
Andes hantavirus outbreak on MV Hondius, 2026

Situation Overview

Situation Overview – Andes hantavirus outbreak

- **On 2 May 2026, WHO received an IHR notification from the United Kingdom regarding a cluster of severe acute respiratory illness on a cruise ship (MV Hondius) headed towards Cabo Verde**
 - Laboratory confirmation of Hantavirus on 2 May. Andes virus confirmed on 6 May, both by NICD, South Africa, and HUG/CRIVE – Switzerland.
 - MV Hondius arrived in Cabo Verde with 147 passengers and crew from 23 countries on 2 May.
 - Two individuals with symptoms and a high-risk contact were medically evacuated from the MV Hondius to the Netherlands on 6 May.
 - Public health experts from WHO and the European Center for Disease Prevention and Control, and 2 medical experts from the Netherlands joined the MV Hondius on 6 May.
 - The MV Hondius departed Cabo Verde waters on 7 May for the Canary Islands (ETA – 10 May)
- **Currently, there are no confirmed cases or symptomatic individuals among the passengers and crew on board the MV Hondius.**
- **As of 8 May 2026, there are a total of 8 cases, including three deaths**
 - **Six confirmed cases** (1 hospitalized in South Africa, 2 in the Netherlands (ex MV Hondius), 1 in Switzerland), including 2 who died
 - **Two probable cases** (1 in Tristan da Cunha, and 1 who died)
- 161 contacts are under follow-up. Additional flight passengers who had contact with a case who was subsequently confirmed have been contacted and followed up by their respective National IHR Focal Points.

MV Hondius Itinerary	
01/04/24	Ushuaia, Argentina
04/04/26	Godthul, South Georgia
05/04/26	Grytviken, South Georgia
06/04/26	St. Andrews bay, South Georgia
07/04/26	Gold Harbour, South Georgia
07/04/26	Cooper Island and drygalski Fjord
13/04/26	Edinbourg of the Seven Seas, Tristan da Cunha
14/04/26	Inaccessible Island, Tristan da Cunha
15/04/26	Edinburgh of the Seven Seas, Tristan da Cunha
16/04/26	Nightingale Island, Tristan da Cunha
17/04/26	Gough Island
24/04/26	St. Helena
27/04/26	Ascension Island



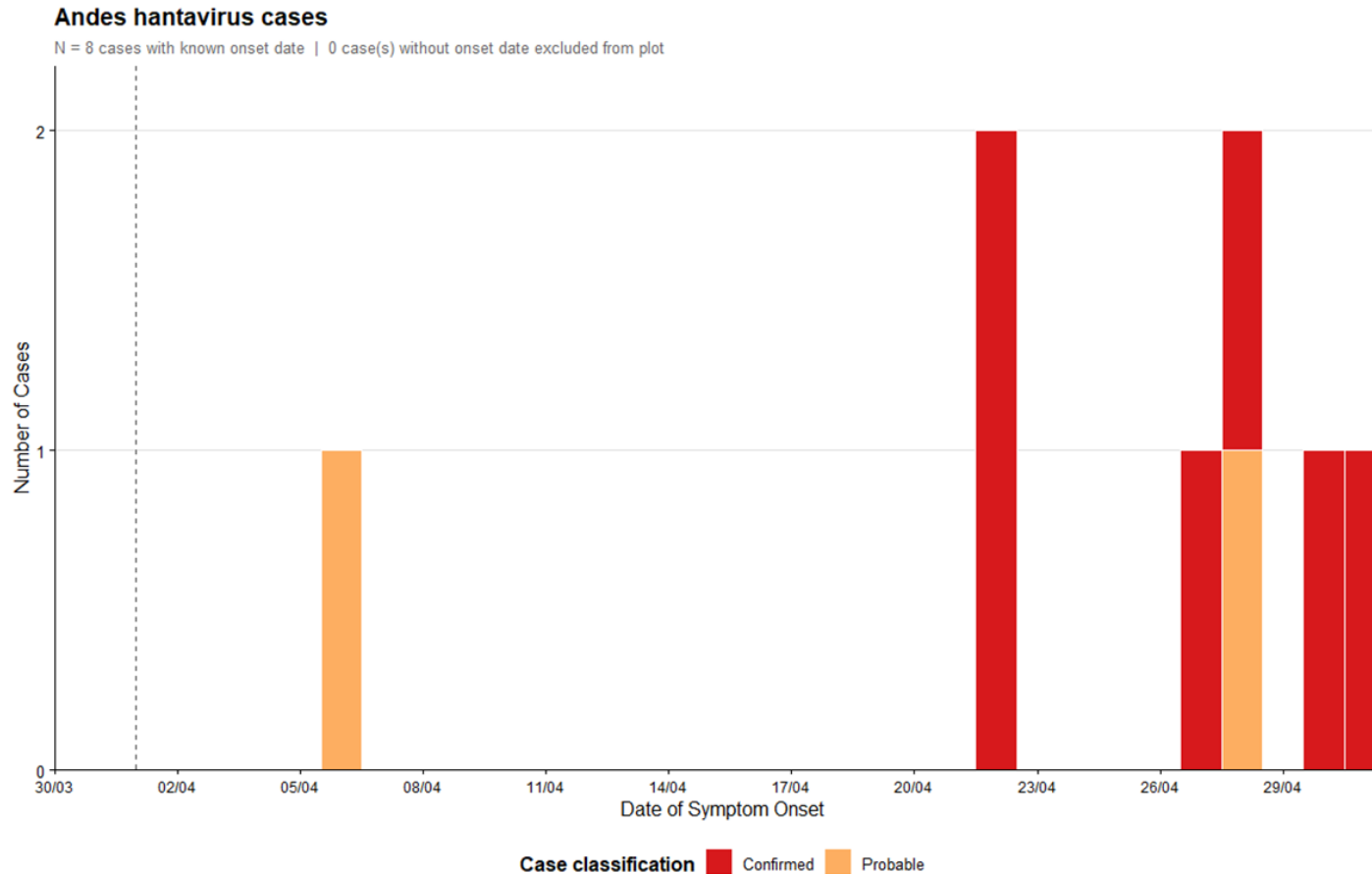
Source: [Oceanwide Expeditions](#)

