

This weekly bulletin provides updates on threats monitored by ECDC.

I. Executive summary

EU Threats

New! Dengue - France (OCTs) - 2019

Opening date: 3 January 2019

Latest update: 4 January 2019

On 26 December 2018, France notified through EWRS about dengue (DENV-1) cases in Guadeloupe and Saint-Martin islands in the Caribbean.

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

Opening date: 8 October 2018

Latest update: 4 January 2019

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

→Update of the week

During week 52, 2018, influenza activity continued to increase in the European Region. Of the individuals sampled after presenting with influenza-like illness or acute respiratory infection at sentinel primary healthcare sites in Europe, 37% tested positive for influenza viruses. Most of the countries are starting to see geographic spread (widespread, regional or local) within their borders.

Non EU Threats

Ebola virus disease - tenth outbreak - Democratic Republic of the Congo - 2018

Opening date: 1 August 2018

Latest update: 4 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 (IHR) 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 with data as of 21 December 2018, the Ministry of Health of the Democratic Republic of the Congo has reported 58 additional cases.

As of 2 January 2019, according to the [Ministry of Health of the Democratic Republic of the Congo](#), there have been 608 Ebola virus disease cases (560 confirmed, 48 probable), including 368 deaths (320 in confirmed and 48 in probable cases), since the beginning of the outbreak.

Presidential and provincial elections took place on 30 December 2018 except in three cities, including Beni and Butembo.

Several major security incidents affected the Ebola virus disease response in the field.

Poliomyelitis – Multistate (World) – Monitoring global outbreaks

Opening date: 8 September 2005

Latest update: 4 January 2019

Global public health efforts are ongoing to eradicate polio by immunising every child until transmission of the virus has stopped and the world becomes polio-free. Polio was declared a Public Health Emergency of International Concern (PHEIC) by WHO on 5 May 2014 due to concerns over the increased circulation and international spread of wild poliovirus in 2014. On 15 November 2018, the International Health Regulations (IHR) Emergency Committee agreed that the spread of poliovirus remains a PHEIC and extended the temporary recommendations an additional three months. In June 2002, the WHO European Region was officially declared polio-free.

→Update of the week

Since the CDTR published on 7 December 2018, one new case of wild poliovirus type 1 has been reported in Afghanistan. Additionally, two new cases of circulating vaccine-derived poliovirus (cVDPV) have been reported globally: one case of cVDPV type 1 (cVDPV1) in Papua New Guinea and one case of cVDPV type 2 (cVDPV2) in Mozambique.

The polio outbreak of cVDPV2 detected in 2017 in Syria has been officially closed with no international spread, according to WHO. However, Syria remains vulnerable to reinfection.

II. Detailed reports

New! Dengue - France (OCTs) - 2019

Opening date: 3 January 2019

Latest update: 4 January 2019

Epidemiological summary

According to the EWRS message and epi update from CIRE Antilles reports, 23 cases were reported between 3 and 26 December 2018. All cases were confirmed by PCR or a positive NS1 antigen. PCR detected serotype DENV-1 in five cases in Guadeloupe and six cases in Saint-Martin. The laboratory result for one suspected case in Martinique is still pending. Vector control measures have been applied on all the affected islands.

ECDC assessment

According to local authorities, around 40 000 cases of DENV-1 were reported in Guadeloupe during the outbreak that occurred in 2009 and 2010, with the last cases of this serotype detected in 2016. *Aedes aegypti* is the only vector of dengue in Guadeloupe and it has developed strong resistance to insecticides, according to Agence de Santé Guadeloupe. The risk of occurrence of further cases is therefore high. Travellers going to the affected areas are advised to apply personal protective measures against mosquito bites. The risk of further transmission of dengue in the EU from returning travellers to Martinique, Guadeloupe and Saint-Martin islands is currently very low due to currently unfavourable conditions for vector activity in the winter months in Europe. Safety measures to prevent the transmission of dengue virus through donations of substances of human origin (SoHO) by local donors or by travellers to affected areas should be applied.

