

Weekly COVID-19 Epidemiological Update - Region of the Americas

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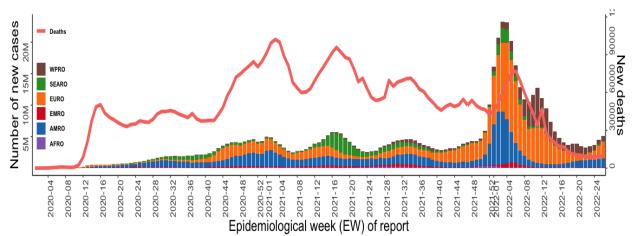
Contents:

- Executive summary including global overview
- Regional and sub-regional trends
- Immunisation
- Genomic Surveillance

Executive Summary

- Since the onset of the pandemic in 2020 and up to July 06, 2022, a cumulative total of approximately 548 million COVID-19 cases including 6.3 million deaths were reported from all six WHO regions. During epidemiological week (EW) 26, cases increased in all (range: 3.7-30.8%) but one region the African region (-32.3%). COVID-19 deaths decreased in three regions while they increased in the regions of the Americas (6.1%), Eastern Mediterranean (34.9%), and South-East Asia (15.9%).
- **Globally,** approximately 5,249,628 new COVID-19 cases were reported in EW 26 (June 26, 2022-July 02, 2022) a 15.5% increase compared to EW 25 (June 19, 2022-June 25, 2022) (**Figure 1**). For the same period, 9,433 new COVID-19 deaths were reported globally remained stable with a 0.6% relative decrease compared the previous week.
- In the region of the Americas, 1,519,370 cases and 4,713 deaths were reported in EW 26 a 9% increase in cases and 6.1% increase in deaths compared to the previous week.
- At the subregional level, COVID-19 cases increased in all (range: 1.9-15.4%) but one subregion Caribbean and Atlantic Ocean Islands (-7.7%). Similarly, COVID-19 deaths increased in all subregions except for the North American subregion (-0.1%).
- The overall weekly case notification rate for the region of the Americas was 148.6 cases per 100,000 population during EW 26 (136.3 the previous week). Between EW 26 and 25, the 14-day COVID-19 death rate was 8.9 deaths per 1 million population (8.1 the previous two weeks).
- Among 31 countries/territories in the region with available data, **COVID-19 hospitalizations** increased in 17 countries and territories (range: 0.4% 233.3%) during EW 26 compared to the previous week. Among 25 countries and territories with available data, COVID-19 **ICU admissions** increased in 16 countries and territories (range: 2.6% 100%).

Figure 1: COVID-19 cases and deaths by epidemiological week (EW) of report and WHO region. EW 4, 2020 - EW 26, 2022.



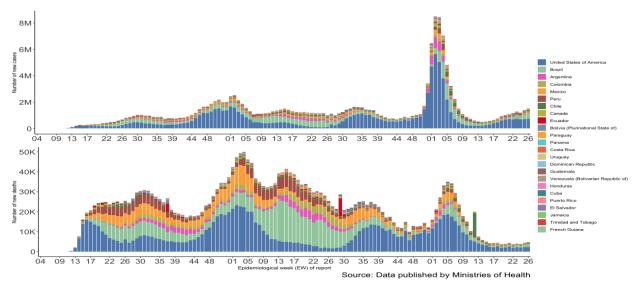
Source: Data from WHO COVID-19 Dashboard





Region of the Americas - An overview

Figure 2: COVID-19 cases and deaths by epidemiological week (EW) of report and country/territory. Region of the Americas. EW 3, 2020 - 26, 2022.



During EW 26, 1,519,370 new **COVID-19 cases** were reported in the region of the Americas - a relative increase of 9% compared to previous week **(Figure 2)**. The highest number of COVID-19 cases during EW 26 was reported from the North American subregion (866,258 cases, 6% increase) while the largest relative increase was observed from the South American subregion (574,121 cases, 15.4% increase) compared to the previous week. **(Table 1)**. At the country level, the highest proportion of weekly COVID-19 cases was reported from the United States of America (738,301 new cases, 4.2% increase), followed by Brazil (410,897 new cases, 17.5% increase), Mexico (111,468 new cases, 22.5% increase).

