



ARMED FORCES HEALTH SURVEILLANCE DIVISION

INTEGRATED BIOSURVEILLANCE BRANCH

Health Surveillance Update
11 AUG 2026

POC:

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DHA Public Health AFHSD – Integrated Biosurveillance (IB) Branch Health Surveillance Update 05–11 AUG 2026



The IB Health Surveillance Update (HSU) is a weekly report of health events and disease outbreaks monitored by the IB Branch.

Executive Summary

A multistate salmonellosis outbreak (*Salmonella Javiana*) linked to fresh jalapeño peppers has been reported in the **United States**, with 345 cases (36 hospitalizations; no deaths) across 27 states since 19 JUNE. Since SEPTEMBER 2025, 9.5k cholera cases (89 deaths) have been confirmed from 9 provinces in **Mozambique**. **Iraq** has reported 313 confirmed Crimean-Congo hemorrhagic fever cases (24 deaths) during 2026. Vibriosis cases have increased in **Germany** during 2026 (45) compared to the same period in 2024 and 2025. **Sri Lanka** continues to experience an increase in dengue cases (88k) during 2026, a 151% increase compared to the same period in 2025. **Nicaragua** has reported 402 chikungunya cases during 2026, with more than half reported in the week ending 01 AUG.

HSU Health Events

Geographic Combatant Command	Country	Event
USNORTHCOM	United States	Cyclosporiasis
	United States	Salmonellosis
	Other events	
USAFRICOM	Mozambique	Cholera
	USAFRICOM	Ebola virus disease
	Other events	
USCENTCOM	Iraq	Crimean-Congo hemorrhagic fever
	Other events	
USEUCOM	Germany	Vibriosis
	Other events	
USPACOM	Sri Lanka	Dengue
	Other events	
USSOUTHCOM	Nicaragua	Chikungunya
	Other events	

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USNORTHCOM Health Events of Interest

United States – Cyclosporiasis:

Between 01 MAY and 04 AUG, the U.S. Centers for Disease Control and Prevention (CDC) has reported 10,468 (+3.7k) locally acquired cyclosporiasis cases in the United States, with 12k additional cases that need laboratory confirmation and/or further analysis to determine where the disease was acquired (Figure 1). Michigan has reported the most cases, followed by Indiana, North Carolina, and Ohio. Symptom onset ranged between 01 MAY and 28 JULY. As of 06 AUG, the U.S. Food and Drug Administration (FDA) is investigating seven (+1) cyclosporiasis outbreaks in the United States, with one linked to iceberg lettuce and the others not currently linked to a product.

As of 05 AUG, the U.S. CDC has reported at least 6,358 confirmed locally acquired cyclosporiasis cases (+4.4k; 278 [+180] hospitalizations; 2 deaths) that have been linked to iceberg lettuce in 15 (+6) states (Figure 2). The number of cases in the outbreak is likely underreported, and the outbreak may not be limited to states with known illness. On 17 JULY, Taylor Farms de Mexico announced they were voluntarily removing iceberg lettuce sourced from Central Mexico from the U.S. market. This includes Taco Bell locations in at least nine states; Taco Bell is no longer using the contaminated lettuce. Additionally, iceberg lettuce products distributed from Taylor Fresh Foods from 29 JUNE to 16 JULY have been recalled from 27 states and Marketside-brand iceberg lettuce products have been recalled from select Walmart stores in 15 states. On 06 AUG, the Michigan Department of Health and Human Services lifted its warning on lettuce and salad greens and advised residents that they could resume routine guidance for consuming the produce, following a reduction in cases and a downward trend in diarrhea-related emergency department visits. According to the U.S. CDC, cyclosporiasis cases peaked on 09 JULY (462). Since 20 JULY, <10 cases have been reported daily. (U.S. FDA)

Figure 1. Locally Acquired Cyclosporiasis Cases by State, United States, 01 MAY to 27 JULY

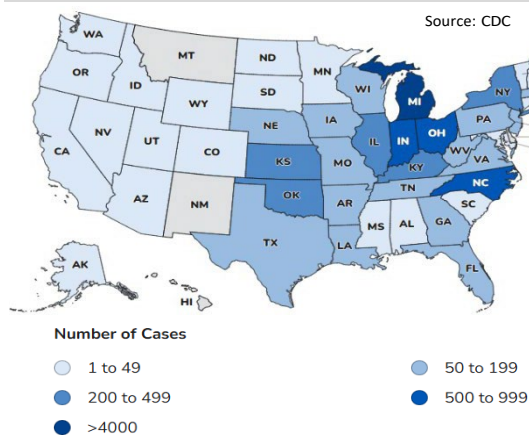
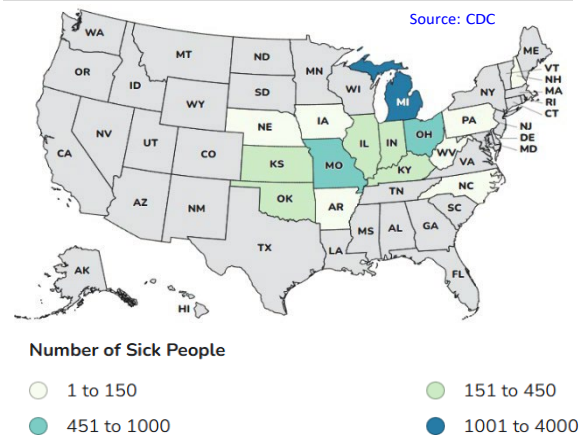


Figure 2. Cyclosporiasis Cases Linked to Iceberg Lettuce by State, United States, 22 JUNE to 30 JULY



United States – Salmonellosis:

As of 05 AUG, U.S. CDC, FDA, and public health officials reported a **multistate outbreak of *Salmonella* Javiana infections linked to fresh jalapeño peppers, with 345 cases (36 hospitalizations; no deaths) across 27 states since 19 JUNE**. An epidemiological traceback investigation identified the source of the outbreak to be jalapeño peppers imported from Sinaloa State, Mexico, and distributed by Coast Citrus Distributors Inc., San Diego, California, to restaurants and wholesale food service companies nationwide. Colorado and Minnesota have reported the most cases (110 each), followed by Illinois (30) and Kansas (13). See Figure 3 for all states reporting salmonellosis cases linked to jalapeños, with symptom onset dates ranging from 19 JUNE to 20 JULY, and Figure 4 for symptom onset date. **Of the 191 cases interviewed, 93% (177) reported eating at a Mexican-style restaurant, including Chipotle Mexican Grill and QDOBA, in the week prior to symptom onset**. Between 14 JUNE and 14 JULY, 27 illness clusters were linked to Chipotle and QDOBA locations across 7 states, with commonly reported ingredients including avocado, cilantro, jalapeño peppers, and red onion. Isolates from cases were confirmed to be genetically related by whole genome sequencing; 343 of 345 samples displayed no predicted antimicrobial resistance.

