



Date: 4/16/26

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 – Over 5,500 Incident Cases Reported with Majority in Brazil:

According to data from the [Pan American Health Organization \(PAHO\)](#) extracted on April 16, there have been a total of 74,651 chikungunya cases, of which 25,539 are confirmed, and 26 deaths reported in the Americas during 2026. Since the previous update, 5,662 incident chikungunya cases, of which 1,726 are confirmed, and 2 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	23,145	+0	7,817	+0	7	+0	0.1%
Brazil	42,979	+4,593	15,576	+1,581	16	+1	0.1%
Cuba	1,457	+0	114	+0	2	+0	1.8%
Suriname	2,579	+0	1,354	+0	0	+0	0.0%
Rest of the Americas	4,491	+1,029	678	+145	1	+1	0.1%
Total	74,651	+5,622	25,539	+1,726	26	+2	0.1%

*Table Notes: Data extracted on April 16, 2026, and includes locally acquired cases only; †Change in cumulative total compared to previous update; *Case fatality rate (CFR) calculated among confirmed cases.*

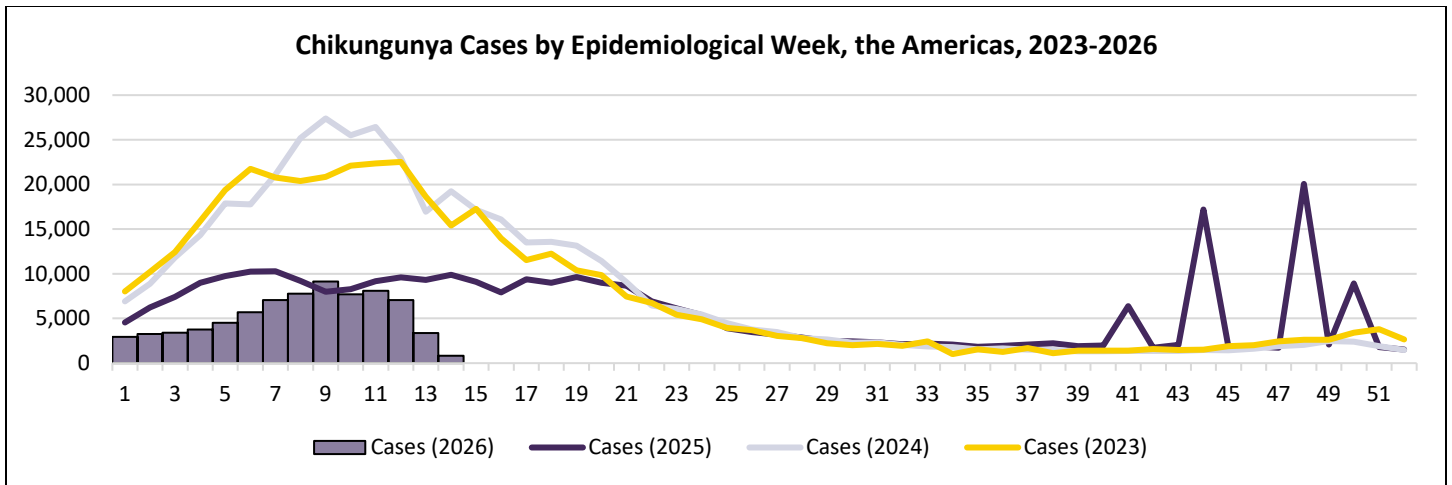


Figure Notes: Data extracted on April 16, 2026, and includes locally acquired cases only; Most recent weeks' trends should be interpreted with caution due to delays in reporting.

Cases have been reported by 18 countries in the Americas during 2026, primarily [Brazil](#) (42,979), [Bolivia](#) (23,145), [Argentina](#) (4,345), [Suriname](#) (2,579), and Cuba (1,457). Cumulative incidence per 1 million population is currently highest in Suriname (399.84), Bolivia (181.54), [French Guiana](#) (25.79), Brazil (20.12), Cuba (13.38), and Argentina (9.45). According to a [PAHO Epidemiological Alert](#) from February, there has been a sustained increase in incidence observed between late 2025 and early 2026 in the Americas with resumption of local transmission in areas that haven't reported such for several years, such as [Guatemala](#) which last reported a confirmed chikungunya case in 2016.

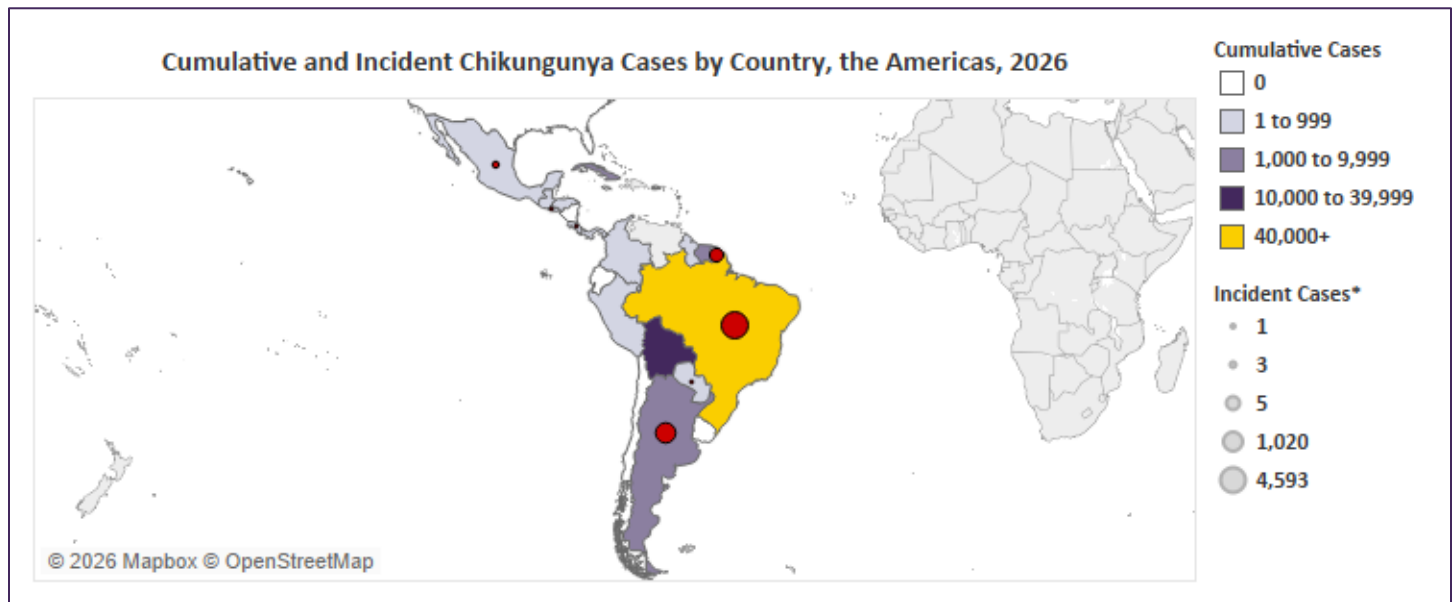


Figure Notes: Data extracted on April 16, 2026, and includes locally acquired cases only; *Change in cumulative total compared to previous update; Case reported in the United States (1) according to PAHO data not shown due to symptom onset being during 2025.

During 2025, there were 316,401 chikungunya cases, of which 115,875 were confirmed, and 175 deaths (0.2% among confirmed cases) 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 data from the [United States CDC](#) 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](#) and [Suriname](#). [Vaccination](#) is recommended for travelers visiting an area with an outbreak.

Data Source: [PAHO \(4/16/26\)](#)

Mayotte – Approximately 100 Cases Reported Weekly on Average in Past Month:

According to data from the [French National Public Health Agency \(SPF\)](#), there has been a resurgence of chikungunya virus circulation in Mayotte this year with a sharp increase in incidence observed during epidemiological weeks 6-7 and a total of 797 confirmed locally acquired cases reported in 17 communes as of April 5, 2026. Since the previous update, 248 locally acquired confirmed incident cases were reported, of which 119 had symptom onset during epidemiological week 14 (a 25% increase compared to the prior week). According to SPF, Chikungunya virus circulation remains high with approximately 100 incident cases reported per week on average in the past 4 weeks, with an increasing trend.

Chikungunya Cases, Hospitalizations, and Deaths, Mayotte, 2026					
Cases		Hospitalizations		Deaths	
Cumulative	Incident†	Cumulative	Cumulative	Incident†	CFR*
797	+248	31	0	+0	0.0%

Table Notes: Data as of April 5, 2026; †Change in cumulative total compared to previous update; *Case fatality rate (CFR).

Confirmed cases have been reported primarily in Mamoudzou (21%), Sada (14%), Ouangani (9.5%), and Chiconi (7.9%). Recent trends in incidence have shifted more towards northeast portions of the island and away from earlier epicenters. Those aged 25-44 and 45-64 years have accounted for nearly 64% of confirmed cases. Women account for 64% of confirmed cases. Among all cases, 31 have required hospitalization (75% occurred in the past 2 weeks), including 13 children aged <5 years.

Mayotte has been experiencing a chikungunya outbreak since the beginning of 2025 with 2,063 confirmed cases reported as of April 5, 2026 (1,266 reported during 2025). Mayotte is an overseas department of France in the Indian Ocean off the coast of Southeastern Africa where chikungunya activity has seen a [resurgence in recent years](#). The United States CDC currently has a [Level 2 – Practice Enhanced Precautions Travel Health Notice](#) posted regarding chikungunya in Mayotte. [Vaccination](#) is recommended for travelers visiting an area with an outbreak.

Data Source: [SPF \(4/10/26\)](#)

Measles

Bangladesh – Over 20,000 Cases and 200 Deaths Reported Since Mid-March:

According to data from the [Ministry of Health and Family Welfare](#) as of April 15, there have been a total of 20,352 suspected and 3,065 confirmed measles cases reported in Bangladesh since March 15, 2026. Additionally, there have been a total of 172 deaths reported among suspected cases, and 34 reported among confirmed cases. According to provisional data from the [World Health Organization \(WHO\)](#) for the period of January 1 – March 16, 2026, there were 91 confirmed cases reported, highlighting the rapid increase in incidence observed since then. Since the previous update, 12,136 cases (10,469 suspected & 1,667 confirmed) and 57 deaths (44 suspected & 13 confirmed) were reported. Among all cases, 56% have been hospitalized.

Measles Cases, Hospitalizations, and Deaths by Case Status, Bangladesh, Since March 15, 2026							
Case Status	Cases		Hospitalizations		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
Suspected	20,352	+10,469	13,129	+6,246	172	+44	1.1%
Confirmed	3,065	+1,667			34	+13	0.8%

Table Notes: Data as of April 15, 2026; †Change in cumulative total compared to previous update; *Case fatality rate (CFR).

During 2026, suspected cases have been reported in all 8 departments, primarily Dhaka (8,759), Rajshahi (3,954), Chattogram (2,670), Khulna (1,671), and Barisal (1,271). On April 5, 2026, an [emergency measles-rubella vaccination campaign](#) was launched targeting 1.2 million children aged 6 months to 5 years who were not routinely immunized or are at greatest risk for severe illness across 18 high-risk districts.

