I. Executive summary

**EU Threats**

**Influenza – Multistate (Europe) – Monitoring season 2018 – 2019**
Opening date: 8 October 2018  Latest update: 25 January 2019

Influenza transmission in Europe shows a seasonal pattern, with peak activity during the winter months.

Update of the week

During week 3 in 2019, influenza activity continued to increase in the European region. Samples collected from individuals presenting with influenza-like illness (ILI) or acute respiratory infection (ARI) to sentinel primary health care sites yielded an influenza positivity rate of 48.8%.

**Non EU Threats**

**New! Mass gathering monitoring - World Youth Day - Panama - 2019**
Opening date: 24 January 2019  Latest update: 25 January 2019

In 2019, World Youth Day is taking place from 22–27 January 2019 in Panama City, Panama with an expected 500,000 participants. During mass gathering events, the most common health risks are related to vaccine-preventable diseases, gastrointestinal illnesses and vector-borne diseases in favourable climate conditions.

**Ebola virus disease - tenth outbreak - Democratic Republic of the Congo - 2018-2019**
Opening date: 1 August 2018  Latest update: 25 January 2019

On 1 August 2018, the Ministry of Health of the Democratic Republic of the Congo declared the 10th outbreak of Ebola virus disease in the country. The outbreak affects North Kivu and Ituri Provinces in the northeast of the country close to the border with Uganda. On 17 October 2018, the International Health Regulations Emergency Committee concluded that the epidemic does not at this stage constitute a public health emergency of international concern.

Update of the week

Since the previous CDTR, the Ministry of Health of the Democratic Republic of the Congo has reported 47 additional cases.

As of 23 January 2019, according to the Ministry of Health of the Democratic Republic of the Congo, there have been 715 Ebola virus disease cases (666 confirmed, 49 probable), including 443 deaths (394 in confirmed and 49 in probable cases), since the beginning of the outbreak.
Chikungunya virus disease and dengue are vector-borne diseases that affect 50 to 100 million people each year worldwide. Over the past decade, chikungunya virus disease and dengue have been detected in an increasing number of countries. Chikungunya virus disease has been circulating in Asia and Africa and has reached the Caribbean and the Americas since 2013 to 2014. Dengue is present in Asia, the Pacific, the Caribbean, the Americas and Africa. In 2018, autochthonous cases of dengue were reported in Spain and France. No autochthonous cases of chikungunya virus disease have been detected in EU/EEA Member States in 2018. No cases of either disease have been reported in continental Europe so far in 2019.

Chikungunya virus disease: The virus is largely spread in the Americas region, with several countries reporting cases in 2018. Since the previous CDTR update on 23 November 2018, Brazil, India Sudan and Thailand have reported the majority of new cases. No outbreaks have been identified in Europe and Australia and the Pacific region since the previous report. No cases have been reported in continental Europe so far in 2019.

Dengue: No cases have been reported in continental Europe so far in 2019. In the rest of the world, Argentina, Bangladesh, Cambodia, Paraguay, the Philippines, Senegal, Singapore, Taiwan and Thailand have observed an increasing trend in the number of cases compared with 2017. Additionally, a new outbreak has been reported in Oman.
II. Detailed reports

Influenza – Multistate (Europe) – Monitoring season 2018 – 2019

Opening date: 8 October 2018  Latest update: 25 January 2019

Epidemiological summary

Influenza activity continued to increase in the European region. Samples collected from individuals presenting with ILI or ARI to sentinel primary health care sites yielded an influenza positivity rate of 48.8%. Influenza type A virus detections dominated with A(H1N1)pdm09 viruses being more prevalent than A(H3N2). Very few influenza B viruses were detected. Data from the 23 Member States and areas reporting to the EuroMOMO project indicated that generally all-cause mortality was at expected levels for this time of year, but several countries continue to observe some excess mortality in elderly populations.

Influenza activity in Europe continued to increase, with both subtypes of influenza A viruses circulating widely. Countries should continue to promote vaccination. In addition, countries are encouraged to use antivirals in accordance with national guidelines. The majority of A(H1N1)pdm09 and A(H3N2) viruses characterized thus far have been antigenically similar to vaccine viruses. The effectiveness of vaccines in the population will be evaluated when data become available later in the season.

