

# SCIENTIFIC RESEARCH MONITORING ON COVID-19

10 SEPTEMBER 2020

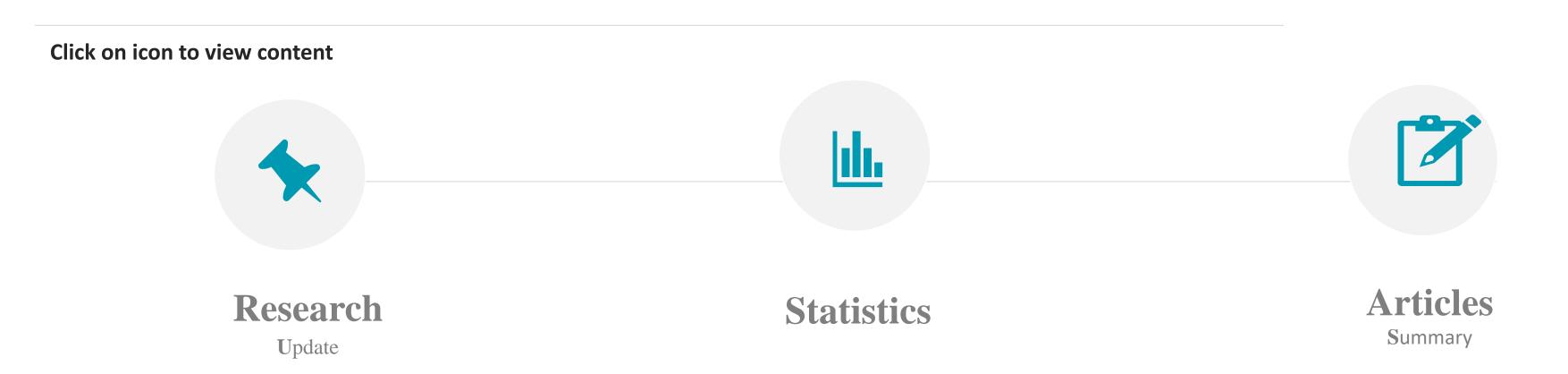
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## SCIENTIFIC RESEARCH MONITORING ON COVID-19



(ISSUE 221)

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 <a href="PHP@adphc.gov.ae">PHP@adphc.gov.ae</a>



## 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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## Public Health Response

Two Meters or One: What is the Evidence for Physical Distancing in COVID-19?

**Ministry Of Health Contribution** 

### **Clinical Features**

New Research Helps to
Increase Understanding of
the Impact of COVID-19 for
Pregnant Women and Their
Babies

### **Clinical Features**

Clinical and Imaging
Findings of Discharged
Patients with SARS-CoV-2
Positive Anal Swab Samples:
A Descriptive Study

### Public Health Response

Substance Use Considerations During COVID19

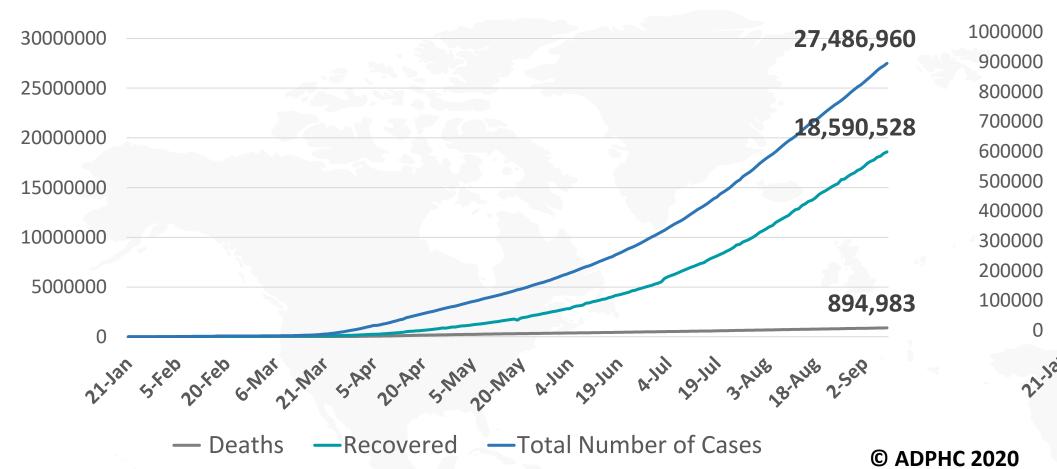


#### FROM 21 JAN TO 9 SEPT 2020



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)



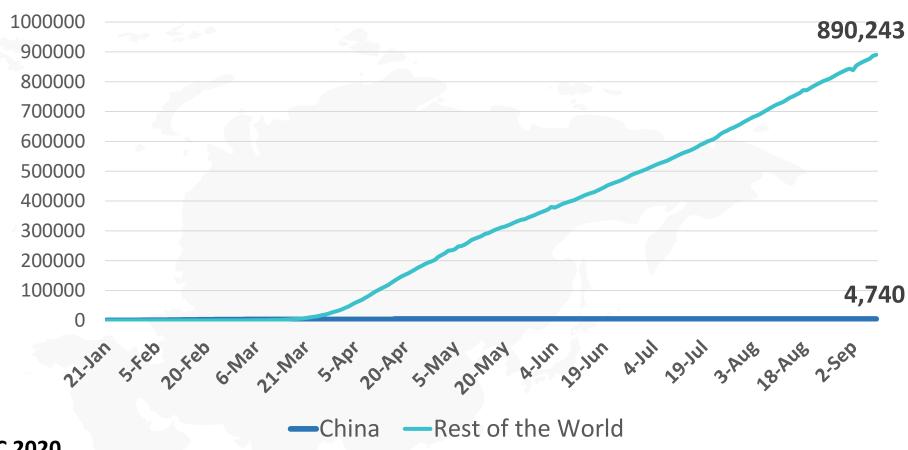
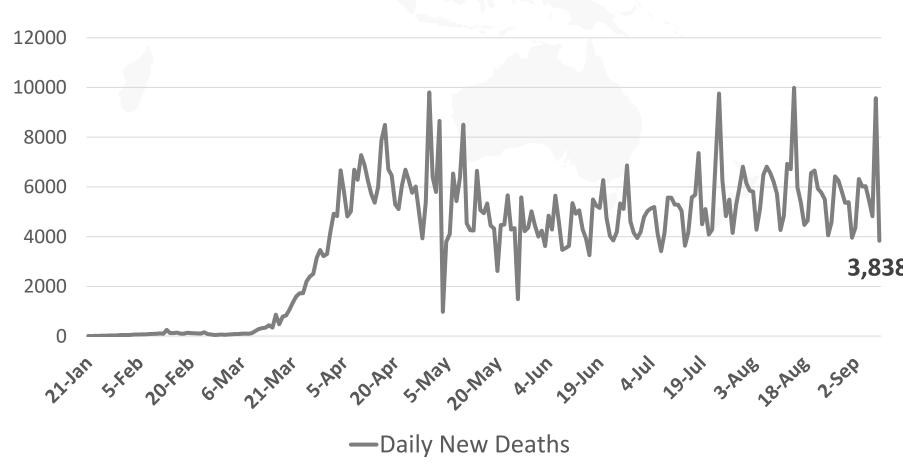


