

This weekly bulletin provides updates on threats monitored by ECDC.

NEWS

Zika epidemiology update

On 2 July 2019, WHO published an [overview](#) of the global epidemiology of Zika virus transmission. It includes an updated [list](#) and [map](#) of countries and territories with current or previous Zika transmission.

Zika transmission persists, but has generally been at low levels since 2018.

For travellers, [WHO](#) advises against any restriction of travel to or trade with countries, areas and territories with Zika virus transmission. However, WHO recommends that pregnant women avoid travel to areas with Zika virus transmission, particularly during outbreaks, based on the increased risk of microcephaly and other severe congenital malformations.

To prevent potential sexual transmission, all travellers returning from affected areas should practice safer sex for at least three months after last possible exposure for men or two months for female travellers.

I. Executive summary

EU Threats

West Nile virus - Multistate (Europe) - Monitoring season 2019

Opening date: 3 June 2019

Latest update: 5 July 2019

During the West Nile virus infection transmission season, expected to be from June–November 2019, ECDC monitors the occurrence of West Nile virus infections in EU/EEA Member States and EU neighbouring countries and publishes weekly epidemiological updates to inform blood safety authorities of areas at NUTS 3 (Nomenclature of Territorial Units for Statistics 3) or GAUL 2 (Global Administrative Unit Layers 2) level where there is ongoing virus transmission.

During the 2018 transmission season, 2 083 human cases were reported by EU Member States and EU neighbouring countries. EU Member States reported 285 outbreaks among equids.

→Update of the week

No human case or equine outbreak has been reported so far in 2019.

Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea – Summer 2019

Opening date: 3 June 2019

Latest update: 5 July 2019

Elevated sea surface temperatures (SST) in marine environments with low salt content offer optimal 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. ECDC has developed a model to map the environmental suitability for *Vibrio* growth in the Baltic Sea ([ECDC *Vibrio* Map Viewer](#)).

→Update of the week

As of 4 July 2019, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified to be medium to high in Mecklenburg-Western Pomerania (Germany), Gdansk and Warmia-Masuria (Poland), the Curonian Lagoon (Lithuania), Pärnu (Estonia) and the Kalmar Strait (Sweden) and very high in Szczecin (Poland).

Non EU Threats

Ebola virus disease - tenth outbreak - Democratic Republic of the Congo - 2018-2019

Opening date: 1 August 2018

Latest update: 5 July 2019

On 1 August 2018, the Ministry of Health of the Democratic Republic of the Congo declared the 10th outbreak of Ebola virus disease in the country. The outbreak affects North Kivu and Ituri Provinces in the northeast of the country close to the border with Uganda. In June 2019, several cases from the Democratic Republic of the Congo were detected in Uganda. However, Uganda has not reported autochthonous transmission as of 02 July 2019. On 14 June 2019, the [International Health Regulations \(IHR\) Emergency Committee](#) convened and decided that the outbreak is concerning, but does not meet all the criteria for a public health emergency of international concern under the IHR.

→Update of the week

Since the previous CDTR and as of 03 July 2019, the [Ministry of Health of the Democratic Republic of the Congo](#) has reported 98 additional confirmed cases. During the same period, 66 deaths were reported.

Among the new reported cases in the past week, three are healthcare workers.

Ariwara Health Zone in Ituri Province reported its first case on 30 June 2019. The case was listed as a close contact of five confirmed cases in Beni, but the individual moved to a relative in Ariwara, where the person was diagnosed. Ariwara is more than 460 kilometers north of Beni and close to the borders of Uganda and South Sudan.

So far, there has been no local transmission reported in [Uganda](#). Sixty-three contacts are still under follow-up as of 2 July 2019, all asymptomatic so far.

Acute neurological syndrome – Peru – 2019

Opening date: 18 June 2019

Latest update: 5 July 2019

In 2019, the Peruvian Ministry of Health has detected an unusual number of cases of acute neurological syndrome thought to be Guillain-Barré syndrome. The cases are widespread in several regions across the country and the aetiology is unknown.

→Update of the week

Between 22 and 26 June, Peruvian authorities reported 36 additional Guillain-Barré syndrome (GBS) cases.

Poliomyelitis – Multistate (World) – Monitoring global outbreaks

Opening date: 8 September 2005

Latest update: 5 July 2019

Global public health efforts are ongoing to eradicate polio by immunising every child until transmission of the virus has stopped and the world becomes polio-free. Polio was declared a public health emergency of international concern by WHO on 5 May 2014 due to concerns over the increased circulation and international spread of wild poliovirus in 2014. In June 2002, the WHO European Region was officially declared polio-free.

