



Coronavirus Disease 2019 (COVID-19)

National Surveillance Report as of 11/04/2022

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Summary

- As of April 11th, 2022, 457,257 COVID-19 cases have been diagnosed, of which 986 died due to COVID-19 (case fatality risk: 0.2%).
- In the last 14 days (since March 29th, 2022), 40,795 cases were diagnosed. The 14-day cumulative diagnosis rate is 4,594 per 100,000 population.
 - The median age was 37 years (IQR: 21-54 years); sex information was available for 29,785 (73%) cases, of which 54.5% were females (n = 16,223), and 45.5% males (n = 13,562).
 - By place of exposure, information was available for 40,521 (99.3%) cases, of which 2.4% (n = 993) were imported and 97.6% (n = 39,528) were locally-acquired.
- As of April 13th, 2022, 184 people with COVID-19 (who have not tested negative for SARS-CoV-2 after their diagnosis or who are still considered infectious) were hospitalized (currently notified and among those diagnosed till April 11th including those discharged/who died on April 13th). The median age of hospitalized patients with COVID-19 (n = 184, including those discharged/who died on that day), is 82 years (IQR: 70-87 years). Of these, 56.8% (n = 84 out of 148 with available information) are males and 40.4% (n = 44 out of 109 with information on district) are from Limassol district. Twenty cases (15.6%) still hospitalised have comorbidities (out of 128 with available information).
- As April 13th, 2022, of 12 cases in intensive care units (ICU) (who have not yet tested negative for SARS-CoV-2 after their diagnosis or who are still considered infectious and are currently notified and diagnosed till April 11th including those transferred/who died on April 13th), 9 (75%) are intubated. The median age of these ICU patients is 69 (IQR: 58-77) years; sex information is not available at the moment for one patient and eight are males (72.7%). Four (36.4%) ICU patients have reported comorbidities (out of 11 with available information).
- Over the last 14 days, 41,857 RT PCR and 970,320 rapid antigen tests have been performed (4,713.6 RT PCR and 109,270.3 rapid antigen tests per 100,000 population).



Epidemiological surveillance in the Republic of Cyprus

Analyses are based on laboratory-confirmed cases notified to the Epidemiological Surveillance Unit of the Ministry of Health.

As of April 11th, 2022, 457,257 cases of coronavirus disease 2019 (COVID-19) have been diagnosed (laboratory-confirmed) (Figure 1, 2 and 3).

In the last 14 days (29 March – 11 April 2022), 40,795 cases have been diagnosed. The 14-day cumulative diagnosis rate of COVID-19 (per 100,000 population)¹, a measure which reflects the number of active COVID-19 cases in the population (prevalence)², is 4,594 per 100,000 population (Figure 3).

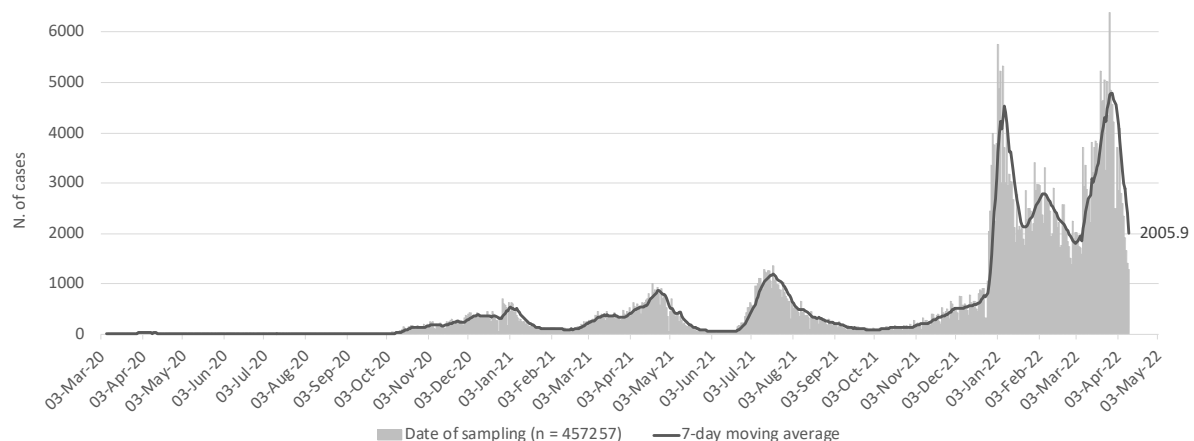


Figure 1: Number and 7-day moving average (last moving average on April 11th, 2022, is shown on the graph) of laboratory-confirmed COVID-19 cases in the Republic of Cyprus since 03/03/2020 by date of sample collection*.

