

Mpxv

Multi-country external situation report no. 68, published 31 July 2026

KEY FIGURES			
Area	Number of reported confirmed cases	Number of deaths among confirmed cases	Number of reporting countries
Global (1 Jan 2025 – 30 June 2026)*	63 692	256	105
Key countries globally (1 – 30 June 2026)**			
Madagascar	546	8	-
United States of America	111	0	-
Democratic Republic of the Congo	86	0	-
The United Kingdom of Great Britain and Northern Ireland	46	0	-
Portugal	45	0	-
Key countries in Africa (last six weeks: 8 June – 19 July 2026)***			
Madagascar	940	11	-
Angola	57	0	-
Kenya	48	0	-
Democratic Republic of the Congo****	30	0	-
Cameroon	24	0	-

* Most recent global surveillance data available.

** Countries globally reporting the highest number of confirmed mpox cases in June 2026

*** Countries in Africa reporting the highest number of confirmed mpox cases in the last six weeks.

**** Interpretation of data from the Democratic Republic of the Congo should consider delays in reporting of mpox data owing to the country's current focus on the response to the Bundibugyo virus disease outbreak.

Highlights

- All countries and partners are strongly encouraged to continue and sustain surveillance and notification for mpox, along with coordinated preparedness and response activities in all technical areas in line with WHO guidance.
- The global mpox outbreak remains a WHO graded emergency with over a thousand confirmed cases reported every month despite declining surveillance, together with emerging outbreaks. The WHO [Director-General's standing recommendations on mpox](#) issued under the International Health Regulations (2005) remain in effect.
- Transmission of mpox continues, affecting men and women, often followed by household transmission, and in some areas, affecting all age groups. All clades of monkeypox virus (MPXV) continue to circulate.
- Prevention and rapid containment of mpox outbreaks are essential to avoid local transmission in any setting.
- In June 2026, 33 countries across five WHO regions reported 1128 confirmed mpox cases, including nine deaths (case fatality ratio [CFR] 0.8%). About two-thirds of these cases were reported in the WHO African Region.
- Madagascar, the United States of America, the Democratic Republic of the Congo, the United Kingdom of Great Britain and Northern Ireland (hereafter "United Kingdom"), and Portugal reported the most confirmed cases in June 2026.

- In June 2026, the WHO regions of the Americas and South-East Asia reported more confirmed cases than in May, while the Western Pacific, African, and European regions reported fewer cases. The Eastern Mediterranean Region reported no confirmed cases in June 2026.
- Ten countries in Africa have reported active transmission of mpox in the last six weeks (8 June – 19 July 2026) with 1112 confirmed cases, including 12 deaths (CFR 1.1%). Madagascar, Angola, Kenya, the Democratic Republic of the Congo, and Cameroon reported the highest number of cases during this period.
- Three countries, Costa Rica, Ghana and Lithuania, have reported mpox due to clade Ib MPXV for the first time.
- France, Germany, Ireland, Italy, Netherlands, Portugal, Spain, Sweden, Switzerland, Thailand and the United Kingdom have reported local transmission of clade Ib MPXV, including in, but not limited to, men who have sex with men.

Epidemiological update

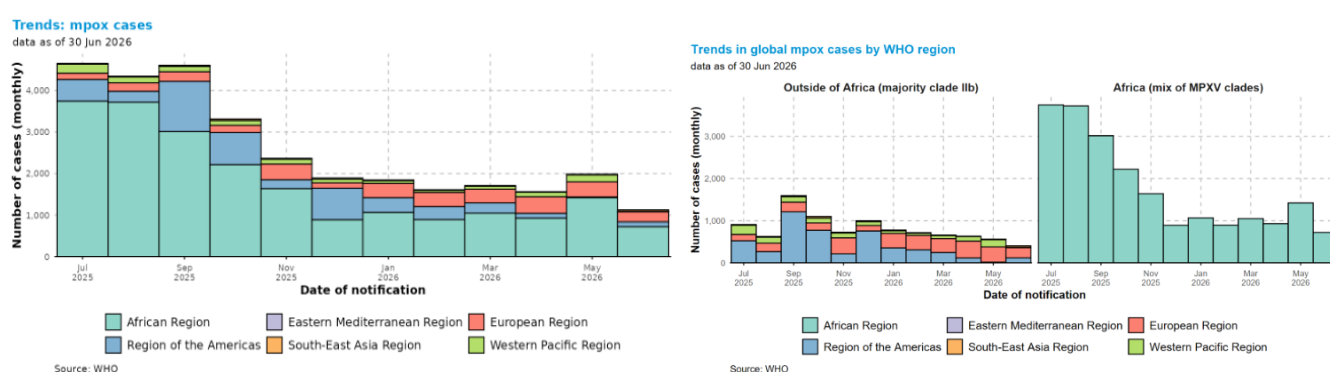
This situation report includes the most relevant new information on mpox outbreaks and response activities. Detailed epidemiological analyses and data are available in the [WHO mpox surveillance report](#).