Source: Flu News Europe | EuroMOMO

ECDC assessment

Influenza activity and geographic spread remain at seasonally expected levels. Influenza A(H3N2) and A(H1N1)pdm09 co-circulate in Europe. Influenza vaccine coverage among the elderly, chronic disease risk groups and healthcare workers was suboptimal in most of the EU Member states, according to the VENICE report. Influenza vaccination efforts should still continue in the EU.

Actions


New! Mass gathering monitoring - World Youth Day - Panama - 2019

Opening date: 24 January 2019  Latest update: 25 January 2019

Epidemiological summary

In 2019, the World Youth Day is taking place between 22-27 January 2019 in Panama City, Panama with an expected 500,000 participants. The Catholic Church organises this event every two to three years with open-air masses and religious processions for pilgrims, priests and nuns from around the world. The majority of participants are aged 15–35 years.

During mass gathering events, the most common health risks are related to vaccine-preventable diseases, gastrointestinal illnesses and vector-borne diseases in favourable climate conditions. At the moment, there are risks with certain diseases in Panama, including chikungunya virus disease, dengue, gonorrhoea, hepatitis A, B and C, HIV, malaria, measles, rashes, syphilis, yellow fever and Zika virus disease.

So far, there are no major events detected.

According to media quoting health authorities, two imported cases of malaria have been detected during the mass gathering coming from Mozambique (1) and Ivory Coast (1). In addition, there have been 955 people that needed medical attention mainly for gastritis, heatstroke and respiratory symptoms.

World Youth Day | ECDC epidemiological update | Media

ECDC assessment

The risk is considered low for European travellers if vaccinated properly and recommendations for the prevention on mosquito bites and on good hygiene practices are followed.
Actions
ECDC is monitoring the event through epidemic intelligence and will report if major events occur.

Opening date: 1 August 2018  Latest update: 25 January 2019

Epidemiological summary
Since the beginning of the outbreak and as of 23 January 2019, according to the Ministry of Health of the Democratic Republic of the Congo, there have been 715 Ebola virus disease cases (666 confirmed, 49 probable), including 443 deaths (394 in confirmed and 49 in probable cases).
Eighteen health zones in two provinces have reported confirmed or probable Ebola virus disease cases: Beni, Biena, Butembo, Kalunguta, Katwa, Kayondo, Mabalako, Mangurujipa, Masereka, Musienene, Mutwanga, Oicha and Vuhovi health zones in North Kivu Province and Komanda, Mandima, Nyankunde and Tchomia health zones in Ituri Province.

Source: Ministry of Health of the Democratic Republic of the Congo

ECDC assessment
ECDC assessment: Response measures remain challenging in affected areas because of the prolonged humanitarian crisis, unstable security situation, resistance among the population and the recent general election. The fact that the outbreak is ongoing in areas with cross-border population flow with Rwanda, South Sudan and Uganda remains of particular concern.

A substantial proportion of cases remain among individuals not previously identified as contacts, stressing the need to maintain enhanced surveillance and identify chains of transmission.

The overall risk of introduction and further spread of Ebola virus within the EU/EEA is very low. However, the risk can only be eliminated by stopping transmission at the local level.

WHO assessment: As of 17 January 2019, the WHO assessment is that the risk of spread is low at the global level, but remains very high at national and regional levels.

Actions
ECDC published the second update of its rapid risk assessment on 21 December 2018 and will publish an epidemiological update on 25 January 2019.
Distribution of confirmed and probable cases of Ebola Virus Disease, North Kivu and Ituri, Democratic Republic of the Congo, as of 23 January 2019

Geographical distribution of confirmed and probable cases of Ebola virus disease, North Kivu and Ituri Provinces, Democratic Republic of the Congo, as of 23 January 2019

Chikungunya and dengue – Multistate (World) – Monitoring global outbreaks
Epidemiological summary

**Europe**

**Chikungunya virus disease:**
No autochthonous chikungunya virus disease cases have been detected in continental EU/EEA countries in 2019.

