

IGHS COVID-19 Series - Italy & Iran: Lessons from the front edge of the pandemic

IRAN

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Topics

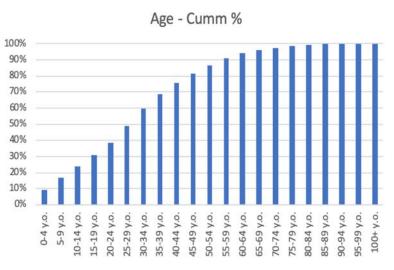
- Iran in transition
- COVID-19 in the Middle East
- Early track of COVID-19 in Iran
- Current pattern
 - Cases / Deaths
 - Testing and Hospitalization
- Response teams
 - National committee
 - Campaigns
- Non-pharmaceutical interventions in Iran
- Forecast trend and future waves
- Conclusion

Iran overview

USA: 59,957.72\$ (2017) (rank 9)

- GDP per capita: 5,627.75\$ (2017) (rank 95).
- Population = 83m (rank 18)
- Population density = 134 people per mi² (rank 158)
- Population in cities of more than 1 million = 26%
- Literacy rate= 86% (68% in College/University)
- Physician per 1,000 population = 1.6
- Insurance coverage = 97% basic insurance since 2015
- Life expectancy = 76.3 years (2017)



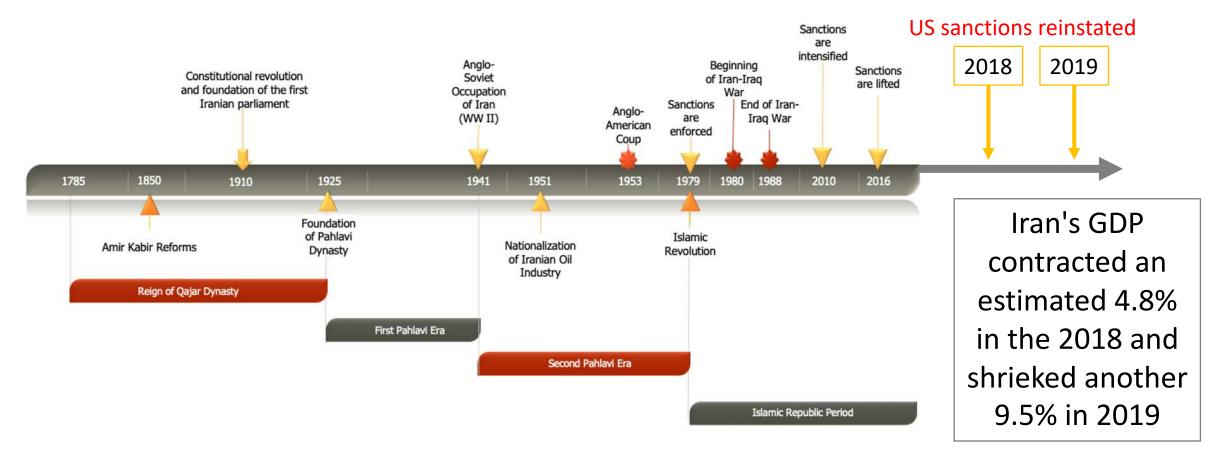


https://tradingeconomics.com/iran/population-density-people-per-sq-km-wb-data.html

Source:

Statistical Centre of Iran, Population projected to 2019

Iran in Transition Historical timeline of contemporary Iran



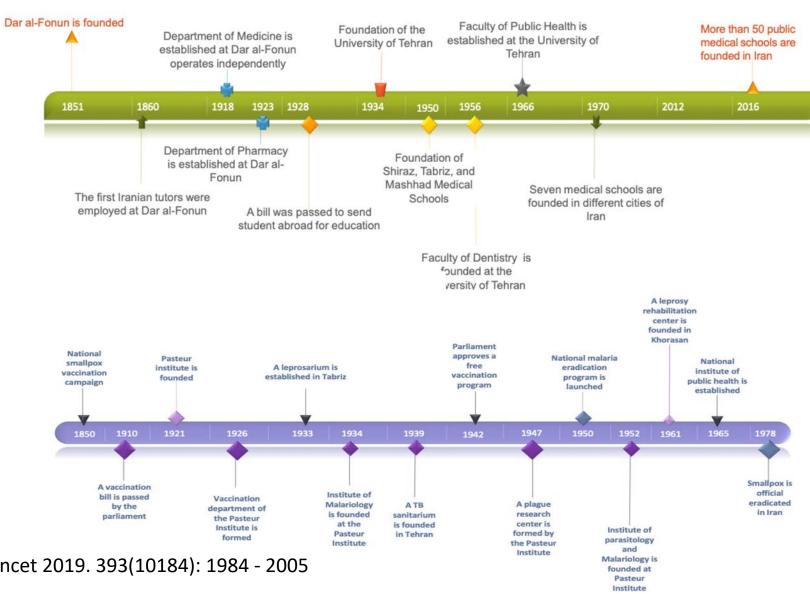
Danaei, Goodarz et al. Iran in transition The Lancet 2019. 393(10184): 1984 - 2005

Iran in Transition

Health and Infections

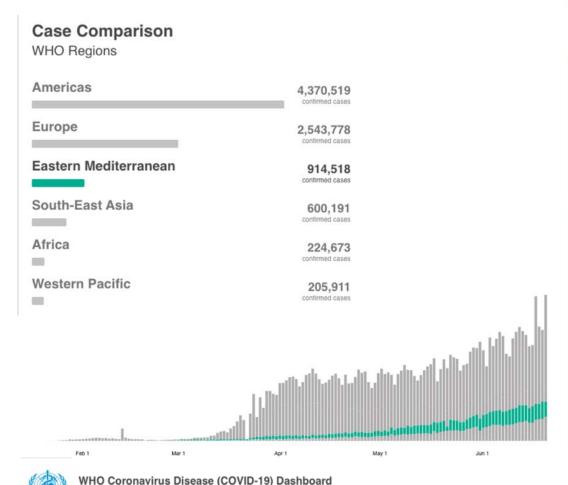
Development of modern medical education system in Iran

