

SCIENTIFIC RESEARCH MONITORING ON COVID-19

25 NOVEMBER 2020

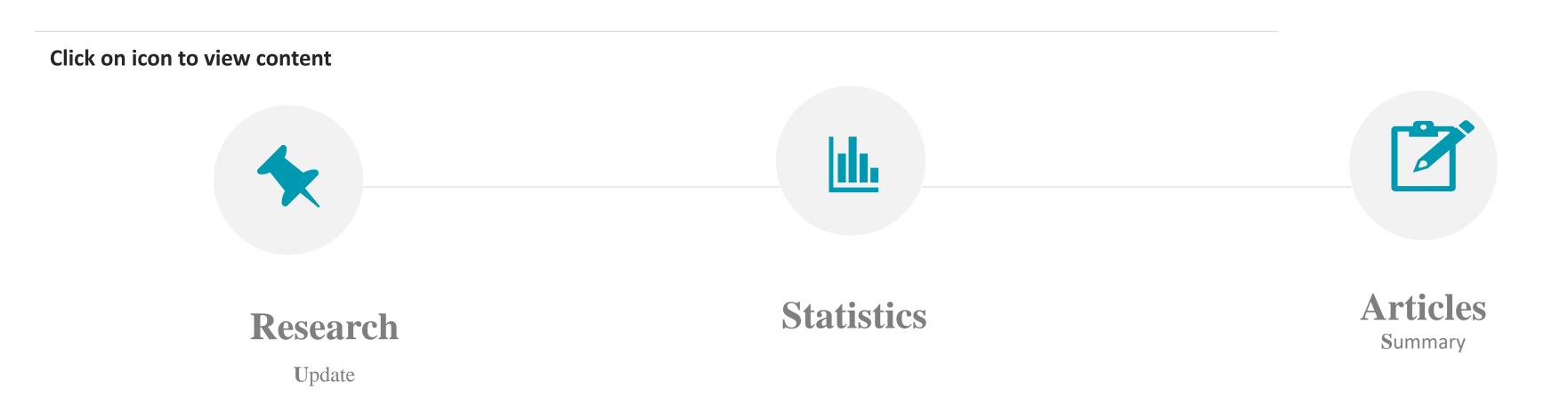
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SCIENTIFIC RESEARCH MONITORING ON COVID-19



(ISSUE 296)

Abu Dhabi Public Health Center (ADPHC) is gathering the latest scientific research updates and trends on coronavirus disease (COVID-19) in a daily report. The report provides summaries on breakthrough or updated research on COVID-19 to allow health care professionals and public health professionals get easy and fast access to information.



Note: All articles presented in this report represent the authors' views and not necessarily represents Abu Dhabi Public Health Center views or directions. Due the nature of daily posting, some minor language errors are expected.

For further inquiries you may communicate with us as PHP@adphc.gov.ae



RESEARCH UPDATES

The views and opinions expressed in this report are those of the authors and do not reflect the official policy or position of the Abu Dhabi Public Health Center (ADPHC).

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Ministry of Health AND Prevention contribution

Immunology

Safety Immune response in COVID-19: A review

Clinical Features

Characteristics, onset, and evolution of neurological symptoms in patients with COVID-19

Epidemiology

Event-specific interventions to minimize COVID-19 transmission

Public Health Response

Timeline: WHO's COVID-19 response



FROM 21 JAN TO 24 NOV 2020



Figure 1: Total Number of Infected, Recovered, and Death Cases

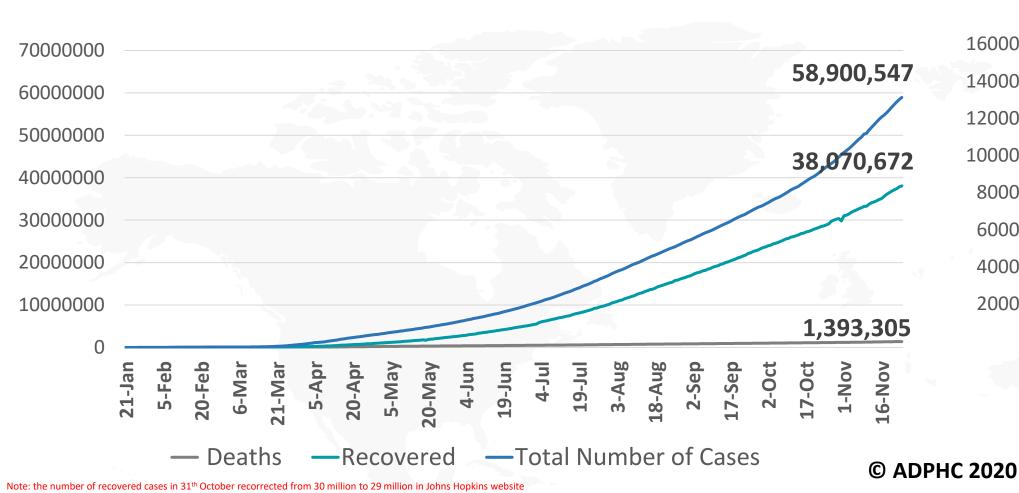


Figure 3: Total Number of Death Due to COVID-19 (china and result of the world)

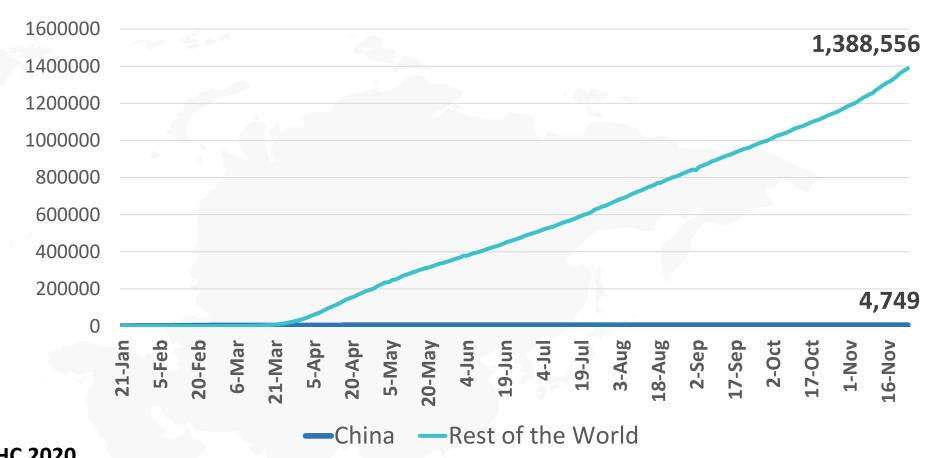


Figure 2: Daily New Infected COVID-19 Cases (China and rest of the world)

