

Highlights

- Five new COVID-19 cases, no new recoveries, and no new deaths have been recorded in the past 24 hours
- Cumulatively, the total number of COVID-19 cases in Malawi is 284, including 4 deaths, and 42 recoveries
- Chilumba MEIRU laboratory has been set up to be testing COVID-19 bringing the total number of laboratories with the capacity to test COVID-19 to fourteen
- 4590 COVID-19 tests have been conducted to date
- 704 people have entered the country in the past 24 hours, this includes 144 deportees and 47 returning residents who arrived through Kamuzu International Airport and 270 returning residents who arrived through Mwanza border

Background

On 31 December 2019, the World Health Organization (WHO) was alerted of several cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province of China. Later the disease was named Coronavirus disease-19 (COVID-19) and the virus was named Sars-Cov2. World Health Organization declared the COVID-19 outbreak a pandemic on 12th March 2020.

On 20 March 2020, COVID-19 was declared a national disaster in Malawi, and on 2 April 2020, Malawi registered the first cases of COVID-19. On 6 May 2020, a Presidential Taskforce on COVID-19 was appointed.

Global situation

As of 30 May 2020, 5 817 385 (116 048 new) COVID-19 cases have been reported globally, including 362 705 (5 017 new) deaths. Out of these cases, 96 902 (3 973 new) cases and 2 482 (55 new) deaths are in Africa. **Table 1** below shows the number of reported cases and deaths in the countries that share boundaries with Malawi.

Table 1: Number of cases and deaths of COVID-19 in countries that share a boundary with Malawi

Country	Cumulative cases	New cases	Cumulative deaths	New deaths	Days since last reported case
Mozambique	234	1	2	1	0
Zambia	1057	0	7	0	2
Tanzania	509	0	21	0	21



Local situation

In the past 24 hours, Malawi has registered five new COVID-19 cases, no new recoveries, and no new deaths. The new cases were identified among 47 Malawian residents who were screened at Kamuzu International Airport as they were returning from Europe.

Cumulatively, Malawi has recorded 284 cases including 4 deaths. **Figure 1** is a map of Malawi showing the number of cases in each affected district. Of the 284 cases, 231 are imported infections and 48 are locally transmitted while 5 are still under investigation. Forty-two of the total cases have now recovered bringing the total number of active cases to 238. The average age of the cases is 33 years, the youngest case is aged 1 year, the oldest is 75 years and 67% are male. **Table 3**, and **Figures 2, 3**, and **4** show detailed distributions of the cases.

Currently, Malawi has officially closed all borders except three borders to allow transit of essential goods and services. In the past 24 hours, 181 people have entered Malawi. Active tracing and monitoring of contacts of confirmed COVID-19 are ongoing, currently, a total of 694 contacts of COVID-19 cases have been traced out of which 463 have been tested. **Table 2** below provides a summary statistics of surveillance activities.

Recently, Malawi has been getting returning residents and deportees from other countries, mainly South Africa. Upon entry, they are tested for COVID-19, if positive they put under institutional isolation until safe transfer to their destination district has been arranged. The negatives are allowed to proceed to their destination for self-quarantine and follow up by respective district health authorities.