Table 1: Weekly change (%) in cases and deaths between EW 25 and EW 26 by subregion. Region of the Americas

Subregion	Total Cases	Total Deaths	Cases EW 25	Deaths EW 25	Cases EW 26	Deaths EW 26	% Change Cases	% Change Deaths
Caribbean and Atlantic Ocean Islands	3,893,628	33,814	47,768	129	44,088	136	-7.7%	5.4%
Central America	3,423,568	51,492	34,265	125	34,903	141	1.9%	12.8%
North America	96,718,117	1,378,698	814,882	2,475	866,258	2,472	6.3%	-0.1%
South America	59,779,607	1,303,166	497,596	1,711	574,121	1,964	15.4%	14.8%

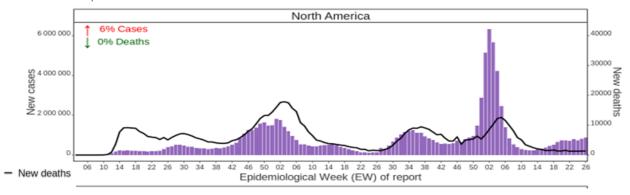
For the same period, 4,713 **COVID-19 deaths** were reported in the region of the Americas - a relative increase of 6.1% compared to previous week **(Figure 2)**. The subregion reporting the highest number of COVID-19 deaths in the last week was North America (2,472 deaths, 0% decrease) **(Table 1)**. At the country level, the highest proportion of weekly COVID-19 deaths was reported by the United States of America (2,239 deaths, -0.4% decrease), followed by Brazil (1,471 deaths, 12% increase), and Chile (178 deaths, 11.9% increase).

A summary of the COVID-19 trends for EW 26 by subregion is presented below.

North America

COVID-19 cases have been increasing in North America for the past three consecutive weeks, with the highest number of weekly cases for the subregion being observed after EW 7, 2022 (866,258 cases, 6.3% increase during EW 26 compared to the previous week). All three countries in the subregion reported an increase in weekly cases during EW 26, with the largest proportion of cases being reported from the United States of America (738,301 cases, 4.2% increase), followed by Mexico (111,468 cases, 22.5 % increase), and Canada (16,489 cases, 9.6% increase).

Figure 3: COVID-19 cases and deaths by epidemiological week (EW). **North America.** Region of the Americas. EW 3, 2020 - EW 26, 2022.



During the same period, there were no substantial changes in weekly COVID-19 deaths in the subregion - decreased by 0.1% (2,472 deaths) relative to the previous week. While Canada reported a decline in weekly deaths (109 new deaths, - 20.4% decrease), Mexico reported a large increase in deaths (124 new deaths, 39.3% increase) during EW 26 as compared to the previous week. The United States of America observed no major changes in its weekly deaths (2,239 new deaths, - 0.4% decrease).

Among two countries with data available for **COVID-19 hospitalizations and ICU admissions**, Canada reported an increase in its weekly hospitalizations (n=3,505; 3.1% increase) for the first time after observing a decrease for about eight weeks, and a slight decrease in its ICU admissions (n=220; -5.2% decrease) during EW 26 compared to the previous week. In the United States of America, both weekly hospitalizations and ICU admissions have been increasing for the past 11 consecutive weeks — an 6.6% increase in hospitalizations (n=33,674) and a 7.5% increase in ICU admissions (n=3,714) during EW 26 compared to the previous week.

Mexico has been observing a surge in cases and deaths for the past consecutive 11 weeks and three weeks with a 22.5% and a 39.3% increase observed during EW 26, respectively. The national COVID-19 hospital occupancy of Mexico increased from 4% on mid-June 2022 to 10% on 2 July 2022.1

In the United States of America, the proportion of Omicron variant of concern (VOC) lineages BA.4 and BA.5 was estimated to make up about 70% of the total weekly sequenced samples, 53.6% and 16.5% respectively, as of the week of July 2, 2022 – 34% relative increase compared to the previous week.² Similarly in Canada, the proportion of BA.4 and BA.5 subvariants of Omicron has been increasing for the past four weeks, making up about 7.4% and 20.4%, respectively, of the sequenced data within the country as of the week of June 12, 2022.³

¹ Secretaría de Salud de México. COVID-19 Technical Statement. 6 July 2022. Available at: https://bit.ly/3uvSlyx

