



COMMUNICABLE DISEASE THREATS REPORT

CDTR

Week 47, 15-21 November 2020

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) – 2020

Opening date: 7 January 2020 Latest update: 20 November 2020

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 the 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 13 November 2020 and as of 20 November 2020, 4 209 503 new cases of coronavirus disease (COVID-19) (in accordance with the applied case definition in the countries) have been reported, including 67 773 new deaths.

Globally, the number of cases has increased from 52 775 271 to 56 984 774, and the number of deaths has risen from 1 293 106 to 1 360 879.

In the EU/EEA and the United Kingdom (UK), the number of cases has increased from 10 124 110 to 11 542 665 (+1 418 555 cases), and the number of deaths has risen from 258 279 to 283 673 (+25 394 deaths).

More details are available here.

West Nile virus - Multi-country (World) - Monitoring season 2020

Opening date: 20 May 2020 Latest update: 20 November 2020

During the transmission season for West Nile virus, which usually runs from June to November, ECDC monitors the occurrence of infections in the EU/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 13 and 19 November 2020, EU Member States reported one new human case of WNV infection. The case was reported by the Netherlands from the region of Arnhem/Nijmegen. This region reported a locally acquired human case of WNV infection for the first time through TESSy. One death was reported by Greece. No human cases of WNV infection or deaths were reported from EU-neighbouring countries.

ECDC links: West Nile virus infection atlas

Sources: TESSy

Dengue - French Antilles - 2020

Opening date: 12 February 2020 Latest update: 20 November 2020

French authorities have reported an increased number of dengue cases in the islands of Guadeloupe, Saint Martin, Saint Barthélemy and Martinique in recent weeks.

→Update of the week

Since the previous update, with data as of 29 October 2020 and as of 12 November 2020, an additional 3 778 dengue cases have been reported in Guadeloupe, Saint-Martin, Saint-Barthélemy and Martinique.

The following cases have been reported since the previous update:

Guadeloupe: 1 855 additional suspected cases. **Saint-Martin:** 50 additional suspected cases. **Saint-Barthelemy:** 73 additional suspected cases.

Martinique: 1 800 additional suspected cases, including three deaths.

Non EU Threats

New! Legionnaires' disease outbreak – Portugal – October 2020

Opening date: 19 November 2020 Latest update: 20 November 2020

In Europe, most Legionnaires' disease cases are reported as sporadic, but outbreaks occur, often in relation to cooling towers or other aerosol-generating installations.

→Update of the week

Public health authorities in Portugal have informed ECDC about an evolving outbreak of Legionnaires' disease: since October 29, a cluster of 72 cases of Legionnaires' disease has been identified in the North Region of Portugal, evolving in Póvoa de Varzim, Vila do Conde and Matosinhos counties. The average age of the cases is 75 years (range 48 to 97). Nine deaths occurred among patients aged 74 to 92 years.

An epidemiological investigation is ongoing, including clinical and environmental assessment and sampling for subsequent subtyping and isolate comparison. Two cooling towers have been closed.

New! Influenza A(H1N2) variant virus – Canada – 2020

Opening date: 20 November 2020 Latest update: 20 November 2020

Animal influenza viruses that infect people are considered novel to humans and have the potential to become pandemic threats.

→Update of the week

On 4 November 2020, the government of Alberta, Canada, informed of a human infection with an influenza A(H1N2) variant virus (A(H1N2)v) of pig origin. This is the first report of a human case due to A(H1N2)v in Canada. This is also the first influenza case this season detected in Alberta (2020/2021).

Ebola virus disease - eleventh outbreak - Democratic Republic of the Congo - 2020

Opening date: 4 June 2020 Latest update: 20 November 2020

On 1 June 2020, the Ministry of Health of the Democratic Republic of the Congo (DRC) <u>declared</u> the 11th outbreak of Ebola virus disease in the country. The outbreak was located in the Equateur Province in the north-west of the country, close to the border with Congo.

On 18 November 2020, the 11th outbreak of the Ebola virus disease in the DRC was declared over.

→Update of the week

Since the last update on 13 November, and as of 18 November 2020, no new cases or deaths have been reported from the Equateur Province in the DRC.

On 18 November 2020, the 11th outbreak of the Ebola virus disease in the DRC was declared over by the <u>DRC Ministry of Health</u> and <u>WHO</u>. The last confirmed case was reported on 28 September from Makanza Health Zone. The declaration comes 42 days after the last case from this outbreak tested negative twice. The outbreak lasted almost six months.

Influenza – Multi-country – Monitoring 2020/2021 season

Opening date: 14 October 2020 Latest update: 20 November 2020

Influenza transmission in Europe shows a seasonal pattern, with peak activity during the winter months.

