





# Weekly Summary of Vermont COVID-19 Data

Reflecting cases identified between March 5 – May 7, 2020

Date published: May 11, 2020. This summary will be updated every Friday.



#### **Common Terms and Data Sources**

You will find data presented in a few different ways throughout this document:

- Count: the number of people who have tested positive for COVID-19 (overall or in a particular group)
- Rate: the number of people who have tested positive for COVID-19 in a particular group, divided by the total number of people in that group. Using rates allows for more direct comparisons between groups.
- Growth rate: a measure of the percent change in COVID-19 cases over time; this tells us how quickly or slowly the disease is spreading in Vermont

For geographic information, please see the <u>COVID-19 Data Dashboard</u> or <u>Town Map</u>. For more information on data sources, please see our Data Notes document.

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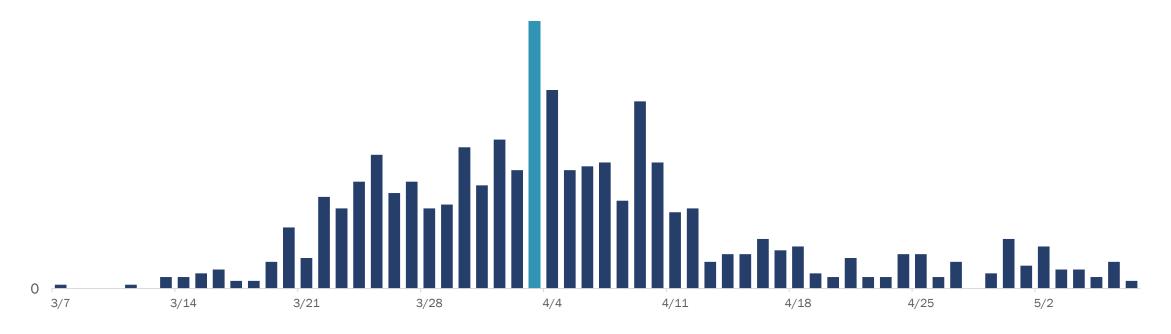
### **COVID-19 in Vermont**

An overview of our number of cases and laboratory testing to date.

#### **Total Number of Cases in Vermont: 918**

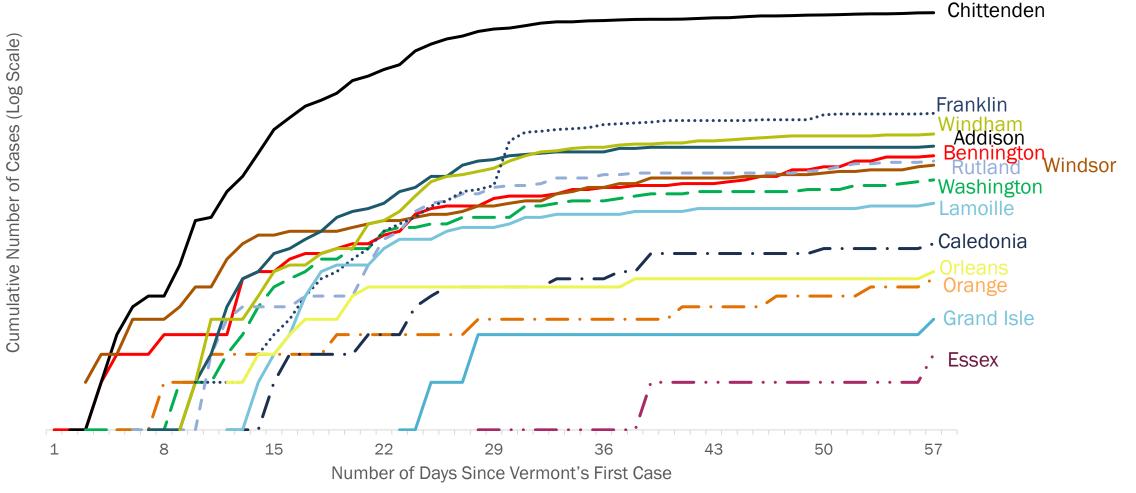
80

The daily number of COVID-19 cases in Vermont peaked on April 3.

