



## COMMUNICABLE DISEASE THREATS REPORT

# CDTR

## Week 38, 19-25 September 2021

### All users

This weekly bulletin provides updates on threats monitored by ECDC.

## I. Executive summary

### EU Threats

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

Opening date: 7 January 2020

Latest update: 24 September 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, 15 April 2021 and 14 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 2021-36 and as of week 2021-37, 4 248 275 new cases of COVID-19 and 63 175 new deaths have been reported worldwide.

Since 31 December 2019 and as of week 2021-37, 229 415 774 cases of COVID-19 have been reported worldwide, including 4 699 359 deaths.

In the EU/EEA as of week 2021-37, 37 863 314 cases have been reported, including 764 710 deaths.

The figures reported worldwide and in the EU/EEA are likely an underestimate of the true number of cases and deaths, due to various degrees of under-ascertainment and under-reporting.

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

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

Opening date: 4 June 2021

Latest update: 24 September 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 17 and 23 September 2021, European Union (EU) and European Economic Area (EEA) countries reported nine human cases of West Nile virus (WNV) infection and one death related to WNV infections. Cases were reported by Greece (5) and Italy (4). One death was reported by Greece. EU-neighbouring countries reported two human cases of WNV infection in Serbia and no deaths.

## Non EU Threats

### Marburg virus disease - Guinea - 2021

Opening date: 11 August 2021

Latest update: 24 September 2021

On August 5 2021, Guinea reported a case of Marburg virus disease (MVD) in Nzérékoré region. No additional cases have been detected in the following 42 days following the last possible exposure to the case. On 16 September the outbreak was considered over.

### →Update of the week

On 16 September 2021, [Guinea](#) declared the end of the Marburg virus disease (MVD) outbreak as no cases have been recorded for a period of 42 days after the last possible exposure to the case.

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

Opening date: 20 April 2006

Latest update: 24 September 2021

Several countries in Africa and Asia have reported [cholera](#) outbreaks in 2021. Major ongoing outbreaks are being reported from Bangladesh, Nigeria and Niger. Haiti reported its last laboratory-confirmed case in February 2019.

### →Update of the week

Since the last update on 27 August 2021, new cholera cases have been reported worldwide. Countries reporting the majority of new cases since the previous update are Nigeria, Niger, the Democratic Republic of Congo and Bangladesh. A list of all countries reporting new cases since our previous update on 27 August 2021 can be found below.

## II. Detailed reports

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

Opening date: 7 January 2020

Latest update: 24 September 2021

#### Epidemiological summary

Since 31 December 2019 and as of week 2021-37, 229 415 774 cases of COVID-19 have been reported, including 4 699 359 deaths.

#### Cases have been reported from:

**Africa:** 8 180 555 cases; the five countries reporting most cases are South Africa (2 882 630), Morocco (919 681), Tunisia (700 807), Ethiopia (332 961) and Libya (332 026).

**Asia:** 65 962 928 cases; the five countries reporting most cases are India (33 478 419), Iran (5 408 860), Indonesia (4 192 695), Philippines (2 366 749) and Malaysia (2 112 175).

**America:** 88 561 500 cases; the five countries reporting most cases are United States (42 287 762), Brazil (21 247 667), Argentina (5 241 327), Colombia (4 942 249) and Mexico (3 573 044).

**Europe:** 66 489 365 cases; the five countries reporting most cases are United Kingdom (7 429 746), Russia (7 274 928), France (6 955 333), Turkey (6 847 259) and Spain (4 935 534).

**Oceania:** 220 721 cases; the five countries reporting most cases are Australia (85 629), Fiji (49 889), French Polynesia (44 612), Papua New Guinea (18 933) and Guam (13 660).

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

#### Deaths have been reported from:

**Africa:** 206 137 deaths; the five countries reporting most deaths are South Africa (86 174), Tunisia (24 553), Egypt (16 970), Morocco (13 910) and Algeria (5 694).

**Asia:** 1 021 161 deaths; the five countries reporting most deaths are India (445 133), Indonesia (140 634), Iran (116 791), Philippines (36 788) and Pakistan (27 246).

**America:** 2 181 137 deaths; the five countries reporting most deaths are United States (676 075), Brazil (590 955), Mexico (271 765), Peru (199 036) and Colombia (125 924).