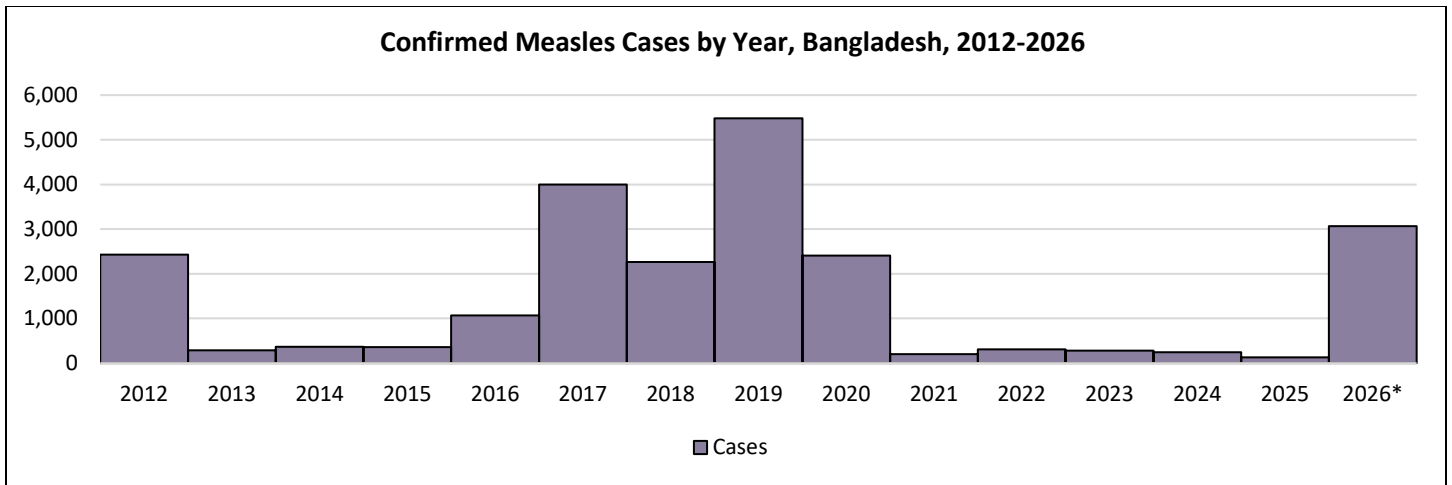


Figure Notes: Data for 2012-2025 as of March 16, 2026; *Data for 2026 as of April 15, 2026, and is incomplete for the year.

In the first 4 months of 2026, Bangladesh has reported the highest number of confirmed measles cases in a year since 2019 (5,479). An approximately 13-fold decrease in the number of confirmed cases reported annually has been observed since the COVID-19 pandemic. From 2021-2025, there were 293 confirmed cases reported annually on average. In the years preceding the pandemic (2016-2020), there were 3,805 confirmed cases reported annually on average. The United States CDC currently has a [Level 1 – Practice Usual Precautions Travel Health Notice](#) posted regarding measles globally. [Vaccination](#) offers the best protection against measles and is recommended for all international travelers.

Data Sources: [Ministry of Health and Family Welfare \(4/16/26\)](#), [WHO \(3/16/26\)](#)

Canada – Incident Cases Reported in 5 Provinces, Most in Manitoba:

According to data from the [Public Health Agency of Canada \(PHAC\)](#) as of April 4, 2026, there have been a total of 5,460 probable and confirmed measles cases reported in Canada during 2025, and 789 probable and confirmed cases reported during 2026. Since the previous update, 56 incident cases with rash onset in 2026 were reported, primarily in Manitoba.

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	380	-2	5,080	-1	401	+0	2	+0	0.0%
2026	65	+2	724	+54	54	+3	0	+0	0.0%

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

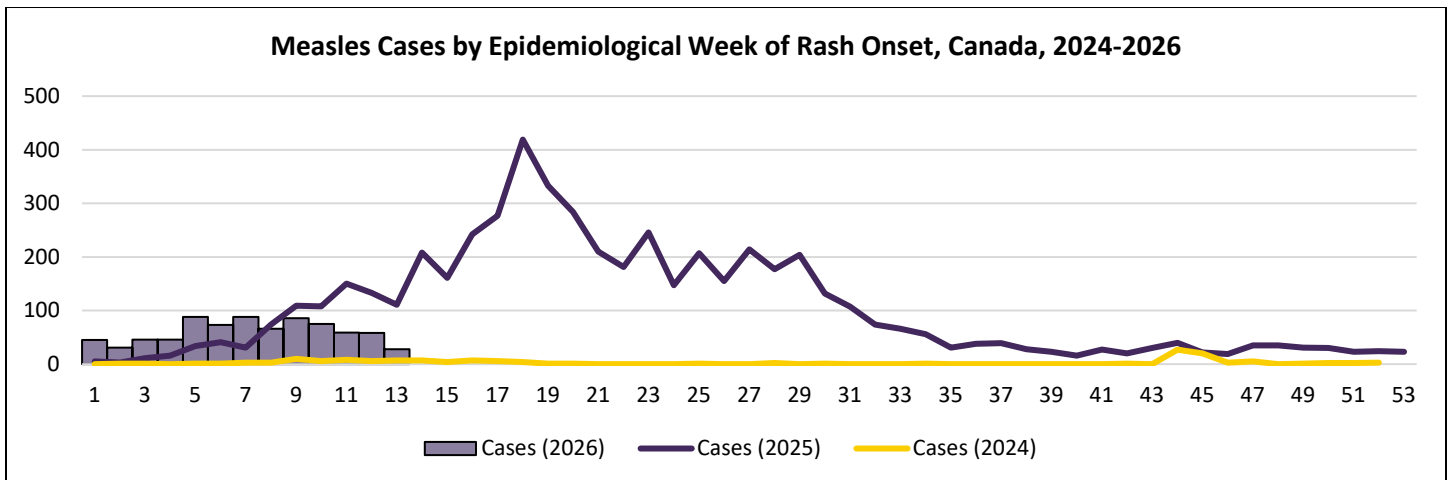


Figure Notes: Data as of April 4, 2026, and includes probable and confirmed cases.

During 2026, cases have been reported by 7 jurisdictions: [Manitoba](#) (479), [Alberta](#) (245), Ontario (22), [British Columbia](#) (21), Nova Scotia (10), [Quebec](#) (7), and [Saskatchewan](#) (5). Those aged 5-17 years have been most affected (43%), followed by those aged 18-54 years (37%), and those aged 1-4 years (12%). There have been 2 congenital cases reported. Among all cases, 92% were unvaccinated or had unknown vaccination statuses, 7% have been hospitalized, and 97% were exposed in Canada (epidemiologically and/or virologically linked). Cases exposed outside of Canada have reported travel to Chad, [Guatemala](#), India, [Mexico](#), Pakistan, Spain, Thailand, Togo, Türkiye, Vietnam, and the [United States](#).

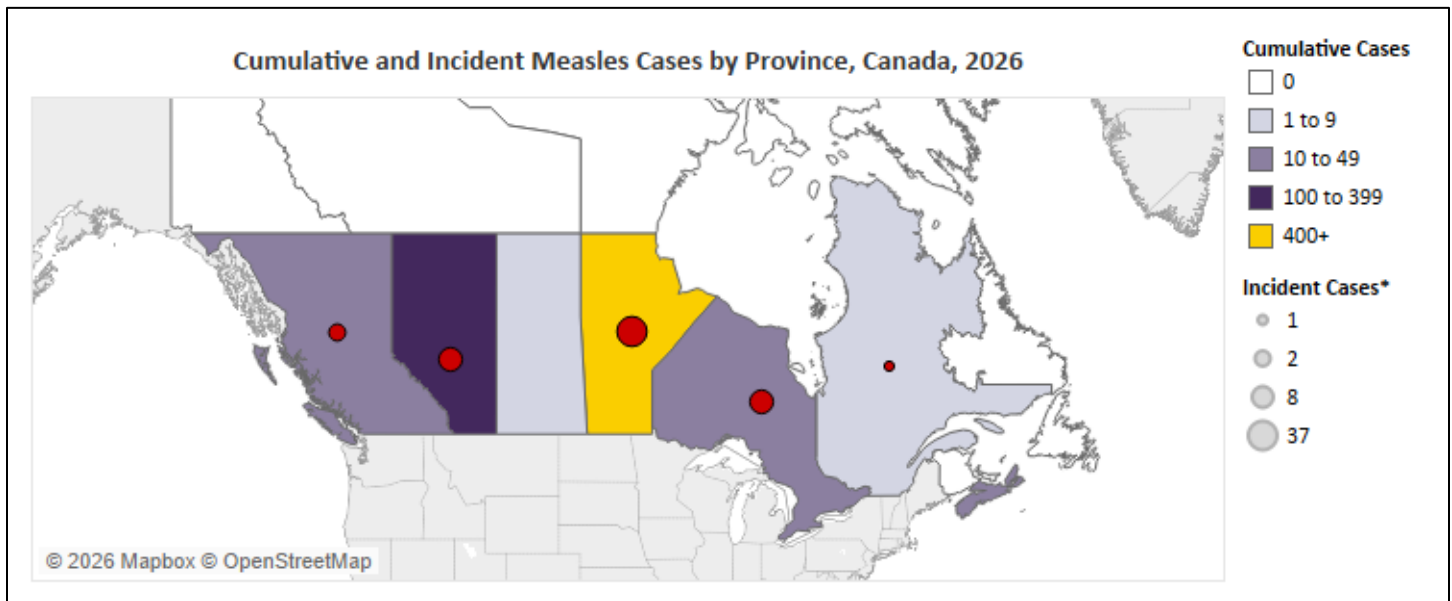


Figure Notes: Data as of April 4, 2026, and includes probable and confirmed cases; *Change in cumulative total compared to previous update.

During 2025, cases were reported by 10 jurisdictions, primarily Ontario (2,396), Alberta (2,013), British Columbia (440), and Manitoba (358). 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). Cases exposed outside of Canada reported travel to 23 different countries, suggesting a broad measles resurgence globally.

Canada is currently experiencing a large measles outbreak involving 6,147 cases that began in October 2024 and has resulted in the country [losing measles elimination status](#). Among all cases reported during 2026, 97% 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. The United States CDC currently has a [Level 1 – Practice Usual Precautions Travel Health Notice](#) posted regarding measles globally. [Vaccination](#) offers the best protection against measles and is recommended for all international travelers.

Data Sources: [PHAC - 2026 \(4/13/26\)](#), [PHAC - 2025 \(4/13/26\)](#)

Israel – Outbreak Primarily Affecting Jerusalem and Beit Shemesh Continues:

According to data from the [Israeli Ministry of Health](#), as of April 14, 2026, there have been a total of 3,624 measles cases and 17 deaths reported in Israel since April 2025. Since the previous update, 122 incident cases were reported.

Measles Cases, Hospitalizations, and Deaths, Israel, 2025-2026						
Cases		Hospitalizations		Deaths		
Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
3,624	+122	1,226	+45	17	+0	0.5%

Table Notes: Data as of April 14, 2026; †Change in cumulative total compared to previous update; *Case fatality rate (CFR).

Cases have primarily been reported in Jerusalem (1,147), Beit Shemesh (1,052), Bnei Brak (194), Safed (148), Beitar Illit (111), Tiberias (103), Modin Illit (71), and Nof Hagalil (60). Among all cases, 86.3% have been among children aged <10

years, and 33.8% have been hospitalized, including 14 cases currently hospitalized – 7 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.