Figure 2: Daily New Infected COVID-19 Cases (China and rest of the world)

218,140

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





350000

300000

250000

200000

150000

100000

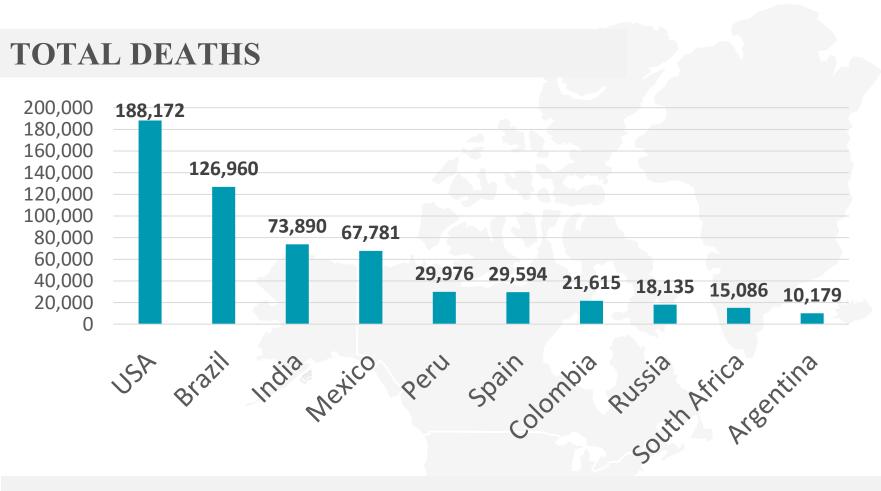
50000

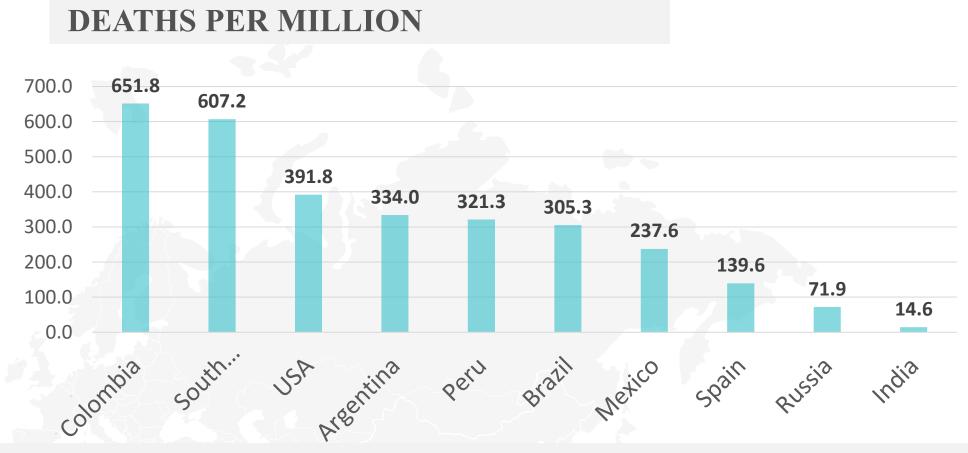
China — Rest of the World

#### **FROM 21 JAN TO 9 SEPT 2020**

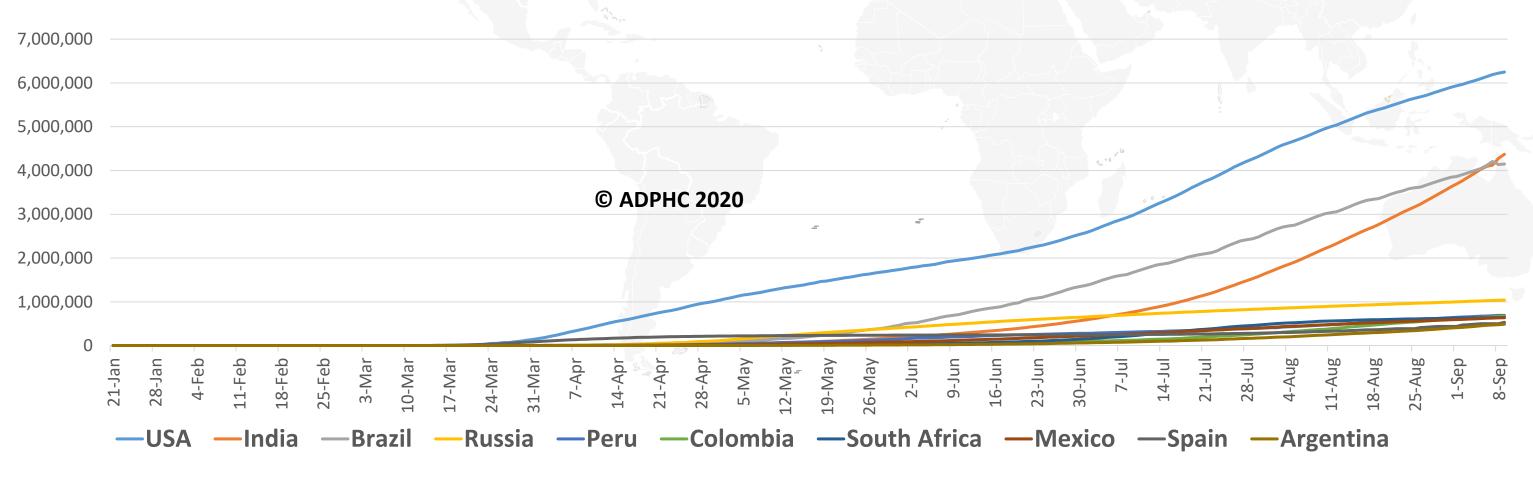


Figure 5: Top 10 Countries in the Total Number of Cases Due to COVID-19





#### TOTAL INFECTED CASES



6,248,989
4,370,128
4,147,794
1,041,007
691,575
671,848
640,441
637,509
534,513
488,007



