

**Measles and Rubella  
Global Update  
July 2025**



**World Health  
Organization**



## Distribution list

This report is posted on the WHO Immunization data portal (<https://immunizationdata.who.int/global?topic=Provisional-measles-and-rubella-data&location=>) and distributed by email on a monthly basis.

To join the distribution list, please send an email to Sebastien Antoni ([antonis@who.int](mailto:antonis@who.int))

## Disclaimer

Please note that all data contained within is provisional. The number of cases of measles and rubella officially reported by a member state is only available by July of each year (through the joint WHO UNICEF annual data collection exercise). If any numbers from this provisional data are quoted, they should be properly sourced with a date (i.e. "provisional data based on monthly data reported to WHO (Geneva) as of July 2025"). For official data from 1980–2024, please visit our website.

# Data sources and limitations

The Global Measles and Rubella Report is based on surveillance data reported by Member States to the regional offices weekly or monthly. The regional compilation is reported to HQ monthly. Data are to be reported from the regions on the 1<sup>st</sup> Friday of the month, and HQ attempts to release the monthly report by the 3<sup>rd</sup> Monday of the month.

## Please note:

- Numbers of cases might differ from the official numbers reported annually as part of the WHO/UNICEF Joint reporting process (JRF). The difference can be due to the time lag as the annual data might not be complete at the time of reporting.
- In addition, the difference can be due to multiple surveillance systems at country level. In these cases, the monthly data are extracted from the case based surveillance system while the annual data can be from the aggregated system.

### Epidemiologic Data: Case-based and/or Aggregate Reporting to WHO

- Epidemiologic data comes from Member States in one of two forms
  - Case-based data, which is our recommendation, is provided by most member states. At WHO HQ, we collect a limited set of variables, including, age, date of onset, country reporting, 1<sup>st</sup>/2<sup>nd</sup> administrative unit of residence, vaccination status (by recall), date related to specimen collection/testing, and final classification. Regions might or might not collect more data than this. Often suspected cases with recent date of onset are not classified; however, at HQ we classify pending cases as clinically compatible and update the data if/when new data are provided to HQ. For AFR, we classify all cases that are rubella IgM+ as rubella laboratory-confirmed cases.
  - Aggregated data on number of suspected, lab-confirmed, epi-linked, and clinically compatible cases of measles/rubella, by month/year of onset, and by subnational area (though some member states do not provide this level of disaggregation).
    - Source for zero-reporting from some member-states though this is not a consistent process.
- A few member states send us both case-based and aggregated data as they have two different surveillance systems in the country.
  - If both aggregate and case-based data are sent to HQ, numbers from aggregate surveillance are considered case counts for the country, while case-based data are used for the national slides to show age distribution, proportion vaccinated, and age-specific incidence.

### Limitations

- Reporting delays: It can take 2–3 months from the time a case is reported to public health in a member state to the time the data are provided to WHO HQ.
  - Some of this is due to normal reporting delays that are expected as it takes time to get information from a health center to Geneva based on reporting frequencies set by various levels
  - We are working to decrease the delays in reporting.
- Underreporting/lack of reporting
- Case definitions for suspect, epidemiologically linked and clinically compatible cases may vary between countries.
- Completeness of the data reported to WHO is unknown
- For this monthly update, pending cases are considered measles clinically compatible.
  - These cases may later be discarded or confirmed based on laboratory testing in which case historical case counts may vary from one report to another.
  - This could lead to differences between the Global monthly report and Regional or National surveillance bulletins published by WHO Offices and National authorities.

### ELISA Laboratory Data from the Global Measles and Rubella Laboratory Network (GMRLN)

- The Global Measles Rubella Laboratory Network laboratories report the number of samples received as well as the number of samples tested for IgM serology, as well as the number positive, negative and equivocal.
  - These aggregated data are collected to account for the inadequate linking between laboratory and epidemiological data in some countries.
  - Numbers of cases reported may differ from the number of samples tested positive for various reasons
    - Samples tested positive in a laboratory may not reported to the surveillance system
    - IgG screening results are inappropriately included in the surveillance database
    - Inconsistent reporting from laboratories.
    - This is based on the number of SAMPLES tested, not the number of CASES tested. One case can have multiple samples being tested (e.g. different specimen types, repeat specimen collection based on timing of collection).

### Limitations

- Data are only from network laboratories
- Non-network laboratories are not included
- Some laboratories don't report
- IgG results are sometimes inappropriately reported

### Genotyping Data

Genotyping data are obtained from the MeaNS2 (<https://who-gmrln.org/means2>) and RubeNS2 (<https://who-gmrln.org/rubens2>).

### Limitations

- Inadequate sample collection for genotyping challenges interpretation of the data
- Underreporting
  - WHO recommends that Member States submit genotyping data to these databases, but it is not currently a requirement so there is underreporting
- Genotype data can't be linked to epidemiologic data at the global level

# Measles



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# Number of reported measles cases by WHO Region

## 2025

Region	Member States*	Suspected MR cases	Measles cases	Clin	Epi	Lab	Date Received
AFR	42/47	46,689	22,516	4,421	8,513	9,582	2025-07
AMR	31/35	16,599	7,240	3	1,668	5,569	2025-07
EMR	20/21	61,477	37,992	18,515	2,741	16,736	2025-07
EUR	47/53	30,536	22,395	4,240	4,739	13,416	2025-07
SEAR	11/11	60,361	13,201	5,665	2,065	5,471	2025-07
WPR	22/27	24,154	4,730	1,013	236	3,481	2025-07
Total	173/194	239,816	108,074	33,857	19,962	54,255	

Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	4,662	5,156	5,527	4,030	2,459	682	0	0	0	0	0	0
AMR	142	436	1,255	2,463	2,158	685	101	0	0	0	0	0
EMR	6,731	7,451	8,826	7,712	6,061	1,211	0	0	0	0	0	0
EUR	4,890	4,432	4,582	5,030	3,318	143	0	0	0	0	0	0
SEAR	2,334	2,390	2,564	2,426	2,011	1,476	0	0	0	0	0	0
WPR	1,248	1,521	1,034	505	422	0	0	0	0	0	0	0
Total	20,007	21,386	23,788	22,166	16,429	4,197	101	0	0	0	0	0

## 2024

Region	Member States*	Suspected MR cases	Measles cases	Clin	Epi	Lab	Date Received
AFR	43/47	153,308	86,127	15,884	51,811	18,432	2025-07
AMR	33/35	17,317	462	0	53	409	2025-07
EMR	21/21	164,426	96,713	52,179	6,207	38,327	2025-07
EUR	52/53	149,239	127,420	21,820	20,131	85,469	2025-07
SEAR	11/11	157,157	36,857	12,273	6,952	17,632	2025-07
WPR	25/27	67,848	12,011	3,774	673	7,564	2025-07
Total	185/194	709,295	359,590	105,930	85,827	167,833	

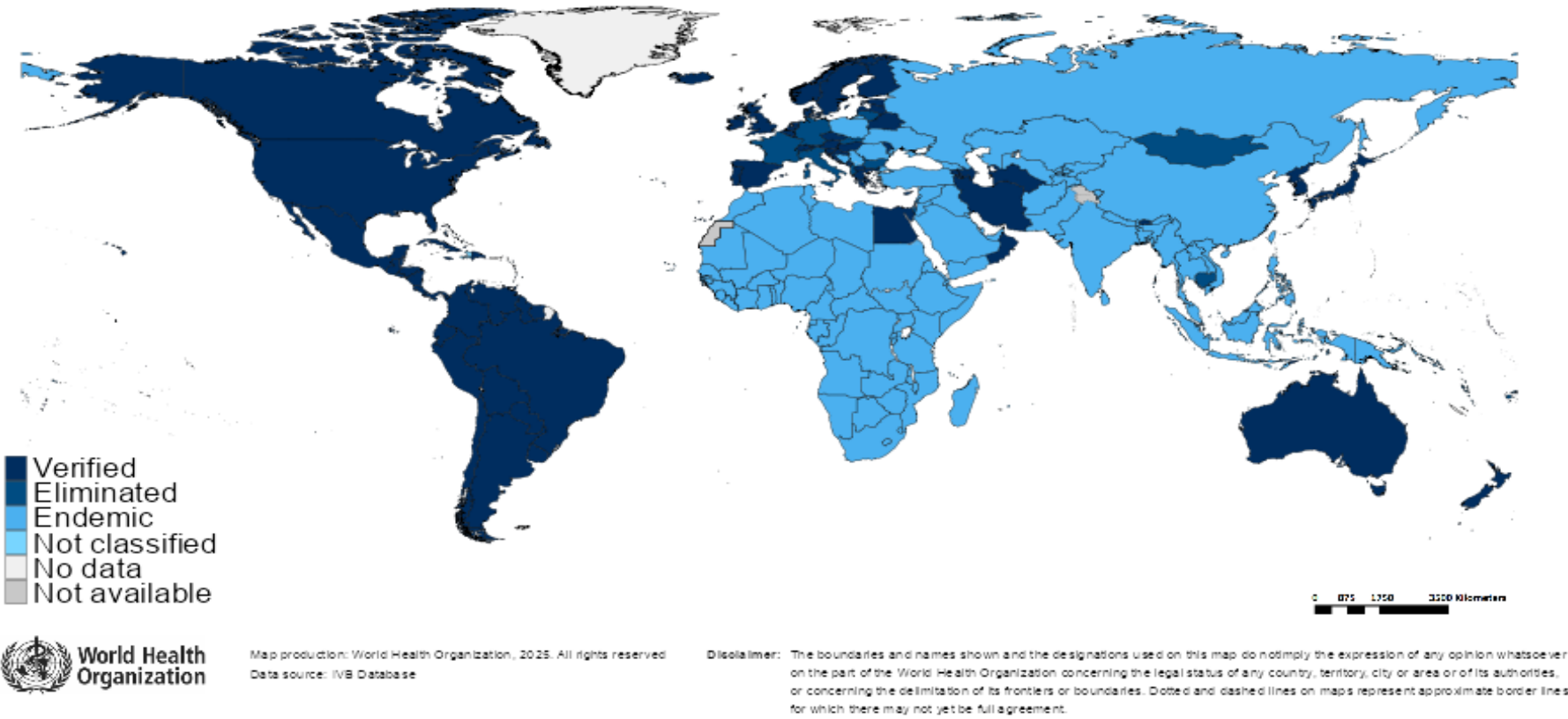
Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	13,630	15,801	19,233	11,624	7,782	4,419	2,969	2,331	2,501	2,270	2,207	1,360
AMR	23	49	103	47	18	19	41	38	37	33	44	10
EMR	13,513	15,485	15,739	10,912	10,914	7,073	5,088	3,559	3,838	3,695	3,272	3,625
EUR	29,073	24,210	20,549	15,702	12,921	9,448	5,177	2,411	1,501	1,392	2,018	3,018
SEAR	3,898	3,792	4,731	3,449	2,874	1,915	2,038	2,804	3,178	3,670	2,714	1,794
WPR	1,013	1,051	1,235	1,170	981	641	731	760	756	959	1,340	1,374
Total	61,150	60,388	61,590	42,904	35,490	23,515	16,044	11,903	11,811	12,019	11,595	11,181

Notes: Based on data received 2025-07 - This is surveillance data, hence for the last month, the data may be incomplete. \* Member States Reporting / Total Member States in Region

# Measles/rubella verification of elimination

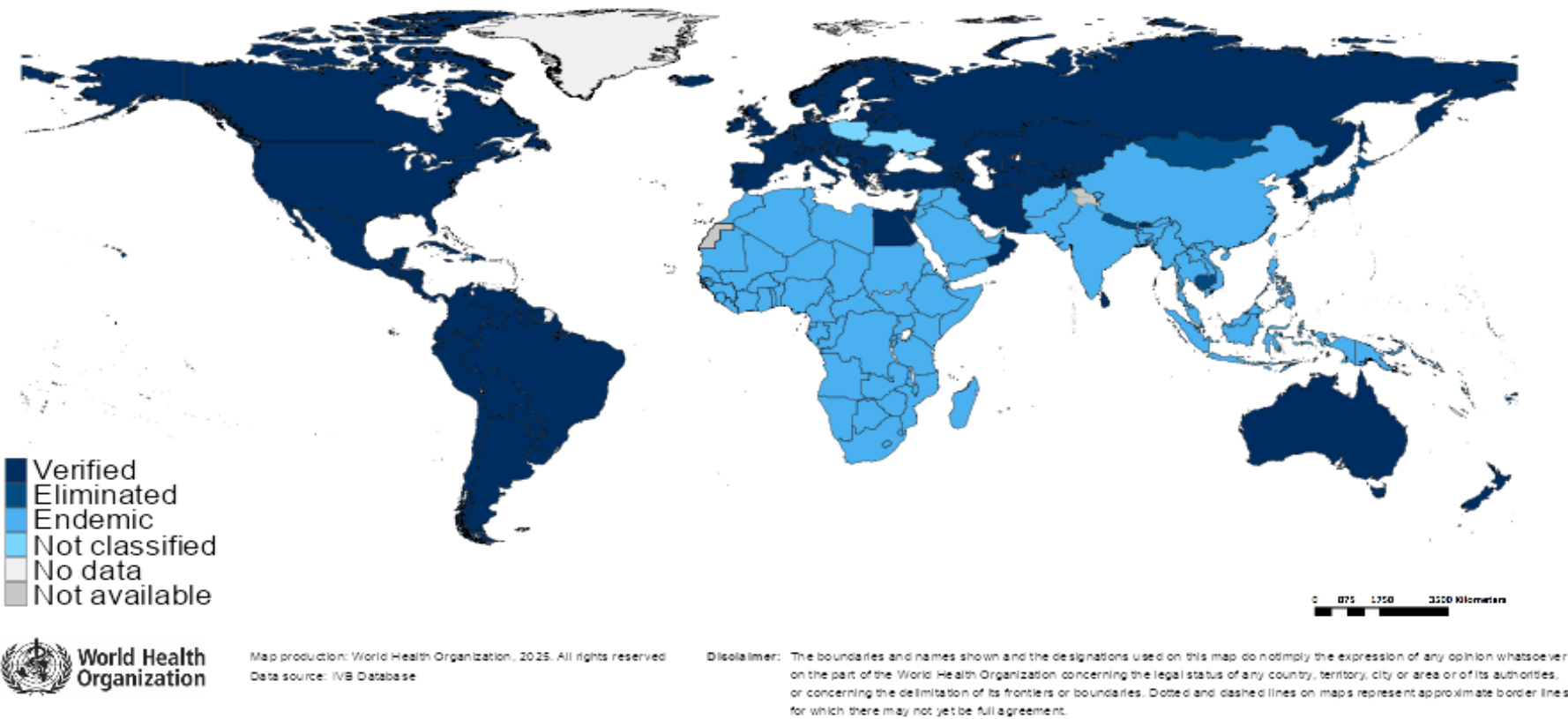
## Measles

Region	Member States	Verified	% Verified	Eliminated	Endemic	Not classified
AFR	47	0	0	0	47	0
AMR	35	34	97	0	0	1
EMR	21	4	19	0	17	0
EUR	53	33	62	8	12	0
SEAR	11	4	36	0	7	0
WPR	27	6	22	15	6	0
GLOBAL	194	81	42	23	89	1



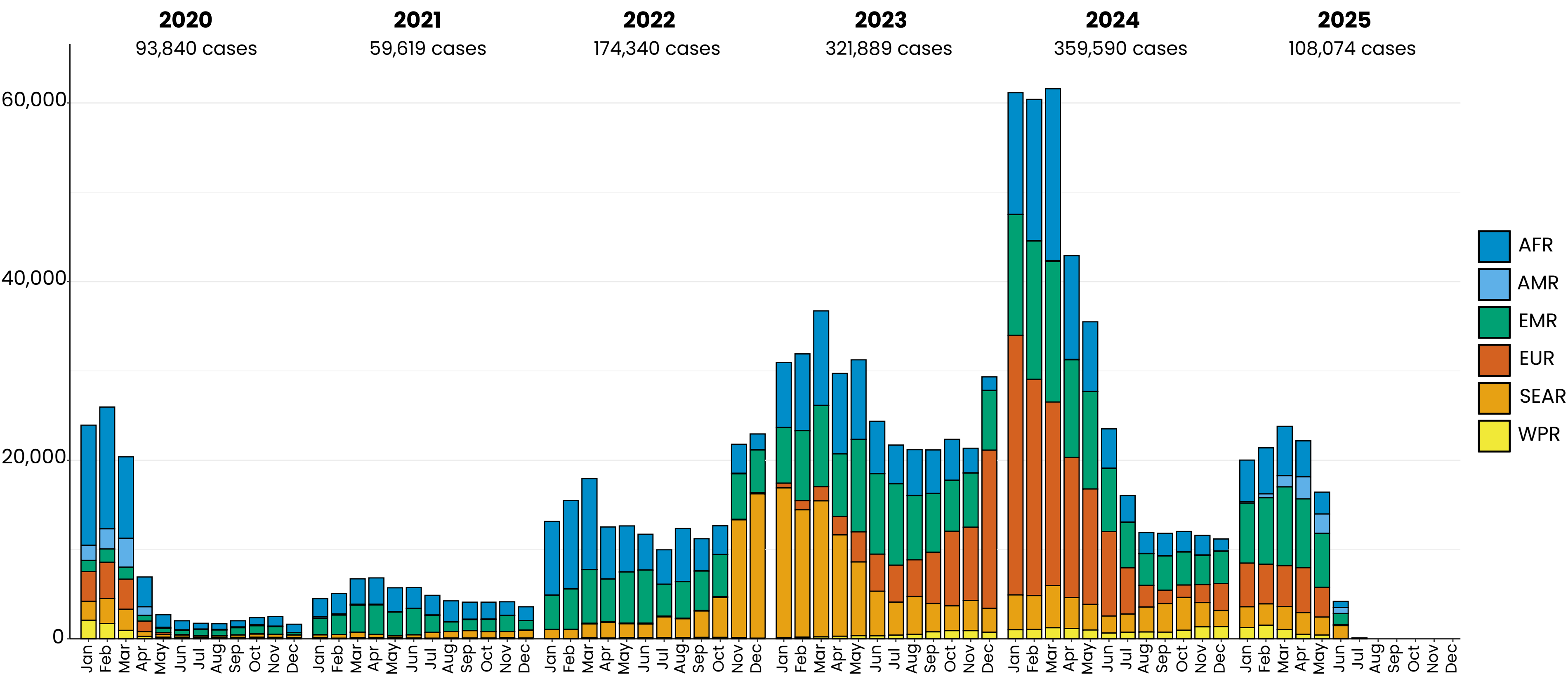
## Rubella

Region	Member States	Verified	% Verified	Eliminated	Endemic	Not classified
AFR	47	0	0	0	47	0
AMR	35	34	97	0	0	1
EMR	21	4	19	0	17	0
EUR	53	50	94	0	0	3
SEAR	11	5	45	1	5	0
WPR	27	5	19	16	6	0
GLOBAL	194	98	51	17	75	4



Notes: Based on data available at WHO HQ as of 2025-07-08 . Terms used on this slide refer to the global framework for the verification of measles and rubella elimination. These terms might differ from those used by WHO Regional Offices. Verified = Elimination verified by Regional Verification Committee (RVC); Eliminated = Eliminated transmission but no RVC verification yet.

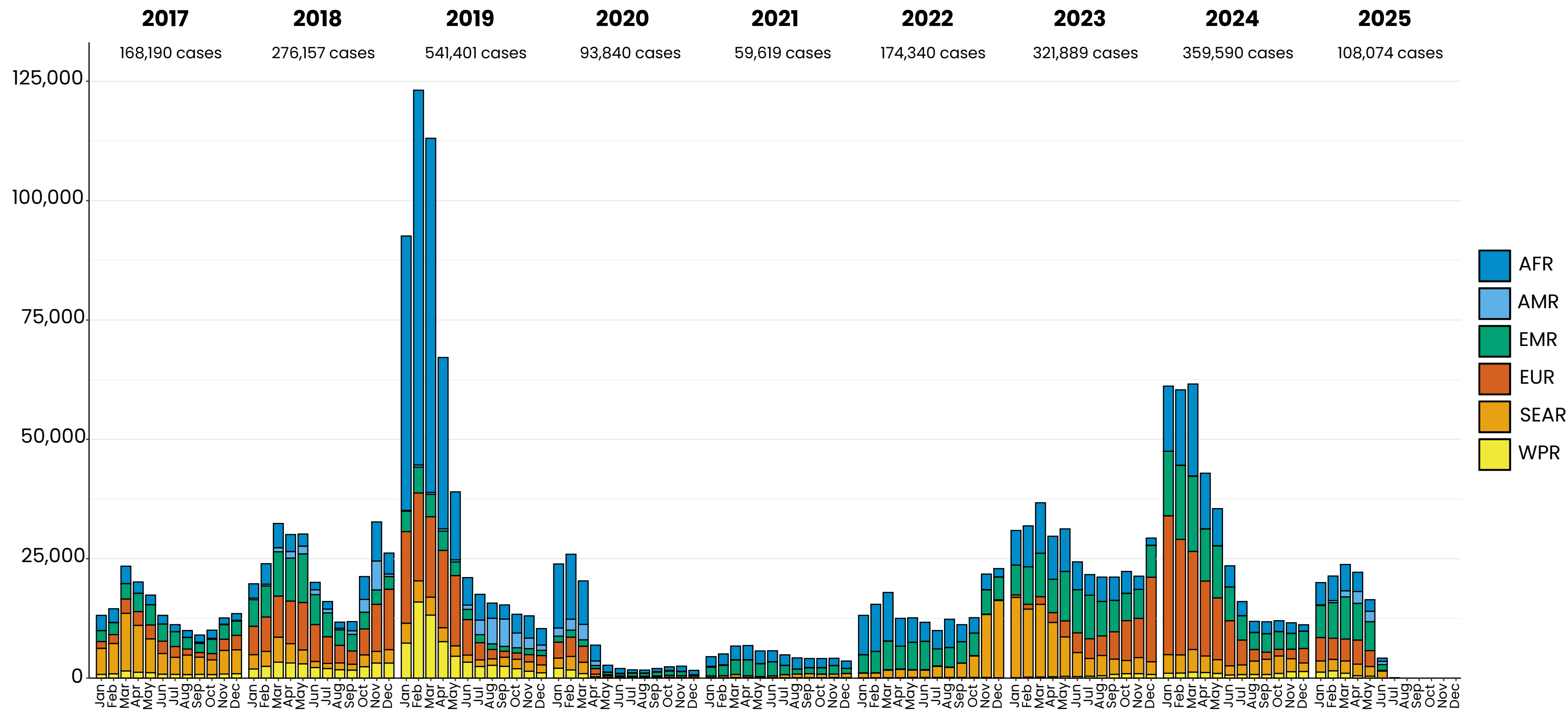
# Measles case distribution by month and WHO Region (2020–2025)



Based on data received 2025-07 - Data Source: IVB Database - This is surveillance data, hence for the last month(s), the data may be incomplete.

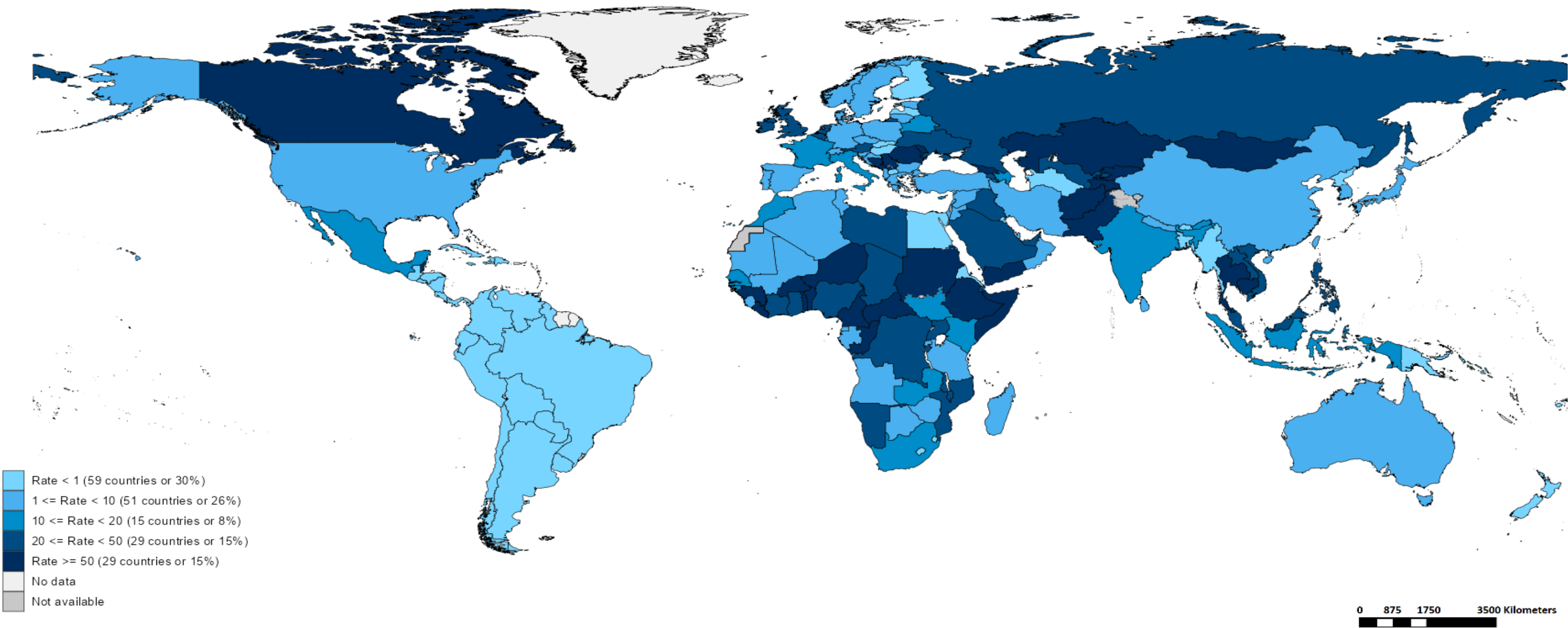


# Measles case distribution by month and WHO Region (2017–2025)



Based on data received 2025-07 - Data Source: IVB Database - This is surveillance data, hence for the last month(s), the data may be incomplete.

# Measles Incidence Rate per Million (12M period)



## Highest incidence rates

Country	Cases	Rate
Kyrgyzstan	10972	1,526.86
Romania	13071	687.40
Yemen	25987	640.34
Afghanistan	11631	272.72
Georgia	696	182.79
Kazakhstan	3275	159.04
Tajikistan	1676	158.25
Serbia	962	142.81
Mongolia	394	113.36
Thailand	7825	109.18



Map production: World Health Organization, 2025. All rights reserved  
Data source: IVB Database

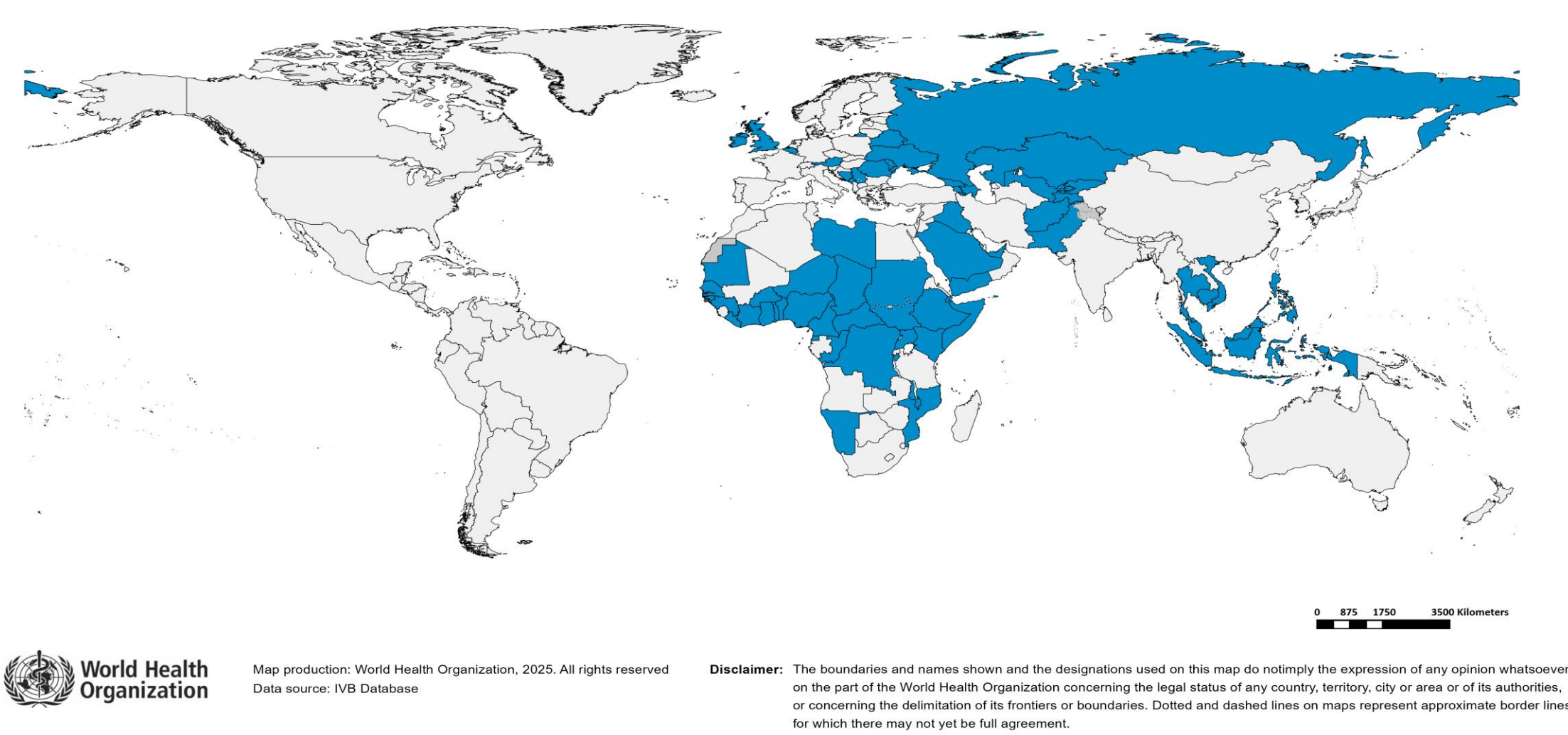
**Disclaimer:** The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

# Immunization Agenda 2030 – Impact Goal 1.3

Countries provisionally meeting the large and disruptive outbreaks definition – Data from 2024-03 to 2025-02 included

Country	Cases	Rate/M	Clinical*
Kyrgyzstan	12,463	1,708.42	46%
Romania	25,408	1,343.72	3%
Yemen	24,819	594.13	94%
Kazakhstan	11,930	572.35	3%
Bosnia and Herzegovina	1,308	416.55	80%
Iraq	17,116	364.01	85%
Azerbaijan	3,614	347.58	79%
Liberia	1,572	274.29	11%
Afghanistan	11,030	251.57	0%
Burkina Faso	5,182	215.25	73%
Equatorial Guinea	347	179.01	67%
Côte d'Ivoire	5,143	157.22	0%
Ethiopia	20,985	154.90	0%
Armenia	436	147.68	0%
Serbia	962	143.82	37%
South Sudan	1,684	138.16	77%
Burundi	1,766	122.72	1%
Thailand	8,308	116.00	35%
Russian Federation	15,769	109.51	0%
Georgia	366	96.15	5%
Pakistan	22,614	88.61	12%
Ghana	3,094	88.24	4%
Cambodia	1,567	87.80	0%
Niger	2,295	82.21	38%
Republic of Moldova	223	74.43	1%
Malaysia	2,658	73.88	6%
Somalia	1,420	72.25	0%
Benin	1,013	68.38	30%
Montenegro	41	64.80	0%
Guinea	910	60.27	12%
Djibouti	62	52.36	0%

Country	Cases	Rate/M	Clinical*
Monaco	2	52.16	0%
Togo	477	49.07	10%
Central African Republic	257	46.61	2%
Ireland	242	45.59	1%
Belgium	536	45.58	7%
Congo	265	40.87	5%
Austria	356	39.06	0%
Chad	811	38.61	6%
Belarus	344	38.23	0%
DR Congo	4,258	37.74	2%
United Kingdom of Great Britain and Northern Ireland	2,539	36.51	0%
Philippines	4,242	36.32	84%
United Arab Emirates	409	36.05	12%
Nigeria	8,450	35.57	60%
Cameroon	952	31.86	12%
Sudan	1,643	31.80	6%
Saudi Arabia	1,073	31.04	0%
Uzbekistan	1,124	30.33	1%
San Marino	1	29.79	0%
Tajikistan	310	28.74	0%
Mauritania	133	25.02	0%
Malawi	546	24.58	12%
Namibia	75	24.25	69%
Indonesia	6,908	24.18	55%
Libya	177	23.73	0%
Kenya	1,302	22.63	5%
Viet Nam	2,243	22.08	9%
Guinea-Bissau	49	21.78	100%
Senegal	408	21.55	8%
Uganda	1,064	20.71	5%
Mozambique	713	20.01	34%
Ukraine	780	20.01	10%



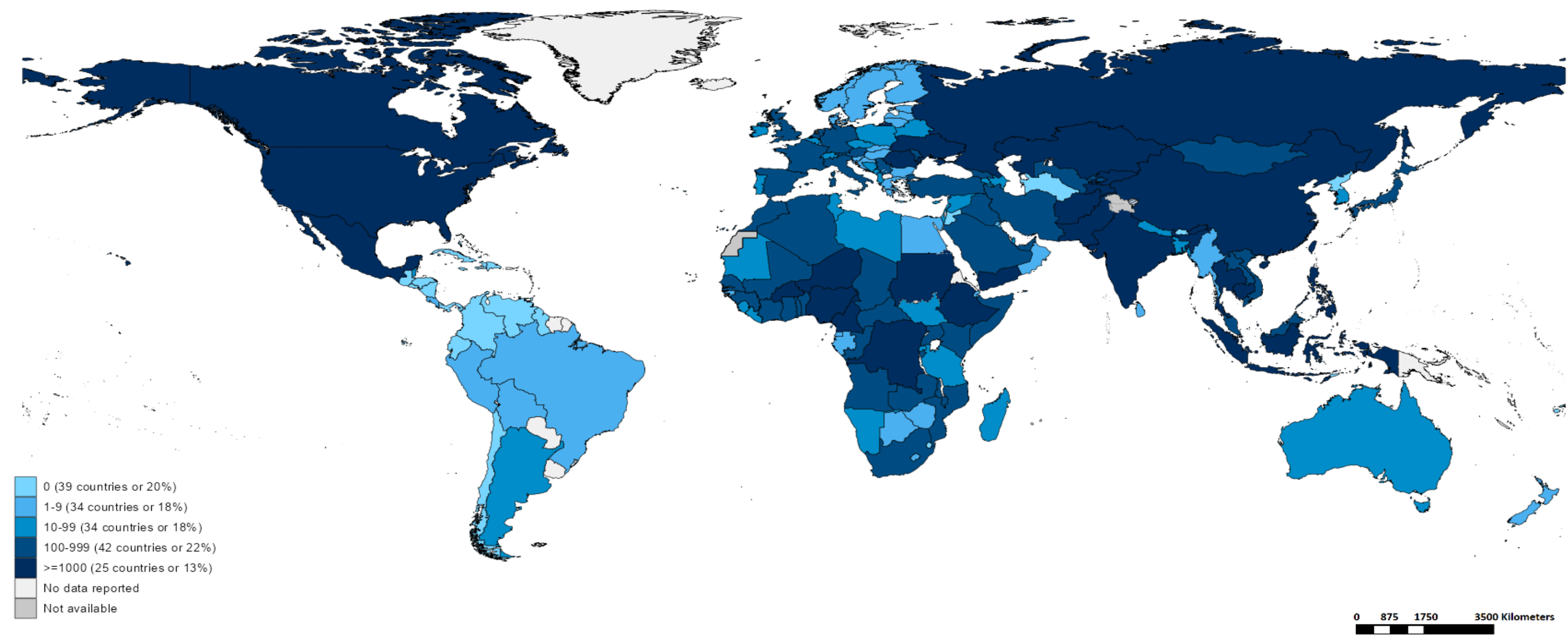
Total: 63 countries

In the frame of tracking progress towards the goals of Immunization Agenda 2030 (IA2030), an indicator has been developed by a working group in order to represent large and disruptive measles outbreaks. This indicator is defined as an incidence equal or greater than 20 reported measles cases per million population over a period of 12 months. It is important to note that measles outbreak definitions vary between countries and regions according to local context and level of progress towards regional elimination goals. This definition of large and disruptive outbreaks aims to complement and not replace the national and regional definitions, while also providing a degree of global standardization and permitting tracking of progress against a common metric.

Notes: Based on data received 2025-07 and covering the period between 2024-03 and 2025-02 – Incidence: Number of cases / 1M population – Population Data: World population prospects, 2019 revision – A high proportion of clinical cases indicates a high level of uncertainty associated with the incidence rates and the inclusion of countries in this list.



# Number of Reported Measles Cases (Last 6 months)



Country	Cases*
Yemen	15,683
Pakistan	12,732
India**	10,299
Kyrgyzstan	8,497
Afghanistan	7,615
Ethiopia	5,370
Romania	4,739
Nigeria	3,395
Canada	3,053
Russian Federation	2,781

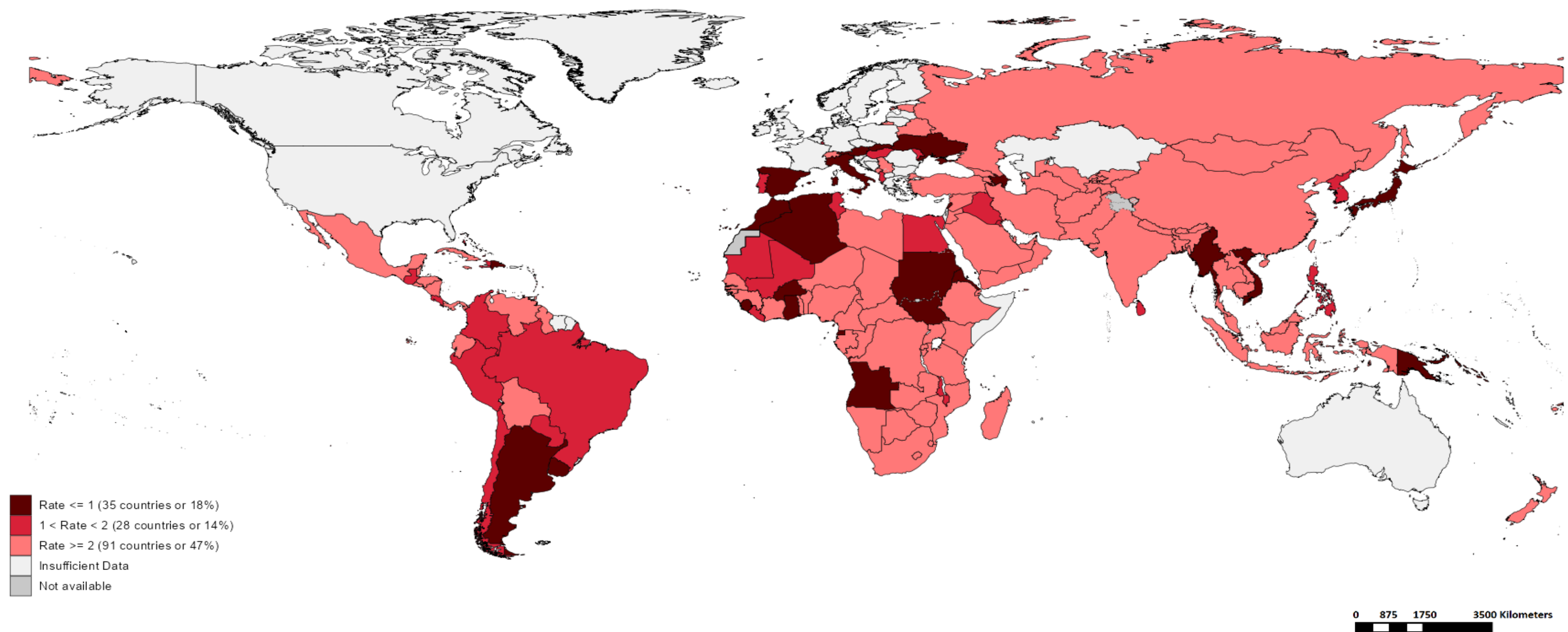


Map production: World Health Organization, 2025. All rights reserved  
Data source: IVB Database

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Notes: Based on data received 2025-07 – Surveillance data from 2024-12 to 2025-05 – \* Countries with highest number of cases for the period – \*\*WHO classifies all suspected measles cases reported from India as measles clinically compatible if a specimen was not collected as per the algorithm for classification of suspected measles in the WHO VPD Surveillance Standards. Thus numbers might be different between what WHO reports and what India reports.

# Surveillance sensitivity reporting rate of measles and rubella (12 months, discarded cases\* per 100,000 population)



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Notes: Based on data received 2025-07 - Surveillance data from 2024-06 to 2025-05 - Target:  $\geq 2$  discarded cases\* / 100,000 population\*\* - \* Suspected cases investigated and discarded as non-measles non-rubella using laboratory testing and/or epidemiological linkage to another etiology \*\* World population prospects, 2019 revision

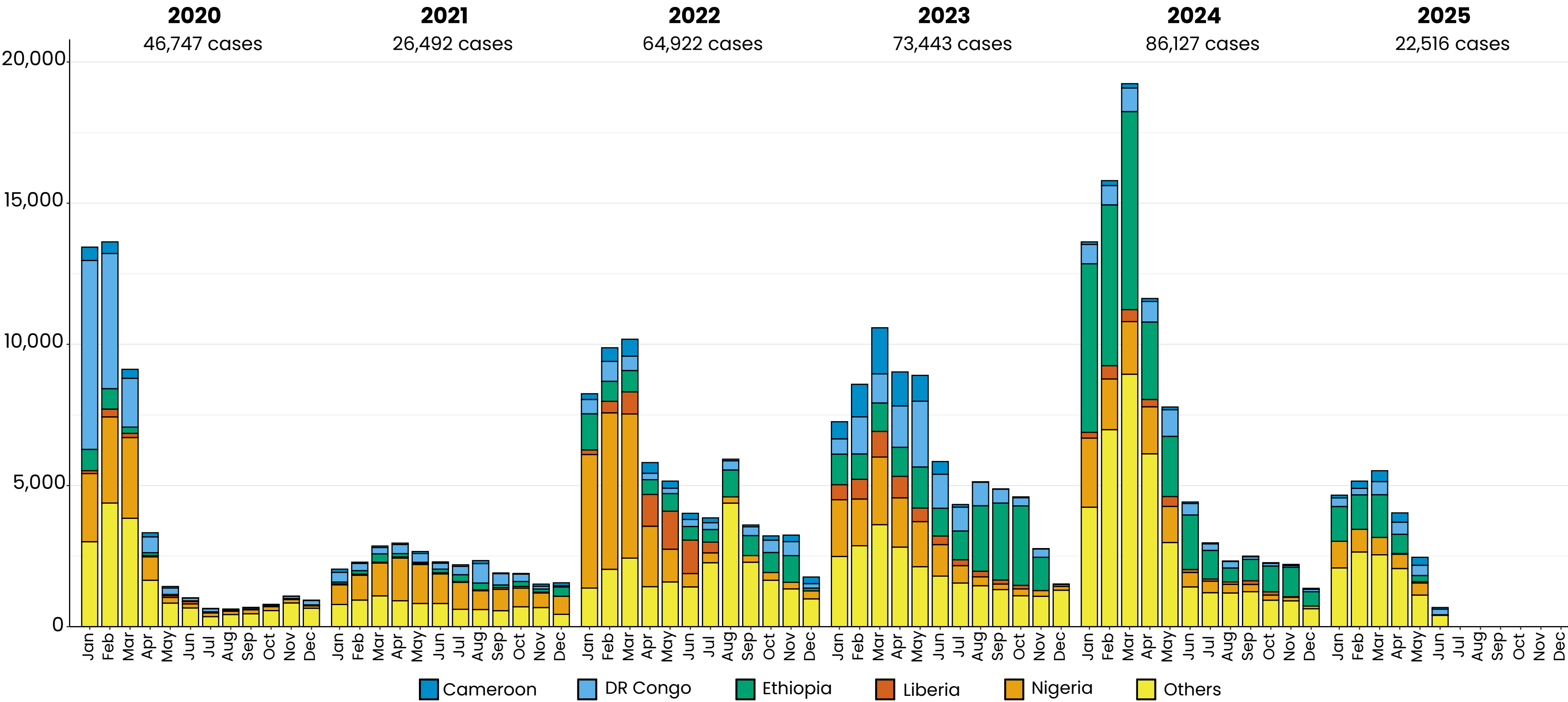
# Disclaimer

This document contains data provided to WHO by member states. Note that some member states only provide aggregate data to WHO, and for these, we are unable to generate a country profile. Some member states report all cases at one time point for the entire year, and thus epidemiologic curves generated are not accurate and a reporting artifact. For some countries, cases are reported by age category, not by exact age in months and/or years. Thus, age distribution/incidence is approximate. Cases classified as pending by countries are classified at WHO as clinically compatible at this time, and thus numbers might differ between data shown here and provided by the member state or WHO country/regional offices.

\*UN population data is used as the denominator for calculating incidence.

