



COMMUNICABLE DISEASE THREATS REPORT

# CDTR Week 27, 1-7 July 2012

#### All users

This weekly bulletin provides updates on threats monitored by ECDC.

## I. Executive summary EU Threats

## Anthrax - Germany - Injecting drug use

Opening date: 18 December 2009 Latest update: 5 July 2012

On 13 June 2012, Germany reported that one injecting drug user had died of anthrax in Regensburg. A second case was subsequently reported on 18 June. A third case was reported on 4 July. This last case is of cutaneus anthrax.

In December 2009, an outbreak involved 124 cases of anthrax reported among injecting drug users in the UK (England and Scotland with five and 119 cases respectively) and Germany (three cases).

#### →Update of the week

A third case was reported on 4 July. This last case is of cutaneus anthrax. Microbiological investigations suggest that the strain in the first 2012 cases is identical or almost identical to the strain from the 2009-2010 cases. The strain of the third case is still being characturised.

#### Legionellosis – Spain - Travel-associated cluster

Opening date: 13 January 2012

Latest update: 3 July 2012

Between November 2011 and July 2012, 39 cases of Legionnaires' disease, including six deaths, have been reported in relation with a hotel in Calpe, Spain. Thirty five of the cases are travel-associated and four cases are among hotel staff. The hotel is currently closed, extensive investigations are ongoing and ECDC has deployed a mission related to the outbreak investigation. A update of the rapid risk assessment has been made.

#### →Update of the week

ECDC has been informed of 14 cases of Legionnaires' disease fallen ill in week 26 after having stayed in the hotel.

## UEFA EURO 2012 - MG enhanced surveillance (weekly update)

Opening date: 7 June 2012

From 8 June, the CDTR includes a section on threats related to the 2012 UEFA football cup. It contains information gathered through epidemic intelligence activities concerning health events or public health measures relevant for the football tournament. The information is classified regarding host countries (Poland and Ukraine), other participating countries (Croatia, Czech Republic, Denmark, England, France, Germany, Greece, Italy, the Netherlands, Portugal, Republic of Ireland, Russian Federation, Spain and Sweden) and other bordering countries (Belarus, Hungary, Lithuania, Moldova, Romania and Slovakia).

#### →Update of the week

This week we include information about the following public health events/measures:

#### **Hosting countries**

Poland: results from enhanced surveillance; contamination of a water channel with Escherichia coli

**Ukraine:** results from enhanced surveillance; measles update; information about enhanced cholera surveillance; national security report; prisoners poisoned by wood processing liquid

#### **Participating countries**

**Russian Federation:** measles awareness message; unknown disease among Russian children travelling in Turkey **Bordering countries** 

Lithuania: Hepatitis A outbreak

#### Measles - Multistate (EU) - Monitoring European outbreaks

Opening date: 9 February 2011 Latest update: 5 July 2012

Measles is still endemic in many countries of Europe due to a decrease in the uptake of immunisation. In the past decade the susceptible population has increased, leading to a resurgence of the disease. More than 30 000 cases were reported in EU Member States in each of the last two years. So far in 2012, the number of outbreaks and reported cases in the Member States are significantly lower than during 2010 and 2011. Romania, France, Italy, the United Kingdom and Spain accounted for the majority of the reported measles cases so far this year. In Ukraine, an ongoing large outbreak with more than 11 000 cases is reported in 2012.

#### →Update of the week

During 29 June to 05 July 2012, no new outbreaks were detected.

#### West Nile virus - Multistate (Europe) - Monitoring season 2012

Opening date: 21 June 2012

Latest update: 2 July 2012

Between June and November, ECDC monitors the West Nile fever (WNF) situation during the 2012 transmission season in the EU Member States and bordering countries in order to identify significant changes in the epidemiology of the disease. So far, no cases have been detected in 2012. In 2011, 96 confirmed cases were reported from the EU Member States and 207 cases in neighbouring countries.

#### →Update of the week

This week, no human cases of WNF were detected in the EU or in neighbouring countries. Italy reported its first seropositive horse of the year.

## Non EU Threats

#### **New!** Cholera - Cuba, Manzanillo

Opening date: 4 July 2012

Latest update: 5 July 2012

ProMed reports that the Cuban government reported on Tue 3 Jul 2012 that 53 people contracted cholera in Manzanillo, a city in the eastern province of Granma, and three died from the bacterial disease. This report has been confirmed.

