



## COMMUNICABLE DISEASE THREATS REPORT

CDTR

Week 31, 1-7 August 2021

All users

This weekly bulletin provides updates on threats monitored by ECDC.

## I. Executive summary

### EU Threats

#### **New! Autochthonous dengue - Provence-Alpes-Côte d'Azur, France - 2021**

Opening date: 2 August 2021

Latest update: 6 August 2021

In summer 2021, one autochthonous dengue case has been reported in Europe.

#### **West Nile virus - Multi-country (World) - Monitoring season 2021**

Opening date: 4 June 2021

Latest update: 6 August 2021

During the transmission season for West Nile virus (WNV), which usually runs from June to November, ECDC monitors the occurrence of infections in the European Union (EU), the European Economic Area (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 EU/EEA Member States and at the GAUL 1 (global administrative unit layers 1) level for EU-neighbouring countries.

#### →Update of the week

Between 30 July and 5 August 2021, European Union (EU) and European Economic Area (EEA) countries reported 6 human cases of West Nile virus (WNV) infection and no deaths related to WNV infections. Cases were reported by Greece (5) and Italy (1). EU-neighbouring countries reported no human cases of WNV infection. Since the beginning of the 2021 transmission season and as of 5 August 2021, EU/EEA countries have reported 7 human cases of WNV infection in Greece (5) and Italy (2), and no deaths. EU-neighbouring countries have reported no human cases of WNV infection.

## Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea - Summer 2021

Opening date: 2 July 2021

Latest update: 6 August 2021

Elevated sea surface temperature (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 5 August 2021, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as generally very-low-to-low, except in Rucavas and Nicas municipalities (Latvia); the coast of Lithuania, Gdanski (Poland); Stockholm, Östergötland, Södermanland and Kalmar counties (Sweden); and Southern Finland (Finland), where it was medium-to-high.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be generally very-low-to-low, except in Stockholm, Östergötland, Södermanland and Kalmar counties (Sweden); Southern Finland (Finland); Gulf of Riga (Estonia, Latvia); Mecklenburg-Vorpommern (Germany); and the coasts of Latvia, Lithuania and Poland, where the risk is considered to be medium-to-high.

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

In 2021 and as of 30 July, [Sweden](#) has reported 10 cases of vibriosis. The majority of cases are over 65 years old and male.

## COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2019 - 2021

Opening date: 7 January 2020

Latest update: 6 August 2021

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 respiratory symptoms for these cases. The outbreak rapidly evolved, affecting other parts of China and other countries worldwide. On 30 January 2020, WHO 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). On 11 March 2020, the Director-General of WHO declared the COVID-19 outbreak a pandemic. The third, fourth, fifth, sixth, seventh and eighth International Health Regulations (IHR) Emergency Committee meetings for COVID-19 were held in Geneva on 30 April 2020, 31 July 2020, 29 October 2020, 14 January 2021 and 15 April 2021, and 15 July 2021 respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

### →Update of the week

Since week 29 2021 and as of week 30 2021, 4 104 318 new cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) and 64 308 new deaths have been reported.

Since 31 December 2019 and as of week 30 2021, 198 964 259 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 232 713 deaths.

In the EU/EEA, 34 919 952 cases have been reported, including 745 014 deaths.

The latest daily situation update for the EU/EEA is available [here](#).

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

Opening date: 9 February 2011

Latest update: 6 August 2021

A sharp decrease in measles cases has been observed globally during the COVID-19 pandemic. A few measles cases are 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 9 July 2021, two new cases were reported by one country in the EU/EEA: Germany (2). Other countries did not report new cases of measles.

No deaths have been reported by EU/EEA countries in 2021.

Relevant updates outside the EU/EEA are available for WHO Regional Office for Europe (EURO), WHO Regional Office for Africa (WHO AFRO), and WHO Pan American Health Organization (PAHO). There were no updates for the WHO Regional Office for South-East Asia (SEARO) or the WHO Western Pacific Regional Office (WPRO).

**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 supplementary to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 30 EU/EEA countries to The European Surveillance System (TESSy). Data presented in the two monthly reports may differ.

## Non EU Threats

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### Mass Gathering Monitoring - Olympic Games in Tokyo - 2020 (2021)

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Opening date: 21 July 2021

Latest update: 6 August 2021

The Olympic Games in Tokyo 2020 (OG) take place from 23 July to 8 August 2021, with some events starting on 21 July 2021. The Paralympic Games will be held from 24 August to 5 September 2021. The games were rescheduled to this year due to the COVID-19 pandemic. Over 11 000 OG athletes, including over 2 600 athletes from the European Union, will compete in [33 sports, involving 339 events, across 42 competition venues](#). In addition, almost 40 000 support staff from all over the world are expected to attend the OG.

ECDC is intensifying its enhanced epidemic intelligence activities between 16 July and 16 August 2021, using a targeted and systematic screening approach on a daily basis and tailored tools.

#### →Update of the week

From 30 July to 5 August 2021, several signals were detected during the daily screening of the Olympic Games in Tokyo 2020 (2021). Since the previous report, 160 new SARS-CoV-2-positive cases related to the Olympic Games have been reported.

### Middle East respiratory syndrome coronavirus (MERS-CoV) – Multi-country

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Opening date: 24 September 2012

Latest update: 6 August 2021

Since the disease was first identified in Saudi Arabia in April 2012, over 2 500 cases of Middle East respiratory syndrome coronavirus (MERS-CoV) have been detected in 27 countries. In Europe, eight countries have reported confirmed cases, all with direct or indirect connections to the Middle East. The majority of MERS-CoV cases continue to be reported from the Middle East. The source of the virus remains unknown, but the pattern of transmission and virological studies point towards dromedary camels in the Middle East as a reservoir from which humans sporadically become infected through zoonotic transmission. Human-to-human transmission is amplified among household contacts and in healthcare settings.