→Update of the week

Week 46/2020 (9-15 November 2020)

Influenza activity remained at interseasonal levels.

No influenza viruses were detected in the specimens from persons with respiratory illness presenting to primary medical care sentinel sites.

Influenza viruses were detected sporadically from non-sentinel sources (such as hospitals, schools, primary care facilities not involved in sentinel surveillance, or nursing homes and other institutions). Both influenza type A and type B viruses were detected.

There were no hospitalised laboratory-confirmed influenza cases reported for week 46/2020.

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

Opening date: 27 January 2017 Latest update: 20 November 2020

Chikungunya virus disease and dengue are vector-borne diseases that affect 50–100 million people per year. In the past decade, an increasing number of countries have detected cases of dengue and chikungunya virus disease. Chikungunya virus disease has been circulating in Africa, Asia, the Americas, the Caribbean and the Pacific since 2013–2014. Dengue is also present in Africa, the Americas, Asia, the Caribbean and the Pacific. In 2020, France and Italy reported autochthonous dengue cases.

→Update of the week

Chikungunya virus disease: The virus is widespread in the Americas region, with several countries reporting cases in 2020. Chikungunya virus disease cases have also been reported in Asia and Africa during this period. Since the previous CDTR update on 24 October 2020, Chad, Thailand and Malaysia have reported the majority of new cases.

Dengue: Since the beginning of the year, the countries reporting most cases are Brazil, Paraguay, Mexico, Vietnam and Malaysia.

II. Detailed reports

COVID-19 associated with SARS-CoV-2 - Multi-country (World) - 2020

Opening date: 7 January 2020 Latest update: 20 November 2020

Epidemiological summary

Since 31 December 2019 and as of 20 November 2020, 56 984 774 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 1 360 879 deaths.

Cases have been reported from:

Africa: 2 028 666 cases; the five countries reporting most cases are South Africa (759 658), Morocco (311 554), Egypt (111 955), Ethiopia (104 427) and Tunisia (84 995).

Asia: 14 779 796 cases; the five countries reporting most cases are India (9 004 365), Iran (801 894), Iraq (529 226), Indonesia (483 518) and Bangladesh (441 159).

America: 24 420 595 cases; the five countries reporting most cases are United States (11 717 827), Brazil (5 981 767), Argentina (1 349 434), Colombia (1 225 490) and Mexico (1 019 543).

Europe: 15 705 782 cases; the five countries reporting most cases are France (2 086 288), Russia (2 015 608), Spain (1 541 574), United Kingdom (1 453 256) and Italy (1 308 528).

Oceania: 49 239 cases; the five countries reporting most cases are Australia (27 784), French Polynesia (12 587), Guam (6 416), New Zealand (1 657) and Papua New Guinea (604).

Other: 696 cases have been reported from an international conveyance in Japan.

Deaths have been reported from:

Africa: 48 762 deaths; the five countries reporting most deaths are South Africa (20 671), Egypt (6 508), Morocco (5 090), Tunisia (2 611) and Algeria (2 224).

Asia: 257 422 deaths; the five countries reporting most deaths are India (132 162), Iran (42 941), Indonesia (15 600), Iraq (11 834) and Philippines (7 998).

America: 695 490 deaths; the five countries reporting most deaths are United States (252 555), Brazil (168 061), Mexico (100 104), Argentina (36 532) and Peru (35 446).

Europe: 358 092 deaths; the five countries reporting most deaths are United Kingdom (53 775), Italy (47 870), France (47 127), Spain (42 291) and Russia (34 850).

Oceania: 1 106 deaths; the five countries reporting most deaths are Australia (907), Guam (101), French Polynesia (62), New Zealand (25) and Papua New Guinea (7).

Other: 7 deaths have been reported from an international conveyance in Japan.

EU/EEA and the UK:

As of 20 November 2020, 11 542 665 cases have been reported in the EU/EEA and the UK: France (2 086 288), Spain (1 541 574), United Kingdom (1 453 256), Italy (1 308 528), Germany (879 564), Poland (796 798), Belgium (550 168), Czechia (481 755), Netherlands (466 697), Romania (393 851), Portugal (243 009), Austria (228 058), Sweden (201 055), Hungary (165 901), Bulgaria (114 435), Croatia (93 879), Slovakia (91 578), Greece (85 261), Ireland (69 473), Denmark (67 105), Slovenia (61 034), Lithuania (40 492), Norway (30 768), Luxembourg (28 573), Finland (20 286), Latvia (11 722), Estonia (8 715), Malta (8 560), Cyprus (7 979), Iceland (5 231) and Liechtenstein (1 072).