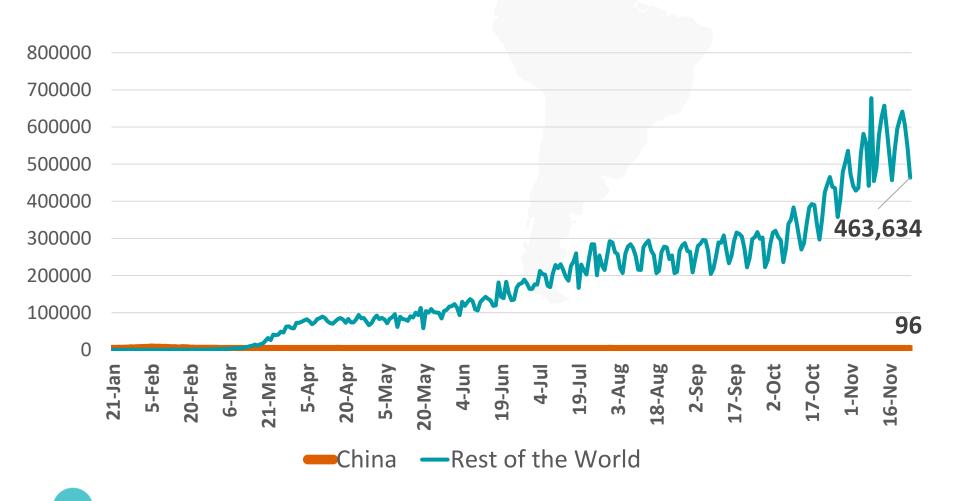
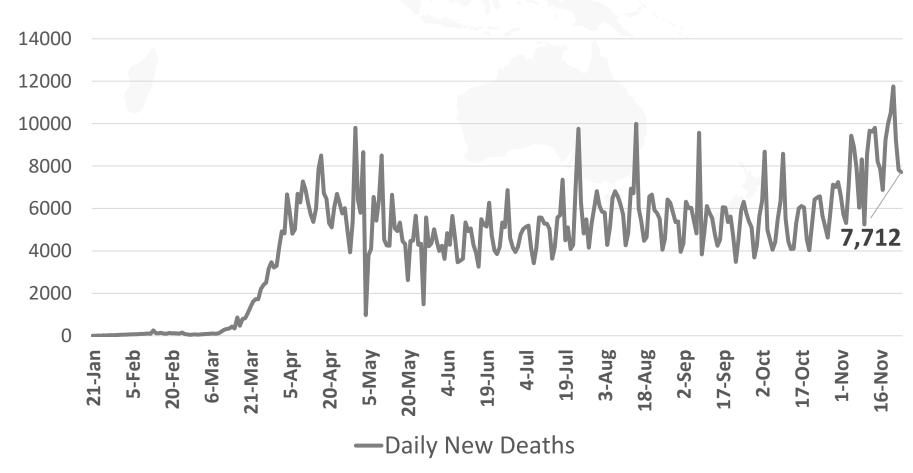


Figure 4: Global Daily New Deaths Due to COVID-19 (china and rest of the world)



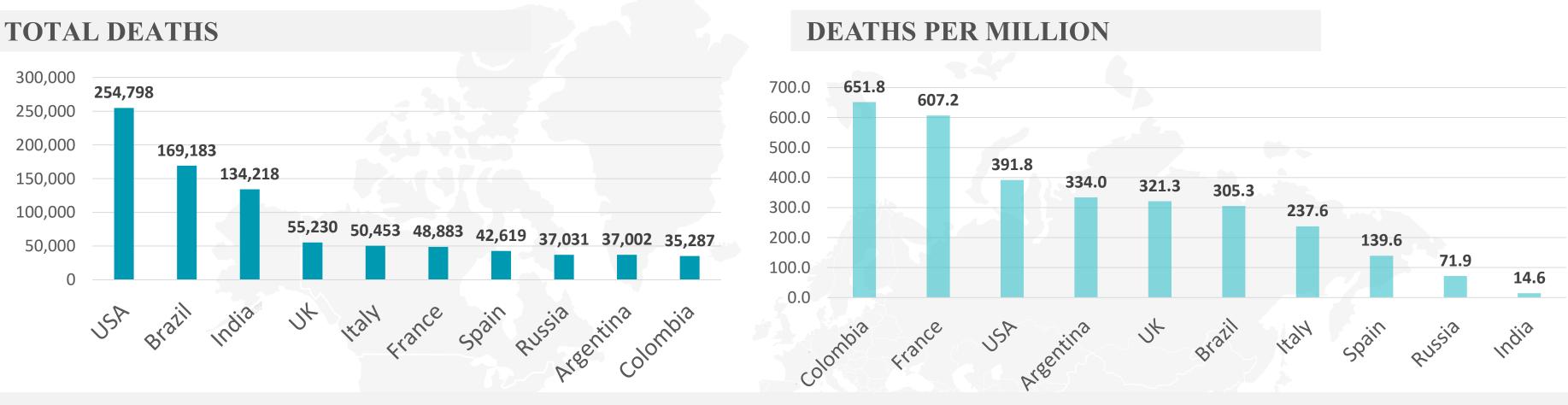


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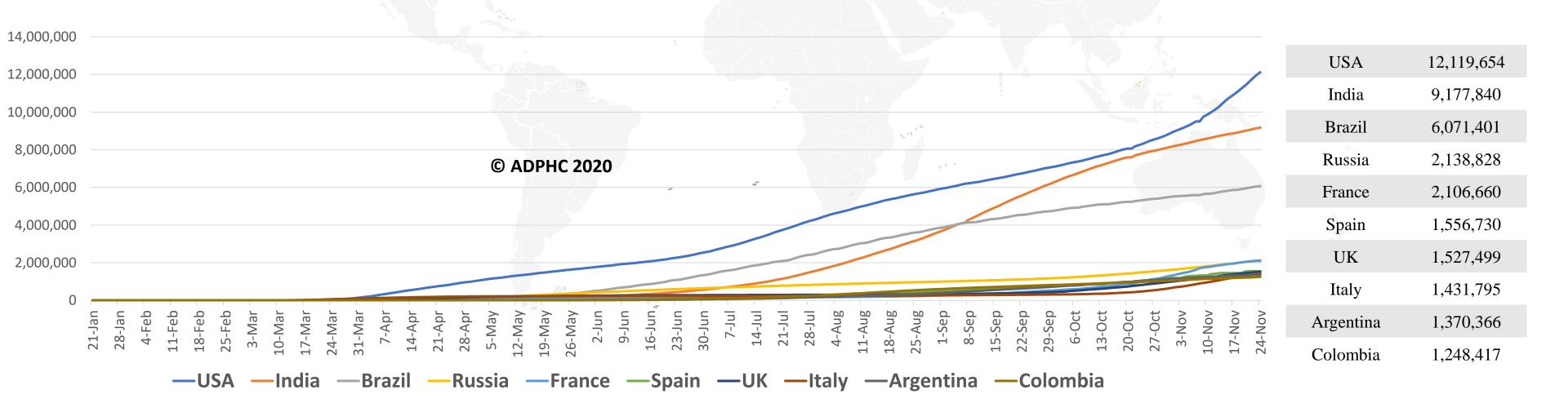
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Figure 5: Top 10 Countries in the Total Number of Cases Due to COVID-19



