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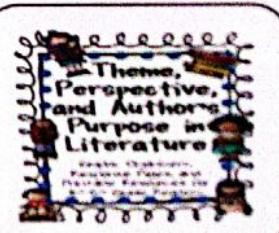
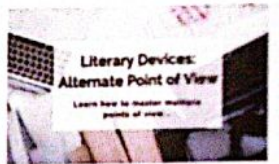
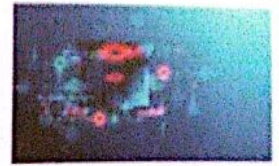
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## Status of Covid -19 Pandemic In Indapur Tehsil

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### Abstract

The corona virus is showing its strength and spreading exponentially in all the corners of India. In Maharashtra Pune is highly infected district Therefore, this paper aims to study the infection level and current scenario of fatality cases in Indapur tehsil. All the supported data is collected from Sub-District Hospital (SDH), Indapur. Fatality rate defined as per the number of currently active cases per 100 positive cases of covid-19. This paper deals with the village wise current situations of current cases, recovered cases, deceased cases. There are reported 4667 confirmed cases up to the month of December 2020. These infected cases are found in 138 villages and tehsil headquarter. Out of them 2.95% deaths occurred in the study area. A wide variation was observed across the tehsil. There was no single fatality case found in 0 to 14 age group people in the study period. Only four villages has not infected by COVID-19. As compare to the rural area the infection level of corona virus is high in urban area. The infected cases are increasing on one side and on another side the numbers of recovered cases are also increasing in the study area.

**Keywords:** COVID19, infection, mortality, pandemic,

### Introduction

Society is an asset of the every nation. Due to the corona virus almost every nation of the world are suffering from pandemic situation. The corona virus (COVID-19) is spreading rapidly, and scientists are endeavoring to discover drugs for its efficacious treatment in the world (Gao et al., 2020). Older people, suffering from medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer, are more likely to develop severe illness (Remuzzi & Remuzzi, 2020; Singhal, 2020). Maharashtra has more than 1984768 confirmed cumulative infected cases (31 December 2020). The impact of preventive measures on daily infected-rate is discussed for each village of Indapur tehsil dist. Pune.

### Objectives

1. To identify the infection level in the study area.
2. To study the mortality status in the study area.
3. To make favorable suggestions for COVID-19 control.

### Database and methodology

For the present research work secondary data source are used. All the supported data is collected from Indapur Tehsil Health Office, Indapur, Dist. Pune, Maharashtra. This office provides the most updated information on the daily and total confirmed cases, active cases, recovered and deaths from each village of the study area. Data considered for analysis up to 31 December 2020. Fatality rate defined as per the number of currently active cases per 100 positive cases of covid-19.

### Month wise COVID-19 infection in the study area

In the study area, the disease was first detected on 27<sup>th</sup> April 2020 in Bhigwan station a women who returned from Pune. The gradual incidence of COVID-19 cases has increased in June and July and in the month of August and September these cases has increased rapidly. Mostly the daily infection-rate (DIR) is higher in urban area than the rural. In the high population-density area has found high COVID-19 infected cases i.e. Indapur city and western side villages. Indapur Tehsil Health Office reported total 4667 new confirmed cases up to month of December 2020 (Table 1). In this period in urban area 673 and in the rural area 3994 cases found. There are also reports of near capacity utilization of ICU and Ward beds, in the Sub-District hospital in the study area. **Table 1:- Month wise COVID-19 positive patients in Indapur tehsil.**

