

The COVID-19 response in Spain

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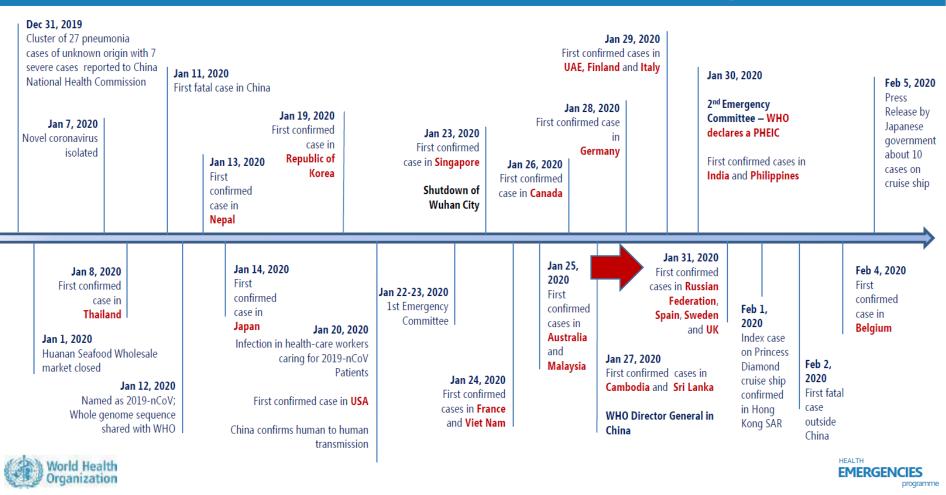
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Global Virtual Conference
Part I: Comparative Public Health
Interventions Against COVID-19.

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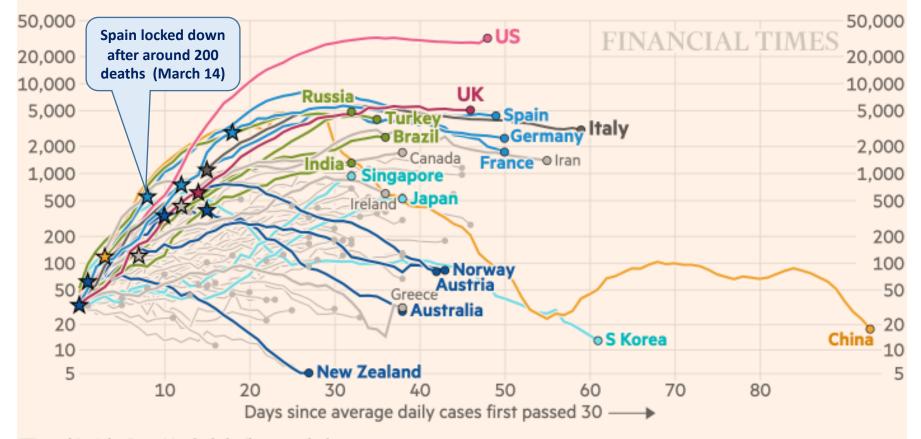
Evolution of the 2019-nCoV outbreak (31 December 2019 – 10 February 2020)





Several countries have turned the corner, with numbers of new cases now in decline

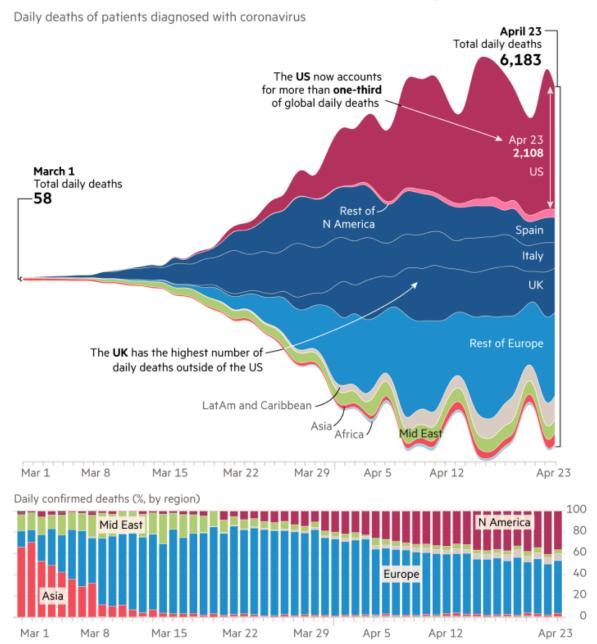
Daily confirmed cases (7-day rolling avg.), by number of days since 30 daily cases first recorded Stars represent national lockdowns

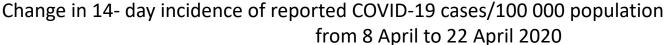


FT graphic: John Burn-Murdoch / @jburnmurdoch Source: FT analysis of European Centre for Disease Prevention and Control; FT research. Data updated April 23, 23:26 BST © FT

