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Update 164

FHP-Update
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News:

- **WHO: WHO issued an alert after three contaminated oral liquid medicines**—*COLDRIF*, *Respifresh TR*, and *ReLife*—were found to contain **diethylene glycol (DEG)** in India. The products, used to treat cough and cold symptoms, were linked to **clusters of child fatalities**.
- **ECDC:** The ECDC and EACS have released new **European standards of care for HIV**, focusing on **early antiretroviral therapy (ART)** initiation and **management of co-morbidities** in people living with HIV. The guidelines recommend starting ART **within seven days of diagnosis** and provide a framework for **integrated care** addressing non-communicable diseases and mental health. These standards aim to ensure **equitable, person-centred, and high-quality care** across Europe, supporting healthier, longer lives for those living with HIV.
- **ECDC:** On **World One Health Day 2025**, the **EU Cross-agency One Health Task Force** and the **European & Central Asia Quadripartite** issued a joint statement calling for **urgent, coordinated action** to address the growing links between human, animal, and environmental health amid worsening climate impacts. They urge governments and partners to **strengthen One Health governance**, **embed intersectoral collaboration**, and **invest in prevention and preparedness** guided by scientific evidence. The statement highlights how **rising temperatures, wildfires, and vector-borne diseases** underscore the need for unified regional and global action to protect **people, animals, and the planet**.
- **ECDC:** The **ECDC** conducted a two-day review (15–16 October 2025) of **Ukraine's communicable disease surveillance system** to support its **alignment with EU standards** as part of accession preparations. Experts from ECDC and Ukraine's **Public Health Centre** assessed data collection, outbreak detection, and event-based surveillance, identifying strengths and areas for improvement.
  The review concluded with a commitment to continued collaboration and a forthcoming **memorandum of understanding** to guide future technical support and system strengthening.
- **FDA**: reported a **multistate outbreak of infant botulism** in the **United States** has been linked to **recalled ByHeart powdered infant formula**, with **13 hospitalized infants across 10 states**. No deaths have been reported. The **FDA** is investigating the contamination source, and caregivers are urged to **dispose of the recalled formula** and **monitor infants for symptoms** such as weakness, poor feeding, or breathing difficulties.
- **FDA**: A **multistate Listeria outbreak** linked to **pre-cooked pasta meals** has expanded, with **27 cases**, **25 hospitalizations**, and **6 deaths** reported across **18 states**, including **Hawaii, Illinois, and Texas**. The CDC and FDA traced infections to **Nate's Fine Foods** pasta used in prepared meals sold at **Walmart, Kroger, and Trader Joe's**. Consumers are urged to **check and discard recalled products**. Older adults, pregnant women, and immunocompromised individuals remain at **highest risk**.
- **PAHO**: On **World Polio Day (24 Oct)**, the **Pan American Health Organization (PAHO)** marked **31 years since the Americas eliminated wild poliovirus**, while warning that declining vaccination coverage threatens this achievement. Despite the region's **polio-free certification in 1994**, only **83% of children received the third vaccine dose in 2024**, far below the **95% threshold** needed to prevent outbreaks.

Highly Pathogenic Avian Influenza (HPAI) A (H5) – Europe and Global Update
(November 2025)

Source: ECDC, USDA, FLI, WOAH

Overview:

Outbreaks of HPAI A(H5N1) continue to intensify across **Europe and the Northern Hemisphere**, driven by the **ongoing migration of infected wild birds**, particularly **cranes and coony-breeding seabirds**, which are spreading the virus to poultry farms. Germany, Denmark and the Netherlands are among the most affected countries, with mass culls and heightened biosecurity measures underway to contain the disease.

Germany and Europe:

Between 1 Oct – 5 Nov 2025, **Germany** recorded **66 poultry outbreaks** and **406 wild bird infections**, with the largest outbreak affecting **170,000 hens in Lower Saxony**. Over **500,000 birds** have been culled nationally, while **France, Belgium, and the Netherlands** have raised their alert levels to "high," mandating **indoor housing for poultry**. Across **18 European countries**, **157 poultry outbreaks** and **732 wild bird cases** have been reported, according to the Friedrich Loeffler Institute (FLI). Additionally, **four Arctic foxes** in Norway tested positive for **H5N5**, reflecting continued cross-species transmission risk.

United States:

Since the first detection in **February 2022**, **1,830 flocks** have been confirmed infected (853 commercial; 977 backyard) across **51 states and territories**, affecting **183 million birds**.
Over the past 30 days, **62 new detections** impacted **1.65 million birds**, concentrated in **Minnesota, South Dakota, and Indiana**. The **USDA APHIS** notes that infections in **dairy cattle** have plateaued, but **muskrats and round-tailed ground squirrels** have now been infected for the first time.

Global Context:

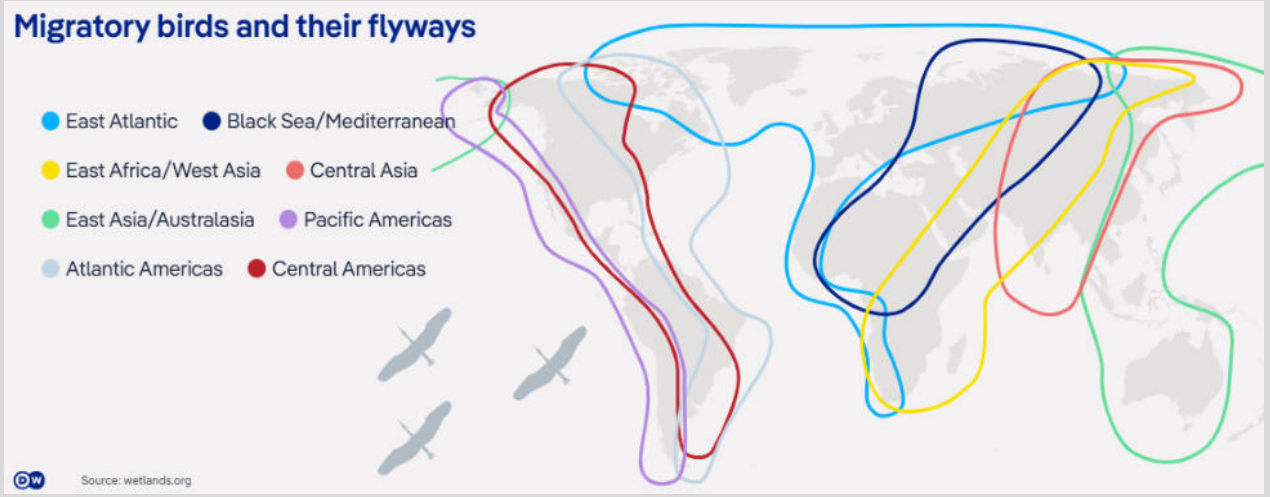
H5N1 is now present on every continent, including **Antarctica** and continues to circulate among **wild birds, poultry and mammals**.
Sporadic human infections (around **70 since 2024**) have occurred, all linked to animal exposure, with **no sustained human-to-human transmission** reported.

Drivers and Risks:

- Early and extensive **autumn bird migration** has brought infected flocks into closer contact with domestic poultry.
- The virus's persistence year-round underscores the challenge of containing it.
- There's a **"high" risk** for wild bird and poultry infection and further spread via live bird trade.
- Authorities stress the importance of **biosecurity**, **early detection** and **protective measures** for workers handling sick or dead birds (FFP3 masks, gloves, disinfection).

Impact and Outlook:

- The global situation remains **severe and expanding**, with **no signs of stabilization**.
- Large-scale culls are putting strain on **poultry and egg supply chains**, with price increases likely across affected regions.
- The **One Health approach**—linking animal, environmental, and human health—is essential to prevent **further spread and zoonotic spillover**.
- While **human infection risk remains low**, the ongoing **genetic diversification of H5N1** and its ability to infect **mammals** highlight the need for continued **global surveillance, data sharing and intersectoral cooperation** through **ECDC, USDA and WHO** networks.



Avian Influenza A — Global Situation
(October 2025)

Source: ECDC, PAHO, WHO

Current situation:
Human infections with avian influenza viruses continue to occur **sporadically worldwide**, associated with **exposure to infected poultry, wild birds or contaminated environment**s. No sustained human-to-human transmission has been detected.

Avian influenza A(H5N1):
New case – Cambodia (16 Oct 2025): A 3-year-old girl from Kampong Speu Province was confirmed infected on 15 Oct by the Pasteur Institute of Cambodia.
– Symptoms: fever, diarrhoea, cough, abdominal pain.
– Linked to sick poultry around the home; the child is receiving intensive care.
– Close contacts have been placed under **oseltamivir prophylaxis** and local awareness campaigns are underway.

Cumulative 2025 Cambodia total: 17 cases (14 deaths).

Americas region:
As of 15 Oct 2025, **19 countries and territories** across the Americas have reported **5,063 avian influenza A(H5N1) outbreaks** since 2022, including **435 in 2025**, primarily in the **United States, Canada, and Brazil**. A total of **76 human infections** have been confirmed in **five countries**: **71 in the United States**, **two in Mexico**, and **one each in Canada, Chile, and Ecuador**, with **two deaths** reported. **PAHO/WHO** notes that there is **no evidence of human-to-human transmission but** warns of the need for **enhanced One Health surveillance**, **biosecurity measures in poultry farms**, and **intersectoral coordination** to prevent spillover and ensure early detection.

Global cumulative total (since 2003): 992 human cases, 475 deaths (CFR ≈ 48%) across 25 countries.

Virological assessment: Circulating clade 2.3.4.4b viruses remain avian-adapted, with limited human infectivity and no sustained spread observed.

Risk: Low for the general population but **elevated** for individuals with direct or occupational poultry exposure.

Avian influenza A(H5):
Case – Mexico City (Sep 2025): Woman in her 20s developed illness on 14 Sep and was confirmed with A(H5) infection on 30 Sep at the National Institute of Respiratory Diseases.
– Hospitalised; recovered and discharged 11 Oct.
– Environmental investigation detected H5-positive bird droppings and infected domestic animals (pigeons, dog, poultry).
– 41 contacts identified; all tested negative and received antiviral prophylaxis.
Context: Third Mexican human H5 infection since 2024 (one A(H5N1) case reported Apr 2025).
Risk: Low for the general population; continued vigilance and safe poultry handling are advised.

Avian influenza A(H9N2):
Two new cases – China (reported 14 Oct 2025): A 2-year-old boy (onset 8 Sep) and a 70-year-old woman (onset 23 Sep).
– Mild clinical presentation; both recovered.
Global total (since 1998): 183 cases, including 2 deaths (CFR ≈ 1%).
Infections primarily occur in young children with poultry exposure, with no evidence of clustering or sustained transmission.
Risk to EU/EEA: very low.

