



GLOBAL

↓
507 130 112
confirmed cases
485 400 000
recovered
6 208 714 deaths

USA

(7-days incidence 71)
↓
80 154 890
confirmed cases
78 608 559 recovered
984 625 death

IND

(7-days incidence 0,6)
↑
43 047 594
confirmed cases
42 505 284 recovered
522 006 deaths

BRA

(7-days incidence 46,7)
↓
30 275 219
confirmed cases
29 331 207 recovered
662 396 deaths

News:

- **UN:** The WHO estimates [that 23 per cent of all deaths around the world each year are due to avoidable environmental causes.](#)
- **WHO:** [announced a recommendation to G20 leaders,](#) finance and health ministers for their commitment to build an equitable and effective Financial Intermediary Fund (FIF) for Pandemic Preparedness and Response (PPR).
- **WHO:** COVID-19 cases in Africa have fallen for the past 16 weeks, and deaths have dropped during the last eight, marking the [longest-running decline in infections](#) on the continent since the start of the pandemic
- **WHO:** Ukraine has joined the growing list of countries that will receive support from [the global WHO mRNA technology transfer hub](#) in South Africa
- **WHO:** The [U.N. General Assembly passed a resolution welcoming the 2022 FIFA World Cup](#) Qatar football championship and hailed the promotion of the tournament as a public health benchmark for other nations hosting future mega sporting events.
- **WHO:** reported on [World Chagas Disease Day](#) that finding and reporting every case is crucial as despite progress, the global case detection rate for Chagas disease is low (estimated to be around 10%), posing a substantial barrier to accessing treatment and care and in preventing transmission.
- **Topics:**
 - COVID-19 situation
 - Global situation: Updates on COVID-19
 - War in UKR
 - Other FHP News
 - Other Infectious Disease Outbreaks
 - Summary of information on the individual national Corona restrictions

'STAY SAFE' CAMPAIGN

UNHCR has launched a 'Stay Safe' campaign aimed at refugees fleeing Ukraine. The campaign raises awareness of risks related to gender-based violence and trafficking. The campaign is being rolled out across the region through the distribution of posters, leaflets, online messages and most recently through social media with information and tips for people on the move.

In the past week alone, messages reached almost 870,000 people through social media.



CALL FOR ABSTRACTS



3rd Symposium on Tropical Medicine and Infectious Diseases in an International Military Context 2022

<https://dgwmp.de/event/3rd-symposium-on-tropical-medicine-and-infectious-diseases/>

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EUROPE

↓
204 012 458
confirmed cases
194 900 000
recovered
1 900 999 deaths

FRA

(7-days incidence 1 007)
↓
28 006 219
confirmed cases
25 933 986 recovered
145 424 deaths

GBR

(7-days incidence 278)
↓
21 863 944
confirmed cases
21 100 566 recovered
171 878 deaths

DEU

(7-days incidence 688)
↓
23 658 403
confirmed cases
20 620 000 recovered
133 321 deaths

Global Situation – Updates on COVID-19 Situation



Recombinant XE

Several recombinant variants of circulating SARS-CoV-2 strains are currently being monitored globally. **These recombinant variants are not new variants arising from genetic mutation(s) but rather a recombinant, which is a combination of two or more circulating SARS-CoV-2 strains.** One of these recombinants being monitored is referred to as XE. It is a combination of the BA.1 and BA.2 sublineages of the Omicron variant. Similar to other recombinants, **XE likely arose in an individual who was infected with BA.1 and BA.2 at the same time** which allowed for the sharing of genetic material during viral replication.

Recombinant XE was first detected in England in mid-January, (1) and has since been identified in Canada, China, India, Thailand, and the United States.(2, 3, 4, 5) As of April 5, 1,125 cases of the recombinant XE have been identified in England.(6) According to the most recent data from the UK Health Security Agency, **pre-existing Omicron sublineages (BA.1 and BA.2) account for approximately 99.5% of sequenced samples in England** between March 27 and April 3, 2022, with **just 0.5% being from other variants including recombinant XE.**(6) Latest estimates from the UK (as of March 25) have suggested that recombinant XE has a modest growth advantage over Omicron sublineage BA.2 with a 10% increase in transmissibility.(7) In comparison, BA.2 has been estimated to have a 40% increased transmissibility compared to BA.1.(7) This suggests that recombinant XE is slightly more contagious than the other sublineages of Omicron. However, experts state that more data is required to confirm whether recombinant XE is more transmissible compared to other Omicron sublineages.

