

I. Executive summary

EU Threats

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

Opening date: 4 June 2021

Latest update: 30 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 23 and 29 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 infection. EU-neighbouring countries reported no human cases of WNV infection.

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

Opening date: 7 January 2020

Latest update: 30 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 28 2021 and as of week 29 2021, 3 701 847 new cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) and 69 400 new deaths have been reported.

Since 31 December 2019 and as of week 29 2021, 194 860 770 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 168 372 deaths.

In the EU/EEA, 34 435 890 cases have been reported, including 743 712 deaths.

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

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

Opening date: 2 July 2021

Latest update: 30 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 29 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, Finland), Gulf of Finland (Finland, Estonia), West Estonian archipelago (Estonia), and regions of North, Central and Southern Denmark, where it was very-low-to-low. In addition, in Stockholm, Södermanland and Östergötland counties (Sweden) and Elblaski (Poland) 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 Great and Little Belt straits (Denmark), Schleswig-Holstein (Germany), Gulf of Bothnia (Sweden, Finland), Helsinki-Uusimaa (Finland) and Harju county (Estonia), where the risk is considered to be very-low-to-low. In addition, in Elblaski (Poland), West Estonian archipelago and Pärnu (Estonia) the risk is considered to be very high.

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

Non EU Threats

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

Opening date: 21 July 2021

The Olympic Games in Tokyo 2020 (OG) will 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 23 July to 29 July 2021, several signals were detected during the daily screening of the Olympic Games in Tokyo 2020 (2021). Since the previous report, 107 new SARS-CoV-2-positive cases related to the Olympic Games have been reported.

Chikungunya and dengue – Multi-country (World) – Monitoring global outbreaks

Opening date: 27 January 2017

Latest update: 30 July 2021

Chikungunya virus disease and dengue are vector-borne diseases transmitted by mosquitoes. Outbreaks of dengue and chikungunya virus diseases have been reported globally (in the Americas, Asia, Africa, Oceania, and Europe). Chikungunya virus disease and dengue are not endemic in Europe, despite autochthonous outbreaks having been reported during the summer months in previous years.

→Update of the week

Chikungunya virus disease: In 2021, 85 304 cases have been reported, the majority from Brazil, India, Belize, Malaysia, and Peru. Since a previous CDTR published on 2 July 2021, 20 712 new cases have been reported, the majority of which are from Brazil.

Dengue: In 2021, 953 476 cases have been reported, the majority from Brazil, Vietnam, Peru, The Philippines, and Réunion (France). Since a previous CDTR published on 2 July 2021, 141 616 new cases have been reported, the majority of which are from Brazil, Philippines, Vietnam, Peru and Mexico.

II. Detailed reports

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

Opening date: 4 June 2021

Latest update: 30 July 2021

Epidemiological summary

Between 23 and 29 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 infection. EU-neighbouring countries reported no human cases of WNV infection.

Since the beginning of the 2021 transmission season, and as of 29 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, a single human case of WNV infection has been reported by the countries that provide information. The case was reported by La Spezia in Italy, and it was the first time that this province has 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 29 July

