



Executive summary

06 September 2023

Reported case rates for the week ending 03 September 2023 have increased by 4% compared to the week prior. In the week ending 27 August 2023, hospital admissions and mortality have remained stable compared to the previous week; viral RNA in wastewater has decreased compared to the previous week.

In the period of 30 June to 28 July 2023, the XBB variants are still the most common (approximately 59% of case), while the closely related CH.1.1 and FK.1.1 lineages have declined (each causing approximately 5% of case). The proportion of sequenced cases caused by the XBC variant has risen with XBC.1.3 has grown to 24% of sequenced cases.





Key insights

National Trends

Cases The 7-day rolling average of reported¹ case rates was 9.9 per 100,000

population for the week ending 03 September 2023. This is an increase compared to the previous week (9.5 per 100,000 to 27 August 2023).

Wastewater The viral RNA in wastewater for the week ending 27 August 2023

decreased compared to the previous week². Please visit the ESR website

for information on wastewater trends.3

Hospitalisationsⁱ In the week ending 27 August 2023, the 7-day rolling average of hospital

admissions was 0.51 per 100,000 population, this rate is stable compared

to the previous week (0.50 per 100,000 20 August 2023).

Mortalityⁱⁱ As of 27 August 2023, there were 651 deaths attributed to COVID-19 in

2023. There were 2,588 deaths during 2022 and 50 deaths prior to 2022.

The mortality rate was 0.03 per 100,000 population as of 27 August, the rates remained stable compared to the previous week (from 9 to 11 deaths,

respectively).

Variants of Concern In the period of 30 June to 28 July 2023, the XBB variants were still the

most common (approximately 59% of sequenced cases), while the closely related CH.1.1 and FK.1.1 lineages have declined (each causing approximately 5% of cases). The proportion of sequenced cases caused by the XBC variant has risen. Most sequenced XBC cases in New Zealand are from the XBC.1.3 lineage (approximately 24% of sequenced cases). Data from wastewater for weeks 25 to 28 (week ending 09 and 16 July 2023 respectively) align with clinical samples; the XBC variant is on the rise, estimated to be present in 10% to 25% of samples, while the XBB variant

remains the most prevalent, found in 40% to 63% of samples.

Māori

Cases The 7-day rolling average of reported case rates was 8.2 per 100,000

population for the week ending 03 September 2023, stable compared to the

previous week, which was 8.5 per 100,000.

Hospitalisationsⁱ The 7-day rolling average rate for the week ending 27 August 2023 was 0.49

per 100,000 population, a decrease compared to the previous week (0.54

per 100,000).

Mortalityii As of 27 August 2023, there were 52 deaths attributed to COVID-19 in 2023.

There were 239 deaths during 2022 and 15 deaths prior to 2022.

¹ The proportion of infections reported as cases is unknown and may vary by factors such as age and ethnicity.

² To note the result excludes Northern this week due to too few samples received.

 $^{^{3} \ \}underline{\text{https://www.esr.cri.nz/our-expertise/covid-19-response/covid19-insights/wastewater-surveillance-dashboard/} \\$





Pacific peoples

Cases The 7-day rolling average of reported case rates was 5.1 per 100,000

population for the week ending 03 September 2023, stable compared to the

previous week, which was 5.0 per 100,000.

Hospitalisationsⁱ The 7-day rolling average rate for the week ending 27 August 2023 was 0.24

per 100,000 population, a decrease compared to the previous week (0.44

per 100,000).

Mortalityⁱⁱ As of 27 August 2023, there were 19 deaths attributed to COVID-19 in 2023.

There were 150 deaths during 2022 and 4 deaths prior to 2022.

¹ Hospital admissions data provides information on hospitalisations "for" COVID-19. Data pertaining to recent trends (up to 90 days) is provisional. Admissions may be re-coded as hospitalised "with" COVID-19 and removed from the dataset.

ⁱⁱ The mortality figures are for deaths attributed to COVID-19. Recent trends should be interpreted with caution to account for death coding delays of months or years after death.