COVID-19 Update June 10, 2021

As of June 09, 2021, the total of laboratory-confirmed and probable COVID-19 cases reported among Connecticut residents is 348,319, including 318,795 laboratory-confirmed and 29,524 probable cases. Seventy-one patients are currently hospitalized with laboratory-confirmed COVID-19. There have been 8260 COVID-19-associated deaths.

Overall Summary	Total**	Change Since Yesterday
COVID-19 Cases (confirmed and probable)	348319	+57
COVID-19 Tests Reported (molecular and antigen)	9353117	+13090
Daily Test Positivity*		0.44%
Patients Currently Hospitalized with COVID-19	71	-5
COVID-19-Associated Deaths	8260	+3

**Includes confirmed plus probable cases





Total Cases: 348,319

Hospital Census



Hospital Census: 6/09/2021: 71

Admissions



Total Hospitalizations: 36,284

Deaths



Total Deaths: 8260

COVID-19 Cases and Associated Deaths by County of Residence

As of 06/09/21.

County	COVID-19	Cases	COVID-19-Associated Deaths		
County	Confirmed	Probable	Confirmed	Probable	
Fairfield County	91,395	8,852	1,772	429	
Hartford County	78,617	5,649	1,993	438	
Litchfield County	12,948	1,684	259	39	
Middlesex County	11,674	1,143	285	86	
New Haven County	82,692	9,435	1,830	296	
New London County	21,263	1,259	348	102	
Pending address validation	1,010	173	0	1	
Tolland County	8,734	879	149	38	
Windham County	10,462	450	154	41	
Total	318795	29524	6790	1470	

<u>National COVID-19 statistics</u> and information about <u>preventing spread of COVID-19</u> are available from the Centers for Disease Control and Prevention.

Day-to-day changes reflect newly reported cases, deaths, and tests that occurred over the last several days to week. All data in this report are preliminary; data for previous dates will be updated as new reports are received and data errors are corrected. Hospitalization data were collected by the Connecticut Hospital Association. Deaths reported to either OCME or DPH are included in the daily COVID-19 update.

COVID-19 Cases and Deaths Over Time

The chart below shows the number of new COVID-19 cases reported to CT DPH by week of specimen collection or onset of illness. Case data includes probable cases based on positive antigen test results. During the past two weeks (May 23-June 05), there were 1204 new COVID-19 cases, including cases among people residing in the community and congregate settings, such as nursing homes, managed residential communities, and correctional facilities.



The graph below shows the number of COVID-19 associated deaths since August 1st by week of death and whether the person was residing in a congregate setting, such as a nursing home, managed residential community, or correctional facility.



Community Transmission of COVID-19

Among 1204 new COVID-19 cases with specimen collection or onset date during May 23-June 05, there were 1203 cases among people living in community settings, as shown in the map below. This corresponds to an average of 2.41 new COVID-19 cases per day per 100,000 population. Cases among people residing in nursing homes, assisted living facilities, and correctional facilities are excluded. Darker colors indicate towns with more cases.

During this two-week period, there were more than 100 new COVID-19 cases in one town.

Number of COVID-19 Cases among People Living in Community Settings by Town with Specimen Collection or Onset Date During May 23-June 05



Map does not include 5 cases pending address validation

Because towns with larger populations are likely to have more cases, it is also important to look at the number of new cases per 100,000 population. The maps below show the average number of new cases per 100,000 population per day, with darker colors indicating higher rates. Cases among people residing in nursing homes, assisted living facilities, and correctional facilities are excluded.



Among towns with at least 5 new cases during May 23-June 05, no towns had an average rate of 15 or more cases per 100,000 population per day.