TOTAL INFECTED CASES





Graphs published by Abu Dhabi Public Health Center 2020 | Data resources: WHO

FROM 21 JAN TO 24 NOV 2020



Figure 6: COVID-19 Status in the UAE (Federal Competitiveness and Statistics Authority Dashboard)



Daily Tests

113,074.1 Average Tests1,143.3 per 100k population1.1% Positive Rate



Daily Cases

1,222.3 Average Cases12.4 per 100k population



Daily Recovered

802.0 Average Recovered8.1 per 100k population



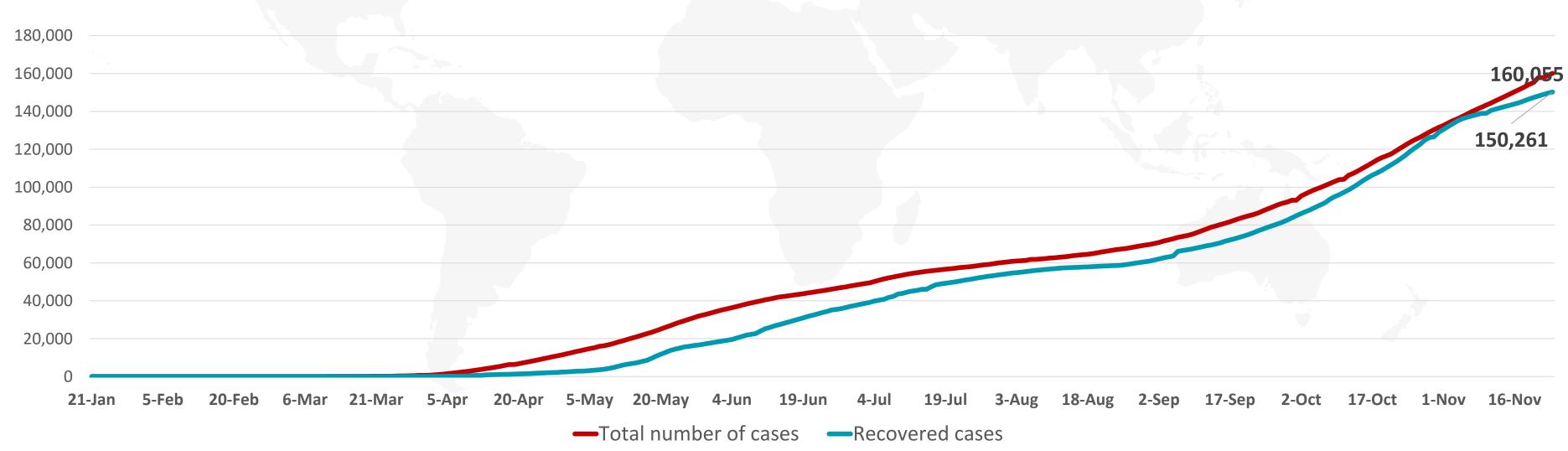
Daily Deaths

3.0 Average Deaths

0.0 per 100k population

0.2% Case Fatality Rate

TOTAL NUMBER OF INFECTED AND RECOVERED CASES DUE TO COVID-19 REPORTED BY THE UAE



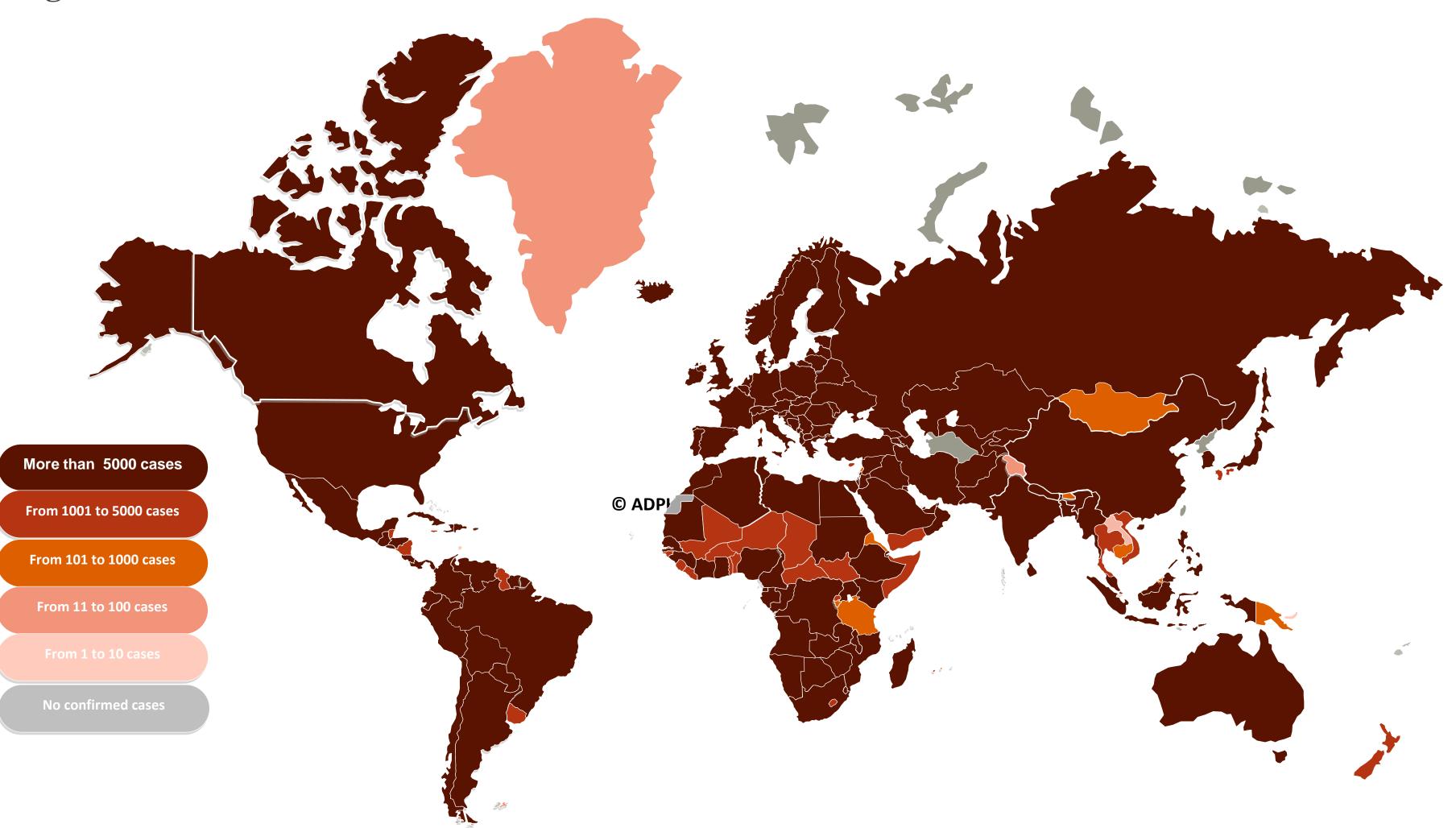


Graphs published by Abu Dhabi Public Health Center 2020 | Data resources: FCSA, WHO, John Hopkins

