



# COVID-19 Fortnightly Surveillance Report

## Summary for the fortnight 24 June to 07 July 2024 (inclusive)

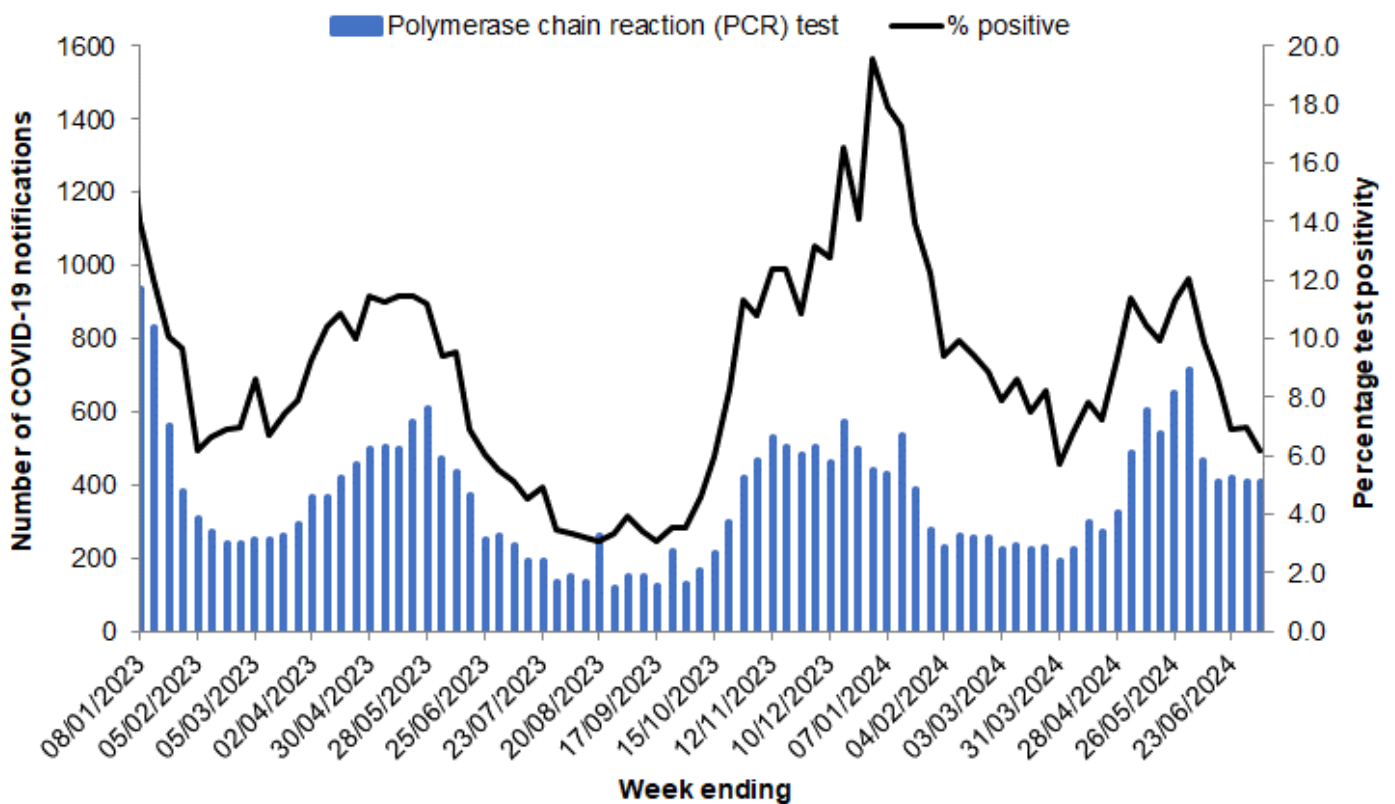
- All COVID-19 activity indicators remained stable this fortnight.
- COVID-19 notifications remained stable with 816 notifications this fortnight compared to 829 last fortnight.
- Currently hospitalised cases remained stable with an average of 187 per day this fortnight compared to an average of 183 per day last fortnight.
- Cases currently in intensive care units increased to an average of 8 per day this fortnight from 6 per day last fortnight.
- Reported COVID-19-related deaths\* increased to 22 deaths this fortnight from 17 last fortnight.
- The SARS-CoV-2 concentration in wastewater from the Perth metropolitan area remained stable this fortnight.
- Genomic sequencing indicated Omicron sub-variant KP.X is now the dominant sub-variant in clinical and wastewater samples.

### Note

\* Reported deaths may include historical deaths that occurred prior to the current reporting period.

## COVID-19 notifications

Figure 1. COVID-19 notifications\* and test positivity by week, Western Australia, 08 January 2023 to 7 July 2024.