#### →Update of the week

Since the previous update published on 2 July, and as of 2 August 2021, two new MERS-CoV cases have been reported by Saudi Arabian health authorities.

## Poliomyelitis – Multi-country (World) – Monitoring global outbreaks

Opening date: 9 December 2019

Latest update: 6 August 2021

Global public health efforts to eradicate polio are continuing by immunising every child until transmission of the virus has stopped and the world becomes polio-free. On 5 May 2014, polio was declared a public health emergency of international concern (PHEIC) by the World Health Organization (WHO) due to concerns over the increased circulation and international spread of wild poliovirus in 2014. The Emergency Committee under the International Health Regulations (2005) stated that the risk of the international spread of poliovirus remains a Public Health Emergency of International Concern (PHEIC). On 4 May 2021, the [28th meeting](#) of the Emergency Committee under the International Health Regulations (2005) (IHR) on the international spread of poliovirus was held.

In June 2002, the WHO European Region was officially declared polio-free.

### → Update of the week

Since the previous CDTR update on 2 July 2021 and as of 3 August 2021, 75 cases of polioviruses have been reported (cVDPV1 of cVDPV2). No new cases of WPV1 have been reported since the last update.

### Wild poliovirus (WPV1):

- No new cases of Acute Flaccid Paralysis (AFP) caused by WPV1 have been reported in Afghanistan.
- No new cases of Acute Flaccid Paralysis (AFP) caused by WPV1 have been reported in Pakistan.
- Two new WPV1 environmental samples have been detected in Pakistan.

### Circulating vaccine-derived poliovirus (cVDPV):

- Three new cases of AFP caused by cVDPV1 have been detected from two countries: Madagascar (2) and Yemen (1).
- 72 new cases of AFP caused by cVDPV2 have been reported from 8 countries: Nigeria (44), Tajikistan (8), Ethiopia (10), Senegal (4), Afghanistan (2), South Sudan (1), Democratic Republic of the Congo (2) and Liberia (1).
- 35 cVDPV2 environmental samples have also been detected: Nigeria (25), Gambia (2), Senegal (2), Uganda (2), Afghanistan (1), Ethiopia (1), Sierra Leone (1) and Somalia (1).
- No new cases of AFP caused by cVDPV3 have been reported.

## II. Detailed reports

### New! Autochthonous dengue - Provence-Alpes-Côte d'Azur, France - 2021

Opening date: 2 August 2021

Latest update: 6 August 2021

#### Epidemiological summary

On 29 July, the Agence régionale de santé Provence-Alpes-Côte d'Azur issued a [press release](#) notifying that a person who had not travelled to a dengue-endemic area in the previous 15 days was diagnosed with dengue in Toulon, in the Var department. The patient has recovered. To prevent the spread of the disease, mosquito breeding sites were removed and adult mosquitoes were killed on public roads and in private gardens in the neighbourhood where the affected person lives. In parallel with the mosquito control, epidemiological surveillance actions are being stepped up to identify people who could be infected.

#### ECDC assessment

This is the first autochthonous case of dengue identified this year in Europe. The likelihood for onward transmission of dengue in mainland EU/EEA is linked to importation of the virus by viraemic travellers into receptive areas with established and active competent vectors (i.e. *Aedes albopictus*). *Aedes albopictus* is [established](#) in a large part of Europe. The current likelihood of the occurrence of local transmission events of dengue virus in mainland EU/EEA is high, as the environmental conditions are favourable for the growth of mosquito populations and virus replication in the vector, which reach high vector abundance in the summer and early autumn. To date, all autochthonous outbreaks of dengue in mainland EU/EEA have occurred between July and November.

More information is available on ECDC's [dedicated webpage](#) on autochthonous transmission of dengue virus in the EU/EEA, as well as on ECDC's [dengue factsheet](#).

#### Actions

ECDC is monitoring this event through its epidemic intelligence activities.

### West Nile virus - Multi-country (World) - Monitoring season 2021

Opening date: 4 June 2021

Latest update: 6 August 2021

#### Epidemiological summary

Between 30 July and 5 August 2021, European Union (EU) and European Economic Area (EEA) countries reported 6 human cases of West Nile virus (WNV) infection and no deaths related to WNV infections. Cases were reported by Greece (5) and Italy (1). EU-neighbouring countries reported no human cases of WNV infection.

Since the beginning of the 2021 transmission season and as of 5 August 2021, EU/EEA countries have reported 7 human cases of WNV infection in Greece (5) and Italy (2), and no deaths. EU-neighbouring countries have reported no human cases of WNV infection.

During the current transmission season, within the reporting countries, human cases of WNV infection were reported from 4 different NUTS 3 or GAUL 1 regions, of which the following regions reported human cases of WNV infection for the first time: La Spezia in Italy.

Since the beginning of the 2021 transmission season, one outbreaks among equids and no outbreaks among birds have been reported by EU/EEA countries. Outbreaks among equids have been reported by Spain (1).

#### ECDC assessment

Human WNV infections have been reported in two EU Member States where seasonal circulation of the virus has been previously reported.

