



COMMUNICABLE DISEASE THREATS REPORT

CDTR Week 24, 7-13 June 2020

All users

This weekly bulletin provides updates on threats monitored by ECDC.

NEWS

New and updated vector distribution maps

ECDC has recently published new and updated maps of mosquito, tick and sand fly species through the VectorNet project. All three species are important (potential) vectors of vector-borne diseases in the European Region and surrounding areas.

I. Executive summary

EU Threats

West Nile virus - Multi-country (World) - Monitoring season 2020 Opening date: 20 May 2020 Latest update: 12 June 2020

During the West Nile virus transmission season, which usually runs from June-November 2020, ECDC monitors the occurrence of infections in EU/EEA and EU neighbouring countries. ECDC publishes weekly epidemiological updates to inform blood safety authorities. Information is available at the NUTS 3 level (nomenclature of territorial units for statistics 3) or in GAUL 1 (global administrative unit layers 1) for areas where at least one locally acquired human infection was reported.

→Update of the week

As of 11 June 2020, no human cases or outbreaks among equids or birds have been reported for the 2020 West Nile virus transmission season.

COVID-19 associated with SARS-CoV-2 — Multi-country (World) — 2020

Latest update: 12 June 2020 Opening date: 7 January 2020

On 31 December 2019, the Wuhan Municipal Health and Health Commission reported a cluster of pneumonia cases of unknown aetiology with a common source of exposure at Wuhan's 'South China Seafood City' market. Further investigations identified a novel coronavirus as the causative agent of the respiratory symptoms for these cases. The outbreak has rapidly evolved, affecting other parts of China and other countries. On 30 January 2020, WHO's director declared that the outbreak of coronavirus disease (COVID-19) constituted a Public Health Emergency of International Concern (PHEIC), accepting the Committee's advice and issuing temporary recommendations under the International Health Regulations (IHR).

→Update of the week

Since 6 June 2020 and as of 12 June 2020, 877 734 new cases of coronavirus disease (COVID-19) (in accordance with the applied case definition in the countries) have been reported, including 29 458 new deaths.

Globally, the number of cases has increased from 6 603 329 cases to 7 481 063, and the number of deaths has risen from 391

In the EU/EEA and the UK, 37 031 cases have been reported during the same period, bringing the total from 1 423 645 cases to 1 460 676, including 2 203 deaths, with the total number of fatalities increasing from 168 400 to 170 603. More details are available here.

Crimean-Congo Haemorrhagic fever – Spain – 2020

Opening date: 3 June 2020 Latest update: 12 June 2020

Spain is reporting an autochthonous case of Crimean-Congo haemorrhagic fever in the autonomous community of Castile and León.

Non EU Threats

Ebola virus disease - eleventh outbreak - Democratic Republic of the Congo - 2020

Opening date: 4 June 2020 Latest update: 12 June 2020

On 1 June 2020, the Ministry of Health of the Democratic Republic of the Congo (DRC) <u>declared</u> the eleventh outbreak of Ebola virus disease in the country. The oubreak is located in Equateur Province in the northwest of the country, close to the border with Congo.

→Update of the week

Since the last CDTR and as of 9 June 2020, four additional confirmed cases and five additional deaths have been reported in Equateur province in the DRC.

In total, twelve cases, including nine deaths, have been reported from three health zones (Bikoro, Mbandaka, Wangata) in Equateur Province. The cases had onset of symptoms between 8 May and 31 May 2020.

Preliminary results from the <u>sequencing</u> indicate that this outbreak is separate from the previous two outbreaks; this is indicated by the level of divergence from DRC Ituri 2018 (>350 substitutions) and DRC Tumba 2018 (>150 substitutions). It is most likely a separate spill-over event from the animal reservoir. Additional samples have been sent for sequencing.

Response measures have started, including testing of samples and contact tracing. Since the start of the vaccination with rVSV-ZEBOV-GP on 5 June 2020, there have been 1 495 people vaccinated.

On 4 June 2020, the first COVID-19 case was reported in Equateur province in Mbandaka in the town of Wangata.

II. Detailed reports

West Nile virus - Multi-country (World) - Monitoring season 2020

Opening date: 20 May 2020 Latest update: 12 June 2020

Epidemiological summary

As of 11 June 2020, no human cases or outbreaks among equids or birds have been reported for the 2020 West Nile virus transmission season.

