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COVID-19 Fortnightly Surveillance Report, Tasmania



Department of Health

COVID-19 Fortnightly Surveillance Report, Tasmania

Public Health Services

Report for the fortnight ending 8 April 2023

This report describes trends in COVID-19 case notifications, rates per 1,000 people, PCR and rapid antigen testing (RAT), whole genome sequencing, and hospitalisations and deaths from 15 December 2021 to 8 April 2023.

The focus of this report is on COVID-19 cases notified in Tasmania since the lifting of restrictions to the Tasmanian borders on 15 December 2021. The weekly number of COVID-19 cases reported to Public Health Services underestimates the true number of new COVID-19 infections in the community.

Prior to 15 December 2021 there were 238 cases of COVID-19 recorded in Tasmania, with 13 deaths caused by COVID-19 or with COVID-19 as a contributing factor. Of these earlier cases, 232 cases and all 13 deaths were notified in 2020. A further six cases were notified in 2021 prior to 15 December 2021.

Following the border changes on 15 December 2021, COVID-19 was imported from interstate, with subsequent widespread community transmission of COVID-19 in the Tasmanian community.

Caveats to the data: Information presented in this report is based on data available in the Tasmanian Notifiable Diseases Surveillance System (TNDSS) at the time of reporting and is subject to change. COVID-19 pathology data are received daily from public and private laboratories in Tasmania.

Population estimates are calculated using population data from the Australian Bureau of Statistics. The data in this report are calculated using the most recent population data, for 30 June 2021, released on 26 July 2022.

Hospitalisations are reported daily from public and private hospitals in Tasmania and include all individuals with COVID-19 admitted to hospital, including those diagnosed after their admission. The reason for hospital admission, either "with" or "due to" COVID-19, is based on clinician determination. Hospital admissions with COVID-19 also include admissions whereby COVID-19 was not the primary reason for admission (i.e. incidental diagnosis), and cases diagnosed with COVID-19 after admission (i.e. potentially hospital-acquired infections).

Reporting week is the epidemiological week from Sunday to Saturday. Data are presented for the week ending on the date shown in the column header (e.g., data for the week of 27 February to 5 March have the column header "05March2022"). Rates presented are calculated as the number of reported cases of COVID-19 per 1,000 people per week and the number of PCR tests performed per 1,000 people per week.

Summary

The number of reported cases increased statewide, with 874 cases in the week ending 8 April 2023, increasing from 799 cases in the week ending 1 April 2023. This corresponds to a 7-day rolling average of 125 cases per day in the ending 8 April 2023, an increase from the 7-day rolling average of 114 cases per day in the week ending 1 April 2023.

PCR testing for COVID-19 decreased statewide with 1,984 tests in the week ending 8 April 2023 following 2,101 tests in the week ending 1 April 2023. The percentage of PCR tests positive for COVID-19 increased statewide to 5.3 per cent from 4.1 per cent in the previous week.

A range of Omicron subvariants and sub-lineages continue to be detected by whole genome sequencing in Tasmania. In recent weeks, the proportion of Omicron Recombinant XBB has increased and it continues to be the most common SARS-CoV-2 variant identified.

In the fortnight ending 8 April 2023, 96 cases were admitted to hospital with COVID-19, including 29 admitted due to COVID-19. Three cases were admitted to ICU and three cases died where COVID-19 caused or contributed to death.

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Section 1: Total COVID-19 Cases and Number of Cases per 1000 People in Tasmania

1.1 Weekly COVID-19 case numbers and the number of cases per 1000 people, by region of residence

Table 1: COVID-19 cases and number of cases per 1000 people (rate) per week for each of the last four weeks, and total cases notified since 15 December 2021, by region of residence in Tasmania.

	18Mar2023		25Mar2023		01Apr2023		08Apr2023		Total Since 15 December 2021	
Region of Residence	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
North	144	0.9	188	1.2	214	1.4	198	1.3	72,342	467.0
North-West	106	0.9	118	1.0	141	1.2	186	1.6	55,871	469.0
South	434	1.5	432	1.5	429	1.5	485	1.7	149,836	509.9
Unknown Region	6	-	2	-	15	-	5	-	755	-
Tasmania Total	690	1.2	740	1.3	799	1.4	874	1.5	278,804	490.9

*Region is based on residential address provided at time of PCR testing or reporting of a positive RAT. All rates presented are calculated as cases per 1000 people. There have been an additional 11866 cases with an interstate or overseas postcode, with 33 occurring the latest reporting week.

- From 15 December 2021 to 8 April 2023, a total of 278,804 COVID-19 cases were reported in Tasmanian residents.
- Of these total cases, 72,342 cases resided in the North, 55,871 cases resided in the North-West, and 149,836 cases resided in the South.
- The weekly number of cases increased, with 874 cases in the week ending 8 April 2023 compared to 799 cases in the week ending 1 April 2023.

