

The objective of the bulletin is to report new heath events occurring outside and inside EpiSouth area that have potential implications on EpiSouth population. It does not aim to provide an exhaustive review of international alerts. Since 2006, The French public health Institute (InVS) is issuing an online epidemic intelligence bulletin (Bulletin hebdomadaire International - BHI). In order to limit duplication and to make this already verified information available to a larger audience, information relating to health events of interest for EpiSouth population are translated and integrated in the relevant e-web sections. Despite all verifications, WP6 team would not be responsible for potential errors. The recipient is responsible for the cautious use of this information. Neither the European Commission nor any person acting on behalf of the Commission is liable for the use that may be made of the information contained in this report. Data maps and commentary used in this document do not imply any opinion of EpiSouth countries or its partners on the legal status of the countries and territories shown or concerning their borders.

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		INDEX e-WEB	n°110						
■ A(H	5N1) Huma	n influenza – none							
• A(H	<ul> <li>A(H5N1) Avian influenza – none</li> </ul>								
■ "OU"	"OUTSIDE" Events:								
	<ul> <li>Polio – Tajikistan</li> </ul>								
	Dengue – Saudi Arabia, Sudan								
	<ul> <li>Measles – West and Central Africa</li> </ul>								
- "INS	<ul> <li>"INSIDE" Events:</li> </ul>								
	Rabies -	- Italy							
Location:	World	Event: A(H5N1) – Human	Comments						
No hu	ıman cases	of A(H5N1) reported this week							
Location:	World	Event: A(H5N1) – Epizootic	Comments						
No av	ian influenz	a outbreak reported this week							

REPORT OF NEW HEALTH EVENTS OCCURING <u>OUTSIDE</u> THE EPISOUTH AREA (not occurring in one or several EpiSouth countries)

Area: Tajikistan Event: Polio	<u>Comments</u>
<ul> <li>As of 21 April 2010, Tajik health authorities had reported 120 cases of acute flaccid paralysis (AFP) to WHO. The majority had onset of paralysis within the previous 2 weeks.</li> <li>All cases were from the south-west, bordering Uzbekistan and Afghanistan, in the provinces of Khatlon and of the capital Dushanbe (map 1):</li> <li>the vast majority of the cases were children below 5 yrs of age, 10 children died.</li> </ul>	<ul> <li>These are the first cases of poliovirus in the WHO European region since it was certified polio-free in 2002.</li> <li>In Tajikistan, the last clinically confirmed polio case was in 1997; the last biologically confirmed polio case was in 1991. Reported OPV3 coverage nationwide was 87% in 2008 (last available data).</li> </ul>
<ul> <li>Poliovirus wild type 1 was isolated in diagnostic specimens from 7 of the 120 cases.</li> <li>To date, Uzbek authorities have reported 3 cases at the frontier with Tajikistan.</li> <li>Map 1. Affected provinces, Tajikistan.</li> </ul>	<ul> <li>The current situation may be explained by problems in vaccination coverage in the Central Asian region. It may also reflect weak AFP surveillance in bordering countries where polio is endemic (Afghanistan for instance).</li> </ul>
Uzbekistan Afghanistan	<ul> <li>Note the proximity of the Indian subcontinent which is - to date - the most affected region in terms for autochthonous polio cases in addition to frequent exportation of cases in the region.</li> <li>The risk of spread to neighbouring countries cannot be excluded.</li> <li>At this stage, the risk of spread to the rest of the WHO European region remains limited considering the high vaccination coverage in the region despite the existence of minor sub-national gaps in population immunity.</li> </ul>

## REPORT OF NEW HEALTH EVENTS OCCURRING <u>OUTSIDE</u> THE EPISOUTH AREA (not occurring in one or several EpiSouth countries)

