



COMMUNICABLE DISEASE THREATS REPORT

## CDTR Week 40, 3-9 October 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: 8 October 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 38 2021 and as of week 39 2021, 3 130 908 new cases of COVID-19 and 56 424 new deaths have been reported worldwide.

Since 31 December 2019 and as of week 39 2021, 235 611 921 cases of COVID-19 have been reported worldwide, including 4 809 532 deaths.

In the EU/EEA, as of week 39 2021, 38 546 503 cases have been reported, including 772 934 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: 8 October 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.

 $\rightarrow$ Update of the week

Between 1 and 7 October 2021, European Union (EU) and European Economic Area (EEA) countries reported nine human cases of West Nile virus (WNV) infection and no deaths related to WNV infections. Cases were reported by Italy (8) and Hungary (1). EU-neighbouring countries reported two human cases of WNV infection in Serbia and no deaths related to WNV infections.

## Non EU Threats

## New! Acute Flaccid Paralysis (poliovirus type 2) case – Ukraine– 2021

Opening date: 7 October 2021

Latest update: 8 October 2021

The Ukraine Ministry of Health reports a case of acute flaccid paralysis (AFP), caused by poliovirus (PV) type 2 (PV2), in an unvaccinated 18-month-old girl from Rivne oblast, Ukraine.

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

Opening date: 24 September 2012

Latest update: 8 October 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 3 September, and as of 4 October 2021, no new MERS-CoV cases have been reported. However, the most recently confirmed case from Saudi Arabia died.

## **II. Detailed reports**

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

Opening date: 7 January 2020 Latest update: 8 October 2021

## Epidemiological summary

Since 31 December 2019 and as of week 39 2021, 235 611 921 cases of COVID-19 have been reported worldwide, including 4 809 532 deaths.

#### Cases have been reported from:

Africa: 8 370 243 cases; the five countries reporting most cases are South Africa (2 906 422), Morocco (935 332), Tunisia (708 382), Ethiopia (348 669) and Libya (342 558).

**Asia:** 67 650 204 cases; the five countries reporting most cases are India (33 834 702), Iran (5 611 700), Indonesia (4 219 284), Philippines (2 593 399) and Malaysia (2 277 565).

**America:** 90 642 164 cases; the five countries reporting most cases are United States (43 683 048), Brazil (21 468 121), Argentina (5 260 719), Colombia (4 963 243) and Mexico (3 684 242).

**Europe:** 68 691 602 cases; the five countries reporting most cases are United Kingdom (7 900 680), Russia (7 612 317), Turkey (7 210 916), France (7 027 059) and Spain (4 965 399).

**Oceania:** 257 003 cases; the five countries reporting most cases are Australia (111 392), Fiji (51 202), French Polynesia (45 181), Papua New Guinea (20 672) and Guam (15 362).

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

#### Deaths have been reported from:

Africa: 212 068 deaths; the five countries reporting most deaths are South Africa (87 780), Tunisia (24 939), Egypt (17 436), Morocco (14 339) and Algeria (5 822).

Asia: 1 046 460 deaths; the five countries reporting most deaths are India (448 997), Indonesia (142 173), Iran (120 880), Philippines (38 768) and Pakistan (27 893).

America: 2 229 000 deaths; the five countries reporting most deaths are United States (703 278), Brazil (597 948), Mexico (279 106), Peru (199 502) and Colombia (126 425).

**Europe:** 1 318 779 deaths; the five countries reporting most deaths are Russia (210 801), United Kingdom (136 953), Italy (131 031), France (116 798) and Germany (93 793).

**Oceania:** 3 219 deaths; the five countries reporting most deaths are Australia (1 334), Fiji (633), French Polynesia (623), Papua New Guinea (234) and Guam (198).

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

#### EU/EEA:

As of week 2021-39, 38 546 503 cases have been reported in the EU/EEA: France (7 027 059), Spain (4 965 399), Italy (4 682 034), Germany (4 255 388), Poland (2 911 549), Netherlands (2 007 976), Czechia (1 694 107), Romania (1 274 119), Belgium (1 252 144), Sweden (1 154 346), Portugal (1 071 307), Hungary (824 876), Slovakia (809 284), Austria (744 882), Greece (661 308), Bulgaria (505 994), Croatia (408 918), Ireland (393 626), Denmark (360 411), Lithuania (340 080), Slovenia (297 062), Norway (190 530), Latvia (161 641), Estonia (158 895), Finland (142 114), Cyprus (120 498), Luxembourg (78 326), Malta (37 221), Iceland (11 958) and Liechtenstein (3 451).