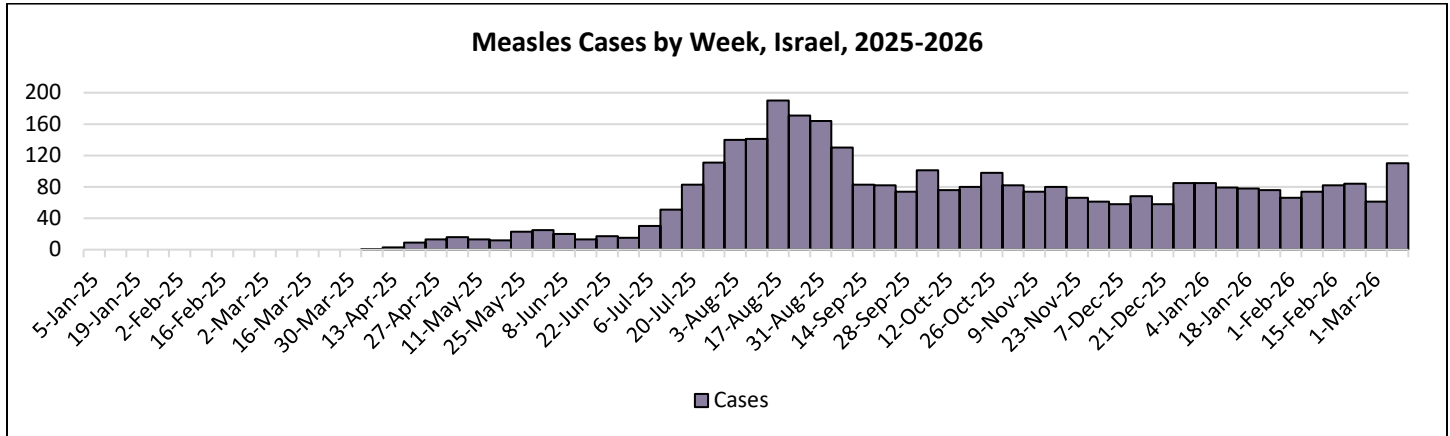


Figure Notes: Data as of April 14, 2026, and includes 3,412 cases through March 14, 2026.

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. The United States CDC currently has a [Level 1 – Practice Usual Precautions Travel Health Notice](#) posted regarding measles globally. [Vaccination](#) offers the best protection against measles and is recommended for all international travelers.

Data Source: [Israeli Ministry of Health \(4/14/26\)](#)

Mexico – Over 550 Confirmed Incident Cases Reported, Most in Jalisco:

According to data from the [Secretary of Health of Mexico](#) as of April 15, 2026, there have been a total of 6,487 confirmed measles cases and 27 deaths reported in Mexico during 2025, and 9,458 confirmed cases and 9 deaths reported during 2026. Since the previous update, 557 confirmed incident cases with symptom onset during 2026 were reported, primarily in Jalisco (310).

Measles Cases, Hospitalizations, and Deaths, Mexico, 2025-2026							
Year	Probable Cases		Confirmed Cases		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
2025	15,712	-2	6,487	+23	27	+0	0.4%
2026	22,733	+873	9,458	+557	9	+0	0.1%

Table Notes: Data as of April 15, 2026; †Change in cumulative total compared to prior update; *Case fatality rate (CFR) calculated among confirmed cases.

During 2026, confirmed cases have been reported by 31 states, primarily Jalisco (5,448), Mexico City (771), and Chiapas (760). During 2025, confirmed cases were reported by 29 states, primarily Chihuahua (4,496) and Jalisco (665). Across both years, incidence per 100,000 population has been highest among those aged <1 year (77.92), followed by those aged 1-4 years (23.97), those aged 25-29 years (17.31), and those aged 5-9 years (17.05).

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). Over [30 million measles vaccine doses](#) have been administered in Mexico since the beginning of 2025. The United States CDC currently has a [Level 1 – Practice Usual Precautions Travel Health Notice](#) posted regarding measles globally. [Vaccination](#) offers the best protection against measles and is recommended for all international travelers.

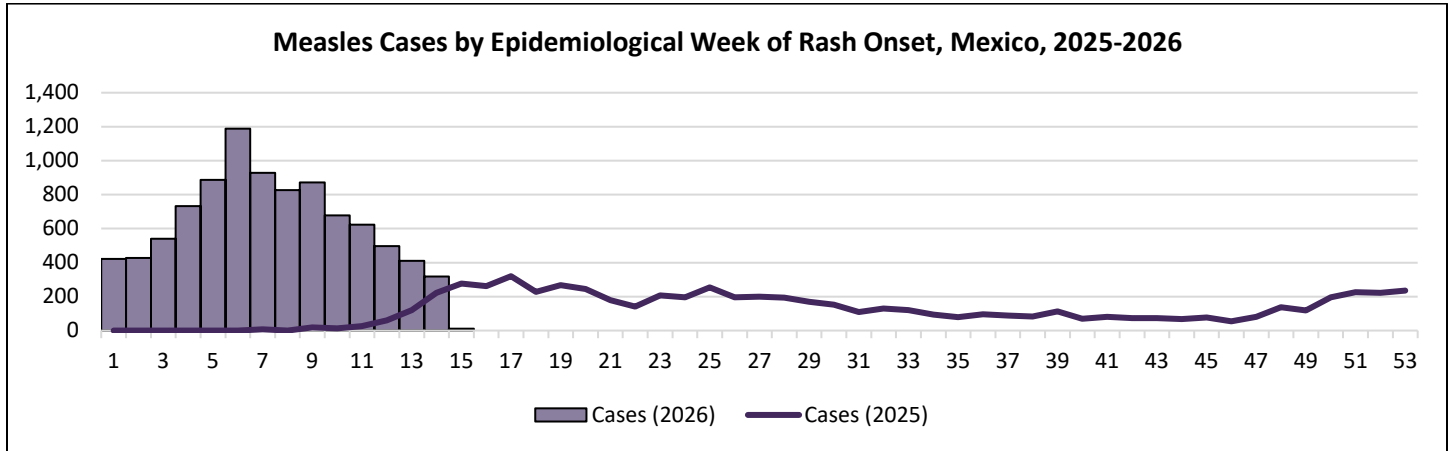


Figure Notes: Data as of April 15, 2026, and includes confirmed cases only (3 missing from figure).

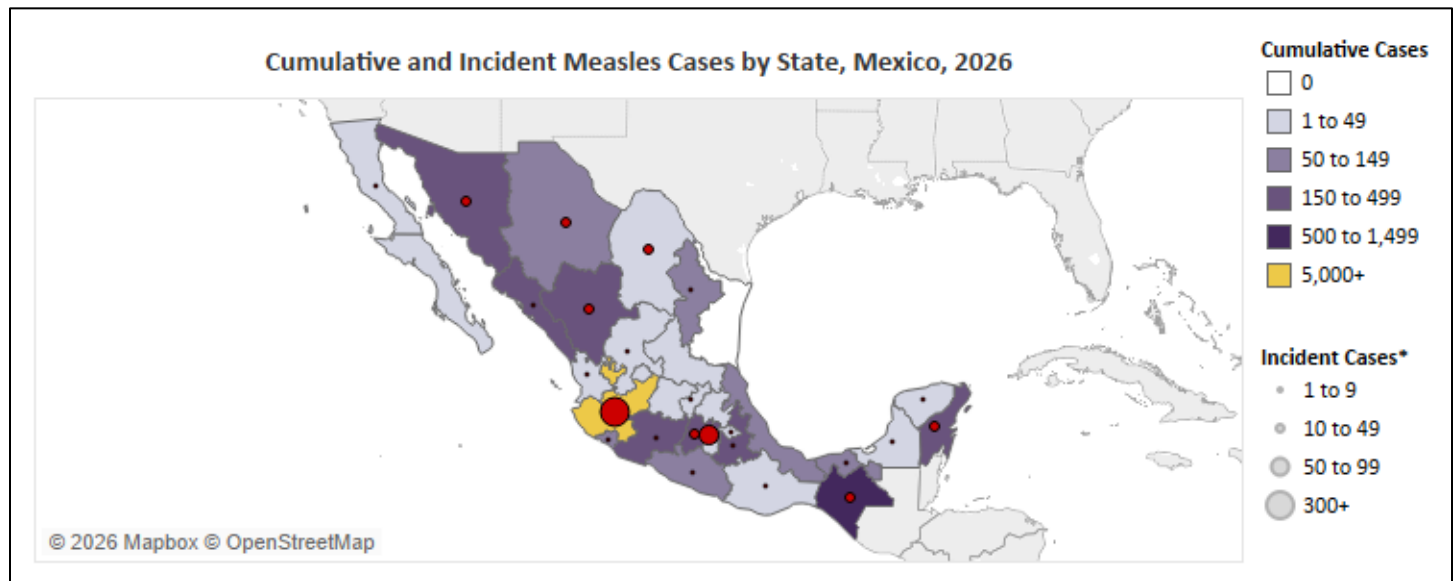


Figure Notes: Data as of April 15, 2026, and includes confirmed cases only; *Change in cumulative total compared to previous update.

Data Source: [Secretary of Health \(4/16/26\)](#)

United States – Incident Cases Reported in 8 States with Majority in Utah:

According to data from the [United States CDC](#) as of April 9, 2026, there have been a total of 2,287 confirmed measles cases and 3 deaths reported in the United States during 2025, and 1,714 confirmed cases reported during 2026. Since the previous update, 43 confirmed incident cases with rash onset during 2026 were reported, primarily in Utah (30).

Measles Cases, Hospitalizations, and Deaths, United States, 2025-2026							
Year	Confirmed Cases		Hospitalizations		Deaths		
	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	CFR*
2025	2,287	+1	243	+1	3	+0	0.1%
2026	1,714	+43	96	+5	0	+0	0.0%

Table Notes: Data as of April 9, 2026, and includes cases reported among international visitors to the United States; †Change in cumulative total compared to previous update; *Case fatality rate (CFR).

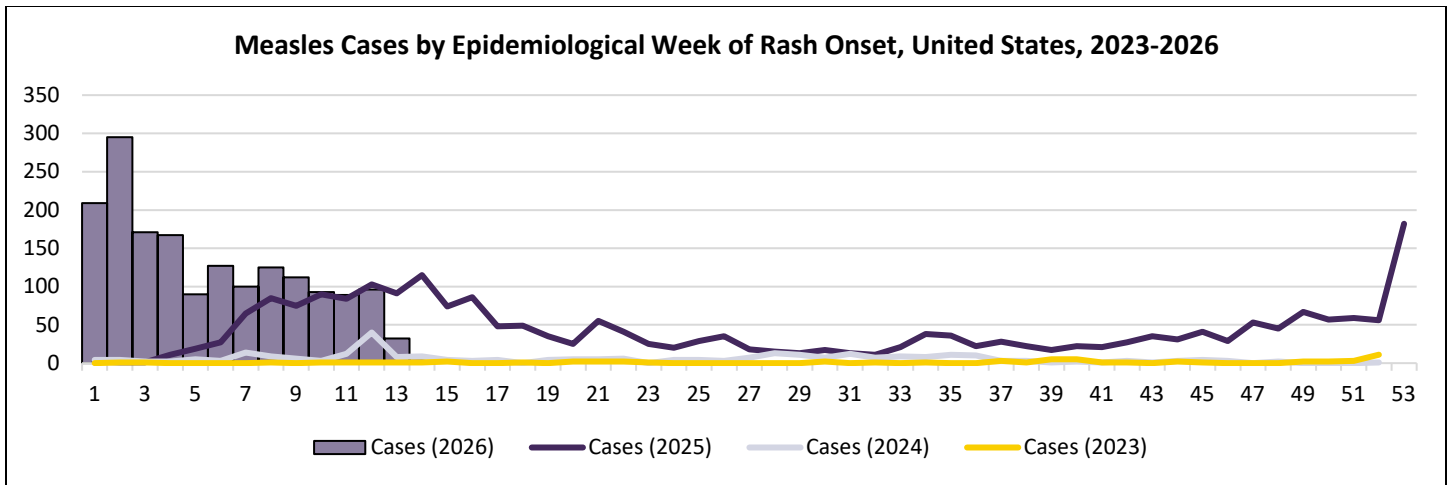


Figure Notes: Data as of April 9, 2026, and includes cases reported among international visitors to the United States.