As of 20 November 2020, 283 673 deaths have been reported in the EU/EEA and the UK: United Kingdom (53 775), Italy (47 870), France (47 127), Spain (42 291), Belgium (15 196), Germany (13 630), Poland (12 088), Romania (9 596), Netherlands (8 759), Czechia (6 874), Sweden (6 340), Portugal (3 701), Hungary (3 568), Bulgaria (2 649), Austria (2 018), Ireland (2 010), Greece (1 347), Croatia (1 200), Denmark (773), Slovenia (609), Slovakia (579), Finland (374), Lithuania (341), Norway (305), Luxembourg (248), Latvia (141), Malta (104), Estonia (86), Cyprus (41), Iceland (25) and Liechtenstein (8).

EU:

As of 20 November 2020, 10 052 338 cases and 229 560 deaths have been reported in the EU.

Public Health Emergency of International Concern (PHEIC):

On 30 January 2020, the World Health Organization declared that the outbreak of COVID-19 constituted a PHEIC. On 11 March 2020, the <u>Director-General of WHO</u> declared the COVID-19 outbreak a pandemic. The <u>third</u>, <u>fourth</u> and <u>fifth</u> International Health Regulations (IHR) Emergency Committee meetings for COVID-19 were held in Geneva on 30 April, 31 July and 29 October 2020, respectively. During these meetings, the committee concluded that the COVID-19 pandemic continues to constitute a PHEIC.

Sources: Wuhan Municipal Health Commission | China CDC | WHO statement | WHO coronavirus website | ECDC 2019-nCoV

website | RAGIDA | WHO

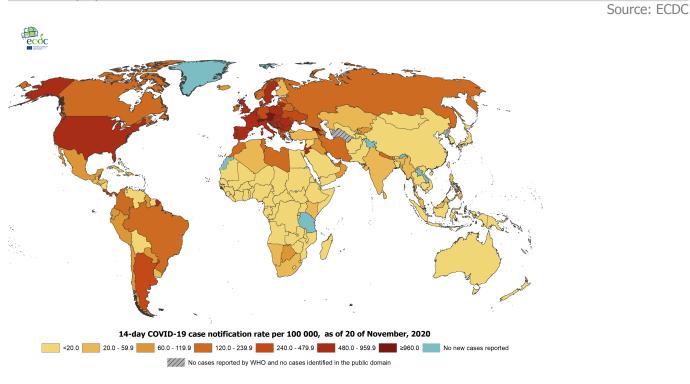
ECDC assessment

Information on the COVID-19 situation and a risk assessment can be found on ECDC's website.

Actions

ECDC activities related to COVID-19 can be found on ECDC's website. On 12 November 2020, ECDC published a rapid risk assessment on the detection of new SARS-CoV-2 variants related to mink. On 19 November 2020, ECDC published a rapid risk assessment on the increase in fatal cases of COVID-19 among long-term care facility residents in the EU/EEA and the UK.

Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, as of 20 November 2020



West Nile virus - Multi-country (World) - Monitoring season 2020

Opening date: 20 May 2020 Latest update: 20 November 2020

Epidemiological summary

Between 13 and 19 November 2020, EU Member States reported one new human case of WNV infection. The case was reported by the Netherlands from the region of Arnhem/ Nijmegen. This region reported a locally acquired human case of WNV infection for the first time through TESSy. One death was reported by Greece. No human cases of WNV infection or deaths were reported from EU-neighbouring countries.

Since the start of the 2020 transmission season, and as of 19 November 2020, EU Member States have reported 316 human cases of WNV infection, including 37 deaths, through TESSy: Greece (143, including 23 deaths), Spain (77, including 7 deaths), Italy (66, including 5 deaths), Germany (13), Romania (6, including 1 death), the Netherlands (7), Hungary (3) and Bulgaria (1, including 1 death). The province of Pazardzhik in Bulgaria, the province of Badajoz in Spain, the regions of Utrecht and Arnhem/ Nijmegen in the Netherlands and five regions in Germany (Barnim, Ostprignitz-Ruppin, Saalekreis, Halle (Saale) and Meissen) reported locally acquired human cases of WNV infection for the first time. All other cases reported through TESSy were reported from areas that have been affected during previous transmission seasons.

EU-neighbouring countries reported 17 human cases of WNV infection; all were reported by Israel.

Since the beginning of the 2020 transmission season, 182 outbreaks among equids have been reported. These outbreaks have been reported by Spain (138), Germany (20), Italy (14), France (5), Portugal (2), Austria (2) and Hungary (1) through the Animal Disease Notification System (ADNS). Since the beginning of the 2020 transmission season, two outbreaks among birds have been reported through ADNS, both by Bulgaria.

ECDC links: West Nile virus infection atlas

Sources: TESSy | Animal Disease Notification System

ECDC assessment

Human WNV infections have been reported in eight EU Member States (Bulgaria, Germany, Greece, Hungary, Italy, the Netherlands, Romania and Spain) in which WNV enzootic transmission between mosquitoes and birds has previously been described.