**Dengue:**
In 2018, Spain has reported six autochthonous cases of dengue from three different regions (Cadiz, Murcia, and Barcelona). In addition, France has reported eight autochthonous cases from Alpes-Maritimes (5), Hérault (2) and Gard (1). No cases have been reported in continental Europe so far in 2019.

**Americas and the Caribbean**

**Chikungunya:**
- **Bolivia:** In 2018, as of 30 December 2018, Bolivia has reported 91 confirmed cases. This represents an increase of 11 cases since the previous update on 23 November 2018. For the same period in 2017, Bolivia reported 22 cases.
- **Brazil:** In 2018, as of 9 December 2018, Brazil has reported 65 480 confirmed cases. This represents an increase of 4 567 confirmed cases since the previous update on 23 November 2018. Among the confirmed cases, the Brazilian Ministry of Health is reporting 36 deaths due to chikungunya virus disease.
- **Colombia:** In 2018, as of 30 December 2018, Colombia has reported 663 cases. Among these cases, 157 are laboratory-confirmed. This represents an increase of 65 cases since the previous CDTR report on 23 November 2018.
- **Costa Rica:** In 2018, as of 11 November 2018, Costa Rica has reported 123 suspected cases. This represents an increase of 14 suspected cases since the previous CDTR update on 23 November 2018. For the same period in 2017, Costa Rica reported 396 suspected cases.
- **El Salvador:** In 2018, as of 29 December 2018, El Salvador has reported 388 suspected cases. This represents an increase of 34 suspected cases since the previous CDTR update on 23 November 2018. For the same period in 2017, El Salvador reported 578 suspected cases.
- **Mexico:** In 2018, as of 30 December 2018, Mexico has reported 39 confirmed cases, two more cases since the previous CDTR update on 23 November 2018. For the same period in 2017, Mexico reported 61 confirmed cases.
- **Nicaragua:** In 2018, as of 23 December 2018, Nicaragua has reported 293 suspected cases. Additionally, 26 cases were confirmed for the same period in Nicaragua. This represents an increase of 23 suspected cases since the previous CDTR update on 23 November 2018. For the same period in 2017, Nicaragua reported 27 confirmed cases.
- **Paraguay:** In 2018, as of 22 December 2018, Paraguay has reported 1 237 probable cases. Additionally, Paraguay has reported 67 cases as confirmed cases in the Central, Amambay, Guairá and Paraguari regions. This represents an increase of 73 probable cases since the previous CDTR update on 23 November 2018.

**Dengue:**
In 2018 and as of 30 December 2018, the Pan American Health Organization (PAHO) has reported 534 000 suspected and confirmed cases in the Americas. Brazil accounts for almost half of the cases (247 000), followed by Mexico (79 000), Nicaragua (57 000), Colombia (45 000) and Paraguay (32 000). Since July, Mexico has recorded an eightfold increase. Brazil follows the same trend as last year.

According to WHO, 352 cases have been reported in Guadeloupe as of 9 December 2018.

**Asia**

**Chikungunya virus disease:**
- **India:** In 2018, as of 25 November 2018, India has reported 47 208 suspected cases. Additionally, 8 499 cases are confirmed. This represents an increase of 6 201 confirmed cases and 31 181 suspected cases since the previous update.
- **Thailand:** In 2018, Thailand has reported 3 656 cases in the country. The more affected provinces are located in the southern part of the country. This represents an increase of 3 301 cases since the previous update.
**Dengue:**
In Asia, the following countries have reported an increasing trend compared with 2017:

According to media quoting health authorities, Oman has reported an outbreak of dengue, with 52 cases from 12 December 2018 through 22 January 2019.

In 2018, Thailand reported 54,482 dengue cases. This represents a 50% increase compared with the same period last year. In addition, Thailand has reported 435 cases of dengue in 2019 as of 21 January 2019.

According to the Taiwan Centers for Disease Control, there have been 524 cases in Taiwan, a tenfold increase compared with 2017. In addition, there have been 13 cases in 2019 as of 5 January 2019.

As of 12 December 2018, Bangladesh has reported 9,926 cases nationwide, an elevenfold increase compared with 2017.