**Europe:** 1 288 153 deaths; the five countries reporting most deaths are Russia (198 218), United Kingdom (135 203), Italy (130 310), France (116 030) and Germany (92 971).

**Oceania:** 2 765 deaths; the five countries reporting most deaths are Australia (1 162), French Polynesia (585), Fiji (566), Papua New Guinea (209) and Guam (181).

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

#### EU/EEA:

As of week 2021-37, 37 863 314 cases have been reported in the EU/EEA: France (6 955 333), Spain (4 935 534), Italy (4 636 111), Germany (4 145 852), Poland (2 898 299), Netherlands (1 984 853), Czechia (1 686 364), Belgium (1 225 184), Romania (1 152 052), Sweden (1 145 806), Portugal (1 062 320), Hungary (818 231), Slovakia (791 046), Austria (720 670), Greece (630 784), Bulgaria (482 186), Croatia (392 248), Ireland (375 367), Denmark (354 913), Lithuania (317 852), Slovenia (285 079), Norway (182 235), Latvia (150 560), Estonia (150 142), Finland (136 257), Cyprus (118 957), Luxembourg (77 189), Malta (36 994), Iceland (11 471) and Liechtenstein (3 425).

As of week 2021-37, 764 710 deaths have been reported in the EU/EEA: Italy (130 310), France (116 030), Germany (92 971), Spain (85 901), Poland (75 488), Romania (35 592), Czechia (30 431), Hungary (30 136), Belgium (25 517), Bulgaria (20 028), Netherlands (18 114), Portugal (17 914), Sweden (14 789), Greece (14 466), Slovakia (12 573), Austria (10 671), Croatia (8 514), Ireland (5 179), Lithuania (4 837), Slovenia (4 824), Latvia (2 640), Denmark (2 630), Estonia (1 328), Finland (1 057), Norway (841), Luxembourg (834), Cyprus (547), Malta (455), Liechtenstein (60) and Iceland (33).

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

In week 2021-37, in the EU/EEA overall, the reported weekly cases decreased by 7.7% compared to the previous week. The highest weekly increases in descending order were observed in Romania, Hungary, Croatia and Poland. The countries with the highest 14-day notification rates per 100 000 population are: Slovenia (652), Lithuania (507), Estonia (462), Ireland (374), and Croatia (351). Sixteen of the 29 EU/EEA countries (Austria, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Liechtenstein, Luxembourg, Netherlands, Norway, Portugal and Spain) reported a decrease in the weekly cases.

At the end of week 37 (week ending Sunday 19 September 2021), the overall epidemiological situation in the European Union and

European Economic Area (EU/EEA) was characterised by a high, slowly decreasing overall case notification rate and a low, stable death rate, with these trends forecast to continue over the next two weeks. Hospitalisations and ICU admissions are forecast to remain stable. Case notification rates among those aged 15 to 24 years, the most affected age group, have continued to decrease across the EU/EEA and have begun to stabilise among children under 15 years of age following a recent increase. The picture varies considerably at the Member State level, with increasing trends in case notification rates mainly reported in eastern parts of the EU/EEA. Several countries are reporting increases in severity indicators including cases in older age groups, hospitalisations and deaths.

The overall COVID-19 case notification rate for the EU/EEA was 156.6 per 100 000 population (171.2 the previous week). This rate has been decreasing for three weeks. The 14-day COVID-19 death rate (15.8 deaths per million population, compared with 15.0 deaths the previous week) has been stable for two weeks. Of 29 countries with data on hospital/ICU admissions or occupancy up to week 37, 11 reported an increasing trend in at least one of these indicators compared to the previous week.

ECDC's assessment of each country's epidemiological situation is based on a composite score based on the absolute value and trend of five weekly COVID-19 epidemiological indicators. As shown below, for week 37, the epidemiological situation in the EU/EEA overall was categorised as of low concern (from moderate concern the previous week). One country was categorised as of very high concern, four countries as of high concern, nine countries as of moderate concern and 16 countries as of low concern. Compared with the previous week, three countries (Hungary, Latvia and Luxembourg) moved to a higher category, nine countries (Croatia, Cyprus, Finland, Germany, Greece, Liechtenstein, Netherlands, Norway and Sweden) moved to a lower category and 18 countries stayed in the same category.

By the end of week 37, the median cumulative uptake of at least one vaccine dose in the EU/EEA among adults aged 18 years and older was 77.6% (country range: 23.5–97.3%). The median cumulative uptake of full vaccination among adults aged 18 years and older was 72.7% (country range: 22.0–90.7%).

