



Date: 3/13/25

This weekly report from the New York State Department of Health presents summaries of select ongoing and emerging infectious disease outbreaks of interest to public health professionals and the public, both globally and in the United States. The Global Health Update summaries include preliminary and up-to-date data that are publicly available for these events at the time of posting. Because this report aggregates and summarizes data and information from outside sources, the quality, accuracy or completeness of that data, and the appropriateness of the methodology used, cannot be guaranteed. Please refer directly to those sources for any data questions. Because the report includes preliminary information, subsequent reports may contain updates or revisions to information in prior reports.

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Chikungunya

France (Réunion) – Locally Acquired Case Numbers Continue to Rapidly Rise:

In August of 2024, France reported the first locally acquired chikungunya case detected in Réunion (an island in the Indian Ocean and overseas region of France) in 10 years. Since then, new cases continue to be identified and have surged in recent weeks, spreading to new areas of the island and prompting the United States CDC to issue a [Level 2 - Practice Enhanced Precautions](#) travel notice for those traveling to Réunion. **As of March 2, 2025, there have been a total of 5,184 locally acquired chikungunya cases reported since August of 2024, of which 5,041 (97.2%) have been reported during 2025.** During the most recent week alone, 1,766 new cases were reported, an increase of 18% compared to the prior week. A total of 20 cases have been hospitalized for a duration longer than 24 hours.

Locally Acquired Chikungunya Cases, Réunion, 2024-2025		
Cases (New)	New Cases (February 24 – March 2, 2025)	Hospitalizations* (New)
5,184 (+1,794)	1,766	20 (+7)

Table Notes: Data as of March 2, 2025; *Hospitalizations are for a duration of 24 hours or more.

Source: [ARS La Réunion \(12MAR25\)](#)

Dengue

Region of the Americas – Suspected Case Trend Similar to Past 5-Year Average:

On February 7, 2025, the Pan American Health Organization / World Health Organization (PAHO/WHO) released an epidemiological alert regarding the risk of an increase in the circulation of dengue serotype DENV-3 in the southern hemisphere of the Americas Region during peak dengue season.

During 2024, dengue case numbers in the region reached a historic high with 13,061,102 suspected cases reported, the highest number on record for a single year since dengue data collection for the region began in 1980 by the PAHO/WHO. Of those cases, 22,777 were severe (0.17%), and 8,323 were fatal (0.06%).

According to data from the PAHO/WHO obtained on March 13, 2025, there have been a total of 1,021,206 suspected dengue cases reported in the Region of the Americas, primarily in Brazil (87.8%), Colombia (3.8%), Mexico (1.8%), and Peru (1.5%). Suspected case numbers appear to be following a similar trend compared to the average number of suspected cases reported during the past 5 years (2020-2024). Of those suspected cases reported this year, 1,207 have been severe (0.12%), and 281 have been fatal (0.03%).

Suspected and Severe Dengue Cases and Deaths, Region of the Americas, 2025				
Suspected Cases	Severe Suspected Cases	Severe %	Deaths	CFR %
1,021,206	1,207	0.12%	281	0.03%

Table Notes: Data as of March 13, 2025.

Distribution of Suspected Dengue Cases by Epidemiological Week, Region of the Americas, 2020 – 2025

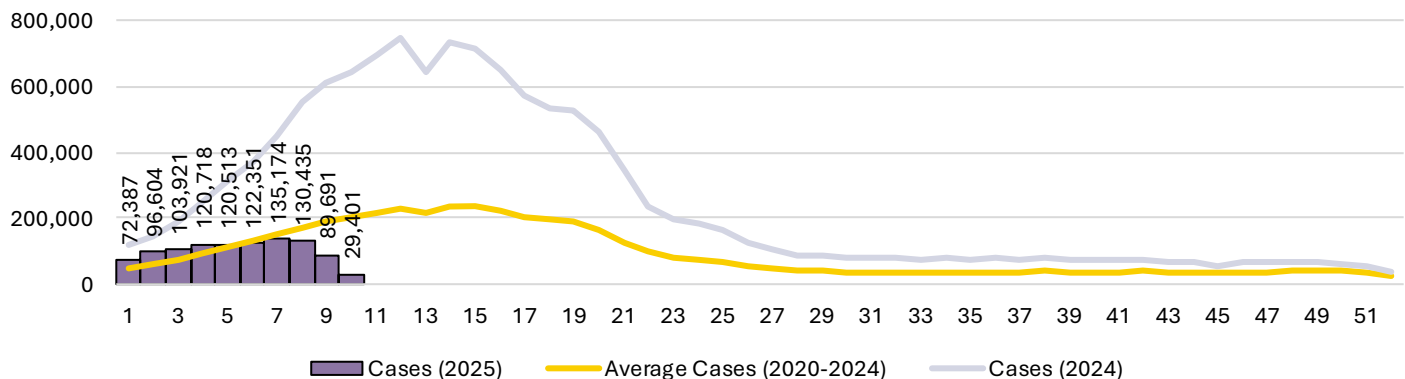


Figure Notes: Data as of March 13, 2025; 16,681 suspected cases not included in figure for 2024; 11 suspected cases not included in figure for 2025; Data for recent weeks should be interpreted with caution as there are delays associated with reporting.

The United States CDC currently has a [Level 1 - Practice Usual Precautions](#) travel notice for those traveling to certain countries in the Region of the Americas and globally. Data on travel associated dengue cases reported in New York State during previous years can be found [here](#).

Sources: [PAHO/WHO \(7FEB25\)](#), [PAHO/WHO \(13MAR25\)](#)

Ebola

Uganda – No New Cases or Deaths Reported; 192 Contacts Under Follow-Up:

Since the previous update, no new cases were reported. A total of 14 cases of Sudan ebolavirus disease (SVD), including 4 fatal cases (CFR: 28.6%), have been reported in association with this outbreak as of March 6, 2025. **Two cases are currently admitted to treatment facilities and are reported to be in stable condition according to the Africa CDC, while the remaining cases have either been discharged or have died.** A total of 192 contacts have been identified for follow-up across several provinces and 299 contacts have completed the 21-day follow-up period.

Sudan Ebolavirus Cases and Deaths, Uganda, 2025			
Cases	Recoveries	Deaths	CFR %
14	8	4	28.6%

Table Notes: Data as of March 6, 2025; Cases include 12 confirmed and 2 probable cases; Deaths include 2 confirmed and 2 probable deaths.