As of week 2021-39, 772 934 deaths have been reported in the EU/EEA: Italy (131 031), France (116 798), Germany (93 793), Spain (86 527), Poland (75 695), Romania (37 677), Czechia (30 478), Hungary (30 230), Belgium (25 632), Bulgaria (21 038), Netherlands (18 182), Portugal (18 000), Greece (14 920), Sweden (14 876), Slovakia (12 676), Austria (10 784), Croatia (8 685), Ireland (5 249), Lithuania (5 116), Slovenia (4 899), Latvia (2 741), Denmark (2 664), Estonia (1 363), Finland (1 078), Norway (861), Luxembourg (835), Cyprus (554), Malta (459), Liechtenstein (60) and Iceland (33).

The latest daily situation update for the EU/EEA is available <u>here</u>.

In week 39 2021, in the EU/EEA overall, the reported weekly cases increased by 9.5% compared to the previous week. The highest weekly increases in descending order were observed in Latvia, Romania, Poland, Czechia and Estonia. The countries with the highest 14-day notification rates per 100 000 population are: Lithuania (796), Estonia (659), Romania (632), Latvia (581) and Slovenia (572). Fourteen of the 29 EU/EEA countries (Belgium, Cyprus, Finland, France, Iceland, Ireland, Italy, Liechtenstein, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden) reported a decrease in weekly cases.

At the end of week 38 (week ending Sunday 26 September 2021), the overall epidemiological situation in EU/EEA was characterised by a high but decreasing overall case notification rate and a low death rate which has been very slowly increasing

over time. Case notification rates are forecast to stabilise over the next two weeks, while the very slow increase in death rate will continue. Hospitalisations and ICU admissions are forecast to slowly increase. Case notification rates are currently highest among children below 15 years of age (although the trend is decreasing in this age group as well), following the rapid decline in cases among those aged 15 to 24 years. The picture varies considerably among countries, with increasing trends in case notification rates mainly reported in the eastern part of the EU/EEA, particularly in countries with lower rates of vaccination uptake. Several countries report increases in severity indicators including cases in older age groups, hospitalisation and mortality.

The overall COVID-19 case notification rate for the EU/EEA was 146.9 per 100 000 population (157.0 the previous week). This rate has been decreasing for four weeks. The 14-day COVID-19 death rate (17.1 deaths per million population, compared with 15.9 deaths the previous week) has been stable for three weeks. Of 29 countries with data on hospital/ICU admissions or occupancy up to week 38, eight 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 38, the epidemiological situation in the EU/EEA overall was categorised as of low concern (the same as the previous week). Four countries were categorised as of very high concern, two countries as of high concern, seven countries as of moderate concern, 13 countries as of low concern and four countries as of very low concern. Compared with the previous week, three countries (Estonia, Finland and Latvia) moved to a higher category, nine countries (Austria, Belgium, Denmark, Germany, Italy, Liechtenstein, Malta, Slovenia and Spain) moved to a lower category and 18 countries stayed in the same category.

By the end of week 38, the pooled cumulative uptake of at least one vaccine dose in the EU/EEA was 79.2% (range: 23.9–97.8%; 30 countries reporting) among adults aged 18 years and older. Cumulative uptake of full vaccination was 73.4% (country range: 22.6–94.8%) among adults aged 18 years and older.

The estimated distribution (median and range of values from 18 countries for weeks 36 to 37, 6 September to 19 September 2021) of variants of concern (VOC) was 99.6% (65.6-100.0%) for B.1.617.2 (Delta), 0.0% (0.0-0.3%) for P.1 (Gamma) and 0.0% (0.0-0.2%) for B.1.351 (Beta). The distribution was 0.0% (0.0-0.7%) for B.1.1.7 (Alpha), which was downgraded from the list of VOCs on 3 September 2021.

For the latest COVID-19 country overviews, please see the <u>dedicated webpage</u>.

#### 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 <u>WHO</u> declared the COVID-19 outbreak a pandemic. The <u>third</u>, <u>fourth</u>, <u>fifth</u>, <u>sixth</u>, <u>seventh</u> and <u>eight</u> 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

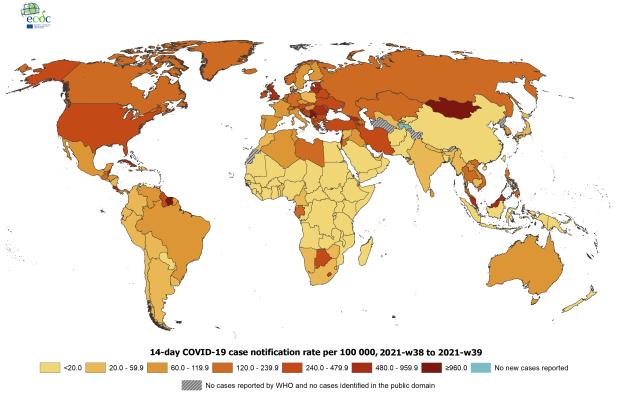
For the most recent risk assessment, please visit ECDC's dedicated webpage.

