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MEASLES WEEKLY SITUATION REPORT FOR SOUTH AFRICA

Report for week ending 03 October 2025, epidemiological week 40
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, as well as a completed case investigation form, to the NICD from all patients presenting with fever, maculopapular rash and one of the three 'c's (cough, coryza and conjunctivitis). Measles can cause severe complications, including pneumonia, ear infections, diarrhoea, encephalitis (swelling of the brain), and even death.

Measles surveillance data and analyses are updated daily and reported weekly. The reported figures may be influenced by the number of suspected measles specimens received by the laboratory at the time of testing. Case counts for a given epidemiological week are continuously updated as new information becomes available, and may differ from previous reports due to updated epidemiological data provided by the provinces.
The case definition and case investigation form are available on the NICD website at https://www.nicd.ac.za/diseases-a-z-index/measles/
Clinical and wastewater surveillance results for measles may be available on the measles-rubella dashboard at https://www.nicd.ac.za/measles-rubella-dashboard

From week 1 to week 40 of 2025, national measles surveillance has detected an increase in measles cases (Figure 1). As of 03 October 2025, a total of 1,237 laboratory-confirmed measles cases have been reported nationally, with an increase of 62 cases since the previous report in week 39. Gauteng reported 11 additional cases, bringing the total to 640. Limpopo reported 15 new cases, bringing the total to 184. The Free State reported five new cases, bringing the total to 147. Mpumalanga reported six new cases, bringing the total to 102. The Western Cape reported 17 new cases, bringing the total to 78. The reported measles infections were mainly in children aged 1-14 years (857/1,237, 69.3%), with an increase in laboratory-confirmed cases seen in people aged 15 years and above in measles outbreak hotspots districts in Gauteng, Free State, Limpopo, Mpumalanga, Northern Cape and Western Cape provinces (Table 1). Any person who has never been infected with measles or has not received the measles vaccine is at risk of measles infection.

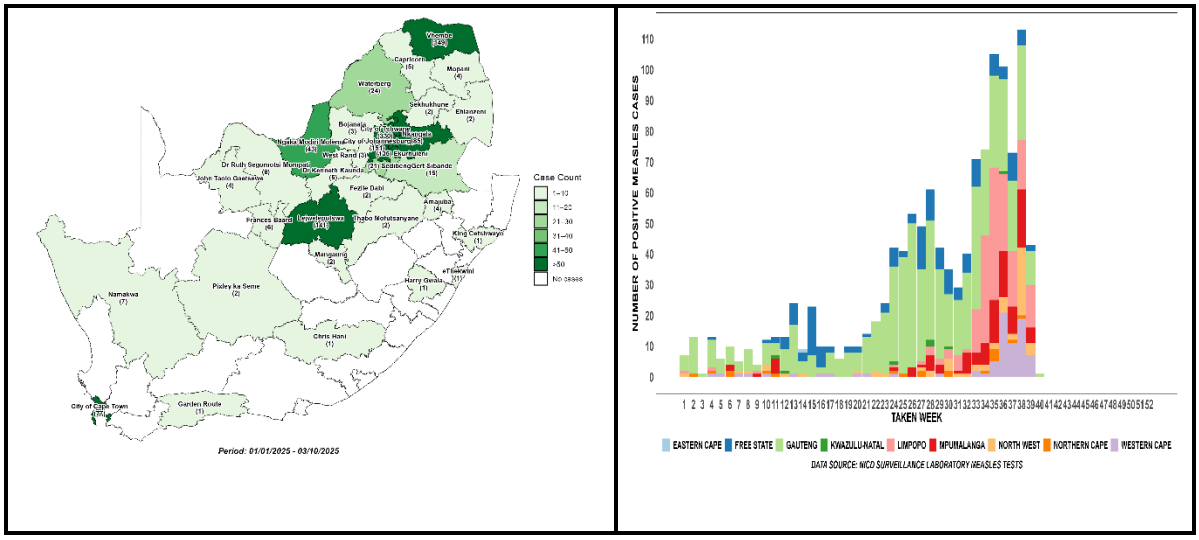

Figure 1: Laboratory-confirmed measles cases from epidemiological week 1 to 40 of 2025 in South Africa.

