



COMMUNICABLE DISEASE THREATS REPORT

CDTR

Week 34, 22-28 August 2021

All users

This weekly bulletin provides updates on threats monitored by ECDC.

I. Executive summary

EU Threats

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

Opening date: 2 July 2021

Latest update: 27 August 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 26 August 2021, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very low.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be very low.

Outside of EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very low and it will remain very low for the next five days.

As of 26 August 2021, Finland has reported 12 additional cases of *Vibrio* infections. In total, 18 cases have been confirmed in 2021, nine of which are from blood samples and these cases include one death.

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

Opening date: 7 January 2020

Latest update: 27 August 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 and 15 April 2021, and 14 July 2021 respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

→Update of the week

Since week 2021-32 and as of week 2021-33, 4 566 693 new cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) and 70 213 new deaths have been reported.

Since 31 December 2019 and as of week 2021-33, 212 418 662 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 436 327 deaths.

In the EU/EEA, 36 307 572 cases have been reported, including 750 921 deaths.

At the end of week 33 (week ending Sunday 22 August 2021), the overall COVID-19 case notification rate for the European Union and European Economic Area (EU/EEA) was 204.3 per 100 000 population (205.2 the previous week). This rate has been stable for three weeks. Overall hospital admissions due to COVID-19 have been stable for four weeks although the 14-day COVID-19 death rate (9.6 deaths per million population, compared with 7.4 deaths the previous week) has been increasing for three weeks.

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: 27 August 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 20 and 26 August 2021, European Union (EU) and European Economic Area (EEA) countries reported 15 human cases of West Nile virus (WNV) infection and one death related to WNV infections. Cases were reported by Greece (11), Hungary (2) and Romania (2). The death was reported by Greece. EU-neighbouring countries reported three human cases of WNV infection in Serbia and no deaths related to WNV infections.

Non EU Threats

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

Opening date: 27 January 2017

Latest update: 27 August 2021

Chikungunya virus disease and dengue are vector-borne diseases transmitted by *Aedes* 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 mainland Europe, despite autochthonous outbreaks having been reported during the summer months in previous years.

→ Update of the week

Chikungunya virus disease: In 2021, 117 633 cases have been reported, the majority from Brazil (87 595), India (25 166), Guatemala (1 091), Malaysia (885) and Belize (737). Since the previous CDTR published on week 30, 32 329 new cases have been reported, the majority from Brazil (19 265), India (11 771), Guatemala (1 032), Malaysia (161) and Peru (34).

Dengue: In 2021, 1 075 834 cases have been reported, the majority from Brazil (752 284), Vietnam (43 028), Peru (35 728), Philippines (32 555) and Réunion (29 333). Since the previous CDTR published on week 30, 124 413 new cases have been reported, the majority from Brazil (80 552), India (7 207), Nicaragua (5 702), Vietnam (5 608), and Bangladesh (5 535).

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

Opening date: 20 April 2006

Latest update: 27 August 2021

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

→ Update of the week

Since the last update on 23 July 2021, new cholera cases have been reported worldwide. Countries reporting the majority of new cases since the previous update are Nigeria, Niger, India and Bangladesh. A list of all countries reporting new cases since the previous update on 23 July 2021 can be found below.

II. Detailed reports

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

Opening date: 2 July 2021

Latest update: 27 August 2021

Epidemiological summary

As of 26 August 2021, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very low.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be very low.

Outside of EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very low and it will remain very low for the next five days.

In 2021 and as of 26 August, Finland has reported 18 cases of *Vibrio* infections, nine of which are from blood samples and these cases include one death.

In 2021 and as of 12 August, [Germany](#) reported one death after *Vibrio* infection.

In 2021 and as of 11 August, [Sweden](#) reported 28 cases of more severe *Vibrio* infections in wounds or blood during the summer, with most having fallen ill in late July.

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 will now end its monitoring of the environmental suitability for growth of *Vibrio* species in the Baltic Sea for the 2021 season.

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

Opening date: 7 January 2020

Latest update: 27 August 2021

Epidemiological summary

Summary: Since 31 December 2019 and as of week 2021-33, 212 418 662 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 4 436 327 deaths.

Cases have been reported from:

Africa: 7 534 849 cases; the five countries reporting most cases are South Africa (2 690 973), Morocco (810 949), Tunisia (640 897), Libya (296 879) and Ethiopia (295 804).

Asia: 60 431 513 cases; the five countries reporting most cases are India (32 449 306), Iran (4 640 695), Indonesia (3 979 456), Philippines (1 839 635) and Iraq (1 825 089).

America: 82 095 269 cases; the five countries reporting most cases are United States (37 711 159), Brazil (20 570 891), Argentina (5 133 765), Colombia (4 892 235) and Mexico (3 231 616).

