

## **Exponential Growth of COVID-19 Cases in Africa**



There are now more than <u>10,000 confirmed COVID-19 cases</u> in Africa with over 500 deaths. Due to the rapid spread of the virus over recent days, the World Health Organization (WHO) is concerned that the continent is facing massive escalation.

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When this happens, the consequences, for both healthcare and economy, are likely to be far worse than elsewhere. WHO is working with governments across Africa to scale up their capacities in critical response areas.

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Technically, the African continent had its <u>first case</u> in Egypt on 14 February, imported from Europe. However, within the WHO system, Africa is divided between two regional offices, and Egypt, together with Djibouti, Libya, Morocco, Somalia, Sudan and Tunisia, is covered by the WHO Regional Office for the Eastern Mediterranean. For the WHO Regional Office for Africa, which comprises 47 countries including Algeria and most of sub-Saharan Africa, the <u>first case</u>, also imported from Europe, was identified in Algeria on 25 February.

As of 8 April, infections have been reported in every country but one, Lesotho. The cases were initially confined to capital cities, but the situation is changing with a significant number of countries in Africa are now reporting cases in multiple provinces.

"COVID-19 has the potential not only to cause thousands of deaths, but to also unleash economic and social devastation. Its spread beyond major cities means the opening of a new front in our fight against this virus," said Dr Matshidiso Moeti, WHO Regional Director for Africa. In a comment to The Guardian she has stressed the exponential increase in numbers. "It took 16 days from the first confirmed case in the region to reach 100 cases. It took a further 10 days to reach the first thousand. Three days after this, there were 2,000 cases, and two days later we were at 3,000," she said.

The WHO is working with governments across Africa to ensure the rapid identification of cases, tracking down and quarantining of contacts and isolation and treatment of patients. Ghana, Kenya, Ethiopia, Egypt and Nigeria, among others, have decentralised their national testing spreading it across multiple labs.

Other important goals include provision of accurate information to public and protection of health workers.

Dr Ahmed Al-Mandhari, WHO Regional Director for the Eastern Mediterranean, believes that Africa still can contain disease transmission with a combination of public health and physical distancing measures. "Within that process, Member States should target effective control of the outbreak, but plan for the worst," he said noting that early isolation of all cases is one of the key control measures, along with early detection, early treatment and contact tracing.

Another concern is fragile health systems in African countries and the burden of complex emergencies, such as the ongoing <u>Ebola outbreak</u> in the Democratic Republic of the Congo or the <u>prevalence</u> of HIV and tuberculosis in South Africa. The WHO underscores that some countries may not have adequate intensive care unit capacity (such as beds, ventilators and trained personnel) and is calling for extended technical and financial support from the international community.

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Published on : Wed, 8 Apr 2020