Tenth meeting of the European Regional Verification Commission for Measles and Rubella Elimination

Summary of virtual sessions held on
6 October 2021, 2 November 2021, 8 December 2021 and 16 February 2022
Contents

Abbreviations ........................................................................................................................................ iii

Background ........................................................................................................................................... 1

Scope and purpose of the meeting ..................................................................................................... 1

Introduction and opening remarks .................................................................................................... 2

Status of measles and rubella elimination: global and regional updates ........................................... 3

Review of submitted reports and updates .......................................................................................... 5

Conclusions ....................................................................................................................................... 5

Recommendations .............................................................................................................................. 6

Annex 1. Results of the RVC review of reports and documents submitted by NVCs ...................... 8

Table 1. RVC conclusions on measles and rubella elimination status per Member State for 2020 ... 8

Table 2: Summary of measles and rubella elimination status for the European Region in 2020 ......... 9

Annex 2. RVC conclusions on status of measles and rubella elimination per Member State in the
WHO European Region in 2020 – (in alphabetical order)................................................................. 10

Annex 3. List of participants ............................................................................................................. 18
## Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASU</td>
<td>annual status update</td>
</tr>
<tr>
<td>CDC</td>
<td>United States Centers for Disease Control and Prevention</td>
</tr>
<tr>
<td>COVID-19</td>
<td>Infectious disease caused by the severe acute respiratory syndrome coronavirus type 2 (SARS-CoV-2 virus)</td>
</tr>
<tr>
<td>CRS</td>
<td>congenital rubella syndrome</td>
</tr>
<tr>
<td>IA2030</td>
<td>Immunization Agenda 2030</td>
</tr>
<tr>
<td>IgM</td>
<td>Immunoglobulin</td>
</tr>
<tr>
<td>MCV</td>
<td>measles-containing vaccine</td>
</tr>
<tr>
<td>MCV1</td>
<td>first dose of measles-containing vaccine</td>
</tr>
<tr>
<td>MCV2</td>
<td>second dose of measles-containing vaccine</td>
</tr>
<tr>
<td>MMR</td>
<td>measles-mumps-rubella vaccine</td>
</tr>
<tr>
<td>MRCV</td>
<td>measles- and rubella-containing vaccine</td>
</tr>
<tr>
<td>MRCV1</td>
<td>measles- and rubella-containing vaccine – first dose</td>
</tr>
<tr>
<td>MRCV2</td>
<td>measles- and rubella-containing vaccine – second dose</td>
</tr>
<tr>
<td>NVC</td>
<td>national verification committee for measles and rubella elimination</td>
</tr>
<tr>
<td>RCV</td>
<td>rubella-containing vaccine</td>
</tr>
<tr>
<td>RVC</td>
<td>European Regional Verification Commission for Measles and Rubella Elimination</td>
</tr>
<tr>
<td>SIA</td>
<td>supplementary immunization activity</td>
</tr>
<tr>
<td>VPI</td>
<td>Vaccine-preventable diseases and immunization programme, WHO Regional Office for Europe</td>
</tr>
</tbody>
</table>
Executive summary

The 10th meeting of the European Regional Verification Commission for Measles and Rubella Elimination (RVC) took place online over four sessions on 6 October, 2 November, 8 December 2021 and 16 February 2022 to review the 2020 annual status updates (ASUs) from Member States. The RVC evaluated 43 national ASUs for 2020 submitted by national verification committees (NVCs) by 16 February 2022. The RVC concluded that, by the end of 2020, 29 Member States had provided evidence to demonstrate that endemic transmission of measles was interrupted for at least 36 months and verified as eliminated. Similarly, endemic rubella transmission was interrupted in 41 Member States for at least 36 months and verified as eliminated. Due to large measles outbreaks in 2018 – 2019, measles transmission was considered to have been re-established in five countries that had previously achieved measles elimination status. Due to the COVID-19 pandemic, the customary annual RVC meeting was delayed and could not be held face to face, but the objectives of the annual meeting were met through the series of virtual meetings and teleconferences.

Background

The Regional Verification Commission for Measles and Rubella Elimination (RVC) was established by the WHO Regional Office for Europe in 2012 as an independent expert body with the mission to evaluate the documentation submitted by the national verification committee (NVC) in each country to verify the elimination of measles and rubella in the Region. The Vaccine-preventable-diseases and immunization programme (VPI) of the WHO Regional Office serves as the secretariat to the RVC and supports Member States throughout the process. The RVC holds annual meetings to determine the status of measles and rubella elimination in the WHO European Region based on ASUs and additional documents prepared and submitted by the NVCs. These reports include information on measles and rubella epidemiology, molecular epidemiology, the analysis of population immunity and immunization programme performance, the quality of surveillance and changes that may have occurred since the last report, together with additional information to support the NVC statement on measles and rubella elimination status. Due to the COVID-19 pandemic, the RVC and secretariat were unable to hold the customary annual face-to-face meeting, but the objectives of the annual meeting were met through a series of virtual meetings and teleconferences.

Scope and purpose of the meeting

The Commission reviewed the ASUs and other documentation (e.g., technical reports) submitted by NVCs and their secretariats and assessed the status of measles and rubella transmission in 2020.
Tenth meeting of the European Regional Verification Commission for Measles and Rubella Elimination

Member States of the Region. Based on its conclusions on 2020 and previous years, the RVC decided on the elimination status for each Member State that submitted a report.