Infectious Diseases in Iran



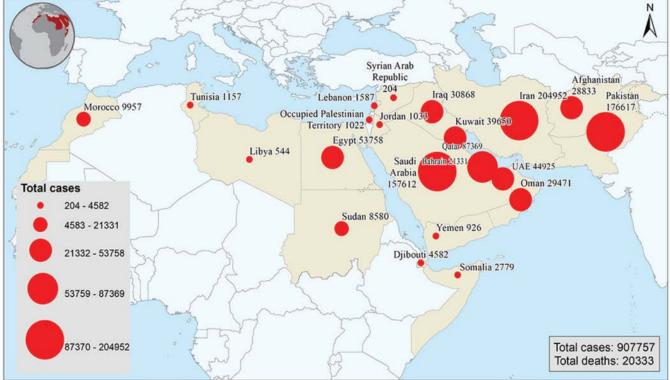
Danaei, Goodarz et al. Iran in transition The Lancet 2019. 393(10184): 1984 - 2005

COVID-19 in the Middle East as of 21 June 2020



Country	Cumulative Cases	Cumulative Deaths	Country	Cumulative Cases	Cumulative Deaths
Afghanistan	28,833	581	Palestine	1,022	5
Bahrain	21,331	61	Oman	29,471	131
Djibouti	4,582	45	Pakistan	176,617	3,501
Egypt	53,758	2,106	Qatar	87,369	98
Iran	204,952	9,623	Saudi Arabia	157,612	1,267
Iraq	30,868	1,100	Somalia	2,779	90
Jordan	1,033	9	Sudan	8,580	521
Kuwait	39,650	326	Syria	204	7
Lebanon	1,587	32	Tunisia	1,157	50
Libya	544	10	UAE	44,925	302
Morocco	9,957	213	Yemen	926	255

Total	907,757	20,333



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there May not yet be full agreement.

Data source: World Health Organization Map production: Health Emergency Information and Risk Assessment (HIM) Unit World Health Organization



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Data last updated: 2020/6/22, 3:50pm CEST

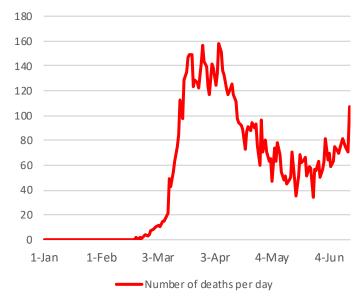
COVID-19 Cases/Deaths

Iran (till June 14)

Overall deaths = 8,837/186,476 = **4.74%**

Source: Iran MOH

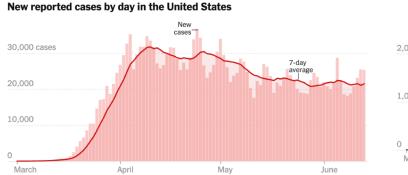


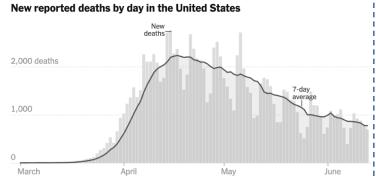


• United States (till June 14)

Overall deaths = 115,271/2,063,812 = **5.58**%

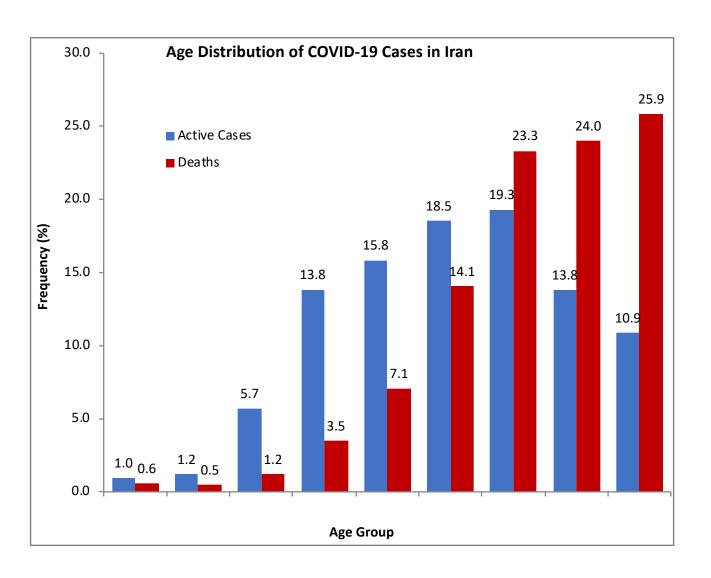
Source: US CDC

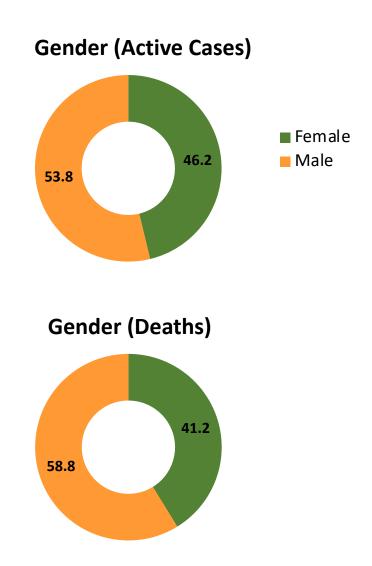




By The New York Times Updated June 14, 2020, 10:37 A.M. E.T.

