

This weekly bulletin provides updates on threats monitored by ECDC.

NEWS

The Olympic Games of Tokyo 2020

The Olympic Games of Tokyo 2020 (OG) will take place from 23 July–8 August 2021 with some of events starting already on 21 July 2021. The Paralympic Games will be held from 24 August–5 September 2021. The games were rescheduled to this year due to COVID-19 pandemic. Over 11 000 OG athletes, including over 2 600 athletes from the European Union, will compete in [33 sports, 339 events across 42 competition venues](#). In addition, almost 40 000 support staff from all over the world are expected to attend the OG. Most of the venues are located in the Greater Tokyo area. Spectators from abroad will not be allowed to Japan as per announcement in [March 2021](#). Local spectators will not be allowed in four out of seven prefectures: Tokyo, Chiba, Kanagawa and Saitama prefectures, following declaration of emergency state in Japan between 12 July and 22 August 2021, according to a [media report](#). In Miyagi, Fukushima, and Shizuoka prefectures the venues can be filled to 50% of capacity with a maximum of 10 000 local spectators.

Epidemiological situation in Japan

COVID-19: as of 30 June 2021, overall [COVID-19](#) notification rates started to increase slightly after several weeks of decline, especially in Tokyo and the metropolitan area. Hospitalisation and death rates are declining in recent weeks. Overall, Japan reported 811 712 cases, including 14 897 deaths according to the [Ministry of Health, Labour and Welfare of Japan](#) as of [3 July 2021](#). Of all the tests performed, the B.1.1.7 lineage (alpha variant) is most frequently detected, but there is an increase of the number of reports of the B.1.617.2 lineage variants (including delta variant) which is at 30%, according to a [media report](#). The number of vaccinations has exceeded 57 million nationwide (45% of the total 127 million population), of which two doses were received by 16.8% of the population and one dose was received by 28.4% of the population, according to the data on [8 July 2021](#).

Other diseases: according to the [National Institute of Infectious Diseases](#) in Japan, in 2021 and as of week 25 (ending on 27 June 2021) there are 7 426 cases of tuberculosis reported from all prefectures. In 2021, 3 149 cases of syphilis and 482 cases AIDS have been reported. No cases of Japanese encephalitis were reported in 2021. Antimicrobial resistance is reported for Carbapenem-resistant *enterobacteriaceae* infection (853 cases), Vancomycin-resistant Enterococcus infection (61), and Vancomycin-resistant *S. aureus* infection (0).

The overall risk of SARS-CoV-2 infection related to the expected increase in circulation of the Delta VOC the risk for participating athletes and attending support staff is considered to be low for fully vaccinated individuals and moderate for partially or unvaccinated individuals considering the strict measures in place; the risk for EU/EEA citizens travelling to Tokyo is low for fully vaccinated individuals and high for partially or unvaccinated individuals. Overall, in the countries where mass gathering events take place, in the absence of sufficient mitigation measures the risk of local and pan-European transmission of COVID-19, including the spread of variants of concern, is expected to increase. Options for COVID-19 response are described in ECDC's latest COVID-19 rapid risk assessment [Assessing SARS-CoV-2 circulation, variants of concern, non-pharmaceutical interventions and vaccine rollout in the EU/EEA, 15th update](#), published on 10 June 2021 and its Threat Assessment Brief, [Implications for the EU/EEA on the spread of the SARS-CoV-2 Delta \(B.1.617.2\) variant of concern](#), published on 23 June 2021.

COVID-19-related country profiles in the EU/EEA can be found [here](#), and country profiles for countries outside the EU/EEA are available [here](#).

Overall, the risk for EU/EEA citizens to become infected with other communicable diseases in Japan is considered low if preventive measures are applied.

ECDC will be monitoring Tokyo OG through its epidemic intelligence activities on a daily basis from 16 July–13 August 2021 and will report if major events are detected.

I. Executive summary

EU Threats

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

Opening date: 7 January 2020

Latest update: 9 July 2021

On 31 December 2019, the Wuhan Municipal Health and Health Commission reported a cluster of pneumonia cases of unknown aetiology with a common source of exposure at Wuhan's 'South China Seafood City' market. Further investigations identified a novel coronavirus as the causative agent of respiratory symptoms for these cases. The outbreak rapidly evolved, affecting other parts of China and other countries worldwide. On 30 January 2020, WHO declared that the outbreak of coronavirus disease (COVID-19) constituted a Public Health Emergency of International Concern (PHEIC), accepting the Committee's advice and issuing temporary recommendations under the International Health Regulations (IHR). On 11 March 2020, the Director-General of WHO declared the COVID-19 outbreak a pandemic.