Average Daily Rate of COVID-19 Cases among People Living in Community Settings per 100,000 Population by Town with Specimen Collection or Onset Date During May 23-June 05



Map does not include 5 cases pending address validation

Population, Number and Average Daily Rate of COVID-19 Cases among People Living in Community Settings by Town with Specimen Collection or Onset Date during May 23-June 05, 2021

Mar	o does	not	include	5	cases	pending	addres	s validation
				_		r		

Town	Population	Cases	Rate	Town	Population	Cases	Rate	Town	Population	Cases	Rate
Andover	3,236			Griswold	11,534			Prospect	9,702		
Ansonia	18,654			Groton	38,436			Putnam	9,389		
Ashford	4,255			Guilford	22,133			Redding	9,116		
Avon	18,276			Haddam	8,193			Ridgefield	24,959		
Barkhamsted	3,606			Hamden	60,556			Rocky Hill	20,115		
Beacon Falls	6,222			Hampton	1,842			Roxbury	2,152		
Berlin	20,436			Hartford	122,105	95	5.6	Salem	4,083	5	8.7
Bethany	5,548			Hartland	2,120			Salisbury	3,600		
Bethel	19,800			Harwinton	5,420			Scotland	1,672		
Bethlehem	3,402			Hebron	9,504			Seymour	16,437		
Bloomfield	21,211			Kent	2,777			Sharon	2,689		
Bolton	4,884	5	7.3	Killingly	17,336			Shelton	41,129		
Bozrah	2,726			Killingworth	6,364			Sherman	3,630		
Branford	27,900			Lebanon	7,144			Simsbury	25,395		
Bridgeport	144,399			Ledyard	14,621			Somers	10,784		
Bridgewater	1,635			Lisbon	4,220			South Windsor	26,162		
Bristol	59,947			Litchfield	8,094			Southbury	19,571		
Brookfield	16,973			Lyme	2,316			Southington	43,834		
Brooklyn	8,272	6	5.2	Madison	18,030			Sprague	2,859		
Burlington	9,704			Manchester	57,584			Stafford	11,893		
Canaan	1,053			Mansfield	25,487			Stamford	129,638		
Canterbury	5,079			Marlborough	6,335			Sterling	3,782		
Canton	10,254			Meriden	59 <i>,</i> 395			Stonington	18,559		
Chaplin	2,239			Middlebury	7,798			Stratford	51,849		
Cheshire	28,937			Middlefield	4,374			Suffield	15,814		
Chester	4,213			Middletown	46,258			Thomaston	7,535		
Clinton	12,925			Milford	54,747			Thompson	9,379		
Colchester	15,809			Monroe	19,434			Tolland	14,618		
Colebrook	1,400			Montville	18,508			Torrington	34,044		
Columbia	5,379			Morris	2,254			Trumbull	35,673		
Cornwall	1,362			Naugatuck	31,108			Union	839		
Coventry	12,407			New Britain	72,495			Vernon	29,359		
Cromwell	13,839			New Canaan	20,233			Voluntown	2,510		
Danbury	84,694			New Fairfield	13,878			Wallingford	44,326		
Darien	21,728			New Hartford	6,656			Warren	1,395		
Deep River	4,443			New Haven	130,250			Washington	3,428		
Derby	12,339			New London	26,858			Waterbury	107,568	109	7.2
Durham	7,165			New Milford	26,805			Waterford	18,746		
East Granby	5,140			Newington	30,014			Watertown	21,578		
East Haddam	8,997			Newtown	27,891			West Hartford	62,965		
East Hampton	12,800			Norfolk	1,630			West Haven	54,620		
East Hartford	49,872			North Branford	14,146			Westbrook	6,869		
East Haven	28,569			North Canaan	3,251			Weston	10,252		
East Lyme	18,462			North Haven	23,683			Westport	28,491		
East Windsor	11,668			North Stonington	5,196			Wethersfield	26,008		
Eastford	1,790			Norwalk	88,816			Willington	5,864		
Easton	7,521			Norwich	38,768			Wilton	18,343		
Ellington	16,467			Old Lyme	7,306			Winchester	10,604		
Enfield	43,659			Old Saybrook	10,061			Windham	24,561		
Essex	6,668			Orange	13,926			Windsor	28,733		
Fairfield	62,045			Oxford	13,255			Windsor Locks	12,854		
Farmington	25,497			Plainfield	15,125			Wolcott	16,587		
Franklin	1,920			Plainville	17,534			Woodbridge	8,750		
Glastonbury	34,482			Plymouth	11,598			Woodbury	9,502		
Goshen	2,863			Pomfret	4,203			Woodstock	7,858		
Granby	11,507			Portland	9,267						
Greenwich	62,840			Preston	4,625						

