

This weekly bulletin provides updates on threats monitored by ECDC.

I. Executive summary

EU Threats

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

Opening date: 7 January 2020

Latest update: 21 August 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 15 August 2020 and as of 21 August 2020, 1 804 882 new cases of coronavirus disease (COVID-19) (in accordance with the applied case definition in the countries) have been reported, including 34 746 new deaths.

Globally, the number of cases has increased from 20 900 763 cases to 22 705 645, and the number of deaths has risen from 759 358 to 794 104.

In the EU/EEA and the UK, the number of cases has increased from 1 885 715 cases to 2 001 878 (+ 116 163 cases)

More details are available [here](#).

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

Opening date: 20 May 2020

Latest update: 21 August 2020

During the West Nile virus transmission season, which usually runs from June to November, ECDC monitors the occurrence of infections in the EU/EEA and EU neighbouring countries. ECDC publishes weekly epidemiological updates to inform blood safety authorities. Data reported through The European Surveillance System (TESSy) are presented at the NUTS 3 (nomenclature of territorial units for statistics 3) level for the EU/EEA Member States and at GAUL 1 (global administrative unit layers 1) level for the EU neighbouring countries.

→Update of the week

Between 14 and 20 August 2020, EU Member States reported 34 human cases of WNV infection: Italy (17), Greece (11) and Spain (six). One case was reported from the province of Verbano-Cusio-Ossola, Italy, which had not been affected in previous transmission seasons. All other cases were reported from areas that have been affected during previous transmission seasons. This week, no deaths were reported. No human cases of WNV infection or deaths were reported from EU neighbouring countries.

Spain is currently experiencing an outbreak of WNV infection in the province of Seville. Six confirmed human cases reported through TESSy (see above) and an additional 13 probable cases are being further investigated. As these probable cases have not yet been reported through TESSy they are not included in the list of the cases in the Surveillance Atlas. Additional patients with meningo-encephalitis are currently being tested.

ECDC links: [West Nile virus infection atlas](#)

Sources: TESSy | [Junta de Andalucía](#)

Monitoring environmental suitability of Vibrio growth in the Baltic Sea - Summer 2020

Opening date: 23 June 2020

Latest update: 21 August 2020

Elevated sea surface temperatures (SST) in marine environments with low salt content offer ideal growth conditions for certain *Vibrio* species. These conditions occur during the summer months in estuaries and enclosed water bodies with moderate salinity.

ECDC has developed a model to map the environmental suitability for *Vibrio* growth in the Baltic Sea ([ECDC Vibrio Map Viewer](#)). Please note that this model has been calibrated to the Baltic Region in northern Europe and might not apply to other worldwide settings prior to validation.

→Update of the week

As of 20 August 2020, in EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was mostly medium-to-high. For the next five days it is generally estimated as very low to low, except in Uusikaupunki (Finland), Hiiu and Läänemaa (Estonia), the Gulf of Riga (Estonia and Latvia), Klaipeda (Lithuania), Gdansk Bay and Szczecin (Poland), Mecklenburg-Western Pomerania (Germany), Øresund/Öresund Strait (Denmark and Sweden), Simrishamn municipality, Kalmar Strait and Nyköping (Sweden) where the risk is estimated as medium-to-high.

Outside of the EU/EEA, the overall environmental suitability for *Vibrio* growth in the Baltic Sea was very low to low in Saint Petersburg and Vyborg (Russia) and medium-to-high in Kaliningrad (Russia). For the next five days it is estimated as very low to low in Vyborg and Saint Petersburg and medium-to-high in Kaliningrad (Russia).

Measles – Multi-country (World) – Monitoring European outbreaks

Opening date: 9 February 2011

Latest update: 21 August 2020

Measles cases in the EU/EEA and UK continue to occur among both adults and children. However, a sharp decrease in the reporting of measles cases has been observed during the COVID-19 pandemic in EU/EEA and UK, as well as in other countries across the globe.

→Update of the week

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 10 July 2020, 25 new cases have been reported by seven EU/EEA countries and the UK: Belgium (+1), Czechia (+1), Germany (+5), Ireland (-2), Italy (+3), Poland (+5) and Romania (+12). Other countries have not reported any new cases of measles.

Most of the cases in 2020 have been reported by Romania (1 284), Bulgaria (257), France (219) and Germany (136).

No new deaths have been reported by EU/EEA countries and the UK. Overall, in 2020, two deaths have been reported in the EU/EEA and UK, both from Bulgaria.

Relevant updates outside the EU/EEA and the UK are available for WHO AFRO and WHO WPRO regions, Ukraine and Switzerland.

Disclaimer: the [monthly measles report published in the CDTR](#) provides the most recent data on cases and outbreaks from the publicly available information of national public health authorities or media. This report is supplementary to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 30 EU/EEA countries and the UK to The European Surveillance System (TESSy). Data presented in the two monthly reports may differ.

Non EU Threats

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

Opening date: 4 June 2020

Latest update: 21 August 2020

On 1 June 2020, the Ministry of Health of the Democratic Republic of the Congo (DRC) [declared](#) the eleventh outbreak of Ebola virus disease in the country. The outbreak is located in Equateur Province in the north-west of the country, close to the border with Congo.

→Update of the week

Since the last update and as of 18 August 2020, 12 additional confirmed cases and six additional deaths have been reported from Equateur Province in the DRC.

Monieka Health Zone is a newly affected zone in Equateur, reporting one confirmed case.

Chikungunya and dengue – Multi-country (World) – Monitoring global outbreaks

Opening date: 27 January 2017

Latest update: 21 August 2020

Chikungunya virus disease and dengue are vector-borne diseases that affect 50–100 million people per year. In the past decade, an increasing number of countries have detected cases of dengue and chikungunya virus disease. Chikungunya virus disease has been circulating in Africa, Asia, the Americas, the Caribbean and the Pacific since 2013–2014. Dengue is also present in Africa, the Americas, Asia, the Caribbean and the Pacific. In 2018 and 2019, France and Spain reported autochthonous dengue cases, but no autochthonous dengue cases have been reported so far this year.

→Update of the week

Chikungunya virus disease: The virus is widespread in the Americas region, with several countries reporting cases in 2020. Chikungunya virus disease cases have also been reported in Asia and Africa during this period. Since the previous CDTR update on 18 July 2020, Brazil, Thailand and Cambodia have reported the majority of new cases.

