

WEEKLY BULLETIN

Communicable Disease Threats Report

Week 31, 30 - 5 August 2023

Today's disease topics

1. Avian Influenza in fur farms - Finland - 2023
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3. Echovirus 11 infections in neonates - multi-country- 2022-2023
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5. COVID-19 associated with SARS-CoV-2 – Multi-country (EU/EEA) – 2019 - 2023
6. Crimean-Congo haemorrhagic fever case - North Macedonia - 2023

Executive Summary

Avian Influenza in fur farms - Finland - 2023

- On 2 August 2023, the Finnish Food Authority reported that avian influenza A(H5N1) was confirmed in one additional fur farm hosting blue (artic) foxes.
- Since 13 July 2023 and as of 2 August 2023, avian influenza A(H5N1) has been detected in 21 fur farms in Ostrobothnia, Finland, in foxes, raccoon dogs and minks. The Finnish Food Authority reported that based on preliminary sequencing results, the lineage of the virus collected from the fur animals matches the lineage of the virus circulating among gulls in the country.
- Introduction of avian influenza into fur farms is not unexpected. Similar events have been observed in the past. Transmission between foxes or other infected mammals and humans has not been observed so far. It is crucial to identify infected mammals and exposed people. According to the [Finnish Institute for Health and Welfare \(THL\)](#), exposed people should be monitored for 10–14 days and tested if symptoms occur.
- ECDC assesses the current risk to the general public as low, and the risk of infection to people who are occupationally or otherwise exposed to avian influenza-infected animals as low-to-moderate.

Botulism - Spain - 2023

- Neurotoxin type B has been identified in three of the five confirmed cases.
- As of 31 July 2023, five confirmed and four probable cases of botulism have been identified, with reported consumption of packaged potato omelettes from different brands and supermarkets, in different Spanish Autonomous Communities.

- As a precautionary measure, the company has voluntarily recalled the suspected products, stopped their production, and informed consumers to return any of the suspected products they might have bought.
- The suspected products have been distributed to Andorra, France and Portugal.
- Based on the current information, the risk of infection for EU/EEA citizens is considered low, although further cases linked to this event may still occur.

Echovirus 11 infections in neonates - multi-country- 2022-2023

- Since July 2022 and as of 31 July 2023, 22 neonates with severe Echovirus 11 (E11) infection have been reported by France, Croatia, Sweden, Spain, and Italy.
- The following cases have been reported in the EU/EEA, according to ECDC case definitions: 12 confirmed cases, 10 probable cases, and nine suspected cases, including eight deaths.
- The viruses isolated from the cases in Italy belong to the same cluster as those isolated in France in 2023, and are part of a new divergent lineage.
- The United Kingdom (UK) reported a fatal Echovirus 11 neonatal event in March 2023.
- Given the very rare occurrence of such severe infections, ECDC assesses the risk to the general neonatal population in the EU/EEA as low.

West Nile virus One Health seasonal surveillance - 2023

- Thirty-six human cases of West Nile virus (WNV) have been reported by EU/EEA countries since the last update, and as of 2 August 2023.
- A total of 41 human cases of WNV infection – Italy (26), Greece (11), France (3) and Hungary (1) – have been reported from EU/EEA countries since the beginning of the 2023 transmission season, and as of 2 August 2023.
- Two outbreaks among equids and 19 outbreaks among birds have been reported from EU/EEA countries since the beginning of the 2023 transmission season, and as of 2 August 2023.

