



**Ministry of Health
& Wellness**
Cayman Islands Government



Public Health Spotlight

Communicable and Non-Communicable Diseases

Issue 8 | 21 July 2022

COVID-19 - Epidemiological Week 28

10 - 16 July 2022 (Data as of 18-07-2022)

International Situation

Internationally, the reported number of new COVID-19 cases has continued to increase by 6% from the previous week. WHO Director reported COVID-19 cases internationally have doubled in the past six weeks.

Cayman Islands Local Trends

Locally in Cayman Islands the COVID-19 indicators generally show a small decrease over the past Epi Week. The case rate has decreased by 5% from 616 cases per 100,000 to 585 cases per 100,000 population, with a decrease in newly confirmed cases to 406 from 427. Testing has decreased by 3% which is a smaller decline than in previous weeks.

Hospital Admissions

Nine new hospital admissions were registered during Epi Week 28, an increase from two admissions in the previous week. Of the nine new admissions reported, four were admitted due to COVID-19 morbidity and five were detected on screening. A total of 12 patients required inpatient treatment, which increased from six in the previous week.

Vaccination

During Epi Week 28, a total of 108 adults received a COVID-19 vaccine (40 first doses and 68 second doses) and 89 paediatrics received a COVID-19 vaccine (36 first dose and 53 second dose).

Key Message

Incidence has remained similar to the previous weeks with an increase seen this week in hospitalisations.

COVID-19 - Epidemiological Week 28 Statistics

Table 1: COVID-19 case numbers

Indicator	Current EpiWeek	Previous EpiWeek	Percentage change	Total
Newly confirmed cases ¹	406	427	-5%	28,784
Case rate ² per 100,000 population	585	616	-5%	41,505
Daily average (7-day rolling average)	58	61	-5%	
Number of PCR tests conducted	870	896	-3%	
New positive PCR test results	395	425	-7%	28,784
Test positivity ³	45%	47%	-4%	-
Testing rate per 100,000 population	1,255	1,292	-3%	-
Deaths	0	0	0%	29

¹Newly confirmed cases (PCR) reported to Public Health with a sample collection date between 00:00 to 23:59 on 10 - 16 July 2022

²Case Rate = proportion of persons who tested positive over population standardized to 100K population (New cases/total population)*100,000

³Number of new positive PCR results over total number of PCR tests done (new positive PCR results/total number of PCRs conducted)*100

