



**Date: 3/5/26**

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 March 4, there have been a total of 23,643 chikungunya cases, of which 8,422 are confirmed, and 6 deaths reported in the Americas during 2026. Since the previous update, 5,163 incident chikungunya cases, of which 1,120 are confirmed, and 3 deaths were reported.

Chikungunya Cases and Deaths by Select Countries, the Americas, 2026							
Country	Cases		Confirmed Cases		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR
Bolivia	8,258	+2,740	4,060	+84	4	+3	0.1%
Brazil	10,411	+0	2,866	+0	0	+0	0.0%
Cuba	1,457	+0	114	+0	2	+0	1.8%
Suriname	2,579	+2,255	1,354	+1,030	0	+0	0.0%
Rest of the Americas	938	+770	48	+6	0	+0	0.0%
<b>Total</b>	<b>23,643</b>	<b>+5,163</b>	<b>8,422</b>	<b>+1,120</b>	<b>6</b>	<b>+3</b>	<b>0.1%</b>

Table Notes: Data extracted on March 4, 2026, and includes locally acquired cases only; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR) calculated among confirmed cases.

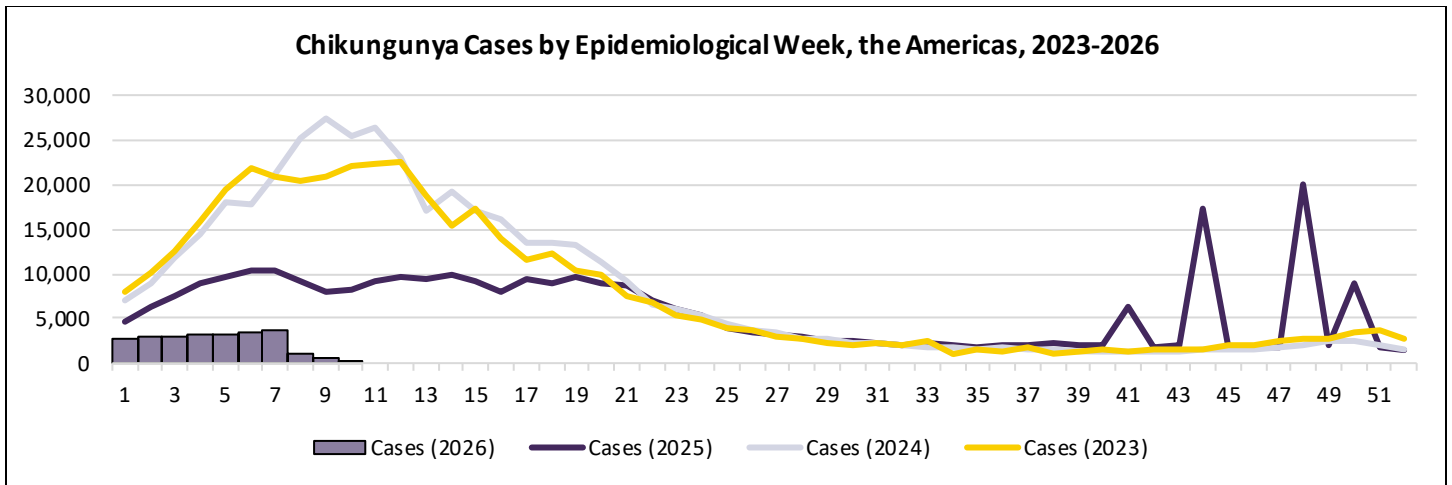


Figure Notes: Data extracted on March 4, 2026, and includes locally acquired cases only; Most recent weeks' trends should be interpreted with caution due to delays in reporting.

Cases have been reported by 15 countries during 2026, primarily Brazil (10,411), Bolivia (8,258), Cuba (1,457), and Argentina (883). Cumulative incidence per 1,000,000 population is currently highest in Suriname (399.84), Bolivia (64.77), Cuba (13.38), Brazil (4.87), [French Guiana](#) (3.77), and Argentina (1.92). According to a [PAHO Epidemiological Alert](#) from February, 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.

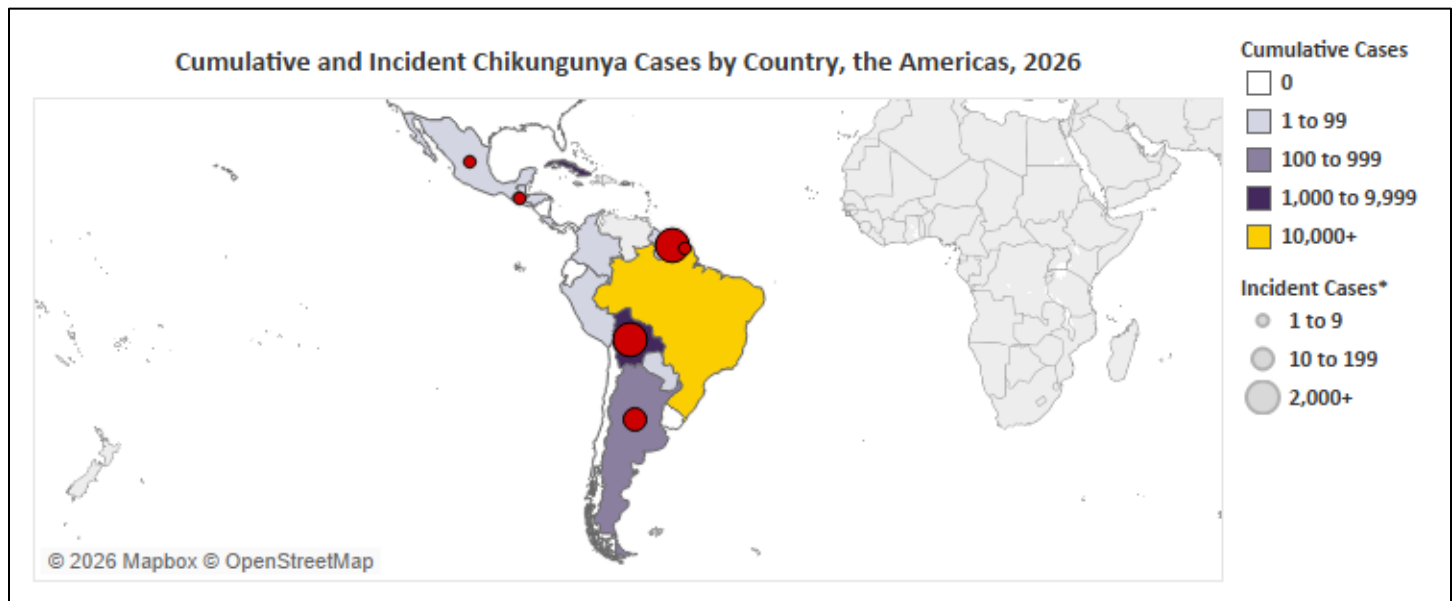


Figure Notes: Data extracted on March 4, 2026, and includes locally acquired cases only; \*Change in cumulative total compared to previous update; Case reported in the United States (1) according to PAHO data not shown due to symptom onset being during 2025.

During 2025, there were 315,079 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 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 \(3/4/26\)](#)

# Measles

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

According to data from the [Public Health Agency of Canada \(PHAC\)](#) as of February 21, 2026, there have been a total of 5,460 probable and confirmed measles cases reported in Canada during 2025, and 339 probable and confirmed measles cases reported during 2026. Since the previous update, 85 incident cases were reported, primarily in Manitoba (70).

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	+0	5,078	+0	401	+0	2	+0	0.0%
2026	25	+10	314	+75	17	+5	0	+0	0.0%

Table Notes: Data as of February 21, 2026; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR) calculated among probable and confirmed cases.

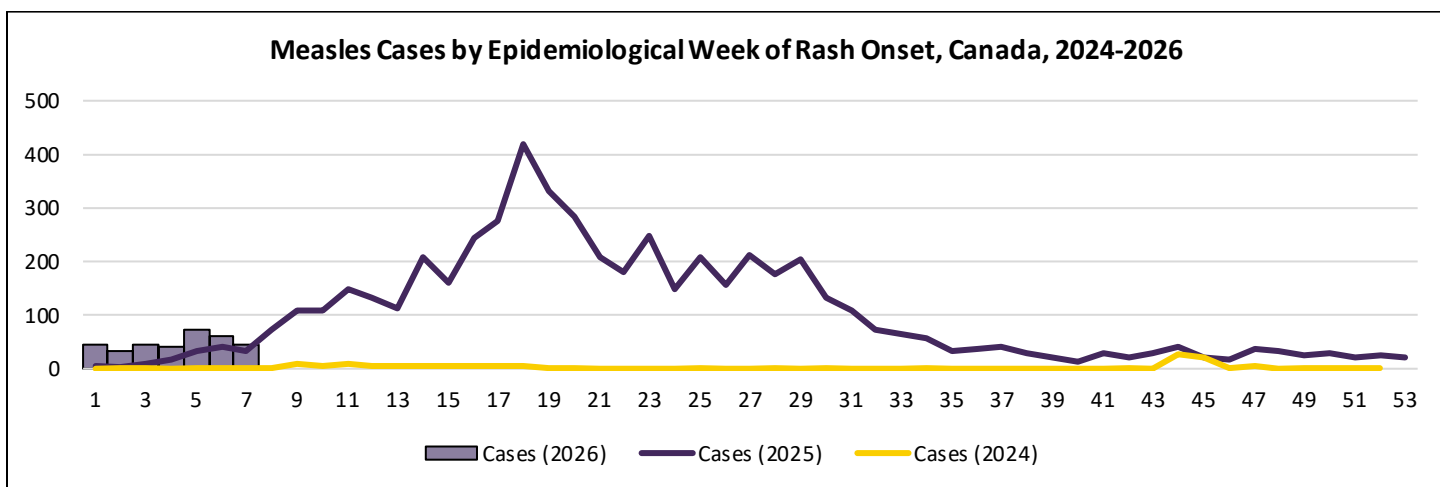


Figure Notes: Data as of February 21, 2026, and includes probable and confirmed cases.