COVID-19 associated with SARS-CoV-2 – Multi-country (EU/EEA) – 2019 - 2023

- By the end of week 30, 2023, stable trends were observed in all EU/EEA indicators. Among the EU/EEA countries reporting cases of COVID-19, five showed an increase in overall case rates compared to the previous week. These increases were recent (of 1–2 weeks duration) and the indicators remained relatively low, compared with pandemic peaks. There were 50 deaths reported from 14 countries.
- Among the seven countries reporting at least 10 results from SARS-CoV-2 sequencing or genotyping for weeks 28–29 (10 July to 23 July 2023), the estimated distribution of variants of concern (VOC) or of interest (VOI) was 93.8% (71.6–100.0% from six countries) for XBB.1.5, 12.0% (4.3–19.8% from two countries) for XBB, and 5.8% (2.2–100.0% from five countries) for BA.2.75.
- Since the last update on 27 July 2023, no changes have been made to ECDC variant classifications for variants of concern (VOC), variants of interest (VOI), variants under monitoring and de-escalated variants.

Crimean-Congo haemorrhagic fever case - North Macedonia - 2023

- A lethal case of Crimean-Congo haemorrhagic fever (CCHF) has been reported by North Macedonia on 29 July 2023.
- The patient experienced tick bite on 19 July 2023, developed a general, febrile disease on 21 July, was hospitalised on 23 July, developed haemorrhagic symptoms on 25 July, and died on 27 July.
- Serum samples from the patient were tested positive for IgM and IgG antibodies by ELISA, and for the CCHF virus RNA by RT-PCR.
- High-risk contacts were tested negative by ELISA and RT-PCR; high- and medium-risk contacts are being clinically monitored.

1. Avian Influenza in fur farms - Finland - 2023

Overview:

Update

On 2 August 2023, the Finnish Food Authority [reported](#) that avian influenza A(H5N1) was confirmed in one additional fur farm hosting blue (artic) foxes in Vöyri (Ostrobothnia).

Summary

Since 13 July 2023, avian influenza A(H5N1) has been detected in 21 fur farms in Finland, according to [updates by the Finnish Food Authority](#). The farms are in the areas of Evijärvi, Halsua, Kauhava, Kaustinen, and Vöyri in Ostrobothnia and host foxes (blue, silver and mixed-breed foxes), raccoon dogs and minks. On 21 July 2023, the Finnish Food Authority [reported](#) that based on preliminary analysis, the lineage of the virus collected from the fur animals matches the one collected from gulls, and there are indications that it has a mutation that promotes replication in mammalian cells. Sequences of the viruses collected from minks, foxes and seagulls in Finland have been posted in the [GISAID EpiFlu](#) database.

According to the [Finnish Food Authority](#), this is the first time avian influenza has been detected in farmed fur animals in Finland. Two infections were previously detected in wild foxes in Finland.

ECDC assessment:

Introduction of avian influenza into fur farms is not unexpected if infected wild birds are observed in the area, and measures to prevent contact between infected birds or their droppings and the farmed animals are not in place. A previous [event](#) was observed at a mink farm in Spain. Transmission from foxes, or other infected mammals, to humans has not been observed to date.

ECDC assesses the current risk to the general public as low, and the risk of infection to people who are occupationally or otherwise exposed to avian influenza-infected animals as low-to-moderate. People exposed to infected mammals should be monitored for 10–14 days, and testing should be initiated if symptoms occur. Also, it is crucial to perform virus analyses and share sequence data from detections in animals for the analysis of markers relevant for mammalian adaptation.

Actions:

ECDC is following up with the Finnish authorities and other relevant agencies.

Further information:

The Finnish authorities have published [advice](#) for the general public on the prevention of avian flu infections, and issued [guidelines](#) for public health professionals, including recommendations for testing. ECDC's testing guidance on avian influenza viruses in humans is available on the [ECDC website](#).

On 1 August 2023, the Finnish Food Authority published the [criteria for culling fur animals](#) to prevent the spread of avian influenza.

Last time this event was included in the CDTR: 03 August 2023

2. Botulism - Spain - 2023

Overview:

Update: Neurotoxin type B has been identified in three of the five confirmed cases. The suspected products have been distributed to Andorra, France and Portugal as well.