Figure 1: Total COVID-19 cases since March 2020 by specimen date

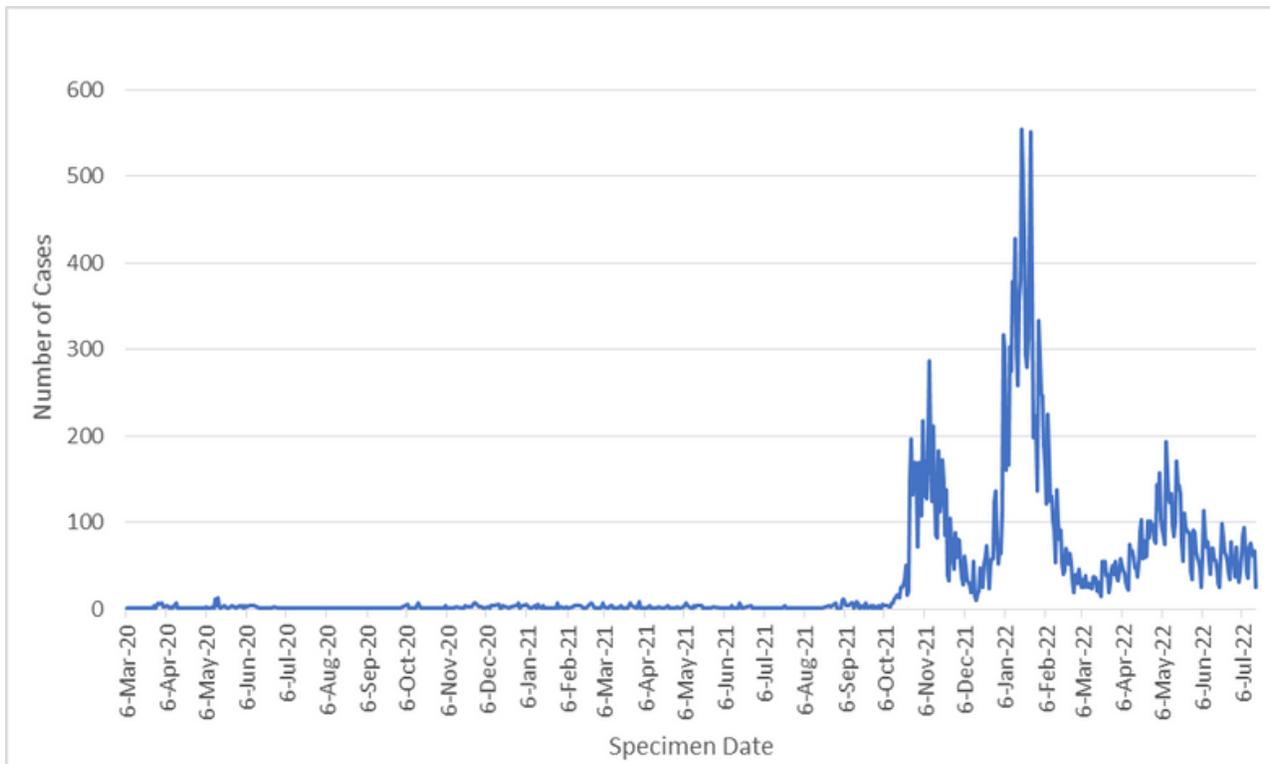
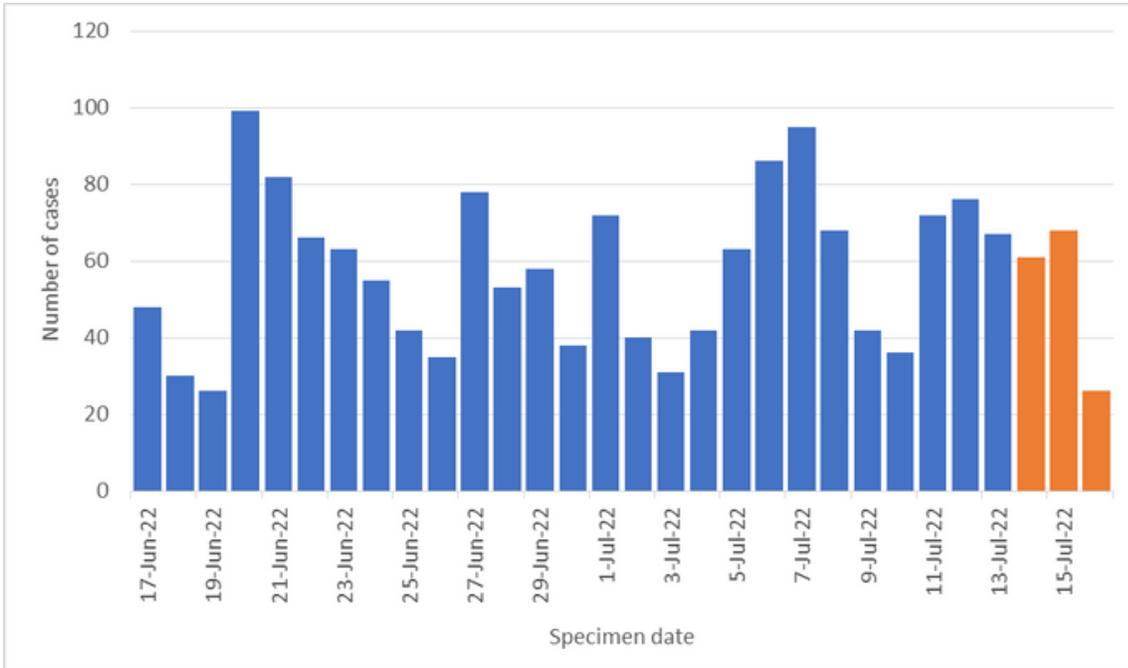
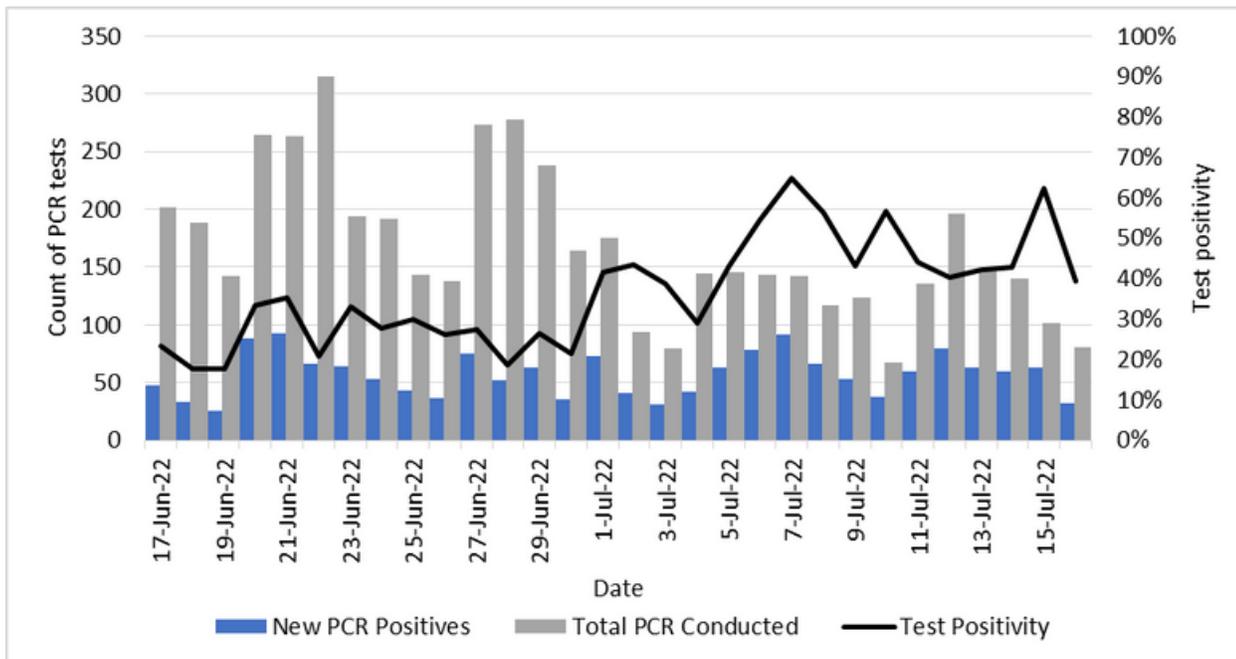