At this time, there is not enough evidence to indicate whether recombinant XE can cause more severe illness or if the effectiveness of vaccines against recombinant XE differs compared to other sublineages of Omicron. However, existing immune- and/or vaccine-induced immunity should (medium certainty) continue to be effective against this recombinant, similar to other sublineages of Omicron, given that: (i) the spike protein of recombinant XE is reported to match that of the BA.2 sublineage of Omicron, and (ii) the spike protein is the part of the SARS-CoV-2 virus recognized by immune responses acquired from vaccination and/or recovery from a prior Omicron infection.(7)

The WHO has stated that they will continue to consider recombinant XE as an Omicron sublineage, and will not give it a separate Greek letter name until significant differences in the transmission and disease characteristics of recombinant XE have been reported. At this time the WHO has designated XE as a 'variant under

Summary

As of 18 April 2022 03:26 PM, 1,365 sequences in the XE lineage have been detected since the lineage was identified:

location ↗	XE found		when found**	
	total	cumulative prevalence*	first	last
United Kingdom	1,322	< 0.5%	19 Jan 2022	9 Apr 2022
California, United States	4	< 0.5%	14 Mar 2022	3 Apr 2022
Worldwide	1,365	< 0.5%	19 Jan 2022	10 Apr 2022
United States	15	< 0.5%	14 Mar 2022	3 Apr 2022

* Apparent cumulative prevalence is the ratio of the sequences containing XE to all sequences collected since the identification of XE in that location. ** Dates are based on the sample collection date.

The strain has been detected in at least 13 countries and 9 U.S. states.

monitoring' (VUM).(8) **The risk of new variants, including recombinants, emerging remains high and drives the continued need to track and understand the evolution of the SARS-CoV-2 virus through continuous, comprehensive, and representative sampling and sequencing of SARS-CoV-2.** BlueDot will continue to closely monitor and assess the public health risk associated with recombinant variants, in addition to other SARS-CoV-2 variants, in order to provide further updates as new evidence becomes available.

Source: [COVID-19 Notable Updates and Global Update for April 14, 2022 \(mailchi.mp\)](#)

Hand-Foot-Mouth Disease (HFMD) in Children and COVID-19

COVID-19 cases among children have been reported to be presenting with skin rash as the only clinical sign of the disease. Specifically, pediatricians in Toronto, Canada have reported a significant increase in the number of children presenting with what appears to be hand, foot and mouth disease (HFMD) who are found to test positive for COVID-19. HFMD is usually diagnosed based on clinical signs and is rarely confirmed via laboratory testing. However, these events indicate that **COVID-19 testing should be considered among children who present with clinical signs consistent with HFMD, particularly in regions with high transmission of SARS-CoV-2.**(12)

Source: [COVID-19 Notable Updates and Global Update for April 14, 2022 \(mailchi.mp\)](#)

- 502.3 Million Cases
-19% since last week (+ 6.6 Million New Cases)
- 6.2 Million Deaths
-27% since last week (+ 19,000 New Deaths)
- 67.4% (of Top 10 Countries)
Cumulative Vaccine Doses Administered Globally
- The 5 Countries with the Highest 7-day Rolling Avg. of Daily Cases
 - South Korea
 - Germany
 - France
 - Italy
 - Vietnam
- The 5 Countries/Territories with the Highest 7-day Rolling Avg. of Daily Cases Per Million Population
 - St Pierre-Miquelon
 - Cook Islands
 - Bonaire, Saint Eustatius and Saba
 - South Korea
 - Reunion

Global Update

Incidence Rates of Continents with Largest Proportion of Countries

- High (>350 per 100,000) Incidence Rate (Past 14 days)**
Stable or increasing trend Past 7 days
25% of Oceania (4 of 16 countries)
- Low to Moderate (<=140 - 350) Incidence Rate (Past 14 days)**
Stable or increasing trend Past 7 days
9% of Africa (5 of 56 countries)
- Low (<=140) Incidence Rate (Past 14 days)**
Stable or decreasing trend Past 7 days
71% of South America (10 of 14 countries)

The 5 High Income Countries/Territories with the HIGHEST 7-day Rolling Avg. of New People Fully Vaccinated per 100,000 Population

1 French Polynesia	2,276
2 Puerto Rico	1,070
3 Virgin Islands (GB)	574
4 Bermuda	453
5 Cayman Islands	387

The 5 High Income Countries with the LOWEST 7-day Rolling Avg. of New People Fully Vaccinated per 100,000 Population

1 Belgium	10
2 Czech Republic	10
3 Denmark	10
4 Estonia	10
5 France	10

The 5 Low and Middle Income Countries with the HIGHEST 7-day Rolling Avg. of New People Fully Vaccinated per 100,000 Population

1 Uganda	4,923
2 Kiribati	3,952
3 Togo	3,133
4 Chad	2,562
5 Belarus	1,936

The 5 Low and Middle Income Countries with the LOWEST 7-day Rolling Avg. of New People Fully Vaccinated per 100,000 Population

1 Bulgaria	10
2 Burundi	10
3 Cuba	10
4 Georgia	10
5 Haiti	10

War in Ukraine

UN Secretary-General António Guterres has again called for an immediate humanitarian ceasefire in Ukraine to allow delivery of life-saving aid as well as evacuations.