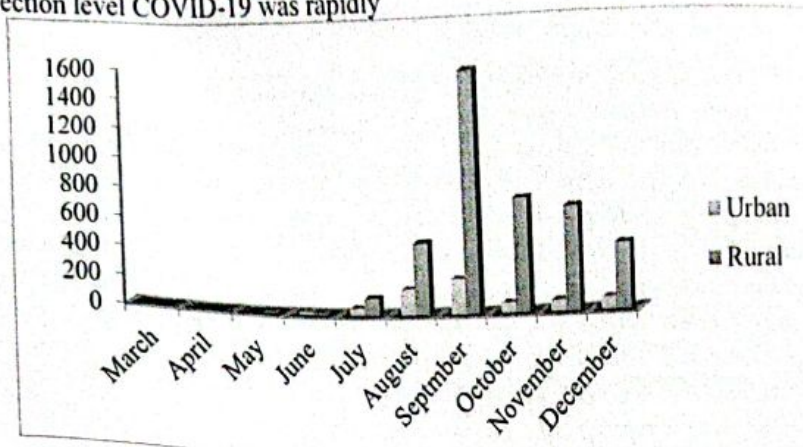
Sr. No.	Month	March	April	May	June	July	Aug.	Sept.	Octo.	Nove.	Dece.	Total	Perc.
1	Urban	0	0	0	14	45	166	230	68	71	79	673	14.42
2	Rural	0	1	4	10	111	466	1562	738	673	429	3994	85.58
3	Total	0	1	4	24	156	632	1792	806	744	508	4667	100

**Source:** Indapur Tehsil Health Office, Indapur.

Above Table and figure shows the month wise infection of corona virus. After the first five cases during 27<sup>th</sup> April to 20<sup>th</sup> May 2020, there were no more confirmed COVID-19 cases was not found for the next two months. The COVID-19 cases appeared again from 3<sup>rd</sup> June 2020 onwards. These cases are



related to people who have been evacuated or have arrived from COVID-19 affected areas and there is an exponential growth in the daily number of COVID-19 positive cases. The maximum people are infected in month of September, in this month 230 people from urban area and 1562 people are infected from rural area. The infection level COVID-19 was rapidly



**Figure 2** Month wise COVID-19 patients

increases in July to October over 139 settlements. In the study period according to above figures 1.10% people was infected in rural area and 3.11 are infected in urban area. It means in comparison to rural area, infection level was higher in urban area. There are number of reasons like migrant workers, businessman, students and others came from the cities to their native place. Some migrants are not followed the COVID-19 guidelines, careless attitude about infections, inadequate literacy at village level.

#### **Status of mortality during pandemic period in Maharashtra**

The first case of the COVID-19 pandemic in the Indian state of Maharashtra was confirmed on 9 March 2020. Maharashtra is a hotspot that accounts for nearly one-third of the total cases in India as well as about 40% of all deaths. As of 7 July, the state's case fatality rate is nearly 4.3%, which is lower than the global average but significantly higher than other Indian states with large numbers of cases.

#### **Month wise death**

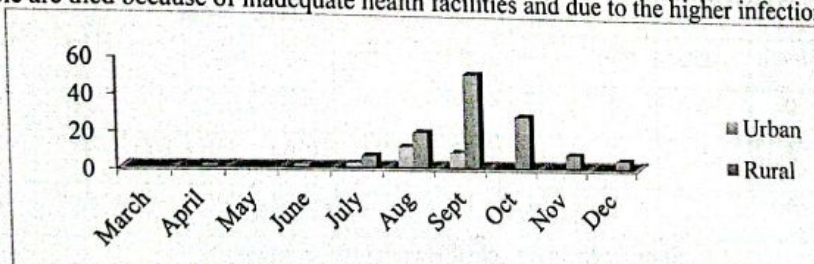
The incidence of cases and deaths in study area increased from month of July 2020. Compared to the study area reporting the highest number of new deaths in month of September i.e. 59 deaths and only one death occurred in month of April and June (Table 2). Death rates in tehsil lower than the Maharashtra state rate and have not increased in the past month. There are only 2.95% deaths occurred in Indapur tehsil up to the end of December 2020.

