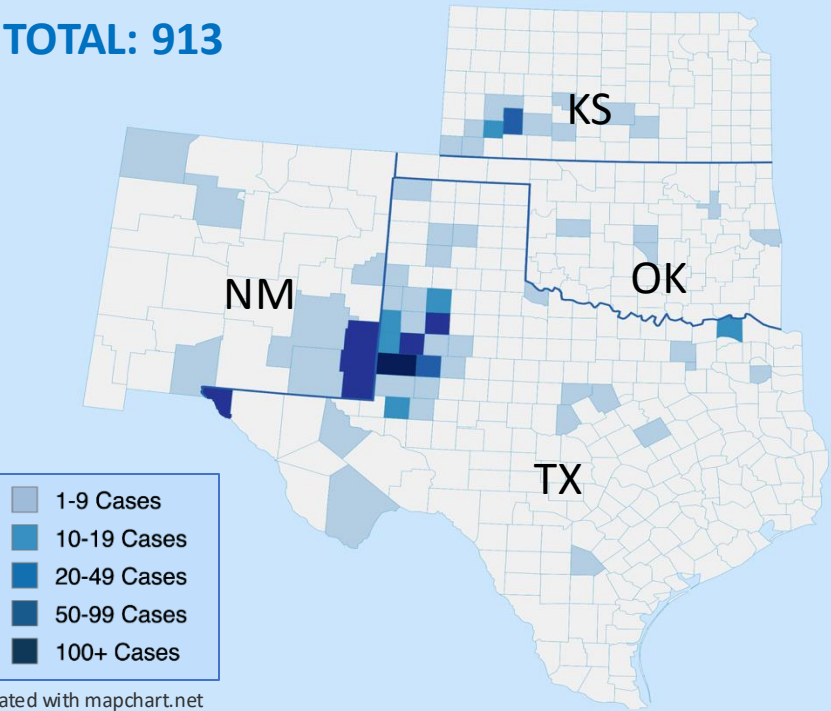





YALE SCHOOL OF PUBLIC HEALTH - ESF-8 VIRTUAL MEDICAL OPERATION CENTER SPECIAL REPORT

MEASLES OUTBREAK - SOUTHWEST U.S. - 2025

TOTAL: 913



MORBIDITY AND MORTALITY

STATE	CASES 	HOSPITALIZATIONS 	DEATHS 
TX	745 (+3)*	94	2
NM	81 (+2)	7	1
OK	18 (+1)	0	0
KS	69 (+10)	3	0
TOTAL	913 (+16)	104	3

* This includes El Paso's numbers that were posted after TX

BACKGROUND

TIMELINE

CURRENT SITUATION

EL PASO

EPI CURVE / CASES OVER TIME

EPI SUMMARY

US OUTLOOK

MEXICO

CANADA

CONTRIBUTORS

6/6/2025
2200 HRS EDT

RISK ASSESSMENT IN OUTBREAK AREAS

Risk for Localized Spread	Risk to unvaccinated populations in and around the outbreak areas	Risk to Children	Potential for sustained transmission
HIGH	HIGH	HGH	HIGH

LINKS

TEXAS LINKS

- [TEXAS DEPARTMENT OF STATE HEALTH SERVICES](#)
- [FACEBOOK | X](#)
- [HEALTH ALERTS](#)
- [THE SOUTH PLAINS PUBLIC HEALTH DISTRICT](#)

NEW MEXICO LINKS

- [NEW MEXICO DEPARTMENT OF HEALTH](#)

OKLAHOMA LINKS

- [OKLAHOMA STATE DEPARTMENT OF HEALTH](#)

KANSAS

- [KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT](#)

RESOURCES FOR HEALTHCARE PROVIDERS

- [CDC – MEASLES FOR THE HEALTHCARE PROFESSIONALS](#)
- [CDC VIDEO: MEASLES CLINICAL FEATURES AND DIAGNOSIS](#)
- [CDC CLINICAL IMAGES OF MEASLES](#)
- [CDC LABORATORY TESTING FOR MEASLES](#)
- [CDC ROUTINE VACCINATION RECOMMENDATIONS](#)
- [CDC ISOLATION RECOMMENDATIONS](#)
- [CDC: MEASLES CONTROL IN HEALTHCARE SETTINGS](#)
- [CDC ALERT SIGN INFOGRAPHIC](#)
- [CDC POSTER FOR OFFICE DISPLAY](#)
- [NY HEALTH: RECOGNIZING MEASLES FACT SHEET](#)
- [NY HEALTH: DEALING WITH VACCINE HESITANCY](#)
- [MEASLES POST-EXPOSURE PROPHYLAXIS](#)
- [MEASLES REVIEW FOR PROVIDERS](#)

MEASLES TESTING LABORATORIES

- [CDC MEASLES VIRUS LABORATORY](#)

RESOURCES FOR THE PUBLIC

- [CDC – MEASLES](#)
- [MEASLES CASES AND OUTBREAKS](#)
- [NYSDOH: YOU CAN PREVENT MEASLES](#)
- [CDC VIDEO: GET VACCINATED AND PREVENT MEASLES](#)
- [CDC VACCINE SHOT FOR MEASLES](#)
- [DIRECTORY FOR LOCAL HEALTH DEPARTMENTS](#)

RESOURCES FOR EMS PROVIDERS

- [GUIDANCE FOR SUSPECTED MEASLES PATIENT](#)
- [NYSDOH POLICY STATEMENT](#)

PORTALS, BLOGS, AND RESOURCES

- [CIDRAP](#)
- [CORI](#)
- [FORCE OF INFECTION](#)
- [KAISER HEALTH NEWS](#)
- [MEDPAGE TODAY](#)
- [NY STATE GLOBAL HEALTH UPDATE](#)
- [THE PANDEMIC CENTER TRACKING REPORT](#)
- [YOUR LOCAL EPIDEMIOLOGIST](#)

BACKGROUND

TYPE OF PUBLIC HEALTH EMERGENCY: [LARGE REGIONAL MEASLES OUTBREAK](#)

OVERVIEW:

A measles outbreak originating in **West Texas** has spread in the US to **New Mexico, Oklahoma, and Kansas**, resulting in **104 hospitalizations** and **3 confirmed deaths** — including **two previously healthy children** in Texas and **one adult** in New Mexico. These are the **first U.S. measles deaths since 2015**, and the **first pediatric deaths since 2003**. Genetic and epidemiological evidence suggest that this outbreak has also contributed to the current outbreak in Chihuahua, Mexico, indicating clear cross-border transmission.

THE VIRUS:

[Measles](#) is a highly contagious viral disease transmitted primarily through **respiratory droplets** from coughing or sneezing. Symptoms include **high fever, cough, runny nose, conjunctivitis**, and a distinctive **red, blotchy rash**. The virus can remain **airborne or infectious on surfaces for up to two hours**, contributing to its rapid spread.

VACCINATION & GLOBAL TRENDS

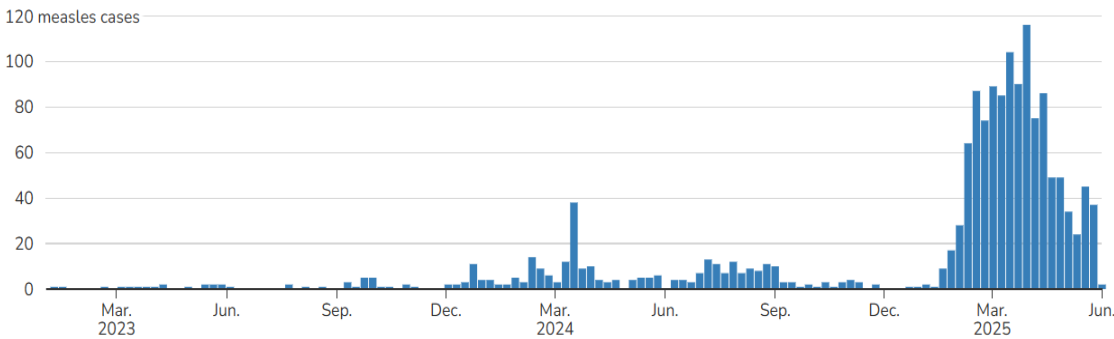
Despite being preventable through the [MMR](#) (measles, mumps, and rubella) vaccine, outbreaks continue to occur in under-vaccinated communities, leading to severe health outcomes and increased transmission risk ([CDC](#)). Over the past 20 years, vaccination rates have been declining globally, leading to a rise in certain regions, including the [United States, Canada, Mexico, South America](#), and [parts of Europe](#). In 2025, North and South America reported 11 times more cases than during the same period in 2024. In Europe, measles rates are at their highest point in 25 years.

If current vaccination trends persist, the risk of measles becoming endemic once more, with recurrent outbreaks, is inevitable.

CONCERNS: With the summer travel kicking off—peaking between now and Labor Day—we can expect domestic and international movement to fuel additional measles importations and spread in the United States. Measles is not inherently seasonal, but transmission often surges during periods of high travel, such as summer vacations, when unvaccinated or under-immunized individuals mix in crowded settings.