* when date of sample collection was not available, laboratory result date or hospitalisation date or death date was used.

¹Population denominator for end of year 2019, available at https://www.mof.gov.cy/mof/cystat/statistics.nsf/populationcondition_21main_en/populationcondition_21main_en?OpenForm&sub=1&sel=4

²Coronavirus disease 2019 (COVID-19) pandemic: increased transmission in the EU/EEA and the UK – seventh update, 25 March 2020. Stockholm: ECDC; 2020. <https://www.ecdc.europa.eu/sites/default/files/documents/RRA-seventh-update-Outbreak-of-coronavirus-disease-COVID-19.pdf>

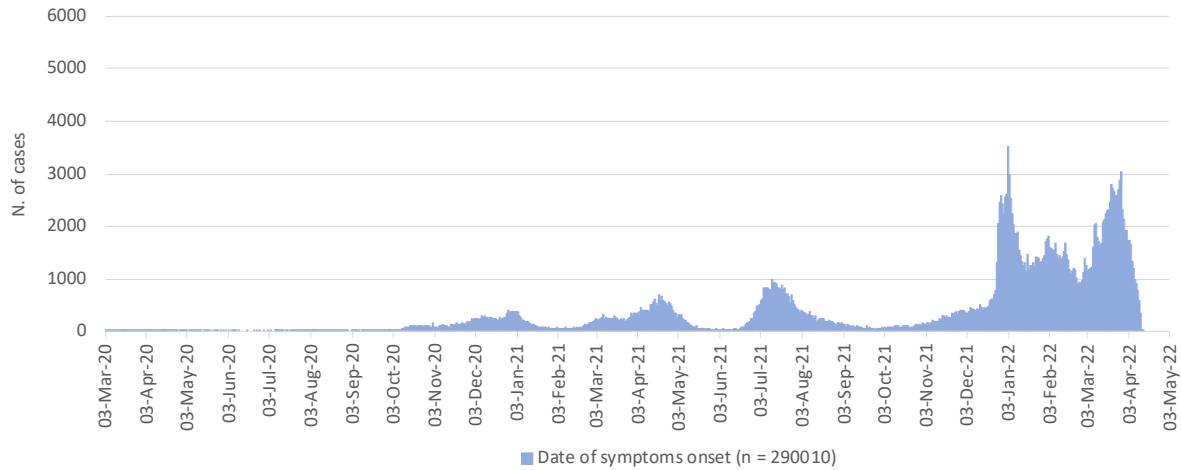


Figure 2: Number of laboratory-confirmed COVID-19 cases in the Republic of Cyprus since 03/03/2020 by date of symptoms onset.
Recent data should be interpreted with caution due to the possibility that cases with date of onset within the reporting period have not yet been diagnosed.