Location: Saudi Arabia, Sudan Event: dengue	<u>Comments</u>
<ul> <li>Saudi Arabia</li> <li>Since the beginning of 2010, 363 cases of dengue fever have been recorded in Jeddah, Saudi Arabia (cf. map 2).</li> <li>94 of them were recorded in the past week (28 for the same week in 2009).</li> <li>For the same period, the ministry of health had reported 339 cases in 2009.</li> <li>Local authorities report that dengue has continued, despite control and prevention efforts, to spread in southern districts of Jeddah.</li> <li>Since the first fatal case of dengue hemorrhagic fever (DHF) in Jeddah in 1993, Saudi Arabia reported 3 major epidemics:</li> <li>a DEN-2 epidemic in 1994 with 469 cases of dengue, 23 cases of DHF, 2 cases of dengue shock syndrome (DSS) and 2 deaths;</li> <li>a DEN-1 epidemic in 2006 with 1269 cases of dengue, 27 cases of DHF, 12 cases of DSS and 6 deaths;</li> <li>a DEN-3 epidemic in 2008 with 775 cases of dengue, 9 cases of DHF, 4 cases of DSS and 4 deaths.</li> </ul>	<ul> <li>The occurrence of dengue fever in Saudi Arabia and Sudan is not unexpected.</li> <li>Both have previously reported outbreaks at this time of the year (cf. e-WEB n°93, 103).</li> <li>Jeddah is a Hajj entry point as well as the largest commercial port in the country, and the host of the busiest airport in the western region.</li> <li>Large numbers of people coming</li> </ul>
<ul> <li>Sudan</li> <li>At the beginning of 2010, the Eastern Sudan Red Sea and Kassala states (cf. map 3) had reported increases in the number of dengue cases.</li> <li>In the Red Sea State, between 10 and 16 April 2010, the total number of dengue fever (DF) cases was 149 with 1 fatality. The number of dengue cases reported has decreased over the past 2 weeks.</li> <li>The total count as of 16 April 2010 is:</li> <li>2271 cases in the Red Sea state (of which nearly 500 in Port Sudan), including 10 deaths.</li> </ul>	from high-burden dengue countries such as Indonesia, Malaysia and Thailand pass through Jeddah, in addition to visitors from the dengue-affected countries of the region. Therefore, the situation will be followed up thoroughly.

- 13 in Kassala state, including 1 death. From the total number of cases, 4 cases have history of visiting the Red Sea state.
- Vector control activities and intensive health campaigns are ongoing in both states.
- DEN-3 has been isolated, suggesting it could be the circulating strain.
- In Sudan, a large outbreak was attributed to Dengue virus type 1 and 2 in 1985. Another epidemic caused 75 fatalities in the state of South Kordofan in 2005. The most recent dengue outbreak in Sudan was described in Port Sudan in May 2009 (cf <u>e-WEB n°62)</u>.
- The current epidemic may be attributable to dengue serotype 3. If this is confirmed, it may be the 1st description of DEN-3 in Sudan. This variant is thought to have originally spread from the Indian subcontinent into Africa in the 1980s



## Map 3. Red Sea (Port Sudan) and Kassala states, Sudan.

cases.

**Exportation** 

excluded.