The objectives of the 10th RVC meeting were:

- to inform the RVC about current epidemiology of measles and rubella in the European Region and activities of the Regional Office and the VPI programme towards measles and rubella elimination, as well as global developments on measles and rubella control and elimination;
- to review the 2020 annual status update reports submitted by the NVCs and all other documentation provided to support, if applicable, the absence of endemic transmission of measles and rubella viruses;
- to validate the status of transmission of measles and rubella viruses in each Member State and in the Region for 2020 and declare disease elimination when achieved;
- to initiate preparation of the RVC’s measles and rubella elimination status report for 2020;
- to plan verification activities in 2021 and beyond, considering the role of the RVC in advocating for continuation of elimination efforts at global, regional and national levels;
- to assess RVC working procedures and verification process requirements.

Introduction and opening remarks

The meeting was opened by the RVC chair, Dr Günter Pfaff and participants were welcomed on behalf of WHO by Dr Siddhartha Datta, Regional Advisor, VPI. Due to the COVID-19 pandemic, the RVC and secretariat faced severe restrictions in organizing the customary annual face-to-face meeting of the RVC. However, the objectives of the annual meeting were achieved through a series of virtual meetings and teleconferences. With the use of new meeting technologies, there was a need to adapt the format of the meeting to permit full discussion and deliver meeting conclusions. At each of the sessions, the RVC was represented by an absolute or majority quorum, and all RVC members agreed on the decisions made on each of the ASUs. The RVC expressed its gratitude to the secretariat for arranging the extensive detailed discussions and information exchange with the NVCs. Even though Member States had to prioritize pandemic response activities, most Member States were able to provide their 2020 annual measles and rubella reports. The RVC expressed its appreciation to all Member States that provided their ASUs for 2020. The RVC would like to thank WHO headquarters, the United States Centers for Disease Control and Prevention (CDC), and all international partners for continuing their support in such a complex setting.
Status of measles and rubella elimination: global and regional updates

The RVC secretariat (VPI) and representatives of WHO headquarters provided updates on the current epidemiology of measles and rubella at the global level and in the European Region.

Global update

The global update highlighted the importance of the regional work on measles elimination activities and the framing of the WHO position that measles is the tracer of the strength of immunization systems. High population immunity is needed to stop transmission and when coverage is low, measles is the fastest vaccine-preventable disease to return and hits the hardest in settings of inequity.

The global epidemiological update shows there was a peak of measles cases early in 2019 with almost 873,000 cases reported, the highest number of cases reported since 1996. As expected, there was a decrease in cases in the post-outbreak period due to immunity from infection and outbreak immunization response activities but also due to effects of other present circumstances.

The Immunization Agenda (IA) 2030 contains a new indicator to track large and disruptive measles outbreaks (>20 reported cases per million) to help target technical support and advocacy. Countries that perform well at the national level can have subnational gaps, so assessments and activities at subnational levels can help tailor interventions. The 2020 WHO/UNICEF immunization coverage (WUENIC) data reported global coverage of the first dose of measles-containing vaccine (MCV1) as 84%, which was the first decline in a decade and represents 22 million unprotected children, highlighting the urgent need to immunize missed children to prevent measles outbreaks. Planned measles campaigns were significantly disrupted in 2020 due to the COVID-19 pandemic response activities and in 2021 due to COVID-19 vaccine rollout, during which there were considerable competing demands on healthcare resources.

Since March 2020, reported global measles cases have declined substantially for multiple reasons. With low-level transmission over the past 18 months, it has been difficult to raise the profile of measles and the need for continued vigilance:

- Large measles outbreaks and reported cases in 2018 – 2019 led to a significant reduction of susceptible individuals and increased population immunity due to outbreak response immunization activities.
- Non-pharmaceutical COVID-19 pandemic response measures included closed international borders, reduced travel, social distancing, and school closures, which reduced potential exposure to measles.
- Weaker measles and rubella surveillance led to likely under-reporting (people avoided medical facilities even if they were unwell, resulting in less detection, reporting and sampling; laboratories were redeployed for COVID-19 surveillance and had limited supplies).
Due to drops in routine immunization coverage and delayed supplementary immunization activities (SIAs), measles immunity gaps have widened and increased the potential for outbreaks in 2022 and the following years. In anticipation of this possibility, the globally coordinated Measles Outbreaks Strategic Response Plan (MOSRP) has helped to coordinate, prioritize and implement measles outbreak response assets.

**European Region update**

The 9th RVC meeting in 2020 concluded that, as of the end of 2019, 29 countries of 53 had eliminated endemic transmission of measles and 45 of 53 countries had eliminated endemic transmission of rubella.

In order to facilitate a comprehensive review of rubella elimination in endemic countries, the secretariat presented seven rubella retrospective reviews, which provided an in-depth analysis of rubella immunization and surveillance over a period of 3 years. Based on the detailed information and analysis, the RVC concluded that all seven assessed countries had interrupted endemic transmission of rubella and were verified as eliminated, putting the WHO European Region firmly on-track to be the second Region to achieve regional rubella elimination.

