# Executive summary

**07 June 2023**

Reported case rates for the week ending 04 June 2023 decreased compared to the previous week. In the week ending 28 May, hospital admissions and viral RNA in wastewater remained stable, and mortality decreased compared to the previous week.

XBB.1.16 has replaced XBB.1.5 as the most common genomic variant and is expected to continue to rise in frequency

# Key insights

## National Trends

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| **Cases**  | The 7-day rolling average of reported[[1]](#footnote-2) case rates was 32.7 per 100,000 population for the week ending 04 June 2023. This is a decrease compared to the previous week average (37.9 per 100,000 to 28 May 2023).  |
| **Wastewater**  | The viral RNA in wastewater for the week ending 28 May 2023 remained stable compared to the previous week. Please visit the ESR website for information on wastewater trends.[[2]](#footnote-3) |
| **Hospitalisations****[[3]](#endnote-2)** | In the week ending 28 May 2023, the 7-day rolling average of hospital admissions was 0.91 per 100,000 population, this is stable compared to 0.89 per 100,000 the previous week (ending 21 May 2023).  |
| **Mortality[[4]](#endnote-3)**  | As of 28 May 2023, there were 439 deaths attributed to COVID-19 in 2023. There were 2,506 deaths during 2022 and 50 deaths prior to 2022. The mortality rate decreased to 0.06 per 100,000 population as 28 May, compared to 0.10 per 100,000 in the previous week (18 compared to 31 deaths).  |
| **Variants of Concern** | In the period 29 April to 26 May 2023, XBB.1.16 overtook XBB.1.5 as the most common subvariant of XBB, accounting for 24% of sequenced cases and expected to continue to rise in frequency. FK.1.1 and XBB.1.5 remain in circulation, accounting for 20% and 16% of sequenced cases respectively. Please refer to Genomics Insights Report #38, released 02 June 2023.[[5]](#footnote-4)  |

## Māori

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| **Cases**  | The 7-day rolling average of reported case rates was 31.8 per 100,000 population for the week ending 04 June 2023. The rate decreased compared to the previous week, which was 36.2 per 100,000.  |
| **Hospitalisationsi** | The 7-day rolling average rate for the week ending 21 May 2023 was 1.08 per 100,000 population, an increase compared to the previous week (0.81 per 100,000).  |
| **Mortalityii** | As of 28 May 2023, there were 35 deaths attributed to COVID-19 in 2023. There were 216 deaths during 2022 and 15 deaths prior to 2022. |

## Pacific peoples

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| **Cases**  | The 7-day rolling average of reported case rates was 23.2 per 100,000 population for the week ending 04 June 2023. The rate decreased compared to the previous week, which was 24.3 per 100,000.  |
| **Hospitalisationsi**  | The 7-day rolling average rate for the week ending 14 May 2023 was 0.80 per 100,000 population, similar to the previous week (0.88 per 100,000).  |
| **Mortalityii** | As of 28 May 2023, there were 8 deaths attributed to COVID-19 in 2023. There were 137 deaths during 2022 and 4 deaths prior to 2022. |

1. The proportion of infections reported as cases is unknown and may vary by factors such as age and ethnicity. [↑](#footnote-ref-2)
2. <https://www.esr.cri.nz/our-expertise/covid-19-response/covid19-insights/wastewater-surveillance-dashboard/> [↑](#footnote-ref-3)
3. 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. [↑](#endnote-ref-2)
4. 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. [↑](#endnote-ref-3)
5. <https://www.esr.cri.nz/our-expertise/covid-19-response/covid19-insights/genomics-insights/> [↑](#footnote-ref-4)