

**MEASLES WEEKLY SITUATION REPORT FOR SOUTH AFRICA**  
Report for week ending 01 August 2025, epidemiological week 31  
Compiled by the Centre for Vaccines and Immunology,  
National Institute for Communicable Diseases

**Background and Methods**

The NICD is a member of the WHO Global Measles Reference Laboratory Network and provides quality-assured measles serology and PCR testing on samples submitted from public and private sector hospitals. Clinicians are requested to submit a blood sample together with a throat swab or urine sample, together with a completed case investigation form, to the NICD from all patients presenting with fever, macular-papular rash and one of the three ‘c’s – cough, coryza and conjunctivitis. The case definition and case investigation form may be found on the NICD website at <https://www.nicd.ac.za/diseases-a-z-index/measles/>. Clinical and wastewater surveillance results for measles may be found on the measles-rubella dashboard at <https://www.nicd.ac.za/measles-rubella-dashboard/>

**Summarised surveillance findings**

From week 1 to week 31 of 2025, national measles surveillance has detected 590 laboratory-confirmed measles cases (Figure 1). In the past five weeks, epi-week 27 to epi-week 31, 190 laboratory-confirmed cases were reported, 121 cases in Gauteng province, 35 in the Free State province, and 9 in Mpumalanga province. Whereas, the other measles cases were reported in the remaining provinces, except the Eastern Cape province, which reported zero laboratory-confirmed measles cases. Measles cases are increasing in Mpumalanga province, where nine cases were detected between epidemiological weeks 27 and 31, 8 in the Nkangala district and 1 in the Gert Sibande district. The reported measles infections were mainly in children aged 1-14 years, which was similar across the provinces (Table 1).

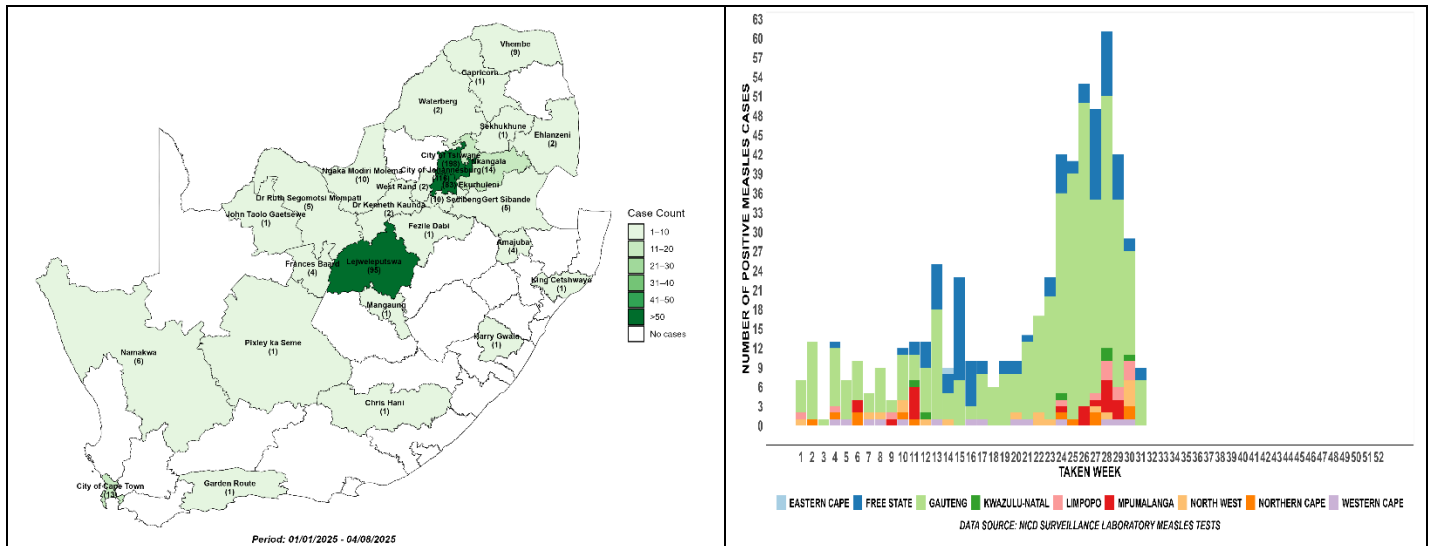


Figure 1: Laboratory-confirmed measles cases from epidemiological week 1 to 31 of 2025 in South Africa.

## Update on the measles outbreak in South Africa

### Gauteng province measles outbreak update

Gauteng province continues to report a high number, with 409 laboratory-confirmed cases reported from epi-week 1 to 31 of 2025 (Figure 2). The majority of the laboratory-confirmed cases were reported in the metropolitan areas with the distribution of cases as follow: City of Johannesburg (116), City of Tshwane (198), Ekurhuleni (83), Sedibeng (10), and West Rand (2). The reported measles cases in epi-week 27 and epi-week 31 were reported from the City of Johannesburg, City of Tshwane, Ekurhuleni and Sedibeng. Wastewater detection continues to provide evidence of ongoing excretion and therefore, transmission in these same districts (Figure 3). Gauteng province is continuing with supplementary measles immunisation activities to reduce the transmission of the measles virus. Measles IgM positive should be followed to monitor if they do not have severe measles complications, and be referred to healthcare facilities for further clinical management.