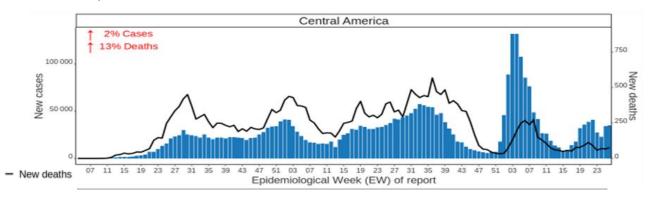
² United States Centers for Disease Control and Prevention (CDC). Variant Proportions. Accessed 6 July 2022. Available at: https://bit.ly/30bz8cT

³ Public Health Agency of Canada (PHAC). COVID-19 Epidemiological Update. Accessed 28 June 2022. Available at: https://bit.ly/3bbFRFr

Central America

In Central America, COVID-19 incidence has increased for the second consecutive week during EW 26 compared to the previous week (**Figure 4**), with 34,903 new cases reported — a 1.9% increase compared to the previous week — driven primarily by the large increase in cases observed in Guatemala. Please note that data from EW 23 to EW 26 for Costa Rica were not publicly available, resulting in a data artifact in percent change of COVID-19 cases and deaths for the subregion.

Figure 4: COVID-19 cases and deaths by epidemiological week (EW). **Central America. Region of the Americas.** EW 6, 2020 - EW 26, 2022.



During EW 26, the countries with the largest proportion of reported cases included Guatemala (22,250 new cases, 51.7% increase), Panama (10,642 new cases, -11.4% decrease), and Belize (1,101 new cases, -1.6% decrease). In the subregion, two countries reported an increase in weekly cases - Guatemala (22,250 new cases, 51.7% increase) and Nicaragua (71 new cases, 100% increase). However, the increase in cases of Nicaragua is a result of a data artifact since data for EW 25 was not available.

During EW 26, **COVID-19 weekly deaths** increased by approximately 12.8% relative to the previous week **(Figure 4)**, with four countries and territories reporting an increase (range: 5.1% - 250%). The largest proportion of weekly deaths was reported from Guatemala (103 deaths, 5.1% increase), followed by Panama (28 deaths, 27.3% increase). During EW 26, there were no substantial changes observed in Honduras (1 death, 50% decrease) and Belize (1 deaths, 0% change).

Among three countries/territories with available data for **weekly COVID-19 hospitalizations** in the Central American Subregion, two reported an increase in their weekly COVID-19 hospitalizations — Honduras (46 hospitalizations, 53.3% increase) and Panama (246 hospitalizations, 0.4% increase), while Belize reported a 50% decline (7 hospitalizations) during EW 26 compared to the previous week. Similarly, both countries/territories with available data for **weekly COVID-19 ICU admissions** reported an increase during EW 25 — Honduras (8 ICU admissions, 60% increase) and Panama (39 ICU admissions, 2.6% increase).

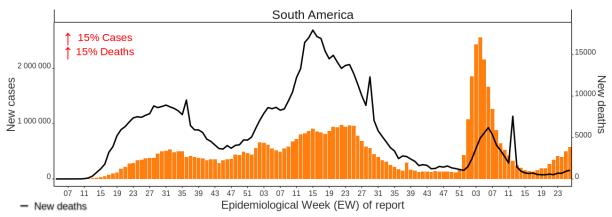
In Guatemala, COVID-19 incidence has been rapidly increasing since end of May 2022 with a 51.7% increase of weekly cases (n=22,250) reported during EW 26 compared to the previous week. The reported positivity rate from June 15 to 28 is 23.7% in Guatemala, indicating about an 85% increase compared to the first half of June 2022.⁴ The national hospital occupancy within the country is about 11% (234 hospitalizations) — an approximately 77% relative increase from the previous week as of June 28, 2022.⁴

In the Central American subregion, Omicron lineages BA.4 and BA.5 have been reported from three of the seven countries/territories: Costa Rica, Panama, and Guatemala as of July 2, 2022.

⁴ Recursos para Prensa - Gobierno de Guatemala. Accessed 6 July 2022. Available at: https://bit.ly/3ljCSXV

South America

Figure 5: COVID-19 cases and deaths by epidemiological week (EW). **South America. Region of the Americas.** EW 3, 2020 - EW 26, 2022.



In South America, COVID-19 incidence continued to increase for the second consecutive week since with a total of 574,121 new COVID-19 cases being reported during EW 26 - a 15.4% increase compared to the previous week (**Figure 5**).