SARS-CoV-2 Variant Surveillance

The Centers for Disease Control and Prevention (CDC) have identified three types of SARS-CoV-2 variants: variants of interest, variants of concern and variants of high consequence. The definitions for the three different variant categories and substitutions of therapeutic concern can be found here: <u>SARS-CoV-2 Variants of Concern | CDC.</u>

Different terminology has been developed by international scientists for naming SARS-CoV-2 variants. Recently, the World Health Organization (WHO) developed new labels for describing these variants to the public. Below, both the Pango lineage (used by CDC) and the WHO label are listed (if available) for each variant described.

Data provided are from the Global Initiative for Sharing Avian Influenza Data (GISAID). GISAID is a global science initiative established in 2008 that provides open-access to genomic data of influenza viruses and the SARS-CoV-2 virus responsible for the COVID-19 pandemic. Laboratories performing whole genome sequencing are encouraged to share their data on this website. More information about GISAID can be found at <u>GISAID - Initiative</u>. This data source provides the ability to monitor all variants of the SARS-CoV-2 virus that are circulating and might be identified in the future.

Below are data on variants of concern, variants of interest and substitutions of therapeutic concern identified among Connecticut residents. No variants of high consequence have been defined by CDC to date.

Data are from GISAID as of 6/10/2021 and represent sequences from specimens with dates of collection from 3/2/2020–5/29/2021. **The total number of SARS-CoV-2 sequences in GISAID for Connecticut residents are 7679.**

	Number	Percentage
Variants of Concern		
B.1.1.7 (Alpha)	3191	41.6%
B.1.351 (Beta)	38	0.5%
P.1 (Gamma)	123	1.6%
B.1.427/B.1.429 (Epsilon)	200	2.6%
Variants of Interest		
B.1.525 (Eta)	19	0.2%
B.1.526 (Iota)	1006	13.1%
B.1.526.1	253	3.3%
B.1.617	0	0%
B.1.617.1 (Kappa)	3	0.04%
B.1.617.2 (Delta)	32	0.4%
B.1.617.3	0	0%
P.2 (Zeta)	9	0.1%
Substitutions of Therapeutic		
Concern		
E484K	1014	13.2%
L452R	527	6.9%

COVID-19 Molecular and Antigen Tests during May 23-June 05

Among 160745 molecular and antigen tests for COVID-19 with specimen collection date during May 23-June 05, 149157 (93%) tests were conducted among people who did not reside in congregate settings (including nursing homes, assisted living, and correctional facilities). Of these 149157 tests, 1519 (1%) were positive. The map below shows the number of molecular and antigen COVID-19 tests by town with specimen collection date during May 23-June 05 that were conducted among community residents.

Number of Molecular and Antigen Tests for COVID-19 among People Living in Community Settings by Town with Specimen Collection Date During May 23-June 05



Map does not include tests pending address validation

Age Distribution of COVID-19 Cases with Specimen Collection or Onset During May 23-June 05, 2020



Average Daily Incidence by Age Group

The chart below shows the average number of new COVID-19 cases per day per 100,000 population by age group. The rates in this chart are calculated by averaging the number of new cases diagnosed each day during the previous two weeks, dividing by the annual population in each age group, and then multiplying by 100,000.

Average daily rate of COVID-19 cases by age group

As of 06/09/2021

2021-04-17 2021-04-24 2021-05-01 2021-05-08 2021-05-15 2021-05-22 2021-05-29 2021-06-05



Average Daily Incidence by County

The chart below shows the average number of new COVID-19 cases per day per 100,000 population in the state of Connecticut and for each Connecticut county. The rates in this chart are calculated by averaging the number of new cases diagnosed each day during the previous two weeks, dividing by the annual estimated population, and then multiplying by 100,000.



Cumulative Number of COVID-19 Cases and COVID-19-Associated Deaths by Date

Test results may be reported several days after the result. Data are incomplete for most recent dates shaded in grey. Data from previous dates are routinely updated.



