

**Reacties posten op uitvraag RIVM, week 35 (vanaf 24 augustus 2020)**

- 1. SLOWAKIJE**
- 2. SLOVENIE**
- 3. HONGARIJE**
- 4. TSJECHIE**
- 5. ROEMENIE**
- 6. BULGARIJE**

**1. SLOWAKIJE**

*Advies vorige week: tot nu toe veilig.*

Dit geldt nog steeds. Al is er wel sprake van een stijgende lijn. Tot dusverre 3424 besmettingen, 33 mensen overleden aan corona. 313.751 tests uitgevoerd.

- 1. Incidentie blijvend laag, nu 11/100k/14d.*
  - 2. Testincidentie is 41/100k/14d.*
  - 3. Weinig regionale verschillen in incidentie.*
- Regionale verschillen nemen toe ([zie kaart in separate bijlage](#)). Met name Bratislava laat een duidelijke stijging zien.
- 5. Geen melding van importgevallen.*

5.1.2a

*Conclusie: nu is het land veilig, wordt nauwlettend gemonitord.*

5.1.2a

## 2. SLOVENIE

De vraag over de 'onverklaarde lage incidentie en achterblijvende testincidentie' beantwoorden we aldus:

- 1 Slovenië heeft al snel in maart voor een strenge aanpak gekozen – en volgehouden. Het was ook streng in het opleggen van reisbeperkingen ( 5.1.2a 5.1.2a 5.1.2a 5.1.2a Bars en nachtclubs blijven dicht 5.1.2a 5.1.2a
- 2 Het gezondheidssysteem in Slovenië is van oudsher goed. Het land was op dit gebied een koploper in het voormalig Joegoslavië en maakte een inhaalslag naar EU-niveau in de afgelopen decennia.
- 3 Bevolking reageerde van stonde af aan – zeker in de stedelijke gebieden – gedisciplineerd op de maatregelen van de regering.

## 3. HONGARIJE

in antwoord op je mail, de Hongaarse COVID-statistieken lijken inderdaad relatief lage aantallen van COVID besmettingen en doden zien t.o.v. de EU lidstaten (lage R etc.). Het percentage doden/geregistreerde gevallen is wel relatief hoog, en daarnaast is het aantal geteste personen relatief laag.

5.1.2a

1. De meeste recente gegevens laten het volgende beeld zien:  
24/8: 36 nieuwe gevallen (totaal 5191), geen stijging in het aantal doden (613), aantal geteste personen 398.550  
25/8: 96 nieuwe gevallen (totaal 5215), stijging 1 van het aantal doden (614), aantal geteste personen 400.442
2. Uit eigen waarneming kan ik constateren dat bij ziekenhuis opnamen patiënten eerst op COVID worden getest, alvorens ze worden toegelaten tot het ziekenhuis; in de eerste maanden was circa 20% van de COVID patiënt geweest in een ziekenhuis, vervolgens werden alle ziekenhuizen geruimd.
3. Het aantal internationale reizigers via luchtverkeer is erg laag: BDP verwerkte in juli 81% MINDER passagiers dan vorig jaar, en in de maanden waren er nog veel minder reizigers.

5.1.2a

5.1.2a

#### 4. TSJECHIE

5.1.2a

- 5.1.2a
- TSJaut hebben sinds begin van de coronacrisis stevig ingegrepen met de facto lockdown en sluiting van de grenzen (in- en uitreis). Ook sluiting scholen, restaurants, hotels, mondkapjesplicht, exclusieve winkeluurtjes voor kwetsbare ouderen. Inmiddels zijn die maatregelen weer versoepeld. Tsjechische bevolking heeft die aanwijzingen gedisciplineerd opgevolgd.
- Door een gestage stijging van het aantal besmettingen (van ca. 300 à 500 per week in juni naar ca. 1.500 p/w eind augustus) is nu weer politieke discussie gaande over het aanhalen van de maatregelen.
- Het ministerie van Gezondheid houdt dit handige kaartje bij op niveau van district: <https://koronavirus.mzcr.cz/en/covid-19-risk-score-for-czech-districts/>. Op een schaal van wit-geel-groen-rood kun je daaruit aflezen hoe het risico is. Praag is nog steeds groen, oftewel 'infecties zonder community transmission'. Vrijwel alle andere districten wit (laagste risicocategorie).
- **Achterblijvende testincidentie.** TSJ media melden deze dagen dat er kritiek is op het relatief lage aantal tests per capita. TSJ is in de EU 20<sup>e</sup> op die ranglijst, net boven NL. (Zie lijstje van het TSJ persbureau CTK hieronder.)
- Quarantaine in TSJ is 14 dagen. Wie negatief test aan begin van quarantaine moet zich laten hertesten.