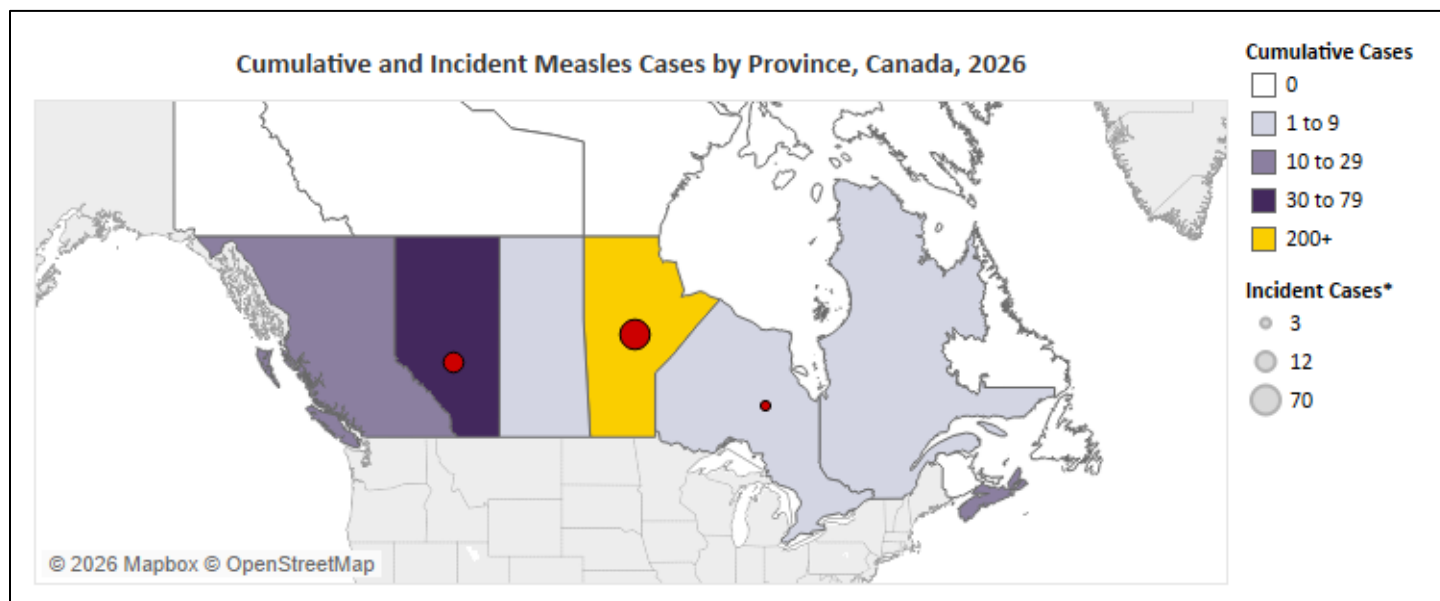


Figure Notes: Data as of February 21, 2026, and includes probable and confirmed cases; \*Change in cumulative total compared to previous update.

During 2026, cases have been reported by 7 jurisdictions: [Manitoba](#) (228), [Alberta](#) (72), [British Columbia](#) (17), Nova Scotia (10), [Quebec](#) (3), [Saskatchewan](#) (5), and Ontario (4). Those aged 18-54 years have been most affected (42%), followed by those aged 5-17 years (36%), and those aged 1-4 years (12%). Among all cases, 90% were unvaccinated or had unknown vaccination statuses, 5% have been hospitalized, and 96% were exposed in Canada (epidemiologically and/or virologically linked). Cases exposed outside of Canada have reported travel to Mexico, Pakistan, Spain, and Togo.

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 5,708 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.

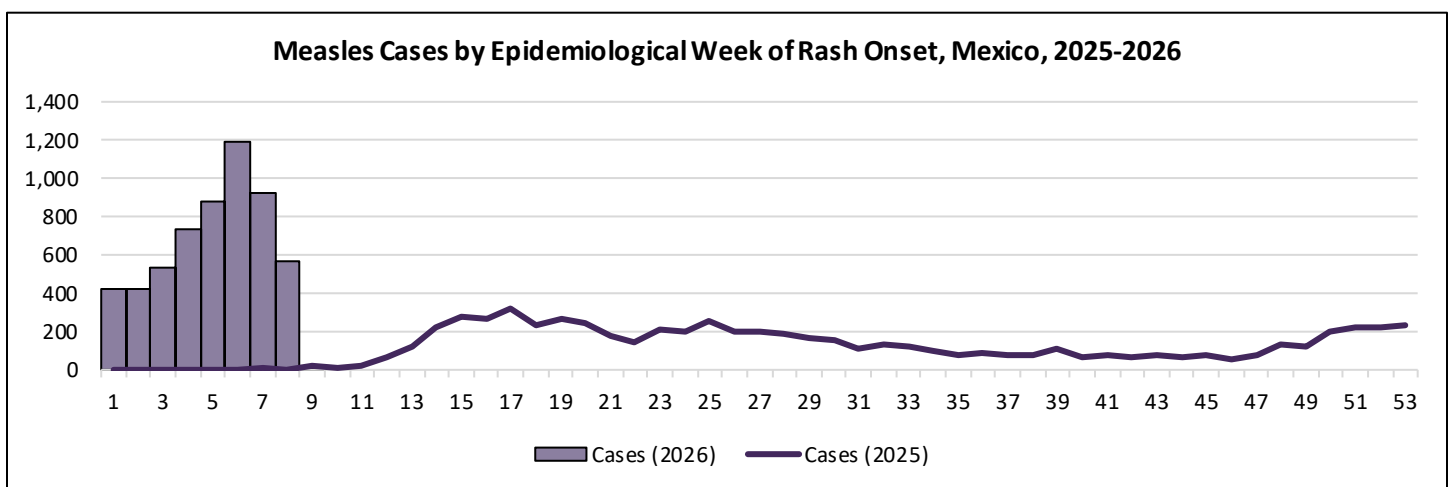
**Data Sources:** [PHAC - 2026 \(3/2/26\)](#), [PHAC - 2025 \(3/2/26\)](#)

## Mexico – Over 950 Confirmed Incident Cases Reported, Most in Jalisco:

According to data from the [Secretary of Health of Mexico](#) as of March 4, 2026, there have been a total of 6,452 confirmed measles cases and 27 deaths reported in Mexico during 2025, and 5,785 confirmed cases and 6 deaths reported during 2026. Since the previous update, 971 confirmed incident cases and 1 death were reported, primarily in Jalisco (546), Chiapas (98), and Mexico City (77).

Measles Cases, Hospitalizations, and Deaths, Mexico, 2025-2026							
Year	Probable Cases		Confirmed Cases		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR
2025	15,729	-1	6,452	+0	27	+0	0.4%
2026	15,999	+2,064	5,785	+971	6	+1	0.1%

*Table Notes: Data as of March 4, 2026; †Change in cumulative total compared to prior update; \*Case fatality rate (CFR) calculated among confirmed cases.*



*Figure Notes: Data as of March 4, 2026, and includes confirmed cases only (4 missing from figure).*

During 2026, confirmed cases have been reported by 30 states, primarily Jalisco (3,402), Chiapas (521), and Mexico City (401). 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 (61.85), followed by those aged 1-4 years (19.35), those aged 5-9 years (13.64), and those aged 25-29 years (13.08).

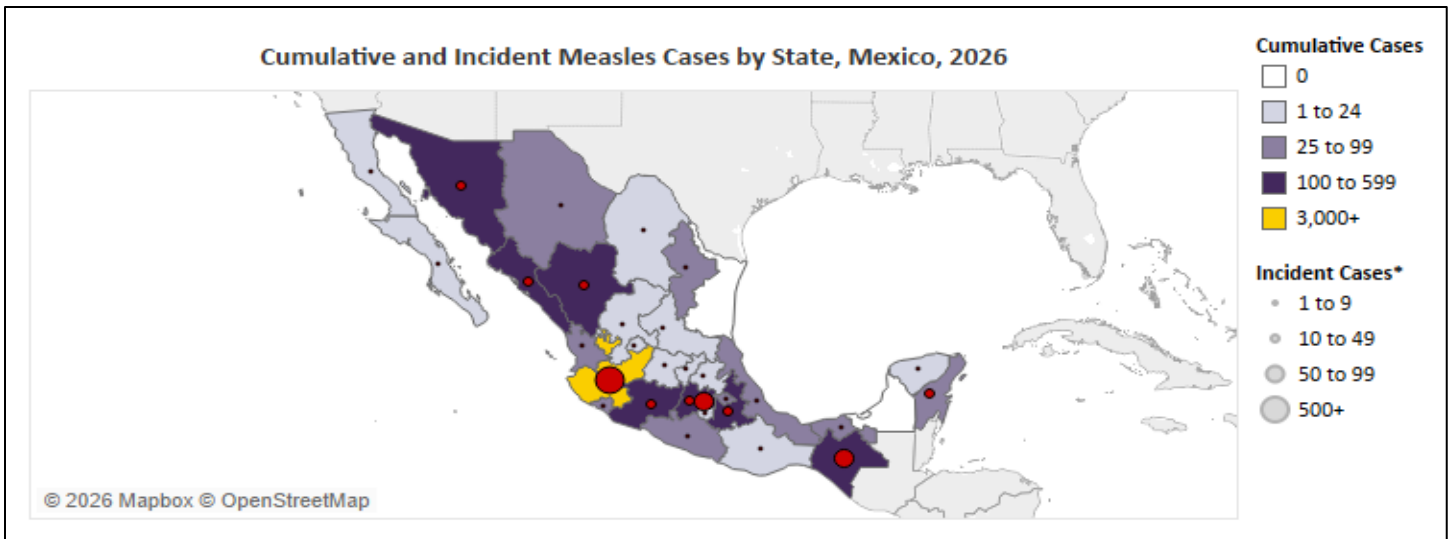


Figure Notes: Data as of March 4, 2026, and includes confirmed cases only; \*Change in cumulative total compared to previous update.

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 \(PAHO\)](#) had initially invited Mexico to meet virtually in April to review their measles elimination status. However, this meeting has since been [postponed](#) and will take place in November 2026 during the annual meeting of the Regional Verification Commission for the Elimination of Measles, Rubella, and Congenital Rubella Syndrome (RVC).

Data Source: [Secretary of Health \(3/5/26\)](#)

## United States – Incident Cases Reported in 16 States, Most in Florida and Utah:

According to data from the [United States CDC](#) as of February 26, 2026, there have been a total of 2,281 confirmed measles cases and 3 deaths reported in the United States during 2025, and 1,136 confirmed cases reported during 2026. Since the previous update, 154 confirmed incident cases were reported primarily in Florida (43), Utah (32), and South Carolina (21).

Measles Cases, Hospitalizations, and Deaths, United States, 2025-2026							
Year	Confirmed Cases		Hospitalizations		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
2025	2,281	+0	246	-4	3	+0	0.1%
2026	1,136	+154	58	+20	0	+0	0.0%

Table Notes: Data as of February 26, 2026, and includes cases reported among international visitors to the United States; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR).

