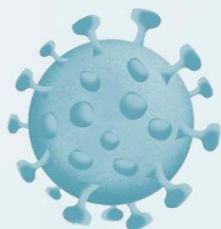


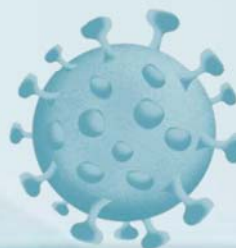


Respiratory viruses in Israel Surveillance Report

Report for Week 7, ending 20-02-2021



Israel Center for Disease Control





Summary: As of week 7 (ending February 20, 2021), respiratory morbidity rates are low; no influenza activity has been identified in the community Israel.

Clinical: Clinics in the community: No significant change in the visit rate to clinics due to pneumonia and due to upper respiratory tract infection.

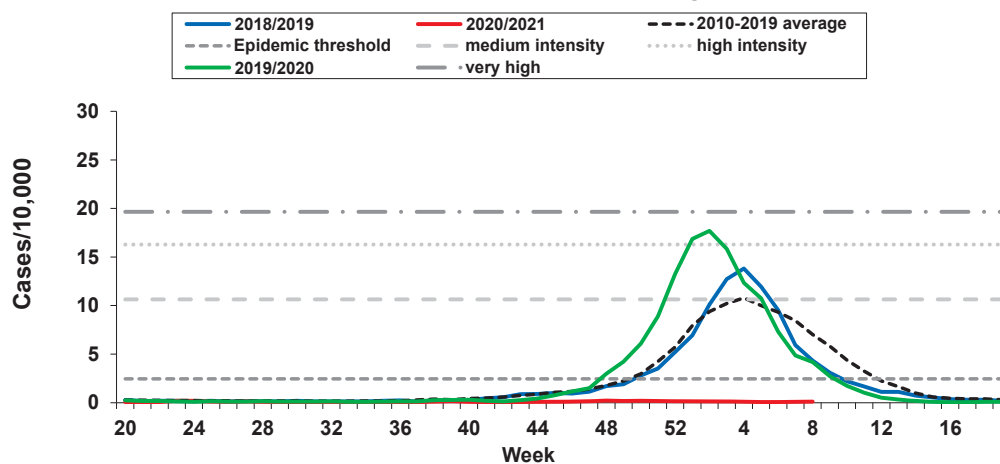
Hospitals (Clalit Health Services“): No significant change in the number and percentage of visits to the pediatric and internal medicine emergency departments at "Clalit Health Services" hospitals due to pneumonia.

Laboratory: On Week 7, 3 (15.8%) positive cases for SARS-CoV-2 were identified out of a total of 19 samples collected from patients visiting the sentinel clinics. No positive samples for RSV influenza were identified.

1. Visits to the community clinics due to influenza-like illness (ILI)

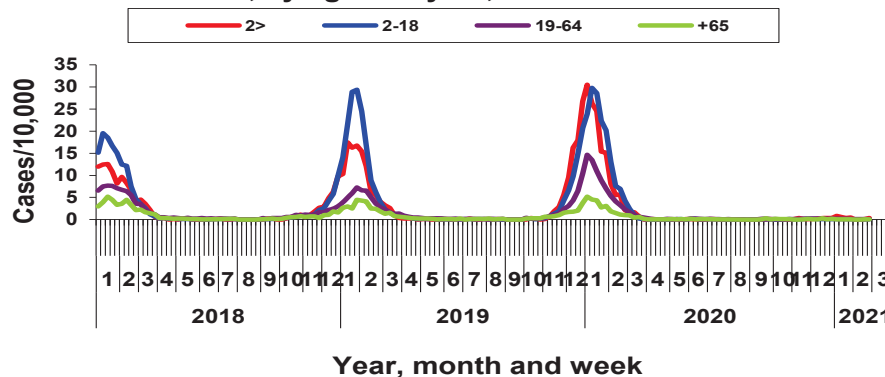
As of Week 7, visit rates to Maccabi Health Services Clinics due to influenza-like morbidity, both raw and age-specific, are still low. The rates are similar to the values seen between influenza seasons (Figures 1-2). A similar situation is reflected Clalit Health Services data.

