

This weekly bulletin provides updates on threats monitored by ECDC.

## I. Executive summary

### EU Threats

#### Measles - Multistate (EU) - Monitoring European outbreaks

Opening date: 9 February 2011

Latest update: 13 February 2012

Measles has re-emerged in the EU because of low vaccination uptake.

During 2011, more than 30 000 cases of measles were reported in the EU and EEA countries, including eight measles-related deaths and 27 cases of measles encephalitis. Twenty-four of the 29 reporting countries reported more measles cases in 2011 than in 2010. More than 90% of all measles cases in 2011 were reported by five countries: France, Italy, Romania, Spain and Germany. Only Cyprus and Iceland remained measles-free in 2011.

→Update of the week

Local outbreaks were reported in the media last week in Spain (Valencia and Alicante) and Romania (Arad).

#### Legionellosis – Spain and UK - Travel-associated cluster

Opening date: 13 January 2012

Latest update: 9 February 2012

An outbreak of Legionnaires' disease associated with a hotel in Spain was identified by the European Legionnaires' Disease Surveillance Network (ELDSNet) on 13 January 2012. As of 9 February 2012, 18 cases had been confirmed, 15 of them being travel-associated. Cases are from the United Kingdom (12), France (2) and Spain (4).

→Update of the week

This week, three additional confirmed travel-associated cases associated with the hotel were notified through ELDSNet.

#### Influenza - Multistate (Europe) - Monitoring 2011-2012 season

Opening date: 2 December 2011

Latest update: 9 February 2012

ECDC monitors influenza activity in Europe during the winter seasons and publishes the results in the Weekly Influenza Surveillance Overview (WISO).

Influenza activity continued to increase in week 5 though in a very varied way across Europe with no clear geographic progression this season. The dominant viruses remain A(H3N2) type.

→Update of the week

During week 5/2012, medium influenza activity was reported by nine countries and increasing trends in clinical activity in primary care were reported by 18 countries compared with 12 countries last week.

## Non EU Threats

---

### Dengue - Multistate (world) - Monitoring seasonal epidemics

Opening date: 20 April 2006

Latest update: 8 February 2012

There are no recent important developments in global dengue epidemiology. However, the identification of sporadic autochthonous cases in non-endemic areas in 2010 and 2011 highlights the risk of occurrence of locally acquired cases in countries where the competent vectors are present.

→Update of the week

There have been no reports of autochthonous dengue infections in Europe so far in 2012.

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

Opening date: 8 September 2005

Latest update: 9 February 2012

The WHO European Region is polio-free. Worldwide, WHO reported 647 cases in 2011. Twelve cases have been reported in 2012 so far.

→Update of the week

Since the previous update, five new polio cases (one with symptom onset in 2011, four in 2012) have been reported to WHO.

### Influenza A(H5N1) - Multistate (world) - Monitoring human cases

Opening date: 15 June 2005

Latest update: 9 February 2012

There are currently no indications from a human health perspective of significant changes in the epidemiology associated with any clade or strain of the A(H5N1) virus. This is based on the absence of sustained human-to-human transmission, and on the observation that there is no apparent change in the size of clusters or reports of chains of infection. However, vigilance for avian influenza in domestic poultry and wild birds in Europe remains important.

→Update of the week

During the period 4-10 February 2012, WHO acknowledged one new fatal human case in Vietnam.

## II. Detailed reports

### Measles - Multistate (EU) - Monitoring European outbreaks

Opening date: 9 February 2011

Latest update: 13 February 2012

#### Epidemiological summary

##### European Union Member States

###### *Spain*

Local outbreaks were reported in the media in Valencia (22 cases during the first two weeks of 2012) and Alicante (77 cases since the beginning of January, 31 of which in the last week). Spain reported nearly 2 000 measles cases during 2011.

###### *Romania*

A measles outbreak was reported at the Theological Seminary of Arad involving 15 cases, some of whom were hospitalised in a serious condition. Romania reported over 4 000 cases in 2011.

##### Neighbouring countries

###### *Ukraine*

The ongoing outbreak is gaining momentum. Nearly 3 000 measles cases have been reported by the [MOH](#) so far in 2012, mostly in the western part of the country, including Kiev.

###### *Russia*

There are ongoing outbreaks reported in the media in several regions, such as Volgograd, Chechnya and North Ossetia as well as in major cities like St. Petersburg and Moscow.

###### *Belarus*

An outbreak involving eight people is reported in the Brest district bordering Poland. These are the first cases in six years in the district. A vaccination campaign is planned to be carried out in February and March.

A new epidemiological brief was published on the [WHO European Region website](#).

Web sources: [ECDC Monthly Measles Monitoring 16 January 2011](#) | [MedISys Measles Webpage](#) | [EU-VAC-net ECDC](#) | [ECDC measles factsheet](#)

#### ECDC assessment

ECDC closely monitors measles transmission and outbreaks in the EU and neighbouring countries in Europe through enhanced surveillance and epidemic intelligence activities. The countries in the WHO European Region, which includes all EU Member States, have committed to eliminate measles and rubella transmission by 2015. Elimination of measles requires consistent vaccination coverage above 95% with two doses of measles vaccine in all population groups, strong surveillance and effective outbreak control measures.