Global situation

Global surveillance data are updated monthly; data presented here are up to **30 June 2026**.

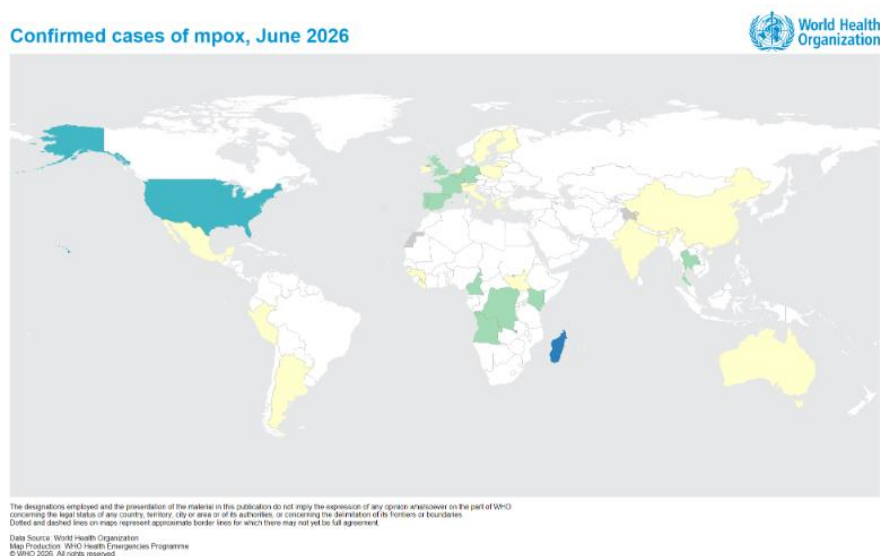
In June 2026, 33 countries reported 1128 confirmed cases, including nine deaths (case fatality ratio [CFR] 0.8%) (Figure 1).¹ The countries that reported the most confirmed cases in June 2026 are Madagascar (546 confirmed cases), the United States of America (111), the Democratic Republic of the Congo (86), the United Kingdom (46), and Portugal (45).

Figure 1. Reported confirmed mpox cases, by WHO region, by month, 1 July 2025 – 30 June 2026



The countries reporting the highest number of confirmed cases are in the WHO African Region (Figure 2), which reported 64% (722 of 1128) of confirmed cases in June 2026.

Figure 2. Geographic distribution of mpox cases reported to WHO, by country, 1 – 30 June 2026



¹ Data for the previous month reflect incomplete and delayed reporting and are subject to adjustments over time.

Two WHO regions reported more confirmed cases in June 2026 compared to May: the WHO Region of the Americas (590% increase, from 17 to 118 confirmed cases) and the WHO South-East Asia Region (140% increase, from 15 to 36 confirmed cases).

Four WHO regions reported fewer confirmed cases in June 2026 compared to May: the Western Pacific (93% decrease, from 167 to 11 confirmed cases), African (49%, from 1422 to 722 confirmed cases), European (33% decrease, from 362 to 241 cases), and Eastern Mediterranean regions (from two cases to no cases).

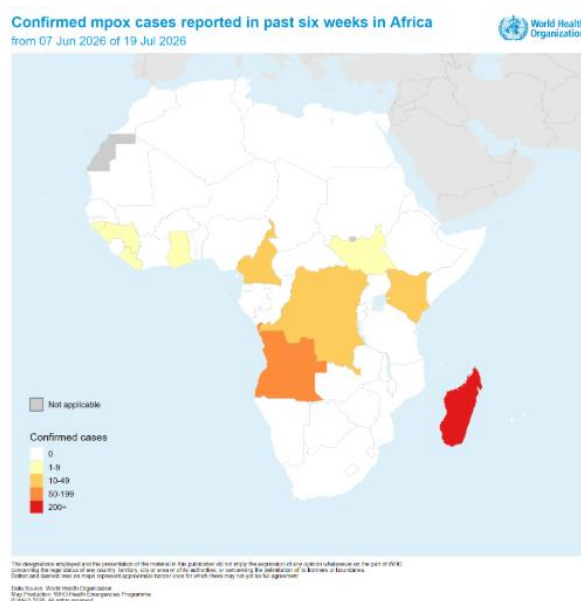
Data for recent weeks must be interpreted with caution since reporting delays often lead to retrospective adjustments over time, and trends in all regions may be prone to surveillance and reporting biases.