Assessment:
- Human infections with **H5Nx and H9N2** remain **rare and sporadic**, with n**o sustained human-to-human transmission** detected.
- **Highest risk groups** include poultry workers, backyard farmers and veterinarians; general population risk in the EU/EEA remains low.
- Prevention relies on **PPE use**, avoiding contact with sick or dead birds and maintaining strict farm **biosecurity.**

Ongoing actions:
- **ECDC, EFSA and WHO partners** continue surveillance, genomic monitoring and public communication.
- Ongoing vigilance is essential to detect any viral **reassortment or genetic adaptation** that could increase human-to-human transmissibility.

Global Influenza-like Illnesses – Situation Update
(October 2025)

bluedot

Source: bluedot, ECDC

Current Situation:

Seasonal respiratory virus activity is intensifying across the **Northern Hemisphere**, with **influenza and RSV** rising **earlier than usual**.

In **Europe**, epidemic influenza activity is reported in **Belgium, Finland, Portugal, Sweden, and the UK**, starting **3–6 weeks ahead** of the 2024/25 season. **RSV** is increasing in **France, the UK, and Russia**, while **SARS-CoV-2** circulation remains widespread but slowly declining in Western Europe.

In **Asia–Pacific**, early influenza upswings are seen in **China, Japan, South Korea, and Malaysia**, with **school clusters of influenza A(H1N1) and B** in **Hong Kong and Malaysia**, reflecting greater indoor activity post-monsoon.

In the **Americas**, **Canada and the U.S.** report moderate influenza activity dominated by **A(H1N1)pdm09**, while **Chile and Argentina** continue to register **off-season RSV circulation**, suggesting extended viral overlap.

Drivers and Challenges:

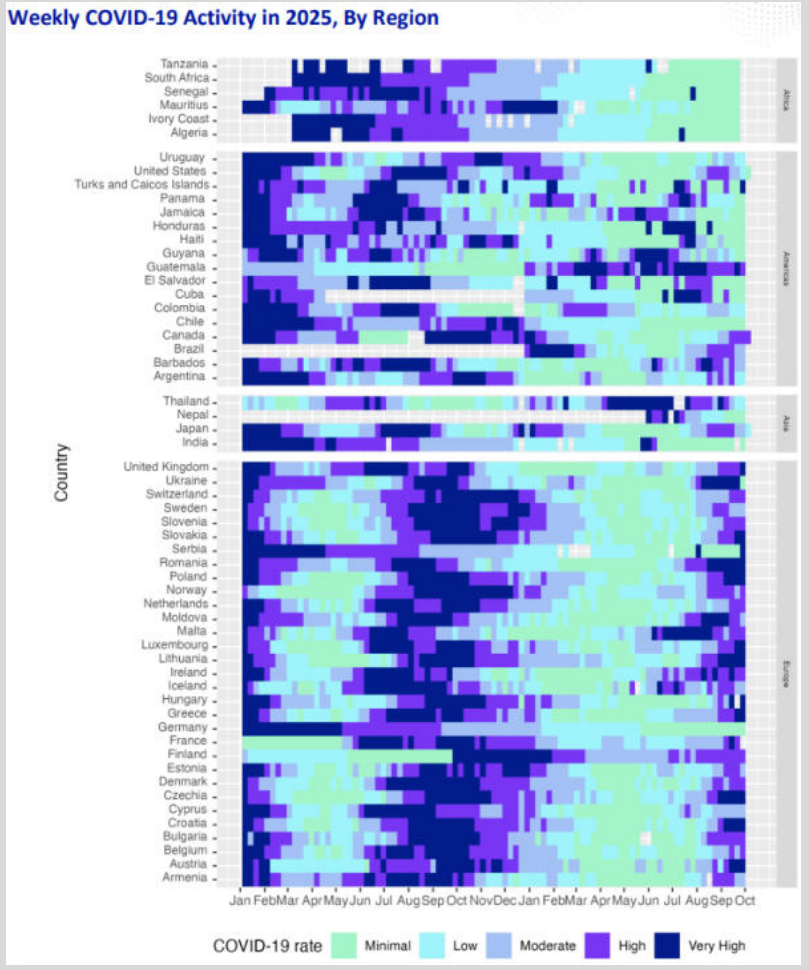
- Early and overlapping **influenza, RSV, and COVID-19** activity is straining healthcare systems, particularly pediatric care.
- **Mild, humid conditions** are extending viral transmission, while **post-pandemic immunity gaps** heighten susceptibility in children.
- Uneven **surveillance and lab capacity** continue to hinder accurate global trend assessment.

Public Health Responses:

- **Vaccination campaigns** have intensified across the Northern Hemisphere with countries like **Italy, Serbia, and Poland** launching joint influenza–COVID-19 vaccination efforts targeting high-risk groups. **Taiwan** began a dual influenza and COVID-19 vaccination program in early October, while **Australia and Japan** expanded RSV immunization for older adults and infants.
- **Hospitals** in parts of **Poland, Belgium, and Finland** reintroduced masking and visitor limits
- National authorities are promoting respiratory hygiene, self-isolation and vaccination to prevent healthcare overload.

Assessment and outlook:

The 2025–26 respiratory virus season has started early and may lead to **increased healthcare strain**, particularly in Europe and Asia. SARS-CoV-2 variants **XFG and NB.1.8.1** dominate globally (≈90% of sequences), with **XFG** increasing in Europe and the Americas and **NB.1.8.1** remaining prevalent in Asia. Ongoing co-circulation underscores the need for **integrated surveillance, vaccination uptake, and healthcare preparedness**.



World Health Organization
African Region

Ebola situation report – DRC
(November 2025)

Source: ECDC, AFRO WHO

Situation update	Cases	Deaths	CFR
	64	45	70.3%

On 4 September 2025, the Ministry of Health of the Democratic Republic of the Congo (DRC) declared an outbreak of Ebola Virus Disease in Bulape Health Zone (HZ), Kasai Province. This is the 16th outbreak of Ebola virus disease in the DRC.

Current situation:

As of 6 NOV, the Ebola outbreak in Bulape Health Zone, Kasai Province is nearing resolution. The **last confirmed patient was discharged on 19 October**, and **WHO has initiated the 42-day countdown** toward declaring the end of the outbreak (expected in early December 2025).
A total of 19 patients recovered from the disease (29.7%) and no new cases have been reported since **26 September**. As of 6 November, of the **1 735/1 787 (97.3%)** contacts that were followed up, **none are under active monitoring**. Since the outbreak was declared on 4 September 2025, and as of 6 November, there have been **64 cases (53 confirmed and 11 probable) and 45 deaths (34 confirmed and 11 probable) (CFR among all cases: 70.3%)**. All cases were reported in six health areas in Bulape health zone, Kasai Province.

Response and control measures:

- **Vaccination:** 37,178 people vaccinated with the **rVSVΔG-ZEBOV-GP (Ervebo)** Ebola vaccine since 13 September, including frontline workers and high-risk contacts.
- **Treatment:** 31 patients received **monoclonal antibody (mAb114)** therapy.
- **Case management:** A new 32-bed **Ebola Treatment Centre (ETC)** established in Bulape with support from **WHO, Africa CDC, ALIMA, IMC, and MSF**.
- **Surveillance:** Active case finding, laboratory testing, and contact tracing remain ongoing.
- **Community engagement:** Targeted health education and infection prevention campaigns continue in affected and at-risk zones.

Epidemiological highlights:

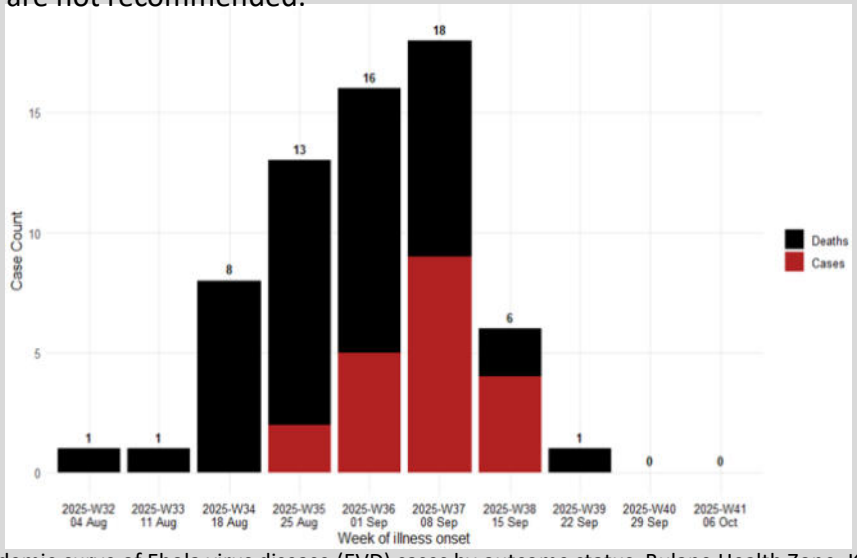
- Majority of cases were **female (58%)**, with most infections occurring among **children and young adults (0–29 years)**.
- The outbreak likely originated from a **new zoonotic spillover** of the **Ebola Zaire virus**, genetically distinct from previous DRC outbreaks.
- Initial spread was linked to **nosocomial transmission** and a **superspreading funeral event** of the index case.
- The **median time from symptom onset to isolation** improved from **five to two days** during the outbreak, reflecting enhanced surveillance.

Outlook:

Transmission appears fully contained, and the outbreak is **on track to be declared over** in December 2025 if no new cases arise. Continued vigilance through **post-outbreak surveillance**, **community engagement** and **strengthening of infection prevention** remains essential to maintain control.

Risk assessment:

- **Local risk: LOW TO MODERATE** in Kasai due to residual transmission potential in rural areas.
- **Regional/EU risk: VERY LOW** — no exportation risk detected and international travel restrictions are not recommended.



Weekly epidemic curve of Ebola virus disease (EVD) cases by outcome status, Bulape Health Zone, Kasai province, Democratic Republic of the Congo, 16 August – 12 October 2025

Cholera Disease Outbreaks - Global Situation
(October 2025)

World Health Organization
African Region

Source: ECDC, WHO, Africa CDC

Current situation:

As od 29 OCT, the global cholera situation remains severe in 2025, with widespread transmission across **Africa, Asia, and the Middle East**, and localized outbreaks in the **Americas**.

Since **1 January 2025**, a total of **562,449 cases**, including **7,201 deaths** (case fatality ratio, **CFR: 1.3%**), have been reported worldwide. This represents a **22% increase in cases and a doubling of deaths** compared to the same period in 2024 (462,096 cases; 3,434 deaths). Cholera continues to disproportionately affect populations in **fragile, conflict-affected, or climate-stressed regions**, where access to safe water, sanitation, and healthcare remains limited. Outbreaks are frequently linked to floods, population displacement, and overstretched health systems.