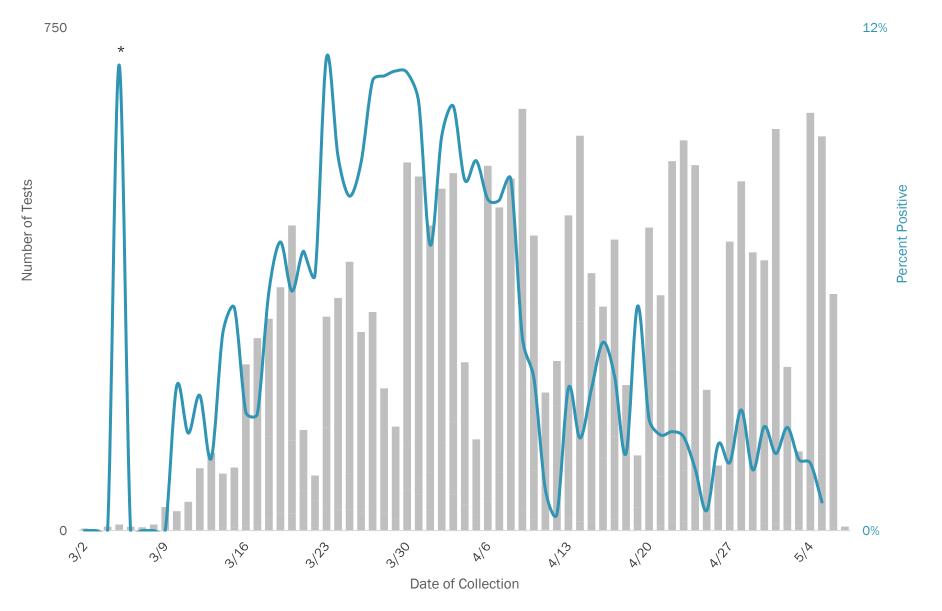


#### Most counties have reached a plateau in the number of new cases.

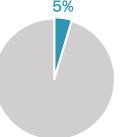
Growth over time by county (n=915)



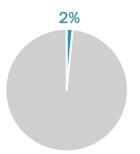
#### **Percent of positive COVID-19 tests may indicate how prevalent the disease is in the population.**



# Percent Positive to Date 5%



#### **Percent Positive This Week**



**2,934**People Tested this Week

**21,162**People Tested to Date

<sup>\*</sup>Not a stable estimate due to small numbers. There were 9 total tests and 1 was positive.

# **Case Demographics**

Who has been impacted by COVID-19 in Vermont?

#### Rates of COVID-19 are disproportionately high among Vermonters 80 years and older.

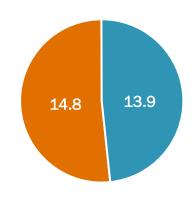
# Rate per 10,000 Vermonters 18.6 17.1 20.0 16.5

40-49

50-59

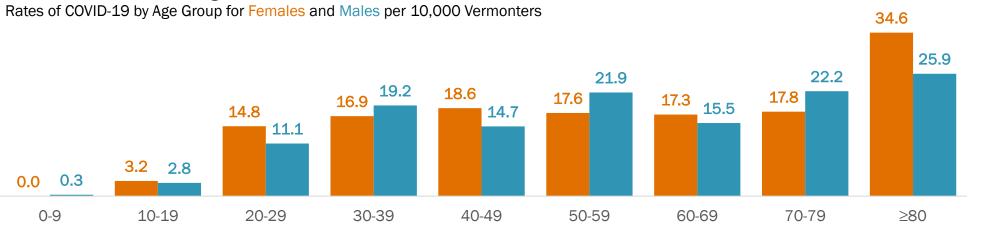
#### Females and males have similar rates of COVID-19.