Europe: 62 202 117 cases; the five countries reporting most cases are Russia (6 747 087), France (6 619 611), United Kingdom (6 492 906), Turkey (6 197 041) and Spain (4 794 352).

Oceania: 154 209 cases; the five countries reporting most cases are Australia (44 028), Fiji (43 527), French Polynesia (35 743), Papua New Guinea (17 925) and Guam (9 486).

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

Deaths have been reported from:

Africa: 189 359 deaths; the five countries reporting most deaths are South Africa (79 421), Tunisia (22 537), Egypt (16 671), Morocco (11 792) and Algeria (5 004).

Asia: 930 298 deaths; the five countries reporting most deaths are India (434 756), Indonesia (126 372), Iran (101 354), Philippines (31 810) and Bangladesh (25 282).

America: 2 081 314 deaths; the five countries reporting most deaths are United States (628 504), Brazil (574 527), Mexico (253 526), Peru (197 921) and Colombia (124 315).

Europe: 1 233 313 deaths; the five countries reporting most deaths are Russia (176 044), United Kingdom (131 640), Italy (128 751), France (113 372) and Germany (91 980).

Oceania: 2 037 deaths; the five countries reporting most deaths are Australia (981), Fiji (438), French Polynesia (245), Papua New Guinea (192) and Guam (145).

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

EU/EEA:

As of week 2021-33, 36 307 572 cases have been reported in the EU/EEA: France (6 619 611), Spain (4 794 352), Italy (4 484 613), Germany (3 871 865), Poland (2 886 805), Netherlands (1 918 685), Czechia (1 677 619), Belgium (1 169 011), Sweden (1 117 645), Romania (1 091 340), Portugal (1 020 546), Hungary (811 121), Slovakia (781 103), Austria (672 138), Greece (559 186), Bulgaria (441 295), Croatia (369 838), Denmark (338 240), Ireland (337 117), Lithuania (294 708), Slovenia (264 141), Norway (148 817), Latvia (141 045), Estonia (139 126), Finland (122 046), Cyprus (111 333), Luxembourg (74 985), Malta (35 831), Iceland (10 177) and Liechtenstein (3 233).

As of week 2021-33, 750 921 deaths have been reported in the EU/EEA: Italy (128 751), France (113 372), Germany (91 980), Spain (83 337), Poland (75 316), Romania (34 425), Czechia (30 385), Hungary (30 052), Belgium (25 339), Bulgaria (18 475), Netherlands (17 952), Portugal (17 645), Sweden (14 670), Greece (13 384), Slovakia (12 547), Austria (10 564), Croatia (8 303), Ireland (5 074), Slovenia (4 768), Lithuania (4 498), Latvia (2 569), Denmark (2 567), Estonia (1 285), Finland (1 014), Luxembourg (830), Norway (811), Cyprus (483), Malta (436), Liechtenstein (59) and Iceland (30).

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

In week 2021-33, overall, the reported weekly cases decreased by 1.7% compared to the previous week. The highest weekly

increase was observed in Slovenia, Romania, Germany, Bulgaria, and Austria. The countries with the highest 14-day notification rate were: Cyprus (749), France (482), Ireland (457), Spain (457) and Iceland (400). Twelve of the 29 EU/EEA countries (Cyprus, Denmark, Finland, France, Greece, Iceland, Italy, Liechtenstein, Malta, Portugal, Luxembourg, the Netherlands, Slovakia and Spain) reported a decrease in the weekly cases.

At the end of week 33 (week ending Sunday 22 August 2021), the overall COVID-19 case notification rate for the European Union and European Economic Area (EU/EEA) was 204.3 per 100 000 population (205.2 the previous week). This rate has been stable for three weeks. Overall hospital admissions due to COVID-19 have been stable for four weeks although the 14-day COVID-19 death rate (9.6 deaths per million population, compared with 7.4 deaths the previous week) has been increasing for three weeks.

ECDC's assessment of each country's epidemiological situation derives from a composite score based on the absolute value and trend of five weekly COVID-19 epidemiological indicators. As shown below, for week 33, the epidemiological situation in the EU/EEA overall was categorised as of moderate concern (the same as the previous week). Five countries were categorised as of high concern, 12 countries as of moderate concern, nine countries as of low concern and four countries as of very low concern.

By the end of week 33, the median cumulative uptake of at least one vaccine dose among adults aged 18 years and older was 75.1% (country range: 21.1–92.5%). The median cumulative uptake of full vaccination among adults aged 18 years and older was 64.9% (country range: 19.3–90.3%).

The estimated distribution (median and range of values from 16 countries for weeks 31 to 32, 2 August to 15 August 2021) of variants of concern was 96.8% (29.4–99.4%) for B.1.617.2 (Delta), 0.7% (0.3–65.1%) for B.1.1.7 (Alpha), 0.1% (0.0–0.8%) for P.1 (Gamma), 0.0% (0.0–0.8%) for B.1.351 (Beta) and 0.0% (0.0–0.1%) for B.1.1.7+E484K.

