Coronavirus Disease (COVID-19) Pandemic
CARPHA Situation Report No. 35 - April 20, 2020

Summary

This is an update to the Situation Report published on April 17, 2020, in relation to the outbreak of COVID-19.

To date, there are 8,471 cases in 33 countries/territories (including 24 CARPHA Member States), in the Caribbean Region. The risk of further importation of cases to the rest of the Caribbean remains Very High.

The Regional Coordinating Mechanism for Health Security (RCM-HS), is actively working with Heads of Government and regional partners on a collective approach to the COVID-19 response.

*Countries are strongly urged to strengthen their health sector response and move to a state of rapid response.*

**NEW in this report**
- New confirmed cases in CARICOM Member States
- WHO COVID-19 strategy update
- Exploration the repurposing of existing vaccines
- CARPHA’s call for Experts
- CariPHLN Update

*CARPHA is providing updated reports on cases in CARPHA Member States as information becomes available through local sources. Caribbean numbers presented in this report may not necessarily be reflected in the WHO totals.

Situation Update

Up to 33 countries in the Caribbean region have reported the importation of at least one confirmed case of COVID-19. The risk of further importation of cases to the Caribbean Region remains Very High.

The aim for all countries now, is to stop transmission, prevent the spread of the virus and save lives. Based on the Draft CARPHA Health Sector Response Guidelines for COVID-19 circulated to Member States, most countries are encouraged to implement actions in keeping with the Initial or Targeted Action in the Response Phase.
Overview of COVID-19 Cases

COVID-19 in the Caribbean

Since the previous report on April 17, 2020, no new countries reported their first confirmed case of COVID-19 within the Caribbean region. Additional cases, however, were confirmed in 17 countries, bringing the region’s total confirmed cases to 8,471 in 33 countries/territories; 24 (72%) of these are CARPHA Member States. This new total represents a 19% increase in the numbers of confirmed cases. Fifty-six (56) additional deaths were also recorded, bringing the total numbers of deaths to 413.

COVID-19 Globally

The data contained in Table 1 below are obtained from data reported by the WHO, supplemented by other sources – (Reference 1 and 2 in Table 1). As of April 20, 2020, the WHO reported 2,285,210 cases of patients with COVID-19. Outside of China, 212 countries, areas or territories have confirmed at least one case among travellers exposed while abroad and/or person-to-person contact. No new countries have reported their first confirmed case of COVID-19 since the last Situation Report on April 17, 2020. See Table 2 below for more details on cases, deaths and recoveries. The number of cases recovered since our last report was not available.

Table 1: Countries or Territories with reported cases of COVID-19, 20 April, 2020

<table>
<thead>
<tr>
<th>Region</th>
<th>Country/Territory</th>
<th>Cases</th>
<th># new cases since last report</th>
<th>Deaths</th>
<th>Recovered</th>
<th>% of cases still active</th>
<th>Cases</th>
<th># new cases since last report</th>
<th>Deaths</th>
<th>Recovered</th>
<th>% of cases still active</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region of the Americas</td>
<td>Dominican Republic</td>
<td>4,680</td>
<td>925</td>
<td>226</td>
<td>363</td>
<td>87.4</td>
<td></td>
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</tr>
<tr>
<td>Caribbean</td>
<td>Rest of the Caribbean*</td>
<td>1,196</td>
<td>84</td>
<td>68</td>
<td>337</td>
<td>66.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caribbean</td>
<td>Puerto Rico</td>
<td>1213</td>
<td>170</td>
<td>62</td>
<td>0</td>
<td>94.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caribbean</td>
<td>Cuba</td>
<td>1035</td>
<td>173</td>
<td>34</td>
<td>255</td>
<td>72.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caribbean</td>
<td>Martinique</td>
<td>163</td>
<td>4</td>
<td>12</td>
<td>73</td>
<td>47.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caribbean</td>
<td>Guadeloupe</td>
<td>148</td>
<td>3</td>
<td>11</td>
<td>73</td>
<td>43.2</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Americas</td>
<td>Rest of the Region**</td>
<td>850,196</td>
<td>113,665</td>
<td>40,202</td>
<td>122,089</td>
<td>80.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Regions</td>
<td>Western Pacific Region**</td>
<td>132,438</td>
<td>4,843</td>
<td>5,648</td>
<td>97,443</td>
<td>22.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Regions</td>
<td>European Region**</td>
<td>1,122,189</td>
<td>71,318</td>
<td>100,938</td>
<td>334,932</td>
<td>61.2</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Other Regions</td>
<td>South-East Asia Region**</td>
<td>27,975</td>
<td>4,415</td>
<td>1239</td>
<td>5,812</td>
<td>74.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Regions</td>
<td>Eastern Mediterranean Region**</td>
<td>128,505</td>
<td>12,681</td>
<td>6,009</td>
<td>68,652</td>
<td>41.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Regions</td>
<td>African Region**</td>
<td>14,760</td>
<td>2,400</td>
<td>662</td>
<td>4,638</td>
<td>64.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>International conveyance (Diamond Princess Cruise Ship)</td>
<td>712</td>
<td>0</td>
<td>13</td>
<td>644</td>
<td>7.7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>2,285,210</td>
<td>210,681</td>
<td>155,124</td>
<td>635,311</td>
<td>65.4</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
CARPHA: COVID-19 Situation Update No 35: April 20, 2020

