mediterranean Region**	149,295	9,946	6,608	77,632	43.6
	African Region**	18,234	2,119	788	6,637	59.3
<b>Other</b>	International conveyance (Diamond Princess Cruise Ship)	712	0	13	645	7.6
	<b>Total</b>	2,626,321	155,185	181,938	748,871	64.6

Region	Country/Territory	Cases	# new cases	Deaths	Recovered	% of cases still active <sup>¥</sup>
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<sup>¥</sup> Active cases = Total cases – (Number of cases recovered + Number of deaths)

<sup>\*\*</sup> For full details on all countries' data visit Sources listed below. Numbers are updated throughout the day and may vary from what is listed at time of publishing.

Sources: (1) WHO Situation Dashboard Accessed at 8:20am 24 April 2020. Available from: <https://who.sprinklr.com/>

(2) Johns Hopkins University's Centre for Science and Engineering Accessed at 8:25am. 24 April 2020. Available from:

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

<https://www.arcgis.com/home/webmap/viewer.html?useExisting=1&layers=c0b356e20b30490c8b8b4c7bb9554e7c&layerId=1>

Note. Cases reported between February 13-19, 2020 include both laboratory-confirmed and clinically diagnosed cases for the Hubei province. All other dates shown only include laboratory-confirmed cases.

N.B. The WHO notes that due to a retrospective data consolidation exercise, some numbers may not reflect the exact difference between the previous numbers reported and the numbers reported today.

## Caribbean Regional Coordination

CARPHA is leading the regional health response to COVID-19, in keeping with its Intergovernmental Agreement (IGA) mandate from CARICOM and recommendations from the COHSOD-Health Working Group on Regional Coordination for Response Management. As such, CARPHA activated its Incident Management Team-Emergency Response (IMT-ER) on January 21, 2020 and convened the Regional Coordinating Mechanism for Health Security (RCM-HS). Figure 1 depicts a timeline of regional events since the outbreak was detected in December 2019. CARPHA continues to work with its partners and countries, on a harmonized regional response.