The appeal followed attacks on cities across the country— most recently Lviv, Dnipro, Kharkiv and Mykolaiv – which resulted in numerous civilian casualties and destruction.

Mr. Guterres was also greatly concerned about the continuing appalling humanitarian situation in the besieged port city of Mariupol.

“The Secretary-General strongly urges all parties to enact an urgent and immediate humanitarian ceasefire, which will enable the safe and secure functioning of humanitarian corridors, help evacuate civilian residents and also deliver life-saving humanitarian and medical assistance,” [said](#) Mr. Dujarric.

Source: [Guterres appeals for urgent humanitarian ceasefire in Ukraine](#) | UN News

A number of media and official reports have provided information on how displaced Ukrainians are integrating into the community following their arrival, e.g. children being enrolled into school. On 7 April 2022, media quoting local public health authorities reported one suspected case of diphtheria and contact tracing for the case in Ternopil city, Ukraine. No major outbreaks or other events related to communicable diseases have been detected since the previous update.

Source: [Cdrtr \(europa.eu\)](#)

Ukraine war enters new phase as battle for the Donbas begins

Russia has begun its offensive to capture the east of Ukraine, Volodymyr Zelensky has told his country.

The president said the government believe the battle for the Donbas has begun after days of increased levels of fighting. Russian troops are concentrating on annexing the eastern region after failing to break through around Kyiv. Invading forces have reportedly launched new attacks along Ukraine’s defensive lines, with reports of heavy shelling.

It marks the start of the second phase of a war which has been ongoing since February 24. Delivering a televised address, he said: ‘Now we can already state that the Russian troops have begun the battle for the Donbas, for which they have been preparing for a long time. He said a ‘significant part of the entire Russian army is now concentrated on this offensive’. He added: ‘No matter how many Russian troops are driven there, we will fight. We will defend ourselves. We will do it every day.’

It comes after renewed Russian airstrikes across the country as far west as Lviv.

The Kremlin has [ordered increased attacks after the sinking of the Moskva](#), the naval flagship which sunk off Ukraine’s south coast.

Russia has spent more than three weeks pulling troops away from Kyiv to bolster the ranks poised to attack eastern cities. Pro-Moscow sources say they are now almost in total control of the city of Mariupol, a strategic port city which stands in the way of Russian forces in the east and in Crimea. It’s believed some Ukrainian fighters are holding on inside the city but it appears Russia is on the verge of its first significant breakthrough since the beginning of the war.

Pro-Moscow forces have held parts of the Donetsk and Luhansk oblasts – collectively known as the Donbas – since 2014, along with the Crimean peninsula.

Kyiv believes Moscow intends to extend the territory already controlled by its forces and proxies to reach the historic boundaries of the area.

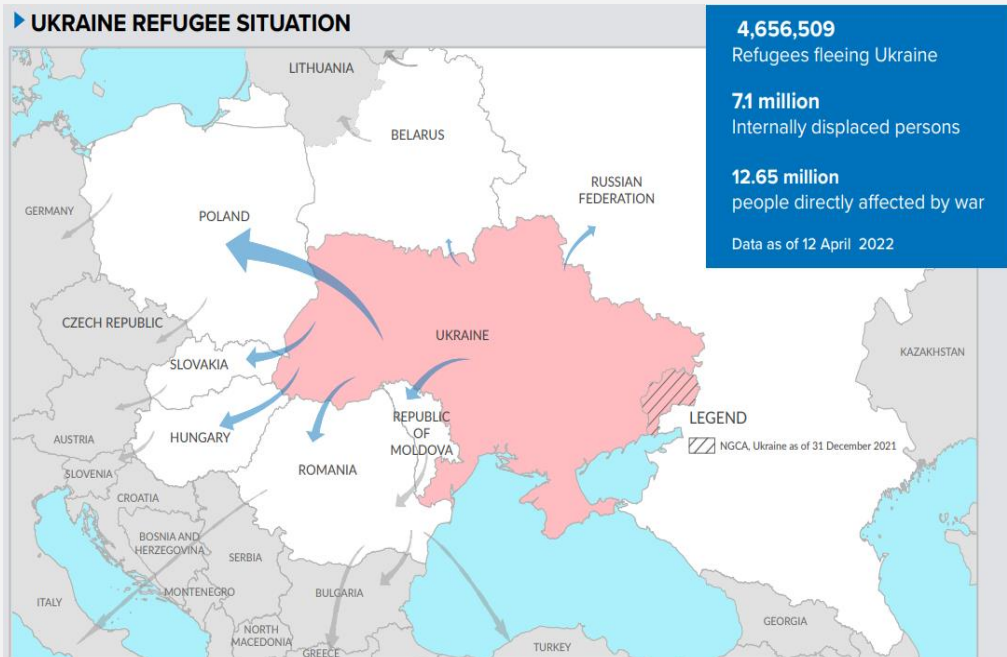
Source: [Ukraine: Volodymyr Zelensky says battle for the Donbas is under way](#) | Metro News

