

REGION 2 RESPTC PARTNER COMMUNITY | ANDES HANTAVIRUS OUTBREAK ON A CRUISE SHIP

May 7, 2026

Dear HHS Region 2 Regional Emerging Special Pathogen Treatment Center (RESPTC) Partner Community Members –

The World Health Organization (WHO) reported an outbreak of Andes virus (a specific species of hantavirus found mostly in Argentina and Chile with, on average, 120 cases per year) aboard a Dutch-flagged cruise ship, the MV Hondius, involving seven cases (two laboratory confirmed cases and five suspected cases), including three deaths as of May 4, 2026. The cruise ship departed Ushuaia, Argentina, on April 1, 2026, was traveling through the South Atlantic, and is now on its way to the Canary Islands for a medical risk assessment and planned passenger disembarkation.

Global health agencies have already initiated coordinated responses, including medical evacuations from the MV Hondius for those passengers with advanced symptoms. Although the mortality rate for this virus is high, the overall risk to the general public at this time is deemed low. NETEC and Region 2 RESPTC are closely monitoring the situation.

How is Andes virus transmitted to humans?

Infection is primarily acquired through direct contact with the urine, feces, or saliva of infected rodents. It can also be transmitted by touching surfaces contaminated with these rodent excretions. Typical exposure scenarios include cleaning buildings with rodent infestations or engaging in activities within rodent habitats.

While uncommon, human-to-human transmission has been documented in previous outbreaks involving the Andes virus. Close and prolonged contact, direct contact with infectious body fluids, or inhalation of aerosolized virus can lead to transmission. Risk factors include deep kissing, sexual contact, attending social gatherings, and sleeping in the same room as an infected individual. Rare cases of nosocomial transmission have also been reported.

What is the clinical presentation of Andes virus infection?

Andes virus causes Hantavirus Cardiopulmonary Syndrome (HCPS). Following an incubation period of 1-8 weeks (median 2 weeks), a prodrome phase is characterized by fever, myalgias, back pain, abdominal pain, vomiting and diarrhea. Rapid progression to severe illness follows with respiratory distress, pneumonia and shock. Case fatality rate ranges from 21-36%.

How does one diagnose and treat Andes virus infection?

Serologic testing to detect IgM and IgG antibodies, and PCR testing on blood should be performed.

There are currently no specific antiviral treatments or vaccines approved for HCPS. Early recognition and immediate transfer to an intensive care unit (ICU) for supportive care are critical for survival.

What are infection prevention and control recommendations?

Suspected or confirmed cases of Andes virus infection should be placed in an airborne infection isolation room (AIIR). Appropriate PPE includes a fluid-resistant gown (AAMI Level 3 or 4) or coverall, gloves, eye and face protection, and a fit-tested N95 or PAPR. NETEC has published updated [guidance](#) for health care workers. Suspected cases should be immediately reported to your local Health Department.

Source: World Health Organization (4 May 2026). Disease Outbreak News. Hantavirus cluster linked to cruise ship travel- Multi-country. Available [Here](#).

We appreciate your commitment to protecting our region's health care workforce, patients, and the broader community from special pathogen threats.

Sincerely,

The Region 2 RESPTC Team at NYC H+H/Bellevue