



Coronavirus Disease 2019 (COVID-19)

Daily Situation Report of the Robert Koch Institute

13/11/2020 - UPDATED STATUS FOR GERMANY

Confirmed cases		7-day incidence (7-di)		DIVI -Intensive care register
Total ¹	Active cases ²	Total population	No. of districts with 7-di > 50/100.000 pop	Cases currently in ICU
+ 23,542 (751,095)	+ 9,400 (257,200)	140 cases/ 100,000 pop	- 1 (371)	+ 113 (3,299)
Recovered ³	Deaths	People ≥ 60 years	No. of districts with 7-di > 100/100.000 pop	Ended treatment; thereof deceased [%]
+ 13,900 (481,700)	+ 218 (12,200)	97 cases/ 100,000 pop	+ 1 (270)	+ 689 12%

Numbers in brackets show cumulative values

¹ The difference to previous day relates to data entry at RKI; due to delay of data transmission former cases may be included.

² Active cases were calculated from the number of transmitted cases minus deaths and the estimated number of recovered cases.

³ The algorithm for estimation of recovered cases considers information about disease onset and hospitalization but not for late effects because such data were not recorded regularly.

COVID-19 cases are notified to the local public health department in the respective districts, in accordance with the German Protection against Infection Act (IfSG). The data are further transmitted through the respective federal state health authority to the Robert Koch Institute (RKI). This situation report presents the uniformly recorded nationwide data on laboratory-confirmed COVID-19 cases transmitted to RKI.

– Changes since the last report are marked *blue* in the text –

Summary (as of 13/11/2020, 12:00 AM)

- Currently, an increase of transmissions in the population in Germany can be observed. Therefore, the entire population is strongly encouraged to commit itself to infection prevention and control.
- The nationwide incidence over the past 7 days is **140** cases per 100,000 population.
- Since the beginning of September, the proportion of cases in older age groups has been increasing again. The 7-day incidence of people ≥ 60 years is currently **97** cases/100.000 population.
- The 7-day incidence in Bavaria, Berlin, Bremen, Hesse, North Rhine-Westphalia, Saarland and Saxony is higher than the national total 7-day incidence.
- Almost all districts have a high 7-day incidence. Only **9** districts have an incidence ≤25 cases/100,000 population. As of today, **32** districts have an incidence of >25-50 cases /100,000 population, **101** districts have an incidence of >50-100 cases/100,000 population, **270** districts have an incidence of >100 cases/100,000 population and of these, **18** districts have an incidence of >250 cases/100,000 population.
- The nationwide increase is caused by increasingly diffuse transmission, with numerous clusters in households, but also in community institutions, nursing and long-term care homes, as well as in occupational settings or related to religious events **For a large proportion of cases the transmission setting remains unclear.**
- The number of COVID-19 patients requiring intensive care has increased in the past 2 weeks from **1,839** patients on **30/10/2020** to **3,299** patients on **13/11/2020**.
- On **13/11/2020**, **23,542** new laboratory-confirmed COVID-19 cases and **218** new deaths associated with COVID-19 have been transmitted to the RKI in Germany.

Epidemiological Situation in Germany

In accordance with the international standards of WHO¹ and ECDC², RKI considers all laboratory confirmations of SARS-CoV-2, irrespective of the presence and severity of clinical symptoms, as COVID-19 cases. Thus, in the following report the term "COVID-19 cases" covers acute SARS-CoV-2 infections as well as cases of COVID-19 disease.

General current assessment

After a temporary stabilisation of case numbers at a higher level in late August and early September, there is currently an increase of transmission within the population in all federal states. The proportion of COVID-19 cases in older age groups is currently increasing. The reported R-values were stable well above 1 since the beginning of October. Over the past few days the R-value has been fluctuating and is currently **around** 1. This means that, on average, each person infected with SARS-CoV-2 infects another person. As the number of infected persons is currently very high in Germany, this means that there is still a high number of new cases every day.