Update on the measles outbreak in South Africa

Gauteng province measles outbreak update

Gauteng province continues to report a high number of cases, with 640 laboratory-confirmed cases reported from epi-week 1 to 40 of 2025 (Figure 2). The majority of laboratory-confirmed cases were reported in metropolitan areas, with the distribution of cases as follows: City of Johannesburg (151), City of Tshwane (330), Ekurhuleni (135), Sedibeng (21), and West Rand (3). The most affected age group was children below 15 years, 492/640 (76.9%) (Table 1). The highest number of measles cases was reported from epi-week 29 to epi-week 40 from the City of Johannesburg, City of Tshwane, Ekurhuleni metro and Sedibeng district.

Wastewater detection continues to provide evidence of ongoing excretion and, therefore, transmission in these same districts (Figure 3). Gauteng province continues supplementary measles immunisation activities to reduce the transmission of the infection. Measles IgM-positive cases should be monitored for complications and be referred to healthcare facilities for further clinical management. Contacts of laboratory-confirmed cases shouldbe vaccinated to protect them against measles infection, and to prevent the spread of the disease.

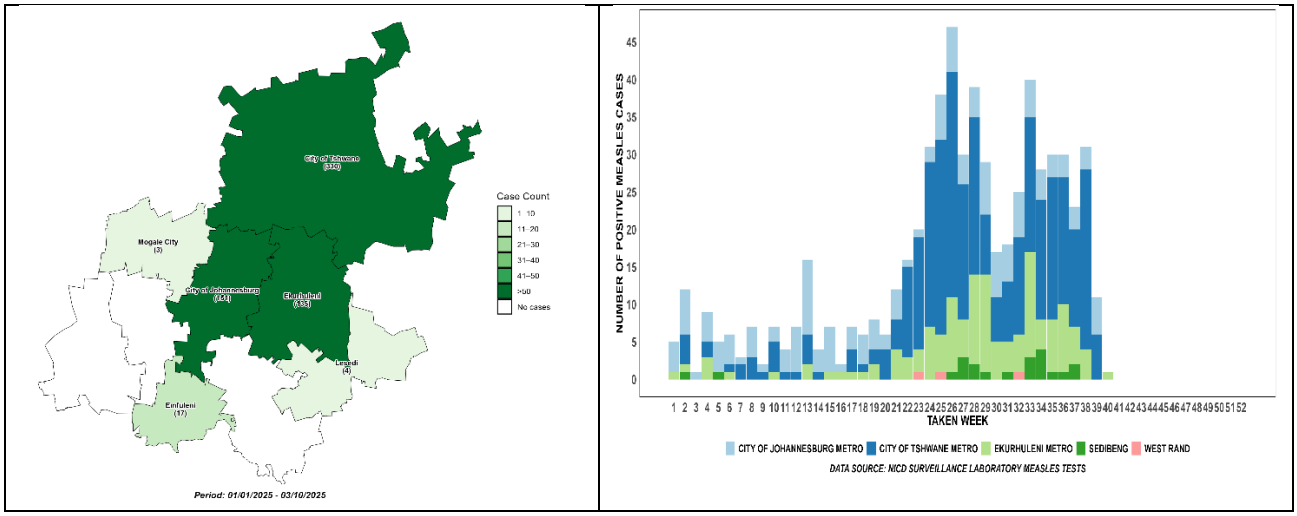

Figure 2: Laboratory-confirmed measles cases from epidemiological week 1 to 40 of 2025 in Gauteng province.