[MEASLES CASES IN 2025 - CDC](#)

1168 (+80) [CONFIRMED](#) MEASLES CASES (AS OF 6/5/25)



As of June 5, 2025, a total of 1168 confirmed* measles cases were reported by 34 jurisdictions: Alaska, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Missouri, Montana, Nebraska, New Jersey, New Mexico, New York City, New York State, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Virginia, and Washington.

Age

Under 5 years: 339 (29%)
5-19 years: 439 (38%)
20+ years: 381 (33%)
Age unknown: 9 (1%)

Vaccination Status

Unvaccinated or Unknown: 95%
One MMR dose: 2%
Two MMR doses: 3%

Percent Hospitalized: 12%

Percent of Age Group Hospitalized

Under 5 years: 21% (71 of 339)
5-19 years: 8% (34 of 439)
20+ years: 8% (31 of 381)
Age unknown: 11% (1 of 9)

Deaths: 3

There have been 3 confirmed deaths from measles.

TIMELINE (JANUARY – JUNE 2025)

JANUARY 2025 INDEX CASES IDENTIFIED

1/29

South Plains Public Health District, TX reports a measles case in Gaines County.

FEBRUARY 2025 OUTBREAK DECLARED & SPREADS

2/5/25

The Texas Department of State Health Services (DSHS) declares an outbreak. 6 cases are identified, all among unvaccinated school-aged children from Gaines County.

2/15

The New Mexico Department of Health (NMDOH) confirms an **outbreak** with 14 cases in Lea County.

2/26/25 (TX):

DSHS reports the death of a school-aged child who had been hospitalized in Lubbock.

2/28

DSHS reports 146 cases, 1 fatality, and 20 hospitalized.

NMDOH reports 20 cases.

MARCH 2025 RAPID REGIONAL EXPANSION

3/1–3/15

DSHS reports 259 cases, 1 fatality, and 34 hospitalizations..

3/6 - NMDOH reports the death of a male adult

3/11- Oklahoma (OSDH) reports **two linked cases** to the Texas outbreak.

3/13 - First Kansas case genetically linked to TX.

3/16 - 5/31

DSHS reports 400 cases, 1 fatality, and 41 hospitalized individuals.

NMDOH reports 44 cases, 1 fatality, and 2 hospitalized

OSDH reports 9 cases.

KDHE reports 23 cases.

APRIL 2025 PEAK OF TRANSMISSION

4/1 - 4/15

4/5 - DSHA reports the death of a second child.

DSHS reports 561 cases, 2 fatalities, and 58 hospitalizations..

NMDOH reports 63 cases, 1 fatality, and 5 hospitalizations.

OSDH reports 12 cases

KDHE reports 38 cases and 1 hospitalization

4/16 - 4/31

DSHS updates the outbreak to 663 cases, 2 fatalities, and 83 hospitalized individuals.

NMDOH reports 6 cases, 1 fatality, and 2 hospitalized

OSDH reports 16 cases.

KDHE reports 46 cases and 1 hospitalization.

MAY 2025 SLOWING BUT PERSISTENT

5/1- 5/15

DSHS reports 718, 2 fatalities, and 92 hospitalizations.

NMDOH reports 71 cases, 1 fatality, and 7 hospitalizations..

OSDH reports 17 cases.

KDHE reports 54 cases and 2 hospitalizations.

5/16 – 6/6

DSHS reports 745 cases, 2 fatalities, and 94 hospitalizations.

NMDOH reports 81 cases, 1 fatality, and 7 hospitalizations.

OSDH reports 18 cases.

KDHE reports 69 cases and 3 hospitalizations.

CURRENT SITUATION

As of June 3, 2025, the Southwestern outbreak has **912 cases**, including confirmed and pending cases across **Texas, New Mexico, Oklahoma, and Kansas**. Experts warn this is likely a **severe undercount**. The situation remains fluid, though we are starting to see a **significant reduction in new cases in Texas**. Experts project the outbreak could last up to a year.

CURRENT CASE COUNT: 913

- **Texas: 745 (+3)** (55% of cases are in Gaines County)
- **New Mexico: 81 (+2)** (83% of cases are from Lea County)
- **Oklahoma: 18 (+1)**
- **Kansas: 69 (+10)** (38.89% of the cases are from Gray County)

HOSPITALIZATIONS: 104

- **Texas: 94** – This accounts for 13% of all cases in Texas.
- **New Mexico: 7** – This accounts for 9.47% of all cases in New Mexico.
- **Kansas: 3** – This accounts for 5.08% of all cases in Kansas.

DEATHS: 3

- **Texas: 2** – This is 0.28% of all cases in Texas.
- **New Mexico: 1** – This is 1.35% of all cases in New Mexico.

US NATIONAL CASE COUNT: 1,173

INTERNATIONAL SPREAD

- **Mexico: 2080 (+245), 5 (+1) fatalities**
 - **Chihuahua, Mexico: 1,940 (+83) cases, 4 fatalities, 5 currently hospitalized.**
- **Canada: 3,005 (+214), 1 fatality (new)**
 - **Ontario, Canada: 2,047 (+109) cases, 158 hospitalizations**
 - **Alberta, Canada: 724 (+45) cases, 4 currently hospitalized**

TEXAS: The 2025 measles outbreak in Texas exhibited a steep and sustained rise in cases beginning in late January, peaking the week of March 22 with 78 new infections. The curve reflects rapid early transmission, likely fueled by significant immunity gaps within communities. Even after the peak, the state experienced a prolonged plateau with 60–70 weekly cases through early April, suggesting continued spread across multiple population clusters. A gradual decline followed, with weekly cases dropping to the single digits by mid-May, marking a slow path to containment. However, sporadic cases persisted through the end of the month, indicating lingering transmission. The shape of the epidemic curve suggests that while public health interventions eventually curbed the outbreak, earlier action and targeted vaccination efforts might have shortened its duration and reduced its magnitude.

NEW MEXICO: The 2025 measles outbreak in New Mexico began with a sharp rise in early February, recording 14 cases in the first week. Weekly case counts remained elevated through March, peaking at 10 cases during the week of March 22. The outbreak showed a slow decline, with intermittent spikes in April, suggesting continued transmission in vulnerable communities. By mid-May, cases had fallen to two or fewer per week. The prolonged plateau highlights challenges in early containment and the need for targeted vaccination and outreach in under-immunized areas.

OKLAHOMA: Oklahoma experienced a brief, small-scale outbreak that peaked in late March. By early May, case counts had declined rapidly to sporadic, isolated instances, indicating that transmission was effectively contained.

KANSAS: The 2025 measles outbreak in Kansas began with isolated cases in mid-February and rapidly escalated by early March, peaking with nine confirmed cases during the week of March 8. The epidemic curve suggests a pattern of sustained community transmission, with a first wave from late February to late March followed by a secondary rise in April and early May. This bimodal curve points to at least two clusters of transmission, potentially fueled by delays in diagnosis, gaps in vaccination coverage, or spread into new susceptible populations.

CURRENT SITUATION

AGES OF CASES:

WEST TEXAS OUTBREAK				
0-4 Years	5-17 Years	18+ Years	Pending	Total
218 (29%)	281 (38%)	241 (32%)	4 (0.5%)	745
NEW MEXICO OUTBREAK				
0-4 Years	5-17 Years	18+ Years	Pending	Total
24 (30%)	20 (25%)	37 (46%)	0	81
KANSAS OUTBREAK				
0-4 Years	5-17 Years	18+ Years	Pending	Total
24 (35%)	33 (48%)	12 (17%)	0	69
OKLAHOMA OUTBREAK				
0-4 Years	5-17 Years	18+ Years	Pending	Total
15Cases Confirmed, 3 Probable – no ages provided			3	18

Genotype D8 Lineage: MVs/Ontario.CAN/47.24 — Cross-Border Circulation Summary (2024–2025)

The detection of measles virus lineage MVs/Ontario.CAN/47.24 across Canada, the United States, and Mexico supports the hypothesis of a travel-associated importation event—likely originating in Canada or involving individuals with recent international travel—in late 2024 or early 2025.

Initially identified in Ontario, this lineage has since been documented in multiple provinces on Canada; US states, including Texas, New Mexico, Oklahoma, and Kansas; and northern Mexico, particularly Chihuahua and Durango.

Its wide geographic spread and consistent genetic profile highlight the persistence of cross-border transmission, especially in regions with low vaccination coverage. Many of the reported cases

have occurred in communities with high rates of nonmedical exemptions or limited access to immunization, where population immunity is insufficient to prevent sustained outbreaks.

The emergence of MVs/Ontario.CAN/47.24 in both rural and urban settings underscores **gaps in regional surveillance systems** and the urgent need for **improved coordination across borders in outbreak investigation, case detection, and immunization efforts**. Its continued spread serves as a critical reminder of measles’ high transmissibility and the threat posed by even a single imported case in under-immunized populations.

