

This weekly bulletin provides updates on threats monitored by ECDC.

## I. Executive summary

### EU Threats

#### West Nile virus - Multistate (Europe) - Monitoring season 2013

Opening date: 3 June 2013

Latest update: 1 August 2013

West Nile fever (WNF) is a mosquito-borne disease which causes severe neurological symptoms in a small proportion of infected people. During the transmission season between June and November, ECDC monitors the situation in EU Member States and in neighbouring countries in order to inform blood safety authorities regarding WNF-affected areas and identify significant changes in the epidemiology of the disease. In the 2012 transmission season, 237 probable and confirmed cases have been reported in the EU, and 670 cases in neighbouring countries.

##### → Update of the week

During the past week, four new human West Nile fever cases were detected in the EU: Greece reported two probable and two confirmed cases in East Attiki.

In neighbouring countries, Serbia reported seven cases in Grad Beograd (Belgrade), the first cases of the year, and the Volgograd oblast in Russia recorded two additional cases. In Israel, eight additional cases have been reported since the last update, predominantly in the Central District.

### Non EU Threats

#### Middle East respiratory syndrome- coronavirus (MERS CoV) - Multistate

Opening date: 24 September 2012

Latest update: 1 August 2013

Between April 2012 and 2 August 2013, 94 laboratory-confirmed cases, including 46 deaths, of an acute respiratory disease have been notified to WHO. The new virus, named Middle East respiratory syndrome coronavirus (MERS-CoV), is genetically distinct from the coronavirus that caused the SARS outbreak. Cases have originated in Saudi Arabia, Qatar, Jordan and the United Arab Emirates (UAE). In addition, cases have occurred in Germany, the United Kingdom, Tunisia, France and Italy in patients who were either transferred for care of the disease or returned from the Middle East. The MERS-CoV reservoir has not been established, nor is it clear how transmission occurs.

##### → Update of the week

During the past week, WHO announced four new laboratory-confirmed cases of MERS-CoV reported from Saudi Arabia. Two of them are healthcare workers.

Additionally, a previously laboratory-confirmed case, also from Saudi Arabia, has been reported to have died.

## II. Detailed reports

### West Nile virus - Multistate (Europe) - Monitoring season 2013

Opening date: 3 June 2013

Latest update: 1 August 2013

#### Epidemiological summary

As of 1 August 2013, eight human cases of West Nile fever have been reported in the EU and 34 cases in neighbouring countries.

#### EU Member States

##### *Greece*

As of 1 August, Greece has reported eight cases of WNF. The regions affected are East Attiki (6) and Thessaloniki (2). East Attiki has reported three probable and three confirmed cases, and Thessaloniki has recorded one probable and one confirmed case, according to the EU case definition.

#### Neighbouring countries

##### *Russia*

As of 30 July, fourteen cases of WNF have been reported in Russia: seven cases in Astrakhanskaya oblast and seven cases in Volgograd oblast.

##### *Serbia*

On 26 July, the Serbian Ministry of Health confirmed seven cases of WNF in Grad Beograd (Belgrade), these are the first cases reported this year.

##### *The former Yugoslav Republic of Macedonia*

On 24 July, the former Yugoslav Republic of Macedonia reported its first case of the year in Kocani (Eastern Macedonia).

##### *Israel*

As of 1 August, Israel has reported 12 cases of WNF (4 confirmed and 8 probable), predominantly in the Central District.

The World Organisation for Animal Health (OIE) reported two equine cases of WNF in Greece: one horse was found positive through active sero-surveillance in Xanthi on 17 July and another clinical case in Attiki, on 23 July.

**Websources:** [ECDC West Nile fever risk maps](#) | [ECDC West Nile fever risk assessment tool](#) | [Keelpno Greece](#) | [Astrakhanskaya oblast](#) | [Volgograd oblast](#) | [Israel MoH](#) | [Serbia MoH](#) | [FYROM PHI](#) | [CESME](#) | [OIE 1](#) | [OIE 2](#) |

#### ECDC assessment

West Nile fever in humans is a notifiable disease in the EU. The implementation of control measures are considered important for ensuring blood safety by the national health authorities when human cases of West Nile fever occur. According to the [EU blood directive](#), efforts should be made to defer blood donations from affected areas with ongoing virus transmission.