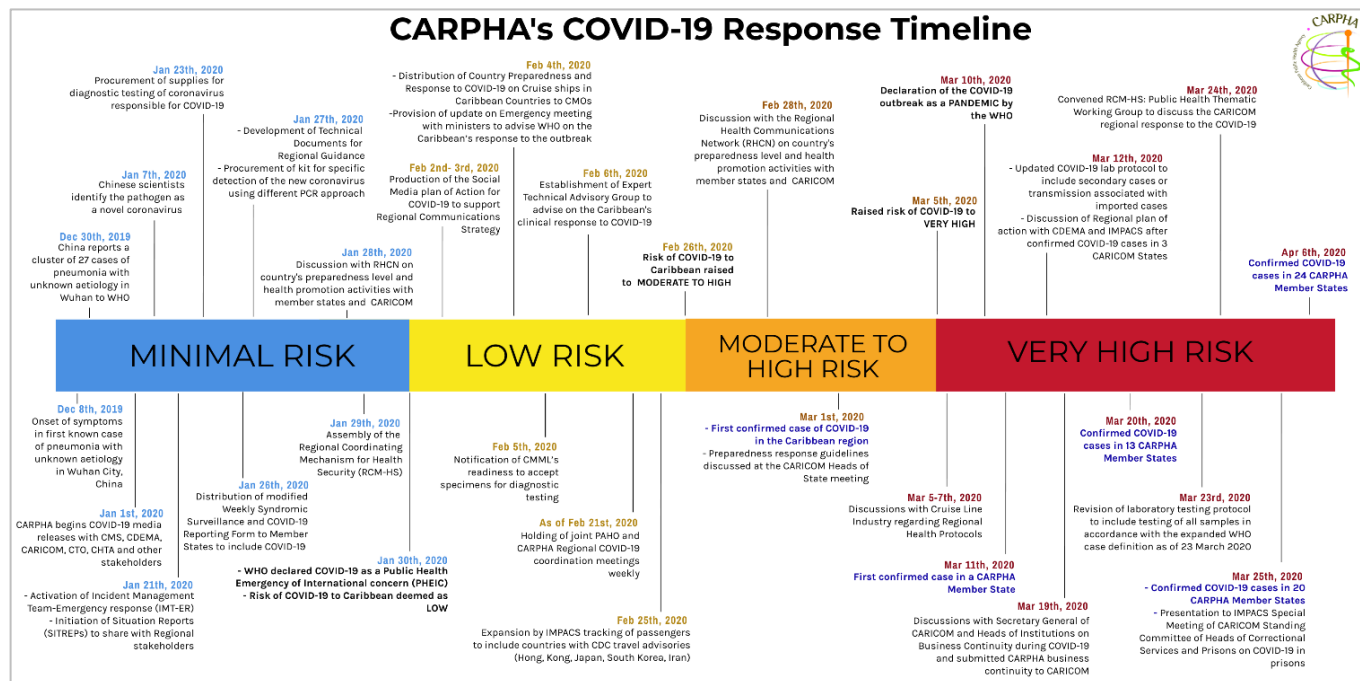


Figure 1: CARPHA COVID-19 Response Timeline (December 2019 – April 2020)

## Caribbean Public Health Agency Response

### CARPHA's Mission

CARPHA's aim is to work with regional and international health partners to respond to this public health threat and provide timely advice and assistance to Member States and stakeholders.

### Governance

CARPHA's Incident Management Team – Emergency Response (IMT-ER) is leading the health response in keeping with CARPHA's mandate from the Intergovernmental Agreement (IGA). The IMT-ER produces Situation Reports three times weekly. As of March 31, 2020, CARPHA's IMT-ER meets three times weekly to discuss CARPHA's COVID-19 response and schedules are adjusted and guided by COVID-19 Incident Action Plan.

CARPHA's IMT-ER in their meeting on April 24, 2020, provided the following updates:

- Applicants from the Call for Experts have been shortlisted for the Emergency Roster.
- CARPHA's IMT-ER have reviewed and tested their equipment for deployment to support Member States.

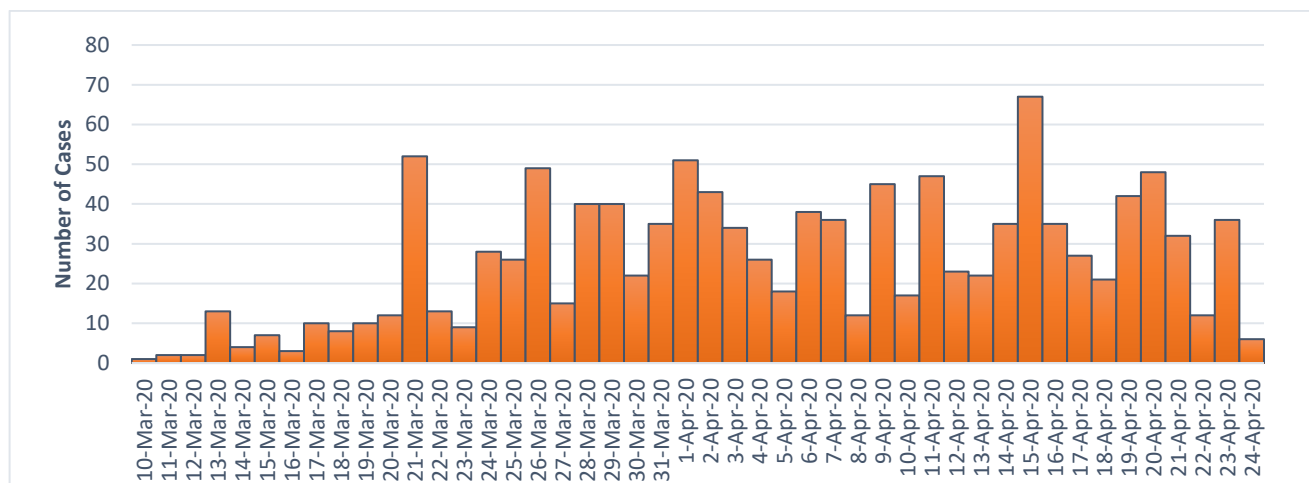


**Picture 1:** Dr Laura Lee Boodram (Head, Vector Borne Disease) and Mr Peter Williams (Technical officer, Emergency and Response), examine and test field deployment equipment at CARPHA's Main Campus, Trinidad, and Tobago, ahead of the 2020 Atlantic Hurricane Season