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

#### **FROM 21 JAN TO 9 SEPT 2020**



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



#### **Daily Tests**

76,168.9 Average Tests770.1 per 100k population0.8% Positive Rate



#### **Daily Cases**

634.4 Average Cases6.4 per 100k population



### **Daily Recovered**

761.4 Average Recovered7.7 per 100k population



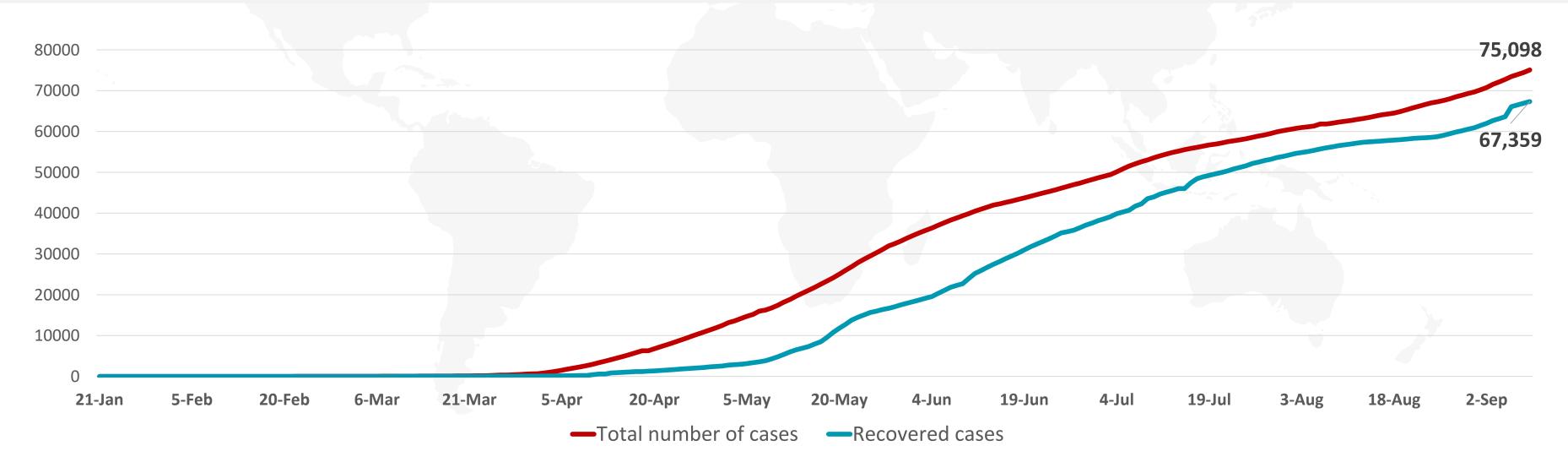
#### **Daily Deaths**

**0.9** Average Deaths

**0.0** per 100k population

**0.1%** Case Fatality Rate

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



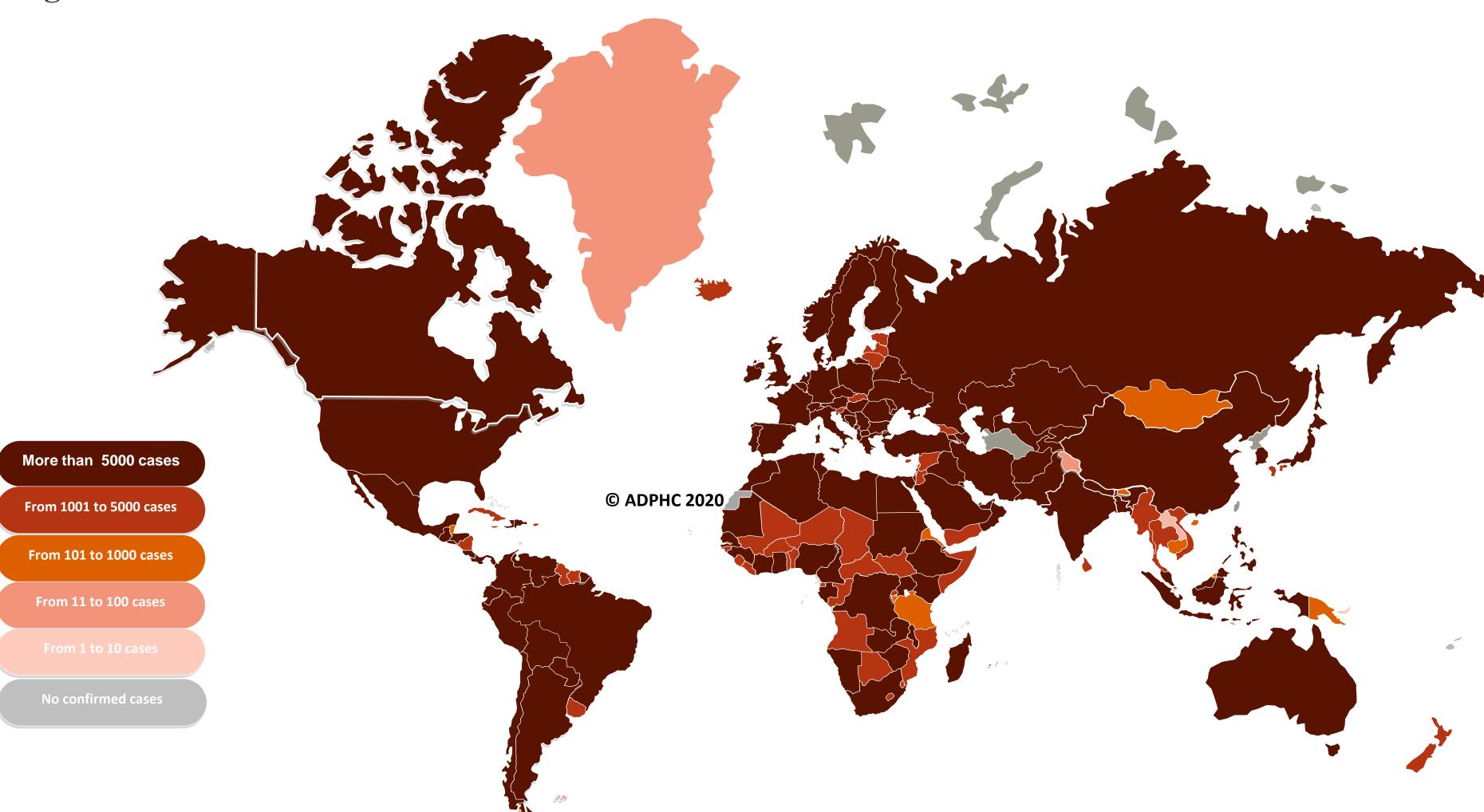


Graphs published by Abu Dhabi Public Health Center 2020 | Data resources: FCSA, WHO, John Hopkins

