Mpox

Multi-country external situation report no. 56 published 31 July 2025

KEY FIGURES			
Area	**Number of reported confirmed cases**	**Number of deaths among confirmed cases**	**Number of reporting countries**
Global (1 Jan – 30 June 2025)*	**30 022**	**119**	**79**
Key countries (1 Jan – 20 July 2025)			
Democratic Republic of the Congo	**13 927**	**42**	**-**
Uganda	**6230**	**35**	**-**
Sierra Leone	**4876**	**42**	**-**
Burundi	**1243**	**0**	**-**

** Most recent global surveillance data available.*

Highlights

- All clades of monkeypox virus (MPXV) continue to circulate in several countries. When mpox outbreaks are not rapidly contained and human-to-human transmission is not interrupted, they continue to pose a risk of sustained community transmission.
- Since the last edition of this report, one new country, the Gambia, has reported an mpox case for the first time. Genomic sequencing analysis has identified clade IIb MPXV.
- Furthermore, Mozambique, has reported cases of mpox due to clade Ib MPXV for the first time.
- Twenty-one countries in Africa have reported ongoing mpox transmission in the past six weeks. Clade IIb MPXV continues to be reported in West Africa, while Central African countries report both clade Ia and clade Ib MPXV, and East African countries report clade Ib MPXV.
- The recent overall downward trend of confirmed cases across the continent is driven by the decline in cases in Sierra Leone and the Democratic Republic of the Congo.
- Uganda continues to experience community transmission of clade Ib MPXV, reporting the third-highest number of laboratory-confirmed cases in the continent. Cases continue to be reported primarily among young adults of both sexes and 48% of deaths were among people living with HIV. The slight increase in weekly cases that had been reported in the previous edition of this report appears to have been short-lived, with a downward trend reported in the most recent weeks.
- Australia, China and the United Kingdom have reported additional cases of mpox due to clade Ib MPXV since the last situation report. These cases have been linked to travel, and community transmission of clade Ib MPXV continues to be reported only in countries in central and Eastern Africa.

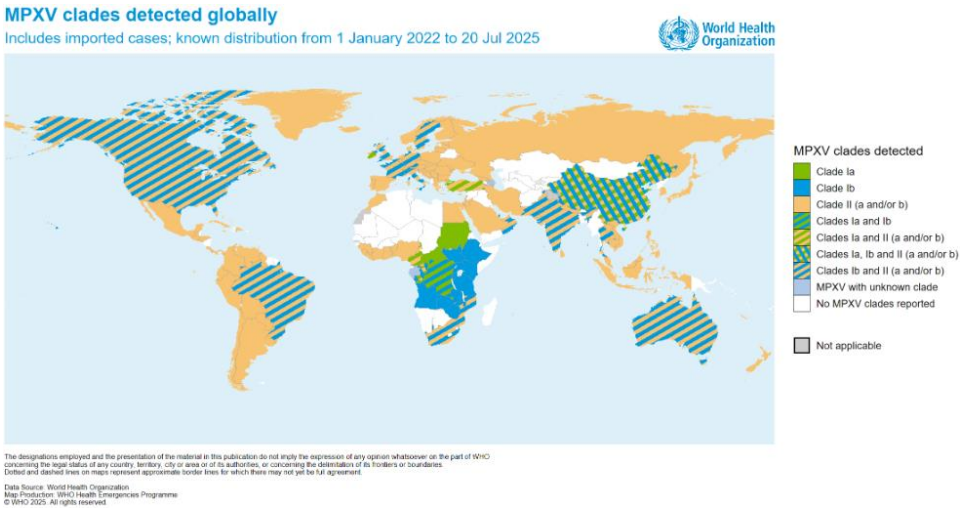
Epidemiological update

This situation report includes only the most relevant new information on mpox outbreaks and response activities. More detailed epidemiological analyses and data are available in the WHO mpox surveillance report.