→ Update of the week

Wild poliovirus: Since the last polio update on 29 May 2019, eight new cases of wild poliovirus type 1 have been reported in Pakistan (6) and Afghanistan (2).

Circulating vaccine-derived poliovirus (cVDPV): Eight new cases of cVDPV type 2 (cVDPV2) have been reported in the Democratic Republic of the Congo (4), Angola (1), Ethiopia (1), Nigeria (1) and Somalia (1). The case in Angola was isolated from an acute flaccid paralysis (AFP) case in Lunda Norte Province, bordering the Democratic Republic of Congo.

II. Detailed reports

West Nile virus - Multistate (Europe) - Monitoring season 2019

Opening date: 3 June 2019

Latest update: 5 July 2019

Epidemiological summary

No human case or equine outbreak has been reported so far in 2019.

Since the beginning of the 2019 transmission season and as of 4 July 2019, no human case or equine West Nile virus infection outbreak has been reported in EU Member States and EU neighbouring countries.

ECDC link: [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.

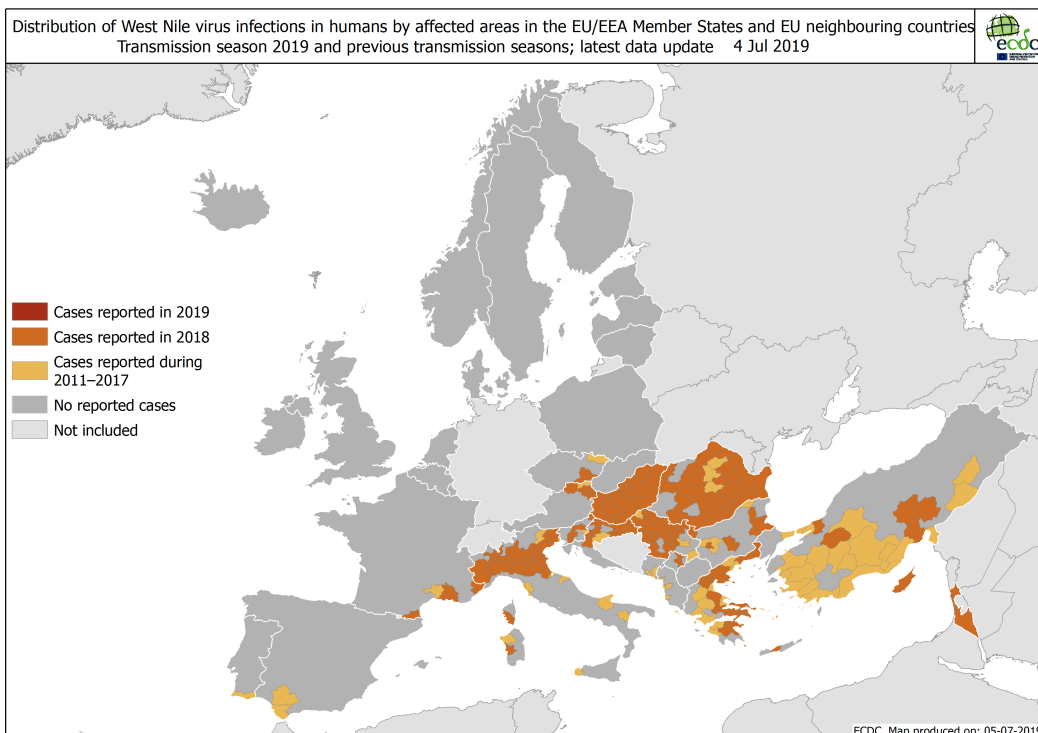
In accordance with [European Commission Directive 2014/110/EU](#), prospective donors should be deferred for 28 days after leaving a risk area for locally acquired West Nile virus unless the results of an individual nucleic acid test are negative.

Actions

During the transmission season, ECDC publishes [West Nile virus infection maps](#) together with an epidemiological summary every Friday.