1.2 Weekly COVID-19 case numbers and the number of cases per 1000 people since 15 December 2021, by region of residence and overall, for Tasmanian residents



Region -- North · North-West · South - Tasmania

Figure 1: Number of weekly COVID-19 cases per 1000 people (rate) since 15 December 2021, by region of residence and overall, for Tasmanian residents.

- The number of cases per 1,000 people per week was highest in mid to late March 2022 in the North-West, and early April 2022 in both the South and North of Tasmania.
- The number of cases per 1,000 people per week increased from mid-June in all three regions of Tasmania, peaking in the reporting week ending 16 July 2022.
- From 16 July 2022 until mid-September, the number of cases per 1,000 people per week decreased in all three regions of Tasmania and remained stable until mid-October.
- From mid-October to the week ending 24 December 2022, the number of cases per 1,000 people per week increased, with minor fluctuations, in all three regions of Tasmania.
- From 24 December 2022 to the week ending 4 February 2023, the number of cases per 1,000 people decreased in all three regions of Tasmania to the lowest level recorded since community transmission was established in Tasmania in December 2021.
- Over the last 4-weeks, the numbers of cases per 1,000 people have increased, with minor fluctuations, in all three regions of Tasmania.

1.3 Weekly COVID-19 case numbers and number of cases per 1000 people, by Local Government Area

Table 2: COVID-19 cases and number of cases per 1000 people (rate) notified per week in Tasmania for each of the last four weeks, and total cases notified since 15 December 2021, by Local Government Area (LGA)*.

		18Mar	2023	25Mar	2023	01Apr	2023	08Apr	2023	Total Since December 2	
LGA	Population	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
Break O'Day	6,936	3	0.4	21	3.0	18	2.6	4	0.6	2,683	386.8
Brighton	19,263	20	1.0	36	1.9	22	1.1	32	1.7	13,819	717.4
Burnie	20,441	13	0.6	15	0.7	22	1.1	32	1.6	10,857	531.1
Central Coast	23,278	13	0.6	19	0.8	31	1.3	37	1.6	10,857	466.4
Central Highlands	2,580	1	0.4	2	0.8	1	0.4	0	0.0	340	131.8
Circular Head	8,335	13	1.6	13	1.6	13	1.6	3	0.4	3,147	377.6
Clarence	62,396	99	1.6	90	1.4	104	1.7	116	1.9	32,771	525.2
Derwent Valley	11,114	12	1.1	9	0.8	18	1.6	16	1.4	5,735	516.0
Devonport	26,922	26	1.0	29	1.1	41	1.5	53	2.0	14,665	544.7
Dorset	6,991	8	1.1	16	2.3	2	0.3	4	0.6	2,566	367.0
Flinders	938	5	5.3	4	4.3	1	1.1	1	1.1	345	367.8
George Town	7,213	4	0.6	7	1.0	13	1.8	8	1.1	3,284	455.3
Glamorgan- Spring Bay	5,118	7	1.4	10	2.0	1	0.2	5	1.0	1,541	301.1
Glenorchy	51,233	72	1.4	70	1.4	70	1.4	100	2.0	26,833	523.7
Hobart	56,084	102	1.8	83	1.5	84	1.5	91	1.6	28,970	516.5
Huon Valley	18,809	24	1.3	48	2.6	29	1.5	21	1.1	7,745	411.8
Kentish	6,778	4	0.6	6	0.9	3	0.4	14	2.1	2,384	351.7
King Island	1,654	2	1.2	1	0.6	0	0.0	0	0.0	614	371.2
Kingborough	40,815	72	1.8	51	1.2	77	1.9	75	1.8	21,042	515.5
Latrobe	12,705	27	2.1	20	1.6	15	1.2	21	1.7	5,812	457.5
Launceston	71,906	73	1.0	89	1.2	112	1.6	105	1.5	41,876	582.4

		18Mar	2023	25Mar2023		01Apr2023		08Apr2023		Total Since 15 December 2021	
LGA	Population	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
Meander Valley	21,153	14	0.7	20	0.9	16	0.8	26	1.2	6,670	315.3
Northern Midlands	14,030	12	0.9	10	0.7	32	2.3	23	1.6	6,684	476.4
Sorell	16,975	20	1.2	20	1.2	11	0.6	20	1.2	8,236	485.2
Southern Midlands	6,838	3	0.4	9	1.3	7	1.0	6	0.9	1,865	272.7
Tasman	2,643	2	0.8	4	1.5	5	1.9	3	1.1	861	325.8
Waratah- Wynyard	14,641	8	0.5	9	0.6	11	0.8	17	1.2	5,901	403.0
West Coast	4,373	0	0.0	6	1.4	5	1.1	9	2.1	1,629	372.5
West Tamar	25,747	25	1.0	21	0.8	20	0.8	27	1.0	8,222	319.3

*LGA is based on residential address provided at time of PCR testing or reporting of a positive RAT. This table excludes those who reported their region of residence to be interstate or overseas. All rates presented are calculated as cases per 1000 population.