### Surveillance and Epidemiology in 24 Member States

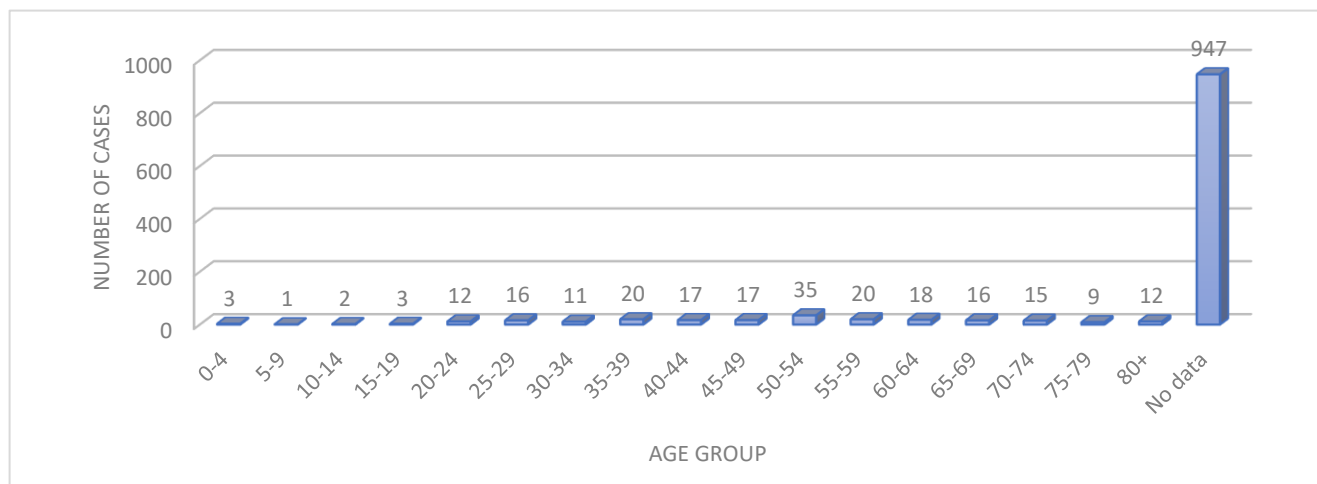
Data submitted officially by Member States to CARPHA Surveillance System (CMS), official media releases from Ministry of Health or other official Country sources available in the public domain, have been used to inform the assessment of the current situation in the Caribbean Region.

As of April 24, 2020, there have been 1,174 cases confirmed from CMS, the majority reported on April 15, 2020 (Figure 2).



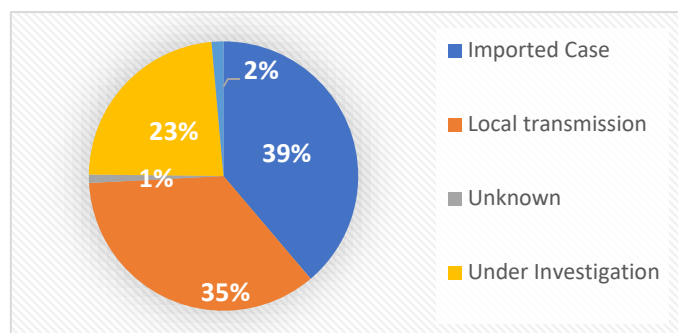
**Figure 2: Epidemic Curve of confirmed cases - Member States as of 24 April 2020**

For the cases for which data was available, the majority were aged 50 years and over. There was no age provided for most cases (Figure 3).