Age & Sex distribution of COVID-19 cases admitted to hospitals, Iran

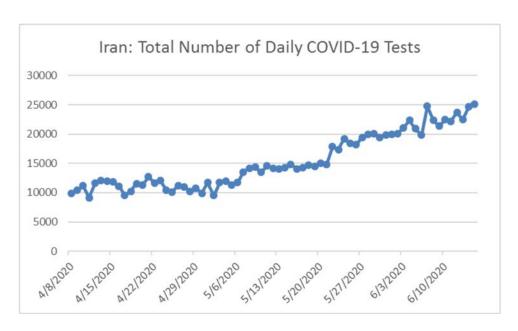




Testing for COVID-19, Iran

Laboratory Testing

- Expanding the network in all provinces of the country
 - More than 150 Labs
 - Testing capacity: 20,000 tests daily (Can increase to more than 2 folds)
- Training of network laboratories by Pasteur Institute of Iran
- Designing a diagnostic algorithm appropriate to the country's conditions



Total Positive: 195,000

Total Test: 1,320,000

Positivity rate: 15%

Priority for testing:

- PRIORITY 1: Ensures optimal care options for all hospitalized patients, and lessen the risk of healthcareassociated infections
- PRIORITY 2: Ensures those at highest risk of complication of infection are rapidly identified and appropriately triaged
- PRIORITY 3: Ensures to rapidly identify the cases with mild symptoms and close contacts of the confirmed cases
- NON-PRIORITY: Individuals without symptoms

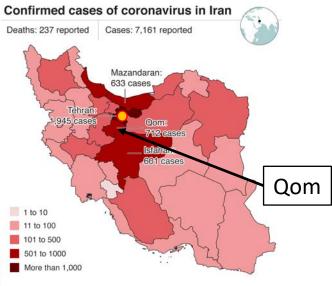
Iran - Patient ZERO

- Feb. 19: two cases in Qom, both reported death
- Feb. 20: two more cases in Qom, one in Arak
- Link to Wuhan's epidemic
 - Commercial Shoe Expedition
 - Several active Chinese construction companies
 - Iranian students in Wuhan Univ.
 - Religious leaders visited Wuhan in January
 - Several airlines with daily flights between China and Iran



Rapid Response Team, MOH and Pasture Institute (20 Feb. Qom)





National Committee on COVID-19 Epidemiology

- 46 (~daily) reports on COVID-19
- Daily Updates Media Briefing





کمیته اپیدمیولوژی کووید 19 💸 گزاره برگها

گزاره برگها

- ﴾ گزاره برگ نسخه ۲۴ خرداد ۹۹ (نسخه فارسی) (English Version)
- 🖇 گزاره برگ نسخه ۱۷ خرداد ۹۹ (نسخه فارسی)(English Version)
- ۵ گزاره برگ نسخه ۱۰ خرداد ۹۹ (نسخه فارسی) (English Version)
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- ۵ گزاره برگ نسخه ۲۷ اردیبهشت ۹۹ (نسخه فارسی) (English Version)
- 👂 گزاره برگ نسخه ۲۳ ار دیبهشت ۹۹ (نسخه فارسی) (English Version)
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- ﴾ گزاره برگ نسخه ۱۶ ار دیبهشت ۹۹ (نسخه فار سی) (English Version)
- ﴾ گزاره برگ نسخه ۱۴ ار دیبیشت ۹۹ (نسخه فار سی) (English Version)
- 🖇 گزاره برگ نسخه ۱۳ ار دیبهشت ۹۹ (نسخه فارسی) (English Version)
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- ﴾ گزاره برگ نسخه ۹ اردیبهشت ۹۹ (نسخه فارسی) (English Version)