Key figures - UKRAINE

Refugees fleeing Ukraine (since 24 February 2022): 4,980,589 million (18 April)

- 196,952 people reached with essential food and non-food items, winter clothes and shelter materials
- 52,762 people received protection assistance at border crossing points, transit and reception centres and through hotlines
- 61,099 people enrolled for multipurpose cash assistance. 11,633 already received first payment
- 18,900 people received assistance through humanitarian convoys delivered to hard hit areas
- 60 buildings assessed with local authorities and 13 already being refurbished and supported to increase accommodation capacity

Source: [Situation Ukraine Refugee Situation \(unhcr.org\)](#)



Other FHP News

Acute hepatitis of unknown aetiology – the United Kingdom of Great Britain and Northern Ireland

Situation at a glance: On 5 April 2022, WHO was notified of 10 cases of severe acute hepatitis of unknown aetiology in children under the age of 10 years, across central Scotland. By 8 April, 74 cases had been identified in the United Kingdom. **Hepatitis viruses** (A, B, C, E, and D where applicable) **have been excluded** after laboratory testing while further investigations are ongoing to understand the aetiology of these cases.

Of the confirmed cases, 49 are in England, 13 are in Scotland and the remainder are in Wales and Northern Ireland. One of a number of potential causes under investigation is that a group of viruses called **adenoviruses** may be causing the illnesses. However, other possible causes are also being actively investigated, including **coronavirus** (COVID-19), other infections or environmental causes.

There is no link to the COVID-19 vaccine. None of the currently confirmed cases in the UK has been vaccinated.

Adenoviruses are a family of common viruses that usually cause a range of mild illnesses and most people recover without complications. They can cause a range of symptoms, including colds, vomiting and diarrhoea. While they don't typically cause hepatitis, it is a known rare complication of the virus.

Adenoviruses are commonly passed from person to person and by touching contaminated surfaces, as well as through the respiratory route.

The most effective way to minimise the spread of adenoviruses is to practice good hand and respiratory hygiene and supervise thorough handwashing in younger children.

Following the reports of cases of acute hepatitis of unknown origin by the UK Health Security Agency, additional cases in children have been reported in **Denmark, Ireland, the Netherlands, and Spain**.

In addition, nine cases of acute hepatitis among children between 1 and 6 years old in the state of Alabama in the **United States** who also **tested positive for adenovirus** have been reported.

Investigations are ongoing in all countries reporting cases. At present, the exact cause of hepatitis in these children remains unknown. The incident team in the United Kingdom, where most of the cases have occurred to date, consider that an infective cause is most likely based on the clinical and epidemiological features of the cases under investigation.

Four children in the **Netherlands** have been reported with hepatitis, of which, three required a liver transplant due to their illness. There is limited information regarding the age of the children or any further details regarding these cases.

Officially available information indicates that the affected children in **Spain** have an age range between two and seven years old (below the ten-year-old threshold for the U.K. cases) and have been confirmed in Madrid, Castilla-La Mancha, and Aragon regions. All have required hospitalization and one of the children required a liver transplant due to liver failure.

According to a media report, there have been at least nine cases in Alabama state since last fall with the affected children ranging in age from one to six years old. Investigations thus far in **the United States** point to the possible involvement of an adenovirus. There is a range of adenoviruses that can infect people. Genetic sequencing is underway to try to identify if one or multiple types of adenoviruses are implicated. To date, the US CDC has also indicated that at least five of the children have tested positive for adenovirus Type 41.

ECDC is working with teams in each of the countries reporting cases, along with WHO and other key partners to support the ongoing investigations. ECDC facilitates the sharing of information as it becomes available, as well as tools for investigations.

Source: [Increase in hepatitis \(liver inflammation\) cases in children under investigation - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/increase-in-hepatitis-liver-inflammation-cases-in-children-under-investigation)
<https://www.who.int/emergencies/disease-outbreak-news/item/acute-hepatitis-of-unknown-aetiology---the-united-kingdom-of-great-britain-and-northern-ireland>
<https://www.ecdc.europa.eu/en/news-events/update-hepatitis-unknown-origin-children>

Measles

A sharp decrease in measles cases was observed globally during the COVID-19 pandemic. A few measles cases are now being reported in the EU/EEA, including in countries that had previously eliminated or interrupted endemic transmission. Since the previous monthly measles update in ECDC's Communicable Disease Threats Report (CDTR) on 11 March 2022, nine new cases have been reported by three countries in the EU/EEA: Germany (5), Ireland (1), Poland (3). In addition, according to TESSy, in January-February 2022, four countries reported five cases: Belgium (2), France (1), Italy (1) and Romania (1). Other countries have not reported new cases of measles. So far, in 2022, no deaths have been reported in the EU/EEA.

