

## I. Executive summary

### EU Threats

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

Opening date: 7 January 2020

Latest update: 16 July 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.

##### → Update of the week

Since week 2021-26 and as of week 2021-27, 3 086 007 new cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) and 55 991 new deaths have been reported.

Since 31 December 2019 and as of week 2021-27, 187 509 874 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 043 003 deaths.

In the EU/EEA, 33 527 660 cases have been reported, including 742 049 deaths.

Resurgence of reported cases of COVID-19 in the EU/EEA is related to relaxation of non-pharmaceutical interventions and increasing spread of the Delta variant.

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

## Mass gathering monitoring- Multi-country- UEFA European Football Championship 2020 (2021)

Opening date: 3 June 2021

Latest update: 16 July 2021

The UEFA European Football Championship (UEFA EURO 2020), which was postponed in March 2020 due to the COVID-19 pandemic, takes place between 11 June and 11 July 2021. Eleven cities are hosting the matches, of which seven are in European Union countries: Denmark, Germany, Hungary, Italy, the Netherlands, Romania, and Spain. Other host cities are located in Azerbaijan, Russia, England, and Scotland. Twenty-four teams will be playing with an estimated 460 000 spectators. Capacity has been reduced in stadiums due to COVID-19 restrictions.

ECDC intensified its enhanced epidemic intelligence activities between 4 June and 16 July 2021, using a targeted and systematic screening approach on a daily basis and tailored tools.

→Update of the week

From 9 July to 15 July 2021, no significant events nor additional SARS-CoV-2 positive cases linked to attendance at UEFA EURO 2020 games have been detected.

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

Opening date: 4 June 2021

Latest update: 16 July 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 9 and 15 July 2021, European Union (EU) and European Economic Area (EEA) countries reported no human cases of West Nile virus (WNV) infection and no deaths related to WNV infections. EU-neighbouring countries reported no human cases of WNV infection.

## Non EU Threats

### New! Plague - DRC - 2021

Opening date: 16 July 2021

Latest update: 16 July 2021

An outbreak of pulmonary and bubonic plague has been reported in Ituri province in the Democratic Republic of the Congo (DRC) in 2021, whereby in the Fataki health zone of the Ituri province, a cluster of suspected cases of the pulmonary form of plague has been detected for the first time in over a decade.

### New! Zika - Kerala state, India - 2021

Opening date: 14 July 2021

Latest update: 16 July 2021

According to media, an outbreak of Zika virus has been detected in the Thiruvananthapuram district, Kerala state, India. So far, 28 cases have been detected.

→Update of the week

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

Opening date: 2 July 2021

Latest update: 16 July 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 15 July 2021, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as generally medium to high in EU/EEA countries, except in the Gulf of Bothnia (Sweden), Skåne county and Blekinge county (Sweden), Zealand and Bornholm (Denmark) and Vorpommern-Rügen (Germany), where it was very low to low. In addition, in Elblaski (Poland); Klaipeda (Lithuania); the Gulf of Riga (Estonia, Latvia); Lääne-Viru county and Ida-Viru county (Estonia); Southwest Finland, Uusimaa and Kymenlaakso (Finland); and Stockholm county (Sweden), the suitability was very high.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be generally medium to high, except in Öresund (Denmark, Sweden); Vorpommern-Rügen (Germany); West Pomerania Province (Poland); the Gulf of Gdansk (Poland); Klaipeda (Lithuania); the Gulf of Riga (Latvia, Estonia); Southwest Finland, Uusimaa and Kymenlaakso (Finland); and Kalmar Strait and Gotland (Sweden), where the risk is considered to be very high.

Outside EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very high in Kaliningrad and Saint Petersburg (Russia), and it continues to be so in the next five days.

In 2021 and as of 16 July, [Sweden](#) has reported 10 cases of vibriosis.

## II. Detailed reports

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

Opening date: 7 January 2020

Latest update: 16 July 2021

#### Epidemiological summary

**Summary:** Since 31 December 2019 and as of week 2021-27, 187 509 874 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 043 003 deaths.

