



○ Situation Report: Confirmed COVID-19	Location: The Gambia
Date of Report: 14th September 2020	Investigation Start Date: 17th March 2020 as of 18hrs.
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I. HIGHLIGHTS

This is the 145th national situation report since the confirmation of the first case of the novel coronavirus disease (COVID-19) in The Gambia, on the 16th March 2020

- 2 new COVID-19 related deaths registered bringing the total deaths to 107 - a crude case-fatality ratio of 3.1%
 - The new deceased cases (both male) had their samples collected and tested posthumously
- 12 new cases registered, taking the total number of COVID-19 cases ever confirmed in the country to 3,440
 - This represents a 25.5% test positivity rate (12 out of 47 total tests performed)
 - The median age of the new cases is 44.5 years (range: 30 to 100 years)
- 47 new laboratory test results received from MRCG and NPHL
 - Of these, 3 new tests returned indeterminate
- 114 new COVID-19 patients recovered and got discharged
- Whereas 1 new person was taken in to quarantine, 77 were discharged
- The country currently has, 1 person in quarantine, 1,482 active cases, 421 probable cases and a crude case-fatality ratio of 3.1%
 - *The bulk of the active cases are asymptomatic and are as such self-isolating at home pending the manifestation of symptoms

COVID-19 SITUATION IN NUMBERS

Globally

- 👤 Confirmed Cases: **29,436,547**
- 👤 Recoveries: **21,269,438**
- 🚑 Deaths: **932,446**