During EW 26, all countries/territories experienced an increase in weekly cases (range: 0.5 - 152.3% increase) with the exception of Uruguay — which reported an 18.6% decrease (4,622 cases) compared to the previous week. The highest proportion of reported cases was reported from Brazil (410,897 new cases, 17.5% increase), followed by Chile (65,891 new cases, 0.5% increase), and Argentina (27,154 new cases, 5.7% increase). The largest relative increase was observed in Paraguay (5,309 new cases, 152.3% increase), followed by Bolivia (Plurinational State of) (8,713 new cases, 58.9% increase), and Peru (18,673 new cases, 26.6% increase).

For the same period, a total of 1,964 COVID-19 deaths were reported in the subregion — a 14.8% increase compared to the previous week. Similar to the cases, weekly deaths increased in nine out of ten countries and territories (range: 5.3 — 300% increase), while Argentina reported a decline in deaths (n=39; -27.8% decrease) during EW 26 compared to the previous week. In the subregion, the largest proportion of reported deaths were reported by Brazil (1,471 new deaths, 12% increase), followed by Chile (178 new deaths, 11.9% increase), and Colombia (100 new deaths, 92.3% increase).

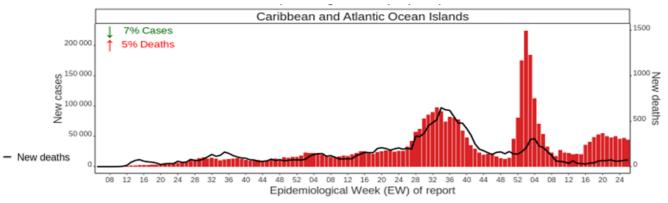
For the same period, among five countries/territories with available data for **COVID-19 weekly hospitalizations**, four experienced an increase in their weekly hospitalizations (range: 3.1 - 8.2% increase) while there were no substantial changes in hospitalizations in Ecuador (127 hospitalizations, 0% change). In terms of **COVID-19 ICU admissions** with available data, two countries/territories reported an increase during EW 26 compared to the previous week — Colombia (394 ICU admissions, 25.9% increase) and Argentina (386 ICU admissions, 2.9% increase), while four countries/territories reported a decline (range: -100 - -6.2% decrease).

In Colombia, sustained increases have been observed in weekly hospitalizations and ICU admissions over the past six weeks - 1,655 hospitalizations; 18.2% increase & 394 ICU admissions; 25.9% increase, along with a 92.3% increase in weekly deaths (100 new deaths) observed during EW 26 compared to the previous week.

As of July 2, 2022, the Omicron lineages BA.4 and BA.5 have been reported from six out of the 10 countries in the subregion: Argentina Brazil, Chile, Colombia, Ecuador, and Peru.

Caribbean and Atlantic Ocean Islands

Figure 6: COVID-19 cases and deaths by epidemiological week (EW). **Caribbean and Atlantic Ocean Islands.** Region of the Americas. EW 6, 2020 - EW 26, 2022.



In the Caribbean and Atlantic Ocean Islands sub-region, **weekly cases** have been plateauing for about three consecutive weeks with a slight decrease of 7.7% (44,088 new cases) observed during EW 26. COVID-19 weekly deaths have increased by 5.4% compared to the previous week **(Figure 6)**. At the national level, cases increased in 16 out of the 34 countries and territories in the subregion (range: 1.1% - 500%) while it declined in the remaining 18 countries and territories (range: -100% - -3.2%).

During EW 26, a total of 136 **weekly deaths** were reported in the Caribbean and Atlantic Ocean Islands subregion -5.4% increase compared to the previous week. Of the total, ten countries/territories observed a relative increase in their weekly deaths in EW 26 (range: 10.5 - 150% increase). Weekly deaths either remained the same (Saint Vincent and the Grenadines, 0% change) or declined in the remaining countries/territories of the subregion (range: -100 - -25% decrease) during EW 26.

Among 21 countries and territories with available data, nine reported an increase in their weekly **COVID-19 hospitalizations** (range: 2.5 – 233.3% increase), with the largest increase observed in Saint Vincent and the Grenadines (10 hospitalizations, 233.3% increase), followed by Antigua and Barbuda (3 hospitalizations, 50% increase), and Anguilla (3 hospitalizations, 50% increase). Among 14 countries/territories with data available for **COVID-19 ICU admissions**, 11 reported a relative increase during EW 26 compared to the previous week (range: 10.2 - 100% increase), one reported a decline — Guadeloupe (7 ICU admissions, -36.4% decrease), and two reported no changes — French Guiana (5 ICU admissions) and Suriname (15 ICU admissions).