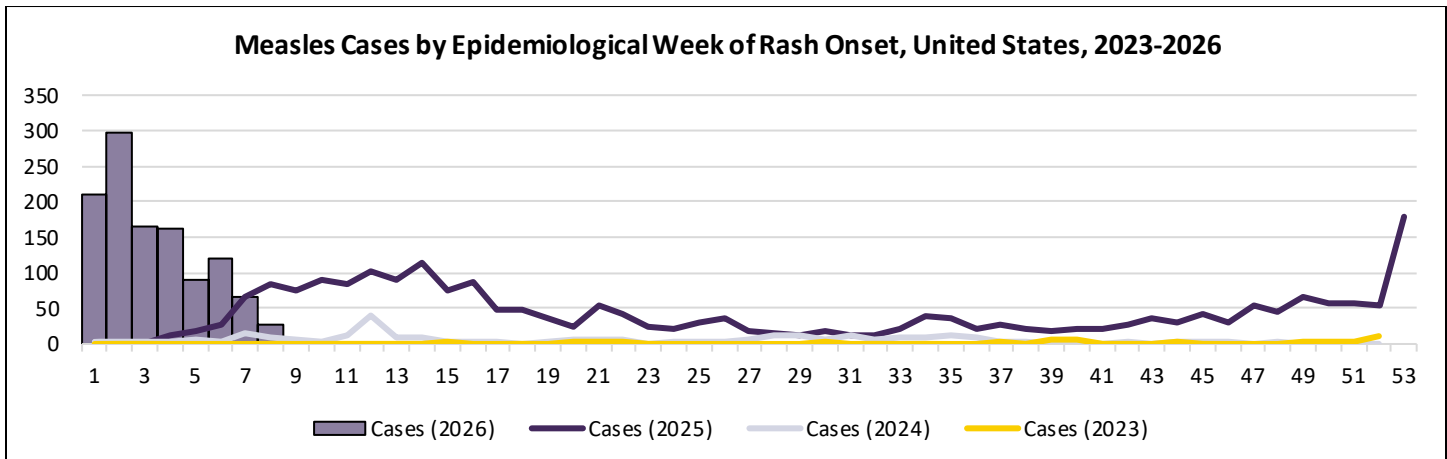


Figure Notes: Data as of February 26, 2026, and includes cases reported among international visitors to the United States.

During 2026, confirmed cases have been reported by 28 jurisdictions, primarily South Carolina (653), Utah (149), and Florida (107). There have been 10 outbreaks reported during 2026 – 90% of confirmed cases reported during 2026 are outbreak associated (152 from outbreaks that began during 2026 and 871 from outbreaks that began during 2025). Currently, there are ongoing outbreaks in [Arizona](#), [Utah](#), [South Carolina](#), [Florida](#), [Washington](#), and [California](#). Those aged 5-19 years have been most affected (57%), followed by those aged <5 years (24%), and those aged 20+ years (17%). Among all confirmed cases 92% have been unvaccinated or have unknown vaccination statuses and 5% have been hospitalized. In New York, there has been 1 confirmed case reported in [New York City](#) and 3 confirmed cases reported in [Rest of State](#).

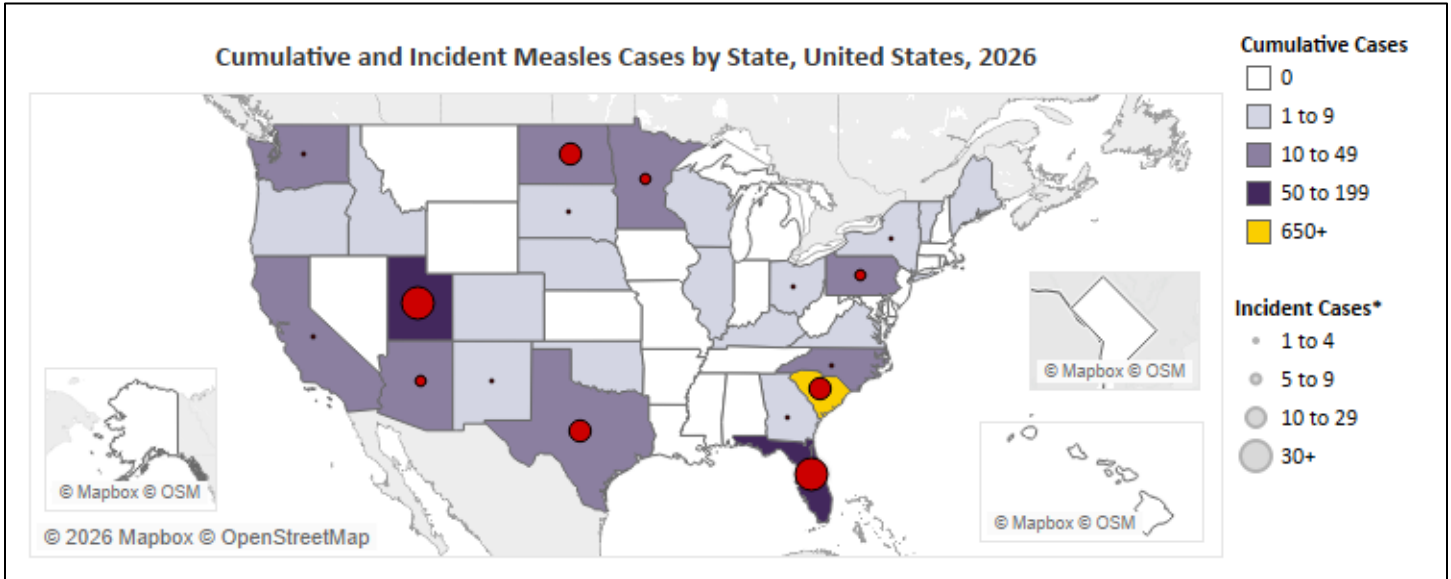


Figure Notes: Data as of February 26, 2026, and does not include cases reported among international visitors to the United States; \*Change in cumulative total compared to previous update.

During 2025, confirmed cases totals were the highest observed since 1991 (9,643), with cases reported by 45 jurisdictions. There were 50 outbreaks reported – 90% 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 \(PAHO\)](#) had initially invited the United States to meet virtually in April to review their measles elimination status, a milestone achieved in 2000. However, this meeting has since been [postponed](#) and will take place in November 2026 during the annual meeting of the Regional Verification Commission for the Elimination of Measles, Rubella, and Congenital Rubella Syndrome (RVC).

**Data Source:** [CDC \(2/27/26\)](#)

## Mpox

### Africa – Updated Data on Confirmed Cases and Deaths Reported:

According to data from the [World Health Organization \(WHO\)](#) as of February 22, 2026, there have been a total of 63,843 confirmed mpox cases and 255 deaths reported in Africa since the beginning of 2024. Since the previous update, 172 confirmed incident cases and 2 deaths were reported. Confirmed incident cases were primarily reported in [Madagascar](#) (55), Kenya (32), the Democratic Republic of the Congo (DRC) (31), Uganda (16), and Tanzania (12).

**Mpox Cases and Deaths by Select Countries, Africa, 2024-2026**

Geography	Clades Detected	Confirmed Cases		Deaths		
		Cumulative	Incident†	Cumulative	Incident†	CFR
Burundi	Ib	4,640	+9	1	+0	0.0%
DRC	Ia, Ib, IIa, and IIb	36,526	+31	75	+0	0.2%
Ghana	IIa and IIb	1,004	+5	7	+0	0.7%
Guinea	IIa and IIb	2,153	+0	6	+0	0.3%
Kenya	Ib	1,034	+32	15	+0	1.5%
Liberia	IIa and IIb	1,627	+5	8	+0	0.5%
Madagascar	Ib	387	+55	0	+0	0.0%
Sierra Leone	IIa and IIb	5,442	+0	60	+0	1.1%
Uganda	Ib	8,498	+16	52	+1	0.6%
Rest of Africa	Ia, Ib, IIa, and IIb	2,532	+19	31	+1	1.2%
<b>Total</b>	<b>Ia, Ib, IIa, and IIb</b>	<b>63,843</b>	<b>+172</b>	<b>255</b>	<b>+2</b>	<b>0.4%</b>

Table Notes: Data as of February 22, 2026, and includes confirmed cases only. †Change in cumulative total compared to previous update.

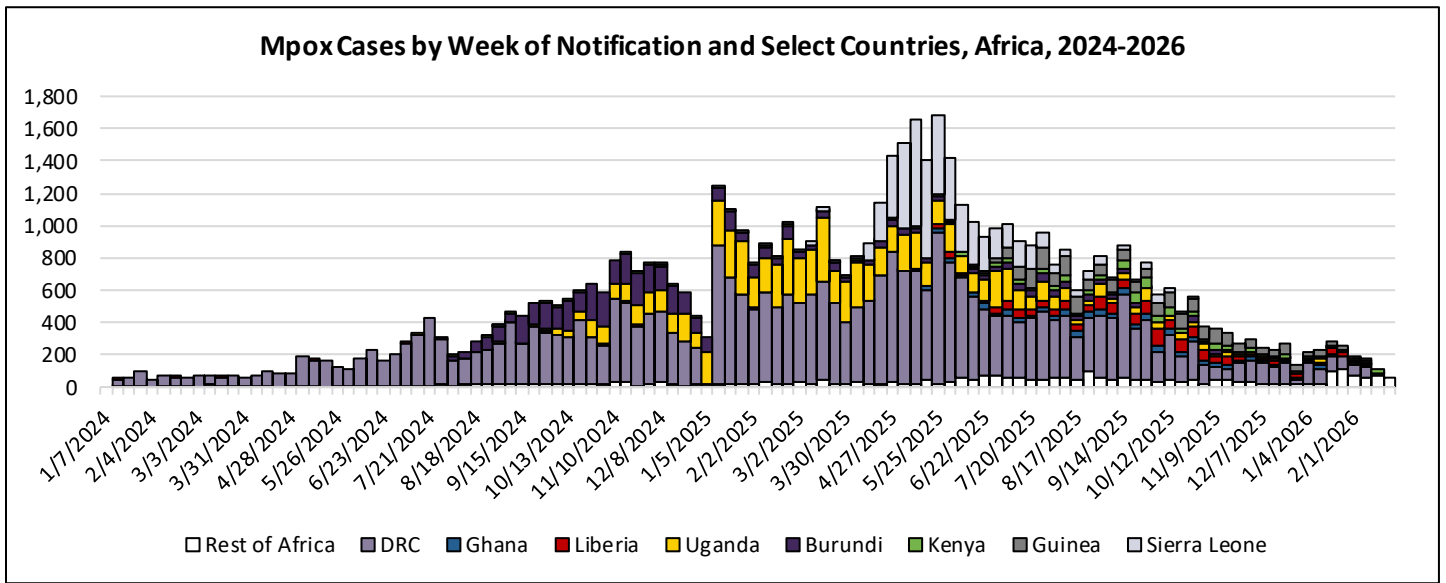


Figure Notes: Data as of February 22, 2026, and includes confirmed cases only; \*4,112 confirmed cases reported in the DRC are excluded.