Date: 24 NOV 2020



Figure 7A: Global Distribution of COVID-19 Cases





Graphs published by Abu Dhabi Public Health Center 2020 | Data resources: WHO

Date: 24 NOV 2020



Figure 7B: Bar Chart Illustrates the Global Distribution of COVID19 Cases

More than 5000 cases From 11 to 100 cases From 1001 to 5000 cases From 101 to 1000 cases 6,071,401 1,248,417 1,041,875 949,670 942,687 647,976 160,055 502,110 496,638 489,223 453,535 420,614 376,929 299,171 264,802 249,214 188,410 181,881 143,978 140,393 138,829 133,929 129,418 111,818 104,915 113,381 93,006 89,196 ARMENIA LIBYA SOUTH. QATAR GREECE BRAZIL SPAIN ITALY PERU CHILE IRAQ NEPAL UAE JAPAN SERBIA OMAN CHINA ARGENTINA UKRAINE INDONESIA TURKEY PHILIPPINES COSTA RICA LEBANON AZERBAIJAN INDIA RUSSIA FRANCE 7 COLOMBIA MEXICO GERMANY POLAND IRAN BELGIUM CZECHIA BANGLADESH ROMANIA PAKISTAN MOROCCO PORTUGAL AUSTRIA SWEDEN JORDAN ECUADOR HUNGARY BELARUS GUATEMALA EGYPT CROATIA HONDURAS MOLDOVA SLOVAKIA TUNISIA PALESTIN BOSNIA NETHERLAN CANADA KAZAKHSTAN PANAMA KUWAIT BULGARIA GEORGIA SWITZERLA BOLIVIA OMINICAN VENEZUELA 56,659 55,127 50,941 48,226 48,200 44,988 37,562 34,897 33,556 32,767 31,723 31,353 30,935 27,835 23,869 21,936 21,148 20,508 18,165 17,341 17,454 16,431 15,897 15,109 14,634 13,236 12,863 12,758 13,897 13,286 11,932 12,277 11,042 10,343 10,302 9'626 9,308 9,594 9,224 9,150 8.075 7,689 7,431 6,481 RWANDA SUDAN LATVIA HAITI GUAM CONGO DENMARK NORTH KOSOVO[1] FRENCH. GUINEA GABON MALTA CUBA SYRIA BELIZE GUYANA ARUBA UZBEKISTAN GHANA FINLAND CÔTE **SRI LANKA** SENEGAL MOZAMBIQ ANGOLA MALDIVES CABO VERDE ESTONIA ZIMBABWE MAURITANIA ANDORRA ESWATINI MALAWI DJIBOUTI ICELAND IRELAND KYRGYZSTAN NIGERIA SLOVENIA SINGAPORE MALAYSIA LITHUANIA **AFGHANIST** NORWAY AUSTRALIA CAMEROON UGANDA ZAMBIA MADAGASC NAMIBIA DR CONGO TAJIKISTAN FRENCH BOTSWANA CYPRUS GUADELOU BAHAMAS SURINAME EQUATORI CENTRAL PARAGUAY ALGERIA PUERTO MONTENEG LUXEMBOU RÉUNION TRINIDAD 2,085 1,648 1,675 1,554 1,428 1,381 1,504 1,312 1,181 1,007 509 500 491 WALLIS AND... OTHER ERITREA T060 NIGER GIBRALTAR SEYCHELLES BRUNEI. SAINT VANUATU MALI ERRA LEONE AN MARINO VIET NAM CHTENSTEIN INT MARTIN BURUNDI COMOROS TANZANIA OE ISLANDS ISLE OF MAN CAYMAN BARBADOS DOMINICA GRENADA GREENLAND ONTSERRAT ANGUILLA MARSHALL SOMALIA W ZEALAND IRGIN ISLANDS IT MAARTEN **TOME AND TURKS AND** MONGOLIA PAPUA NEW MONACO MAURITIUS BHUTAN CAMBODIA BERMUDA SAINT LUCIA NTIGUA AND NORTHERN NT VINCENT CALEDONIA IMOR-LESTE HOLY SEE SOLOMON FALKLAND AINT PIERRE NICARAGUA THAILAND GAMBIA **NEA-BISSAU** GUERNSEY TISH VIRGIN LAO PEOPLE'S SAINT KITTS BONAIRE, SINT

Other*:includes cases and deaths reported under the international conveyance(Diamond Princess)



1,500,000 150,000

15,000

4,000

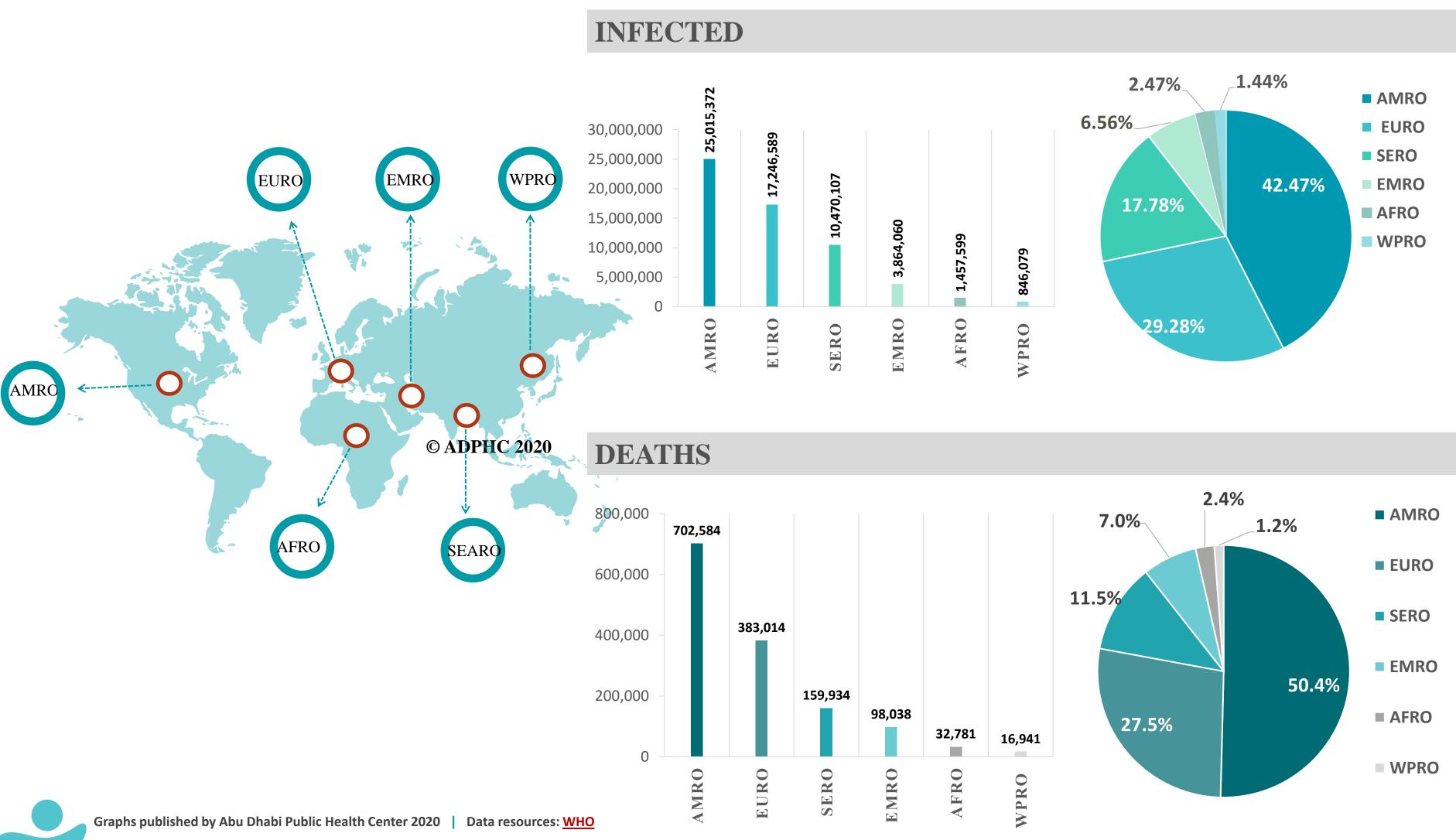
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Graphs published by Abu Dhabi Public Health Center 2020 Data resources: WHO