Dengue: Since the beginning of the year, the majority of the cases have been reported by Brazil, Paraguay, Bolivia, Argentina and Indonesia.

II. Detailed reports

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

Opening date: 7 January 2020

Latest update: 21 August 2020

Epidemiological summary

Since 31 December 2019 and as of 21 August 2020, 22 705 645 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 794 104 deaths.

Cases have been reported from:

Africa: 1 158 613 cases; the five countries reporting most cases are South Africa (599 940), Egypt (97 025), Nigeria (50 964), Morocco (47 638) and Ghana (43 260).

Asia: 5 975 917 cases; the five countries reporting most cases are India (2 905 823), Iran (352 558), Saudi Arabia (303 973), Pakistan (291 588) and Bangladesh (287 959).

America: 12 194 253 cases; the five countries reporting most cases are United States (5 573 847), Brazil (3 501 975), Peru (567 059), Mexico (543 806) and Colombia (513 719).

Europe: 3 349 213 cases; the five countries reporting most cases are Russia (942 106), Spain (377 906), United Kingdom (322 280), Italy (256 118) and France (229 814).

Oceania: 26 953 cases; the five countries reporting most cases are Australia (24 236), New Zealand (1 315), Guam (704), Papua New Guinea (361) and French Polynesia (232).

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

Deaths have been reported from:

Africa: 26 971 deaths; the five countries reporting most deaths are South Africa (12 618), Egypt (5 212), Algeria (1 411), Nigeria (992) and Sudan (812).

Asia: 125 250 deaths; the five countries reporting most deaths are India (54 849), Iran (20 264), Indonesia (6 418), Pakistan (6 219) and Iraq (6 208).

America: 435 468 deaths; the five countries reporting most deaths are United States (174 255), Brazil (112 304), Mexico (59 106), Peru (27 034) and Colombia (16 183).

Europe: 205 910 deaths; the five countries reporting most deaths are United Kingdom (41 403), Italy (35 418), France (30 480), Spain (28 813) and Russia (16 099).

Oceania: 498 deaths; the five countries reporting most deaths are Australia (463), New Zealand (22), Guam (6), Papua New Guinea (4) and Northern Mariana Islands (2).

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

EU/EEA and the UK:

As of 21 August 2020, 2 001 878 cases have been reported in the EU/EEA and the UK: Spain (377 906), United Kingdom (322 280), Italy (256 118), France (229 814), Germany (228 621), Sweden (85 810), Belgium (80 084), Romania (74 963), Netherlands (64 992), Poland (59 378), Portugal (54 992), Ireland (27 676), Austria (24 608), Czechia (21 045), Denmark (16 056), Bulgaria (14 820), Norway (10 162), Greece (7 934), Finland (7 842), Luxembourg (7 637), Croatia (7 329), Hungary (5 046), Slovakia (3 102), Slovenia (2 536), Lithuania (2 528), Estonia (2 227), Iceland (2 040), Malta (1 510), Cyprus (1 395), Latvia (1 327) and Liechtenstein (100).

As of 21 August 2020, 180 367 deaths have been reported in the EU/EEA and the UK: United Kingdom (41 403), Italy (35 418), France (30 480), Spain (28 813), Belgium (9 976), Germany (9 253), Netherlands (6 182), Sweden (5 805), Romania (3 154), Poland (1 925), Portugal (1 788), Ireland (1 776), Austria (729), Denmark (621), Hungary (609), Bulgaria (527), Czechia (406), Finland (334), Norway (264), Greece (235), Croatia (168), Slovenia (125), Luxembourg (124), Lithuania (82), Estonia (63), Latvia (33), Slovakia (33), Cyprus (21), Iceland (10), Malta (9) and Liechtenstein (1).

EU:

As of 21 August 2020, 1 667 296 cases and 138 689 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](#) and [fourth](#) International Health Regulations (IHR) Emergency Committee meeting for COVID-19 were held in Geneva on 30 April and 31 July 2020, respectively. The committee concluded during both meetings that the COVID-19 pandemic continues to constitute a PHEIC.

Sources: [Wuhan Municipal Health Commission](#) | [China CDC](#) | [WHO statement](#) | [WHO coronavirus website](#) | [ECDC 2019-nCoV](#)

[website](#) | [RAGIDA](#) | [WHO](#)

ECDC assessment

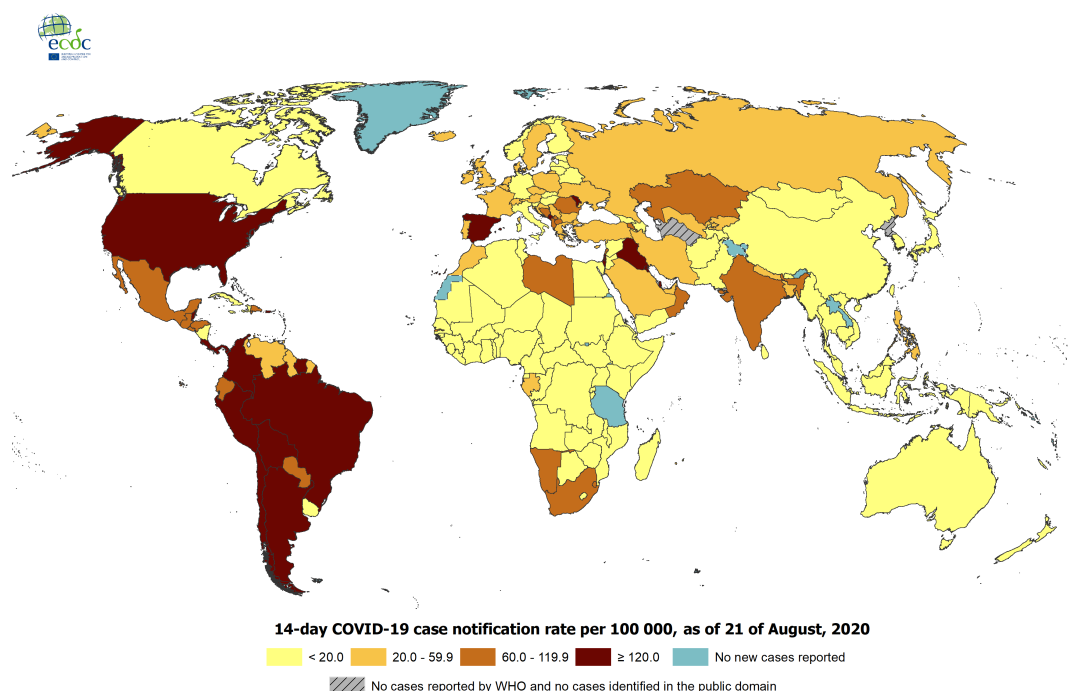
Information on the COVID-19 situation and a risk assessment can be found on [ECDC's website](#).