Figure 2: Number of COVID-19 cases in the last 30 days by specimen date



Orange bars indicate PCR results are pending thus figures may change.

Figure 3: Number of PCR tests conducted, new PCR positive results and test positivity rate for the last 30 days by test date



Data refers to the percentage of patients who tested positive via PCR in the prior 7-days.

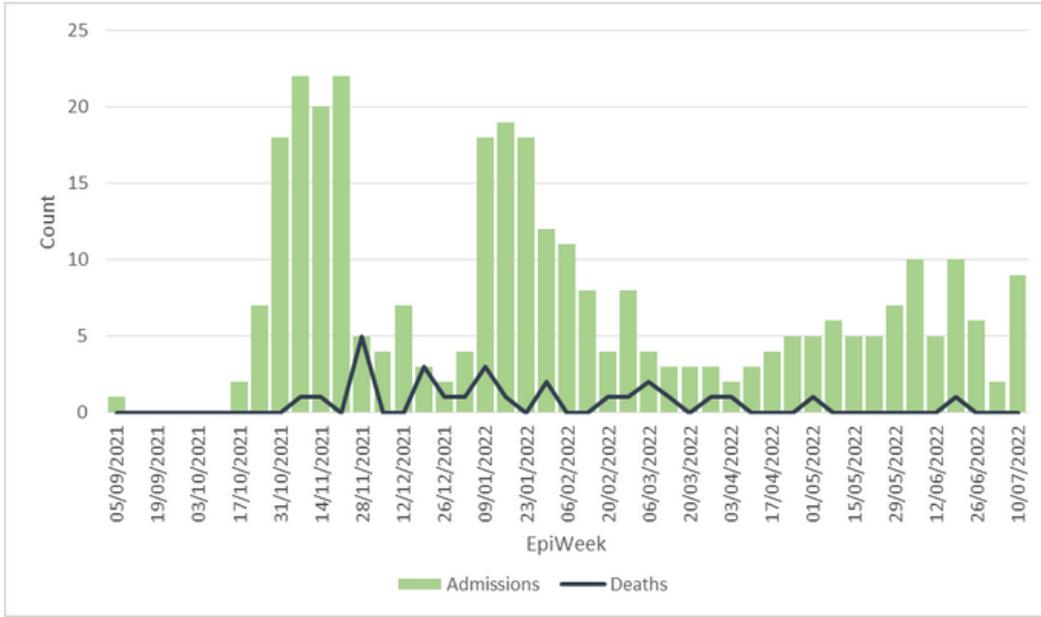
Table 2: COVID-19 patients admitted to hospital