**Date: 9 SEPT 2020** 



Figure 7A: Global Distribution of COVID-19 Cases





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

**Date: 9 SEPT 2020** 



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

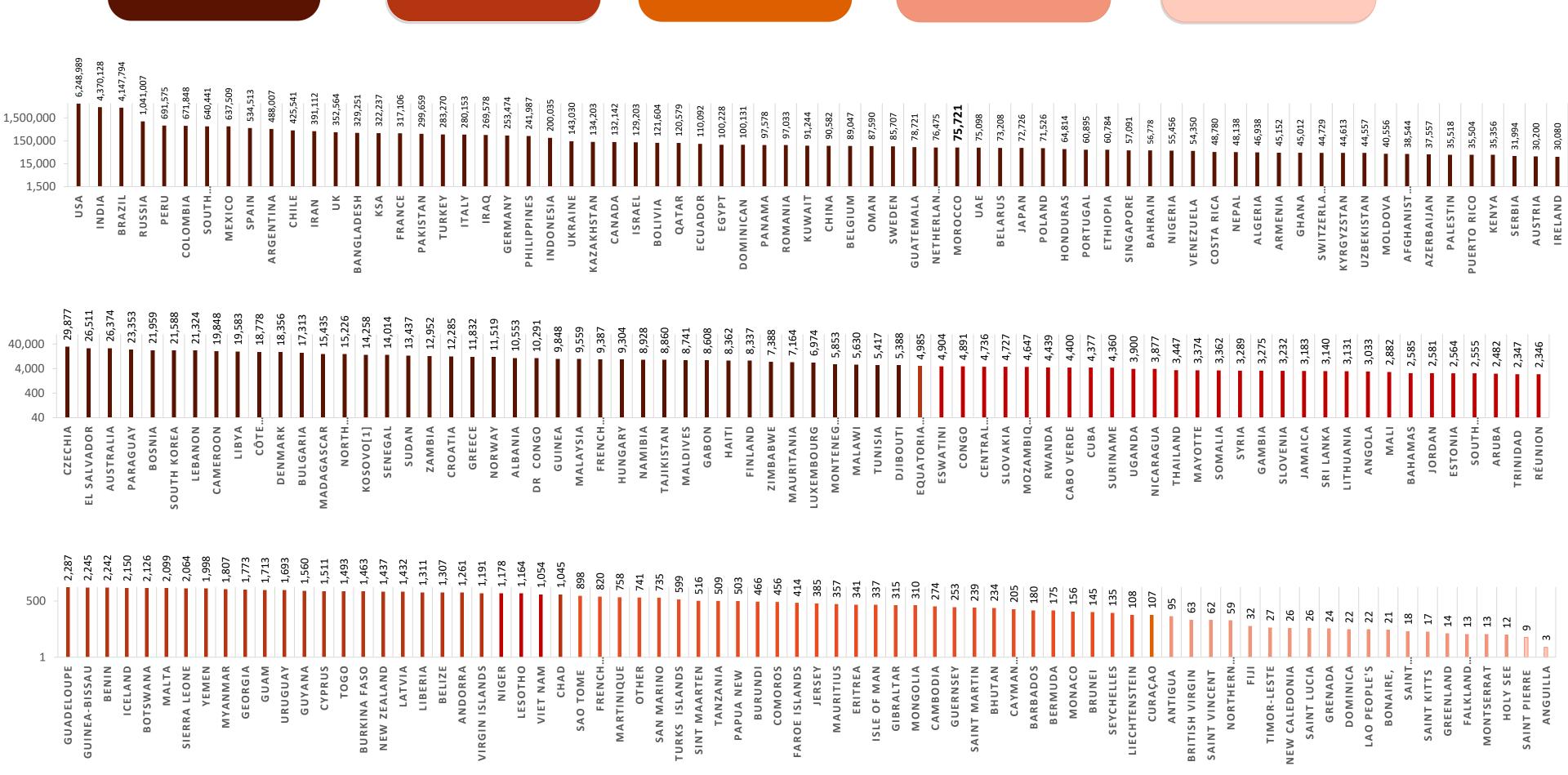
More than 5000 cases

From 1001 to 5000 cases

From 101 to 1000 cases

From 11 to 100 cases

From 1 to 10 cases



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

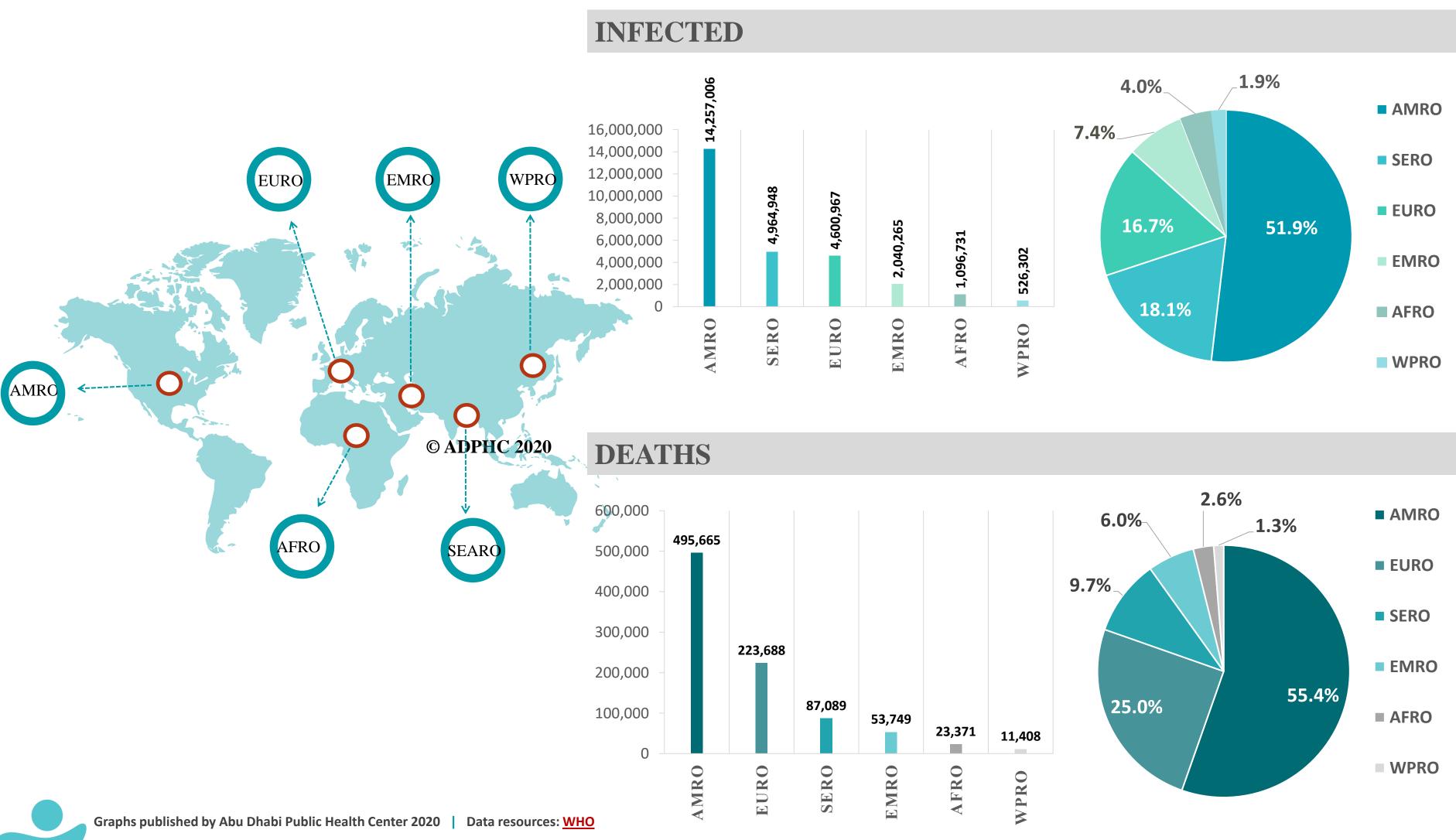