Actions

ECDC activities related to COVID-19 can be found on ECDC's [website](#).

Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, as of 21 August 2020

ECDC



The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union.

Date of production: 21/08/2020

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

Opening date: 20 May 2020

Latest update: 21 August 2020

Epidemiological summary

Between 14 and 20 August 2020, EU Member States reported 34 human cases of WNV infection: Italy (17), Greece (11) and Spain (six). One case was reported from the province of Verbano-Cusio-Ossola, Italy, which had not been affected in previous transmission seasons. All other cases were reported from areas that have been affected during previous transmission seasons. This week, no deaths were reported. No human cases of WNV infection or deaths were reported from EU neighbouring countries. Spain is currently experiencing an outbreak of WNV infection in the province of Seville. Six confirmed human cases have been reported through TESSy (see above) and an additional 13 probable cases are being further investigated. As these probable cases have not yet been reported through TESSy they are not included in the list of the cases in the Surveillance Atlas. Additional patients with meningo-encephalitis are currently being tested.

Since the beginning of the 2020 transmission season and as of 20 August 2020, EU Member States have reported 66 human cases of WNV infection and six deaths through The European Surveillance System (TESSy): Greece (39, including six deaths), Italy (19), Spain (six) and Romania (two). One case was reported from the province of Verbano-Cusio-Ossola, Italy, which had not been affected in previous transmission seasons. All other cases were reported from areas that have been affected during previous transmission seasons. No cases have been reported from EU neighbouring countries.

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Since the beginning of the 2020 transmission season, 19 outbreaks among equids have been reported. These outbreaks have been reported by Spain (16 including nine in the province of Seville), Italy (two) and Portugal (one) through the Animal Disease Notification System (ADNS) of the European Commission. No outbreaks among birds have been reported through ADNS.

ECDC links: [West Nile virus infection atlas](#)

Sources: TESSy | Animal Disease Notification System

ECDC assessment

Human WNV infections have been reported in four EU Member States (Greece, Italy, Romania and Spain) where WNV enzootic transmission between mosquitoes and birds has previously been described.

Between 2010 and 2019, Spain only reported five locally-acquired WNV infections: two cases in 2010 in the province of Cádiz and three cases in 2016 in the province of Seville. During the same period, 89 outbreaks among equids were reported through ADNS in the province of Seville, highlighting the presence of an enzootic cycle between mosquitoes and birds in the region.

The lineage of the strain causing the ongoing outbreak in Spain remains unknown. Sequencing is ongoing and the result will provide relevant information for the assessment of the event.

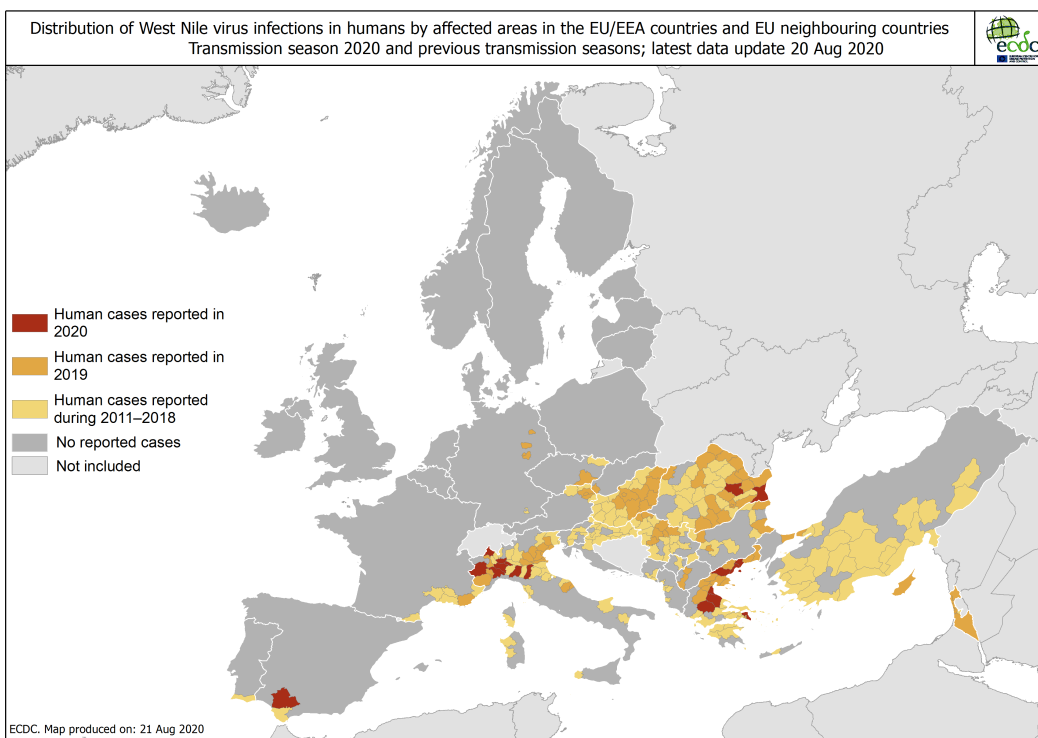
In accordance with Commission Directive 2014/110/EU, prospective donors should be deferred for 28 days after leaving a risk area for locally-acquired WNV infection, unless the result of an individual nucleic acid test is negative.

Actions

During the transmission seasons, ECDC publishes a set of WNV transmission maps and an epidemiological summary every Friday.

