



COMMUNICABLE DISEASE THREATS REPORT

# CDTR Week 38, 18-24 September 2016

All users

This weekly bulletin provides updates on threats monitored by ECDC.

# I. Executive summary EU Threats

## West Nile virus - Multistate (Europe) - Monitoring season 2016

Opening date: 30 May 2016

Latest update: 23 September 2016

During the June to November transmission season, ECDC monitors the situation in EU Member States and neighbouring countries in order to inform the blood safety authorities of areas affected by West Nile fever (WNF) and changes in the epidemiology of the disease.

→Update of the week
This week 62 new cases have been reported, 38 in the EU Member States and 24 cases in the neighbouring countries.

# **Non EU Threats**

# Zika - Multistate (world) - Monitoring global outbreaks

Opening date: 16 November 2015

Latest update: 23 September 2016

Since 1 February 2016, Zika virus infection and the related clusters of microcephaly cases and other neurological disorders constitute a public health emergency of international concern (PHEIC). Since 2015, and as of 22 September 2016, there have been 65 countries and territories reporting mosquito-borne transmission. According to WHO and as of 15 September 2016, 21 countries or territories have reported microcephaly and other central nervous system (CNS) malformations potentially associated with Zika virus infection or suggestive of congenital infection.

→Update of the week

Twenty new locally-acquired cases have been reported in Florida since the last CDTR, brining the total number of locallyacquired cases to 92. In Asia, Singapore and Thailand continue to report locally-acquired cases. On 18 September, Saint Kitts and Nevis (Caribbean islands) reported the first three cases of locally-acquired Zika infection.

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

Opening date: 8 September 2005

Latest update: 23 September 2016

Global public health efforts are ongoing to eradicate polio, a crippling and potentially fatal disease, by immunising every child until transmission of the virus has completely stopped and the world becomes polio-free. Polio was declared a Public Health Emergency of International Concern (PHEIC) by the World Health Organization (WHO) on 5 May 2014 due to concerns regarding the increased circulation and international spread of wild poliovirus during 2014. On 11 August 2016, at the tenth <u>meeting of the Emergency Committee</u>, the temporary recommendations in relation to the PHEIC were extended for another three months. The World Health Organization recently declared wild poliovirus type 2 eradicated worldwide.

#### →Update of the week

No new cases of wild poliovirus type 1 (WPV1) and no new cases of cVDPV were reported to WHO in the past week. Regional outbreak response in Nigeria and the Lake Chad sub-region is continuing.

# **II. Detailed reports**

### West Nile virus - Multistate (Europe) - Monitoring season 2016

Opening date: 30 May 2016

Latest update: 23 September 2016

#### Epidemiological summary

During the past week, Hungary has reported five new cases, three in new affected counties: Bacs Kiskun (2) and Heves (1), and two in the already affected area of Budapest. Italy has reported 14 new cases, three in the newly affected provinces of Milano (1) and Ravenna (2) and 11 in five already affected provinces: Bologna (4), Ferrara (1), Mantova (3), Modena (1) and Verona (2). Romania has reported 19 new cases, one in the newly affected county of Constanta and 18 in eight already affected areas: Braila (5), Bucuresti (4), Galati (3), Giurgiu (2), Iasi (1), Ilfov (1), Olt (1) and Tulcea (1).

In the neighbouring countries, Israel has reported eight new cases, all in already affected areas: Central district (1), Haifa (1), Southern district (3) and Tel Aviv (3). Russia has reported 11 confirmed cases, all in already affected oblasts: Astrakhan (6), Lipetsk (1) and Saratov (4). Serbia has reported five new confirmed cases, all in Grad Beograd, an already affected area. **Source:** <u>ECDC WNF page | MoH Isreal | MoH Russia</u> |

#### ECDC assessment

Although there has been a notable peak in West Nile fever transmission in the EU in the past few weeks, the overall number of cases is still within the historical range of values.

### Actions

From week 22 onwards, ECDC produces weekly West Nile fever (WNF) maps during the transmission season to inform blood safety authorities of WNF-affected areas.

# Distribution of West Nile fever cases bu affected areas, European region and Mediterraneam bassin, 2016



# Zika - Multistate (world) - Monitoring global outbreaks

Opening date: 16 November 2015

Latest update: 23 September 2016

## Epidemiological summary

#### **1. Update on number of cases**

#### The USA

Twenty new locally-acquired cases have been recorded in <u>Florida</u> over the past week. To date, 92 locally-acquired and 682 imported cases of Zika have been reported in Florida. The distribution of the locally-acquired cases is as follow: 85 in Miami-Dade, five in Palm beach, one in Pinellas and one in Broward.

#### Singapore

As of 22 September 2016, the <u>Singapore National Environment Agency</u> (NEA) recorded 385 locally-acquired ZIKV cases, an increase of 30 cases since the last CDTR.

#### **EU/EEA imported cases:**

Since week 45/2015, 19 countries (Austria, Belgium, Czech Republic, Denmark, Finland, France, Ireland, Italy, Luxembourg, Malta, Netherlands, Norway, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom) have reported 1 624 travelassociated Zika virus infections through The European Surveillance System (TESSy). Over the same time period, seven EU countries reported 80 Zika cases among pregnant women.