→Update of the week

Since week 2021-25 and as of week 2021-26, 2 708 238 new cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) and 53 862 new deaths have been reported.

Since 31 December 2019 and as of week 2021-26, 184 424 524 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 3 986 982 deaths.

In the EU/EEA, 33 270 049 cases have been reported, including 740 809 deaths.

As of 8 July 2021, the EU/EEA has reported an increase in weekly cases (62.7%) compared to the previous week. The highest increase was observed in Luxembourg, with Cyprus, Greece, Malta, Denmark and the Netherlands reporting weekly increases in new cases of 100-200%. Spain and Liechtenstein have had weekly increases above 50%. The countries with the highest 14-day notification rate are: Cyprus (760.8), Portugal (283.6), Spain (264.0), Luxembourg (191.8), Ireland (123.6), Greece (112.1), Netherlands (93.2) and Denmark (84.7).

More details are available [here](#). 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: 9 July 2021

During the transmission season for West Nile virus (WNV), which usually runs from June to November, ECDC monitors the occurrence of infections in the European Union (EU), the European Economic Area (EEA), and EU-neighbouring countries. ECDC publishes weekly epidemiological updates to inform blood safety authorities. Data reported through The European Surveillance System (TESSy) are presented at the NUTS 3 (nomenclature of territorial units for statistics 3) level for EU/EEA Member States and at the GAUL 1 (global administrative unit layers 1) level for EU-neighbouring countries.

→Update of the week

Between 2 and 8 July 2021, European Union (EU) and European Economic Area (EEA) countries reported one human case of West Nile virus (WNV) infection and no deaths related to WNV infections. A case was reported by Italy. EU-neighbouring countries reported no human cases of WNV infection.

This week, among the reporting countries, the following province reported a human case of WNV infection for the first time: La Spezia in Italy.

In the [CDTR 19 June](#), ECDC noted a [media report](#) of a case of WNV infection detected in the [province of Seville](#), Spain. However, according to the Spanish authorities, additional testing by the reference laboratory found no evidence of a WNV infection in this patient.

Measles – Multi-country (World) – Monitoring European outbreaks

Opening date: 9 February 2011

Latest update: 9 July 2021

A sharp decrease in measles cases has been observed globally during the COVID-19 pandemic. A few measles cases are being reported in the EU/EEA, including in countries that had previously eliminated or interrupted endemic transmission.

→Update of the week

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 11 June 2021, four new cases have been reported by two countries in EU/EEA: Germany (3) and Poland (1). Other countries did not report new cases of measles.

No deaths have been reported by EU/EEA countries in 2021.

Relevant updates outside the EU/EEA are available for WHO Regional Office for Europe (EURO), WHO Regional Office for Africa (WHO AFRO), WHO Pan American Health Organization (PAHO). There were no updates for WHO Regional Office for Eastern Mediterranean (EMRO), WHO Regional Office for South-East Asia (SEARO) and WHO Western Pacific Region (WPRO).

Disclaimer: the [monthly measles report published in the CDTR](#) provides the most recent data on cases and outbreaks from the publicly available information of national public health authorities or the media. This report is supplementary to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 30 EU/EEA countries to The European Surveillance System (TESSy). Data presented in the two monthly reports may differ.

Mass gathering monitoring- Multi-country- UEFA European Football Championship 2020 (2021)

Opening date: 3 June 2021

Latest update: 9 July 2021

The UEFA European Football Championship (UEFA EURO 2020), which was postponed in March 2020 due to the COVID-19 pandemic, takes place between 11 June and 11 July 2021. Eleven cities are hosting the matches, of which seven are in EU countries: Denmark, Germany, Hungary, Italy, the Netherlands, Romania, and Spain. Other host cities are located in Azerbaijan, Russia, England, and Scotland. Twenty-four teams will be playing with an estimated 460 000 spectators -capacity has been reduced in stadiums due to COVID-19 restrictions.

ECDC will be intensifying its enhanced epidemic intelligence activities between 4 June and 16 July 2021, using a targeted and systematic screening approach on a daily basis and tailored tools.

→Update of the week

From 2 July to 8 July 2021, several COVID-19-related signals were detected in the UEFA EURO 2020 host and participating countries.