The data table on page 1 was adapted **on November 11**. The aim of the change is to focus on the current situation primarily. Therefore, changes to the previous day are given priority. Reporting data from other surveillance systems will become more visible. In particular data on ICU capacities are of great importance in the current situation.

There are outbreaks in various districts throughout Germany, which are associated with different situations, including households and in old people's and nursing homes. In addition, in many districts there is an increasingly diffuse spread of SARS-CoV-2, without traceable transmission chains.

Currently, however, the number of illnesses among older people is on the rise again. As they more often have a severe course due to COVID-19, the number of serious cases and deaths is also increasing. These can be avoided if we prevent the spread of the SARS-CoV-2 virus with the help of infection control measures.

It is therefore still necessary for the entire population to be committed to infection prevention and control, e.g. by consistently observing rules of distance and hygiene - also outdoors -, by ventilating indoor spaces and, where indicated, by wearing a community mask correctly. Crowds of people - especially indoors - should be avoided.

¹ World Health Organization, https://www.who.int/publications/i/item/WHO-2019-nCoV-Surveillance_Case_Definition-2020.1

² European Centre for Disease Prevention and Control, <https://www.ecdc.europa.eu/en/covid-19/surveillance/case-definition>

Geographical distribution of cases

Epidemiological analyses are based on validated cases notified electronically to the RKI in line with the Protection Against Infection Law (Data closure: 12:00 AM daily). Since January 2020, a total of **751,542 (+23,542)** laboratory-confirmed cases of COVID-19 have been reported to and validated by the RKI (Table 1).

Table 1: Number and cumulative incidence (per 100,000 population) of laboratory-confirmed COVID-19 cases and deaths for each federal state electronically reported to RKI, Germany (13/11/2020, 12:00 AM). The number of new cases includes positive cases notified to the local health department at the same day, but also at previous days.

Federal State	Total number of cases	Number of new cases*	Cases/100,000 pop.	Cases in the last 7 days	7-day incidence per 100,000 pop.	Number of deaths	Number of deaths/100,000 pop.
Baden-Wuerttemberg	110,633	2,984	997	14,909	134.3	2,225	20.0
Bavaria	148,882	4,177	1,134	23,714	180.7	3,081	23.5
Berlin	45,106	1,960	1,229	7,003	190.8	334	9.1
Brandenburg	11,852	369	470	1,580	62.7	230	9.1
Bremen	7,803	238	1,145	1,184	173.8	93	13.7
Hamburg	18,914	659	1,024	2,104	113.9	310	16.8
Hesse	61,055	1,684	971	10,962	174.3	836	13.3
Mecklenburg-Western Pomerania	4,165	255	259	705	43.8	36	2.2
Lower Saxony	51,770	1,603	648	7,597	95.0	882	11.0
North Rhine-Westphalia	191,011	5,873	1,064	29,595	164.9	2,581	14.4
Rhineland-Palatinate	30,250	1,292	739	5,629	137.5	352	8.6
Saarland	9,452	176	958	1,366	138.4	208	21.1
Saxony	31,538	1,438	775	5,922	145.4	474	11.6
Saxony-Anhalt	7,641	274	348	1,266	57.7	105	4.8
Schleswig-Holstein	10,924	209	376	1,546	53.2	213	7.3
Thuringia	10,099	351	473	1,688	79.1	240	11.2
Total	751,095	23,542	903	116,770	140.4	12,200	14.7

Quality checks and data cleaning by the health authorities and regional offices can lead to corrections to cases previously transmitted (e.g. detection of duplicate reports). This can occasionally lead to negative values for the number of new cases.

Distribution of cases over time

The first COVID-19 cases in Germany were notified in January 2020. Figure 1 shows COVID-19 cases transmitted to RKI according to date of illness onset from 01/03/2020 onwards. Of these cases, the onset of symptoms is unknown for **391,285** cases (52%) thus their date of reporting is provided in Figure 1.

