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VI Department of Health Digs Deep into Demographics Surrounding the Rise of COVID-19 in the Territory

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The Virgin Islands Department of Health (VIDOH) this week unveiled detailed statistics about how the coronavirus has spread in the territory and the public health agency's efforts to rein it in.

The data shed light, for the first time, on information that helps Virgin Islanders understand where the COVID-19 disease has had the most impact, and which segments of the community, so far, have been hit hardest.

Until the department of health confirmed the first case of COVID-19 disease in the territory on March 13th, very little was known about the screening process, locally. Initially, screening of persons suspected to having been infected were conducted by the VIDOH epidemiology staff. Nasal swabs were taken and shipped off to the Centers for Disease Control and Prevention for the

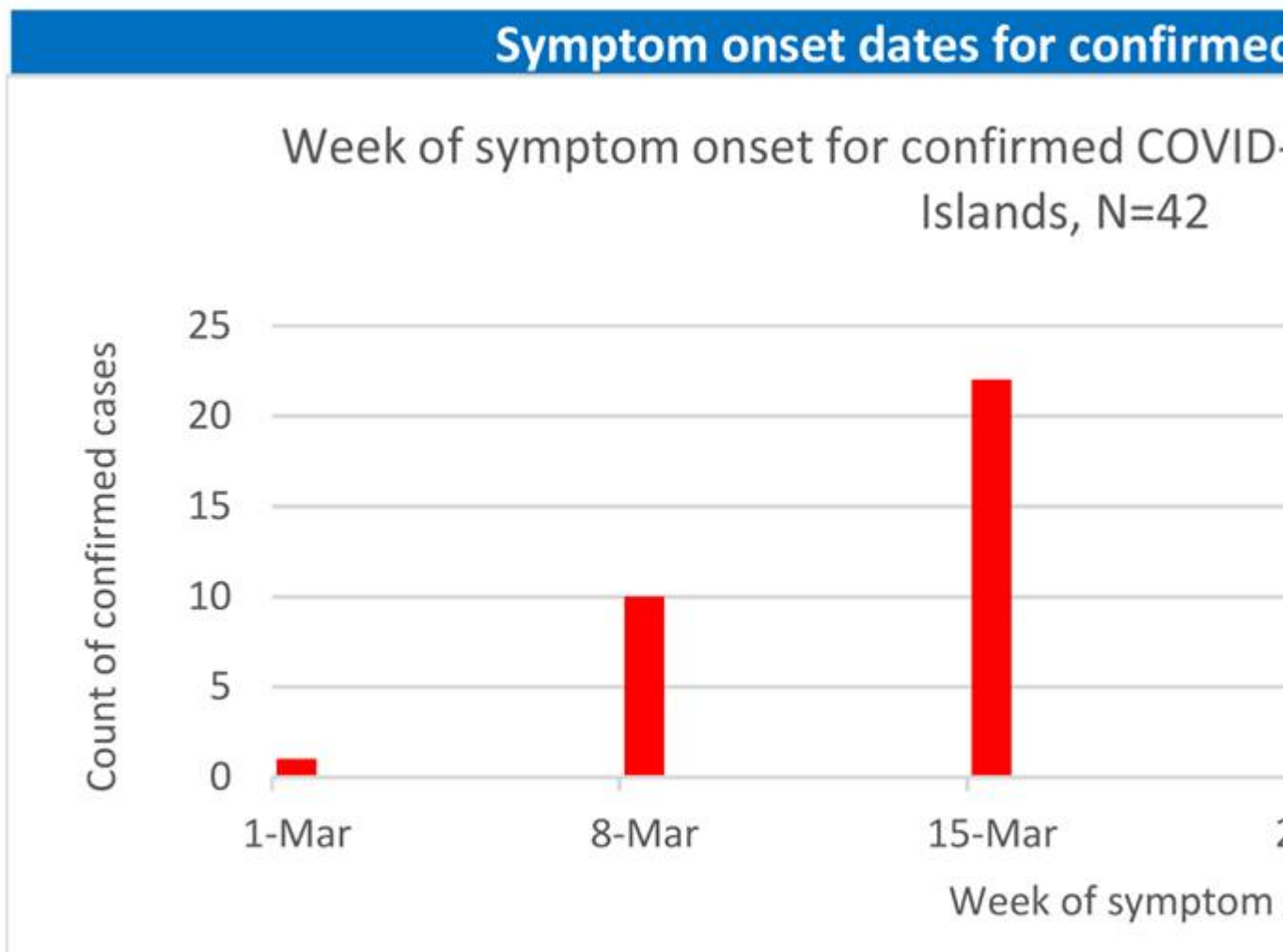
final specimen testing.

Data released this week indicates the health department screened the first potential COVID-19 patient very early this year. A single negative test result was returned to the VIDOH back around January 26th. There was no further screening activity until a sporadic round of screenings in early March. Screening and testing picked up dramatically after March 15.

Data made available this week are current through last Sunday. Here are key findings from the VIDOH 2020 COVID-19 Response Report, April 5, 2020:

The Big Picture

The good news is that the large majority of Virgin Islanders who test for COVID-19 have had negative test results. As of Sunday, 283 people had been tested. Forty-two tests returned positive results, compared to 218 negative findings.