- From 15 December 2021 to 8 April 2023, the Local Government Area (LGA) with the highest total number of cases per 1,000 people was Brighton with 717.4 cases, followed by Launceston with 582.4 cases.
- In the week ending 8 April 2023, the LGAs with the highest number of reported cases per 1,000 people were Kentish, West Coast, Glenorchy and Devonport, all with around two cases per 1,000 people. The highest numbers of recent cases were reported from the Clarence, Glenorchy, Hobart and Launceston LGAs.

1.4 Weekly number of COVID-19 cases per 1000 people by Local Government Area



Figure 2: Weekly number of COVID-19 cases per 1,000 people (rate), presented as a metric from low (<4 cases) to very high (\geq 28 cases) for the previous two weeks, by Local Government Area (LGA), in Tasmania.

 In the weeks ending 1 April and 8 April 2023, all 29 LGAs had a case rate of <4 cases per 1,000 people.

1.5 Weekly COVID-19 case numbers and the number of cases per 1000 people, by age group

Table 3: COVID-19 cases and number of cases per 1000 people (rate) per week notified inTasmania for each of the last four weeks, and total number and overall number of cases per 1000people (rate) since 15 December 2021, by age group.

		18Mar	2023	25Mar	2023	01Apr2023		08Apr2023		Total Since 15 December 2021	
Age Group	Population	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
0-4	30,762	6	0.2	18	0.6	12	0.4	18	0.6	12,977	421.9
5-11	47,316	27	0.6	32	0.7	24	0.5	31	0.7	26,640	563.0
12-15	27,641	21	0.8	29	1.0	24	0.9	28	1.0	16,132	583.6
16-19	25,947	17	0.7	21	0.8	17	0.7	15	0.6	14,703	566.7
20-29	68,883	72	1.0	67	1.0	87	1.3	87	1.3	44,809	650.5
30-39	68,662	81	1.2	113	1.6	121	1.8	122	1.8	45,781	666.8
40-49	67,481	107	1.6	76	1.1	117	1.7	125	1.9	37,150	550.5
50-59	75,657	89	1.2	128	1.7	122	1.6	109	1.4	32,351	427.6
60-69	74,484	118	1.6	120	1.6	131	1.8	123	1.7	24,290	326.1
70-79	53,489	109	2.0	89	1.7	100	1.9	141	2.6	15,155	283.3
80-84	14,342	26	1.8	26	1.8	30	2.1	37	2.6	4,308	300.4
85+	13,245	17	1.3	21	1.6	14	1.1	38	2.9	4,499	339.7
Unknown Age			0.0		0.0		0.0		0.0	9	
Total	567,909	690	1.2	740	1.3	799	1.4	874	1.5	278,804	490.9

Age group is based on age or date of birth provided at time of PCR testing or reporting of a positive RAT. People who have not provided a valid age or date of birth have been excluded. All rates presented are calculated as cases per 1000 people. This table excludes those who reported their region of residence to be interstate or overseas. Only Tasmanians are presented in this table. There have been an additional 11866 cases with an interstate or overseas postcode, with 33 occurring the latest reporting week.

- From 15 December 2021 to 8 April 2023, adults aged 30-39 years had the highest total number of cases per 1,000 people with 666.8 cases, followed by young adults aged 20-29 years with 650.5 cases.
- In the week ending 8 April 2023, weekly case numbers were highest in adults aged 70-79 with 141 cases. Adults aged 85 years and older had the highest rate with 2.9 cases per 1,000 people.
- In the weeks ending 1 April and 8 April 2023, there were modest increases in case numbers in various age groups including adults aged 20-49 years and 70 years and older.

1.6 Weekly number of COVID-19 cases per 1000 people notified in Tasmania since 15 December 2021, by age group



Figure 3: Weekly number of COVID-19 cases per 1000 people (rate) notified in Tasmania since 15 December 2021, by age group.

- The third and previous wave peaked in the week ending 16 July 2022, before the number of cases per 1,000 people in all age groups declined steadily until early September.
- From mid-October to 24 December 2022, the number of cases per 1,000 people increased, with minor fluctuations, in all age groups with the greatest increase in adults aged 70 years and older.
- From 24 December 2022 to 28 January 2023, the number of cases per 1,000 people decreased in all age groups.
- In the weeks ending 1 April and 8 April 2023, the number of cases per 1,000 people increased modestly in all age groups from adults aged 20 years and older.

1.7 Weekly COVID-19 case numbers in Aboriginal and Torres Strait Islander people

Table 4: Weekly number of COVID-19 cases notified in Tasmania for each of the last four weeks,and total number of cases since 15 December 2021, by reported Aboriginal and Torres StraitIslander status.