Global monkeypox virus (MPXV) distribution

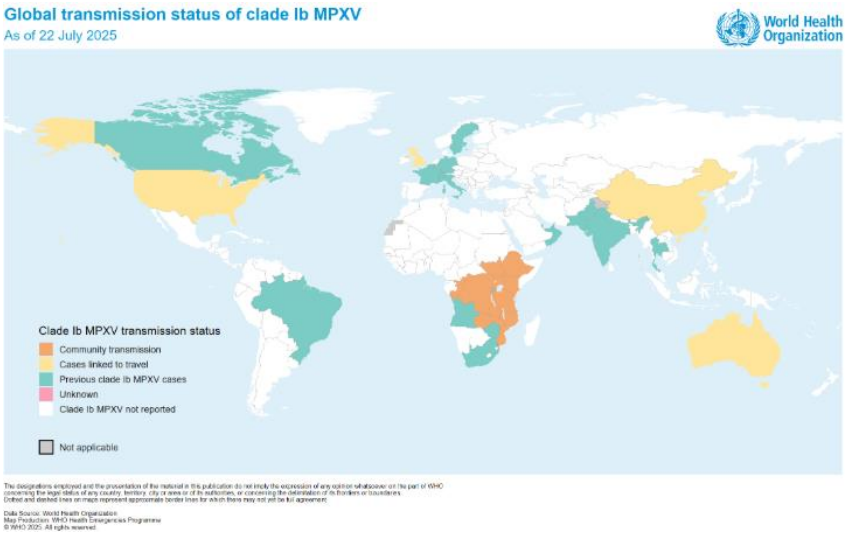
Since the last situation report, Mozambique has reported its first cases of mpox due to clade Ib MPXV (detailed description below) and the Gambia has reported its first case of mpox due to clade IIb MPXV (Figure 1). For detailed information on clade-specific transmission dynamics, refer to situation report #53.

Figure 1. Geographic distribution of MPXV clades reported to WHO, by country, 1 January 2022 to 20 July 2025[1].



Community transmission of clade Ib MPXV remains limited to countries in Africa (Figure 2). Most countries with previous sporadic importations are not reporting active transmission of clade Ib MPXV. China recently reported clusters of mpox due to clade Ib MPXV among travellers and their contacts. Based on the findings of case investigations carried out by the health authorities in the country since the last edition of this report, China's transmission level has been reclassified from "Unknown" to "Cases linked to travel" (more details below).

Figure 2. Clade Ib MPXV transmission status within the last six weeks, by country, as of 20 July 2025.

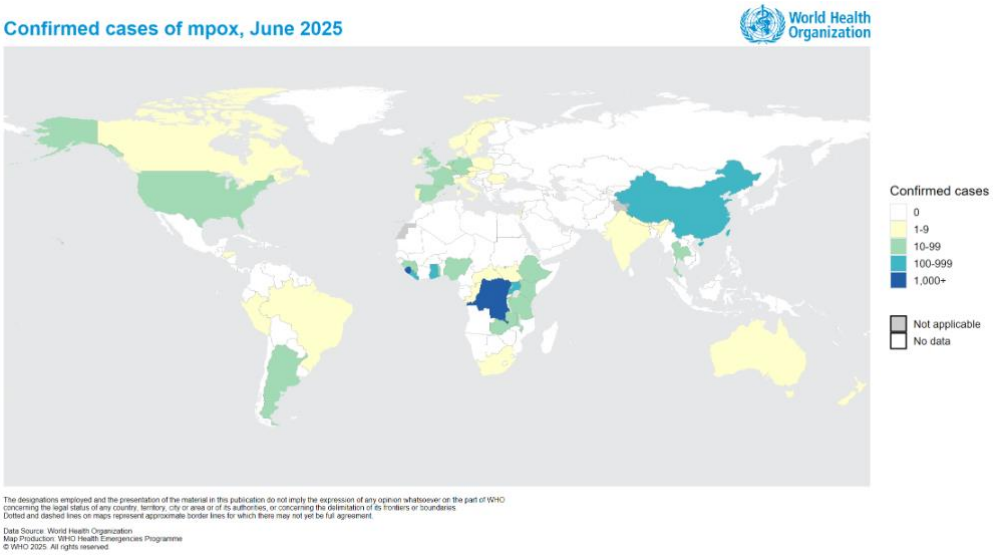


[1] The geographical distribution of MPXV clades shown is based on sequences from clinical samples of confirmed mpox cases. Sequences from wastewater and environmental samples are excluded from this analysis.

