Measles and Rubella Global Update September 2025

World Health Organization | IVB

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)

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 September 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 1st Friday of the month, and HQ attempts to release the monthly report by the 3rd 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, 1st/2nd 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	71,069	38,686	13,754	11,972	12,960	2025-09
AMR	31/35	24,602	10,117	6	2,377	7,734	2025-09
EMR	20/21	90,799	56,639	27,614	6,568	22,457	2025-09
EUR	47/53	40,548	29,300	4,890	5,323	19,087	2025-09
SEAR	10/10	73,771	14,490	6,140	2,479	5,871	2025-09
WPR	23/28	59,532	15,350	5,647	885	8,818	2025-09
Total	**173/194**	**360,321**	**164,582**	**58,051**	**29,604**	**76,927**	

Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	6,079	7,183	8,939	5,436	5,051	3,208	1,827	921	42	0	0	0
AMR	217	434	1,221	2,502	2,165	1,768	1,369	428	13	0	0	0
EMR	6,903	7,562	9,471	9,242	8,936	6,205	5,935	2,320	65	0	0	0
EUR	4,895	4,440	4,594	5,173	5,048	3,578	1,493	79	0	0	0	0
SEAR	1,423	1,711	2,317	2,466	1,966	1,582	1,675	1,350	0	0	0	0
WPR	2,516	2,570	2,501	2,021	2,652	1,568	1,342	180	0	0	0	0
Total	**22,033**	**23,900**	**29,043**	**26,840**	**25,818**	**17,909**	**13,641**	**5,278**	**120**	**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	2025-09
AMR	33/35	17,610	464	0	53	411	2025-09
EMR	21/21	164,426	96,713	52,179	6,207	38,327	2025-09
EUR	52/53	149,241	127,421	21,819	20,131	85,471	2025-09
SEAR	10/10	133,186	29,662	8,150	6,639	14,873	2025-09
WPR	26/28	91,820	19,202	7,893	986	10,323	2025-09
Total	**185/194**	**709,591**	**359,589**	**105,925**	**85,827**	**167,837**	

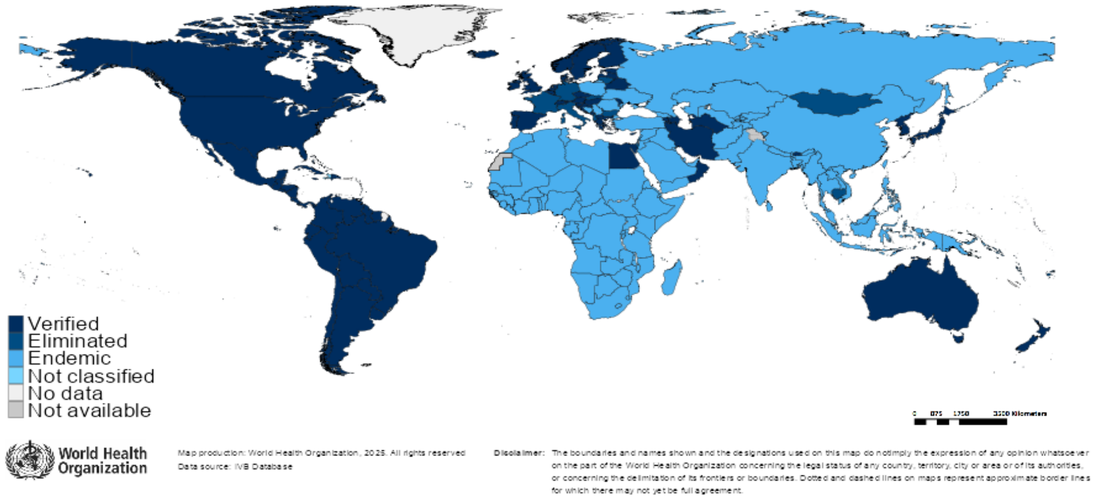
Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	13,630	15,801	19,233	11,624	7,782	4,419	2,969	2,331	2,501	2,270	2,207	1,360
AMR	24	49	103	47	18	19	41	38	37	33	44	11
EMR	13,513	15,485	15,739	10,912	10,914	7,073	5,088	3,559	3,838	3,695	3,272	3,625
EUR	29,073	24,209	20,549	15,701	12,922	9,448	5,176	2,411	1,501	1,392	2,018	3,021
SEAR	2,769	3,052	4,039	2,942	2,194	1,345	1,845	2,209	2,574	2,917	2,237	1,539
WPR	2,142	1,791	1,927	1,677	1,661	1,211	924	1,355	1,360	1,712	1,816	1,626
Total	**61,151**	**60,387**	**61,590**	**42,903**	**35,491**	**23,515**	**16,043**	**11,903**	**11,811**	**12,019**	**11,594**	**11,182**

Notes: Based on data received 2025-09 - 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

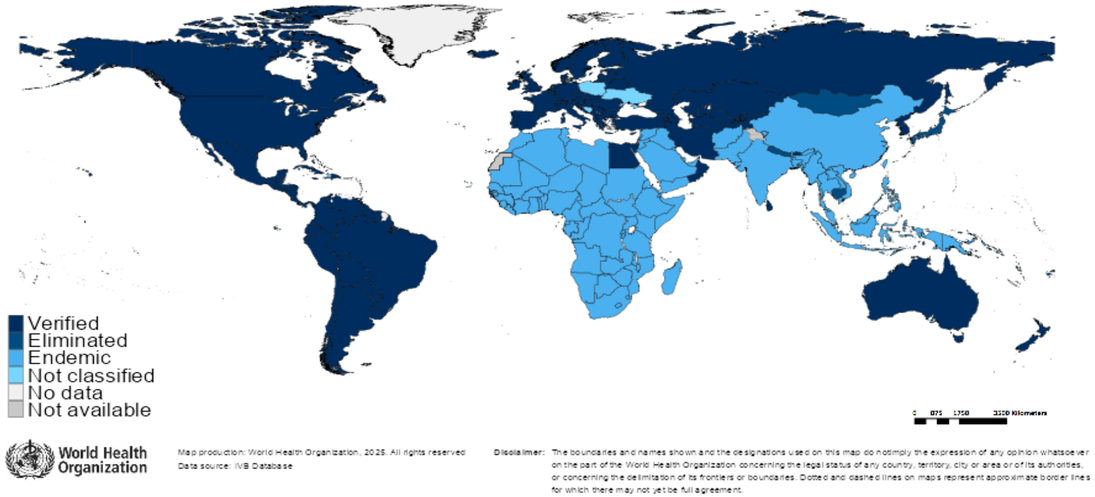
Measles

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	10	4	40	0	6	0
WPR	28	6	21	15	7	0
GLOBAL	**194**	**81**	**42**	**23**	**89**	**1**



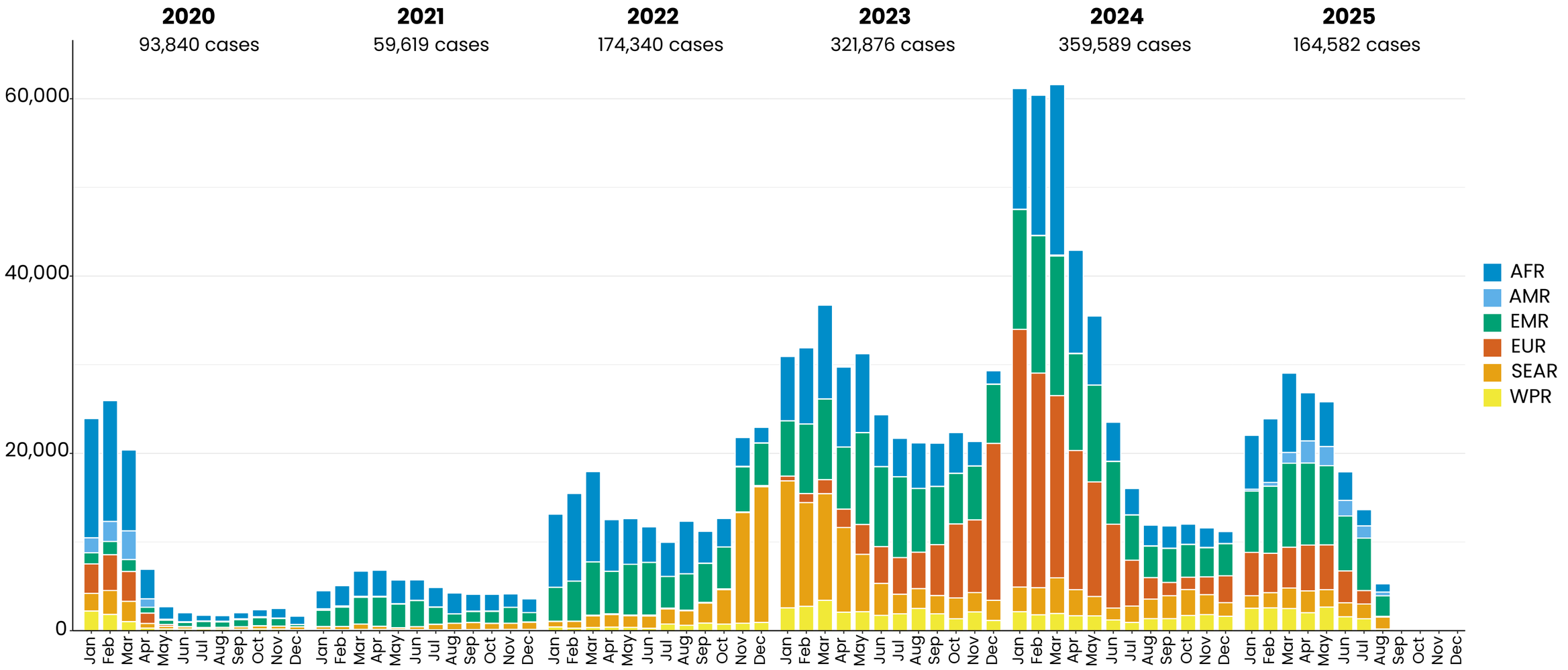
Rubella

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	10	5	50	1	4	0
WPR	28	5	18	16	7	0
GLOBAL	**194**	**98**	**51**	**17**	**75**	**4**



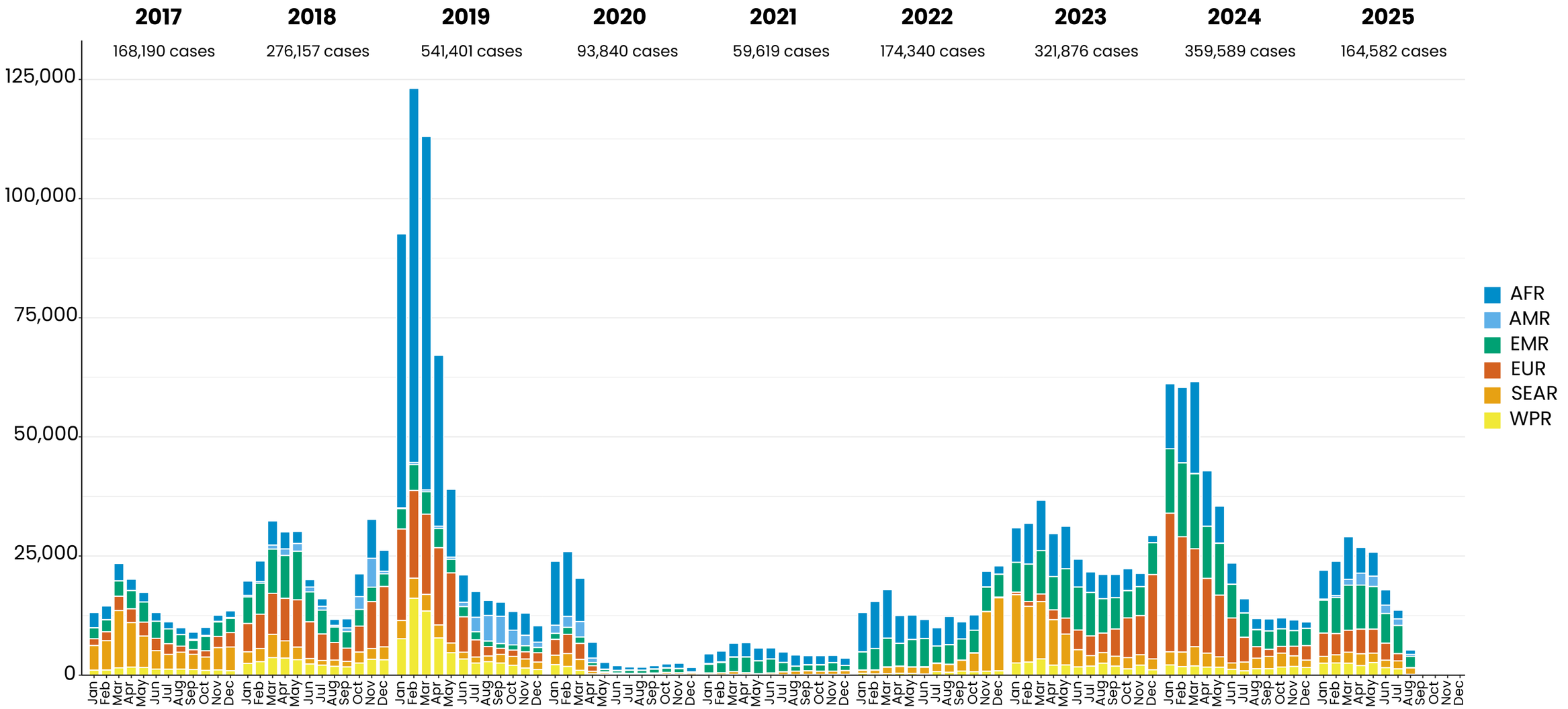
Notes: Based on data available at WHO HQ as of 2025-09-09 . Terms used on this slide refer to the global framework for the verification of measles and rubella elimination. These terms might differ from those used by WHO Regional Offices. Verified = Elimination verified by Regional Verification Commitee (RVC); Eliminated = Eliminated transmission but no RVC verification yet.

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



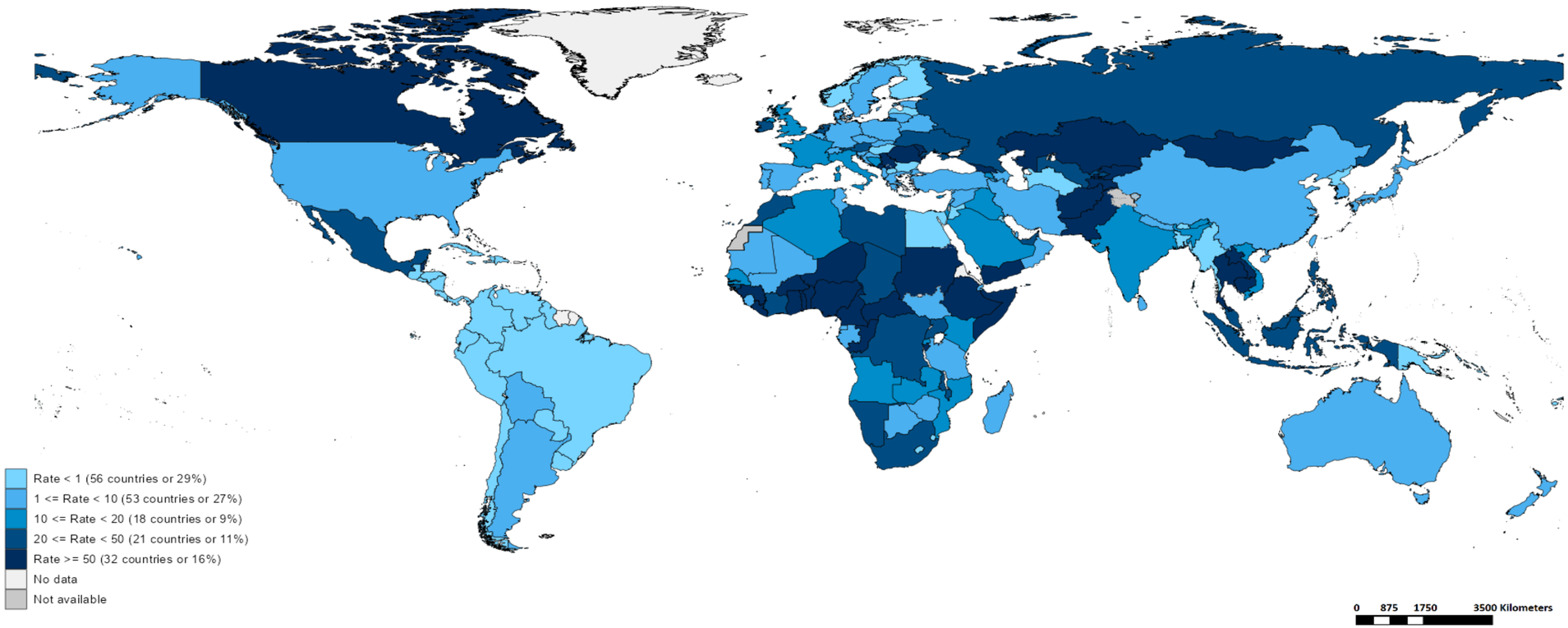
Based on data received 2025-09 - Data Source: IVB Database - This is surveillance data, hence for the last month(s), the data may be incomplete.

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



Based on data received 2025-09 - 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	10097	1,405.09
Yemen	32037	789.42
Romania	7883	414.57
Mongolia	1196	344.12
Afghanistan	11104	260.37
Tajikistan	2264	213.77
Georgia	707	185.68
Kazakhstan	2849	138.35
Serbia	819	121.58
Lao People's Democratic Republic	869	111.84

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Data source: IVB Database

Disclaimer: The boundaries and names shown and the designations used on this map do notimply 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.

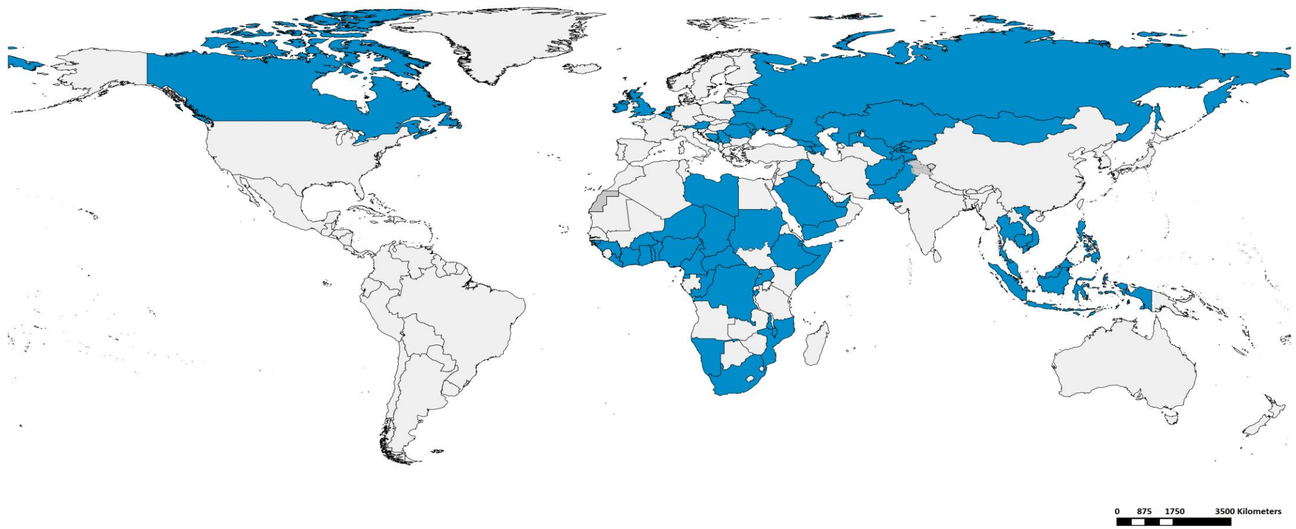
Notes: Based on data received 2025-09 - Surveillance data from 2024-08 to 2025-07 - Incidence: Number of cases / population * 1,000,000 - Population data: World population prospects, 2019 revision

Immunization Agenda 2030 - Impact Goal 1.3

Countries provisionally meeting the large or disruptive outbreaks definition - Data from 2024-05 to 2025-04 included

Country	Cases	Rate/M	Clinical*
Kyrgyzstan	11,428	1,566.54	44%
Romania	17,581	929.79	3%
Yemen	28,407	680.02	92%
Afghanistan	11,680	266.40	0%
Kazakhstan	4,946	237.29	4%
Mongolia	578	164.34	0%
Bosnia and Herzegovina	510	162.42	64%
Georgia	608	159.72	11%
Liberia	914	159.48	6%
Serbia	979	146.36	43%
Tajikistan	1,461	135.44	0%
Thailand	8,022	112.01	37%
Ethiopia	13,430	99.13	1%
Cambodia	1,762	98.72	0%
Burkina Faso	2,298	95.45	78%
Iraq	4,400	93.58	84%
Pakistan	21,461	84.09	13%
Niger	2,245	80.41	48%
Ghana	2,808	80.08	13%
Republic of Moldova	233	77.77	1%
Togo	744	76.53	5%
Congo	494	76.18	4%
Somalia	1,420	72.25	0%
Benin	1,045	70.54	39%
Central African Republic	385	69.83	2%
Montenegro	44	69.54	0%
Sudan	3,539	68.50	2%
Côte d'Ivoire	2,240	68.48	0%
Armenia	181	61.31	0%
Russian Federation	8,693	60.37	1%
Guinea	911	60.33	12%

Country	Cases	Rate/M	Clinical*
Azerbaijan	577	55.49	90%
Malaysia	1,913	53.17	9%
Nigeria	12,481	52.55	67%
Canada	1,950	48.60	0%
Burundi	695	48.30	4%
Cameroon	1,421	47.56	11%
Djibouti	55	46.45	0%
Ireland	228	42.95	1%
Malawi	871	39.21	3%
Belgium	446	37.93	7%
Guinea-Bissau	77	34.23	56%
Philippines	3,973	34.02	77%
DR Congo	3,582	31.75	2%
Saudi Arabia	1,094	31.65	0%
San Marino	1	29.79	0%
Uzbekistan	1,099	29.66	1%
Indonesia	8,335	29.17	51%
Ukraine	1,137	29.17	9%
United Arab Emirates	329	29.00	15%
United Kingdom of Great Britain and Northern Ireland	1,992	28.64	0%
Netherlands (Kingdom of the)	514	28.02	0%
Chad	551	26.23	5%
Austria	220	24.14	0%
Libya	176	23.60	0%
Equatorial Guinea	44	22.70	64%
Belarus	200	22.23	0%
Uganda	1,133	22.05	5%
Mozambique	757	21.25	34%
Viet Nam	2,149	21.15	8%
South Africa	1,363	21.05	27%
Namibia	64	20.69	67%



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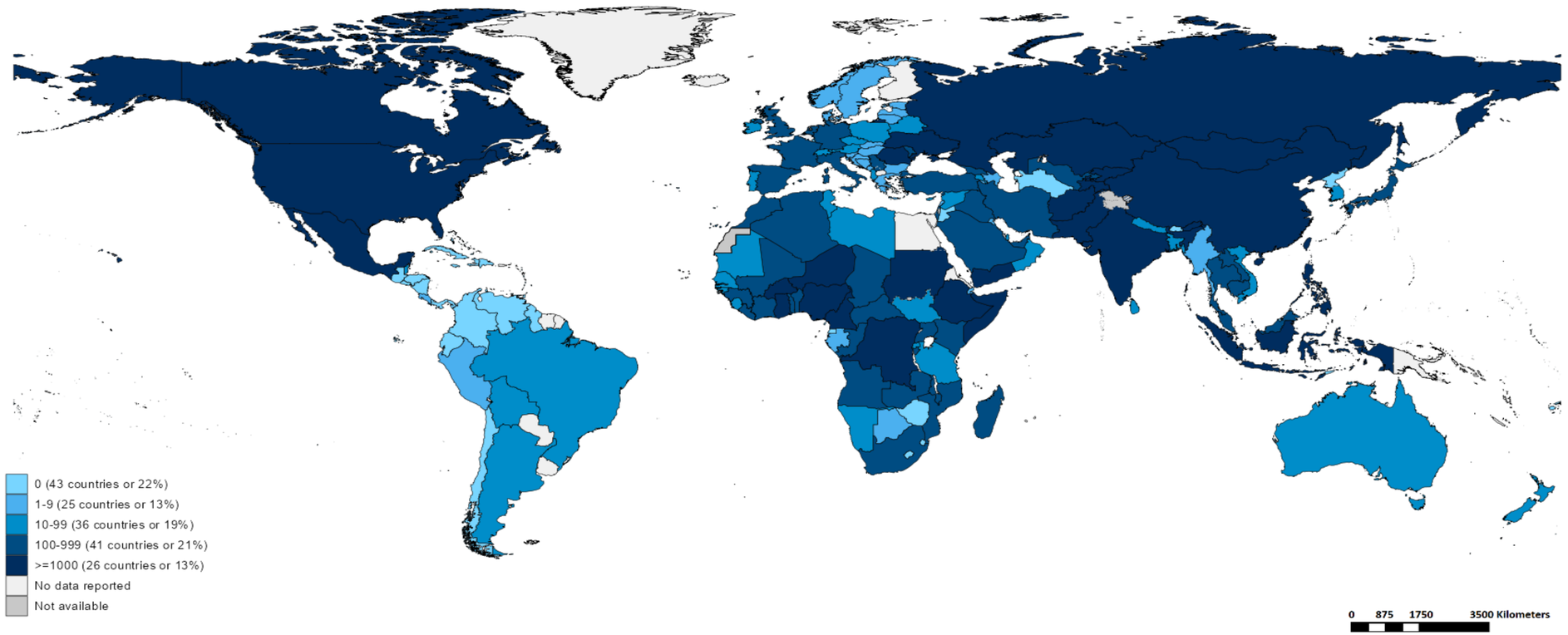
Data source: IVB Database

Total: 62 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 or 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 or 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 2025-09 and covering the period between 2024-05 and 2025-04 - 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	20,732
Pakistan	13,583
India**	11,004
Nigeria	10,281
Afghanistan	6,743
Kyrgyzstan	6,420
Indonesia	5,035
Russian Federation	4,837
Canada	4,019
Mexico	4,000

World Health Organization

Data source: IVB Database

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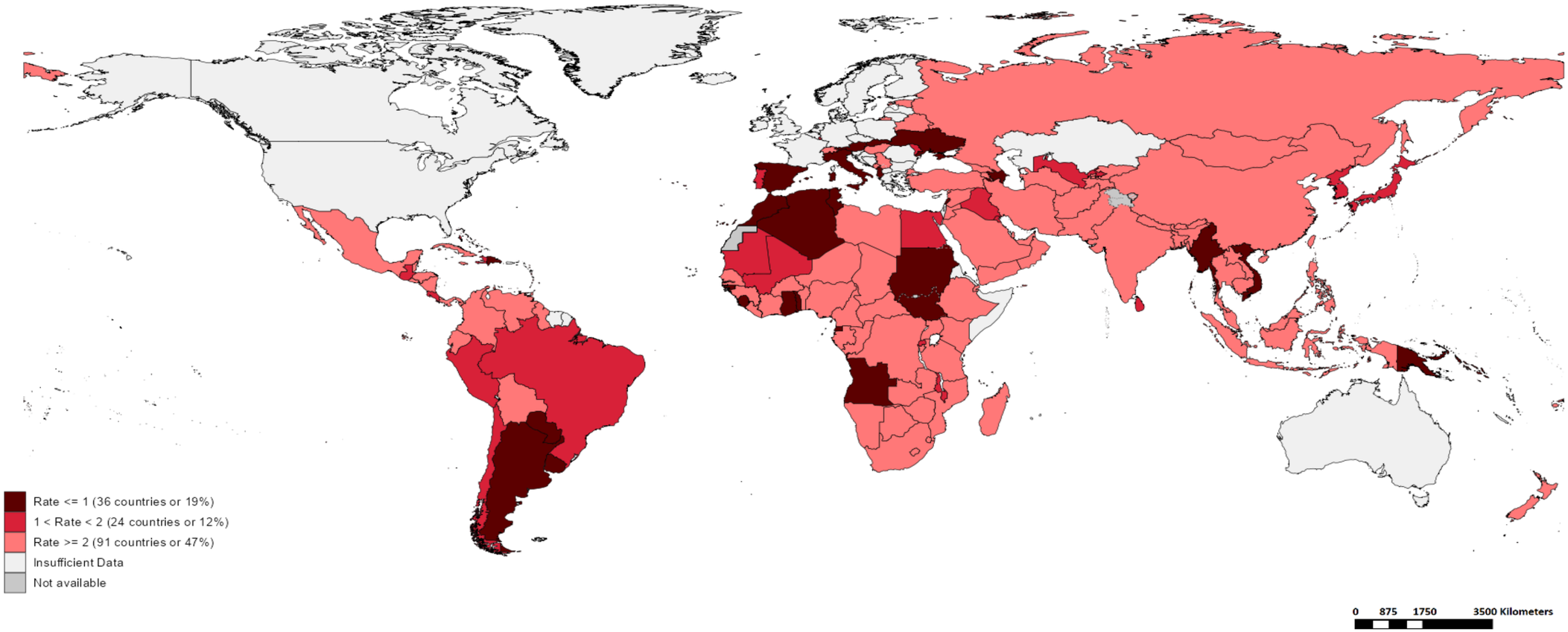
Notes: Based on data received 2025-09 - Surveillance data from 2025-02 to 2025-07 - * Countries with highest number of cases for the period - **WHO classifies all suspected measles cases reported from India as measles clinically compatible if a specimen was not collected as per the algorithm for classification 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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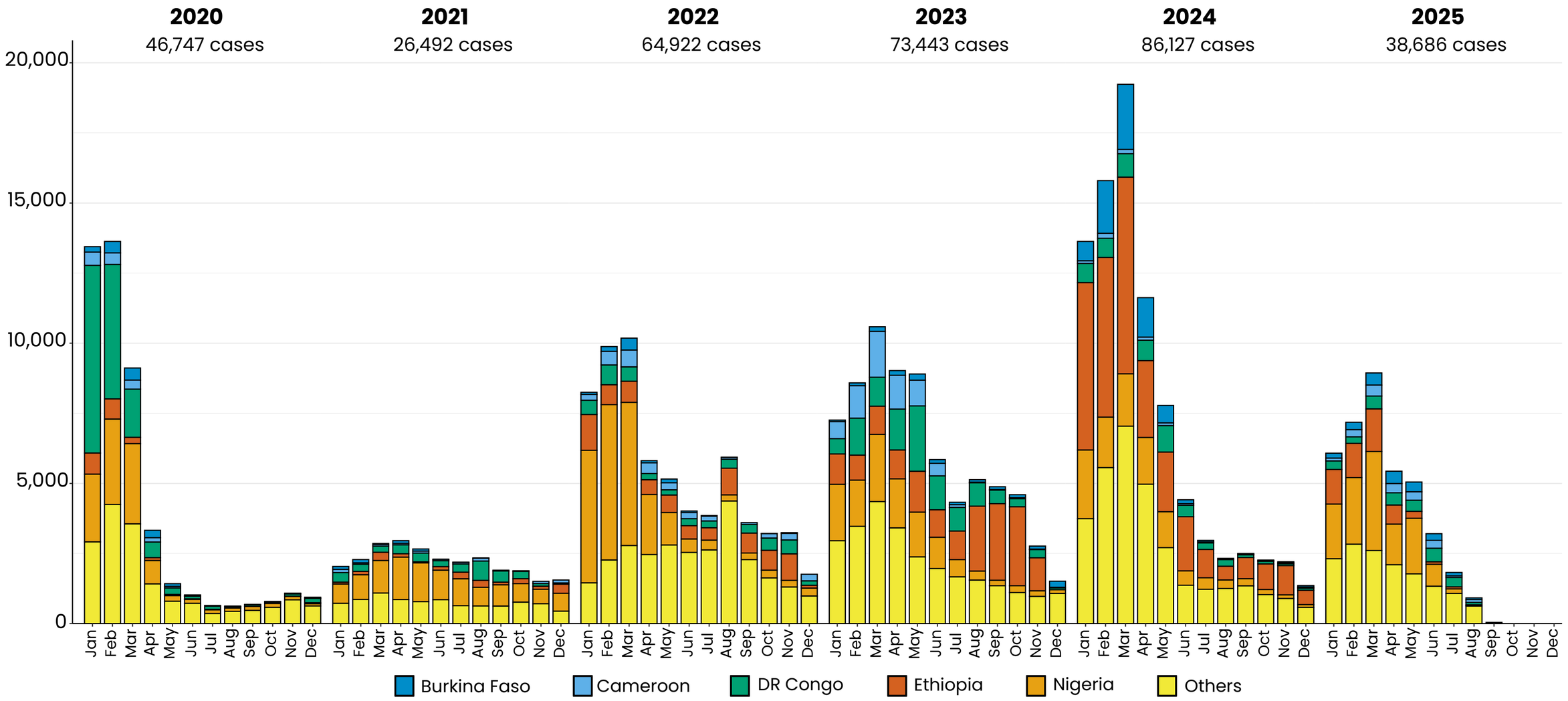
Notes: Based on data received 2025-09 - Surveillance data from 2024-08 to 2025-07 - Target: >= 2 discarded cases* / 100,000 population** - * Suspected cases investigated and discarded as non-measles non-rubella using laboratory testing and/or epidemiological linkage to another etiology ** World population 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 different 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.