Date: 24 NOV 2020



Figure 8: Global Distribution of COVID-19 Cases per Region

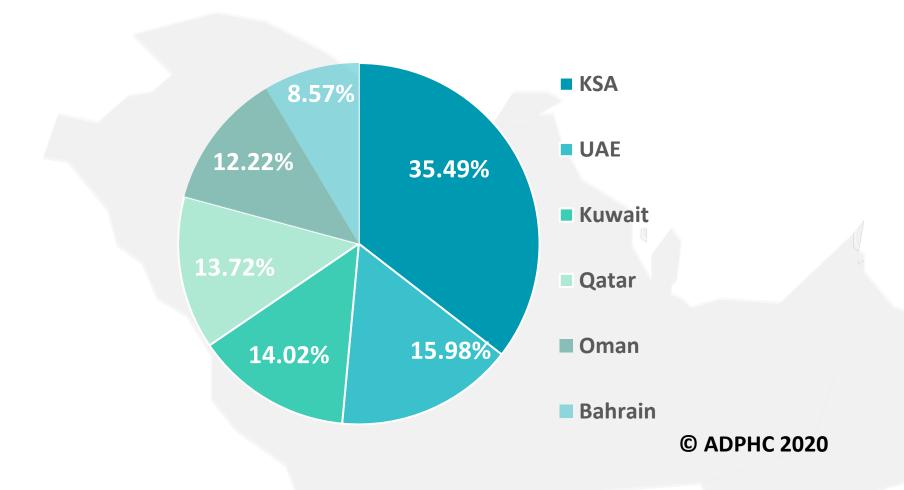


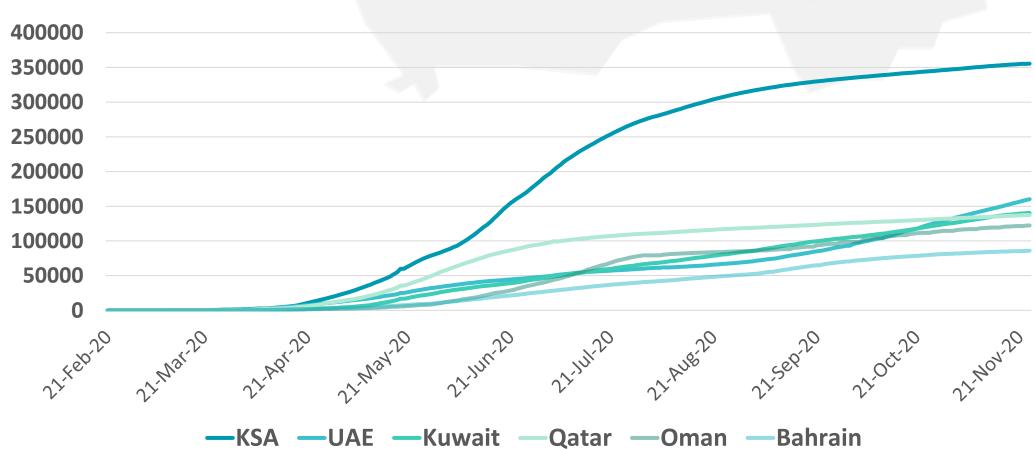
Date: 24 NOV 2020



Figure 9: Comparative Analysis of the Distribution of COVID-19 Cases in GCC Countries

TOTAL NUMBER OF INFECTED CASES



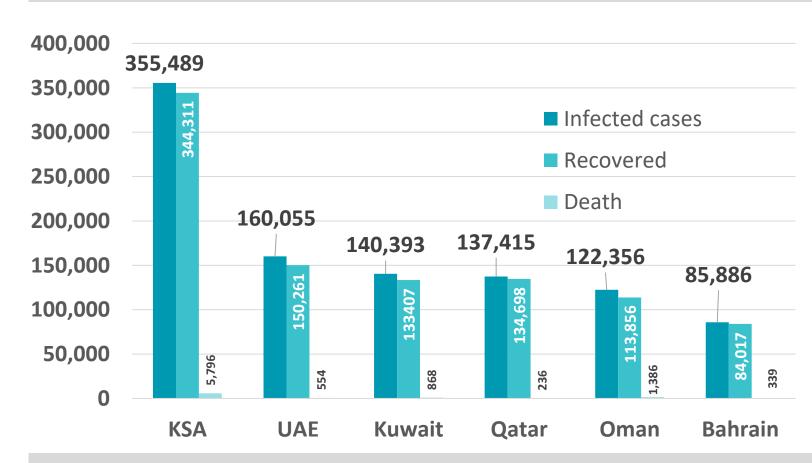


Graphs published by Abu Dhabi Public Health Center 2020 | Data resources: John Hopkins, WHO

