

# COVID-19 in Timor-Leste

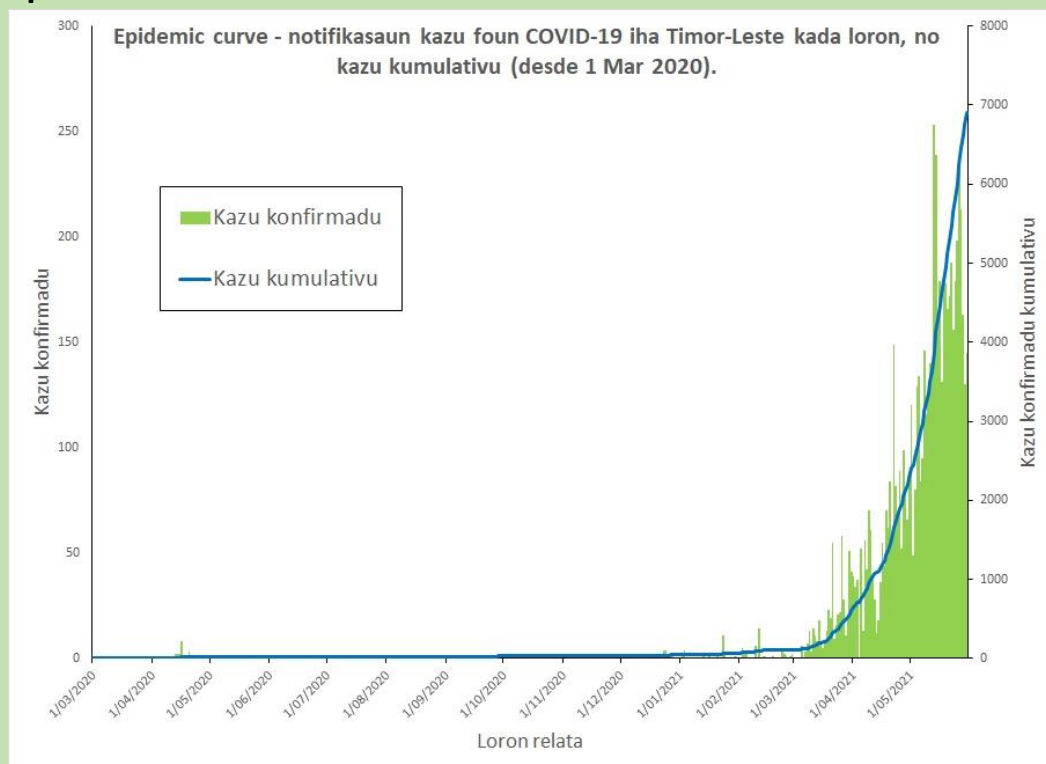
## Epidemiological Brief Nº6: 24 May – 30 May, 2021

A regular brief edited by: (1) Pilar 3 & Pilar 5 of the Ministry of Health (as part of the Task Force for the Prevention and Mitigation of Covid-19 Outbreak, Integrated Centre for Crisis Management, Situation Room); (2) Instituto Nacional de Saúde; (3) Menzies School of Health Research; (4) AusMAT; (5) CoMo Consortium; (6) WHO.

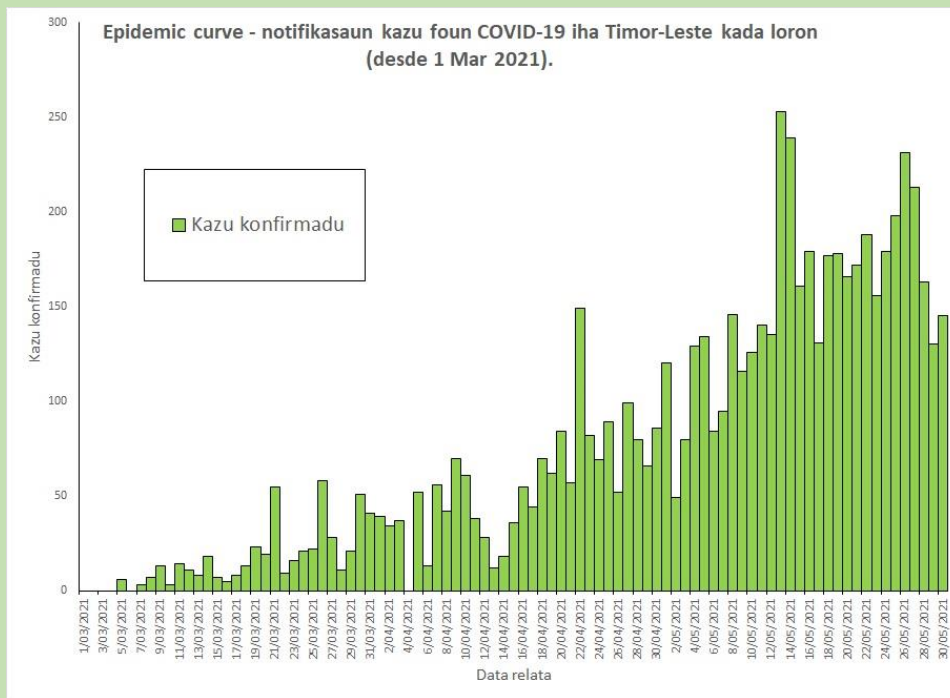
**Cumulative cases: 6,897 (1,259 cases since last report).**