Fig. 1: Weekly rate of visits due to influenza like illness, 2017-2020, compared to multi-annual average



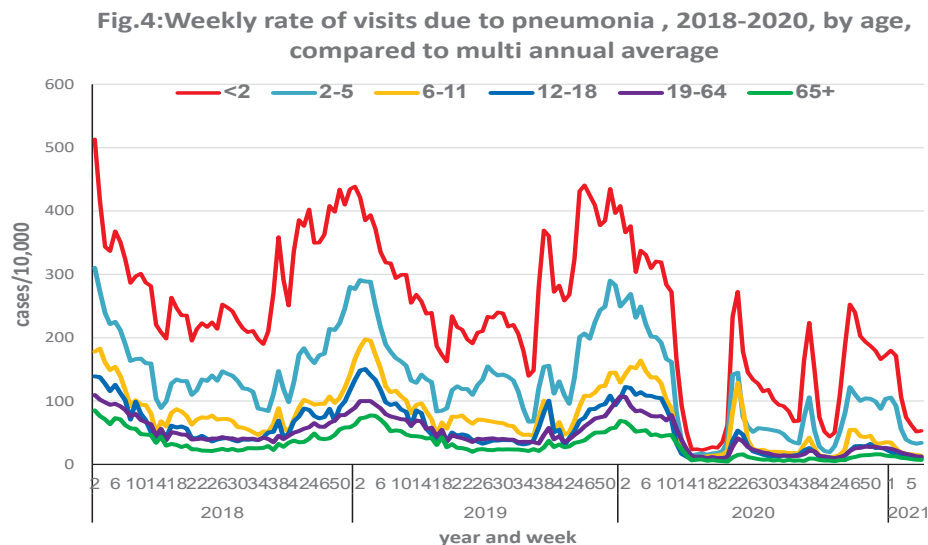
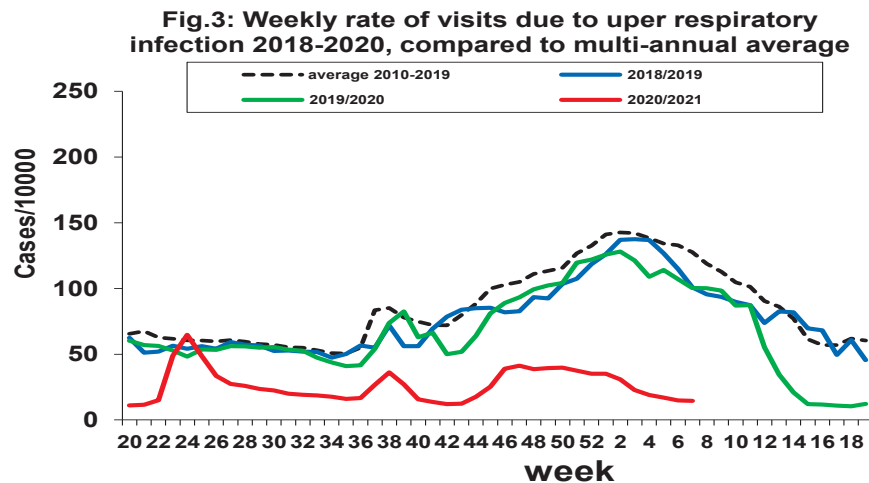
* The baseline level and the influenza activity intensity were calculated using an algorithm that was developed as part of the European influenza surveillance project (EuroFlu), based on past data accumulated at the ICDC regarding visits to "Maccabi Healthcare Services" clinics due to influenza-like illness.

Fig.2: Weekly rate of visits due to influenza-like illness, by age and year, 2018-2020



Visits to Community Clinics due to Upper Respiratory Infections (URI)

As of week 7, no significant change was observed in the gross visit rate to Maccabi Health Services clinics due to upper respiratory tract infections (Figures 3-4). Visits rates are still lower than is to be expected for the season. A similar picture was observed at "Clalit Health Services".



2. Visits to community clinics due to pneumonia

During the past week, no significant change was observed in the rate of visits to the Maccabi Health Services clinics due to pneumonia (Figures 5-6). The raw rate and the age-specific rates are still lower than expected for the season. A similar picture was observed at "Clalit Health Services".

Fig. 5: Weekly rate of visits due to pneumonia, 2018-2020, compared to multi-annual average