Situation in Africa

This section reports data provided as of **19 July 2026**.

From 1 January 2025 to 19 July 2026, 32 countries in Africa reported 51 159 confirmed mpox cases, including 235 deaths (CFR 0.5%). In the last six weeks, 10 countries reported active transmission of mpox (Figure 3), with 1112 confirmed cases, including 12 deaths (CFR 1.1%); the highest numbers of confirmed cases over the last six weeks were reported in Madagascar (940 confirmed cases), Angola (57), Kenya (48), the Democratic Republic of the Congo (30)², and Cameroon (24).

Figure 3. Geographic distribution of confirmed mpox cases in the past six weeks, Africa, 8 June – 19 July 2026

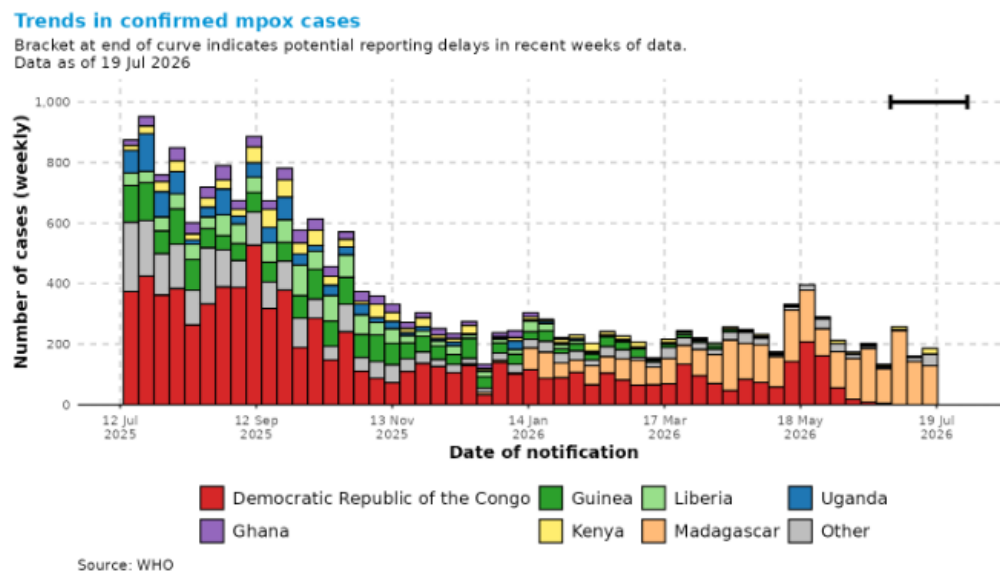


Overall, reported weekly confirmed cases have remained somewhat stable on the continent, with about 200 cases per week in recent weeks (Figure 4). Data for recent weeks should be interpreted with caution, as reporting delays have been noted which will likely lead to retrospective adjustments. Furthermore, with a reduction in surveillance activities, notably in the presence of competing activities, the number of cases may be underestimated.

² Interpretation of data from the Democratic Republic of the Congo should take into account delays in reporting of mpox data owing to the country's current focus on the response to the Bundibugyo virus disease outbreak.

Most recent cases have been reported by Madagascar, as outlined [below](#). Further details are available in the [WHO Global mpox trends](#).

Figure 4. Reported confirmed mpox cases in Africa, past 12 months, by country, 12 July 2025 – 19 July 2026³