Summary: On 11 July 2023, Italian health authorities notified Spanish health authorities of two Italian cases of botulism with reported consumption of packaged potato omelettes in Spain. On 14 July 2023, two Spanish Autonomous Communities (Madrid and Valencia) reported two probable cases of botulism with reported consumption of the same product. A national alert was sent to all Spanish Autonomous Communities, and the Spanish authorities were contacted to assess the possible risk outside Spain.

As of 31 July 2023, five confirmed and four probable cases of botulism have been [reported](#) with consumption of packaged potato omelettes from different brands and supermarkets in different Spanish Autonomous Communities. Three of the confirmed cases required medical attention in intensive care units and, so far, no deaths have been reported. Probable cases are defined as cases with symptoms compatible for botulism and with an epidemiological link. Confirmed cases are laboratory-confirmed. Disease onset dates range from 21 June to 22 July 2023. Ages range from 23 to 63 years (median 49 years).

According to [AESAN](#), in four of the cases, the manufacturer of these products is the same. However, the pathogen or its toxins have not been found in the suspected products or their production processes. The investigations are ongoing. As a precautionary measure, the [company](#) has voluntarily recalled the products, stopped production, and informed consumers to return all the suspected products they might have bought.

The suspected products have been distributed to Andorra, France and Portugal (RASFF 2023.4941).

Background: In 2021, 82 cases of botulism were reported in the EU/EEA, including 10 cases reported in Spain. For these 82 cases, 37% were aged 45–64 years and the case fatality rate was 7.5%.

Sources: Spanish Ministry of Health [[updates on the outbreak](#)], AESAN [[link 1](#), [link 2](#)], [RASFF](#)

ECDC assessment:

This is a cross-border outbreak of nine cases of botulism (five confirmed, four probable) with potato omelettes as suspected vehicle. The product has been produced in Spain and distributed to Andorra, France and Portugal. The producer and the authorities have initiated recalls and informed the general public. Investigations are ongoing to identify the source of the outbreak.

Based on information available, the risk for EU/EEA citizens is low.

Actions:

ECDC is monitoring this event through its epidemic intelligence activities and will update the event if new, relevant information becomes available.

Sources: [RASFF 2023.4941](#)

Last time this event was included in the CDTR: 31 July 2023

3. Echovirus 11 infections in neonates - multi-country- 2022-2023

Overview:

Update: On 3 July 2023, public health authorities in France [reported](#) a new case of severe E11 infection in a newborn. The clinical picture is similar to the previously reported cases and includes hepatic failure, disseminated intravascular coagulation and meningitis. On 17 July, Santé publique France and the French National Reference Centre for Enteroviruses and Parechoviruses published an updated epidemiological [report](#) on enterovirus infections in France for the years 2022 and mid-2023. The report points towards a global increase of enterovirus meningitis in France compared to previous years.

Summary

On 28 April 2023, the French Pediatric Society (SFP), with data from the National Reference Centre for Enterovirus (EV), reported that since July 2022, nine neonates had presented with severe sepsis, complicated by hepatic failure, and neurological or myocardial involvement due to infection with E11 in France. Seven neonates died. Reported cases were predominantly male, including four pairs of premature twins and a full-term singleton. Five out of nine neonates were born with low birth weight. All the cases presented clinical signs at between three and six days of age. Maternal clinical symptoms, such as fever and gastrointestinal signs, were reported in four out of five mothers during the three days before or on the day of delivery. Seven cases are reported to have occurred in the context of confirmed vertical transmission. According to the French EV surveillance, E11 was the predominant circulating EV in neonates (30.2% of identified viruses). It is also reported that a new variant of E11 has been circulating since June 2022 in metropolitan France and certain French Overseas Departments and Regions (New Caledonia and Réunion).

On 15 June 2023, a scientific article was published in the [Eurosurveillance](#) journal reporting two cases of fulminant hepatitis in Italy linked with E11 infection. The cases are non-identical, male, late pre-term twin brothers who were transferred in April to the neonatal intensive care unit (NICU) due to episodes of apnoea requiring respiratory support. Enterovirus typing was performed in urine and plasma specimens by whole genome sequencing (WGS) and showed the presence of E11. The phylogenetic and molecular analysis concluded that the Italian E11 strains clustered with the French strains collected in 2023, which together composed a divergent lineage.