http://corona.behdasht.gov.ir/

Public / NGOs Campaign

Food Package Support



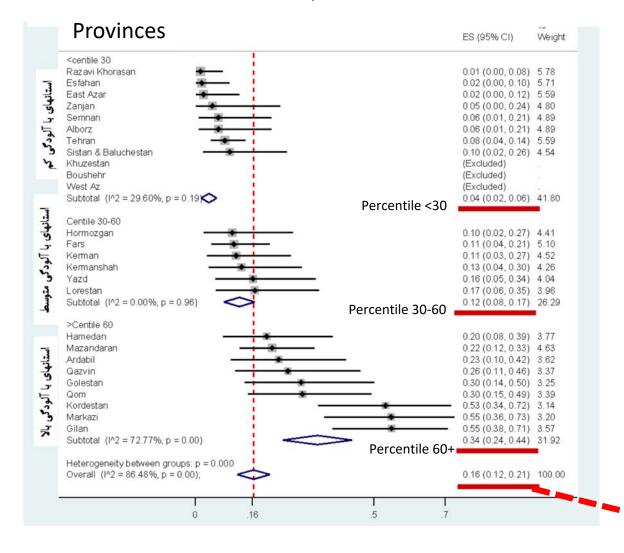
Public / NGOs Campaign

Making Face Masks

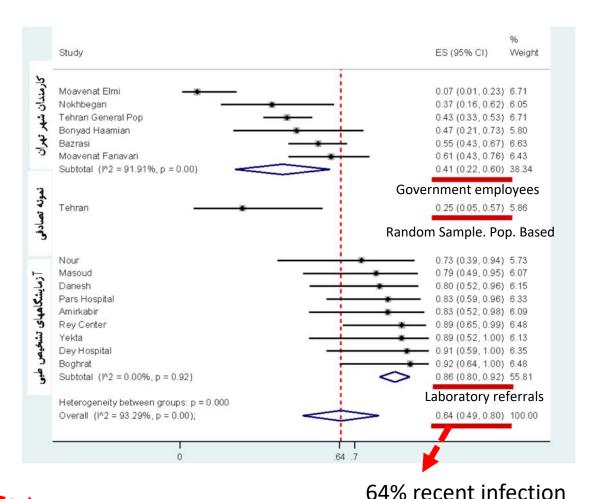


Seroprevalence studies

% IgM or IgG Positive, among Blood Donors 15 May, 2020

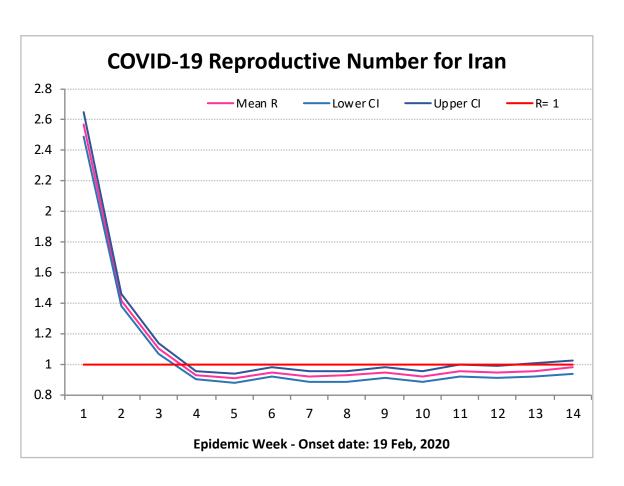


% IgM Positive among those tested positive for COVID-19 in Tehran - 15 May, 2020

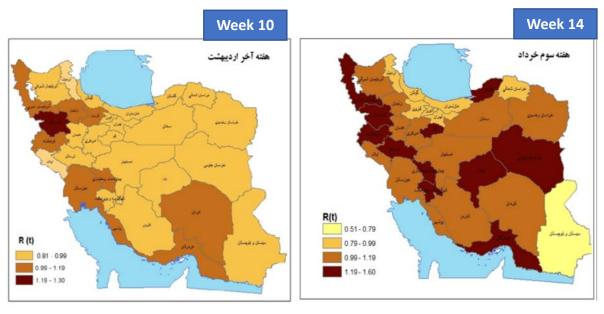


National Average: 16%

Current Epicenters of COVID-19 in Iran



Reproductive number at time t in different provinces, Iran Week 10 vs. week 14



COVID-19 Epicenters Both cases and deaths have increased in the past 3 days

-	* 10 ±3 Ep.	both cases and deaths have increased in the past 5 days
Incidence	Province	Analysis of recent epidemic curve by province (a province can experience one or more epidemic waves)
	Iran	The slight upward changes is seen.
	Khuzestan	The province seems to be crossing a peak.
	Hormozgan	The trend is upward.
e	Kermanshah	The slight upward changes is seen.
en en	Kurdistan	The province seems to be crossing a peak.
Incidence	Zanjan	The trend is upward.
	Lorestan	The trend is upward.
High	East Azarbaijan	The province seems to be crossing a peak.
Ξ	West Azarbaijan	The province seems to be crossing a peak.
	Bushehr	The province seems to be crossing a peak.
	Ardabil	The data is controversial.

Key Interventions Timeline in Iran for Closed Suspending mass gathering for weekend religious events COVID-19 Suspending conferences and social mass gatherings Travel restrictions Suspending mass gathering for religious events Feb 28-29 Restrictions on between-city travels Road closure Scale-up of physical distancing (Phase 2) March 15-19 Focus on community awareness Closed and behaviors change Est. national COVID-19 management committee Feb 20-22 Ban on flights to Closure of subways in all cities (except Tehran) Wuhan, China Closure of religious shrines and holy places Strict supervision on travels Control of passenger Strengthened active case finding March 10-14 Strengthened active case finding importation from Strengthened outpatient testing China Jul Jun Aug Sep Oct Jan Apr Start of the Stepwise relaxation of lockdowns Feb 23-24 Smart social distancing & cancellation of between-city travels Nowruz Lockdown Strengthened early case finding and isolation Holding the competitions without watchers March 1-4 Closure of cinemas, theaters and concerts Closure of schools and universities Cancelling sport competitions **Testing** Closure of some business units in epicenters Closure of parks and promenades Closure of historical & tourism sites in Shiraz & Isfahan Strict limitations on new-year travels Closed

Closed

The streets of Tehran are mostly deserted as panicky residents stick to their homes for fear of COVID-19. Credit...Arash

Khamooshi for The New York Times

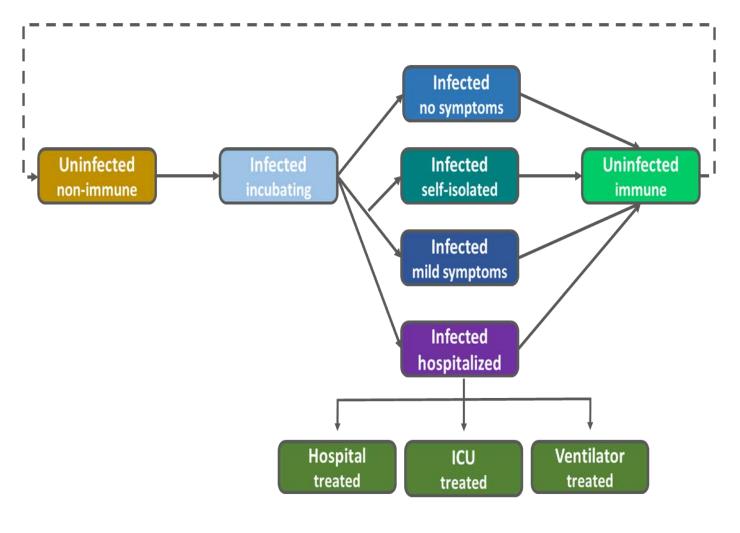
Forecast COVID-19 trend and future waves in Iran

- With no vaccine, non-pharmaceutical interventions (NPI) play a key role in mitigating the pandemic.
- In Iran, the daily number of cases declined for a few weeks in April, but now we see a second wave of the epidemic.
- Study aim: model COVID-19 infections and deaths under the current NPI and two counterfactual scenarios.