One isolate carried predicted resistance to multiple drug classes (ampicillin, ceftriaxone, streptomycin, sulfisoxazole, and trimethoprim-sulfamethoxazole) as well as nonsusceptible to ciprofloxacin, while a second isolate had predicted resistance to azithromycin. Coast Citrus Distributors issued a product recall at the request of the FDA, Chipotle changed jalapeño distributors on 20 JULY, and QDOBA has stopped using jalapeño peppers since 28 JULY. **U.S. CDC and FDA do not consider these establishments to pose an ongoing consumer risk.** On 09 AUG, Taylor Fresh Foods, also began recalling some products that include jalapeños due to potential salmonellosis contamination, including salsas, guacamole, dips, burritos, and pico de gallo that were sold across multiple grocery stores; no reported cases have yet been linked to their products. (U.S. CDC, U.S. FDA)

Figure 3. Salmonellosis Cases Linked to Jalapeños, United States, 19 JUNE to 20 JULY 2026

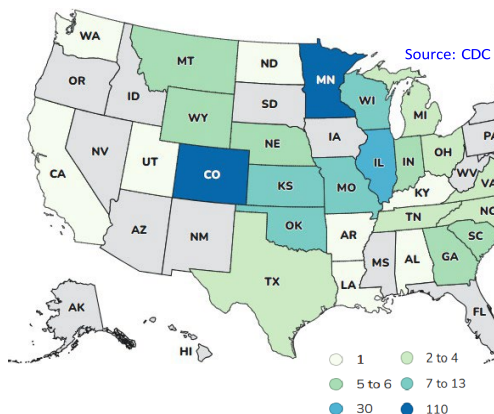
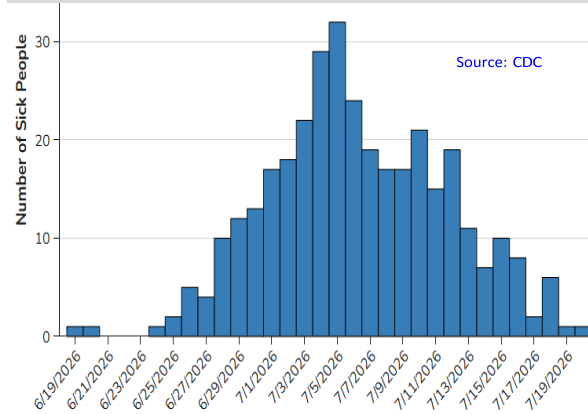


Figure 4. Symptom Onset Dates of *S. Javiana* Outbreak, United States, 19 JULY to 20 JULY 2026



S. Javiana is a predominant *Salmonella* serovar in the United States and accounts for ~7% of all salmonellosis cases. Symptoms typically include abdominal cramps, diarrhea, and fever, usually occurring within 12 to 74 hours after ingestion and last 4 to 7 days. (*Microbiol Resour Announc*, U.S. CDC, U.S. FDA)

Other Events:

- **GLOBAL**, >47k measles cases (44 deaths) across the region of the Americas as of 18 JULY; epidemiological alert issued 07 AUG
- **GLOBAL**, 1.4 million dengue cases through 18 JULY across the region of the Americas; decrease compared to same period in 2025 and 5-year average (61% and 67%, respectively)
- **GLOBAL**, Study of *Escherichia coli* infection in blood from 26 countries from 2011 to 2023 found 34% of isolates were multidrug-resistant
- **CANADA**, First locally acquired West Nile virus (WNV) disease case in Toronto, Ontario Province, during 2026
- **MEXICO**, 185 dengue cases in Baja California Sur during 2026; 213% increase compared to same period in 2025
- **MEXICO**, 946 dengue cases in Sonora State during 2026; highest in country
- **MEXICO**, >5 million sterile flies released in Chihuahua State to contain New World screwworm (NWS) disease spread as of 02 AUG
- **MEXICO**, First human NWS screwworm case in Tlaxcala State, as of 06 AUG
- **MEXICO**, Increase in Rocky Mountain spotted fever cases in Chihuahua (67) and Sonora (48) states during 2026 compared to 38 and 32, respectively, in same period in 2025
- **MEXICO**, Increase in shigellosis cases in Nuevo León (49) and Tamaulipas (39) states during 2026 compared to 14 and 25, respectively, in same period in 2025
- **UNITED STATES**, Nine vibriosis cases (five deaths) in Louisiana during 2026; 29% increase compared to previous 10-year average
- **UNITED STATES**, 14 vibriosis cases (2 deaths) in Florida during 2026
- **UNITED STATES**, 17 leprosy cases in Florida as of 23 JULY, with 81% in central Florida; 36 total cases in 2025
- **UNITED STATES**, 143 WNV disease cases across 23 states as of 04 AUG

- **UNITED STATES**, 3.1k *Candida auris* infection cases across 23 states as of 18 JULY; 3.3k in same period in 2025
- **UNITED STATES**, Avian influenza A(H5) and norovirus wastewater level increased “Low” and “Medium,” respectively, while measles decreased to “Not Detected,” as of 10 AUG
- **UNITED STATES**, Avian influenza A(H5) detected in wastewater in Portland, Maine, on 22 and 24 JULY, indicating presence of highly pathogenic avian influenza A(H5N1) virus; no human cases reported
- **UNITED STATES**, CDC study highlights invasive fungal infections as underrecognized healthcare threat as of 30 JULY; 450 cases between 2020 and 2024 (33% in-hospital mortality rate)
- **UNITED STATES**, Eight legionellosis cases in nursing home in Fairfield County, Ohio, as of 05 AUG
- **UNITED STATES**, FDA approved Moderna’s seasonal influenza vaccine, mFLUVISA, for adults aged ≥50 years as of 05 AUG
- **UNITED STATES**, First confirmed WNV disease case in Cache County, Utah, during 2026 as of 31 JULY
- **UNITED STATES**, First confirmed WNV disease case in Capital Region, Maryland, during 2026 as of 31 JULY
- **UNITED STATES**, First fatal WNV disease case in Kings County, California, during 2026 as of 03 AUG
- **UNITED STATES**, First human neuroinvasive La Crosse virus disease case in Clairborne County, Tennessee, as of 02 AUG; four total nationwide during 2026 (Alabama, North Carolina, and Ohio)
- **UNITED STATES**, Mpox clade II wastewater levels decreased from “Low” to “Not Detected” as of 05 AUG
- **UNITED STATES**, SARS-CoV-2 wastewater level increased from “Medium” to “High” as of 06 AUG
- **UNITED STATES**, Second and third locally acquired dengue cases in Palm Beach and Miami-Dade counties, Florida, respectively, as of 04 AUG; 52 total during 2026 (49 imported)
- **UNITED STATES**, Second fatal WNV disease case in California in Glenn County as of 04 AUG; 11 total in state compared to 5 during same period in 2025
- **UNITED STATES**, State’s first ever locally acquired dengue case in northern Virginia as of 04 AUG; two cases through 04 JULY
- **UNITED STATES**, Three imported Zika virus disease cases linked to travel to Fiji as of 04 AUG; Fiji currently not reporting cases
- **UNITED STATES**, Three tularemia cases during 2026 in Suffolk County, New York
- **UNITED STATES**, WNV detected in twice as many mosquitoes in New York City, New York, during 2026 compared to same period in 2025; 612 positive mosquito pools as of 25 JULY