The estimated distribution (median and range of values from 17 countries for weeks 35 to 36, 30 August to 12 September 2021) of variants of concern (VOC) was 99.6% (72.0–100.0%) for B.1.617.2 (Delta), 0.0% (0.0–0.3%) for P.1 (Gamma) and 0.0% (0.0–0.1%) for B.1.351 (Beta). The distribution was 0.0% (0.0–18.2%) for B.1.1.7 (Alpha), which has been downgraded from the list of VOCs on 3 September 2021.

For the latest COVID-19 country overviews, please see the [dedicated webpage](#).

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, 15 April 2021 and 14 July 2021, respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

## ECDC assessment

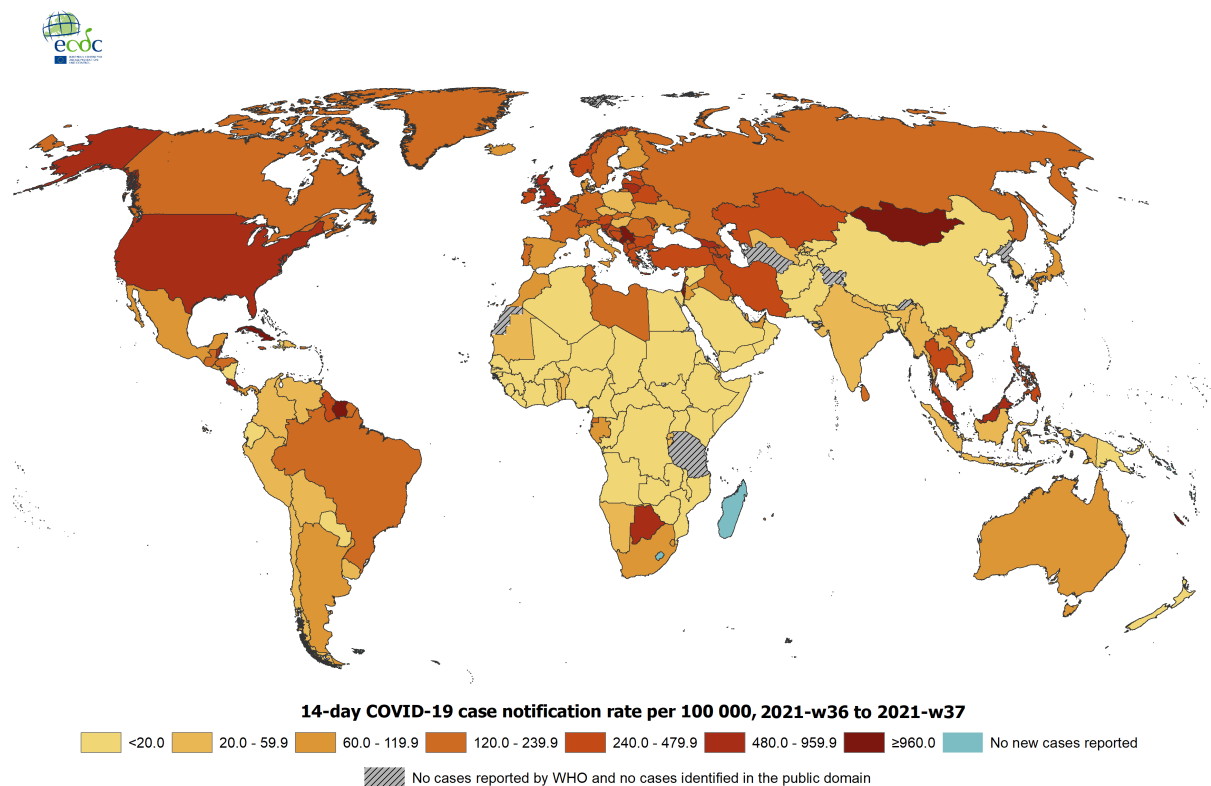
For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

## 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-w36 to 2021-w37

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: 22/09/2021

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

Opening date: 4 June 2021

Latest update: 24 September 2021

### Epidemiological summary

Between 17 and 23 September 2021, European Union (EU) and European Economic Area (EEA) countries reported nine human cases of West Nile virus (WNV) infection and one death. Cases were reported by Greece (5) and Italy (4). One death was reported by Greece. EU-neighbouring countries reported two human cases of WNV infection in Serbia and no deaths. Since the beginning of the 2021 transmission season and as of 23 September 2021, EU/EEA countries have reported 107 human cases of WNV infection in Greece (48), Italy (36), Romania (7), Spain (5), Hungary (5), Austria (3) and Germany (3) and seven deaths in Greece (5), Spain (1) and Romania (1). EU-neighbouring countries have reported 15 human cases of WNV infection in Serbia and three deaths in Serbia.