The first detection of a WNV infection in a bird in the Netherlands earlier this year and the subsequent detection of human cases of WNV infection corroborates the further expansion of WNV circulation in Europe. Similarly, the first detection of WNV in a bird in Germany in 2018 was followed by the detection of human WNV infections in 2019. Further human cases may be detected, but environmental conditions have become less suitable for transmission of the virus. In previous years the latest date of onset usually ranged from week 41 to week 46.

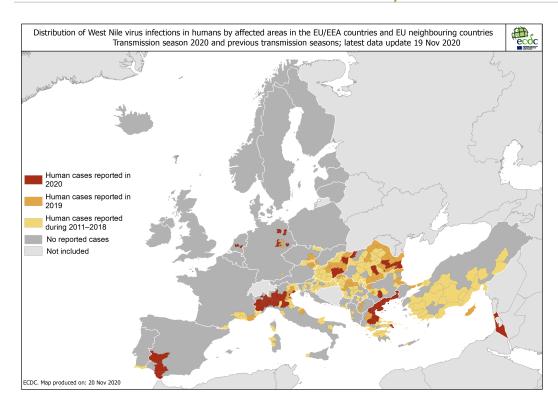
In accordance with <u>Commission Directive 2014/110/EU</u>, prospective donors should be deferred for 28 days after leaving a risk area for locally acquired WNV infection, unless the result of an individual nucleic acid test is negative.

Actions

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

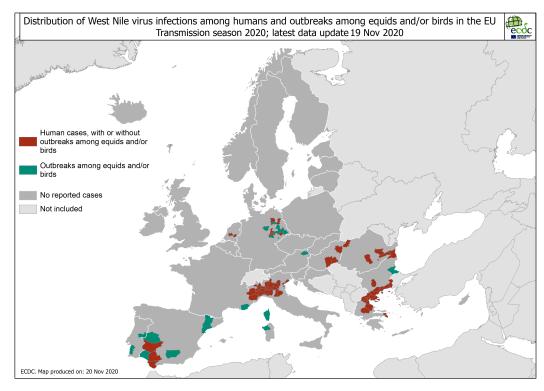
Distribution of human West Nile virus infections by affected areas as of 19 Nov





Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 19 Nov

ECDC and ADNS



Dengue - French Antilles - 2020

Opening date: 12 February 2020 Latest update: 20 November 2020

Epidemiological summary

According to French authorities, Guadeloupe, Saint-Martin, Saint-Barthélemy and Martinique are all in an epidemic phase, although cases have started to decrease since week 40.

In **Guadeloupe**, since week 2019-43 and as of 12 November 2020, 18 905 suspected dengue cases have been reported, including one death. Most of the cases have been identified as dengue virus serotype 2.

In **Saint-Martin**, since week 2020-03 and as of 12 November 2020, 2 450 suspected dengue cases have been reported, including one death. Most of the cases have been identified as dengue virus serotype 1.

In **Saint-Barthélemy**, since week 2020-17 and as of 12 November 2020, 1 250 suspected dengue cases have been reported. Most of the cases have been identified as dengue virus serotype 2.

In **Martinique**, since 4 November 2019 and as of 12 November 2020, 29 800 suspected dengue cases have been reported, including 14 deaths. Dengue virus serotype 3 has been identified among most of the cases. The number of cases is now declining in Martinique. This outbreak constitutes the largest outbreak reported on the island in the last decade.

Source: Santé publique France

ECDC assessment

EU/EEA travellers to and residents of the affected areas should apply <u>personal protective measures against mosquito bites</u>. The occurrence of further autochthonous cases in the French Antilles is expected, as environmental conditions are favourable for continuous transmission. The concurrent circulation of several dengue serotypes may increase the risk of more severe clinical presentations.

The current likelihood of the occurrence of local transmission events of dengue virus in southern continental Europe is considered to be very low as the environmental conditions are no longer favourable to vector activity and virus replication.

More information about dengue is available at **ECDC** factsheet.

Actions

ECDC is monitoring the ongoing situation through its epidemic intelligence activities. ECDC is maintaining a list of the autochthonous transmission events of dengue virus in continental EU/EEA since 2010.

New! Legionnaires' disease outbreak - Portugal - October 2020

Opening date: 19 November 2020 Latest update: 20 November 2020

Epidemiological summary

Public health authorities in Portugal have informed ECDC about an evolving outbreak of Legionnaires' disease:

Since October 29, a cluster of 72 cases of Legionnaires' disease has been identified in the North Region of Portugal, evolving in Póvoa de Varzim, Vila do Conde and Matosinhos counties. The average age of the cases is 75 years (range 48 to 97). Nine deaths occurred among patients aged 74 to 92 years.