Over the last decade, **outbreaks of vaccine-preventable diseases** have been reported in high-income countries worldwide. In particular, measles outbreaks have been ongoing in the European Union (EU) since 2017, with the majority of cases concentrated in Romania and Italy. Since then, official data indicates that Italy accounts for at least 30% of measles cases reported in the EU. Measles has been identified as a powerful indicator of the status of vaccination programs in a region, as outbreaks emerge quickly as a result of **insufficient immunization coverage**. This event highlights the importance of having up-to-date immunizations as the risk of vaccine-preventable disease outbreaks increases due to disrupted immunizations secondary to the COVID-19 pandemic and/or vaccine hesitancy among the population

Source: [Cdtr \(europa.eu\)](https://cdtr.europa.eu/)

Floods in South Africa

More than 440 people have now died after heavy rains in recent days triggered floods and mudslides in South Africa's KwaZulu-Natal (KZN) province.

Key points:

- The overall infrastructure damage is estimated to be more than \$927.3 million
 - The floods have disrupted operations at one of Africa's busiest ports, Durban
 - President Cyril Ramaphosa will meet cabinet ministers to assess the disaster response
- Rescuers searched for dozens of people still missing in the province on Sunday.

The floods have left thousands homeless, knocked out power and water services and disrupted operations at one of Africa's busiest ports, Durban. A provincial economic official estimated the overall infrastructure damage at more than 10 billion rand (\$927.3 million).

The province's premier, Sihle Zikalala, said the death toll had risen to 443, with a further 63 people unaccounted for. In some of the worst-affected areas, residents said they were terrified by the thought of more rain, which was forecast to fall on Sunday.



Other Infectious Disease Outbreaks/ Conflicts



Unknow Illness

Ireland - In a follow-up on the unknown illness reported amongst Ukrainian refugees in Ireland, further reports indicate that the affected have presented with a spectrum of symptoms inclusive of headaches, dizziness, nausea, vomiting, high temperatures and coughing. So far reports are more consistent with the possibility of a gastrointestinal bug or a possible case of food poisoning. Among the probable causes of gastroenteritis, salmonellosis and norovirus infections could be suspected. Both pathogens could easily transmit at a very low infectious dose, with short incubation periods (12-48 hours), through environmental persistence (on surfaces for several weeks and in water), and lack of durable immunity following infection. Low immunity facilitates rapid spread among confined populations.

Source: ProMed - <https://promedmail.org/promed-post/?id=8702679>

Vaccine-derived poliovirus type 3

Israel - WHO was notified on 7 March 2022 of the detection of circulating vaccine-derived poliovirus type 3 (cVDPV3) in an unvaccinated child from Jerusalem city. Investigations (including environmental, epidemiological and virological) are ongoing to determine the origin of cVDPV3 and the scope of circulation. As of 15 April, a total of seven VDPV3 positive have been confirmed, including the index case and six asymptomatic children. As an immediate response, immunization activities with inactivated polio vaccine (IPV) and catch-up vaccination were initiated in Jerusalem, and a bivalent oral polio vaccine (bOPV) campaign started on 4 April 2022 in Jerusalem district which has been extended to the entire country as of 13 April. Given the high immunization coverage and robust surveillance system in the country, the risk of national spread is considered 'moderate'.

Source: WHO - <https://www.who.int/emergencies/disease-outbreak-news/item/circulating-vaccine-derived-poliovirus-type-3---israel>

Measles

Italy - A case of measles has been confirmed in Italy. According to a local media report, the affected is a 46-year-old individual from France who was on board a cruise that arrived in the port city of Bari, the capital of the Apulia region of southern Italy. In addition, the report indicates that there were immediate surveillance interventions carried out by health authorities of the prevention department of Bari, who isolated the affected individual at a local hospital, while two close contacts (wife and daughter) have been placed in quarantine. At the moment, no other passengers have been isolated/quarantined. Measles outbreaks have been ongoing in the European Union (EU) since 2017, with the majority of cases concentrated in Romania and Italy. Since then, official data indicates that Italy accounts for at least 30% of measles cases reported in the EU. This event highlights the importance of having up-to-date immunizations as the risk of vaccine-preventable disease outbreaks increases due to disrupted immunizations secondary to the COVID-19 pandemic and/or vaccine hesitancy among the population.