CoMo model

- Age structured SEIR model
- Infected compartments stratified by symptoms, severity, treatment seeking and access





Source: CoMo Consortium

Model Inputs / Parameters

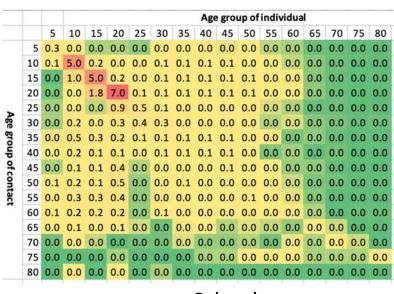
Iran - contact rates matrix (all locations = home + work + school + other)

Contact rate = the number of other people that a person encounters per day

	-		1		1				1		1		1	1	1		1
	Age group of individual																
		5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80
	5	2.13	1.15	0.62	0.40	0.74	1.22	1.33	1.02	0.54	0.29	0.31	0.24	0.14	0.09	0.05	0.04
	10	0.98	7.76	1.49	0.47	0.35	0.87	1.15	1.10	0.83	0.34	0.21	0.18	0.13	0.08	0.04	0.03
	15	0.41	2.41	9.42	1.18	0.58	0.56	0.68	0.90	0.95	0.51	0.25	0.12	0.07	0.07	0.05	0.04
	20	0.25	0.62	3.88	13.57	2.14	1.08	0.68	0.86	0.95	0.83	0.41	0.16	0.08	0.05	0.03	0.02
_	25	0.54	0.44	0.57	4.25	7.10	2.91	1.47	0.96	0.82	1.00	0.63	0.34	0.11	0.05	0.05	0.04
\ge	30	1.16	0.67	0.34	1.28	3.52	5.04	2.29	1.32	0.91	0.74	0.71	0.39	0.16	0.06	0.03	0.02
gro	35	1.08	1.52	1.07	0.64	1.33	2.23	2.86	1.62	1.00	0.62	0.52	0.38	0.19	0.07	0.04	0.03
ğ	40	0.84	1.39	1.14	0.71	0.72	1.32	1.54	2.10	1.23	0.64	0.41	0.25	0.18	0.10	0.05	0.02
ofc	45	0.51	0.94	1.15	1.19	0.79	0.93	1.13	1.16	1.53	0.75	0.46	0.17	0.13	0.08	0.05	0.02
Ön	50	0.29	0.64	0.73	1.32	0.70	0.69	0.71	0.74	0.73	0.87	0.46	0.19	0.08	0.04	0.04	0.04
ntact	55	0.33	0.63	0.83	1.03	0.84	0.96	0.70	0.57	0.67	0.67	0.69	0.35	0.12	0.05	0.03	0.04
	60	0.53	0.73	0.56	0.69	0.58	0.91	0.81	0.53	0.49	0.40	0.47	0.53	0.21	0.09	0.04	0.03
	65	0.43	0.45	0.30	0.39	0.33	0.49	0.52	0.50	0.34	0.24	0.23	0.27	0.30	0.13	0.05	0.02
	70	0.26	0.42	0.34	0.18	0.23	0.31	0.41	0.39	0.31	0.15	0.15	0.18	0.16	0.26	0.08	0.03
	75	0.13	0.38	0.35	0.32	0.13	0.24	0.21	0.34	0.34	0.25	0.19	0.14	0.17	0.16	0.21	0.09
	80	0.23	0.32	0.48	0.40	0.14	0.15	0.21	0.29	0.30	0.29	0.28	0.14	0.08	0.12	0.09	0.13

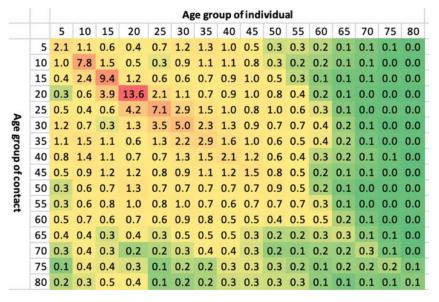
Iran - contact rates matrix home, school, work, other

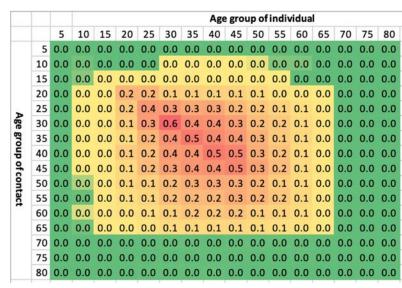
							Α	ge gr	oup (ofind	ividu	ıal					
		5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80
	5	0.5	0.6	0.4	0.2	0.3	0.5	0.6	0.5	0.2	0.1	0.1	0.1	0.1	0.0	0.0	0.0
	10	0.4	0.8	0.5	0.2	0.1	0.3	0.5	0.5	0.4	0.1	0.1	0.1	0.0	0.0	0.0	0.0
	15	0.2	0.5	1.2	0.4	0.1	0.1	0.2	0.4	0.5	0.2	0.1	0.0	0.0	0.0	0.0	0.0
	20	0.1	0.2	0.6	1.1	0.3	0.1	0.1	0.2	0.4	0.4	0.2	0.1	0.0	0.0	0.0	0.0
	25	0.3	0.2	0.2	0.6	1.2	0.4	0.1	0.1	0.2	0.4	0.3	0.1	0.0	0.0	0.0	0.0
Age	30	0.8	0.3	0.1	0.2	0.5	1.1	0.3	0.1	0.0	0.1	0.3	0.2	0.1	0.0	0.0	0.0
gro	35	0.8	0.9	0.5	0.1	0.1	0.4	0.8	0.3	0.1	0.0	0.1	0.1	0.1	0.0	0.0	0.0
6	40	0.6	0.9	0.8	0.3	0.1	0.1	0.2	0.7	0.2	0.1	0.0	0.0	0.1	0.0	0.0	0.0
group of contact	45	0.4	0.7	0.8	0.5	0.2	0.1	0.1	0.2	0.5	0.2	0.1	0.0	0.0	0.0	0.0	0.0
9	50	0.2	0.4	0.5	0.6	0.3	0.1	0.0	0.1	0.1	0.4	0.1	0.0	0.0	0.0	0.0	0.0
act	55	0.3	0.2	0.4	0.4	0.3	0.2	0.1	0.1	0.1	0.1	0.3	0.1	0.0	0.0	0.0	0.0
	60	0.4	0.4	0.3	0.3	0.3	0.3	0.3	0.1	0.1	0.1	0.2	0.3	0.1	0.0	0.0	0.0
	65	0.4	0.4	0.2	0.2	0.1	0.2	0.2	0.2	0.1	0.0	0.1	0.1	0.2	0.1	0.0	0.0
	70	0.2	0.3	0.3	0.2	0.1	0.1	0.2	0.2	0.2	0.1	0.1	0.1	0.1	0.2	0.0	0.0
	75	0.1	0.4	0.3	0.2	0.0	0.1	0.1	0.2	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.0
	80	0.2	0.3	0.4	0.4	0.1	0.1	0.1	0.2	0.2	0.2	0.2	0.1	0.0	0.1	0.1	0.1