During 2026, confirmed cases have been reported by 33 jurisdictions, primarily South Carolina (667), Utah (408), Texas (176), and Florida (129). There have been 17 outbreaks reported during 2026 – 94% of confirmed cases reported during 2026 are outbreak associated (377 from outbreaks that began during 2026 and 1,232 from outbreaks that began during 2025). Currently, there are ongoing outbreaks in [Arizona](#), [Florida](#), [South Carolina](#), [Texas](#), and [Utah](#). Earlier in March, the [CDC reported](#) that they were supporting outbreak response activities in the Carolinas – [South Carolina](#) has now seen 4 weeks pass with no incident measles cases reported. Those aged 5-19 years have been most affected (52%), followed by those aged 20+ years (27%), and those aged <5 years (21%). Among all confirmed cases 92% have been unvaccinated or have unknown vaccination statuses and 6% have been hospitalized – including 9% of cases aged <5 years. In New York, there have been 4 confirmed case reported in [New York City](#) and 4 confirmed cases reported in [Rest of State](#).

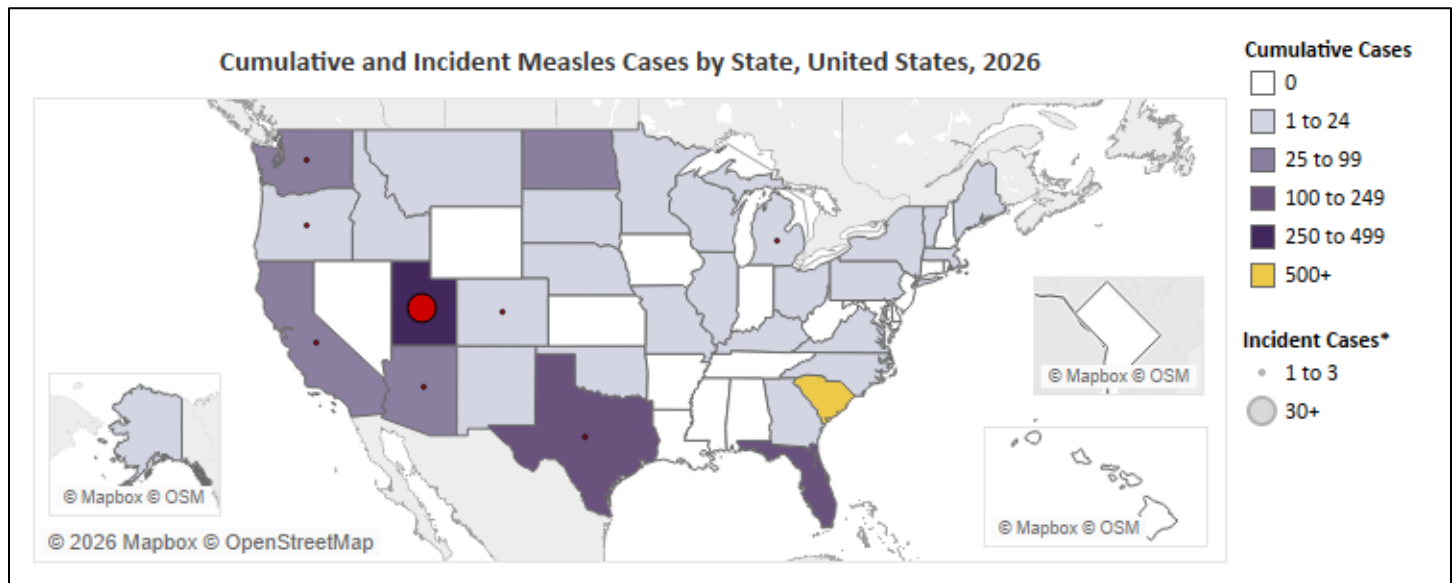


Figure Notes: Data as of April 9, 2026, and does not include cases reported among international visitors to the United States; *Change in cumulative total compared to previous update.

During 2025, confirmed cases totals were the highest observed since 1991 (9,643), with cases reported by 45 jurisdictions. There were 48 outbreaks reported – 90% of confirmed cases were outbreak associated. Those aged 5-19 years were most affected (44%), followed by those aged 20+ years (30%), 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. [Vaccination](#) offers the best protection against measles and is recommended for all international travelers. 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 \(4/10/26\)](#)

Mpox

Africa – Updated Data on Ongoing Outbreaks Affecting Multiple Countries:

According to data from the [World Health Organization \(WHO\)](#) as of April 5, 2026, there have been a total of 64,906 confirmed mpox cases and 265 deaths reported in Africa since the beginning of 2024. Since the previous update, 220 confirmed incident cases and 1 death were reported. Confirmed incident cases were reported primarily in the Democratic Republic of the Congo (DRC) (124), [Madagascar](#) (61), and Cameroon (14).

Mpox Cases and Deaths by Select Countries, Africa, 2024-2026						
Geography	Clades Detected	Confirmed Cases		Deaths		
		Cumulative	Incident†	Cumulative	Incident†	CFR*
Burundi	Ib	4,682	+0	1	+0	0.0%
DRC	Ia, Ib, IIa, and IIb	36,910	+124	78	+0	0.2%
Ghana	IIa and IIb	1,004	+0	7	+0	0.7%
Guinea	IIa and IIb	2,257	+5	6	+0	0.3%
Kenya	Ib	1,087	+0	19	+0	1.7%
Liberia	IIa and IIb	1,637	+0	8	+0	0.5%
Madagascar	Ib	741	+61	2	+1	0.3%
Sierra Leone	IIa and IIb	5,442	+0	60	+0	1.1%
Uganda	Ib	8,512	+0	52	+0	0.6%
Rest of Africa	Ia, Ib, IIa, and IIb	2,634	+30	32	+0	1.2%
Total	Ia, Ib, IIa, and IIb	64,906	+220	265	+1	0.4%

Table Notes: Data as of April 5, 2026, and includes confirmed cases only. †Change in cumulative total compared to previous update; *Case fatality rate (CFR).

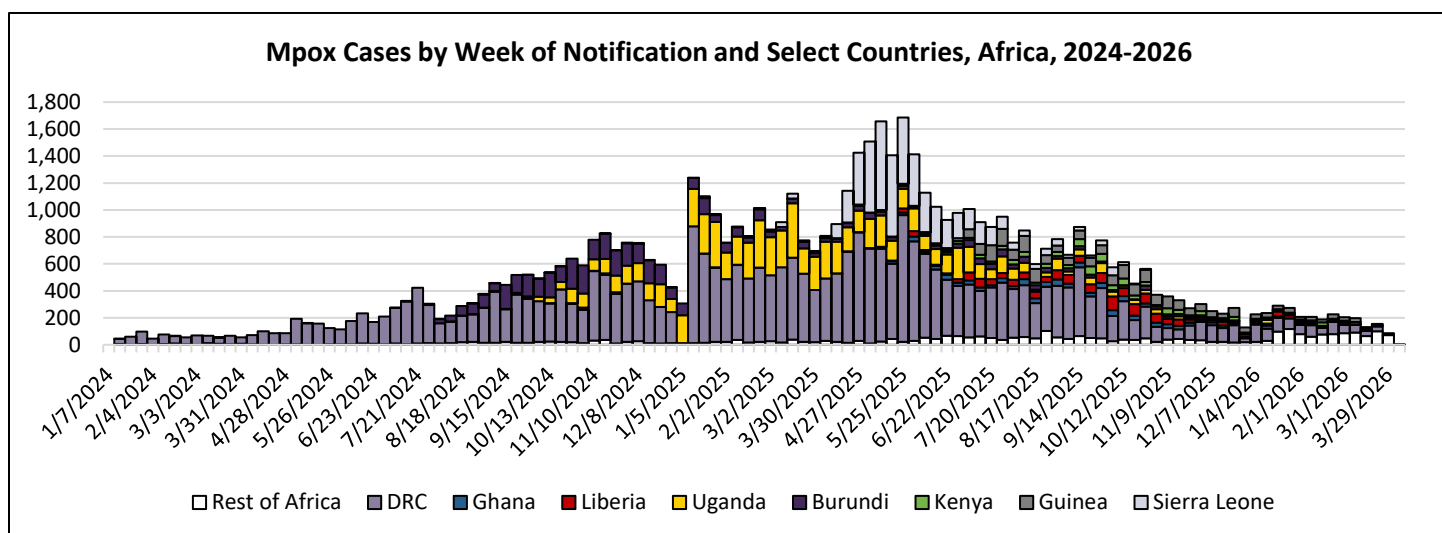


Figure Notes: Data as of April 5, 2026, and includes confirmed cases only; *4,110 confirmed cases reported in the DRC are excluded.

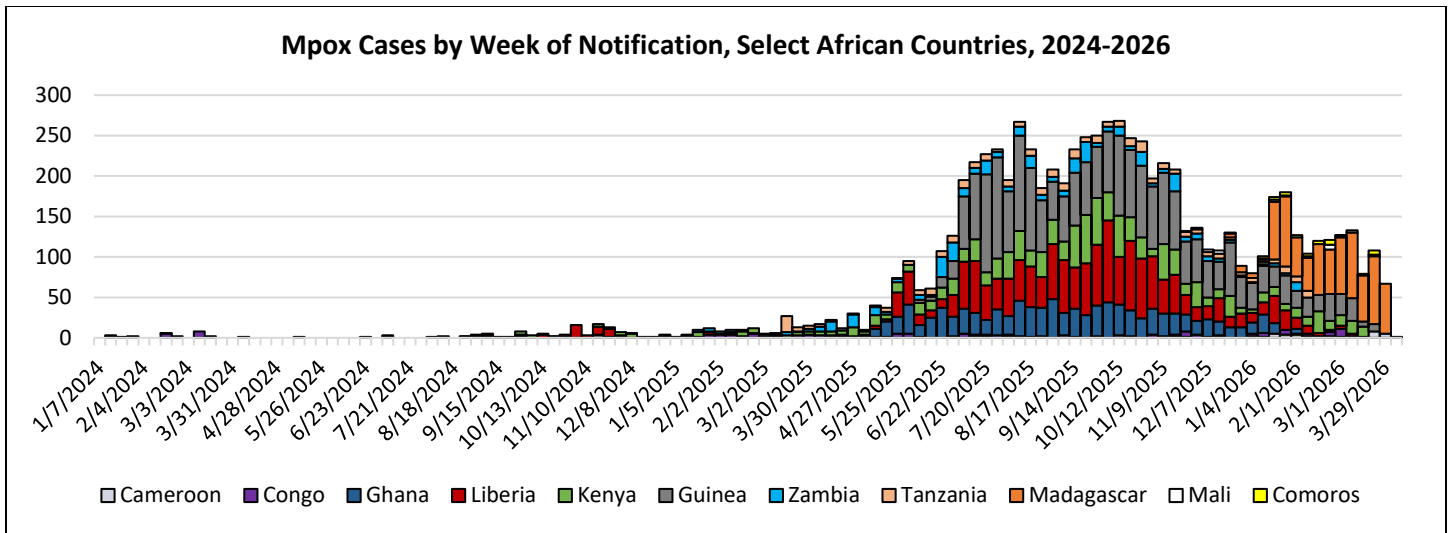


Figure Notes: Data as of April 5, 2026, and includes confirmed cases only.

Confirmed cases have been reported by 34 African countries since the beginning of 2024, primarily the 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 incidence observed, there have been 777 confirmed cases reported in the past 6 weeks by 16 countries.