Country	Tests per 1,000,000 population	Total number of tests
Luxembourg	1,138,656	712,774
Malta	382,279	168,793
Denmark	363,375	2,104,747
Lithuania	220,223	599,513
Cyprus	218,611	263,943
Portugal	186,008	1,896,675
Belgium	181,175	2,099,750
Spain	170,156	7,955,615
Ireland	154,036	760,601
Italy	130,042	7,862,592
Latvia	124,334	234,520
Germany	121,710	10,197,366
Austria	119,405	1,075,409
Estonia	104,829	139,060

Sweden	101,988	1,030,010
Finland	96,323	533,703
France	91,920	6,000,000
Czech Republic	77,138	826,072
Romania	82,703	1,591,015
Netherlands	76,614	1,312,787
Slovenia	70,752	147,091
Poland	65,882	2,493,423
Slovakia	55,697	304,086
Bulgaria	52,543	365,096

In navolging van dit bericht nog de volgende relevante uitingen van de gezondheidsautoriteiten in de media:

(P/2) Dir. Ladislav Dušek of ÚZIS (Institute for Health Information and Statistics --DR) said yesterday that despite the large numbers of new covid cases, the effects of the disease are mild, and it is not hitting vulnerable groups. It is behaving like a regular respiratory disease, he said, adding that influenza kills 1,500 people in the CR every year and that other viral diseases are even more deadly.

Dat is daarmee geen overheidsbeleid (daarover gaan nog steeds de premier en de gezondheidsminister), maar het is wel een indicatie van hoe de experts de kracht van het virus op dit moment beoordelen.

Attached, I send you an updated version of the current epidemiological situation in the Czech Republic written by the Czech Ministry of Health.

## COVID-19: An overview of the epidemiological situation in the Czech Republic

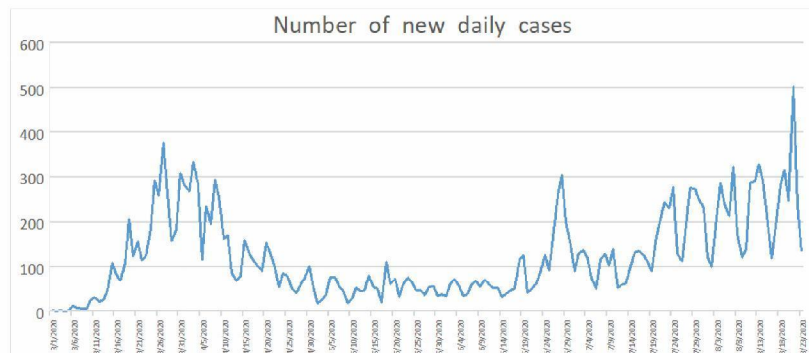
24 August 2020

### Current epidemiological situation

- **The overall epidemiological situation in the Czech Republic is characterized by local clusters / outbreaks. Currently, there is no community transmission detected in the country.**
- **As of August 24, the Czech Republic has registered total of 21 923 cases. At the moment 5 386 cases are active.**
- **The rise in numbers in recent weeks is due to increase in testing.**

The first case of infection by SARS-CoV-2 was detected on March 1. Since then the number

of newly detected cases was steadily rising, reaching its peak by end of March. In April the Czech Republic witnessed a rapid decrease in cases thanks to the strict measures adopted by the government.



As rest of the EU, the Czech Republic has been facing rise in numbers of newly detected cases since beginning of summer. The increase has been a reaction to easing of the restrictions, however, majority of new cases has been detected due to increase of testing capacities. The situation is, nevertheless, currently stable throughout the country. Several outbreaks have been registered. All of them have been successfully and swiftly handled by measures taken on local level. There is no community transmission recorded in the Czech Republic. Due to current increase of testing, the Czech Republic has registered a record number of daily increase of cases – 505 new patients on 21 August, which is not unusual in comparison to the situation in other European countries that in many cases also report unprecedented high numbers of new cases.