The observed case fatality ratio

in Sudan (0.44% in the Red Sea

state) exceeds the expected global case fatality estimated at

0.5 per 1000 cases. It may reflect

an under-reporting of clinical

of

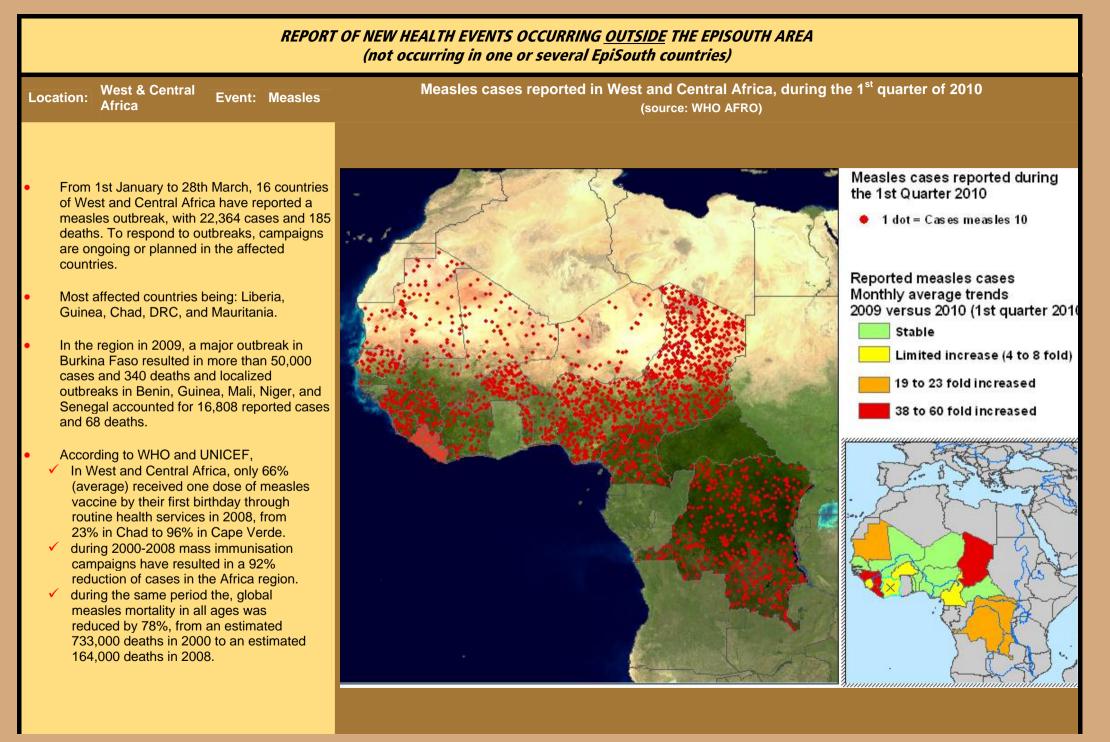
neighbouring countries (where

the vector is present) cannot be

cases

to





## REPORT of NEW HEALTH EVENTS OCCURING <u>INSIDE</u> THE EPISOUTH AREA (Occurring in one or several EpiSouth countries)

	(occurring in one of several episodati countries)										
	Location: Italy	Ever	nt: Rabi	es			<u>Comments</u>				
•	In 2008, Italian health including 2 foxes in the										
ŀ	From October 2008 til diagnosed in the area Veneto and in the aut rabies cases suggests implemented, the disea	a: in the onomous that desp									
<ul> <li>Isolated strains corresponded to strains that are known to circulate in Eastern Europe.</li> <li>Map 4 shows the geographical distribution of rabies cases in 2010, as</li> </ul>							Before the detection of animal cases of rabies in October 2008, no cases had been reported for 11 years in				
	of 21 April 2010.			Italy.							
	<ul> <li>Since the beginning and domestic anim</li> <li>Most of the 160 cas the most frequently</li> </ul>	als (8 cats ses record	•	To date, no human cases of rabies in residents or visitors of the north Italian region have been reported.							
•	Oral immunisation of fo the autonomous provin	oxes has s ces of Tre	•	The risk of rabies following animal bite in this region or from inadequately vaccinated domestic							
	Table 1. Distrib (Octo	ution of a ober 2008			ICE		animals coming from this area should be taken into account.				
	Region	2008	2009	2010	Total						
	Friuli Venezia Giulia	9	35	12	56						
	Veneto	-	33	145	178						
	Autonomous province of Trento			2	3						
	Total	9	- 68	3 160	237						
	Map 4: Cases of animal rabies in Italy, 1 Jan – 21 April 2010.										
			$\sim$	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Austria						
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