



Report created on 27 March 2023

COVID-19

Fortnightly Surveillance Report, Tasmania

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Public Health Services

Report for the epidemiological week ending 25 March 2023

This report describes trends in COVID-19 case notifications, PCR, and rapid antigen testing (RAT), vaccination status, and hospitalisations and deaths from 15 December 2021 to 11 March 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 740 cases in the week ending 25 March 2023, increasing from 690 cases in the week ending 18 March 2023. This corresponds to a 7-day rolling average of 106 cases per day in the ending 25 March 2023, an increase from the 7-day rolling average of 99 cases per day in the week ending 18 March 2023.

PCR testing for COVID-19 remained relatively stable statewide with 2,068 tests in the week ending 25 March 2023 following 2,078 tests in the week ending 18 March 2023. The percentage of PCR tests positive for COVID-19 increased statewide to 4.2 per cent from 3.0 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, Omicron Recombinant XBB has increased, and along with Omicron BA.2.75 sub-lineage BR.2 has been the most common SARS-CoV-2 variants identified.

In the fortnight ending 25 March 2023, 71 cases were admitted to hospital with COVID-19, including 30 admitted due to COVID-19. No 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.

	04Mar2023		11Mar2023		18Mar2023		25Mar2023		Total Since 15 December 2021	
Region of Residence	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
North	164	1.1	138	0.9	144	0.9	188	1.2	71,932	464.3
North-West	130	1.1	106	0.9	106	0.9	118	1.0	55,542	466.2
South	272	0.9	335	1.1	434	1.5	432	1.5	148,922	506.8
Unknown Region		-	18	-	6	-	2	-	735	-
Tasmania Total	566	1.0	597	1.1	690	1.2	740	1.3	277,131	488.0

*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 population. There have been an additional 11,813 cases with an interstate or overseas postcode, with 42 occurring the latest reporting week.

- From 15 December 2021 to 25 March 2023, a total of 277,131 COVID-19 cases were reported in Tasmanian residents.
- Of these total cases, 71,932 cases resided in the North, 55,542 cases resided in the North-West, and 148,922 cases resided in the South.
- The weekly number of cases increased, with 740 cases in the week ending 25 March 2023 compared to 690 cases in the week ending 18 March 2023.
- Most of the increase in cases over the last 4 weeks is attributable to increased case numbers in the South.

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

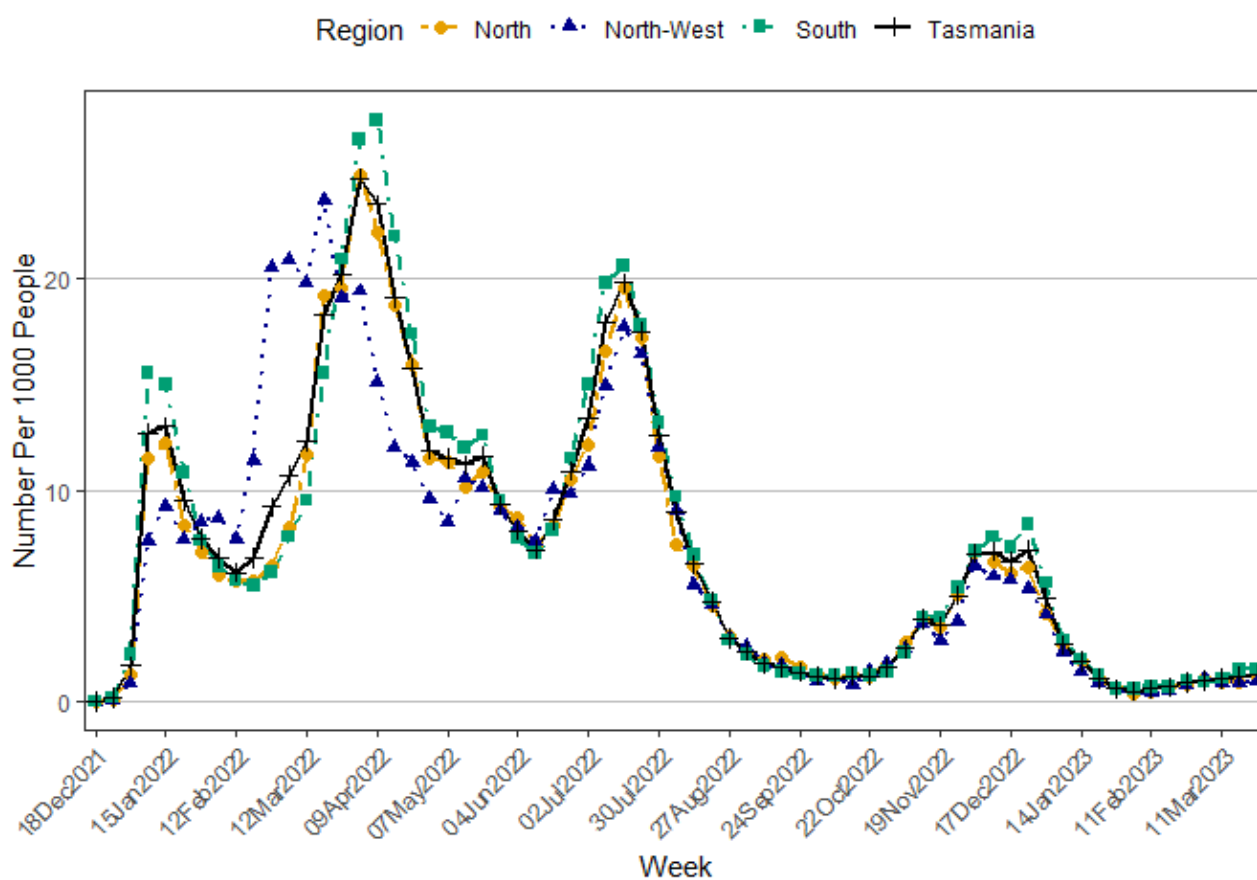


Figure 1: Number of weekly COVID-19 cases per 1000 people (rate) since 15 December 2021, by region of residence and overall, for Tasmanian residents.