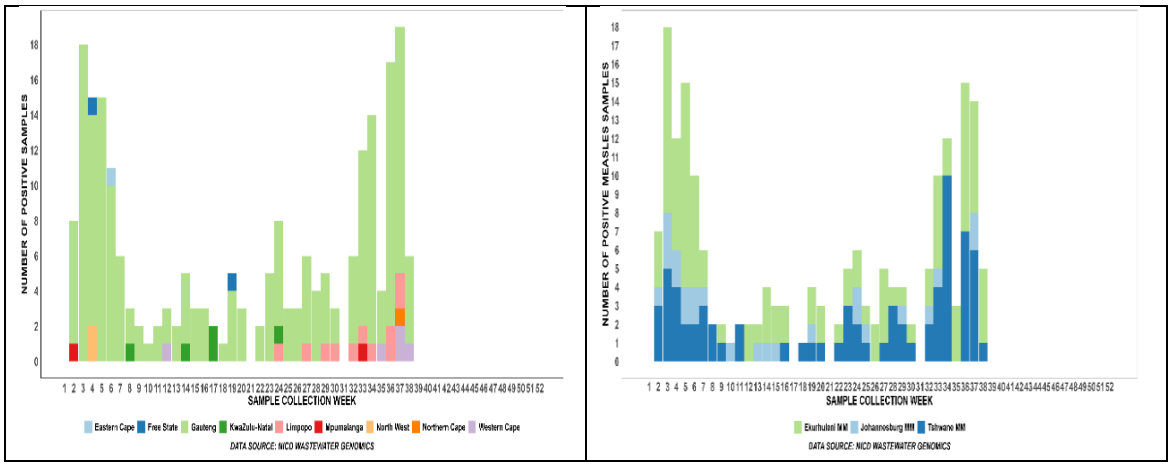

Figure 3: Number of wastewater samples positive for measles from epidemiological week 1 to 40 of 2025 in South Africa (left) and Gauteng province (right).

Free State province measles outbreak update

Five new cases were reported in week 40 in the Free State province. There were 147 cases reported from epi-week 1 to 40 of 2025 (Figure 4), with 111/147 (75.5%) cases being children aged 1-14 years (Table 1). Measles surveillance should be strengthened and supplementary immunisation activities for measles immunisation should be extended to areas previously not included in the measles vaccination campaign to prevent transmission of the infection to new areas. Measles contact tracing should be conducted, and the measles vaccine administered to those who are susceptible to the disease.

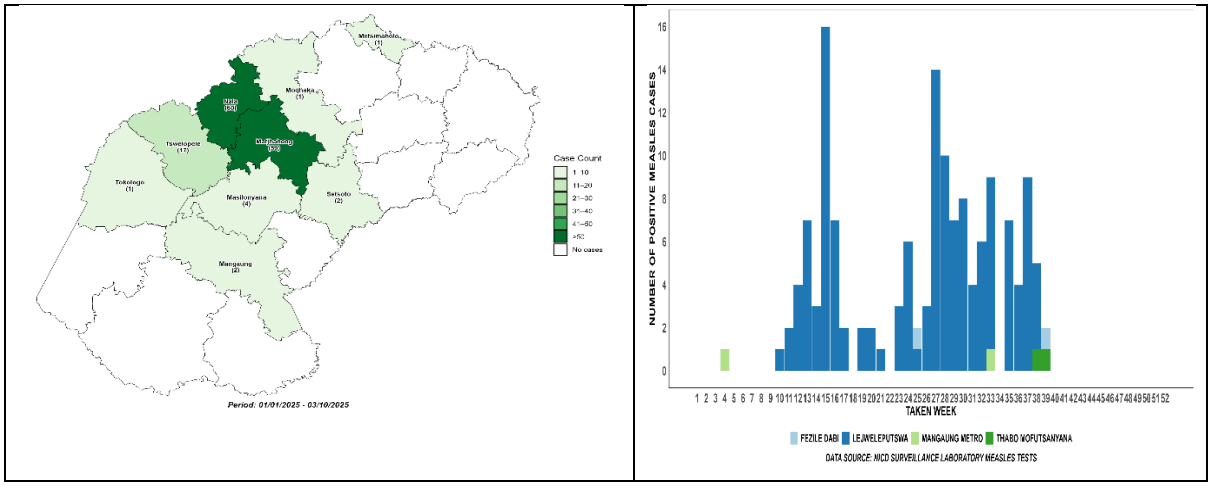

Figure 4: Laboratory-confirmed measles cases from epidemiological week 1 to 39 of 2025, Free State province

Limpopo province measles outbreak update

In Limpopo province, 184 laboratory-confirmed measles cases have been reported from epi-week 1 to epi-week 40, with children aged 1-14 years (138/184; 75.0%) being the most affected (Table 1). From epi-week 27, Limpopo province reported an increase in the number of laboratory-confirmed cases in the Vhembe District Municipality, with 148 cases reported as of the end of epi-week 40 (Figure 5). The measles outbreak is currently affecting the Musina Local Municipality in the northern part of Limpopo province. Laboratory-confirmed measles cases were also detected in the Waterberg, and Capricorn districts in epi-weeks 38 and 39, while an adult case was detected in the Sekhukhune District Municipality in epi-week 36. Measles cases amongst older age groups are increasing in Vhembe District Municipality, where a measles outbreak has been reported.

