

I. Executive summary

EU Threats

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

Opening date: 7 January 2020

Latest update: 4 December 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 27 November 2020 and as of 4 December 2020, 4 032 218 new cases of coronavirus disease (COVID-19) (in accordance with the applied case definition in the countries) have been reported, including 73 925 new deaths.

Globally, the number of cases has increased from 61 079 040 to 65 111 258 and the number of deaths has risen from 1 433 516 to 1 507 441.

In the EU/EEA and the United Kingdom (UK), the number of cases has increased from 12 709 336 to 13 680 014 (+ 970 678 cases), and the number of deaths has risen from 311 529 to 339 409 (+ 27 880 deaths).

More details are available [here](#).

Legionnaires' disease outbreak – Portugal – October 2020

Opening date: 19 November 2020

Latest update: 4 December 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

The public health authority in Portugal has updated ECDC on an outbreak of Legionnaires' disease. Since the previous report on 21 November 2020 and as of 3 December 2020, a further seven cases and four deaths have been reported, resulting in 79 cases and 13 deaths identified since 29 October, in the Norte (Northern) Region of Portugal.

Non EU Threats

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

Opening date: 9 December 2019

Latest update: 4 December 2020

Global public health activity to eradicate polio is continuing, with efforts being made to immunise every child until transmission of the virus has stopped. On 5 May 2014, polio was declared a public health emergency of international concern (PHEIC) by the World Health Organization due to concerns over the increased circulation and international spread of wild poliovirus in 2014. The Emergency Committee under the International Health Regulations (2005) stated that the risk of the international spread of poliovirus remains a Public Health Emergency of International Concern (PHEIC). On 14 October 2020, the [twenty-sixth](#) meeting of the Emergency Committee under the International Health Regulations (2005) (IHR) on the international spread of poliovirus took place.

In June 2002, the WHO European Region was officially declared polio-free.

→Update of the week

Since the previous update and as of 1 December 2020, 106 cases of polioviruses (WPV1, cVDPV1 and cVDPV2) have been reported, five of which were caused by the WPV1 strain, two by the cVDPV1 strain and 99 by the cVDPV2 strain.

Wild poliovirus (WPV1):

- Three cases of Acute Flaccid Paralysis (AFP) caused by WPV1 have been reported in Afghanistan.
- Two cases of Acute Flaccid Paralysis (AFP) caused by WPV1 have been reported in Pakistan.
- 24 WPV1 environmental samples have also been detected: 23 in Pakistan and one in Afghanistan.

Circulating vaccine-derived poliovirus (cVDPV):

- Two new cases of AFP caused by cVDPV1 have been reported in Yemen.
- 99 cases of AFP caused by cVDPV2 have been reported from 12 countries: Afghanistan (39), Cote d'Ivoire (16), Burkina Faso (9), Democratic Republic of the Congo (8), South Sudan (7), Sudan (7), Somalia (4), Pakistan (3), Mali (2), Niger (2), Chad (1), and Nigeria (1).
- No new cases of cVDPV3 have been reported.
- 76 cVDPV2 environmental samples have also been detected: Pakistan (33), Afghanistan (32), Cote D'Ivoire (4), Sudan (3), South Sudan (2), Ghana (1) and Somalia (1).

The third nationwide polio vaccination campaign was announced in [Pakistan](#), starting 30 November 2020. Across the country, 39 million children under the age of 5 will receive the polio vaccine.

Influenza – Multi-country – Monitoring 2020/2021 season

Opening date: 14 October 2020

Latest update: 4 December 2020

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

→Update of the week

Week 48/2020 (23–29 November 2020)

Influenza activity remained at interseasonal levels.

Of 804 sentinel specimens tested for influenza viruses in week 48, four were positive and of 10 960 non-sentinel specimens tested for influenza viruses, 40 tested positive. Both influenza type A and type B viruses were detected.

During week 48/2020, there were three hospitalised laboratory-confirmed influenza cases from ICUs and a further three cases in wards outside of ICUs.

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

Opening date: 24 September 2012

Latest update: 4 December 2020

Since the disease was first identified in Saudi Arabia in April 2012, more than 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 and as of 2 December 2020, one additional case of MERS-CoV has been reported by the Saudi Arabian health authorities.

II. Detailed reports

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

Opening date: 7 January 2020

Latest update: 4 December 2020

Epidemiological summary

Since 31 December 2019 and as of 4 December 2020, 65 111 258 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 1 507 441 deaths.

Cases have been reported from:

Africa: 2 216 032 cases; the five countries reporting most cases are South Africa (800 872), Morocco (368 624), Egypt (117 156), Ethiopia (111 579) and Tunisia (99 280).