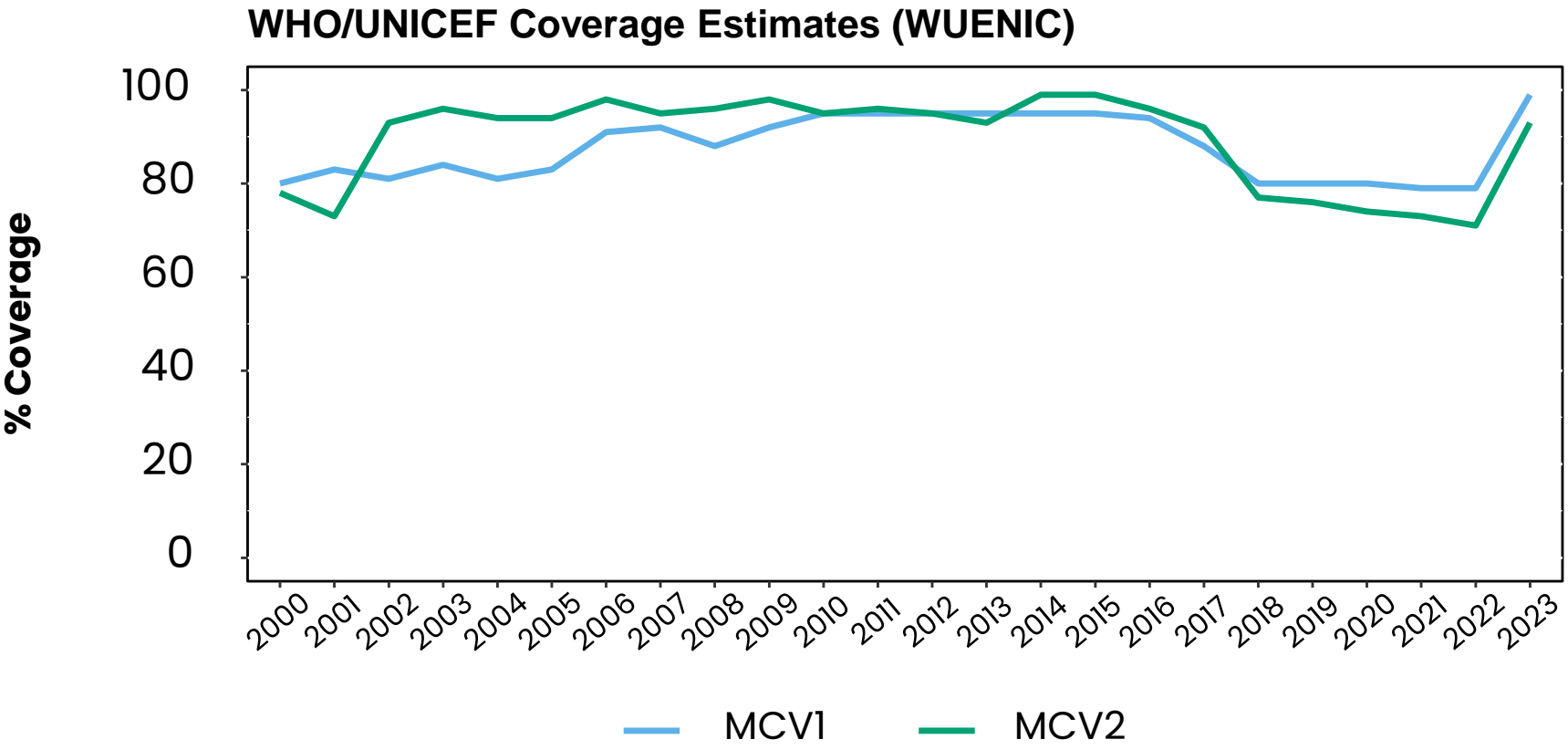
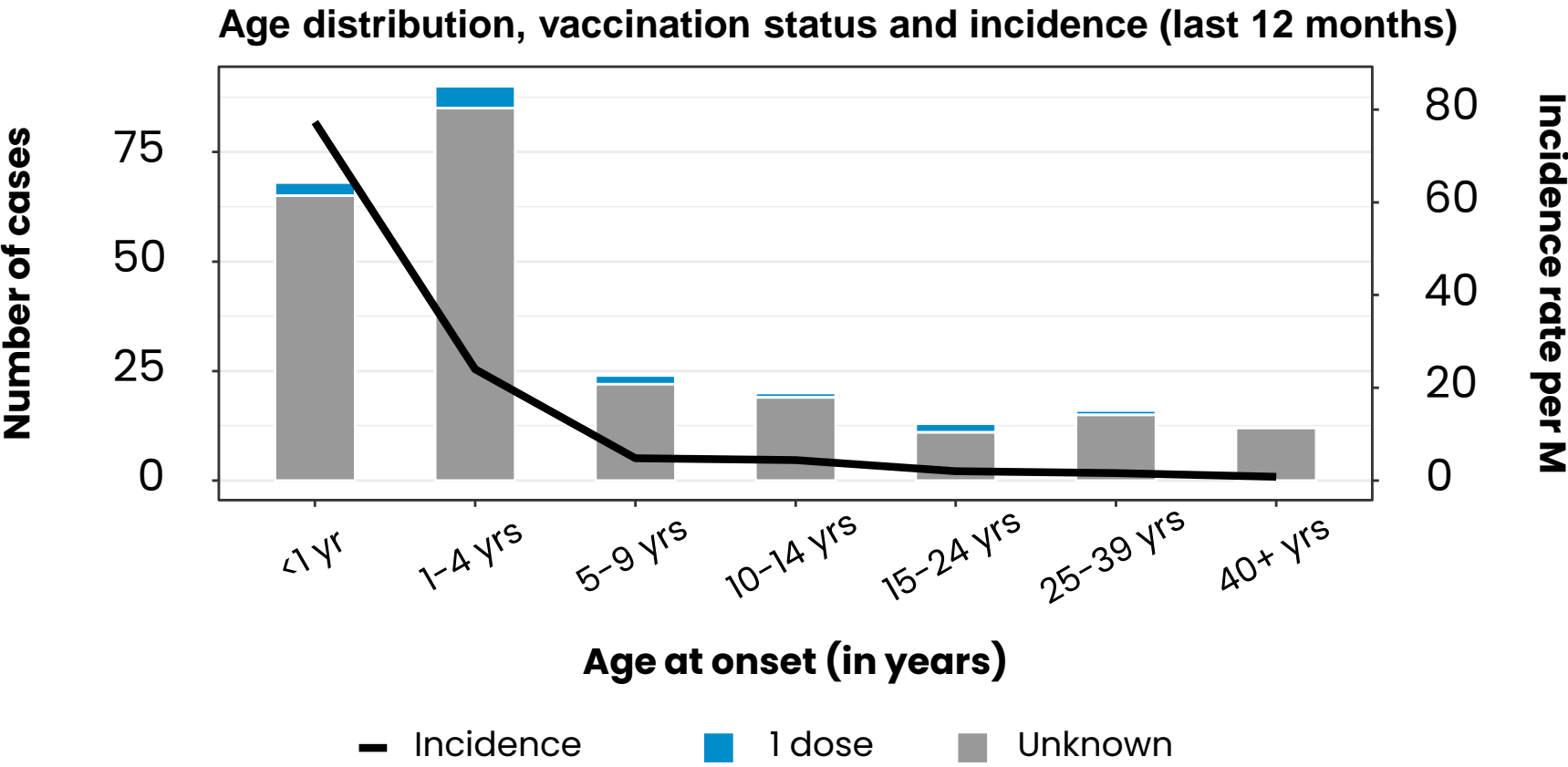
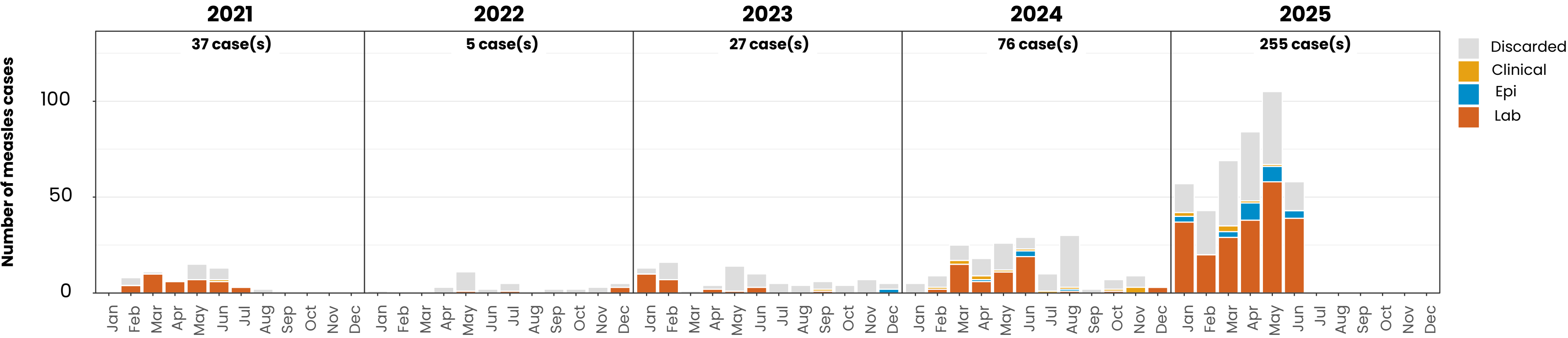
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# Measles case distribution (AFR), 2020-2025



Measles cases: Algeria

ELIMINATION STATUS: **ENDEMIC**

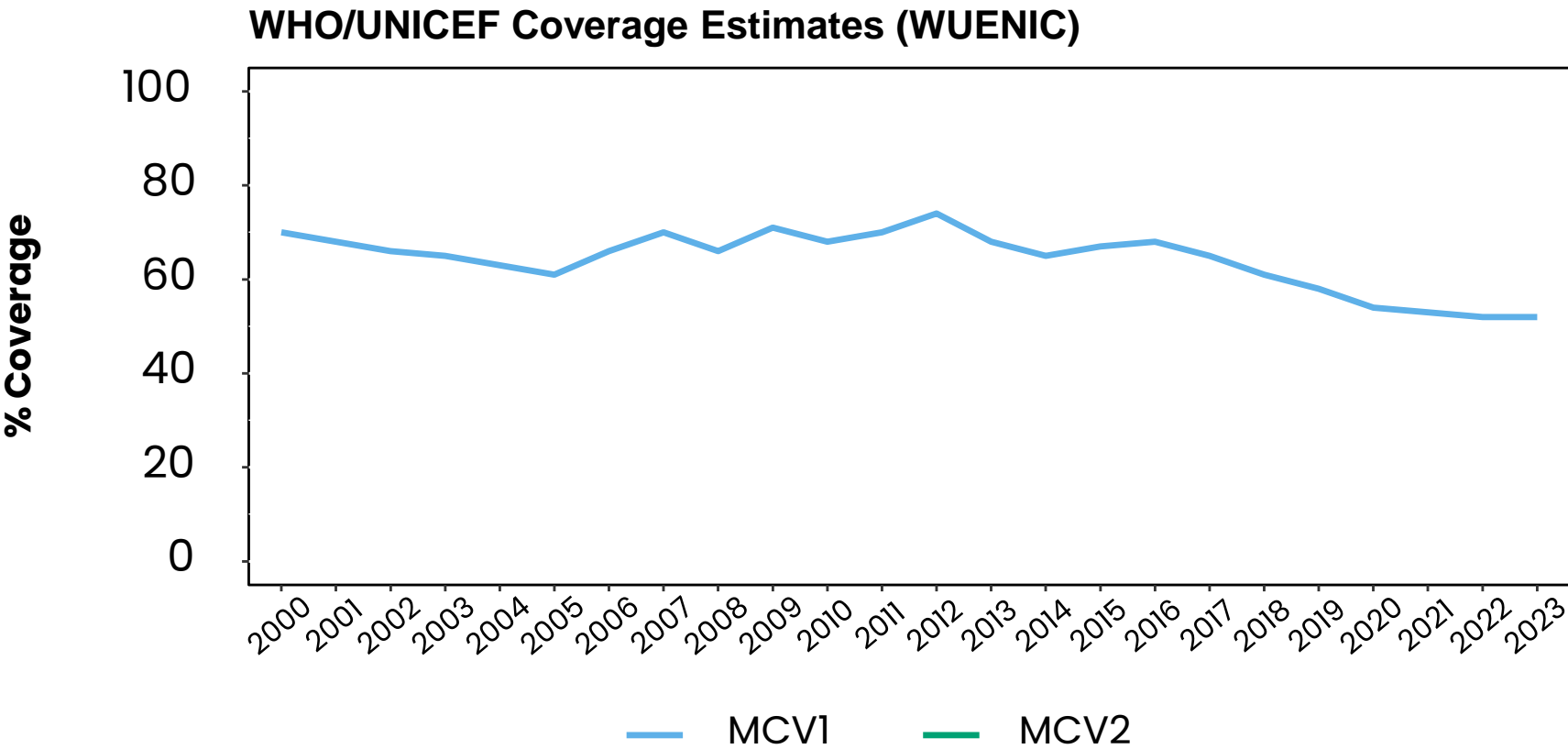
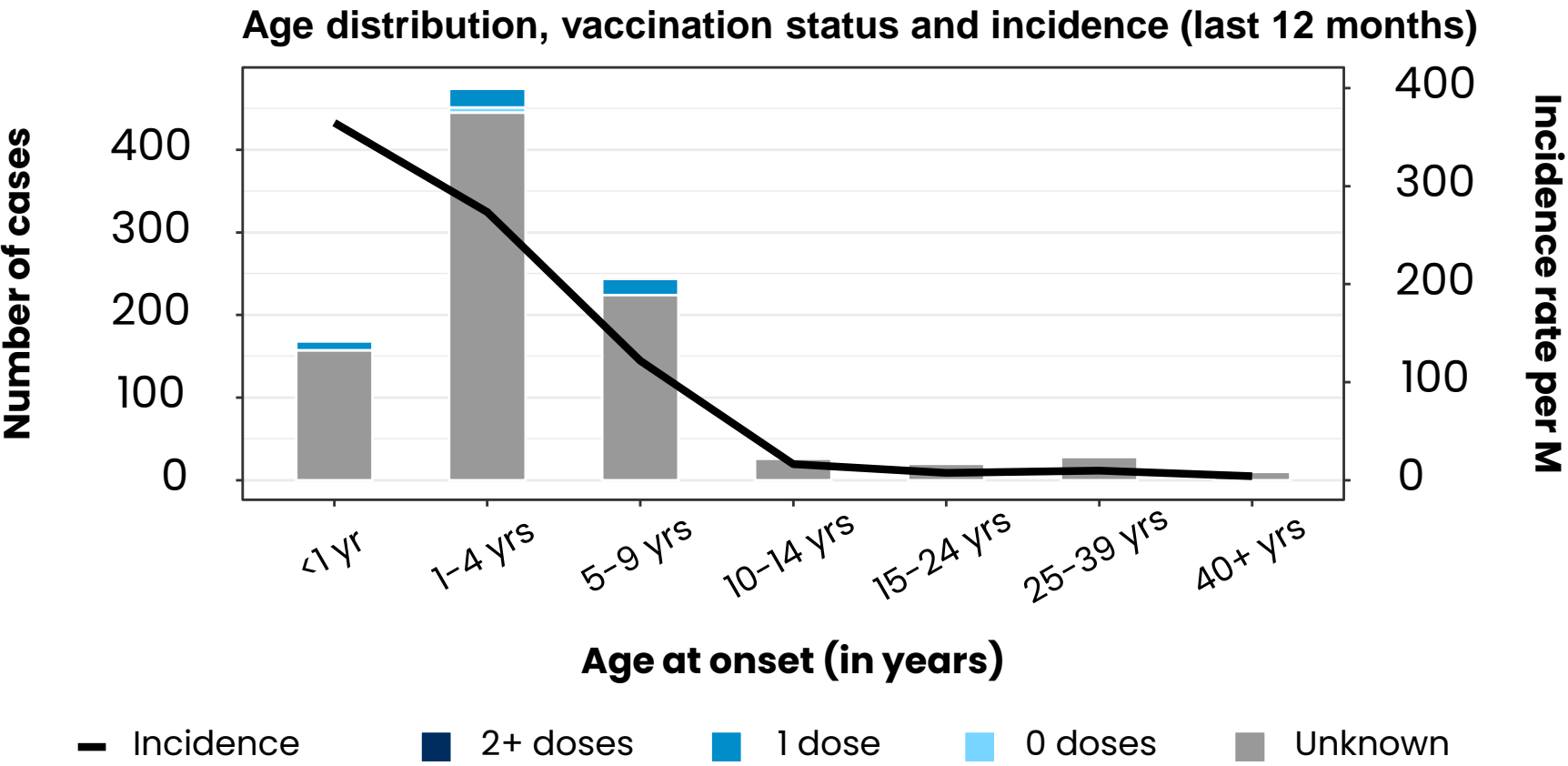
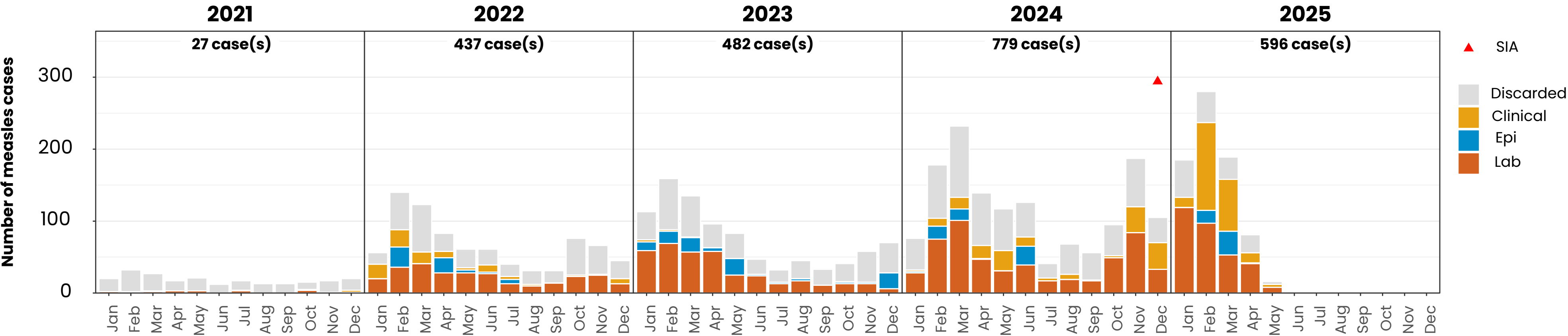


Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)



Measles cases: Benin

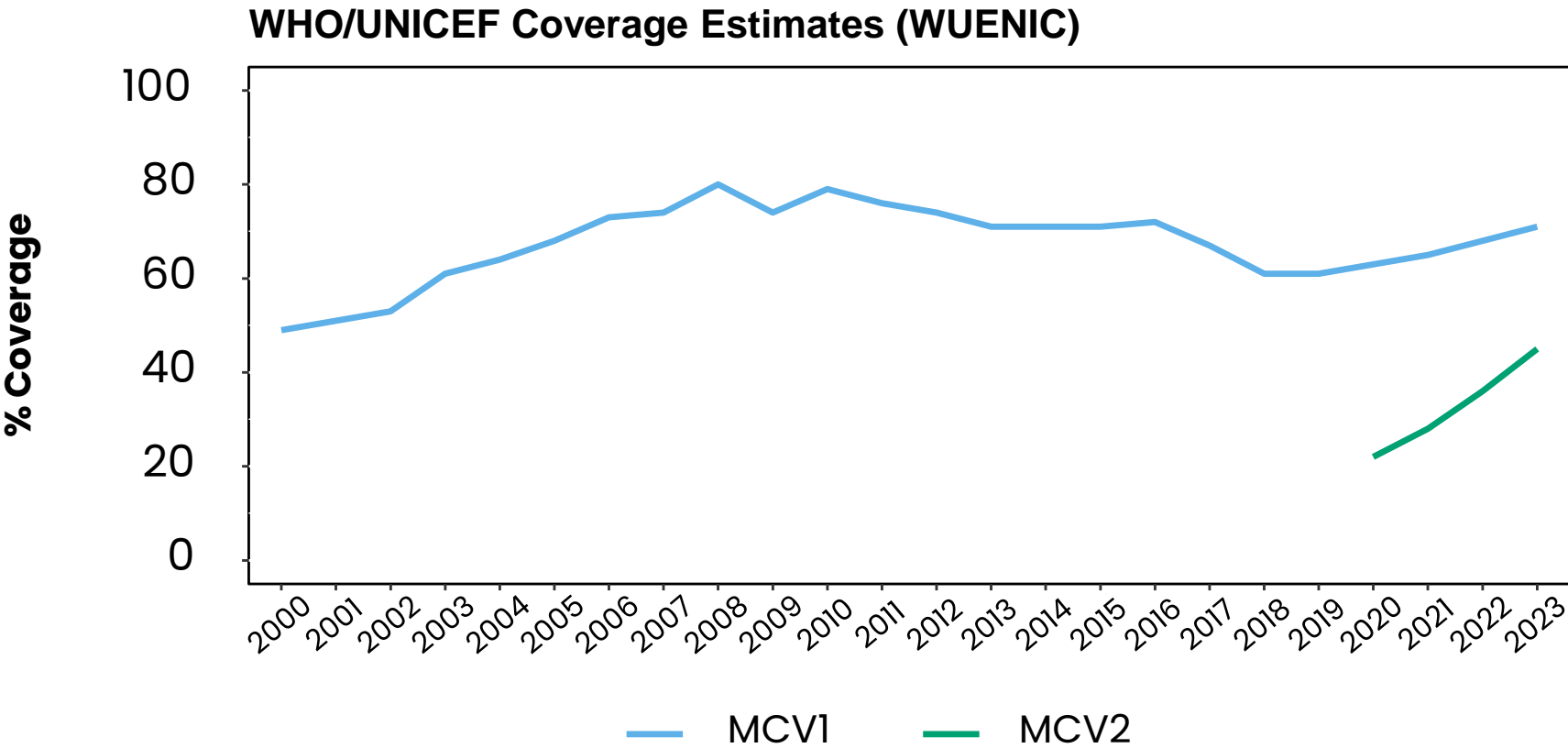
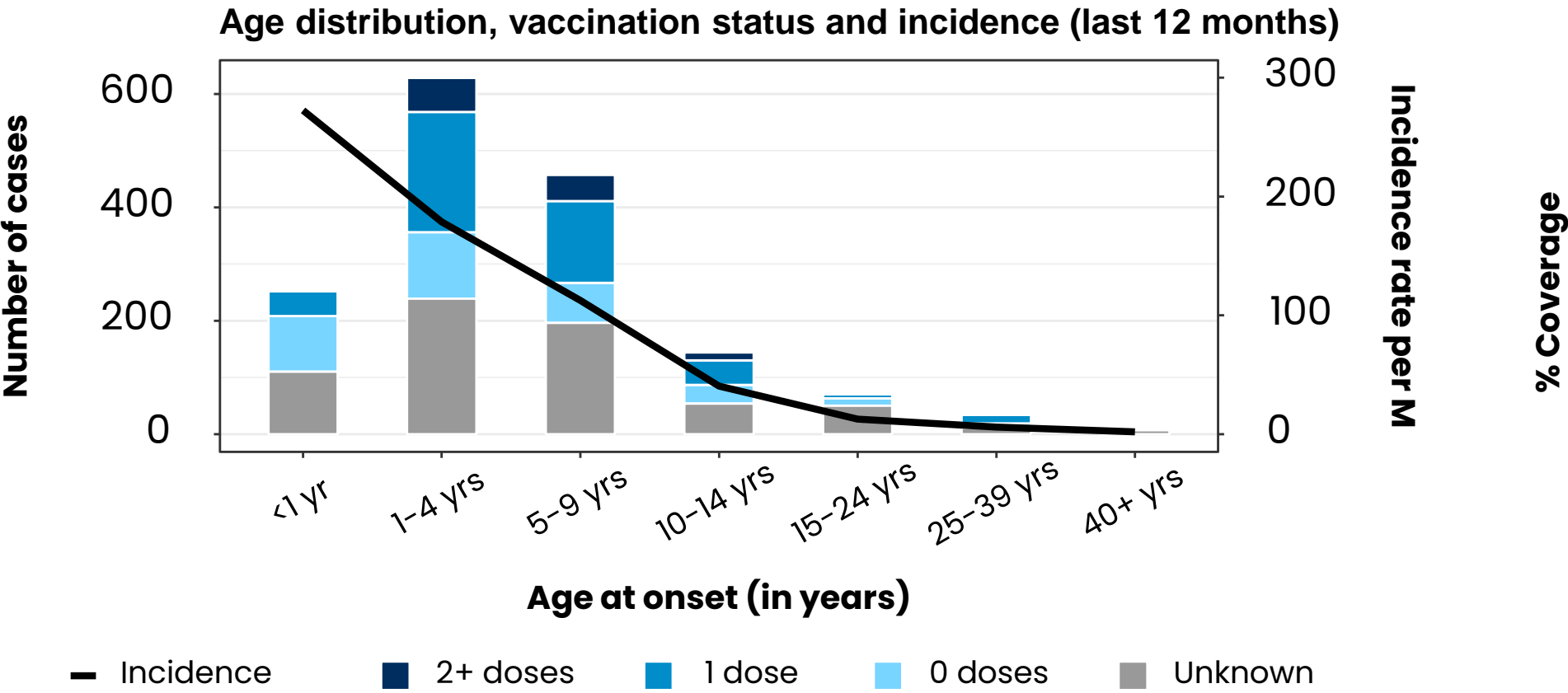
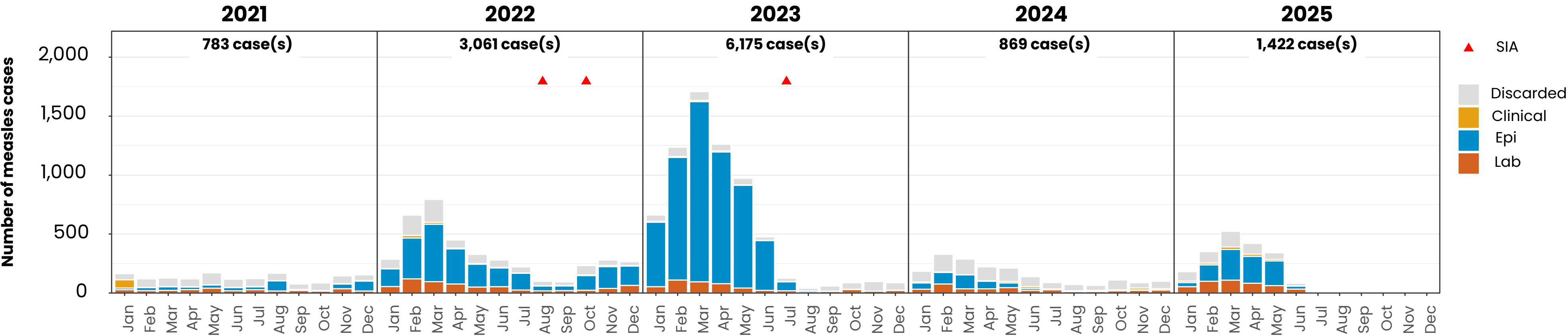
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Measles cases: Cameroon

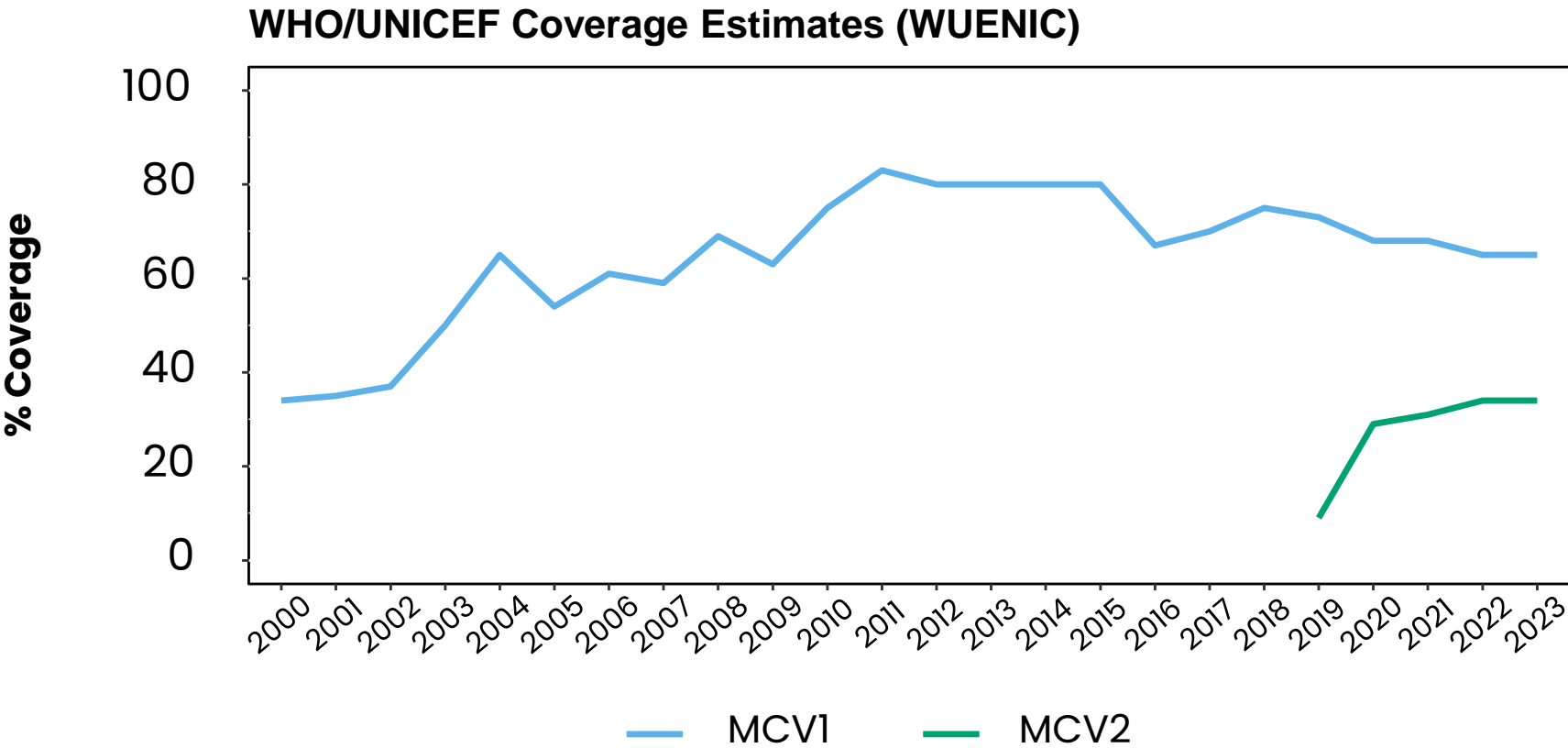
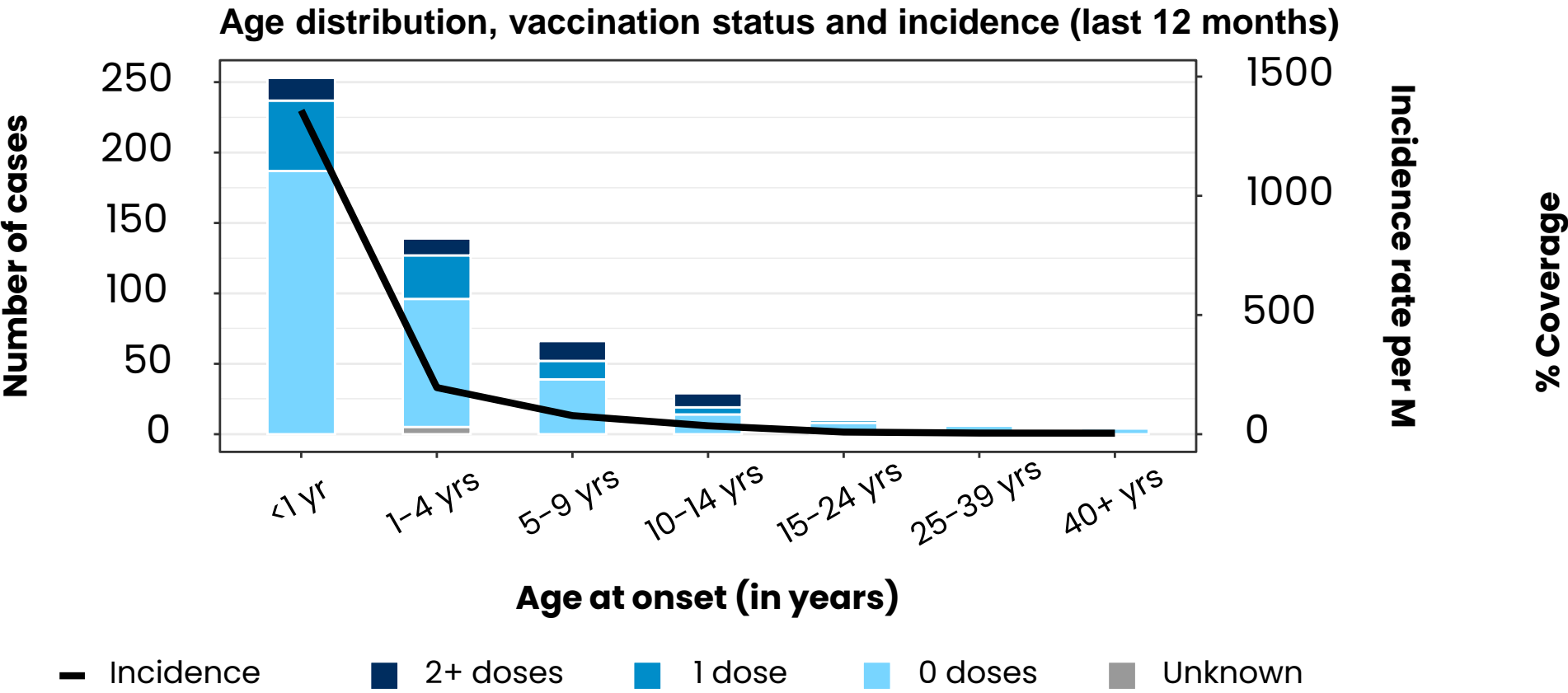
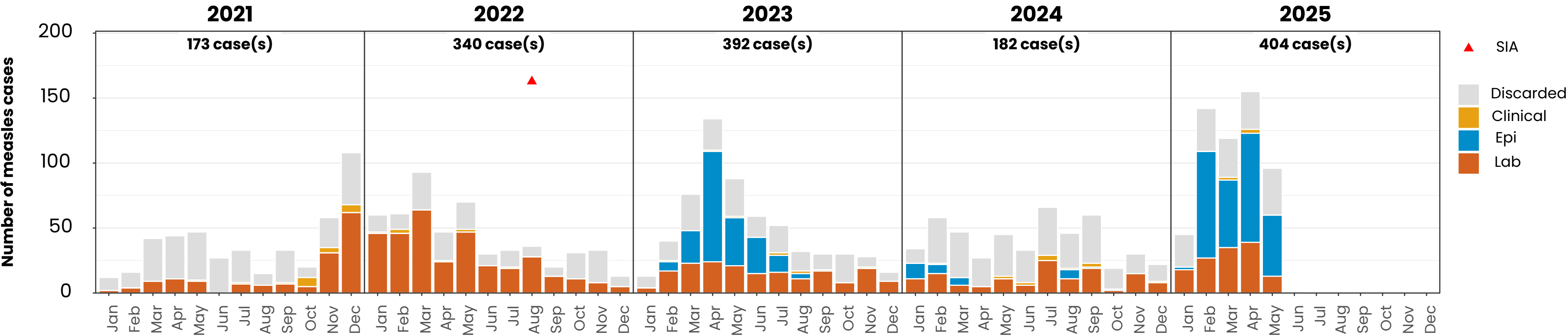
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Measles cases: Congo

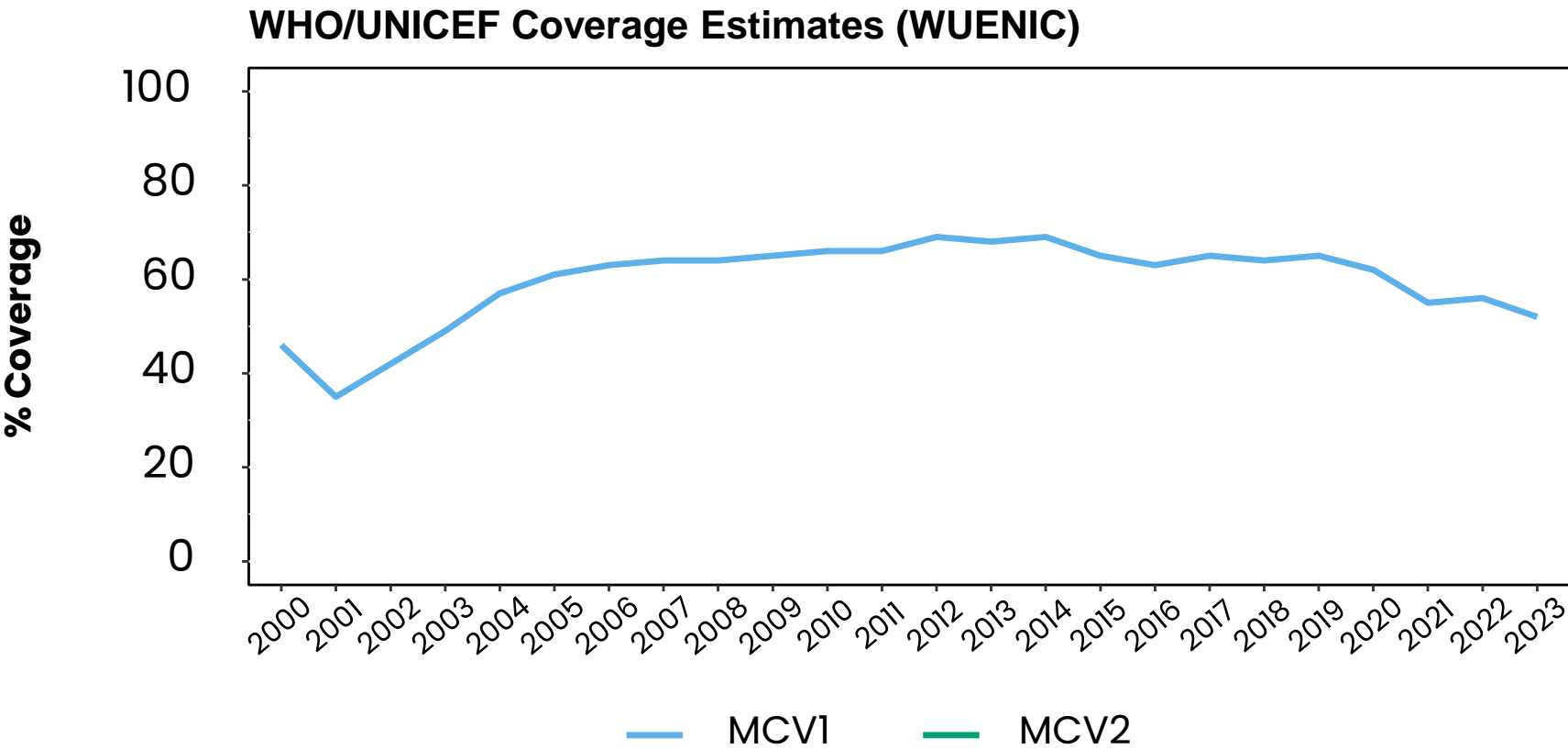
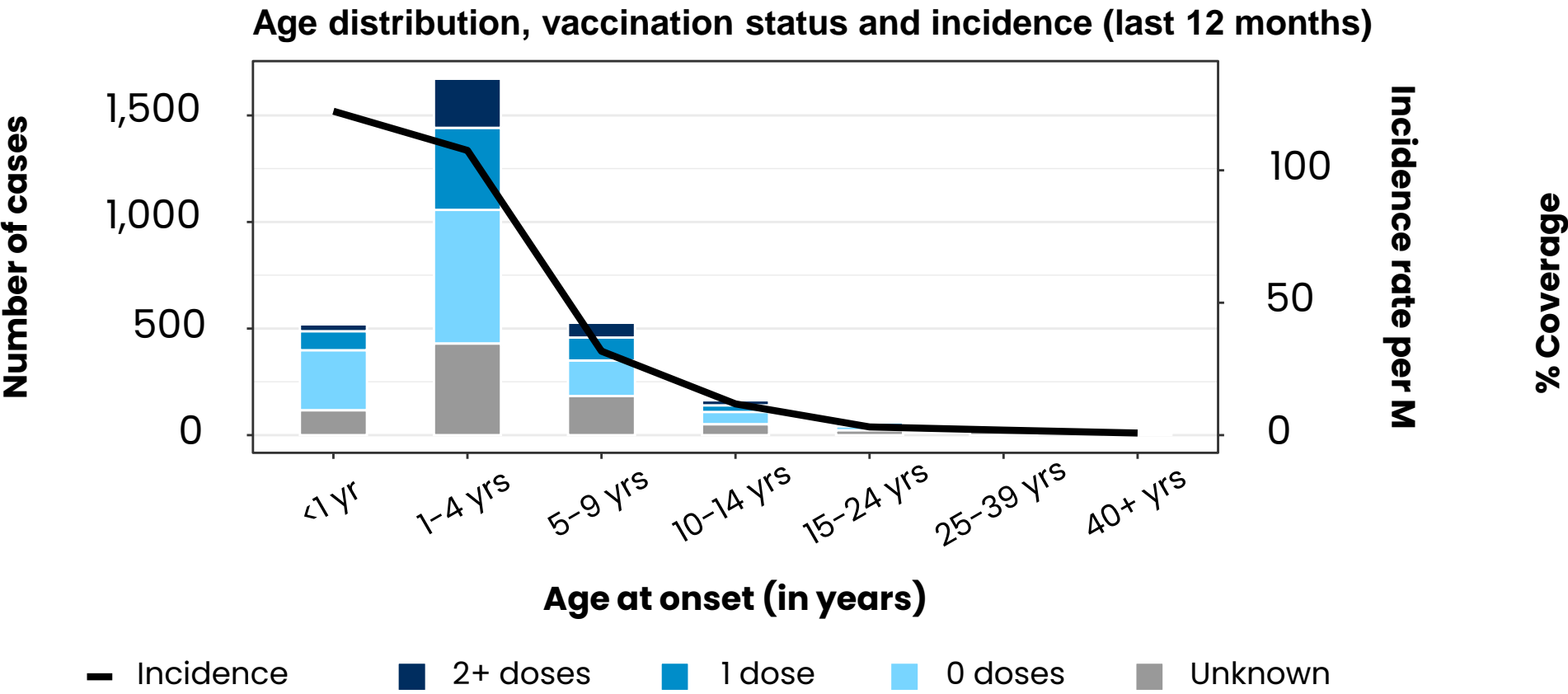
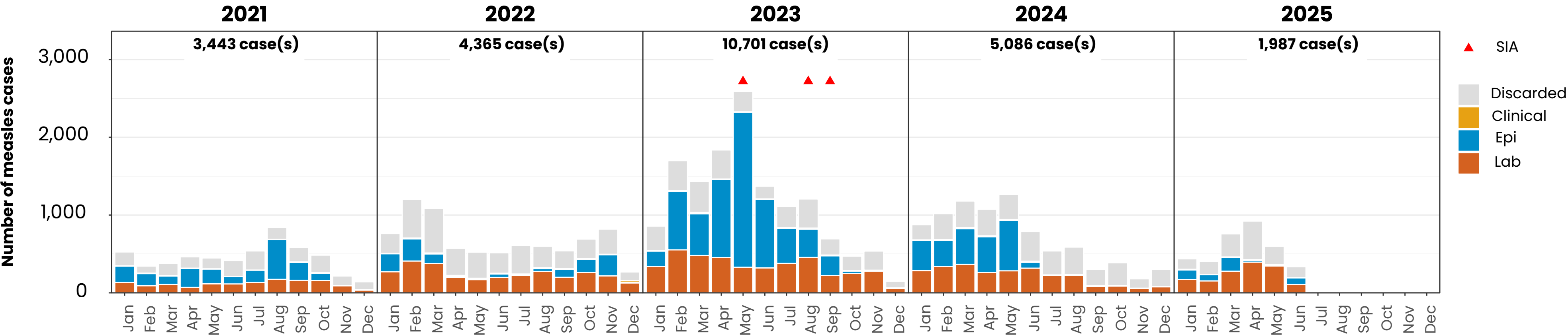
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# Measles cases: Democratic Republic of the Congo

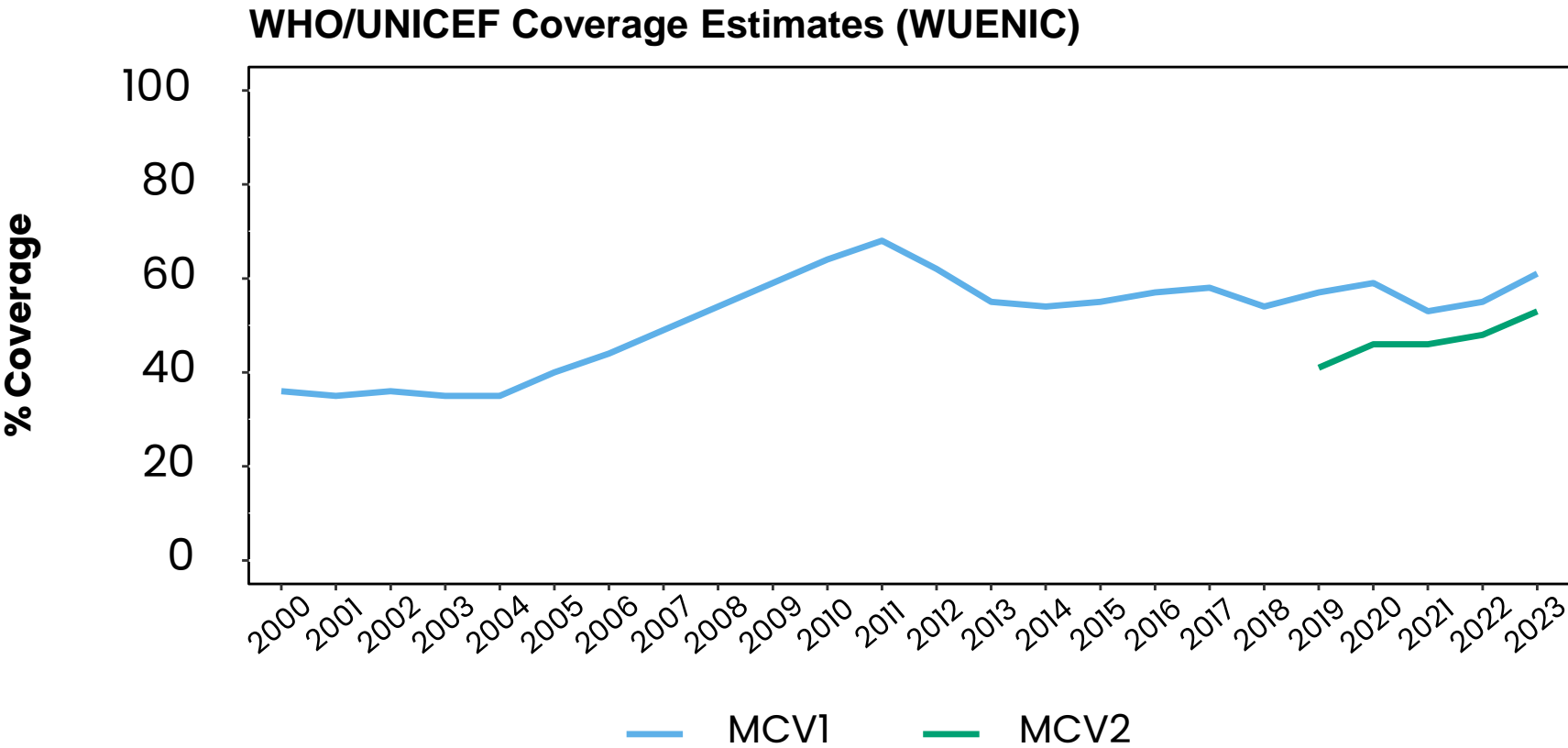
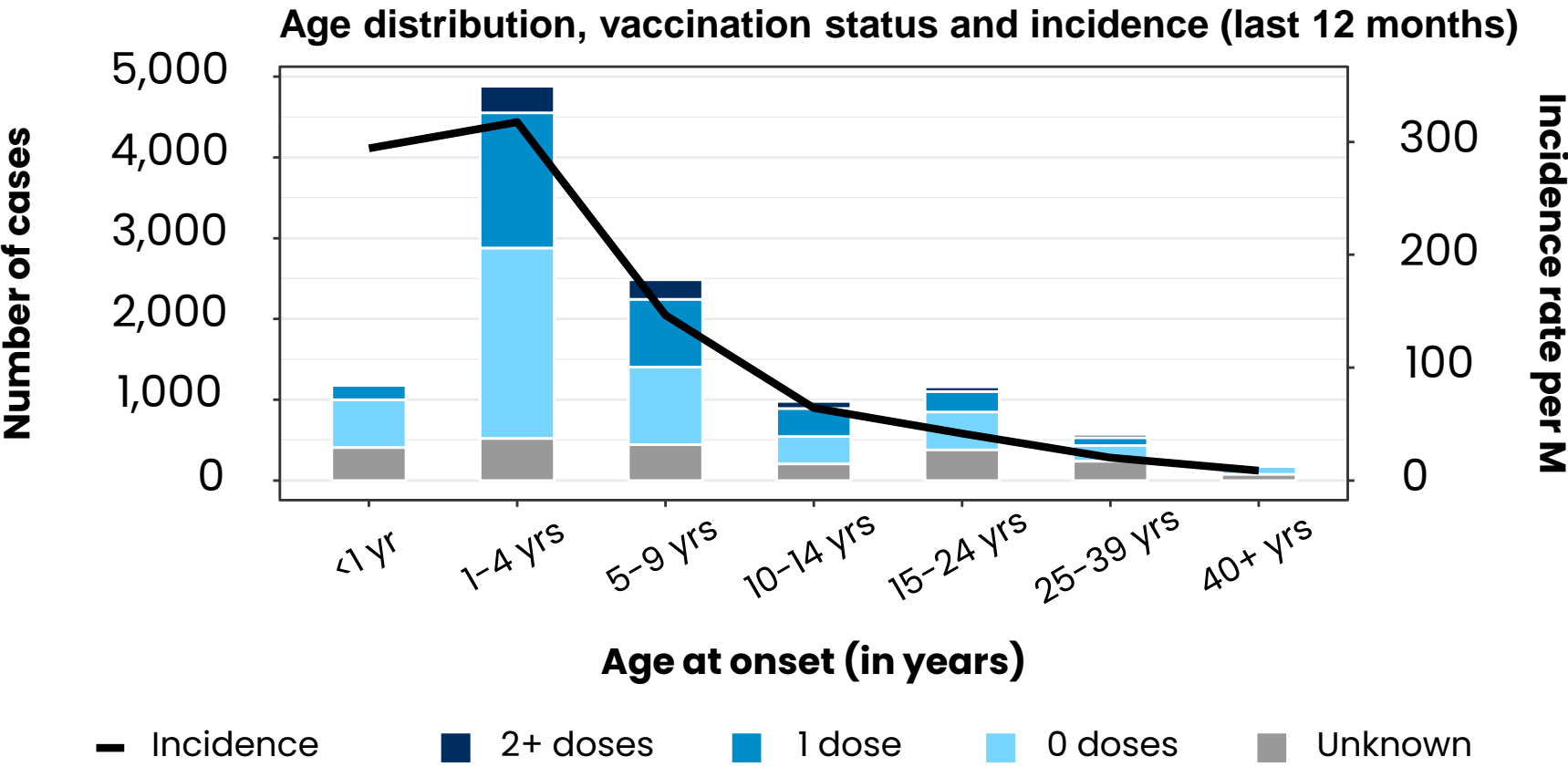
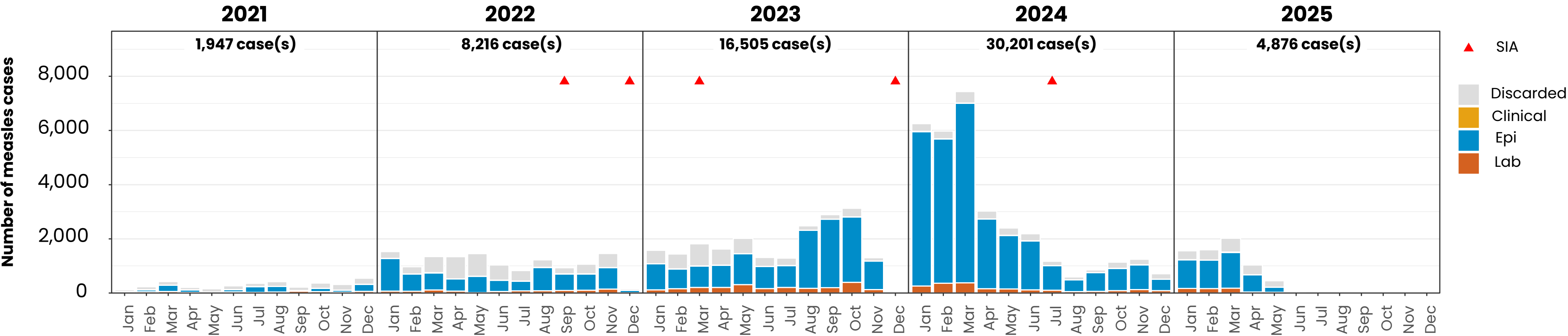
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# Measles cases: Ethiopia

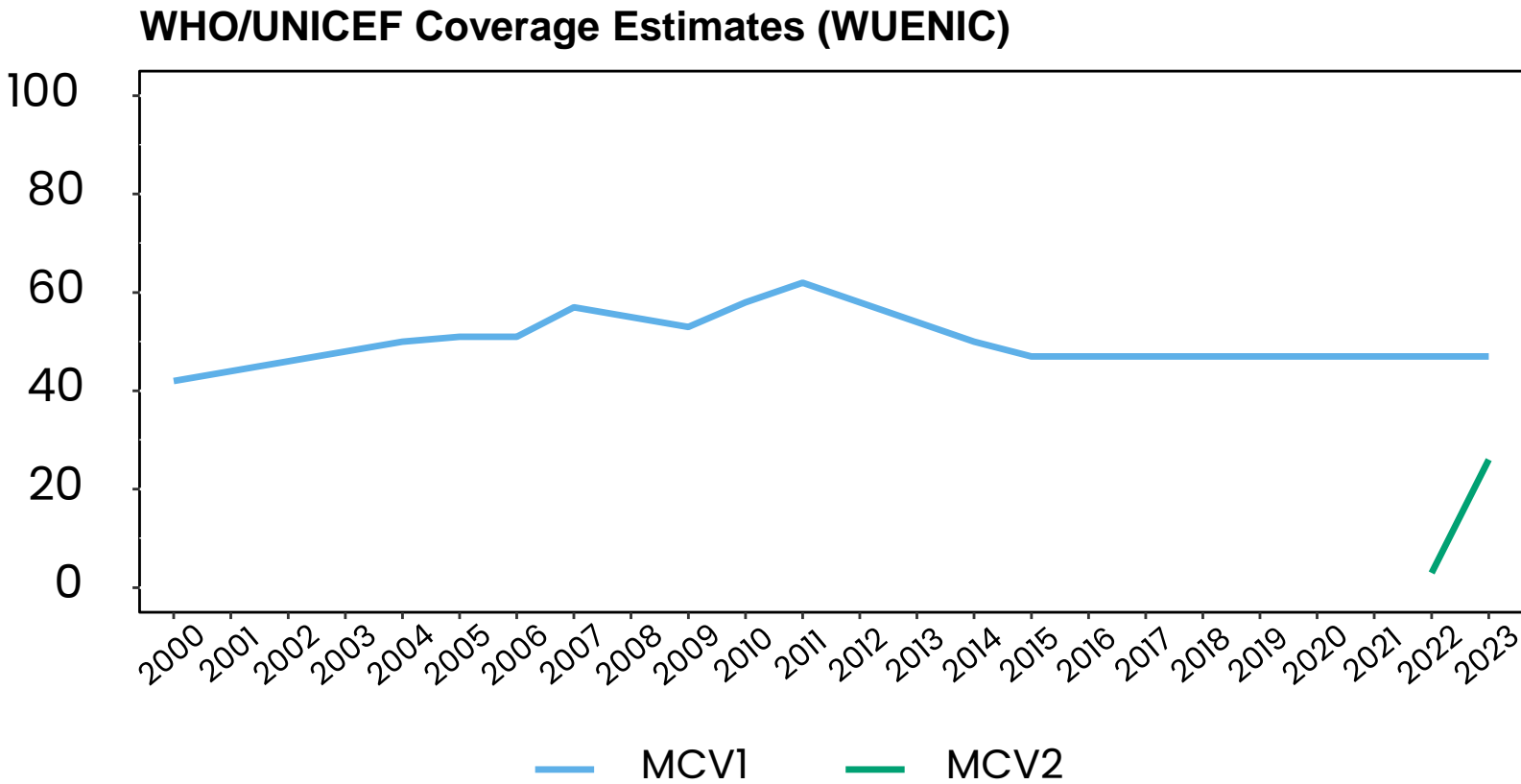
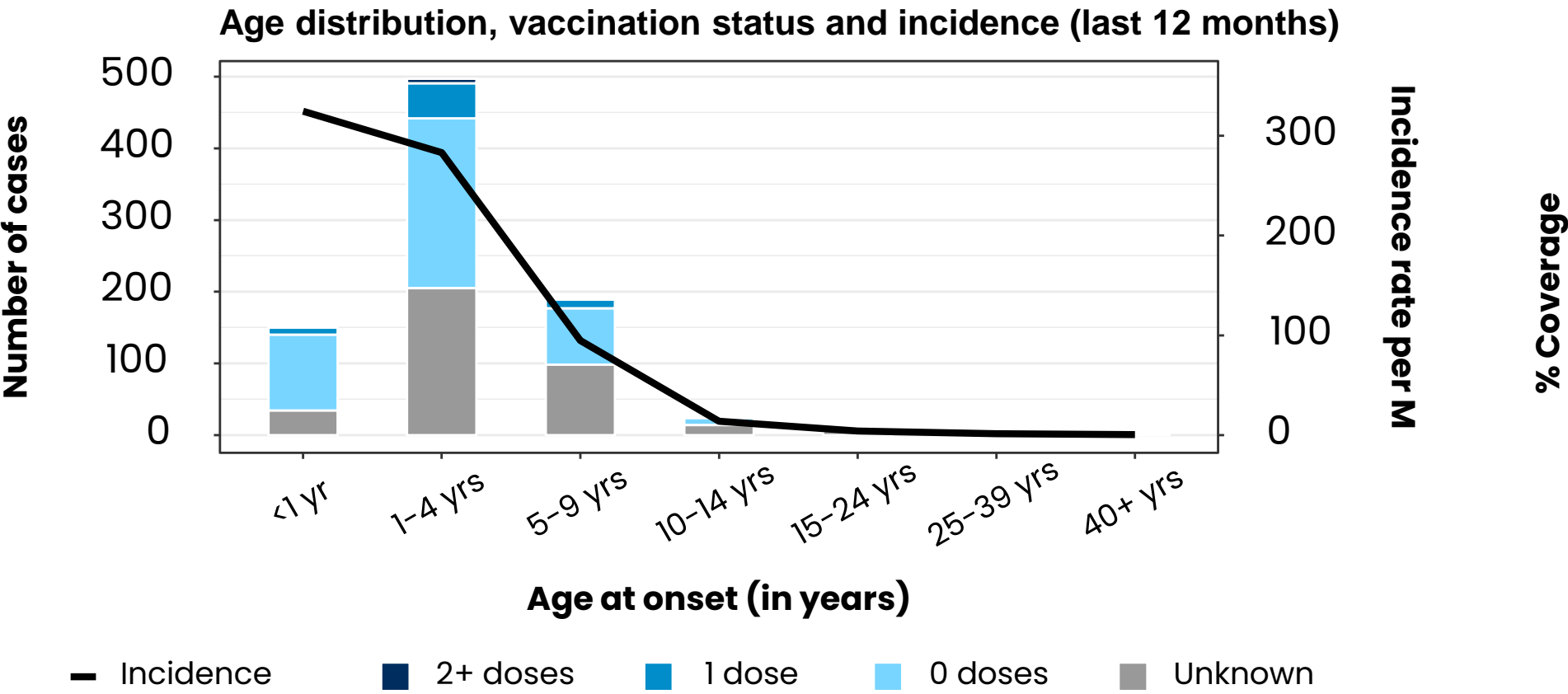
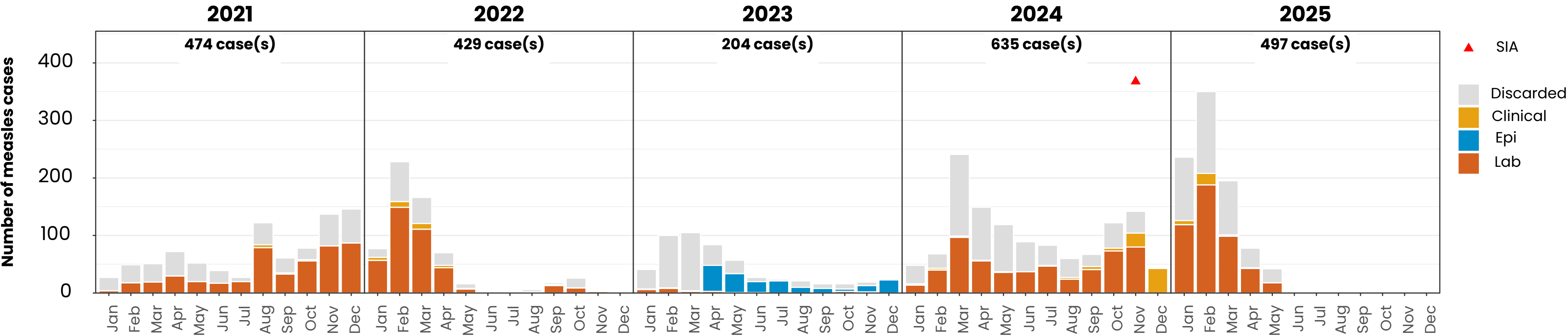
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Guinea