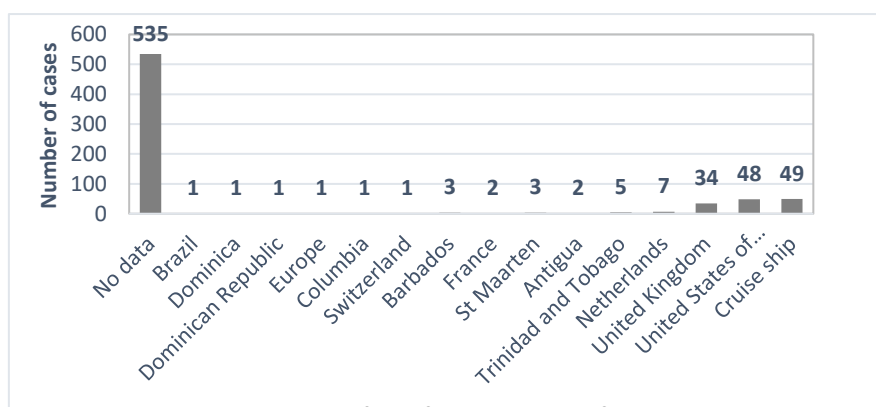
**Figure 3: Reported Confirmed Cases of COVID-19 by age group in Member States**

Among cases for whom a source of infection was reported, 39% were imported; and 35% appeared to be close contacts (local transmission) of a known imported case (Figure 4).

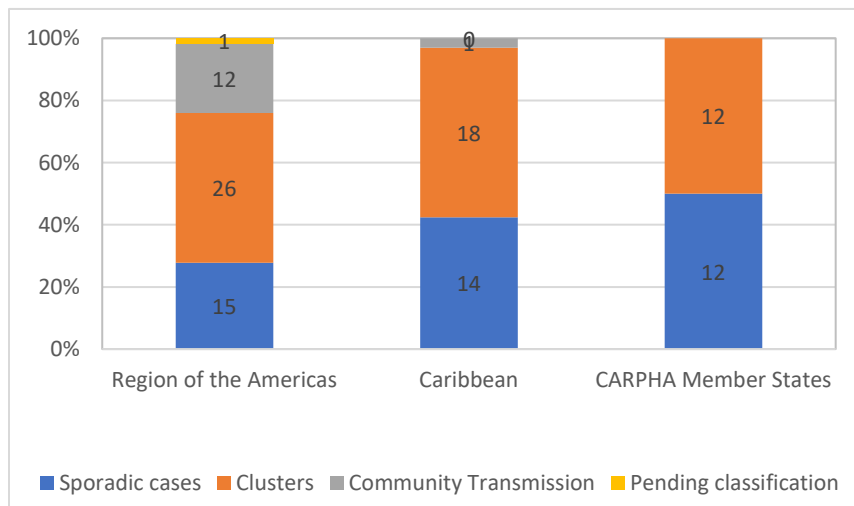


**Figure 4: Percentage of Confirmed Cases of COVID-19 by Transmission Category in Member**

The source was not identified for the vast majority of imported cases reported. Data available identified cruise ships, the United States of America and the United Kingdom as the top three locations where cases reportedly acquired their illness (Figure 5).



**Figure 5: Percentage of Confirmed Cases of COVID-19 by Travel History in Member States**



Among the 24 Member States, 50% (12/24) have been classified as having sporadic cases, 50% (12/24) have reported clusters, based on data received by WHO from national authorities by 10:00 CEST, April 23, 2020.<sup>1</sup>

**Figure 6: Category of Countries by Transmission Classification**

<sup>1</sup> WHO (2020). Coronavirus disease 2019 (COVID-19) Situation Report – 94 [https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200423-sitrep-94-covid-19.pdf?sfvrsn=b8304bf0\\_4](https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200423-sitrep-94-covid-19.pdf?sfvrsn=b8304bf0_4) accessed 24 April 2020.

**Sporadic cases:** Countries/territories/areas with one or more cases, imported or locally detected.

**Clusters of cases:** Countries/territories/areas experiencing cases, clustered in time, geographic location and/or by common exposures.