Asia: 16 034 224 cases; the five countries reporting most cases are India (9 571 559), Iran (1 003 494), Iraq (558 767), Indonesia (557 877) and Bangladesh (471 739).

America: 27 926 147 cases; the five countries reporting most cases are United States (14 139 703), Brazil (6 487 084), Argentina (1 447 715), Colombia (1 343 322) and Mexico (1 144 643).

Europe: 18 881 970 cases; the five countries reporting most cases are Russia (2 402 949), France (2 257 331), Spain (1 675 902), United Kingdom (1 674 134) and Italy (1 664 829).

Oceania: 52 189 cases; the five countries reporting most cases are Australia (27 939), French Polynesia (14 716), Guam (6 942), New Zealand (1 713) and Papua New Guinea (669).

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

Deaths have been reported from:

Africa: 52 844 deaths; the five countries reporting most deaths are South Africa (21 803), Egypt (6 713), Morocco (6 063), Tunisia (3 359) and Algeria (2 480).

Asia: 277 963 deaths; the five countries reporting most deaths are India (139 188), Iran (49 348), Indonesia (17 355), Iraq (12 361) and Philippines (8 446).

America: 744 091 deaths; the five countries reporting most deaths are United States (276 316), Brazil (175 270), Mexico (108 173), Argentina (39 305) and Colombia (37 305).

Europe: 431 403 deaths; the five countries reporting most deaths are United Kingdom (60 113), Italy (58 038), France (54 140), Spain (46 038) and Russia (42 176).

Oceania: 1 133 deaths; the five countries reporting most deaths are Australia (908), Guam (112), French Polynesia (77), New Zealand (25) and Papua New Guinea (7).

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

EU/EEA and the UK:

As of 4 December 2020, 13 680 014 cases have been reported in the EU/EEA and the UK: France (2 257 331), Spain (1 675 902), United Kingdom (1 674 134), Italy (1 664 829), Germany (1 130 237), Poland (1 028 610), Belgium (584 754), Czechia (537 663), Netherlands (537 397), Romania (492 211), Portugal (307 618), Austria (291 437), Sweden (272 643), Hungary (238 056), Bulgaria (155 193), Croatia (139 415), Greece (111 537), Slovakia (111 208), Denmark (85 140), Slovenia (81 349), Ireland (73 228), Lithuania (69 582), Norway (36 968), Luxembourg (35 802), Finland (26 442), Latvia (19 307), Estonia (13 469), Cyprus (11 523), Malta (10 197), Iceland (5 448) and Liechtenstein (1 384).

As of 4 December 2020, 339 409 deaths have been reported in the EU/EEA and the UK: United Kingdom (60 113), Italy (58 038), France (54 140), Spain (46 038), Poland (18 828), Germany (18 034), Belgium (17 033), Romania (11 876), Netherlands (9 552), Czechia (8 641), Sweden (7 007), Hungary (5 513), Portugal (4 724), Bulgaria (4 503), Austria (3 447), Greece (2 706), Ireland (2 080), Croatia (1 964), Slovenia (1 096), Slovakia (930), Denmark (858), Lithuania (590), Finland (408), Norway (353), Luxembourg (334), Latvia (235), Malta (148), Estonia (123), Cyprus (54), Iceland (27) and Liechtenstein (16).

EU:

As of 4 December 2020, 11 962 080 cases and 278 900 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 [Director-General of WHO](#) declared the COVID-19 outbreak a pandemic. The [third](#), [fourth](#) and [fifth](#) 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