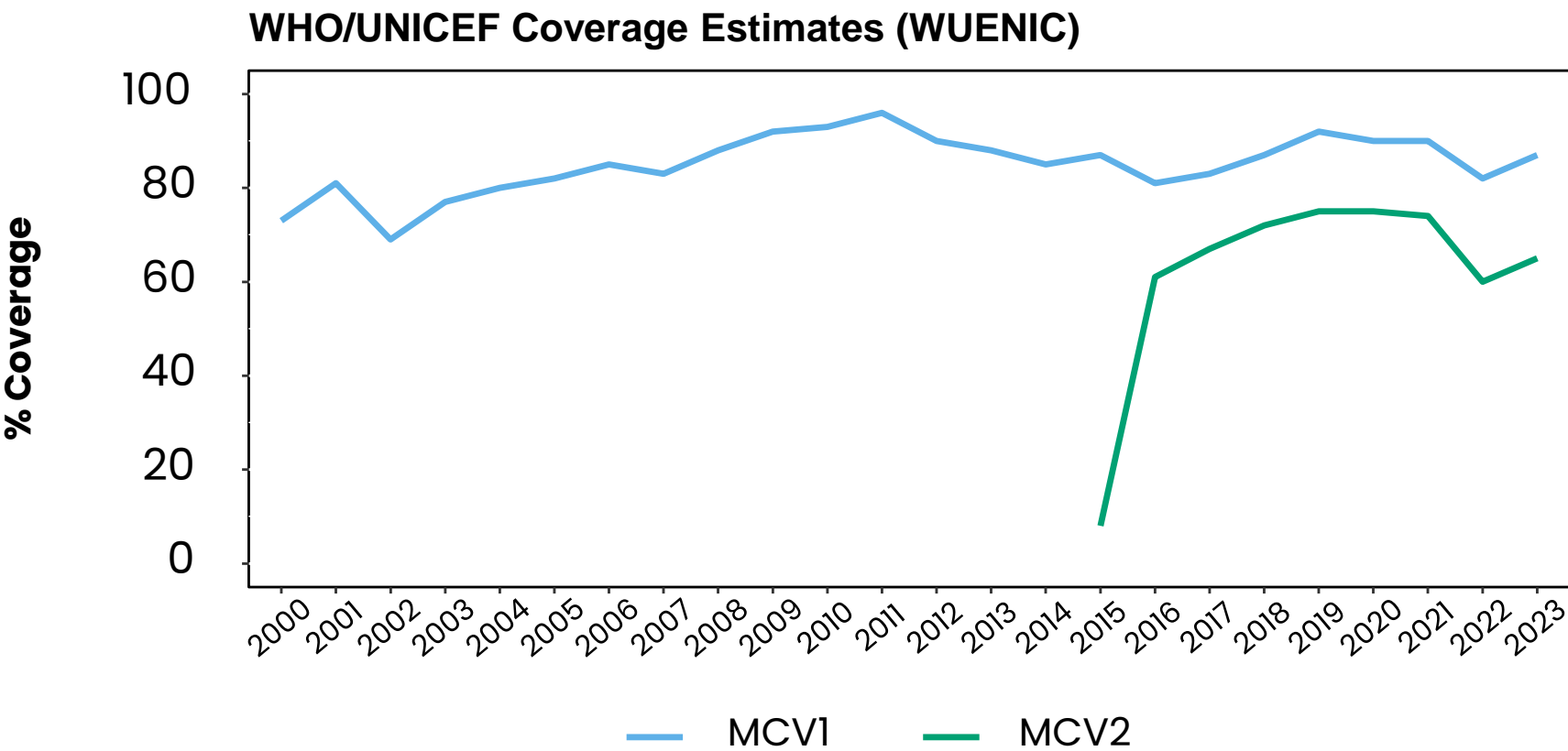
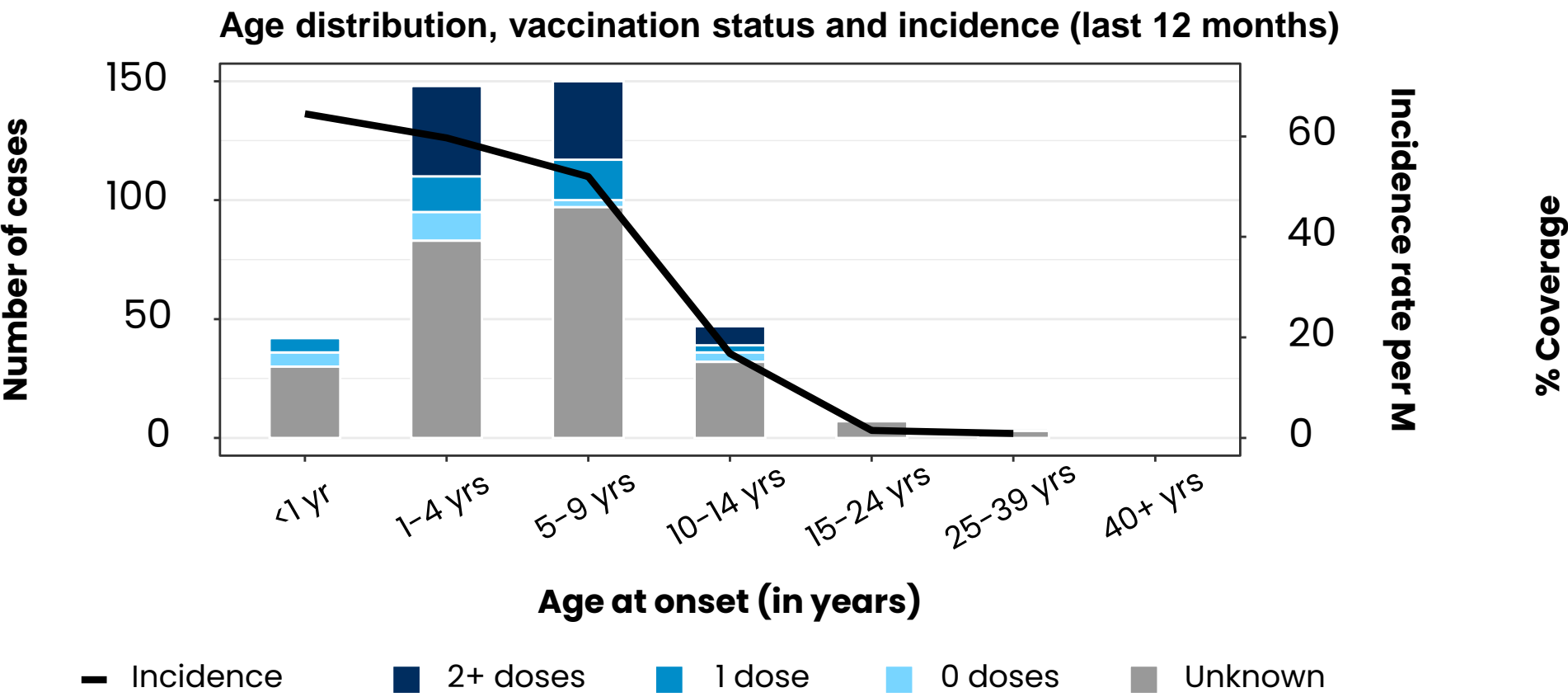
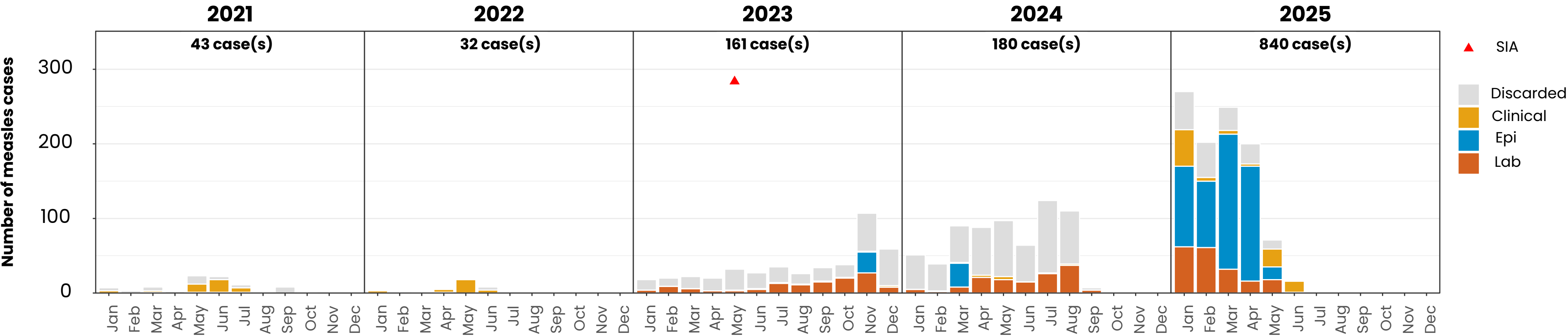
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Malawi

ELIMINATION STATUS: **ENDEMIC**

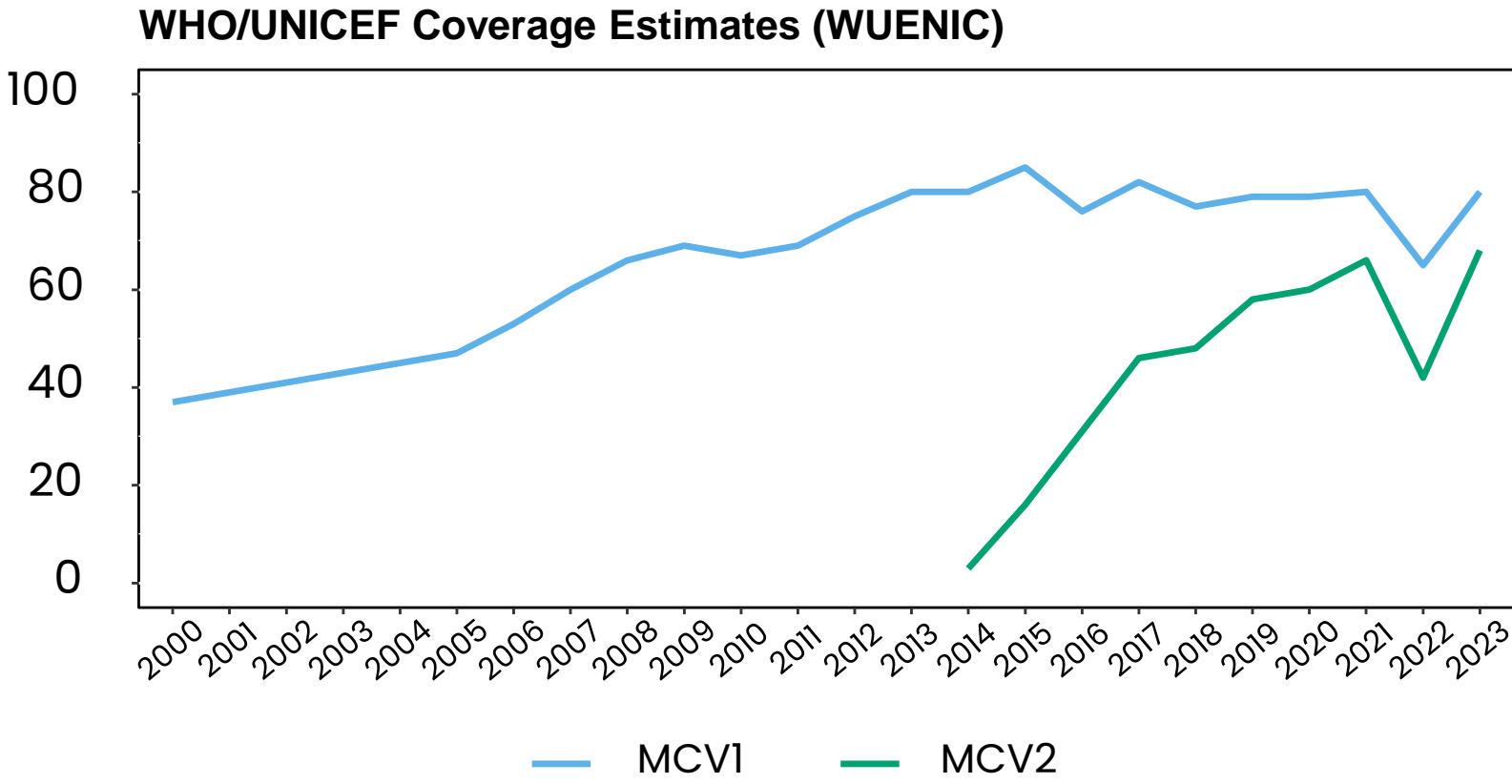
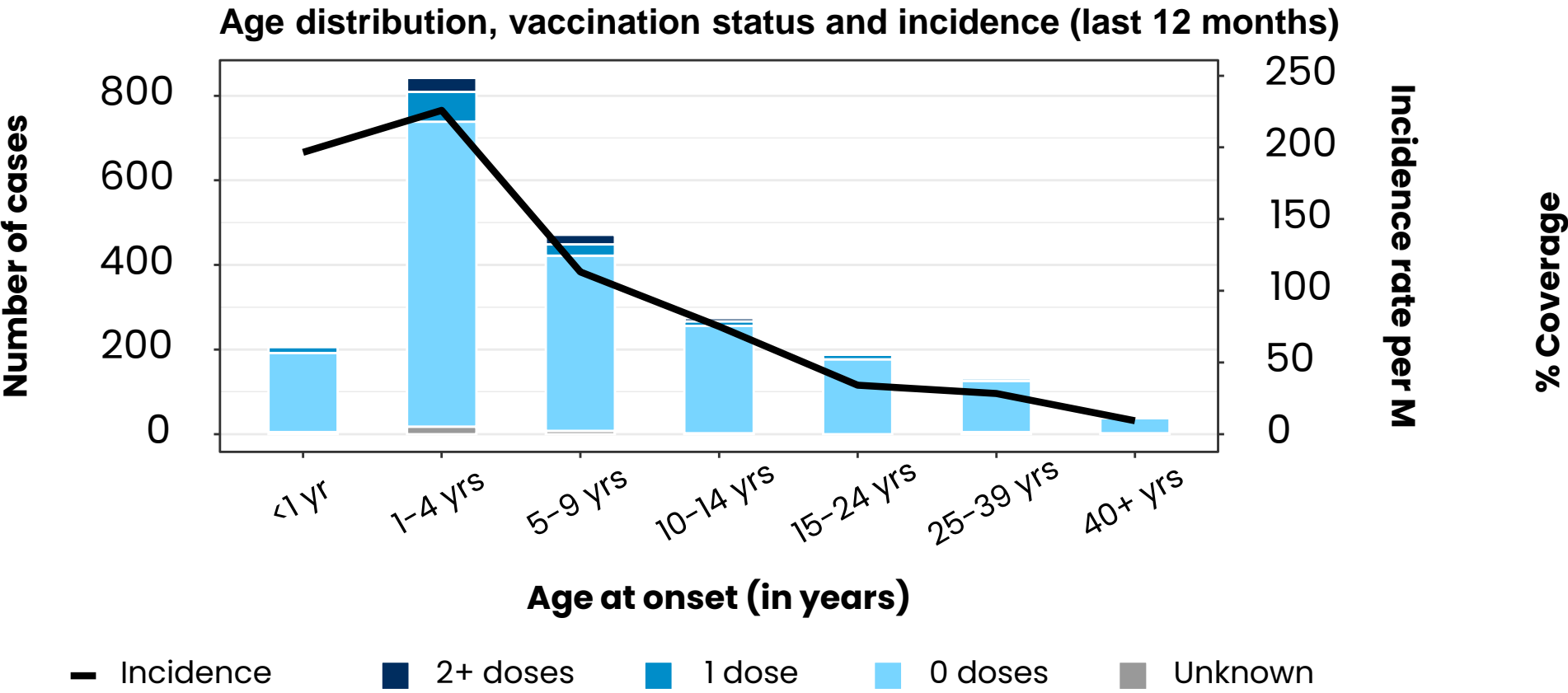
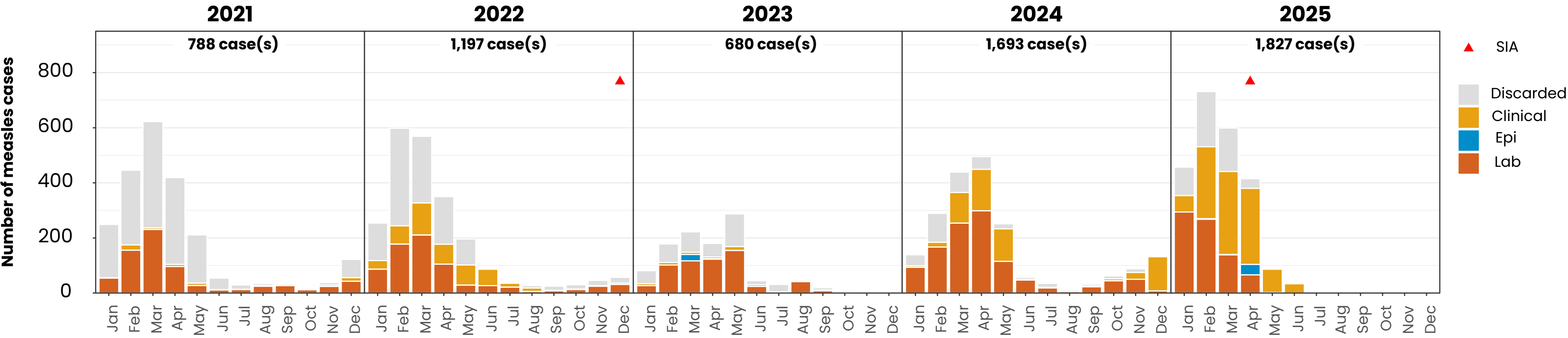


Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)



Measles cases: Niger

ELIMINATION STATUS: **ENDEMIC**

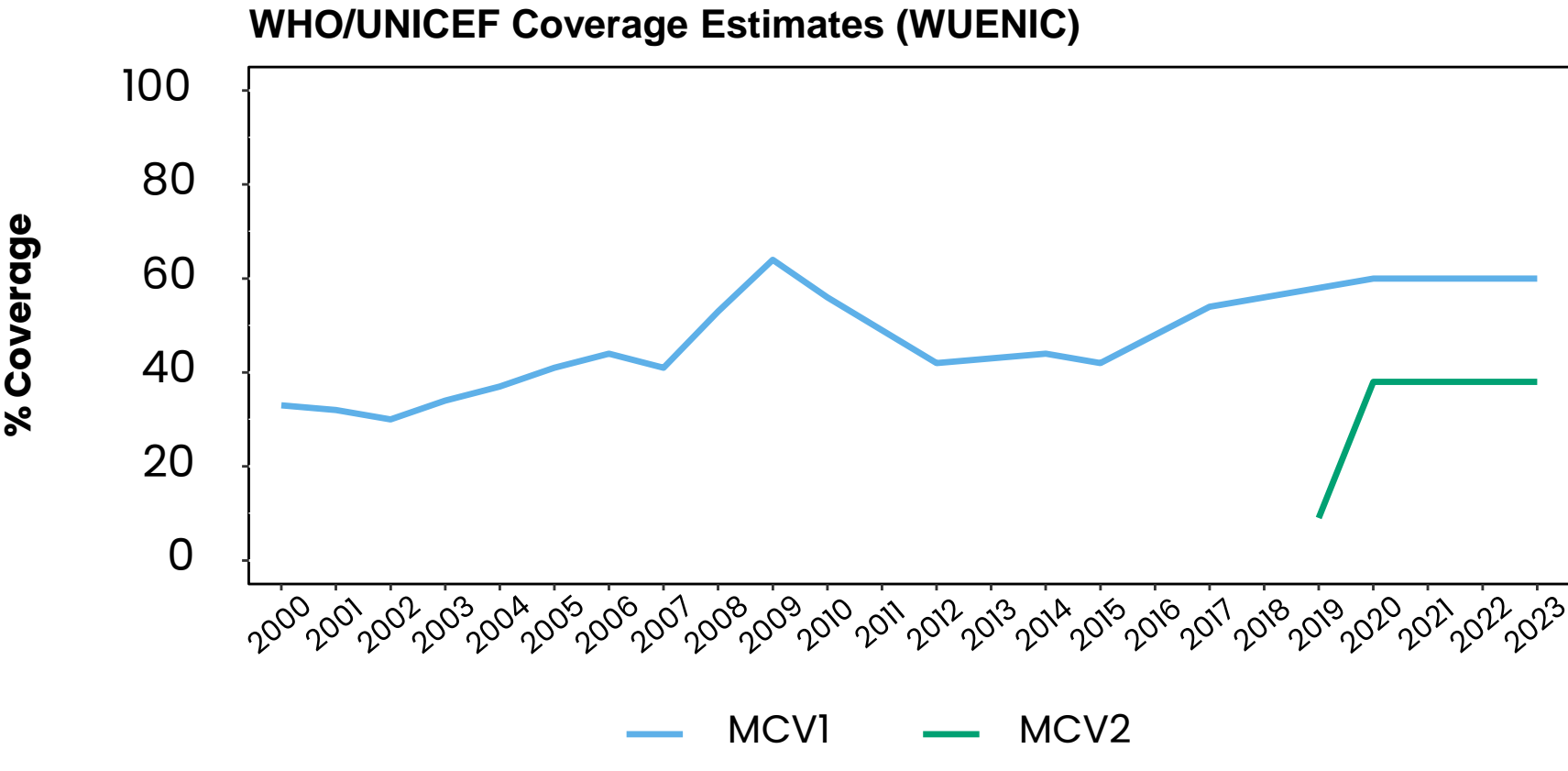
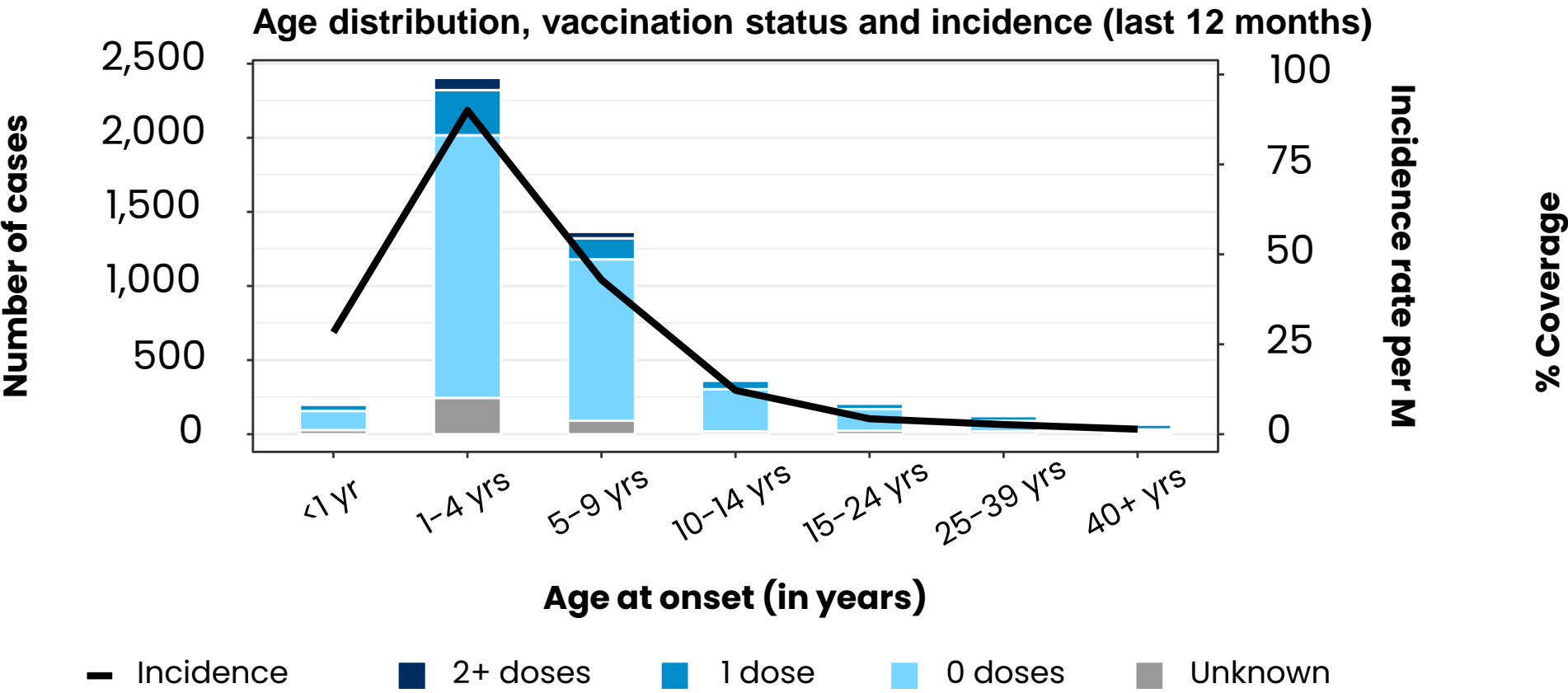
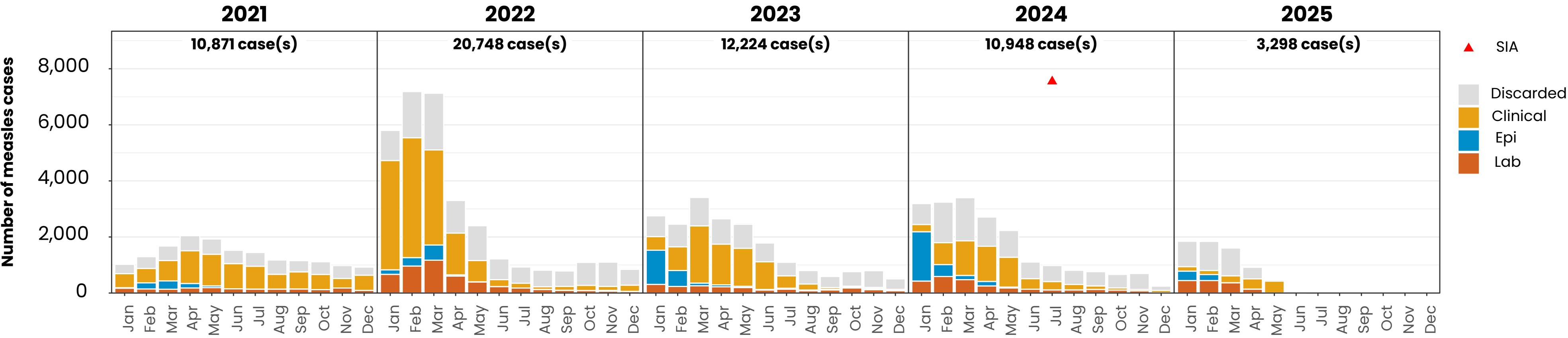


Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)



Measles cases: Nigeria

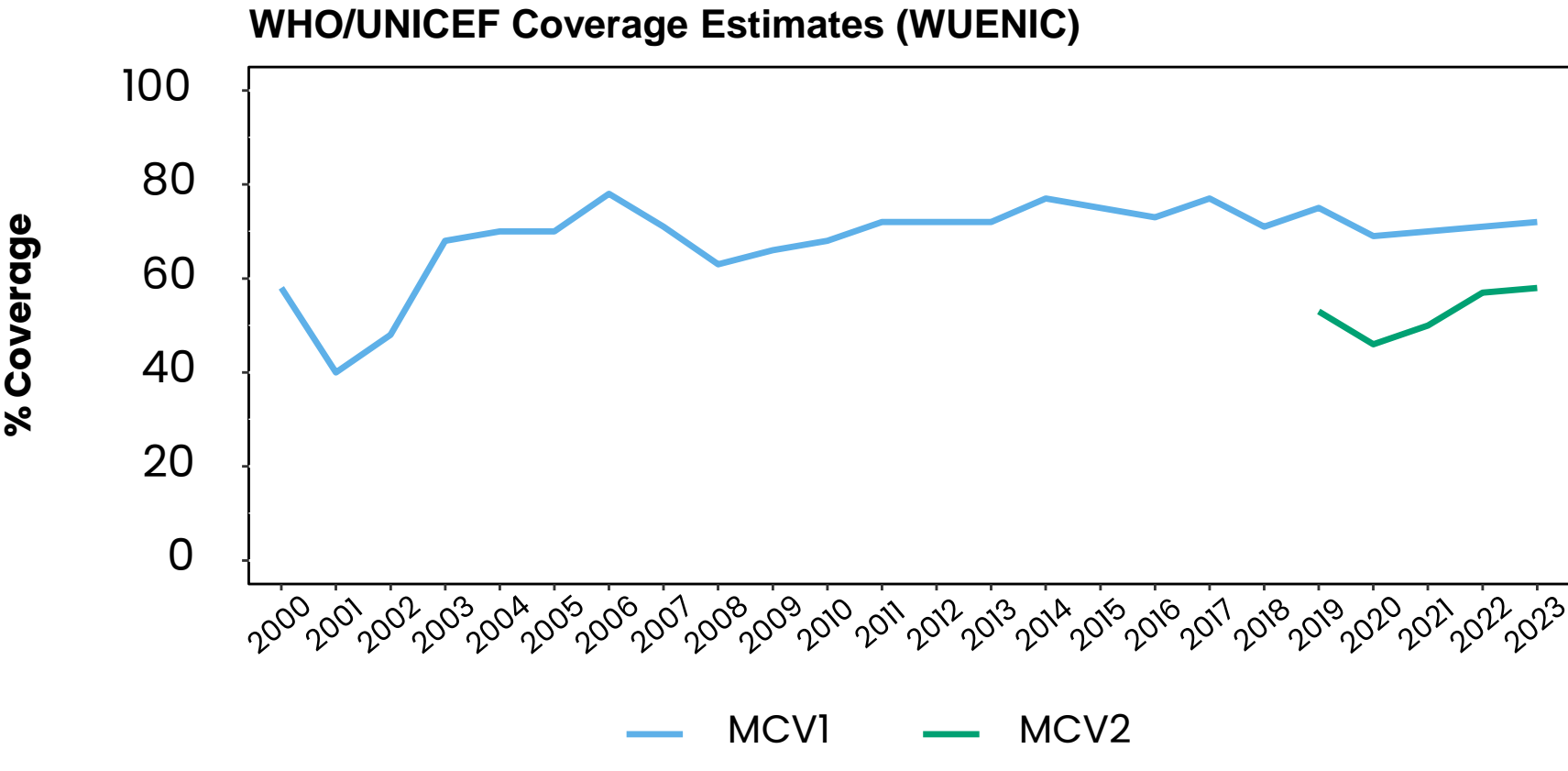
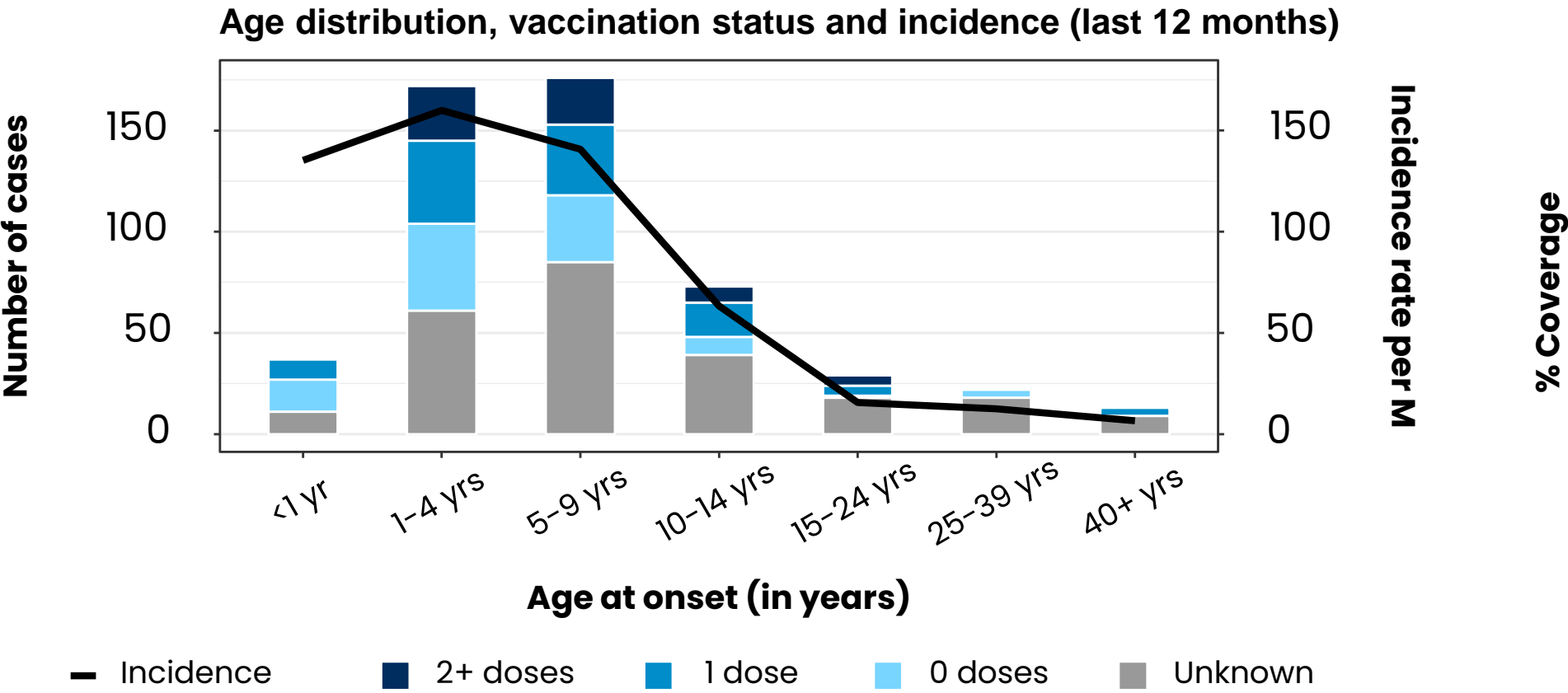
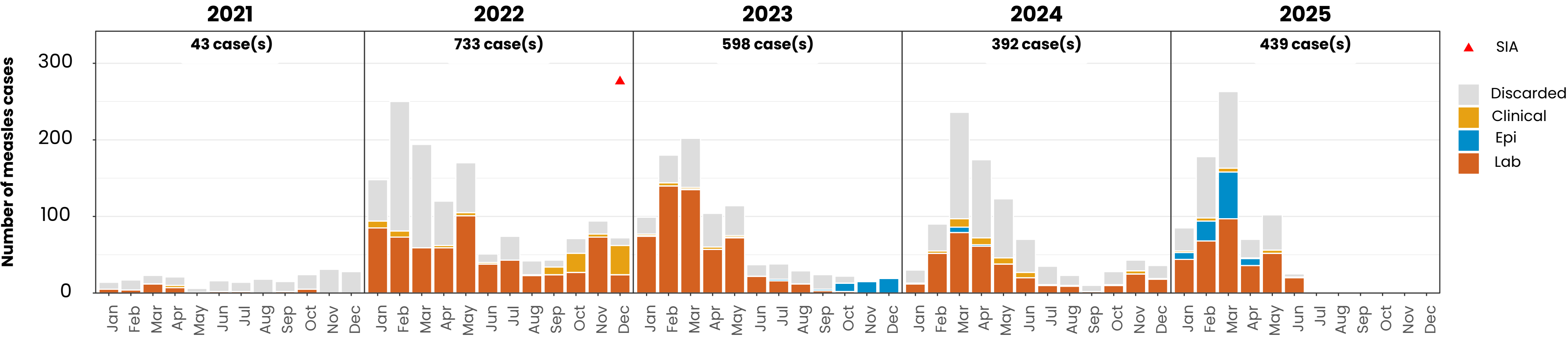
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Togo

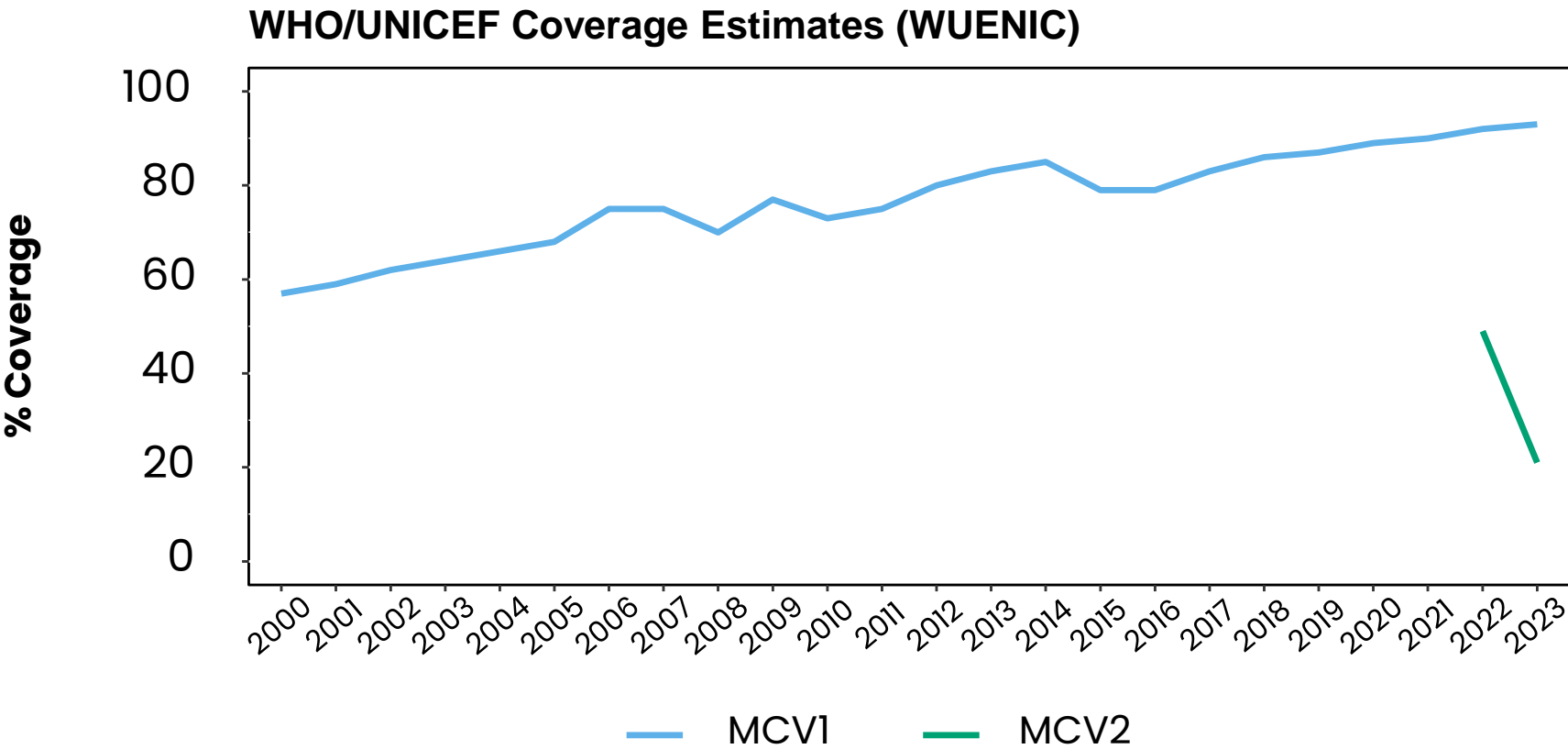
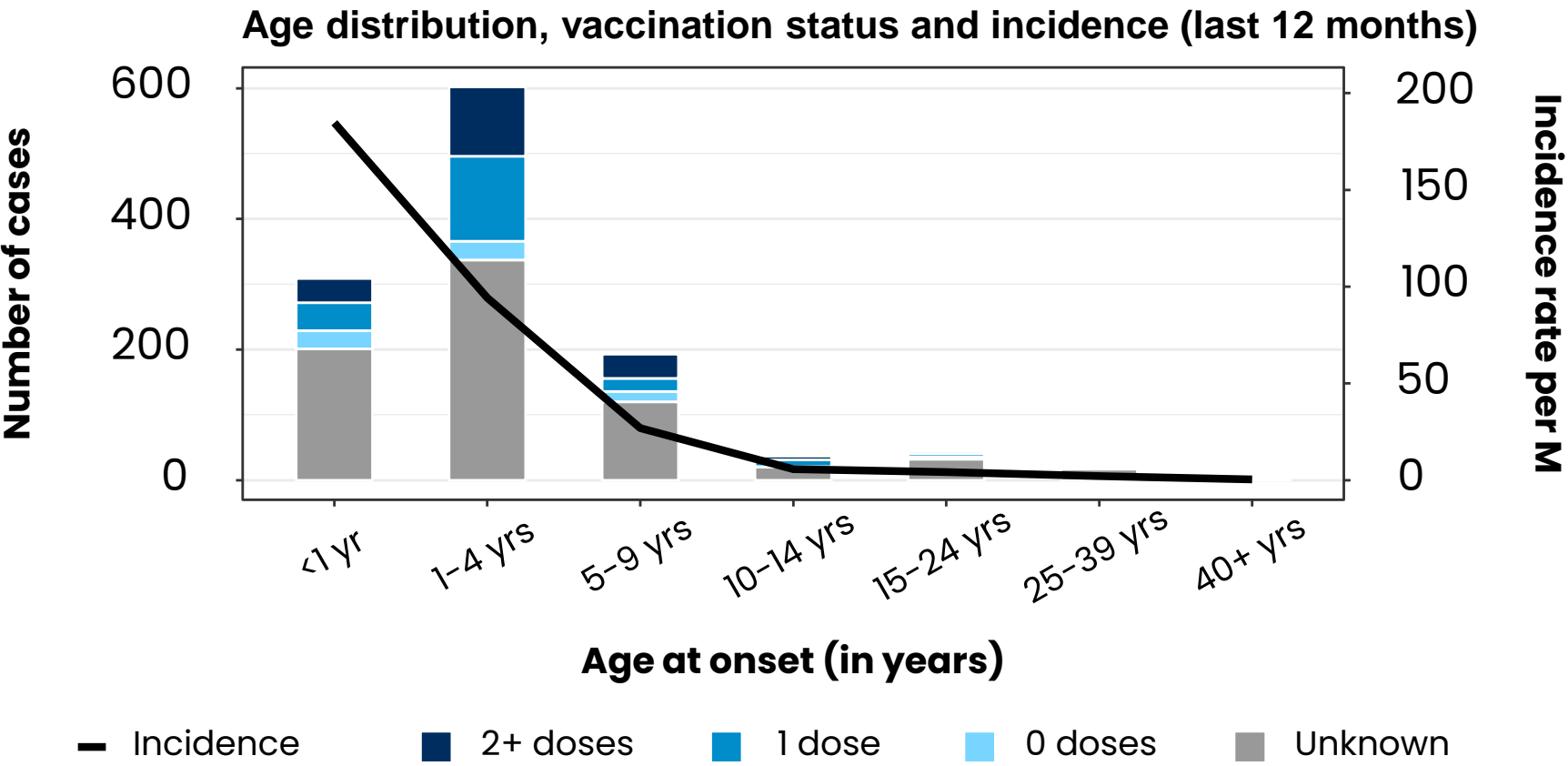
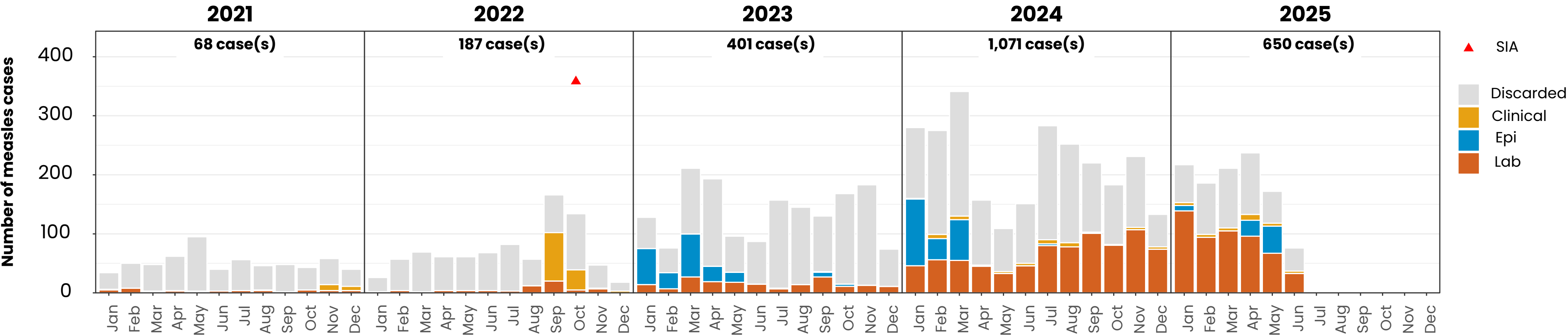
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