Global situation

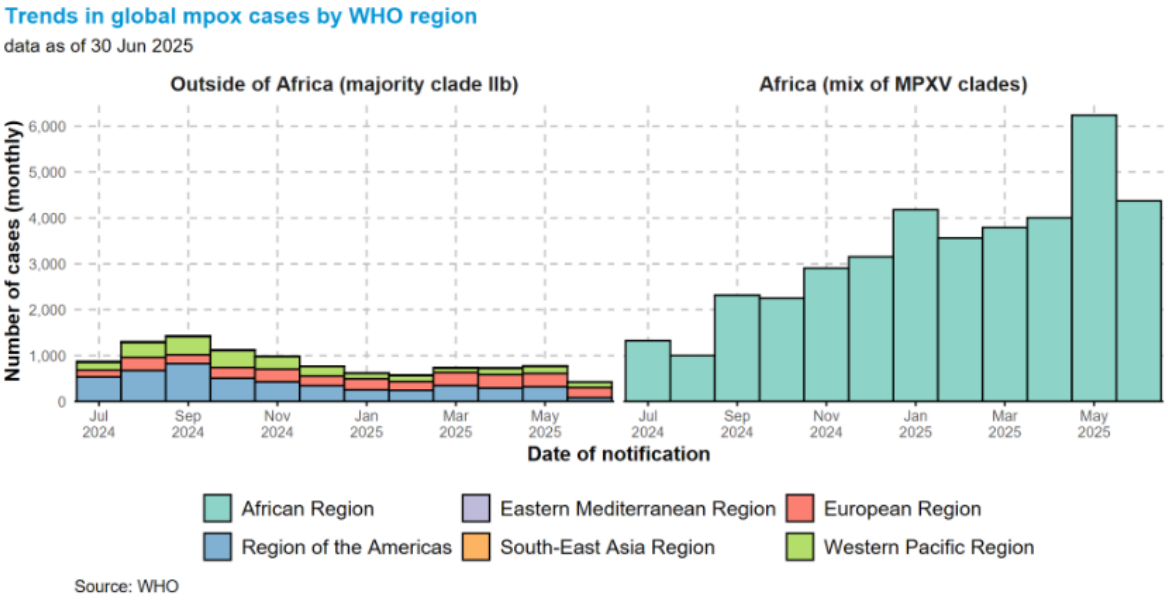
Global surveillance is updated monthly, and the latest data is available as of 30 June 2025.
In June 2025, 50 countries in all WHO regions reported a total of 4798 confirmed cases (Figure 3), including 21 deaths (case fatality ratio [CFR] 0.4%). No country reported a case for the first time during June 2025.

Figure 3. Distribution of mpox cases per country as reported to WHO, 1 - 30 June 2025**.**



Most cases continue to be reported in the African Region (Figure 4), where the increase of May 2025, driven mostly by the outbreak in Sierra Leone, was not sustained in June 2025. All WHO regions reported a decrease in cases in June 2025[2].

Figure 4. Epidemic curve of monthly number of confirmed mpox cases reported to WHO, by WHO region, 1 July 2024 – 30 June 2025**.**

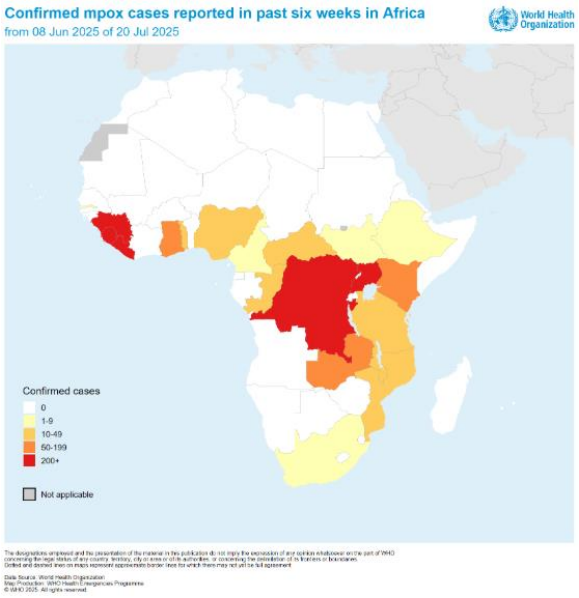


[2] The monthly reported data may be prone to delays and incompleteness and are therefore subject to retrospective adjustments over time as more data become available.

