Summary: As of 9:06 am on 10/22/2020, a total of 19,117 cases of laboratory-confirmed COVID-19 among Boston residents have been reported to the Boston Public Health Commission (BPHC). Of reported cases, two thousand and sixty-seven (10.8%) required hospitalization. Seven hundred and seventy-six (4.1%) residents have died. Sixteen thousand four hundred and sixty-five (86.1%) residents have recovered.

One thousand eight hundred and sixty-three (9.7%) were healthcare workers.

Emergency Department (ED) visits for COVID-19-like illness (CLI) comprised 2.6% of all ED visits between (10/16 - 10/22/2020),§§ down from 3.2% the prior week.

§New daily cases are defined by the date of their first reported positive test. Prior to October 8, 2020, new cases were reported using the event date. An event date is the earliest associated date corresponding to each disease event and is hierarchical based on available information (e.g., symptom onset date, test date, report date).

§§ COVID-19-like illness (CLI) is defined as "Covid or (fever and (cough or respiratory distress))" in ED chief complaint data from Boston acute care hospitals, captured by BPHC Syndromic Surveillance System.

Data Sources: Boston Public Health Commission Surveillance System (Jan 3, 2020 to Sep 14, 2020, 8:55 am); Boston Syndromic Surveillance System (Jan 3, 2020 to Oct 15, 2020); Massachusetts Department of Public Health, Massachusetts Virtual Epidemiologic Network (Jan 3, 2020 to Oct 22, 2020, 9:06 am)
Figure 2: Percent of All COVID-19 Cases (Boston Residents), by Sex, 2020

DATA SOURCES: Boston Public Health Commission Surveillance System (Jan 1, 2020 to Sep 14, 2020, 8:55 am); Massachusetts Department of Public Health, Massachusetts Virtual Epidemiologic Network (Jan 1, 2020 to Oct 22, 2020, 9:06 am)

Figure 3. Rates of Reported COVID-19 Cases by Sex Among Boston Residents

DATA SOURCES: Boston Public Health Commission Surveillance System (Jan 1, 2020 to Sep 14, 2020, 8:55 am); Massachusetts Department of Public Health, Massachusetts Virtual Epidemiologic Network (Jan 1, 2020 to Oct 22, 2020, 9:06 am); U.S. Census Bureau, American Community Survey, 2018 5-yr estimates (2014-2018)

There was a similar distribution of male cases and female cases (Figure 2). The incidence rate of COVID-19 among female residents was similar compared to male residents (Figure 3). Note: The overall rate was higher than rates by sex due to the 0.9% of cases with other/unknown sex or who identify as transgender.
There continued to be a low percentage of Boston resident COVID-19 cases under 20 years of age (Figure 4). In general, COVID-19 rates increased with age (Figure 5).
The incidence rate of COVID-19 was higher for Dorchester (02121, 02125), Dorchester (02122, 02124), East Boston, Hyde Park, Mattapan, Roxbury, and the South End compared with the rest of Boston. The incidence rate of COVID-19 was similar for Roslindale compared with the rest of Boston. The incidence rate of COVID-19 was lower for Allston/Brighton, Back Bay (including Beacon Hill, Downtown, the North End, and the West End), Charlestown, Fenway, Jamaica Plain, South Boston, and West Roxbury compared with the rest of Boston (Figure 6). To test neighborhood differences, an individual neighborhood is compared with the rest of Boston (i.e., all other neighborhoods combined), rather than to Boston overall so that individual neighborhood’s contribution to the Boston overall rate does not mask a difference from the rest of Boston.
Of cases where race/ethnicity was known, 4.1% were Asian, 30.5% were Black, 33.1% were Latinx or Hispanic, 25.7% were White, and 6.6% identified as multi-racial, another racial/ethnic group or Other race. When the percent of information that is missing or unknown is greater than 20%, percentages are calculated among the known cases, but both are presented here.

The incidence rate of COVID-19 was higher for Black and Latinx/Hispanic residents and residents of other races/ethnicities (including multiple races and individuals that did not specify a given race or ethnicity category) compared with the rate for White residents (Figure 7). The incidence rate was lower for Asian residents compared with White residents (Figure 7). Interpret these rates with caution due to the high percentage of missing race/ethnicity data (Table 1).