The number of measles cases reported in 2011 is comparable to the number in 2010 but three to five times higher than the number of cases in the 2006 to 2009 period. Transmission follows the traditional seasonal pattern of measles in Europe. The number of new cases is expected to increase in the beginning of 2012 and peak in the February to May period.

In June 2012, Ukraine will host the European Football Championship together with Poland, with millions of spectators expected to attend from several European countries. Unvaccinated participants and spectators will risk measles infection during the games.

### Legionellosis – Spain and UK - Travel-associated cluster

Opening date: 13 January 2012

Latest update: 9 February 2012

#### Epidemiological summary

A rapidly evolving cluster with three confirmed cases of Legionnaires' disease associated with a hotel in Costa Blanca was identified by ELDSNet on 13 January 2012. As of 9 February 2012, 15 confirmed travel-associated cases (TALD) have been reported to ELDSNet. Cases are from the United Kingdom (12), France (2) and Spain (1). Among the 15 cases associated with the hotel, three travellers have died.

In addition to TALD, ECDC is aware of three cases of Legionnaires' disease in hotel staff. These cases were not reported as travel-associated Legionnaires' disease cases through ELDSnet.

#### ECDC assessment

The Spanish public health authorities have implemented control measures. However, water samples collected after the implementation of control measures tested positive for *Legionella* on 2 February 2012 and the hotel was closed. No further exposure is expected due to the closure of the hotel. However, recent travellers might still develop symptoms. Therefore, the possibility of new cases coming to light in the coming two to three weeks cannot be excluded.

## Actions

Updated cluster notifications have been sent to all ELDSNet members and tour operators. In addition, ECDC has had daily contact with British and Spanish ELDSNet counterparts.

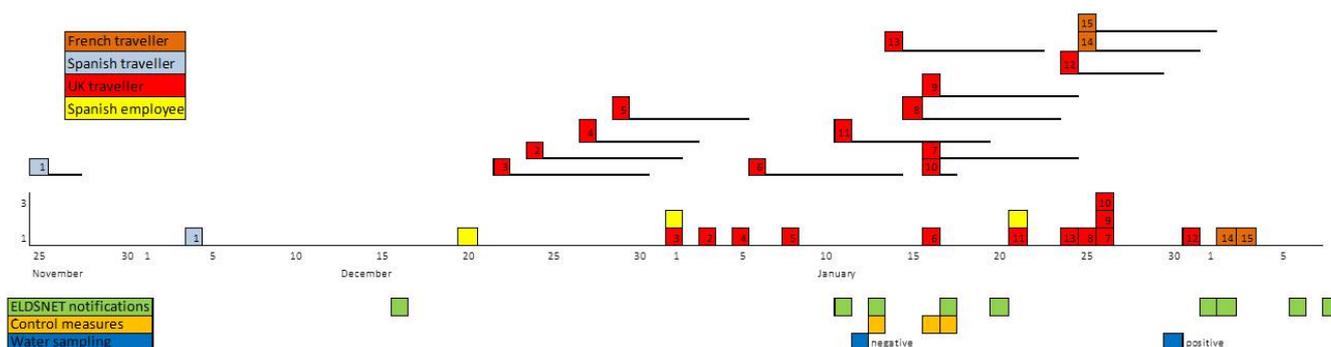
UK clients of the hotel have received information on the outbreak with advice to seek healthcare if necessary. The UK Department of Health has sent an information circular to the healthcare services to alert physicians. The Spanish public health authorities have taken action to inform clients who stayed at the hotel during the two weeks prior to its closure about their potential exposure.

ECDC published a rapid risk assessment regarding this situation on 6 February 2012 [on its website](#).

## Travel associated Legionnaires' disease, Calpe, Spain 2012

ELDSNet

Dates of onset and potential exposure periods at hotel for cases of Legionnaires' disease and actions taken



## Influenza - Multistate (Europe) - Monitoring 2011-2012 season

Opening date: 2 December 2011

Latest update: 9 February 2012

### Epidemiological summary

- Among 1 444 sentinel specimens, 42% were positive for influenza, a similar percentage to the preceding week. However, the percentage was very variable across countries, ranging from 3% to 85%.
- Of 600 positive sentinel specimens for influenza virus, 95.7% were type A and 4.3% were type B.
- Of the 782 sentinel and non-sentinel subtyped influenza A viruses, 97.7% were A(H3) and 2.3% were A(H1)pdm09.
- Since the start of the season, 394 SARI cases have been reported from six countries. In those where influenza has been found and typed/subtyped, 80% were associated with A(H3), 13% with A(H1)pdm09 and 7% with B viruses.
- To date, no resistance to neuraminidase inhibitors (oseltamivir and zanamivir), the main influenza antivirals used in

4/7

Europe, have been reported this season.

Influenza activity continued to increase in week 5 though in a very varied way across Europe with no clear geographic progression this season. The dominant viruses remain of A(H3N2) type.

