

Health information in the context of COVID-19

Italy



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Addressing data and health information needs in the context of COVID-19 in Italy

No known local COVID-19 circulation

Undetected local COVID-19 circulation

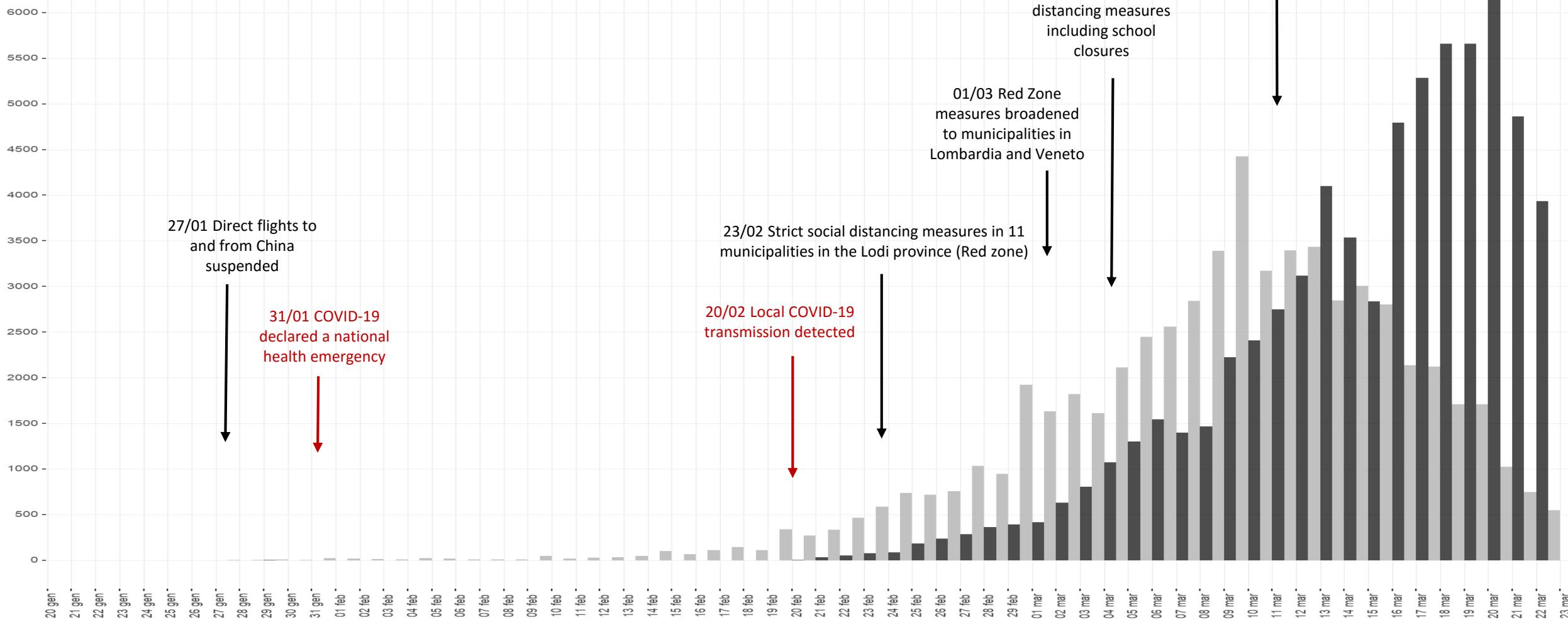
Known local COVID-19 circulation

**22/01 Surveillance of COVID-19 among severe cases of acute respiratory infection with epidemiological links
Laboratory network with confirmation capacity set up**