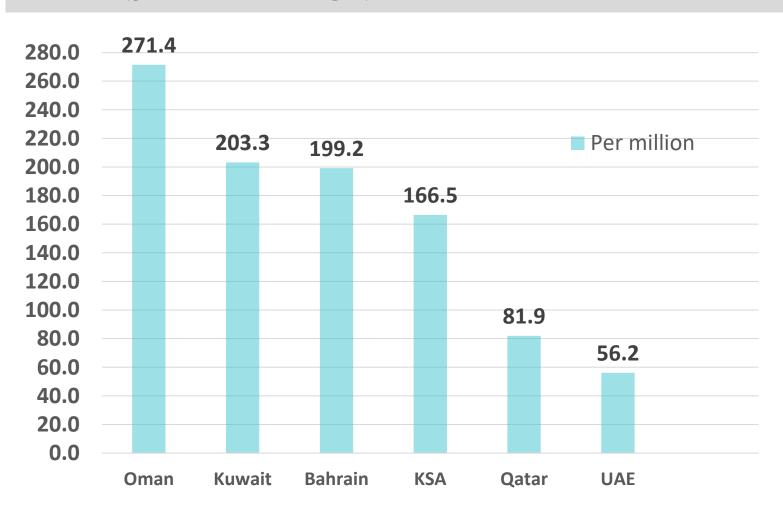
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TOTAL NUMBER OF INFECTED, RECOVERED AND DEATHS



DEATHS PER MILLION

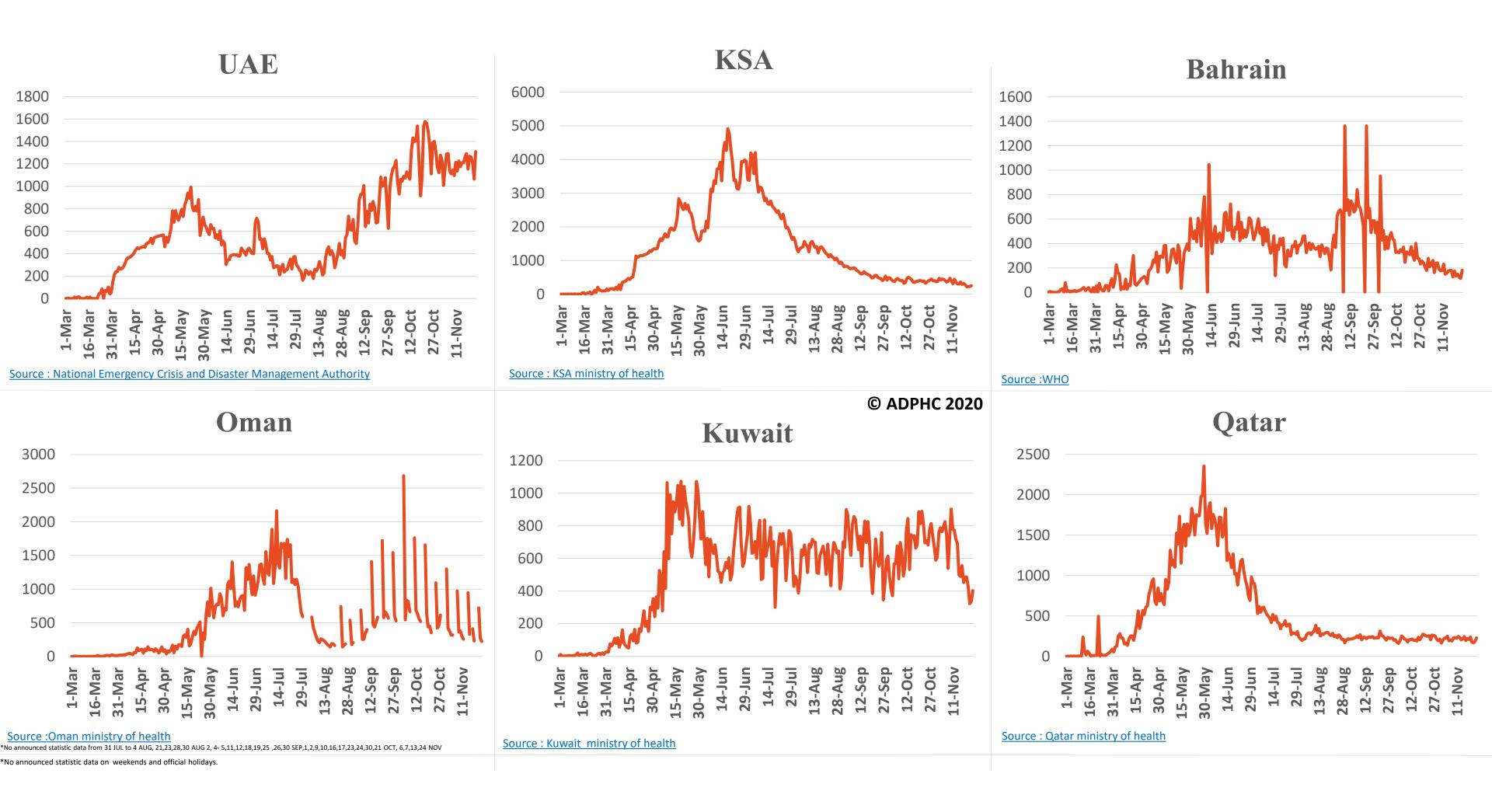


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Figure 10: Comparative Analysis of the Distribution of COVID-19 New Cases in GCC Countries