Geographical distribution:

- **Africa:** Approximately **193,500 cases and 4,368 deaths (CFR >2%)** reported from 18 countries. The most affected include **Sudan (70,883 cases; 1,960 deaths)**, **South Sudan (78,781; 1,251 deaths)**, **DRC (58,750; 1,747 deaths)**, **Angola (32,186; 849 deaths)**, and **Nigeria (31,302; 496 deaths)**. Smaller but ongoing outbreaks were reported in **Ethiopia, Mozambique, Somalia, and Tanzania**, with **Rwanda** and **Namibia** detecting cases for the first time in years.
- **Eastern Mediterranean:** Around **288,400 cases and 1,800 deaths (CFR 0.6%)** reported, dominated by **Afghanistan (143,068; 68 deaths)** and **Yemen (84,532; 230 deaths)**. Other affected countries include **Pakistan, Nepal, and Iran**, where fragile health systems and insecurity hinder effective control.
- **South-East Asia:** Roughly **5,100 cases and 1 death**, with persistent endemic transmission in **Bangladesh (67 cases)** and outbreaks in **Nepal (1,801)**, **Myanmar (2,259)**, and **India (1,389; 5 deaths)**.
- **Americas: 2,500 cases and 31 deaths**, almost entirely from **Haiti (5,353; 78 deaths)**, which continues to face serious WASH and security challenges.
- **Europe & Western Pacific:** No active outbreaks, only **sporadic imported cases** linked to travel.

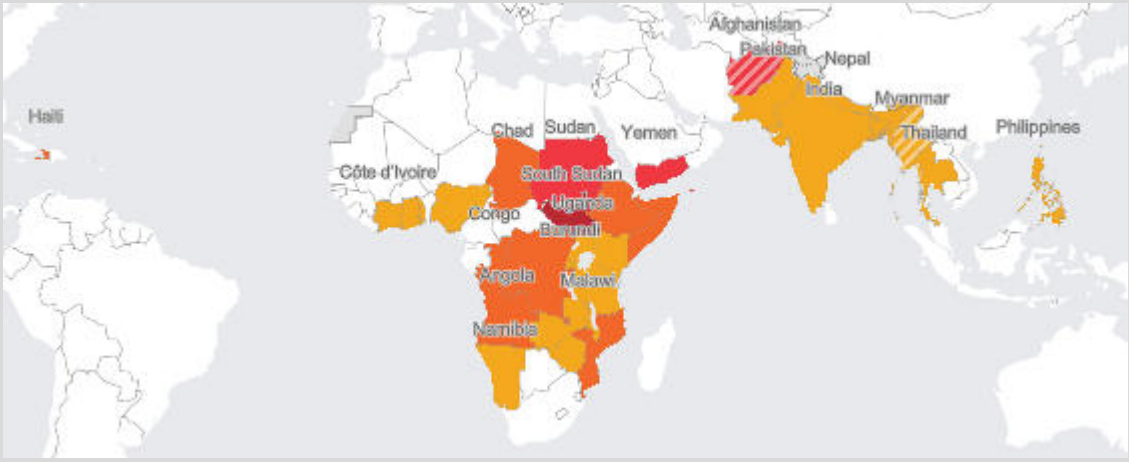
Key drivers:

- **Climate extremes**: Floods, droughts, and cyclones contaminate water sources and displace populations promoting cross-border transmission.
- **Conflict & displacement**: Ongoing crises exacerbate transmission and delay treatment.
- **Weak WASH systems**: Limited access to safe drinking water and sanitation in overcrowded settings.
- **Health system strain**: Concurrent outbreaks (measles, malaria, mpox) reduce capacity for cholera control.
- **Limited vaccine supply**: OCV shortages hinder large-scale campaigns.

Response actions*:*

- **WASH interventions, vaccination, and cross-border coordination**. Vaccination: **one-dose only** oral cholera vaccine (OCV) campaigns.
- Africa CDC & WHO launched a Continental Cholera Preparedness & Response Plan (26 Aug 2025) with a joint Incident Management Team, aiming to strengthen surveillance,

Outlook: The global risk remains **HIGH.** Without urgent and coordinated measures, further spread within and across countries is likely.



WHO Global Cholera and AWD Dashboard. World Health Organization. Available at: https://who-global-cholera-and-awd-dashboard-1-who.hub.arcgis.com/ — accessed 10 November 2025.

Global Antimicrobial Resistance (AMR) — WHO GLASS Report 2025

World Health Organization

Source: WHO

Antimicrobial resistance (AMR) *is an escalating global health threat that undermines the effectiveness of life-saving treatments and increases the risks of common infections and medical procedures.*

The **WHO Global Antimicrobial Resistance and Use Surveillance System (GLASS)** supports countries in building national surveillance capacity and generating standardized data to guide policy and action.
This **executive summary** is based on **>23 million confirmed infections** from **104 countries (2023)** — the most comprehensive WHO dataset to date. Surveillance covers **bloodstream, urinary, gastrointestinal, and gonorrhoeal infections**. GLASS tracks **93 infection–pathogen–antibiotic combinations** and **trends (2018–2023)** across all WHO regions.

Key Findings / Global Situation:

- **1 in 6 bacterial infections** worldwide resistant to antibiotics (2023).
- Resistance increasing in **over 40 %** of monitored combinations (increase 5–15 %/year).
- **Regional burden:**
  - **SE Asia / Eastern Mediterranean:** ≈ 1 in 3 infections resistant
  - **Africa:** ≈ 1 in 5
  - **Europe:** ≈ 1 in 10 (lowest)
- **Key pathogens:** *E. coli*, *K. pneumoniae*, *Acinetobacter spp.*
  - **>30 %** failure of first-line UTI antibiotics
  - **>50 %** *K. pneumoniae* resistant to 3rd-gen cephalosporins (> 70 % in Africa)
  - **>40 %** carbapenem resistance in SE Asia; **>50 %** in *Acinetobacter spp.* globally

Implications & Priorities for Action:

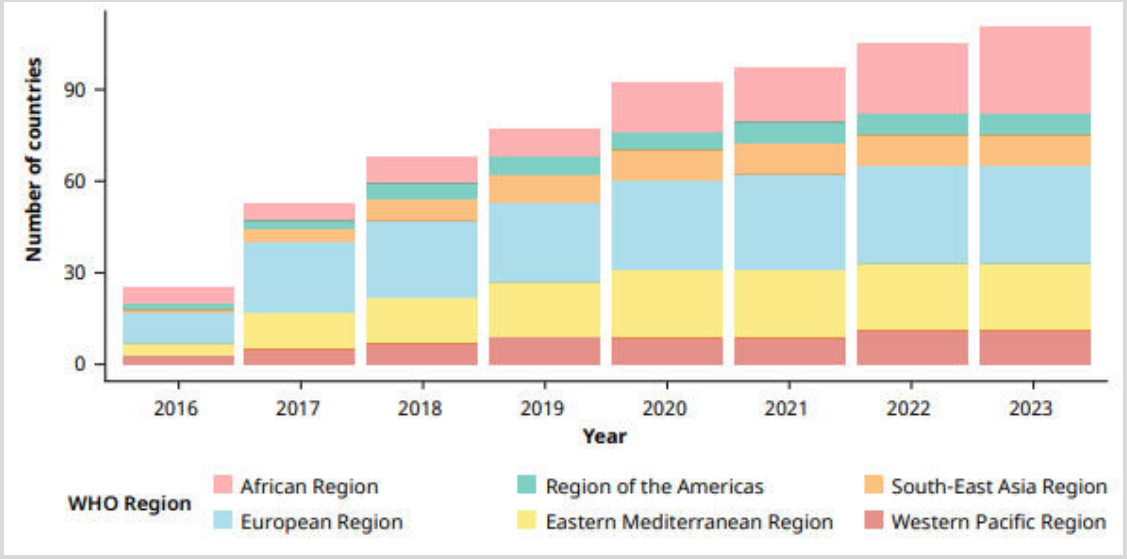
- Strengthen **national AMR surveillance** and laboratory capacity.
- Implement **antimicrobial stewardship** and optimize antibiotic use.
- Invest in **R&D** for new antibiotics, diagnostics and vaccines.
- Scale up **infection prevention & control (IPC)** and **WASH** infrastructure.
- Ensure equitable access to **"Access" group antibiotics** and restrict misuse of"Watch/Reserve" classes.

Progress:

- **104 countries → 70 % of world population** now reporting to GLASS (4-fold increase since 2016).
- WHO urges continued investment to close surveillance gaps in **low- and middle-income countries (**LMICs).

Recommendations:

- Expanding **diagnostic and AMR surveillance systems**
- Implementing **antibiotic stewardship** and **infection control**
- Ensuring **70% of antibiotic use** comes from the "Access" group by **2030**
- Increasing **R&D investment** in new antimicrobials



Numbers of countries that reported AMR data to GLASS, by WHO region, 2016–2023

Rift Valley Fever (RVF) — Senegal, Mauritania and The Gambia
(November 2025)

World Health Organization

Source: ECDC, WHO, WHO RRA

Overview (as of 6 November 2025):
The RVF outbreak continues to expand across Senegal, Mauritania and The Gambia, marking one of the largest regional outbreaks in recent years.

Senegal: 397 confirmed human cases and **29 deaths (CFR 7.3%)** reported since 21 September 2025. Eight regions are affected, primarily **Saint-Louis (304 cases)**, **Louga (18)**, **Matam (27)**, and **Fatick (18)**. New detections have been reported in **Kédougou**.

- **Animal infections:** 160 confirmed animal cases, **640 abortions**, and **11,644 animals vaccinated**.
- Most human cases are **men aged 15–35**, often involved in livestock or agriculture.

Mauritania: 46 confirmed human cases and **14 deaths (CFR 30.4%)** as of 30 October 2025. Thirteen regions affected, with hotspots in **Brakna (30.5%)**, **Assaba (22.2%)**, and **Trarza (22.2%)**, all near the **Senegal River valley**.

- **Animal cases:** 235 infections and **71 deaths** reported among livestock.

The Gambia: First human case confirmed in **Ker Ayib**, a border village with Senegal, on 5 November 2025. The **World Organisation for Animal Health (WOAH)** reported **four animal cases** on 28 October 2025.

Epidemiological link: Outbreaks are concentrated along the Senegal River Valley, a known RVF hotspot where **seasonal flooding and livestock movement** amplify virus circulation. **Genomic analysis** indicates the current outbreak strains are linked to earlier detections in **Senegal (2020–2022)** and **Mauritania (2020)**, suggesting regional persistence and re-emergence of the same lineage.