## Dengue - Multistate (world) - Monitoring seasonal epidemics

Opening date: 20 April 2006

Latest update: 5 July 2012

Dengue fever is one of the most prevalent vector-borne diseases in the world, affecting an estimated 50 to 100 million people each year, mainly in the tropical regions of the world. There are no significant recent developments in global dengue epidemiology. However, the identification of sporadic autochthonous cases in non-endemic areas in 2010 and 2011 highlights the risk of occurrence of locally acquired cases in EU countries where the competent vectors are present.

#### →Update of the week

There have been no reports of autochthonous dengue infections in Europe so far in 2012. High activity is reported in several endemic areas worldwide.

## Poliomyelitis - Multistate (world) - Monitoring global outbreaks

Opening date: 8 September 2005

Latest update: 5 July 2012

Polio, a crippling and potentially fatal vaccine-preventable disease mainly affecting children under five years of age, is close to being eradicated from the world after a significant global public health investment and effort. The WHO European Region is polio-free. Eighty-eight cases have been reported worldwide so far in 2012.

→Update of the week During 29 June to 05 July 2012, four new polio cases were reported by WHO.

#### Influenza A(H5N1) - Multistate (world) - Monitoring human cases

Opening date: 15 June 2005

Latest update: 8 June 2012

The influenza A(H5N1) virus, commonly known as bird flu, is fatal in about 60% of human infections, and sporadic cases continue to be reported, usually after contact with sick or dead poultry from certain Asian and African countries. No human cases have been reported from Europe.

→Update of the week

Between 29 June and 5 July 2012, WHO did not report any new cases of human influenza A (H5N1) infection.

## Chikungunya - Multistate (world) - Monitoring seasonal epidemics

Opening date: 7 July 2005

Latest update: 3 July 2012

ECDC monitors reports of chikungunya outbreaks worldwide through epidemic intelligence activities in order to identify significant changes in epidemiologic patterns. In metropolitan France, the seasonal surveillance for *Aedes albopictus* started on 1 May 2012. In addition, from the beginning of the year to 19 June 2012, six autochthonous cases have been confirmed in Mayotte (French overseas department).

→Update of the week

Since the beginning of the year, no autochthonous cases were reported in Europe.

Media quoted by ProMED reports that over 1000 persons were affected following the outbreak of chikungunya in three blocks of Jalpaiguri district in West Bengal, India in the past two months. The last reported outbreak in West Bengal state was in 2008.

## **II. Detailed reports**

## Anthrax - Germany - Injecting drug use

Opening date: 18 December 2009

Latest update: 5 July 2012

## Epidemiological summary

On 13 June 2012, Germany reported a fatal case of anthrax in a 51 year old injecting drug user (IDU) in Regensburg. The infection with *Bacillus anthracis* was confirmed by blood culture and PCR. The case was admitted to hospital on 5 June and died the same day from anthrax septicaemia.

A second case of anthrax in an IDU in Regensburg has been laboratory confirmed by PCR. The patient was hospitalised on 18 June 2012 with fever and swelling at a heroin injection site, following injection three days previously. The patient is currently in a stable condition. The strain from the first two 2012 cases is reported to be identical or almost identical to the strain from the 2009-2010 cases. The strain of the third case is currently being tested.

Follow up 2012-07-04: Third confirmed case of anthrax in an injecting heroin user in Germany

In addition to the previously reported two cases of anthrax in injecting drug users (IDU) in the Regensburg region (federal state of Bavaria), a third case of anthrax in an IDU has been confirmed in the federal state of Berlin (non-adjacent to Bavaria).

The case presented on 17 June at a Berlin hospital with the clinical picture of cutaneous anthrax at a heroin injection site (black eschar, massive swelling, erythema, thrombosis, onset of symptoms 9 June). The condition of the patient improved during antibiotic therapy.

At this time there is no indication that the patient had recently been to Bavaria or used heroin known to be of Bavarian origin. Thus this third case of anthrax in an IDU strongly suggests that contaminated heroin might be circulating in Germany beyond the Regensburg region.

There were three similar cases reported in Germany from December 2009 to March 2010. England & Wales reported five cases during that same period, including four deaths. The latest case was in November 2010. In Scotland 119 cases had been notified, including 13 deaths during the outbreak in 2009 and 2010. The outbreak in Scotland was declared over in October 2010.