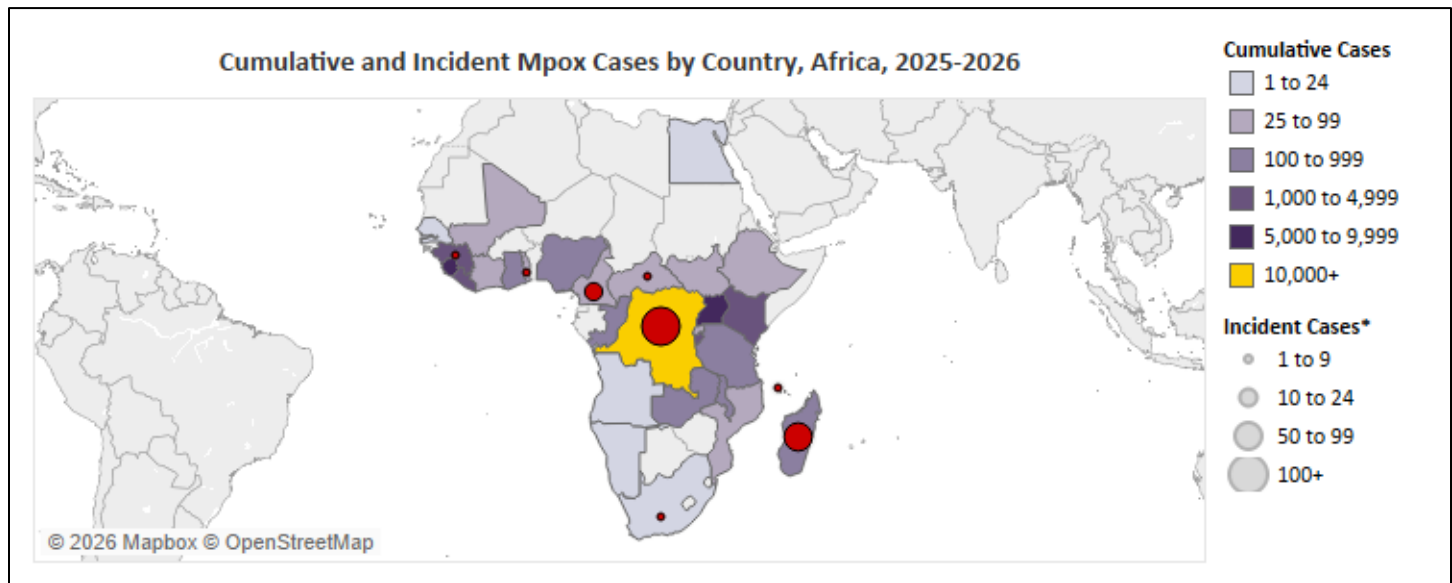


Figure Notes: Data as of April 5, 2026, and includes confirmed cases only; *Change in cumulative total compared to previous update.

Confirmed case totals in Africa since the beginning of 2025 (46,961) have more than doubled totals for 2024 (17,945), with additional countries affected. Vaccination efforts are [ongoing](#) in many affected countries. The United States CDC currently has a [Level 2 – Practice Enhanced Precautions Travel Health Notice](#) posted regarding clade II mpox in Ghana and Liberia. [Vaccination](#) is recommended for those traveling to countries with outbreaks and at risk for exposure.

Data Source: [WHO \(4/10/26\)](#)

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

According to data from the [World Health Organization \(WHO\)](#) as of April 5, 2026, there have been a total of 157 travel associated and 50 secondary clade I mpox cases reported outside of Africa since the beginning of 2024. Since the previous update, 5 incident travel associated clade Ib mpox cases were reported in Czechia (1), [Ecuador](#) (1 – mentioned in previous update), Germany (1), the Netherlands (1), and Singapore (1 – mentioned in previous update). Countries of exposure

reported among these cases include Austria (1), Belgium (1), Colombia (1). Travel history for the case reported in Singapore is under investigation while the country of exposure for the case reported in Germany is listed as Europe.

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†
157	+5	50	+0

Table Notes: Data as of April 5, 2026; †Change in cumulative total compared to previous update.

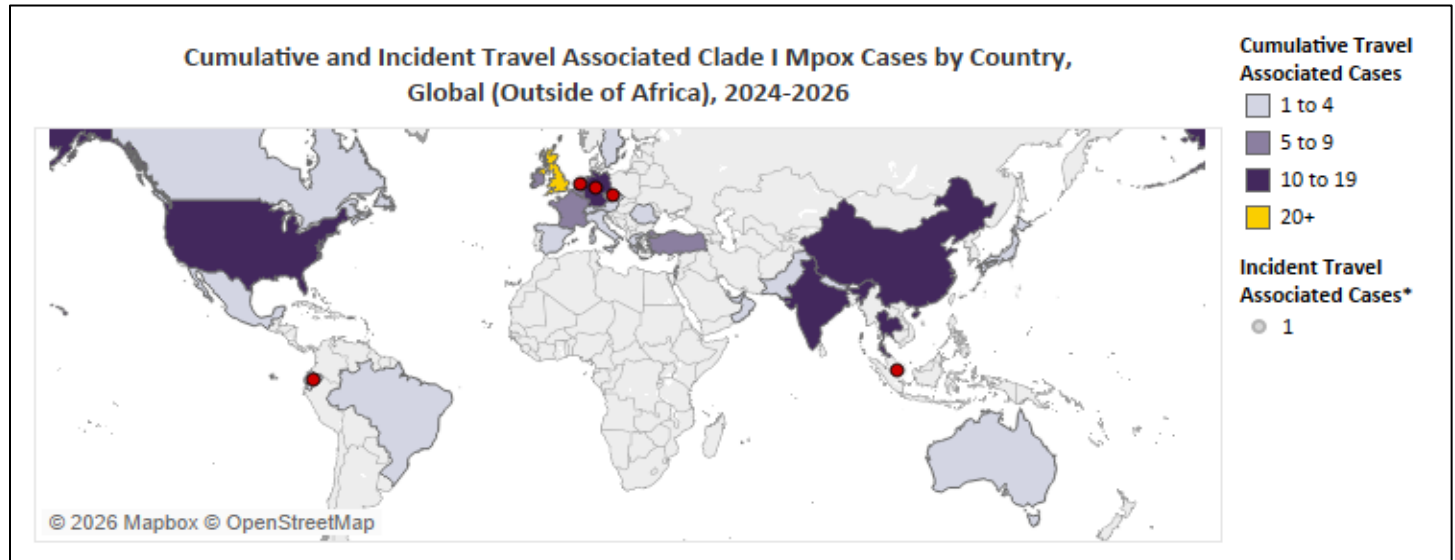


Figure Notes: Data as of April 5, 2026; *Change in cumulative total compared to previous update.

Subclade of travel associated clade I cases reported since the beginning of 2024 is distributed as follows: 149 clade Ib, 4 clade Ia, 2 clade I of unknown subclade, and 2 recombinant clade Ib/IIb. Recombinant clade Ib/IIb mpox cases have 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 clade I cases (not including secondary cases) have been reported by 34 countries outside of Africa, primarily the United Kingdom (25), [India](#) (18), [Thailand](#) (15), Germany (12), China (11), the United States (10), and France (9). Secondary cases have been reported by 13 countries outside of Africa, primarily China (20).

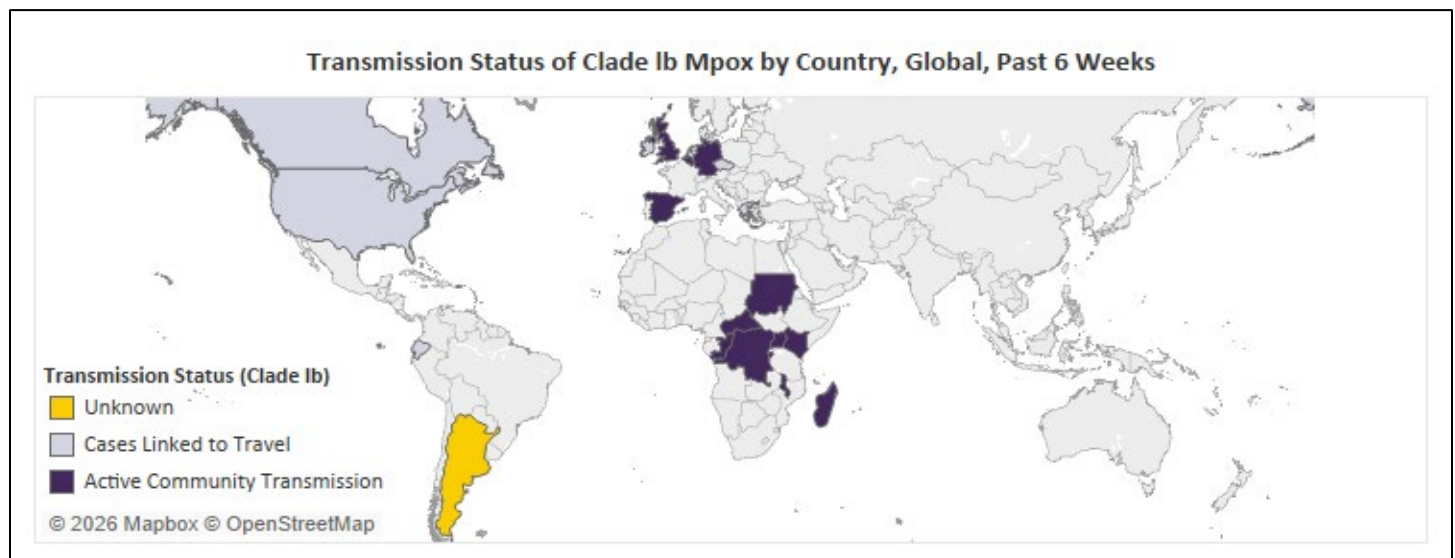


Figure Notes: Data as of April 5, 2026, and only includes countries with clade Ib cases reported in the past 6 weeks.

Since September 2025, [broader transmission of clade Ib 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-March, the number of clade I cases reported monthly in European Union (EU) and European Economic Area (EEA) countries decreased in February (60 cases) following an increase observed during January (85 cases) – 264 clade I mpox cases have been reported since August 2024. A recent communication published in [Eurosurveillance](#) highlights the rapid increase in locally acquired incident clade Ib mpox cases reported in Berlin, Germany, particularly among MSM since December of 2025. 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 those returning from the UAE, indicating likely community transmission. [Vaccination](#) is recommended for those traveling to countries with outbreaks and at risk for exposure.

Data Sources: [WHO \(4/10/26\)](#), [ECDC \(3/13/26\)](#)

New World Screwworm

Mexico – Number of Active Animal Cases Continues to Increase in Tamaulipas:

According to data from the [Secretary of Agriculture of Mexico](#) as of April 14, 2026, there have been a total of 20,795 New World screwworm (NWS) cases reported among animals in Mexico since November 2024, of which 1,295 are currently active (an increase compared to the prior week). According to data from the [Secretary of Health of Mexico](#), as of April 4, 2026, there have been a total of 238 confirmed NWS cases reported among humans since the beginning of 2025. Since the previous update, 767 incident cases among animals and 17 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†
20,795	+767	1,295	+30	238	+17

Figure Notes: Data for cases reported among animals as of April 14, 2026, and data for cases reported among humans of April 4, 2026; †Change in cumulative total compared to previous update.