According to WHO, there have been 9,885 cases in Cambodia in 2018, a fourfold increase compared with 2017. In addition, as of 17 January 2019, according to WHO, there have been 142 cases in 2019.

According to WHO, there have been 199,271 cases in Philippines in 2018, a tenfold increase compared with 2017.

According to national authorities, Singapore has reported 3,259 cases compared with 2,700 cases in 2017. In addition, Singapore has reported 631 cases in 2019 as of 18 January 2019.

The following countries have reported a stable or decreasing trend of dengue compared with the same period in 2017:

India has reported 89,974 cases as of 25 November 2018 compared with 141,000 cases in 2017.

According to WHO, there have been 6,204 cases in Laos in 2018, compared with 11,000 cases in 2017. In addition, as of 17 January 2019, according to WHO, there have been 96 cases of dengue in Laos in 2019.

According to media reports quoting health authorities, Pakistan has reported 1,965 cases in 2018 as of 17 December 2018, compared with 125,000 cases in 2017.

According to WHO, Malaysia reported 80,615 cases of dengue in 2018, compared with 83,000 cases in 2017. In addition, according to WHO, Malaysia has reported 2,587 cases in 2019 as of 13 January 2019.

According to the Ministry of Health, Sri Lanka has reported 51,554 cases in 2018, compared with 186,000 cases in 2017. In addition, Sri Lanka has reported 2,799 cases in 2019 as of 21 January 2019.

There are no updates available for Vietnam and China.

**Africa**

**Chikungunya virus disease:**

**Sudan:** As of 30 November 2018, WHO reports 2110 chikungunya cases in Kassala state, bordering Eritrea. This represents an increase of 4166 cases since the previous CDTR update on 23 November 2018.

Dengue:
According to WHO and as of 3 November 2018, Senegal has reported 2981 cases, of which 342 are confirmed. Eight regions are currently affected. The serotyping has identified three circulating serotypes: DENV-1, DENV-2 and DENV-3.

Media quoting health authorities reported 1339 cases of dengue in Angola in 2018 as of 22 October 2018.

According to WHO and as of 22 October 2018, Ethiopia has reported 127 cases.

Since the beginning of 2018 and as of 30 December 2018, there have been 6763 cases in La Réunion. In addition, there have been 98 cases in 2019 as of 13 January 2019.

There are no updates available for Mauritania.

**Australia and the Pacific**

**Chikungunya virus disease:** No outbreaks have been reported since the previous monthly update.

**Dengue:**
Australia reported 855 cases of dengue in 2018 and 27 cases of dengue in 2019 as of 21 January 2019.

New Caledonia reported 2,084 cases of dengue in 2018. In addition, according to WHO and as of 16 January 2019, there have been 188 cases reported in 2019.

According to local health authorities, there are DENV-1 and DENV-2 outbreaks or active circulation in Wallis and Futuna (203 autochthonous cases).

Bora Bora, Moorea, Nauru, Nuku Hiva, Rangiroa and Tahiti are reporting circulation of DENV-1. DENV-3 is circulating in Palau.

**ECDC assessment**

Chikungunya virus disease and dengue are endemic in large regions of the intertropical convergence zone. Isolated cases or small clusters of autochthonous dengue in the south of Europe are not unexpected as *Aedes albopictus* is present in the area. The risk of further transmission is considered to be low as the weather conditions are unfavourable to mosquito activity in Europe at the moment.

ECDC produced a rapid risk assessment on 'Local transmission of dengue fever in France and Spain - 2018' published on 22 October 2018 and a rapid risk assessment on the dengue outbreak on Réunion on 6 July 2018.

**Actions**

ECDC monitors these threats through epidemic intelligence and reports on a monthly basis.

Geographical distribution of chikungunya cases reported worldwide, October to December 2018
Geographical distribution of chikungunya cases reported worldwide in 2018

Geographical distribution of dengue cases reported worldwide, November 2018 to January 2019

Geographical distribution of dengue cases reported worldwide in 2018
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COMMUNICABLE DISEASE THREATS REPORT

Week 4, 20-26 January 2019

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