**Table 2:-** Month wise death patients

Sr. No.	Month	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Total	Perc.
1	Urban	0	0	0	1	2	11	8	0	0	0	22	15.94
2	Rural	0	1	0	0	6	19	51	28	7	4	116	84.06
3	Total	0	1	0	1	8	30	59	28	7	4	138	100

**Source:** Indapur Tehsil Health Office, Indapur.

Figures shows that the fatality cases was higher in rural as compared to urban area. People was infected and then died because of negligence attitude about pandemic situation in the rural area. Some people are died because of inadequate health facilities and due to the higher infection level.



**Figure 3** Month wise death patients



From the month of October to December has not found death cases in the urban area. A maximum 11 death cases has occurred in the month of August in urban area. Similarly, in rural area maximum 51 deaths has occurred in month of September.

#### Age group wise fatality

According to this table highest fatality cases were found in 60 and sixty plus age group people. Most of the people infected with the COVID19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Old age people and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease and cancer are more likely to develop serious illness. There was no single fatality case found in 0 to 14 age in the study period.

**Table 3 :-Age group wise fatality cases**

Sr. No.	Age Group	0 to 6	7 to 14	15 to 59	> 59
1	Urban	0	0	9	13
2	Rural	0	0	42	74
3	Total	0	0	51	87

Source: Indapur Tehsil Health Office, Indapur.

#### Village wise mortality

Out of the infected patient 138 (2.95 %) persons was died due to covid -19. Those cases are found in 65 villages in the study area. The average infection rate of these villages was estimated as 1.30 percent; while the fatality rate was 2.95 percent. There has wide variation observed across the tehsil. The highest fatality rate was found in Bhodni village (28.57%) and zero fatality rate in 82 villages. While 3.29 percent was found in Indapur city.

**Table 4 :- Village wise status of mortality In Indapur tehsil**

Sr. No.	Name of village	Population	Infected Cases	Percentage	Total Death	Percentage
1	Agoti No.1	1269	14	1.10	0	0
2	Agoti No.2	731	2	0.27	0	0
3	Ajoti	628	17	2.70	0	0
4	Akole	3015	67	2.22	0	0
5	Anthurne	5448	122	2.23	0	0
6	Awasari	1806	1	0.05	0	0
7	Babhulgaon	2167	29	1.33	1	3.44
8	Balpudi	588	5	0.85	0	0
9	Bambadwadi	904	0	0	0	0
10	Bandewadi	319	13	4.07	0	0
11	Bandgarwadi	519	15	2.89	0	0
12	Bawada	9783	67	0.68	5	7.46
13	Bedshinge	709	1	0.14	0	0
14	Belewadi	4556	126	2.76	4	3.17
15	Bhadalwadi	1831	29	1.58	0	0
16	Bhandgaon	2568	15	0.58	0	0
Sr. No.	Name of village	Population	Infected Cases	Percentage	Total Death	Percentage
17	Bharnewadi	3957	70	1.76	1	1.42
18	Bhat Nimgaon	1360	23	1.69	1	4.34
19	Bhawadi	818	9	1.10	2	22.22
20	Bhigvan	6026	240	3.98	11	4.58
21	Bhodani	2289	14	0.61	4	28.57
22	Bijwadi	5388	27	0.50	0	0
23	Birgundwadi	692	0	0	0	0
24	Boratwadi	1559	8	0.51	0	0
25	Bori	5272	61	1.15	2	3.27