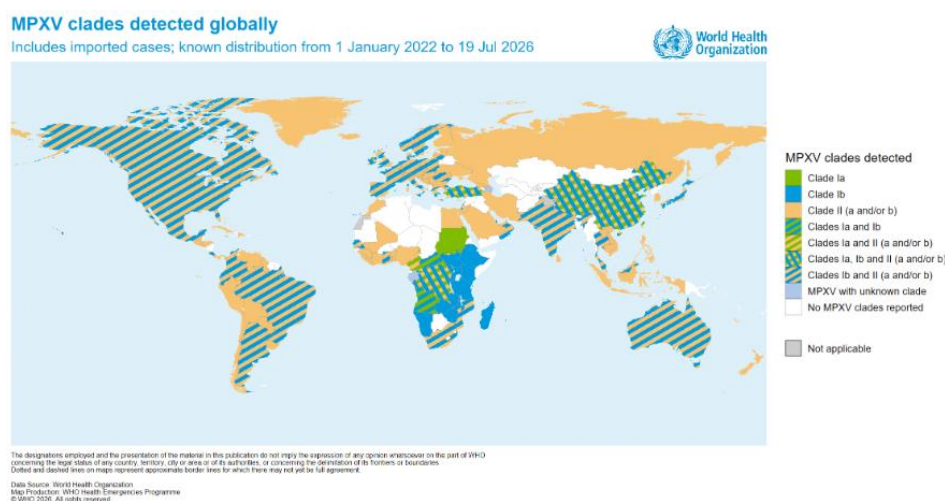


Global monkeypox virus (MPXV) distribution

Since the last [situation report](#), and as of 22 July 2026, three countries, Costa Rica, Ghana and Lithuania, have reported mpox due to clade Ib MPXV for the first time (Figure 5).

Detailed information on clade-specific transmission dynamics can be found in [Situation Report #64](#).

Figure 5. Geographic distribution of MPXV clades⁴ reported to WHO, by country, 1 January 2022 to 19 July 2026⁵



³ The Figure 4 legend assigns a distinct colour to the top seven countries reporting the highest cumulative case count for the period in the figure. Other reporting countries are aggregated under the group "Other".

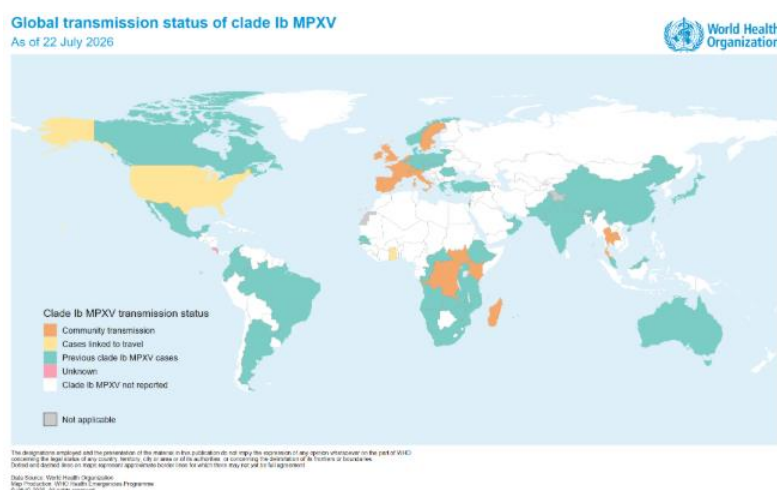
⁴ Figure 5 does not include three cases of a **clade Ib / IIb recombinant MPXV strain** in India, Qatar, and the United Kingdom, which involve three other countries from which the cases traveled (in South-East Asia and Eastern Mediterranean regions).

⁵ The geographic distribution of MPXV clades shown is based on viral genome sequences from clinical samples of confirmed mpox cases. Sequences from wastewater and environmental samples are excluded from this analysis.

Community transmission of clade Ib MPXV⁶ outside Central and East Africa (Figure 6) has been reported in France, Germany, Ireland, Italy, Netherlands, Portugal, Spain, Sweden, Switzerland, Thailand and the United Kingdom, including in, but not limited to, sexual networks of men who have sex with men and/or of sex workers.

In this context, the countries reporting the most cumulative cases of mpox due to clade Ib MPXV are Spain (239 cases), Germany (115), the United Kingdom (91), France (90), and Portugal (81). In the last six weeks, Portugal (60 cases), the United Kingdom (31), Thailand (29), France (18), and Spain (16) have reported the most cases.

Figure 6. Clade Ib MPXV transmission status within the last six weeks, by country, as of 22 July 2026⁷



Focus on selected countries

Madagascar

Since December 2025, Madagascar has been experiencing the largest mpox outbreak in the WHO African Region and globally, with ongoing sustained community transmission and high weekly case counts. Genomic sequencing analysis identified clade Ib MPXV as the circulating strain.

As of 19 July 2026, Madagascar has reported a total of 2921 confirmed cases, including 18 deaths (CFR 0.6%) (Figure 7). In the last week, Madagascar reported 128 confirmed cases, with a test positivity of 74%, indicating ongoing transmission and insufficiently sensitive surveillance.