Indicator	Current EpiWeek	Previous EpiWeek	Percentage change	Total
Total				
New COVID-19 patients admitted	9	2	+350%	337
By age, vaccination, and reason for admission				
New admissions <10 years	0	1	-100%	27
New admissions >10 years	9	1	+800%	310
New admissions with ≥ 2 doses of a COVID-19 vaccine	7	0	-	113
Admitted for COVID-19 morbidity	4	2	+100%	-
Admitted with COVID-19, detected by screening	5	0	-	-

Table 3: COVID-19 inpatients

Indicator	Current EpiWeek	Previous EpiWeek	Percentage change	Total
Total number of inpatients	12	6	+100%	337
Supplemental O2 inpatients	3	2	+50%	-
ICU inpatients	3	1	+200%	-
Ventilated inpatients	0	0	0%	-

Figure 4: Weekly hospitalisations and deaths (since 8 September 2021*)



*First COVID-19 patient was in March 2020, but hospitalisation figures begin September 2021 for graphical reasons.

Table 4: Hospitalisation and Death statistics March 2020 – Present.

Vaccination Status	<u>Hospitalisations</u>	Proportion	Deaths	Proportion
Unvaccinated	206	61%	24	83%
Partially Vaccinated	11	3%	1	3%
Fully vaccinated	93	28%	4	14%
Fully vaccinated +1 Booster	26	8%	0	0%
Fully vaccinated +2 Boosters	1	0%	0	0%
Total	337	100%	29	100%

Figure 5: Weekly COVID-19 hospital admissions stratified by those aged above and below 10

