



**Date: 2/26/26**

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

### The Americas – Updated 2026 Data; Incidence Highest in Suriname and Bolivia:

According to data from the [Pan American Health Organization \(PAHO\)](#) extracted on February 25, there have been a total of 18,480 chikungunya cases, of which 7,322 are confirmed, and 3 deaths reported in the Americas during 2026. Since the previous update, 6,586 incident chikungunya cases, of which 3,886 are confirmed, and 1 death were reported in the Americas. Incident cases were reported primarily in Bolivia and Brazil.

Country	Cases		Confirmed Cases		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR
Bolivia	5,518	+4,534	3,976	+1,990	1	+1	0.0%
Brazil	10,411	+1,909	2,866	+876	0	+0	0.0%
Cuba	1,457	+0	114	+0	2	+0	1.8%
Rest of the Americas	1,094	+143	366	+18	0	+0	0.0%
<b>Total</b>	<b>18,480</b>	<b>+6,586</b>	<b>7,322</b>	<b>+3,886</b>	<b>3</b>	<b>+1</b>	<b>0.0%</b>

Table Notes: Data extracted on February 25, 2026, and includes locally acquired cases only; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR) calculated among confirmed cases.

Cases have been reported by 15 countries during 2026, primarily Brazil (10,411), [Bolivia](#) (5,518), Cuba (1,457), Argentina (724), and [Suriname](#) (324). Cumulative incidence per 1,000,000 population is currently highest in Suriname (50.23), Bolivia (43.28), Cuba (13.38), Brazil (4.87), French Guiana (2.20), and Argentina (1.57).



Figure Notes: Data extracted on February 25, 2026, and includes locally acquired cases only; \*Change in cumulative total compared to previous update; Case reported in the United States (1) not shown due to symptom onset being during 2025.

According to a recently published [PAHO Epidemiological Alert](#), there has been a sustained increase in chikungunya cases observed between late 2025 and early 2026 in the Americas with resumption of local transmission in areas that have not reported transmission for several years. During 2025, there were 315,078 chikungunya cases, of which 114,977 were confirmed, and 171 deaths reported in the Americas. There were 2 locally acquired chikungunya cases reported during 2025 in the United States among residents of [New York](#) and [Florida](#), the first in the country since 2015. According to [United States CDC](#) data as of January 13, 2026, a total of 466 travel associated chikungunya cases were reported in the country during 2025. The United States CDC currently has Level 2 – Practice Enhanced Precautions Travel Health Notices posted regarding chikungunya in [Bolivia](#), [Cuba](#), and [Suriname](#).

**Data Source:** [PAHO \(2/25/26\)](#)

## Seychelles – Incident Travel Associated Cases Reported in Multiple Countries:

According to the [National Information Services Agency \(NISA\)](#), which cites the Seychelles Ministry of Health, there has been a nationwide increase in chikungunya activity since mid-December 2025, with the disease being the most prevalent arbovirus on the Indian Ocean island nation as of early January 2026. Activity has [continued](#) into February coinciding with the rainy season. Since the previous update, additional travel associated cases have been reported in [Germany](#), [Hong Kong](#), [Russia](#), and [Armenia](#) among individuals with recent travel history to Seychelles.

The United States CDC currently has a [Level 2 Practice Enhanced Precautions Travel Health Notice](#) posted regarding chikungunya in Seychelles. According to [BEACON](#), this outbreak follows 20 years of insignificant chikungunya activity in Seychelles since the first outbreak and epidemic experienced by the country from 2005-2007.

**Data Sources:** [NISA \(1/7/26\)](#), [NISA \(2/5/26\)](#), [BEACON \(2/15/26\)](#)

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## Measles

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### Canada – Incident Cases Reported in Multiple Provinces, Primarily Manitoba:

According to data from the [Public Health Agency of Canada \(PHAC\)](#), as of February 14, 2026, there have been a total of 5,460 probable and confirmed measles cases reported in Canada during 2025, and 254 probable and confirmed measles cases reported during 2026. Since the previous update, 71 incident cases were reported, primarily in Manitoba (42).

Measles Cases, Hospitalizations, and Deaths, Canada, 2025-2026									
Year	Probable Cases		Confirmed Cases		Hospitalizations		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
2025	382	+3	5,078	+6	401	+0	2	+0	0.0%
2026	15	+2	239	+60	12	+4	0	+0	0.0%

Table Notes: Data as of February 14, 2026; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR) calculated among probable and confirmed cases.

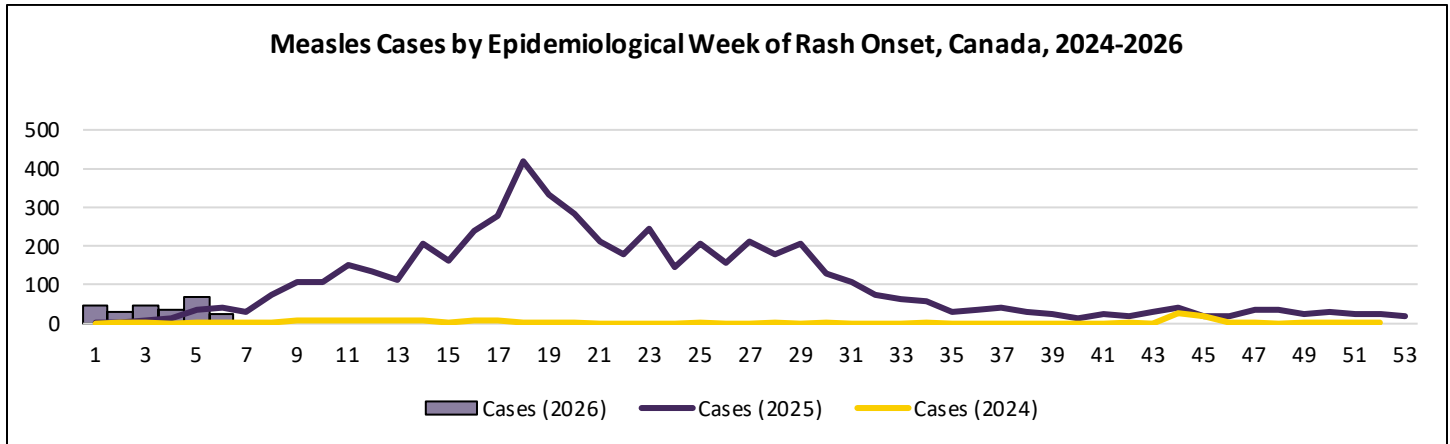


Figure Notes: Data as of February 14, 2026, and includes probable and confirmed cases.

During 2026, cases have been reported by 7 jurisdictions: [Manitoba](#) (158), [Alberta](#) (60), [British Columbia](#) (17), Nova Scotia (10), [Quebec](#) (3), [Saskatchewan](#) (5), and Ontario (1). Those aged 18-54 years have been most affected (42%), followed by those aged 5-17 years (35%), and those aged 1-4 years (13%). Among all cases, 90% were unvaccinated or had unknown vaccination statuses, 5% have been hospitalized, and 97% were exposed in Canada (epidemiologically and/or virologically linked). Cases exposed outside of Canada have reported travel to Mexico, Pakistan, Spain, and Togo.