Dengue outbreak - France, Réunion - 2021

Opening date: 29 April 2021

Latest update: 9 July 2021

A dengue epidemic is ongoing in France's overseas department, Réunion.

→Update of the week

In Réunion, [French authorities](#) have reported 27 213 confirmed dengue cases for 2021, including 1 250 confirmed cases in week 24 and 806 cases in week 25, with the whole territory affected. Among the hospitalised dengue cases, 24% had severe dengue, which is a slightly higher proportion than in 2019 (17%) and 2020 (16%). Fifteen deaths are considered to be directly related to dengue. This represents an increase of 2 377 cases since the last CDTR report with data as of 21 June 2021.

Non EU Threats

New! Human case of swine influenza A(H3N2)v virus – Canada – 2021

Opening date: 7 July 2021

Latest update: 9 July 2021

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

→Update of the week

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

Opening date: 2 July 2021

Elevated sea surface temperature (SST) in marine environments with low salt content offer ideal growth conditions for certain *Vibrio* species. These conditions occur during the summer months in estuaries and enclosed water bodies with moderate salinity. ECDC has developed a model to map the environmental suitability for *Vibrio* growth in the Baltic Sea ([ECDC Vibrio Map Viewer](#)). Please note that this model has been calibrated to the Baltic Region in Northern Europe and might not apply to other worldwide settings prior to validation.

→Update of the week

As of 8 July 2021, in EU/EEA countries overall the environmental suitability for *Vibrio* growth in the Baltic Sea was identified to be very low to low in Germany, Denmark, Sweden and the Gulf of Bothnia (Sweden, Finland); and medium to high in the rest of the Baltic Sea, except in Elblaski (Poland), Klaipeda (Lithuania) and the Gulf of Riga (Estonia, Latvia), where it was very high.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be medium to high in Denmark, Germany, Poland, Sweden and the Gulf of Finland (Estonia, Finland); and very high in the rest of the Baltic Sea except for the Gulf of Bothnia (Sweden, Finland), Skåne county (Sweden), West and South Zealand and Bornholm (Denmark) and Vorpommern-Rügen (Germany) where the risk is very low to low.

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

According to [Finnish authorities](#), three *Vibrio cholerae* infections and one *Vibrio vulnificus* infection have been detected in Finland in 2021.

II. Detailed reports

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

Opening date: 7 January 2020

Latest update: 9 July 2021

Epidemiological summary

Summary: Since 31 December 2019 and as of week 2021-26, 184 424 524 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 3 986 982 deaths.

Cases have been reported from:

Africa: 5 678 119 cases; the five countries reporting most cases are South Africa (2 062 896), Morocco (534 550), Tunisia (447 161), Egypt (282 082) and Ethiopia (276 435).

Asia: 50 059 288 cases; the five countries reporting most cases are India (30 585 229), Iran (3 241 037), Indonesia (2 284 084), Philippines (1 436 369) and Iraq (1 371 475).

America: 73 345 124 cases; the five countries reporting most cases are United States (33 717 574), Brazil (18 769 808), Argentina (4 552 687), Colombia (4 375 861) and Mexico (2 541 873).

Europe: 55 255 688 cases; the five countries reporting most cases are France (5 786 203), Russia (5 610 941), Turkey (5 444 786), United Kingdom (4 930 533) and Italy (4 263 317).

Oceania: 85 600 cases; the five countries reporting most cases are Australia (30 757), French Polynesia (19 007), Papua New Guinea (17 098), Guam (8 394) and Fiji (7 149).

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

Deaths have been reported from:

Africa: 146 303 deaths; the five countries reporting most deaths are South Africa (61 840), Egypt (16 264), Tunisia (15 482), Morocco (9 319) and Ethiopia (4 331).

Asia: 739 802 deaths; the five countries reporting most deaths are India (402 728), Iran (84 627), Indonesia (60 582), Philippines (25 149) and Pakistan (22 427).

America: 1 926 520 deaths; the five countries reporting most deaths are United States (605 526), Brazil (524 417), Mexico (233 689), Peru (193 389) and Colombia (109 466).

Europe: 1 172 912 deaths; the five countries reporting most deaths are Russia (137 925), United Kingdom (128 231), Italy (127 649), France (111 190) and Germany (91 031).

Oceania: 1 439 deaths; the five countries reporting most deaths are Australia (910), Papua New Guinea (173), French Polynesia (142), Guam (140) and Fiji (39).