An epidemiological investigation is ongoing, including clinical and environmental assessment and sampling for subsequent subtyping and isolate comparison. Two cooling towers have been closed.

The geographic dispersion of the cases is compatible with an environmental source under the effect of the Bárbara depression climate changes, which occurred in the national territory during the incubation period of the cases. Nevertheless, the source of exposure remains uncertain.

Source: Public health authority in Portugal | media report

ECDC assessment

In Europe, most Legionnaires' disease cases are reported as sporadic, but outbreaks occur, often in relation to cooling towers or other aerosol-generating installations. In 2014, Portugal reported an <u>outbreak</u> of 403 cases in Vila Franca de Xira (Lisbon area), attributed to an industrial wet cooling system.

Given the localised nature of Legionnaires' disease outbreaks, and the absence of indications that travellers are or could be affected, the risk for other EU/EEA countries is considered very low. For more information about Legionnaires' disease, refer to ECDC's factsheet.

Since Legionnaires' disease presents with similar symptoms and in similar risk groups as COVID-19, it is important that Member States maintain a high level of readiness to detect outbreaks of Legionnaires' disease early. This is all the more important now that, due to COVID-19 control measures, tourist and industrial infrastructure may have altered activity, potentially affecting water systems. The ESCMID Study Group for Legionella Infections (ESGLI) has produced <u>guidance on managing Legionella risk in building water systems during the COVID-19 pandemic</u>.

Actions

ECDC will continue to monitor this event through its epidemic intelligence activities and communication with the country.

New! Influenza A(H1N2) variant virus – Canada – 2020

Opening date: 20 November 2020 Latest update: 20 November 2020

Epidemiological summary

On 4 November 2020, the government of Alberta, Canada, informed of a human infection with an influenza A(H1N2) variant virus (A(H1N2)v) of pig origin. This is the first report of a human case due to A(H1N2)v in Canada. This is also the first influenza case this season detected in Alberta (2020/2021).

A case from central Alberta developed influenza-like symptoms in mid-October 2020 and sought medical help. The patient experienced mild symptoms, was tested for COVID-19 and influenza and quickly recovered.

Epidemiologic, animal health, and virological investigations are ongoing. Proactive influenza testing is offered to residents in parts of central Alberta if individuals present for COVID-19 testing in healthcare facilities. No further cases were detected among close contacts of the case and other residents of central Alberta, as of information available on 19 November 2020. According to media reports, quoting healthcare officials, there was no link to slaughterhouses.

Source: press release of the government of Alberta | media

ECDC assessment

This is a rare event, with 27 cases of A(H1N2)v infection reported worldwide since 2005. So far, no human-to-human transmission of A(H1N2)v has been observed. Further epidemiological investigations, including the characterisation of the virus, are needed to assess the source of infection and risk of transmission to humans as well as between humans. Close cross-sectoral cooperation and communication between animal and public health authorities are recommended to better understand the circulating viruses in pigs in order to implement safety measures and prevent zoonotic transmission events. This case again underlines the need to perform detailed virus characterisation analyses for unsubtypable influenza viruses and share specimens with national influenza centres or reference laboratories.

Actions

ECDC is monitoring this event through its epidemic intelligence activities and is in close communication with WHO regarding the ongoing investigations. ECDC monitors zoonotic influenza viruses through its epidemic intelligence activities in order to early identify transmission events.

Ebola virus disease - eleventh outbreak - Democratic Republic of the Congo - 2020

Opening date: 4 June 2020 Latest update: 20 November 2020

Epidemiological summary

Since the start of the outbreak, and as of 18 November 2020, a total of 130 cases (119 confirmed, 11 probable), including 55 deaths, have been reported from the Bikoro (32), Bolenge (1), Bolomba (16), Bomongo (2), Iboko (4), Ingende (13), Lilanga Bobangi (6), Lolanga Mampoko (9), Lotumbe (17), Makanza (1), Mbandaka (25), Monieka (2) and Wangata (2) health zones in the Equateur province of the DRC. Among the reported cases, three were healthcare workers. In total, there were 75 survivors.

This was the DRC's 11th outbreak of Ebola virus disease since 1976, when the virus was first discovered. Over 40 000 people were vaccinated with rVSV-ZEBOV-GP.

Background: Between May and July 2018, the <u>ninth Ebola outbreak</u> in the DRC occurred in Mbandaka and Bikoro in the Equateur province, leading to a total of 54 cases, including 33 deaths. According to the World Health Organization, <u>sequencing</u> results confirmed the 11th outbreak as a separate event from the <u>10th Ebola outbreak</u> in the eastern part of the country, which resulted in 3 470 cases, including 2 287 deaths, and was declared over on 25 June 2020.