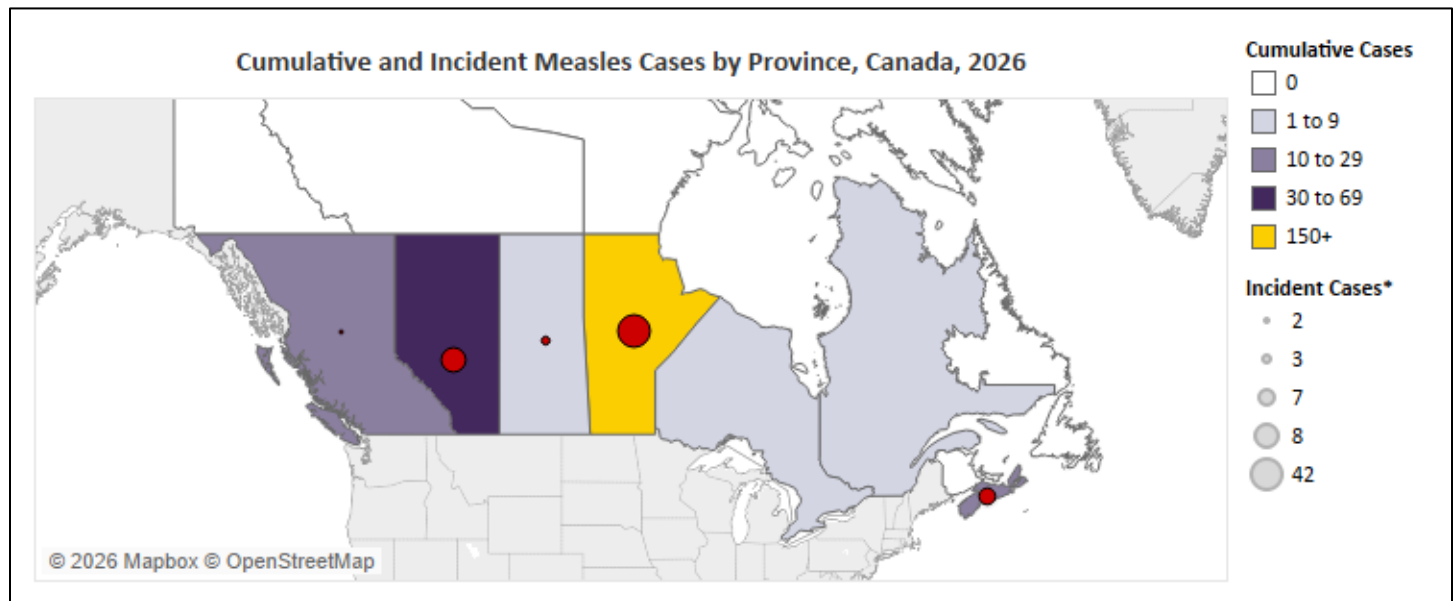


Figure Notes: Data as of February 14, 2026, and includes probable and confirmed cases; \*Change in cumulative total compared to previous update.

During 2025, cases were reported by 10 jurisdictions, primarily Ontario (2,397), Alberta (2,014), British Columbia (440), and Manitoba (356). Those aged 5-17 years were most affected (45%), followed by those aged 18-54 years (28%), and those aged 1-4 years (20%). Among all cases, 93% were unvaccinated or had unknown vaccination statuses, 7% were hospitalized, and 98% were exposed in Canada (epidemiologically and/or virologically linked).

Canada is currently experiencing a large measles outbreak involving 5,628 cases that began in October 2024 and has resulted in the country [losing measles elimination status](#). Among all cases reported during 2026, 96% are linked to this outbreak. During 2025, Canada reported the highest number of cases in a single year since 2011 (752). From 1998-2024, a period where measles was eliminated in Canada, there were 91 cases reported annually on average.

Data Sources: [PHAC - 2026 \(2/23/26\)](#), [PHAC - 2025 \(2/23/26\)](#)

## Israel – Additional Death Reported Among Unvaccinated 6-Year-Old:

According to data from the [Israeli Ministry of Health](#), as of February 25, 2026, there have been a total of 3,140 measles cases and 16 deaths reported in Israel since April 2025. Since the previous update, 85 incident cases and [1 death](#) among an unvaccinated 6-year-old were reported.

Measles Cases, Hospitalizations, and Deaths, Israel, 2025-2026						
Cases		Hospitalizations		Deaths		
Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
3,140	+85	1,071	+30	16	+1	0.5%

Table Notes: Data as of February 25, 2026; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR).

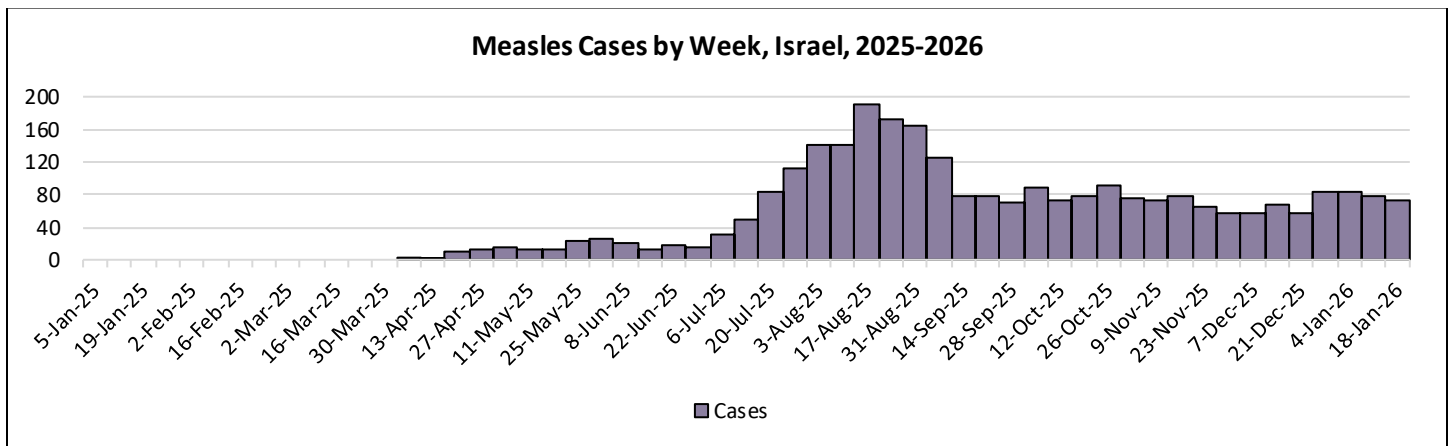


Figure Notes: Data as of February 25, 2026, and includes 2,797 cases through January 24, 2026.

Cases have primarily been reported in Beit Shemesh (983), Jerusalem (979), Safed (137), Bnei Brak (136), Tiberias (101), Beitar Illit (93), Modin Illit (66), and Nof Hagalil (54). Among all cases, 87.9% have been among children aged <10 years, and 34.1% have been hospitalized, including 24 cases currently hospitalized – 5 of which are in intensive care. Almost all deaths have been reported among unvaccinated children aged <3 years of age with no underlying health conditions. Vaccination campaigns have been ongoing since May 2025. Breakthrough infections ([1](#), [2](#)) resulting in mild infections have been observed in this outbreak among doctors providing care for measles patients at the same hospital.

A total of [54 measles cases](#) were reported in Israel during 2023-2024. During 2018-2019, Israel experienced a large measles outbreak with approximately 4,300 cases and 3 deaths that was linked to outbreaks in [New York City \(NYC\)](#), and [New York \(excluding NYC\) and New Jersey](#). The current outbreak is the largest since the 2018-2019 outbreak with a much greater number of deaths reported, suggesting delays in care seeking that may be contributing to preventable deaths, the presence of many additional measles cases not captured by surveillance, or both.

Data Source: [Israeli Ministry of Health \(2/25/26\)](#)

## Mexico – Over 1,050 Confirmed Incident Cases Reported, Most in Jalisco:

According to data from the [Secretary of Health of Mexico](#), as of February 25, 2026, there have been a total of 6,452 confirmed measles cases and 27 deaths reported in Mexico during 2025, and 4,814 confirmed cases and 5 deaths reported

during 2026. Since the previous update, 1,067 confirmed incident cases and 1 death were reported. Incident cases with rash onset during 2026 were reported primarily in Jalisco (627), Mexico City (88), and Chiapas (82).

Measles Cases, Hospitalizations, and Deaths, Mexico, 2025-2026							
Year	Probable Cases		Confirmed Cases		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR
2025	15,730	-12	6,452	+10	27	+0	0.4%
2026	13,935	+2,599	4,814	+1,057	5	+1	0.1%

Table Notes: Data as of February 18, 2026; †Change in cumulative total compared to prior update; \*Case fatality rate (CFR) calculated among confirmed cases.