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

EU/EEA:

As of week 2021-26, 33 270 049 cases have been reported in the EU/EEA: France (5 786 203), Italy (4 263 317), Spain (3 866 475), Germany (3 731 124), Poland (2 880 308), Netherlands (1 688 448), Czechia (1 668 040), Sweden (1 091 284), Belgium (1 088 534), Romania (1 080 979), Portugal (890 571), Hungary (808 262), Slovakia (778 562), Austria (646 618), Greece (425 964), Bulgaria (422 053), Croatia (360 246), Denmark (295 654), Lithuania (278 950), Ireland (274 306), Slovenia (257 477), Latvia (137 631), Norway (131 945), Estonia (131 207), Finland (96 463), Cyprus (78 022), Luxembourg (71 031), Malta (30 664), Iceland (6 664) and Liechtenstein (3 047).

As of week 2021-26, 740 809 deaths have been reported in the EU/EEA: Italy (127 649), France (111 190), Germany (91 031), Spain (80 934), Poland (75 085), Romania (33 973), Czechia (30 311), Hungary (29 996), Belgium (25 192), Bulgaria (18 084), Netherlands (17 735), Portugal (17 117), Sweden (14 595), Greece (12 737), Slovakia (12 513), Austria (10 492), Croatia (8 219), Ireland (5 000), Slovenia (4 752), Lithuania (4 395), Denmark (2 537), Latvia (2 528), Estonia (1 270), Finland (974), Luxembourg (818), Norway (794), Malta (420), Cyprus (379), Liechtenstein (59) and Iceland (30).

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

Public Health Emergency of International Concern (PHEIC):

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

DISCLAIMER: Notification rates for Sweden may not be reflecting the actual number of cases due to security updates in the SmiNet database.

ECDC assessment

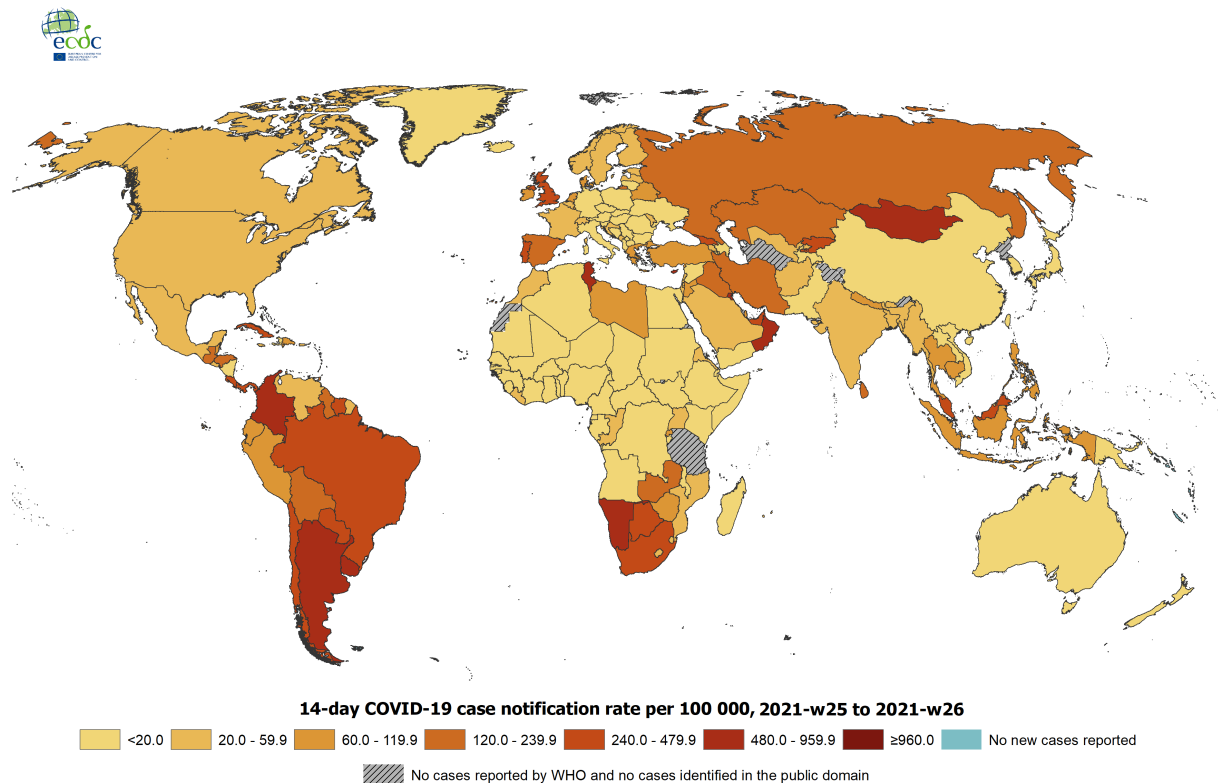
For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

