

QUICK OUTLOOK

23 November 2020
6:00 am CAT

6,009

Confirmed cases

6 new cases

282 active cases

1,176 imported

4,833 local transmission

68.3% male

36.7 (13.0) mean age
(SD), years

185 deaths

76.1% male

median age **56** years

5,443 recoveries

71,970 tests conducted

16 RT-PCR testing sites

39 GeneXpert testing sites

Highlights

- Six new cases have been registered in the past 24 hours; cumulatively 6,009 cases have been registered
- 1,287 COVID-19 tests were conducted in the past 24 hours; cumulatively, 71,970 tests have been conducted
- No new deaths have been registered in the past 24 hours; the death toll in the country remains at 185
- Two new recoveries have been recorded in the past 24 hours; cumulatively 5,443 people have now recovered

Background

On 31 December 2019, the World Health Organization (WHO) was alerted of several cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province of China. Later the disease was named Coronavirus disease-19 (COVID-19) and the virus was named SARS-CoV2. World Health Organization declared the COVID-19 outbreak a pandemic on 12th March 2020.

On 20 March 2020, COVID-19 was declared a national disaster in Malawi, and on 2 April 2020, Malawi registered the first cases of COVID-19. On 6 May 2020, a Presidential Taskforce on COVID-19 was appointed.

Global situation¹

Globally, as of 10:44 am CET, 23 November 2020, there have been 58,229,138 confirmed cases of COVID-19, including 1,382,106 deaths, reported to WHO. Out of these, 1,446,041 confirmed cases and 32,538 deaths are from Africa. **Table 1** below shows the number of reported cases and deaths in the region.

Table 1: Number of cases and deaths of COVID-19 in the region

Country	Cumulative cases	New cases	Cumulative deaths	New deaths	Days since last reported case
South Africa	765,409	2,646	20,845	86	0
Ethiopia	105,352	473	1,636	16	0
Kenya	76,404	1,211	1,349	19	0
Zambia	17,394	21	356	0	0
Mozambique	14,981	104	123	2	0
Zimbabwe	9,120	0	265	0	0
Tanzania	509	0	21	0	193

¹ Data last updated: 23 November 2020, 10:44 am CET available at <https://covid19.who.int/>



Local situation

In the past 24 hours, Malawi has registered six new COVID-19 cases, two new recoveries, and no new deaths. The new cases are imported infections and were identified among 1,100 Malawians returning from South Africa. Two of these cases are residents of Thyolo health district and one each are from Blantyre, Dedza, and Zomba health districts. The other one is still being investigated.

Cumulatively, Malawi has recorded 6,009 cases including 185 deaths. **Figure 1** is a map of Malawi showing the distribution of cases in the country. Of these cases, 1,179 are imported infections and 4,833 are locally transmitted. Cumulatively, 5,443 cases have now recovered and 99 were lost to follow-up², bringing the total number of active cases to 282. The average age of the cases is 36.7 years, the youngest case is aged 1 month, the oldest is 98 years and 68.3% are male. **Table 3**, and **Figures 2, 3**, and **4** show detailed distributions of the cases and deaths.

Malawi's land borders remain closed except for four borders to allow transit of essential goods and services. Kamuzu and Chileka International Airports are now open for commercial flights. In the past 24 hours, 360 people have entered Malawi. Active tracing and monitoring of contacts of confirmed COVID-19 are ongoing, currently, a total of 10,605 primary and secondary contacts of COVID-19 cases have been traced.