Graphs published by Abu Dhabi Public Health Center 2020 Data resources: WHO

**Date: 9 SEPT 2020** 



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

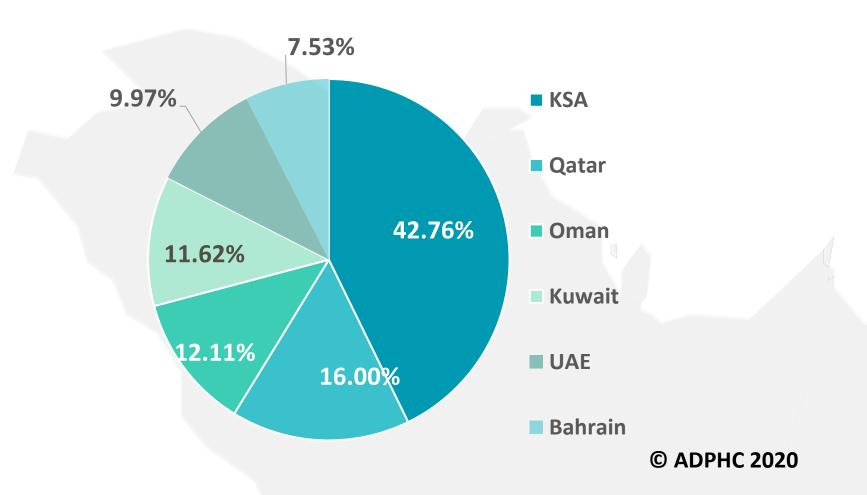


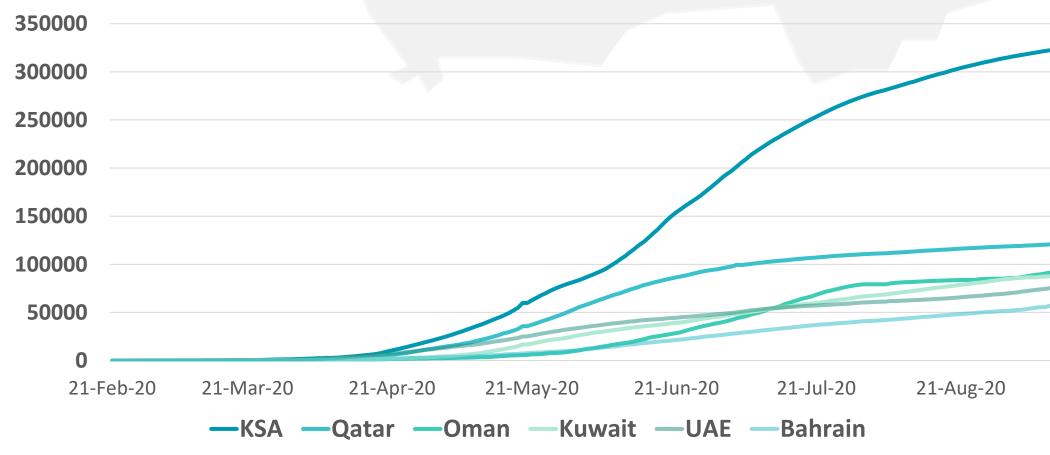
**Date: 9 SEPT 2020** 



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

#### TOTAL NUMBER OF INFECTED CASES



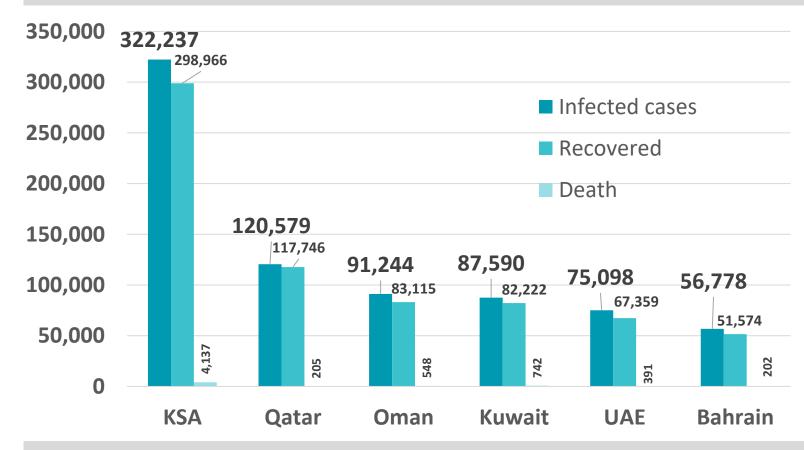


#### Graphs published by Abu Dhabi Public Health Center 2020 | Data resources: <u>John Hopkins</u>, <u>WHO</u>

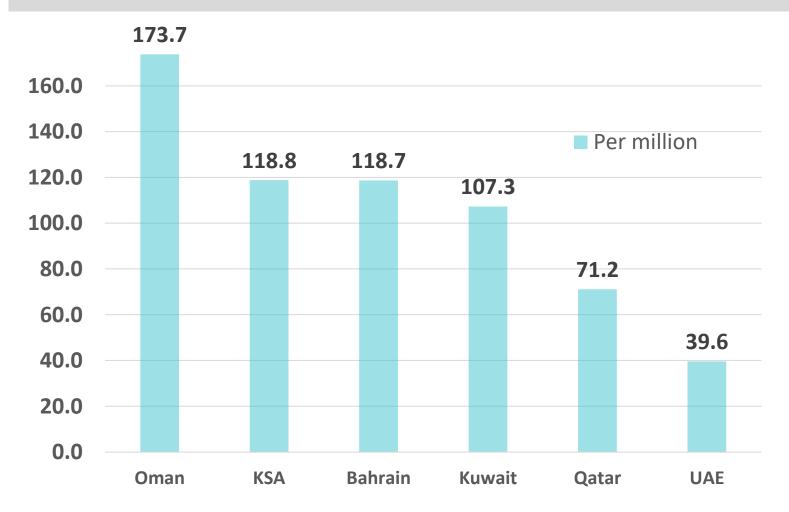