CANADA: Genotype D8, specifically lineage **MVs/Ontario.CAN/47.24**, was first detected in **Ontario** in late 2024. By early 2025, the lineage had been identified in **57 confirmed cases**, primarily in Ontario, with additional cases reported in **Quebec, Manitoba, and British Columbia**. Most cases occurred among **unvaccinated individuals**. (Source: [PAHO](#))

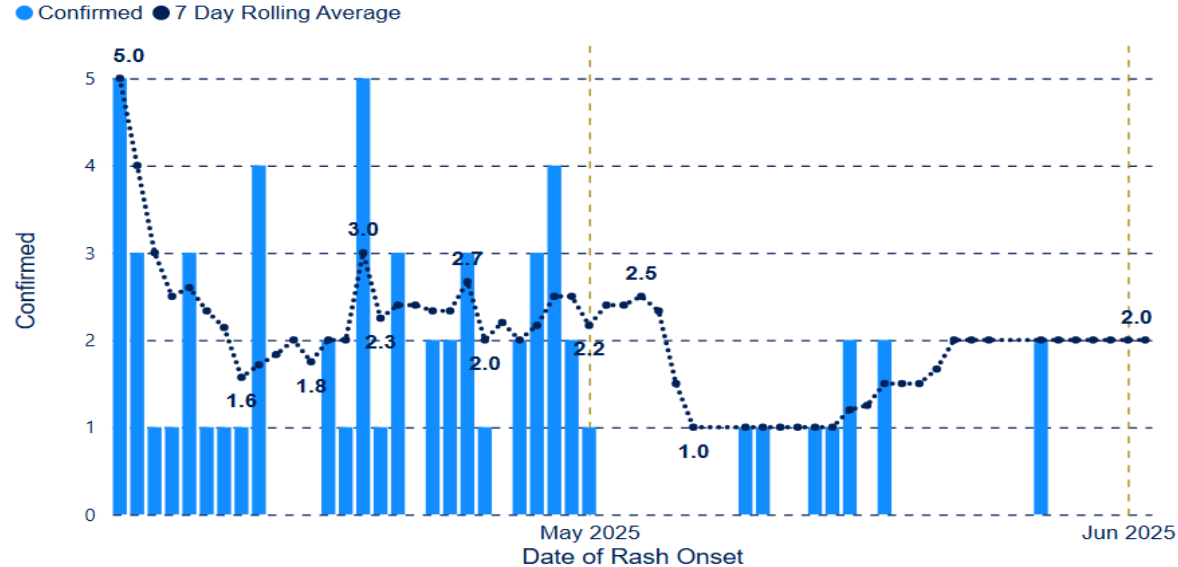
UNITED STATES: Although specific lineages are not always reported, **genotype D8** has been the predominant strain in recent outbreaks across **Texas, New Mexico, Oklahoma, and Kansas**. Genetic sequencing has linked the virus circulating in the U.S. to the same D8 lineage found in Canada and Mexico, suggesting **cross-border transmission**. However, the precise source of initial introduction remains undetermined. (Source: [WHO](#))

MEXICO: In February 2025, a case of measles in **Chihuahua** was confirmed to be of **genotype D8, lineage MVs/Ontario.CAN/47.24**. Contact tracing and enhanced surveillance efforts identified **17 additional related cases**, confirming **local transmission** of this lineage. (Source: [El Diario de Chihuahua](#), [PAHO](#))

CURRENT SITUATION: EL PASO

Confirmed Cases by Age				Vaccination Status	
Age	Cases	Hospitalizations	Deaths	Status	Number
0-4	18	2	0	Unvaccinated	22
5-17	4	0	0	Unknown	24
18+	40	3	0	1 Dose	7
				2 Doses	9
TOTAL	62	5	0	TOTAL	62

Cases by Gender	
Gender	Cases
Male	29
Female	33
TOTAL	62



SOURCES: [DSHS](#), [KVIA](#), [KTSM](#), [KFOX](#), [KISS.FM](#), [YISD](#), [PBS](#), [EL PASO MEASLES OUTBREAK DASHBOARD](#)

- With a population of approximately 679,000, El Paso recorded its first five confirmed measles cases on April 4, 2025. By June 5, 2025, the City of El Paso Department of Public Health had reported 62 confirmed cases in the region: 40 among adults (≥ 18 years) and 22 among young children (< 4 years).
- Initial Importations and Spread:** The outbreak’s early cases were linked to importations from Gaines County, Texas, and to cross-border travel to Chihuahua, Mexico. El Paso’s position as a border city, with heavy binational traffic, facilitated multiple introductions of the measles virus into urban public spaces (e.g., malls, restaurants, schools). Genetic sequencing confirmed the D8 genotype circulating among cases on both sides of the border.
- Adult-Predominant Pattern:** Unlike most U.S. outbreaks, where young children typically comprise the majority of cases, El Paso saw a disproportionate burden among adults. Two factors likely contributed:
 - High Pediatric Coverage:** Kindergarten- and seventh-grade vaccination rates in El Paso County exceeded 96%, helping to shield children and delay widespread pediatric transmission.
 - Uncertainty Among Adults:** Many adults either never received two documented MMR doses or lacked any vaccination record, leading to clusters of susceptible adults in workplaces and community venues.

Risk Factors and Challenges

- Urban Density and Public Venues:** High-traffic locations served as focal points for exposure events, underscoring how urban environments accelerate transmission if pockets of susceptibility exist.
- Misinformation and Access Barriers:** Language barriers, concerns among undocumented residents about seeking care, and lingering vaccine hesitancy— sometimes fueled by unproven alternative “remedies”— hampered early containment efforts. Public health messaging now stresses that the MMR vaccine is free, safe, and available regardless.

CURRENT SITUATION: VACCINATION STATUS

STATE	VACCINATED WITH 1 DOSE	VACCINATED WITH 2 DOSES	UNVACCINATED/ UNKNOWN	TOTAL CASES
TX	19	21	705*	745*

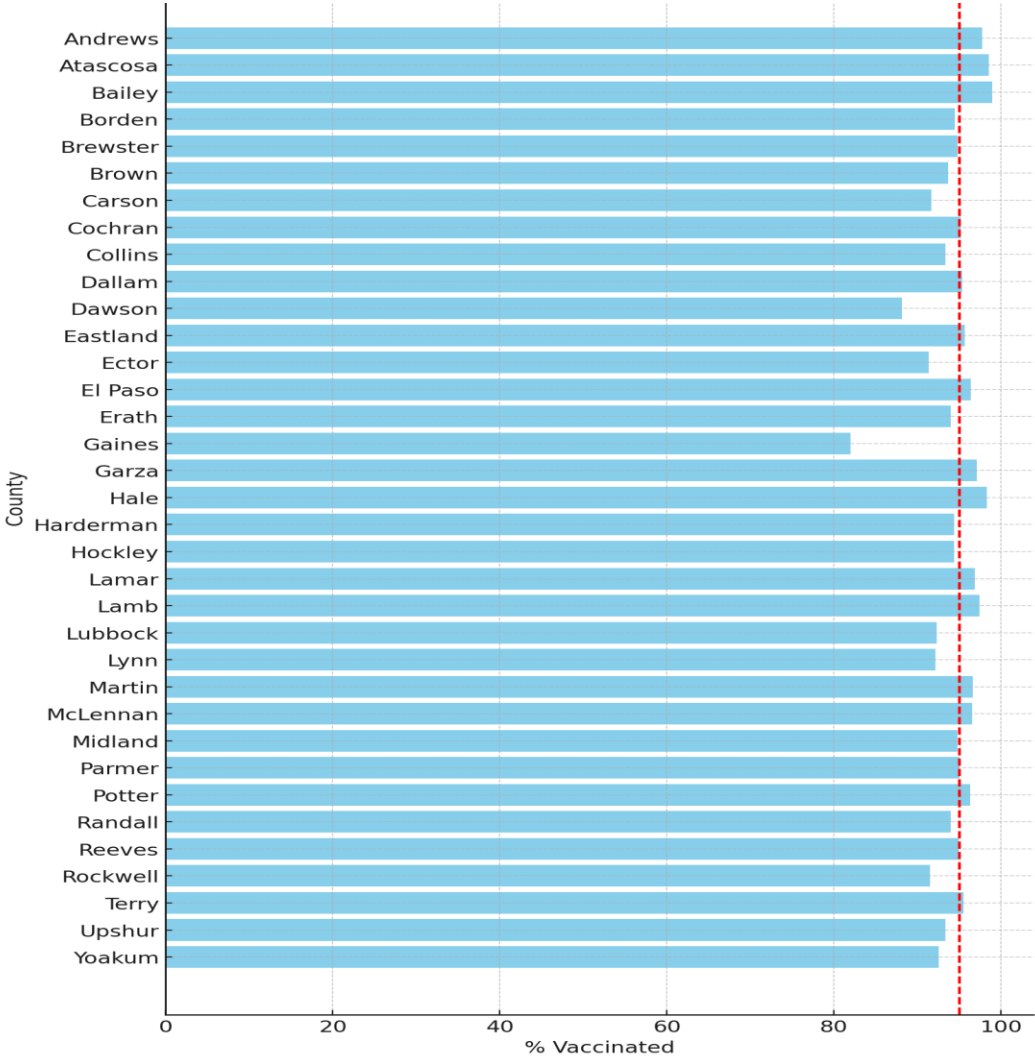
NOTE: The TX unvaccinated/unknown category includes individuals with no documented doses of measles vaccine administered more than 14 days prior to symptom onset.
Numbers adjusted based on additional information from El Paso after TX DSHS update.

