

This weekly bulletin provides updates on threats monitored by ECDC.

### COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2019 – 2022

The weekly update on COVID-19 will not be included in the Communicable Disease Threats Report (CDTR) of this week as this report is being published early due to the Easter holidays. However, information will be made available on ECDC's website on Wednesday/Thursday, including [datasets](#), the [weekly summary](#), the [situation dashboard](#) and the [country overview report](#).

## I. Executive summary

### EU Threats

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

Opening date: 9 February 2011

Latest update: 13 April 2022

A sharp decrease in measles cases was observed globally during the COVID-19 pandemic. A few measles cases are now being reported in the EU/EEA, including in countries that had previously eliminated or interrupted endemic transmission.

##### → Update of the week

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 11 March 2022, nine new cases have been reported by three countries in the EU/EEA: Germany (5), Ireland (1), Poland (3). In addition, according to TESSy, in January–February 2022, four countries reported five cases: Belgium (2), France (1), Italy (1) and Romania (1). Other countries have not reported new cases of measles.

So far, in 2022, no deaths have been reported in the EU/EEA.

Relevant updates outside the EU/EEA are available for Ukraine, the Republic of Congo, WHO Regional Office for Europe (EURO), WHO Regional Office for Africa (WHO AFRO), WHO Pan American Health Organization (PAHO), WHO Regional Office for South-East Asia (SEARO) (from WHO Provisional monthly measles and rubella data), and WHO Western Pacific Regional Office (WPRO).

There were no updates for the WHO Regional Office for Eastern Mediterranean (EMRO).

## Arrival of people displaced from Ukraine to the EU following Russia's aggression in Ukraine - Multistate – 2022

Opening date: 24 February 2022

Latest update: 13 April 2022

On 24 February 2022, Ukraine declared martial law following Russia's invasion. As the invasion escalates, large numbers of displaced people are seeking shelter in neighbouring countries.

→Update of the week

According to the [United Nations](#), between 24 February and 11 April 2022, the total number of people fleeing Ukraine reached 4 615 830. In total, 2 645 877 have crossed into Poland; 701 741 into Romania; 428 954 into Hungary and 320 246 into Slovakia. In addition, Czechia's [Ministry of the Interior](#) reported 238 164 special visa concessions to Ukrainian applicants as of 11 April 2022. Outside of the EU/EAA, 413 374 people have sought safety in the Republic of Moldova ([United Nations](#)).

The number of displaced Ukrainians crossing the border to neighbouring countries has stabilised over the last few weeks. According to the [United Nations](#), the highest number of Ukrainians displaced to neighbouring countries was registered in week 9 (28 February – 6 March 2022), with a total of 1 222 272 arrivals. During the last two weeks (weeks 13 and 14), 346 146 and 384 894 displaced Ukrainians entered the neighbouring countries respectively. A number of media and official reports have provided information on how displaced Ukrainians are integrating into the community following their arrival, e.g. children being enrolled into school ([source 1](#), [source 2](#), [source 3](#)).

On 7 April 2022, [media](#) quoting local public health authorities reported one suspected case of diphtheria and contact tracing for the case in Ternopil city, Ukraine. No major outbreaks or other events related to communicable diseases have been detected since the previous update.

## Non EU Threats

### New! Increase in hepatitis cases of unknown aetiology in children – United Kingdom – 2022

Opening date: 13 April 2022

Latest update: 13 April 2022

On 5 April 2022, an increase in acute hepatitis cases of unknown aetiology among previously healthy children under 10 years was reported by the United Kingdom. Most cases identified by the United Kingdom presented with symptoms from March 2022 onwards.

→Update of the week

An increase in acute hepatitis referrals among young children has been observed in specialist liver disease centres across the UK. As of [12 April 2022](#), a total of 74 cases are under investigation.

The UK Health Security Agency has asked clinicians to notify local health protection teams about children aged 16 years or under, fulfilling the following criteria:

- acute hepatitis with transaminases (AST or ALT) over 500 IU/L;
- where underlying conditions and hepatitis viruses A to E have been excluded.

Currently, there is no clear connection between the reported cases. No obvious epidemiological risk factors have been identified among the cases. There is no known association with travel.

Alerts have been issued by health authorities in Belgium and Germany, but so far, no cases have been identified in these countries.

## II. Detailed reports

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

Opening date: 9 February 2011

Latest update: 13 April 2022

#### Epidemiological summary

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 11 March 2022, nine new cases have been reported by three countries in the EU/EEA: Germany (5), Ireland (1), Poland (3). Other countries have not reported new cases of measles.

So far, in 2022, no deaths have been reported in the EU/EEA.