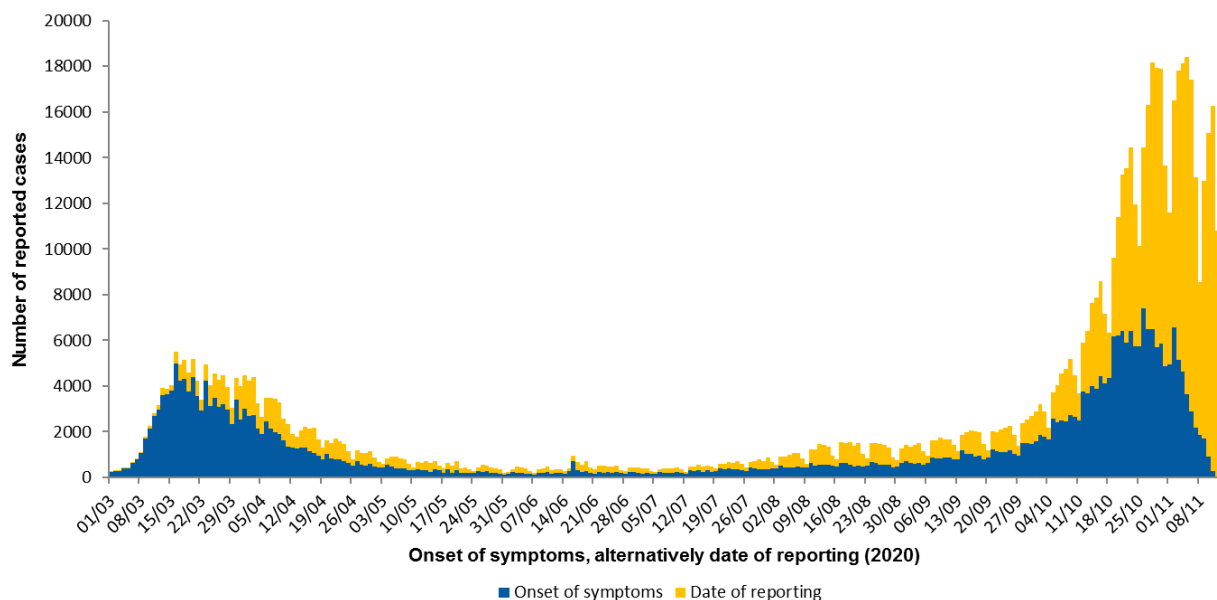


Figure 1: Number of COVID-19 cases in Germany electronically reported to the RKI by the date of symptoms onset or – if unknown – alternatively by date of reporting since 01/03/2020 (13/11/2020, 12:00 AM).

Occupation, accommodation or care in facilities

In accordance with the Protection Against Infection Act (Infektionsschutzgesetz, IfSG), the RKI receives information on occupation, accommodation or care in a facility relevant for infection control for reported COVID-19 cases.

Since information on occupation, accommodation or care in these facilities is missing in 56% of cases, the numbers of cases working, accommodated or cared for in these facilities reported here should be considered minimum values. Among the COVID-19 cases reported from the above-mentioned facilities, the proportion of cases that actually acquired their infection in these facilities is unknown.

The number of COVID-19 cases was highest among persons cared for or employed in care facilities according to § 36 IfSG, among persons employed in medical facilities according to § 23 IfSG and among persons cared for in educational facilities according to § 33 IfSG (Table 2). The number of deaths was particularly high among persons cared for in facilities according to §§ 23 and 36.

Among the cases reported as working in medical facilities (§ 23 IfSG), 74% were female and 26% male. Their median age was 40 years. The high number of cases among people cared for or working in various care facilities (§ 36 IfSG) is consistent with numerous reported outbreaks, especially in nursing homes. The high number of cases among persons working in the food sector (§ 42 IfSG) is largely due to outbreaks in meat processing plants.