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## TOTAL NUMBER OF INFECTED, RECOVERED AND DEATHS



#### **DEATHS PER MILLION**



مركز أبوظبي للصحة العامة 2020 ©

هذه الوثيقة مملوكة لمركز أبوظبي للصحة العامة، ولا يجوز استخدامها لغير الأغراض المخصصة لها. ويحظر استخدام أو إعادة إنتاج هذه الوثيقة بدون إذن



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

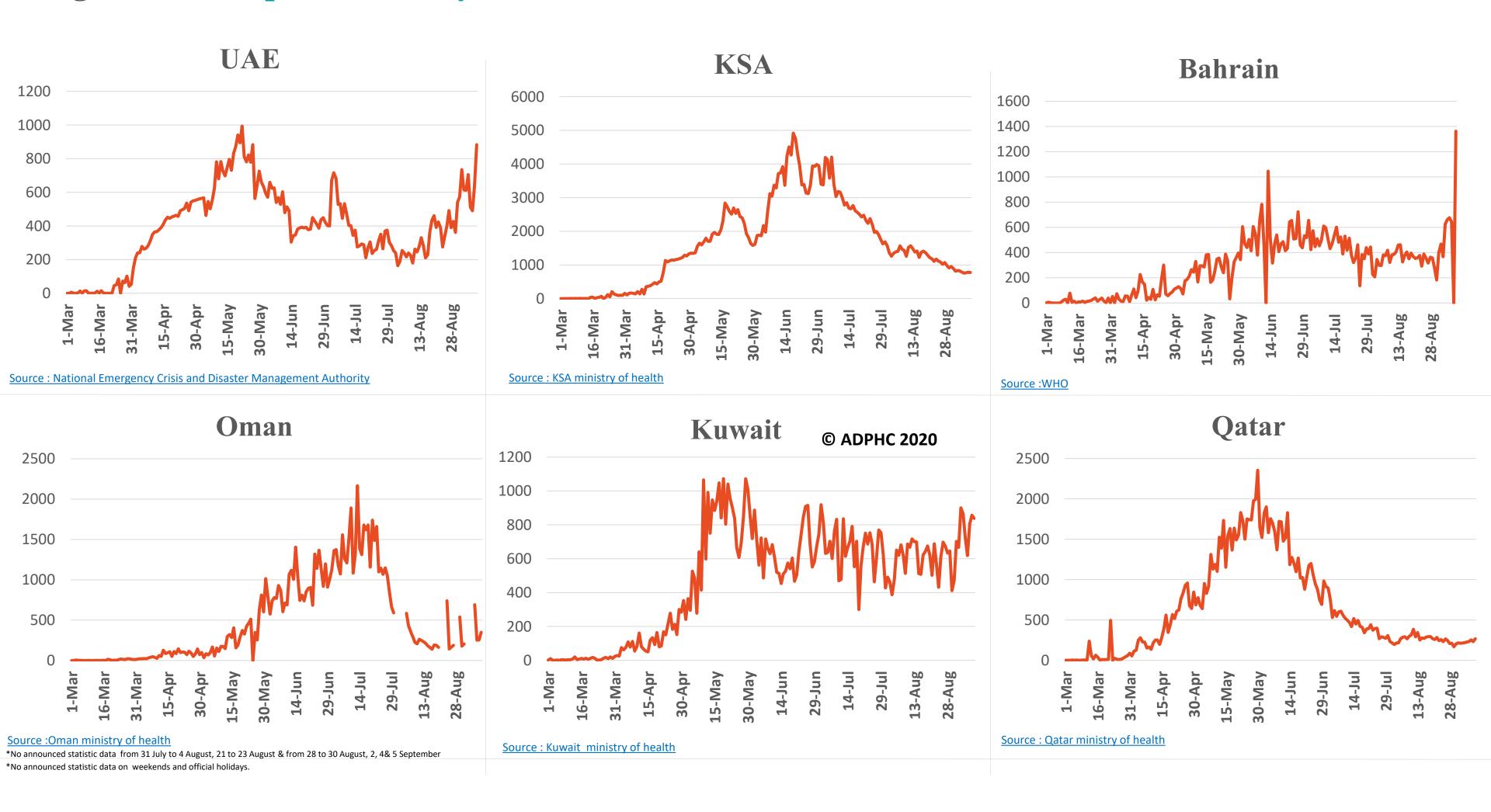
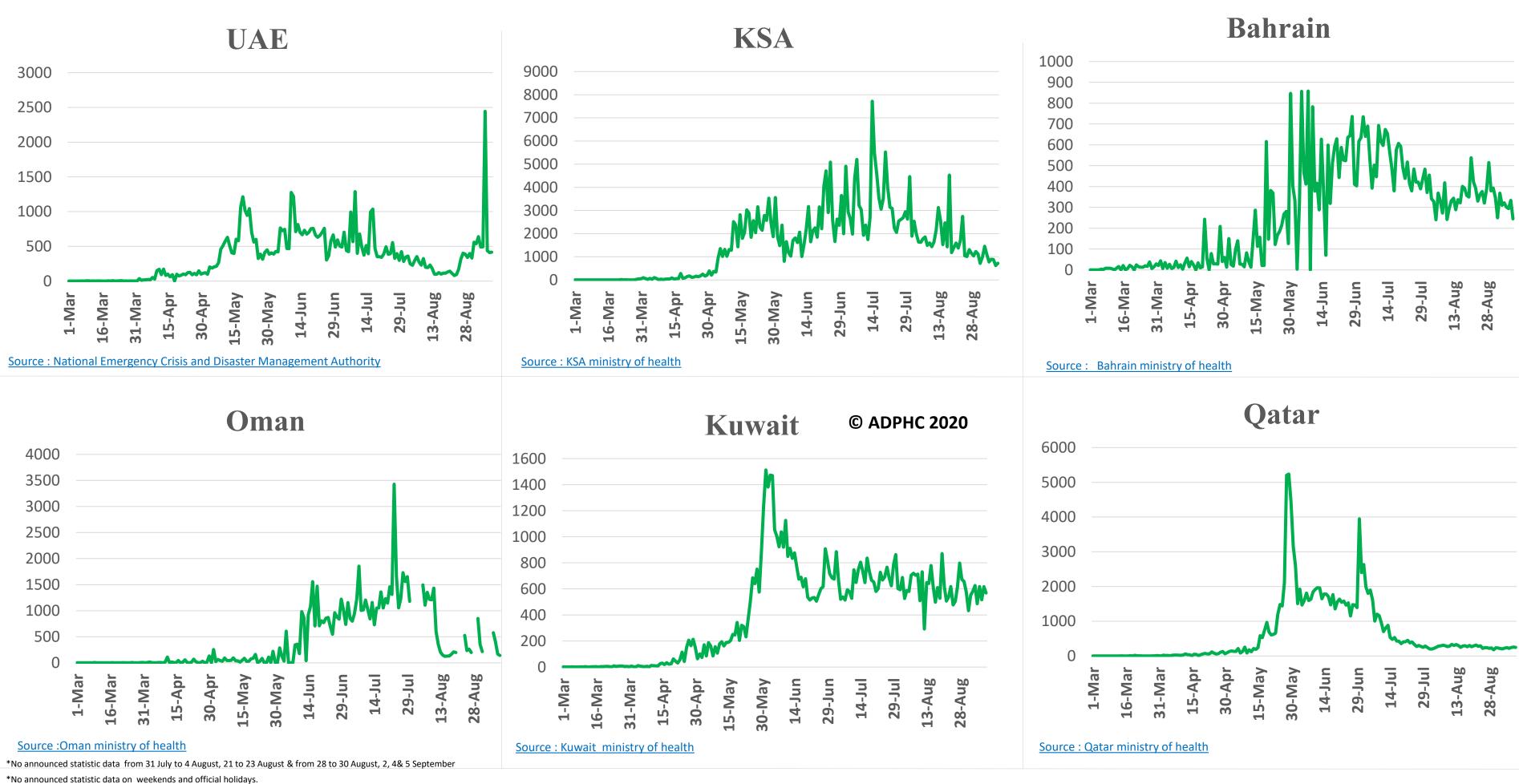