During the current transmission season, within the reporting countries, human cases of WNV infection were reported from 42 different NUTS 3 or GAUL 1 regions, of which the following regions reported human cases of WNV infection for the first time: Spree-Neiße in Germany and La Spezia in Italy.

Since the beginning of the 2021 transmission season, 15 outbreaks among equids and four outbreaks among birds have been

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reported by EU/EEA countries. Outbreaks among equids have been reported by Germany (9), Spain (4) and Hungary (2). Outbreaks among birds have been reported by Spain (4).

## ECDC assessment

Human WNV infections have been reported in seven EU Member States where seasonal circulation of the virus has been previously reported. According to the data from previous years and the epidemiology of WNV infections, cases in this period of the year are not unexpected in the affected countries and further cases will very probably occur in the coming weeks.

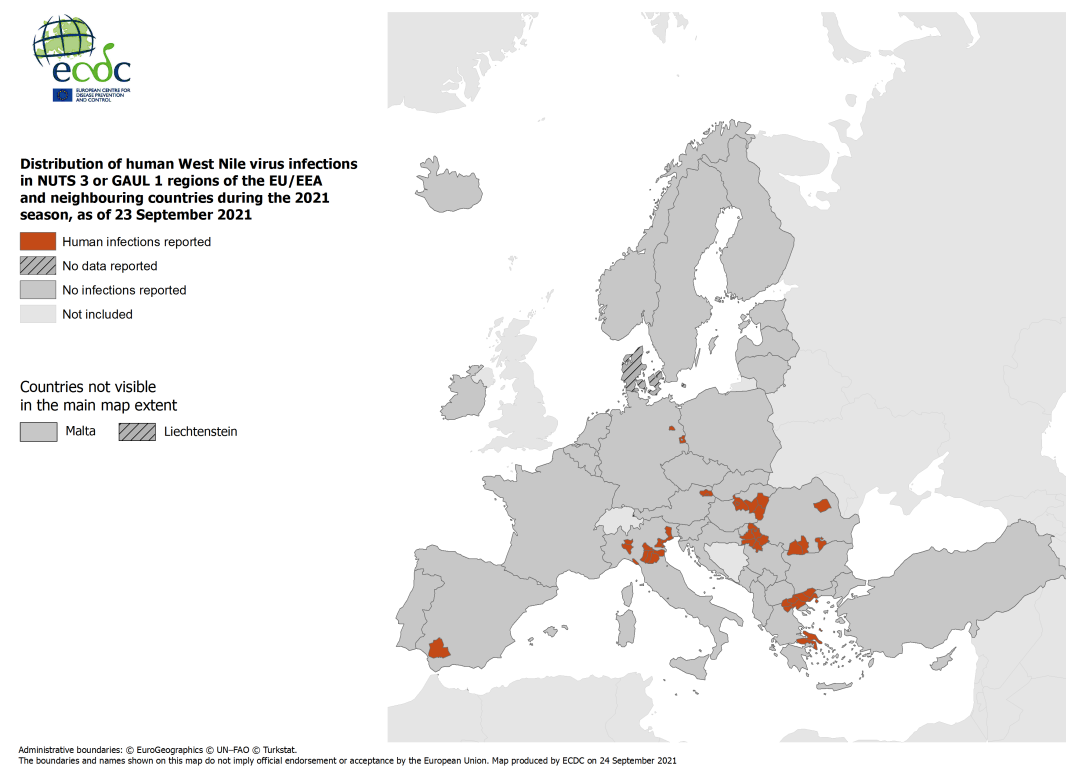
In accordance with [Commission Directive 2014/110/EU](#), prospective blood donors should be deferred for 28 days after leaving a risk area for locally acquired WNV infection, unless the result of an individual nucleic acid test is negative.

