

This weekly bulletin provides updates on threats monitored by ECDC.

I. Executive summary

EU Threats

COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2020

Opening date: 7 January 2020

Latest update: 31 July 2020

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 the respiratory symptoms for these cases. The outbreak has rapidly evolved, affecting other parts of China and other countries. On 30 January 2020, WHO's Director 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).

→Update of the week

Since 24 July 2020 and as of 31 July 2020, 1 818 831 new cases of coronavirus disease (COVID-19) (in accordance with the applied case definition in the countries) have been reported, including 40 168 new deaths.

Globally, the number of cases has increased from 15 477 472 cases to 17 296 303, and the number of deaths has risen from 633 122 to 673 290.

In the EU/EEA and the UK, the number of cases has increased from 1 656 896 cases to 1 716 071 (+59 175 cases), and the number of deaths has risen from 181 239 to 182 282 (+1 043 deaths).

More details are available [here](#).

West Nile virus - Multi-country (World) - Monitoring season 2020

Opening date: 20 May 2020

Latest update: 31 July 2020

During the West Nile virus transmission season, which usually runs from June–November 2020, ECDC monitors the occurrence of infections in the EU/EEA and EU neighbouring countries. ECDC publishes weekly epidemiological updates to inform blood safety authorities. Information is available at the NUTS 3 level (nomenclature of territorial units for statistics 3) or in GAUL 1 (global administrative unit layers 1) for areas where at least one locally acquired human infection has been reported.

→Update of the week

Between 24 and 30 July 2020, EU Member States reported five human cases in Greece (4) and Romania (1). All cases were reported from areas that have been affected during previous transmission seasons. No human cases were reported from EU neighbouring countries.

This week, no deaths have been reported.

Dengue - French Antilles - 2020

Opening date: 12 February 2020

Latest update: 31 July 2020

French authorities reported an increased number of dengue cases in Guadeloupe, Saint Martin, Saint Barthelemy and Martinique islands in recent weeks.

→Update of the week

Since the previous update with data as of 5 July 2020 and as of 19 July 2020, 795 additional dengue suspected cases have been reported in Guadeloupe, Saint Martin and Martinique. St. Barthelemy reported a total of 426 dengue suspected cases. In the last update reported, when the 21 May to 5 July 2020 period was analysed, 3 472 suspected cases were reported in the French Antilles.

The following cases have been reported since the previous update:

Guadeloupe: 200 additional suspected cases.

Saint Martin: 55 additional suspected cases.

Martinique: 540 additional suspected cases.

Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea - Summer 2020

Opening date: 23 June 2020

Latest update: 31 July 2020

Elevated sea surface temperature (SST) in marine environments with low salt content offers 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 30 July 2020, in EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very low to low. For the next five days it is considered generally to be very low, to low, except in the regions of Northern Ostrobothnia, Ostrobothnia, Satakunta, South-west Finland, Uusimaa, Kymenlaasko and Åland (Finland); Lääne, Hiiu, Saare and Pärnu (Estonia); Gulf of Riga (Estonia and Latvia); Kurzeme (Latvia); Klaipeda (Lithuania); Gdansk Bay, Eastern and Western Pomerania (Poland); Mecklenburg-Western Pomerania (Germany); Kalmar Strait, Öland and Stockholm Archipelago (Sweden) where the risk is considered to be medium-to-high.

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

Non EU Threats

Ebola virus disease - eleventh outbreak - Democratic Republic of the Congo - 2020

Opening date: 4 June 2020

Latest update: 31 July 2020

On 1 June 2020, the Ministry of Health of the Democratic Republic of the Congo (DRC) [declared](#) the eleventh outbreak of Ebola virus disease in the country. The outbreak is located in Equateur Province in the northwest of the country, close to the border with Congo.

→Update of the week

Since the last update and as of 28 July 2020, seven additional confirmed cases and five deaths have been reported from Equateur Province in the DRC.

Iboko Health Zone has passed 21 days without new cases being reported.

On 29 July 2020, Regeneron Pharmaceuticals [announced](#) that the U.S. Department of Health and Human Services (HHS) has agreed to procure REGN-EB3 treatment doses for the next six years to build national preparedness. REGN-EB3 is an investigational triple antibody cocktail treatment for Ebola that was one of two drugs that showed positive [preliminary results](#) in a clinical trial in 2019 and is currently under review of the Food and Drug Administration (FDA).