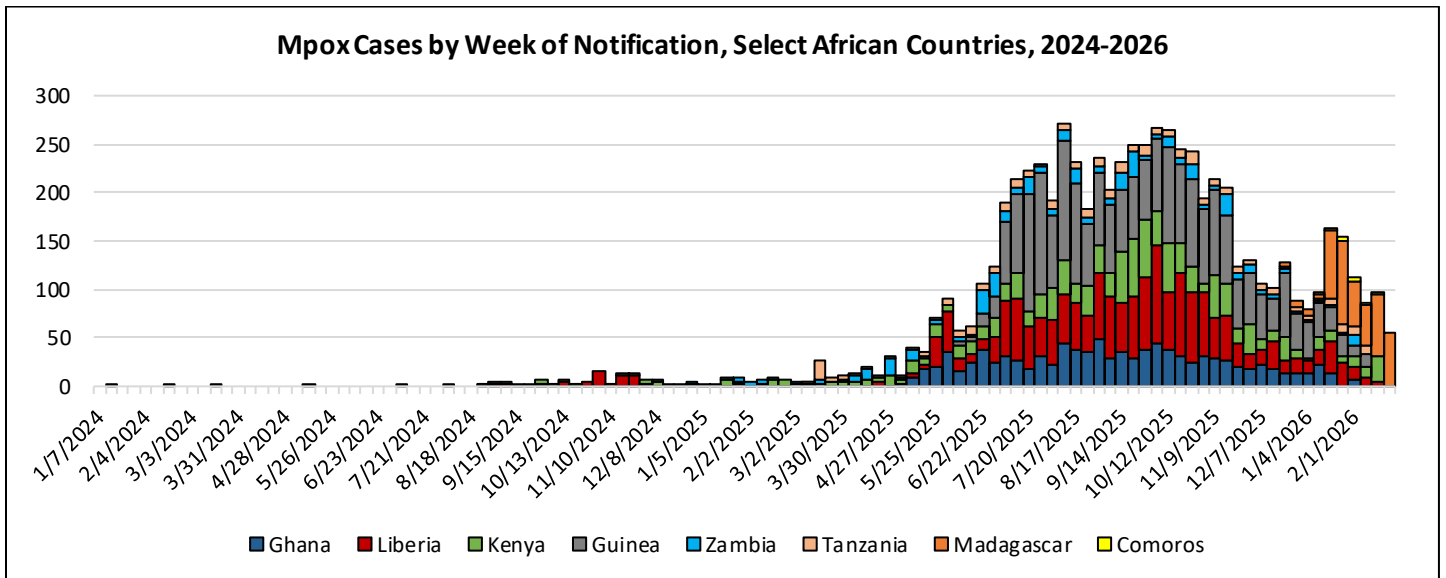


Figure Notes: Data as of February 22, 2026, and includes confirmed cases only.

Confirmed cases have been reported by 34 African countries since the beginning of 2024, primarily the Democratic Republic of the Congo (DRC), Uganda, Sierra Leone, Burundi, Guinea, and Liberia. Despite the situation in Africa no longer being considered a [Public Health Emergency of Continental Security \(PHECS\)](#) and a steep decline in the number confirmed incident cases reported recently, activity is still prominent in the DRC, Burundi, Ghana, Liberia, Kenya, Guinea, Zambia, Tanzania, [Madagascar](#), and recently in Comoros.

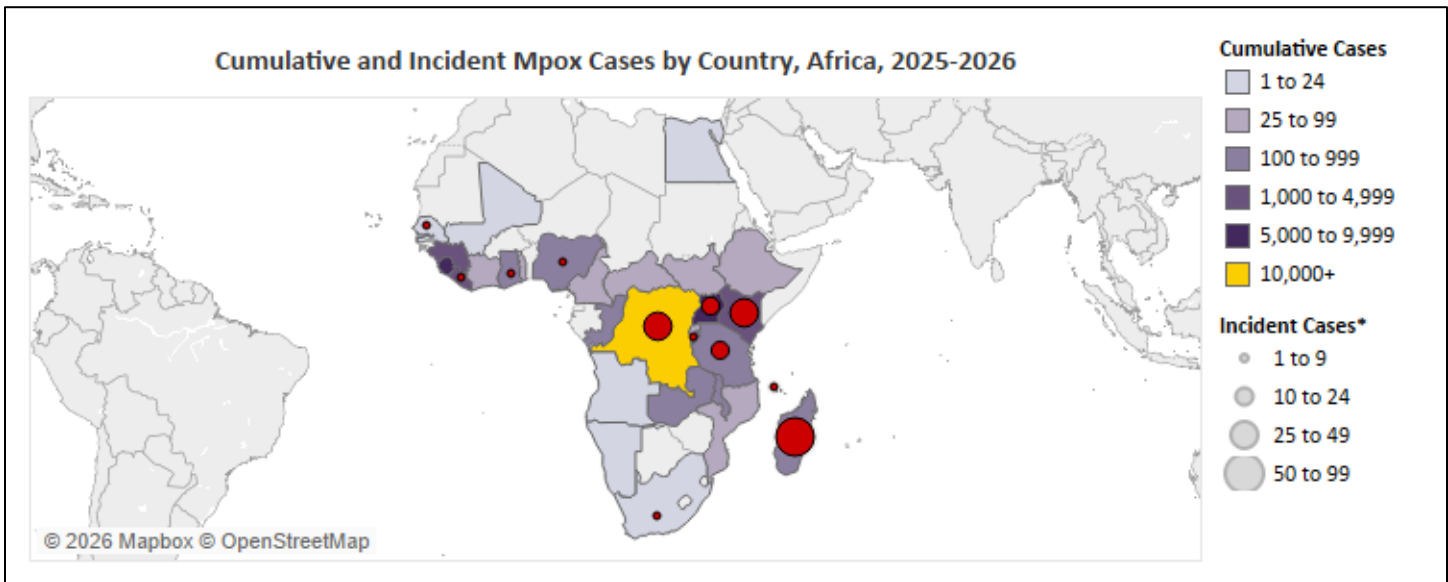


Figure Notes: Data as of February 22, 2026, and includes confirmed cases only; \*Change in cumulative total compared to previous update.

The United States CDC currently has a [Level 2 – Practice Enhanced Precautions Travel Health Notice](#) posted regarding clade II mpox in Ghana and Liberia. Confirmed case totals in Africa since the beginning of 2025 (45,898) have more than doubled totals for 2024 (17,945), with additional countries affected.

Data Source: [WHO \(2/27/26\)](#)

## Global (Outside of Africa) – Incident Travel Associated Clade Ib Cases Reported:

According to data from the [World Health Organization \(WHO\)](#) as of February 22, 2026, there have been a total of 122 travel associated and 41 secondary clade mpox cases reported outside of Africa since the beginning of 2024. Since the previous update, 2 incident travel associated clade Ib mpox cases were reported in Austria (1) and Réunion (1). Additionally, 2 incident secondary clade Ib cases linked to the travel associated case in Réunion were reported.

Travel Associated Clade I Mpox Cases, Global (Outside of Africa), 2024-2026			
Travel Associated Clade I Cases		Linked Secondary Clade I Cases	
Cumulative	Incident†	Cumulative	Incident†
122	+2	41	+2

Table Notes: Data as of February 22, 2026; †Change in cumulative total compared to previous update.

The incident travel associated cases reported in Austria and Réunion had recently traveled to Italy and Madagascar, respectively. Madagascar is currently experiencing ongoing community transmission of clade Ib mpox.

Subclade of travel associated cases reported since the beginning of 2024 is distributed as follows: 116 clade Ib, 4 clade Ia, and [2 recombinant clade Ib/IIb](#). Recombinant clade Ib/IIb mpox has only been reported in the United Kingdom and India among individuals with travel history to South-East Asia and the Arabian Peninsula, respectively, and neither patient experienced severe outcomes. Given the time between illness onset of both cases (several weeks) there may be additional recombinant clade Ib/IIb cases that have not yet been detected/reported. Travel associated cases (not including secondary cases) have been reported by 30 countries outside of Africa, primarily the United Kingdom (19), China (11), Germany (11), India (11), and Thailand (10). Secondary cases have been reported by 9 countries outside of Africa, primarily China (20).

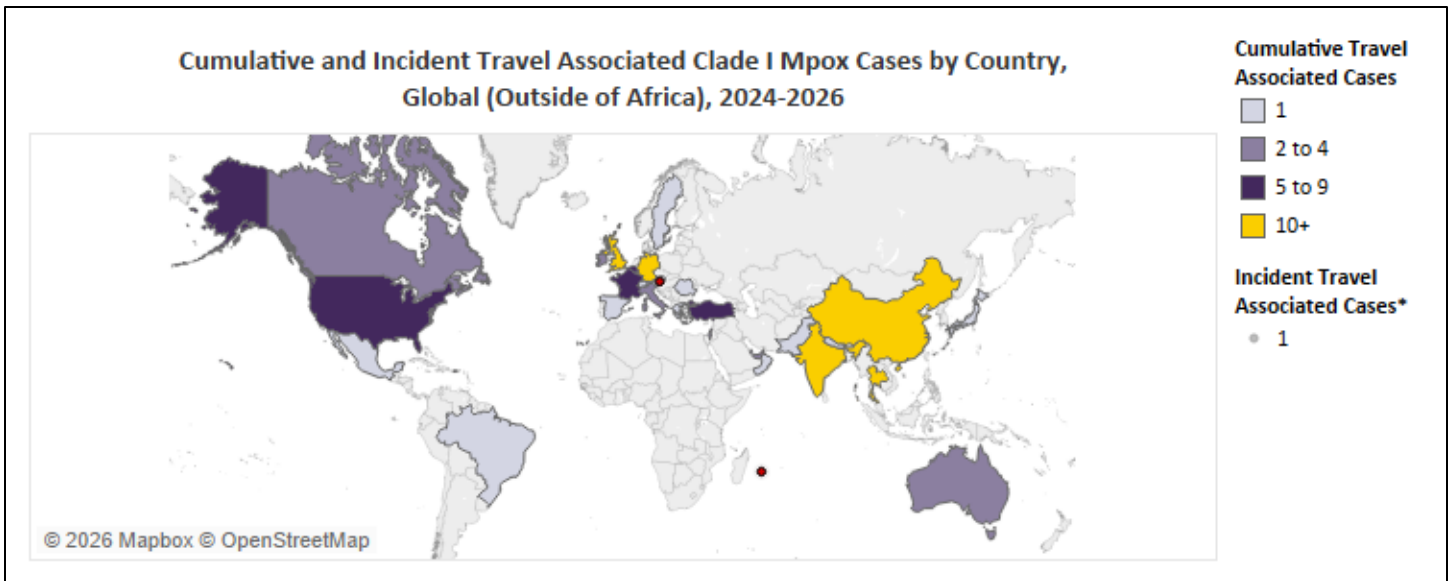


Figure Notes: Data as of February 22, 2026, and does not include linked secondary cases or clade I cases not determined to be travel associated; \*Change in cumulative total compared to previous update.