ECDC links: West Nile virus infection atlas

Sources: TESSy | Animal Disease Notification System

ECDC assessment

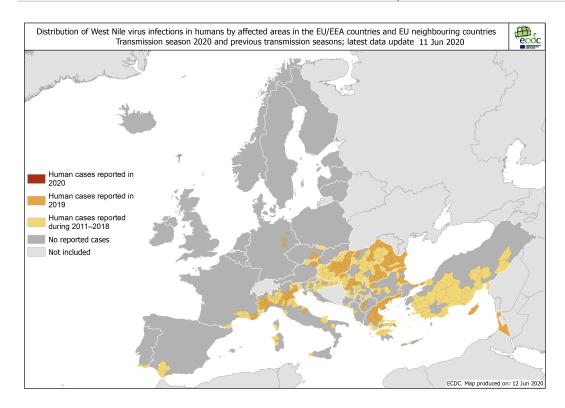
No human cases have been notified at this early stage of the transmission season. In accordance with Commission Directive 2014/110/EU, prospective donors should be deferred for 28 days after leaving a risk area for locally acquired West Nile virus unless the result of an individual nucleic acid test (NAT) is negative.

Actions

During the transmission season, ECDC publishes West Nile virus maps and an epidemiological summary every Friday.

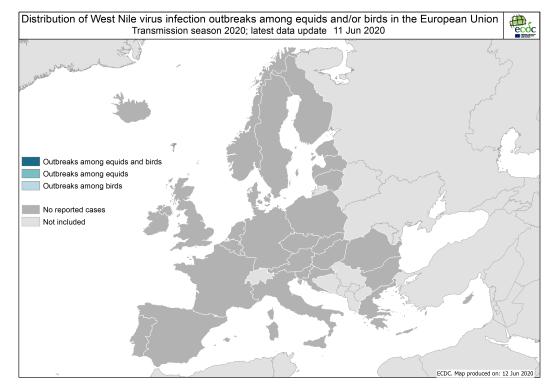
Distribution of human West Nile virus infections by affected areas as of 11 June

ECDC



Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 11 June

ECDC and ADNS



COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2020

Opening date: 7 January 2020 Latest update: 12 June 2020

Epidemiological summary

Since 31 December 2019 and as of 12 June 2020, 7 481 063 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 421 190 deaths.

Cases have been reported from:

Africa: 216 622 cases; the five countries reporting most cases are South Africa (58 568), Egypt (39 726), Nigeria (14 554), Algeria (10 589) and Ghana (10 358).

Asia: 1 481 097 cases; the five countries reporting most cases are India (297 535), Iran (180 176), Turkey (174 023), Pakistan (125 933) and Saudi Arabia (116 021).

America: 3 639 394 cases; the five countries reporting most cases are the United States (2 023 347), Brazil (802 828), Peru (214 788), Chile (154 092) and Mexico (133 974).

Europe: 2 134 496 cases; the five countries reporting most cases are Russia (502 436), the United Kingdom (291 409), Spain (242 707), Italy (236 142) and Germany (185 674).

Oceania: 8 758 cases; the five countries reporting most cases are Australia (7 285), New Zealand (1 154), Guam (182), French Polynesia (60) and the Northern Mariana Islands (30).

Other: 696 cases have been reported from an international conveyance in Japan.

Deaths have been reported from:

Africa: 5 838 deaths; the five countries reporting most deaths are Egypt (1 377), South Africa (1 289), Algeria (741), Sudan (413) and Nigeria (387).

Asia: 37 627 deaths; the five countries reporting most deaths are Iran (8 584), India (8 498), Turkey (4 763), China (4 638) and

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Pakistan (2 463).

America: 196 069 deaths; the five countries reporting most deaths are the United States (113 820), Brazil (40 919), Mexico (15 944), Canada (7 994) and Peru (6 109).

Europe: 181 518 deaths; the five countries reporting most deaths are the United Kingdom (41 279), Italy (34 167), France (29 346), Spain (27 136) and Belgium (9 636).

Oceania: 131 deaths; the four countries reporting deaths are Australia (102), New Zealand (22), Guam (5) and Northern Mariana Islands (2).

Other: 7 deaths have been reported from an international conveyance in Japan.

EU/EEA and the UK:

As of 12 June 2020, 1 460 676 cases have been reported in the EU/EEA and the UK: United Kingdom (291 409), Spain (242 707), Italy (236 142), Germany (185 674), France (155 561), Belgium (59 711), Sweden (48 288), Netherlands (48 251), Portugal (35 910), Poland (28 201), Ireland (25 238), Romania (21 182), Austria (16 964), Denmark (12 035), Czechia (9 886), Norway (8 594), Finland (7 064), Luxembourg (4 052), Hungary (4 039), Greece (3 088), Bulgaria (3 086), Croatia (2 249), Estonia (1 965), Iceland (1 807), Lithuania (1 752), Slovakia (1 541), Slovenia (1 488), Latvia (1 094), Cyprus (975), Malta (640) and Liechtenstein (83).