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-w25 to 2021-w26

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: 07/07/2021

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

Opening date: 4 June 2021

Latest update: 9 July 2021

Epidemiological summary

Between 2 and 8 July 2021, European Union (EU) and European Economic Area (EEA) countries reported one human case of West Nile virus (WNV) infection and no deaths related to WNV infections. A case was reported by Italy. EU-neighbouring countries reported no human cases of WNV infection.

This week, among the reporting countries, the following province reported a human case of WNV infection for the first time: La Spezia in Italy.

In the [CDTR of 19 June](#), ECDC noted a [media report](#) of a case of WNV infection detected in the [province of Seville](#), Spain. However, according to the Spanish authorities, additional testing by the reference laboratory found no evidence of a WNV infection in this patient.

Since the beginning of the 2021 transmission season and as of 8 July 2021, EU/EEA countries have reported one human case of WNV infection in Italy and no deaths. EU-neighbouring countries have reported no human cases of WNV infection.

During the current transmission season, within the reporting countries, a single human case of WNV infection was reported. It was reported by La Spezia in Italy, and it was the first time that this province reported a human case.

Since the beginning of the 2021 transmission season, one outbreak among equids and no outbreaks among birds have been reported by EU/EEA countries. The outbreak among equids was reported by Spain.

ECDC links: [West Nile virus infection webpage](#)

Sources: TESSy | Animal Disease Information System

ECDC assessment

So far, one human case has been reported (week 27) from an EU Member State during the 2021 transmission season, which is consistent with observations of seasonal transmission in previous years. In the previous five years, the first human WNV infections were reported to ECDC between weeks 23 and 28.

In accordance with [Commission Directive 2014/110/EU](#), prospective 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.

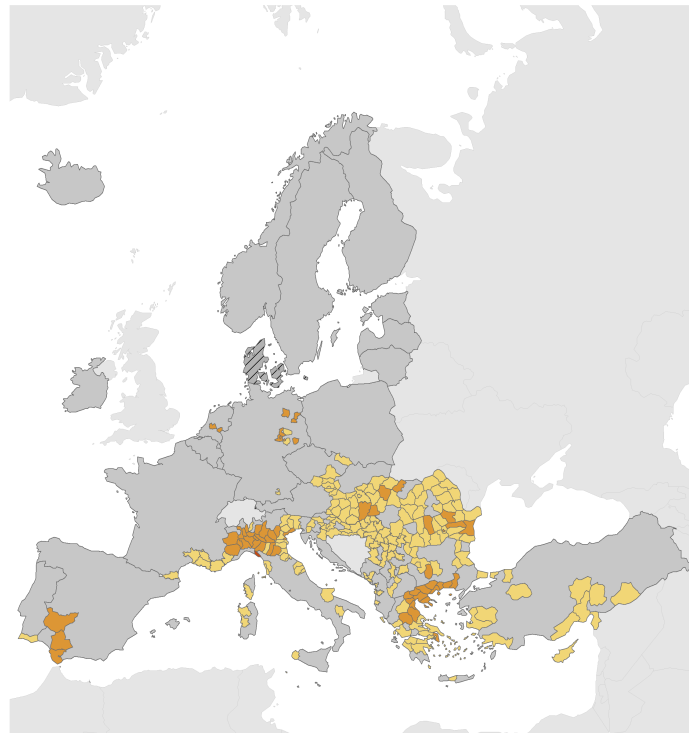
Distribution of human West Nile virus infections by affected areas as of 08.07.

ECDC



Distribution of human West Nile virus infections in NUTS 3 or GAUL 1 regions in the EU/EEA and EU-neighbouring countries during 2011–2021 as of 08 July 2021

- Human infections reported current season (2021)
 - Human infections reported in 2020
 - Human infections reported during 2011–2019
 - No data reported
 - No infections reported
 - Not included
- Countries not visible in the main map extent
- Malta
 - Liechtenstein



Administrative boundaries: © EuroGeographics © UN-FAO © Turkstat. The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union. Map produced by ECDC on 9 July 2021

Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 08.07.