### Notes

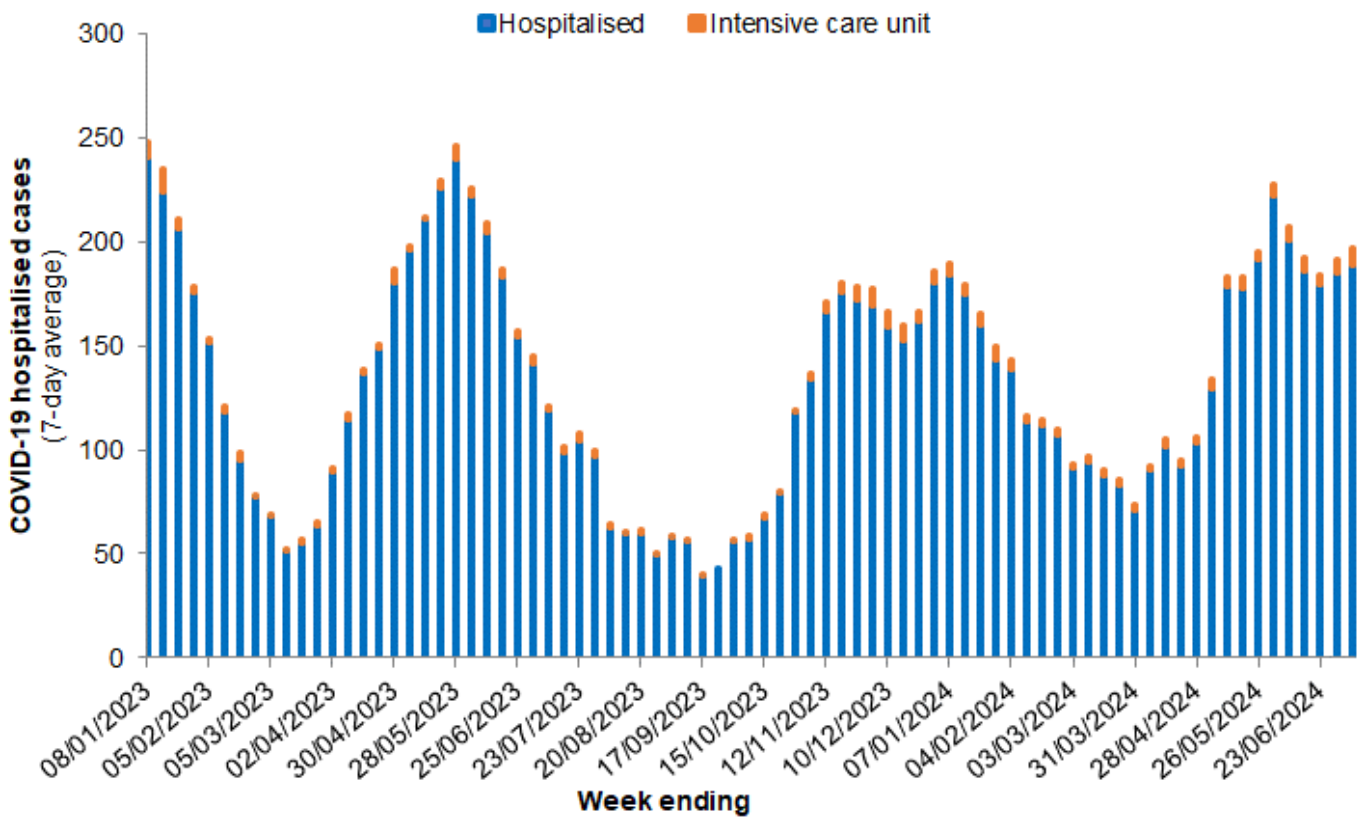
Data sourced from Public Health Operations COVID-19 Unified System (PHOCUS) dataset and Western Australian public and private pathology laboratories.

\*Only confirmed COVID-19 notifications diagnosed by polymerase chain reaction (PCR) are included in this chart; notifications detected by rapid antigen test (RAT) have been excluded.

'Week' refers to data reported over the 7 days from Monday to Sunday.