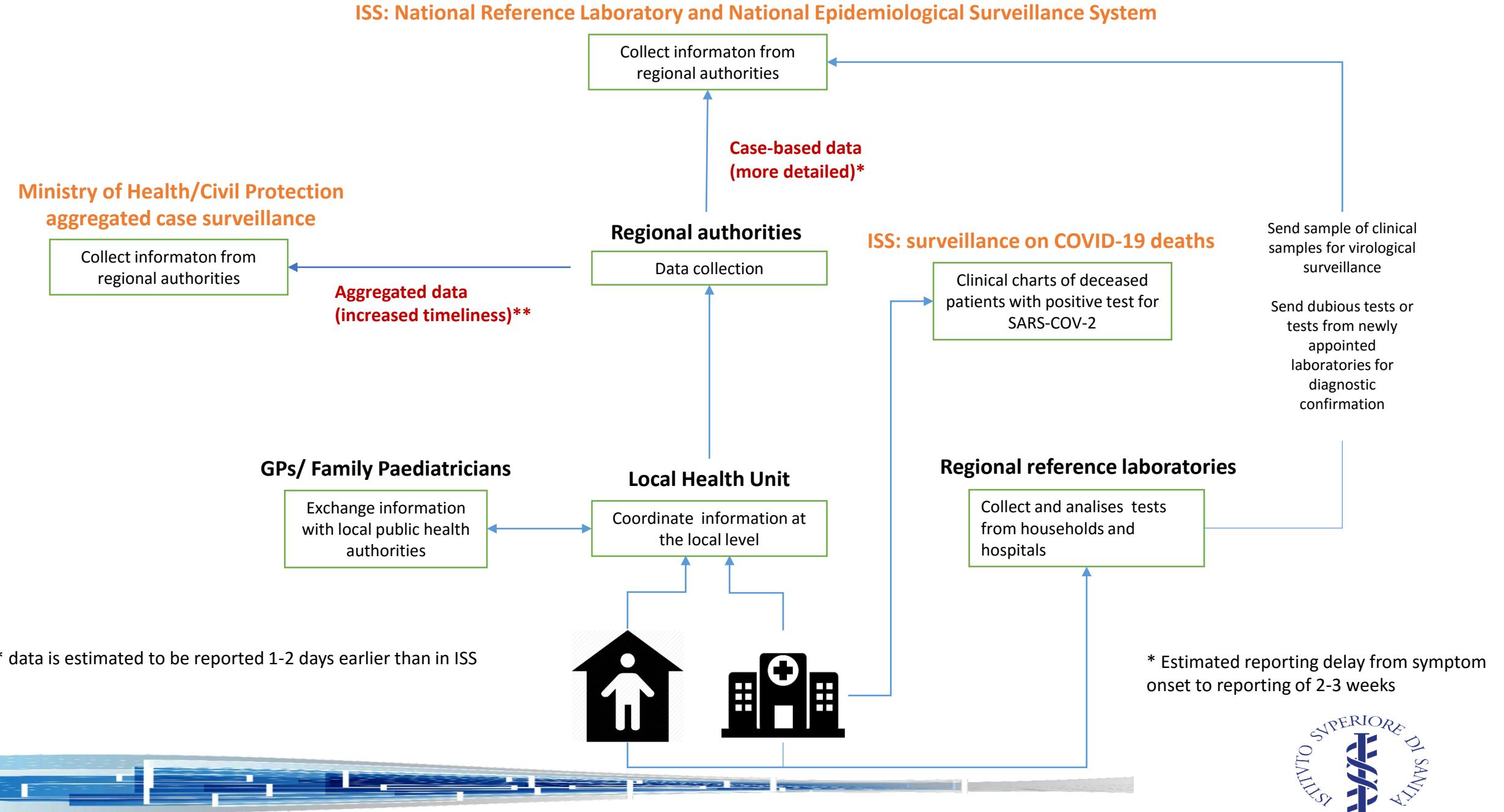
27/02 Shift to case based enhanced surveillance of all SARS-CoV-2 laboratory confirmed cases