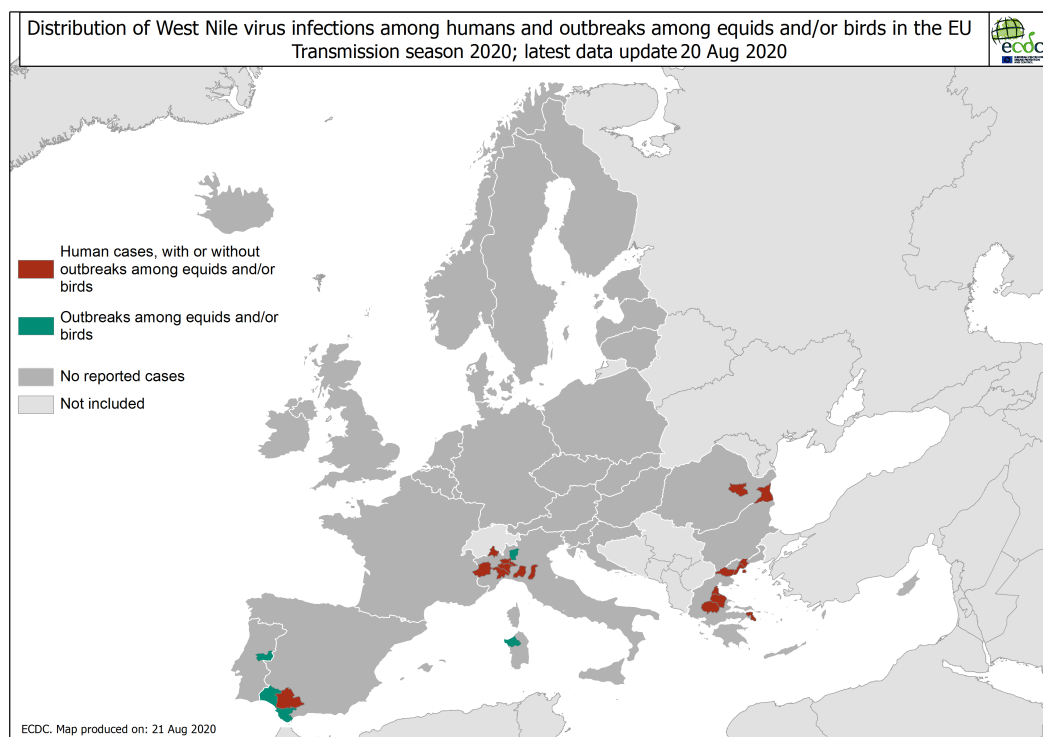
Distribution of human West Nile virus infections by affected areas as of 20 Aug

ECDC



Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 20 Aug

ECDC and ADNS



Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea - Summer 2020

Opening date: 23 June 2020

Latest update: 21 August 2020

Epidemiological summary

As of 20 August 2020, in EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was mostly medium-to-high. For the next five days it is generally estimated as very low to low, except in Uusikaupunki (Finland), Hiiuma and Läänemaa (Estonia), the Gulf of Riga (Estonia and Latvia), Klaipeda (Lithuania), Gdansk Bay and Szczecin (Poland), Mecklenburg-Western Pomerania (Germany), Øresund/Öresund Strait (Denmark and Sweden), Simrishamn municipality, Kalmar Strait and Nyköping (Sweden) where the risk is estimated as medium-to-high.

Outside of the EU/EEA, the overall environmental suitability for *Vibrio* growth in the Baltic Sea was very low to low in Saint Petersburg and Vyborg (Russia) and medium-to-high in Kaliningrad (Russia). For the next five days it is estimated as very low to low in Vyborg and Saint Petersburg and medium-to-high in Kaliningrad (Russia).

Sources: [ECDC](#) | [National Environmental Satellite, Data and Information Service](#)

Please note that this model has been calibrated to the Baltic Region in Northern Europe and might not apply to other worldwide settings prior to validation. For the Baltic Sea, the model parameters to be used in the map are the following values: number colour bands (20) scale method linear, legend range minimum value (0), and maximum value (28).

ECDC assessment

Elevated SSTs in marine environments with low salt content offer ideal environmental growth conditions for certain *Vibrio* species. These conditions can be found during the summer months in estuaries and enclosed water bodies with moderate salinity. Open ocean environments do not offer appropriate growth conditions for these bacteria due to high salt content, low temperatures and limited nutrient content. These *Vibrio* species can cause vibriosis infections, particularly *V. parahaemolyticus*, *V. vulnificus* and non-toxicogenic *V. cholera*.

In the past, vibriosis in humans caused by these species in the Baltic region has occurred during hot summer months, particularly when SSTs were elevated (above 20 degrees Celsius). The most common clinical manifestations are gastroenteritis with nausea,

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vomiting and diarrhoea, wound infections when a cut has been exposed, infected wounds or abrasions due to contaminated seawater, primary septicaemia and otitis externa. In addition to contracting vibriosis through contact with natural bodies of water, especially marine or estuarine water, other risk factors for illness include the consumption of shellfish, particularly raw oysters.

Actions

ECDC is monitoring this threat on a weekly basis during the summer of 2020 and reports on increased environmental suitability for growth of *Vibrio* species.

Measles – Multi-country (World) – Monitoring European outbreaks

Opening date: 9 February 2011

Latest update: 21 August 2020

Epidemiological summary

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 10 July 2020, 25 new cases have been reported by seven EU/EEA countries and UK: Belgium (+1), Czechia (+1), Germany (+5), Ireland (-2), Italy (+3), Poland (+5) and Romania (+12). Other countries have not reported any new cases of measles.

Most of the cases in 2020 have been reported by Romania (1 284), Bulgaria (257), France (219) and Germany (136).

No new deaths have been reported by EU/EEA countries and UK. Overall, in 2020, two deaths have been reported in the EU/EEA and UK, both from Bulgaria.

Relevant updates outside the EU/EEA and the UK are available for WHO AFRO and WHO WPRO regions, Ukraine and Switzerland.

Routine immunisation sessions should be maintained as long as COVID-19 response measures allow, according to the [WHO European Office for Europe guidelines](#). [WHO guidelines](#) recommend that governments temporarily pause preventive immunisation campaigns where there is no active outbreak of a vaccine-preventable disease.