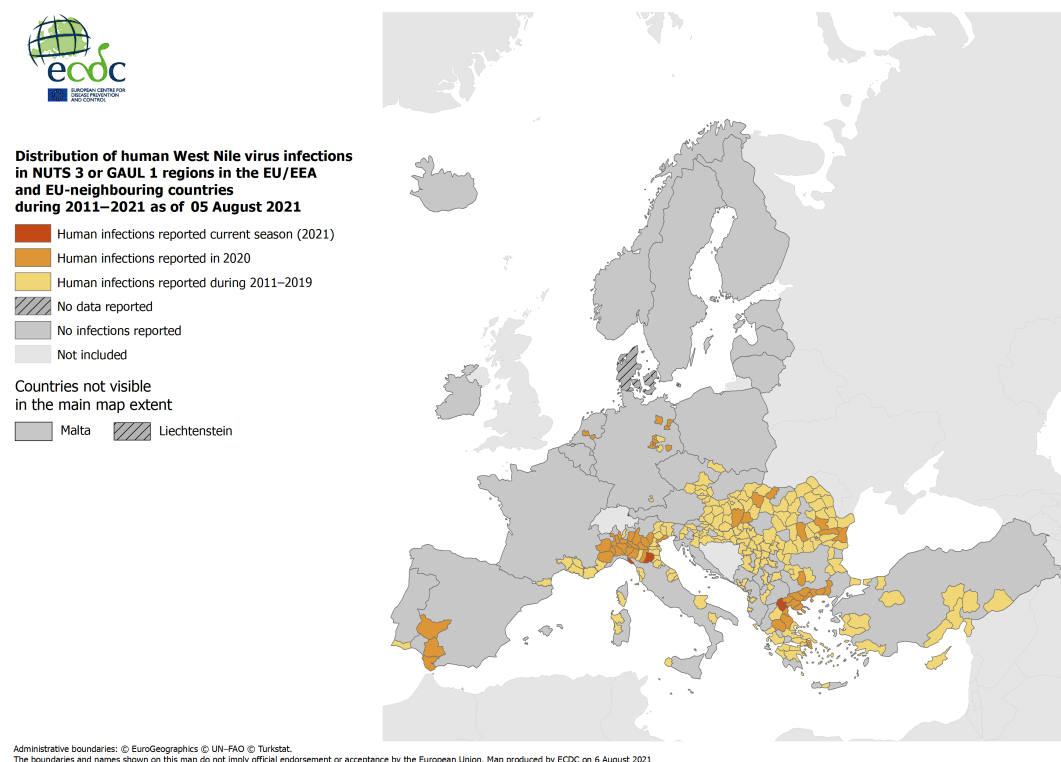
In accordance with [Commission Directive 2014/110/EU](#), prospective blood donors should be deferred for 28 days after leaving a risk area for locally acquired WNV infection, unless the result of an individual nucleic acid test is negative.

## Actions

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

## Distribution of human West Nile virus infections by affected areas as of 05 August

ECDC



## Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 05 August

ECDC and ADIS



**Distribution of human and animal West Nile virus infections in NUTS 3 or GAUL 1 regions of the EU/EEA and EU-neighbouring countries during the 2021 season as of 05 August 2021**

- Human infections, with or without outbreaks among equids and/or birds
- Outbreaks among equids and/or birds
- No infections reported
- Not included

Countries not visible in the main map extent

- Malta
- Liechtenstein



Administrative boundaries: © EuroGeographics © UN-FAO © Turstat.  
The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union. Map produced by ECDC on 6 August 2021

## Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea - Summer 2021

Opening date: 2 July 2021

Latest update: 6 August 2021

### Epidemiological summary

As of 5 August 2021, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as generally very-low-to-low, except in Rucavas and Nicas municipalities (Latvia) the coast of Lithuania, Gdanski (Poland); Stockholm, Östergötland, Södermanland and Kalmar counties (Sweden); and Southern Finland (Finland), where it was medium-to-high.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be generally very-low-to-low, except in Stockholm, Östergötland, Södermanland and Kalmar counties (Sweden); Southern Finland (Finland); Gulf of Riga (Estonia, Latvia); Mecklenburg-Vorpommern (Germany); and the coasts of Latvia, Lithuania and Poland, where the risk is considered to be medium-to-high.

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

According to [Finnish authorities](#), three *Vibrio cholerae* infections and one *Vibrio vulnificus* infection have been detected in Finland in 2021.

In 2021 and as of 5 August, [Sweden](#) has reported 18 cases of vibriosis. The majority of cases are over 65 years old and male.

On 16 July 2021, a publication entitled '[Non-cholera vibrios - currently still a rare but growing risk of infection in the North and Baltic Seas](#)' was published in *The Internist*.

**Sources:** [ECDC Vibrio Map Viewer](#), [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 used in the map are the following values: number colour

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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, vomiting and diarrhoea; wound infections when a cut has been exposed; infected wounds or abrasions due to contaminated seawater; primary septicemia; and otitis externa. In addition to contracting vibriosis through contact with 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 2021 and will report on increased environmental suitability for the growth of *Vibrio* species.

## COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2019 - 2021

Opening date: 7 January 2020

Latest update: 6 August 2021

## Epidemiological summary

**Summary:** Since 31 December 2019 and as of week 30 2021, 198 964 259 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 232 713 deaths.

### Cases have been reported from:

**Africa:** 6 755 397 cases; the five countries reporting most cases are South Africa (2 456 184), Morocco (629 717), Tunisia (596 775), Egypt (284 311) and Ethiopia (280 565).

**Asia:** 55 538 802 cases; the five countries reporting most cases are India (31 695 958), Iran (3 871 008), Indonesia (3 440 396), Iraq (1 635 993) and Philippines (1 597 689).

**America:** 77 567 795 cases; the five countries reporting most cases are United States (35 004 592), Brazil (19 938 358), Argentina (4 946 967), Colombia (4 801 050) and Mexico (2 861 498).