Short Case Descriptions - as of 8 May 2026

Case	Description
1	70-year-old male, Dutch, probable case , with possible exposure pre-departure in Argentina, died onboard and the remains are currently in St. Helena
2	69-year-old female, Dutch, confirmed case , close contact of case 1 (same cabin, spouse), developed symptoms onboard, evacuated to Johannesburg, patient died.
3	69-year-old male, British, confirmed case , possible onboard exposure (2 cabins from cases 1–2), currently in ICU Johannesburg, patient improving.
4	80-year-old female, German, confirmed case , possible onboard exposure (different deck), died onboard, remains onboard.
5	42-year-old male, Dutch, confirmed case , ship doctor with possible onboard exposure, evacuated to Netherlands, patient stable.
6	56-year-old, British, confirmed case , ship guide with possible onboard exposure, evacuated to Netherlands, patient stable.
7	64-year-old male, Swiss, confirmed case , exposure on the ship under investigation, flew back to Switzerland, diagnosed in Geneva, alive in Zurich
8	65-year-old male, British, probable case , disembarked in Tristan da Cunha, still there in isolation, alive

Epidemiological overview – Andes hantavirus outbreak, - as of 8 May 2026

Total of 8 cases. 6 M/2 F, median age 69y, 3/8 deaths



Data source: Outbreak.xlsx | Generated: 2026-05-08

Situation Overview – Andes hantavirus outbreak (cont.)

- The source of exposure and epidemiological links of all cases is under active investigation
- The source of exposure for case 1 and possibly 2 likely occurred prior to boarding the MV Hondius given the known incubation period of Andes virus.
 - Cases 1 and 2 travelled extensively in Argentina, Chile, and Uruguay prior to boarding.
 - Cases 1, 2, and 3 visited locations for bird watching, where exposure to rodents may have occurred.
- The current working hypothesis is the introduction of the virus onto the ship from an incubating individual, followed by human-to-human transmission onboard.
- Genomic sequencing and characterization are ongoing to complement epidemiological investigations on the source point and subsequent transmission.
- Stringent public health measures implemented on board following case detection have likely reduced the risk of further transmission.
- Given the long incubation period of the disease, it is possible that additional cases may still occur from individuals currently in their incubation phase.
- Follow-up of everyone exposed is ongoing on the ship and among people who disembarked or were flight contacts.