Public Health Emergency of International Concern (PHEIC):

On 30 January 2020, the World Health Organization declared that the outbreak of COVID-19 constitutes a PHEIC. On 11 March 2020, the Director-General of [WHO](#) declared the COVID-19 outbreak a pandemic. The [third](#), [fourth](#), [fifth](#), [sixth](#), [seventh](#) and [eighth](#) International Health Regulations (IHR) Emergency Committee meetings for COVID-19 were held in Geneva on 30 April 2020, 31 July 2020, 29 October 2020, 14 January 2021 and 15 April 2021, and 15 July 2021 respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

ECDC assessment

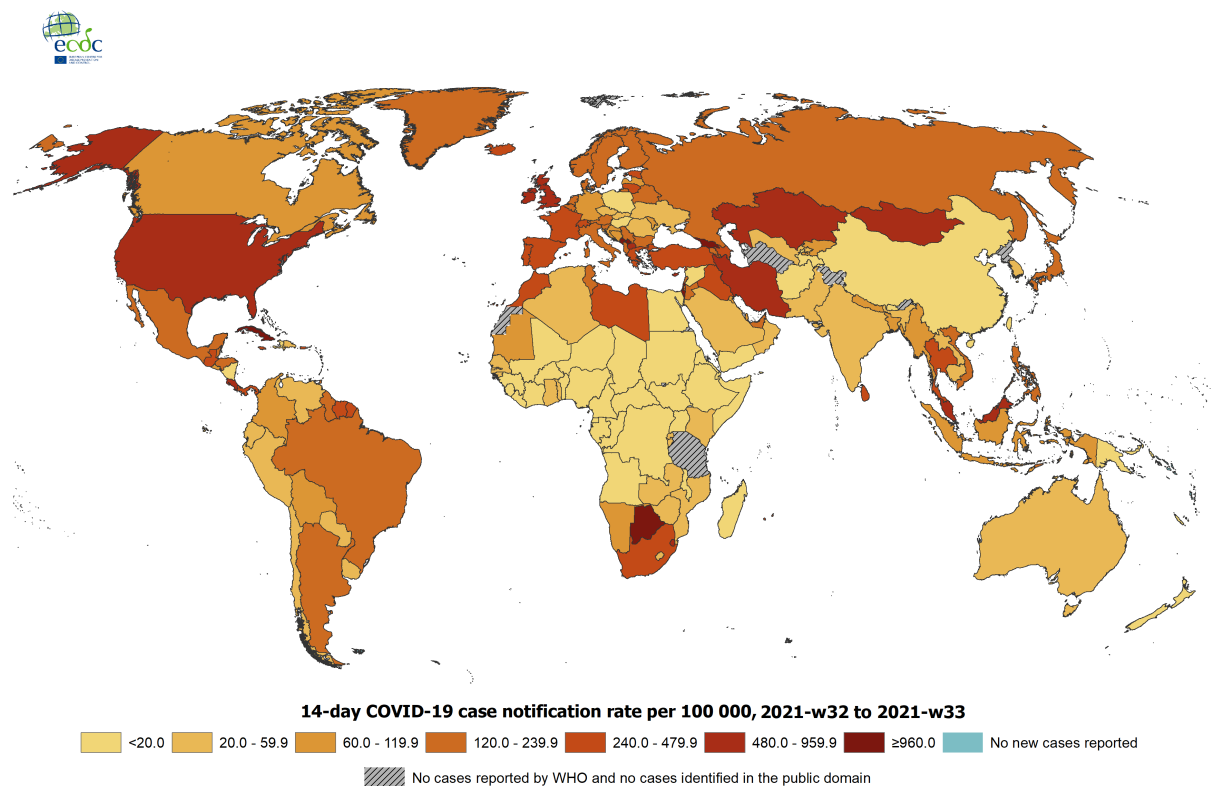
For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

Actions

Actions: ECDC published the 15th update of its [rapid risk assessment](#) on 10 June 2021 and a [Threat Assessment Brief](#) on the implications of the circulation of SARS-CoV-2 Delta on 23 June 2021. A [dashboard](#) with the latest updates is available on ECDC's [website](#).

Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, 2021-w32 to 2021-w33

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: 25/08/2021

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

Opening date: 4 June 2021

Latest update: 27 August 2021

Epidemiological summary

Between 20 and 26 August 2021, European Union (EU) and European Economic Area (EEA) countries reported 15 human cases of West Nile virus (WNV) infection and one death related to WNV infections. Cases were reported by Greece (11), Hungary (2) and Romania (2). The death was reported by Greece. EU-neighbouring countries reported three human cases of WNV infection in Serbia and no deaths related to WNV infections.