STATE	VACCINATED WITH AT LEAST ONE DOSE	NOT VACCINATED	UNKNOWN	TOTAL CASES
NM	13	52	16	81

STATE	VACCINATED WITH ONE DOSE	VACCINATED WITH TWO DOSES	UNVACCINATED/ UNKNOWN	TOTAL CASES
OK	0	1	16	17

STATE	AGE APPROPRIATELY VACCINATED	NOT AGE APPROPRIATELY VACCINATED	NOT VACCINATED	PENDING VERIFICATION/ UNABLE TO VERIFY	TOTAL CASES
KS	5	1	58	5	69

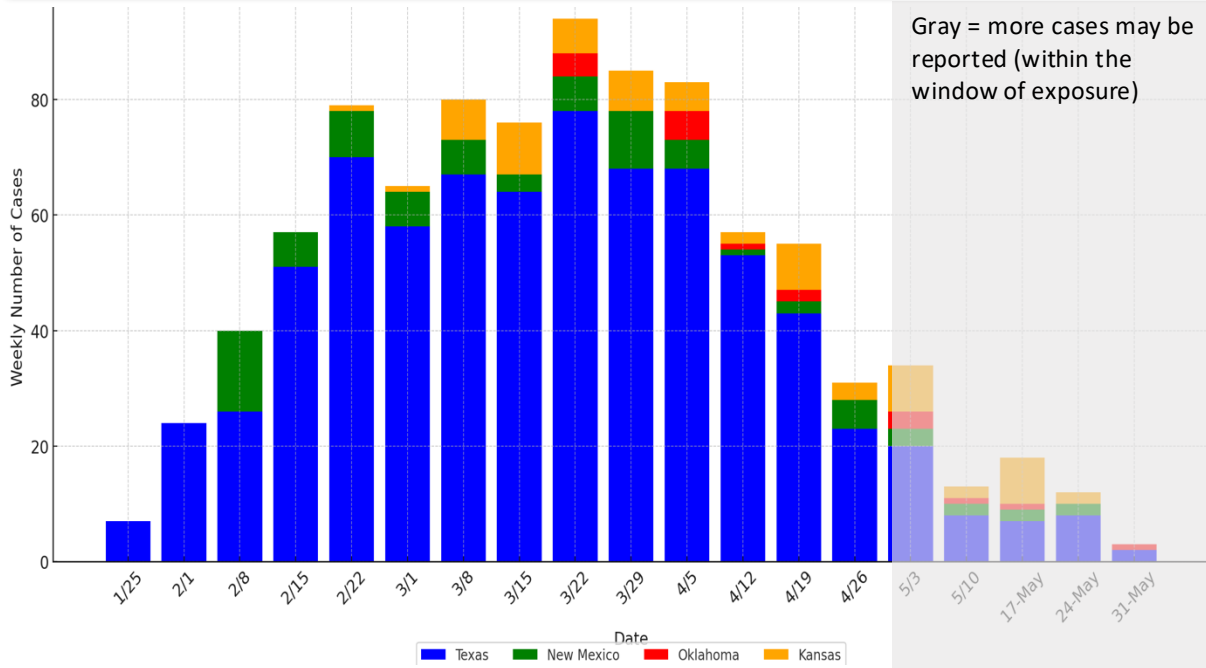
MMR Vaccination Coverage by County
(Dotted Red Line at 95% Threshold)



Among the affected counties in Texas, 19 out of 35 have a vaccination rate below 95%, the recommended rate for herd immunity (SOURCE: [Annual Report on Immunization Status](#)).

EPI CURVE AND CASES OVER TIME

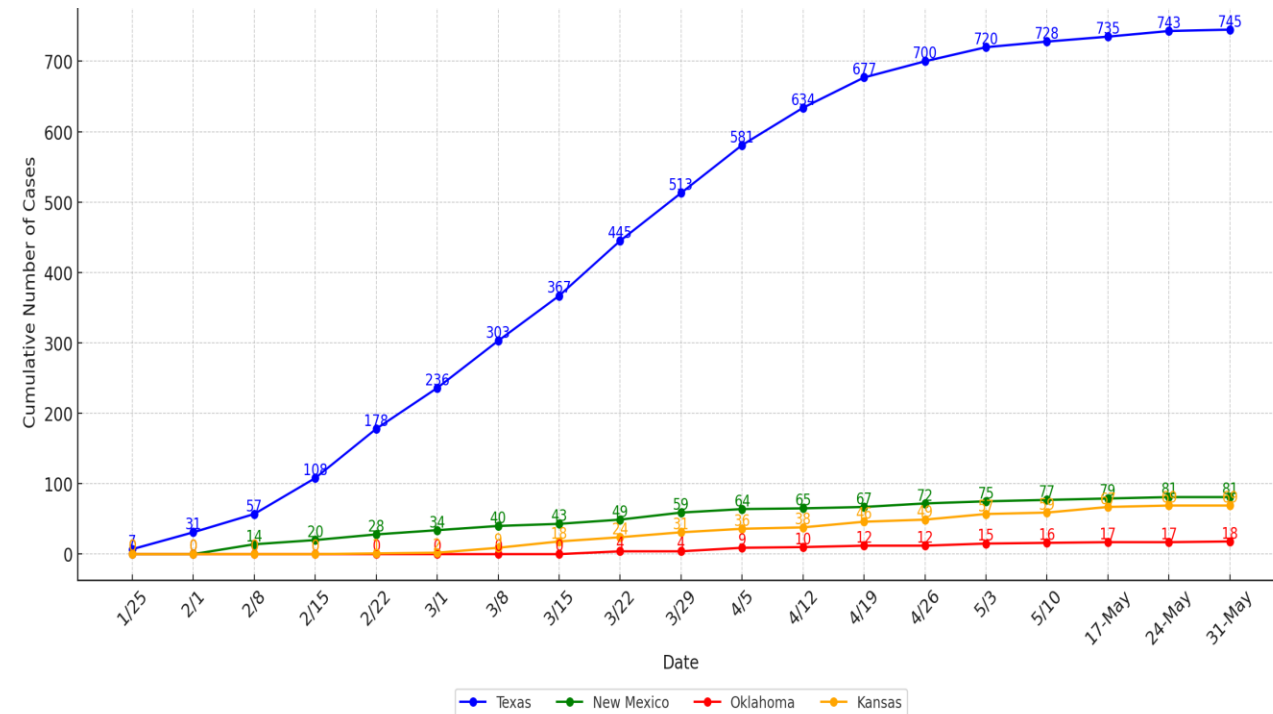
SOUTHWEST MEASLES OUTBREAK – EPI CURVE (WEEK ENDING 06/7/2025)



The number of new cases per week is declining in Texas and Oklahoma, while cases in New Mexico remain sporadic, and Kansas is experiencing a rise.

- **TX:** Reported first case the week of 1/25/25.
- **NM:** Reported first cases the week of 2/8/25.
- **OK:** Reported first cases the week of 3/15/25.
- **KS:** Reported first cases the week of 3/15/25.

CUMULATIVE CASES OVER TIME (WEEK ENDING 6/7/2025)



Cases are stable or slowly rising.

- **TX:** A total of 745 cases across 34 counties.
- **NM:** A total of 81 cases across 6 counties.
- **OK:** A total of 18 cases have been reported.
- **KS:** A total of 69 cases across 8 counties.

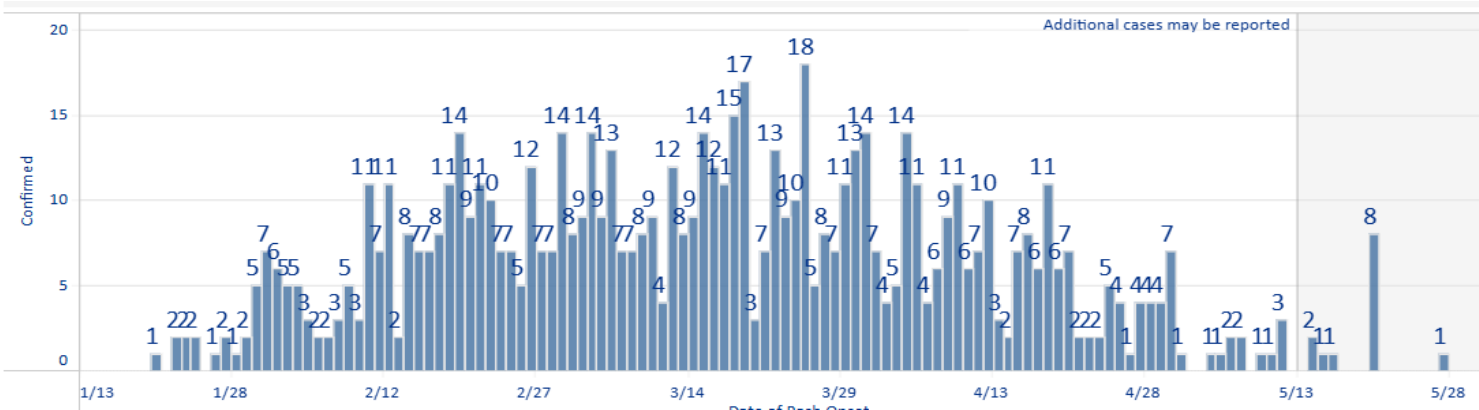
EPI SUMMARY - TEXAS

(n= 745) AS OF 6/6/2025

COUNTY	MEASLES CASES (NUMBER OF NEW CASES)	% of TOTAL CASES	% KINDERGARTENERS VACCINATED (2023-2024)	# OF SCHOOL DISTRICTS IN EACH COUNTY WITH MMR BELOW 95%
Andrews	3	0.42%	97.70%	0
Atascosa	1	0.14	98.51	0
Bailey	2	0.28%	98.94%	0
Borden	1	0.14%	94.44%	1
Brewster	1	0.14	94.74%	1
Brown	1	0.14%	93.64%	5
Carson	1	0.14%	91.67%	3
Cochran	14	1.97%	95.20%	1
Collins	1	0.14%	93.31%	16
Dallam	7	0.98%	95.30%	2
Dawson	27 (+1)	3.65%	88.10%	4
Eastland	2	0.28%	95.63	2
Ector	11	1.48%	91.30%	5
El Paso	59 (+2)	8.05%	96.37%	8
Erath	1	0.14%	93.94%	5
Gaines	411 (+2)	56.49%	82.00%	3
Garza	2	0.28%	97.10%	0