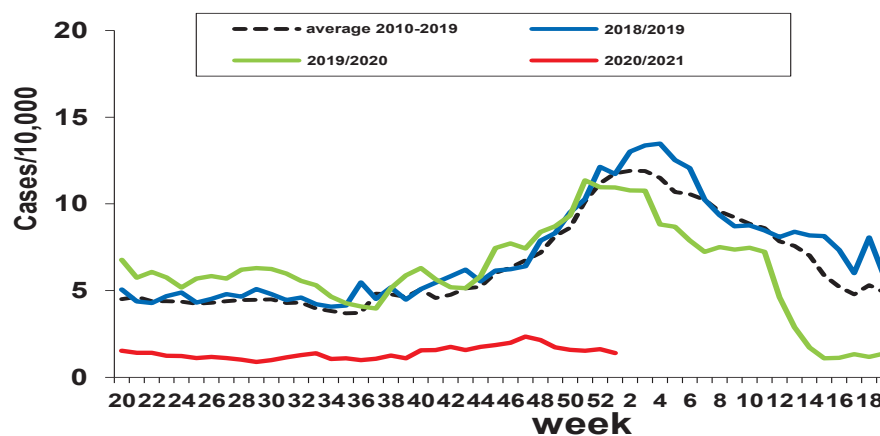
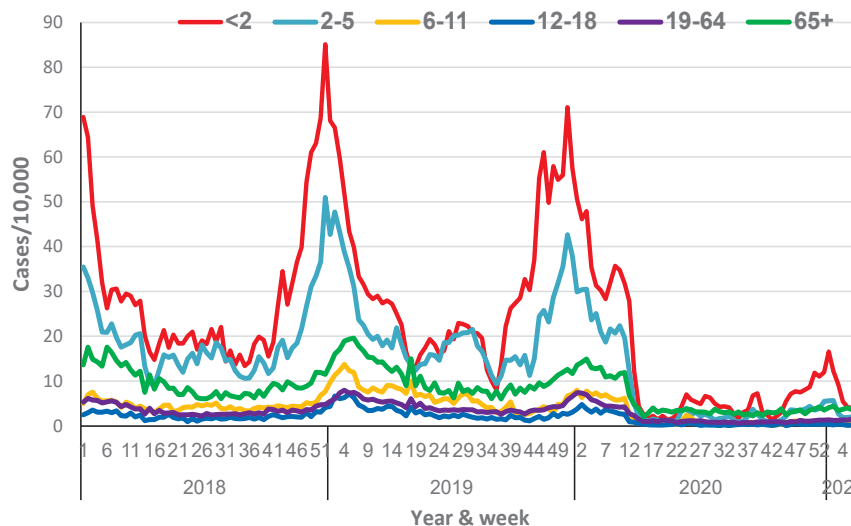
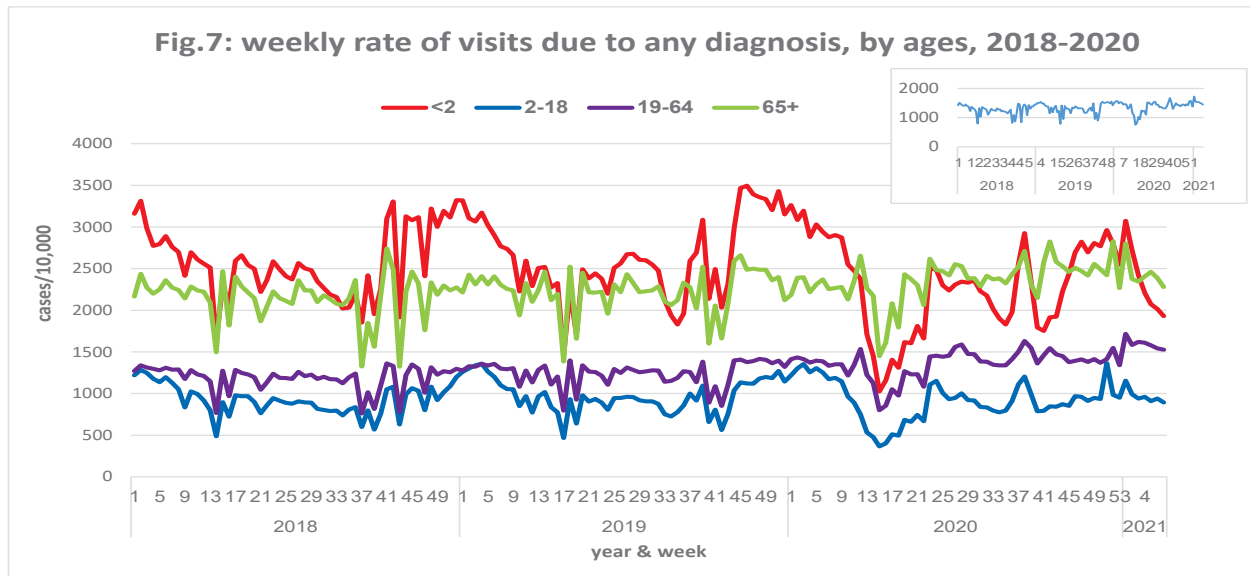


Fig. 6: Weekly rate of visits due to pneumonia, by age and year, 2018-2020



3. Visits to clinics in the community due to all the diagnoses, "Maccabi Health Services"

As of week 7, there is continued decrease in the rate of visits due to all diagnoses was observed among all age groups (Figure 7).



*The figure in the window in the upper right corner shows the gross rate of visits to clinics due to all diagnoses, in the years 2018-2020.

4. Visits to hospital Emergency Departments (ED) due to pneumonia

(Based on the Ministry of Health's database managed by the Health Information Division).

No significant change was observed in the percentage and number of visits to the pediatric and internal medicine emergency department due to pneumonia. Visits rates and numbers, both to the internal medicine and the pediatric emergency departments, were still lower than is to be expected for the season (Figures 8-11). No significant change was observed in the number of visits due to all diagnoses in the pediatric ED and internal medicine ED (Figure 12).