USAFRICOM Health Events of Interest

Mozambique – Cholera:

As of 26 JULY, 9,553 confirmed **cholera** cases (+7.0k since IB’s last report on 10 FEB; 89 [+58] deaths; case fatality rate [CFR]: 0.9%) have been reported across 9 provinces in Mozambique since SEPTEMBER 2025. **Since the start of the outbreak, 80% of all cases were reported during 2026 (7.6k cases), a twofold increase compared to the same period in 2025 (>4.1k cases; 43 deaths).** Most cases (91%) have been reported in Nampula (>3.9k cases; 39 deaths), Tete (>2.9k; 33) and Cabo Delgado (1.1k; 8) provinces. Cases have also been reported in Sofala (921; 4 deaths), Manica (386; 3), Zambézia (146; 2), and Gaza and Maputo (1 each; no deaths) provinces, in addition to 1 case in Maputo City. In the past 2 months, 450 new cases (3 deaths) have been reported; however, as of 03 AUG, <10 new cases have been reported daily in the country, a decline associated with the end of the rainy season in APRIL.

According to the World Health Organization (WHO), Mozambique is facing its most severe cholera outbreak in 25 years, while also grappling with ongoing internal conflict that has resulted in a complex and multifaceted crisis with significant humanitarian implications, including high levels of internal displacement. In 2025, 5.8k cases (68 deaths) were reported from 8 provinces in the country. The outbreak is driven by inadequate water and sanitation infrastructure perpetrating sustained community transmission, in addition to extreme weather events such as flooding. To control the outbreak, the Ministry of Health (MOH) has urged the public to observe proper individual and collective hygiene measures. In MAY, the government announced that the country will receive ~6.8 million doses of oral cholera vaccine as part of the National Plan for the Elimination of Cholera (2025 to 2030), and preventative vaccination campaigns have since been conducted; preparations are ongoing for a second round in

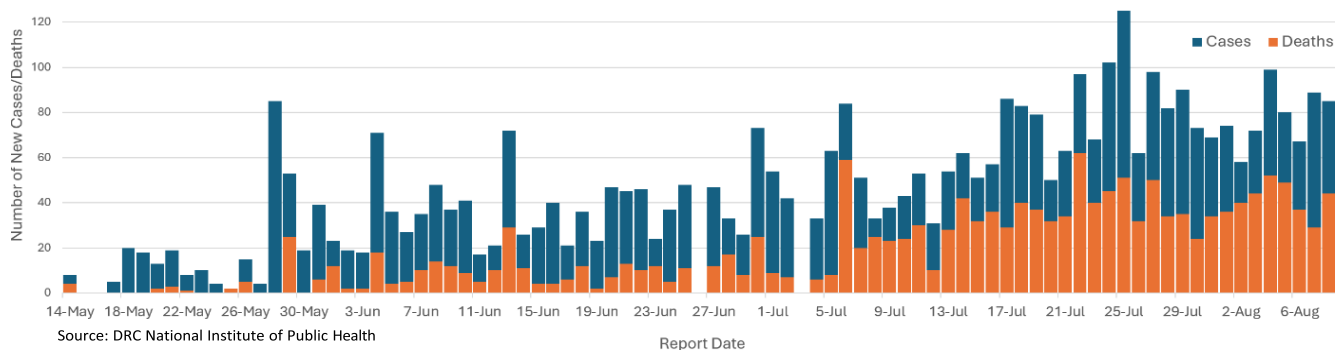
high-risk areas. (360 Mozambique, Africa CDC, BEACON, Club of Mozambique, Relief Web, RTP notícias, Travel Health Pro)

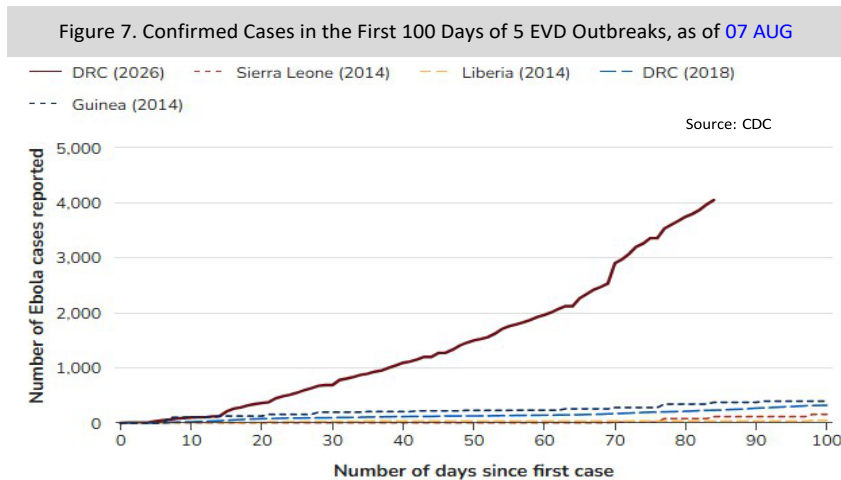
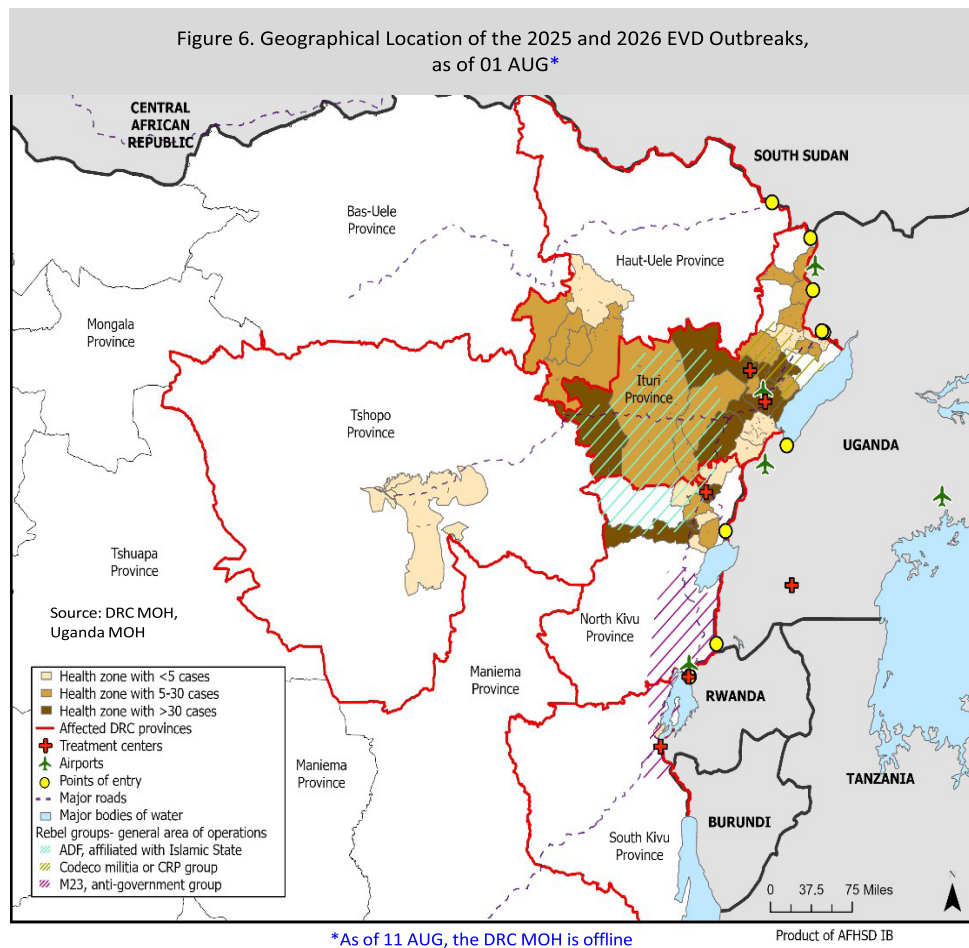
A 2024 study found that cholera cases vary geographically in Mozambique, with peak transmission occurring earlier in the year in the northern regions, such as Cabo Delgado and Nampula provinces, and central regions, including Manica, Sofala, and Zambézia provinces. The last cholera outbreak in the country occurred from 17 OCT 2024 to 20 JULY 2025 (4.4k cases; 64 deaths). Nampula was also the most affected province, accounting for 81% of cases. The Mozambican government aims to eliminate cholera as a public health problem by 2030 by ensuring communities have access to safe water and sanitation, as well as quality healthcare through coordinated, evidence-based multisectoral actions under the National Cholera Elimination Plan (PEC). According to WHO, there are currently three pre-qualified oral cholera vaccines: Dukoral, Euvichol-Plus, and Euvichol-S. These vaccines require two doses to fully protect an adult; however, since OCTOBER 2022, due to an ongoing global shortage of vaccines, only one-dose vaccine regimens are being used. On 22 OCT 2025, WHO pledged to donate ~3.5 million cholera vaccine doses to Mozambique to be administered as part of the PEC initiative. (Agência de Informação de Moçambique, All Africa, *BMJ Open*, Platforma)