Distribution of Confirmed SVD Cases by Date of Symptom Onset, Uganda, January – March 2025

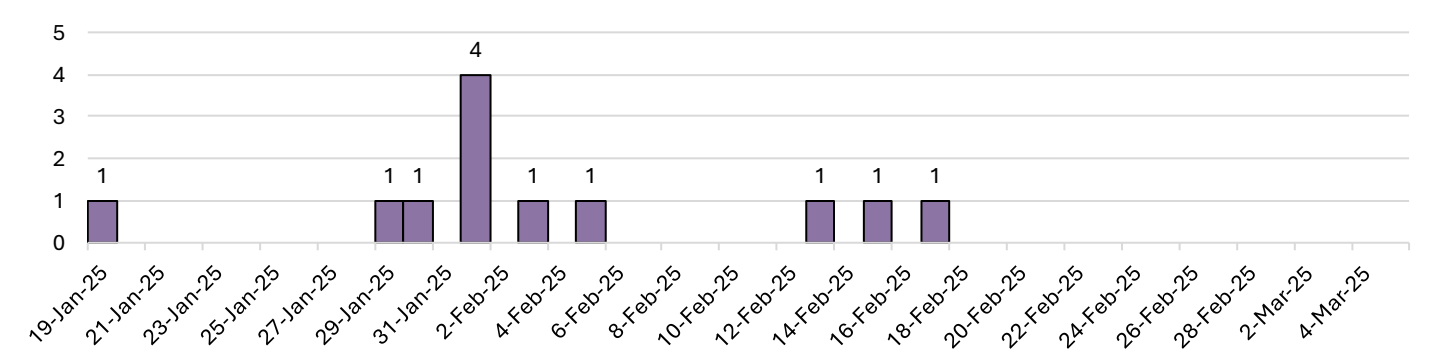


Figure Notes: Data as of March 5, 2025; Probable cases (2) not included in figure.

The United States CDC issued a [Health Alert Network \(HAN\) Health Advisory](#) regarding the situation and currently has a [Level 2 – Practice Enhanced Precautions](#) travel notice posted for those traveling to Uganda.

Sources: [WHO \(8MAR25\)](#), [Africa CDC \(6MAR25\)](#), [Africa CDC \(12MAR25\)](#)

Lassa Fever

Nigeria – Confirmed Case with International Travel Reported:

On March 10, 2025, the Nigeria Center for Disease Control and Prevention (NCDC) released a Public Advisory regarding a confirmed case of Lassa fever with international travel to the United Kingdom (UK). According to the NCDC, the case patient, a 31-year-old physician, departed Nigeria on February 19, 2025, and returned from the UK on February 27, 2025. The case patient died on March 1, 2025, and samples taken tested positive for Lassa fever on March 4, 2025.

Lassa fever is endemic in Nigeria and cases are reported year-round with peak transmission periods occurring between October and May. **As of March 2, 2025, there have been a total of 2,728 suspected cases, of which 535 have been confirmed, and 100 deaths reported (CFR among confirmed cases: 18.7%).** During the week ending March 2, 2025, a total of 236 suspected cases, of which 29 were confirmed, and 5 deaths were reported (CFR among confirmed cases: 17.2%). Cumulative case numbers are slightly lower as of the same date compared to 2024 (3,914 suspected cases [682 confirmed]) as is the case fatality rate among confirmed cases (18.8%).

Lassa Fever Cases and Deaths, Nigeria, 2025			
Suspected Cases (New)	Confirmed Cases (New)	Deaths (New)	CFR %*
2,728 (+236)	535 (+29)	100 (+5)	18.7%

Table Notes: Data as of Mar2, 2025; *CFR is calculated among confirmed cases only.

Sources: [NCDC \(10MAR25\)](#), [NCDC \(2MAR25\)](#)

United Kingdom – Health Security Agency Identifying Case Contacts:

On March 7, 2025, the UK Health Security Agency (UKHSA) reported that they are working to identify persons that may have been in contact with an individual with confirmed Lassa fever infection that visited England in late February. According to the UKHSA, the risk to public health is very low as the infection does not spread easily between humans. Imported cases were last detected in the UK during 2022 among individuals who traveled to Mali and their contacts.

Source: [UKHSA \(7MAR25\)](#), [UKHSA \(7MAR25\)](#), [WHO \(21FEB22\)](#)

Marburg

Tanzania – Outbreak Declared Over After 42 Days With No New Cases Identified:

On March 13, 2025, the Ministry of Health in Tanzania declared an end to the Marburg virus disease (MVD) outbreak that was initially declared on January 20, 2025, after 42 days with no new cases since the last confirmed MVD case died on January 28, 2025. A total of 10 cases (2 confirmed and 8 probable), all fatal (CFR: 100%), were reported during the outbreak. The source of the outbreak is still unknown. This was the second MVD outbreak reported in Tanzania in the last 3 years, with both outbreaks occurring in the Kagera region of Tanzania which borders Rwanda and Uganda.

Source: [WHO \(13MAR25\)](#)

Measles

Canada – Updated Data on Cases Reported During 2025:

According to the Public Health Agency of Canada (PHAC), as of March 1, 2025, there have been 173 confirmed measles cases, and no deaths reported during 2025 in Ontario (140), Québec (26), Manitoba (5), and British Columbia (2). Additionally, 51 probable cases have been reported this year. **Since the previous update, 77 new confirmed cases were reported in Ontario (71), and Québec (6).** Among all confirmed cases, most have been unvaccinated (77%) or had unknown vaccination statuses (9%), between the ages of 5 and 17 (40%) or 18 to 54 (31%) years, and 22 have been hospitalized (13%). All but 7 confirmed cases were exposed in Canada (96%) and those exposed outside of the country reported travel to Cambodia, Pakistan, Romania, and Vietnam.

Canada reported a total of 147 measles cases during 2024, of which 15% were hospitalized, and 1 death, the highest number since 2015 (196 cases). Most cases were unvaccinated (66%) and exposed in Canada (72%).

Measles Cases and Hospitalizations, Canada, 2025			
Confirmed Cases (New)	Probable Cases (New)	Jurisdictions with Cases	Hospitalized Cases* (New)
173 (+77)	51 (+41)	4	22 (+13)

Table Notes: Data as of March 1, 2025; *Hospitalizations are among confirmed cases only.

Distribution of Confirmed Measles Cases Reported by Epidemiological Week of Rash Onset, Canada, 2024-2025

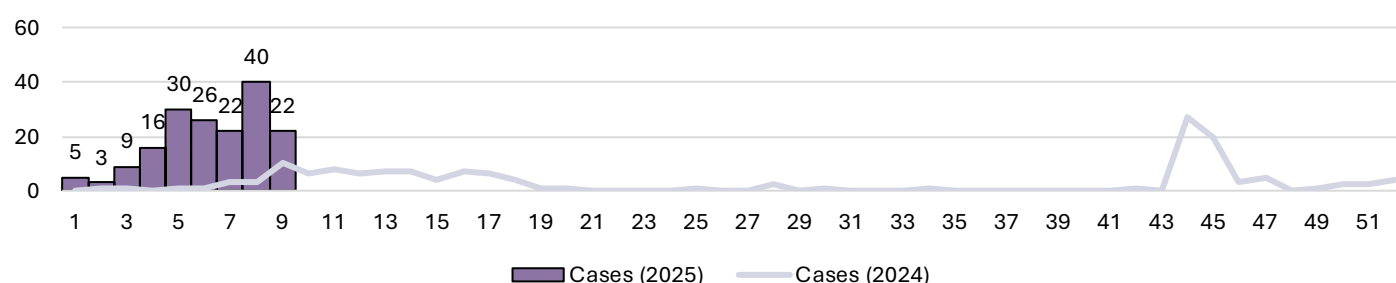


Figure Notes: Data only include confirmed cases reported by the PHAC as of March 1, 2025.