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 08 July 2021

- Human infections, with or without outbreaks among equids and/or birds
 - Outbreaks among equids and/or birds
 - No infections reported
 - Not included
- Countries not visible in the main map extent
- Malta
 - Liechtenstein



Administrative boundaries: © EuroGeographics © UN-FAO © Turkstat. The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union. Map produced by ECDC on 9 July 2021

Measles – Multi-country (World) – Monitoring European outbreaks

Opening date: 9 February 2011

Latest update: 9 July 2021

Epidemiological summary

Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 11 June 2021, four new cases have been reported by two countries in EU/EEA: Germany (3) and Poland (1). Other countries did not report new cases of measles.

No deaths have been reported by EU/EEA countries in 2021.

Relevant updates outside the EU/EEA are available for WHO Regional Office for Europe (EURO), WHO Regional Office for Africa (WHO AFRO), WHO Pan American Health Organization (PAHO). There were no updates for WHO Regional Office for Eastern Mediterranean (EMRO), WHO Regional Office for South-East Asia (SEARO) and WHO Western Pacific Region (WPRO).

EU/EEA countries are encouraged to maintain [routine immunisation sessions](#), provided that COVID-19 response measures allow.

Disclaimer: the [monthly measles report published in the CDTR](#) provides the most recent data on cases and outbreaks from the publicly available information of national public health authorities or media. This report is a supplement to [ECDC's monthly measles and rubella monitoring report](#), based on data routinely submitted by 30 EU/EEA countries to The European Surveillance System (TESSy). Data presented in the two monthly reports may differ.

Epidemiological summary for EU/EEA countries with updates since last month

[Germany](#) reported 33 cases in week 26 (ending on 4 July 2021), an increase of three cases since the national report for week 23 (ending 13 June 2021).

[Poland](#) reported nine cases as of 30 June 2021, an increase of one case since the previous report in May 2021.

Relevant epidemiological summary for countries outside the EU/EEA

A global overview is available on [WHO's website](#). Additional information with the latest available data is provided for several countries.

According to WHO Regional Office for Europe ([EURO](#)) report as of 3 June 2021 and for the reporting period from January to May 2021, sporadic measles cases were reported in: Belgium, Germany, France, Ireland, Kazakhstan, Kyrgyzstan, Poland, Romania, Serbia, Turkey, Ukraine and United Kingdom.

According to the WHO Regional Office for Africa ([AFRO](#)), as of 27 June 2021 (week 26), outbreaks of measles were reported in the following countries: Angola, Burundi, Cameroon, Central African Republic, Chad, Ethiopia, Guinea, Kenya, Liberia, Mali, Mozambique, Niger, Nigeria and South Sudan. There are no reports on measles in the Democratic Republic of the Congo, where a humanitarian crisis continues. In addition, according to [media](#), four deaths were reported in Cameroon where 200 people have been diagnosed with measles. The majority of these are children between nine months and nine years.

According to the WHO Pan American Health Organization ([PAHO](#)) in 2021 and as of 19 June 2021, two countries reported 468 confirmed cases of measles: Brazil (466) and US (2).

No updates were available for WHO Regional Office for Eastern Mediterranean (EMRO), WHO Regional Office for South-East Asia (SEARO) and WHO Western Pacific Region (WPRO).

ECDC assessment

A substantial decline in measles cases reported by EU/EEA countries after March 2020 contrasts with the typical seasonal pattern seen for measles, which peaks in the spring in temperate climates. A similar decrease has been observed in other countries worldwide during the same period. Under-reporting, under-diagnosis, or a real decrease due to the direct or indirect effects of the COVID-19 pandemic measures could explain the decline of cases observed. Nevertheless, achieving the best possible vaccine uptake in the current circumstances is crucial in order to prevent measles outbreaks in the future.

Actions

ECDC monitors the measles situation through its epidemic intelligence activities, which supplement a monthly report with measles surveillance data from The European Surveillance System (TESSy) for 30 EU/EEA countries. ECDC published a [risk](#)

[assessment](#) entitled 'Who is at risk of measles in the EU/EEA?' on 28 May 2019.

Mass gathering monitoring- Multi-country- UEFA European Football Championship 2020 (2021)

Opening date: 3 June 2021

Latest update: 9 July 2021

Epidemiological summary

Update: since the previous report Germany has reported 18 SARS-CoV-2 cases and Finland has reported 45 additional cases linked to attendance of the UEFA EURO 2020 games. An increase in COVID-19 notification rates has been reported in Finland, the Netherlands, Russia and the UK.