USAFRICOM – Ebola Virus Disease (EVD):

DRC CASE REPORT: According to the DRC Ministry of Communication and Media, through 09 AUG (data last checked 0800 EST on 11 AUG), 4,381 (+633) confirmed EVD cases (2,011 [+354] confirmed deaths; CFR: 46%; Table 1; Figure 5) have been reported across at least 53 (+4) health zones (HZs) in Ituri (28), North Kivu (12), Haut-Uélé and Tshopo (6 each), and South Kivu (1) provinces. See Figure 6 for the geographical location of the current EVD outbreak in the DRC. Through 01 AUG, 17k contacts are under follow-up in Ituri (>10k), North Kivu (5.9k), Haut-Uélé (562), Tshopo (65), and South Kivu (55) provinces, and 708 cases have recovered. The current outbreak is the fastest-spreading EVD epidemic (Figure 7) and the second-largest on record, surpassing the 2018 Zaire ebolavirus outbreak in the DRC (3.4k cases); the 2014 to 2016 West Africa outbreak remains the largest, with >28k cases (11k deaths) across Guinea, Liberia, and Sierra Leone. The rapidly escalating outbreak coincides with other crises occurring in eastern DRC, including health risks, large-scale displacement, and persistent conflicts. On 05 AUG, the deputy medical director for Médecins Sans Frontières stated that containment efforts remained insufficient, as only 59% of contacts in Ituri Province were tracked and 90% of cases admitted to the Bunia treatment center had not been identified as contacts. As of 10 AUG, Africa CDC and partners are transitioning from conventional contact tracing to door-to-door case finding in the most affected areas; the shift is likely to increase the number of suspected cases reported. (Reliefweb, Reuters, Science, The Japan Times, U.S. CDC)

Figure 5. Daily EVD Confirmed Cases and Deaths, DRC, through 09 AUG





UGANDA CASE REPORT: According to the Uganda MOH, as of 28 JULY (data last checked 0830 EST on 07 AUG) 20 confirmed EVD cases (15 imported; 5 locally acquired; 2 deaths) have been reported in Uganda (Table 1). The Uganda MOH announced that the country is EVD free as of 28 JULY, following 42 days from the last Ugandan National case (discharged 16 JUNE); however, the last imported case in Uganda was discharged 16 JULY, and the 42-day countdown (twice the maximum incubation period) from that case will end ~27 AUG. (Reuters, WHO)

Table 1. 2026 EVD Outbreak Case Counts by Country, through 08 AUG*

Country	Area	Number of Health Zones Affected	Confirmed Cases	Confirmed Deaths	Contacts Under Follow up
DRC	Ituri Province	28	3,636	1,551	17,472
	North Kivu Province	12	470	315	
	Haut-Uélé Province	6	91	44	
	Tshopo Province	6	9	5	
	South Kivu Province	1	3	1	
France	Paris		1	0	5
Uganda	Kampala City		20	2	0
	Wakiso District				

Sources: DRC MOH, ECDC, Le Monde, The Independent, Uganda MOH

*As of 11 AUG, the DRC MOH website is offline. DRC provincial data was pulled from ECDC; contacts under follow-up could not be updated from the previous week

U.S. CITIZEN CASE REPORT: As of 18 JULY, seven asymptomatic American aid workers were placed under a mandatory 21-day precautionary quarantine at a U.S.-backed facility in Kenya following their deployment to an EVD-affected region in the DRC, in compliance with new travel protocols. (Medical Daily)

SUSPECTED CASES: On 06 AUG, DRC health authorities intercepted a ship traveling to Kinshasa Capital City after a passenger, who disembarked earlier, died on 25 JULY from symptoms consistent with EVD. The ship departed Kisangani, Tshopo Province, between 19 and 21 JULY, and traveled through Mongala Province, before being stopped in the Maluku Commune, Kinshasa. Health authorities deployed a mobile laboratory to screen all 300 passengers and crew aboard the vessel; tests were conducted on 7 individuals who presented with symptoms resembling malaria (fever and headaches), all of which were negative as of 07 AUG. (Radio France International, Reuters)