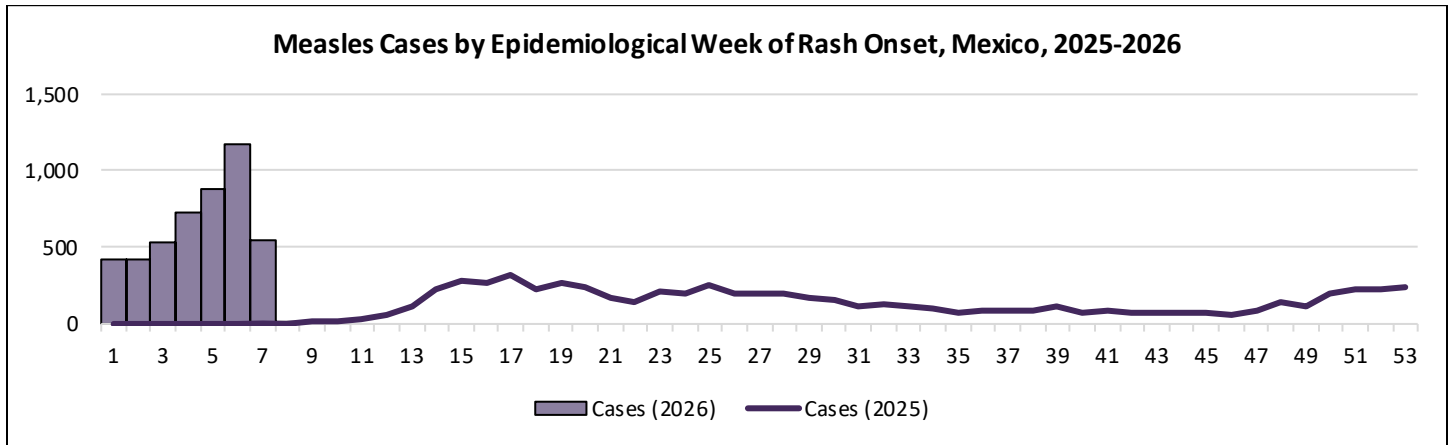


Figure Notes: Data as of February 25, 2026, and includes confirmed cases only (2 missing from figure).

During 2026, confirmed cases have been reported by 29 states, primarily Jalisco (2,856), Chiapas (423), and Mexico City (324). During 2025, confirmed cases were reported by 29 states, primarily Chihuahua (4,495) and Jalisco (664). Across both years, incidence per 100,000 population has been highest among those aged <1 year (58.84), followed by those aged 1-4 years (18.31), those aged 5-9 years (12.83), and those aged 25-29 years (11.83).

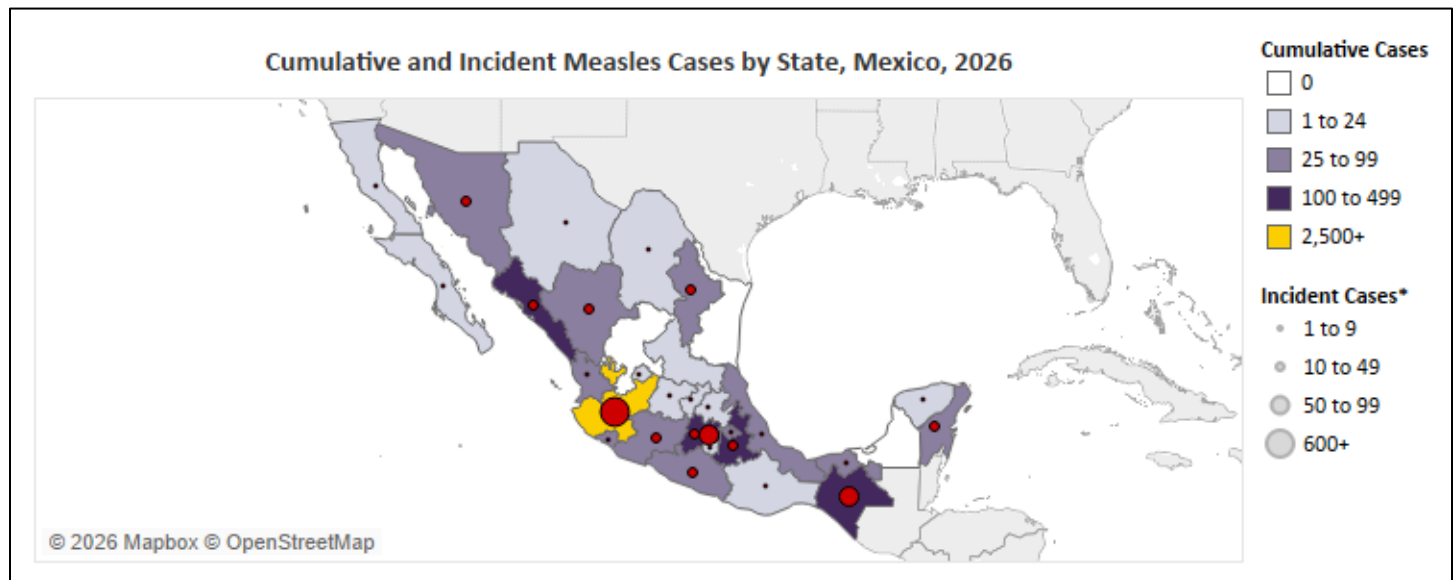


Figure Notes: Data as of February 25, 2026, and includes confirmed cases only; \*Change in cumulative total compared to previous update.

Measles outbreaks in Mexico have been ongoing since February 1, 2025 – this is the largest measles epidemic in Mexico since the country achieved elimination status in 1997. The [Pan American Health Organization \(PAHO\)](#) has invited Mexico to meet virtually in April to review their measles elimination status.

**Data Source:** [Secretary of Health \(2/25/26\)](#)

# United States – Incident Cases Reported in 14 States with Declining Activity in SC:

According to data from the [United States CDC](#), as of February 19, 2026, there have been a total of 2,281 confirmed measles cases and 3 deaths reported in the United States during 2025, and 982 confirmed cases reported during 2026. Since the previous update, 73 confirmed incident cases were reported, primarily in Utah (21) and South Carolina (16).

Measles Cases, Hospitalizations, and Deaths, United States, 2025-2026							
Year	Confirmed Cases		Hospitalizations		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
2025	2,281	+1	246	+0	3	+0	0.1%
2026	982	+72	38	+8	0	+0	0.0%

Table Notes: Data as of February 19, 2026, and includes cases reported among international visitors to the United States; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR).

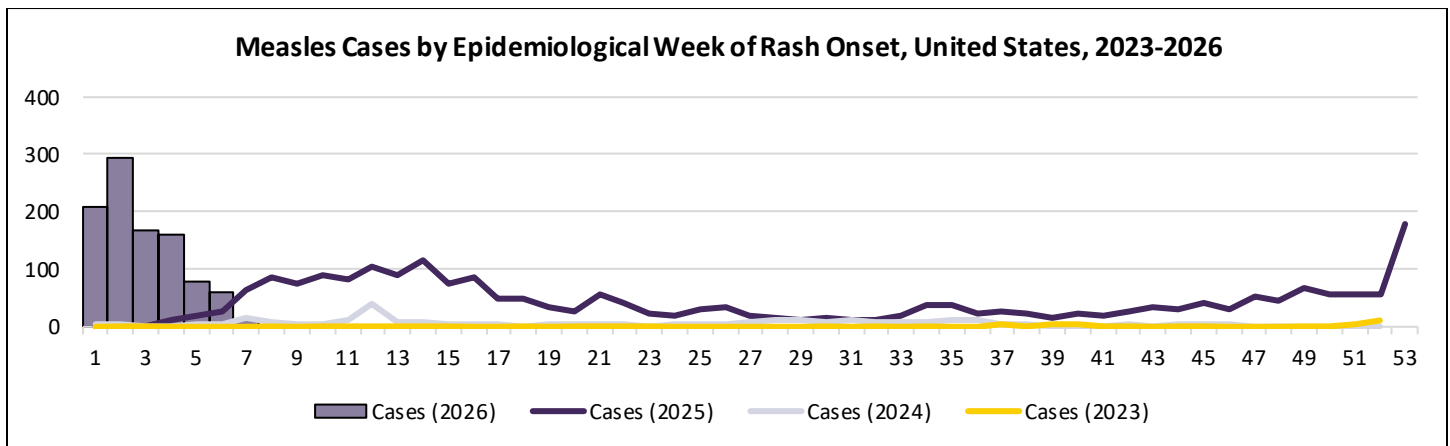


Figure Notes: Data as of February 19, 2026, and includes cases reported among international visitors to the United States.