#### Actions

ECDC produces weekly [West Nile fever risk maps](#) during the transmission season to inform blood safety authorities regarding affected areas.

ECDC published a West Nile fever [risk assessment tool](#) on 3 July 2013.

### Middle East respiratory syndrome- coronavirus (MERS CoV) - Multistate

Opening date: 24 September 2012

Latest update: 1 August 2013

#### Epidemiological summary

As of 2 August 2013, 94 laboratory-confirmed cases of MERS-CoV, including 46 deaths, have been reported worldwide. All cases have either occurred in the Middle East or have had direct links to a primary case that was infected in the Middle East. Saudi Arabia has reported 74 cases, including 39 deaths, UAE five cases and Jordan two cases, both of which died. Thirteen cases have been reported from outside the Middle East in: UK (4), Italy (3), France (2), Germany (2) and Tunisia (2). In France, Italy, Tunisia

and the United Kingdom, there has been local transmission among patients who have not been to the Middle East but had been in close contact with laboratory-confirmed or probable cases. Person-to-person transmission has occurred both among close contacts and in healthcare facilities, but, with the exception of a nosocomial outbreak in Al-Ahsa, Saudi Arabia, secondary transmission has been limited. Eight asymptomatic cases were reported by Saudi Arabia and two by UAE. Six of these cases were healthcare workers.

On 9 July, WHO established the [Emergency Committee](#) to advise WHO's Director-General on the status of the current situation concerning MERS-CoV. On 17 July, the [second meeting of the Emergency Committee](#) under the International Health Regulations (2005) was held by teleconference. It concluded unanimously that with the information now available, and using a risk assessment approach, the conditions for a Public Health Emergency of International Concern have not been met at present.

The Ministry of Health of Saudi Arabia updated its [Health Regulations](#) for travellers to Saudi Arabia for the Umrah and Hajj pilgrimage regarding MERS-CoV and now recommends that the elderly, those with chronic diseases and pilgrims with immune deficiency, malignancy and terminal illnesses, pregnant women and children coming for Hajj and Umrah this year should postpone their journey.

WHO published a [travel advice](#) on MERS-CoV for pilgrimages on 25 July 2013.

[The WHO guidelines for investigation of cases of human infection with MERS-CoV](#) were published in July 2013. On 30 July 2013 the [MERS-CoV Initial Interview Questionnaire of Cases - Guide for the interviewer](#) was published to support the investigators.

**Web sources:** [ECDC RRA Update 22 July](#) | [ECDC novel coronavirus webpage](#) | [WHO](#) | [WHO MERS updates](#) | [InVS 25 June](#)

### ECDC assessment

The continued notification of MERS-CoV cases in the Middle East indicates that there is an ongoing source of infection present in the region. There is therefore a continued risk of cases occurring in Europe associated with travel to the area. Surveillance for cases is essential, particularly with expected increased travel to Saudi Arabia for Ramadan in July and the Hajj in October.

The risk of secondary transmission in the EU remains low and could be reduced further through screening for exposure among patients presenting with respiratory symptoms and their contacts, and strict implementation of infection prevention and control measures for patients under investigation.