In May 2019, WHO classified measles outbreaks across the European Region as a [Grade 2 emergency](#). On 29 August 2019, the [European Regional Verification Commission for Measles and Rubella Elimination \(RVC\)](#) determined that, for the first time since the verification process began in the Region in 2012, four countries (Albania, the Czech Republic, Greece and the United Kingdom) had lost their measles elimination status.

Disclaimer: the [monthly measles report published in the CDTR](#) provides the most recent data on cases and outbreaks from the publicly available information of national public health authorities or media. This report is supplementary to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 30 EU/EEA countries and the UK to The European Surveillance System (TESSy). Data presented in the two monthly reports may differ.

Epidemiological summary for EU/EEA countries and the UK with updates since last month

[Belgium](#) reported 50 cases in the period January–June 2020, according to TESSy, an increase of two cases since March 2020.

[Czechia](#) reported four cases in the period January–July 2020, an increase of one case since the national report for January–May 2020. A new case was reported in June 2020.

[Germany](#) reported 136 cases in 2020 and as of week 32 (ending 9 August 2020), an increase of five cases since week 28 (ending 12 July 2020).

[Ireland](#) reported 14 cases in 2020 and as of week 32 (ending 8 August 2020), a decrease of two cases since the national report on week 27 (ending 5 July 2020).

[Italy](#) reported 101 cases of measles from 1 January to 30 June 2020, an increase of three cases since the national report for January–May 2020. Of these cases, 52 were reported in January, 40 in February and nine cases in March. No cases were reported in April, May and June 2020. Most of the cases were reported in Puglia (43). There were no measles related deaths reported in Italy in 2020.

[Poland](#) reported 29 cases in 2020, as of 31 July, an increase of five cases since 30 June 2020.

[Romania](#) reported 1 296 cases in 2020, as of 17 July 2020, an increase of 12 cases since the national report on 3 July 2020. Since the beginning of the outbreak in October 2016 and as of 17 July 2020, Romania has reported 20 204 confirmed measles cases, including 64 deaths.

Relevant epidemiological summary for countries outside the EU/EEA and the UK

A global overview is available on [WHO's website](#). Additional information with the latest available data is provided for several countries.

[Switzerland](#) has reported 35 cases of measles in 2020, as of 11 August 2020, with no increase since 7 July 2020.

[Ukraine](#) has reported 245 cases of measles in 2020, as of the release of its national report on 11 August 2020. This is an increase of 48 cases since the national report in April 2020. According to the Public Health Centre under the Ministry of Health, vaccination coverage with measles-containing vaccines has decreased to 37% in 2020 (41% in children 6 years of age). Overall, in 2019, Ukraine reported over 57 000 cases of measles.

According to [WHO AFRO](#) (African Region) as of 16 August 2020 (week 33), outbreaks of measles had been reported in the following countries: Angola, Burundi, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Guinea, Kenya, Liberia, Mali, Mozambique, Niger, Nigeria and South Sudan.

Democratic Republic of the Congo (DRC) reported 68 812 cases of measles in 2020, with 979 deaths (CFR: 1.4%) as of 2 August 2020. Over the past four weeks (weeks 28 to 31) the provinces that notified the majority of cases were Sankuru (935 cases), South Ubangi (213 cases), Kasai (135 cases), Maindombe (120 cases), Tanganyika (108 cases) and North Ubangi (102 cases). Since 2019 and as of 2 August 2020, a total of 380 329 measles cases and 7 010 deaths (CFR 1.8%) were reported in the country, an increase of 4 369 cases and 69 deaths since the WHO AFRO report for 21 June 2020.

According to a [WHO WPRO](#) (Western Pacific Region) report, as of 20 July 2020, there were 5 107 cases of measles, including 10 deaths, reported in 2020. This represents an increase of 532 cases since the WPRO report for May 2020. Most of the cases were reported by the Philippines (3 510 cases, including 10 deaths). Other countries which reported measles cases were China (438), Cambodia (349), Malaysia (328), Vietnam (303), Laos (107), Pacific island countries and areas (74): Tonga (51), Samoa (18), Fiji (5), American Samoa (2). Cases were also previously reported by Australia (25), Singapore (14), Japan (12), New Zealand (7), South Korea (6), Papua New Guinea (3).

There were no updates from [WHO PAHO](#) (Pan American Health Organization) since the update for May 2020.

ECDC assessment

A substantial decline in measles cases reported by the EU/EEA countries and the UK after March 2020 contrasts with the typical seasonal pattern seen for measles, which peaks in the spring in temperate climates. A similar decrease has been observed in other countries worldwide during the same period. Under-reporting, under-diagnosis or a real decrease, due to the direct or indirect effects of the COVID-19 pandemic measures, could explain the decline of cases observed. Nevertheless, achieving the best possible vaccine uptake in the current circumstances is crucial in order to prevent measles outbreaks in the future.

Actions

ECDC monitors the measles situation through epidemic intelligence, which supplements a monthly report with measles surveillance data from The European Surveillance System (TESSy) for 30 EU/EEA countries. ECDC published a [risk assessment](#) entitled 'Who is at risk of measles in the EU/EEA?' on 28 May 2019.

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

Opening date: 4 June 2020

Latest update: 21 August 2020

Epidemiological summary

Since the start of the outbreak and as of 18 August 2020, a total of 96 cases (92 confirmed, four probable), including 42 deaths,

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have been reported from Bikoro (26), Bolomba (13), Iboko (4), Ingende (9), Lilanga Bobangi (2), Lolanga Mampoko (4), Lotumbe (9), Mbandaka (26), Monieka (1) and Wangata (2) health zones in Equateur province in the DRC.

Since the beginning of the vaccination campaign with rVSV-ZEBOV-GP on 5 June 2020, 23 722 people have been vaccinated.

Background: From May to July 2018, the [9th Ebola outbreak](#) in the DRC occurred in Mbandaka, Bikoro and in the Equateur province, leading to a total of 54 cases, including 33 deaths. According to WHO, the current event seems to be separate from the [10th Ebola outbreak](#) in the eastern part of the country, which resulted in 3 470 cases, including 2 287 deaths and was declared over on 25 June 2020. [Sequencing](#) results confirm the new outbreak as a separate spill-over event. This is the DRC's [11th outbreak](#) of Ebola virus disease since 1976 when the virus was first discovered.