Sources: [Agence de Santé Guadeloupe](#) | [Agence de Santé Guadeloupe](#) | [Santé publique France](#)

Actions

ECDC will report on a monthly basis.

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

Opening date: 8 October 2018

Latest update: 4 January 2019

Epidemiological summary

Week 52, 24–30 December 2018

Influenza activity continued to increase in the European Region. Of the individuals sampled after presenting with influenza-like illness or acute respiratory infection at sentinel primary healthcare sites, 37% tested positive for influenza viruses.

The majority of influenza virus detections were type A in both inpatients and outpatients.

Influenza A(H3N2) and A(H1N1)pdm09 viruses were detected in similar proportions in the sentinel samples. For non-sentinel samples, the A subtype distribution shifted towards A(H1N1)pdm09 viruses.

Most of the hospitalised laboratory-confirmed influenza cases were in the age group 15–64 years.

Data from the 13 Member States and areas reporting to the EuroMOMO project indicated all-cause mortality to be at expected levels for this time of year.

Source: [Flu News Europe](#) | [EuroMOMO](#)

ECDC assessment

Influenza activity and geographic spread remain at seasonally expected levels. Influenza A(H3N2) and A(H1N1) 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](#).

Actions

ECDC monitors influenza activity in Europe during the winter season and publishes its weekly report on the [Flu News Europe website](#).

Recommendations on the composition of the 2018–2019 influenza virus vaccine are available from the [WHO](#) website.

Ebola virus disease - tenth outbreak - Democratic Republic of the Congo - 2018

Opening date: 1 August 2018

Latest update: 4 January 2019

Epidemiological summary

Since the beginning of the outbreak and as of 2 January 2019, according to the Ministry of Health of the Democratic Republic of the Congo, there have been 608 Ebola virus disease cases (560 confirmed, 48 probable), including 368 deaths (320 in confirmed and 48 in probable cases).

Sixteen health zones in two provinces have reported confirmed or probable Ebola virus disease cases: Beni, Biena, Butembo, Kalunguta, Katwa, Kyondo, Mabalako, Masereka, Musienene, Mutwanga, Oicha and Vuhovi health zones in North Kivu Province and Komanda, Mandima, Nyankunde and Tchomia health zones in Ituri Province.

Presidential and provincial elections took place in the DRC on 30 December 2018 except in three cities, including Beni and Butembo. Several major security incidents affected the Ebola virus disease response in the field.

- On 27 December 2018, protesters in Beni ransacked Ebola virus disease isolation centres belonging to MSF in Beni.
- On 31 December 2018, several health structures in Beni were burned by protesters, according to media reports.
- On 1 January 2019, according to media reports, the government shut down communication means (such as Internet, radio and SMS) for security reasons.

Due to security incidents and their effect on surveillance activities, the epi curve below should not necessarily be interpreted as a decreasing trend of reported cases.

Sources: [DRC MoH](#) | [Radio Okapi](#) | [Reuters](#) | [DigitalCongo](#) | [media 1](#) | [radio Okapi](#)

ECDC assessment

ECDC assessment: The compassionate use of the Ebola virus disease vaccine and experimental treatments support response efforts. However, the implementation of response measures in outbreak areas remains challenging because of the prolonged humanitarian crisis, unstable security situation arising from a complex armed conflict and mistrust in the population to response teams. The number of outbreak cases and affected areas are increasing and it is unlikely that the outbreak will be controlled in the near future.

While no confirmed cases in neighbouring countries have been documented so far, the fact that the outbreak is ongoing in areas with an important cross-border population flow between Rwanda and Uganda remains of particular concern.

The probability that EU/EEA citizens who live or travel in Ebola virus disease-affected areas of the Democratic Republic of the Congo are exposed to the disease is low provided that they adhere to precautionary measures. The overall risk of introduction and further spread of Ebola virus disease within the EU/EEA is very low. However, the risk can only be eliminated by stopping transmission at a local level.