N.B. The WHO notes that due to a retrospective data consolidation exercise, some numbers may not reflect the exact difference between the previous numbers reported and the numbers reported today.

Caribbean Regional Coordination

CARPHA is leading the regional health response to COVID-19, in keeping with its Intergovernmental Agreement (IGA) mandate from CARICOM and recommendations from the COHSOD-Health Working Group on Regional Coordination for Response Management. As such, CARPHA activated its Incident Management Team-Emergency Response (IMT-ER) on January 21, 2020 and convened the Regional Coordinating Mechanism for Health Security (RCM-HS). Figure 1 depicts a timeline of regional events since the outbreak was detected in December 2019.

CARPHA continues to work with its partners and countries, on a harmonized regional response.

Figure 1: CARPHA COVID-19 Response Timeline (December 2019 – April 2020)
Caribbean Public Health Agency’s Response

CARPHA’s Mission

CARPHA’s aim is to work with regional and international health partners to respond to this public health threat and provide timely advice and assistance to Member States and stakeholders.

Governance

CARPHA’s Incident Management Team – Emergency Response (IMT-ER) is leading the health response in keeping with CARPHA’s mandate from the Intergovernmental Agreement (IGA). The IMT-ER produces Situation Reports three times weekly. As of March 31, 2020, CARPHA’s IMT-ER meets three times weekly to discuss CARPHA’s COVID-19 response and schedules are adjusted and guided by COVID-19 Incident Action Plan.

CARPHA’s IMT-ER in their meeting on April 9, 2020, provided the following updates:

- CARPHA’s Rapid Response Teams have been assembled and a roster is being developed for additional surge capacity for deployment to support Member States.
- CARPHA Workplace Protocol has been updated to reflect the commencement of temperature checks on all three campuses and staff have been provided with PPE.

Disease Surveillance and Epidemiology in CARPHA Member States

Data submitted officially by Member States to CARPHA Surveillance System, official media releases from Ministry of Health or other official Country sources available in the public domain, have been used to inform the assessment of the current situation in the Caribbean Region.

As of April 20, 2020, there have been 1,040 cases confirmed from CMS, the majority reported on April 15, 2020 (Figure 2).

![Fig.2 Daily count of confirmed COVID-19 cases in CARPHA Member States](image)
For the cases for which data was available, the majority were aged 50 years and over. There was no age provided for most cases (Figure 3).

Among cases for whom a source of infection was reported, 44% were imported; and 37% appeared to be close contacts (local transmission) of a known imported case (Figure 4).

The source was not identified for the vast majority of imported cases reported. Data available identified cruise ships, the United States of America and the United Kingdom as the top three locations where cases reportedly acquired their illness (Figure 5).
Among the 24 Member States, 50% (12/24) have been classified as having sporadic cases, 50% (12/24) have reported clusters, based on data received by WHO from national authorities by 10:00 CEST, 19 April 2020.¹(Figure 6)

**Category of Countries by Transmission Classification**

<table>
<thead>
<tr>
<th>Region of the Americas</th>
<th>Caribbean</th>
<th>CARPHA Member States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sporadic cases</td>
<td>1</td>
<td>12</td>
</tr>
<tr>
<td>Clusters</td>
<td>26</td>
<td>18</td>
</tr>
<tr>
<td>Community Transmission</td>
<td>15</td>
<td>14</td>
</tr>
<tr>
<td>Pending classification</td>
<td>0</td>
<td>12</td>
</tr>
</tbody>
</table>

**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:
- Large numbers of cases not linkable to transmission chains
- Large numbers of cases from sentinel lab surveillance
- Multiple unrelated clusters in several areas of the country/territory/area