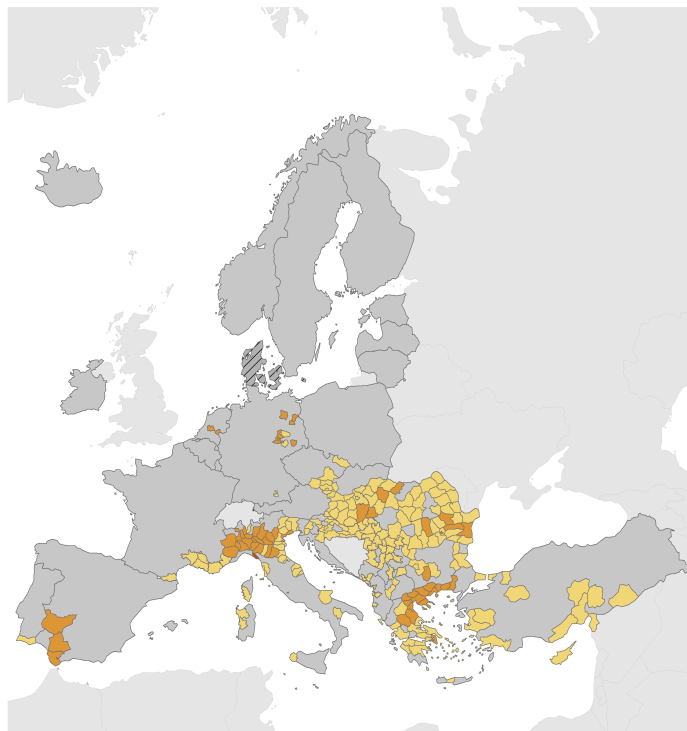
ECDC


Distribution of human West Nile virus infections in NUTS 3 or GAUL 1 regions in the EU/EEA and EU-neighbouring countries during 2011–2021 as of 29 July 2021

- Human infections reported current season (2021)
- Human infections reported in 2020
- Human infections reported during 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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Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 29 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 29 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.
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COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2019 - 2021

Opening date: 7 January 2020

Latest update: 30 July 2021

5/15

Epidemiological summary

Summary: Since 31 December 2019 and as of week 29 2021, 194 860 770 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 168 372 deaths.

Cases have been reported from:

Africa: 6 484 915 cases; the five countries reporting most cases are South Africa (2 377 823), Morocco (579 272), Tunisia (575 002), Egypt (284 024) and Ethiopia (278 543).

Asia: 53 966 605 cases; the five countries reporting most cases are India (31 411 262), Iran (3 691 432), Indonesia (3 166 505), Iraq (1 552 648) and Philippines (1 548 755).

America: 76 337 092 cases; the five countries reporting most cases are United States (34 444 770), Brazil (19 688 663), Argentina (4 859 170), Colombia (4 736 349) and Mexico (2 754 438).

Europe: 57 968 614 cases; the five countries reporting most cases are Russia (6 149 780), France (5 993 937), United Kingdom (5 697 912), Turkey (5 587 378) and Spain (4 342 054).

Oceania: 102 839 cases; the five countries reporting most cases are Australia (32 917), Fiji (21 361), French Polynesia (19 234), Papua New Guinea (17 524) and Guam (8 501).

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

Deaths have been reported from:

Africa: 164 800 deaths; the five countries reporting most deaths are South Africa (69 775), Tunisia (18 968), Egypt (16 487), Morocco (9 589) and Ethiopia (4 369).

Asia: 807 267 deaths; the five countries reporting most deaths are India (420 967), Iran (88 800), Indonesia (83 279), Philippines (27 244) and Pakistan (23 048).

America: 1 999 145 deaths; the five countries reporting most deaths are United States (610 892), Brazil (549 924), Mexico (238 595), Peru (195 973) and Colombia (119 182).

Europe: 1 195 560 deaths; the five countries reporting most deaths are Russia (154 601), United Kingdom (129 158), Italy (127 949), France (111 644) and Germany (91 527).

Oceania: 1 594 deaths; the five countries reporting most deaths are Australia (918), Papua New Guinea (192), Fiji (161), French Polynesia (145) and Guam (143).

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

EU/EEA:

As of week 29 2021, 34 435 890 cases have been reported in the EU/EEA: France (5 993 937), Spain (4 342 054), Italy (4 317 415), Germany (3 756 856), Poland (2 882 220), Netherlands (1 845 038), Czechia (1 672 409), Belgium (1 118 035), Sweden (1 097 253), Romania (1 082 376), Portugal (954 669), Hungary (809 262), Slovakia (779 869), Austria (651 873), Greece (475 919), Bulgaria (423 686), Croatia (362 648), Denmark (312 292), Ireland (292 996), Lithuania (281 284), Slovenia (258 779), Latvia (138 481), Norway (135 767), Estonia (132 524), Finland (102 972), Cyprus (97 718), Luxembourg (73 412), Malta (33 762), Iceland (7 304) and Liechtenstein (3 080).

