

PAHO urges countries to step up efforts to stop measles outbreaks and move towards elimination in the Americas

The Region's measles resurgence has resulted in Bolivia, Mexico and the United States losing their measles elimination status, underscoring the urgent need to close vaccination gaps and strengthen surveillance and outbreak response.

Washington, DC, 17 November, 2026 (PAHO) – The Pan American Health Organization (PAHO) today called on countries across the Americas to intensify efforts to stop measles transmission, close vaccination gaps, and put the Region back on track towards elimination, as outbreaks continue to spread in several parts of the Americas.

The call follows the 10–13 November meeting of the Measles, Rubella and Congenital Rubella Syndrome Elimination Regional Monitoring and Re-Verification Commission (RVC), which reviewed the latest epidemiological situation across the Region. Following the Commission's assessment and recommendations, which were accepted by PAHO Director Dr. Jarbas Barbosa, endemic measles transmission was determined to have been re-established in Bolivia, Mexico, and the United States. All three countries have therefore lost their measles elimination status.

Under the Commission's criteria, endemic transmission is considered re-established when the same measles virus genotype and lineage circulate uninterrupted for 12 months or more in a country.

"Losing measles elimination status is much more than losing a public health designation. It means the virus has circulated for a prolonged period, putting families and communities at risk of preventable illness, hospitalization and death," said Dr. Barbosa.

The Region of the Americas, the first in the world to eliminate measles, regained its elimination status in 2024 after successfully interrupting endemic transmission in Venezuela and Brazil. However, the loss of regional status in

November 2025, following sustained transmission in Canada, was a major setback. The subsequent loss of elimination status by Bolivia, Mexico and the United States marks a further deterioration in the regional situation and makes the path towards restoring elimination more challenging.

“This is a serious warning for our Region, but it is not an irreversible setback,” added the PAHO Director. “We know how to prevent measles, and we know how to stop its transmission. With sustained commitment to vaccination, strong surveillance and effective outbreak response, the Americas can eliminate measles transmission once again.”

Current situation

As of 13 November 2026, the Region has reported 58,213 confirmed measles cases and 82 deaths, compared with 12,806 cases during the same period last year.

Bolivia, Mexico and the United States have lost their status after the same measles virus lineage circulated uninterrupted for 12 months or more. All three countries are implementing measures to strengthen vaccination, surveillance and outbreak response. Meanwhile, Canada has interrupted the chain of transmission associated with the outbreak that led to its loss of status and is working to regain elimination status.

Measles is one of the most contagious diseases in the world: one infected person can transmit the virus to as many as 18 susceptible individuals. It can cause serious complications, including pneumonia, encephalitis and blindness, and can lead to death. Infection can also weaken the immune system for months afterwards.

The resurgence of measles across the Region reflects persistent gaps in population immunity, often concentrated in particular communities and geographic areas. National vaccination figures can mask these disparities, while barriers to health services, missed vaccinations, misinformation and vaccine hesitancy leave children, adolescents and adults vulnerable to infection.

Measles is resurging globally amid persistent gaps in vaccination coverage, and several other countries in the Americas are also experiencing prolonged outbreaks. “This situation requires urgent action,” said the PAHO Director. “Continued transmission anywhere increases the risk of the virus reaching people who cannot be vaccinated and communities where immunity gaps persist.”

Protecting those who cannot be vaccinated for medical reasons, as well as babies who are too young to receive the vaccine, depends on ensuring that the people around them are protected.

PAHO’s response and RVC recommendations

PAHO is working with countries to interrupt measles transmission through vaccination campaigns, stronger epidemiological and laboratory surveillance, rapid-response teams and support for outbreak investigation and containment.

The RVC has recommended that countries prioritize the following actions to strengthen their efforts to interrupt transmission:

- **Assess risks and close immunity gaps:** Use PAHO’s risk assessment tool to identify high-risk municipalities and populations, prioritizing the most vulnerable.
- **Strengthen active case finding:** Conduct active searches in health facilities, communities and laboratories every three months, and systematically document the results.
- **Improve classification of suspected vaccine reactions:** Apply PAHO criteria, including the timing of rash onset following vaccination, and genotype PCR-positive cases to identify vaccine strains.
- **Adapt responses to the epidemiological situation:** Use PAHO’s July 2026 Measles Preparedness and Response Matrix to guide vaccination, surveillance and laboratory activities, documenting any changes.
- **Protect health workers:** Verify vaccination status, enforce institutional immunization policies and implement airborne isolation protocols.
- **Ensure timely resources:** Equip field teams, remove operational barriers and coordinate government support to enable rapid outbreak response.

Sustaining at least 95% coverage with both doses of the measles vaccine in every community remains essential to closing immunity gaps and preventing further transmission. National averages can mask pockets of low coverage, making it critical to reach every community, particularly those most vulnerable to outbreaks.

The path back to elimination

The Americas has faced this challenge before. After endemic transmission was re-established in Venezuela and Brazil in 2018 and 2019, respectively, countries worked together to interrupt transmission, and the Region regained its measles elimination status in 2024.

”Elimination is not a trophy that we win once and put on a shelf. It must be protected every day by closing immunity gaps and ensuring that every community is reached,” underscored Dr. Barbosa.

Achieving and sustaining at least 95% coverage with both doses of the measles vaccine in every community, backed by strong surveillance and effective outbreak response, remains the path towards measles elimination.

"PAHO will continue working with every country toward that goal. We know what works. We have done it before. And with sustained commitment and action, the Americas can eliminate measles transmission once again."

Links

Measles in the Americas: Questions and Answers - Technical Reference for journalists and the public

Situation Report - Measles in the Americas (6 November)

Epidemiological situation of measles in the Americas

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The Pan American Health Organization (PAHO) works with the countries of the Americas to improve the health and quality of life of its population. Founded in 1902, it is the world's oldest international public health agency. It serves as the Regional Office of WHO for the Americas and is the specialized health agency of the Inter-American system (OAS).

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