### Member State Reporting on COVID-19 line listing and surveillance data

CARPHA has a mandate to carry out surveillance of infectious diseases in the Region. Since the start of the outbreak, few countries have submitted their line listings for COVID-19 cases. Member States are reminded to **send anonymous line listings of confirmed cases of COVID-19 to CARPHA weekly**, by emailing carpha-epidemiology@carpha.org. A summary of COVID-19 surveillance data received from Member States is presented in Table 2.§

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### Table 2: CARPHA Surveillance received from Member States, as of April 20, 2020

<table>
<thead>
<tr>
<th>Reporting Source</th>
<th>Airport</th>
<th>Seaport</th>
<th>Overall Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travellers with exposure or travel history</td>
<td>149</td>
<td>3,762</td>
<td>0</td>
</tr>
<tr>
<td>Symptomatic travellers seen at Health facilities</td>
<td>0</td>
<td>30</td>
<td>0</td>
</tr>
<tr>
<td>Travellers quarantined by public health authority</td>
<td>*</td>
<td>727</td>
<td>*</td>
</tr>
<tr>
<td>Travellers self-quarantined at home</td>
<td>*</td>
<td>2,413</td>
<td>*</td>
</tr>
<tr>
<td>No. of travellers completing 14-day isolation/quarantine</td>
<td>1,539</td>
<td>1,928</td>
<td>0</td>
</tr>
<tr>
<td>No. of travellers tested during the reporting period</td>
<td>84</td>
<td>511</td>
<td>14</td>
</tr>
<tr>
<td>Outcome of tests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td>42</td>
<td>122</td>
<td>12</td>
</tr>
<tr>
<td>Probable</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Negative</td>
<td>265</td>
<td>642</td>
<td>2</td>
</tr>
</tbody>
</table>

*To date six Member States reported data for EPI-Week 14. *Not reported. No. refers to the number of persons reported in EW-X; Cum. refers to the number of persons to date, i.e. EW 1-X.

- CARPHA has disseminated a Health Sector Response Plan to Member States to guide their national response efforts where necessary. Further copies of the document are available upon request.
- As most Member States have closed their borders to international travel, the numbers of travellers arriving at Points of entry have been reduced significantly. All 24 CMS have reported confirmed cases of COVID-19. CARPHA recommends that Member States be guided by the Health Sector Response Plan for the relevant actions to be taken based on the phase of pandemic response required for their unique scenarios. A copy of the guideline may be requested by email to CARPHA from Member States.
- CARPHA has produced various technical guidelines including algorithms to assist CARPHA Member States (CMS) to triage and manage suspected cases within their borders and in clinical settings. These are summarised at the end of this document and can be accessed from CARPHA website at [http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus](http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus).

**Laboratory**
- As of April 20, 2020, CARPHA has received 2261 samples from 14 CMS, 295 (13.61%) of which have tested positive since the start of the outbreak.
• **On April 16,** CARPHA through the Caribbean Public Health Laboratory Network (CariPHLN), hosted a virtual discussion on COVID-19: Considerations for the Medical/Hospital Laboratory for medical laboratory professionals and CariPHLN members. This virtual training package for medical and hospital laboratories was attended by more than 260 participants across the region.

• **April 14-15, 2020:** CARPHA in association with Ministry of Health, Trinidad and Tobago, UWI and PAHO held a two-days virtual training “An Introduction to Laboratory Diagnosis, Molecular Biology and Polymerase Chain Reaction (PCR) for the COVID-19 Laboratory Response”.

• **On April 9,** CariPHLN Bulletin #2 was distributed which provided updates on COVID-19. This bulletin highlighted the CariPHLN regional response to COVID-19, guidance on GeneXpert SARS-CoV-2 kits and virtual training sessions available for medical and hospital laboratories.

• **Laboratory Updates No. 9 and 10** were circulated to all stakeholders on April 4, 2020. Update 9 included updates to case definitions and update 10 included the testing algorithm. **Revised Requirements for Sampling of Suspected Cases:** Following recent consultations with PAHO/WHO clinical advisors and based on scientific guidance received, CARPHA has increased the time period during which samples can be taken from suspected cases of COVID-19. Samples can be taken from as early as day 0 to as much as ten (10) days following the onset of symptoms. Nasopharyngeal and Oropharyngeal swabs (paired) are being accepted for testing at CMML. Neither urine nor serum will be further required.

• **The Turnaround time (TAT) of PCR results,** a quality indicator of laboratory performance is on average to date 20 h 59 m. This is currently faster than the set TAT for COVID-19 PCR tests (24-48 h).

