Watching Brief
Hantavirus Outbreak
Update to CARPHA Member States as of 6th May 2026

Current Situation

The World Health Organization (WHO) received notification from the National International Health Regulations (2005) (IHR) Focal Point of the United Kingdom of Great Britain and Northen Ireland on the 2nd of May 2026 of a cluster of severe respiratory illness on a cruise ship, with laboratory confirmation of hantavirus in one critically ill patient. The Caribbean Public Health Agency (CARPHA) was notified of this event via CARPHA's Information Environment and Monitoring platform on the 3rd of May 2026. As of the 6th of May 2026, the WHO has reported eight cases (three confirmed, five suspected) and three deaths among passengers and crew of multiple nationalities (1,2).

The cruise ship, the MV Hondius, which travelled from Argentina across remote South Atlantic and Antarctic regions, is currently moored off Cabo Verde, with potential exposure sources (including wildlife contact) still under investigation (1). See link to WHO Disease Outbreak News and
Updated WHO LinkedIn Post on the 6th of May 2026.

Risk to the Caribbean

The risk to the Caribbean region is considered low at this time given the ecology of the region and the limited presence of the most common rodent carriers. This is because Hantaviruses are very host specific. In the Americas, these viruses are typically transmitted by wild field mice and rats, not the common city rat. The virus has been detected in studies in the Caribbean, however, transmission within city environments is noted to be less likely. Furthermore, human-to-human transmission is possible and has been suspected in rare cases but generally remains an uncommon occurrence (3).

Hantavirus Surveillance in the Caribbean

Hantavirus detection and surveillance in the Caribbean region is limited; the minimal historical prevalence, lack of data and scarce diagnostic capabilities are noteworthy. Therefore, CARPHA Member States (CMS) are encouraged to implement and /or remain vigilant in their vessel surveillance and protocols. This is especially relevant given the region remains the world's leading cruise destination, accounting for 44% of all cruise visits with a total of 42 cruise lines bringing 16.3 million passengers to the Caribbean in 2025 (4).

CARPHA' Novel Digital Early Warning Visitor-Based Surveillance Systems

The Caribbean Public Health Agency (CARPHA) continues to promote healthier, safer cruise tourism by strengthening vessel surveillance across the region. Through CARPHA's confidential visitor-based surveillance (VBS) systems THP Background, the Tourism and Health Information System (THiS) THiS Sign In and the Caribbean Vessel Surveillance System (CVSS) CVSS Sign In, countries are immediately alerted to public health threats originating from tourism accommodations and vessels respectively. This early warning improves decision-making and enables the Ministry of Health to mount a rapid, targeted response to manage the situation and prevent further spread or an outbreak scenario.

Through the advanced CVSS, there has been a significant detection of syndromic cases before a ship arrives at a Caribbean port with over 96% of all cruise ship alerts being reported to Member States within 24hrs. This allows the port health team more time and information to make better informed decisioned as it relates to granting pratique enhancing health security in the country as well as the region by extension.

Hantavirus

Hantaviruses are zoonotic viruses that naturally infect rodents and can be transmitted to humans through animal-to-human contact with contaminated urine, droppings, or saliva with only rare instances of limited human-to-human spread (notably with Andes virus). WHO currently assesses the global risk as low (1).

It can cause serious and life-threatening infections worldwide. These viruses can cause two severe syndromes. The first is Hantavirus Pulmonary Syndrome (HPS) and the second being Haemorrhagic Fever with Renal Syndrome (HFRS). Though the infection can be life-threatening, there are approximately 150,000 cases of HFRS per year around the world (5).

Hantavirus cardiopulmonary syndrome (HPS) is a rare but severe zoonotic respiratory disease caused by hantaviruses, mainly transmitted to humans through contact with infected rodent excreta or contaminated environments, particularly in rural or rodent-infested settings. It begins with flu-like symptoms and can rapidly progress to respiratory failure, with an incubation period typically of 2–4 weeks.