The mother presented with a single episode of fever at 35 weeks and two days of gestational age. The infants were born the following day. No specimens were collected from the mother for virological investigations.

In addition, since the publication of the article, Italy has reported a third case which was admitted to a NICU due to E11 infection.

Public health authorities in Spain have reported two cases of E11 infection. These cases were pre-term twins, born in January 2023. Both the cases were admitted to the NICU after birth. One was recorded as having died of severe enterovirus infection, with probable vertical transmission, while the second case was discharged from the hospital without sequelae.

On 16 June 2023, public health authorities in the United Kingdom posted a comment on EpiPulse, reporting an Echovirus 11 neonatal sepsis event with a fatal outcome soon after birth. The event occurred in March 2023.

On 22 June 2023, public health authorities in Sweden reported four cases of infants with meningoencephalitis due to Echovirus11 via EpiPulse. These cases were reported between the beginning of 2022 and 15 June 2023.

In June 2023, a cluster of three neonates with severe E11 infection were reported by Croatia. Typing efforts are ongoing. Symptoms include meningoencephalitis, hepatic insufficiency and general febrile illness.

Other cases of E11 infection have been reported in 2022 and 2023 in neonates, infants or older children, without full information of the clinical manifestations or outcomes. However, Austria, Belgium, Denmark, the Netherlands, Norway and Portugal have not observed an increase in E11 infections associated with severe neonatal cases.

Background

EV are a group of viruses that usually cause self-limited to mild illness. In certain populations, such as neonates, infection by specific serotypes of EV can cause severe illness. The most relevant EV subspecies in neonatal infections include Coxsackievirus B and Echovirus, including multiple distinct serotypes.

Clinical manifestations of EV infection may range from asymptomatic, acute febrile illness to life-threatening disseminated disease. E11 infection in neonates may be associated with [severe clinical features](#), such as sepsis, myocarditis, and meningitis. The most characteristic clinical syndrome in neonates infected with E11 is fulminant hepatitis, which presents with profuse bleeding, jaundice and multiple organ failure.

EV are predominantly transmitted via faecal-oral and respiratory routes. For previously reported cases of E11 infection in neonates, modes of transmission included vertical transmission (prenatal transplacental or during childbirth), postnatal human-to-human contact, as well as being spread through nurseries and NICUs by caregivers and healthcare workers. Transmission through breastfeeding was also reported to be possible.

For previously reported clusters in neonates, infection and death outcomes have been more frequently associated with E11 than other EVs in the same population. For the currently reported cases, and according to the report from French authorities, the high fatality rate observed should be interpreted within the context of neonatal infection within the first seven days of life, prematurity and low birth weight in multi-foetal pregnancies, and potential changes in the virulence of the circulating E11 genetic lineage.

Although some countries have EV surveillance, there is no systematic European-wide EV surveillance in place in the EU/EEA. It is therefore difficult to estimate the extent of the current severe neonatal E11 infections or background rates for circulation of E11 viruses in the population. If there is no EV surveillance in place, only the most severe cases will probably be detected through active efforts to test and type specimens from such cases.

Several outbreaks due to E11 infection in neonates, including some which are healthcare-acquired, have been previously reported ([1964](#), [1973](#), [1979](#), [1985](#), [2004](#), [2018](#)). Some of the outbreaks are reported to have occurred in the context of community circulation of E11.

ECDC assessment:

Based on the available information, ECDC assesses the likelihood of infection with E11 among the neonatal population to be very low, with a high level of uncertainty. The impact of infection is estimated to be moderate, with a high level of uncertainty. Therefore, the overall public health risk for the neonatal population of the EU/EEA is currently estimated to be low. ECDC will reassess the risk as more information becomes available.