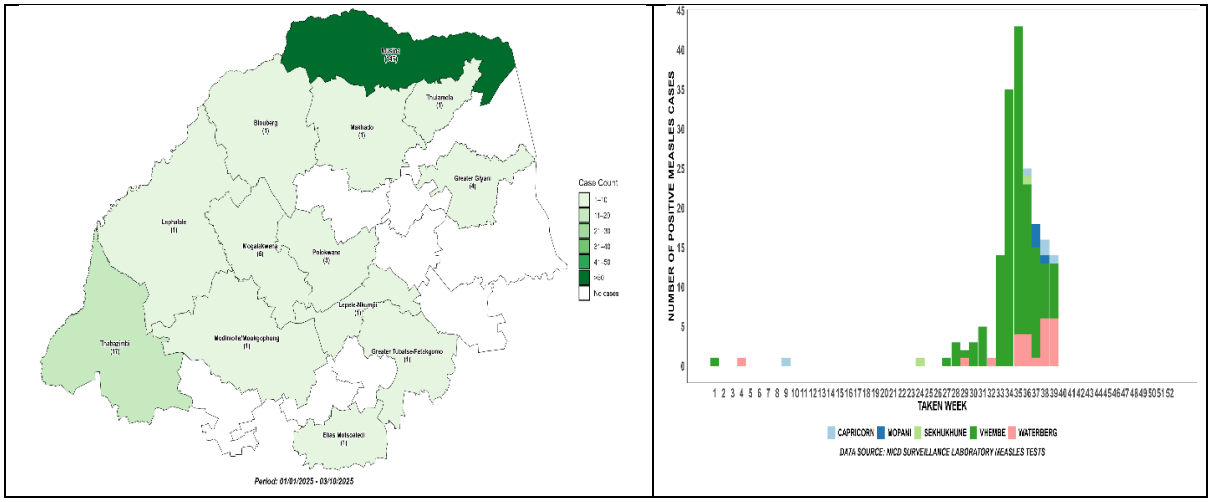

Figure 5: Laboratory-confirmed measles cases from epidemiological week 1 to 40 of 2025, Limpopo province

Mpumalanga province measles outbreak update

In Mpumalanga province, 102 laboratory-confirmed measles cases have been reported from epi-week 1 to week 40, with 78/102 (76.5%) cases being children aged 1-14 years (Table 1). From epi-week 26 to week 40, there was an increase in laboratory-confirmed cases in Nkangala District Municipality, with 80 laboratory-confirmed cases reported. Additionally, four new laboratory–confirmed measles cases were reported in epi-week 39 in Gert Sibande District Municipality (Figure 6). Most of the affected persons were aged between 1 and 14 years in both districts. Both Gert Sibande and Nkangala District Municipalities, where the measles outbreak is currently ongoing, share the border with Gauteng province, with the latter reporting the highest number of measles cases in the country.

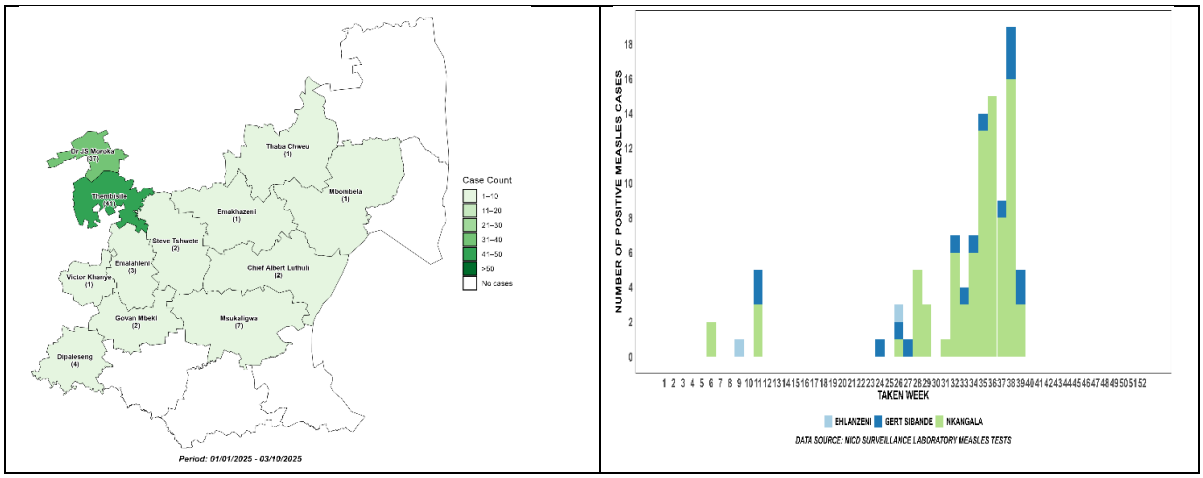

Figure 6: Laboratory-confirmed measles cases from epidemiological week 1 to 40 of 2025, Mpumalanga province