According to [media reports](#), three human cases of WNV infection were reported last week from the province of Seville, Spain. These cases will not appear in outputs, such as the WNV dashboard, maps and downloadable data file, until they are reported through The European Surveillance System (TESSy).

Since the beginning of the 2021 transmission season and as of 26 August 2021, EU/EEA countries have reported 43 human cases of WNV infection in Greece (25), Italy (11), Romania (3), Austria (2) and Hungary (2) and one death in Greece (1). EU-

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neighbouring countries have reported six human cases of WNV infection in Serbia (6) and two deaths in Serbia (2).

During the current transmission season, within the reporting countries, human cases of WNV infection were reported from 21 different NUTS 3 or GAUL 1 regions, of which the following regions reported human cases of WNV infection for the first time: La Spezia in Italy.

Since the beginning of the 2021 transmission season, three outbreaks among equids and no outbreaks among birds have been reported by EU/EEA countries. Outbreaks among equids have been reported by Spain (3).

ECDC assessment

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

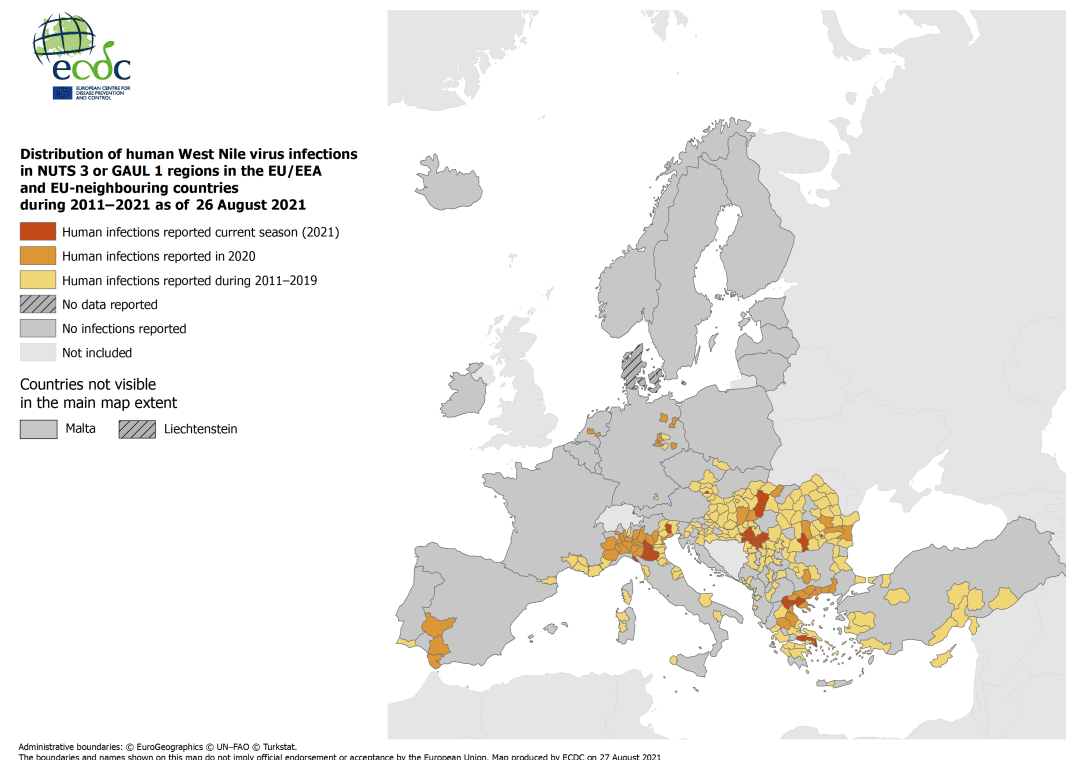
In accordance with [Commission Directive 2014/110/EU](#), prospective blood donors should be deferred for 28 days after leaving a risk area for locally-acquired WNV infection, unless the result of an individual nucleic acid test is negative.

Actions

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

Distribution of human West Nile virus infections by affected areas as of 26.08.

ECDC



Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 26.08.

