Epidemiology and Disease Control Unit





Report No. 202, 2020

Situation Report. Committee COVID-19 Location. The Gambia		Situation Report: Confirmed COVID-19	Location: The Gambia
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Date of Report: 21st & 22nd Nov 2020 Investigation Start Date: 17th March 2020 as of 18hrs.

Prepared by: Epidemiology and Disease Control Unit, MoH, The Gambia

I. HIGHLIGHTS

This is the 202nd 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

- No new COVID-19 related death registered
 - The 2 posthumous samples tested returned negative for COVID-19
- 188 new laboratory test results received from NPHL
 - No new confirmed case of COVID-19 recorded
 - No new test returned indeterminant / inconclusive
- A WHO-AFRO supported training of health workers in The Gambia and Senegal, on transboundary collaboration, is underway in Farafenni, NBE
- 1 COVID-19 patient newly recovered and got discharged
- The country currently has no person in quarantine, 16* active cases and a crude case-fatality ratio of 3.3%
 - *4 recently confirmed cases absconded to Senegal

COVID-19 SITUATION IN NUMBERS

Globally

Confirmed Cases: 58,970,933

Recoveries: 40,759,591

Deaths: 1,393,236

Senegal

Confirmed Cases: 15,882

Recoveries: 15,488

Deaths: 330

The Gambia

Confirmed Cases: 3,726

Recoveries: 3,583

Deaths: 123

EPIDEMIOLOGICAL DESCRIPTION

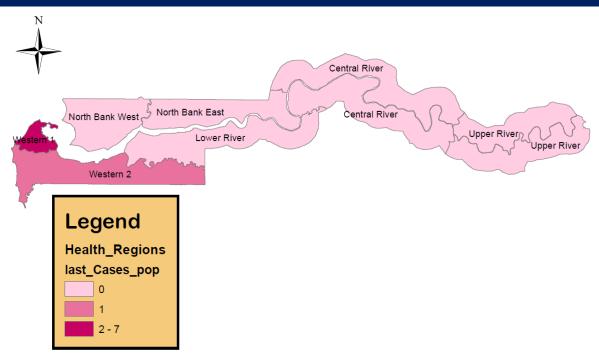


Figure 1: Distribution of Recent COVID-19 Cases Per 100,000 Pop. by Region, The Gambia, 1st to 31st Oct. 2020

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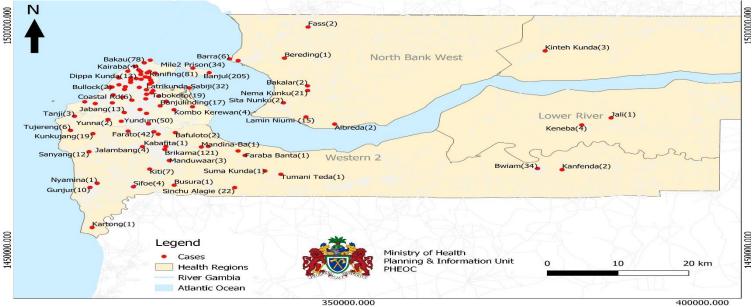


Figure 2: Distribution of COVID-19 cases in Western and North Bank West Regions, The Gambia, 2020

- All 7 health regions have reported cases of COVID-19 (See Fig. 1)
- 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.

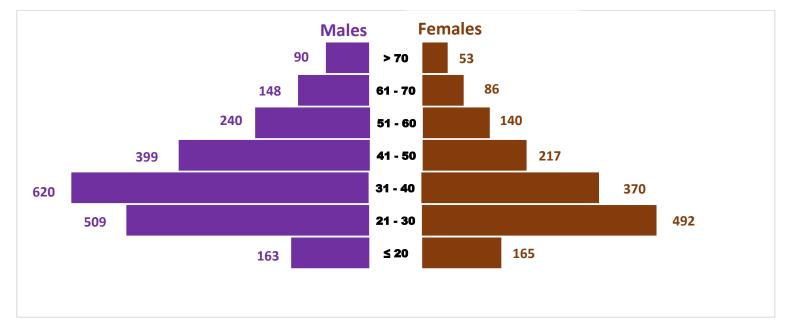


Fig. 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020

- [‡] This excludes the 27 confirmed cases whose demographic information are not yet available
- About 59% of the confirmed cases are males (See Fig. 3)
- About 62% of the confirmed cases are below age 40 (See Fig. 3)
- The only age category with a few more female cases than males is the "age 20 and less" category (See Fig. 3)