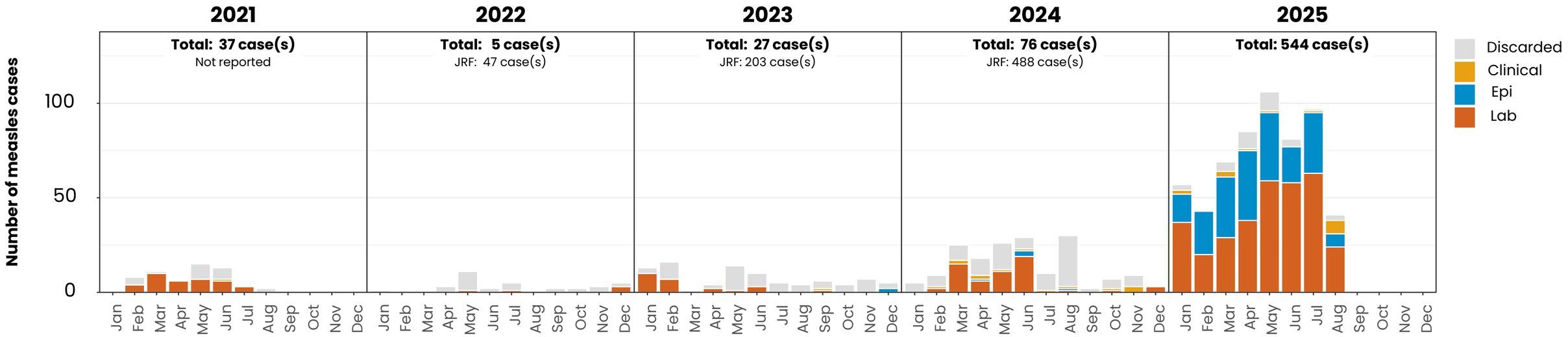
Measles case distribution (AFR), 2020-2025

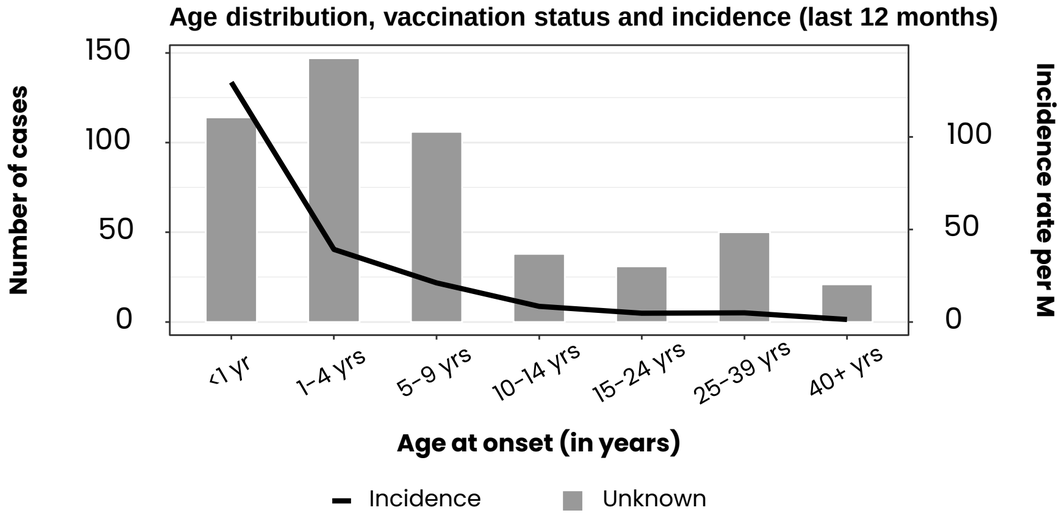


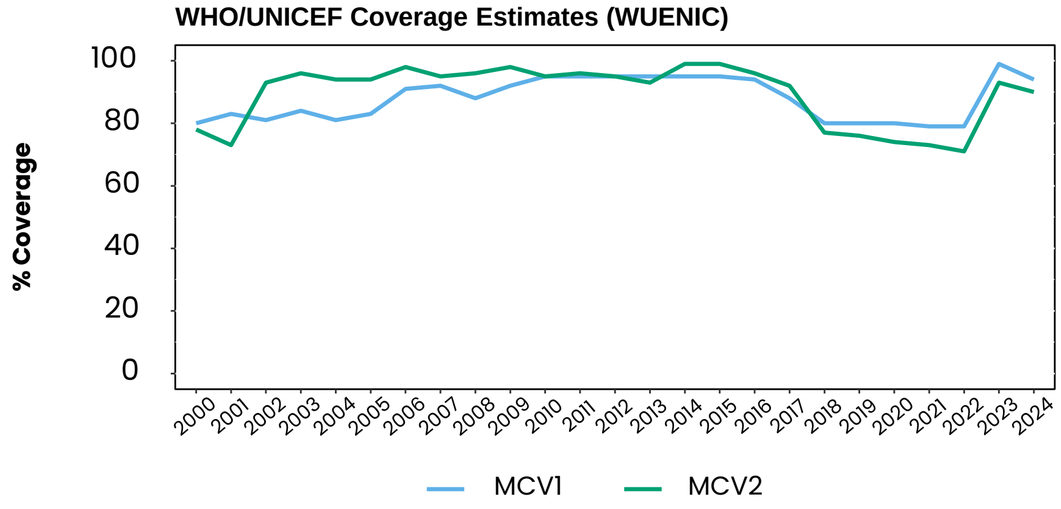
Based on data received 2025-09 - Data Source: IVB Database

Measles cases: Algeria

ELIMINATION STATUS: **ENDEMIC**



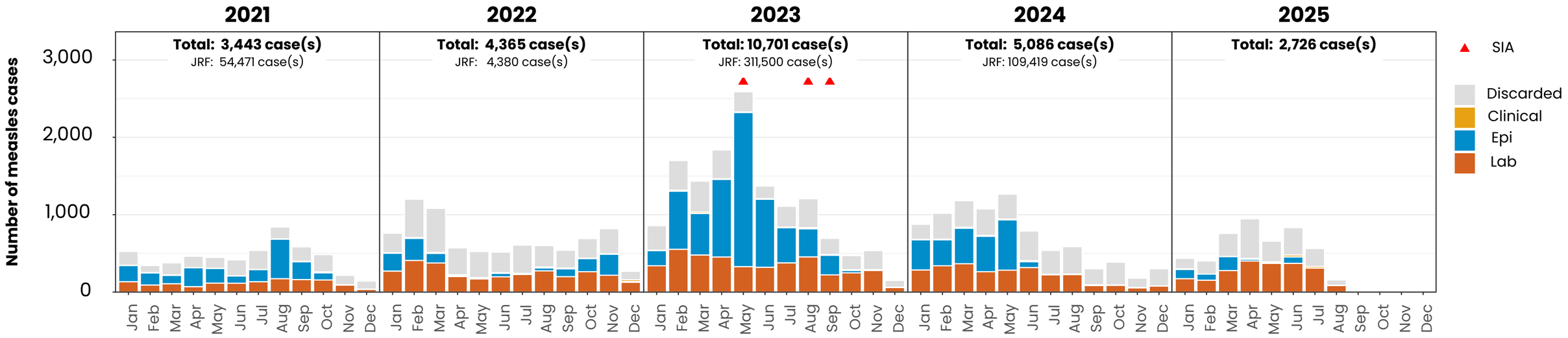


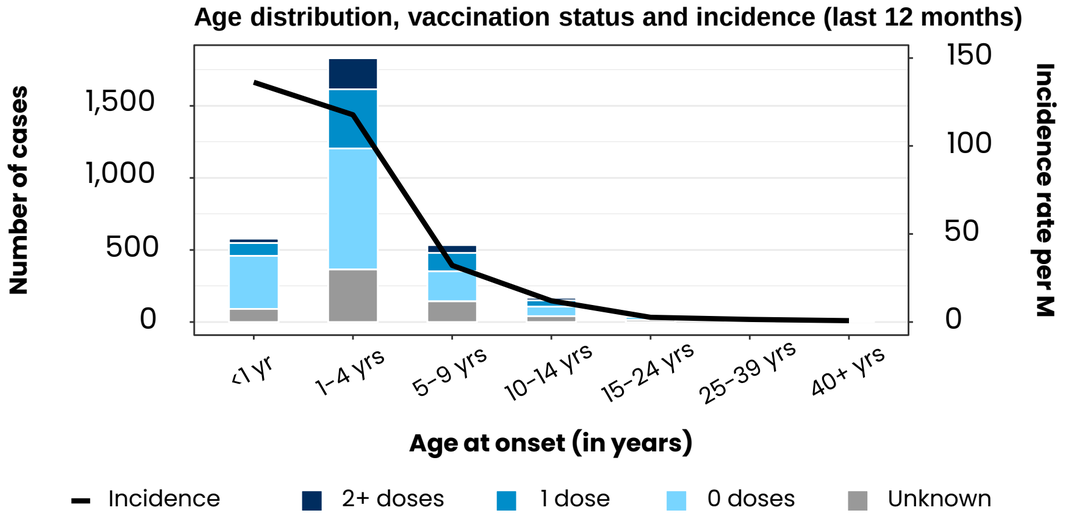


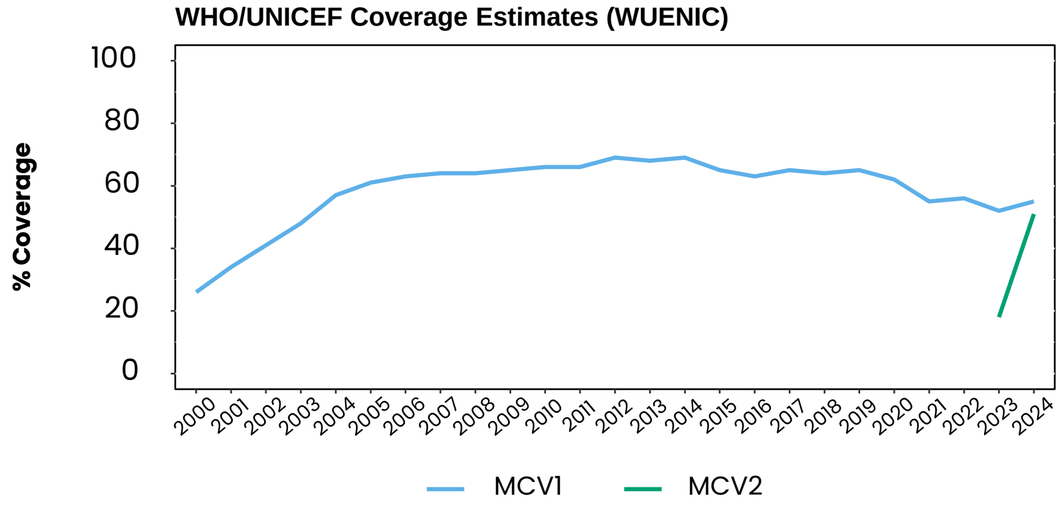
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Democratic Republic of the Congo

ELIMINATION STATUS: **ENDEMIC**



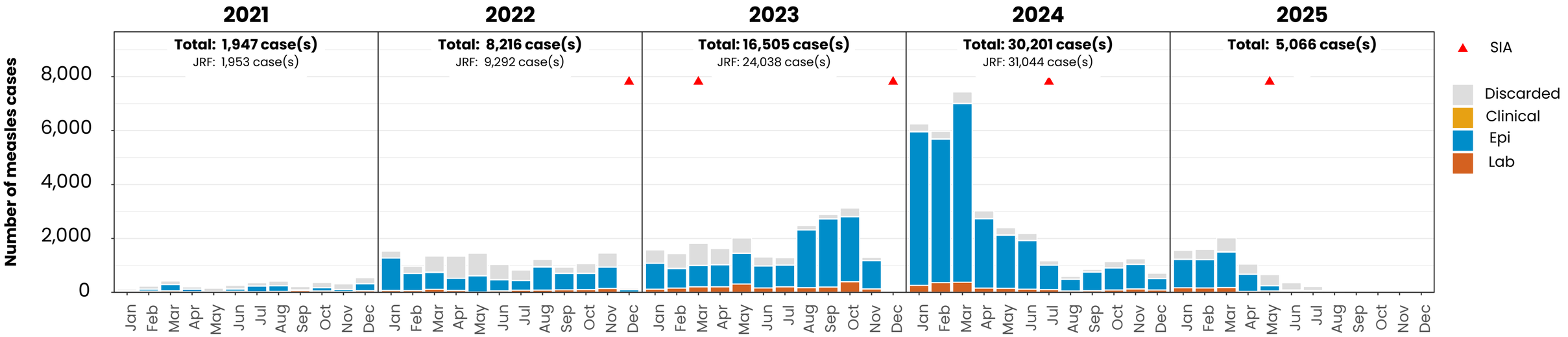


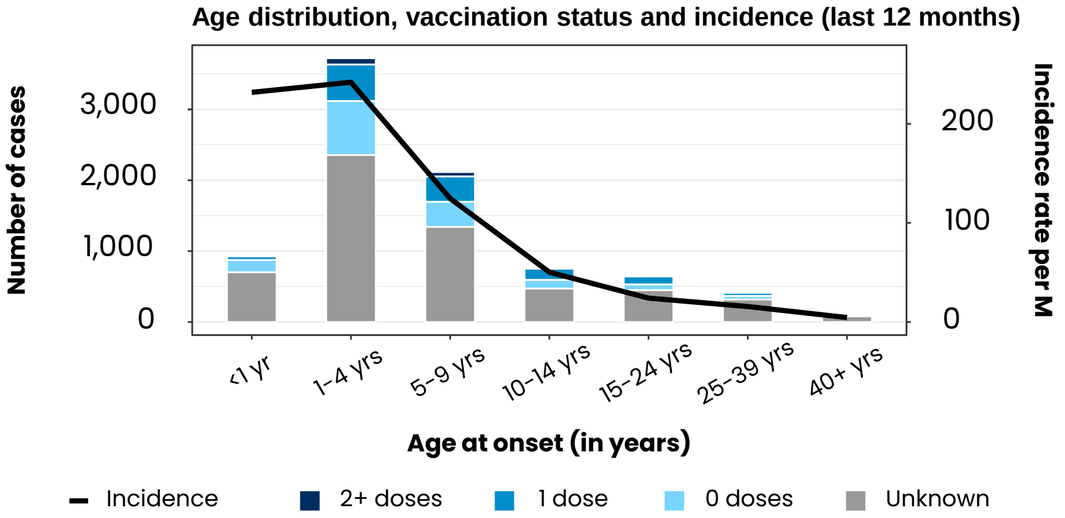


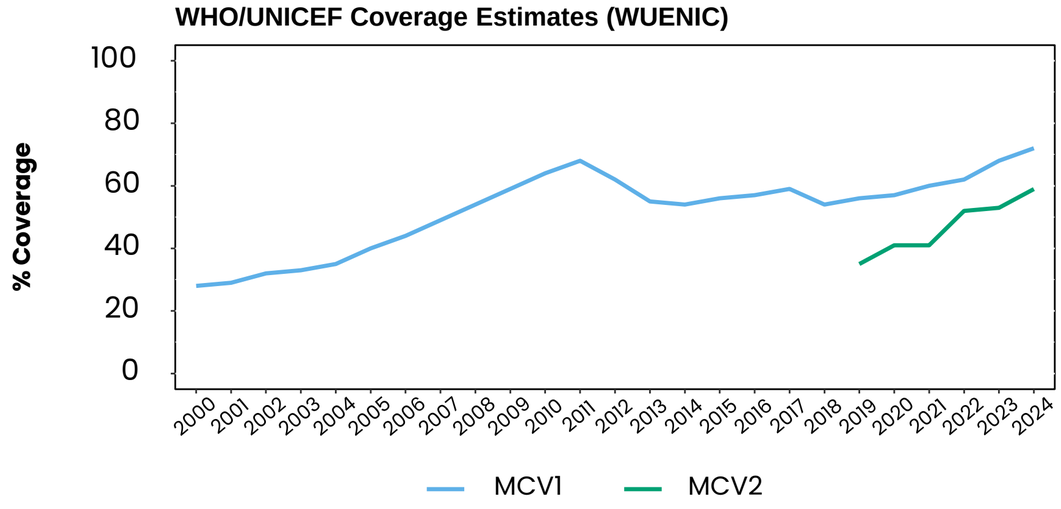
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Ethiopia

ELIMINATION STATUS: **ENDEMIC**







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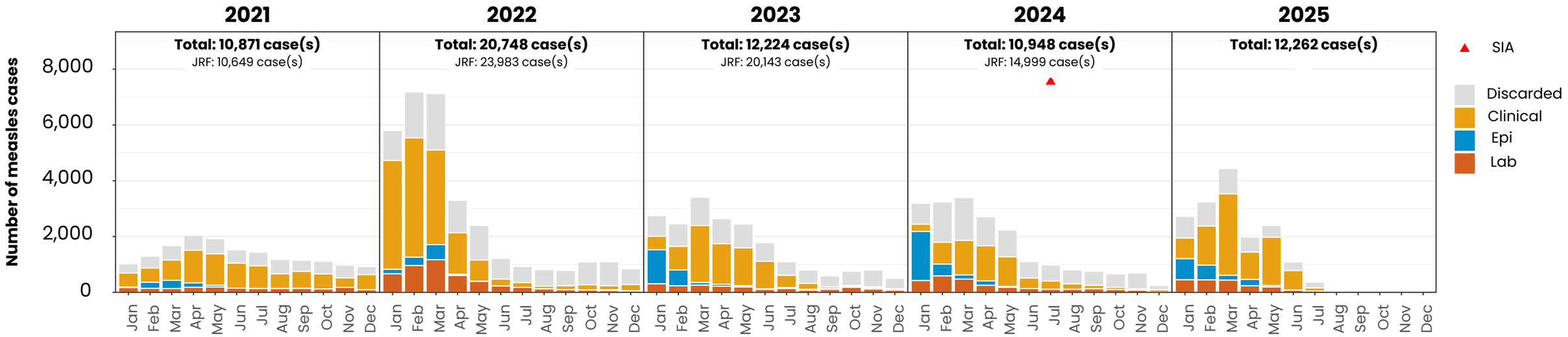
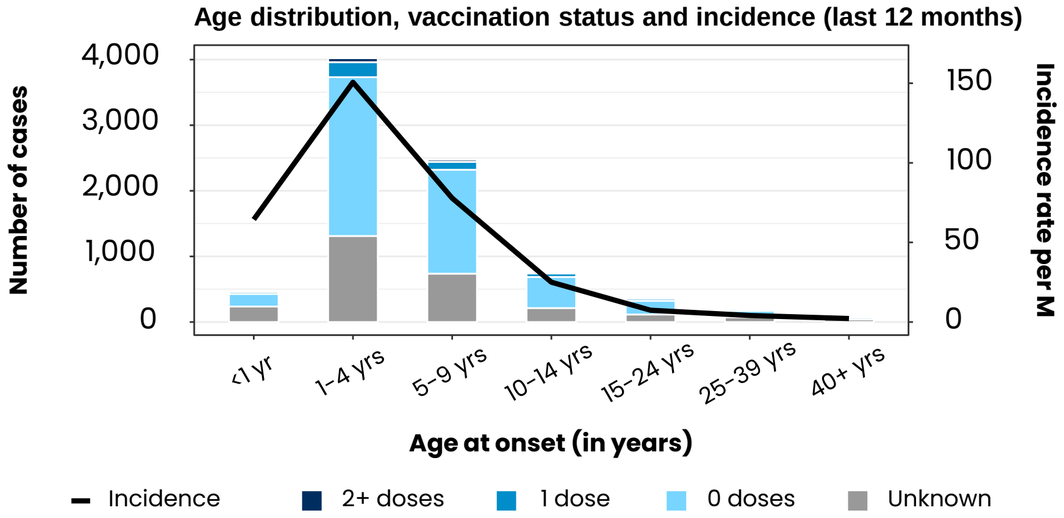
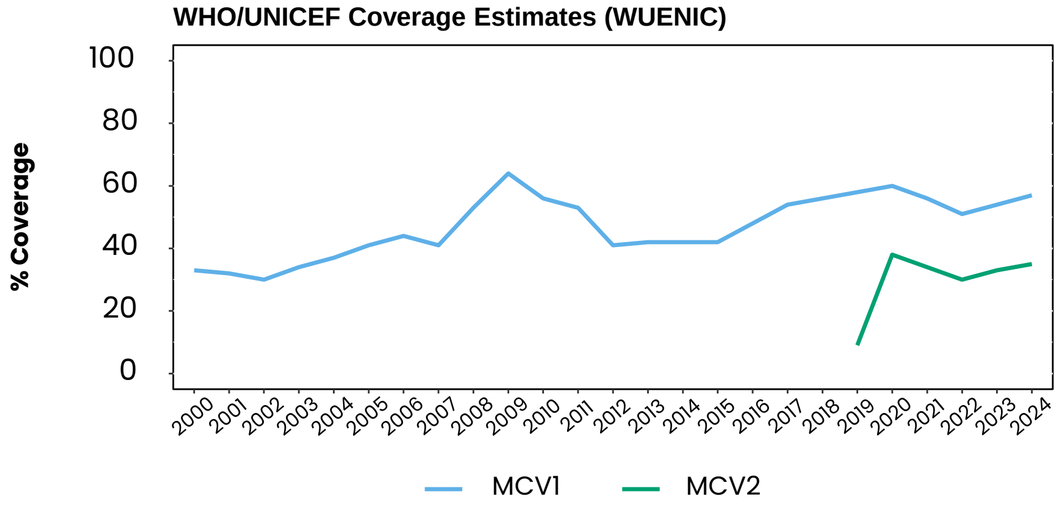
Measles cases: Nigeria

ELIMINATION STATUS: **ENDEMIC**

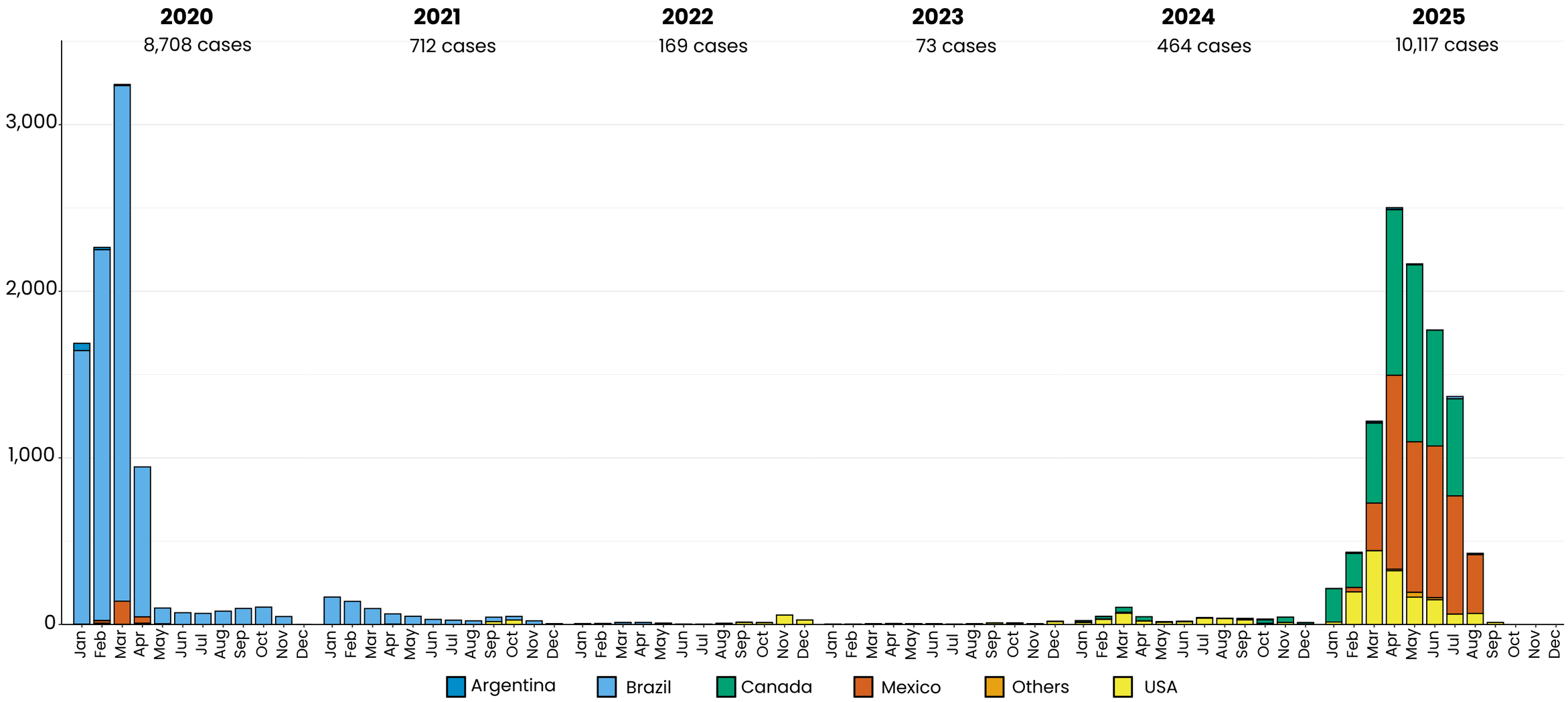






Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

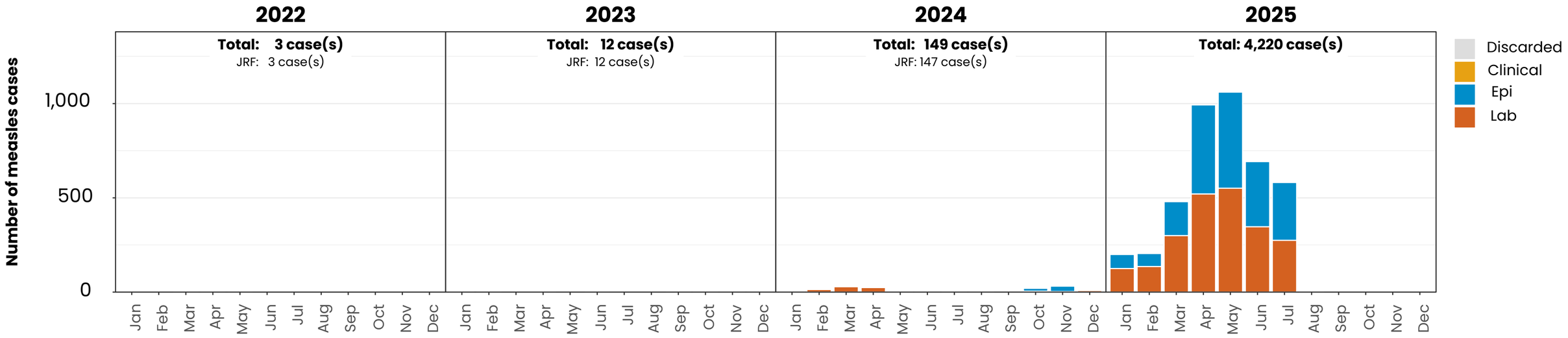
Measles case distribution (AMR), 2020–2025

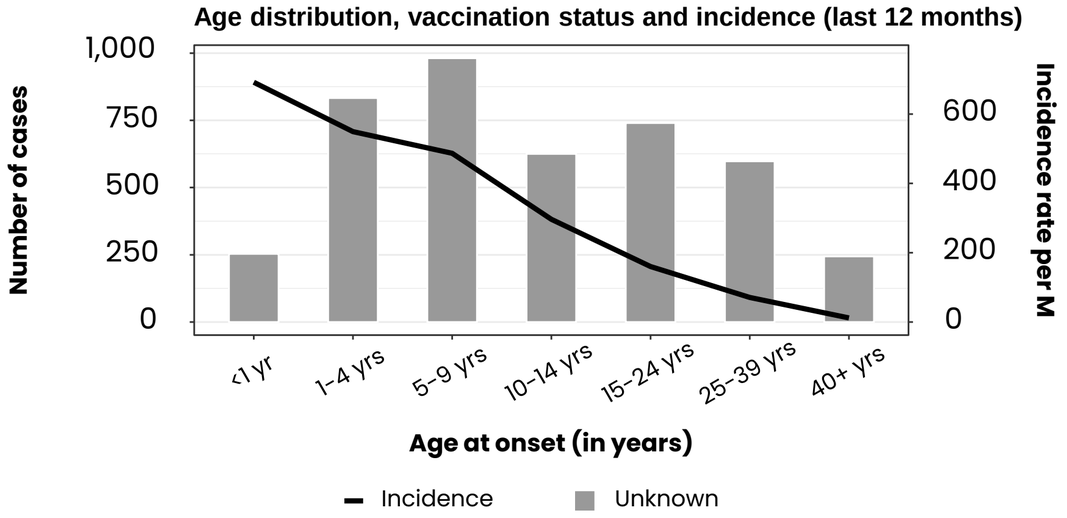


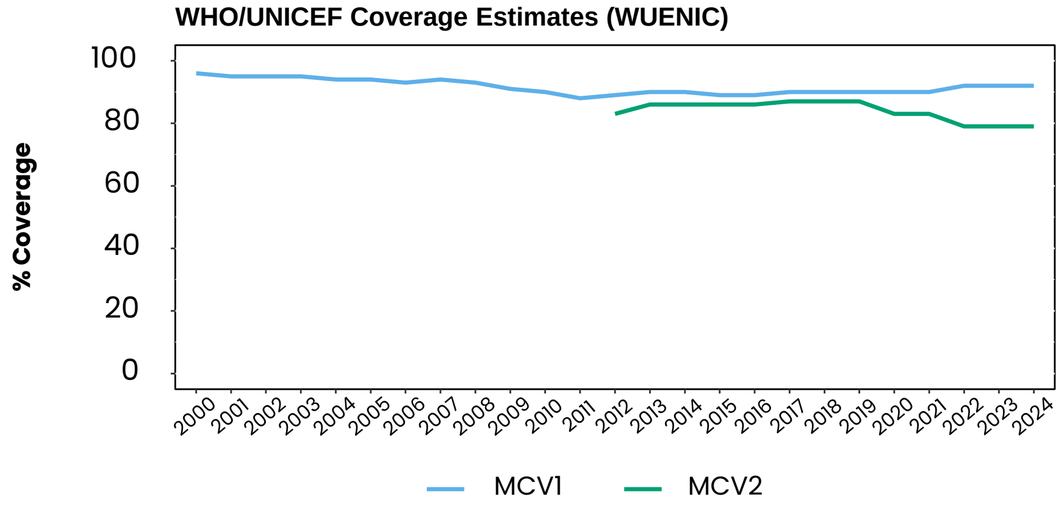
Based on data received 2025-09 - Data Source: IVB Database

