Considering the ongoing COVID-19 pandemic, the Swedish Government would like to provide the diplomatic community with the following short update on the latest developments regarding testing for COVID-19, both for active and previous infection.

As the EU’s third largest country by area but with a relatively small population, the regional differences in the spread of the novel coronavirus causing COVID-19 in Sweden are considerable at present. In some areas, Sweden has a disease transmission similar to countries with very limited transmission, while in other areas of Sweden there is a higher level of transmission.

There is currently a gradual but clear decrease in the number of intensive care patients treated for COVID-19 in Sweden. In addition, the number of patients with severe symptoms are decreasing. This decrease is likely related to the reduced virus transmission in Sweden.

During the acute phase of the pandemic, Sweden focused on testing patients with COVID-19 symptoms in need of hospital care, health care professionals and those belonging to particular risk groups, such as older people.

As the number of severe COVID-19 cases are decreasing there is additional capacity within the healthcare system to greatly expand the testing of persons for active COVID-19 infections (so called PCR-testing). Furthermore, all Swedish regions are currently increasing their capacity to also provide serological testing in order to detect the presence of antibodies in persons that have undergone a COVID-19 infection.
As Sweden is now greatly scaling up its capacity to test for COVID-19 with the aim to provide everyone with symptoms to be tested, there is a likelihood that the increased testing will result in an increase number of positive cases being discovered. This does not necessarily mean that there is a de facto increase in the number of people infected. According to the latest statistics from the Public Health Agency of Sweden the number of positive cases remain on a similar level. This suggests that there is no real increase in disease transmission of COVID-19.

Concerning the relatively high number of deaths in Sweden due to COVID-19 it is worth noting that Sweden has a well-developed register of illness diagnoses and causes of death. Swedish legislation requires that the reported cause of death be based on a diagnosis. The same legislative rules also apply in geriatric care. It can therefore be presumed that all those who have been reported deceased were tested for COVID-19 and are featured in the Swedish statistics. However, this system also means that people with confirmed COVID-19 will be included in these statistics, regardless of the actual cause of death (accident, old age etc).

In the absence of any internationally recognised joint criteria and reporting methods for COVID-19 testing and determining causes of death, comparisons between countries should be done with caution. A more appropriate way of comparison is to look at excess mortality, meaning excess deaths now compared to the same period past years. In Sweden, there has been a decreasing trend in excess mortality and at the end of May no excess mortality was registered.