26	Chakati	1057	7	0.66	0	0
27	Chandgaon	787	5	0.63	1	20
28	Chavhanwadi	480	4	0.83	1	25.00
29	Chikhali	1285	9	0.70	0	0
30	Dalaj No.1	1005	53	5.27	1	1.88
31	Dalaj No.2	1292	14	1.08	0	0
32	Dalaj No.3	915	13	1.42	0	0
33	Dikasal	1434	16	1.11	1	6.25
34	Gagargaon	533	4	0.75	0	0
35	Galandwadi No.1	1655	24	1.45	0	0
36	Galandwadi No.2	2018	13	0.64	2	15.38
37	Ganeshwadi	1323	8	0.60	1	12.5
38	Ganjewalan	734	2	0.27	0	0
39	Gholapwadi	1212	18	1.48	1	5.55
40	Ghorpadwadi	1301	27	2.07	2	7.40
41	Giravi	1596	4	0.25	0	0
42	Gokhali	1205	12	0.99	1	8.33
43	Gondi	906	4	0.44	0	0
<b>Sr. No.</b>	<b>Name of village</b>	<b>Population</b>	<b>Infected Cases</b>	<b>Percentage</b>	<b>Total Death</b>	<b>Percentage</b>
44	Gosaviwadi	882	0	0	0	0
45	Gotandi	3833	37	0.96	1	2.70
46	Hangarwadi	1632	24	1.47	0	0
47	Hinganewadi	1356	12	0.88	2	16.66
48	Hingangaon	1275	11	0.86	1	9.09
49	Indapur Urban	21592	673	3.11	22	3.26
50	Jadhavwadi	434	12	2.76	0	0
51	Jamb	1210	11	0.90	0	0
52	Kacharewadi	963	11	1.14	0	0
53	Kadbanwadi	1486	2	0.13	0	0
54	Kalamb	17138	234	1.36	5	2.13
55	Kalas	3772	34	0.90	1	2.94
56	Kalashi	1690	8	0.47	1	12.5
57	Kalewadi	1432	0	0	0	0
58	Kalthan No.1	1874	19	1.01	1	5.26
59	Kalthan No.2	1078	26	2.41	1	3.84
60	Kandalgaon	1838	3	0.16	0	0
61	Kardanwadi	1469	1	0.06	0	0
62	Karewadi	1344	0	0	0	0
63	Kati	4799	89	1.85	3	3.37
64	Kauthali	2393	11	0.45	0	0
65	Kazad	2675	45	1.68	1	2.22
66	Khorochi	3398	36	1.05	1	2.77
67	Kumbhargaon	1403	13	0.92	1	7.69
68	Kurawali	2195	36	1.64	0	0
69	Lakadi	2068	24	1.16	0	0
70	Lakhewadi	3955	45	1.13	1	2.22
71	Lamjewadi	596	5	0.83	0	0



Sr. No.	Name of village	Population	Infected Cases	Percentage	Total Death	Percentage
72	Lasurne	7301	218	2.98	8	3.66
73	Loni	2446	28	1.14	2	7.14
74	Lumewadi	2614	21	0.80	1	4.76
75	Madanwadi	4631	57	1.23	0	0
76	Malwadi No.1	1900	8	0.42	2	25.00
77	Malwadi No.2	4069	30	0.73	0	0
78	Mankarwadi	909	9	0.99	0	0
79	Maradwadi	569	0	0	0	0
80	Mhasobachiwadi	1684	13	0.77	0	0
81	Narsingpur	2094	7	0.33	0	0
82	Narutwadi	1213	6	0.49	0	0
83	Nhavi	2865	63	2.19	0	0
84	Nimbodi	1595	31	1.94	0	0
85	NimgaonKetki	11280	244	2.16	9	3.68
86	Nimsakhar	5620	37	0.65	1	2.70
87	Nirgude	1907	18	0.94	0	0
88	Nirningaon	2299	11	0.47	1	9.09
89	Nirwangi	3239	25	0.77	3	12
90	Ozare	527	7	1.32	0	0
91	Padsthal	980	13	1.32	0	0
92	Palasdeo	3267	99	3.03	1	1.01
93	Paritwadi	1161	3	0.25	0	0
94	Pawarwadi	1977	14	0.70	1	7.14
95	Pilewadi	1013	8	0.78	0	0
96	Pimpale	1181	14	1.18	0	0
97	Pimpri Bk.	1821	4	0.21	1	25.00
98	PimpriKh.	1205	22	1.82	0	0
99	Pithewadi	1052	1	0.09	0	0
Sr. No.	Name of village	Population	Infected Cases	Percentage	Total Deaths	Percentage
100	Pitkeshwar	1864	9	0.48	1	11.11
101	Pondkulwadi	1051	13	1.23	0	0
102	Poundhawadi	1693	9	0.53	0	0
103	Rajwadi	505	0	0	0	0
104	Ranmodwadi	3252	23	0.70	1	4.34
105	Reda	2010	12	0.59	0	0
106	Redani	3561	28	0.78	1	3.57
107	Rui	1831	37	2.02	1	2.70
108	Sansar	5908	229	3.87	7	3.056
109	Sarafwadi	1411	19	1.34	0	0
110	Sarati	1861	13	0.69	0	0
111	Sardewadi	2661	43	1.61	0	0
112	Shaha	2142	11	0.51	1	9.09
113	Shelgaon	7647	89	1.16	3	3.37
114	Shetphal Haveli	2830	16	0.56	3	18.75
115	Shetphalgadhe	3997	37	0.92	0	0