COUNTY	MEASLES CASES (NUMBER OF NEW CASES)	% of TOTAL CASES	% KINDERGARTENERS VACCINATED (2023-2024)	# OF SCHOOL DISTRICTS IN EACH COUNTY WITH MMR RATES BELOW 95%
Hale	5	0.84%	98.30%	2
Harderman	1	0.14%	94.40%	3
Hockley	6	0.84%	94.40%	3
Lamar	21 (+1)	2.67%	96.84%	0
Lamb	1	0.14%	97.37%	1
Lubbock	53	7.16%	92.25%	8
Lynn	2	0.28%	92.16%	2
Martin	3	0.42%	96.59%	1
McLennan	8		96.53	6
Midland	5	0.42%	94.77%	4
Parmer	5	0.70%	95.04%	1
Potter	1	0.28%	96.32%	3
Randall	1	0.14%	93.95%	1
Reeves	1	0.14%	94.92%	1
Rockwell	1	0.14%	91.47	2
Terry	60	8.43%	95.52%	2
Upshur	5	0.70%	93.3	2
Yoakum	20	2.81%	92.50%	1

- SOURCES:
- Measles Outbreak – 6 June 2025 | Texas DSHS
 - Measles Outbreak - El Paso 6 June 2025
 - 2023-2024 School Vaccination Coverage Levels by District/Private School and County - Kindergarten (XLS)



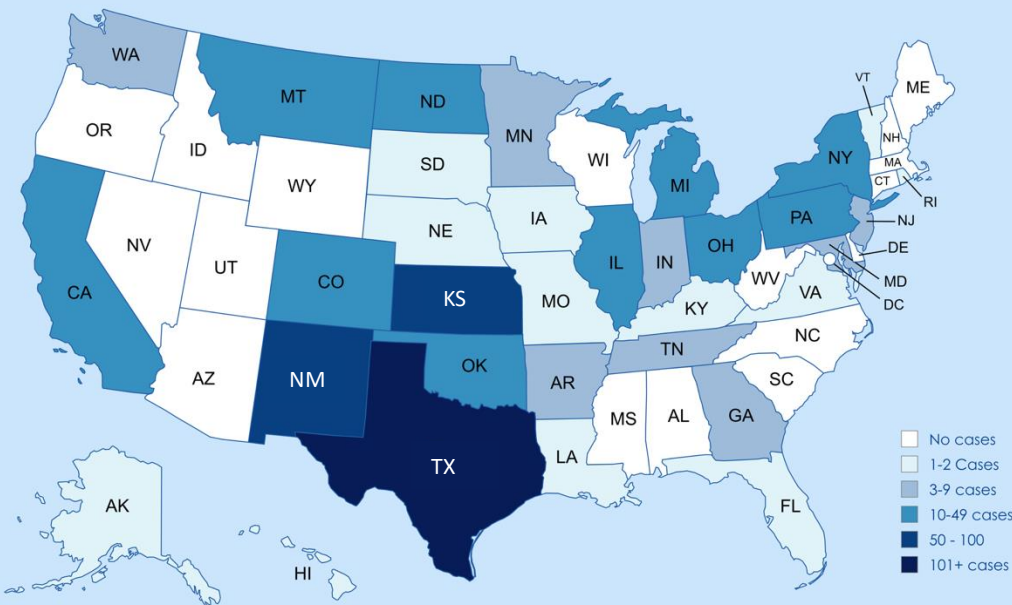
EPI SUMMARY (KS, NM, OK)

COUNTY	MEASLES CASES (NUMBER OF NEW CASES)	% of TOTAL CASES	% KINDERGARTENERS VACCINATED (2023-2024)
KANSAS (n=69) AS OF 6/6/2025			
Finney	Between 1- 5		98%
Ford	Between 1- 5		87%
Grant	Between 1- 5		99%
Gray	25 (+1)	40.68%	66%
Haskell	11(+1)	16.95%	58%
Kiowa	6	10.17%	92%
Morton	Between 1- 5		82%
Pawnee	7	1.01%	
Reno	1-5		
Sedgwick	1-5		
Stevens	7	11.86%	83%
Kansas has reported 2 additional cases NOT associated with the outbreak in Reno and Sedgwick Counties.			
NEW MEXICO (n=81) AS OF 6/6/2025			
Chaves	1	1.27%	98%
Curry	1	1.27%	95%
Doña Ana	2	2.53%	95%
Eddy	3	3.8%	93%
Lea	66	83.54%	94%
Sandoval	6	7.59	94
Note: Those 18 years or younger have a 95% vaccination rate. According to local health officials, 63% of adults have received one shot of MMR, and only 55% have received both shots. However, they noted that there may be vaccinated adults whose records have not been added to the system. Adults make up more than half of the reported cases in New Mexico.			
OKLAHOMA (n=18) AS OF 6/6/2025			
Tulsa and Cherokee Nation	18	Insufficient Information	89.5%

US OUTLOOK

** NOTE: The information on this page has been gathered by reviewing data from state and local health departments, news media sources, and the Center for Outbreak Response Innovation (CORI)*

1,173*



The increase in measles cases can be attributed to falling vaccination rates and increased importation of travel-related cases, which occur when unvaccinated people acquire measles abroad and bring it back to the U.S.

STATE	CASES
TEXAS **	778
NEW MEXICO	81
KANSAS	71
OHIO	34
NORTH DAKOTA	34
MONTANA	19
OKLAHOMA	18
PENNSYLVANIA	15
CALIFORNIA	14
NEW YORK	13
COLORADO	12
MICHIGAN	11
ILLINOIS	10
INDIANA	8
ARKANSAS	7
TENNESSEE	6
WASHINGTON	6
GEORGIA	5
MINNESOTA	4
MARYLAND	3
NEW JERSEY	3
VIRGINIA	3
ALASKA	2
FLORIDA	2
HAWAII	2
KENTUCKY	2
LOUISIANA	2
MISSOURI	2
SOUTH DAKOTA	2
IOWA	1
NEBRASKA	1
RHODE ISLAND	1
VERMONT	1
TOTAL	1173

- OUTBREAKS
- SMALL OUTBREAK (3-9)
 - MEDIUM OUTBREAK (10 - 49)
 - LARGE OUTBREAK (50 OR MORE)

An outbreak of measles is defined as three or more laboratory-confirmed cases that are temporally related and epidemiologically or virologically linked.

As of 1800 hours on June 6, 2025, EDT, there are approximately 1,170 measles cases (including confirmed and suspected cases) across 33 states.

This year, there have been at least 14 measles outbreaks:

1. **Texas**, involving [35 counties](#)
2. **New Mexico**, [6 counties](#)
3. **Oklahoma**, and the [Cherokee Nation](#) in Oklahoma
4. [8 counties](#) in **Kansas**
5. **Ashtabula and Knox Counties, Ohio**
6. **Erie County, Pennsylvania**
7. **Allen County, Indiana**
8. **Bergen County, New Jersey**
9. **metro Atlanta, Georgia**
10. **Gallatin County, Montana**
11. **Montcalm County, Michigan** (linked to Ontario Outbreak)
12. **Upper Cumberland region, Tennessee**
13. **Williams County, Grand Rapids, North Dakota**
14. **Faulkner County, Arkansas**

**** TEXAS CASES NOT ASSOCIATED WITH OUTBREAK: 33**

- 1 case – Brazoria County
- 2 case – Collin County
- 2 case – Denton County
- 1 case – Adult, Fort Bend (travel-related)
- 4 cases – Harris County
- 1 case – Harrison County.
- 1 case – Hays County
- 1 case – McLennan County
- 2 case – Randall County
- 1 case – Adults, Rockwall County (travel-related)
- 1 Case – Scurry County
- 1 case – Shackelford
- 2 cases – Tarrant
- 2 case – Travis County

TEXAS CASES ASSOCIATED WITH THE OUTBREAK: 745

US OUTLOOK: THINGS TO KEEP AN EYE ON

TRAVEL: The CDC updated its warning about the risk of contracting measles while traveling, after tallying dozens of cases so far this year in travelers who were infectious while flying on airplanes within the U.S. "Travelers can catch measles in many travel settings, including travel hubs like airports and train stations, on public transportation like airplanes and trains, at tourist attractions, and at large, crowded events," the agency now says, in an update [published Wednesday](#), 5/28/2025.