ECDC and ADIS

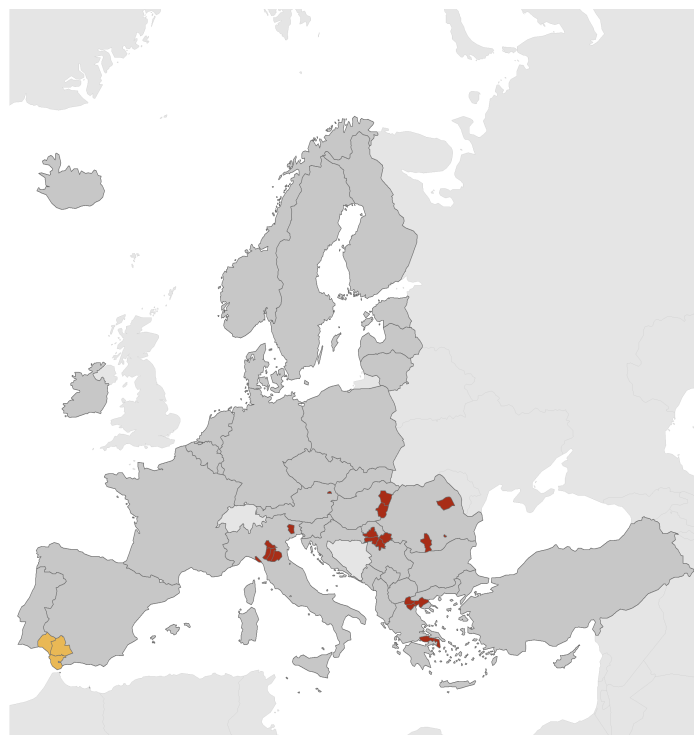


Distribution of human and animal West Nile virus infections in NUTS 3 or GAUL 1 regions of the EU/EEA and EU-neighbouring countries during the 2021 season as of 26 August 2021

- Human infections, with or without outbreaks among equids and/or birds
- Outbreaks among equids and/or birds
- No infections reported
- Not included

Countries not visible in the main map extent

- Malta
- Liechtenstein



Administrative boundaries: © EuroGeographics © UN-FAO © Turkstat. The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union. Map produced by ECDC on 27 August 2021

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

Opening date: 27 January 2017

Latest update: 27 August 2021

Epidemiological summary

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 24 August, one case has been reported and no deaths.

Americas and the Caribbean

Chikungunya virus disease:

Belize: In 2021 and as of 29 May 2021, 737 cases have been reported and no deaths.

Bolivia: In 2021 and as of 14 August 2021, 290 cases have been reported, including 32 confirmed cases and no deaths. This is an increase of 33 new cases and no new deaths since 10 July 2021.

Brazil: In 2021 and as of 24 July 2021, 87 595 cases have been reported, including 36 736 confirmed cases and six deaths. This is an increase of 19 265 new cases and one new death since 19 June 2021.

Colombia: In 2021 and as of 7 August 2021, 36 cases have been reported, including no confirmed cases and no

deaths. This is an increase of six new cases and no new deaths since 17 July 2021.

Costa Rica: In 2021 and as of 31 July 2021, 19 cases have been reported, including no confirmed cases and no deaths. This is an increase of one new case and no new deaths since 3 July 2021.

El Salvador: In 2021 and as of 7 August 2021, 63 cases have been reported, including no confirmed cases and no deaths. This is an increase of five new cases and no new deaths since 10 July 2021.

Guatemala: In 2021 and as of 24 July 2021, 1 091 cases have been reported, including no confirmed cases and no deaths. This is an increase of 1 032 new cases and no new deaths since 5 June 2021.

Mexico: In 2021 and as of 7 August 2021, three cases have been reported, including three confirmed cases and no deaths.

Nicaragua: In 2021 and as of 14 August 2021, eight cases have been reported, including one confirmed case and no deaths. This is an increase of three new cases and no new deaths since 19 June 2021.

Paraguay: In 2021 and as of 7 August 2021, 93 cases have been reported, including no confirmed cases and no deaths. This is an increase of six new cases and no new deaths since 17 July 2021.

Peru: In 2021 and as of 14 August 2021, 601 cases have been reported, including 302 confirmed cases and no deaths. This is an increase of 34 new cases and no new deaths since 17 July 2021.

Saint Lucia: In 2021 and as of 7 August 2021, one case has been reported, including one confirmed case and no deaths.

Venezuela: In 2021 and as of 31 July 2021, 37 cases have been reported, including no confirmed cases and no deaths. This is an increase of 12 new cases and no new deaths since 17 July 2021.

Dengue:

In 2021, and as of 17 July, the Pan American Health Organization (PAHO) reported 909 000 dengue cases, including 380 791 confirmed cases and 225 associated deaths, in the Americas. The five countries reporting most cases are: Brazil (752 284), Peru (35 728), Nicaragua (26 067), Colombia (20 325), and Mexico (16 997). This is an increase of 97 537 cases and 23 deaths since 30 July 2021.

All four dengue virus serotypes (DENV 1, DENV 2, DENV 3, and DENV 4) are currently circulating in the Americas, which increases the risk of severe disease. 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:

Cambodia: In 2021 and as of 9 June 2021, 514 cases have been reported, including no deaths.

India: In 2021 and as of 31 July 2021, 25 166 cases have been reported, including 2 764 confirmed cases and no deaths. This is an increase of 11 771 new cases and no new deaths since 31 May 2021.