On 8 August 2016, ECDC published a [Rapid Risk Assessment on enterovirus](#) detections associated with severe neurological symptoms in children and adults in European countries.

Actions:

ECDC encourages countries to notify any unusual occurrence of E11 infections through EpiPulse (2023-EIP-00026). ECDC case definitions have been posted in EpiPulse as well. Reporting of unusual EV cases and clusters through Early Warning and Response System (EWRS) in EU/EEA countries is also encouraged.

ECDC has published an [epidemiological update](#), including case definitions and guidance on testing.

Further information:

ECDC case definitions:

- **Confirmed case:** Neonates (<28 days) admitted to NICU with laboratory-confirmed diagnosis of Echovirus 11 lineage 1* notified since 1 January 2022.
- **Probable case:** Neonates (<28 days) admitted to NICU with laboratory-confirmed diagnosis of Echovirus 11 notified since 1 January 2022.
- **Suspected case:** Neonates (<28 days) admitted to NICU with laboratory-confirmed diagnosis of other non-polio enteroviruses notified since 1 January 2022.

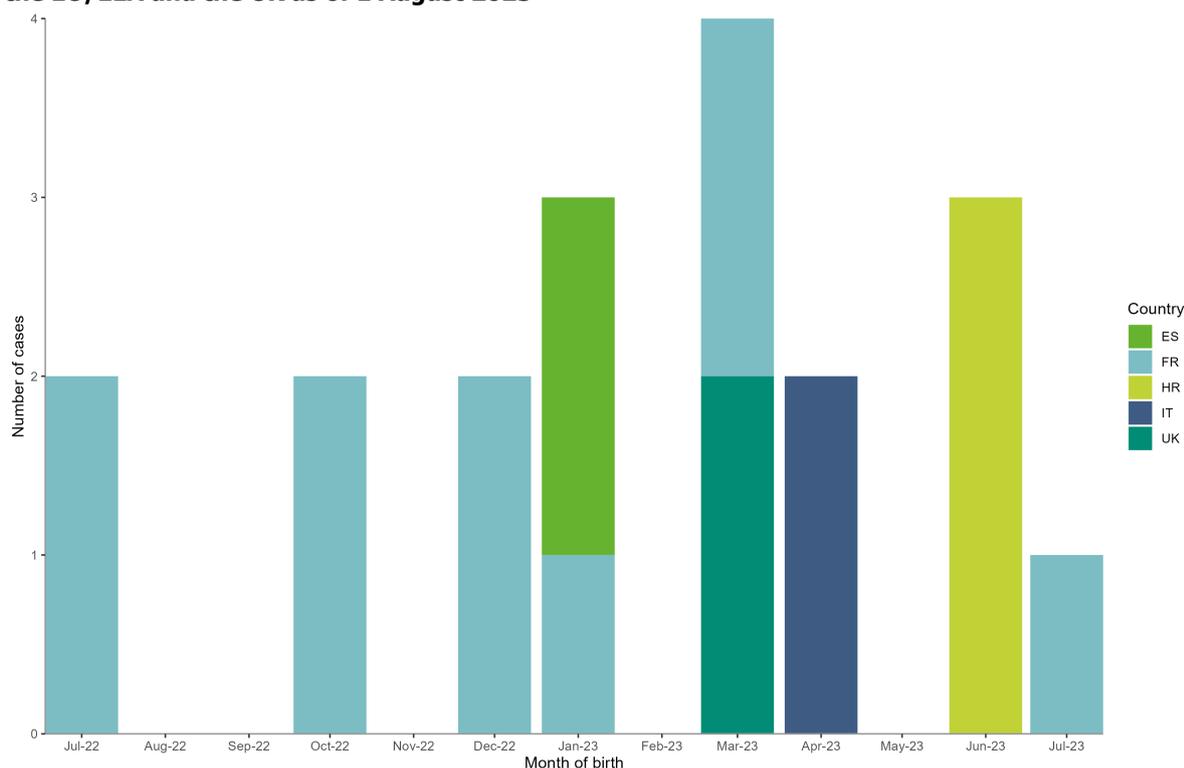
*Lineage 1 as outlined by [Grapin et al.](#), 2023 molecular characterisation of the new E11 lineage