**Europe:** 58 986 270 cases; the five countries reporting most cases are Russia (6 312 185), France (6 146 619), United Kingdom (5 880 667), Turkey (5 727 045) and Spain (4 502 983).

**Oceania:** 115 290 cases; the five countries reporting most cases are Australia (34 384), Fiji (30 413), French Polynesia (20 480), Papua New Guinea (17 774) and Guam (8 564).

**Other:** 705 cases have been reported from an international conveyance in Japan.

### Deaths have been reported from:

**Africa:** 171 239 deaths; the five countries reporting most deaths are South Africa (72 191), Tunisia (20 226), Egypt (16 528), Morocco (9 833) and Ethiopia (4 390).

**Asia:** 836 672 deaths; the five countries reporting most deaths are India (424 773), Indonesia (95 723), Iran (90 630), Philippines (28 016) and Pakistan (23 462).

**America:** 2 019 227 deaths; the five countries reporting most deaths are United States (613 228), Brazil (556 834), Mexico (241 279), Peru (196 518) and Colombia (121 216).

**Europe:** 1 203 880 deaths; the five countries reporting most deaths are Russia (160 137), United Kingdom (129 719), Italy (128 068), France (111 916) and Germany (91 660).

**Oceania:** 1 689 deaths; the five countries reporting most deaths are Australia (924), Fiji (241), Papua New Guinea (192), French Polynesia (153) and Guam (143).



**Other:** 6 deaths have been reported from an international conveyance in Japan.

## EU/EEA:

As of week 30 2021, 34 919 952 cases have been reported in the EU/EEA: France (6 146 619), Spain (4 502 983), Italy (4 355 348), Germany (3 772 109), Poland (2 883 120), Netherlands (1 867 713), Czechia (1 673 795), Belgium (1 129 544), Sweden (1 100 751), Romania (1 083 478), Portugal (972 127), Hungary (809 646), Slovakia (780 347), Austria (655 145), Greece (494 907), Bulgaria (425 148), Croatia (363 787), Denmark (318 485), Ireland (302 074), Lithuania (283 656), Slovenia (259 486), Latvia (138 899), Norway (137 950), Estonia (133 771), Finland (107 321), Cyprus (102 223), Luxembourg (73 870), Malta (34 439), Iceland (8 122) and Liechtenstein (3 089).

As of week 30 2021, 745 014 deaths have been reported in the EU/EEA: Italy (128 068), France (111 916), Germany (91 660), Spain (81 643), Poland (75 261), Romania (34 291), Czechia (30 371), Hungary (30 027), Belgium (25 247), Bulgaria (18 215), Netherlands (17 829), Portugal (17 378), Sweden (14 657), Greece (12 975), Slovakia (12 540), Austria (10 536), Croatia (8 266), Ireland (5 035), Slovenia (4 762), Lithuania (4 420), Latvia (2 556), Denmark (2 550), Estonia (1 272), Finland (984), Luxembourg (822), Norway (799), Malta (423), Cyprus (422), Liechtenstein (59) and Iceland (30).

The latest daily situation update for the EU/EEA is available [here](#).

In week 30 2021, overall, the reported weekly cases increased by 13% compared to the previous week. Eight of the 29 EU/EEA countries (Cyprus, Czechia, Denmark, Luxembourg, Malta, the Netherlands, Portugal and Spain) reported a decrease in weekly cases. The highest weekly increase was observed in Iceland, France, Lithuania, Italy and Romania. The countries with the highest 14-day notification rate were: Cyprus (1 514), Spain (784) the Netherlands (662), Malta (490) and Portugal (436).

At the end of week 30 (week ending Sunday, 1 August 2021), the overall COVID-19 case notification rate for the European Union and European Economic Area (EU/EEA) was 214.0 per 100 000 population (201.3 the previous week). This rate has been increasing for five weeks. Overall hospital admissions due to COVID-19 have been stable for nine weeks. The 14-day COVID-19 death rate (4.7 deaths per million population, compared with 3.6 deaths the previous week) has increased compared to the previous week.

ECDC's assessment of each country's epidemiological situation derives from a composite score based on the absolute value and trend of five weekly COVID-19 epidemiological indicators. For week 30, the epidemiological situation in the EU/EEA overall was categorised as of moderate concern (the same as the previous week). Two countries were categorised as of high concern, 12 countries as of moderate concern, eight countries as of low concern and eight countries as of very low concern.

By the end of week 30, the median of cumulative uptake of at least one vaccine dose among adults aged 18 years and above was 72.8% (country range: 19.2–91.2%). The median of cumulative uptake of full vaccination among adults aged 18 years and above was 59.8% (country range: 17.3–86.5%).

The estimated distribution (median and range of values from 14 countries) of variants of concern was 89.6% (52.3–99.0%) for B.1.617.2 (Delta), 5.6% (0.0–17.3%) for B.1.1.7 (Alpha), 0.1% (0.0–4.2%) for B.1.351 (Beta), 0.0% (0.0–1.7%) for P.1 (Gamma) and 0.0% (0.0–0.5%) for B.1.1.7+E484K.