Reported Aboriginal and Torres Strait Islander status	18Mar2023	25Mar2023	01Apr2023	08Apr2023	Total since 15 December 2021
People who identify as Aboriginal and/or Torres Strait Islander	28 (4.1%)	40 (5.4%)	47 (5.9%)	29 (3.3%)	16,318 (5.9%)
Non-Indigenous	601 (87.1%)	622 (84.1%)	653 (81.7%)	711 (81.4%)	223,313 (80.1%)
Not Stated	61 (8.8%)	78 (10.5%)	99 (12.4%)	134 (15.3%)	39,173 (14.1%)
Total	690 (100.0%)	740 (100.0%)	799 (100.0%)	874 (100.0%)	278,804 (100.0%)

*This table excludes those who reported their region of residence to be interstate or overseas. Region is based on residential postcode provided to Public Health Services. Percentages are based on total cases per region per week. Percentages have been rounded to the nearest decimal point and may not add up to 100 per cent.

- From 15 December 2021 to 8 April 2023, 16,318 Aboriginal and/or Torres Strait Islander people were diagnosed with COVID-19. This comprised 5.9 per cent of overall cases diagnosed in Tasmania.
- There was a decrease in the number of cases in people who identify as Aboriginal and/or Torres Strait Islander from 47 in the week ending 1 April 2023 to 29 in the week ending 8 April 2023.
- Overall, 85.9 per cent of cases have reported their Aboriginal and Torres Strait Islander status.

1.8 Weekly COVID-19 case numbers by method of diagnosis

Table 5: Weekly number of people diagnosed with COVID-19 in Tasmania from 15 December2021 to 8 April 2023 by PCR and rapid antigen testing (RAT).

Reporting Week	PCR	RAT	Total Recorded Cases
18Feb2023	63 (15.7%)	338 (84.3%)	401
25Feb2023	71 (13.4%)	457 (86.6%)	528
04Mar2023	67 (11.8%)	499 (88.2%)	566
11Mar2023	60 (10.1%)	537 (89.9%)	597
18Mar2023	68 (9.9%)	622 (90.1%)	690
25Mar2023	78 (10.5%)	662 (89.5%)	740
01Apr2023	85 (10.6%)	714 (89.4%)	799
08Apr2023	94 (10.8%)	780 (89.2%)	874
Total Since 15 December 2021	63,168 (22.7%)	215,636 (77.3%)	278,804

*Case numbers include positive notifications to Public Health Services from pathology laboratories providing PCR results, and selfreported rapid antigen tests (RATs). Where both a PCR and RAT are notified to Public Health Services for the same individual, the PCR test is reported.

- Rapid antigen tests (RATs) have comprised 77.3 per cent of all COVID-19 case notifications to Public Health Services since 15 December 2021.
- In the week ending 8 April 2023 the proportion of cases diagnosed by PCR testing remained stable at 10.8 per cent compared to 10.6 per cent in the previous week.

1.9 Number of COVID-19 cases in Tasmania per day since 15 December 2021, by testing method (PCR and rapid antigen tests), with a 7-day rolling average of total COVID-19 cases notified



Figure 4. Number of COVID-19 cases in Tasmania notified per day from 15 December 2021 to 8 April 2023, by testing method (PCR and rapid antigen tests).

- The first wave of COVID-19 cases peaked in mid-January 2022 with a 7-day rolling average of 1,445 reported cases per day.
- The second and highest wave of COVID-19 cases began in February 2022 and peaked in early April 2022 with a 7-day rolling average of 2,082 reported cases per day.
- The third wave began in June 2022 and peaked mid-July with a 7-day rolling average of 1,608 cases. The number of cases at the peak of the third wave was approximately 75 per cent of the number of cases at the peak of the previous wave in April 2022.
- The fourth wave began in late October 2022 and peaked in late December with a 7-day rolling average of 584 reported cases per day.
- The 7-day rolling average of COVID-19 cases increased from 114 reported cases per day in the week ending 1 April 2023 to 125 reported cases per day in the week ending 8 April 2023.

1.10 Number of SARS-CoV-2 reinfections per month in Tasmania since 15 December 2021

Table 6: Number and per cent of SARS-CoV-2 reinfections* in reported cases per month inTasmania from 15 December 2021 to 8 April 2023.

Month	Total Cases	Total Reinfections	Percent of Cases that were Reinfections
Dec 2021	737	0	0.0
Jan 2022	25,875	5	0.0
Feb 2022	16,968	68	0.4
Mar 2022	43,905	67	0.2
Apr 2022	43,284	220	0.5
May 2022	26,914	409	1.5
Jun 2022	23,162	701	3.0
Jul 2022	41,259	2,664	6.5
Aug 2022	13,345	1,997	15.0
Sep 2022	3,805	1,121	29.5
Oct 2022	3,306	642	19.4
Nov 2022	10,667	2,182	20.5
Dec 2022	16,152	4,320	26.7
Jan 2023	3,741	1,148	30.7
Feb 2023	1,688	590	35.0
Mar 2023	3,045	1,069	35.1
Apr 2023	951	268	28.2
Total	278,804	17,471	6.3

*The definition of reinfection is a subsequent confirmed (positive PCR) or probable (positive RAT) SARS-CoV-2 infection in a person with a past known confirmed or probable SARS-CoV-2 infection as defined in the Communicable Diseases Network of Australia Series of National Guidelines. The current time period for a case to be included as a reinfection is 35 days or more from the positive test date of the previous infection.