# COVID-19-related hospitalisations and intensive care unit (ICU) admissions

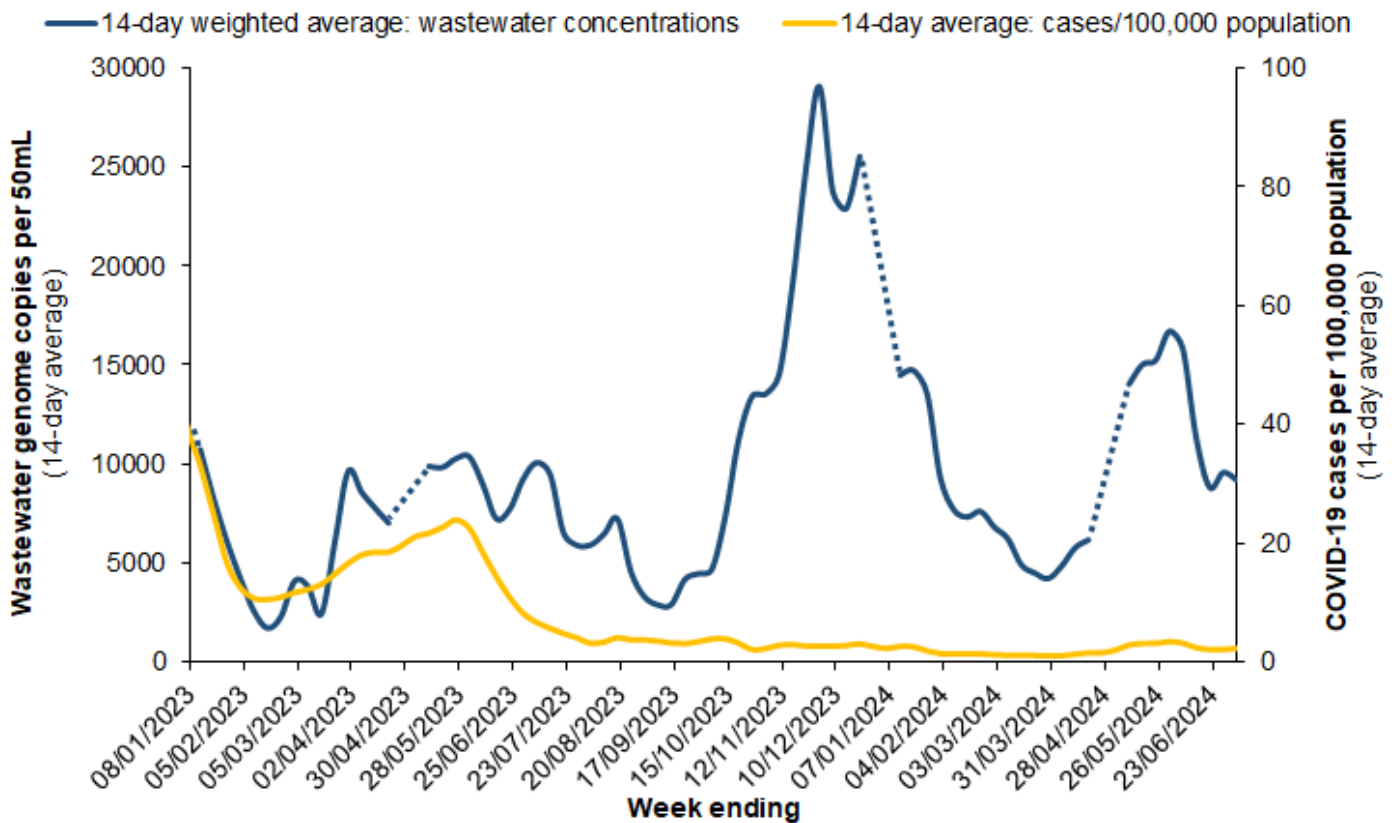
Figure 2. 7-day average of COVID-19 cases currently in hospital or in ICU, Western Australia, 08 January 2023 to 7 July 2024.



**Notes**  
Data sourced from PHOCUS and live hospital admission datasets.  
Week refers to data reported over the 7 days Monday to Sunday.  
'Hospitalised' relates to active and cleared (>5 days after the first positive COVID-19 PCR test) COVID-19 cases that are current hospital inpatients. The reason for hospital or ICU admission may be unrelated to COVID-19 in some cases.  
'Intensive care unit' is a subset of currently hospitalised cases and relates to active/cleared COVID-19 cases that are currently in an ICU.