Source: NewsMedia - https://www.quotidianodipuglia.it/bari/bari_morbillo_nave_crociera_isolato_paziente_protocollo_disposizioni-6631487.html

Leptospirosis

Ukraine - Cases of leptospirosis have been reported in the city of Khmelnytsky, western Ukraine since the beginning of 2022. According to media sources, at least two of the total cases are among internally displaced persons. In Ukraine, leptospirosis remains a significant cause of morbidity and mortality, and disease activity usually peaks between August to September. Outbreaks of infectious diseases among refugees from Ukraine are expected, as living conditions during transit or upon arrival may increase the risk of transmission and/or susceptibility to disease. They will likely also experience greater vulnerability due to poor shelter, overcrowded living conditions, and exacerbating factors such as nutritional stress and exposure to cold weather.

Source: [Insights by BlueDot](#)

Cholera

Adamawa State, Nigeria - Officials from the Adamawa State government have declared an end to the cholera outbreak that began in the state in July 2021. The end of the outbreak was declared after no new cases were reported over several weeks despite heightened surveillance in the region. The outbreak was initially declared in July 2021 and resulted in a total of 1,959 suspected cholera cases and 55 associated deaths. However, officials are cautioning that despite the end of the cholera outbreak, the risk has not been eliminated.

Source: <https://allafrica.com/stories/202204150054.html>

Typhoid

Ireland - There is limited information on recently confirmed cases of typhoid fever in Ireland. According to a local media report, the Health Protection Surveillance Centre in Ireland reported at least two cases among travellers who have returned over the last couple of weeks from unspecified locations overseas. Although the illness is uncommon in Ireland and throughout Europe, there were also two reported cases of travel-related typhoid fever between March 27 and April 2 in the Netherlands.

Haarlem, North Holland, Netherlands - Cases of typhoid fever have been reported among residents of an emergency shelter boat for asylum seekers in Haarlem. Overall, there are two emergency shelter boats in Haarlem that accommodate more than 200 people. Initial investigations suggested that there has not been contamination of the drinking water, but further testing remains ongoing. Given that the source of infection has not yet been identified, officials are taking what measures they can to prevent the further spread of Salmonella Typhi, the bacteria that causes typhoid fever.

Source: NewsMedia - <https://www.msn.com/en-ie/health/medical/common-symptoms-of-typhoid-as-cases-of-highly-contagious-illness-detected-in-ireland/ar-AAWhYGb>
<https://www.rtlnieuws.nl/nieuws/nederland/artikel/5301918/asielzoekers-haarlem-buiktyfus-noodopvangboot>

REGISTRATION

Only via: www.dgwmp.de

Registration deadline: 31st July, 2022

CONGRESS FEE

First-presenting authors: 80.00 Euro
All other participants: 130.00 Euro

The congress fee includes complimentary early coffee with snacks and sandwiches and beverages served during coffee breaks.

WINING AND DINING

Thursday, 25th August, 2022 and Friday, 26th August, 2022

07:30 a.m. - 08:30 a.m.

Early coffee with snacks and sandwiches.

Thursday, 25th August, 2022

07:00 p.m. - 10:00 p.m.

Congress dinner

Location: T.r.u.d.e. in Hamburg-Barmbeck

Dress code: Smart casual

Fee for attending: 45.00 Euro per person

For more information and registration please visit
www.dgwmp.de



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Scientific Board

Brigadier General (MC, RET) Dr. Joachim Hoitz, M. D.
Lieutenant Colonel (MC) Dr. Dorothea Wiemer, M. D.
Lieutenant Colonel (MC), Prof. (APL) Dr. Hagen Frickmann, M. D.

Congress Venue

Hamburg Association of Statutory Health Insurance-Physicians
("Kassenärztliche Vereinigung Hamburg")
Humboldtstr. 56, D-22083 Hamburg
www.kvhh.de

Accommodation

A limited number of different rooms are available until 20th August, 2022 at the Hotel Alsterblick, Hotel du Nord Alster and Apartment040, Hamburg. Please include the keyword "Tropical Medicine" when booking.

Accommodation can be booked via

Hotel Alsterblick, Schwanenwik 30, D-22087 Hamburg
www.hotel-alsterblick.de
Single room 125,10 Euro - 206,10 Euro (breakfast and VAT incl.)
Double room 143,10 Euro - 224,10 Euro (breakfast and VAT incl.)
Tel: +49 40 22948984
Email: info@hotel-alsterblick.de

Hotel du Nord Alster, Hofweg 75, D-22085 Hamburg
www.hoteldunord-alster.de/de
Single room 165,00 Euro (breakfast and VAT incl.)
Tel: +49 40 2271140
Email: fb.alster@hoteldunord.hamburg

Apartment040, Schroetteringksweg 16, D-22085 Hamburg
www.apartment040.de
Single room 99,00 Euro without breakfast (VAT incl.)
Double room 139,00 Euro without breakfast (VAT incl.)
Tel: +49 40 22927736
Email: concierge@apartment040.de