#### **EU's Outermost Regions and Territories**

As of 22 September 2016:

*Martinique*: 36 260 suspected cases have been reported, an increase of 160 since last week. The weekly number of cases is stable.

*French Guiana*: 9 740 suspected cases have been detected, an increase of 77 cases since last week. The weekly number of cases is stable.

*Guadeloupe*: 30 130 suspected cases have been detected, an increase of 290 suspected cases since last week. The weekly number of cases is stable.

St Barthélemy: 725 suspected cases have been detected, an increase of 55 suspected cases since last week. The weekly number of cases is stable.

St Martin: 2 350 suspected cases have been detected, an increase of 85 suspected cases since last week. The weekly number of cases is stable.

Since February 2016, 12 countries have reported evidence of person-to-person transmission of Zika virus, probably via a sexual route.

# 2. Update on microcephaly and/or central nervous system (CNS) malformations potentially associated with Zika virus infection

As of 22 September 2016, microcephaly and other central nervous system (CNS) malformations associated with Zika virus infection or suggestive of congenital infection have been reported by 21 countries or territories. Brazil reports the highest number of cases. Nineteen countries and territories worldwide have reported an increased incidence of Guillain-Barré syndrome (GBS) and/or laboratory confirmation of a Zika virus infection among GBS cases.

In the EU, Spain (2) and Slovenia (1) have reported congenital malformations associated with Zika virus infection after travel in the affected areas. Cases have also been detected in the EU's Outermost Regions and Territories in Martinique, French Guiana and French Polynesia.

**Web sources:** <u>ECDC Zika Factsheet</u> | <u>PAHO</u> | <u>Colombian MoH</u> | <u>Brazilian MoH</u> | <u>Brazilian microcephaly case definition</u> |<u>SAGE</u> <u>MOH Brazil</u> | <u>Florida Health department</u>

#### ECDC assessment

The spread of the Zika virus epidemic in the Americas is likely to continue as the vectors (*Aedes aegypti* and *Aedes albopictus* mosquitoes) are widely distributed there. The likelihood of travel-related cases in the EU is increasing. A detailed <u>risk assessment</u> was published on 30 August 2016. As neither treatment nor vaccines are available, prevention is based on personal protection measures. Pregnant women should consider postponing non-essential travel to Zika-affected areas.

#### Actions

ECDC publishes an <u>epidemiological update</u> every Friday together with <u>maps</u> containing information on countries or territories which have reported confirmed autochthonous cases of Zika virus infection. A Zika virus infection atlas is also available on the ECDC <u>website</u>.

ECDC publishes information concerning vector distribution on the <u>ECDC website</u>, showing the distribution of the vector species at 'regional' administrative level (NUTS3).

# Distribution of locally acquired Zika cases in Florida State (US), by reporting date, from 16 July 2016 to 23 September 2016



# Countries or territories with reported confirmed autochthonous cases of Zika virus infection in the past three months, as of 23 September 2016



# Poliomyelitis - Multistate (world) - Monitoring global outbreaks

Opening date: 8 September 2005 Latest update: 23 September 2016

## Epidemiological summary

In 2016, 26 cases of wild poliovirus type 1 (WPV1) have been reported so far, compared with 41 for the same period in 2015. The cases were detected in Pakistan (14), Afghanistan (9) and Nigeria (3). As of 20 September 2016, three cases of circulating vaccine-derived poliovirus (cVDPV) have been reported to WHO in 2016, all from Laos. There were 14 cVDPV cases during the same period in 2015.

**Web sources**: <u>Polio eradication: weekly update</u> | <u>MedISys Poliomyelitis</u> | <u>ECDC Poliomyelitis factsheet</u> | <u>Temporary</u> <u>Recommendations to Reduce International Spread of Poliovirus</u> | <u>WHO Statement on the Seventh Meeting of the International</u> <u>Health Regulations Emergency Committee on Polio</u>

#### ECDC assessment

The last locally-acquired wild polio cases within the current EU borders were reported from Bulgaria in 2001. The most recent wild

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polio outbreak in the WHO European Region was in Tajikistan in 2010, when importation of WPV1 from Pakistan resulted in 460 cases.

**References**: <u>ECDC latest RRA</u> | <u>Rapid Risk Assessment on suspected polio cases in Syria and the risk to the EU/EEA</u> | <u>Wild-type</u> poliovirus 1 transmission in Israel - what is the risk to the EU/EEA? |RRA Outbreak of circulating vaccine-derived poliovirus type 1 (<u>cVDPV1</u>) in Ukraine

#### Actions

ECDC monitors reports of polio cases worldwide through epidemic intelligence in order to highlight polio eradication efforts and identify events that increase the risk of wild poliovirus being reintroduced to the EU. Following the declaration of polio as a PHEIC, ECDC updated its <u>risk assessment</u>. ECDC has also prepared a background document with travel recommendations for the EU.

Following the detection of the cases of circulating vaccine-derived poliovirus type 1 in Ukraine, ECDC published a rapid risk assessment on its <u>website</u>.

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