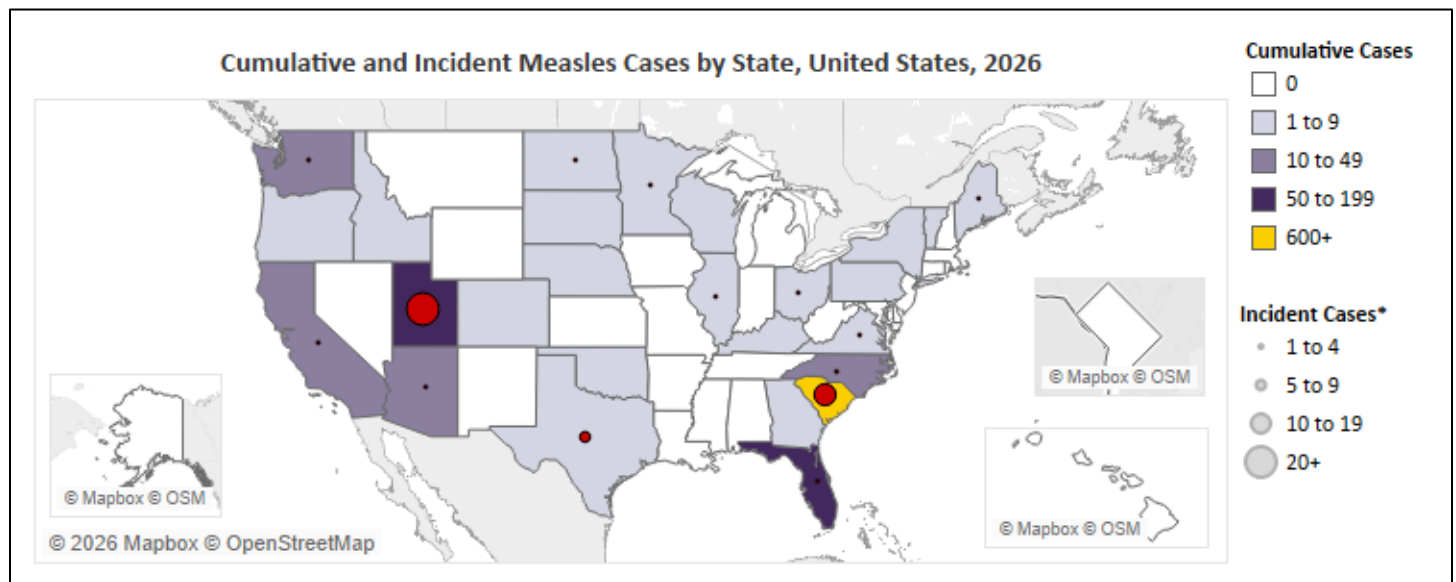


Figure Notes: Data as of February 19, 2026, and does not include cases reported among international visitors to the United States; \*Change in cumulative total compared to previous update.

During 2026, confirmed cases have been reported by 26 jurisdictions, primarily South Carolina (632), Utah (117), Florida (64), Arizona (36), Washington (24), California (17), and North Carolina (17), and for the first time this year in Texas (7) and Illinois (2). There have been 7 outbreaks reported during 2026—89% of confirmed cases reported during 2026 are outbreak associated (73 from outbreaks that began during 2026 and 797 from outbreaks that began during 2025). Currently, there are ongoing outbreaks in [Arizona](#), [Utah](#), [South Carolina](#), [Florida](#), [Washington](#), and [California](#). Activity has been [declining](#)

[recently](#) in South Carolina. Those aged 5-19 years have been most affected (59%), followed by those aged <5 years (25%), and those aged 20+ years (15%). Among all confirmed cases 94% have been unvaccinated or have unknown vaccination statuses and 4% have been hospitalized. In New York, there has been [1 confirmed case](#) reported in New York City.

During 2025, confirmed cases totals were the highest observed since 1991 (9,643), with cases reported by 45 jurisdictions. There were 49 outbreaks reported – 89% of confirmed cases were outbreak associated. Those aged 5-19 years were most affected (44%), followed by those aged 20+ years (29%), and those aged <5 years (26%). Among all confirmed cases, 93% were unvaccinated or had unknown vaccination statuses and 11% were hospitalized – including 18% of cases aged <5 years. In New York, there were 20 confirmed cases reported in [New York City](#) and 28 in [Rest of State](#) with an [increase observed during October](#) in the Hudson Valley as a result of from measles acquired during international travel.

The United States CDC currently has a [Level 1 – Practice Usual Precautions Travel Health Notice](#) posted regarding measles globally. Measles, mumps, and rubella (MMR) [vaccination](#) offers the best protection against measles infection. A decrease in vaccination coverage among kindergartners and an [increase in parents delaying vaccination](#) among infants has been observed in the United States since the COVID-19 pandemic. The [Pan American Health Organization \(PAHO\)](#) has invited the United States to meet virtually in April to review their measles elimination status, a milestone achieved in 2000.

**Data Source:** [CDC \(2/20/26\)](#)

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## New World Screwworm

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### Mexico – Updated Data on Animal and Human Cases Reported:

According to data from the [Secretary of Agriculture of Mexico](#), as of February 25, 2026, there have been a total of 16,269 New World screwworm (NWS) cases reported among animals in Mexico since November 2024, of which 802 are currently active (an increase compared to the prior week). According to data from the [Secretary of Health of Mexico](#), as of February 14, 2026, there have been a total of 151 confirmed NWS cases reported among humans since the beginning of 2025. Since the previous update, 448 incident cases among animals and 2 confirmed incident cases among humans were reported.

New World Screwworm Cases by Species, Mexico, 2024-2026					
Animal Cases				Confirmed Human Cases	
Cumulative	Incident†	Active	Change	Cumulative	Incident†
16,269	+448	802	+69	151	+2

*Figure Notes: Data for cases reported among animals as of February 25, 2026, and data for cases reported among humans of February 14, 2026; †Change in cumulative total compared to previous update.*

NWS cases among animals have primarily been reported in Chiapas (5,953), Oaxaca (2,715), Veracruz (2,426), Yucatan (1,718), and Tabasco (1,131). Confirmed NWS cases among humans have primarily been reported in Chiapas (107) and Yucatan (16). The current NWS outbreak began in Panama and Costa Rica during 2023 and has since spread to all countries in Central America and Mexico. Collectively, as of [February 24, 2026](#), there have been over 156,000 NWS cases reported among animals and over 1,350 NWS cases reported among humans in Central America and Mexico.

Last month the United States CDC issued a [Health Advisory](#) regarding NWS cases detected among animals near the United States – Mexico border, specifically in Tamaulipas where there are currently 10 active NWS cases among animals (an increase of 7 compared to the prior week), to increase awareness given the potential for geographic spread. NWS was detected in a Florida import facility among a [horse imported from Argentina](#) that was immediately quarantined and treated – there has been no detection of NWS outside of the quarantine facility. NWS has [not been reported among animals](#) or humans in the United States except for a single [travel associated case](#) among an individual returning from El Salvador.

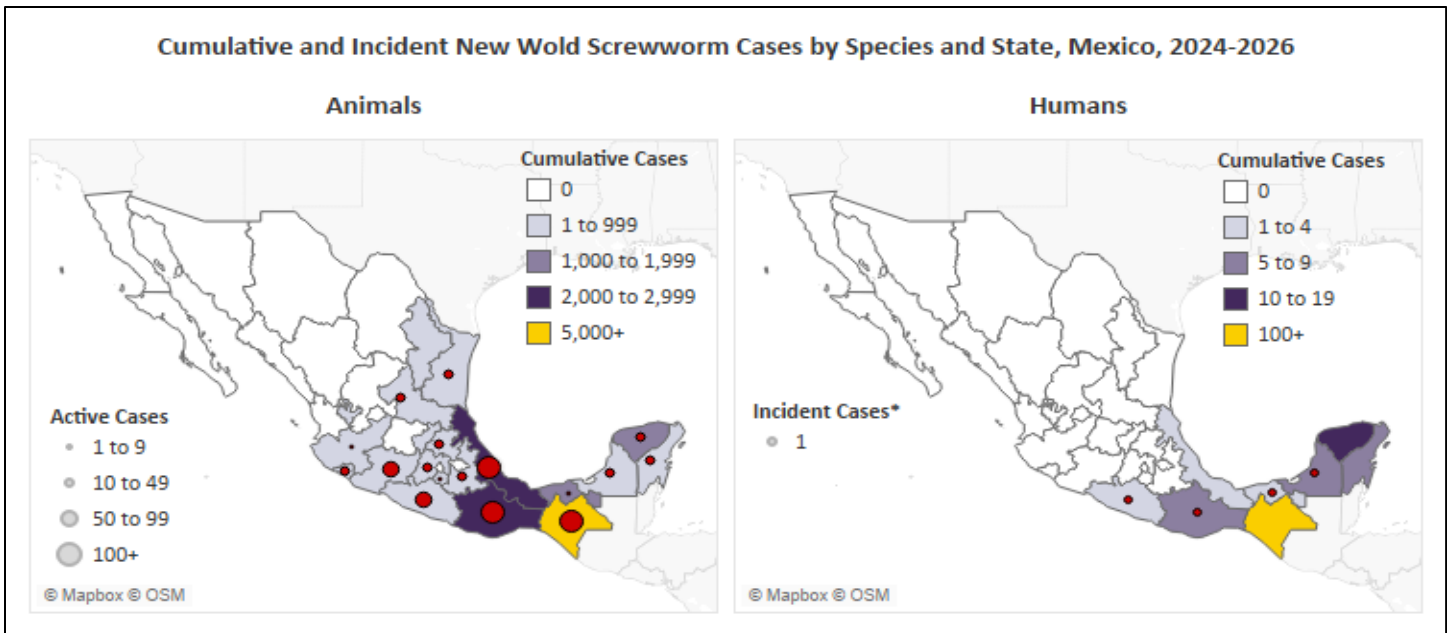


Figure Notes: Data for cases reported among animals as of February 25, 2026, and data for cases reported among humans as of February 14, 2026; \*Change in cumulative total compared to previous update.