Public Sources: <u>RKI statement on cases in 2012</u> | <u>Eurosurveillance article on 1st case in 2012</u> | <u>Last HPA report</u> | <u>RKI report</u> | <u>Last NHS report</u> | <u>NHS publication</u> | <u>RKI serological investigation</u>

#### ECDC assessment

The conclusions of the rapid risk assessment published by ECDC and EMCDDA in February 2010 are still valid stating that the risk of exposure for contaminated heroin for IDU remains present and that accidental contamination seems the most plausible explanation to these incidents. The report of a third case of anthrax in an IDU strongly suggests that contaminated heroin might be circulating in Germany beyond the Regensburg region.

#### Actions

ECDC and EMCDDA are updating their joint rapid risk assessment.

## Legionellosis – Spain - Travel-associated cluster

Opening date: 13 January 2012

Latest update: 3 July 2012

## Epidemiological summary

Since 16 December, 35 cases of travel-associated Legionnaires' disease (TALD) have been notified to the ELDSNet Surveillance Network. All travellers (sixteen residents from the United Kingdom, ten from Spain, two from France and seven from Belgium) stayed at the same hotel between 25 November 2011 (first arrival) and 29 June 2012 (last departure). Dates of disease onset range from 22 November 2011 to 29 June 2012.

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Extensive investigations are ongoing to identify the intermittent source.

#### ECDC assessment

The hotel is currently closed and therefore the risk for travellers has been removed for the time being. Unless the source of the legionella contamination is found and eliminated, the risk of future exposure cannot be ruled out.

#### Actions

Updated cluster notifications have been sent to all ELDSNet members and tour operators. ECDC published a rapid risk assessment regarding this situation on 24 May 2012 <u>on its website.</u> A new update of the assessment, up to 4 July 2012, has been made for publication on the ECDC website.

## UEFA EURO 2012 - MG enhanced surveillance (weekly update)

Opening date: 7 June 2012

## Epidemiological summary

#### Hosting countries

#### Poland

No major health events were reported this week through the enhanced surveillance for EURO 2012 by health authorities.

<u>The media</u> reported a large contamination of *Escherichia coli* detected in a water channel in Chojnice, Poland. Bathing is not recommended in this channel.

#### Ukraine

No major health events were reported this week through the enhanced surveillance for EURO 2012 by health authorities.

The Sanitary-Epidemiological Service reported 11 265 cases of measles so far in 2012.

<u>The Sanitary-Epidemiological Service</u> informed about the enhanced cholera surveillance in Ukraine (following the outbreak of cholera in Mariupol in 2011). Water, sewage and food is regularly checked; people with gastrointestinal diseases are tested for cholera. Air crews of international flights to cholera affected places worldwide have been trained as well as travel agencies to inform travellers.

<u>The Security Service of Ukraine</u> was quoted by <u>the media</u> on the national security report for EURO2012. The security services of Ukraine received 17 anonymous reports about security threats of terrorist attacks during the championship, which were all followed up. No incidents occurred. The level of terrorist threat in Ukraine during the final stages of the championship was low. Summary of actions taken by security authorities are described.

The <u>Ukrainian Ministry of Health</u> and <u>the media</u> reported about eight prisoners being hospitalised with poisoning by a liquid for wood processing in Nikolaevskaya region, Ukraine. Three people died and two became blind.

#### Participating countries

#### **Russian Federation**

Source: the media. Health care specialists in Yekaterinburg, Sverdlovsk region, Russian Federation, encourage people to get vaccinated against measles fearing importation of the disease in relation to EURO 2012. No imported cases among EURO2012 fans were detected so far. There have been measles cases imported by travellers from Sverdlovsk region returning from Western Europe and Asia.

<u>The media</u> and <u>federal authorities</u> reported an outbreak of unknown disease among Russian children staying in a hotel in Belek, Turkey. Authorities are waiting for the lab results. The children's symptoms include skin rash, fever and throat pain.

#### Bordering countries Lithuania

<u>The media</u> are quoting <u>local authorities</u> on a second hepatitis A outbreak in Vilnius, Lithuania in June 2012. Three cases reported in a school and one in a family member of a case. The first outbreak was reported in Roma population in February 2012. In total there are 18 cases reported in 2012 (three imported from Latvia, Russia and Austria, 15 –autochthonous). In 2012 incidence increased 7.5 times from 0.04 to 0.3 cases per 10 000 population since 2010. It is recommended to follow hygiene rules, to drink bottled water in endemic countries and to get vaccinated.