116	Shindewadi	1574	13	0.82	0	0
117	Shirsadi	1520	31	2.03	1	3.22
118	Sirsatwadi	1949	32	1.64	0	0
119	Sugaon	351	2	0.56	0	0
120	Surwad	2849	15	0.52	1	6.66
121	Takali	501	0	0	0	0
122	Takrarwadi	1821	25	1.37	0	0
123	Tannu	1613	13	0.80	0	0
124	Tarangwadi	1787	16	0.89	2	12.5
125	Taratgaon	432	4	0.92	0	0
126	Tawashi	2870	37	1.28	1	2.70
127	Thoratwadi	788	9	1.14	0	0
<b>Sr. No.</b>	<b>Name of village</b>	<b>Population</b>	<b>Infected Cases</b>	<b>Percentage</b>	<b>Total Deaths</b>	<b>Percentage</b>
128	Udhat	1806	17	0.94	0	0
129	Vadapuri	4052	35	0.86	1	2.85
130	Vakilwasti	2073	7	0.33	0	0
131	Vangali	941	8	0.85	0	0
132	Varkute Bk.	2376	49	2.06	0	0
133	VarkuteKh.	4268	55	1.28	0	0
134	Vaysewadi	478	0	0	0	0
135	Vyahali	1561	9	0.57	0	0
136	Zagadewadi	966	5	0.51	0	0
137	Jachakvasti	1157	19	1.64	0	0
138	Sapkalwadi	1411	25	1.77	0	0
139	Udmaiwadi	1000	7	0.7	0	0
	<b>Total</b>		<b>4667</b>		<b>138</b>	

Source: Census of India 2011 and Indapur Tehsil Health Office, Indapur.

### Conclusion and Suggestion

As maximum number of villages fall under the high number of infected patients and few villages not found a single case of positive. In the study period 1.10% people was infected in rural area and 3.11% are infected in urban area. Infection level of corona virus is higher in urban area. There are number of reasons like workers migration, businessman, students and others persons are came to their native place. Some migrants are not followed the covid-19 guidelines, careless attitude and inadequate literacy at the village level. Out of the entire tehsil 138 villages and tehsil headquarter affected by COVID-19. Only four villages are not infected. There has strictly followed the government's guideline and no interaction with surrounding area in this period. In the high population-density area, has found high COVID-19 infected cases. These settlements are located on the highway, the excess interaction among them and other cities for different work. In 65 villages found the death cases. There has no death occurred in the 0-6 and 7-14 age group. We have concluded the COVID-19 mostly affected to sixty and above sixty ages As mortality and severity of illness are correlated to both age and co morbidities in general in the study area, having strategies to safe guard these high-risk groups will provide adequate protection from infections.

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2. <https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200121-sitrep-1-2019-ncov.pdf>. Accessed April 5, 2020.
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4. <https://www.who.int/docs/default-source/coronaviruse/situation-reports/20201005-weekly-epi-update-8.pdf>