#### Cases have been reported from:

**Africa:** 5 961 610 cases; the five countries reporting most cases are South Africa (2 195 599), Morocco (542 462), Tunisia (502 923), Egypt (283 102) and Ethiopia (277 071).

**Asia:** 51 198 820 cases; the five countries reporting most cases are India (30 874 376), Iran (3 355 786), Indonesia (2 527 203), Philippines (1 473 025) and Iraq (1 429 362).

**America:** 74 299 121 cases; the five countries reporting most cases are United States (33 855 974), Brazil (19 106 971), Argentina (4 662 874), Colombia (4 530 610) and Mexico (2 593 574).

**Europe:** 55 959 078 cases; the five countries reporting most cases are France (5 812 639), Russia (5 808 473), Turkey (5 476 294), United Kingdom (5 121 245) and Italy (4 271 276).

**Oceania:** 90 540 cases; the five countries reporting most cases are Australia (31 103), French Polynesia (19 026), Papua New Guinea (17 367), Fiji (11 385) and Guam (8 454).

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

#### Deaths have been reported from:

**Africa:** 151 913 deaths; the five countries reporting most deaths are South Africa (64 289), Tunisia (16 494), Egypt (16 396), Morocco (9 369) and Ethiopia (4 343).

**Asia:** 758 840 deaths; the five countries reporting most deaths are India (408 764), Iran (85 694), Indonesia (66 464), Philippines (25 921) and Pakistan (22 597).

**America:** 1 949 981 deaths; the five countries reporting most deaths are United States (607 163), Brazil (534 233), Mexico (235 058), Peru (194 488) and Colombia (113 335).

**Europe:** 1 180 795 deaths; the five countries reporting most deaths are Russia (143 712), United Kingdom (128 425), Italy (127 775), France (111 354) and Germany (91 233).

**Oceania:** 1 468 deaths; the five countries reporting most deaths are Australia (911), Papua New Guinea (179), French Polynesia (144), Guam (141) and Fiji (58).

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

#### EU/EEA:

As of week 2021-27, 33 527 660 cases have been reported in the EU/EEA: France (5 812 639), Italy (4 271 276), Spain (3 971 124), Germany (3 736 489), Poland (2 880 865), Netherlands (1 734 645), Czechia (1 669 496), Belgium (1 097 426), Sweden (1 092 768), Romania (1 081 275), Portugal (909 756), Hungary (808 539), Slovakia (778 795), Austria (647 292), Greece (438 809), Bulgaria (422 462), Croatia (360 841), Denmark (300 071), Lithuania (279 302), Ireland (277 892), Slovenia (257 959), Latvia (137 899), Norway (133 195), Estonia (131 508), Finland (98 082), Cyprus (84 272), Luxembourg (72 010), Malta (31 240), Iceland (6 675) and Liechtenstein (3 058).

As of week 2021-27, 742 049 deaths have been reported in the EU/EEA: Italy (127 775), France (111 354), Germany (91 233), Spain (81 020), Poland (75 160), Romania (34 219), Czechia (30 331), Hungary (30 007), Belgium (25 205), Bulgaria (18 140), Netherlands (17 744), Portugal (17 164), Sweden (14 645), Greece (12 792), Slovakia (12 521), Austria (10 512), Croatia (8 229), Ireland (5 006), Slovenia (4 765), Lithuania (4 401), Denmark (2 539), Latvia (2 537), Estonia (1 270), Finland (976), Luxembourg (819), Norway (796), Malta (420), Cyprus (380), Liechtenstein (59) and Iceland (30).

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

#### Resurgence of reported cases of COVID-19 in the EU/EEA is related to relaxation of non-pharmaceutical interventions and increasing spread of the Delta variant.