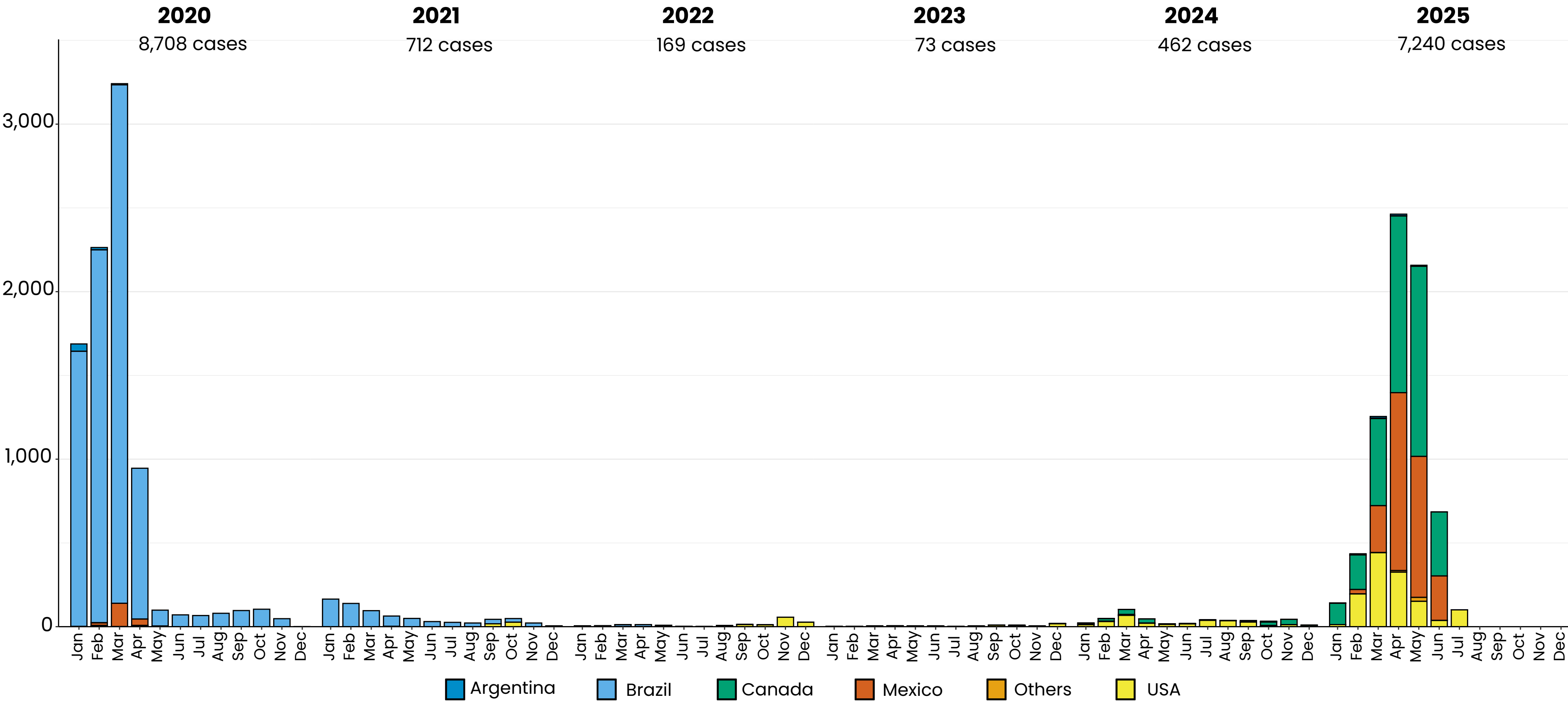
# Measles cases: Uganda

ELIMINATION STATUS: **ENDEMIC**



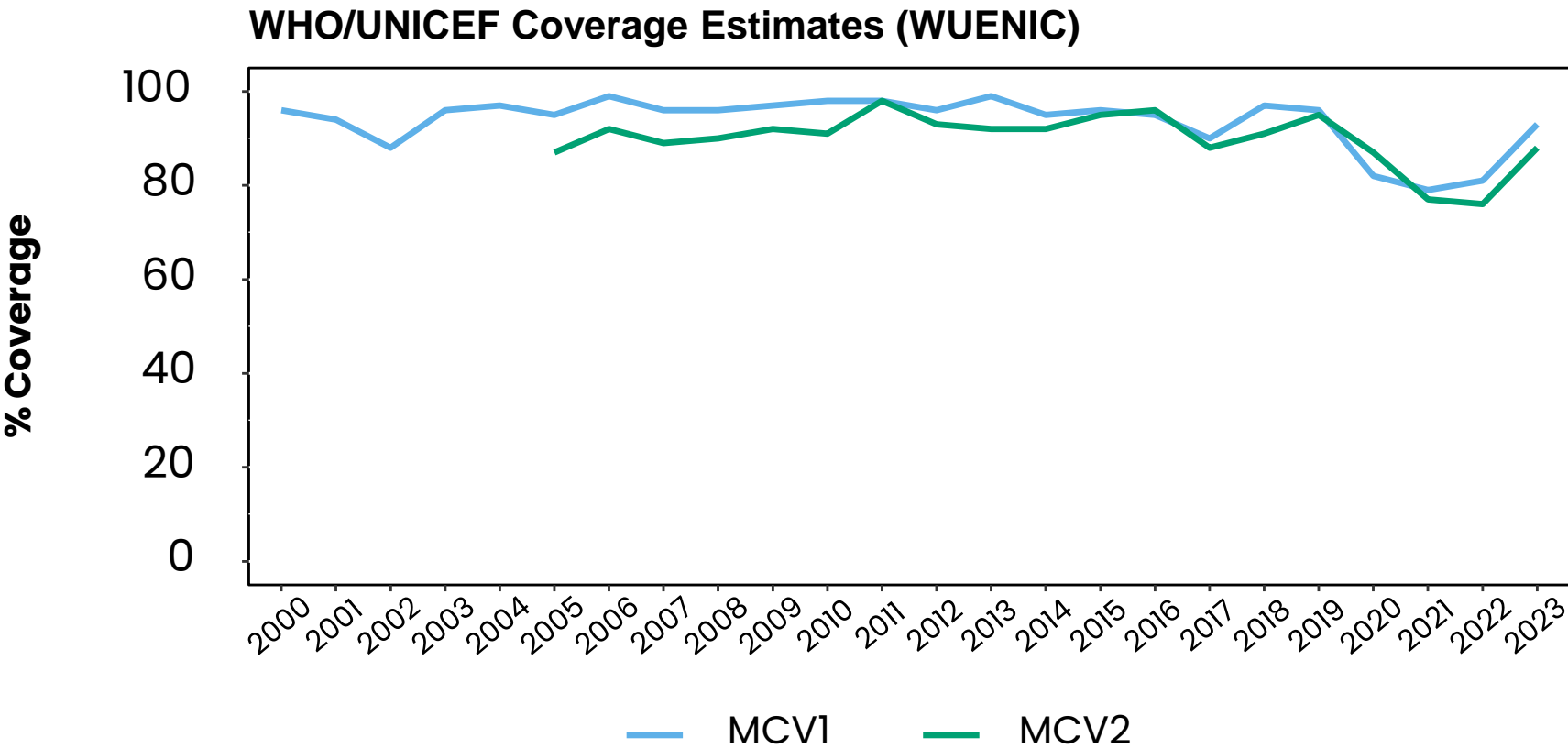
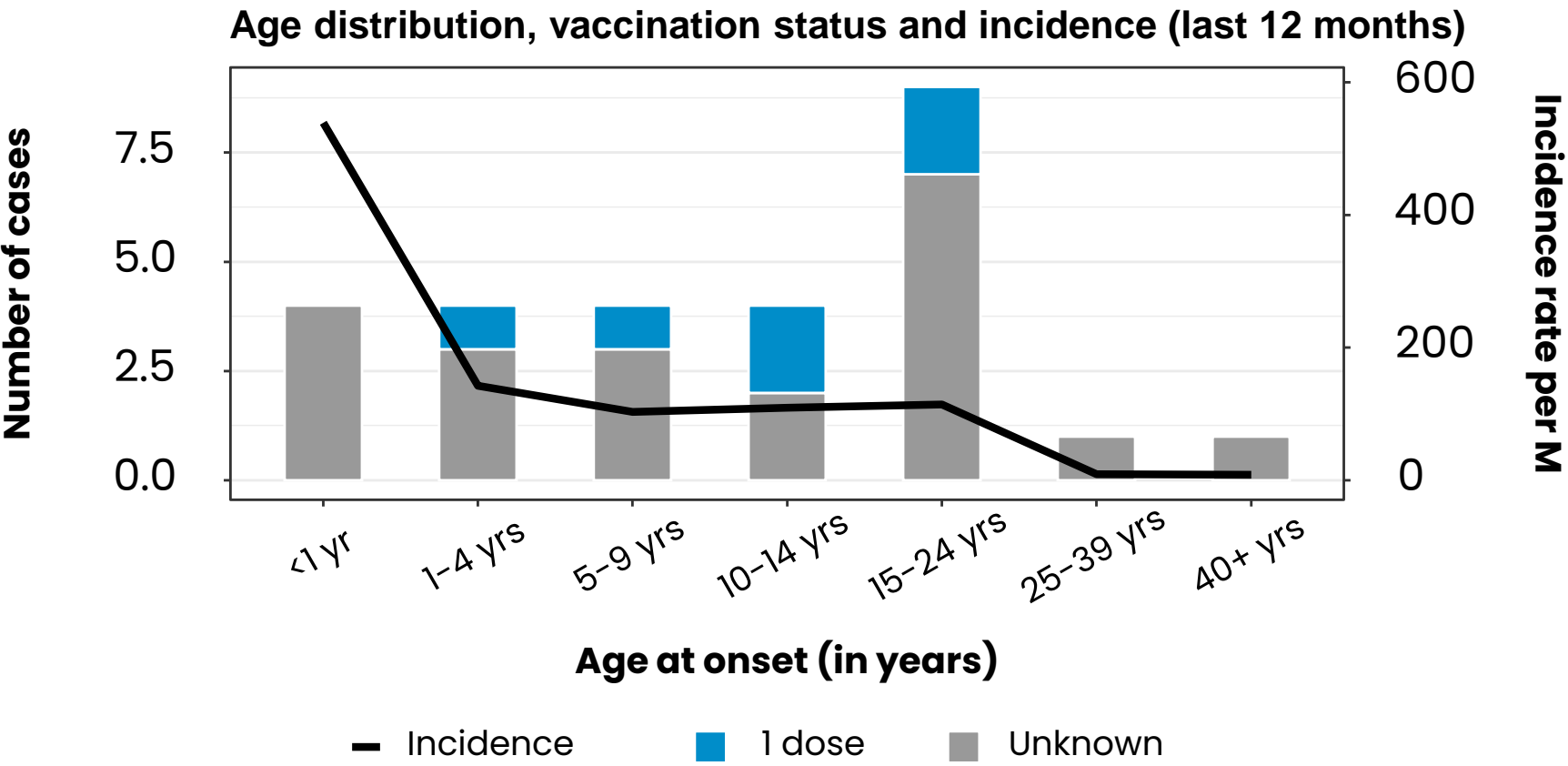
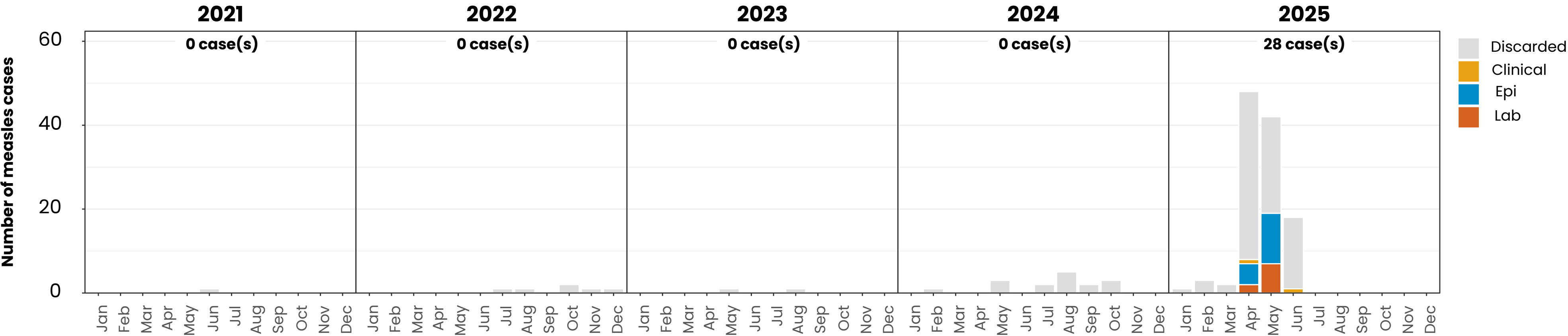
Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles case distribution (AMR), 2020-2025



Measles cases: Belize

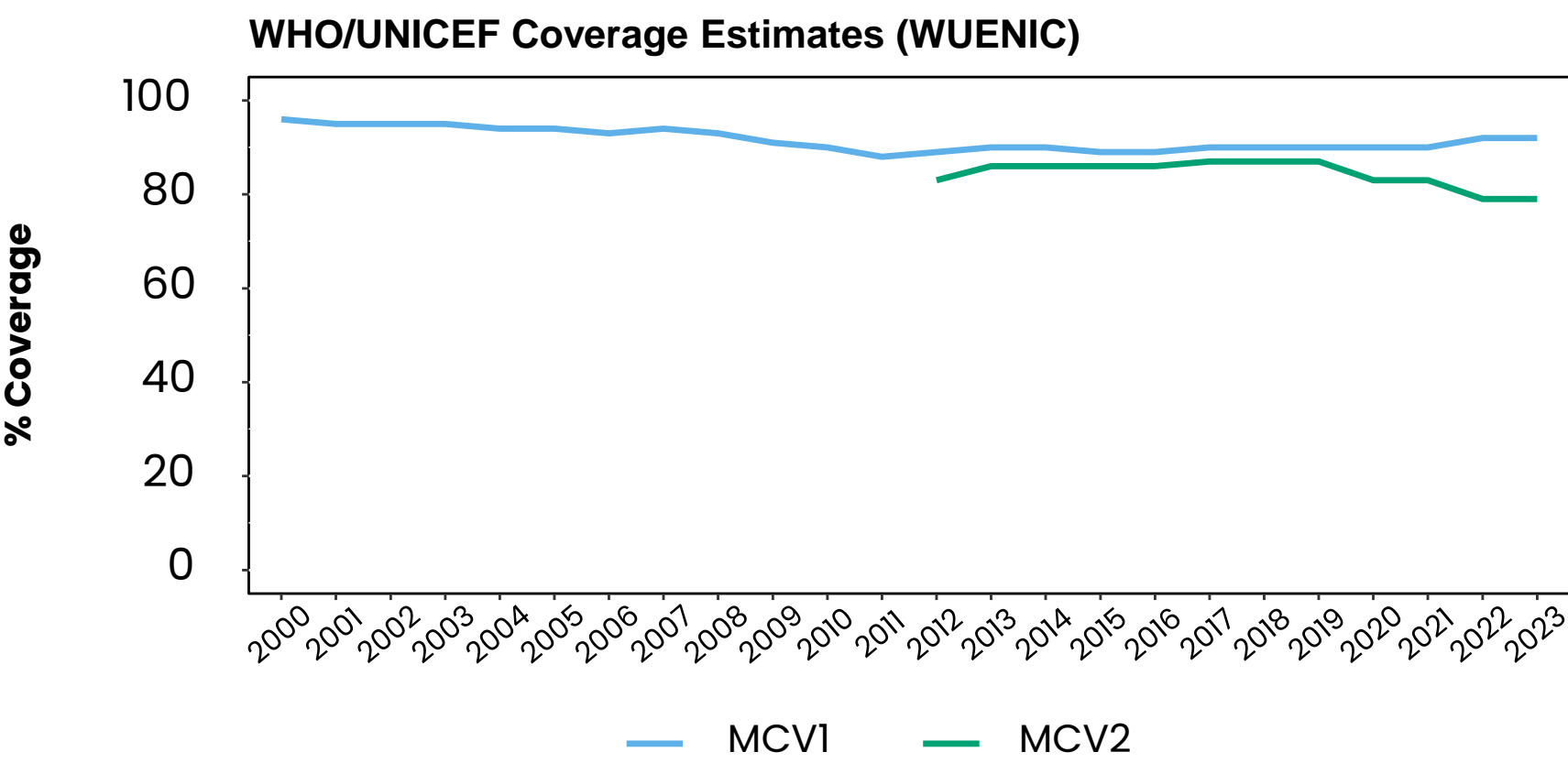
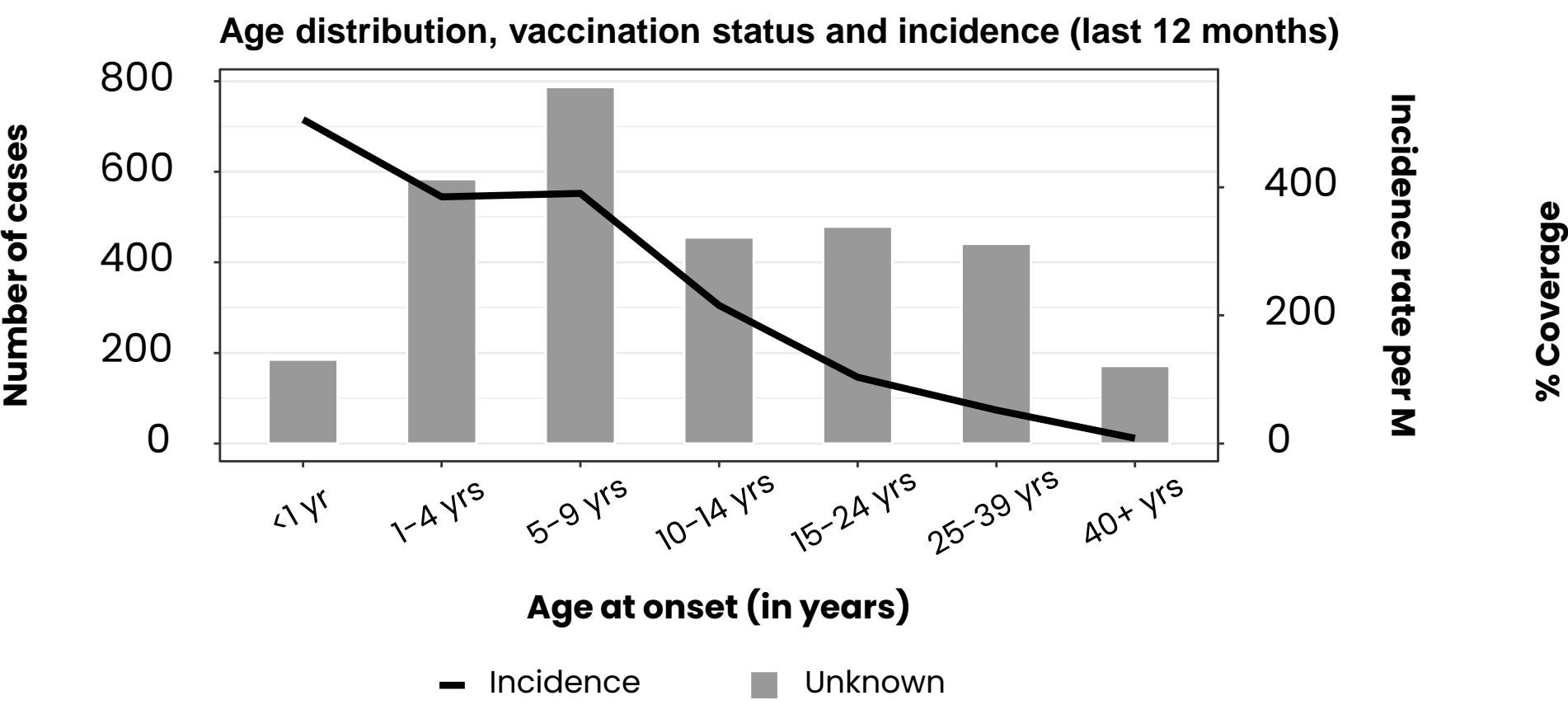
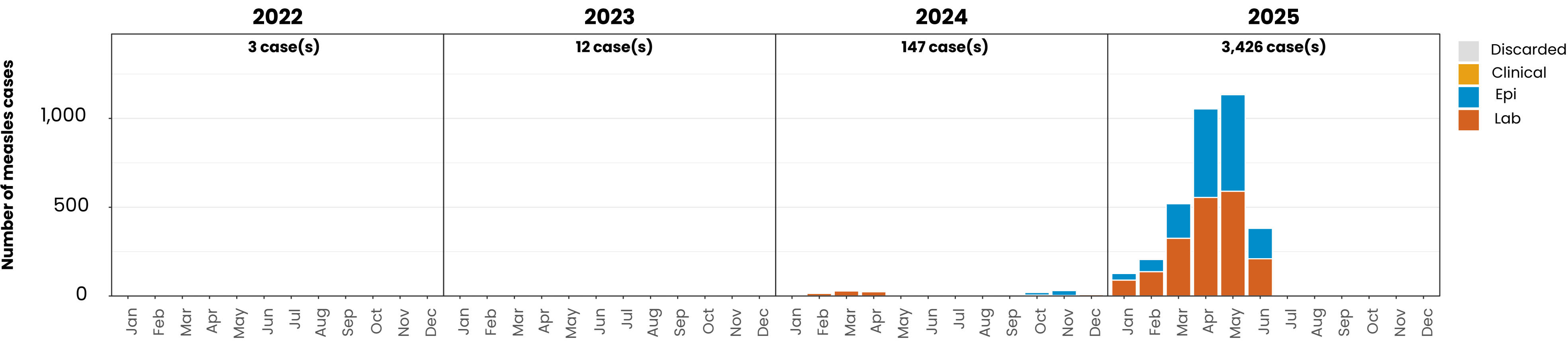
ELIMINATION STATUS: **VERIFIED**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles cases: Canada

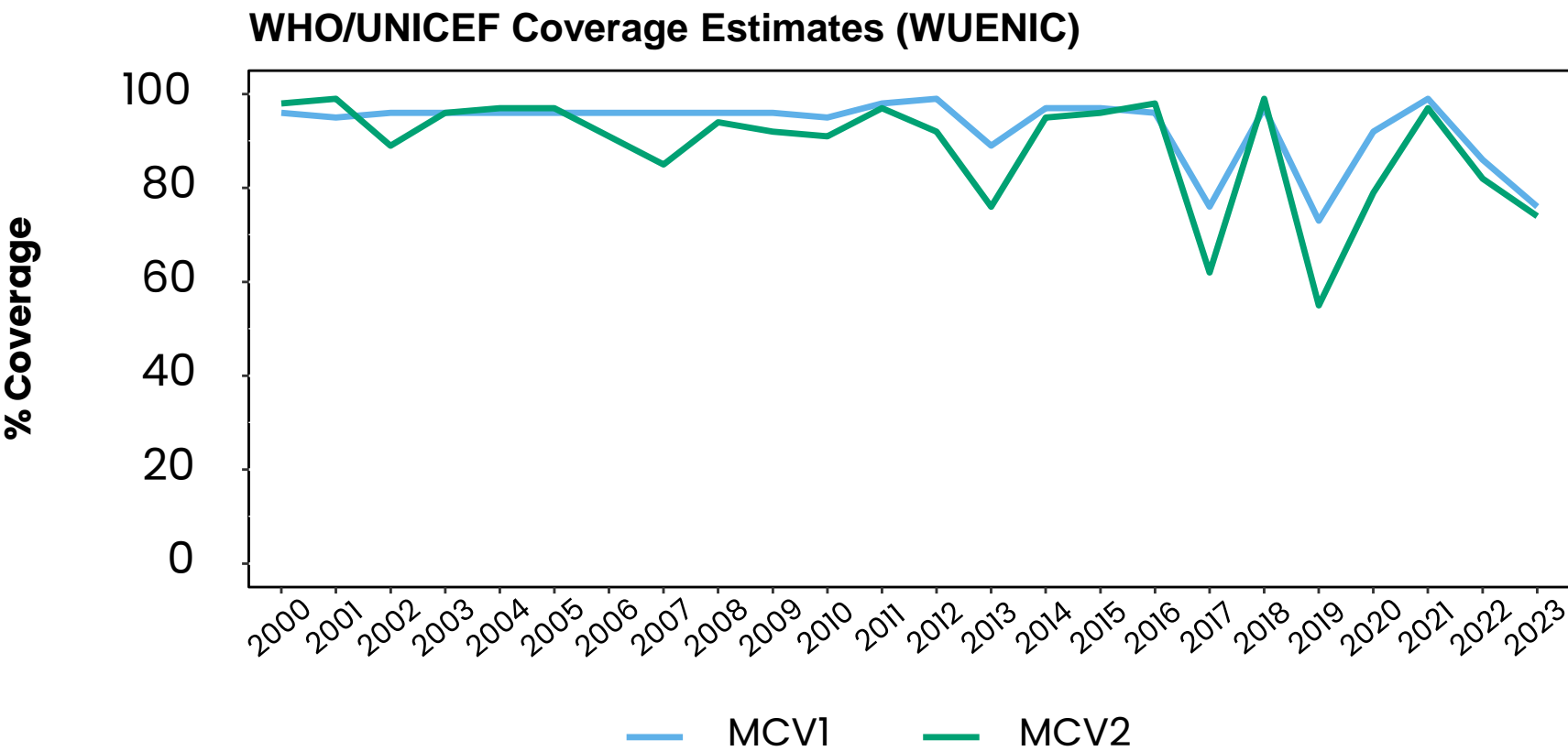
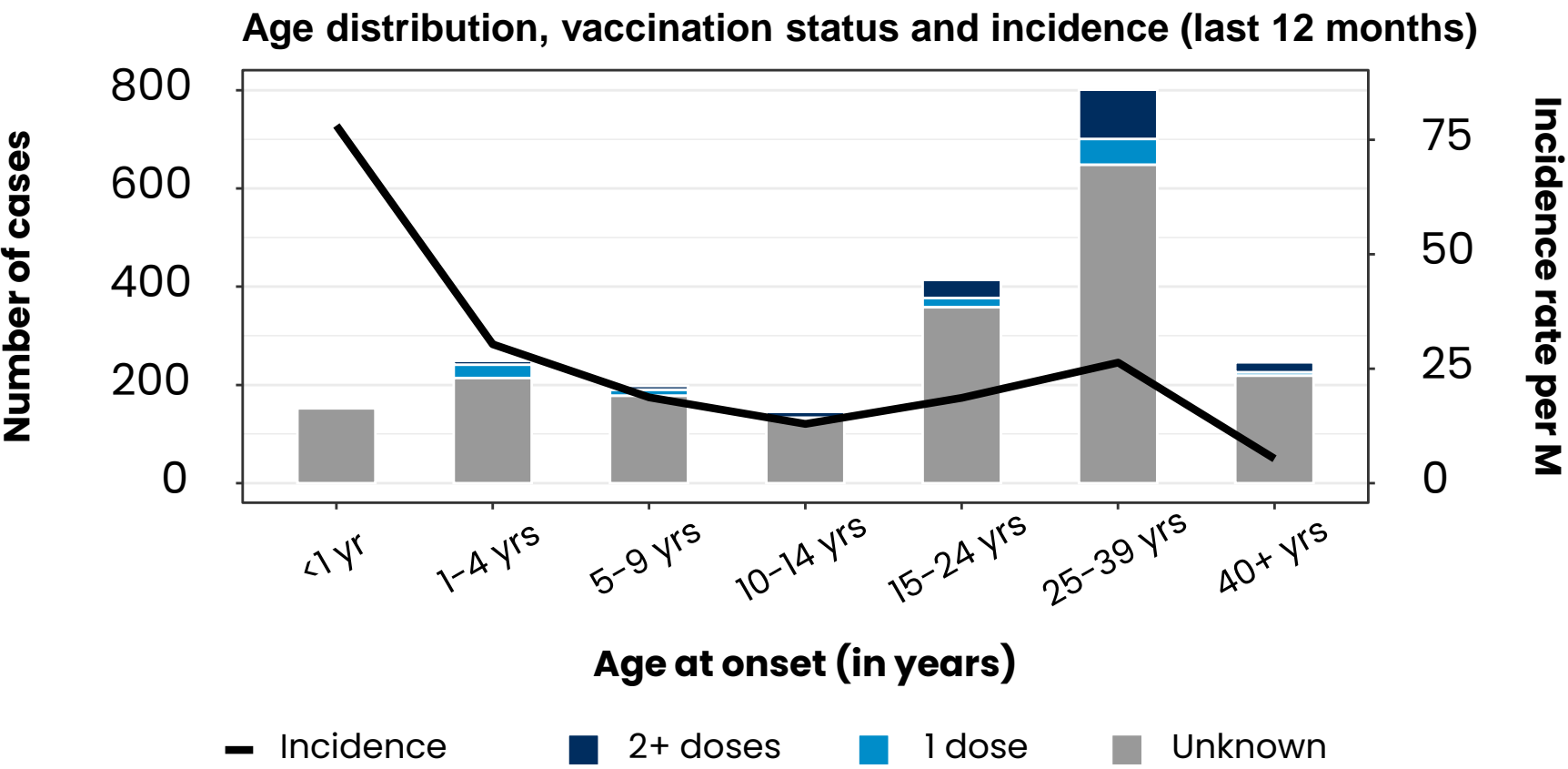
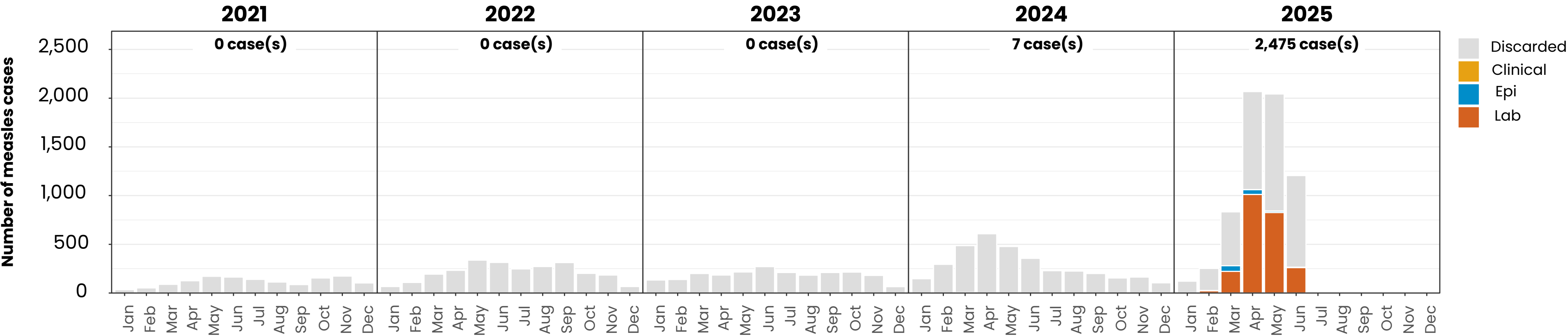
ELIMINATION STATUS: **VERIFIED**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Mexico

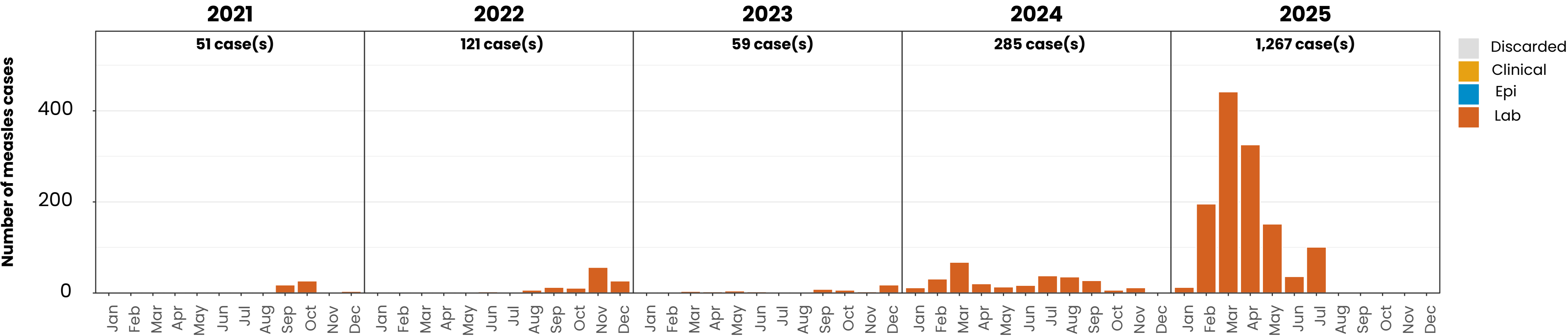
ELIMINATION STATUS: **VERIFIED**



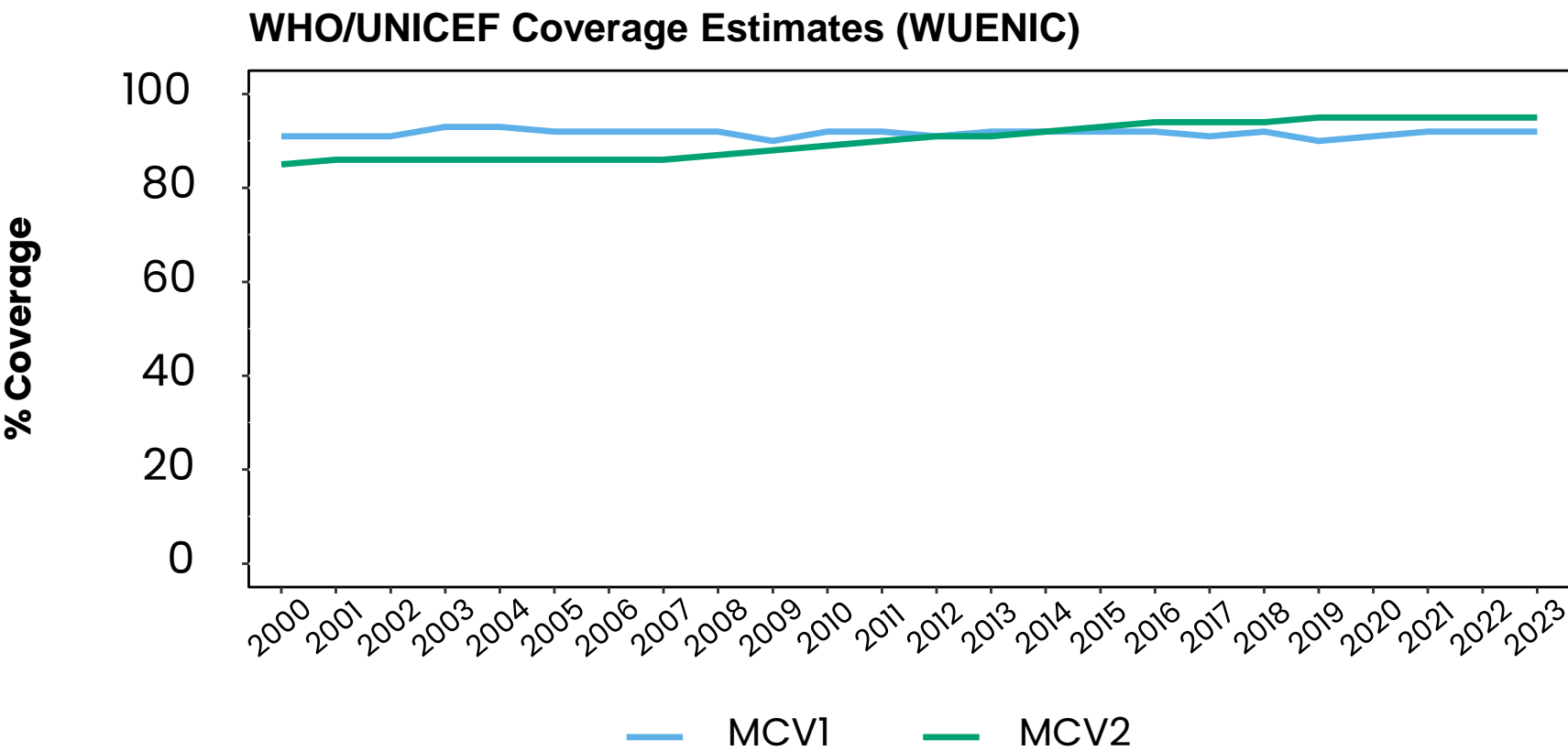
Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles cases: United States of America

ELIMINATION STATUS: **VERIFIED**



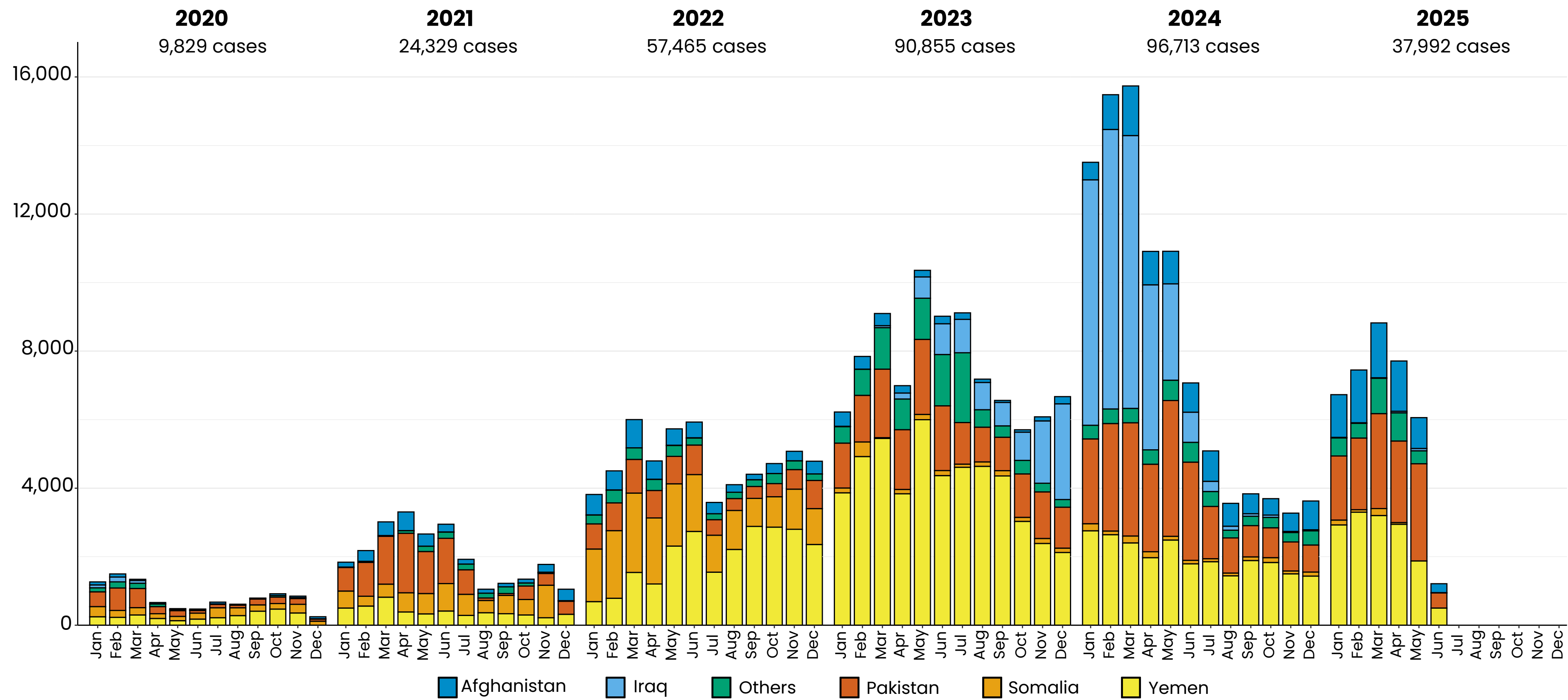
No data available or no case reported in the last 12 months



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using aggregate surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)



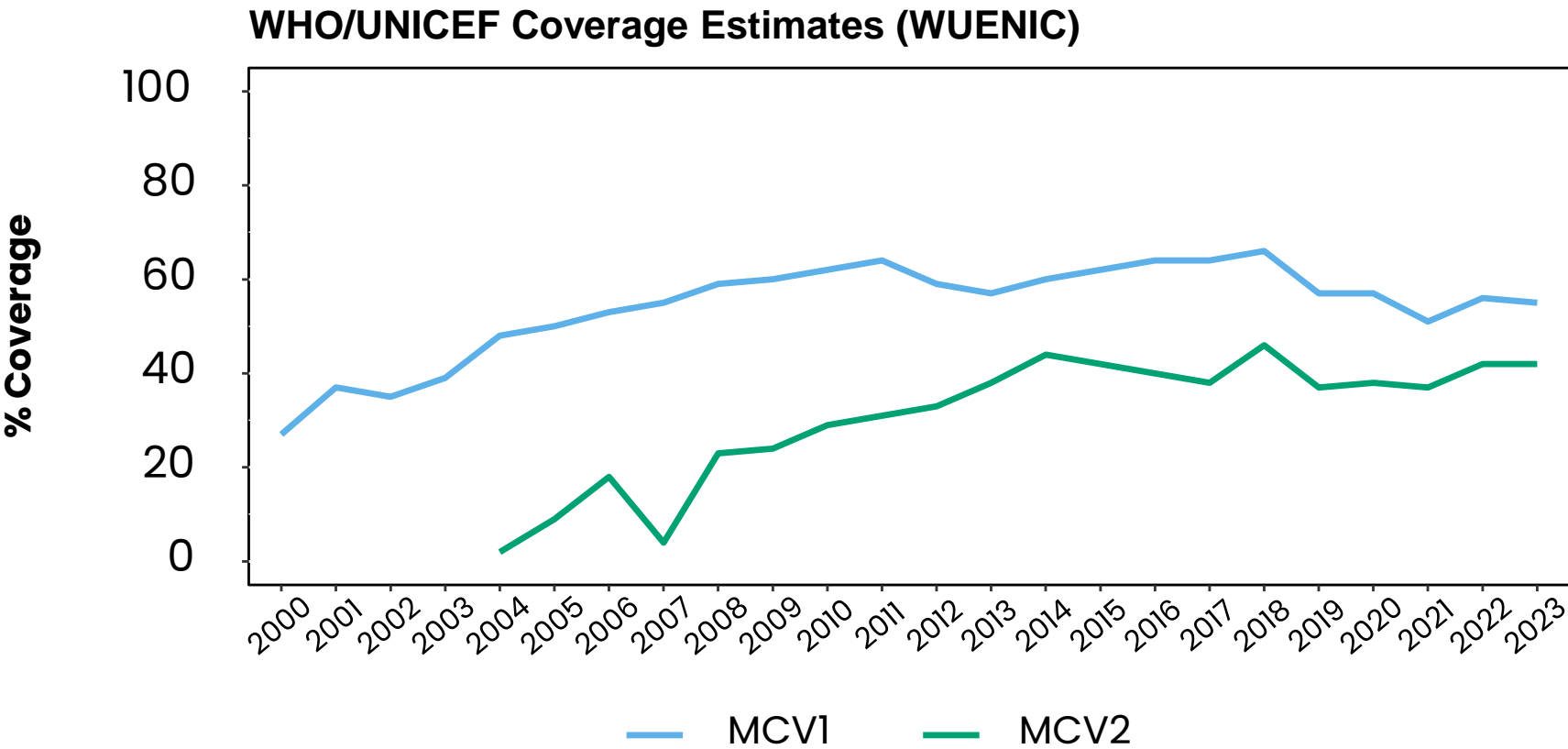
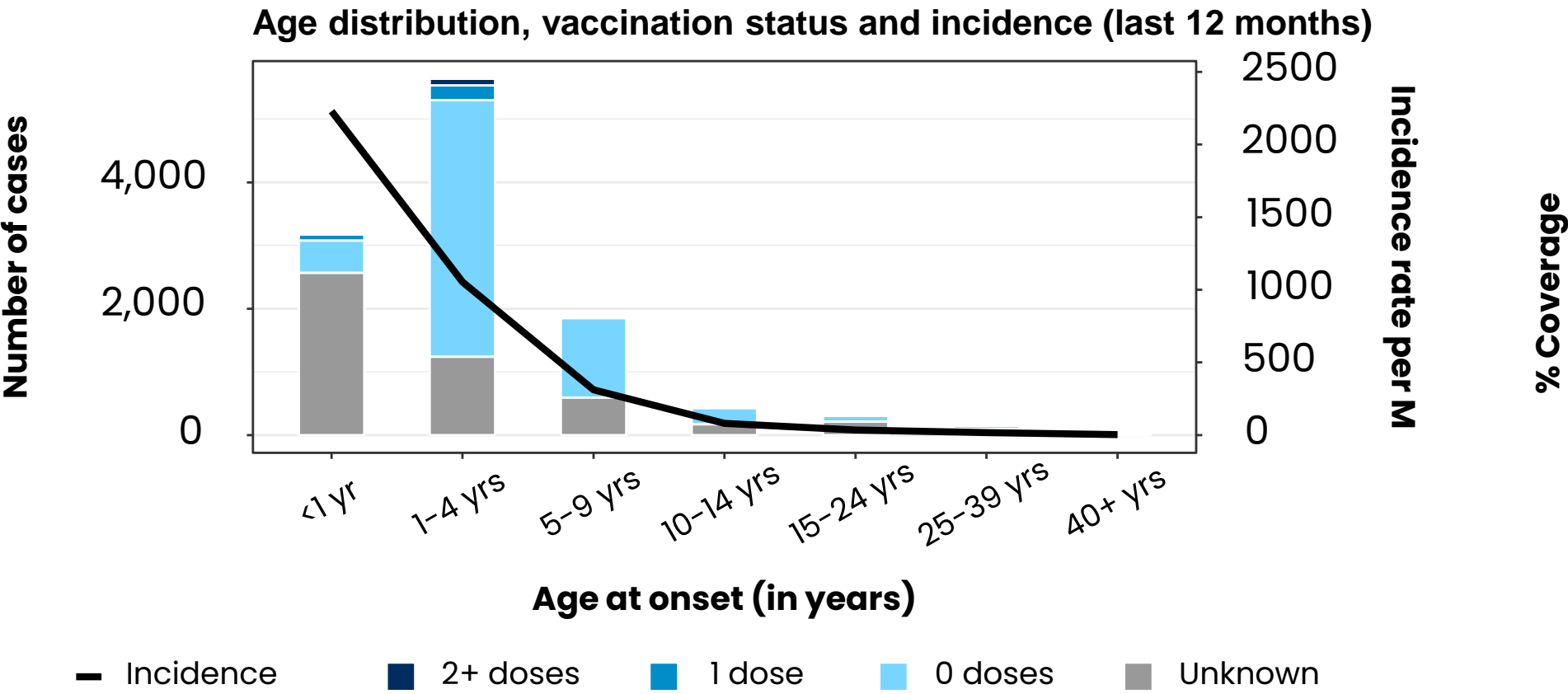
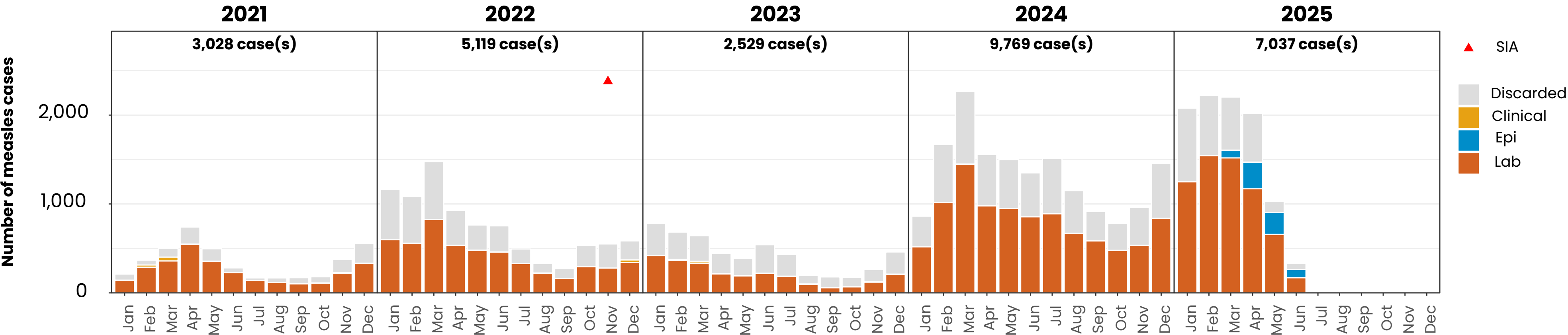
# Measles case distribution (EMR), 2020-2025



Based on data received 2025-07 - Data Source: IVB Database

Measles cases: Afghanistan

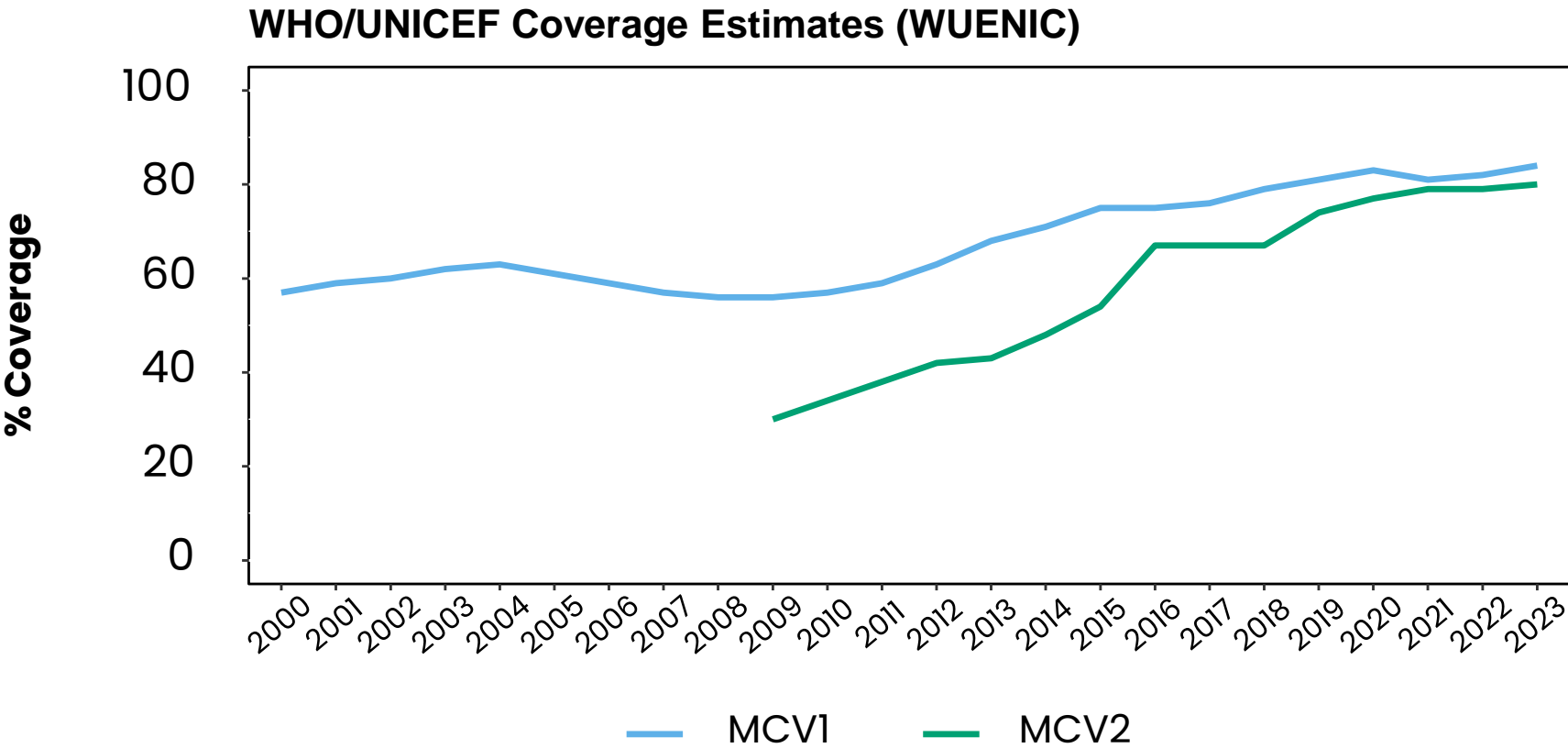
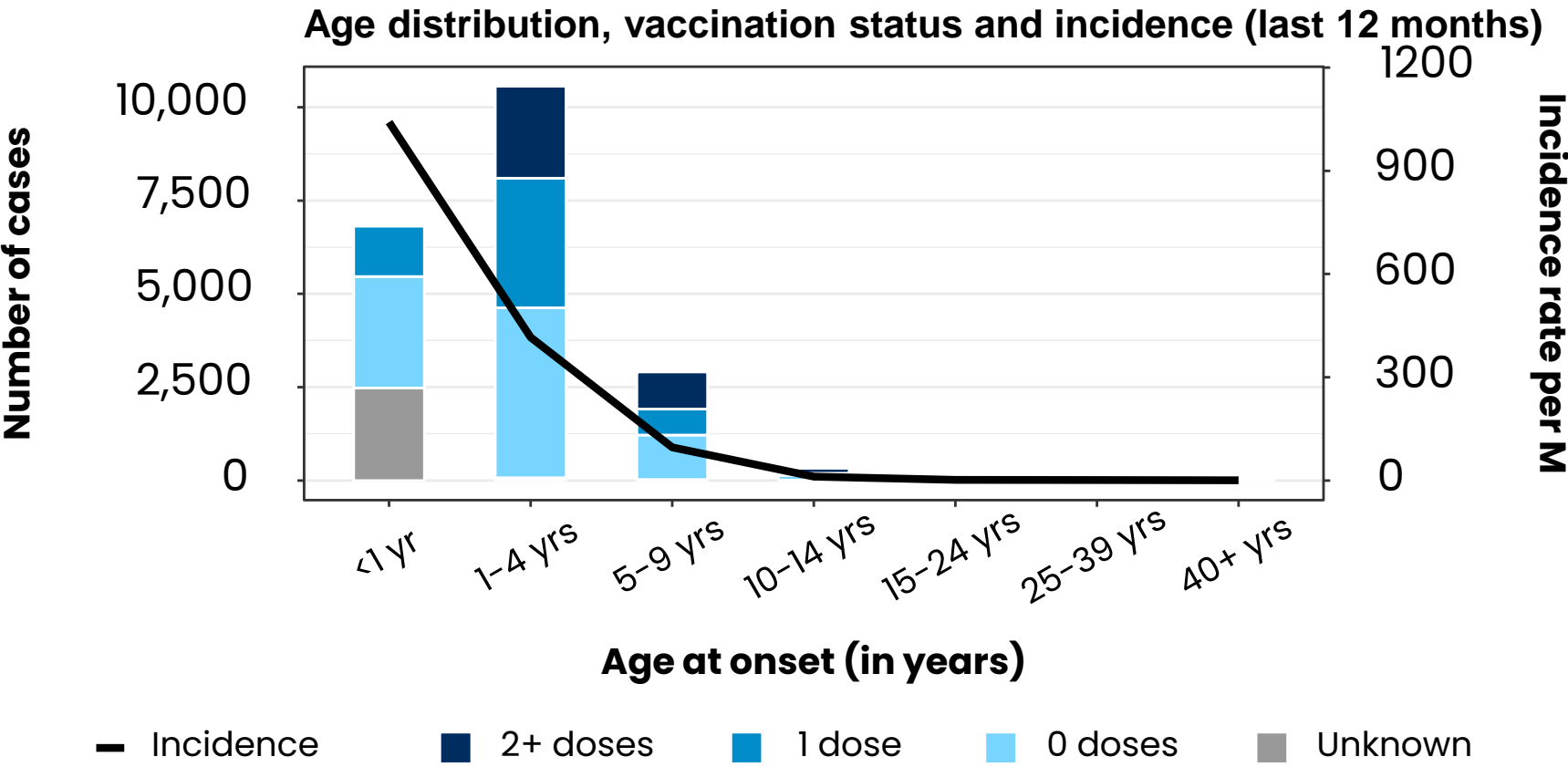
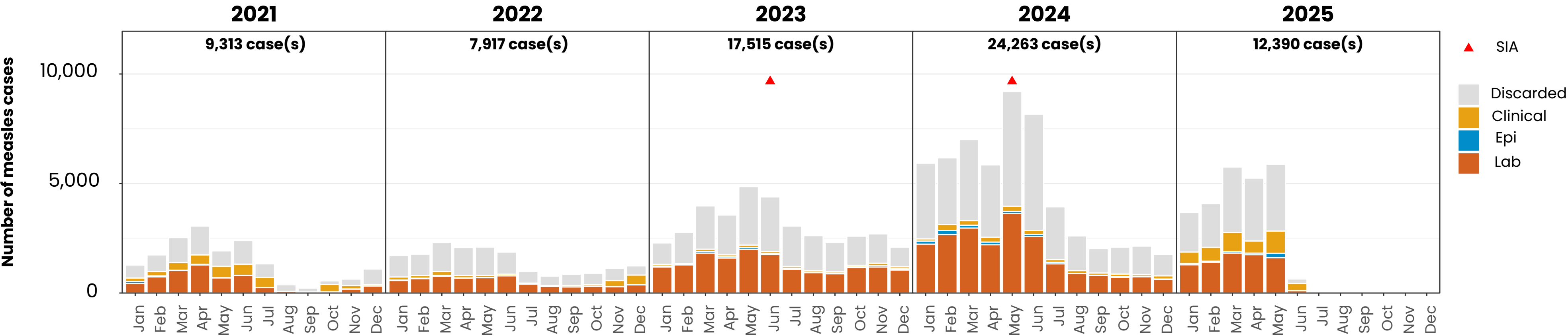
ELIMINATION STATUS: ENDEMIC