### Communication and Information

• Members of CARPHA’s staff attended PAHO’s virtual Media conference held on April 14, 2020.

• **April 9, 2020 - Dr. Joy St. John** joined the Pan American Health Organization (PAHO) and the Caribbean Disaster Emergency Management Agency (CDEMA) to discuss COVID-19: Current Status/Future Trends. The webinar was hosted by the Caribbean Broadcasting Union (CBI).

• **April 7, 2020 - Dr. St. John** was a guest on the Caribbean Broadcasting Cooperation “Mornin Barbados” to discuss the coronavirus disease (COVID-19).
• April 5, 2020 - Dr. Joy St. John participated in an online podcast - Joint Yardie Skeptics, Freethinking Island Air Me Now (Jamaica) on COVID-19
• CARPHA hosted a virtual regional media briefing on Wednesday April 1, 2020, to discuss CARPHA’s testing for COVID-19 and protocols for dissemination of results. A recording of this briefing can be found at [https://youtu.be/fJVNPgLrRxE](https://youtu.be/fJVNPgLrRxE)
• CARPHA Communications Unit continues to produce social media products for various audiences and has maintained an active social media presence on Facebook, Instagram and Twitter.
• The latest media release, infographics and other relevant guidelines are available on CARPHA’s website. Available from: [http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus](http://carpha.org/What-We-Do/Public-Health/Novel-Coronavirus).

Logistics and Planning
• CARPHA is expanding its Human Resource skills bank to facilitate, as the need arises, the rapid recruitment and deployment of short-term emergency response consultants to CARPHA and its Member States ([see CARPHA - Call for Experts: COVID-19 Flyer](https://www.carpha.org)). Interested applicants are invited to submit an expression of interest and CV by email to HRM@CARPHA.ORG along with the completed Emergency Response Deployment - Skills List document accessible on CARPHA website.
• The Regional Security System (RSS) continues to facilitate transportation of samples from Member States to CARPHA. Samples from Member States and reagents are routinely processed through the Trinidad and Tobago Customs Department without delay. Negotiations are in progress to extend approval for the RSS to continue to deliver samples to Trinidad.
• Several Member States have implemented various measures to limit importation of the disease, including screening at ports of entry. Details can be obtained from the Ministries of Health of each Member State.

Stakeholder Engagement
CARPHA is working closely with various stakeholders for a coordinated regional response, and as such has engaged with stakeholders in multiple ways, including the following:
• April 20, 2020: Dr. St. John attended meeting with USAID on COVID-19.
• April 18, 2020: CARPHA held a coordination meeting with Ministry of Health, Trinidad and Tobago and PAHO.
• April 17, 2020: CARPHA participated in the planning meeting for upcoming COHSOD meeting.

CARPHA continues its ongoing communications and meetings with the Council for Human and Social Development, CARICOM, Chief Medical Officers, Caribbean Disaster Emergency Management Agency, PAHO regional representatives, private organizations, public associations, regional agencies and organizations to advise on regional health response, guidelines and coordination to COVID-19 for proactive actions for developing situation in the Caribbean. *A full list of CARPHA actions to date are available.*

**Way Forward**

CARPHA is reminding Member States to *ramp up their disease surveillance efforts for acute respiratory infections/severe acute respiratory infections both at the primary and secondary care levels, as a matter of urgency.* This is to include widening their surveillance focus to be able to detect any cases that have not travelled, which can be an early indication of local transmission.

*The WHO Director General has asked that individuals and countries refrain from using therapeutics that have not been demonstrated to be effective in the treatment of COVID-19. Various trials are underway to test drugs for use in treating COVID-19 cases. Discussions are underway in the region to determine participation in the WHO SOLIDARITY trial.*

CARPHA is working with technical experts across the Region to provide up-to-date guidance and technical advice to CMS. New guidelines have been prepared for the management of COVID-19 cases on airlines and guidance for Hotel Workers. CARPHA remains committed to providing support and guidance to Member States on how to strengthen their health systems response should there be person-to-person transmission in the Caribbean.

CARPHA continues to work through the Regional Coordination Mechanism for Health Security and the various regional coordination efforts to engage and support Member States, regional and international partners for the health security of the region.

CARPHA recognises there is need for accurate information in this time of uncertainties. CARPHA documents can be accessed as a reliable source of information from our [website](https://www.carphea.org). Available on the website are *Technical Documents, Media Releases and Communications Material.*

**References**