Fig. 9: Percentage of visits to pediatric ERs due to pneumonia, Clalit hospitals 2018-2020, compared to multi-annual average

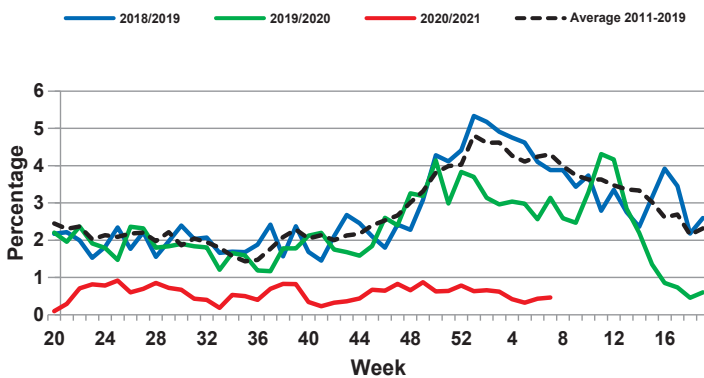


Fig. 8: Percentage of visits to internal medicine ERs due to pneumonia, Clalit hospitals 2018-2020, compared to multi-annual average

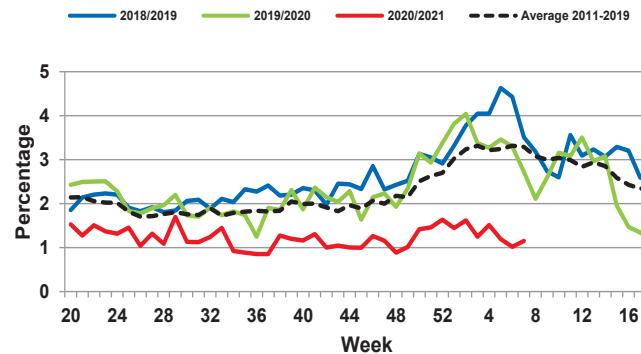


Fig. 10: Number of visits to Clalit internal ERs due to Pneumonia, Clalit hospitals, 2018-2020

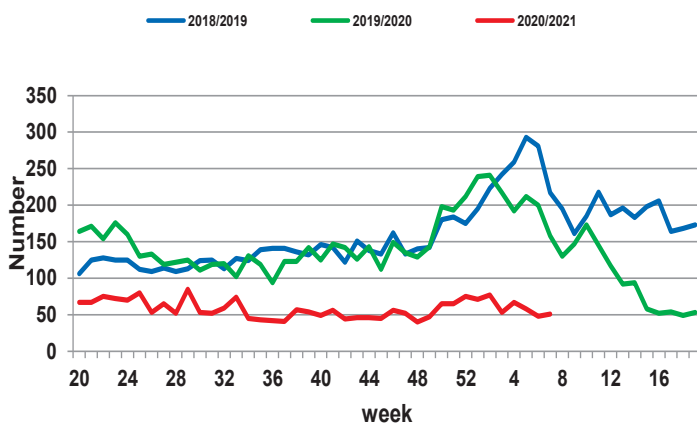


Fig.11: Number of visits to Clalit pediatric ERs due to pneumonia, 2018-2020

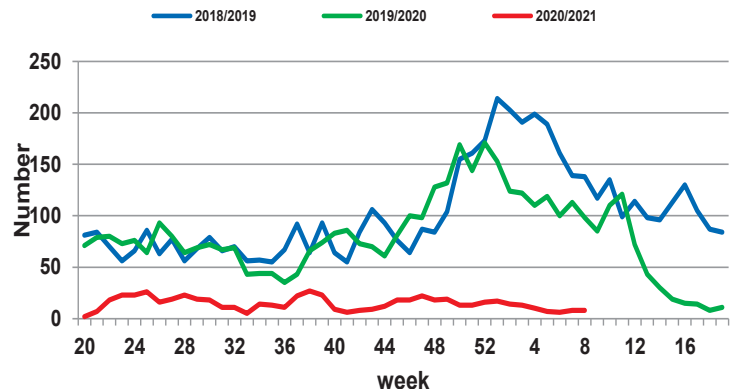
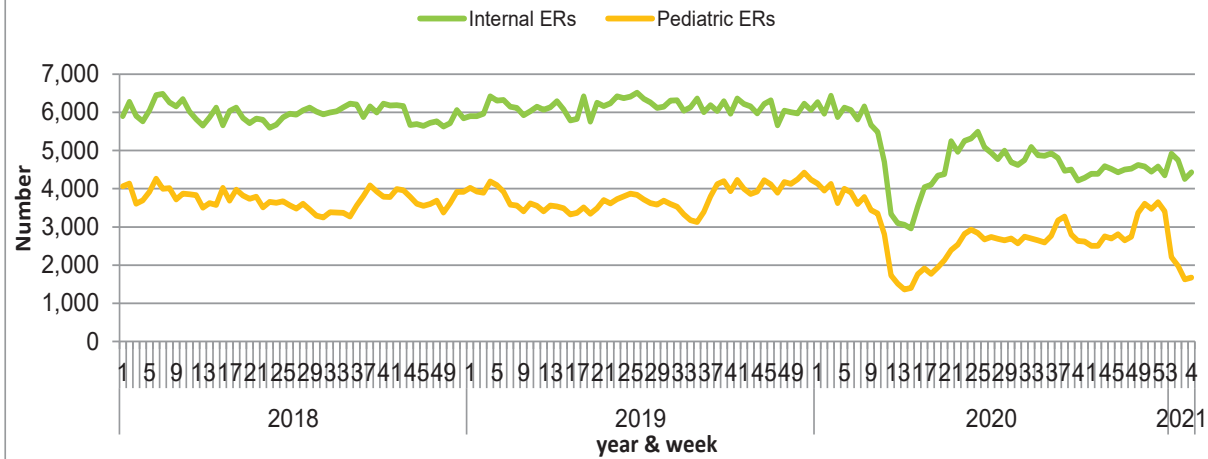