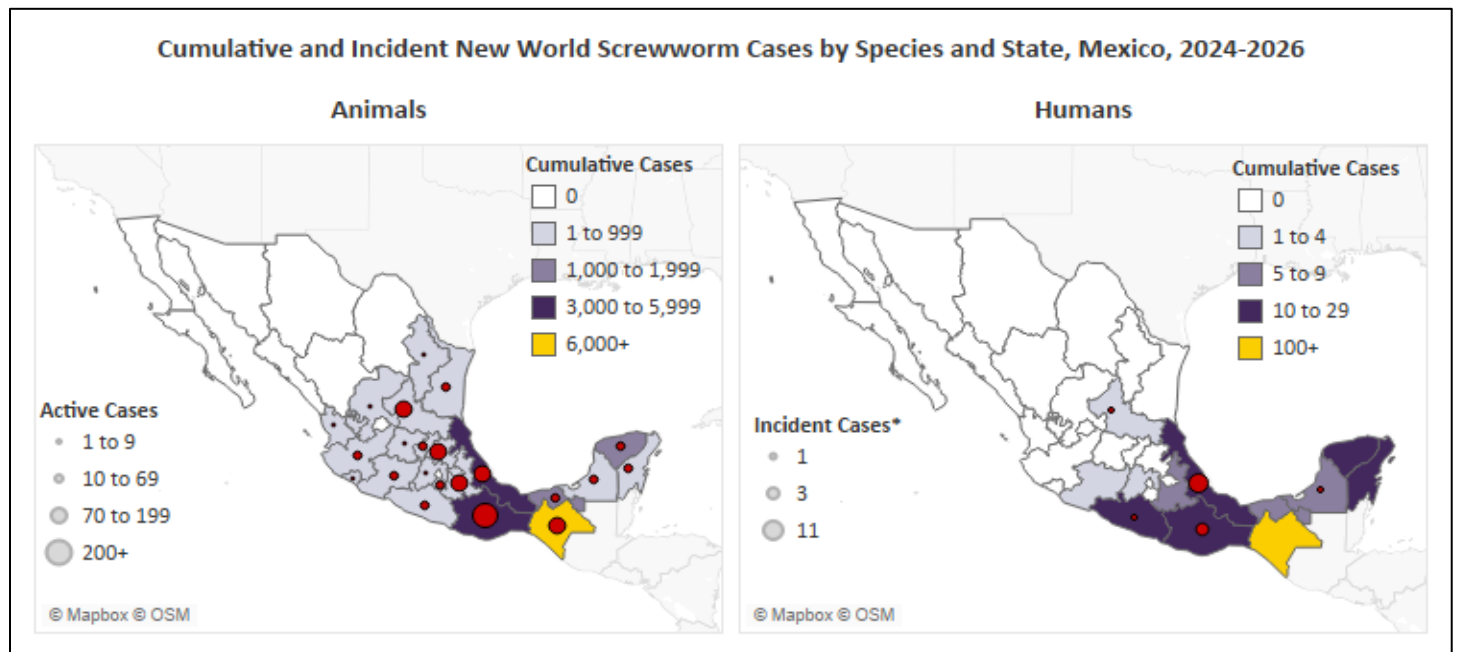


Figure Notes: Data for cases reported among animals as of April 14, 2026, and data for cases reported among humans as of April 5, 2026.

NWS cases among animals have been reported in 23 states, primarily Chiapas (6,424), Oaxaca (3,512), Veracruz (3,114), Yucatan (1,912), and Tabasco (1,217). Confirmed NWS cases among humans have been reported in 12 states, primarily

Chiapas (120), Yucatan (23), Oaxaca (21), and Veracruz (21). The current outbreak began in Panama and Costa Rica during 2023 and has since spread to all countries in Central America and Mexico. According to data from the [United States CDC](#) as of April 14, 2026, there have been almost 168,000 NWS cases reported among animals and over 1,700 NWS cases reported among humans in Central America and Mexico.

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 63 active NWS cases among animals (an increase of 18 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 \(4/14/26\)](#), [Secretary of Health \(4/13/26\)](#), [CDC \(4/14/26\)](#)

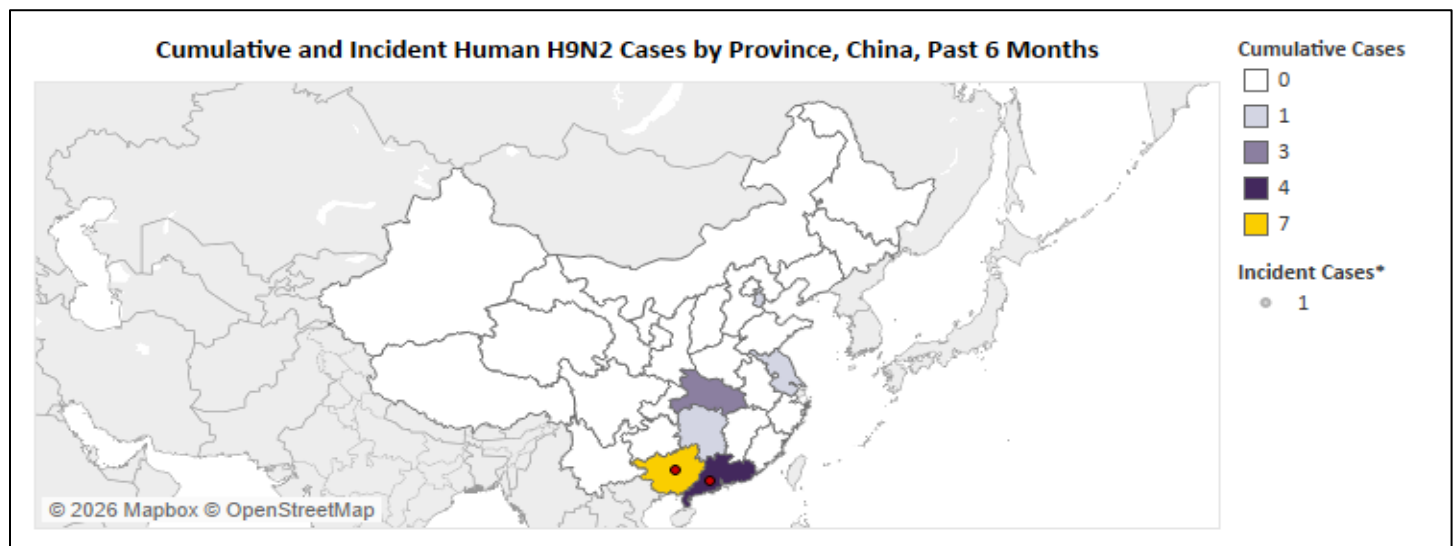
Non-Seasonal Influenza

China – Incident Cases Reported in Guangdong and Guangxi Zhuang (H9N2):

According to data from the [Hong Kong Centre for Health Protection \(HKCHP\)](#), as of April 13, 2026, there have been a total of 17 influenza A(H9N2) cases reported among humans in China during the past 6 months, none of which have been fatal. Since the previous update, 2 incident human H9N2 cases were reported in Guangdong Province (1) and the Guangxi Zhuang Autonomous Region (1). Both cases were hospitalized, recovered from infection, and have been discharged.

Human H9N2 Cases and Deaths, China, Past 6 Months				
Confirmed Cases		Deaths		
Cumulative	Incident†	Cumulative	Incident†	CFR*
17	+2	0	+0	0.0%

Table Notes: Data as of April 14, 2025; †Change in cumulative total compared to previous update; Past 6 months refers to date of reporting rather than date of symptom onset.



*Figure Notes: Data as of April 13, 2025; Past 6 months refers to date of reporting rather than date of symptom onset; *Change in cumulative total compared to previous update.*

The incident H9N2 cases were reported among a 3-year-old male in Guangdong Province and a 63-year-old male in the Guangxi Zhuang Autonomous Region with symptom onsets in January 2026 and February 2026, respectively. According to [World Health Organization \(WHO\)](#), the case in Guangdong province had no direct contact with live poultry but may have been exposed indirectly through a family member working at poultry farm, and the case from Guangxi Zhuang Autonomous Region was directly exposed to sick poultry prior to illness onset. In the past 6 months, cases have been

reported by 6 provinces/regions/municipalities: Guangxi Zhuang (7), Guangdong (4), Hubei (3), Hunan (1), Jiangsu (1), and Tianjin (1). According to data from the [WHO](#), as of April 9, 2025, there have been a total of 156 human H9N2 cases reported in China since December 2015.

Data Sources: [HKCHP \(4/14/26\)](#), [WHO \(4/10/26\)](#)

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

According to data from the [United States Department of Agriculture \(USDA\)](#) as of April 14, 2026, there have been a total of 2,197 confirmed highly pathogenic avian influenza (HPAI) detections reported among poultry flocks in the United States since February 8, 2022. Since the previous update, 6 new detections were reported. In the past 30 days, a total of 41 confirmed HPAI detections have been reported (a decrease compared to the previous update) affecting 1.6 million birds. According to data from the [USDA](#), as of April 13, 2026, there have been a total of 1,095 confirmed HPAI detections reported among livestock in the United States since March 25, 2024. Since the previous update, 5 new detections were reported in [Idaho](#). New HPAI detections among livestock have not been reported since December 2025 in Wisconsin.

HPAI Detections Among Animals, United States, Past 30 Days						
Poultry Flocks		Livestock Herds*			Wild Birds	Mammals
Commercial	Backyard	Dairy Cattle	Swine	Alpacas		
27	14	5	0	0	216	30

*Table Notes: Data as of April 14, 2026, for poultry flocks and April 13, 2026, for livestock; Number of detections reported in the past 30 days are based on date of detection/confirmation rather than sample collection; *New HPAI detections among previously unaffected herds only.*

In the past 30 days, HPAI has been detected among poultry flocks in 13 states, primarily [Indiana](#) (23), South Dakota (6), and Pennsylvania (3). Detections increased during 2025 from September (29) to November (96) before decreasing slightly in December (82). During 2026, detections increased slightly from January (62) to March (75) and there have been 11 detections reported so far in April. Somewhat similar trends have been observed during recent years in the [United States](#). In January, the New York State (NYS) 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. As of March 31, 2026, there have been 80 poultry flock detections reported in [NYS](#) – the most recent detection was confirmed on March 31 in Bronx County.

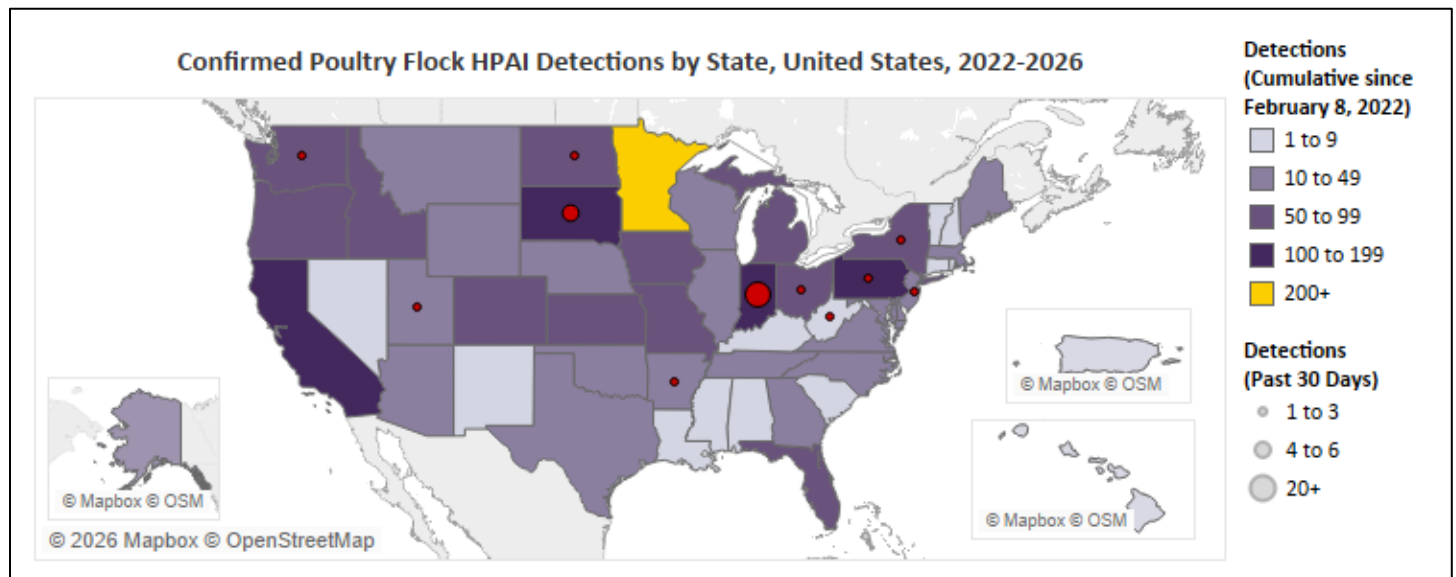


Figure Notes: Data as of April 14, 2026.