Hospitalization Surveillance

The map below shows the number of patients currently hospitalized with laboratory-confirmed COVID-19 by county based on data collected by the Connecticut Hospital Association. The distribution is by location of hospital, not patient residence. The labels indicate the number of patients currently hospitalized with the change since yesterday in parentheses.

Patients Currently Hospitalized by Connecticut County

Distribution by location of hospital not patient residence. Data from the Connecticut Hospital Association.



More information about hospitalized cases of COVID-19 in New Haven and Middlesex Counties is available from COVID-NET.

COVID-19 Hospital Census in Connecticut

The chart below shows the COVID-19 hospital census, which is the number of patients currently hospitalized with laboratory-confirmed COVID-19 on each day. Data were collected by the Connecticut Hospital Association and are shown since August 1, 2020.



Weekly hospitalizations by age group in New Haven and Middlesex Counties

The chart below shows the weekly rate of laboratory-confirmed COVID-19-associated hospitalizations by age group for residents of New Haven and Middlesex Counties.

These data were collected by COVID-NET, the COVID-19-Associated Hospitalization Surveillance Network. Connecticut is one of 14 states that participate in COVID-NET, which conducts populationbased surveillance for laboratory-confirmed COVID-19-associated hospitalizations. In Connecticut, COVID-NET surveillance covers residents of New Haven and Middlesex Counties, a population of approximately 1 million. These data are collected in partnership with CDC and other surveillance sites.

COVID-NET hospitalization data are preliminary and subject to change as more data become available. In particular, case counts and rates for recent hospital admissions are subject to lag. As data are received each week, prior case counts and rates are updated.

COVID-NET A Weekly Summary of U.S. COVID-19 Hospitalization Data

Laboratory-Confirmed COVID-19-Associated Hospitalizations

Preliminary weekly rates as of May 29, 2021



Calendar Week Ending (MMWR Week No.)

The Coronavirus Disease 2019 (COVID-19)-Associated Hospitalization Surveillance Network (COVID-NET) conducts population-based surveillance for laboratory-confirmed COVID-19-associated hospitalizations in children (persons younger than 18 years) and adults. The current network covers nearly 100 counties in the 10 Emerging Infections Program (EIP) states (CA, CO, CT, GA, MD, MN, NM, NY, OR, and TN) and four additional states through the Influenza Hospitalization Surveillance Project (IA, MI, OH, and UT). The network represents approximately 10% of US population (~32 million people). Cases are identified by reviewing hospital, laboratory, and admission databases and infection control logs for patients hospitalized with a documented positive SARS-CoV-2 test. Data gathered are used to estimate age-specific hospitalization rates on a weekly basis and describe characteristics of persons hospitalized with COVID-19. Laboratory confirmation is dependent on cinican-ordered SARS-CoV-2 testing. Therefore, the unadjusted rates provided are likely to be underestimated as COVID-19-associated hospitalizations are subject to change as more data become available. In particular, case counts and rates for recent hospital admissions are subject to lag. As data are received each week, prior case counts and rates are unadjusted, recent hospitale. Please use the following citation when referencing these data: "COVID-NET".

COVID-NET A Weekly Summary of U.S. COVID-19 Hospitalization Data

Laboratory-Confirmed COVID-19-Associated Hospitalizations

923 T

L CDC

Preliminary cumulative rates as of May 29, 2021



Calendar Week Ending (MMWR Week No.)

The Coronavirus Disease 2019 (COVID-19)-Associated Hospitalization Surveillance Network (COVID-NET) conducts population-based surveillance for laboratory-confirmed COVID-19-associated hospitalizations in children (persons younger than 18 years) and adults. The current network covers nearly 100 counties in the 10 Emerging Infections Program (EIP) states (CA, CO, CT, GA, MD, MN, NM, NY, OR, and TN) and four additional states through the Influenza Hospitalization Surveillance Project (IA, MI, OH, and UT). The network represents approximately 10% of US population (-32 million people). Cases are identified by reviewing hospital, laboratory, and admission databases and infection control logs for patients hospitalized with a documented positive SARS-CoV-2 test. Data gathered are used to estimate age-specific hospitalization rates on a weekly basis and describe characteristics of persons hospitalized with COVID-19. Laboratory confirmation is dependent on clinican-ordered SARS-CoV-2 test. Therefore, the unadjusted rates provided are likely to be underestimated as COVID-19-associated hospitalizations are subject to lag. As data are received each week, prior case counts and rates or updated accordingly. All incidence rates are unadjusted. Please use the following citation when referencing these data. "COVID-NET: COVID-19-Associated Hospitalization Surveillance Network, Centers for Disease Control and Prevention. WEBSITE. Accessed on DATE".