Table 2: Notified COVID-19-cases according to possible occupation, accommodation or care in facilities relevant for transmission of infectious diseases according to the Protection Against Infection Act (IfSG), reported to RKI (746,743* cases, no data available for 421,192 cases; 13/11/2020, 12:00 AM)

Facility according to		Total	Hospitalised	Deaths	Recovered (estimate)
§ 23 IfSG (e.g. hospitals, outpatient clinics and practices, dialysis clinics or outpatient nursing services)	Cared for / accommodated in facility	6,244	3,979	836	4,400
	Occupation in facility	21,426	817	25	19,700
§ 33 IfSG (e.g. day care facilities, kindergartens, facilities for after school care, schools or other educational facilities, children's homes, holiday camps)	Cared for / accommodated in facility*	18,422	216	3	15,300
	Occupation in facility	8,829	272	9	7,600
§ 36 IfSG (e.g. facilities for the care of older, disabled, or other persons in need of care, homeless shelters, community facilities for asylum-seekers, repatriates and refugees as well as other mass accommodation and prisons)	Cared for / accommodated in facility	25,478	5,061	4,138	19,000
	Occupation in facility	14,391	552	47	13,200
§ 42 IfSG (e.g. meat processing plants or kitchens in the catering trade, in inns, restaurants, canteens, cafés, or other establishments with or for communal catering)	Occupation in facility	8,486	315	5	7,800
Neither cared for, accommodated in nor working in a facility		222,275	23,476	4,183	196,000

*for care according to § 33 IfSG only cases under 18 years of age are taken into account, as other information may be assumed to be incorrect. Due to changes in data registration, not all data entries for cases ascertained in the most recent version of the surveillance software could be taken into account. This will be corrected in the coming days.

Outbreaks

An increased incidence of >25 cases in 7 days/100,000 population was reported for almost every district (403 of 412). By now, 270 urban and rural districts have an incidence of over 100 cases/100,000 population, including 18 districts with an incidence of over 250 cases/100,000 population; additionally, 101 districts have a 7-day incidence of >50-100 cases/100,000 population and 32 districts have a 7-day incidence of > 25-50 cases/100,000 population. The dashboard (<https://corona.rki.de>) shows all affected districts.

In most districts the transmission is diffuse, with several cases clustering in households. Many small outbreaks in retirement and nursing homes, in hospitals and facilities for asylum seekers and refugees, and community facilities, kindergartens and schools, various occupational settings and in the context of religious gatherings continue to contribute to the increase of incidence.

Estimation of the reproduction number (R)

The reproduction number, R, is defined as the mean number of people infected by one infected person.

The estimation of the R-value is based on the so-called nowcasting (Figure 2), a statistical procedure that shows the development of the number of cases after the onset of the disease and also forecasts it for the last few days. This forecast is subject to uncertainty, which is also reflected in the prediction intervals given for the R-value. After other case reports have been received at the RKI, the R-value is adjusted for the past days and, if necessary, corrected upwards or downwards. In recent weeks, values reported at the beginning of a week were typically corrected slightly upwards. They had thus slightly underestimated the real COVID-19 events in Germany. Values estimated towards the end of a week were more stable. The currently estimated course of the R-value is shown in Figure 3.

4-day R-value	7-day R-value
0.92	0.99
(95%-prediction interval: (0.72 – 1.13))	(95%- Prädiktionsintervall: 0.88 – 1.10)

Delays in reporting of case numbers at weekend days can lead to cyclical fluctuations of the 4-day R-value. The 7-day R-value is less affected because all week days are used to determine the value.