As of week 29 2021, 743 712 deaths have been reported in the EU/EEA: Italy (127 949), France (111 644), Germany (91 527), Spain (81 268), Poland (75 242), Romania (34 270), Czechia (30 357), Hungary (30 020), Belgium (25 228), Bulgaria (18 194), Netherlands (17 779), Portugal (17 301), Sweden (14 655), Greece (12 898), Slovakia (12 534), Austria (10 524), Croatia (8 247), Ireland (5 026), Slovenia (4 761), Lithuania (4 411), Latvia (2 550), Denmark (2 543), Estonia (1 271), Finland (980), Luxembourg (821), Norway (799), Malta (421), Cyprus (403), Liechtenstein (59) and Iceland (30).

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

In week 29 2021, overall, the reported weekly cases increased by 67% compared to the previous week. Five of the 29 EU/EEA countries (Latvia, Luxembourg, Norway, Slovakia and Slovenia) reported a decrease in the weekly cases. The highest weekly increase was observed in Iceland, Austria, France, Italy and Malta. The countries with the highest 14-day notification rate were: Cyprus (1 484), Netherlands (670), Spain (624) and Portugal (408).

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.

ECDC assessment

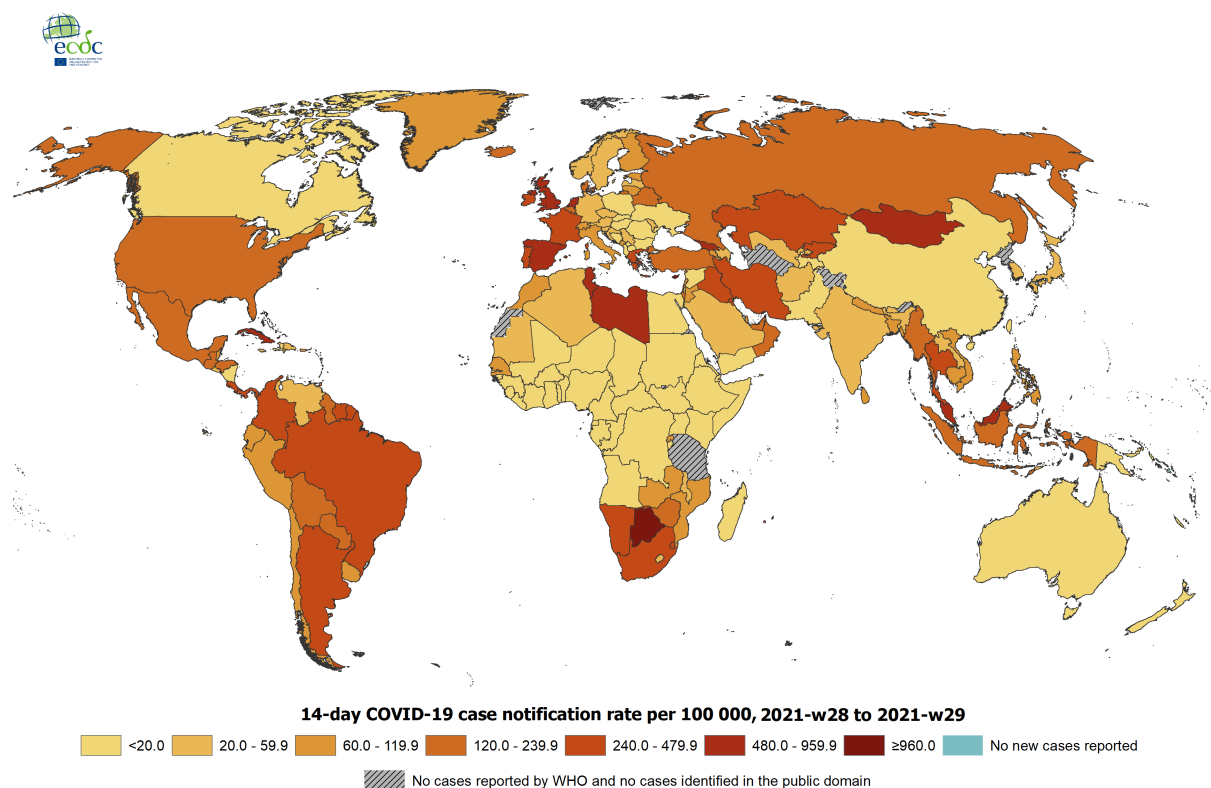
For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