Figure 1: Map of Malawi showing the affected districts

Table 2: Summary statistics for COVID-19 outbreak in Malawi as of 30 May 2020

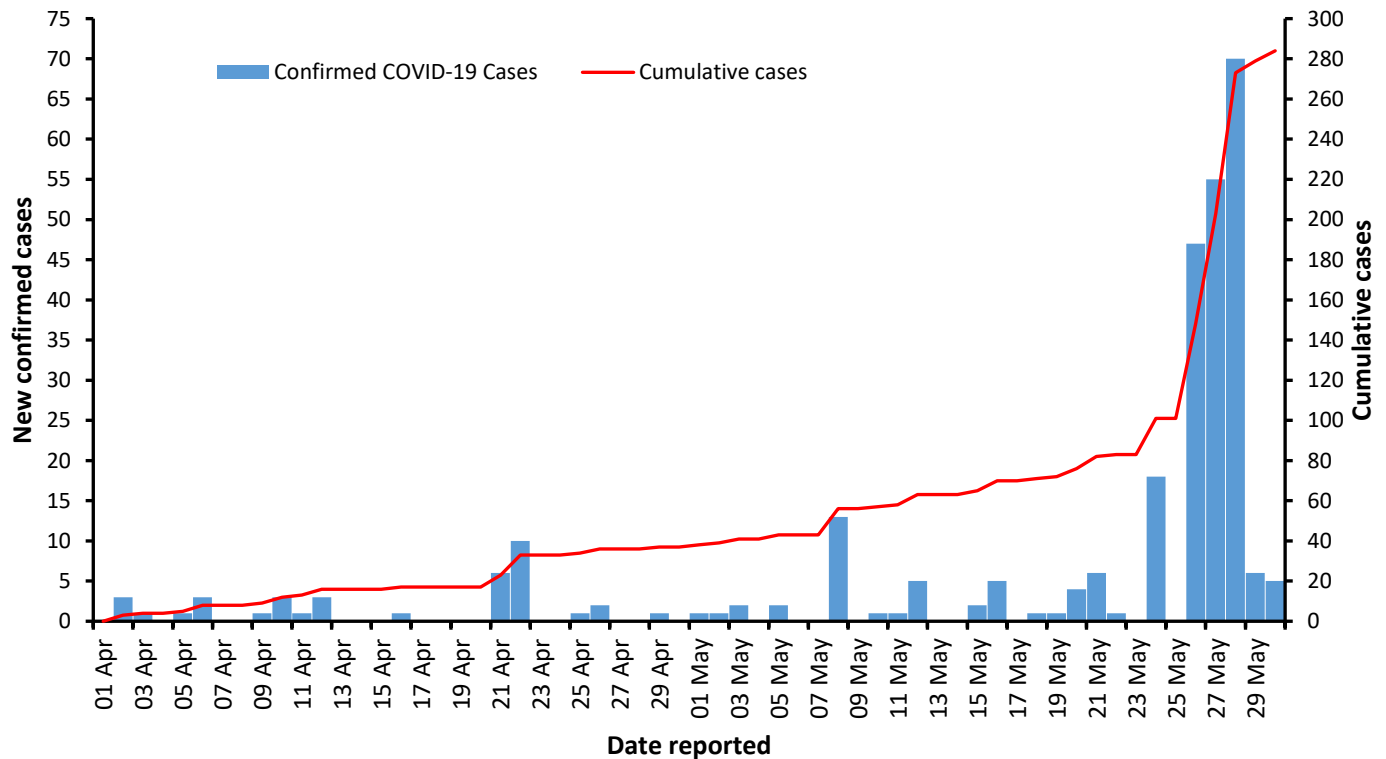
Parameter	Statistic
Cumulative confirmed cases	284
Number of active cases	238
Number of cases with a positive result in the past 24 hours	5
Cumulative deaths	4
Cumulative recoveries	42
Suspected cases	5049
Cumulative specimen received by the lab	5049
Cumulative specimen tested	4590
Specimen received by the lab in the past 24 hours	499
Cumulative contacts listed and follow up(primary and secondary)	694
Contacts tested to date	463
PoEs* entries in the last 24 hours.	704
High-risk travellers on follow up at district level**	3161
Cumulative travellers completed 14 days follow up at district level	1901

* Point of entry **The number of high-risk travellers on follow up as district level is under-reported (few districts reported)


Table 3: Summary of COVID-19 cases reported countrywide as of 30 May 2020

Reporting District	Confirmed Cases		Deaths		Recoveries		Transmission Classification*			Days since last reported case
	New	Cumulative	New	Cumulative	New	Cumulative	Imported	Local	Under investigation	
Lilongwe	0	35	0	3	0	21	11	24	0	2
Blantyre	0	28	0	1	0	17	11	13	4	1
Thyolo	0	10	0	0	0	1	1	9	0	12
Mzuzu	0	5	0	0	0	0	3	2	0	1
Nkhata Bay	0	5	0	0	0	0	5	0	0	12
Zomba	0	2	0	0	0	1	1	0	1	12
Chikwawa	0	1	0	0	0	1	1	0	0	43
Nkhotakota	0	1	0	0	0	1	1	0	0	42
Karonga	0	2	0	0	0	0	2	0	0	5
Mangochi	0	1	0	0	0	0	1	0	0	17
Mulanje	0	1	0	0	0	0	1	0	0	15
Ntcheu	0	1	0	0	0	0	1	0	0	10
Phalombe	0	1	0	0	0	0	1	0	0	3
Nsanje	0	2	0	0	0	0	2	0	0	1
Mwanza PoE	0	182	0	0	0	0	182	0	0	0
KIA PoE	5	7	0	0	0	0	7	0	0	
Total	5	284	0	4	0	42	231	48	5	