CALL FOR ABSTRACTS



3rd Symposium on Tropical Medicine and Infectious Diseases in an International Military Context 2022



25th - 26th August, 2022
Kassenärztliche Vereinigung
Hamburg

Dear generals, officers, colleagues, ladies, and gentlemen,

with reference to the first and second symposium on tropical medicine and infectious diseases in a military context in 2016 and 2019, we cordially invite you for a third time to this event on 25th and 26th August 2022 in Hamburg. Again, up-to-date topics from the fields of infectious disease prevention, diagnostics, treatment and management will be in the focus of the discussions. The symposium will be organized in cooperation of the German Association of Military Medicine and Pharmacy (DGWMP e. V.) in Bonn and the Bundeswehr Hospital Hamburg. It will take place at the headquarters of the Hamburg Association of Statutory Health Insurance-Physicians ("Kassenärztliche Vereinigung Hamburg"). The program as well as detailed information regarding registration, travel information, social events etc. will be available in spring 2022.

Knowledge, awareness, and expertise in the areas of prevention, diagnosis, therapy, and management of tropical and infectious diseases remain crucial to be prepared for present and future challenges. This is particularly true for remote settings as well as on board of military ships. Finally, infectious diseases in large groups of refugees may become another challenge.

For the Scientific Committee



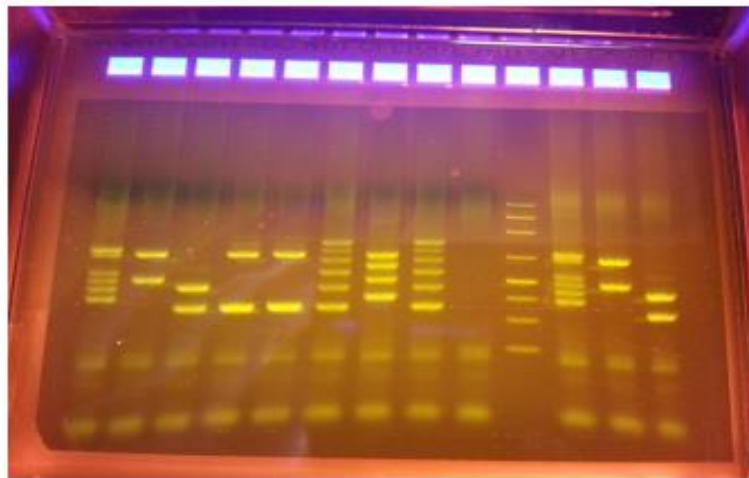
Brigadier General (MC, RET) Dr. Joachim Holtz, M.D.,
Norderstedt



Lieutenant Colonel (MC) Dr. Dorothea Wiemer, M.D.,
Bundeswehr Hospital Hamburg



Lieutenant Colonel (MC), Prof. (APL) Dr. Hagen Frickmann,
M.D., Bundeswehr Hospital Hamburg



The present corona crisis increased the importance of preparedness for infectious disease-associated medical scenarios in the field of military medicine. Beyond, military deployments may lead to an import of infectious agents such as gastrointestinal parasites, atypically resistant or even multidrug-resistant bacteria, viral causes of acute and chronic infections as well as rare or emerging tropical pathogens. Military medical research must focus on solutions for the arising problems on deployment and after return of service members to their home countries. In addition, military deployments in tropical environments that are rich in zoonotic and vector-borne infectious diseases are a matter of concern to be addressed in an appropriate way by a one health approach.

KEY TOPICS

- Prevention, diagnosis therapy and management of tropical and infectious diseases
- Outbreak investigation and management
- Health surveillance and screening
- Imported pathogens
- Infectious disease management in austere environments

The key topics cover a broad spectrum of clinical and procedural entities and scientists are explicitly encouraged to submit abstracts on their specific fields of interest.

CALL FOR ABSTRACTS

We cordially invite you to submit abstracts for presentations (Studies: Introduction, Materials and Methods, Results, Discussion – Case Reports: Introduction, Case Description, Discussion – Overview: Introduction, Literature Review, Conclusions).

Please do not exceed 250 words and avoid references, figures or tables. Please attach affiliations of all co-authors (including business address and email address). The time frame for a presentation is 20 minutes including discussion.

Deadline: 30th June 2022
















Please contact us for further information, submission of abstracts and questions.

E-Mail: tropmed22@dgwmp.de


















Summary of information on the individual national Corona restrictions

The icons are linked to the respective information. Please click on the icons for information.

