



Libya COVID-19 Surveillance Weekly Bulletin

Epidemiological Week 27

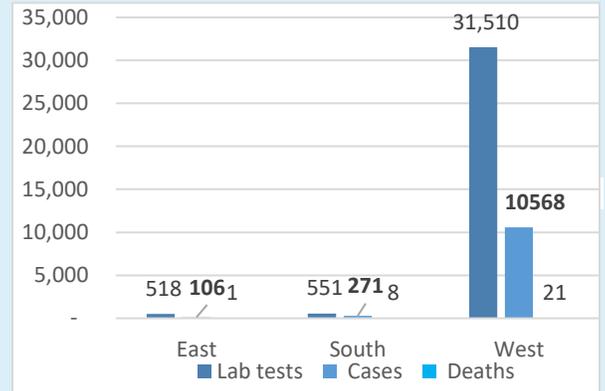
(5 – 11 July)

Data as received from the National Center for Disease Center (NCDC)

Total tested	New tested	Total active	Total confirmed	New confirmed	Total recovered	New recovered	Total deaths	New deaths
1,186,600	32,579	22,323	206,769	10,945	181,203	1,805	3,243	30

Highlights:

- 29 COVID-19 labs (out of 32) reported 32,579 new lab tests done in Epi-week 27. Thus, out of the total 1,186,600 tests in Libya since the beginning of the response, 206,769 (17.4%) were confirmed positive for SARS-CoV-2 (COVID-19).
- . (-see fig. 1).
- The national positivity rate for Epi-week 27 has increased from 8.3% (week 25) to 14% (week 26) to **33.6% for the current week**, which mainly represents the West with a positivity rate of 33.5%. It cannot be generalized based on the positivity rate in the East (20.5%) and South (49.2%) than the national-level positivity rate. Due to low lab testing and positive cases in East and South, national numbers have now skewed to data of the West.
- The overall number of new cases reported in EPID week 27 shows a **260% increase (10,945 cases)** compared to the prior week (3048 cases), with **West reporting a 272% increase (10,568 cases)** in new patients. East reported a 489% increase (106 cases), and South a 50% increase (271 cases) in the number of cases. Although the lab testing remains a limiting factor in East and South, cases numbers have significantly increased in the last two weeks and **remain an underestimate for East and South due to insufficient tested numbers**. The reasons behind the increased case numbers are weak implementation and adjustment of Public Health and Social Measures. In addition, **Libya has not reported an official confirmation of the Delta variant**.
- In Epi-week 27, the number of new deaths (30) showed a 36% increase compared to last week. As a result, the mortality rate increased to 0.4 deaths per 100,000 cases, with a case fatality rate of 0.3%.
- As compared to last week, West reported a 50% increase in deaths for the reporting week, East (50% decrease) and 33% increase reported in South (- see table 1)
- Libya remains classified under community transmission with the circulation of Alpha and Beta Variants of Concern (VOC).



Epidemiological situation:

		Positivity Rate		Case incidence per 100,000			Mortality rate per 100,000		Case Fatality Rate		
Epi-week 27		33.6		160.7			0.4		0.3%		
Cumulative		17.4%		3,036			48		1.6%		
Region	New cases in the last 7 days (%)	Change in new cases in the previous 7 days	Cumulative cases (%)	New deaths in the last 7 days (%)	Change in new deaths in the last 7 days	Cumulative deaths (%)	New lab tests are done in the last 7 days (%)	Change in new lab tests in the last 7 days	Cumulative lab tests (%)	Positivity rate	Cumulative positivity rate
West	10,568 (96.5%)	272%	189,872 (91.8%)	21 (70%)	50%	2,609 (80.4%)	31,510 (96.7%)	49%	1,116,283 (94.1%)	33.5	17
East	106 (1%)	489%	8,666 (4.2%)	1 (3.3%)	-50%	372 (11.5%)	518 (1.6%)	763%	43,920 (3.7%)	20.5	19.7
South	271 (2.5%)	50%	8,231 (4%)	8 (26.7%)	33%	262 (8.1%)	551 (1.7%)	31%	26,397 (2.2%)	49.2	31.2
Libya	10,945 (100%)	260%	206,769 (100%)	30 (100%)	36%	3,243 (100%)	32,579 (100%)	50%	1,186,600 (100%)	33.6	17.4

Table 1: Cumulative and within last 7 days comparative positive COVID-19 cases, testing and deaths.