According to data from the [United States CDC](#), as of March 6, 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 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](#). Since [2022](#), 21 countries in the Americas have reported over 5,700 H5N1 outbreaks in diverse bird and animal species, and 5 countries have reported a cumulative total of 75 human H5N1 cases, including 2 deaths (both caused by the [D1.1 strain](#) that [emerged](#) and spread rapidly in North America during the 2024 wild bird migration season).

Data Sources: [USDA \(4/15/26\)](#), [USDA \(4/13/26\)](#), [CDC \(3/6/26\)](#)

Pertussis

United States – Outbreak Linked to Childcare Setting Reported in Guam:

According to provisional data from the [United States CDC](#) as of April 11, there have been a total of 3,245 pertussis cases reported among United States residents and residents of United States Territories during 2026. Since the previous update, 222 incident cases were reported, of which 68 reported symptom onset during the most recent epidemiological week, an 18% decrease compared to the prior week. According to the [Pan American Health Organization \(PAHO\)](#), those aged 1-6 years (29%) and 11-19 years (23%) have been most affected through mid-March. Additionally, there has been [1 death](#) from pertussis reported during 2026. Case totals for 2026 at this time are about 70% lower compared to 2025.

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	76	188	0.4
Middle Atlantic	9	300	689	0.4
East North Central	8	456	1,851	0.2
West North Central	3	101	1,269	0.1
South Atlantic	12	409	1,156	0.4
East South Central	8	303	811	0.4
West South Central	3	276	1,333	0.2
Mountain	5	475	1,416	0.3
Pacific	17	828	2,353	0.4
United States Territories	2	21	56	0.4
Total	+68	3,245	11,122	0.3

Table Notes: Data as of April 11, 2026; Case counts are provisional and subject to change; New York State is included in the Middle Atlantic.

During 2026, cases have been reported by 44 jurisdictions, primarily California (404), Washington (214), Ohio (196), Florida (195), New York (185), Texas (183), Oregon (159), Colorado (140), Tennessee (120), and Pennsylvania (101). On April 10, 2026, the [Department of Public Health and Social Services \(DPHSS\)](#) in Guam reported a pertussis outbreak linked to a childcare setting, confirming the first pertussis outbreak in the United States Territory since [2015](#).

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. From 2016-2019, an average of 17,793 cases were reported annually. From 2020-2023, an average of 4,587 cases were reported annually. According to provisional CDC reports for 2024-2025, among United States residents and residents of United States Territories, there were 35,435 cases and 10 deaths (6 among those aged <1 year) reported during [2024](#), and 28,783 cases and 16 deaths (10 among those aged <1 year) reported during [2025](#). [Vaccination](#) is the best way to protect against pertussis. On March 25, 2026, the [PAHO](#) published an epidemiological update regarding pertussis in the Americas, noting a moderate decline in reported cases during 2025, and reiterating the importance of increasing vaccination coverage and strengthening diagnostic and surveillance systems.

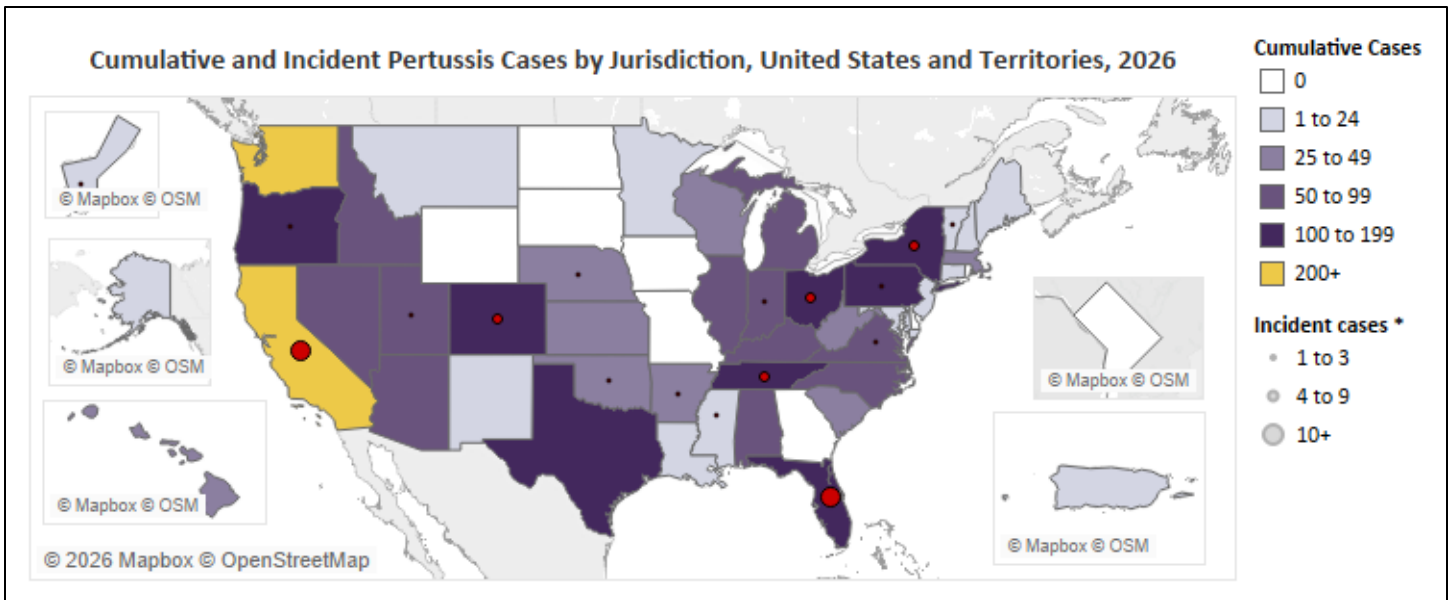


Figure Notes: Data as of April 11, 2026; New York State and New York City are combined in figure; The United States Virgin Islands, American Samoa, and the Commonwealth of Northern Marina Islands did not report any cases during 2025-2026 and are not included in figure; *Incident cases reported symptom onset during the most recent epidemiological week.

Data Sources: [CDC \(4/15/26\)](#), [CDC \(12/2/25\)](#), [PAHO \(3/25/26\)](#)

Polio

Global – First AFP Cases of 2026 Caused by cVDPV1 Reported in South Sudan:

According to data from the [Global Polio Eradication Initiative \(GPEI\)](#) as of April 13, there have been 4 acute flaccid paralysis (AFP) cases caused by wild poliovirus type 1 (WPV1), 2 AFP cases caused by circulating vaccine-derived poliovirus type 1 (cVDPV1), 22 AFP cases caused by circulating vaccine-derived poliovirus type 2 (cVDPV2), and 2 AFP cases caused by circulating vaccine-derived poliovirus type 3 (cVDPV3) reported this year with onset of paralysis during 2026. Since the previous update, 2 Incident AFP cases caused by WPV1 were reported in [Afghanistan](#) and 2 incident AFP cases caused by cVDPV1 were reported for the first time this year in South Sudan (2).

Acute Flaccid Paralysis (AFP) Cases by Causal Agent, Global, 2026							
WPV1		cVDPV1		cVDPV2		cVDPV3	
Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†	Cumulative	Incident†
4	+2	2	+2	22	+0	2	+0

Table Notes: Data as of April 13, 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 8 countries: Afghanistan (3 – WPV1), Angola (1 – cVDPV2), the Democratic Republic of the Congo (DRC) (3 – cVDPV2), Nigeria (13 – cVDPV2; 2 – cVDPV3), [Pakistan](#) (1 – WPV1), Somalia (3 – cVDPV2), South Sudan (2 – cVDPV1), and [Togo](#) (2 – cVDPV2). Among countries without any reported AFP cases, environmental detections from samples collected during 2026 have been reported by Algeria (2 – cVDPV2), Chad (1 – cVDPV2), Malawi (3 – cVDPV2), [Namibia](#) (4 – cVDPV2), Sudan (2 – cVDPV2), and the [United Kingdom](#) (2 – 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. [Vaccination](#) is the best way to protect against polio. A total of 52 AFP cases caused by WPV1, 3 AFP cases caused by cVDPV1, 221 AFP cases caused by cVDPV2, and 13 AFP cases caused by cVDPV3, have been reported with onset of paralysis during 2025.

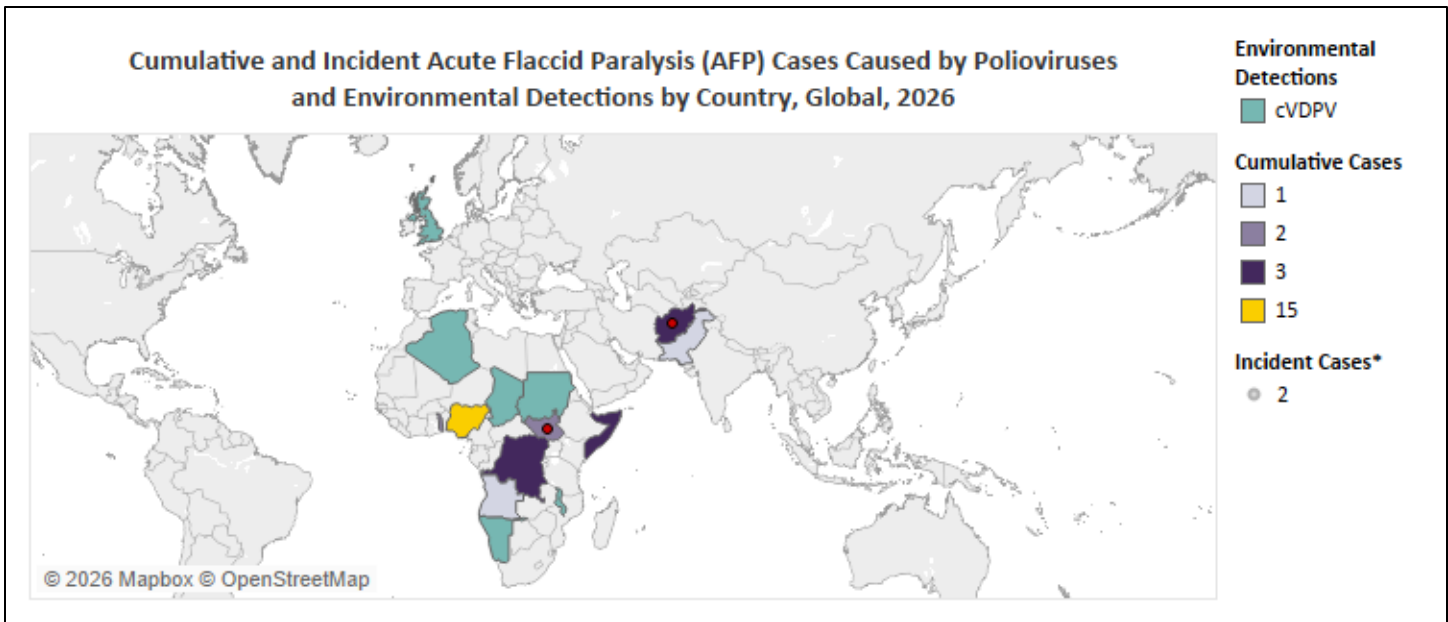


Figure Notes: Data as of April 13, 2026, and only includes AFP cases with onset of paralysis or environmental detection collected during 2026; *Change in cumulative total compared to previous update.