Measles cases: Canada

ELIMINATION STATUS: **VERIFIED**



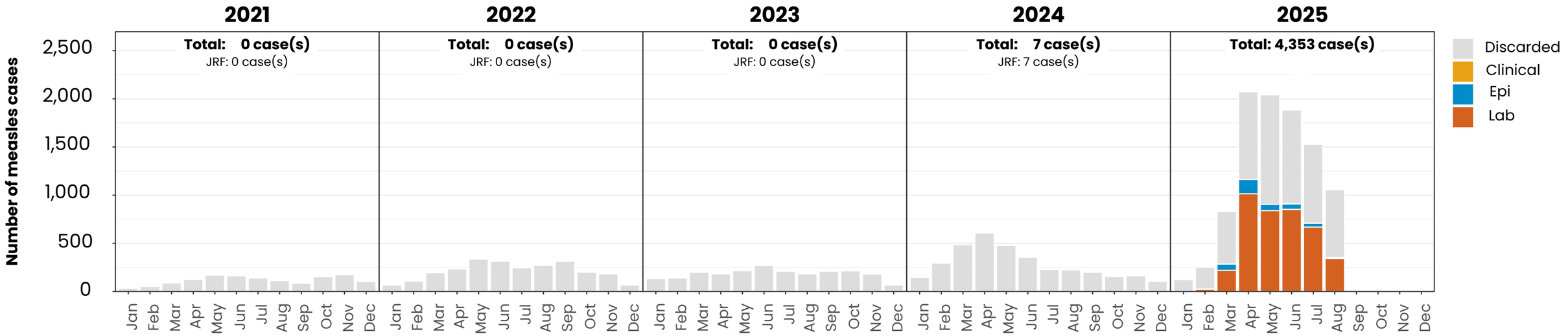


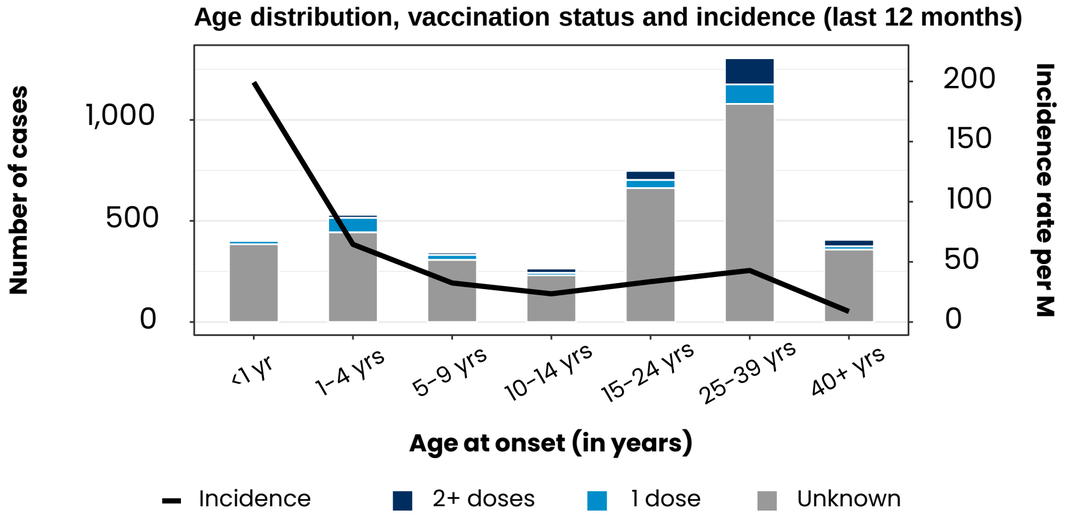


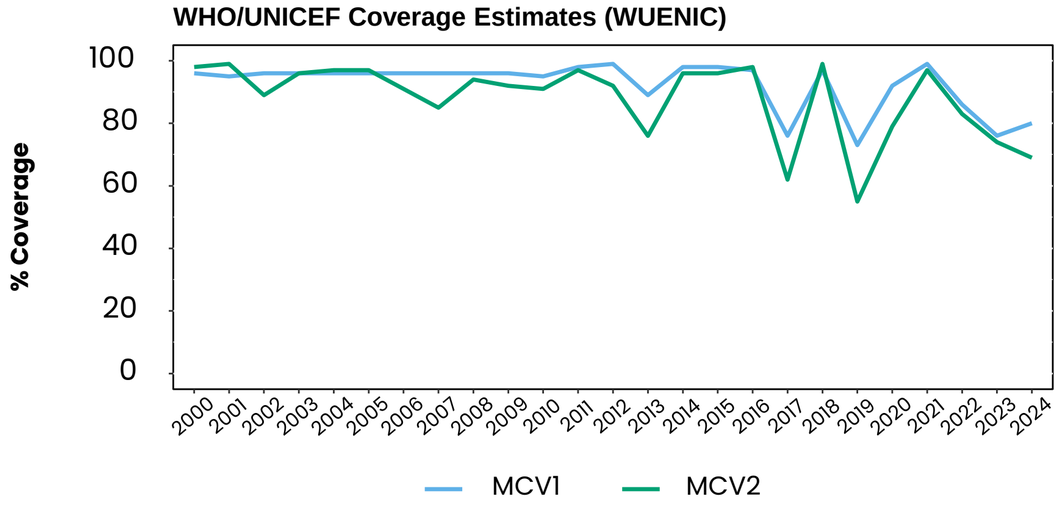
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Mexico

ELIMINATION STATUS: **VERIFIED**



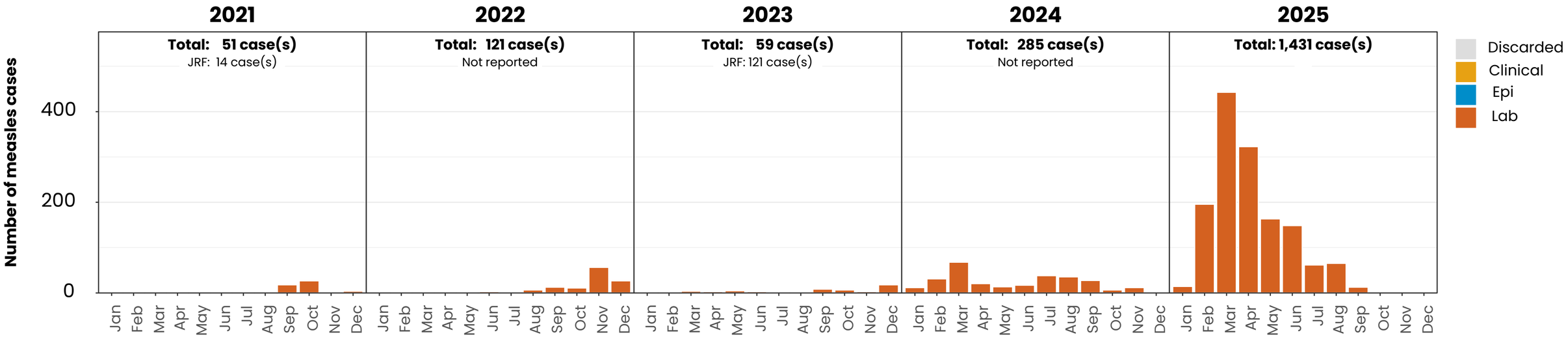




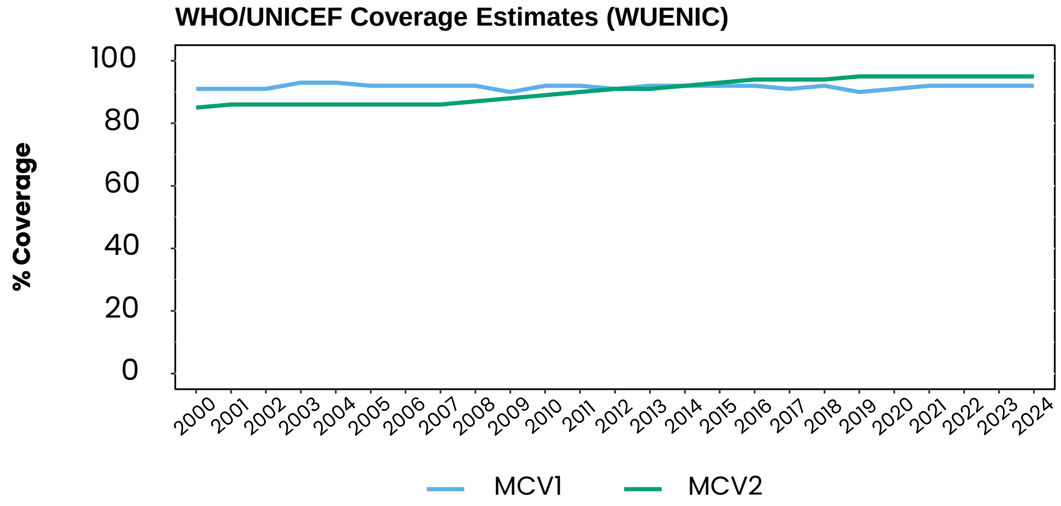
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: United States of America

ELIMINATION STATUS: **VERIFIED**

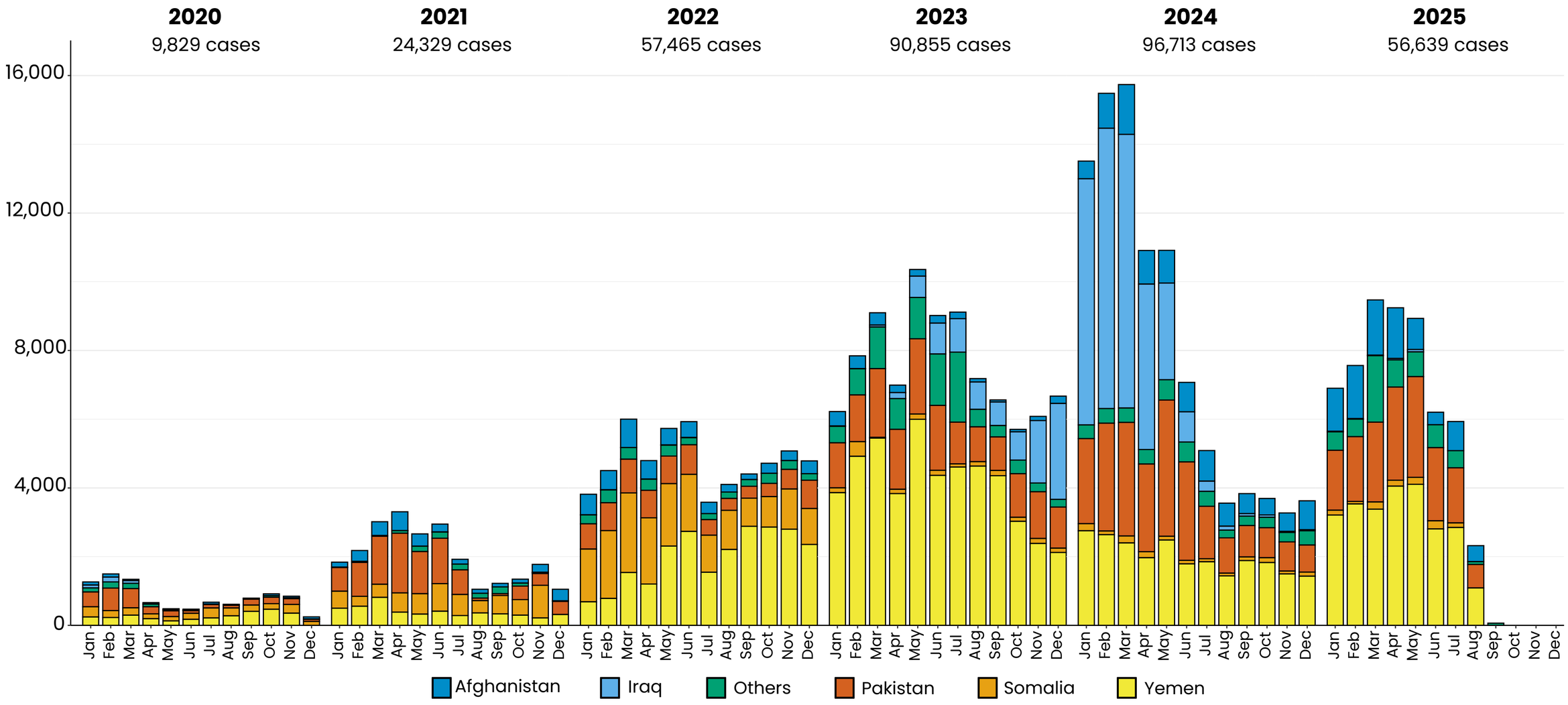


No data available or no case reported in the last 12 months



Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using aggregate surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

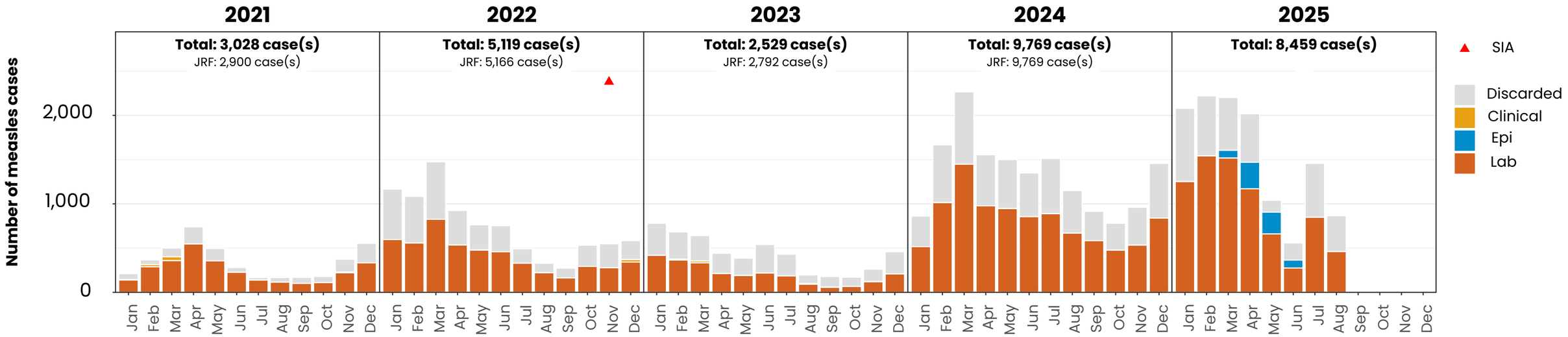
Measles case distribution (EMR), 2020-2025

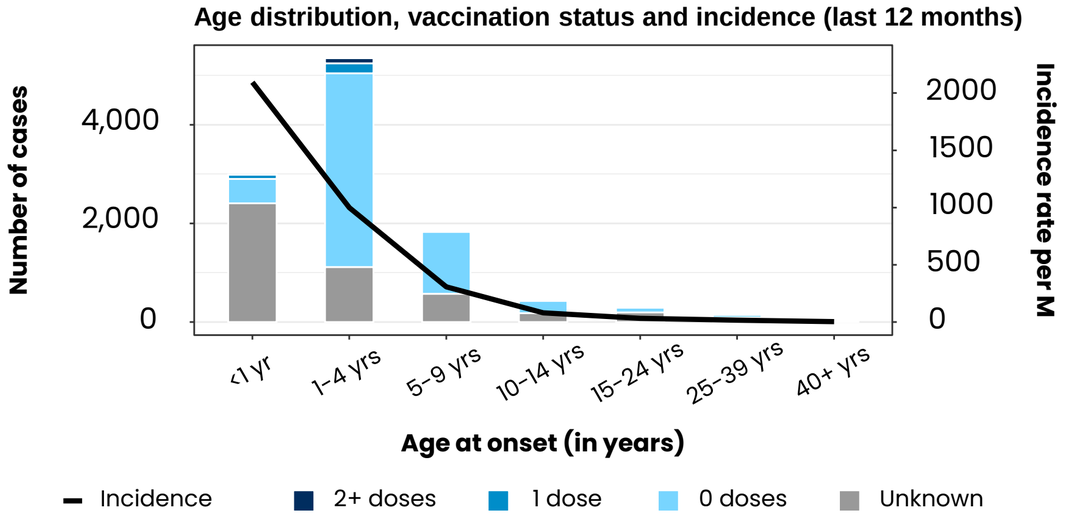


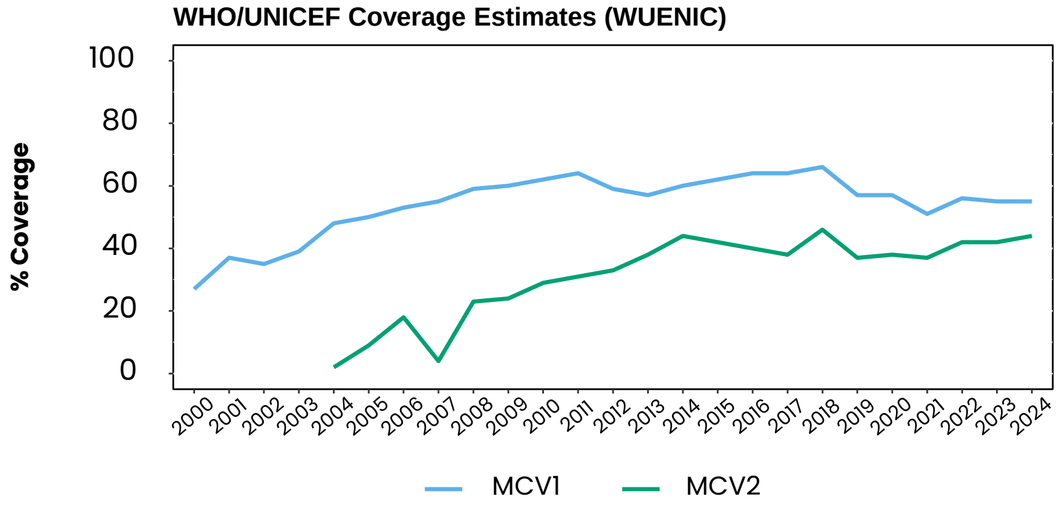
Based on data received 2025-09 - Data Source: IVB Database

Measles cases: Afghanistan

ELIMINATION STATUS: **ENDEMIC**



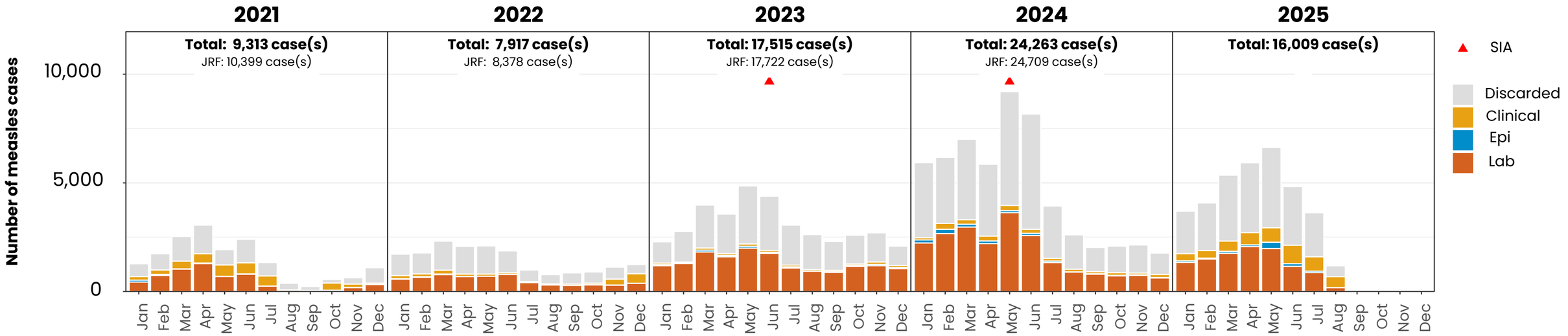


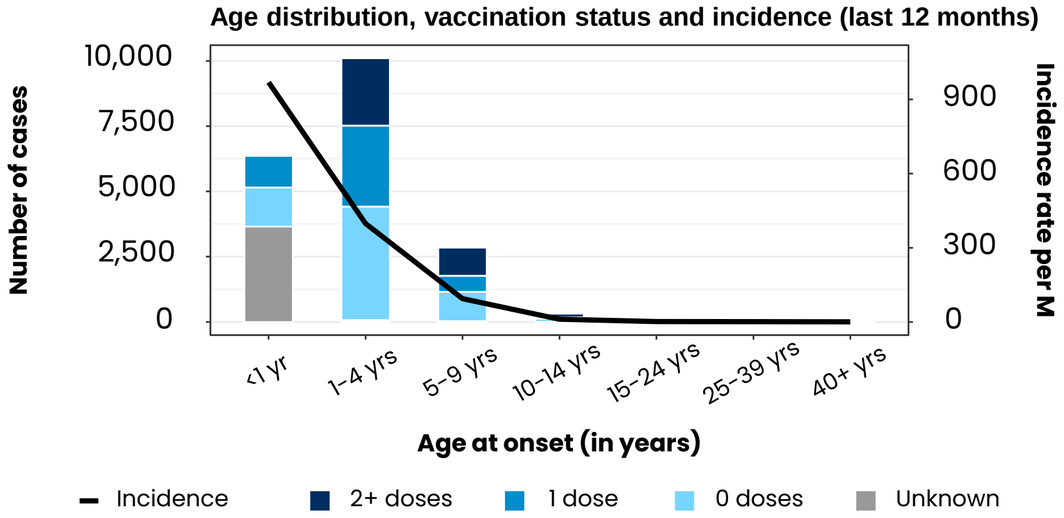


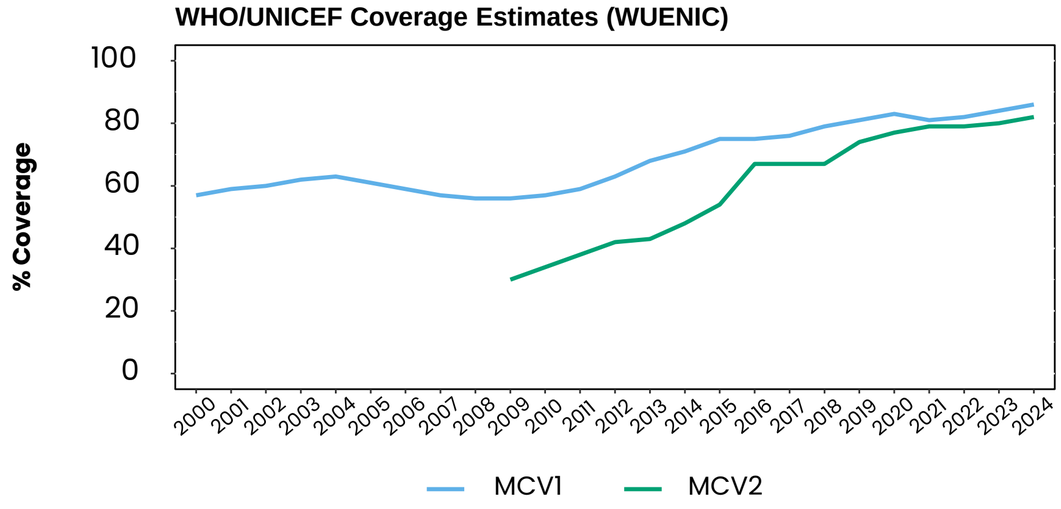
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Pakistan

ELIMINATION STATUS: **ENDEMIC**

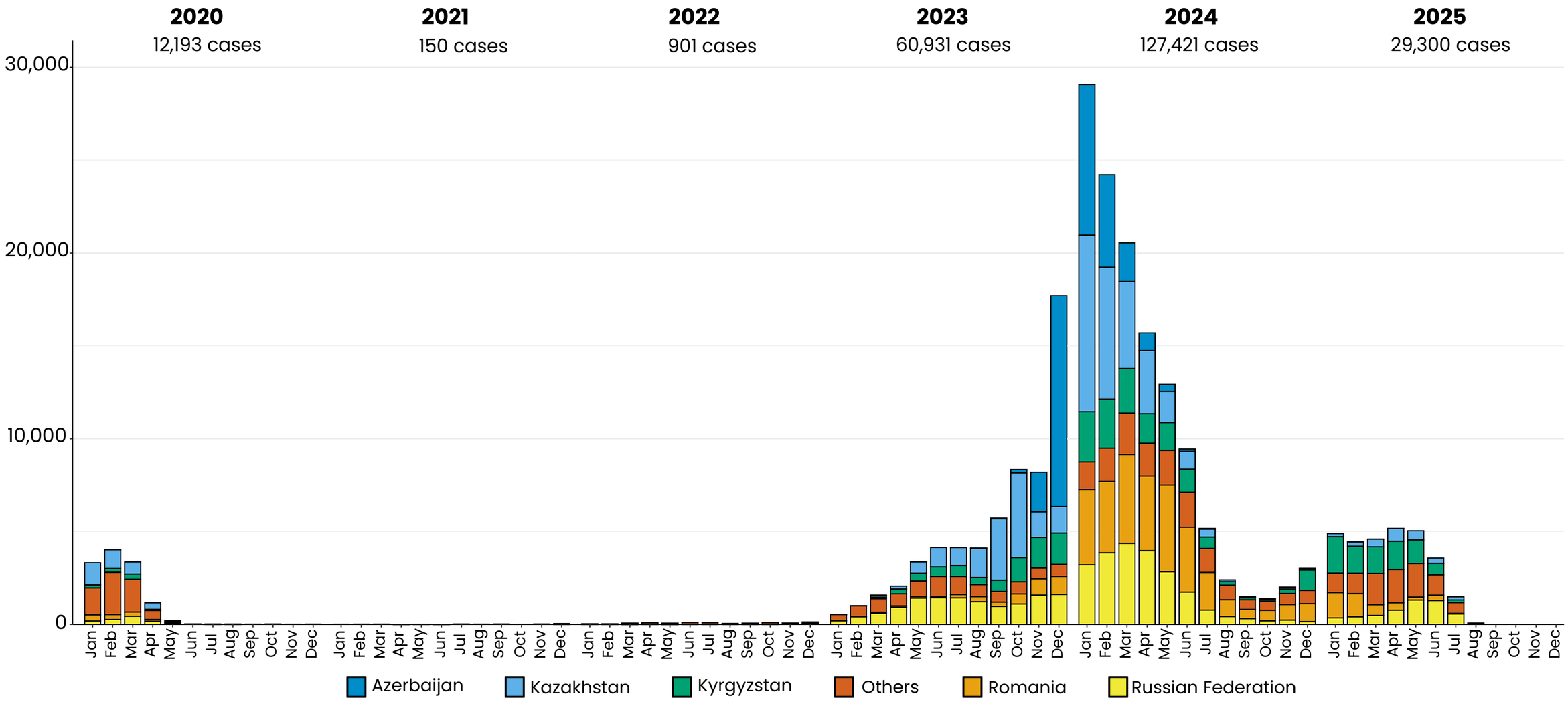






Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

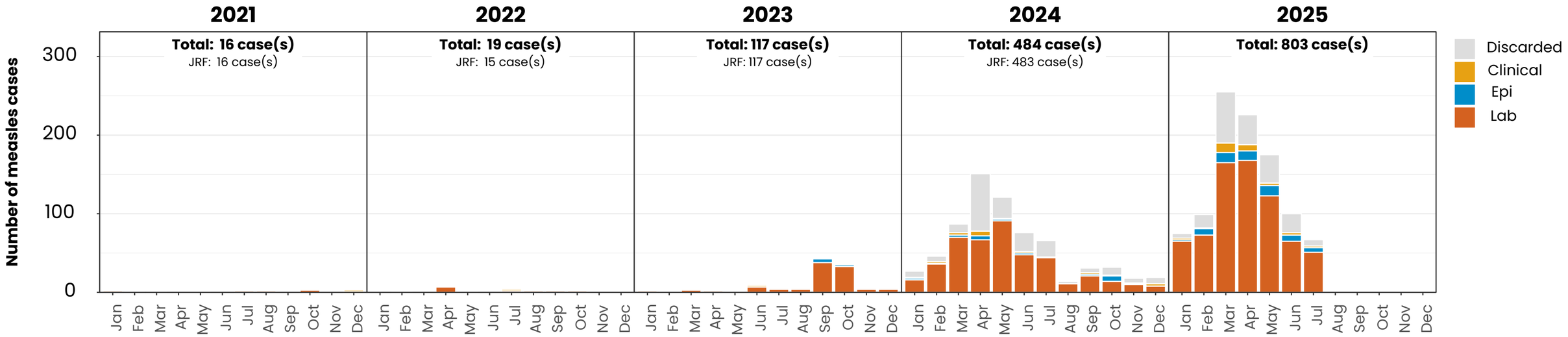
Measles case distribution (EUR), 2020-2025

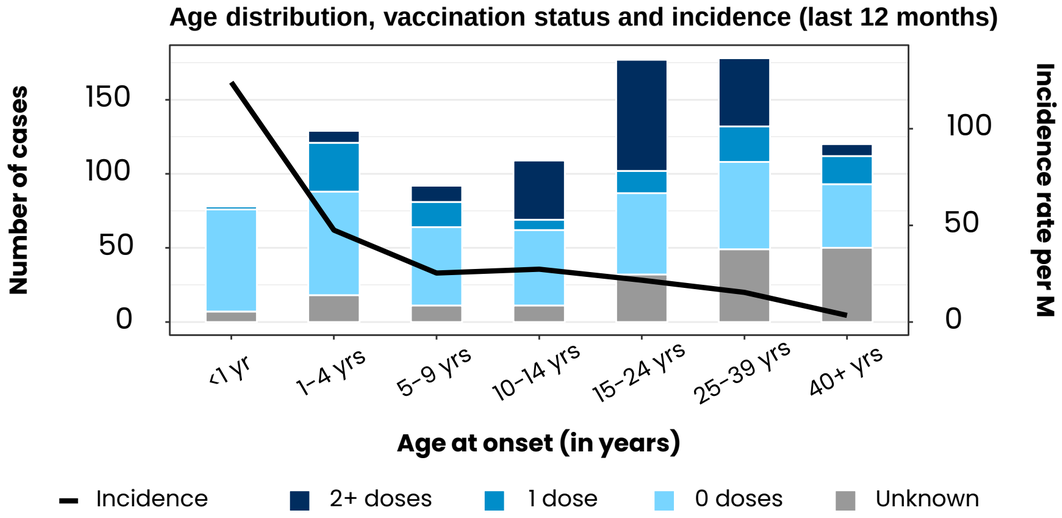


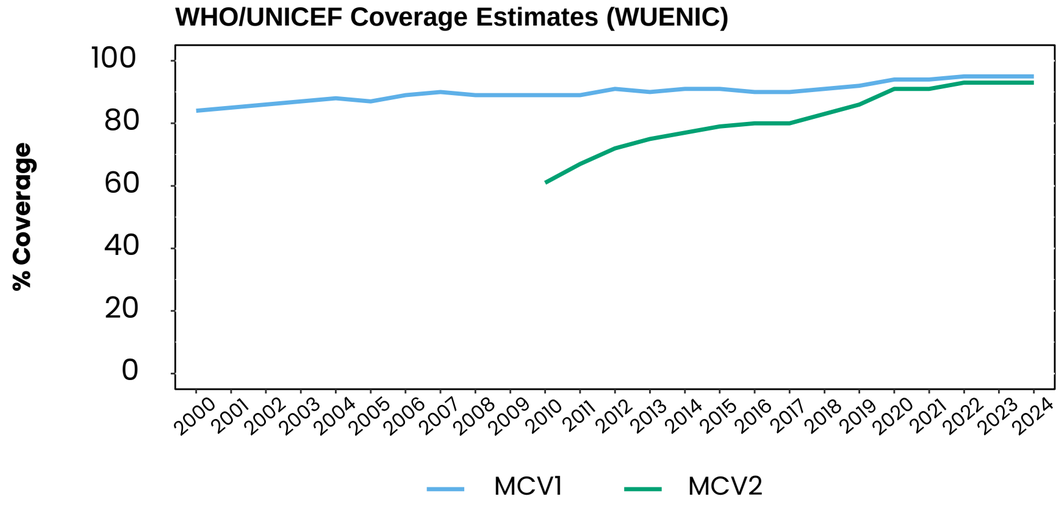
Based on data received 2025-09 - Data Source: IVB Database