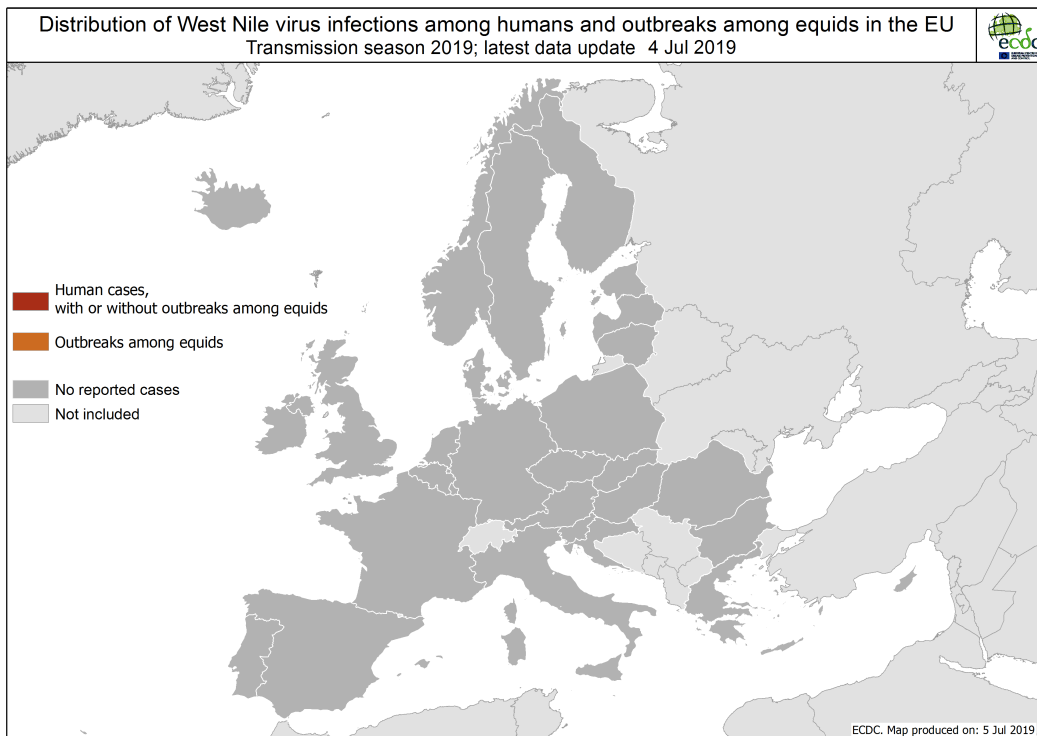
Distribution of human West Nile virus infections by affected areas as of 4 July 2019.

ECDC



Distribution of West Nile virus infections among humans and outbreaks among equids in the EU as of 4 July 2019.

ECDC and ADNS



Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea – Summer 2019

Opening date: 3 June 2019

Latest update: 5 July 2019

Epidemiological summary

As of 4 July 2019, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified to be medium to high in Mecklenburg-Western Pomerania (Germany), Gdansk and Warmia-Masuria (Poland), Curonian Lagoon (Lithuania), Pärnu (Estonia) and the Kalmar Strait (Sweden) and very high in Szczecin (Poland). The next five days are considered to be very low to low.

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

The model has been calibrated to the Baltic region in northern Europe and may 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*.

Vibriosis in humans caused by these species in the Baltic region has occurred in the past during hot summer months, particularly when SSTs are elevated (above 20 degrees Celsius). The most common clinical manifestations are gastroenteritis with nausea, vomiting and diarrhoea, wound infections when a cut has been exposed, infected wounds or abrasions due to contaminated seawater, primary septicaemia and otitis externa. Risk factors for illness apart from contact with natural bodies of waters, especially marine or estuarine waters, also include the consumption of shellfish, particularly raw oysters.

Actions

ECDC monitors this threat on a weekly basis during the summer of 2019 and reports on increased environmental suitability for the growth of *Vibrio* species.

Ebola virus disease - tenth outbreak - Democratic Republic of the Congo - 2018-2019

Opening date: 1 August 2018

Latest update: 5 July 2019

Epidemiological summary

In the Democratic Republic of the Congo, since the beginning of the outbreak a year ago and as of 03 July 2019, there have been 2 382 Ebola virus disease cases (2 288 confirmed, 94 probable), including 1 606 deaths (1 512 confirmed, 94 probable), according to the Ministry of Health of the Democratic Republic of the Congo. This includes the three cases and three deaths that were previously reported having travelled to Uganda. The health zone of Beni has recorded a noticeable increase of cases, becoming the most active health zone and reaching over 400 cases.

As of 3 July 2019, 128 healthcare workers have been infected, including 40 deaths.