Situation in Africa

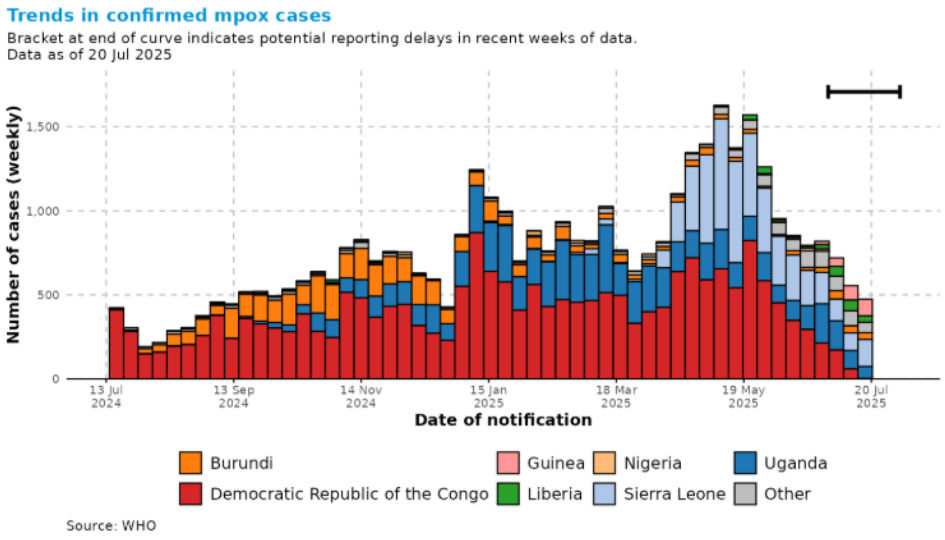
From 1 January to 20 July 2025, 24 countries in Africa have reported 28 152 confirmed mpox cases, including 133 deaths (CFR 0.5%). Twenty-one countries on the continent have reported ongoing active transmission of mpox in the last six weeks (Figure 3).

Figure 5. Geographic distribution of confirmed mpox cases in the past six weeks, Africa, 9 June – 20 July 2025



Overall, there is a declining epidemic trend in confirmed cases in recent weeks (Figure 6), largely driven by a decrease in Sierra Leone and the Democratic Republic of the Congo. The slight increase in weekly cases that had been reported by Burundi and Uganda in the previous edition of this report appears to have been short-lived, with a downward trend reported in the most recent weeks. More details on national case trends are available in the WHO Global mpox trends.

Figure 6. Reported confirmed mpox cases in Africa in the past 12 months, by country, 13 July 2024 – 20 July 2025



Focus on selected countries

Mozambique

On 11 July 2025, the Ministry of Health of Mozambique declared an mpox outbreak in the Lago district of the northwestern Niassa Province, following the laboratory confirmation of the first three cases at the Niassa public health laboratory. As of 20 July 2025, Mozambique had reported 13 confirmed cases of mpox.

Two of the first three confirmed cases are among truck driving personnel working at a mining site in Lago and the third case is a contact of one of these cases. One of these truck driving personnel, upon developing symptoms in early July 2025, traveled to Likoma island in Malawi seeking medical care. Following detection by health authorities in Malawi, the case was notified as a suspected mpox case to Mozambican health authorities through cross-border coordination mechanisms.

On 8 July 2025, a rapid response team was deployed to Lago district to support investigations and sample collection. Testing conducted on 10 July at the Niassa Public Health Laboratory returned positive RT-PCR results for mpox in all three individuals. Genomic sequencing conducted on 18 July at the Maputo National Public Health Laboratory identified clade Ib MPXV in these initial cases.

Niassa is one of the three northern provinces of Mozambique affected by a complex humanitarian crisis, driven by armed conflict, social unrest, and repeated natural disasters (cyclones), causing internal and cross-border displacements to neighboring countries (mainly Malawi and Tanzania). The province is also facing concurrent public health emergencies, including outbreaks of cholera and measles. Lago is one of the 16 districts of Niassa where the mine is situated, approximately 150 km from Lichinga (capital of Niassa province). The mine is operated by artisanal miners from multiple countries, including Mozambique, Malawi, Tanzania and China, who occasionally travel from the mining site back to their home countries.