11/03 first Lock down

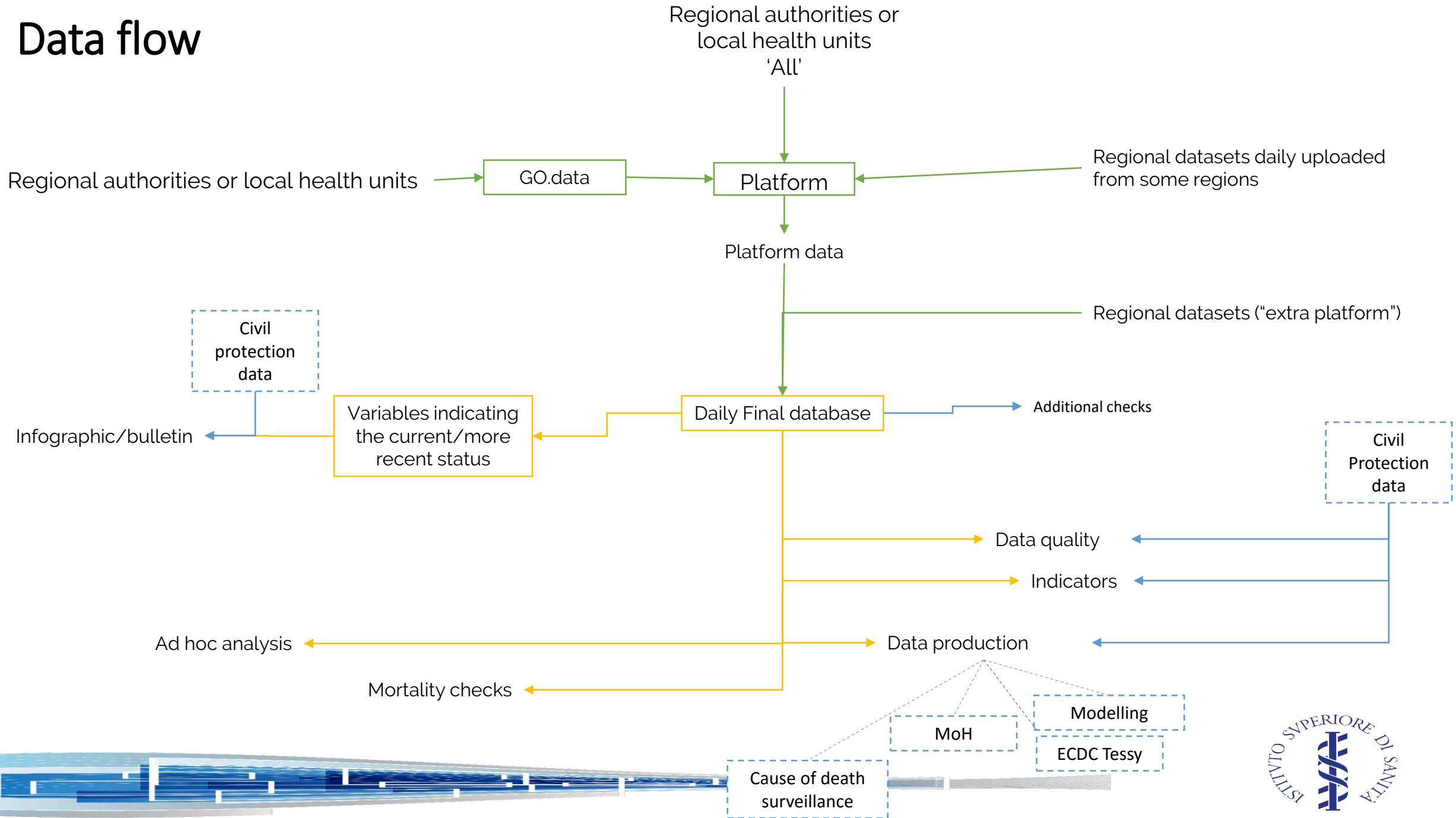
**Progressive Lock down
tightening**



1. Surveillance



Data flow



Outputs

2020



Characteristics of SARS-CoV-2 patients dying in Italy Report based on available data on May 14th, 2020

1. Sample

The present report describes characteristics of 29,692 SARS-CoV-2 patients dying in Italy.* Geographic distribution across the 19 regions and 2 autonomous provinces of Trento and Bolzano is presented in the table below. Data are update to May 14th, 2020.