Rate per 10,000 Vermonters



#### There are differences in age and sex of Vermonters with COVID-19.

30-39



60-69

70-79

≥80

3.0

10-19

20-29

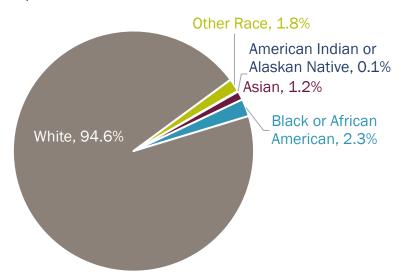
0.2

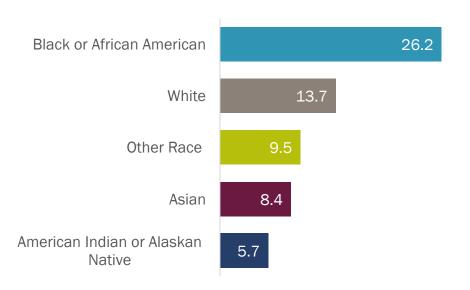
0-9

# Case Demographics

#### White Vermonters represent the majority of COVID-19 cases. African American Vermonters have the highest rate.

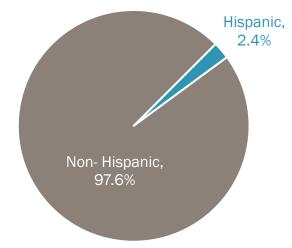
Rate per 10,000 Vermonters

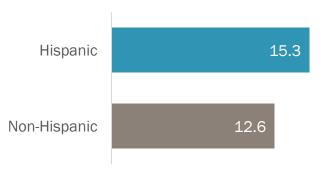




#### Non-Hispanic Vermonters represent the majority of COVID-19 cases. Hispanic Vermonters have the higher rate.

Rate per 10,000 Vermonters

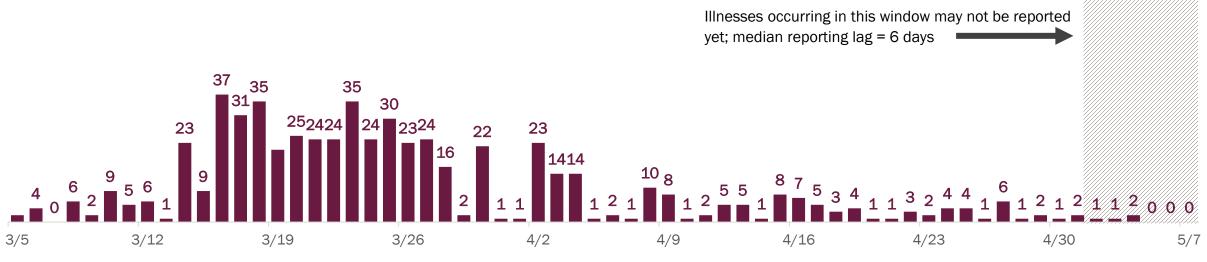




### **Clinical Course**

What symptoms have Vermonters experienced? How many have been hospitalized? How many have died?





Note: Date of symptom onset is not always known.

**15 days**Average illness duration

Sign or Symptom	Percent of Symptomatic Cases
Cough	75%
Fatigue	70%
Fever	55%
Headache	55%
Muscle Pain	53%

#### **Most Vermonters with COVID-19 are not hospitalized.**

Unknown = 121

Hospitalized = 119

Not hospitalized = 678

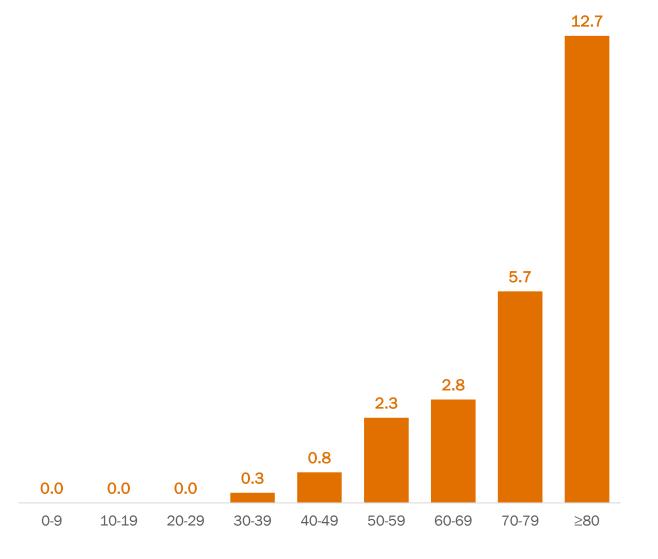
**17%**Of those hospitalized who were on a ventilator