- 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 number of cases per 1,000 people have remained relatively stable in the North and North-West and has increased in the South.

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)*.

		04Mar2023		11Mar2023		18Mar2023		25Mar2023		Total Since 15 December 2021	
LGA	Population	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
Break O'Day	6,936	5	0.7	8	1.2	3	0.4	22	3.2	2,662	383.8
Brighton	19,263	12	0.6	23	1.2	20	1.0	36	1.9	13,769	714.8
Burnie	20,441	28	1.4	26	1.3	13	0.6	15	0.7	10,803	528.5
Central Coast	23,278	28	1.2	15	0.6	13	0.6	19	0.8	10,784	463.3
Central Highlands	2,580	3	1.2	0	0.0	1	0.4	2	0.8	338	131.0
Circular Head	8,335	4	0.5	5	0.6	13	1.6	13	1.6	3,131	375.6
Clarence	62,396	63	1.0	85	1.4	99	1.6	90	1.4	32,551	521.7
Derwent Valley	11,114	1	0.1	11	1.0	12	1.1	9	0.8	5,705	513.3
Devonport	26,922	28	1.0	34	1.3	26	1.0	29	1.1	14,575	541.4
Dorset	6,991	10	1.4	2	0.3	8	1.1	16	2.3	2,561	366.3
Flinders	938	2	2.1	0	0.0	5	5.3	4	4.3	343	365.7
George Town	7,213	4	0.6	3	0.4	4	0.6	7	1.0	3,264	452.5
Glamorgan-Spring Bay	5,118	1	0.2	1	0.2	7	1.4	10	2.0	1,537	300.3
Glenorchy	51,233	52	1.0	36	0.7	72	1.4	70	1.4	26,658	520.3
Hobart	56,084	57	1.0	70	1.2	102	1.8	83	1.5	28,797	513.5
Huon Valley	18,809	21	1.1	17	0.9	24	1.3	48	2.6	7,695	409.1
Kentish	6,778	17	2.5	5	0.7	4	0.6	6	0.9	2,363	348.6
King Island	1,654	0	0.0	0	0.0	2	1.2	1	0.6	614	371.2
Kingborough	40,815	46	1.1	63	1.5	72	1.8	51	1.2	20,889	511.8
Latrobe	12,705	12	0.9	9	0.7	27	2.1	20	1.6	5,778	454.8

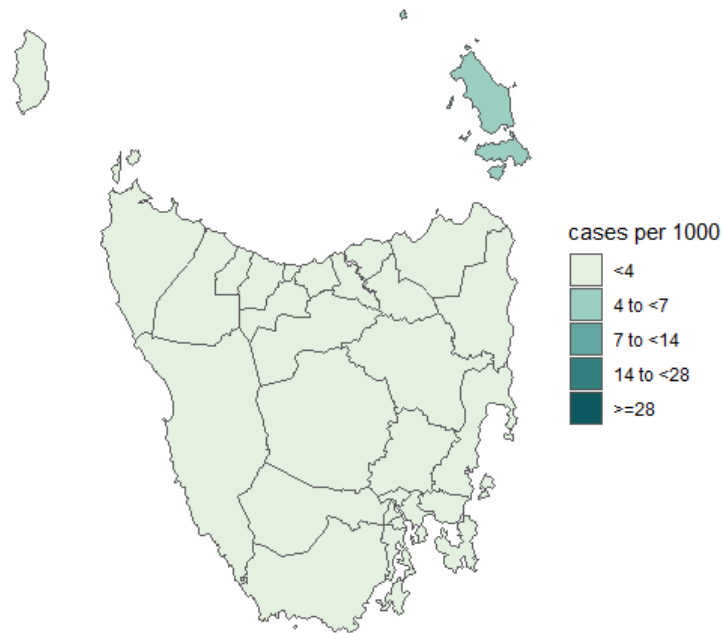
		04Mar2023		11Mar2023		18Mar2023		25Mar2023		Total Since 15 December 2021	
LGA	Population	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
Launceston	71,906	85	1.2	84	1.2	73	1.0	88	1.2	41,662	579.4
Meander Valley	21,153	21	1.0	19	0.9	14	0.7	20	0.9	6,626	313.2
Northern Midlands	14,030	17	1.2	4	0.3	12	0.9	10	0.7	6,629	472.5
Sorell	16,975	13	0.8	27	1.6	20	1.2	20	1.2	8,203	483.2
Southern Midlands	6,838	3	0.4	2	0.3	3	0.4	9	1.3	1,849	270.4
Tasman	2,643	0	0.0	0	0.0	2	0.8	4	1.5	852	322.4
Waratah-Wynyard	14,641	9	0.6	9	0.6	8	0.5	9	0.6	5,873	401.1
West Coast	4,373	4	0.9	3	0.7	0	0.0	6	1.4	1,616	369.5
West Tamar	25,747	20	0.8	18	0.7	25	1.0	21	0.8	8,173	317.4

*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 25 March 2023, the Local Government Area (LGA) with the highest total number of cases per 1,000 people was Brighton with 714.8 cases, followed by Launceston with 579.4 cases.
- In the week ending 25 March 2023, the LGAs with the highest number of reported cases per 1,000 people were Flinders with 4.3 cases and Break O'Day with 3.2 cases per 1,000 people. The greatest numbers of recent cases were reported from the Clarence, Launceston, Hobart and Glenorchy LGAs.