## Wastewater surveillance

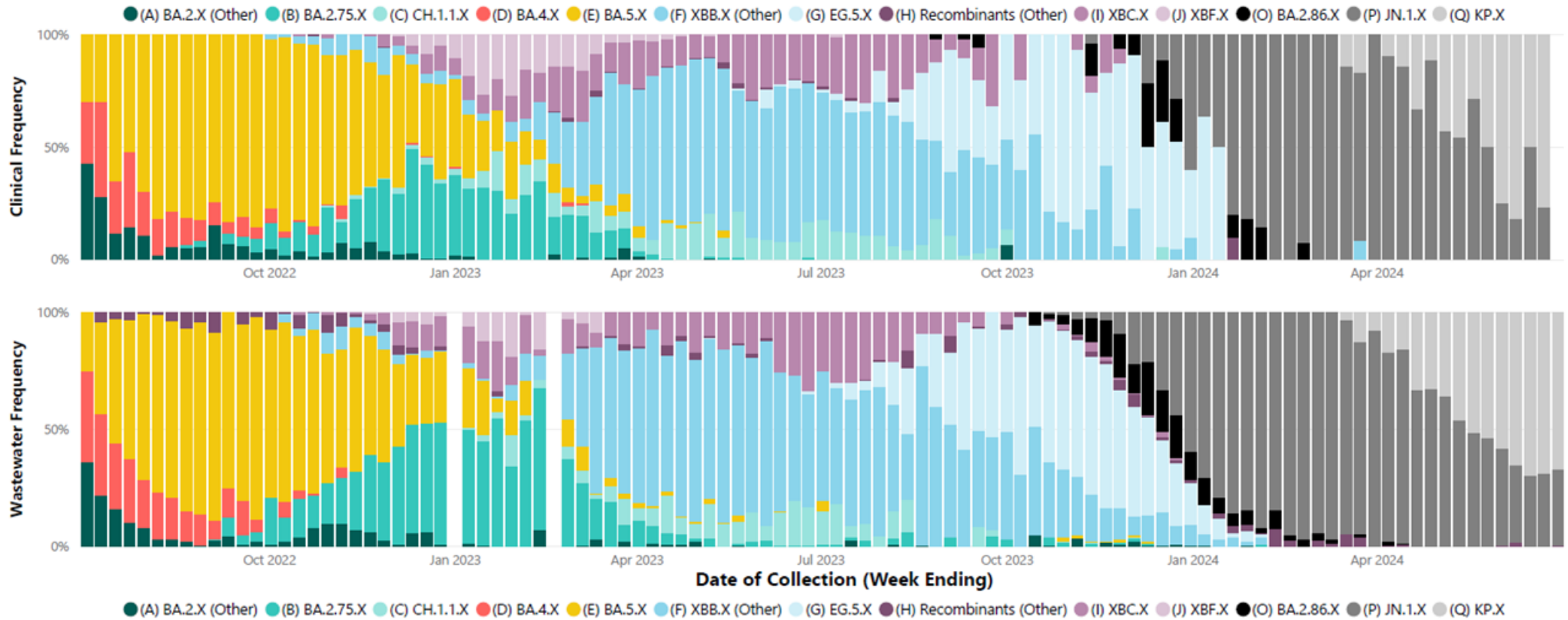
Figure 3: SARS-CoV-2 concentration in wastewater and COVID-19 notification rate, Perth metropolitan area, Western Australia, 08 January 2023 to 5 July 2024.



**Notes**  
Data sourced from PHOCUS dataset and PathWest Laboratory Medicine.  
Wastewater is sourced from three wastewater treatment plants in the Perth metropolitan area (Subiaco, Woodman Point and Beenyup).  
COVID-19 notification rates and wastewater genome concentrations in the metropolitan catchment areas are presented as a 14-day average.  
Wastewater genome concentrations across the three sampling sites were weighted by the respective population size. The weighting for each catchment area was calculated by dividing the respective population size by the total population size across all three catchment areas.  
Dotted lines in wastewater concentration represents missing results that could not be determined due to no sample collection or sample analysis failure.  
Case rates should be interpreted with caution given that they represent cases reported to the department. Cases reported up to 9 October 2023 were predominantly diagnosed with rapid antigen tests (RATs) which rely on self-report and registration. From 9 October 2023 onwards, cases are diagnosed by PCR test only due to the closure of the RAT registration system.  
Week ending for SARS-CoV-2 genome copies refers to wastewater sample collection date and for COVID-19 notifications refers to clinical specimen collection date (PCR only).  
Link to wastewater surveillance online dashboard: [COVID-19 wastewater surveillance \(health.wa.gov.au\)](https://health.wa.gov.au)

# COVID-19 Genomics

Figure 4. Distribution of SARS-CoV-2 variants in clinical samples (top) and metropolitan wastewater catchments (bottom), 03 July 2022 to 7 July 2024.



**Notes**

Data sourced from PHOCUS dataset and PathWest Laboratory Medicine.

Week ending for wastewater sequences refers to sample collection date and for clinical sequences refers to specimen collection date (PCR only).

The X following the variant name indicates the inclusion of all descendent sub-variants.

A re-analysis of samples in May 2024 indicated the presence of KP.X sub-variants from mid-March 2024. Previous reports included KP.X in the JN.1.X grouping, this will now be shown separately from 02/06/2024.

The availability of sequence results for clinical samples are likely to be updated retrospectively because samples are shared across different whole genome sequencing runs which take place on different days each week.

The distribution of variants in wastewater is largely representative of the distribution of variants in clinical cases, although for most recent weeks is slightly skewed due to the small number and lag in sequencing of clinical cases. Therefore, the most recent week of clinical sequencing has been removed to minimise the possibility of misinterpretation and the distribution in wastewater samples provides a more representative indication of the community distribution of SARS-CoV-2 variants for this period.

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