Based on reporting figures, it appears that the highest transmission now exists in the South region, followed by West and then East, signifying the need for sustaining the previous testing levels, especially in East and South. The highest achieved number of weekly tests performed in Libya was 33,888 in Epi-week 11 of 2021, and the highest number of tests performed in a month was in March 2021, with 135,571 tests.

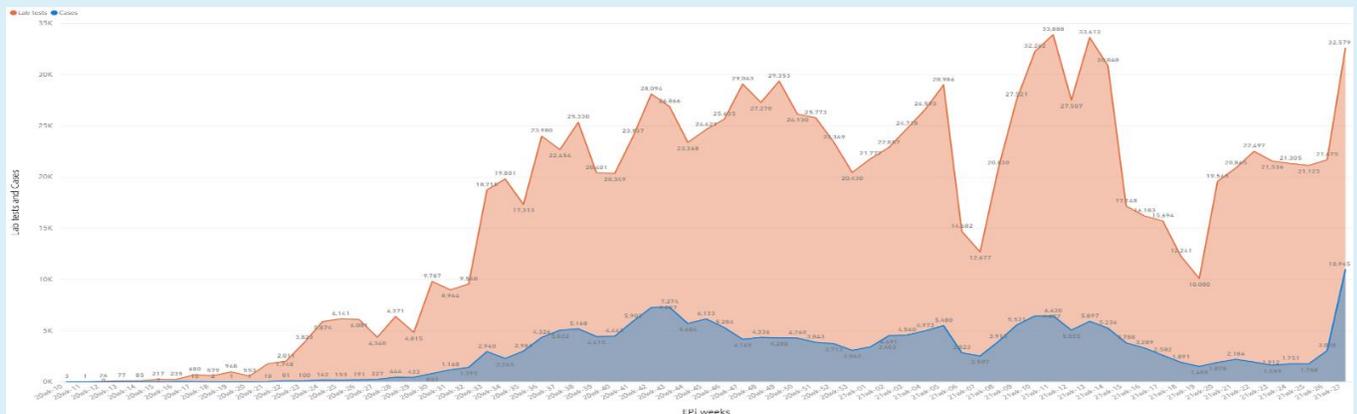


Fig. 2: Number of COVID-19 Laboratory tests performed vs confirmed positive cases per Epi-Weeks 2021 calendars.