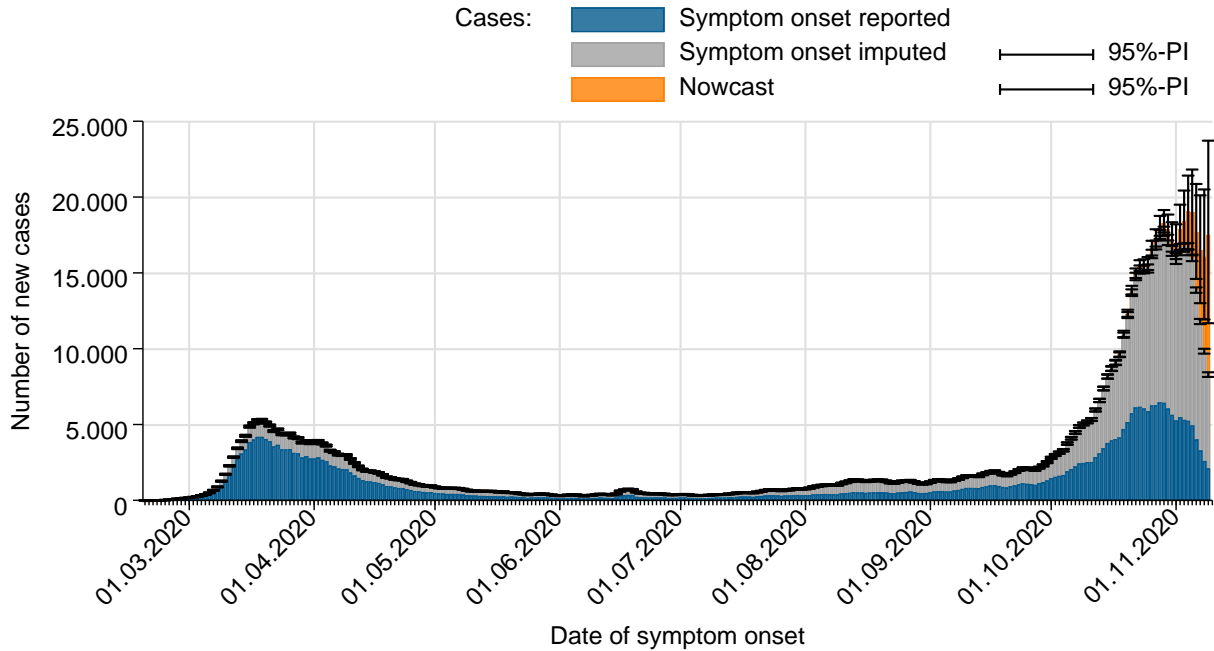


Figure 2: Number of notified COVID-19 cases with known date of illness onset (dark blue), estimated date of illness onset for cases without reported date of onset (grey) and estimated number of not yet notified cases according to illness onset electronically reported to RKI (orange) (as of 13/11/2020, 12 AM, taking into account cases up to 09/11/2020).