1.4 Weekly number of COVID-19 cases per 1000 people, presented as a metric, by Local Government Area

Case Rate - 12Mar2023 to 18Mar2023



Case Rate - 19Mar2023 to 25Mar2023

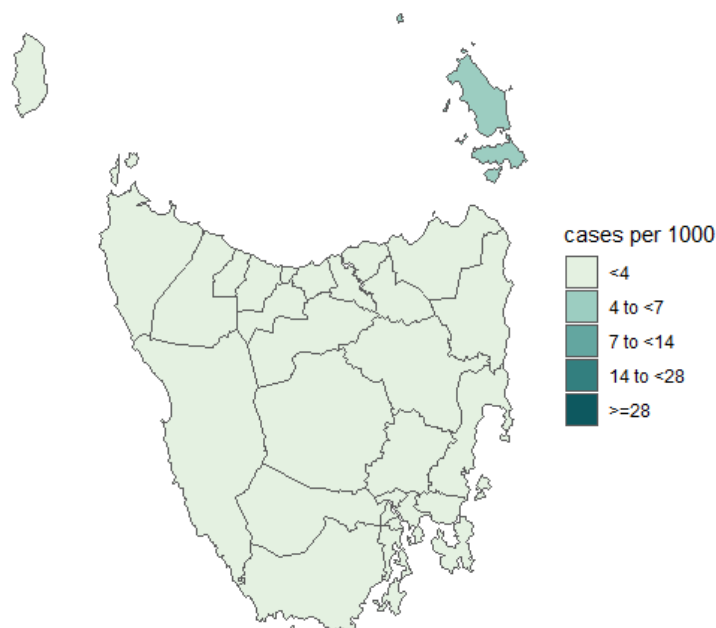


Figure 2: Weekly number of COVID-19 cases per 1,000 people (rate), presented as a metric from low (<4 cases) to very high (>28 cases) for the previous two weeks, by Local Government Area (LGA), in Tasmania.

- In the weeks ending 18 and 25 March 2023, 28 of 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 in Tasmania for each of the last four weeks, and total number and overall number of cases per 1000 people (rate) since 15 December 2021, by age group.

		04Mar2023		11Mar2023		18Mar2023		25Mar2023		Total Since 15 December 2021	
Age Group	Population	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Total Cases	Overall Rate
0-4	30,762	17	0.6	5	0.2	6	0.2	18	0.6	12,947	420.9
5-11	47,316	19	0.4	24	0.5	27	0.6	32	0.7	26,585	561.9
12-15	27,641	20	0.7	19	0.7	21	0.8	29	1.0	16,080	581.7
16-19	25,947	31	1.2	22	0.8	17	0.7	21	0.8	14,671	565.4
20-29	68,883	70	1.0	69	1.0	72	1.0	67	1.0	44,635	648.0
30-39	68,662	66	1.0	76	1.1	81	1.2	113	1.6	45,538	663.2
40-49	67,481	86	1.3	96	1.4	107	1.6	76	1.1	36,908	546.9
50-59	75,657	76	1.0	90	1.2	89	1.2	128	1.7	32,120	424.5
60-69	74,484	82	1.1	81	1.1	118	1.6	120	1.6	24,036	322.7
70-79	53,489	69	1.3	70	1.3	109	2.0	89	1.7	14,914	278.8
80-84	14,342	14	1.0	23	1.6	26	1.8	26	1.8	4,241	295.7
85+	13,245	16	1.2	22	1.7	17	1.3	21	1.6	4,447	335.7
Total	567,909	566	1.0	597	1.1	690	1.2	740	1.3	277,131	488.0
Unknown Age		0.0		0.0		0.0		0.0		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 11813 cases with an interstate or overseas postcode, with 42 occurring the latest reporting week.

- From 15 December 2021 to 25 March 2023, adults aged 30-39 years had the highest total number of cases per 1,000 people with 663.2 cases, followed by young adults aged 20-29 years with 648.0 cases.
- In the week ending 25 March 2023, weekly case numbers were highest in adults aged 50-59 with 128 cases. Adults aged 80-84 years had the highest rate with 1.8 cases per 1,000 people.
- In the weeks ending 18 and 25 March 2023, there were modest increases in case numbers in various age groups including adults aged 30-39 and 50-69 years.