Western Cape province measles outbreak update

Seventeen new cases of measles were reported in the Western Cape province, bringing the total to 78 in epi week 40 (Figure 7). The majority of laboratory-confirmed cases (98.7%) were reported in the Cape Town Metropolitan Municipality, particularly in the Khayelitsha area. Infections were detected predominantly among individuals aged 1–14 years (55/78; 70.5%), with an increasing number of cases observed in those aged 15 years and above (Table 1).

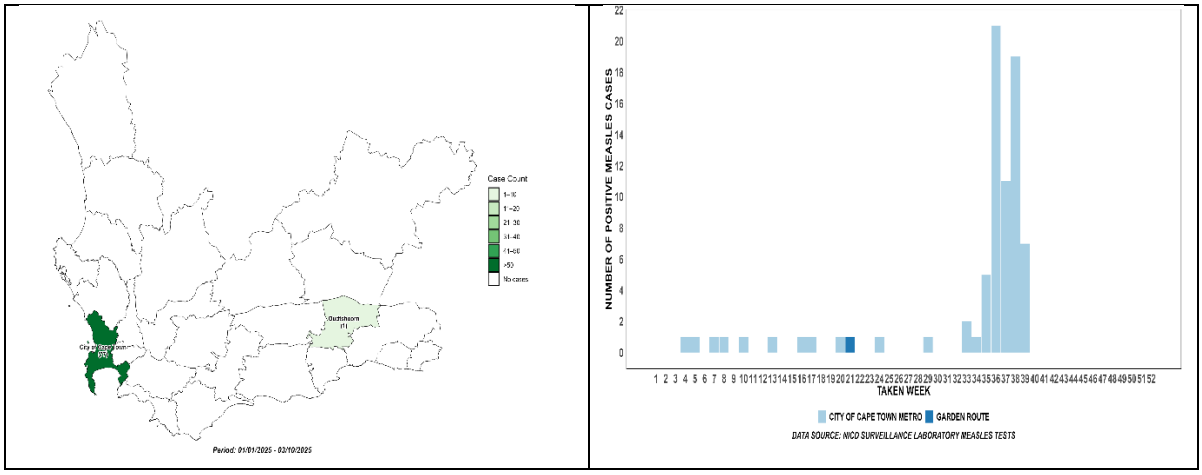

Figure 7: Laboratory-confirmed measles cases from epidemiological week 1 to 40 of 2025, Western Cape province

North West province measles outbreak update

Eight new cases were reported in the North West province, bringing the total to 59 cases in epi week 40. The majority of laboratory-confirmed cases (43/59; 72.9%) were reported in the Ngaka Modiri Molema District Municipality, with most cases detected in the Mafikeng, followed by the Ditsobotla sub-districts (Figure 7). All cases occurred among children under 14 years of age (Table 1).