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 [WHO](#) declared the COVID-19 outbreak a pandemic. The [third](#), [fourth](#), [fifth](#), [sixth](#), [seventh](#) and [eighth](#) International Health Regulations (IHR) Emergency Committee meetings for COVID-19 were held in Geneva on 30 April 2020, 31 July 2020, 29 October 2020, 14 January 2021 and 15 April 2021, and 15 July 2021 respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

## ECDC assessment

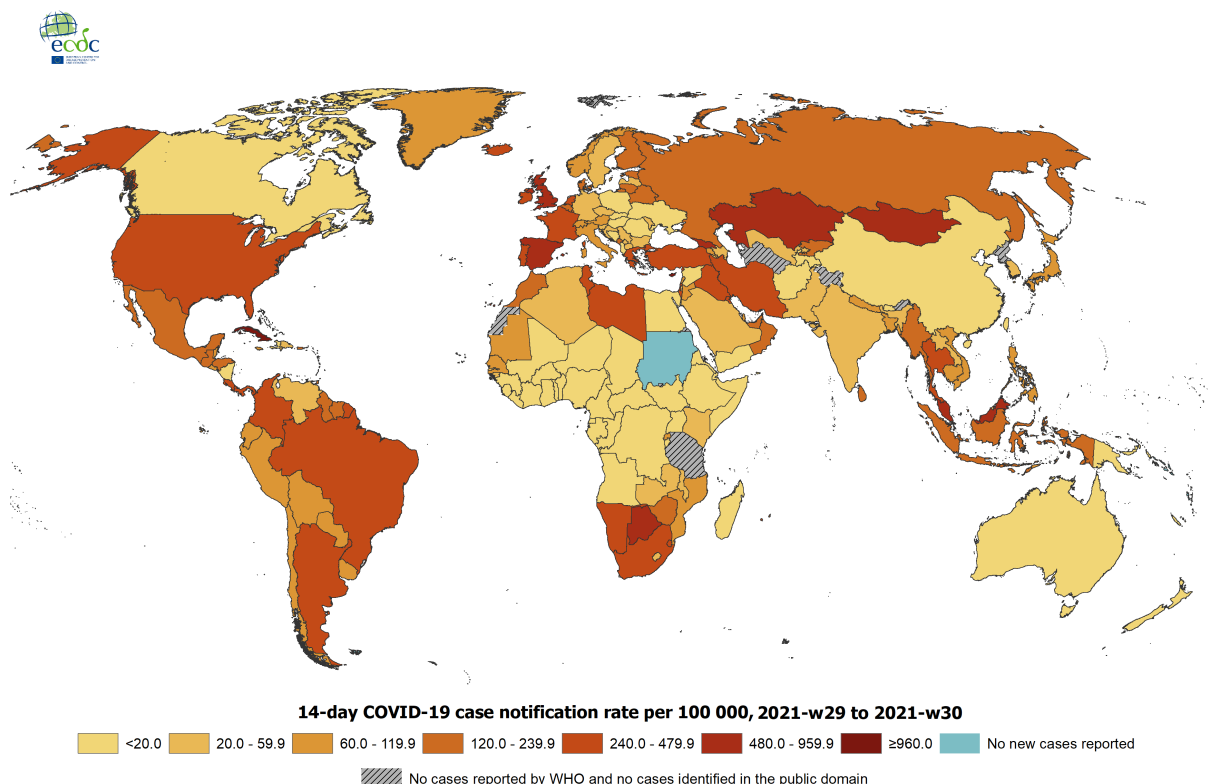
For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

## Actions

**Actions:** ECDC published the 15th update of its [rapid risk assessment](#) on 10 June 2021 and a [Threat Assessment Brief](#) on the implications of the circulation of SARS-CoV-2 Delta on 23 June 2021. A [dashboard](#) with the latest updates is available on ECDC's [website](#).

## Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, 2021-w29 to 2021-w30

'Source: ECDC'



Administrative boundaries: © EuroGeographics © UN-FAO © Turkstat. The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union.

Date of production: 04/08/2021

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

Opening date: 9 February 2011

Latest update: 6 August 2021

### Epidemiological summary

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 9 July 2021, two new cases were reported by one country in the EU/EEA: Germany (2). Other countries did not report new cases of measles.

No deaths have been reported by EU/EEA countries in 2021.

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Relevant updates outside the EU/EEA are available for WHO Regional Office for Europe (EURO), WHO Regional Office for Africa (WHO AFRO), and WHO Pan American Health Organization (PAHO). There were no updates for the WHO Regional Office for South-East Asia (SEARO) or the WHO Western Pacific Regional Office (WPRO).

EU/EEA countries are encouraged to maintain [routine immunisation sessions](#), provided that COVID-19 response measures allow.

**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 a supplement to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 30 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 35 cases in 2021 as of week 30 (ending on 1 August 2021), which is an increase of 2 cases since week 26 (ending on 4 July 2021).

Relevant epidemiological summary for countries outside the EU/EEA

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

According to the WHO Regional Office for Europe ([EURO](#)) report, as of 1 July 2021 and for the reporting period from January to June 2021, sporadic measles cases were reported in: Belarus, Belgium, Germany, France, Ireland, Kazakhstan, Kyrgyzstan, Poland, Romania, Serbia, Turkey, Ukraine and the United Kingdom.

According to the WHO Regional Office for Africa ([AFRO](#)), in 2021 and as of 25 July 2021, outbreaks of measles were reported in the following countries: Angola, Burundi, Cameroon, Central African Republic, Chad, Ethiopia, Guinea, Kenya, Liberia, Mali, Mozambique, Niger, Nigeria and South Sudan. According to the [Provisional monthly Measles and Rubella report from the WHO](#), in 2021 and as of week 22 (ending on 6 June 2021), there have been 24 494 suspected and 1 394 confirmed cases, including 325 deaths due to measles in the Democratic Republic of the Congo (DRC), showing an increase since the largest measles [epidemic](#) between 2018 and 2020 in the DRC. In this same report, cases have also been reported from Burkina Faso, Equatorial Guinea, Ivory Coast, United Republic of Tanzania and Somalia.