Table 2: Summary statistics for COVID-19 outbreak in Malawi

Parameter	Statistic
Cumulative confirmed cases	6,009
Number of active cases	282
New confirmed cases in the past 24 hours	6
Cumulative deaths	184
Cumulative recoveries	5,443
Suspected cases	72,720
Cumulative samples received by the lab	72,720
Cumulative samples tested	71,970
Samples tested in the past 24 hours	1,287
Cumulative contacts listed and follow up	10,605
PoEs* entries in the last 24 hours	360
High-risk travellers on follow up at district level**	15,503
Cumulative travellers completed 14 days of follow up at a district	19,163
Cumulative COVID-19 pregnant cases	38

* Point of entry **Under-reported (few districts reported)

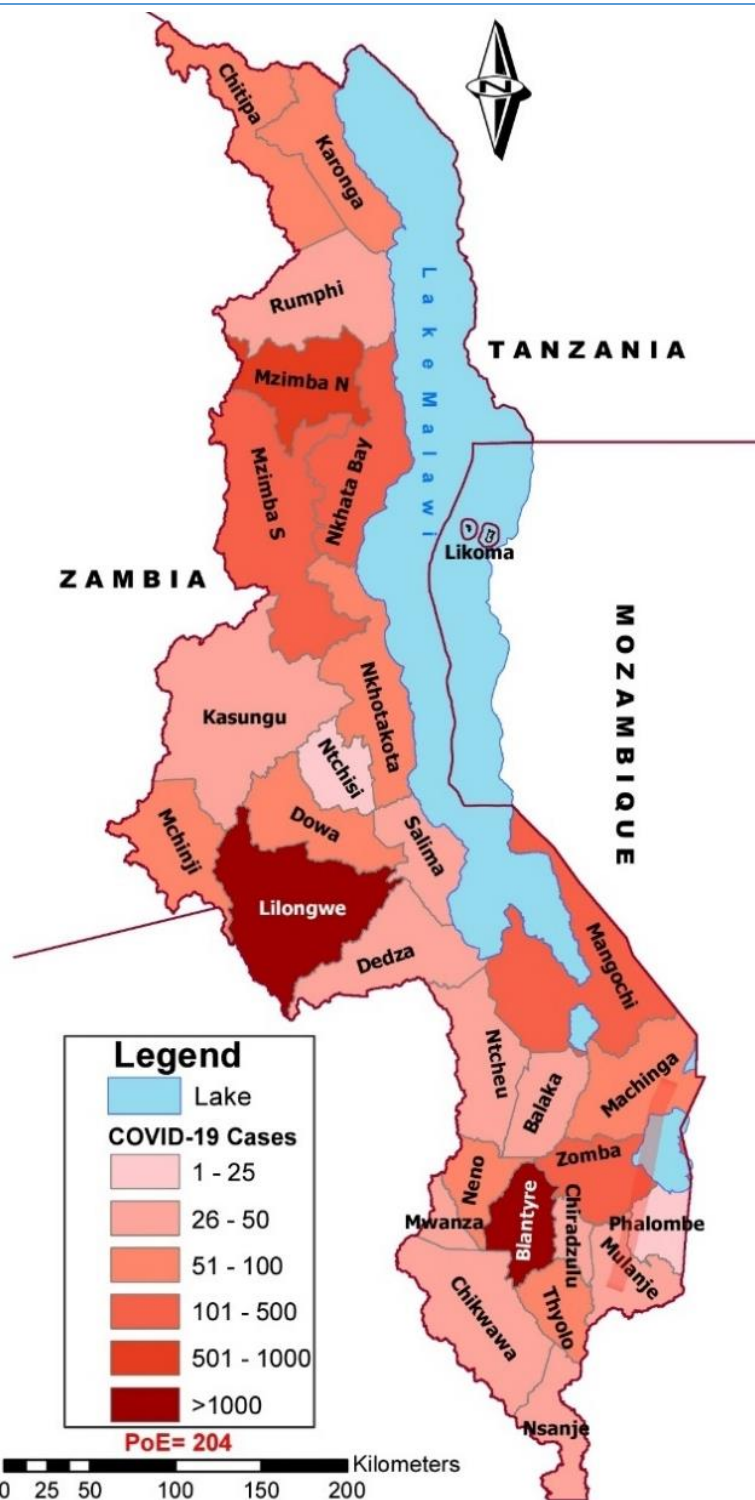


Figure 1: Map of Malawi showing distribution of COVID-19 cases

² Lost to follow-up refers to a confirmed COVID-19 case who has completed 14 days and is due for discharge from COVID-19 care pathway but cannot be traced because is unreachable either by phone or home visit after 28 days of laboratory confirmation