Since September 2025, [broader transmission of clade 1b mpox](#) has been observed globally in previously unaffected countries and countries previously reporting travel associated cases only, particularly among men who have sex with men (MSM). According to data from the [European Center for Disease Prevention and Control \(ECDC\)](#) as of mid-February, the number of clade I cases reported monthly in European Union (EU) and European Economic Area (EEA) countries has been steadily increasing. While community transmission of clade I mpox has not been confirmed in the UAE, many travel associated cases reported in other countries have been among individuals returning from the UAE, indicating likely community transmission.

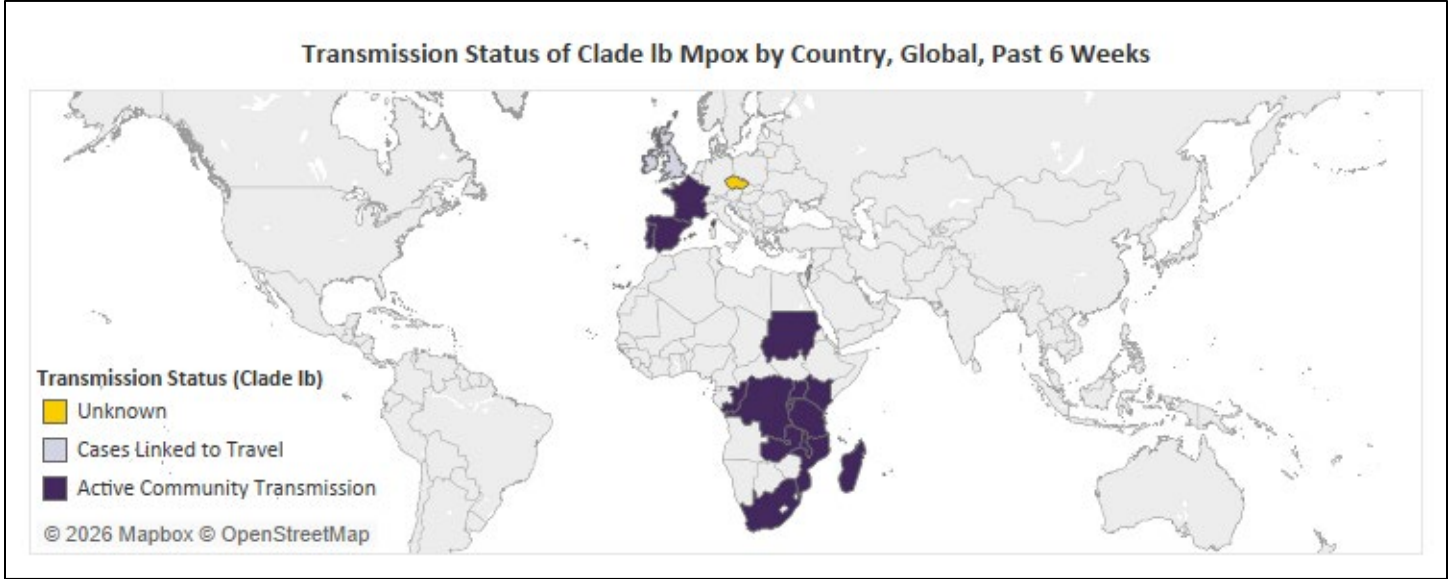


Figure Notes: Data as of February 22, 2026, and only includes countries with clade 1b cases reported in the past 6 weeks.

Data Source: [WHO \(2/27/26\)](#)

# New World Screwworm

## Mexico – Increasing Number of Active Animal Cases in State Bordering the US:

According to data from the [Secretary of Agriculture of Mexico](#) as of March 4, 2026, there have been a total of 16,806 New World screwworm (NWS) cases reported among animals in Mexico since November 2024, of which 995 are currently active (an increase compared to the prior week). According to data from the [Secretary of Health of Mexico](#), as of February 21, 2026, there have been a total of 155 confirmed NWS cases reported among humans since the beginning of 2025. Since the previous update, 537 incident cases among animals and 4 confirmed incident cases among humans were reported.

New World Screwworm Cases by Species, Mexico, 2024-2026					
Animal Cases				Confirmed Human Cases	
Cumulative	Incident†	Active	Active Change	Cumulative	Incident†
16,806	+537	995	+193	155	+4

Figure Notes: Data for cases reported among animals as of March 4, 2026, and data for cases reported among humans of February 21, 2026; †Change in cumulative total compared to previous update.

NWS cases among animals have primarily been reported in Chiapas (6,006), Oaxaca (2,814), Veracruz (2,528), Yucatan (1,742), and Tabasco (1,147). Confirmed NWS cases among humans have primarily been reported in Chiapas (108) and Yucatan (17). 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 [March 3, 2026](#), there have been over 157,000 NWS cases reported among animals and over 1,380 NWS cases reported among humans in Central America and Mexico.

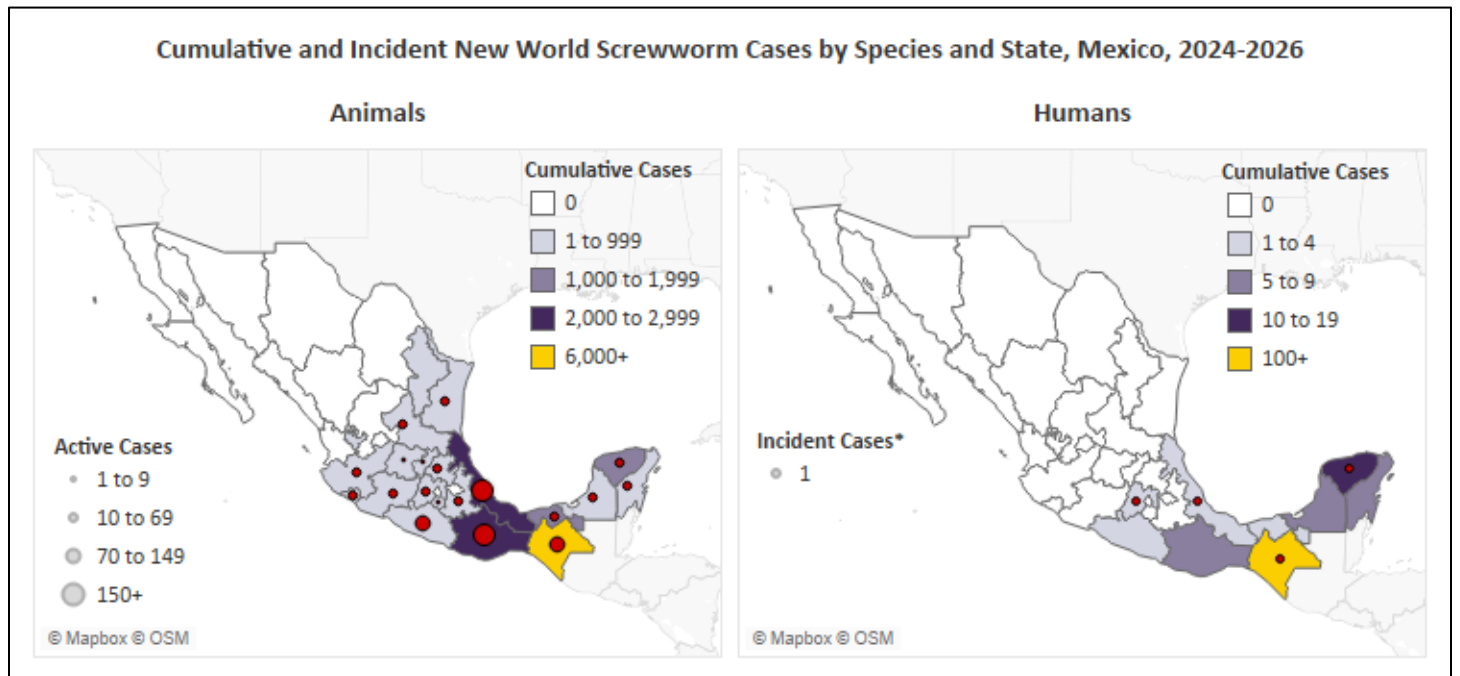


Figure Notes: Data for cases reported among animals as of March 4, 2026, and data for cases reported among humans as of February 21, 2026; \*Change in cumulative total compared to previous update.

The United States CDC issued a [Health Advisory](#) in January regarding NWS cases detected among animals near the United States – Mexico border, specifically in Tamaulipas where there are currently 19 active NWS cases among animals (an increase of 9 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.

**Data Sources:** [Secretary of Agriculture \(3/4/26\)](#), [Secretary of Health \(3/3/26\)](#), [CDC \(2/24/26\)](#)

# Non-Seasonal Influenza

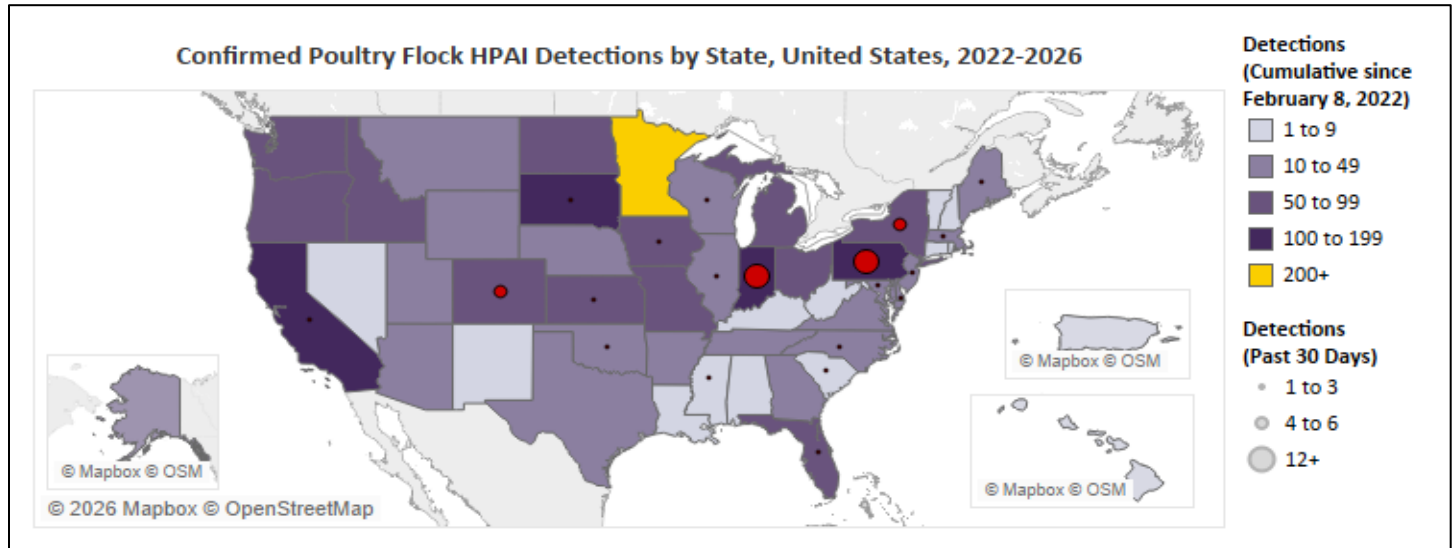
## United States – Updated Data on Poultry Flock Detections (HPAI):

According to data from the [United States Department of Agriculture \(USDA\)](#) as of March 3, 2026, there have been a total of 2,121 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 67 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		
36	31	0	0	0	580	25

*Table Notes: Data as of March 3, 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.*

In the past 30 days, HPAI has been detected among poultry flocks in 20 states, primarily [Pennsylvania](#) (19) which is experiencing its most severe outbreak since the 1980s, and [Indiana](#) (12). Detections increased during 2025 from September (29) to November (96) before decreasing slightly in December (82). During 2026, detections have held stable in January (62) and February (63), and there have been 10 detections reported so far during March. Similar trends have been observed during recent years in the [United States](#) and [globally](#). In January, 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 – there have been a total of 73 poultry flock detections reported in New York since 2022, with the most recent detection being reported on March 2, 2026, in Kings County.