Tabel 1. Geographic distribution of deceased patients SARS-CoV-2 positive

REGION	N	%
Lombardia	15,185	51.1
Emilia Romagna	3,905	13.2
Piemonte	2,196	7.4
Veneto	1,746	5.9
Liguria	1,277	4.3
Toscana	928	3.1
Marche	905	3.0
Lazio	572	1.9
Puglia	461	1.6
Trento	449	1.5
Campania	366	1.2
Friuli Venezia Giulia	346	1.2
Abruzzo	323	1.1
Bolzano	291	1.0
Sicilia	266	0.9
Valle d'Aosta	143	0.5
Sardegna	127	0.4
Calabria	84	0.3
Umbria	74	0.2
Basilicata	26	0.1
Molise	22	0.1
Total	29,692	100.0

* SARS-CoV-2 related deaths presented in this report are those occurring in patients who test positive for SARS-CoV-2 RT by PCR, independently from pre-existing diseases.

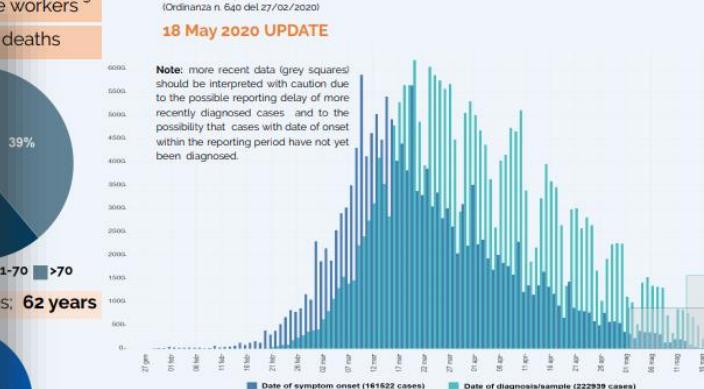
225.549 cases of COVID-19*

Integrated surveillance of COVID-19 in Italy

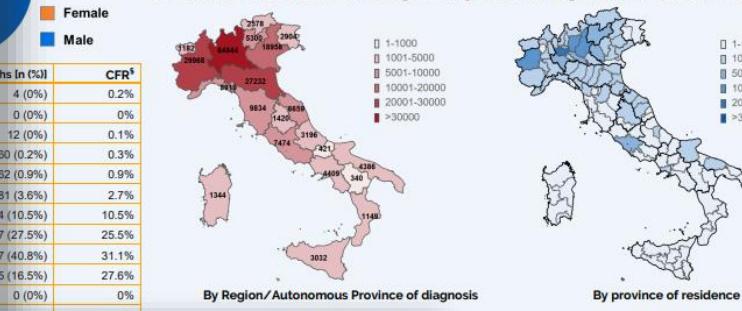
Ordinanza n. 640 del 27/02/2020

18 May 2020 UPDATE

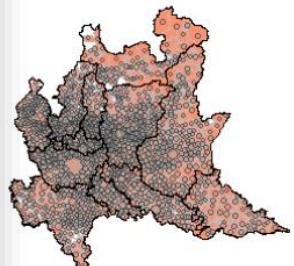
Note: more recent data (grey squares) should be interpreted with caution due to the possible reporting delay of more recently diagnosed cases and to the possibility that cases with date of onset within the reporting period have not yet been diagnosed.



Total number of COVID-19 cases diagnosed by the Italian Regional Reference Laboratories



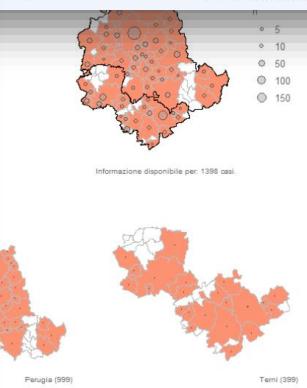
Lombardia



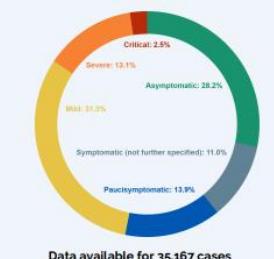
Informazione disponibile per: 81550 casi.