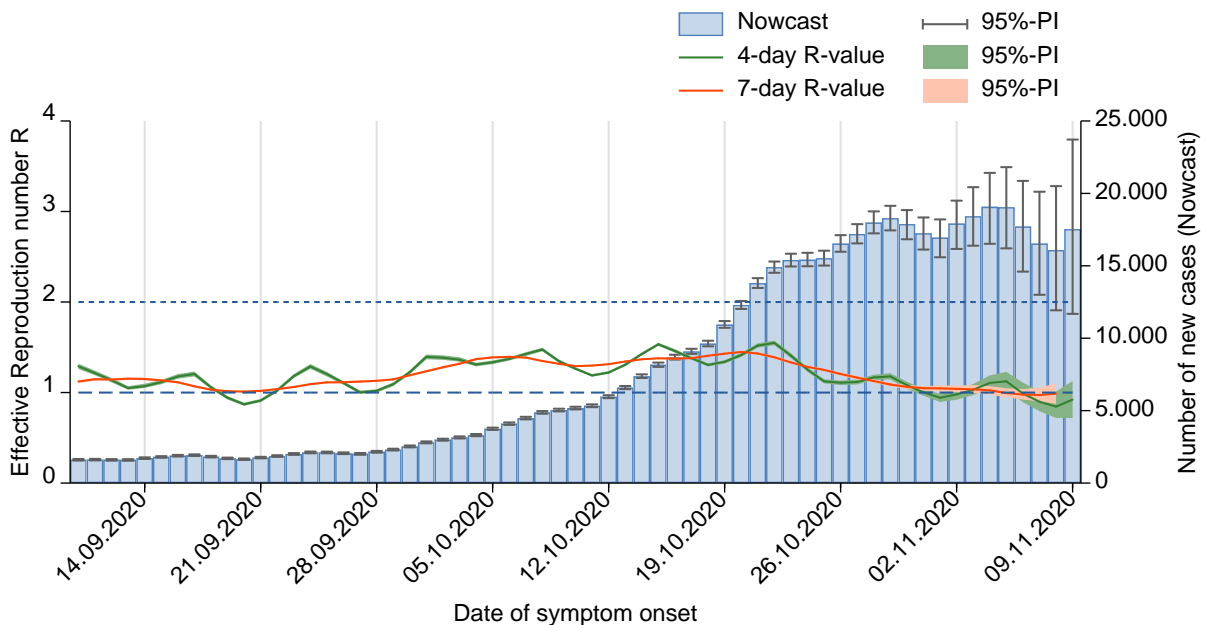


Figure 3: The estimated R-values (in green and orange) over the last 60 days, against the background of estimated number of COVID-19 cases according to illness onset (as of 13/11/2020, 12 AM, taking into account cases up to 09/11/2020).

The reported R-values have been stable well above 1 in October. Over the past few days the R-value has been fluctuating and is currently around 1. This means that, on average, each person infected with SARS-

Note: The report is a snapshot and is continuously updated.

CoV-2 infects another person. As the number of infected persons is currently very high in Germany, this means that there is still a high number of new cases every day.

Sample calculations as well as an excel sheet presenting both R-values with daily updates can be found under www.rki.de/covid-19-nowcasting. A detailed description of the methodology is available at https://www.rki.de/DE/Content/Infekt/EpidBull/Archiv/2020/17/Art_02.html (Epid. Bull. 17 | 2020 from 23/04/2020).

DIVI intensive care register

The German Interdisciplinary Association for Intensive and Emergency Medicine (DIVI) has in collaboration with RKI established a registry to document the number of available intensive care beds as well as the number of COVID-19 cases treated in participating hospitals on a daily basis. Since 16/04/2020, all hospitals with intensive care beds are required to report (<https://www.intensivregister.de/#/intensivregister>).

As of 13/11/2020, a total of **1,289** hospitals or departments reported to the DIVI registry. Overall, **28,346** intensive care beds were registered, of which **21,949** (77%) are occupied, and **6,397** (23%) are currently available. The number of COVID-19 cases treated in participating hospitals is shown in Table 3.

Table 3: COVID-19 patients requiring intensive care (ICU) recorded in the DIVI register (13/11/2020, 12:15 PM).

	Number of patients	Percentage	Change to previous day*
Currently in ICU	3,299		+113
- of these: with invasive mechanical ventilation	1,859	56%	+46
Discharged from ICU	25,435		+689
- of these: deaths	5,654	22%	+85

*The interpretation of these numbers must take into account the number of reporting hospitals and therefore the number of reported patients may change from day to day. On certain days, this can explain an occasionally important decrease or increase in the cumulative number of discharged patients or deaths compared with the day before.

Mortality Monitoring

A total of 24 European countries provide the European EuroMOMO project (European monitoring of excess mortality for public health action) with official mortality statistics on a weekly basis which allows the detection and measuring of excess deaths related to e.g. seasonal influenza and pandemics (<https://www.euromomo.eu/>). In Germany, two regional systems that allow the transmission of data have been established so far (since 2007 in Berlin and Hesse). The establishment of a nationwide monitoring system is planned from 2021 onwards.

An increase in all-cause mortality was observed in conjunction with the COVID-19 pandemic primarily in April 2020. Excess mortality was observed primarily in persons 65 years of age and older, but also among those 15 to 64-years of age. Excess mortality was highest in Belgium, France, Italy, the Netherlands, Spain, Sweden, Switzerland and the UK. After a return to expected levels for most countries in May (with the exception of a heat-related peak in August), total all-cause mortality in the reporting countries has again increased above expected levels since calendar week 38. This is primarily due to increased

mortality in Belgium, United Kingdom, Italy, the Netherlands, Portugal Spain and Switzerland. In week 44, excess mortality was recorded, especially in the age group over 45 years of age.