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Pakistan

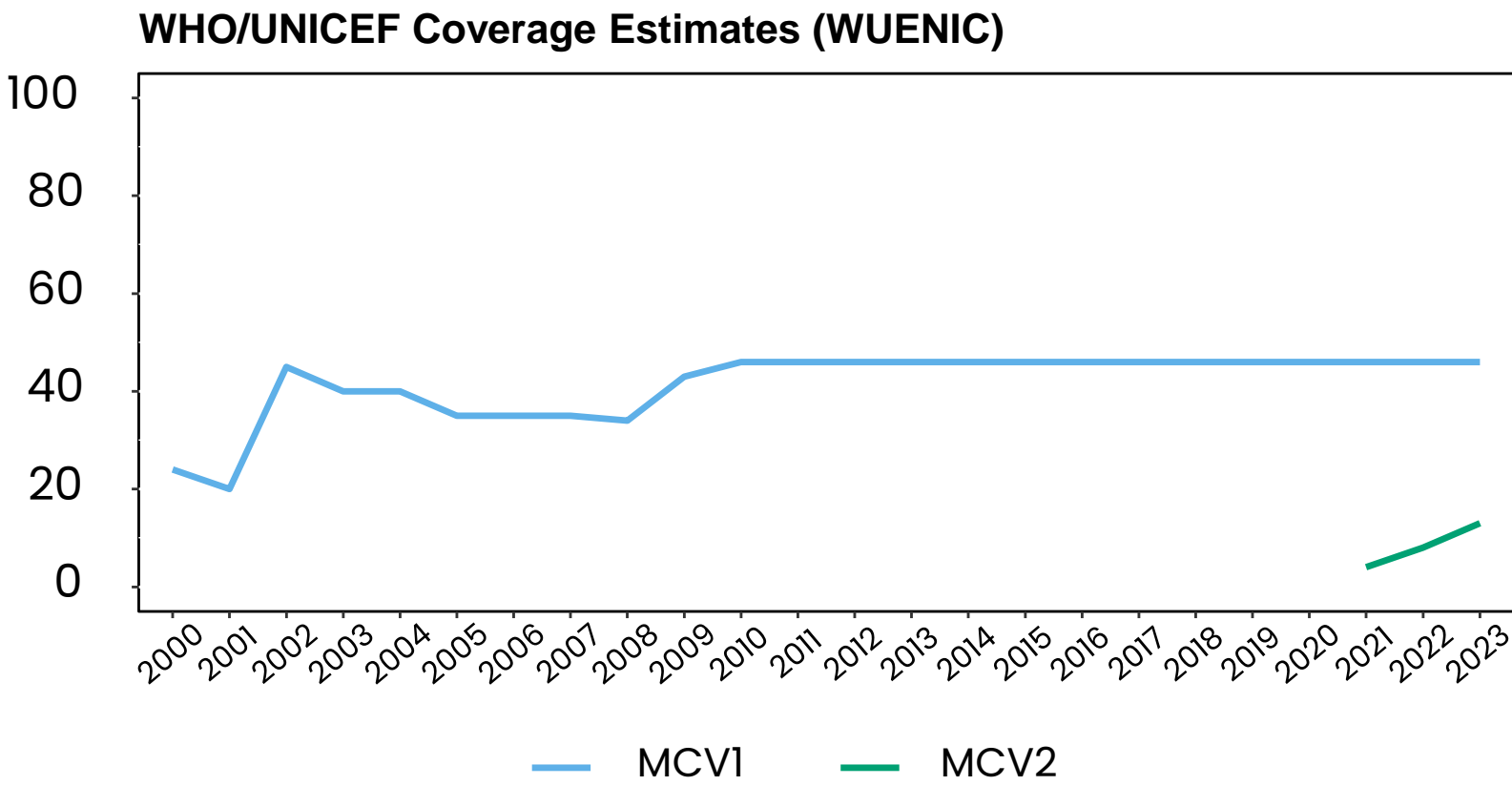
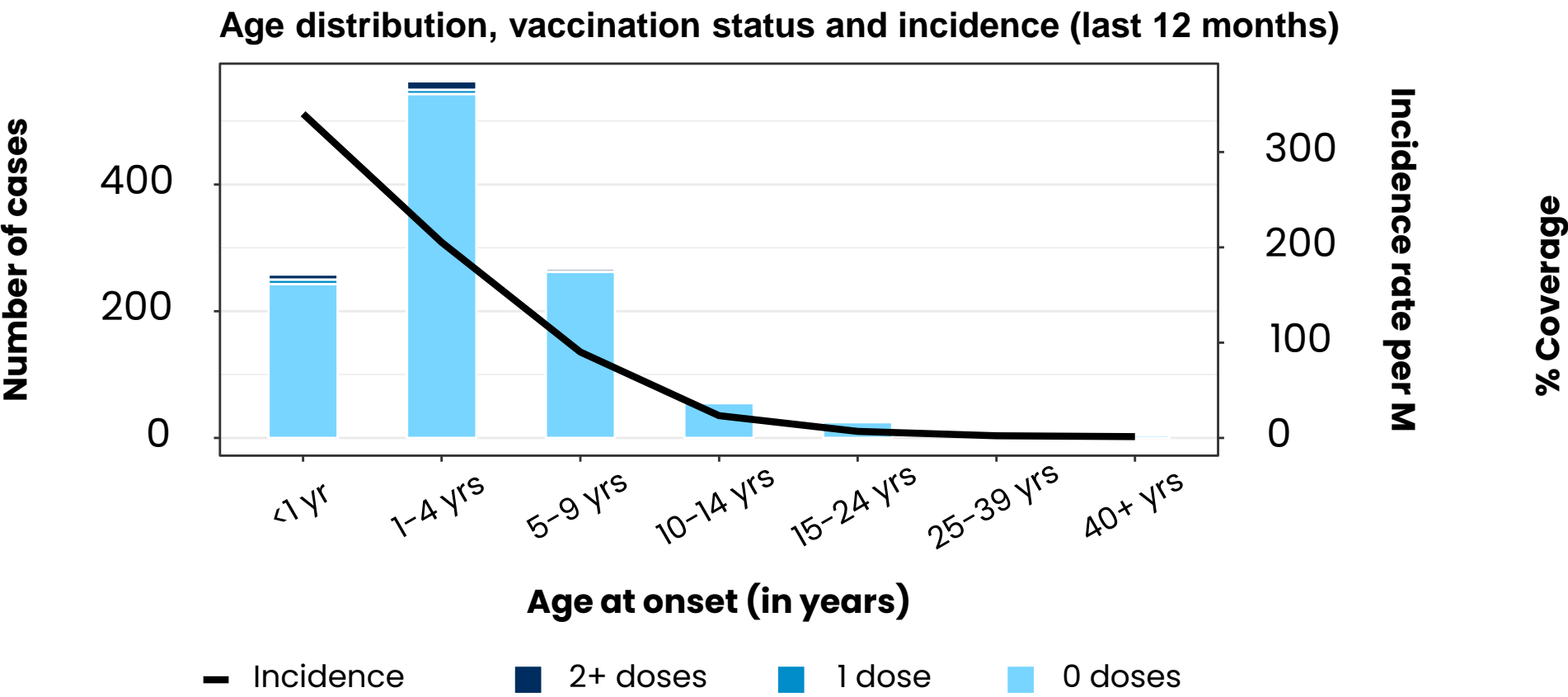
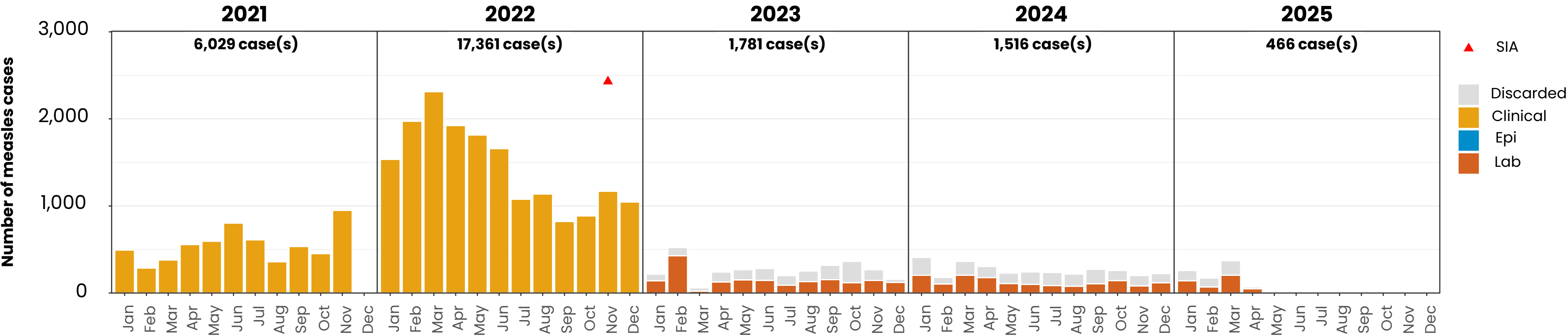
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Somalia

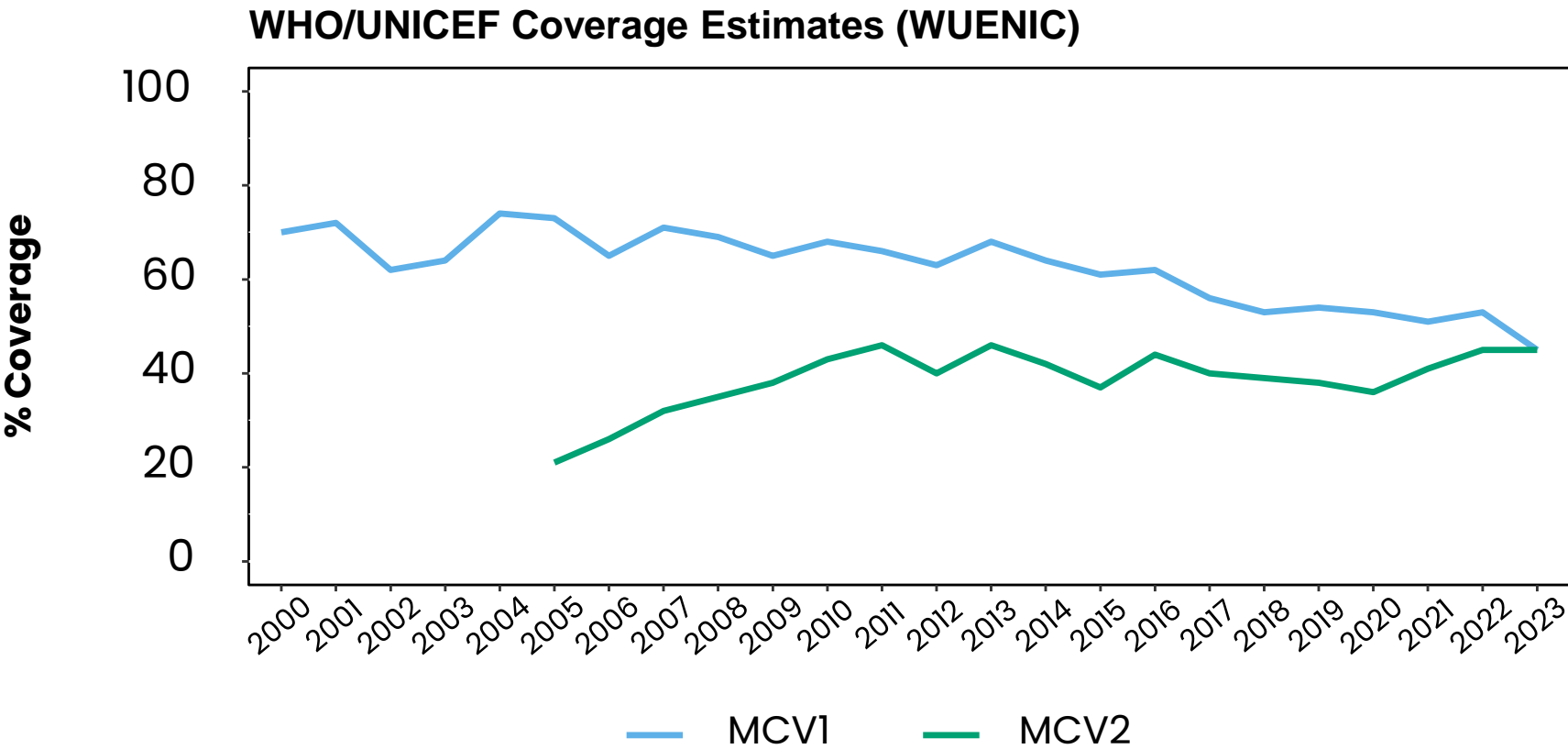
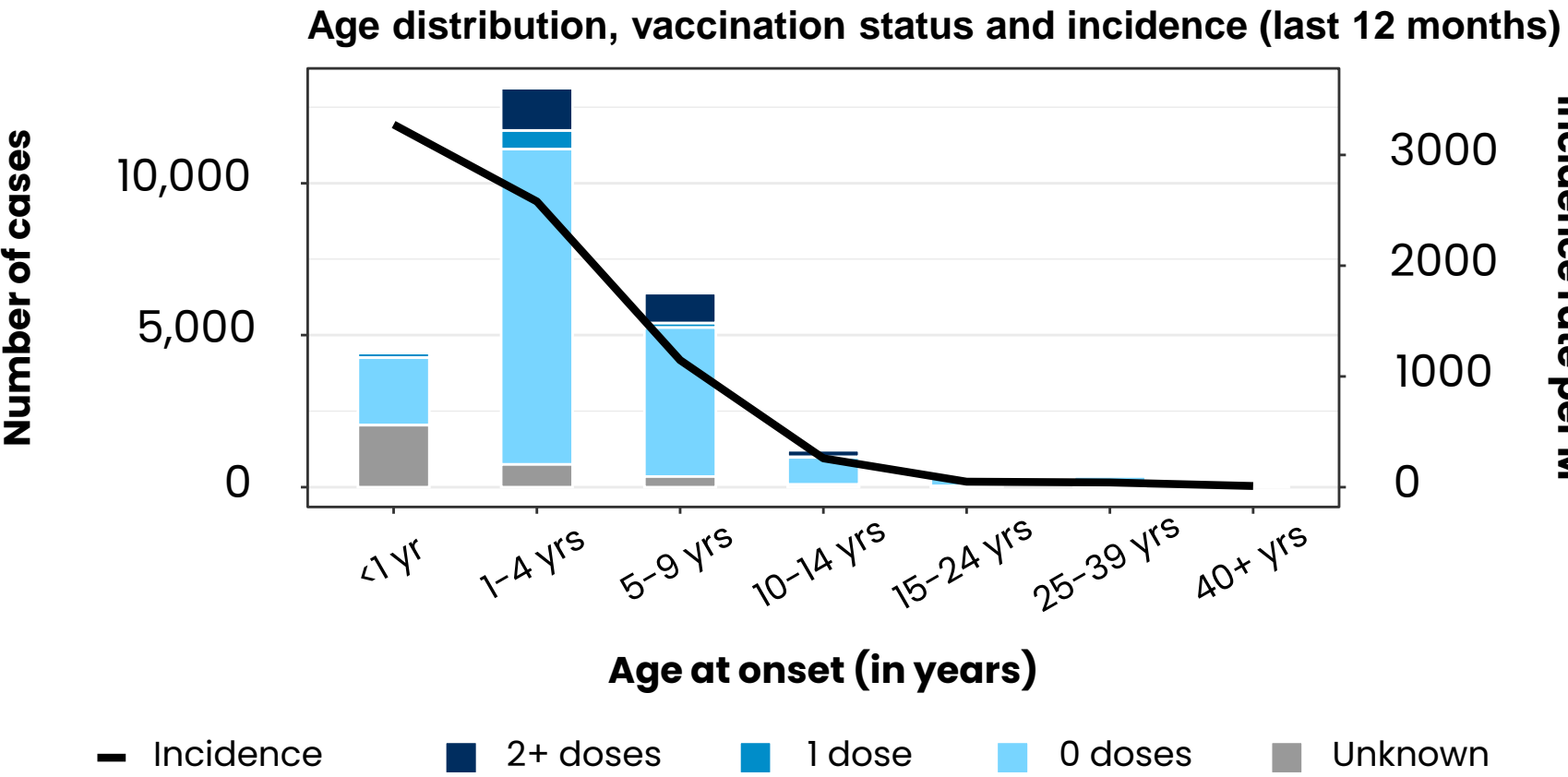
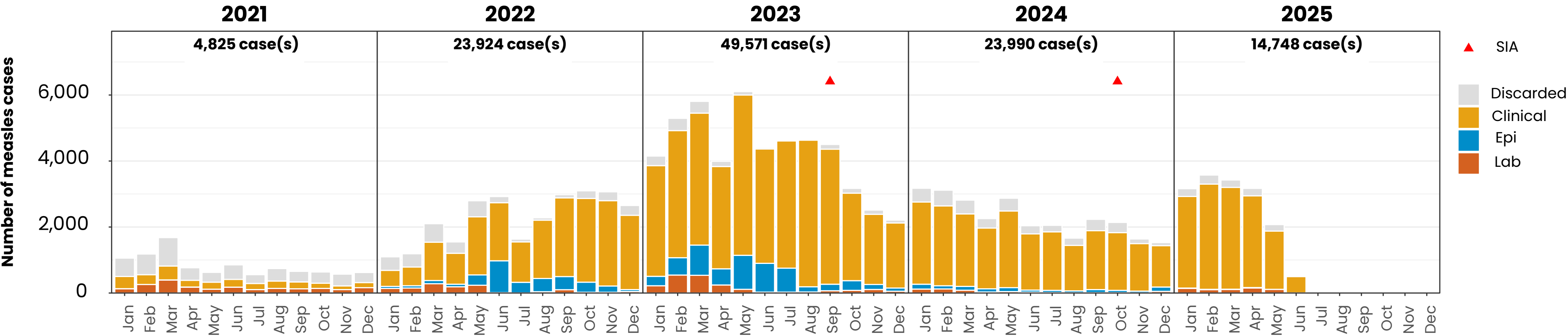
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using a combination of case-based and aggregate surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

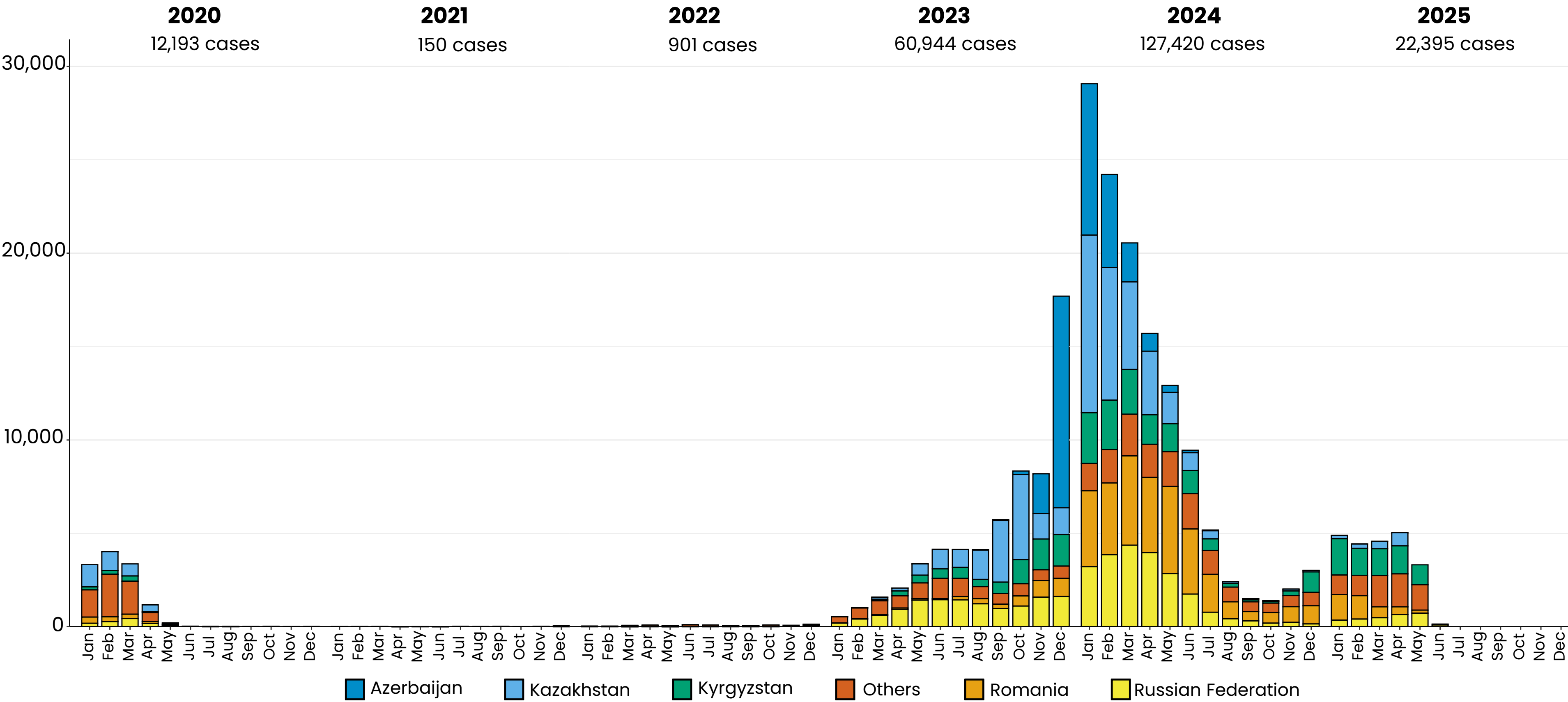
Measles cases: Yemen

ELIMINATION STATUS: **ENDEMIC**



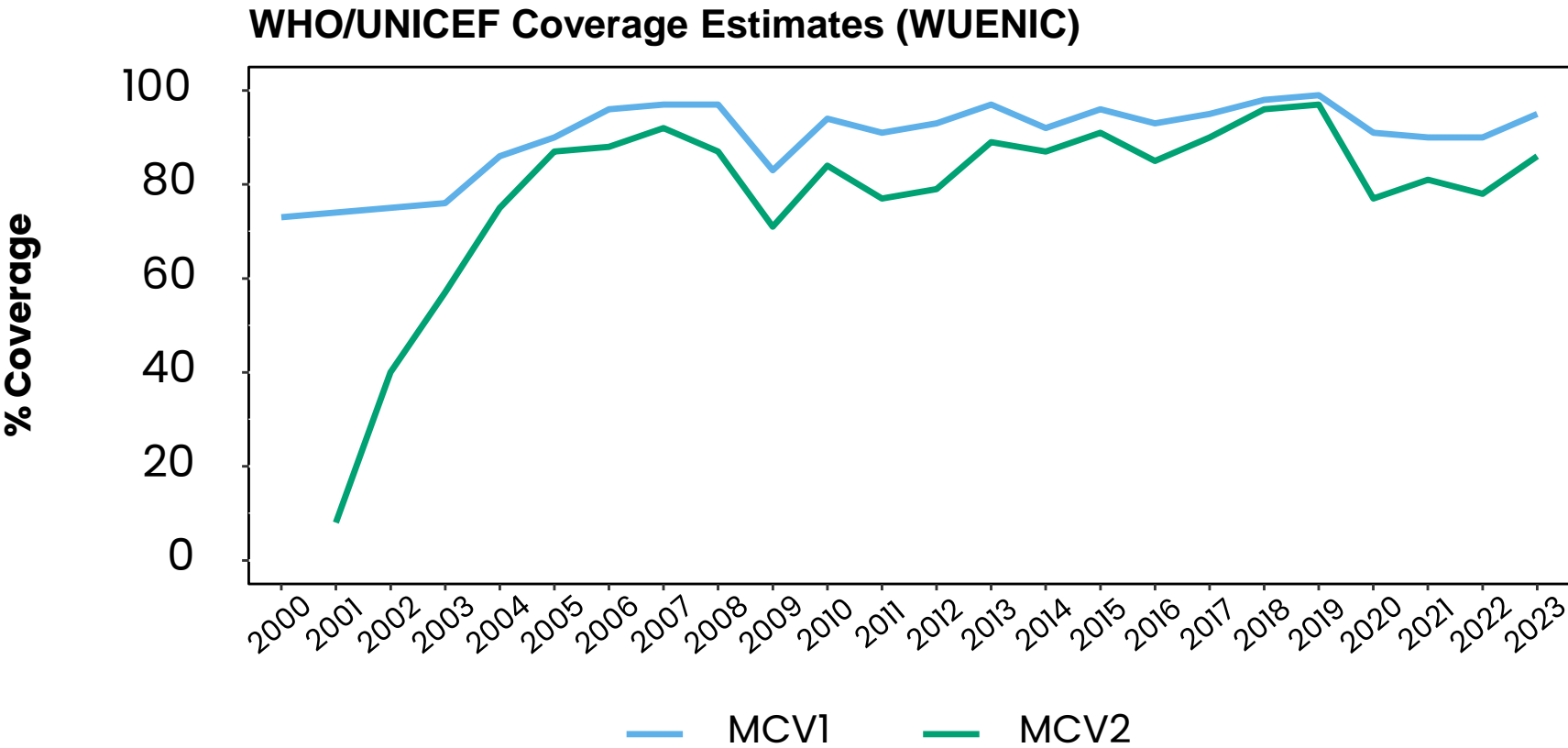
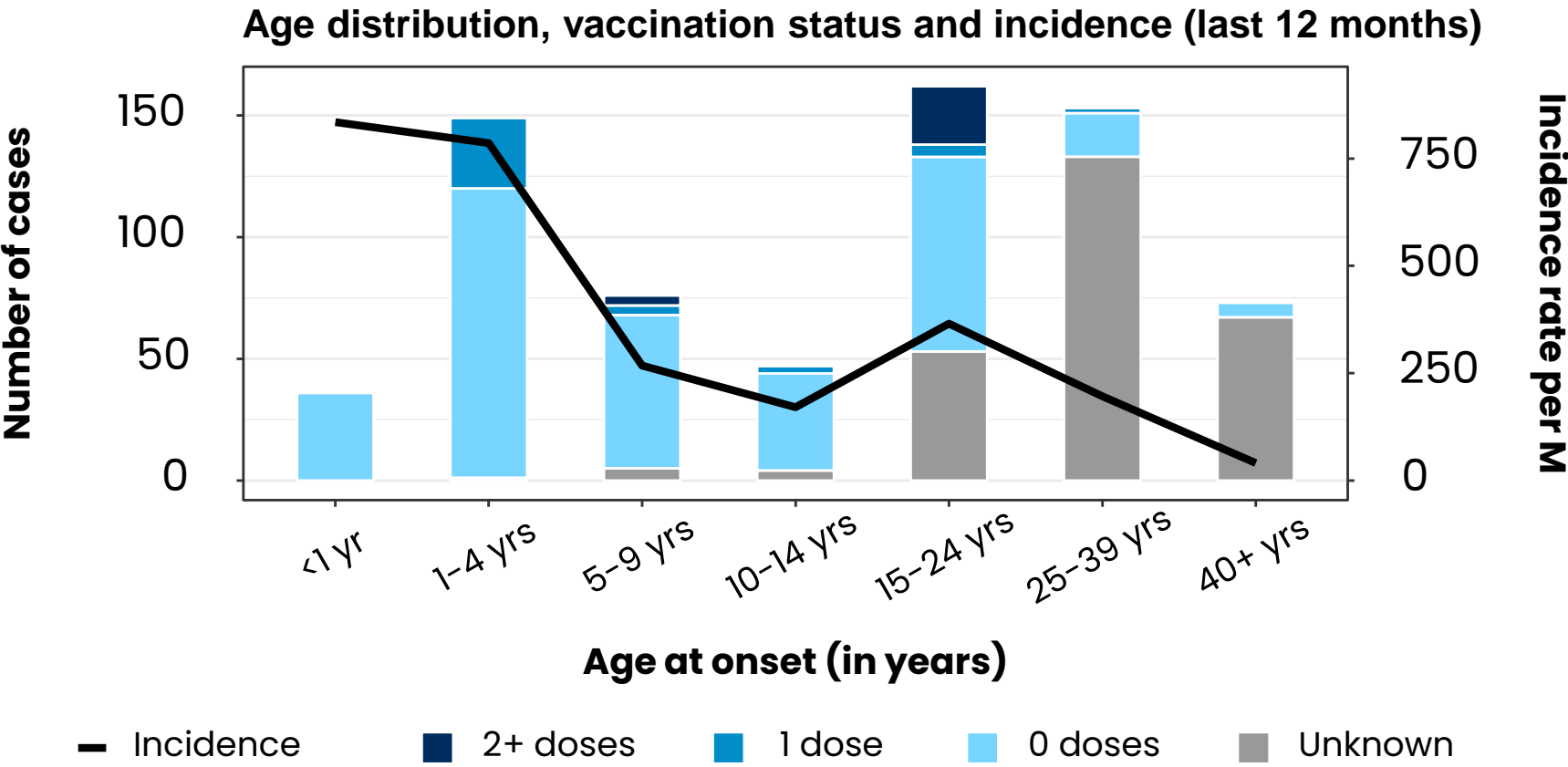
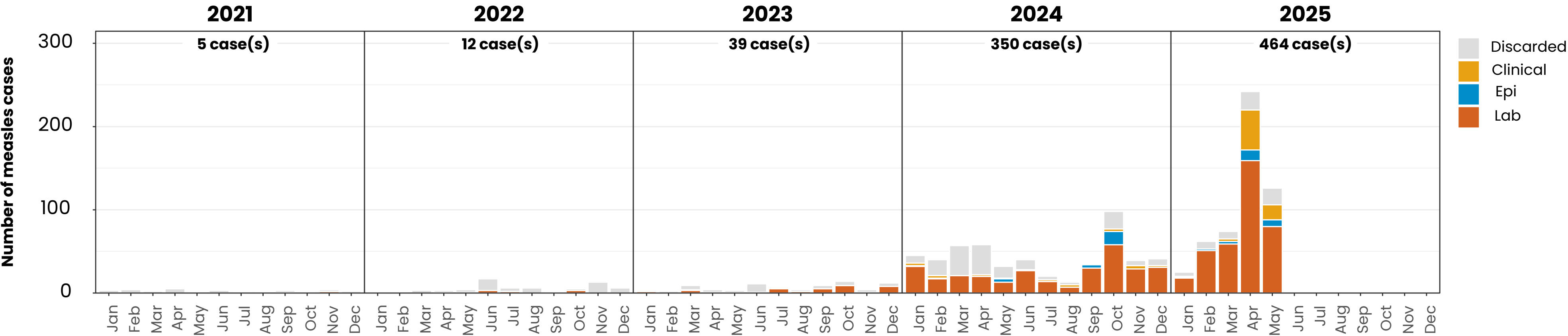
Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles case distribution (EUR), 2020-2025



# Measles cases: Georgia

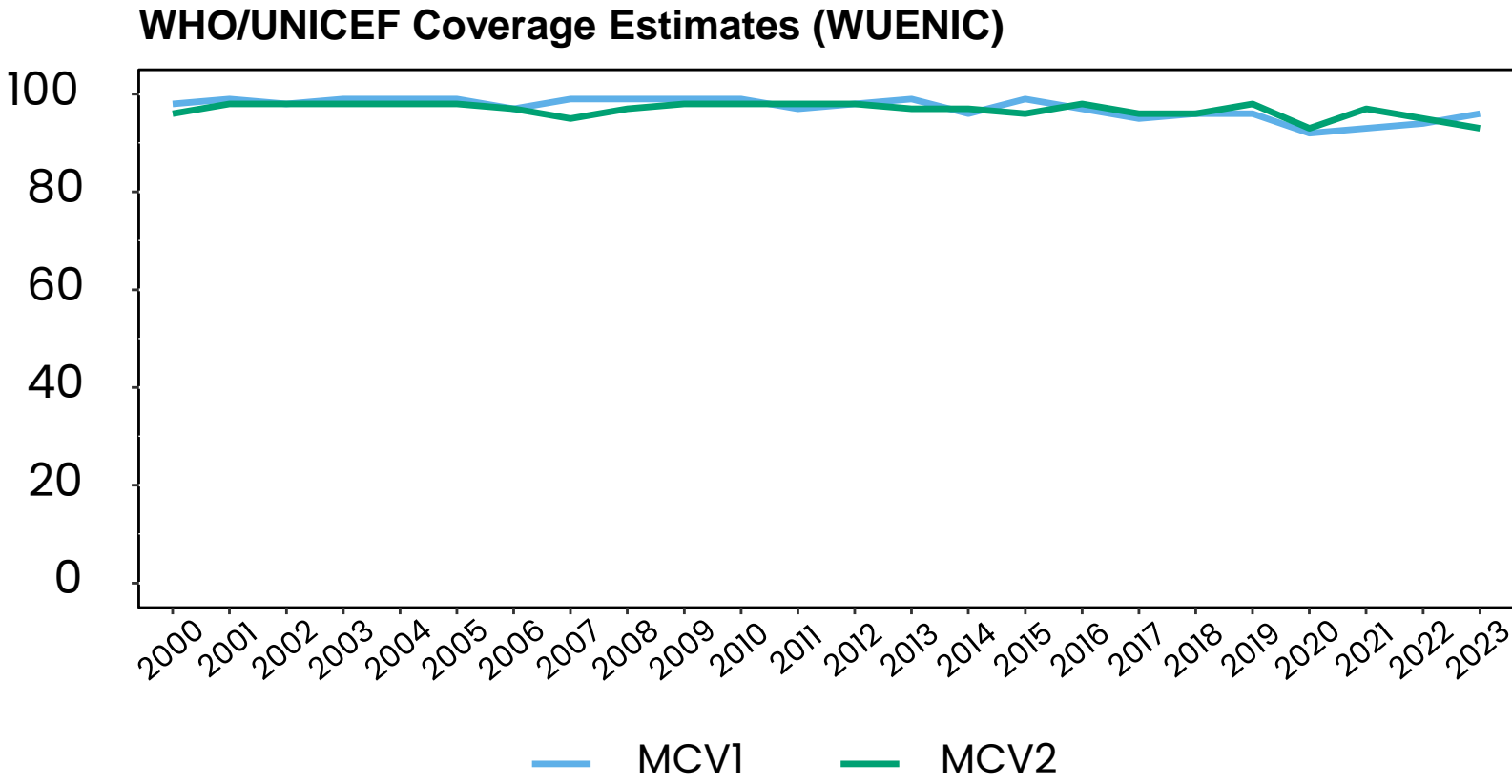
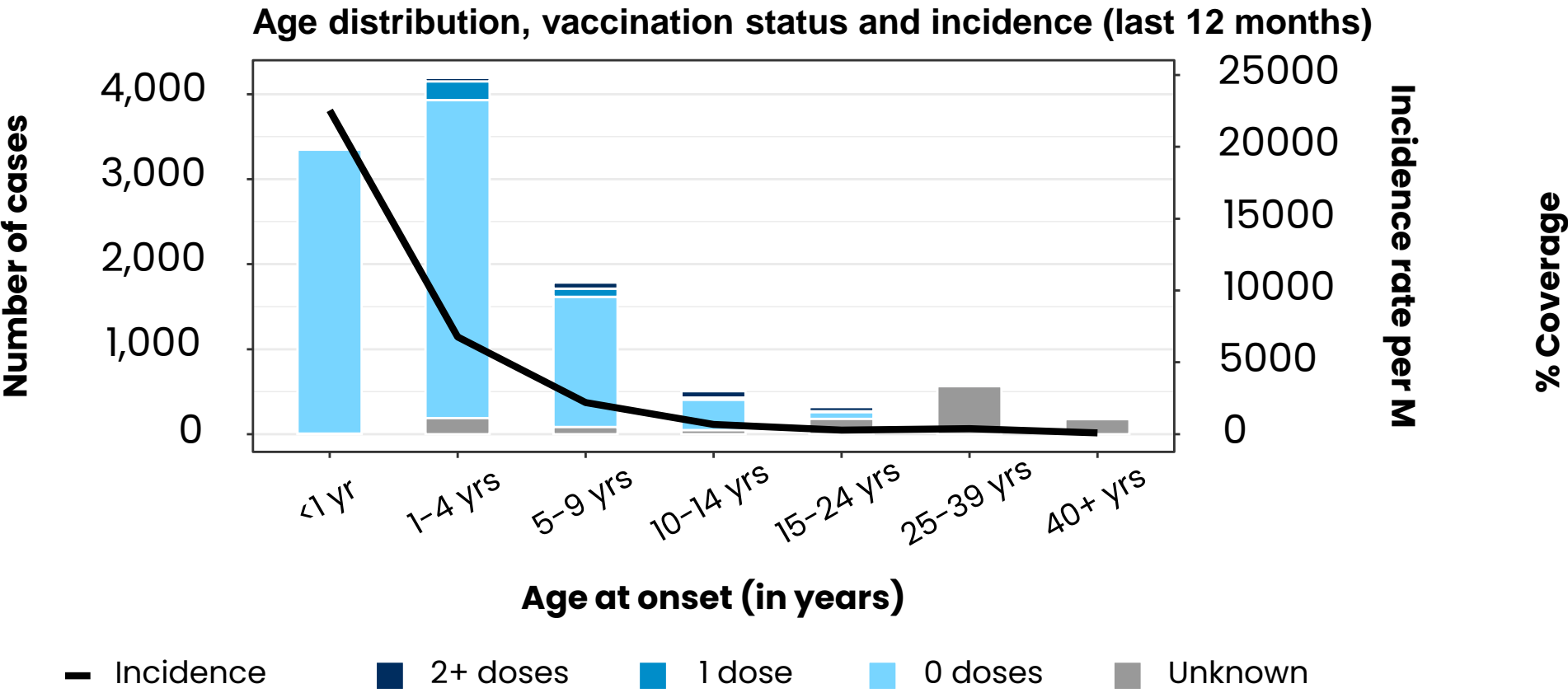
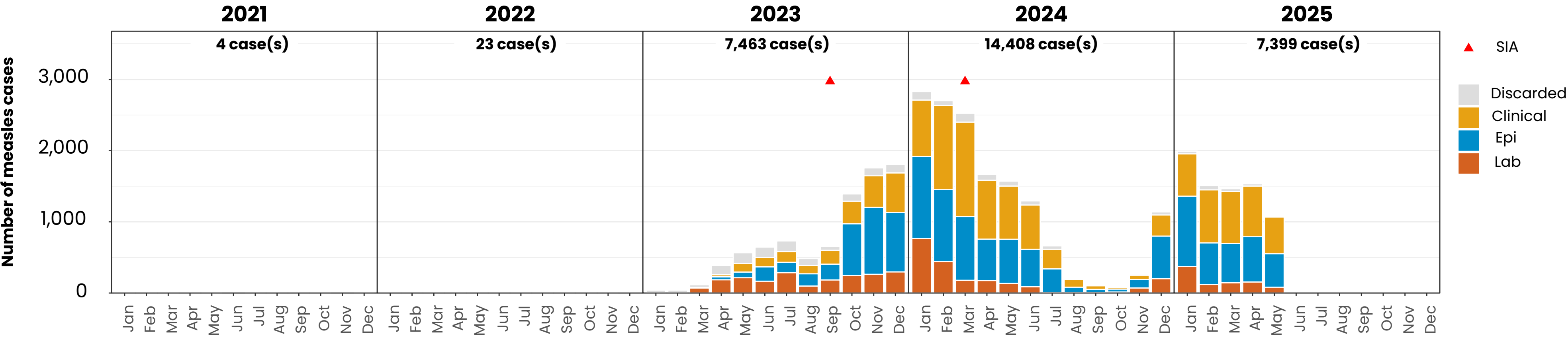
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles cases: Kyrgyzstan

ELIMINATION STATUS: **ENDEMIC**

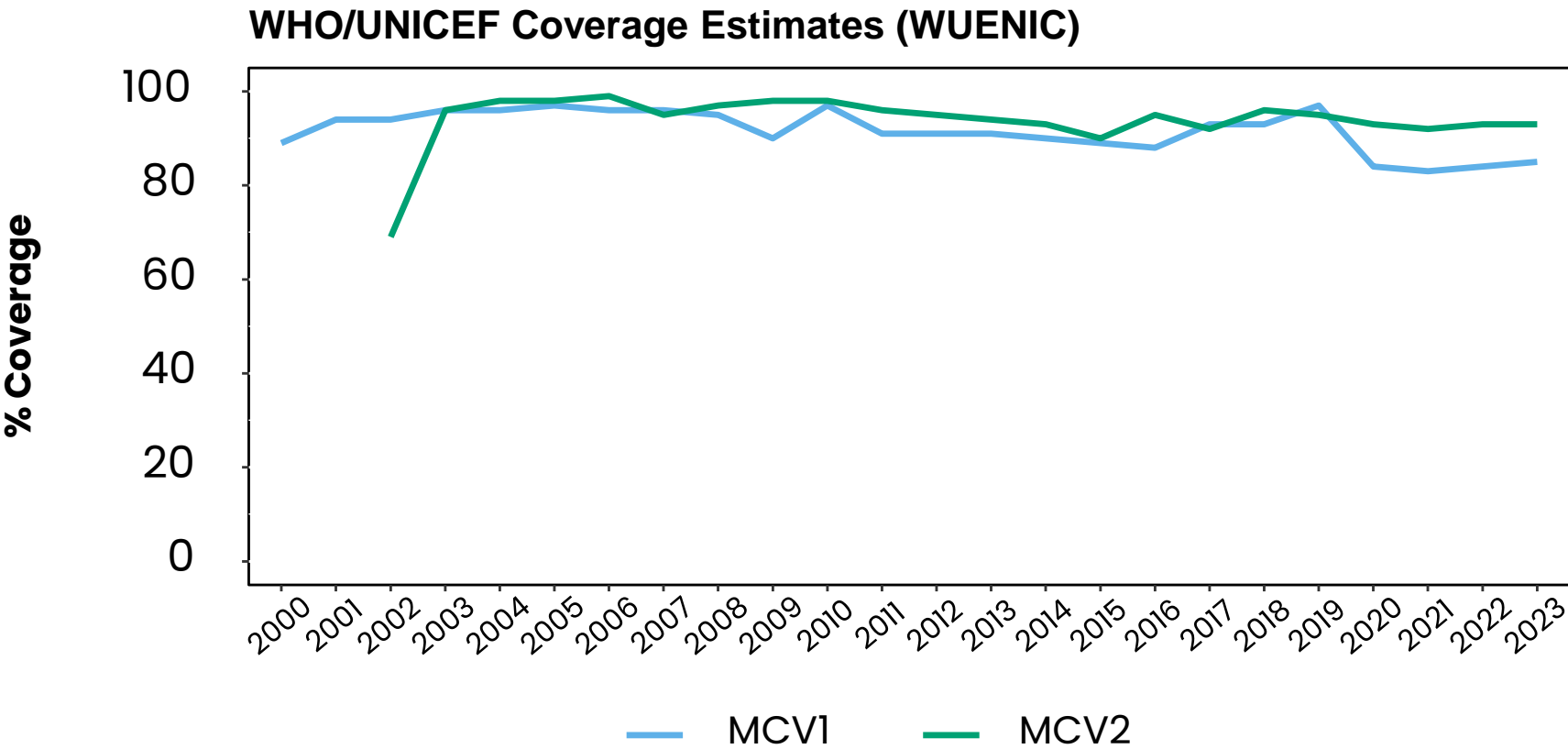
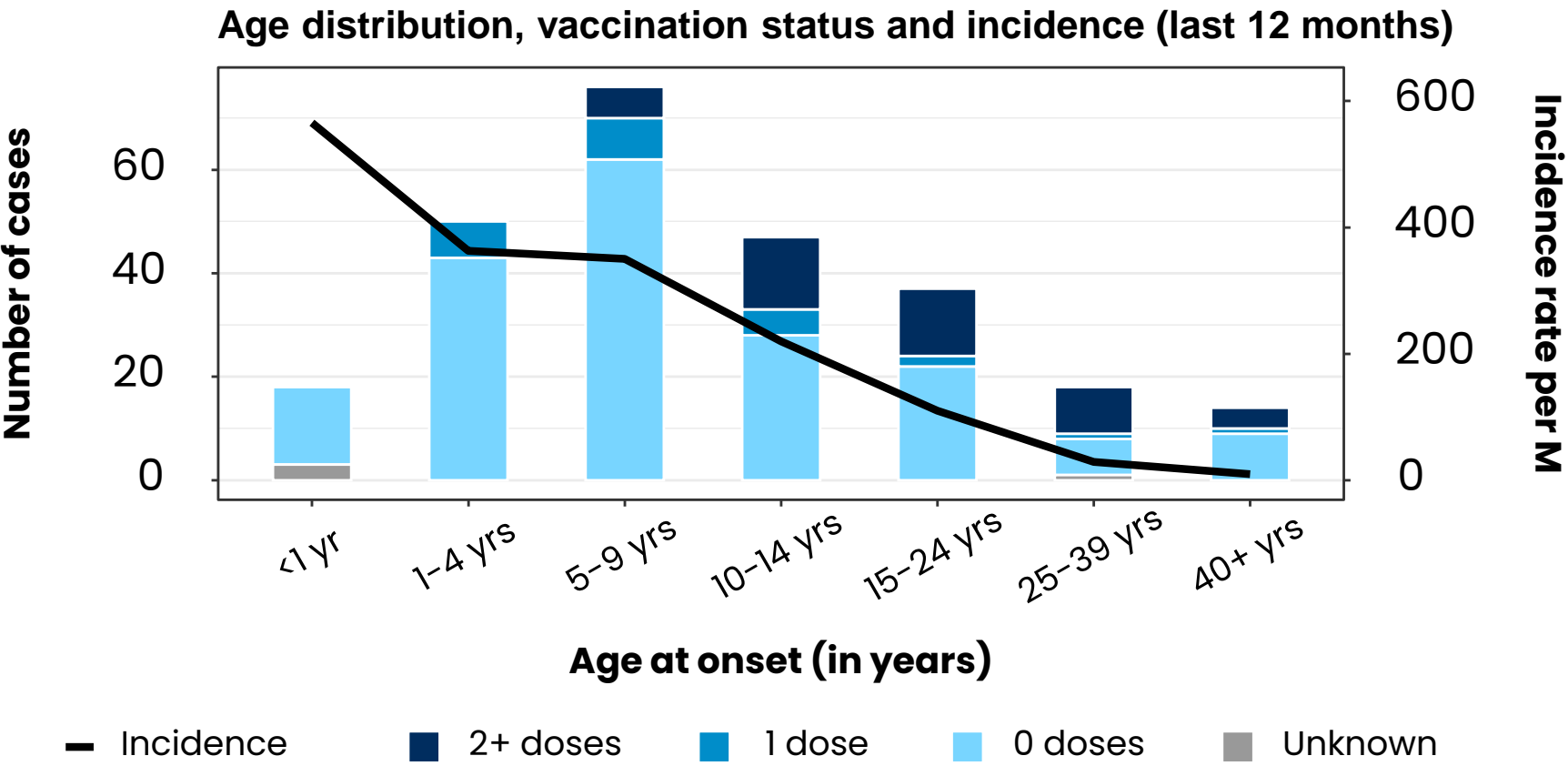
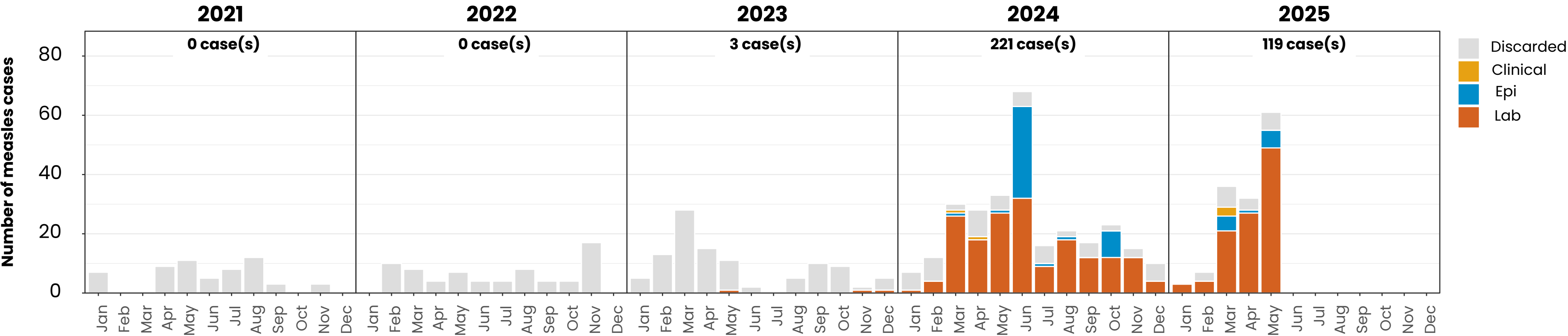


Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)