II. Detailed reports

COVID-19 associated with SARS-CoV-2 – Multi-country (World) – 2020

Opening date: 7 January 2020

Latest update: 31 July 2020

Epidemiological summary

Since 31 December 2019 and as of 31 July 2020, 17 296 303 cases of COVID-19 (in accordance with the applied case definitions and testing strategies in the affected countries) have been reported, including 673 290 deaths.

Cases have been reported from:

Africa: 909 735 cases; the five countries reporting most cases are South Africa (482 169), Egypt (93 757), Nigeria (42 689), Ghana (35 142) and Algeria (29 831).

Asia: 4 145 531 cases; the five countries reporting most cases are India (1 638 870), Iran (301 530), Pakistan (278 305), Saudi Arabia (274 219) and Bangladesh (234 889).

America: 9 338 314 cases; the five countries reporting most cases are United States (4 495 014), Brazil (2 610 102), Mexico (416 179), Peru (407 492) and Chile (353 536).

Europe: 2 883 933 cases; the five countries reporting most cases are Russia (834 499), United Kingdom (302 301), Spain (285 430), Italy (247 158) and Germany (207 828).

Oceania: 18 094 cases; the five countries reporting most cases are Australia (16 303), New Zealand (1 210), Guam (356), Papua New Guinea (72) and French Polynesia (62).

Other: 696 cases have been reported from an international conveyance in Japan.

Deaths have been reported from:

Africa: 19 317 deaths; the five countries reporting most deaths are South Africa (7 812), Egypt (4 774), Algeria (1 200), Nigeria (878) and Sudan (725).

Asia: 94 230 deaths; the five countries reporting most deaths are India (35 747), Iran (16 569), Pakistan (5 951), Turkey (5 674) and Indonesia (5 058).

America: 355 582 deaths; the five countries reporting most deaths are United States (152 070), Brazil (91 263), Mexico (46 000), Peru (19 021) and Colombia (9 810).

Europe: 203 934 deaths; the five countries reporting most deaths are United Kingdom (45 999), Italy (35 132), France (30 254), Spain (28 443) and Russia (13 802).

Oceania: 220 deaths; the five countries reporting deaths are Australia (189), New Zealand (22), Guam (5), Northern Mariana Islands (2) and Papua New Guinea (2).

Other: 7 deaths have been reported from an international conveyance in Japan.

EU/EEA and the UK:

As of 31 July 2020, 1 716 071 cases have been reported in the EU/EEA and the UK: United Kingdom (302 301), Spain (285 430), Italy (247 158), Germany (207 828), France (186 573), Sweden (80 100), Belgium (67 913), Netherlands (53 963), Portugal (50 868), Romania (49 591), Poland (45 031), Ireland (26 027), Austria (21 009), Czechia (16 342), Denmark (13 725), Bulgaria (11 420), Norway (9 172), Finland (7 423), Luxembourg (6 616), Croatia (5 071), Hungary (4 505), Greece (4 401), Slovakia (2 265), Slovenia (2 139), Lithuania (2 062), Estonia (2 051), Iceland (1 872), Latvia (1 228), Cyprus (1 084), Malta (814) and Liechtenstein (89).

As of 31 July 2020, 182 282 deaths have been reported in the EU/EEA and the UK: United Kingdom (45 999), Italy (35 132), France (30 254), Spain (28 443), Belgium (9 840), Germany (9 134), Netherlands (6 147), Sweden (5 739), Romania (2 304), Ireland (1 763), Portugal (1 727), Poland (1 709), Austria (718), Denmark (615), Hungary (596), Czechia (379), Bulgaria (374), Finland (329), Norway (255), Greece (203), Croatia (144), Slovenia (117), Luxembourg (114), Lithuania (80), Estonia (69), Latvia (31), Slovakia (28), Cyprus (19), Iceland (10), Malta (9) and Liechtenstein (1).

EU:

As of 31 July 2020, 1 402 637 cases and 136 017 deaths have been reported in the EU.

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 International Health Regulations \(IHR\) Emergency Committee meeting](#) for COVID-19 was held in Geneva on 30 April 2020. The committee concluded that the COVID-19 pandemic continues to constitute a PHEIC.