Due to large measles outbreaks throughout the European Region in 2018 – 2020, six countries were considered by the RVC to have re-established measles transmission in 2019 – Albania, Czechia, Lithuania, Slovakia, United Kingdom of Great Britain and Northern Ireland, and Uzbekistan. The surge in measles cases that began in 2017 peaked in 2019 with over 100,000 cases reported in the Region. Monthly case reports in the initial months of 2020 showed a significant decrease in transmission compared to 2018 and 2019. However, this was still higher than for the same period in 2016 and 2017 and may be an underestimation due to disruptions in surveillance for measles caused by the COVID-19 pandemic. The full impact of COVID-19 and disruptions of immunization and disease surveillance activities across the region is still unclear and will continue to be evaluated and reviewed in the context of measles and rubella elimination. The secretariat commends national health systems for their continued efforts to support vaccine-preventable diseases activities, by ensuring the prioritization of immunization programmes as a vital part of essential health services, despite the constraints due to COVID-19 immunization and response activities.

Processing the ASU and preparing for the RVC meetings while also responding to the pandemic has been difficult for the secretariat; and the technical assistance provided by CDC in analysing immunization and surveillance data and supporting the rubella retrospective reviews has been greatly appreciated.
Review of submitted reports and updates

In line with the *Eliminating measles and rubella: framework for the verification process in the WHO European Region*, the ASUs from Member States’ NVCs were allocated to RVC members for preliminary review and presented at the meeting, with a focus on disease epidemiology; surveillance performance; population immunity and any additional supplemental information. Due to the ongoing COVID-19 pandemic, the ASUs were reviewed by the full Commission in a series of remote online sessions: 6 October 2021, 2 November 2021, 8 December 2021, and 16 February 2022.

Conclusions on measles and rubella status for each Member State for 2020 are provided in Annex 1, together with a regional summary of measles and rubella status for 2020 and elimination status by Member State. Specific comments on the conclusions for each country are provided in Annex 2.

As in previous years, the quality and completeness of data were still lacking in some ASUs, in some cases even after multiple interventions from the secretariat. In addition, at the final session of the 10th RVC meeting, 10 ASUs for 2020 – from Albania, Bosnia and Herzegovina, Finland, France, Israel, North Macedonia, San Marino, Serbia, Slovenia and Ukraine – were still pending submission for evaluation by the RVC. These Member States were encouraged to submit their 2020 ASUs as soon as possible. The RVC expressed concern about the impact of the COVID-19 pandemic on measles and rubella disease transmission, immunization coverage and surveillance performance. The RVC requests the secretariat to provide additional information and any analysis on the impact of the COVID-19 pandemic, which will be particularly important during the review of 2021 ASUs.

Conclusions

The RVC concluded that based on reports submitted for 2020:

- 29 (55%) Member States provided evidence to demonstrate the elimination of endemic measles (interruption for at least 36 months) and 41 (77%) for the elimination of endemic rubella.
- 29 (55%) provided evidence for the elimination of both measles and rubella.
- 9 (17%) were considered endemic for measles.
- 4 (8%) Member States are categorized as endemic for rubella and plan to submit data for a rubella retrospective review.
- 5 (9%) countries were considered to have re-established measles transmission.
- 10 (19%) Member States had not yet submitted the 2020 ASU or any kind of report.

The RVC underlined that the overall low number of suspected, confirmed and discarded cases for both diseases, and the overall decreased completeness and quality of received ASUs complicated the Commission’s assessment. The RVC offered to reassess countries’ status in future, if additional
documentation becomes available. The RVC encouraged all Member States to sustain efforts to ensure no further backsliding in measles and rubella elimination even in the midst of other health emergencies including the COVID-19 pandemic.

Recommendations
For NVCs and their secretariats:

- The RVC appreciated the commitment and efforts of the national public health systems and the NVCs in support of measles and rubella elimination despite the extraordinary burden of responding to the COVID-19 pandemic in 2020.

- The RVC requested that NVCs (and their secretariats) make every effort to provide comprehensive and signed ASUs in advance of the submission deadlines to the RVC secretariat. The ASUs should include all available and relevant data for the RVC to verify measles and rubella elimination:
  - rate of discarded cases and genotyping information;
  - detailed epidemiologic data about cases (e.g., age, vaccination status) supported by outbreak reports, laboratory algorithm flowcharts, maps and phylogenetic graphics;
  - immunization coverage at national and subnational levels achieved through routine and supplemental activities;
  - any supplementary or alternative information including serosurveys and unpublished data.

- The RVC noted that the regional diversity of measles virus genotypes has been decreasing. This is consistent with global trends and demonstrates progress towards achieving regional elimination goals. The RVC looks forward to efforts at the global level to validate and provide guidance for the use of extended sequencing techniques to distinguish different measles virus lineages in verification of disease elimination. Member States should continue to collect specimens to confirm measles and rubella cases and outbreaks; to conduct genotyping of viruses by accredited laboratories; and to submit detected viral sequences to the global virus databases (MeaNS and RubeNS).