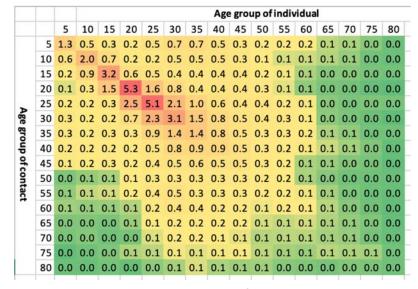


Н	ome	

School







All locations

Work

Other

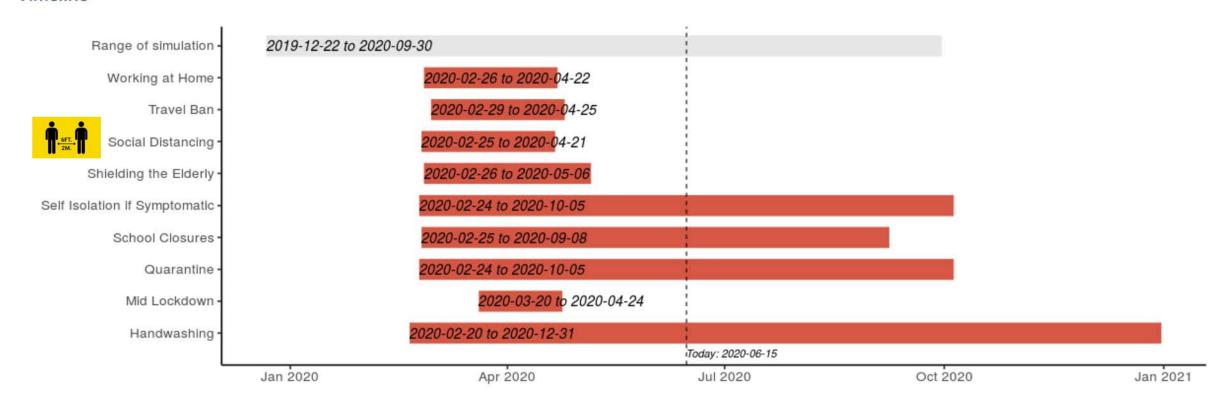
Model Parameters

Hospitalization Parameters	Unit	Value	Source
Maximum number of hospital beds	Beds	100,437	мон.lr
Maximum number of ICU beds	Beds	5,790	мон.lr
Maximum number of ventilators	Ventilators	4,650	мон.lr
Probability of dying when hospitalized (oldest age class)	%	42	мон.lr
Probability of dying when admitted to ICU (oldest age class)	%	60	мон.lr
Probability of dying when ventilated (oldest age class)	%	86	мон.lr
Duration of hospitalised infection	Days	4	мон.lr
Duration of ICU infection	Days	5	мон.lr
Duration of ventilated infection	Days	3	мон.lr

Non-pharmaceutical interventions



Timeline

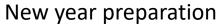


Non-pharmaceutical interventions	Start date	Duration	Coverage	Adherence	Efficacy	Home contacts inflation	Out-home contacts deflation
Lockdown, Mid	3/20/20	5w					
Self-Isolation if Symptomatic	2/24/20	32w	90%	80%			
Screening/Contact-Tracing (Overdisp.=2, Contacts = 4)	2/24/20	32w	75%				
Social Distancing	2/25/20	8w	40%	50%			
Handwashing	2/20/20	45w			5%		
Working at Home	2/26/20	8w	60%		50%	10%	
School Closures	2/25/20	28w			85%	20%	
Shielding the Elderly (age = 60+)	2/26/20	10w	80%		82%		
Travel Ban	2/29/20	8w			50%		
Voluntary home quarantine (Avr. Days = 14, Days with Max Coverage = 2)	2/24/20	32w	50%			20%	60%

Persian New Year Effect

- Mid Lockdown
- 20 March (5 weeks)







Road closure in Iran

Choose One Lockdown:

	Low	Medium	High
Self-isolation coverage	50	75	95
Social distancing coverage	25	75	95
Hand hygiene coverage	5	5	5
Work from home coverage	25	50	75
School closure efficacy	0	85	85
Cocoon coverage	90	90	90
Travel ban efficacy	0	0	95
Quarantine coverage	0	25	90



Start Date:

2020-03-20

Duration of Lockdown:

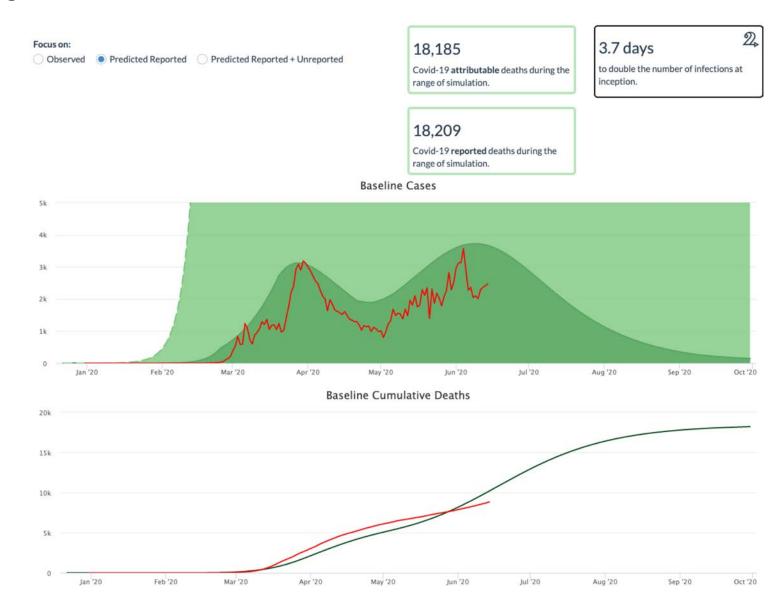


52 weeks



Baseline Visual Fit

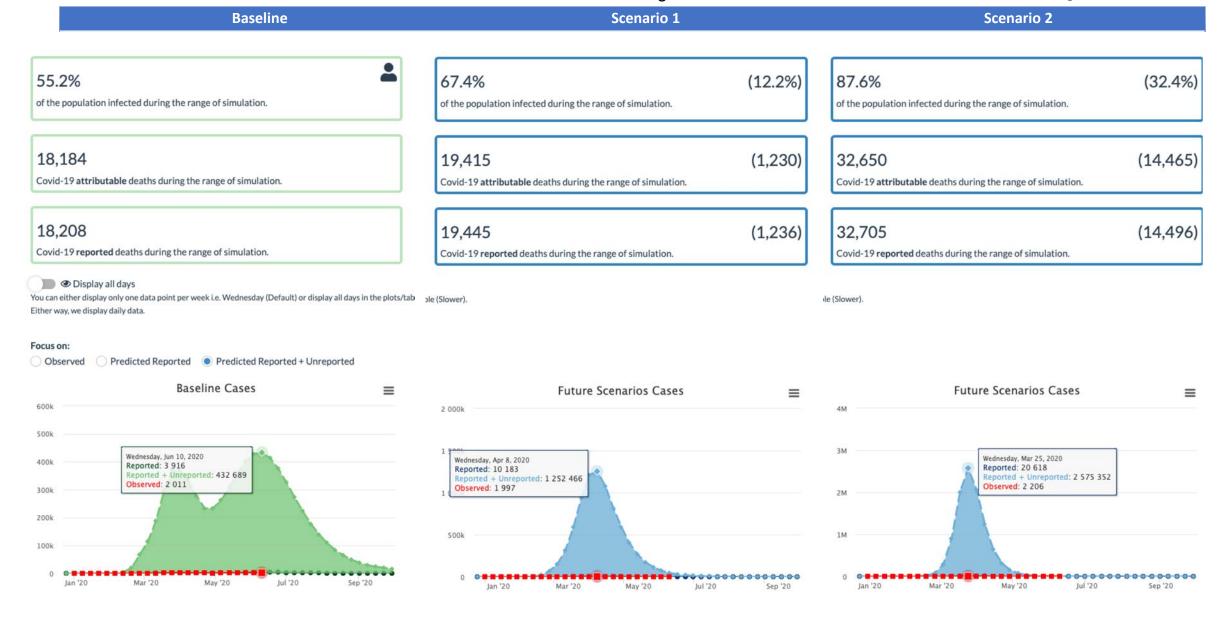




Counterfactual Scenarios

Interventions	Baseline	Scenario 1	Scenario 2
lockdown	Med. 20March-24April	X	X
Self-isolation if symptomatic	✓	✓	
Coverage	90%	90%	
Adherence	80%	80%	X
Duration of intervention	24Feb-5Oct	24Feb-5Oct	
Additional to self-isolation: Screening	✓	✓	
Coverage	75%	75%	x
Duration of intervention	24Feb-5Oct	24Feb-5Oct	
Social Distancing	✓	✓	
Coverage	50%	50%	X
Adherence	50%	50%	^
Duration of intervention	25Feb-21April	25Feb-21April	
Handwashing	✓	✓	✓
Efficacy	5%	5%	5%
Duration of intervention	20Feb-31Dec	20Feb-31Dec	20Feb-31Dec
Working at home (Home C. infl. 10%)	✓		
Coverage	60%	X	X
Efficacy	50%	^	^
Duration of intervention	26Feb-22April		
School Closure (Home C. infl. 20%)	✓		
Efficacy	85%	X	X
Duration of intervention	25Feb-8Sep		
Shielding the Elderly	✓	✓	
Coverage	80%	80%	X
Efficacy	82%	82%	^
Duration of intervention	26Feb-6Jun	26Feb-6Jun	
Voluntary quarantine (Home C. infl. 20%, Other C. Dec. 60%)	✓	✓	
Coverage	50%	50%	X
Days in isolation	14	14	^
Duration of intervention	24Feb-5Oct	24Feb-5Oct	
Travel Ban 50% (29Feb-25Apr)	✓	✓	x

What if we had no intervention but "handwashing"