Sources: [Wuhan Municipal Health Commission](#) | [China CDC](#) | [WHO statement](#) | [WHO coronavirus website](#) | [ECDC 2019-nCoV](#)

[website](#) | [RAGIDA](#) | [WHO](#)

ECDC assessment

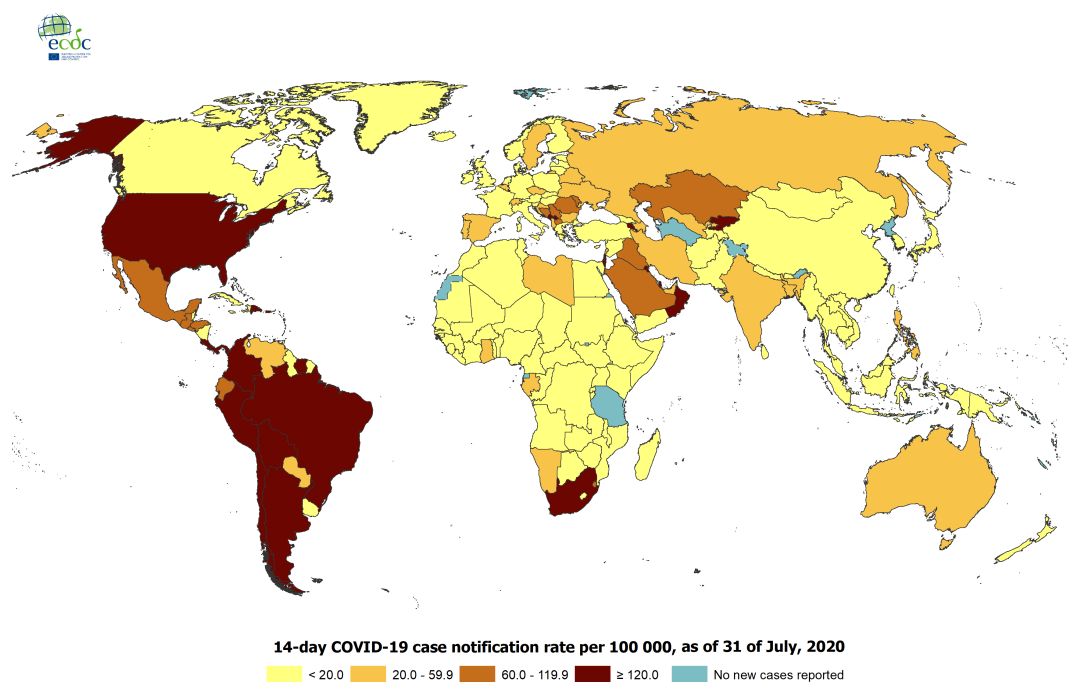
Information on the COVID-19 situation and a risk assessment can be found on [ECDC's website](#).

Actions

ECDC activities related to COVID-19 can be found on ECDC's [website](#).

Geographic distribution of 14-day cumulative number of reported COVID-19 cases per 100 000 population, worldwide, as of 31 July 2020

ECDC



The boundaries and names shown on this map do not imply official endorsement or acceptance by the European Union.

Date of production: 31/07/2020

West Nile virus - Multi-country (World) - Monitoring season 2020

Opening date: 20 May 2020

Latest update: 31 July 2020

Epidemiological summary

Between 24 and 30 July 2020, EU Member States reported five human cases in Greece (4) and Romania (1). All cases were reported from areas that have been affected during previous transmission seasons. No human cases were reported from EU neighbouring countries. This week, no deaths have been reported.

Since the beginning of the 2020 transmission season and as of 30 July 2020, EU Member States have reported 12 human cases in Greece (10) and Romania (2). No cases have been reported from EU neighbouring countries. So far, no deaths have been reported.

During the current transmission season, no outbreaks among equids or birds have been reported so far.