*Imported means that infection has been acquired from outside the country; Local transmission means that the source of infection is within the country; Under investigation means that the source of infection has not been determined; PoE, Point of Entry; KIA, Kamuzu International Airport


Figure 2: New and cumulative confirmed COVID-19 cases in Malawi by date reported as of 30 May 2020

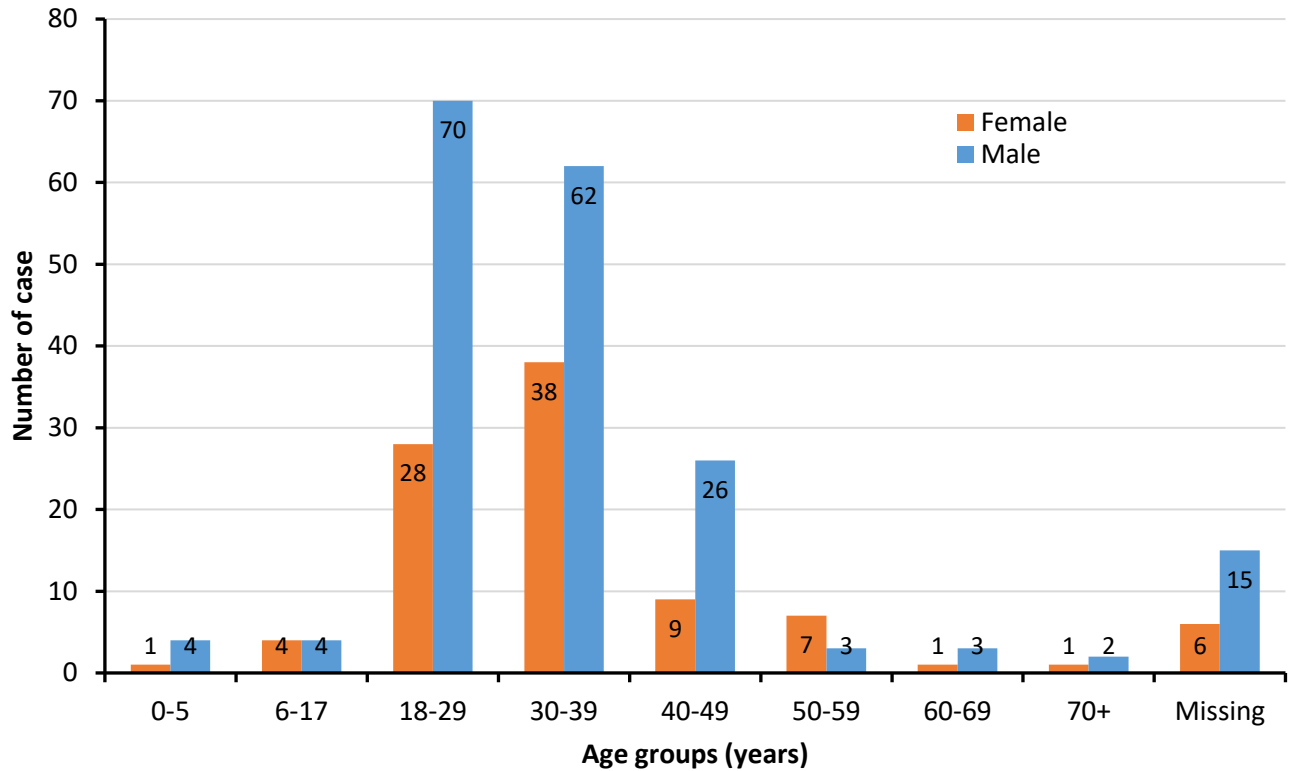


Figure 3: Age and sex distribution of COVID-19 cases in Malawi as of 27 May 2020

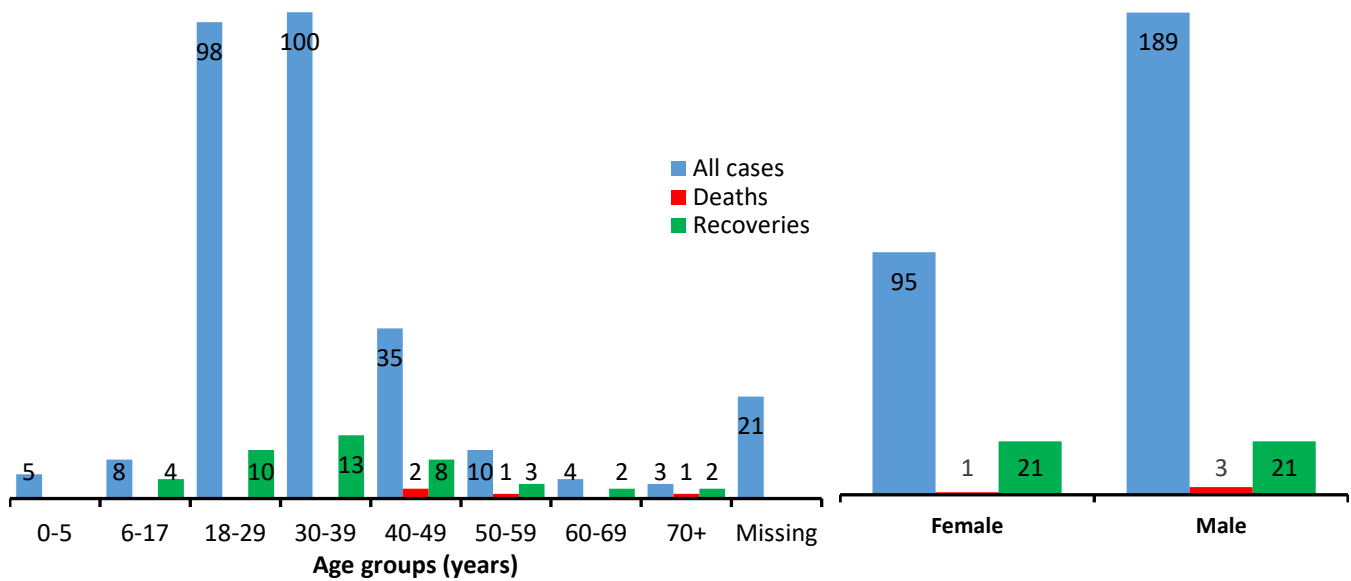


Figure 4: Distribution of COVID-19 cases, deaths and recoveries in Malawi as of 30 May 2020

Summary of Prevention and Response Activities

Laboratory testing

Fourteen laboratories in the country have the capacity to confirm COVID-19. The laboratories are Kamuzu Central Hospital laboratory (KCH), Partners in Hope (PIH) National Health Reference laboratory (NHRL), College of Medicine (COM) laboratory, Malawi Liverpool Wellcome Trust (MLW), Mzuzu Central Hospital laboratory, Mzimba south district hospital laboratory, Balaka Dream