- From 15 December 2021 to 8 April 2023, a total of 17,471 reinfections were identified in Tasmania which accounts for 6.3 per cent of all reported COVID-19 cases.
- Overall, 268 cases have been identified as reinfections so far in April 2023.

1.11 Number of SARS-CoV-2 reinfections in Tasmania since 15 December 2021, by age group

Table 7: Number and per cent of SARS-CoV-2 reinfections in reported cases in Tasmania from 15December 2021 to 8 April 2023, by age group

Age Group	Total Cases	Total Reinfections	Percent of Cases that were Reinfections
0-4	12,977	516	4.0
5-11	26,640	1,469	5.5
12-15	16,132	847	5.3
16-19	14,703	1,048	7.1
20-29	44,809	3,888	8.7
30-39	45,781	3,490	7.6
40-49	37,150	2,705	7.3
50-59	32,351	1,726	5.3
60-69	24,290	904	3.7
70-79	15,155	477	3.1
80-84	4,308	161	3.7
85+	4,499	240	5.3
Unknown Age	9	0	0.0
Total	278,804	17,471	6.3

• From 15 December 2021 to 8 April 2023, adults aged 20-29 years had the highest proportion of reinfections at 8.7 per cent, and adults aged 70-79 years had the lowest proportion of reinfections at 3.1 per cent.

Section 2: PCR Testing in Tasmania

2.1 PCR positivity percentage by region of residence

Table 8: Number of COVID-19 PCR tests (both positive and negative) and percentage of PCR tests positive for COVID-19 (% Pos) for each of the last four weeks and since 15 December 2021, by region of residence in Tasmania.

	18Mai	2023	25Mar	2023	01Apr	2023	08Apr	2023	Since 15 2	December 021
Region of Residence	Tests	% Pos	Tests	% Pos	Tests	% Pos	Tests	% Pos	Total Tests	Overall % Pos
North	347	6.6	411	6.3	382	5.5	308	5.5	110,144	16.6
North-West	360	1.7	404	4.7	457	5.7	389	4.1	82,410	13.2
South	1,371	2.5	1,284	3.4	1,262	3.1	1,287	5.7	260,680	14.1
Unknown Region	0	0.0	0	0.0	0	0.0	0	0.0	11	0.0
Tasmania	2,078	3.0	2,099	4.2	2,101	4.1	1,984	5.3	453,245	14.5

*This table excludes those who reported their region of residence to be interstate or overseas. Region is based on residential address provided at time of PCR testing.

- From 15 December 2021 to 8 April 2023, a total of 453,245 PCR tests were performed in Tasmania. Of these, 14.5 per cent were positive for COVID-19.
- In the week ending 8 April 2023, the number of PCR tests performed statewide decreased to 1,984 compared to 2,101 PCR tests in the previous week.
- In the week ending 8 April 2023, the percentage of PCR tests positive for COVID-19 remained stable at 5.5 per cent in the North, decreased to 4.1 per cent in the North-West and increased to 5.7 per cent in the South.

2.2 Weekly percentage of PCR tests positive for COVID-19 since 15 December 2021, by region of residence and overall, for Tasmanian residents



Figure 5: Weekly percentage of PCR tests positive for COVID-19 from 15 December 2021 to 8 April 2023, by region of residence and overall for Tasmanian residents.

- From the week ending 8 October to the week ending 3 December 2022, the percentage of positive PCR tests increased, with minor fluctuations, in all three regions of Tasmania, particularly in the North.
- From 24 December 2022 to the week ending 11 February 2023, the percentage of positive PCR tests decreased, with minor fluctuations, in all three regions of Tasmania.
- In the week ending 8 April 2023, the percentage of PCR tests that tested positive for COVID-19 increased statewide to 5.3 per cent from 4.1 per cent in the previous week. The percentage of positive PCR tests is highest in the South.

2.3 PCR testing by region of residence

Table 9: Number of PCR tests performed and number of PCR tests per 1000 people (rate) per week for each of the last four weeks and since 15 December 2021, by region of residence in Tasmania.

	18Mar2023		25Mar2023		01Apr2023		08Apr2023		Total Since 15 December 2021	
Region of Residence	Tests	Rate	Tests	Rate	Tests	Rate	Tests	Rate	Total Tests	Overall Rate
North	347	2.2	411	2.7	382	2.5	308	2.0	110,144	711.0
North-West	360	3.0	404	3.4	457	3.8	389	3.3	82,410	691.8
South	1,371	4.7	1,284	4.4	1,262	4.3	1,287	4.4	260,680	887.1
Tasmania	2,078	3.7	2,099	3.7	2,101	3.7	1,984	3.5	453,245	798.1
Unknown Region		-		-		-		-	11	-

*This table excludes those who reported their region of residence to be interstate or overseas. Region of residence is based on residential address provided at the time of PCR testing. All rates presented are calculated as PCR tests per 1000 people.