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^{*}as of 23rd November 2020 @ 00:31. Data from WHO novel coronavirus dashboard and European CDC situation report

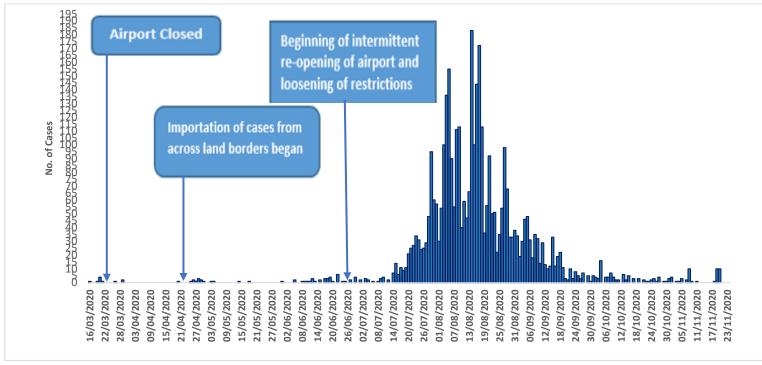


Fig. 4: Epidemic Curve of Laboratory-Confirmed Cases by Date Reported, COVID-19 Pandemic, The Gambia, 2020*.

* 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		8
No. of COVID-19 patients on oxygen support		2
No. of patients recovered and discharged	1	
In Quarantine	0	0
Completed Quarantine	0	2,726
Completed follow-up (asymptomatic people with	0	310
travel history to affected countries) *		
No. of Contact(s) Identified**	0	
No. of Contacts being monitored	0	
No. of Contacts who completed 14-day follow-up	0	14,664
No. of Contacts lost to follow-up	0	51
Total Tests conducted (Repeat Test (s))***	162 (26)***	24,328
Positive test result (Repeat Test (s))	0 (0)	3,726
Negative test result (Repeat Test (s))***	162 (26)***	19,460
Inconclusive test result (Repeat Test (s))***	0 (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

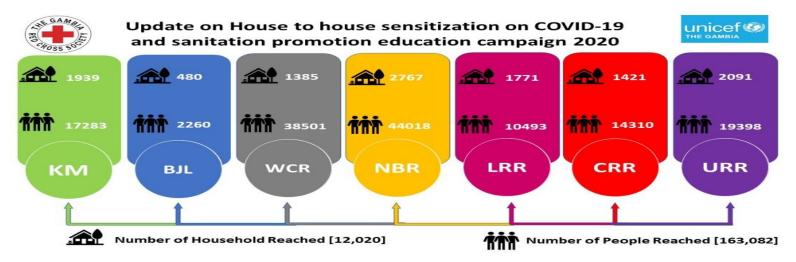
Coordination

- Daily coordination meetings held at both central and regional levels
- Surveillance/ Laboratory
- 188 new laboratory test results received from NPHL
- Of these, no test result returned inconclusive or indeterminant and 0 new tests returned positive for COVID-19

Case Management / Psychosocial . Support & Research

1 new patient recovered and got discharged

Risk Communication and Community Engagement



IV. GAPS/CHALLENGES:

- High site-specific test positivity rates being recorded at one of the testing sites (Keneba) in the hinterland
- Support for innovative countrywide risk communication strategies and activities on COVID-19 is suboptimal
- Security lapses at some of the treatment centers resulting in the abscondence of patients
- 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
- The lack of a strong and reliable Internet connection at the NPHL is hampering the implementation of esurveillance at the laboratory
- Uptick of COVID-19 among healthcare workers

V. NEXT STEPS/RECOMMENDATIONS:

- Intensify risk communication and community engagement activities, on COVID-19 at community level, including at LUMOS, in a bid to curtail community transmission and dispel misinformation and denial
- More tests required in the catchment area of the MRC Keneba testing site to ascertain the extent of spread of COVID-19
- Security needs to be beefed up at all COVID-19 treatment/isolation centers to prevent the abscondence of patients
- Strengthen community-based surveillance in order to increase awareness and testing rates
- Thorough enforcement of the mandatory mask-wearing regulation
- Ensure there is reliable internet access at the NPHL to support the effective implementation of e-surveillance
- 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

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PARTNERS







































