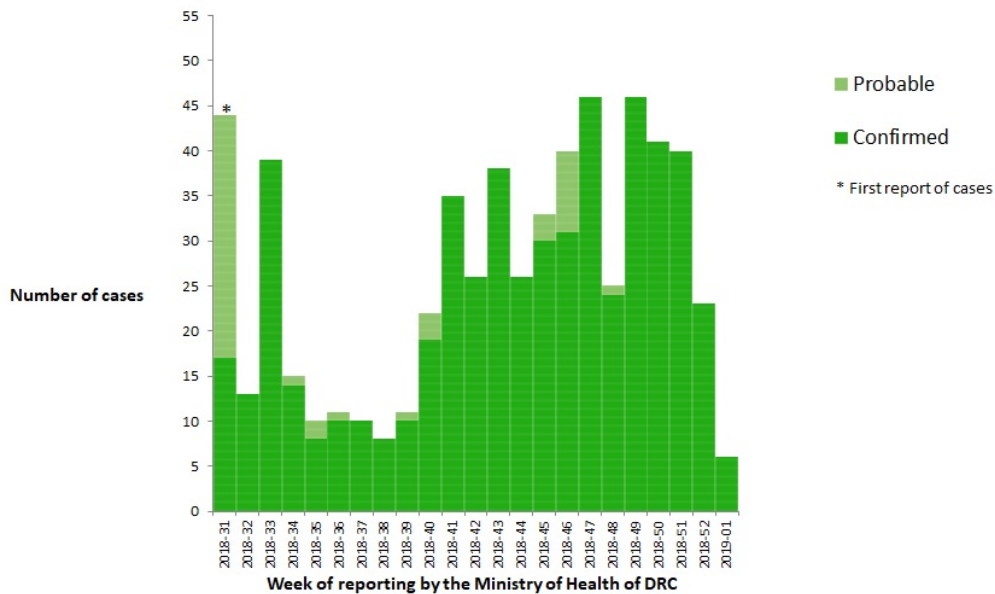
WHO assessment: As of 13 December 2018, the [WHO assessment](#) that the risk of spread is low at the global level, but remains very high at national and regional levels.

Actions

ECDC published a second update of its [rapid risk assessment](#) on 21 December 2018.

Distribution of confirmed and probable cases of Ebola Virus Disease, North Kivu and Ituri, Democratic Republic of the Congo, as of 02 January 2019