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

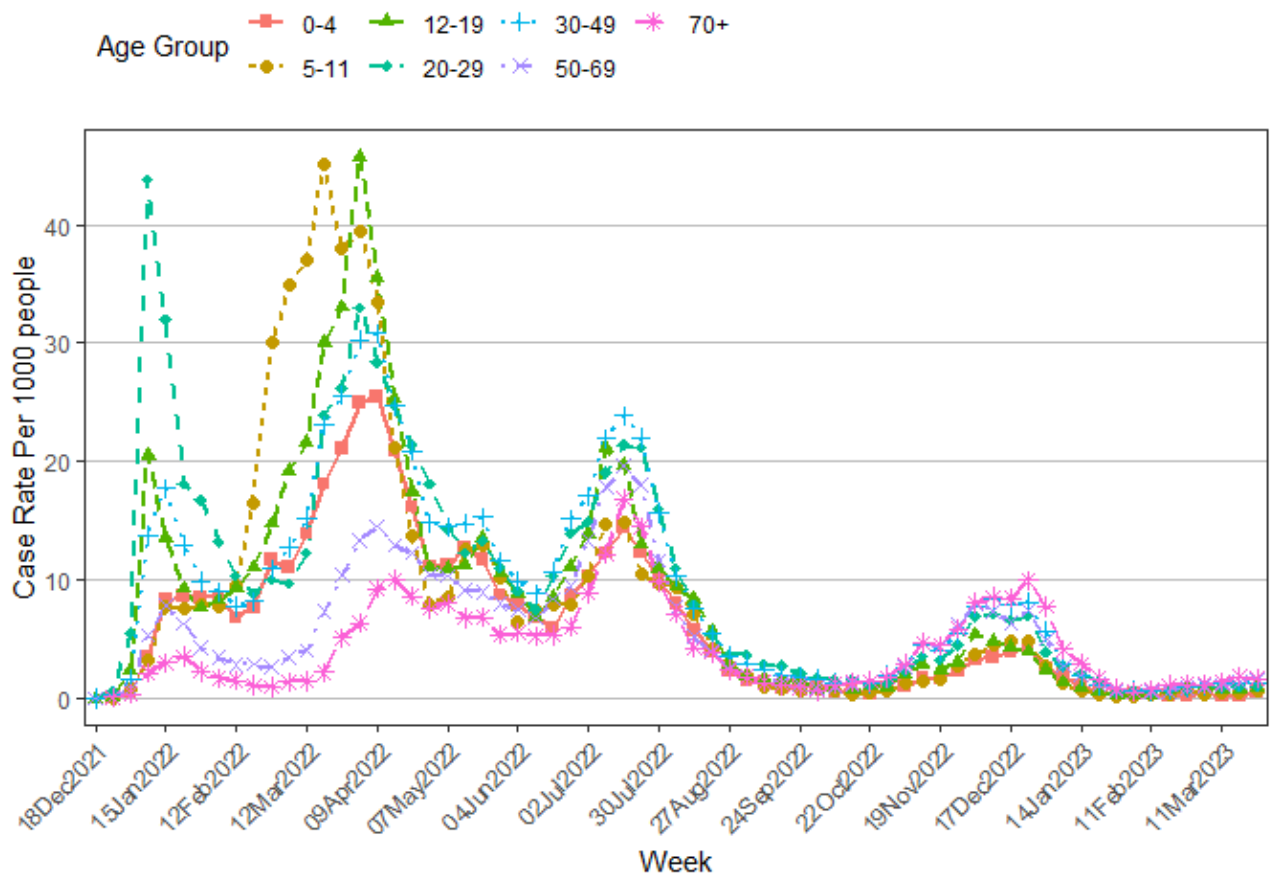


Figure 3: Weekly number of COVID-19 cases per 1000 people (rate) notified in Tasmania since 15 December 2021, by age group.

- 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 18 and 25 March 2023, the number of cases per 1,000 people increased modestly in most broad age groups.

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 Strait Islander status.

Reported Aboriginal and Torres Strait Islander status	04Mar2023	11Mar2023	18Mar2023	25Mar2023	Total since 15 December 2021
People who identify as Aboriginal and/or Torres Strait Islander	23 (4.1%)	34 (5.7%)	28 (4.1%)	40 (5.4%)	16,242 (5.9%)
Non-Indigenous	501 (88.5%)	489 (81.9%)	601 (87.1%)	623 (84.2%)	221,950 (80.1%)
Not Stated	42 (7.4%)	74 (12.4%)	61 (8.8%)	77 (10.4%)	38,939 (14.1%)
Total	566 (100.0%)	597 (100.0%)	690 (100.0%)	740 (100.0%)	277,131 (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 25 March 2023, 16,242 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 an increase in the number of cases in people who identify as Aboriginal and/or Torres Strait Islander from 28 in the week ending 18 March 2023 to 40 in the week ending 25 March 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 December 2021 to 25 March 2023 by PCR and rapid antigen testing (RAT).

Reporting Week	PCR	RAT	Total Recorded Cases
04Feb2023	57 (19.1%)	241 (80.9%)	298
11Feb2023	43 (13.4%)	279 (86.6%)	322
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	67 (9.7%)	623 (90.3%)	690
25Mar2023	76 (10.3%)	664 (89.7%)	740
Total Since 15 December 2021	62,986 (22.7%)	214,145 (77.3%)	277,131

*Case numbers include positive notifications to Public Health Services from pathology laboratories providing PCR results, and self-reported 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 positive COVID-19 case notifications to Public Health Services since 15 December 2021.
- In the week ending 25 March 2023 the proportion of cases diagnosed by PCR testing remained stable at 10.3 per cent compared to 9.7 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