Ontario – Ongoing Outbreak with Over 270 Confirmed Cases Reported

While some cases are not yet included in the PHAC's count as of March 1, 2025, Public Health Ontario (PHO) has reported an outbreak of measles that initially began on October 18, 2024. **According to PHO, there have been a total of 277 confirmed and 95 probable outbreak-associated cases detected in Ontario as of March 12, 2025.** Cases have been relatively evenly distributed among age groups with the majority being among those under 20 years of age (72.6%). Almost all cases have been unvaccinated (80.4%) or had unknown vaccination statuses (15.9%), and 31 have been hospitalized (8.3%). **During 2025 alone, there have been a total of 277 confirmed and 69 probable cases reported in Ontario, of which 11 are not associated with the outbreak.**

Québec – Ongoing Outbreak Primarily Affecting Laurentides

While some cases are not yet included in the PHAC’s count as of March 1, 2025, the Government of Québec has reported an outbreak of measles that initially began in December 2024. **According to the provincial government, there have been a total of 36 confirmed cases detected in Québec this year as of March 12, 2025.** Most cases have been identified in Laurentides (77.8%).

Sources: [PHAC \(13MAR25\)](#), [Gouvernement du Québec \(12MAR25\)](#), [PHO \(13MAR25\)](#)

European Region – 2024 Case Numbers Highest Since 1997; Initial 2025 Data:

On March 13, 2025, the WHO reported that 127,350 measles cases were reported in the European Region during 2024, the highest number of cases reported in the region since 1997 and double the number of cases reported during 2023 (60,756). Over 40% of cases were among children under 5 years of age, over 50% of cases required hospitalization, and 38 deaths were reported. Romania (30,692) and Kazakhstan (28,147) reported 46.2% of all cases during 2024.

Distribution of Measles Cases Reported by Year, European Region, 2000-2024

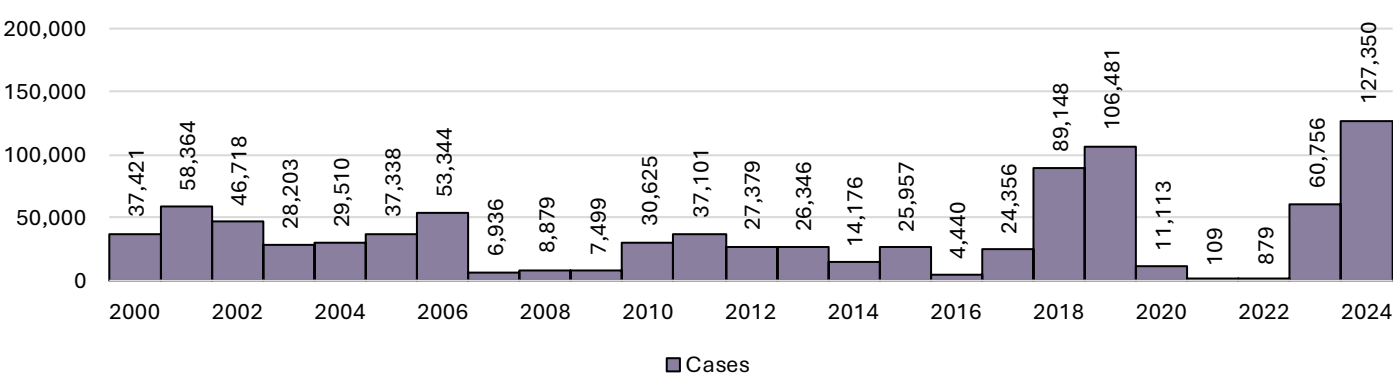


Figure Notes: Data extracted on March 13, 2025.

According to data from the European Centre for Disease Prevention and Control, there were 1,033 measles cases reported by 17 countries during January of 2025. The highest number of cases were reported by Romania (663), Italy (74), France (67), and Austria (48). Compared to archived regional reports from January of 2024 covering the same period, case numbers are 2.3 times higher (448) in the region.

Measles Cases, European Region, 2024 and 2025		
Cases (January 2025)	Cases (January 2024)	Ratio
1,033	448	2.3

Table Notes: Data as of January 31, 2025.

Sources: [WHO \(13MAR25\)](#), [ECDC \(11MAR25\)](#), [ECDC \(24APR24\)](#), [WHO](#)

United States – Updated Data on Multiple Ongoing Outbreaks During 2025:

According to the CDC, as of March 6, 2025, there have been 222 measles cases and 2 deaths reported during 2025 by 12 jurisdictions in the United States: Texas (194), New Mexico (10), California (3), Georgia (3), New Jersey (3), Alaska (2), New York City (2), Kentucky (1), Rhode Island (1), Pennsylvania (1), Florida (1), and Washington (1). Outbreaks (defined as 3 or more related cases) have accounted for 93% of cases and have been reported in Texas, New Mexico, and New Jersey. **Since the previous update, 58 new cases were reported in Texas (54), New Mexico (1), Pennsylvania (1), Florida (1), and Washington (1); one death was reported in New Mexico.** Among all cases, 94% have been unvaccinated or had unknown vaccination statuses and 17% have been hospitalized. Cases have primarily been among those aged 5-19 years (45%), followed by those under 5 years (34%).

The CDC currently has a [Level 1 – Practice Usual Precautions](#) travel notice posted for those traveling internationally and released a [Health Advisory](#) with guidance for the upcoming travel season last week. In addition, the New York State Department of Health has issued a [press release](#) and joint [Health Advisory](#) with the New York City Department of Health and Mental Hygiene regarding the increase in measles cases observed in parts of the United States and Canada this year.

The United States reported a total of 285 measles cases across 33 jurisdictions during 2024, the highest number since 2019 (1,274 cases). Most cases were unvaccinated or had unknown vaccination status (89%) and 40% were hospitalized for isolation or management of measles complications.

Measles Cases and Hospitalizations, United States, 2025			
Cases (New)	Jurisdictions with Cases (New)	Hospitalized Cases (New)	Deaths (New)
222 (+58)	12 (+3)	38 (+6)	2 (+1)

Table Notes: Data only include cases reported by CDC as of March 6, 2025.

