



**DIRECTOR-GENERAL HEALTH
REPUBLIC OF SOUTH AFRICA
PRETORIA**

Private Bag X828, PRETORIA, 0001, 27th Floor, Civitas Building, CnrThabo Sehume and Struben Streets, PRETORIA, 0002 Tel (012) 395 8402 Fax (012) 395 8422
CAPE TOWN

P.O. Box 3875, CAPE TOWN, 8000, Room 404, 120 Plain Street, CAPE TOWN, 8000 Tel (021) 461 2040 Fax (021) 461 6864

Ms Yoliswa Makhasi
Director General
Department of Public Service and Administration
Pretoria
0001

Dear Director General

Population Groups at Risk of Contracting Severe COVID-19

The conditions listed below are those co-morbidities that have been identified from the literature as medical conditions that are associated with more severe disease and higher mortality.

It is important to appreciate that in general that those with mild disease which is well controlled are unlikely to have adverse outcomes from COVID 19 and are at lower risk.

Table 1: Risk Factors for Severe COVID-19

Risk Factor	Detail	Definition
Age	People 60 years and older	Aged 60 years or older.
People of all ages with the following underlying medical conditions, particularly if not well controlled:		
Cardiovascular Disease	Moderate/ Severe Hypertension	Moderate hypertension: systolic BP 160-179mmHg and/or diastolic BP 100-109 mmHg. Severe hypertension: systolic BP \geq 180 mmHg and/or diastolic BP \geq 110 mmHg.
	Congestive cardiac failure or other serious cardiovascular disease	Confirmed clinical diagnosis of congestive cardiac failure or other serious cardiovascular disease
	Cerebrovascular disease, including stroke and transient ischaemic attack	Confirmed clinical diagnosis of cerebrovascular disease.
Respiratory Disease	Pulmonary Tuberculosis – untreated or in early treatment	People who have not completed the intensive phase or first two months of treatment in line with the National Department of Health Standard Treatment Guidelines.

	Moderate to severe asthma	Asthma which requires treatment with high dose inhaled corticosteroids plus a second controller (and/or systemic corticosteroids) to prevent it from becoming 'uncontrolled' or which remains 'uncontrolled' despite this therapy.
	Chronic Obstructive Pulmonary Disease (COPD)	Confirmed clinical diagnosis of COPD
	Other severe chronic lung pathology, including cystic fibrosis and bronchiectasis	Confirmed clinical diagnosis – irrespective of severity.
Kidney Disease	Chronic Kidney Disease	eGFR < 45
Pregnancy	Third trimester pregnancy	Estimated to be further than week 27 of pregnancy
Immunosuppression	Poorly controlled type II Diabetes Mellitus	HBA1c ≥7.5% within last 6 months
	Cancer undergoing active treatment	Currently undergoing chemotherapy and/or radiotherapy
	Human Immunodeficiency Virus with advanced immunosuppression	HIV positive persons with CD4 count <200 cells/mm ³ who are ART-naïve or who initiated ART within last 3 months
	Chronic immunosuppressant use	Chronic use of corticosteroids of >20mg prednisone per day or equivalent, methotrexate, biologicals or other immunosuppressants.
	Transplant	On chronic immunosuppressants
Metabolic syndrome	Severe obesity	Body mass index (MBI) of 40 and higher

The evidence related to the impact of COVID 19 is still unfolding hence conditions listed above will be revised as new evidence becomes available.

Yours sincerely



DR T PILLAY

ACTING DIRECTOR-GENERAL: HEALTH

DATE: 30 May 2020