Daycare Surveillance

Licensed daycare providers are required to report cases of COVID-19 among attendees and staff to the Department of Public Health (DPH) and the local health department. This figure shows the number of cases among daycare attendees and staff reported to DPH since September 1, 2020. Data are preliminary and like other passive surveillance systems, under reporting occurs and the true incidence of disease is more than the number of cases reported.



Laboratory Surveillance

Molecular Tests

To date, DPH has received reports on a total of 8662698 molecular COVID-19 laboratory tests; of these 8440526 test results were received via electronic laboratory reporting (ELR) methods from commercial laboratories, hospital laboratories, and the Dr. Katherine A. Kelley State Public Health Laboratory. The chart below shows the number of tests reported via ELR by date of specimen collection and test result.

Test results may be reported several days after specimen collection. Data are incomplete for most recent dates shaded in grey. Data for previous dates are routinely updated.



Testing of recently collected specimens is ongoing and does not reflect a decrease in testing. Chart only includes test results received by electronic laboratory reporting.

ELR = Electronic Laboratory Reporting

Antigen Tests

To date, DPH has received reports on a total of 690419 COVID-19 antigen laboratory tests. The chart below shows the number of antigen tests reported to DPH by specimen collection date and test result.

Test results may be reported several days after specimen collection. Data are incomplete for most recent dates shaded in grey. Data for previous dates are routinely updated.



Testing of recently collected specimens is ongoing and does not reflect a decrease in testing.

Characteristics of COVID-19 Cases and Associated Deaths

Counts may not add up to total case count because demographic data may be missing.





Counts may not add up to total case count because demographic data may be missing.