Data Sources: [GPEI - WPV \(4/13/26\)](#), [GPEI - cVDPV \(4/13/26\)](#)

Yellow Fever

The Americas – Incident Cases and Deaths Reported in Multiple Countries:

According to data from the [Pan American Health Organization \(PAHO\)](#) as of April 14, there have been a total of 48 confirmed yellow fever cases and 21 deaths reported in the Americas during 2026. Since the previous update, 5 confirmed incident cases and 2 deaths were reported in [Bolivia](#) (1 case, 1 death), [Colombia](#) (2 cases), and [Peru](#) (2 cases, 1 death).

Yellow Fever Cases and Deaths, the Americas, 2026				
Confirmed Cases		Deaths		
Cumulative	Incident†	Cumulative	Incident†	CFR*
48	+5	21	+2	43.8%

Table Notes: Data as of April 14, 2026; †Change in cumulative total compared to previous update; *Case fatality rate (CFR).

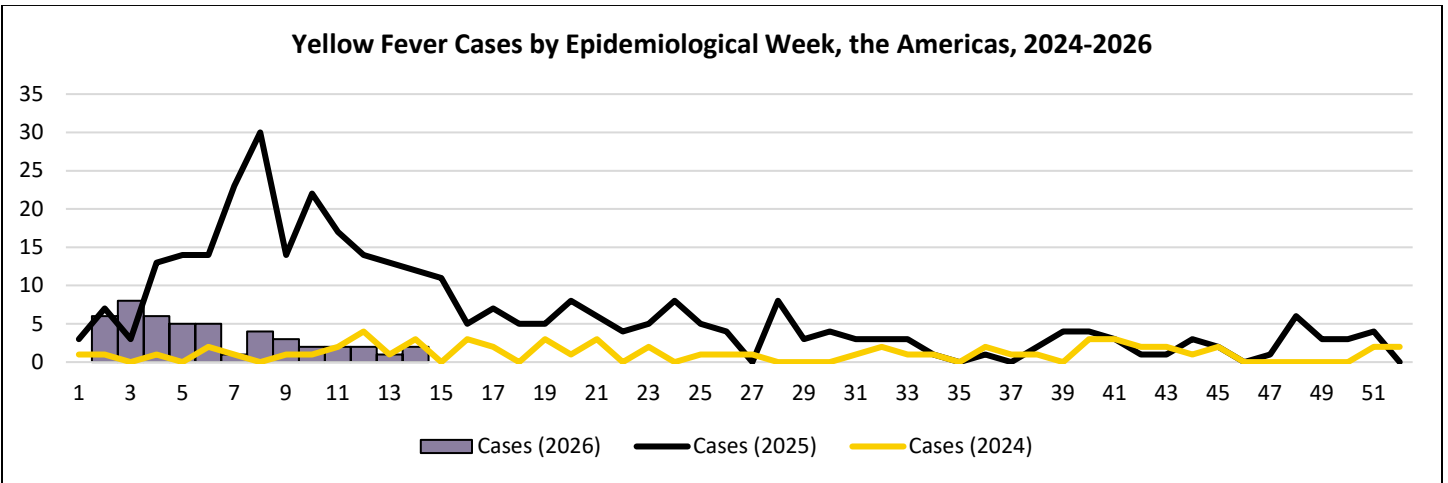


Figure Notes: Data as of April 14, 2026; Several cases reported by Colombia (7), Ecuador (4), and Brazil (1) during 2025-2026 missing from figure.

During 2026, confirmed cases have been reported by [Colombia](#) (35), [Venezuela](#) (6), Peru (4), Bolivia (2), and Brazil (1). Tolima, Colombia, has been particularly affected, accounting for all cases reported in Colombia and 76% of deaths reported in the Americas during 2026. According to [PAHO epidemiological alert](#) published in March, yellow fever cases have been reported in areas with no history of transmission since September 2024, including areas outside the Amazon region. Based on recent regional trends observed during the end of 2025 and the beginning of 2026, [Venezuela](#) recently initiated a vaccination campaign focusing on several states previously considered low risk for infection and individuals never vaccinated against yellow fever. Despite not reporting any human cases, the [Trinidad and Tobago Ministry of Health](#) recently detected yellow fever in a deceased red howler monkey, confirming presence of the virus and sylvatic transmission in the country.



Figure Notes: Data as of April 14, 2026; *Change in cumulative total compared to previous update.

The United States CDC currently has Level 2 – Practice Enhanced Precautions Travel Health Notices posted regarding yellow fever in [Colombia](#) and [Venezuela](#). [Vaccination](#) is recommended for those aged ≥ 9 months that are traveling to or living in areas at risk for yellow fever. A total of 346 confirmed yellow fever cases and 148 deaths (CFR: 42.8%) were reported by 7 countries in the Americas during 2025: Brazil (120 cases, 48 deaths), Colombia (125 cases, 51 deaths – a [5-fold increase](#) compared to 2024), Peru (49 cases, 19 deaths), Venezuela (32 cases, 19 deaths), Ecuador (11 cases, 8 deaths), Bolivia (8 cases, 2 deaths), and Guyana (1 fatal case) – a [5.6-fold increase](#) compared to 2024 for the region.

Data Source: [PAHO \(4/14/26\)](#)

Other Outbreaks, News, and Events

Other Outbreaks (2026):

Chikungunya

- Seychelles – Over 110 Travel Associated Cases Reported in EU/EEA Countries ([March 19](#))
- 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

- Africa – WHO Publishes Rapid Risk Assessment Regarding Regional Trends ([March 26](#))
- 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](#))

Ebola (Suspected)

- Democratic Republic of the Congo – Suspected Cases and Deaths Reported ([March 12](#))

Escherichia Coli

- United States – Voluntary Recall of Affected Products Issued by Raw Farm, LLC ([April 9](#))

Marburg

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

Measles

- Bangladesh – Almost 150 Deaths Reported in Outbreak Affecting all Divisions ([April 9](#))
- Guatemala – Over 3,500 Cases Reported in Nationwide Outbreak ([April 2](#))
- Global – WHO Provides Update on Global Case Counts and Incidence Rates ([March 19](#))
- Europe – Measles Transmission Re-Established in Several Countries ([February 5](#))

Meningococcal Disease

- Democratic Republic of the Congo – US CDC Issues Level 2 Travel Health Notice ([March 26](#))
- United Kingdom – Incident Case Reported Among Traveler Returning to France ([March 26](#))

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

- Taiwan – Additional Information on First Locally Acquired Human Case (H7N7) ([April 9](#))
- Cambodia – Incident Human Case Reported in Oddar Meanchey Province (H5N1) ([April 2](#))
- Italy – First Human Case in Europe Reported Among Traveler (H9N2) ([March 26](#))
- Spain – Catalonia Reports Confirmed Variant Influenza A Virus Case (H1N1v) ([March 5](#))
- 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](#))

Seasonal Influenza

- United States – ILI Activity Continues to Decrease Below National Baseline ([April 9](#))

Other Active CDC Travel Health Notices:

- [Chikungunya in Seychelles - 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](#)
- [Diphtheria in Nigeria - Level 2 - Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC](#)
- [Meningococcal Disease in the Democratic Republic of the Congo - 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 Morocco - 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](#)
- [East African Sleeping Sickness in Zambia and Zimbabwe - 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](#)
- [A Strain of Multidrug-Resistant Salmonella Newport in Mexico - 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](#)

Other Global Health News and Events:

- [Measles Rubella bi-Weekly Bulletin \(11-12\) - 28 March 2026 - World | ReliefWeb](#)
- [Malaria transmission in Mashonaland West Province, Zimbabwe, with 5087 cases and 20 deaths reported since the start of 2026 - BEACON](#)
- [Epidemic and emerging disease alerts in the Pacific as of 14 April 2026 - World | ReliefWeb](#)
- [Second human case of Crimean-Congo hemorrhagic fever in 2026 reported in Senegal from Fatick Region - BEACON](#)
- [Mpox Can Infect and Replicate in the Brain, NIH Researchers Say in Fatal HIV Case | The Transmission | University of Nebraska Medical Center](#)
- [Study highlights long-term neurologic impacts of Nipah infection | CIDRAP](#)
- [First confirmed case of sexually transmitted ringworm \(Trichophyton mentagrophytes genotype VII\) infection in King County, Washington, USA, amid ongoing geographic expansion - BEACON](#)
- [Measles outbreak declared in seven districts of South Sulawesi, Indonesia, with 169 pediatric cases confirmed - BEACON](#)
- [Burundi investigates illness that has caused five deaths | WHO | Regional Office for Africa](#)
- [RSV tied to high complication, death rates in hospitalized older adults | CIDRAP](#)
- [Global Respiratory Virus Activity: Weekly Update N° 573 | WHO](#)
- [Confirmed Salmonella cases linked to a restaurant in Hamilton, Ontario, Canada, with nine cases and seven hospitalizations - BEACON](#)
- [WOAH statement and FAO alert: Transboundary spread of foot and mouth disease \(FMD\) serotype SAT1 beyond endemic range into Europe, Asia, and Middle East - BEACON](#)
- [Avian Influenza A\(H9N2\) - Italy](#)
- [Follow-up on suspected viral encephalitis cases in Salumber District, Rajasthan, India: Negative test results for Japanese encephalitis and Chandipura virus; additional pediatric deaths in neighboring Pratappgarh District - BEACON](#)
- [Rabies deaths reach a five-year high amid surge in stray-dog attacks in Kerala, India - BEACON](#)
- [Benue State strengthens Lassa fever response with WHO and partners' support, as focus shifts to protecting frontline workers - Nigeria | ReliefWeb](#)
- [Update on Lassa fever in Nigeria: 170 deaths reported and case fatality rate increasing to 25% amid declining weekly confirmed cases - BEACON](#)
- [Request for information \(RFI\): 8769 chickenpox cases reported in Rohingya refugee camps in Cox's Bazar, Bangladesh, during the first three months of 2026 - BEACON](#)
- [New mutations help the H5N1 bird flu virus infect cows but not people | The Transmission | University of Nebraska Medical Center](#)
- [109 measles cases reported in Tokyo, Japan, amid a national total of 236, the fastest rise since 2008 - BEACON](#)

- [Dengue Epidemiological Situation in the Region of the Americas - Epidemiological Week 11, 2026 - World | ReliefWeb](#)
- [Dengue Cases Spike in New Caledonia — Vax-Before-Travel](#)
- [Dengue Remains a Global Health Risk — Vax-Before-Travel](#)
- [Dengue outbreak declared in Tonga, with community transmission across three island groups - BEACON](#)
- [Italy recorded 113 travel-related dengue cases from January through March 2026, nearly double the number seen in the first five months of 2025, with 83% of infections acquired in the Maldives - BEACON](#)
- [Increase in cases of invasive meningococcal disease in Viet Nam, with 24 infections and four deaths reported - BEACON](#)
- [Trump nominates Erica Schwartz, former deputy surgeon general, to head CDC | CIDRAP](#)
- [Early Release - Highly Pathogenic Avian Influenza A\(H5N1\) Virus RNA in Bovine Semen, California, USA, 2024 - Volume 32, Number 5—May 2026 - Emerging Infectious Diseases journal - CDC](#)
- [Middle East Escalation of Conflict, Global external situation report #4 - 16 April 2026](#)