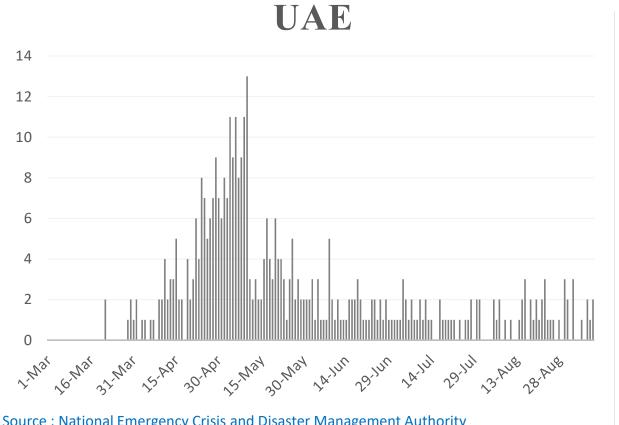
Figure 11: Comparative Analysis of the Distribution of COVID-19 Newly Recovered Cases in GCC Countries

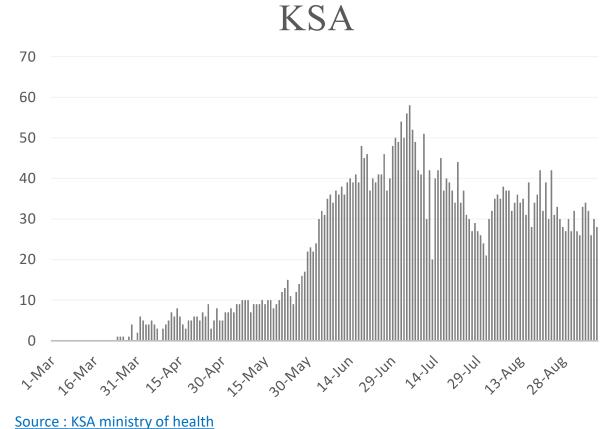


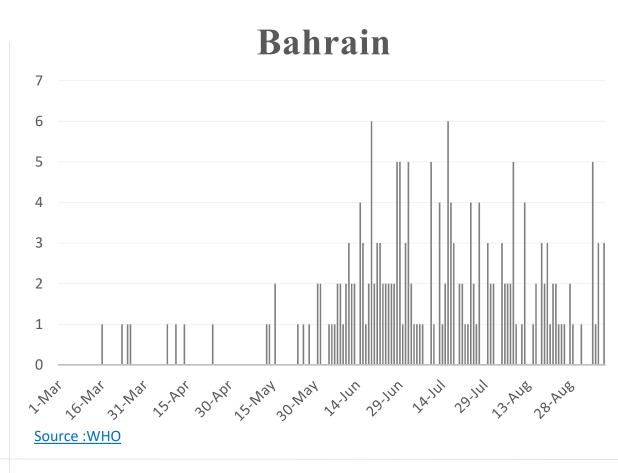
#### FROM 1 MAR TO 9 SEPT 2020

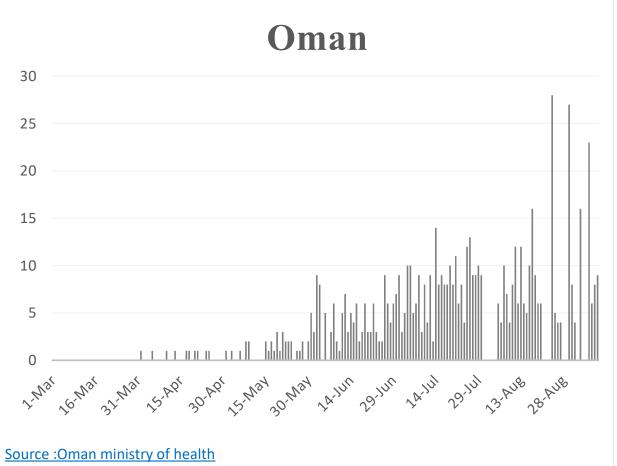


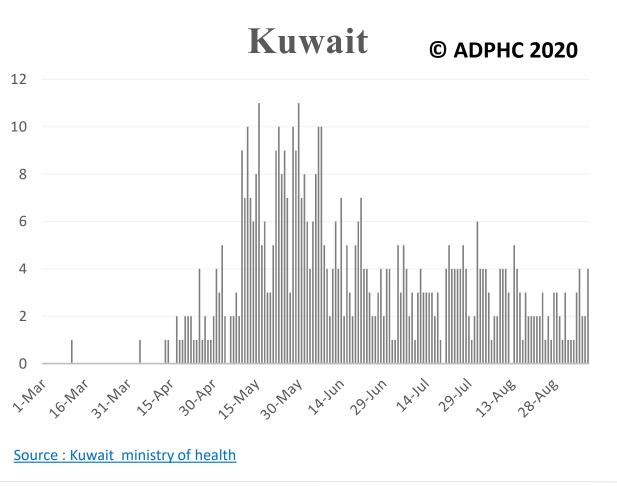
Figure 12: Comparative Analysis of the Distribution of COVID-19 New Death Cases in GCC Countries

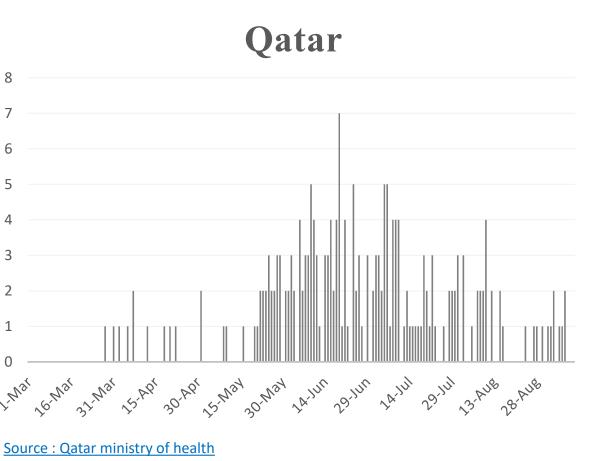












\*No announced statistic data from 31 July to 4 August, 21 to 23 August & from 28 to 30 August, 2, 4& 5 September

\*No announced statistic data on weekends and official holidays.



### PUBLIC HEALTH RESPONSE:





Article 1 Published

## Two Meters or One: What is the Evidence for Physical Distancing in COVID-19? 25 August 2020, The BMJ

- Physical distancing needs to be considered solely as a single part of a wider public health approach to containing the COVID-19 pandemic.
- It should be implemented together with combined strategies of people-air-surface-space management, including hand hygiene, cleaning, occupancy, indoor space and air management, and appropriate protective equipment, such as masks, for the setting.
- Distribution of viral particles is affected by numerous factors, including airflow. Evidence suggests SARS-CoV-2 may travel more than 2 m through activities such as coughing and shouting.
- Rules on distancing should reflect the multiple factors that affect risk, including ventilation, occupancy, and exposure time.



### CLINICAL FEATURES





Article 2

### New Research Helps to Increase Understanding of the Impact of COVID-19 for Pregnant Women and Their Babies 01 September 2020, The BMJ Published

- New research findings published in the BMJ help to shed light on the risks of COVID-19 for pregnant women and their babies. The paper determined the clinical manifestations, risk factors, and maternal and perinatal outcomes in pregnant and recently pregnant women with suspected or confirmed coronavirus disease 2019 (COVID-19).
- The paper suggests that pregnant women seen at the hospital with suspected or confirmed COVID-19 are less likely to experience a fever or muscle pain; however, if they develop the severe disease, they are more likely to need intensive care than non-pregnant women with COVID-19. This is the first 'living systematic review'; ongoing, global, research which is collecting and synthesising data on the situation for pregnant women with COVID-19 in countries worldwide.