According to the WHO Pan American Health Organization ([PAHO](#)), in 2021 and as of 25 July 2021, two countries reported 536 confirmed cases of measles: Brazil (534) and the United States (2).

According to the WHO Regional Office for Eastern Mediterranean ([EMRO](#)) report for the period January to May 2021, 6 855 measles cases were reported in 13 countries: Afghanistan, Iran, Iraq, Kuwait, Lebanon, Libya, Pakistan, Saudi Arabia, Somalia, Sudan, Syria, Tunisia and the United Arab Emirates. Most of the cases were reported by Pakistan (5 030) and Afghanistan (1 270).

No updates were available for the WHO Regional Office for South-East Asia (SEARO) or the WHO Western Pacific Regional Office (WPRO).

## **ECDC assessment**

A substantial decline in measles cases reported by EU/EEA countries 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. Considering the potential lifting of non-pharmaceutical interventions related to the COVID-19 pandemic in the coming months, we anticipate possible 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.

## Mass Gathering Monitoring - Olympic Games in Tokyo - 2020 (2021)

Opening date: 21 July 2021

Latest update: 6 August 2021

### Epidemiological summary

From 30 July to 5 August 2021, several signals were detected during the daily screening of the Olympic Games in Tokyo 2020 (2021). Since the previous report, 160 new SARS-CoV-2-positive cases related to the Olympic Games have been reported.

### COVID-19-related news

#### Summary

As of 5 August 2021, a total of 358 SARS-CoV-2-positive cases have been detected among the Olympic Games in Tokyo 2020 (2021) participants, according to the [Tokyo 2020 Organising Committee](#). These cases were reported among Tokyo 2020 contractors (188), games-concerned personnel (98), athletes (29), media staff (17), volunteers (15) and Tokyo 2020 employees (6). [Other](#) municipal governments hosting training camps also reported cases among athletes (3) and games-concerned personnel (2).

According to multiple [media sources](#), some of the positive cases reported among athletes were notified in nationals from [Czech Republic](#) (4), [Greece](#) (4), [United States of America](#) (4), [the Netherlands](#) (2), [South Africa](#) (2), [Trinidad and Tobago](#) (2), [United Kingdom](#) (1), [Algeria](#) (1), [Argentina](#) (1), [Germany](#) (1), [Italy](#) (1), [Russia](#) (1), [Spain](#) (1), and [Chile](#) (1).

According to a [media report](#), on 4 August 2021 the organising committee of the Olympic Games in Tokyo 2020 (2021) confirmed the first COVID-19 cluster infection, as 12 members of the artistic swimming delegation from Greece were moved out of the athletes' village and into isolation.

On 3 August 2021, [media](#) quoting the Japan Medical Association mentioned a nationwide state of emergency is needed to contain SARS-CoV-2. Furthermore, [media](#) cited that the Japanese prime minister expressed that only COVID-19 patients who are seriously ill and those at risk of becoming so will be hospitalised.

As of 4 August 2021, [Japan](#) has reached 966 907 cumulative SARS-CoV-2-positive cases. Over the previous weeks, an increasing trend in SARS-CoV-2-positive cases has been observed.

#### Vaccine update

The COVID-19 vaccine [was not mandatory for Olympic participants, but it was recommended](#). However, the vaccination rate among Olympic participants is generally higher. According to a [media report](#) quoting the IOC, as of 26 July 2021, at least 85% of delegation members from participating countries have been vaccinated.

As of 5 August 2021, [Japan](#) has administered 96 854 171 SARS-CoV-2 vaccine doses. Among the total Japanese population, 45.2% have received a first dose and 32.1% have received a second dose. Regarding the population above 65 years old, 87.1% have received a first dose and 79.2% have received a second dose.

#### Other events

According to [media](#), Japan is suffering a heat wave that is affecting the Olympic Games in Tokyo 2020 (2021). Concerns have arisen for Olympic events celebrated outdoors. The [heat wave](#) started with the summer season and has recorded temperatures of [38.9°C](#). According to the [weather forecast](#), temperatures will continue to be high in the coming days.

### ECDC assessment

Where mass gathering events, such as the Olympic Games in Tokyo 2020 (2021), take place, in the absence of sufficient mitigation measures the risk of local and regional transmission of COVID-19, including the spread of variants of concern, is expected to increase. Options for COVID-19 response are described in ECDC's [latest COVID-19 rapid risk assessment](#), published on 10 June 2021.

COVID-19-related country profiles for countries outside the EU/EEA are available [here](#).

The risk of becoming infected with other communicable diseases at the Olympic Games in Tokyo 2020 (2021) and in other hosting regions varies, but is considered low if preventive measures are applied (e.g. being fully vaccinated according to the national immunisation schedule, following rules on hand and food hygiene, observing respiratory etiquette, refraining from any activities and contacts if symptoms occur, and seeking prompt testing and medical advice as needed).

## Actions

ECDC is monitoring this event through its epidemic intelligence activities on a daily basis. ECDC published its Rapid Risk Assessment [Assessing SARS-CoV-2 circulation, variants of concern, non-pharmaceutical interventions and vaccine rollout in the EU/EEA, 15th update](#) on 10 June 2021, and its Threat Assessment Brief [Implications for the EU/EEA on the spread of the SARS-CoV-2 Delta \(B.1.617.2\) variant of concern](#) on 23 June 2021.