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

Sources: TESSy | Animal Disease Notification System

ECDC assessment

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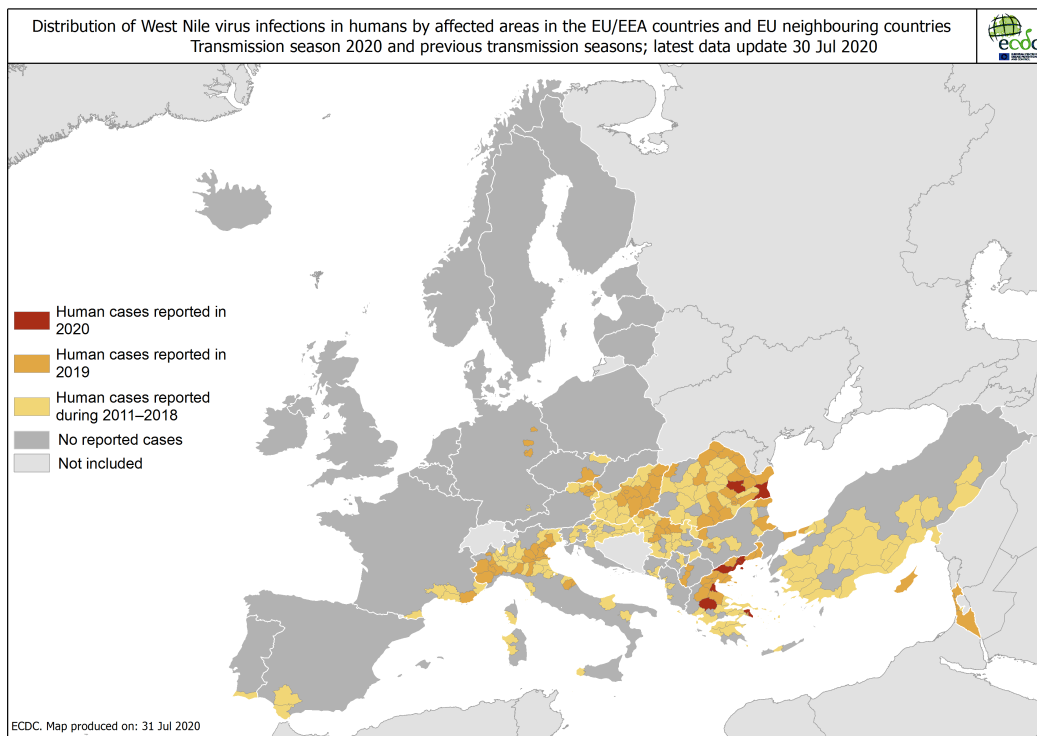
Human West Nile virus infections have been reported in EU Member States with known persistent transmission of West Nile virus in previous years. In accordance with Commission Directive 2014/110/EU, prospective donors should be deferred for 28 days after leaving a risk area for locally-acquired West Nile virus, unless the result of an individual nucleic acid test (NAT) is negative.

Actions

During the transmission season, ECDC publishes West Nile virus maps and an epidemiological summary every Friday.

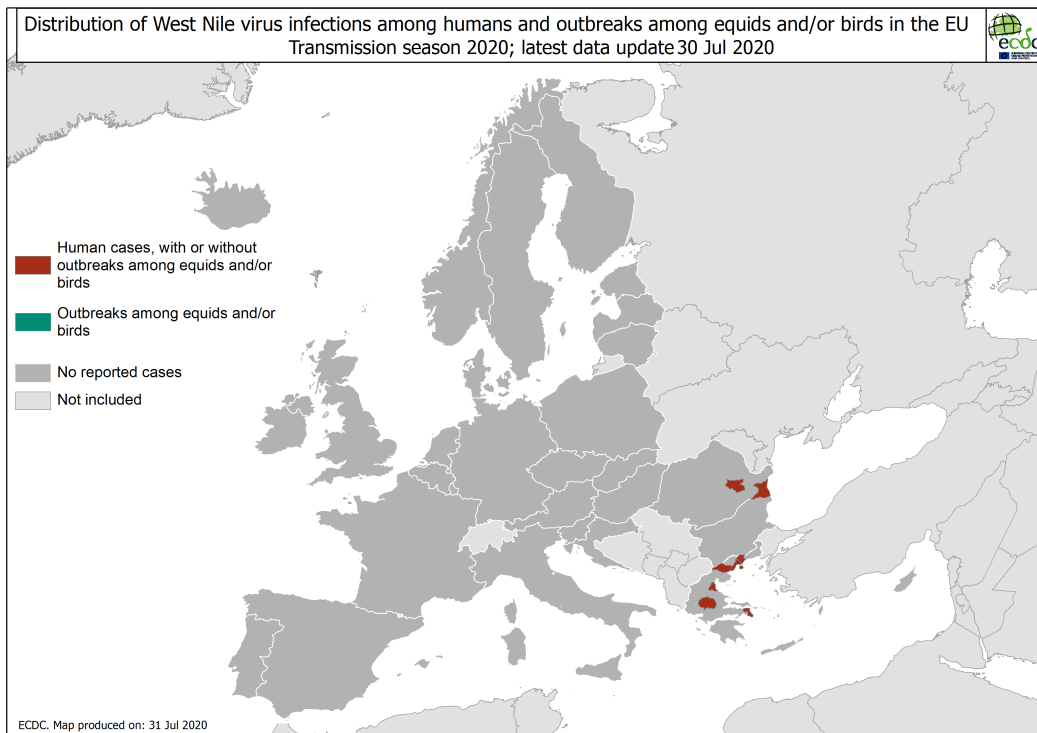
Distribution of human West Nile virus infections by affected areas as of 30 July