- The RVC recognizes that the COVID-19 pandemic affects measles and rubella elimination and verification activities. The RVC invites NVCs and their secretariats to seek better data and a more thorough understanding of measles and rubella epidemiology in 2020 and thereby eventually reassess elimination status.
For the RVC secretariat:

- The RVC secretariat should continue to provide remote and in-country technical support to Member States for achieving and documenting progress towards measles and rubella elimination goals.
- The RVC secretariat should prioritize support to Member States that did not submit ASU reports due to disruption caused by the COVID-19 pandemic.
- The RVC secretariat should continue to support the retrospective rubella reviews for Bosnia and Herzegovina, Italy, Poland, and Ukraine; and prepare documentation for regional rubella elimination.
- The RVC secretariat should consider supporting orientation and refresher training for NVCs and their secretariats on the verification process and supporting documentation.
- The RVC shared the Secretariat’s concerns on possible limitations and biases that the pandemic has created with respect to the verification process in 2020 and 2021 and endorsed the need to assess the pandemic’s effects on elimination and verification in countries. The RVC would appreciate to learn the secretariat’s plans for verification activities in future. The RVC would also appreciate any updates on pandemic effects assessments, once conducted by countries.
Annex 1. Results of the RVC review of reports and documents submitted by NVCs

Table 1. RVC conclusions on measles and rubella elimination status per Member State for 2020

<table>
<thead>
<tr>
<th>Country</th>
<th>Measles elimination status, 2020</th>
<th>Rubella elimination status, 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>Pending ASU</td>
<td>Pending ASU</td>
</tr>
<tr>
<td>Andorra</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Armenia</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Austria</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Azerbaijan</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Belarus</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Belgium</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Bosnia and Herzegovina</td>
<td>Pending ASU</td>
<td>Pending ASU and rubella</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>Re-established</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Croatia</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Cyprus</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Czechia</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Denmark</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Estonia</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Finland</td>
<td>Pending ASU</td>
<td>Pending ASU</td>
</tr>
<tr>
<td>France</td>
<td>Pending ASU</td>
<td>Pending ASU</td>
</tr>
<tr>
<td>Georgia</td>
<td>Endemic</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Germany</td>
<td>Endemic</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Greece</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Hungary</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Iceland</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Ireland</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Israel</td>
<td>Pending ASU</td>
<td>Pending ASU</td>
</tr>
<tr>
<td>Italy</td>
<td>Endemic</td>
<td>Pending rubella retrospective review</td>
</tr>
<tr>
<td>Kazakhstan</td>
<td>Endemic</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Kyrgyzstan</td>
<td>Endemic</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Latvia</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Lithuania</td>
<td>Re-established</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Luxembourg</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Malta</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Monaco</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Montenegro</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>Netherlands</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
<tr>
<td>North Macedonia</td>
<td>Pending ASU</td>
<td>Pending ASU</td>
</tr>
<tr>
<td>Norway</td>
<td>Eliminated</td>
<td>Eliminated</td>
</tr>
</tbody>
</table>
Table 2: Summary of measles and rubella elimination status for the European Region in 2020

<table>
<thead>
<tr>
<th>Country status</th>
<th>Measles</th>
<th>Rubella</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pending submission – 2020 ASU</td>
<td>10</td>
<td>12*</td>
</tr>
<tr>
<td>Eliminated</td>
<td>29</td>
<td>41</td>
</tr>
<tr>
<td>Interrupted 24 months</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Interrupted 12 months</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Re-established endemic</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Endemic</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>53</td>
<td>53</td>
</tr>
</tbody>
</table>

*Includes 4 Member States pending rubella retrospective reviews – Bosnia and Herzegovina, Italy, Poland, and Ukraine.
### Annex 2. RVC conclusions on status of measles and rubella elimination per Member State in the WHO European Region in 2020 – (in alphabetical order)

<table>
<thead>
<tr>
<th>Country</th>
<th>Status of measles and rubella elimination in 2020</th>
<th>Measles elimination</th>
<th>Rubella elimination</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>Pending ASU submission</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Andorra</td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td></td>
</tr>
<tr>
<td>Armenia</td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td></td>
</tr>
<tr>
<td>Austria</td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td></td>
</tr>
<tr>
<td>Azerbaijan</td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td></td>
</tr>
<tr>
<td>Belarus</td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td></td>
</tr>
<tr>
<td>Belgium</td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td></td>
</tr>
</tbody>
</table>

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Andorra in 2020 and confirms that measles and rubella elimination has been sustained. The RVC notes that there was a decline in coverage with the second dose of measles- and rubella-containing vaccine (MRCV2) in 2020 and efforts should be made to fill any immunization gaps as soon as possible. The RVC also recommends strengthening the sensitivity of measles and rubella surveillance.

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Austria in 2020 and confirms that measles and rubella elimination has been sustained. The RVC encourages efforts to address low coverage with second dose of measles- and rubella-containing vaccine (MRCV2) and document challenges that the immunization programme is facing. Efforts should continue to close immunity gaps as recommended by WHO; measles epidemiology (e.g., the age distribution of the measles cases among adults) should guide targeting of high-risk populations.

The RVC confirms that endemic transmission of both measles and rubella remained interrupted in Azerbaijan in 2020 and confirms that measles and rubella elimination has been sustained. The RVC urges continued efforts towards improving and maintaining high coverage with both doses of MRCV in all administrative territories. Additionally, the RVC recommends that the NVC include genotyping and epidemiological analysis to support elimination status in future ASUs.

The RVC confirms that endemic transmission of both measles and rubella remained interrupted in Belarus in 2020 and confirms that measles and rubella elimination has been sustained. The RVC highly appreciates the quality and completeness of the ASU, the high measles and rubella surveillance performance, and the well-organized public health system.