Distribution of Measles Cases Reported by Epidemiological Week of Rash Onset, United States, 2024-2025

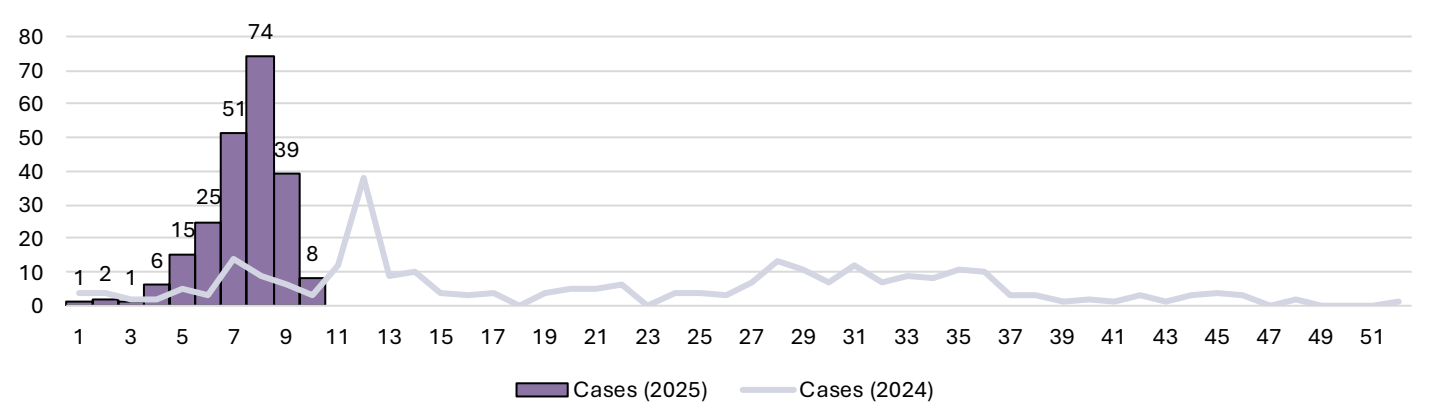


Figure Notes: Data only include cases reported by CDC as of March 6, 2025; Data are preliminary and subject to change.

Texas – Outbreak Continues with Additional Cases Identified

While most of the cases are not yet included in CDC’s count as of March 6, 2025, the Texas Department of State Health Services (DSHS) has reported an outbreak of measles affecting multiple counties. **According to the Texas DSHS, there have been a total of 223 cases detected and 1 death associated with the outbreak as of March 11, 2025, in Dallam (5), Dawson (10), Ector (2), Gaines (156), Lubbock (3), Lyn (2), Martin (3), Terry (32), and Yoakum (10) Counties.** Among those cases, all but 5 were unvaccinated or had unknown vaccination statuses (97.8%) and 29 have been hospitalized (13.0%). Most cases have been among children aged 5-17 years (43.9%) and 0-4 years (34.1%).

Additionally, as of March 11, 2025, 4 measles cases not associated with the current outbreak have been detected in Harris (2), Rockwall (1), and Travis (1) Counties. All cases were associated with international travel.

New Mexico – Outbreak Grows to Include Additional County

The New Mexico Department of Health (NMDOH) has reported an outbreak of measles with 33 cases in Lea (32) and Eddy (1) Counties and 1 death (Lea County) as of March 11, 2025. Cases have primarily been among school-aged children (24.2%) and adults (54.5%), and all have either been unvaccinated (81.8%) or had unknown vaccination histories (15.2%). One case has been hospitalized. Lea County borders Gaines County in Texas which is currently experiencing a large measles outbreak.

Maryland – First Case of 2025 Identified in Howard County Resident

While not included in CDC’s count as of March 6, 2025, a case of measles has been detected in Maryland. **On March 9, 2025, the Maryland Department of Health reported that a measles case had been detected among a Howard County resident who recently traveled internationally.**

Oklahoma – Probable Cases Identified in Association with Ongoing Outbreaks

While not included in CDC's county as of March 6, 2025, probable cases of measles have been detected in Oklahoma. **On March 11, 2025, the Oklahoma State Department of Health reported that two probable cases of measles had been detected among individuals that reported exposures associated with the Texas and New Mexico outbreaks and symptoms consistent with measles.**

New York – New Case Identified in Suffolk County Child

While not included in CDC's county as of March 6, 2025, a case of measles has been detected in New York State (outside of New York City). **On March 11, 2025, the New York State Department of Health reported that a case of measles had been detected among a Suffolk County child less than 5 years of age.** A total of 3 cases have been reported in New York State during 2025, however, this is the first case reported outside of New York City.

Vermont – First Case of 2025 Identified in Lamoille County Child

While not included in CDC's county as of March 6, 2025, a case of measles has been detected in Vermont. **On March 11, 2025, the Vermont Department of Health reported that a case of measles had been detected among a school-aged child from Lamoille County that recently traveled internationally.**

California – New Cases Identified in Los Angeles and Fresno County Residents

While not included in CDC's county as of March 6, 2025, additional cases of measles have been detected in California. **On March 11, 2025, the Los Angeles County Department of Public Health reported that a case of measles had been detected among an individual who recently traveled internationally. Additionally, the Fresno County Department of Public Health reported that a measles case had been detected among an unvaccinated resident who recently traveled internationally.** According to the California Department of Public Health, a total of 5 measles cases have been reported in the state during 2025.

Pennsylvania – New Case Identified in Philadelphia

While not included in CDC's county as of March 6, 2025, an additional case of measles has been detected in Pennsylvania. **On March 12, 2025, the Philadelphia Department of Public Health reported that a case of measles had been detected in the city among an individual exposed to the virus while traveling internationally.** This is the second case reported in Pennsylvania this year.

Sources: [CDC \(7MAR25\)](#), [Texas DSHS \(11MAR25\)](#), [NMHEALTH \(11MAR25\)](#), [NHMEALTH \(11MAR25\)](#), [MDOH \(9MAR25\)](#), [OSDH \(11MAR25\)](#), [NYSDOH \(11MAR25\)](#), [VDOH \(11MAR25\)](#), [LACDOH \(11MAR25\)](#), [ABC \(12MAR25\)](#), [CDPH \(11MAR25\)](#), [DPPH \(12MAR25\)](#)

Middle East Respiratory Syndrome (MERS)

Kingdom of Saudi Arabia – WHO Releases Bi-Annual Update on Detected Cases:

On March 13, 2025, the WHO released their bi-annual update regarding detected cases of Middle East Respiratory Syndrome (MERS) in the Kingdom of Saudi Arabia (KSA). **From September 6, 2024, to February 28, 2025, a total of 4 confirmed MERS cases and 2 deaths were detected in the KSA in Hail (2), Riyadh (1), and Eastern Region (1) Provinces.** All cases were among males aged 27-78 years with comorbidities, none were healthcare workers, and only 1 reported exposure to dromedary camels.

A total of 2,618 cases of MERS have been reported by 27 countries since 2012, the majority of which have been detected in KSA (84%). No MERS cases have been reported outside the Middle East since 2019.

Source: [WHO \(13MAR25\)](#)

Mpox

Africa – Updated Data on Public Health Emergency of International Concern:

On August 14, 2024, the WHO declared the mpox outbreak in Africa to be a public health emergency of international concern. **As of March 9, 2025, a total of 26,335 confirmed mpox cases involving clades I and II, and 92 deaths among those cases (CFR: 0.3%), have been reported by 23 countries in Africa since the beginning of 2024.** While confirmed cases have been predominantly concentrated in the Democratic Republic of the Congo (DRC) (67.3% of cases), activity has increased in Burundi since late July (13.6% of cases) and in Uganda since mid-September of 2024 (15.6% of cases). Additionally, a very large number of suspected cases and deaths have been reported, primarily from the DRC.