Background and disease information:
Rift Valley Fever is a **mosquito-borne viral zoonosis** primarily affecting **livestock (cattle, sheep, goats, camels)** and occasionally humans. Human infection occurs through **contact with infected animal fluids** or **mosquito bites**. Most human cases are mild, but severe forms can cause **haemorrhagic fever, hepatitis, retinitis, or encephalitis**. **Vaccination of livestock** in endemic areas remains the most effective preventive strategy for reducing human infections.

Historically, both countries experience periodic RVF outbreaks.

- **Mauritania:** 1987, 2010, 2012,2015, 2020, 2022 (47 cases, 23 deaths).
- **Senegal:** 2013, 2021 (3 cases, no deaths).

ECDC assessment:

- **RVF is endemic** in both Senegal and Mauritania, with the **early autumn period** posing elevated epidemic potential due to rainfall and vector activity.
- **Risk to EU/EEA:** Very low. Importation of live ruminants and raw animal products is banned, and mosquito activity in Europe is minimal in late autumn.
- **Risk to local populations:** Elevated for those with direct animal contact—**farmers, veterinarians and abattoir workers**—or exposed to **infected mosquitoes**.
- **Travel risk:** Low if proper precautions are followed (use of repellents, protective clothing, and avoidance of animal exposure).

Preventive measures:

- Use of **PPE** when handling animals.
- Avoid mosquito bites (repellents, nets).
- Maintain safe slaughtering and animal husbandry practices.

Transmission via **substances of human origin (SoHO)** has not been documented, and existing **malaria donor deferral policies** would mitigate any residual risk.

Public health implications and outlook:

- Ongoing **cross-border coordination** is needed between **Senegal and Mauritania** for joint surveillance, vaccination campaigns and animal movement control.
- As the **rainy season wanes**, transmission is expected to **decline gradually**.
- WHO, Africa CDC, and national authorities continue **entomological monitoring**, **case tracing** and **vector control** in affected zones.

West Nile Virus (WNV) — Europe
(October 2025)

Source: ECDC

Current situation:

As of **3 October 2025, 13 European countries** reported **989 locally acquired human WNV infections**, including **63 deaths.** Cases have occurred in **Italy (714), Greece (91), Serbia (60), France (42), Romania (36), Spain (23), Hungary (11), Croatia (4), Albania (3), North Macedonia (2), Bulgaria (1), Kosovo (1), and Türkiye (1).** The first and last case onsets were **2 June** and **26 September** 2025, respectively. Current figures are **above the 10-year average (687)** but remain **below major peak years (2018, 2022, 2024).**

Italy remains the epicentre, with **714 cases (48 deaths; CFR 6.7%),** the highest number ever recorded by this time of year. Most cases were reported from **Lazio (252) and Campania (124)** regions. Overall, **64% of all EU/EEA WNV cases** were reported from Italy.

Epidemiological patterns:

- Cases occurred in **139 regions across 13 countries**, compared to 179 regions (18 countries) in 2024.
- **35 regions** reported *first-ever* human cases, including in **Italy (Lazio, Sicily, Sardinia, Tuscany)**, **France (Paris, Vaucluse, Haute-Garonne)**, **Greece (Crete, Peloponnese)**, and **Spain (Alicante, Almería)**.
- Majority of infections among **males aged ≥65 years**.
- **88% hospitalized** (vs 91% average last decade); **56% with neurological symptoms**.
- **CFR ≈ 7%**, slightly lower than the 10-year average (10%).

Animal outbreaks (One Health context):

In 2025, 127 outbreaks among equids and **217 among birds** were reported in Europe.

- **Equids:** Italy (59), France (37), Croatia (10), Hungary (7), Germany (5), Greece (4), Spain (4), Austria (1).
- **Birds:** Italy (192), Germany (15), Belgium (3 – first-ever), Spain (3), Austria (2), Croatia (1), Hungary (1).
- **Belgium** reported its *first WNV detection in wildlife*, involving **Eurasian jackdaws and carrion crows** in August 2025.
- Italy accounted for **73% of all animal outbreaks**, mirroring its human case dominance.

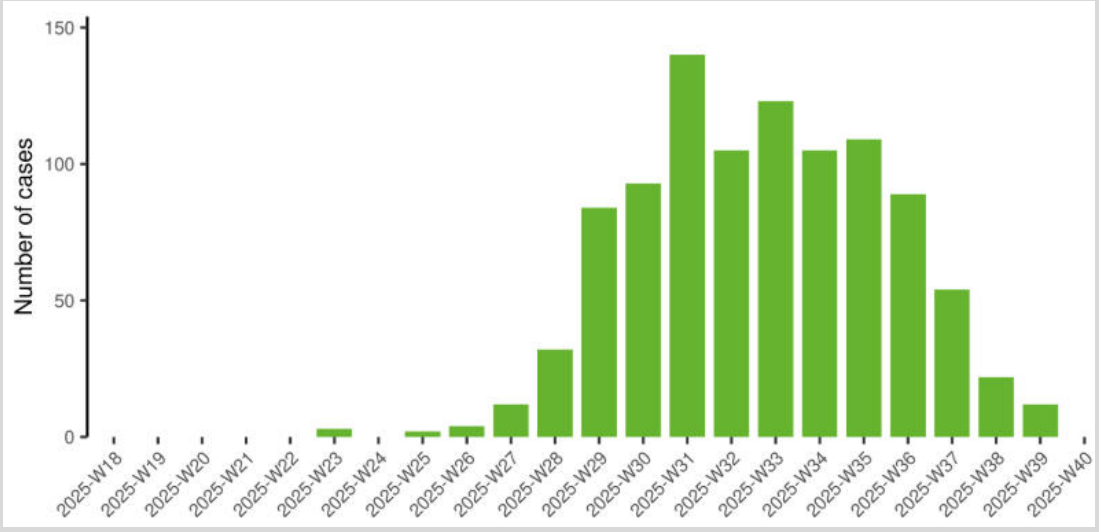
Interpretation:

- **Geographic expansion** continues, with **new detections in previously unaffected areas**, likely influenced by **climate variability**, **wetlands**, and **vector ecology**.
- **Environmental and ecological factors** (e.g. temperature, precipitation, habitat changes) remain key drivers of WNV circulation.
- Reported figures **likely underestimate** true burden due to asymptomatic infections and **reporting delays**.
- Transmission expected to **decline seasonally** as weather becomes less favorable (post-September).

Outlook:

While overall risk remains moderate, Italy and southeastern Europe face **continued transmission potential** until colder conditions suppress mosquito activity.

Enhanced **vector surveillance, donor screening, and public communication** remain essential under the *One Health* framework.



Number of locally acquired human cases of WNV infections reported within Europe in 2025, by week and as of 3 October 2025.

Record Surge of Lyme Disease – Czech Republic
(October 2025)

bluedot

Source: NationalInstitute of Public Health

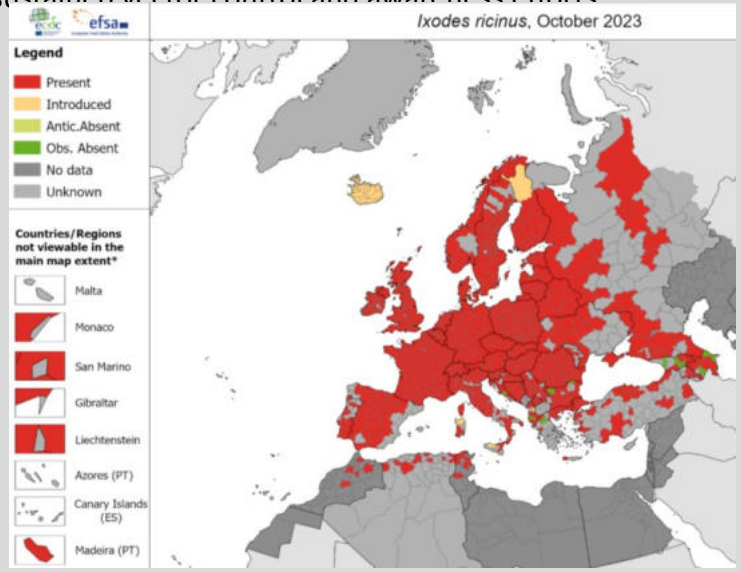
Current Situation:
As of late 2025, the Czech Republic has recorded **7,994 confirmed cases of Lyme disease**, nearly **double** the number reported in 2024 (4,029). This marks the **highest annual total since national surveillance began in 1986**. Most infections were detected between **April and October**, with continued transmission expected into the autumn due to unusually **warm and humid weather** prolonging tick activity. Health authorities have issued public advisories emphasizing prevention and early diagnosis.

About the Disease:
Lyme disease is caused by the **bacterium *Borrelia burgdorferi sensu lato***, transmitted through the bite of infected **Ixodes ricinus** ticks. Infection risk increases when ticks remain attached for more than 24 hours. Symptoms typically appear within **2–30 days** of exposure and may include **fever, fatigue, muscle and joint pain, headache, and erythema migrans** ("bull's-eye" rash). If untreated, the disease can progress to affect the **nervous system, heart, and joints.** The disease is **treatable with antibiotics**, and early intervention prevents severe complications. There is **no human vaccine** available in Europe.

Drivers and Challenges:
- **Climate variability**: Warmer and wetter autumns have extended the tick season, maintaining high transmission potential.
- **Environmental changes**: Expanding forested areas and increased outdoor recreation raise human exposure risk.
- **Underdiagnosis and misclassification**: Early symptoms resemble other febrile illnesses, leading to delayed treatment.
- **Co-circulation of tickborne infections**: Overlap with diseases such as **tick-borne encephalitis (TBE)** adds diagnostic and clinical challenges.

Public Health Response:
- **Preventive messaging**: Authorities urge the use of **repellents, long clothing, and post-exposure skin checks** after outdoor activities.
- **Awareness campaigns**: Targeted outreach to outdoor workers and recreational groups.
- **Enhanced surveillance**: Strengthened case reporting through national systems and cross-border monitoring with neighboring countries.
- **Medical guidance**: Reminders to clinicians for early recognition and antibiotic treatment of suspected cases.

Assessment and Outlook:
The current **Lyme disease surge represents an unprecedented increase** in the Czech Republic's surveillance history. While enhanced awareness and testing may contribute to higher reporting, **environmental and climatic factors are key drivers** of the rise.
Transmission risk is expected to **persist through late autumn**, particularly in wooded and rural regions. Continued **public education, tick surveillance, and preventive measures** are essential. Overall, the event is classified as **a watchlist-level concern** — geographically widespread but manageable with sustained vector control and awareness efforts.