Weekly mortality statistics are also recorded on the website of the Federal Statistical Office, albeit with a certain time lag. A special evaluation of excess mortality is normally updated weekly every two weeks.

<https://www.destatis.de/DE/Themen/Gesellschaft-Umwelt/Bevoelkerung/Sterbefaelle-Lebenserwartung/Tabellen/sonderauswertung-sterbefaelle.html> (in German).

Looking at the development by months, in March 2020 there was no noticeable increase in the number of deaths compared to March of the previous year. In April, however, all-cause mortality was significantly above the average of previous years; but decreased to expected levels since the beginning of May, with the exception of a heat-related increase in August. In September, however, deaths again increased to 5% above the expected number based on the mean number of deaths observed from 2016 to 2019. In calendar week 42, 2020 (12/10 – 18/10/2020), 17,189 persons died (-316 compared to week 41).

Risk Assessment by the RKI

In view of the recent increase in case numbers with severe disease, which have to be treated in ICUs and the increasingly tense situation in the health system the risk assessment of the RKI was adapted to the situation on 11/11/2020. The current version can be found here:

https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Risikobewertung.html (in German)

Measures taken in Germany

- Recommendations on distribution of COVID-19-vaccines by The Standing Committee on Immunisation (STIKO). The German Ethics Council and German National Academy of Sciences Leopoldina (09/11/2020. *in German*) <https://www.ethikrat.org/fileadmin/Publikationen/Ad-hoc-Empfehlungen/deutsch/gemeinsames-positionspapier-stiko-der-leopoldina-impfstoffpriorisierung.pdf>
- National Testing Strategy – who will be tested for SARS-CoV-2 in Germany (14/10/2020. *in German*) https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Teststrategie/Nat-Teststrat.html
- SARS-CoV-2 test criteria for schools during the COVID 19 pandemic (12/10/2020. *in German*) https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Teststrategie/Testkriterien-Schulen.pdf
- Preventive measures in schools during the COVID 19 pandemic (12/10/2020) (*in German*)
- https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Praevension-Schulen.pdf
- Selected and regularly updated information on COVID-19 (*in English*) <https://www.rki.de/EN/Content/infections/epidemiology/outbreaks/COVID-19/COVID19.html>
- Information on the designation of international risk areas https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Risikogebiete_neu.html
- The ministry of health has published a record of all measures implemented in Germany since 27/01/2020 (*in German*) <https://www.bundesgesundheitsministerium.de/coronavirus/chronik-coronavirus.html>
- Information from the Ministry of Health for travellers entering Germany: Frequently asked questions and answers (*in German*)

<https://www.bundesgesundheitsministerium.de/coronavirus-infos-reisende/faq-tests-einreisende.html>

- Corona-Warn-App
<https://www.rki.de/EN/Content/infections/epidemiology/outbreaks/COVID-19/CWA/CWA.html>
- Orders concerning travel after the determination of an epidemic situation of national significance by the German Bundestag (29/09/2020)
https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Transport/BMG_Merkblatt_Reisende_Tab.html
- Information on additional regulations at the regional level regarding control measures such as physical distancing or quarantine regulations for persons entering from other countries can be accessed here: *(in German)*
<https://www.bundesregierung.de/breg-de/themen/coronavirus/corona-bundeslaender-1745198>
- Data on current disease activity can be found on the RKI dashboard:
<https://corona.rki.de/>
- A distance of 1.5 metres to other individuals must be maintained in public spaces: *(in German)*
<https://www.bundesregierung.de/breg-de/themen/coronavirus/besprechung-der-bundeskanzlerin-mit-den-regierungschefinnen-und-regierungschefs-der-laender-1733248>
- (Non-medical) face masks must be worn on public transport and in shops in all federal states.