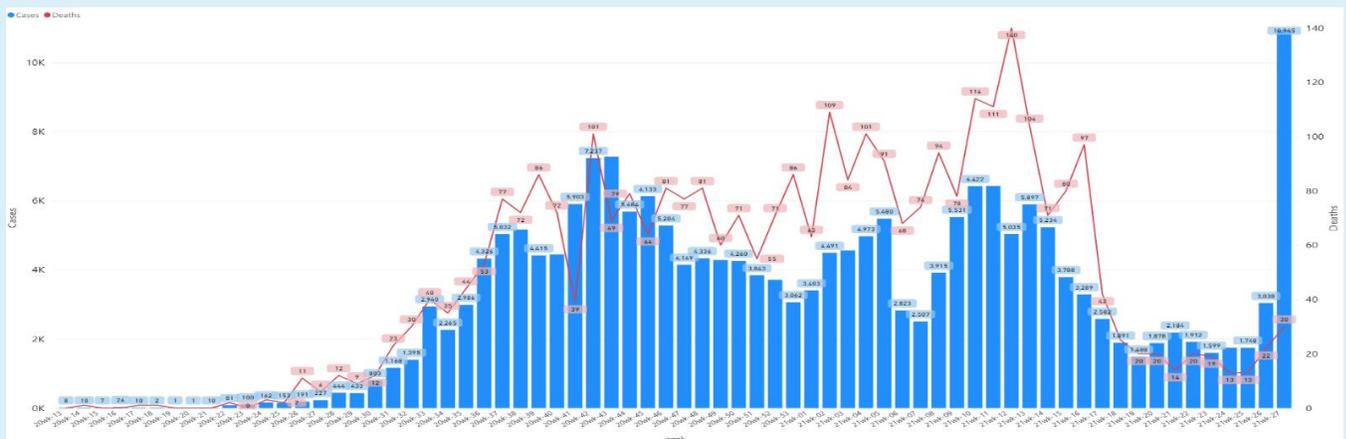


Fig. 3: Weekly COVID-19 cases and deaths, as of 11th July 2021 (Epi-week 27)

The above figure #3 reflects the weekly number of cases and deaths for this year, reflecting the **overall increasing trend in cases since 3rd July 2021** with a sudden spike in cases and number of deaths. Thirteen out of 22 districts did not report any deaths in the reporting week. The death numbers usually follow with a lag period as compared to the number of cases.

In the past epi-week, **Aljufra (44 cases, 780% increase), Murzuq (19 cases, 533% increase), Misrata (3845 cases, 509% increase), Nalut (48 cases, 336% increase), Zwara (398 cases, 249% increase), Azzawya (2274 cases, 268% increase), Tripoli (3187 cases, 206% increase), Aljbara (385 cases, 198% increase) and Benghazi (88 cases)** showed a significant increase in cases compared to last reporting week. The three districts reporting the highest number of new cases continue to be: **Misrata with 3845 (509% increase), Tripoli with 3187 (206% increase) and Azzawya 2274 (268% increase)**. On the other hand, Al Marj and Jabal al Akhdar districts in the East and Ghat in the South have reported no data in the last fourteen weeks. The main reason for the non-inclusion of data from municipalities is referral testing in COVID-19 in labs of the nearest municipalities.

The most significant decrease in cases was reported in Ejdabia and Tobruk in the East and Ubari and Wadi Ashaati in the South. Fewer case numbers are directly proportional to less testing in reporting week. See Table II below for absolute numbers.

Region	District	Cases		% Increase / decrease		Deaths		% Increase / decrease		wk-27	
		wk-26	wk-27			wk-26	wk-27			Case incidence per 100,000	Mortality rate per 100,000
East	Al Jabal Al Akhdar	0	0	-	●	0	0	-	●	0	0
East	Alkufra	4	9	125	●	1	0	-100	●	16	0
East	Almarj	0	0	-	●	0	0	-	●	0	0
East	Benghazi	0	88	-	●	0	0	-	●	10	0
East	Derna	0	1	-	●	0	0	-	●	0	0
East	Ejdabia	10	6	-40	●	1	1	0	●	3	0
East	Tobruk	4	2	-50	●	0	0	-	●	1	0
South	Aljufra	5	44	780	●	0	0	-	●	73	0
South	Ghat	0	0	-	●	0	0	-	●	0	0
South	Murzuq	3	19	533	●	0	0	-	●	20	0
South	Sebha	80	134	68	●	6	8	33	●	80	5
South	Ubari	20	17	-15	●	0	0	-	●	18	0
South	Wadi Ashshati	73	57	-22	●	0	0	-	●	60	0
West	Al Jabal Al Gharbi	215	293	36	●	1	0	-100	●	80	0
West	Aljbara	129	385	198	●	1	3	200	●	70	1
West	Almargeb	71	126	77	●	4	2	-50	●	23	0
West	Azzawya	618	2274	268	●	3	4	33	●	623	1
West	Misrata	631	3845	509	●	4	8	100	●	568	1
West	Nalut	11	48	336	●	0	1	-	●	44	1
West	Sirt	9	12	33	●	0	2	-	●	8	1
West	Tripoli	1041	3187	206	●	1	0	-100	●	261	0
West	Zwara	114	398	249	●	0	1	-	●	110	0
	Total	3038	10945			22	30			160.7	0.4