**Data current as at 30 May 2021.**

### 1. Epidemic curve

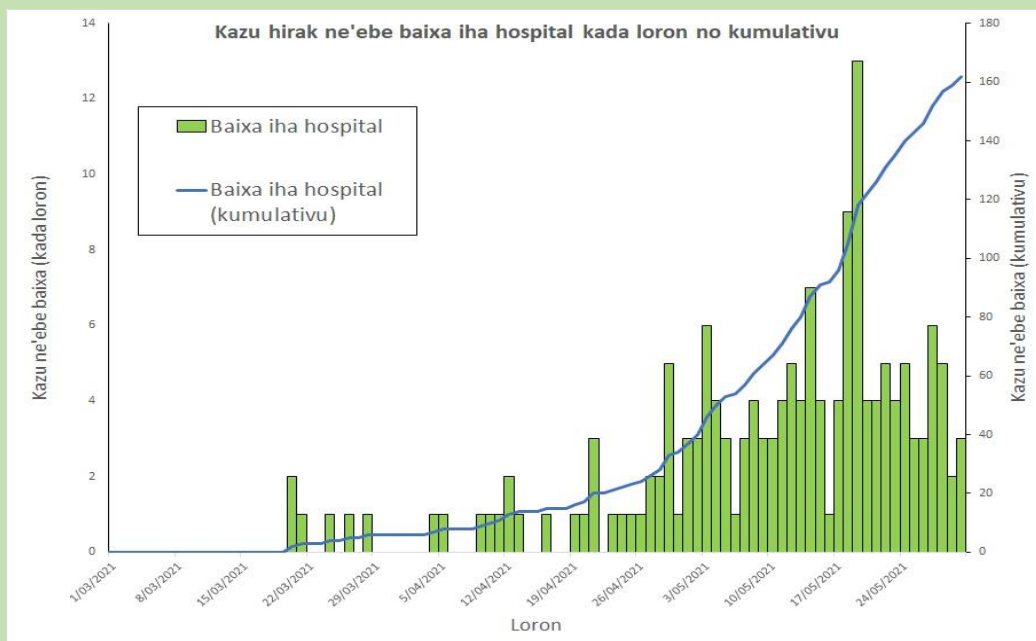


The epidemic curve shows the total case numbers for each day, in the green bars (measured against the y-axis on the left hand side of the graph). The blue line shows the cumulative total case numbers (measured against the y-axis on the right hand side of the graph), which have risen now to 6,897 since the beginning of the global pandemic (as at 30 May, 2021).



