



## SURVEILLANCE REPORT

Annual Epidemiological Report for 2015

# Rift valley fever

### Key facts

- There was one imported case of Rift Valley fever reported in EU/EEA countries in 2015.

### Methods

This report is based on data for 2015 retrieved from The European Surveillance System (TESSy) on 12 December 2016. TESSy is a system for the collection, analysis and dissemination of data on communicable diseases. EU Member States and EEA countries contribute to the system by uploading their infectious disease surveillance data at regular intervals.

For a detailed description of methods used to produce this report, please refer to the *Methods* chapter [1].

An overview of the national surveillance systems is available online [2].

Additional data on this disease are accessible from ECDC's online *Surveillance atlas of infectious diseases* [3].

The EU case definition was used by 13 countries. Four countries used an alternative case definition, and four countries did not provide information on case definition used.

Surveillance is compulsory in 17 EU/EEA countries, voluntary in two (Ireland and the United Kingdom), and mostly passive [2]. Data reporting is case based and done at the national level. Data were obtained from 20 EU/EEA countries.

### Epidemiology

In August 2015, one confirmed case of Rift Valley fever was reported by France. The case was identified as travel-related, with Mali as the probable place of infection [4].

Between 2011 and 2014, three cases were reported in the EU. Two cases were reported in 2012, one from France and one from the United Kingdom. The cases were probably infected in Comoros and Egypt, respectively. In 2013, one case – probably infected in Uganda – was reported by the United Kingdom. In 2014, no cases were reported.

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## Discussion and public health implications

Rift Valley fever is an acute viral febrile haemorrhagic disease that affects primarily ruminants in Africa and in the Arabian Peninsula (such as cattle, buffalo, sheep, goats and camels). The disease is caused by a virus from the *Phlebovirus* genus of the *Bunyaviridae* family.

Rift Valley fever occurs in humans in many sub-Saharan countries, in Madagascar, Saudi Arabia and Yemen. Humans may become infected by mosquito bites and through direct or indirect contact with the blood or organs of infected animals. While most human cases are relatively mild (influenza-like illness), a small percentage of patients develops a severe form of the disease, with haemorrhagic manifestations, hepatitis and neurological disorders.

Rift Valley fever is notifiable to the World Organisation for Animal Health [5]. Animal movement may contribute to viral spread, threatening countries in the Mediterranean basin where competent vectors are present [6].

In 2015, Mauritania faced a major outbreak both in animals and humans [7].

## References

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