Geography	% of Cases	% of Deaths	Confirmed Cases			Confirmed Deaths			
			Total	Prior Week ¹	New	Total	Prior Week ¹	New	CFR %
Africa	100.0%	100.0%	26,335	25,171	1,164	92	83	9	0.3%
DRC	67.3%	51.1%	17,728	17,339	389	47	47	0	0.3%
Burundi	13.6%	1.1%	3,586	3,586	0	1	1	0	0.0%
Uganda	15.6%	33.7%	4,106	3,391	715	31	23	8	0.8%
Rest of Africa	3.5%	14.1%	915	855	60	13	12	1	1.4%

Table Notes: Data for **confirmed clade I and II mpox cases only** as of March 9, 2025; ¹Prior week data as of March 2, 2025.

Distribution of Confirmed Mpox Cases by Notification Week and Country, Africa, January 1, 2024 – March 9, 2025

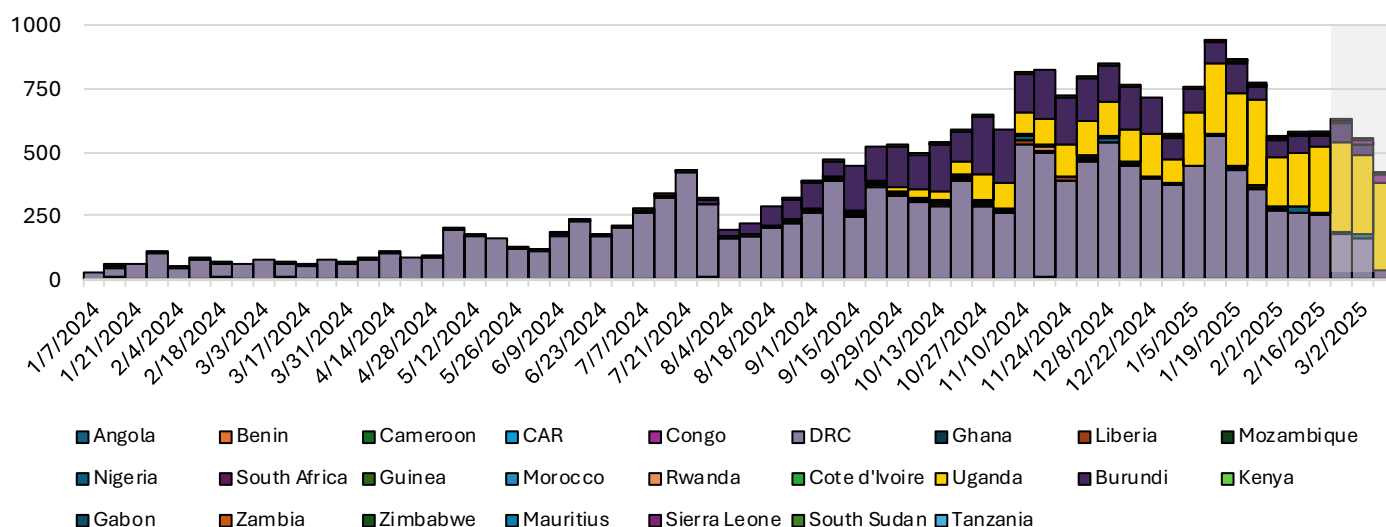


Figure Notes: Data for **confirmed clade I and II mpox cases only** as of March 9, 2025; Data presented in figure for most recent weeks (shaded in gray) should be interpreted with caution, as there are delays associated with reporting – 3,475 confirmed cases from the DRC without an assigned date are not included in figure.

Source: [WHO \(13MAR25\)](https://www.who.int/news-room/fact-sheets/detail/mpox)

Rest of the World – New Imported Clade Ib Mpox Case Detected in Brazil:

Cases of clade Ib mpox have been reported outside of Africa in several countries across the world according to WHO data. **Since the previous update, a new imported case was reported in Brazil (1) among an adult female that had contact with travelers to the DRC.** All imported cases with data on travel history have traveled to areas of Africa with ongoing clade Ib transmission or the United Arab Emirates (UAE).

Reported Clade 1b Mpox Cases, Rest of the World (Outside Africa), 2024-2025				
Country	Imported (New)	Travel History (N) ¹	Secondary (New)	Total Cases (New)
Belgium	2	Central Africa (1), NA ² (1)	3	5
Brazil	1 (+1)	DRC (1)	0	1 (+1)
Canada	1	East Africa (1)	0	1
China	2	DRC (1), UAE (1)	5	7
France	2	East Africa (1), Central Africa (1)	0	2
Germany	5	Rwanda (1), East Africa (3), NA ² (1)	3	8
India	1	UAE (1)	0	1
Ireland	1	DRC (1)	0	1
Oman	1	UAE (1)	0	1
Pakistan	1	UAE (1)	0	1
Qatar	2	Uganda (1), Link to Traveler (1)	0	2
Sweden	1	East Africa (1)	0	1
Thailand	4	DRC (1), UAE (3)	0	4
United Arab Emirates	1	Uganda (1)	0	1
United Kingdom	7	East Africa (1), Uganda (6)	3	10
United States	4	East Africa (3), Africa (1)	0	4
California	1	East Africa (1)	0	1
Georgia	1	East Africa (1)	0	1
New Hampshire	1	East Africa (1)	0	1
New York	1	Africa (1)	0	1

Table Notes: Data as of March 9, 2025; ¹Travel history pertains to imported cases; ²Travel history listed as NA by WHO.

Sources: [WHO \(13MAR25\)](#), [CDC \(12FEB25\)](#), [UKHSA \(4MAR25\)](#)

Non-Seasonal Influenza

United States – New Livestock and Poultry Flock Detections Reported (H5N1):

Since the previous update, 7 new HPAI detections were reported among livestock (cattle only) herds. As of March 12, 2025, there have been 987 confirmed cases of highly pathogenic avian influenza (HPAI) in livestock herds across 18 states (since March 2024). In the last 30 days, 16 detections have been reported in California (9), Nevada (3), Idaho (3), and Arizona (1), all among cattle only. All detections among livestock herds have been influenza A, H5, clade 2.3.4.4b. Several genotypes have been detected, including D1.2 among swine, B3.13 among cattle and alpacas, and most recently D1.1 among cattle in Nevada and Arizona, confirming two additional spillover events from wild birds into cattle.

Livestock HPAI Detections by Species, United States – Past 30 Days			
States with Detections	Cattle	Swine	Alpaca
4	16	0	0

Table Notes: Data as of March 12, 2025.

Since the previous update, 18 new confirmed HPAI detections were reported among poultry flocks. As of March 12, 2025, there have been 1,640 HPAI confirmed detections among poultry flocks across all 50 states and Puerto Rico (since February 2022). Twenty-six states have reported detections among poultry flocks (85 total) in the last 30 days.

Poultry HPAI Detections by Flock Type, United States – Past 30 Days		
States with Detections	Commercial Flocks	Backyard Flocks
26	33	52

Table Notes: Data as of March 12, 2025.