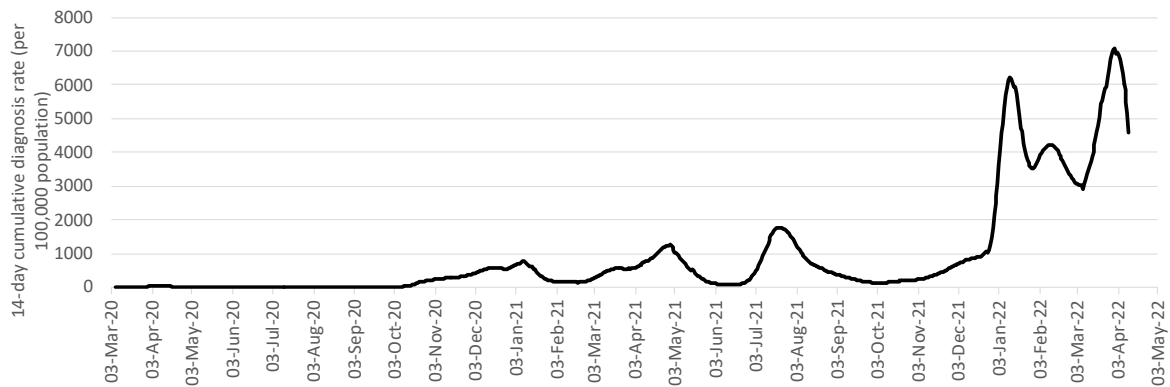


Figure 3: COVID-19 14-day cumulative diagnosis rate per 100,000 population (proxy of COVID-19 prevalence).



Characteristics of cases diagnosed in the last 14 days

Age, sex, and place of residence

Among 40,795 cases diagnosed since March 29th, 2022, sex information was available for 29,785 (73%) cases, of which 54.5% were females (n = 16,223), and 45.5% males (n = 13,562).

By age group, cases included 9,921 individuals aged 0-19 years-old (24.3%), 23,149 individuals aged 20-59 years (56.8%), and 7,716 individuals aged 60 years and older (18.9%), while for 9 cases age was not known. Figure 4 shows the number of cases by 10-year age band and sex. The median age of all cases diagnosed in the last 14 days is 37 years (IQR: 21-54 years). The median age of adult cases (≥ 18 years) is 44 years (IQR: 33-59 years).

The 14-day cumulative diagnosis rate (per 100,000 population) by age group is shown in figure A1 in the Appendix.

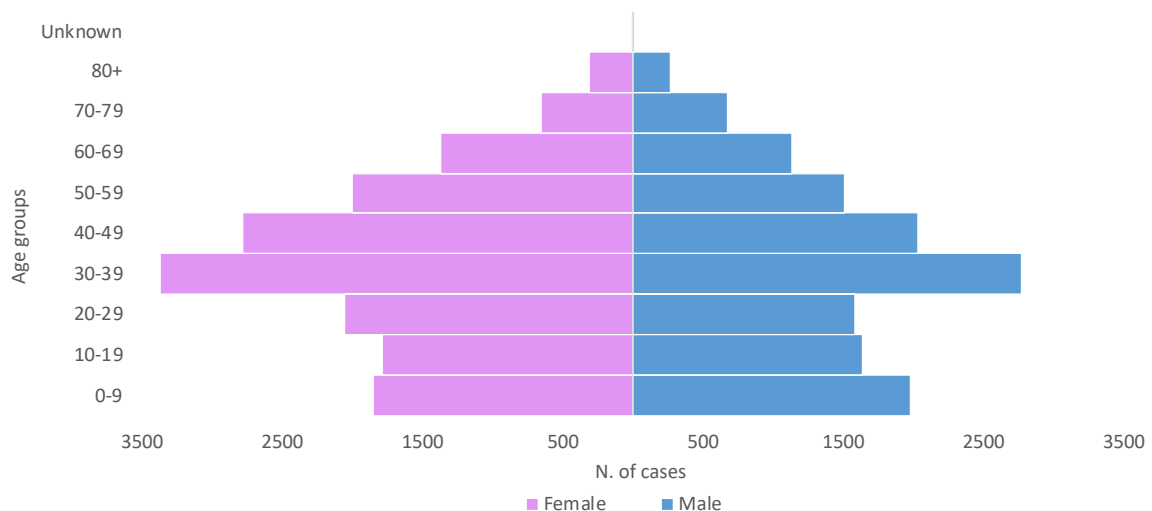


Figure 4: Laboratory-confirmed COVID-19 cases in the Republic of Cyprus, diagnosed in the last 14 days, by age group and sex (including only cases with sex information available).