Sources: WHO DRC Twitter | WHO Afro Twitter | WHO Afro Sitrep | WHO Afro bulletin | WHO DON | WHO News item | Dr Tedros

ECDC assessment

The risk of a flare-up of cases in the DRC remains. In addition, as the virus is present in the animal reservoir in many parts of the country, Ebola outbreaks are recurrent. Continuing response measures and follow-up of survivors are essential to detect and interrupt transmission early on. Response measures might be challenging amid other outbreaks in the country.

WHO assessment: While the 11th outbreak is over, there is a need for continued vigilance and maintaining strong surveillance as potential flare-ups are possible in the months to come. In this regard, WHO and other partners are currently conducting important actions for improving critical operational capacities in Equateur province, including training frontline workers.

Actions

ECDC will close the weekly updates of the 11th Ebola outbreak. ECDC will continue to monitor this event through its epidemic intelligence activities and report relevant news on an ad hoc basis.

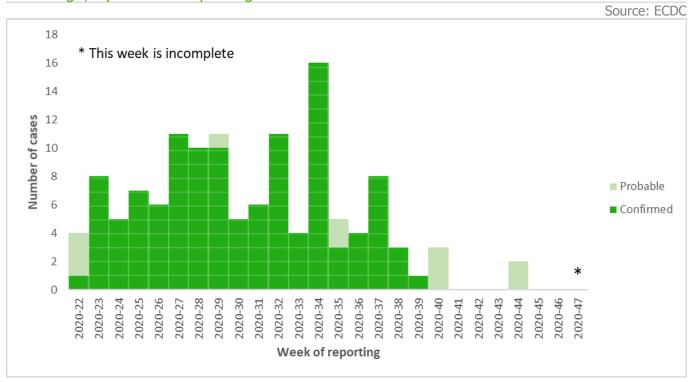
On 25 May 2018, ECDC published a rapid risk assessment on the ninth outbreak in the DRC: <u>Ebola virus disease outbreak in Equateur Province</u>, <u>Democratic Republic of the Congo</u>, <u>First update</u>.

One EPIET fellow is deployed in Geneva (WHO headquarters) until 4 December 2020, contributing remotely to the GOARN response for the DRC Ebola outbreak. Another two EPIET fellows are deployed to the DRC until 10 and 22 December 2020, respectively, to support response activities to the Ebola outbreak.

Distribution of Ebola Virus Disease cases in Equateur Province, Democratic Republic of the Congo, as of 18 November 2020

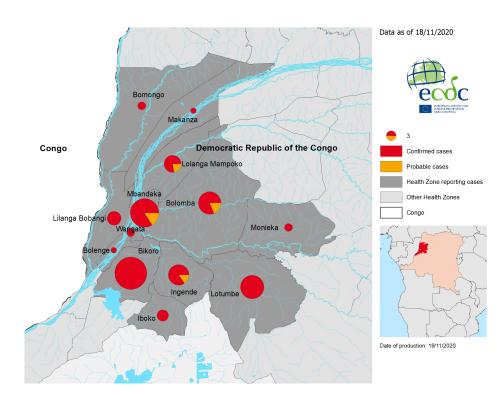
					Source: ECDC
	Number of confirmed cases	Number of probable cases	Confirmed and probable cases	Number of deaths	Conf/Prob cases in past 7 days
■ Democratic_Republic_of_the_Congo	119	11	130	55	
□ Equateur	119	11	130	55	
Bikoro	32	0	32	19	
Bolenge	1	0	1	1	
Bolomba	13	3	16	4	
Bornongo	2	0	2	1	
Iboko	4	0	4	1	
Ingende	11	2	13	5	
Lilanga Bobangi	6	0	6	0	
Lolanga Mampoko	7	2	9	4	
Lotumbe	17	0	17	2	
Makanza	1	0	1	0	
Mbandaka	21	4	25	17	
Monĭeka	2	0	2	0	
Wangata	2	0	2	1	
Cumulative Total	119	11	130	55	

Distribution of Ebola virus disease cases in Equateur Province, Democratic Republic of the Congo, by week of reporting and as of 18 November 2020



Geographical distribution of confirmed and probable cases of Ebola virus disease, Equateur Province, Democratic Republic of the Congo, as of 18 November 2020

Source: ECDC



Influenza - Multi-country - Monitoring 2020/2021 season

Opening date: 14 October 2020 Latest update: 20 November 2020

Epidemiological summary

Week 46/2020 (9-15 November 2020)

Influenza activity remained at interseasonal levels.

No influenza viruses were detected in the specimens from persons with respiratory illness presenting to primary medical care sentinel sites.