ECDC



Distribution of West Nile virus infections among humans and outbreaks among equids and/or birds in the EU as of 30 July

ECDC and ADNS



Dengue - French Antilles - 2020

Opening date: 12 February 2020

Latest update: 31 July 2020

Epidemiological summary

In **Guadeloupe**, since week 2019-42 and as of 19 July 2020, 9 430 suspected dengue cases have been reported. Dengue virus serotype 2 has been identified among most of the cases. In 2018, only 18 confirmed cases were reported in Guadeloupe.

In **Saint Martin**, since week 2020-03 and as of 19 July 2020, 1 785 suspected dengue cases have been reported including 422 confirmed cases and one death. Dengue virus serotype 1 was identified in most of the cases.

In **Saint Barthelemy**, since 2020-17 and as of 19 July 2020, 426 suspected dengue cases were reported, including 244 confirmed cases. Dengue virus serotype 2 has been identified among most of the cases.

In **Martinique**, since 4 November 2019 and as of 19 July 2020, 7 340 suspected dengue cases have been reported including two deaths. Dengue virus serotype 3 has been identified among most of the cases. In 2018, Martinique did not report any confirmed cases.

In January 2020, health authorities in the region raised the alert level and declared the dengue epidemic in Guadeloupe and Saint Martin. According to the same authorities, Martinique is in an epidemic phase and in Saint Barthelemy the epidemic was declared in week 17 of 2020.

Source: [Santé publique France](#)

ECDC assessment

EU/EEA travellers to and residents in the affected areas should apply personal protective measures against mosquito bites. The risk for onward vector-borne transmission of dengue in continental Europe is linked to importation of the virus by viraemic travellers into receptive areas with established and active competent vectors (i.e. *Aedes albopictus* in mainland Europe and *Aedes aegypti* on the island of Madeira). The number of travellers returning from dengue endemic areas has drastically dropped due to the COVID-19 outbreak. However, the environmental conditions in certain European regions are favourable for sustained mosquito-borne transmission; therefore, the likelihood of sustained autochthonous dengue virus transmission in continental

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EU/EEA is currently low. The occurrence of further autochthonous cases in the French Antilles is expected, as environmental conditions are favourable for continuous transmission. The concurrent circulation of several dengue serotypes may increase the risk of more severe clinical presentations.

More information about dengue is available at [ECDC factsheet](#).

Actions

ECDC is monitoring the ongoing situation through epidemic intelligence activities and reports when epidemiological update become available.

Monitoring environmental suitability of *Vibrio* growth in the Baltic Sea - Summer 2020

Opening date: 23 June 2020

Latest update: 31 July 2020

Epidemiological summary

As of 30 July 2020, in EU/EEA countries, the environmental suitability for *Vibrio* growth in the Baltic Sea was identified as very low to low. For the next five days it is considered generally to be very low, to low, except in the regions of Northern Ostrobothnia, Ostrobothnia, Satakunta, South-west Finland, Uusimaa, Kymenlaakso and Åland (Finland); Lääne, Hiiu, Saare and Pärnu (Estonia); Gulf of Riga (Estonia and Latvia); Kurzeme (Latvia); Klaipėda (Lithuania); Gdansk Bay, Eastern and Western Pomerania (Poland); Mecklenburg-Western Pomerania (Germany); Kalmar Strait, Öland and Stockholm Archipelago (Sweden) where the risk is considered to be medium-to-high.

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

Sources: [ECDC](#) | [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 2020 and reports on increased environmental suitability for growth of *Vibrio* species.