With 61% of districts (70 of 115 districts) affected to date, widespread geographic dissemination continues. Cases have been reported across all age groups and both sexes, with individuals aged 15-49 years most affected.

Response activities have been scaled up, including vaccination, with 89 723 individuals having received one dose of MVA-BN vaccine, including 19 514 health workers, 5112 contacts, 1736 sex workers, and 1151 people living with HIV, with 62 210 doses administered to other individuals. Most (95%) confirmed cases receive either home-based care or care in dedicated treatment centres.

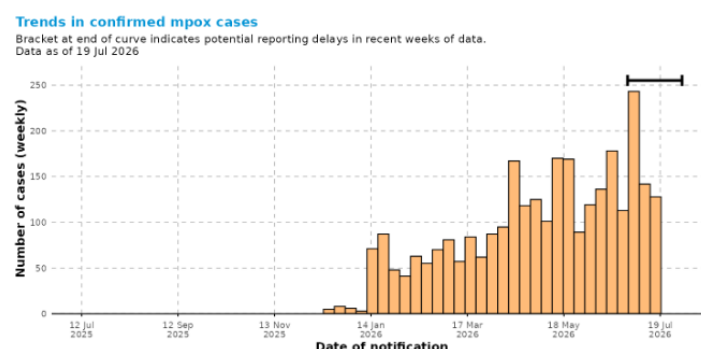
The outbreak is not yet under control, and the situation remains concerning due to continuing high case counts, high test positivity, operational challenges and gaps related to logistics, health-care capacity, vaccine stockouts and cold chain, and further needs for ongoing risk communication and community engagement for populations at

⁶ A country is classified as having **community transmission** if at least one case reported in the country in the last six weeks has reported no recent travel or epidemiological link with a traveler from a country with mpox transmission during their incubation period. This classification applies regardless of the number of cases reported in the country.

⁷ Date when the latest case of mpox due to clade Ib MPXV, prior to the publication of this report, was reported to WHO.

risk. The country has conducted an Intra-Action Review (IAR) of the mpox response, identifying key strengths, operational challenges, and priority actions that should be taken to strengthen the response.

Figure 7. Confirmed mpox cases reported in Madagascar in the last 12 months, 12 July 2025 – 19 July 2026



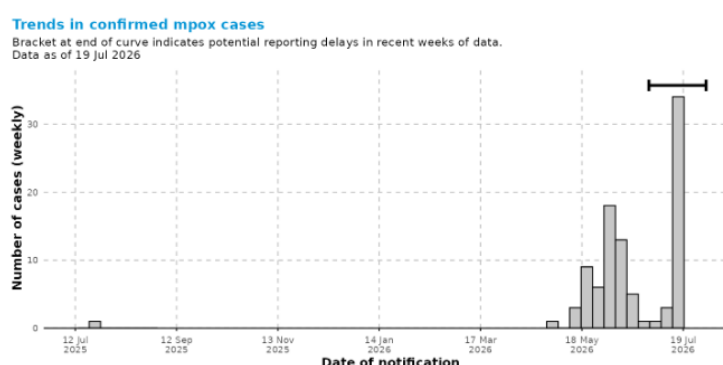
Angola

As of 19 July 2026, Angola has reported 108 confirmed mpox cases, including one death (CFR 0.9%). While sporadic confirmed cases were detected in late 2024 and during 2025, there has been a surge in the number of cases reported since mid-May 2026 (Figure 8). Viral genome sequencing confirmed clades Ia and Ib MPXV as the circulating strains in 2024 and 2025; efforts are underway to establish the circulating strain(s) of 2026.

Seven of 21 provinces (33%) have reported confirmed cases. The most affected province is Cabinda, which has reported 80% (86 of 108) of confirmed cases and is the epicentre of the outbreak. Cabinda province is an enclave of the Republic of Congo, presenting a notable risk of cross-border spread. Young adults aged 20 – 29 years of age have been the most affected, with 52% (56 of 108) of confirmed cases reported in this age group, and a disproportionate burden has been observed among females, with 66% (71 of 108) of confirmed cases reported among women and girls.

Response interventions are ongoing, with review and revision of the national response plan, mobilization of national and provincial rapid response teams, intensification of active case search in areas experiencing ongoing transmission, contact tracing and monitoring, community sensitization, and submission of a request for mpox vaccines in line with the outbreak response vaccination plan.