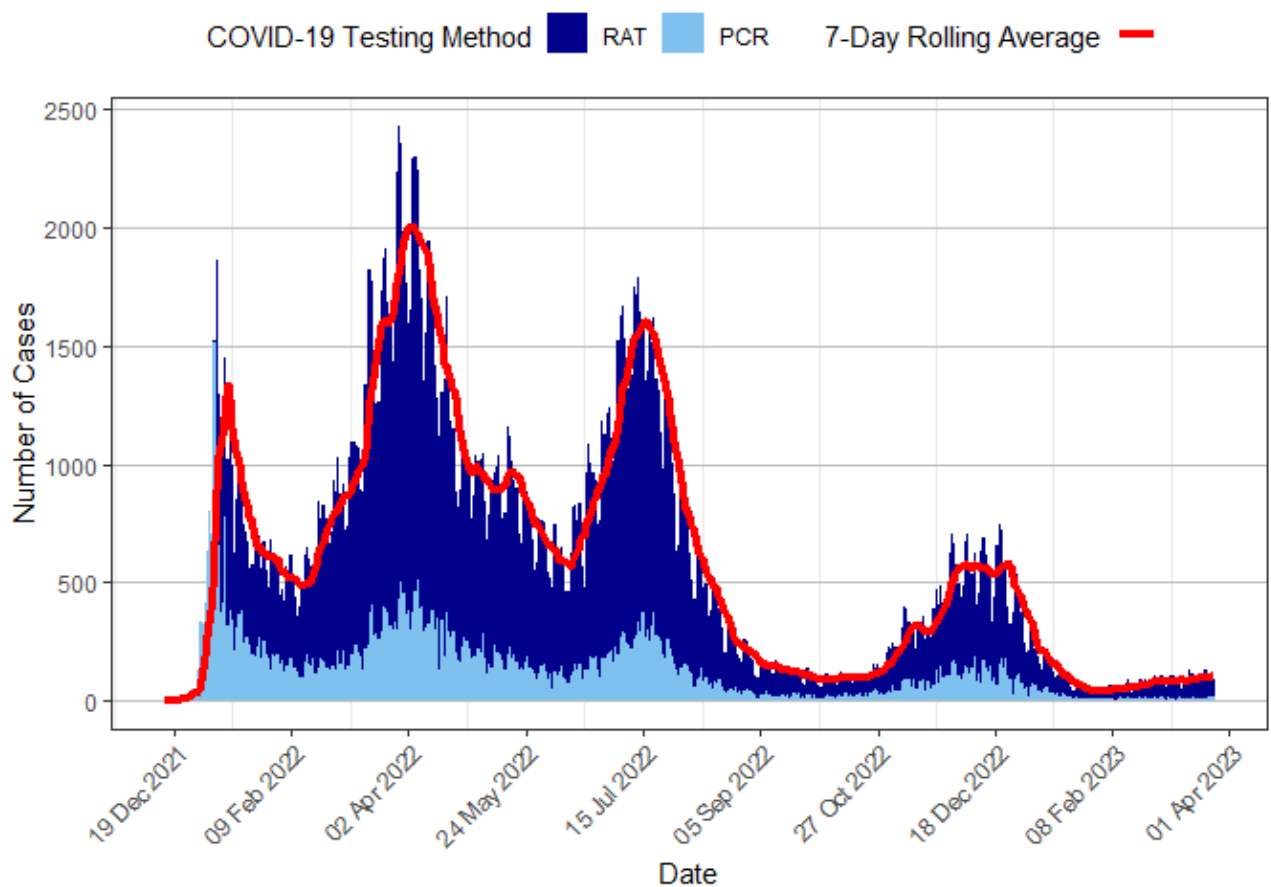


Figure 4. Number of COVID-19 cases in Tasmania notified per day from 15 December 2021 to 25 March 2023, by testing method (PCR and rapid antigen tests).

- 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 99 reported cases per day in the week ending 18 March 2023 to 106 reported cases per day in the week ending 25 March 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 in Tasmania from 15 December 2021 to 25 March 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	2,323	749	32.2
Total	277,131	16,883	6.1

*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 25 March 2023, a total of 16,883 reinfections were identified in Tasmania which accounts for 6.1 per cent of all reported COVID-19 cases.
- Overall, 749 cases have been identified as reinfections so far in March 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 15 December 2021 to 25 March 2023, by age group

Age Group	Total Cases	Total Reinfections	Percent of Cases that were Reinfections
0-4	12,947	510	3.9
5-11	26,585	1,429	5.4
12-15	16,080	812	5.0
16-19	14,671	1,026	7.0
20-29	44,635	3,799	8.5
30-39	45,538	3,364	7.4
40-49	36,908	2,593	7.0
50-59	32,120	1,664	5.2
60-69	24,036	853	3.5
70-79	14,914	449	3.0
80-84	4,241	152	3.6
85+	4,447	232	5.2
Unknown Age	9	0	0.0
Total	277,131	16,883	6.1

- From 15 December 2021 to 25 March 2023, adults aged 20-29 years had the highest proportion of reinfections at 8.5 per cent, and adults aged 70-79 years had the lowest proportion of reinfections at 3.0 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.

Region of Residence	04Mar2023		11Mar2023		18Mar2023		25Mar2023		Since 15 December 2021	
	Tests	% Pos	Tests	% Pos	Tests	% Pos	Tests	% Pos	Total Tests	Overall % Pos
North	436	9.4	427	4.2	347	6.6	393	5.9	109,436	16.6
North-West	380	1.6	371	1.6	360	1.7	401	4.7	81,561	13.3
South	1,209	2.7	1,412	2.6	1,371	2.5	1,274	3.5	258,121	14.2
Tasmania	2,025	4.0	2,210	2.8	2,078	3.0	2,068	4.2	449,129	14.6

*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. The total includes 11 cases with an unknown region.

- From 15 December 2021 to 11 March 2023, a total of 449,129 PCR tests were performed in Tasmania. Of these, 14.6 per cent were positive for COVID-19.
- In the week ending 25 March 2023, the number of PCR tests performed statewide remained stable with 2,068 PCR tests.
- In the week ending 25 March 2023, the percentage of PCR tests positive for COVID-19 decreased to 5.9 per cent in the North and increased to 3.5 per cent in the South and 4.7 per cent in the North-West.