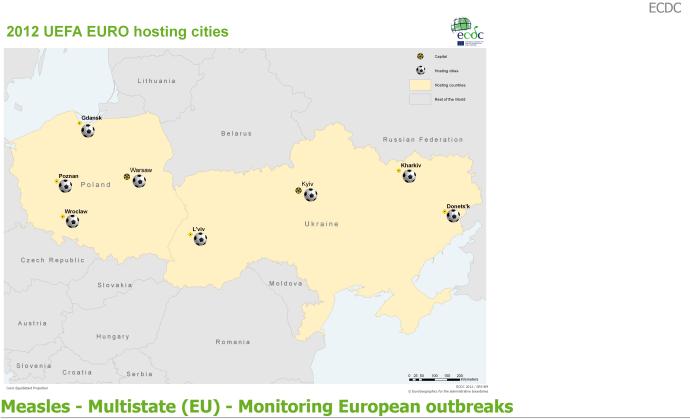
#### ECDC assessment

ECDC will continue monitoring the infectious disease epidemiological situation in order to detect early signals of public health events potentially relevant for the EURO 2012.

#### Actions

ECDC and <u>EpiNorth</u> are closely collaborating with enhanced epidemic intelligence activities during this event. A close contact with the Polish health authorities has been established and an ECDC expert liaison officer is currently hosted at the Chief Sanitary Inspectorate. ECDC is in contact with the Ukrainian health authorities through the EpiNorth network and a liaison officer placed at the WHO Country Office for Ukraine.

## UEFA EURO 2012 venues



Opening date: 9 February 2011

Latest update: 5 July 2012

## Epidemiological summary

#### I. European Union Member States

#### Ireland

The number of cases of measles in the current outbreak in west Cork has now risen to 64 (compared to 51 cases reported at the beginning of June). National public health authorities indicate that there have been 101 measles cases reported in the country, and 64 of these are linked to the measles outbreak in County Cork. The Health Protection Surveillance Centre believes the west Cork outbreak is linked to the reluctance of many parents in the area to have their children vaccinated.

#### UK

There have been nearly 500 cases so far since January - mainly in children and university students - compared to the same period in 2010 when there were just 90 cases. Health officials believe the disease is being spread by families holidaying on the continent, particularly France. The outbreak across Sussex is still ongoing with 129 cases of in the city since January 2012 and 15 adults among those affected. Most cases are among school-age children but a significant number of under fives have also been struck down.

#### II. Neighbouring countries

*Ukraine – update* Source: MoH,

There have been 11 265 cases of measles reported in 2012. According to media reports quoting the head of the State Sanitary and Epidemiological Service, the incidence of measles in Ukraine has decreased by two thirds compared to the winter-spring period.

Web sources: ECDC measles and rubella monitoring |ECDC/Euronews documentary| MedISys Measles Webpage |EUVAC-net ECDC | ECDC measles factsheet | ECDC RRA on the measles outbreak in Ukraine |

#### ECDC assessment

A decline in the uptake of immunisation in the past decade in Europe has increased the susceptible population, and measles has re-emerged in the region. When the number of susceptible individuals increases, the incidence of measles increases as well, and the interval between epidemic peaks decreases.

Transmission follows the traditional seasonal pattern of measles. Last year's outbreaks in Europe peaked in May and declined over the rest of the year. This year measles transmission was at a much lower level during the peak transmission season compared to the previous two years.

ECDC closely monitors measles transmission and outbreaks in the EU and neighbouring countries in Europe through enhanced surveillance and epidemic intelligence activities. The countries in the WHO European Region, which include all EU Member States, have committed to eliminate measles and rubella transmission by 2015. Elimination of measles requires consistent vaccination coverage above 95% with two doses of measles vaccine in all population groups, strong surveillance and effective outbreak control measures.

#### Actions

In June 2012, Ukraine and Poland are hosting the UEFA European Championship with hundreds of thousands of visitors expected from several European countries. ECDC has prepared a <u>rapid risk assessment</u> to assess the risk of visitors to Ukraine becoming infected and subsequently importing and spreading measles within the EU on their return.