**37%**Of those hospitalized who were in the ICU

**8 days**Average hospital stay
(range: 0-18 days)

#### Vermonters 80 years and older are more likely to be hospitalized for COVID-19.

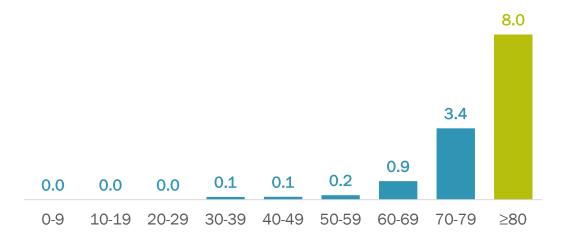
Rate per 10,000 Vermonters



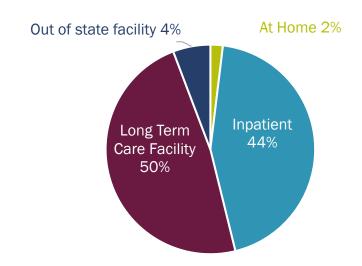
# Clinical Course

# Vermonters 80 years and older have higher rates of COVID-19 death than other age groups.

Rate per 10,000 Vermonters

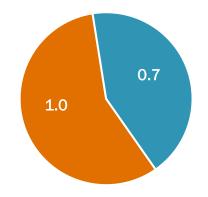


## Most COVID-19 deaths occurred in an inpatient hospital setting or a long-term care facility.



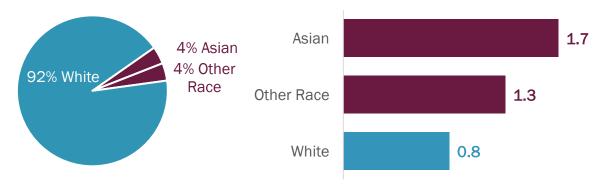
#### **Males** have higher rates of COVID-19 death than females.

Rate per 10,000 Vermonters



# White Vermonters represent a majority of COVID-19 deaths. However the rate is higher among racial minorities.

Rate per 10,000 Vermonters



Note: No deaths have identified as Hispanic or Latino.

## **Outbreaks**

How is COVID-19 impacting group settings?

### What is an outbreak?

- 1. For congregate care facilities (long term care facility or skilled nursing facility):
  - A single resident with a positive COVID-19 laboratory test and one or more additional residents with respiratory illness
     OR
  - Two or more residents with at least two of the following symptoms: fever (temp  $\geq 100 \,^{\circ}$  F), cough, difficulty breathing/shortness of breath
- 2. For other settings (residential communities, businesses):
  - Two or more epidemiologically-linked confirmed COVID-19 cases where there's an opportunity to stop transmission





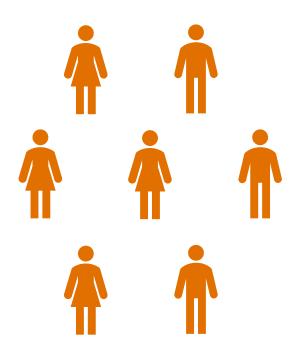
26% of COVID-19 cases are associated with an outbreak