As of 12 June 2020, 170 603 deaths have been reported in the EU/EEA and the UK: United Kingdom (41 279), Italy (34 167), France (29 346), Spain (27 136), Belgium (9 636), Germany (8 763), Netherlands (6 044), Sweden (4 814), Ireland (1 703), Portugal (1 504), Romania (1 369), Poland (1 215), Austria (674), Denmark (593), Hungary (553), Czechia (329), Finland (325), Norway (242), Greece (183), Bulgaria (168), Luxembourg (110), Slovenia (109), Croatia (106), Lithuania (74), Estonia (69), Slovakia (28), Latvia (26), Cyprus (18), Iceland (10), Malta (9) and Liechtenstein (1).

EU:

As of 12 June 2020, 1 158 783 cases and 129 071 deaths have been reported in the EU.

Public Health Emergency of International Concern (PHEIC):

On 30 January 2020, the World Health Organization declared that the outbreak of COVID-19 constitutes a PHEIC. On 11 March 2020, the Director-General of the WHO declared the COVID-19 outbreak a pandemic. The Third International Health Regulations (IHR) Emergency Committee meeting for COVID-19 was held in Geneva on 30 April 2020. This committee concluded that the COVID-19 pandemic continues to constitute a PHEIC.

More details on the COVID-19 situation are available here.

Sources: Wuhan Municipal Health Commission | China CDC | WHO statement | WHO coronavirus website | ECDC 2019-nCoV website | RAGIDA | WHO

ECDC assessment

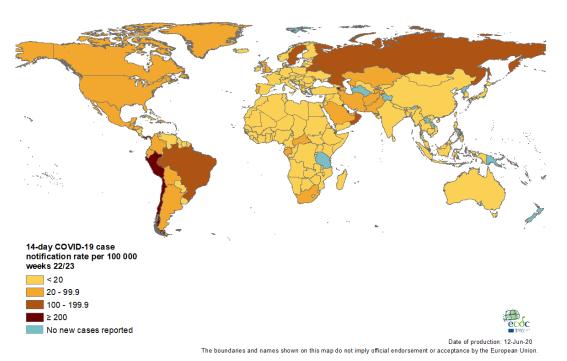
Information on the COVID-19 situation and a risk assessment can be found on the ECDC website.

Actions

ECDC activities related to COVID-19 can be found on the ECDC website.

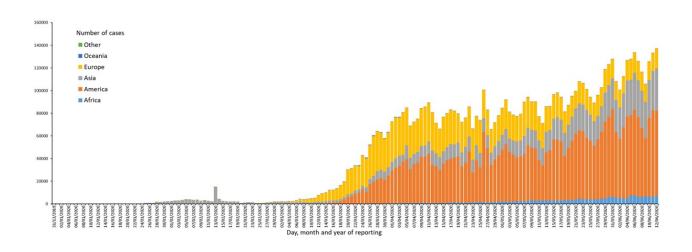
Geographic distribution of 14-days cumulative number of reported COVID-19 cases per 100 000 population, worldwide, as of 12 June 2020

Source: ECDC



Distribution of COVID-19 cases in accordance with the applied case definitions in the affected countries, as of 12 June 2020

Source: ECDC



Crimean-Congo Haemorrhagic fever — Spain — 2020

Opening date: 3 June 2020 Latest update: 12 June 2020

Epidemiological summary

On 11 June 2020, public health authorities in the autonomous community of Castile and León reported a case of Crimean-Congo haemorrhagic fever (CCHF), confirmed by PCR at the National Centre for Microbiology. The case was bitten by a tick at the end of May in Salamanca province and developed compatible symptoms in the following days. The case is currently under isolation in a healthcare facility; contact tracing activities were initiated.

Background: In 2016, two CCHF cases were reported in Spain; the first case had potential exposure to CCHF virus in the province of Ávila, also in Castile and León, and the second case was a healthcare worker who attended the primary case. In 2018, one fatal case was also reported in the province of Ávila.

Source: Regional health authorities

ECDC assessment

This is the third detection of human cases of CCHF in Spain. Although the risk of occurrence of cases of CCHF in Spain is considered to be low, additional cases may appear.

Ticks from the *Hyalomma* genus are considered the principal vectors of CCHF virus. *Hyalomma marginatum* is widely present in Spain, as shown in the <u>distribution map</u> published in June 2020.

Hunters, forest workers, hikers and people working with animals are more likely to be exposed to ticks and are also more likely to get infected. People potentially exposed to ticks should apply preventive measures to avoid tick bites.