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Belgium in 2020 and congratulates the country on achieving measles elimination as well as sustaining rubella elimination. The RVC notes that MRCV coverage data are now 4-5 years out of date and that measles interruption will remain vulnerable as long as MRCV2 vaccination coverage remains low across all age groups, especially in the Brussels-Capital Region. The RVC applauds the initiative to catch up on vaccination among young adolescents and urges implementation of additional strategies to close immunity gaps.
throughout the population. The RVC appreciates the visual presentation of surveillance data and recommends that efforts to restore surveillance sensitivity are accelerated.

### Bosnia and Herzegovina
**Status of measles and rubella elimination in 2020**
Pending ASU submission

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

### Bulgaria
**Status of measles and rubella elimination in 2020**
Measles re-established
Rubella eliminated

The RVC concurs with the NVC’s assessment and concludes that the transmission of measles virus was re-established in Bulgaria due to ongoing measles transmission >12 months in 2019 and 2020, and the inability to distinguish chains of transmission and document absence of endemicity. The RVC confirms that endemic transmission of rubella viruses remained interrupted in Bulgaria and confirms that elimination has been sustained. The RVC encourages further efforts aimed at increasing vaccination coverage with both doses of MRCV, especially in high-risk and under-served population groups to ensure their effective protection against measles and rubella. Surveillance performance sensitivity needs to be further strengthened and documented in the ASU.

### Croatia
**Status of measles and rubella elimination in 2020**
Measles eliminated
Rubella eliminated

The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Croatia in 2020 and confirms that measles and rubella elimination has been sustained. The RVC recommends implementation of WHO strategies to maintain vaccination coverage across all susceptible ages, particularly in younger age groups. The RVC also recommends strengthening surveillance performance and improving ASU documentation.

### Cyprus
**Status of measles and rubella elimination in 2020**
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Cyprus in 2020 and confirms that measles and rubella elimination has been sustained. The RVC appreciates efforts made in active case finding and catchup activities. The RVC recommends additional efforts to ensure complete data and genotyping information are included in the ASU.

### Czechia
**Status of measles and rubella elimination in 2020**
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Czechia in 2020 and confirms that measles and rubella elimination has been sustained. The RVC appreciates the efforts being made to maintain high immunization coverage and surveillance during the COVID-19 pandemic.

### Denmark
**Status of measles and rubella elimination in 2020**
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Denmark in 2020 and confirms that measles and rubella elimination has been sustained. The RVC appreciates the efforts being made to maintain high immunization coverage and surveillance during the COVID-19 pandemic.

### Estonia
**Status of measles and rubella elimination in 2020**
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Estonia in 2020 and confirms that measles and rubella elimination has been sustained. The RVC recommends that urgent steps be taken to reverse declines in MRCV immunization coverage.
### Finland
**Status of measles and rubella elimination in 2020**
Pending ASU submission

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

### France
**Status of measles and rubella elimination in 2020**
Pending ASU submission

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

### Georgia
**Status of measles and rubella elimination in 2020**
Measles endemic  Rubella eliminated

The RVC confirms that endemic transmission of rubella virus remained interrupted in Georgia in 2020 and that rubella elimination has been sustained. Due to ongoing chains of transmission of measles virus >12 months, measles remains endemic in Georgia. The RVC encourages further steps to increase measles and rubella immunity particularly in administrative territories with vaccination coverage rates <90%. Quality and sensitivity of surveillance should be strengthened. Genotyping needs to be performed and used in investigation and analysis of chains of transmission.

### Germany
**Status of measles and rubella elimination in 2020**
Measles endemic  Rubella eliminated

The RVC confirms that endemic transmission of rubella virus remained interrupted in Germany in 2020 and that rubella elimination has been sustained. Due to ongoing chains of transmission of measles virus and insufficient information to exclude transmission for a period ≥12 months in 2019 and 2020, measles remains endemic in Germany. The RVC acknowledges the efforts of the NVC in documenting measles chains of transmission and the use of extended sequencing techniques to distinguish different lineages. The RVC looks forward to efforts at the global level to validate and provide guidance for the use of these techniques in the verification process.

### Greece
**Status of measles and rubella elimination in 2020**
Measles eliminated  Rubella eliminated

The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Greece in 2020 and confirms that measles and rubella elimination has been sustained. The RVC recommends strengthening surveillance performance (discarded cases with age, territorial distribution, laboratory results). There is an urgent need to create mechanisms to assess immunization achieved through routine immunization. The RVC commends efforts towards immunization activities among refugees, immigrants, asylum seekers and Roma population.

### Hungary
**Status of measles and rubella elimination in 2020**
Measles eliminated  Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Hungary in 2020 and confirms that measles and rubella elimination has been sustained. The RVC encourages additional efforts to strengthen surveillance sensitivity and documentation in future ASUs. The RVC also acknowledges challenges in reporting due to human resource shortages at all levels and the additional burden due to the COVID-19 pandemic.