Among all cases diagnosed in the last 14 days, district information was available for 31,085 (76.2%) cases, of which 13,370 (43%) were reported in Nicosia district, 7,544 (24.3%) in Limassol, 4,964 (16%) in Larnaca, 3,335 (10.7%) in Pafos, 1,855 (6%) in Ammochostos, and 17 cases had residence abroad. Figure A2 in the Appendix shows the 14-day cumulative diagnosis rate (per 100,000 population) by district.



Epidemiological link

In the last 14 days (29 March – 11 April 2022), epidemiological link information was available for 40,521 (99.3%) cases, of which 2.4% (n = 993) were imported and 97.6% (n = 39,528) were locally-acquired.

Clinical features

In the last 14 days (29 March – 11 April 2022), information was available for 38,245 (93.8%) cases of which 41% (n = 15,672) reported no symptoms and 59% (n = 22,573) reported at least one symptom.

Pre-existing conditions

In the last 14 days (29 March – 11 April 2022), information was available for 38,855 cases (95.2%) of which 2,435 cases (6.3%) reported at least one comorbidity.



Deaths

Among cases diagnosed until April 11th, 2022, 986 COVID-19 associated deaths were reported in the Republic of Cyprus until April 13th, 2022 (Case Fatality Risk - CFR: 0.2%).

The COVID-19 associated mortality is 111 per 100,000 population.

Deaths occurred in 585 men (59.3%) and 401 (40.7%) women; the median age of death of persons whose death was associated with COVID-19 was 79 years (IQR: 69-86 years). By district of residence, deceased cases were 345 (35%) from Limassol, 309 (31.3%) from Nicosia, 178 (18.1%) from Larnaca, 88 (8.9%) from Pafos, 58 (5.9%) from Ammochostos, and eight deaths (0.8%) occurred among cases for which district information was not available or who had a residence abroad.

The median time from date of sampling to death (due to COVID-19) was 14 days (IQR: 7-23 days).

Figure 5a reports the number of COVID-19 associated deaths by date.

Among cases diagnosed until April 11th, 2022, 1,144 deaths (all causes) were reported in the Republic of Cyprus until April 13th, 2022 (CFR: 0.25%).

The mortality (all causes) for people with COVID-19 is 128.8 per 100,000 population. Deaths occurred in 680 men (59.4%) and 464 (40.6%) women; the median age of death of all persons with COVID-19 who died was 79 years (IQR: 69-86 years). By district of residence, deceased cases were 409 (35.8%) from Limassol, 362 (31.6%) from Nicosia, 199 (17.4%) from Larnaca, 101 (8.8%) from Pafos, 65 (5.7%) from Ammochostos, and eight deaths (0.7%) occurred among cases for which district information was not available or were reported among cases who had a residence abroad.

The median time from date of sampling to death (all causes) was 14 days (IQR: 7-23 days).

Figure 5b reports the number of all deaths among people with COVID-19 by date.

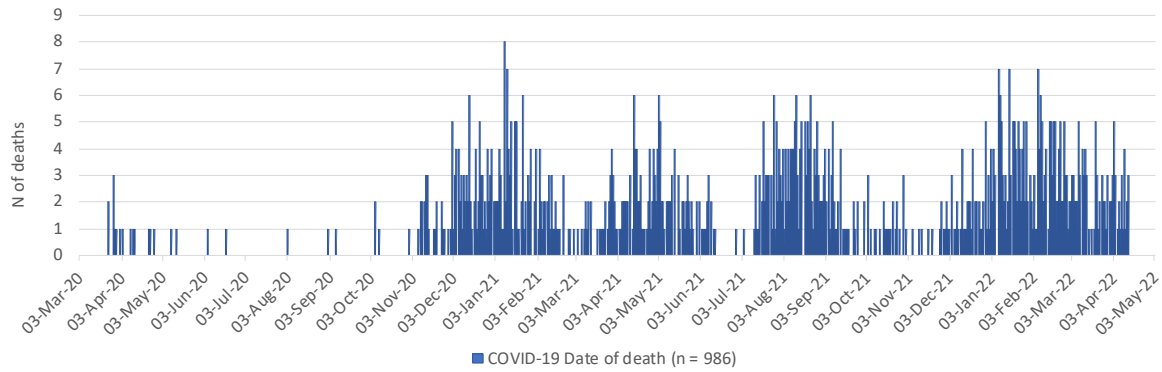


Figure 5a: Number of COVID-19 associated deaths in the Republic of Cyprus by date of death.

