



Libya COVID-19 Surveillance Weekly Bulletin

Epidemiological Week 25 (21 – 27 June)

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
1,132,346	21,125	11,713	192,786	1,748	177,882	1,432	3,191	13

Highlights:

- 24 COVID-19 labs (out of 32) reported 21,125 new lab tests done for Epi-week 25. Thus, out of the total 1,132,346 tests in Libya since the beginning of the response, 192,786 (17%) were confirmed positive for SARS-CoV-2 (COVID-19).
- Compared to Epi-week 24, there was a 1% decrease in overall national testing: by regions, West (1% increase), South (17% decrease) and East (71% decrease). 98.2% (20,756) of national testing was performed in the West as compared to both East (103) and South (266) Regions. (-see fig. 1)
- The national positivity rate for Epi-week 25 remained at 8.3%, which mainly represents the West with a positivity rate of 7.8%. It cannot be generalized based on a much higher positivity rate in the East (38.8%) and South (30.4%) 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 shows a 0.2% decrease compared to the prior week, with West reporting a 4% increase in new patients. East reported a 43% decrease, and South a 26% decrease in the number of cases. Although the lab testing remains at an average number of 21,000 lab tests per week in the last three weeks, cases numbers have been declining since EPID week 11. The decrease in confirmed cases can be either due to more healthy people getting tested like travellers, non-inclusion of people diagnosed by Antigen Rapid Diagnostic Tests in official reporting, non inclusion of probable cases diagnosed by chest imaging and less testing of suspected and probable cases as per case definition. In addition, there is no reported shortage of tests or lab reagents from any COVID-19 labs.
- In Epi-week 25, the number of new deaths (13) showed no change compared to last week. As a result, the mortality rate remained 0.2 deaths per 100,000 cases, with a case fatality rate of 0.7%.
- West reported a decrease in deaths for the reporting week (13% decrease), East (100% increase) and no deaths reported in South (- see table 1)
- Libya remains classified under community transmission with the circulation of Alpha and Beta Variants of Concern (VOC).

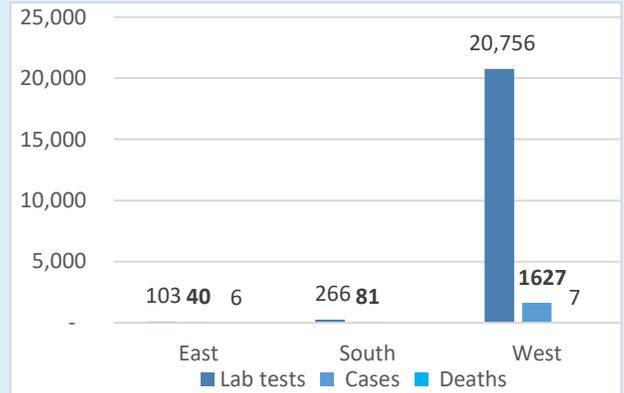


Fig. 1: COVID-19 cases, deaths, and lab tests for Epi week 25 by region

Epidemiological situation:

		Positivity Rate		Case incidence per 100,000			Mortality rate per 100,000			Case Fatality Rate	
Epi-week 25		8.3		25.7			0.2			0.7%	
Cumulative		17%		2831			47			1.7%	
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 labs tests in the last 7 days	Cumulative lab tests (%)	Positivity rate	Cumulative positivity rate
West	1,627 (93.1%)	4%	176,465 (91.5%)	7 (61.5%)	-13%	2,574 (80.7%)	20,756 (98.2%)	1%	1,063,580 (94%)	7.8	16.6
East	40 (2.3%)	-43%	8,542 (4.5%)	6 (23.1%)	100%	369 (11.5%)	103 (0.5%)	-71%	43,342 (3.8%)	38.8	19.7
South	81 (4.6%)	-26%	7,779 (4%)	0 (15.4%)	-100%	248 (7.8%)	266 (1.3%)	-17%	25,424 (2.2%)	30.4	30.6
Libya	1,748 (100%)	-0.2%	192,786 (100%)	13 (100%)	0%	3,191 (100%)	21,125 (100%)	-1%	1,132,346 (100%)	8.3	17

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 East region, followed by South and then West with a positivity rate of 7.8%, 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.

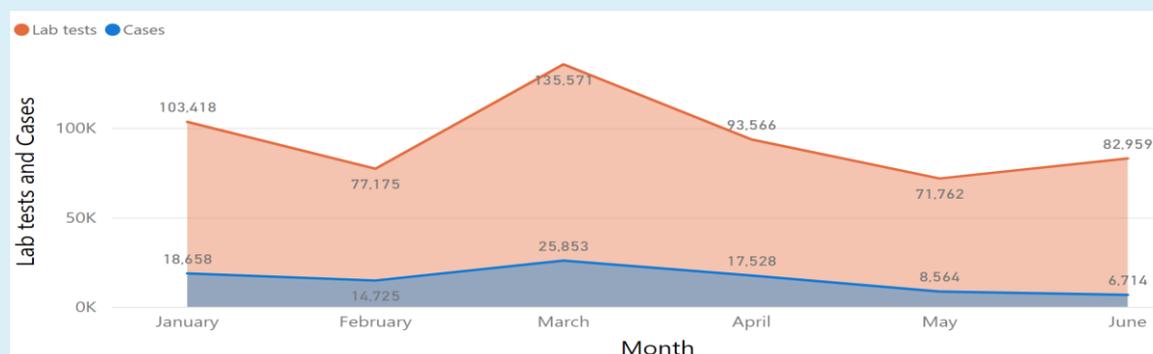


Fig. 2: Number of COVID-19 Laboratory tests performed vs confirmed positive cases per Epi-Month 2021 calendars.