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

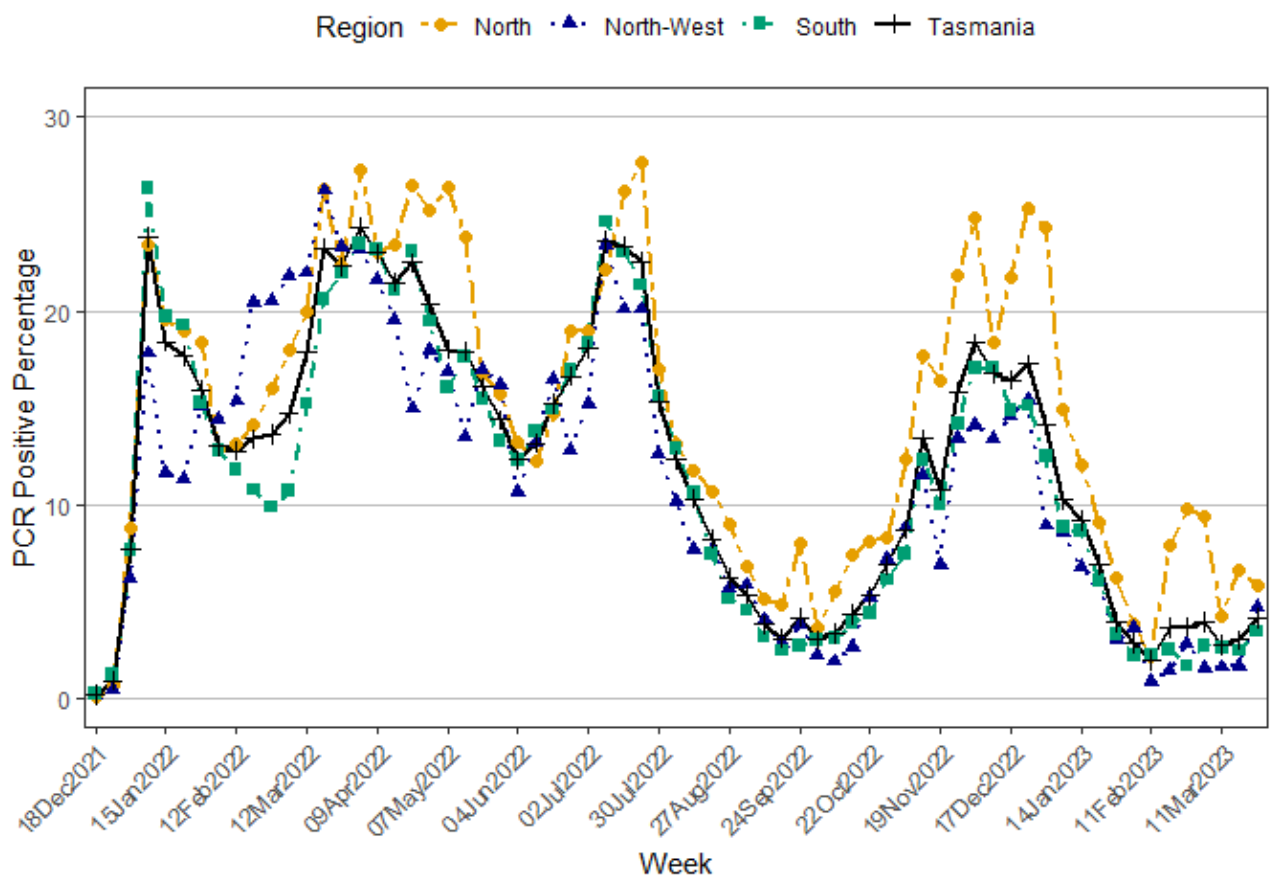


Figure 5: Weekly percentage of PCR tests positive for COVID-19 from 15 December 2021 to 25 March 2023, by region of residence and overall for Tasmanian residents.

- 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 25 March 2023, the percentage of PCR tests that tested positive for COVID-19 increased statewide to 4.2 per cent from 3.0 in the previous week. The percentage of positive PCR tests is highest in the North.

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.

	04Mar2023		11Mar2023		18Mar2023		25Mar2023		Total Since 15 December 2021	
Region of Residence	Tests	Rate	Tests	Rate	Tests	Rate	Tests	Rate	Total Tests	Overall Rate
North	436	2.8	427	2.8	347	2.2	393	2.5	109,436	706.4
North-West	380	3.2	371	3.1	360	3.0	401	3.4	81,561	684.7
South	1,209	4.1	1,412	4.8	1,371	4.7	1,274	4.3	258,121	878.4
Tasmania	2,025	3.6	2,210	3.9	2,078	3.7	2,068	3.6	449,129	790.8

*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. The total includes 11 cases with an unknown region. All rates presented are calculated as PCR tests per 1000 people.