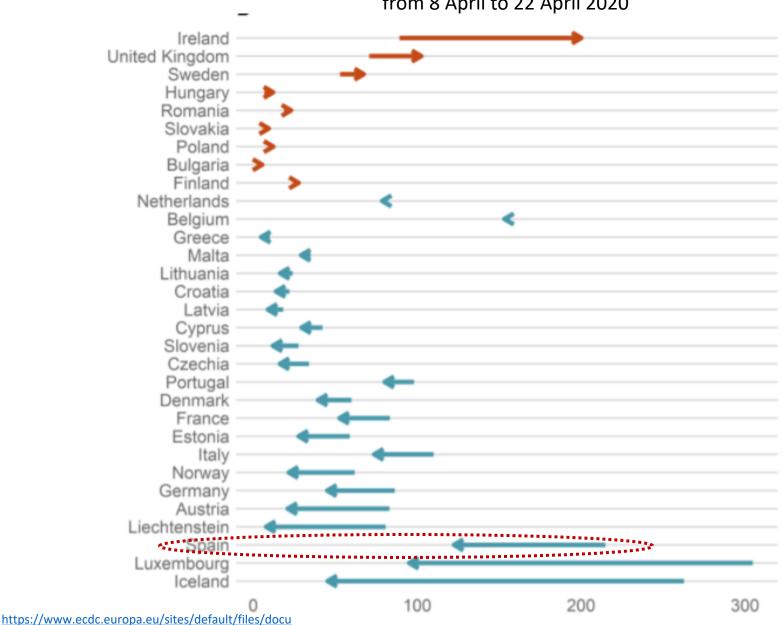
Focus of Covid-19 deaths has switched from Asia to Europe – and now the US







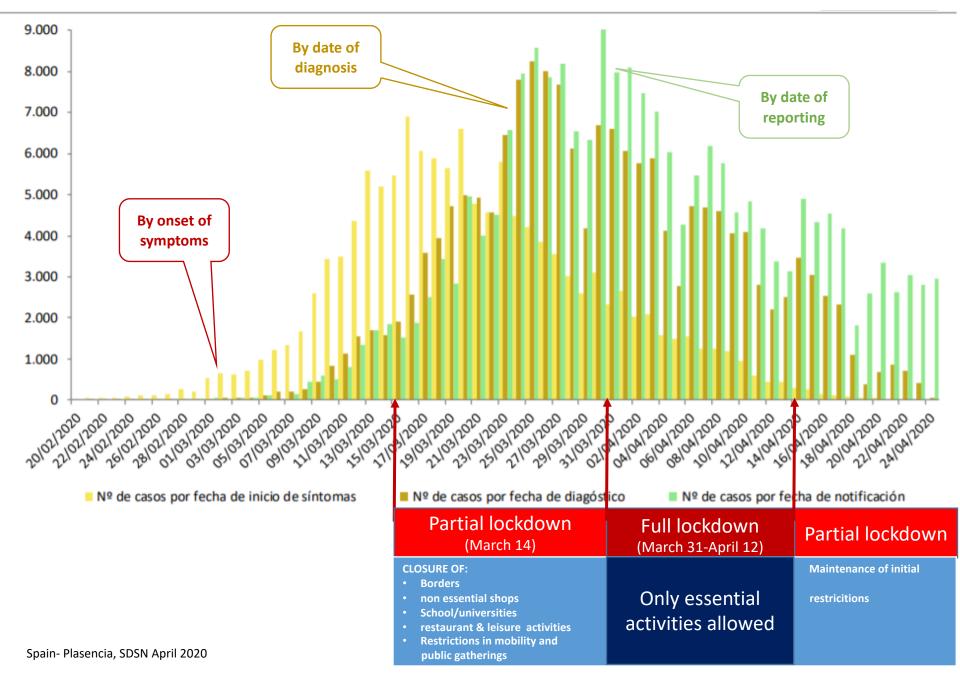




ments/covid-19-rapid-risk-assessment-coronavirus-

Epidemic curve (daily cases) and Public Health interventions





Some salient features



- Heavily and early on impacted European country (*):
 - highest cumulative number of cases: 223,759
 - highest cumulative incidence of cases: 4,786 /1M p.
 - 2nd highest cumulative number of deaths: 22,902
 - 2nd highest death rate: 490/1M p.
 - CFR: 8% of all reported cases
- High early (asymptomatic) transmission (mid-February)
- Marked exponential growth in March (3 weeks)
- Peak of (reported) cases at the end of March
- Current overall decreasing trend in new cases
- Now more discharged cases than new cases
- Significant **geographical variation** in incidence
- Infection rates ? (estimated): **15%** [3.7%-41%]





Some salient features (cont.)

- Acute care (enhanced) facilities closed to saturation (end of March-early April)
- Progressive increase in PCR testing efforts: 19,896 tests/ 1M p.
- High percentage of health professionals (20%) among confirmed cases
- Lockdown after 6 weeks of initial case (imported): positive impact on mobility and transmission
- Stepwise transition plan to be implemented in the coming weeks

Transition plan: from preventing deaths to preventing infections

Areas of intervention (4+1):

- Public Health
- Economic
- Social
- International
- Crosscutting: Integrated Dashboard + Communication

Public Health: strenghtening key capacities

- acute & critical care
- early warning epidemiologic intelligence
- case detection & isolation
- contact tracing & quarantine
- collective protection

De-escalation of lockdown

- Need to fulfill epidemiological & capacity criteria
- Gradual, asymetric and coordinated (based on risk appraisal)
- Resuming some degree of physical activity (early May)
- Other interventions (may vary –end of May?)



Some challenges:

Governance:

- Transition plan based on stratified risk assessment and asymetric implementation
- Decentralized management model with centralized coordination (dashboard)
- Synergy and cooperation with EU bodies and European countries

Technical:

- improve health information systems (completeness and timeliness)
- scale up epidemiological and public health capabilities (human resources and digital tools –contact tracing)
- ensure adequate testing capabilities (RDT to be well evaluated)
- maintain ICU and acute care facilities
- closely monitor infection and immunity in the community and high-risk populations

Science:

Strengthen independent advisory model and interaction with political and technical level

Communication:

Proactive and diversified (not only political)





Thank you.