Fig. 3: Monthly COVID-19 cases and deaths, as of 27 June 2021 (Epi-week 25)

The above figure #3 reflects the monthly number of cases and deaths for this year, reflecting the overall decreasing trend in both cases and the number of deaths at the national level since April 2021. Cases have decreased to levels that were present in mid-July 2020. Fifteen out of 22 districts did not report any deaths in the reporting week.

In the past epi-week, Ejdabia in East, Wadi Ashaati and Aljufra in the South and Al Jabal al Gharbi in West showed a significant increase in cases compared to last reporting week. The three districts reporting the highest number of new cases continue to be: Tripoli with 639 (5% decrease), Al Jabal al Gharbi with 421 (114% increase) and Azzawya 215 (2% 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 twelve weeks. The main reason for the non-inclusion of data from municipalities is referral testing in COVID-19 in labs of the nearest municipalities. Benghazi and Derna in the East did not report any cases in reporting week 24.

The most significant decrease in cases in Benghazi, Derna and Ghat with 100% decrease, Murzuq (84% decrease) Aljara (55% decrease) and Almageb in the reporting attributed to low testing last week. See Table II below for absolute numbers.

Region	District	Cases		% Increase / decrease		Deaths		% Increase / decrease		wk-25	
		wk-24	wk-25			wk-24	wk-25			Case incidence per 100,000	Mortality rate per 100,000
East	Al Jabal Al Akhdar	0	0	-	●	0	0	-	●	0	0
East	Alkufra	10	6	-40	●	0	0	-	●	11	0
East	Almarj	0	0	-	●	0	0	-	●	0	0
East	Benghazi	36	0	-100	●	0	0	-	●	0	0
East	Derna	2	0	-100	●	0	0	-	●	0	0
East	Ejdabia	7	27	286	●	0	3	-	●	13	1
East	Tobruk	15	7	-53	●	3	3	0	●	3	1
South	Aljufra	6	12	100	●	0	0	-	●	20	0
South	Ghat	1	0	-100	●	0	0	-	●	0	0
South	Murzuq	45	7	-84	●	0	0	-	●	7	0
South	Sebha	54	45	-17	●	2	0	-100	●	27	0
South	Ubari	0	8	-	●	0	0	-	●	9	0
South	Wadi Ashshati	4	9	125	●	0	0	-	●	9	0
West	Al Jabal Al Gharbi	197	421	114	●	2	1	-50	●	115	0
West	Aljara	183	82	-55	●	1	1	0	●	15	0
West	Almageb	90	34	-62	●	1	2	100	●	6	0
West	Azzawya	211	215	2	●	1	1	0	●	59	0
West	Misrata	172	191	11	●	2	2	0	●	28	0
West	Nalut	6	10	67	●	0	0	-	●	9	0
West	Sirt	12	7	-42	●	0	0	-	●	5	0
West	Tripoli	676	639	-5	●	0	0	-	●	52	0
West	Zwara	24	28	17	●	1	0	-100	●	8	0
	Total	1751	1748			13	13			25.7	0.2



Table II: Comparative number and trends of COVID-19 positive cases and deaths in epi week 24 vs 25 by district

Epidemiological Focus of the current epidemiological week: Recommendations for national SARS-CoV-2 testing strategies and diagnostic capacities.

Diagnostic testing for SARS-CoV-2 is a critical component of the overall prevention and control strategy for COVID-19.

- Countries should have a national testing strategy with clear objectives adapted according to changes in the epidemiological situation, available resources and tools, and country-specific context.
- It is critical that all SARS-CoV-2 testing is linked to public health actions to ensure appropriate clinical care and support and to carry out contact tracing to break chains of transmission.
- All individuals meeting the [suspected case definition for COVID-19](#) should be tested for SARS-CoV-2, regardless of vaccination status or disease history.
- Individuals meeting the suspected case definition for COVID-19 should be prioritized for testing. If resources are constrained, and it is not possible to test all individuals meeting the case definition, the following cases should be prioritized for testing:
 - individuals who are at risk of developing severe disease

- health workers
- inpatients in health facilities
- the first symptomatic individual or subset of symptomatic individuals in a closed setting (e.g., long-term care facilities) in the setting of a suspected outbreak.
- Nucleic acid amplification tests (NAAT) are the reference standard for the diagnosis of acute SARS-CoV-2 infection.
- Countries can use a high-quality antigen-detection lateral flow or rapid diagnostic tests (Ag-RDTs), which are simple to use and offer rapid results, to achieve high coverage of testing, ideally testing all symptomatic individuals meeting the COVID-19 case definition as soon as possible from disease onset (within the first week of illness).
- Testing asymptomatic individuals with NAAT or Ag-RDTs is currently recommended only for specific groups, including contacts of confirmed or probable COVID-19 cases and frequently exposed groups such as health care workers and long-term care facility workers.
- Widespread screening of asymptomatic individuals is not a currently recommended strategy due to the high costs and the lack of data on its operational effectiveness.
- Considerations for the use of self-testing should include improved access to testing and potential risks that may affect outbreak control.
- Mutation-detecting NAAT assays may be used as a screening tool for SARS-CoV-2 variants, but the presence of a specific variant should be confirmed through sequencing. In addition, such tests should be appropriately validated for their purpose.
- The network of SARS-CoV-2 testing facilities should leverage and build on existing capacities and capabilities, integrate new diagnostic technologies, and adapt capacity according to the epidemiological situation, available resources, and country-specific context.

Technical guidance and other resources

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

- [An indicator framework for the evaluation of the public health effectiveness of digital proximity tracing solutions](#)
- [Considerations for quarantine of contacts of COVID-19 cases: Interim Guidance](#)
- [Recommendations for national SARS-CoV-2 testing strategies and diagnostic capacities](#)

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