In addition to Ebola outbreaks, the country is currently affected by other major outbreaks such as COVID-19, measles, cholera, monkeypox, polio and the bubonic plague.

Sources: [WHO Afro Twitter](#) | [WHO Afro Sitrep](#) | [WHO Afro bulletin](#) | [WHO DON](#) | [WHO News item](#) | [Dr Tedros](#)

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 on. Response measures can be challenging amid the other outbreaks ongoing in the country. The overall risk to the EU/EEA is very low, especially with the current travel limitations.

WHO Assessment: On 3 June 2020, [WHO's assessment](#) revealed that the current resurgence is not unexpected, given the identification of wildlife spill-over potential in Africa, the high population density in the region and 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 to the response in this area.

Actions

ECDC is monitoring this event through epidemic intelligence. On 25 May 2018, ECDC 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](#).

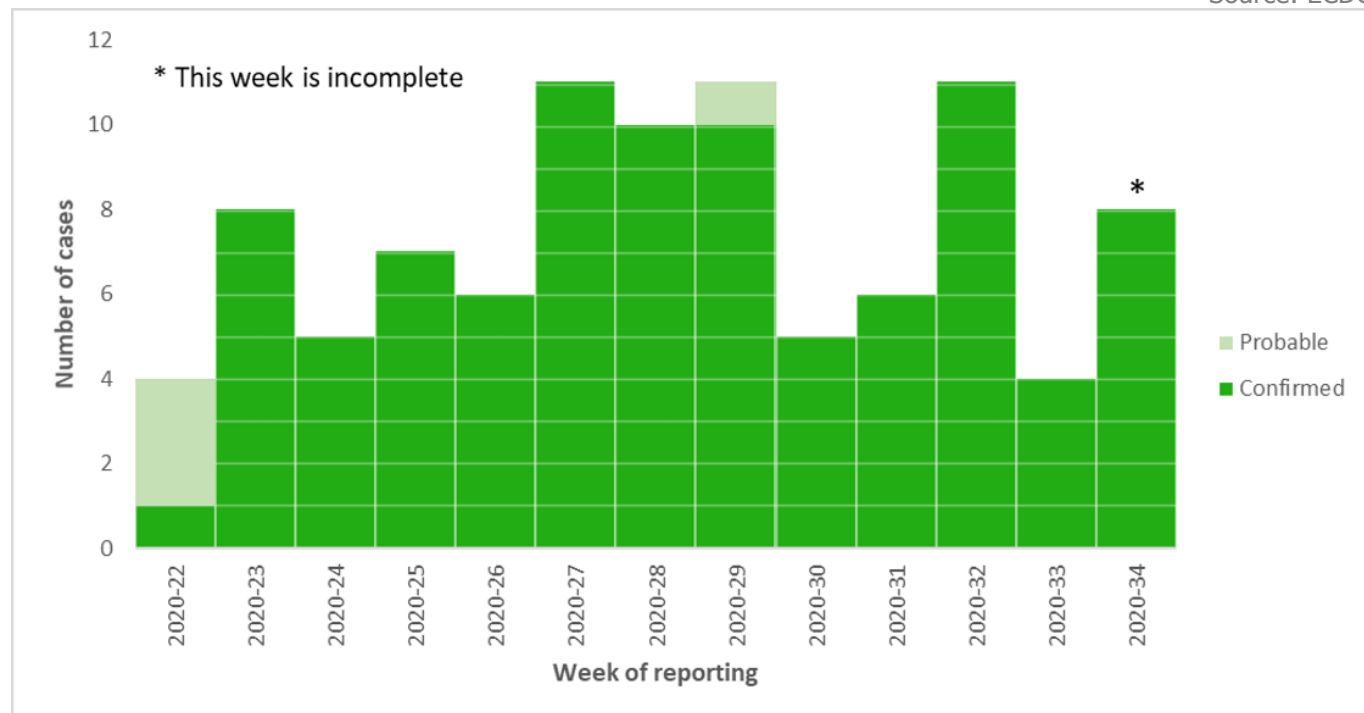
Distribution of Ebola Virus Disease cases in Equateur Province, Democratic Republic of the Congo, as of 18 August 2020

Source: ECDC

	Number of confirmed cases	Number of probable cases	Confirmed and probable cases	Number of deaths	Conf/Prob cases in past 7 days
Democratic Republic of the Congo	92	4	96	42	
Equateur	92	4	96	42	
Bikoro	26	0	26	14	
Bolomba	13	0	13	1	
Iboko	4	0	4	1	
Ingende	9	0	9	4	ACTIVE
Lilanga Bobangi	2	0	2	0	ACTIVE
Lolanga Mampoko	4	0	4	2	ACTIVE
Lotumbe	9	0	9	2	ACTIVE
Mbandaka	22	4	26	17	ACTIVE
Monicka	1	0	1	0	ACTIVE
Wangata	2	0	2	1	
Cumulative Total	92	4	96	42	

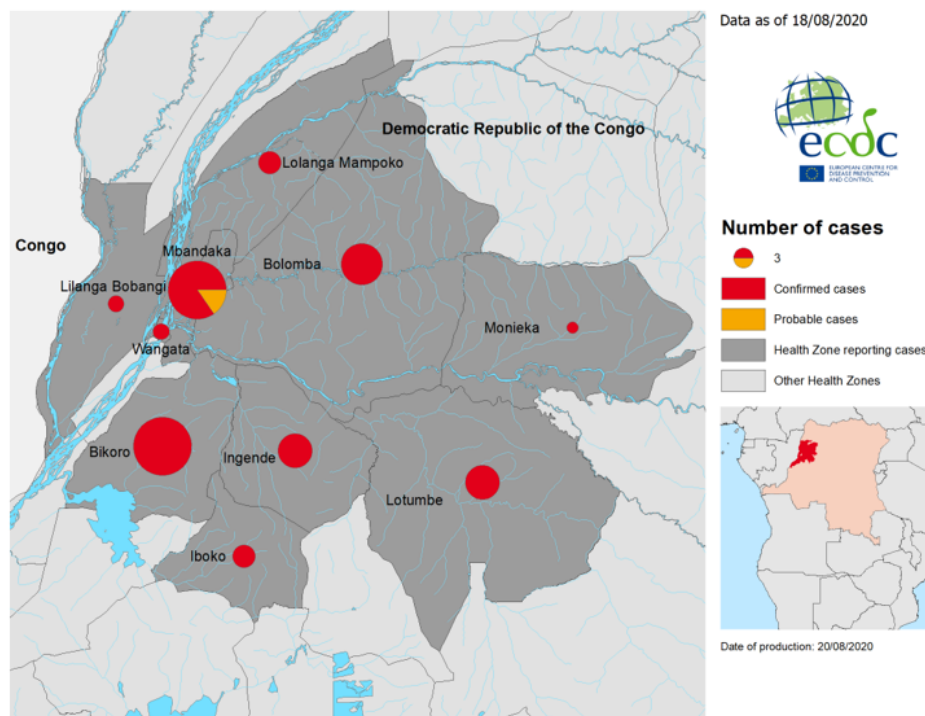
Distribution of Ebola virus disease cases in Equateur Province, Democratic Republic of the Congo, by week of reporting and as of 18 August 2020