As of 15 July 2021, the EU/EEA has reported an increase of weekly COVID-19 cases of 64.3% compared to the previous week. The increasing trend is observed in 20 EU/EEA countries. The highest percentage weekly increases are observed in Malta, Netherlands, Slovakia, Lithuania, Greece, and France. The countries with the highest 14-day case notification rate are Cyprus (1337), Spain (491), Netherlands (406), Portugal (382), Luxembourg (289), and Greece (241). Most of these countries report the strongest increases and the highest notification rates among 15-24 year olds, with limited increases in persons aged >65 years. At this stage, the reported hospital occupancy rate for the EU/EEA overall remains stable. However, increasing trends are reported in Cyprus, Portugal and Finland. The reported intensive care unit

(ICU) occupancy rate for the EU/EEA overall continues to decline. However, increasing trends are reported in Cyprus and Portugal. More details are available [here](#).

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](#) and [seventh](#) 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, respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

*DISCLAIMER: Notification rates for Sweden may not reflect the actual number of cases due to security updates in the SmiNet database.*

## ECDC assessment

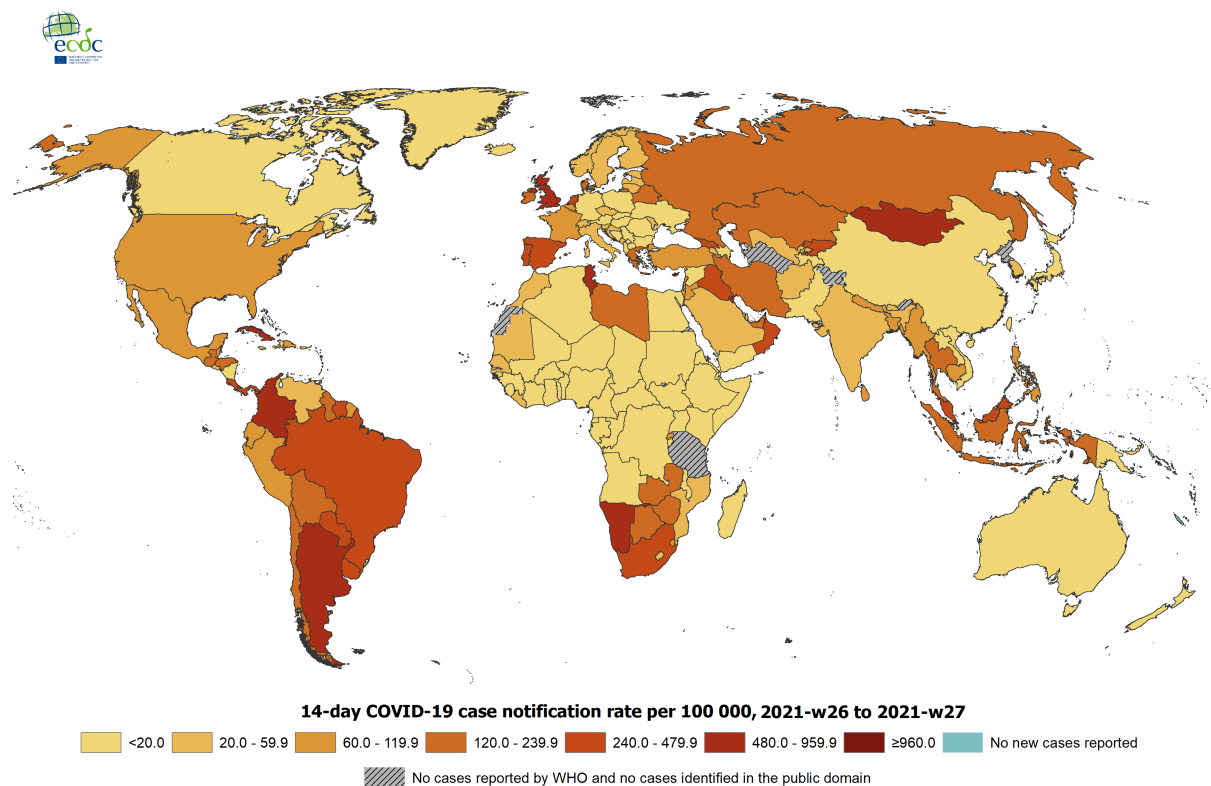
For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

## 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-w26 to 2021-w27

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: 14/07/2021

## Mass gathering monitoring- Multi-country- UEFA European Football Championship 2020 (2021)

Opening date: 3 June 2021

Latest update: 16 July 2021

### Epidemiological summary

From 9 July to 15 July 2021, no significant events nor additional SARS-CoV-2 positive cases linked to attendance at UEFA EURO 2020 games have been detected.