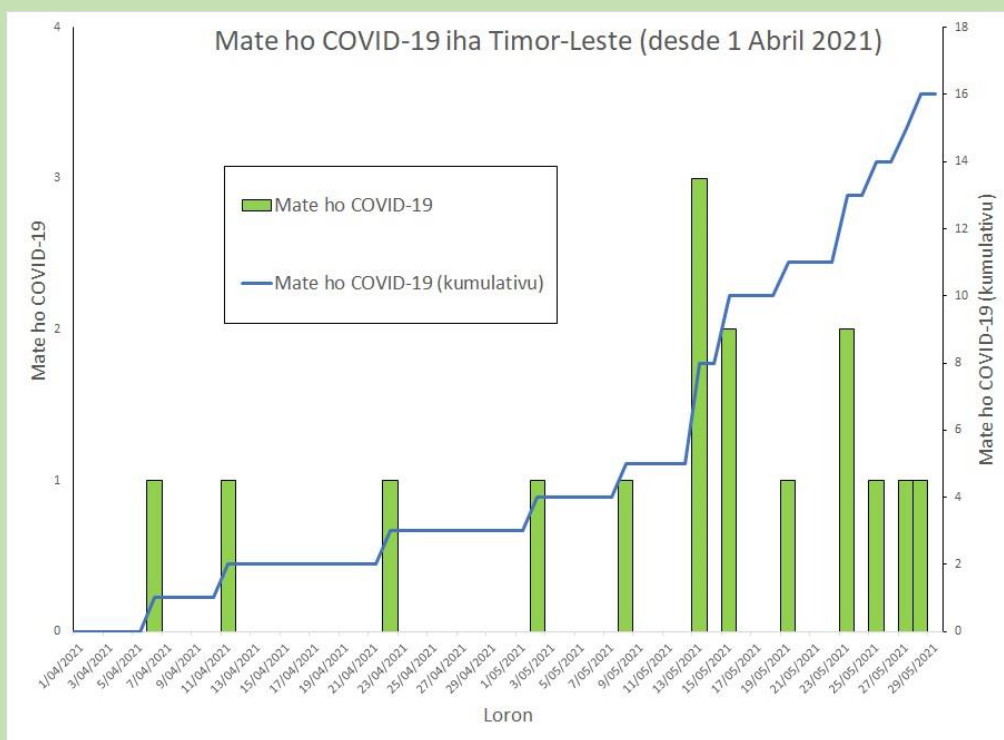
## 2. Hospitalisations and mortality

Approximately 10.1% of cases diagnosed in Timor-Leste between 24 May 2021 and 30 May 2021 were symptomatic. Since 1 March 2021, there have been 162 people with COVID-19 who have required hospitalisation. Hospitalisation numbers only include those with moderate, severe and critical disease, who need treatment in specialised healthcare facilities for COVID-19.



This graph shows the cases that have needed hospitalisation since March 2021 in green bars. The blue line shows the cumulative number of people who have needed hospitalisation.

There have been 16 people who have died with COVID-19 including 3 who died since the last report. Two (2) of the 3 deaths in the last week were in persons who had underlying comorbidities and who had COVID-19 symptoms for over a week before passing away or seeking treatment. Recognising symptoms and seeking early treatment is important and increases the chances of survival. Since the start of the pandemic, there have been 187 COVID-19 patients admitted for treatment at Vera Cruz and 179/187 have recovered, including even the seriously ill.



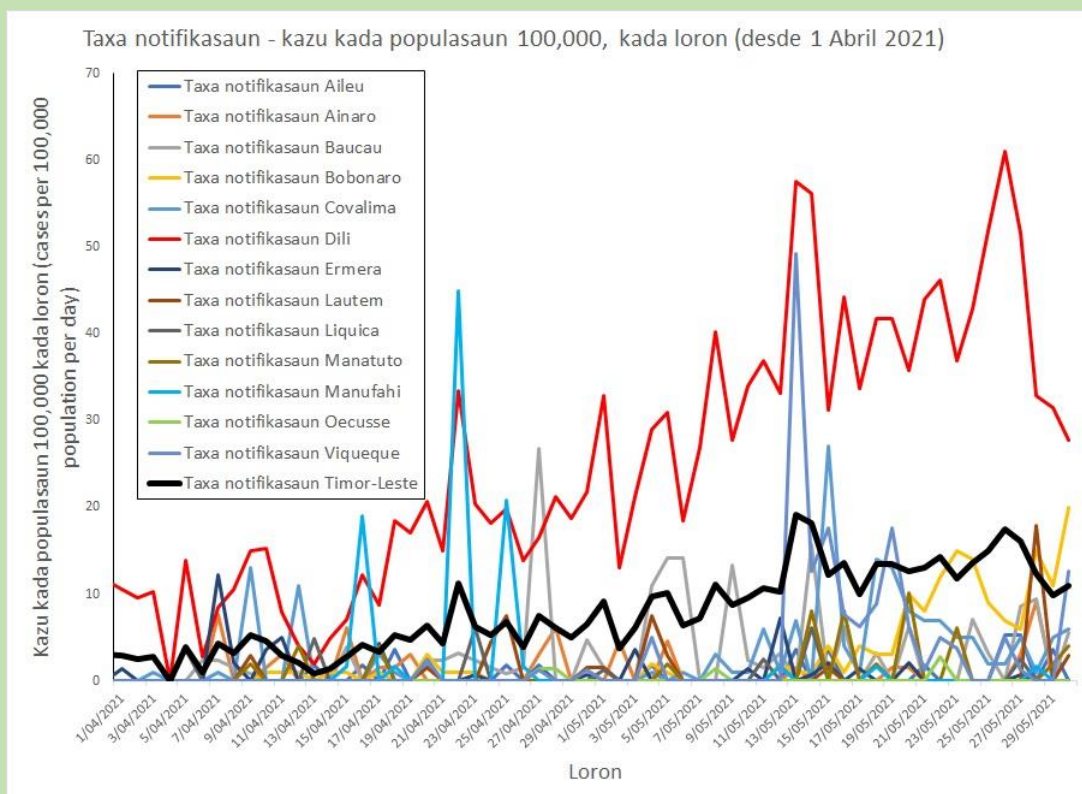
The case fatality rate measures what proportion of people who are known to have COVID-19, die with COVID-19. In Timor-Leste, the case fatality rate, based on known cases of COVID-19 and reported deaths remains low at 0.2%. This means that for every one thousand (1,000) cases reported, there have been 2 deaths.