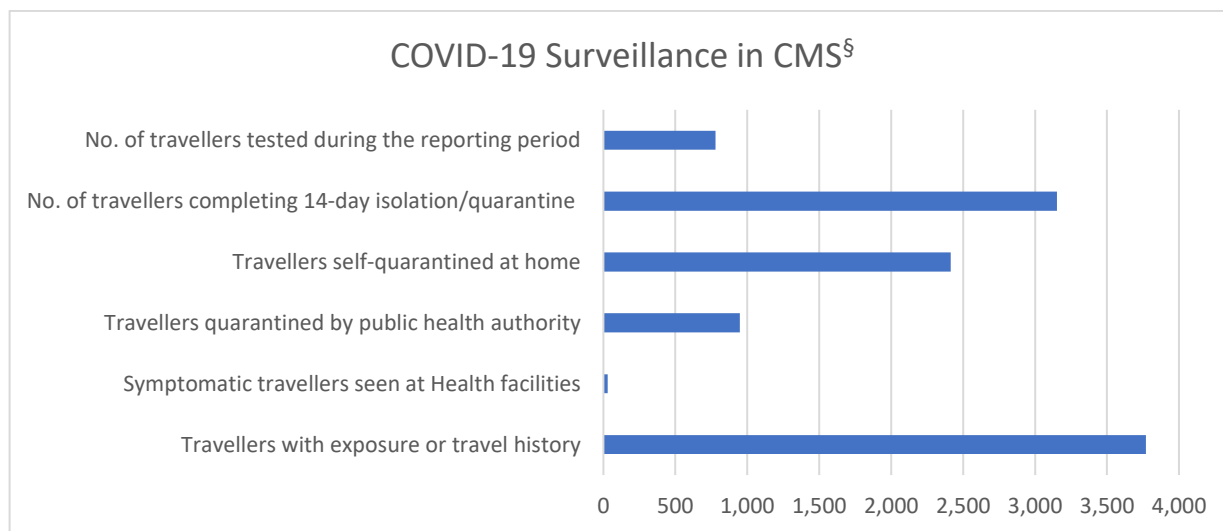
**Community transmission:** Countries/area/territories experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:

- Large numbers of cases not linkable to transmission chains
- Large numbers of cases from sentinel lab surveillance
- Multiple unrelated clusters in several areas of the country/territory/area

### COVID-19 Line listing and Syndromic surveillance data

- CARPHA has a mandate to carry out surveillance of infectious diseases in the Region. Since the start of the outbreak, few countries have submitted their line listings for COVID-19 cases. Member States are reminded to **send anonymous line listings of confirmed cases of COVID-19 to CARPHA weekly**, by emailing [carpha-epidemiology@carpha.org](mailto:carpha-epidemiology@carpha.org).
- CARPHA has produced various technical guidelines including algorithms to assist CARPHA Member States (CMS) to triage and manage suspected cases within their borders and in clinical settings. These are summarised at the end of this document and can be accessed from CARPHA website at <http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus>.

A summary of COVID-19 surveillance data received from Member States is presented in Figure 7<sup>§</sup>.