Sources: [World Health Organization, Disease Outbreak News \(WHO DON\)](#) | [DON](#)

Last time this event was included in the CDTR: 01 August 2023

Maps and graphs

Figure 1. Distribution of confirmed and probable cases of severe neonatal Echovirus 11 infection in the EU/EEA and the UK as of 1 August 2023



Source: ECDC

Legend: The graph shows 19 cases with known month of notification, birth, or sampling; cases with missing date information not depicted in the graph include: Sweden (n=4) and Italy (n=1).

4. West Nile virus One Health seasonal surveillance - 2023

Overview:

This is the tenth weekly update of the 2023 West Nile virus (WNV) monitoring season. Since last week's update, and as of 2 August 2023, EU/EEA countries reported 36 human cases of WNV infection and three deaths related to WNV infections. Cases were reported by Italy (25), Greece (8) and France (3). Deaths were reported by Greece (2) and Italy (1). EU-neighbouring countries did not report any human cases of WNV infection.

This week, among the reporting countries, the following NUTS-3 regions have reported autochthonous human cases of WNV infection for the first time since the start of this season: Imathia, Pella and Larissa (Greece), Gironde (France), Novara, Cremona, Mantova, Modena, Torino, Pavia, Lodi, Milano, Verona, Piacenza, Reggio nell'Emilia, Bologna and Ravenna (Italy).

Since the beginning of the 2023 transmission season and as of 2 August 2023, EU/EEA countries have reported 41 human cases of WNV infection in Italy (26), Greece (11), France (3) and Hungary (1). EU/EEA countries have reported three deaths in Greece (2) and Italy (1). EU-neighbouring countries did not report any human cases of WNV infection.

During the current transmission season and as of 2 August 2023, within the reporting countries, autochthonous human cases of WNV infection were reported from 22 different NUTS-3 regions, of which Gironde (France) reported autochthonous human cases of WNV infection for the first time ever.

Since the beginning of the 2023 transmission season and as of 2 August 2023, two outbreaks among equids have been reported by Spain, and 19 outbreaks among birds have been reported by Italy (16) and Germany (3).

Please refer to the [West Nile virus infection webpage](#) for maps and a dashboard.

Sources: The European Surveillance System (TESSy), Animal Disease Information System (ADIS)

ECDC assessment:

Gironde, which lies in the south-western part of France, reported cases of WNV infection among humans for the first time ever during week 31, 2023. Cases of WNV infection among humans that were reported from France in the previous years were from the south-eastern part of France. However, WNV infections among equids were reported in 2022 from Gironde.

In accordance with the [Commission Directive 2014/110/EU](#), prospective blood donors should be deferred for 28 days after leaving a risk area for locally acquired WNV infection, unless the result of an individual nucleic acid test is negative.

Actions:

During WNV transmission seasons, ECDC publishes a dashboard and an epidemiological summary every Friday.

Further information:

Data on human cases of WNV are collected via The European Surveillance System (TESSy) managed by ECDC. Imported cases are not included in this report. The following EU-neighbouring countries reported human cases of WNV infection to ECDC: Albania, Kosovo*, Montenegro, North Macedonia, Serbia, and Türkiye.

Animal data (i.e. outbreaks among equids and birds) are collected through the Animal Disease Information System (ADIS) of the European Commission. Reporting of WNV in equids and birds is mandatory at the EU/EEA level.

The distribution of human infections covers EU/EEA and EU-neighbouring countries, whereas the distribution of outbreaks among equids and birds only relates to EU/EEA countries.