Senegal

- 👤 Confirmed Cases: **14,306**
- 👤 Recoveries: **10,563**
- 🚑 Deaths: **297**

The Gambia

- 👤 Confirmed Cases: **3,440**
- 👤 Recoveries: **1,851**
- 🚑 Deaths: **107**

II. EPIDEMIOLOGICAL DESCRIPTION

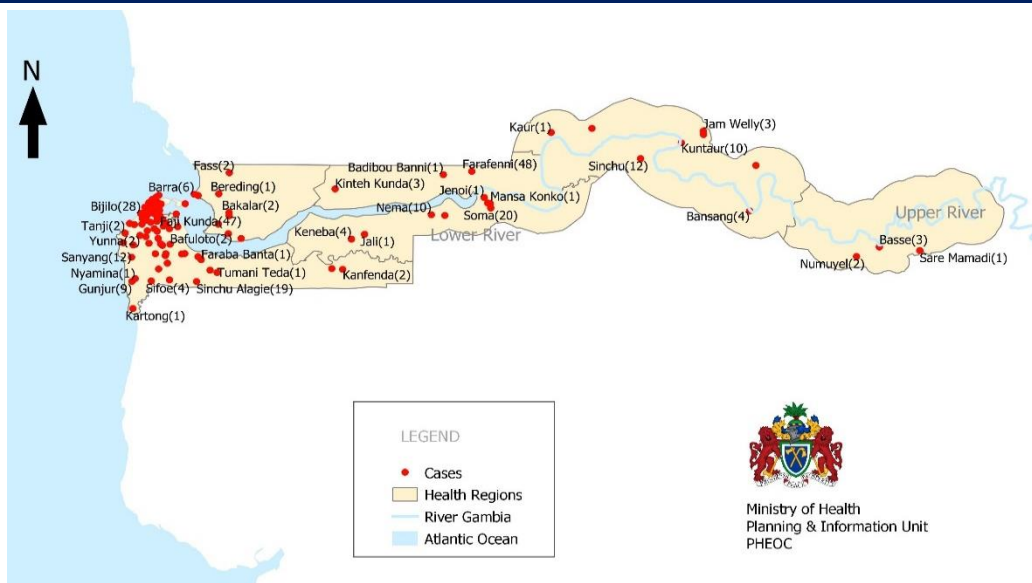


Figure 1: Distribution of COVID-19 cases, The Gambia, September 2020

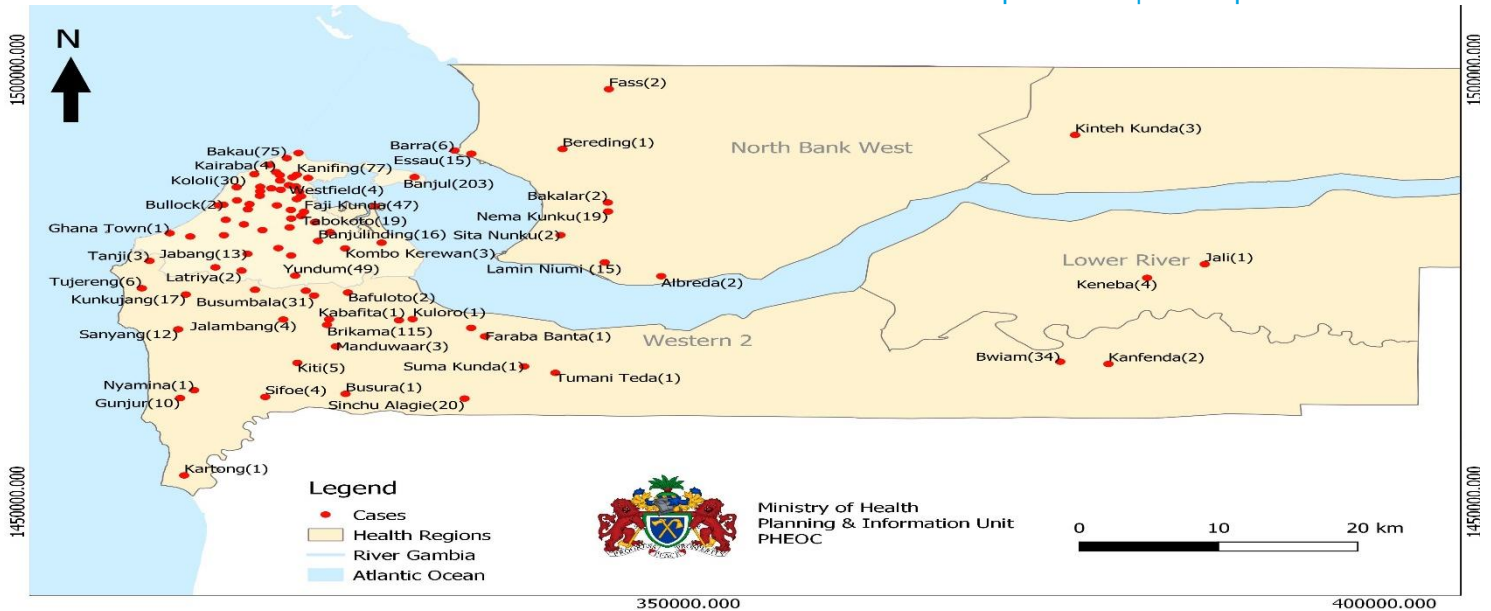


Figure 2: Distribution of COVID-19 cases in Western and North Bank West Regions, The Gambia, 2020

- All 7 health regions have reported cases of COVID-19 (See Fig. 1)
- Comparatively, there is a disproportionate concentration of confirmed COVID-19 cases in Western 1 and 2 Health Regions (See Fig. 1)
- Notwithstanding its population and size, Banjul recorded more cases than any other location within WR1(See Fig. 2)

Figures 3 and 4 are the age-sex distribution and the Epi-curve of confirmed cases by reported date, respectively.