- Evidence currently suggests that people who are non-white, are older, who are overweight and/or have a pre-existing medical condition, are more vulnerable to severe disease due to COVID-19.
- The evidence shows that having pre-existing health conditions such as diabetes or high blood pressure, puts you at greater risk, whether or not you are pregnant. These findings underline the need for pregnant women and recently pregnant women to take all precautions to avoid COVID-19 disease, in particular, if they have underlying conditions.



## CLINICAL FEATURES





#### Clinical and Imaging Findings of Discharged Patients with SARS-Article 3 CoV-2 Positive Anal Swab Samples: A Descriptive Study Published

01 September 2020, <u>BMC Infectious Diseases</u>

- This study explored the clinical features and CT findings of clinically cured coronavirus disease 2019 (COVID-19) patients with viral RNA positive anal swab results after discharge.
- Around forty-two confirmed COVID-19 patients admitted into hospital between January 20, 2020, and March 2, 2020, were tested for SARS-CoV-2 RNA.
- The findings from the anal swab positivity rate for SARS-CoV-2 RNA in discharged patients was 14.3% (6/42). All six patients were male. In the positive group, 40% of the patients (2/5) had a positive stool occult blood test (OBT), but none had diarrhoea. The median duration of fever and major symptoms in the positive patients was shorter than that of the negative patients.
- The asymptomatic case incidence in the positive group (33.3%) was also higher than that of the negative group (5.6%). There were no significant differences in the CT manifestation or evolution of the pulmonary lesions between the two groups.
- Thus, the patients with viral RNA positive anal swabs did not exhibit gastrointestinal symptoms, and their main symptoms disappeared at an early stage.
- They had similar CT features to the negative patients, which may be easier to be ignored. A positive occult blood test may signpost gastrointestinal damage caused by SARS-CoV-2 infection.



## PUBLIC HEALTH RESPONSE





Article 4

## Substance Use Considerations During COVID19

Published

September 2020, WHO

- The considerations presented in this document have been developed by the WHO to support mental well-being in different target groups during the outbreak.
- Different target groups have a responsibility to steer clear of substance use throughout this pandemic and beyond, and help others to do the same, and get the help they need, in case they are using substances or suffering from substance use disorders.



# THANK YOU











