



## Coronavirus Disease 2019 (COVID-19)

### Daily Situation Report of the Robert Koch Institute

25/10/2020 - UPDATED STATUS FOR GERMANY

\*Change from previous day; \*\*Estimate

Total (cumulative)		Previous 7 days	
<b>Confirmed cases</b>	<b>Deaths</b>	<b>Confirmed cases</b>	<b>7-day incidence</b>
<b>429,181</b> (+11,176*)	<b>10,032</b> (+29*)	<b>62,329</b> (+5,463*)	<b>74,9 cases/ 100,000 population</b>
<b>Proportion of deaths</b>	<b>Recovered</b>	<b>No. of districts reporting cases</b>	<b>No. of districts with 7- day incidence &gt; 50</b>
<b>2.3%</b>	<b>ca. 317,100**</b> (+3,000**)	<b>412/412</b> (+0*)	<b>251</b> (+24*)

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 25/10/2020, 12:00 AM)

- Currently, an accelerated 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 increased to **74.9** cases per 100,000 population.
- The 7-day incidence in Berlin, Bremen, Hesse and North Rhine-Westphalia, Bavaria, and Saarland is higher than the national total 7-day incidence.
- The number of districts with an increased 7-day incidence of >25 cases/ 100,000 inhabitants continues to rise, to **363** urban and rural districts. Of these, **71** districts have an incidence of > 100 cases/100,000 population and **179** districts have an incidence of > 50-100 cases/100,000 population.
- Since the beginning of September, the proportion of cases in older age groups has been increasing again (see Daily Situation Report of 20.10.2020).
- A number of COVID-19-related outbreaks continue to be reported in various settings. Case clusters are being reported particularly in the context of family events, and in nursing homes.
- In total, **429,181** laboratory-confirmed COVID-19 cases and **10,032** deaths associated with COVID-19 have been transmitted to the RKI in Germany.

# Epidemiological Situation in Germany

In accordance with the international standards of WHO<sup>1</sup> and ECDC<sup>2</sup>, 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 nearly all federal states. The proportion of COVID-19 cases in the older age groups is currently increasing. Since the start of October, R-values have been clearly above 1.

There are outbreaks in various districts throughout Germany, which are associated with different situations, including large celebrations in the family and circle of friends, in occupational settings, 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.

Since end July, the proportion of deaths among COVID-19 cases has been consistently below 1% and is thus markedly lower than in the spring, particularly in April (ref. Daily Situation Report of 20 Oct 2020). However, it is regarded as implausible that the virus has become less pathogenic. Rather, the low proportion of deaths can be explained as follows: On the one hand, recent infections have occurred mainly among young people, who most of the time experience a less severe course of disease. On the other hand there is also broader testing, which means more milder cases are identified.

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 if possible and celebrations should be limited to the closest circle of family and friends.

<sup>1</sup> World Health Organization, [https://www.who.int/publications/i/item/WHO-2019-nCoV-Surveillance\\_Case\\_Definition-2020.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-Surveillance_Case_Definition-2020.1)

<sup>2</sup> 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 **429,181 (+11,176)** 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 (25/10/2020, 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	68,482	1,644	617	8,352	75.2	1,970	17.7
Bavaria	89,986	1667	686	10,446	79.6	2,742	20.9
Berlin	25,790	416	703	4,389	119.6	249	6.8
Brandenburg	6,463	154	256	887	35.2	184	7.3
Bremen	4,342	190	637	783	114.9	64	9.4
Hamburg	11,346	303	614	1,312	71.0	283	15.3
Hesse	32,227	1,099	513	6,544	104.1	609	9.7
Mecklenburg-Western Pomerania	2,133	77	133	431	26.8	21	1.3
Lower Saxony	29,640	539	371	3,552	44.4	729	9.1
North Rhine-Westphalia	107,759	3,142	600	17,224	96.0	2,017	11.2
Rhineland-Palatinate	16,118	337	394	2,377	58.1	268	6.5
Saarland	5,289	281	536	895	90.7	178	18.0
Saxony	13,237	784	325	2,662	65.4	278	6.8
Saxony-Anhalt	3,905	145	178	623	28.4	74	3.4
Schleswig-Holstein	6,662	142	229	974	33.5	164	5.6
Thuringia	5,802	256	272	878	41.2	202	9.5
<b>Total</b>	<b>429,181</b>	<b>11,176</b>	<b>516</b>	<b>62,329</b>	<b>74.9</b>	<b>10,032</b>	<b>12.1</b>

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 188,947 cases (44%), thus their date of reporting is provided in Figure 1.