VACCINATION RATES: MMR (measles, mumps, and rubella) vaccination rates among children have declined across much of the U.S. since the start of the COVID-19 pandemic. A new study from Johns Hopkins University, [published](#) in *JAMA* on June 2 analyzed county-level MMR vaccination rates. (6/2/2025)

CALIFORNIA: A West Sacramento resident has a confirmed case of measles, health officials say, prompting a contact tracing effort in Yolo County. The [Yolo County Health and Human Services Agency](#) announced the case on Friday, June 6, 2025. [Los Angeles County](#) also confirmed that it is investigating a case involving a resident who recently traveled internationally. These two cases bring CA total number of cases to 14. (6/6/2025)

COLORADO: The [Colorado](#) Health Department reported on Sunday, June 1, 2025, that [three more passengers aboard Turkish Airlines flight 201](#) tested positive for measles after landing on May 13. On June 4, 2025, an additional case was identified. So far, four of the people who contracted measles were passengers and three were at Denver International Airport during the exposure period on May 14, 2025, bringing the total number of cases to 7. (6/5/2025)

GEORGIA: A fifth case of measles occurred in Georgia, the state Department of Public Health said on Friday, 6/6/2025. The unvaccinated individual contracted the disease from a person who acquired it from out of the country, according to a release. That case was reported to the health department in May. (6/6/2025)

MICHIGAN: Three additional measles cases were confirmed in Michigan this week, bringing the total to 11 measles cases in the state so far this year. [The Marquette County Health Department](#) confirmed the 2 cases of measles, the first on May 30 and the second on June 2. [Allegan County](#) reported the third case on 6 June. (6/6/2025)

MINNESOTA: The Minnesota Department of Health is reporting two additional cases of measles in the state, bringing the total to four cases so far this year. Minnesota Department of Health infectious disease doctor Jessica Hancock-Allen says one of the cases involved an unvaccinated child in Dakota County, and the child had spent time at the Mall of America while still sick. (6/3/2025)

MONTANA: This outbreak has been growing since April 17, 2025. Nineteen cases and two hospitalizations have been reported. The four counties reporting cases are: [Flathead](#) (2), [Yellowstone](#) (2), [Hill](#) (4), and [Gallatin](#) (11). (6/6/2025)

NORTH DAKOTA: Since April 28, 2025, there have been 34 total cases of measles and two hospitalizations. According to the [North Dakota Health and Human Services](#), all cases involve individuals who have not received vaccinations. Most cases have been among individuals between the ages of 5 and 19 years old. Measles has been reported in four counties: 16 in Williams, 1 in Burke, 10 in Grand Rapids, and 7 in Cass. (6/6/2025)

SOUTH DAKOTA: On June 1, 2025, the Department of Health reported the first case of measles in 2025, an adult male who had traveled internationally from Meade County. On June 6, a second case was identified. (6/6/2025).

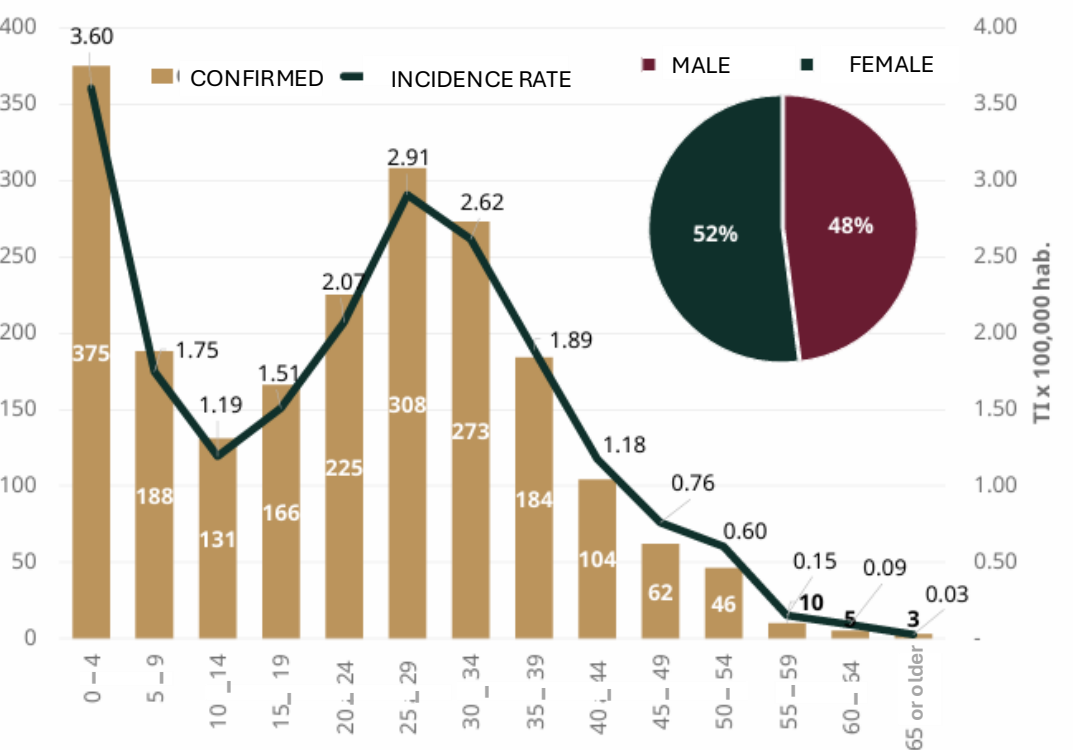
VIRGINIA: On Thursday, June 4, the Virginia Department of Health (VDH) announced that a child 4 years old or younger was diagnosed with measles. The child, who spent several hours in Charlottesville across multiple days, has created an exposure risk for those in the area.(6/6/2025)

MEXICO OUTLOOK

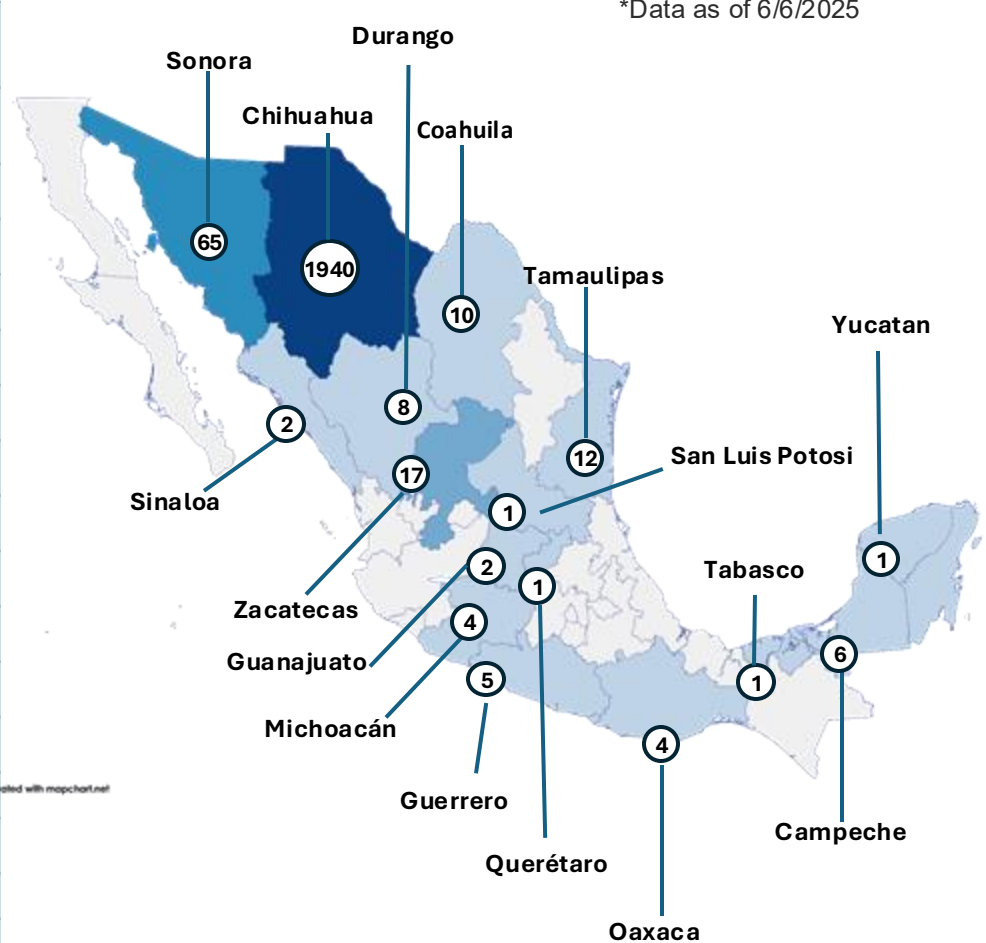
OVERVIEW

Mexico is currently facing its largest measles outbreak in decades, centered in the Mennonite community of Cuauhtémoc, Chihuahua. Genetic and epidemiological investigations have linked the outbreak to an unvaccinated child who traveled from Seminole, Texas, to visit relatives in late January 2025, seeding sustained local transmission. To date, there have been four deaths associated with this outbreak– 1 case in Sonora and 4 cases in Chihuahua. Mexico’s health authorities estimate that the probable number of cases exceeds 4,400.