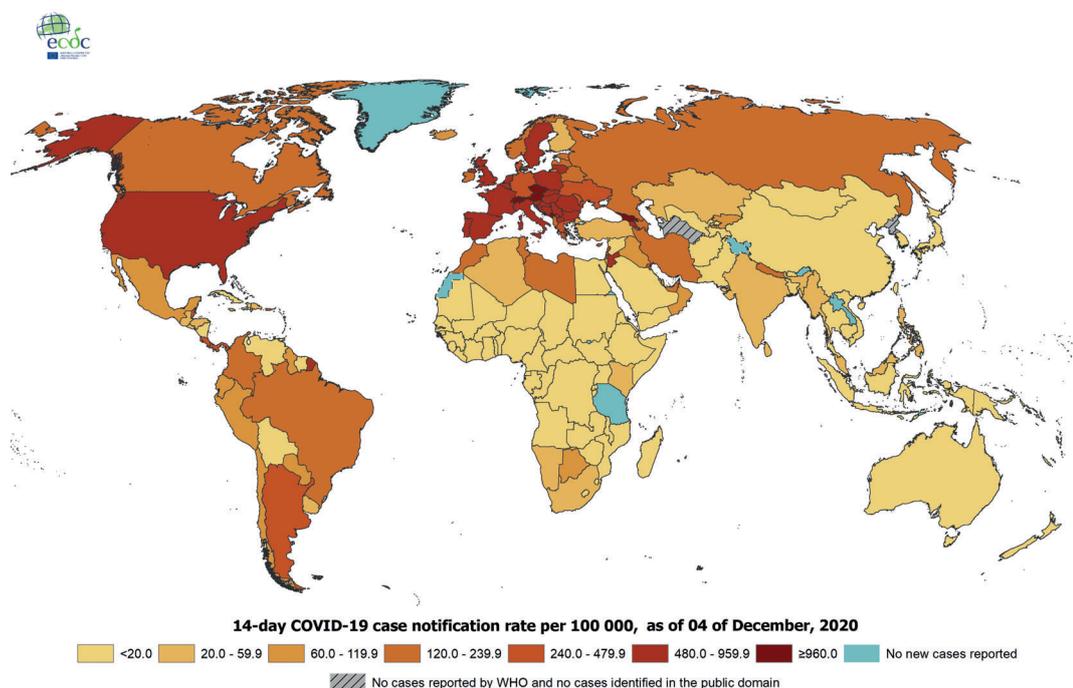
Information on the COVID-19 situation and a risk assessment can be found on [ECDC's website](#).

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.

Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, as of 4 December 2020

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: 04/12/2020

Legionnaires' disease outbreak – Portugal – October 2020

Opening date: 19 November 2020

Latest update: 4 December 2020

Epidemiological summary

The public health authority in Portugal has updated ECDC on an outbreak of Legionnaires' disease. Since the previous report on 21 November 2020 and as of 3 December 2020, a further seven cases and four deaths have been reported.

Since 29 October 2020, a cluster of 79 cases of Legionnaires' disease has been identified in the Norte (Northern) Region of Portugal, originating in the Póvoa de Varzim, Vila do Conde and Matosinhos counties. The average age of the cases is 74 years (range 46 to 97). During the last week two more cases were reported. Thirteen deaths have occurred among patients aged between 74 to 92 years.

The epidemiological investigation is ongoing, including clinical and environmental assessment and sampling for isolate comparison.

So far, there has been no match between the genotypes of *Legionella pneumophila* serogroup 1 isolated from patients and environmental sources.

5/10

The source of exposure remains unknown.

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 [outbreak](#) 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 when, due to COVID-19 control measures, there may be changes in the level of activity at tourist facilities and in industrial infrastructure, potentially affecting water systems. The ESCMID Study Group for Legionella Infections (ESGLI) has produced [guidance on managing Legionella risk in building water systems during the COVID-19 pandemic](#).

Actions

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

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

Opening date: 9 December 2019

Latest update: 4 December 2020

Epidemiological summary

Summary:

Wild poliovirus: In 2020 overall, as of 1 December, 138 cases have been reported from two endemic countries: Pakistan (82) and Afghanistan (56).

Circulating vaccine-derived poliovirus (cVDPV): In 2020 overall, as of 1 December, 19 cases of cVDPV1 have been reported by Yemen (18) and Malaysia (1). In addition, 739 cases of cVDPV2 have been reported from 22 countries: Afghanistan (160), Pakistan (104), Chad (80), Cote D'Ivoire (68), Democratic Republic of the Congo (68), Burkina Faso (49), Sudan (46), Guinea (29), Mali (28), South Sudan (22), Ethiopia (21), Somalia (13), Ghana (12), Niger (9), Togo (9), Cameroon (7), Nigeria (4), Angola (3), Central African Republic (3), Benin (2), Congo (1) and the Philippines (1). No cases of cVDPV3 have been reported.

[Global guidance from WHO](#) recommends temporarily postponing preventive immunisation campaigns where there is no active outbreak of a vaccine-preventable disease. Operationally, polio vaccination campaigns are incompatible with physical distancing recommendations. WHO guidance calls for countries to prioritise routine immunisation of children in essential service delivery. As a result, the Global Polio Eradication Initiative (GPEI) has taken the decision to temporarily delay immunisation campaigns.

As part of the GPEI programme, surveillance activities will continue, to the extent possible, to monitor the evolution of the situation. In addition, comprehensive, context-specific plans to resume efforts are being developed, to be launched whenever and wherever the situation allows.