Figure 8. Confirmed mpox cases reported in Angola in the last 12 months, 12 July 2025 – 19 July 2026



Countries reporting mpox for the first time

Since the [last edition](#) of this report, one country, Guinea-Bissau, has reported mpox for the first time. By 19 July 2026, three confirmed cases had been reported, and genomic sequencing analysis had confirmed clade IIb MPXV as the circulating strain.

Countries reporting mpox due to clade Ib MPXV for the first time

Three countries, Costa Rica, Ghana and Lithuania, have reported mpox due to clade Ib MPXV for the first time.

Costa Rica

On 22 and 23 July 2026, Costa Rica notified WHO of two cases of mpox due to clade Ib MPXV in two men. Genomic sequencing analysis has identified clade Ib MPXV as the circulating strain. Public health response actions taken include case investigations to identify the likely source(s) of infection and potential epidemiological links between the cases, as well as contact tracing and monitoring, and active case search.

Ghana

On 16 July 2026, Ghana notified WHO of its first case of mpox due to clade Ib MPXV in a man who reported recent travel from the Democratic Republic of the Congo, where exposure and symptom onset are reported to have occurred. The patient is receiving care and reported to be stable, contact tracing and monitoring are ongoing, and no suspected or probable cases have been reported among the identified contacts.

Lithuania

Lithuania has reported its first case of mpox due to clade Ib MPXV in a man with a history of travel to Spain prior to his diagnosis in April 2026.

Global operational updates

The global mpox outbreak remains a graded health emergency and the WHO Director-General's standing recommendations [remain in effect](#) under the provisions of the International Health Regulations (2005).

In line with the WHO [Strategic Framework for enhancing prevention and control of mpox \(2024-2027\)](#) and the Health emergency prevention, preparedness, response and resilience (HEPR) framework, WHO continues to emphasize five core components—the **5Cs**: emergency **C**oordination, **C**ollaborative surveillance, **C**ommunity protection, safe and scalable **C**are, and access to and delivery of **C**ountermeasures — underpinned by ongoing research collaborations to generate data and inform development of and effectiveness of interventions.

Countries are increasingly turning their attention to strategies for mpox prevention, control, elimination and integration with other health services, including sexual health services and primary health care.

This section provides updates on the WHO global mpox response **as of 22 July 2026**.

1. Emergency coordination

- WHO continues to lead the global mpox response and, along with the Africa Centres for Disease Control and Prevention (Africa CDC), to work with all partners to coordinate response in Africa to prevent and control mpox. This includes provision of support in implementation of outbreak investigation and response, transmission studies, vaccine safety and effectiveness research, documentation of field experience with mpox vaccines, integration of mpox detection, prevention and care with sexual health, STI and HIV services, coordination of the Collaborative Open Research Consortium for poxviruses, and other areas.

2. Collaborative surveillance

- Updates to [epidemiological data on mpox in Africa](#) continue biweekly, updates to [global epidemiological data](#) continue monthly, and both can be accessed through the [online WHO dashboard](#).
- WHO is providing technical, financial, and operational support for the implementation of an mpox transmission study in the Democratic Republic of the Congo.
- WHO continues to evaluate public health considerations regarding mpox diagnostics and the performance of diagnostic tests to inform technical guidelines on MPXV testing and testing strategies, through consultation with the expert Guideline Development Group on MPXV diagnostics.
- WHO is coordinating implementation of a multi-country study for the evaluation of point-of-care tests for mpox in Belgium, the Democratic Republic of the Congo, Ghana, and Madagascar.

3. Community protection

- The community protection cluster supports risk communication and community engagement (RCCE), infodemic management, community-based infection prevention and control (IPC), water, sanitation, and hygiene, and roll-out of mpox vaccines and immunization. Other key areas of work include border health, guidance for events and mass gatherings, and support for investigation at the animal-human interface.
- WHO continues to support community-centered action in countries with mpox outbreaks, through provision of tailored guidance, RCCE toolkits, integrated training packages for community-based volunteers, and sharing of public health advice for population groups at risk. This support is coordinated through the RCCE Collective Service and the RCCE Mpox Continental Coordination Group in partnership with the United Nations Children's Fund (UNICEF), the International Federation of Red Cross and Red Crescent societies (IFRC), and Africa CDC.
- WHO continues to provide technical and operational support to countries to collect and use community data to guide localized and inclusive mpox response programmes and publish best practices. Since the last [edition](#) of this situation report, key findings from mpox rapid assessments in the Democratic Republic of the Congo and Liberia, alongside those from the outbreak investigation in Pakistan, were presented to policymakers at the

global level, providing an opportunity to share cross-country learning and deliberate on the implications for community-centred mpox preparedness and response.