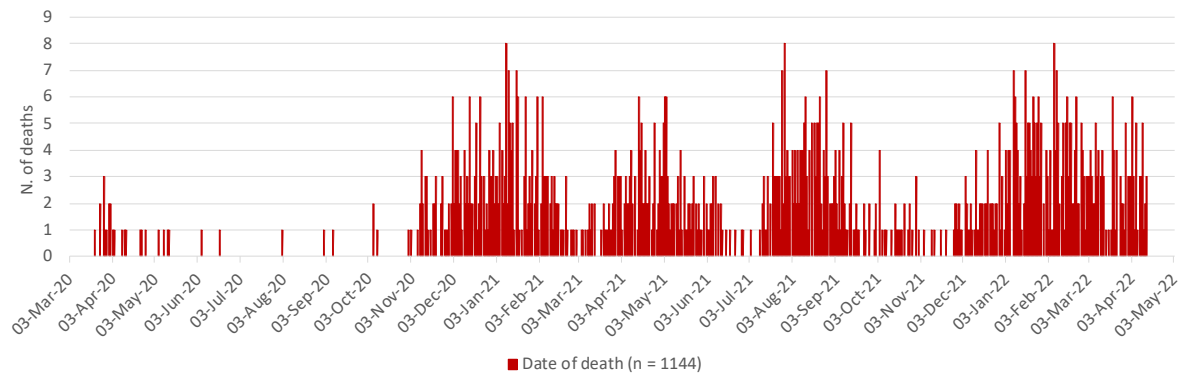


Figure 5b: Number of deaths (all causes) among COVID-19 cases in the Republic of Cyprus by date of death.

Hospitalization and intensive care unit (ICU³) admissions⁴

In total, 1.9% (n = 8,788) of people diagnosed with COVID-19 till April 11th received hospital care, as of April 13th, 2022. The median age of hospitalized patients was 62 years (IQR: 47-75 years). Excluding 61 cases (0.7%) for which sex information is not available, hospitalized cases were mainly males (n = 4,866; 55.8%).

The median age of patients diagnosed till April 11th and still hospitalized, due to COVID-19 (these cases have not yet tested negative for SARS-CoV-2 after their diagnosis or are still considered infectious), as of April 13th, 2022 (n = 184, including those discharged/who died on that day), is 82 years (IQR: 70-87 years). Of these, 56.8% (n = 84 out of 148 with available information) are males and 40.4% (n = 44 out of 109 with information on district) are from Limassol district. Twenty cases (15.6%) still hospitalised have comorbidities (out of 128 with available information).

Of note, the total number of patients diagnosed till April 11th and still hospitalized, including those discharged/who died on that day and those still hospitalized for treatment but who are no longer SARS-CoV-2 positive or considered infectious, as of April 13th, 2022, is 227.

Figure 6a shows the total number of first hospital admissions by date.