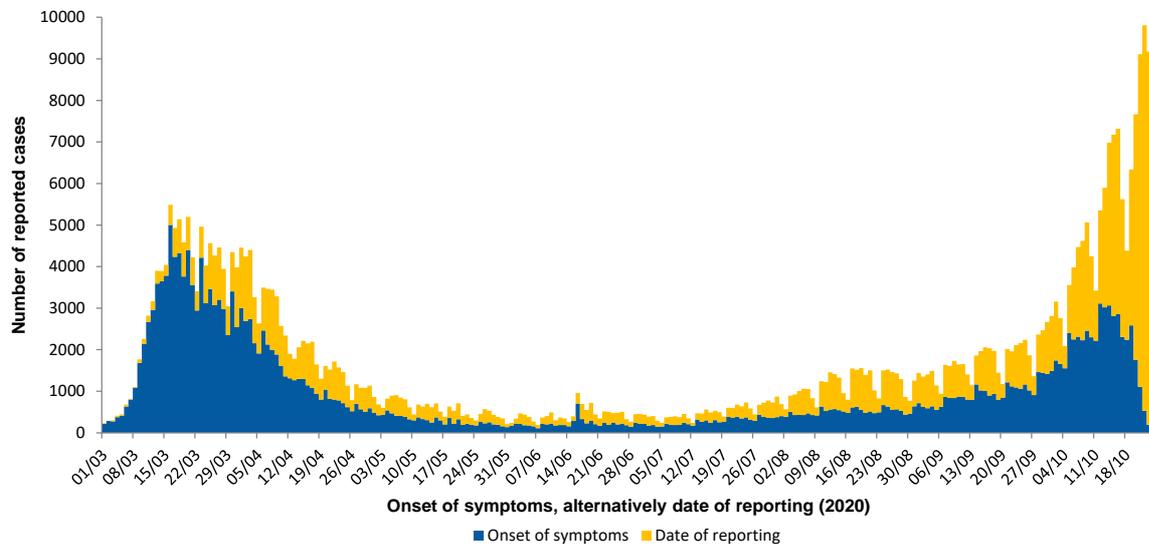


Figure 1: Number of COVID-19 cases in Germany electronically reported to the RKI by the date of symptoms onset or – if unknown – alternatively by date of reporting since 01/03/2020 (25/10/2020, 12:00 AM).

## 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 38.5% 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 and among persons employed in medical facilities according to § 23 IfSG (Table 2). The number of deaths was particularly high among persons cared for in these facilities.

Among the cases reported as working in medical facilities (§ 23 IfSG), 73% were female and 27% 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 (426,115\* cases, no data available for 165,092 cases; 25/10/2020, 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	4,915	3,258	745	3,700
	Occupation in facility	18,221	745	24	17,200
§ 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*	13,128	178	1	11,300
	Occupation in facility	6,366	229	8	5,500
§ 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	22,061	4,655	3,833	17,100
	Occupation in facility	12,365	507	43	11,700
§ 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	7,387	285	5	6,900
Neither cared for, accommodated in nor working in a facility		176,580	21,014	3,854	154,500

\*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 **363** districts, including **71** urban and rural districts with an incidence of over 100 cases/100,000 population and **179** districts with a 7-day incidence of >50 -100 cases/100,000 population. The dashboard (<https://corona.rki.de>) shows all affected districts.

In most districts the transmission is diffuse, with occasional clustering in the context of celebrations with family and friends. On some occasions, specific large outbreaks have been the cause for large increases in the affected districts. However, 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.

In the district of Erzgebirgskreis, COVID-19 cases have occurred in more than **11** inpatient care facilities.

In the district of Rottal-Inn, the increased incidence is partly due to an outbreak among residents of a shared accommodation, as well as to cases of infected residents and employees in a nursing home.

### Estimation of the reproduction number (R)

The reproduction number, R, is defined as the mean number of people infected by one infected person. R can only be estimated based on statistical analyses such as nowcasting (Figure 2) and not directly extracted from the notification system.