Measles cases: France

ELIMINATION STATUS: **ELIMINATED**



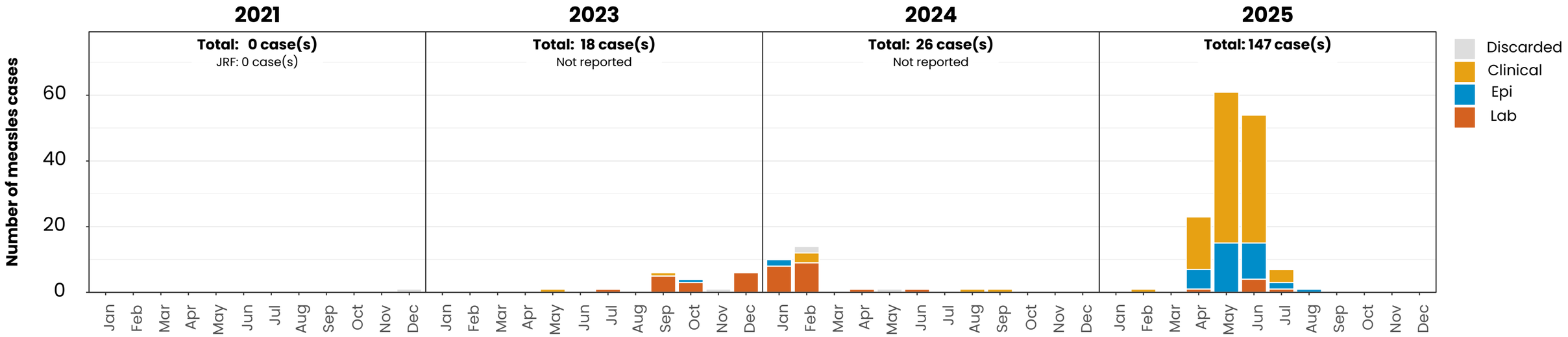


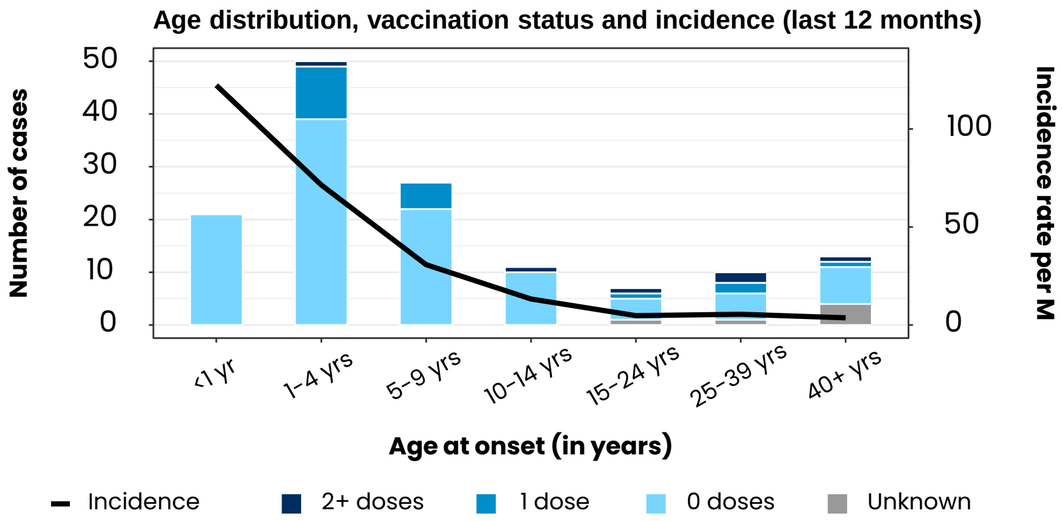


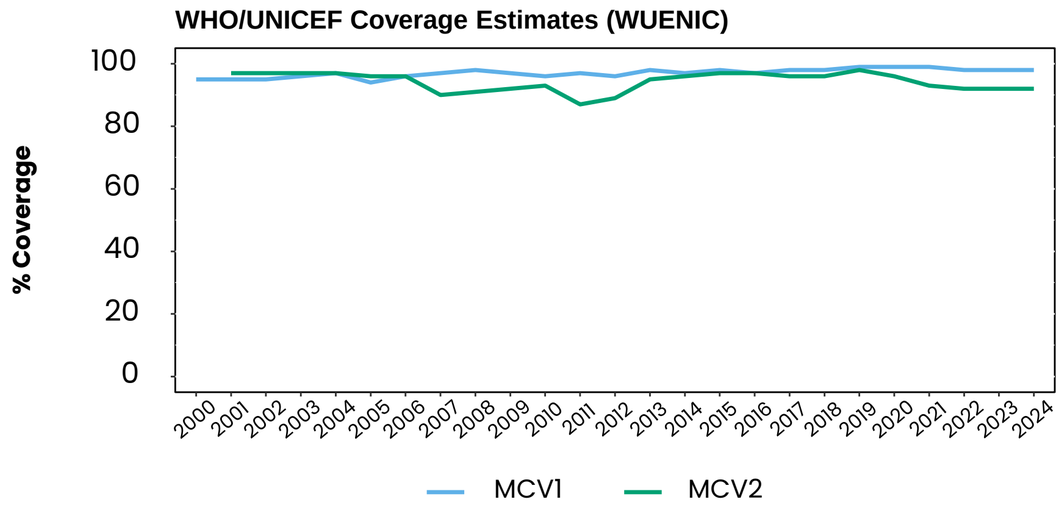
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Israel

ELIMINATION STATUS: **ELIMINATED**



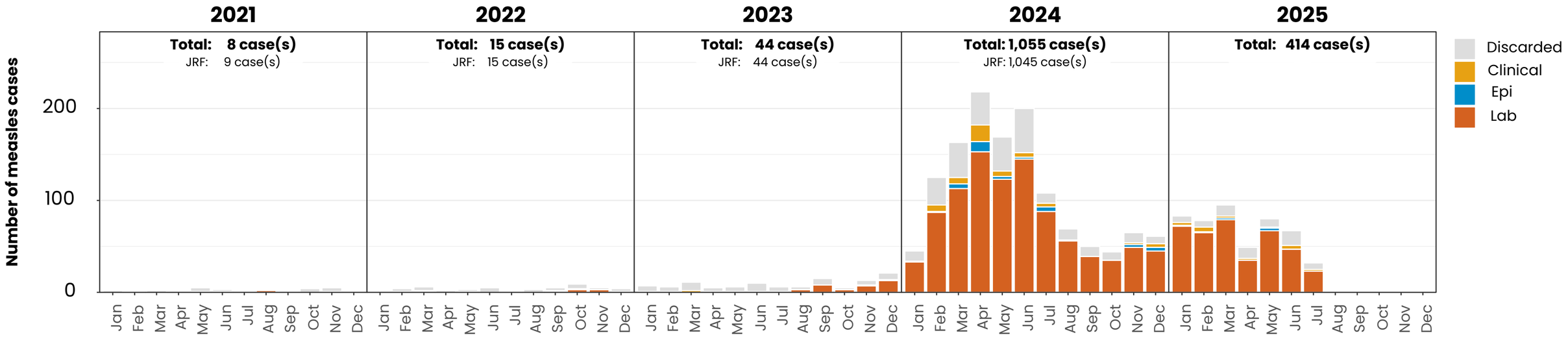


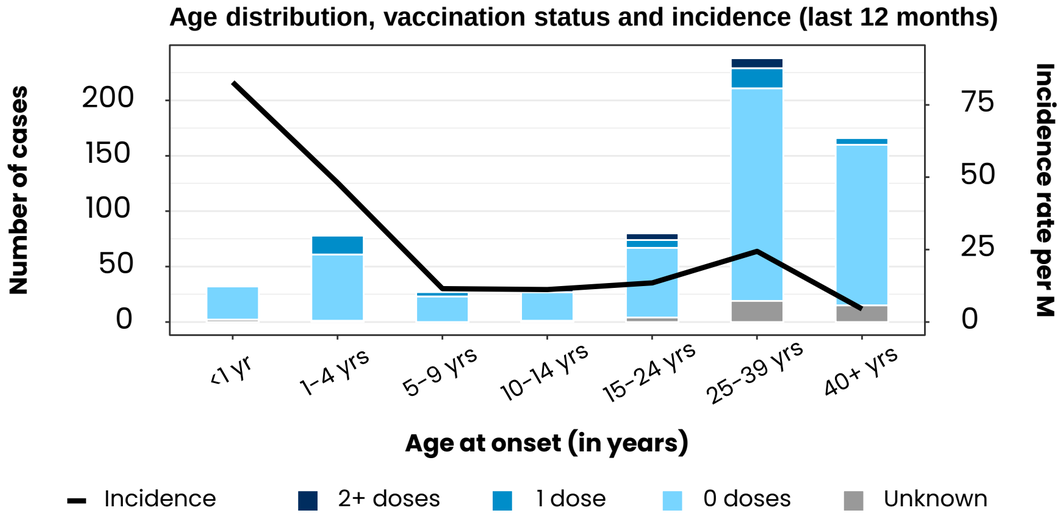


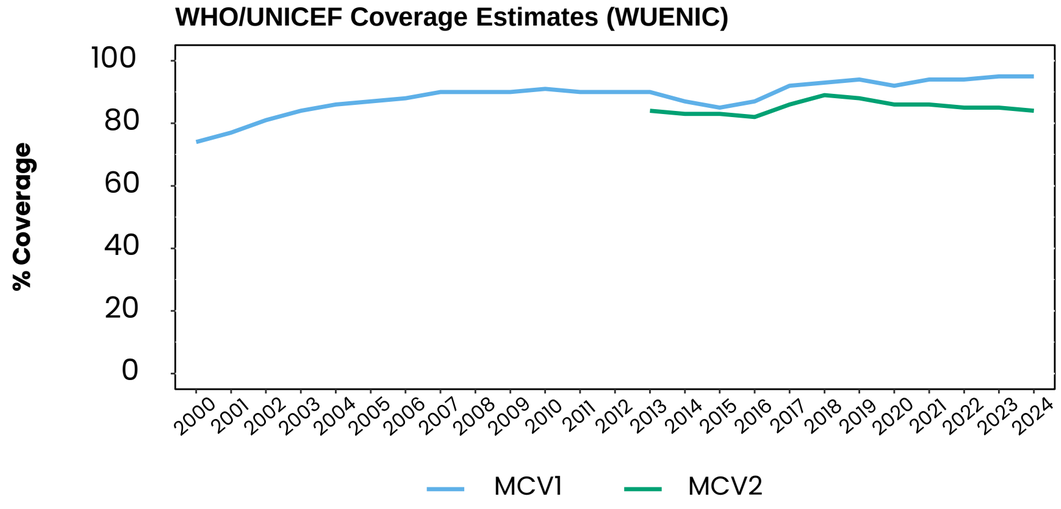
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Italy

ELIMINATION STATUS: **ELIMINATED**



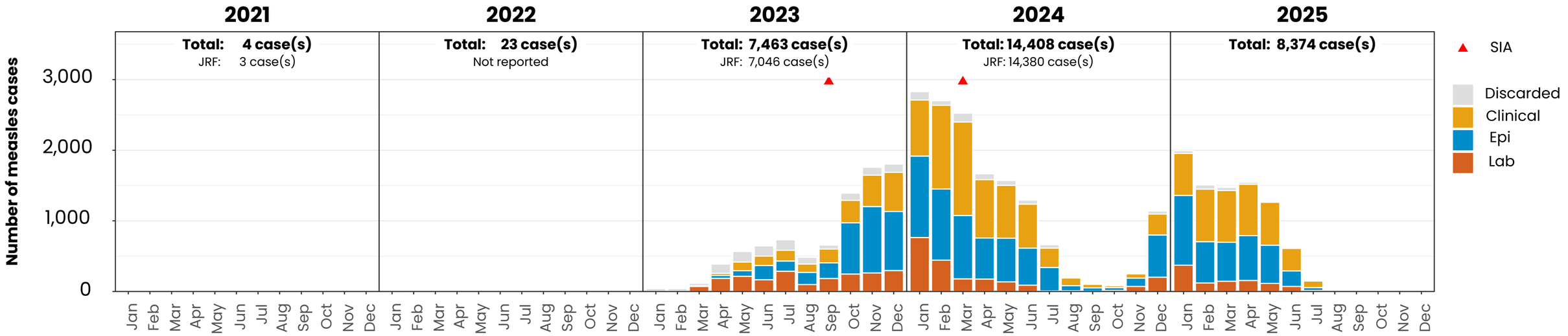


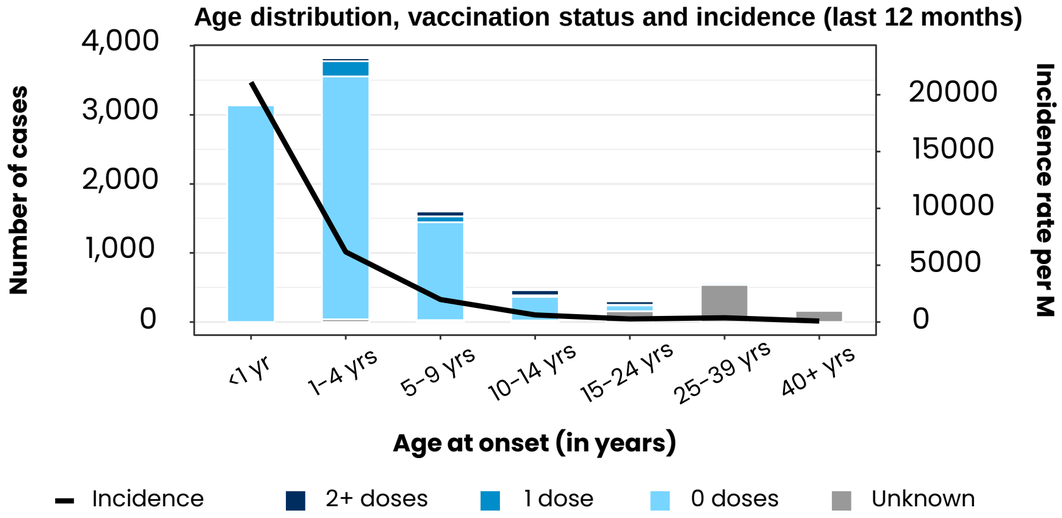


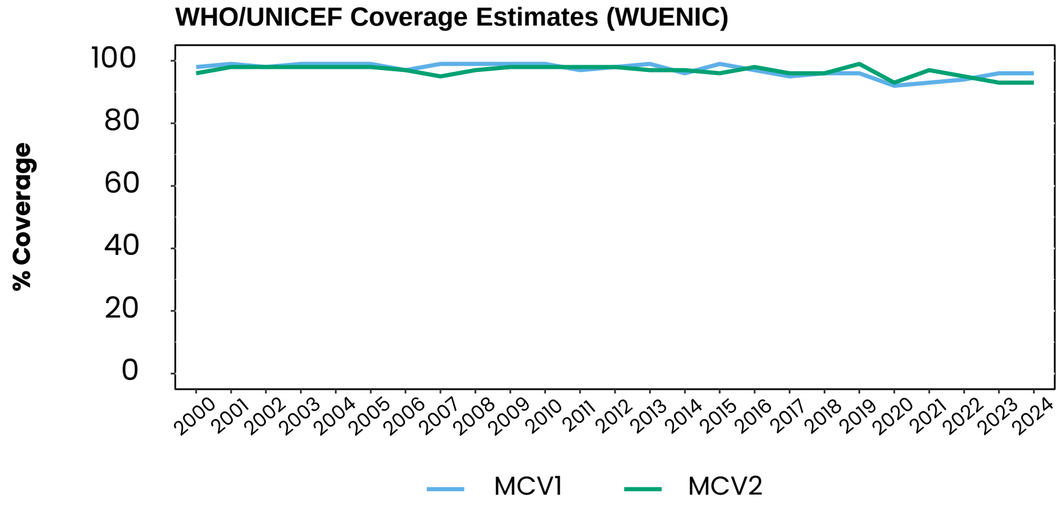
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Kyrgyzstan

ELIMINATION STATUS: **ENDEMIC**



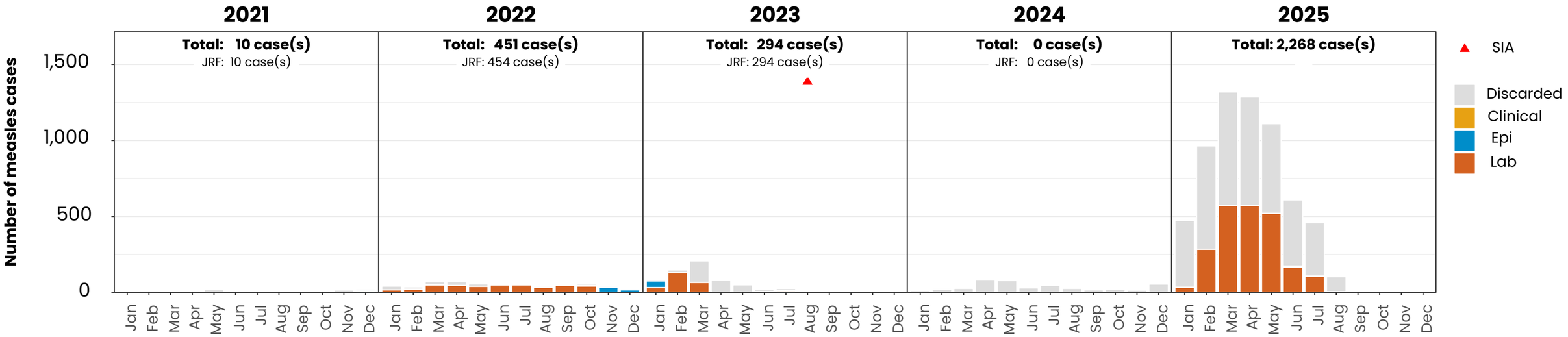


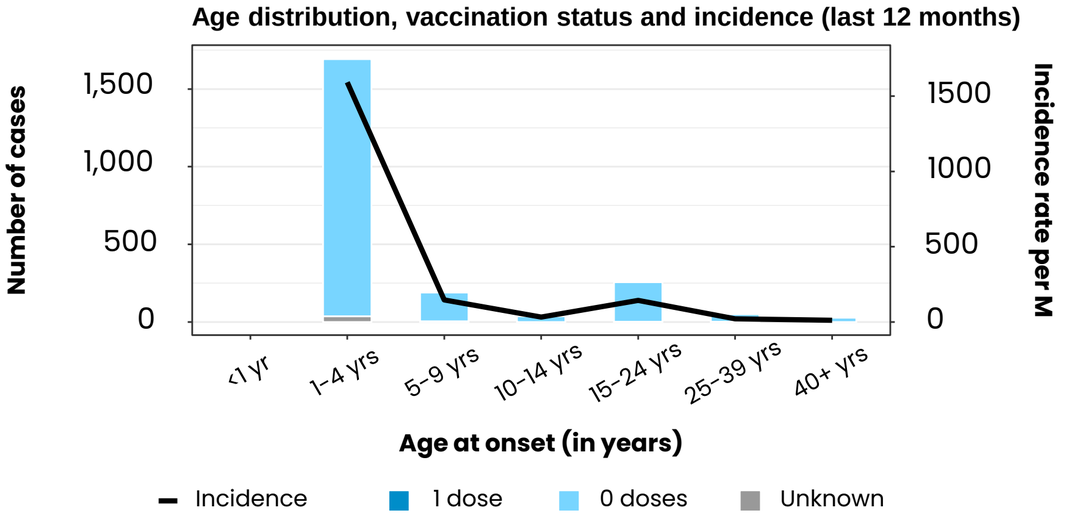


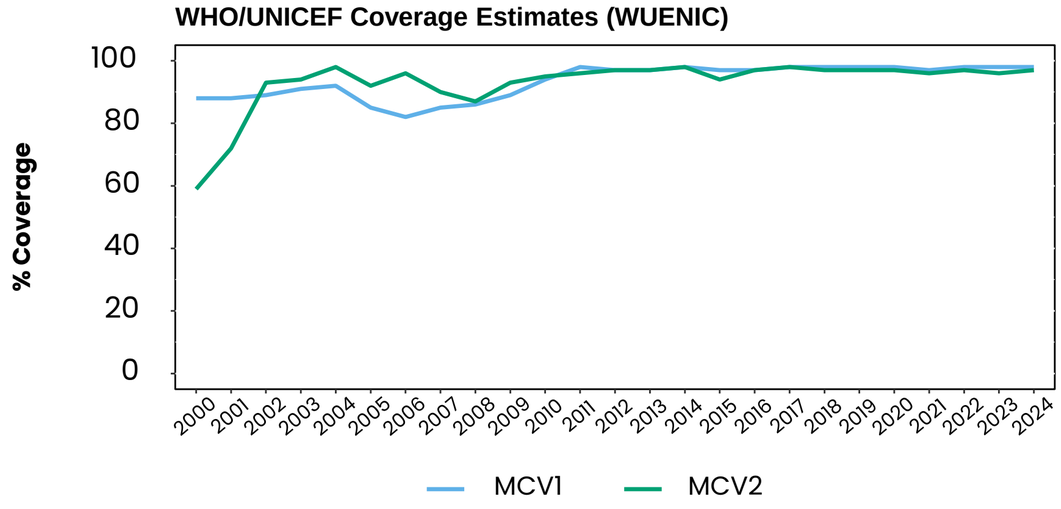
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Tajikistan

ELIMINATION STATUS: **RE-ESTABLISHED**



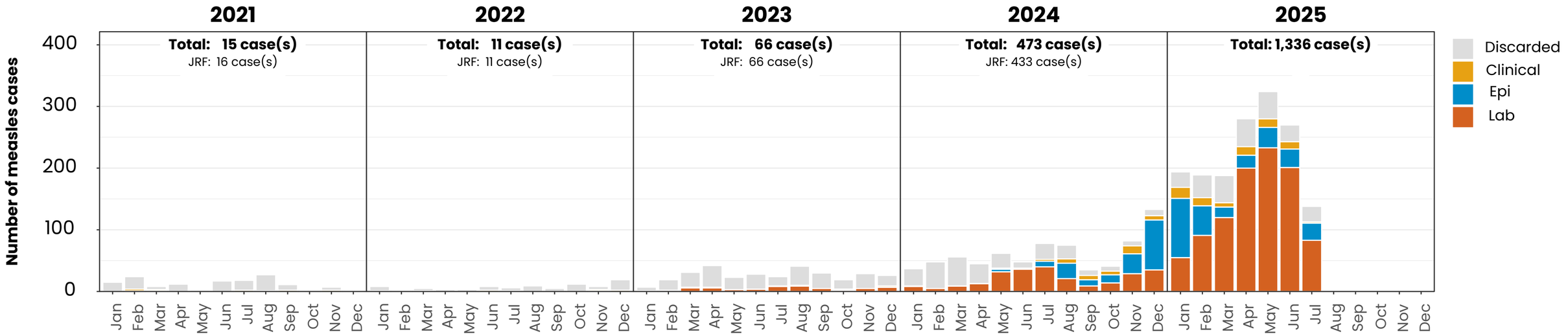


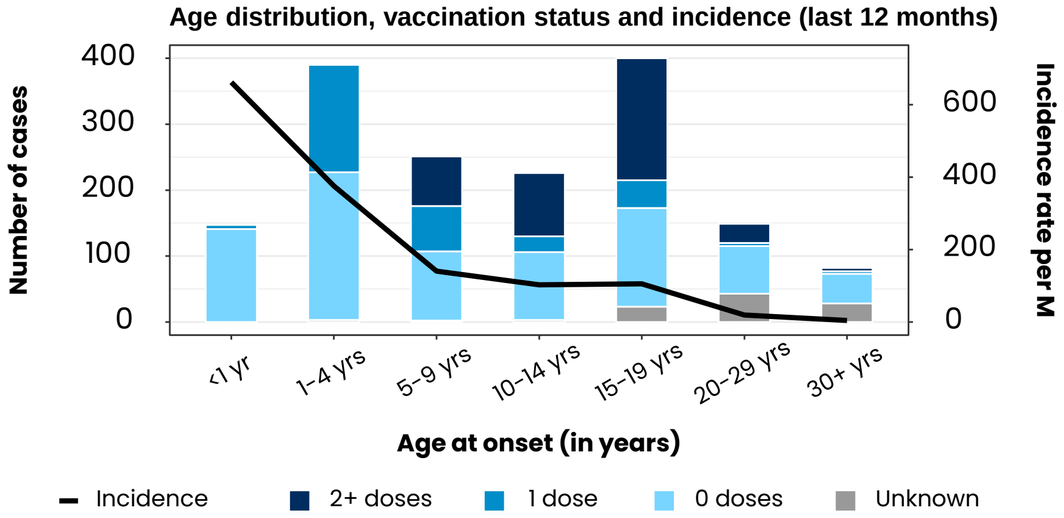


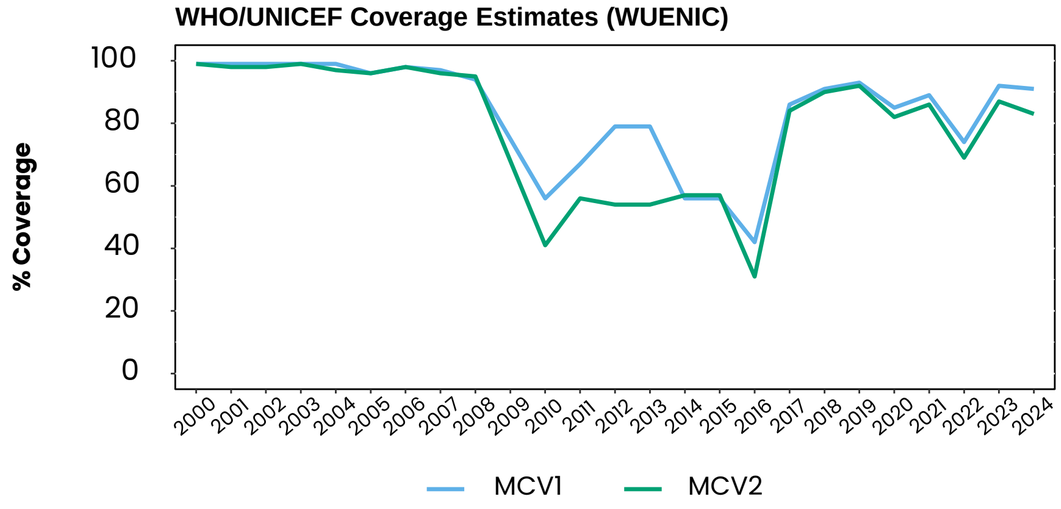
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Ukraine

ELIMINATION STATUS: **ENDEMIC**

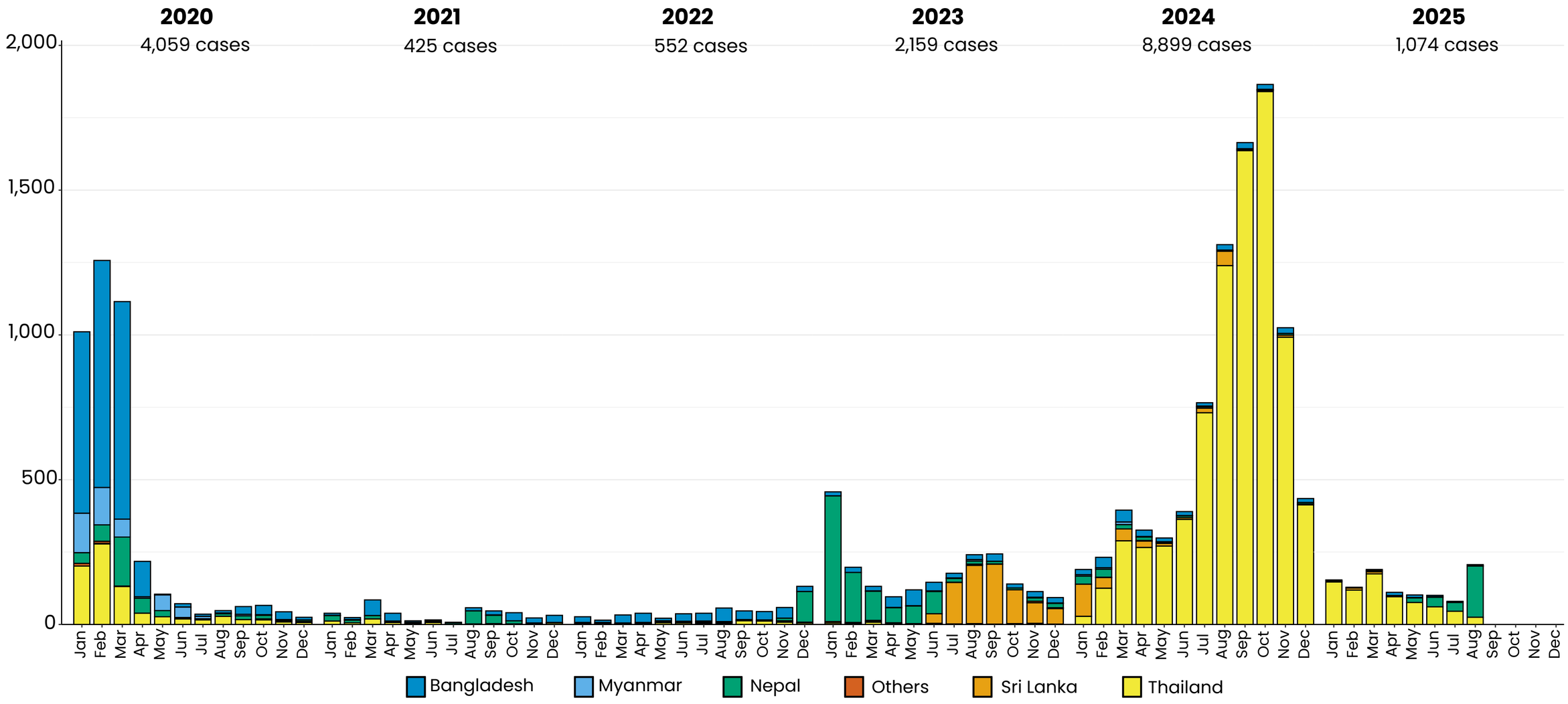






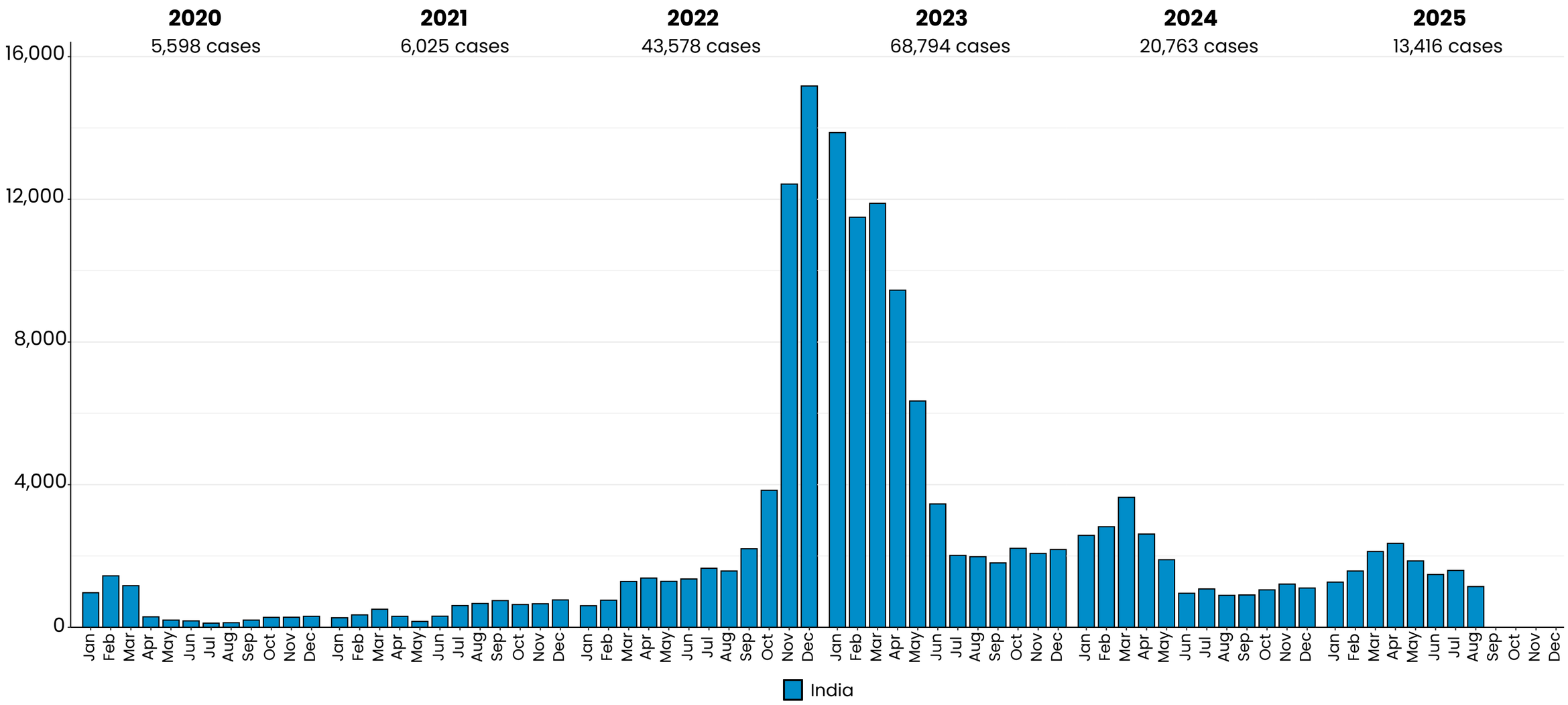
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