- From 15 December 2021 to 8 April 2023, the overall PCR testing rate per 1,000 people was highest in the South with 887.1 tests, followed by the North with 711.0 tests and the North-West with 691.8 tests.
- In the week ending 8 April 2023, the PCR testing rate was highest in the South with 4.4 tests per 1,000 people.

2.4 Weekly number of PCR tests per 1,000 people since 15 December 2021, by region of residence and overall, for Tasmanian residents



Figure 6: Weekly number of PCR tests per 1000 people (rate) from 15 December 2021 to 8 April 2023, by region of residence and overall for Tasmanian residents.

- The highest weekly rate of PCR testing occurred in early January 2022 at 49 tests per 1,000 people.
- From 24 December 2022 to 28 January 2023, the PCR testing rate decreased with minor fluctuations in all three regions of Tasmania.
- Since 4 February 2023, the PCR testing rate has remained relatively stable in all three regions of Tasmania.

Section 3: COVID-19 Whole Genome Sequencing in Tasmania

Like all viruses, SARS-CoV-2 changes over time. The World Health Organization monitors these changes and classifies lineages according to the risk that they pose to global public health. Those that they identify as having changes that increase transmissibility, increase virulence, or decrease the effectiveness of vaccines or treatments are designated as variants of concern.

Whole genome sequencing is used in Tasmania to monitor for new SARS-CoV-2 variants circulating in the community, in particular variants of concern. Whole genome sequencing is a laboratory procedure that identifies the genetic profile of an organism. Whole genome sequencing can help understand how a virus transmits, responds to vaccination and the severity of disease it may cause. It can also help to monitor the spread of the virus by identifying specimens that are genomically similar. In Tasmania, whole genome sequencing is conducted at the Royal Hobart Hospital Pathology Laboratory.

Not all case specimens are sequenced. Specimens from people with COVID-19 who are admitted to hospital, or an ICU are prioritised, to identify and understand lineages with increased disease severity. Specimens from overseas arrivals are also prioritised to monitor for the introduction of new variants into the community. This is not a random sample, therefore the proportion of sequences identified is not necessarily reflective of their distribution in the community.

There is a time lag between the date a PCR test is taken and the date that the results of whole genome sequencing are reported to Public Health Services. The count of specimens which have been sequenced for recent weeks will therefore increase over time.

3.1 Variants identified by whole genome sequencing in Tasmania

Table 10: SARS-CoV-2 variants, selected subvariants and selected sub-lineages identified by whole genome sequencing, by specimen collection date in the four weeks to 1 April 2023, Tasmania

Verient		Wee	k ending	
variant	11 March	18 March	25 March	01 April
Omicron variants				
BA.2.75 sub-lineages BL,BM,BN,BY,CH and other*	4 (14%)	1 (3%)	2 (6%)	0 (0%)
BA.2.75 sub-lineage BR.2	5 (17%)	5 (16%)	4 (12%)	0 (0%)
DV.1	0 (0%)	1 (3%)	1 (3%)	0 (0%)
EG.1	2 (7%)	0 (0%)	1 (3%)	0 (0%)
Recombinant XBC [^]	1 (3%)	0 (0%)	1 (3%)	0 (0%)
Recombinant XBF [^]	3 (10%)	3 (10%)	2 (6%)	1 (5%)
Recombinant XBB [^]	14 (48%)	21 (68%)	21 (64%)	20 (95%)
Recombinant XBL [^]	0 (0%)	0 (0%)	1 (3%)	0 (0%)
Total	29 (100%)	31 (100%)	33 (100%)	21 (100%)

*This includes sub-lineages and sub-sub-lineages of this variant. These have been grouped for simplicity as they are either not a sublineage of concern or have been detected in very low numbers during this reporting period. ARecombinant variants arise when two SARS CoV-2 variants hybridise, that is exchange a part of their DNA. XBB is a recombinant variant between two Omicron BA.2 sublineages, BA.2.10 and BA.2.75.3. These recombinant variants may then be transmitted and become established, further acquiring new mutations. Percentages have been rounded to the nearest decimal point and may not add up to 100 per cent.

- A range of Omicron subvariants and sub-lineages continued to be detected in Tasmania in the four weeks to 1 April 2023.
- In the fortnight ending 1 April 2023, Omicron Recombinant XBB was the most common SARS-CoV-2 variant identified out of the 54 isolates subjected to whole genome sequencing.
- The proportion of isolates typed as Omicron Recombinant XBB has increased from 48% to 95% over the last three weeks.