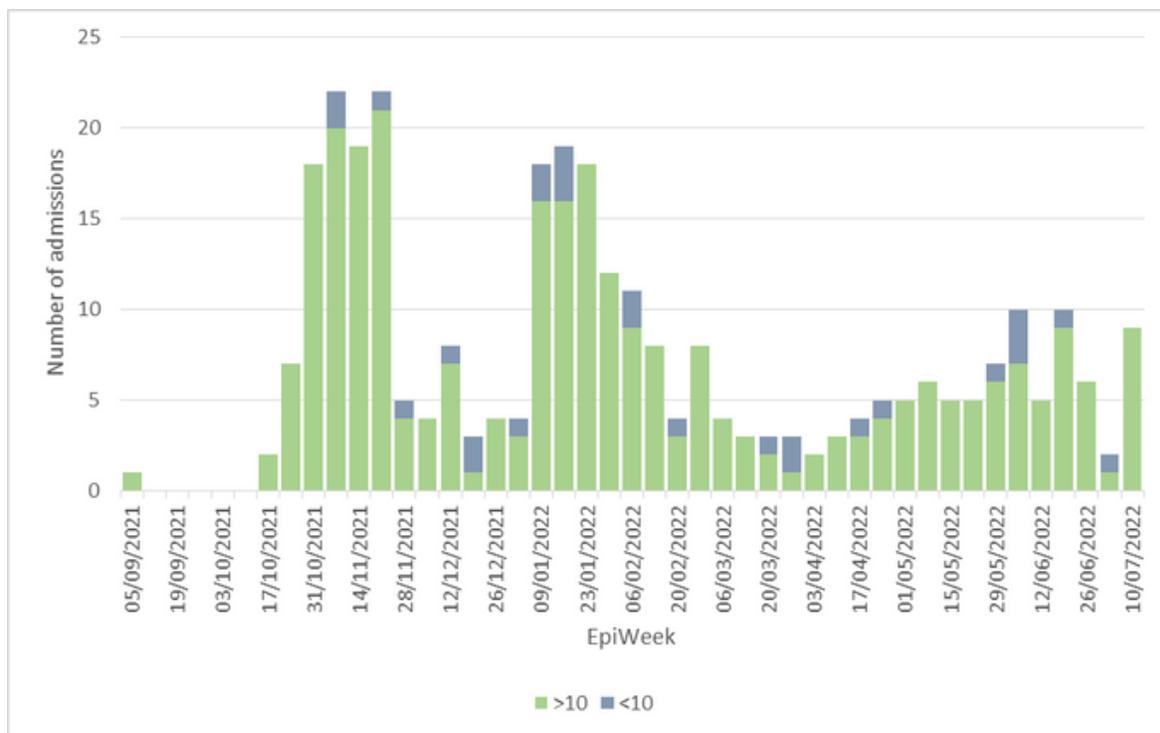


Table 5: COVID-19 vaccine uptake and coverage

Dose Number	Number administered in the week	Total Count	Coverage of Total Population	Coverage of population over 5
1	76	61,529	88.7%	95.0%
2	121	59,931	86.4%	92.6%
3	62	23,732	34.2%	36.7%
4	159	2,019	2.9%	3.1%

Based on total population of 69,350

Table 6: COVID-19 paediatric vaccine doses administered and booster coverage

Indicator	Total
Number of paediatric 1st doses administered within the <u>EpiWeek</u>	36
Number of paediatric 2nd doses administered within the <u>EpiWeek</u>	53
Number of children (5-11) immunized with the <u>paediatric vaccine</u>	796
Booster (3rd dose) coverage for population >20 (Fig.7)	43.1%

Figure 6: Vaccine coverage for the total population (69,350)

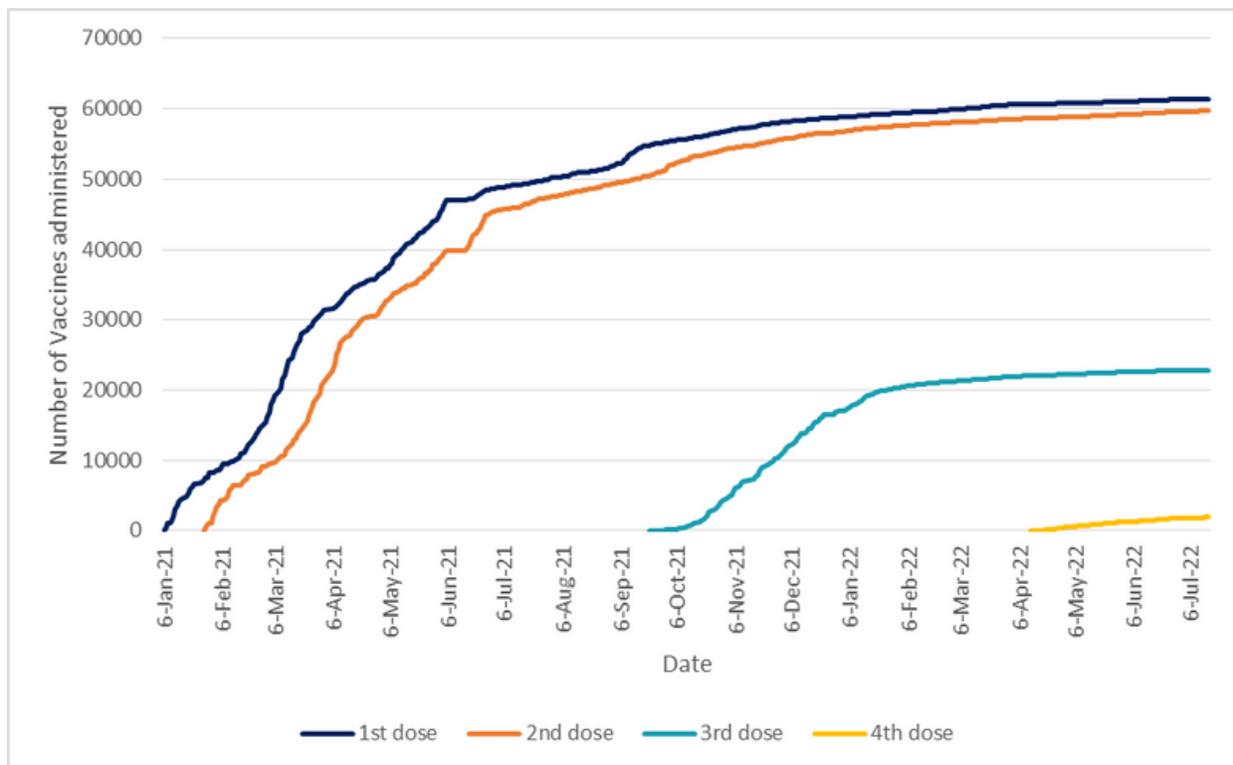
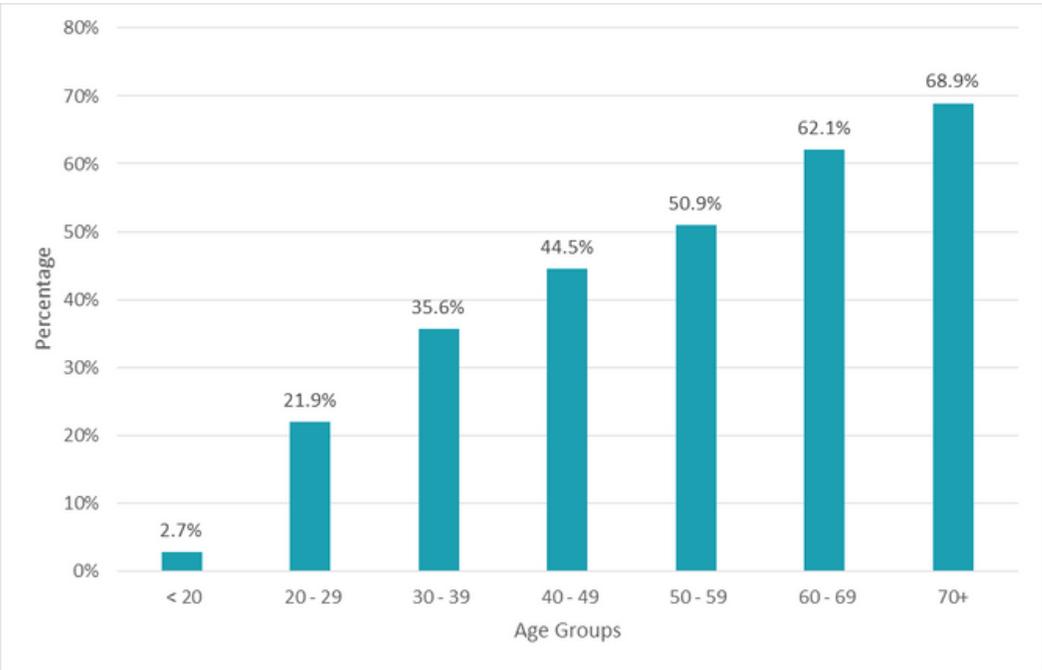