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-w28 to 2021-w29

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: 28/07/2021

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

Opening date: 2 July 2021

Latest update: 30 July 2021

Epidemiological summary

As of 29 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, Finland), Gulf of Finland (Finland, Estonia), West Estonian archipelago (Estonia), and regions of North, Central and Southern Denmark, where it was very-low-to-low. In addition, in Stockholm, Södermanland and Östergötland counties (Sweden) and Elblaski (Poland) 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 Great and Little Belt straits (Denmark), Schleswig-Holstein (Germany), Gulf of Bothnia (Sweden, Finland), Helsinki-Uusimaa (Finland) and Harju county (Estonia), where the risk is considered to be very-low-to-low. In addition, in Elblaski (Poland), West Estonian archipelago and Pärnu (Estonia) the risk is considered to be very high.

Outside of EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very high in Kaliningrad and medium-to-high in Saint Petersburg (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 30 July, [Sweden](#) has reported 10 cases of vibriosis.

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 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 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.

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

Opening date: 21 July 2021

Epidemiological summary

From 23 July to 29 July 2021, several signals were detected during the daily screening of the Olympic Games in Tokyo 2020 (2021). Since the previous report, 107 new SARS-CoV-2-positive cases related to the Olympic Games have been reported.

COVID-19 related news

Summary

8/15

As of 29 July 2021, a total of 198 SARS-CoV-2-positive cases have been detected among the Tokyo Olympic 2020 (2021) participants, according to the [Tokyo 2020 Organising Committee](#). These cases were reported among Tokyo 2020 contractors (95), games-concerned personnel (61), athletes (20), media staff (11), Tokyo 2020 employees (4) and volunteers (2). [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), [United States of America](#) (4), the [Netherlands](#) (2), [South Africa](#) (2), [United Kingdom](#) (1) and [Chile](#) (1).

[Media](#) quoting the organising Committee of Tokyo Olympics reported that the first post-competition SARS-CoV-2 case was reported on 25 July 2021. According to the source, a Dutch athlete was confirmed as a positive COVID-19 case after competing on Friday.

Japanese [media](#) quoting local health authorities reported that, as of 29 July 2021, a total of three Olympics 2020 participants from overseas have been hospitalised with SARS-CoV-2. None of the cases are in serious condition and one hospitalised case has already been discharged.

According to [local media](#), Japan is facing the most serious situation since the pandemic began. As of 28 July 2021, Japan's daily total SARS-CoV-2 cases topped [9 000](#) for the first time. Local [sources](#) also reported that the Japanese government is likely to declare a state of emergency to three additional prefectures (Kanagawa, Chiba and Saitama) neighbouring Tokyo, starting from this Friday.

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.

For the host country, Japan, as of 29 July 2021, around [27.2%](#) of the total population is fully vaccinated against COVID-19.

Other events

No other news.

ECDC assessment

Where mass gathering events, such as the Olympic Games in Tokyo 2020, 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 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.

Chikungunya and dengue – Multi-country (World) – Monitoring global outbreaks

Opening date: 27 January 2017

Latest update: 30 July 2021

Epidemiological summary

9/15

Europe

Chikungunya virus disease: No autochthonous cases of chikungunya virus disease have been detected in Europe in 2021.

Dengue:

France: In 2021 and as of 29 July, one confirmed case has been reported. The case was detected in the Var department.

Americas and the Caribbean

Chikungunya virus disease:

Bolivia: In 2021 and as of 10 July, 257 cases have been reported, including 30 confirmed cases. This is an increase of 17 cases since 12 June 2021.