Fig.12: Number of visits to Clalit ERs due to any diagnosis, 2018-2020





5. Sentinel clinics in the community

Sentinel clinic activity for surveillance of morbidity caused by SARS-CoV-2 began on week 13 of 2020. In week 40, the influenza monitoring period officially began, during which the samples are also tested for influenza and RSV. As of Week 7, the network includes 32 clinics nationwide and 4 centers of nursing homes/sheltered housing of the "Beit Balev" chain (of the Maccabi group).

5.1. Test results for the new SARS-CoV-2 virus in samples from sentinel clinics testees (Table 1)

Table 1. Patients that tested positive for SARS-CoV-2 out of the total number of subjects that were tested in the sentinel clinics

	Week 7 (14/2-20/2/2021)	Accumulated Data since Week 12 (15/03-20/2/2021)
Positive	3 (15.8%)	194 (5.5%)
Border Positive	0	7 (0.2%)
Negative	16	3,290
Total	19	3,491

* There may be a retroactive update of the number of samples and their results.

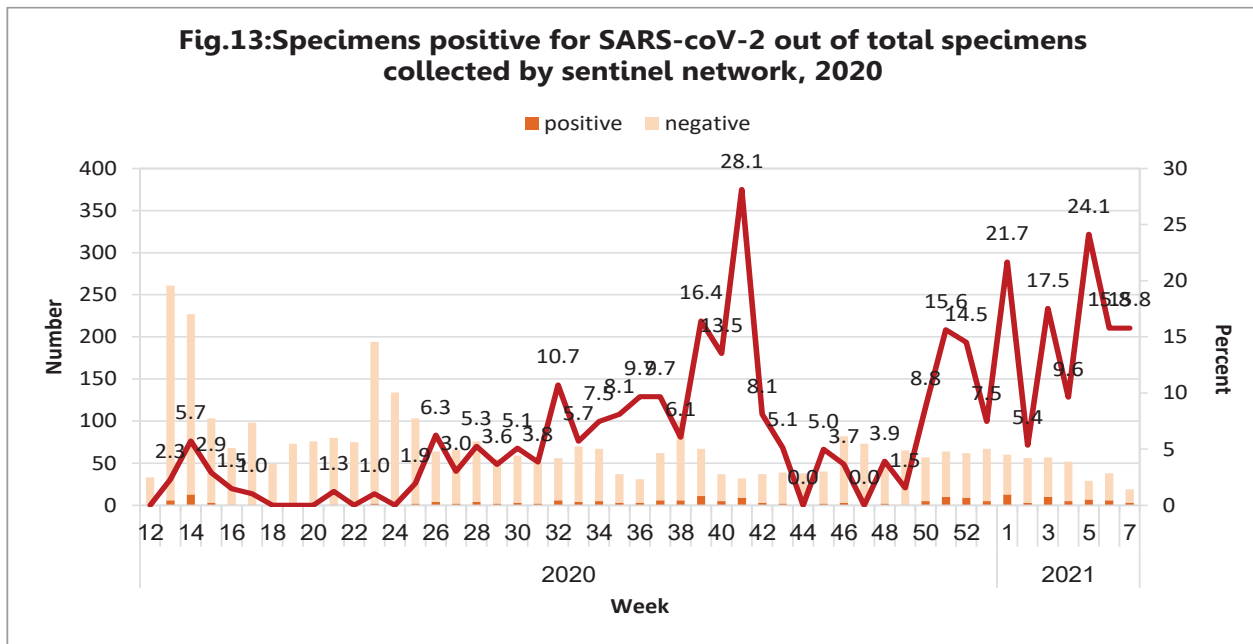
* An epidemiological week is calculated according to the sampling date.