Salmonella Strathcona ST2559 — Multi-country outbreak linked to small tomatoes (October 2025)

Source: ECDC

Current situation:

A prolonged cross-border outbreak of *Salmonella* Strathcona ST2559 is ongoing in the **European Union/European Economic Area (EU/EEA)**.

Between **2023 and 30 Sep 2025**, **437 confirmed cases** have been identified across **17 EU/EEA countries** — an increase of **205 cases** since the last ECDC rapid outbreak assessment on the 12th of Nov 2024.

Number of cases: **Austria (76)**, **Croatia (3)**, **Czechia (11)**, **Denmark (12)**, **Estonia (2)**, **Finland (5)**, **France (43)**, **Germany (113)**, **Ireland (6)**, **Italy (123)**, **Luxembourg (5)**, **Netherlands (5)**, **Norway (4)**, **Slovakia (6)**, **Slovenia (10)**, **Spain (3)**, **Sweden (10)**.

Additional cases: **United Kingdom (73)**, **Canada (10)**, **United States (24)**.

Among travel-related cases, **Italy** was the most frequently visited country.

Epidemiological and microbiological findings:

- **Tomatoes remain the primary vehicle** of infection in multiple investigations.
- In **2025**, new outbreak investigations in **Austria** again linked infections to **small tomatoes from Sicily, Italy**, consistent with previous outbreaks in **Austria (2023)** and **Italy (2024)**.
- This pattern mirrors the historical **Denmark 2011 outbreak** caused by the same *S. Strathcona* ST2559 strain, also traced to **Sicilian tomatoes**.
- The **Italian food-safety authority** detected *S. Strathcona* in **irrigation water** from a tomato production site in Sicily, confirming the role of the **environment as a contamination source**.
- Environmental sampling further identified the outbreak strain in **aquatic-related matrices**, underscoring the need for **integrated environmental monitoring** in food-safety management.

Drivers and challenges:

- **Persistent environmental contamination** in primary-production areas.
- **Complex supply chains** enabling cross-border spread over multiple years.
- Ongoing **climatic and water-quality pressures** that may facilitate persistence of *Salmonella* in irrigation systems.

Response:

- Italian authorities have implemented a **comprehensive sampling plan**, **targeted inspections**, and **environmental assessments** in tomato-growing regions.
- **ECDC and EFSA** coordinating joint genomic surveillance, outbreak tracing, and cross-sectoral investigation.
- Public-health and food-safety authorities are advised to:
  - Verify whether **tomatoes from Sicily** remain the infection vehicle.
  - Strengthen **(pre)harvest controls**, particularly for **irrigation-water sources**.
  - Continue **whole-genome sequencing** of human and environmental isolates to monitor strain persistence.
- **Consumer advice:** practice **hand hygiene**, **wash fresh produce thoroughly**, and **avoid cross-contamination** during food preparation.

Outlook: **The detection of genetically related cases over several years indicates a long-term environmental contamination reservoir**. A **multi-disciplinary "One Health" strategy** integrating **environmental, agricultural, and food-safety surveillance** is essential to prevent further outbreaks.

Measles – Region of the Americas
(November 2025)

Source: PAHO

*The **Pan American Health Organization (PAHO)** has announced that the **Americas have lost their measles elimination status**, following confirmation of **sustained endemic transmission in Canada** for over 12 months. This marks the third time the Region has faced such a setback, though PAHO stresses that elimination remains achievable through renewed action.*

Current Situation:

As of 7 Nov 2025, **12,596 confirmed measles cases** and **28 deaths** have been reported across **10 countries**, a **30-fold increase** from 2024. The majority of cases are in **Canada, Mexico, and the United States (≈95%)**, with outbreaks also active in **Bolivia, Brazil, Paraguay, and Belize**. About **89% of infections** occurred among **unvaccinated or under-vaccinated individuals**, mainly **children under five**. Canada's outbreak, beginning in **Oct 2024 in New Brunswick**, has spread nationwide, surpassing **5,000 cases** despite recent declines.

Drivers and Challenges:

Regional MMR2 coverage averages only 79%, far below the **95% threshold** required to prevent outbreaks. Just **20% of countries** achieved adequate two-dose coverage. **Low vaccination rates, travel-related importations, and community hesitancy** are fueling spread and threatening regional health systems.

PAHO Response and Recommendations:

PAHO has deployed experts to Mexico, Argentina, and Bolivia, and is assisting other high-risk countries to strengthen **surveillance, laboratory diagnostics, and outbreak response**. Countries are urged to enhance **case detection, immunization registries, and PCR testing** for suspected cases, ensure **timely outbreak documentation**, and maintain **financial and human resources** for lab-based surveillance.

Outlook:

The loss of measles-free status is reversible. PAHO calls on all countries to **boost vaccination**, **improve surveillance** and **respond swiftly to new cases**. Canada is developing a national **action plan to halt endemic transmission** and help the region **restore elimination**.

Mpox – EU/EEA, Western Balkans and Türkiye
(2022–2025)

Source: ECDC

Current Situation:

Since August 2024, **30 mpox clade I cases** have been reported in the **EU/EEA** via TESSy — **Belgium (6), France (4), Germany (12), Ireland (4), Italy (2), Spain (1), and Sweden (1**). All were **clade Ib**, except one **clade Ia** case in Ireland. **Seven patients were hospitalised**, and s**econdary transmission occurred in Germany, Belgium, and Ireland**. An additional **nine clade I cases** were detected through event-based surveillance in **Belgium, Germany, Greece, Italy, the Netherlands, Portugal and Spain**, including infections among **MSM**, with local spread confirmed in **Spain and the Netherlands.**

Between **16 September and 9 October**, **59 mpox cases** were reported in the EU/EEA (Spain 35; Germany 10; France 6; Italy 3; the Netherlands 2; Ireland, Luxembourg, Portugal 1 each). Since 2022, **25,420 confirmed cases and 10 deaths** have been recorded in **29 EU/EEA countries**, mostly among **men,** with **sexual transmission** predominant **among MSM**.

Beyond the EU/EEA, the **Western Balkans** have reported **55 cases** (Serbia 40; Bosnia and Herzegovina 9; Montenegro 2; North Macedonia 2; Albania 1; Kosovo* 1), and **Türkiye** has reported **71 cases**.

ECDC assessment:

- Overall case numbers remain **low and stable**, but the emergence of **locally acquired clade Ib infections** marks a new pattern of transmission within Europe.
- The **risk for clade Ib infection** is assessed as **moderate among MSM** and **low for the general population**, while **clade IIb** remains **low for MSM** and **very low for the general population**.
- Continued **testing, sequencing, vaccination** and **risk communication** remain priorities.

Public health measures:

- **Primary preventive vaccination (PPV)** for high-risk groups (MSM, transgender individuals, healthcare and laboratory staff).
- **Post-exposure vaccination (PEPV)** for close contacts of confirmed cases.
- **Enhanced sequencing** and data sharing through EpiPulse and global repositories (GISAID, ENA, SRA).
- **Awareness campaigns** targeting travellers returning from affected countries and communities at higher risk of exposure.

Measles and Rubella in Europe – Monthly Report
(September 2025)

Source: ECDC

Overview:
ECDC's latest data show that measles and rubella activity in Europe remains concerning, with persistent transmission linked to immunity gaps and low vaccination coverage in some populations. Although measles case numbers declined slightly in September, underreporting and retrospective updates may affect the trend.

Measles Situation:
In September 2025, **11 of 28 countries** reported a total of **90 measles cases**, with **Italy (27)**, **the Netherlands (18)**, **Germany (14)**, **Belgium (9)** and **Romania (7)** recording the highest counts.

From **Oct 2024–Sept 2025**, **10,195 cases** were reported across **30 EU/EEA Member States**, including **8 deaths** (CFR: 0.078%). Nearly **81% of all cases were unvaccinated**, and **infants under one year** had the highest incidence rate (336.4 per million).

Rubella Situation:
In the same 12-month period, 105 rubella cases were reported by **30 Member States**, with **no associated deaths**. In September, only **Germany, Italy and Poland** reported new cases (nine in total).

ECDC Recommendations:
ECDC urges Member States to close immunity gaps by achieving and sustaining **>95% two-dose MMR coverage**, expand **catch-up vaccination campaigns** for adolescents and young adults and ensure **healthcare worker vaccination**.
Countries should strengthen **surveillance, outbreak detection**, and **risk communication** to improve vaccine acceptance—particularly in underserved or hesitant communities.

Key Message:
Despite overall declines, measles and rubella remain threats to EU/EEA elimination goals. Sustained political commitment, public engagement and equitable access to vaccination are essential to halt transmission and prevent future outbreaks.

Leptospirosis — Latvia
(October 2025)

Source: CDPC, Media

Current situation:
As of 22 Oct 2025, Latvia's **Centre for Disease Prevention and Control (CDPC)** has reported **29 human cases** of leptospirosis — a **significant increase** over the national average (≈4 cases/year) — including **one death**. Most cases occurred in **August (6) and September (14)**, with exposures linked to **rodents, gardens, and moist soil**. Cases detected in **Riga, Vidzeme and Zemgale**, mainly among **adults aged 25–82 years**; all required hospitalization. Most patients reported **rodent exposure or contact with contaminated environments**, such as backyard gardens.

About the disease: Leptospirosis is a **bacterial zoonosis** caused by *Leptospira* spp., transmitted through contact with urine from infected animals (mainly rodents, but also pets and livestock) or contaminated environments. Humans can become infected through **broken skin or mucous membranes** (eyes, nose, mouth). Symptoms appear **2–20 days** post-exposure and range from **fever, chills, headache, and muscle pain** to **severe forms with jaundice, meningitis, or kidney/liver failure**. The disease is **severe but treatable** if diagnosed early.

Drivers and challenges:
- **Rodent exposure** during late-summer seasonal peak.
- **Environmental contamination** (soil and water) after increased rodent activity.
- **No human vaccine** and **possible underdiagnosis** due to nonspecific symptoms.

Response:
- **Public health is advising** on protective clothing, gloves, boots and **hand hygiene** after outdoor or animal contact. **Regular rodent control** in and around homes and farms is also being advised.
- **Epidemiological investigations, surveillance and awareness campaigns** ongoing.

Assessment:
Watchlist alert / low-to-moderate concern: outbreak geographically limited but **unprecedented in scale** for Latvia; continued vigilance, early diagnosis and environmental control are key to containing transmission.