*Figure Notes: Data as of March 3, 2026, 2025; \*Change in cumulative total compared to previous update.*

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 H5N1 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 the United States 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 not been reported during 2026. 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 \(3/5/26\)](#), [CDC \(2/18/26\)](#)

## Spain – Catalonia Reports Confirmed Variant Influenza A Virus Case (H1N1v):

According to the European Centre for Disease Prevention and Control (ECDC), health authorities in Spain reported a confirmed human case of swine influenza A(H1N1)v among a resident of Catalonia in February. The case was asymptomatic at the time of reporting and had no known exposure to swine. Epidemiological investigations are ongoing.

This is the fourth H1N1v case reported in Spain since 2008 – the [most recent case](#) was reported in Catalonia during 2024. Most human infectious with variant influenza viruses occur following exposure to swine (pigs) as these viruses typically circulate in swine populations but can sometimes infect humans. No human-to-human transmission has been identified in relation to this case or previous H1N1v cases reported in Spain.

**Data Source:** [ECDC \(2/27/26\)](#), [WHO \(2/9/24\)](#)

## Pertussis

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

According to provisional data from the [United States CDC](#) as of February 28, there have been a total of 1,795 pertussis cases reported among United States residents and residents of United States Territories during 2026. Since the previous update, 214 incident cases were reported, of which 79 reported symptom onset during the most recent epidemiological week, a 27% decrease 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	39	123	0.3
Middle Atlantic	10	140	457	0.3
East North Central	17	258	1,303	0.2
West North Central	1	45	918	0
South Atlantic	10	240	716	0.3
East South Central	11	185	493	0.4
West South Central	13	222	761	0.3
Mountain	12	265	995	0.3
Pacific	4	390	1,444	0.3
United States Territories	0	11	22	0.5
<b>Total</b>	<b>79</b>	<b>1,795</b>	<b>7,232</b>	<b>0.2</b>

*Table Notes: Data as of February 28, 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. Last year, the [PAHO 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.

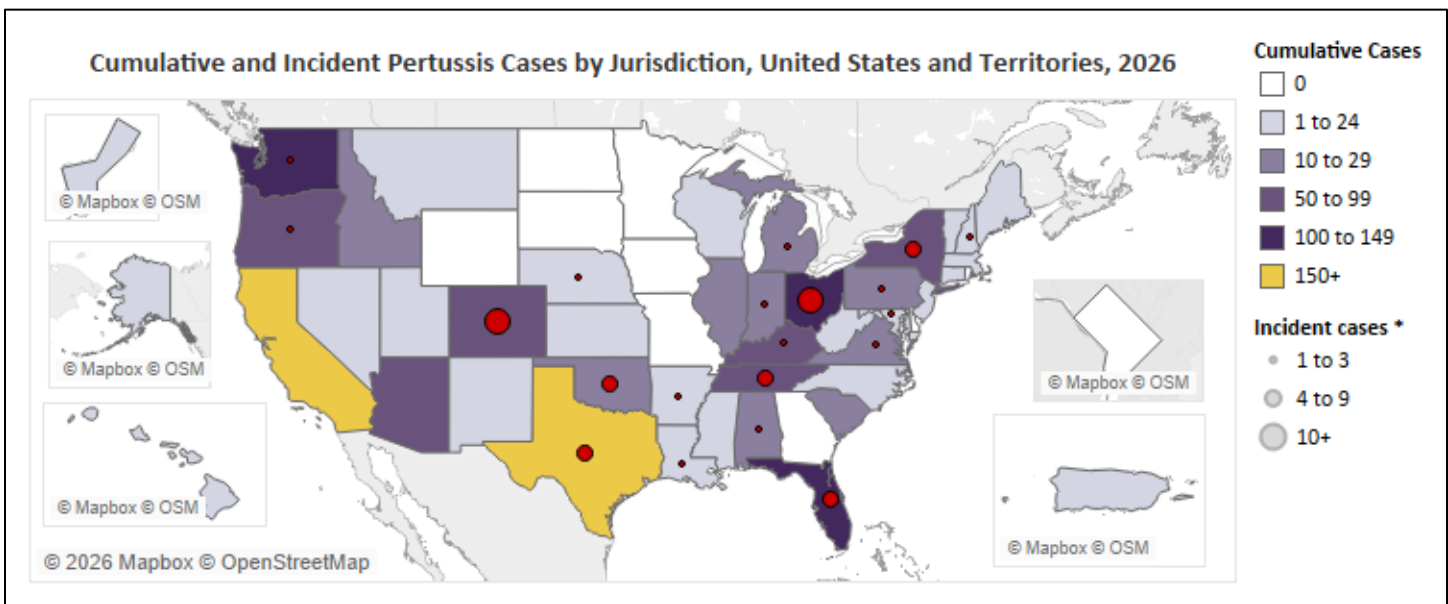


Figure Notes: Data as of February 28, 2026; New York State and New York City are combined in figure; The United States Virgin Islands, American Samoa, and the Commonwealth of Northern Mariana Islands did not report any cases during 2025-2026 and are not included in figure; \*Incident cases reported symptom onset during the most recent epidemiological week.

Data Sources: [CDC \(3/4/26\)](#), [CDC \(12/2/25\)](#)

## Polio

### Global – Incident AFP Cases (cVDPV2) Reported in Nigeria:

According to data from the [Global Polio Eradication Initiative \(GPEI\)](#) as of March 2, 2026, there has been 11 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) reported with onset of paralysis during 2026. Since the previous update, 4 incident cVDPV2 cases were reported in Nigeria, and an environmental cVDPV2 detection from a sample collected during 2026 was reported in Malawi.

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	11	+4	1	+0

Table Notes: Data as of March 2, 2026, and only includes AFP cases with onset of paralysis during 2026; †Change in cumulative total compared to previous update.

Cases of AFP with onset of paralysis during 2026 have been reported this year by 4 countries: Nigeria (4 – cVDPV2; 1 – cVDPV3), the Democratic Republic of the Congo (DRC) (1 – cVDPV2), Somalia (1 – cVDPV2), and [Togo](#) (1 – cVDPV2). Among countries without any reported AFP cases, environmental detections from samples collected during 2026 have been reported by Pakistan (26 – WPV1), Algeria (2 – cVDPV2), Malawi (1 – cVDPV2), Namibia (2 – cVDPV2), and the United Kingdom (1 – cVDPV2), suggesting undetected transmission was occurring this year 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, 217 AFP cases caused by cVDPV2, and 12 AFP cases caused by cVDPV3, have been reported with onset of paralysis during 2025.

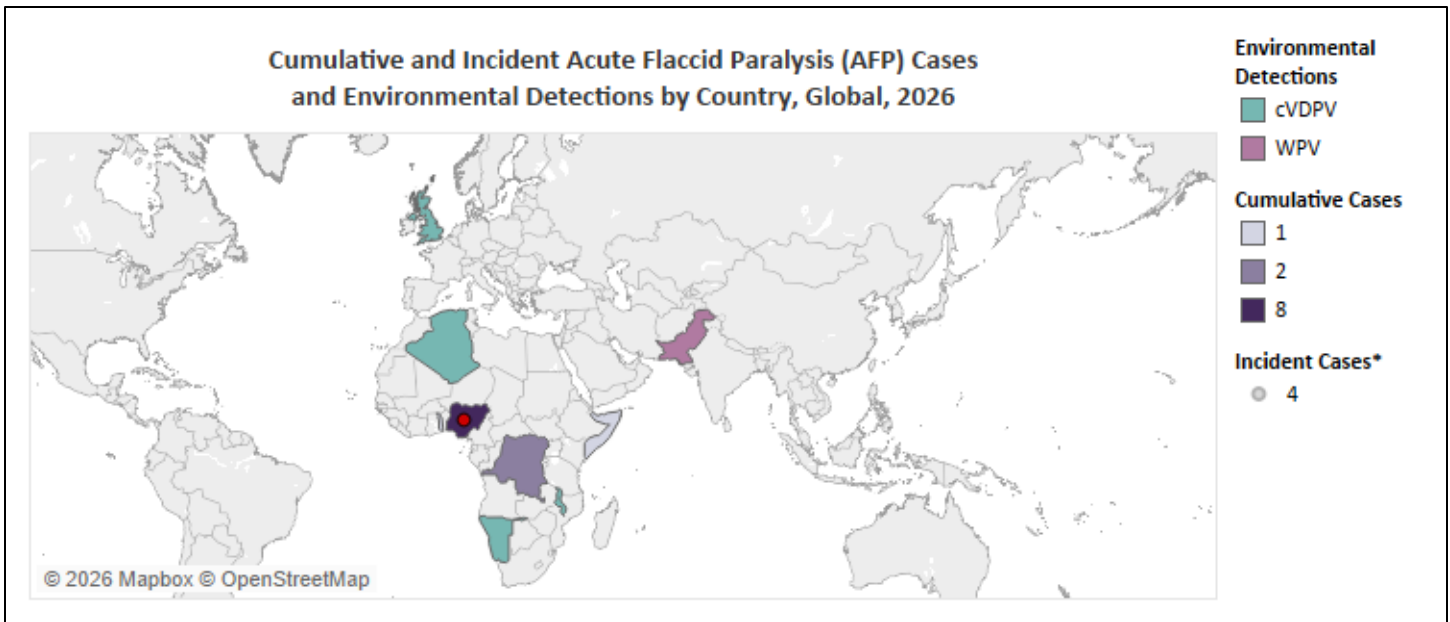


Figure Notes: Data as of March 2, 2026, and only includes cases with onset of paralysis or environmental detection samples collected during 2026.