### Iceland
**Status of measles and rubella elimination in 2020**
Measles eliminated  Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Iceland in 2020 and confirms that measles and rubella elimination has been sustained.
<table>
<thead>
<tr>
<th>Country</th>
<th>Status of measles and rubella elimination in 2020</th>
<th>Measles</th>
<th>Rubella</th>
</tr>
</thead>
</table>
| **Ireland**  | **Measles eliminated**  
**Rubella eliminated**  
The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Ireland in 2020 and confirms that measles and rubella elimination has been sustained. The RVC reiterates its concerns about the threat to measles elimination due to low vaccination coverage across age groups, especially in Dublin. The RVC continues to urge implementation of WHO-recommended strategies to close immunity gaps in the population. The RVC recommends that efforts are made to strengthen surveillance sensitivity and that steps are taken to advise general practitioners and hospitals to submit IgM requests to laboratories with full clinical data. |                      |                       |
| **Israel**   | **Pending ASU submission**  
The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible. |                      |                       |
| **Italy**    | **Measles endemic**  
**Rubella – pending retrospective review**  
The RVC confirms that endemic transmission of measles virus remained endemic in Italy. The RVC appreciates the efforts made at the national and subnational level to document and analyse rubella transmission and the work that has been done to complete the rubella retrospective review for Italy. The RVC looks forward to receiving the review along with the 2021 ASU. |                      |                       |
| **Kazakhstan** | **Measles endemic**  
**Rubella eliminated**  
The RVC understands the NVC’s position and its conclusion that rubella is still endemic in Kazakhstan, but based on available information and in line with the regional framework for the verification process, the RVC believes that endemic transmission of rubella virus remained interrupted in Kazakhstan in 2020 and that rubella elimination has been achieved. Due to ongoing chains of transmission of measles virus and insufficient information to exclude transmission for a period of ≥ 12 months in 2019 and 2020, measles remains endemic in Kazakhstan. The RVC encourages efforts towards improving the sensitivity and geographical representation of discarded cases. Genotyping for measles and rubella cases should be systematically performed and results used to support elimination efforts. The RVC encourages efforts to ensure high routine MRCV immunization coverage. Experts from the national measles-rubella laboratory could support interpretation of chains of transmission/sequencing and documentation for the ASU. |                      |                       |
| **Kyrgyzstan** | **Measles endemic**  
**Rubella eliminated**  
The RVC confirms that endemic transmission of rubella virus remained interrupted in Kyrgyzstan in 2020 and that rubella elimination has been sustained. Due to ongoing chains of transmission of measles virus and insufficient information to exclude transmission for a period of ≥ 12 months in 2019 and 2020, measles remains endemic in Kyrgyzstan. The RVC encourages efforts to ensure high routine MRCV immunization coverage. Experts from the national measles-rubella laboratory could support interpretation of chains of transmission/sequencing and documentation for the ASU. |                      |                       |
| **Latvia**   | **Measles eliminated**  
**Rubella eliminated**  
The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Latvia in 2020 and confirms that measles and rubella elimination has been sustained. The RVC is concerned about the decline in the second dose of MRCV in 2020, especially in Pierīga Region and recommends catching up on immunization of children who missed doses as soon as possible. The RVC recommends that efforts are made to strengthen surveillance sensitivities. |                      |                       |
<table>
<thead>
<tr>
<th>Country</th>
<th>Status of measles and rubella elimination in 2020</th>
<th>Measles</th>
<th>Rubella</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lithuania</td>
<td>Measles re-established Rubella eliminated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The RVC concludes that the transmission of measles virus was re-established in Lithuania due to ongoing transmission &gt;12 months in 2019 and 2020 and the inability to distinguish chains of transmission and document absence of endemicity. The RVC confirms that endemic transmission of rubella virus remained interrupted in Lithuania and confirms that elimination has been sustained. RVC reiterates its concern about the low MRCV coverage. RVC continues to urge implementation of WHO-recommended strategies to close immunity gaps in the population. Furthermore, RVC continues to recommend that all confirmed cases be genotyped.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Luxembourg</td>
<td>Measles eliminated Rubella eliminated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Luxembourg in 2020 and confirms that measles and rubella elimination has been sustained.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Malta</td>
<td>Measles eliminated Rubella eliminated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Malta in 2020 and confirms that measles and rubella elimination has been sustained. The RVC commends the country for fostering and maintaining strong public – private relationships with general practitioners who not only assure high coverage but also disease reporting. Based on previous recommendations, the RVC appreciates the efforts made to improve the quality of rubella surveillance.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monaco</td>
<td>Measles eliminated Rubella eliminated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Monaco in 2020 and confirms that measles and rubella elimination has been sustained. RVC recommends that steps be taken to develop and implement a more accurate method for ascertaining vaccination coverage, including MRCV1 and MRCV2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Montenegro</td>
<td>Measles eliminated Rubella eliminated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Based on technical data provided in the ASU, the RVC concludes that endemic transmission of both measles and rubella remained interrupted in Montenegro in 2019 and 2020 and confirms that measles and rubella elimination has been sustained. The RVC urges the national health authorities and public health system to consider further strengthening of the measles and rubella immunization programme and surveillance quality. Information about continually decreasing routine MRCV1 coverage is concerning and requires immediate actions. The RVC invites state authorities and technical counterparts to re-establish a functional NVC in the country.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Netherlands</td>
<td>Measles eliminated Rubella eliminated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in the Netherlands in 2020 and confirms that measles and rubella elimination has been sustained. Despite high levels of measles and rubella immunity as demonstrated by a serosurvey, coverage with the second dose of MRCV was reported to be suboptimal in half of the provinces. The RVC recommends efforts to close immunity gaps and improve surveillance sensitivity.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>North Macedonia</td>
<td>Pending ASU submission</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Country</td>
<td>Measles status</td>
<td>Rubella status</td>
<td>Status of measles and rubella elimination in 2020</td>
</tr>
<tr>
<td>------------------</td>
<td>----------------</td>
<td>----------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Norway</strong></td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td>The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Norway in 2020 and confirm that measles and rubella elimination has been sustained. The RVC commends the national public health system for sustaining measles and rubella elimination efforts and the NVC for providing a detailed and complete ASU.</td>
</tr>
<tr>
<td><strong>Poland</strong></td>
<td>Measles endemic</td>
<td>Rubella – pending retrospective review</td>
<td>The RVC confirms that endemic transmission of measles virus remained interrupted in Poland. The RVC appreciates the efforts made at the national and subnational levels to document and analyse rubella transmission and the work that has been done to complete the rubella retrospective review for Poland. The RVC looks forward to receiving the review along with the 2021 ASU.</td>
</tr>
<tr>
<td><strong>Portugal</strong></td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td>The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Portugal in 2020 and confirms that measles and rubella elimination has been sustained. The RVC reiterates its concern regarding the on-going low sensitivity of measles and rubella surveillance and recommends that steps be taken to strengthen case detection.</td>
</tr>
<tr>
<td><strong>Republic of Moldova</strong></td>
<td>Measles eliminated</td>
<td>Rubella eliminated</td>
<td>The RVC confirms that endemic transmission of both measles and rubella viruses remained interrupted in Republic of Moldova in 2020 and confirms that measles and rubella elimination has been sustained. The RVC recommends continued activities to increase and maintain high immunization coverage level with MRCV1 in children below 2 years of age in all administrative territories. The RVC recommends efforts to improve measles and rubella surveillance sensitivity.</td>
</tr>
<tr>
<td><strong>Romania</strong></td>
<td>Measles endemic</td>
<td>Rubella eliminated</td>
<td>The RVC concludes that endemic transmission of rubella remained interrupted in 2020 and confirms that rubella elimination has been sustained; and that due to ongoing transmission, measles remained endemic in Romania. The RVC urges the national health authorities and public health systems to consider further efforts to strengthen the measles and rubella immunization programme and surveillance quality.</td>
</tr>
<tr>
<td><strong>Russian Federation</strong></td>
<td>Measles endemic</td>
<td>Rubella eliminated</td>
<td>The RVC confirms that endemic transmission of rubella virus remained interrupted in the Russian Federation in 2020 and that rubella elimination has been sustained. Due to ongoing chains of transmission of measles virus and insufficient information to exclude transmission for a period of ≥ 12 months in 2019 and 2020, measles remains endemic in the Russian Federation. The RVC appreciates the high-quality epidemiological and laboratory surveillance data and the analysis provided in the 2020 ASU. The molecular monitoring of measles virus documented multiple and regular importations throughout 2020. Under these conditions and to prevent prolonged circulation of measles virus, high and uniform population immunity is required. The RVC appreciates the efforts made to achieve high routine immunity coverage and supplementary immunization activities conducted in 2019.</td>
</tr>
<tr>
<td><strong>San Marino</strong></td>
<td>Pending ASU submission</td>
<td></td>
<td>The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.</td>
</tr>
</tbody>
</table>
### Serbia
Status of measles and rubella elimination in 2020
Pending ASU submission