#### Actions

**Actions:** On 30 September 2021, ECDC published the <u>rapid risk assessment</u>, 'Assessing SARS-CoV-2 circulation, variants of concern, non-pharmaceutical interventions and vaccine rollout in the EU/EEA'. A <u>dashboard</u> with the latest updates is available on ECDC's <u>website</u>.

# Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, 2021-w38 to 2021-w39

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: 06/10/2021

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

Opening date: 4 June 2021

Latest update: 8 October 2021

## Epidemiological summary

Between 1 and 7 October 2021, European Union (EU) and European Economic Area (EEA) countries reported nine human cases of West Nile virus (WNV) infection and no deaths related to WNV infections. Cases were reported by Italy (8) and Hungary (1). EU-neighbouring countries reported two human cases of WNV infection in Serbia and no deaths related to WNV infections.

Since the beginning of the 2021 transmission season and as of 7 October 2021, EU/EEA countries have reported 132 human cases of WNV infection in Greece (54), Italy (52), Hungary (7), Romania (7), Spain (6), Austria (3) and Germany (3) and 9 deaths in Greece (7), Spain (1) and Romania (1). EU-neighbouring countries have reported 17 human cases of WNV infection in Serbia (17) and three deaths in Serbia (3).

During the current transmission season, within the reporting countries, human cases of WNV infection were reported from 45 different NUTS 3 or GAUL 1 regions, of which the following regions reported human cases of WNV infection for the first time:

ECDC and ADIS

Spree-Neiße in Germany and La Spezia in Italy.

Since the beginning of the 2021 transmission season, 23 outbreaks among equids and 6 outbreaks among birds have been reported by EU/EEA countries. Outbreaks among equids have been reported by Germany (11), Spain (9), Hungary (2) and France (1). Outbreaks among birds have been reported by Spain (5) and Slovenia (1).

#### ECDC assessment

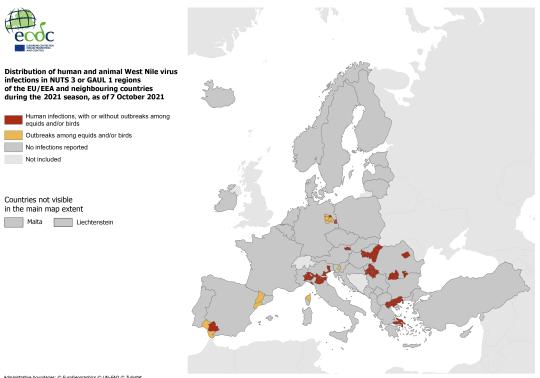
Human WNV infections have been reported in seven EU Member States where seasonal circulation of the virus has been previously reported. According to the data from previous years and the epidemiology of WNV infections, the number of new infections are expected to decrease in this period of the year. However, further cases will very likely be reported to ECDC in the coming weeks due to reporting delays.

In accordance with <u>Commission Directive 2014/110/EU</u>, 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.

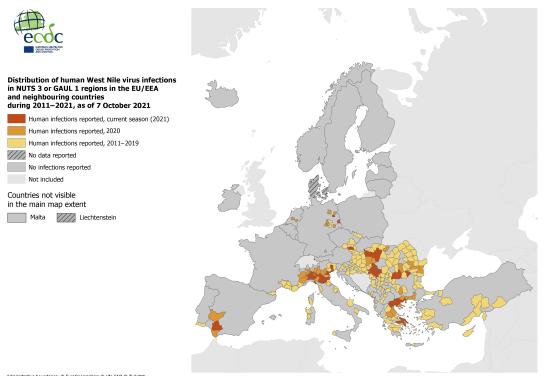
# Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 7 October



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 8 October 2021

ECDC

#### Distribution of human West Nile virus infections by affected areas as of 7 October



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 8 October 2021

#### New! Acute Flaccid Paralysis (poliovirus type 2) case – Ukraine– 2021

Opening date: 7 October 2021 Latest update: 8 October 2021

### Epidemiological summary

The Ukraine Ministry of Health reports a case of acute flaccid paralysis (AFP), caused by poliovirus (PV) type 2 (PV2), in an unvaccinated 18-month-old girl from Rivne oblast, Ukraine.