Data Sources: [Secretary of Agriculture \(2/19/26\)](#), [Secretary of Health \(2/23/26\)](#), [CDC \(2/24/26\)](#)

## Non-Seasonal Influenza

### United States – Updated Data on Poultry Flock Detections (HPAI):

According to data from the [United States Department of Agriculture \(USDA\)](#), as of February 25, 2026, there have been a total of 2,095 confirmed highly pathogenic avian influenza (HPAI) detections reported among poultry flocks in the United States since February 8, 2022. In the past 30 days, a total of 56 confirmed HPAI detections have been reported.

HPAI Detections Among Animals, United States, Past 30 Days						
Poultry Flocks		Livestock Herds*			Wild Birds†	Mammals
Commercial	Backyard	Dairy Cattle	Swine	Alpacas		
30	26	0	0	0	-	12

Table Notes: Data as of February 25, 2026; The number of detections reported in the past 30 days are based on date of detection/confirmation rather than date of sample collection; \*New HPAI detections among previously unaffected herds only; †Updated data unavailable.

In the past 30 days, HPAI has been detected among poultry flocks in 19 states, primarily [Pennsylvania](#) (22) which is experiencing its most severe outbreak since the 1980s. Detections increased during 2025 from September (29) to November (96) before decreasing slightly in December (82). During 2026, this downward trend continued in January (62) and there have been 47 detections reported so far during February. Similar trends have been observed during recent years in the [United States](#) and [globally](#). Last month, the New York State Department of Environmental Conservation reminded New Yorkers to [stay alert for HPAI](#) and avoid contact with sick or dead birds and mammals that may be infected. In neighboring [New Jersey](#), there have been reports of large numbers of dead wild birds with suspected HPAI during February.

According to data from the [United States CDC](#), as of February 18, 2026, there have been a total of 71 confirmed influenza A(H5) cases, including 2 deaths ([1](#), [2](#)), and 7 probable H5 cases reported among humans since the beginning of 2024. The [most recent human case](#), and first ever human H5N5 case globally, was reported during November 2025 in Washington. Most human cases reported in the United States were exposed during commercial agriculture and related operations involving contact with dairy cattle and poultry. According to CDC, the current risk to public health is low and person-to-person transmission has not been documented. HPAI continues to be detected [wild birds](#), and other [mammals](#), while detections among [livestock](#) (primarily [dairy cattle](#)) have dropped off during 2026.

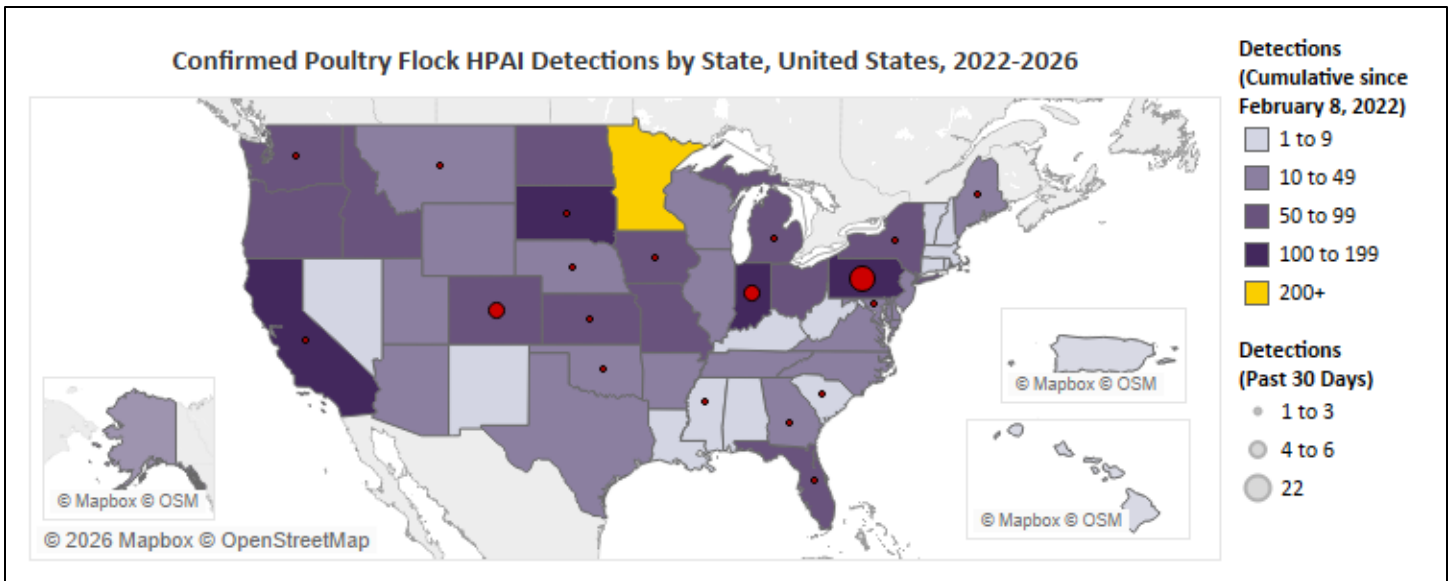


Figure Notes: Data as of February 25, 2026, 2025; \*Change in cumulative total compared to previous update.

Since [2022](#), 19 countries in the Americas have reported over 5,000 H5N1 outbreaks, and 5 countries have reported a cumulative total of 75 human H5N1 cases, including 2 deaths (both caused by the [D1.1 strain](#)).

Data Sources: [USDA \(2/26/26\)](#), [CDC \(2/18/26\)](#)

## Pertussis

### United States – Updated Data on Cases Reported in 2026 by State and Region:

According to provisional data from the [United States CDC](#), as of February 21, there have been a total of 1,581 pertussis cases reported among United States residents and residents of United States Territories during 2026. Since the previous update, 281 incident cases were reported, of which 108 reported symptom onset during the most recent epidemiological week, a 13% increase compared to the prior week. Totals for 2026 are currently much lower (~80%) compared to totals for 2025 as of the same date across all reporting areas.

Pertussis Cases by Reporting Area with Prior Year Comparison, United States, 2025-2026				
Reporting Area	Cases			
	Current Week	Cumulative (2026)	Cumulative (2025)	Ratio (2026/2025)
New England	1	35	115	0.3
Middle Atlantic	16	115	408	0.3
East North Central	19	233	1,205	0.2
West North Central	5	38	844	0.0
South Atlantic	15	224	628	0.4
East South Central	6	156	441	0.4
West South Central	19	197	648	0.3
Mountain	23	248	893	0.3
Pacific	4	324	1,324	0.2
United States Territories	0	11	18	0.6
<b>Total</b>	<b>108</b>	<b>1,581</b>	<b>6,524</b>	<b>0.2</b>

Table Notes: Data as of February 21, 2026; Case counts are provisional and subject to change; New York State is included in the Middle Atlantic region.

During 2024-2025, reported pertussis cases increased across the country and remained elevated compared to before the COVID-19 pandemic; however, cases have been trending downward since peaking in November 2024. [During those years](#), there were 28,955 pertussis cases reported among United States residents and residents of United States Territories during 2025, and 43,401 cases reported during 2024. According to provisional data from the [United States CDC](#), there were 10 pertussis deaths reported in the United States during 2024, of which 6 were reported among infants aged <1 year. According to data from the [Pan American Health Organization \(PAHO\)](#), there were 13 deaths reported in the United States during 2025, of which 9 were reported among infants aged <1 year. [Vaccination](#) is the best way to protect against pertussis. The [PAHO has reiterated](#) the importance of increasing vaccination coverage and strengthening surveillance systems considering the resurgence of pertussis in the Americas and the emergence of antibiotic-resistant strains.