**154** cases among residents

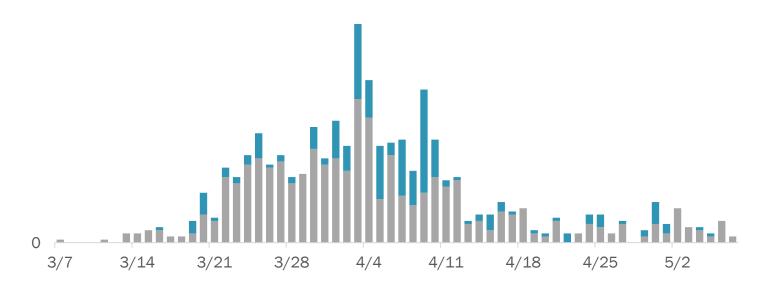
**79** cases among staff



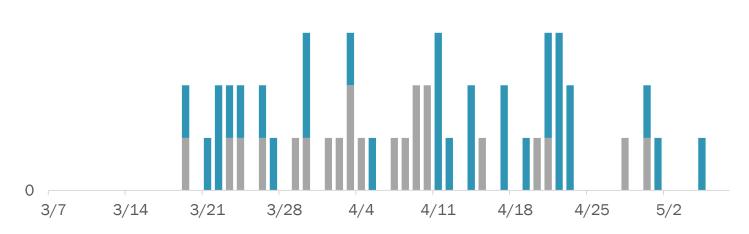
Outbreaks
5 Active
2 Resolved

90

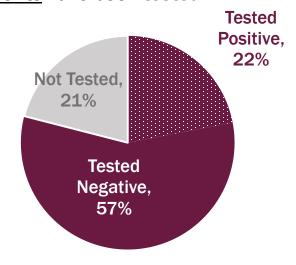
4



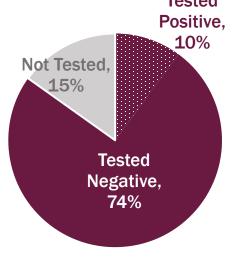
#### **Vermont COVID-19 Deaths Associated with an Outbreak Over Time**



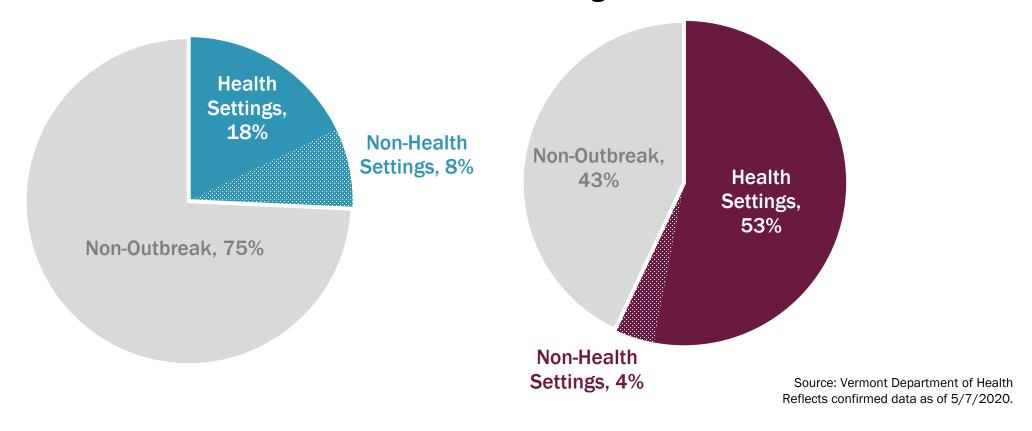
In facilities with an outbreak, 79% of <u>residents</u> have been tested.



In facilities with an outbreak, 85% of <u>staff</u> have been <u>tested</u>. <sub>Tested</sub>



# While only 26% of all COVID-19 cases are associated with outbreaks, more than half of COVID-19-related deaths occur in outbreak settings.



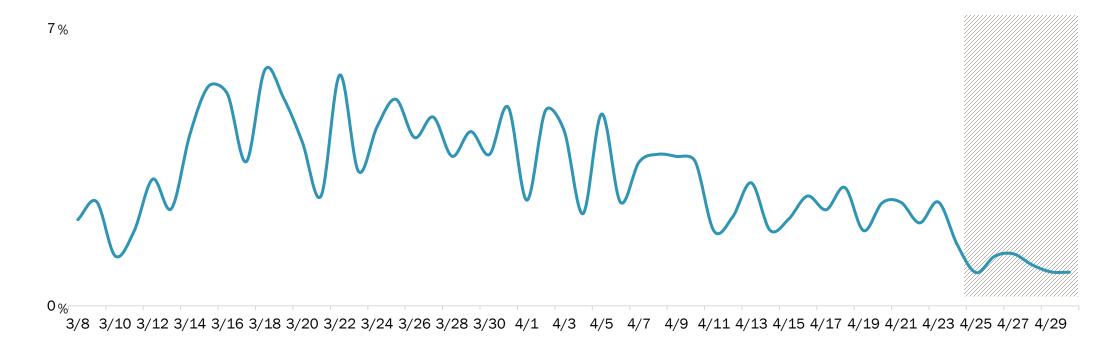
Note: Examples of a health setting include long-term care or assisted living facilities, therapeutic treatment centers, and behavioral health institutions. Examples of a non-health setting include correctional facilities, senior housing communities, businesses, and homeless shelters. Vermont has not experienced an outbreak in all health and non-health settings.