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



Based on data received 2025-09 - Data Source: IVB Database

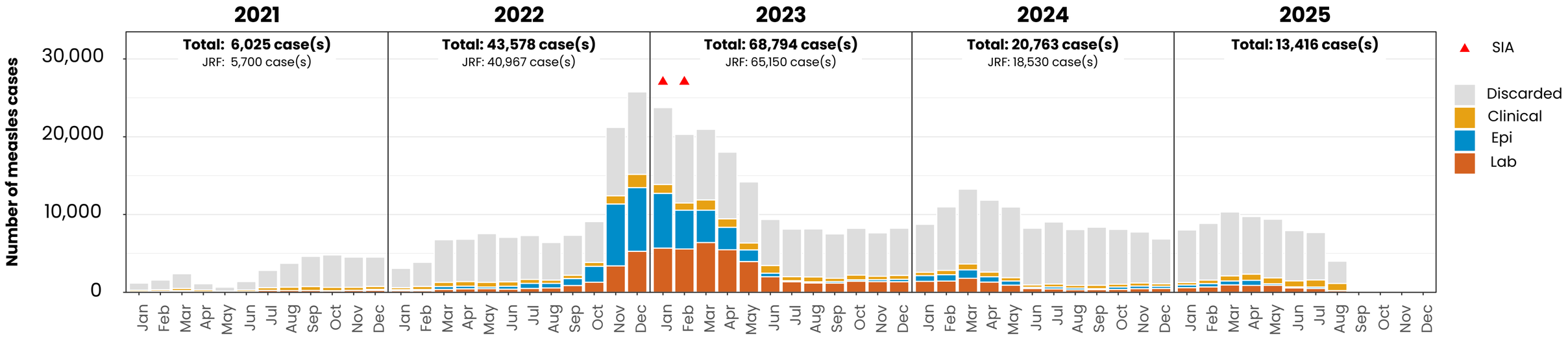
Measles case distribution (SEAR, India), 2020-2025

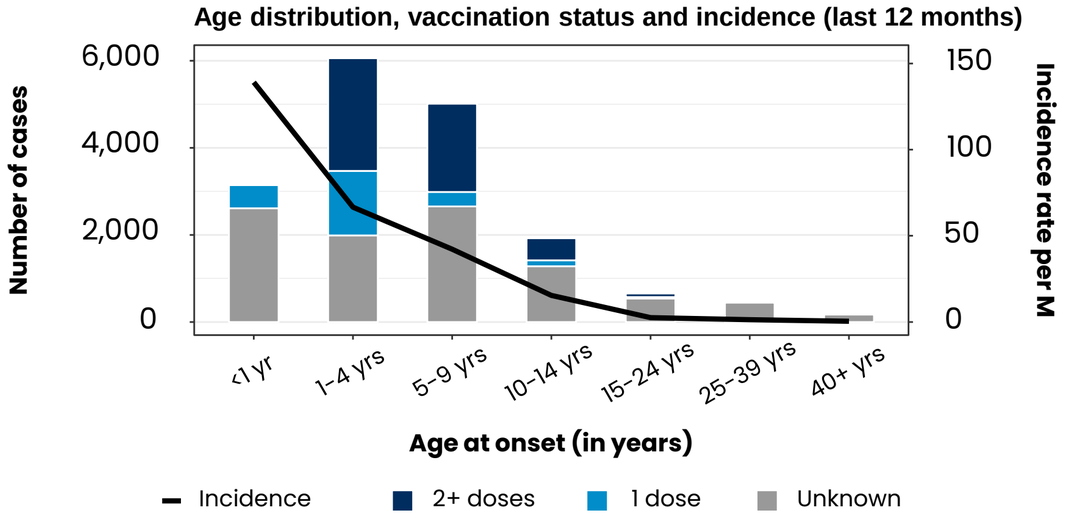


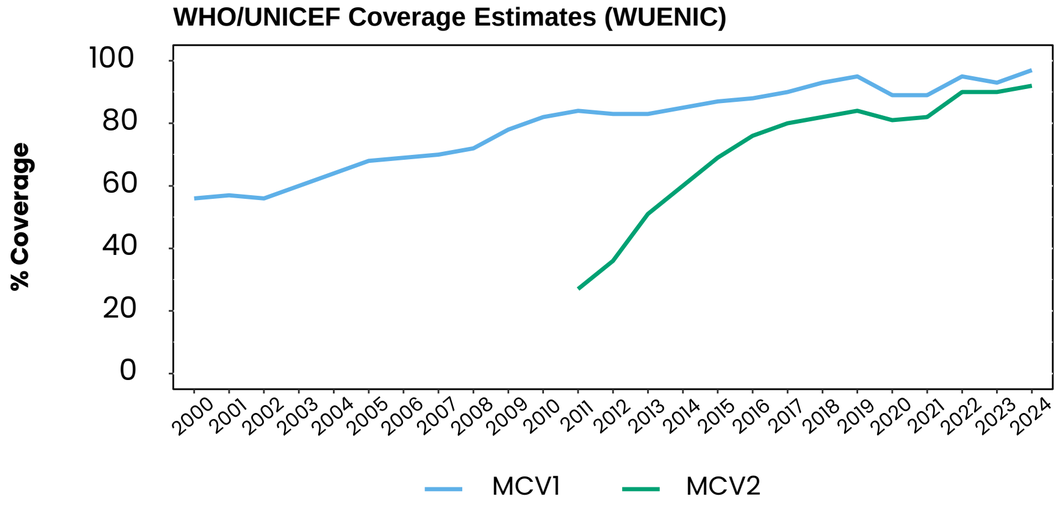
Based on data received 2025-09 - Data Source: IVB Database

Measles cases: India

ELIMINATION STATUS: **ENDEMIC**

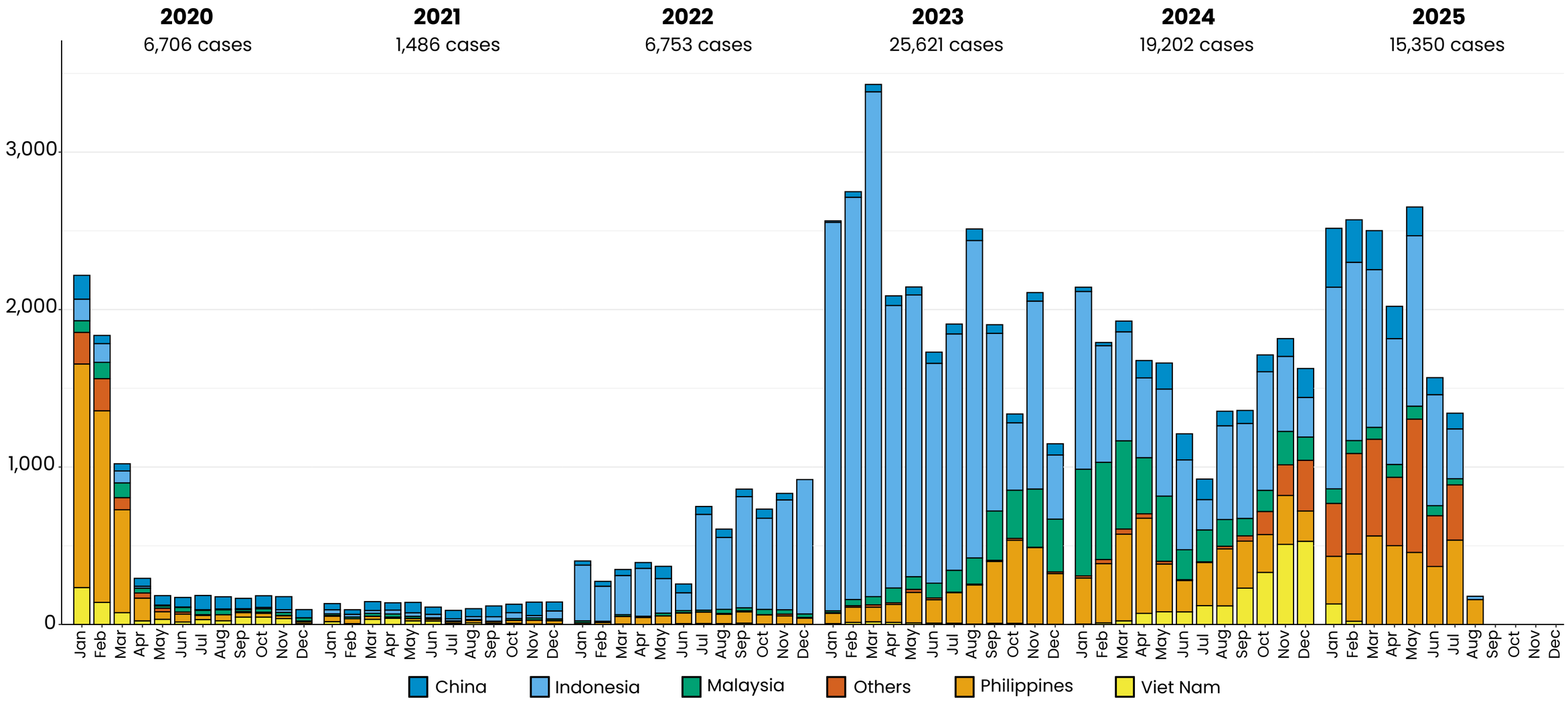






Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

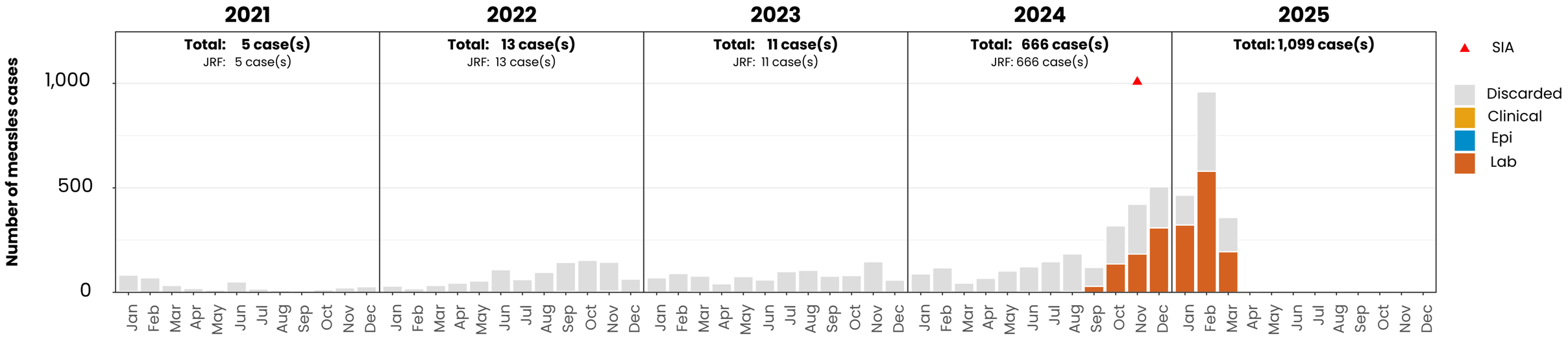
Measles case distribution (WPR), 2020-2025

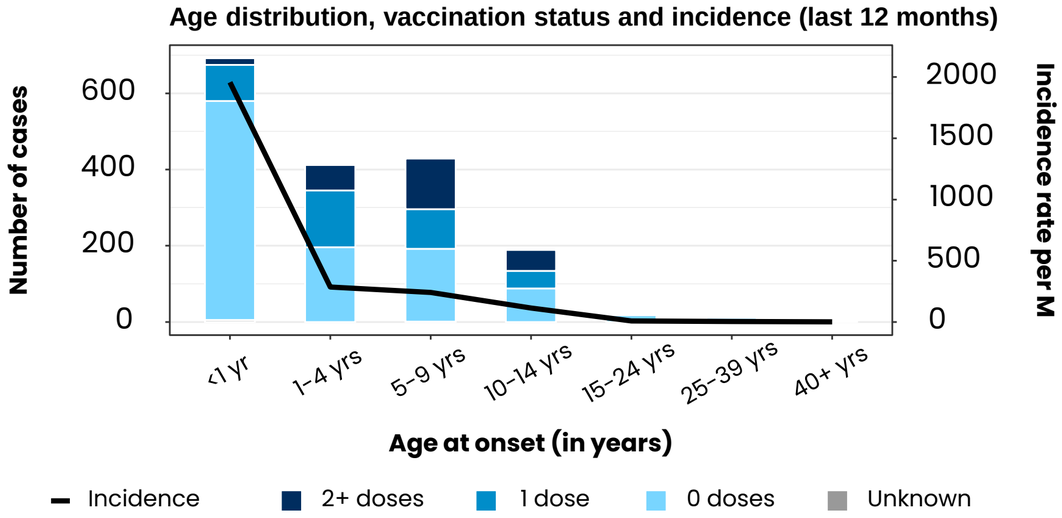


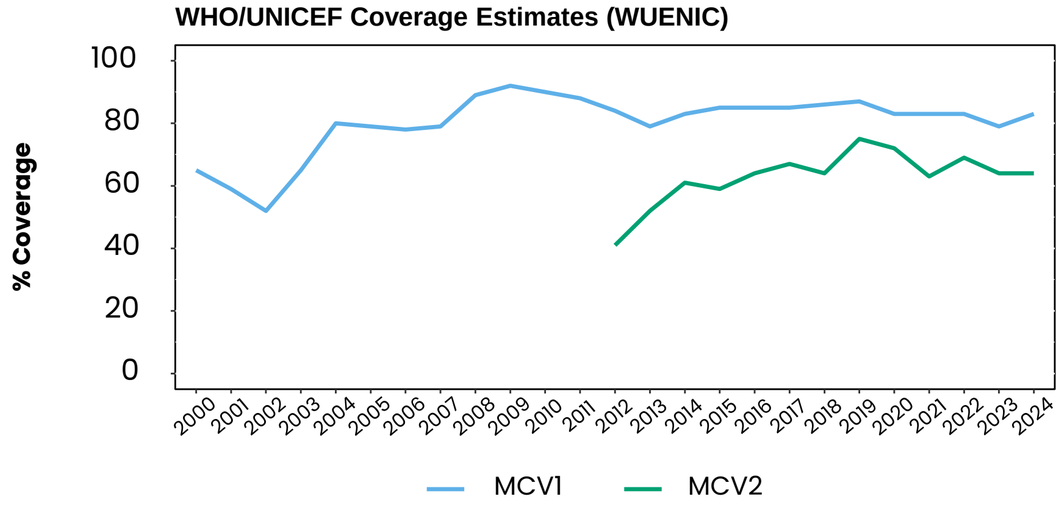
Based on data received 2025-09 - Data Source: IVB Database

Measles cases: Cambodia

ELIMINATION STATUS: **ELIMINATED**



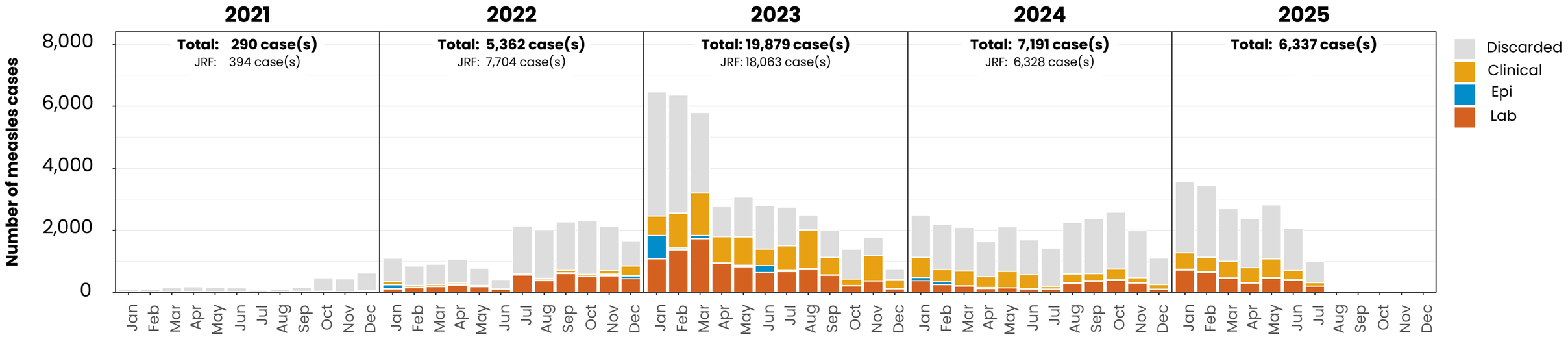


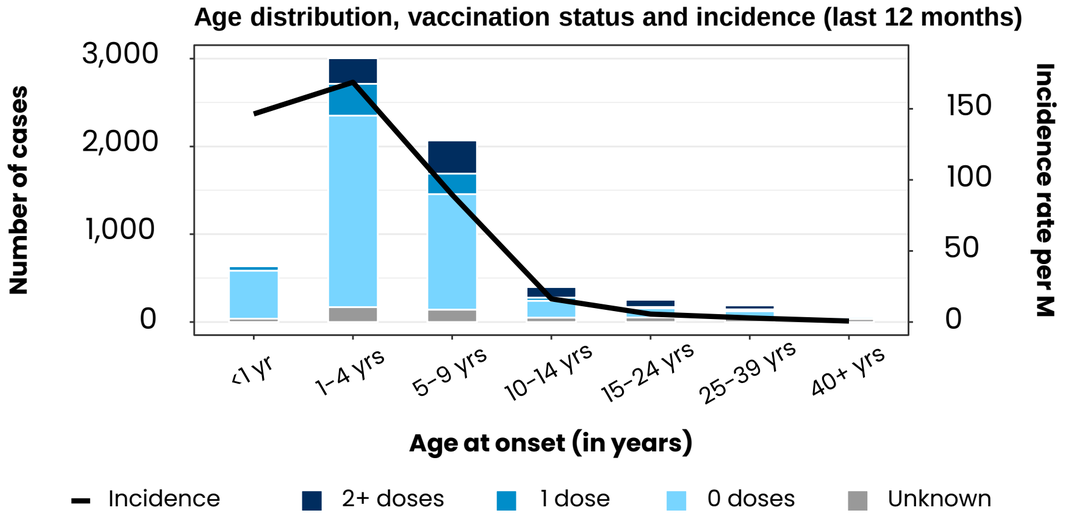


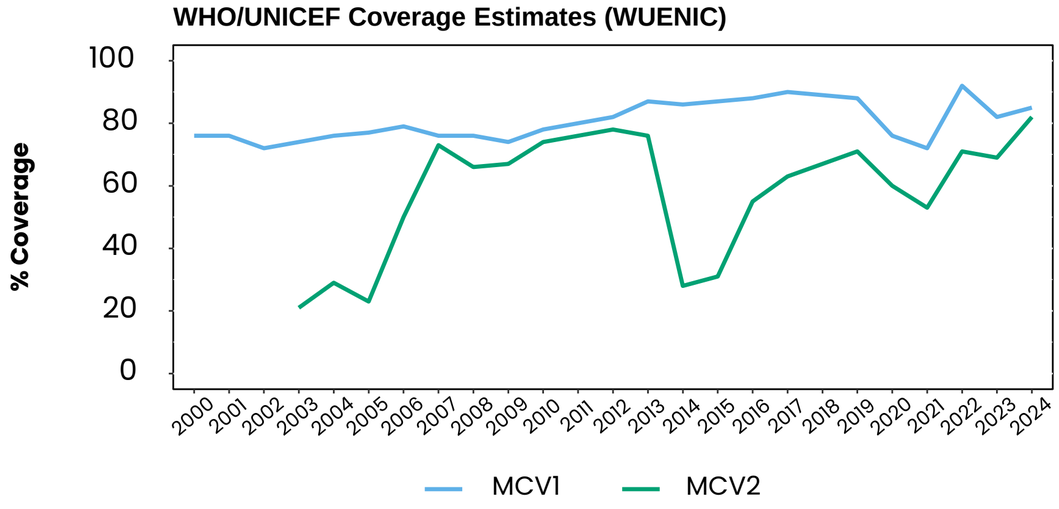
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Indonesia

ELIMINATION STATUS: **ENDEMIC**



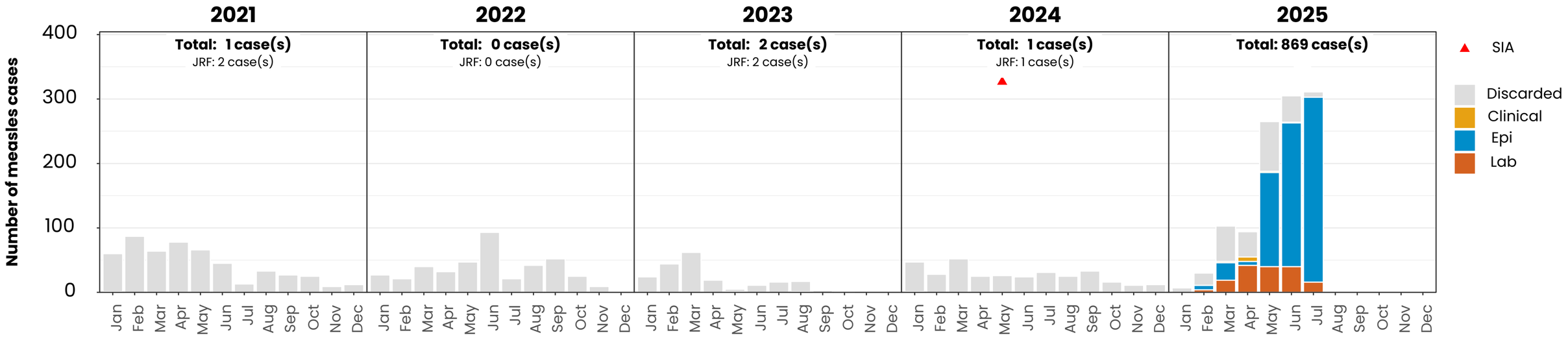


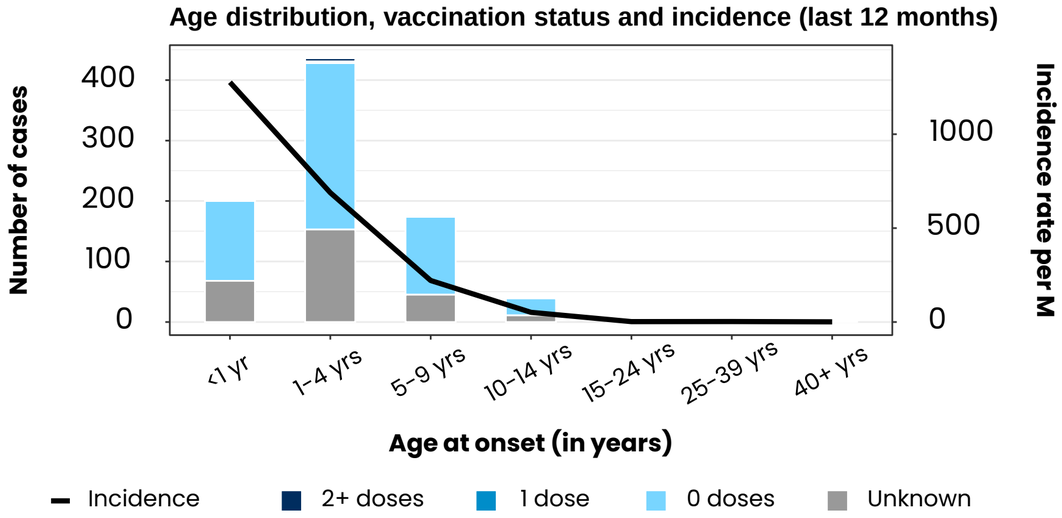


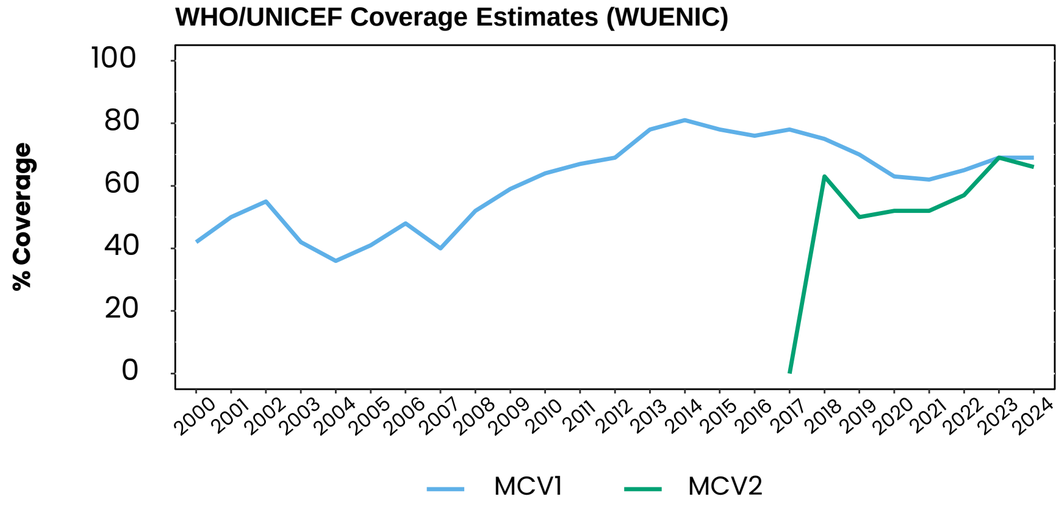
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using a combination of case-based and aggregate surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Lao People's Democratic Republic

ELIMINATION STATUS: **ENDEMIC**



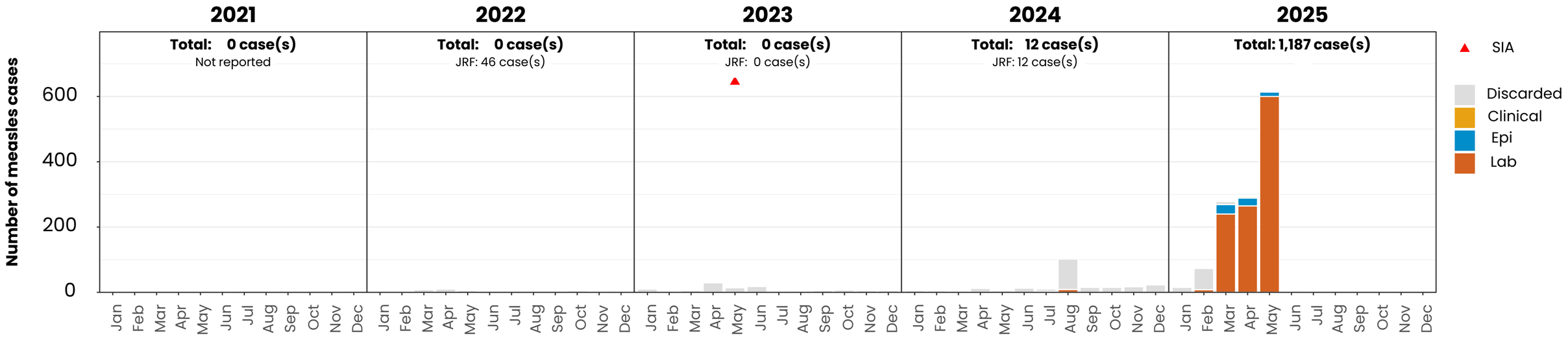


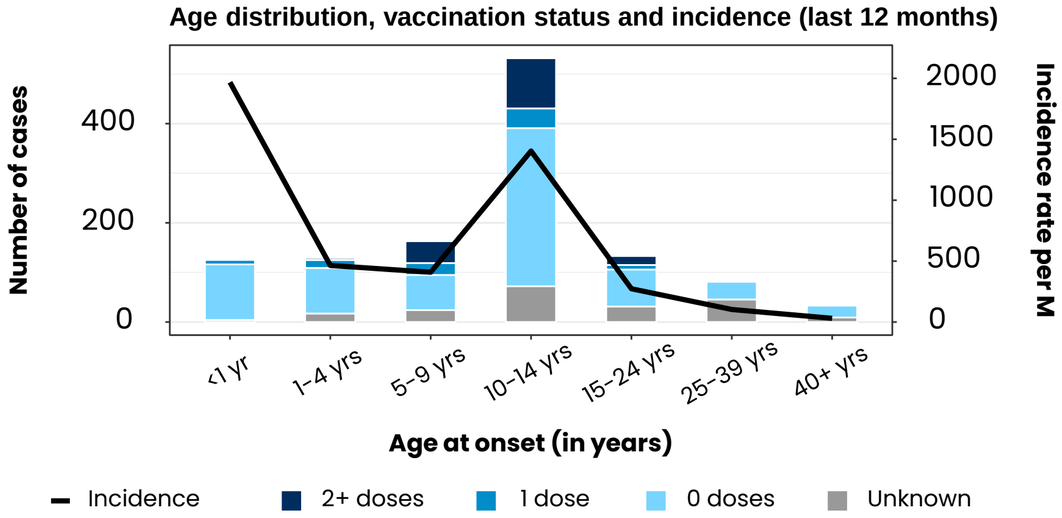


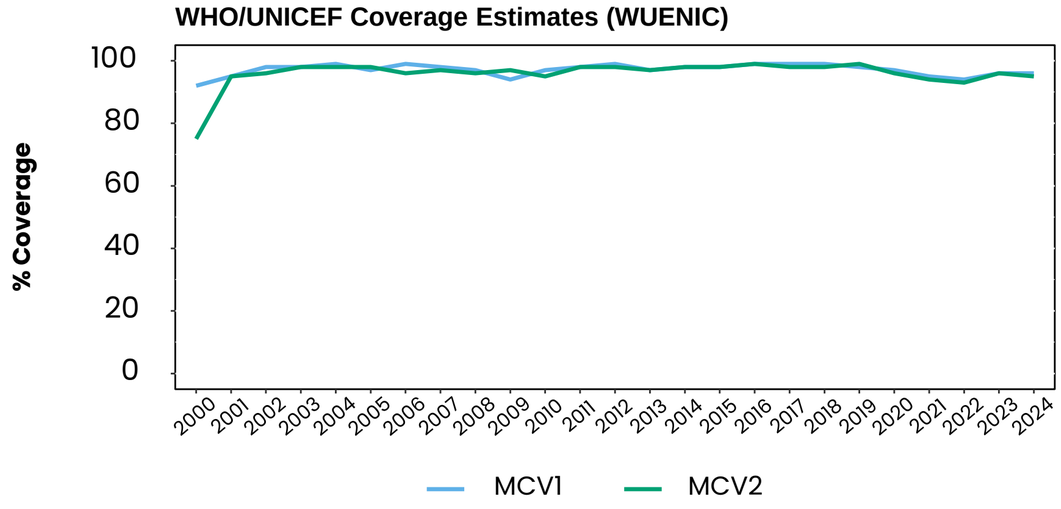
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Mongolia

ELIMINATION STATUS: **ELIMINATED**



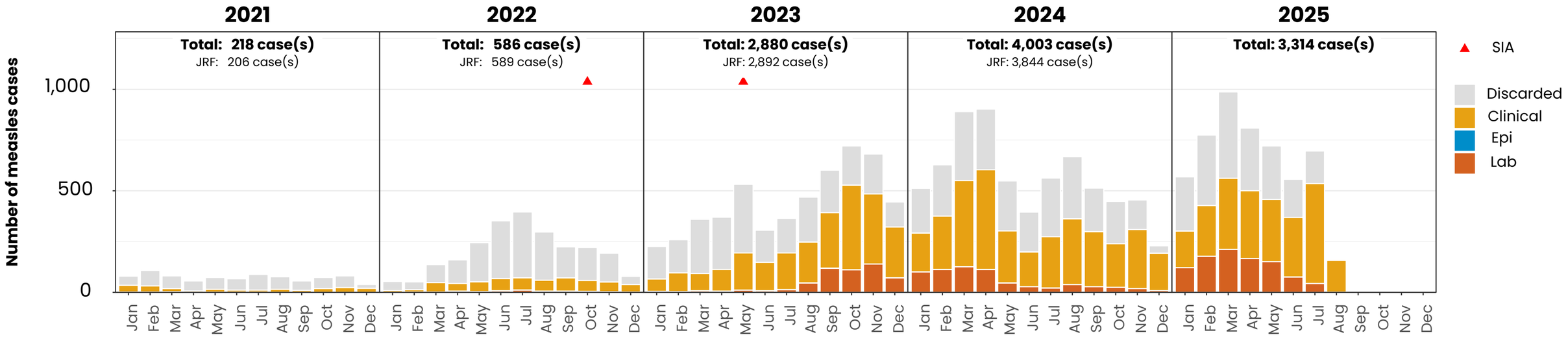


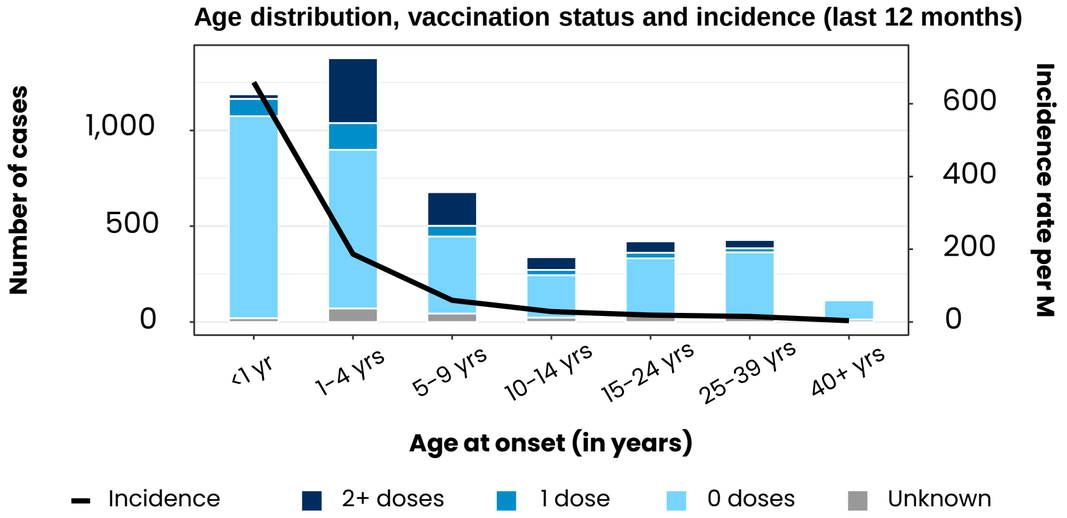


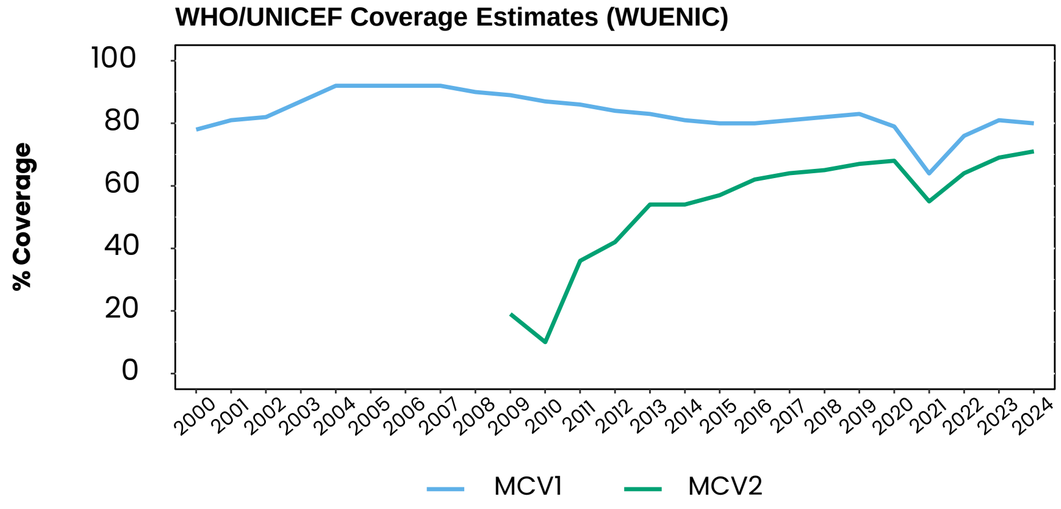
Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Measles cases: Philippines