laboratory, Zomba Central Hospital laboratory, Thyolo district hospital laboratory, Nsanje district hospital laboratory, Queen Elizabeth Central Hospital laboratory, Blantyre Dream laboratory and Chilumba MEIRU laboratory. As of 30 May 2020, a total of 4590 samples have been tested, with 284 positive results, 427 pending results and 48 to be re-tested. **Table 4** below shows the breakdown of tests done by each laboratory.

Table 4: Laboratory testing for COVID-19 for Malawi as of 30 May 2020

Name of Laboratory	Cumulative samples	In the past 24hrs		Total		Result		
		Samples received	Samples tested	Tested	Pending	Indeterminate	Positive	Negative
NHRL	945	94	94	945	0	0	42	903
COM	1348	90	0	1232	92	24	46	1162
MLW	541	0	0	536	5	14	31	491
Mzuzu	232	15	0	217	15	1	12	204
Mzimba	383	6	6	382	1	1	0	381
Zomba	172	0	0	172	0	0	12	160
Balaka	96	9	0	87	9	0	0	87
Thyolo	100	0	0	94	2	4	3	87
Nsanje	22	7	0	14	7	1	2	11
QECH	595	86	0	489	104	2	73	414
Dream BT	435	90	0	345	90	0	63	282
KCH	101	51	0	49	51	1	0	48
PIH	79	51	0	28	51	0	0	28
Chilumba	0	0	0	0	0	0	0	0
Total	5049	499	100	4590	427	48	284	4258