# **Syndromic Surveillance**

What we can learn from emergency room and urgent care centers?

#### The percent of emergent care visits for COVID-19-like illness is decreasing.

Syndromic surveillance from 13 of 14 Vermont hospitals and 2 urgent care centers. Monitoring this data acts as an early indicator of potential spikes of COVID-19 in the community.



Interpret with caution, there is a chance for over or underestimation given the lag in reporting.

COVID-19-like illness diagnosis is determined using the patient's chief complaint and/or discharge diagnosis.

COVID-19-like illness is the presence of a fever with the addition of shortness of breath, difficulty breathing, or cough.

COVID-19-like illness excludes patients with an influenza discharge diagnosis.

# **Weekly Spotlight: Pre-existing Conditions**

The Health Department has information about pre-existing conditions in 77% (706) of 918 total COVID-19 cases. This section focuses on those 706 cases.

# Approximately 62% of people\* with COVID-19 have a pre-existing condition.

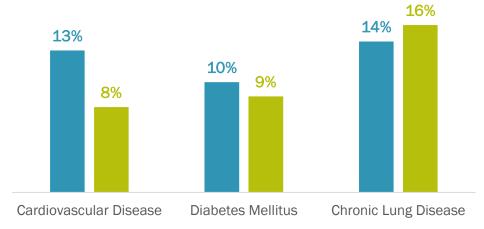
\*of the 706 people that the Health Department has pre-existing condition data.

Condition	Count	Percentage
Heart Disease	94	13%
Chronic Lung Disease (includes asthma and COPD)	73	14%
Chronic Liver Disease	7	1%
Chronic Kidney Disease	17	2%
Current/Former Smoker	185	26%
Diabetes	73	10%
Immunocompromised Condition	38	5%
Neurologic Condition/Intellectual Disability	17	2%
Other Chronic Condition**	224	32%
Pregnant	6	1%

33% of people with a preexisting condition have two or more conditions.

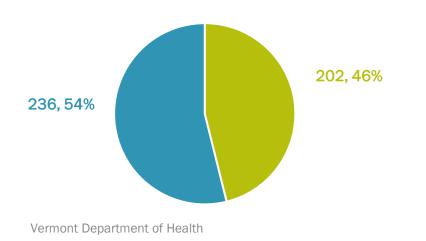
<sup>\*\*</sup>Not mutually exclusive, includes things like arthritis, thyroid conditions, multiple free text entries.

## Prevalence of certain conditions in COVID-19 patients and Vermont adults.

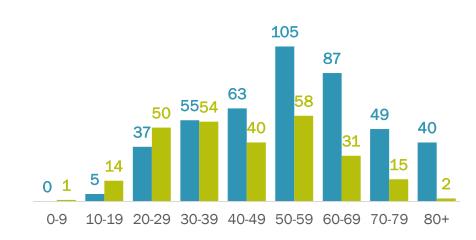


Data Source: Cardiovascular disease and diabetes, BRFSS 2018 annual report. Chronic lung disease, 3-4-50 Community profile (2016-2017 BRFSS).

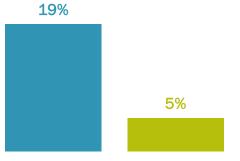
# Prevalence of pre-existing conditions is approximately equal between female and male COVID-19 patients.



**COVID-19** patients with pre-existing conditions tend to be older than those without pre-existing conditions.



A higher percentage of COVID-19 patients with pre-existing conditions have been hospitalized than those without pre-existing conditions.





#### **Learn more about COVID-19 in Vermont:**

**Web:** www.healthvermont.gov/COVID-19

**Email:** AHS.VDHPublicCommunication@vermont.gov