**Table 3:** Summary of COVID-19 cases, deaths, and recoveries as of 23 November 2020, 6:00 am CAT

Reporting Health District	Confirmed Cases		Deaths		Recoveries		Lost to follow-up [#]	Transmission Classification [*]		Days since last reported case
	New	Total	New	Total	New	Total		Imported	Local	
Blantyre	1	2,030	0	79	2	1,878	0	185	1,845	0
Lilongwe	0	1,398	0	49	0	1,171	166	112	1,286	4
Mzimba North	0	592	0	13	0	539	35	17	575	3
Nkhata Bay	0	196	0	2	0	193	0	34	162	49
Zomba	1	159	0	7	0	144	7	35	124	0
Mangochi	0	155	0	2	0	150	0	112	43	7
Mzimba South	0	154	0	3	0	144	7	34	120	65
Dowa	0	95	0	3	0	91	1	52	43	30
Karonga	0	91	0	4	0	77	2	13	78	9
Nkhotakota	0	87	0	1	0	84	0	31	56	26
Machinga	0	70	0	0	0	69	1	61	9	59
Thyolo	1	71	0	1	0	68	0	36	35	0
Mchinji	0	66	0	5	0	46	15	6	60	46
Chitipa	0	64	0	3	0	61	0	6	58	72
Neno	0	59	0	0	0	58	0	4	55	76
Rumphi	0	56	0	3	0	53	0	10	46	64
Dedza	1	55	0	0	0	50	4	29	26	0
Ntcheu	0	53	0	1	0	47	4	30	23	22
Kasungu	0	49	0	1	0	38	10	14	35	73
Balaka	0	49	0	1	0	45	2	39	10	17
Salima	0	47	0	0	0	47	0	24	23	79
Chikwawa	0	44	0	0	0	44	0	24	20	68
Mulanje	0	43	0	1	0	37	5	12	31	67
Chiradzulu	0	37	0	1	0	35	1	17	20	59
Nsanje	0	37	0	1	0	31	4	25	12	63
Mwanza	0	27	0	1	0	26	0	10	17	88
Phalombe	0	11	0	1	0	8	1	4	7	76
Likoma	0	4	0	2	0	2	0	0	4	89
Ntchisi	0	4	0	0	0	3	0	0	4	89
Mwanza PoE	2	206	0	0	0	204	0	206	0	91
Total	6	6,009	0	185	2	5,443	265	1,182	4,827	

^{*}Imported means that infection has been acquired from outside the country; Local transmission means that the source of infection is within the country; PoE, Point of Entry; [#]Lost to follow-up refers to a confirmed COVID-19 case who has completed 14 days and is due for discharge but cannot be traced because is unreachable either by phone or home visit within 28 days of laboratory confirmation