DIAGNOSTICS AND MEDICAL COUNTERMEASURES: On 06 AUG, Moderna initiated a Health Canada-approved Phase I trial of its mRNA-1469 vaccine for the Bundibugyo virus disease (BVD) variant, supported by up to \$50 million from the Coalition for Epidemic Preparedness Innovations (CEPI), while Africa CDC and CEPI launched a database of 45 African clinical trial units to accelerate local vaccine research. **On 07 AUG, the WHO Technical Advisory Group recommended prioritizing Ervebo, the only approved EVD vaccine for the Zaire strain, for randomized clinical trials to address the ongoing BVD outbreak.** As of 06 AUG, Africa CDC advised that the vaccine would be offered to individuals in Ituri and North Kivu provinces due to evidence showing zero deaths among vaccinated individuals, despite some of them experiencing symptoms. Additionally, the use of remdesivir would be expanded, following its successful deployment by Ugandan authorities in maintaining a 10% CFR and ultimately clearing the country of EVD. On 07 AUG, Gavi, the Vaccine Alliance, advised that stockpiled Ervebo doses are expected to be made available to support the Phase 3 evaluations alongside Gavi's \$40 million investment in BVD-specific candidates following WHO's recommendation. (Clinical Trials Arena, Turkish Radio and Television Corporation Afrika)

RISK ASSESSMENTS: As of 01 AUG, WHO assessed the overall public health risk posed by the current outbreak as “**Very High**” in the DRC, “**High**” in Uganda, “**High**” for countries with land borders to DRC and Uganda, and “**Low**” for the rest of the Africa Region and at the global level. As of 07 AUG, the European Centre for Disease Prevention and Control (ECDC) assessed the likelihood of EVD infection to be “**Low**” for individuals from the European Union/European Economic Area (EU/EEA) living in or travelling to affected areas and “**Very Low**” for individuals living in the EU/EEA. As of 07 AUG, the U.S. CDC assesses the overall risk of the EVD outbreak to the U.S. population and travelers is “**Very Low.**”

TRAVEL ADVISORIES: On 04 AUG, the U.S. CDC issued a “**Level 4 – Avoid All Travel**” travel health notice for Ituri and North Kivu provinces, DRC, a “**Level 3 – Reconsider Nonessential Travel**” travel health notice for Haut-Uélé and Tshopo provinces, DRC, and updated the “**Level 2 – Practice Enhanced Precautions**” travel health notice for Uganda and DRC provinces not affected by the current BVD outbreak. As of 07 AUG, the U.S. Department of State “**Level 4 – Do Not Travel**” advisories for DRC, South Sudan, and Uganda remain in effect. On 16 JULY, the U.S. Embassy in the DRC announced new travel restrictions which prevent U.S. citizens and nationals who have been in the DRC within a 21-day period from entering the United States via commercial aviation; **as of 29 JULY, U.S. citizens and nationals who have been present in Uganda or South Sudan (and not present in DRC) within 21 days of arrival in the United States must only enter through designated airports for enhanced screening.**

Other Events:

- **GLOBAL**, MARCH study suggests that *Anopheles stephensi* mosquitoes across the Horn of Africa and Yemen are part of lineage closest to Afghanistan and Pakistan populations and entered the region via the port of Djibouti
- **GLOBAL**, Study of *E. coli* infection in blood from 26 countries from 2011 to 2023 found 34% of isolates were multidrug-resistant
- **CENTRAL AFRICAN REPUBLIC**, 720 cholera cases (46 deaths) since 26 JUNE
- **CHAD**, 55 cholera cases (6 deaths; CFR: 11%) in capital city N'Djamena, since 19 JULY
- **DRC**, 419 cholera cases (30 deaths) across 4 health zones in Kwilu Province since JUNE
- **DRC**, >40k cholera cases during 2026; 52% from North Kivu and South Kivu provinces
- **DRC**, AUGUST study identified endemic dengue transmission along the DRC-Angola border
- **KENYA**, U.S. Embassy in Nairobi issued dengue alert on 03 AUG due to increased activity in coastal Kenya, and Garissa and Wajir counties
- **MAYOTTE**, 302 malaria and 43 mpox cases (66 and 23 locally acquired, respectively) during 2026
- **NIGERIA**, 398 cholera cases (16 deaths) in Bauchi State as of 31 JULY; outbreak declared on 01 AUG
- **REUNION**, 221 leptospirosis cases (2 deaths) as of 23 JULY
- **SOUTH AFRICA**, 125 confirmed typhoid fever cases across 8 provinces during 2026; 56% in Gauteng Province
- **UGANDA**, Two Crimean-Congo hemorrhagic fever (CCHF) cases (one death) in Yumbe District as of 08 AUG

USCENTCOM Health Events of Interest**Iraq – CCHF:**

As of 06 AUG, 313 (+51 since IB's last report on 23 JUNE) confirmed **CCHF** cases (24 deaths) have been reported in Iraq during 2026. As of 15 JULY, cases have been reported across 18 governorates, including central, northern, and southern Iraq. Most cases have been reported in Dhi Qar Province (119 cases; 9 deaths), followed by Basra (31; 1 death), Maysan (23; 0), Muthanna (21), Diyala and Nineveh (18;1), and Anbar (1;0). Additional cases have also been reported in Babylon, Baghdad, Diwaniyah, Erbil, Karbala, Kirkuk, Najaf, Salah al-Din, Sulaymaniyah, and Wasit provinces. The increase in cases during the summer period has been linked to unsanitary slaughter practices and increased tick activity. In Dhi Qar, most recorded cases involve urban residents who had direct contact with slaughtered animals outside official health regulations, despite ongoing monitoring of slaughterhouses and butcher shops. The expansion of CCHF across 18 governorates indicates that it is not confined to the historical hyperendemic southern provinces and, in addition to increased livestock movement, it can also be attributed to improved surveillance sensitivity. Health officials have warned of increasing CCHF cases, attributing the spread to the continued presence of livestock within urban areas and weak enforcement of a government ban on livestock grazing inside cities. Officials also state that social factors, including tribal customs and the lack of proper slaughterhouses for livestock, have also restricted efforts to control the rise in cases. Additionally, the accumulation of waste in residential neighborhoods, which attracts livestock into urban areas in search of food, further increases the risk of infection. As of 11 JUNE, the MOH has implemented a comprehensive program and awareness campaign across 10 high-risk governorates. As of 06 AUG, the MOH continues to implement health awareness and education campaigns to strengthen early detection, diagnosis, and treatment. (Alsumaria, *Int J Infect Dis*, Iraqi News Agency ReliefWeb, Shafaq News, SotalIraq)

Between 2020 and 2021, Iraq experienced its largest CCHF outbreak to-date, with >300 confirmed cases by early 2022, exacerbated by unregulated livestock movement, intensified farming practices, and the impact of the COVID-19 pandemic on health care resources. According to historical patterns, the highest burden of CCHF typically occurs from MAY to JULY in the country. According to GIDEON, the country has reported hundreds of CCHF cases in recent years, including 389 cases in 2022, 587 in 2023, 211 in 2024, and 247 in 2025, with 96 cases in Dhi Qar Province alone. In 2025, WHO, in collaboration with the ministries of health and agriculture and the Iraq Red Crescent Society, implemented a comprehensive risk communication and community engagement campaign, aimed to reduce CCHF

transmission. (U.S. CDC, Outbreak News Today, ReliefWeb, Shafaq News, WHO)