Brazil: In 2021 and as of 19 June, 68 330 cases have been reported, including 27 353 confirmed cases and 5 deaths. This is an increase of 20 286 cases and 2 deaths since 22 May 2021.

Colombia: In 2021 and as of 17 July, 30 cases have been reported. This is an increase of 13 cases since 12 June 2021.

Costa Rica: In 2021 and as of 3 July, 18 cases have been reported. This is an increase of 4 cases since 12 June 2021.

El Salvador: In 2021 and as of 10 July, 58 cases have been reported. This is an increase of 11 cases since 5 June 2021.

Mexico: In 2021 and as of 10 July, 3 confirmed cases have been reported.

Paraguay: In 2021 and as of 17 July, 87 cases have been reported. This is an increase of 8 cases since 19 June 2021.

Peru: In 2021 and as of 17 July, 567 cases have been reported, including 267 confirmed cases. This is an increase of 152 cases since 29 May 2021.

Saint Lucia: In 2021 and as of 10 July, confirmed case has been reported.

Venezuela: In 2021 and as of 17 July, 25 suspected cases have been reported. This is an increase of 5 cases since 12 June 2021.

No updates are available for Belize, Guatemala, and Nicaragua.

Dengue:

In 2021, and as of 17 July, the Pan American Health Organization (PAHO) reported 811 463 dengue cases, including 337 176 confirmed cases and 202 associated deaths, in the Americas region. The five countries reporting most cases are: Brazil (671 732), Peru (33 960), Nicaragua (20 365), Colombia (17 605), and Ecuador (14 634). This is an increase of 136 142 cases and 45 deaths since 12 June 2021.

All four dengue virus serotypes (DENV 1, DENV 2, DENV 3, and DENV 4) are currently circulating in the Region of the Americas, which increases the risk of severe cases. The figures for each country of the Americas region can be found on the [PAHO Health Information Platform](#).

No updates are available for Saint-Martin (France) and Saint-Barthelemy (France).

Asia

Chikungunya virus disease:

Malaysia: In 2021 and as of 26 June, 724 cases have been reported. This is an increase of 65 cases since 19 June 2021.

Thailand: In 2021 and as of 11 July, 390 cases have been reported. This is an increase of 43 cases since 21 June 2021.

No updates are available for Cambodia and India.

Dengue:

Bangladesh: In 2021 and as of 7 July, according to media quoting health authorities, 565 cases have been reported. This is an increase of 261 cases since 26 June 2021.

Cambodia: In 2021 and as of 26 June, 790 cases, including one death, have been reported. This is an increase of 105 cases since 5 June 2021.

China: In 2021 and as of 31 May, 16 cases have been reported. This is an increase of 5 cases since 30 April 2021.

Lao PDR: In 2021 and as of 3 July, 450 cases have been reported. This is an increase of 134 cases since 5 June 2021.

Malaysia: In 2021 and as of 3 July 2021, 14 081 cases have been reported, including 9 deaths. This is an increase of 1 893 cases and one death since 12 June 2021.

Nepal: In 2021 and as of 25 July 2021, 80 cases have been reported. This is an increase of 24 cases since 19 June 2021.

Pakistan: In 2021 and as of 10 July, 2 129 cases have been reported. This is an increase of 322 cases since 19 June 2021.

The Philippines: In 2021 and as of 26 June, 31 321 cases have been reported, including 112 deaths. This is an increase of 9 843 cases and 32 deaths since 17 April 2021.

Singapore: In 2021 and as of 26 July, 3 568 cases have been reported. This is an increase of 293 cases since 26 June 2021.

Sri Lanka: In 2021 and as of 26 July, 10 371 cases have been reported. This is an increase of 1 472 cases since 25 June 2021.

Thailand: In 2021 and as of 19 July, 3 921 cases have been reported, including one death. This is an increase of 477 cases and one death since 28 June 2021.

Vietnam: In 2021 and as of 4 July, 37 420 cases have been reported, including nine deaths. This is an increase of 9 343 cases and 4 deaths since 30 May 2021.

No updates are available for India and Myanmar .