Table II: Comparative number and trends of COVID-19 positive cases and deaths in epi week 26 vs 27 by district

Epidemiological Focus of the current epidemiological week: Current challenges with Delta variant and WHO recommendations

In all WHO regions, countries are reporting sharp increases in cases and hospitalizations. **Libya is not an exception this week.** There are many factors that contribute to this, as repeatedly outlined by WHO, including the emergence and circulation of more transmissible variants of SARS-CoV-2 (**only alpha and beta strains in Libya**), increased social mixing and mobility, uneven and inequitable vaccination; and considerable pressure to lift public health and social measures.

On 11th May 2021, WHO designated Delta (B.1.617.2) as a variant of concern due to evidence of increased transmissibility. The increase in the effective reproduction number compared with the Alpha variant (B.1.1.7) is estimated to be 55% (95% CI: 43–68).³ Given the increase in transmissibility, the Delta variant is expected to rapidly outcompete other variants and become the dominant variant over the coming months. **Currently, Libya has not reported the presence of the Delta variant officially.**

Since the beginning of the pandemic, WHO Libya has recommended a comprehensive approach to control COVID-19 and remains applicable to the current surge in cases and hospitalizations in Libya.

- **Strengthening public health and social measures (PHSM)**- including robust surveillance in hospitals and Points of Entry, strategic testing especially in East and South, early case detection based on latest case definitions, isolation and clinical care by trained and protected health and care workers- remains critical. Additionally, masking, physical distance, avoiding crowded places and keeping indoor areas well ventilated remain the basis for the response.
- **Equitable distribution or sharing of resources among different country regions** such as protective gear, medical oxygen, tests, treatments, and vaccines.
- **Adopting risk-based approaches for mass gatherings, smart lockdowns and international travel.**
- **Contact tracing and supported quarantine of contacts.**

Technical guidance and other resources

New global COVID-19 WHO normative guidance made available this week:

- [Therapeutics and COVID-19: living guideline: **** NEW **** strong recommendation to use IL-6 receptor blockers \(tocilizumab or sarilumab\) in patients with severe or critical COVID-19 \(published 6th July 2021\)](#)
- [WHO Global Clinical Platform for the Clinical Characterization of COVID-19: Statistical Analysis Plan, 7th July 2021](#)
- [Modelling the health impacts of disruptions to essential health services during COVID-19](#)
- [Diagnostics, therapeutics, vaccine readiness, and other health products for COVID-19](#)
- [COVID-19 Vaccines: safety surveillance manual. A module on safety surveillance of COVID-19 vaccines in pregnant and breastfeeding women](#)
- [Infection prevention and control during health care when coronavirus disease \(COVID-19\) is suspected or confirmed](#)

Links to important resources:

- [Technical Guidance](#)
- [WHO Coronavirus Disease \(COVID-19\) Dashboard](#)
- [WHO COVID-19 Operational Updates](#)
- [WHO COVID-19 case definitions](#)
- [WHO Eastern Mediterranean Region Update](#)
- [COVID-19 Dynamic Infographic Dashboard for Libya](#)
- [National Center for Disease Control Libya Facebook page](#)
- [WHO Libya Facebook page](#)
- [WHO Libya Twitter handle](#)
- [Risk Communication and Community Engagement Resources and Updates](#)
- [COVID-19 vaccination tracker for EMRO countries](#)

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For more information, please visit www.who.int | www.reliefweb.int | www.humanitarianresponse.info