**This designation is without prejudice to positions on status, and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo Declaration of Independence.*

Last time this event was included in the CDTR: 28 July 2023

5. COVID-19 associated with SARS-CoV-2 – Multi-country (EU/EEA) – 2019 - 2023

Overview:

Summary:

By the end of week 30 (ending 30 July 2023), stable trends were observed in all EU/EEA indicators based on pooled country data for COVID-19. Please note, that due to a lower number of reporting countries in the recent weeks and a probable impact of the summer holidays on the quality of data, the COVID-19 epidemiological situation must be interpreted with caution.

Out of 20 countries reporting cases of COVID-19, five showed an increase in overall case rates compared to the previous week. Out of seven countries reporting information on hospital and ICU admissions, two reported an increase in at least one of those indicators. These increases were recent (of 1–2 weeks duration) and the indicators remained relatively low, compared with pandemic peaks. There were 50 deaths reported from 14 countries.

Among the seven countries reporting at least 10 results from SARS-CoV-2 sequencing or genotyping for weeks 28–29 (10 July to 23 July 2023), the estimated distribution of variants of concern (VOC) or of interest (VOI) was 93.8% (71.6–100.0% from six countries) for XBB.1.5, 12.0% (4.3–19.8% from two countries) for XBB, and 5.8% (2.2–100.0% from five countries) for BA.2.75.

There are no updates for the cumulative vaccine uptake in the EU/EEA compared to the previous week. Among people aged 60 years and above, the cumulative uptake of a first booster was 84.9% (country range: 13.3–100.0%) and of a second booster was 35.6% (country range: 0.4–87.0%).

Weekly update on SARS-CoV-2 variants:

Since the last update on 27 July 2023, **no changes** have been made to ECDC variant classifications for variants of concern (VOC), variants of interest (VOI), variants under monitoring and de-escalated variants.

For the latest information on variants, please see ECDC's [webpage on variants](#).

Public Health Emergency of International Concern (PHEIC):

On 30 January 2020, the World Health Organization (WHO) declared that the outbreak of COVID-19 constituted a PHEIC. On 11 March 2020, the Director-General of WHO declared the COVID-19 outbreak a pandemic.

The [third](#), [fourth](#), [fifth](#), [sixth](#), [seventh](#), [eighth](#), [ninth](#), [tenth](#), [eleventh](#), [twelfth](#), [thirteenth](#), and [fourteenth](#) International Health Regulations (IHR) Emergency Committee meetings for COVID-19 were held in Geneva on 30 April 2020, 31 July 2020, 29 October 2020, 14 January 2021, 15 April 2021, 14 July 2021, 22 October 2021, 13 January 2022, 11 April 2022, 8 July 2022, 13 October 2022, and 27 January 2023 respectively. The Committee concluded during these meetings that the COVID-19 pandemic continues to constitute a PHEIC.

In the [fifteenth](#) IHR Emergency Committee meeting held in Geneva on 4 May 2023, the Director-General of WHO agreed with the [advice](#) offered by the Committee and determined that COVID-19 is no longer a public health emergency of international concern (PHEIC).

For the latest COVID-19 country overviews, please see the [dedicated web page](#).

Please refer to the [data reported by the World Health Organization \(WHO\)](#) on COVID-19 and [WHO's Weekly Epidemiological Updates and Monthly Operational Updates](#) page for non-EU/EEA countries.

ECDC assessment:

SARS-CoV-2 continues to circulate in the EU/EEA with varying intensity. The epidemiological picture in the EU/EEA over the past 12 months has been characterised by periodic waves of infection, approximately every two-to-three months, with an overall downward trend in the height of the associated peaks in reported cases, hospitalisations, ICU admissions, and deaths during this period. The emergence of new variants of concern or population immunity waning over time may have an impact on the epidemiological situation in the future.

For the most recent risk assessment, please visit [ECDC's dedicated webpage](#).

Actions:

Detailed country-specific COVID-19 updates are available on ECDC's [website](#). For the latest update on SARS-CoV-2 variants of concern, please see [ECDC's webpage on variants](#).