Significant increases in weekly cases in the subregion during EW 26 were reported from Saint Pierre and Miquelon (12 cases, 500% increase), Saint Kitts and Nevis (193 cases, 421.6% increase), and Montserrat (4 cases, 300% increase).

For the same period, **notable increases in weekly hospitalizations and weekly ICU admissions** were observed in Cuba (132 hospitalizations; 17.9% increase & 2 ICU admissions; 100% increase), and Martinique (131 hospitalizations; 7.4% increase & 13 ICU admissions; 30% increase).

As of July 2, 2022, the Omicron lineages BA.4 and BA.5 have been reported from six and ten out of 34 countries/territories in the subregion, respectively, including the territories of France, the Netherlands, the United Kingdom, and the United States of America. However, these trends should be interpreted with caution due to presence in differences in sequencing capacity and sampling strategies between countries/territories.

Immunization

Figure 7. the COVID-19 Vaccination Uptake (Complete Primary Series & Additional/Booster Doses) grouped by month and country income level. The region of the Americas. January 2021 – June 2022.

Vaccination Uptake (Complete Primary Series & Additional/Booster Doses) for the Americas by month and income level (n=42)

(Percentages w.r.t. 2021 UN Population/U. S. Census Bureau for pop < 100k) (Income groups based on World Bank 2021-2022 Income Level Classification)

HIGH INCOME

UPPER MIDDLE INCOME

LOWER MIDDLE INCOME

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Figure 7 shows the COVID-19 vaccination uptake (Complete Primary Series & Additional/Booster Doses) grouped by month and country income level in the region of the Americas between January 2021 and June 2022.

Countries' COVID-19 vaccination coverage rates are stratified by the World Bank 2021-2022 Income Level Classification:

Compared to other countries, high-income countries/territories started vaccination operations sooner (thanks to bilateral purchases and established vaccination platforms for adults). For example, high-income countries/territories achieved a 14.8% uptake in primary series coverage in April 2021, while upper- and lower-middle countries only achieved a 3.4% and 0.5% uptake for the same month, respectively.

Even though vaccination in the upper-middle income countries started operations at a slower pace, they were able to sustain a 5-month consecutive increase of primary series vaccination uptake (from June through October 2021), and their primary series vaccination rates that have declined at a slightly slower pace. Instead, high income countries maintained a consecutive increase in the same category for only 3 months: February through April 2021. As of June 2022, upper-middle income countries have overtaken high-income countries, reporting a vaccination coverage rate by 2 percentage points.

When compared to upper-middle income countries, lower-middle income countries report the same trend, but significantly fewer vaccine doses administered. Where upper-middle income countries achieved uptakes of up to 11.9% in the last quarter of 2021, lower-middle income countries only reached a peak of 6.3% during the same period. However, lower-middle income countries make up the only group to show a fluctuation in primary series uptake for the March-June 2022 period, while the other two categories reported a steady increase and then decrease throughout 2021 and 2022. As of June 2022, lower-middle income countries report the highest uptake for the primary series (1.9%), compared to upper-middle income countries and high-income countries (0.9% and 0.3%, respectively).

Concerning the uptake of the 1st additional dose, again high-income countries started vaccination operations sooner compared to other countries and administered these doses at a quicker pace. Nonetheless, the administration rate for

these doses was only sustained at >5% for three months: from November 2021 to January 2022. In the upper-middle income countries, uptake was sustained for four months: January through April 2022. By June 2022, upper-middle income countries had surpassed high-income countries in the administration of the 1st additional dose: 42% vs. 35%.

Finally, overall uptake for all dose types combined (primary series and additional doses) is highest in upper-middle income countries, with high-income and lower-middle income countries in second and third place, respectively (even if within 1/10 a percentage point only).