Information available for the

Produced by: The COVID-19 Task force of the Department of Infectious Diseases and the IT Service Istituto Superiore di Sanità



99% of the clinical samples processed were confirmed by the National Reference Laboratory at the Istituto Superiore di Sanità



Data available for 35,167 cases

lema COVID-19

ramento nazionale
gio 2020 – ore 16:00

BBILICAZIONE: 15 MAGGIO 2020

all'Istituto Superiore di Sanità (ISS), Roma

Lavia Riccardo, Xanthi Andrianou, Antonino Bella, Martina Del Manno, Alberto Mateo Urdiales, Abiani, Stefania Bellino, Stefano Boros, Fortunato (Paolo) D'Ancona, Maria Cristina Rota, Filia, Ornella Punzo, Andrea Siddi, Maria Fenicia Vescio, Corrado Di Benedetto, Marco Tallon, Ciervo, Maria Rita Castrucci, Patrizio Pezzotti, Paola Stefanelli, Giovanni Rezza, per ISS, Pizzetta, Valentina Marziano, Piero Poletti, Filippo Trentini, Marco Ajelli, Stefano Merler per Bruno Kessler;

nia Petrucci (Abruzzo); Michele La Bianca (Basilicata); Anna Domenica Mignuoli (Calabria); Argenzio (Campania); Erika Massimiliani (Emilia-Romagna); Tolinda Gallo (Friuli Venezia Giulia); Giamiglio (Lazio); Camilla Sticchi (Liguria); Danilo Cereda (Lombardia); Daniel Fiacchini (Piemonte); Francesco Sforza (Molise); Maria Grazia Zuccaro (P.A. Bolzano); Pier Paolo Benetollo (P.A. Trento); Daniela Tiberti (Piemonte); Maria Chirolla (Puglia); Maria Antonietta Palmas (Sardegna); Salvatore Scudotto (Sicilia); Emanuela Balocchini (Toscana); Anna Tosti (Umbria); Mauro Ruffier (Valle D'Aosta); Filippo Da Re (Veneto).



1. Ad hoc studies and periodic surveys



Survey nazionale sul contagio COVID-19 nelle strutture residenziali e sociosanitarie

TERZO REPORT *

Aggiornamento 14 aprile ore 20.00

- Health care workers
- Long term care facilities
- Clusters and “red zones”
- Health system resilience monitoring
- Etc.

Prodotto dall'Istituto Superiore di Sanità (ISS), Roma

A cura di:

Antonio Ancidoni, Ilaria Bacigalupo, Guido Bellomo, Marco Canevelli, Patrizia Carbonari, Maria Grazia Carella, Annamaria Confalonieri, Alessio Crestini, Fortunato (Paolo) D'Ancona, Carla Faralli, Simone Fiacavento, Silvia Francisci, Flavia Lombardo, Eleonora Lacorte, Cinzia Lo Noce, Paola Luzi, Tania Lopez, Flavia Mayer, Maria Masocco, Monica Mazzola, Graziano Onder, Ilaria Palazzi, Luana Penna, Daniela Pierannunzio, Paola Piscopo, Maria Cristina Porrello, Giulia Remoli, Emanuela Salvi, Giulia Scaravelli, Andrea Siddi, Sabrina Sipone, Lucia Spezzale, Andrea Tavilla, Nicola Vanacore per ISS,

in collaborazione con Mauro Palma e Gilda Losito (Garante nazionale dei diritti delle persone detenute o private della libertà personale)

