

MINISTRY OF INTERNALLY DISPLACED PERSONS FROM THE OCCUPIED TERRITORIES, LABOUR, HEALTH AND SOCIAL AFFAIRS OF GEORGIA



GEORGIA Brief 2020

NCDC and COVID-19 Response in Georgia

Pandemic of COVID-19 caused by the novel coronavirus 2 (SARS-CoV-2) has been spreading rapidly across the globe. To mitigate potential harm associated with COVID-19, provide timely response and ensure stability for all sectors, the Government of Georgia (GoG) has initiated an effective multi-sectoral collaborative work at the earliest stage. In January 2020, the government adopted Decree #164, "Approval of Measures to Prevent the Possible Spread of the New Coronavirus in Georgia and Approval of an Emergency Response Plan for Cases Caused by COVID-19" and established a national Multisectoral Committee, highest responsible body for the crisis response at the national level. Under the Operational Response Plan approved by the GoG, each participant ministry and Governmental entity have clearly defined roles and responsibilities of the COVID-19 response. National Center for Disease Control and Public Health (NCDC) is a

The National Center for Disease Control and Public Health started testing for COVID-19 on 30 January, registered the first incidence on 26 February, the first recovery on 16 March and the first death caused by COVID-19 on 5 April, 2020. NCDC is responsible for addressing public health preparedness and emerging infectious disease response. Moreover, it leads a consistent efforts to prevent threats from COVID-19 through research and the translation of scientific information into practical applications and recommendations. Therefore. a case-based surveillance is established in line with a massive expansion of country-wide target diagnostic tests with a steady growth in a public health workforce and adoption contact tracing with the modern approaches. In accordance with the international standards, Georgia considers all laboratory confirmations of SARS-CoV-2, irrespective of the presence and severity of clinical symptoms, as COVID-19 cases.

		Accessibility		
Prioritizing civic engagement and their demand	Evidence-based decisions	Equity and equality	Transparency	Multisectorial collaboration

member of the committee.

Ensure harmonized work of public health representatives and adequate response to epidemic

Provide real-time surveillance, conducting active contact tracing and follow up Improve community-based surveillance without severe illness, or contacts to known cases

Implement recommended containment measures

Expand country's laboratory testing and reporting capacity and assure quality Monitor and report countrywide epid-situation

Provide reporting of COVID-19 associated statistics, including testing data

Prevent, assess and control infections in healthcare settings

Contribute to country's risk communication approach with respect to COVID-19

Provide sero-prevalence surveys to study the impact of the Covid-19 epidemic in country

Figure 2 NCDC's responsibility in the COVID-national response

The NCDC monitors the evolution of COVID-19 and has publishing daily and consolidated reports since March on its media-channels. As of 9 December, a total 1,274,460 PCR, 371,075 antigen and 262,012 antibody tests have been provided.









COVID-19 18.12.2020

As part of control and monitoring, NCDC is observing important features of outbreaks: daily and cumulative incidence (per 100,000 population), death rate and R-values, which are reflecting the level of risk and linked to the country's Alert Level System. The reported effective R-values have been fluctuating around 1. For the middle of autumn numbers of infected persons were very high and this resulted in a higher number of new infections every day, respectively influencing R-value. Decrease of R-value is associated with new mandates to control distance and mobility.



Figure 4 Georgia's Alert Level System



175EPTEMBER 24 SEPTEMBER

Figure 5 Estimated effective R in Georgia, IHME

3 SEPTEMBER 105EPTEMBER

28 AUGUST

20 AUGUST

8 AUGUST

1.02 0.99 0.94,0.96 1.09 1.09 1.12 1.18 1.18 1.19 1.12

1 OCTOBER

15 OCTOBER

29 OCTOBER 5 NOVEMBER

80CTOBER

Under the NCDC administration is the R. Lugar Center for Public Health Research which is the countrywide referral laboratory. COVID-19 testing is performed by a naso-pharynx and throat test or by a blood test, and analyzed using either PCR-technology, or antigen or antibody testing. Initially testing took place in 4 laboratories. Later testing sites were expanded, considering geographical accessibility. Nowadays, more than 30 public and private laboratories are engaged in the

COVID-detection and confirmation, submitting electronically results directly to specially create countrywide LabCov Registry portal. This electronic module for laboratory examination was developed to ensure availability of comprehensive information on COVID-19 testing, which collects and continuously improves data about COVID -19 testing. Information for the module is supplied by inpatient and outpatient service providers, which either take test material, or conduct rapid testing or laboratory research; municipal / public healthcare agencies; relevant units of the NCDC; Lugar Laboratory or labs of the other medical facilities.

28 NOVEMBER

20 NOVEMBER

Supervision of compliance with standards of testing is provided routinely as part of continuous quality assessment of laboratories performance.



Figure 6 Number of provided tests in Georgia as of 8.12.20201

As the part of pandemic response to limit and delay the COVID-19 outbreak, NCDC is elaborating and providing changes in testing criteria. Since the increased level of community transmission, there is an increasingly diffuse spread of SARS-CoV-2 without traceable transmission chains. Thus, large-scale population testing was recommended by the NCDC, using both PCR and antigen based testing.