Baseline Scenario 1 Scenario 2 No Focus
 Hospital Beds
 ICU Beds
 Ventilators Future Scenarios Hospital Occupancy Future Scenarios Hospital Occupancy \equiv \equiv Baseline Hospital Occupancy ≡ 10k 25k Wednesday, Apr 15, 2020 Hospital Surge Beds: 7 874 Wednesday, Apr 1, 2020 Max Hospital Beds: 100 437 Hospital Surge Beds: 17 821 ICU Beds: 1 503 7.5k Max Hospital Beds: 100 437 Max ICU Beds: 5 790 ICU Beds: 3 338 Ventilators: 353 Max ICU Beds: 5 790 Max Ventilators: 4 650 Wednesday, Jun 17, 2020 Ventilators: 810 Hospital Surge Beds: 3 141 Max Ventilators: 4 650 Max Hospital Beds: 100 437 ICU Beds: 601 10k Max ICU Beds: 5 790 Ventilators: 141 Max Ventilators: 4 650 2.5k Jan '20 Mar '20 May '20 Jul '20 Sep '20 Mar '20 May '20 Jul '20 Jan '20 Sep '20 Mar '20 Jul '20 Sep '20 Jan '20 May '20 **Future Scenarios Rt Future Scenarios Rt** \equiv Baseline Rt \equiv \equiv 3.5 3.5 0000000 2.5 2.5 1.5 1.5

May '20

Jul '20

Sep '20

Jan '20

Mar '20

May '20

Jul '20

Sep '20

Jan '20

Mar '20

May '20

Jul '20

Sep '20

Jan '20

Mar '20

Main results		What if we had no "Lockdown", no "School closure" and no "Working at home"	What if we had no intervention but "handwashing"	
	Baseline	Scenario 1	Scenario 2	Averted (Baseline vs. S2)
% Pop. Infected	55.20%	67.40%	87.60%	
COVID-19 Deaths	18,185 (63% in 60+ year	19,415 rs)	32,650	14,465
IFR (%)	0.04%	0.03%	0.04%	
Total Infections	45,816,000	55,942,000	72,708,000	26,892,000

The infection fatality rate of COVID-19 inferred from seroprevalence data (Preprint – 8 June 2020)

John P.A. Ioannidis

https://doi.org/10.1101/2020.05.13.20101253

Infection fatality rates (IFR):

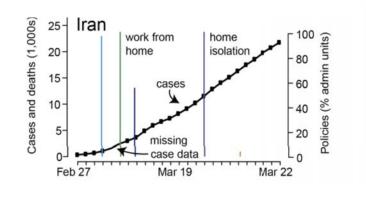
- Overall: 0.02% to 0.86% (Median 0.25%)
- Among people <70 years old: 0.01% to 0.23% (Median 0.04%)

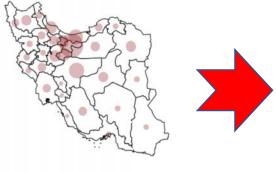
The effect of large-scale anti-contagion policies on the COVID-19 pandemic

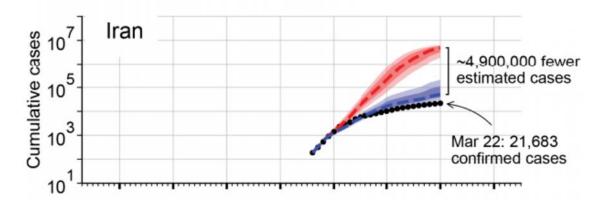


Published: 08 June 2020

- Ongoing anti-contagion policies have already substantially reduced the number of COVID-19 infections observed in the world today. In Iran till 22 March, 2020:
 - 5 million confirmed cases averted
 - 54 million total infections averted

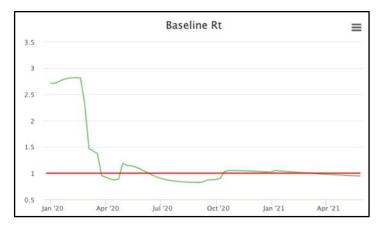


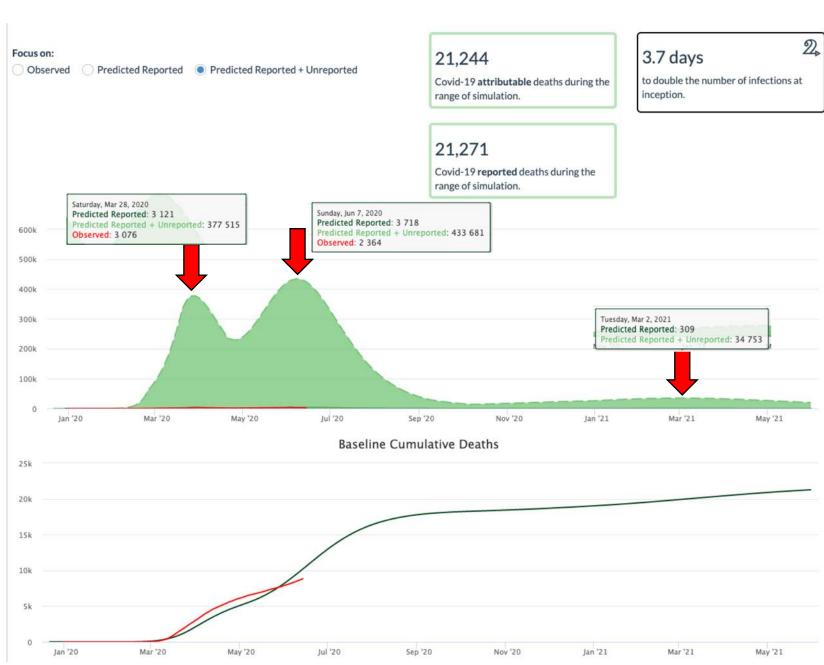




Baseline (Simulation till first of June 2021)

Herd Immunity?





Conclusion

- Iran's non-pharmaceutical interventions strategy that started as early as Feb 24 might have prevented 28 million infections and about 15,000 deaths
- However the interventions were not long and rigid enough to prevent from the second and third wave of the epidemic.
- Slower and more gradual release of interventions is required to prevent future waves of the epidemic.

COVID-19 taught us a lesson (hopefully) we will never forget:

While busy with tweets, politics ... a deadly virus was spreading around the World ...











Together, we will overcome COVID-19

Thank you for listening ©

Special thanks to my colleagues:

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