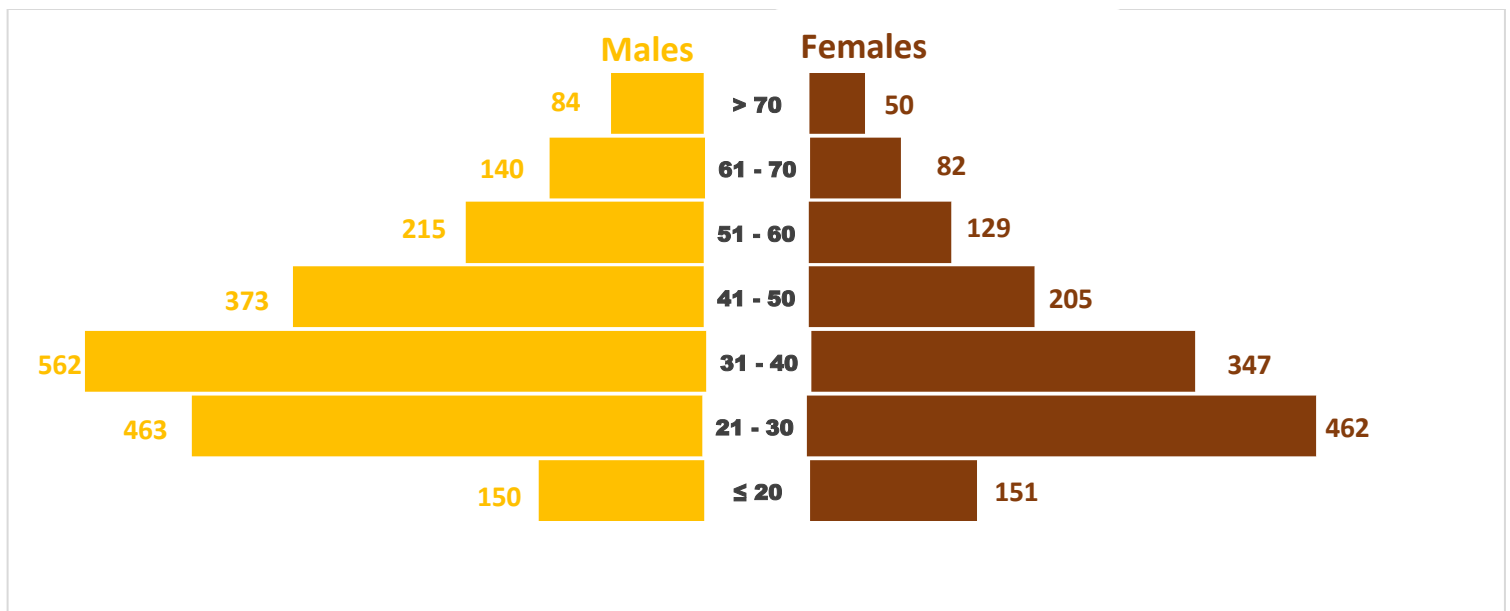


Fig. 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020

* This excludes the 27 confirmed cases whose demographic information are not yet available

- About 57% of the confirmed cases are males (See Fig. 3)

- About 60% of the confirmed cases are below age 40 (See Fig. 3)
- The only age category with a few more cases among females than males is the age '20 and below' category (See Fig. 3)