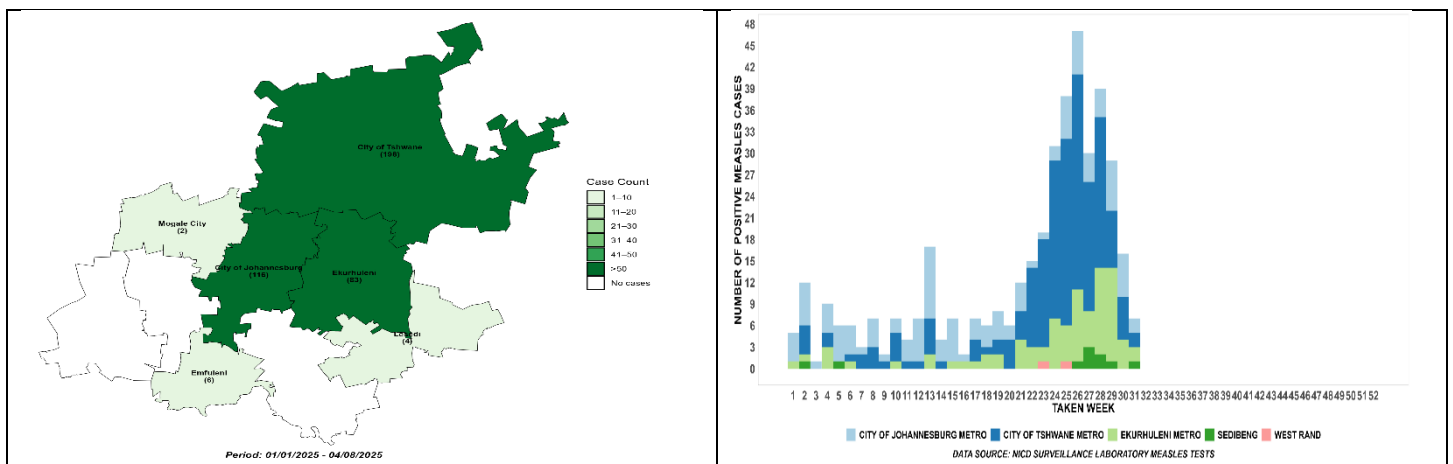


Figure 2: Laboratory-confirmed measles cases from epidemiological week 1 to 31 of 2025 in Gauteng province.

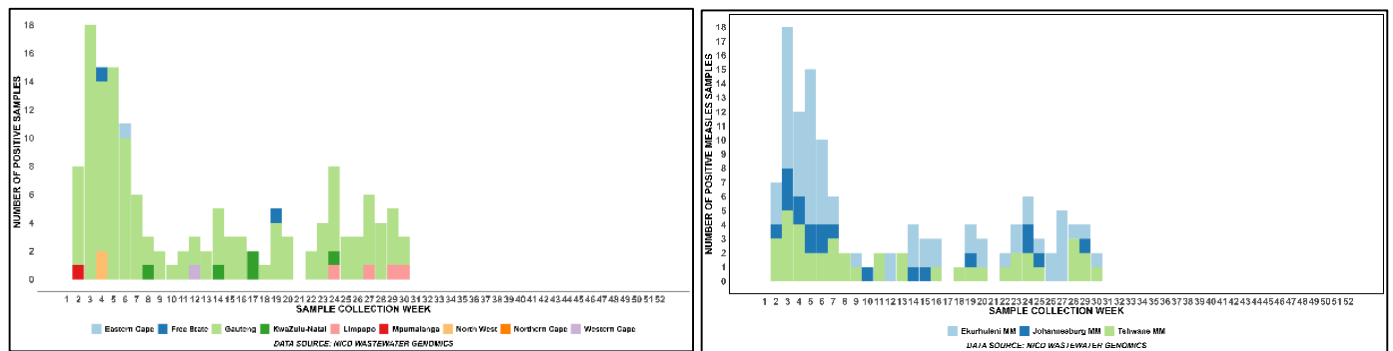


Figure 3: Number of wastewater samples positive for measles from epidemiological week 1 to 30 of 2025 in South Africa (left) and Gauteng Province (right).

### Free State province measles outbreak update

Free State province continues to report laboratory-confirmed measles cases reported with 97 cases from epi-week 1 to 31 of 2025 (Figure 4). The majority of the laboratory-confirmed cases were reported in the Lejweleputswa district, which reported 95 cases, and 35 cases were reported from epidemiological weeks 27 to 31. The measles cases in Lejweleputswa district were decreasing after



surveillance in Gauteng sentinel sites. Wastewater samples have consistently tested positive across Gauteng's 19 community sites, indicating widespread community transmission. These findings confirm active transmission across all geographical areas from the measles clinical surveillance information.

### **Recommendations**

Measles awareness should be done in endemic areas and areas with localised outbreaks to alert the communities about the ongoing measles outbreak, and parents should be encouraged to vaccinate their children to protect them against measles infections. Measles infections can lead to complications such as pneumonia, ear infections, diarrhoea, encephalitis (swelling of the brain) and death. Parents whose children have missed their scheduled routine measles immunisation vaccine doses are encouraged to take their children for a measles vaccination catch-up dose. Clinicians should report the suspected measles cases and collect blood specimens for laboratory confirmation, throat swabs for molecular analyses and also report patients who develop measles signs and symptoms using the NMC Surveillance System; <https://www.nicd.ac.za/nmc-overview/overview/>. These include strengthening routine immunisation services and launching a mass vaccination campaign targeting children up to 15 years of age. High-incidence districts such as Tshwane and Johannesburg should be prioritised. Public awareness efforts must be intensified to address vaccine hesitancy and improve case reporting. Continued environmental surveillance through wastewater testing should be maintained to monitor trends and guide response activities.