In the past week in Timor-Leste, 79% (999/1,259) of the diagnosed with COVID-19 were aged less than 40 years.

| Idade            | Kazu | Proporsaun |
|------------------|------|------------|
| <10 anos         | 24   | 2%         |
| 10-19 anos       | 135  | 11%        |
| 20-29 anos       | 578  | 46%        |
| 30-39 anos       | 262  | 21%        |
| 40-49 anos       | 143  | 11%        |
| 50-59 anos       | 69   | 5%         |
| 60 anos ba leten | 38   | 3%         |
| Idade la iha     | 10   | 1%         |

### 3. Incidence rate estimates

The incidence rate measures the number of confirmed cases in a population, per day, and is usually measured as cases per 100,000 people per day. The average daily notification rate for Timor-Leste over the past 7 days (24 May – 30 May, 2021) was 13.6 cases per 100,000 population per day, compared to 12.7 cases per 100,000 population per day in the previous reporting period.



The notification rate in all municipalities over the last 7 days is reported in the table below.

| Municipality       | Rate per 100,000 population per day, from 24-30 May 2021 |
|--------------------|--|
| Aileu              | 2.0  |
| Ainaro             | 1.7  |
| Baucau             | 4.8  |
| Bobonaro           | 11.7   |
| Covalima           | 3.7  |
| Dili               | 42.8   |
| Ermera             | 0.1  |
| Lautem             | 2.9  |
| Liquica            | 0.4  |
| Manatuto           | 0.9  |
| Manufahi           | 0.2  |
| Oecusse            | 0.0  |
| Viqueque           | 2.7  |
| <b>Timor-Leste</b> | <b>13.6</b>  |

#### **4. Prevalence estimates**

Over the last week, 14.5% (1,118/7,721) tests were positive (compared to 17% in the previous reporting period). The prevalence of COVID-19 in Dili can be estimated, based on the proportion of people who test positive for COVID-19 when they are tested before travelling to leave the sanitary fence. In the seven days from the 24 May – 30 May 2021, there were 4,375 people tested for this purpose; 633 (14.5%) were positive. This can be used to estimate prevalence, and a calculation of 95% confidence intervals, suggests the current prevalence of COVID-19 in Dili is between 13.5% and 15.5%.

#### **5. Vaccination update**

As at 28 May 2021, there have been 76,582 doses of COVID-19 vaccine given in Timor-Leste. Approximately 30% of people aged 18 years and above in Dili have received their first dose of COVID-19 vaccine. The current vaccination phase is especially targeting older people (aged over 60 years) and adults with underlying health conditions as these people are most at risk of suffering from severe COVID-19.

People are considered fully vaccinated against COVID-19 from two weeks after they received their second dose of a COVID-19 vaccine. People who are fully vaccinated with two doses of the COVID-19 vaccine are at reduced risk for COVID-19 infection. If someone who is fully vaccinated gets COVID-19 they are likely to have asymptomatic or mild infection only, even if they are old or have other comorbidities. Two recent studies (Shah et al, March 2021 and Harris et al, April 2021) have shown that people who do become infected with COVID-19 after vaccination with AstraZeneca are up to 50% less likely to transmit the infection to non-immune household members.

#### **6. Recommendations and public health actions**

It is important that people who are unwell with respiratory symptoms or fever seek medical care early, especially if they have comorbidities. Do not wait to seek healthcare. Good treatment can be provided in Ministry of Health COVID-19 treatment facilities, and the majority of people with COVID-19 infection will recover. If people with symptoms of COVID-19 infection stay at home and avoid medical care, there is a risk of poor outcomes including death at home, and a risk of transmission of COVID-19 to others in the community, including those who are most at risk.

People who are over 60 years of age, and people who have comorbidities should be vaccinated as soon as possible, to protect them from COVID-19 and reduce their risk of severe disease or death. The COVID-19 vaccine is safe to give to people with hypertension, diabetes and heart disease. It can also be offered to women who are breastfeeding and to those who are pregnant if they are at high risk of COVID-19 disease. There is a significant risk of increasing numbers of deaths if people who are older and those with comorbidities like hypertension, diabetes and heart disease are not vaccinated quickly.

Transmission rate can be reduced by effective public health and social measures, including the use of masks, hand washing and physical distancing. Measures which limit physical interactions, travel and mass gatherings, have been shown to be effective in many countries around the world in reducing the transmission of COVID-19.

Mass gatherings can lead to significant transmission of COVID-19 and there have been previous outbreaks reported as a result of church singing;  
([https://wwwnc.cdc.gov/eid/article/27/6/21-0465\\_article](https://wwwnc.cdc.gov/eid/article/27/6/21-0465_article))

People attending authorised events including religious ceremonies, should maintain physical distance from others, wear a mask at all times, and wash hands regularly. Interactions with people should be reduced in frequency and duration.

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