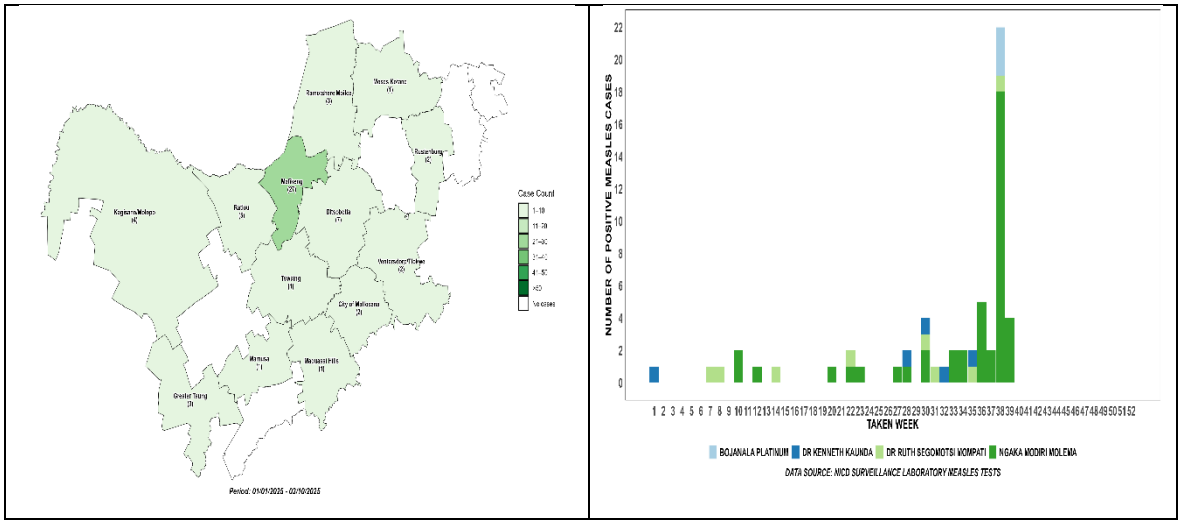

Figure 7: Laboratory-confirmed measles cases from epidemiological week 1 to 40 of 2025, North West province

Measles surveillance

Measles outbreaks are ongoing in different parts of South Africa, with Gauteng province being the most affected. Additional outbreaks have been reported in the Vhembe District Municipality in the Limpopo, the Gert Sibande and Nkangala District Municipalities in Mpumalanga, the Cape Town Metropolitan Municipality in the Western Cape, and the Ngaka Modiri Molema District Municipality in the North West.

Measles is detected predominantly among individuals aged 1–14 years, with an increasing number of cases reported among adults in outbreak areas. This report further indicated that 243/1,237 (19.6%) of the laboratory-confirmed measles cases involved persons ≥15 years of age, indicative of continuing transmission within

communities and possibly an immunity gap in older age groups. This shift in the epidemiology of measles among adults warrants further investigation to inform and improve public health interventions.

Measles remains endemic in South Africa, with cases typically increasing during autumn and spring. Although sporadic cases are reported in areas with high measles vaccination coverage throughout the year in South Africa, outbreaks usually occur in areas with low vaccination coverage, where many children are either unvaccinated or under-vaccinated (having received only one instead of the recommended two doses). Therefore, maintaining high vaccine coverage is important for preventing widespread outbreaks.

Table 1: Laboratory-confirmed measles cases detected from epi-week 1 to epi-week 40 of 2025, 01 January to 19 September 2025 in South Africa.

PROVINCE	0-6 months	7-11 months	1-4 yrs	5-9 yrs	10-14yrs	15-19 yrs	20-24 yrs	25-29 yrs	>= 30 yrs	Total
Eastern Cape	0	0	0	1	0	0	0	0	0	**1**
Free State	7	4	19	70	22	8	2	3	12	**147**
Gauteng	78	23	109	207	75	46	20	11	71	**640**
KwaZulu-Natal	0	0	2	4	1	0	0	0	0	**7**
Limpopo	4	8	26	72	40	13	4	3	14	**184**
Mpumalanga	1	0	17	39	22	11	5	2	5	**102**
North West	0	1	9	36	13	0	0	0	0	**59**
Northern Cape	1	0	2	6	8	1	1	0	0	**19**
Western Cape	11	1	13	34	8	3	2	2	4	**78**
Total	**102**	**37**	**197**	**469**	**191**	**82**	**34**	**21**	**106**	**1,237**

Recommendations for public health interventions

- Measles awareness should be intensified in areas with localised outbreaks to alert the communities about the ongoing measles outbreak and the prevention of the disease.
- Parents should be encouraged to vaccinate their children to protect them against measles infections.
- Parents whose children have missed their scheduled routine measles immunisation vaccine doses are encouraged to take their children for a measles vaccine catch-up dose.
- Measles surveillance should be strengthened nationally to improve case reporting and contact tracing.
- Provinces are urged to conduct measles risk assessment and continue with targeted or supplementary measles immunisation activities or campaigns in areas with low measles coverage and high numbers of children who have either never received vaccines (zero dose areas) or are under-vaccinated (children who received one instead of the recommended two measles vaccine doses)
- Public awareness efforts must be intensified to address vaccine hesitancy by engaging with all relevant stakeholders in the affected communities
- Clinicians should investigate suspected measles cases and collect blood specimens for laboratory confirmation, and also report patients who develop measles signs and symptoms using the NMC Surveillance System https://www.nicd.ac.za/nmc-overview/overview/
- Strengthening routine immunisation services and launching a mass vaccination campaign targeting children up to 15 years of age is also recommended.