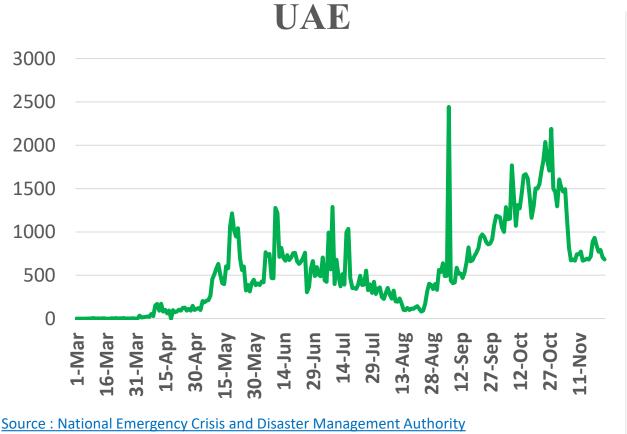


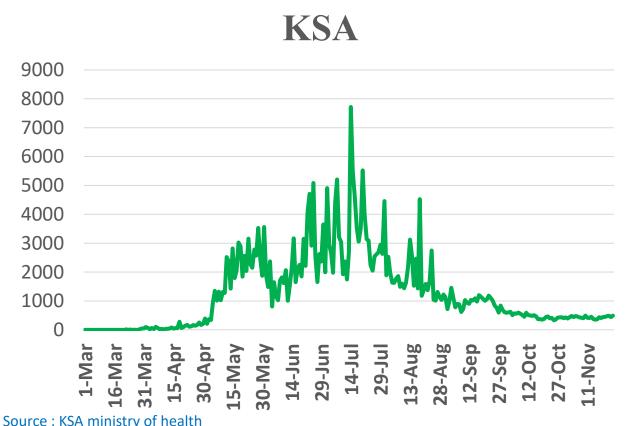


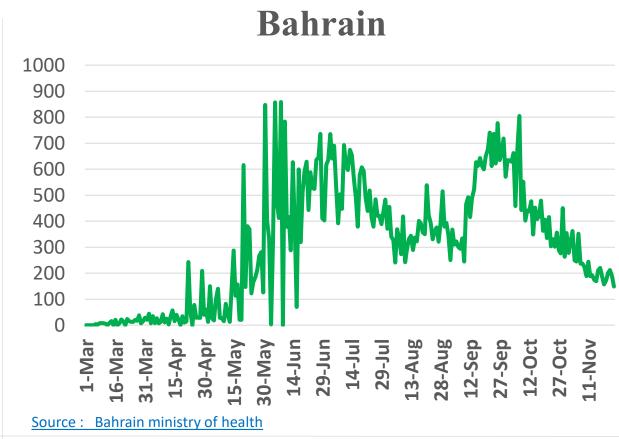
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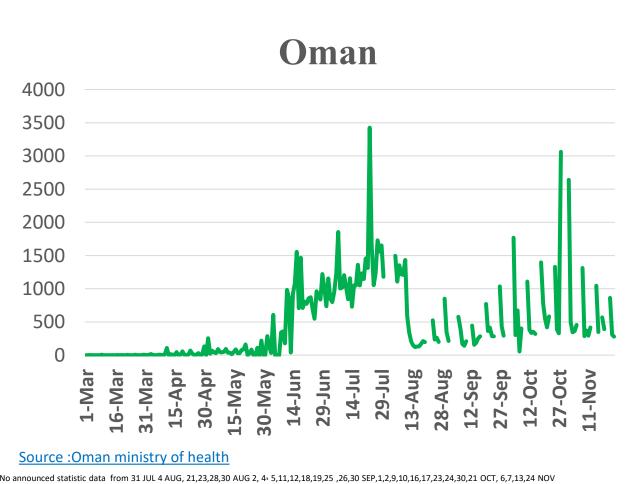


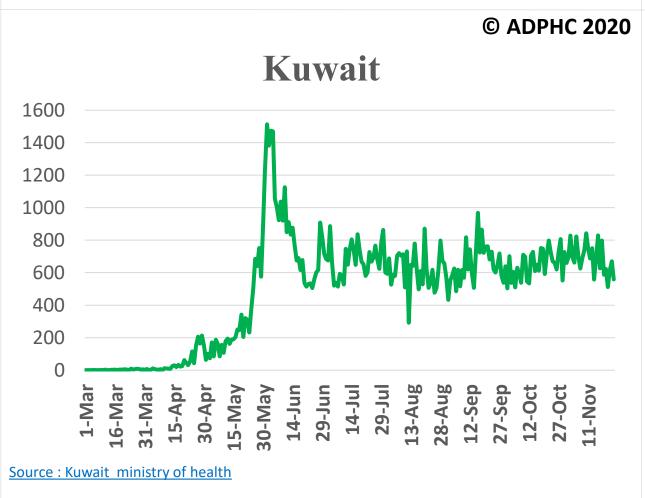
Figure 11: Comparative Analysis of the Distribution of COVID-19 Newly Recovered Cases in GCC **Countries**











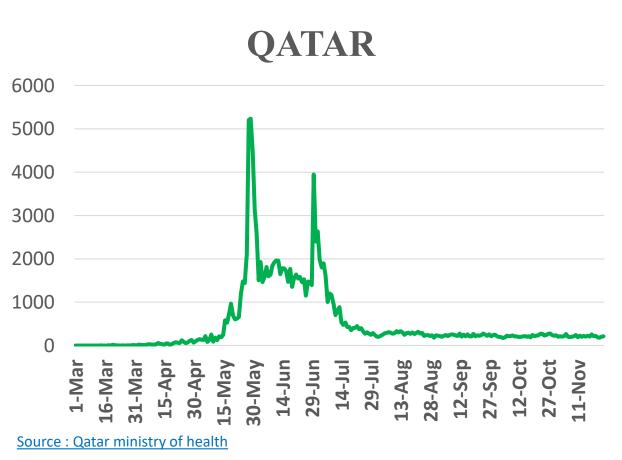
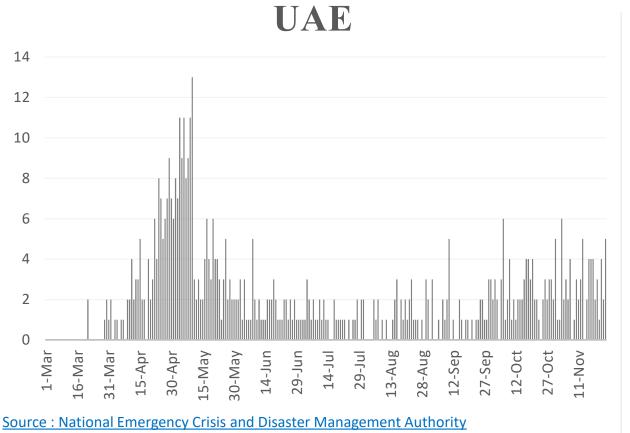
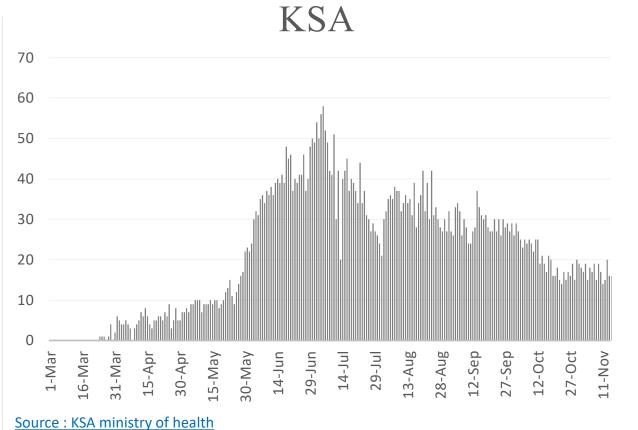


