



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health
Health Security

General Working Group of the Health Security (GWG HSC) Committee Meeting

Wednesday 12 August 2026 – 10:30-12:30

Summary Report

Chair: Head of Unit, European Commission, DG SANTE

Participants: AT, BE, BG, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HU, IE, IS, IT, LI, LU, LT, LV, MT, NL, NO, PL, PT, SE, SI, SK, DG SANTE, SG, DG ECHO, DG HERA, DG RTD, JRC, ECDC, EMA, WHO

Agenda Points

1. Andes Hantavirus Notification

France gave an overview and update on the single case of infection with [Andes Hantavirus notified in France](#) on 5 August 2026. France put in place several actions following the notification of the case including updating its risk assessment, and definition of high and low-risk contacts, and contact tracing. France highlighted some challenges related to the case including the acceptability of control measures and the need to discuss coordination of these at EU level.

Spain provided an overview of their response measures for close contacts, as the case notified by France also travelled to Spain, including quarantine and testing. Spain also adapted its protocol to address the situation and on how to conduct follow-up of contacts.

The European Centre for Disease Prevention and Control will review scientific evidence and consider updating its guidance on managing cases of Hanta Andes virus infections, as this specific case shows several differences compared to the recent outbreak onboard the MV Hondius, which is the basis for recent guidance.

2. Ebola Bundibugyo outbreak

The World Health Organization (WHO) provided an epidemiological update on the Ebola Bundibugyo in the Democratic Republic of the Congo (DRC). As of [09 August](#), there have been 4.381 confirmed cases and 2.011 confirmed deaths in the DRC (with cases confirmed in five provinces). This Ebola Bundibugyo outbreak has become the largest Ebola Bundibugyo outbreak, and second largest Ebola outbreak, only three months after the WHO determined it a Public Health Emergency of International Concern.

Challenges to the response include a complex humanitarian situation; the geographical expansion; outbreaks in geographically remote zones and accessibility issues; insecurity; human resources issues (teams being stretched, strikes, delays in payment of health care workers, lack of training); high population density; contact tracing gaps; data harmonisation across health zones; contact investigation and follow-up; and community resistance resulting in many cases being detected late. The WHO continues to assess the risk in the DRC as very high and is in the process of reviewing its risk assessment due to ongoing transmission and the continued expansion of the outbreak into new geographic health zones.

The WHO is working with the Africa Centres for Disease Control and Prevention on updating the [Continental preparedness and response plan](#) to provide an update on the response and highlight the gaps and challenges that still need to be addressed. The [Financial Tracking Mechanism](#) was updated on 5 August and overall, from all donors combined, of the required USD 518 million stated in the Plan, 51% has been disbursed to date, but the funds are concentrated in only a few pillars (including research and development). The WHO provided an overview of the scientific coordination going on, including the ongoing clinical trials for prophylaxis ⁽¹⁾, treatment ⁽²⁾ in the DRC and candidate vaccines ⁽³⁾⁽⁴⁾.

DG ECHO gave an overview of the ongoing reliefEU response including 10 EU Humanitarian Airbridges (HABs) which have transported over 769 metric tonnes of relief items and the donation of 165 metric tonnes of EU stocks. DG ECHO has also supported the deployment of experts to the affected countries and regions. DG ECHO is planning further HABs and is assessing further donations of EU stocks.

DG HERA provided an overview of their immediate actions to the Ebola Bundibugyo outbreak which include EUR 5 million in direct procurement and supply of testing kits and equipment. Other actions are being planned such as support to the “Africa CDC Pathogen Genomics Initiative” and support to the WHO as part of the Global Health Resilience Initiative. Additionally, DG HERA referred to longer-term activities enhancing EU preparedness on medical countermeasures, e.g. the Clinical Trial Coordination Mechanism opinion for the establishment of an investigational stockpile for filovirus candidates, as well as strengthening ongoing collaborations such support to partners, like CEPI through Horizon Europe or the WHO R&D blueprint for clinical trials for vaccine and therapeutic candidates.

The ECDC presented their work on modelling support to the Africa CDC on estimates of transmission intensity and forecast. The ECDC has also been working on modelling the importation risk of the Bundibugyo virus disease into the EU/EEA which suggests that there will be limited to very sporadic importation of cases and will update its [assessment](#) in the coming weeks.

3. AOB: Upcoming meetings of the Health Security Committee

DG SANTE announced the dates for the upcoming meetings of the General Working Group and the Senior-Level HSC.

4. AOB: Opinion of the HSC on addressing the health impacts of heatwaves and extreme heat

DG SANTE thanked the HSC for their quick review and contribution to the [Opinion of the Health Security Committee on addressing the health impacts of heatwaves and extreme heat](#) which was published on 31 July.

⁽¹⁾ The EBO-PEP clinical trial: <https://ebo-pep.com/?lang=en>

⁽²⁾ The Platform Adaptive Randomised Trial for New and Repurposed Filovirus Treatments (PARTNERS) clinical trial: <https://www.who.int/news/item/02-07-2026-patient-enrolment-begins-in-a-scientific-trial-to-identify-the-first-effective-treatments-for-bundibugyo-virus-disease>

⁽³⁾ The BD-Ebov study for the ChAdOx1 BDBV vaccine: <https://www.ox.ac.uk/news/2026-07-13-worlds-first-phase-i-bundibugyo-ebolavirus-vaccine-trial-launched-by>

⁽⁴⁾ The clinical trial for the Moderna mRNA vaccine: <https://www.canada.ca/en/health-canada/news/2026/08/health-canada-authorizes-vaccine-clinical-trial-for-ebola-disease-caused-by-the-bundibugyo-virus.html>

5. Vaccination

Following the [Executive Order](#) published by the United States on 10 August on recommendations for childhood vaccination, the ECDC highlighted there is no new scientific evidence that could trigger discussions around changes to current childhood vaccination schedules. Decisions regarding vaccination schedules should be adapted and tailored to specific national contexts considering the scientific evidence available.