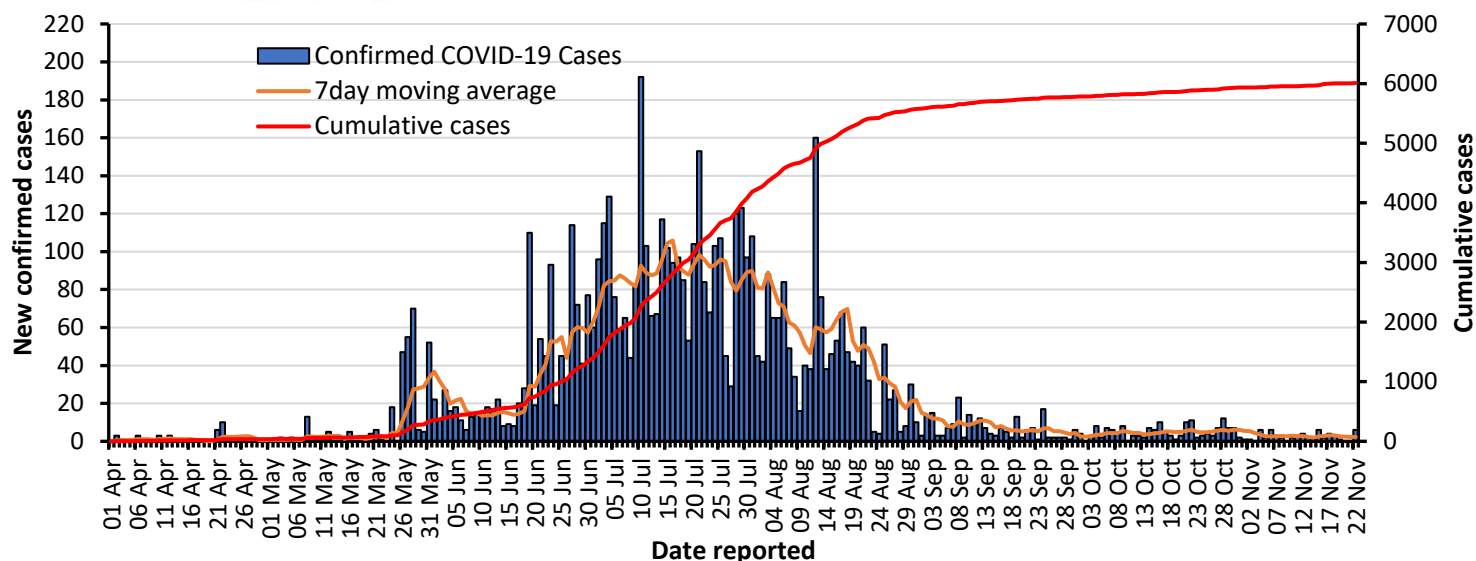


Figure 2: Epidemic curve of COVID-19 in Malawi of 23 November 2020, 6:00 am CAT

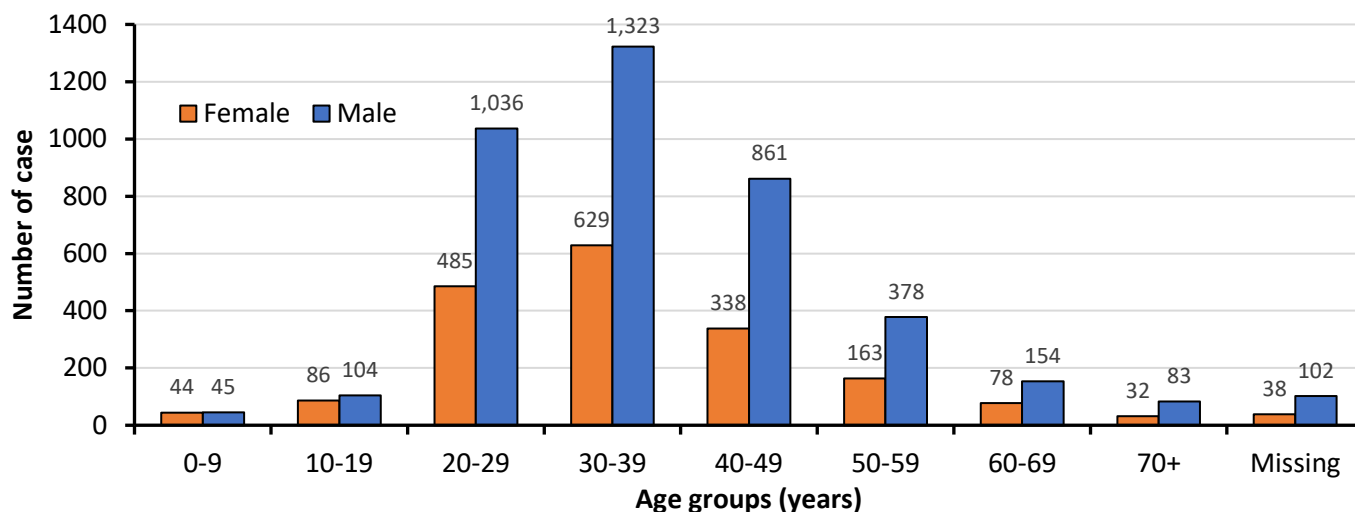


Figure 3: Age and sex distribution of COVID-19 cases in Malawi as of 23 November 2020