Malaysia: In 2021 and as of 7 August 2021, 885 cases have been reported, including no deaths. This is an increase of 161 new cases and no new deaths since 26 June 2021.

Thailand: In 2021 and as of 11 July 2021, 390 cases have been reported, including no deaths.

Dengue:

Bangladesh: In 2021 and as of 15 August 2021, 6 100 cases have been reported, including no confirmed cases and 25 deaths. This is an increase of 5 535 new cases and 25 new deaths since 7 July 2021.

Cambodia: In 2021 and as of 12 August 2021, 929 cases have been reported, including no confirmed cases and two deaths. This is an increase of 139 new cases and one new death since 26 June 2021.

China: In 2021 and as of 12 August 2021, 24 cases have been reported, including no confirmed cases and no deaths. This is an increase of eight new cases and no new deaths since 31 May 2021.

India: In 2021 and as of 19 August 2021, 14 044 cases have been reported, including four deaths. This is an increase of 7 207 new cases and two new deaths since 31 May 2021.

Laos: In 2021 and as of 12 August 2021, 652 cases have been reported, including no deaths. This is an increase of 202 new cases and no new deaths since 3 July 2021.

Malaysia: In 2021 and as of 31 July 2021, 16 194 cases have been reported, including 10 deaths. This is an increase of 2 113 new cases and one new death since 3 July 2021.

Nepal: In 2021 and as of 15 August 2021, 101 cases have been reported, including no deaths. This is an increase of 21 new cases and no new deaths since 25 July 2021.

Pakistan: In 2021 and as of 14 August 2021, 2 715 cases have been reported, including no deaths. This is an increase of 586 new cases and no new deaths since 10 July 2021.

Philippines: In 2021 and as of 3 July 2021, 32 555 cases have been reported, including 119 deaths. This is an increase of 1 234 new cases and seven new deaths since 26 June 2021.

Singapore: In 2021 and as of 14 August 2021, 3 878 cases have been reported, including no deaths. This is an increase of 310 new cases and no new deaths since 26 July 2021.

Sri Lanka: In 2021 and as of 20 August 2021, 11 598 cases have been reported, including no deaths. This is an increase of 1 227 new cases and no new deaths since 26 July 2021.

Thailand: In 2021 and as of 19 July 2021, 3 921 cases have been reported, including one death.

Vietnam: In 2021 and as of 1 August 2021, 43 028 cases have been reported, including 13 deaths. This is an increase of 5 608 new cases and four new deaths since 4 July 2021.

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 11 June 2021, 86 cases have been reported, including 38 confirmed cases and 0 deaths.

Ethiopia: In 2021 and as of 4 February 2021, 207 cases have been reported, including no deaths.

Kenya: In 2021 and as of 25 June 2021, 867 cases have been reported, including 36 confirmed cases and two deaths.

Réunion: In 2021 and as of 9 August 2021, 29 333 cases have been reported, including 29 333 confirmed cases and 19 deaths. This is an increase of 698 new cases and four new deaths since 21 July 2021. The peak of the epidemic was reached on week 20 and the number of confirmed cases has been decreasing since then. The weekly number of reported confirmed cases in week 29 and 30 2021 is higher compared to the cases reported during the same period in 2019 and 2020.

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 11 August 2021, one case has been reported, including no confirmed cases and no deaths.

Cook Islands: In 2021 and as of 11 July 2021, 217 cases have been reported, including no deaths.

Fiji: In 2021 and as of 7 February 2021, 300 cases have been reported, including no deaths.

French Polynesia: In 2021 and as of 12 August 2021, 36 cases have been reported, including one confirmed case and no deaths. This is an increase of 22 new cases and no new deaths since 4 July 2021.

Marshall Islands: In 2021 and as of 14 March 2021, 12 cases have been reported, including no deaths.

New Caledonia: In 2021 and as of 23 August 2021, 115 cases have been reported, including 92 confirmed cases and no deaths. This is an increase of two new cases and no new deaths since 22 July 2021.

Vanuatu: In 2021 and as of 04 August 2021, 18 cases have been reported, including 18 confirmed cases and no deaths.

Wallis and Futuna: In 2021 and as of 8 August 2021, 67 cases have been reported, including 67 confirmed cases and no deaths. This is an increase of four new cases and no new deaths since 14 July 2021.

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 mainland Europe. The current likelihood of the occurrence of local transmission events of chikungunya and dengue viruses in mainland EU/EEA is high, as the environmental conditions are currently extremely favourable for the growth of mosquito populations and virus replication of the vector. 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.