Twenty-three health zones in two provinces have reported confirmed or probable Ebola virus disease cases: Alimbongo, Beni, Biena, Butembo, Kalunguta, Katwa, Kayna, Kyondo, Lubero, Mabalako, Manguredjipa, Masereka, Mutwanga, Musienene, Oicha and Vuhovi Health Zones in North Kivu Province and Ariwara, Bunia, Nyankunde, Komanda, Mandima, Rwampara and Tchomia Health Zones in Ituri Province.

Sources: [Ministry of Health of the Democratic Republic of the Congo](#) | [WHO](#) | [WHO Regional Office for Africa](#)

ECDC assessment

ECDC assessment: The recent report of imported cases from the Democratic Republic of the Congo to Uganda is not unexpected. So far, the identification of these cases does not change the overall risk for the EU/EEA, which remains very low. Response measures remain challenging in affected areas because of the prolonged humanitarian crisis, unstable security situation and resistance among the population. The fact that the outbreak is ongoing in areas with cross-border population flow with Rwanda, South Sudan and Uganda remains of particular concern.

A substantial proportion of cases continue to be among individuals not previously identified as contacts, highlighting the need to maintain enhanced surveillance in order to identify chains of transmission. The risk can only be eliminated by stopping transmission at the local level.

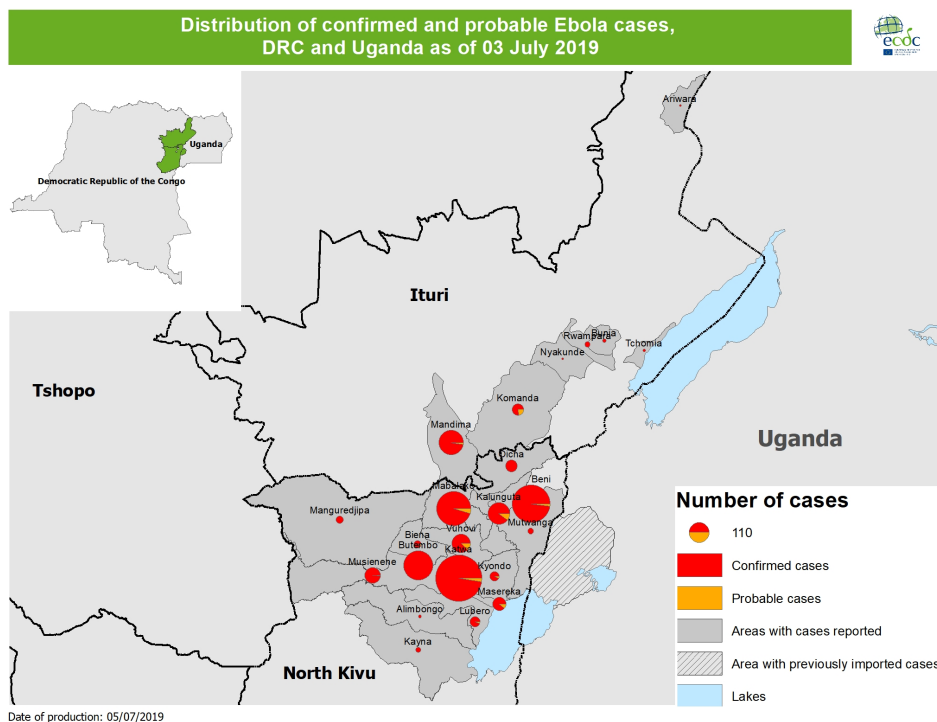
WHO assessment: As of 4 July 2019, the [WHO assessment](#) is that the risk of spread is low at the global level, but remains very high at national and regional levels.

Actions

ECDC published an [epidemiological update](#) on 13 June 2019 and the fourth update of a [rapid risk assessment](#) on 17 April 2019.