Distribution of Poultry Flock HPAI Detections by State - Past 30 Days

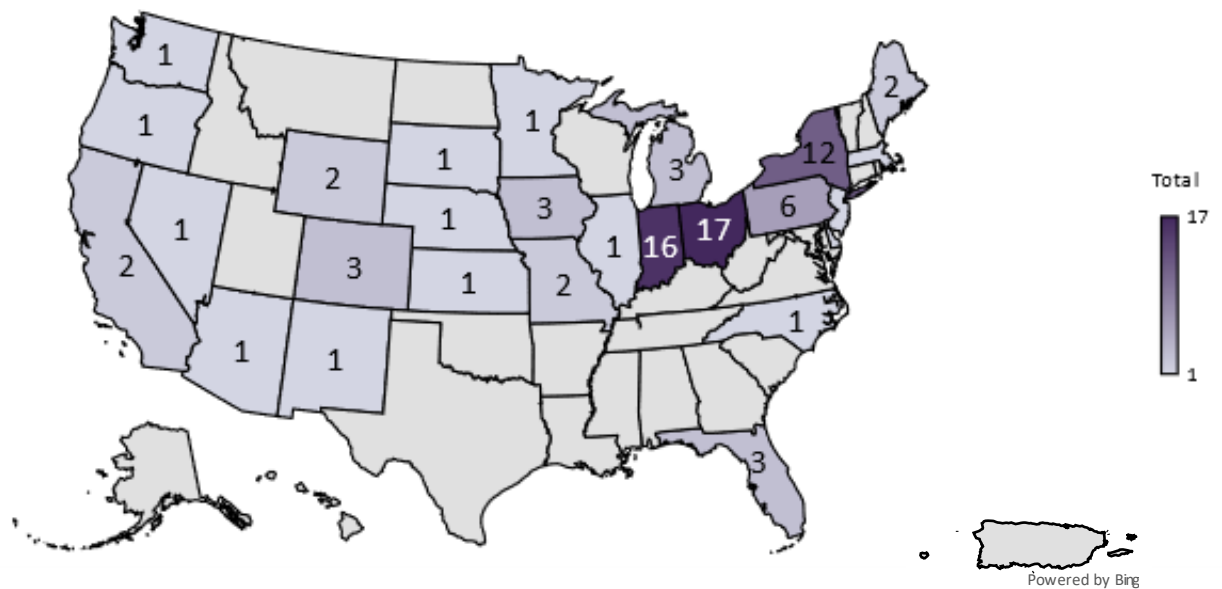


Figure Notes: Data as of March 12, 2025.

Since the previous update, no new human cases were identified. As of March 12, 2025, there have been 70 confirmed human cases with various exposures across 13 states since 2024 and 1 confirmed human case following exposure to infected poultry in Colorado during 2022, totaling 71 confirmed cases overall, and [one death](#). An additional 7 cases meeting the [CSTE probable case definition](#) have been reported by states ([California](#) – 1, [Washington](#) – 3, [Arizona](#) – 2, and [Delaware](#) – 1), although testing conducted by CDC for these individuals was unable to confirm infection.

Confirmed Human H5N1 Cases by State and Source of Exposure, United States, 2024-2025					
State	Cattle Exposure ¹	Poultry Exposure ¹	Other Animal Exposure ²	Unknown Exposure	State Total
California	36	0	0	2	38
Colorado	1	9	0	0	10
Iowa	0	1	0	0	1
Louisiana	0	0	1	0	1
Michigan	2	0	0	0	2
Missouri	0	0	0	1	1
Nevada	1	0	0	0	1
Ohio	0	1	0	0	1
Oregon	0	1	0	0	1
Texas	1	0	0	0	1
Washington	0	11	0	0	11
Wisconsin	0	1	0	0	1
Wyoming	0	0	1	0	1
Total	41	24	2	3	70

Table Notes: Data as of March 12, 2025; Only cases confirmed by CDC are included – 7 additional probable cases have been reported by states;
¹Exposure associated with commercial agriculture and related operations; ²Exposure related to other animals such as backyard flocks, wild birds, or other mammals.

Distribution of Confirmed Human H5N1 Cases by Epidemiological Week, United States, March 2024 – March 2025

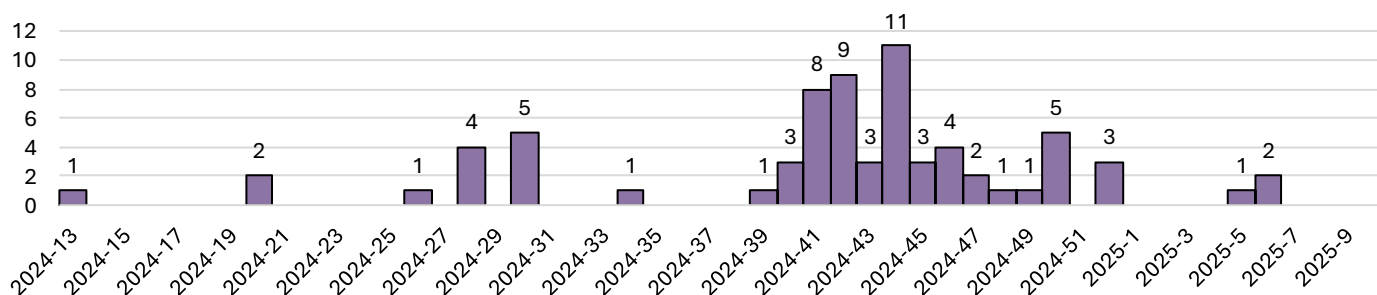


Figure Notes: Data as of March 13, 2025; Only cases confirmed by CDC are included – 7 additional probable cases have been reported by states.

While the **current risk to public health is classified as low**, the CDC is carefully monitoring the situation and leveraging its flu surveillance systems for H5N1 activity in humans, which as of March 7, 2025, have not indicated any sign of unusual activity. **There has been no documented evidence of human-to-human transmission.**

The CDC and USDA update the metrics included in this summary regularly and provide additional information and resources at the links below. H5N1 has been detected in other [mammals](#) and [wild birds](#) in the United States since 2022 and continues to be detected nationally, and in New York State.

Sources: [CDC \(12MAR25\)](#), [CDC \(7MAR25\)](#), [USDA \(13MAR25\)](#), [USDA \(13MAR25\)](#), [PAHO/WHO \(13MAR25\)](#)

Oropouche

Region of the Americas – First Death of 2025 Reported in Panama:

On February 11, 2025, the PAHO/WHO released an epidemiological update regarding Oropouche in the Region of the Americas during 2024 and 2025. According to the report, there were a total of 16,239 confirmed Oropouche cases reported, including 4 deaths, across 11 countries and 1 territory in the Region of the Americas during 2024. Cases were predominantly reported from Brazil (84.9%), Peru (7.8%), Cuba (3.9%), and Bolivia (2.2%). Confirmed cases of vertical transmission were reported in Brazil only (4 cases of fetal death and 1 case of congenital anomaly).

According to PAHO/WHO data extracted on March 12, 2025, there have been a total of 5,631 confirmed Oropouche cases and 1 death reported across 5 countries in the Region of the Americas this year. Since the previous update, the first death from the virus this year was reported from Panama among an elderly male with history of high blood pressure and diabetes mellitus. Cases have primarily been reported in Brazil (95.9%) and Panama (3.8%), with overall numbers trending higher compared to 2024.