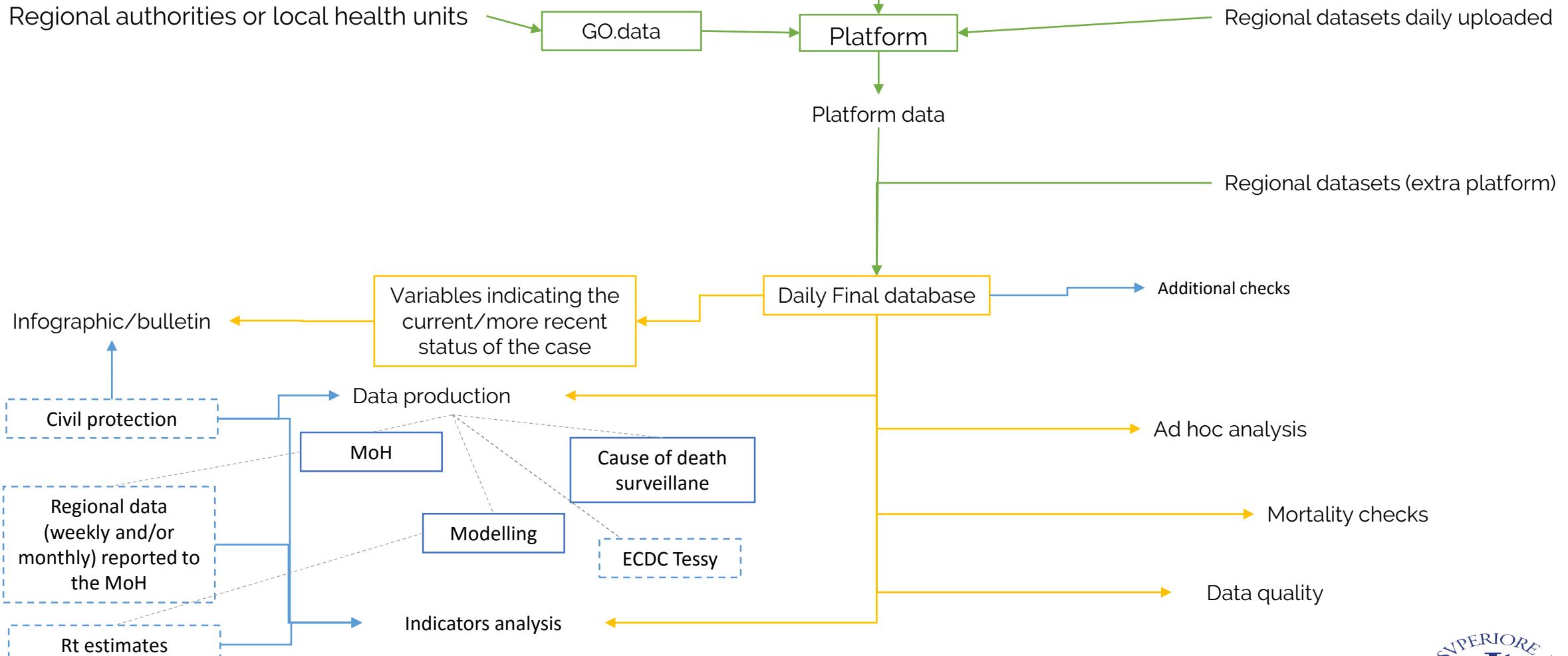
e con Gianluca Pucciarelli (Dipartimento di Biomedicina e Prevenzione-Università di Tor Vergata), Daniela Accorgi (UsL Centro Toscana), Catia Bedosti (Ausl Imola-Emilia Romagna), Gabriella Carraro (Aulss 2 Veneto) Maria Mongardi (Dipartimento di Malattie Infettive – Università di Verona)

Il questionario online è stato preparato da Gianluca Ferrari dell'Area Comunicazione e Informatica srl.

Citare il documento come segue: Survey nazionale sul contagio COVID-19 nelle strutture residenziali e sociosanitarie, Istituto Superiore di Sanità. Epidemia COVID-19, Aggiornamento nazionale: 14 aprile 2020.



Data flow for enhanced monitoring and risk assessment during the transition phase



What the challenges have been and how the EHII network could contribute to overcome these challenges

