

Date: May 13, 2026

From: Kansas Department of Health and Environment – Division of Public Health

To: All HAN Users

RE: 2026 Multi-country Andes Strain Hantavirus Outbreak Associated with a Cruise Ship

Global Situational Update

On May 2, 2026, the World Health Organization (WHO) was notified of a cluster of severe acute respiratory illnesses among passengers and crew of the MV Hondius cruise ship in the South Atlantic Ocean. The cluster included two deaths and one critically ill passenger, whose laboratory tests confirmed hantavirus caused by the Andes virus.

As of May 12, 2026, eleven cases have been reported (nine confirmed and two suspected), including three deaths among the 149 passengers aboard the cruise ship. Investigations are ongoing to assess the exposure risk of all American passengers on the cruise ship or who may have been exposed to an infected cruise ship passenger on an aircraft.

Local Situational Update

On Saturday, May 9, 2026, KDHE was informed that three individuals arriving in Kansas were exposed to the Andes virus internationally after contact with an individual from the MV Hondius cruise ship who later tested positive for the Andes strain of hantavirus. KDHE, in coordination with the Centers for Disease Control and Prevention (CDC) and a local health department, is monitoring these individuals for signs and symptoms of hantavirus.

At this time, there are no confirmed cases of the Andes strain of hantavirus in Kansas. The risk to the general public from the Andes virus remains extremely low. KDHE will provide additional updates to the public and healthcare providers as necessary.

Background

On May 8, the CDC issued [Health Advisory No. 528](#) to inform clinicians and health departments about a cluster of hantavirus disease caused by the Andes virus. Hantaviruses are usually spread through contact with wild rodent droppings, urine, and saliva and are found in the Americas, including in the United States. However, this specific strain, the Andes virus, is unique to South America and is the only known strain to be able to spread person to person.

In the Americas, hantaviruses can cause hantavirus pulmonary syndrome (HPS), a severe and potentially deadly disease that affects the lungs. HPS can be life-threatening. Among patients

who have severe respiratory symptoms, the case fatality rate had been estimated at approximately 38%.

Symptoms of HPS caused by the Andes virus usually appear within 4-42 days after exposure. Early symptoms can include fever, fatigue, and muscle aches, especially in large muscle groups like the thighs, hips, back, and shoulders. About half of all HPS patients experience headache, dizziness, chills, and gastrointestinal symptoms, including nausea, vomiting, diarrhea, and abdominal pain. Late symptoms of HPS appear 4 – 10 days after the initial phase of illness and can include cough, chest tightness, and shortness of breath. Individuals are generally only infectious while symptomatic.

No specific treatment is recommended for hantavirus infection; early supportive care is critical even before the diagnosis is confirmed. Patients with suspected HPS can deteriorate rapidly, and delayed care reduces the chance of survival. In severe cases, extra-corporeal membrane oxygenation (ECMO) can significantly improve survival (up to ~80%) if started early. Usually, the critical phase of disease is fairly short, and survivors can recover quickly.

Recommendations for Healthcare Providers

- Be prepared to follow CDC's guidance under [Appendix A: Type and Duration of Precautions Recommended for Selected Infections and Conditions | Infection Control | CDC](#).
- In healthcare settings, for patients with suspected or confirmed Andes virus infection, CDC recommends patient placement in an airborne infection isolation room and the use of a gown, gloves, eye protection, and an N95 or higher-level respirator when entering the patient's room.
- Include HPS in the differential diagnosis for an ill person who has compatible symptoms AND who has reported epidemiological risk factors, including at least one of the following, within the 42 days before symptoms onset:
 - Had direct physical contact, or spent time in close or enclosed spaces, with a symptomatic person with confirmed or suspected Andes virus infection or with any objects contaminated by their body fluids.
 - Had exposure to an infected person's saliva, respiratory secretions, or other body fluids (e.g., kissing, sharing utensils, handling contaminated bedding).
 - Experienced a breach in infection prevention and control precautions that resulted in potential contact with body fluids of a patient with suspected or confirmed Andes virus infection.
- Early symptoms are nonspecific and can be attributed to more common viral illnesses. Consider and perform diagnostic testing for more common illnesses as well, such as

COVID-19, influenza, and other common causes of gastrointestinal and febrile illnesses in an acutely ill patient with epidemiological risk factors and compatible symptoms.

Reporting and Testing

Immediately call the KDHE Epidemiology Hotline at 877-427-7317, Option 5, if a case of hantavirus is suspected and KDHE staff will help guide you on diagnostic testing and patient management.

For general questions on hantaviruses, please reach out to the KDHE Epidemiology Hotline at kdhe.epihotline@ks.gov .

For press requests, please contact KDHE Communications at Jill.P.Bronaugh@ks.gov.

For additional information

For general information about hantavirus, visit the US Centers for Disease Control and Prevention page: <https://www.cdc.gov/hantavirus/about/index.html>.



For more specific information about the Andes virus, visit the US Centers for Disease Control and Prevention page: <https://www.cdc.gov/hantavirus/about/andesvirus.html>.



For more information about the current Andes virus outbreak that is linked to a cruise ship, visit the US Centers for Disease Control and Prevention page:
<https://www.cdc.gov/hantavirus/situation-summary/index.html>.