Summary:

According to multiple sources, from the beginning of the EURO 2020 and as of 8 July 2021, eight countries have reported 2 535 SARS-CoV-2 positive cases linked to attendance at UEFA EURO 2020 games: Denmark ([source 1](#), [source 2](#)) (35, of these five with [Delta variant](#)), [Finland](#) (481), [France](#) (3), [Sweden](#) (2), [Scotland](#) (1991), Germany (18), Croatia and the Netherlands reported less than five cases each.

According to media and [WHO EURO 2020 explorer](#), among the [UEFA host countries](#), an increase in SARS-CoV-2 cases was recently reported in St. Petersburg (Russia), Baku, (Azerbaijan), Amsterdam (Netherlands), Copenhagen (Denmark), Glasgow and London (the UK).

[Finland](#) reported that in week 25 (ending 27 June 2021), more than 40% of the positive SARS-CoV-2 infections detected were directly related to the UEFA EURO 2020, and in week 26 (ending 4 July 2021) the corresponding proportion was 15%.

Overall the [UK](#) is reporting an increase in the weekly SARS-CoV-2 notification rate by a 34.9% and a 51.5% increase in SARS-CoV-2 related hospitalisations. Overall, the Delta variant has been detected in the majority of new cases of SARS-CoV-2 in the UK. According to [Public Health England](#)'s weekly SARS-CoV-2 variant report cases, as of 30 June 2021 data show that numbers of the Delta variant in the UK have risen by 50 824 since last week, to a total of 161 981. According to [Public Health Scotland](#), an increase in hospitalisations has been observed in recent days.

According to media SARS-CoV-2-related hospitalisations have increased in [St. Petersburg](#) in recent days. According to a statement by the [deputy prime minister](#) of Russia, UEFA EURO 2020 influenced the increase in the number of COVID-19 cases in St. Petersburg. On [7 July 2021](#), St. Petersburg reported overall 1 906 SARS-CoV-2 positive cases, and 1 194 cases on [25 June 2021](#).

During the monitoring period SARS-CoV-2 infection was not detected in players of the national teams.

ECDC assessment

In the countries where mass gathering events such as the UEFA European Football Championship take place, in the absence of sufficient mitigation measures, the risk of local and pan-European transmission of COVID-19, including the spread of variants of concern, is expected to increase. Options for COVID-19 response are described in ECDC's [latest COVID-19 rapid risk assessment](#), published on 10 June 2021.

COVID-19-related country profiles in the EU/EEA can be found [here](#), and are available for countries outside the EU/EEA country profiles [here](#).

The risk of becoming infected with other communicable diseases in UEFA-hosting countries varies, but is considered low if preventive measures are applied (e.g. being fully vaccinated according to the national immunisation schedule, following hand and food hygiene, respiratory etiquette, refraining from any activities and contacts if any symptoms occur, and seeking prompt testing and medical advice as needed).

Actions

ECDC is monitoring this event through its epidemic intelligence activities on a daily basis. ECDC published its Rapid Risk Assessment, [Assessing SARS-CoV-2 circulation, variants of concern, non-pharmaceutical interventions and vaccine rollout in the EU/EEA, 15th update](#), on 10 June 2021, and its Threat Assessment Brief, [Implications for the EU/EEA on the spread of the SARS-CoV-2 Delta \(B.1.617.2\) variant of concern](#), on 23 June 2021.

Dengue outbreak - France, Réunion - 2021

Opening date: 29 April 2021

Latest update: 9 July 2021

Epidemiological summary

Since 1 January and as of 6 July 2021, 27 213 confirmed dengue cases, including 15 deaths, have been reported for 2021, according to [French authorities](#). In [2019](#) and [2020](#), there were 18 206 and 16 050 cases, respectively. According to data submitted to The European Surveillance System, in 2019 there were 116 cases imported from Réunion to mainland EU/EEA, the majority of which were reported in mainland France. Between 1 May and 2 July 2021, [French authorities](#) reported 62 imported cases of dengue in mainland France in individuals arriving from Réunion.

ECDC assessment

Réunion is facing an outbreak of dengue of a higher magnitude than in 2019 and 2020. In those two years, the peaks of the epidemics were reached in week 16 (2019) and week 17 (2020); in 2021, the peak of the epidemic was reached on week 20 and since then, a decrease has been observed in the number of confirmed cases reported on a weekly basis.