Middle East Respiratory Syndrome Coronavirus (MERS-CoV) — Multi-country
(October 2025)

Source: ECDC

Current situation:
Since the previous update (1 Sep 2025), one new fatal case of MERS-CoV has been reported in **Saudi Arabia** (onset July 2025). The patient lived in **Riyad Province**, had **underlying comorbidities**, and reported **no camel contact**. All close contacts were followed up; **no secondary cases detected**.

Total numbers:
Cumulatively in 2025 (to 6 Oct): **12 cases**, **3 fatalities** in Saudi Arabia.
Cumulative totals (2012 – 6 Oct 2025): 2 640 laboratory-confirmed cases worldwide, including **958 deaths** (CFR ≈ 36 %).

Drivers and challenges:
- Sporadic zoonotic transmission from **dromedary camels** continues on the **Arabian Peninsula**.
- Declining surveillance detections: **lowest number of new cases since 2014**.
- Persistent **risk of imported infections** via travel from affected areas.

Response:
- **WHO EMRO** and **Saudi MOH** maintain active case surveillance, contact tracing, and IPC in healthcare settings.
- **ECDC** continues monthly monitoring through epidemic-intelligence channels.
- Existing preparedness tools remain relevant: *Health emergency preparedness for imported cases of high-consequence infectious diseases* (ECDC, 2019). *RAGIDA – MERS-CoV risk-assessment guidelines for infectious diseases transmitted on aircraft* (ECDC, 22 Jan 2020).

Outlook:
Human cases persist in the Arabian Peninsula, but global incidence remains **historically low**. The probability of **sustained person-to-person transmission in Europe** and the **impact on the general population** are **both considered low**. Continued **surveillance, camel-contact precautions**, and **rapid response to imported cases** remain essential.

Pertussis – Argentina & USA
(October 2025)

Source: DSHS, Argentina MOH

Current Situation:
Pertussis cases are surging across the **Americas**, notably in **Argentina** and the **United States**. Infants remain most at risk, and low vaccination coverage continues to drive outbreaks.

In **Argentina**, 3,725 suspected and 407 confirmed cases have been reported in 2025—a threefold increase from 2024—with **five infant deaths** in Buenos Aires Province. Most fatalities involved **unvaccinated infants** or **mothers not vaccinated during pregnancy**.

In the **United States**, Texas has reported over **3,500 cases**, quadruple 2024 levels and exceeding historic peaks. Nationally, **more than 20,000 cases** have been recorded in 2025, with multiple states reporting record-high activity, largely among **children**.

Drivers and Challenges:
- **Suboptimal vaccine coverage**: Argentina's DTP3 coverage (75–80%) and declining U.S. rates remain below the 95% threshold for herd immunity.
- **Maternal immunization gaps**: Low uptake reduces infant protection.
- **Urban clustering and healthcare strain**: Densely populated regions face rising pediatric caseloads and limited surge capacity.

Public Health Response and Outlook:
Health authorities in both countries have intensified vaccination campaigns for infants, children, and pregnant individuals, alongside public awareness drives and early case detection. While the **overall risk is low**, **unvaccinated infants and caregivers** remain vulnerable. Sustained regional vigilance and improved vaccine coverage are critical to preventing further severe outcomes.

West Nile virus – Illinois, USA
(October 2025)

Source: Department of Public Health

Current Situation:

As of mid-October 2025, **Illinois has recorded more than 120 human cases of West Nile virus (WNV)**, surpassed last year's total of 69 cases and marking one of the state's **highest annual counts in recent years**. The most affected areas are **Cook County (76 cases)** and **DuPage County (10 cases)**. One **fatal case** was reported in an individual in their 60s. At the national level, the **US CDC has reported 1,564 cases across 43 states**, with the **highest numbers in Colorado (264), Illinois (113–120), and Minnesota (106)**.

Drivers and Challenges:

- **Favorable environmental conditions:** Above-average temperatures and heavy rainfall have created **ideal breeding habitats** for *Culex* mosquitoes, the primary WNV vector.
- **Urban-rural overlap:** Densely populated areas with standing water sources, combined with suburban green spaces, increase human exposure risk.
- **Underreporting:** Up to **80% of WNV infections are asymptomatic**, meaning official case counts likely underestimate the true burden.
- **Absence of vaccine or specific treatment:** Reliance on mosquito control and public adherence to preventive behavior remains the primary defense.

Public Health Response:

- **Vector control campaigns**: State and local health departments are conducting **larvicide treatments, mosquito trapping and targeted spraying** in affected counties.
- **Public awareness messaging:** Residents are being urged to **use EPA-approved repellents, wear long sleeves, and eliminate standing water** around homes and properties.
- **Enhanced surveillance:** Mosquito testing programs and sentinel bird surveillance continue statewide to monitor virus circulation.

Assessment and Outlook:

The 2025 WNV season in Illinois has been early and intense, exceeding the five-year average and indicating favorable conditions for mosquito spread. While containment appears effective, transmission may persist until colder weather. Given the **absence of medical countermeasures**, **preventive behavior and sustained vector control** are critical to limiting further spread. Event is assessed as a **watchlist-level concern** due to high case numbers but effective public health response.

Melioidosis – Mali
(October 2025)

Source: The Lancet

Current situation:

A new *Lancet Global Health* study (16 Oct 2025) confirmed **endemic transmission of *Burkholderia pseudomallei*** in Mali — the first large-scale evidence of melioidosis in West Africa. **31 pediatric cases** were identified, **14 (45%)** in infants under 12 months. Among 19 patients with known outcomes, **12 died** (CFR 63%), underscoring the disease's severity and diagnostic challenges. Genetic analyses indicate **long-term environmental presence** rather than recent introduction.

About the disease:

Melioidosis is a severe infection caused by *Burkholderia pseudomallei*, a soil- and waterborne bacterium found in tropical regions. Humans become infected through **contact with contaminated soil or water**, inhalation, or ingestion. Symptoms vary widely—from **pneumonia and abscesses** to **septic shock**—and the disease can mimic other infections, leading to underdiagnosis. It carries a **high mortality rate (40–60%)** if untreated and requires **specific antibiotics** such as ceftazidime or carbapenems; there is **no vaccine**.

Drivers and challenges:

- **Environmental persistence** in soil and stagnant water across Mali.
- **Diagnostic gaps** and limited clinician awareness in Africa.
- **Antimicrobial resistance**, making empirical treatments ineffective.
- **High infant mortality**, possibly linked to contaminated weaning foods or perinatal exposure.

Public health response:

Efforts are underway to expand laboratory capacity, develop **low-cost diagnostic screening**, and conduct **environmental surveillance**. Authorities are also updating **therapeutic guidelines** and calling for the inclusion of melioidosis as a **WHO-neglected tropical disease** to mobilize global support.

Assessment / Outlook:

With confirmed endemicity, **high lethality** and **under-recognition**, melioidosis represents a **medium-level public health concern** for Mali and the broader West African region. Enhanced surveillance, training, and access to effective antibiotics are critical to reduce mortality and prevent wider spread.

Other Infectious Disease Outbreaks - Africa

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World Health Organization
African Region

Diphtheria – Algeria

Five confirmed diphtheria cases, including **two deaths** (a 25-year-old foreign national and an unvaccinated 12-year-old), have been reported in **Skikda Province**, northeastern Algeria. The Ministry of Health has activated a **crisis cell** and launched a rapid **vaccination campaign**, with **over 500 people immunized** in 48 hours. Enhanced surveillance, contact tracing, and public awareness activities are ongoing. The situation remains **stable and localized**, with continued monitoring to prevent further spread.

Source: Algerian Press Service, WHO

Dengue — Mauritania

An ongoing dengue outbreak is reported in **Tiris Zemmour**, northern Mauritania (bordering Algeria). Detected **late May–early June 2025**, with **148 confirmed cases (RDTs)** and **no severe cases or deaths** to date. The event remains **limited to two districts** of the province. **Eight of 11 samples** tested positive for **DENV-2**, the same lineage identified in the **2018 regional outbreak**. No current information on vector control, case management, or active community surveillance. **Assessment: Medium concern (local)** — moderate likelihood of ongoing low-level transmission; **low regional/global concern**.

Source: WHO-Africa

Diphtheria — Sudan

At least **15 cases and 3 child deaths** reported in Jereif East, Khartoum, marking a **localized diphtheria outbreak** amid ongoing cholera and dengue activity. Falling DTP3 vaccination (<80%), conflict-related disruptions, and urban crowding are key drivers. Authorities urge **child immunization** and isolation of suspected cases; **international support** requested.

***Source:** NewsMedia*

Cholera – Burundi

Burundi has reported **2,445 cholera cases and six deaths** (CFR 0.4%) between January and mid-October 2025, marking a **30% rise** over the past month. Transmission remains concentrated in **Cibitoke District** near Bujumbura, where access to safe water is limited. **Women and young children** account for most infections. Health authorities are scaling up **rehydration centers, water chlorination and hygiene campaigns**, though capacity and infrastructure challenges persist. **Source:** CDC Africa

Q Fever – Libya

Libya has reported its first confirmed human case of Q fever in **Zintan**, following detection of *Coxiella burnetii* in nearby sheep flocks. The case raises concern for **possible cross-border spread** to Egypt, where livestock movements are frequent. Authorities have launched **local investigations and awareness campaigns**, emphasizing **protective measures, safe livestock handling, and avoidance of unpasteurized dairy** to prevent further infections.

Source: NRCTTD

Rabies – Yemen

At least five children have died from rabies in **October 2025** in Houthi-controlled areas of **Sana'a and Dhamar**, with **nine deaths reported since January**. Limited access to post-exposure prophylaxis and shortages of anti-rabies serum are driving preventable fatalities, as hospitals report **over 400 dog bites monthly**. The outbreak underscores severe gaps in animal vaccination, public awareness, and healthcare access amid Yemen's ongoing conflict. National testing for **Lassa fever and dengue** is ongoing. No secondary cases have been identified among healthcare contacts or the community, and the event is currently considered **contained**. Investigations continue to determine the etiology and confirm possible exposure routes.

Source: Newsmedia

Measles & Typhoid Fever – South Africa

As of 31 Oct 2025, **1,681 measles** and **1,627 rubella** cases have been reported nationwide, with most infections in children <15 years. Measles remains highest in **Gauteng**, **Limpopo**, and the **Western Cape**, while rubella is concentrated in **North West Province (937 cases)**. Authorities urge intensified **vaccination, surveillance, and community awareness** to curb spread.

Typhoid fever cases have reached **147**, surpassing 2024 totals, with clusters in **Tshwane (Bronkhorstspruit and Hammanskraal)** linked to contaminated water. Residents are advised to **use safe water and practice strict hygiene** as investigations continue.