Data Sources: [GPEI - WPV \(3/2/26\)](#), [GPEI - cVDPV \(3/2/26\)](#)

## Seasonal Influenza

### United States – Updated Data on Moderate Severity 2025-2026 Season:

According to data from the [United States CDC](#) as of February 21, 2026, there have been an estimated total of 25 million infections, 330,000 hospitalizations, and 20,000 deaths from flu during the 2025-2026 season so far. There have been a total of 79 pediatric deaths reported, of which 8 were reported during the most recent week – approximately 90% of pediatric deaths among children eligible for influenza vaccination and with known vaccination status 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†
25 Million	330,000	20,000	79	+8

Table Notes: Data as of February 21, 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 19 jurisdictions, moderate in 11 jurisdictions, and high or very high in 25 jurisdictions.

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 21, 2026, cases and hospitalizations increased by 9% and 15%, respectively, compared to the prior week.

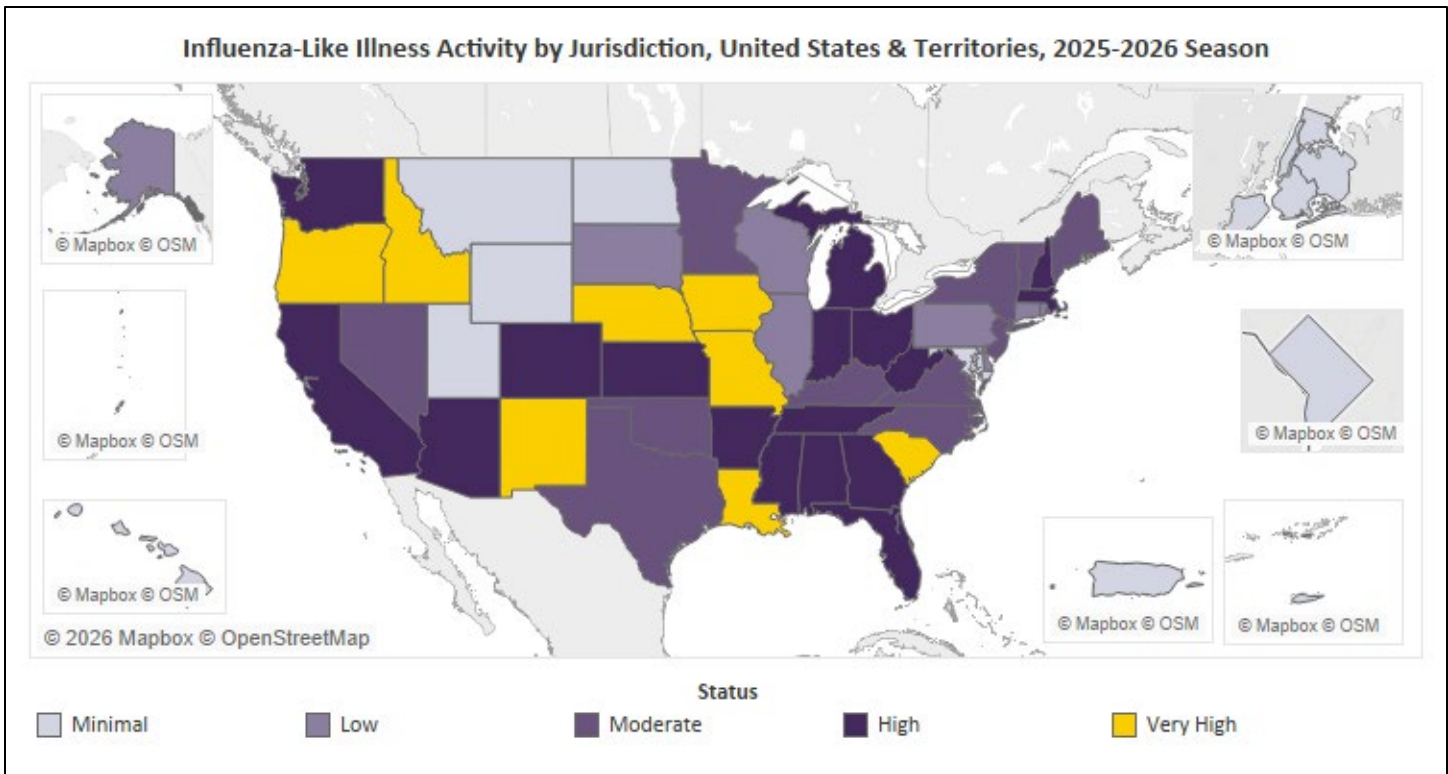


Figure Notes: Data as of February 21, 2026, and depicts influenza-like illness activity during the most recent epidemiological week.

According to data from Influenza Hospitalization Surveillance Network (FluSurv-NET) member states (14), as of February 27, 2026, the cumulative hospitalization rate among laboratory-confirmed influenza cases for the 2025-2026 season is 73.3 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  $\geq 65$  years (243.7), children aged  $\leq 4$  years (75.7), especially those aged  $< 1$  year (120.3), non-Hispanic Black persons (age-adjusted 127.9), and American Indian or Alaska Native persons (age-adjusted 76.7). The hospitalization rate during the most recent week was 2.0 per 100,000 population, a decrease compared to the prior week.

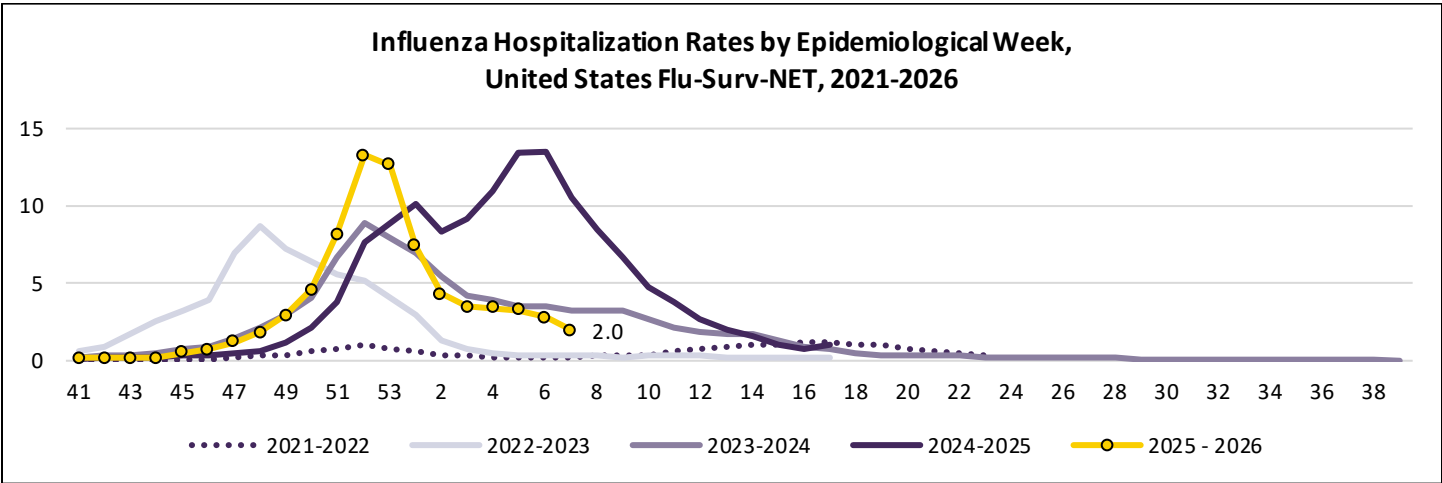


Figure Notes: Data as of February 21, 2026; Week 53 rates for seasons 2021-2022, 2022-2023, 2023-2024, and 2024-2025 calculated as the average of Weeks 52 and 1 of each respective season.

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 0.89%, a slight increase compared to the prior week.

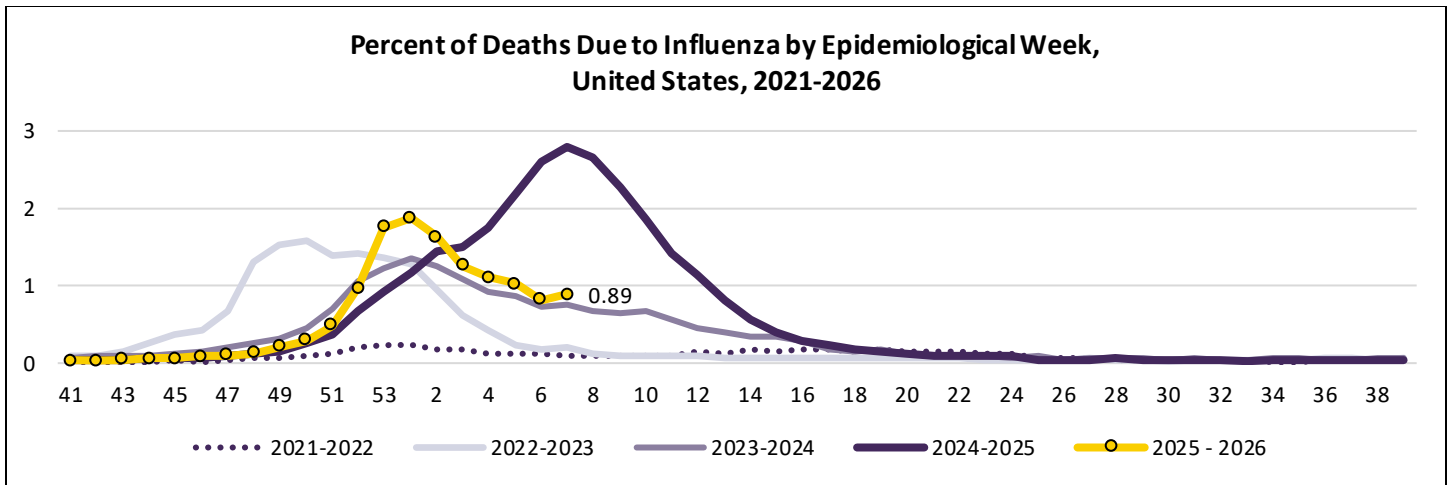


Figure Notes: Data as of February 21, 2026; Week 53 rates for seasons 2021-2022, 2022-2023, 2023-2024, and 2024-2025 calculated as the average of Weeks 52 and 1 of each respective season.

Among influenza positive samples collected during this season, 84.9% have been influenza A and 15.1% have been influenza B – there has been a recent rise in the proportion of influenza B detected, with 55.1% 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 (88.1%), including 83.1% of samples taken during the most recent week. Among influenza A(H3N2) positive samples that have been genetically characterized, 92.4% have been subclade K.