Figure 7: Booster (3rd dose) Vaccine Coverage per Age Group



Monkeypox

Overview

As the monkeypox outbreak continues, there are varying trends around the world. Some countries report a decline in cases whilst in other countries cases are increasing. In total five monkeypox deaths have been reported so far, all of which were in Africa. In the previous reporting week, there have been six new countries to report their first case of monkeypox.

The most affected region is the European Region, which reported a total of 9,276 laboratory confirmed cases (data as of 20th June). Cases in the European Region have most often been males aged 31-40 years old.

WHO will convene a second meeting this week to review whether the monkeypox outbreak constitutes a Public Health Emergency of International Concern (PHEIC).

Cayman Islands

No monkeypox cases have been detected in Cayman Islands, although cases has been reported in the Caribbean region.

The Cayman Islands has the capacity to diagnose monkeypox at the Cayman Molecular laboratory.

Long COVID

There are individuals who following a COVID-19 infection experience persistent symptoms or effects from their infection. Common symptoms include fatigue, muscle pain and difficulty breathing as well as others effects including problems with memory and concentration ('brain fog') or joint pain. There is no universally agreed definition of Long Covid, however the World Health Organization define it as symptoms that are present from the onset of COVID-19 and still present at least 3 months post infection which are not explained by an alternative diagnosis. Other countries have also adopted the 3-month threshold to diagnose Long Covid in an individual. WHO estimates that 10%-20% of COVID-19 cases experience either mid or long-term effects following a COVID-19 infection. WHO reports that current evidence does not suggest that having a more severe initial COVID-19 infection is associated with a higher likelihood of experiencing Long Covid.

For those with Long Covid, holistic care is recommended, including rehabilitation.

**The Public Health Spotlight is published weekly by the Ministry of Health and Wellness.
For more information, contact gis@gov.ky**