

TBE in Moldova

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E-CDC risk status: affected (limited data available)

History and current situation

Although there are no reliable data on the number of tick-borne encephalitis (TBE) cases or the percentage of infected ticks, based on the geography and the presence of TBE virus (TBEV) in all neighboring countries, it must be assumed that TBEV is present somewhere in Moldova.

The Far Eastern subtype (TBEV-FE) was detected in 3 different species of ticks collected from domestic animals and agricultural lands in the Republic of Moldova between 2010 and 2011 (*Ixodes ricinus*, *Dermacentor* spp. and *Haemaphysalis* spp.).¹ The World Health Organization (WHO) Centralized Information System for Infectious Diseases (CISID) collects data on the incidence of TBE; however, in 2005 and 2006, Moldova officially reported zero TBE cases.²

Overview of TBE in Moldova

Viral subtypes, distribution	Far Eastern subtype (TBEV-FE) ¹
Reservoir animals	Information not available
Infected tick species (%)	3.8% <i>I. ricinus</i> ticks (3/78), 3.9% <i>D. reticulatus</i> ticks (3/77) and 8.8% <i>Haemaphysalis punctata</i> ticks (3/34) were positive for TBEV RNA ¹
Dairy product transmission	Not documented

Burden of TBE in Moldova over time: no data available

Age and gender distribution of TBE in Moldova: no data available

TBEV-isolation and TBE cases in Moldova: no reported cases of TBE in the country

Table 2: TBE reporting and vaccine prevention in Moldova

Mandatory TBE reporting	Not mandatory
Other TBE surveillance	Not applicable
Special clinical features	Information not available
Available vaccines	Not applicable
Vaccination recommendations and reimbursement	No recommendations
Vaccine uptake by age group/risk group/general population	Data not available
Name, address/website of TBE NRC	National Centre of Public Health of Moldova (Ministry of Health) http://cnsp.md/ (available only in local language)

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References

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2. Amicizia D, Domnich A, Panatto D, et al. Epidemiology of tick-borne encephalitis (TBE) in Europe and its prevention by available vaccines. *Hum Vaccin Immunother*. 2013;9(5):1163-71.