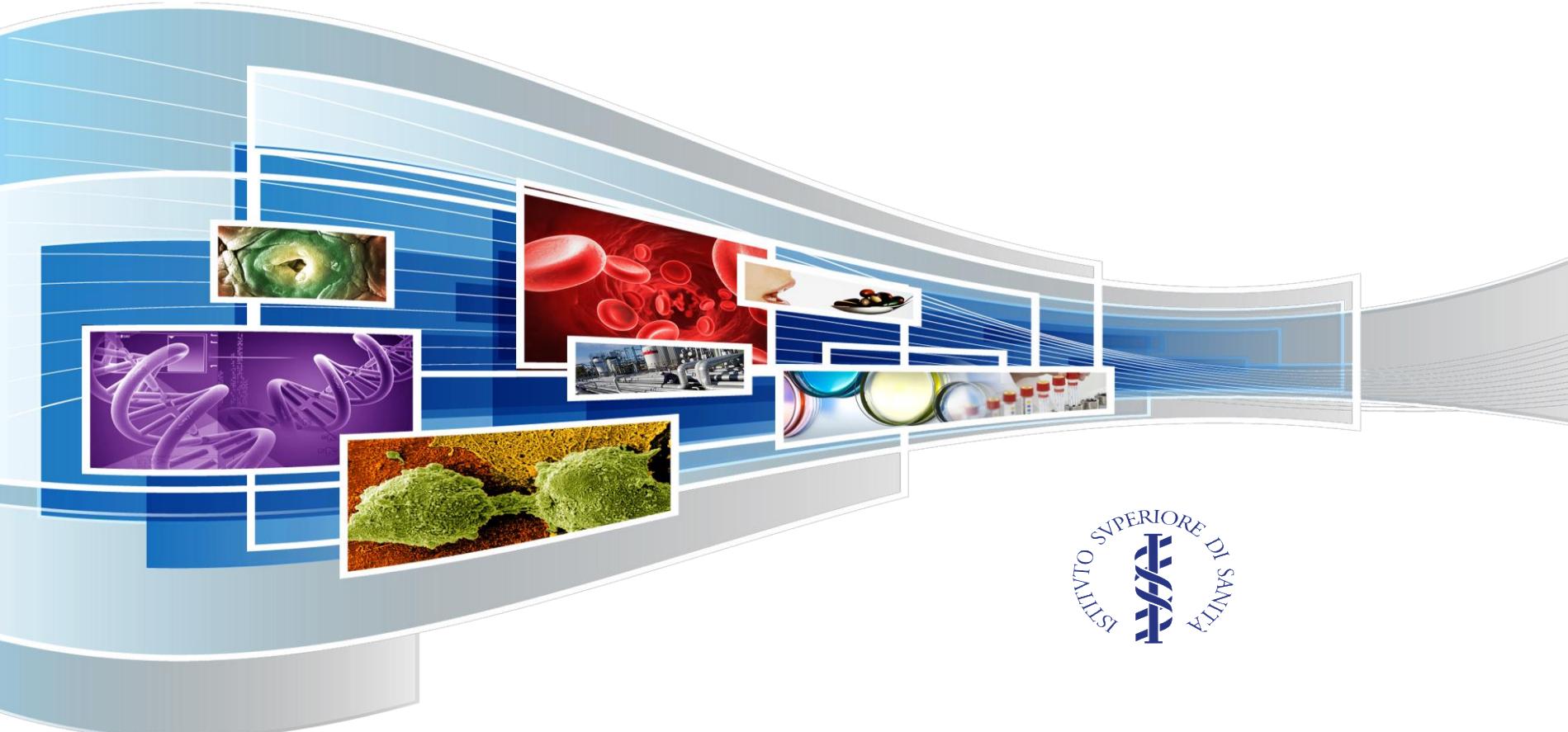
- Coordination among different actors (health decentralization issue)
- Resilience of surveillance systems during epidemic surges
- Interpreting data in light of the delays in observation of cases and deaths
- Insistent data requests from external researchers for personal publication purposes
- Uncertainty on application of privacy rules (e.g obstacles in blending different existing datasets to assess diseases and other aspects for correlation)
- Ethical open data approaches applicable to this setting

Methods for COVID-19 surveillance in the epidemic peak (eg approaches towards syndromic surveillance)

Defining ethical boundaries for data scavenging during emergencies

Clarifying the application and limits of existing laws governing privacy during the COVID-19 emergency

Thank you



Istituto Superiore di Sanità, Italy

For additional information:

- <https://www.iss.it/>
- <https://www.epicentro.iss.it/coronavirus/>