## Middle East respiratory syndrome coronavirus (MERS-CoV) – Multi-country

Opening date: 24 September 2012

Latest update: 6 August 2021

### Epidemiological summary

From 1 January 2021 to 2 August 2021, 12 MERS-CoV cases have been reported in Saudi Arabia (11) and the United Arab Emirates (1), including five deaths. In Saudi Arabia, all were primary cases, of whom eight reported contact with camels. These 11 cases were reported in Riyadh (6), Makkah (3), and the Eastern Province (2).

Since April 2012, and as of 2 August 2021, 2 593 cases of MERS-CoV, including 941 deaths, have been reported by health authorities worldwide.

**Sources:** [ECDC MERS-CoV page](#) | [WHO MERS-CoV](#) | [ECDC factsheet for professionals](#) | [Saudi Arabia Ministry of Health](#) | [WHO DON](#)

### ECDC assessment

Human cases of MERS-CoV continue to be reported in the Arabian Peninsula, particularly in Saudi Arabia. However, the number of new cases detected and reported through surveillance have dropped to the lowest levels since 2014. The risk of sustained human-to-human transmission in Europe remains very low. The current MERS-CoV situation poses a low risk to the EU, as stated in ECDC's [rapid risk assessment](#) published on 29 August 2018, which also provides details on the last case reported in Europe.

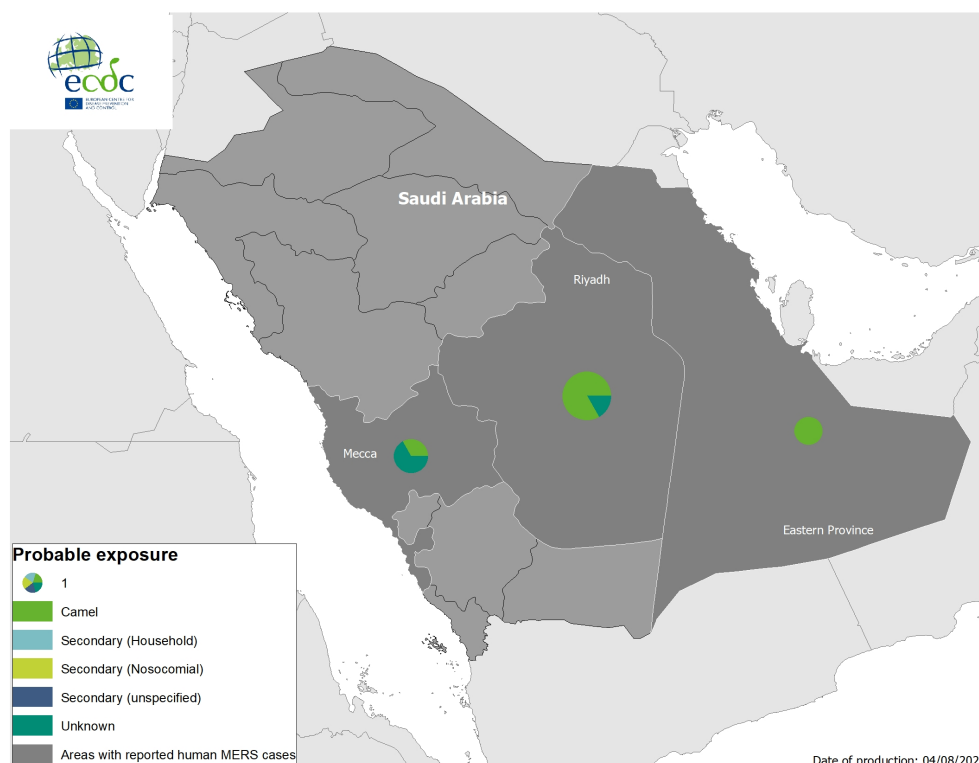
ECDC published a technical report, [Health emergency preparedness for imported cases of high-consequence infectious diseases](#), in October 2019, which will be useful for EU Member States wanting to assess their level of preparedness for a disease such as MERS. ECDC also published [Risk assessment guidelines for infectious diseases transmitted on aircraft \(RAGIDA\) – Middle East Respiratory Syndrome Coronavirus \(MERS-CoV\)](#) on 22 January 2020.

## Actions

ECDC is monitoring this threat through its epidemic intelligence activities, and reports on a monthly basis.

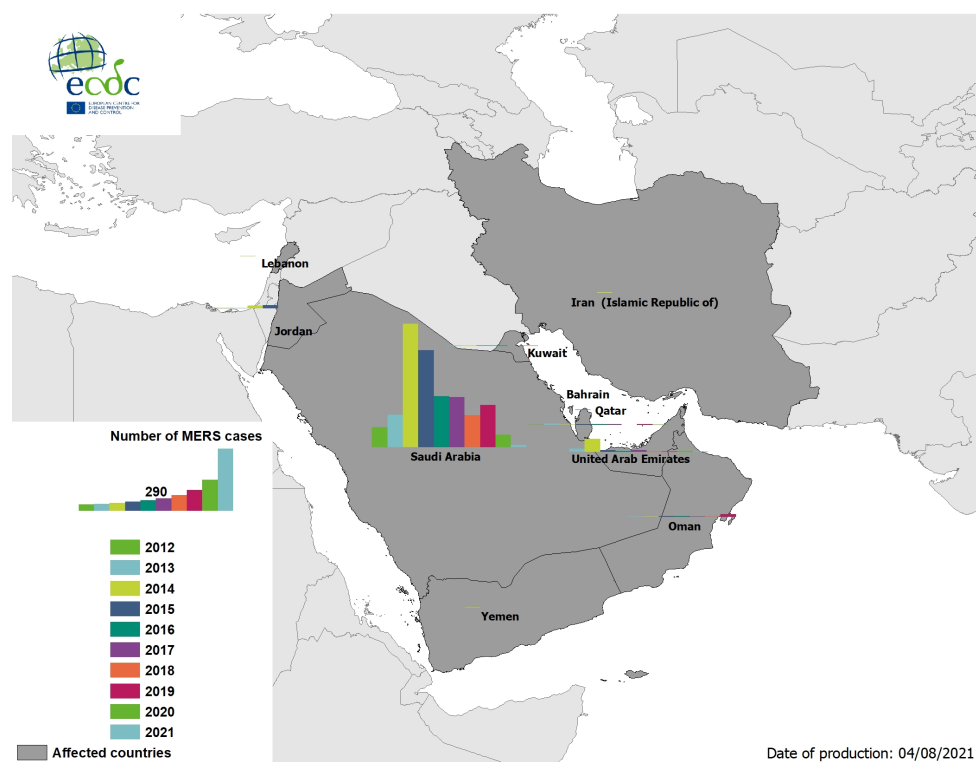
## Geographical distribution of confirmed MERS-CoV cases by probable region of infection and exposure, from 1 January to 2 August 2021