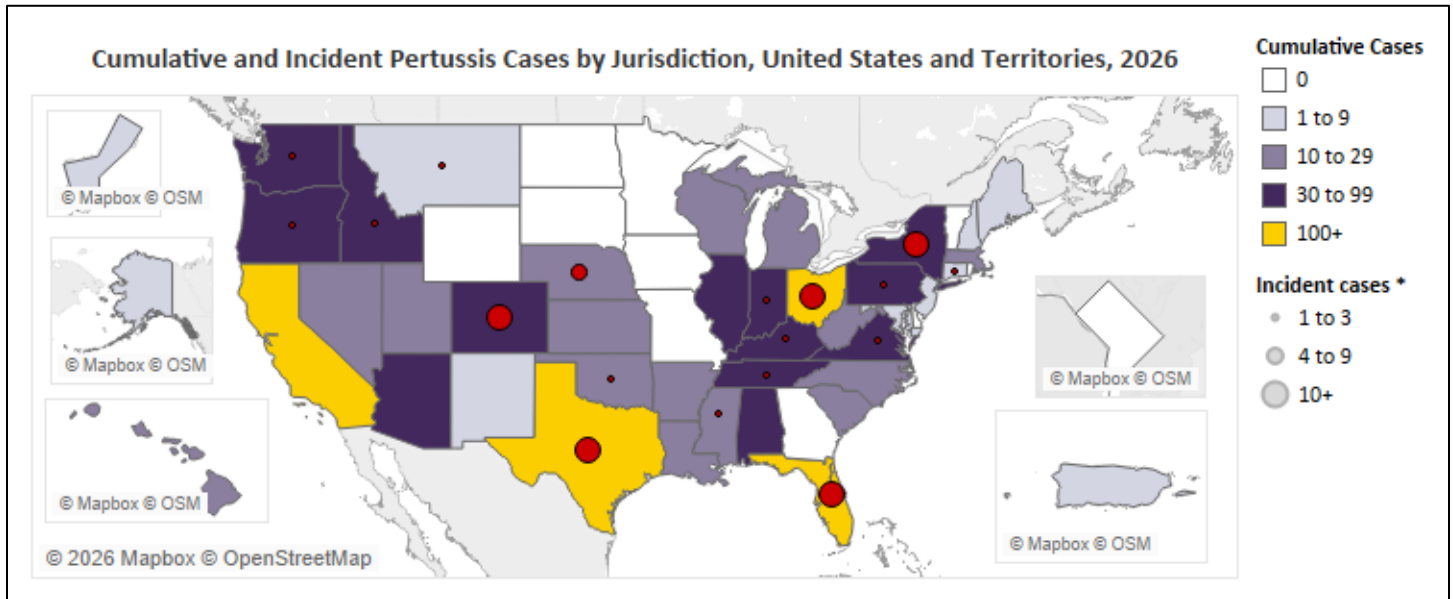


Figure Notes: Data as of February 21, 2026; New York State and New York City are combined in figure; The United States Virgin Islands, American Samoa, and the Commonwealth of Northern Mariana Islands did not report any cases during 2025-2026 and are not included in figure; \*Incident cases reported symptom onset during the most recent epidemiological week.

Data Sources: [CDC \(2/25/26\)](#), [CDC \(12/2/25\)](#)

## Polio

### Global – Incident AFP Cases (cVDPV2 & cVDPV3) Reported in Multiple Countries:

According to data from the [Global Polio Eradication Initiative \(GPEI\)](#), as of February 23, there has been 7 acute flaccid paralysis (AFP) cases caused by circulating vaccine-derived poliovirus type 2 (cVDPV2) and 1 AFP case caused by circulating vaccine-derived poliovirus type 3 (cVDPV3) with onset of paralysis during 2026 reported this year. Since the previous update, 6 incident cVDPV2 cases were reported in Nigeria (3), the Democratic Republic of the Congo (DRC) (2), and Togo (1), and 1 incident cVDPV3 case was reported in Nigeria (1).

Acute Flaccid Paralysis (AFP) Cases by Causal Agent, Global, 2026							
WPV1		cVDPV1		cVDPV2		cVDPV3	
Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†
0	+0	0	+0	7	+6	1	+1

Table Notes: Data as of February 23, 2026, and only includes AFP cases with onset of paralysis during 2026; †Change in cumulative total compared to previous update.

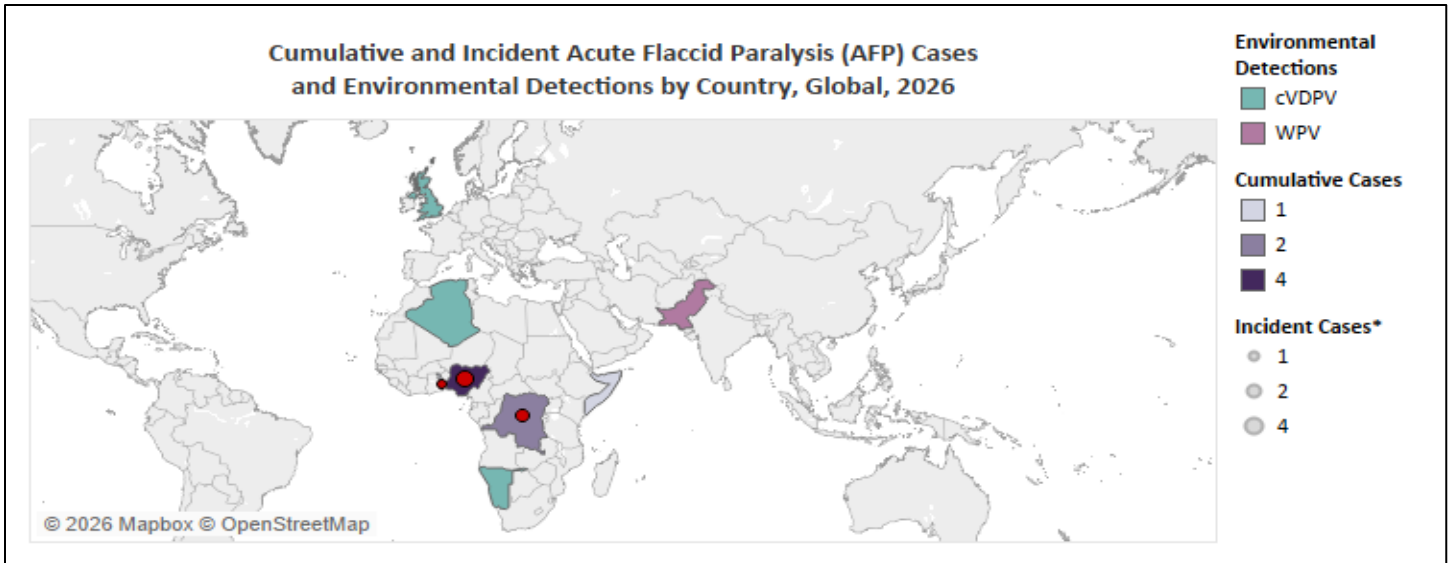


Figure Notes: Data as of February 23, 2026, and only includes cases with onset of paralysis or environmental detection samples collected during 2026.

Among countries without any reported AFP cases, environmental detections from samples collected during 2026 have been reported by Pakistan (24 – WPV1), Algeria (2 – cVDPV2), Namibia (2 – cVDPV2), and the United Kingdom (1 – cVDPV2), suggesting undetected transmission was occurring at some point in these countries.

The United States CDC currently has a [Level 2 – Practice Enhanced Precautions Travel Health Notice](#) posted regarding polio globally. A total of 47 AFP cases caused by WPV1, 3 AFP cases caused by cVDPV1, 216 AFP cases caused by cVDPV2, and 12 AFP cases caused by cVDPV3, were reported with onset of paralysis during 2025.