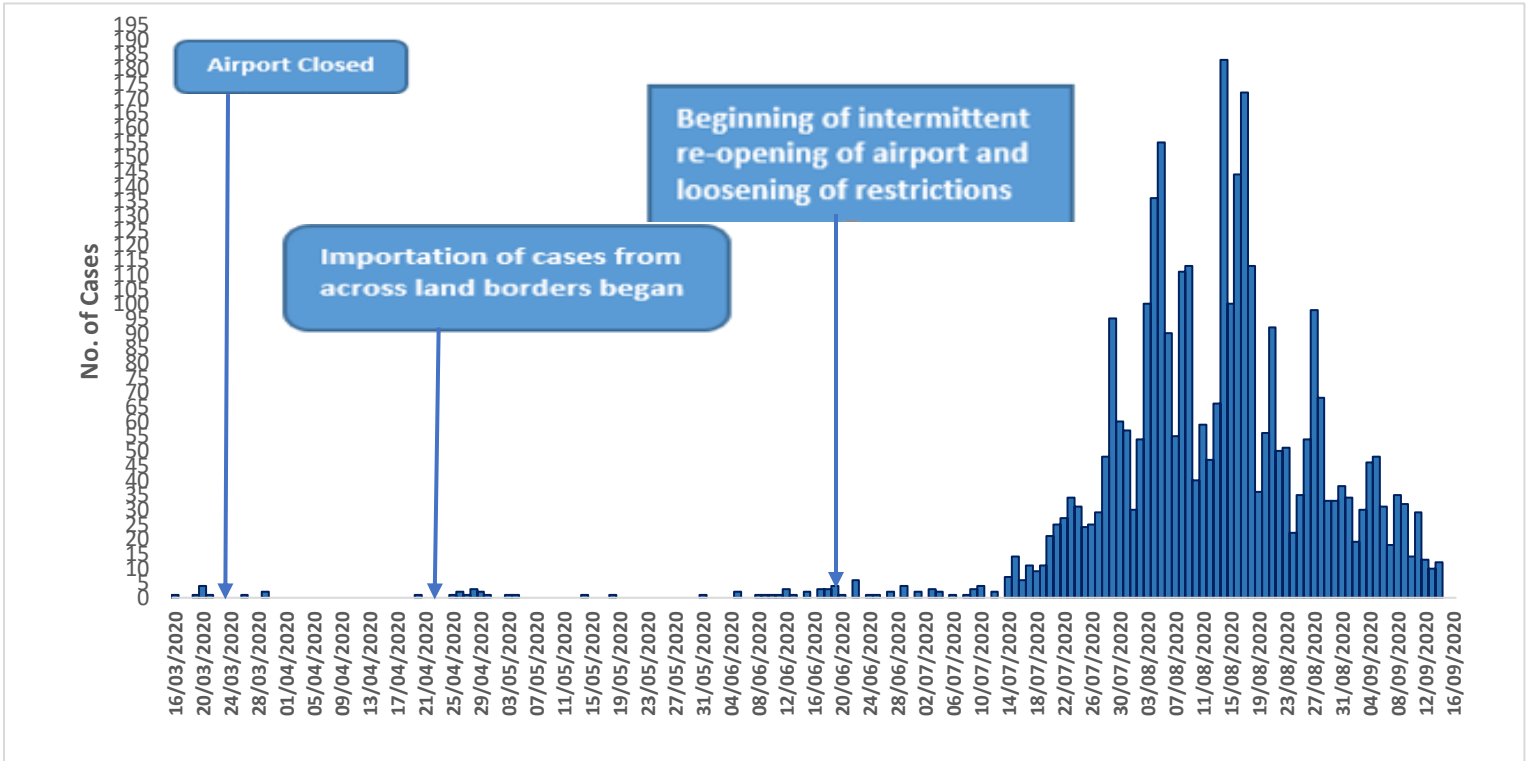


Fig. 4: Epidemic Curve of Laboratory-Confirmed Cases by Date Reported, COVID-19 Pandemic, The Gambia, 2020*.

* A considerable amount of time elapsed between date of reporting and the date of laboratory confirmation of some cases

- Three main waves of infection occurred – the pre airport closure wave, the importation from Senegal wave and the intermittent airport re-opening and loosening of restrictions wave (See Fig. 4)

Table 1: Summary of New and Cumulative Public Health Response Outputs, COVID-19 Pandemic, The Gambia, 2020

Status	New	Cumulative
No. of active cases in institutional isolation	107	
No. of COVID-19 patients on oxygen support	3	
No. of patients recovered and discharged	114	
In Quarantine	1	1
Completed Quarantine	77	2,542
Completed follow-up (asymptomatic people with travel history to affected countries) *	0	310
No. of Contact(s) Identified**	0	
No. of Contacts being monitored	1,266	
No. of Contacts who completed 14-day follow-up	0	5,819
No. of Contacts lost to follow-up	0	21
Total Tests conducted (Repeat Test (s))***	47 (0)***	15,766
Positive test result (Repeat Test (s))	12 (0)	3,440
Negative test result (Repeat Test (s))***	31(0)***	11,397
Inconclusive test result (Repeat Test (s))***	3(0)***	

* Follow-up completed prior to the 17th March (when the first confirmed case was reported)

** Includes both low-risk and high-risk contacts and not mutually exclusive with number quarantined (as some have been quarantined)

*** Includes repeat tests in bracket

III. Major Response Activities

Table 2: Major response activities undertaken newly, COVID-19 Outbreak, The Gambia, 2020

Component	Interventions
Coordination	<ul style="list-style-type: none"> Daily coordination meetings held at both central and regional levels
Surveillance/ Laboratory	<ul style="list-style-type: none"> 47 new laboratory test results received from MRCG and NPHL Of these, 3 new tests returned inconclusive or indeterminant and 12 new tests were positive for COVID-19
Case Management / Psychosocial Support and Research	<ul style="list-style-type: none"> 2 new COVID-19-related deaths recorded More donations received from 'UNDER ONE BANNER'
Logistics / Security & Safety	<ul style="list-style-type: none"> The Banjul International Airport COVID-19 SOP was successfully validated

IV. GAPS/CHALLENGES:

- Dwindling compliance with mask-wearing requirements
- Low turn-out at COVID-19 sample collection sites resulting in fewer number of daily tests
- Denial, misinformation, stigma and discrimination against COVID-19 affected families
- Despite the impending increase in the number of sample collection sites, rapid response and contact tracing teams are contending with transportation difficulties
- The Case Management Pillar of the COVID-19 response is grappling with transportation difficulties to move clinicians around the treatment centers according to their shifts
- Proper management of the continuously generated healthcare waste is a concern as there is only one functional incinerator at the NPHL
- The lack of a strong and reliable Internet connection at the NPHL is hampering the implementation of e-surveillance at the laboratory
- Existence of pervasive community transmission of COVID-19 in the country, especially in Western 1 and 2 Health Regions
- Uptick of COVID-19 among healthcare workers

V. NEXT STEPS/RECOMMENDATIONS:

- Thorough enforcement of the mandatory mask-wearing regulation
- Allocation of more vehicles and motor cycles to rapid response and contact tracing teams
- Urgent provision of more vehicles to ease the movement of clinicians
- Ensure there is reliable internet access at the NPHL to support the effective implementation of e-surveillance

- Expedite the allocation of land to construct the waste management plant that has been procured by the World Bank Group to address healthcare waste management issues
- Imposition of stringent lockdown measures in the country in order to curb the spread of the virus
- IPC measures should be strictly adhered to in all public and private health healthcare facilities
- Provision of adequate stocks of PPEs to all health facilities
- Health workers to observe all COVID-19 preventive measures including the donning of appropriate PPEs at all times
- Intensify RCCE activities at community level in a bid to curtail the ongoing community transmission and dispel misinformation and denial

For comments or questions, please contact:
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PARTNERS