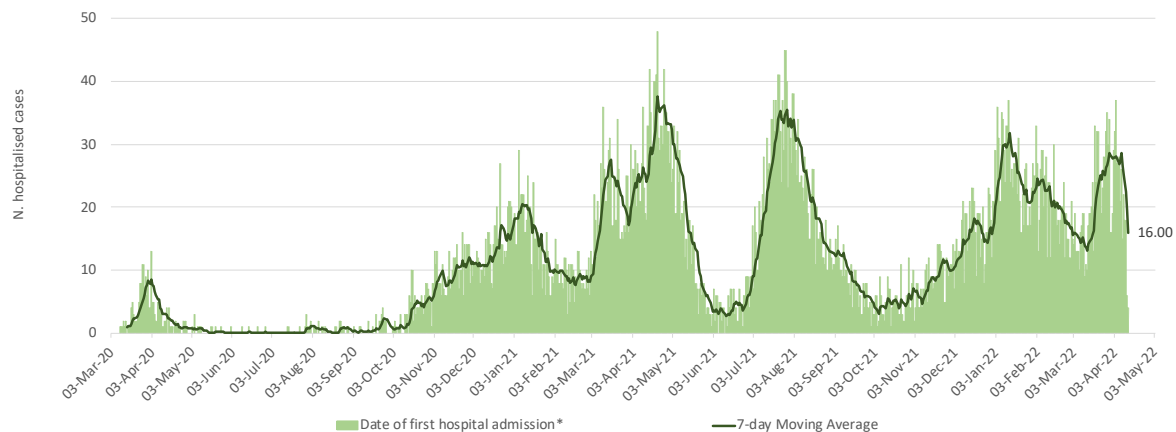


Figure 6a: Number and 7-day moving average (last moving average on April 13th, 2022 is shown on the graph) of laboratory-confirmed COVID-19 cases by date of first hospital admission, since 03/03/2020.

**Date of hospital admission was replaced with date of sampling for inpatients hospitalised prior to the beginning of the epidemic.*

Recent data should be interpreted with caution due to the possibility that cases recently hospitalised could have not been notified.

³ Intensive care unit (ICU) refers to the ICU in Limassol General Hospital and to the ICU in Nicosia General Hospital.

⁴ Data on hospitalisation and ICU are provisional and should be interpreted with caution because delay in data reporting is likely; for the construction of the curve, people are no longer in an ICU/hospital the day next to the date of their discharge, death or transfer.



Figure 6b shows the number of active COVID-19 cases in hospitals every day (excluding those in ICU).

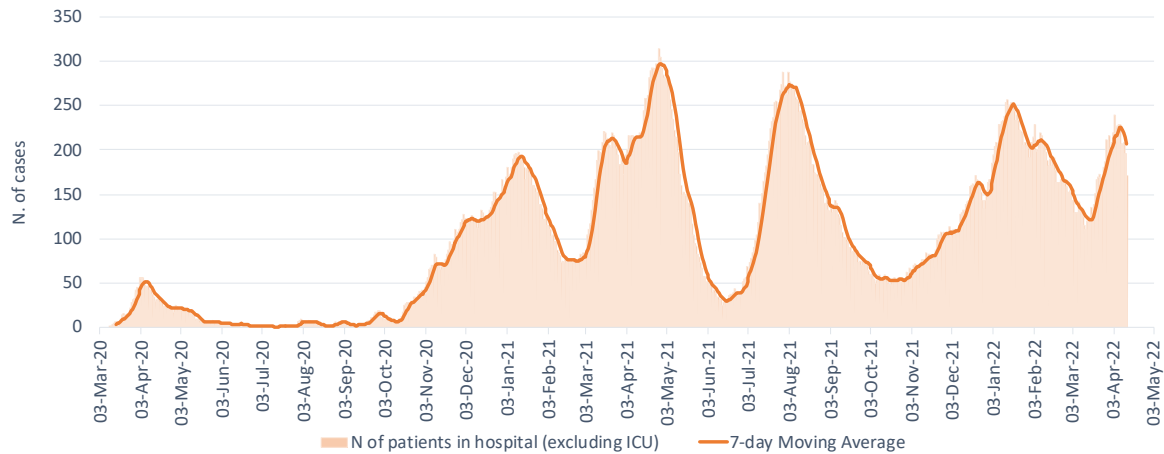


Figure 6b: Number and 7-day moving average of laboratory-confirmed and active COVID-19 cases in hospital every day, since 03/03/2020, excluding those in ICU. *Patients in hospital for only part of the day (e.g. transferred, dead) are included. Recent data should be interpreted with caution due to the possibility that cases recently hospitalised could have not been notified.*



Overall, 890 cases (10.1% of all hospitalized patients) have been admitted to ICU. The median age of patients ever admitted to ICU was 66 years (IQR: 58-73 years). ICU patients were mainly males (n = 563, 63.3%). The overall median length of stay in ICU (for ICU cases considered infectious) was 12 days (IQR: 7-20 days).