WHO Response Overview

- Operating on a 'no regrets' basis across the 3-levels of the Organization since 2 May 2026.
- Continued engagement with National IHR Focal Points – timely information sharing, coordination of response actions, and international contact tracing.
- High-level discussions with Heads of State to facilitate the safe passage of the MV Hondius.
- Coordination support for the medical evacuation of passengers from the MV Hondius.
- Supported coordination across laboratories, including logistics support for reference material and key reagents
- Supported coordination with partners and Member States to share information on epidemiology, laboratory, clinical management, and infection prevention and control.
- **WHO Guidance (shared with IHR NFPs):**
 - Case investigation form
 - Interim guidance on the management of contact of Andes virus (ANDV) cases from the MV Hondius cruise ship.
 - Technical note for the disembarkation of passengers and crew members

Ongoing Medical Evaluation and Exposure Assessment on the MV Hondius

- There are currently 2 public health experts from WHO and the European Center for Disease Prevention and Control, and 2 medical professionals from the Netherlands on board the MV Hondius.
 - Medical evaluations and exposure assessments are being conducted for all passengers and crew members, including developing a better understanding of links between cases.
 - Investigations are being guided by **WHO's interim guidance on Management of contact of Andes virus (ANDV) cases from the MV Hondius cruise ship.**
 - Risk mitigation measures are being implemented on board, including cleaning and disinfection of rooms and the use of protective equipment.
 - Psychosocial support is also being provided to all passengers and crew members.

Management and Follow-up of Contacts

Contacts should always receive written information on symptoms to look out for, emergency contact numbers, and instructions regarding healthcare seeking and testing.

High-risk contacts – Active monitoring and in designated facility or home quarantine

- Public health authorities should conduct **daily follow-up for 42 days after last known exposure**, during which time the contact should be advised to avoid contact with other persons through remaining in a designated facilities or at home, depending on national guidelines and capacities.
- Follow-up may occur by telephone, messaging, telehealth, or in person.
- High-risk contacts (including healthcare workers) should refrain from returning to work for designated period.
- High-risk contacts should avoid contact with other household members, and where possible and remain in a separate room.
- In case social interactions are unavoidable, high-risk contacts should wear a respirator (e.g.FFP2 or N95 respirator), practice physical distancing, and observe regular hand hygiene.
- All unnecessary travel, nationally and internationally, should be discouraged for 42 days.
- Movement of the contact out of the jurisdiction of public health authorities in charge of their follow-up may be allowed for life-threatening or humanitarian reasons, provided that arrangements are made with the public health authorities in the jurisdiction at destination, including internationally through IHR channels.
- During daily follow-up, any symptoms: temperature, fever, fatigue or malaise, muscle ache, headache, gastrointestinal symptoms, respiratory symptoms, should done using a contact follow-up form (see Annex 2) and communicated as promptly as possible to the responsible local, national and international public health authorities.
- Any high-risk contact developing symptoms compatible with hantavirus infection should be promptly isolated, clinically evaluated and tested.

Low-risk contacts – Passive self-monitoring

- Self-monitor daily, and for 42 days from last exposure, for fever (using a thermometer, recording daily temperature), malaise, muscle ache, headache, gastrointestinal symptoms, respiratory symptoms, using a contact follow-up form (see Annex 2).
- No restrictions of the contact's daily occupational or recreational activities are warranted.
- Low-risk healthcare workers should notify occupational health at their respective workplace and follow local policy with respect to return to work.
- Movement of the contact out of the jurisdictions of public health authorities in charge of their follow-up should be allowed, provided that arrangements are made with the public health authorities in the jurisdiction at destination, including internationally.
- Any symptoms: temperature, fever, fatigue or malaise, muscle ache, headache, gastrointestinal symptoms, respiratory symptoms, should be promptly reported to local health authorities.
- Any low-risk contact developing symptoms compatible with hantavirus infection should promptly isolated, clinically evaluated and tested.

Repatriation Planning – The need for a coordinated approach

As of 8 May (10 PM CEST):

- After the ship's arrival in Tenerife on Sunday, May 10th, the Ministry of Health Spain, WHO, and ECDC will conduct an assessment on board the ship.
- Spanish nationals, including any symptomatic or ill passengers, will be directly taken by plane to the Gomez Ulla Central Defense hospital in Madrid for quarantine.
- Non-Spanish persons are expected to remain on board the ship until planes are ready for repatriation. These individuals will then be transported in smaller groups to the shore, avoiding contact with the local population.
- Ground transportation from the port to the airport will be arranged by ship company, supervised by Ministry of Health Spain as per established protocols.
 - Other countries' protocols for contact management will be activated from the moment the passengers are on board their respective aircraft.
- Non-Spanish passengers and crew who are symptomatic or ill will be medically evacuated to the Netherlands, as per protocol established between the Netherlands and the ship company.