Source: ECDC



## Geographical distribution of confirmed MERS-CoV cases by country of infection and year, from April 2012 to 2 August 2021

Source: ECDC



## Poliomyelitis – Multi-country (World) – Monitoring global outbreaks

14/16



Opening date: 9 December 2019

Latest update: 6 August 2021

## Epidemiological summary

### Wild poliovirus:

In 2021 overall, as of 3 August, 2 cases of WPV1 have been reported from two endemic countries: Afghanistan (1) and Pakistan (1). In 2020, a total of 140 cases have been reported from Pakistan (84) and Afghanistan (56).

### Circulating vaccine-derived poliovirus (cVDPV):

In 2020 overall, and as of 3 August 2021, 34 cases of cVDPV1 have been reported by Yemen (31), Madagascar (2) and Malaysia (1). In addition, 1 069 cases of cVDPV2 have been reported from 24 countries: Afghanistan (308), Pakistan (135), Chad (99), Democratic Republic of the Congo (81), Burkina Faso (65), Côte D'Ivoire (61), Sudan (58), South Sudan (50), Mali (48), Guinea (44), Ethiopia (36), Somalia (14), Ghana (12), Sierra Leone (10), Niger (10), Togo (9), Nigeria (8), Cameroon (7), Central African Republic (4), Angola (3), Benin (3), Congo (2), Philippines (1) and Tajikistan (1). No cases of cVDPV3 have been reported.

In 2021 overall, and as of 3 August 2021, 9 cases of cVDPV1 have been reported by Madagascar (6) and Yemen (3). In addition, 195 cases of cVDPV2 have been reported from 14 countries: Nigeria (65), Afghanistan (43), Tajikistan (23), Senegal (13), Democratic Republic of the Congo (10), South Sudan (9), Pakistan (8), Ethiopia (6), Guinea (6), Sierra Leone (4), Liberia (3), Congo (2), Benin (2) and Burkina Faso (1). No cases of cVDPV3 have been reported to date this year.

Global guidance from WHO recommends temporarily postponing preventive immunisation campaigns where there is no active outbreak of a vaccine-preventable disease. Operationally, polio vaccination campaigns are incompatible with physical distancing recommendations. The guidance calls for countries to prioritise routine immunisation of children in essential service delivery. As a result, the Global Polio Eradication Initiative (GPEI) has taken the decision to temporarily delay immunisation campaigns.

As part of the GPEI programme, surveillance activities will continue to the extent possible to monitor the evolution of the situation. In addition, comprehensive, context-specific plans to resume efforts are being developed, to be launched whenever and wherever the situation allows.

**Sources:** [Global Polio Eradication Initiative](#) | [ECDC](#) | [ECDC Polio interactive map](#) | [WHO DON](#) | [WPV3 eradication certificate](#)

## ECDC assessment

The WHO European Region has remained polio-free since 2002. Inactivated polio vaccines are used in all EU/EEA countries. However, the risk of the virus being reintroduced into Europe remains as long as there are non- or under-vaccinated population groups in European countries and poliomyelitis is not eradicated. According to the May 2019 report of the European Regional Commission for Certification of Poliomyelitis Eradication, one EU/EEA country (Romania) and two neighbouring countries (Bosnia and Herzegovina, and Ukraine) remain at high risk of a [sustained polio outbreak](#). According to the same report, an additional 15 EU/EEA countries are at intermediate risk of sustained polio outbreaks, following wild poliovirus importation or the emergence of cVDPV due to suboptimal programme performance and low population immunity. The continuing circulation of wild poliovirus type 1 (WPV1) in two countries shows that there is still a risk of the disease being imported into the EU/EEA. Furthermore, the concerning occurrence of outbreaks of circulating vaccine-derived poliovirus (cVDPV), which only emerge and circulate due to lack of polio immunity in the population, shows the potential risk for further international spread.

To limit the risk of reintroduction and sustained transmission of WPV and cVDPV in the EU/EEA, it is crucial to maintain high vaccine coverage in the general population and increase vaccination uptake in the pockets of under-immunised populations.

[ECDC](#) endorses WHO's temporary recommendations with regard to EU/EEA citizens who are resident in or long-term visitors (>4 weeks) to countries with the potential risk of international spread.

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

## Actions

ECDC provides updates on the polio situation on a monthly basis. The agency also monitors polio cases worldwide through its epidemic intelligence activities in order to highlight polio eradication efforts and identify events that increase the risk of wild poliovirus being reintroduced into the EU/EEA.

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

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