

## Serial number : 2025/023

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Event: Cluster of Legionnaires' Disease cases associated with Sergios Hotel in Hersonissos in Crete, Greece

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## Contact

For general, routine enquiries about legionella such as guidance or testing arrangements, please contact <a href="mailto:legionella@ukhsa.gov.uk">legionella@ukhsa.gov.uk</a> (weekday working hours only). For further information on information in this briefing note contact the Legionella Surveillance Team Acute Respiratory Infections (ARI) <a href="mailto:legionella@ukhsa.gov.uk">legionella@ukhsa.gov.uk</a> (weekday working hours only). For further information on information in this briefing note contact the Legionella Surveillance Team Acute Respiratory Infections (ARI) <a href="mailto:legionella@ukhsa.gov.uk">legionella@ukhsa.gov.uk</a> (weekday working hours only).

For arranging reference microbiology sample testing, contact the Respiratory and Vaccine Preventable Bacteria Reference Unit (RVPBRU): **Tel: 020 8327 7887** (office hours). Outside of these hours, please contact the Colindale duty doctor on 0208 200 4400. Referral forms and additional information for the reference laboratory can be found at: https://www.gov.uk/guidance/rvpbru-reference-and-diagnostic-services

## IRP Level: Routine response

## Instructions for Cascade

- UKHSA Private Office Groups to cascade within Groups
- Regional Deputy Directors to cascade to Directors of Public Health
- UKHSA microbiologists to cascade to NHS Trust infection leads and non-UKHSA labs (NHS labs and private)
- NHS labs/NHS infection leads/NHS microbiologist to cascade to clinicians within Emergency Departments and relevant local services
- Devolved Administrations to cascade to Medical Directors and other DA teams as appropriate to their local arrangements

#### Event:

In the last month, four confirmed cases of Legionnaires' disease have been associated with Sergios Hotel in Hersonissos in Crete, Greece. The cases are from Scotland, Wales and one region in England. The four cases stayed at the same hotel between 30 April and 19 May 2025, and had symptom onset in a 2 week-period (ending 1 June). This potentially indicates a rapidly evolving cluster (defined as three cases within three months of each other's date of symptom onset). The sequence type for these *Legionella pneumophila* cases is not currently known.

While there is an association between Legionnaires' disease occurrence and stays at this hotel, **the hotel itself has not been confirmed as the source of infection.** The Greek public health authorities have been informed of the cluster via the International Health Regulations, National Focal Point (IHRNFP). WHO, ECDC and Association of British Travel Agents (ABTA) have also been informed.

## Implications & Recommendations

## **UKHSA Regions**

Health Protection Teams should be aware of the possibility of Legionellosis associated with travel to Hersonissos in Crete, Greece. For any new cases of Legionellosis reported to have stayed in and around Sergios Hotel or other accommodation sites in Hersonissos, please include the travel details on CIMS wizards/Legionnaires' reporting forms. Please also inform the national surveillance team of the cases <u>legionella@ukhsa.gov.uk</u>.

For all cases of Legionellosis, the national surveillance form should be completed and sent to the national legionella team as soon as possible,

https://www.gov.uk/government/publications/legionnaires-disease-national-surveillancescheme. To help identify potential sources and other cases associated with this cluster it is important to obtain the names and addresses of the accommodation sites where cases have stayed during their incubation period, with accurate dates of arrival and departure provided for each site.

# **Clinicians and NHS Providers**

Clinicians should be alert to any patients that present with symptoms suggestive of Legionellosis (including muscle aches, tiredness, headaches, dry cough and fever) with a history of recent travel to Hersonissos in Crete.

In these cases, it is recommended that appropriate diagnostic tests are performed. These consist of urinary antigen tests and wherever possible, sputum samples should be obtained for PCR/culture.

Please notify any suspected Legionnaires' disease case to the relevant <u>health protection</u> team (HPT) as soon as possible.

## Local and regional Laboratories

As per routine practice, urine specimens giving positive local results for legionellosis should be sent for confirmatory testing to the Respiratory and Vaccine Preventable Bacterial Reference Unit (RVPBRU), <u>https://www.gov.uk/government/publications/respiratory-and-</u> <u>systemic-bacteria-section-request-form</u>, at UKHSA, Colindale. **It is important that lower respiratory tract specimens are obtained** for confirmation and typing; lower respiratory tract specimens (usually sputum or bronchoalveolar lavage) should be collected and sent to the reference laboratory (RVPBRU) as soon as possible for PCR and culture.

## Implications & Recommendations for UKHSA sites and services

Duty doctors and the reference laboratory may receive queries; advice can be sought from the Legionella surveillance team: <a href="mailto:legionella@ukhsa.gov.uk">legionella@ukhsa.gov.uk</a>

# **References/ Sources of information**

https://www.gov.uk/government/collections/legionnaires-disease-guidance-data-and-analysis https://www.gov.uk/government/publications/legionnaires-disease-national-surveillancescheme https://www.gov.uk/government/publications/respiratory-and-systemic-bacteria-sectionrequest-form https://www.gov.uk/government/publications/bacteriology-reference-department-brd-usermanual