Prior to this, only one confirmed mpox case had been reported in 2022 in Mozambique, in an adult female with a history of international travel to a clade IIb-affected country. The current event, therefore, marks the first instance of clade Ib MPXV detection and local community transmission of mpox in Mozambique.

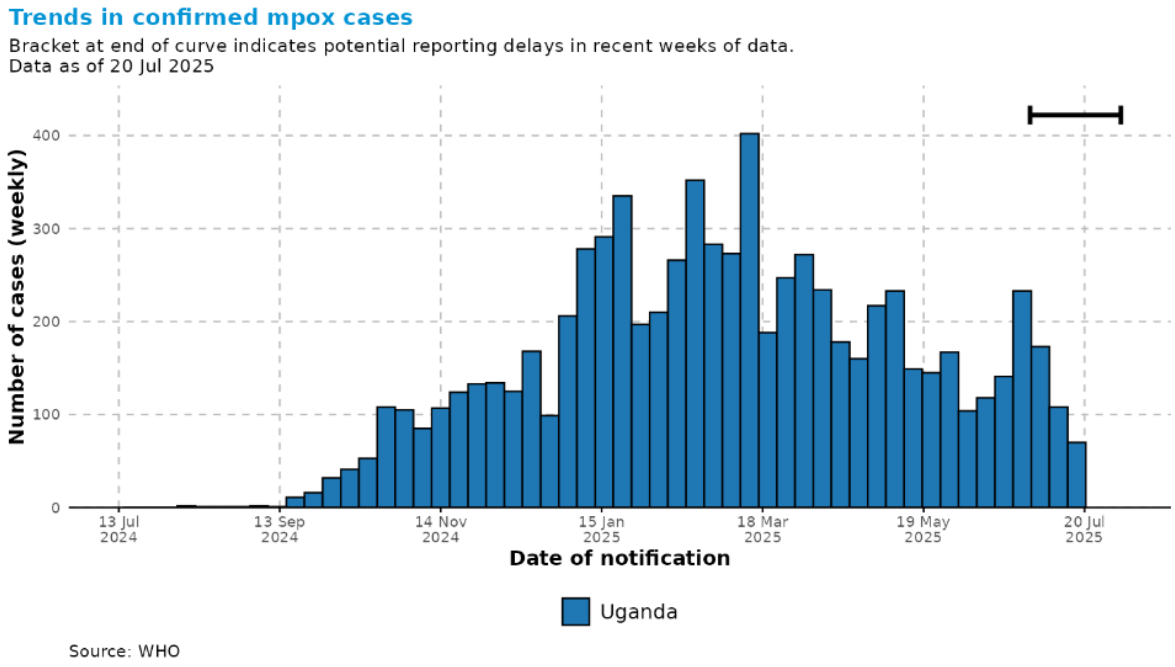
The humanitarian context noted above brings additional challenges for detection and control of mpox – as witnessed in other settings – requiring specific attention.

Uganda

Since the start of the outbreak in July 2024, and as of 20 July 2025, Uganda has reported 7582 confirmed cases, including 48 deaths (CFR – 0.6%). To date, only clade Ib MPXV has been detected in the country. Uganda continues to experience community transmission, reporting the third-highest number of laboratory-confirmed cases in the continent in the past six weeks (843 confirmed cases), after the Democratic Republic of the Congo and Sierra Leone. Notably, since March 2025, the country has been observing an overall downward trend in weekly confirmed cases (Figure 7), similar to what has been observed in other high-burden countries like the Democratic Republic of the Congo, Sierra Leone, and Burundi. The slight increase in weekly cases that had been reported by the country in the previous edition of this report, linked to a resurgence in some regional cities, appears to have been short-lived, with a decline in weekly confirmed cases reported over the last three weeks.

Cumulatively, cases have been reported in 82% (120 out of 146) of districts in the country. The epidemic was initially concentrated in and around the capital, Kampala, but there has been a growing mpox burden in regional cities like Wakiso, Hoima, and Masaka, which observed a resurgence in recent weeks. Young adults of both sexes remain the most affected age group, with most cases reported among those aged 20 – 29 years old. Of the deaths among confirmed cases, 48% were among people living with HIV.