ELIMINATION STATUS: **ENDEMIC**

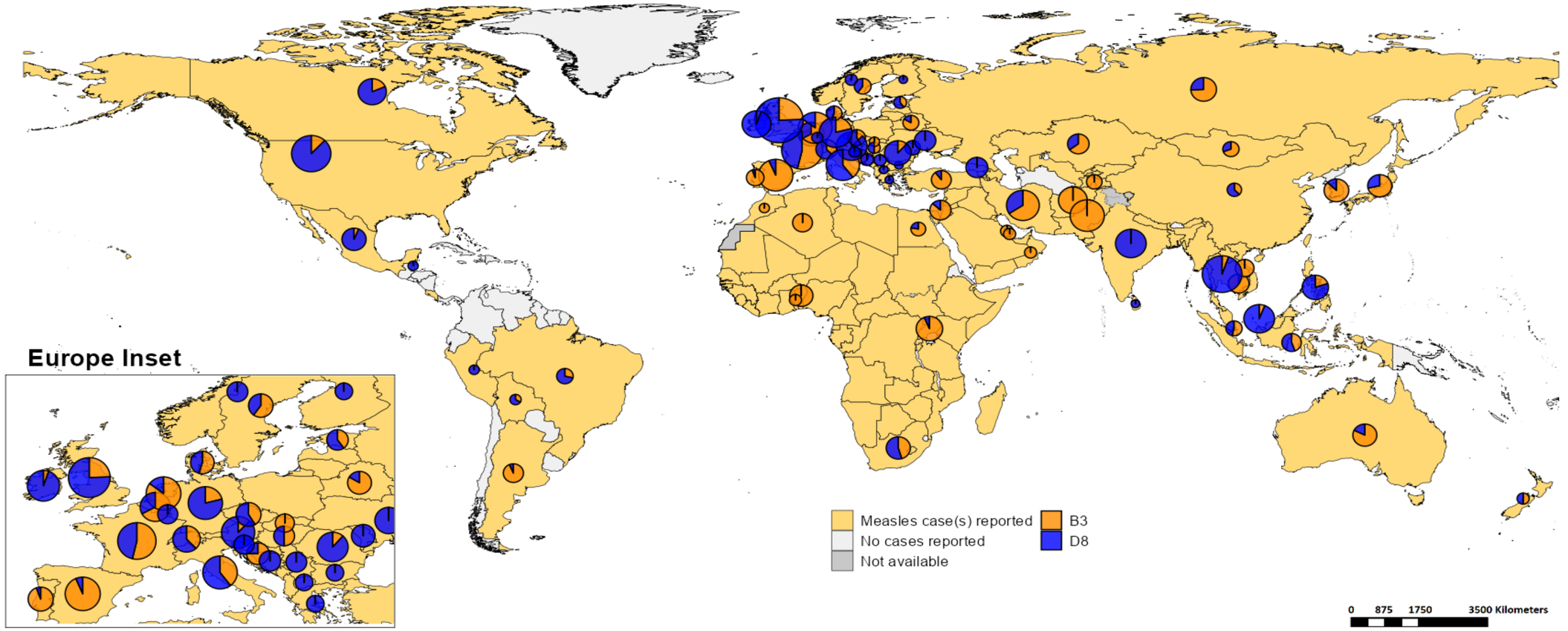






Based on data received 2025-09 - Data Source: IVB Database. Main epi curve was built using case-based surveillance data. Age distribution curve was built using case-based surveillance data. Coverage data from WHO/UNICEF Estimates of National Immunization Coverage (WUENIC)

Distribution of measles genotypes (last 12 months)



World Health Organization

Data source: IVB Database

Disclaimer: The boundaries and names shown and the designations used on this map do notimply 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.

Data Source: MeaNS2 database (Genotypes) and IVB Database (Incidence) as of 2025-09-09 and covering the period between 2024-08 and 2025-07 - Pie charts proportional to the number of sequenced viruses

Rubella

World Health Organization | IVB

Number of reported rubella cases by WHO Region

2025

Region	Member States*	Rubella cases	Clin	Epi	Lab	Date Received
AFR	40/47	1,679	0	0	1,679	2025-09
AMR	25/35	0	0	0	0	2025-09
EMR	20/21	1,416	1,051	4	361	2025-09
EUR	28/53	415	16	7	392	2025-09
SEAR	10/10	1,801	0	44	1,757	2025-09
WPR	14/28	798	59	0	739	2025-09
Total	**137/194**	**6,109**	**1,126**	**55**	**4,928**	

Region	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
AFR	251	304	339	305	192	149	122	17	0	0	0	0
AMR	0	0	0	0	0	0	0	0	0	0	0	0
EMR	233	375	310	283	79	58	62	16	0	0	0	0
EUR	110	79	72	61	46	32	15	0	0	0	0	0
SEAR	254	267	244	266	254	222	204	90	0	0	0	0
WPR	132	131	138	120	100	104	72	1	0	0	0	0
Total	**980**	**1,156**	**1,103**	**1,035**	**671**	**565**	**475**	**124**	**0**	**0**	**0**	**0**

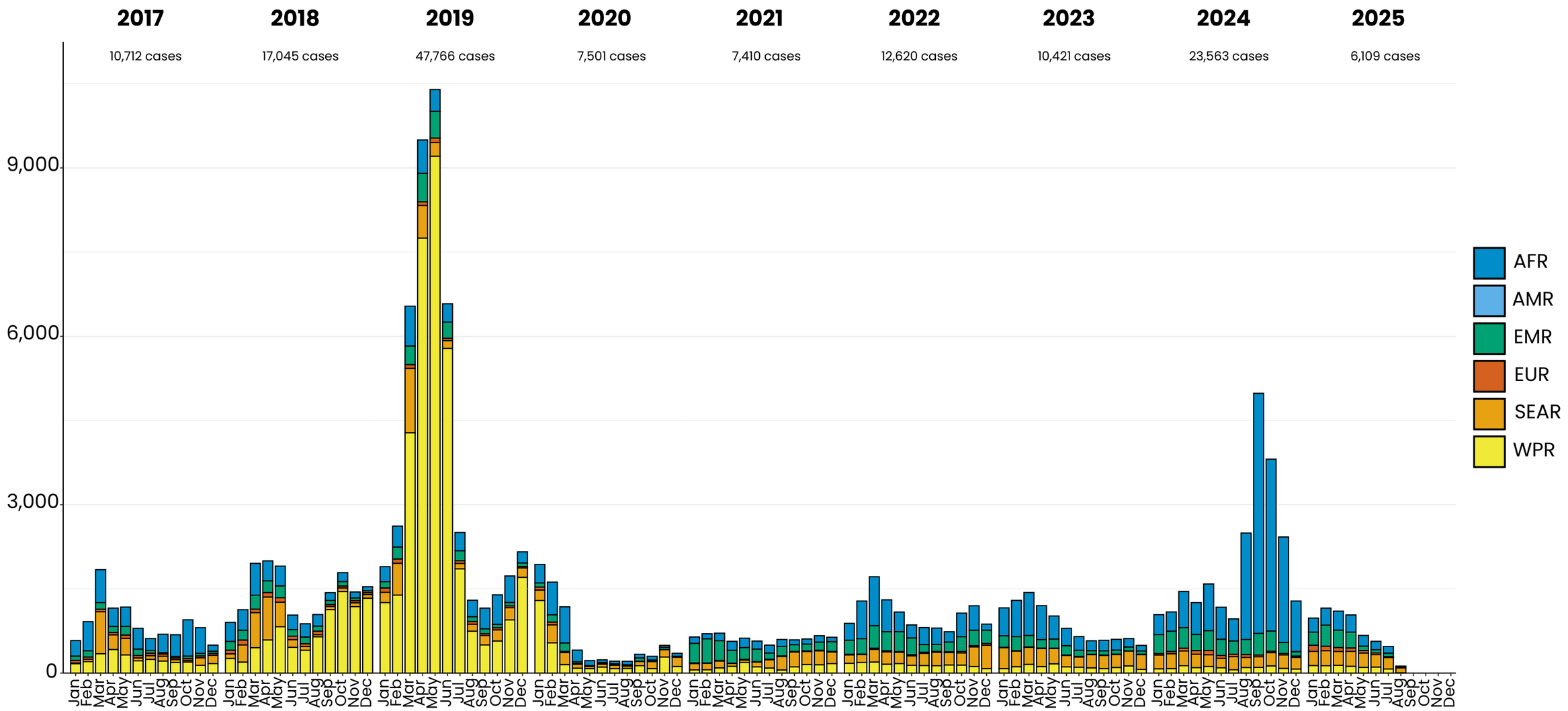
2024

Region	Member States*	Rubella cases	Clin	Epi	Lab	Date Received
AFR	43/47	15,738	0	0	15,738	2025-09
AMR	28/35	0	0	0	0	2025-09
EMR	21/21	3,521	2,516	188	817	2025-09
EUR	33/53	509	213	2	294	2025-09
SEAR	10/10	2,677	0	106	2,571	2025-09
WPR	17/28	1,118	81	0	1,037	2025-09
Total	**152/194**	**23,563**	**2,810**	**296**	**20,457**	

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	25	39	49	67	77	52	43	51	31	25	27	23
SEAR	245	265	262	238	209	168	232	181	191	237	240	209
WPR	75	78	130	95	116	93	59	97	99	125	82	69
Total	**1,041**	**1,090**	**1,453**	**1,255**	**1,587**	**1,174**	**965**	**2,494**	**4,984**	**3,811**	**2,425**	**1,284**

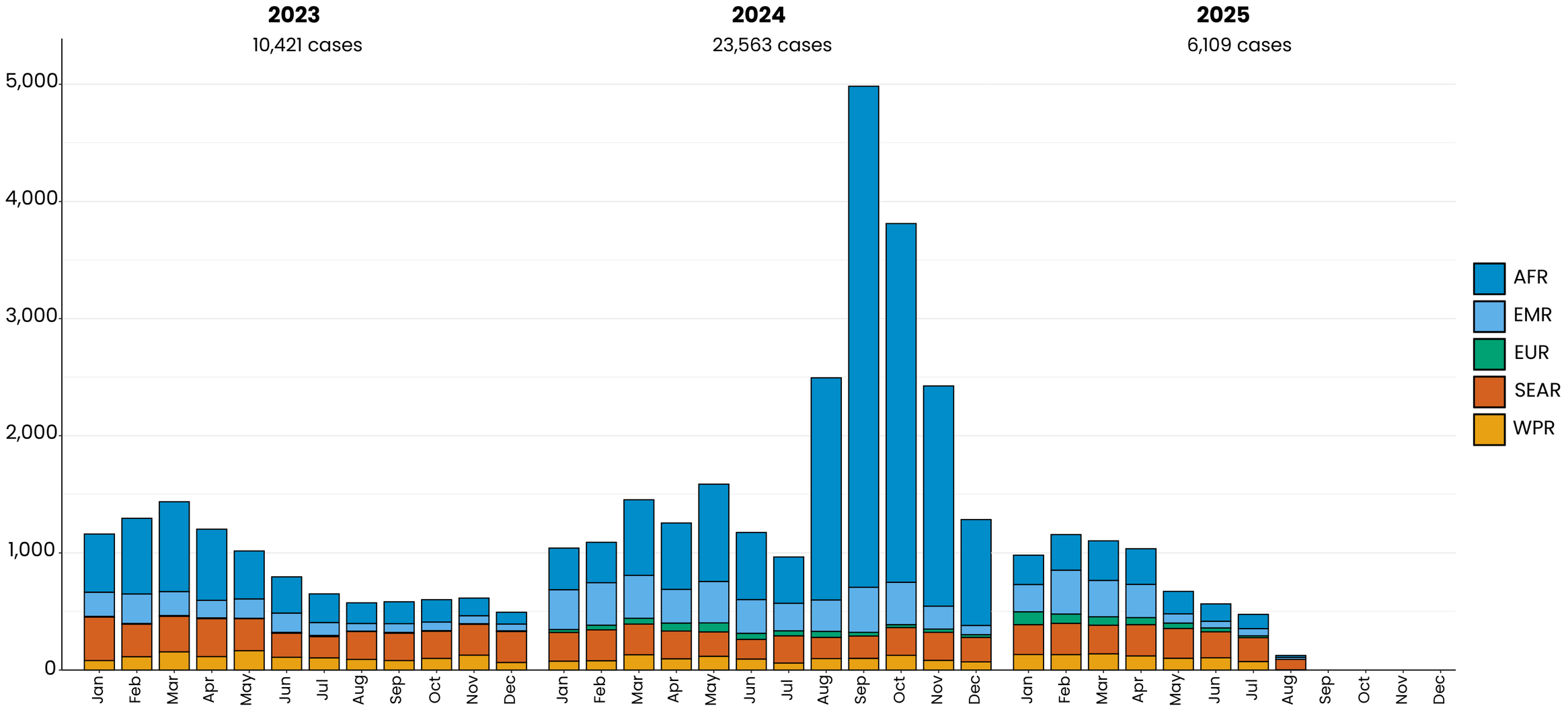
Notes: Based on data received 2025-09 - This is surveillance data, hence for the last month, the data may be incomplete. * Member States Reporting / Total Member States in Region

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



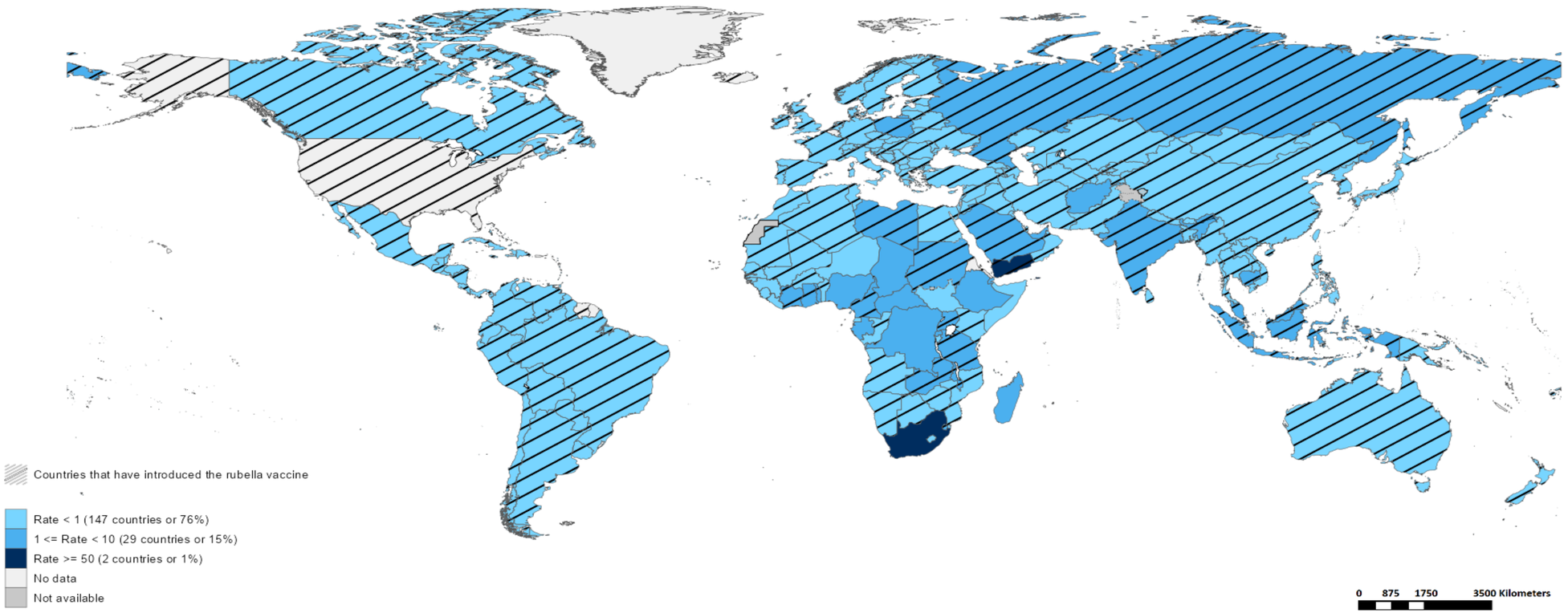
Based on data received 2025-09 - Data Source: IVB Database - This is surveillance data, hence for the last month(s), the data may be incomplete.

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



Based on data received 2025-09 - 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)



World Health Organization

Data source: IVB Database

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Highest incidence rates

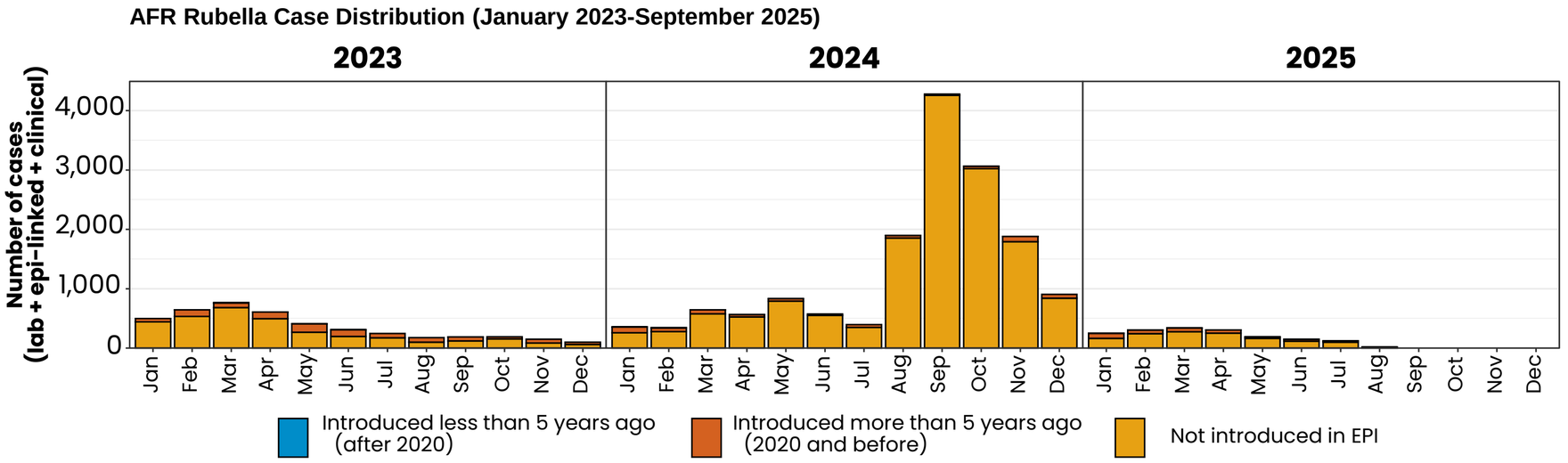
Country	Cases	Rate
South Africa	11418	178.39
Yemen	2133	52.56
Chad	154	7.59
Gabon	12	4.73
Central African Republic	23	4.31
DR Congo	428	3.92
Russian Federation	469	3.24
Libya	23	3.12
Ethiopia	391	2.96
United Republic of Tanzania	198	2.89

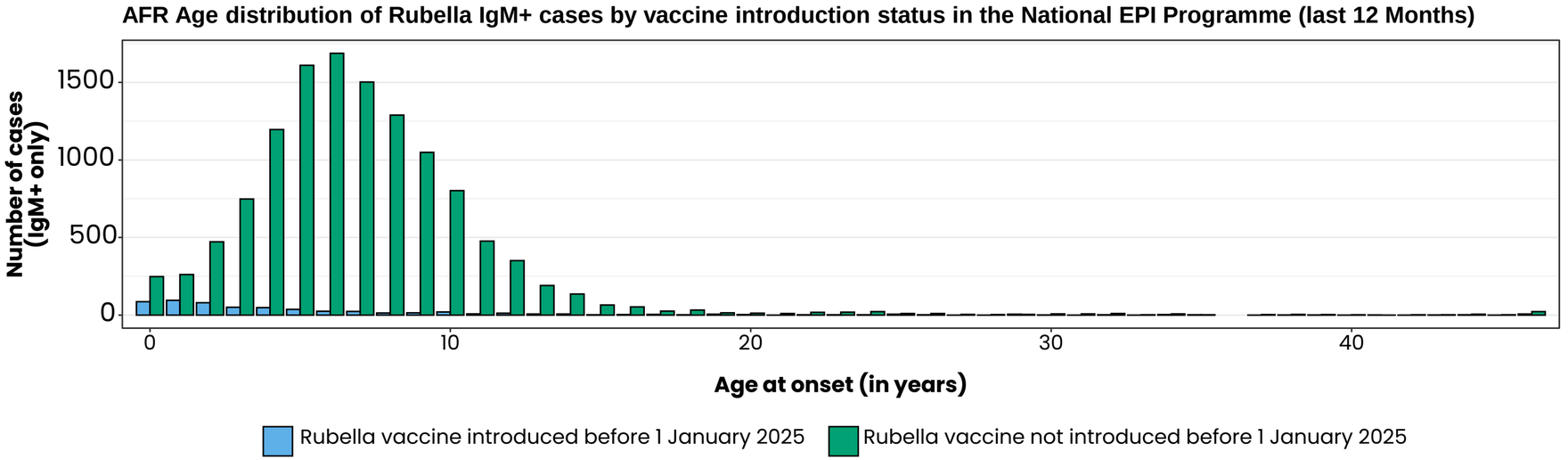
Notes: Based on data received 2025-09 - Surveillance data from 2025-02 to 2025-07 - Incidence: Number of cases / population * 1,000,000 - Population data: World population prospects, 2019 revision

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 different 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.

Rubella cases (AFR)



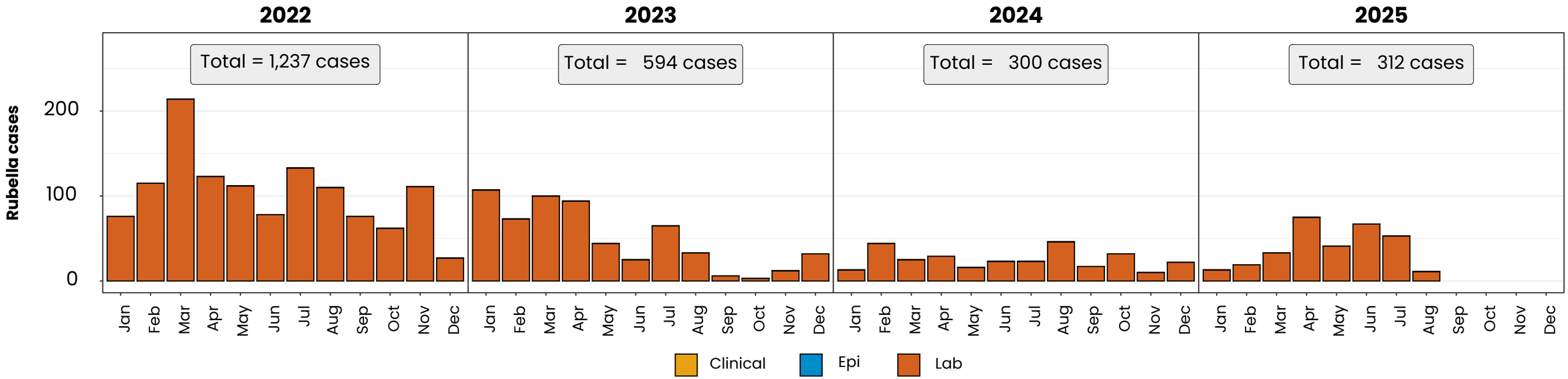


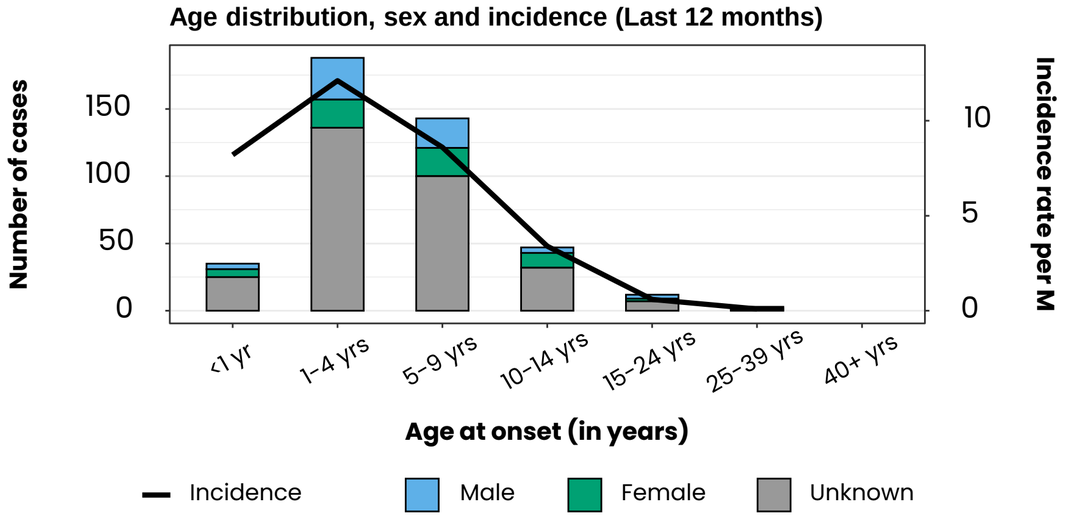
Top 10 countries (last 12 M)			
Country	**RCV in RI**	**Cases**	**% of Total**
South Africa	No	9642	82
Nigeria	No	540	5
DR Congo	No	393	3
Ethiopia	No	389	3
Others	-	297	3
United Republic of Tanzania	2014	170	1
Chad	No	155	1
Madagascar	No	77	1
Uganda	2019	52	0
Malawi	2017	50	0
Ghana	2013	39	0

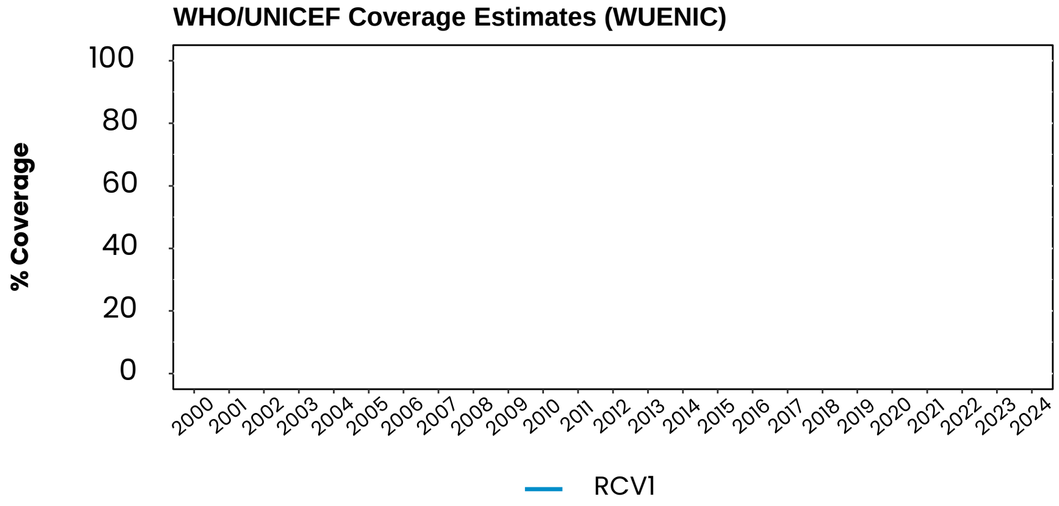
Notes: Based on data received 2025-09 Data Source: IVB Database.