Relevant updates outside the EU/EEA are available for Ukraine, the Republic of Congo, WHO Regional Office for Europe (EURO), WHO Regional Office for Africa (WHO AFRO), WHO Pan American Health Organization (PAHO), WHO Regional Office for South-East Asia (SEARO), and WHO Western Pacific Regional Office (WPRO).

There were no updates for the WHO Regional Office for Eastern Mediterranean (EMRO).

**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 the media. This report is a supplement to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 29 EU/EEA countries to The European Surveillance System (TESSy). Data presented in the two monthly reports may differ.

#### **Epidemiological summary for EU/EEA countries with updates since last month**

[Germany](#) reported 27 confirmed and suspected cases of measles in weeks 1 to 14 in 2022 (ending 10 April 2022), an increase of five cases since week 9 (ending 6 March 2022).

[Ireland](#) reported two cases of measles in 2022 as of week 13 (ending 2 April 2022).

[Poland](#) reported six cases in [January–March 2022](#), an increase of three cases since the report for February 2022.

#### **Relevant epidemiological summary for countries outside the EU/EEA**

A global provisional monthly measles and rubella overview by month and country is available from the [WHO website](#).

[Ukraine](#) reported two cases of measles in January (1) and February (1) 2022, according to data available on 12 April 2022.

According to WHO's Regional Office for Europe ([EURO](#)) data for January-February 2022 (data access on 12 April 2022) sporadic cases of measles were reported in the following non-EU/EEA countries: Bosnia and Herzegovina (1), Georgia (2), Russia (4), Tajikistan (60), Turkey (2), Ukraine (2) and United Kingdom (1).

According to WHO's Regional Office for Africa ([AFRO](#)) report as of 3 April 2022 (week 14), cases and outbreaks of measles in 2022 were reported in the following countries: Cameroon, Chad, Congo, Democratic Republic of the Congo (DRC), Ethiopia, Guinea, Liberia, Mali, Mozambique, Nigeria, Sierra Leone, South Sudan, Togo. Due to variations in country reporting periods, please visit the latest weekly bulletin available [here](#).

In addition, according to several [media reports](#) a measles epidemic has been declared in the Republic of Congo. As of 8 April 2022, over 3 400 cases, including 78 deaths were reported from the most affected areas of Pointe Noire and the district of Ntchamba-Nsassi in the south of the country. According to the weekly [WHO AFRO](#) report as of 20 March 2022 and since the last quarter of 2021, 4 610 cases including 123 deaths (CFR: 2.7%) have been reported in the country, affecting 15 health districts.

According to WHO's Pan American Health Organization ([PAHO](#)) report (Vol. 28, No. 13) in 2022 week 13 (ending 3 April 2022) 17 cases were reported in three countries: Brazil (13), the United States of America (2), Argentina (1) and Canada (1).

According to WHO's Western Pacific Region ([WPRO](#)) report (Vol 16, Issue 3) as of 20 March 2022, overall there were 115 confirmed and clinically compatible cases, including ten deaths (CFR: 8.7%). The cases were reported by three countries: China (75), Malaysia (28) and the Philippines (12).

According to WHO's Regional Office for South-East Asia (SEARO), from January to March 2022 there were 2 310 cases of measles

reported by six countries: Bangladesh (35), Indonesia (423), India (1 777), Myanmar (2), Nepal (62), Thailand (6), Timor-Leste (5). The update is based on [WHO Provisional monthly measles and rubella data](#) available on 12 April 2022.

## ECDC assessment

The substantial decline in measles cases reported by EU/EEA countries after March 2020, and continuing through 2021, contrasts with the typical seasonal pattern for measles, which peaks during 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 COVID-19 pandemic measures could explain the observed decline in cases. Lifting of non-pharmaceutical interventions related to the COVID-19 pandemic could lead to measles outbreaks in the EU/EEA. Active measles surveillance and public health measures should be reinforced, and enhanced measles vaccination campaigns should be planned in order to ensure high measles vaccination uptake.

## Actions

ECDC monitors the measles situation through its epidemic intelligence activities, which supplement 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.

## Arrival of people displaced from Ukraine to the EU following Russia's aggression in Ukraine - Multistate – 2022

Opening date: 24 February 2022

Latest update: 13 April 2022

## Epidemiological summary

On 24 February 2022, Ukraine declared martial law following Russia's invasion. Shortages of food and water supplies, lack of sanitation, electrical power, transportation and healthcare provision and the overall lack of security are resulting in large numbers of people fleeing Ukraine. The majority of these people are women, children and the elderly. They are finding temporary shelter in neighbouring countries and are currently reported to be mostly dispersing into the community. A number of dedicated reception centres have been set up.