Source: NICD, NICD

Bacterial Meningitis – Africa

Since January 2025, 1,198 cases (171 confirmed, 1,027 suspected) and **27 deaths (CFR 2.25%)** have been reported across **Ghana, Mali, Togo, and Zambia**. Ghana remains the most affected (439 cases, 20 deaths). In week 42, 16 new cases were detected, all from Mali. The **regional risk remains moderate**.

Source: CDC Africa

Other Infectious Disease Outbreaks – Europe

Mpox Clade I – Spain

A locally acquired mpox Clade Ib case was detected in Madrid on 10 Oct 2025, marking the first local transmission in Spain following an imported case in September.

The case involves a 49-year-old man with reported close/sexual contact in the region. Public-health response: Epidemiological investigation and contact tracing ongoing. No additional linked cases reported to date. Assessment: Overall public-health risk remains low, but continued vigilance and testing among sexual networks are advised.

Source: ECDC

Varicella (Chickenpox) — Russia

Russia reports a nationwide surge in chickenpox, with over 16,500 cases in Bashkortostan, a 67% rise in Yamal, and more than 1,400 cases in the Altai Republic during the first seven months of 2025. Children represent 94.8% of all infections, reflecting low and inconsistent vaccine coverage nationwide. Health authorities urge vaccination during outbreaks and warn against "chickenpox parties" to limit spread.

Source: NewsMedia

Chikungunya Virus Disease – EU

Local transmission of chikungunya continues in France and **Italy**.

- **France:** 776 locally acquired cases across **77 clusters** (18 active); largest in **Antibes**.
- **Italy:** 374 locally acquired cases across **6 clusters** (3 active); main cluster spans **Modena and Emilia-Romagna** areas.

Both countries have reported **new weekly cases**, indicating ongoing but localized transmission.

Source: ECDC

Seasonal surveillance of dengue – EU:

Since the beginning of 2025, and as of 5 November 2025, three countries in Europe have reported cases of dengue: France (29), Italy (four), and Portugal (two).

Source: ECDC

West Nile Virus – France

France confirmed its first local West Nile virus case in Normandy, marking northward spread beyond usual southern regions. In 2025, **57 local cases** (16 severe, 2 deaths) have been reported. The event highlights the **virus's expanding range** in Europe; authorities are strengthening **mosquito control and public awareness** to prevent further spread.

Source: ECDC, Sante Publique France

Varicella – Bulgaria

On 22OCT Bulgaria reported over 16,000 chickenpox cases in 2025, mostly among children aged 5–9, prompting plans to add the **varicella vaccine to the national schedule in 2026**. While no deaths have occurred, nearly **300 hospitalizations** highlight the growing health burden. The Ministry of Health is urging early childhood vaccination and post-exposure immunization to curb further spread.

Source: MoH of the Republic of Bulgaria, Medianews

Mpox Clade Ib – Netherlands

The Netherlands has now reported **six cases** of **mpox Clade Ib**, including **five newly confirmed infections** linked to a **sex club frequented by men who have sex with men (MSM)**. All cases had **no recent travel history**, suggesting **local transmission**. Health authorities have reinforced **contact tracing and vaccination efforts** through the **Municipal Public Health Services (GGD)** for MSM and transgender individuals at higher risk, aiming to prevent further spread and reduce illness severity.

Source: RIVM

Meningococcal Meningitis – UK

Two University of Brighton students were hospitalized with **Neisseria meningitidis** and are recovering. The **UK Health Security Agency (UKHSA)** confirmed both cases on 24 Oct and administered **antibiotic prophylaxis** to all close contacts. No further cases have been reported, and precautionary measures are in place. Authorities classify the situation as **contained**, with **low risk to the wider community**. Source: UKHSA

Anthrax – Bulgaria

A **case of anthrax** was confirmed on **23 October 2025** at a livestock farm in **Slavyanovo, Harmanli Municipality (Southern Bulgaria)**, affecting a herd of 200 sheep and 100 cattle. Authorities have initiated **animal vaccination, disinfection, and movement restrictions** in the area. The case is believed to be **isolated**, with **no human infections reported** so far.

Source: NewsMedia

Diphtheria – Lithuania

A fatal imported case of diphtheria was reported in Lithuania in a **non-EU traveller** who developed symptoms before entry. Over **60 close contacts** received vaccination and prophylaxis, and **no further spread** has been detected. The **public risk remains very low** due to strong national **immunisation coverage and rapid response**. Source: Newsmedia

Other Infectious Disease Outbreaks – Americas

bluedot

World Health Organization

Measles – USA

As of **4 November 2025**, the **USA** has reported **1,681 confirmed measles cases** across **42 jurisdictions** and among **23 international visitors** — the highest number since 2019. A total of **44 outbreaks** were identified, with **87%** of all cases outbreak-associated, compared with **16 outbreaks in 2024**. Children remain the most affected: **66% of cases** occurred in individuals under 20 years old, and **92%** were **unvaccinated or of unknown vaccination status**. Overall, **12% of patients were hospitalized** (notably 22% of those under five), and **three deaths** have been confirmed, underscoring ongoing gaps in vaccination coverage and outbreak control.

Source: JAMA, CIDRAP, CIDRAP, CDC

Heartland Virus — USA

On **15 Oct 2025**, the **Missouri Department of Health and Senior Services** confirmed its first human Heartland virus case of 2025 in Greene County. The patient, who fell ill on 2 May 2025, **was hospitalized and has recovered.** Fewer than 70 cases have been reported nationwide since 2009, though the true burden is likely higher. Authorities urge **tick-bite prevention** during outdoor activities. **Source:** DHSS

Chikungunya — USA

On **14 Oct 2025**, the New York State Department of Health (NYSDOH) confirmed its **first locally acquired chikungunya case**, a 60-year-old woman from Long Island with **no travel history**, indicating local mosquito transmission. The secondary vector (**Aedes albopictus**) is established in the region, creating conditions for sporadic seasonal spread.

Source: NYSDOH

Cutaneous Anthrax – Peru

Six human cases of cutaneous anthrax linked to sick livestock have been confirmed in Cañete. Authorities have launched livestock vaccination, surveillance, and public education campaigns. The outbreak is localized with low public risk, though continued vigilance is advised for animal handlers. **Source:** Newsmedia

Histoplasmosis – Brazil

An outbreak of histoplasmosis in the **Santa Rita de Cássia Hospital** with **128 suspected cases and three remain hospitalized**. Investigations suggest **environmental exposure** to *Histoplasma capsulatum* spores, likely from contaminated dust or ventilation systems. Authorities are conducting environmental inspections, antifungal treatment and surveillance to prevent further hospital-associated spread. Source: SESA

Arboviral Diseases – Panama

Panama is experiencing concurrent outbreaks of Oropouche virus and **dengue**. A total of **613 Oropouche cases** have been confirmed—the first outbreak since 1989—mainly in Darién and Panamá Este, with **one death** and **six neurological cases** reported. Meanwhile, **13,844 Dengue cases** (**95 severe**, **23 deaths**) have been recorded nationwide, driven by co-circulating **DENV-1–4**, predominantly **DENV-3**. Health authorities have reinforced **vector control, surveillance, and public education** to curb transmission and prevent severe outcomes.

Source: Ministerio de Salud, Ministerio de Salud

Mpox Clade II – USA

California, New York, and Texas report ongoing mpox Clade IIb activity, with **sustained clusters among MSM** and some heterosexual transmission. Vaccination uptake remains LOW outside high-risk populations. **Source:** CDPH

Screwworm Myiasis – Honduras

Honduras has confirmed nearly 200 human cases of screwworm infestation across all 18 departments, with **older adults most affected**. The outbreak follows widespread animal infections. The **New World screwworm fly** infects open wounds, causing severe tissue damage. Authorities are conducting **vector control, livestock surveillance and sterile fly releases** to curb the spread. **Source:** WAHIS

Dengue – Cuba

Cuba has reported 9,602 dengue cases, **115 severe infections**, and **three deaths** (CFR 0.03%), with **DENV-2, DENV-3, and DENV-4** circulating. The **incidence rate** stands at **87.8 per 100,000 population**, reflecting continued widespread transmission across at least six provinces. Ongoing **vector control and community awareness campaigns** aim to curb infections, though **underreporting and healthcare shortages** remain key challenges. **Soure:** PAHO

Meningococcal Disease – Brazil

An outbreak of **meningococcal disease** has been declared in **Pelotas (Rio Grande do Sul)**, with **serogroups C and Y** detected locally. The state has reported **62 cases and 8 deaths** this year, exceeding 2024 totals. Authorities are conducting **MenACWY booster campaigns** for children and teens, and enhancing **surveillance and prophylaxis** to curb spread. Persistent multi-serogroup activity highlights **immunity and coverage gaps** despite vaccine availability.

Source: CENTRO ESTADUAL DE VIGILÂNCIA EM SAÚDE

Other Infectious Disease Outbreaks – Asia

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World Health Organization

Hand, Foot and Mouth Disease – India

A surge in suspected HFMD cases has been reported in **Assam**, primarily among **young children** attending schools and daycare centers. Hospitals in **Guwahati** note a steady rise over the past month, with some cases showing **reinfection and increased symptom severity**. The illness is **highly contagious but usually mild**, spreading through close contact and contaminated surfaces. Health experts urge **isolation of sick children, enhanced hygiene, and school-level awareness measures** to curb transmission.

Source: Medianews

Scrub Typhus – Thailand

Thailand has reported over 7,000 scrub typhus cases and six deaths this year, with most infections in the **northern and northeastern provinces** (Chiang Mai, Chiang Rai, Mae Hong Son, Tak, and Ubon Ratchathani). The rise coincides with the **cool season**, when outdoor activities and farming increase exposure to infected chigger mites. Health authorities urge preventive measures such as **protective clothing, insect repellent, and early care for fever**, as untreated cases can lead to severe complications.

Source: Medianews

Vaccine-Derived Poliomyelitis – Laos

A case of circulating vaccine-derived poliovirus type 1 (cVDPV1) has been confirmed in **Savannakhet Province**, marking **Laos' first detection since 2016**. The infected infant developed paralysis on 3 September 2025. Investigations are ongoing to trace the source and assess the extent of circulation. Low vaccination coverage in **remote rural areas** poses a risk for undetected spread. Authorities have launched **contact tracing and surveillance**, with **targeted immunization campaigns** expected to reinforce protection and prevent further transmission.

Source: Polioeradiction

Meningococcal Disease – Vietnam

Vietnam issued a **national advisory** after a rise in **meningococcal disease (MenB)** cases, mainly among adolescents. **38 confirmed cases** have been reported in 2025, with sharp increases in both northern and southern regions. The disease spreads through close contact and can be fatal within 24 hours without prompt care. Authorities are urging **vaccination, awareness, and surveillance**, especially in crowded settings like schools and dormitories.

