

DAILY BULLETIN FOR RESTRICTED USERS

Communicable Disease Threats Report

4 May 2026

Today's disease topics

1. Severe respiratory illness outbreak on cruise ship - South Atlantic - 2026

Executive Summary

Severe respiratory illness outbreak on cruise ship - South Atlantic - 2026

- On 2 May 2025, the Netherlands notified to EWRS an outbreak of unknown aetiology on the Dutch-flagged cruise ship MV Hondius, travelling from Argentina through the South Atlantic towards Cabo Verde.
- As of 4 May, overall, six individuals with respiratory symptoms have been reported, including three deaths.
- Clinical presentations reported included fever, influenza-like illness, pneumonia, gastrointestinal symptoms, and marked fatigue. Epidemiological details remain limited.
- Extensive testing on one evacuated case in South Africa was negative for a broad panel of respiratory pathogens and positive for hantavirus infection through PCR; sequencing is ongoing.
- Infection prevention measures are being implemented on board.

1. Severe respiratory illness outbreak on cruise ship - South Atlantic - 2026

Overview:

All information in this message is restricted and should not be shared further without confirmation with ECDC.

On 2 May 2026, Netherlands posted on EWRS information on an outbreak of unknown aetiology on a cruise liner under the Dutch flag, the MV Hondius ([HONDIUS – live position & track | IMO 9818709](#)). The ship had been on a cruise in the Southern Atlantic after departing from Argentina on 1 April and was en route to Cabo Verde. The cruise followed an itinerary including stops on mainland Antarctica, South Georgia, Nightingale Island, Tristan da Cunha, St Helena, and Ascension Island with final stop at Cabo Verde. On 3 May, WHO posted through EIS a notification from the Netherlands and UK with updated information about the event.

Dutch colleagues were alerted by the UK National Focal Point (NFP) which had in turn been informed by the authorities of St Helena of two deaths of unknown aetiology among passengers within the past three weeks, together with additional cases presenting with influenza-like illness (ILI).

The first two cases, a couple of Dutch nationality, boarded the cruise in Ushuaia, Argentina on 1 April 2026. Prior to boarding the ship, the two passengers were travelling in Chile and Argentina.

Case number 1 is a 70-year-old man, who developed symptoms on 6 April with fever, headache and mild diarrhoea. Symptoms worsened two days later with weakness, dizziness, tachypnoea and poor urinary output. By 11 April, he was haemodynamically unstable, hypoxic despite oxygen therapy and delirious. He was treated with antibiotics since the start of his symptoms. The patient died late evening on 11 April. Microbiological investigation was not performed. The body of the deceased individual is currently kept in cold chamber in St. Helena.

Case number 2, a 69-year-old woman, was the wife of case number 1 and accompanied the deceased for repatriation. They disembarked in St. Helena on 24 April. The case number 2 flew to Johannesburg, South Africa on 25 April. She had mild gastrointestinal symptoms before boarding but deteriorated during the flight and collapsed on arrival in Johannesburg. She was admitted to hospital and died of pneumonia and acute respiratory distress syndrome the same day. No microbiological tests were performed.

Case number 3, a 69-year-old man, British national presented on 24 April with fever, shortness of breath and signs of pneumonia. They deteriorated by 26 April, including high fever, vomiting, dizziness, urinary incontinence, and chest pain; and required oxygen therapy. He presented with shock and ARDS and was resuscitated. The patient was evacuated from Ascension Island on 27 April to Johannesburg, South Africa and is currently stable in intensive care. The case has a history of hypertension, poorly controlled diabetes, and dyslipidaemia. The patient tested negative for a broad panel of respiratory pathogens, including *Bordetella* spp., *Chlamydia pneumoniae*, *Legionella* spp., *Mycoplasma pneumoniae*, influenza A/B, adenovirus, metapneumovirus, rhinovirus, parainfluenza viruses 1–4, human bocavirus, and SARS-CoV-2. However, they tested positive for hantavirus using PCR on 2 May. Sequencing results, performed in South Africa, are pending.

Cases 1 and 2 shared cabin and case 3 had a cabin in the same lower deck area and shared "damp" sanitary facilities.

Case number 4, a 80-year-old woman, had onset of symptoms with fever and feeling unwell on 28 April. The patient passed away on 2 May and is currently on the ship.

Two additional passengers, the ship doctor and a guide, presented with milder respiratory symptoms and fever and are currently afebrile and clinically stable. No information is available on the dates of onset.

There are currently 147 persons on board, 88 passengers and 59 crew. Passengers and crew represent 23 nationalities, including several EU/EEA countries as well as third countries: Argentina, Australia, Belgium, Canada, France, Germany, Greece, Guatemala, India, Ireland, Japan,

Montenegro, the Netherlands, New Zealand, the Philippines, Poland, Portugal, the Russian Federation, Spain, Türkiye, Ukraine, the United Kingdom, and the United States.

Diagnostic capacity on board is limited. Further laboratory investigations are ongoing at the South African National Reference Laboratory.

Infection prevention measures, including isolation of symptomatic individuals and social distancing, have been recommended as a precautionary measure. The vessel arrived in Cabo Verde during the night between 2 and 3 May. Cabo Verdean authorities are being supported by the World Health Organization. There are ongoing negotiations to disembark the two current symptomatic cases and for clinical testing. All passengers will remain on board with the next stop likely to be the Canary Islands.

The UK and Netherlands NFPs have offered support.

ECDC assessment:

The risk from hantavirus originating from this cruise ship outbreak for the EU/EEA general population is very low. Future port authorities are alerted to use appropriate personal protective equipment and precautions when in contact with suspected cases.

Measures are already implemented on board to limit the likelihood of infection for passengers and crew on the cruise ship. However, based on the current epidemiological information, it is difficult to make a proper assessment of the likelihood of infection.

This assessment is based on currently available limited information and carries uncertainty. It will be updated when more information becomes available.

Actions:

ECDC is liaising with Member States, WHO, and the European Commission to collect more information and coordinate actions.

A news item has been published on 4 May 2026: [ECDC monitoring outbreak associated with cruise ship](#).

EpiPulse Item: 2026-EIP-00024

Last time this event was included in the Daily CDTR: -