**Data Sources:** [GPEI - WPV \(2/23/26\)](#), [GPEI - cVDPV \(2/23/26\)](#)

## Seasonal Influenza

### United States – Updated Data on 2025-2026 Season; Rise in Influenza B Continues:

According to data from the [United States CDC](#), as of February 14, 2026, there have been an estimated total of 24 million infections, 310,000 hospitalizations, and 20,000 deaths from flu during the 2025-2026 season so far. There have been a total of 71 pediatric deaths reported, of which 5 were reported during the most recent week – approximately 90% of pediatric deaths among children eligible for influenza vaccination have occurred among those not fully vaccinated. Influenza-like illness activity remains elevated nationally and remained stable during the most recent week overall, with some regional variation. Influenza A activity continued to decrease while influenza B activity continued to increase. The severity of the 2025-2026 season is currently classified as a [moderate](#) overall, but high among the pediatric age group (0-17 years) when examining by age.

Influenza Surveillance Metrics, United States, 2025-2026 Season				
Estimated			Pediatric Deaths	
Infections	Hospitalizations	Deaths	Cumulative	Incident†
24 Million	310,000	20,000	71	+5

Table Notes: Data as of February 14, 2026; †Change in cumulative total compared to previous update.

According to data from the Outpatient Influenza-like Illness Surveillance Network (ILINET), current influenza activity is categorized as minimal or low in 20 jurisdictions, moderate in 9 jurisdictions, and high or very high in 26 jurisdictions.

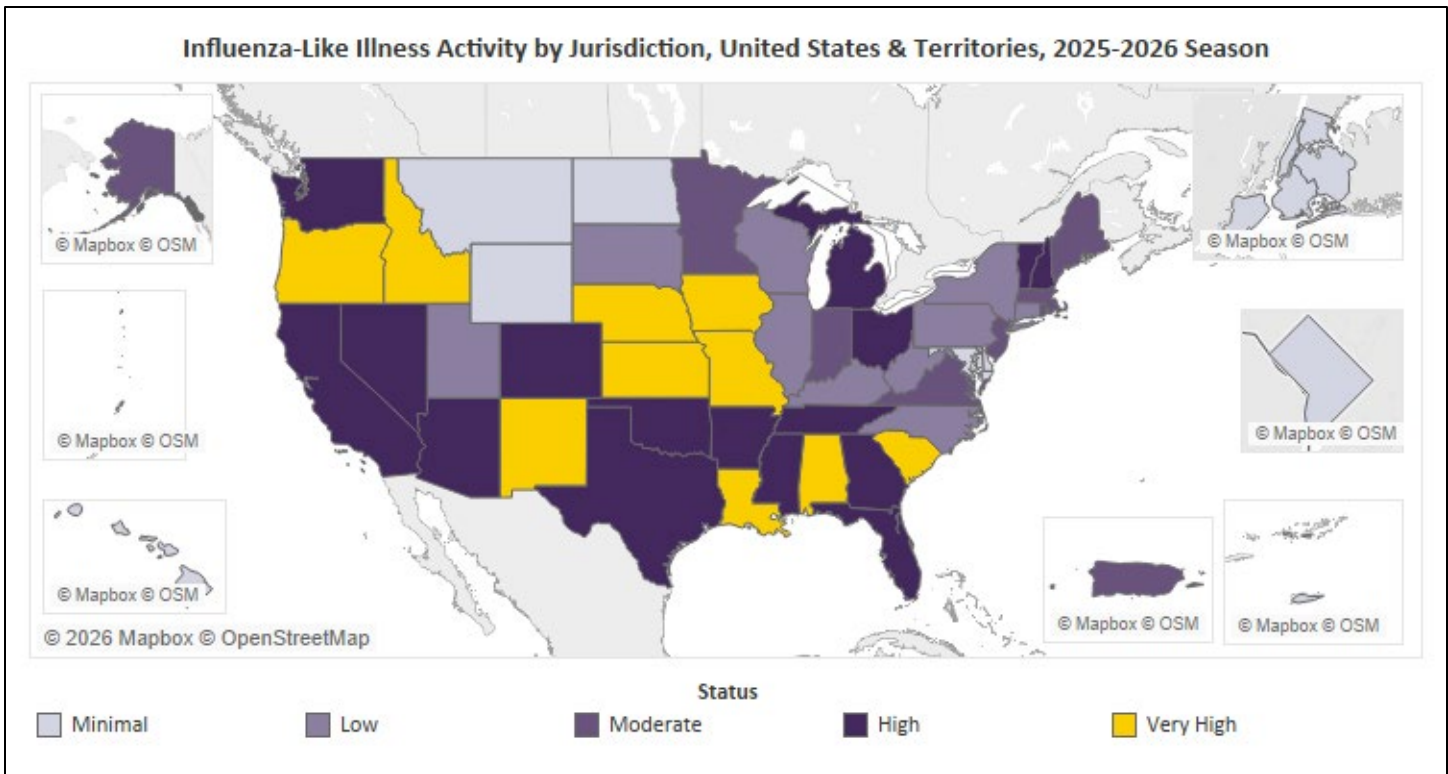


Figure Notes: Data as of February 14, 2026, and depicts influenza-like illness activity during the most recent epidemiological week.

The New York State Department of Health maintains the [NYS Flu Tracker](#) and publishes a weekly [Respiratory Surveillance Report](#) with influenza surveillance data specific for New York. During the week ending February 14, 2026, cases increased by 21% and hospitalizations declined by 8%, compared to the prior week.

According to data from Influenza Hospitalization Surveillance Network (FluSurv-NET) member states (14), as of February 20, 2026, the cumulative hospitalization rate among laboratory-confirmed influenza cases for the 2025-2026 season is 70.2 per 100,000 population – the third highest cumulative hospitalization rate observed at this time since the 2010-2011 season. Cumulative rates are currently highest among those aged ≥65 years (231.4), children aged ≤4 years (71.6), especially those aged <1 year (115.9), and non-Hispanic Black persons (age-adjusted 123.8). The hospitalization rate during the most recent week was 2.0 per 100,000 population, a decrease compared to the prior week.

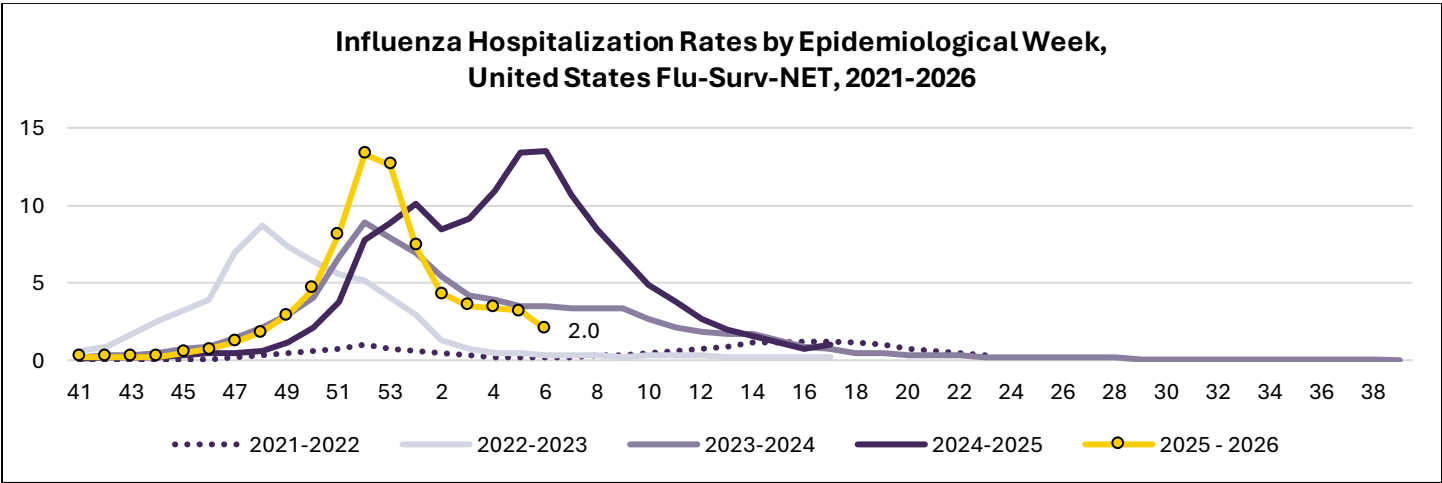


Figure Notes: Data as of February 14, 2026; Week 53 rates for seasons 2021-2022, 2022-2023, 2023-2024, and 2024-2025 calculated as the average of Weeks 52 and 1 of each respective season.