The AFP case had symptom onset on 1 September 2021, with hospitalisation on 3 September, due to paresis of the lower extremities.

Parents had refused vaccination due to religious beliefs. Ukraine requires children to receive six vaccine doses (at two, four, six, and 18 months, then at six and 14 years). The Ukraine Ministry of Health states that vaccine coverage is insufficient (53.0% at 18 months for polio-3 in Ukraine, and 48.9% in Rivne oblast).

The regional centre for disease control and prevention and Ministry of Health are performing contact tracing, laboratory tests of their samples, and an epidemiological investigation.

According to media sources, further investigations enabled the identification of six additional positive samples among family members from the primary case.

#### Source: Ministry of Health / Media

#### 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 <u>European Regional Commission for Certification of Poliomyelitis Eradication</u>, one EU/EEA country (Romania) and two neighbouring countries (Bosnia and Herzegovina, and Ukraine) remain at high risk of a sustained polio outbreak following importation of WPV or emergence of circulating VDPV, due primarily to suboptimal population immunity. The same report highlights that Ukraine had inadequate responses to outbreaks of other vaccine-preventable diseases in recent

years. It lists an additional 15 EU/EEA countries that are at intermediate risk of sustained polio outbreaks.

To limit the risk of reintroduction and sustained transmission of WPV and VDPV 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.

Ukraine and EU/EEA Member States who conduct environmental surveillance for polioviruses, in particular the countries bordering Ukraine, should consider increasing the sampling frequency and geographical area under surveillance until the outbreak has been brought under control.

<u>ECDC</u> 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 | ECDC factsheet

#### **Actions**

ECDC will monitor the ongoing situation through its epidemic intelligence activities and will report again should epidemiological updates become available.

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

Opening date: 24 September 2012

Latest update: 8 October 2021

#### Epidemiological summary

From 1 January 2021 to 4 October 2021, 13 MERS-CoV cases have been reported in Saudi Arabia (12) and the United Arab Emirates (1), including six deaths. In Saudi Arabia, all were primary cases, of whom nine reported contact with camels. These 12 cases were reported in Riyadh (7), Makkah (3), and the Eastern Province (2).

Since April 2012, and as of 4 October 2021, 2 594 cases of MERS-CoV, including 942 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 <u>rapid risk assessment</u> published on 29 August 2018, which also provides details on the last case reported in Europe.

ECDC published a technical report, <u>Health emergency preparedness for imported cases of high-consequence infectious diseases</u>, 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 <u>Risk assessment guidelines for infectious diseases transmitted on aircraft (RAGIDA) – Middle East</u> <u>Respiratory Syndrome Coronavirus (MERS-CoV)</u> on 22 January 2020.

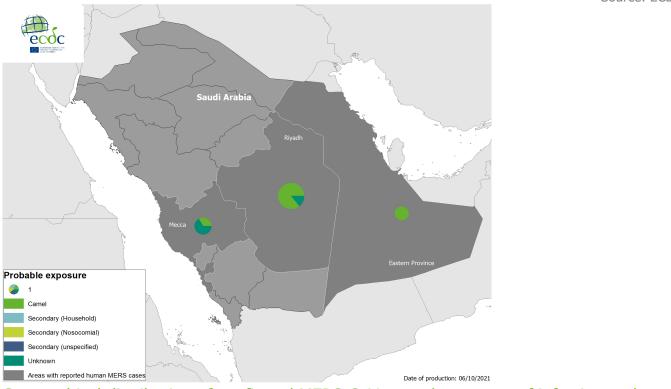
### Actions

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

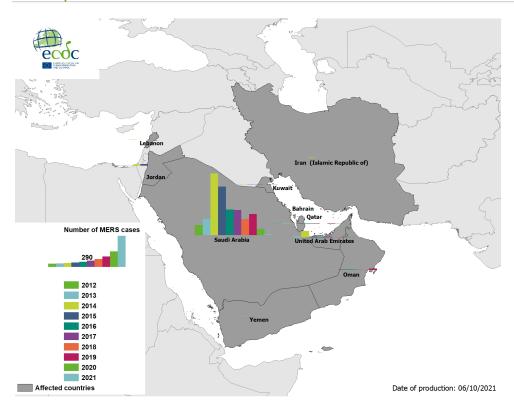
## Geographical distribution of confirmed MERS-CoV cases by probable region of infection and exposure, from 1 January to 4 October 2021

Source: ECDC

Source: ECDC



Geographical distribution of confirmed MERS-CoV cases by country of infection and year, from April 2012 to 4 October 2021



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