Ebola virus disease - eleventh outbreak - Democratic Republic of the Congo - 2020

Opening date: 4 June 2020

Latest update: 31 July 2020

Epidemiological summary

Since the start of the outbreak and as of the 28 July 2020, a total of 69 cases (65 confirmed, four probable), including 32 deaths, have been reported from Bikoro (22), Bolomba (12), Iboko (4), Ingende (2), Lotumbe (4), Mbandaka (23) and Wangata (2) health zones in Equateur province in the DRC.

Since the beginning of the vaccination campaign with rVSV-ZEBOV-GP on 5 June 2020, 17 699 people have been vaccinated.

Background: From May to July 2018, the [9th Ebola outbreak](#) in the DRC occurred in Mbandaka, Bikoro and in the Equateur province, leading to a total of 54 cases, including 33 deaths. According to WHO, the current event seems to be separate from the [10th Ebola outbreak](#) in the eastern part of the country, which resulted in 3 470 cases, including 2 287 deaths and was declared over on 25 June 2020. [Sequencing](#) results confirm the new outbreak as a separate spill-over event. This is the DRC's [11th outbreak](#) of Ebola virus disease since 1976 when the virus was first discovered.

In addition to Ebola outbreaks, the country is currently affected by other major outbreaks such as COVID-19, measles, cholera, monkeypox, polio and the bubonic plague.

Sources: [WHO Afro Twitter](#) | [WHO Afro Sitrep](#) | [WHO Afro bulletin](#) | [WHO DON](#) | [WHO News item](#) | [Dr Tedros](#)

ECDC assessment

Ebola outbreaks in the DRC are recurrent as the virus is present in an animal reservoir in many parts of the country. Implementing response measures is crucial, and a high level of surveillance is essential to detect and interrupt further transmission early. Response measures might be challenging amid the other outbreaks ongoing in the country. The overall risk to the EU/EEA is very low, especially with the current travel limitations.

WHO Assessment: On 3 June 2020, the [WHO assessment](#) revealed that the current resurgence is not unexpected, given the identification of wildlife spillover potential in Africa, the high population density in the region and the sociological, ecological, and environmental drivers that could influence the emergence of EVD. There is a need for further resources, and several challenges have been identified to the response in this area.

Actions

ECDC monitors this event through epidemic intelligence. On 25 May 2018, ECDC published a rapid risk assessment on the ninth outbreak in DRC: [Ebola virus disease outbreak in Equateur Province, Democratic Republic of the Congo, First update](#).

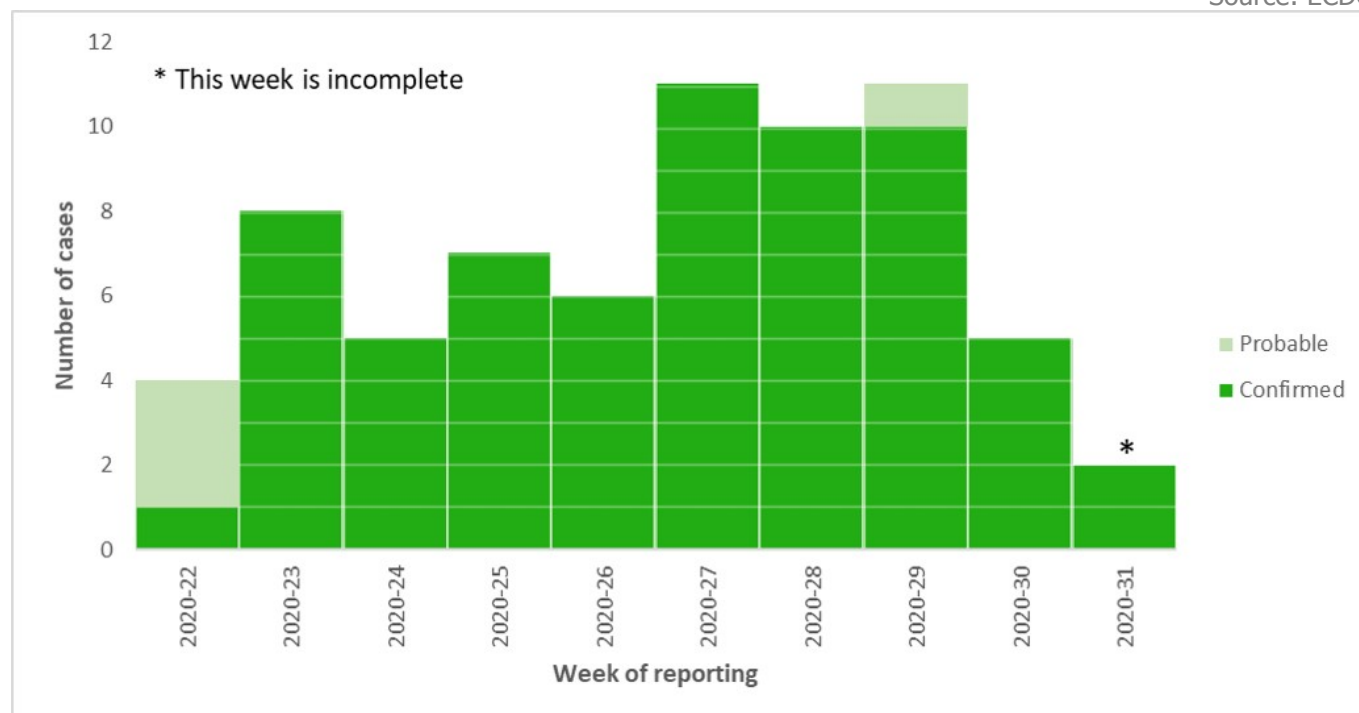
Distribution of Ebola Virus Disease cases in Equateur Province, Democratic Republic of the Congo, as of 28 July 2020