Section 4: Clinical Severity and Deaths in Tasmania

4.1 Clinical severity and deaths in reported COVID-19 cases by reporting week

Table 11: All hospital admissions with COVID-19, number of hospital admissions due to COVID-19, number of ICU admissions (for any reason), and deaths for which COVID-19 was a cause or contributing factor, in Tasmania from 15 December 2021 to 8 April 2023.

Reporting Week	All Hospital Admissions with COVID-19	Hospital Admissions due to COVID-19	Intensive Care Admissions	Deaths
18Feb2023	40	10	1	3
25Feb2023	42	7	2	2
04Mar2023	28	12	0	3
11Mar2023	40	9	1	2
18Mar2023	25	12	0	3
25Mar2023	44	17	0	0
01Apr2023	47	13	0	1
08Apr2023	49	16	3	2
Total Since 15 Dec 2021	3,695	1,315	127	251

*Reporting week is based on the earliest admission date for each case. Cases may be admitted to hospital more than once. Hospital admissions include cases admitted with COVID-19 or cases diagnosed with COVID-19 after admission. Reason for hospital admission is based on clinician determination at discharge date. Only recorded deaths, where the death was caused or contributed to by COVID-19 have been included.

- From 15 December 2021 to 8 April 2023, 3,695 reported COVID-19 cases were admitted to hospital. Of these, 1,315 reported cases (35.6 per cent) were admitted to hospital due to COVID-19.
- From 15 December 2021 to 8 April 2023, 127 reported COVID-19 cases were admitted to ICU.
- From 15 December 2021 to 8 April 2023, 251 reported COVID-19 cases died where COVID-19 caused or contributed to their death.
- In the fortnight ending 8 April 2023, 96 cases were admitted to hospital with COVID-19, including 29 admitted due to COVID-19. Three cases were admitted to ICU and three cases died where COVID-19 caused or contributed to death.

4.2 Clinical severity and deaths in reported COVID-19 cases by age group

Table 12: All hospital admissions with COVID-19, number of hospital admissions due to COVID-19, number of ICU admissions (for any reason), and deaths for which COVID-19 was a cause or contributing factor, in Tasmania from 15 December 2021 to 8 April 2023, by age group.

Age Group (years)	All Hospital Admissions with COVID-19	Hospital Admissions due to COVID-19*	Intensive Care Admissions	Deaths
0-4	157 (4.2%)	89 (6.8%)	7 (5.5%)	0 (0.0%)
5-11	34 (0.9%)	7 (0.5%)	1 (0.8%)	0 (0.0%)
12-15	22 (0.6%)	4 (0.3%)	0 (0.0%)	0 (0.0%)
16-19	39 (1.1%)	4 (0.3%)	2 (1.6%)	0 (0.0%)
20-29	182 (4.9%)	36 (2.7%)	11 (8.7%)	0 (0.0%)
30-39	206 (5.6%)	48 (3.7%)	4 (3.1%)	1 (0.4%)
40-49	195 (5.3%)	64 (4.9%)	9 (7.1%)	4 (1.6%)
50-59	321 (8.7%)	113 (8.6%)	22 (17.3%)	12 (4.8%)
60-69	510 (13.8%)	173 (13.2%)	26 (20.5%)	29 (11.6%)
70-79	830 (22.5%)	310 (23.6%)	34 (26.8%)	51 (20.3%)
80-84	525 (14.2%)	213 (16.2%)	7 (5.5%)	49 (19.5%)
85+	674 (18.2%)	254 (19.3%)	4 (3.1%)	105 (41.8%)
Total	3,695	1,315	127	251

*Age group is based on age provided at time of PCR testing or reporting of a positive RAT. Cases may be admitted to hospital more than once. Hospital admissions include cases admitted with COVID-19 or cases diagnosed with COVID-19 after admission. Reason for hospital admission is based on clinician determination at discharge date. Only recorded deaths, where the death was caused or contributed to by COVID-19 have been included.

- From 15 December 2021 to 8 April 2023, 1,063 reported cases aged 50 years and older were hospitalised due to COVID-19. These comprised 80.8 per cent of all hospitalisations due to COVID-19.
- From 15 December 2021 to 8 April 2023, 93 reported cases aged 50 years and older with COVID-19 were admitted to ICU. These comprised 73.2 per cent of all ICU admissions with or due to COVID-19.
- From 15 December 2021 to 8 April 2023, 246 reported cases aged 50 years and older died where COVID-19 caused or contributed to their death. These comprised 98.0 per cent of all deaths where COVID-19 caused or contributed to death.

4.3 Hospital admissions in reported COVID-19 cases, by week and age group

Table 13: Number of COVID-19 hospital admissions* and the proportion of COVID-19 cases in each age group that were in hospital in Tasmania, for each of the last four weeks and from 15 December 2021 to 8 April 2023, by age group.