Globally, cases are uncommon but can be severe, with case fatality rates reaching up to 50% in the Americas. There is no specific treatment or vaccine, though early supportive care improves outcomes.

Given the high density and close living quarters of passengers and crew among these vessels, along with the semi-enclosed environment, there is an increased risk of transmission among and between these groups posing a challenge for onboard management and local public health authorities in the region.

Prevention and Control

The virus is transmitted through contact with infected rodents through contaminated urine contaminated urine, droppings, or saliva.
Rodent control is the primary prevention measure in preventing hantavirus (3,6). Other common preventative measures include:

- Avoid Contact: Ensure there is no contact with rodent faeces, urine, saliva, nesting materials or contaminated materials.
- Cleaning Procedures: If rodents are spotted, ensure precautions are taken when cleaning up after rodents.
- Deratting: Ensure deratting procedures are in place to eliminate and prevent the infestation of rats and mice. This includes procedures on inspections, sanitation, extermination, and prevention.
- Self-isolate: Ensure passengers and crew members experiencing symptoms should inform medical professionals, use appropriate PPE (i.e. medical masks) and avoid contact with other individuals.
- Hand hygiene, PPE and safe handling of samples by medical professionals.
- Public Awareness: Immediate dissemination of relevant public communication to bring awareness focusing on early detection, treatment and reducing exposure.

Laboratory Response

Criteria for laboratory diagnosis include:

- Detection of hantavirus-specific IgM antibodies, or a four-fold or greater rise in IgG titres in paired sera.
- Detection of viral RNA by RT-PCR in acute cases (where available).
- Immunohistochemistry on tissue specimens in fatal cases.

Regional Laboratory Support:

- The CARPHA Medical Microbiology Laboratory (CMML), Trinidad Campus, has the capacity to perform hantavirus IgM and IgG serological testing.
- Acute or fatal specimens requiring molecular testing, viral characterization, or tissue-based diagnostics can be referred through CMML to recognized regional or international reference laboratories, upon request and in coordination with CARPHA.

All suspected, presumptive, and confirmed cases should be reported promptly through national surveillance systems and CARPHA to support regional risk assessment and public health response.

CARPHA Recommendations

The risk of infection of Hantavirus is low in the region. The virus is transmitted through contact with infected rodents through contaminated faeces or urine. Though peak cruise season has concluded in the region, surveillance of all other vessels porting to CMS should continue with respect to container ships, bulk carrier ships, private vessels, tanker ships etc.

CARPHA recommends the following:

1. Investigate syndromic cases via routine inspections of vessels. This can include requesting additional Maritime Declaration of Health forms at least four hours before arrival, review of medical logs, and coordination with health authorities.
2. Report heightened cases to CARPHA for support as needed and notification of other CMS lower in the ship's itinerary.
3. Enforce strict rodent control measures on vessels, including routine inspections, appropriate deratting procedures and proper use of rodent guards at ports of entry.
4. Implement stringent sanitation and hygiene practices, with emphasis on handwashing at ports of entry.
5. Strengthen vessel surveillance through implementation of CARPHA's CVSS early warning surveillance tool, for early detection and rapid response to public health threats aboard vessels. (CVSS)
6. Conduct onboard ship inspections to verify data provided prior to any disembarkation.
7. Review the vessel's ship sanitation certificate, especially if there were any vectors identified on board and the prevention and control measures implemented.
8. Implement stringent sanitation and hygiene practices, with emphasis on handwashing at ports of entry.
9. Isolate passengers and crew members with suspected infection in their quarters.
10. Routine and event-based surveillance, through traditional and non-traditional media, should be enhanced so that potential cases can be detected early.

For more information on the CVSS tool, please contact Mr. Keston Daniel, Coordinator of Visitor-Based Surveillance, CARPHA (danielke@carpha.org) or Ms. Samantha Llanos, Epidemiologist- Visitor-Based Surveillance, CAPRHA (llanossa@carpha.org).

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