As of April 13th, 2022, and based on records which rapidly evolve, of those diagnosed till April 11th, 12 cases (who have not yet tested negative for SARS-CoV-2 after their diagnosis or are still considered infectious) are still in ICU (including deaths / transfers on March 30th). The median age of these ICU patients is 69 (IQR: 58-77) years; sex information is not available at the moment for one patient and eight are males (72.7%). Four (36.4%) ICU patients have reported comorbidities (out of 11 with available information).

The number of these ICU cases is 1.4 per 100,000 population (as of April 13th, 2022, including deaths/discharged on that day).

Of note, the total number of patients diagnosed till April 11th and still in ICU, including those discharged/who died on that day and those who are no longer positive for SARS-CoV-2 or considered infectious, as of April 13th, 2022, is 24.

A total of 839 ICU patients (94.3% of all ICU patients) have been intubated - currently nine (75%) patients in ICU, who are still positive for SARS-CoV-2 or considered infectious, are intubated (including deaths/discharged/extubated on that day). Figure 7 shows the number of patients in ICU, by day and intubation status.

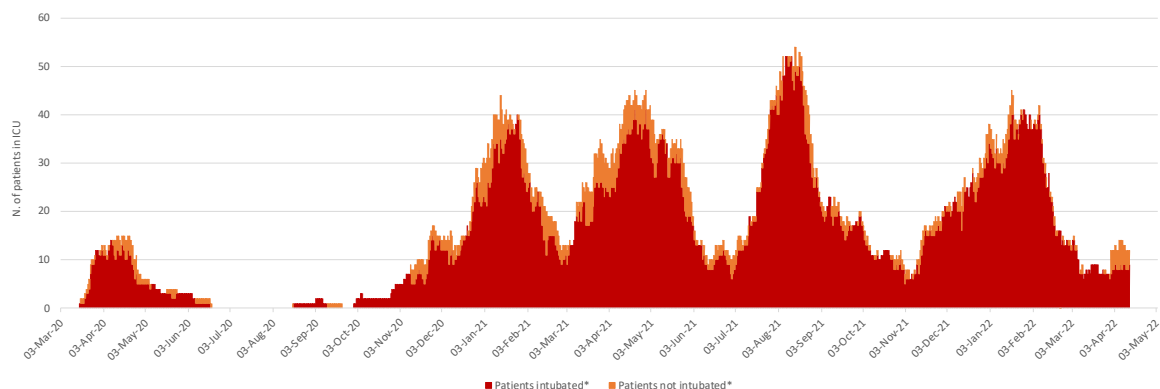


Figure 7: Number of laboratory-confirmed COVID-19 cases in ICU by date and intubation.

**Date of discharge/transfer/death included*

Recent data should be interpreted with caution due to the possibility that cases recently admitted in ICU or intubated could have not been notified/recorded.



Recovered/released

As of April 11th, 2022, among COVID-19 cases alive, 98.5% (n = 449,096) have recovered/released from isolation^{5,6,7,8,9}.

⁵ For symptomatic cases, or for cases hospitalised, a COVID-19 case can be considered cured after the resolution of symptoms and two negative tests for SARS-CoV-2 at 24-hour interval at least. For asymptomatic cases, or for persons isolated at home, the negative tests to document virus clearance should be obtained at a minimum of 14 days after the initial positive test (end of the quarantine period).

Novel coronavirus (SARS-CoV-2). Discharge criteria for confirmed COVID-19 cases- When is it safe to discharge COVID-19 cases from the hospital or end home isolation? - Technical Report, 10 March 2020. Stockholm: ECDC; 2020.

⁶ May – November 2020: A person is released 21 days after the initial diagnosis, if he/she has a positive test 14 days after the initial diagnosis and remains in isolation for one more week without being further tested.

Since 8th November 2020: A person who remained asymptomatic throughout his/her follow-up is released 14 days after initial diagnosis (date of sampling) and General Practitioner (GP) confirmation; a person with mild/moderate symptoms is released in absence of fever AND improvement of other symptoms (confirmed by GP) AND 14 days after onset of symptoms; cases requiring hospitalisation (severe cases), immunosuppressed individuals, residents and staff of vulnerable groups (i.e., nursing homes, refugee camps, prisons) are released in absence of fever AND 20 days after onset of symptoms. The criterion of two consecutive negative SARS-CoV-2 PCR results from respiratory samples, taken at least 24 hours apart, is recommended for immunosuppressed and critically ill COVID-19 patients.