#### West Nile virus - Multistate (Europe) - Monitoring season 2012

Opening date: 21 June 2012

Latest update: 2 July 2012

## Epidemiological summary

As of 5 July 2012, no human cases of West Nile fever (WNF) were detected in the EU or in neighbouring countries this year.

This week, Italy reported that serum samples from a horse in Olbia-Tempio province, Sardinia, tested positive for West Nile-virus specific IgM antibodies. This is the first equid case of West Nile virus infection detected this year, through serosurveillance - the horse did not show clinical signs.

Websources: <u>ECDC West Nile Fever risk maps</u> | <u>MedISys West Nile Disease</u> | <u>WNF in Italy 2012</u> | <u>ECDC summary of</u> <u>the transmission season 2011</u> | <u>Official Journal of the EU - Notifiable Diseases</u> | <u>European Commission Case Definitions</u> | <u>EU Blood</u> <u>Directive</u>

#### 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 <u>West Nile Fever risk maps</u> to inform blood safety authorities regarding affected areas.

## New! Cholera - Cuba, Manzanillo

Opening date: 4 July 2012

Latest update: 5 July 2012

## Epidemiological summary

The Cuban Ministry of Health reports that in recent weeks there has been an increase in diarrheal diseases, accompanied by high temperatures and heavy rains.

One of the provinces with the highest incidence is Granma in the east of the island, with a majority of cases in the municipality of Manzanillo, where an outbreak of gastrointestinal infection was correlated with water from some contaminated wells. More than 1000 patients are reported to have been treated in the local hospitals.

Among those treated, 53 patients tested positive for Vibrio cholera O1. Three patients aged 95, 70 and 66 and with history of chronic illness, died.

The authorities mantain that the outbreak in Manzanillo is under control and the trend of diarrheal disease in the area is decreasing.

Control measures include the closure of the contaminated wells, sampling of water in the private dwellings, increased chlorination of the municipal water supply, the removal of water leaks, pit cleaning and sanitation and an health education program in the local population.

No problems in the supply of health care have been reported.

Cholera hasn't been reported from Cuba since the late 1800s. Cuban health workers have worked in neighbouring Haiti after the 2010 earthquake.

Websources: Official press release | ECDC Factsheet

## Dengue - Multistate (world) - Monitoring seasonal epidemics

Opening date: 20 April 2006

Latest update: 5 July 2012

#### Epidemiological summary

**Europe:** No autochthonous cases have been reported in 2011 or in 2012 to date.

**EU overseas territories:** No update available. Since the beginning of the year, 28 autochthonous cases (10 confirmed, 18 probable) have been reported in la Reunion, and 43 confirmed autochthonous cases in Mayotte.

**Asia:** Sri Lanka is affected by a severe outbreak and is in "National Mosquito Control Month", with the army involved in control measures, and police reportedly arresting 53 people for failing to eliminate stagnant water. In Karnataka State, India, dengue cases are currently on the rise. The media report that Cambodia is affected by a serious outbreak of dengue this year, with a big peak seen between weeks 24 and 27. In the Philippines, several provinces (Negros Oriental, Misamis Oriental, Davao, and Manila National Capital Region) are severely affected, with increased case numbers in the first six months of the year compared to the same period in 2011 – the media also report on a more virulent strain in the country, with atypical symptoms. Sporadic activity is reported in Taiwan.

**Latin America:** Ecuador is severely affected by dengue, with, up to week 25, a 344% increase of classical dengue cases compared to the same period in 2011; all four serotypes are circulating in the country. The media also reports on high dengue activity in areas in Mexico (Tamaulipas state) and Brazil (Bahia state), and on a sharp peak in cases in Puerto Rico.

Web sources:

DengueMap CDC/HealthMap| MedISys dengue| ProMED dengue latest update| ECDC dengue fever factsheet| WPRO dengue latest update| Dengue update for La Reunion| Dengue update for Mayotte| InVS PACA Epidemiological Update| InVS Languedoc-Roussillon Epidemiological Update|

#### ECDC assessment

ECDC monitors individual outbreaks, seasonal transmission patterns and inter-annual epidemic cycles of dengue through epidemic intelligence activities in order to identify significant changes in disease epidemiology. Of particular concern is the potential for the establishment of dengue transmission in Europe. Local transmission of dengue was reported for the first time in France and Croatia in 2010 and imported cases were detected in other European countries, highlighting the risk of locally acquired cases occurring in countries where the competent vectors are present. A review of status and public health importance of invasive mosquitoes in Europe was published on 30 April 2012 with a summary available on ECDC website.