Influenza viruses were detected sporadically from non-sentinel sources (such as hospitals, schools, primary care facilities not involved in sentinel surveillance, or nursing homes and other institutions). Both influenza type A and type B viruses were detected.

There were no hospitalised laboratory-confirmed influenza cases reported for week 46/2020.

2020-2021 season overview

For the Region as a whole, influenza activity has been at baseline level since the start of the season.

In total, 61 specimens have tested positive for influenza viruses, one from sentinel sources and 60 from non-sentinel sources with A(H1N1)pdm09, A(H3N2) and type B viruses detected.

No cases of hospitalization due to influenza virus infection have been reported.

WHO has published <u>recommendations</u> for the composition of influenza vaccines to be used in the 2020–2021 northern hemisphere season. Based on these recommendations, the influenza A(H1N1)pdm09, A(H3N2) and B/Victoria-lineage virus components should be updated compared to the 2019–2020 influenza vaccine.

Sources: <u>EuroMOMO</u> | <u>Flu News Europe</u> | <u>Influenzanet</u>

ECDC assessment

Reported influenza activity remains at a very low level, similar to that usually observed during the interseason in summer months. The novel coronavirus disease 2019 (COVID-19) pandemic has affected healthcare presentations and testing capacities of countries and areas in the European Region, which has negatively impacted reporting of influenza epidemiological and virological data during the 2019-2020 season. It is not unusual for influenza activity to be low at this time of year. However, if the COVID-19 pandemic continues, the influenza data we present need to be interpreted with caution, notably in terms of seasonal patterns.

Actions

ECDC and WHO monitor influenza activity in the WHO European Region between week 40–2020 and week 20–2021. They publish their weekly report on the <u>Flu News Europe</u> website.

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

Opening date: 27 January 2017 Latest update: 20 November 2020

Epidemiological summary

Europe

Chikungunya virus disease:

No autochthonous cases of Chikungunya virus disease have been detected in continental Europe in 2020.

Dengue:

Since the beginning of the year and as of 17 November 2020, <u>France</u> has reported 12 autochthonous cases of dengue: two in Hérault department, three in Var department, six in Alpes Maritimes and one in Gard department. In <u>Italy</u>, 10 locally acquired cases were detected in the Veneto region in August 2020.

Americas and the Caribbean

Chikungunya virus disease:

<u>Colombia</u>: In 2020, as of 7 November, Colombia has reported 158 cases, five of which are laboratory-confirmed. This represents an increase of two suspected cases since the last CDTR update.

Costa Rica: In 2020, as of 31 October, Costa Rica has reported 49 cases.

Ecuador: In 2020, as of 31 October, Ecuador has reported one case.

<u>El Salvador</u>: In 2020, as of 31 October, El Salvador has reported 106 suspected cases. This represents an increase of five new cases since the last CDTR update. During the same period in 2019, El Salvador reported 642 suspected cases.

Mexico: In 2020 and as of 31 October, Mexico has reported six confirmed cases. During the same period in 2019, Mexico reported nine cases.

<u>Nicaragua:</u> In 2020, as of 31 October, Nicaragua has reported 15 suspected cases. During the same period in 2019, 169 suspected cases were reported.

Paraguay: In 2020, as of 7 November, Paraguay has reported three probable cases and 283 additional suspected cases.

<u>Peru:</u> In 2020, as of 7 November, Peru has reported 94 cases, 52 of which are laboratory-confirmed. This represents an increase of 14 cases since the last CDTR update.

<u>Venezuela</u>: In 2020, as of 7 November, Venezuela has reported 62 cases, two of which are laboratory-confirmed. This represents an increase of 10 cases since the last CDTR update.

No updates are available for Barbados, Bolivia, Brazil, Guatemala and Honduras.

Dengue:

In 2020, the Pan American Health Organization (PAHO) reported 2 114 841 suspected and confirmed dengue cases and 853 deaths, in the Americas region. The five countries reporting most cases are: Brazil (1 378 592 cases), Paraguay (221 000), Mexico (99 632), Bolivia (83 552) and Colombia (73 357).

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.

According to Santé Publique France, the French Caribbean islands are all in epidemic phase, although cases have started to decrease since week 40. Details about the current epidemics in Guadeloupe, Saint Martin, Saint Barthélemy and Martinique can be found in the Dengue – French Antilles – 2020 threat in this CDTR.

Asia

Chikungunya virus disease:

India: In 2020, and as of 30 September, India has reported 22 587 suspected cases and 3 487 confirmed cases.

Malaysia: In 2020 and as of 31 October, 2 374 cases have been reported across the country, with most of the cases being reported in Perak and Penang region according to Malaysia's Ministry of Health. This represents an increase of 149 cases since the last CDTR update.