Healthcare providers caring for patients infected with CCHF virus are at risk of human-to-human transmission as demonstrated in 2016 in Spain. The risk of further human-to-human transmission in hospital settings can be significantly reduced by applying timely and appropriate infection prevention and control measures.

On 8 September 2016, ECDC published a <u>rapid risk assessment</u> related to CCHF cases in Spain. The assessment remains valid for the current outbreak.

Additional information on Crimean-Congo haemorrhagic fever can be found in the <u>ECDC atlas</u>, an <u>ECDC factsheet</u> and in the latest <u>ECDC annual epidemiological report</u>.

Actions

ECDC is monitoring the ongoing situation through epidemic intelligence activities and will report again if epidemiological updates become available.

Ebola virus disease - eleventh outbreak - Democratic Republic of the Congo - 2020

Opening date: 4 June 2020 Latest update: 12 June 2020

Epidemiological summary

Since 18 May 2020 and as of 9 June 2020, a total of twelve cases (9 confirmed, 3 probable), including nine deaths, have been reported from Bikoro, Mbandaka and Wangata health zones in Equateur province in the DRC. In total, two healthcare workers have been affected.

Background: From May to July 2018, the 9th Ebola outbreak in the DRC took place in Mbandaka, Bikoro and in the Equateur province, leading to a total of 54 cases, including 33 deaths. According to WHO, this current event seems to be separate from the 10th Ebola outbreak currently ongoing and in its final stage in the eastern part of the country, almost a thousand kilometres away, which has reported 3 463 cases so far, including 2 280 deaths. No new cases have been reported for the 10th outbreak since 27 April 2020. Sequencing is ongoing to confirm the new outbreak as a separate event. Preliminary sequencing results confirm the new outbreak as a separate spill-over event. This makes this the DRC's 11th outbreak of Ebola virus disease since 1976 when the virus was first discovered.

Besides Ebola outbreaks, the country is currently battling other major outbreaks such as the COVID-19 pandemic (4 515 cases, including 98 deaths) and a measles outbreak (369 520 cases, including 6 779 deaths). Due to the COVID-19 pandemic, the country has been on lockdown since mid-March 2020, with closures of all borders for non-essential traffic and a ban on all trips between the capital and the country's 25 provinces.

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Sources: WHO DON | WHO News item | Dr Tedros | WHO Afro Sitrep | WHO Afro bulletin

ECDC assessment

Ebola outbreaks in the DRC are recurrent as the virus is present in an animal reservoir in many parts of the country. Implementing response measures is crucial, and a high level of surveillance is essential to detect and interrupt further transmission early. Response measures might be challenging amid the other outbreaks in the country. The overall risk to the EU/EEA is very low, especially with the current limitation of travel.

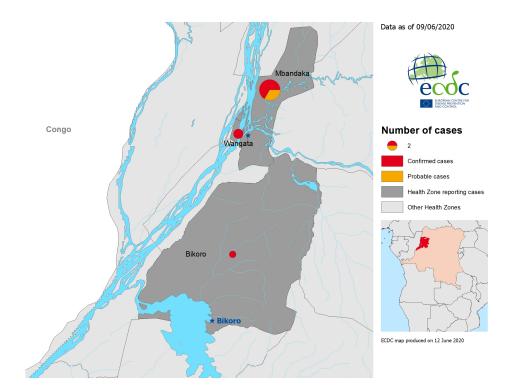
WHO Assessment: On 3 June 2020, the <u>WHO assessment</u> revealed that the current resurgence is not unexpected given the identification of wildlife spillover potential in Africa, accompanied by the high population density in the region and considering the sociological, ecological, and environmental drivers that could influence the emergence of EVD. There is a need for further resources, and several challenges have been identified for the response in this area.

Actions

ECDC will follow this event through Epidemic Intelligence. ECDC has published a rapid risk assessment on the ninth outbreak in DRC: Ebola virus disease outbreak in Equateur Province, Democratic Republic of the Congo, First update, <a href="published on 25 May 2018.]

Geographical distribution of confirmed and probable cases of Ebola virus disease, Equateur Province, Democratic Republic of the Congo, as of 9 June 2020

Source: ECDC



Ebola Virus Disease cases distribution in Equateur Province, Democratic Republic of the Congo, as of 9 June 2020

				Source: ECDC
. □	Number of confirmed cases	Number of probable cases	Confirmed and probable cases	Number of deaths
Democratic_Republic_of_the_Congo	9	3	12	9
□ Equateur	9	3	12	9
Bikoro	1	0	1	1
Mbandaka	6	3	9	7
Wangata	2	0	2	1
Cumulative Total	q	3	12	q

The Communicable Disease Threat Report may include unconfirmed information which may later prove to be unsubstantiated.