4-day R-value	7-day R-value
1.45 (95%-prediction interval: 1.17 – 1.71)	1.39 (95%-prediction interval: 1.22 – 1.52)

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.

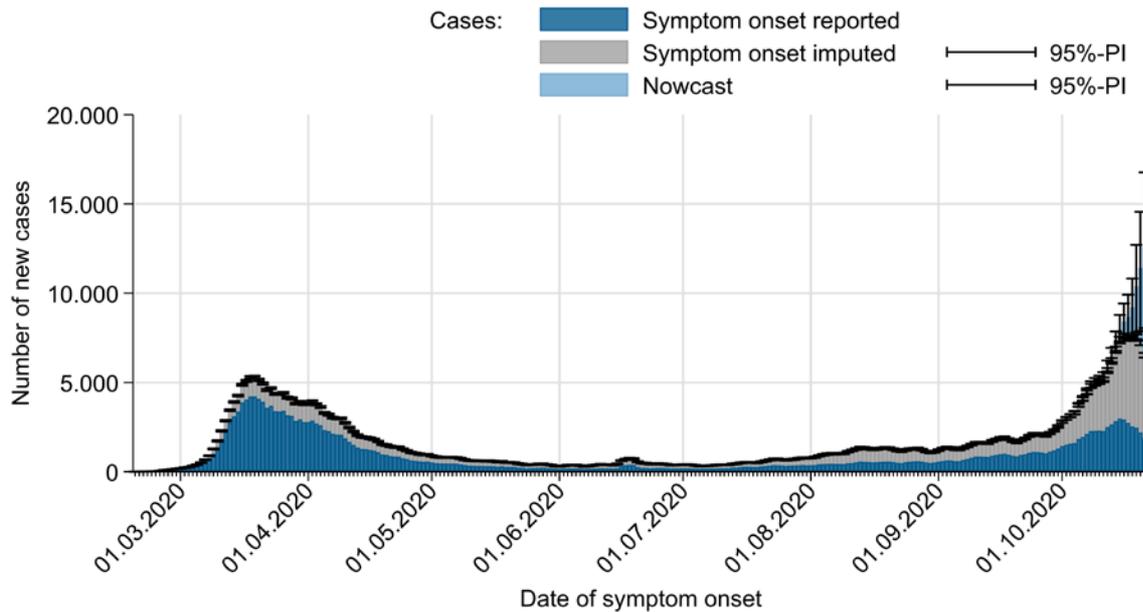


Figure 2: Number of notified COVID-19 cases with known date of illness onset (dark blue), estimated date of illness onset for cases without reported date of onset (grey) and estimated number of not yet notified cases according to illness onset electronically reported to RKI (light blue) (as of 25/10/2020, 12 AM, taking into account cases up to 21/10/2020).

Since the start of October the R-values have been clearly greater than 1.

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](http://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](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 25/10/2020, a total of 1,284 hospitals or departments reported to the DIVI registry. Overall, 29,294 intensive care beds were registered, of which 20,908 (71%) are occupied, and 8,386 (29%) are currently available. The number of COVID-19 cases treated in participating hospitals is shown in Table 3.

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

Table 3: COVID-19 patients requiring intensive care (ICU) recorded in the DIVI register (25/10/2020, 12:15 PM).

	Number of patients	Percentage	Change to previous day*
<b>Currently in ICU</b>	1.296		+93
- of these: with invasive mechanical ventilation	578	45%	+45
<b>Discharged from ICU</b>	19.632		+91
- of these: deaths	4.500	23%	+13

\*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.

## Risk Assessment by the RKI

In view of the recent further increase in case numbers, the risk assessment of the RKI was adapted to the epidemiologic situation on 07/10/2020. The current version can be found here:

<https://www.rki.de/EN/Content/infections/epidemiology/outbreaks/COVID-19/Risk-assessment.html>

## Measures taken in Germany

- 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](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](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/Praevention-Schulen.pdf](https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Praevention-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](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>
- Regulations for persons entering Germany in connection with the novel coronavirus SARS-CoV-2 (15/09/2020) *(in German)*  
[https://www.rki.de/DE/Content/InfAZ/N/Neuartiges\\_Coronavirus/Transport/BMG\\_Merkblatt\\_Reisende\\_Tab.html](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.