According to data from the National Center for Health Statistics (NCHS), the percentage of all deaths that occurred due to influenza during the most recent week was 0.88%, a decrease compared to the prior week.

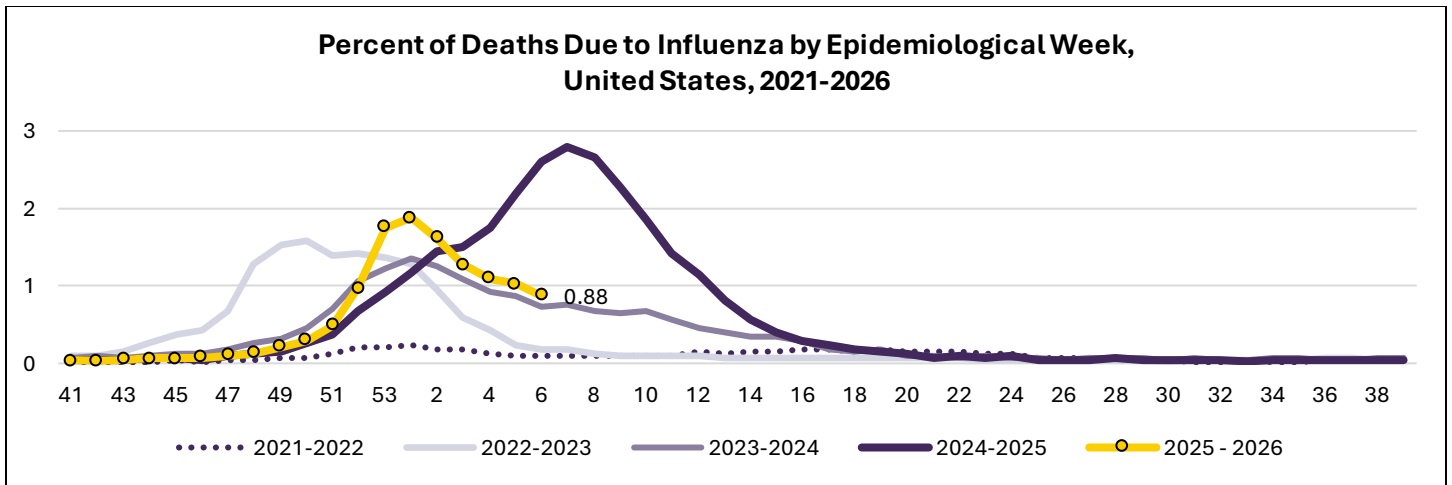


Figure Notes: Data as of February 14, 2026; Week 53 rates for seasons 2021-2022, 2022-2023, 2023-2024, and 2024-2025 calculated as the average of Weeks 52 and 1 of each respective season.

Among influenza positive samples collected during this season, 87.7% have been influenza A and 12.3% have been influenza B – there has been a recent rise in the proportion of influenza B detected, with 45.4% of influenza positive samples taken during the most recent week being influenza B. Influenza A(H3N2) has been detected most frequently among subtyped influenza A positive samples this season (88.4%), including 83.4% of samples taken during the most recent week. Among influenza A(H3N2) positive samples that have been genetically characterized, 92.1% have been subclade K.

According to preliminary data from the [United States CDC](#), the 2024-2025 flu season was classified as a high severity season overall with an estimated 47-82 million cases, 610,000-1.3 million hospitalizations, and 27,000-130,000 deaths from October 1, 2024 to May 17, 2025. Additionally, the 2024-2025 flu season saw the highest number of [pediatric deaths \(280\)](#) reported since they became nationally notifiable in 2004, with the exception of the 2009-2010 H1N1 pandemic (288). Among pediatric deaths reported during the 2024-2025 season, 89% were not fully vaccinated against influenza.

Data Source: [CDC \(2/20/26\)](#)

## Other Outbreaks, News, and Events

### Other Outbreaks (2026):

#### Chikungunya

- United States – Second Locally Acquired Case of 2025 Reported in Florida ([January 22](#))
- Sri Lanka – Updated Information on Trends During Largest Outbreak in 16 Years ([January 8](#))

#### Diphtheria

- Guinea – Initial Data for 2026; Active Level 2 Travel Health Notice Posted ([February 12](#))
- Nigeria – Initial 2026 Trends Lower Compared to Previous Years ([February 5](#))

#### Marburg

- Ethiopia – Outbreak Declared Over Following Rapid Containment ([January 29](#))

#### Measles

- Global – WHO Provides Initial 2026 Update on Cases and Incidence Rates ([February 19](#))
- Europe – Measles Transmission Re-Established in Several Countries ([February 5](#))

#### Mpox

- Africa – Updated Data on Confirmed Cases and Deaths Reported ([February 19](#))
- Global (Outside of Africa) – Second Case of Recombinant Ib/Iib Strain Detected ([February 19](#))

### Nipah

- Bangladesh – Fatal Confirmed Case Reported Among Female in Rajshahi Division ([February 12](#))
- India – Confirmed Cases Reported Among Nurses in West Bengal State ([February 5](#))

### Non-Seasonal Influenza

- Cambodia – First Human Case of 2026 Reported in Kampot Province (H5N1) ([February 19](#))
- China – Incident Human Cases Reported in Multiple Provinces (H9N2 & H10N3) ([February 12](#))

### Salmonella

- United States – New Multistate Outbreak Linked to Moringa Powder Capsules ([February 19](#))
- United States – Update on Multistate Outbreak Linked to Supplement Powders ([January 29](#))

### Yellow Fever

- The Americas – Incident Cases Continue to be Reported in Tolima, Colombia ([February 19](#))

## Other Active CDC Travel Health Notices:

- [Chikungunya in Sri Lanka - Level 2 - Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Diphtheria in Nigeria - Level 2 - Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Diphtheria in Guinea - Level 2 - Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Yellow Fever in Colombia - Level 2 - Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Global Dengue - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Oropouche in the Americas - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Rabies in India - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Rabies in Morocco - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Rocky Mountain Spotted Fever in Mexico - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Malaria in Ethiopia - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [A Strain of Multidrug-Resistant Salmonella Newport in Mexico - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Extensively Drug-Resistant Typhoid Fever in Pakistan - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [East African Sleeping Sickness in Zambia and Zimbabwe - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)

## Other Global Health News and Events:

- [Trump administration seeks to build alternative to WHO surveillance | CIDRAP](#)
- [Malaria cases in Mozambique surge 55% in early 2026 amid peak rainy season and floods - BEACON](#)
- [Measles outbreak in Kazakhstan with 3343 cases prompts emergency vaccination measures - BEACON](#)
- [Follow-up report: Australia pertussis cases return to inter-epidemic levels following record 2024 outbreak - BEACON](#)

- [Chikungunya virus can spread in cool weather, increasing health risk in Europe | UK Centre for Ecology & Hydrology](#)
- [Tuberculosis funding cuts could cost households up to \\$80 billion | CIDRAP](#)
- [Confirmed Lassa fever cases in Nigeria in 2026 increase to 318, with 70 deaths and a 22% case fatality rate - BEACON](#)
- [Chile reports 14 confirmed cases and six deaths from hantavirus so far in 2026, with the case fatality rate increasing to 43% - BEACON](#)
- [Request for information \(RFI\): Ghana Health Services reports 11 deaths from seasonal meningitis in Northern, Upper West, Savannah, and North East regions. RFI on causative pathogens, N. meningitidis serogroups, and S. pneumoniae serotype - BEACON](#)
- [Senior CDC official resigns abruptly | CIDRAP](#)
- [Moderna's 2-in-1 flu and COVID vaccine shows encouraging results in small trial | CIDRAP](#)
- [Crimean-Congo hemorrhagic fever reported in a seven-year-old boy in Tambacounda, southeastern Senegal - BEACON](#)
- [Guinea-Bissau officials stop CDC-funded hepatitis B vaccine trial | CIDRAP](#)
- [Quick takes: Bhattacharya addresses CDC, end of aid to 7 Africa nations, ACOG pulls out of ACIP | CIDRAP](#)
- [Nearly \\$900 million in HHS preparedness funds lack coordinated oversight, report says | CIDRAP](#)
- [Fatal hantavirus case in Río Negro Province, Argentina, likely linked to hiking near the Dora and Santa Ana waterfalls in Neuquén Province - BEACON](#)
- [15 states sue Trump administration over childhood vaccines | CIDRAP](#)
- [Nigeria Centre for Disease Control and Prevention | An update of Lassa fever outbreak in Nigeria](#)