Distribution of Confirmed Locally Acquired Oropouche Cases by Epidemiological Week of Symptom Onset, Region of the Americas, 2024-2025

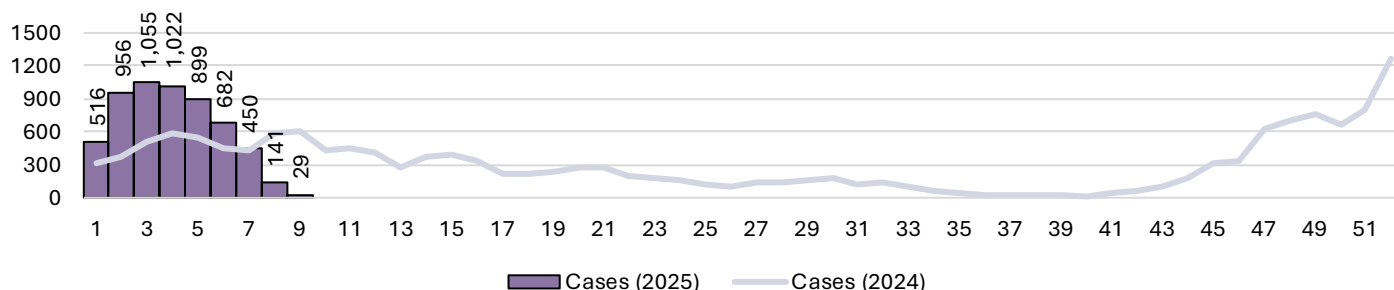


Figure Notes: Data extracted from PAHO/WHO dashboard on March 12, 2025, and includes confirmed locally acquired cases only; Data on cases included in the PAHO/WHO report mentioned above and extracted from the PAHO/WHO dashboard for figure differ marginally.

United States – First Travel Associated Case of 2025 Reported Among Wisconsin Resident

The United States CDC currently has a [Level 2 – Practice Enhanced Precautions](#) travel notice posted for those traveling to Brazil and Panama and a [Level 1 – Practice Usual Precautions](#) travel notice posted for those traveling to the Region of the Americas. **As of March 11, 2025, the United States has reported 1 travel associated neuroinvasive Oropouche virus case this year among a Wisconsin resident.** A total of 108 travel associated cases were reported in the United States during 2024, of which 2 were neuroinvasive. No deaths have been reported during either year.

Sources: [PAHO/WHO Report \(11FEB25\)](#), [PAHO/WHO Dashboard \(12MAR25\)](#), [CDC \(11MAR25\)](#), [ONT \(11MAR25\)](#)

Pertussis

United States – Updated 2025 Case Numbers Outpacing 2024 Case Numbers:

According to provisional CDC data, there were 5.0 times more pertussis cases reported in 2024 (35,435) compared to 2023 (7,063). This represents a return to pre-pandemic case numbers and the highest annual number of reported cases since 2012 (48,277).

Distribution of Reported Pertussis Cases by Year, United States, 2010-2025

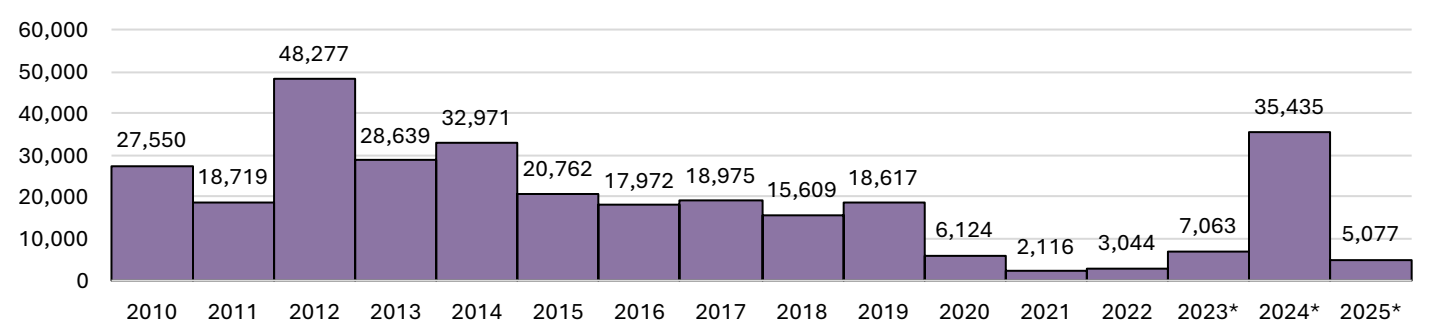


Figure Notes: Data as of March 1, 2025; *Case counts for years 2023-2025 are provisional and subject to change.

According to provisional CDC data, as of March 1, 2025, there have been a total of 5,077 pertussis cases reported in the United States this year. Since the previous update, 580 new cases were reported, of which 228 had rash onset during the most recent week ending March 1, 2025. Compared to provisional data from 2024, case numbers for 2025 are 2.6 times higher as of the same date overall and vary by reporting area.

Reported Pertussis Cases by Region and Prior Year Comparison, United States, 2025				
Reporting Area	Current Week	Cumulative (2025)	Cumulative (2024)	Ratio
United States	228	5,077	1,948	2.6
New England	1	100	27	3.7
Middle Atlantic	39	363	568	0.6
East North Central	40	1,122	408	2.8
West North Central	3	338	132	2.6
South Atlantic	31	529	179	3.0
East South Central	22	439	40	11.0
West South Central	15	224	53	4.2
Mountain	43	685	289	2.4
Pacific	34	1,277	248	5.1
United States Territories	0	0	4	0.0

Table Notes: Data as of March 1, 2025; Case counts for years 2024 and 2025 are provisional and subject to change; New York State is included in the Middle Atlantic reporting area.

Source: [CDC \(13JAN25\)](#), [CDC \(1MAR25\)](#), [CDC \(JAN25\)](#), [CDC \(23JUL24\)](#)

Polio

Global – New cVDPV2 Cases Detected in Chad and Nigeria:

According to data as of March 10, 2025, from the Global Polio Eradication Initiative (GPEI), there have been a total of 7 confirmed wild poliovirus type 1 (WPV1) cases and 10 circulating vaccine derived poliovirus type 2 (cVDPV2) cases with onset of paralysis during 2025 reported this year. **Since the previous update, 4 new cVDPV2 cases were detected in Chad (1) and Nigeria (3).**

Poliovirus Cases by Type, Global, 2025				
Country	WPV1 (New)	cVDPV1 (New)	cVDPV2 (New)	cVDPV3 (New)
Afghanistan	1	0	0	0
Chad	0	0	3 (+1)	0
Djibouti	0	0	1	0
Nigeria	0	0	6 (+3)	0
Pakistan	6	0	0	0
Total	7	0	10 (+4)	0

Table Notes: Data as of March 10, 2025.

Sources: [WPV – GPEI \(10MAR25\)](#), [cVDPV – GPEI \(10MAR25\)](#)

Salmonella

United States – Multistate Outbreak Linked to Pet Geckos:

On March 13, 2025, the CDC reported that health officials in several states are investigating a multistate outbreak of *Salmonella* Muenchen infections that have been linked to pet geckos. **As of March 10, 2025, a total of 8 cases of individuals infected with the outbreak strain have been reported from California (1), Kansas (1), Louisiana (1), Michigan (1), New Jersey (1), Ohio (1), Pennsylvania (1), and Virginia (1).** Of those cases interviewed (6), 83% reported contact with a gecko prior to illness onset. The types of geckos reported include leopard, crested, Malaysian cat, and African fat-tailed geckos. According to the CDC, the true number of cases associated with this outbreak is likely much higher and may not be limited to states with reported cases.