### COVID-19 related news

#### Summary:

According to multiple sources, from the beginning of the UEFA EURO 2020 and as of 8 July 2021, eight countries have reported 2 512 SARS-CoV-2 positive cases linked to attendance at UEFA EURO 2020 games: [Croatia](#) (2), Denmark ([source 1](#), [source 2](#)) (35; of these, five with the [Delta variant](#)), [Finland](#) (481), [France](#) (3), the Netherlands (3), [Sweden](#) (2), [Scotland](#) (1991) and Germany

6/12

(18). In addition, [Finland](#) reported that in week 25 (ending on 27 June 2021), more than 40% of the positive SARS-CoV-2 infections detected were directly related to the UEFA EURO 2020, and in week 26 (ending on 4 July 2021) the corresponding proportion was 15%. [Danish Agency for Patient Safety](#) started a testing campaign in Aarhus, Denmark, due to the recent increase of SARS-CoV-2 cases in the municipality. Many of Aarhus' citizens who tested positive in recent days indicated football events or other festivities as a possible source of infection.

According to media and [WHO EURO 2020 explorer](#), among the [UEFA host cities](#), an increase of SARS-CoV-2 cases during the monitoring period from 4 June to 15 July 2021, was reported in [St. Petersburg](#) (Russia), Rome (Italy), Baku (Azerbaijan), Amsterdam (Netherlands), Copenhagen (Denmark), Munich (Germany), and London (UK).

During the UEFA EURO 2020, an overall increase of weekly COVID-19 case notifications has been reported, according to the ECDC epidemic intelligence and TESSy data, in several EU/EEA countries including Denmark, Finland, Germany, Italy, the Netherlands, Spain, the [UK](#) and [Russia](#). For the latest EU/EEA country overviews for COVID-19, please see the dedicated [webpage](#).

According to various media reports, nine football players tested positive for SARS-CoV-2 virus infection during the UEFA Euro 2020 championship from the following national teams: [Portugal](#), [Slovakia](#), [Spain](#), [Sweden](#), [Croatia](#), [Scotland](#), and [Russia](#).

## ECDC assessment

In the countries where mass gathering events such as the UEFA European Football Championship take place, in the absence of sufficient mitigation measures, the risk of local and pan-European 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 in the EU/EEA can be found [here](#), and are available for countries outside the EU/EEA [here](#).

The risk of becoming infected with other communicable diseases in UEFA-hosting countries varies, but is considered low if preventive measures are applied (e.g. being fully vaccinated according to the national immunisation schedule; following hand and food hygiene, as well as respiratory etiquette; refraining from any activities and contacts if any 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.

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

Opening date: 4 June 2021

Latest update: 16 July 2021

### Epidemiological summary

Between 9 and 15 July 2021, European Union (EU) and European Economic Area (EEA) countries reported no human cases of West Nile virus (WNV) infection and no deaths related to WNV infections. EU-neighbouring countries reported no human cases of WNV infection.

Since the beginning of the 2021 transmission season and as of 15 July 2021, EU/EEA countries have reported one human case of WNV infection in Italy and no deaths. EU-neighbouring countries have reported no human cases of WNV infection.

During the current transmission season, within the reporting countries, a single human case of WNV infection was reported. It was reported by La Spezia in Italy, and it was the first time that this province reported a human case.

Since the beginning of the 2021 transmission season, one outbreak among equids and no outbreaks among birds have been reported by EU/EEA countries. The outbreak among equids was reported by Spain.