NATO Member State (click on country for official COVID-19 information)		Approved vaccines											
		Comirnaty	Spikevax	Janssen	Vaxzevria	Nuvaxovid	Sputnik V	CoronaVac	Covishield	Convidecia	Covilo	Turkovac	
	Albania	X			X		X	X					
	Belgium	X	X	X	X	X							
	Bulgaria	X	X	X	X	X							
	Canada	X	X	X	X				X				
	Croatia	X	X	X	X	X							
	Czech Republic	X	X	X	X	X							
	Denmark	X	X	X		X							
	Estonia	X	X	X	X	X							
	France	X	X	X	X	X							
	Germany	X	X	X	X	X							
	Great Britain	X	X	X	X								
	Greece	X	X	X	X	X							
	Hungary	X	X	X	X	X	X		X	X	X		EMA Authorized
	Italy	X	X	X	X	X							
	Iceland	X	X	X	X	X							EMA & FDA Authorized

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NATO Member State (click on country for official COVID-19 information)		Approved vaccines										
		Comirnaty	Spikevax	Janssen	Vaxzevria	Nuvaxovid	Sputnik V	CoronaVac	Covishield	Convidecia	Covilo	Turkovac
	Latvia	X	X	X	X	X						
	Lithuania	X	X	X	X	X						
	Luxembourg	X	X	X	X	X						
	Montenegro				X		X			X		
	Netherlands	X	X	X	X	X						
	North Macedonia	X			X		X			X		
	Norway	X	X	X		X						
	Poland	X	X	X	X	X						
	Portugal	X	X	X	X	X						
	Romania	X	X	X	X	X						
	Slovakia	X	X	X	X	X						
	Slovenia	X	X	X	X	X						
	Spain	X	X	X	X	X						
	Turkey	X					X	X				X
	USA	X	X	X								

EMA
Authorized

EMA & FDA
Authorized

Travel Recommendations and other Useful Links

Travel Recommendations

Many countries have halted some or all international travel since the onset of the COVID-19 pandemic but now have re-open travel some already closed public-travel again. This document outlines key considerations for national health authorities when considering or implementing the gradual return to international travel operations.

The decision-making process should be multisectoral and ensure coordination of the measures implemented by national and international transport authorities and other relevant sectors and be aligned with the overall national strategies for adjusting public health and social measures.

Travel has been shown to facilitate the spread of COVID-19 from affected to unaffected areas. Travel and trade restrictions during a public health event of international concern (PHEIC) are regulated under the International Health Regulations (IHR), part III.

The majority of measures taken by WHO Member States relate to the denial of entry of passengers from countries experiencing outbreaks, followed by flight suspensions, visa restrictions, border closures, and quarantine measures. Currently there are exceptions foreseen for travellers with an essential function or need.

Information on COVID-19 testing and quarantine of air travellers in the EU and the US you can find following the link:

- <https://www.ecdc.europa.eu/en/publications-data/guidelines-covid-19-testing-and-quarantine-airtravellers>
- <https://www.cdc.gov/coronavirus/2019-ncov/travelers/how-level-is-determined.html>

More information about traveling worldwide:

- National regulation regarding travel restrictions, flight operation and screening for single countries you will find [here](#) (US) and [here](#) (EU).
- Official IATA travel restrictions. You will find [here](#).

More information about traveling in the EU

- by the **European Commission** you will find here:

<https://www.consilium.europa.eu/en/policies/coronavirus/covid-19-travel-and-transport/>

- The **ECDC** publishes a map of EU Member States, broken down by regions, which show the risk levels across the regions in Europe using a traffic light system. Find it [here](#).

As a general rule, information on new measures will be published 24 hours before they come into effect.

All information should also be made available on [Re-open EU](#), which should contain a cross-reference to the map published regularly by the European Centre for Disease Prevention and Control.

Useful links

ECDC:

- [All info about the COVID-19 pandemic](#); (situation updates, latest news and reports, risk assessments etc.)
- [COVID-19 Vaccine tracker](#)
- [SARS-CoV-2 variants dashboard](#) for EU
- [Latest Risk assessment on COVID-19](#), 15 Feb 2021
- All “guidance’s and technical reports” can be found under “All COVID-19 outputs” on this page [here](#)

WHO:

- Epi-WIN [webinars and updates](#)
- All information about the COVID-19 pandemic: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

CDC:

- COVID [Data Tracker](#) and [weekly review](#)
- [What’s new and Updated](#)
- [Guidance for COVID-19](#)

References:

- European Centre for Disease Prevention and Control <https://www.ecdc.europa.eu/en>
- World Health Organization WHO; www.who.int
- Centres for Disease Control and Prevention CDC; www.cdc.gov
- European Commission; https://ec.europa.eu/info/live-work-travel-eu/health/coronavirus-response/travel-and-transportation-during-coronavirus-pandemic_en
- Our World in Data; <https://ourworldindata.org/coronavirus>
- Morgenpost; <https://interaktiv.morgenpost.de/corona-virus-karte-infektionen-deutschland-weltweit/>
- BlueDot; <https://bluedot.global/>