On Week 7, ending 20/2/21, 3 (15.8%) SARS-Co -positive samples were detected out of the total number of samples sent from the sentinel clinics. The source of the positive samples was in: Jerusalem (2) and Petah Tikva (1).



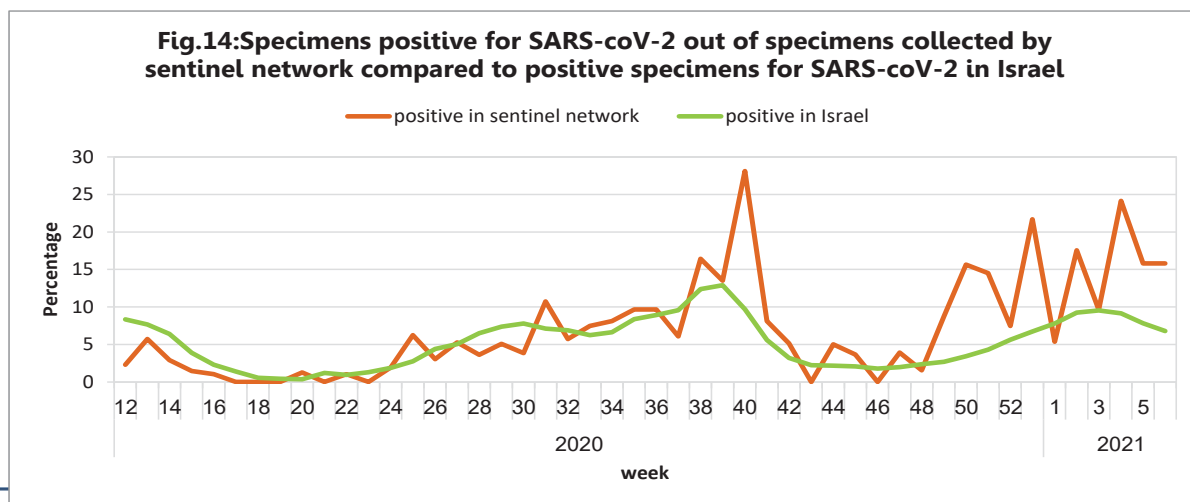
Of the 194 SARS-CoV-2-positive samples identified so far, 117 (60%) were among adults aged 19–64 years.

5.2. Patients that had tested positive and negative for SARS-CoV-2 in Sentinel clinics* (Figure 13).



* The figure shows only positive tests (no tests with a borderline positive value).

5.3. Percentage of SARS-CoV-2-positive patients from sentinel clinics compared to the percentage of new SARS-CoV-2-positive patients in Israel* (Figure 14).





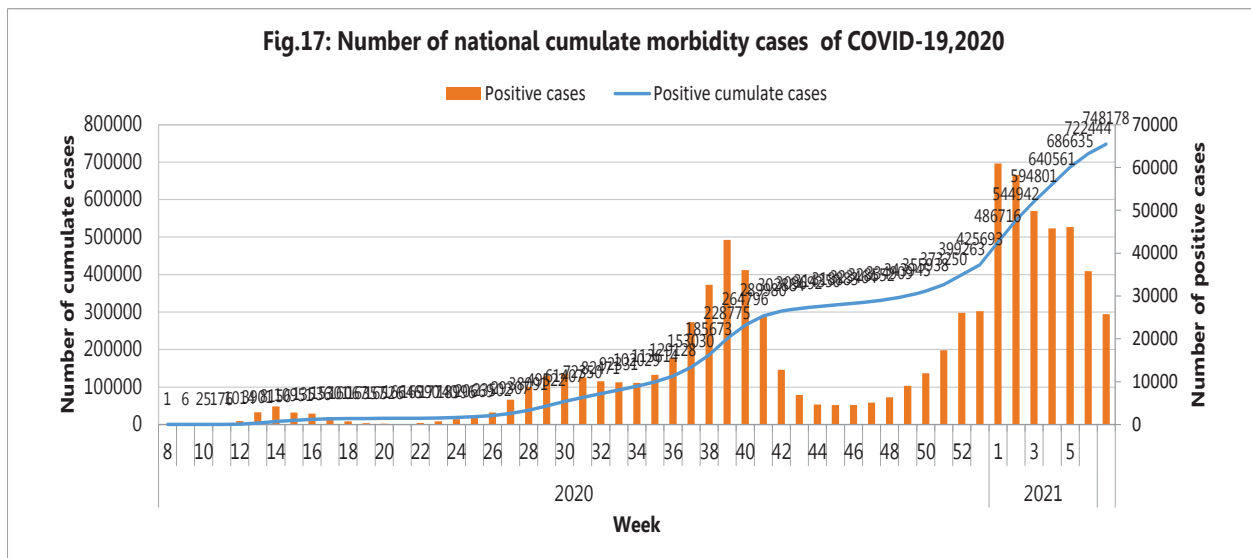
* The figure shows only positive tests (no tests with a borderline positive value).