**COVID-19
Confirmed Cases (12)
St. Croix
U.S. Virgin Islands**



That means roughly 16 percent of those “Persons Under Investigation” of being infected by coronavirus actually returned a positive result. But 84 percent of those tested were negative even though they may have travel to flagged locations and presented with a combination of fever, cough and shortness of breath.

On the downside, public health experts say the disease hasn’t reached its peak number of cases. That could be a few weeks away. Meanwhile, the first COVID-19 death occurred on Sunday. Three people infected with COVID-19 are hospitalized (two on St. Thomas and one on St. Croix), one who is connected to a ventilator machine for life and breath.

Demographics: Women Test Positive More Often in the V.I.

The Department of Health statistics show that as of April 5, there were 42 confirmed cases of COVID-19 in the territory. Twenty-eight of the confirmed cases were females, while males made up 14 confirmed case. Essentially, women who were tested were twice as a likely as men to return a positive test result, according to the VIDOH figures.

By Age

According to the data, 18- to 49-year-olds had the largest number of positive test results. The findings may be expected because tests were conducted most often on people in this age range. Nonetheless, children 17 and under, and people over 65-years-old were the age groups with the smallest number of positive test results. Far fewer tests were administered to those demographics.



VIDOH 2020 COVID-19 Re

USVI Response Measures

1. Prevent, delay, and mitigate transmission:

Develop screening at ports of entry; provide best practices and guidance to organizations to reduce transmission; develop strategies for vulnerable populations.

2. Conduct surveillance: Inform the response based on epidemiologic data; liaise with healthcare sector to identify cases and define clinical and transmission characteristics; operate epi hotline; track persons under investigation; perform contact tracing of cases; conduct follow-up sampling of cases;

Total tested

Tested positiv

Tested negati

Pending tests

Males

Females

The Hotspots: St. Thomas-St. John District

As of April 5, a total of 164 tests were conducted on St. Thomians. Twenty-eight tests returned positive; 132 were negative and four cases were pending.

The heaviest concentration of COVID-19 cases is on the East End of the island, from Bovoni and Nadir areas eastward to Smith Bay. The communities of Nazareth and Red Hook are reported to have two to four cases, each. The surrounding areas of close to Fredenhoj and Smith Bay each are recorded with one case.

To the north, Peterborg and Lovenlund each have one recorded case. The adjacent area approaching Wintberg are in the range of five to eight recorded cases. The less densely populated West End of St. Thomas has no recorded cases, according to VIDOH statistics. The more populated, urbanized areas in or around Estate Thomas, Havensight, Altona have registered cases as well.

Health officials cannot pin down exactly how nine of the confirmed cases contracted the virus. They are considered “community spread.” Nine people are believed to have contracted the disease through close contact with another confirmed positive person. Seven appear to have been infected during travel. The risk factor for three cases is still under investigation.

Thirteen tests have been administered on St. John. Nine test results were negative. Two cases positive cases have been recorded on St. John, including one in the isolated Coral Bay area. Two tests results are still pending. The two positive cases are believed to be travel related.

Hotspots: St. Croix District

Of 106 “Persons Under Investigation” tested for coronavirus on St. Croix, 77 were negative. Twelve tests returned with positive results and 17 tests remained unresolved as of April 5, according to health department data.

Nine of St. Croix’s positive cases were travel-related, according to the data. Two were community transmission with one case believed to be due to close contact with another positive COVID-19 case.

Testing – Are We Doing Enough?

The sole death in the Virgin Islands attributed to COVID-19 was reported on Sunday by the health department. An 85-year-old St. Thomas man succumbed to the virus after coming into contact with a person who had the disease and had traveled to Anguilla.

Tragically, the elderly man died at home.

He was not a Person Under Investigation – the medical jargon for someone possibly infected because of travel and symptoms of the virus. So, public health officials knew nothing about his COVID-19 status until after he passed. The man was tested for the disease post-mortem.

According to health officials, the deceased had a pre-existing health condition that, given his age, significantly reduced his chance of recovery from COVID-19. Nothing about his case – when and how it was contracted – was known prior to his death. His story is not reflected in the data.

Of course, who is to say whether the tragic outcome would have been any different had public health officials known of his circumstances. But he very likely could have been tested while still alive. He had contact with a known COVID-19 case. He very likely showed symptoms of the disease well before his passing.

Today, the latest CDC guidance on testing suggests the territory should prioritize testing persons experiencing symptoms, travelers who have developed symptoms and persons who have been in contact with another individual who tested positive, said Government House spokesman Richard Motta.

While CDC provides guidance for testing, it says, "Decisions about testing are at the discretion of state and local health departments and/or individual clinicians."

Regardless of travel, if you believe you are experiencing symptoms – a persistent cough, fever and difficulty catching your breath — you are strongly encouraged to call your medical provider or contact the Department of Health at 340-712-6299 or 340-776-1519. Do not go to the hospital or doctor's office without specific instructions to do so.

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