CCHF is a viral infection transmitted via tick bites from an infected *Ixodid* spp. tick or contact with body fluids from an infected animal or human, and can cause severe viral hemorrhagic fever outbreaks, with a CFR of 10 to 40%. CCHF is endemic in the Middle East, and sporadic cases have been reported in Iraq since 1979, **with an increase in recent years attributed to changes in agricultural practices, climate change, and increased human-animal interactions**. WHO noted that CCHF outbreaks in the region often peak during the spring or summer due to heightened agricultural and animal movement activities. (U.S. CDC, Outbreak News Today)

Other Events:

- **GLOBAL**, MARCH study suggests that *Anopheles stephensi* mosquitoes across the Horn of Africa and Yemen are part of lineage closest to Afghanistan and Pakistan populations and entered the region via the port of Djibouti
- **GLOBAL**, Study of *E. coli* infection in blood from 26 countries from 2011 to 2023 found 34% of isolates were multidrug-resistant
- **GAZA STRIP**, 58k varicella cases during 2026, becoming endemic nationwide
- **ISRAEL**, 10 WNV disease cases (1 death) as of 06 AUG
- **ISRAEL**, First confirmed WNV disease case in Tel Aviv City during 2026, as of 01 AUG
- **KAZAKHSTAN**, 22 CCHF cases during 2026; 11 cases in Kyzylorda Region
- **KAZAKHSTAN**, 167 measles cases in Kostanay City during 2026; 16-fold increase compared 2025
- **PAKISTAN**, 17 confirmed mpox cases in Faisalabad City, Punjab Province, as of 05 AUG
- **PAKISTAN**, Eight cholera cases (one confirmed) at seminary in Lower Dir District as of 03 AUG
- **USCENTCOM**, ~33% of U.S. personnel evacuated from the Middle East carried multidrug-resistant bacteria, as of 05 AUG
- **YEMEN**, >1.6k measles cases (12 deaths) in Marib Governorate during 2026; health emergency declared on 02 AUG

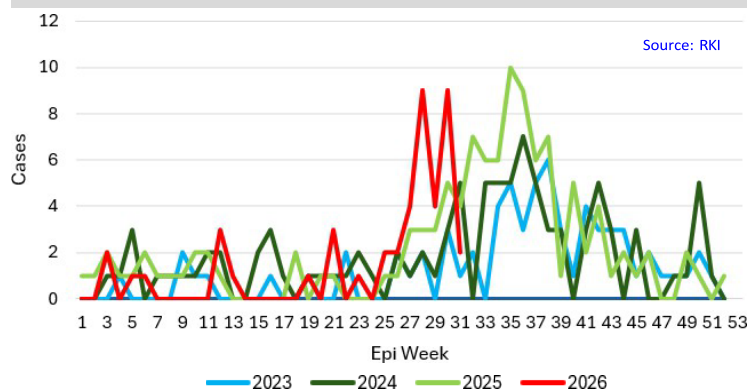
USEUCOM Health Events of Interest

Germany – Vibriosis:

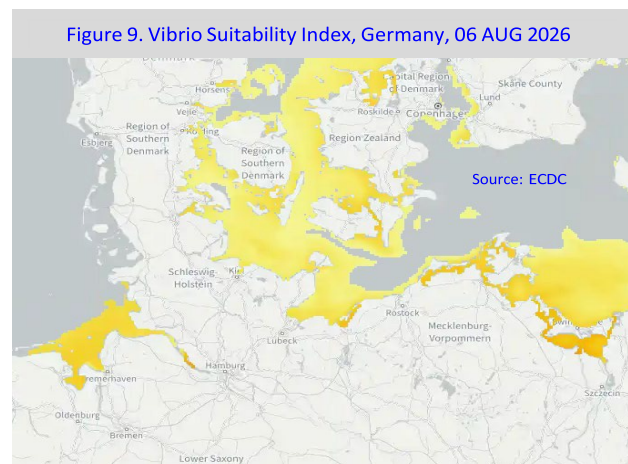
As of 05 AUG, the **Robert Koch Institute (RKI)** has reported **45 vibriosis cases (at least 2 deaths)** in Germany during 2026, an increase compared to 40 cases during the same period in 2024 and 2025, each. Additionally, cases have increased early, spiking to nine weekly cases in the week beginning 06 JULY. In recent years, cases began increasing at the end of JULY and peaked end of AUGUST (Figure 8). According to media, the early season is attributable to a heat wave in JUNE, which is earlier than normal. Most cases have been reported from North Rhine-Westphalia (eight), Schleswig-Holstein (seven), and Bavaria (six) states; however, since 06 JULY, most cases

have been reported in Schleswig-Holstein (six), Rhineland-Palatinate (four), and Berlin and Lower Saxony (three each) states. Schleswig-Holstein and Lower Saxony states both border the North Sea and Schleswig-Holstein also borders the Baltic Sea. On 29 JULY, media reported two deaths, including one individual who had stayed on the coast in Vorpommern-Greifswald District, Mecklenburg-Western Pomerania State, the first death since 2023. Cases have increased in recent years from 69 in 2023, 95 in 2024, and 113 in 2025. (BR24, Norddeutscher Rundfunk, Tagesschau)

Figure 8. Weekly Vibriosis Cases in Germany, 01 JAN 2022 to 02 AUG 2026



Vibrio spp. bacteria are naturally found in coastal waters, particularly in warm, brackish water. In Europe, the bacteria are more frequently detected in summer months, particularly in the Baltic Sea, which has low salinity. On 29 JULY, ECDC warned of heat waves across the continent increasing the risk of infectious diseases, including vibriosis. To reduce the risk of transmission, they recommended avoiding swimming with open wounds or recent piercings and fully cooking seafood from at-risk areas. According to the ECDC *Vibrio* viewer, which uses ocean model data to map conditions favorable for *Vibrio* spp. growth, as of 06 AUG there were some “High” risk levels in the Elbe river, near Hamburg, and the Szczecin Lagoon, near the German border with Poland (Figure 9).



Other Events:

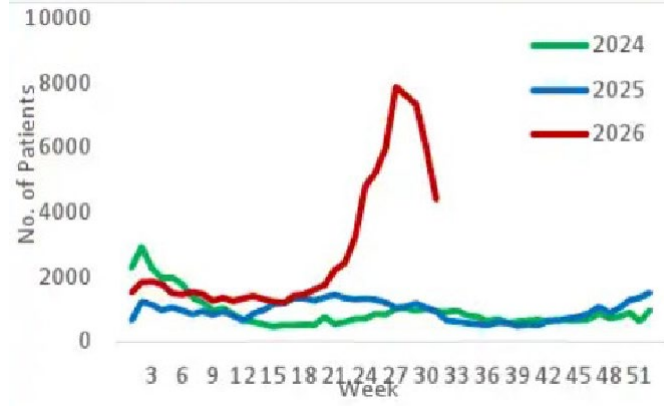
- **GLOBAL**, Study of *E. coli* infection in blood from 26 countries from 2011 to 2023 found 34% of isolates were multidrug-resistant
- **BULGARIA**, 27 Lyme disease cases during week ending 02 AUG; highest weekly total compared to 2025 and 2024
- **CZECH REPUBLIC**, Health officials issue botulism warning as of 04 AUG, linked to pork pâté with almonds
- **ESTONIA**, >1.2k Lyme disease and 50 tick-borne encephalitis (TBE) cases nationwide as of 06 AUG
- **FINLAND**, 237 TBE cases as of 31 JULY; 240 cases total in 2025
- **FRANCE**, One imported hantavirus infection case who traveled within the country and is currently isolating in Spain as of 06 AUG; Andes strain identified
- **FRANCE**, Seven locally acquired chikungunya cases during 2026
- **GERMANY**, First locally acquired WNV disease case during 2026 in Rhineland-Palatinate State, as of 29 JULY
- **GERMANY**, Novel orthobunyavirus of the Simbu serogroup identified in cattle as of 03 AUG
- **GREECE**, 42 WNV disease cases (4 deaths) as of 29 JULY
- **HUNGARY**, 17 leptospirosis cases as of 02 AUG; 467% increase compared to same period in 2025 (3)
- **ITALY**, 84 WNV disease cases (2 deaths) since FEBRUARY
- **KOSOVO**, 99 measles cases from 16 APRIL to 03 AUG; 21 in 1 week as of 04 AUG
- **POLAND**, Increase in campylobacteriosis, salmonellosis, and shigellosis cases in JULY compared to JUNE (14%, 83%, and 267% increases, respectively)
- **SPAIN**, 14 WNV disease cases in Andalusia during 2026; Dos Hermanas area under alert until 30 AUG
- **SPAIN**, 25 salmonellosis cases in Oviedo City, Principality of Asturias, as of 08 AUG
- **SPAIN**, Four mpox cases in Pontevedra Province between 20 and 26 JULY
- **SWITZERLAND**, 26 legionellosis cases (25 hospitalized; 1 death) in Basel Municipality, Basel-Stadt Canton, as of 03 AUG
- **UKRAINE**, 19 botulism cases (2 deaths) during 2026
- **USEUCOM**, 241 locally acquired WNV disease cases during 2026 across 7 countries

USPACOM Health Events of Interest

Sri Lanka – Dengue:

As of 06 AUG, Sri Lanka's National Dengue Control Unit has reported **88,522 (+46k since IB's last report on 30 JUNE)** dengue cases (**63 [+39]** deaths) during 2026, a **151%** increase compared to the same period in 2025 (**36k** cases). During JULY, >29k new cases were reported, the highest monthly total of 2026 and more than one-third of the annual total. Over 21k cases were reported in JUNE, and monthly incidence from JANUARY to MAY ranged from >5.6k to >8.5k. See Figure 10 for a graph of weekly dengue cases in the country from 2024 to 2026. According to the Sri Lanka MOH, cases have been reported across all 25 districts. Three districts have accounted for over half of the national total during 2026, all from Western Province, Colombo (>20k cases), Gampaha (>18k), and Kalutara (6.7k). These same districts collectively accounted for ~53% of new cases during epidemiological week 31 (week ending 02 AUG). A cluster of 71 cases including 5 hospitalizations was reported among University of Colombo students on 09 JULY, and the University of Moratuwa and the University of Visual and Performing Arts in Colombo temporarily closed their campuses to limit further transmission. These are the first institutional clusters to be reported in the 2026 outbreak. (ADAdarana.lk, Sri Lanka MOH)

Figure 10. Weekly Dengue Cases in Sri Lanka, 2024 to 2026



The **continued** concentration of cases in Colombo and Gampaha districts highlights ongoing vulnerability in densely populated urban regions due to frequent human movement and limited vector control. Additionally, Colombo is a major international transportation hub, with direct flights from cities worldwide (e.g., Australia, Singapore, the United Kingdom), increasing disease transmission risk to other regions, domestically and internationally. The increasing number of cases indicates sustained high transmission intensity. Health officials indicate that mosquito breeding has increased particularly around schools, workplaces, religious institutions, and government and private institutions compared to households. Improper waste disposal was identified as a key contributing factor to dengue transmission. Health officials have also stated that the increased population of the *Ae. aegypti* mosquito has contributed significantly to the rise in cases during 2026. In response to the increase in cases, health officials launched a special dengue prevention week from 15 to 20 JUNE, aimed at eliminating mosquito breeding grounds and reducing infections nationwide and was carried out in phases targeting different sectors each day. Additionally, health officials focused on inspecting and cleaning public spaces across the country, (Daijiworld, Lankaweb, News First, Sri Lanka MOH)

Despite dengue cases remaining below the 2017 epidemic peak (>186k cases) in Sri Lanka, there has been an **increasing trend in incidence, with 2018, 2019, 2022, and 2025 each recording >50k cases, according to GIDEON**. As of 06 AUG, the U.S. CDC classified Sri Lanka as having “frequent or continuous” dengue risk. A 2024 study revealed that all four dengue virus (DENV) serotypes co-circulated from 2000 to 2020; however, a shift in predominant serotype is observed annually and by region. **During the current outbreak, health officials have stated that a modified strain of dengue is contributing to the spread of disease, increasing the risk of infection due to a larger number of individuals being more susceptible to infection and leading to wider transmission. The circulation of the DENV-2 serotype, which has not been prevalent in recent years, has been identified, in addition to DENV-3. The modified strain appears to be natural mutations rather than intentional modification, as a DECEMBER 2025 study found that the Sri Lankan DENV-2 serotype that was circulating from 2016 through 2023 belonged to genotype II.F.1 lineage, and had multiple mutations that increased viral replication, NS1 secretion, and immune evasion.** There is also evidence that DENV-3 has been actively evolving in Sri Lanka as well, and an OCTOBER 2024 study found that during a 2023 dengue outbreak, two DENV-3 genotypes (I and III) were co-circulating; DENV-3 I was not initially detected due to mutations and the co-circulation of genotypes led to an

increase in cases. (*BMC Microbiol*, CDC, Daijiworld, *IJD Regions*, *J Infect Dis*, The Morning, News First, Outbreak News Today)

Other Events:

