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**MEDIA RELEASE**

**CARPHA urges enhanced vigilance in response to COVID-19 UK variant found in the Caribbean**

**Port of Spain, Trinidad and Tobago. 27 January 2021.** Since the COVID-19 disease was declared a pandemic in March 2020, at least six (6) variants have emerged. However, three new variants of concern are spreading rapidly. The United Kingdom variant known as B.1.1.7; a variant called 1.351 which emerged in South Africa; and the variants P.1 and P.2 which surfaced in Brazil.

The “UK variant” (B.1.1.7 variant), which emerged in September 2020, has been identified in 60 countries globally and recently, in some Caribbean countries. Initial data suggest that the UK variant is more transmissible, and studies and analysis of the transmission and severity of the variant are underway.

“This increased ease of transmission of the UK variant is of grave concern for its impact on public health, and the fight to contain and end the COVID-19 pandemic. This is further heightened by the fact that, at present, the vaccines developed have not yet been proven to stop disease transmission but rather to lessen the severity of infection. There is no reported evidence of a reduction in the effectiveness of vaccines approved for the COVID-19 virus in providing protection from any variants. However, it is important to note that vaccinated persons may still spread COVID-19,” said Dr. Joy St. John, Executive Director of the Caribbean Public Health Agency (CARPHA).

With the discovery and proliferation of multiple COVID-19 variants, it is crucial to properly and consistently employ and increase the public’s adherence to COVID-19 control measures, which have been shown to reduce the spread of the disease.

Dr. St. John further stated “CARPHA is committed to supporting its Member States to stopping the spread of the virus. We urge Member States to enhance surveillance in residential institutions and face to face educational settings. There must also be strict adherence to the requirements of negative COVID-19 results for entry to the ports in the Member States, to effectively continue combating COVID-19 spread in the Caribbean. Mandatory quarantine has become even more important to curb the spread of the virus.”

Community surveillance should also be enhanced thereby strengthening public health control measures. Individuals must continue practicing the measures of wearing face masks and covering, physical distancing, and hand sanitation in all face-to-face settings.

It is critical to remember that as most cases will have no or mild symptoms, COVID-19 cases may quietly increase in the community and result in sudden increases in hospitalisations and deaths. The first line of defence continues to be isolation of infected persons and quarantine of travellers and any person with known or possible exposure to infected persons.

These measures must be practiced by all individuals as asymptomatic persons are known to be able to spread the virus. Adequate testing is critical to surveillance measures for residential institutions, face-to-face schooling, celebratory and religious gatherings, and other potential spreader and super-spreader events and activities.

The CARPHA Medical Microbiology Laboratory (CMML) remains committed to delivering prompt COVID-19 test results to the Region and is working with its Member States in their submission of positive SARS-CoV-2 to be sequenced. The CMML has been guiding laboratory action through testing protocols based on the latest recommendations by the World Health Organization (WHO) and the Pan American Health Organization (PAHO). With the emergence of the UK variant in the Region, it is of critical importance for CARPHA Member States to conduct genomic sequencing to identify this variant.

Currently, COVID-19 samples are received by the CMML from Member States. The CMML performs acceptance testing before they are sent to the University of the West Indies (UWI), St Augustine, Trinidad and Tobago, for genomic sequencing to be performed. Following the sequencing process, the UWI sends the results to CARPHA for final review and reporting. Sequencing is a lengthy process that includes experimental and sequence analysis procedures, and the estimated turnaround time to obtain any relevant conclusions can take up to 2 weeks from the receipt of samples at CARPHA.

Results received from the UWI are sent by CARPHA directly to the Chief Medical Officers at the Ministries of Health, who are responsible for dissemination through nationally established channels of communication.

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