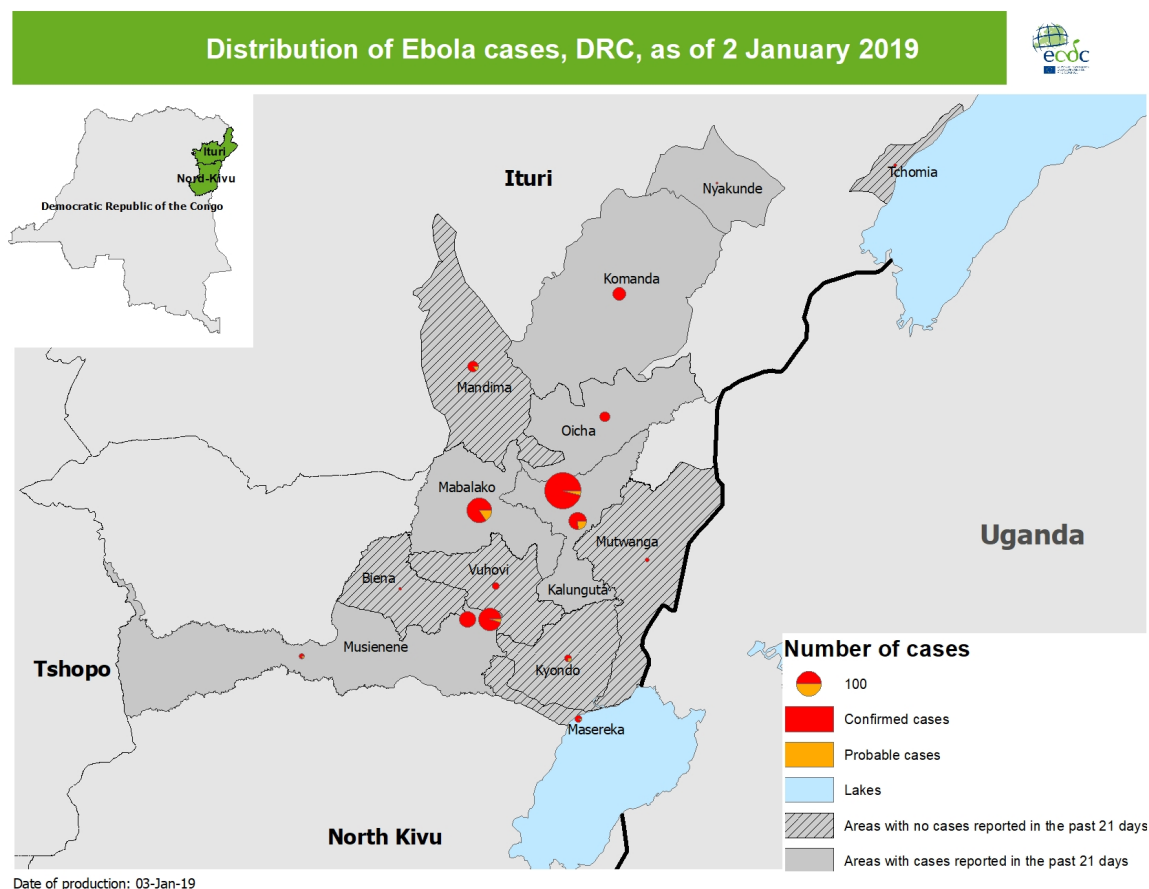
ECDC



The MoH of DRC are currently conducting data cleaning. Thus, these figures are likely to change over coming days as cases are being reclassified.

Geographical distribution of confirmed and probable cases of Ebola virus disease, North Kivu and Ituri Provinces, Democratic Republic of the Congo, as of 02 January 2019

ECDC



Poliomyelitis – Multistate (World) – Monitoring global outbreaks

Opening date: 8 September 2005

Latest update: 4 January 2019

Epidemiological summary

Since the beginning of 2018 and as of 18 December 2018, two countries have recorded cases of wild poliovirus type 1: Afghanistan (21) and Pakistan (8).

Since the beginning 2018 and as of 18 December 2018, six countries have detected 100 cases of cVDPV. cVDPV1 cases were reported in Papua New Guinea (26), while cVDPV2 cases were reported in the Democratic Republic of the Congo (20), Mozambique (1), Niger (8), Nigeria (32) and Somalia (13). Somalia reported five cVDPV2 cases, six cVDPV type 3 (cVDPV3) cases and one coinfection of both cVDPV2 and cVDPV3.

ECDC link: [ECDC poliomyelitis page](#) | [Polio interactive map](#)

Sources: [WHO IHR Emergency Committee](#) | [Polio eradication: weekly update](#) | [WHO EMRO: Syria](#) | [WHO AFRO Weekly Bulletin](#)

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ECDC assessment

The WHO European Region has remained polio-free since 2002. Inactivated polio vaccines are used in all EU/EEA countries. The risk of reintroduction of the virus in Europe exists as long as there are non- or under-vaccinated population groups in European countries and poliomyelitis is not eradicated.

ECDC link: [ECDC risk assessment](#)

Actions

ECDC provides updates on the polio situation on a monthly basis. 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 reintroducing wild poliovirus in the EU.

ECDC maintains an interactive [map](#) showing countries worldwide that are still endemic for polio and have ongoing outbreaks of cVDPV.

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