## 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 23 September

ECDC





## Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 23 September

ECDC and ADIS

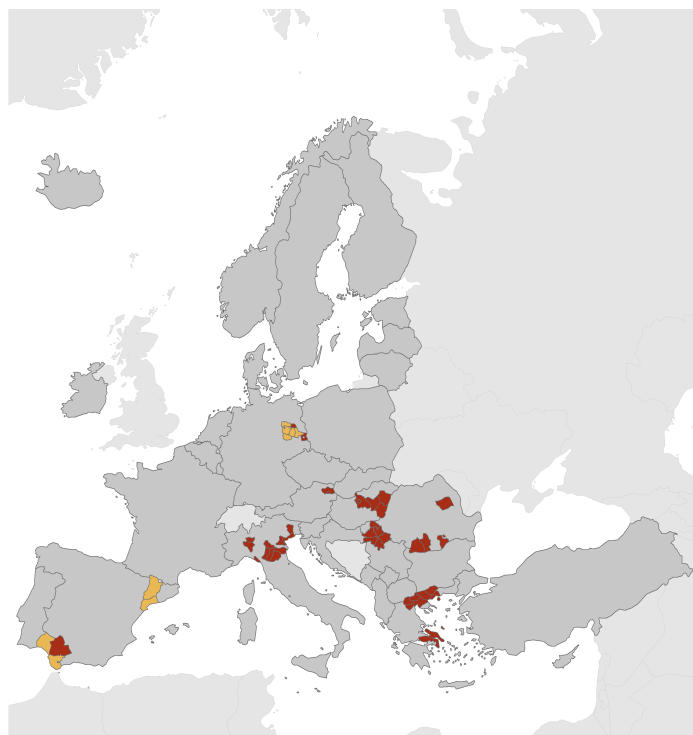


**Distribution of human and animal West Nile virus infections in NUTS 3 or GAUL 1 regions of the EU/EEA and neighbouring countries during the 2021 season, as of 23 September 2021**

- 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 24 September 2021

## Distribution of human West Nile virus infections in the EU/EEA and neighbouring countries during 2011-2021, as of 23 September 2021.

ECDC

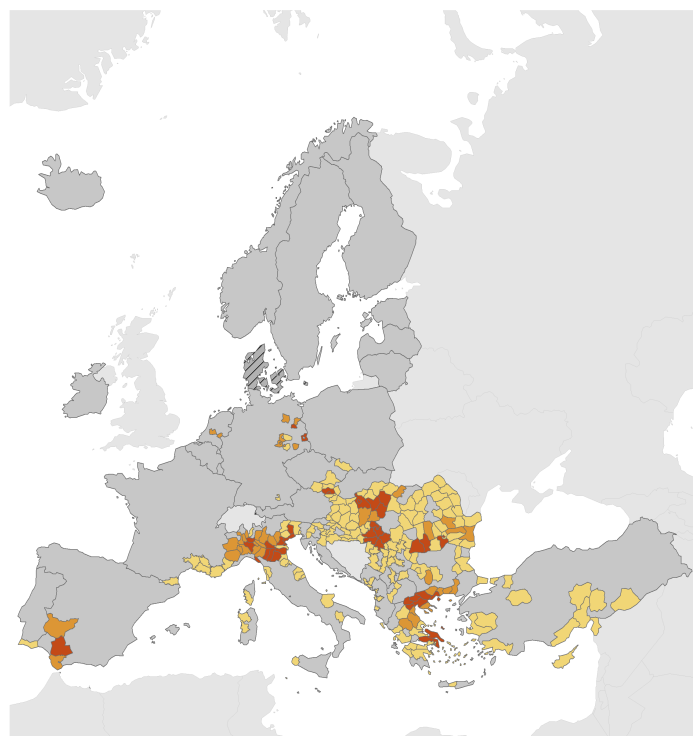


**Distribution of human West Nile virus infections in NUTS 3 or GAUL 1 regions in the EU/EEA and neighbouring countries during 2011–2021, as of 23 September 2021**

- Human infections reported, current season (2021)
- Human infections reported, 2020
- Human infections reported, 2011–2019
- No data reported
- No infections reported
- Not included

Countries not visible in the main map extent

- Malta
- Liechtenstein



Administrative boundaries: © EuroGeographics © UN-FAO © Turkstat.  
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## Marburg virus disease - Guinea - 2021

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Opening date: 11 August 2021

Latest update: 24 September 2021

## Epidemiological summary

On 16 September 2021, [Guinea](#) declared the end of the Marburg virus disease (MVD) outbreak as no cases were recorded for a period of 42 days after the last possible exposure to the case.