<u>Thailand:</u> In 2020, and as of 7 November, the country has reported 10 397 cases, with no associated deaths, affecting 72 provinces across the country. This represents an increase of 296 cases since the last CDTR update.

No updates are available for Cambodia and Yemen.

Denaue:

According to media sources quoting health authorities, <u>Bangladesh</u> has reported 867 dengue cases and one death in 2020 and as of 15 November 2020, an increase of 373 cases since 11 October.

China has reported 302 dengue cases in August and September 2020. This is lower than the same period in 2019.

<u>Lao PDR</u> has reported 6 889 dengue cases and 12 deaths in 2020 and as of 18 October 2020. The cumulative number of cases is 5.2 times lower compared to the same period in 2019, and the trend is within seasonally expected levels.

<u>Malaysia</u> has reported 82 753 cases and 133 deaths in 2020 and as of 31 October 2020. Dengue activity is showing a decreasing trend since week 33 and, overall, the cumulative number of cases this year has been lower compared to the same period last year.

Pakistan has reported a total of 2 184 cases of dengue for 2020, as of 7 November 2020.

<u>The Philippines</u> have reported 71 785 dengue cases and 277 deaths in 2020, as of 17 October. The number of cases is 81% lower compared to the 379 597 cases that were reported in the same period in 2019.

<u>Singapore</u> has reported 33 697 cases in 2020 and as of 14 November. The number of cases is further decreasing since the peak at week 30. Compared to the average over the past three years, the weekly number of cases is about two and a half times as high.

Sri Lanka has reported 29 116 cases as of 17 November 2020.

Taiwan has reported 133 cases in 2020 and as of 18 November 2020.

Thailand has reported 47 776 cases and six deaths as of 18 November 2020.

According to media sources quoting health authorities, Vietnam has reported 84 411 cases and 13 deaths.

There are no new updates available from Cambodia, India, Myanmar, Nepal, and Indonesia.

Africa

Chikungunya virus disease:

<u>Chad:</u> In 2020, and as of 1 November, 38 633 chikungunya cases and one associated death have been reported in the country. This represents an increase of 4 188 cases and one death since the last CDTR update. Chikungunya cases have been confirmed in Abdi, Abéché, Biltine and Gozbeida health districts.

<u>Sudan:</u> In 2020 and as of 16 October, 11 additional chikungunya confirmed cases have been reported in West Darfur region. On 5 October 2020, a state of health emergency has been declared in the region as 41 chikungunya cases have been confirmed.

No updates are available for the outbreaks previously reported in **Congo** and **Kenya**.

Dengue

Réunion reported 16 000 confirmed cases, 34 000 suspected cases of dengue and 11 deaths as of 10 November 2020.

There are no new updates available from WHO Afro.

Australia and the Pacific

Chikungunya virus disease:

No outbreaks have been reported since the previous update.

Dengue:

Australia reported 216 autochthonous and imported dengue cases since the beginning of the year and as of 18 November 2020.

The Cook Islands have reported 380 probable and confirmed cases in 2020 and as of 30 October 2020.

French Polynesia reported 3 329 cases of DENV-2 since the start of the epidemic in April 2019 and as of 31 October 2020.

<u>The Republic of the Marshall Islands</u> reported 3 817 dengue cases (of which 1 924 have been laboratory confirmed) and two deaths since the start of the epidemic in May 2019 and as of 3 November 2020.

New Caledonia reported 55 autochthonous and imported dengue cases in 2020 and as of 26 October 2020. Dengue activity remains at a low level.

According to PacNet, Fiii reported 4 000 dengue cases and three deaths in 2020 as of 19 October.

Wallis and Futuna reported 109 probable and confirmed dengue cases in 2020 and as of 15 November 2020.

There are no new updates available from the Federated States of Micronesia.

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.

ECDC assessment

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

The current likelihood of the occurrence of local transmission events of dengue virus in southern continental Europe is considered to be very low, as the environmental conditions are no longer favourable to vector activity and virus replication.

More information about dengue is available in ECDC's factsheet.

Actions

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

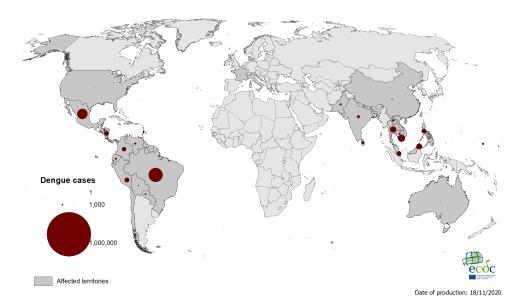
Geographical distribution of chikungunya virus disease cases reported worldwide, September to November 2020

Source: ECDC



Geographical distribution of dengue cases reported worldwide, September to November 2020

Source: ECDC



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