### Alert system

Current epidemiological situation in the Czech Republic varies across the regions. A system that marks the individual districts according to the degree of COVID-19 contagion has been launched in the Czech Republic. The system is divided into four alert levels – white, green, yellow, and red, known as the “traffic light scheme”. The white means zero or negligible risk, the green indicates the incidence of contagion without community transmission, the yellow indicates incipient community transmission, and the red means rising or lasting community transmission in the district. Current situation is being updated weekly and is available online in English - <https://koronavirus.mzcr.cz/en/covid-19-risk-score-for-czech-districts/>

ALERT LEVEL	EPIDEMIOLOGICAL CRITERION	CHARACTERISTICS	EARLY WARNING LEVEL
0	ZERO OR NEGLIGIBLE RISK	<ul style="list-style-type: none"> <li>Official expert sources (especially the World Health Organisation or European Centre for Disease Prevention and Control) inform about the fact that disease contagion has been reported abroad</li> </ul>	0
I	OCCURRENCE OF INFECTION IN CZ WITHOUT COMMUNITY TRANSMISSION	<ul style="list-style-type: none"> <li>Sporadic cases occur</li> <li>Local clusters occur</li> <li>Local epidemics occur</li> <li>Combination occur: sporadic cases / local clusters / local epidemics</li> </ul>	1-3
II	INCIPIENT COMMUNITY TRANSMISSION IN CZ	<ul style="list-style-type: none"> <li>Occasional cases with an unclear source of contagion, which start to spread in an as-yet-unaffected community – among persons who did not visit an affected area or were not in contact with a known source</li> </ul>	4-7
III	GROWING OR PERSISTENT COMMUNITY TRANSMISSION IN CZ	<ul style="list-style-type: none"> <li>Daily incidence of cases within community transmission has a consistent rising or persisting trend</li> </ul>	8-10

Alert levels are published primarily as information for citizens, as a system of early warning about the changing epidemiological situation. Twenty-five parameters, which are the result of the weekly summary of daily monitoring, are evaluated. The final decision about the alert level for the given area is the outcome of evaluation by epidemiologists and hygienists. Assessment of the community transmission risk, meaning the risk of the uncontrolled spread through the population during which a respective regional public health authority cannot determine a substantial share of the detected contagions, plays a considerable role in this expertise.

The districts in the Czech Republic are currently largely marked as zero or negligible risk. There are 2 districts in the green zone where there have been incidences of contagion without community transfer in the Czech Republic, those being Prague and Frýdek-Místek. The alert system is to be update every two weeks, so new update is expected next week.