- From 15 December 2021 to 25 March 2023, the overall PCR testing rate per 1,000 people was highest in the South with 878.4 tests, followed by the North with 706.4 tests and the North-West with 684.7 tests.
- In the week ending 25 March 2023, the PCR testing rate was highest in the South with 4.3 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

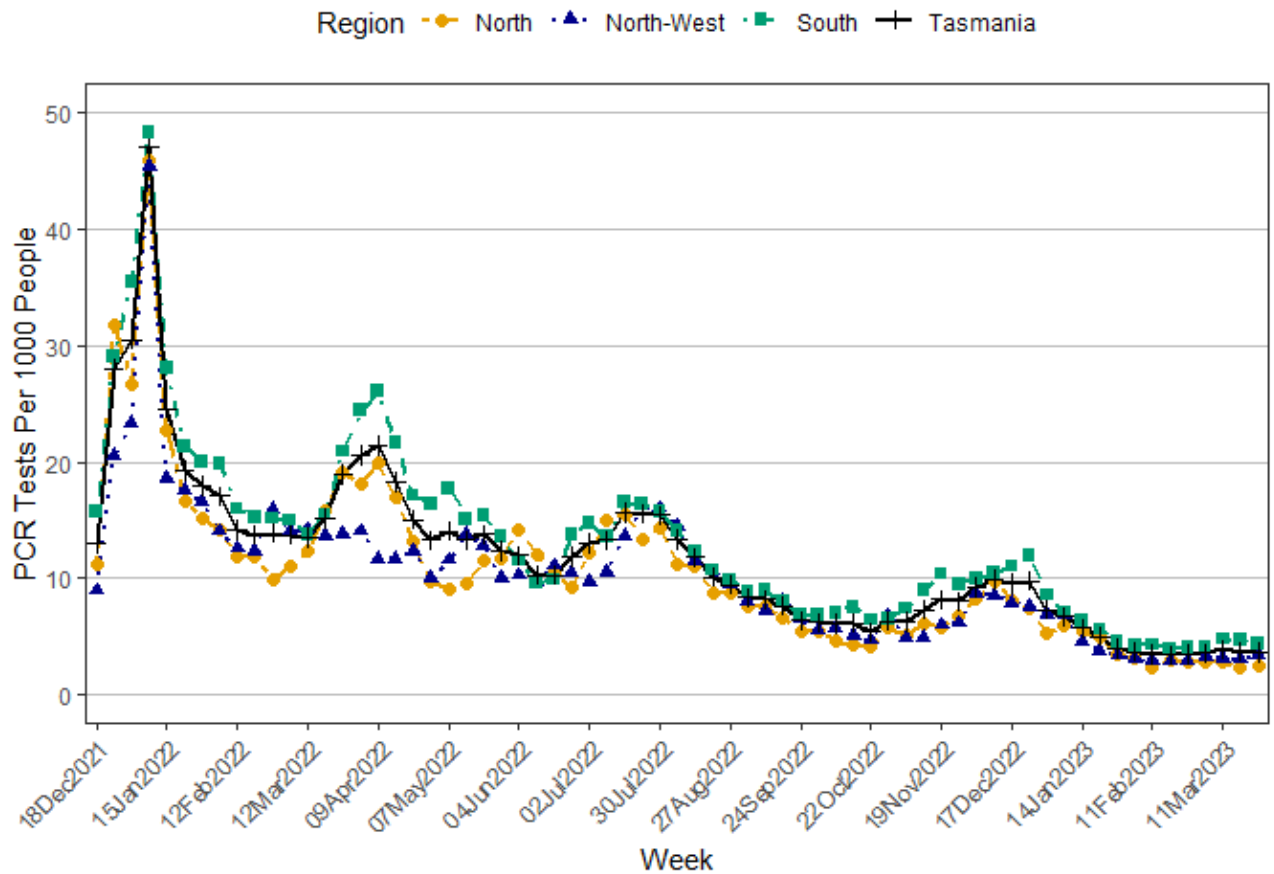


Figure 6: Weekly number of PCR tests per 1000 people (rate) from 15 December 2021 to 25 March 2023, by region of residence and overall for Tasmanian residents.

- The highest 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 18 March 2023, Tasmania

Variant	Week ending			
	25 February	04 March	11 March	18 March
Omicron variants				
BA.2.75 sub-lineages BL,BM,BN,BY,CH and other*	3 (16%)	3 (12%)	4 (14%)	1 (11%)
BA.5 sub-lineage BQ	2 (11%)	0 (0%)	0 (0%)	0 (0%)
BA.2.75 sub-lineage BR.2	5 (26%)	5 (19%)	5 (18%)	3 (33%)
EF.1.1	0 (0%)	1 (4%)	0 (0%)	0 (0%)
EG.1	1 (5%)	0 (0%)	2 (7%)	0 (0%)
Recombinant XBB[^]	1 (5%)	10 (38%)	13 (46%)	5 (56%)
Recombinant XBC[^]	1 (5%)	1 (4%)	1 (4%)	0 (0%)
Recombinant XBF[^]	6 (32%)	6 (23%)	3 (11%)	0 (0%)
Total	19 (100%)	26 (100%)	28 (100%)	9 (100%)

*This includes sub-lineages and sub-sub-lineages of this variant. These have been grouped for simplicity as they are either not a sub-lineage of concern or have been detected in very low numbers during this reporting period. [^]Recombinant 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 sub-lineages, 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 25 March 2023.
- In the fortnight ending 18 March 2023, Omicron Recombinant XBB and Omicron BA.2.75 sub-lineage BR.2 were the most common SARS-CoV-2 variants identified out of the 37 specimens subjected to whole genome sequencing.
- The proportion of isolates typed as the Omicron Recombinant XBB increased significantly from late February to mid-March.

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 25 March 2023.