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

**Sources:** TESSy | Animal Disease Information System

## ECDC assessment

So far, one human case of WNV infection has been reported (week 27) from an EU Member State during the 2021 transmission season, which is consistent with observations of seasonal transmission in previous years. In the previous five years, the first human WNV infections were reported to ECDC between weeks 23 and 28.

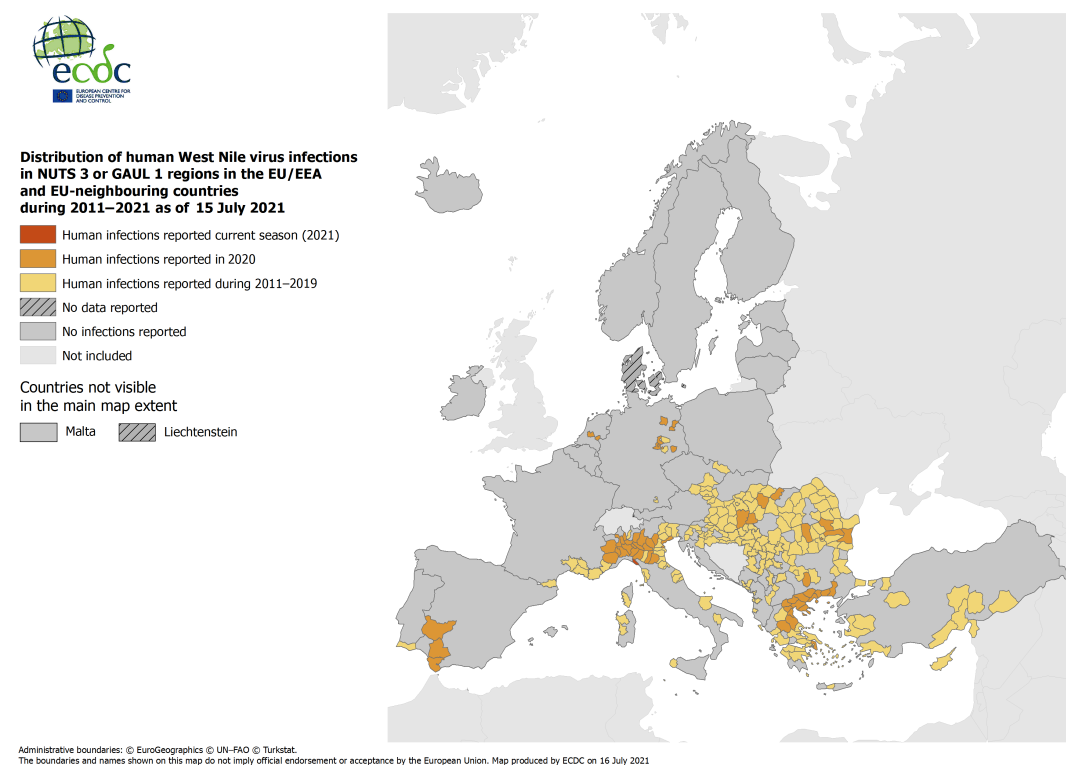
In accordance with [Commission Directive 2014/110/EU](#), prospective blood donors should be deferred for 28 days after leaving a risk area for locally acquired WNV infection, unless the result of an individual nucleic acid test is negative.

## 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 15 July

ECDC





## Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 15 July

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 15 July 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 © Turkstat.  
The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union. Map produced by ECDC on 16 July 2021

## New! Plague - DRC - 2021

Opening date: 16 July 2021

Latest update: 16 July 2021

### Epidemiological summary

An outbreak of plague in seven health zones in Ituri province, in the north-east of the Democratic Republic of the Congo (DRC), has been reported in the period between 1 January to 20 June 2021. During this period, 117 suspected cases, including 13 deaths (CFR: 11.1%) have been reported. Of these cases, between 22 April to 28 May 2021, 28 suspected cases had the pulmonary form of plague (12 deaths; CFR 44%) from the Fataki (27) and Drodoro (1) health zones.