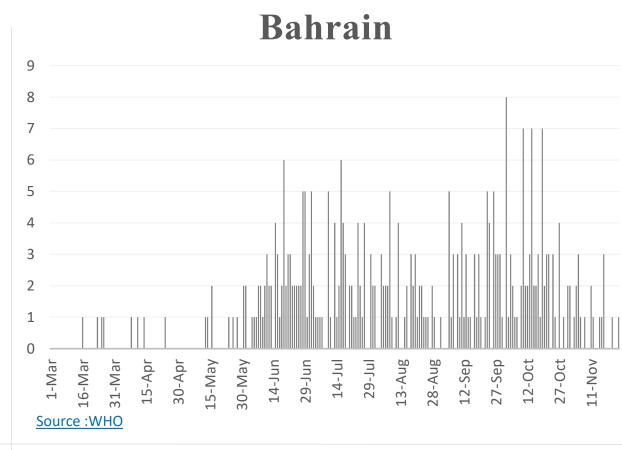


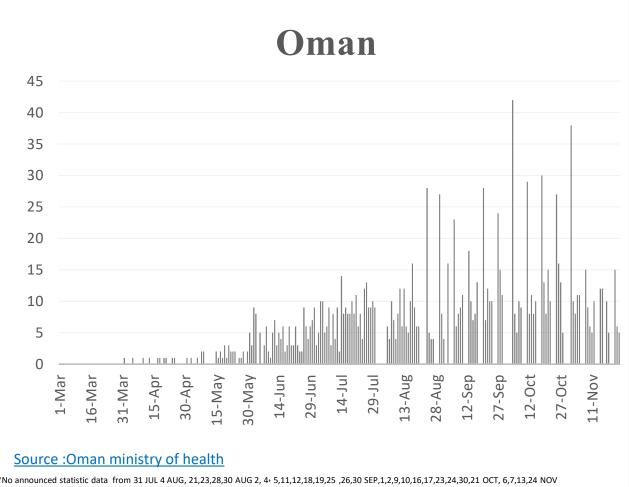


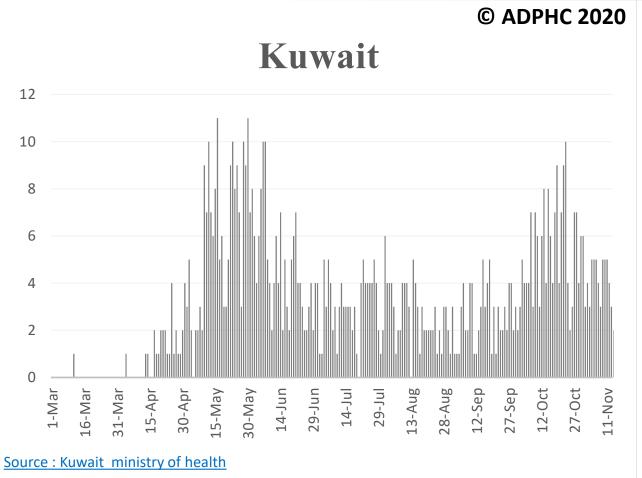
Figure 12: Comparative Analysis of the Distribution of COVID-19 New Death Cases in GCC Countries

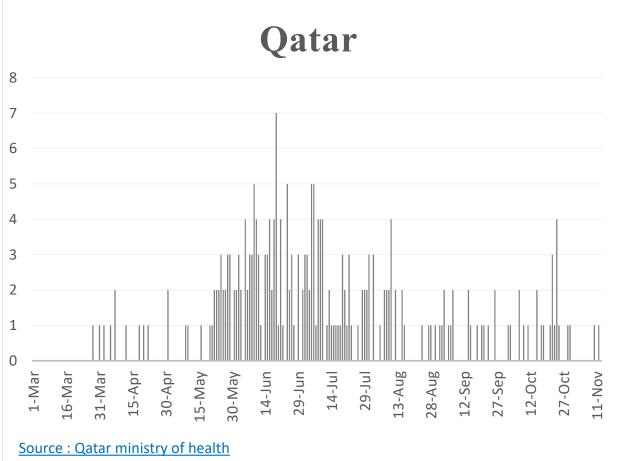












*No announced statistic data on weekends and official holidays



IMMUNOLOGY





Article 1

Safety Immune response in COVID-19: A review

Published

November 11, 2020, Science Direct

- The immune system often protects against diseases as well as viruses as it produces antibodies for the purpose of killing the pathogens.
- This review study therefore presented a brief overview of the immune system with respect to its protection of the human body from COVID-19; exemplifies the immune system processes, the way it works, along with its mechanism to fight virus; and present information on the most current experimental data and treatments on COVID-19.
- Several different kinds of potential challenges for the immune system were also addressed.
- The article was concluded with what foods to consume and avoid, and also encouraged physical exercise.
- This study can be utilized globally as a state of the art in this critical moment for promising alternative solutions related to coronavirus survival.





Article 2 Event-specific interventions to minimize COVID-19 transmission

Published

November 19, 2020, PNAS

- This study aimed to develop a conceptual framework and model to resolve some of the uncertainties around the effectiveness of different interventions.
- A simple model on the COVID-19 transmission at workplaces, events, and other settings was provided. A fundamental mathematical relationship between the number of people in contact with an infectious individual, the time for which they are in contact, and the risk of transmission per unit time was built.
- The study introduced the concept of "event R," the expected number of new infections due to the presence of a single infectious individual at an event. The investigators used data from reported single-event, short-duration outbreaks to estimate the transmission rate, number of contacts, and turnover at events.
- These were utilized to predict how many new infections are expected to occur at various events given the presence of a single infectious individual. The types of interventions that were most effective in reducing the number of infections were determined such as: reducing transmission rates (such as with masks), social distancing (reducing the number of people in contact), or bubbling (keeping contact groups small and consistent).
- This study therefore, outlined how this information can be obtained and used to reopen economies with principle measures to reduce COVID-19 transmission.



CLINICAL FEATURES





Article 3

Characteristics, onset, and evolution of neurological symptoms in patients with COVID-19 Published

November 17, 2020, NCBI

- The neurological symptoms associated with COVID-19, their main characteristics, and their evolution in the Tunisian population were described in this study followed by discussion of their underlying pathophysiological mechanisms.
- In this nationwide retrospective observational study, patients in Tunisia diagnosed with COVID-19 between the 2nd of March and the 16th of May 2020 were contacted by telephone.
- The investigators collected demographic and clinical data and specified characteristics and evolution of main neurological symptoms. From the 1034 confirmed cases of COVID-19 patients, 646 were included (mean age 42.17 years old) and 466 (72.1%) had neurological symptoms.
- Neurological symptoms were isolated 22.7% (n = 106). Headache was the most frequent neurological symptom (n = 279, 41.1%): mainly frontotemporal (n = 143, 51.1%) and mild or moderate (n = 165, 59.1%). When associated with fever (n = 143, 51.1%) and mild or moderate (n = 165, 59.1%). 51.3%), headache was more likely to be severe and present at onset.
- Recovery was reported in 83.2%. Smell and taste impairment were found in 37.9% (n = 245) and 36.8% (n = 238) respectively. Among them, 65.3% (156/239) were anosmic and 63.2% (146/231) were ageusic. A complete improvement was found in 72.1% (174/240) of smell impairment and in 76.8% (179/233) of taste impairment. Myalgia (n = 241, 37.3%) and sleep disturbances (n = 241, 37.3%) were also frequent. Imported cases had more neurological symptoms. In 14.5%, neurological symptoms preceded the respiratory signs (RS).
- Neurological symptoms in COVID-19 are frequent, can be isolated and present at onset. A total recovery is the most recorded outcome. RS are predictive of neurological symptoms. Studies in to virus and host genetics should be considered in future to understand the different phenotypes.



PUBLIC HEALTH RESPONSE





Article 4

Timeline: WHO's COVID-19 response

Published

September 10, 2020, WHO

- The timeline provided in the link below uses data from WHO's COVID-19 Dashboard on cases reported by countries, territories and areas to WHO.
- Text for listings has been taken from the Timeline of WHO's response to COVID-19. All counts are subject to variations in case detection, definitions, laboratory testing, and reporting strategies between countries, states and territories.

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THANK YOU