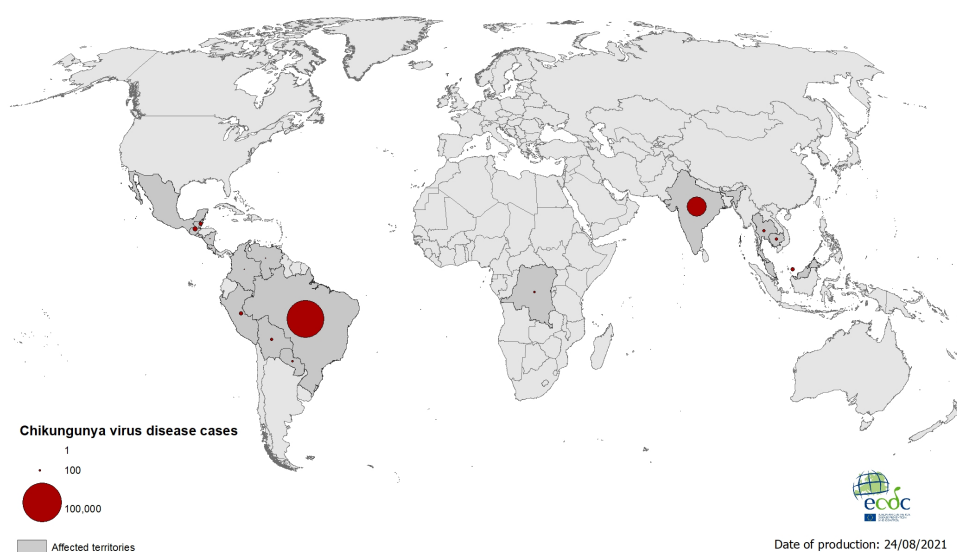
Geographical distribution of chikungunya virus disease cases reported worldwide, June to August 2021

ECDC



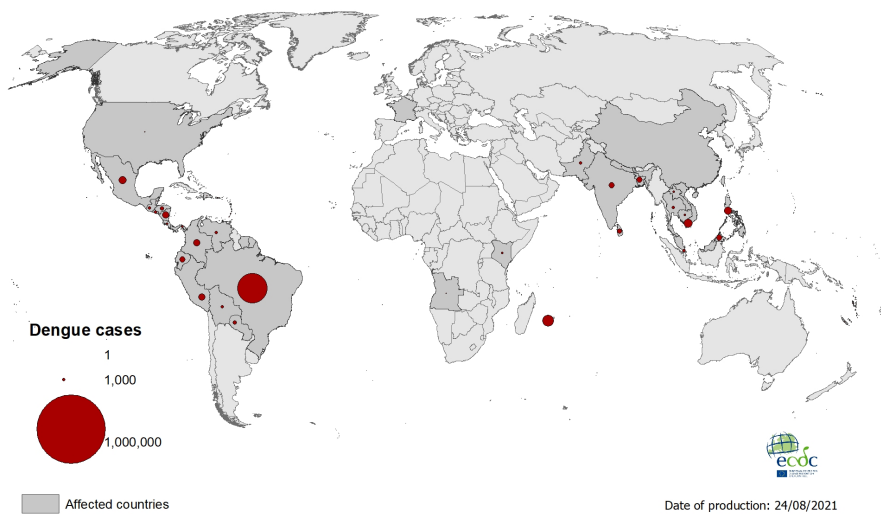
Geographical distribution of chikungunya virus disease cases reported worldwide, January to August 2021

ECDC

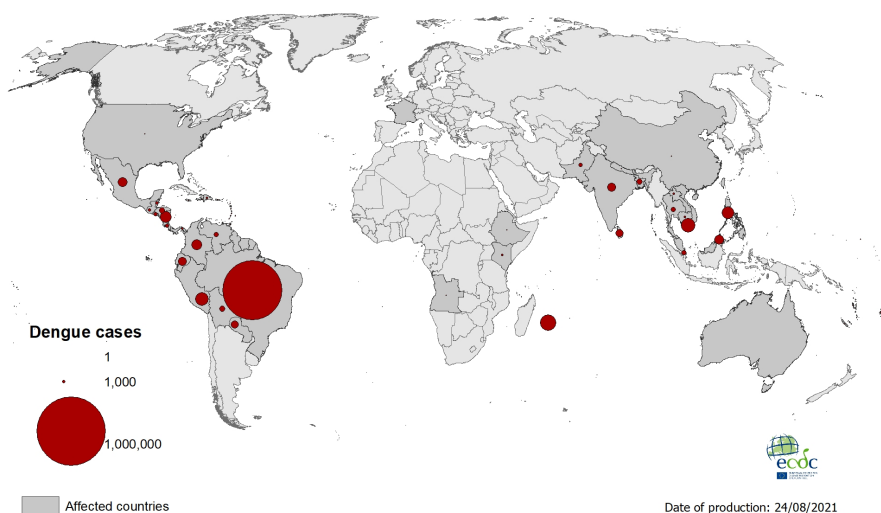


Geographical distribution of dengue cases reported worldwide, June to August 2021

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



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

Opening date: 20 April 2006

Latest update: 27 August 2021

Epidemiological summary

Americas

Haiti: No new cases have been reported since the last update. In 2020 and 2021, no confirmed cholera cases were reported in Haiti. According to a [UNICEF report](#), the last confirmed cholera cases in Haiti were reported in February 2019. In 2019, Haiti reported 684 suspected cases, including three deaths (CFR: 0.4%). Since the beginning of the outbreak in 2010, and as of 25 January 2020, Haiti has reported 820 461 suspected cholera cases, including 9 792 deaths (CFR: 1.2%).

