Trend of COVID-19 cases in COVID-19 Assessment Centre (CAC), Selangor

Suhaida MS, Fairuz Alia R, Muhamad Yunus R

Public Health Division, Selangor State Health Department, Ministry of Health Malaysia

ABSTRACT

Introduction: On January 2021, Selangor State Health Department took the initiative to set up COVID-19 Assessment Centre (CAC) in each district. Initially, all positive COVID-19 patient were to be assessed physically in CAC. However, on 23 July 2021, Ministry of Health, Malaysia (MOH) activated virtual CAC in Selangor in view of increasing number COVID-19 cases. The spread of the highly transmissible Omicron Variant drove an unprecedented surge of cases. Therefore, on 6 February 2022, MOH revised the criteria for CAC assessment which included only Category 2B and above to be assessed physically in CAC. The aim of this study is to determine the trend of CAC attendance during COVID-19 pandemic in Selangor. **Materials and methods:** A cross sectional study was conducted involving 9 districts in Selangor. Secondary data was obtained via Daily CAC COVID-19 Census from March 2021 until April 2022 and analysed using Microsoft Excel 2010. **Results and conclusion:** A total of 885, 594 Covid-19 cases were seen in CACs from Mac 2021 to April 2022. Majority of the cases presented to obtain release order and aged 18 to 39 years old. Petaling district recorded the highest number of Covid-19 cases in Selangor with 313, 664 positive cases and 50% of them attended CAC. There was an increasing trend of Covid-19 cases seen in CAC from epid week 23 to epid week 29/ 2021. The highest CAC attendance in Selangor was on epid week 29/ 2021 where more than 80% of positive Covid-19 cases were assessed in CACs. CAC attendance decreased and stable after implementation of virtual CAC and revised criteria for CAC assessment. Trend of CAC attendance depends on the CAC assessment criteria and burden of COVID-19 cases. Prompt public health measures and intervention during COVID-19 pandemic is very crucial to control the spread of Covid-19 and burden to primary healthcare services.