According to data from the [United States CDC](#), the 2024-2025 flu season was classified as a high severity season overall with an estimated 51 million infections, 710,000 hospitalizations, and 45,000 deaths. Additionally, the 2024-2025 flu season saw the highest number of pediatric deaths (293) reported since they became nationally notifiable. Among pediatric deaths reported during the 2024-2025 season, [89% were not fully vaccinated](#) against influenza.

Data Source: [CDC \(2/27/26\)](#)

## Yellow Fever

### The Americas – Incident Confirmed Cases Reported in Multiple Countries:

According to data from the [Pan American Health Organization \(PAHO\)](#) as of March 4, there have been a total of 28 confirmed yellow fever cases and 13 deaths reported in the Americas during 2026. Since the previous update, 7 confirmed incident cases and 4 deaths were reported – Bolivia and Peru reported confirmed incident cases for the first time this year.

Yellow Fever Cases and Deaths, the Americas, 2026				
Confirmed Cases		Deaths		
Cumulative	Incident†	Cumulative	Incident†	CFR*
28	+7	13	+4	46.4%

Table Notes: Data as of March 4, 2026; †Change in cumulative total compared to previous update; \*Case fatality rate (CFR).

During 2026, confirmed cases have been reported by Colombia (25), Peru (2), and Bolivia (1). Tolima, Colombia, has been particularly affected, accounting for all cases reported in Colombia and all deaths reported in the Americas during 2026. Based on recent regional trends observed during the end of 2025 and the beginning of 2026, [Venezuela](#) has initiated a vaccination campaign focusing on several states previously considered low risk for infection and individuals never vaccinated against yellow fever.

The United States CDC currently has a [Level 2 – Practice Enhanced Precautions Travel Health Notice](#) posted regarding yellow fever in Colombia. [Vaccination](#) is recommended for those aged ≥9 months that are traveling to or living in areas at risk for yellow fever. A total of 350 confirmed yellow fever cases and 148 deaths (CFR: 42.3%) were reported by 7 countries in the

Americas during 2025, primarily Brazil (120 cases; 47 fatal), Colombia (125 cases; 51 fatal – a [5-fold increase](#) over 2024), Peru (49 cases; 19 fatal) and Venezuela (36 cases; 20 fatal).

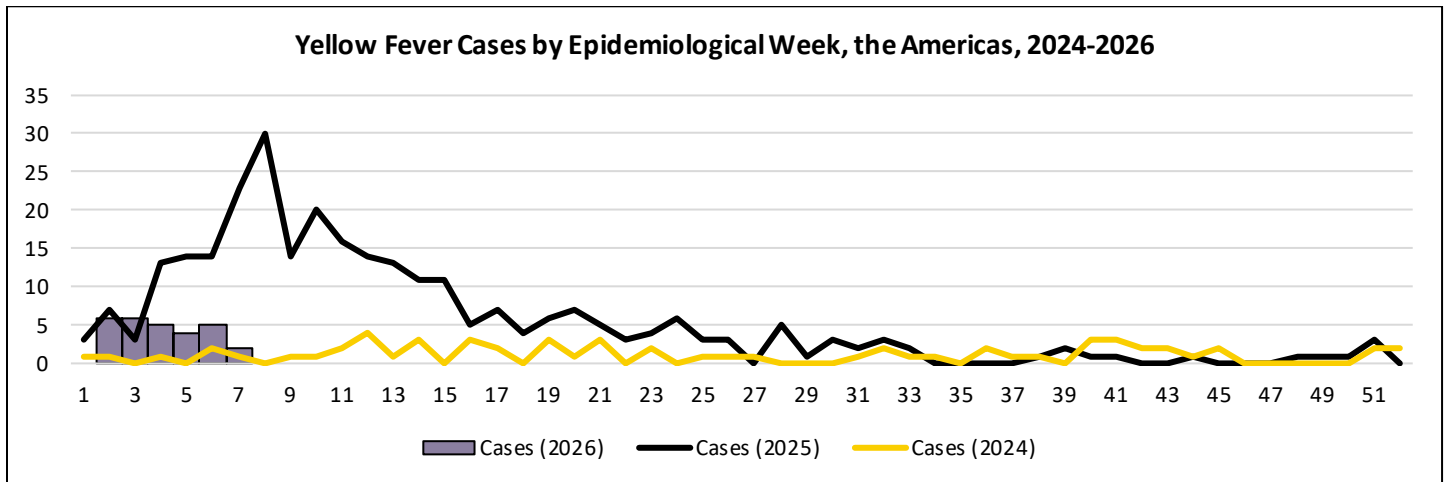


Figure Notes: Data as of March 4, 2026; Several cases reported during 2025 by Venezuela (36), Colombia (7), Ecuador (4), Brazil (1), and Guyana (1) are missing from figure.

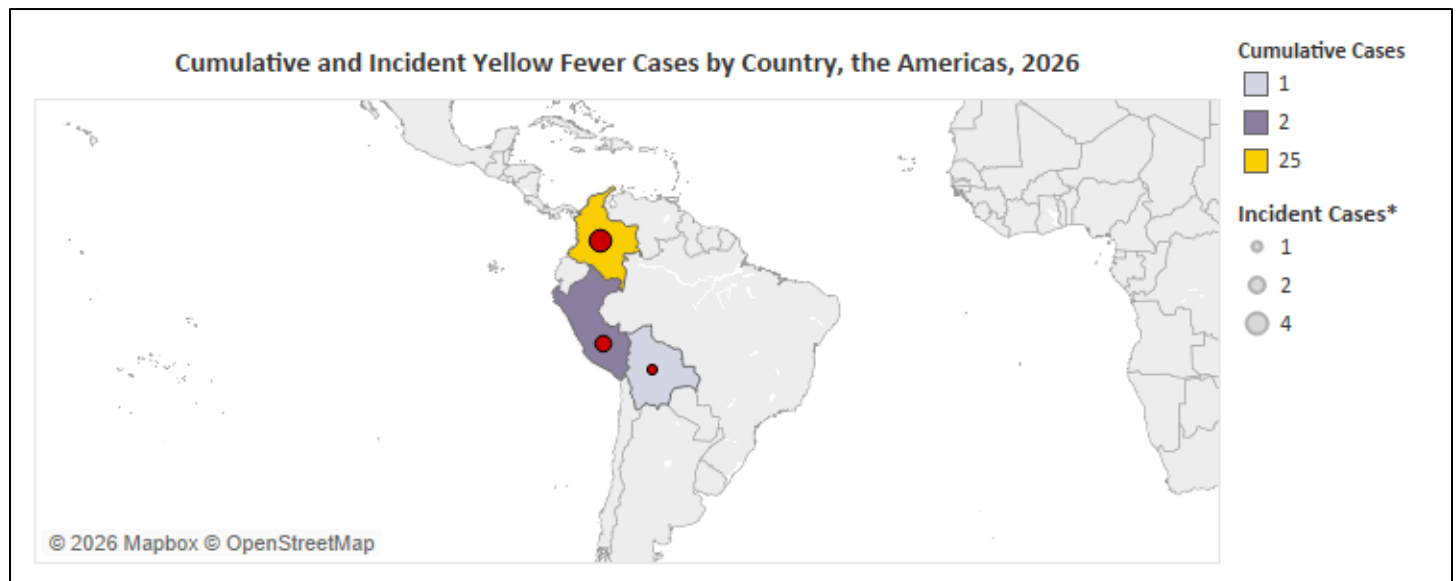


Figure Notes: Data as of March 4, 2026; \*Change in cumulative total compared to previous update.

Data Source: [PAHO \(3/4/26\)](#)

## Other Outbreaks, News, and Events

### Other Outbreaks (2026):

#### Chikungunya

- Seychelles – Incident Travel Associated Cases Reported in Multiple Countries ([February 26](#))
- 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

- Israel – Additional Death Reported Among Unvaccinated 6-Year-Old ([February 26](#))
- Global – WHO Provides Initial 2026 Update on Cases and Incidence Rates ([February 19](#))
- Europe – Measles Transmission Re-Established in Several Countries ([February 5](#))

## 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](#))

## Other Active CDC Travel Health Notices:

- [Chikungunya in Seychelles - 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](#)
- [Oropouche in the Americas - Level 1 - Practice Usual Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Global Dengue - 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](#)
- [Rabies in Morocco - 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](#)
- [Rocky Mountain Spotted Fever in Mexico - 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:

- [Sri Lanka reports 13 416 dengue cases in first two months of 2026; highest case burden in Colombo and Gampaha, Western Province - BEACON](#)
- [First autochthonous dengue case since 2024 reported on Easter Island, Chile - BEACON](#)
- [WHO updates all 3 viral strains to be included in fall flu shots | CIDRAP](#)
- [Fatal hantavirus case reported in Limache, Valparaíso Region, Chile - BEACON](#)

- [Analysis suggests rope squirrels are a natural reservoir of mpox virus | CIDRAP](#)
- [First imported measles cases in five years reported in Colombia amid regional resurgence - BEACON](#)
- [Animal rabies resurgence in Romania linked to lapses in fox vaccination near the northern border - BEACON](#)
- [Chile becomes the first country in the Americas to be verified by WHO for the elimination of leprosy](#)
- [Robert Koch Institute, Germany: Two new tick-borne encephalitis risk districts designated; record-high cases continued in 2025; vaccination coverage gaps persist - BEACON](#)
- [219 chikungunya cases reported in Mayotte, with rising test positivity and widespread transmission amid favorable environmental conditions - BEACON](#)
- [Denmark becomes first country in the European Union to eliminate mother-to-child transmission of HIV and syphilis](#)
- [Follow-up report on sexually transmitted ringworm \(Trichophyton mentagrophytes genotype VII\) in Minnesota, California, and New York, USA - BEACON](#)
- [Lassa fever cases in Benue State, Nigeria, increase to 45, with 10 deaths; 12 healthcare workers infected, highlighting nosocomial transmission risks - BEACON](#)
- [Development and Characterization of Candidate Vaccine Viruses against High Pathogenicity Avian Influenza A\(H5\) Viruses for Rapid Pandemic Response | The Journal of Infectious Diseases | Oxford Academic](#)
- [Global overview of the spread and impact of H5 clade 2.3.4.4b HPAI virus in wildlife, 2020-2024 - offlu](#)
- [Recommended composition of influenza virus vaccines for use in the 2026-2027 northern hemisphere influenza season](#)
- [Epidemiological Alert: Misuse of GLP-1 receptor agonist medications and considerations for the Americas Region - 27 February 2026 - PAHO/WHO | Pan American Health Organization](#)
- [RNA vaccine funding cuts threaten decades of scientific progress | CIDRAP](#)
- [New avian influenza vaccine trials begin in UK - GOV.UK](#)
- [Poll: Americans increasingly trust career scientists, not leaders, at CDC, NIH, and FDA | CIDRAP](#)
- [The State of US Vaccine Policy — Mar 5, 2026 | CIDRAP](#)