- **GLOBAL**, Study of *E. coli* infection in blood from 26 countries from 2011 to 2023 found 34% of isolates were multidrug-resistant
- **AUSTRALIA**, 175 avian influenza A(H5) cases nationwide as of 07 AUG; risk to human health remains “Low”
- **AUSTRALIA**, Nearly 400 native bird and mammal species assessed as being at “High” or “Extreme” risk from avian influenza A(H5N1) as of 04 AUG
- **BANGLADESH**, 500 daily dengue hospital admissions, sharp increase since late JULY, as hospitals prepare dedicated dengue wards; 17k cases (59 deaths) during 2026
- **CHINA**, Imported amebiasis case in traveler returning from Thailand as of 04 AUG
- **HONG KONG**, 107 legionellosis cases during 2026; 9 from 26 JULY to 01 AUG
- **HONG KONG**, Confirmed locally acquired mpox case as of 05 AUG; 94 cases (75 locally acquired) since 2022
- **HONG KONG**, First death linked to seasonal influenza A(H3) during 2026 in 7-year-old child; influenza activity expected to remain “High” in coming weeks
- **INDIA**, 35 confirmed Chandipura virus disease cases (7 hospitalizations; 22 deaths) in Gujarat State as of 03 AUG
- **INDIA**, 100 water-borne disease cases in Desu Jodha Village, Haryana State, as of 05 AUG; linked to contaminated water supply
- **INDIA**, 212 dengue and 62 malaria cases in Delhi City as of 30 JULY
- **INDIA**, 442 gastrointestinal (GI) illness and 267 typhoid fever cases in Ahmedabad City, Gujarat State, during JULY
- **INDIA**, >2.3k leptospirosis cases (>1.3k confirmed; 116 deaths) in Kerala State during 2026; 415 confirmed (30 deaths) in JULY
- **INDIA**, *Aedes lineatopennis* mosquitoes identified in West Bengal State as of 09 AUG; six dengue cases in state during 2026
- **INDIA**, Hospitals at full capacity following rising seasonal influenza A(H1N1), viral fever, and leptospirosis cases in Kerala State as of 04 AUG
- **INDIA**, Indian Council of Agricultural Research-National Institute of High Security Animal Diseases develops country's first African Swine fever vaccine for pigs as of 05 AUG
- **INDONESIA**, 2.3k malaria cases in Rokan Hilir Regency, Riau Province, as of 04 AUG
- **INDONESIA**, >13k leprosy and 21k scabies cases during 2026
- **INDONESIA**, U.S. CDC issues “Level 2 – Practice Enhanced Precautions” travel notice for Zika virus disease as of 07 AUG
- **JAPAN**, 92 mpox and 27 malaria cases during 2026 compared to 3 and 15, respectively, during same period in 2025
- **MYANMAR**, 158 dengue cases (3 deaths) in Rakhine State as of 30 JULY
- **NEPAL**, 2k dengue cases (2 deaths) during 2026 across 72 of 77 districts; transmission increasing during monsoon season
- **PHILIPPINES**, 1.2k dengue cases (12 deaths) in Zamboanga City as of 04 AUG; 500% increase compared to same period in 2025
- **PHILIPPINES**, 108 leptospirosis cases in National Capital Region as of 27 JULY
- **PHILIPPINES**, 93k dengue cases during 2026; 46% decrease compared to same period in 2025 (174k)
- **REPUBLIC OF KOREA**, 19 deaths linked to heat wave as of 03 AUG
- **REPUBLIC OF KOREA**, At least two malaria cases in Gimpo City, Gyeonggi Province, as of 03 AUG; health alert issued
- **SINGAPORE**, ~1.8k dengue cases during 2026
- **TAIWAN**, ~19k COVID-19-related emergency and outpatient visits in week ending 01 AUG; increase from >10k in previous week
- **TAIWAN**, 111 dengue cases (7 locally acquired) during 2026; 11% decrease compared to same period in 2025

- **TAIWAN**, Four typhoid fever cases (one locally acquired) during 2026
- **VIETNAM**, 280 dengue cases in Khánh Vĩnh District, Khánh Hòa Province, as of 02 AUG; 49% cases in JULY alone
- **VIETNAM**, >1k dengue and 855 COVID-19 cases in Hanoi during 2026 compared to 579 and 2.1k, respectively, in same period in 2025

USSOUTHCOM Health Events of Interest

Nicaragua – Chikungunya:

Through 01 AUG, the Nicaragua MOH has reported 402 chikungunya cases during 2026, with >50% of cases (207) reported in the week ending 01 AUG. Media has claimed that the total number of cases is actually 626. According to media, on 25 MAY, the MOH confirmed the presence of 12 chikungunya cases in the country. On 03 AUG, the U.S. CDC issued a "Level 2 - Practice Enhanced Precautions" travel health notice for chikungunya in Nicaragua and noted that most cases have been reported in Managua Department. On 01 JULY, **Costa Rica** declared a chikungunya outbreak in Guanacaste Province, which borders Nicaragua. Several of the initial cases in Costa Rica were classified as imported from Nicaragua, indicating that these cases seeded the outbreak in Costa Rica, which is now experiencing local transmission (82 cases). (Confidential, Despacho 505, Outbreak News Today, Tech Times)

The outbreak comes amidst a regional chikungunya resurgence. On 10 FEB, the Pan American Health Organization (PAHO) released an epidemiological alert due to a sustained increase in cases in the Americas and the resumption of local transmission in areas that had not reported circulation in several years. Chikungunya was first reported in the Americas in late 2013 and in Nicaragua in mid-2014. Phylogenetic analysis of the chikungunya virus (CHIKV) from the initial outbreak revealed the Asian genotype. **While the CHIKV genotype from the current Nicaraguan outbreak has not been reported, more recent outbreaks in the Americas, starting in Brazil and parts of the Caribbean in 2020, have identified circulation of the East, Central, and South African (ECSA) genotype. The Asian genotype continues to circulate at lower levels, and its co-circulation with the ECSA genotype in the Americas has led to concerns about potential increased viral adaptation and the possibility of future recombination or lineage change.** PAHO reported 12 chikungunya cases in Nicaragua in 2021, 4 in 2022, 3 each in 2023 and 2024, and 0 in 2025. (*Am J Trop Med Hyg*)

Other Events:

- **GLOBAL**, >47k measles cases (44 deaths) across the region of the Americas as of 18 JULY; epidemiological alert issued 07 AUG
- **GLOBAL**, 1.4 million dengue cases through 18 JULY across the region of the Americas; decrease compared to same period in 2025 and 5-year average (61% and 67%, respectively)
- **GLOBAL**, Study of *E. coli* infection in blood from 26 countries from 2011 to 2023 found 34% of isolates were multidrug-resistant
- **BRAZIL**, >38k dengue cases in Pernambuco State as of 01 AUG; 39% increase compared to same period in 2025
- **COLOMBIA**, 770 GI illness cases in Ipiales Municipality, Nariño Department, since outbreak declared 17 JULY
- **COLOMBIA**, >36k malaria cases during 2026, compared to 45k during same period in 2025
- **COSTA RICA**, 14 hepatitis A cases in Aserrí and San Juan de Dios de Desamparados districts, San José Province, as of 07 AUG; linked to contaminated water
- **COSTA RICA**, 82 chikungunya cases during 2026; 8 total in 2025
- **ECUADOR**, >24k dengue cases during 2026; less than same period during 2025 (>30k), but cases increasing
- **GUYANA**, 1.4k chikungunya and 11 dengue cases during 2026
- **HONDURAS**, 224 pertussis cases during 2026
- **PANAMA**, 13 respiratory syncytial virus deaths during 2026; circulation above epidemiological alert threshold
- **PANAMA**, One meningitis case caused by *Haemophilus influenzae* in Veraguas Health Region as of 29 JULY