Source: Medianews

Dengue – South Asia (Pakistan & Bangladesh)

Dengue activity remains intense across South Asia, with **Pakistan** reporting over **12,000 suspected infections** in Sindh (mainly Karachi and Hyderabad) amid poor drainage and post-monsoon flooding, overwhelming hospitals. In **Bangladesh**, more than **79,000 cases and 315 deaths** have been recorded—one of the country's **worst outbreaks on record**, concentrated in Dhaka. Despite fumigation and awareness campaigns, **rainfall, urban crowding and weak vector control** continue to sustain transmission across the region.

Source: Medianews, Directorate General of Health Services (DGHS)

Severe Fever with Thrombocytopenia Syndrome (SFTS) — Thailand

Thailand's DDC confirmed two **fatal SFTS cases confirmed** in Phetchabun Province, linked to **infected dog ticks (Rhipicephalus sanguineus)** — the first fatal cluster in Thailand. Both patients had close contact with domestic dogs; **16 positive ticks** detected near their homes. Outbreak contained, but findings expand the known range of this emerging tick-borne virus in Southeast Asia. Authorities urge tick-bite prevention, pet tick control and prompt reporting of febrile illness.

Source: Thai *Department of Disease Control*

Mpox Clade II – Australia

As of November 2025, Australia has reported **215 mpox cases**, with **Victoria (88)** and **New South Wales (65)** most affected. The majority of cases (95%) are among **men aged 25–39 years**, cMpox Clade II – Australiaonsistent with global transmission trends. No deaths have been reported. Transmission remains mainly localized in **urban centers**, and public health authorities continue **testing, vaccination, and awareness efforts** targeting at-risk groups. Source: ATAGI

Chikungunya – Hong Kong

Three locally acquired chikungunya cases have been confirmed in Hong Kong — the first recorded local transmission. The patients, from Wong Tai Sin and Kwai Tsing, had no travel history, suggesting **limited local mosquito-borne spread.** Authorities have intensified vector control and community surveillance with ongoing genome testing and cross-border coordination. Overall risk remains low. Source: CHP, CHP

Measles – New Zealand

New Zealand has reported **18 measles cases nationwide.** 17 individuals are no longer infectious. Authorities warn that the **outbreak is ongoing** and expect additional cases. Residents are urged to **check vaccination status**, avoid contact if unwell and seek medical advice if symptoms develop. Source: MOH

Other Infectious Disease Outbreaks – Asia/Middle East

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Middle East Respiratory Syndrome (MERS-CoV) — Multi-country

No new MERS-CoV cases have been reported since 6 October 2025.

As of 3 November 2025, a total of **12 cases (3 deaths)** have been recorded in **Saudi Arabia** this year. Globally, since **April 2012**, there have been **2,640 confirmed cases**, including **958 deaths**. MERS activity remains confined to the **Arabian Peninsula**, with **sporadic zoonotic transmission** linked to **dromedary camels**. The **risk to the EU/EEA population** remains **very low**, as no sustained human-to-human transmission has been observed.

Source: ECDC

Measles – Israel

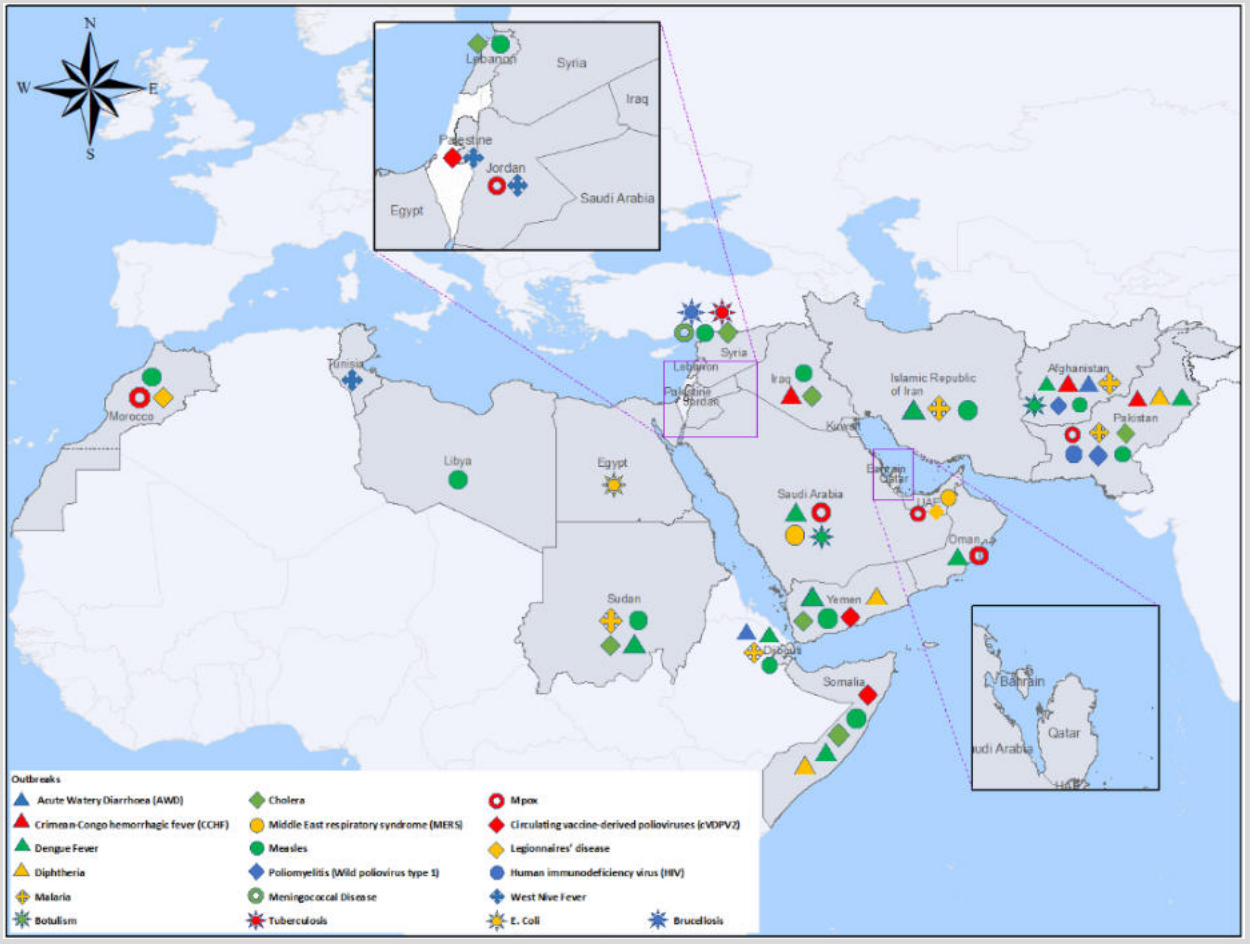
As of 9 NOV, Israel's **measles outbreak has caused nine child deaths**, including a **7-year-old boy from Jerusalem** with underlying health issues who had received one vaccine dose. **Sixteen patients remain hospitalized**, eight in intensive care. Transmission continues in ultra-Orthodox communities in **Jerusalem, Beit Shemesh, Bnei Brak, Harish, Modiin Illit, Nof HaGalil**, and nearby cities. The **Ministry of Health** urges immediate medical care for suspected cases and has expanded **early vaccination** and outreach programs. Coverage has risen sharply—**up 500–600% in Jerusalem and Beit Shemesh**—but immunity gaps persist. **Medium concern** due to ongoing pediatric deaths and community spread.

Source: Israel MOH reports, Dashboard

Severe Fever with Thrombocytopenia Syndrome (SFTS) - South Korea

As of early November, **223 cases of SFTS** have been reported in 2025 — the **highest in five years**, mainly among **elderly farmers**. The virus spreads via **tick bites** during outdoor work. Authorities urge the public to **use repellents**, **avoid tick-prone areas** and seek prompt care for fever or fatigue after outdoor exposure.

Source: KDCA



Source: EMRO

Glossary

Abbreviation	Meaning
AFR	WHO African Region
AFRO	WHO Regional Office for Africa
AMR	Region of the Americas
ARI	Acute Respiratory Infection
CDC	Centers for Disease Control and Prevention
CEPI	Coalition for Epidemic Preparedness Innovations
CHIKV	Chikungunya virus
CIDRAP	Center for Infectious Disease Research and Policy (University of Minnesota)
CHP	Center for Health Protection (Hong Kong SAR)
CCHF	Crimean-Congo Hemorrhagic Fever
CVDPV1 / cVDPV2 / cVDPV3	Circulating vaccine-derived poliovirus
CRF/CFR	Case Fatality Rate
DENV	Dengue virus
DON	WHO Disease Outbreak News
DRC	Democratic Republic of the Congo
ECDC	European Centre for Disease Prevention and Control
EEE / EEEV	Eastern Equine Encephalitis virus
EMR	Eastern Mediterranean Region
EMRO	WHO Regional Office for Eastern Mediterranean
EW	Epidemiological Week
EU / EEA	European Union / European Economic Area
FHP	Force Health Protection
GPEI	Global Polio Eradication Initiative
HCM	Healthcare worker
HPAI / LPAI	Highly / Low Pathogenic Avian Influenza
H9N2 / H5N1 / H1N1	Influenza A virus subtypes
IEDCR	Institute of Epidemiology, Disease Control and Research (Bangladesh)
ILI	Influenza-like Illness
JE	Japanese Encephalitis
LP.8.1 / XFG / NB.1.8.1	SARS-CoV-2 genetic lineages under monitoring
MOH / MOHP	Ministry of Health / Ministry of Health and Population
MVA-BA	Modified Vaccinia Ankara (mpox vaccine)
MSM	Men who have sex with men
NiV	Nipah virus
Nirsevimab	Long-acting monoclonal antibody for RSV prevention in infants
OCV	Oral Cholera Vaccine
PAHO	Pan American Health Organization
PEP	Post-Exposure Prophylaxis
PHAC	Public Health Agency of Canada
PHEIC	Public Health Emergency of International Concern
POWV	Powassan virus
RABV	Rabies virus
RSV	Respiratory Syncytial virus
SAR-CoV-2	Severe Acute Respiratory Syndrome Coronavirus 2
SEAR	South-East Asia Region
SEARO	WHO Regional Office for South-East Asia
SitRep	Situation Report
VEE / VEEV	Venezuelan Equine Encephalitis virus
VHF	Viral Hemorrhagic Fever
VPD	Vaccine-Preventable Disease
WASH	Water, Sanitation and Hygiene
WNV	West Nile virus
WHO	World Health Organization
WPRO	WHO Regional Office for the Western Pacific
ZIKV	Zika virus