Source: ECDC



Geographical distribution of confirmed and probable cases of Ebola virus disease, Equateur Province, Democratic Republic of the Congo, as of 18 August 2020

Source: ECDC



Chikungunya and dengue – Multi-country (World) – Monitoring global outbreaks

Opening date: 27 January 2017

Latest update: 21 August 2020

Epidemiological summary

Europe

Chikungunya virus disease:

No autochthonous cases of Chikungunya virus were detected in continental EU/EEA countries and the UK in 2019 and none have been detected to date in 2020.

Dengue:

On 28 July 2020, [local health authorities](#) in France reported one autochthonous case of dengue fever in a resident of the Hérault prefecture. This is the first autochthonous transmission reported in continental France in 2020.

Americas and the Caribbean

Chikungunya virus disease:

[Bolivia](#): In 2020, as of 25 July, Bolivia has reported 1 510 cases, 44 of which are laboratory-confirmed.

[Brazil](#): In 2020, as of 25 July, Brazil has reported 62 334 cases, 19,758 of which are laboratory-confirmed. 13 deaths have been reported.

[Costa Rica](#): In 2020, as of 18 July, Costa Rica has reported 37 cases. This represents an increase of one case since the last CDTR update.

[Colombia](#): In 2020, as of 1 August, Colombia has reported 144 cases, five of which are laboratory-confirmed. This represents an increase of five suspected cases since the last CDTR update.

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[Ecuador](#): In 2020, as of 25 July, Ecuador has reported one case.

[El Salvador](#): In 2020, as of 8 August, El Salvador has reported 90 suspected cases. During the same period in 2019, El Salvador reported 419 suspected cases.

[Guatemala](#): In 2020, as of 11 July, Guatemala has reported 34 cases.

[Honduras](#): In 2020, as of 25 July, Honduras has reported 27 suspected case. This represents an increase of two cases since the last CDTR update.

[Mexico](#): In 2020 and as of 8 August, Mexico has reported two confirmed cases. During the same period in 2019, Mexico reported three cases.

[Nicaragua](#): In 2020, as of 25 July, Nicaragua has reported nine suspected cases. During the same period in 2019, 96 suspected cases were reported.

[Paraguay](#): In 2020, as of 18 July, Paraguay has reported three probable cases and 265 additional suspected cases.

[Peru](#): In 2020, as of 25 July, Peru has reported 65 cases of chikungunya.

[Venezuela](#): In 2020, as of 1 August, Venezuela has reported 43 cases, two of which are laboratory-confirmed. This represents an increase of nine cases since the last CDTR update.

Dengue:

In 2020, the Pan American Health Organization (PAHO) reported 1 914 207 suspected and confirmed dengue cases (859 930 of which are laboratory-confirmed) and 686 deaths in the Americas region. The countries reporting most cases are: Brazil (1 278 565 cases, of which 677 664 are laboratory-confirmed), Paraguay (220 050, of which 60 891 are laboratory-confirmed), Bolivia (83 368 of which 14 634 are laboratory-confirmed) and Argentina (79 775, of which 56 095 are laboratory-confirmed). All four dengue virus serotypes (DENV 1, DENV 2, DENV 3, and DENV 4) are currently circulating in the Region of the Americas, which increases the risk of severe cases. The figures for each country of the Americas region can be found on the [PAHO Health Information Platform](#).

According to [Santé Publique France](#), the French Caribbean islands are all in an epidemic phase:

In Guadeloupe, since the beginning of the epidemic in week 2019-42 and as of 2 August 2020, 9 625 suspected dengue cases have been reported.

In Saint Martin, since the beginning of the epidemic in week 2020-03 and as of 2 August 2020, 1 865 suspected dengue cases have been reported (of which 446 have been laboratory-confirmed), including one death.

In Saint Barthelemy, since the beginning of the epidemic in week 2020-17 and as of 2 August 2020, 520 suspected dengue cases have been reported (of which 310 have been laboratory-confirmed).

In Martinique, since the beginning of the epidemic on 4 November 2019 and as of 2 August 2020, 8 380 suspected dengue cases have been reported (of which 2610 have been laboratory confirmed), including two deaths.

ECDC is monitoring dengue in the French Antilles in a dedicated threat which was included in the latest [CDTR report](#) dated 15 August.

Asia

Chikungunya virus disease:

[India](#): According to Indian health authorities, from 1 March to 22 March 2020, one confirmed case and seven additional suspected chikungunya cases were reported in Karnataka state. Additionally, in June 2020, [media sources](#) reported up to seven cases in Kolhapur, in Maharashtra state. No update has been available since then.

[Cambodia](#): According to Cambodian health authorities, on 7 August 2020, 2 047 chikungunya cases were reported across 15 provinces.

[Malaysia](#): In 2020 and as of 18 of July, 1 554 cases have been reported across the country, with most of the cases being reported in Perak and Penang region according to Malaysia's Ministry of Health. This represents an increase of 382 cases since the last CDTR update.

[Thailand](#): In 2020, as of 16 August, the country has reported 6 888 cases, with no associated deaths, affecting 62 provinces across the country. This represents an increase of 2 581 cases since the last CDTR update.

No update is available for the outbreak previously reported in [Yemen](#).

Dengue:

According to media sources quoting health authorities, [Bangladesh](#) has reported 393 dengue cases as of 18 August 2020.