Distribution of Reported Salmonella Cases Linked to Pet Geckos By Date of Illness Onset, United States, 2024-2025

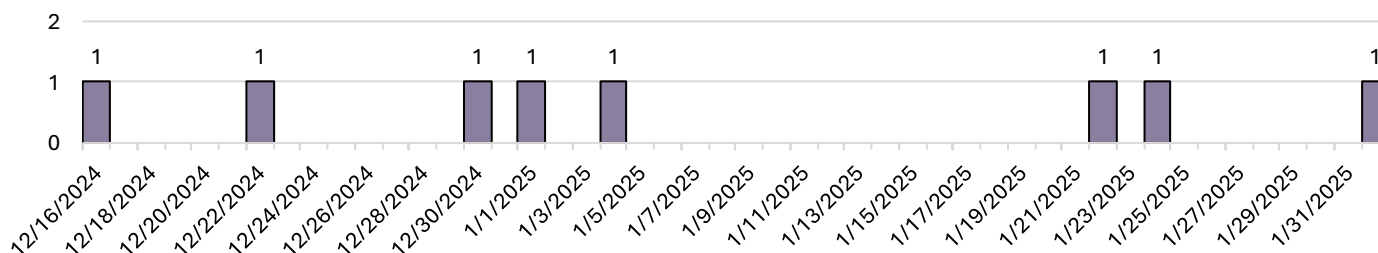


Figure Notes: Data as of March 10, 2025.

A similar outbreak of *Salmonella* Muenchen linked to pet crested geckos occurred in the United States during 2014-2015 that resulted in 22 cases across 17 states. Of those cases, 3 were hospitalized and none died.

Source: [WHO \(13MAR25\)](#), [CDC \(15\)](#)

Seasonal Influenza

United States – Updated Data on First High Severity Season Since 2017-2018:

The CDC has classified the current 2024-2025 flu season as a high severity season for all ages for the first time since the 2017-2018 season. **As of March 1, 2025, the CDC estimates there to have been at least 40 million flu infections, 520,000 hospitalizations, and 22,000 deaths from flu so far this year.** A total of 114 pediatric deaths have been reported this year, an increase of 16 compared to the prior week. Given that activity has decreased for several consecutive weeks, the CDC suggests that the season has peaked, although flu-related medical visits, hospitalizations, and deaths remain elevated, with several more weeks of flu activity to be expected.

Influenza Season Metrics, CDC, 2024-2025 Season			
Estimated Infections*	Estimated Hospitalizations*	Estimated Deaths*	Pediatric Deaths (New)
40 Million	520,000	22,000	112 (+16)

Table Notes: Data as of March 1, 2025; *Totals estimated by CDC.

According to data from Influenza Hospitalization Surveillance Network (FluSurv-NET) member states, the weekly hospitalization rate observed during the week ending March 1, 2025, was 5.0 per 100,000 population. Rates observed during previous weeks (Epi weeks 4-7) were the highest weekly rates observed since the 2017-2018 season (10.2 per 100,000).

Laboratory Confirmed Flu Hospitalizations by Epi Week, Rate per 100K Population, United States, 2017-2025

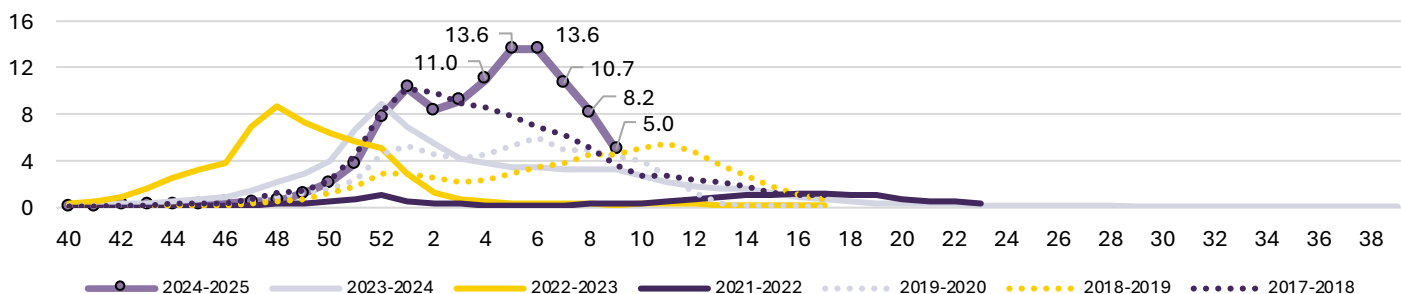


Figure Notes: Data as of March 1, 2025; FluSurv-NET member states include California, Colorado, Connecticut, Georgia, Maryland, Michigan, Minnesota, New Mexico, New York, North Carolina, Ohio, Oregon, Tennessee, and Utah; Data for 2020-2021 season unavailable.

According to data from the National Center for Health Statistics (NCHS) Mortality Surveillance System, the percentage of deaths due to flu during the week ending March 1, 2025, was 2.5%, decreasing again for the second week in a row but still much higher than what has been seen in recent years as of the same date. The percentage of deaths due to flu was once again higher than the percent of deaths due to COVID-19 during the same week (1.2%).

Percentage of Deaths due to Flu by Epi Week, United States, 2020-2025

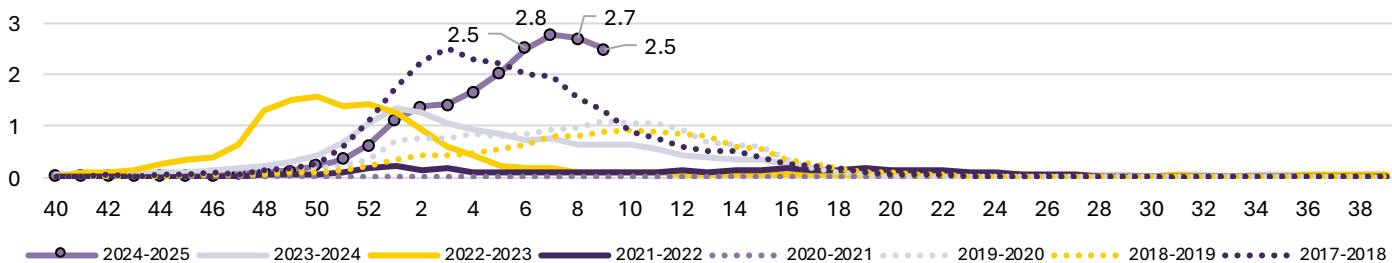


Figure Notes: Data as of March 1, 2025; Data are preliminary and are subject to change.

The New York State Department of Health publishes a weekly [Influenza Activity Report](#) on trends occurring in the state.

Sources: CDC (7MAR25), FluSurv-NET (23OCT23), COVID Data Tracker (10MAR25)