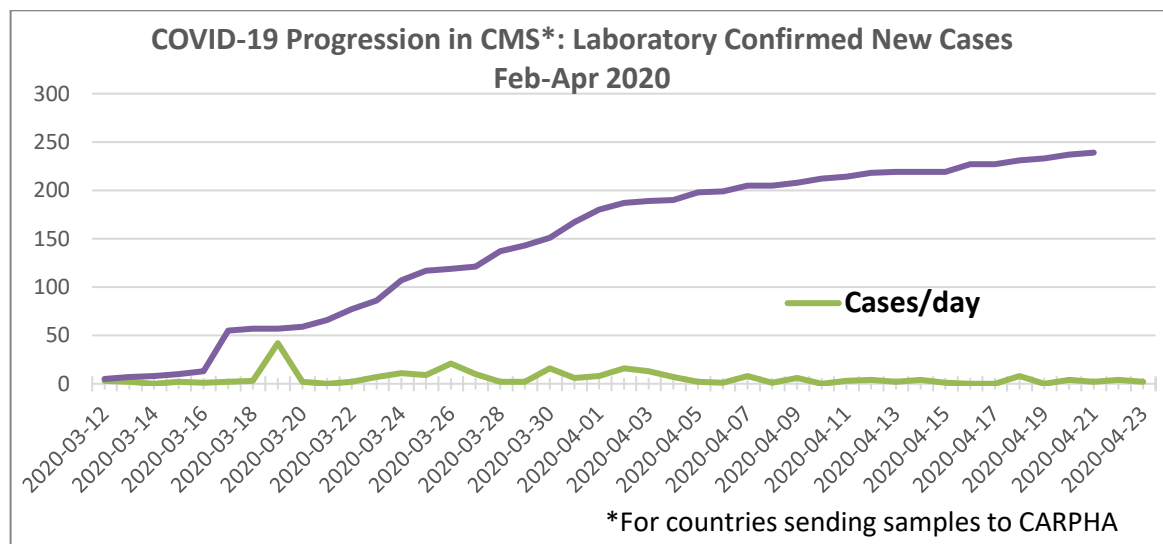


**Figure 7: CARPHA Surveillance received from Member States, as of April 24, 2020**

<sup>§</sup> To date five Member States reported data for EPI-Week 15. \* Not reported. No. refers to the number of persons reported in EW-X; Cum. refers to the number of persons to date, i.e. EW 1-X.

## Laboratory

Since February 10 and as of April 23, 2020, CARPHA has received 2,529 samples from 14 CMS, 314 (13.48%) of which have tested positive since the start of the outbreak, 239 results correspond to new cases. Figure 8 shows the progression of COVID-19 cases which have been confirmed in CMS from February – April 2020.



**Figure 8: COVID-19 Progression in CMS: Laboratory Confirmed Cases, February – April 2020**

- On April 22, 2020 CARPHA released a video titled: **The CARPHA Testing Process for COVID-19**, which highlights the process from sample receipt through testing and result dissemination. Click the link to view <https://youtu.be/HPWuf1z3QWM>
- On April 16, 2020, CARPHA through the Caribbean Public Health Laboratory Network (CariPHLN), hosted a virtual discussion on COVID-19: Considerations for the Medical/Hospital Laboratory for medical laboratory professionals and CariPHLN members. This virtual training package for medical and hospital laboratories was attended by more than 260 participants across the region.
- On April 15, 2020 CARPHA issued a statement on CARPHA's Role in COVID-19 Testing during a press conference held by the Ministry of Health, Trinidad and Tobago. Click here for more details
  - [CARPHA's Role in COVID-19 Testing](#)
  - [Statement by Dr. Lisa Indar at Trinidad Ministry of Health Media Briefing April 15, 2020](#)
- The Turnaround time (TAT) of PCR results, a quality indicator of laboratory performance is on average to date 20 h 59 m. This is currently faster than the set TAT for COVID-19 PCR tests (24-48 h).



## Communication and Information

- **On April 21, 2020**, Dr. Joy St. John, participated in a webinar discussion focused on trends and impacts on social, economic and security policies. The webinar was hosted by the Florida International University. **COVID-19 & the Caribbean** is part of the FIU's series on the current pandemic. The video can be viewed [here](#).
- **On April 14, 2020** members of CARPHA's staff attended PAHO's virtual Media conference.
- **On April 9, 2020** Dr. Joy St. John joined the Pan American Health Organization (PAHO) and the Caribbean Disaster Emergency Management Agency (CDEMA) to discuss COVID-19: Current Status/Future Trends. The webinar was hosted by the Caribbean Broadcasting Union (CBU).
- CARPHA Communications Unit continues to produce social media products for various audiences and has maintained an active social media presence on Facebook, Instagram and Twitter.
- The latest media release, infographics and other relevant guidelines are available on CARPHA's website. Available from: <http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus>.