Advancing the development of [novel oral polio vaccine type 2 \(nOPV2\)](#) and facilitating its use is an important step forward for GPEI. The new vaccine is being considered for deployment under WHO's [Emergency Use Listing procedure \(EUL\)](#) to enable rapid field availability. The nOPV2 is anticipated to have a substantially lower risk of seeding new type 2 vaccine-derived polioviruses than mOPV2.

Sources: [Global Polio Eradication Initiative](#) | [ECDC](#) | [ECDC Polio interactive map](#) | [WHO DON](#) | [WPV3 eradication certificate](#)

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 for 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 European

6/10

Regional Commission for Certification of Poliomyelitis Eradication, one EU/EEA country (Romania) and two neighbouring countries (Bosnia and Herzegovina, and Ukraine) remain at high risk of a [sustained polio outbreak](#). According to the same report, an additional 15 EU/EEA countries are at intermediate risk of sustained polio outbreaks, following wild poliovirus importation or the emergence of cVDPV due to suboptimal programme performance and low population immunity. The continuing circulation of wild poliovirus type 1 (WPV1) in two countries shows that there is still a risk of the disease being imported into the EU/EEA. Furthermore, the worrying occurrence of outbreaks of circulating vaccine-derived poliovirus (cVDPV), which only emerge and circulate due to lack of polio immunity in the population, shows the potential risk for further international spread.

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

[ECDC](#) 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](#)

Actions

ECDC provides updates on the polio situation on a monthly basis. The agency also monitors polio cases worldwide through its epidemic intelligence activities in order to highlight polio eradication efforts and identify events that increase the risk of wild poliovirus being reintroduced into the EU/EEA.

ECDC maintains an [interactive map](#) showing countries that are still endemic for polio and have ongoing outbreaks of cVDPV.

Influenza – Multi-country – Monitoring 2020/2021 season

Opening date: 14 October 2020

Latest update: 4 December 2020

Epidemiological summary

Week 48/2020 (23–29 November 2020)

Influenza activity remained at interseasonal levels.

Of 804 sentinel specimens tested for influenza viruses in week 48, four were positive and of 10 960 non-sentinel specimens tested for influenza viruses, 40 tested positive. Both influenza type A and type B viruses were detected.

During week 48/2020, there were three hospitalised laboratory-confirmed influenza cases from ICUs and a further three cases in wards outside of ICUs.

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, 288 specimens have tested positive for influenza viruses, five from sentinel sources and 283 from non-sentinel sources, with A(H1)pdm09, A(H3) and type B viruses detected.

Since the start of the season, there have been 10 hospitalised laboratory-confirmed influenza cases reported from ICUs (nine infected with type A viruses and one with type B). A further three cases (all type B viruses) in wards outside ICUs have been reported, with one fatality.

WHO has published [recommendations](#) 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: [EuroMOMO](#) | [Flu News Europe](#) | [Influenzaneet](#)

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 the 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 will 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 [Flu News Europe](#) website.

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

Opening date: 24 September 2012

Latest update: 4 December 2020

Epidemiological summary

From 1 January 2020 to 2 December 2020, 62 MERS-CoV cases have been reported in Saudi Arabia (58), United Arab Emirates (2) and Qatar (1), including 20 deaths in Saudi Arabia. From these 62 cases, 51 were primary cases, 17 of whom reported contact with camels, and 11 were healthcare-acquired cases. In 2020, 77.6% of the 58 cases in Saudi Arabia were reported in Riyadh (26), Asir (7), Eastern Province (6) and Makkah (6).

Since April 2012 and as of 2 December 2020, 2 578 cases of MERS-CoV, including 935 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](#)

ECDC assessment

Human cases of MERS-CoV continue to be reported in the Arabian Peninsula, particularly in Saudi Arabia. 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 an ECDC [rapid risk assessment](#) published on 29 August 2018, which also provides details on the last case reported in Europe.