Africa

Chikungunya virus disease:

Democratic Republic of Congo: In 2021 and as of 28 March, 104 cases have been reported.

Dengue:

Angola: In 2021 and as of 10 June, 38 confirmed cases have been reported.

Kenya: In 2021 and as of 25 June, 867 cases have been reported, including 36 confirmed cases and 2 deaths. This is an increase of 314 cases and 2 deaths since 30 April 2021.

Réunion (France): In 2021 and as of 21 July, 28 635 confirmed cases have been reported, including 15 deaths. This is an increase of 3 799 cases and one death since 22 June 2021. ECDC is monitoring dengue in the Réunion in a dedicated threat which was included in the CDTR report from 9 July 2021.

No updates are available for Ethiopia, Mayotte (France), Mauritius, Mauritania and Senegal.

Australia and the Pacific

Chikungunya virus disease:

No cases of chikungunya virus disease have been reported in Australia and the Pacific in 2021.

Dengue:

Australia: In 2021 and as of 14 July, one case of dengue has been reported.

Cook Islands: In 2021 and as of 11 July, a total of 217 probable and confirmed cases have been reported. This is an increase of 11 cases since 14 June 2021. On 2 February 2021, an outbreak was declared by the Cook Islands Ministry of Health.

French Polynesia: In 2021 and as of 4 July 2021, 14 dengue cases have been reported, including one confirmed case. This is an increase of 4 cases since 9 May 2021.

New Caledonia (France): In 2021 and as of 22 July, 113 cases, including 91 confirmed cases, have been reported. This is an increase of one case since 29 June 2021.

Wallis and Futuna: In 2021 and as of 11 July, 63 confirmed cases have been reported. This is an increase of 37 cases since 4 April 2021.

No updates are available for the Federated States of Micronesia, the Republic of the Marshall Islands and Fiji.

N.B: The data presented in this report originate from several sources, both official public health authorities and non-official sources such as news 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; reported figures may not reflect the actual epidemiological situation. Please note that case definitions may differ between countries and comparisons should be made with caution.

ECDC assessment

Chikungunya virus disease and dengue affect most countries in the tropics and sub-tropics. EU/EEA citizens travelling to the affected areas should apply personal protective measures against mosquito bites.

The likelihood for onward transmission of dengue and chikungunya virus disease 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 chikungunya virus disease and dengue in mainland EU/EEA have occurred between July and November.

More information is available on ECDC's dedicated webpage on autochthonous transmission of chikungunya and dengue virus in the EU/EEA, as well as on ECDC's dengue and chikungunya factsheets.

Actions

ECDC monitors these threats through its epidemic intelligence activities and reports on a monthly basis. A summary of the worldwide overview of dengue and chikungunya virus disease is available on ECDC's website.

Geographical distribution of chikungunya virus disease cases reported worldwide, May to July 2021