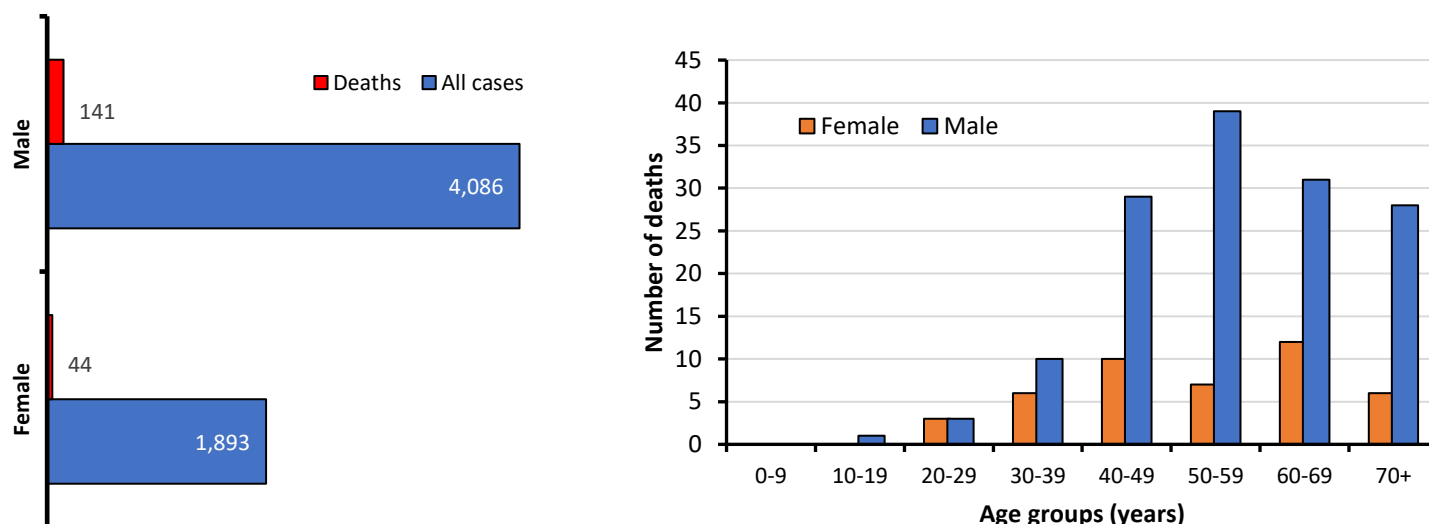


Figure 4: Age and sex distribution of COVID-19 cases and deaths in Malawi as of 23 November 2020, 6:00 am CAT



Summary of Prevention and Response Activities

Laboratory testing

Table 4: Laboratory testing for COVID-19 in Malawi as of 23 November 2020, 6:00 am CAT