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

### Slovakia
Status of measles and rubella elimination in 2020
Measles re-established
Rubella eliminated

The RVC concludes that for Slovakia the transmission of measles virus was re-established due to insufficient information to exclude transmission for a period ≥ 12 months in 2019 and 2020, and the inability to distinguish chains of transmission and document absence of endemicity. The RVC confirms that endemic transmission of rubella virus remained interrupted in Slovakia and confirms that elimination has been sustained.

### Slovenia
Status of measles and rubella elimination in 2020
Pending ASU submission

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

### Spain
Status of measles and rubella elimination in 2020
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Spain in 2020 and confirms that measles and rubella elimination has been sustained. The RVC reiterates the need to strengthen measles and rubella case investigation and complete the process of assessing and documenting the proficiency of the private, sub-national laboratories that test suspected measles and rubella specimens, with progress reported in future ASUs.

### Sweden
Status of measles and rubella elimination in 2020
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Sweden in 2020 and confirms that measles and rubella elimination has been sustained. The RVC commends the national public health system for sustaining measles and rubella elimination efforts and the NVC for providing a detailed and complete ASU.

### Switzerland
Status of measles and rubella elimination in 2020
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Switzerland in 2020 and confirms that measles and rubella elimination has been sustained. Reported coverage in some cantons is suboptimal and the next ASU should include information about actions taken to increase coverage.

### Tajikistan
Status of measles and rubella elimination in 2020
Measles eliminated
Rubella eliminated

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Tajikistan in 2020 and confirms that measles and rubella elimination has been sustained.

