

# Hantavirus Outbreak brief



14<sup>th</sup> of May, 2026

Global attention is currently focused on a multi-country outbreak of hantavirus linked to the expedition cruise ship MV Hondius. The vessel departed Argentina on 1st April 2026, carrying 147 passengers and crew from 23 countries.

As of 14th May, the World Health Organization has reported 11 cases of hantavirus infection, including laboratory-confirmed Andes strain infections, and 3 deaths. Additional test results remain pending, and further cases are expected due to the long incubation period of the virus.

All confirmed cases to date are among individuals who were onboard the vessel. A coordinated international public health response is underway, with passengers and crew disembarking and returning to their home countries, where they are being closely monitored, isolated where appropriate, and tested throughout the incubation period.

Leading public health authorities, including the Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO), continue to assess the overall risk to the general public as very low, and no travel restrictions have been implemented.

## Hantavirus

Hantavirus refers to a group of viruses carried primarily by rodents. Humans become infected through contact with contaminated materials, such as dust containing rodent urine, droppings or saliva.

The Andes strain identified in this outbreak is associated with Hantavirus Pulmonary Syndrome (HPS), a severe disease affecting the lungs and other organs. While most hantaviruses do not spread between people, the Andes strain has been shown in rare cases to transmit between individuals in close and prolonged contact.

Symptoms typically begin between 2 and 4 weeks after exposure, but can develop up to 40 days or potentially 8 weeks later. Early symptoms include fever, headache, muscle aches and fatigue. In severe cases, infection can progress rapidly to respiratory distress and organ involvement. Mortality in confirmed cases has historically been approximately 30 to 40 percent.

There is currently no specific antiviral treatment or vaccine available, and medical management is supportive.

## **Epidemiological Overview**

The outbreak is most consistent with environmental exposure during the voyage, likely linked to contact with infected rodents. In Southern Argentina, the long-tailed pygmy rice rat (*Oligoryzomys longicaudatus*) is a known reservoir for the Andes virus strain.

There is also a possibility of limited human-to-human transmission onboard, particularly in close-contact settings such as caregiving environments. The reported illness in the ship's physician may represent such an exposure.

Individuals may be infectious up to 48 hours prior to symptom onset. However, human-to-human transmission remains rare and requires prolonged, close contact.

## **Public Health Response**

Passengers and crew have been repatriated from Tenerife between 9th and 10th May using dedicated aircraft rather than commercial travel. Public health authorities in each country are now responsible for managing returning individuals through isolation, monitoring and testing protocols throughout the incubation period.

National approaches vary, but typically include an initial period of controlled assessment followed by ongoing monitoring, which may extend up to 45 days from last potential exposure depending on national guidance.

## **Public Health Context**

This event is being managed as a localized, travel-associated cluster. While additional cases are expected as monitoring continues, current evidence indicates that all cases are linked to a single exposure setting, and there is no evidence of sustained transmission beyond close contacts.

International case identification reflects movement of exposed individuals rather than community spread. Overall public health risk remains low.

## Measures to Reduce Risk of Infection

For most travellers, there is no increased risk associated with routine travel.

Those travelling to rural or undeveloped areas where hantavirus is present should avoid contact with rodents and their droppings or urine, avoid entering enclosed or poorly ventilated spaces that may contain rodent contamination, and follow local public health guidance.

General preventative measures include maintaining good hand hygiene, avoiding contact with individuals who are unwell, and seeking medical advice if symptoms develop following potential exposure.

## Advice for Organisations

Organisations should continue to monitor reliable public health information sources and conduct appropriate travel and occupational risk assessments.





Clear policies for managing unwell employees should be maintained, including encouraging staff to stay home when symptomatic. Flexible working arrangements, such as hybrid or remote work, may help reduce the spread of infectious diseases in workplace settings.

Preparedness, proportionate response and access to accurate information remain key to managing infectious disease risks.

## Disclaimer

This briefing has been developed for educational purposes and reflects information available at the time of writing. It is not intended to replace professional medical advice. Please consult a qualified medical professional for specific concerns.

### References

-  Centers for Disease Control and Prevention (CDC), 2024, "Hantavirus"; Available at: <https://www.cdc.gov/hantavirus>
-  World Health Organization (WHO), 2023, "Hantavirus infections"; Available at: <https://www.who.int>
-  European Centre for Disease Prevention and Control (ECDC), 2024, "Hantavirus infection"; Available at: <https://www.ecdc.europa.eu>
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