Reporting Week	All Hospital Admissions with COVID-19	Hospital Admissions due to COVID-19	Intensive Care Admissions	Deaths
04Feb2023	23	6	1	0
11Feb2023	24	6	3	1
18Feb2023	40	10	1	3
25Feb2023	42	7	2	2
04Mar2023	28	12	0	3
11Mar2023	41	9	1	2
18Mar2023	26	12	0	3
25Mar2023	45	18	0	0
Total Since 15 Dec 2021	3,603	1,287	124	248

*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 25 March 2023, 3,603 reported COVID-19 cases were admitted to hospital. Of these, 1,287 reported cases (35.7 per cent) were admitted to hospital due to COVID-19.
- From 15 December 2021 to 25 March 2023, 124 reported COVID-19 cases were admitted to ICU.
- From 15 December 2021 to 25 March 2023, 248 reported COVID-19 cases died where COVID-19 caused or contributed to their death.
- In the fortnight ending 25 March 2023, 71 cases were admitted to hospital with COVID-19, including 30 admitted due to COVID-19. No 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 25 March 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	154 (4.3%)	88 (6.8%)	7 (5.6%)	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	178 (4.9%)	36 (2.8%)	10 (8.1%)	0 (0.0%)
30-39	206 (5.7%)	48 (3.7%)	4 (3.2%)	1 (0.4%)
40-49	189 (5.2%)	64 (5.0%)	8 (6.5%)	4 (1.6%)
50-59	314 (8.7%)	112 (8.7%)	22 (17.7%)	11 (4.4%)
60-69	494 (13.7%)	164 (12.7%)	26 (21.0%)	29 (11.7%)
70-79	801 (22.2%)	301 (23.4%)	33 (26.6%)	50 (20.2%)
80-84	510 (14.2%)	208 (16.2%)	7 (5.6%)	49 (19.8%)
85+	662 (18.4%)	251 (19.5%)	4 (3.2%)	104 (41.9%)
Total	3,603	1,287	124	248

*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 25 March 2023, 1,036 reported cases aged 50 years and older were hospitalised due to COVID-19. These comprised 80.5 per cent of all hospitalisations due to COVID-19.
- From 15 December 2021 to 25 March 2023, 92 reported cases aged 50 years and older with COVID-19 were admitted to ICU. These comprised 74.2 per cent of all ICU admissions with or due to COVID-19.
- From 15 December 2021 to 25 March 2023, 243 reported cases aged 50 years and older died where COVID-19 caused or contributed to their death. These comprised 97.9 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 25 March 2023, by age group.

Age Group (years)	04Mar2023	11Mar2023	18Mar2023	25Mar2023	Total Since 15 December 2021
0-4	1 (5.9%)	3 (60.0%)	1 (16.7%)	1 (5.6%)	154 (1.2%)
5-11	0 (0.0%)	2 (8.3%)	0 (0.0%)	0 (0.0%)	34 (0.1%)
12-19	1 (2.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	61 (0.2%)
20-29	0 (0.0%)	2 (2.9%)	0 (0.0%)	1 (1.5%)	178 (0.4%)
30-39	3 (4.5%)	1 (1.3%)	2 (2.5%)	3 (2.7%)	206 (0.5%)
40-49	3 (3.5%)	1 (1.0%)	0 (0.0%)	2 (2.6%)	189 (0.5%)
50-59	3 (3.9%)	3 (3.3%)	0 (0.0%)	4 (3.1%)	314 (1.0%)
60-69	5 (6.1%)	2 (2.5%)	0 (0.0%)	10 (8.3%)	494 (2.1%)
70-79	4 (5.8%)	9 (12.9%)	10 (9.2%)	10 (11.2%)	801 (5.4%)
80-84	4 (28.6%)	13 (56.5%)	3 (11.5%)	7 (26.9%)	510 (12.0%)
85+	4 (25.0%)	5 (22.7%)	10 (58.8%)	7 (33.3%)	662 (14.9%)
Total	28 (4.9%)	41 (6.9%)	26 (3.8%)	45 (6.1%)	3603 (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 25 March 2023, 3,603 reported COVID-19 cases were hospitalised. These 3,603 cases comprised 1.3 per cent of all COVID-19 cases in Tasmania.
- From 15 December 2021 to 25 March 2023, the highest proportion of hospitalised cases was in adults aged 85 years and older. In this age group, 14.9 per cent all cases were admitted to hospital.
- In the week ending 25 March 2023, 45 reported COVID-19 cases were hospitalised, comprising 6.1 per cent of all COVID-19 cases notified to Public Health Services during that week.
- In the week ending 25 March 2023, most persons hospitalised were adults aged 60 year and older.
- 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 25 March 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	31,630	436	183	20	41
1 dose	12,897	83	31	3	5
2 or more doses	222,097	2,971	1,030	95	200
Unknown	10,507	113	43	6	2
Total	277,131	3,603	1,287	124	248

*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 25 March 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 25 March 2023, the death rate in reported cases who were unvaccinated was 1.44 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 25 March 2023, in Tasmania by region of residence.

Region	04Mar2023	11Mar2023	18Mar2023	25Mar2023	Total Since 15 December 2021
North	1	0	2	0	59
North-West	0	0	0	0	50
South	2	2	1	0	138
Interstate	0	0	0	0	1
Total	3	2	3	0	248

*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 25 March 2023, 248 reported cases died in Tasmania where COVID-19 caused or contributed to their death. Of these, 59 reported cases lived in the North, 50 reported cases lived in the North-West and 138 reported cases lived in the South. One reported case who died stated residential address as interstate.
- In the week ending 25 March 2023, no reported cases died where COVID-19 caused or contributed to death.



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