Name of Laboratory	Cumulative samples	In the past 24hrs		Total samples		Result		
		Samples received	Samples tested	Tested	Pending	Indeterminate or failed	Positive	Negative
QECH	12,972	84	84	12,972	0	155	998	11,819
NHRL	12,190	1,100	1,100	12,190	0	0	500	11,690
Blantyre DREAM	10,235	0	0	10,222	13	2	813	9,407
KCH	7,084	68	72	7,073	11	15	411	6,647
Mzuzu	5,279	0	0	4,579	700	33	621	3,925
COM	4,126	0	0	4,126	0	43	464	3,619
PIH	3,067	0	0	3,067	0	5	473	2,589
Zomba	2,866	0	0	2,866	0	0	266	2,600
Balaka DREAM	2,710	31	31	2,710	0	4	151	2,555
Mwanza	2,572	0	0	2,572	0	0	167	2,405
Mzimba South	1,472	0	0	1,468	4	2	116	1,350
MLW	1,056	0	0	1,034	22	14	58	962
Bwaila	1,013	0	0	1,013	0	0	126	887
Karonga MEIRU	971	0	0	971	0	7	27	937
Karonga	477	0	0	477	0	0	73	404
Nkhata Bay	464	0	0	464	0	0	109	355
Mchinji	407	0	0	407	0	0	58	349
Salima	365	0	0	365	0	0	32	333
Mangochi	331	0	0	331	0	0	26	305
Nsanje	228	0	0	228	0	0	31	197
Dowa	221	0	0	221	0	0	53	168
Thyolo	213	0	0	213	0	9	23	181
Chitipa	211	0	0	211	0	0	53	158
Kasungu	190	0	0	190	0	0	32	158
Kamuzu Barracks	190	0	0	190	0	0	54	136
Ntcheu	180	0	0	180	0	0	13	167
Neno	178	0	0	178	0	0	35	143
Nkhotakota	175	0	0	175	0	0	19	156
Balaka	166	0	0	166	0	3	19	144
Rumphi	147	0	0	147	0	0	28	119
Dedza	136	0	0	136	0	0	18	118
Mulanje	133	0	0	133	0	0	29	104
Phalombe	114	0	0	114	0	0	8	106
Chiradzulu	99	0	0	99	0	0	21	78
Chikwawa	87	0	0	87	0	0	9	78
Likoma	84	0	0	84	0	0	4	80
Lilongwe Lighthouse	68	0	0	68	0	0	10	58
Ntchisi	43	0	0	43	0	0	7	36
Wezi Medical Center	42	0	0	42	0	0	18	24
Nkhoma Mission	37	0	0	37	0	0	6	31
Malamulo Adventist	32	0	0	32	0	0	8	24
Blantyre Lighthouse	31	0	0	31	0	0	4	27
UNC Project Lilongwe	30	0	0	30	0	0	12	18
Machinga	28	0	0	28	0	0	6	22
Total	72,720	1,283	1,287	71,970	750	292	6,009	65,669

NHRL; National Health Reference laboratory; COM; College of Medicine; MLW; Malawi Liverpool Wellcome Trust; QECH; Queen Elizabeth Central Hospital; KCH; Kamuzu Central Hospital; PIH; Partners in Hope;



Clinical case management

- 282 active cases are under self-isolation
- Cumulatively 5,443 cases have now recovered and 185 have died

Enforcement and security

- Police and Immigration are continuing border patrols
- Road traffic police continue to enforce new seating capacity for public transportation
- Control of crowds in public and private service outlets
- Roadblocks are being mounted in strategic points across the country

Point of entry

- Kamuzu and Chileka international airports are now open for commercial flights
- Monitoring personnel transporting essential goods and services
- Only four borders remain open for essential personnel travel (e.g. petroleum services and other goods).
- Sample collection at ground crossings not consistent across PoEs due to capacity challenges

Supply Chain & Stockpiles

- UNDP is supporting HTSS to fill-in LMIS gap for stock management and dispensing data which will include COVID-19
- Received 20,064 tests with support from Africa CDC, and 2,000 Sansure tests reagents from the medical mission team from the People's Republic of China and 60,048 test kits were received with financial support from Global Fund
- The country has 79, 203 tests available as of 02/11/2020

Risk communication and community engagement (RCCE)

- Ongoing training of HSAs on operational guide for community health workers
- Ongoing review meetings with the HSAs and districts teams on community COVID 19 response
- Supervision of RCCE activities in various activities
- Development and distribution of communication materials
- Weekly "COVID-19 – Together we can beat it" live radio program on air at Zodiak radio every Wednesday from 18:30 – 19:00
- Conducting RCCE weekly meetings and daily COVID-19 updates are shared through different platforms
- Monitoring of feedback, rumors, and misinformation on different platforms – on going
- The public can access the COVID-19 information by dialing *929#, 321 (Airtel), 54747, or by sending "hi" through WhatsApp to 0990 800 000, Facebook – Ministry of Health – Malawi, Twitter @health_malawi and website <https://covid19.health.gov.mw>