Persons under the standard case definition				
Contacts of confirmed cases				
Patients and medical personnel of respective medical facilities				
Any patient with the diagnosed pneumonia or fever				
All persons who have been diagnosed with early-stage tuberculosis				
Emergency medical personnel and disaster brigade staff				
Personnel of inpatient hospital reception, intensive care units				
Personnel of quarantine spaces				
Center's epidemiologists and staff of COVID-19 PCR Laboratory				
Enrolled or prospective beneficiaries and staff of special noctidial care				
facilities				
Customs officers and border police				
People with history of travelling / staying in the outbreaks				
Figure 7 List of priority persons subject to mandatory testing				

In addition of reporting diagnostic tests per capita, NCDC is observing testing positivity rate to plan response measures accordingly.



performing the whole genome sequencing of SARS-COV-2 circulating in Georgia. The study utilized next-generation sequencing (NGS) based technology and bioinformatics. This is the first NGS related study of COVID-19 in the region. The overall objective of it is genetic characterization of the SARS-COV-2 virus, causative agent of severe, acute respiratory syndrome. The main

R. Lugar Center for Public Health Research is

Figure 8 Dynamic of PCR testing positivity rate

¹ In the Figure 1, numbers for March-November contains only PCR testing information. Starting from December country updated guideline and included antigen based test confirmation as well

goal is the whole genome sequencing and phylogenetic analysis of strains of SARS-COV-2 virus circulating in Georgia.



In case of each confirmed / suspected case epidemiological investigation is conducted and telephone or face-toface interviews are provided about contacts, history of possible transmission, existing symptoms and other characteristics. Outbreak clusters are identified through

epidemiological investigations and usually additional in-depth investigation is carried out. In order to followup on the contacts, they are self-isolated or taken to a special quarantine space and further monitored. Information on all COVID-19 infected people, disease-specific notes, case-related laboratory data are

uploaded in the electronic Integrated Disease Surveillance System (EIDSS), which aims to strengthen and support monitoring and prevention of human and animal diseases within the scope of the One Health Concept and ensures application of International Health Regulations (IHR) 2005.

Apartofabove-mentionedresponsibilities,NCDCisfollowingmorbidityandmortalitytrendsand



observing possible excess mortality. As for December, the frequency of recoveries have a positive dynamic over the infected new cases and death.

a part of ensuring response As measures, NCDC is regularly providing population-based sero-epidemiological surveys to obtain information on the proportion of the population exposed and the antibodies level as a marker of total or partial immunity, to estimate the proportion of the population that remains susceptible to the virus. Since the detecting of first case in Georgia, several studies were provided in selected municipalities and strategic facilities (hospitals, blood banks, civic agency, etc). As for December, 14.9% of total Georgian population is estimated to be infected with COVID-19 (IHME).

Along with the monitoring and controlling epid-situation, NCDC is providing projections with possible



Figure 9 Analysis of COVID-19 distribution in two municipalities, 22 – 26.05.2020

scenarios to have appropriate planning. In the frame of long-lasting collaboration with the Institute of Health Metrics and Evaluation (IHME), NCDC is disseminating country related COVID-19 models. This information is a part of strategic and operative planning of the Multi-sectoral Committee.



Figure 10 Selected characteristics in Georgia, IHME, 3.12.2020

For the risk communication, NCDC is disseminating information on COVID-19 to raise public awareness, share



information about symptoms, the spread of the disease, detection and testing related measures and prevention strategies, quarantine regulations and policy response. Meanwhile, social media campaign has intensified, supporting visual materials were prepared and shared among communities, including ethnic minorities.

Special hotline with respect to COVID-19 issued began functioning on January 2020. Georgia is part of COVAX-platform. As the main organization, responsible for countrywide vaccination and immunization, NCDC is engaged in collaboration for the development national strategic plan and operational activities to obtain and implement vaccine against COVID-19 in Georgia.



საქართველოში COVID-19-ის ვაქცინაციის დანერგვის უწყებათაშორისი საკოორდინაციო კომისიის შექმნის თაობაზე

 "საქართველოს მთავრობის სტრუქტურის, უფლებამოსილებისა და საქმიანობის წესის შესახებ" საქართველოს კანონის 29-ე მუხლის შესაბამისად, შეიქმნას COVID-19-ის ვაქვინაციის პოლიტიკის განსაზღვრისა და დანერგვის ხილშეწყობისთვის საქართველოში COVID-19-ის ვაქვინაციის დანერგვის

In respect of the capacity enhancement for the COVID-19 response, NCDC envisioned short- and long-term tasks.



As COVID-19 shows, we are all in this together as pandemics do not respect national boundaries. Only a united front stops a pandemic, and for that

No one is safe until everyone is safe!





Learn to live with COVID-19!



INISTRY OF INTERNALLY DISPLACEC IRSONS FROM THE OCCUPIED IRRITORIES, LABOUR, HEALTH AND ICIAL AFFAIRS OF GEORGIA



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