## Logistics and Planning

- **April 23, 2020:** Dr. Gonzalez-Escobar (Head, Laboratory Services and Networks) and Ms. Wallace-Sankarsingh (Biorisk Manager) represented CARPHA as observers to the Regional Security System (RSS) Table Top Exercise "COVID-19 Security Response" to raise the awareness of the Security Chiefs/Heads of Security Agencies in participating countries to current and emerging challenges associated with COVID-19.
- **April 21, 2020:** Dr. Shelley Rodrigo (FELTP Coordinator) and Ms. Wallace-Sankarsingh (Biorisk Manager) participated in a demonstration with IMPACS for an online training platform (CBSI-Connect) which will be used to conduct training in Personal Protective Equipment for regional and national front line security service providers.
- CARPHA is expanding its Human Resource skills bank to facilitate, as the need arises, the rapid recruitment and deployment of short-term emergency response consultants to CARPHA and its Member States ([see CARPHA - Call for Experts: COVID-19 Flyer](#)). Interested applicants are invited to submit an expression of interest and CV by email to [HRM@CARPHA.ORG](mailto:HRM@CARPHA.ORG) along with the completed [Emergency Response Deployment - Skills List document accessible](#) on CARPHA website.

## Stakeholder Engagement

CARPHA is working closely with various stakeholders for a coordinated regional response, and as such has engaged with stakeholders in multiple ways, including the following:

- **April 24, 2020:** Dr. St. John and Dr. Indar attended 11th Meeting of the CDEMA's Technical Advisory Committee (TAC). Dr. St. John gave a presentation on COVID-19 and regional coordination.
- **April 23, 2020:** Dr. St. John and Dr. Indar attended the Fifth Special Emergency Meeting of COHSOD. Dr. St. John presented the policy recommendations for a CARICOM Coordinated approach for the Development of a Common CARICOM Protocol on Health – for COVID-19 prepared by the Health Working Group, and provided updates on the COVID-19 situation in the Caribbean, WHO SOLIDARITY Trial.
- **April 22, 2020:** Dr. St. John participated in the WHO Steering Committee meeting on the WHO Solidarity Trial.

CARPHA continues its ongoing communications and meetings with the Council for Human and Social Development, CARICOM, Chief Medical Officers, Caribbean Disaster Emergency Management Agency, PAHO regional representatives, private organizations, public associations, regional agencies and organizations to advise on regional health response, guidelines and coordination to COVID-19 for proactive actions for developing situation in the Caribbean. *A full list of CARPHA actions to date are available.*

## Way Forward

CARPHA is reminding Member States to urgently **ramp up their disease surveillance efforts for acute respiratory infections/severe acute respiratory infections both at the primary and secondary care levels.**

**Various trials are underway to test drugs for use in treating COVID-19 cases. Discussions are underway in the region to determine participation in the WHO SOLIDARITY trial.**

CARPHA is working with technical experts across the Region to provide up-to-date guidance and technical advice to CMS. CARPHA remains committed to providing support and guidance to Member States on how to strengthen their health systems response should there be person-to-person transmission in the Caribbean.

CARPHA continues to work through the Regional Coordination Mechanism for Health Security and the various regional coordination efforts to engage and support Member States, regional and international partners for the health security of the region.

CARPHA recognises there is need for accurate information in this time of uncertainties. CARPHA documents can be accessed as a reliable source of information from our [website](#). Available on the website are **Technical Documents, Media Releases and Communications Material.**

## References

- WHO, 2020. Laboratory testing for coronavirus disease (COVID-19) in suspected human cases. Interim guidance. 19 March 2020. Available from: <https://www.who.int/publications-detail/laboratory-testing-for-2019-novel-coronavirus-in-suspected-human-cases-20200117>
- WHO, 2020. Clinical management of severe acute respiratory infection (SARI) when COVID-19 disease is suspected. 13 March 2020. Available from: [https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-\(ncov\)-infection-is-suspected](https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-(ncov)-infection-is-suspected)
- WHO, 2020. National capacities review tool for a novel coronavirus. 9 January 2020. Available from: <https://www.who.int/internal-publications-detail/national-capacities-review-tool-for-a-novel-coronavirus>
- WHO, 2020. Coronavirus disease (COVID-19) advice for the public: Myth busters Available from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>