The likelihood of infection for EU/EEA citizens visiting or residing in Réunion remains high if they do not apply protective measures, particularly in those communes where the circulation of the virus is intense. Personal protective measures against mosquito bites include the use of mosquito repellent, wearing long-sleeved shirts and long trousers, sleeping or resting in screened or air-conditioned rooms, and using mosquito nets.

The likelihood for onward transmission of dengue in mainland EU/EEA is linked to importation of the virus by viraemic travellers into receptive areas with established and active competent vectors (i.e. [Aedes albopictus](#)). *Aedes albopictus* is [established](#) in a large part of Europe. The current likelihood of local transmission events involving dengue virus in mainland EU/EEA is high, as the environmental conditions are favourable for the growth of mosquito populations and virus replication of the vector. All autochthonous outbreaks of dengue in mainland EU/EEA have so far [occurred](#) between July and November.

For a more detailed analysis of the dengue epidemiological situation in the Indian Ocean region, consult ECDC's [monthly dengue reports](#), [ECDC's factsheet](#) and [ARS Reunion](#). A list of all autochthonous transmission events of dengue virus in mainland EU is available on [ECDC's website](#).

Actions

ECDC is monitoring this outbreak through its epidemic intelligence activities. ECDC produced a Threat Assessment Brief, [Dengue outbreak in Réunion, 2021](#), which was published on 5 May 2021.

New! Human case of swine influenza A(H3N2)v virus – Canada – 2021

Opening date: 7 July 2021

Latest update: 9 July 2021

Epidemiological summary

On 21 June 2021, Canadian authorities reported a new case of human infection with swine influenza A(H3N2) variant virus in Manitoba province, Canada. The case, a patient under 18 years of age, developed influenza-like-symptoms at the beginning of June 2021 and was referred for testing. The respiratory sample tested negative for SARS-CoV-2 and positive for influenza A. The National Microbiology Laboratory confirmed a human infection with an influenza A(H3N2)v virus.

The case has fully recovered. The case lives in a rural area with pig farms but had no direct exposure to pigs. No further cases have so far been detected among the contacts of the case and no human-to-human transmission.

Since 2005, two cases of influenza A(H3N2)v virus (including this one) have been reported in Canada. The previous case was reported in 2016.

Source: [Government of Manitoba](#)

ECDC assessment

Sporadic transmission of swine influenza viruses from pigs or contaminated environments to humans has also been observed in

the EU/EEA in recent years and this case is therefore not unexpected. Testing for influenza virus should always be considered in patients with respiratory symptoms reporting prior contact with pigs. This helps to identify such events early on so that follow-up investigations can be initiated to identify any human-to-human transmission. Influenza viruses that cannot be sub-typed should be shared with national influenza centres or reference laboratories, as well as WHO Collaborating Centres, for further virus characterisation analysis.

Actions

ECDC is monitoring zoonotic influenza events through epidemic intelligence activities in order to identify significant changes in the epidemiology of the virus. Cases should be reported immediately to EWRS and IHR.

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

Opening date: 2 July 2021

Epidemiological summary

As of 8 July 2021, in EU/EEA countries overall, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified to be very low to low in Germany, Denmark, Sweden and the Gulf of Bothnia (Sweden, Finland); and medium to high in the rest of the Baltic Sea, except in Elblaski (Poland), Klaipeda (Lithuania) and the Gulf of Riga (Estonia, Latvia), where it was very high.

For the next five days overall, the environmental suitability for *Vibrio* growth in the Baltic Sea is considered to be medium to high in Denmark, Germany, Poland, Sweden and the Gulf of Finland (Estonia, Finland); and very high in the rest of the Baltic Sea except for the Gulf of Bothnia (Sweden, Finland), Skåne county (Sweden), West and South Zealand and Bornholm (Denmark) and Vorpommern-Rügen (Germany) where the risk is very low to low.

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

According to [Finnish authorities](#), three *Vibrio cholerae* infections and one *Vibrio vulnificus* infection have been detected in Finland in 2021.

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 to be 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 natural bodies of water, especially marine or estuarine water, other risk factors for illness include the consumption of shellfish, particularly raw oysters.

Actions

ECDC is monitoring this threat on a weekly basis during the summer of 2021 and will report on increased environmental suitability for growth of *Vibrio* species.

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