# Measles cases: Republic of Moldova

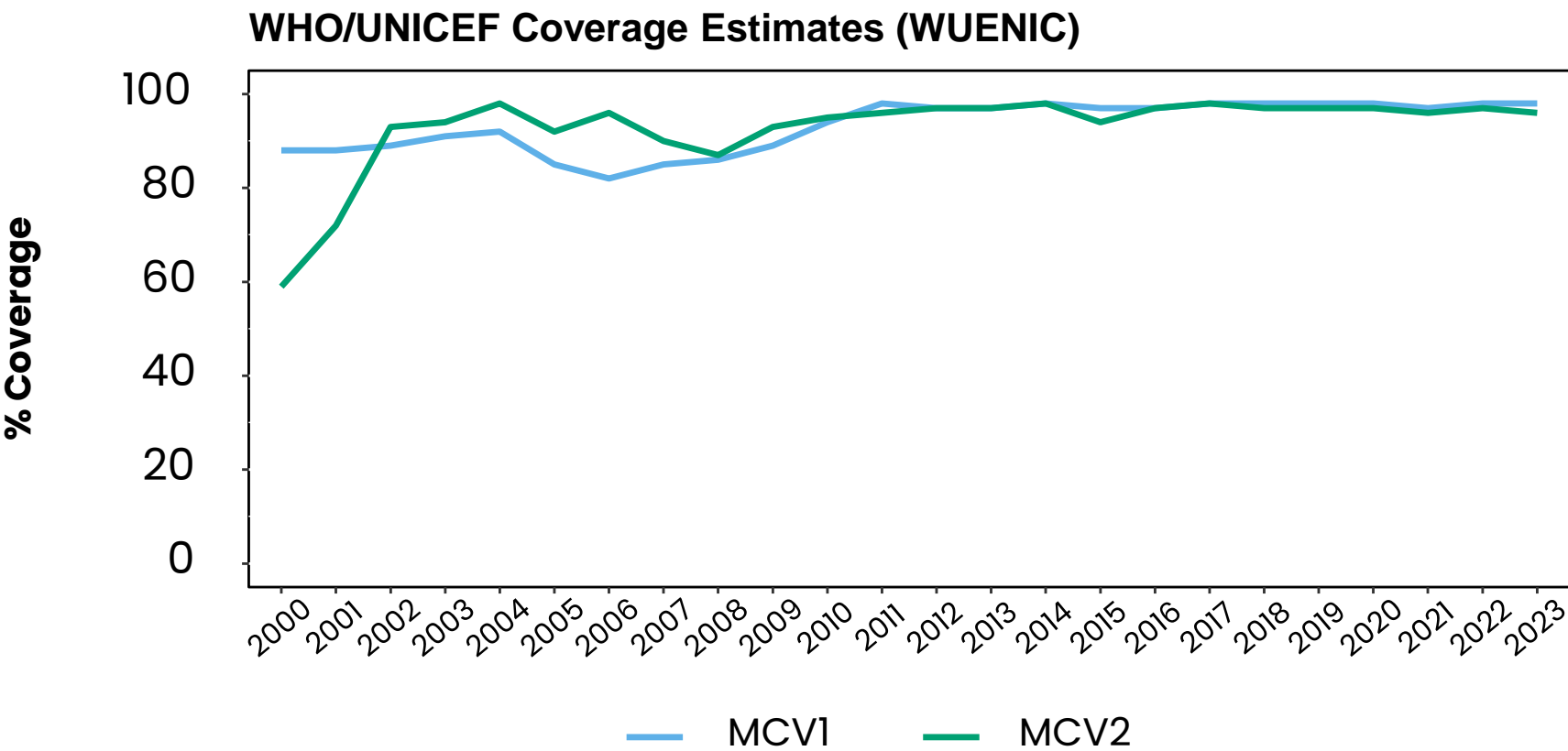
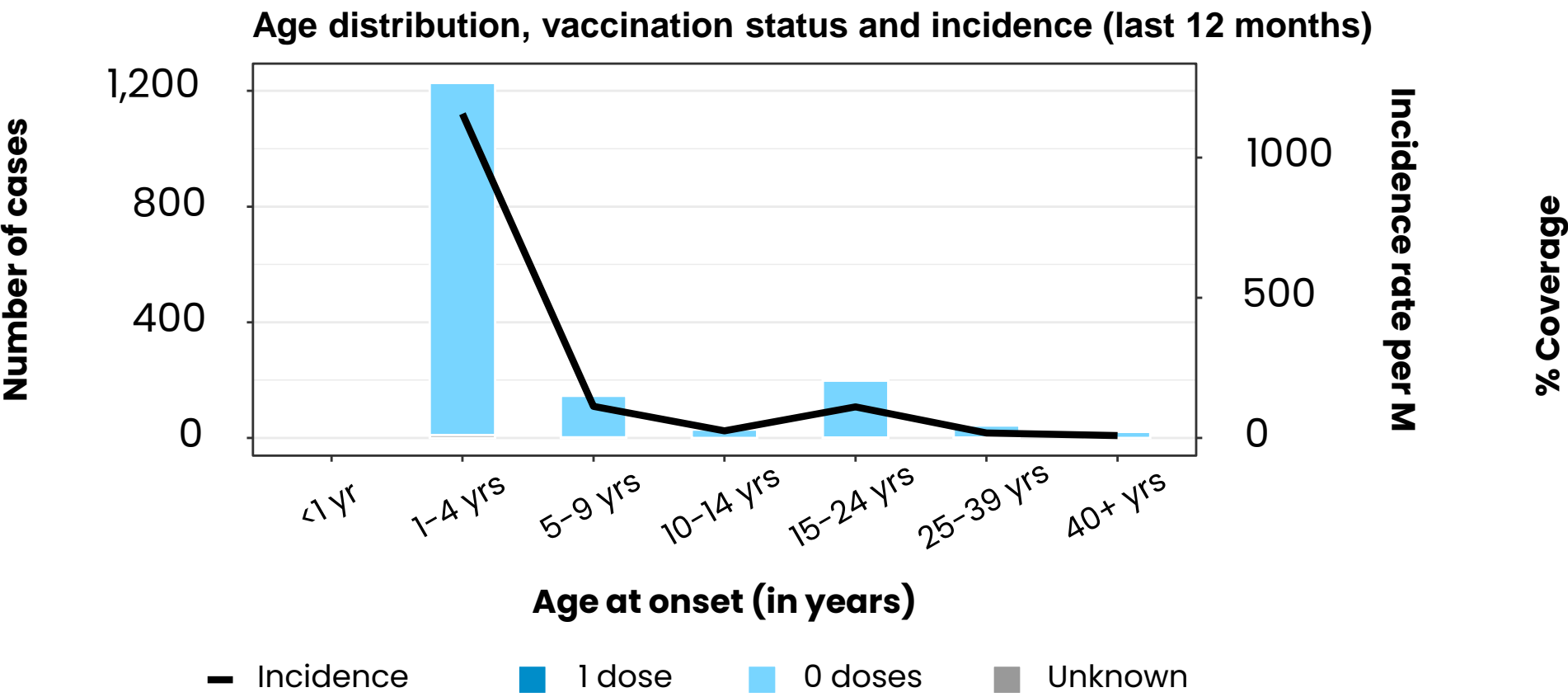
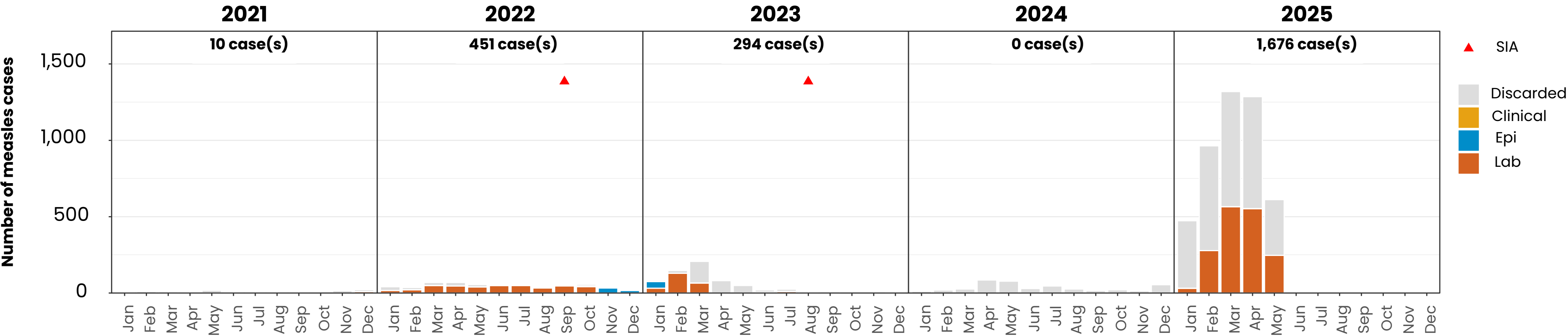
ELIMINATION STATUS: **VERIFIED**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles cases: Tajikistan

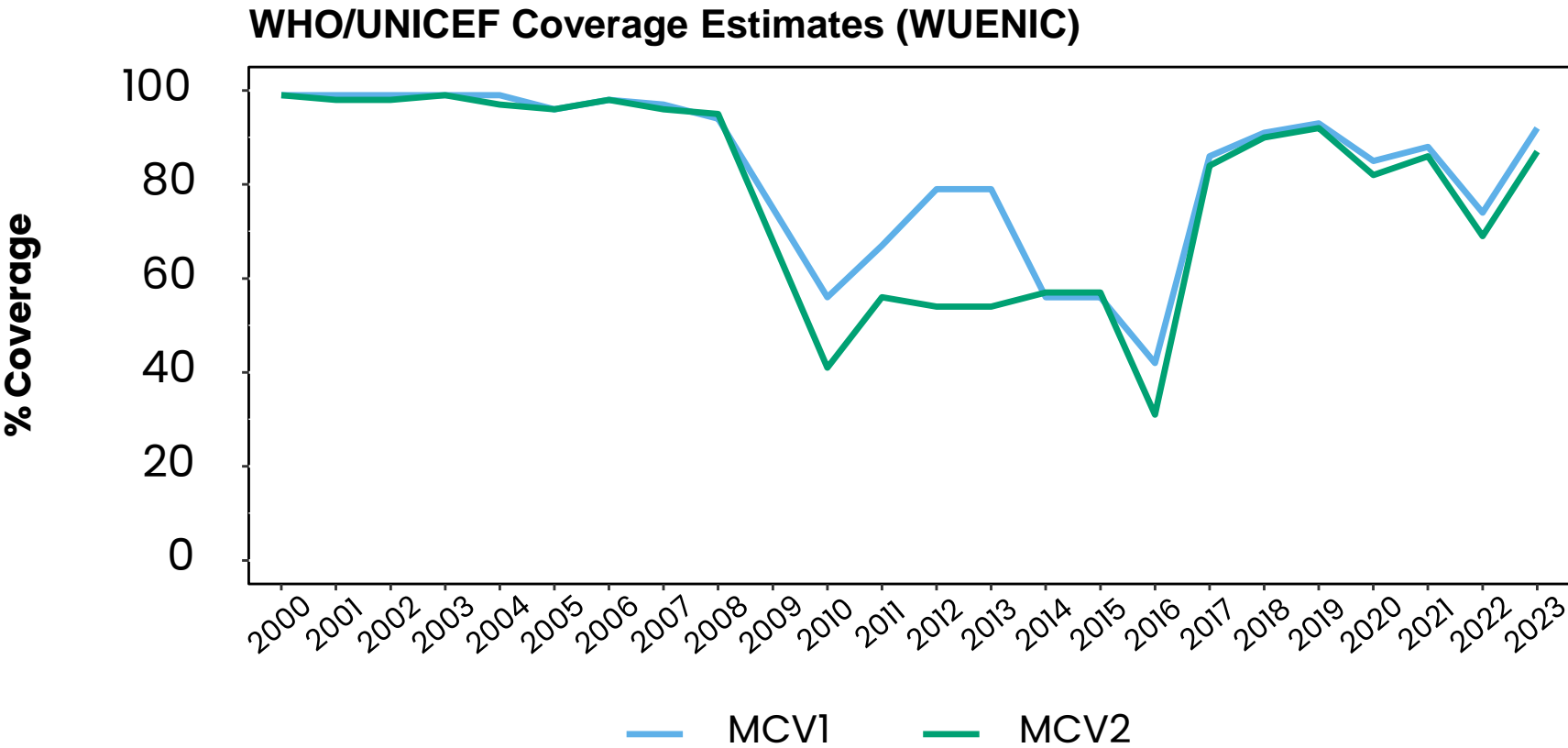
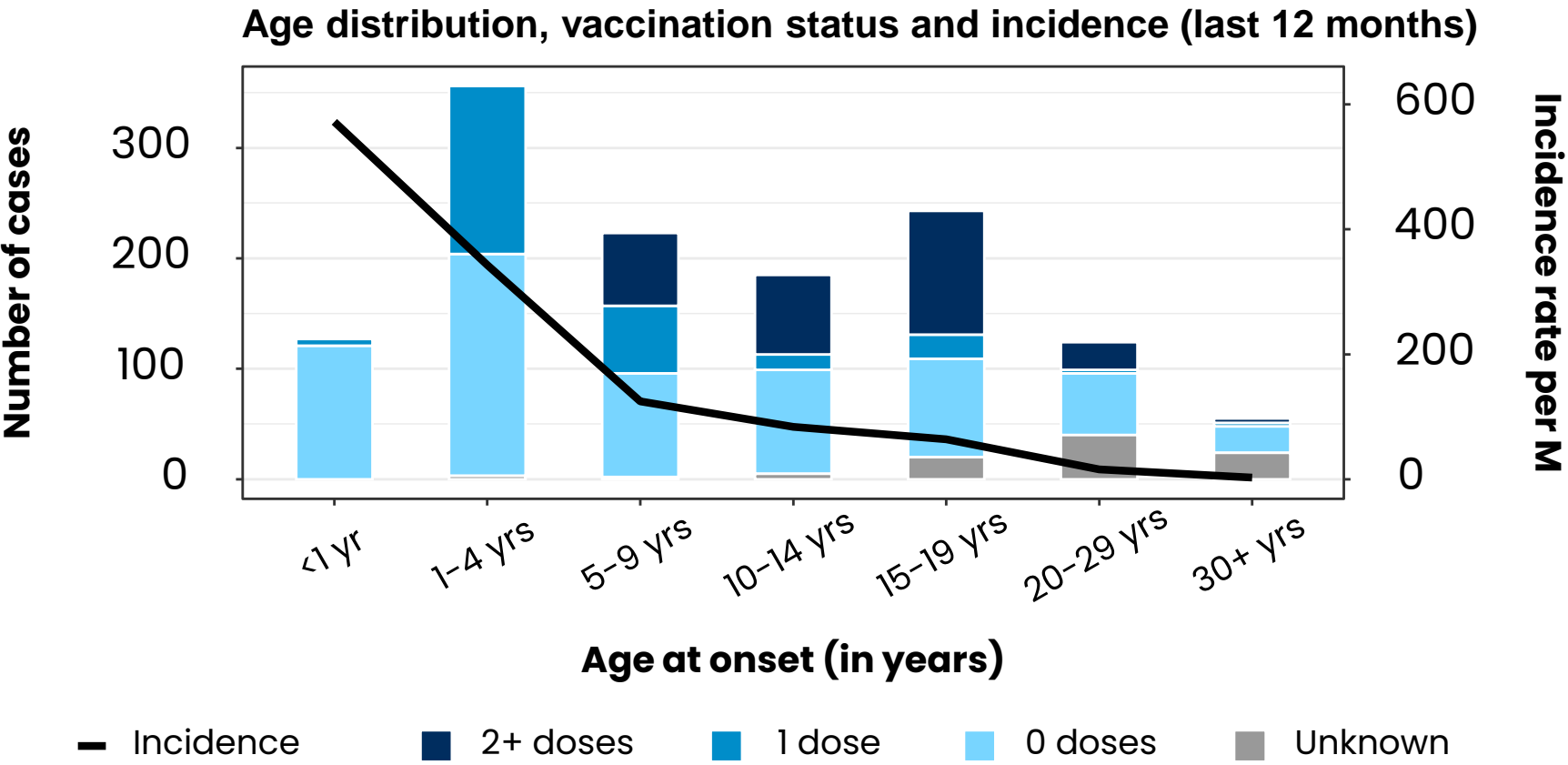
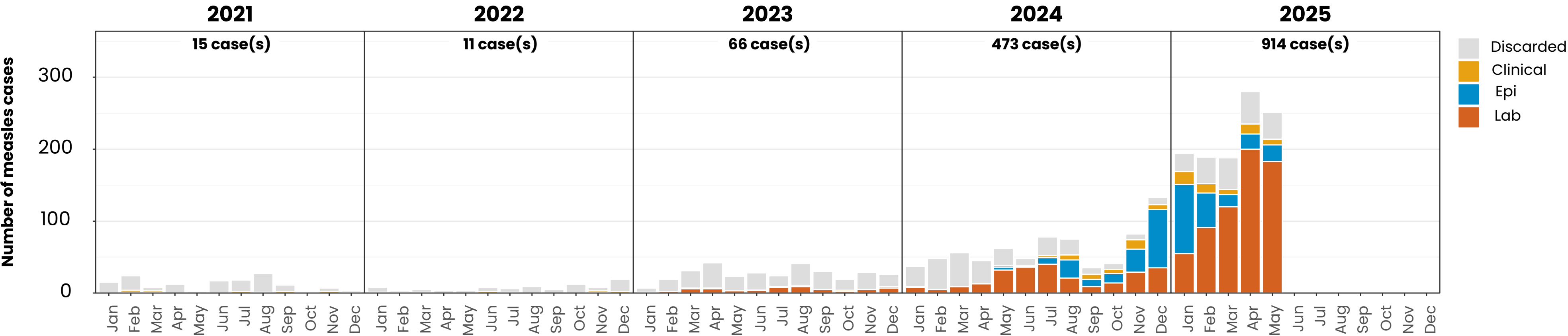
ELIMINATION STATUS: **RE-ESTABLISHED**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

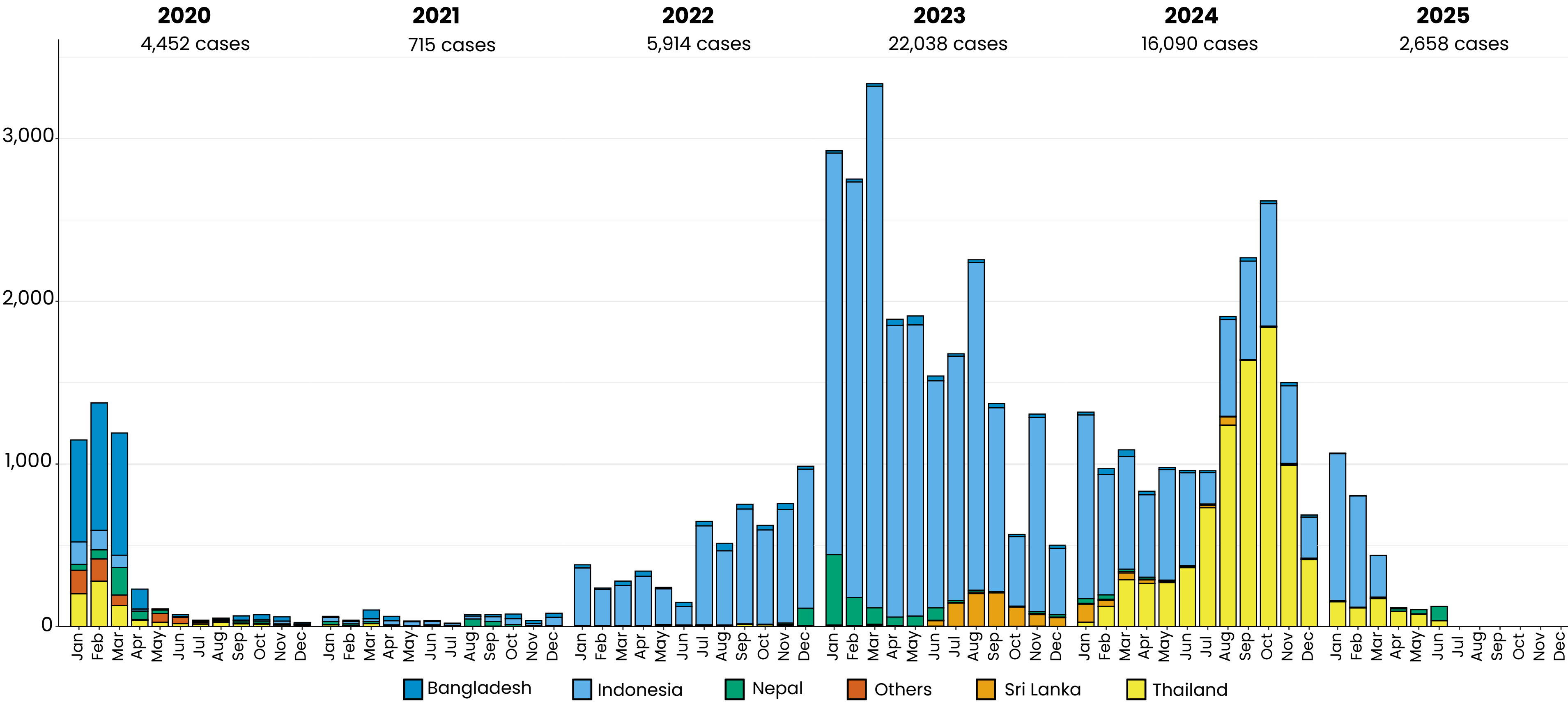
Measles cases: Ukraine

ELIMINATION STATUS: **ENDEMIC**



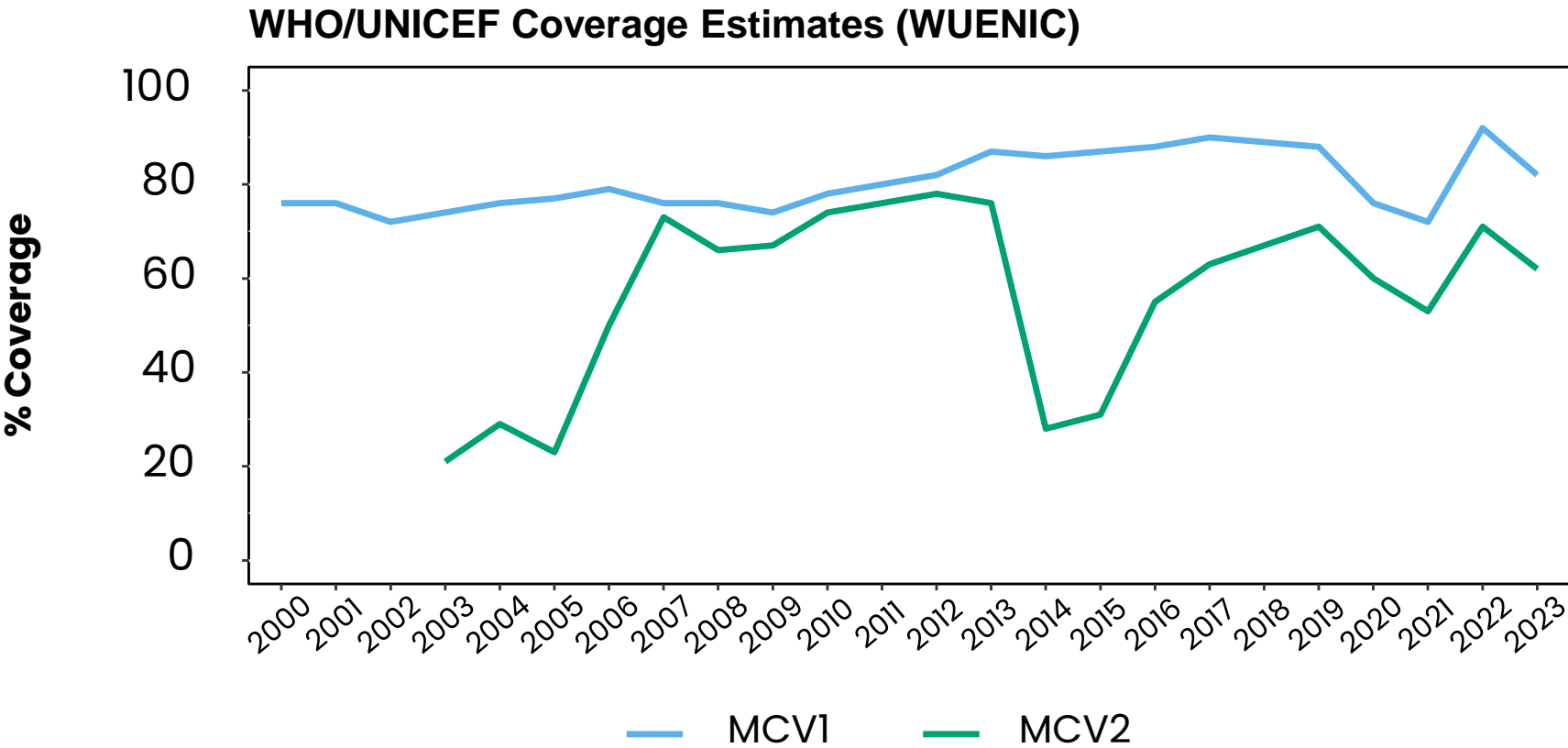
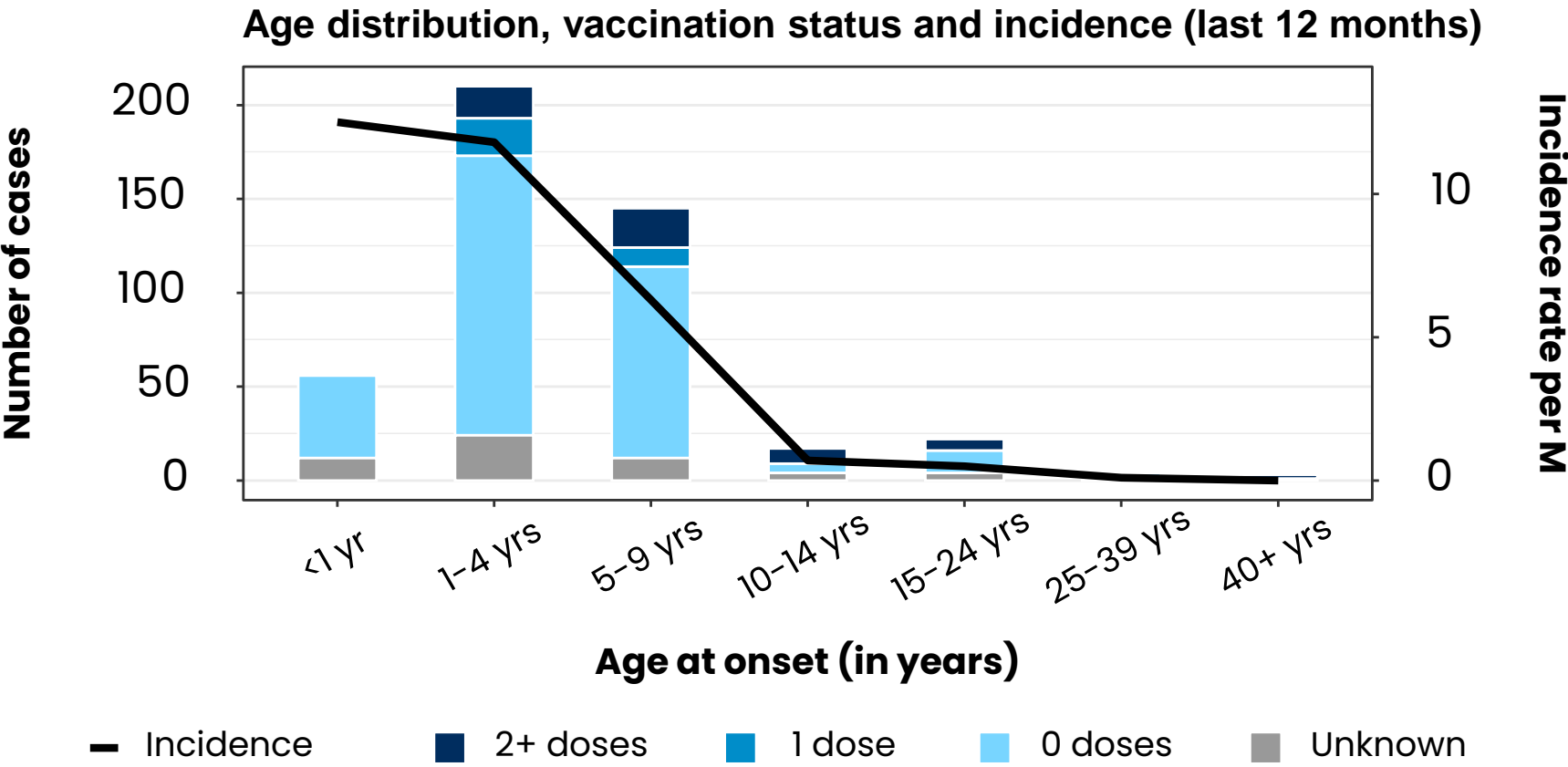
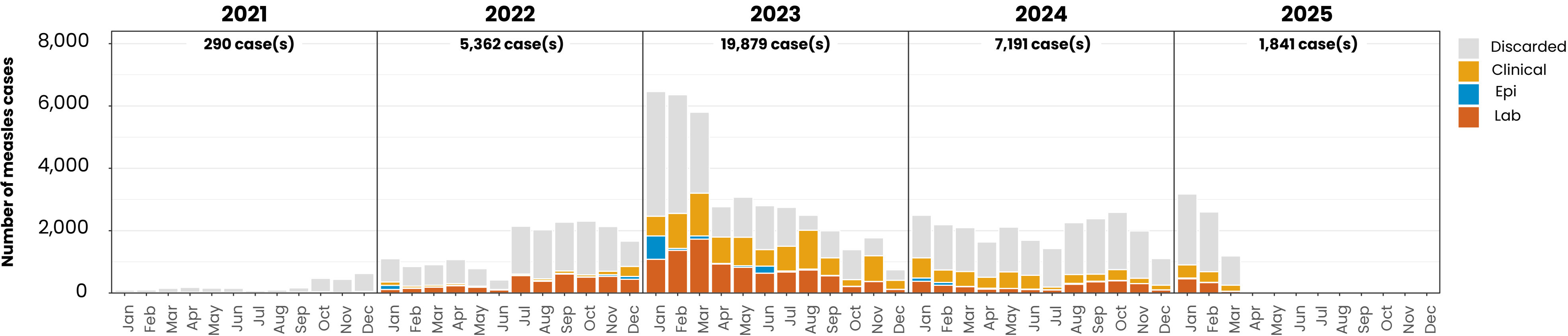
Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles case distribution (SEAR (excl. India)), 2020–2025



# Measles cases: Indonesia

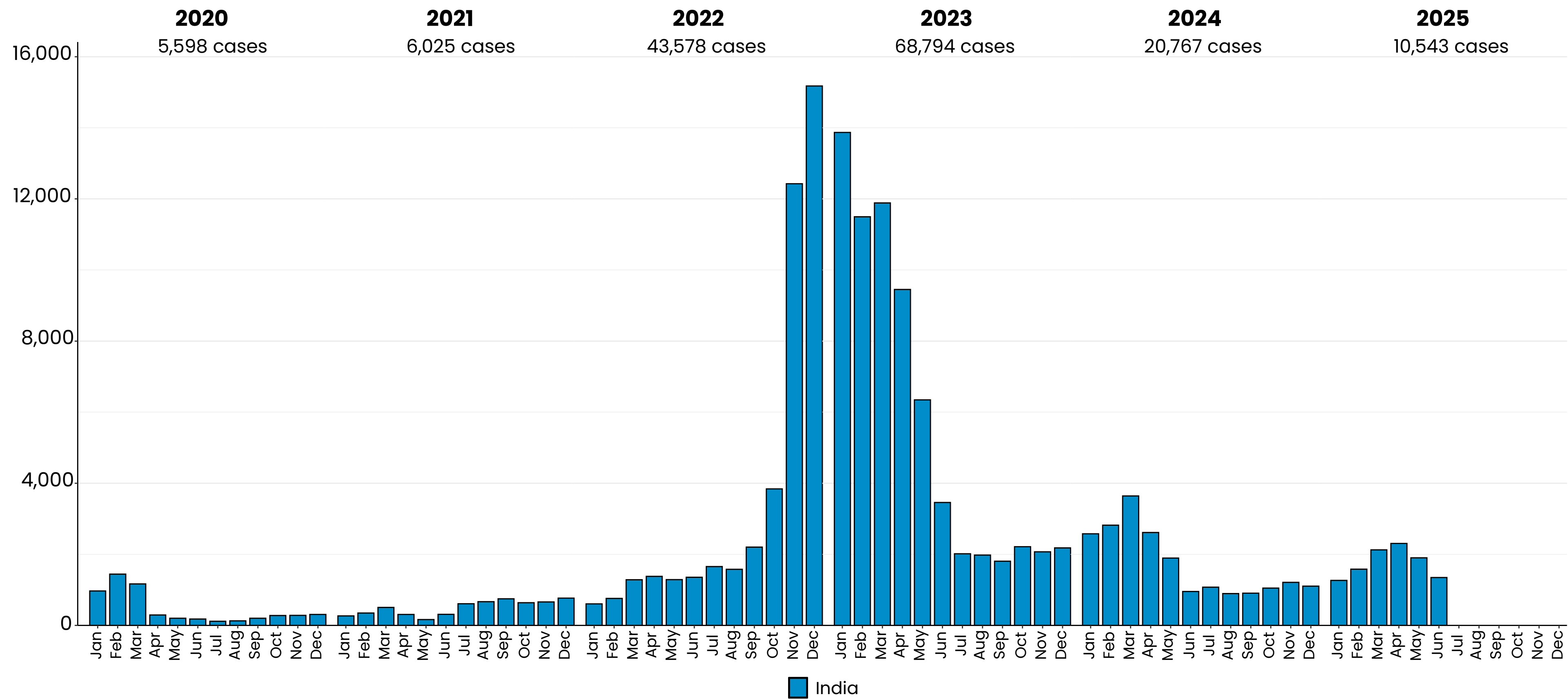
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using aggregate surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

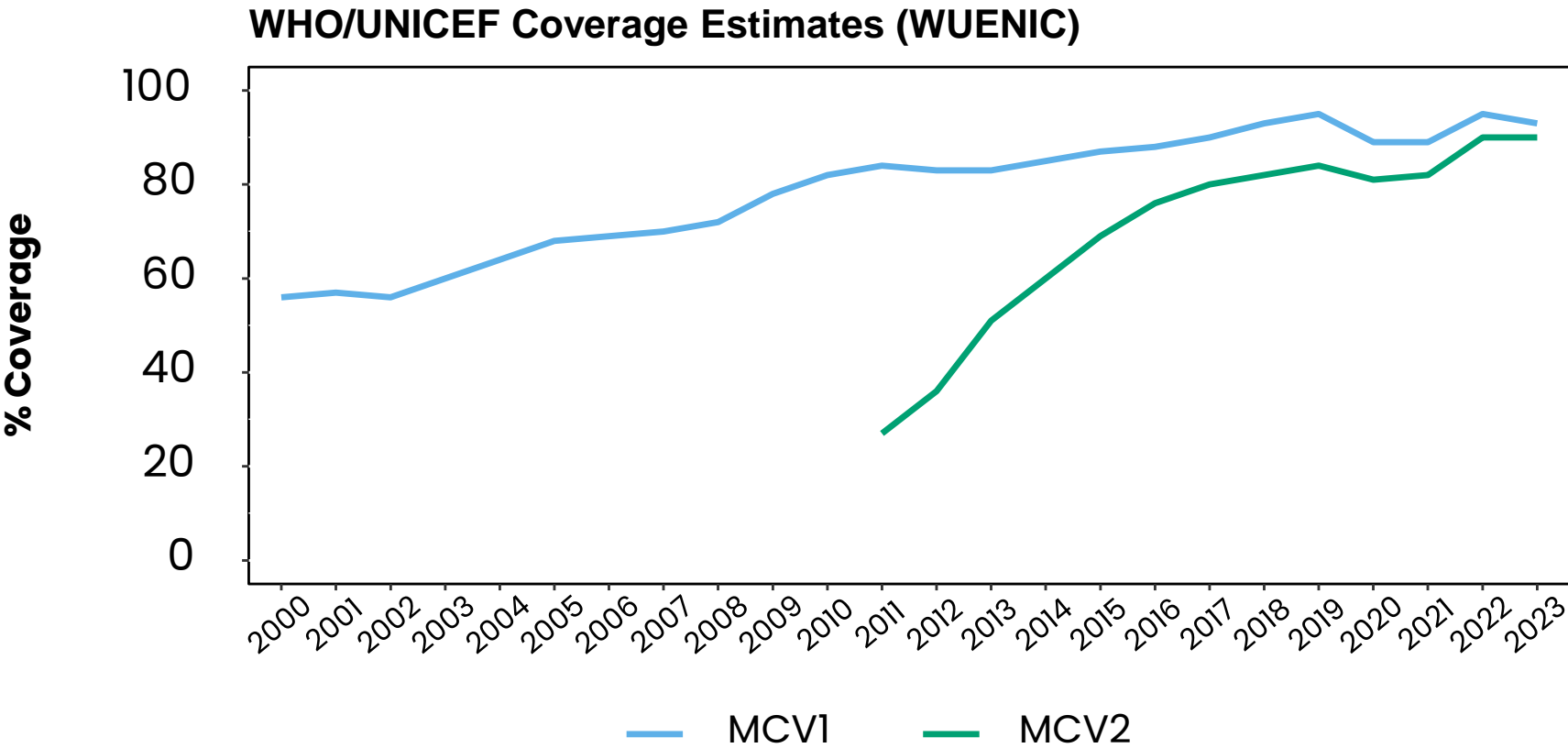
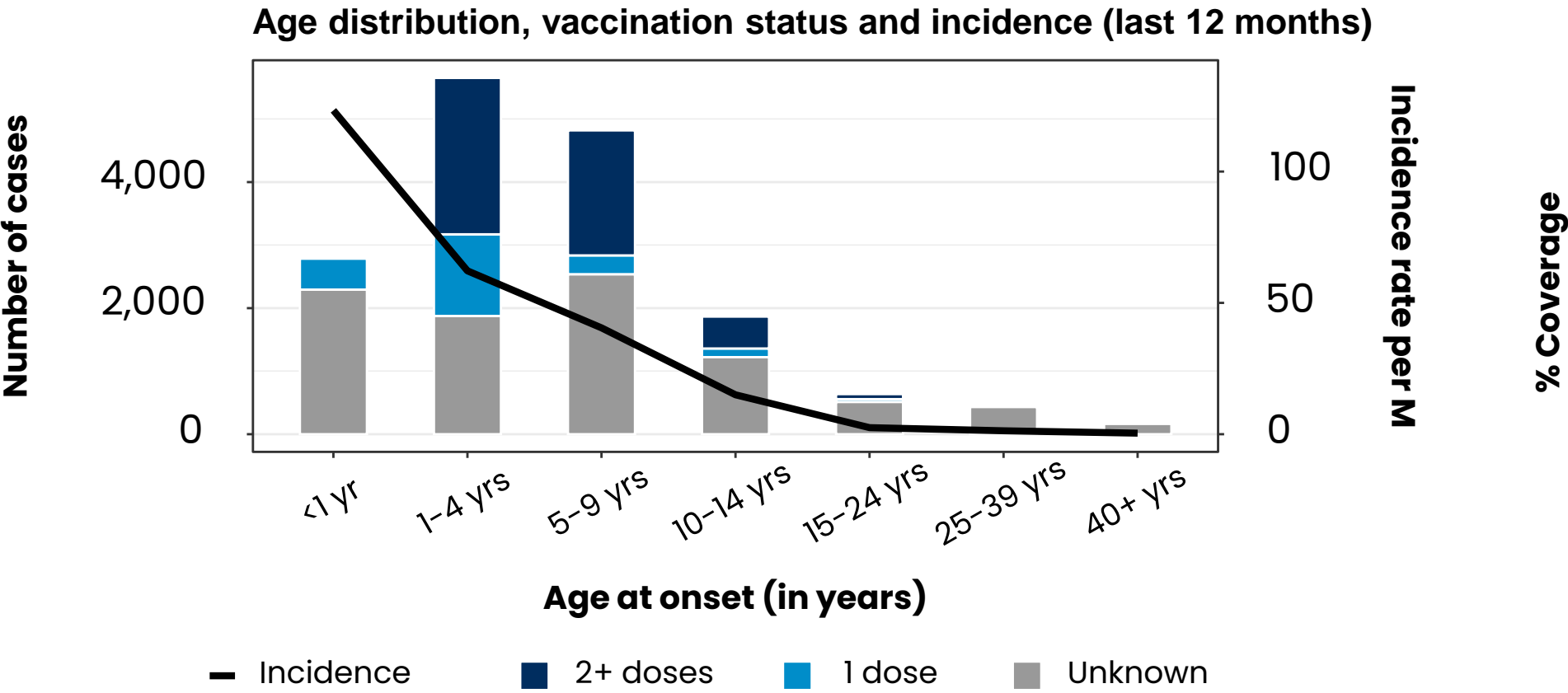
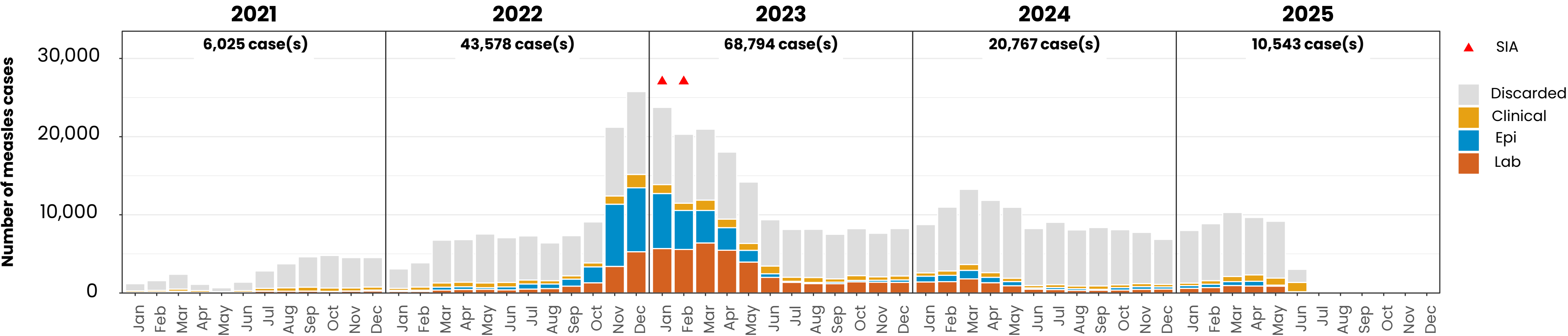


# Measles case distribution (SEAR, India), 2020–2025



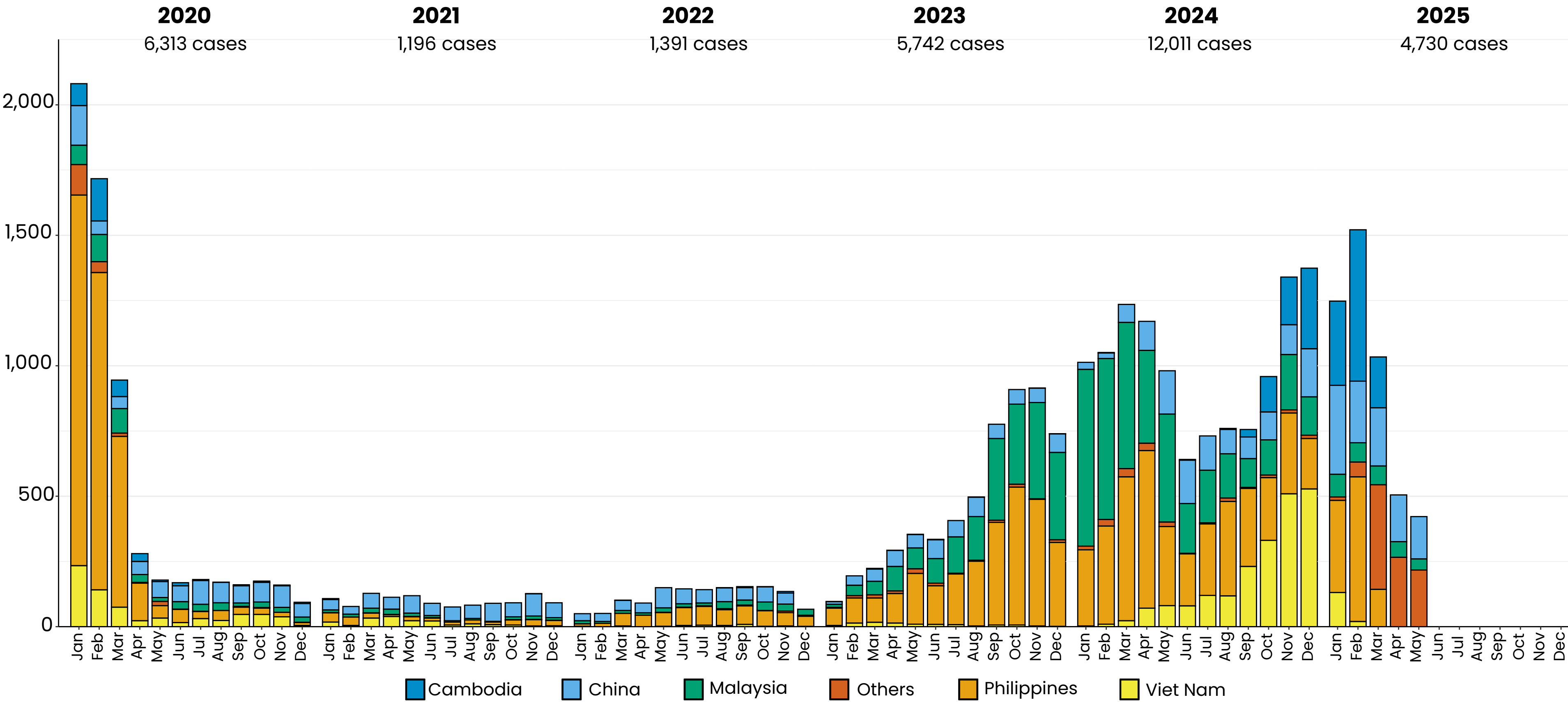
Measles cases: India

ELIMINATION STATUS: **ENDEMIC**



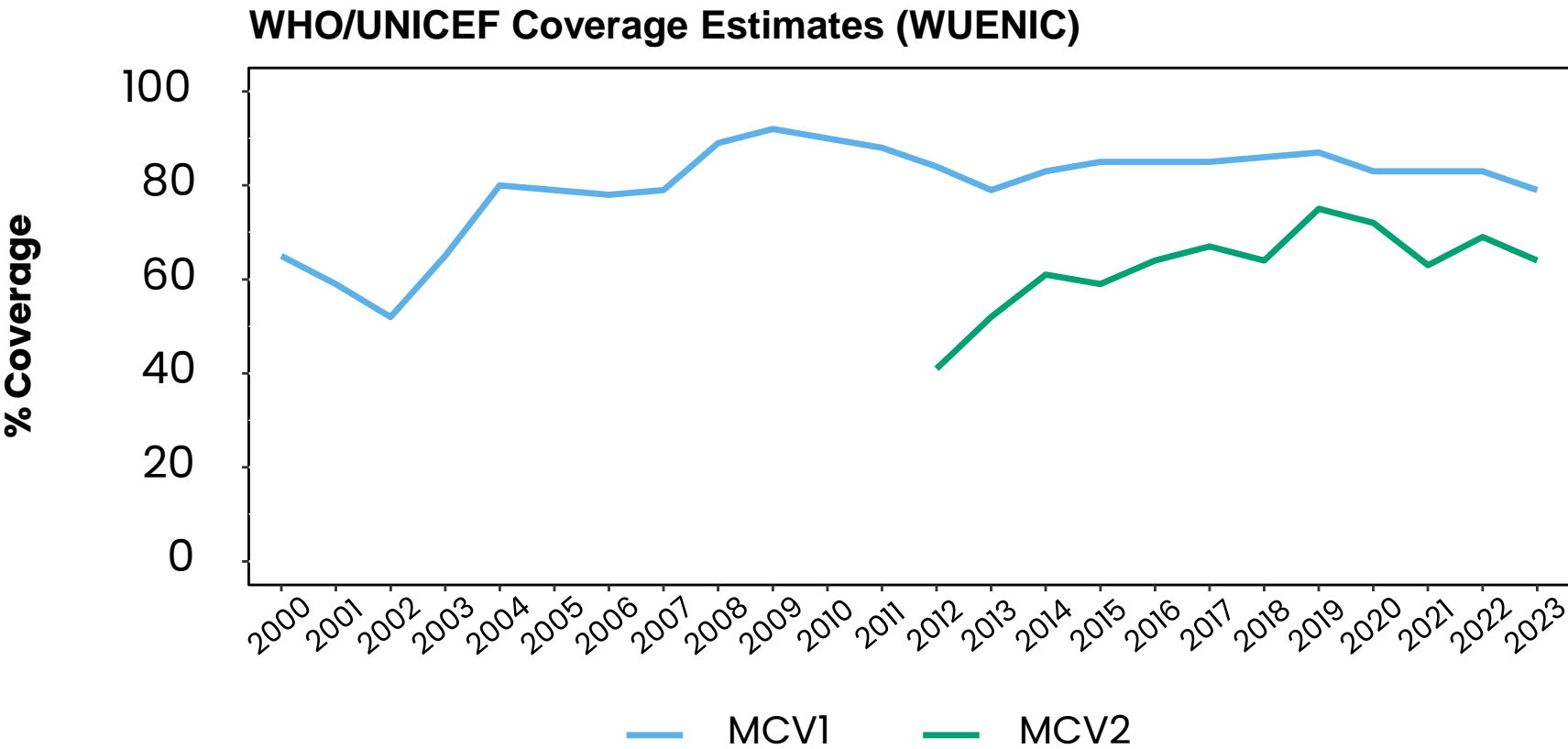
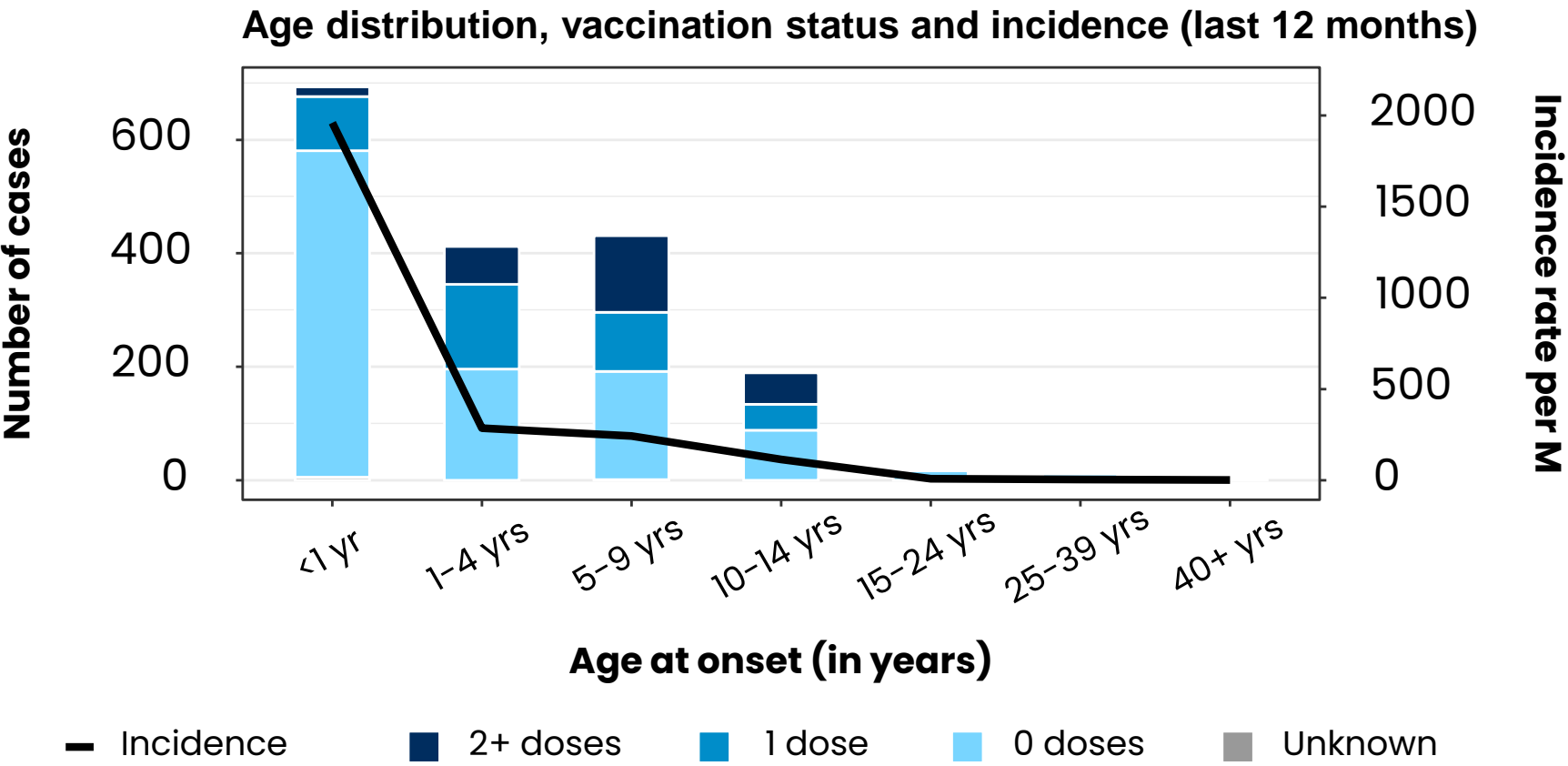
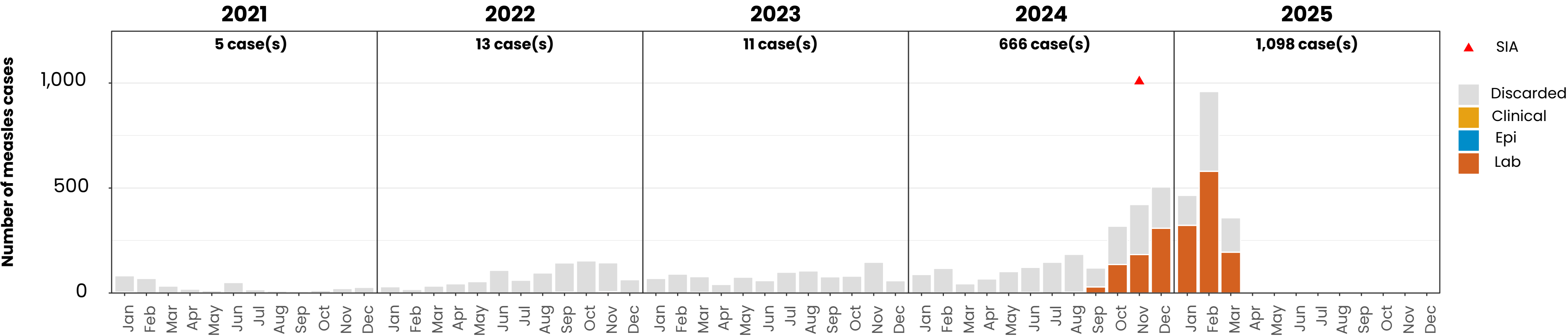
Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles case distribution (WPR), 2020-2025