Coordination

To facilitate coordination and maintain focused efforts towards combating COVID-19 we hold routine and ad-hoc meetings:

- A Review of Governance process has started
- 5Ws Resource Mapping detailed Implementation Plan has been drafted
- Reporting for the months July –October is underway
- Intra action review draft report on the COVID-19 response has been produced
- Presidential Task Force on COVID-9 was established and they meet weekly
- Fortnightly health cluster meetings
- The surveillance technical committee is meeting three times a week
- Public Health Emergency Operation Centre (PHEOC) is meeting twice a week
- Public Health Emergency Operation Centre is now running 24/7
- Incident Management System is now operational
- Integrating different data sources to the EOC dashboard (CCPF, Syndromic Surveillance, HTSS)



Case definitions

The case definitions are based on the current information available and may be revised as new information accumulates.

1. Suspect case

- a. A patient with a severe acute respiratory infection (FEVER³ AND at least one sign/symptom of respiratory disease (e.g., cough, shortness breath includes other severe COVID symptoms), AND with no other etiology that fully explains the clinical presentation presenting to a health facility who may or may not require hospitalization.

OR

- b. Patients with acute respiratory illness (at least one sign/symptom of respiratory disease (e.g. sore throat, cough, difficulties in breathing, fever)) or other COVID-19 related symptoms (headache, fatigue, loss of smell and taste, diarrhea), AND with no other etiology that fully explains the clinical presentation⁴ AND at least one of the following:
 - i. history of residence in an area reporting community transmission⁵ within Malawi or travel to or residence in a country, area, or territory reporting local transmission of COVID-19 during the 14 days before symptom onset

OR

- ii. is a health care worker or any person who has been working in an environment where COVID-19 cases are being managed
- c. A person, with or without acute respiratory illness, having been in contact⁶ with a confirmed or probable COVID-19 case, in the 2 days prior to 14 days after onset of symptoms of the confirmed or probable case\

2. Probable case

- a. A suspect case for whom testing for COVID-19 is inconclusive. Inconclusive being the result of the test reported by the laboratory

OR

- b. A suspect case for whom testing could not be performed for any reason⁷

3. Confirmed case

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms

4. COVID-19 death

COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery between illness and death.

³ Fever includes both measured objectively and subjective from symptoms

⁴ Clinicians should also be alert to the possibility of atypical presentations in patients who are immunocompromised

⁵ Community transmission within Malawi, areas updated according to the positivity rate determined from tests conducted. Refer to updated list

⁶ Contact is defined as:

- Providing direct care for COVID-19 patients, working with health care workers infected with coronavirus, visiting patients, or staying in the same close environment of a COVID-19 patient.
- Working together in close proximity or sharing the same classroom environment with a COVID-19 patient
- Traveling together in close proximity with a COVID-19 patient in any kind of conveyance
- Living in the same household as a COVID-19 patient
- Having attended a joint event of which patients with COVID-19 have been identified (meetings of different kinds where contact between participants is very likely) within a 14-day period after the onset of symptoms in the case under consideration

⁷ Sample for Laboratory confirmation will be collected from Suspect Case including DECEASED suspect cases or unexplained sudden death and persons that have been in contact with a confirmed case of COVID-19 and fit screening criteria for testing



Classification of transmission patterns

No cases: Countries/territories/areas with no confirmed cases

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:

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

Conclusion

Since early-August, there has been a downward trend in the number of new COVID-19 cases and deaths in the country. This has led to the gradual easing of public health safety measures that were being implemented in response to the pandemic. Notably, Kamuzu and Chileka International Airports have been opened, and the phased reopening of schools has begun. The Ministry of Health and its stakeholders are closely monitoring the easing of the public health safety measures to ensure that Malawians are protected from the COVID-19 pandemic and that the country can detect and respond to any cases that may arise.

Prepared by: Epidemiology Unit, Public Health Institute of Malawi (PHIM) available at

<https://malawipublichealth.org/index.php/resources/covid-19-sitrep-updates/detail>