4. Safe and scalable care

- Updates to the [living guidelines on clinical management and IPC for mpox](#) are being finalized and will soon be published.

5. Access to and delivery of countermeasures

Vaccines

- From August 2024 to June 2026, 18 African countries deployed mpox vaccines in their outbreak response.
- WHO continues supporting development of mpox vaccination strategies for outbreak response for people at risk, based on local epidemiology, as well as in the documentation of lessons learned on mpox vaccination.
- To reach more people at risk during an outbreak, countries can deploy dose-sparing options (such as intradermal fractional dosing) for the MVA-BN vaccine during the outbreak or request access to the single dose vaccine LC16m8. Every effort should be made to complete the course of vaccination for people at risk as soon as possible.
- All MVA-BN vaccine doses allocated through nine allocation rounds were delivered to 19 countries, and 30 000 additional doses were allocated to Madagascar through a tenth allocation round.
- A total of 104 230 doses of MVA-BN remain available through the Access and Allocation Mechanism (AAM).
- WHO and partners are establishing an emergency mpox vaccine stockpile for outbreak response under the International Coordinating Group on vaccine provision⁸ to be operational by September 2026.

Diagnostics

- As of 22 July 2026, 73 diagnostics manufacturers contacted WHO for information on Emergency Use Listing (EUL) of MPXV nucleic acid amplification tests (NAAT); WHO has held pre-submission calls with 44 manufacturers. Among 16 NAAT dossiers submitted by 14 manufacturers, [12 products are listed for EUL, one product](#) is being assessed for EUL renewal, and public reports for 12 products have been made available [here](#).

⁸ For more information, please check here: <https://www.who.int/groups/icg>

Mpox main resources

Disease Outbreak News

- Mpox: recombinant virus with genomic elements of clades Ib and IIb – Global, 14 February 2026. <https://www.who.int/emergencies/disease-outbreak-news/item/2026-DON595>

Mpox outbreak toolbox

- WHO mpox outbreak toolbox, Updated May 2025. <https://www.who.int/emergencies/outbreak-toolkit/disease-outbreak-toolboxes/mpox-outbreak-toolbox>

Strategic planning and global support

- Strategic framework for enhancing prevention and control of mpox (2024-2027). May 2024. Available at: <https://www.who.int/publications/i/item/9789240092907>
- Extension of WHO Standing recommendations on mpox under the International Health Regulations (2005) (IHR). 21 August 2025. Available here: <https://www.who.int/publications/m/item/extension-of-standing-recommendations-for-mpox-by-the-director-general-of-who>
- WHO Rapid Risk Assessment - Mpox, Global v.6. 17 February 2026. <https://www.who.int/publications/m/item/who-rapid-risk-assessment---mpox--global-v.6>
- WHO mpox global strategic preparedness and response plan. Updated 17 April 2025. <https://www.who.int/publications/m/item/mpox-global-strategic-preparedness-and-response-plan-april-2025>
- Mpox Continental Response Plan 2.0. Updated 15 April 2025. <https://africacdc.org/download/mpox-continental-response-plan-2-0/>

International Health Regulations Emergency Committee, Review Committee and recommendations of the Director-General

- Fifth meeting of the International Health Regulations (2005) Emergency Committee regarding the upsurge of mpox 2024, 30 October 2025. [https://www.who.int/news/item/30-10-2025-fifth-meeting-of-the-international-health-regulations-\(2005\)-emergency-committee-regarding-the-upsurge-of-mpox-2024](https://www.who.int/news/item/30-10-2025-fifth-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-upsurge-of-mpox-2024)

Surveillance

- Surveillance, case investigation and contact tracing for mpox: Interim guidance, 6 December 2024. <https://www.who.int/publications/i/item/B09169>
- Analytical considerations for genomic surveillance of mpox virus, 20 December 2025 <https://www.who.int/publications/b/81624>

Laboratory and diagnostics

- Diagnostic testing and testing strategies for mpox: interim guidance, 12 November 2024 <https://www.who.int/publications/i/item/B09166>
- [12 monkeypox virus nucleic acid tests](#) listed for Emergency Use Listing, 6 December 2025