On 5 August 2021, the [National Health Security Agency of Guinea](#) reported a case of MVD in Tèmèssadou M'boke, Guéckédou prefecture, Nzérékoré region. MVD diagnosis was laboratory confirmed on 9 August, posthumously.

The case was a male who had onset of symptoms on 25 July 2021. He presented to the local healthcare centre on 1 August 2021 with fever, headache, fatigue, abdominal pain and gingival haemorrhage, where he received ambulatory supportive care. On 2 August he died in the community.

Over 170 high-risk contacts were identified, and they have been under monitoring for 21 days after exposure to the case.

**Sources:** [National Health Security Agency Guinea](#), [media](#), [WHO Disease Outbreak News 1](#), [WHO Disease Outbreak News 2](#)

## ECDC assessment

This was the first recorded MVD case in West Africa; this case occurred in the same area of Guinea where the Ebola virus disease outbreak in 2021 took place. In 2018, Marburg virus was first identified in West Africa in fruit bats (*Rousettus aegyptiacus*) from [Sierra Leone](#); this finding provides evidence of Marburg virus circulation in wildlife in West Africa.

The source of infection of the case remains unknown. Despite the outbreak being declared over, the occurrence of new cases cannot be excluded.

This case confirmed that MVD outbreak in humans may occur in West Africa.

## Actions

A [factsheet](#) on Ebola and Marburg virus diseases is available on the ECDC website.

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

Opening date: 20 April 2006

Latest update: 24 September 2021

## Epidemiological summary

### Americas

[Haiti](#): No new cases have been reported since the last update. In 2021, no confirmed cholera cases were reported in Haiti. According to a UNICEF report, the last confirmed cholera cases in Haiti were reported in February 2019. However, after the recent [earthquake](#) on 14 August 2021, drinking water and hygiene facilities have been compromised which increases the risk of acute watery diarrhoea and cholera.

[Dominican Republic](#): No new cases have been reported since the last update. In 2021, no cholera cases were reported in the Dominican Republic.

### Africa

[DR Congo](#): 46 new cases and two [deaths](#) have been reported since the last update. In 2021, and as of 20 September, 3 562 suspected cholera cases including 95 deaths have been reported from 76 health zones across 14 provinces of the Democratic



Republic of the Congo.

**Nigeria:** Since the previous CDTR, Nigeria has reported 35 091 cholera cases and 1 226 deaths. Between 1 January and 22 September 2021, a total of 72 910 suspected cases of cholera, 359 confirmed cases and 2 404 deaths have been reported from 27 states and Federal Capital Territory (FCT).

**Niger:** Since the previous CDTR, Niger has reported 3 608 cholera cases and 121 deaths. In 2021, and as of 10 September 2021, a total of 3 856 cases including 133 deaths (CFR = 3.4%) have been reported. The outbreak is linked to the epidemic which has been ongoing for several months in the neighbouring regions of northern Nigeria following reports of heavy rainfall, with many people living at the border. Six out of eight regions in Niger have reported cases so far.

**Burkina Faso:** Since the previous CDTR update, one new case has been reported. In 2021 and as of 31 August 2021, a total of two cholera cases were reported in the country. The new case is a truck driver of Malian nationality. He was treated and released on 31 August 2021. The first confirmed case was discharged on 22 August 2021.

**Kenya:** In 2021, and as of 8 August 2021, 38 cases (14 confirmed) have been recorded in Garissa and Turkana Counties. Garissa's outbreak was linked to the Dagahaley Refugee Camp. According to [WHO](#), both outbreaks have been controlled and the situation is currently stable.

**Cameroon:** Since the previous CDTR in March 2021, three new cases have been reported. As of 31 August 2021, a total of 13 cholera cases including one death have been reported in the north-west region of Cameroon.

**Mali:** In 2021, and as of 16 September 2021, six cases with three deaths have been recorded in the Ansongo health district, located in Mali's norther region of Gao.

No updates were available on the outbreaks reported in [Ethiopia](#), [Mozambique](#) and [Togo](#) earlier this year.

## Asia

**Bangladesh:** In 2021, and as of 17 September 2021, a total of 100 854 acute watery diarrhoea (AWD) cases and two deaths were reported in Rohingya Refugee Camp in Cox's Bazar, Bangladesh. Among these cases, 170 have been laboratory confirmed as cholera.