**Sources:** [Relief Web](#) | [United Nations](#) | [WHO](#)

## ECDC assessment

The displacement of large numbers of people into neighbouring countries, irrespective of the type of accommodation, may result in difficulties for the displaced people in accessing healthcare, meaning that they may be at greater risk of complications from acute or chronic conditions. Furthermore, situations of overcrowding could favour outbreaks of infectious diseases, in particular respiratory infections. This includes influenza and COVID-19, which are currently circulating in some of the reception countries, or tuberculosis (TB). The detection of cases of influenza, COVID-19 or TB among the displaced population is not unexpected. [Vaccination coverage in Ukraine](#) is sub-optimal for several vaccine-preventable diseases, including [COVID-19](#). Vaccination against poliomyelitis and measles should be considered as a priority, especially among the paediatric population, as well as DTP (DTaP-IPV combination vaccine for children, with Hib-component only for children <6 years; Td for adults). In addition, COVID-19 vaccination should be offered, and the elderly and other risk groups should be prioritised. Public health authorities should increase awareness among healthcare providers in order to detect priority infectious diseases that could present among displaced Ukrainian people.

In recent weeks, the number of displaced people entering the EU/EEA countries from Ukraine has stabilised. The situation is dynamic and current trends may evolve further during the coming weeks. Secondary population movements are expected once displaced populations enter the EU/EEA countries. These secondary population movements will be the result of displaced people seeking asylum and temporary protection after fleeing from Ukraine into neighbouring EU countries and then dispersing into other EU/EEA countries.

## Actions

ECDC is working closely with the countries receiving displaced people from Ukraine, in collaboration with European Commission, other Member States, WHO, and other international partners. ECDC will continue to closely monitor the situation through epidemic intelligence activities, regular meetings with the public health authorities of the countries involved and field activities. To date, the following documents have been published by ECDC to provide guidance to healthcare and frontline workers: [Operational public health considerations for the prevention and control of infectious diseases in the context of the military aggression in](#)

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[Ukraine, Testing for tuberculosis infection and screening for tuberculosis disease among refugees arriving in EU from Ukraine and Information to guide individual health assessment of refugees fleeing the war in Ukraine - Considerations for healthcare workers.](#) In addition, ECDC has opened an item in [EpiPulse](#) and encourages Member States to report public health events related to the crisis in EpiPulse and to share documents relevant to the response which could be of interest to other Member States.

## **New! Increase in hepatitis cases of unknown aetiology in children – United Kingdom – 2022**

Opening date: 13 April 2022

Latest update: 13 April 2022

### Epidemiological summary

On 5 April 2022, an increase in acute hepatitis cases of unknown aetiology among previously healthy children under 10 years was reported by the United Kingdom. The increase has been noticed since February 2022, however most cases identified by the UK presented with symptoms from March 2022 onwards. Across the UK, 74 cases are being investigated. Most cases are aged between 2 and 5 years. Of the confirmed cases, 49 are in England, 13 are in Scotland and the remainder are in Wales and Northern Ireland. No specific geographical clustering has been noted far.

The clinical picture of the children is of acute hepatitis, with increased levels of liver enzymes and some cases presenting with jaundice or having experienced vomiting and abdominal pain in the preceding weeks. Laboratory testing excluded hepatitis types A, B, C, D and E in all cases. According to the [UKHSA](#), one of the potential causes under investigation is an adenovirus. Other possible causes are also being actively investigated, including coronavirus and other infectious or environmental causes. The UKHSA has ruled out a link to the COVID-19 vaccine as none of the currently confirmed cases in the UK have been vaccinated.

Some children have progressed to acute liver failure and were transferred to specialist paediatric liver units. A small number of children have undergone liver transplantation.

### ECDC assessment

The number of children presenting with acute hepatitis is higher than expected for the UK. Currently, the cause of hepatitis in these children is not clear. The results from the investigations by UK authorities will determine whether there is any threat to EU/EEA countries. While adenoviruses do not typically cause hepatitis, it is a known rare complication. The most effective way to minimise the spread of adenoviruses is to practice good hand and respiratory hygiene and supervise thorough handwashing in younger children. Actions are being taken to raise awareness among healthcare professionals and parents to determine if there are any further possible cases. UKHSA have published testing guidelines for clinicians that can be found [here](#).

### Actions

ECDC is working in collaboration with UKHSA, WHO, the European Association for the Study of the Liver and the European Society for Paediatric Infectious Diseases to support the ongoing investigations. A [statement](#) has been published on ECDC's website and an item has been opened in [EpiPulse](#) to inform and facilitate the communication between Member States. Member States are encouraged to report any suspected cases in EpiPulse. ECDC will continue to monitor this event through its epidemic intelligence activities.

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