Dominican Republic: No new cases have been reported since the last update. In 2021, no cholera cases have been reported in the Dominican Republic.

Africa

DR Congo: No new cases have been reported since the last update. In 2021, and as of 27 June, 3 516 suspected cholera cases, including 93 deaths (CFR: 2.60%), have been reported from 76 health zones across 14 provinces of the Democratic Republic of the Congo.

Ethiopia: No new cases have been reported since the previous CDTR. In 2021, as of 2 May the country has reported a total of 1 758 cases and 15 deaths (CFR 0.9%).

Mozambique: Since the previous CDTR no new cases have been reported. Since the beginning of the outbreak on 20 February 2020 and as of 27 June 2021, a total of 5 681 cases of cholera, including 35 deaths, have been reported.

Nigeria: Between 1 January and 13 August 2021, a total of 37 819 suspected cases of cholera, 359 confirmed cases and 1 1178 deaths have been reported from 23 states and Federal Capital Territory (FCT). The affected states are Benue, Delta, Zamfara, Gombe, Bayelsa, Kogi, Sokoto, Bauchi, Kano, Kaduna, Plateau, Kebbi, Cross River, Niger, Nasarawa, Jigawa, Yobe, Kwara, Enugu, Adamawa, Katsina, Borno, Taraba and FCT.

Niger: Since 7 Jun 2021, and as of 16 August 2021, in the four regions of Tahoua, Tillaberi, Maradi and Zinder and the city of Niamey, a total of 845 cases including 35 deaths have been notified (CFR = 4.2%). Most of the cases are related to the epidemic which has been ongoing for several months in the neighbouring regions of northern Nigeria where there is significant mixing of cross-border populations and heavy rainfall recorded during this period. Maradi and Zinder have recurrently recorded cholera outbreaks, most often involving border transmission.

Burkina Faso: On 17 August 2021, one imported case of cholera was reported linked to the Niger outbreak.

Kenya: In 2021, and as of 18 July, 36 cases with 12 confirmed cases have been recorded in Garissa and Turkana Counties. Garissa's outbreak was linked to the Dagahaley Refugee Camp, which is still ongoing. Turkana's outbreak it has been controlled.

No updates were available for the outbreaks in **Togo** and **Cameroon** reported earlier this year.

Asia

Bangladesh: In 2021, and as of 8 August, 77 122 acute watery diarrhoea (AWD) cases were reported in Cox's Bazar, Bangladesh. Among these cases, 94 tested positive by means of a cholera rapid diagnostic test or culture. This represents an increase of 16 705 acute watery diarrhoea (AWD) cases and 52 cholera cases confirmed using a cholera rapid diagnostic test or culture since the last CDTR report.

India: Since the previous CDTR update and according to [media sources](#), as of 14 August 2021, a total of 447 cholera cases were reported in Baltana, Haryana State. In addition, further [media](#) reported 50 suspected cases in Vadodara city.

Yemen: In 2021, and as of 6 June, 15 863 suspected cholera cases have been reported, including three deaths, making the CFR 0.02%.

Disclaimer: Data presented in this report originate from several sources, both official public health authorities and non-official, such as the media. Data completeness depends on the availability of reports from surveillance systems and their accuracy, which varies between countries. All data should be interpreted with caution as there may be areas of under-reporting and figures may not reflect the actual epidemiological situation.

ECDC assessment

Cholera cases have continued to be reported in eastern Africa, the Horn of Africa, and the Gulf of Aden over the past few months. Cholera outbreaks have also been reported in the western and southern part of Africa and in some areas of Asia. Despite the high number of cholera outbreaks reported worldwide, few cases are reported each year among returning EU/EEA travellers. The risk of cholera infection in travellers visiting countries with ongoing outbreaks remains low, although sporadic infections among EU/EEA travellers are possible. In 2018, 26 cases were reported in EU/EEA Member States, while 17 and 23 cases were reported

in 2017 and 2016, respectively. All cases had travel history to cholera-affected areas. The risk of further transmission of *Vibrio cholerae* within the EU/EEA is very low.

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

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

Actions

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

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