Rubella cases: Democratic Republic of the Congo

ELIMINATION STATUS: **ENDEMIC**

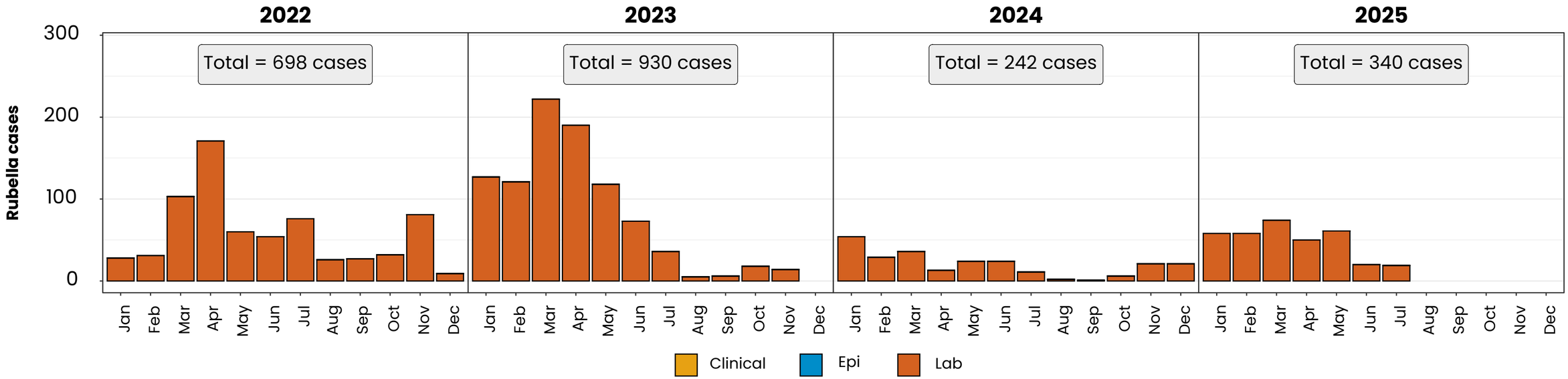


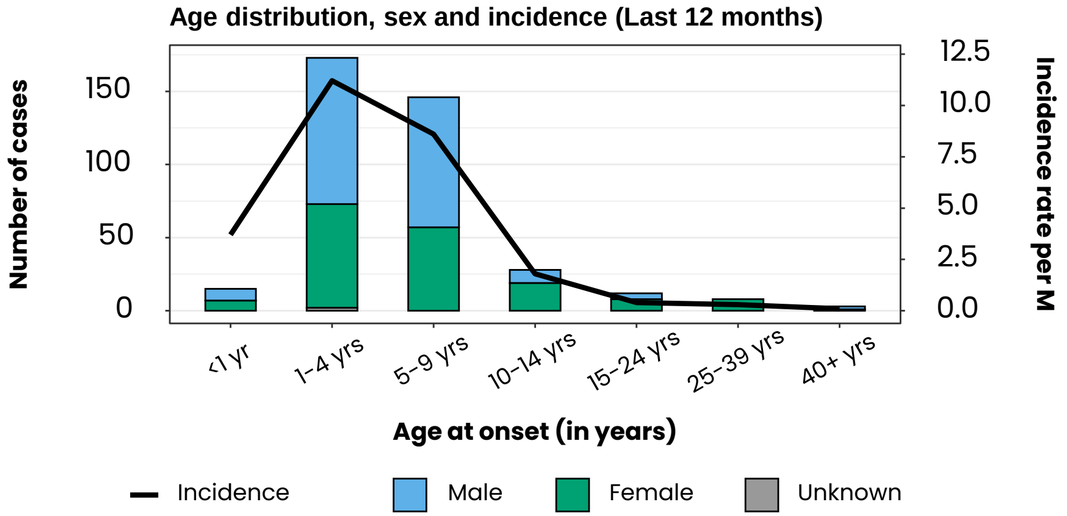


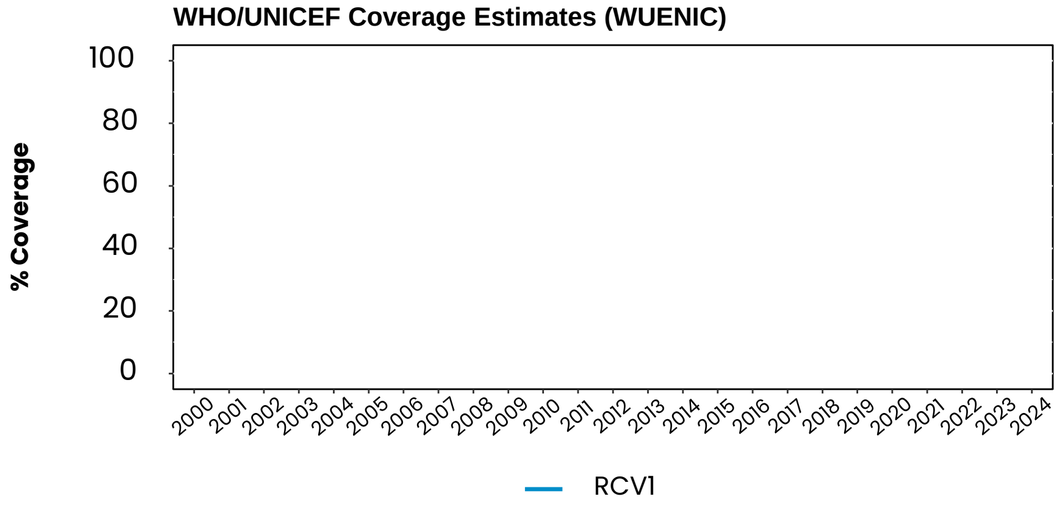


Rubella cases: Ethiopia

ELIMINATION STATUS: **ENDEMIC**

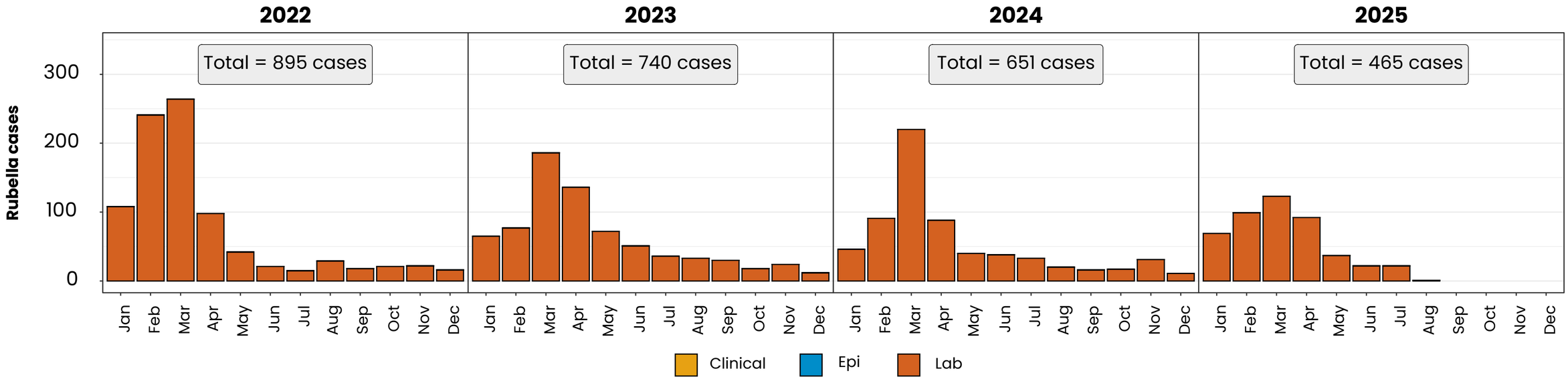


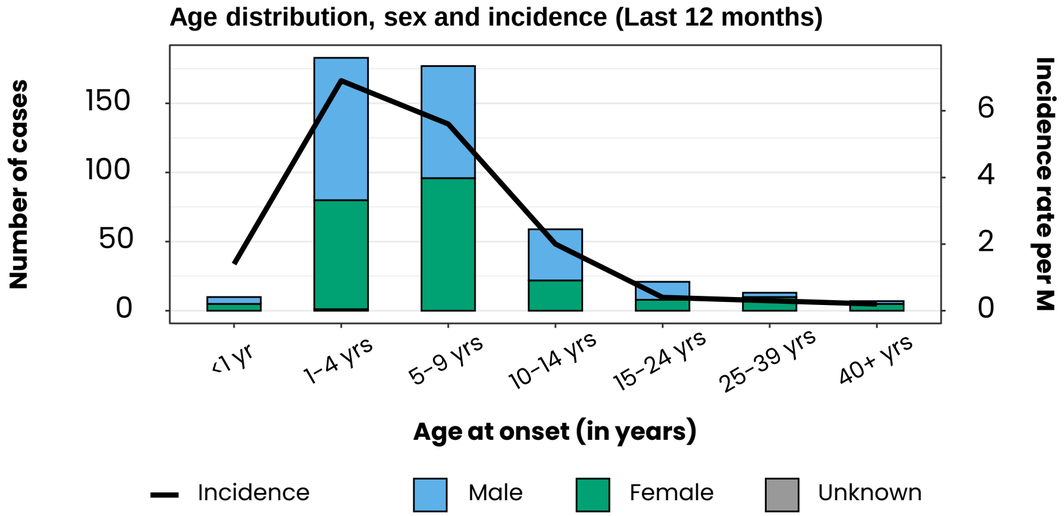


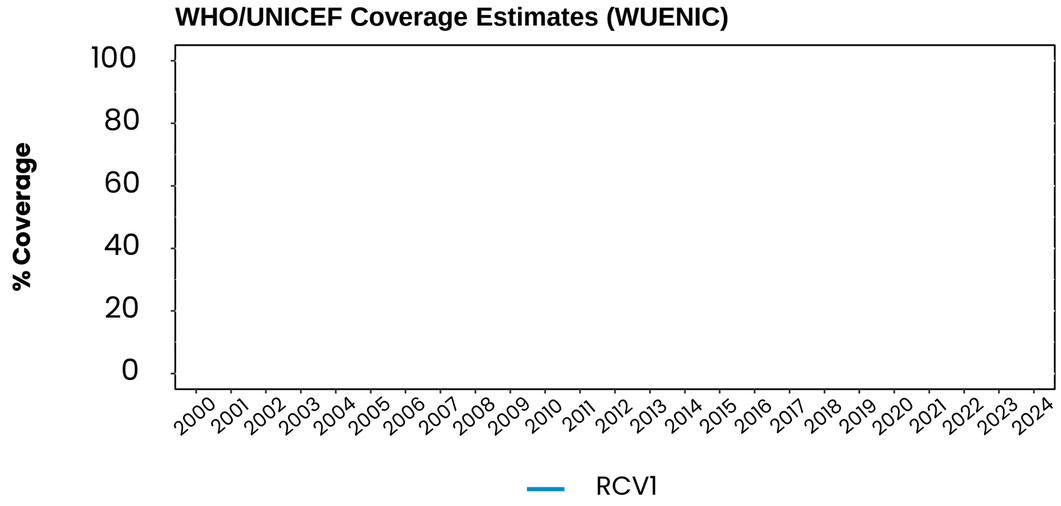


Rubella cases: Nigeria

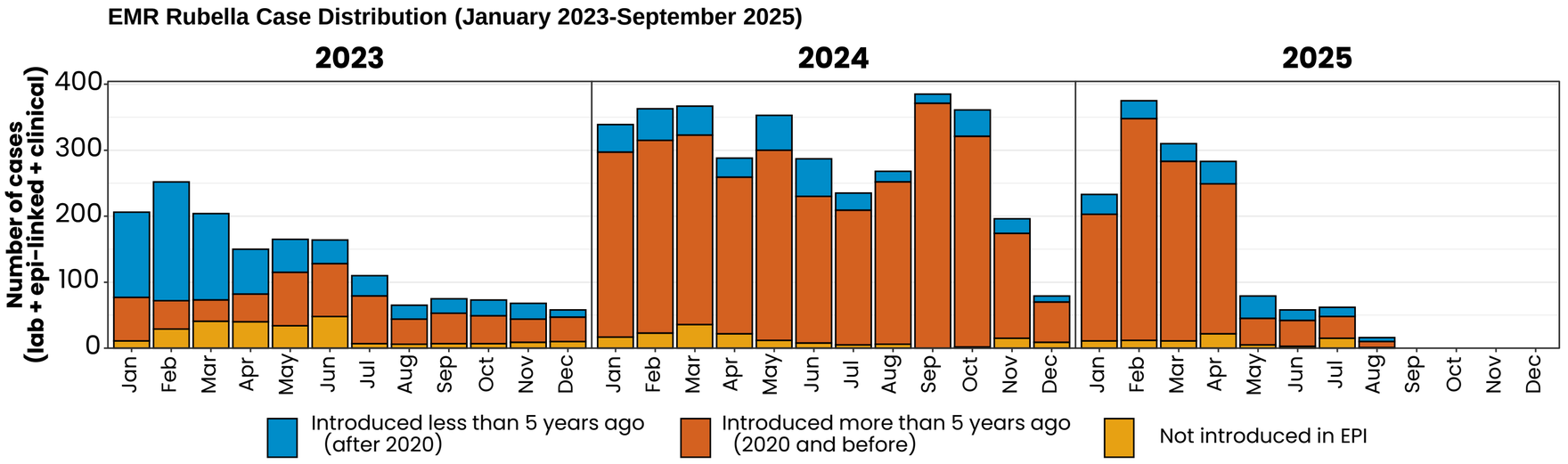
ELIMINATION STATUS: **ENDEMIC**

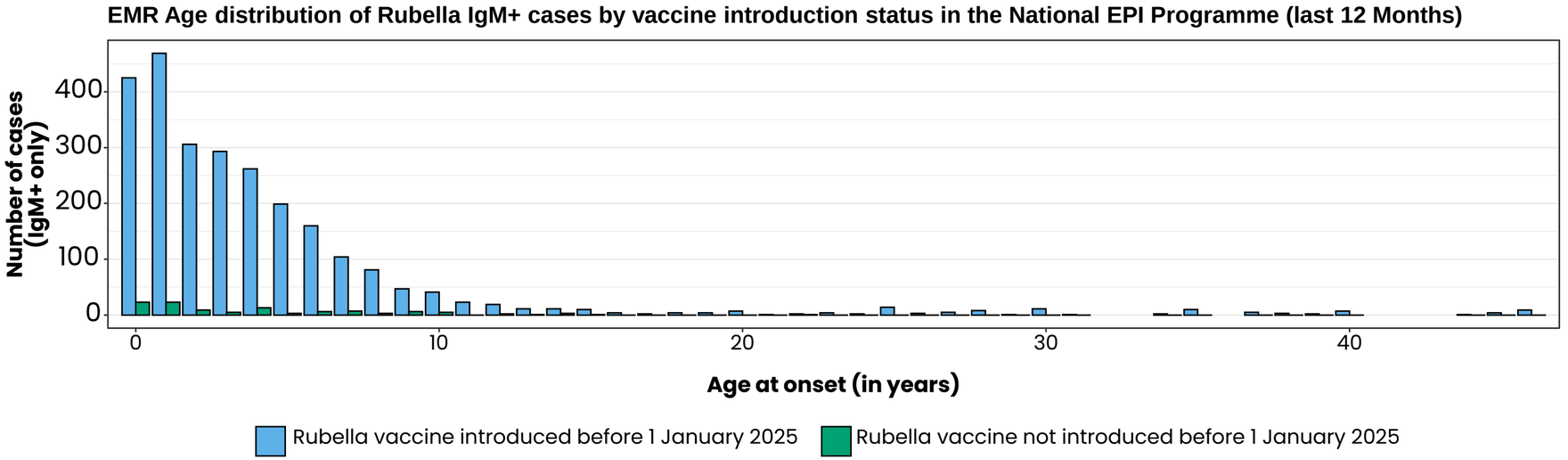






Rubella cases (EMR)



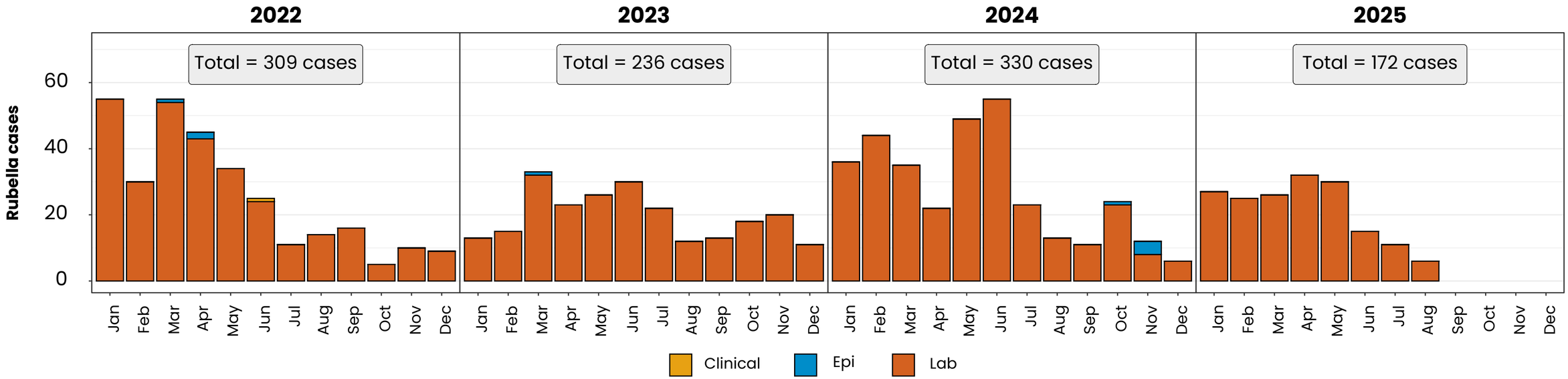


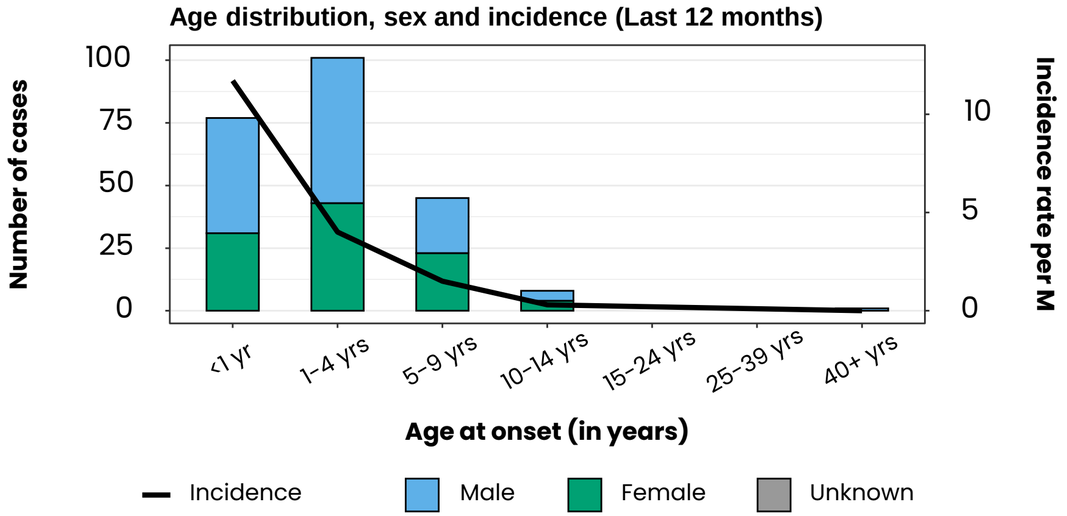
Top 10 countries (last 12 M)			
Country	**RCV in RI**	**Cases**	**% of Total**
Yemen	2015	1924	79
Pakistan	2022	225	9
Afghanistan	No	104	4
Sudan	2024	48	2
Others	-	32	1
Saudi Arabia	1982	30	1
Egypt	1999	21	1
Libya	1993	19	1
Syrian Arab Republic	1999	13	1
United Arab Emirates	1985	11	0
Iraq	1989	10	0

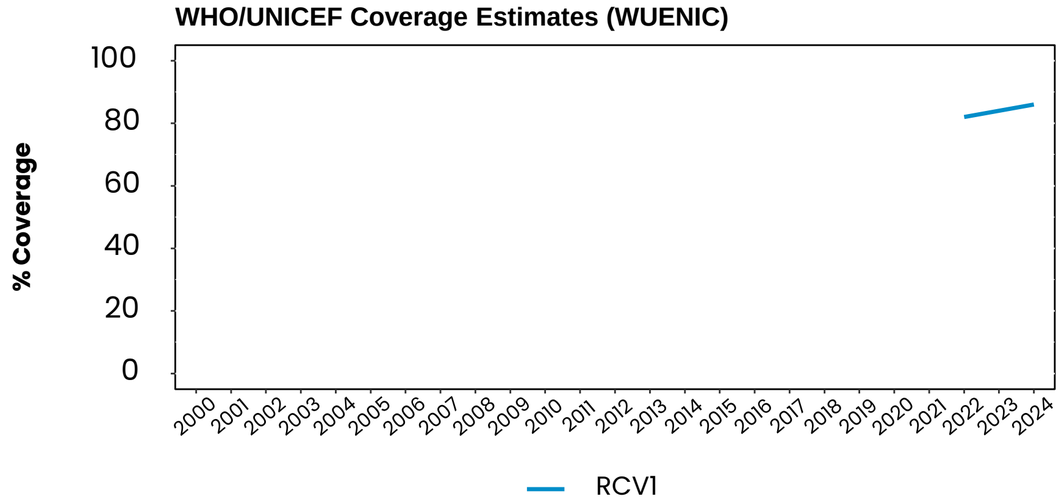
Notes: Based on data received 2025-09 Data Source: IVB Database.

Rubella cases: Pakistan

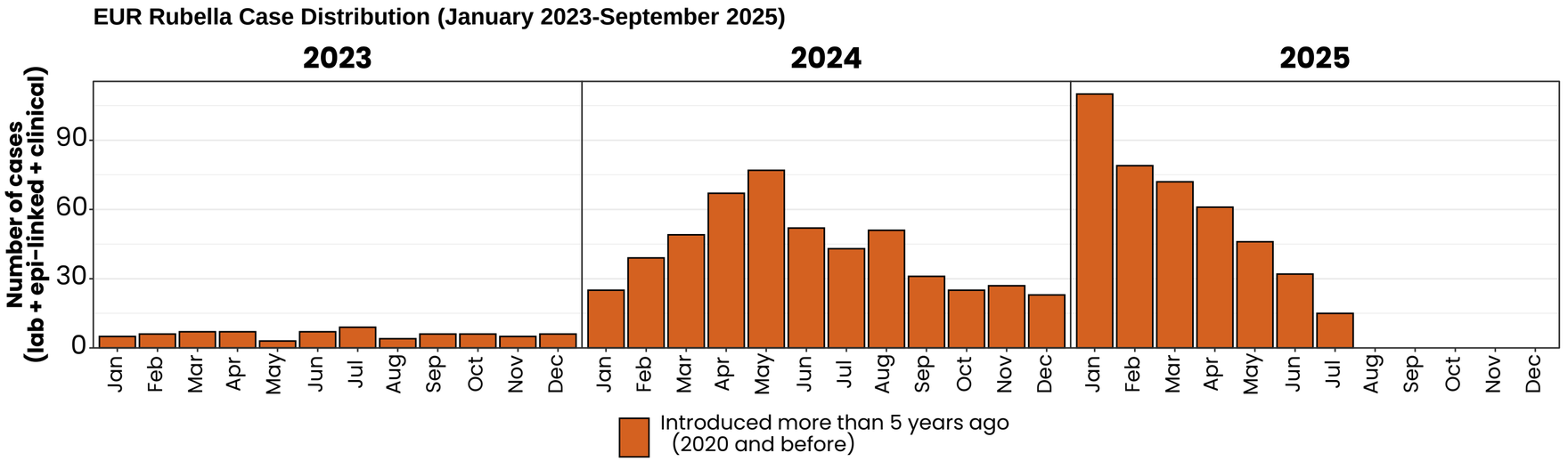
ELIMINATION STATUS: **ENDEMIC**

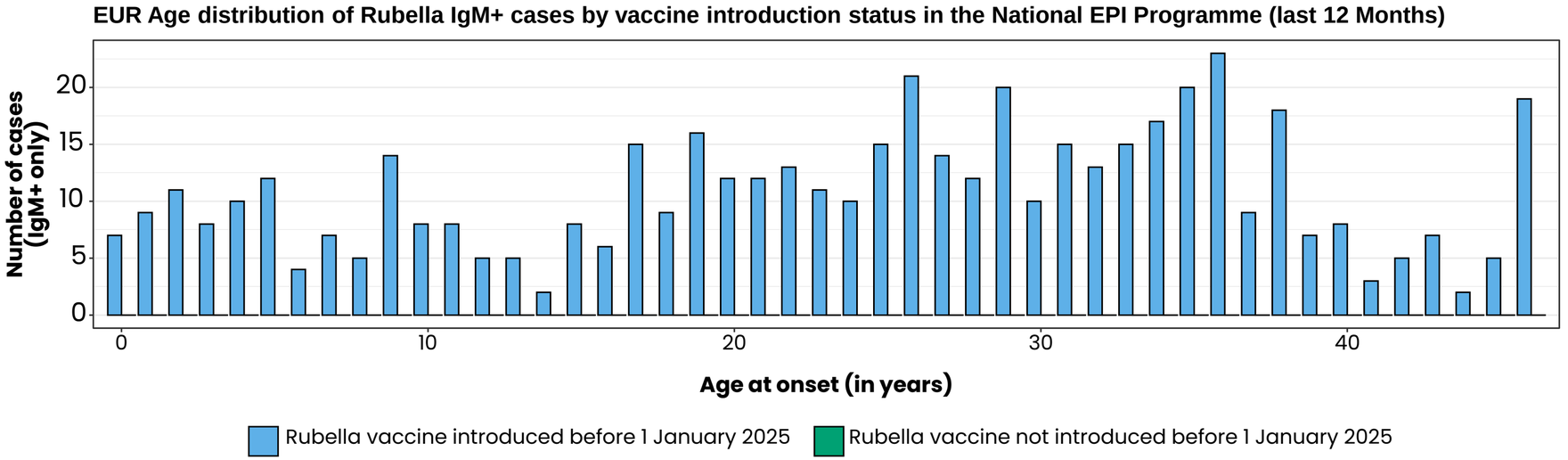






Rubella cases (EUR)

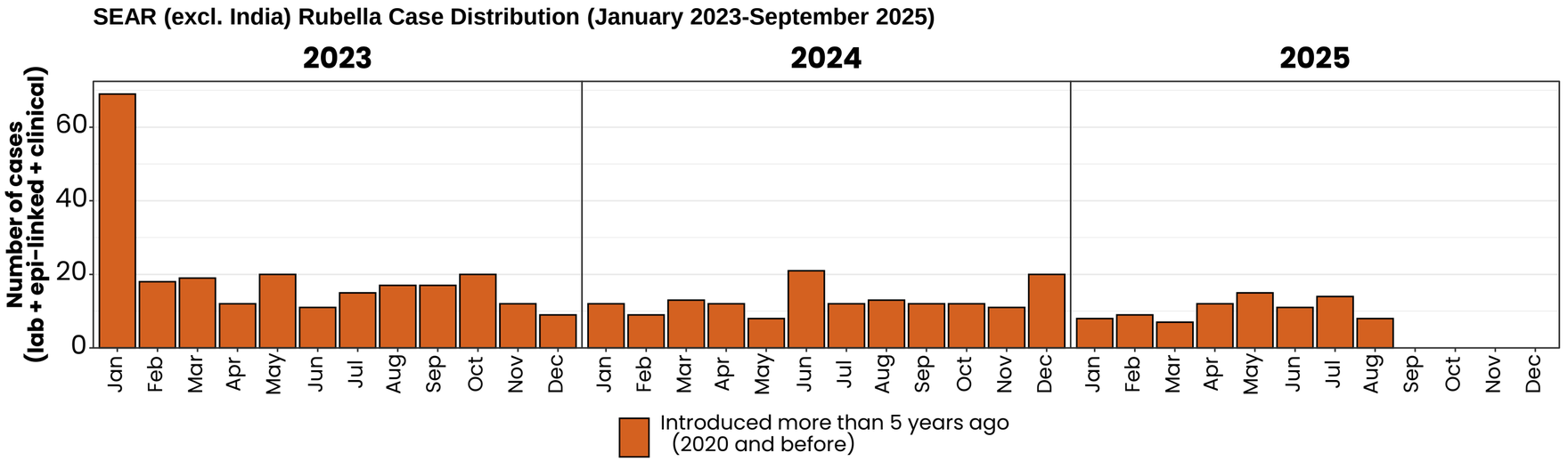




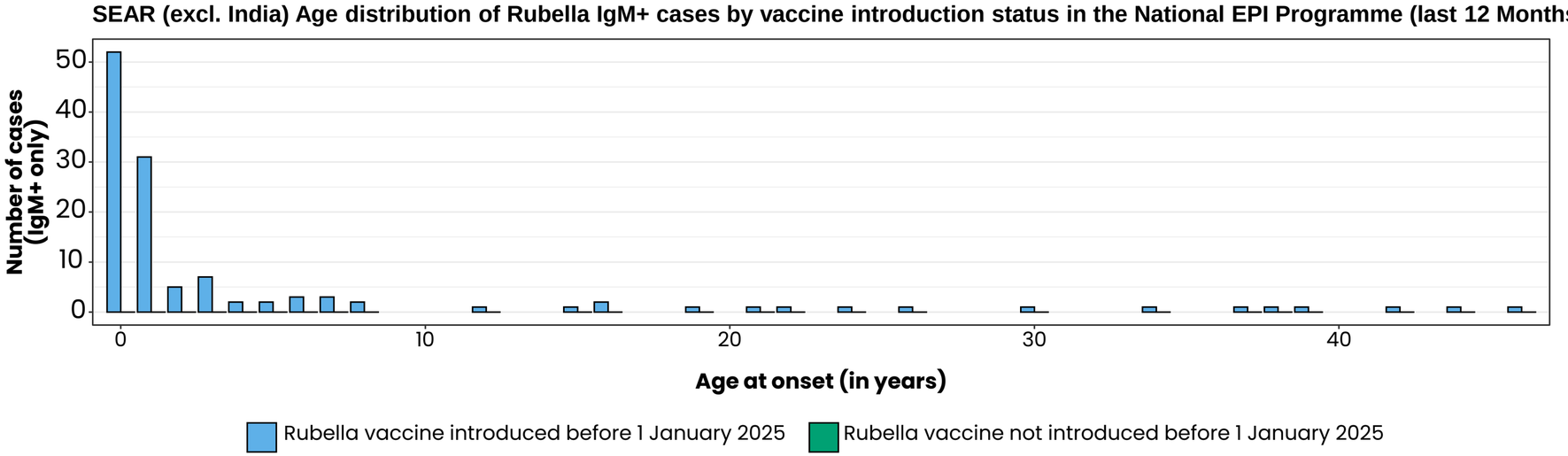
Top 10 countries (last 12 M)			
Country	**RCV in RI**	**Cases**	**% of Total**
Russian Federation	2000	431	83
Poland	1988	39	7
Türkiye	2006	19	4
Ukraine	2003	8	2
Germany	1991	6	1
Kyrgyzstan	2001	4	1
Sweden	1982	4	1
Kazakhstan	2004	3	1
Others	-	3	1
Uzbekistan	2006	3	1
Bulgaria	1992	1	0

Notes: Based on data received 2025-09 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))



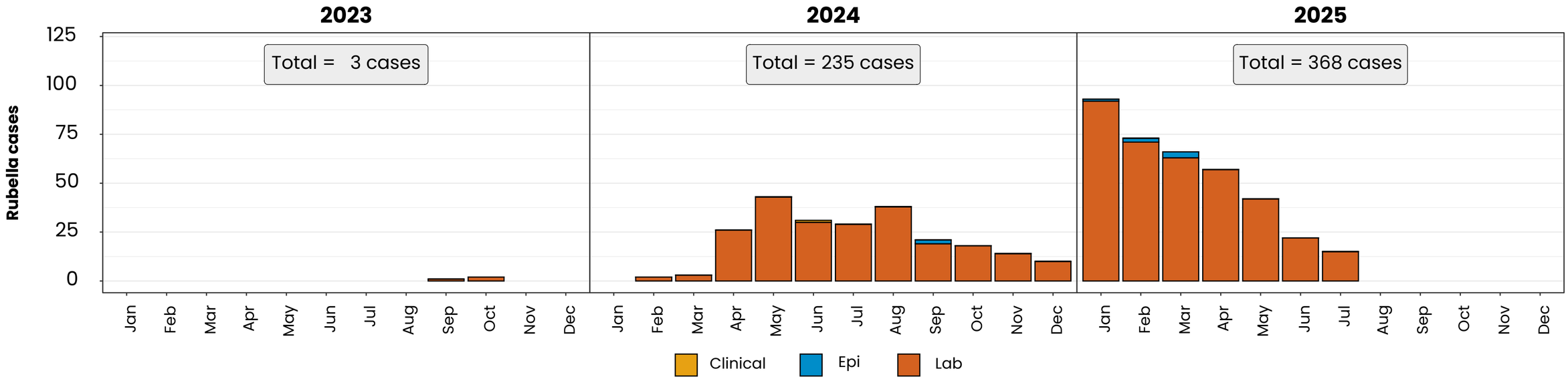
Top 10 countries (last 12 M)			
Country	**RCV in RI**	**Cases**	**% of Total**
Bangladesh	2012	94	68
Thailand	1997	21	15
Nepal	2013	17	12
Myanmar	2015	7	5

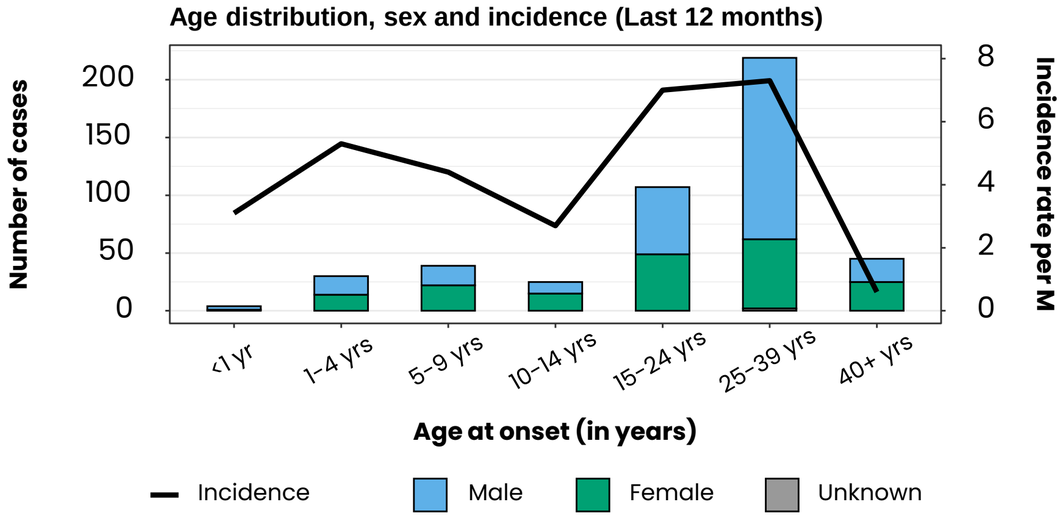


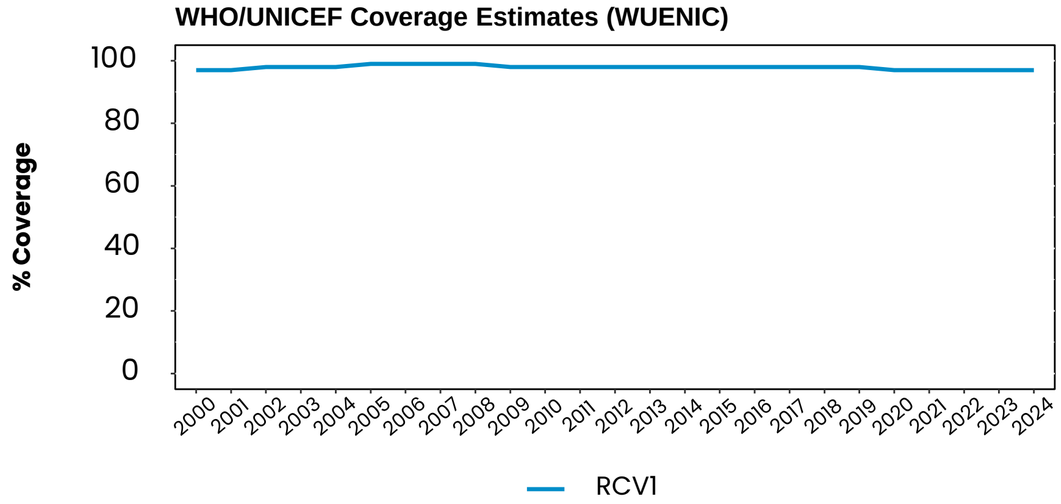
Notes: Based on data received 2025-09 Data Source: IVB Database.