**Background:** Plague is endemic in Ituri province; however, cases of plague had not been reported in Fataki, a health zone in the Ituri province, since over a decade ago. In the [first half of 2020](#), Ituri province reported a total of 70 cases and 16 deaths, and between 2013 and 2020 an average of 114 cases were reported per year.

**Sources:** [WHO AFRO bulletin week 28 2021](#)

### ECDC assessment

The course of plague in Ituri province is markedly influenced by the rainy season, harvesting, and presence of rodents. Although the presence of plague cases is not unexpected, the potential increase in pulmonary and septicaemic forms need to be monitored closely.

The risk to EU/EEA citizens is low.

### Actions

ECDC monitors the plague epidemiological situation worldwide through epidemic intelligence activities and reports when relevant.

## New! Zika - Kerala state, India - 2021

Opening date: 14 July 2021

Latest update: 16 July 2021

### Epidemiological summary

Media report that health authorities in the Indian state of Kerala have declared a state of alert after identifying Zika cases in the Thiruvananthapuram district. The first patient identified was, according to media, a 24-year-old pregnant woman who was admitted on 28 June 2021 with fever, headache, and rash. As of 14 July 2021, 28 cases have been reported.

**Background:** India is classified by [WHO](#) as a country with known previous or current circulation of Zika virus, but no cases have been reported from Kerala state before. However, cases have been reported from the states of Gujarat, Madhya Pradesh, Rajasthan and Tamil Nadu between 2017 and 2018.

**Sources:** [Media 1](#), [Media 2](#), [Media 3](#)

### ECDC assessment

The predominant mode of transmission for Zika virus is through the bites of infected mosquitoes, but the virus can also be transmitted by sexual contact, blood or blood components and possibly other substances of human origin. Zika virus infection during pregnancy is associated with intrauterine central nervous system infection, congenital malformations and foetal death. Hence, pregnant women are the main risk group and the primary target for preventive measures.

On 2 July 2019, WHO published an overview of the global epidemiology of Zika virus transmission. However, the [map](#) of countries and territories with current or previous Zika transmission has not been updated since 5 June 2019. Zika transmission persists, but has generally been at low levels since 2018, with cases reported from [Peru](#) (2019) and [Brazil](#) (2019, 2020, 2021). 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.

The first autochthonous cases of Zika transmission in Europe were [reported](#) in the Var department of France in October 2019. Despite the presence of the vector mosquito *Aedes albopictus* and suitable conditions for transmission in large parts of Europe, the risk of autochthonous transmission is low due to currently low travel volumes and likely low Zika transmission levels worldwide.

### Actions

ECDC is monitoring the situation through epidemic intelligence activities.

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

Opening date: 2 July 2021

Latest update: 16 July 2021

### Epidemiological summary

As of 15 July 2021, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as generally medium to high in EU/EEA countries, except in the Gulf of Bothnia (Sweden), Skåne county and Blekinge county (Sweden), Zealand and Bornholm (Denmark) and Vorpommern-Rügen (Germany), where it was very low to low. In addition, in Elblaski (Poland); Klaipeda (Lithuania); the Gulf of Riga (Estonia, Latvia); Lääne-Viru county and Ida-Viru county (Estonia); Southwest Finland, Uusimaa and Kymenlaakso (Finland); and Stockholm county (Sweden), the suitability was very high.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be generally medium to high, except in Öresund (Denmark, Sweden); Vorpommern-Rügen (Germany); West Pomerania Province (Poland); the Gulf of Gdansk (Poland); Klaipeda (Lithuania); the Gulf of Riga (Latvia, Estonia); Southwest Finland, Uusimaa and Kymenlaakso (Finland) and Kalmar Strait and Gotland (Sweden), where the risk is considered to be very high.

Outside EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very high in Kaliningrad and Saint Petersburg (Russia) and it continues to be so in the next five days.

10/12

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 16 July, [Sweden](#) has reported 10 cases of vibriosis.

**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 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 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 2021 and will report on increased environmental suitability for the growth of *Vibrio* species.

---

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