**India:** Since the previous CDTR update and as of 16 September 2021, a total of 1 762 AWD cases were reported in Haryana and west Bengal according to various [media](#) sources.

**Yemen:** No new cholera cases have been reported since the last update. In 2021, and as of 8 September, 15 863 suspected cholera cases and three deaths have been reported.

**Disclaimer:** Data presented in this report originate from several sources, both official public health authorities and non-official, such as the media. Data completeness depends on the availability of reports from surveillance systems and their accuracy, which

*varies between countries. All data should be interpreted with caution as there may be areas of under-reporting and figures may not reflect the actual epidemiological situation.*

## ECDC assessment

Cholera cases continue to be reported in eastern Africa, the Horn of Africa and the Gulf of Aden. Cholera outbreaks have also been reported in the western and southern part of Africa and in some areas of Asia. Despite the high number of cholera outbreaks reported worldwide, few cases are reported each year among returning EU/EEA travellers. The risk of cholera infection in travellers visiting countries with ongoing outbreaks remains low, although sporadic infections among EU/EEA travellers are possible. In 2018, 26 cases were reported in EU/EEA Member States, while 17 and 23 cases were reported in 2017 and 2016, respectively. All cases had travel history to cholera-affected areas. The risk of further transmission of *Vibrio cholerae* within the EU/EEA is very low.

According to WHO, vaccination should be considered for travellers at higher risk of infection, such as emergency and relief workers who are likely to be directly exposed. Vaccination is generally not recommended for other travellers.

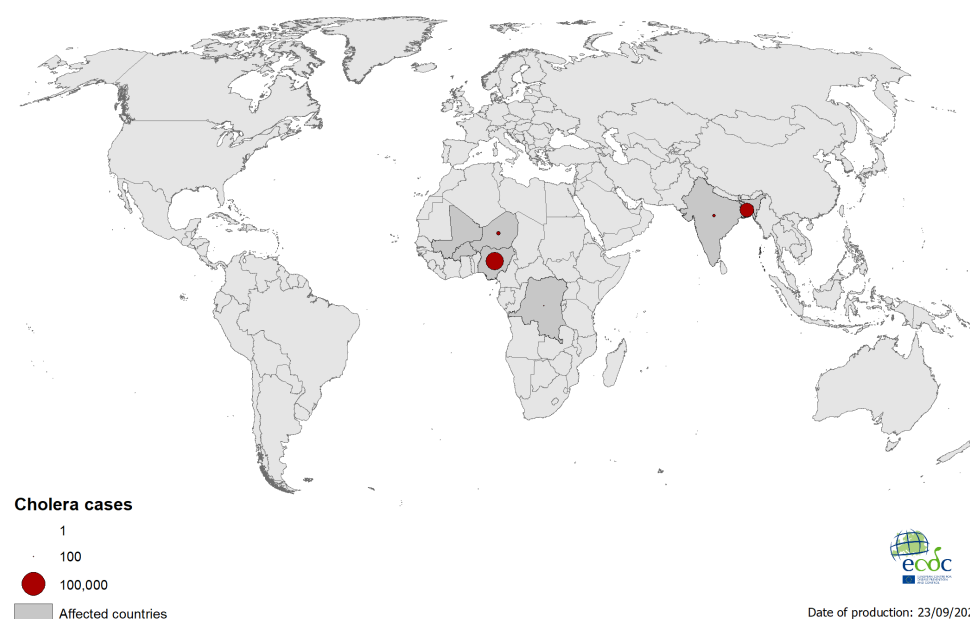
Travellers who plan to visit cholera-endemic areas should seek advice from travel health clinics ahead of their travel to assess their personal risk and be informed on precautionary sanitary and hygiene measures to prevent infection. These include drinking bottled water or water treated with chlorine, carefully washing fruit and vegetables with bottled or chlorinated water before consumption, regularly washing hands with soap, eating thoroughly cooked food, and avoiding the consumption of raw seafood products.

## Actions

ECDC monitors cholera outbreaks globally through its epidemic intelligence activities in order to identify significant changes in epidemiology and to inform public health authorities. Reports are published on a monthly basis. The worldwide overview of cholera outbreaks is available on [ECDC's website](#).

## Geographical distribution of cholera cases reported worldwide from July to September 2021

Source: ECDC



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