Web source: [ECDC Weekly Influenza Surveillance Overview](#)

## Dengue - Multistate (world) - Monitoring seasonal epidemics

Opening date: 20 April 2006

Latest update: 8 February 2012

### Epidemiological summary

There have been no autochthonous cases in Europe in 2011 or in 2012 to date.

No major new outbreaks or unexpected developments were detected in the world last week. In general, there is currently a low dengue activity in the monitored regions, except in South America.

**Africa:** No significant developments reported recently.

**South Asia:** No significant developments reported this week, except for local outbreaks in Sri Lanka.

**South-East Asia:** Cases in Thailand have been recently decreasing after the severe flooding of the last months that seem to have interrupted the vector life cycle. Local outbreaks are reported in Philippines, Malaysia and Indonesia.

**Pacific:** No significant developments reported this week.

**South America:** There are no updates about the ongoing outbreak affecting Suriname since the beginning of 2012. Cases are still reported in Bolivia. Local outbreaks are ongoing in Brazil in Sao Paulo and Rio de Janeiro (where the carnival celebrations will start next week).

**Central America:** There is a significant increase in the reported number of cases in Mexico.

**Caribbean:** No major developments have been reported.

**North America:** No recent developments have been reported.

Web sources:

[DengueMap CDC/HealthMap](#) | [MedISys dengue](#) | [ProMED dengue latest update](#) | [WHO WPRO latest update](#) | [WHO dengue factsheet update 2012](#) | [PLoS Negl Trop Dis 2012 6\(1\)](#) | [ECDC dengue fever factsheet](#)

### ECDC assessment

ECDC monitors individual outbreaks, seasonal transmission patterns and inter-annual epidemic cycles of dengue through epidemic intelligence activities in order to identify significant changes in disease epidemiology. Of particular concern is the potential for the establishment of dengue transmission in Europe. Local transmission of dengue was reported for the first time in France and Croatia in 2010 and imported cases were detected in other European countries, highlighting the risk of locally acquired cases occurring in countries where the competent vectors are present.

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

Opening date: 8 September 2005

Latest update: 9 February 2012

### Epidemiological summary

The weekly WHO polio update of 8 February 2012 reports one new polio case with onset of disease in 2011: a WPV1 case in the Democratic Republic of Congo.

Additionally, four new polio cases with onset in 2012 were reported in the past week. They are two WPV1 cases in Afghanistan, one WPV1 case in Chad, and one WPV3 case in Nigeria.

Twelve cases have been reported globally so far with onset of disease in 2012.

Web sources: [Polio Eradication: weekly update](#) | [MedISys Poliomyelitis](#)

### ECDC assessment

ECDC follows reports of polio cases worldwide through epidemic intelligence in order to highlight polio eradication efforts and to identify events that could indicate the re-introduction of wild poliovirus into the EU.

The WHO European Region is polio-free. The last polio cases in the European Union occurred in 2001 when three young Bulgarian

children of Roma ethnicity developed flaccid paralysis from WPV. Investigations showed that the virus originated from India. The latest outbreak in the WHO European Region was in Tajikistan in 2010 when WPV1 imported from Pakistan caused an outbreak of 460 reported cases. The last indigenous WPV case in Europe was in Turkey in 1998. An outbreak in The Netherlands in a religious community opposed to vaccinations caused two deaths and 71 cases of paralysis in 1992.

## Influenza A(H5N1) - Multistate (world) - Monitoring human cases

Opening date: 15 June 2005

Latest update: 9 February 2012

### Epidemiological summary

On 8 February 2012, WHO confirmed one new human case of avian influenza A(H5N1) virus infection from Vietnam. The case was a 26-year-old pregnant woman from Sco Trang province. She presented with symptoms on 23 January and died on 28 January 2012. She had been exposed to dead poultry. This is the 121st person, and the second in 2012, to become infected in Vietnam with influenza A(H5N1).

Since 2003, 584 cases (including 345 deaths) have been notified in 15 countries. Of these, six (including five deaths) were notified in 2012.

Web sources: [ECDC Rapid Risk Assessment](#) | [WHO Avian Influenza](#) | [Avian influenza on ECDC website](#)

### ECDC assessment

The H5N1 virus is fatal to humans in about 60% of cases. Most human infections are the result of direct contact with infected birds, and the World Health Organization notes it has never identified a 'sustained human-to-human spread' of the virus since it re-emerged in 2003. Countries with large poultry populations in close contact with humans are considered to be most at risk of bird flu outbreaks. Hong Kong reported the world's first recorded major outbreak of bird flu among humans in 1997, when six people died.

ECDC follows the worldwide A(H5N1) situation through epidemic intelligence activities in order to identify significant changes in the epidemiology of the virus. ECDC re-assesses the potential of a changing risk for A(H5N1) to humans on a regular basis. There are currently no indications from a human health perspective of any significant change in the epidemiology associated with any clade or strain of the A(H5N1) virus. This is based on the absence of sustained human-to-human transmission, and on the observation that there is no apparent change in the size of clusters or reports of chains of infection. However, vigilance for avian influenza in domestic poultry and wild birds in Europe remains important.

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