[Cambodia](#) has reported 4 450 cases and five deaths as of 18 July 2020. The number of cases reported is only 11% of the 41 982 cases reported in the same period in 2019.

[India](#) has reported 299 cases as of 11 May 2020. For the same time period in 2019, India had reported 5 504 cases.

According to media quoting health authorities, [Indonesia](#) has reported 70 418 cases and 458 deaths as of 1 July 2020.

[Lao PDR](#) has reported 4 155 dengue cases and nine deaths in 2020 and as of 8 August 2020. The trend is within seasonally-expected levels.

[Malaysia](#) has reported 67 673 cases and 112 deaths as of 16 August 2020. This is lower than the cases reported last year for the same period (82 800).

According to media quoting health authorities, [Myanmar](#) has reported 2 862 dengue cases and 20 deaths as of 27 June 2020.

[Pakistan](#) has reported a total of 207 cases of dengue for 2020 and as of 1 August 2020.

[The Philippines](#) have reported 55 160 dengue cases and 200 deaths in 2020 and as of 18 July. The cases are 66% lower compared to the 163 773 cases reported for the same period in 2019.

[Singapore](#) has reported 23 500 cases in 2020 and as of 14 August. This represents more than a two-fold increase on the number cases reported last year for the same period (10 206 cases).

[Sri Lanka](#) has reported 24 845 cases as of 14 August 2020. This is less than the figures for last year when 36 858 cases were reported for the same period.

[Taiwan](#) has reported 71 cases in 2020, as of 16 August 2020.

[Thailand](#) has reported 29 010 cases and four deaths, as of 10 August 2020. This represents half of the cases reported last year for the same time period (64 159 cases).

[Vietnam](#) has reported 48 484 cases and three deaths as of 2 August. This represents a decrease of 64.1% compared to 135 115 cases, including 26 deaths, reported during the same period in 2019.

Africa

Chikungunya virus disease:

[Kenya](#): In 2020, as of 7 March 2020, Kenya had reported 269 cases, 17 of which were laboratory-confirmed. As of 28 June 2020, no new cases had been reported for more than two incubation periods.

No updates are available for the outbreaks previously reported in [Sudan](#) and [Congo](#).

Dengue:

According to Sante Publique France, [Réunion](#) has reported 49 800 cases (15 800 confirmed and 34 000 suspected cases) since the beginning of the year and as of 2 August 2020. Among these, 15 800 cases are laboratory-confirmed. DENV1 is the most prevalent serotype, however DENV 2 and DENV 3 are also circulating on the island. As a comparison, during the same period in 2019, 66 640 cases had been reported.

There are no updates available for Mayotte, Benin, Ethiopia, Comoros or [Mauritania](#).

Australia and the Pacific

Chikungunya virus disease:

No outbreaks have been reported since the previous update.

Dengue:

[Australia](#) reported 194 autochthonous and imported dengue cases since the beginning of the year and as of 18 August 2020. Since the last update on 15 July 2020, an additional three cases have been reported.

[The Cook Islands](#) have reported 253 probable and confirmed cases in 2020, as of 27 July 2020.

[French Polynesia](#) reported 2 947 cases of DENV-2 since the start of the epidemic in April 2019 and as of 26 July 2020.

[The Republic of the Marshall Islands](#) reported 3 518 dengue cases (of which 1 668 have been laboratory-confirmed) and two deaths since the start of the epidemic in May 2019 and as of 5 August 2020.

[New Caledonia](#) reported 50 autochthonous and imported dengue cases in 2020 and as of 6 August 2020. Dengue activity remains at a low level.

N.B: The data presented in this report originate from several sources, both official public health authorities and non-official sources such as news media.

Data completeness depends on the availability of reports from surveillance systems and their accuracy, which varies between countries.

All data should be interpreted with caution as there may be areas of under-reporting; reported figures may not reflect the actual epidemiological situation.

ECDC assessment

Chikungunya virus disease and dengue are endemic in large regions of the intertropical convergence zone. As a precaution, [personal protective measures against mosquito bites](#) should be taken by everyone visiting these regions. Although the risk of virus introduction is currently low, environmental conditions in Europe are favourable throughout the summer season to support local outbreaks in areas where the vector is present.

ECDC published a [rapid risk assessment](#) on autochthonous cases of dengue in Spain and France on 1 October 2019.

Actions

ECDC monitors these threats through epidemic intelligence and reports on a monthly basis. A summary of the worldwide overview of [dengue](#) and [chikungunya](#) is available on the ECDC website.

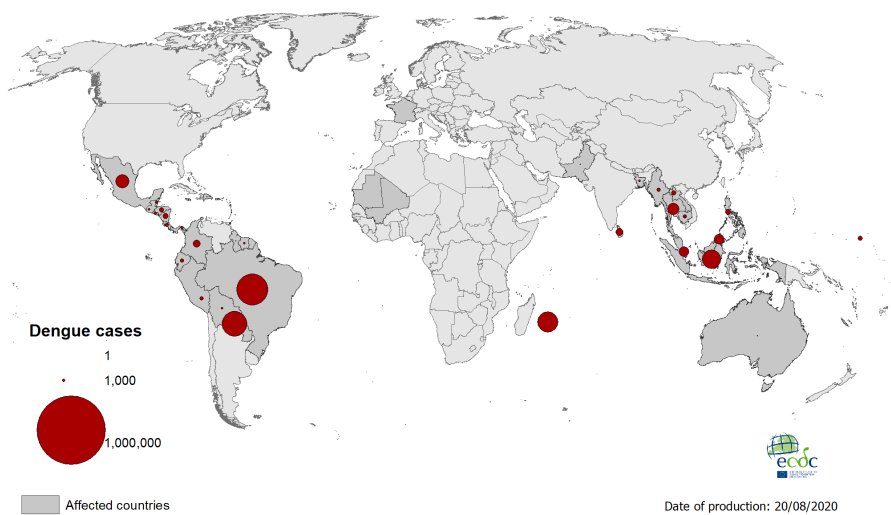
Geographical distribution of chikungunya virus disease cases reported worldwide, June to August 2020

Source: ECDC



Geographical distribution of dengue cases reported worldwide, June to August 2020

Source: ECDC



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