For EU/EEA- and country-specific epidemiological trends and forecasts, visit ECDC's [Country Overview Report](#) (updated on Fridays). In addition to the actions described in the latest [COVID-19 risk assessments](#), ECDC published a guidance entitled [Interim public health considerations for COVID-19 vaccination roll-out during 2023](#) on 5 April 2023, to support countries with vaccination strategy decision-making. This guidance aims to offer advice on the optimal timing and targeting of vaccination campaigns in order to limit the continuing burden of disease experienced by the elderly and people with comorbidities. It complements the previous guidance, [Long-term qualitative scenarios and considerations of their implications for preparedness and response to the COVID-19 pandemic in the EU/EEA](#), published in August 2022 to support country preparedness activities in the post-acute phase of the COVID-19 pandemic.

Last time this event was included in the CDTR: 28 July 2023

6. Crimean-Congo haemorrhagic fever case - North Macedonia - 2023

Overview:

On 30 July 2023, the public health authority of North Macedonia reported a lethal case of Crimean-Congo haemorrhagic fever (CCHF) from a mountain village in the area of the city of Štip (eastern North Macedonia), through EpiPulse. The patient was an agricultural worker who recognised a tick in the abdomen area, which was removed on 19 July 2023.

The patient developed a general, febrile disease on 21 July 2023, was hospitalised between 23–25 July 2023 at the infectious department in the PHI Clinical Hospital Štip, where symptomatic therapy and diagnostic tests were performed. On the day of discharge from the hospital, haemorrhagic symptoms developed, and the patient was referred and further hospitalised at the PHI University Clinic for infectious diseases and febrile conditions in Skopje on 25 July 2023. During the stay, the patient was symptomatically treated, and laboratory examined. Due to deteriorating condition, the patient was transferred to the intensive care unit on 26 July 2023 and died on 27 July 2023. A few hours later, the diagnosis of CCHF was confirmed.

A total of 69 contacts were identified and [classified according to their risk](#). Four contacts were identified as high risk, 23 medium, 40 low risk; while two contacts were discarded. High-risk contacts were tested with negative result. High- and medium-risk contacts are being monitored for a maximum of 14 days from the day of last contact with the patient or other sources of infection, by taking temperature twice daily.

The case was subsequently also reported on the [official website](#) of the Institute of Public Health of the Republic of North Macedonia.

ECDC assessment:

Human cases of CCHF in North Macedonia were first detected during an outbreak in 1971, and the virus was demonstrated in animal hosts and tick vectors in the country. Sporadic cases of CCHF have also been reported in several neighbouring countries of North Macedonia (i.e. Albania, Bulgaria, Greece and Kosovo*). The tick species *Hyalomma marginatum*, which is the principal vector of the CCHF virus, [has been detected in all the regions of North Macedonia](#).

The current case occurred in an agricultural worker who was living in a hard-to-reach mountain village and was often exposed to tick bites. No additional cases were diagnosed in the identified contacts so far.

The likelihood of infection of EU/EEA citizens travelling to or residing in North Macedonia is very low. However, considering the potentially severe or lethal disease outcome, personal protective measures against tick bites should be applied, infesting ticks should be removed, and in case of febrile clinical symptoms, patients should seek medical care. The general practitioners (GPs) should be informed about the patients' history of travel and previous tick bite.

Further details on CCHF are available in [ECDC's factsheet](#).

**This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo Declaration of Independence.*

Actions:

The public health authority of North Macedonia performed contact tracing in the village and both the hospitals. High- and medium-risk contacts are being monitored. ECDC continues to monitor the situation.

Further information:

Serum samples from the patient were tested positive for IgM and IgG antibodies by ELISA, and for CCHFV RNA by RT-PCR. The four high-risk contacts were also tested by ELISA and RT-PCR.

Last time this event was included in the CDTR: 01 August 2023