# Measles cases: Cambodia

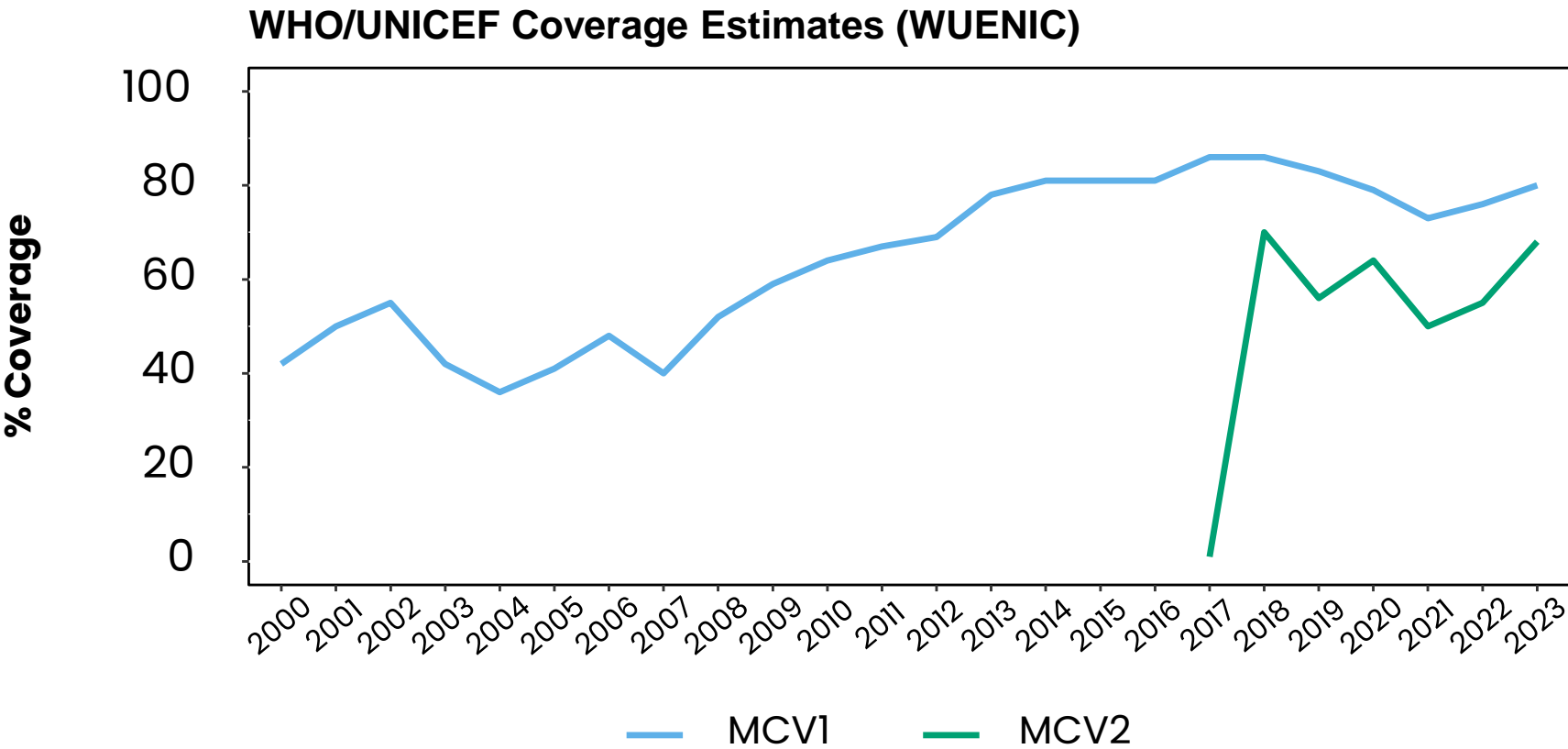
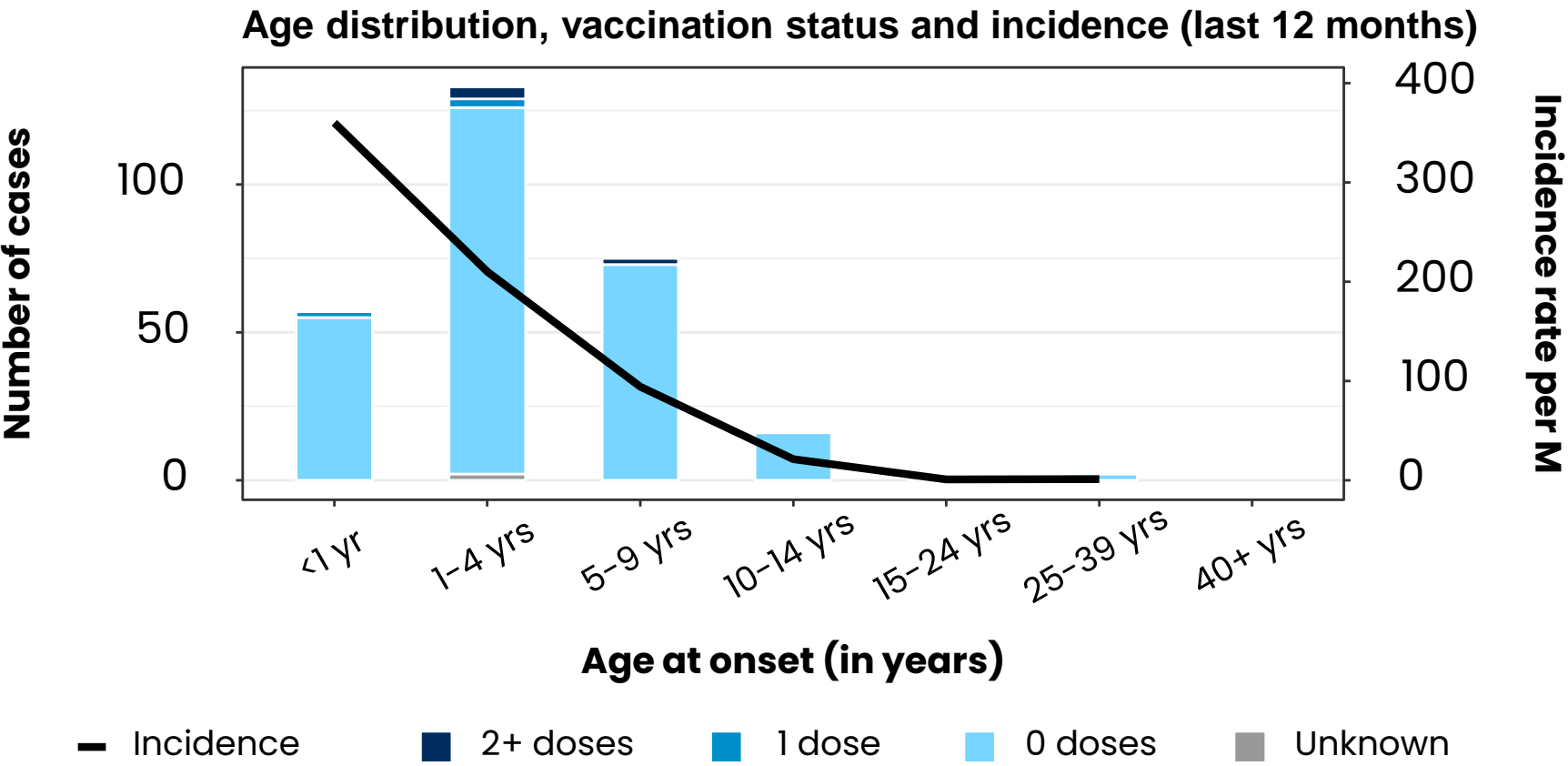
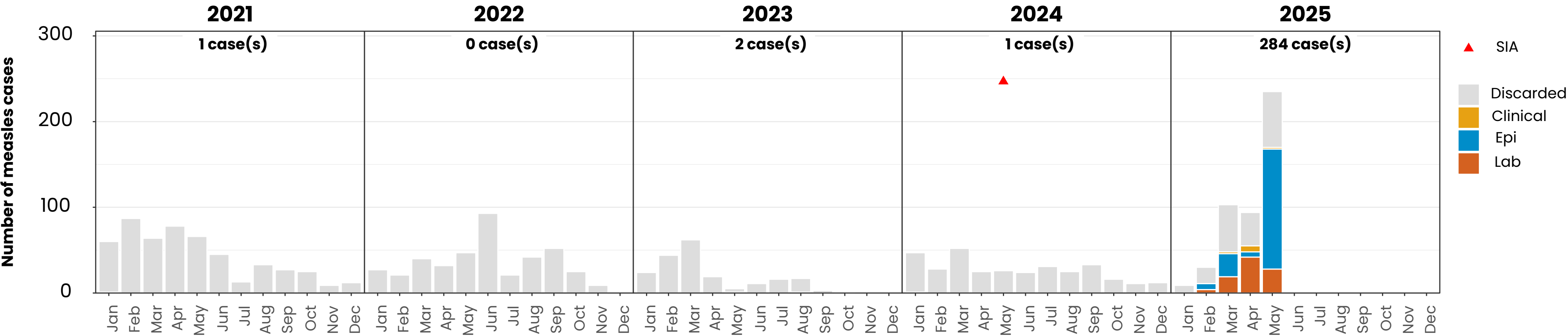
ELIMINATION STATUS: **ELIMINATED**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

# Measles cases: Lao People's Democratic Republic

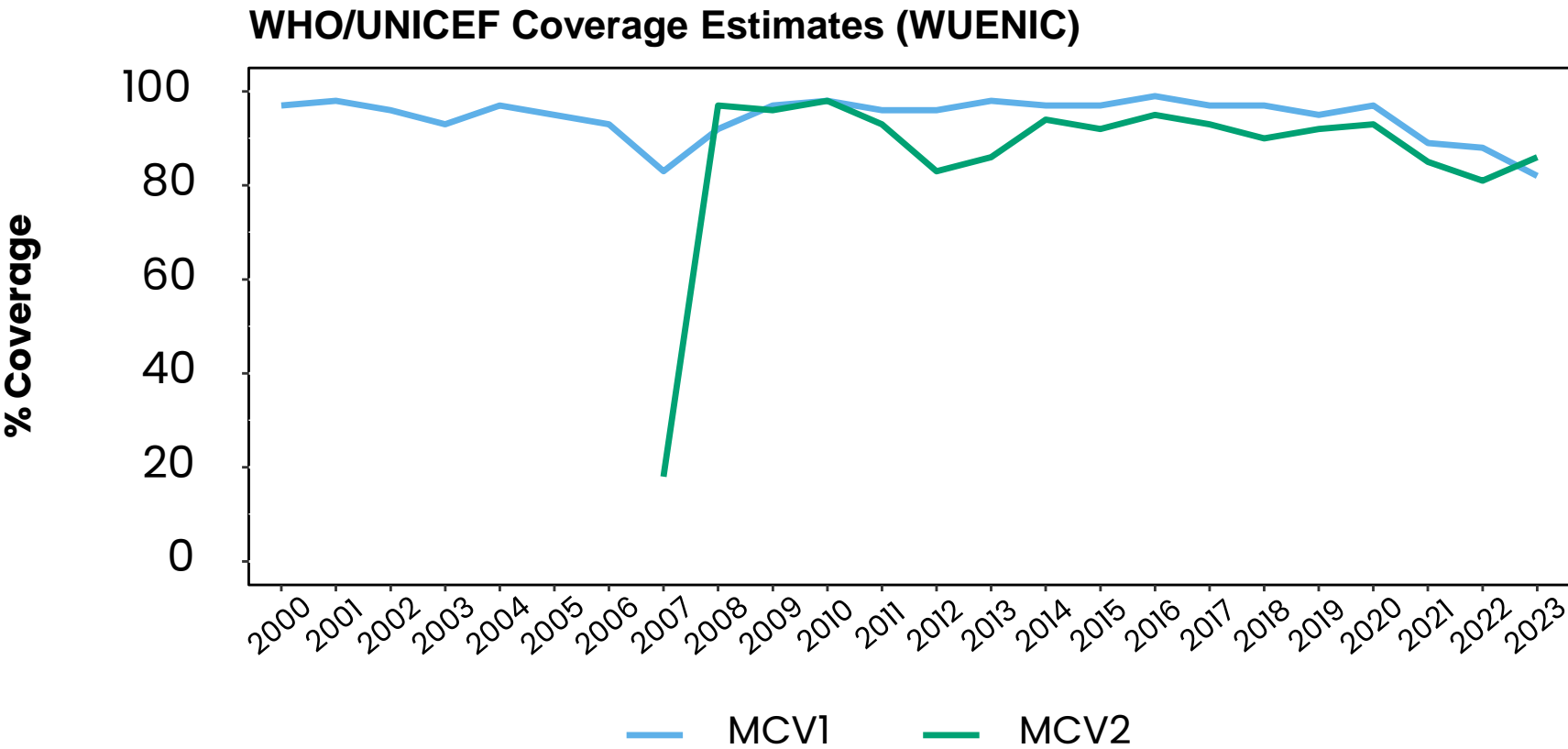
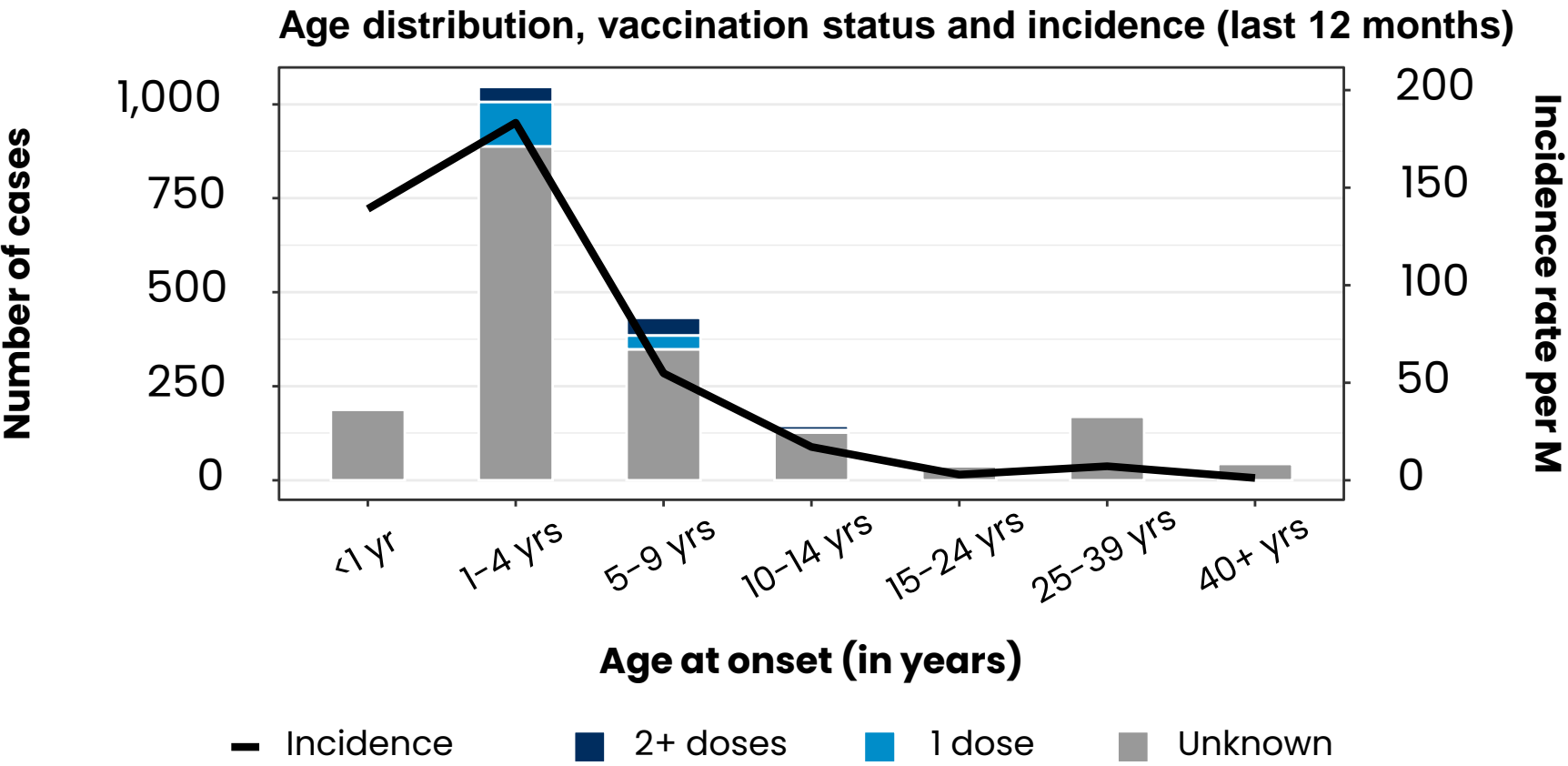
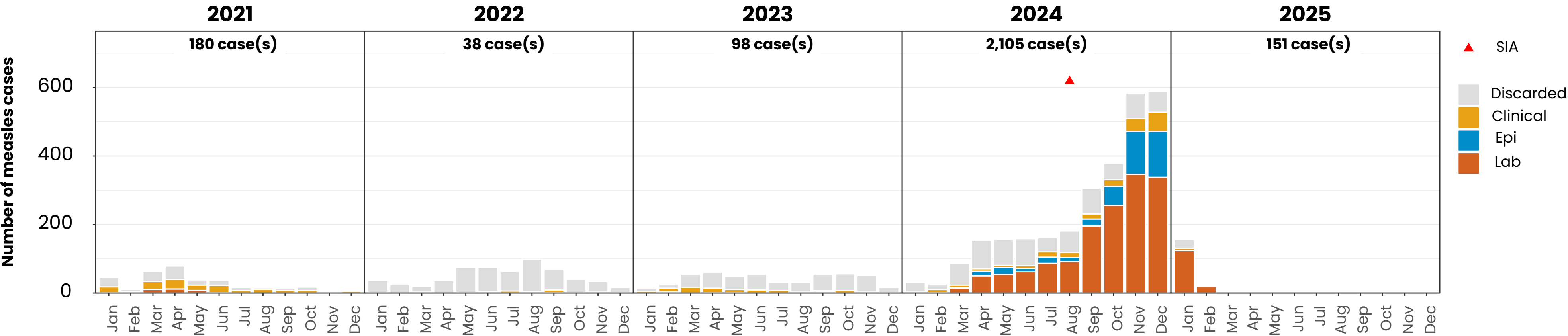
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Viet Nam

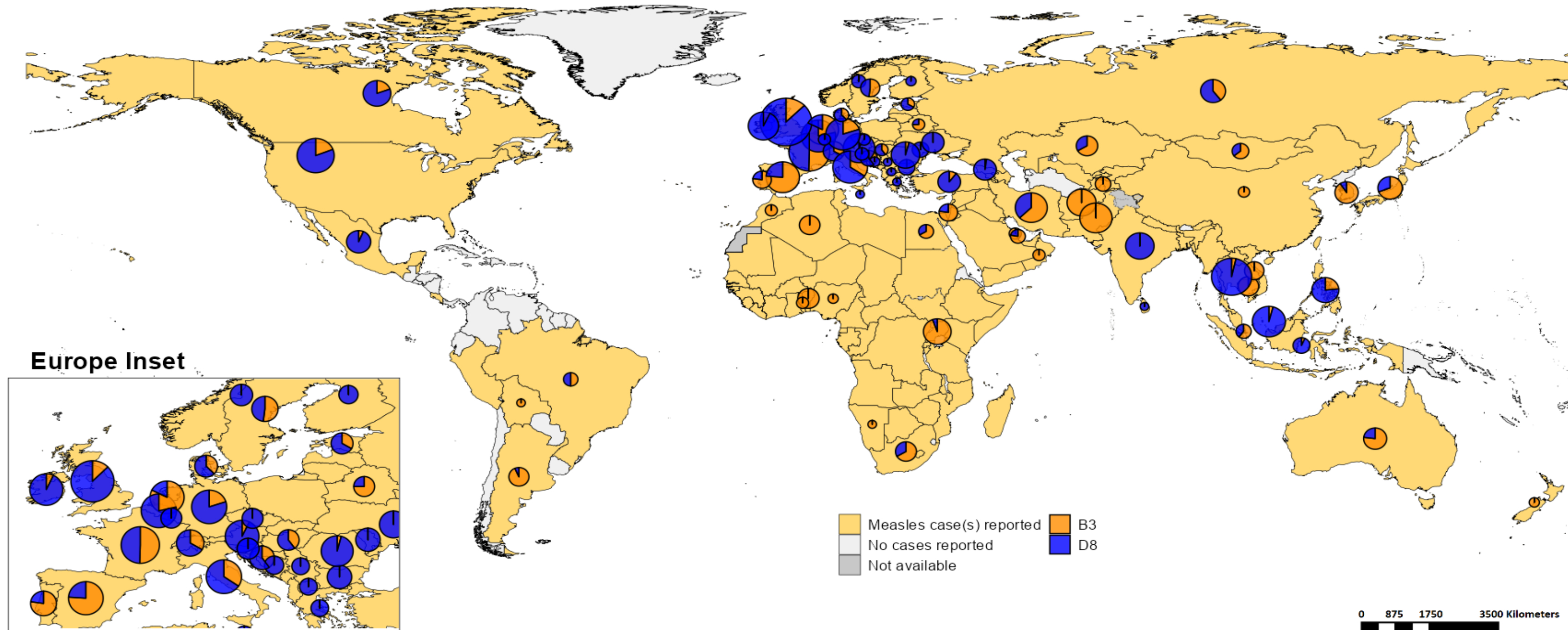
ELIMINATION STATUS: **ENDEMIC**



Based on data received 2025-07 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)



# Distribution of measles genotypes (last 12 months)



Map production: World Health Organization, 2025. All rights reserved  
Data source: IVB Database

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# Rubella



World Health  
Organization



# Number of reported rubella cases by WHO Region

## 2025

Region	Member States*	Rubella cases	Clin	Epi	Lab	Date Received
AFR	41/47	1,685	0	0	1,685	2025-07
AMR	24/35	0	0	0	0	2025-07
EMR	20/21	484	217	3	264	2025-07
EUR	27/53	320	7	7	306	2025-07
SEAR	11/11	1,461	0	26	1,435	2025-07
WPR	13/27	321	89	0	232	2025-07
Total	136/194	4,271	313	36	3,922	

Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	373	385	392	304	159	72	0	0	0	0	0	0
AMR	0	0	0	0	0	0	0	0	0	0	0	0
EMR	120	146	99	73	46	0	0	0	0	0	0	0
EUR	103	78	72	52	12	3	0	0	0	0	0	0
SEAR	320	314	264	261	239	63	0	0	0	0	0	0
WPR	49	68	72	72	60	0	0	0	0	0	0	0
Total	965	991	899	762	516	138	0	0	0	0	0	0

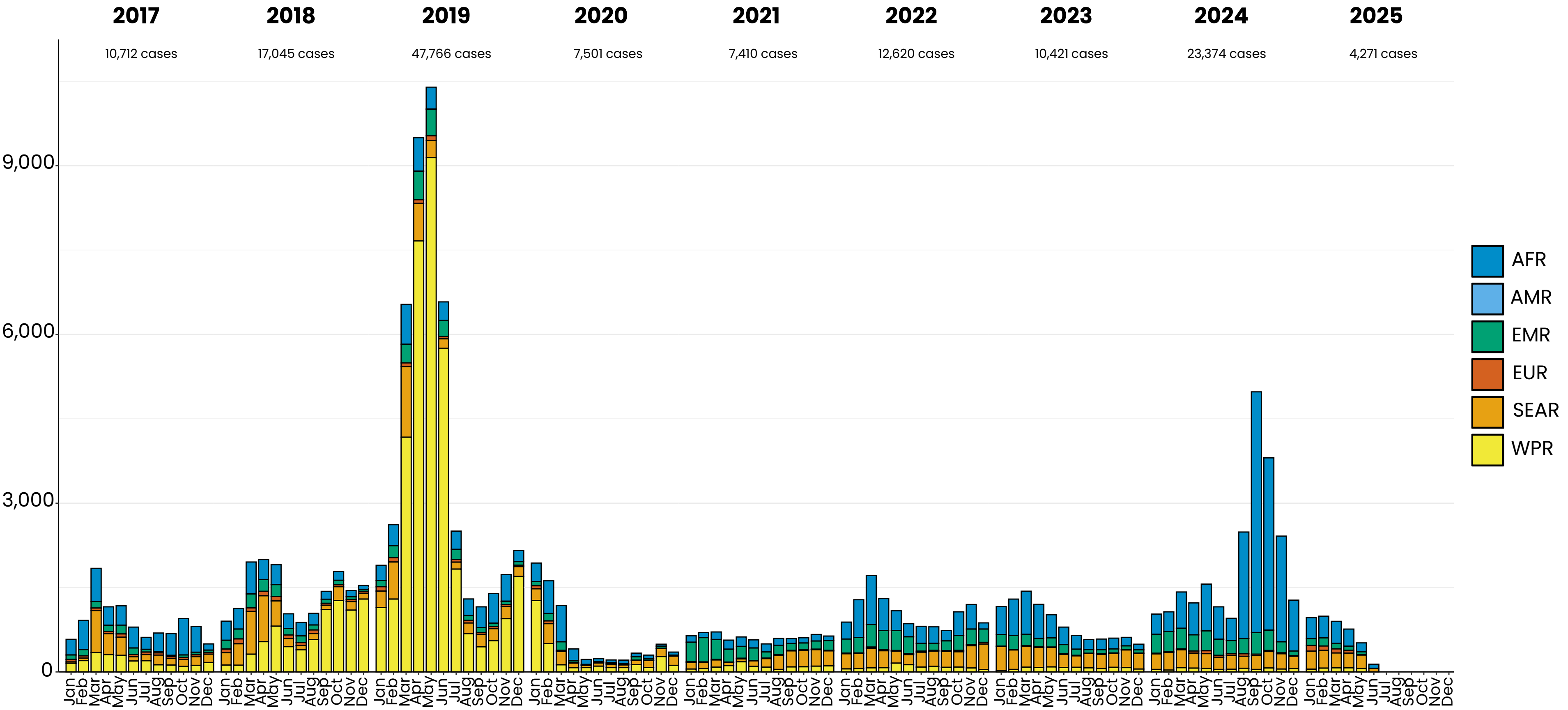
## 2024

Region	Member States*	Rubella cases	Clin	Epi	Lab	Date Received
AFR	43/47	15,738	0	0	15,738	2025-07
AMR	28/35	0	0	0	0	2025-07
EMR	21/21	3,521	2,516	188	817	2025-07
EUR	32/53	320	29	2	289	2025-07
SEAR	11/11	3,134	0	106	3,028	2025-07
WPR	16/27	661	81	0	580	2025-07
Total	151/194	23,374	2,626	296	20,452	

Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	357	345	645	567	832	574	396	1,897	4,278	3,063	1,880	904
AMR	0	0	0	0	0	0	0	0	0	0	0	0
EMR	339	363	367	288	353	287	235	268	385	361	196	79
EUR	12	17	16	38	51	34	32	44	26	19	16	15
SEAR	276	310	317	265	262	217	244	214	245	292	272	220
WPR	44	33	75	68	63	44	47	64	45	70	50	58
Total	1,028	1,068	1,420	1,226	1,561	1,156	954	2,487	4,979	3,805	2,414	1,276

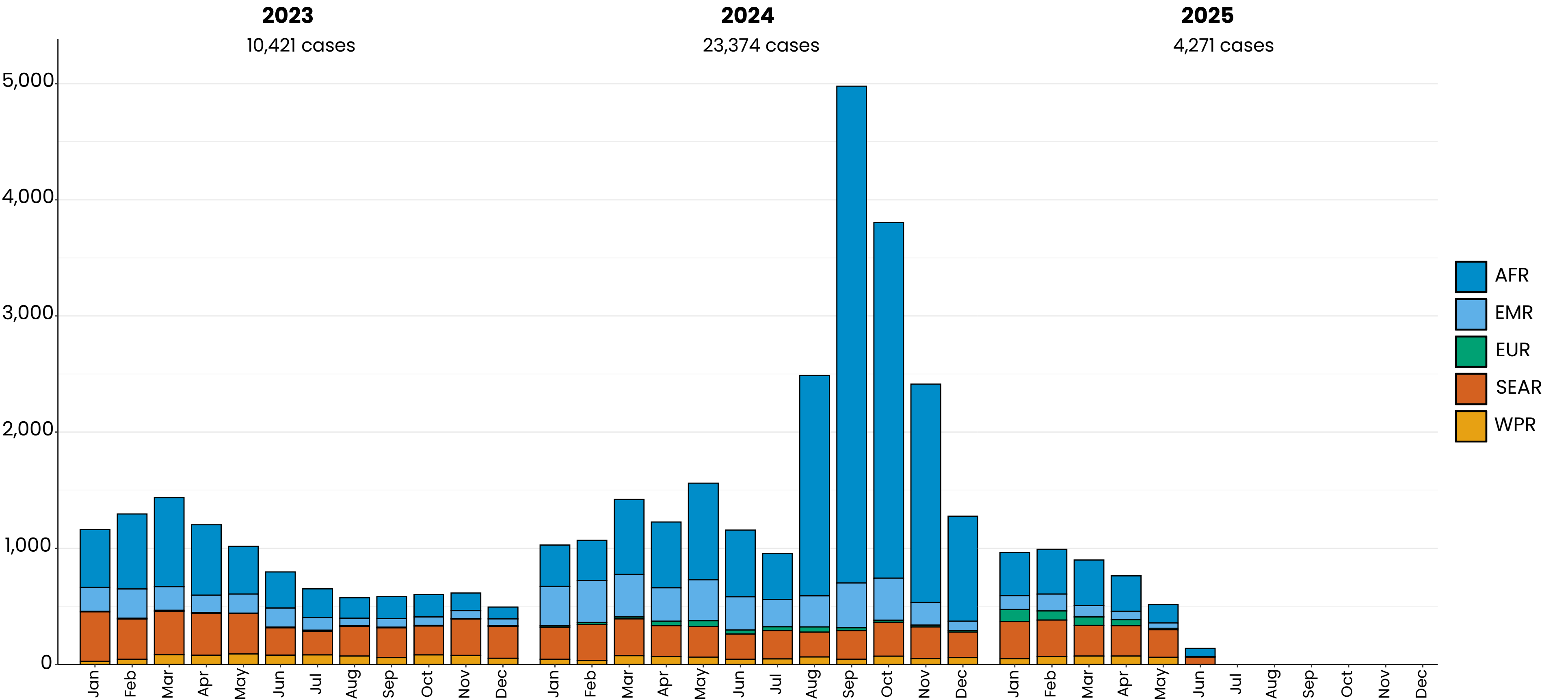
Notes: Based on data received 2025-07 - This is surveillance data, hence for the last month, the data may be incomplete. \* Member States Reporting / Total Member States in Region

# Rubella case distribution by month and WHO Region (2017–2025)



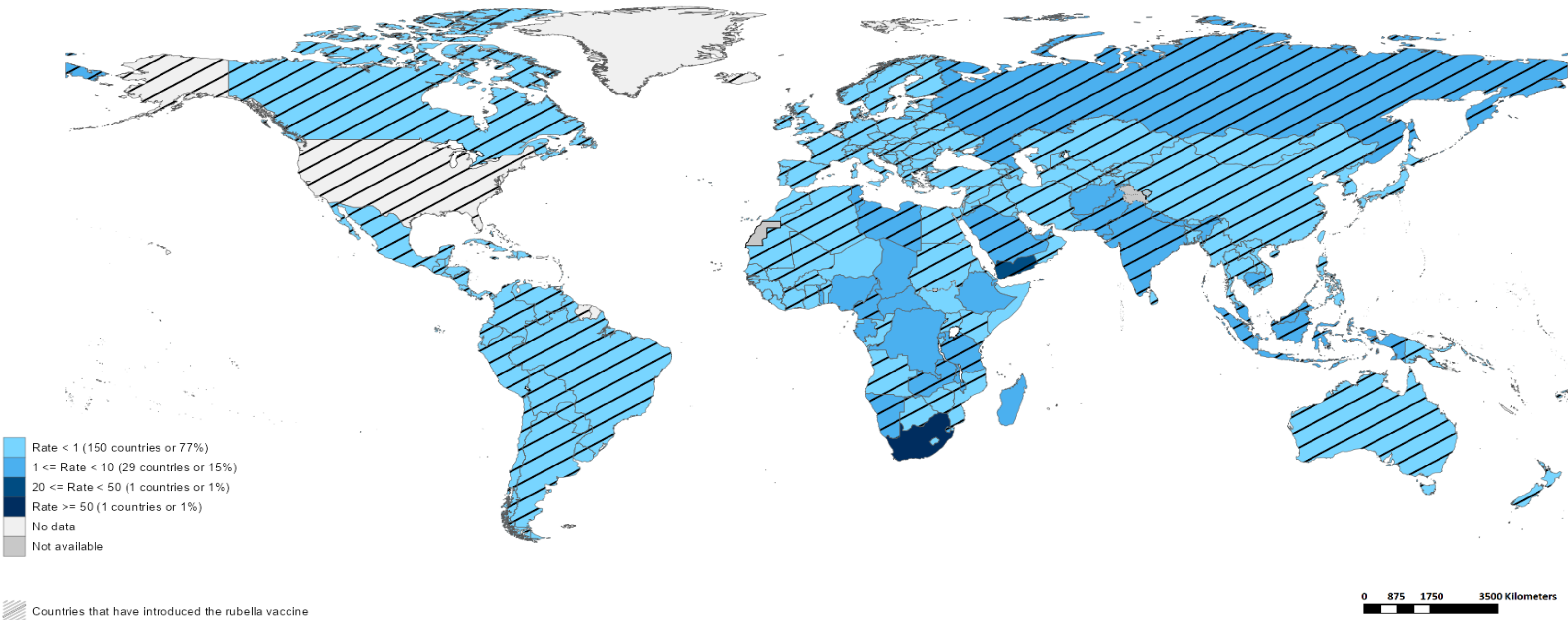
Based on data received 2025-07 - Data Source: IVB Database - This is surveillance data, hence for the last month(s), the data may be incomplete.

# Rubella case distribution by month and WHO Region (2023–2025)



Based on data received 2025-07 - Data Source: IVB Database - This is surveillance data, hence for the last month(s), the data may be incomplete.

# Rubella Incidence Rate per Million (12M period)



## Highest incidence rates

Country	Cases	Rate
South Africa	12454	194.57
Yemen	1675	41.27
Chad	149	7.34
Gabon	16	6.30
Central African Republic	23	4.31
Libya	25	3.39
United Republic of Tanzania	232	3.38
DR Congo	344	3.15
Russian Federation	451	3.11
Madagascar	98	3.07



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Data source: IVB Database

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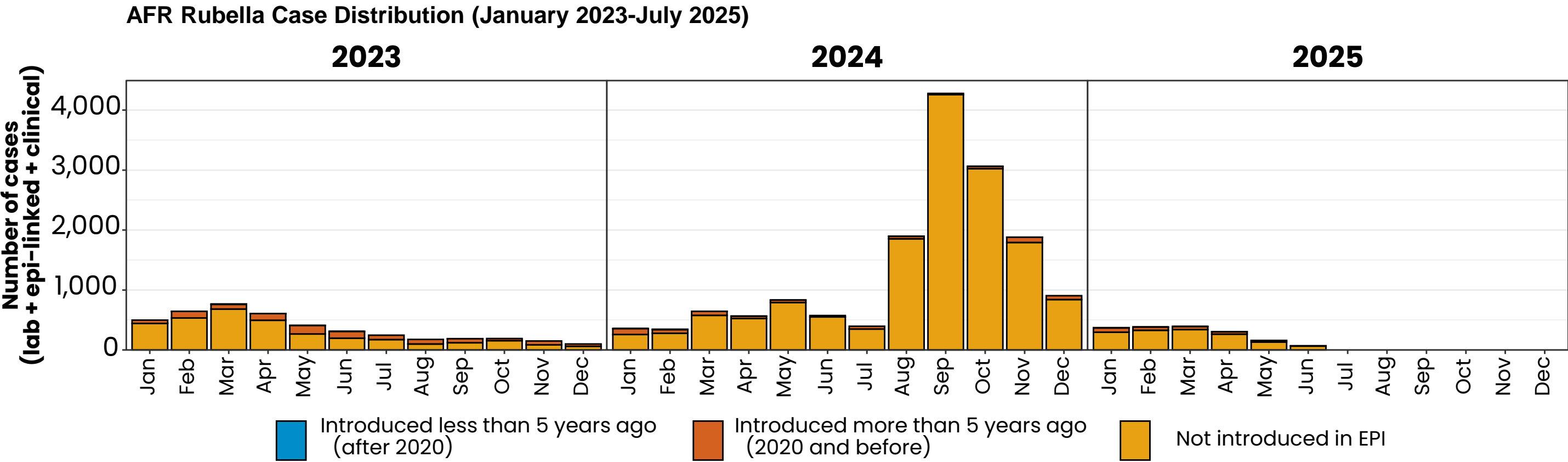
# Disclaimer

This document contains data provided to WHO by member states. Note that some member states only provide aggregate data to WHO, and for these, we are unable to generate a country profile. Some member states report all cases at one time point for the entire year, and thus epidemiologic curves generated are not accurate and a reporting artifact. For some countries, cases are reported by age category, not by exact age in months and/or years. Thus, age distribution/incidence is approximate. Cases classified as pending by countries are classified at WHO as clinically compatible at this time, and thus numbers might differ between data shown here and provided by the member state or WHO country/regional offices.

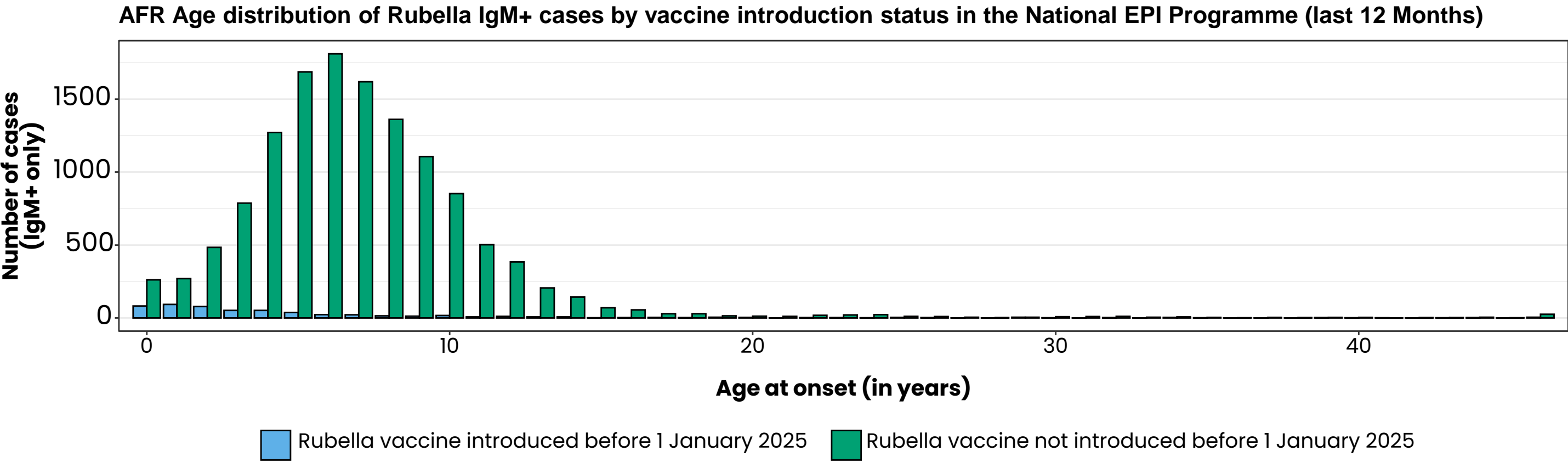
\*UN population data is used as the denominator for calculating incidence.

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# Rubella cases (AFR)

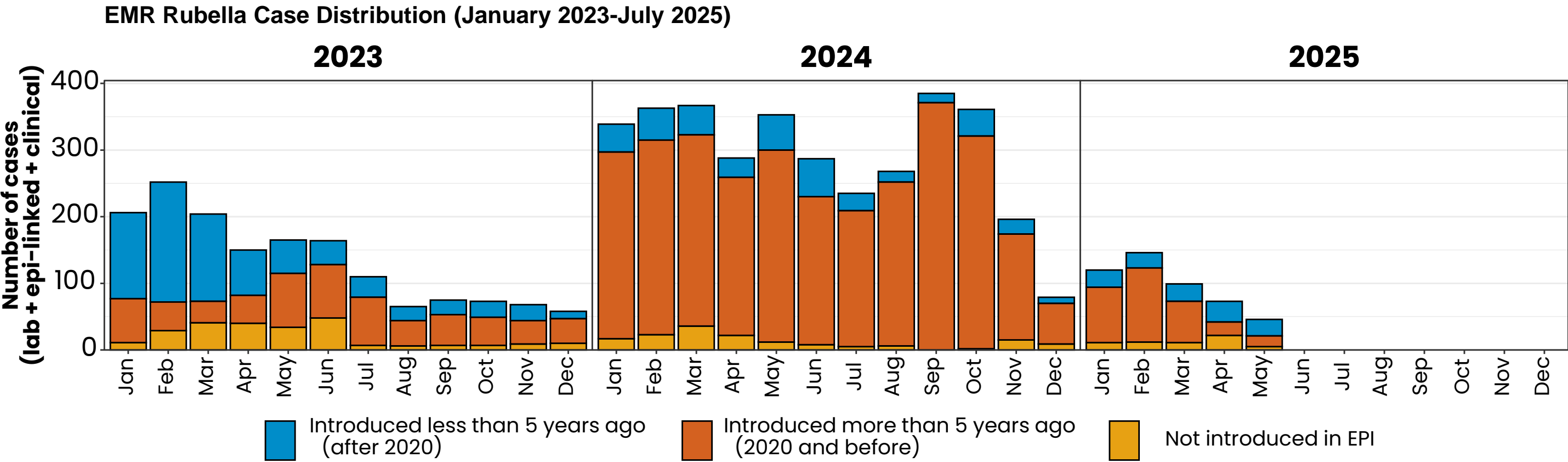


Top 10 countries (last 12 M)			
Country	RCV in RI	Cases	% of Total
South Africa	No	12047	85
Nigeria	No	537	4
DR Congo	No	341	2
Ethiopia	No	326	2
Others	-	266	2
United Republic of Tanzania	2014	221	2
Chad	No	144	1
Madagascar	No	93	1
Malawi	2017	50	0
Uganda	2019	48	0
Cameroon	2015	30	0

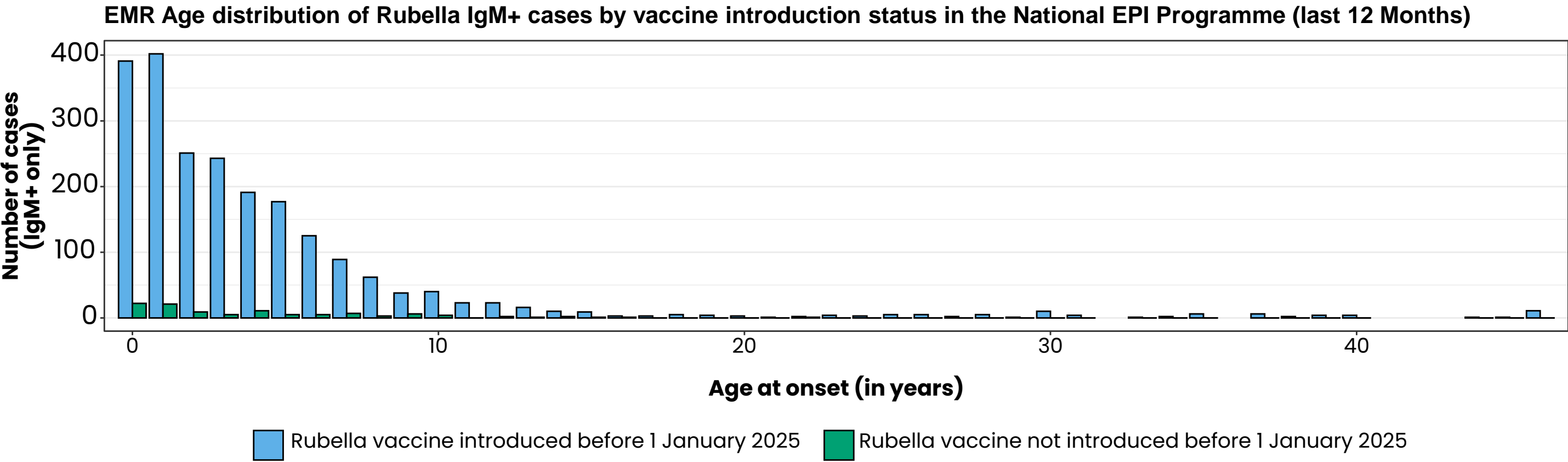




# Rubella cases (EMR)

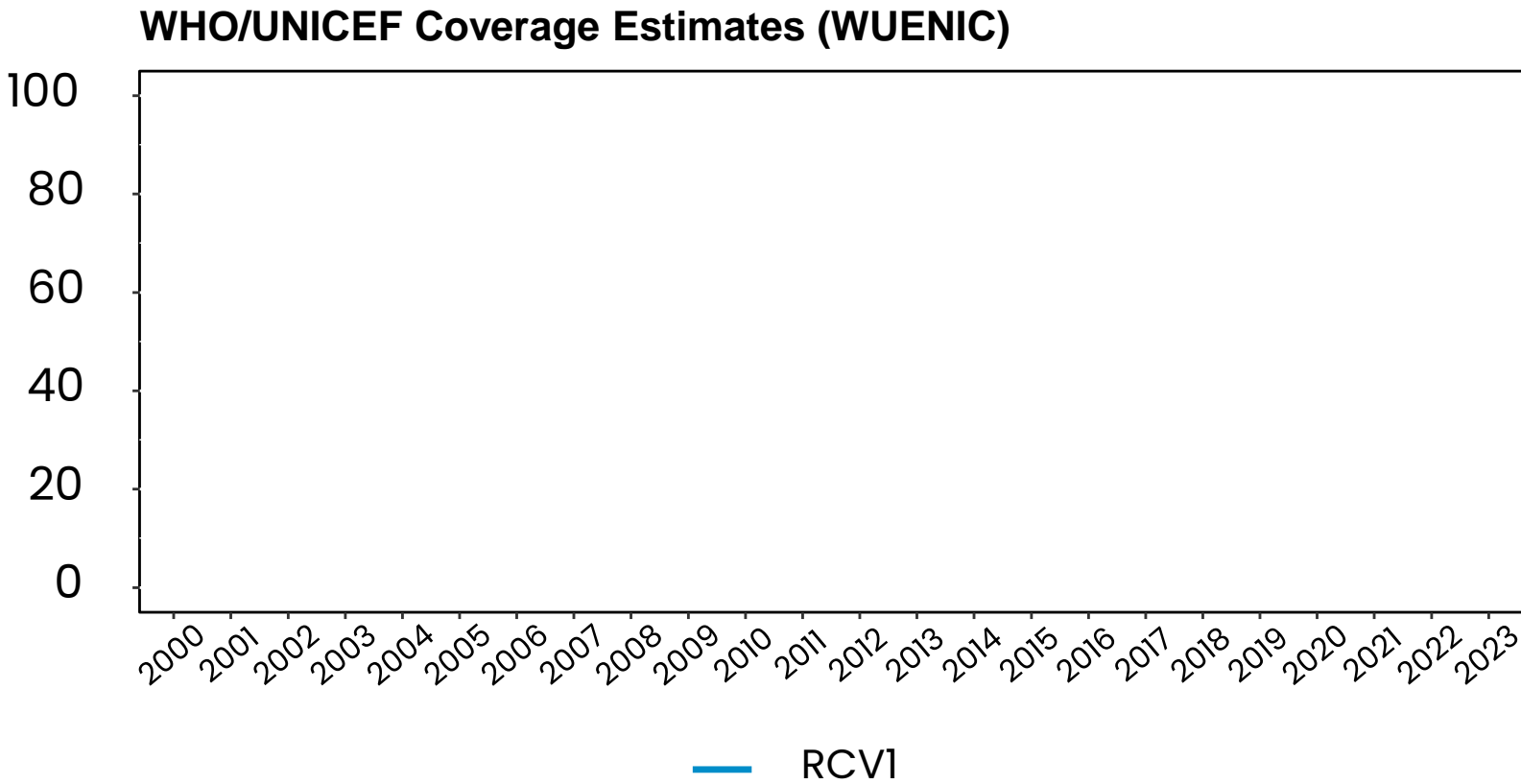
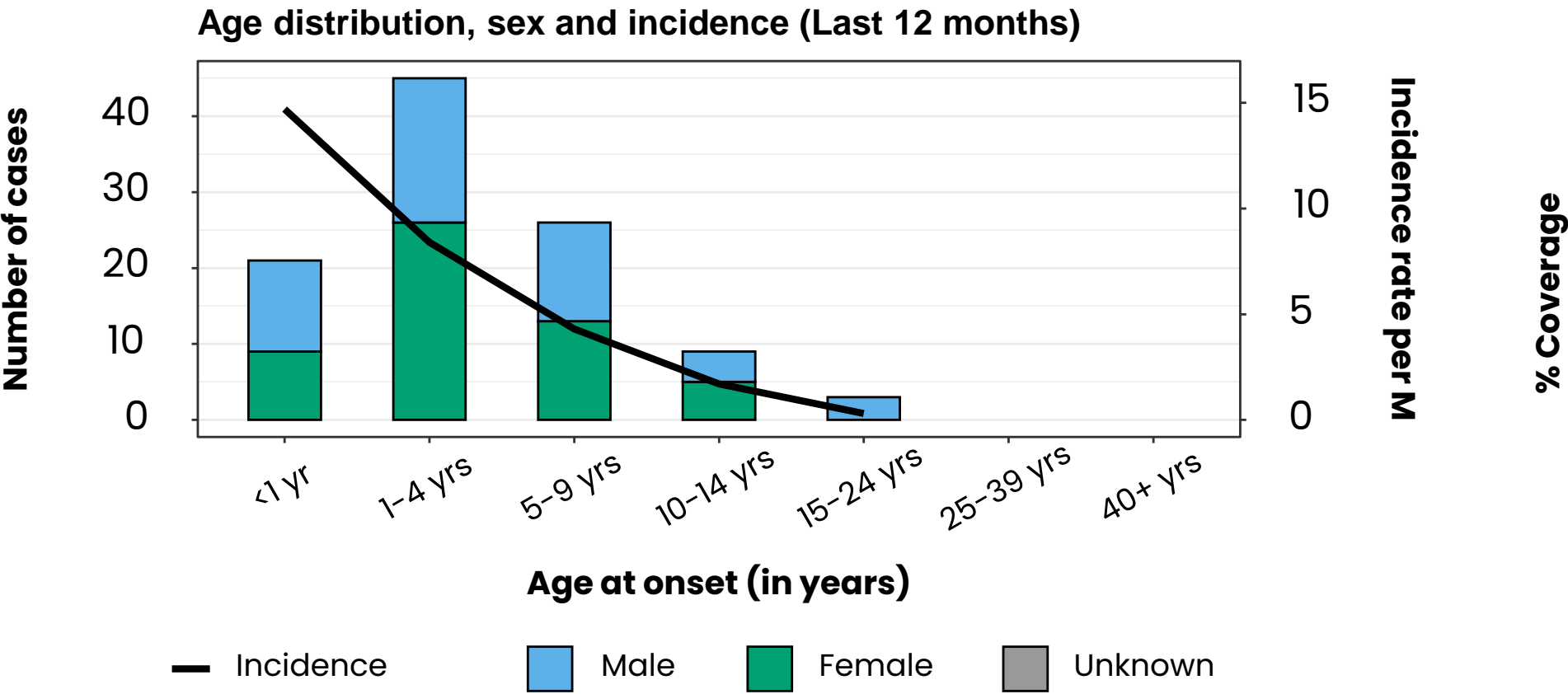
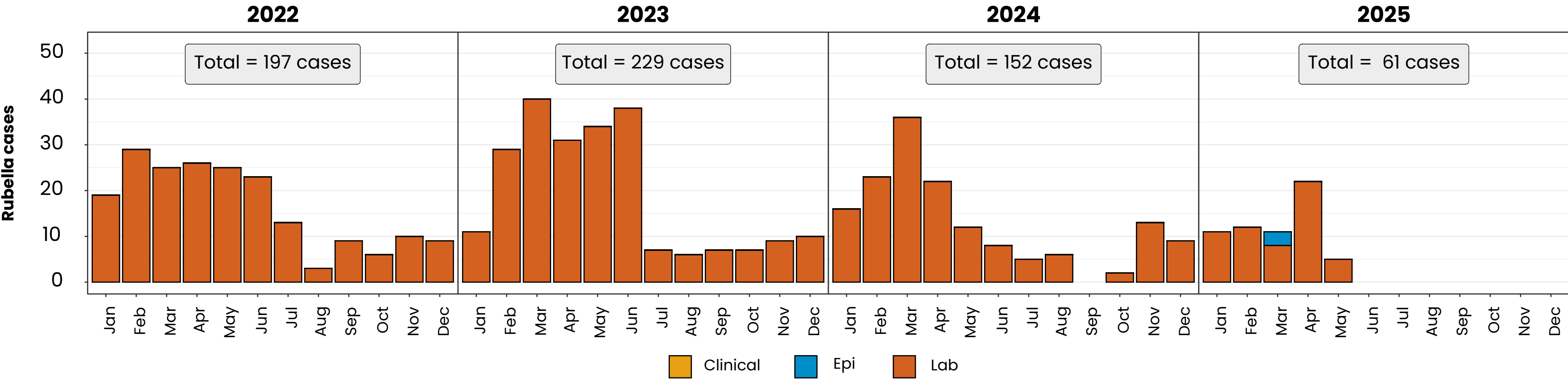


Top 10 countries (last 12 M)			
Country	RCV in RI	Cases	% of Total
Yemen	2015	1482	74
Pakistan	2022	218	11
Afghanistan	No	96	5
Saudi Arabia	1982	43	2
Sudan	2024	40	2
Others	-	38	2
Egypt	1999	25	1
Libya	1993	24	1
Syrian Arab Republic	1999	18	1
Iran (Islamic Republic of)	2004	13	1
United Arab Emirates	1985	11	1