### Türkiye
Status of measles and rubella elimination in 2020
Measles endemic
Rubella eliminated

The RVC concludes for Türkiye that the transmission of measles virus remained endemic; and the endemic transmission of rubella virus has been interrupted for a period greater than 36 months and is considered eliminated in Türkiye. The RVC appreciates the highly functioning national laboratory network and surveillance system throughout the country. Significant efforts placed to ensure access to immunization for high-risk groups, especially migrants/refugees, are important to ensure high, uniform coverage across the country and are highly commended. The RVC appreciates efforts made by the NVC in providing outstanding analytics in the 2020 ASU.
### Turkmenistan

**Status of measles and rubella elimination in 2020**

The RVC concludes that endemic transmission of both measles and rubella remained interrupted in Turkmenistan in 2020 and confirms that measles and rubella elimination has been sustained. The RVC appreciates the efforts being made to maintain high immunization coverage and surveillance during the COVID-19 pandemic.

- **Measles:** eliminated
- **Rubella:** eliminated

### Ukraine

**Status of measles and rubella elimination in 2020**

The RVC acknowledges the disruptions and constraints on the health system caused by the COVID-19 pandemic and encourages the NVC to submit an ASU for 2020, any supporting documents and other eventually missing documents from previous years as soon as possible.

- **Status:** Pending ASU submission

### United Kingdom of Great Britain and Northern Ireland

**Status of measles and rubella elimination in 2020**

The RVC confirms that endemic transmission of measles was re-established due to ongoing chains of transmission of measles virus, insufficient information to exclude transmission for a period of ≥ 12 months in 2019 and 2020, and the inability to distinguish chains of transmission and document absence of endemicity. The RVC confirms that endemic transmission of rubella virus remained interrupted in the United Kingdom and confirms that elimination has been sustained. The RVC reiterates its concern about the threat to measles elimination due to low MRCV2 coverage across age groups, especially in the capital city London. The RVC applauds the General Practitioner based initiative to catch up on vaccination among young adolescents and urges implementation of additional strategies to close immunity gaps throughout the population. The RVC appreciates the visual presentation of surveillance data and recommends that efforts to restore surveillance sensitivity are accelerated.

- **Measles:** re-established
- **Rubella:** eliminated

### Uzbekistan

**Status of measles and rubella elimination in 2020**

The RVC confirms that endemic transmission of measles was re-established due to ongoing chains of transmission of measles virus, insufficient information to exclude transmission for a period of ≥ 12 months in 2019 and 2020, and the inability to distinguish chains of transmission and document absence of endemicity. The RVC confirms that endemic transmission of rubella virus remained interrupted in Uzbekistan and confirms that elimination has been sustained. The RVC encourages efforts to ensure high routine MRCV immunization coverage and to conduct supplemental immunization activities. Experts from the national measles-rubella laboratory could support interpretation of chains of transmission/sequencing and documentation for the ASU.

- **Measles:** re-established
- **Rubella:** eliminated
Annex 3. List of participants

**RVC members**

**Robin Biellik**  
Retired epidemiologist (WHO, UNICEF and PATH)  
Switzerland

**Irja Davidkin**  
Retired Senior Researcher  
Finnish institute for health and welfare  
Finland

**Mira Kojouharova**  
Professor of Epidemiology  
Retired Deputy Director, National Center for Infectious and Parasitic Diseases  
Bulgaria

**Andrey Lobanov**  
Retired Medical Officer (WHO)  
Russian Federation

**Günter Pfaff**  
Retired, Ministry of Social Affairs and Integration, Baden-Württemberg  
Germany

**Jose Ignacio Santos**  
Professor, Department of Experimental Medicine  
Universidad Nacional Autónoma de México  
Mexico

**John Simpson**  
Senior Medical Advisor, UK Health Security Agency  
United Kingdom of Great Britain and Northern Ireland

**WHO Regional Office for Europe**

Malika Abdusalyamova  
Myriam Ben Mamou  
Siddhartha Datta  
Sergei Deshevoi  
José Hagan  
Shahin Huseynov  
Dragan Jankovic  
Mark Muscat  
Gabriella Nappi  
Patrick O’Connor  
Roberta Pastore  
Catharina de Kat  
Dovile Videbaek
Tenth meeting of the European Regional Verification Commission for Measles and Rubella Elimination

**WHO headquarters**
Expanded Programme on Immunization, Department of Immunization, Vaccines and Biologicals
Natasha Crowcroft
Katrina Kretsinger

**United States Centers for Disease Control and Prevention**
Laura Zimmerman
Global Immunization Division, Center for Global Health

Susan Reef (invited observer)
Global Immunization Division, Center for Global Health

**European Centre for Disease Prevention and Control**
Sabrina Bacci
Senior Expert, Vaccine-preventable Diseases Surveillance and Response

**UNICEF**
Svetlana Stefanet
Regional Immunization Specialist, Europe and Central Asia Regional Office
The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

Member States
Albania
Andorra
Armenia
Austria
Azerbaijan
Belarus
Belgium
Bosnia and Herzegovina
Bulgaria
Croatia
Cyprus
Czechia
Denmark
Estonia
Finland
France
Georgia
Germany
Greece
Hungary
Iceland
Ireland
Israel
Italy
Kazakhstan
Kyrgyzstan
Latvia
Lithuania
Luxembourg
Malta
Monaco
Montenegro
Netherlands
North Macedonia
Norway
Poland
Portugal
Republic of Moldova
Romania
Russian Federation
San Marino
Serbia
Slovakia
Slovenia
Spain
Sweden
Switzerland
Tajikistan
Türkiye
Turkmenistan
Ukraine
United Kingdom
Uzbekistan

WHO/EURO:2022-6093-45858-66035