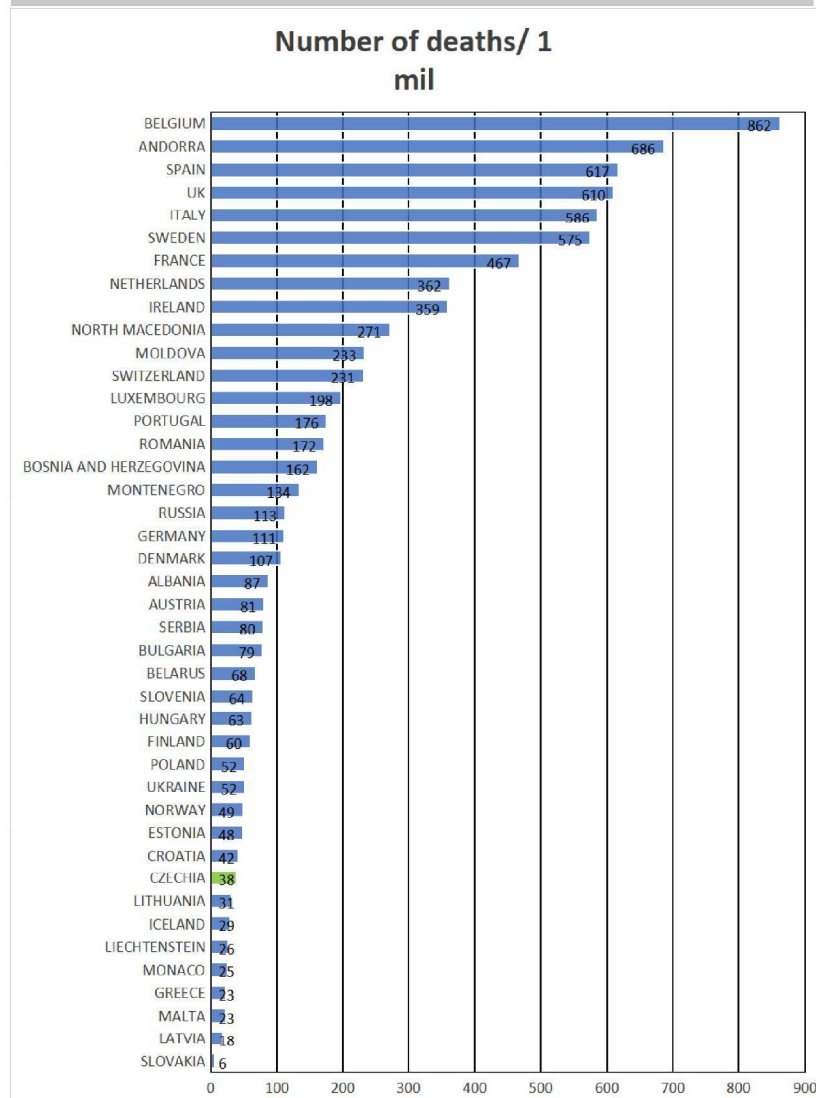


**Prague** Weekly incidence per 100 000 inhabitants is at 33.6. Capital city has been on the brink of the risk of community transfer for some time, but only 17% of the detected cases have no definite source. Despite the high incidence of newly diagnosed patients, the situation is under control. As the risk trends are not escalating and there is no apparent rise in the risk for vulnerable population groups. Epidemiological situation is no different from other capital cities around the world, which is given mostly by high amounts of people and number of social events.

**Moravian-Silesian region** Weekly incidence per 100 000 inhabitants is at 17.7. The epidemiological situation is scaling down in the region and is under control as there is no community spread on a regional scale.

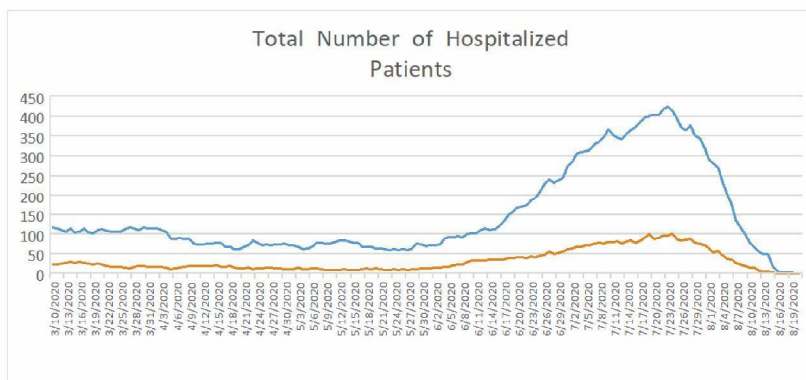
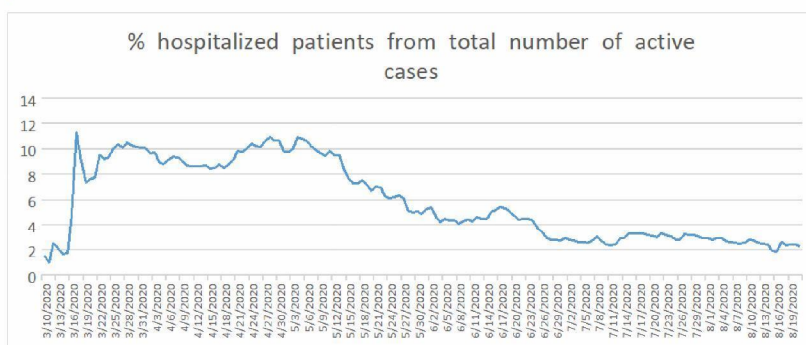
## Mortality

- Mortality rate in the Czech Republic – 1,9% is one of the lowest among the EU countries.
- Number of hospitalized patients and their rate to active cases has been decreasing steadily.



The Czech Republic was able to organise quickly its health system to prepare for possibly larger number of hospitalized patients. We started to monitor free bed capacities in ICUs across the country in real time to be able to compensate for non-sufficient capacities in other regions if needed. Fortunately, this has never been the case. The number of patients in serious health condition has been decreasing steadily, not only in total numbers, but also in comparison to number of hospitalized patients.

As of August 23, **73,5% of all confirmed cases recovered already**, while **fatality rate of 1,9% is among the lowest in the EU**, as is the hospitalization rate compared to number of active cases. **Only 2,3 % of active cases are hospitalized**. Only 0,40 % of all active cases are patients in ICUs.