Clinical management and infection, prevention and control

- Clinical management and infection prevention and control for mpox: living guideline, May 2025 <https://www.who.int/publications/i/item/B09434>
- Strengthening hand hygiene practices in community settings and health-care facilities in the context of mpox, 1 May 2025. <https://www.who.int/publications/i/item/B09396>
- Infection prevention and control and water sanitation and hygiene in health facilities during mpox disease outbreaks: rapid assessment tool user guide, 19 February 2025. <https://www.who.int/publications/i/item/9789240105324>
- Strategic actions for infection prevention and control and water, sanitation and hygiene during mpox outbreak response <https://iris.who.int/bitstream/handle/10665/381583/9789240107762-eng.pdf?sequence=1>
- Mpox Infection Prevention and Control posters on PPE [Steps to put on PPE](#), [Steps to remove PPE](#)

Vaccination

- WHO Mpox vaccines & vaccination: <https://www.who.int/teams/immunization-vaccines-and-biologicals/diseases/smallpox-and-mpox>
- WHO Smallpox and mpox vaccines, including WHO Position paper on mpox vaccines and WHO interim guidance, among other resources to support countries. August 2024. <https://www.who.int/teams/immunization-vaccines-and-biologicals/diseases/smallpox-and-mpox>
- How to achieve and sustain high uptake of mpox vaccination in outbreak settings. WHO, UNICEF, IFRC. 10 April 2025. <https://www.who.int/publications/m/item/how-to-achieve-and-sustain-high-uptake-of-mpox-vaccination-in-outbreak-settings>
- Mpox vaccination toolkit (includes materials to support National Immunization Technical Advisory Groups, training modules for MVA-BN and LC16m8 and other relevant resources). <https://www.technet-21.org/en/topics/programme-management/mpox-vaccination-toolkit>
- WHO. Frequently Asked Questions (FAQ) on use of fractional dosing with intradermal administration of mpox MVA-BN vaccine in the context of vaccine supply-constrained outbreak response. 19 June 2025. [https://www.who.int/publications/m/item/frequently-asked-questions-\(faq\)-on-use-of-fractional-dosing-with-intradermal-administration-of-mpox-mva-bn-vaccine-in-the-context-of-vaccine-supply-constrained-outbreak-response](https://www.who.int/publications/m/item/frequently-asked-questions-(faq)-on-use-of-fractional-dosing-with-intradermal-administration-of-mpox-mva-bn-vaccine-in-the-context-of-vaccine-supply-constrained-outbreak-response)
- Creation of the [International Coordinating Group on mpox vaccine provision \(ICG\)](#). See poster available here: <https://mpoxsymposium.com/visuals-and-presentations>

Community protection, public health advice, and risk communication and community engagement (RCCE) resources

- Guidance on evidence for community protection in public health emergencies. <https://iris.who.int/items/ba72ac56-fe70-4e5b-89fb-4533a6d3d098>
- Rapid assessment for community protection in health emergencies. <https://iris.who.int/items/72a013b2-c4f9-4138-8aad-cc511a8db9ee>
- Interim guidance on social and behavioural research for the mpox public health response, March 2025. <https://iris.who.int/handle/10665/380881>
- Sustaining priority services for HIV, viral hepatitis and sexually transmitted infections in a changing funding landscape, 2025. <https://www.who.int/publications/b/80341>
- Framework to support the sustainability of community protection for mpox prevention and control. 5 September 2025. <https://www.who.int/publications/i/item/B09555>

Training and education

- Health topics – mpox: <https://www.who.int/health-topics/monkeypox>
- Mpox Fact Sheet, 26 August 2024. <https://www.who.int/news-room/fact-sheets/detail/mpox>
- Mpox Q&A, 16 October 2024. <https://www.who.int/news-room/questions-and-answers/item/mpox>
- OpenWHO. Ten things you should know about mpox (2025). Quick videos online. https://openwho.org/playlist/dedicated/503162/0_jkms4e7y/0_ix1rq15p
- OpenWHO. Online training module. Monkeypox: Introduction (2020). English and French: <https://openwho.org/infectiousdiseases/503162/Mpox>
- OpenWHO. Extended training. Monkeypox epidemiology, preparedness and response (2021). English and French: <https://openwho.org/infectiousdiseases/503162/Mpox>
- OpenWHO. Mpox and the 2022-2023 global outbreak (2023). English, French: <https://openwho.org/infectiousdiseases/503162/Mpox>

Disclaimer: Caution must be taken when interpreting all data presented, and differences between information products published by WHO, national public health authorities and other sources using different inclusion criteria and different data cut-off times are to be expected. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change. All counts are subject to variations in case detection, definitions, laboratory testing and reporting strategies between countries, states and territories.