CONFIRMED MEASLES CASES BY SEX, AGE GROUP, AND INCIDENCE RATE



CONFIRMED MEASLES	
STATE	CASES
CAMPECHE	6
CHIHUAHUA	1940 (+200)
COAHUILA	10
DURANGO	8
GUANAJUATO	2
GUERRERO	5
MICHOACÁN	4 (+1)
OAXACA	4
QUERÉTARO	1
QUINTANA ROO	1
SAN LUIS POTOSI	1
SINALOA	2 (+2)
SONORA	65 (+13)
TABASCO	1
TAMAULIPAS	12 (+3)
YUCATAN	1
ZACATECAS	17
TOTAL	2,080 (+225)



*Data as of 6/6/2025

CASES: 2080
DEATHS: 5

MEXICO OUTLOOK: CHIHUAHUA

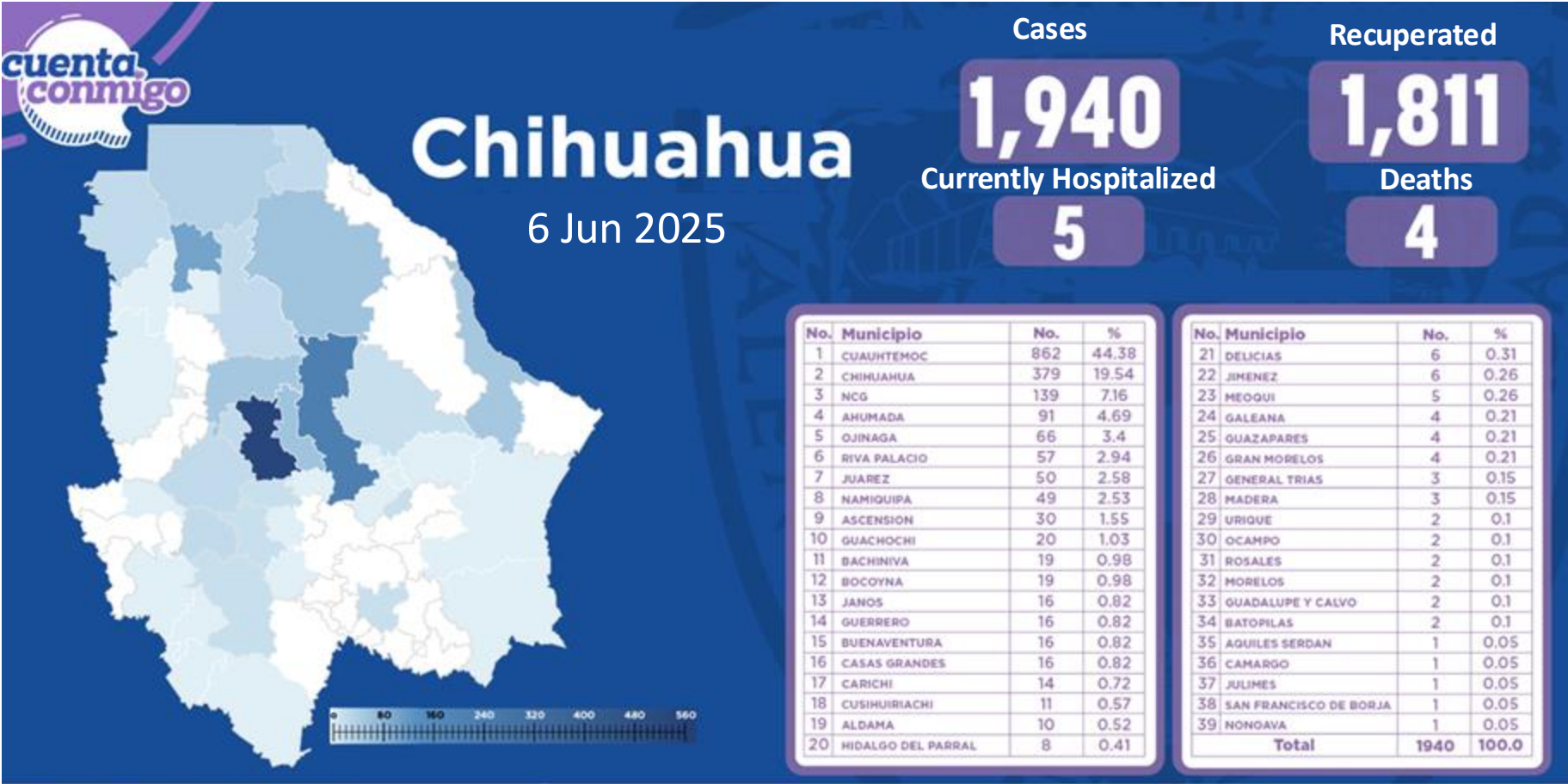
Health officials in Chihuahua have confirmed the death of a 2-year-old girl from the measles. The child had not completed the full vaccination schedule. This marks the fourth measles-related death in Chihuahua.

Two other children, an 11-month-old infant and a seven-year-old—from a vaccine-hesitant Christian community died in May. The infant had leukemia, and the older child suffered from a kidney condition. Neither had been vaccinated.

In April, a 31-year-old unvaccinated man in Chihuahua also died from measles.

In neighboring Sonora, a one-year-old unvaccinated girl with severe malnutrition died from the disease.

Authorities warn that medically vulnerable individuals are at heightened risk in communities with low vaccination coverage and continue to urge the public to get immunized.



Fuente: Secretaría de Salud

CANADA OUTLOOK

Brief Timeline of Outbreak

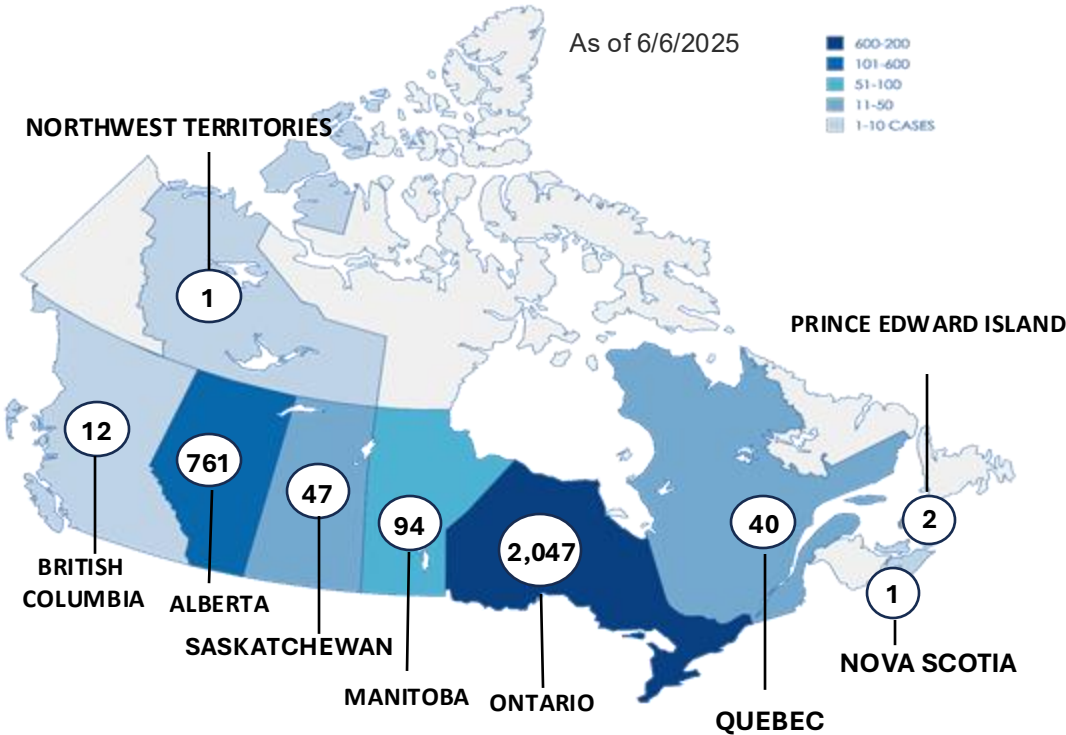


CANADA OUTBREAK:

- An ongoing outbreak of measles in Ontario has been traced back to a large gathering in New Brunswick last fall that guests from Mennonite communities attended. On October 18, 2024, exposure to a travel-related case in New Brunswick led to measles cases in Ontario.
- Quebec declared its outbreak on 4/22/2025 after no new cases in 32 days.
- Currently, four provinces are experiencing active outbreaks: **Ontario, Alberta, Manitoba, and Saskatchewan.**
- **An infant infected with measles has died** in southwestern Ontario, Canada, the province's chief medical officer of health said in a statement on Thursday, **6/5/2025.**