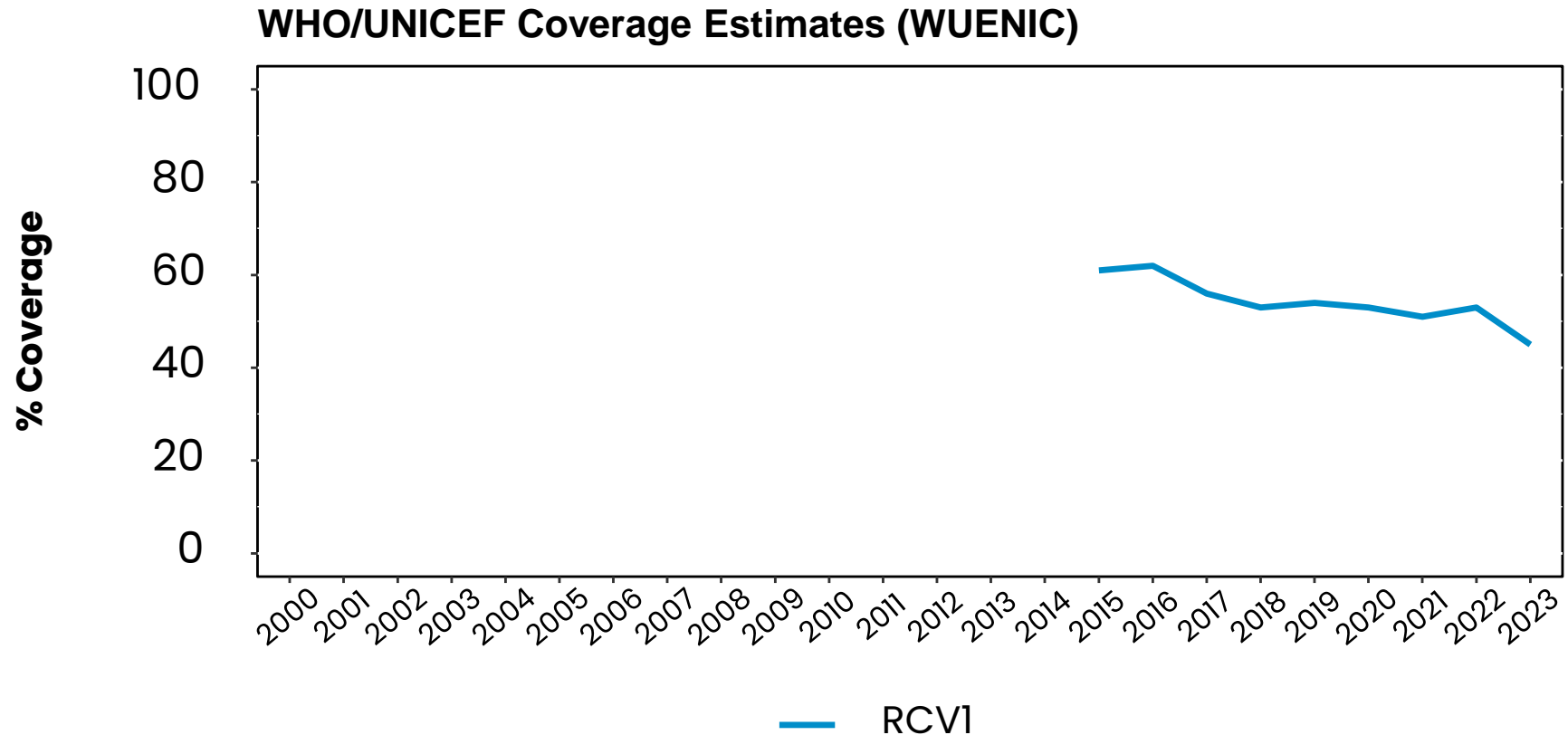
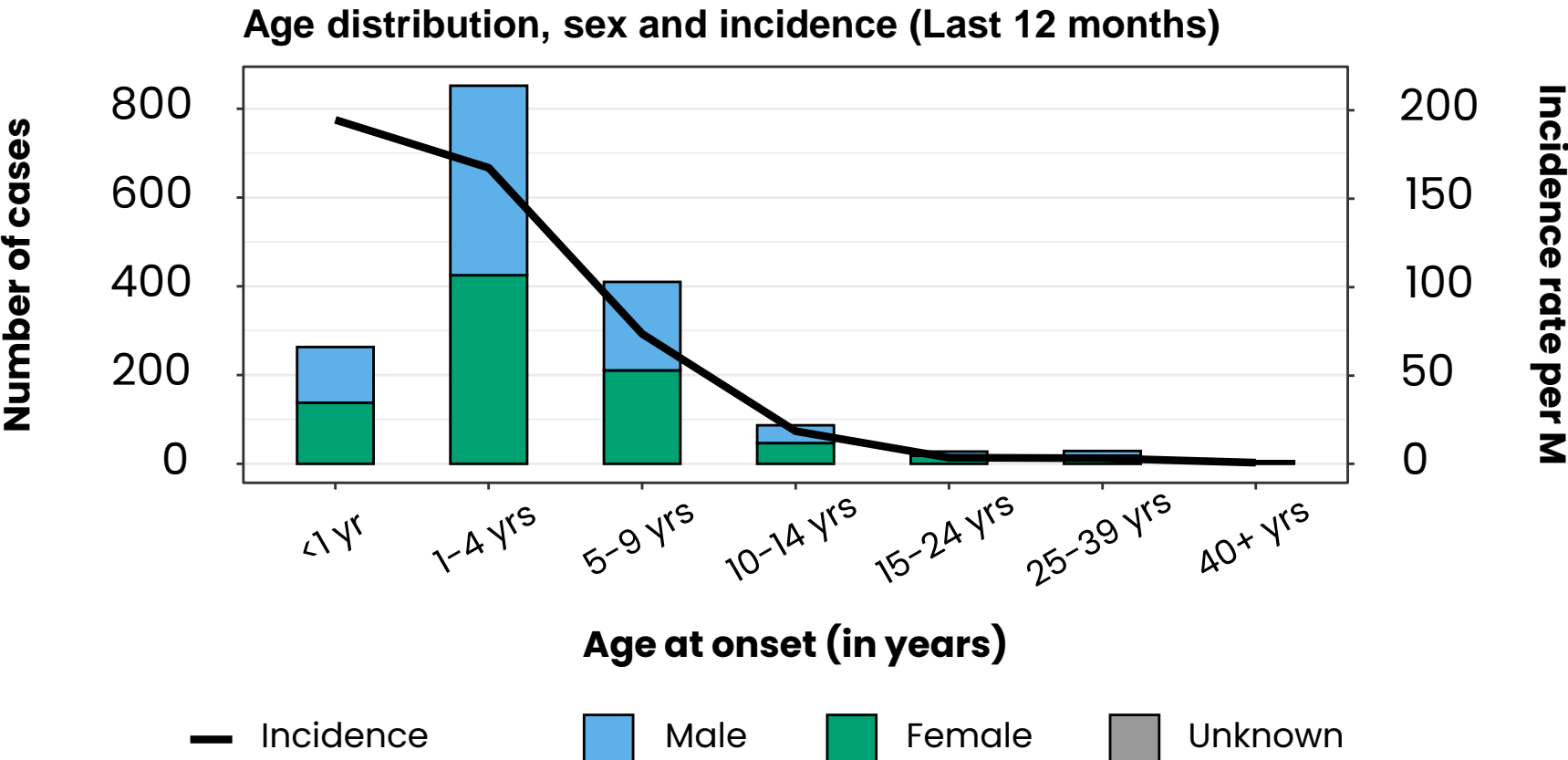
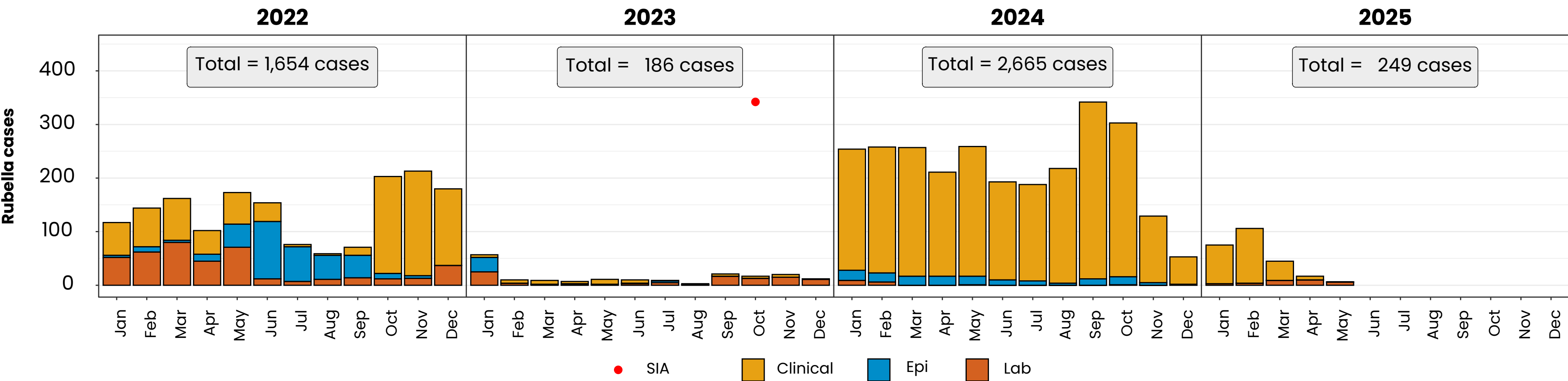
Rubella cases: Afghanistan

ELIMINATION STATUS: ENDEMIC

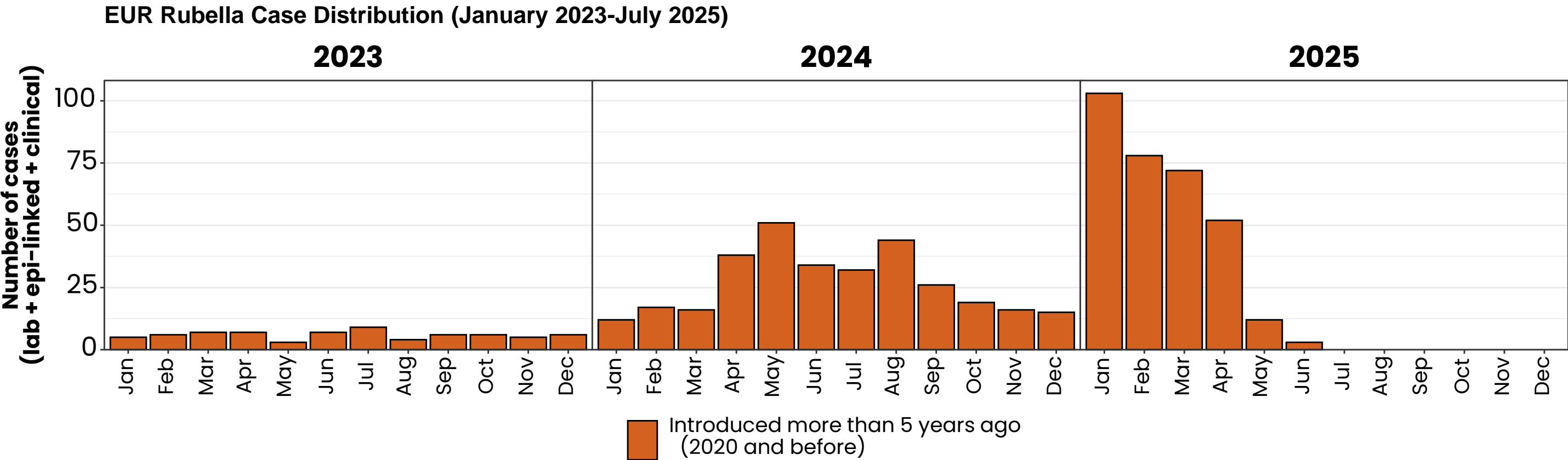


# Rubella cases: Yemen

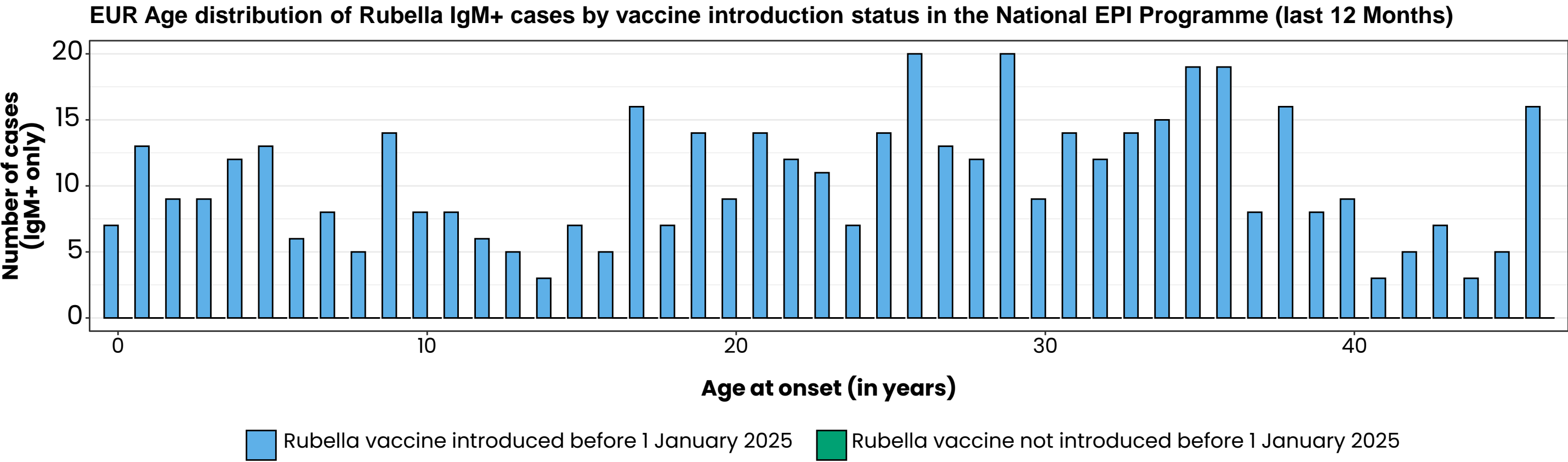
ELIMINATION STATUS: **ENDEMIC**



# Rubella cases (EUR)

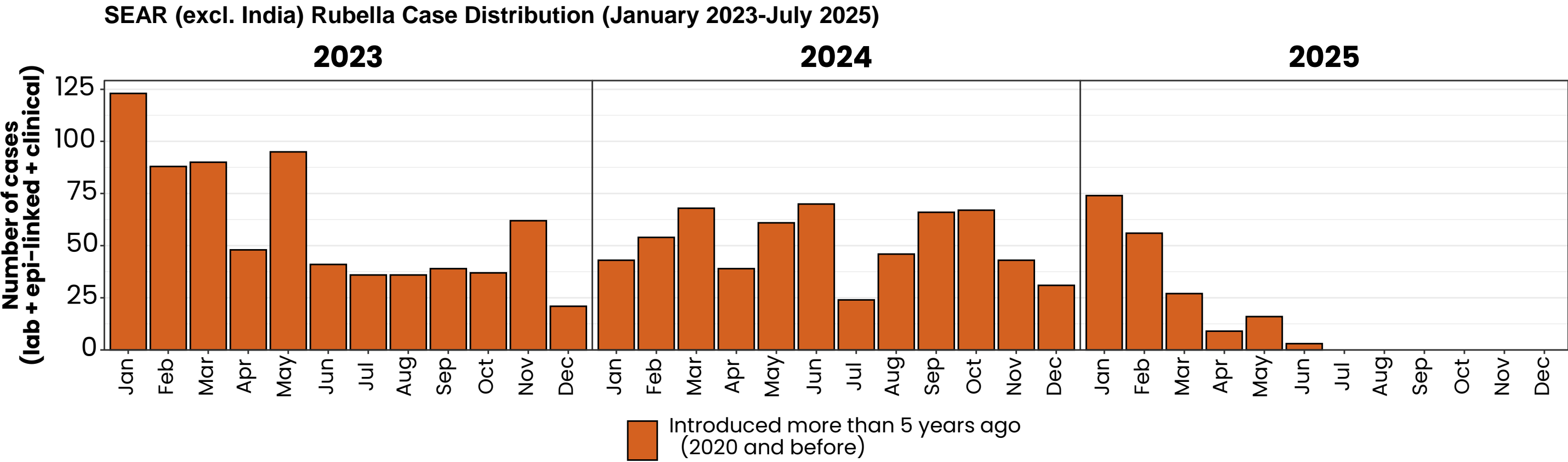


Top 10 countries (last 12 M)			
Country	RCV in RI	Cases	% of Total
Russian Federation	2000	423	90
Türkiye	2006	13	3
Ukraine	2003	11	2
Germany	1991	9	2
Kyrgyzstan	2001	4	1
Sweden	1982	4	1
Uzbekistan	2006	3	1
Others	-	2	0
Belarus	1996	1	0
Bulgaria	1992	1	0
Spain	1978	1	0

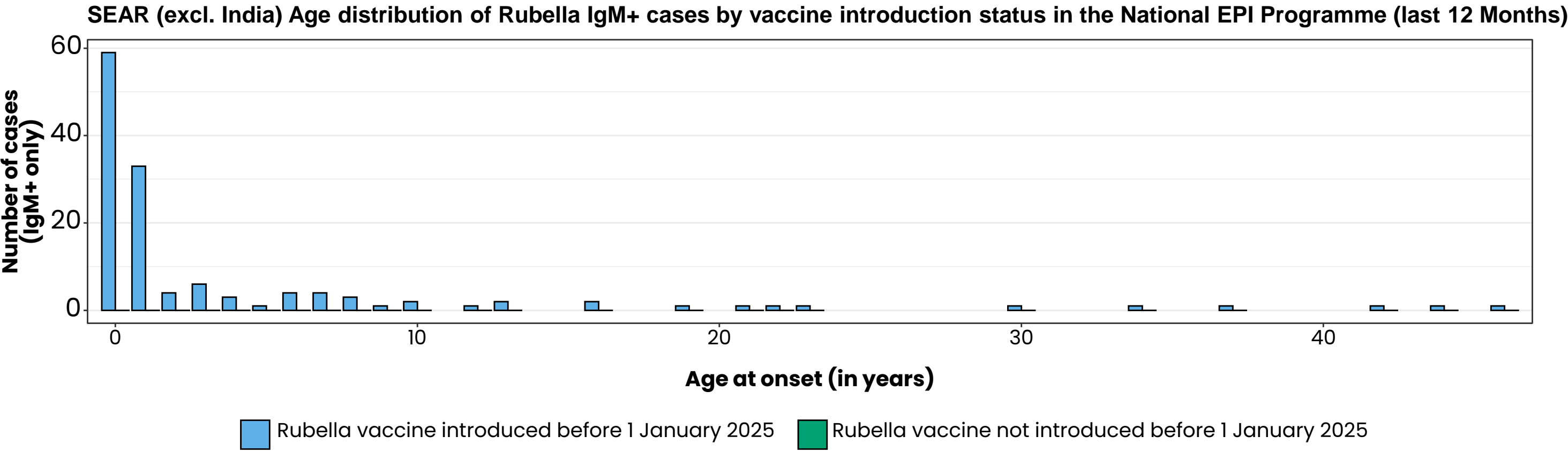


Notes: Based on data received 2025-07 Data Source: IVB Database. Spikes in age-distribution curve are an artifact of reporting by age bands ( 0=<1 yrs, 2=1-4 yrs, 7=5-9 yrs, 12=10-14 yrs, 17=15-19 yrs, 25=20-29 yrs, 45=30+ yrs) instead of by age from some member states.

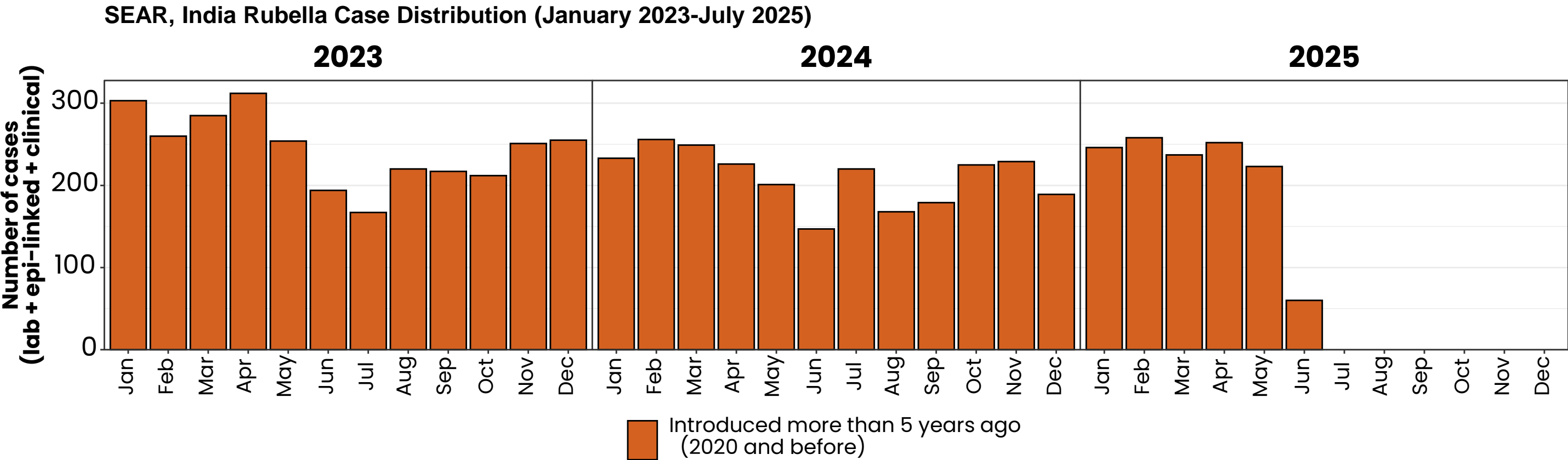
# Rubella cases (SEAR (excl. India))



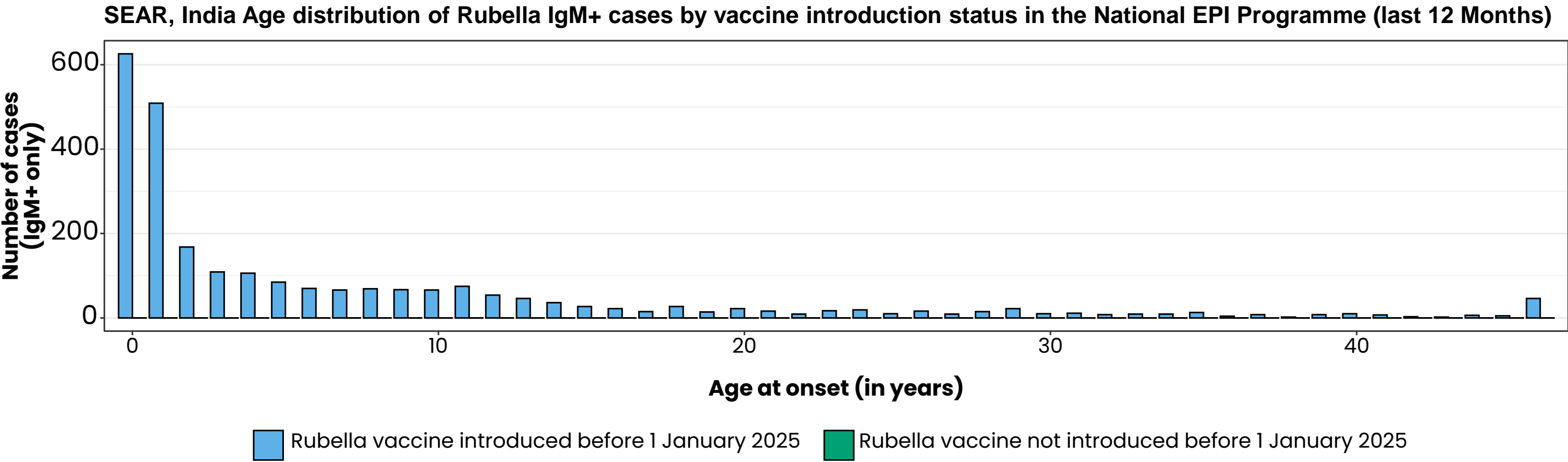
Top 10 countries (last 12 M)			
Country	RCV in RI	Cases	% of Total
Indonesia	2018	333	72
Bangladesh	2012	65	14
Nepal	2013	32	7
Thailand	1997	27	6
Myanmar	2015	5	1



# Rubella cases (SEAR, India)

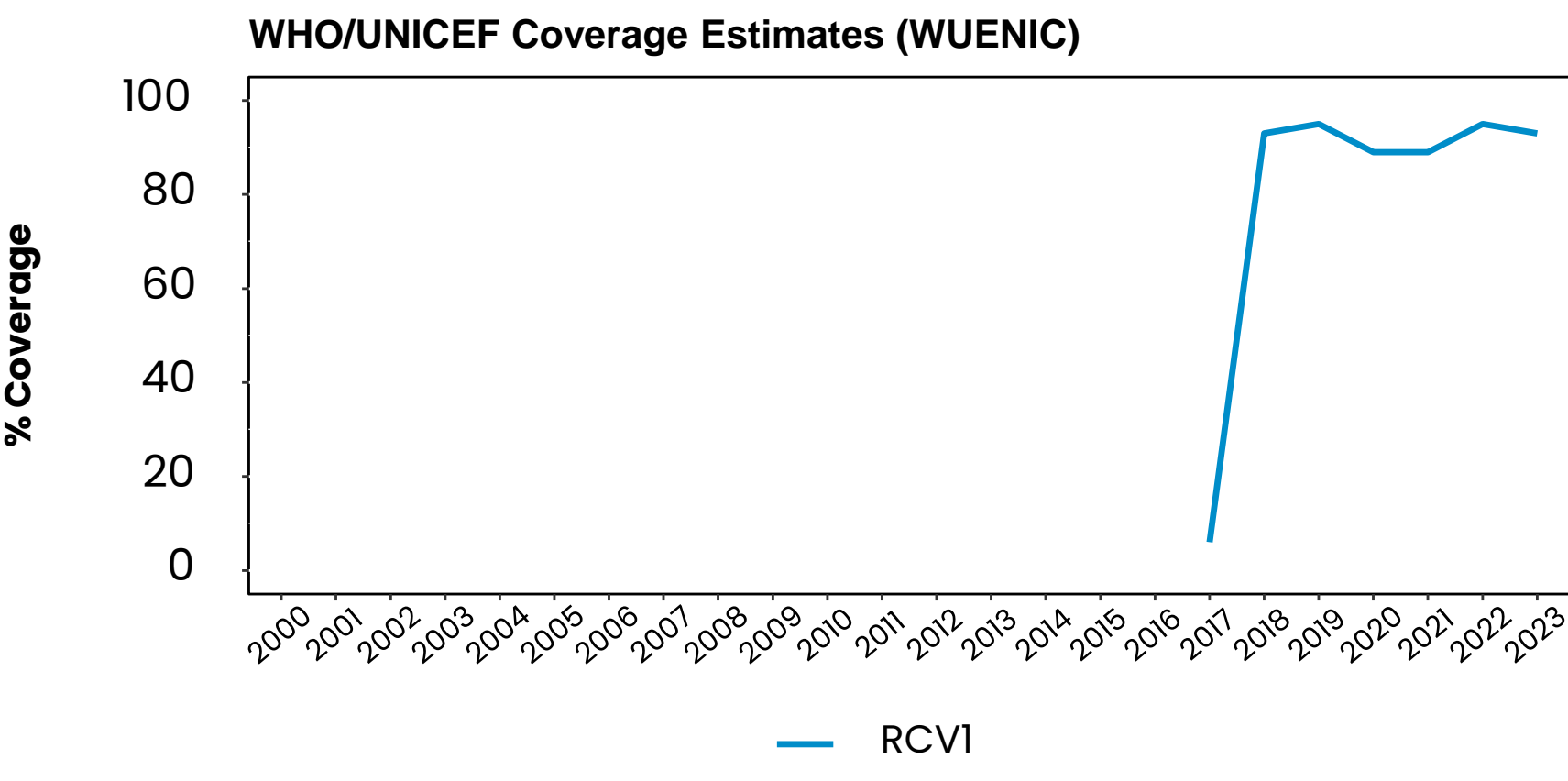
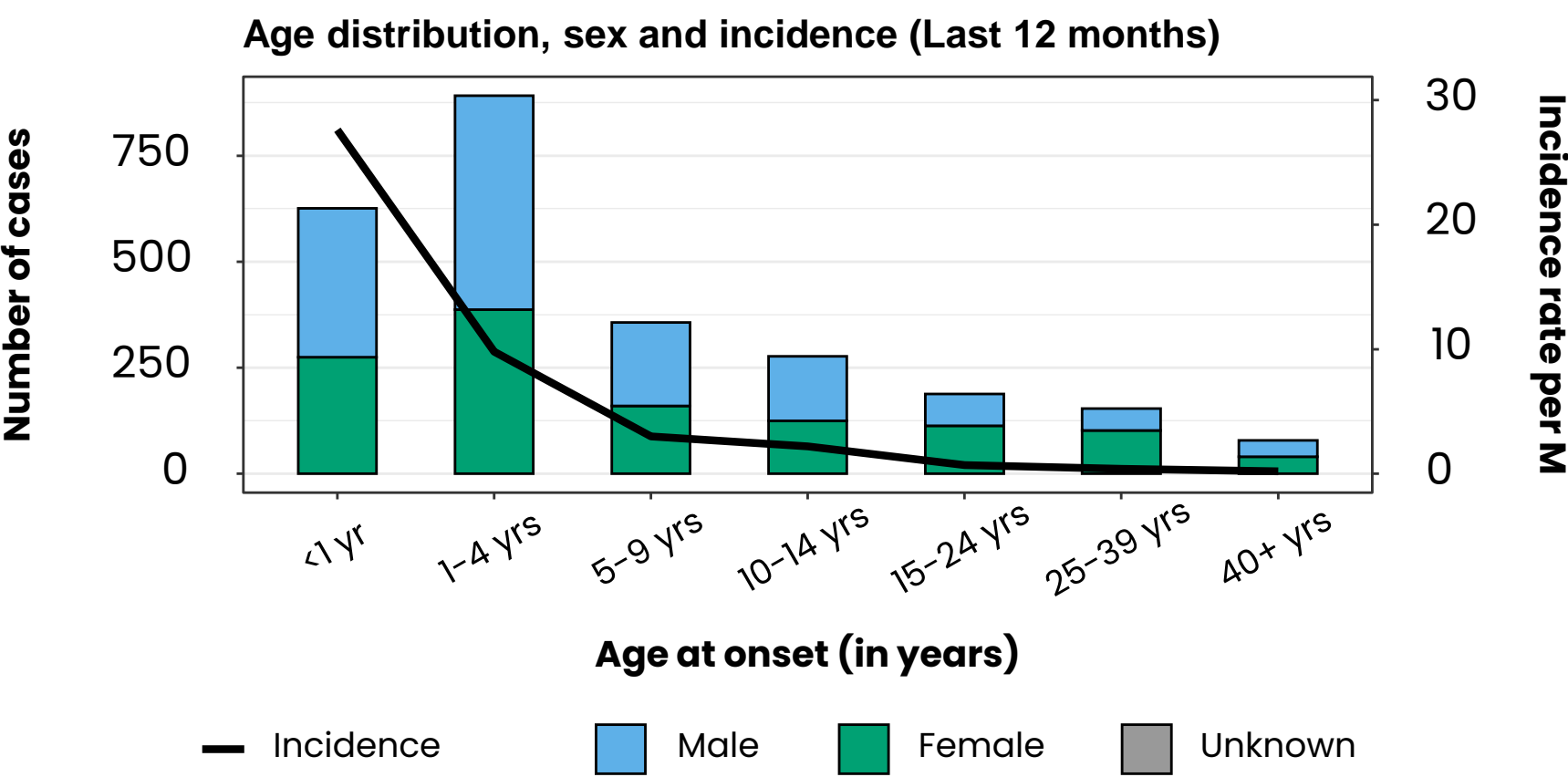
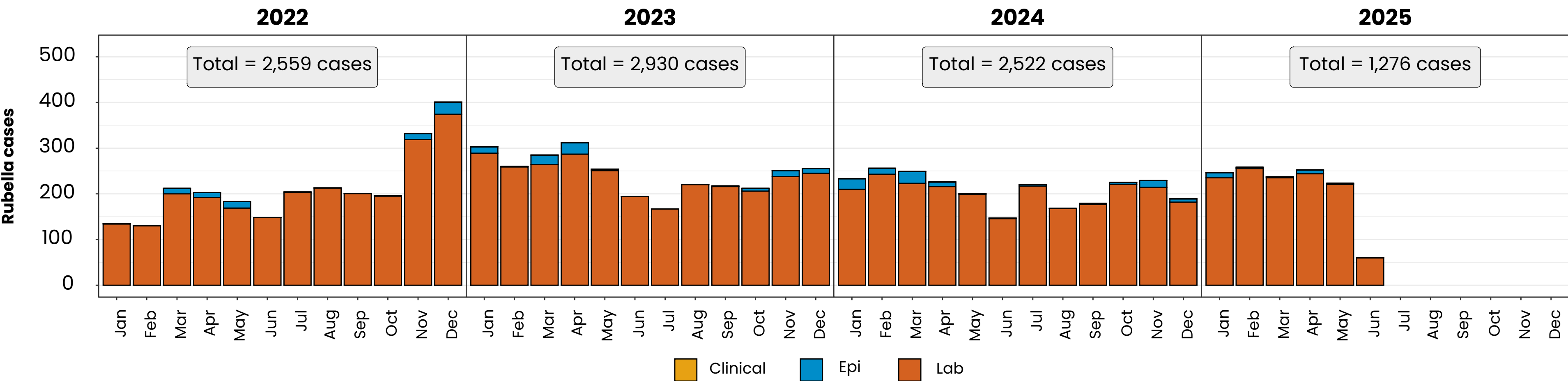


Top 10 countries (last 12 M)			
Country	RCV in RI	Cases	% of Total
India	2018	2486	100



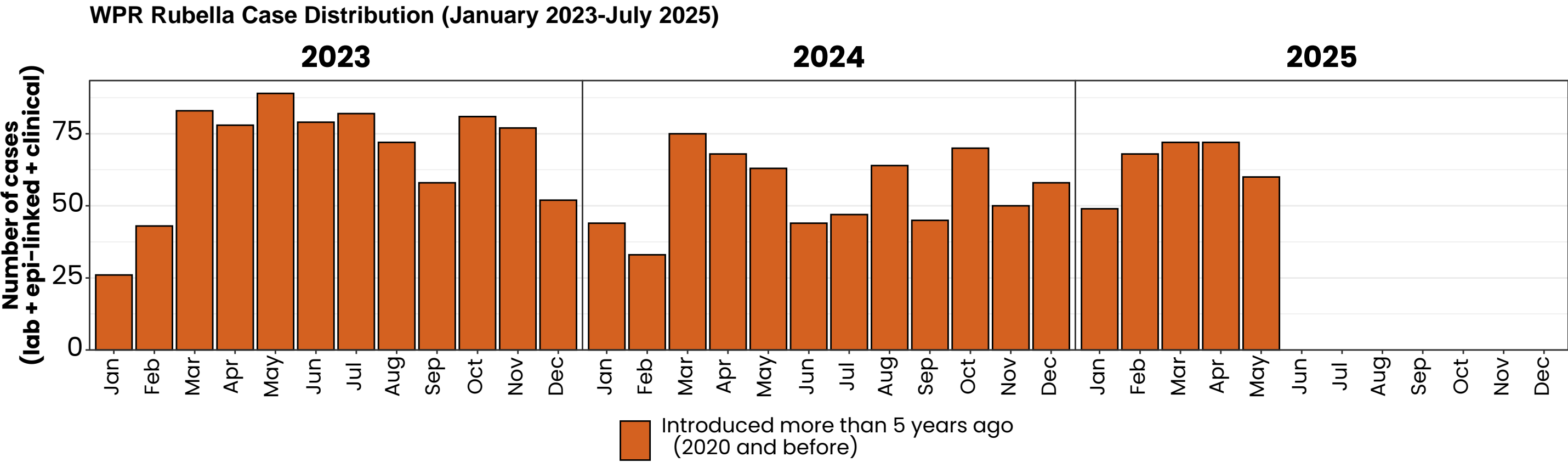
# Rubella cases: India

ELIMINATION STATUS: **ENDEMIC**

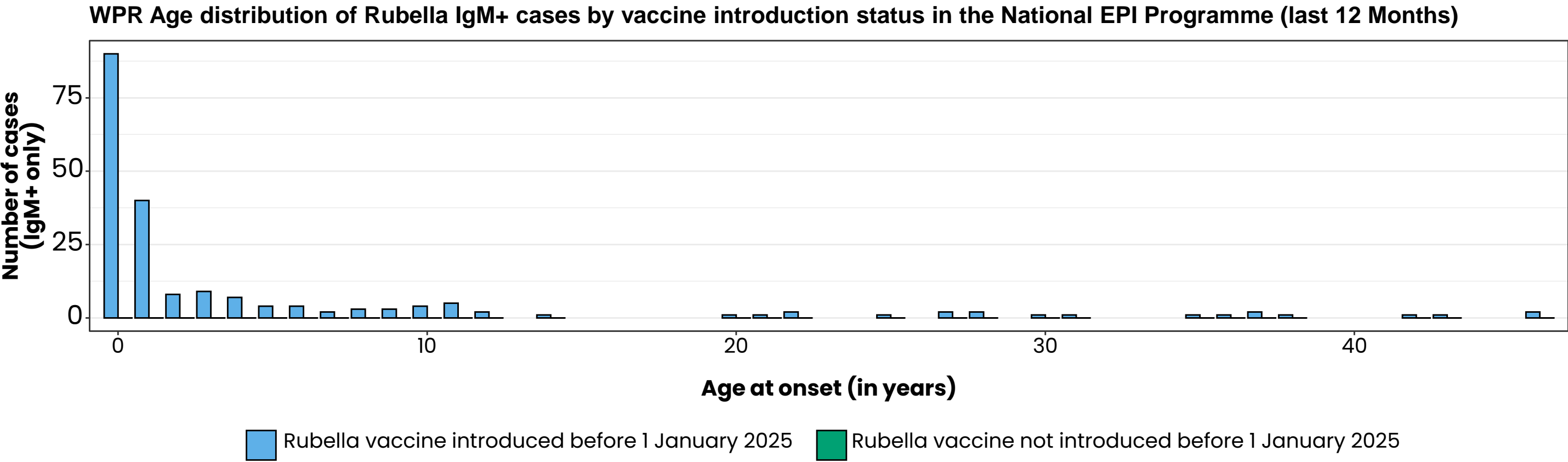




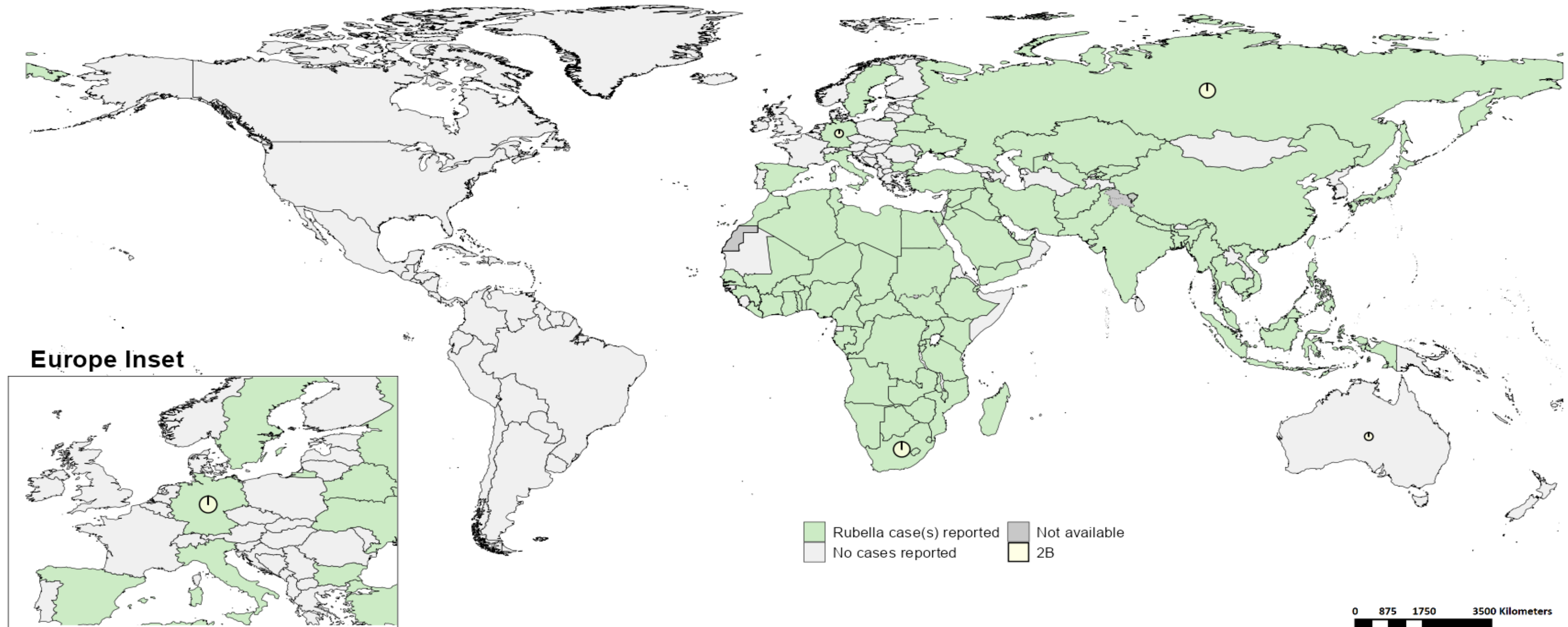
# Rubella cases (WPR)



Top 10 countries (last 12 M)			
Country	RCV in RI	Cases	% of Total
China	2008	462	71
Malaysia	2004	88	13
Cambodia	2013	41	6
Philippines	2010	40	6
Viet Nam	2015	13	2
Japan	1995	10	2
Singapore	1982	1	0



# Distribution of rubella genotypes (last 12 months)



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Data source: IVB Database

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**Laboratory**



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# Measles and Rubella IgM Data Summary

## 2025

Region	Member States*	Specimens received	Measles tested	Measles positive n(%)	Measles equivocal n(%)	Measles negative n(%)	Rubella tested	Rubella positive n(%)	Rubella equivocal n(%)	Rubella negative n(%)
AFR	39/47	26,206	22,704	6,032 (27)	389 (2)	12,033 (53)	17,084	984 (6)	174 (1)	11,634 (68)
AMR	25/35	6,993	7,048	1,251 (18)	186 (3)	5,611 (80)	6,894	159 (2)	64 (1)	6,671 (97)
EMR	20/21	56,927	39,420	17,412 (44)	21 (0)	21,987 (56)	33,299	509 (2)	19 (0)	32,771 (98)
EUR	42/53	20,551	17,769	8,119 (46)	96 (1)	11,447 (64)	7,277	570 (8)	70 (1)	6,605 (91)
SEAR	11/11	48,027	45,522	5,782 (13)	709 (2)	39,032 (86)	43,432	1,305 (3)	355 (1)	41,768 (96)
WPR	25/27	11,515	10,812	3,573 (33)	221 (2)	6,998 (65)	8,926	265 (3)	48 (1)	8,609 (96)
Total	162/194	170,219	143,275	42,169 (29)	1,622 (1)	97,108 (68)	116,912	3,792 (3)	730 (1)	108,058 (92)

## 2024

Region	Member States*	Specimens received	Measles tested	Measles positive n(%)	Measles equivocal n(%)	Measles negative n(%)	Rubella tested	Rubella positive n(%)	Rubella equivocal n(%)	Rubella negative n(%)
AFR	43/47	120,445	109,377	19,102 (17)	1,068 (1)	61,018 (56)	95,315	14,882 (16)	465 (0)	51,744 (54)
AMR	29/35	8,102	8,411	359 (4)	206 (2)	7,846 (93)	7,482	176 (2)	103 (1)	7,203 (96)
EMR	21/21	116,666	98,272	38,274 (39)	129 (0)	59,869 (61)	90,051	1,468 (2)	77 (0)	88,506 (98)
EUR	44/53	159,496	137,242	78,299 (57)	404 (0)	53,578 (39)	56,088	1,305 (2)	363 (1)	54,154 (97)
SEAR	11/11	129,727	127,549	18,898 (15)	3,678 (3)	108,724 (85)	117,938	3,087 (3)	3,040 (3)	114,106 (97)
WPR	25/27	23,799	22,032	5,695 (26)	505 (2)	15,807 (72)	17,280	601 (3)	88 (1)	16,560 (96)
Total	173/194	558,235	502,883	160,627 (32)	5,990 (1)	306,842 (61)	384,154	21,519 (6)	4,136 (1)	332,273 (86)

Notes: Based on data received 2025-07 - \* Member States Reporting / Total Member States in Region

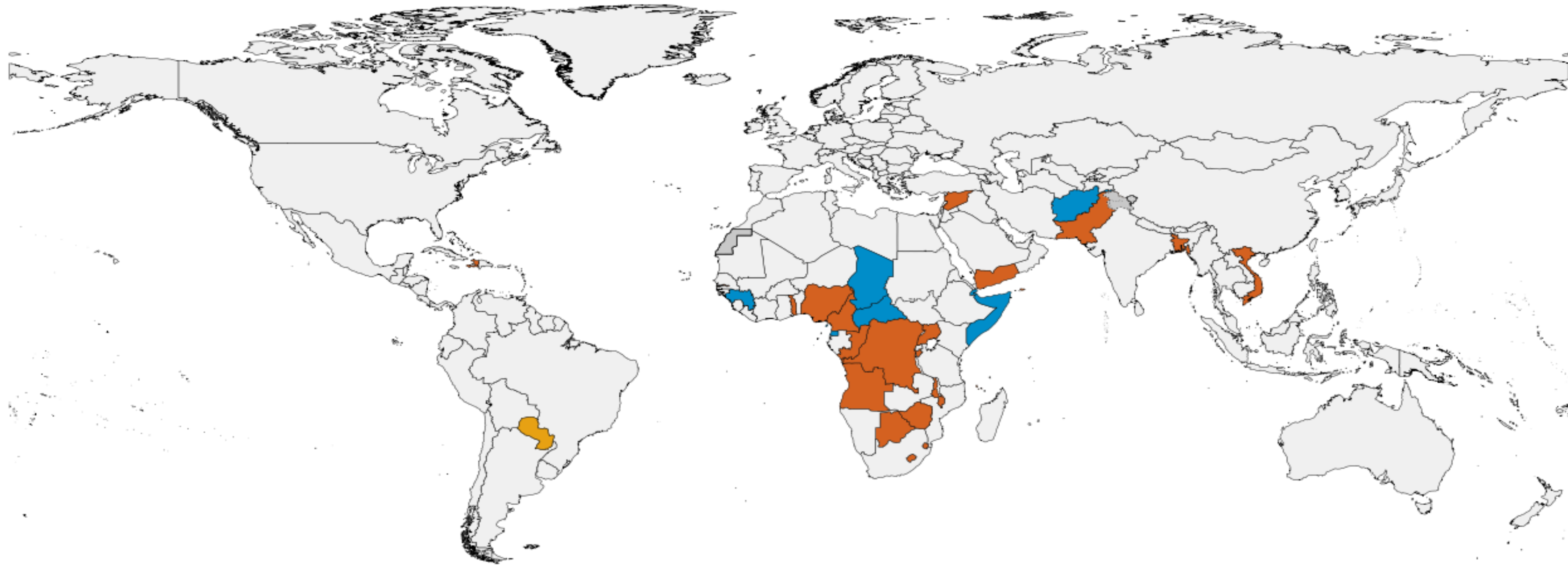
# **Supplementary Immunization Activities**



**World Health  
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# Upcoming MMR, MR and Measles campaigns (2025–2026)



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Data source: IVB Database

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■ Measles ■ MR ■ MMR ■ No campaign planned ■ Not applicable



# Upcoming MMR, MR and Measles campaigns (2025–2026)

Year	Region	Name	Type	Intervention	StartDate	Status	Age Group(s)	Extent	Target
2025	AFR	Guinea	SNID	MEASLES	2025-02-??	Planned	0-59 M	SUBNATIONAL	996214
2025	AFR	Eswatini	FollowUp	MR	2025-07-21	Planned	9-59 M	NATIONAL	146141
2025	AFR	Central African Republic	FollowUp	MEASLES	2025-10-??	Planned	6-59 M	NATIONAL	1335862
2025	AFR	Congo	FollowUp	MR	2025-10-??	Planned	9-59 M	NATIONAL	927595
2025	AFR	Gambia	FollowUp	MR	2025-10-??	Planned	9-59 M	NATIONAL	385713
2025	AFR	Nigeria	CatchUp-SIA	MR	2025-10-??	Planned	9 M-14 Y	NATIONAL	102539762
2025	AFR	Zimbabwe	FollowUp	MR	2025-10-06	Planned	9-59 M	NATIONAL	2518935
2025	AFR	Lesotho	CatchUp-SIA	MR	2025-10-22	Planned	9-59 M	NATIONAL	188518
2025	AFR	Botswana	FollowUp	MR	2025-11-??	Planned	9-59 M	NATIONAL	223959
2025	AFR	Chad	FollowUp	MEASLES	2025-11-??	Planned	9-59 M	NATIONAL	3772072
2025	AFR	Comoros	FollowUp	MR	2025-11-??	Planned	6-59 M	NATIONAL	101686
2025	AFR	Togo	FollowUp	MR	2025-11-??	Planned	9 M-9 Y	NATIONAL	2201427
2025	AFR	Uganda	FollowUp	MR	2025-11-??	Planned	9-59 M	NATIONAL	7685529
2025	AFR	Democratic Republic of the Congo	CatchUp	MR	2025-11-26	Planned	9 M-14 Y	NATIONAL	61697195
2025	AFR	Comoros	FollowUp	MR	2025-12-??	Planned	9-59 M	NATIONAL	113688
2025	AMR	Turks and Caicos Islands	VaccinationWeek	MMR	2025-04-??	Planned	5-14 Y	NATIONAL	100
2025	EMR	Syrian Arab Republic	FollowUp	MR	2025-10-??	Planned	9-59 M	NATIONAL	1892447
2025	EMR	Afghanistan	FollowUp	MEASLES	2025-11-??	Planned	9-59 M	NATIONAL	16047992
2025	EMR	Pakistan	FollowUp	MR	2025-11-??	Planned	6-59 M	NATIONAL	35402182
2025	EMR	Somalia	FollowUp	MEASLES	2025-NA-??	Planned	9-59 M	NATIONAL	3200130
2025	WPR	Viet Nam	OR	MR	2025-01-??	Planned	6 M-15 Y	NATIONAL	2170542
2026	AFR	Malawi	FollowUp	MR	2026-04-??	Planned	9-59 M	NATIONAL	5850406
2026	AFR	Burundi	FollowUp	MR	2026-10-??	Planned	9-59 M	NATIONAL	2446535
2026	AFR	Angola	FollowUp	MR	2026-NA-??	Planned	9-59 M	NATIONAL	5983408
2026	AFR	Cameroon	FollowUp	MR	2026-NA-??	Planned	9-59 M	NATIONAL	4345819
2026	AFR	Equatorial Guinea	FollowUp	MEASLES	2026-NA-??	Planned	9-59 M	NATIONAL	229691
2026	AMR	Paraguay	Campaign	MMR	2026-10-??	Planned	12-59 M	NATIONAL	509698
2026	AMR	Haiti	Campaign	MR	2026-NA-??	Planned	9-59 M	NATIONAL	1236480
2026	EMR	Djibouti	CatchUp	MEASLES	2026-NA-??	Planned	9-59 M	NATIONAL	340185
2026	EMR	Yemen	FollowUp	MR	2026-NA-??	Planned	9-59 M	NATIONAL	4714060
2026	SEAR	Bangladesh	FollowUp	MR	2026-01-??	Planned	9 M-14 Y	NATIONAL	19808176



# WHO Bulletins and Newsletters

- AFR (webpages under migration)
- AMR: [PAHO measles and rubella weekly bulletin](#) (published every Friday)
- EMR: [EMRO measles home page](#)
- EUR : [EURO EpiData update](#)
- SEAR: (webpages under migration)
- WPR: [WPRO measles-rubella monthly bulletin](#)