### Actions

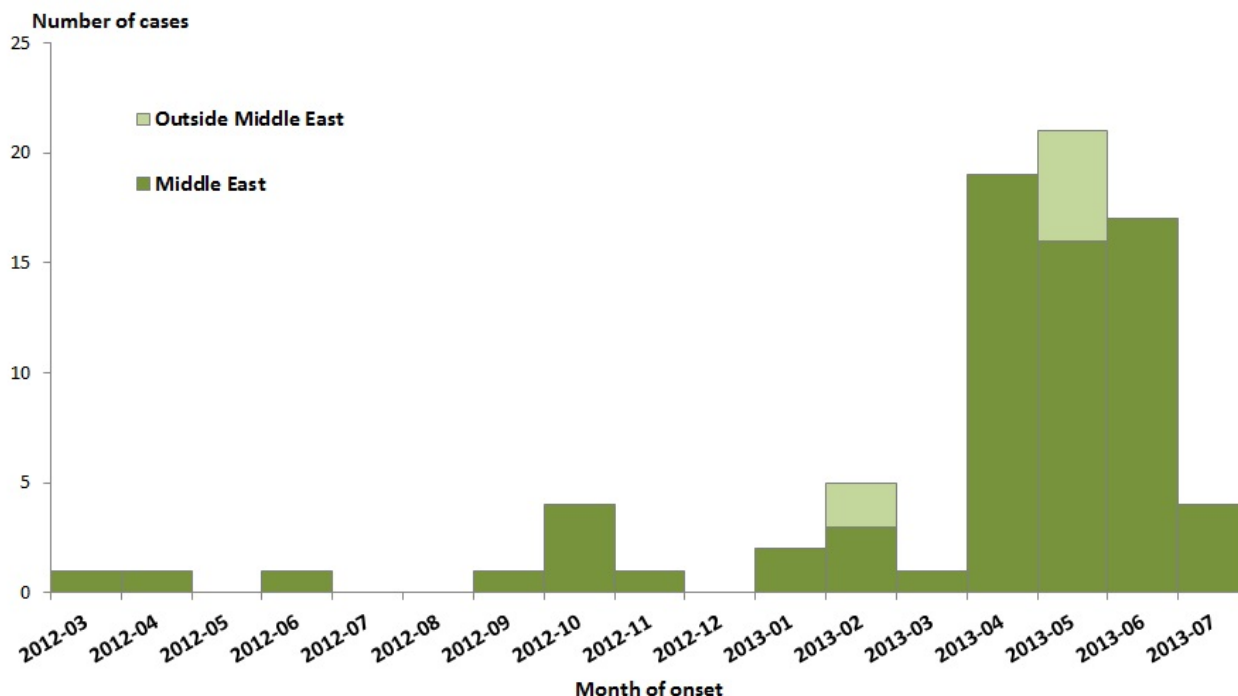
The latest ECDC [rapid risk assessment](#) was published on 22 July 2013.

The results of an ECDC coordinated survey on laboratory capacity for testing the MERS-CoV in Europe were published in [EuroSurveillance](#).

ECDC is closely monitoring the situation in collaboration with WHO and the EU Member States.

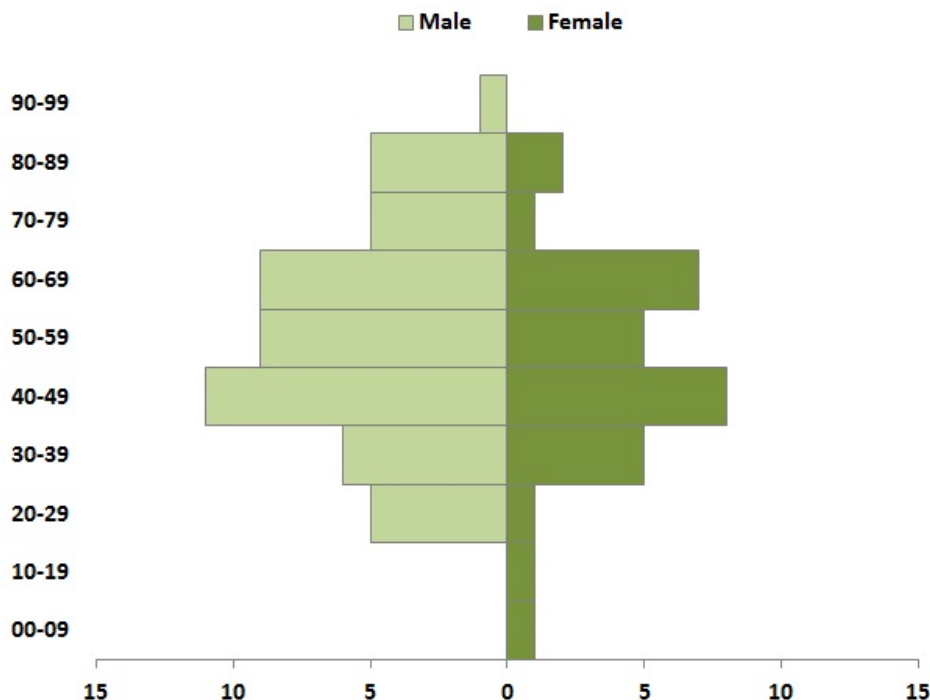
Distribution of confirmed cases of MERS-CoV by month of onset and place of probable infection, March 2012 - August 2013 (n=78\*)