MEASLES 2025

PROVINCE	CASES
ONTARIO	2,047 (+109)
ALBERTA	761 (+82)
MANITOBA	94 (+22)
BRITISH COLUMBIA	12
SASKATCHEWAN	47 (+1)
QUEBEC	40
PRINCE EDWARD ISLAND	2
NOVA SCOTIA	1
NORTHWEST TERRITORIES	1
TOTAL	3,005 (+214)



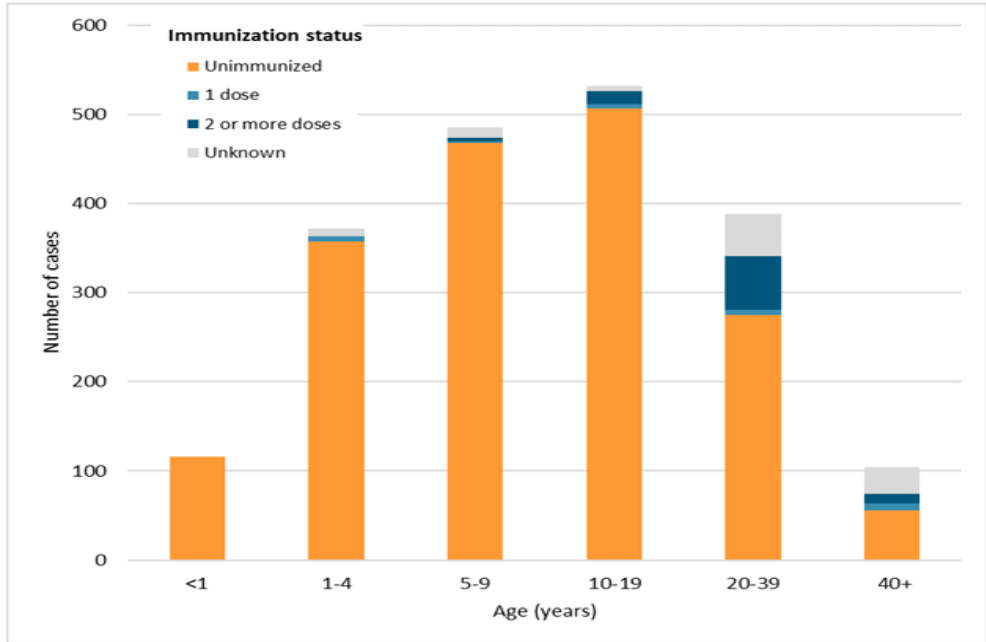
CANADA OUTLOOK: ONTARIO's OUTBREAK

MORBIDITY AND MORTALITY

PROVINCE	CASES	HOSPITALIZATIONS	DEATHS
			
ONTARIO*	2,009 (+121)	140	1

All but 75 cases were linked with the multi-jurisdictional outbreak described above. Of these, 23 cases had a history of travel (i.e., measles acquired outside of Canada), one case. was epidemiologically linked to a visitor to Ontario, and 51 cases do not yet have a source of exposure reported

IMMUNIZATION STATUS OF MEASLES OUTBREAK CASES BY AGE GROUP: OCTOBER 28, 2024 – JUNE 3, 2025

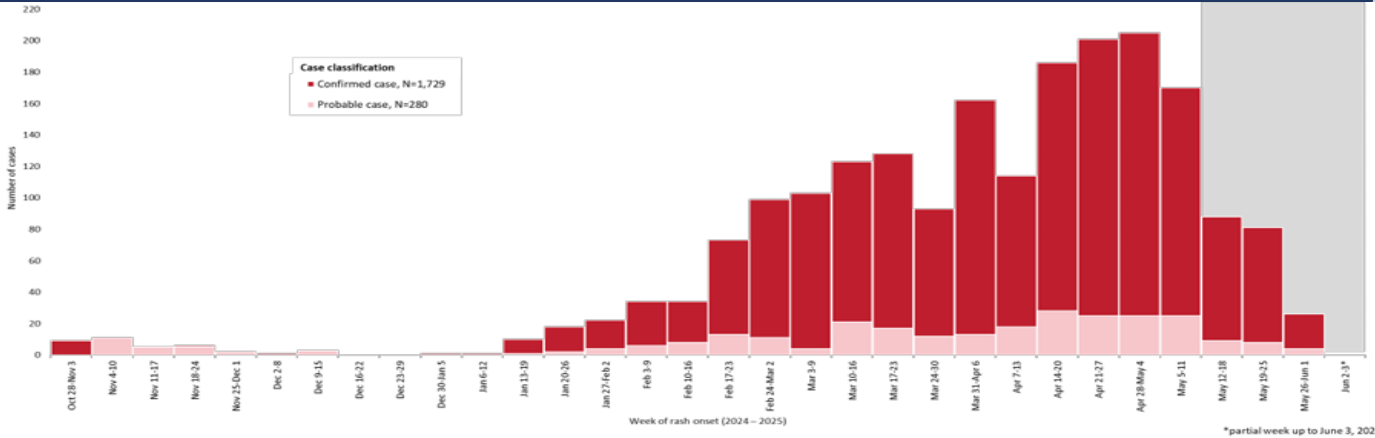


Age group	<1	1-4	5-9	10-19	20-39	40+
Unimmunized	100.0%	96.0%	96.5%	95.3%	70.9%	53.8%
1 dose	0.0%	1.6%	0.4%	0.9%	1.5%	7.7%
2 or more doses	0.0%	0.0%	0.8%	2.6%	15.5%	9.6%
Unknown	0.0%	2.4%	2.3%	1.1%	12.1%	28.8%

Multi-Jurisdictional Outbreak

- Among all outbreak cases, the majority (74.9%, n=1,505) were infants, children, and adolescents (19 years old or younger), while 24.5% (n=492) were adults, and 0.6% (n=12) had unknown age.
- A total of 1.9% (n=39) of outbreak cases were pregnant at the time of their measles infection
- 98.3% (n=1,974) of outbreak cases were born in or after 1970
- Almost all infant, child, and adolescent outbreak cases (96.2%, n=1,448) were unimmunized, while 67.3% (n=331) of adults were unimmunized
- Overall, 7.0% (n=140) of outbreak cases were hospitalized and 0.4% (n=9) were admitted to the intensive care unit (ICU). 94.3% (n=132) of hospitalized cases were unimmunized, of whom 101 were infants, children and adolescents.
- The median length of stay among discharged hospitalized cases was three days (range: 1–54 days) and the median length of stay among ICU admissions was three days (range: 1–54 days).
- There have been six cases of congenital measles (i.e., measles diagnosed in the first 10 days of life)
- **There was one death that occurred in a congenital case of measles, who was born pre-term and had other underlying medical conditions**

NUMBER OF MEASLES CASES BY WEEK OF RASH ONSET, 10/28/2024 – 06/3/2025



Week of rash onset	Oct 28-Nov 3	Nov 4-10	Nov 11-17	Nov 18-24	Nov 25-Dec 1	Dec 2-8	Dec 9-15	Dec 16-22	Dec 23-29	Dec 30-Jan 5	Jan 6-12	Jan 13-19	Jan 20-26	Jan 27-Feb 2	Feb 3-9	Feb 10-16	Feb 17-23	Feb 24-Mar 2	Mar 3-9	Mar 10-16	Mar 17-23	Mar 24-30	Mar 31-Apr 6	Apr 7-13	Apr 14-20	Apr 21-27	Apr 28-May 4	May 5-11	May 12-18	May 19-25	May 26-Jun 1	Jun 2-3*
Confirmed case	9	0	0	1	0	1	0	0	0	1	1	9	16	18	28	26	60	88	99	102	111	81	149	96	158	176	180	145	79	73	22	0
Probable case	0	11	5	5	2	0	3	0	0	0	0	1	2	4	6	8	13	11	4	21	17	12	13	18	28	25	25	25	9	8	4	0
Total cases	9	11	5	6	2	1	3	0	0	1	1	10	18	22	34	34	73	99	103	123	128	93	162	114	186	201	205	170	88	81	26	0

CONTRIBUTORS

The Virtual Medical Operations Center Briefs (VMOC) were created as a service-learning project by the Yale School of Public Health faculty and graduate students in response to the 2010 Haiti Earthquake. Each year, students enrolled in Environmental Health Science Course 581—Public Health Emergencies: Disaster Planning and Response produce the VMOC Briefs. These briefs compile diverse information sources—including status reports, maps, curated news articles, and web content— into a single, easily digestible document that can be widely shared and used interactively.

Key features of this report include:

- **Comprehensive Overview:** Provides situation updates, maps, relevant news, and web resources.
- **Accessibility:** Designed for easy reading, wide distribution, and interactive use.
- **Collaboration:** The “unlocked” format enables seamless sharing, copying, and adaptation by other responders.

The students learn by doing, quickly discovering how and where to find critical information and presenting it in an easily understood manner.

Yale MPH Student Contributors: Our semester has come to a close. Congratulations to all our graduates who worked tirelessly on this report throughout the semester. Over the summer months, volunteers will step in to continue the reports.

LTC (R) Joanne McGovern – Joanne.McGovern@yale.edu

Lecturer, Department of Environmental Health Sciences, Yale School of Public Health

Emily Locke (Teaching Fellow)

Shoa Moosavi (Editor)