Figure 7. Confirmed mpox cases reported in Uganda over the past 12 months, 13 July 2024 – 20 July 2025



Countries reporting mpox for the first time

Since the last edition of this report, the Gambia has reported mpox for the first time. The case, a young adult female, was detected on 18 July 2025. Genomic sequence analysis has identified clade IIb MPXV. Health authorities in the country have reported that several response activities, including activation of national response coordination mechanisms, active case search, contact tracing, and community engagement to contain spread are ongoing.

Countries reporting new importations of clade Ib MPXV

Since the last situation report, three countries have reported importations of clade Ib MPXV:

- Australia: On 19 July 2025, Australia notified WHO of two cases of mpox due to clade Ib MPXV. One case reported a recent history of international travel to Uganda, while the other case was a household contact of the traveler. Health authorities in the country have implemented contact tracing and other response measures and continue to monitor the situation closely.
- The United Kingdom: On 22 July 2025, the United Kingdom notified WHO of one case of mpox due to clade Ib MPXV. The case is an adult male who reported recent travel to Kenya. Health authorities in the country have undertaken contact tracing, given contacts the appropriate public health advice, offered vaccination to those eligible, and are monitoring the contacts for mpox symptoms.

Clade Ib MPXV in China

As previously reported, China has notified WHO of several clade Ib MPXV clusters among travelers and their contacts in recent weeks. In response, WHO convened a meeting with the International Health Regulations National Focal Point (IHR NFP) and representatives from the Chinese Center for Disease Control and Prevention (China CDC) and the Guangdong Provincial Center for Disease Control and Prevention to review the epidemiological situation.

During the meeting, China CDC and Guangdong Provincial CDC presented detailed findings of the comprehensive investigations conducted for each clade Ib MPXV detection, including both retrospective and prospective contact tracing, as well as serological confirmation of cases that were no longer symptomatic and for whom evidence of viral presence could no longer be found by PCR. In all identified clusters, the index case could be epidemiologically linked to a traveler, either from a country reporting active clade Ib MPXV transmission or from a country not currently reporting transmission (Nepal).

Based on this evidence, WHO has revised the classification of clade Ib MPXV transmission in China from “Unknown” to “Cases linked to travel”. Nonetheless, the possibility of undetected transmission cannot be ruled out. It was noted that in several instances, the first detected (index) case within a cluster was not the traveler but a secondary or tertiary contact, highlighting the importance of timely detection and case investigation. Several of these cases were among foreign nationals from the African diaspora living in China.

China CDC has implemented wastewater surveillance for mpox in the most affected areas and has disseminated public health communication materials to clinicians and pharmacies, where symptomatic individuals may present for self-medication.

Global operational updates

In line with the health emergency prevention, preparedness, response and resilience (HEPR) framework, the Strategic Framework for enhancing prevention and control of mpox (2024-2027) and the WHO Global Strategic Preparedness and Response Plan (SPRP), WHO is responding to mpox outbreak focusing on strengthening five core components—the **5Cs**: Emergency coordination, Collaborative surveillance, Community protection, Safe and scalable care, Access to and delivery of countermeasures.

This section provides updates on the WHO global mpox response **as of 23 July 2025.**

1. **Emergency coordination**

- WHO and Africa CDC coordination for mpox response in Africa continues through the Continental Incident Management Support Team.
- WHO is actively coordinating response efforts with partners, including the Global Outbreak Alert and Response Network (GOARN). As of 21 July 2025, 15 experts are deployed to the Democratic Republic of Congo and Kenya, through GOARN, to support the response in areas such as data management and analytics, epidemiology and surveillance, laboratory, case management, infection prevention and control, risk communication and community engagement. More information on deployments can be found here.

2. **Collaborative surveillance**

- Updates to epidemiological data on mpox in Africa continue weekly, updates to global epidemiological data continue monthly, and both can be accessed in the online WHO dashboard.
- Coordination for laboratory diagnostics continues, with all partners supporting countries and across the three levels of the WHO, through the laboratory response pillar of the Africa continental Incident Management Support Team and monthly diagnostic consortium meetings.