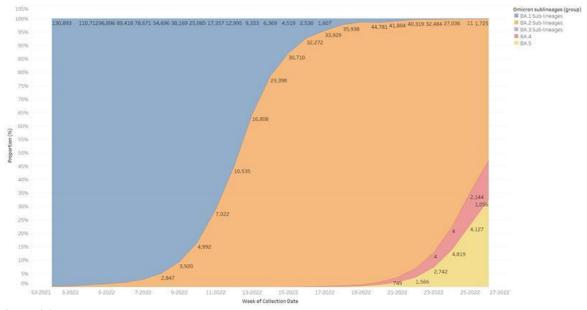
Note: Nine countries/territories were excluded from this analysis because they are currently Not Registered/Unclassified by the World Bank. These are: Anguilla, Bonaire, Guadeloupe, French Guyana, Montserrat, Martinique, Saba, Sint Eustatius, and Venezuela.

Genomic Surveillance

Through PAHO's Genomic Surveillance Regional Network and the work from the Member States, 384,331 full genome sequences of SARS-CoV-2 from Latin America and the Caribbean have been uploaded to the Global Initiative on Sharing All Influenza Data (GISAID) platform up to 5 July 2022.

After the introduction of the Omicron VOC in the Americas at the end of 2021, it has rapidly increased in prevalence and has been officially reported by 54 countries or territories. Omicron is now predominant in all PAHO countries, and few other lineages are currently detected in the Region. Omicron comprises the BA.1 to BA.5 sublineages, some of which are also subdivided into additional sublineages. The cumulative proportion of sequences collected in the Americas from November 2021 to date are: 70% of BA.1 (and BA.1 sublineages), 28.5% of BA.2 (and sublineages), <0.01% of BA.3 (and sublineages), 0.39% of BA.4, and 0.59% BA.5 (and sublineages). Although BA.1 accounts for the majority of cumulative sequences, BA.2 became predominant in all subregions between weeks 12 and 15 of 2022, and few BA.1 sequences have been identified since week 22 (**Figure 8**). At the same time, the proportion of BA.4 and in particular BA.5 have been increasing throughout the Region. Notably, in the past four weeks, the BA.4 and BA.5 combined represent 36%, 46%, and 38% of the characterized samples in North America, the Caribbean, and South America, respectively.

Figure 8. Distribution of VOC Omicron sublineages identified by the countries in the Region of the Americas (January-June 2022)



Source: GISAID

Spotlight: Sequencing and genomic surveillance in the Southern Cone

During the last 18 months (January 2021 to 28 June 2022), 196,045 whole genome sequences from the Southern Cone countries (Argentina, Brazil, Chile, Paraguay, and Uruguay) have been generated as part of the genomic surveillance systems (**Figure 9**). As in other subregions, Omicron is vastly predominant and the only "previously circulating" VOC/VOI detected in the past four weeks has been Delta (last detection in a sample collected on 8 June 2022) (**Figure 10**). Since Omicron's first detection, BA.1 and BA.1 sublineages represent the majority (81%) of cumulative sequences, while BA.2 and BA.2 sublineages represent 18% of the cumulative sequences, and BA.3, BA.4, and BA.5 represent 1.21%, 0.68%, and 0.53% of cumulative sequences, respectively (**Figure 11**). However, BA.1 was progressively replaced by BA.2 in weeks 12 to 18, and the proportion of BA.4 and BA.5 have been increasing since week 22 (**Figure 12**). When focusing on the past four weeks, BA.2 is the predominant sublineage (66.8%) while BA.4 and BA.5 account for 16.8% and 15.3% of the sequences, respectively. In the same period, BA.1 represents less than 1% and BA.3 less than 0.2% of the sequences. It is important to note that the majority of sequences for the 4-week period was contributed by Brazil (96.6%).

It is important that all countries at PAHO region continue the collection of representative samples for sequencing and to maintain COVID-19 appropriate genomic surveillance.

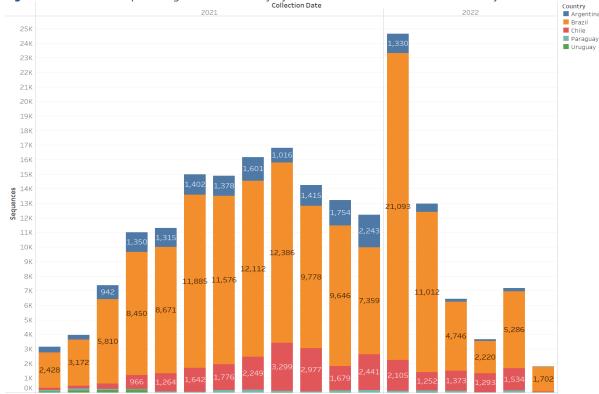
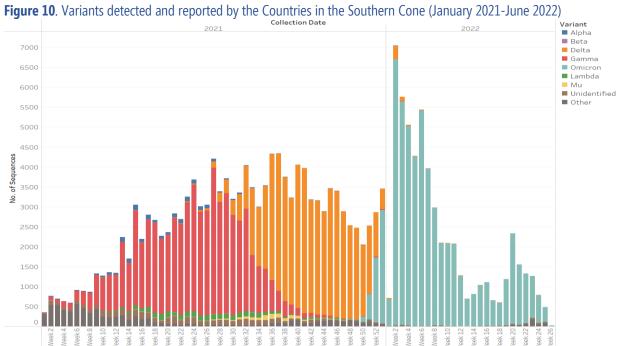