Age Group (years)	12Mar2023 to 18Mar2023	19Mar2023 to 25Mar2023	26Mar2023 to 01Apr2023	02Apr2023 to 08Apr2023	Total Since 15 December 2021
0-4	1 (16.7%)	1 (5.6%)	2 (16.7%)	1 (5.6%)	157 (1.2%)
5-11	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	34 (0.1%)
12-19	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	61 (0.2%)
20-29	0 (0.0%)	1 (1.5%)	2 (2.3%)	2 (2.3%)	182 (0.4%)
30-39	2 (2.5%)	3 (2.7%)	0 (0.0%)	1 (0.8%)	206 (0.4%)
40-49	0 (0.0%)	2 (2.6%)	3 (2.6%)	3 (2.4%)	195 (0.5%)
50-59	0 (0.0%)	4 (3.1%)	4 (3.3%)	3 (2.8%)	321 (1.0%)
60-69	0 (0.0%)	10 (8.3%)	4 (3.1%)	12 (9.8%)	510 (2.1%)
70-79	10 (9.2%)	9 (10.1%)	16 (16.0%)	14 (9.9%)	830 (5.5%)
80-84	3 (11.5%)	7 (26.9%)	9 (30.0%)	7 (18.9%)	525 (12.2%)
85+	9 (52.9%)	7 (33.3%)	7 (50.0%)	6 (15.8%)	674 (15.0%)
Total	25 (3.6%)	44 (5.9%)	47 (5.9%)	49 (5.6%)	3695 (1.3%)

*Reporting week is based on the earliest admission date for each case. Cases may be admitted to hospital more than once. Hospital admissions include cases admitted with COVID-19 or cases diagnosed with COVID-19 after admission. Reason for hospital admission is based on clinician determination at discharge date. Only recorded deaths, where the death was caused or contributed to by COVID-19 have been included.

- From 15 December 2021 to 8 April 2023, 3,695 reported COVID-19 cases were hospitalised. These 3, 695 cases comprised 1.3 per cent of all COVID-19 cases in Tasmania.
- From 15 December 2021 to 8 April 2023, the highest proportion of hospitalised cases was in adults aged 85 years and older. In this age group, 15.0 per cent all cases were admitted to hospital.
- In the week ending 8 April 2023, 49 reported COVID-19 cases were hospitalised, comprising 5.6 per cent of all COVID-19 cases notified to Public Health Services during that week.
- In the week ending 8 April 2023, the proportion of cases hospitalised was highest in those aged 80 years and older.

4.4 Clinical severity and deaths in reported COVID-19 cases by vaccination status

Table 14: All hospital admissions with COVID-19, number of hospital admissions due to COVID-19, number of ICU admissions (for any reason), and deaths for which COVID-19 was a cause or contributing factor, in Tasmania from 15 December 2021 to 8 April 2023, by vaccination status.

Number of Reported Vaccination Doses	Reported Cases	All Hospital Admissions with COVID-19	Hospital Admissions due to COVID-19	Intensive Care Admissions	Deaths
0 doses	31,654	436	183	20	41
1 dose	12,912	85	31	3	5
2 or more doses	223,472	3,051	1,054	96	203
Unknown	10,766	123	47	8	2
Total	278,804	3,695	1,315	127	251

*Data should be interpreted with caution as vaccination information is based on self-report at the time of notification of a positive PCR or RAT. Cases may be admitted to hospital more than once. Hospital admissions include cases admitted with COVID-19 or cases diagnosed with COVID-19 after admission. Reason for hospital admission is based on clinician determination at discharge date. Only recorded deaths, where the death was caused or contributed to by COVID-19 have been included.

- From 15 December 2021 to 8 April 2023, the death rate in reported cases who were unvaccinated was 0.13 per cent while the death rate in reported cases who had received two or more doses of vaccine was 0.09 per cent.
- From 15 December 2021 to 8 April 2023, the death rate in reported cases who were unvaccinated was 1.43 times the death rate in reported cases who had received two or more doses of vaccine.

4.5 Deaths in reported COVID-19 cases by region of residence

Table 15: Number of deaths for which COVID-19 was a cause or contributing factor, per week for each of the last four weeks and from 15 December 2021 to 8 April 2023, in Tasmania by region of residence.

Region	18Mar2023	25Mar2023	01Apr2023	08Apr2023	Total Since 15 December 2021
North	2	0	0	0	59
North-West	0	0	1	1	52
South	1	0	0	1	139
Interstate	0	0	0	0	1
Total	3	0	1	2	251

*Region is based on residential address provided at time of PCR testing or reporting of a positive RAT. Only recorded deaths, where the death was caused or contributed to by COVID-19 have been included.

- From 15 December 2021 to 8 April 2023, 251 reported cases died in Tasmania where COVID-19 caused or contributed to their death. Of these, 59 reported cases lived in the North, 52 reported cases lived in the North-West and 139 reported cases lived in the South. One reported case who died stated residential address as interstate.
- In the week ending 8 April 2023, two reported cases died where COVID-19 caused or contributed to death.



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