3. **Community protection**

- Coordination across multiple technical areas including risk communication and community engagement, infodemic management, community-based infection prevention and control is ongoing. Community service delivery, public health and social measures, border health and mass gatherings, investigation of the animal-human interface and multisectoral action for social and economic protection are key areas of work.
- WHO held a third community of practice call, engaging Member States, operational partners, civil society and academia to explore strategies for strengthening the research ecosystem that supports producing rapid community evidence in the mpox public health response.

4. **Safe and scalable care**

- WHO continues to support for the uptake of data collection tools to facilitate mpox clinical characterization using the WHO Global Clinical Platform. These include openly available tools developed in Research Electronic Data Capture (REDCap) and Open Data Kit (ODK) data platforms. These are in use to understand the epidemic in Africa, particularly in the Democratic Republic of the Congo, Sierra Leone, Uganda, and Zambia.
- WHO organized an EPI-WIN webinar on 23 June 2025 to disseminate information on its updated guidelines on clinical management and infection prevention and control for mpox. The webinar was attended by 965 participants and topics covered included improved recommendations on supportive care, home-based management, protective measures for healthcare workers, and special considerations for populations with HIV, breastfeeding infants, and those at risk of complications.
- WHO published a strategic guidance document to implement actions for infection prevention and control and water, sanitation and hygiene during mpox outbreak response. The strategic actions aim to support countries in developing and implementing comprehensive IPC and WASH response plans in both healthcare facilities and community settings.

5. **Access to and delivery of countermeasures**
   Access and Allocation Mechanism (AAM)

Vaccines

- WHO continues to provide guidance and technical support to countries on mpox targeted vaccination strategies with focus on geographic areas with the highest number of new cases and in those, people at high risk of exposure based on local epidemiology.
- Mpox vaccination activities have started in eight countries with MVA-BN vaccine (the Central African Republic, Democratic Republic of the Congo, Liberia, Nigeria, Rwanda, Sierra Leone, South Africa and Uganda), most of them are implementing a single-dose strategy targeting population groups at high risk of exposure. More than 869 000 MVA-BN vaccine doses have been administered, of which more than 69% in Democratic Republic of the Congo. Other countries that recently reported mpox are developing their national mpox vaccination plans. Funding is needed to facilitate access to additional MVA-BN vaccine doses.
- WHO AFRO and Africa CDC co-organized an mpox vaccination stock-taking meeting in Addis Ababa, Ethiopia from 16 - 17 July 2025. Fifteen countries participated in the discussions which focused on optimization of targeted country mpox vaccination strategies, dose-sparing options, and lessons learned.
- The AAM partners continue to work together to ensure countries receive guidance as well as support to secure operational funds for implementation of national mpox vaccination plans.

Mpox main resources

Mpox outbreak toolkit

- 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

- 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/
- Strategic framework for enhancing prevention and control of mpox (2024-2027). May 2024. Available at: https://www.who.int/publications/i/item/9789240092907

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

- Fourth meeting of the International Health Regulations (2005) Emergency Committee regarding the upsurge of mpox 2024 – Temporary recommendations https://www.who.int/news/item/09-06-2025-fourth-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-upsurge-of-mpox-2024-temporary-recommendations

Surveillance

- Surveillance, case investigation and contact tracing for mpox: Interim guidance, 6 December 2024. https://www.who.int/publications/i/item/B09169

Laboratory and diagnostics

- Diagnostic testing and testing strategies for mpox: interim guidance, 12 November 2024 https://www.who.int/publications/i/item/B09166

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 .

Vaccination

- 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
- WHO Smallpox and mpox vaccines. 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

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

- Interim guidance on social and behavioural research for the mpox public health response, March 2025. https://iris.who.int/handle/10665/380881

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/infectiousdiseases/503162/Mpox
- OpenWHO. Online training module. Monkeypox: Introduction (2020) in English and French: https://openwho.org/infectiousdiseases/503162/Mpox
- OpenWHO. Extended training. Monkeypox epidemiology, preparedness and response (2021) in English and French: https://openwho.org/infectiousdiseases/503162/Mpox
- OpenWHO. Mpox and the 2022-2023 global outbreak (2023)
  - English: https://openwho.org/infectiousdiseases/503162/Mpox

A more exhaustive list of mpox resources can be found here.

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.