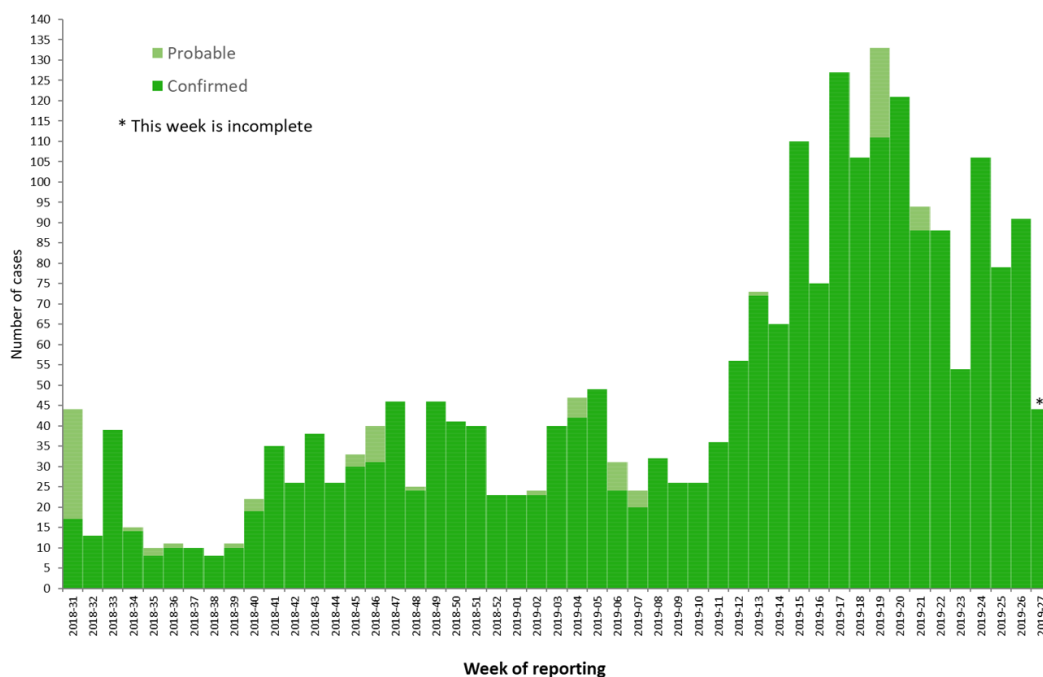
Geographical distribution of confirmed and probable cases of Ebola virus disease, North Kivu and Ituri Provinces, Democratic Republic of the Congo, as of 03 July 2019

Source: ECDC



Distribution of confirmed and probable cases of Ebola Virus Disease and health zones reporting cases, North Kivu and Ituri, Democratic Republic of the Congo, as of 03 July 2019

Source: ECDC



Acute neurological syndrome – Peru – 2019

Opening date: 18 June 2019

Latest update: 5 July 2019

Epidemiological summary

In 2019 and as of 26 June 2019, Peru has reported Guillain-Barré syndrome (GBS) cases, of which 223 were confirmed. The most affected areas are Lima, Piura and Junin. The peak of the outbreak was from 3–9 June, when 314 cases were detected. Since then, weekly numbers have noticeably decreased. In 2018, the country recorded 340 cases over the whole year.

So far, no aetiology has been officially found. However, a recent article published in [ScienceDirect](#) mentions several infectious agents detected among certain 2019 GBS cases.

Source: [Peruvian Ministry of Health](#)

ECDC assessment

Further investigations are needed to assess the situation and the risk for the European Union. Guillain-Barré is known to be triggered by bacterial infections, respiratory viruses, enteroviruses and arboviruses such as dengue and Zika virus disease.

Actions

ECDC monitors this event through epidemic intelligence.

Poliomyelitis – Multistate (World) – Monitoring global outbreaks

Opening date: 8 September 2005

Latest update: 5 July 2019

Epidemiological summary

Wild poliovirus: In 2019 and as of 25 June 2019, 37 cases have been reported in two endemic countries: Pakistan (27) and Afghanistan (10). During the same period in 2018, 11 cases were reported.

Circulating vaccine-derived poliovirus (cVDPV): In 2019 and as of 25 June 2019, 20 cases of cVDPV2 have been reported in Nigeria (9), the Democratic Republic of the Congo (5), Somalia (3), Angola (1), Ethiopia (1), and Niger (1). During the same period in 2018, 12 cases were reported.

Sources: [Global Polio Eradication Initiative](#) | [ECDC](#) | [ECDC Polio interactive map](#)

ECDC assessment

The WHO European Region has remained polio-free since 2002. Inactivated polio vaccines are used in all EU/EEA countries. The risk of reintroduction of the virus in Europe exists as long as there are non- or under-vaccinated population groups in European countries and poliomyelitis is not eradicated.

ECDC link: [ECDC comment on risk of polio in Europe](#) | [ECDC risk assessment](#)

Actions

ECDC provides updates on the polio situation on a monthly basis. ECDC monitors reports of polio cases worldwide through epidemic intelligence in order to highlight polio eradication efforts and identifies events that increase the risk of reintroducing wild poliovirus in the EU.

ECDC maintains an interactive [map](#) showing countries that are still endemic for polio and have ongoing outbreaks of cVDPV.

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