ECDC \*16 cases for which month of onset is missing have been excluded



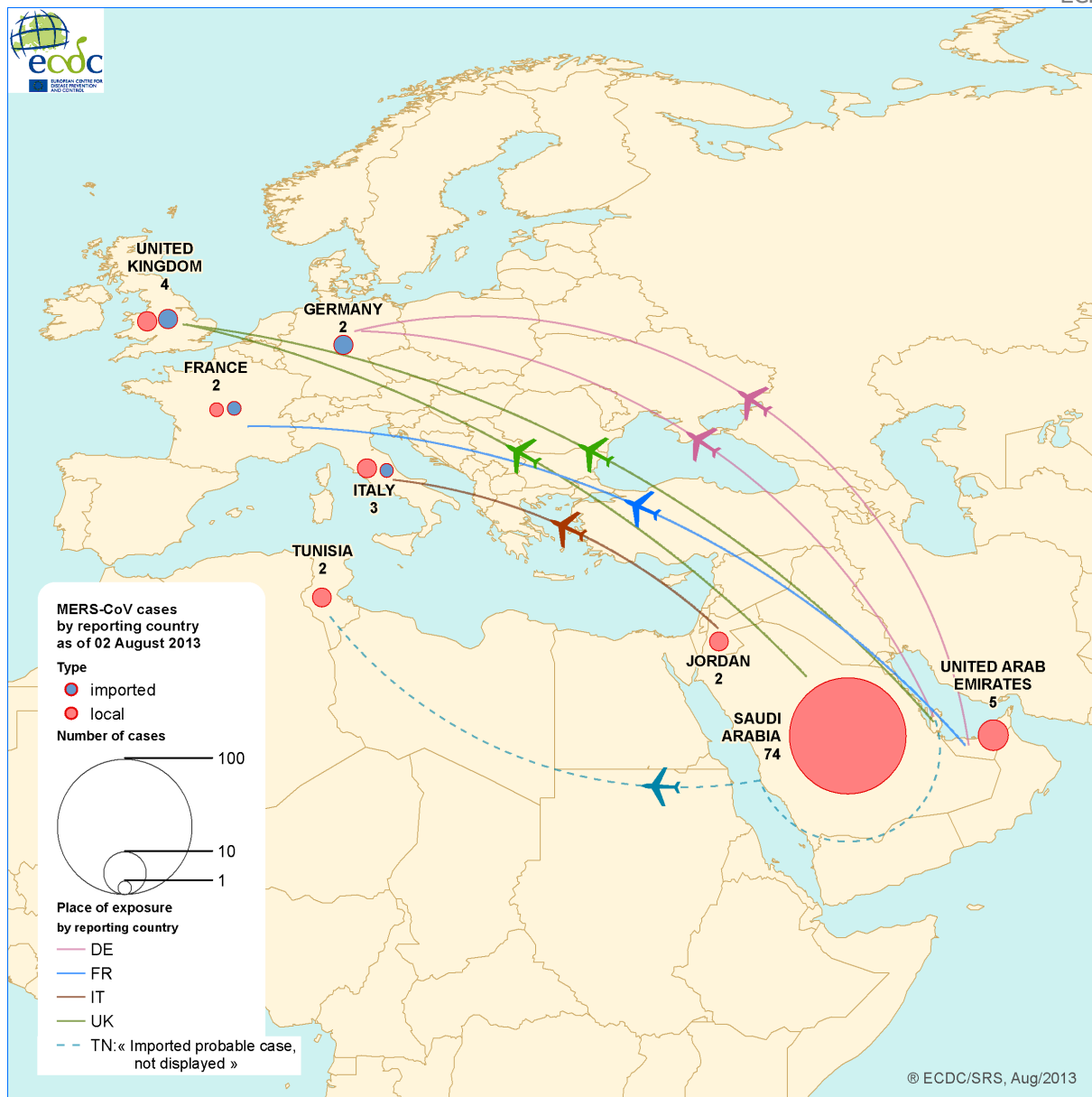
Distribution of confirmed cases of MERS-CoV by month of onset and place of probable infection, March 2012 - August 2013 (n=82\*)

ECDC \*12 cases for which age or sex data is missing have been excluded



Distribution of confirmed cases of MERS-CoV by place of reporting as of 2 August 2013

ECDC SRS



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