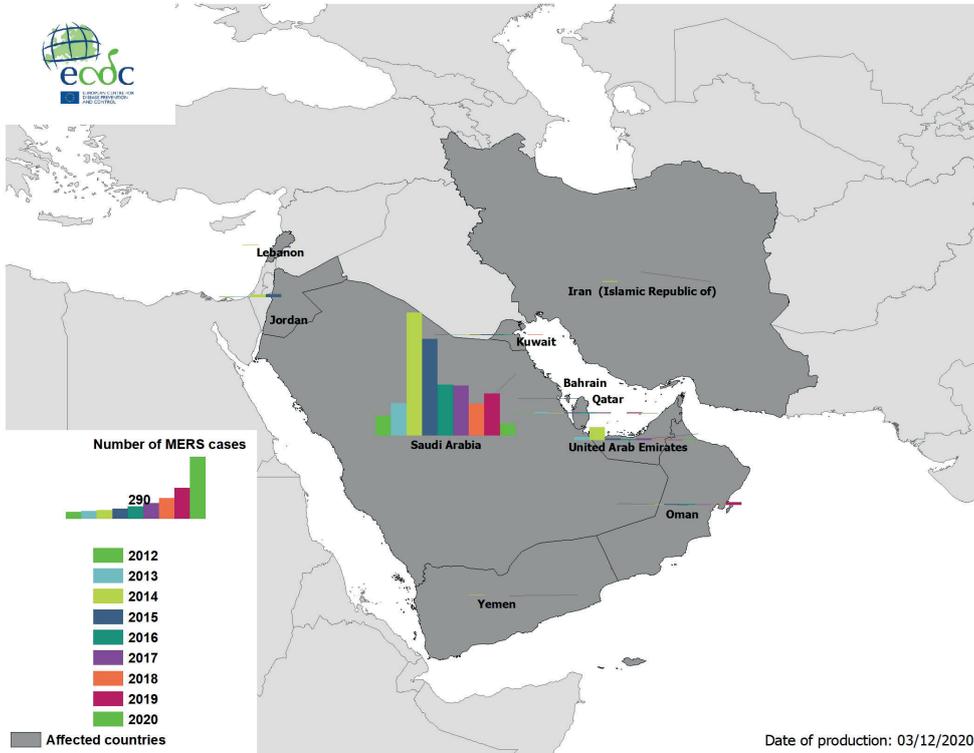
ECDC published a technical report, '[Health emergency preparedness for imported cases of high-consequence infectious diseases](#)', in October 2019, which will be useful for EU Member States wanting to assess their level of preparedness for a disease such as MERS. ECDC also published '[Risk assessment guidelines for infectious diseases transmitted on aircraft \(RAGIDA\) – Middle East Respiratory Syndrome Coronavirus \(MERS-CoV\)](#)' on 22 January 2020.

Actions

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

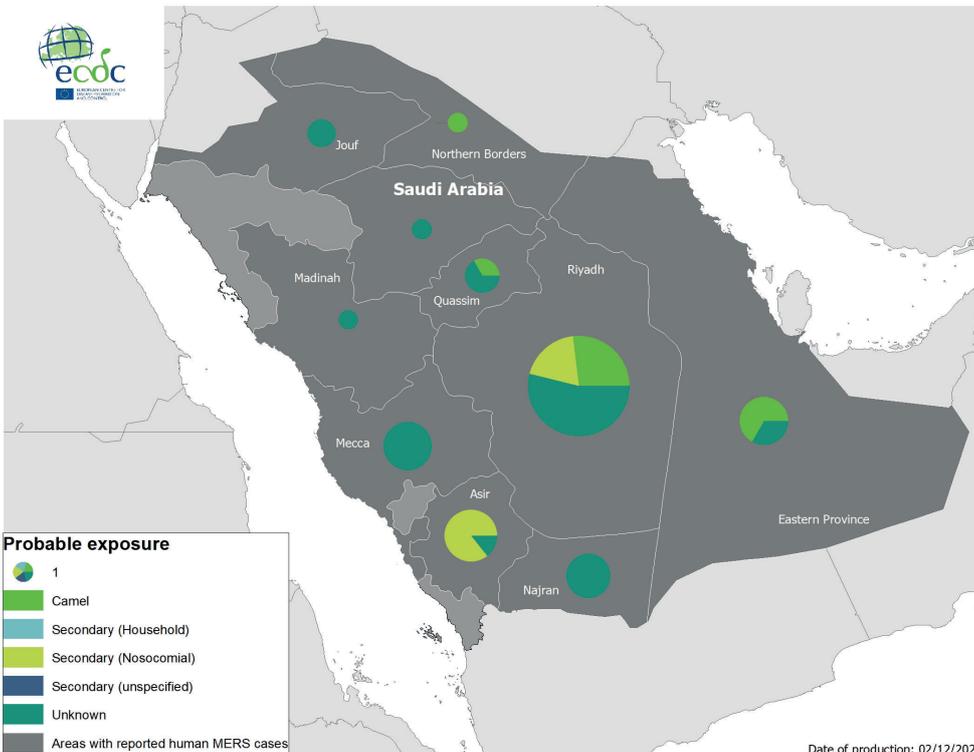
Geographical distribution of confirmed MERS-CoV cases by country of infection and year, from April 2012 to 2 December 2020

Source: ECDC



Geographical distribution of confirmed MERS-CoV cases by probable region of infection and exposure, from 1 January 2019 to 2 December 2020

Source: ECDC



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