To: 5.1.2e , 5.1.2e , (5.1.2e)[5.1.2e @minvws.nl]
From: 5.1.2e , 5.1.2e
Sent: Fri 2/5/2021 8:23:20 AM
Subject: FW: 20210204 : Lithuania : The acceleration modelling showed thatopening schools and elections were mass spreading events.
Received: Fri 2/5/2021 8:23:23 AM
image001.png

Hoi 5.1.2e

Ik kreeg onderstaande interessante bericht uit Litouwen, met daarin lessen uit de eerste golf. Ook interessant om te zien dat LIT inzet op "Ring vaccination" – iedereen rond een uitbraak vaccineren. En leraren, medisch personeel en personeel in verzorgingstehuizen als eerste te vaccineert – omdat ze als grote 'spreaders' gezien worden.
Ten slotte ziet LIT de tweede rondes van de verkiezingen als super-spread-event, wel goed om op te merken dat er zeker in oktober in Litouwen nauwelijks aan social distancing werd gedaan – dus de situatie is wellicht niet goed vergelijkbaar met a.s. maart. Kun jij het bericht eventueel delen met relevante contacten binnen VWS/RIVM, indien interessant?

Groeten,

5.1.2e

From: 5.1.2e , 5.1.2e < 5.1.2e @minbuza.nl>
Sent: donderdag 4 februari 2021 16:57
To: corona < 5.1.2e @minbuza.nl>
Cc: 5.1.2e , 5.1.2e < 5.1.2e @minbuza.nl>; 5.1.2e , 5.1.2e < 5.1.2e @minbuza.nl>; DEU-VIRUS < 5.1.2e 5.1.2e @minbuza.nl>; 5.1.2e , 5.1.2e < 5.1.2e @minbuza.nl>; Bouwers, Luuk < 5.1.2e @minbuza.nl>; zwart.pgj < 5.1.2e @minbuza.nl>; Hollander, Laine den < 5.1.2e @minbuza.nl>
Subject: 20210204 : Lithuania : The acceleration modelling showed that opening schools and elections were mass spreading events.

Graag verzoek ik jullie om dit bericht door te geleiden naar de juiste contactpersonen bij VWS, RIVM, en eventuele andere belanghebbenden. Ik ben graag bereid om verder direct contact met deze adviseur van de Litouwse regering te faciliteren, indien daar vanuit de betrokken NLse overheidsinstellingen belangstelling voor is. Eventueel ook versturen aan BZK (mhoo op verkiezingen) en OCW.

Attended an informative meeting organized by the Canadian Charge d'Affaires. The briefing focused on COVID19 developments in Lithuania and was presented by 5.1.2e 5.1.2e Government of the Republic of Lithuania (5.1.2e @lrv.lt). Šimaitis is the chief advisor to the Lithuanian cabinet on COVID. He is very willing to share his COVID data analysis with colleagues in other countries.

I would be very pleased to help **set up a meeting for Dutch stakeholders (VWS/RIVM or others) with** 5.1.2e if this would be deemed useful.

Summary of the presentation

Data shows that opening of **schools and national elections** were super-spreaders that lead to and accelerated the second wave resulting in a high number of deaths, high number of hospitalisations and high number of COVID- infections covering the whole of Lithuania.

- **Death** : at certain point around 50 people died per day, number of deaths was twice as much as normal (over period September – December 2020 around 1400 versus 700 in normal years. This increase included COVID related deaths, but excluded deaths as result of lack of access to health care, and COVID-accelerated deaths
- **First wave COVID March-June :** There was no first wave in LIT because of the instant lockdown. Success factors were:
  - Intense testing risk institutions : these identified risk institutions like hospitals and care centers were tested on a weekly basis without any indication allowing early notification of possible breakout. This allowed the LIT government to measures quickly and reduce infections.
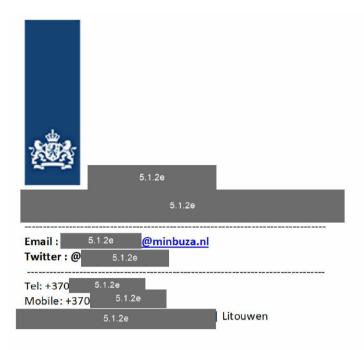- **Second wave COVID September – December**

- Data indicate that the acceleration in infections in the second wave started with **opening of the schools** after summer holiday. (Schools closed again in December with strict lockdown measures). Testing of educators and teachers shows that more than 20% of all teachers are or have been infected. According to Simaitis it is therefore very debatable whether children are less infectious than adults and therefore have a lower chance of infecting other people.
  - The infection accelerated and peeked during the **elections** first round (October) and second round (November). **Data shows the national elections** in Lithuanian contributed to COVID-pandemic considerably, resulting in the Pandemic spiraling out of control. Election events and campaigning before the voting day were limited and the process at voting locations was controlled. According to the analyst, the acceleration of infections mentioned was caused by social interactions before, during and after the elections and movements to and from voting locations
  - The statistics further show that events with high movement levels contribute to the accelerating and widening of the pandemic (for example 1 November - All Saints Day – day on which majority of Lithuanians go to graves)
  - Testing further showed that there were three main high risks groups:
    - doctors and medical personnel - 10% infected
    - educators and teachers – 20% were positive (this might indicate that children are infectious than previously presumed)
    - caretakers in old people's homes – 10% infections
    Vaccination will therefore focus first on medical personnel (all medical personnel has been vaccinated), personnel at care homes for elderly and old people (first vaccination has taken place, second jab by end of February) and educators and teachers (starting in end February/March)
- The second wave of the pandemic was only successfully addressed when the new government put in place strict measures (16 December). Success factors:
  - Pro-active surveillance – testing people as part of an indicated risk group
  - Widely testing people with and without symptoms, quick run-through times (test/result)

Learnings Lithuania :
- **Three biggest groups** that contributed to the second wave : doctors/nurses, care homes, educators.
- **Three super spreader events** : opening of school, elections round 1 and election round 2.
- **Hospitals** : although LIT had sufficient capacity and medical equipment to treat COVID infection (at peak there were 2600 people with COVID in hospitals), LIT lacked medical personnel to treat all these people. As the number of infected patients increased, more additional medical services had to close which added to the non-COVID-related deaths.
- **Geographical spread and social waves:** modelling shows that infections start in cities and then are exported to suburbs around city nucleus. At the peak of the pandemic, the entire Lithuania was highly infected.
- **Testing is precise but not accurate:** Although the PCR is sensitive, the sample does not always contain the virus even if the person is infected. Infection time is not result time : infection can be 1 to 5/7 days earlier than testing time and the result is again 1/2 days later. This means that by the time the results are received someone can already have spread the infection for a week. With this knowledge it is unwise to neglect an individual infection.
- **14 day per 100.000 people notification rate / R is a random variable** is lagging and cannot be used when the virus is still increasing/accelerating because you lag 7 to 14 days behind the actual situation. R value is insufficient to control the pandemic. Rather use the acceleration metric which measures the acceleration. This methodology is more accurate and timely and can also more precisely show which incident caused a certain outbreak and what measurement caused a decline.
- Controlling the pandemic going forward LIT will use:
  - Ring vaccination – aggressive vaccination around outbreaks
  - Batch PCR
  - Surface forensics – especially to be used in schools

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