6.4 Test results for the influenza and RSV virus in samples from sentinel clinics tests

As of week 7, no influenza or RSV viruses were detected in samples taken from patients in the sentinel clinics.

6. Cumulative national SARS-CoV-2 morbidity (the data are updated for the end of Week 7 ending February 20, 2021) (Figure 15)

(The figure is based on the official data provided by the Public Health Services).



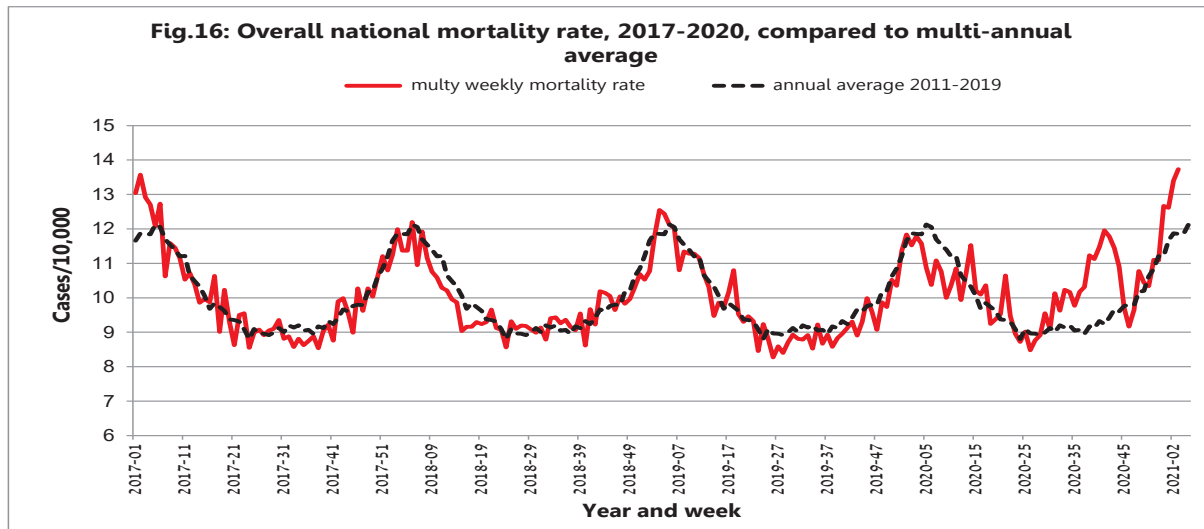
* Slight changes may apply due to retroactive updates.



8. Mortality in Israel

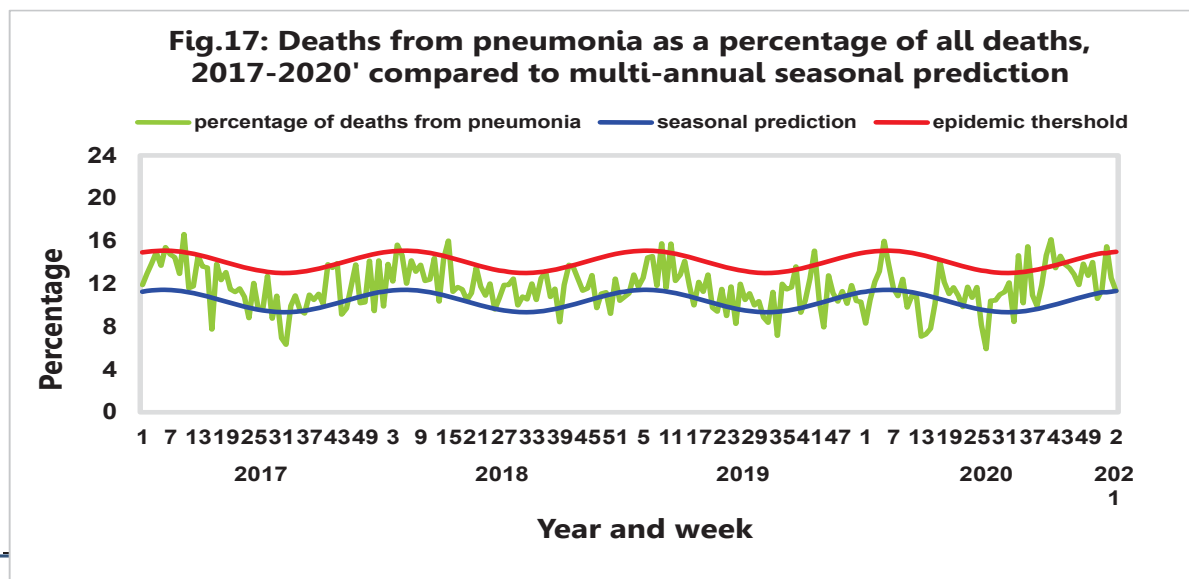
8.1 Mortality of all causes (updated for week 3 ending on January 23, 2021)

As of week 3, ending on January 23, 2021 - continued increase in death rate of all causes, which is now higher than the multi-annual average (Figure 16).



