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## **Ambient temperature and COVID-19 outcomes**

The coronavirus disease 2019 (COVID-19) pandemic has affected the world in different manners [1–3]. Temperate regions tend to be affected more than tropical regions [1]. We hypothesized that the temperature difference between countries might be one of the reasons for the differences in distribution of COVID-19 as lower temperatures are considered conducive for viral respiratory illness spread in diseases such as influenza [4, 5]. In this study, we evaluated the relationship between the temperature in 15 countries and provinces and their COVID-19 incidence.

Among the countries affected with COVID-19, we obtained data from fifteen countries and provinces (Table 1) which were less than 900 square km in size and had at least 100 cases. We chose this size criterion so that there was a relatively uniform temperature throughout the country, and as to avoid bias secondary to intra-country migration of people. Population data from the 15 countries and provinces, the temperature of the country, the number of COVID-19 cases, and the deaths due to COVID-19 until August 31<sup>st</sup>, 2020 were sorted from online platforms [2, 6, 7]. We studied minimum, maximum, mean, and diurnal temperature variation in these countries from the day of the first case in the country to August 31<sup>st</sup>, 2020. Prior permission was obtained from the World Health Organization (WHO) for using population data available on the WHO website [2]. The data were managed and analyzed using Stata 14.0 statistical software. Quantitative variables were summarized as a median (minimum, maximum). The Pearson correlation coefficient was used to assess the correlation between temperature and COVID-19 incidence.

As of August 31<sup>st</sup>, 2020, from the chosen countries, Singapore had the most reported COVID-19 cases (n = 56717), and Sevchelles had the least (n = 131). Countries with higher temperatures were found to have lower fatality rates from COVID-19 (Pearson coefficient -0.66) as depicted in Figure 1. Similarly, the COVID-19 fatality rate had a significant negative correlation with the average minimum temperature (Pearson coefficient -0.63) and average maximum temperature (Pearson coefficient -0.67) (Figure 1). For example, a low-temperature country like San Marino (mean temperature 11.95 degree Celsius) had a higher COVID-19 fatality rate (5.72/100 people infected) compared to a higher mean temperature country such as Singapore (mean temperature 27.75 degree Celsius, 0.04/100 people infected). The higher diurnal temperature variation (temperature gradient) was also associated with an increased COVID-19 fatality rate, although with a weak correlation (Pearson coefficient 0.25). However, the COVID-19 incidence did not correlate with environmental temperature.

Our analysis demonstrated that higher temperatures might confer protection with respect to COVID-19 mortality. It has been previously shown that the incidence of influenza infection might be affected by temperature. Lower temperatures and higher diurnal variations of temperature might be associated with an increased incidence of influenza infection [5]. However, our analysis suggests no relation between incidence of COVID-19 and temperature.

This analysis has several limitations as countries are in different stages of the pandemic, and the effect of ecological differences on disease

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Table 1. Data from	several c	ountries compa	ring their mean dail	y temperature range,	mean, minimum, and max	imum temperature,	and respective CO	VID-19 incidence ar	d case fatality.
Country/ province	Size [km²]	Mean temperature	Mean of minimum temperature [degree Celsius]	Mean of maximum temperature [degree Celsius]	Temperature gradient (mean maximum temperature — mean minimum temperature)	Incidence/ /lac population	Incidence/ /lac/sq km	Incidence/ /lakh/sq km/day	Case fatality rate (per 100)
Cayman Islands	240	27.16667	23.48333	31	7.516667	311.9199051	1.299666271	0.009152579	0.487805
Bermuda	50	23.41667	21.3	26.01667	4.716667	269.7581811	5.395163621	0.039670321	5.357143
Gibraltar	10	19.5	16.16667	22.33333	6.166667	813.2735745	81.32735745	0.542182383	0
Barbados	430	26.76667	22.86667	30.18333	7.316667	57.76424532	0.134335454	0.000980551	4.216867
Aruba	180	28.13333	25.91667	30.73333	4.816667	1730.88811	9.616045058	0.068198901	0.4329
Sint Maarten	34	26.76667	24.25	29.26667	5.016667	1035.54436	30.45718707	0.222315234	3.828829
Isle of Man	570	11.58333	8.65	14.63333	5.983333	395.1407101	0.693229316	0.005135032	7.142857
Bahrain	760	27.14286	25.61429	31.24286	5.628571	3020.201872	3.973949831	0.029656342	0.367769
Malta	320	20.83333	16.38333	24.81667	8.433333	418.5807235	1.308064761	0.0088984	0.541419
Singapore	700	27.75	24.625	30.5	5.875	971.3629721	1.387661389	0.007265243	0.047605
Andorra	470	6.216667	1.1	11.1	10	1455.317606	3.096420439	0.020371187	4.715302
San Marino	60	11.95714	8.357143	15.24286	6.885714	2161.413027	36.02355046	0.230920195	5.729877
Turks and Caicos	430	26.83333	24.83333	29.16667	4.333333	1265.593925	2.943241686	0.022640321	0.612245
Seychelles	460	27.18333	25.15	28.8	3.65	133.2018262	0.289569187	0.002083232	0
Maldives	300	28.01667	25.56667	30.73333	5.166667	1401.921028	4.673070092	0.031789592	0.369491





Figure 1. The relationship between the COVID-19 fatality rate and average minimum temperature (A), average maximum temperature (B), and average mean temperature (C)

transmission has not been determined. Secondly, the administrative strategies (such as testing, contact tracing, lockdown, and quarantine) for disease control differ between countries. This may affect the exact incidence of disease thus affecting our study outcomes. Some other potential factors affecting COVID-19 incidence include traveling patterns, vaccination coverage, and tuberculosis incidence, which might affect outcomes in our analysis [8]. We conclude that there might be a significant correlation between mean lower temperatures and an increased COVID-19 fatality rate. This knowledge may help to plan appropriate preventive strategies as well as incite future research into temperature correlation.

## **Conflict of interest**

None declared.

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