## Poliomyelitis - Multistate (world) - Monitoring global outbreaks

Opening date: 8 September 2005

Latest update: 5 July 2012

#### Epidemiological summary

During 29 June to 05 July June, four polio cases were notified, all of which were WPV1 and all in Nigeria. So far, 88 cases with onset of disease in 2012 have been reported globally compared with 252 for the same period in 2011.

Web sources: Polio Eradication: weekly update | MedISys Poliomyelitis | ECDC Poliomyelitis factsheet

#### ECDC assessment

ECDC follows reports of polio cases worldwide through epidemic intelligence in order to highlight polio eradication efforts and to identify events that increase the risk of re-introduction of wild poliovirus (WPV) into the EU.

The WHO European Region is polio-free. The last polio cases in the European Union occurred in 2001 when three young Bulgarian children of Roma ethnicity developed flaccid paralysis from WPV. Investigations showed that the virus originated from India. The latest outbreak in the WHO European Region was in Tajikistan in 2010 when WPV1 imported from Pakistan caused an outbreak of 460 reported cases. The last indigenous WPV case in Europe was in Turkey in 1998. An outbreak in the Netherlands in a religious community opposed to vaccinations caused two deaths and 71 cases of paralysis in 1992.

#### Influenza A(H5N1) - Multistate (world) - Monitoring human cases

Opening date: 15 June 2005

Latest update: 8 June 2012

## Epidemiological summary

Between 29 June and 5 July 2012, WHO reported no new cases of human influenza A (H5N1) infection. Worldwide, 28 cases (including 17 deaths) were notified to WHO since the beginning of 2012.

Web sources: ECDC Rapid Risk Assessment | WHO Avian Influenza | Avian influenza on ECDC website | WHO H5N1 Table

#### ECDC assessment

Most human infections are the result of direct contact with infected birds, and the World Health Organization notes it has never identified a 'sustained human-to-human spread' of the virus since it re-emerged in 2003. Countries with large poultry populations in close contact with humans are considered to be most at risk of bird flu outbreaks. Hong Kong reported the world's first recorded major outbreak of bird flu among humans in 1997, when six people died.

ECDC follows the worldwide A(H5N1) situation through epidemic intelligence activities in order to identify significant changes in the epidemiology of the virus. ECDC re-assesses the potential of a changing risk for A(H5N1) to humans on a regular basis. There are currently no indications that from a human health perspective there is any significant change in the epidemiology associated with any clade or strain of the A(H5N1) virus. This assessment is based on the absence of sustained human-to-human transmission, and on the observation that there is no apparent change in the size of clusters or reports of chains of infection. However, vigilance for avian influenza in domestic poultry and wild birds in Europe remains important.

## Chikungunya - Multistate (world) - Monitoring seasonal epidemics

Opening date: 7 July 2005

Latest update: 3 July 2012

## Epidemiological summary

In the EU, seasonal surveillance activities are ongoing in the south of France since 1 May 2012 according to the national <u>surveillance plan</u>. The aim is to identify imported cases early in order to take appropriate control measures to prevent further spread. According to the Institut de Veille Sanitaire (InVS), six autochthonous cases have been reported in Mayotte since the beginning of the year. Among these cases, four are from the centre of the island, one from the south and one in Mamoudzou.

Media quoted by ProMed reports that over 1000 persons were affected following the outbreak of chikungunya in three blocks of Jalpaiguri district in West Bengal, India in the past two months. An estimated 400-450 fell ill in the past few days alone. Many people were hospitalised and media reports eight deaths. A medical team went to the area to investigate.

Web sources: <u>MedISys Chikungunya</u> | <u>InVS latest update for Mayotte</u> | <u>InVS PACA latest update</u> | <u>InVS Languedoc-Roussillon</u> <u>latest update</u> | <u>ProMED report</u>

#### ECDC assessment

Although the geographic range of the virus is primarily in Africa and Asia there has been a rapid expansion of epidemics over the past few years to new regions of the world due to the worldwide distribution of the main vectors, *Aedes albopictus* and *Aedes aegypti*, through increased human travel. There is a risk of further importation of the chikungunya virus into new areas by infected travellers.

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