Source: ECDC

	Number of confirmed cases	Number of probable cases	Confirmed and probable cases	Number of deaths	Conf/Prob cases in past 7 days
Democratic Republic of the Congo	65	4	69	32	
Equateur	65	4	69	32	
Bikoro	22	0	22	11	ACTIVE
Bolomba	12	0	12	1	ACTIVE
Iboko	4	0	4	1	
Ingende	2	0	2	0	
Lotumbe	4	0	4	1	
Mbandaka	19	4	23	17	ACTIVE
Wangata	2	0	2	1	
Cumulative Total	65	4	69	32	

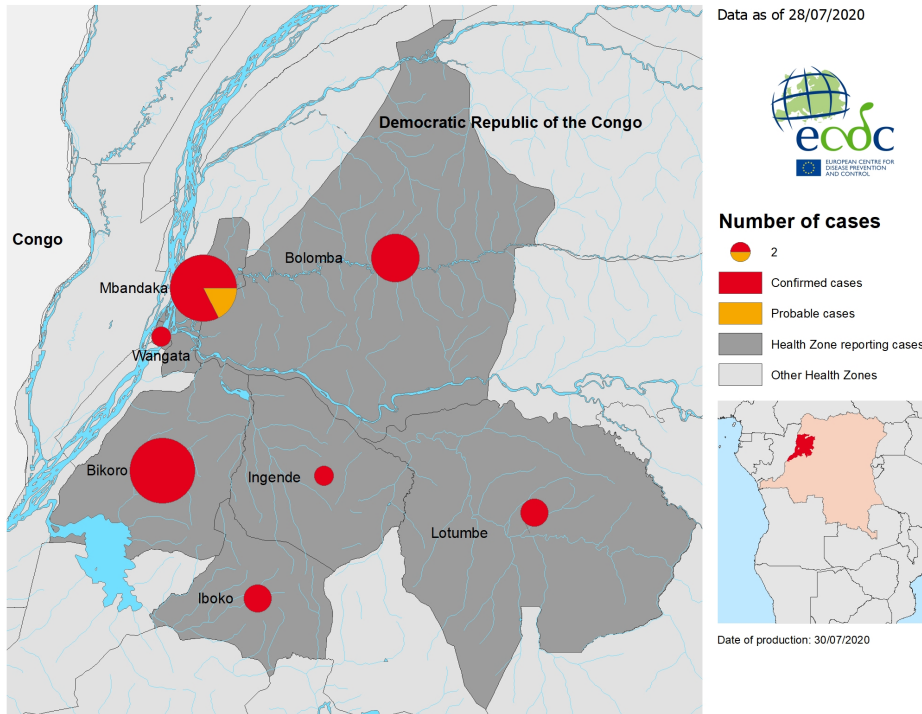
Distribution of Ebola virus disease cases in Equateur Province, Democratic Republic of the Congo, by week of reporting and as of 28 July 2020

Source: ECDC



Geographical distribution of confirmed and probable cases of Ebola virus disease, Equateur Province, Democratic Republic of the Congo, as of 28 July 2020

Source: ECDC



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