8.2 Pneumonia mortality (updated for week 2 ending on January 16, 2021)

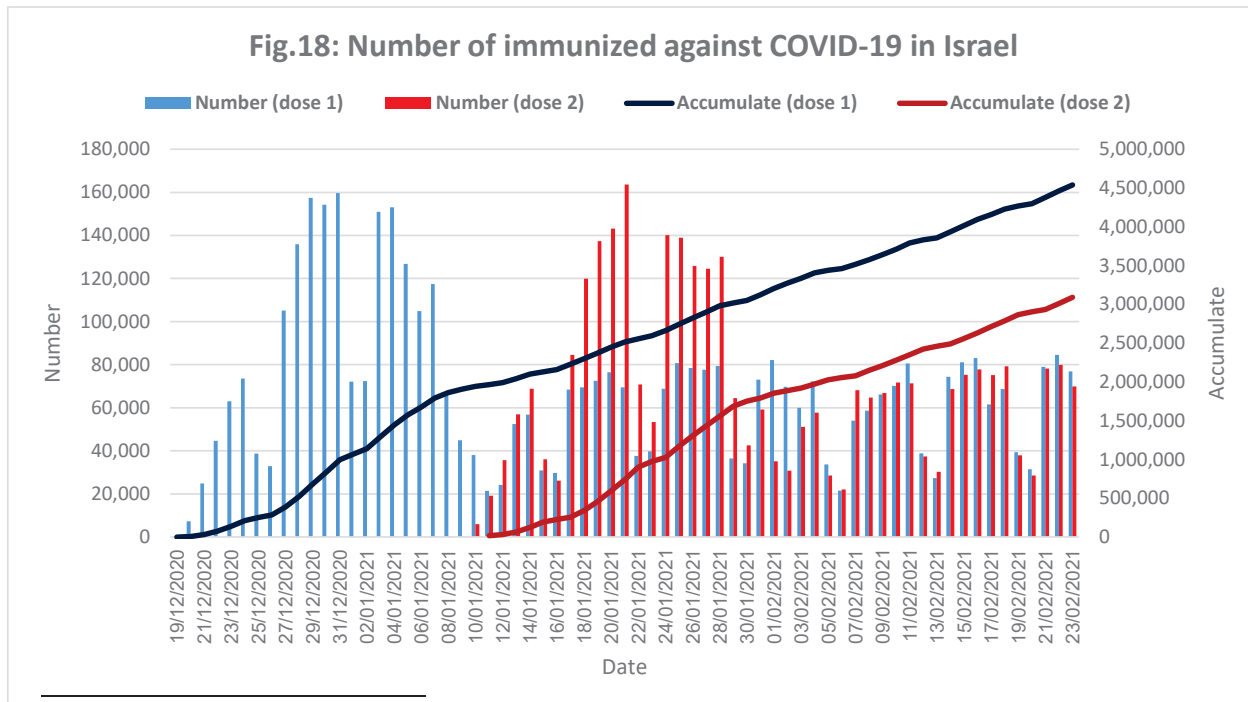
As of Week 2, the percentage of mortality due to pneumonia is now within the seasonally expected range (Figure 17).



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9. Vaccination against COVID-19 in Israel - first and second dose (based on data collected by the Computer Division of the Ministry of Health)

The data about immunization against COVID-19 in Israel (first and second dose) are summarized in Figure 18, as of 23/2/21.





10. Global COVID-19 snapshot

The upward trend in the number of people contracting SARS-CoV-2 is continued. As of February 20, 2021, the total number of confirmed COVID-19 cases is 111,102,016, the total number deaths is 2,462,911. The countries with the highest number of infections are: the United States (27,773,047), India (11,005,850), Brazil (10,139,148), Russia (4,177,330), the United Kingdom (4,115,513), France (3,543,295) and Italy (2,809,246). (Data taken from the World Health Organization dashboard - update to 22/2/2021).

11. Global snapshot - influenza

World Health Organization (WHO): Globally, low influenza activity has been reported and morbidity rates are lower than expected for the season. At the global level — out of the low number of samples reported so far to the World Health Organization, most viruses were type B. In temperate climates in the northern hemisphere, dominance of influenza A and B viruses has been reported.