Figure 9. Number of sequences generated monthly by countries in the Southern Cone (January 2021-June 2022)

Source: GISAID



Source: GISAID Country-specific data is available at: https://ais.paho.org/phip/viz/SARS_CoV2_variants_regional.asp

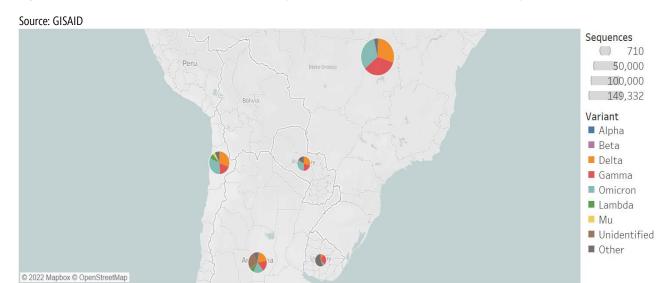


Figure 11. Distribution of VOC and VOI identified by the Countries in the Southern Cone (January 2021-June 2022)

(January-June 2022)

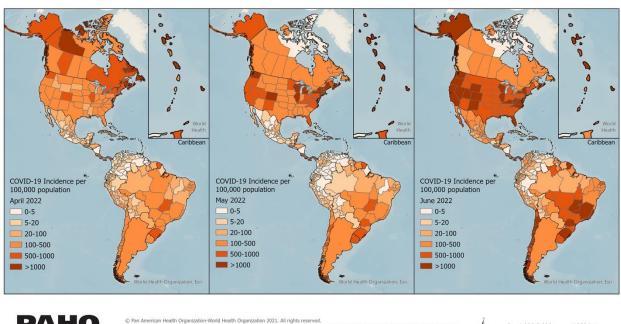
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Figure 12. Distribution of VOC Omicron sublineages identified by the countries in the Southern Cone subregion (January-June 2022)

Source: GISAID



Annex 1. The maps of monthly COVID-19 case incidence rates per 100,000 population. The region of the Americas. From April to June 2022.



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The maps (**Annex 1**) compare the monthly COVID-19 case incidence rates per 100,000 population in the region of the Americas between April, May, and June 2022. Overall, in all subregions, there has been an increase in COVID-19 incidence over time in the last three months. In April-May 2022, the largest relative increase was observed in Central America while in May-June 2022, the largest increase was observed in South America. A slight decrease in incidence was noted in the Caribbean region in June compared to May 2022.

Between May and June 2022, the largest relative increases in cases were seen in South America in Ecuador, Brazil, Colombia, Bolivia, and in Central America in El Salvador, Belize, and Guatemala. In North America, the largest relative increase was observed in Mexico. During the previous period (April-May 2022), countries with greatest relative increases were Panama, Belize, Argentina, Uruguay, the United States and in most Caribbean Islands as well as Guyana shield countries (Guyana, French Guiana, and Suriname).

Countries/territories reporting the highest incidence per 100,000 population (>1000 cases per 100,000 population) in April were Canada, the United States, and the following Caribbean islands: Guadeloupe, Martinique, Puerto Rico, Barbados, and Bonaire. In May, it was the United States, Brazil, Chile, Panama, Belize, Costa Rica, French Guiana, the same Caribbean islands as the previous period and in addition: Aruba, Dominica, Saint Lucia as well as the British and U.S. Virgin Islands. Finally in June territories with highest incidence rates were similar to the previous two periods, with overall more states in Brazil and the United States reporting over 500 cases per 100,000. Relative decreases in incidence over time in the last quarter were observed in several Caribbean islands and in Canada.