Rubella cases: Russian Federation

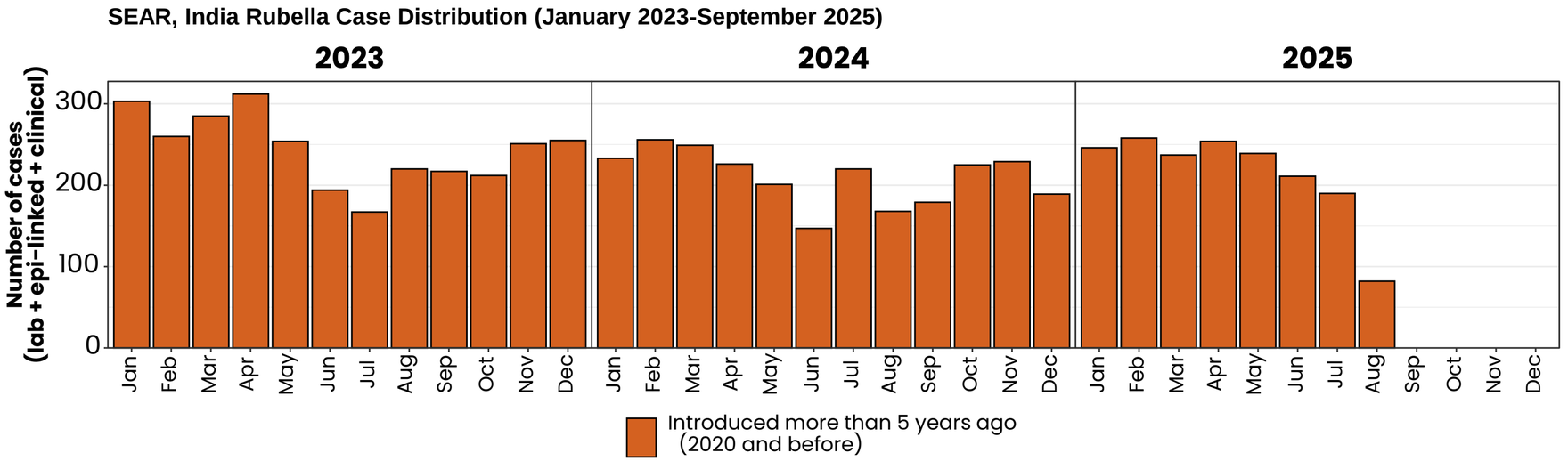
ELIMINATION STATUS: **VERIFIED**



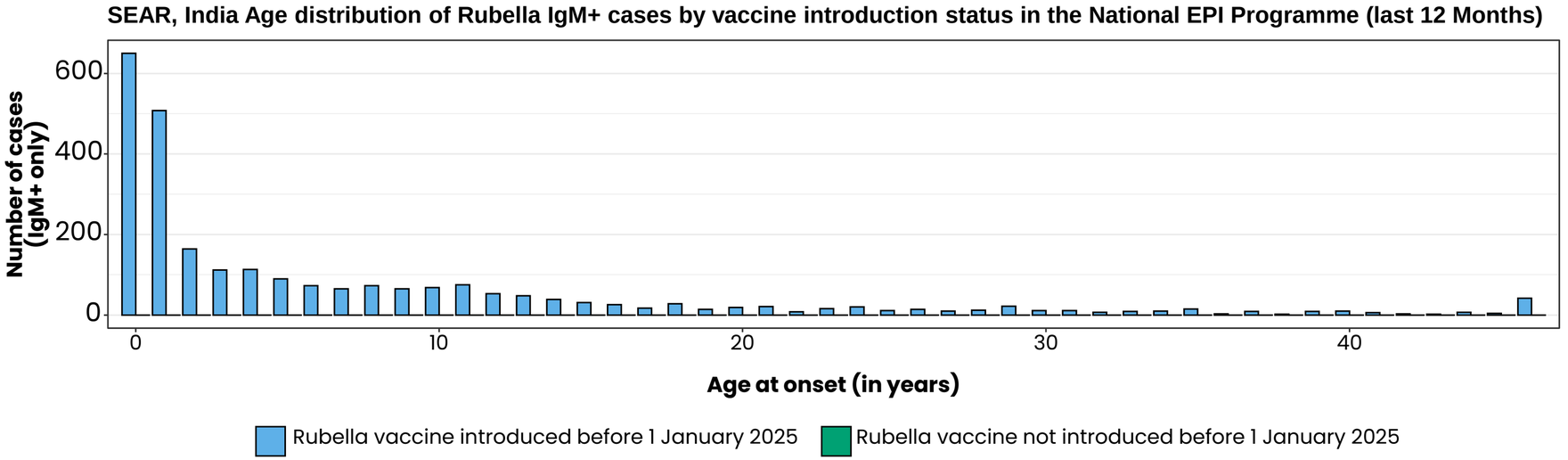




Rubella cases (SEAR, India)



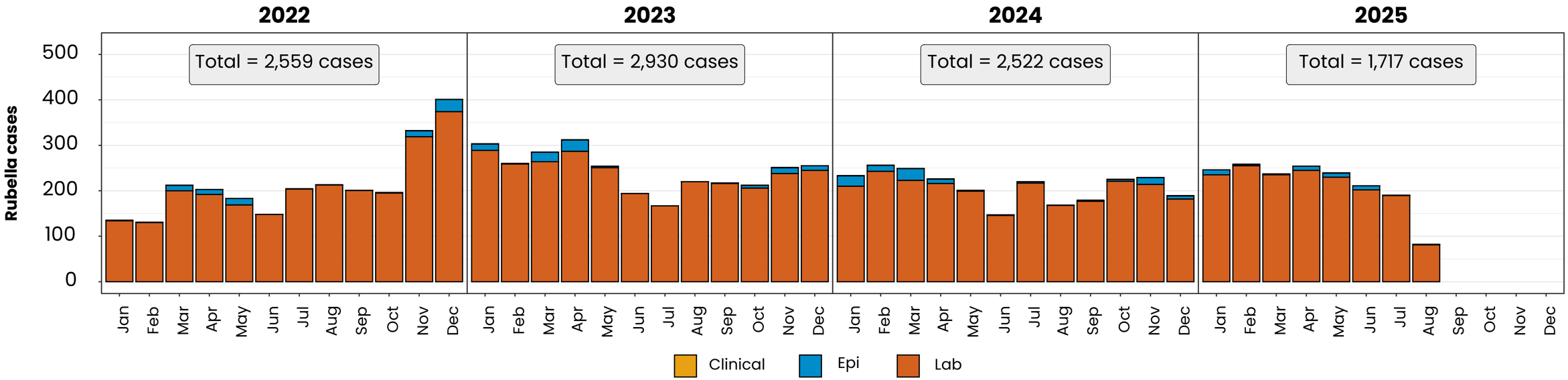
Top 10 countries (last 12 M)			
Country	**RCV in RI**	**Cases**	**% of Total**
India	2018	2539	100

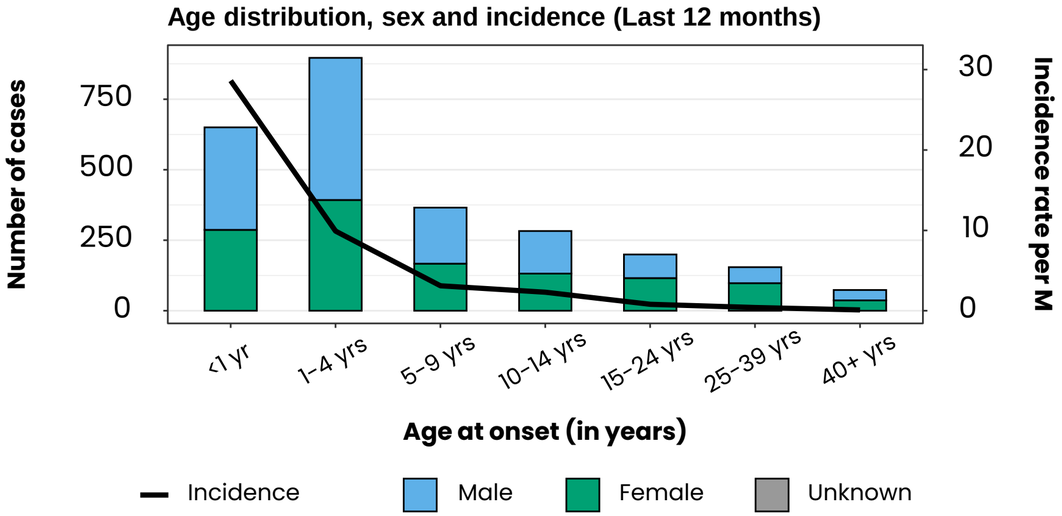


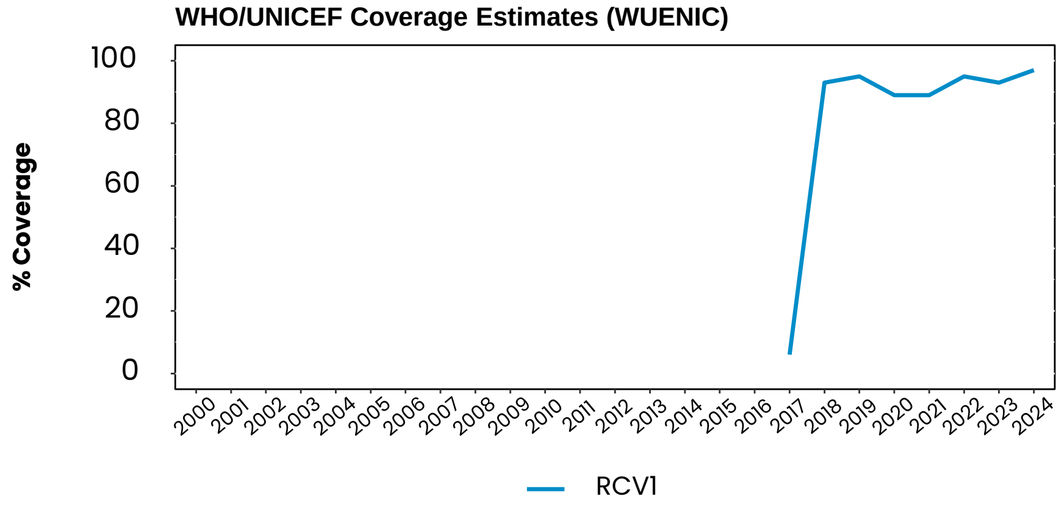
Notes: Based on data received 2025-09 Data Source: IVB Database.

Rubella cases: India

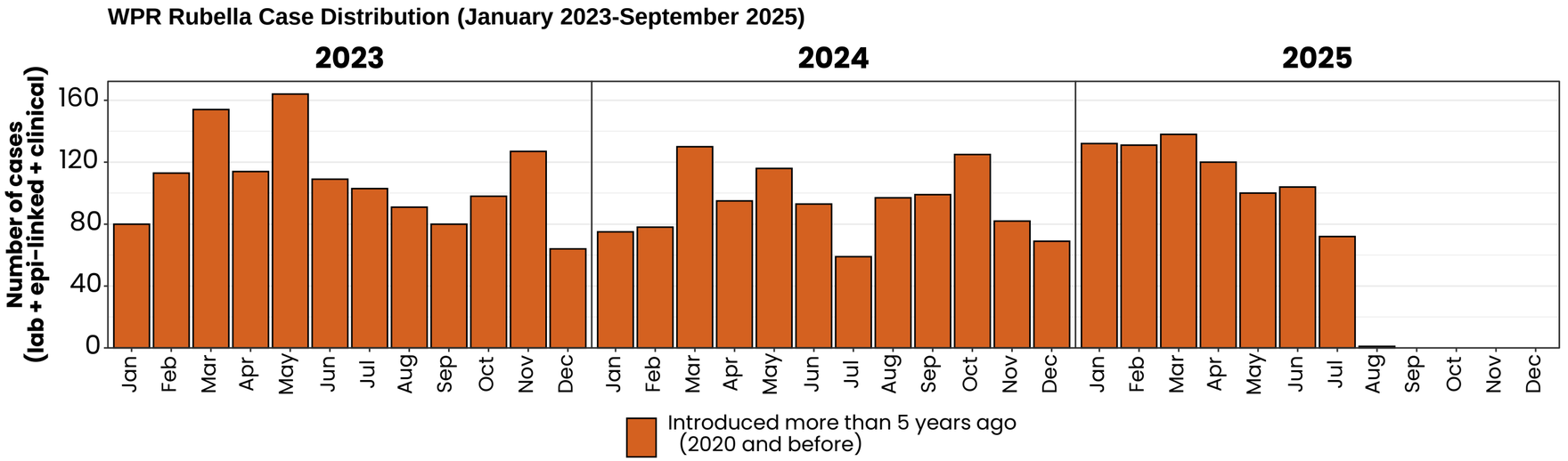
ELIMINATION STATUS: **ENDEMIC**



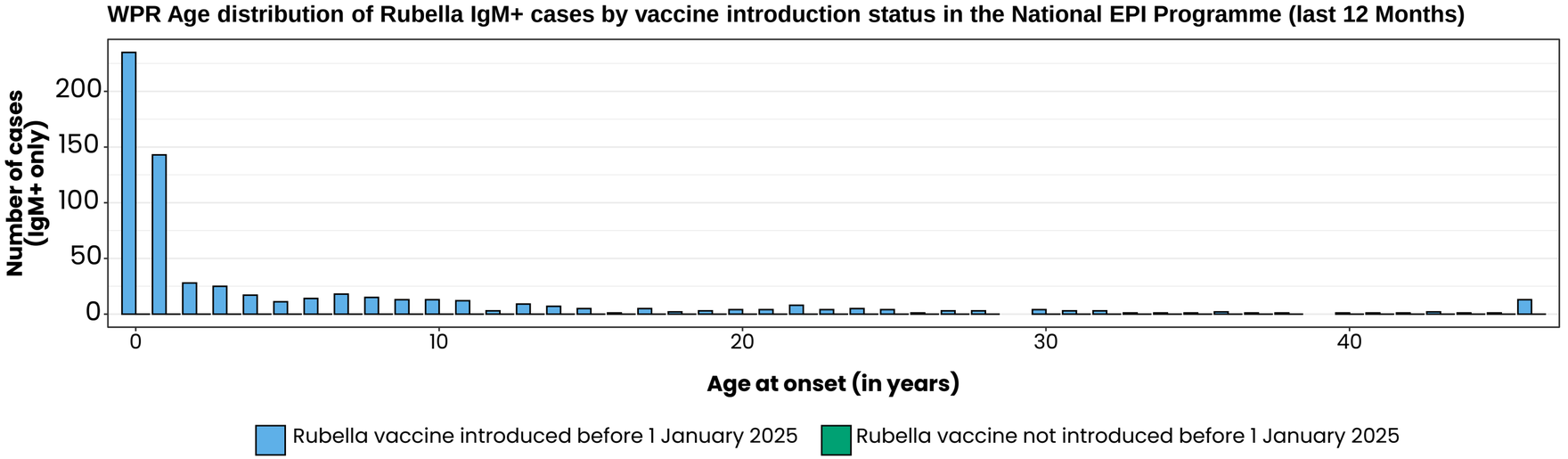




Rubella cases (WPR)



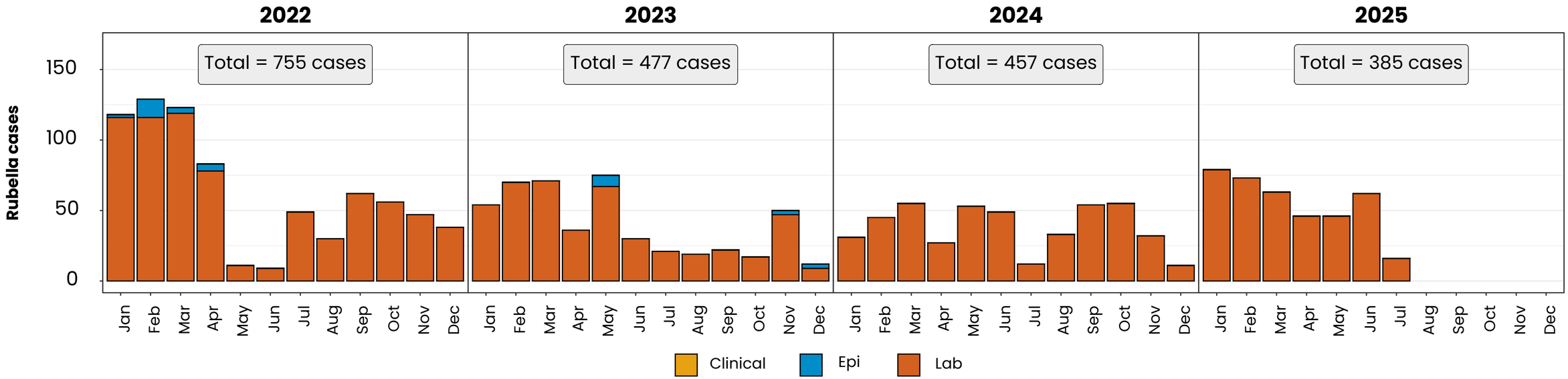
Top 10 countries (last 12 M)			
Country	**RCV in RI**	**Cases**	**% of Total**
Indonesia	2018	537	46
China	2008	393	34
Philippines	2010	95	8
Malaysia	2004	89	8
Cambodia	2013	33	3
Japan	1995	14	1
Viet Nam	2015	12	1

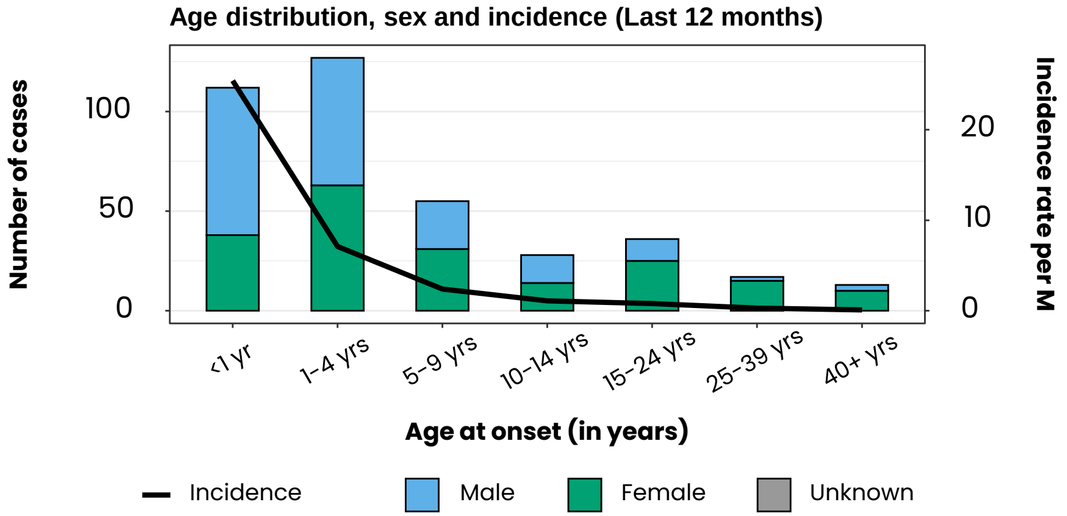


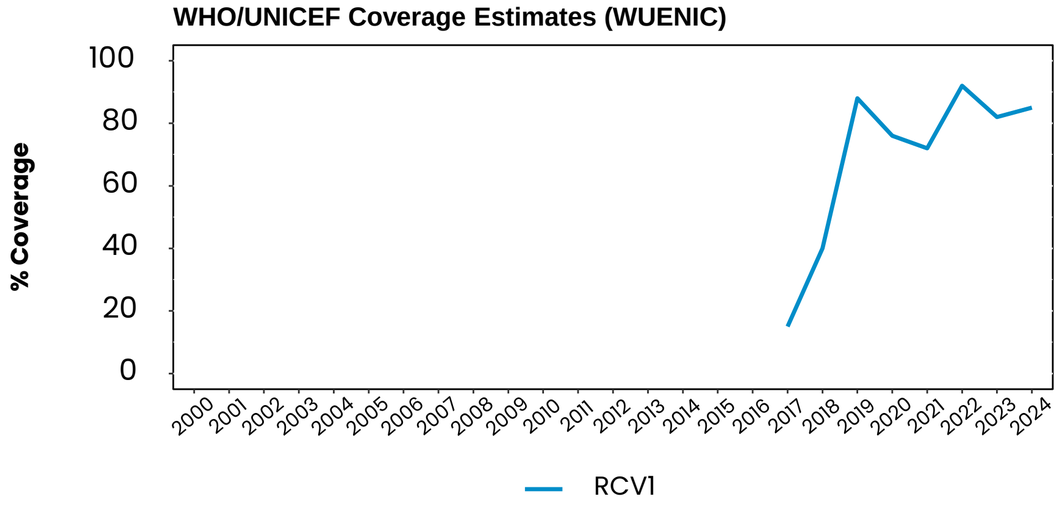
Notes: Based on data received 2025-09 Data Source: IVB Database.

Rubella cases: Indonesia

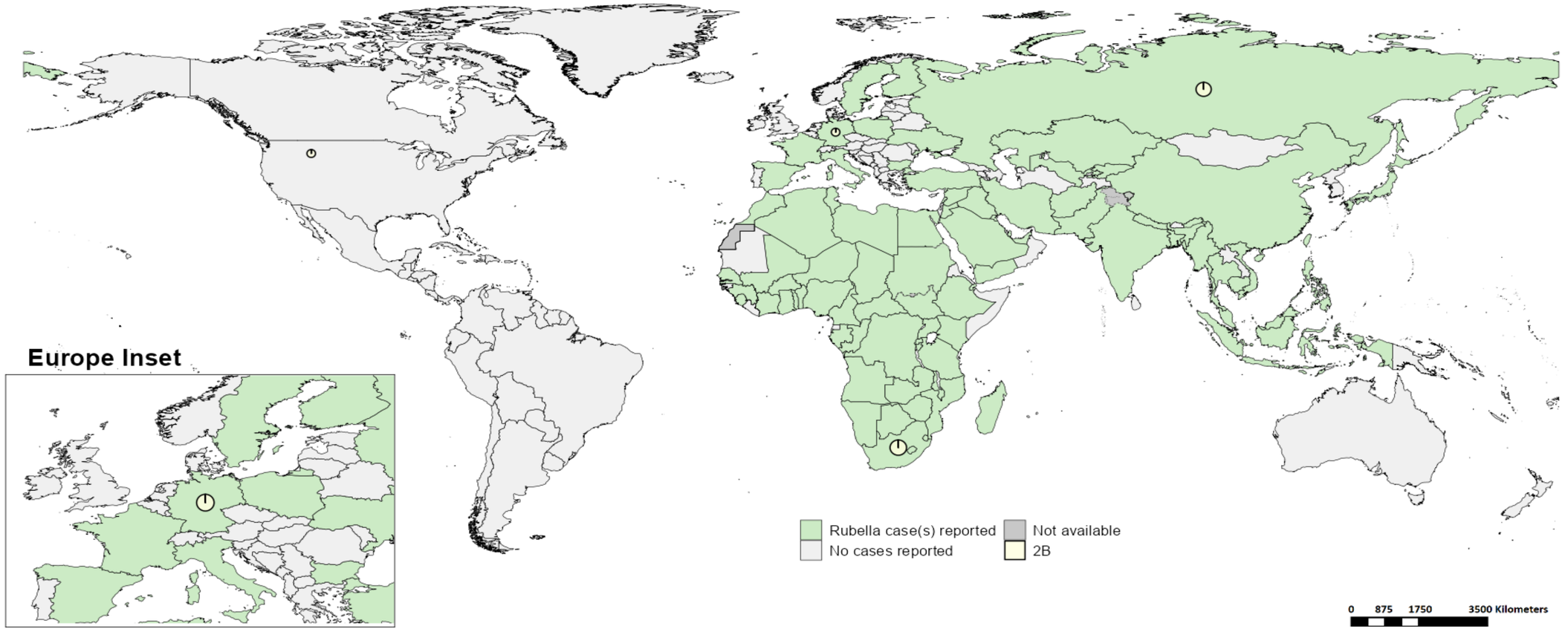
ELIMINATION STATUS: **ENDEMIC**







Distribution of rubella genotypes (last 12 months)



World Health Organization

Data source: IVB Database

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Data Source: RUBENS2 database (Genotypes) and IVB Database (Incidence) as of 2025-09-09 and covering the period between 2024-08 and 2025-07 - Pie charts proportional to the number of sequenced viruses

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	44/47	57,461	50,275	16,253 (32)	1,035 (2)	28,737 (57)	32,521	2,210 (7)	400 (1)	25,619 (79)
AMR	26/35	9,797	9,723	1,790 (18)	246 (3)	7,687 (79)	9,488	266 (3)	104 (1)	9,118 (96)
EMR	20/21	84,633	55,135	22,831 (41)	24 (0)	32,280 (59)	48,903	776 (2)	26 (0)	48,101 (98)
EUR	42/53	30,407	27,370	12,428 (45)	123 (0)	16,670 (61)	12,449	815 (7)	118 (1)	11,533 (93)
SEAR	10/10	48,625	46,078	4,645 (10)	532 (1)	40,875 (89)	45,815	1,391 (3)	379 (1)	44,040 (96)
WPR	26/28	34,561	33,422	8,753 (26)	668 (2)	23,967 (72)	27,803	781 (3)	160 (1)	26,858 (97)
Total	**168/194**	**265,484**	**222,003**	**66,700 (30)**	**2,628 (1)**	**150,216 (68)**	**176,979**	**6,239 (4)**	**1,187 (1)**	**165,269 (93)**

2024

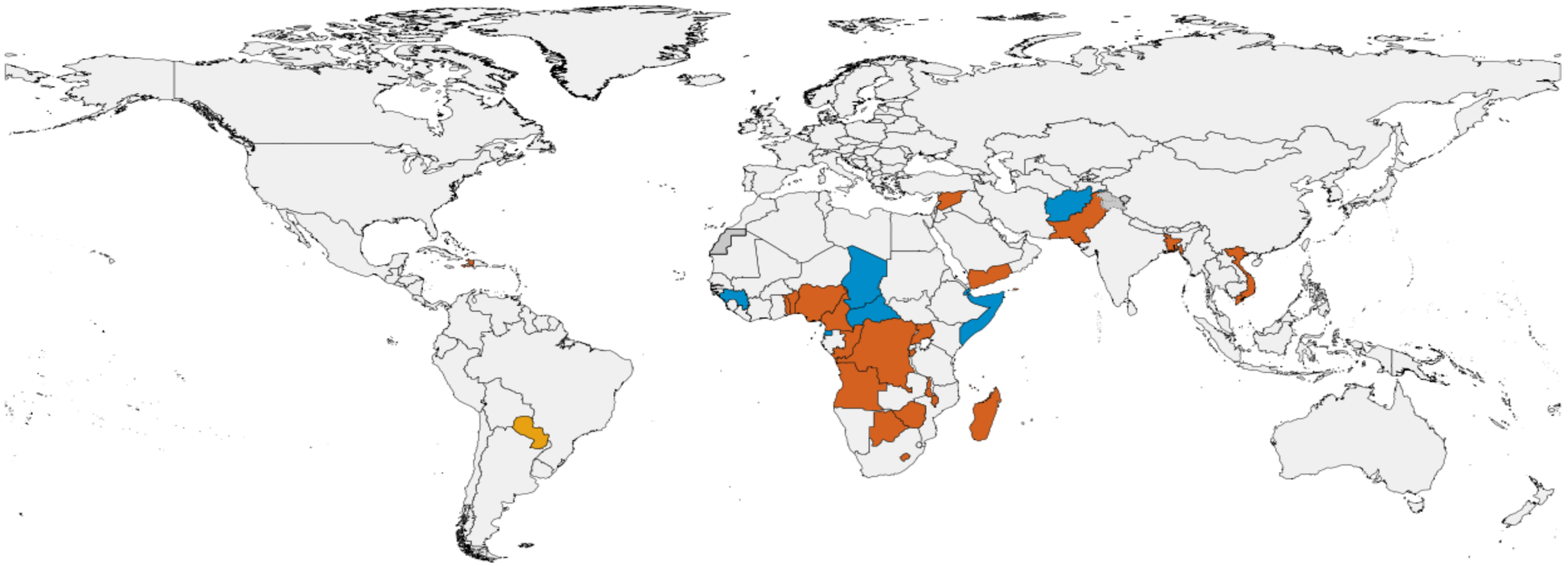
Region	Member States*	Specimens received	Measles tested	Measles positive n(%)	Measles equivocal n(%)	Measles negative n(%)	Rubella tested	Rubella positive n(%)	Rubella equivocal n(%)	Rubella negative n(%)
AFR	43/47	120,445	109,377	19,102 (17)	1,068 (1)	61,018 (56)	95,315	14,882 (16)	465 (0)	51,744 (54)
AMR	29/35	8,436	8,983	326 (4)	193 (2)	8,464 (94)	8,038	160 (2)	83 (1)	7,795 (97)
EMR	21/21	116,666	98,271	38,273 (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	10/10	107,744	105,794	13,309 (13)	1,097 (1)	91,234 (86)	101,687	2,551 (3)	691 (1)	98,445 (97)
WPR	26/28	46,024	44,029	11,240 (26)	3,086 (7)	33,538 (76)	33,773	1,137 (3)	2,437 (7)	32,463 (96)
Total	**173/194**	**558,811**	**503,696**	**160,549 (32)**	**5,977 (1)**	**307,701 (61)**	**384,952**	**21,503 (6)**	**4,116 (1)**	**333,107 (87)**

Notes: Based on data received 2025-09 - * Member States Reporting / Total Member States in Region

Supplementary Immunization Activities

World Health Organization | IVB

Upcoming MMR, MR and Measles campaigns (2025-2026)



World Health Organization

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	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	2025-10-04	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	Chad	FollowUp	MEASLES	2025-11-??	Planned	9-59 M	NATIONAL	3772072
2025	AFR	Comoros	FollowUp	MR	2025-11-??	Planned	9-59 M	NATIONAL	113688
2025	AFR	Uganda	FollowUp	MR	2025-11-??	Planned	9-59 M	NATIONAL	7685529
2025	AFR	Botswana	FollowUp	MR	2025-11-03	Planned	9-59 M	NATIONAL	223959
2025	AFR	Togo	FollowUp	MR	2025-11-24	Planned	9 M-9 Y	NATIONAL	2201427
2025	AFR	Democratic Republic of the Congo	CatchUp	MR	2025-11-26	Planned	9 M-14 Y	NATIONAL	61697195
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	Nigeria	FollowUp	MR	2026-01-??	Planned	9-59 M	SUBNATIONAL	26123099
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	Benin	Followup	MR	2026-NA-??	Planned	9-59 M	NATIONAL	2136671
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	AFR	Madagascar	CatchUp	MR	2026-NA-??	Planned	9 M-14 Y	NATIONAL	11392183
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

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