Cumulative Number of COVID-19 Cases by Town

Map does not include 1183 cases pending address validation



APPENDIX A. Cumulative Number of COVID-19 Cases by Town

Table does not include 1183 cases pending address validation

Town	Confirmed	Probable	Town	Confirmed	Probable	Town	Confirmed	Probable
·	Cases	Cases		Cases	Cases	-	Cases	Cases
Andover	159	23	Griswold	976	46	Prospect	843	98
Ansonia	1,705	313	Groton	2,583	201	Putnam	830	48
Ashford	232	15	Guilford	1,290	145	Redding	484	77
Avon	919	70	Haddam	511	55	Ridgefield	1304	220
Barkhamsted	167	7	Hamden	5,252	812	Rocky Hill	1673	135
Beacon Falls	523	50	Hampton	167	3	Roxbury	94	33
Berlin	1,494	88	Hartford	15,757	669	Salem	243	18
Bethany	373	42	Hartland	96	2	Salisbury	138	5
Bethel	1,667	306	Harwinton	329	21	Scotland	41	1
Bethlehem	218	37	Hebron	479	52	Seymour	1509	181
Bloomfield	1,961	94	Kent	135	31	Sharon	107	4
Bolton	259	32	Killingly	1,661	73	Shelton	3467	401
Bozrah	217	10	Killingworth	370	38	Sherman	145	67
Branford	2,185	300	Lebanon	454	24	Simsbury	1055	56
Bridgeport	18,277	1,180	Ledyard	1,009	61	Somers	892	84
Bridgewater	55	28	Lisbon	263	12	South Windsor	1566	118
Bristol	5,492	519	Litchfield	442	38	Southbury	1235	224
Brookfield	1,348	370	Lyme	99	8	Southington	3302	407
Brooklyn	808	26	Madison	1,101	104	Sprague	216	19
Burlington	544	66	Manchester	4,513	420	Stafford	631	36
Canaan	13	0	Mansfield	1,364	162	Stamford	15129	710
Canterbury	422	26	Marlborough	372	35	Sterling	285	10
Canton	476	34	Meriden	7,496	661	Stonington	1024	92
Chaplin	126	6	Middlebury	628	90	Stratford	4607	647
Cheshire	2,000	312	Middlefield	233	25	Suffield	1304	291
Chester	217	15	Middletown	3,952	420	Thomaston	698	68
Clinton	954	70	Milford	4,266	500	Thompson	654	32
Colchester	1,086	106	Monroe	1,230	187	Tolland	873	89
Colebrook	56	2	Montville	1,694	112	Torrington	3397	108
Columbia	318	27	Morris	138	7	Trumbull	2931	308
Cornwall	50	0	Naugatuck	3,195	341	Union	61	2
Coventry	671	89	New Britain	9,211	473	Vernon	1862	165
Cromwell	1,169	96	New Canaan	1,366	130	Voluntown	191	6
Danbury	11,532	1,352	New Fairfield	989	192	Wallingford	4209	340
Darien	1,357	164	New Hartford	351	14	Warren	26	13
Deep River	280	28	New Haven	13,321	1,022	Washington	176	41
Derby	1,137	181	New London	3,306	79	Waterbury	14826	1649
Durham	524	67	New Milford	1,718	701	Waterford	1540	87
East Granby	273	13	Newington	2,554	159	Watertown	2194	309
East Haddam	398	68	Newtown	1,718	403	West Hartford	4163	489
East Hampton	753	90	Norfolk	67	1	West Haven	5446	609
East Hartford	6,101	355	North Branford	1,055	158	Westbrook	517	42
East Haven	3,016	449	North Canaan	202	6	Weston	540	60
East Lyme	1,199	138	North Haven	1,972	358	Westport	1666	135
, Fast Windsor	881	64	North	279	22	Wethersfield	2375	128
Eastford	001	2	Stonington	275	027	Wethersheld	2575	22
Eastiord	80	3	Norwalk	10,718	837	winington	260	22
Easton	389	37	Norwich	4,031	186	Wilton	1087	145
Ellington	905	96	Old Lyme	330	11	Winchester	609	12
Entield	3,3//	255	Old Saybrook	829	55	Windnam	3035	123
ESSEX	391	29	Orange	964	133	windsor	2701	149
Fairtield	4,/15	536	Oxford	852	91	Windsor Locks	1029	32
Farmington	1,398	130	Plainfield	1,335	61	Wolcott	1///	202
Franklin	1/7	3	Plainville	1,441	153	Woodbridge	516	/0
Glastonbury	2,021	213	Plymouth	848	111	Woodbury	566	79
Goshen	154	8	Pomfret	243	10	Woodstock	537	13
Granby	568	32	Portland	576	45			
Greenwich	4,729	388	Preston	346	18			

APPENDIX B. The following graphs show the number of cases per 100,000 Connecticut residents statewide and by county, age group, and gender. Population estimate from: <u>DPH Population Statistics</u>







APPENDIX C. The following graphs show the number of cases and deaths by race and ethnicity. *Categories are mutually exclusive. The category "multiracial" includes people who answered 'yes' to more than one race category. NH=Non-Hispanic*







The following graphs show the number of COVID-19 cases and COVID-19-associated deaths per 100,000 population by race and ethnicity. Crude rates represent the total cases or deaths per 100,000 people. Age-adjusted rates consider the age of the person at diagnosis or death when estimating the rate and use a standardized population to provide a fair comparison between population groups with different age distributions. Age-adjustment is important in Connecticut as the median age of among the non-Hispanic white population is 47 years, whereas it is 34 years among non-Hispanic blacks, and 29 years among Hispanics. Because most non-Hispanic white residents who died were over 75 years of age, the age-adjusted rates are lower than the unadjusted rates. In contrast, Hispanic residents who died tend to be younger than 75 years of age which results in higher age-adjusted rates.

The 2018 Connecticut and 2000 US Standard Million populations were used for age adjustment; population estimates from: DPH Population Statistics. Categories are mutually exclusive. Cases missing data on race/ethnicity are excluded from calculation of rates. NH=Non-Hispanic



*Age adjusted rates only calculated for groups with at least 30 deaths

NH BIRCH

NH Muthacial

- AH-White

WHASIAN OF PROVIDE

- Islander

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