ECDC



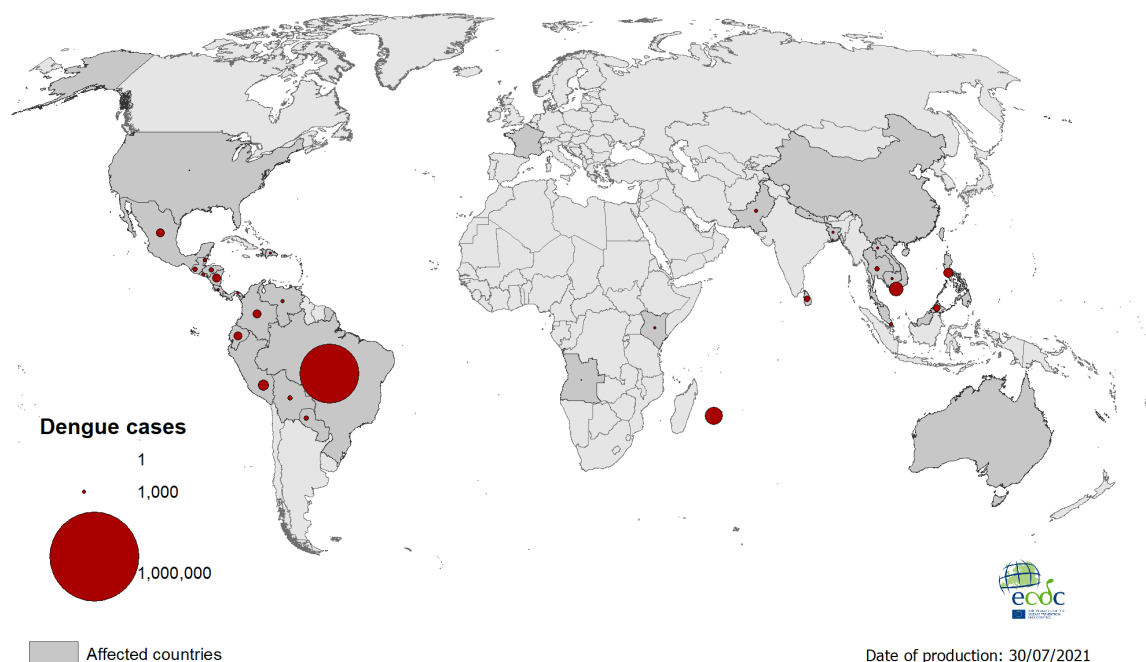
Geographical distribution of chikungunya virus disease cases reported worldwide, January to July 2021

ECDC



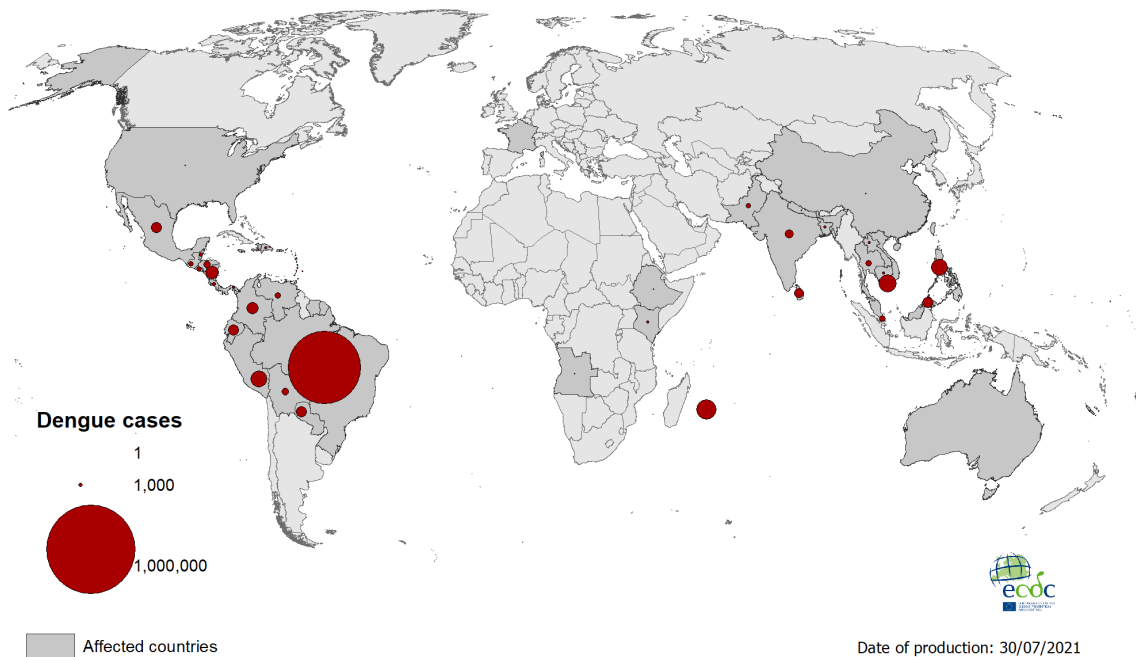
Geographical distribution of dengue cases reported worldwide, May to July 2021

Source: ECDC



Geographical distribution of dengue cases reported worldwide, January to July 2021

Source: ECDC



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