Clinical case management

- 176 of the cases identified from Mwanza point of entry are being traced
- 6 cases from Mwanza point of entry, 2 cases from the deportees, and 2 other cases are under institutional isolation
- 47 active cases are being managed as outpatients and are under self-isolation
- Cumulatively 42 cases have now recovered and 4 have died

Enforcement and security

- Police and MDF deployed to provide border security patrols
- Road traffic police enforcing new seating capacity for public transportation
- Control of crowds in public and private service outlets (e.g. banks)
- Joint patrols on Lake Malawi (MDF and Immigration)
- Roadblocks mounted in strategic points across the country

Point of entry

- Monitoring personnel transporting essential goods and services
- All borders closed except 3 for essential personnel travel (e.g. petroleum services and other goods).



- Extra laboratory staff deployed to Mwanza to support sample collection for citizens repatriated from other countries

Logistics

- Deliveries to districts of supplies from UNICEF is done
- Deliveries to districts of supplies from Chinese donation in progress – besides the districts, this also accommodates Army, Prison, and Police

Risk communication and community engagement

- The national team deployed to northern region to strengthen district teams in community engagement and management of cases
- Continued airing of COVID-19 public service announcements on community and national radio stations.
- Daily updates through **ZODIAK radio**
- Set up interactive COVID-19 messages on **Airtel *929#**
- Production and printing of fact sheets, posters, leaflets, and roll-up banners.
- Push messages on Airtel and TNM in both English and Chichewa.
- Community awareness meetings in progress
- Develop messaging for public service announcements to suit the current measures on lockdown.
- Mobile van units for the distribution of information, education and communication materials in Lilongwe, Blantyre, and Mangochi

Coordination

In order to facilitate coordination and maintain focused efforts towards combating COVID-19 we hold routine and ad-hoc meetings:

- Presidential Task Force on COVID-9 was established and they meet regularly
- Weekly health cluster meetings
- Weekly meetings of technical committees for the various response pillars
- Daily surveillance technical committee meetings
- Daily emergency operation center meetings
- Implementation of the national response plan
- The orientation of district public health emergency management committees in all districts

Case definitions

1. Suspect Case

- A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g. cough, shortness of breath), AND a history of travel to or residence in a location reporting community transmission of COVID-19 disease during the 14 days prior to symptom onset.
- A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case in the last 14 days prior to symptom onset;

OR

- A patient with severe acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g. cough and shortness of breath) AND in the absence of an alternative diagnosis that fully explains the clinical presentation

2. Probable case

- A suspect case for whom testing for COVID-19 is inconclusive. Inconclusive being the result of the test reported by the laboratory



OR

- b. A suspect case for whom testing could not be performed for any reason.

3. Confirmed case

- a. A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs, and symptoms.

4. Definition of contact

- a. A primary contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case:
- i. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;
 - ii. Direct physical contact with a probable or confirmed case;
 - iii. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment

Note: for confirmed asymptomatic cases, the period of contact is measured as the 2 days before through the 14 days after the date on which the sample was taken which led to confirmation.

- b. A secondary contact is a person who was in contact with the primary contact or any contact which does not meet the definition of the primary contact.

5. COVID-19 death

COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery between illness and death.

Classification of transmission patterns

No cases: Countries/territories/areas with no confirmed cases

Sporadic cases: Countries/territories/areas with one or more cases, imported or locally detected

Clusters of cases: Countries/territories/areas experiencing cases, clustered in time, geographic location and/or by common exposures

Community transmission: Countries/area/territories experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:

1. Large numbers of cases not linkable to transmission chains
2. Large numbers of cases from sentinel lab surveillance
3. Multiple unrelated clusters in several areas of the country/territory/area

Conclusion

The Ministry of Health and partners continue in its efforts to ensure the citizens are protected from the Coronavirus outbreak and that the country is able to detect and respond to any cases that may arise.

- Daily update dashboards can be accessed from <http://covid19.health.gov.mw/>
- Toll-free call line with Chipatala Cha Pa Foni (number: **54747**).

Prepared by: Epidemiology Unit, Public Health Institute of Malawi (PHIM), available on
<https://malawipublichealth.org/index.php/resources/covid-19-daily-updates/detail>