⁷ Since 4th August 2021: Asymptomatic individuals are discharged from self-isolation 10 days after testing positive for SARS-CoV-2. Individuals with mild/moderate symptoms are discharged from self-isolation 10 days after the onset of symptoms, provided that the patient has no fever for at least 3 days (without use of antipyretics) and has improvement of all other symptoms.

⁸ Since 17th January 2022: SARS-CoV-2 positive individuals are discharged 10 days after testing positive for the virus. In cases where the GP considers that the isolation of the case should continue due to persistent symptoms (fever and no improvement of the remaining symptoms two days before release) or in the case of immunosuppressed patients, the period of isolation may be extended.

⁹ Since 8th March 2022: SARS-CoV-2 positive individuals can be released on day 7, provided that they have a negative rapid antigen test result from predefined points of testing indicated by the Ministry of Health and do not have any symptoms.



Acknowledgments

We would like to thank the KIOS Center of Excellence of the University of Cyprus for the development of the ICT system to support data management.

Appendix

Figure A1. 14-day cumulative diagnosis rate (per 100,000 population) by age group.

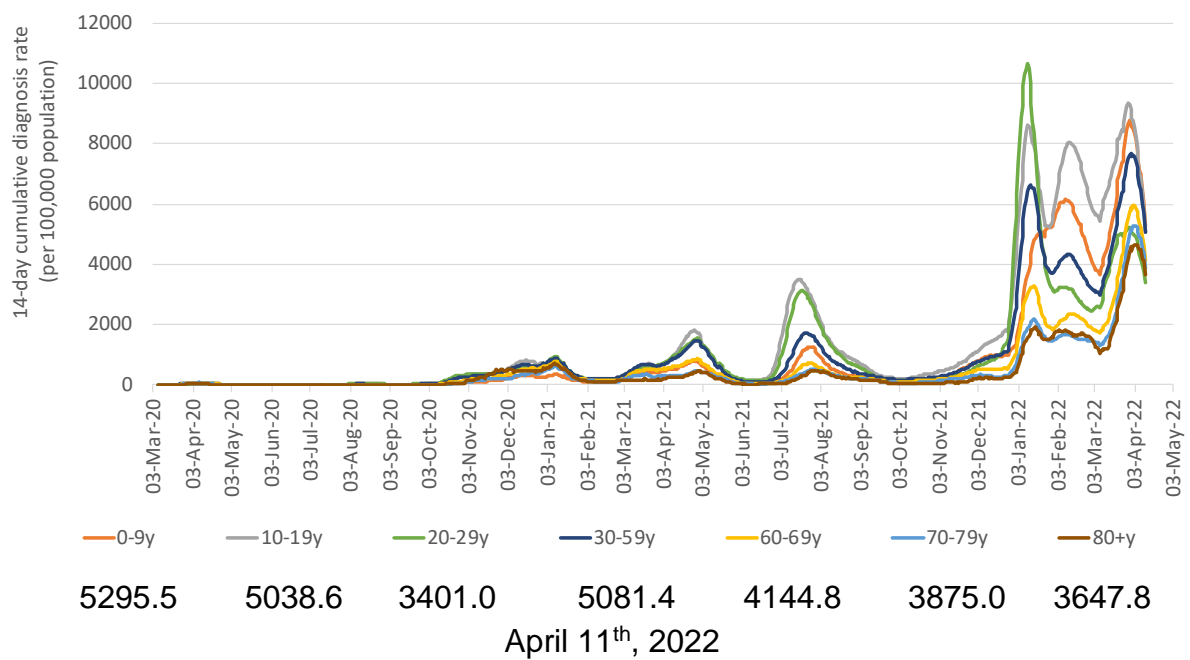




Figure A2: 14-day cumulative diagnosis rate (per 100,000 population) by district for the last 14 days.