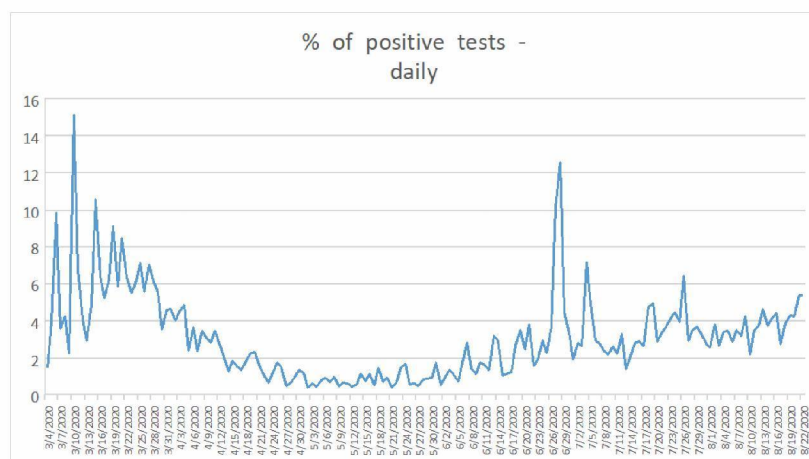
Nearly 70% of the deceased are patients over 75 years old, **Over 90% of the deceased were patients older than 65 years.**

### Testing

- **High number of tests in various population groups mean relatively low number of positive tests.**
- **Testing is done mainly in local clusters.**

Number of tests being carried out in the Czech Republic is closely connected to the course of the epidemics. It was rising steadily in the beginning, reaching approx. 10 thousand tests a day at the peak. We have witnessed decrease in testing as adopted measures slowed down the progress of epidemics significantly.

Currently, the number of tests is once again increasing. Massive testing is being carried out at local clusters to prevent their possible spread. As such, the **rate of covid-19 positive patients to number of tests is only about 4 – 5 %**, whereas at the beginning of the epidemics as much as 15% of those tested were COVID-19 positive.



Testing of a much wider population segment allows us not only to limit local outbreaks but also to detect many mild and asymptomatic cases.

For all the above-mentioned reasons, **testing is crucial, though it is true that countries that test more, appear to be in a more serious situation.** The truth is that insufficient testing renders the image incomplete, as it also means under-detection of cases, allowing for the emergence of uncontrolled transmission chains. A less stringent testing strategy may result in

greater risk of infection. In other words, a low rate of new infections may give a false sense of security and piece of mind about the real epidemiological situation in a country.

#### Prevention

General measures have been abolished during last months. Restrictive measures are currently being adopted only in local clusters. Ban on mass events of more than 1000 people is valid for the whole country, as well as compulsory face masks on events of over 100 (indoors) or 500 (outdoors) people. Recommendations for voluntary use of face masks and social distancing are still valid.

The Ministry of Health is monitoring the current situation very closely and is ready to take steps on national level, should the situation worsen. We, however, believe that the majority of any future measures should be locally based according to the alert system mentioned above.

Detailed description of individual degrees and interconnected measures can be found here <https://koronavirus.mzcr.cz/wp-content/uploads/2020/08/Alert-levels-in-the-field-of-public-health-protection.pdf>

## 5. ROEMENIE

- Incidentie 86,3. Percentage dat positief getest wordt schommelt de afgelopen week tussen de 4-7%.
- Er zijn 273.801 testen uitgevoerd de afgelopen 14 dagen op een bevolking vergelijkbaar met die van NL. Een toegenomen aantal uitgevoerde testen in de maand augustus valt deels te verklaren door omringende landen die een negatieve test vragen van inreizende Roemenen.
- Autoriteiten verwachten dat aantal nieuwe besmettingen zal dalen de komende tijd als gevolg van maatregelen die +- twee weken geleden zijn geïntroduceerd (o.a. mondkapjes in drukke gebieden).
- Daartegenover staat dat binnenkort de scholen open gaan 5.1.2a
- 5.1.2a
- NL staat in ROE op de groene lijst. ROE hanteert daarvoor het criterium: incidentie kleiner of gelijk aan dat in Roemenië.

We zijn natuurlijk bereikbaar voor eventuele aanvullende vragen.

## **6. BULGARIJE**

1. *Infected cases per 100k/14 days (source ECDC).*

*Reply: 26,2/100k/14 days per 24 August (ECDC).*

2. *Number of tests per 100k/day?*

*Reply: 74 tests per 100k/day*

3. *Main centers of corona-infections in Bulgaria?*

*Reply: Blagoevgrad and Dobrich regions with more than 50 infections per 100k in the last 7 days*

4. *Info on possible import of COVID cases from abroad (travelers/seasonal workers)?*

*Reply: No data and currently no public discussions on this issue.*

6. *Regional data on COVID19-infections?*

*Reply: Blagoevgrad, Dobrich, Varna, Sofia, Plovdiv regions are the most affected.*